17.1008.04000

FISCAL NOTE

Requested by Legislative Council
03/28/2017

Amendment to: HB 1436

1 A. **State fiscal effect:** *Identify the state fiscal effect and the fiscal effect on agency appropriations compared to funding levels and appropriations anticipated under current law.*

	2015-2017 Biennium		2017-2019 Biennium		2019-2021 Biennium	
	General Fund	Other Funds	General Fund	Other Funds	General Fund	Other Funds
Revenues						
Expenditures		$80,000	$1,561,006	$1,787,273	$1,561,006	$1,967,273
Appropriations			$1,561,006	$1,707,273	$1,561,006	$1,707,273

1 B. **County, city, school district and township fiscal effect:** *Identify the fiscal effect on the appropriate political subdivision.*

	2015-2017 Biennium	2017-2019 Biennium	2019-2021 Biennium
Counties		$409,098	$409,098
Cities		$341,798	$341,798
School Districts		$207,729	$207,729
Townships			

2 A. **Bill and fiscal impact summary:** *Provide a brief summary of the measure, including description of the provisions having fiscal impact (limited to 300 characters).*

A bill to require the NDPERS Health Plan to be self-insured instead of fully insured.

B. **Fiscal impact sections:** *Identify and provide a brief description of the sections of the measure which have fiscal impact. Include any assumptions and comments relevant to the analysis.*

Section 5 of the bill required the NDPERS Health Plan be self-insured as of January 2018.

3. **State fiscal effect detail:** *For information shown under state fiscal effect in 1A, please:*

A. **Revenues:** *Explain the revenue amounts. Provide detail, when appropriate, for each revenue type and fund affected and any amounts included in the executive budget.*

N/A

B. **Expenditures:** *Explain the expenditure amounts. Provide detail, when appropriate, for each agency, line item, and fund affected and the number of FTE positions affected.*

Expenditures are associated with consulting services to assist with the preparation, distribution, analysis, actuarial and other work efforts associated with a full bid process identified in the NDCC. Last time PERS used an actuarial/ technical consultant and Pharmacy consultant. The cost for the actuarial/technical consultant was about $200,000 and the pharmacy consultant approximately $60,000. Since the proposed bid is less complex the actuarial/technical review is estimated at $100,000 in 2017, for a total cost of $160,000. The bid would start spring of 2017. A full bid would be required after four years in 2021 at an approximate cost of $260,000.

PERS would request contingent appropriation authority and 2 FTE so a self-insured plan could be fully considered. PERS has included this in its budget request for the last full bid and the renewal in case the plan moved from fully insured to self insured. Requested dollars needed for this is $428,139 per biennium.

The prior fiscal note had a 2.00% premium increase. The changes result in a 0.58% premium increase needed to build the required contingency reserves required in NDCC 54-52.1-04.3. This would be $7.36 per active contract per month ($1,561,006 general fund and $1,279,134 other funds).

C. **Appropriations:** *Explain the appropriation amounts. Provide detail, when appropriate, for each agency and fund affected. Explain the relationship between the amounts shown for expenditures and appropriations. Indicate whether the appropriation or a part of the appropriation is included in the executive budget or relates to a continuing appropriation.*

The appropriations are not included in the executive budget. PERS would request contingent appropriation authority and 2 FTE so a self-insured plan could be fully implemented. PERS has included this in its budget request for the last full bid and the renewal in case the plan moved from fully insured to self-insured. Requested dollars needed for this is $428,139 per biennium.

The prior fiscal note had a 2.00% premium increase. The changes result in a 0.58% premium increase needed to build the required contingency reserves required in NDCC 54-52.1-04.3. This would be $7.36 per active contract per month ($1,561,006 general fund and $1,279,134 other funds).

Name: Bryan Reinhardt

Agency: NDPERS

Telephone: 701-328-3919

Date Prepared: 03/13/2017

2017-2019	NDPERS Health Plan			**$7.36**		
		Executive Budget				
		2017-2019	Monthly	15-17 Funding Adjustments		
	Department	FTE	Change	General	Other	Total
101	Office of the Governor	18.00	$7.36	$3,179.52	$0.00	$3,179.52
108	Office of the Secretary of State	33.00	$7.36	$5,652.73	$176.39	$5,829.12
110	Office of Management and Budget	119.00	$7.36	$17,280.82	$3,739.34	$21,020.16
112	Information Technology Department	349.30	$7.36	$11,027.20	$50,673.16	$61,700.35
117	Office of the State Auditor	53.80	$7.36	$7,211.16	$2,292.07	$9,503.23
120	Office of the State Treasurer	8.00	$7.36	$1,413.12	$0.00	$1,413.12
125	Office of the Attorney General	234.00	$7.36	$37,865.41	$3,468.35	$41,333.76
127	Office of the Sate Tax Commissioner	133.00	$7.36	$23,493.12	$0.00	$23,493.12
140	Office of Administrative Hearings	5.00	$7.36	$0.00	$883.20	$883.20
150	Legislative Assembly	141.00	$7.36	$24,906.24	$0.00	$24,906.24
160	Legislative Council	36.00	$7.36	$6,359.04	$0.00	$6,359.04
180	Judicial Branch	354.50	$7.36	$62,618.88	$0.00	$62,618.88
188	Legal Counsel of Indigents	40.00	$7.36	$6,894.53	$171.07	$7,065.60
190	Retirement and Investment Office	19.00	$7.36	$0.00	$3,356.16	$3,356.16
192	Public Employees Retirement System	34.50	$7.36	$0.00	$6,094.08	$6,094.08
201	Department of Public Instruction	97.75	$7.36	$5,329.55	$11,937.01	$17,266.56
226	Department of Trust Lands	32.00	$7.36	$3,957.22	$1,695.26	$5,652.48
250	State Library	29.75	$7.36	$0.00	$5,255.04	$5,255.04
252	School for the Deaf	45.61	$7.36	$3,107.92	$4,948.63	$8,056.55
253	N.D. Vision Services	29.50	$7.36	$2,273.97	$2,936.91	$5,210.88
270	Dept of Career and Technical Ed	25.50	$7.36	$1,908.15	$2,596.17	$4,504.32
215	ND University System	148.40	$7.36	$6,858.71	$19,354.66	$26,213.38
227	Bismarck State College	358.35	$7.36	$15,520.90	$47,778.04	$63,298.94
228	Lake Region State College	129.61	$7.36	$5,612.72	$17,281.59	$22,894.31
229	Willliston State College	100.75	$7.36	$8,796.45	$9,000.03	$17,796.48
230	University of North Dakota	2218.07	$7.36	$218,552.26	$173,247.63	$391,799.88
232	UND Medical Center	435.75	$7.36	$25,335.67	$51,635.21	$76,970.88
235	North Dakota State University	1895.66	$7.36	$146,148.23	$188,701.15	$334,849.38
238	ND State College of Science	345.04	$7.36	$29,616.95	$31,330.92	$60,947.87
239	Dickinson State University	168.90	$7.36	$13,950.33	$15,884.17	$29,834.50
240	Mayville State University	210.53	$7.36	$37,188.02	$0.00	$37,188.02
241	Minot State University	441.65	$7.36	$68,119.29	$9,893.77	$78,013.06
242	Valley City State University	202.75	$7.36	$34,773.15	$1,040.61	$35,813.76
243	Dakota College Bottineau	84.30	$7.36	$14,878.40	$12.35	$14,890.75
244	ND Forest Service	27.00	$7.36	$4,769.28	$0.00	$4,769.28
301	North Dakota Department of Health	381.00	$7.36	$34,800.98	$32,498.86	$67,299.84
305	Tobacco Prevention	0.00	$7.36	$0.00	$0.00	$0.00
313	Veterans Home	120.72	$7.36	$7,272.66	$14,051.32	$21,323.98
316	Indian Affairs Commission	4.00	$7.36	$706.56	$0.00	$706.56
321	Department of Veterans Affairs	9.00	$7.36	$1,380.23	$209.53	$1,589.76
325	Department of Human Services	2204.23	$7.36	$326,679.16	$62,676.03	$389,355.19
360	Protection and Advocacy Project	27.50	$7.36	$4,857.60	$0.00	$4,857.60
380	Job Service North Dakota	181.61	$7.36	$214.93	$31,864.66	$32,079.59
401	Office of the Insurance Commissioner	47.00	$7.36	$0.00	$8,302.08	$8,302.08
405	Industrial Commission	105.25	$7.36	$17,477.04	$1,114.32	$18,591.36
406	Office of the Labor Commissioner	14.00	$7.36	$2,472.96	$0.00	$2,472.96
408	Public Service Commission	45.00	$7.36	$4,827.79	$3,121.01	$7,948.80
412	Aeronautics Commission	7.00	$7.36	$0.00	$1,236.48	$1,236.48
413	Department of Financial Institutions	30.00	$7.36	$0.00	$5,299.20	$5,299.20
414	Office of the Securities Commissioner	9.00	$7.36	$0.00	$1,589.76	$1,589.76
471	Bank of North Dakota	181.50	$7.36	$0.00	$32,060.16	$32,060.16
473	North Dakota Housing Finance Agency	46.00	$7.36	$0.00	$8,125.44	$8,125.44
475	North Dakota Mill & Elevator Association	153.00	$7.36	$0.00	$27,025.92	$27,025.92
485	Workforce Safety & Insurance	260.14	$7.36	$0.00	$45,951.13	$45,951.13
504	Highway Patrol	206.00	$7.36	$29,079.99	$7,307.85	$36,387.84
530	Department of Corrections and Rehabilitation	846.29	$7.36	$139,840.39	$9,648.28	$149,488.67
540	Adjutant General	234.00	$7.36	$16,578.99	$24,754.77	$41,333.76
601	Department of Commerce	66.40	$7.36	$9,183.23	$2,545.67	$11,728.90
602	Department of Agriculture	75.00	$7.36	$7,279.71	$5,968.29	$13,248.00
627	Upper Great Plains Transportation Institute	43.88	$7.36	$1,951.05	$5,799.92	$7,750.96
628	Branch Research Centers	110.29	$7.36	$14,224.33	$5,257.29	$19,481.63
630	NDSU Extension Service	252.98	$7.36	$22,771.51	$21,914.88	$44,686.39
638	Northern Crops Institute	11.80	$7.36	$1,761.48	$322.87	$2,084.35
640	NDSU Main Research Center	336.12	$7.36	$38,321.43	$21,050.81	$59,372.24
649	Agronomy Seed Farm	3.00	$7.36	$0.00	$529.92	$529.92
670	Racing Commission	2.00	$7.36	$353.28	$0.00	$353.28
701	State Historical Society	77.00	$7.36	$12,437.89	$1,163.39	$13,601.28
709	Council on the Arts	5.00	$7.36	$883.20	$0.00	$883.20
720	Game & Fish Department	163.00	$7.36	$0.00	$28,792.32	$28,792.32
750	Department of Parks & Recreation	65.00	$7.36	$11,050.96	$430.64	$11,481.60
770	State Water Commission	96.00	$7.36	$0.00	$16,957.44	$16,957.44
801	Department Of Transportation	1054.01	$7.36	$0.00	$186,180.33	$186,180.33
	State Total	**16078.69**	$7.36	**$1,561,006**	**$1,279,134**	**$2,840,140**

17.1008.03000

FISCAL NOTE

Requested by Legislative Council
03/09/2017

Revised
Bill/Resolution No.: HB 1436

1 A. **State fiscal effect:** *Identify the state fiscal effect and the fiscal effect on agency appropriations compared to funding levels and appropriations anticipated under current law.*

	2015-2017 Biennium		2017-2019 Biennium		2019-2021 Biennium	
	General Fund	Other Funds	General Fund	Other Funds	General Fund	Other Funds
Revenues						
Expenditures		$80,000	$5,378,385	$4,915,588	$5,378,685	$5,095,588
Appropriations			$5,378,685	$4,835,588	$5,378,685	$4,835,588

1 B. **County, city, school district and township fiscal effect:** *Identify the fiscal effect on the appropriate political subdivision.*

	2015-2017 Biennium	2017-2019 Biennium	2019-2021 Biennium
Counties		$1,409,610	$1,409,610
Cities		$1,177,718	$1,177,718
School Districts		$715,761	$715,761
Townships			

2 A. **Bill and fiscal impact summary:** *Provide a brief summary of the measure, including description of the provisions having fiscal impact (limited to 300 characters).*

A bill to require the NDPERS Health Plan to be self-insured instead of fully insured.

B. **Fiscal impact sections:** *Identify and provide a brief description of the sections of the measure which have fiscal impact. Include any assumptions and comments relevant to the analysis.*

Section 5 of the bill required the NDPERS Health Plan be self-insured as of January 2018.

3. **State fiscal effect detail:** *For information shown under state fiscal effect in 1A, please:*

A. **Revenues:** *Explain the revenue amounts. Provide detail, when appropriate, for each revenue type and fund affected and any amounts included in the executive budget.*

N/A

B. **Expenditures:** *Explain the expenditure amounts. Provide detail, when appropriate, for each agency, line item, and fund affected and the number of FTE positions affected.*

Expenditures are associated with consulting services to assist with the preparation, distribution, analysis, actuarial and other work efforts associated with a full bid process identified in the NDCC. Last time PERS used an actuarial/ technical consultant and Pharmacy consultant. The cost for the actuarial/technical consultant was about $200,000 and the pharmacy consultant approximately $60,000. Since the proposed bid is less complex the actuarial/technical review is estimated at $100,000 in 2017, for a total cost of $160,000. The bid would start spring of 2017. A full bid would be required after four years in 2021 at an approximate cost of $260,000.

PERS would request contingent appropriation authority and 2 FTE so a self-insured plan could be fully considered. PERS has included this in its budget request for the last full bid and the renewal in case the plan moved from fully insured to self insured. Requested dollars needed for this is $428,139 per biennium.

A 2.00% premium increase would be needed to build the required contingency reserves required in NDCC 54-52.1-04.3. This would be $25.36 per active contract per month ($5,378,685 general fund and $4,407,449 other funds).

C. **Appropriations:** *Explain the appropriation amounts. Provide detail, when appropriate, for each agency and fund affected. Explain the relationship between the amounts shown for expenditures and appropriations. Indicate whether the appropriation or a part of the appropriation is included in the executive budget or relates to a continuing appropriation.*

The appropriations are not included in the executive budget. PERS would request contingent appropriation authority and 2 FTE so a self-insured plan could be fully implemented. PERS has included this in its budget request for the last full bid and the renewal in case the plan moved from fully insured to self-insured. Requested dollars needed for this is $428,139 per biennium.

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Name: Bryan Reinhardt

Agency: NDPERS

Telephone: 701-328-3919

Date Prepared: 03/13/2017

2017-2019	NDPERS Health Plan			**$25.36**		
		Executive Budget				
		2017-2019	Monthly	15-17 Funding Adjustments		
	Department	FTE	Change	General	Other	Total
101	Office of the Governor	18.00	$25.36	$10,955.52	$0.00	$10,955.52
108	Office of the Secretary of State	33.00	$25.36	$19,477.34	$607.78	$20,085.12
110	Office of Management and Budget	119.00	$25.36	$59,543.70	$12,884.46	$72,428.16
112	Information Technology Department	349.30	$25.36	$37,995.88	$174,602.07	$212,597.95
117	Office of the State Auditor	53.80	$25.36	$24,847.16	$7,897.67	$32,744.83
120	Office of the State Treasurer	8.00	$25.36	$4,869.12	$0.00	$4,869.12
125	Office of the Attorney General	234.00	$25.36	$130,471.04	$11,950.72	$142,421.76
127	Office of the Sate Tax Commissioner	133.00	$25.36	$80,949.12	$0.00	$80,949.12
140	Office of Administrative Hearings	5.00	$25.36	$0.00	$3,043.20	$3,043.20
150	Legislative Assembly	141.00	$25.36	$85,818.24	$0.00	$85,818.24
160	Legislative Council	36.00	$25.36	$21,911.04	$0.00	$21,911.04
180	Judicial Branch	354.50	$25.36	$215,762.88	$0.00	$215,762.88
188	Legal Counsel of Indigents	40.00	$25.36	$23,756.17	$589.43	$24,345.60
190	Retirement and Investment Office	19.00	$25.36	$0.00	$11,564.16	$11,564.16
192	Public Employees Retirement System	34.50	$25.36	$0.00	$20,998.08	$20,998.08
201	Department of Public Instruction	97.75	$25.36	$18,363.76	$41,130.80	$59,494.56
226	Department of Trust Lands	32.00	$25.36	$13,635.20	$5,841.28	$19,476.48
250	State Library	29.75	$25.36	$0.00	$18,107.04	$18,107.04
252	School for the Deaf	45.61	$25.36	$10,708.81	$17,051.26	$27,760.07
253	N.D. Vision Services	29.50	$25.36	$7,835.33	$10,119.55	$17,954.88
270	Dept of Career and Technical Ed	25.50	$25.36	$6,574.83	$8,945.49	$15,520.32
215	ND University System	148.40	$25.36	$23,632.73	$66,689.44	$90,322.18
227	Bismarck State College	358.35	$25.36	$53,479.63	$164,626.52	$218,106.14
228	Lake Region State College	129.61	$25.36	$19,339.48	$59,546.35	$78,885.83
229	Willliston State College	100.75	$25.36	$30,309.50	$31,010.98	$61,320.48
230	University of North Dakota	2218.07	$25.36	$753,055.07	$596,951.06	$1,350,006.12
232	UND Medical Center	435.75	$25.36	$87,297.91	$177,916.97	$265,214.88
235	North Dakota State University	1895.66	$25.36	$503,575.97	$650,198.54	$1,153,774.50
238	ND State College of Science	345.04	$25.36	$102,049.69	$107,955.45	$210,005.15
239	Dickinson State University	168.90	$25.36	$48,067.98	$54,731.32	$102,799.30
240	Mayville State University	210.53	$25.36	$128,136.98	$0.00	$128,136.98
241	Minot State University	441.65	$25.36	$234,715.38	$34,090.48	$268,805.86
242	Valley City State University	202.75	$25.36	$119,816.19	$3,585.57	$123,401.76
243	Dakota College Bottineau	84.30	$25.36	$51,265.80	$42.55	$51,308.35
244	ND Forest Service	27.00	$25.36	$16,433.28	$0.00	$16,433.28
301	North Dakota Department of Health	381.00	$25.36	$119,912.07	$111,979.77	$231,891.84
305	Tobacco Prevention	0.00	$25.36	$0.00	$0.00	$0.00
313	Veterans Home	120.72	$25.36	$25,059.07	$48,415.95	$73,475.02
316	Indian Affairs Commission	4.00	$25.36	$2,434.56	$0.00	$2,434.56
321	Department of Veterans Affairs	9.00	$25.36	$4,755.78	$721.98	$5,477.76
325	Department of Human Services	2204.23	$25.36	$1,125,622.74	$215,959.80	$1,341,582.55
360	Protection and Advocacy Project	27.50	$25.36	$16,737.60	$0.00	$16,737.60
380	Job Service North Dakota	181.61	$25.36	$740.56	$109,794.55	$110,535.11
401	Office of the Insurance Commissioner	47.00	$25.36	$0.00	$28,606.08	$28,606.08
405	Industrial Commission	105.25	$25.36	$60,219.80	$3,839.56	$64,059.36
406	Office of the Labor Commissioner	14.00	$25.36	$8,520.96	$0.00	$8,520.96
408	Public Service Commission	45.00	$25.36	$16,634.87	$10,753.93	$27,388.80
412	Aeronautics Commission	7.00	$25.36	$0.00	$4,260.48	$4,260.48
413	Department of Financial Institutions	30.00	$25.36	$0.00	$18,259.20	$18,259.20
414	Office of the Securities Commissioner	9.00	$25.36	$0.00	$5,477.76	$5,477.76
471	Bank of North Dakota	181.50	$25.36	$0.00	$110,468.16	$110,468.16
473	North Dakota Housing Finance Agency	46.00	$25.36	$0.00	$27,997.44	$27,997.44
475	North Dakota Mill & Elevator Association	153.00	$25.36	$0.00	$93,121.92	$93,121.92
485	Workforce Safety & Insurance	260.14	$25.36	$0.00	$158,331.61	$158,331.61
504	Highway Patrol	206.00	$25.36	$100,199.54	$25,180.30	$125,379.84
530	Department of Corrections and Rehabilitation	846.29	$25.36	$481,841.33	$33,244.62	$515,085.95
540	Adjutant General	234.00	$25.36	$57,125.43	$85,296.33	$142,421.76
601	Department of Commerce	66.40	$25.36	$31,642.20	$8,771.49	$40,413.70
602	Department of Agriculture	75.00	$25.36	$25,083.36	$20,564.64	$45,648.00
627	Upper Great Plains Transportation Institute	43.88	$25.36	$6,722.62	$19,984.50	$26,707.12
628	Branch Research Centers	110.29	$25.36	$49,012.10	$18,114.80	$67,126.91
630	NDSU Extension Service	252.98	$25.36	$78,462.69	$75,511.06	$153,973.75
638	Northern Crops Institute	11.80	$25.36	$6,069.46	$1,112.49	$7,181.95
640	NDSU Main Research Center	336.12	$25.36	$132,042.32	$72,533.75	$204,576.08
649	Agronomy Seed Farm	3.00	$25.36	$0.00	$1,825.92	$1,825.92
670	Racing Commission	2.00	$25.36	$1,217.28	$0.00	$1,217.28
701	State Historical Society	77.00	$25.36	$42,856.64	$4,008.64	$46,865.28
709	Council on the Arts	5.00	$25.36	$3,043.20	$0.00	$3,043.20
720	Game & Fish Department	163.00	$25.36	$0.00	$99,208.32	$99,208.32
750	Department of Parks & Recreation	65.00	$25.36	$38,077.75	$1,483.85	$39,561.60
770	State Water Commission	96.00	$25.36	$0.00	$58,429.44	$58,429.44
801	Department Of Transportation	1054.01	$25.36	$0.00	$641,512.65	$641,512.65
	State Total	**16078.69**	$25.36	**$5,378,685**	**$4,407,449**	**$9,786,134**

2017 HOUSE INDUSTRY, BUSINESS AND LABOR

HB 1436

2017 HOUSE STANDING COMMITTEE MINUTES

Industry, Business and Labor Committee
Peace Garden Room, State Capitol

HB 1436
3/14/2017
29263

☐ Subcommittee
☐ Conference Committee

Ellen LeTang

Explanation or reason for introduction of bill/resolution:

Employee benefits program committee, public employee uniform group insurance health benefits coverage & provide for a retirement board line of credit.

Minutes: Attachment 1, 2, 3

Chairman Keiser: Opens the hearing of HB 1436.

Al Carlson ~ District 41- South Fargo: Attachment 1. Your house passed out HB 1406 & 1407 with significant amendments as to the changing of the board & the committee structure for the operation of PERS. This is none of those. Below will be key points from his testimony.

This is self-funded public employee health insurance plan that sets the state for the future for health benefits for the future. This is by far, 49 out of the 50 states has some version of a self-funded plan.

It is time. We tried it once in the past & the legislature at that point in time was not willing to put money into the reserves because it probably an opportunity for the premiums to not cover the claims to begin with as you go through this. This bill takes care of that.

It simply means that insurance is not purchased but rather the state insurance contributions are pooled into state owned reserve fund to pay claims, administrative expenses & any money that isn't used to pay claims or administrative expenses, stay in the fund.

In a fully insured state plan, the state will pay premiums based projected claims. In the last biennium it's amazingly high about what those total claims were. Claims paid were 255 million dollars.

The key is, what is the value of self-funding? Is there a benefit for the state to do this in the long run? These are not our dollars; these are the tax payer's dollars. We made a commitment years ago to our state employees when we didn't offer raised, that we would stay 100% funded on their health insurance. The governor came over & asked, why didn't you take off 5% dissipation by the public employees.

What this bill does is doesn't change anybody's benefits during the next biennium but it does change on a designated date, which would be the first day of the year in 2018, it will change ours to a self-funded plan.

The key is, how does it work & what happens to these 477 million dollars' worth of premiums we pay as a state; which 220 million dollars of premiums are general fund dollars. What happens to those, how does this work & the benefit down the road. This bill is going to have reinsurance.

At this time, there is a health insurance tax of 2.5% which applies to a fully insurance plan & does not apply to a self-insured plan. Do the math on what we are paying on that tax as well & it's about 11 million dollars.

This bill is also going to require that there is reinsurance to make sure that our catastrophic loss is covered. It also has a fee that is allowed when the bids that are put out to reimburse the person who is going to do the claims for us.

This is the end result that is affordable for the state as we go into the future. If you read the bill, it does not cut our benefits.

Section 5, page 6 of the bill, it says may not shall. The same plan & benefits coverage. Also, the retirement board shall use available monies that fund created, the reserve fund which has about 36 million dollars in it of which 18 million dollars of that was taken to buy down our premium.

Lines 14-23 above, we have the Bank of ND to back us up if we do exceed our premium in the short term. **(See attachments & the bill for further details).**

If we extend the contract for 6 more months, is that time to bid that new self-insurance plan? Whoever bids it, the records are available what our claims history is. I'm not sure what the response would be by those people involved but I anticipate whether they will find the problem. That problem I believe should be able to be handle by those people who effectively did that in that amount of period of time.

Instead of a 6-year contract it's a 4-year contract with a 2-year renewal or it could be rebid if the board calls for that. This does not strip the board's ability to control but it directs the retirement board to use the reserve fund & talks about the affect to what happens to a bill during the session.

Our rules now, our employee benefits standing committee, has to receive or take possession of that various bill & it can be taken away from the policy committee. This bill says that they have control of those issues if we are not in session but when we are in session, the policy committee that it is assigned to has possession of that bill will have control. That is a procedural change. Now, the whole legislative body has the opportunity through this committee in bringing it before the floor to vote on those issues. It's not meant to strip the authority but to involve us, the policy & spending branch into this process.

The executive recommendation was for $112.49 a month premium & this is a combined rate. It also talks about the 18 million that would be taken from our reserve funds. This has gone from $400 premium in 2001 to a $1,249 premium in 2017-2019.

This is an issue that we must address. This doesn't take away everybody's benefits; it means we control our own destiny. We don't know what the repeal is for the Affordable Care Act because we need to know what effect that will have on us & we need to be able to control our destiny on this.

If this is successful, our temp would also be not to take those reserves but to add the numbers back into each budget, instead of taking the reserves away, to leave available, this would be our first backstop for our insurance policy.

16:45

Chairman Keiser: Where are we going get the dollars that would have been used with the 18 million that would have been transferred from July 1 to January 1?

Rep Carlson: Right now we don't have a plan that says we have it setting in a pot, when we have to cover it. If one of those bills we passed says we can't use those reserves, right there is 18 million dollars. We have to put that back into those budgets & cover those 18 million dollars, whether it would be from options that we have. We have to come up with those dollars. When it's on the table, we have to discuss it & right now we have nothing on the table. The Bank of ND is our back drop. If you did a minimum reserve of 3%, that's 64 million dollars. You need availability of 64 million dollars to make sure that this plan works. We will have to find it if we move forward with this.

Rep Boschee: The claims history, what was that number? Was it for the year or for the biennium?

Rep Carlson: I have the note that came from council that says your reserve balance for 1½ & 3 months' claims paid during the past year was 255 million dollars for the year. You have to understand that Sanford had a negative balance of 65 million where their claims exceeded their premiums. That led to the increase that we have of premium that we have today that went up plus it required an 18-million-dollar injection into that fund as well. It went from $1,130 to $1,249, which is 10.6% plus 18 million dollars. The number I have is 255 million & assuming you use that same number, means that we need to have a reserve of 64 million dollars.

Rep Beadle: On the fully insured plan that we have now, did our current provider lose in this last biennium due to the cost being higher than they anticipated. If we profit off of it & expenditures are less than what we allocated, we split the profits 50/50 with the provider. If we lose money based on the fully insured, they end up absorbing it? That takes away a lot of the risk & liability for the state. Have we actually studied, making the adjustment to the self-insured plan in terms of what it would do towards our liability exposure?

Rep Carlson: That's why we buy the reinsurance to limit your liability. The reinsurance is absolutely crucial to the success of the self-insured plan. I'm sure they do it as well. A wellness program & self-insured plan is fiscal management for the future, it's time.

Chairman Keiser: We can ask Sparb Collins to go through plans. I do know that currently we have a modified fully insured plan with the risk corridor, I'm not sure if that's what we have in the next biennium.

Rep Kasper ~ District 46: Talks about how you obtain a self-funded insurance bid.

28:30

Rep Boschee: The primary concern about the employees & in our districts, many have the co-pays & deductibles. That is set up through a plan design, so regardless of what we are seeing here in SB 1436, based on current benefits, it won't change because the plan design has to be the same.

Rep Kasper: That's exactly right. There should be no fear, everything is the same except how it's funded.

Rep Lefor: Can you expand on what a 3rd party administrator is?

Rep Kasper: A third party administrator is a company that has a business of providing claims processing, negotiating with the providers for a claim & providing the record keeping. It's an insurance plan not an insurance company. The administrator is paid by a per employee/per month fee, which is negotiated in the contract. In a fully insured plan it's a hidden fee.

Rep Lefor: A 3rd party administrator handles the claims but you still use another company for the reinsurance aspect of it?

Rep Kasper: That's correct.

Rep Beadle: By switching to self-insured, would that do anything in terms of who handles negotiations?

Rep Kasper: The 3rd party administrator, almost have all availability to networks that are providers. The plan specifications would require to have the network availably under the new plan or they could rent a network that companies have in ND & nationwide. You would have a network that is vast & available in ND.

Chairman Keiser: We will have Jennifer Clark come up. I will start off, on tax savings, the 2.53% hit tax, is that going away?

Jennifer Clark ~ Legislative Legal Counsel: I'm neutral of this bill. I was just reading a report about the federal plan & the proposal to revise/repeal on the ACA. I don't recall what that tax provision was. My recollection is most of the changes that are anticipated under that plan, they phase in over time. So, most are taking place in 2019-2020.

Rep Kasper: What are the key things, when you are fully insured, you pay a premium tax in the state of ND as well, that also goes away on a self-insured plan & we don't pay premium tax, except on the stop loss premium? As far as the ACA, that a different issue, that's about a 1½ - 2 percent saving for ND.

35:23

Pat Bellmore ~ Chief Marketing Officer-Blue Cross Blue Shield ND: I would like to make myself available as a resource in terms of what is happening out in the market place with these types of programs. We have a large presence in representing large companies. The employee would not see a change & they would have a different card. Over all, it a good idea to put forth.

37:36

Rep Kasper: In your book of business, what is the average size of your employer/employee self-funded group?

Bellmore: We are licensed to do partial self-funded, meaning self-funding with stop loss all the way down to 26 employee lives. Any large employer we have that exceeds 750, is self-insured.

Rep C Johnson: The self-insured plans, are they with private companies. Are there any public entities, like a city or county? What is the difference between private & public?

Bellmore: There is no difference in the way the plans are structured. The basics are the same.

Rep Boschee: Can you talk about the experience you have seen with self-insured increases, are you talking about we don't see go as high year to year or biennium to biennium or is that not a factor?

Bellmore: I never dealt with a self-insured entity that went self-funded, turned back & went fully insured.

Chairman Keiser: Anyone else here to testify in support of HB 1436, opposition, neutral position.

Sparb Collins ~ Executive Director of the ND Public Employees Retirement System (NDPERS): Attachment 2. I will appear in the neutral position because I haven't been able to talk to our board.

48:30

Rep Kasper: The fund for the fully-insured is deposit, owned by the plan & could be an interest bearing account?

Collins: There are fully insured as well as self-insured, yes. In fully insured we get interest at the 5 years bill rate.

Rep Kasper: Which I'm sure you would negotiate for a self-insured plan?

Collins: Yes.

49:00 ~ Continues testimony.

52:40

Rep Kasper: How much are we getting in a refunded premium for a buy down in the biennium on our health plan?

Collins: That's in the next paragraph.

Rep Kasper: The other positives the previous years were with a different insurance carrier?

Collins: We have basically the same contract in place, yes there is differences in terms of performance.

53:20 ~ Continues testimony.

53:50

Rep Kasper: This is disingenuous to say that if we would have been self-insured, we might have had the same 15-million-dollar loss because we don't know where the stop loss premiums would have kicked in.

Collins: That's what I meant to say if I didn't.

Rep Kasper: You really can't compare.

Collins: Yes.

54:20 ~ Continues testimony.

1:04:30

Rep Kasper: Have you asked the AG for an opinion on whether or not the contract you have with Sanford would violate section 18, article 1?

Collins: You brought that up with the one meeting & I asked someone from the AG's office to talk to you. Did they?

Rep Kasper: You have not asked for an AG's opinion?

Collins: No.

Rep Kasper: Why not?

Collins: I would like the AG's office answer that for you.

Rep Kasper: This is the 3rd or 4th time I heard that there is a potential constitutional issue, I would assume as a ND PERS, you would want clarification from the AG opinion so we know what we are dealing with.

Rep Boschee: You said that we were just under 22% average increase when we self-funded, just 14% average when fully-funded, any assumptions why we see a 7% difference.

Collins: We can't draw any specific conclusions there about which is better. What I'm pointing out with those numbers is there nothing in those numbers that says that one is in fact better than the other.

Rep Beadle: Most of the conversation is with the increases in the premiums. Have you pulled any analysis from other states in terms of their increases?

Collins: In the testimony on page 2 are some comparisons.

Rep Kasper: Did you also compare the benefits?

Collins: No.

Chairman Keiser: Could you give the committee a copy of RFP for the coming biennium? Also, both the response to the fully insured, risk corridor insured, modified program & also the self-insured. We can see the RFP's as well as the bids.

Collins: I gave it to you last time, I can't give you the bid.

Chairman Keiser: You just went through a process.

Collins: We went through a renewal & the renewal followed the procedures that you adopted in statue.

Lisa Carlson~Senior Director of Market Strategy at Sanford Health Plan: Attachment 3. We believe is the due date of section 5, unconstitutionally impairs our existing contract. We would be happy to discuss the due dates & if that section was changed.

1:12:40

Rep Kasper: What is the date your legal council is saying the date would have to be change to where you would see no threat under the potential constitutionality issue?

Carlson: Our council has said that after our contract expires, June 30, 2021.

Chairman Keiser: Eric, can you come up?

Eric-Bank of ND: We have a small amendment that deals with the line of credit. Our desire would be to change the rate. You have a fixed rate of 1¾%, typically how we deal with state agencies, we give them the same rate across the board which is 1½% over the 3 month liable, a floating rate. Rather than a fixed rate of 1 ¾% which may last. That is our suggestion to make a small change in the interest rate to make floating like we do with all other state agencies.

Rep Boschee: Can tell us what the 3-month LIBOR rate is today?

Eric: It is 1.13.

Rep Becker: Doesn't that give some instability to the actuarial aspect. I imagine that the LIBOR rate is going to up based on what we've been hearing through the feds.

Eric: It would certainly may. When you draw from a line of credit from the bank's perspective is locking you in a rate of 1¾% for I don't know for how long. As you suggested, it does appear that rates are going to go up. The Bank of ND on a 50 million line could be lock in to a rate, which under our cost of funding. That's how the bank looks at it & is to protect the bank from interest credit risks. Those 2 have to be balanced.

Rep Kasper: If we put a 4-year sunset rate on the interest rate, could you live with that?

Eric: We would have to look at a different rate.

Rep Kasper: Are we able under current statue to do that, even though you do not like it?

Chairman Keiser: The answer is yes.

Rep Ruby: This is the rate you charge per year, an annual rate & this is a percentage of insuring is a line of credit? If it's ever accessed & it's called in, then there is an interest rate that is different, is that right?

Eric: No, this is an interest rate on a loan, when the loan is taken down.

Rep Ruby: Otherwise no.

Eric: This would be the loan rate.

Chairman Keiser: You are right, Rep Ruby, the rate would not go into effect.
You are not borrowing the money until you need, it's a line of credit. There is no interest until you use it.

Chairman Keiser: Closes the hearing.

2017 HOUSE STANDING COMMITTEE MINUTES

Industry, Business and Labor Committee
Peace Garden Room, State Capitol

HB 1436
3/15/2017
29203

☐ Subcommittee
☐ Conference Committee

Ellen LeTang

Explanation or reason for introduction of bill/resolution:

Employee benefits program committee, public employee uniform group insurance health benefits coverage & provide for a retirement board line of credit.

Minutes: Attachment 1

Chairman Keiser: Reopens the hearing of HB 1436.

Todd Steinwand ~ Chief Business Development Officer of the Bank of ND:
Attachment 1. We want to offer the following amendment to HB 1436. It relates to section 4, number 3, talks about the interest rate charges on the line of credit.

(Reads the amendment).

Rep Becker: It seems to me that this insures that the Bank of ND is the cost for you?

Steinwand: It does provide a return for the bank. When we have lent money to other agencies, normally it's been at variable rates. Most likely, interest rates are going It makes sense to lock in the rate. We expect interest rates to rise 3 times over this coming year. We are able to do some match funding if we know what the dollar amount & lock in some rates. We tried to be competitive.

Yes, we will get a return on this.

Chairman Keiser: Further questions?

2017 HOUSE STANDING COMMITTEE MINUTES

Industry, Business and Labor Committee
Peace Garden Room, State Capitol

HB 1436
3/22/2017
Job #29553

☐ Subcommittee
☐ Conference Committee

Re Mae Kuehn

Explanation or reason for introduction of bill/resolution:

Employee benefits program committee, public employee uniform group insurance health benefits coverage and provide for a retirement board line of credit.

Minutes: Attachment 1a & b

Chairman Keiser: Opens the hearing of HB 1436.

Rep Carlson, Sponsor ~ District 41: (Attachment 1a & b). I have always had a concern that we do not have enough tie between the PERS Board and our Employee Benefits Committee which is a standing committee. A lot of these amendments deal with trying to tie those together.

The amendments maintain the current membership of the board. It limits the activities of the board to the interim between regular legislative sessions. When all us are here at the legislature, we should all be hearing and voting on those issues.

The bill takes away the draft reviewing process. Instead it limits review to the executive and judicial branch. It expands the role of the employee benefits policy committee to quarterly meetings during the interim. We see the budget the day the Governor gives his report to us in the pre-session. That is too late. We should be engaged in the process. But when we are backed in with a contract and told this is what is to be paid, it takes us out of the picture of the job we are supposed to do. This tries to tie them together.

There are concerns on the retirement side. There are fiduciary relationships that are established on the retirement plans that we don't want to be in the middle of. It codifies in PERS law that all PERS uniform group plan contracts and terms are subject to legislative appropriation and changes. All other contracts and leases are subject to the legislature appropriating the money.

(6:00)
I believe we are on solid ground saying that we have to put into law that everything that is signed is subject to our review and ability to appropriate.

It clarifies under a self-funded health plan that it may include consideration of funds extended to the board by the Bank of North Dakota. It clarifies the January 1, 2018 directive to transition to self-funded plan doesn't include the PERS retiree plan or the Medicaid Part D plan.

If we are spending $477 million of taxpayer money, we need to be engaged. The way this is written, the contract that we have today extends for the entire biennium the same benefits, copays, and deductibles. We become the risk taker and we become liable for anything over the insurance loss amount. There are people who provide the third party services to administer the claims. They bid it on a regular basis. They have an established fee. They have said that those who have gone from fully funded to self-funded have not reverted back over the years. Forty-nine out of fifty states have done this. North Dakota should be able to also.

Rep Beadle: In discussion on the original hearing on this bill, we learned that we were the ones that went from self to fully insured. When we are dealing with a $500 million contract, why wouldn't we want to study this change before doing it?

Rep Carlson: We have studied this in the past. There was an opportunity to have a bid for self-funded. In the last two rounds those bids were not accepted. In both cases they were cheaper. This is about money management for the State of North Dakota. Why study when we know the facts?

Rep Ruby: (Attachment 1b) Page 3, line 9--This is talking about the plan and in current law would have to be accompanied by a report of the Employee's Benefit Committee. Are we okay to make a change without that process happening?

Rep Carlson: We still have actuarial reports that we get. The PERS Board is still in place. This just deals with the action we take in the interim.

Chairman Keiser: This section is similar to what we did in the Worker's Compensation section of the code where every bill that is introduced has to have a fiscal note.

Jennifer Clark ~ Attorney at Legislative Council: Page 3, line 9, subsection 5, that law is in place today. The difference is now it applies to the introduction of every legislative measure regardless of who the sponsor is. The change is that we are not applying that limitation to measures introduced by individual legislators. We are limiting it to legislative management bills because they are done early, executive branch, and judicial branch bills. Those are the pre-filed.

(15:00)
Rep Ruby: By moving to a self-funded program, are we allowed to do that without the requirements under existing law that is under subsection 5?

Jennifer Clark: Your concern is that this bill doesn't have a report on it. On page 8 of the markup, there is an exemption so that is an attempt to acknowledge the fact that this doesn't have a report on it. When it is in code that the executive branch needs to do something, there is no getting around it. In this instance, you are tying your own hands as a legislative

assembly. When you as a group take an action that counters what you had told yourselves what you wanted to do, that new action trumps what code says. In practice, it hard to stop somebody who wants to introduce a bill.

Chairman Keiser: Currently we are on a modified fully-funded program until July. The proposed contract for the next two-year period, is it a modified fully insured or a fully insured plan?

Sparb Collins: It's modified. We have negotiated one change. Currently we share 50/50 in the first $6 million of loss. The contract in place for July 1, there will be no risk on the top end. It is all shifted to the carrier.

Chairman Keiser: Is there a division on the profit?

Sparb Collins: On the bottom end it would be the same and that is 50/50 on the first $3 million. After that all of it comes back as a refund to PERS. That includes the rebates and interest.

Chairman Keiser: We will reconvene on Monday morning at 9:00 a.m.

2017 HOUSE STANDING COMMITTEE MINUTES

Industry, Business and Labor Committee
Peace Garden Room, State Capitol

HB 1436
3/27/2017—1st meeting
Job #29691

☐ Subcommittee
☐ Conference Committee

Le Mae Kreuh

Explanation or reason for introduction of bill/resolution:

Employee benefits program committee, public employee uniform group insurance health benefits coverage and provide for a retirement board line of credit.

Minutes: Attachment 1a & b and Attachment 2

Chairman Keiser: Opens the hearing of HB 1436.

Chairman Keiser: The purpose of reopening the hearing is to give anyone in the audience a chance to comment on the amendment proposed last week? (Attachment 1)

Lisa Carlson, Sanford Health Plan: We are in opposition to HB 1436 because in Section 5 it is our belief that it unconstitutionally impairs our existing contract.

Chairman Keiser: There is also an amendment from the Bank of North Dakota. (Attachment 2) If you have the amended bill page 7, line 7. The Bank suggested that on line 7 it would be "million dollars at an annual rate not to exceed three percent" vs. the "one and three-quarters" percent. "Not to exceed three percent for a two-year term or four percent for a five-year term." Continues reading from amendment.

Rep Ruby: Moved both amendments. I think the Bank of North Dakota's amendment is prudent. If you get a loan, it is generally a better rate if it is a shorter term.

Rep Sukut: Second.

A Roll Call vote was taken: Yes 13, No 0, Absent 1.

Motion to adopt both amendments carries.

Rep Lefor: Moved to amend page 1, line 17, correct second word from end to "public." Also on page 3, line 23 add "or measure" after the word "amendment."

Rep Boschee: Second.

Voice Vote taken. Motion to correct wording carries.

Rep Beadle: Move to change on page 7, line 18, replace "2018" with "2020." The PERS committee just went through the reauthorization of the contract. That would give additional time to implement the policy.

Rep Becker: Second.

A Roll Call vote was taken: Yes 7, No 6, Absent 1.

The motion to change the date to 2020 carries.

Rep. Ruby: Moved Do Pass as amended.

Rep Laning: Second.

Rep Boschee: I will resist the motion. I know there has been frustration in the past with the PERS board. I see them as an independent body who has spent the time studying these issues. My concern is the short time that we had to study this. This is not a good path forward. It shows another overreach that the legislative branch continues to make toward the executive branch.

A Roll Call vote was taken: Yes 10, No 3, Absent 1.

Do Pass as amended carries.

Representative Lefor will carry the bill.

2017 HOUSE STANDING COMMITTEE MINUTES

Industry, Business and Labor Committee
Peace Garden Room, State Capitol

HB 1436
3/27/2017—2nd meeting
Job #29701

☐ Subcommittee
☐ Conference Committee

Rep Mae Kreidt

Explanation or reason for introduction of bill/resolution:

Employee benefits program committee, public employee uniform group insurance health benefits coverage and provide for a retirement board line of credit.

Minutes:

Chairman Keiser: We had a request to reconvene. Is there an intention to reconsider any of our actions from this morning on HB 1436?

Rep Becker: Moved to reconsider. Rep Beadle's amendment is worthy of discussion. We should avoid having concerns about contracts. The timing defeats the purpose because the legislature will be back in session before 2020. We should keep the original date.

Rep Bosch: Second.

Chairman Keiser: This is in reference to the amended bill page 7, line 18 where we amended the date from 2018 to 2020. I talked to the Attorney General. It is the Attorney General's position that if a lawsuit is mentioned in testimony that they don't comment because they would have to defend the State of North Dakota.

Rep Beadle: I'm going to stand by my amendment. It would behoove us to look at history. We are in a costly plan. The idea that a self-funded plan will be cheaper might not be true when we look at the fact that we are so expensive that our current provider is absorbing over $50 million worth of loss in a biennium. If we don't do this, we will have the Bank of North Dakota stop gap. The fact that pushing this onto another legislative session would give us two years to study a half billion-dollar adjustment worth of liability exposure to the state when currently we don't have liability or risk exposure. We can adjust funding levels any time we want. The terms and conditions of the contract are adjusted. We have control, security, little risk, and little liability. By pushing it out two years, it gives us the ability to study all of what brought us into the circumstance we are now and make sure we are not jumping in and hoping it is a better policy.

Voice Vote taken. Motion to reconsider carried.

Rep Ruby: Moved to amend to change the date from 2020 to 2018 on page 7, line 18.

Rep Sukut; Second.

A Roll Call vote was taken: Yes 10, No 3, Absent 1.

Motion to amend carries.

Rep Ruby: Moved Do Pass as amended.

Rep Bosch: Second.

A Roll Call vote was taken: Yes 10, No 3, Absent 1.

Do Pass as amended carries.

Representative Lefor will carry the bill.

17.1008.03001
Title.

Prepared by the Legislative Council staff for
Representative Carlson
March 21, 2017

PROPOSED AMENDMENTS TO HOUSE BILL NO. 1436

Page 1, line 12, overstrike "consider" and insert immediately thereafter ":

a. Meet at least quarterly at the discretion of the chairman.

b. Receive quarterly reports from the public employees retirement system on the activities of the public employees retirement system, including the status of and any proposed changes to its retirement system plans and uniform group insurance plans. Before each regular legislative session, the pubic employees retirement system shall present to the committee the executive budget proposals, including any anticipated changes, relating to retirement plans and uniform group insurance plans administered by the public employees retirement system. The committee shall consider and report on these activities and executive budget proposals.

c. Investigate the feasibility and desirability of making changes to the retirement plans and uniform group insurance plans administered by the public employees retirement system. The committee may request actuarial reports on the actuarial impact of possible changes and of plan design options.

d. Consider"

Page 1, overstrike "measures and"

Page 1, line 17, remove "a"

Page 1, line 18, overstrike "measure or" and insert immediately thereafter "a legislative"

Page 1, line 19, overstrike "The committee shall take" and insert immediately thereafter:

"e. Take"

Page 1, line 19, remove "such"

Page 1, line 19, overstrike "measure or" and insert immediately thereafter "such legislative"

Page 1, line 23, overstrike "The committee shall report its" and insert immediately thereafter:

"f. Report the committee's"

Page 2, line 16, overstrike "measures and" and insert immediately thereafter "legislative"

Page 2, line 20, remove "If a"

Page 2, line 21, remove "legislative"

Page 2, line 21, overstrike "measure"

Page 2, line 21, replace "or" with "If a legislative"

Page 3, line 1, after "committee" insert "takes action on a legislative measure sponsored by a legislator or"

Page 4, after line 14, insert:

"4. A contract and the terms of a contract entered by the board under this chapter are subject to legislative appropriation and legislative changes."

Page 6, line 11, after the period insert "Such plan may include consideration of funds extended to the board from the Bank of North Dakota."

Page 6, line 27, after "54-52.1-04.2" insert ", except for benefits for retirees and for Medicare part D"

Page 7, line 3, after "plan" insert "under subsection 1"

Renumber accordingly

Amendment to House Bill 1436

The Bank of North Dakota shall extend to the board a line of credit not to exceed fifty million dollars at an annual rate not to exceed three percent for a two year term or four percent for a five year term. The board shall repay the line of credit from health insurance premium revenue or from other funds, as appropriated by the legislative assembly. The board may access the line of credit, as necessary, to provide adequate reserve funds, to purchase stop-loss coverage, and to defray other expenditures of administration of the self-insurance plan.

3/27/17 DP

1 of 2

17.1008.03002
Title.04000

Adopted by the Industry, Business and Labor Committee

March 27, 2017

PROPOSED AMENDMENTS TO HOUSE BILL NO. 1436

Page 1, line 12, overstrike "consider" and insert immediately thereafter ":

a. Meet at least quarterly at the discretion of the chairman.

b. Receive quarterly reports from the public employees retirement system on the activities of the public employees retirement system, including the status of and any proposed changes to its retirement system plans and uniform group insurance plans. Before each regular legislative session, the public employees retirement system shall present to the committee the executive budget proposals, including any anticipated changes, relating to retirement plans and uniform group insurance plans administered by the public employees retirement system. The committee shall consider and report on these activities and executive budget proposals.

c. Investigate the feasibility and desirability of making changes to the retirement plans and uniform group insurance plans administered by the public employees retirement system. The committee may request actuarial reports on the actuarial impact of possible changes and of plan design options.

d. Consider"

Page 1, line 12 overstrike "measures and"

Page 1, line 17, remove "a"

Page 1, line 18, overstrike "measure or" and insert immediately thereafter "a legislative"

Page 1, line 19, overstrike "The committee shall take" and insert immediately thereafter "e. Take"

Page 1, line 19, remove "such"

Page 1, line 19, overstrike "measure or" and insert immediately thereafter "such legislative"

Page 1, line 23, overstrike "The committee shall report its" and insert immediately thereafter "f. Report the committee's"

Page 2, line 16, overstrike "measures and" and insert immediately thereafter "legislative"

Page 2, line 20, remove "If a"

Page 2, line 21, remove "legislative"

Page 2, line 21, overstrike "measure"

Page 2, line 21, replace "or" with "If a legislative"

Page 3, line 1, after "committee" insert "takes action on a legislative measure sponsored by a legislator or"

Page 3, line 7, after "amendment" insert "or measure"

3/27/17 DP

2 of 2

Page 4, after line 14, insert:

"4. A contract and the terms of a contract entered by the board under this chapter are subject to legislative appropriation and legislative changes."

Page 6, line 11, after the period insert "Such plan may include consideration of funds extended to the board from the Bank of North Dakota."

Page 6, line 18, replace "one and three-quarters percent" with "three percent for a two year term or four percent for a five year term"

Page 6, line 27, after "54-52.1-04.2" insert ", except for benefits for retirees and for Medicare part D"

Page 7, line 3, after "plan" insert "under subsection 1"

Renumber accordingly

Date: 3/27/17

Roll Call Vote #: 1

2017 HOUSE STANDING COMMITTEE
ROLL CALL VOTES
BILL/RESOLUTION NO. HB 1436

House Industry, Business and Labor **Committee**

☐ **Subcommittee**

Amendment LC# or Description: 17.1008.03001 and Bank of North Dakota amendment

Recommendation

☒ Adopt Amendment
☐ Do Pass ☐ Do Not Pass ☐ Without Committee Recommendation
☐ As Amended ☐ Rerefer to Appropriations
☐ Place on Consent Calendar

Other Actions ☐ Reconsider ☐ _____

Motion Made By Rep Ruby **Seconded By** Rep Sukut

Representatives	Yes	No	Representatives	Yes	No
Chairman Keiser	X		Rep Laning	X	
Vice Chairman Sukut	X		Rep Lefor	X	
Rep Beadle	X		Rep Louser	X	
Rep R Becker	X		Rep O'Brien	X	
Rep Bosch	X		Rep Ruby	X	
Rep C Johnson	X		Rep Boschee	X	
Rep Kasper	AB		Rep Dobervich	X	

Total (Yes) 13 No 0

Absent 1

Floor Assignment _____

Date: 3/27/17

Roll Call Vote #: 2

2017 HOUSE STANDING COMMITTEE
ROLL CALL VOTES

BILL/RESOLUTION NO. HB 1436

House Industry, Business and Labor **Committee**

☐ **Subcommittee**

Amendment LC# or Description:

Recommendation

☒ Adopt Amendment
☐ Do Pass ☐ Do Not Pass ☐ Without Committee Recommendation
☐ As Amended ☐ Rerefer to Appropriations
☐ Place on Consent Calendar

Other Actions ☐ Reconsider ☐

Motion Made By Rep Lefor **Seconded By** Rep Boschee

Representatives	Yes	No	Representatives	Yes	No
Chairman Keiser			Rep Laning		
Vice Chairman Sukut			Rep Lefor		
Rep Beadle			Rep Louser		
Rep R Becker			Rep O'Brien		
Rep Bosch			Rep Ruby		
Rep C Johnson			Rep Boschee		
Rep Kasper			Rep Dobervich		

Total (Yes) No

Absent

Floor Assignment

Voice vote ~ Motion carried

Word corrections:
Page 1, line 17—"public"
Page 3, line 23—add "or measure"

Date: 3/27/17

Roll Call Vote #: 3

2017 HOUSE STANDING COMMITTEE
ROLL CALL VOTES
BILL/RESOLUTION NO. HB 1436

House Industry, Business and Labor **Committee**

☐ **Subcommittee**

Amendment LC# or Description:

Recommendation
☒ Adopt Amendment
☐ Do Pass ☐ Do Not Pass ☐ Without Committee Recommendation
☐ As Amended ☐ Rerefer to Appropriations
☐ Place on Consent Calendar

Other Actions ☐ Reconsider ☐

Motion Made By Rep Beadle **Seconded By** Rep Becker

Representatives	Yes	No	Representatives	Yes	No
Chairman Keiser		X	Rep Laning	X	
Vice Chairman Sukut		X	Rep Lefor		X
Rep Beadle	X		Rep Louser		X
Rep R Becker	X		Rep O'Brien	X	
Rep Bosch		X	Rep Ruby		X
Rep C Johnson	X		Rep Boschee	X	
Rep Kasper	AB		Rep Dobervich	X	

0

Total (Yes) 7 No 6

1

Absent

Floor Assignment

Page 7, line 18 replace "2018" with "2020"

Date: 3/27/17

Roll Call Vote #: 4

2017 HOUSE STANDING COMMITTEE
ROLL CALL VOTES
BILL/RESOLUTION NO. HB 1436

House Industry, Business and Labor **Committee**

☐ **Subcommittee**

Amendment LC# or Description:

Recommendation

☐ Adopt Amendment
☒ Do Pass ☐ Do Not Pass ☐ Without Committee Recommendation
☒ As Amended ☐ Rerefer to Appropriations
☐ Place on Consent Calendar

Other Actions ☐ Reconsider ☐

Motion Made By Rep Ruby **Seconded By** Rep Laning

Representatives	Yes	No	Representatives	Yes	No
Chairman Keiser	X		Rep Laning	X	
Vice Chairman Sukut	X		Rep Lefor	X	
Rep Beadle		X	Rep Louser	X	
Rep R Becker	X		Rep O'Brien	X	
Rep Bosch	X		Rep Ruby	X	
Rep C Johnson	X		Rep Boschee		X
Rep Kasper	AB		Rep Dobervich		X

0

Total (Yes) 10 No 3

1

Absent

Floor Assignment Rep Lefor

Date: 3/27/17

Roll Call Vote #: 1

2017 HOUSE STANDING COMMITTEE
ROLL CALL VOTES

BILL/RESOLUTION NO. HB 1436

House Industry, Business and Labor **Committee**

☐ **Subcommittee**

Amendment LC# or Description:

Recommendation

☐ Adopt Amendment
☐ Do Pass ☐ Do Not Pass ☐ Without Committee Recommendation
☐ As Amended ☐ Rerefer to Appropriations
☐ Place on Consent Calendar

Other Actions ☒ Reconsider ☐

Motion Made By Rep Becker **Seconded By** Rep Bosch

Representatives	Yes	No	Representatives	Yes	No
Chairman Keiser			Rep Laning		
Vice Chairman Sukut			Rep Lefor		
Rep Beadle			Rep Louser		
Rep R Becker			Rep O'Brien		
Rep Bosch			Rep Ruby		
Rep C Johnson			Rep Boschee		
Rep Kasper			Rep Dobervich		

Total (Yes) _____ No _____

Absent _____

Floor Assignment

Voice vote ~ Motion carried

Date: 3/27/17

Roll Call Vote #: 2

2017 HOUSE STANDING COMMITTEE
ROLL CALL VOTES
BILL/RESOLUTION NO. HB 1436

House Industry, Business and Labor **Committee**

☐ **Subcommittee**

Amendment LC# or Description:

Recommendation

☒ Adopt Amendment
☐ Do Pass ☐ Do Not Pass ☐ Without Committee Recommendation
☐ As Amended ☐ Rerefer to Appropriations
☐ Place on Consent Calendar

Other Actions ☐ Reconsider ☐

Motion Made By Rep Ruby **Seconded By** Rep Sukut

Representatives	Yes	No	Representatives	Yes	No
Chairman Keiser	X		Rep Laning	X	
Vice Chairman Sukut	X		Rep Lefor	X	
Rep Beadle		X	Rep Louser	X	
Rep R Becker	X		Rep O'Brien	X	
Rep Bosch	X		Rep Ruby	X	
Rep C Johnson	X		Rep Boschee		X
Rep Kasper	AB		Rep Dobervich		X

Total (Yes) 10 No 3

Absent 1

Floor Assignment

Page 7, line 18, change date from 2020 to 2018.

Date: 3/27/17

Roll Call Vote #: 3

2017 HOUSE STANDING COMMITTEE
ROLL CALL VOTES
BILL/RESOLUTION NO. HB 1436

House Industry, Business and Labor **Committee**

☐ **Subcommittee**

Amendment LC# or Description:

Recommendation
☐ Adopt Amendment
☒ Do Pass ☐ Do Not Pass ☐ Without Committee Recommendation
☒ As Amended ☐ Rerefer to Appropriations
☐ Place on Consent Calendar

Other Actions ☐ Reconsider ☐

Motion Made By Rep Ruby **Seconded By** Rep Bosch

Representatives	Yes	No	Representatives	Yes	No
Chairman Keiser	X		Rep Laning	X	
Vice Chairman Sukut	X		Rep Lefor	X	
Rep Beadle		X	Rep Louser	X	
Rep R Becker	X		Rep O'Brien	X	
Rep Bosch	X		Rep Ruby	X	
Rep C Johnson	X		Rep Boschee		X
Rep Kasper	AB		Rep Dobervich		X

Total (Yes) 10 No 3

Absent 1

Floor Assignment Rep. Lefor

REPORT OF STANDING COMMITTEE

HB 1436: Industry, Business and Labor Committee (Rep. Keiser, Chairman) recommends **AMENDMENTS AS FOLLOWS** and when so amended, recommends **DO PASS** and **BE REREFERRED** to the **Appropriations Committee** (10 YEAS, 3 NAYS, 1 ABSENT AND NOT VOTING). HB 1436 was placed on the Sixth order on the calendar.

Page 1, line 12, overstrike "consider" and insert immediately thereafter ":

a. Meet at least quarterly at the discretion of the chairman.

b. Receive quarterly reports from the public employees retirement system on the activities of the public employees retirement system, including the status of and any proposed changes to its retirement system plans and uniform group insurance plans. Before each regular legislative session, the public employees retirement system shall present to the committee the executive budget proposals, including any anticipated changes, relating to retirement plans and uniform group insurance plans administered by the public employees retirement system. The committee shall consider and report on these activities and executive budget proposals.

c. Investigate the feasibility and desirability of making changes to the retirement plans and uniform group insurance plans administered by the public employees retirement system. The committee may request actuarial reports on the actuarial impact of possible changes and of plan design options.

d. Consider"

Page 1, line 12 overstrike "measures and"

Page 1, line 17, remove "a"

Page 1, line 18, overstrike "measure or" and insert immediately thereafter "a legislative"

Page 1, line 19, overstrike "The committee shall take" and insert immediately thereafter "e. Take"

Page 1, line 19, remove "such"

Page 1, line 19, overstrike "measure or" and insert immediately thereafter "such legislative"

Page 1, line 23, overstrike "The committee shall report its" and insert immediately thereafter "f. Report the committee's"

Page 2, line 16, overstrike "measures and" and insert immediately thereafter "legislative"

Page 2, line 20, remove "If a"

Page 2, line 21, remove "legislative"

Page 2, line 21, overstrike "measure"

Page 2, line 21, replace "or" with "If a legislative"

Page 3, line 1, after "committee" insert "takes action on a legislative measure sponsored by a legislator or"

Page 3, line 7, after "amendment" insert "or measure"

Page 4, after line 14, insert:

"4. A contract and the terms of a contract entered by the board under this chapter are subject to legislative appropriation and legislative changes."

Page 6, line 11, after the period insert "Such plan may include consideration of funds extended to the board from the Bank of North Dakota."

Page 6, line 18, replace "one and three-quarters percent" with "three percent for a two year term or four percent for a five year term"

Page 6, line 27, after "54-52.1-04.2" insert ", except for benefits for retirees and for Medicare part D"

Page 7, line 3, after "plan" insert "under subsection 1"

Renumber accordingly

REQUEST

REP. VIGESAA REQUESTED that the remarks of Rep. Trottier be printed in the Journal, which request was granted on a voice vote.

SIXTH ORDER OF BUSINESS

SPEAKER BELLEW DEEMED approval of the amendments to HB 1436, SB 2099, SB 2141, Engrossed SB 2189, and SB 2196.

HB 1436, as amended, was rereferred to the **Appropriations Committee**.

SB 2099, SB 2141, Engrossed SB 2189, and SB 2196, as amended, were placed on the Fourteenth order of business on today's calendar.

MOTION

REP. VIGESAA MOVED that HB 1436, which had amendments passed on the previous Sixth order, not be rerefered to the Appropriations committee and be placed on the Eleventh order of today's calendar, in accordance with HR 329, which motion prevailed on a voice vote.

CONSIDERATION OF VETOED MEASURE

HB 1153: AN ACT to amend and reenact section 54-06-31 of the North Dakota Century Code, relating to state employee recruitment and retention bonus programs.

ROLL CALL

The question being on the final passage of the enrolled bill, over the Governor's veto, which has been read, the roll was called and there were 84 YEAS, 7 NAYS, 0 EXCUSED, 3 ABSENT AND NOT VOTING.

YEAS: Anderson, B.; Anderson, D.; Beadle; Becker, Rich S.; Becker, Rick C.; Blum; Boehning; Bosch; Boschee; Brabandt; Brandenburg; Carlson; Damschen; Delmore; Delzer; Devlin; Dobervich; Dockter; Ertelt; Grueneich; Guggisberg; Hanson; Hatlestad; Headland; Heinert; Holman; Howe; Johnson, C.; Johnson, D.; Jones; Kading; Karls; Keiser; Kempenich; Kiefert; Klemin; Koppelman, B.; Koppelman, K.; Kreidt; Laning; Lefor; Longmuir; Louser; Magrum; Marschall; Martinson; McWilliams; Meier; Mitskog; Mock; Monson; Nathe; Nelson, J.; Nelson, M.; Oliver; Owens; Paur; Pollert; Porter; Pyle; Roers Jones; Rohr; Ruby, D.; Ruby, M.; Sanford; Satrom; Schatz; Schmidt; Schneider; Schobinger; Seibel; Simons; Skroch; Steiner; Streyle; Sukut; Toman; Trottier; Vetter; Vigesaa; Weisz; Westlind; Zubke; Speaker Bellew

NAYS: Anderson, P.; Hogan; Johnson, M.; Johnston; Maragos; O'Brien; Schreiber-Beck

ABSENT AND NOT VOTING: Boe; Kasper; Olson

The House overrode the Governor's veto of HB 1153, as enrolled.

****

SECOND READING OF HOUSE BILL

HB 1436: A BILL for an Act to amend and reenact sections 54-35-02.4, 54-52.1-04, 54-52.1-04.2, and 54-52.1-04.3 of the North Dakota Century Code, relating to the employee benefits program committee, public employee uniform group insurance health benefits coverage, and to provide for a retirement board line of credit; to provide a continuing appropriation; to provide for application; and to provide statements of legislative intent.

ROLL CALL

The question being on the final passage of the amended bill, which has been read, and has committee recommendation of DO PASS, the roll was called and there were 71 YEAS, 19 NAYS, 0 EXCUSED, 4 ABSENT AND NOT VOTING.

YEAS: Anderson, B.; Anderson, D.; Becker, Rich S.; Becker, Rick C.; Blum; Boehning; Bosch; Brabandt; Brandenburg; Carlson; Damschen; Delzer; Devlin; Dockter; Grueneich; Hatlestad; Headland; Heinert; Howe; Johnson, C.; Johnson, D.; Johnston; Jones; Kading; Karls; Keiser; Kiefert; Klemin; Koppelman, B.; Koppelman, K.; Kreidt; Laning; Lefor; Longmuir; Louser; Magrum; Maragos;

2017 SENATE GOVERNMENT AND VETERANS AFFAIRS

HB 1436

2017 SENATE STANDING COMMITTEE MINUTES

Government and Veterans Affairs Committee
Sheyenne River Room, State Capitol

HB 1436
4/3/2017
Job Number 29897

☐ Subcommittee
☐ Conference Committee

Committee Clerk Signature

Explanation or reason for introduction of bill/resolution:

A BILL for an Act to amend and reenact sections 54-35-02.4, 54-52.1-04, 54-52.1-04.2, and 54-52.1-04.3 of the North Dakota Century Code, relating to the employee benefits program committee, public employee uniform group insurance health benefits coverage, and to provide for a retirement board line of credit; to provide a continuing appropriation; to provide for application; and to provide statements of legislative intent.

Minutes: Attachments: 1-2

Chairman Poolman: Opened the hearing on HB 1436.

Representative Carlson, District 41: See Attachment #1 for testimony as sponsor and in support of the bill. This is a delayed bill out of the House. The other bills you have seen on this subject dealt with the mechanics of the board, how we deal with the board issues, and whether or not the interim committee should be more engaged in this. Most of the bill deals with our ability to self-insure. Self-insurance is a concept that is used in 49 of the 50 states. We are the one that has not chosen that. This bill sets up a timeline and guidelines about how you go about self-insuring and how you buy reinsurance to cover catastrophic loss. It also deals with issues of who bids and how they can bid. How they are paid and what the contract would say about their administrative fees. It is not any more complicated than that. The complication of the issue seems to be, from those people against it, is if the plan is going to change and if it is a back door way to get at the public employees and take away their benefits. The answer is emphatically no. For the next two years, the plan will be exactly the same. Every session we come in, there is a chance to adjust the plan. This time, as you know when it came to us from PERS board and the Governor, it had increased co-pays and co-insurance costs so it cost each one of our members more money this time than last time. That was done to help keep the cost of this plan in line because it escalated another 17%, and with that they have taken away some of the reserves that we built up. It is taking $15 million of the $35 million in reserve. As they recalculated, they also found that the bid had gone down some. Within the budget bill that you will see, we are lowering that another $1.5 million. You will not see that on the premium, you will see that as a credit back into each agency budget. The question is why reinsure? What are the long term benefits? I am looking down the road. I am not looking at just today. The long term benefits are that it gives you much more flexibility when you are done. It allows you to do more health initiative type things. It allows you to have HMOs. It allows you to have various plans that you offer. There is a risk factor, because instead of our plan being fully insured by someone like Sanford or the blues,

where if your claims outrun your premiums, they take the difference. In the last two years, when they renewed the plan, Sanford lost a significant amount of money because our premiums did not match up to our claims. Therein part of the reason why the premiums had to go up. They said they couldn't do it for that. Included in that was raising the premium $120 plus $16 million out of our reserves. You can say; is that paying them back for the claims? You could look at it that way. That is not how I look at it, but that is what happens if they are going to offset the costs in two places. The debate should be centered on whether this is a smart move for the state or not. I think it is a great move for the state long term. Some would say that we have a signed contract and that we cannot break the contract. Unless something has changed, the contract is not signed yet.
(5:32) Refers to last page of provided attachment.
(6:04) We have the ability to adjust the contract, because it is subject to our appropriations. We could say the appropriation is 0 just to get out of it. The intent is and what my amendments were going to do is to have the start date for self-insurance to change from January 2018 to June 30th of 2019, and then start our official date for self-insurance, it would reduce the amount of money that we need to take from our reserve fund to fund that one year extra premium and then our decision would be whether or not to fund the rest of that out of general fund or we continue to take the reserves out to keep our premium in the line where it is. The more we discussed that option, the more we said that may be a logical way to approach this. There is not a boogie man in here. This is a matter if we believe we can be a risk taker, but also a reward taker. Those that have done it have found that it has been very successful. There is no question; we cannot continue to fund $477 million a biennium on our health insurance between federal funds and state funds. Of that $477 million, $221 million is general fund dollars. We have to look ahead and we have to make a decision of what we are going to do here. I think the flexibility of us controlling it, running it, and us being the reward receiver, we have the advantage of having some reserves to start with. By the way, good business practices tell you that you should have between 1.5 to 3 months of premiums in reserve. Depending on what we do with our implementation date and our reserves, we could have as much as $36 million or we could have as little as $18-$20 million to start our reserves. Plus, we have the advantage of the ability to go to BND and if the premiums do not cover our expenses we take out a line of credit. You have to pay it back, but once you get stable and have built the reserves it should not be necessary. There were a number of years that we had no money for raises, so in turn we gave full coverage of medical. We also pay 11.12% of the retirement of our public employees and they pay 3%. In a normal business situation, that is 50/50. So, we have a fully funded plan of $1200+ a month and we also pick up a majority of the retirement costs that they are having. We have worked hard in the last 4 or 5 sessions to raise those employees up to the midpoint. We have done numerous studies where we looked at getting the salaries up to a competitive level. We can never be fully competitive with the private sector, but these things have all been done because we value our public employees. This is not a threatening thing to them. In the end this should allow us to provide as good or better coverage for less money to the state. This bill also says that when we are in session bills will not go to the employee benefits committee. It will go to the standing committee assigned to the bill and it will also require that all of the same actuarial statements would go to the standing committee that would have gone to the employee benefits committee. When we are here, there are 94 in the House and 47 in the Senate to vote on things.
(12:35) Refers to attachment – self-funded vs. fully funded. It is important to look at the tax saving in not being a part of the Affordable Care Act.

(13:39) There have been self-insurance proposals brought forward the last two biennia and both of them have been lower than the plan they took. There might be a lot of reasons as to why they did not want to make the change. Currently Sanford is charging $11.60 per member, per month for administration, and the renewal proposes and increase of 44.5% to $16.76 per member, per month. There is 17.4% increase in this budget, as well as changes to the plan. Governor Burgum proposed a 5% employee contribution, and that was not received really well in your chamber. We would have probably attached it on the House, but I am not sure of that. We did not think that was the right discussion at the right time. I think it is a discussion for another day. I think the public employees and those that work for the state should understand that we had every opportunity to change this plan as we funded it and we did not. To say in any way, shape, or form this is endangering what they have is not true. They will receive the same benefits but it will be the same cost to the state for the next biennium. My recommendation is to allow me to bring you the different numbers of what it does to change the date. There is a lot of stuff in the bill and if there are any technical questions, we can bring Jennifer Clark down here for all of the technical details. The most important part is to go self-insurance. It gives us the ability to buy reinsurance, hire an administrator to do it. We are not going to run it. It does not lay off anyone at PERS. It does not lay off any state employee. What it does do is put us as risk and reward taker in the process.

(16:20) Senator Bekkedahl: On the handout from Legislative Council (reads from attachment 1, page 4, 8.2), is the 60 days' notice in writing from one party or the other or is it mutually agreed upon that they each have letters to agree? I don't understand that.

Representative Carlson: I don't either and that is the way it is written. I am assuming that within a 60 day time frame from the first one saying that we are out, and the other one would have to agree and then you have both within 60 days. That is the way I would interpret it. One of the two would have to make that move and then the other one would have to agree within 60 days the way I read it. We need an attorney to tell us.

Senator Bekkedahl: Is it ok with you if we ask Legislative Council for that interpretation?

Representative Carlson: Absolutely. Everything we do is subject to legislative appropriation. If that bill is not passed and signed, and there is no money in it, I don't care what the paper does it cannot be done. There has to be funding for it. I would hope that we could reach some agreement with these folks if you go forward with this. By putting it off another two years we are saying that hopefully our financial situation is that we can do it two years from now. I think the farther this goes down the road we are going to have some real issues with the ACA. When Congress changes plans they take away grandfathering, and all those things can adversely affect how we do business here.

Vice Chairman Davison: I think that probably 90% of legislators in both houses agree that the self-insurance is an excellent way to take a little more risk and reduce health insurance costs etc. I don't know that is the issue with the bill. I think there is some timing issues. When we talk about the Bank of North Dakota and borrowing $50 million from them to help with the reserve, do you think there is an issue from the insurance standpoint that that isn't really our money with the Bank of North Dakota and that it is a line of credit. Do you think that an issue as far as building up our reserves for the self-insurance? Are there other ideas besides the line of credit from BND?

Representative Carlson: Everything at the Bank of North Dakota is our money. We could take more of the reserves and have them put the $50 million in. It is a matter of what your appetite is for. We may or may not need any part of it. It says up to $50 million, so it could be $5 million we needed one month and then pay it back the next. We are going to go into this with $20 million up to $36 million already in the bank. The key is timing here. If we spend all of this reserve down, and we come back next year and decide to do it in 2021, no matter when you do it you will have the same renewal issue with less reserve. We can take the money right out of the profits if we want to move it from one hand to another – it is our money. The way the books are, and we are trying to balance them let me tell you today we are still lf $55 million to $60 million short even if we moved all of the money around we wanted to.

Vice Chairman Davison: Could you give me more detail on how you see the changes in the bill with the employee benefits committee?

Representative Carlson: I think it is very important that elected officials like us, that have to make the funding decisions, should also be making the decisions on the policy design and the other things that go with it. We have two legislative members that are on that board and seven other members that are not elected by anyone. In our chamber, our one representative member is a minority member of 13 and 81 of my people are not represented on the board. That is an issue that bothers me a little bit. (Reads the duties of the PERS board from a document not provided to the committee.) All of that is done by 7 unelected members, of which most of them have or do work for the state of North Dakota. I just don't know that anyone else would do that besides this state. Therefore, those amendments are that we should be more in control of those decisions that are made. It doesn't say that we have to sign every contract, and it doesn't say that PERS goes away. You still the fiduciary relationship and the help, but I do say that the legislature should be more involved when you listen to that list of things that they are entitled to do. We gave them those by the legislature in statute. There is no one to blame but us if we don't like the way it is done, and the only way to do it is to ask to change it a little bit. Every time that contract gets signed, we are obligated. Then they say we are going to be sued if any modifications are made, so where is our role in this? Think about that as you deliberate on this. This is the future of 10 years from now how our plan is going to look. Can we afford to pay the same benefits tomorrow that we did for our public employees today? If we continue on the spiral we are on, the answer is no.

(25:48) Vice Chairman Davison: I appreciate you bringing the PERS contract down relating to the escape clauses. Do you have any concerns that Sanford could pull out and decide to not do the insurance for one more year?

Representative Carlson: Anyone can be sued including the state of North Dakota. I would hope that they would want to be the administrator for this plan and not have the risk. They could take the administrative fee and do something they have already established. Could they sue us; could they feel they need another four years? It wouldn't be two years. It would be four years to recoup their losses at $65million that they were short. You have to ask them that question. What is our responsibility to the taxpayers of North Dakota? This is not free money. We extracted this from someone's pocket. We are going to have to pay it back in terms of a good benefit.

Vice Chairman Davison: I think there would be some concern by them, but I was just more concerned that they would just say the heck with this whole thing. We don't even want to be the administrator moving forward and then we are left out that one year trying to figure out what to do.

Representative Carlson: That would be a question for legal staff. My staff attorneys tell me that is not the case by the language. Can we argue? That is something for court. I would hope that they would want to stay with us and that they would want to be our administrator and get that 16% figure off of each and every premium without having any risk. That is a lot of cash. It is not like they are doing it for free. As to us being without coverage, I know for a fact that we could find coverage and have someone fill that gap if we had to.

Vice Chairman Davison: As we deliberate, I am more comfortable that we could go another year. You don't think that waiting till the next biennium would be better?

Representative Carlson: We will be in the same situation at that point.

Vice Chairman Davison: Previously, when the bid went out before the legislative session in 2015, was there not any discussion on going self-insurance?

Representative Carlson: That has always been an option for the PERS board, but they have not picked that option any time. I do not have the answer to that. They can tell you that. This has nothing to do with last session. It does highlight the point that when we got here, if it had not been for word of mouth, we would not have known that we were changing providers. All we wanted to do is make sure the coverage is the same. Several retirees have emailed me and said they are paying more today. That is water under the dam. We agreed to two members on the board and we went forward. This has to do with looking ahead. I think this is the right thing to do at the right time.

Senator Bekkedahl: Looking at the PERS board and standing committee, as I read the bill, there is still a PERS board that has to provide reports to the standing committee. Is that correct?

Representative Carlson: Yes. The PERS board does not go away. The bill attempted to tie those two closer together so that we don't get this information the day we see the Governor's budget address on the floor. This quarterly ties those together so they don't get separated and we get up to date information.

Senator Bekkedahl: The PERS board retirement oversite responsibilities that you mentioned versus health plan system; is there ever any consideration of further separation of those duties from the PERS board so they become more of a retirement board and less of a health plan system board or are they still going to have responsibilities in both areas?

Representative Carlson: One of my bills in the first half did more of that because there is a fiduciary responsibility on the retirement side. I am not sure the legislature should be in charge of that because of the ways thing change every two years. If there is better language to that, I think that is crucial.

Senator Bekkedahl: In Williston we used to be self-insured but after the 80's boom and bust, we went from 245 employees in our pool to under 100. We suffered under the smaller numbers but then we came back into PERS. I do not think that is an issue with the size of the employee base for the state, but my question is if we could do an actuarial review of the current employee base? We are facing some employee downsizing as well.

Representative Carlson: That is easy information to find. There are about 630 less public employee positions and over 700 less in higher education. By far thought, this would be the largest self-insured plan in the state. There are reasons why states are self-insured. They found the benefits that it creates to them cost wise in the long run. Our services have not gone away. We just shrunk the size of our workforce, and in some ways services have become more demanding. This time we had a 0/0 for salary increase. We still have a fully funded health plan and we are still paying 11% to 3% of the retirement. We have a very solid package for our employees. If we wait, what is the benefit? Do we have another 2 year bid that is all ready to sign, or do we make the move now and try and lengthen this out a little bit and give them more time to recover and go forward from there?

Chairman Poolman: I am very much in agreement on the concept of having more legislative oversight since the taxpayer has to pay the bill, but in your amendments here you are having the PERS board report out but it doesn't seem to give us any teeth in terms of saying for them to go back to the drawing board and choose something else. Did you think about doing anything like that?

Representative Carlson: I was thinking about coming over here so I didn't. Even though I am in complete agreement with that. Everything we do should have an end result, because in the end we are responsible for the laws and for the money. I think it should have more teeth but I was not sure how to get it done. I tried to do an advisory board but that did not go over in the Senate. There is an opportunity to do this better but I just haven't got all of the logistics figured out yet.

Chairman Poolman: Have you thought about increasing the amount of legislators on Employee Compensation Commission?

Representative Carlson: That is probably be a good way to do it. They should be elected legislators and voting members. If you can think of wording this better, I am all for it.

(39:30) Lisa Carlson, Senior Director, Market Strategy, Sanford Health Plan: Testified in opposition to the bill. We believe that the bill amounts to an unconstitutional impairment of our existing contract. However, if the date were to change to the expiration of our contract to June 30th of 2021, we would be happy to support this bill. Sanford Health Plan stands neutral on whether the state chooses to self-fund or not. In fact, we operate in 3 other states and it is common place for state public employee plans to self-fund. Our 2015 bid with PERS included a self-funded bid as well as a fully insured bid. We would be happy to continue to bid on that after the expiration of our current proposal. After our initial two year, we met our prescribed performance guarantees in the satisfaction standards pursuant to our contract and the board began their renegotiations with us in August of 2016 as they are required. They concluded in September of 2016, at which point the PERS board voted to renew the contract for another two-year term beginning July 1, 2017 – June 30th, 2019. Likewise, the

PERS board has another option to renew the contract effective July 1, 2019.If this bill passed, we believe Section 5 of the current bill draft does impair our existing contract. Representative Carlson did make note that Sanford Health Plan is going to try to recover our cost and that is why we are trying to extend the contract. We would like to clarify a very important part of our existing contract. Our contract with PERS is set so that 50% of the profits of the first $3 million are split 50/50 with the state. The most Sanford Health Plan can make on this contract moving forward is $1.5 million. There is not recouping the cost that we have incurred on this contract. Therefore, the state then actually has only up side benefit to this contract. Any profits above the $3 million belongs to PERS and the state. Any losses are not owned by the state at all. They are completely Sanford Health Plans losses going forward. The state is in a very unique position having a fully self-funded model but a hybrid model, in which they get to have their cake and eat it too. That is a very important factor about Sanford Health Plan not wanting to preserve the contract because we are trying to recover costs. We are not going to recover our costs because of the current terms of our contract. Our desire to keep this contract lies in our initial investment in the state. We bid because we thought that we could make a positive impact on the health and infrastructure of the state employee benefit plan. We have invested time and effort with providers in every corner of the state to develop the infrastructure needed to do the best care coordination of the employees that we can possibly do. We need time to effectuate many of these changes. We spoke last time about the investments of care management. If the state wants to transition to their own self-funded model, it is in the state's best interest to have plenty of time to do that, because the state then will take on the burden of care management. The state will need the time to get the infrastructure to be able to manage a self-funded system, because once you pass the baton to become fully self-funded plan the risk becomes all yours. It only benefits the state to use the subsequent years and the current run out of the contract through 2021 to set up the infrastructure you will need so that you protect yourself from losses.

(44:15) Vice Chairman Davison: Do you remember the difference of the two bids offhand?

Lisa Carlson: I do not recall what the difference was but we can get that for you because it is public information.

Vice Chairman Davison: In this process I think there is some agreement that self-funding is a good option for North Dakota. Your testimony does have an impact on my thinking regarding the risk and the changes of what could be coming from the ACA and just our national healthcare program. It looks like we are fairly protected for any of those changes because we know what it is going to cost us. Our job here is to try and figure out a solution to this as opposed to fight over it. I am wondering if we went out two years on this and tried to figure out something in 2019, is there any flexibility to that?

Lisa Carlson: Our immediate concern is that we have a contract that is place today and we have not discussed anything beyond that.

(46:50) Senator Dever, District 32: Testified in opposition to the bill. I am not opposed to consideration of a self-insured contract, but I am in support of consideration and not just implementation without that conversation. I think the amendments in HB 1023 accomplish that. I think we should make that consideration going forward. Today is day 60 of what some had hoped would be 70 legislative days, and we are supposed to put that together? $477

million in premiums. I think we should include that in the study. I would also like to comment on a couple of other things. One is the Employee Benefits Committee. It has taken a beating in the last couple of years because some think their proposals should not stand up to this group. I think Section 7 of this bill is an example of that. It says that this act is not subject to consideration of the Employee Benefits Committee. I think that we should all play by the same rules. I think statutory committees should serve purpose and I always thought the bills and parts of bills did not go into effect until they go through the process; passed by both houses, signed by the Governor, and past the date of effectiveness. The Employee Benefits committee is statutory, and it does not exist just in the interim. It exists even through the session and we have had a few meetings even on this bill. In this session, it is made up of 7 House members and 6 Senators. If it has responsibility in some sense in a fiduciary responsibility, as the PERS board does, then I don't think you pass that responsibility off to someone else just because we are in the session. Any proposals that will effect employee benefits should be submitted by April 1st so that the Employee Benefits Committee can submit them to actuaries. That is not true in this case and not true with some of the other proposals that have come forward here. It also says that if you do not follow that process that it has no effect. I think that is problematic. New members come into the session and they have a right to introduce bills and they were not elected on April 1st. that is something that I can see setting aside, but that could be part of the study too. (Reviews the members of the PERS board.) These are all very well qualified members, and I bristle at the suggestion that these people are acting outside of any authority granted to them by the legislature in making decisions. If we are going to say that it should be controlled by the legislature, then let's consider all of different agencies that enter into contracts. Let's consider the boards that include people that are not elected. I think those are some considerations that should be made if we are going to go down that road. We need to give it more consideration than to just have a bill introduced late in the session. We do not have a fully insured plan, we have a modified fully insured plan. The profits, or overages in the premiums, that are generated from the plan that were not necessary to support the plan come back to the state. When you talk about the insurance reserve fund, that is where those profits come from. The risk that they state has in the current biennium is that we share in the first $6million of any losses 50/50. In the upcoming biennium, Sanford said that we will assume all of the risk. So when we talk about both, we have the best of both. I don't think that is something that we should set aside in the next 10 to 20 days of the session.

(55:25) Sparb Collins, Executive Director, North Dakota Public Employees Retirement System: See Attachment #2 for testimony in a neutral capacity on the bill.

(58:15) Senator Bekkedahl: You have in your testimony that the board notes that this bill would limit that competition to self-insured only and the board further notes that by limiting competition and unintended consequence may be the limitation of price competition for the plan. If that is the case, then why has the board not selected the self-insured option since you have already had that best environment for competing prices?

Sparb Collins: This board has always felt the fully insured was the best choice based on price and all of the other variables. It has never won out against the modified fully insured contract. It is not a choice between self-insured and fully insured. I can come back and go through some of the pricing considerations from last time.

Vice Chairman Davison: I need to go deeper with that question. Help me to understand what the discussion is then in why we select the modified plan as the self-insured plan; outside of the money side of things. What is the discussion then why we would not select the self-insured plan?

Sparb Collins: We would select the self-insured plan if there was that much difference in cost. This isn't a decision of what is better or worse. It comes down to capabilities of being able to provide the service. Being able to meet the plan specifications that are bid, and they are extensive. We need to make sure the carrier can replicate the plan that we have in place. It provides a uniform basis. Third is pricing. Last time it was very close and the board made the decision to maintain.
(1:01:25) Returns to testimony page 1.

(1:09:25) Chairman Poolman: What is the dollar amount of the fees?

Sparb Collins: This time it was bid at around $14 million. The last biennium with the close out, BCBS claimed closer to $18 million.

Vice Chairman Davison: In the bid, do we break administrative fees out on those bids so that we can see the differences?

Sparb Collins: I can tell you those numbers generally. We go through a fairly extensive process that involves 6-8 meetings. The first time we got bids from BCBS and Sanford both on fully insured and self-insured. We rejected the fully insured bids and went to bid again. We got back in fully insured from BCBS and Sanford. As a result of the rebid we were able to get some more favorable situations there. At the end of that we ended up with bids coming in and we narrowed it down to the BCBS fully insured and self-insured as well as the Sanford fully insured. Sanford self-insured was eliminated at that time. As we got down to that next particular point, the BCBS fully insured came in at about a 19% to 20% increase. The Sanford came in at a 15% increase. The hard thing about self-insured to peg is the with a million dollar stop loss on it BCBS was about 14.5%. If you ramp that coverage down, that would have run us about $3 million a year. You can take those coverages and buy, instead of $1 million individual of stop loss you can ramp it down to $750,000 and that about doubles the cost, etc. By the time we got down to $500,000 the self-insured with BCBS would have been about 15%. The two were identical but as we will see here in a minute, the individual stop loss only covers one risk. We still could have taken substantial losses. At the end of the day those two proposals were almost identical. One would have had more risk and this one did not have risk for you.
(1:12:48) Returns to page 5 of testimony.

(1:15:32) Senator Bekkedahl: Is there any way with the history that you could have calculated what the approximate return would have been under the self-insured?

Sparb Collins: I can tell you that under the type of contract that we have, we share a 50/50 in the first $3 million of gain and after that everything comes back to PERS. At most, it would have been about $1.5 million difference and that would be each biennium.
(1:16:42) Returns to page 6 of testimony.

(1:22:00) Senator Bekkedahl: The $30 million increase in reserves, what is the increase payment from the state in the biennium at the 17.4% increase?

Sparb Collins: Keep in mind that is not what is being put in the budget. 17.4% was the initial amount that came in to maintain the existing plan. To give you the numbers, about 5.1% is being reduced as a result of plan design change that were imposed by the Governor. This is not the PERS board, the board would just assume have the benefits stay the same. We give the options and the Governor makes the recommendation to you and you guys share those options with everyone etc.

Senator Bekkedahl: What is that number taking out the 5.1%?

Sparb Collins: That drops us down to 12.3%. About 2.4% the Governor proposed to use our reserves to buy that down. Where you are at right now is in the budget you have about a 9.8% increase for health insurance premiums in the budget for two years. That averages out to be about 4.9% a year. Which is pretty low.

Senator Bekkedahl: What is that number?

Sparb Collins: Keep in mind that the state of North Dakota is over 50% of our members is much higher in terms of the payments that are received because a lot are retirees and their premiums we pay secondary on. We will get that number for you.
(1:24:30) Sparb Collins: Returns to page 7 of testimony.

(1:35:40) Vice Chairman Davison: Sanford talked about the different kinds of support services that we would need to have in place that are part of the fully funded hybrid one that we have now. When you say the plan is the same, you are talking about dollars and cents and not necessarily quality of services, is that fair?

Sparb Collins: I am talking about the benefits being identical; the deductibles, co-pays, and the co-insurance. Like we went through last time, the behind the scene things are going to be different. No two companies offer the same exact thing. (Gave examples.) On self-insured we can hire a carrier to do this just like Sanford would. We are at risk for them though. We also know that there would be more internal things. That is why we are requesting the additional staff.

Vice Chairman Davison: What about customer service support?

Sparb Collins: It would be different.

Chairman Poolman: (Asked Edward Moody to come to the podium.) When you talk about borrowing money from the Bank of North Dakota, is this something that companies can typically do? Is a line of credit acceptable for reserves or is this unique?

Edward Moody, Director, Insurance Company Licensing and Examinations, Insurance Department: That is unique to HB 1436. We do not allow lines of credit.

Chairman Poolman: Asked for some additional information for the committee. Closed the hearing on HB 1436.

2017 SENATE STANDING COMMITTEE MINUTES

Government and Veterans Affairs Committee
Sheyenne River Room, State Capitol

HB1436
4/10/2017
Job Number 30012

☐ Subcommittee
☐ Conference Committee

Committee Clerk Signature

Explanation or reason for introduction of bill/resolution:

A BILL for an Act to amend and reenact sections 54-35-02.4, 54-52.1-04, 54-52.1-04.2, and 54-52.1-04.3 of the North Dakota Century Code, relating to the employee benefits program committee, public employee uniform group insurance health benefits coverage, and to provide for a retirement board line of credit; to provide a continuing appropriation; to provide for application; and to provide statements of legislative intent.

Minutes:

No Attachments

Chairman Poolman: Opened HB 1426 for committee discussion. Senator Heckaman sat in the committee as a non-voting participant for Senator Marcellais, who was absent. We should decide what we want to do with the bill today. As I look at the idea of going self-funded, I can understand why Representative Carlson has an interest of doing that in the long run. I sympathize with his arguments that we need more legislative oversight. I think he is right in both of those cases to try to start controlling the cost of health care for the state. We should study both of those issues with a specific end game in mind. That we would eventually look to go self-funded and increase legislative oversight; whether it is on the PERS board, or the employee compensation commission, or if we want to give more authority to the employee benefits committee. I think there are lots of ways we can do that. I am reluctant to support this bill at this time simply because we have a number of issues. First and foremost, being the contractual issue with Sanford. Secondly, I am very uncomfortable with saying that we have a line of credit for reserves rather than building those up over time in advance. There are several smaller issues with the bill in terms of gutting some of the employee benefits committee, responsibilities and some of those changes as well. I personally am reluctant but would like to know what the rest of the committee thinks.

Vice Chairman Davison: Did Representative Carlson bring any amendments for us to look at that he suggested.

Chairman Poolman: No, he never did.

Senator Heckaman: I have a couple of thoughts about this. While was not here in the 80's when self-insured plans were around, I understand that the cost became a white elephant in

the room, and I am sure you probably discussed that in committee before. The issue of that overriding a lot of other needs for the funding that we have right now would be something that the committee should listen to. Also, do we have a study sitting out there on this?

Chairman Poolman: We did have a study on HB 1023.

Senator Heckaman: I think that is important, and when you look at the line of credit that would be needed for this, I think it would be hard to get passed through the Senate chamber.

Senator Bekkedahl: I would agree with your earlier concerns. The current is not subject to review by the employee benefits programs committee, so personally I like to get that input and I like to see what is happening with the people on the ground. I have a little concern on that. The timelines don't really fit with where we are at in the contract. I understand that there is mitigating circumstances to that that could be worked on according to testimony, but I am not sure of that myself. It does bring some question to my mind on that. On the reserve status, I think if we are going to be going this way we need to plan our reserve status much sooner than we are at this point. That is a huge issue. The self-insurance plans that I have seen in the past that are successful dedicate adequate reserve funds before the plan is in place and not as the plan is ongoing. I am in favor of self-insurance, but it needs to be properly planned. I prefer the study that we already have in consideration to this current bill.

Senator Heckaman: In another bill that we had in Human Services, we were visiting with Sparb Collins, and they can already bid for this plan. I would assume you discussed that in the past. There is nothing prohibiting that.

Chairman Poolman: I did give the committee a copy of the last bids and when we take a look at the total projected cost, when we have self-insured options versus what we ended up taking, even the cheapest self-insured option was only $2 million less than the fully insured bid that we ended up taking, and we look back and think of all of the millions of dollars' loss that we did not take as a result of that. I think that it was a much safer bet. It comes down to risk to some extent. It is important for everyone to know that we have negotiated no risk going into the next two years. Which is important considering our fiscal situation. It does not seem like a great time for us to take a gamble on self-insurance.

Vice Chairman Davison: Moved a Do Not Pass.

Senator Bekkedahl: Seconded.

A Roll Call Vote Was Taken: 5 yeas, 0 nays, 1 absent.

Motion Carried.

Chairman Poolman will carry the bill.

Date: 4/10
Roll Call Vote #: 1

2017 SENATE STANDING COMMITTEE
ROLL CALL VOTES
BILL/RESOLUTION NO. 1436

Senate Government and Veterans Affairs Committee

☐ Subcommittee

Amendment LC# or Description: _____

Recommendation: ☐ Adopt Amendment
☐ Do Pass ☒ Do Not Pass ☐ Without Committee Recommendation
☐ As Amended ☐ Rerefer to Appropriations
☐ Place on Consent Calendar

Other Actions: ☐ Reconsider ☐ _____

Motion Made By Davison Seconded By Bekkedahl

Senators	Yes	No	Senators	Yes	No
Chairman Poolman	✓		Senator Marcellais	AB	
Vice Chairman Davison	✓				
Senator Bekkedahl	✓				
Senator Meyer	✓				
Senator Vedaa	✓				

Total (Yes) 5 No 0

Absent 1

Floor Assignment Poolman

If the vote is on an amendment, briefly indicate intent:

REPORT OF STANDING COMMITTEE

HB 1436, as engrossed: Government and Veterans Affairs Committee (Sen. Poolman, Chairman) recommends **DO NOT PASS** (5 YEAS, 0 NAYS, 1 ABSENT AND NOT VOTING). Engrossed HB 1436 was placed on the Fourteenth order on the calendar.

2017 TESTIMONY

HB 1436

HOUSE BILL NO. 1436 - SELF-FUNDED PUBLIC EMPLOYEE HEALTH INSURANCE - SUMMARY

This memorandum summarizes 2017 House Bill No. 1436. The two primary elements of this bill are proposed changes to the duties of the Employee Benefits Programs Committee and a legislative directive the Retirement Board provide the uniform group health insurance benefits through a self-insurance plan.

EMPLOYEE BENEFITS PROGRAMS COMMITTEE

Section 1 of the bill amends North Dakota Century Code Section 54-35-02.4, the law providing the powers and duties of the Employee Benefits Programs Committee. The proposed changes would narrow the duties of the committee during the interim and during legislative sessions. Current law directs the committee to consider and report on all legislative measures and proposals that would impact, actuarially or otherwise, the Public Employees Retirement System. This duty extends to bills introduced during legislative sessions and to amendments made to legislative measures during legislative sessions.

The changes made in Section 1 of the bill would limit the committee's jurisdiction to the interim and to legislative measures and proposals of the executive branch, judicial branch, and Legislative Management. The jurisdiction of the committee would not extend to the regular legislative session, and during the interim would not extend to legislative measures and proposals of individual legislators. Instead, during legislative sessions, standing committees would be charged with evaluating the impact of amendments on bills which would impact the Public Employees Retirement System.

Section 7 of the bill provides a statement of legislative intent, stating it is the intent of the 65th Legislative Assembly that House Bill No. 1436 not be subject to the jurisdiction of and related review by the Employee Benefits Programs Committee.

UNIFORM GROUP HEALTH INSURANCE - SELF-INSURANCE

Sections 2, 3, and 4 of the bill amend Sections 54-52.1-04, 54-52.1-04.2, and 54-52.1-04.3, the law authorizing the Retirement Board, to provide uniform group health insurance through a self-insurance plan. Current law allows the Retirement Board to provide benefits through a self-insurance plan if the board determines a self-insured plan is less costly than the lowest bid submitted by a carrier for a traditional health insurance plan. The proposed changes would retain this provision, plus clarify the board may provide health benefits through self-insurance if self-insurance costs less than benefits provided through a health maintenance organization (HMO) and clarifies the Legislative Assembly may direct the board to provide health benefits through a self-insurance plan. The bill retains the provision that under a self-insurance plan the board is required to limit the term of the contract to 2 years, may renegotiate for an additional 2 years without soliciting bids, and is required to solicit bids at least every 4 years. The bill clarifies the board may transition from a self-insurance plan to a traditional plan or an HMO if the self-insurance plan is more expensive than the other types of plans, and the bill clarifies if the board solicits bids for a self-insurance plan, the board also is required to solicit bids for a traditional plan or an HMO plan.

The bill retains the requirement that a self-insurance plan include stop-loss coverage and that the Retirement Board establish and maintain a contingency reserve fund to provide for adverse fluctuations in future charges, claims, costs, or expenses of the self-insurance plan and maintain an additional balance in the contingency reserve fund to cover claims incurred but not yet reported. The bill clarifies if the board transitions from a self-insurance plan to a traditional plan or an HMO, the board shall adopt a plan reasonably calculated to meet the remaining liabilities of the self-insurance plan. As part of the financial component of the self-insurance plan, the bill establishes a $50 million line of credit at the Bank of North Dakota for the board to use as necessary to provide adequate reserve funds, to purchase stop-loss insurance, and to defray other expenditures of administration of the self-insurance plan.

Section 5 of the bill directs the Retirement Board to transition from the traditional coverage to self-insurance. For the 2017-19 biennium, the board would provide coverage through traditional coverage for the first 6 months and on January 1, 2018, would transition to self-insurance. This self-insurance would be based on the same plan design and coverage as the traditional insurance plan in effect July 1, 2017. Passage of this bill would require the board to limit to 6 months the term of the contract the board is renewing effective July 1, 2017. Additionally, the board would be required to solicit bids for administration of the self-insurance plan. The initial term of the contract for administration of the self-insurance plan would be 18 months--January 1, 2018, through June 30, 2019. For the 2019-21 biennium, the board would be subject to the statutory requirements, and could renew the contract for a 2-year term, or could solicit bids for a new contract. If for the 2019-21 biennium the board solicited bids for a new self-insurance contract, under Section 54-52.1-04.2(3), the board would be required to solicit bids for traditional

insurance or an HMO, and would be required to transition from the self-insurance plan if the other plans cost less than the self-insurance plan.

Section 6 of the bill directs the Retirement Board to use available money in the health insurance reserve fund for the purpose of financing the self-insurance plan as directed under Section 5 of the bill.

Self-Funded vs. Fully-Insured state employee health plans
A self-funded health plan means that insurance is not purchased, but rather, the state insurance contributions are pooled into a state-owned reserve fund to pay claims and administrative expenses. Any money that isn't used to pay claims or administrative expenses stays in the fund.

In a fully-insured plan the state will pay premiums based on projected claims, but won't experience the benefit if the claims come in lower than expected. North Dakota Public Employees Retirement System (NDPERS) has for many years participated in the program's financial results, in most cases by receiving excess gains and accumulating reserves, and in some cases sharing underwriting losses and funding these out of accumulated gains.

What is the value of self-funding?
All 50 states provide health insurance coverage for state employees, with 49 of 50 offering self-funded and/or partially self-funded plans. North Dakota is the only state in the nation that offers only a fully-insured plan, and doesn't offer a self-funding option.

Self-funding is a proven, cost-effective method for providing employee benefits and is the preferred choice of the state's largest employers. Employers choose self-funding to control costs, save money and customize benefits. Plans can also keep their grandfathered status when transitioning to a self-funded plan, as long as they continue to meet grandfathered guidelines.

Tax savings
The Health Insurance Tax (HIT) impact averages 2.5-3% and applies to fully insured plans only. Self-funded plans do not pay the HIT tax, realizing direct savings.

No profit margin or risk charge
The profit margin and risk charge of an insurance carrier are eliminated through self-funding. Instead of paying a risk charge to the insurer in a self-funded arrangement, the sponsor will accumulate reserves by retaining program gains. These gains will provide cushion against occasional higher than expected claims not covered by stop-loss.

Health savings incentives
With fully-insured plans, wellness initiatives generally do not result in significantly lower health insurance costs. However, in a self-funding scenario, an overall improvement in employee health can lead to a reduction in claims, which feeds back into the plan's reserve funds. If those trends continue, there may be a reduction in the necessary contributions made by the state.

Risk management stop-loss programs
Managing the risk in self-funded plans is key. Heightened risk occurs when claims are higher than anticipated or when a plan is underfunded. Managing these risks are especially important with self-funded plans. Individual stop loss and aggregate stop loss levels can be purchased based on the state's comfort level and risk tolerance. The level of risk can be adjusted over time as their tolerance changes with the premium dependent on their level of tolerance.
Recommended risk management tools to support self-funded options include:

- adequate contributions into the pool
- securing stop-loss coverage
- building adequate reserves
- working with experienced consultants who specialize in self-funded groups

Carlson, Al H.

From: Knudson, Allen H.
Sent: Wednesday, January 25, 2017 8:04 AM
To: Carlson, Al H.; Delzer, Jeff W.
Subject: Health insurance premiums

Rep. Carlson:

The total funding included in Governor Dalrymple's 2017-19 executive budget for health insurance premiums is $477.3 million, of which $219.2 million is from the general fund. This is an increase of $45.6 million, of which $20.9 million is from the general fund compared to the 2015-17 biennium budget. Monthly premium rates are increasing by $119.25 or 10.6% from $1,130.22 in 2015-17 to $1,249.47 in 2017-19.

Let me know if you have any other questions.

Allen H. Knudson
ND Legislative Council
(701) 328-4231
aknudson@nd.gov

p4

Biennium	Monthly Premium	Percentage Change from Previous Biennium
2001-03	$409	16.9%
2003-05	$489	19.6%
2005-07	$554	13.3%
2007-09	$658	18.8%
2009-11	$826	25.5%
2011-13	$887	7.4%
2013-15	$982	10.7%
2015-17	$1,130	15.1%
2017-19 executive recommendation	$1,249	10.6%

The percentage increase to maintain the existing health insurance plan benefits is 17.4 percent for the 2017-19 biennium. To reduce this percentage increase, the Governor is recommending increasing member out-of-pocket expenses to reduce plan costs by $49.61 per contract, per month, which would reduce the overall increase by 4.4 percent.

The Governor is also recommending using Public Employees Retirement System (PERS) health insurance reserves to pay an additional $27.31 of premiums per contract, per month, which would reduce the overall increase by 2.45 percent. The Governor is using approximately $18.0 million of the estimated $35.0 million in health insurance reserve funds to reduce the premium rate increase. Of the $18.0 million utilized, $10.5 million relates to state employee health insurance plans, $4.4 million relates to political subdivisions, and $3.1 million relates to retiree health plans.

EMPLOYEE ASSISTANCE PROGRAM

The monthly rate for the employee assistance program remains at $1.54 per month, or $18.48 annually.

LIFE INSURANCE

The monthly rate for life insurance provided to state employees remains at $0.28 per month, or $3.36 annually.

UNEMPLOYMENT INSURANCE

Funding is included for unemployment insurance for state employees at a rate of 1 percent of the first $6,000 of an employee's annual salary ($60 per year or $120 per biennium maximum). No unemployment insurance was collected on state employee salaries during the 2013-15 and 2015-17 bienniums.

TOTAL COMPENSATION CHANGES COST

The schedule below provides the total cost of major compensation changes recommended in the 2017-19 executive budget.

	General Fund	Special Funds	Total
Salary increase of 1 percent, effective July 1, 2018	$5,447,422	$6,411,108	$11,858,530
Health insurance premium increases	20,924,659	24,626,376	45,551,035
Total	$26,372,081	$31,037,484	$57,409,565

FULL-TIME EQUIVALENT POSITIONS

The 2017-19 executive budget includes a total of 15,937.69 FTE positions, an increase of 4,100.12 FTE positions from the 2015-17 authorized level of 11,837.57 FTE positions. The total number of FTE positions for the 2017-19 biennium now reflects certain higher education positions that were previously not reflected in the budget.

The 2017-19 executive budget recommended FTE level of 15,937.69 is an overall decrease of 551.56 FTE positions compared to the adjusted 2015-17 biennium total, including a decrease of 315.27 FTE positions in higher education and a decrease of 215.61 FTE positions in all other state agencies.

The reduction of 215.61 FTE positions resulted in a decrease of $29.0 million, of which $15.9 million is from the general fund.

Major changes in FTE positions, excluding higher education, are as follows:

Agency Increases	2015-17 Authorized FTE Positions	2017-19 Executive Budget	Increase
301 - State Department of Health	365.00	381.00	16.00
530 - Department of Corrections and Rehabilitation	836.29	846.29	10.00
475 - Mill and Elevator Association	147.00	153.00	6.00

Agency Decreases	2015-17 Authorized FTE Positions	2017-19 Executive Budget	(Decrease)
380 - Job Service North Dakota	237.76	181.61	(56.15)
180 - Judicial branch	391.00	354.50	(36.50)
640 - Main Research Center	361.12	336.12	(25.00)
405 - Industrial Commission	121.75	105.25	(16.50)
125 - Attorney General	250.00	234.00	(16.00)
630 - North Dakota State University Extension Service	265.98	252.98	(13.00)
627 - Upper Great Plains Transportation Institute	54.98	43.88	(11.10)
628 - Branch research centers	120.29	110.29	(10.00)

TESTIMONY OF NDPERS
HOUSE BILL 1436

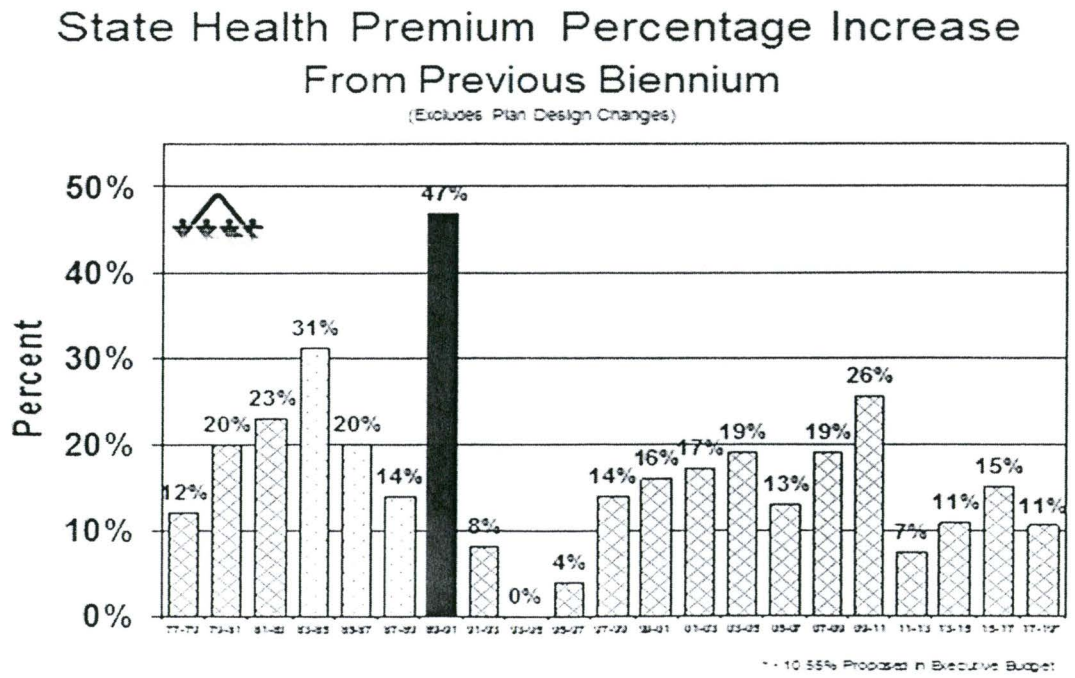
Mar 14,

Mr. Chairman, members of the committee my name is Sparb Collins. I am the Executive Director of the North Dakota Public Employees Retirement System (NDPERS). I appear before you in a neutral position on this bill. I have not yet had the opportunity to review this bill with the PERS Board and will do so this Thursday. Consequently, today I am not able to share with you their position on the bill. However, I will be able to share the information that the PERS staff and its consultants will be sharing with the board this week for its consideration and hopefully this will be helpful to you in your considerations. Attachment #1 is the bill summary that will be provided to the board and Attachment #2 is information from our consultant, Deloitte.

My comments will be in the following areas: 1) Plan history and rates; 2) Fully insured vs. self-insured compared to the PERS hybrid contract; 3) PERS hybrid contract performance, and 4) PERS staff observations.

1) Plan history and rates

The health plan has gone through three stages since about 1977. It was a traditional fully insured plan from 1977-83; it was self-insured from 1983-89 and it has been under the hybrid fully insured contract since July 1989. The following table shows the rate increases over this time period.



* - 10.55% Proposed in Executive Budget

The 1989 biennium was the transition biennium from self-insured to the hybrid fully insured plan.

While the plan was self-insured, it ran out of reserves in the 1987-89 biennium and medical claims could not be paid in a timely manner. The state had to put money into the plan so that claims could be paid since all reserves were gone and there was no other source of cash flow. Section 4 (3) of the bill provides a funding mechanism to address this situation under this proposal, specifically, a line of credit with the Bank of North Dakota.

As we look at the years the plan was self-insured, the plan's average increase was 21.7%. If we look at the years the plan was fully insured without the transition biennium, we see the average increase was 14%. With the transition biennium it was about 16%. While there are many variables to what causes a rate increase in a given biennium, these numbers do not indicate on their own that one method is superior over the other.

As we look at other states around us, we see how the family premium rates for PPO plans compare.

State	State Payment	Total Family Premium
South Dakota	$722	$1047
Idaho	$860	$979
Montana	$1054	$1381
North Dakota	**$1130***	**$1312****
Colorado	$1230	$1783
Minnesota	$1467	$1659
Nebraska	$1551	$1963
Iowa	$1689	$1987
Wisconsin	$1702	$1911
Wyoming	$1714	$1947

*Flat rate payment

** Equivalent Premium

It is our understanding that with the exception of ND, the others are self-insured. Here again, there are many variables that contribute to costs beside funding method which can include plan design, open/closed networks, number of providers, etc. But again, we do not see anything here that makes our unique funding method inferior to other self-insured plans.

2) Fully Insured vs Self-Insured vs PERS Hybrid Contract

Generally, employers have a choice between being fully insured or self-insured. As a result all employers fall on one side (fully insured) or the other (self-insured). However, PERS is unique in that it did not agree to a traditional fully insured contract. Instead it developed a unique contract that attempts to incorporate the best of both in a hybrid

contract while not disregarding the disadvantages of each. The following will help to show this:

Advantages of Fully Insured

Disadvantages to self insurance

			PERS
1	Risk	Employer is not at risk for financial Losses	X
2	Employer must retain IBNR	Additional liability for IBNR (set NDCC at 1 to 1 1/2 months of claims or 26.8M to 40.2M)	X
3	Employer must have a reserve account	Employer must maintain and fund a reserve account Set In ND statute (40.2M to 80.4 M)	X
4	Employer does not have to maintain cash flow	Uneven cash flow due to fluctuation of claims from month to month - Potential that claims may be higher than funding	X

Our present contract captures all of these advantages since it is a hybrid fully insured contract. If we were self-insured we would not have these advantages.

Advantages of Self Funding

(Disadvantages of Fully Insured)

			PERS
1	Reduction in taxes	Additional taxes are eliminated (HMO, state premium tax, MCHA)	X
2	Avoid ACA Fees	The Health Insurer tax from the ACA is not required from self-insured plans	
3	Administrative fees/risk fees	Some self funded plans see a decrease in administrative fees due to the elimination of built in risk charges	
4	Reserves/IBNR are held by the employer	Any investment income generated is retained by the employer	X
5	Flexibility	Allows for greater flexibility in plan design, incentive arrangements and contractual provisions	X
6	Pass through savings	Employer benefits from provider discounts, rebates and other favorable reimbursement mechanisms with full disclosure	X
7	Mandates	Do not have to comply with state mandates	X

Mandates: Are directly put into the PERS Statute by the Legislature instead of being handled through the insurance process

The advantages of self-insuring that are a part of the existing PERS hybrid contract are shown above. Please note that #2 is likely to go away as a result of the repeal of the affordable care act and concerning mandates, those are directly provided by the legislature relating to PERS. As shown, our hybrid contract already incorporates many of the advantages of self-insurance. Based upon the above, if we were self-insured we would gain the following:

Avoid ACA Fees	**The Health Insurer tax from the ACA is not required from self-insured plans**
Administrative fees/risk fees	**Some self-insured plans see a decrease in administrative fees due to the elimination of built in risk charges**

But we would lose the following advantages of being fully insured:

1	Risk	Employer is not at risk for financial Losses
2	Employer must retain IBNR	Additional liability for IBNR (set NDCC at 1 to 1 1/2 months of claims or 26.8M to 40.2M)
3	Employer must have a reserve account	Employer must maintain and fund a reserve account Set In ND statute (40.2M to 80.4 M)
4	Employer does not have to maintain cash flow	Uneven cash flow due to fluctuation of claims from month to month - Potential that claims may be higher than funding

3) PERS Hybrid Contract Performance

As we look at the existing PERS hybrid contract performance since the 1995 biennium, we can examine how the plan performed when there was positive performance vs when the plan had negative performance.

Positive Performance

The following table shows the history of the plan since the 1995 biennium.

History of Health Plan Design changes and Buydowns Year	State premum % increase	Plan Changes	Buydown*
2016 (2017-19) Renewal	Proposed 10.5	Proposed: Plan design changes that would shift about 30% of the total increase to member out of pocket	$18.67 per active contract Proposed
2014 (2015-17) Full Bid	15.13		
2012(2013-15) Partial bid - Fully Insured Only	10.72		$20.04 per active contract
2010 (2011-2013) Renewal	7.40	Additional benefit requirements in the Health Care Reform Bill and the Mental Health Parity Act.	
2008 (2009-2011) Renewal	25.50	Eliminated EPO	$.14 per active contract
2006 (2007-2009) Renewal	19.00	Increased Cost Sharing	
2004 (2005-07)Full bid	13.00	Plan design changes added $1,000 RX coinsurance maximum	$24.52 per active contract
2002 (2003-05) Renewal	19.00	Plan design changes	$10.00 per active contract
2000 (2001-2003) Renewal	17.00	Increased Cost Sharing	
1998(1999-2001) Full bid	16.00	Increased Cost Sharing	$9.35 per active contract
1996 (1997-1999) Renewal	14.00	Increased Benefits & Lifetime Maximum	$20.71 per active contract

The shaded bienniums are those in which the plan returned refunds to our participating employers/members that developed due to the hybrid contract we have and the boards/vendors management of the program. Of the last 11 bienniums, we have refunded money back to our employers/members in 7 bienniums through premium buy downs (including the proposal for this biennium). You can see the amount of premium buy down that we have provided the state in each of those bienniums. This is a direct savings that has resulted due to positive plan performance and has been shared with the state to reduce the cost of our health plan.

In the past 10 years alone, we have received approximately $50 million of returned premiums under our hybrid contract. Of this amount, $11 million was used to buydown premiums in the 2013-15 biennium and approximately $17 million is being proposed for buydown in the 2017-19 biennium. If the plan was self-insured and these gains would have occurred, they may not have been available to be refunded since they may have had to be retained for the required reserves as set out in NDCC 54-52.1-04.3.

Negative Performance

The second area to look at is when the plan has negatively performed. In the current biennium, the plan is projected to lose about $58 million and this could go higher before the end of the biennium.

Pursuant to our hybrid contract, we will be liable for only $3 million of this loss. For the next biennium we have negotiated this provision out of the contract and we will be liable

for no losses. Recognizing that when a plan takes a loss, reserves should be increased, we have negotiated with Sanford for the next biennium that it will increase its reserves by $30 million effective July 1 of this year.

If the plan was self-insured, we would have stop loss insurance to offset some of the above losses. The statute requires that we carry individual stop loss. At the $1 million deductible level and based upon the estimates in our last bid, the premium would have been equal to the candidate claims. At the other levels, the cost would have been more than the candidate claims to date of measurement. Consequently, the individual stop loss may not have addressed this loss situation.

We could also get aggregate stop loss (see discussion from Deloitte – attachment #2). This coverage is usually purchased for claims exceeding 115% to 120% of expected claims. This means we would be responsible for the first $52 million each year at the 15% level or about $104 million for the biennium. Also, please note that if the stop loss insurers do not accept our estimated claims level, their actuaries do their own calculation and base the price using their estimate. Consequently, at this level aggregate may not address this situation. However, this would all be subject to a bid and the responses received.

Based upon the above, it appears that if the plan would have been self-insured under Sanford this biennium, a loss would have likely accrued to the state.

2017-19 Business Plan

Using the historical process, PERS has submitted a business plan for contracting going forward that will assure the State it will not incur any losses for the health plan in 2017-19 and that there will be no required reserving pursuant to NDCC 54-52.1-04.3.

In the proposed legislation, there is no business plan that has been developed and we will, therefore, rely on the board to develop a plan starting in May. This will be contingent on the results of the extension and the bidding process for 2017-19. At this point, we cannot guarantee that we will not have losses in 2017-19 as has been guaranteed with the existing business plan. We also cannot guarantee coverage for the transition period (discussed below). We also will have to request from the state additional reserves, as we have done with Sanford and as directed by the legislature in NDCC 54-52.1-04.3 (discussed below).

4) PERS Staff Observations

Staffing

The PERS board included in the 2015-17 Budget request and in the 2017-19 request, contingent authority to hire staff if the plan is self- funded. Since we contracted for a fully insured plan, it was taken out. Please see attachment #3.

Reserves

NDCC 54-52.1-04.3 requires the board to develop a contingency reserve fund. It also states "Upon the initial changeover from a contract for insurance pursuant to section 54-52.1-04 to a self-insurance plan pursuant to section 54-52.1-04.2, the board must have a plan in place which is reasonably calculated to meet the funding requirements of the chapter within sixty months". Preliminary analysis suggests that self-funded premium rates may need to be increased by.86% to 3.14% in order to build reserves to the required level. The high end accounts for the use of contingency reserves to buy down premium. Consequently, it should be noted that this would be an additional consideration in the bidding process.

If the statute was changed to include the borrowing authority from the BND in this calculation, then the reserve requirement would be satisfied.

Transition Period

This would require PERS to go to bid and change the plan from the existing arrangement to a new arrangement. The proposed bill moves the start date of the coverage period to January 1, 2018. The current renewal offer from Sanford assumes a 2-year coverage period beginning July 1, 2017. Sanford may require a different premium rate to insure a six month period than was agreed upon for a 2-year period, or they may be opposed to insuring the plan for that period. This may require using additional reserves or borrowing from the BND.

The PERS attorney has also reviewed this provision and indicated that if PERS was unable to negotiate an extension with the existing carrier, it could not consider self-insurance for the interim time period under existing statute unless a full bid process was undertaken. The board would have to start a new bid process upon notification that they could not extend the contract, which could not be completed by July 1. The result would be no coverage for any of our members until a new arrangement could be reached, pursuant to existing statutory requirements. **Additional statutory authority is required to resolve this issue.**

Implementation Timeframe

Given the size and complexity of the NDPERS plan, changing carriers is a significant effort. I have brought along a copy of the implementation plan used most recently and will leave it with the committee. You will note that it is extensive and takes time to complete all the steps. As this demonstrates, there are many variables that must be worked through to ensure that a transition does not create difficulties in the continuity of care or benefits for participating members. At a minimum, most carriers have indicated that 90 days is necessary, with the NDPERS preference being 120 days or longer, in order to ensure continuity of coverage during the course of the transition. **Extend the Implementation/Bid timeframe to 12 months with a July 2018 effective date.**

Bid Timeframe

An effective bid process must allow sufficient time for the following:

1. Preparation of the Request for Proposals (RFP)
2. Marketing the RFP
3. Allowing time for interested parties to review the RFP
4. Allowing interested parties to submit questions and receive responses
5. Allowing the interested parties sufficient time to prepare final proposals once questions have been answered
6. Time for review of the proposals by
    a. Consultant
    b. NDPERS Staff
    c. NDPERS Board
7. Allowing time to interview the bidders and get best and final offers.
8. Time for unexpected contingencies. (For example in 2014/15, NDPERS rejected all fully insured bids and rebid the plan for a second time)

The timeline for the last bid is below. This demonstrates that the process can take over 6 months in the event there is a rebid (this does not include the time to prepare the bid).

- July 9, 2014 – Fully-insured Bid issued
- August 13th – Self-insured Bid issued for medical and prescription drug plans
- September 4th – Fully-insured Proposals Due
- October 10th – Self-Insured Proposals Due
- October 21st – Staff interview with BCBS and Sanford (Fully-insured)
- October 23rd – Board Rejects Fully-insured Bids, and issues a new RFP.
- October 29th – Fully-insured RFP released
- November 19th – Fully-insured Proposals due
- November 24th – Staff interview with BCBS and Sanford (Self-Insured)
- November 25th – Staff interview of PBM vendors
- December 4th – approved sending PBM contracts
- December 18th – NDPERS Board reviewed the Health plan bids
- January 2, 2015 – Best and Final Offer (BAFO) responses due
- January 5th – NDPERS Board Interviews BCBS and Sanford (fully-insured)
- January 15th – NDPERS Board interviews PBM vendors
- January 19th – NDPERS Board members and staff conduct a site visit of Sanford Health Plan
- February 5th – NDPERS Board reviews proposals (fully-insured, self-insured, Rx)

- February 13th – NDPERS Board continues its review of proposals (fully-insured, self-insured, Rx)
- February 19th – NDPERS Board awards bid

This timeline will be shorter since it is only for self insured bids.

Extend the Implementation/Bid timeframe to 12 months with a July 2018 effective date.

Legal Issue

There may be concerns with Section 18 of Article I of the North Dakota Constitution relating to impairment of contract.

Membership
No effect on membership except for the change of vendor if determined in the bid.

Application to other entities.

Does this requirement apply to political subdivisions, retirees and Medicare Part D program administered by PERS. **Clarification is needed in statute relating to these other programs.**

Potential impacts relating to other pending legislation

HB 1023: The changes proposed in Sections 27 and 28 of 1023 increase oversight of PERS by the employee benefits programs committee as well as communication between the two entities. While not a conflict in law, the changes proposed in Section 1 of 1436 are a conflict in policy as these changes reduce the impact of such oversight and communication. The changes proposed in Sections 32 and 33 of 1023 would result in a sole fiduciary oversight of the PERS office, and as previously indicated there are fiduciary responsibilities implicated in administration of the health plan. The requirement to initiate a plan of self-insurance under 1436 increases the potential for conflicts of interests under the governance structure established by 1023. Sections 5 and 33 of 1023 restrict PERS from using health reserve funds under 54-52.1-06 to reduce premium cost, while 1436 authorizes PERS to use them for funding a self-insured plan only. In addition, a less obvious conflict stems from the fact that 1436 requires a self-insured plan beginning 1/1/2018 to have the same benefits available under the plan in effect on 7/1/17. As previously indicated, if PERS is unable to use the reserves to buy down premiums this will result in a loss of grandfathered status and a corresponding change in benefits effective 7/1/17. Therefore, the self-insured plan will only be providing the reduced benefits available under a non-grandfathered plan.

HB 1403: The opening section of this bill indicates that its provisions apply only to an insurer's contract with the board if "the prescription drug coverage component of the health insurance benefits coverage utilizes the services of a pharmacy benefits manager", which would only be implicated under the current fully-insured plan structure where the insurance carrier is contracting with a PBM. Therefore, 1403 would not be implicated or applicable to a self-insured plan. Given that the primary effect of 1436 is to require the state to initiate a plan for self-insurance, the provisions of 1403 would not be implicated in the next biennium or for so long as the state maintained a plan for self-insurance.

HB 1406: The provisions of 1436 contradict two provisions of 1406. 1406 limits a contract for insurance, whether under a fully-insured, HMO, or self-insured plan to two years only. Whereas, Section 3 of 1436 permits a 2 year contract and one 2 year renewal under a self-insured plan. 1406 restricts the group insurance plan design to only that which can be purchased with funds appropriated by the legislative assembly. Whereas, Sections 4 and 6 of 1436 permit, under a plan of self-insurance, the board to have access to a line of credit, and use reserve funds to maintain coverage levels in effect on 7-1-17.

HB 1407: 1407 restricts the term of the contract for a fully-insured plan to 2 years; it also indicates it is intended to apply to a fully-insured contract in effect on the bill's effective date. This contradicts Section 5 of 1436 which restricts such a contract to 6 months

HMO's: PERS presently has one HMO that is a part of the plan. Not sure if the proposed wording would allow us to maintain that option or require us to drop it if self-insured.

Mr. Chairman, members of the committee this concludes my testimony and thank you for providing me this opportunity.

Short Summary:

Section 1 reduces the role of the Employee Benefits Programs Committee in reviewing legislation affecting PERS. Section 2 indicates HMO's may not be contracted with while the board administers a plan of self-insurance. Section 3 requires the board to initiate a self-insured plan, increases the frequency and scope of bids, and restricts returning to a fully-insured plan so long as it is less costly, however, doesn't speak to failure to fund issues. Section 4 establishes a line of credit for PERS with BND to pay for expenses related to a self-insured plan and also creates a presumption the state be the guarantor on payment for participation by political subdivisions. Section 5 requires the plan be self-insured as of 1/1/2018, implicates N.D. Constitution Article 1 § 18 and could result in loss of insurance coverage from 7-1-17 to 12-31-17. Section 6 requires the board to use the reserve fund to finance to the self-insured plan. Section 7 indicates that this bill isn't subject to review by the Employee Benefits Programs Committee.

Long Summary

Section 1: This section reduces the role of the Employee Benefits Programs Committee during legislative sessions. Currently, regardless of whether a bill is submitted during the interim or during the session, if it affects public employee benefits it must be reviewed by the committee. While the committee will still provide review of such legislation, so may other standing committees pursuant to the changes in subsection 6. Further, the provision in subsection 7 relating to the invalidity of legislation that fails to procure committee review is removed. The impact of the deletion of this subsection may be somewhat mitigated by legislative counsels' opinion that subsection 7 has no force and effect currently. Finally, it is unclear if the change to subsection 3, which replaces the solicitation of proposals by the committee from any interested person, to solicitation of proposals from the executive, judicial branch, and legislative branch, will result in any significant change as I am unaware of whether the committee sought legislative proposals outside of the branches of state government. Given the multiple stakeholders or beneficiaries of the employee benefits programs administered by the state, and the need to communicate proposed changes to these individuals, there is a policy concern with reducing the expectation regarding the amount of time that bills affecting employee benefits spend before the legislature.

Section 2: While the changes in Section 2 are largely cosmetic, there is a slight concern with use of the word "or" in subsection 3 of Section 2. Currently, the board may contract with an "HMO" under 54-52.1-04.1. It is my understanding that the ability of the board to contract with an HMO is independent of whether the board is also contracting for a fully-insured or self-insured plan. The board currently has one HMO that it has contracted with for several years that provides services to a specific area of the state. Subsection 3 of Section 2 states in part "the board may contract with a health maintenance organization or establish a plan of self-insurance". Use of the word "or" in this context would prevent a contract for self-insurance and contract for HMO services simultaneously. Whereas, replacing the word "or" with the word "and" would permit both simultaneously. This limitation seems intentional however, as it reappears in subsection 3 in Section 3 more explicitly where HMO's are offered as an option in lieu of self-

insurance. If an intended restriction the contract with the existing HMO would need to be terminated as of 1/1/2018.

Section 3: This section amends 54-52.1-04.2, the section affecting the board's authority to contract on a self-insured basis for hospital, medical, and prescription drug benefits coverage. The additions to this section require the board to establish a self-insured plan if directed by the legislative assembly. If passed, the legislature will have provided such direction in Section 5 of this bill. As an ongoing matter however, this language doesn't indicate how the legislative assembly will provide such direction in the future, and if it is through the future enactment of bills requiring the plan to be self-insured, the language is unnecessary. It appears self-insurance is required if directed by the legislature, and remains permissive if the board determines it is less costly than a fully-insured plan. In addition, the contract term under a self-insured plan is reduced, currently the board could only solicit bids from a third party administrator every other biennium, whereas the changes require the board to only contract for 2 years with the option to renew. There is also an additional requirement that any time the board solicits bids for a third party administrator it must also solicit bids for a fully-insured plan or HMO. This could result in the board soliciting bids every biennium as opposed to every other biennium. The regular solicitation of bids for this spectrum of services will result in increased cost to the plan and increased duties for employees responsible in preparing and evaluating the bids, however, the timing restrictions for bid solicitation are removed. Further, while the stop-loss coverage requirement for self-insured plans remains, it should be noted that as the board was able to observe during the last bid process, stop-loss coverage for a self-insured prescription drug benefit is not readily available in the market. It would be beneficial to plan administration and statutory construction if the requirement for stop-loss coverage were limited to hospital and medical benefits coverage. Finally, an additional requirement is added that creates a presumption in favor of maintaining a self-insured plan once established, indicating that the board may only transition to a fully-insured plan or HMO if the board determines the self-insurance plan costs more. It is unclear how this provision would be implicated if the reason for the desired transition is a lack of funding vs. the cost of plan administration.

Section 4: The most notably change in this section is the addition of a line of credit in the amount of 50 million dollars from BND with an interest rate set in statute, for payment of adequate reserve funds and other expenditures of the self-insured plan. The board is responsible for repaying the line of credit from health insurance premium revenue or other funds appropriated by the legislature. The language of this bill does not address participation by political subdivisions, therefore it appears political subdivisions may participate in the self-insured plan. Given the line of credit is from BND, and the board may only use insurance premiums and funds appropriate by the legislature to repay the line of credit, this would appear that the state will ultimately be taking on the responsibility of funding or guaranteeing the funds necessary for participation by political subdivisions in the self-insured plan.

Section 5: This section contains the legislative mandate that the health plan become self-insured as of 1/1/2018 and effective for 18 months. It requires that any contract for fully-insured coverage be terminated effective 12-31-17, and any contract entered into on 7-1-2017 be limited to a 6 month term. Consequences of Section 5 include implication of the prohibition of contract impairment set in N.D. Constitution Article 1 § 18 given the board has already voted to renew the current contract under the terms of

the original contract awarded in 2015; a possible lack of insurance coverage for 6 months if the current carrier declines to agree to a renewal period shorted by 18 months, noting that the board would be unable to bid for a replacement carrier because it couldn't comply with the 90 day notice requirement in 54-52.1-04 for fully insured bids or the January 1 restriction for self-insured bids under 54-52.1-04.2 (which would still apply because this bill does not contain an emergency clause and would not go into effect until 8/1), and even if issued the bid would be less attractive to carriers because of the 6 month contract limitation and the corresponding time and expense required to transition the plan.

Sections 6: This section requires the board to use the reserve fund to finance to the self-insured plan.

Section 7: This section indicates that this bill isn't subject to review by the Employee Benefits Programs Committee.

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Memo

HB 1436 testimony
Attachment 2

Date: March 13, 2017

To: Sparb Collins, Executive Director
NDPERS

From: Josh Johnson and Jon Herschbach, Deloitte Consulting LLP

Subject: ACTUARIAL REVIEW OF PROPOSED BILL 17.1008.03000 (HB1436)

The following summarizes our review of the proposed legislation.

OVERVIEW OF PROPOSED BILL

The proposed bill would require the uniform group insurance program to become self-insured for an 18-month period beginning on January 1, 2018 and would change the duration of the coverage period beginning July 1, 2017 to 6 months. The proposed bill also establishes a $50,000,000 line of credit that the board can use to fund reserves, purchase stop loss, or pay for other self-insurance expenditures.

STOP LOSS

It is mandated that NDPERS must purchase individual stop loss if the plan becomes self-insured. Individual stop loss limits the plan's liability for each members' cost of medical and pharmacy claims to a specific deductible amount. The deductible is selected based on the amount of risk the program wishes to bear. A lower deductible limits the plans exposure more but also costs more.

NDPERS could also choose to purchase aggregate stop loss. Aggregate stop loss limits the plans total exposure to a percentage of expected claims, called the attachment point. Common attachment points are 120% and 125% of expected claims. Expected claim amount and the attachment point are calculated by the stop loss insurer. The plan sponsor does not have any input into this process.

Estimated per contract per month (PCPM) rates for stop loss insurance are listed in the table below:

Individual Stop Loss

Deductible	Estimated Cost (PCPM)
$500,000	$28 - $35
$750,000	$15 - $20
$1,000,000	$7 - $10

Aggregate Stop Loss

Attachment Point	Estimated Cost (PCPM)
120%	$0.50 - $1.00
125%	$0.40 - $0.75

CONTRACTS

Currently NDPERS has contracted health insurance from a single vendor. If NDPERS becomes self-insured, they will need to contract with different vendors for several different services based on best-in-class quotes/bids. This would include medical plan administration, pharmacy benefits management, stop loss insurance, wellness program and could include additional vendors for other optional services. Increasing the number of vendors' contracts will increase NDPERS' administrative burden and would create additional consulting fees for RFP analysis assistance. In the past budgets, NDPERS has included authority for two additional staff to be added to assist with the administration of self-insurance.

ADDITIONAL RISK

NDPERS would take on additional risk by becoming self-insured. If the plan's claims cost exceeds premiums, the plan's reserves will be spent down. NDPERS is required to maintain a contingency reserve equal to a minimum of 1.5 months of claims (12.5% of annual claims). If the contingency reserve is below this level at any point, premiums must be increased in subsequent biennium periods with a load that will build the reserve back up to the statutory minimum. Currently, NDPERS contingency reserves hold about $35M and would require an estimated additional $5-6M to meet the minimum requirement.

Stop loss insurance mitigates self-insurance risk but the only way to eliminate risk is by remaining fully-insured. Commonly, the lowest attachment point available for aggregate stop loss is 120%. As an example, in the event that a 120% aggregate stop loss claim is made, NDPERS will have lost its entire reserve (12.5% of annual claims) as well as an additional ~7.5%, which is approximately ~$25M. These scenarios are not common which is reflected in the pricing (estimated premium for 120% on a group of this size is $0.50-$1.00 PEPM). However, it is important to illustrate the risk exposure that remains to NDPERS even with stop loss insurance purchased.

Self Funded Insurance (2.0 FTEs)

The health insurance environment continues to change and evolve.

If the decision is to go self insured we know that it will have an effect on PERS agency operations. The following are some of those effects:

- ACA compliance – reporting requirements
- Additional audit requirements to ascertain whether PBM has complied with the term of its agreement with regard to:
  - Pricing
  - Obligations to satisfy annual guarantees
  - Financial benefit guarantees related to subsidies, claims processor fees, manufacturer discounts, rebates, service fees
  - Medicare Part D obligations related to LIS, LIC, and TrOOP
  - Accuracy related to the management of NDPERS data
  - Satisfaction of average annual guarantees
- Monitoring activities to include:
  - Pricing of newly available generic drugs to ensure we are receiving the lowest cost from PBM
  - Attendance at quarterly meetings to negotiate drug additions or deletions, modify any previously agreed guarantees to capitalize on any improvements
  - Changes in formulary
  - Financial benefit and DIR guarantees (at least annually)
  - Implementation of new programs to improve drug coverage, improve health of plan participants, reduce costs;
  - Develop programs to decrease purchase of specialty drugs and review responsibility for quarterly prescription drug reports.
  - Assess to feasibility of negotiating independent contracts with pharmaceutical manufacturers to obtain better financial benefits.
  - General responsibilities in connection with Medicare Part D Plan to include CMS compliance.
- Liaison responsibilities between member and 3rd party vendors:
  - Increased member communications (calls, correspondence, e-mails)
  - Assistance with member inquiries (coverage, denials, appeals, complaints)
  - Documenting procedures and policies developed in response to various issues to ensure consistent operating protocols.
  - Mandate requirements
  - Plan Design maintenance

Consequently, this optional request proposes two FTE. One would be to oversee the self insured contracts. Specifically, the Rx contract would require a more active role by the agency. We would anticipate this would be an individual with a medical background and a particular expertise in Rx. The second position would be for a member service specialist in the health insurance area. This individual would be responsible for working with our members and employers in explaining and resolving issues with the group medical plan and Rx plan. Here again we would be looking for someone with a medical background.

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ID	Task Name	% Complete	Duration	Start	Finish	Predecessors	Resource Names
1	***DRAFT***						
2							
3	**ND Public Employees Retirement System**	**86%**	**488 days?**	**Mon 12/22/14**	**Mon 10/31/16**		
4	**Pre-Implementation**	**100%**	**53 days?**	**Mon 12/22/14**	**Tue 3/3/15**		
5	Notice of Intent to Negotiate	100%	1 day?	Mon 12/22/14	Mon 12/22/14		NDPERS
6	Contract Negotiation	100%	21 days	Mon 1/5/15	Mon 2/2/15		SHP/NDPERS
7	On-Site Visit	100%	1 day	Mon 1/19/15	Mon 1/19/15		SHP/NDPERS
8	Initial Implmentation (Kick-Off) Meeting	100%	1 day?	Mon 3/2/15	Mon 3/2/15		SHP/NDPERS
9	Initial Internal Configuration Meeting with ALL HP	100%	1 day?	Mon 12/22/14	Mon 12/22/14		
10	Initial configuration meeting (internal)	100%	1 day?	Tue 3/3/15	Tue 3/3/15		SHP
11	Implementation Schedule/Action Log	100%	1 day?	Tue 3/3/15	Tue 3/3/15		SHP/NDPERS
12	**Communication**	**100%**	**99 days?**	**Mon 3/2/15**	**Wed 7/15/15**		
13	**NDPERS**	**100%**	**89 days**	**Mon 3/2/15**	**Wed 7/1/15**		
14	Know how to access the Sanford Health Plan NDPERS	100%	89 days	Mon 3/2/15	Wed 7/1/15		NDPERS
15	Participate in either a virtual or in-person orientation	100%	89 days	Mon 3/2/15	Wed 7/1/15		NDPERS
16	Create a myHealthPlan account and sign up for	100%	89 days	Mon 3/2/15	Wed 7/1/15		NDPERS
17	**ND Sanford Family**	**100%**	**89 days**	**Mon 3/2/15**	**Wed 7/1/15**		
18	Tell them when the Fargo and Bismarck locations are	100%	89 days	Mon 3/2/15	Wed 7/1/15		
19	Ask ND Sanford family members to tell their friends	100%	89 days	Mon 3/2/15	Wed 7/1/15		
20	Communicate key hiring milestones and hiring of any	100%	89 days	Mon 3/2/15	Wed 7/1/15		
21	**Health Plan Employees**	**100%**	**89 days**	**Mon 3/2/15**	**Wed 7/1/15**		
22	Tell them when the Fargo and Bismarck locations are	100%	89 days	Mon 3/2/15	Wed 7/1/15		
23	Ask ND Sanford family members to tell their friends	100%	89 days	Mon 3/2/15	Wed 7/1/15		
24	Communicate key hiring milestones and hiring of any	100%	89 days	Mon 3/2/15	Wed 7/1/15		
25	**ND Public Affairs**	**100%**	**89 days**	**Mon 3/2/15**	**Wed 7/1/15**		
26	Tell them when the Fargo and Bismarck locations are	100%	89 days	Mon 3/2/15	Wed 7/1/15		
27	Ask ND Sanford family members to tell their friends	100%	89 days	Mon 3/2/15	Wed 7/1/15		
28	Communicate key hiring milestones and hiring of any	100%	89 days	Mon 3/2/15	Wed 7/1/15		
29	**ND Public Policy**	**100%**	**89 days**	**Mon 3/2/15**	**Wed 7/1/15**		
30	Tell them when the Fargo and Bismarck locations are	100%	89 days	Mon 3/2/15	Wed 7/1/15		
31	Ask ND Sanford family members to tell their friends	100%	89 days	Mon 3/2/15	Wed 7/1/15		

Project: ND Public Employees Retirem
Date: Tue 7/14/15

Task — Manual Task — Progress
Summary — Manual Summary — Manual Progress

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ID	Task Name	% Complete	Duration	Start	Finish	Predecessors	Resource Names
32	Communicate key hiring milestones and hiring of any	100%	89 days	Mon 3/2/15	Wed 7/1/15		
33	**NDPERS Members**	**100%**	**99 days?**	**Mon 3/2/15**	**Wed 7/15/15**		
34	We will continue to update FAQs on the NDPERS	100%	23 days	Mon 3/2/15	Tue 3/31/15		
35	The reminder of March will be used for ramp up of	100%	23 days	Mon 3/2/15	Tue 3/31/15		
36	**Mailing #1 (postcard welcoming NDPERS members**	**100%**	**24 days**	**Mon 3/30/15**	**Thu 4/30/15**		
37	NDPERS online landing page with contact	100%	24 days	Mon 3/30/15	Thu 4/30/15		
38	In-person orientation dates/times/locations in the	100%	24 days	Mon 3/30/15	Thu 4/30/15		
39	A heads-up on the Welcome Packet	100%	24 days	Mon 3/30/15	Thu 4/30/15		
40	NDPERS employers receive flyers to post at worksites	100%	13 days	Mon 3/30/15	Wed 4/15/15		
41	**Mailing #2 (Welcome Packets including:)**	**100%**	**1 day**	**Mon 5/4/15**	**Mon 5/4/15**		
42	Lasermark book	100%	1 day	Mon 5/4/15	Mon 5/4/15		
43	Information regarding the virtual orientation	100%	1 day	Mon 5/4/15	Mon 5/4/15		
44	In-person orientation dates/times/locations	100%	1 day	Mon 5/4/15	Mon 5/4/15		
45	Community meeting dates, times, locations are sent	100%	30 days	Mon 4/20/15	Fri 5/29/15		
46	Onsite meetings are held Apr 18-June 5, two	100%	30 days	Mon 4/20/15	Fri 5/29/15		
47	**Mailing #4 (includes a postcard with follow-up**	**100%**	**66 days?**	**Wed 4/15/15**	**Wed 7/15/15**		
48	mySanfordHealthPlan/Electronic EOB sign-up call	100%	1 day	Wed 7/15/15	Wed 7/15/15		
49	More information on health tools, including the	100%	1 day	Wed 7/15/15	Wed 7/15/15		
50	**Postcard Mailing**	**100%**	**11 days?**	**Wed 4/15/15**	**Wed 4/29/15**		
51	Schools/Universities	100%	1 day?	Wed 4/15/15	Wed 4/15/15		
52	Active/Political Subdivisions	100%	1 day?	Fri 4/24/15	Fri 4/24/15		
53	Retirees	100%	2 days	Tue 4/28/15	Wed 4/29/15		
54	**Marketing**	**88%**	**153 days**	**Mon 12/22/14**	**Mon 7/20/15**		**Lisa C**
55	**Prep Work/Communication For Onsite Meetings**	**100%**	**53 days**	**Fri 3/6/15**	**Mon 5/18/15**		
56	Powerpoint Presentation	100%	30 days	Fri 3/6/15	Wed 4/15/15		Jennie/Jimmy
57	Trinkets (Pens and Notepad)	100%	11 days	Wed 4/1/15	Wed 4/15/15		Jennie
58	Postcard Communication regarding	100%	29 days	Wed 4/1/15	Mon 5/11/15		Jennie/Brandi
59	Draft Initial Email to NDPERS employers re:	100%	23 days	Wed 4/1/15	Fri 5/1/15		Jennie/Tammy
60	Draft F/U Email to NDPERS employers re:	100%	31 days	Wed 4/1/15	Wed 5/13/15		Jennie/Tammy
61	Draft Flyer to NDPERS employers to post onsite for	100%	24 days	Wed 4/1/15	Mon 5/4/15		Jennie
62	Postcard Communication for Retirees / online	100%	34 days	Wed 4/1/15	Mon 5/18/15		Jennie/Brandi
63	**Prep Work/Materials For Onsite Meetings**	**100%**	**30 days**	**Mon 4/20/15**	**Fri 5/29/15**		

ID	Task Name	% Complete	Duration	Start	Finish	Predecessors	Resource Names
64	Informational Booklet	100%	30 days	Mon 4/20/15	Fri 5/29/15		Tammy
65	Processing NDPERS Changes	100%	30 days	Mon 4/20/15	Fri 5/29/15		Marley
66	**Informational Meetings**	**100%**	**30 days**	**Mon 4/20/15**	**Fri 5/29/15**		
67	Webinar	100%	30 days	Mon 4/20/15	Fri 5/29/15		
68	Video	100%	30 days	Mon 4/20/15	Fri 5/29/15		
69	In Person	100%	30 days	Mon 4/20/15	Fri 5/29/15		Jennie/Jimmy
70	Employee Onsite Meetings	100%	30 days	Mon 4/20/15	Fri 5/29/15		SHP/NDPERS
71	**Misc**	**100%**	**88 days**	**Tue 3/3/15**	**Wed 7/1/15**		
72	Sample ID Card Template	100%	43 days	Thu 3/5/15	Fri 5/1/15		Tammy/Mark
73	Determination of ID Card Material (Plastic or Paper)	100%	46 days	Mon 3/9/15	Fri 5/8/15		Lisa/NDPERS
74	Finalized ID Card Layout/Design	100%	50 days	Tue 3/3/15	Fri 5/8/15		Lisa/NDPERS
75	Release of ID Cards from Lasermark to NDPERS	100%	10 days	Thu 6/18/15	Wed 7/1/15		Lasermark
76	Health Savings Account Benny Cards Released to	100%	10 days	Thu 6/18/15	Wed 7/1/15		Tammy
77	Appeals & Greivances on EOB	100%	71 days	Mon 3/9/15	Fri 6/12/15		Tami H/Gail
78	Deductible & Cost-Sharing Credits (where to find?)	100%	72 days	Mon 3/9/15	Mon 6/15/15		
79	**Website**	**100%**	**84 days**	**Mon 3/9/15**	**Wed 7/1/15**		
80	NDPERS PPO Network Demo Video for onsite	100%	30 days	Mon 4/20/15	Fri 5/29/15		
81	mySanfordHealthPlan	100%	1 day	Wed 7/1/15	Wed 7/1/15		
82	setup programs/services on myHP specific to	100%	62 days	Fri 3/20/15	Mon 6/15/15		
83	NDPERS links to our portals on their page	100%	62 days	Mon 3/9/15	Mon 6/1/15		
84	**Wellness Program**	**19%**	**153 days**	**Mon 12/22/14**	**Mon 7/20/15**		
85	SHP receives electronic file for Health Club	23%	153 days	Mon 12/22/14	Mon 7/20/15		
86	ID SHP for Wellness Committee	1%	36 days	Mon 6/1/15	Mon 7/20/15		
87	**HSA**	**100%**	**87 days**	**Mon 3/2/15**	**Mon 6/29/15**		
88	Design communication/brochure, etc	100%	56 days	Mon 3/16/15	Mon 6/1/15		
89	Brochure/communication	100%	87 days	Mon 3/2/15	Mon 6/29/15		
90	Approval of Carrier Paper Template	100%	40 days	Mon 3/9/15	Thu 4/30/15		Tammy
91	Finalize Benny Card Labeling	100%	41 days	Mon 3/9/15	Fri 5/1/15		Tammy
92	**Data Requirements**	**95%**	**155 days?**	**Mon 3/2/15**	**Thu 10/1/15**		**Wyatt Y**
93	**Business Configuration**	**100%**	**14 days**	**Wed 3/4/15**	**Fri 3/20/15**		**IT/Finance**
94	Checking Accounts for Claim Payments	100%	14 days	Wed 3/4/15	Fri 3/20/15		IT/Finance
95	Premium Type = Contract	100%	14 days	Wed 3/4/15	Fri 3/20/15		IT/Finance

ID	Task Name	% Complete	Duration	Start	Finish	Predecessors	Resource Names
96	New Payer (SHP-NDPERS)	100%	14 days	Wed 3/4/15	Fri 3/20/15		IT/Finance
97	Prog# = NP	100%	14 days	Wed 3/4/15	Fri 3/20/15		IT/Finance
98	**Line of Business - confirm with NDPERS**	**100%**	**14 days**	**Wed 3/4/15**	**Fri 3/20/15**		**IT/Finance**
99	NPS - Active Members, State Employees (Panel	100%	14 days	Wed 3/4/15	Fri 3/20/15		IT/Finance
100	NPP - Active Members; Political Subdivisions	100%	14 days	Wed 3/4/15	Fri 3/20/15		IT/Finance
101	NPR - PreMedicare Retirees (Panel 005)	100%	14 days	Wed 3/4/15	Fri 3/20/15		IT/Finance
102	NPM - Retiree Medicare Supplement (Panel 001)	100%	14 days	Wed 3/4/15	Fri 3/20/15		IT/Finance
103	**Business Build**	**100%**	**9 days**	**Wed 3/11/15**	**Fri 3/20/15**		**IT/Finance**
104	Tapestry LOB build	100%	9 days	Wed 3/11/15	Fri 3/20/15		IT/Finance
105	Data Warehouse Setup	100%	9 days	Wed 3/11/15	Fri 3/20/15		IT/Finance
106	**Express Scripts Configuration**	**96%**	**87 days**	**Wed 3/4/15**	**Wed 7/1/15**		**IT/Finance**
107	Preauthoization file - Rx Formulary - Provider	85%	84 days	Mon 3/9/15	Wed 7/1/15		IT/Finance
108	Separate Carrier and File	100%	22 days	Wed 3/4/15	Wed 4/1/15		IT/Finance
109	**Plan Type**	**99%**	**46 days**	**Wed 3/4/15**	**Tue 5/5/15**		**IT/Finance**
110	NPAND - Active members - state employees	100%	46 days	Wed 3/4/15	Tue 5/5/15		IT/Finance
111	NPPND - Active members - Political Subdivions	100%	45 days	Wed 3/4/15	Mon 5/4/15		IT/Finance
112	NPRND - Pre Medicare Retirees	100%	45 days	Wed 3/4/15	Mon 5/4/15		IT/Finance
113	NPMND - Retiree MedSup	100%	45 days	Wed 3/4/15	Mon 5/4/15		IT/Finance
114	New BPL definitions	100%	34 days	Wed 3/4/15	Fri 4/17/15		IT/Finance
115	Which Plans have integrated MOOPs	100%	34 days	Wed 3/4/15	Fri 4/17/15		IT/Finance
116	**Define ID card requirements**	**100%**	**43 days**	**Wed 3/4/15**	**Thu 4/30/15**		
117	RxBIN/PCN. ESI dependency (separate contract)	100%	27 days	Thu 3/19/15	Fri 4/24/15		IT/Comm
118	Logos; wrap network logos	100%	43 days	Thu 3/19/15	Mon 5/18/15		IT/Comm
119	Claim filing, MS & UM contact info	100%	43 days	Thu 3/19/15	Mon 5/18/15		IT/Comm
120	Other specific front/back language.	100%	37 days	Thu 3/19/15	Fri 5/8/15		IT/Comm
121	**Lasermark**	**100%**	**44 days**	**Wed 4/1/15**	**Mon 6/1/15**		
122	Template setup	100%	44 days	Wed 4/1/15	Mon 6/1/15		IT/Comm
123	Packet setup?	100%	44 days	Wed 4/1/15	Mon 6/1/15		IT/Comm
124	Planning/lead time for this volume (use to	100%	23 days	Wed 4/1/15	Fri 5/1/15		IT/Comm
125	**Enrollment Eligibility**	**100%**	**91 days**	**Thu 3/12/15**	**Wed 7/15/15**		
126	**Group Setup Task Force**	**100%**	**49 days**	**Thu 3/12/15**	**Mon 5/18/15**		**IT/Finance/Enrolli**
127	**Defining the Group Structure**	**100%**	**4 days**	**Thu 3/12/15**	**Mon 3/16/15**		**IT/Finance/Enrolli**

Project: ND Public Employees Retirem
Date: Tue 7/14/15

Task — Manual Task — Progress
Summary — Manual Summary — Manual Progress

ID	Task Name	% Complete	Duration	Start	Finish	Predecessors	Resource Names
128	Reporting drivers (Finance)	100%	4 days	Thu 3/12/15	Mon 3/16/15		IT/Finance/Enrolln
129	Premium Billing drivers (Finance)	100%	4 days	Thu 3/12/15	Mon 3/16/15		IT/Finance/Enrolln
130	Benefit package drivers (Enrollment)	100%	4 days	Thu 3/12/15	Mon 3/16/15		IT/Finance/Enrolln
131	Networks (may force separate LOB)	100%	4 days	Thu 3/12/15	Mon 3/16/15		IT/Finance/Enrolln
132	Communicate Group structure to NDPERS (by	100%	4 days	Thu 3/12/15	Mon 3/16/15		IT/Enrollment
133	**Loading Methodology**	**100%**	**49 days**	**Thu 3/12/15**	**Mon 5/18/15**		**IT/Finance/Enrolli**
134	Source data	100%	37 days	Thu 3/12/15	Thu 4/30/15		IT/Finance/Enrolln
135	Imports	100%	37 days	Thu 3/12/15	Thu 4/30/15		IT/Finance/Enrolln
136	Custom Attributes (TBD)	100%	37 days	Thu 3/12/15	Thu 4/30/15		IT/Finance/Enrolln
137	Manual updates (IT/Enrollment)	100%	49 days	Thu 3/12/15	Mon 5/18/15		IT/Finance/Enrolln
138	Express Scripts BPL information	100%	26 days	Thu 3/12/15	Wed 4/15/15		IT/Finance/Enrolln
139	**Eligibility File Task Force**	**100%**	**76 days**	**Wed 4/1/15**	**Wed 7/15/15**		**IT/Enrollment**
140	Define default Panel(s) driven by Provider	100%	13 days	Wed 4/1/15	Fri 4/17/15		IT/Enrollment
141	**Initial file receipt**	**100%**	**34 days**	**Wed 4/1/15**	**Mon 5/18/15**		**IT/Enrollment**
142	**Test load to SUP**	**100%**	**34 days**	**Wed 4/1/15**	**Mon 5/18/15**		**IT/Enrollment**
143	Small scale SUP loads	100%	3 days	Wed 4/1/15	Fri 4/3/15		IT/Enrollment
144	Identify corrections	100%	34 days	Wed 4/1/15	Mon 5/18/15		IT/Enrollment
145	Communicate corrections to NDPERS	100%	34 days	Wed 4/1/15	Mon 5/18/15		IT/Enrollment
146	**Determine scrubber components needed.**	**100%**	**34 days**	**Wed 4/1/15**	**Mon 5/18/15**		**IT/Enrollment**
147	Test scrubber build in SUP	100%	34 days	Wed 4/1/15	Mon 5/18/15		IT/Enrollment
148	Small scale TAP loads	100%	19 days	Wed 4/22/15	Mon 5/18/15		IT/Enrollment
149	EMPI load	100%	29 days	Wed 4/22/15	Mon 6/1/15		IT/Enrollment
150	**TAP Clarity/Data Warehouse testing (from small**	**100%**	**54 days**	**Fri 5/1/15**	**Wed 7/15/15**		**IT/Enrollment**
151	**Generate test Indemnity Coverage**	**100%**	**29 days**	**Fri 5/1/15**	**Wed 6/10/15**		**IT/Enrollment**
152	Test termination file in SUP	100%	29 days	Fri 5/1/15	Wed 6/10/15		IT/Enrollment
153	Test ID card request/interface	100%	29 days	Fri 5/1/15	Wed 6/10/15		IT/Enrollment
154	Sample ID cards	100%	29 days	Fri 5/1/15	Wed 6/10/15		IT/Enrollment
155	**ESI Eligibility files**	**100%**	**54 days**	**Fri 5/1/15**	**Wed 7/15/15**		**IT/Enrollment**
156	Generate internal test files.	100%	29 days	Fri 5/1/15	Wed 6/10/15		IT/Enrollment
157	Submit test files to ESI mirror system	100%	29 days	Fri 5/1/15	Wed 6/10/15		IT/Enrollment
158	First ESI Production file (20 days prior to	100%	13 days	Mon 6/29/15	Wed 7/15/15		IT/Enrollment
159	Production Eligibility file processing – received	100%	20 days	Tue 4/21/15	Mon 5/18/15		IT/Enrollment

ID	Task Name	% Complete	Duration	Start	Finish	Predecessors	Resource Names
160	Production ID Cards (Stagger mailing ID Cards)	100%	9 days	Mon 6/8/15	Thu 6/18/15		IT/Enrollment
161	**Accumulator Task Force**	**99%**	**89 days**	**Mon 3/2/15**	**Wed 7/1/15**		**IT/Enrollment/Cla**
162	**File layout from BCBS**	**100%**	**77 days**	**Mon 3/2/15**	**Mon 6/15/15**		**IT/Enrollment/Cla**
163	When can a test file be obtained?	100%	47 days	Mon 3/2/15	Mon 5/4/15		IT/Enrollment/Clai
164	**Frequency**	**100%**	**1 day**	**Mon 6/15/15**	**Mon 6/15/15**		**IT/Enrollment/Cla**
165	First Production file	100%	1 day	Mon 6/15/15	Mon 6/15/15		IT/Enrollment/Clai
166	Scrubbing	100%	67 days	Mon 3/2/15	Mon 6/1/15		IT/Enrollment/Clai
167	Validation steps	100%	67 days	Mon 3/2/15	Mon 6/1/15		IT/Enrollment/Clai
168	Error reporting	100%	67 days	Mon 3/2/15	Mon 6/1/15		IT/Enrollment/Clai
169	Test Import to SUP	100%	66 days	Tue 3/3/15	Mon 6/1/15		IT/Enrollment/Clai
170	Test Import to TAP	100%	67 days	Mon 3/2/15	Mon 6/1/15		IT/Enrollment/Clai
171	Production Accum Import	100%	1 day	Mon 6/29/15	Mon 6/29/15		IT/Enrollment/Clai
172	**ESI**	**100%**	**89 days**	**Mon 3/2/15**	**Wed 7/1/15**		**IT/Enrollment/Cla**
173	Validate ESI accumulator configuration.	100%	66 days	Mon 3/2/15	Fri 5/29/15		IT/Enrollment/Clai
174	ESI Inbound (load to Tapestry) production file	100%	1 day	Wed 7/1/15	Wed 7/1/15		IT/Enrollment/Clai
175	ESI Outbound (extract from Tapestry) production	100%	1 day	Wed 7/1/15	Wed 7/1/15		IT/Enrollment/Clai
176	**Provider/Vendor Extract-Import Team**	**100%**	**45 days**	**Wed 4/1/15**	**Tue 6/2/15**		**IT/Provider**
177	**Panel/Network Import**	**100%**	**45 days**	**Wed 4/1/15**	**Tue 6/2/15**		**IT/Provider**
178	Create new Panel/network 005	100%	22 days	Fri 5/1/15	Mon 6/1/15		IT/Provider
179	Test import to SUP	100%	44 days	Wed 4/1/15	Mon 6/1/15		IT/Provider
180	Test import to TAP	100%	45 days	Wed 4/1/15	Tue 6/2/15		IT/Provider
181	Provider Contract Import	100%	44 days	Wed 4/1/15	Mon 6/1/15		IT/Provider
182	Preauth Import	100%	54 days	Wed 4/1/15	Mon 6/15/15		Tony T/Lonny
183	**Premium Billing**	**99%**	**98 days?**	**Wed 4/1/15**	**Fri 8/14/15**		**IT/Finance**
184	**Reporting Needs**	**99%**	**98 days?**	**Wed 4/1/15**	**Fri 8/14/15**		**IT/Finance**
185	NDPERS	100%	98 days	Wed 4/1/15	Fri 8/14/15		IT/Finance
186	Discrepancy Report	100%	1 day?	Wed 7/1/15	Wed 7/1/15		IT/Finance
187	Internal SHP	100%	66 days	Wed 4/1/15	Wed 7/1/15		IT/Finance
188	820 Processing	100%	54 days	Wed 4/1/15	Mon 6/15/15		IT/Finance
189	**HSA – Healthcare Savings Account**	**79%**	**98 days**	**Wed 4/1/15**	**Fri 8/14/15**		**IT/Flex**
190	Evolution1 HSA build	100%	33 days	Wed 4/1/15	Fri 5/15/15		IT/Flex
191	**Eligibility Load process**	**100%**	**51 days**	**Wed 4/1/15**	**Wed 6/10/15**		**IT/Flex**

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Task — Manual Task — Progress
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ID	Task Name	% Complete	Duration	Start	Finish	Predecessors	Resource Names
192	Demographics	100%	41 days	Wed 4/15/15	Wed 6/10/15		IT/Flex
193	Submit files to Evolution1	100%	34 days	Fri 5/15/15	Wed 7/1/15		IT/Flex
194	Benny Card mailing	25%	50 days	Mon 5/25/15	Fri 7/31/15		IT/Flex
195	**Periodic Contribution File**	**83%**	**88 days**	**Wed 4/15/15**	**Fri 8/14/15**		**IT/Flex**
196	Test	100%	44 days	Wed 4/15/15	Mon 6/15/15		IT/Flex
197	Monthly	75%	88 days	Wed 4/15/15	Fri 8/14/15		IT/Flex
198	**Flexible Spending Interface file**	**96%**	**53 days**	**Mon 5/4/15**	**Wed 7/15/15**		**IT/Flex**
199	Define Interface file	100%	53 days	Mon 5/4/15	Wed 7/15/15		IT/Flex
200	Send Test file to Administrator	100%	31 days	Mon 5/4/15	Mon 6/15/15		IT/Flex
201	Determine production file frequency.	100%	31 days	Mon 5/4/15	Mon 6/15/15		IT/Flex
202	Send first Production file	50%	11 days	Wed 7/1/15	Wed 7/15/15		IT/Flex
203	**Section 111 Setup**	**98%**	**89 days**	**Mon 6/1/15**	**Thu 10/1/15**		**IT/Flex**
204	Transmitter/ID configuration.	100%	89 days?	Mon 6/1/15	Thu 10/1/15		IT/Flex
205	Plan/Group TINs	100%	89 days?	Mon 6/1/15	Thu 10/1/15		IT/Flex
206	Incorporation into existing Section 111 processing.	95%	89 days?	Mon 6/1/15	Thu 10/1/15		IT/Flex
207	**Other Files – details TBD**	**25%**	**76 days**	**Mon 4/20/15**	**Mon 8/3/15**		**IT/Flex**
208	**Health Club Credit**	**25%**	**76 days**	**Mon 4/20/15**	**Mon 8/3/15**		**IT/Flex**
209	File source/format determination.	25%	76 days	Mon 4/20/15	Mon 8/3/15		IT/Flex
210	Existing balances?	25%	36 days	Mon 6/15/15	Mon 8/3/15		IT/Flex
211	**Integration/External functions**	**99%**	**56 days**	**Wed 4/15/15**	**Wed 7/1/15**		**IT**
212	**Healthx – myHealthPlan**	**100%**	**56 days**	**Wed 4/15/15**	**Wed 7/1/15**		**IT**
213	Potential separate instance	100%	56 days	Wed 4/15/15	Wed 7/1/15		IT
214	Specialized requirements/ branding	100%	56 days	Wed 4/15/15	Wed 7/1/15		IT
215	Initial file feed timing (dependency upon	100%	56 days	Wed 4/15/15	Wed 7/1/15		IT
216	**SocialWellth**	**100%**	**56 days**	**Wed 4/15/15**	**Wed 7/1/15**		**IT**
217	Single-Sign-On (SSO) testing/validation	100%	56 days	Wed 4/15/15	Wed 7/1/15		IT
218	**Verisk**	**100%**	**34 days**	**Wed 4/15/15**	**Mon 6/1/15**		**IT**
219	Determination of Report grouping.	100%	34 days	Wed 4/15/15	Mon 6/1/15		IT
220	**Contracts**	**89%**	**139 days**	**Mon 12/22/14**	**Tue 6/30/15**		
221	Facility Contracts (Essentia, Trinity, etc)	75%	82 days	Tue 3/10/15	Tue 6/30/15		Contracting/PR
222	**Provider**	**95%**	**139 days**	**Mon 12/22/14**	**Tue 6/30/15**		**Contracting/PR**
223	Physicians	95%	139 days	Mon 12/22/14	Tue 6/30/15		Contracting/PR

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224	Chiros	95%	139 days	Mon 12/22/14	Tue 6/30/15		Contracting/PR
225	**PPO Network Development**	**88%**	**139 days**	**Mon 12/22/14**	**Tue 6/30/15**		**Contracting/PR**
226	Draft NDPERS PPO Provider Contract Amendment	100%	84 days	Mon 1/5/15	Tue 4/28/15		Contracting/PR
227	SHP Review Electronic File of PPO Providers	100%	27 days	Mon 2/9/15	Sun 3/15/15		NDPERS
228	Send NDPERS PPO Contract Amendment to Providers	**100%**	**120 days**	**Mon 12/22/14**	**Wed 6/3/15**		**Contracting/PR**
229	Mail out Unilateral Agreements	100%	1 day	Wed 6/3/15	Wed 6/3/15		Contracting/PR
230	Mail Out Mutual Agreements	100%	1 day	Wed 6/3/15	Wed 6/3/15		Contracting/PR
231	Provider Relations Conduct follow-up Contract calls	75%	55 days	Wed 4/15/15	Tue 6/30/15		Contracting/PR
232	Configure PPO Network	75%	33 days	Fri 5/15/15	Tue 6/30/15		Contracting/PR
233	Configure Online Provider Directory to Display	85%	81 days	Mon 3/2/15	Fri 6/19/15		Contracting/PR
234	**Information Technology**	**99%**	**89 days**	**Mon 3/2/15**	**Wed 7/1/15**		**Wyatt Y**
235	**General**	**100%**	**45 days**	**Mon 3/2/15**	**Thu 4/30/15**		
236	Identify Project Lead and Application Support team	100%	1 day	Wed 3/11/15	Wed 3/11/15		Gail S
237	Identify Project Team Subject Matter Experts	100%	1 day	Mon 3/2/15	Mon 3/2/15		Gail S
238	Review Overall Build requirements	100%	0 days	Thu 4/30/15	Thu 4/30/15		Gail S
239	Complete Build Document	100%	25 days	Fri 3/27/15	Thu 4/30/15		Gail S
240	Create and Customize Build Tracker	100%	23 days	Tue 3/31/15	Thu 4/30/15		Gail S
241	**Build**	**99%**	**66 days**	**Wed 4/1/15**	**Wed 7/1/15**		**Gail S**
242	Custom Extensions	100%	44 days	Wed 4/1/15	Mon 6/1/15		Gail S
243	Utilization Management	100%	66 days	Wed 4/1/15	Wed 7/1/15		Gail S
244	Case Management	100%	44 days	Wed 4/1/15	Mon 6/1/15		Gail S
245	Customer Service Module	100%	66 days	Wed 4/1/15	Wed 7/1/15		Gail S
246	Enrollment File Processing	100%	44 days	Wed 4/1/15	Mon 6/1/15		Gail S
247	Emdeon Integration for EOBs and Ras	100%	64 days	Wed 4/1/15	Mon 6/29/15		Gail S
248	**Unit Testing**	**99%**	**62 days**	**Wed 4/1/15**	**Thu 6/25/15**		**Gail S**
249	Benefits and Custom Extensions	100%	57 days	Wed 4/1/15	Thu 6/18/15		Gail S
250	Referrals (UM)	100%	62 days	Wed 4/1/15	Thu 6/25/15		Gail S
251	Case Management	100%	62 days	Wed 4/1/15	Thu 6/25/15		Gail S
252	Inbound and outbound ANSI transactions	100%	62 days	Wed 4/1/15	Thu 6/25/15		Gail S
253	Custom File Imports	100%	62 days	Wed 4/1/15	Thu 6/25/15		Gail S
254	Benefit accumulation seed processing	100%	62 days	Wed 4/1/15	Thu 6/25/15		Gail S
255	Emdeon File processing testing	100%	57 days	Wed 4/1/15	Thu 6/18/15		Gail S

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ID	Task Name	% Complete	Duration	Start	Finish	Predecessors	Resource Names
256	**Integrated Testing**	**100%**	**22 days**	**Mon 6/1/15**	**Tue 6/30/15**		**Gail S**
257	Health Plan Operations	100%	22 days	Mon 6/1/15	Tue 6/30/15		Gail S
258	Identify Term File	100%	22 days	Mon 6/1/15	Tue 6/30/15		Gail S
259	Health System	100%	22 days	Mon 6/1/15	Tue 6/30/15		Gail S
260	Production Go-Live	100%	1 day	Wed 7/1/15	Wed 7/1/15		Gail S
261	**Utilization Management**	**100%**	**88 days**	**Mon 3/2/15**	**Tue 6/30/15**		**Tony Tiefenthale**
262	**Advanced Notification**	**100%**	**44 days**	**Wed 4/1/15**	**Mon 6/1/15**		
263	Preauthorization	100%	44 days	Wed 4/1/15	Mon 6/1/15		Tony Tiefenthaler
264	**Referral Process/Precert, etc.**	**100%**	**88 days**	**Mon 3/2/15**	**Tue 6/30/15**		
265	Referral process - explanation and understanding	100%	16 days	Mon 3/2/15	Fri 3/20/15		SHP/NDPERS
266	UM Team Reviews list of prior-authorizations from	100%	65 days	Wed 4/1/15	Tue 6/30/15		SHP/NDPERS
267	Receive Provider Referrals	100%	62 days	Mon 3/9/15	Mon 6/1/15		Dr. Crandell
268	UM Team Reviews list of referrals from incumbant	100%	65 days	Wed 4/1/15	Tue 6/30/15		SHP
269	**Transplants**	**100%**	**43 days**	**Fri 5/1/15**	**Tue 6/30/15**		
270	Incumbent carrier sends list of patients on transplant	100%	43 days	Fri 5/1/15	Tue 6/30/15		SHP
271	**Pharmacy**	**57%**	**488 days**	**Mon 12/22/14**	**Mon 10/31/16**		**Dr. Crandell**
272	Formulary	100%	1 day?	Mon 12/22/14	Mon 12/22/14		
273	Disruption	95%	106 days	Mon 3/9/15	Fri 7/31/15		
274	Pharmacy Team Reviews list of members on	100%	71 days	Wed 3/25/15	Wed 7/1/15		SHP
275	Receive Rx Utilization File from PERS in-house for	100%	27 days	Wed 3/25/15	Thu 4/30/15		SHP
276	Receive and Process Formulary Exception Requests; grand	100%	65 days	Thu 4/2/15	Wed 7/1/15		SHP
277	Pharmacy Team notifies members 1) who need to	100%	21 days	Thu 6/11/15	Thu 7/9/15	274	SHP
278	Handbook	100%	63 days	Mon 3/9/15	Tue 6/2/15		SHP
279	Launch Diabetes copay waiver program with NDPhA –	85%	124 days	Mon 4/13/15	Thu 10/1/15		Dr. Crandell
280	**Pharmacy Benefits**	**33%**	220 days	Mon 3/2/15	Thu 12/31/15		
281	SHP review documents/benefit comparison	100%	11 days	Mon 3/2/15	Sun 3/15/15		SHP/ESI
282	ESI Developing Implementation Plan	100%	13 days	Tue 3/3/15	Wed 3/18/15		SHP/ESI
283	Review Enrollment and Eligibility with ESI	100%	1 day	Thu 3/19/15	Thu 3/19/15		IT
284	Built account, copay and benefit structure (BPL)	100%	43 days	Fri 5/1/15	Tue 6/30/15		IT
285	Review Clinical Operation Requirements (standard or	100%	52 days	Fri 3/20/15	Mon 6/1/15		SHP/ESI
286	Transfer of out of pocket maximums	100%	84 days	Mon 3/9/15	Wed 7/1/15		IT
287	Implementing Medicare Part D effective 1/1/2016	10%	84 days	Fri 9/4/15	Wed 12/30/15		SHP/ESI

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ID	Task Name	% Complete	Duration	Start	Finish	Predecessors	Resource Names
288	Low Income Subsidy (LIS) - Part D	0%	215 days	Mon 3/9/15	Thu 12/31/15		SHP/ESI
289	Member rebate accounts	10%	215 days	Mon 3/9/15	Thu 12/31/15		SHP/ESI
290	**Case Management**	**96%**	**106 days?**	**Mon 3/9/15**	**Fri 7/31/15**		**Dr. Crandell**
291	Clarify Disease Management Programs that need to be	100%	23 days	Mon 3/9/15	Tue 4/7/15		Barb Vandonslear
292	**Develop Disease Management Programs that need to**	**100%**	**68 days**	**Fri 3/13/15**	**Mon 6/15/15**		**Barb**
293	Review Clinical Practice Guidelines for Programs to	100%	30 days	Fri 3/13/15	Wed 4/22/15		Barb Vandonslear
294	Develop Identification Criteria for Programs	100%	37 days	Fri 3/13/15	Fri 5/1/15		Barb Vandonslear
295	Build Identification Queres	100%	68 days	Fri 3/13/15	Mon 6/15/15		Barb Vandonslear
296	Identify Risk Stratification Criteria	100%	57 days	Fri 3/13/15	Fri 5/29/15		Barb Vandonslear
297	Develop Program Toolkits and Materials	100%	37 days	Fri 3/13/15	Fri 5/1/15		Barb Vandonslear
298	Review Accordant Rare Disease Management	100%	18 days?	Wed 4/22/15	Fri 5/15/15		Barb Vandonslear
299	Revise Current Programs to Meet State Requirements	100%	57 days	Fri 3/13/15	Fri 5/29/15		Barb Vandonslear
300	Update Marketing Materials for NDPERS Program	95%	85 days	Fri 3/13/15	Wed 7/8/15		Barb Vandonslear
301	Complete Tapestry Build	100%	80 days	Fri 3/13/15	Wed 7/1/15		Barb Vandonslear
302	Test Tapestry Build	100%	69 days	Fri 3/27/15	Wed 7/1/15		Barb Vandonslear
303	ND PERS review of DM program materials	100%	63 days	Mon 4/6/15	Wed 7/1/15		Barb
304	Enter DM cases into Tapestry for program enrollment	100%	15 days	Thu 6/25/15	Wed 7/15/15	299	Barb Vandonslear
305	Enter CCM/CM/Healthy Pregnancy program cases into	90%	11 days	Wed 7/1/15	Wed 7/15/15	310	Barb
306	Reporting (build or add ability to run all reports for	100%	68 days	Fri 3/13/15	Mon 6/15/15		Barb Vandonslear
307	Obtain a list of current BCBS Disease management	100%	80 days	Fri 3/13/15	Wed 7/1/15		Barb Vandonslear
308	Obtain a list of current BCBS Case Management and	90%	90 days	Fri 3/13/15	Wed 7/15/15		Barb Vandonslear
309	Load DM program members in bWell and Tapestry and	75%	102 days	Fri 3/13/15	Fri 7/31/15		Barb Vandonslear
310	Rare/Complex COM Program	100%	56 days	Wed 4/15/15	Wed 7/1/15		Barb Vandonslear
311	Life Advocate (Member Advocacy Program) Program	100%	51 days?	Wed 4/22/15	Wed 7/1/15		Barb Vandonslear
312	Update and Review program letters	100%	18 days?	Wed 4/22/15	Fri 5/15/15		Barb Vandonslear
313	**COI**	**100%**	**50 days**	**Mon 4/6/15**	**Fri 6/12/15**		**Trixy**
314	Submit to state	100%	50 days	Mon 4/6/15	Fri 6/12/15		Kathy
315	**Benefits/Configuration**	**99%**	**96 days**	**Tue 3/3/15**	**Mon 7/13/15**		**Lisa**
316	Review SBC and COI to define benefits	100%	34 days	Tue 3/3/15	Thu 4/16/15		Jan/Kyle/Trixy
317	Overview with IT to explain benefits	100%	1 day	Mon 4/6/15	Mon 4/6/15		Jan/Kyle
318	Benefit Build	100%	25 days	Mon 4/13/15	Fri 5/15/15	317	Jan/Kyle
319	Testing/Build Changes	100%	26 days	Thu 5/21/15	Thu 6/25/15	318	Jan/Kyle,Pat

ID	Task Name	% Complete	Duration	Start	Finish	Predecessors	Resource Names
320	Load Accums	100%	1 day	Mon 6/29/15	Mon 6/29/15	319	IT
321	Test	100%	10 days	Tue 6/30/15	Mon 7/13/15	320	Diane
322	**Quality Assurance**	**79%**	**57 days**	**Fri 5/15/15**	**Mon 8/3/15**		**Lisa**
323	Group Setup	100%	16 days	Fri 5/15/15	Fri 6/5/15		Pat/Peggy/Renae
324	Providers/Vendors	100%	22 days	Fri 5/15/15	Mon 6/15/15		Pat/Ronnette
325	Contracts/Fee Schedules	100%	22 days	Fri 5/15/15	Mon 6/15/15		Pat/Ronnette
326	Premium Rate Tables	100%	16 days	Fri 5/15/15	Fri 6/5/15		Pat/Peggy/Renae
327	Claims – Post Go Live	25%	57 days	Fri 5/15/15	Mon 8/3/15		Ronnette/New
328	NDPERS conduct a benefit for conifguration review	100%	30 days	Fri 5/15/15	Thu 6/25/15		
329	Policy/Benefit Compare Checklist from Trixy	100%	22 days	Fri 5/15/15	Mon 6/15/15		Trixy
330	Benefit Schedule Confirmation to BCBS Policy	100%	22 days	Fri 5/15/15	Mon 6/15/15		
331	**Plan Documents/SPDs**	**100%**	**117 days?**	**Mon 12/22/14**	**Fri 5/29/15**		
332	**ID Cards**	**100%**	**117 days?**	**Mon 12/22/14**	**Fri 5/29/15**		
333	Plan Document Review	100%	1 day?	Mon 12/22/14	Mon 12/22/14		Kathy,Deb,Rebecc
334	ID Card Templated Approved	100%	21 days	Fri 4/3/15	Fri 5/1/15		SHP/NDPERS
335	Contact Lasermark regarding timeframe for design	100%	11 days	Wed 4/1/15	Wed 4/15/15		
336	ID Card Design	100%	22 days	Wed 4/1/15	Thu 4/30/15		
337	Send communication to Lasermark informing them of	100%	43 days	Wed 4/1/15	Fri 5/29/15		
338	Summary of Benefits & Coverage	100%	21 days	Fri 4/3/15	Fri 5/1/15		SHP
339	**Wellness Program**	**77%**	**263 days?**	**Thu 1/1/15**	**Thu 12/31/15**		**Lisa**
340	Employer based wellness program	100%	84 days	Fri 3/6/15	Tue 6/30/15		SHP/NDPERS
341	Member education topics	100%	42 days	Fri 3/6/15	Fri 5/1/15		SHP
342	Posters	25%	128 days	Fri 3/6/15	Mon 8/31/15		SHP
343	Emails blasts	100%	128 days	Fri 3/6/15	Mon 8/31/15		SHP
344	Monthly newsletters/coordinators & employee specific	100%	128 days	Fri 3/6/15	Mon 8/31/15		SHP
345	Monthly coordinator calls	100%	42 days	Fri 3/6/15	Fri 5/1/15		SHP
346	Vouchers	100%	150 days	Fri 3/6/15	Wed 9/30/15		SHP
347	Wellness funding	80%	128 days	Fri 3/6/15	Mon 8/31/15		SHP
348	Lt Gov Award for Worksite Wellness	100%	42 days	Fri 3/6/15	Fri 5/1/15		SHP
349	Coordinate with Healthy ND	100%	42 days	Fri 3/6/15	Fri 5/1/15		SHP
350	Coordinator Summer workshops	25%	150 days	Fri 3/6/15	Wed 9/30/15		SHP
351	Coordinator Points – 6000 points on online portal each	100%	42 days	Fri 3/6/15	Fri 5/1/15		SHP

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352	**Employee Wellness Incentives**	**54%**	**186 days**	**Mon 3/16/15**	**Mon 11/30/15**		**SHP**
353	Health Club Credit	90%	121 days	Mon 3/16/15	Mon 8/31/15		SHP
354	COSE Wellness Day	25%	143 days	Mon 3/16/15	Wed 9/30/15		SHP
355	Retiree Wellness Fair	25%	186 days	Mon 3/16/15	Mon 11/30/15		SHP
356	bWell online portal	100%	78 days	Mon 3/16/15	Wed 7/1/15		SHP
357	Explore transition/conversion of existing points from	100%	35 days	Mon 3/16/15	Fri 5/1/15		SHP
358	Health Club Credit Program ($20/month)	90%	175 days	Thu 1/1/15	Mon 8/31/15		SHP
359	Idenitfy subject Matter Experts	100%	46 days	Mon 3/2/15	Fri 5/1/15		SHP/NDPERS
360	Inventory data on site locations/program types/reward	100%	33 days	Tue 11/17/15	Thu 12/31/15		SHP/NDPERS
361	Create Implementation Plan by Site	100%	1 day	Tue 5/12/15	Tue 5/12/15		SHP/NDPERS
362	Configure Group (site divisions) for rewards platform	100%	12 days	Tue 3/31/15	Wed 4/15/15		SHP
363	Build Rewards Program with SocialWealth (bWell)	90%	89 days	Wed 4/1/15	Mon 8/3/15		SHP
364	Train Wellness Team Program Users & Assign Wellness	80%	11 days	Mon 8/17/15	Mon 8/31/15		SHP/NDPERS
365	Wellness Coach Meet & Greet Meetings scheduled for	100%	33 days	Sat 5/16/15	Tue 6/30/15		SHP/NDPERS
366	Wellness Coach Conference Calls	100%	44 days?	Wed 7/1/15	Mon 8/31/15	358	SHP/NDPERS
367	**Health Clubs**	**91%**	**121 days**	**Mon 3/16/15**	**Mon 8/31/15**		
368	Sign NIHCA Agreement	100%	35 days	Mon 3/16/15	Fri 5/1/15		SHP
369	Our IT and NIHCA IT meet to review the operations	90%	66 days	Fri 5/1/15	Fri 7/31/15		SHP
370	Marketing plan in place and renrollment form	100%	43 days	Fri 5/1/15	Tue 6/30/15		SHP
371	Communicate to NDPERS wellness coordinators	100%	53 days	Mon 4/20/15	Wed 7/1/15		SHP
372	Wellness coordinators push out info to participants	75%	91 days	Mon 4/27/15	Mon 8/31/15		SHP
373	Open Enrollment	100%	22 days	Tue 6/2/15	Wed 7/1/15		SHP
374	**ACA/Compliance Activities**	**59%**	**402 days**	**Mon 12/22/14**	**Fri 7/1/16**		
375	Reporting minimal essential coverage (6055)	0%	218 days	Wed 7/1/15	Fri 4/29/16		Lisa C
376	ACA required notices upon loss of coverage for	100%	8 days	Wed 7/1/15	Fri 7/10/15		Lisa C
377	Monitor employer lapse in coverage for change to NGF	75%	263 days	Wed 7/1/15	Fri 7/1/16		Lisa C
378	Complete an annual minimum participation and	100%	96 days	Mon 12/22/14	Thu 4/30/15		Lisa C
379	Provide a stable Grandfathered benefit design by	100%	1 day	Wed 7/1/15	Wed 7/1/15		Lisa C
380	Monitoring of performance guarantees	75%	271 days	Mon 12/22/14	Thu 12/31/15		Lisa C
381	Monitor and address legislative items	100%	1 day	Wed 7/1/15	Wed 7/1/15		Lisa C
382	**HSA**	**100%**	**133 days?**	**Mon 12/29/14**	**Mon 6/29/15**		
383	Communication to members	100%	133 days	Mon 12/29/14	Mon 6/29/15		Tammy G

Project: ND Public Employees Retirem
Date: Tue 7/14/15

Task — Manual Task — Progress
Summary — Manual Summary — Manual Progress

ID	Task Name	% Complete	Duration	Start	Finish	Predecessors	Resource Names
384	Letter to Members from NDPERS	100%	16 days?	Mon 6/8/15	Mon 6/29/15		Tammy G
385	Welcome packet to HDHP members from SHP	100%	1 day?	Mon 6/29/15	Mon 6/29/15		Tammy G
386	Workout details regarding members wishing to transfer	100%	118 days	Mon 1/5/15	Mon 6/15/15		Tammy G
387	**Value Added Programs**	**60%**	**118 days?**	**Mon 12/22/14**	**Mon 6/1/15**		
388	Grant application and contract	100%	1 day?	Mon 12/22/14	Mon 12/22/14		
389	Enrollment	100%	1 day?	Mon 12/22/14	Mon 12/22/14		
390	Claims processing	100%	1 day?	Mon 12/22/14	Mon 12/22/14		
391	Reporting requirements	50%	1 day?	Mon 12/22/14	Mon 12/22/14		
392	Invoices for grant reimbursement	50%	1 day?	Mon 12/22/14	Mon 12/22/14		
393	RX Disease Management Program (About the Patient)	100%	42 days	Fri 3/6/15	Fri 5/1/15		Dr. Crandell
394	Eligibility reporting	0%	42 days	Fri 3/6/15	Fri 5/1/15		Tammy G
395	Cost share incentive reporting	0%	42 days	Fri 3/6/15	Fri 5/1/15		SHP
396	Administer payment of invoices from NDPERS Cash	0%	42 days	Fri 3/6/15	Fri 5/1/15		SHP
397	About the Patient need to work with NDPharmacy on	100%	42 days	Fri 3/6/15	Fri 5/1/15		SHP
398	Prenatal Plus conversion to Sanford Healthy Pregnancy	100%	63 days	Fri 3/6/15	Mon 6/1/15		Barb Vandonslear
399	**Tobacco Cessation Program**	**100%**	**42 days**	**Fri 3/6/15**	**Fri 5/1/15**		**SHP**
400	System for enrollment and processing of claims for	100%	42 days	Fri 3/6/15	Fri 5/1/15		SHP
401	**Facilities**	**98%**	**56 days**	**Mon 3/2/15**	**Fri 5/15/15**		
402	**Fargo**	**100%**	**37 days**	**Mon 3/2/15**	**Mon 4/20/15**		**Trixy/Chris Reiff**
403	Office Space	100%	1 day	Mon 3/2/15	Mon 3/2/15		Kurt B/Jeff S
404	Office Build Out	100%	15 days	Tue 3/31/15	Mon 4/20/15		Mike E
405	Data/Phone Network Lines	100%	15 days	Tue 3/31/15	Mon 4/20/15		Todd M
406	Network Switches	100%	32 days	Mon 3/9/15	Mon 4/20/15		Todd M
407	Furniture/Signage	100%	33 days	Fri 3/6/15	Mon 4/20/15		Justin S
408	PC	100%	33 days	Fri 3/6/15	Mon 4/20/15		Todd M
409	Phones/Headsets	100%	33 days	Fri 3/6/15	Mon 4/20/15		Todd M
410	Copiers/Printers/Faxes	100%	33 days	Fri 3/6/15	Mon 4/20/15		Todd M
411	**Bismarck**	**95%**	**56 days**	**Mon 3/2/15**	**Fri 5/15/15**		**Trixy/Chris Reiff**
412	Office Space	75%	9 days	Mon 3/2/15	Thu 3/12/15		Kurt B
413	Office Build Out	75%	45 days	Mon 3/2/15	Thu 4/30/15		Mike E
414	Data/Phone Network Lines	100%	22 days	Wed 4/1/15	Thu 4/30/15		Todd M
415	Network Switches	100%	33 days	Wed 4/1/15	Fri 5/15/15		Todd M

ID	Task Name	% Complete	Duration	Start	Finish	Predecessors	Resource Names
416	Furniture/Signage	100%	45 days	Mon 3/16/15	Fri 5/15/15		Justin S
417	PC	100%	33 days	Wed 4/1/15	Fri 5/15/15		Todd M
418	Phones/Headsets	100%	33 days	Wed 4/1/15	Fri 5/15/15		Todd M
419	Copiers/Printers/Faxes	100%	33 days	Wed 4/1/15	Fri 5/15/15		Todd M
420	**Sioux Falls**	**100%**	**31 days**	**Mon 3/2/15**	**Fri 4/10/15**		**Trixy/Chris Reiff**
421	Office Space	100%	1 day	Fri 3/6/15	Fri 3/6/15		Jason H
422	Data/Phone Network Lines	100%	21 days	Mon 3/2/15	Fri 3/27/15		Wyatt Y
423	Network Switch	100%	21 days	Mon 3/2/15	Fri 3/27/15		Wyatt Y
424	Furniture	100%	25 days	Tue 3/10/15	Fri 4/10/15		Justin S
425	PC	100%	31 days	Mon 3/2/15	Fri 4/10/15		Wyatt Y
426	Phones/Headsets	100%	31 days	Mon 3/2/15	Fri 4/10/15		Wyatt Y
427	**Human Resources**	**99%**	**139 days?**	**Mon 12/22/14**	**Tue 6/30/15**		**Bill G**
428	**Recruiting**	**99%**	**75 days?**	**Mon 12/22/14**	**Wed 4/1/15**		**HR**
429	Hiring % Complete (tracking)	85%	1 day?	Mon 12/22/14	Mon 12/22/14		HR
430	Build job descriptions and post for all jobs in all	100%	1 day	Fri 3/6/15	Fri 3/6/15		HR
431	Determine target hire dates for all jobs	100%	1 day	Fri 3/6/15	Fri 3/6/15		HR
432	**Deploy Social Media recruiting tactics**	**100%**	**2 days**	**Fri 3/6/15**	**Mon 3/9/15**		**HR**
433	Facebook	100%	2 days	Fri 3/6/15	Mon 3/9/15		HR
434	Linked-in	100%	2 days	Fri 3/6/15	Mon 3/9/15		HR
435	Twitter	100%	2 days	Fri 3/6/15	Mon 3/9/15		HR
436	Indeed	100%	2 days	Fri 3/6/15	Mon 3/9/15		HR
437	**Deploy external online postings for all jobs**	**100%**	**2 days**	**Fri 3/6/15**	**Mon 3/9/15**		**HR**
438	Job HQ, Indeed, Job Service	100%	2 days	Fri 3/6/15	Mon 3/9/15		HR
439	College Sites/Team ND	100%	2 days	Fri 3/6/15	Mon 3/9/15		HR
440	Sanford Health Careers page	100%	2 days	Fri 3/6/15	Mon 3/9/15		HR
441	GFMEDC online advertising	100%	2 days	Fri 3/6/15	Mon 3/9/15		HR
442	Bisman Online/Craigslist	100%	2 days	Fri 3/6/15	Mon 3/9/15		HR
443	**Deploy external print ads for jobs**	**100%**	**7 days**	**Fri 3/6/15**	**Sun 3/15/15**		**HR**
444	Fargo Forum	100%	7 days	Fri 3/6/15	Sun 3/15/15		HR
445	Grand Forks Herald	100%	7 days	Fri 3/6/15	Sun 3/15/15		HR
446	Bismarck Tribune	100%	7 days	Fri 3/6/15	Sun 3/15/15		HR
447	**Schedule Career Fairs in Fargo and Bismarck**	**100%**	**75 days?**	**Mon 12/22/14**	**Wed 4/1/15**		**HR**

ID	Task Name	% Complete	Duration	Start	Finish	Predecessors	Resource Names
448	Job Service ND – Bismarck	100%	1 day	Wed 4/1/15	Wed 4/1/15		HR
449	Bismarck – on site Career Fair	100%	1 day?	Mon 12/22/14	Mon 12/22/14		HR
450	Contact area colleges and universities to advertise	100%	8 days	Fri 3/6/15	Mon 3/16/15		HR
451	Commence sign-on bonus program in Fargo and	100%	2 days	Fri 3/6/15	Mon 3/9/15		HR
452	Commence referral bonus program in Fargo and	100%	2 days	Fri 3/6/15	Mon 3/9/15		HR
453	**Onboarding**	**99%**	**1 day**	**Thu 1/1/15**	**Thu 1/1/15**		**HR**
454	Develop streamlined process for offers of	99%	1 day?	Thu 1/1/15	Thu 1/1/15		HR
455	Develop streamlined process for post-offer	99%	1 day?	Thu 1/1/15	Thu 1/1/15		HR
456	Develop streamlined process for Sanford employee	99%	1 day?	Thu 1/1/15	Thu 1/1/15		HR
457	**Orientation**	**99%**	**42 days**	**Mon 5/4/15**	**Tue 6/30/15**		**Chris R/Kyle F**
458	Sanford New Employee Orientation dates	99%	41 days	Mon 5/4/15	Mon 6/29/15		Chris R/Kyle F
459	In-person Sanford Health Plan orientation	99%	42 days	Mon 5/4/15	Tue 6/30/15		Chris R/Kyle F
460	In-person Sanford Health Plan, department specific,	99%	42 days	Mon 5/4/15	Tue 6/30/15		Kyle F
461	**Training**	**99%**	**42 days**	**Mon 5/4/15**	**Tue 6/30/15**		**Kyle F**
462	Following successful completion of Sanford's NEO,	99%	42 days	Mon 5/4/15	Tue 6/30/15		Kyle F
463	Training will include, but not be limited to the	99%	42 days	Mon 5/4/15	Tue 6/30/15		Kyle F
464	**Financial**	**100%**	**88 days**	**Mon 3/2/15**	**Tue 6/30/15**		
465	Establish Checking Accounts	100%	24 days	Mon 3/2/15	Wed 4/1/15		Debbie H
466	RBC - Review w/ DOI	100%	88 days	Mon 3/2/15	Tue 6/30/15		Cecily Tucker
467	Premium Billing Configuration	100%	54 days	Wed 4/1/15	Mon 6/15/15		Stacey D
468	Secure Reinsurance	100%	67 days	Mon 3/2/15	Mon 6/1/15		Sarah D
469	Submit Rate Filings	100%	21 days	Thu 3/5/15	Wed 4/1/15		Sarah D
470	**Reporting**	**32%**	**285 days**	**Mon 6/1/15**	**Fri 7/1/16**		
471	Financial Reporting	95%	23 days	Mon 6/1/15	Wed 7/1/15		
472	Performance Guaratnees	0%	23 days	Tue 9/1/15	Thu 10/1/15		
473	Quarterly Executive Summary and Annual Assessment	0%	23 days	Tue 9/1/15	Thu 10/1/15		
474	Monthly data files through secure file transfer system	100%	23 days	Tue 9/1/15	Thu 10/1/15		
475	Adhoc reporting including cost, utilization and risk	50%	23 days	Tue 9/1/15	Thu 10/1/15		
476	Provide flexible spending account files to NDPERS ADP	100%	23 days	Tue 9/1/15	Thu 10/1/15		
477	Manage & Report NDPERS risk sharing arrangement	0%	23 days	Tue 9/1/15	Thu 10/1/15		
478	Manage & Report NDPERS Cash Reserve Account	0%	23 days	Tue 9/1/15	Thu 10/1/15		
479	Process payments for NDPERS value added programs	0%	23 days	Tue 9/1/15	Thu 10/1/15		

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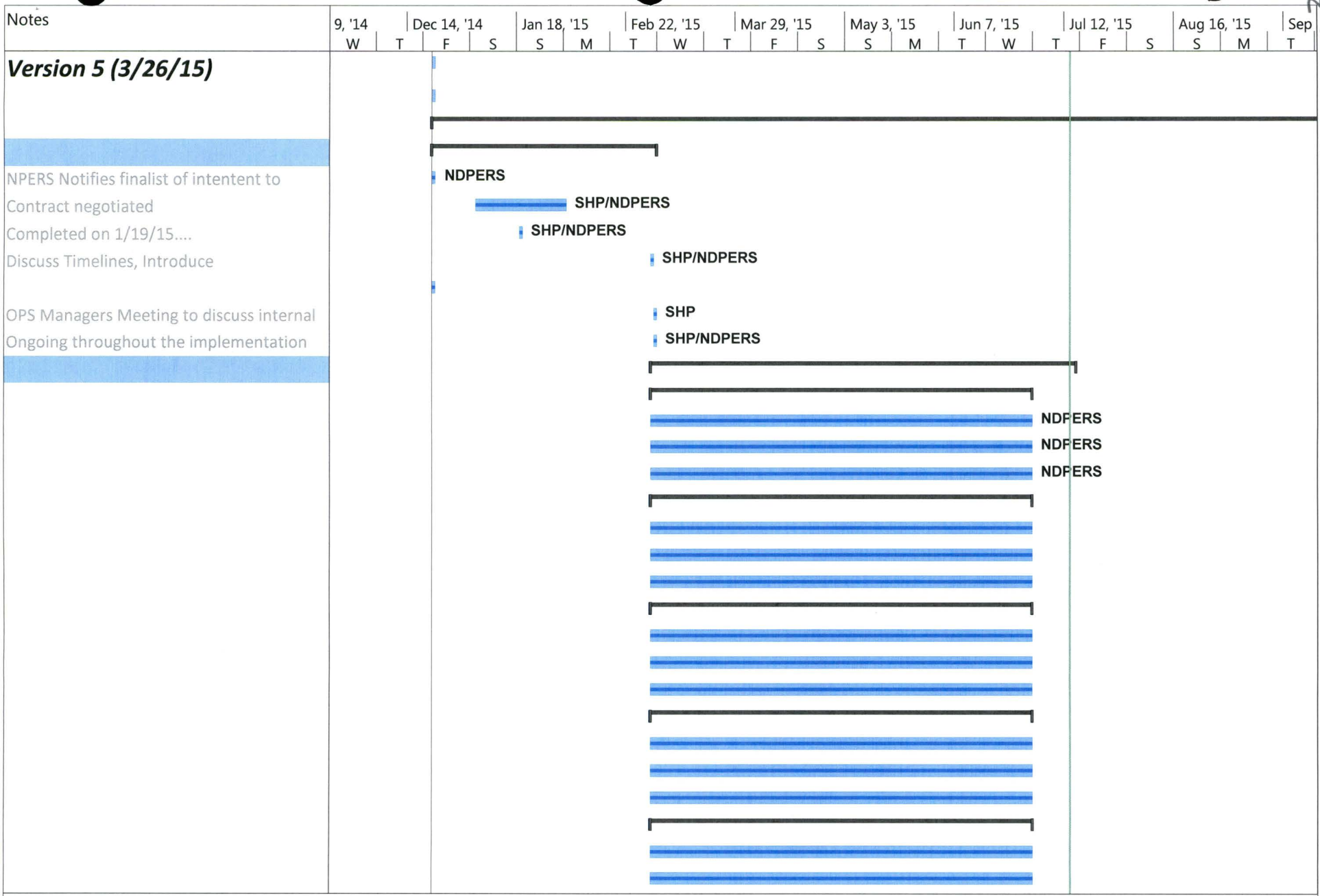
ID	Task Name	% Complete	Duration	Start	Finish	Predecessors	Resource Names
480	Billing	0%	23 days	Tue 9/1/15	Thu 10/1/15		
481	Supporting documentation for auditors, claims recap	0%	23 days	Tue 9/1/15	Thu 10/1/15		
482	All funds in the NDPERS account at SHP get interest paid	0%	23 days	Tue 9/1/15	Thu 10/1/15		
483	Risk Sharing arrangement and return of funds if claims	0%	23 days	Tue 9/1/15	Thu 10/1/15		
484	Enrollment discrepancy reports for medical and HSA	100%	23 days	Tue 9/1/15	Thu 10/1/15		



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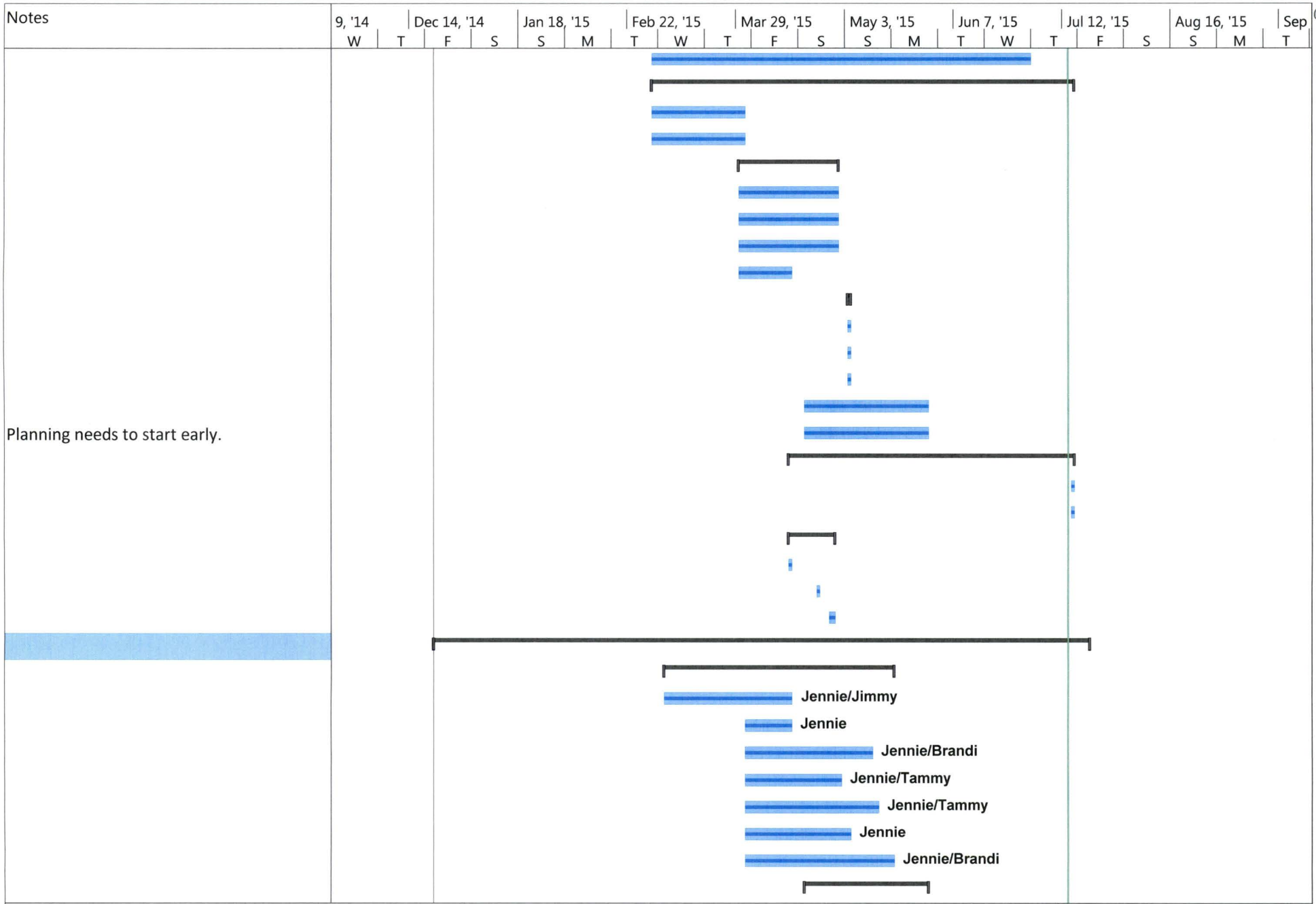

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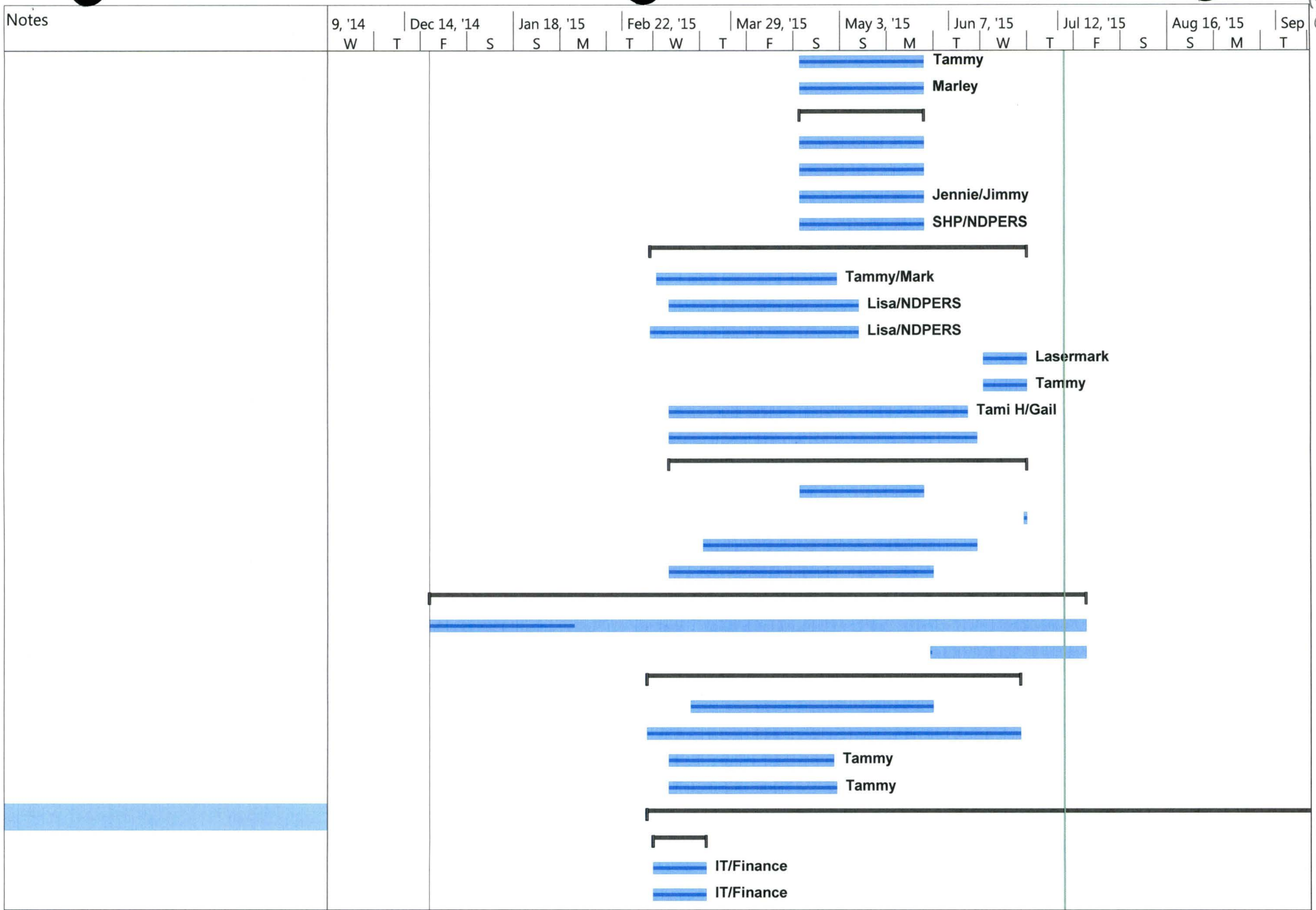

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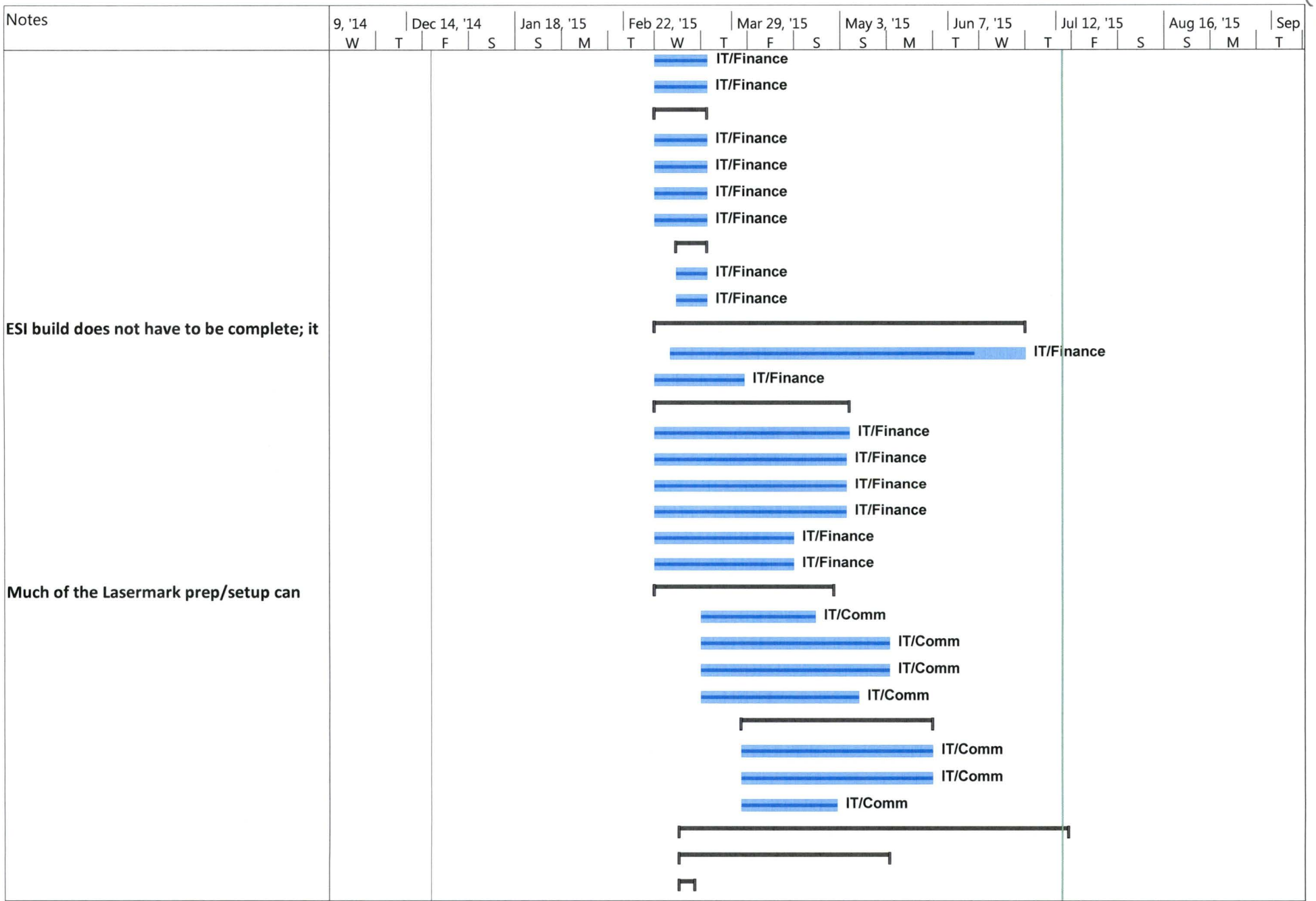
Notes
9, '14
Dec 14, '14
Jan 18, '15
Feb 22, '15
Mar 29, '15
May 3, '15
Jun 7, '15
Jul 12, '15
Aug 16, '15
Sep
W T F S S M T W T F S S M T W T F S S M T
IT/Finance
IT/Finance
IT/Finance
IT/Finance
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IT/Finance
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IT/Finance
ESI build does not have to be complete; it
IT/Finance
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Much of the Lasermark prep/setup can
IT/Comm
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							IT/Finance/Enrollment														
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							IT/Finance/Enrollment														
							IT/Finance/Enrollment														
							IT/Finance/Enrollment														
							IT/Finance/Enrollment														
When/how will this be loaded.							IT/Finance/Enrollment														
							IT/Enrollment														
Drop dead date is 4/15; ideally 4/1; TAP																					
							IT/Enrollment														
							IT/Enrollment														
							IT/Enrollment														
							IT/Enrollment														
(TAP available 4/22)							IT/Enrollment														
(Identity team will examine for issues)							IT/Enrollment														
(Expect multiple iterations)							IT/Enrollment														
							IT/Enrollment														
							IT/Enrollment														
							IT/Enrollment														
							IT/Enrollment														
																	IT/Enrollment				
Last load before ID Cards – 6/2/2015. First													IT/Enrollment								

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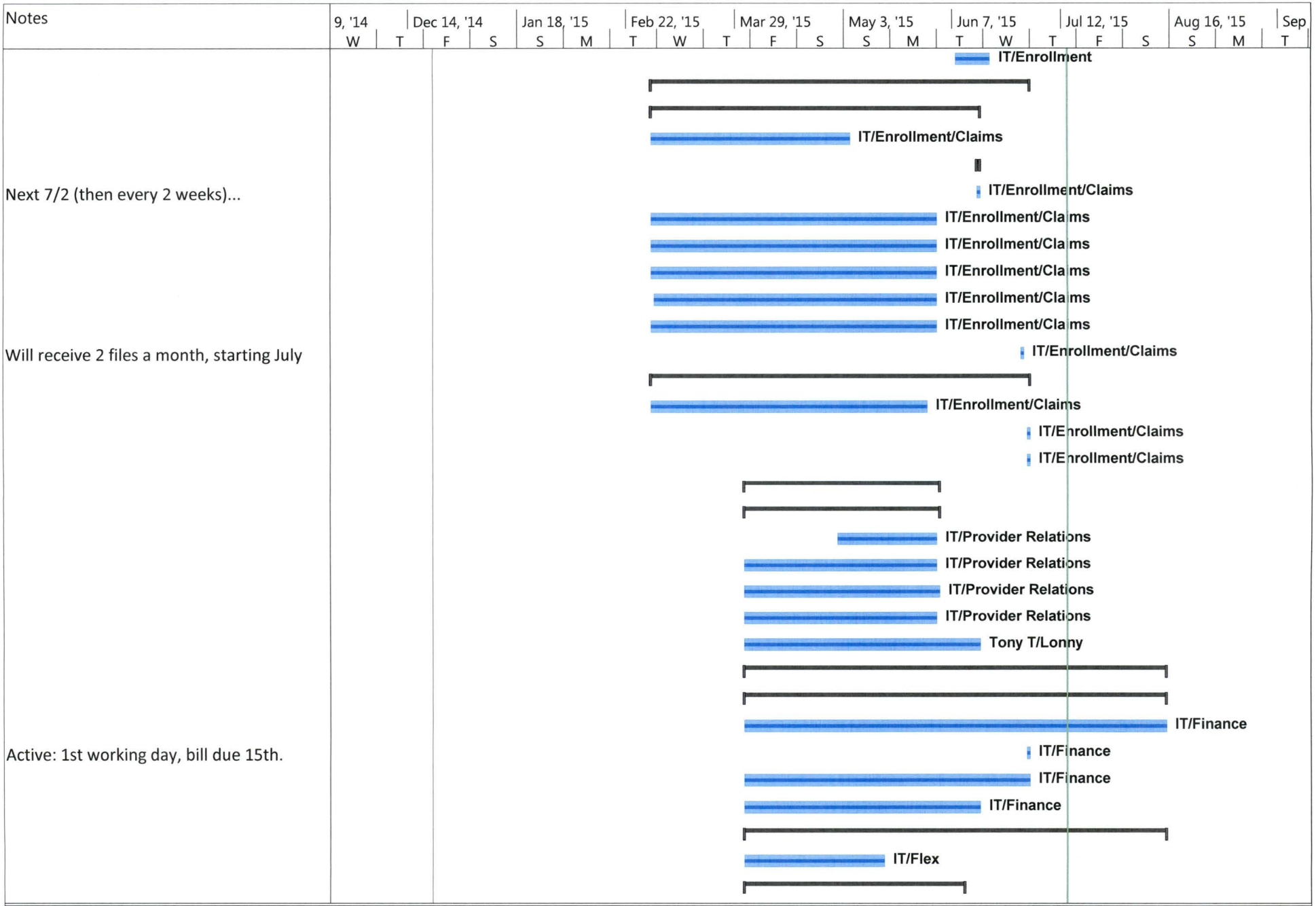
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Jul 12, '15
Aug 16, '15
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IT/Enrollment
IT/Enrollment/Claims
Next 7/2 (then every 2 weeks)...
IT/Enrollment/Claims
IT/Enrollment/Claims
IT/Enrollment/Claims
IT/Enrollment/Claims
IT/Enrollment/Claims
IT/Enrollment/Claims
Will receive 2 files a month, starting July
IT/Enrollment/Claims
IT/Enrollment/Claims
IT/Enrollment/Claims
IT/Enrollment/Claims
IT/Provider Relations
IT/Provider Relations
IT/Provider Relations
IT/Provider Relations
Tony T/Lonny
IT/Finance
IT/Finance
Active: 1st working day, bill due 15th.
IT/Finance
IT/Finance
IT/Flex
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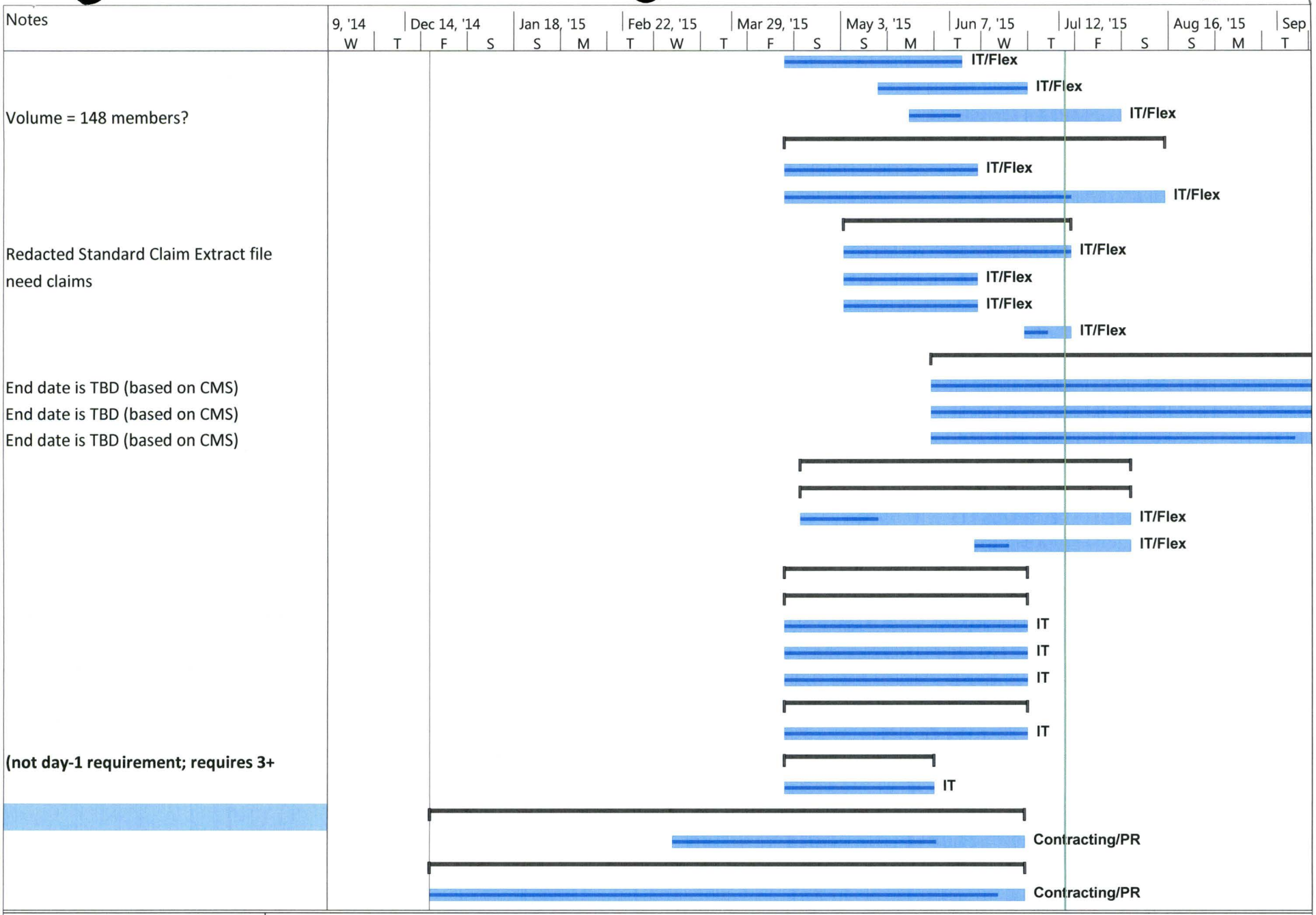

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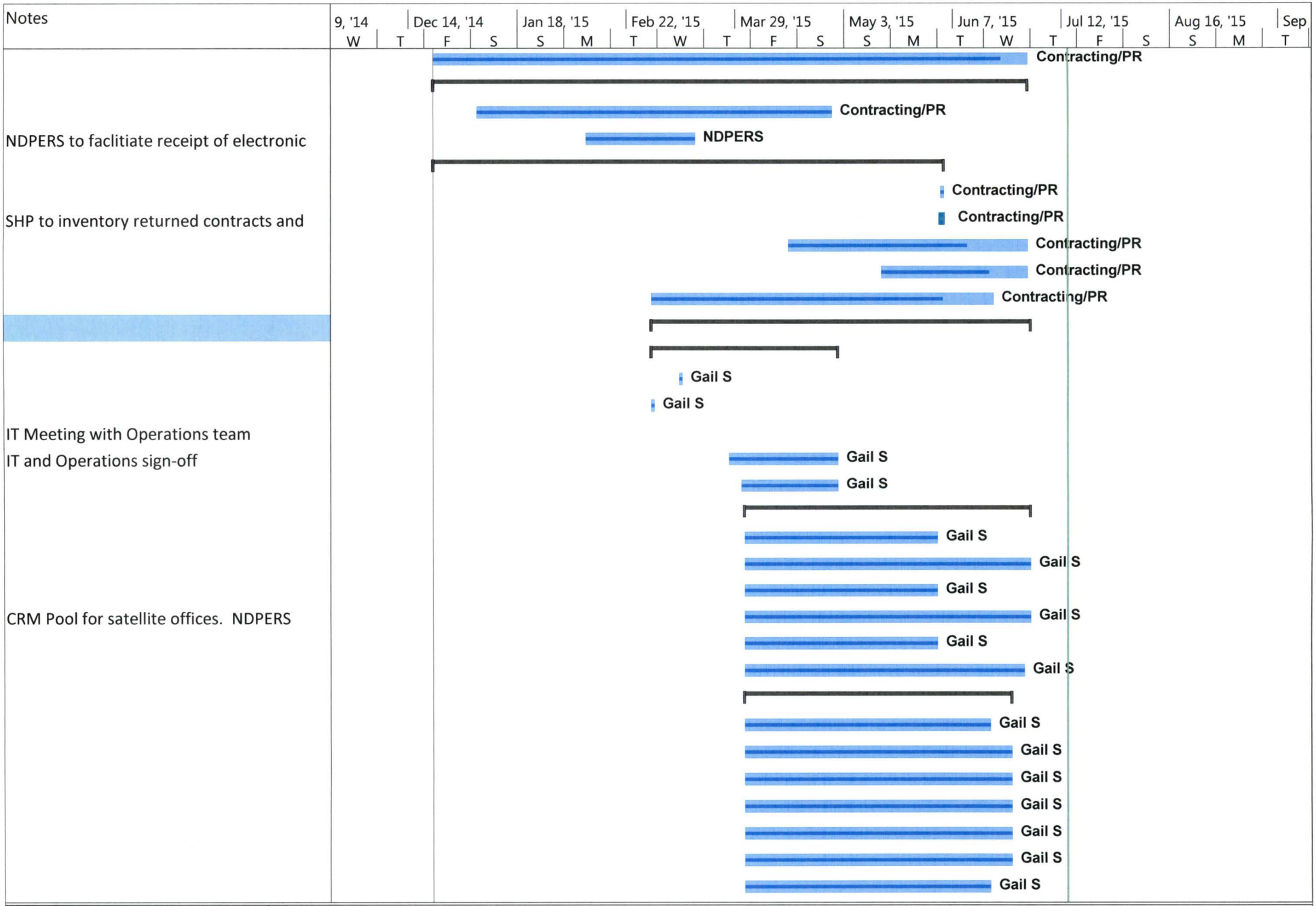
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Contracting/PR
Contracting/PR
NDPERS to faclitiate receipt of electronic
NDPERS
Contracting/PR
SHP to inventory returned contracts and
Contracting/PR
Contracting/PR
Contracting/PR
Contracting/PR
Gail S
Gail S
IT Meeting with Operations team
IT and Operations sign-off
Gail S
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CRM Pool for satellite offices. NDPERS
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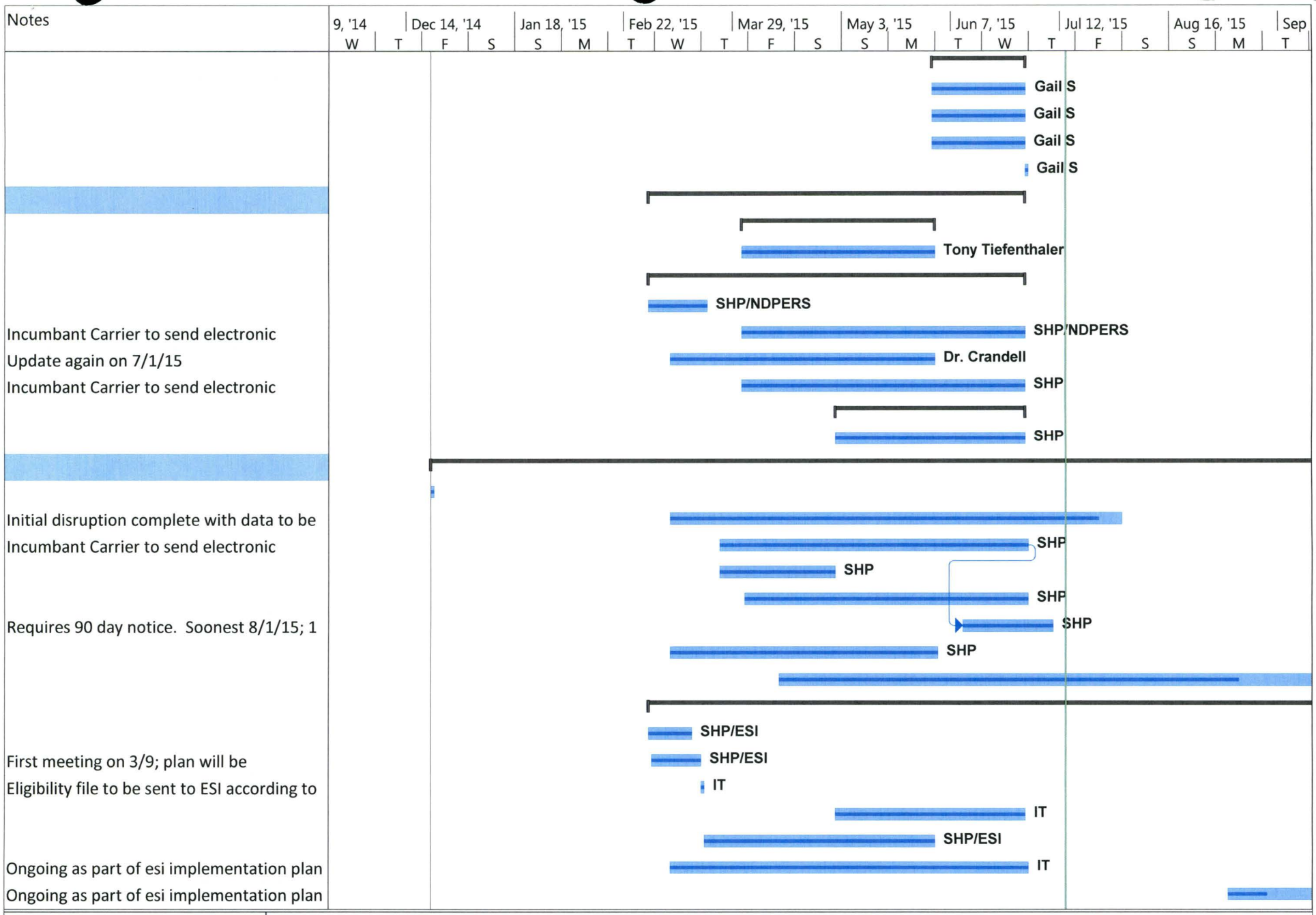
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Aug 16, '15
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Gail S
Gail S
Gail S
Gail S
Tony Tiefenthaler
SHP/NDPERS
Incumbant Carrier to send electronic
SHP/NDPERS
Update again on 7/1/15
Dr. Crandell
Incumbant Carrier to send electronic
SHP
SHP
Initial disruption complete with data to be
Incumbant Carrier to send electronic
SHP
SHP
SHP
Requires 90 day notice. Soonest 8/1/15; 1
SHP
SHP
SHP/ESI
First meeting on 3/9; plan will be
SHP/ESI
Eligibility file to be sent to ESI according to
IT
IT
SHP/ESI
Ongoing as part of esi implementation plan
IT
Ongoing as part of esi implementation plan
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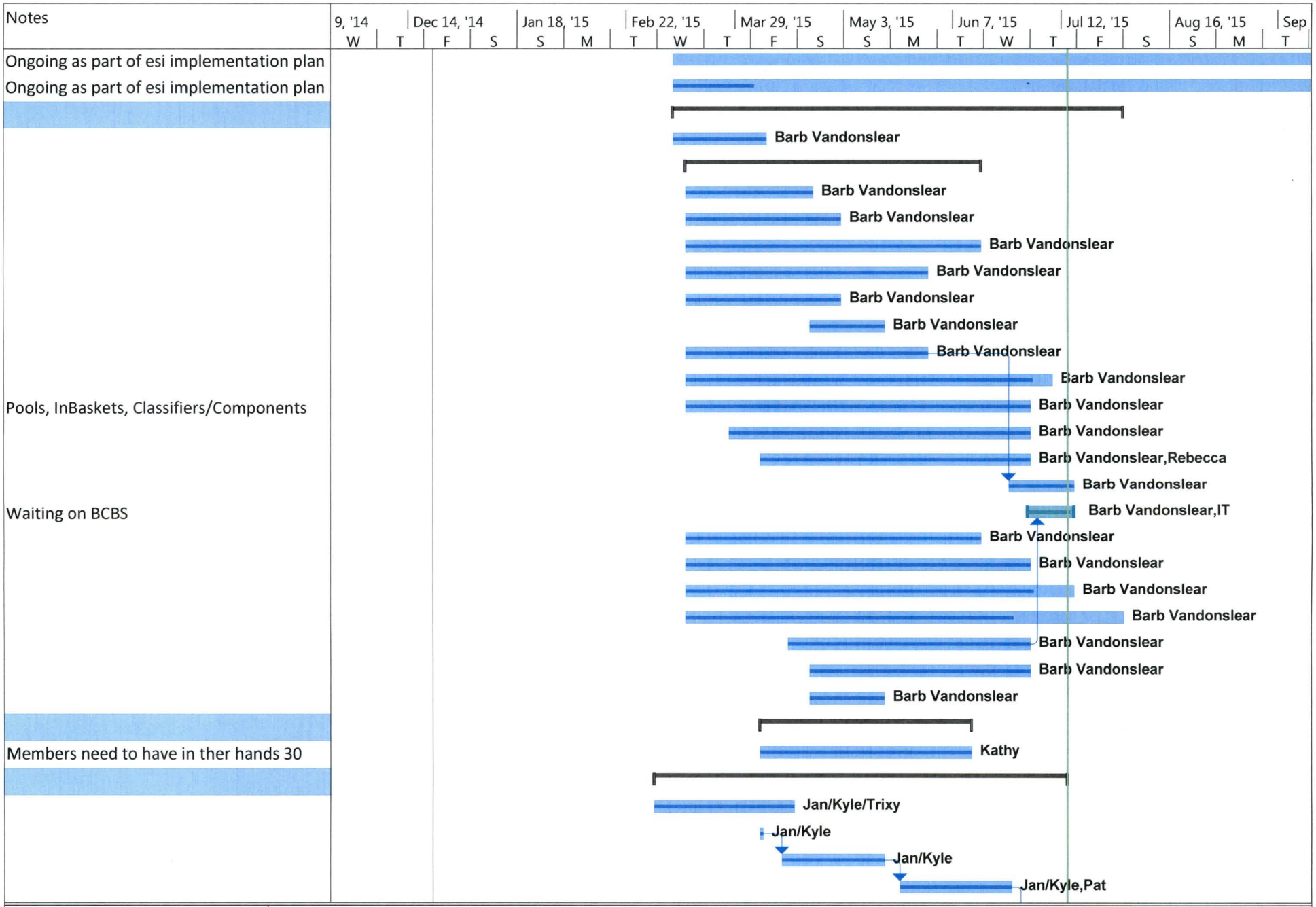
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Ongoing as part of esi implementation plan
Ongoing as part of esi implementation plan
Barb Vandonslear
Barb Vandonslear
Barb Vandonslear
Barb Vandonslear
Barb Vandonslear
Barb Vandonslear
Barb Vandonslear
Barb Vandonslear
Barb Vandonslear
Pools, InBaskets, Classifiers/Components
Barb Vandonslear
Barb Vandonslear
Barb Vandonslear,Rebecca
Barb Vandonslear
Waiting on BCBS
Barb Vandonslear,IT
Barb Vandonslear
Barb Vandonslear
Barb Vandonslear
Barb Vandonslear
Barb Vandonslear
Barb Vandonslear
Barb Vandonslear
Members need to have in ther hands 30
Kathy
Jan/Kyle/Trixy
Jan/Kyle
Jan/Kyle
Jan/Kyle,Pat
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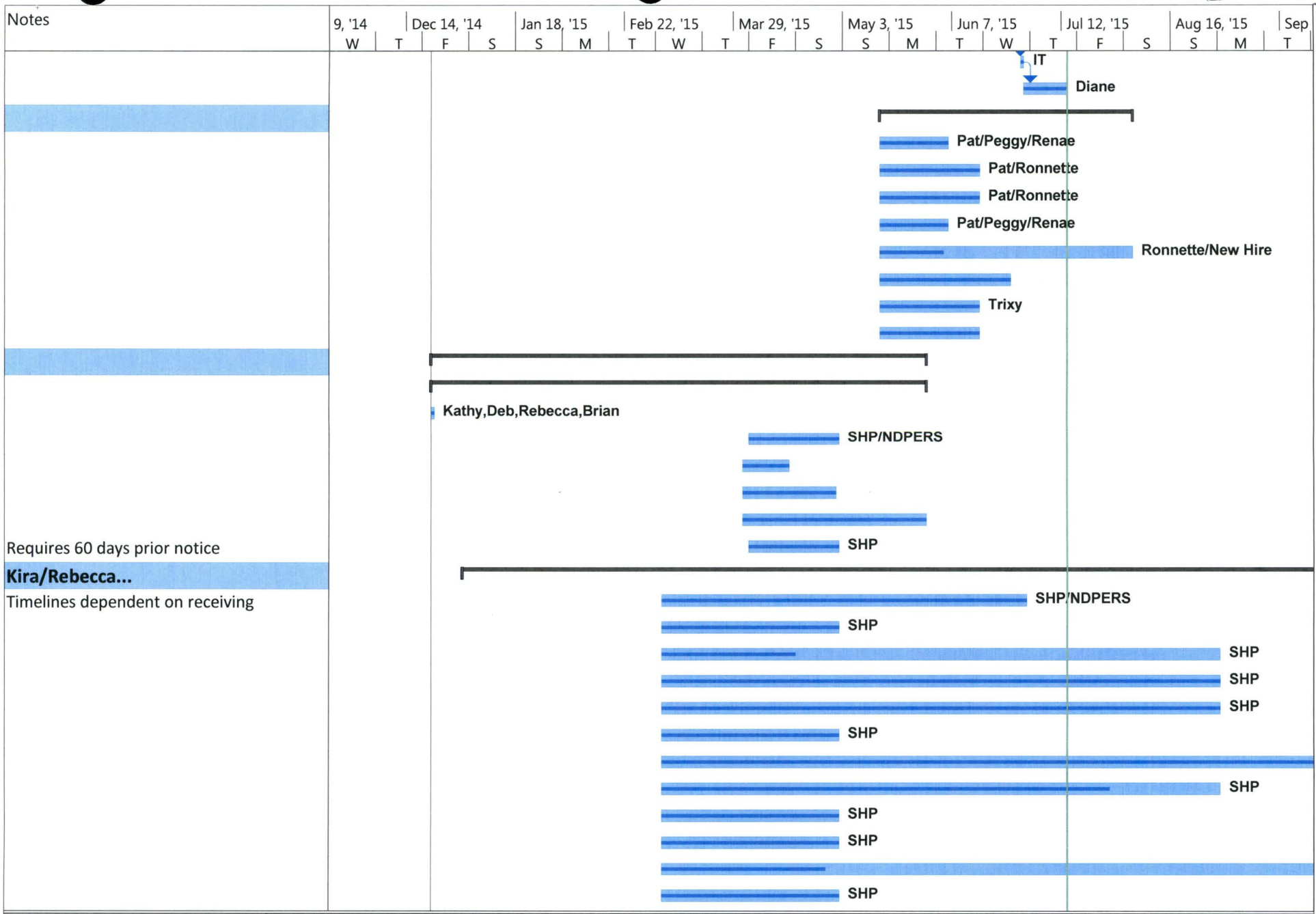

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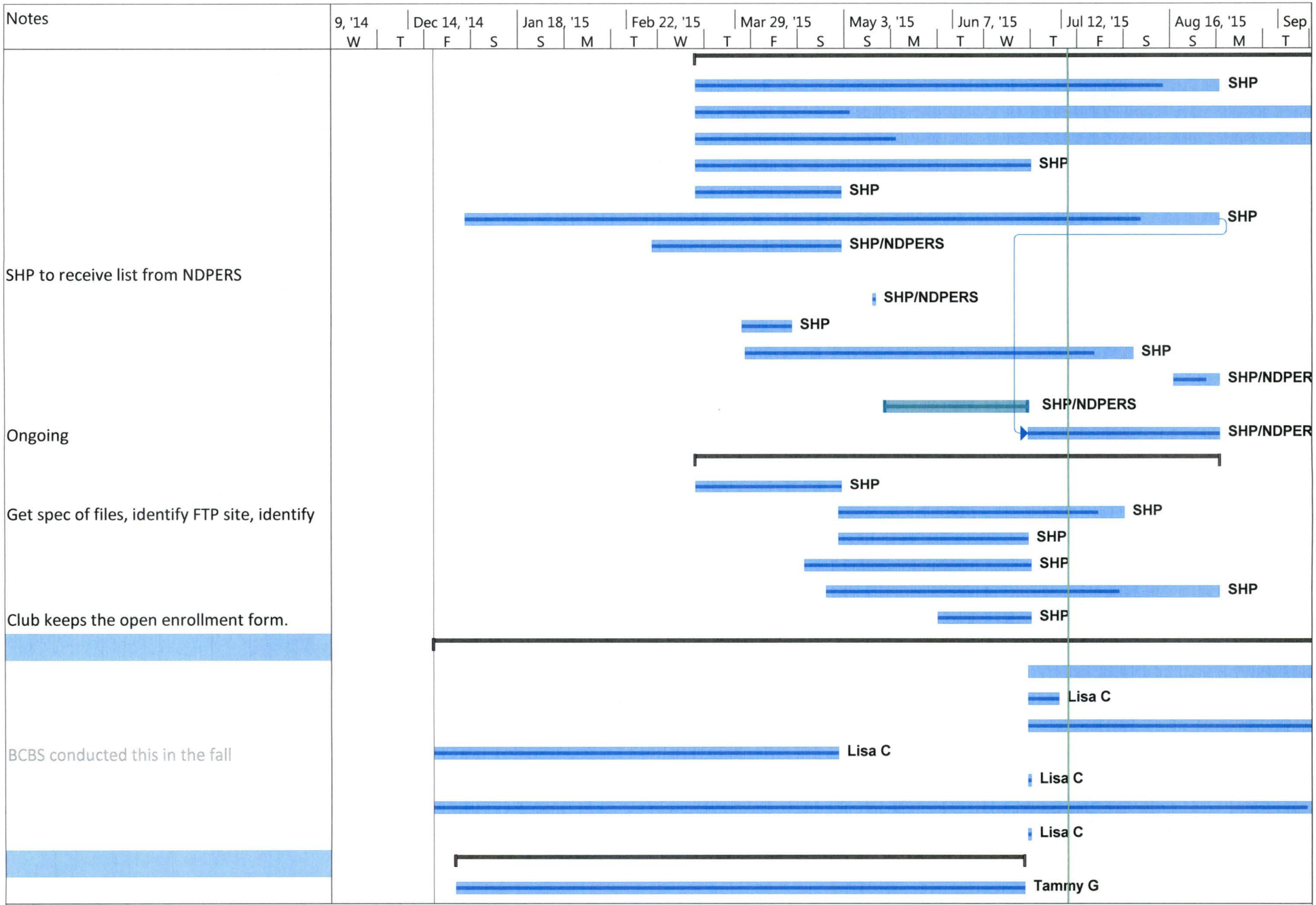
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Aug 16, '15
Sep
W T F S S M T W T F S S M T W T F S S M T
SHP
SHP
SHP
SHP
SHP/NDPERS
SHP to receive list from NDPERS
SHP/NDPERS
SHP
SHP
SHP/NDPER
SHP/NDPERS
Ongoing
SHP/NDPER
SHP
Get spec of files, identify FTP site, identify
SHP
SHP
SHP
Club keeps the open enrollment form.
SHP
Lisa C
BCBS conducted this in the fall
Lisa C
Lisa C
Lisa C
Tammy G
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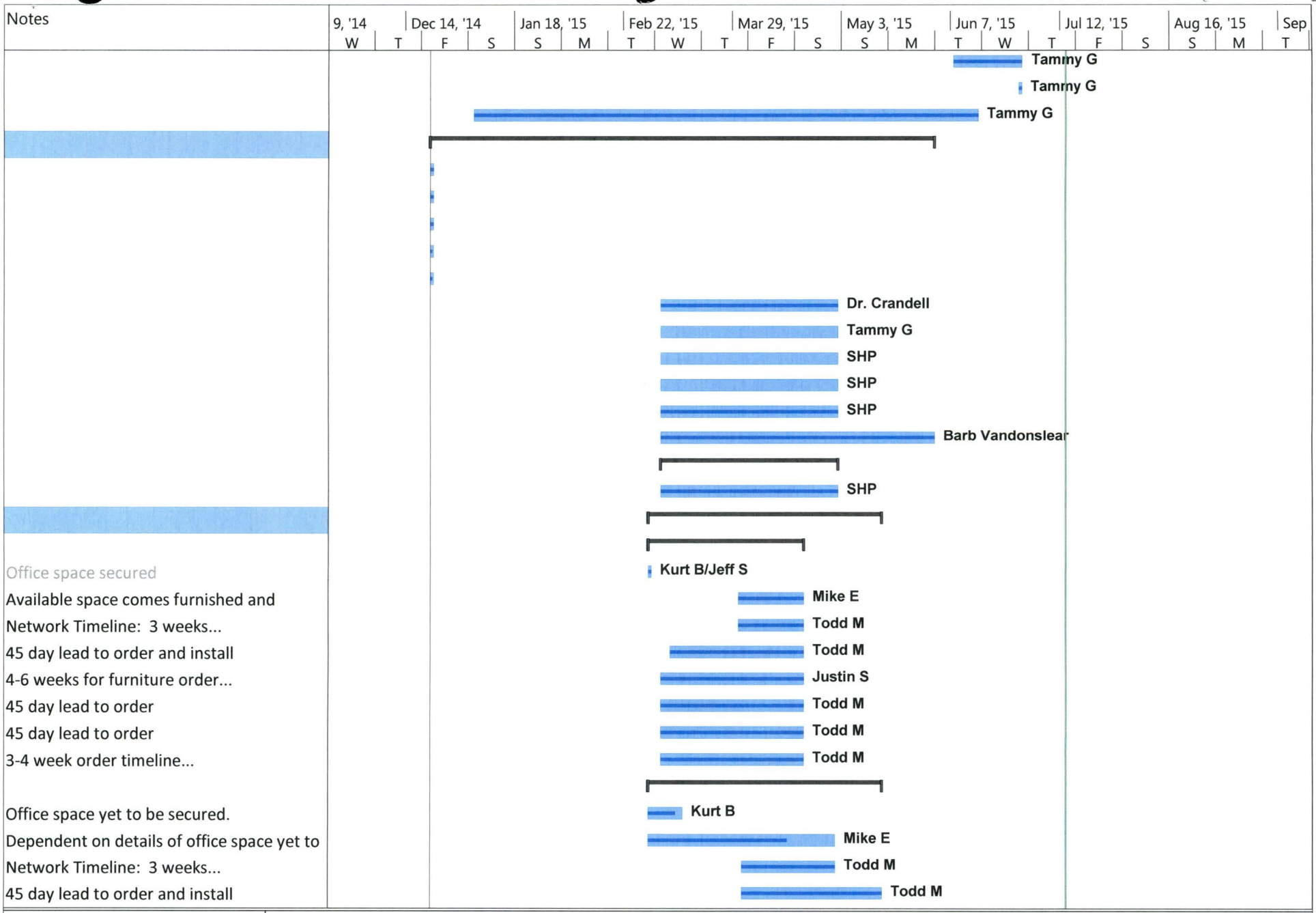
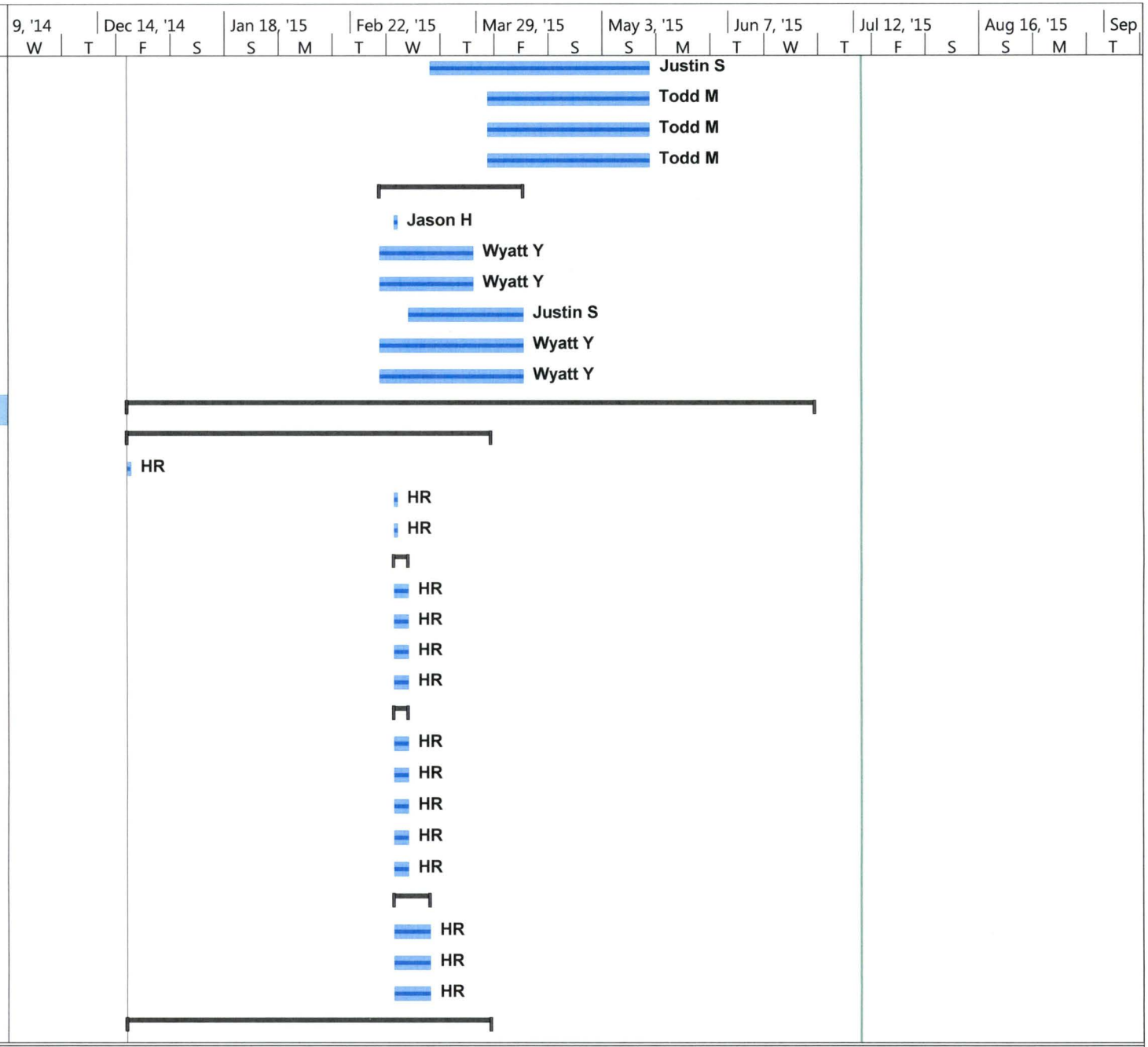
Progress
Manual Progress



Project: ND Public Employees Retirem
Date: Tue 7/14/15

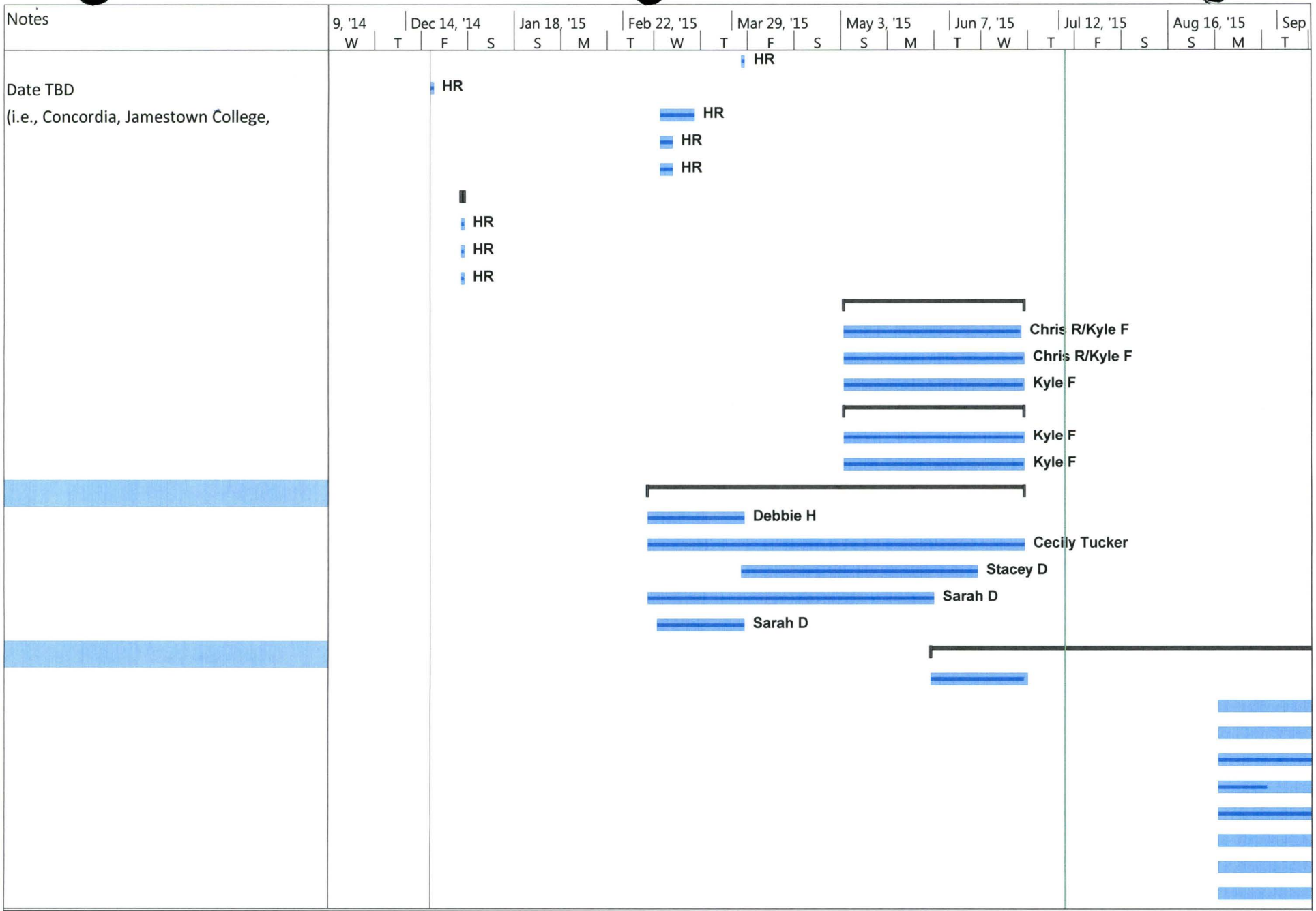
Task | Manual Task | Progress
Summary | Manual Summary | Manual Progress

Notes
4-6 weeks for furniture order...
45 day lead to order
45 day lead to order
3-4 week order timeline...
Additional office space secured:...
Network Timeline: 3 weeks...
45 day lead to order and install?
4 weeks for furniture order...
45 day lead to order
45 day lead to order



Project: ND Public Employees Retirem
Date: Tue 7/14/15

Task | Manual Task | Progress
Summary | Manual Summary | Manual Progress

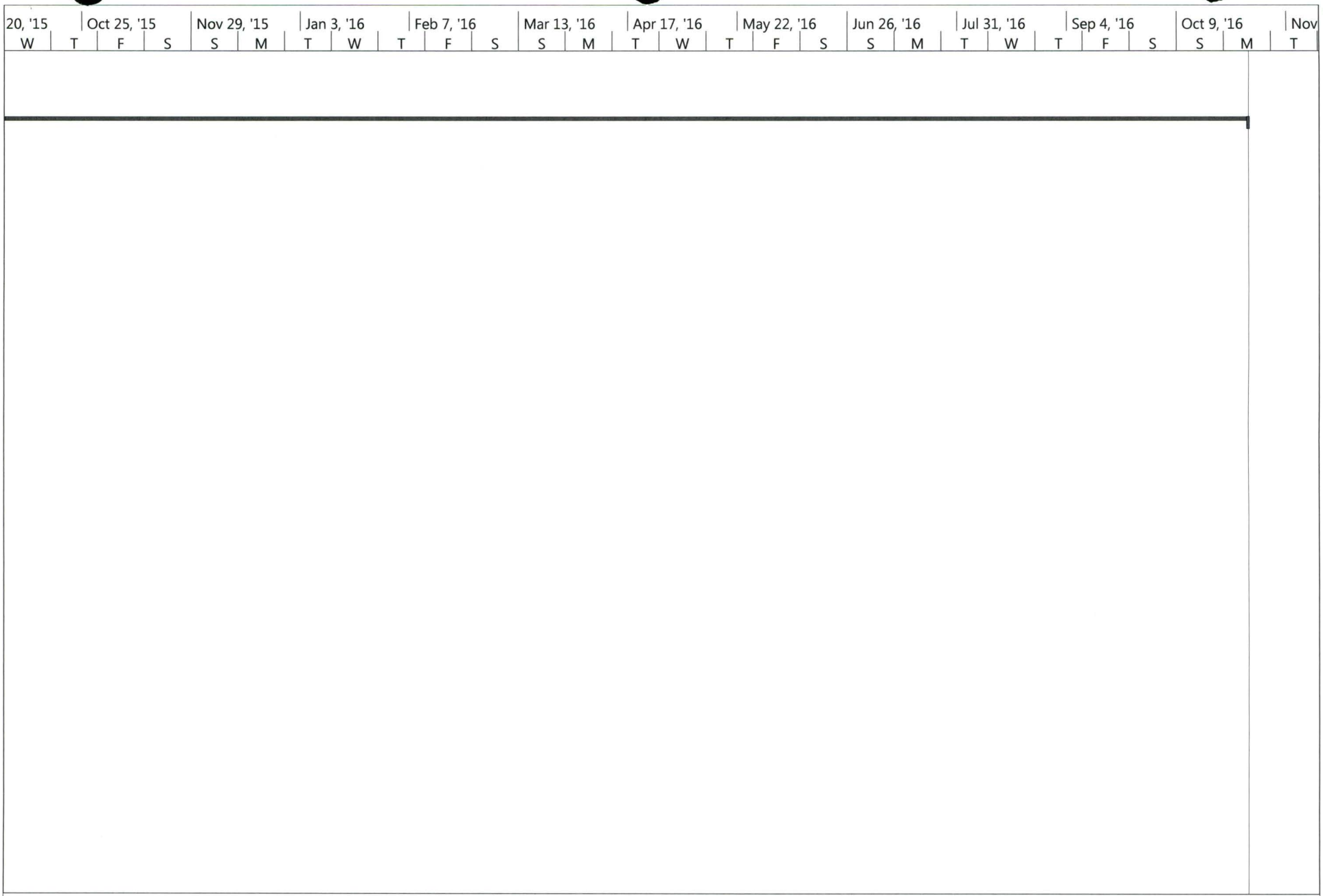


Project: ND Public Employees Retirem Date: Tue 7/14/15	Task		Manual Task		Progress
	Summary		Manual Summary		Manual Progress

Notes	9, '14 W	T	Dec 14, '14 F	S	Jan 18, '15 S	M	Feb 22, '15 T	W	T	Mar 29, '15 F	S	May 3, '15 S	M	Jun 7, '15 T	W	T	Jul 12, '15 F	S	Aug 16, '15 S	M	Sep T
Create monthly premium billings and group Review by June or July																					

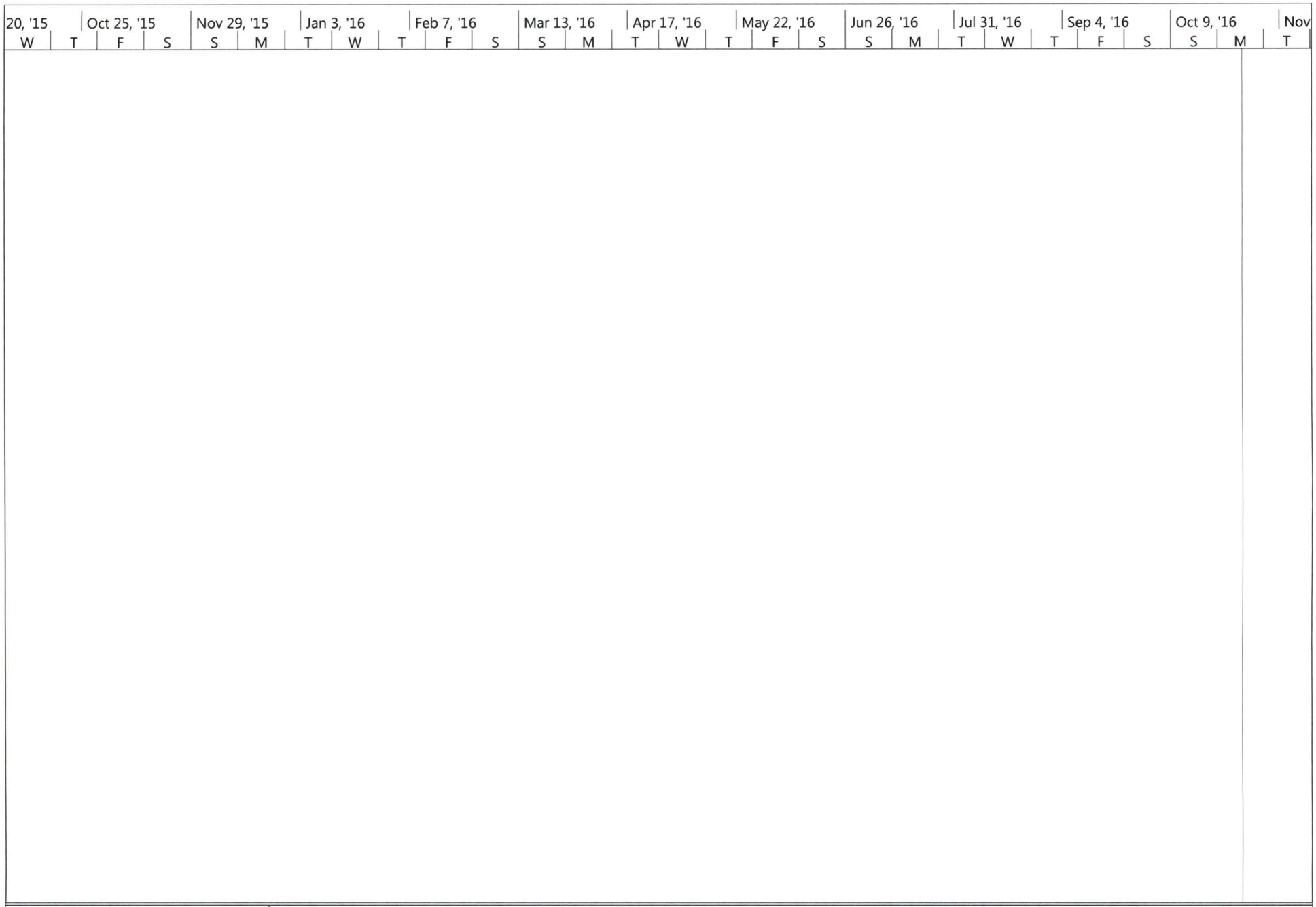
Project: ND Public Employees Retirem
Date: Tue 7/14/15

Task — Manual Task — Progress
Summary — Manual Summary — Manual Progress



Project: ND Public Employees Retirem
Date: Tue 7/14/15

Task
Summary
Manual Task
Manual Summary
Progress
Manual Progress


20, '15
Oct 25, '15
Nov 29, '15
Jan 3, '16
Feb 7, '16
Mar 13, '16
Apr 17, '16
May 22, '16
Jun 26, '16
Jul 31, '16
Sep 4, '16
Oct 9, '16
Nov
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Project: ND Public Employees Retirem
Date: Tue 7/14/15
Task
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Progress
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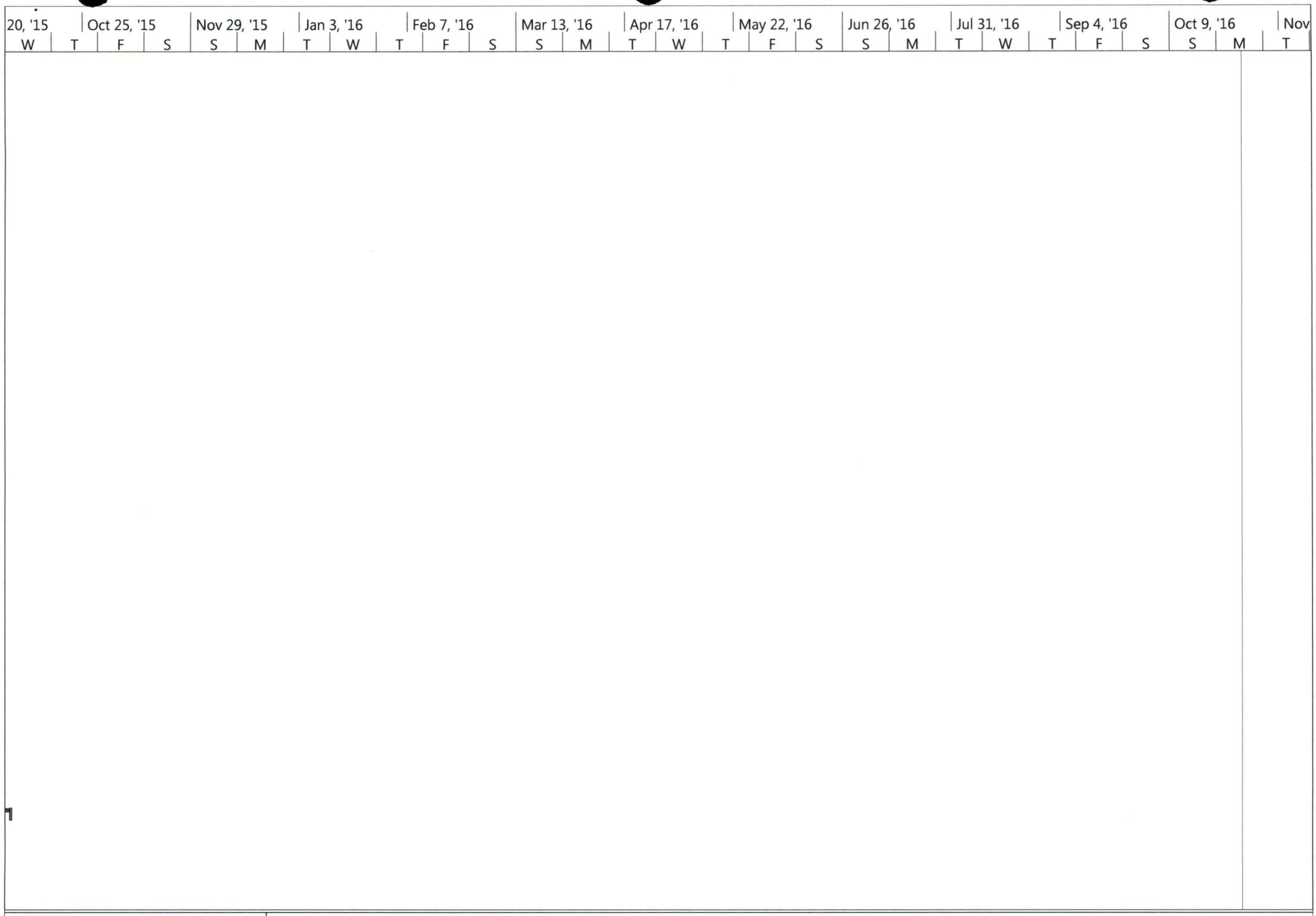
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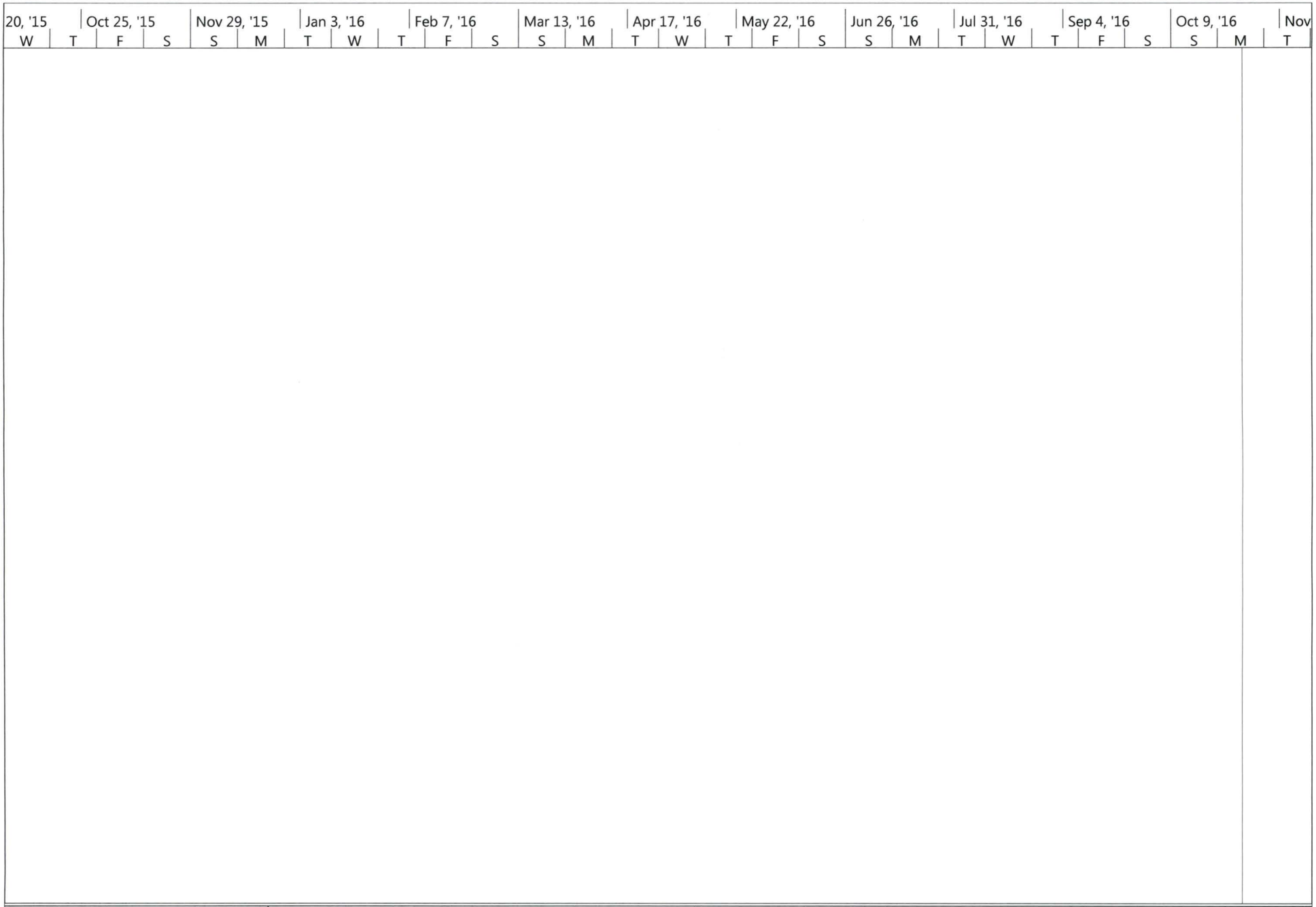

Project: ND Public Employees Retirem
Date: Tue 7/14/15

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Date: Tue 7/14/15

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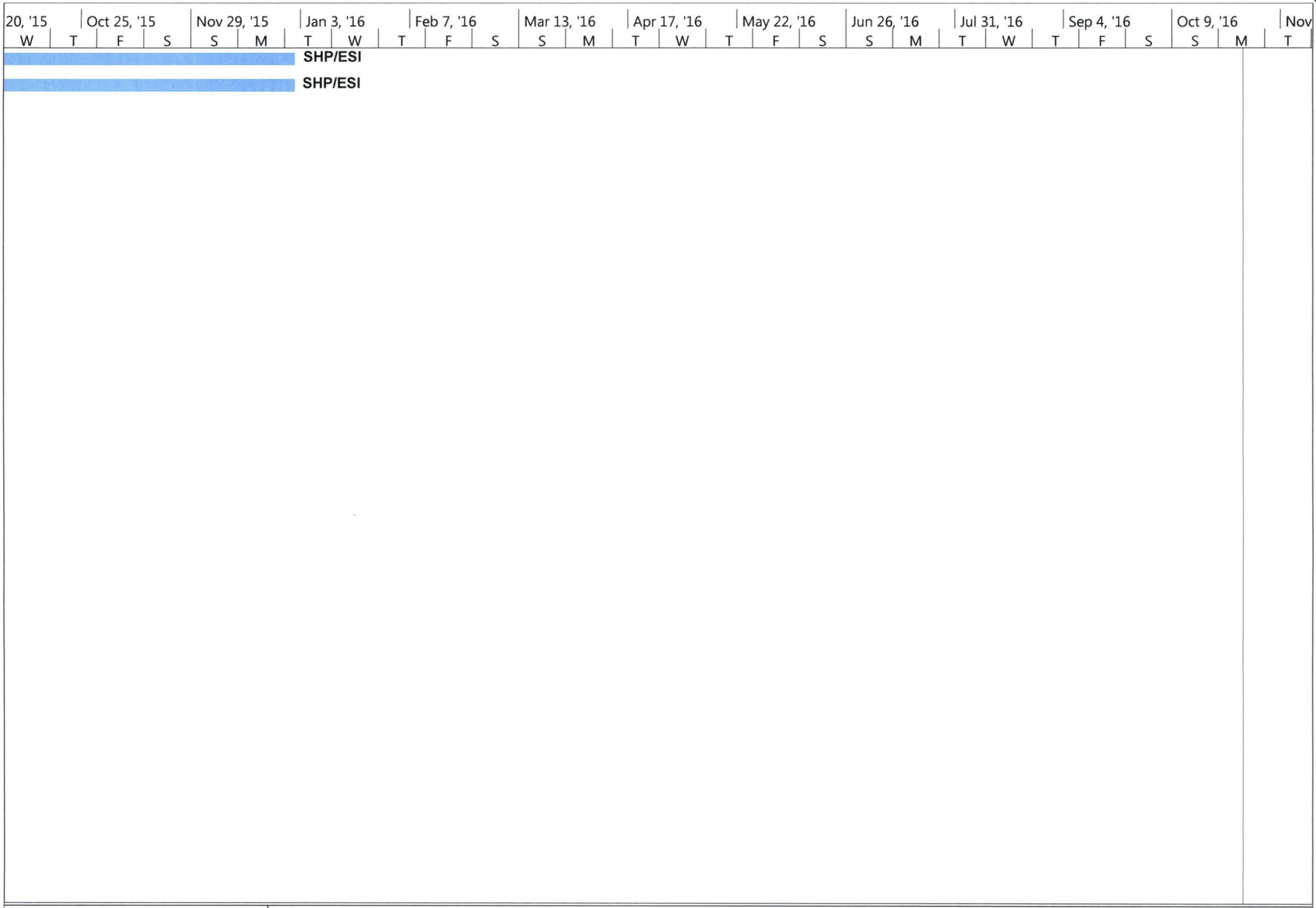
Summary | Manual Summary | Manual Progress



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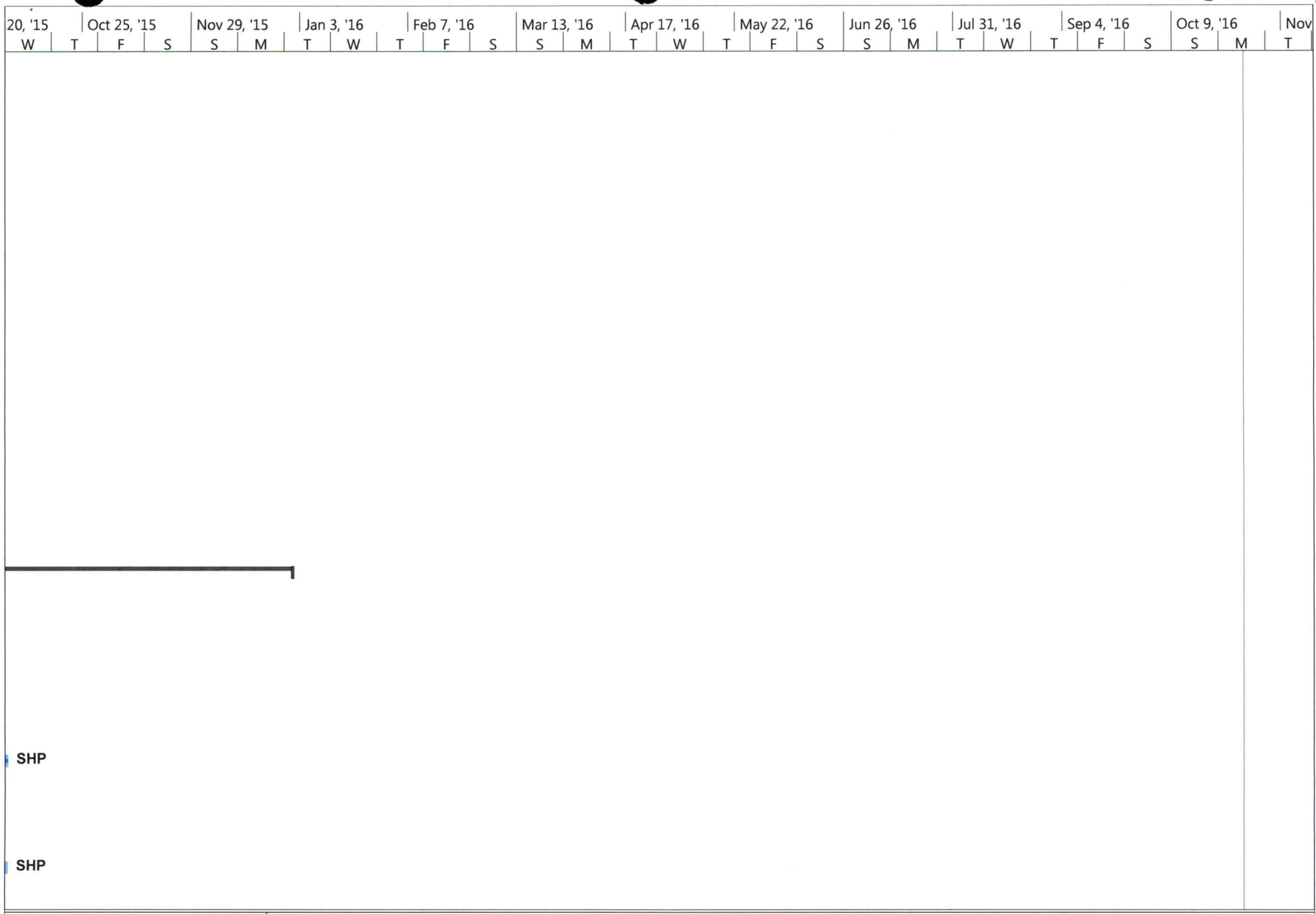

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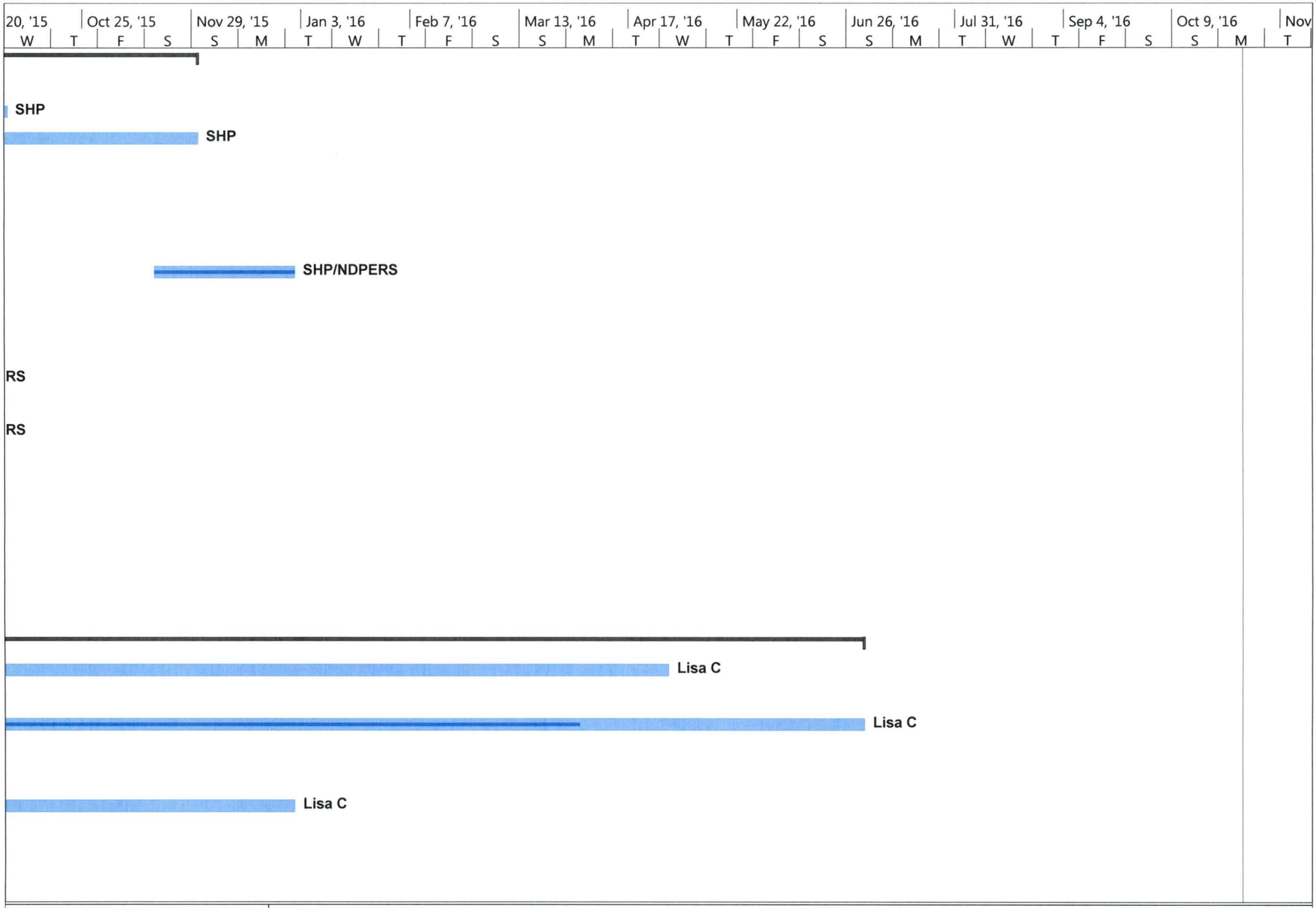

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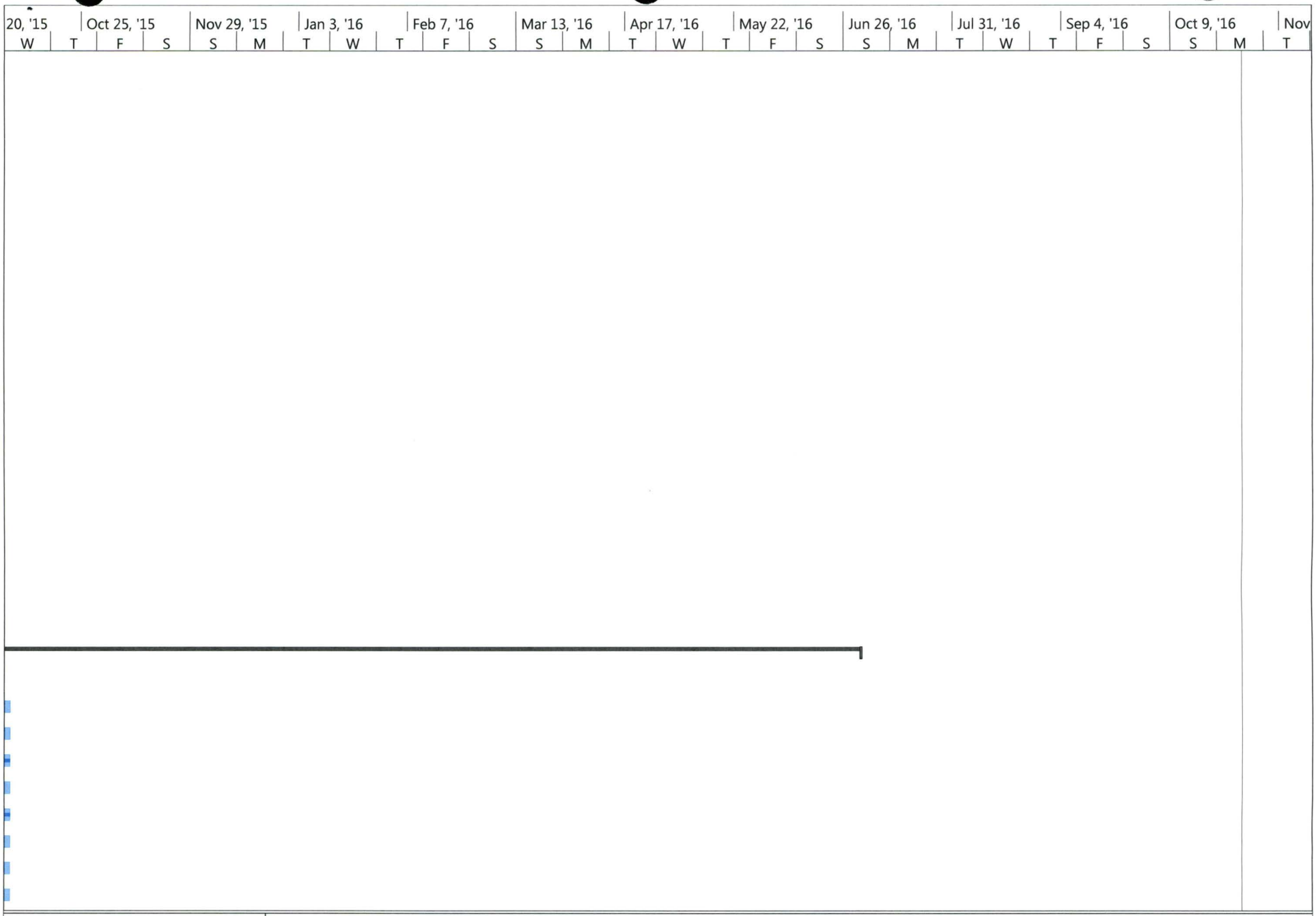

Project: ND Public Employees Retirem
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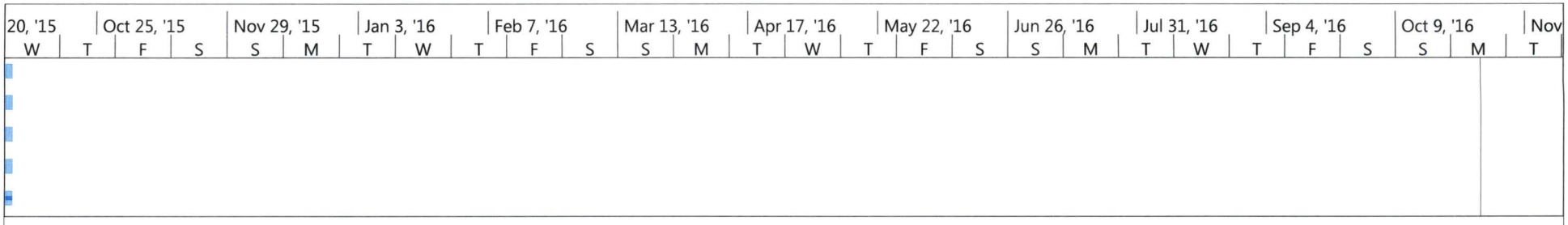

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Plan on the best fit.

SANFORD HEALTH PLAN

Industry, Business, and Labor Committee Hearing
Rep. George J. Keiser, Chairman
March 14, 2017

Chairman Keiser, members of the IB&L Committee, I am Lisa Carlson, Senior Director of Market Strategy at Sanford Health Plan. I appear before you to oppose HB 1436 as we believe it amounts to an unconstitutional impairment of an existing contract.

Sanford Health Plan takes a neutral position on whether or not the state wants to self-insure. In fact, as a carrier operating in four states, its commonplace for states to self-insure their public employee plans. Sanford Health Plan provided both a fully-insured and a self-insured proposal to the North Dakota PERS in the 2015 bidding cycle. Consequently, Sanford Health Plan would gladly bid on a self-insured PERS' request for proposal - but only after the expiration of our current contract.

After meeting prescribed performance guarantees and satisfaction standards, Sanford Health Plan completed its initial two-year term of the contract. As stated in the contract, renegotiations began in August 2016 and concluded in September 2016, and Sanford Health Plan and the PERS Board have already agreed to renew the contract for a second, two-year term beginning July 1, 2017 to June 30, 2019. Likewise, Sanford Health Plan and the PERS Board have another option to renew the contract that would take effect July 1, 2019, through June 30, 2021.

If this bill is passed in its current form, Sanford Health Plan believes Section 5 of the bill will unconstitutionally impair Sanford Health Plan's existing contract with PERS. However, we would understand, and would actively participate in, a self-insured request for proposal for the 2021 biennium – if the state so chooses.

Thank you for your time and consideration.

Proposed Amendment to HB1436

Page 6-Line 17-23
Section 54-52.1-04.3 Self-Insurance-Contingency Reserve Fund-Continuing appropriation Bank of North Dakota line of Credit

3. The Bank of North Dakota shall extend to the board a line of credit not to exceed fifty million dollars at an annual rate ~~not to exceed one and three - quarters percent~~ of one point five percent over the three month libor rate. The board shall repay the line of credit from health insurance premium revenue or from other funds, as appropriated by the legislative assembly. The board may access the line of credit, as necessary, to provide adequate reserve funds, to purchase stop – loss coverage, and to defray other expenditures of administration of the self – insurance plan.

Mar 15, 2017

Amendment to House Bill 1436

The Bank of North Dakota shall extend to the board a line of credit not to exceed fifty million dollars at an annual rate not to exceed three percent for a two year term or four percent for a five year term. The board shall repay the line of credit from health insurance premium revenue or from other funds, as appropriated by the legislative assembly. The board may access the line of credit, as necessary, to provide adequate reserve funds, to purchase stop-loss coverage, and to defray other expenditures of administration of the self-insurance plan.

IB&L Legislative Request Material – file directories

NDPERS March 15, 2017

Name	Date modified	Type	Size
Contract ESI	3/15/2017 1:09 PM	File folder	
Contract Sanford	3/15/2017 1:12 PM	File folder	
Request for Proposal	3/15/2017 1:23 PM	File folder	

Name	Date modified	Type	Size
Confidentiality Agreement between ESI and NDPERS	3/15/2017 11:13 AM	Adobe Acrobat D...	1,434 KB
ESI Business Associate Agreement	3/15/2017 11:13 AM	Adobe Acrobat D...	439 KB
ESI EGWP Medicare Part D Contract Addendum for 2017	12/30/2016 1:43 PM	Adobe Acrobat D...	434 KB
ESI EGWP Medicare Part D contract Jan 1 2016	3/15/2017 11:18 AM	Adobe Acrobat D...	10,041 KB

Name	Date modified	Type	Size
Agreement -Sanford Health Plan Administrative Services Agreement 2015-2017	3/15/2017 11:06 AM	Adobe Acrobat D...	7,998 KB
Agreement-Sanford Health Plan Business Associate Agreement	3/15/2017 11:08 AM	Adobe Acrobat D...	1,833 KB
Amendment to SHP Admin Agreement-Infertility	3/15/2017 11:06 AM	Adobe Acrobat D...	111 KB
Exhibit A1 - HP-0491_NDPERS GF SBC_FINAL_Approved6.2.15_FINAL	6/11/2015 12:29 PM	Adobe Acrobat D...	545 KB
Exhibit A1 - HP-0494 GF NDPERS Dakota_Plan_FINAL_APPROVED_6.2.15_FINAL	6/11/2015 12:29 PM	Adobe Acrobat D...	1,772 KB
Exhibit A2 - HP-0489 NGF NDPERS COI_FINAL_APPROVED_6.2.15_FINAL	6/11/2015 12:29 PM	Adobe Acrobat D...	1,883 KB
Exhibit A2 - HP-0492_NDPERS NGF SBC_FINAL_approved6.2.15_FINAL	6/11/2015 12:29 PM	Adobe Acrobat D...	605 KB
Exhibit A3 - HP-0490 NGF NDPERS HDHP COI_FINAL_APPROVED_6.2.15_FINAL	6/11/2015 12:29 PM	Adobe Acrobat D...	1,940 KB
Exhibit A3 - HP-0493_NDPERS HDHP SBC_FINAL_approved6.2.15_FINAL	6/11/2015 12:29 PM	Adobe Acrobat D...	594 KB
Exhibit A4 - HP-0495 NDPERS Dakota Retiree COI_FINAL_approved5.29.15	6/11/2015 12:29 PM	Adobe Acrobat D...	1,054 KB
Exhibit A4 - HP-0496 NDPERS Medicare Supplement Outline of Coverage_approved5...	6/11/2015 12:29 PM	Adobe Acrobat D...	368 KB
Exhibit B - Performance Guarantees_FINAL	6/11/2015 12:29 PM	Adobe Acrobat D...	237 KB
Exhibit C - HealthRatesJULY2015-FINAL_Filed and APPROVED	6/11/2015 12:29 PM	Adobe Acrobat D...	80 KB
Exhibit C (updated) - HealthRatesJULY2015-Redistributed (2)	12/23/2016 11:55 ...	Adobe Acrobat D...	39 KB
Exhibit D - Illustration of the NDPERS Settlement Process_FINAL	6/11/2015 12:29 PM	Adobe Acrobat D...	116 KB
Exhibit E - Pharmacy Disease Management Program Obligations_FINAL	6/11/2015 12:29 PM	Adobe Acrobat D...	91 KB
Exhibit F - Tobacco Cessation Program Obligations_FINAL	7/9/2015 9:47 AM	Adobe Acrobat D...	111 KB
Exhibit G - Wellness Benefit Program Obligations_FINAL	6/11/2015 12:29 PM	Adobe Acrobat D...	26 KB
Exhibit H - Business Associate Agreement_FINAL	6/11/2015 12:29 PM	Adobe Acrobat D...	358 KB

Name	Date modified	Type	Size
Appendices	3/15/2017 1:23 PM	File folder	
Exhibits	3/15/2017 1:23 PM	File folder	
A-FINAL NDPERS_Medical & Rx RFP_Fully Insured	3/15/2017 1:18 PM	Adobe Acrobat D...	551 KB
A-FINAL NDPERS_Medical & Rx RFP_Self-Insured	3/15/2017 11:28 AM	Adobe Acrobat D...	278 KB

Name	Date modified	Type	Size
Appendices Cover Sheet	3/15/2017 12:26 PM	Adobe Acrobat D...	27 KB
Appendix A Sample_2013-2015_NDPERS_...	3/15/2017 12:29 PM	Adobe Acrobat D...	207 KB
Appendix B Response Template	3/15/2017 12:28 PM	Adobe Acrobat D...	42 KB
Appendix C Questionnaire	3/15/2017 12:30 PM	Adobe Acrobat D...	109 KB
Appendix D Cost Proposal Exhibits	7/9/2014 8:35 AM	Microsoft Excel W...	166 KB
Appendix E Program Information Data	7/9/2014 8:19 AM	Microsoft Excel W...	102 KB
Appendix F Proposed Deviations	3/15/2017 12:32 PM	Adobe Acrobat D...	20 KB
Appendix G Existing Contract Benefits	7/9/2014 11:53 AM	Microsoft Word D...	31 KB
Appendix H Performance Standards and ...	7/9/2014 11:57 AM	Microsoft Word D...	18 KB
Appendix I Disruption Analysis	7/9/2014 8:15 AM	Microsoft Excel W...	930 KB
Appendix J Fee Schedule Analysis	7/9/2014 8:28 AM	Microsoft Excel W...	35 KB
Appendix K Suggested Changes to Plan ...	7/9/2014 2:13 PM	Microsoft Word D...	14 KB
Appendix L PBM Questionnaire.docx	3/15/2017 12:13 PM	Adobe Acrobat D...	385 KB
Appendix M Sample Business Asscociate ...	3/15/2017 12:27 PM	Adobe Acrobat D...	42 KB

Name	Date modified	Type	Size
E Exhibits Cover Sheet	3/15/2017 12:26 PM	Adobe Acrobat D...	29 KB
E1 HealthyBlue Overview	6/25/2014 10:59 AM	Adobe Acrobat D...	249 KB
E2 Health Club Credit Overview	6/25/2014 10:59 AM	Adobe Acrobat D...	287 KB
E3 Health Mandate Cost Fiscal Note	6/25/2014 10:33 AM	Adobe Acrobat D...	22 KB
E4 Quarterly Executive Summary	6/25/2014 9:51 AM	Adobe Acrobat D...	613 KB
E5 Annual Executive Summary	6/25/2014 9:53 AM	Adobe Acrobat D...	4,843 KB
E6 Monthly Financial Report	6/25/2014 9:55 AM	Adobe Acrobat D...	129 KB
E7 Claims Audit	7/7/2014 1:12 PM	Adobe Acrobat D...	18 KB
E8 MSP Data Match Compliance	6/25/2014 1:28 PM	Adobe Acrobat D...	51 KB
E9 2015-2017 NDPERS Plan Options	7/7/2014 1:14 PM	Adobe Acrobat D...	1,162 KB
E10 Memorandum of Understanding for ...	6/25/2014 1:28 PM	Adobe Acrobat D...	442 KB
E11 Wellness Program Voucher	6/25/2014 11:00 AM	Adobe Acrobat D...	227 KB
E12 HealthyBlue Wellness Challenge	7/7/2014 1:13 PM	Adobe Acrobat D...	9 KB
E13 Wellness Star	6/25/2014 11:12 AM	Adobe Acrobat D...	64 KB
E14 Wellness Coordinator Newsletter	6/25/2014 11:02 AM	Adobe Acrobat D...	933 KB
E15 Wellness Coordinator Call	6/25/2014 11:12 AM	Adobe Acrobat D...	9,029 KB
E16 Member Education Presentations	7/7/2014 1:14 PM	Adobe Acrobat D...	28 KB
E17 Enrollment-disenrollment Medicare ...	6/25/2014 10:58 AM	Adobe Acrobat D...	45 KB
E18 Monthly Enrollment Report	6/25/2014 10:10 AM	Adobe Acrobat D...	7 KB
E19 Wellness Coordinator Workshop Age...	6/25/2014 11:13 AM	Adobe Acrobat D...	50 KB

CONFIDENTIALITY AGREEMENT

THIS CONFIDENTIALITY AGREEMENT (the "Agreement") is made and entered into as of November 13, 2015, by and between EXPRESS SCRIPTS, INC., a Delaware corporation ("ESI"), and the State of North Dakota acting through its Public Employees Retirement System ("Company").

RECITALS

A. ESI, either directly or through its subsidiaries, engages in a variety of health care businesses, including, among other things, pharmacy benefit management, disease and demand management, specialty pharmaceutical distribution, administration of patient assistance programs for the distribution of pharmaceutical products, and medical information management.

B. The parties are interested in discussing a potential business relationship (the "Potential Relationship").

C. In connection with the foregoing, it is necessary for the parties to provide each other with certain Confidential Information (as defined below).

THEREFORE, in consideration of the mutual promises contained herein, the parties hereto agree as follows:

TERMS AND CONDITIONS

1. Definitions.

a. Confidential Information. As used in this Agreement, the term "Confidential Information" shall mean all information communicated by the Provider to the Recipient (each as defined in Section 1.b. below) relating to either party's services, operations, systems, programs, inventions, techniques, suppliers, customers and prospective customers, contractors, cost and pricing data, trade secrets, know-how, processes, plans, designs and any other information of or relating to either party's business, including its therapeutic and disease management programs that has been previously identified as Confidential Information by a party to this Agreement and constitutes Confidential Information under a specific exception to the North Dakota public records law as determined by Company in its sole discretion or is otherwise protected as Confidential Information under federal law; provided, however, that the term "Confidential Information" shall not include information which (i) is or becomes generally available to the public other than as a result of a disclosure by the Recipient or any of its Representatives (as defined below) in violation of this Agreement, (ii) was within the Recipient's possession or knowledge prior to its being furnished to the Recipient pursuant to this Agreement, provided that the source of such information was not known by the Recipient to be bound by a confidentiality agreement with or similar obligation to the Provider with respect to such information, (iii) becomes available to the Recipient on a non-confidential basis from a source other than the Provider, provided

that, to the Recipient's knowledge, such source is not bound by a confidentiality agreement with or similar obligation to the Provider with respect to such information, (iv) is independently developed by the Recipient under circumstances not involving a breach of this Agreement by Recipient (v) or is public information under either federal or North Dakota public records law.

b. Provider and Recipient. Each of ESI, Company, and their respective affiliates and subsidiaries, shall, (i) in its capacity as the party disclosing or providing Confidential Information, be referred to as a "Provider;" and (ii) in its capacity as the party receiving Confidential Information, be referred to as a "Recipient."

c. Representatives. As used in this Agreement, the term "Representatives" shall mean, with respect to any party, such party's directors, officers, employees, agents, counsel, consultants or other representatives.

2. Proprietary Nature and Use of Confidential Information. Each Recipient acknowledges the confidential and proprietary nature of the Confidential Information of a Provider which is disclosed to a Recipient. The Recipient agrees that the Confidential Information of a Provider which is disclosed to the Recipient will be held by the Recipient in strictest confidence at all times and will only be used by the Recipient and its Representatives for the sole purpose of evaluating the Potential Relationship. The Confidential Information of the Provider will not be disclosed or divulged by the Recipient to anyone except as otherwise permitted by this Agreement.

3. Disclosure and Confidentiality of Confidential Information. Each Recipient agrees that without the express written consent of the Provider, the Recipient will not, at any time, (a) divulge, furnish, disclose or make accessible to any person, firm, organization or corporation, in any manner whatsoever, any Confidential Information, or (b) use any Confidential Information for the Recipient's own benefit or for the benefit of any third party. Notwithstanding the foregoing, Recipient may disclose Confidential Information to those of its Representatives who are directly involved in the evaluation of the Potential Relationship; provided that each such Representative is required to protect and otherwise not disclose or use the Confidential Information except as provided in this Agreement, and is advised of the confidential nature of the Confidential Information and agrees to be bound by the provisions of this Agreement.

In the event that the Recipient or any of its Representatives are requested or required by any court of competent jurisdiction, government or governmental agency or authority or otherwise required under applicable law to disclose any of the Confidential Information, the Recipient will notify the Provider promptly in writing so that Provider may seek a protective order or other appropriate remedy or, in its sole discretion, waive compliance with the terms of this Agreement. The Recipient agrees not to oppose any action by the Provider to obtain a protective order or other appropriate remedy. In the event that no such protective order or other remedy is obtained, or that the Provider waives compliance with the terms of this Agreement, the Recipient will furnish only that portion of the Confidential Information which it is advised by counsel is legally required and will exercise its reasonable best efforts to obtain

reliable assurance that confidential treatment will be accorded the Confidential Information disclosed.

4. Reports Generated from Confidential Information. Any reports or other documents, in whatever form or medium, which result from the mutual efforts of the parties hereto in connection with the discussions contemplated by this Agreement, shall be governed by the same terms and conditions of this Agreement respecting confidentiality and use as is the Confidential Information itself.

5. Ownership and Return of Information. All Confidential Information of a Provider hereunder shall be and remain the property of such Provider. A Recipient shall not obtain any rights in or to any Confidential Information disclosed to such Recipient as a result of such disclosure. In the event either party elects not to proceed with the Potential Relationship, or upon the written request of the Provider, the Recipient shall destroy or return promptly to the Provider, without retaining any copies, all Confidential Information received under this Agreement, unless such retention is required under applicable law. Upon the Provider's request, each requested Recipient or Representative shall certify to the Provider that all Confidential Information has been destroyed or returned to the Provider. Notwithstanding anything herein to the contrary, one copy of all Confidential Information may be retained by counsel for the Recipient for evidentiary purposes or as required by applicable law and the terms of this Agreement shall continue to apply to any Confidential Information so retained.

6. Restrictions under Securities Laws. Each Recipient acknowledges that it is aware, and will advise any Representatives who are informed as to the matters which are the subject of this Agreement, that federal and state securities laws may prohibit any person who has received from an issuer of securities material, non-public information concerning such issuer or the matters which are the subject of this Agreement from purchasing or selling securities of such issuer or from communicating such information to any other person under circumstances in which it is reasonably foreseeable that such person is likely to purchase or sell such securities.

7. Non-Binding Nature of Discussions. The parties hereto agree that this Agreement is not intended to, and does not, obligate either party, or any other party, to enter into further agreements or to proceed with any potential relationship or transaction. The parties hereto agree that unless and until a definitive agreement with respect to the Potential Relationship has been executed and delivered, neither of the parties will be under any legal obligation of any kind whatsoever with respect to such a relationship by virtue of this or any written or oral expression with respect to such a relationship by any of their respective Representatives except, in the case of this Agreement, for the matters specifically agreed to herein. The parties further acknowledge and agree that, prior to the execution of this Agreement and prior to any of the discussions described herein, each of the parties has discussed, developed and/or implemented other business relationships similar to the Potential Relationship, and that this Agreement shall not restrict either party from continuing to discuss, develop and/or implement arrangements similar to the Potential Relationship with other parties provided that neither party discloses Confidential Information received from the other party.

8. Remedies. Each Recipient acknowledges that the Confidential Information to be received in the course of the discussions referred to herein is of such character as to render the same unique and therefore agrees that disclosure or use thereof, or the failure to return Confidential Information upon request, in violation of any of the terms of this Agreement, may cause irreparable damage to the Provider and be in violation of applicable law. The parties agree that the Provider's remedies for any breach of this Agreement by the Recipient shall be cumulative, and the seeking or obtainment of injunctive relief and/or specific performance shall not preclude a claim or award for damages or other relief.

9. Complete Agreement. This Agreement contains the complete understanding between ESI and Company with respect to the treatment of Confidential Information as defined herein and may not be varied or terminated otherwise than in accordance with its terms, except by written agreement by the parties.

10. Governing Law. This Agreement shall be governed by, and construed in accordance with, the internal laws of the State of North Dakota, without regard to the rules of conflict of laws thereof.

11. Non-Assignability. Neither party shall assign its rights under this Agreement without the prior written consent of the other party.

12. Waiver. Failure by either party to insist upon strict compliance with any of the terms, covenants or conditions hereof shall not be deemed a waiver of such terms, covenants or conditions, nor shall any waiver or relinquishment of any right or power hereunder at any one time or more times be deemed a waiver or relinquishment of such right or power at any other time or times.

13. Severability. The provisions of this Agreement are divisible; if any such provision shall be deemed invalid or unenforceable, as to any periods of time, territory, or business activities, such provision shall be deemed limited to the extent necessary to render it valid and enforceable.

14. Counterparts. This Agreement may be executed in one or more counterpart copies, each of which shall be deemed an original, and all of which shall together be deemed to constitute one agreement. Facsimile execution and delivery of this Agreement is legal, valid and binding execution and delivery for all purposes.

15. Term of Agreement. This Agreement will commence on the date all parties signatures are obtained and continue until either the effective date of any agreement between the parties superseding this Agreement and formalizing the Potential Relationship between the parties or until either party elects not to proceed with the Potential Relationship and provides written notice to the other party terminating this Agreement.

IN WITNESS WHEREOF, the parties have caused this Agreement to be executed by their duly-authorized representatives as of the day and year first above written.

EXPRESS SCRIPTS, INC.

By: _____

Name: Steven Webb

Title: Vice President - Commercial Division

STATE OF NORTH DAKOTA ACTING THROUGH ITS PUBLIC EMPLOYEES RETIREMENT SYSTEM

By: _____

Name: Sparb Collins

Title: Executive Director

Business Associate Agreement

(Revised 10-2013)

This Business Associate Agreement, which is an addendum to the underlying contract, is entered into by and between, the North Dakota Public Employees Retirement System ("NDPERS") and Express Scripts, Inc. ("ESI"), a Delaware corporation.

1. Definitions

a. Terms used, but not otherwise defined, in this Agreement have the same meaning as those terms in the HIPAA Privacy Rule, 45 C.F.R. Part 160 and Part 164, Subparts A and E, and the HIPAA Security rule, 45 C.F.R., pt. 164, subpart C.
b. Business Associate. "Business Associate" means ESI
c. Covered Entity. "Covered Entity" means the **North Dakota Public Employees Retirement System Health Plans**.
d. PHI and ePHI. "PHI" means Protected Health Information; "ePHI" means Electronic Protected Health Information.

2. Obligations of Business Associate.

2.1. The Business Associate agrees:

a. To use or disclose PHI and ePHI only as permitted or required by this Agreement or as Required by Law.
b. To use appropriate safeguards and security measures to prevent use or disclosure of the PHI and ePHI other than as provided for by this Agreement, and to comply with all security requirements of the HIPAA Security rule.
c. To implement administrative, physical, and technical safeguards that reasonably and appropriately protect the confidentiality, integrity, and availability of ePHI that it creates, receives, maintains or transmits on behalf of the Covered Entity as required by the HIPAA Security rule.
d. To mitigate, to the extent practicable, any harmful effect that is known to Business Associate of a use or disclosure of PHI or ePHI by Business Associate in violation of the requirements of this Agreement.
e. To report to Covered Entity (1) any use or disclosure of the PHI not provided for by this Agreement, including any Breach of Unsecured PHI, as defined in 45 CFR 164.402, and (2) any "security incident" as defined in 45 C.F.R. § 164.304 involving ePHI, of which it becomes aware without unreasonable delay and in any case within thirty (30) days from the date after discovery and provide the Covered Entity with a written notification that complies with 45 C.F.R. § 164.410 which shall include the following information:
    i. to the extent possible, the identification of each individual whose Unsecured Protected Health Information has been, or is reasonably believed by the Business Associate to have been, accessed, acquired or disclosed during the Breach;
    ii. a brief description of what happened;
    iii. the date of discovery of the Breach and date of the Breach;
    iv. the nature of the Protected Health Information that was involved;

v. identify of any person who received the non-permitted Protected Health Information;
vi. any steps individuals should take to protect themselves from potential harm resulting from the Breach;
vii. a brief description of what the Business Associate is doing to investigate the breach, to mitigate harm to individuals, and to protect against any further breaches; and
viii. any other available information that the Covered Entity is required to include in notification to an individual under 45 C.F.R. § 164.404(c) at the time of the notification to the State required by this subsection or promptly thereafter as information becomes available.

f. With respect to any use or disclosure of Unsecured Protected Health Information not permitted by the Privacy Rule that is caused by the Business Associate's failure to comply with one or more of its obligations under this Agreement, the Business Associate agrees to reimburse Covered Entity for its costs associated with providing Breach notifications under the HIPAA Rules and any other applicable security breach notification laws;
g. Ensure that any agent or subcontractor that creates, receives, maintains, or transmits electronic PHI on behalf of the Business Associate agree in writing to comply with at least the same restrictions and conditions that apply through this Agreement to the Business Associate.
h. To make available to the Secretary of Health and Human Services the Business Associate's internal practices, books, and records, including policies and procedures relating to the use and disclosure of PHI and ePHI received from, or created or received by Business Associate on behalf of Covered Entity, for the purpose of determining the Covered Entity's compliance with the HIPAA Privacy Rule, subject to any applicable legal privileges.
i. To document the disclosure of PHI related to any disclosure of PHI as would be required for Covered Entity to respond to a request by an Individual for an accounting of disclosures of PHI in accordance with 45 C.F.R. § 164.528.
j. To provide to Covered Entity within 15 days of a written notice from Covered Entity, information necessary to permit the Covered Entity to respond to a request by an Individual for an accounting of disclosures of PHI in accordance with 45 C.F.R. § 164.528.
k. To provide, within 10 days of receiving a written request, information necessary for the Covered Entity to respond to an Individual's request for access to PHI about himself or herself, in the event that PHI in the Business Associate's possession constitutes a Designated Record Set.
l. Make amendments(s) to PHI in a designated record set as directed or agreed by the Covered Entity pursuant to 45 C.F.R. § 164.526 or take other measures as necessary to satisfy the covered entity's obligations under that section of law.

3. Permitted Uses and Disclosures by Business Associate

3.1. General Use and Disclosure Provisions

Except as otherwise limited in this Agreement, Business Associate may Use or Disclose PHI and ePHI to perform functions, activities, or services for, or on behalf of, Covered Entity, specifically, confidential information for health care operations, provided that such use or disclosure would not violate the Privacy Rule or the Security Rule if done by Covered Entity or the minimum necessary policies and procedures of the Business Associate which shall at all times comply with applicable HIPAA regulations.

3.2. Specific Use and Disclosure Provisions

Except as otherwise limited in this Agreement, Business Associate may use PHI and ePHI:

a. For the proper management and administration of the Business Associate, provided that disclosures are Required By Law, or Business Associate obtains reasonable assurances from the person to whom the information is disclosed that it will remain confidential and used or further disclosed only as Required By Law or for the purpose for which it was disclosed to the person, and the person notifies the Business Associate of any instances of which it is aware in which the confidentiality of the information has been breached.
b. To provide Data Aggregation services to Covered Entity as permitted by 45 C.F.R. § 164.504(e)(2)(i)(B).
c. To report violations of law to appropriate Federal and State authorities, consistent with 45 C.F.R. §§ 164.304 and 164.502(j)(1).

4. Obligations of Covered Entity

4.1. Provisions for Covered Entity to Inform Business Associate of Privacy Practices and Restrictions

Covered Entity shall notify Business Associate of:

a. Any limitation(s) in its notice of privacy practices of Covered Entity in accordance with 45 C.F.R. § 164.520, to the extent that any such limitation may affect Business Associate's use or disclosure of PHI.
b. Any changes in, or revocation of, permission by an Individual to use or disclose PHI, to the extent that any such changes may affect Business Associate's use or disclosure of PHI.
c. Any restriction to the use or disclosure of PHI that Covered Entity has agreed to in accordance with 45 C.F.R. § 164.522, to the extent that any such restriction may affect Business Associate's use or disclosure of PHI.

4.2. Additional Obligations of Covered Entity. Covered Entity agrees that it:

a. Has included, and will include, in the Covered Entity's Notice of Privacy Practices required by the Privacy Rule that the Covered Entity may disclose PHI for Health Care Operations purposes.

b. Has obtained, and will obtain, from Individuals any consents, authorizations and other permissions necessary or required by laws applicable to the Covered Entity for Business Associate and the Covered Entity to fulfill their obligations under the Underlying Agreement and this Agreement.

c. Will promptly notify Business Associate in writing of any restrictions on the Use and Disclosure of PHI about Individuals that the Covered Entity has agreed to that may affect Business Associate's ability to perform its obligations under the Underlying Agreement or this Agreement.

d. Will promptly notify Business Associate in writing of any change in, or revocation of, permission by an Individual to Use or Disclose PHI, if the change or revocation may affect Business Associate's ability to perform its obligations under the Underlying Agreement or this Agreement.

4.2. Permissible Requests by Covered Entity

Covered Entity may not request Business Associate to use or disclose PHI in any manner that would not be permissible under the Privacy Rule or the Security Rule if done by Covered Entity, except that the Business Associate may use or disclose PHI and ePHI for management and administrative activities of Business Associate.

5. Term and Termination

a. Term. The Term of this Agreement shall be effective as of November 13, 2015, and shall terminate when all of the PHI and ePHI provided by Covered Entity to Business Associate, or created or received by Business Associate on behalf of Covered Entity, is destroyed or returned to Covered Entity, or, if it is infeasible to return or destroy PHI and ePHI, protections are extended to any such information, in accordance with the termination provisions in this Section.
b. Automatic Termination. This Agreement will automatically terminate upon the termination or expiration of the Underlying Agreement.
c. Termination for Cause. Upon Covered Entity's knowledge of a material breach by Business Associate, Covered Entity shall either:
    1. Provide an opportunity for Business Associate to cure the breach or end the violation and terminate this Agreement and the Underlying Agreement if Business Associate does not cure the breach or end the violation within the time specified by Covered Entity;
    2. Immediately terminate this Agreement and the Underlying Agreement if Business Associate has breached a material term of this Agreement and cure is not possible; or
    3. If neither termination nor cure is feasible, Covered Entity shall report the violation to the Secretary.
d. Effect of Termination.
    1. Except as provided in paragraph (2) of this subsection, upon termination of this Agreement, for any reason, Business Associate shall return or destroy all PHI received from Covered Entity, or created or received by Business Associate on behalf of Covered Entity. This provision shall apply to PHI and ePHI that is in the possession of subcontractors or agents of Business Associate. Business Associate shall retain no copies of the PHI or ePHI.
    2. In the event that Business Associate determines that returning or destroying the PHI or ePHI is not feasible, Business Associate shall provide to Covered Entity notification of the conditions that make return or destruction infeasible and shall extend the protections of this Agreement to that PHI and ePHI and limit further uses and disclosures of any such PHI and ePHI to those purposes that make the return or destruction infeasible, for so long as Business Associate maintains that PHI or ePHI.

6. Miscellaneous

a. Regulatory References. A reference in this Agreement to a section in the HIPAA Privacy or Security Rule means the section as in effect or as amended.
b. Amendment. The Parties agree to take such action as is necessary to amend this Agreement from time to time as is necessary for Covered Entity to comply with the requirements of the Privacy Rule, the Security Rule, and the Health Insurance Portability and Accountability Act of 1996, Pub. L. No. 104-191.
c. Survival. The respective rights and obligations of Business Associate under Section 5.c, related to "Effect of Termination," of this Agreement shall survive the termination of this Agreement.
d. Interpretation. Any ambiguity in this Agreement shall be resolved to permit Covered Entity to comply with the Privacy and Security Rules.
e. No Third Party Beneficiaries. Nothing express or implied in this Agreement is intended to confer, nor shall anything this Agreement confer, upon any person other than the parties and their respective successors or assigns, any rights, remedies, obligations or liabilities whatsoever.
f. Applicable Law and Venue. This Business Associate Agreement is governed by and construed in accordance with the governing law provision of the Medicare part D Employer/Union-Only Sponsored Group Waiver Plan Prescription Drug Services Agreement between Covered Entity and Business Associate.
g. Business Associate agrees to comply with all the requirements imposed on a business associate under Title XIII of the American Recovery and Reinvestment Act of 2009, the Health Information Technology for Economic and Clinical Health (HI-TECH) Act, and, at the request of NDPERS, to agree to any reasonable modification of this agreement required to conform the agreement to any Model Business Associate Agreement published by the Department of Health and Human Services.

7. Entire Agreement

This Agreement contains all of the agreements and understandings between the parties with respect to the subject matter of this Agreement. No agreement or other understanding in any way modifying the terms of this Agreement will be binding unless made in writing as a modification or amendment to this Agreement and executed by both parties.

IN WITNESS OF THIS, **NDPERS** [CE] and **ESI** [BA] agree to and intend to be legally bound by all terms and conditions set forth above and hereby execute this Agreement as of the effective date set forth above.

For Covered Entity:

Sparb Collins

Sparb Collins, Executive Director
ND Public Employees Retirement System

2/1/16
Date

For Business Associate:

Signature

Ronald K. Fox
Printed Name

President, Health Plan Division
Title

2/5/16
Date

ADDENDUM TO AGREEMENT FOR MEDICARE PART D EMPLOYER-ONLY SPONSORED GROUP WAIVER PLAN PRESCRIPTION DRUG SERVICES BETWEEN NORTH DAKOTA PUBLIC EMPLOYEES RETIREMENT SYSTEM AND MEDCO CONTAINMENT LIFE INSURANCE COMPANY

This Addendum is made and entered into this 17th day of November 2016, by and between the State of North Dakota, acting through its North Dakota Public Employees Retirement System (Client) and Medco Containment Life Insurance Company (MCLIC). This agreement is an Addendum to the Agreement for Medicare Part D Employer-Only Sponsored Group Waiver Plan Prescription Drug Services (Agreement) between the parties executed on December 30, 2015, and is made in accordance with Section 8.1 and Section 9.5 of the Agreement. All provisions of the Agreement remain in full force and effect except as otherwise noted in this Addendum.

Whereas, the Section 8.1 and Section 9.5 of the Agreement executed between the parties permit Client to renew the Agreement for the term of January 1, 2017 through December 31, 2017; and

Whereas, the Client expressed its intent to renew the Agreement by executing Document 192-2017-01 attached hereto as Exhibit A and dated September 15, 2016; now,

Therefore, the parties in consideration of the mutual agreements and undertakings set forth in the Agreement hereby agree as follows:

1. That the Agreement between the parties executed on December 30, 2015 shall continue to be effective for the term of January 1, 2017 through December 30, 2017; and,

2. That in the event a conflict exists between the terms of the Agreement and the terms of Exhibit A to this Addendum, Exhibit A shall control; and

3. That this Addendum shall not be effective until fully executed by both parties.

MEDCO CONTAINMENT LIFE INSURANCE COMPANY	STATE OF NORTH DAKOTA Acting through its ND Public Employees Retirement System
By: Ronald K. Fox	By:
Title: Ronald K. Fox	Title: Board Chairman
Date: 12/29/2016	Date: 11-18-2016

192-2017-01

EXPRESS SCRIPTS®

Dear North Dakota Public Employees Retirement System,

Medco Containment Life Insurance Company and Medco Containment Insurance Company of New York (hereinafter referred to as "Express Scripts Medicare") is pleased to continue offering the Medicare Part D Employer Group Waiver Plan (EGWP) for 2017 as described below.

Please check mark your intention below, sign and return to Express Scripts Medicare by 9/15/2016.

Plan Design:

		Retail Pharmacy Network	Retail Maintenance Drug Program (MDP) Pharmacy	Express Scripts Home Delivery
Day Supply		Up to 31 day	Up to 90 day	Up to 90 day
Member Co-Pay	Generic	$5 copay plus 15% coinsurance	$5 copay plus 15% coinsurance	$5 copay plus 15% coinsurance
	Preferred Brand	$15 copay plus 25% coinsurance	$15 copay plus 25% coinsurance	$15 copay plus 25% coinsurance
	Non-Preferred	$25 copay plus 50% coinsurance	$25 copay plus 50% coinsurance	$25 copay plus 50% coinsurance
	Specialty	$15 copay plus 25% coinsurance	$15 copay plus 25% coinsurance	$15 copay plus 25% coinsurance
Deductible		No Deductible		
Coverage Gap		No Coverage Gap; Member Co-pays above apply.		
Member True Out of Pocket (TrOOP)		$4,950		
Catastrophic Coverage		Member cost share post-TrOOP ($4,950) is the greater of 5% or $3.30 per generic or preferred multi-source drugs and the greater of 5% or $8.25 per all other brands		
Formulary		Medicare Premier Access		
Non Part D Drugs[1]		Mirror current coverage within CMS guidelines		
Part B Drugs[1]		Not Covered		
Generics Policy		Voluntary		
Utilization Management Program		All Approved Standard Part D		
Federal Poverty Limits		Standard Federal Poverty Limit (FPL) guidelines apply		

[1]Some states require coverage for certain Non Part D and Part B drugs. Express Scripts will comply with all state requirements on your behalf.

This group Medicare Part D plan has additional benefits to enhance the Medicare Part D coverage, as required by the Centers for Medicare and Medicaid Services (CMS). Per CMS regulations, the benefit enhancements are considered other health benefits and require filing with and approval by the state department of insurance. Express Scripts Medicare will offer this product in conjunction with Sanford Health Plan. The premium consists of two distinct components that will be outlined on your invoice as follows:

Employer Group Waiver Plan Premium - offered by Express Scripts Medicare through its contracts with the Centers for Medicare and Medicaid Services	**$73.67**
Additional enhanced insurance - offered above and beyond the CMS defined standard benefit Premium	**$16.65**
Total Premium Per Member Per Month* (PMPM)	**$90.32**

These premiums are based on group enrollment with member option to opt out and a minimum enrollment of 3,000 in the selected plan by 1/1/2017. If minimum enrollment thresholds are not met, Express Scripts Medicare reserves the right to adjust the premium accordingly.

**The illustrated premium is subject to change in the event of CMS guidance and rate changes.*

☒ I elect to offer the plan design as described to my Members **effective 01/01/2017 – 12/31/2017** pursuant to my agreement with Express Scripts Medicare.
☐ I do not elect the above EGWP and will notify Express Scripts Medicare of my intentions in accordance to our agreement by the timeframe required within our agreement.

Jon Strinden Board Chair — Print Name
Signature
9-15-2016 — Date

Please be aware that if you do not complete the above election and notify Express Scripts Medicare by 9/15/2016, attempts to confirm your intentions for the 2017 plan year will be made. If we are unable to confirm intentions for the 2017 plan year, the group disenrollment process may be initiated and your retirees will be notified that they need to seek coverage elsewhere or under alternative plans that you may offer.

Sincerely,

Express Scripts, Inc.
Client Contracting Department
One Express Way
St. Louis, MO 63121
FAX: 1-800-287-0359

MEDICARE PART D
EMPLOYER/UNION-ONLY SPONSORED GROUP WAIVER PLAN
PRESCRIPTION DRUG SERVICES AGREEMENT

THIS MEDICARE PART D EMPLOYER-ONLY SPONSORED GROUP WAIVER PLAN PRESCRIPTION DRUG SERVICES AGREEMENT ("Agreement"), made as of the date of execution as set forth on the signature page (the "Execution Date"), is entered into by and between Medco Containment Life Insurance Company, a Pennsylvania corporation ("MCLIC") (an affiliate of Express Scripts, Inc.) and NORTH DAKOTA PUBLIC EMPLOYEES RETIREMENT SYSTEM, on its own behalf and on behalf of the Client Group Health Plan (as defined below) ("Client").

RECITALS

A. MCLIC has received approval from the Centers for Medicare and Medicaid Services ("CMS") to serve as a Prescription Drug Plan Sponsor (a "PDP Sponsor") and to provide prescription drug coverage that meets the requirements of, and pursuant to, the Voluntary Prescription Drug Benefit Program set forth in Part D of the Medicare Prescription Drug, Improvement, and Modernization Act of 2003, 42 U.S.C. §1395w-101 through 42 U.S.C. §1395w-152 (the "Act") and all applicable and related rules and regulations promulgated, issued or adopted by CMS or other governmental agencies with jurisdiction over enforcement of the Act, including, but not limited to, 42 C.F.R. §423.1 through 42 C.F.R. §423.910 (with the exception of Subparts Q, R, and S), and the terms of any PDP Sponsor contract between CMS and MCLIC (collectively, the "Medicare Drug Rules"); and

B. Pursuant to the waivers granted by CMS under 42 U.S.C. §1395w-132(b), MCLIC offers employer/union-only sponsored group waiver plans ("EGWPs") to employers/unions that wish to provide prescription drug benefits to their Part D Eligible Retirees (as defined below) in accordance with the Medicare Drug Rules; and

C. Client desires to contract with MCLIC to offer a prescription drug benefit to Client's Part D Eligible Retirees pursuant to an EGWP (the "EGWP Benefit") (as further defined below) as part of Client's group welfare benefit plan (the "Client Group Health Plan"); and

E. Provided that the EGWP Benefit meets the actuarial equivalence standards of the Medicare Drug Rules, as more fully described below, MCLIC desires to offer the EGWP Benefit to Client's Part D Eligible Retirees in accordance with the Medicare Drug Rules and pursuant to the terms and conditions of this Agreement.

NOW, THEREFORE, in consideration of the mutual representations, warranties and covenants herein contained, and pursuant to the terms and subject to the conditions set forth below, MCLIC and Client hereby agree as follows:

TERMS AND CONDITIONS

ARTICLE I - DEFINITIONS

Terms not otherwise defined in this Agreement shall have the meanings ascribed to them as set forth below, or as defined in the Medicare Drug Rules.

"Affiliate" means, with respect to MCLIC, individually or collectively, any other individual, corporation, partnership, limited liability company, trust, joint venture or other enterprise or entity directly or indirectly controlling (including without limitation all directors and executive officers of such entity), controlled by or under direct or indirect common control of or with MCLIC.

"Ancillary Supplies, Equipment, and Services" or "ASES" means ancillary supplies, equipment, and services provided or coordinated by ESI Specialty Pharmacy in connection with ESI Specialty Pharmacy's dispensing of Specialty Products. ASES may include all or some of the following: telephonic and/or in-person training, nursing/clinical services, in-home infusion and related support, patient monitoring, medication pumps, tubing, syringes, gauze pads, sharps containers, lancets, test strips, other supplies, and durable medical equipment. The aforementioned list is illustrative only (not exhaustive) and may include other supplies, equipment, and services

based on the patient's needs, prescriber instructions, payer requirements, and/or the Specialty Product manufacturer's requirements.

"Commercial Agreement" means that certain Pharmacy Benefit Management Agreement, dated January 1, 2014, by and between Express Scripts, Inc. ("ESI") and Sanford Health Plan and Sanford Health Plan of Minnesota (collectively "Sanford"), as amended from time to time (the "Commercial Agreement"). Client contracts with Sanford to receive pharmacy benefit services for its non-EGWP members.

"Copayment" or "Copay" means that portion of the charge for each Covered Drug dispensed to an EGWP Enrollee that is the responsibility of such EGWP Enrollee (e.g., copayment, coinsurance, cost sharing, and/or deductibles under initial coverage limits and up to annual out-of-pocket thresholds) as provided under the EGWP Benefit and shown on Exhibit A.

"Coverage Gap" means the stage of the benefit between the initial coverage limit and the catastrophic coverage threshold, as described in the Medicare Part D prescription drug program administered by the United States federal government.

"Coverage Gap Discount" means the manufacturer discounts available to eligible Medicare beneficiaries receiving applicable, covered Medicare Part D drugs, while in the Coverage Gap.

"Coverage Gap Discount Program" means the Medicare program that makes manufacturer discounts available to eligible Medicare beneficiaries receiving applicable, covered Medicare Part D drugs, while in the Coverage Gap.

"Covered Drug(s)" means those prescription drugs, supplies, Specialty Products and other items that are covered under the EGWP Benefit, or treated as covered pursuant to a coverage determination or appeal.

"EGWP Benefit" means the prescription drug benefit to be administered by MCLIC under this Agreement, as defined in the Recitals above and as further described in the Client Group Health Plan document, its summary plan description, and its summary of benefits, the latter of which is attached hereto as Exhibit A, as may be amended from time to time in accordance with the terms of this Agreement.

"EGWP Enrollee" means each Part D Eligible Retiree who is enrolled in the EGWP Benefit in accordance with the terms of this Agreement.

"EGWP Enrollee Submitted Claim" means (a) a claim submitted by an EGWP Enrollee for Covered Drugs dispensed by a pharmacy other than a Participating Pharmacy, or (b) a claim for Covered Drugs filled at a Participating Pharmacy for which the EGWP Enrollee paid the entire cost of the Covered Drug.

"Enrollment File" means the list(s) submitted by Client to MCLIC, in accordance with Article II, indicating the Part D Eligible Retirees that Client has submitted for enrollment in the EGWP Benefit, as verified by MCLIC through CMS eligibility files.

"ESI Specialty Pharmacy" means CuraScript, Inc., Accredo Health Group, Inc., Express Scripts Specialty Distribution Services, Inc., or another pharmacy or home health agency wholly-owned or operated by MCLIC or one or more of its affiliates that primarily dispenses Specialty Products or provides services related thereto; provided, however, that when the Mail Service Pharmacy dispenses a Specialty Product, it shall be considered an ESI Specialty Pharmacy hereunder.

"HIPAA" means the Health Insurance Portability and Accountability Act of 1996, as amended, and the regulations promulgated thereunder.

"Ineligible Enrollee" means an EGWP Enrollee who Client or MCLIC determines will no longer be eligible to participate as an EGWP Enrollee in the EGWP Benefit, in accordance with the EGWP Benefit's eligibility requirements and/or the Medicare Drug Rules.

"Late Enrollment Penalty" or "LEP" means the financial penalty incurred under the Medicare Drug Rules by Medicare Part D beneficiaries who have had a continued gap in creditable coverage of sixty-three (63) days or more after the end of the beneficiary's initial election period, adjusted from time to time by CMS.

"Mail Service Pharmacy" means a duly licensed pharmacy wholly owned or operated by MCLIC or one or more of its Affiliates, other than ESI Specialty Pharmacy, where prescriptions are filled and delivered to EGWP Enrollees via mail or other delivery service.

"Manufacturer Administrative Fees" means those administrative fees of up to 3.5% of the AWP of certain Covered Drugs paid by pharmaceutical manufacturers to, or otherwise retained by, MCLIC or its Affiliate pursuant to a contract between MCLIC or its Affiliate and the manufacturer and directly in connection with MCLIC or its Affiliate administering, invoicing, allocating and collecting the Rebates for the EGWP Benefit under the Medicare Rebate Program.

"Medicare Formulary" means the list of prescription drugs and supplies developed, implemented and maintained in accordance with the Medicare Drug Rules for the EGWP Benefit.

"Medicare Rebate Program" means MCLIC's or its Affiliate's manufacturer rebate program under which MCLIC or its Affiliate contracts with pharmaceutical manufacturers for Rebates payable on selected Covered Drugs that are reimbursed, in whole or in part, through Medicare Part D, as such program may change from time to time.

"Part D" or "Medicare Part D" means the Voluntary Prescription Drug Benefit Program set forth in Part D of the Act.

"Part D Eligible Retiree" means an individual who is (a) eligible for Part D in accordance with the Medicare Drug Rules, (b) not enrolled in a Part D plan (other than the EGWP Benefit), and (c) eligible to participate in Client's Current Benefit.

"Participating Pharmacy" means any licensed retail pharmacy, including retail, long-term care, home infusion, I/T/U pharmacies, with which MCLIC or one or more of its Affiliates has executed an agreement to provide Covered Drugs to EGWP Enrollees. These shall not include any mail order or specialty pharmacy affiliated with any such Participating Pharmacy.

"Pharmacy" or "Pharmacies" refers from time to time to any or all Participating Pharmacies, Mail Service Pharmacy, or ESI Specialty Pharmacy as the context of the provision dictates.

"Prescription Drug Claim" means an EGWP Enrollee Submitted Claim or claim for payment of a Covered Drug submitted to MCLIC by a Pharmacy.

"Prescription Drug Plan" or "PDP" shall have the meaning set forth in the Medicare Drug Rules.

"PHI" means protected health information as defined under HIPAA.

"Rebates" means retrospective formulary rebates that are paid to MCLIC or its Affiliate, pursuant to the terms of a formulary rebate contract negotiated independently by MCLIC or its Affiliate and directly attributable to the utilization of certain Covered Drugs by EGWP Enrollees under the EGWP Benefit. For sake of clarity, Rebates do not include, for example, Manufacturer Administrative Fees, product discounts or fees related to the procurement of prescription drug inventories by or on behalf of MCLIC or its Affiliates owned and operated specialty or mail order pharmacies; as more fully described in Exhibit D; fees received by MCLIC from manufacturers for care management or other services provided in connection with the dispensing of Specialty Products; or other fee-for-service arrangements whereby pharmaceutical manufacturers generally report the fees paid to MCLIC, its Affiliates or wholly-owned subsidiaries for services rendered as "bona fide service fees" pursuant to federal laws and regulations, including, but not limited to the Medicaid "Best Price" rule (collectively, "Other Pharma Revenue"). Such laws and regulations, as well as MCLIC's contracts with pharmaceutical manufacturers, generally prohibit MCLIC from sharing any such "bona fide service fees" earned by MCLIC, whether wholely or in part, with any MCLIC client.

"Specialty Product List" means the standard list of Specialty Products and their reimbursement rates applicable to Client and available to EGWP Enrollees as part of the EGWP Benefit provided to Client with this Agreement and as updated from time to time. MCLIC or its Affiliate will provide additional and/or updated Specialty Product Lists any time upon request from Client.

"Specialty Products" means those injectable and non-injectable drugs on the Specialty Product List. Specialty Products typically have one or more of several key characteristics, including: frequent dosing adjustments and intensive clinical monitoring to decrease the potential for drug toxicity and increase the probability for beneficial treatment outcomes; intensive patient training and compliance assistance to facilitate therapeutic goals; limited or exclusive product availability and distribution; specialized product handling and/or administration requirements and/or cost in excess of $500 for a 30 day supply. Specialty Products elected for coverage shall be considered "Covered Drugs" as defined in the Agreement.

"True Out-of-Pocket Costs" or "TrOOP" means costs incurred by an EGWP Enrollee or by another person on behalf of an EGWP Enrollee, such as a deductible or other cost-sharing amount, with respect to Covered Drugs, as further defined in the Medicare Drug Rules.

"UM Company" means MCMC, LLC or other independent third party utilization management company contracted by MCLIC, subject to and as further described herein.

ARTICLE II – PLAN STATUS UNDER APPLICABLE LAWS; ENROLLMENT AND DISENROLLMENT IN THE EGWP BENEFIT

2.1 Medicare Part D. Client and MCLIC acknowledge and agree as follows:

(a) Under the Medicare Drug Rules, the EGWP Benefit will be deemed to be an EGWP administered by MCLIC and each EGWP Enrollee will be deemed to be a Part D enrollee of MCLIC who is covered by the EGWP Benefit.

(b) The design of and administration of the EGWP Benefit is subject to the applicable requirements of the Medicare Drug Rules. Client shall cooperate with MCLIC and, upon MCLIC's request, do, execute, acknowledge, deliver, and provide such further acts, reports, information, and instruments as may be reasonably required or appropriate to administer the EGWP Benefit in compliance with the Medicare Drug Rules, applicable state insurance laws and other applicable laws. MCLIC shall provide reasonable guidance to Client regarding the requirements of the performance necessary for Client to meet its obligation under this section.

(c) In the event any Federal or State authority imposes any changes to plan design, plan benefits or other mandate affecting the Plan that results in the number of Client's Part D Eligible Retirees being materially reduced or eliminated for any reason, MCLIC and Client shall reasonably cooperate to anticipate material increased expenses or other material effects and negotiate in good faith to incorporate consequent program pricing terms. In the event the parties are unable to reach agreement, either party may terminate this Agreement pursuant to 7.1 hereof. MCLIC reserves the right to adjust the program pricing terms hereunder to reflect the reduction or elimination of the number of Part D Eligible Retirees, with a 90-day notice, or when mandates imposed by State or Federal legislative action or NDPERS mandate become effective.

2.2 HIPAA.

(a) Each of Client, the Client Group Health Plan and MCLIC agrees to take reasonable and necessary actions to safeguard the privacy and security of information that identifies a particular EGWP Enrollee in accordance with state and federal privacy and security requirements, including HIPAA and the confidentiality and security provisions stated in 42 C.F.R. §423.136. Without limiting the generality of the foregoing, the parties acknowledge that, for the purposes of HIPAA compliance, each of MCLIC and the Client Group Health Plan is a Covered Entity, and that, with respect to the EGWP Benefit, MCLIC and the Client Group Health Plan shall be deemed to be an Organized Health Care Arrangement. MCLIC and the Client Group Health Plan may transmit and receive PHI as necessary for the operation of the EGWP Benefit. In addition, MCLIC may transmit PHI to the Client Group Health Plan for payment purposes and any other purpose permitted by HIPAA. Client hereby represents and warrants that: (i) the Client Group Health Plan's documents have been amended to meet the specification requirements set forth at 45 C.F.R. §164.504(f); (ii) Client will use and disclose PHI solely in accordance with these provisions; and (iii) accordingly, MCLIC, at the direction of the Client Group Health Plan, may disclose PHI to Client consistent with the terms of this Section 2.2. The parties shall take reasonable steps to ensure that all uses and disclosures of PHI by MCLIC, the Client Group Health Plan and Client only include information that is minimally necessary to accomplish the purpose(s) of the use or disclosure. Capitalized terms used in this Section 2.2 and not otherwise defined in this Agreement shall have the meaning set forth in HIPAA. Notwithstanding the foregoing, the

parties acknowledge that in providing services to EGWP Enrollees, ESI Specialty Pharmacy and the Mail Service Pharmacy are acting as separate health care provider covered entities under HIPAA and not as business associates to the Plan covered by the Business Associate Agreement. In providing services, ESI Specialty Pharmacy and the Mail Services Pharmacy shall abide by all HIPAA requirements applicable to covered entities and shall safeguard, use and disclose EGWP Enrollee PHI accordingly.

2.3 Group Enrollment. Subject to each individual's right to opt out, as described below, Client shall enroll Part D Eligible Retirees in the EGWP Benefit through a group enrollment process, as further described in and permitted under the Medicare Drug Rules. Client agrees that it will comply with all applicable requirements for group enrollment in EGWPs as set forth in the Medicare Drug Rules and related CMS guidance, and as described and required by MCLIC's policies and procedures. Client's performance under this Section 2.3 shall be a condition precedent to MCLIC's performance under this Agreement. MCLIC shall provide reasonable guidance to Client regarding the requirements of the performance necessary for Client to meet its obligation under this section.

2.4 Enrollment File. No later than thirty (30) days prior to the Effective Date (unless otherwise agreed to by the parties) and the first day of each EGWP Benefit enrollment period thereafter, so long as this Agreement is in effect, Client, or its authorized representative, shall provide an Enrollment File to MCLIC via on-line or other communication medium reasonably requested by MCLIC that lists those Part D Eligible Retirees for whom Client intends to make application for enrollment in the EGWP Benefit (i.e., those Part D Eligible Retirees who have not opted out of the group enrollment process) for that contract year. Client shall communicate all new enrollments, requested retroactive enrollments of Part D Eligible Retirees, and disenrollments from the EGWP Benefit via the communication medium reasonably requested by MCLIC. MCLIC agrees to process retroactive enrollment requests pursuant to the requirements of the Medicare Drug Rules. Client acknowledges and agrees that the requested effective date for any such retroactive enrollment may not be prior to the date that the enrollment request was completed by the individual, and that the effective date of enrollment may be adjusted by no greater than ninety (90) days. Client represents and warrants that the Enrollment File provided to MCLIC pursuant to this Section 2.4, and all retroactive additions thereto, shall only include those individuals eligible for enrollment under the Client Group Health Plan, and which have elected to participate in the EGWP Benefit. Client's performance under this Section 2.4 shall be a condition precedent to MCLIC's performance under this Agreement.

2.5 Implementation.

(a) MCLIC's Responsibilities. MCLIC shall implement the Enrollment File following confirmation of the eligibility of the Part D Eligible Retirees listed on the Enrollment File with CMS eligibility files. A Part D Eligible Retiree will not be enrolled in the EGWP Benefit unless such individual is listed on both the Enrollment File submitted by Client and the CMS eligibility files. MCLIC will seek from CMS verification of eligibility for all Part D Eligible Retirees whose names are listed in the Enrollment File. If an individual is listed on the Enrollment File provided by Client, but is not eligible for participation according to CMS eligibility files, then MCLIC shall notify Client in a timely manner regarding such individual's ineligibility. MCLIC will work with Client to determine if such individual has been rejected due to an administrative or clerical error (e.g., data field standards errors, rejections related to information input by MCLIC related to the EGWP Benefit into the CMS system, etc.), or an error requiring individual retiree contact, and if so in either case, MCLIC will take appropriate action and attempt to correct such error and resubmit the individual through the CMS system. Client acknowledges and agrees that MCLIC may update in the Enrollment File any and all information concerning Part D Eligible Retirees upon receipt of corrected information from CMS, and MCLIC may use such corrected information to obtain a Part D Eligible Retiree's enrollment in the EGWP Benefit. For all Part D Eligible Retirees that have been included by Client in the Enrollment File, but who are ultimately determined to be ineligible for participation in the EGWP Benefit, MCLIC or its Affiliate shall notify the individual of his or her ineligibility in the EGWP Benefit and take all other action as required by applicable law. MCLIC shall communicate to Client any changes to a Part D Eligible Retiree's information in the Enrollment File based upon updates or corrections received from CMS.

(b) Incomplete Enrollment File Information. Client acknowledges that its submission to MCLIC of an inaccurate or incomplete Enrollment File (e.g., missing date of birth, last name, first name, etc.) or otherwise of incomplete information with respect to any individual Part D Eligible Retiree, may result in a rejection of the Part D Eligible Retiree's enrollment in the EGWP Benefit. MCLIC will provide Client with regular reports providing the details of all such incomplete information needed to enroll Part D Eligible Retirees. Upon Client's request, MCLIC will perform research and may initiate contact and communication with all such Part D Eligible Retirees to obtain all missing information needed to complete enrollment of the Part D Eligible Retirees in the EGWP Benefit. Client

acknowledges and agrees that MCLIC may contact Client's Part D Eligible Retirees to obtain the information required hereunder, and that MCLIC will update the Enrollment File on Client's behalf to reflect additional information needed to complete enrollment of the Part D Eligible Retirees in the EGWP Benefit. MCLIC shall provide to Client all such updated information through the regular reports provided hereunder. After obtaining all information needed to complete enrollment of the Part D Eligible Retirees in the EGWP Benefit, MCLIC shall complete such enrollment including verification with CMS; provided, however, that if MCLIC, using reasonable efforts, is not able to obtain all missing information from a Part D Eligible Retiree within twenty-one (21) days after receiving Client's initial request for enrollment of the Part D Eligible Retiree in the EGWP Benefit, then Client's request shall be deemed cancelled and MCLIC or its Affiliate shall notify the individual of his or her non-enrollment in the EGWP Benefit and shall take all other action as required by applicable law.

(c) Effective Date of Application for Enrollment into EGWP Benefit. Notwithstanding any provision of this Agreement to the contrary, the effective date of the application for any Part D Eligible Retiree who MCLIC seeks to enroll in the EGWP Benefit hereunder shall be the date on which the application for enrollment is entered by MCLIC into its enrollment system, subject however to any adjustments that MCLIC may make for retroactive enrollments as necessary to enroll the Part D Eligible Retiree in the EGWP Benefit.

(d) Client's Responsibilities. The parties agree that Sanford will be providing certain services on behalf of Client with respect to Client's obligations under this Agreement. Client shall bind Sanford for obligations Sanford performs on its behalf, and references in the Agreement to "Client" in performing a function shall be construed to include Sanford to the extent applicable. Further, Client shall require Sanford to comply with all applicable laws and the Medicare Drug Rules. The services provided by Sanford on behalf of client include, but may not be limited to the following:

Help coordination of communication pieces between ESI and Client;
Assisting Client with renewals or other contract negotiations with ESI;
Helping to provide technical advice to Client on pharmacy issues;
Assist Client/ESI with EGWP Enrollee appeals and general complaints;
Assist Client/ESI with problem resolution;
Assist EGWP Enrollees with appeals on formulary, network & other issues;
Assist Client/ESI with general EGWP Enrollee inquiries related to their prescription drug plan

2.6 Individual Disenrollment. If Client or MCLIC determines that an EGWP Enrollee will be an Ineligible Enrollee, in accordance with the EGWP Benefit's eligibility requirements and/or the Medicare Drug Rules, then the following procedures shall be implemented as applicable:

(a) Upon Client's determination, Client shall notify MCLIC no earlier than sixty (60) days prior to the effective date of such Ineligible Enrollee's ineligibility, in a manner and format agreed upon by the parties;

MCLIC shall send a letter / notification to the Ineligible Enrollee alerting the Ineligible Enrollee that she is no longer eligible to participate in the EGWP Benefit;

(c) Client shall provide all information to MCLIC that is required for MCLIC to submit a complete disenrollment request transaction to CMS, as set forth in the Medicare Drug Rules; and

(d) MCLIC shall submit the disenrollment request transaction to CMS in accordance with the Medicare Drug Rules.

2.7 Group Disenrollment. If, upon the expiration of the then current term of this Agreement, or as otherwise provided in Section 8.2, Client plans to disenroll its EGWP Enrollees from the EGWP Benefit using a group disenrollment process, then Client shall implement the following procedures:

(a) Notification to EGWP Enrollees. Client shall provide at least twenty-one (21) days (or such other minimum days' notice as required by the Medicare Drug Rules) prior written notice to each EGWP Enrollee that Client plans to disenroll him or her from the EGWP Benefit and shall include with such written notification an explanation as to how the EGWP Enrollee may contact CMS for information on other Medicare Part D options that might be available to the EGWP Enrollee; and

(b) Information to MCLIC. Client shall provide all the information to MCLIC that is required for MCLIC to submit a complete disenrollment request transaction to CMS, as set forth in the Medicare Drug Rules.

2.8 Voluntary Disenrollment. If an EGWP Enrollee makes a voluntary request to be disenrolled from the EGWP Benefit (the "Voluntary Disenrollee") to Client, then Client shall notify MCLIC no earlier than sixty (60) days prior to the effective date of such Voluntary Disenrollee's disenrollment, in a manner and format agreed upon by the parties. If Client does not timely notify MCLIC of such Voluntary Disenrollee's disenrollment in the EGWP Benefit, then MCLIC shall submit a retroactive disenrollment request to CMS. Client acknowledges that CMS may only grant up to a ninety (90) day retroactive disenrollment in such instances. If the Voluntary Disenrollee makes his or her request directly to MCLIC, then MCLIC shall direct the Voluntary Disenrollee to initiate the disenrollment with the Client.

2.9 Responsibility for Claims After Loss of Eligibility or Disenrollment. Client represents and warrants that all information that Client, or its authorized representative, provides to MCLIC in the Enrollment File will be complete and correct. Except for Prescription Drug Claims that are paid due to MCLIC's negligence, Client shall be responsible for reimbursing MCLIC pursuant to Section 5.1 for all Prescription Drug Claims processed by MCLIC (a) with respect to an Ineligible Enrollee, as determined by Client, during any period in which the Enrollment File indicated that such Ineligible Enrollee was eligible and (b) with respect to a Voluntary Disenrollee, in the event Client did not provide timely notice to MCLIC of such disenrollment as set forth in this Article II.

2.10 General Support Services. In addition to any other Client obligation under this Article II or elsewhere in this Agreement, Client shall be responsible for providing general support services to EGWP Enrollees throughout the enrollment process, including, but not limited to, EGWP Enrollee education concerning the EGWP Benefit, communicating information concerning premiums, providing information concerning alternative benefit options offered by Client, if any, and answering on-going inquiries related to the payment of the applicable EGWP Enrollee premium.

2.11 Effect On / Effect Of Commercial Agreement. Except as expressly provided in this Agreement, the parties acknowledge that MCLIC shall have no obligations under the Commercial Agreement with respect to the Client Group Health Plan, and that Client shall be solely responsible for determining the eligibility of members covered by the prescription drug benefit administered pursuant to the Commercial Agreement (the "Commercial Benefit"). Upon a member's enrollment as an EGWP Enrollee in the EGWP Benefit, such EGWP Enrollee's eligibility as a member in the Commercial Benefit shall immediately terminate. An EGWP Enrollee may not have dual coverage under the EGWP Benefit and the Commercial Benefit; and therefore, after any EGWP Enrollee's enrollment in the EGWP Benefit, all Prescription Drug Claims and member submitted claims submitted to ESI under the Commercial Agreement shall be treated as Prescription Drug Claims under this Agreement and shall be processed by MCLIC in accordance with the EGWP Benefit. Any Prescription Drug Claim or member submitted claim processed under the Commercial Agreement and the Commercial Benefit after the date of an EGWP Enrollee's enrollment in the EGWP Benefit shall be reversed and shall be re-processed under the EGWP Benefit. Client acknowledges that termination of a member's coverage under the Commercial Benefit prior to such member's enrollment as an EGWP Enrollee in the EGWP Benefit may result in a loss of prescription drug benefit coverage for such member; provided, however, notwithstanding the foregoing, the parties acknowledge and agree that a member's prescription drug benefit coverage under the Commercial Benefit shall be solely determined by Client and not by MCLIC or any of its Affiliates, including without limitation ESI.

ARTICLE III – PRESCRIPTION DRUG SERVICES

3.1 Exclusivity. Client acknowledges and agrees that, in the event Client offers its Part D Eligible Retirees more than one Part D benefit option, the eligibility determinations, enrollment and disenrollment and other administration of such Part D options will require extensive coordination with the administration of the EGWP Benefit. For these reasons, Client agrees that Client shall use MCLIC as Client's exclusive provider of all Medicare Part D services for its Part D Eligible Retirees during the term of this Agreement unless otherwise requested by Client and agreed to by MCLIC in writing. Notwithstanding the forgoing, the parties agree that Retiree Health Insurance Credit benefits received by Part D Eligible Retirees does not violate or implicate this section. The terms and conditions of Client's and MCLIC's arrangements for Part D options other than the EGWP Benefit shall be set forth in separate agreements.

Prescription Drug Services In exchange for Client's payment to MCLIC of the amounts set forth in Section

5.2, MCLIC will offer the EGWP Benefit to EGWP Enrollees in accordance with the terms and conditions of this Agreement. In its capacity as a PDP Sponsor with respect to the EGWP Benefit, MCLIC will be responsible for pharmacy network contracting; Mail Service Pharmacy and Specialty Products services; Prescription Drug Claim processing; Formulary and Rebate administration; Medication Therapy Management; and related services (collectively, "Prescription Drug Services"), as further described in this Agreement. All Prescription Drug Services shall be provided by MCLIC in accordance with the Medicare Drug Rules and the terms of the EGWP Benefit. Client acknowledges and agrees that MCLIC may provide Prescription Drug Services under this Agreement through one or more of its Affiliates. MCLIC represents and warrants that it will have written agreements with each Affiliate that will perform services on behalf of MCLIC in connection with the EGWP Benefit that meet the requirements the Medicare Drug Rules for subcontractors of PDP Sponsors.

3.3 Compliance with Medicare Drug Rules and State Insurance Laws. Under the Medicare Drug Rules, MCLIC is required to maintain licensure under applicable state insurance laws or to obtain appropriate waivers from CMS of such requirements. Notwithstanding any provision to the contrary in this Agreement, MCLIC shall not be obligated to take any action or omit to take any action with respect to the EGWP Benefit that is not in compliance with the Medicare Drug Rules, applicable state insurance laws or other applicable laws.

3.4 The EGWP Benefit. The EGWP Benefit will satisfy all actuarial equivalence standards set forth in the Medicare Drug Rules. Client hereby agrees to cooperate with MCLIC to perform the necessary actuarial equivalence calculations to determine whether the EGWP Benefit meets the foregoing actuarial equivalence standards prior to the Effective Date. If MCLIC determines that the EGWP Benefit does not meet the actuarial equivalence standards, then Client shall cooperate with MCLIC to make necessary adjustments to the EGWP Benefit design to meet the actuarial equivalence standards.

3.5 Changes to the EGWP Benefit. Client shall have the right to request changes to the terms of the EGWP Benefit from time to time by providing written notice to MCLIC. Any such changes shall be subject to the following requirements: (a) all changes to the EGWP Benefit must be consistent with the Medicare Drug Rules; (b) the EGWP Benefit, after implementation of such changes, must continue to meet the actuarial equivalence standards referenced in Section 3.4 above; (c) EGWP Benefit changes may be implemented only at times and in the manner permitted by the Medicare Drug Rules; and (d) any requested change that would increase MCLIC's costs of administering the EGWP Benefit without an equivalent increase in the PMPM Fees (as defined in Section 5.2 below) paid to MCLIC from Client shall not be implemented unless and until Client and MCLIC agree in writing upon a corresponding adjustment to the PMPM Fees.

3.6 EGWP Enrollee Communications. All standard EGWP Enrollee communications concerning the EGWP Benefit (i.e., summary plan description, evidence of coverage, etc.) shall be mutually developed by MCLIC and the Client pursuant to the Medicare Drug Rules, including the CMS Marketing Guidelines contained therein. MCLIC shall be responsible, with assistance from Client, in completing EGWP Enrollee communications and distributing them to EGWP Enrollees as appropriate. Pursuant to the Medicare Drug Rules, Client acknowledges and agrees that MCLIC must provide all such EGWP Enrollee communications, whether created and/or distributed by MCLIC or Client, to CMS for review. If CMS notifies MCLIC that any such EGWP Enrollee communication is deficient, Client agrees to assist MCLIC to make necessary revisions to such EGWP Enrollee communication to correct such deficiency.

3.7 Network Access and Service Area Requirements. At least thirty (30) days prior to the Effective Date, Client shall provide MCLIC de-identified aggregate information concerning where: (A) all Part D Eligible Retirees reside; and (B) all of Client's employees reside, as necessary for MCLIC to determine whether MCLIC's network of Participating Pharmacies is sufficient to meet the needs of such individuals. Client represents and warrants that all such information shall be accurate and complete. Client's performance under this Section 3.7 shall be a condition precedent to MCLIC's performance under this Agreement. If MCLIC determines that its network of Participating Pharmacies is not sufficient to meet the needs of individuals eligible to participate in the EGWP Benefit, then MCLIC shall use its best efforts to address such deficiencies. If MCLIC is not able to satisfactorily address such deficiencies prior to the Effective Date, then MCLIC shall provide written notice to Client prior to the Effective Date and this Agreement shall automatically terminate.

3.8 Pharmacy Network. Subject to the terms of Section 3.7 above, MCLIC shall develop and maintain a Participating Pharmacy network that, at a minimum, is sufficient to meet the needs of the EGWP Enrollees, as provided in the CMS waiver guidance concerning network access under Medicare Drug Rules.

(a) Pharmacy Credentialing. MCLIC agrees to comply with all applicable Medicare Drug Rules regarding credentialing requirements. MCLIC shall require Participating Pharmacies, MCLIC Mail Service Pharmacy and ESI Specialty Pharmacy to meet MCLIC's and the Medicare Drug Rules' credentialing requirements, including but not limited to licensure, insurance and provider agreement requirements.

(b) Independent Contractors. Neither MCLIC nor its Affiliate directs or exercises any control over the professional judgment exercised by any pharmacist in dispensing prescriptions or otherwise providing pharmaceutical related services at a Participating Pharmacy. Participating Pharmacies are independent contractors of MCLIC or its Affiliate, and neither MCLIC nor its Affiliate shall have any liability to Client, any EGWP Enrollee or any other person or entity for any act or omission of any Participating Pharmacy or its agents or employees.

(c) Pharmacy Help Desk. MCLIC will provide 24-hour a day, 7-days a week toll-free telephone support and Internet web site to assist Participating Pharmacies with EGWP Enrollee eligibility verification and questions regarding reimbursement, and Covered Drug benefits under the EGWP Benefit.

3.9 Audits of Participating Pharmacies; Fraud and Abuse. MCLIC shall periodically audit Participating Pharmacies to determine compliance with their agreements with MCLIC or its Affiliate and in order to meet the anti-fraud provisions of the Medicare Drug Rules applicable to PDPs. MCLIC also shall perform fraud and abuse reviews of EGWP Enrollees and physicians as required under the Medicare Drug Rules for PDPs.

3.10 Claims Processing. Subject to Sections 3.10(a)-(h), MCLIC will be responsible for all claims processing services for Covered Drugs dispensed to EGWP Enrollees by a Pharmacy consistent with the applicable standard transaction rules required under HIPAA and Medicare Drug Rules. MCLIC also shall process EGWP Enrollee Submitted Claims.

(a) COB.

(i) MCLIC will coordinate benefits with state pharmaceutical assistance programs and entities providing other prescription drug coverage consistent with the Medicare Drug Rules. If Client, in accordance with the Medicare Drug Rules, elects to provide non-Medicare EGWP supplemental coverage for EGWP Enrollees through other health insurance separately issued by a carrier with which MCLIC or its Affiliate has contracted (the "EGWP Supplemental Policy"), then MCLIC will perform the following additional coordination of benefits: Coordination of benefits for Medicare Part D applicable drugs throughout the EGWP Benefit and the EGWP Supplemental Policy; single transaction for members at POS utilizing Medicare Part D eligibility and a single ID card; utilize EGWP Enrollee eligibility established under Medicare Part D plan; comprehensive EGWP Enrollee communications package for the EGWP Supplemental Policy; all CMS required reporting; claims reporting detailing primary and secondary payments; and financial reporting detailing application of Coverage Gap Discount Program.

(ii) The premium collected by MCLIC or its Affiliate for the EGWP Supplemental Policy, which is an amount set forth as a separate line item on Client's invoice, is included in the PMPM Fees paid to MCLIC pursuant to this Agreement. PMPM Fees collected by MCLIC pursuant to this Agreement will first be applied to all non-EGWP Supplemental Policy PMPM Fees owed to MCLIC before applying any remaining amounts to the EGWP Supplemental Policy premium amounts owned. As a result, default in payment of PMPM Fees by Client, in whole or in part, may result in a default under the EGWP Supplemental Policy for failure to pay premium amounts thereunder. In addition to the principal ESI revenue sources disclosed in Exhibit B (Financial Disclosure), in connection with the EGWP Supplemental Policy issued to Client in connection with this Agreement, MCLIC or its Affiliate is paid an original commission in an amount equal to one percent (1%) of the gross premium collected by MCLIC or its Affiliate for the EGWP Supplemental Policy.

(iii) If MCLIC and/or the carrier with which MCLIC or its Affiliate has contracted to provide the EGWP Supplemental Policy at any time does not receive authority to issue such EGWP Supplemental Policy, or has such authority revoked, then this Agreement is subject to immediate termination by MCLIC upon written notice to Client.

(b) Utilization Management. Consistent with the terms of the EGWP Benefit, MCLIC will establish a reasonable and appropriate drug management program that includes incentives to reduce costs when medically

appropriate; maintains policies and systems to assist in preventing over-utilization and under-utilization of prescribed medications, according to guidelines specified by CMS and in accordance with the Medicare Drug Rules.

(c) Quality Assurance. Consistent with the terms of the EGWP Benefit, MCLIC will establish quality assurance measures and systems to reduce medication errors and adverse drug interactions and improve medication use in accordance with the Medicare Drug Rules.

(d) TrOOP. Consistent with the terms of the EGWP Benefit, MCLIC will establish and maintain a system to record EGWP Enrollees' TrOOP balances, and shall communicate TrOOP balances to EGWP Enrollees upon request.

(e) Coverage Determinations and Appeals. The parties acknowledge and agree that MCLIC is required under the Medicare Drug Rules to maintain oversight of coverage determinations under the EGWP Benefit, including prior authorizations and EGWP Enrollee Submitted Claims determinations, and to maintain an appeals process for EGWP Enrollees. Client acknowledges and agrees that ESI may perform such services through the UM Company. MCLIC or the UM Company, as applicable, will be responsible for conducting the appeal in a manner consistent with the requirements of the Medicare Drug Rules and shall ensure that the contract with the UM Company complies with the applicable delegation requirements of the Medicare Drug Rules, including without limitation 42 C.F.R. §423.505. ESI represents to Client that UM Company has contractually agreed that: (A) UM Company will conduct appeals in accordance with the the Medicare Drug Rules and the EGWP Benefit, (B) Client is a third party beneficiary of UM Company's agreement with MCLIC or its Affiliate (a copy of which is available upon request) and the remedies set forth therein, and (C) UM Company will indemnify Client for third party claims caused by the UM Company's negligence or willful misconduct in providing the appeal services.

(g) EOBs. MCLIC will furnish EGWP Enrollees, in a manner specified by CMS, a written explanation of benefits ("EOB") when prescription drug benefits are provided under qualified prescription drug coverage consistent with the requirements of the Medicare Drug Rules.

(h) EGWP Enrollee Services. MCLIC will provide 24-hours a day, 7-days a week toll-free telephone, IVR and Internet support to assist Client and EGWP Enrollees with EGWP Enrollee eligibility, benefits and TrOOP verification, location of Participating Pharmacies and other related EGWP Enrollee concerns.

Formulary and Medication Management

(a) P&T Committee and Medicare Formulary. MCLIC or its Affiliate will maintain a pharmacy and therapeutics committee ("P&T Committee") in accordance with the Medicare Drug Rules, which will develop a Medicare Formulary for the EGWP Benefit consistent with the requirements of the Medicare Drug Rules. In accordance with the Medicare Drug Rules, all Covered Drugs on the Medicare Formulary shall be Part D drugs (within the meaning of the Medicare Drug Rules) or otherwise permitted to be covered by a PDP under the Medicare Drug Rules. Client acknowledges and agrees that the Medicare Formulary may not be modified by removing Covered Drugs, adding additional utilization management restrictions, making the cost-sharing status of a drug less beneficial or otherwise modified in a manner not consistent with the Medicare Drug Rules.

(b) Medication Therapy Management. Consistent with the terms of the EGWP Benefit, MCLIC or its Affiliate may implement a Medication Therapy Management program that is designed to ensure that Covered Drugs prescribed to targeted EGWP Enrollees are appropriately used to optimize therapeutic outcomes through improved medication use and reduce the risk of adverse events, including adverse drug interactions, in accordance with the Medicare Drug Rules.

12 Medicare Rebate Program

(a) MCLIC or its Affiliate will negotiate with pharmaceutical manufacturers regarding the terms of the Medicare Rebate Program and will enter into agreements with such manufacturers for Rebates for certain Covered Drugs and Manufacturer Administrative Fees. MCLIC and its Affiliate retain all right, title and interest to any and all actual Rebates and Manufacturer Administrative Fees received from manufacturers. Client acknowledges and agrees that it shall not have a right to any Rebate and Manufacturer Administrative Fee payments received by MCLIC or its Affiliates.

(b) Client shall not negotiate or arrange with, or enter into an agreement with, a pharmaceutical manufacturer for rebates or similar discounts for any Covered Drugs dispensed to EGWP Enrollees for the term covered by this Agreement. A breach of the prior sentence shall be deemed to be a material breach of this Agreement.

(c) To the extent required under the Medicare Drug Rules, MCLIC shall disclose to Client the amount of all Rebates and Manufacturer Administrative Fees received from manufacturers or otherwise retained by MCLIC or its Affiliate with respect to the Rebate eligible EGWP Benefit utilization.

3.13 Mail Service Pharmacy. EGWP Enrollees may have prescriptions filled through the Mail Service Pharmacy. Subject to applicable law, MCLIC may communicate with EGWP Enrollees regarding benefit design, cost savings, availability and use of the Mail Service Pharmacy, as well as provide supporting services. MCLIC may suspend Mail Service Pharmacy services to an EGWP Enrollee who is in default of any Copayment amount due MCLIC.

3.14 Specialty Products

(a) Specialty Products and ASES. EGWP Enrollees may have prescriptions filled through ESI Specialty Pharmacy and Participating Pharmacies. Subject to applicable law, MCLIC and its affiliates may communicate with EGWP Enrollees and physicians to advise EGWP Enrollees filling Specialty Products at Participating Pharmacies of the availability of filling prescriptions through ESI Specialty Pharmacy.

(i) For Specialty Products filled through ESI Specialty Pharmacy only, EGWP Enrollees may receive the following services from ESI Specialty Pharmacy, depending on the particular therapy class or disease state: ASES; patient intake services; pharmacy dispensing services and/or social services (patient advocacy, hardship reimbursement support, and indigent and patient assistance programs).

(ii) Subject to Client's prior authorization requirements, if applicable, MCLIC or its affiliates will provide or coordinate ASES for EGWP Enrollees through ESI Specialty Pharmacy or through other specialty pharmacies or other independent third party providers of ASES when ASES is required. If MCLIC or its affiliates engages a third party provider of ASES, MCLIC or its affiliates shall contractually obligate such third party provider of ASES to comply with all applicable laws, including, without limitation, all applicable laws relating to professional licensure. Neither MCLIC nor its affiliates direct or exercise any control over any third party provider of ASES in administering Specialty Products or otherwise providing ASES.

(b) MCLIC shall notify Client no more frequently than monthly of new Specialty Products that are introduced to the market and added to the Specialty Product List on or after the Effective Date of this Agreement ("Notice").

3.15 Late Enrollment Penalty. Client agrees to and attests that it shall comply with the applicable CMS requirements of the LEP and shall comply with MCLIC's LEP policy, inducing participating with MCLIC in the following process:

(a) Client has an option to: (i) provide an initial global attestation to MCLIC to attest to a creditable coverage for all of its EGWP Enrollees; or (ii) periodically provide an attestation to MCLIC to attest to a creditable coverage for its EGWP Enrollees listed on the LEP report periodically provided to Client by MCLIC.

(b) If Client elects to periodically attest to MCLIC under Section 3.15(a)(ii) above, then:

(i) Client's response shall be delivered to MCLIC within five (5) business days from the receipt of LEP report from MCLIC;

(ii) Client shall provide MCLIC with the file listing all EGWP Enrollees for whom Client was unable to attest; and

(iii) MCLIC shall also mail an attestation to each EGWP Enrollee that has gap in coverage as defined by CMS.

(c) Client has provided MCLIC with the attestation form and a file listing of all the EGWP Enrollees included in the attestation.

(d) MCLIC will collect responses to the attestations from Client or EGWP Enrollees and submits EGWP Enrollees information to CMS for processing and determination of applicable LEP.

(e) CMS calculates the LEP amount and transmits the LEP amount to MCLIC on the daily TRR file, which is communicated to Client. MCLIC shall invoice Client for payment of the LEP, which shall be due and owing by the Client to MCLIC. Per the Medicare Drug Rules, Client may elect to either pay for the LEP on behalf of the EGWP Enrollee, or seek reimbursement of the LEP amount from the EGWP Enrollee. This election must be made prior to the beginning of the plan year and must be applied consistently by Client for all EGWP Enrollees throughout the plan year.

3.16 Direct and Indirect Remuneration. On an annual basis, consistent with Medicare Drug Rules, MCLIC will provide Client with reporting regarding direct and indirect remuneration (as defined by 42 CFR §432.308).

ARTICLE IV -PROGRAM OPERATIONS

4.1 Program Reporting. MCLIC or its Affiliate shall make available to Client MCLIC's or its Affiliate's standard management information reporting applications. At the request of Client, MCLIC or its Affiliate may develop special reporting packages at MCLIC's or its Affiliate's standard hourly rate for such services.

4.2 Regulatory Reporting. MCLIC shall comply with the reporting requirements set forth in 42 C.F.R. §423.514, including reporting significant business transactions with parties in interest to CMS, notifying CMS of any loans or other financial arrangements that it makes with contractors, subcontractors, and related entities, and making such information available to EGWP Enrollees upon reasonable request.

4.3 Claims Data Retention. MCLIC and Client will maintain, for a period of the then current plan year plus an additional ten (10) years, the applicable books, contracts, medical records, patient care documentation, and other records relating to covered services under this Amendment. MCLIC may use and disclose both during and after the term of this Agreement the anonymized claims data (de-identified in accordance with HIPAA) including drug and related medical data collected by MCLIC or provided to MCLIC by Client for research; provider profiling; benchmarking, drug trend, and cost and other internal analyses and comparisons; clinical, safety and/or trend programs; ASES; or other MCLIC business purposes, in all cases subject to applicable law.

4.4 Government Audits. MCLIC and Client agree to allow the United States Department of Health and Human Services ("DHHS") and the Comptroller General or their designees, the right to audit, evaluate, inspect books, contracts, medical records, patient care documentation and other records relating to covered services under this Agreement, as are reasonably necessary to verify the nature and extent of the costs of the services provided to EGWP Enrollees under this Agreement, for a period of the then current plan year, plus an additional ten (10) years following termination or expiration of the Amendment for any reason, or until completion of any audit, whichever is later.

4.5 State Auditor Audit. To the extent required by applicable law, the North Dakota State Auditor or State Auditor's designee or Client or Client's designee may audit MCLIC. Any such designee shall not have a conflict of interest.

4.6 Liability Insurance. Each party shall maintain such policies of general liability, professional liability and other insurance of the types and in amounts customarily carried by their respective businesses. Proof of such insurance shall be available upon request. MCLIC agrees, at its sole expense, to maintain during the term of this Agreement or any renewal hereof, commercial general liability insurance, pharmacists professional liability insurance for the MCLIC Mail Service and ESI Specialty Pharmacies, and managed care liability with limits, excess of a self insured retention, in amounts of not less than $5,000,000 per occurrence, and in the aggregate. MCLIC or its Affiliate does not maintain liability insurance on behalf of any Participating Pharmacy, but does contractually require such pharmacies to maintain a minimum amount of commercial liability insurance or, when deemed acceptable by MCLIC or its Affiliate, to have in place a self-insurance program.

ARTICLE V – MONTHLY PREMIUMS; FEES; BILLING AND PAYMENT

5.1 Monthly Premiums

(a) Determination of Monthly Premium Amounts. Prior to the Effective Date and each EGWP Benefit enrollment period thereafter, MCLIC shall determine the amount of the monthly premium to be charged for each EGWP Enrollee for participation in the EGWP Benefit, which shall be determined based on the CMS Medicare Drug Rules and guidance for standard prescription drug coverage along with enhancements under the EGWP Benefit as compared to the standard prescription drug coverage as permitted.

(b) Collection of Monthly Premium Amounts. In accordance with the Medicare Drug Rules, MCLIC hereby delegates the premium collection function to Client and hereby directs Client, on behalf of MCLIC, to collect all monthly premium payments due from EGWP Enrollees for participation in the EGWP Benefit. In connection with MCLIC's delegation of the premium collection function to Client under this Section 5.1(b), Client hereby agrees as follows:

(i) That in no event, including, but not limited to, MCLIC's insolvency, or MCLIC's breach of this Agreement, will Client bill, charge, collect a deposit from, seek compensation, remuneration or reimbursement from, or have any recourse against an EGWP Enrollee or persons acting on his or her behalf for payments that are the financial responsibility of MCLIC under this Agreement. The foregoing is not intended to prohibit Client from collecting premium amounts due by EGWP Enrollees for participation in the EGWP Benefit;

(ii) That DHHS, the Comptroller General, or their designees shall have the right to inspect, evaluate, and audit pertinent contracts, books, documents, papers and records of the Client involving Client's collection of premium amounts from EGWP Enrollees, and that DHHS', the Comptroller General's, or their designees' right to inspect, evaluate, and audit any such pertinent information will exist through ten (10) years from the date of termination or expiration of this Agreement, or from the date of completion of any audit, whichever is later;

(iii) That if MCLIC or CMS determines that Client is not performing the premium collection function in compliance with all applicable Medicare Drug Rules and Client is unable to cure such noncompliance within thirty (30) days following notice from MCLIC or CMS, then MCLIC may, at its sole discretion, either: (i) upon prior written notice to Client, revoke all or a portion of such delegated function as MCLIC deems necessary to effectuate MCLIC's ultimate responsibility to CMS for the performance of such delegated function under MCLIC's contract with CMS; or (ii) negotiate an alternative remedy in lieu of revocation of delegation, so long as such remedy conforms to the requirements of the Medicare Drug Rules. Nothing in this Section 5.1(b)(3), including, but not limited to, the thirty (30) day cure period, shall be construed in any way to limit MCLIC's right to suspend performance under Section 8.2 for non-payment; and

(iv) That Client shall not further delegate or subcontract the performance of the premium collection function to a third party without MCLIC's prior written consent, which consent will not be unreasonably withheld. If Client does further delegate or subcontract the performance of the premium collection function to a third party, then Client agrees that it shall: (i) amend its written agreement with such subcontractor or enter into a separate written agreement with such subcontractor that contains the terms, conditions, and provisions set forth in Schedule 5.1(a)(iv) attached hereto and incorporated herein by reference; and (ii) ensure that such subcontractor's performance of the premium collection function complies with the provisions set forth on Schedule 5.1(a)(iv).

(c) Determination of Monthly Premium Amounts (if any) to be Subsidized by Client. In determining the amount of the EGWP Enrollee's monthly premium for participation in the EGWP Benefit that Client will subsidize, Client shall make such determination subject to the following restrictions and any other restrictions that may be imposed by CMS:

(i) Client may subsidize different amounts for different classes of EGWP Enrollees provided such classes are reasonable and based on objective business criteria, such as years of service, business location, job category, and nature of compensation (e.g., salaried vs. hourly). Different classes cannot be

based on eligibility for the Low Income Subsidy. Notwithstanding the forgoing, the parties agree that Retiree Health Insurance Credit benefits received by Part D Eligible Retirees does not violate or implicate this section;

(ii) Client may not vary the premium subsidy for individuals within a given class of EGWP Enrollees;

(iii) Client may not charge an EGWP Enrollee more than the sum of his or her monthly beneficiary premium attributable to basic prescription drug coverage and 100% of the monthly beneficiary premium attributable to his or her supplemental prescription drug coverage, if any, and by signing this agreement, Client agrees to and attests that it shall abide by such provisions in accordance with the requirements set forth in 42 CFR 423.504 and 423.505;

(iv) Client shall directly refund to the EGWP Enrollee (or shall allow MCLIC to do so), within forty-five (45) days of original receipt from CMS of the Low Income Subsidy premium, the full premium subsidy amount up to the monthly beneficiary premium amount previously collected from the EGWP Enrollee; provided, however, that to the extent there are Low Income Subsidy premium amounts remaining after Client refunds the full monthly beneficiary premium amount to the EGWP Enrollee, then Client may apply that remaining portion of the Low Income Subsidy premium to the portion of the monthly premium paid by Client;

(v) If Client is not able to reduce the up-front monthly beneficiary premium as described in subsection (iv) above, Client shall directly refund to the EGWP Enrollee (or shall allow MCLIC to do so), within forty-five (45) days of original receipt from CMS of the Low Income Subsidy premium, the full premium subsidy amount up to the monthly beneficiary premium amount previously collected from the EGWP Enrollee;

(vi) If the Low Income Subsidy amount for which an EGWP Enrollee is eligible is less than the portion of the monthly beneficiary premium paid by the EGWP Enrollee, then Client must communicate to the EGWP Enrollee the financial consequences for the beneficiary of enrolling in the EGWP Benefit as compared to enrolling in another Medicare Part D plan with a monthly beneficiary premium equal to or below the Low Income Subsidy amount (MCLIC shall provide reasonable guidance to Client regarding the requirements of the performance necessary for Client to meet its obligation under this section); and

(vii) In the event of a change in an EGWP Enrollee's Low Income Subsidy status or an EGWP Enrollee otherwise becomes ineligible to receive the Low Income Subsidy after payment of the Low Income Subsidy premium amount to the EGWP Enrollee, and upon MCLIC's receipt of notification from CMS that such Low Income Subsidy premium amount will be recovered from MCLIC or withheld from future payments to MCLIC, then MCLIC in its sole discretion will invoice Client or set off from amounts otherwise owed from MCLIC to Client, and in either case Client shall reimburse MCLIC for, all amounts deemed by CMS to be ineligible Low Income Subsidy premium payments with respect to the EGWP Enrollee.

(d) Reporting and Auditing of Premium Amounts; Non-Payment by EGWP Enrollees. In the event of a CMS audit, Client shall provide a report to MCLIC, in a form and manner as agreed to by the parties, that includes all information concerning monthly premium amounts due by EGWP Enrollees for participation in the EGWP Benefit, including, without limitation, the monthly premium amount charged to each class of EGWP Enrollees, the amount that is being subsidized by the Client, and all premium amounts collected from EGWP Enrollees. Client represents and warrants that all information that it provides to MCLIC pursuant to this Section 5.1(d) shall be accurate and complete. Client further represents and warrants that it shall collect only those monthly premium amounts that are due from EGWP Enrollees, consistent with the information provided to MCLIC pursuant to this Section 5.1(d). Upon reasonable advance written notice, MCLIC or its Affiliate shall have access to Client's records in order to audit the monthly premium amounts collected from EGWP Enrollees for the purposes of fulfilling reporting requirements under the Medicare Drug Rules or applicable state insurance laws related to collection of such premium amounts or to otherwise assess compliance with the Medicare Drug Rules in connection with the collection of such premium amounts. Any audits performed by MCLIC or its Affiliate pursuant to this Section 5.1(d) will be at MCLIC's expense. Client acknowledges and agrees that neither MCLIC nor its Affiliate shall be responsible to Client for non-payment by any EGWP Enrollee of any monthly premium amount due by such EGWP Enrollee for participation in the EGWP Benefit. Client further acknowledges and agrees that in the event that either

Client or MCLIC (through any audit) determines that Client has collected a greater premium amount from an EGWP Enrollee than is due, that Client shall promptly refund any such overpayment to the EGWP Enrollee.

5.2 Once a month, on or about the fifteenth (15th) of the month beginning on the Effective Date, Client shall be invoiced for an amount equal to the product of: (i) the then-current number of EGWP Enrollees; multiplied by (ii) a "per member per month" fee (i.e., member premium amount) determined by MCLIC on an annual basis, as may be adjusted by MCLIC pursuant to the terms of this Agreement. The monthly fee shall be referred to in this Agreement as the "PMPM Fees." During the Initial Term (as defined in Section 8.1 below) of this Agreement, the "per member per month" fee used to calculate the PMPM Fees shall be Eighty Two and 00/100 Dollars ($82.00). Thereafter, MCLIC shall provide written notice to Client of any annual adjustment to the "per member per month" fee by the August 15th immediately prior to the commencement of any one (1) year renewal term hereunder. Any Administrative Service Fees incurred by Client during the previous month shall be invoiced to Client on or about the twentieth (20th) day of the month beginning on the Effective Date. "Administrative Service Fees" means the fees incurred by Client, if any, for MCLIC's or its Affiliate's performance of any agreed to administrative services.

5.3 CMS Reimbursement. MCLIC and its Affiliate retain all right, title and interest to any and all reimbursement received from CMS with respect to the EGWP Benefit and EGWP Enrollees, including the following: (1) advance direct subsidy monthly payments with respect to EGWP Enrollees, (2) reinsurance subsidy payments with respect to the EGWP Benefit, (3) low-income subsidy payments with respect to EGWP Enrollees, and (4) any other reimbursement payment by CMS to MCLIC for coverage provided to EGWP Enrollees under the EGWP Benefit for such period (each as further defined in the Medicare Drug Rules) (collectively, "CMS Reimbursement"). Client acknowledges and agrees that neither it nor its EGWP Enrollees shall have a right to any CMS Reimbursement payments received by MCLIC or its Affiliates during the collection period or moneys payable under this Section. Notwithstanding the foregoing, to the extent that MCLIC receives any low-income subsidy payments from CMS with respect to any EGWP Enrollee that qualifies for such payments, MCLIC will remit amounts equal to such payments to Client. In such case, Client shall apply such amounts received from MCLIC pursuant to Section 5.1(c)(iv) through (vi) above.

5.4 Payment. Client shall pay all Fees to MCLIC by wire or ACH transfer, debit or other electronic method within two (2) days from the date of Client's receipt of the MCLIC invoice.

5.5 Deposit. If, at any time: (i) Client has one (1) or more outstanding past due invoices; or (ii) MCLIC has reasonable grounds to believe that Client may become delinquent in payment of PMPM Fees to MCLIC based on Client's published financial data (examples include, but are not limited to, persistent negative cash flow, bankruptcy, and insolvency), then MCLIC may require that Client provide to MCLIC a deposit in an amount equal to one (1) month's billing, using the average of the last three (3) months of billing history as the basis for determining the one (1) month deposit amount or, if three (3) months billing history is not available, the most recent month of billing history as the basis. MCLIC shall retain the deposit until the earlier of: (i) termination of this Agreement (following any run-off period); or (ii) six (6) consecutive months of timely payments of all PMPM Fees following submission of the deposit, and may apply the deposit to delinquent PMPM Fees until return of the deposit.

5.6 Manufacturer Coverage Gap Discount. Pursuant to its CMS contract, MCLIC has agreed to administer for EGWP Enrollees at point-of-sale the Coverage Gap Discount authorized by section 1860D-14A of the Social Security Act. In connection with the Coverage Gap Discount, CMS will coordinate the collection of discount payments from manufacturers, and payment to MCLIC, through a CMS contractor (the "Coverage Gap Discount Payments"). MCLIC and its Affiliate retain all right, title and interest to any and all actual Coverage Gap Discount Payments received from CMS. Client acknowledges and agrees that neither it nor its EGWP Enrollees shall have a right to interest on, or the time value of, any Coverage Gap Discount Payments received by MCLIC or its Affiliates under this Section.

ARTICLE VI - CONFIDENTIALITY

6.1 Access to Records and Confidential Information. Each party agrees that participation by EGWP Enrollees in programs administered by Client is confidential under North Dakota law. Each party agrees that confidential information of the other party, must be exchanged as necessary for MCLIC to provide the services described within this Agreement. MCLIC shall not use or disclose any information it receives from Client under this Agreement that Client has previously identified as confidential or exempt from mandatory public disclosure except as necessary to carry out the purposes of this Agreement or as authorized in advance by Client. Client shall not disclose any

information it receives from MCLIC that MCLIC has previously identified as confidential and that Client determines in its sole discretion is protected from mandatory public disclosure under a specific exception to the North Dakota public records law, N.D.C.C. ch. 44-04. The parties acknowledge that the following information may constitute confidential or exempt information of the other party under N.D.C.C. § 44-04-18.4, 44-04-18.5, 54-52.1-11, and 54-52.1-12, subject to final determination by Client: (a) with respect to MCLIC and its Affiliate: reporting and system applications, (web-based and other media), and system formats, databanks, clinical and formulary management operations and programs, fraud, waste and abuse tools and programs, manuals, and anonymized claims data (de-identified in accordance with HIPAA), ESI Specialty Pharmacy and Mail Service Pharmacy data, information concerning Rebates, prescription drug evaluation criteria, drug choice management, drug pricing information, and Participating Pharmacy agreements; and (b) with respect to Client: Participating Pharmacy Client and EGWP Enrollee identifiable health information and data, and Client information files. Neither party shall use the other's confidential or exempt information or disclose it to any third party, at any time during or after termination of this Agreement, except as specifically contemplated by this Agreement, upon prior written consent or as required by the Medicare Drug Rules or other applicable law. Upon termination of this Agreement, each party shall cease using the other's confidential or exempt information, and all such information shall be returned or destroyed upon the owner's direction, unless retention is otherwise required under applicable law. The duty of both parties to maintain the confidentiality of information under this section continues beyond the term of this Agreement. This section applies to confidential information that may be in the possession of subcontractors or agents of MCLIC.

6.2 Non-Access to MCLIC's or its Affiliate's Systems. Client will not, and will not permit any third party acting on Client's behalf to, access, attempt to access, test or audit MCLIC's or its Affiliate's systems or any other system or network connected to MCLIC's or its Affiliate's systems. Without limiting the foregoing, Client will not: (i) access or attempt to access any portion or feature of MCLIC's or its Affiliate's systems, by circumventing such systems' access control measures, either by hacking, password "mining" or any other means; or (ii) probe, scan, audit or test the vulnerability of such systems, nor breach the security or authentication measures of such systems.

ARTICLE VII - COMPLIANCE WITH LAW AND FINANCIAL DISCLOSURE

7.1 Compliance with Law; Change in Law. MCLIC and Client hereby agree to perform their respective obligations under this Agreement in a manner that is consistent with and complies with the Medicare Drug Rules and with MCLIC's contractual obligations under its contract with CMS. In addition, each party shall be responsible for ensuring its compliance with all federal, state, and local laws and regulations applicable to its business, including maintaining any necessary licenses and permits. If the scope of MCLIC's duties under this Agreement is made materially more burdensome or expensive due to a change in federal, state or local laws or regulations or the interpretation thereof, including actions by CMS, the parties shall negotiate an appropriate modification of the services and/or an adjustment to the PMPM Fees paid to MCLIC. If the parties cannot agree on a modification or adjusted PMPM Fees, then either party may terminate this Agreement upon no less than thirty (30) days prior written notice to the other party. Further, Client by written notice to MCLIC, may terminate this Agreement at any time under the following conditions: 1) If funding from federal, state, or other sources is not obtained and continued at levels sufficient to allow for purchase of the services of supplies in the indicated quantities or term; 2) if federal or state laws or rules are modified or interpreted in a way that the services are no longer eligible or appropriate for purchase under this Agreement or are no longer eligible for the funding proposed for payments authorized by this Agreement; and 3) if any license, permit, or certificate required by law or rule, or by the terms of this Agreement, is for any reason denied, revoked, suspended, or not renewed and, as a result, would have a material impact on MCLIC's ability to perform services under this Agreement. Termination of this Agreement under this section is without prejudice to any obligations or liabilities of either party already accrued prior to termination.

7.2 Disclosure of Certain Financial Matters. Client acknowledges and agrees that MCLIC will contract with its Affiliate, ESI, to provide the pharmacy benefit management services contemplated by this Agreement on MCLIC's behalf. In addition to the administrative fees paid to MCLIC by Client, MCLIC and ESI's wholly-owned subsidiaries or Affiliates derive revenue in one or more of the ways as further described in the ESI Financial Disclosure to PBM Clients set forth in Exhibit D hereto ("Financial Disclosure"), as updated by ESI from time to time. Unlike the administrative fees, the revenues described in the Financial Disclosure are not direct or indirect compensation to MCLIC from Client for services rendered to Client or the Client Group Health Plan under this Agreement. In negotiating any of the fees and revenues described in the Financial Disclosure, ESI and ESI's wholly-owned subsidiaries and Affiliates act on their own behalf, and not for the benefit of or as agents for Client, EGWP Enrollees or the EGWP Benefit. Except for the Rebate amounts set forth in Exhibit B, if any, Client acknowledges and agrees that MCLIC and MCLIC's wholly-owned subsidiaries and Affiliates retain all interest, revenues, any or

all Rebates and Manufacturer Administrative Fees not payable to Client, and all Participating Pharmacy discounts, if any, in addition to any administrative and other fees paid by Client. Client acknowledges for itself and its EGWP Enrollees that, except as may be expressly provided herein, neither it nor any EGWP Enrollee has a right to receive, or possesses any beneficial interest in, any such discounts or payments.

ARTICLE VIII - TERM AND TERMINATION; DEFAULT AND REMEDIES

8.1 Term. The initial term of this Agreement (the "Initial Term") shall commence on the Execution Date, and coverage of EGWP Enrollees under the EGWP Benefit shall begin as of January 1, 2016 (the "Effective Date"). Unless earlier terminated as provided herein, the Initial Term shall continue until December 31, 2016. Thereafter, Client may renew this Agreement upon satisfactory completion of the Initial Term for successive one (1) year renewal terms with the same terms and conditions as set forth herein. MCLIC may decline to renew the Agreement for successive one (1) year terms by providing Client notice of its intent not to renew the Agreement in writing at least ninety (90) days prior to the expiration of the then current term.

MCLIC shall provide written notice to Client of any annual adjustment to the "per member per month" fee by the August fifteenth (15th) prior to the commencement of any one (1) year renewal term hereunder. Client shall provide notice of intent to renew this Agreement to MCLIC at least sixty (60) days prior to the expiration of the then current term, so long as Client does not have an annual open enrollment. Should Client change to an annual open enrollment, Client shall provide notice of intent to renew this Agreement to MCLIC at least ninety (90) days prior to the expiration of the then current term. Both parties acknowledge that nothing in this Agreement prevents Client from engaging in a competitive selection process and to accept a bid from another vendor through a competitive selection process for a subsequent contract term for the services provided hereunder. This Agreement may be terminated earlier during the Initial Term or any renewal terms pursuant to Section 8.2 below.

8.2 Termination.

(a) Breach or Default. Either party may give the other written notice of a material, substantial and continuing breach of this Agreement. If the breaching party has not cured said breach within thirty (30) days from the date such notice was sent, this Agreement may be terminated at the option of the non-breaching party. If the amount of time commercially reasonable for the breach to be cured is longer than thirty (30) days, this Agreement may not be terminated by the non-breaching party pursuant to this provision until such commercially reasonable period of time has elapsed; provided, however, that in no event shall such period exceed sixty (60) days.

(b) Termination of MCLIC's Contract with CMS. If at any time throughout the term of this Agreement, CMS either does not renew its contract with MCLIC or terminates its contract with MCLIC such that MCLIC may no longer provide services as a PDP Sponsor under the Medicare Drug Rules, then this Agreement shall be automatically terminated conterminously with such CMS contract termination. MCLIC will provide Client one hundred and twenty (120) days' notice before MCLIC non-renews the CMS contract and thereby terminates this Agreement. MCLIC will provide Client as much notice as reasonably practical in the event of CMS's termination or non-renewal of the CMS contract. The notice will include the termination date for this Agreement.

(c) Non-Payment. To the extent permitted by the Medicare Drug Rules and other applicable laws, MCLIC and its Affiliate may terminate or suspend their performance hereunder and cease providing or authorizing provision of Covered Drugs to EGWP Enrollees upon forty-eight (48) hours written notice if Client fails to pay MCLIC or provide a deposit, if required, in accordance with the terms of this Agreement. MCLIC also may offset amounts overdue to MCLIC with amounts owed, if any, by MCLIC to Client. To the extent permitted by law, MCLIC may suspend Mail Service Pharmacy and/or ESI Specialty Pharmacy services to any EGWP Enrollee who is in default of payment of any Copayments or deductibles to the applicable Pharmacy.

(d) Insolvency; Regulatory Action. To the extent permitted by applicable law, MCLIC may terminate this Agreement, or suspend performance hereunder, upon the insolvency of Client, and Client may terminate this Agreement upon the insolvency of MCLIC. The "insolvency" of a party shall mean the filing of a petition commencing a voluntary or involuntary case (if such case is an involuntary case, then only if such case is not dismissed within sixty (60) days from the filing thereof) against such party under the United States Bankruptcy Code or applicable state law; a general assignment by such party for the benefit of creditors; the inability of such party to pay its debts as they become due; such party's seeking or consenting to, or acquiescence in, the

appointment of any trustee, receiver or liquidation of it, or any material part of its property; or a proceeding under any state or federal agency declaration or imposition of receivership, composition, readjustment, liquidation, insolvency, dissolution, or like law or statute, which case or proceeding is not dismissed or vacated within sixty (60) days. Notwithstanding the preceding, in the event of Client's insolvency or other cessation of operations, MCLIC agrees to require Participating Pharmacies to continue to provide prescription drug services to EGWP Enrollees if required by the Medicare Drug Rules and all other applicable federal and state laws relating to insolvency or other cessation of operations or termination. Nothing herein shall be interpreted to require MCLIC or Pharmacies to provide services without being paid for Covered Drugs or Prescription Drug Services.

8.3 Remedies.

(a) Remedies Not Exclusive. A party's right to terminate this Agreement under Article VIII shall not be exclusive of any other remedies available to the terminating party under this Agreement or otherwise, at law or in equity.

(b) Force Majeure. Neither party shall be held responsible for delay or default caused by fire, riot, terrorism, extreme weather conditions, government acts or regulations, acts of God or war if the event is beyond the party's reasonable control and the affected party gives notice to the other party immediately upon occurrence of the event causing the delay or default or that is reasonably expected to cause a delay or default.

(c) Limitation of Liability. Client and MCLIC each agrees to assume its own liability for any and all claims of any nature including all, costs, expenses and attorneys' fees which may in any manner result from or arise out of this agreement.

8.4 Obligations Upon Termination. Client or its agent shall pay MCLIC in accordance with this Agreement for all PMPM Fees due hereunder on or before the later of: (i) the effective date of termination, or (ii) the final date that all EGWP Enrollees have been transitioned to a new Part D plan, as applicable (the "Termination Date"). The parties shall cooperate regarding the transition of Client and its EGWP Enrollees to a successor PDP Sponsor in accordance with all applicable Medicare Drug Rules and MCLIC will take all reasonable steps to mitigate any disruption in service to EGWP Enrollees. Specifically MCLIC agrees to provide to a successor PDP Sponsor mutually agreed upon files and information to assist Client with member transition. Notwithstanding the preceding, MCLIC may (a) delay payment of any amounts due Client, if any, to allow for any final adjustments to EGWP Enrollee enrollment information, or (b) request that Client pay a reasonable deposit in the event MCLIC is requested to process after the Termination Date claims incurred on or prior to such date.

8.5 Survival. The parties' rights and obligations under Section 3.8(b) and 3.10(e); Articles V and VI; and Sections 7.1, 8.3, 8.4, and 8.5 shall survive the termination of this Agreement for any reason.

ARTICLE IX - MISCELLANEOUS

9.1 Notice. Any notice or document required or permitted to be delivered pursuant to this Agreement must be in writing and shall be deemed to be effective upon mailing and must be either (a) deposited in the United States Mail, postage prepaid, certified or registered mail, return receipt requested, or (b) sent by recognized overnight delivery service, in either case properly addressed to the other party at the address set forth below, or at such other address as such party shall specify from time to time by written notice delivered in accordance herewith:

Medco Containment Life Insurance Company
Attn: President
One Express Way
St. Louis, Missouri 63121
with copy to: General Counsel
Fax: 800-417-8163

North Dakota Public Employees Retirement System
Attn: Sparb Collins
400 East Broadway, Suite 505
Bismarck, North Dakota 58502

9.2 Independent Parties. No provision of this Agreement is intended to create or shall be construed to create any relationship between MCLIC or its Affiliate and Client other than that of independent entities contracting with each other solely for the purpose of effecting the provisions of this Agreement. Neither party, nor any of their respective representatives, shall be construed to be the partner, agent, fiduciary, employee, or representative of the other and neither party shall have the right to make any representations concerning the duties, obligations or services of the other except as consistent with the express terms of this Agreement or as otherwise authorized in writing by the party about which such representation is asserted.

9.3 Assignment and Subcontracting. Client acknowledges and agrees that MCLIC may perform certain services hereunder (e.g., mail service pharmacy and specialty pharmacy services) through one or more MCLIC subsidiaries or Affiliates. MCLIC is responsible and liable for the performance of its subsidiaries and Affiliates in the course of their performance of any such service. To the extent that MCLIC subcontracts any PBM Service under this Agreement to a third party, MCLIC is responsible and liable for the performance of any such third party. In addition, MCLIC may contract with third parties to provide information technology support services and other ancillary services, which services are not PBM Services hereunder, but rather are services that support MCLIC's conduct of its business operations. This Agreement will be binding upon, and inure to the benefit of and be enforceable by, the respective successors and permitted assigns of the parties hereto.

9.4 Integration. This Agreement and all Exhibits hereto constitute the entire understanding of the parties hereto and supersede any prior oral or written communication between the parties with respect to MCLIC's plan offering to EGWP Enrollees as a PDP Sponsor of the EGWP Benefit under the Medicare Drug Rules. The parties hereby expressly agree that this Agreement and the Commercial Agreement are separate and independent agreements that stand on their own and that, unless otherwise specifically set forth in this Agreement, no term or condition in one such agreement shall have any connection to or bear any force or effect on the other agreement.

9.5 Amendments. No modification, alteration, or waiver of any term, covenant, or condition of this Agreement shall be valid unless in writing and signed by both parties or the agents of the parties who are authorized in writing.

9.6 Choice of Law. Unless governed by the Medicare Drug Rules or applicable state insurance laws, this Agreement shall be construed and governed in all respects according to the laws in the State ofNorth Dakota, without regard to the rules of conflict of laws thereof.

9.7 Waiver. The failure of either party to insist upon the strict observation or performance of this Agreement or to exercise any right or remedy shall not be construed as a waiver of any subsequent breach of this Agreement or impair or waive any available right or remedy.

9.8 Taxes and Assessments. Any applicable sales, use, excise, or other similarly assessed and administered tax, surcharge, or fee imposed on items dispensed, or services provided hereunder or the EGWP Supplemental Policy, or the fees or revenues generated by the items dispensed or services provided hereunder or the EGWP Supplemental Policy, or any other amounts MCLIC or one or more of its subsidiaries or affiliates may incur or be required to pay arising from or relating to MCLIC's or its subsidiaries' or affiliates' performance of services as a pharmacy benefit manager, third-party administrator, or otherwise in any jurisdiction, will be the sole responsibility of Client or the EGWP Enrollee. If MCLIC is legally obligated to collect and remit, or to incur or pay, any such sales, use, excise, or other similarly assessed and administered tax, surcharge, or fee in a particular jurisdiction, such amount will be reflected on the applicable invoice or subsequently invoiced at such time as MCLIC becomes aware of such obligation or as such obligation becomes due. MCLIC reserves the right to charge a reasonable administrative fee for collection and remittance services provided on behalf of Client.

9.9 Severability. In the event that any provision of this Agreement is invalid or unenforceable, such invalid or unenforceable provision shall not invalidate or affect the other provisions of this Agreement which shall remain in effect and be construed as if such provision were not a part hereof; provided that if the invalidation or unenforceability of such provision shall, in the opinion of either party to the Agreement, have a material effect on such party's rights or obligations under this Agreement, then the Agreement may be terminated by such party upon thirty (30) days written notice by such party to the other party.

9.10 Third Party Beneficiary Exclusion. This Agreement is not a third party beneficiary contract, nor shall this Agreement create any rights on behalf of EGWP Enrollees as against MCLIC. Client and MCLIC reserve the right to amend, cancel or terminate this Agreement without notice to, or consent of, any EGWP Enrollee.

9.11 Trademarks. Each party acknowledges each other party's sole and exclusive ownership of its respective trade names, commercial symbols, trademarks, and service marks, whether presently existing or later established (collectively "Marks"). No party shall use the other party's Marks in advertising or promotional materials or otherwise without the owner's prior written consent.

9.12 Debarment. MCLIC or its Affiliate shall not knowingly employ, or subcontract with, an individual or an entity that employs or contracts with an individual, who is excluded from participation in Medicare under section 1128 or 1128A of the Act or from participation in a Federal health care program for the provision of health care, utilization review, medical social work, or administrative services.

9.13 Signatures. Any documents required to implement the terms of this Agreement shall be signed by a representative of each party with legal authority to bind the entity.

9.14 Federal Funds. The parties acknowledge that information provided in connection with this Agreement is used for purposes of obtaining federal funds and, as such, the parties are subject to certain laws that are applicable to individuals and entities receiving federal funds.

9.15 Nondiscrimination and Compliance with Laws. MCLIC agrees to comply with all laws, rules, and policies, including those relating to nondiscrimination, accessibility and civil rights. MCLIC agrees to timely file all required reports, make required payroll deductions, and timely pay all taxes and premiums owed, including sales and use taxes and unemployment compensation and workers' compensation premiums. MCLIC shall have and keep current at all times during the term of this Contract all licenses and permits required by law.

IN WITNESS WHEREOF, the undersigned have executed this Agreement as of the day and year below set

MEDCO CONTAINMENT LIFE INSURANCE COMPANY

Printed Name: President, Health Plan Division

12-30-2015

NORTH DAKOTA PUBLIC EMPLOYEES RETIREMENT SYSTEM

By: _____

Printed Name: Jon Strinden

Title: NDPERS Board Chair

Date: 12-30-2015

Federal ID Number: 45-028209

EXHIBIT A

EGWP BENEFIT DESCRIPTION
(Incorporated herein by reference)

Plan Design Option: Current NDPERS Plan Design

	Retail Pharmacy Network	Retail Maintenance Drug Program (MDP) Pharmacy	Express Scripts Home Delivery
Day Supply	Up to 31 day	Up to 90 day	Up to 90 day
Member Co-Pay	Generic: $5 copay plus 15% coinsurance Preferred Brand: $15 copay plus 25% coinsurance Non-Preferred Brand: $25 copay plus 50% coinsurance Specialty: $15 copay plus 25% coinsurance	Generic: $5 copay plus 15% coinsurance Preferred Brand: $15 copay plus 25% coinsurance Non-Preferred Brand: $25 copay plus 50% coinsurance Specialty: $15 copay plus 25% coinsurance	Generic: $5 copay plus 15% coinsurance Preferred Brand: $15 copay plus 25% coinsurance Non-Preferred Brand: $25 copay plus 50% coinsurance Specialty: $15 copay plus 25% coinsurance
Deductible	No Deductible		
Coverage Gap[1]	No Coverage Gap; Member Co-pays above apply.		
Catastrophic Coverage	Member cost share post TrOOP ($4,850) is the greater of 5% or $2.95 per generic or preferred multi-source drugs and the greater of 5% or $7.40 per all other brands		
Formulary	Medicare Premier Access		
Non Part D Drugs[2]	Mirror current coverage within CMS guidelines		
Part B Drugs[2]	Not Covered		
Generics Policy	Voluntary		
Utilization Management Program	All Approved Standard Part D		
Federal Poverty Limits	Standard Federal Poverty Limit (FPL) guidelines apply		

Please note that most specialty medications can only dispensed up to a 31 day supply to Medicare members

	Effective Date	Expiration Date
	January 1st, 2016	December 31st, 2016
EGWP Plan Premium (PMPM)	$69.26	
Enhanced Insurance Premium[3] (PMPM)	$12.74	
Total Premium[4] (PMPM)	**$82.00**	

[1] *Coverage Gap begins at the Initial Coverage Limit which is $3,310 for 2016.*

states *require coverage for certain Non Part D and Part B drugs. Express Scripts will comply with all state requirements on your behalf.*

[3] *This group Medicare Part D plan has additional benefits to enhance the Medicare Part D coverage. as required by the Centers for Medicare and Medicaid Services (CMS). Per CMS regulations. the benefit enhancements are in addition to other health benefits and require filing with and approval by the state department of insurance. Express Medicare will offer this product in conjunction with Companion/Niagara/Pan American.*

[4]*The illustrated premium is subject to change in the event of CMS guidance and rate changes. Income Related Monthly Adjustment Amounts apply for high income beneficiaries. See page 2 for details.*

Income Related Monthly Adjustment Amount (IRMAA)

Effective January 1, 2011, individuals whose modified gross income (MAGI) exceeds certain thresholds will be required to pay an extra amount, referred to as an income related monthly adjustment amount, for their Medicare Part D coverage. In 2010, these amounts were $85,000 for a beneficiary filing an individual income tax return or married and filing a separate return, and $170,000 for a beneficiary filing a joint tax return. In accordance with the Affordable Care Act, these income threshold amounts will remain at the 2010 levels for calendar years 2011-2019. The Social Security Administration, not MCLIC, will determine which members are required to pay a Part D-IRMAA and will send the beneficiary a letter telling him or her what that extra amount will be and what information was used to make the determination. In general, the Part D-IRMAA will be paid through premium withholding from monthly Social Security benefit payments. For more information about Part D premiums based on income, visit medicare.gov on the web or call 1-800-MEDICARE (1-800-633-4227). The Social Security Administration may also be contacted at 1-800-772-1213.

Included Additional Services

Claims Processing	
Electronic Claims Processing	No Additional Fee
Member Submitted Paper Claims Processing	No Additional Fee
Medicaid Subrogation Claims	No Additional Fee
Electronic Prescribing	No Additional Fee
Eligibility Administration	
Eligibility submission	No Additional Fee
Electronic/on-line submission (changes only)	No Additional Fee
Manual/hardcopy submission	No Additional Fee
Participating Pharmacies	
Pharmacy Audit	No Additional Fee
Pharmacy Help Desk	No Additional Fee
Pharmacy Network Management	No Additional Fee
Pharmacy Reimbursement	No Additional Fee
Network Development Upon Request	No Additional Fee
Mail Services	
My Rx Choices Medicare	No Additional Fee
Benefit Education (Includes Mail Promotion Program)	No Additional Fee
Prescription Delivery – standard	No Additional Fee
Standard PBM Reporting Services	
Ad-Hoc Desktop Parametric Reports	No Additional Fee
Billing Reports	No Additional Fee
Custom Ad-Hoc Reporting (up to 10 hours of programming time)	Included; additional programming may be billed at $150 per hour
Load 12 Months Claims History for Clinical Programs and Reporting	No Additional Fee
Medicare Reporting Services	
Preparation of All Data Necessary to meet Medicare Part D Reporting Requirements	No Additional Fee
Provide Data to CMS in Required Format	No Additional Fee
TrOOP Facilitation	
CMS Designated Third Party Manages TrOOP ensuring Secondary Payments	No Additional Fee
Web Site	
Digital Certificates – Up to 5 certificates	No Additional Fee
Express-Scripts.com for Clients – access to Contact Directory, Sales and Benefit and Enrollment Support Marketing Information, and Benefit and Enrollment Support	No Additional Fee
Express-Scripts.com for Members – access to benefit, drug, health and wellness information; prescription ordering capability; and customer service	No Additional Fee

Account and Member Service	
Call Center service for members	No Additional Fee
Fraud and Abuse Program – Pharmacy, Physician and Member Audit Program to Prevent Fraud, Waste and Abuse	No Additional Fee
Pharmacy Audit Only	No Additional Fee
Online member service application	No Additional Fee (up to 10 users)
Assigned account team, Training for online tools	No Additional Fee
Communication with physicians and/or members (Transition Letters, notifications, etc.)	No Additional Fee (Client Requested EOBs Extra)
Annual pharmacy benefit strategic planning with quarterly review	No Additional Fee
Postage (e.g., physician or member mailings)	No Additional Fee
CMS required Member Materials and New Enrollee Packets, which contain the following: 1 standard ID card and Enrollment Letter carrier, HIPAA Notice of Privacy, Abridged Formulary, Evidence of Coverage (Non-ERISA clients only), Quick Reference Guide and Checklist, and Home Delivery Form	No Additional Fee
Non-Standard Member Materials	Non Standard member materials priced upon request
Appeals and Grievances	
Appeals	No Additional Fee
Grievances	No Additional Fee
Prior Authorization services	
Prior Authorization Services-Administrative Manage plan benefits costs ensuring appropriate prescribing and use by members rnnn.r nmr:::u PA Lm;tlstolem overrides Vacation su ies	No Additional Fee
Prior Authorization Services-Clinical Prior Authorization, Step Therapy, Drug Quantity Level Limits Part B versus Part D coverage determinations Formulary exceptions Benefit level exceptio	No Additional Fee

Optional Service (if elected by Client)

Billing Services	Administrative Services Fee
Includes: • Invoicing of EGWP Enrollees • Sending delinquency • Disenrollment for non-payment of premium • Processing of premium refunds	$0.80 Per Enrollee Per

MCLIC offers clinical programs focused on Safety Management and Care Management. Safety Management Programs are designed to provide an additional source of pharmaceutical information (a "safety net") for the most important drug and member specific pharmaceutical care issues. Care Management Programs offer disease-based programs focused on improving the health and well being of the patient, optimization of medication therapy, and compliance with prescribed therapy.

Safety and Care Management		
Program Name	**Description**	**Fee**
Concurrent DUR	Drug Utilization Review is a series of checks to insure that the drug being dispensed is appropriate; edits include dose checks, checks for drug interactions, duplicate Rx, step therapy, etc.	No Additional Fee

Medication Therapy Management Program (MTM)	This CMS required clinical program is designed to improve the therapeutic outcomes associated with the use of medication for selected Medicare members.	No Additional Fee
Emerging Therapeutic Interventions Program	This CMS required notification is designed to alert members and healthcare professionals regarding significant safety-related drug recalls (FDA Removals) or market withdrawals (Manufacturer Removals) in a timely and efficient manner.	No Additional Fee
Fraud, Waste and Abuse Program	Express Scripts is strongly committed to the detection and prevention of Fraud, Waste and Abuse (FWA). This program includes the identification of potential problem pharmacies as well as prescribers and members with unusual or excessive utilization patterns. This program consists of two parts: the Network Pharmacy Audit Program and the Member and Physician Fraud Detection Program.	No Additional Fee
Appeals	Any of the procedures that deal with the review of adverse coverage determinations made by the Part D Plan Sponsor on the benefits a member believes he/she is entitled to receive, including the delay in providing or approving the drug coverage (when a delay would adversely affect the health of the member), or any amounts the member must pay for the drug coverage. These procedures include redeterminations by the Part D Plan Sponsor, reconsiderations by the independent review entity (IRE), ALJ hearings, MAC reviews, and judicial reviews. MCLIC contracts with an independent review agency to handle Re-determination appeals for the Express Scripts PDP. This vendor will perform redeterminations in compliance with CMS regulations for standard and expedited appeals.	No Additional Fee
Grievance	A 'grievance' is defined as a patient's expressed dissatisfaction with a specific event related to their Medicare Part D benefit that occurred within the last 60 calendar days or a complaint regarding the Part D sponsor's refusal to expedite a Coverage Determination or redetermination.	No Additional Fee

The following describes the CMS approved MCLIC Generics Policy

Generics Policy	
Voluntary	No matter who requests Brand name, Physician or Member, no ancillary charge applies.

The following describes the MCLIC Standard Utilization Management Programs. These programs apply if the Design Option sections states "Standard Part D".

Standard Utilization Management Programs		
Program	**Description**	Fee
Step Therapy	CMS approved program that manages drug costs within specific therapy classes by ensuring that patients try a front-line or step one drug (usually generics) before a higher cost back-up or step two brand-name drug is covered. Within specific therapy classes, multiple drugs are available to treat the same condition. Step Therapy points a new patient to a front-line or step one, lower cost, clinically effective drug in each therapy group. Evidence-based clinical protocols are used to select front-line or step one drug. Members who fill a step therapy medication within the first 90 days of enrollment will be allowed to remain on that medication. Medicare Part D Step Therapy Drugs List stated below.	No Additional Fee
Prior Authorization (PA)	CMS approved program that manages plan benefits by ensuring appropriate prescribing and member usage. For MCLIC Standard list of drugs, client agrees to all updates/revisions as approved by CMS. B vs D require Prior Authorization, if determined to be a Part B drug, then the copay will process at the Part B co-pay (if covered); if determined to be a Part D drug then the co-pay will process at the applicable Part D co-pay. Members will be allowed one transition fill for a retail supply (up to 31 day supply) within the first 90 days of enrollment.	No Additional Fee
Quantity Level Limit (QLL)	CMS approved program that manages prescription costs by ensuring that the quantity of units supplied for each copayment are consistent with clinical dosing guidelines. The program is designed to support safe, effective, and economic use of drugs while giving patients access to quality care. MCLIC clinicians maintain a list of quantity limit drugs, which is based upon manufacturer-recommended guidelines and medical literature. Online edits help make sure optimal quantities of medication are dispensed per copayment and per days' supply.	No Additional Fee

SCHEDULE 5.1(a)(iv)

If Client engages a subcontractor ("Subcontractor") to perform any of the functions that MCLIC has delegated to Client to perform under this Agreement, Client shall do so pursuant to a written agreement that includes the following terms, conditions, and provisions:

The agreement between Client and Subcontractor (the "Subcontract") must clearly identify the parties to the Subcontract.

The Subcontract must describe the functions that are being delegated to and performed by the Subcontractor.

The Subcontract must describe the manner in which Client will monitor the performance of the Subcontractor on an ongoing basis; specifically to monitor compliance with the Medicare Drug Rules.

The Subcontract must describe any reporting requirements that the Subcontractor has to Client.

The Subcontract must describe the payment t Subcontractor receive performance under the Subcontract.

The Subcontractor must agree that the United States Department of Health and Human Services ("DHHS"), the Comptroller General, or their designees have the right to inspect, evaluate, and audit any pertinent contracts, books, documents, papers and records (including medical records and documentation) of the Vendor involving transactions related to the Centers for Medicare and Medicaid Services' ("CMS") contract with MCLIC for a period of the then current plan year, plus an additional ten (10) years following the expiration or termination of the Subcontract or the date of any audit completion, whichever is later.

The Subcontractor must agree pursuant 42 CFR § 423.505(i)(3)(iv) to produce upon request by CMS, or its designees, any books, contracts, records, including medical records and documentation of the PDP Sponsor, relating to the Part D program, to either the PDP Sponsor to provide to CMS, or directly to CMS or its designees.

The Subcontractor must agree that in no event, including, but not limited to, nonpayment by Client, Client's insolvency, or breach of the Subcontract, will the Subcontractor bill, charge, collects a deposit from, seek compensation, remuneration or reimbursement from, or have any recourse against a beneficiary of Client or persons acting on his or her behalf for services provided by the Subcontractor pursuant to the Subcontract.

9. The Subcontract must: (i) specify that the Subcontractor will perform all services under the Subcontract in a manner that is consistent with and that complies with MCLIC's contractual obligations under its contract with CMS; (ii) specify that the Subcontractor agrees to comply with all applicable federal laws, regulations, and CMS instructions; and (iii) provide for revocation of the Subcontractor's delegated activities and reporting responsibilities or specify other remedies in instances when CMS, Client, or MCLIC determine that the Subcontractor has not performed satisfactorily.

The Subcontract must require the Subcontractor to agree to comply with state and federal privacy and security requirements, including the confidentiality and security provisions stated in 42 CFR §423.136.

The Subcontract must include an acknowledgment by the parties that information provided in connection with the Subcontract is used for purposes of obtaining federal funds.

If the Subcontract permits the Subcontractor to use a subcontractor to perform any of the services delegated to it under the Subcontract, the Subcontract must require that the Subcontractor include all of the above provisions in a written agreement with such subcontractor.

The Subcontract must be signed by a representative of the Subcontractor with legal authority to bind the Subcontractor.

The Subcontract must contain a representation by Client and the Subcontractor that they shall not knowingly employ, or subcontract with, an individual or an entity that employs or contracts with an individual, who is excluded from participation in Medicare under section 1128 or 1128A of the Act or from participation in a Federal health care program for the provision of health care, utilization review, medical social work, or administrative services.

4.

The Subcontract must contain language clearly indicating that the first tier, downstream, or related entity has agreed to participate in the PDP Sponsor's Medicare Prescription Drug Benefit program. This requirement is not applicable for a network pharmacy if the existing contract would allow participation in this program.

The Subcontract must be for a term of at least the one-year contract period for which the PDP Sponsor's Medicare Part D Application is submitted. However, where the Subcontract is for services or products to be used in preparation for the next contract year's Part D operations (marketing, enrollment), the initial term of such Subcontract must include this period of performance (e.g., contracts for enrollment-related services must have a term beginning no later than November 15 extending through the full contract year ending on December 31 of the next year).

Insofar as the Subcontractor establishes the pharmacy network or select pharmacies to be included in the network, the Subcontractor must agree: i) pursuant 42 CFR § 423.505(i)(5) that the PDP Sponsor retains the right to approve, suspend, or terminate any arrangement with a pharmacy; ii) pursuant 42 CFR §423.505(i)(3)(vi) and consistent with 42 CFR § 423.520 to issue, mail, or otherwise transmit payment of all clean claim to such pharmacies (excluding long-term care and mail order) submitted by or on behalf of pharmacies within 14 days for electronic claims and within 30 days for claims submitted otherwise; iii) pursuant 42 CFR § 423.505(i)(3)(viii)(B) and 42 CFR § 423.505(i)(3)(viii)(A) that if a prescription drug pricing standard is used for reimbursement, Subcontractor will identify the source used by the PDP Sponsor for the prescription drug pricing standard of reimbursement and agree to a contractual provision that updates to such a standard occur not less frequently than once every 7 (seven) days beginning with an initial update on January 1 of each year, to accurately reflect the market price of acquiring the drug.

EXHIBIT B

As provided in the Agreement, MCLIC may provide services under this Agreement through one or more of its Affiliates, including Express Scripts, Inc. ("ESI"). The following financial disclosure statement relates to the rebate programs and other financial arrangements that may be used by Express Scripts, Inc. ("ESI") in connection with MCLIC's administration of the EGWP Benefit under this Agreement.

FINANCIAL DISCLOSURE TO ESI PBM CLIENTS

This disclosure provides an overview of the principal revenue sources of Express Scripts, Inc. and Medco Health Solutions, Inc. (individually and collectively referred to herein as "ESI"), as well as ESI's affiliates. In addition to administrative and dispensing fees paid to ESI by our clients for pharmaceutical benefit management ("PBM") services, ESI and its affiliates derive revenue from other sources, including arrangements with pharmaceutical manufacturers, wholesale distributors, and retail pharmacies. Some of this revenue relates to utilization of prescription drugs by members of the clients receiving PBM services. ESI may pass through certain manufacturer payments to its clients or may retain those payments for itself, depending on the contract terms between ESI and the client.

Network Pharmacies – ESI contracts for its own account with retail pharmacies to dispense prescription drugs to client members. Rates paid by ESI to these pharmacies may differ among networks (e.g., Medicare, Worker's Comp, open and limited), and among pharmacies within a network, and by client arrangements. PBM agreements generally provide that a client pays ESI an ingredient cost, plus dispensing fee, for drug claims. If the rate paid by a client exceeds the rate contracted with a particular pharmacy, ESI will realize a positive margin on the applicable claim. The reverse also may be true, resulting in negative margin for ESI. ESI also enters into pass-through arrangements where the client pays ESI the actual ingredient cost and dispensing fee amount paid by ESI for the particular claim when the claim is adjudicated to the pharmacy. In addition, when ESI receives payment from a client before payment to a pharmacy, ESI retains the benefit of the use of the funds between these payments. ESI may maintain non-client specific aggregate guarantees with pharmacies and may realize positive margin. ESI may charge pharmacies standard transaction fees to access ESI's pharmacy claims systems and for other related administrative purposes.

Brand/Generic Classifications – Prescription drugs may be classified as either a "brand" or "generic;" however, the reference to a drug by its chemical name does not necessarily mean that the product is recognized as a generic for adjudication, pricing or copay purposes. For purposes of pharmacy reimbursement, ESI distinguishes brands and generics through a proprietary algorithm ("BGA") that uses certain published elements provided by First DataBank (FDB) including price indicators, Generic Indicator, Generic Manufacturer Indicator, Generic Name Drug Indicator, Innovator, Drug Class and ANDA. The BGA uses these data elements in a hierarchical process to categorize the products as brand or generic. The BGA also has processes to resolve discrepancies and prevent "flipping" between brand and generic status due to price fluctuations and marketplace availability changes. The elements listed above and sources are subject to change based on the availability of the specific fields. Updated summaries of the BGA are available upon request. Brand or generic classification for client reimbursement purposes is either based on the BGA or specific code indicators from Medi-Span or a combination of the two as reflected in the client's specific contract terms. Application of an alternative methodology based on specific client contract terms does not affect ESI's application of its BGA for ESI's other contracts.

Maximum Allowable Cost ("MAC")/Maximum Reimbursement Amount ("MRA") – As part of the administration of the PBM services, ESI maintains a MAC List of drug products identified as requiring pricing management due to the number of manufacturers, utilization and/or pricing volatility. The criteria for inclusion on the MAC List are based on whether the drug has readily available generic product(s), is generally equivalent to a brand drug, is cleared of any negative clinical implications, and has a cost basis that will allow for pricing below brand rates. ESI also maintains MRA price lists for drug products on the MAC List based on current price reference data provided by MediSpan or other nationally recognized pricing source, market pricing and availability information from generic manufacturers and on-line research of national wholesale drug company files, and client arrangements. Similar to the BGA, the elements listed above and sources are subject to change based on the availability of the specific fields. Updated summaries of the MAC methodology are available upon request.

Manufacturer Formulary Rebates, Associated Administrative Fees, and PBM Service Fees – ESI contracts for its own account to obtain formulary rebates attributable to the utilization of certain brand drugs and supplies (and possibly certain authorized generics marketed under a brand manufacturer's new drug application). Formulary rebate amounts received vary based on client specific utilization, the volume of utilization as well as formulary position applicable to the drug or supplies, and adherence to various formulary management controls, benefit design requirements, claims volume, and other similar factors, and in certain instances also may vary based on the product's market-share. ESI often pays an amount equal to all or a portion of the formulary rebates it receives to a client based

on the client's PBM agreement terms. ESI retains the financial benefit of the use of any funds held until payment of formulary rebate amounts is made to the client. ESI or its affiliates may maintain non-client specific aggregate guarantees and may realize positive margin. In addition, ESI provides administrative services to contracted manufacturers, which include, for example, maintenance and operation of systems and other infrastructure necessary for invoicing and processing rebates, pharmacy discount programs, access to drug utilization data, as allowed by law, for purposes of verifying and evaluating applicable payments, and for other purposes related to the manufacturer's products. ESI receives administrative fees from the participating manufacturers for these services. These administrative fees are calculated based on the price of the drug or supplies along with the volume of utilization and do not exceed the greater of (i) 4.58% of the average wholesale price, or (ii) 5.5% of the wholesale acquisition cost of the products. In its capacity as a PBM company, ESI also may receive other compensation from manufacturers for the performance of various services, including, for example, formulary compliance initiatives, clinical services, therapy management services, education services, medical benefit management services, and the sale of non-patient identifiable claim information. This compensation is not part of the formulary rebates or associated administrative fees.

Copies of ESI's standard formularies may be reviewed at www.express-scripts.com/wps/portal/. In addition to formulary considerations, other plan design elements are described in ESI's Plan Design Review Guide, which may be reviewed at www.express-scripts.com/wps/portal/.

ESI Subsidiary Pharmacies – ESI has several licensed pharmacy subsidiaries, including our specialty pharmacies. These entities may maintain product purchase discount arrangements and/or fee-for-service arrangements with pharmaceutical manufacturers and wholesale distributors. These subsidiary pharmacies contract for these arrangements on their own account in support of their various pharmacy operations. Many of these subsidiary arrangements relate to services provided outside of PBM arrangements, and may be entered into irrespective of whether the particular drug is on one of ESI's national formularies. Discounts and fee-for-service payments received by ESI's subsidiary pharmacies are not part of the PBM formulary rebates or associated administrative fees paid to ESI in connection with ESI's PBM formulary rebate programs. However, certain purchase discounts received by ESI's subsidiary pharmacies, whether directly or through ESI, may be considered for formulary purposes if the value of such purchase discounts is used by ESI to supplement the discount on the ingredient cost of the drug to the client based on the client's PBM agreement terms. From time to time, ESI and its affiliates also may pursue and maintain for its own account other supply chain sourcing relationships not described below as beneficial to maximize ESI's drug purchasing capabilities and efficiencies, and ESI or affiliates may realize an overall positive margin with regard to these initiatives.

The following provides additional information regarding examples of ESI subsidiary discount arrangements and fee-for-service arrangements with pharmaceutical manufacturers, and wholesale distributors:

ESI Subsidiary Pharmacy Discount Arrangements – ESI subsidiary pharmacies purchase prescription drug inventories, either from manufacturers or wholesalers, for dispensing to patients. Often, purchase discounts off the acquisition cost of these products are made available by manufacturers and wholesalers in the form of either up-front discounts or retrospective discounts. These purchase discounts, obtained through separate purchase contracts, are not formulary rebates paid in connection with our PBM formulary rebate programs. Drug purchase discounts are based on a pharmacy's inventory needs and, at times, the performance of related patient care services and other performance requirements. When a subsidiary pharmacy dispenses a product from its inventory, the purchase price paid for the dispensed product, including applicable dispensing fees, may be greater or less than that pharmacy's acquisition cost for the product net of purchase discounts. In general, our pharmacies realize an overall positive margin between the net acquisition cost and the amounts paid for the dispensed drugs.

ESI Subsidiary Fee-For-Service Arrangements – One or more of ESI's subsidiaries, including, but not limited to, its subsidiary pharmacies also may receive fee-for-service payments from manufacturers or wholesalers in conjunction with various programs or services, including, for example, patient assistance programs for indigent patients, dispensing prescription medications to patients enrolled in clinical trials, various therapy adherence and fertility programs, administering FDA compliance requirements related to the drug, product reimbursement support services, and various other clinical or pharmacy programs or services. As a condition to having access to certain products, and sometimes related to certain therapy adherence criteria or FDA requirements, a pharmaceutical manufacturer may require a pharmacy to report selected information to the manufacturer regarding the pharmacy's service levels and other dispensing-related data with respect to patients who receive that manufacturer's product. A portion of the discounts or other fee-for-service payments made available to our pharmacies may represent compensation for such reporting.

Other Manufacturer Arrangements – ESI also maintains other lines of business that may involve discount and service fee relationships with pharmaceutical manufacturers and wholesale distributors. Examples of these businesses include a wholesale distribution business, group purchasing organizations (and related group purchasing organization fees), a medical benefit management company, and United BioSource Corporation

("UBC"). Compensation derived through these business arrangements is not considered for PBM formulary placement, and is in addition to other amounts described herein. Of particular note, UBC partners with life sciences and pharmaceutical companies to develop, commercialize, and support safe, effective use and access to pharmaceutical products. UBC maintains a team of research scientists, biomedical experts, research operations professionals, technologists and clinicians who work with clients to conduct and support clinical trials, create, and validate and administer pre and post product safety and risk management programs. UBC also works on behalf of pharmaceutical manufacturers to provide product and disease state education programs, reimbursement assistance, and other support services to the public at large. These service fees are not part of the formulary rebates or associated administrative fees.

Third Party Data Sales – Consistent with any client contract limitations, ESI or its affiliates may sell HIPAA compliant information maintained in their capacity as a PBM, pharmacy, or otherwise to data aggregators, manufacturers, or other third parties on a fee-for-service basis or as a condition of discount eligibility. All such activities are conducted in compliance with applicable patient and pharmacy privacy laws and client contract restrictions.

December 1, 2014

THIS EXHIBIT REPRESENTS ESI'S FINANCIAL POLICIES. ESI MAY PERIODICALLY UPDATE THIS EXHIBIT AND THE FINANCIAL DISCLOSURES CONTAINED HEREIN TO REFLECT CHANGES IN ITS BUSINESS PROCESSES; THE CURRENT FINANCIAL DISCLOSURE IS AVAILABLE UPON REQUEST AND ACCESSIBLE ON EXPRESS-SCRIPTS.COM AT WWW. EXPRESS-SCRIPTS.COM/WPS/PORTAL/.

North Dakota Public Employees Retirement System

July 1, 2015 through June 30, 2017

29314991

ADMINISTRATIVE SERVICE AGREEMENT

This Administrative Service Agreement ("Agreement") is entered into between the State of North Dakota acting through its Public Employees Retirement System ("the Plan Sponsor"), the North Dakota Public Employees Retirement System (NDPERS) ("the Plan Administrator") and Sanford Health Plan, a South Dakota non-profit corporation ("SHP") SHP the terms of which are as follows:

WHEREAS, the Plan Sponsor has established and maintains a fully insured group health plan (the "Plan") which provides, among other things, various benefits to Members in the Plan, as set forth in the Certificate of Insurance provided to plan Members. The Plan Administrator is the administrator of the Plan established through this Agreement.

WHEREAS, in consideration of payment of required premium and acceptance of membership applications SHP enters into this Agreement with the Plan Sponsor and the Plan Administrator. SHP agrees to provide plan Members the benefits set forth in the Certificate of Insurance, in accordance with its terms and conditions. This Agreement also includes the Certificate of Insurance, membership applications, Identification Cards, Benefit Plan Attachments and any endorsements, supplements, attachments, addenda or amendments.

WHEREAS, NDPERS, as the Plan Administrator, is the sole party with authority to make plan design changes to the Plan.

WHEREAS, SHP is an affiliate of Sanford, a North Dakota non-profit organization and integrated delivery system; however, SHP and Sanford maintain a firewall such that (i) SHP maintains a team that negotiates participating provider agreements with hospitals, physicians and other providers, (ii) Sanford provider entities maintain a team that negotiates agreements with third party payors, and (iii) fee schedules, discounts, pricing and other competitively sensitive data are not shared between those teams.

1. EFFECTIVE DATE AND PLAN YEAR

This Agreement is effective July 1, 2015 through June 30, 2017, unless terminated as provided.

For the purposes of the costs of any and all benefits and services extended through this Benefit Plan, including the implementation of any benefit changes required under federal or state law, the Plan Administrator agrees that the Plan Year shall commence on July 1, unless it is terminated by one of the parties as specified in Section 8. TERM AND TERMINATION OF AGREEMENT.

2. DEFINITIONS

This section defines the terms used in this Agreement. These terms will be capitalized throughout this Agreement when referred to in the context defined.

A. **BENEFIT PAYMENTS** - payments of benefits under the Plan.

B. **CERTIFICATE OF CREDITABLE COVERAGE** - a certificate disclosing information relating to an individual's creditable coverage under a health care benefit program for purposes of reducing any preexisting condition waiting period imposed by any group health plan coverage.

C. **CLAIM** - notification in a form acceptable to SHP that service has been provided or furnished to a Member.

D. **DRG** - shall mean diagnostic related groups.

E. **DATA AGGREGATION** - the combining of Protected Health Information that SHP creates or receives for or from the Plan and for or from other health plans or health care providers for which SHP is acting as a business associate to permit data analyses that relate to the Health Care Operations of the Plan and those other health plans or providers.

F. **FEES AND CHARGES** - the amounts the Plan Administrator must pay SHP for the administrative services described in Section 6. FEES AND CHARGES.

G. **HEALTH CARE OPERATIONS** - any of the activities of a health plan to the extent the activities relate to functions that make it a health plan.

H. **HEALTH CARE PROVIDER** - any eligible provider that has provided care, diagnosis, or treatment to or for a Member for which benefits are sought under the Plan.

I. **HEALTH CLUB/WELLNESS CREDIT PROGRAM** – means a member-based health club credit program and wellness (points) rewards program substantially similar to that administered by the incumbent carrier.

J. **HSA PROGRAM** – means the Health Savings Account program administered by SHP through its subcontractor pursuant to the terms and conditions of a separate agreement between SHP and NDPERS and acknowledged by said subcontractor.

K. **INELIGIBLE PERSON** - any person, firm, or corporation that has received benefits or on whose behalf benefits have been paid but for whom benefits are not payable under the terms of the Plan.

L. **MEMBER** - the Subscriber and any eligible dependent of a Subscriber who is enrolled in the Plan. The term also includes eligible employees of other governmental units as permitted by state law.

M. **PARTICIPATING PROVIDER** - A healthcare provider who, under a contract with SHP, or with its contractor or subcontractor, has agreed to provide health care services to Members with an expectation of receiving payment, other than coinsurance, copays, or deductibles, directly or indirectly, from the Plan.

N. **PAYMENT** - activities undertaken to obtain premiums, determine or fulfill coverage and benefits, or obtain or provide reimbursement for health care services.

O. **PHARMACY BENEFITS MANAGER (PBM)** - shall mean Express Scripts, Inc., or such other pharmacy benefits manager as is engaged by SHP after prior consultation with NDPERS. Said PBM is responsible for maintaining the network of participating pharmacies.

P. **PHARMACY DISEASE MANAGEMENT PROGRAM** – shall mean the diabetes disease management program through which Members receive services and support provided by the North Dakota Pharmacy Service Corporation, which program is jointly administered by NDPERS and SHP hereunder.

Q. **PLAN ADMINISTRATOR** –North Dakota Public Employees Retirement System (NDPERS) is the administrator of the Plan with all of the duties and responsibilities applicable to plan administrators, including but not necessarily limited to compliance with any and all administrative, reporting, and disclosure requirements. SHP is not the Plan Sponsor or the Plan

Administrator of the Plan and is not responsible for any of the duties assigned to the Plan Sponsor or the Plan Administrator by the terms of the Plan, or by this Agreement.

R. **PLAN SPONSOR** –The State of North Dakota, acting through its Public Employees Retirement System (NDPERS) is the Plan Sponsor of an employee benefit plan established under NDCC Ch. 54-52.1.

S. **PROTECTED HEALTH INFORMATION (PHI)** - individually identifiable health information, including summary and statistical information, collected from or on behalf of a Member that is transmitted by or maintained in electronic media, or transmitted or maintained in any other form or medium and that:

   a. is created by or received from a Health Care Provider, health care employer, or health care clearinghouse;
   b. relates to a Member's past, present or future physical or mental health or condition;
   c. relates to the provision of health care to a Member;
   d. relates to the past, present, or future payment for health care to or on behalf of a Member; or
   e. identifies a Member or could reasonably be used to identify a Member.
   f. Educational records and employment records are not considered PHI under federal law.

T. **SANFORD HEALTH PLAN (SHP)** - is a health maintenance organization that provides fully-insured, prepaid group health care and pharmacy benefits through an organized health care delivery system.

U. **SECURITY INCIDENT** - any attempted or successful unauthorized access, use, disclosure, modification, or destruction of a Member's electronic PHI or interference with SHP's system operations in SHP's information systems.

V. **STANDARD TRANSACTIONS** - health care financial or administrative transactions conducted electronically for which standard data elements, code sets and formats have been adopted in accordance with federal or state law.

W. **SUBSCRIBER** - any eligible employee of the Plan Sponsor, employee of a participating employer or other eligible individual as prescribed by NDCC CH. 54-52.1 whose application for membership has been accepted, whose coverage is in force with SHP and in whose name the ID Card is issued. .

X. **SUCCESSFUL SECURITY INCIDENTS** - Security Incidents that result in unauthorized access, use, disclosure, modification, or destruction of information or interference with system operations.

Y. **TOBACCO CESSATION PROGRAM** – shall mean Member tobacco education and cessation programs funded through the Department of Health by appropriation from the state legislature, which programs are jointly administered by SHP, NDPERS and the ND Department of Health.

Z. **UNSUCCESSFUL SECURITY INCIDENTS** - Security Incidents that do not result in unauthorized access, use, disclosure, modification, or destruction of information or interference with system operations.

AA. **WELLNESS BENEFIT PROGRAM** – shall mean the NDPERS employer-based Wellness Benefit Program related to health and wellness promotion for Members under which funding is

made available to State agencies or political subdivisions, as jointly administered by NDPERS and SHP hereunder.

3. **SHP SHALL:**

3.1 Establish a membership record for existing Members containing information as provided by NDPERS. In order to initially enroll members, SHP will require electronic 834 compliant files from the Plan Administrator for current membership by 4/15/15 and regular updates through 6/30/15.

3.2 Provide Identification Cards, Certificates of Insurance, Summary of Benefits and Coverage and Summaries of Material Modifications (paper and/or electronic, as reasonably agreed by the parties).

3.3 Provide the Health Plan Performance Guarantees, as outlined in Exhibit B.

3.4 Upon enrollment under the NDPERS Benefit Plan, SHP will provide written notice to covered employees and their covered spouses of their applicable continuation rights pursuant to the Consolidated Omnibus Budget Reconciliation Act ("COBRA") or under State law pursuant to NDCC § 26.1-36-23, if applicable.

3.5 Receive enrollment file for late entrants who enroll outside of the Plan's annual open enrollment period as part of a special election (for qualifying events) as defined in the Plan Sponsor's Group Health Insurance Eligibility and Enrollment Guidelines and ND Administrative Rules.

3.6 Provide Managed Benefits services in accordance with appropriate licensure and certification requirements; such services to be provided by a dedicated staff person.

3.7 Provide a dedicated service unit to adjudicate all claims and respond to Member's inquiries. Provide toll-free Member and Health Care Provider service lines between the hours of 8 AM and 5:30 PM CST at the office(s) in North Dakota, as appropriate. A toll-free managed benefits line for Health Care Providers will also be available between the hours of 7:30 AM and 5:30 PM CST. During nonbusiness hours, answering machine services will be available for managed benefits calls.

3.8 Process claims and inquiries for all members, including claims from non-participating providers.

3.9 Correspond with the Members and Health Care Providers if additional information is deemed necessary by SHP to complete the administrative process.

3.10 Administer third party liability programs.

3.11 Provide to Members an Explanation of Benefits Statement.

3.12 Provide a procedure for detection of fraud and unlawful activity.

3.13 Offer Members an individual policy when application is made within 31 days of the termination of enrollment under NDPERS and Member resides in SHP's service area where SHP is licensed to sell an individual policy.

3.14 Provide assistance to NDPERS for the conduct of enrollment, servicing and education.

3.15 Provide to NDPERS formal Policy and Procedure guidelines for the conduct of external audits or reviews commissioned by NDPERS.

NDPERS shall provide SHP with the scope and requirements of any audit or review prior to the commencement of activities. If a sample of claims is required, SHP will provide or NDPERS will select a statistically valid computerized sample of claims, if not prohibited by law, regulation or rule.

NDPERS will provide a copy of the report of all audit or review findings and shall discuss the findings with SHP upon discovery to allow further investigation or implementation of corrective action.

3.16 Provide NDPERS with reporting to include but not limited to:

a. Annual group reporting of membership and utilization by group segments and product.

b. Estimates of future claim reserves and premium to claim ratio.

c. Such other special claims reports as requested from time-to-time by NDPERS, subject to the availability of data and appropriate cost considerations.

d. Interest calculation monthly report, including supporting documentation as reasonably requested.

e. Performance objectives as described in Exhibit B of this Agreement.

3.17 Provide NDPERS with claims specific data on a monthly basis in agreed upon medium. This information shall be in a format acceptable to NDPERS and subject to all federal and state laws on confidentiality and open records; and provide at least monthly to any NDPERS designated third party administrator of a pretax benefits program, for purposes of claim reimbursement for any member pretax medical spending account, an electronic claims data file as reasonably requested, such file to include at least the following: member eligibility and demographic information, provider/pharmacy demographic information (i.e. NPI), applicable member liability (i.e. copay, deductible, and coinsurance), and prescription NDC number.

3.18 Provide support to NDPERS for the establishment of a Preferred Provider Network consistent with objectives established by NDPERS. SHP shall determine Participating Provider eligibility in accordance with its policies and accreditation standards.

a. SHP will provide technical and administrative advice to NDPERS relative to the appropriateness of PPO arrangements for the Plan. SHP shall pursue in good faith participating provider agreements with those providers who were historically in the NDPERS PPO but are not currently SHP Participating Providers. The parties agree that participation and reimbursement information may contain trade secret, proprietary, commercial, and financial information under section 44-04-18.4 or any other applicable law. To the extent that NDPERS determines that such information is confidential under applicable state law, NDPERS shall maintain the confidentiality of the same. Further, NDPERS shall notify SHP of any request for release of information and, upon NDPERS' determination to release, shall allow SHP a reasonable opportunity to respond prior to disclosure. The duty of NDPERS to

maintain the confidentiality of information under this section continues beyond the term of this Agreement. With respect to historic NDPERS PPO providers who elect not to become Participating Providers at the outset of this Agreement, SHP and NDPERS will reasonably discuss and cooperate with respect to (i) soliciting such providers into the network and (ii) administration of provider billing, Member co-sharing and other financial arrangements with respect to services provided by such non-Participating Providers over the initial year of the Agreement.

b. SHP will develop jointly with NDPERS a written instrument to be used as the basis for providers participating in the PPO Program.

c. SHP will secure provider agreements upon completion of negotiations with providers. Such negotiations may be conducted jointly by SHP and NDPERS.

d. SHP will enforce strict managed benefits, utilization review and quality assurance criteria to assure attainment of Preferred Provider program objectives.

e. SHP will, upon NDPERS reasonable direction, terminate a Provider's NDPERS PPO participation agreement in accordance with terms of the agreement, when a PPO Provider is noncompliant with NDPERS/SHP policies and procedures. Said policies and procedures shall be documented and communicated to the Participating Provider prior to implementation.

3.19 Carry over any Deductible, Out-of-Pocket Maximums, Coinsurance Amounts and other benefit accumulators incurred from January 1 to June 30, of the prior contract period. In order to honor the same, SHP will initially require electronic files from the Plan Administrator or incumbent carrier including at a minimum member name, address, SSN, date of birth, insurance ID number and carry-over amounts for deductible and out-of-pocket maximum and other benefit accumulators for year to date 2015. SHP will require carry over electronic files to be provided starting on 6/15/15 and on the first day and fifteenth day of each month thereafter continuing through 6/30/17 to ensure timely and proper administration of plan benefits and to minimize member impact. Similarly, SHP shall maintain the Health Club/Wellness Credit Program. To facilitate the same, SHP will initially require an electronic file(s) with Health Club/Wellness Credit Program information from the incumbent carrier including at a minimum member name, address, SSN, date of birth, insurance ID, payment/voucher status and current calculated points as of 6/30/15 incurred date. SHP and NDPERS agree to reasonably cooperate with the incumbent carrier regarding logistics of such transitions.

3.20 The same process outlined in Section 3.19 will be required of the incumbent pharmacy benefit manager for pharmacy accumulators. SHP and NDPERS will reasonably cooperate to, by 4/15/15, anticipate disruption, if any, resulting from changing to SHP's formulary and, on or prior to 6/1/15, notify members of the same.

3.21 To enhance servicing of Members with respect to preauthorizations granted by incumbent carrier prior to 6/30/15, SHP will require from the incumbent carrier the secured, electronic file of approved care treatment programs, prior authorizations/certifications, provider referrals and formulary exception requests by 6/1/15 and updated again 7/1/15, which shall include the Member's name, date of birth, SSN, provider name and provider NPI, authorized date of service or span of service and any utilization management notes or member correspondence.

For services to be provided through 2015, SHP shall honor care treatment programs pre-dating 6/30/15 for referrals and prior authorizations/certifications for services to be

provided by historic PPO providers as approved by the incumbent carrier if such information is provided to SHP in a secured, electronic file as described above.

3.22 Jointly administer the Pharmacy Disease Management Program, Tobacco Cessation Program, and Wellness Benefit Program substantially in accordance with Exhibit E, Exhibit F, and Exhibit G, respectively.

3.23 Reasonably respond to requests for service meetings from NDPERS administration or its Board upon request.

4. **NDPERS SHALL:**

4.1 Prepare and distribute monthly billings to participating employers and retirees participating in the Plan. NDPERS shall respond to the participating employers inquiries concerning eligibility rules, billing, etc.

4.2 Prepare weekly eligibility file by participating employer and premium classification for both active and retired employees and provide the file to SHP to be used for eligibility certification purposes. Along with the eligibility file, NDPERS will furnish a full-file listing of participants (incorporating additions or terminations during the month). Such listing will reflect the name of the employee, dependents, Social Security Number, the effective date of coverage for a new employee or the termination date of a terminated employee and the coverage classification. NDPERS will submit enrollment, billing and premium remittance via a centralized electronic system. NDPERS will provide enrollment/eligibility information on a data file that follows the HIPAA 834 file specifications and SHP's companion guide. Premium payment information will be provided on a data file that follows the HIPAA 820 file specifications. Files will be transmitted using a mutually agreed upon secure file transmission process.

4.3 Use best efforts to notify SHP of terminated members no later than 30 days after the event that rendered the Member ineligible for coverage. Regardless of whether or not NDPERS provides notice to SHP of the terminated Member, SHP intends to recoup payments for all paid claims from applicable providers incurred after the last date of eligibility. It then becomes the duty and discretion of said providers to bill the Member accordingly. Similarly, SHP intends to recoup from terminated Members prescription claims paid after the last date of eligibility.

4.4 Provide enrollment files, obtain completed classifications or addresses, etc. from participants and furnish SHP with enrollment files or request for coverage or address changes and retain the original copy.

4.5 Be responsible for the administration of and compliance with COBRA or State-mandated continuation of coverage. SHP will forward requests for COBRA or State law continuation of coverage participation by membership to NDPERS upon notification.

4.6 Comply with SHP's established administrative policies which are reasonable and consistent with the NDPERS Health Plan and the bid specifications agreed to by the parties, including but not limited to: enrollment and eligibility policies, standard adjudication and Medical Policy Guidelines, Payable Provider Guidelines, Managed Benefits Program Guidelines and claim payment procedures as such materials are modified from time to time.

4.7 Develop and provide SHP the objectives currently established for the Preferred Provider programs and provide SHP with an electronic file of providers currently enrolled in the

Preferred Provider Network by 3/15/15. The file shall include at a minimum the provider name, specialty/type, address, and NPI.

4.8 Pay premiums to SHP according to the schedule in Section 6.

4.9 NDPERS acknowledges that the administration of the Benefit Plan that is the subject of this Agreement may be subject to regulation under federal and/or state law. NDPERS agrees to furnish SHP with any and all information necessary to comply with any applicable federal and/or state laws and to certify that this information is accurate. If there are any changes in the employer contribution rate for benefits and services available under this Agreement, NDPERS agrees that it is its obligation to provide information related to the change in contribution rates immediately to SHP.

4.10 NDPERS acknowledges that Subscriber satisfaction will be enhanced by SHP's timely receipt of accurate electronic files with information housed by the incumbent carrier or incumbent pharmacy vendor as described in Sections 3.19; 3.20; and 3.21 of this Agreement. Consequently NDPERS shall use commercial best efforts to facilitate SHP's receipt of the same and will forward to incumbent carrier a schedule of desired information and timelines for receipt (to be provided by SHP).

4.11 NDPERS agrees to timely provide the information as specified in Section 3.1.

4.12 Perform those functions or duties regarding the Pharmacy Disease Management Program, Tobacco Cessation Program and Wellness Benefit Program substantially in accordance with Exhibit E, Exhibit F and Exhibit G, respectively.

5. PRIVACY USE AND DISCLOSURE RESPONSIBILITIES

5.1 RESPONSIBILITIES OF SHP

A. Privacy of Protected Health Information (PHI)

1. SHP will keep confidential all Claim records and all other PHI that SHP creates or receives in the performance of its duties under this Agreement. Except as permitted or required by this Agreement for SHP to perform its duties under this Agreement, SHP will not use or disclose such Claim information or other PHI without the authorization of the Member who is the subject of such information or as required by law.

2. SHP will neither use nor disclose Members' PHI (including any Members' PHI received from a business associate of the Plan) except (1) as permitted or required by this Agreement, (2) as permitted in writing by the Plan Administrator, (3) as authorized by Members, (4) in accordance with the Business Associate Agreement ("BAA") between the parties materially in form and substance provided in Exhibit H hereto, or (5) as required by law.

3. SHP will be permitted to use or disclose Members' PHI only as follows:

   a. SHP will be permitted to use and disclose Members' PHI (a) for the management, operation and administration of the Plan the Plan Administrator offers Members, and (b) for the services set forth in the Plan, which include

Payment Activities, Health Care Operations, and Data Aggregation as these terms are defined under federal law.

1. SHP will be permitted to use Members' PHI as necessary for SHP's proper management and administration or to carry out SHP's legal responsibilities.

2. SHP will be permitted to disclose Members' PHI as necessary for SHP's proper management and administration or to carry out SHP's legal responsibilities only if (i) the disclosure is required by law, or (ii) before the disclosure, SHP obtains from the entity to which the disclosure is to be made reasonable assurance, evidenced by a written contract, that the entity will hold Members' PHI in confidence, use or further disclose Members' PHI only for the purposes for which SHP disclosed it to the entity or as required by law, and notify SHP of any instance the entity becomes aware of where the confidentiality of any Members' PHI was breached as required by 45 CFR 164.410.

b. SHP will make reasonable efforts in accordance with its written privacy policies and procedures to use, disclose, or request only the minimum necessary amount of Members' PHI to accomplish the intended purpose. SHP will make its written privacy policies and procedures available to the Plan Sponsor, upon request.

4. Other than disclosures permitted by Section 5.1(A)3, SHP will not disclose Members' PHI to the Plan Administrator or to the Plan's business associate except as directed by the Plan Administrator in writing and as permitted by applicable law.

5. SHP will require each subcontractor and agent to which SHP is permitted by this Agreement or in writing by the Plan Administrator to disclose Members' PHI to provide reasonable assurance, evidenced by written contract, that such other entity will comply with the same privacy and security obligations with respect to Members' PHI as this Agreement applies to SHP.

6. SHP will not disclose any Members' PHI to the Plan Sponsor, except as permitted by and in accordance with Section 5.1(A) 3.

7. SHP will report to the Plan Administrator any use or disclosure of Members' PHI not permitted by this Agreement, including incidents that constitute breaches of unsecured PHI as required by 45 CFR 164.410. SHP will make any such report to the Plan Administrator after SHP learns of such non-permitted use or disclosure.

8. SHP will report to the Plan Administrator attempted or successful unauthorized access, use, disclosure, modification or destruction of a Member's electronic PHI or interference with SHP's system operations in SHP's information systems ("Security Incident"), of which SHP becomes aware. With regard to attempted unauthorized access, use, etc., SHP and the Plan Administrator recognize and agree that the significant number of meaningless attempts to, without authorization, access, use, disclose, modify or destroy electronic PHI will make real-time reporting formidable. Therefore, SHP and the Plan Administrator agree to the following reporting procedures for Security Incidents that result in unauthorized access, use, disclosure, modification, or destruction of information

or interference with system operations ("Successful Security Incidents") and for Security Incidents that do not so result ("Unsuccessful Security Incidents").

For Unsuccessful Security Incidents, SHP and the Plan Administrator agree that this Agreement constitutes notice from SHP of any such Unsuccessful Security Incidents. In other words, the Plan Administrator waives any separate notice of Unsuccessful Security Incidents. By way of example, SHP and the Plan Administrator consider the following to be illustrative of Unsuccessful Security Incidents when they do not result in unauthorized access, use, disclosure, modification, or destruction of a Member's electronic PHI or interference with an information system.

1. Pings on SHP's firewall,

2. Port scans,

3. Attempts to log on to a system or enter a database with an invalid password or username,

4. Denial-of-service attacks that do not result in a server being taken off-line, and

5. Malware (e.g., worms, viruses).

For Successful Security Incidents, SHP shall give notice promptly to the Plan Administrator in the event a Member's electronic PHI was compromised.

9. Disposition of Protected Health Information

The parties agree that upon termination, cancellation, expiration or other conclusion of this Agreement, SHP will return or destroy all PHI received or created by SHP on the Plan Administrator's behalf as soon as feasible. Due to various regulatory and legal requirements, the Plan Administrator acknowledges that immediate return or destruction of all such information is not feasible. SHP agrees that upon conclusion of this Agreement for any reason, it will use or disclose the PHI it received or created on the Plan's behalf only as necessary to meet SHP's regulatory and legal requirements and for no other purposes unless permitted in writing by the Plan Administrator. SHP will destroy PHI received or created by SHP on the Plan Administrator's behalf that is in SHP's possession under such circumstances and upon such schedule as SHP deems consistent with its regulatory and other legal obligations.

These responsibilities agreed to by SHP and related to protecting the privacy and safeguarding the security of PHI, as well as any terms directly related thereto, shall survive the termination of this Agreement and, where applicable, shall govern SHP's receipt, use or disclosure of PHI pursuant to the terms of this Agreement.

10. To the extent SHP is to carry out one or more of Plan Administrator's obligations under the HIPAA Privacy Regulations, it shall comply with the requirements of the Privacy Regulations that apply to the Plan Administrator in the performance of such obligations.

B. **Access, Amendment and Disclosure Accounting for Protected Health Information**

1. Upon the Plan Administrator's written request, SHP will make available for inspection and obtaining copies by the Plan Administrator, or at the Plan Administrator's direction by the Member (or the Members' representative), any PHI about the Member created or received for or from the Plan Administrator in SHP's custody or control so the Plan Administrator may meet its access obligations under federal law.

2. Upon receipt of a written request from the Plan Administrator, or at the Plan Administrator's direction by the Member (or the Members' representative), SHP will amend or permit the Plan Administrator access to amend any portion of the PHI created or received for or from the Plan Administrator in SHP's custody or control, so the Plan Administrator may meet its amendment obligations under federal law.

3. So the Plan Administrator may meet its disclosure accounting obligations under federal law or state law, SHP will do the following:

   a. SHP will record each disclosure of Members' PHI which is not excepted from disclosure accounting under Section 5.1(B) 3.b, that SHP makes to the Plan Administrator or to a third party.

      The information about each disclosure that SHP must record ("Disclosure Information") is (i) the disclosure date, (ii) the name and (if known) address of the person or entity to whom SHP made the disclosure, (iii) a brief description of the PHI disclosed, and (iv) a brief statement of the purpose of the disclosure.

      For repetitive disclosures of Members' PHI that SHP makes for a single purpose to the same person or entity (including the Plan Administrator), SHP may record (i) the disclosure information for the first of these repetitive disclosures, (ii) the frequency, periodicity or number of these repetitive disclosures, and (iii) the date of the last of these repetitive disclosures.

   b. SHP will not be required to record disclosure information or otherwise account for disclosures of Members' PHI that this Agreement or the Plan Administrator in writing permits or requires:

      (1) for Payment Activities or Health Care Operations,
      (2) to the Member who is the subject of the PHI or to that Members' personal representative,
      (3) to persons involved in that Members' health care or payment for health care, as provided under federal law,
      (4) for notification for disaster relief purposes or national security or intelligence purposes as provided under federal law,
      (5) to law enforcement officials or correctional institutions regarding inmates,
      (6) for incidental uses or disclosures,
      (7) as part of a limited data set in accordance with federal law,
      (8) that occurred prior to the HIPAA Privacy Compliance Date,
      (9) pursuant to a valid authorization, or
      (10) as may be required by law.

c. SHP will have available for the Plan Administrator the disclosure information required by Section 5.1(B)3.a. for the six (6) years immediately preceding the date of the Plan Administrator's request for the disclosure information.

d. Upon the Plan Administrator's written request, SHP will make available to the Plan Administrator, or at the Plan Administrator's direction to the Member (or the Member's representative), disclosure information regarding the Member so the Plan Administrator may meet its disclosure accounting obligations under federal law.

C. **Information Safeguards**

1. SHP will maintain reasonable and appropriate administrative, technical and physical safeguards to protect the privacy of Member PHI. The safeguards must reasonably protect Member PHI from any intentional or unintentional use or disclosure in violation of federal law and limit incidental uses or disclosures made pursuant to a use or disclosure otherwise permitted by this Agreement.

2. SHP will implement administrative, technical, and physical safeguards that reasonably and appropriately protect the confidentiality, integrity, and availability of electronic PHI SHP creates, receives, maintains, or transmits on behalf of the Plan Administrator as required by federal law.

D. **Inspection of Books and Records**

SHP will make its internal practices, books, and records relating to its use and disclosure of PHI created or received for or from the Plan Administrator available to the Plan Administrator and to the U.S. Department of Health and Human Services to determine compliance with federal law or this Agreement.

E. SHP will prepare and distribute a notice of privacy practices appropriate for the Plan to meet its notice obligations under federal law. The Plan Administrator authorizes SHP to disclose the minimum necessary PHI to the Plan Sponsor for plan administration functions specified in the Plan documents as amended.

F. **Information Privacy and Safeguard Provisions Survive Termination of Agreement**

These responsibilities agreed to by SHP and related to protecting the privacy of PHI, as well as any terms directly related thereto, shall survive the termination of this Agreement and where applicable, shall govern SHP's receipt, use and disclosure of PHI obtained pursuant to the terms of this Agreement.

5.2 RESPONSIBILITIES OF THE PLAN SPONSOR

A. The Plan Sponsor retains full and final authority and responsibility for the Plan and its operation. SHP is empowered to act on behalf of the Plan only as stated in this Agreement or as mutually agreed in writing by the Plan Sponsor and SHP.

B. Except with respect to services provided by SHP set forth in this agreement, the Plan Sponsor will have the sole responsibility for and will bear the entire cost of compliance with all federal, state and local laws, rules, and regulations concerning

the privacy of PHI, including any licensing, filing, reporting, and disclosure requirements, that may apply to the Plan. SHP will have no responsibility for the Plan's compliance or noncompliance with any applicable federal, state, or local law, rule, or regulation, that the Plan Sponsor is responsible for under this subsection.

C. By executing this Agreement, the Plan Sponsor certifies to SHP that it has amended the Plan documents to incorporate the provisions required by and under federal law, and agrees to comply with the Plan Administrator's plan documents as amended.

SHP may rely on Plan Sponsor's certification and Plan Administrator's written authorization, and will have no obligation to verify (1) the Plan Administrator's plan documents have been amended to comply with the requirements of federal law or this Agreement or (2) the Plan Sponsor is complying with the Plan Administrator's plan document as amended.

D. For any high deductible health plan offered by the Plan Sponsor, the Plan Sponsor assumes sole responsibility for determining whether the Plan qualifies as a high deductible health plan under Section 223(c)(2) of the U.S. Internal Revenue Code. SHP MAKES NO WARRANTY, EXPRESS OR IMPLIED, INCLUDING, BUT NOT LIMITED TO, ANY IMPLIED WARRANTIES OF MERCHANTABILITY OR FITNESS FOR A PARTICULAR PURPOSE REGARDING THE PLAN.

For any high deductible health plan offered by the Plan Sponsor, SHP does not provide legal or tax advice, and expressly disclaims responsibility for determining, on behalf of any individual or group, the legal and tax implications of: (1) establishing a health savings account; (2) eligibility for a health savings account; (3) the contributions made to a health savings account; (4) the deductibility of contributions to a health savings account; and (5) withdrawals from a health savings account and related taxation.

6. FEES AND CHARGES:

6.1 In consideration of the fully insured contract under this Agreement, SHP agrees to accept the following provisions and premium rates for the Effective Date of this Agreement. See attached Premium Rate Structure Table in Exhibit C of this Agreement.

6.2 SHP and NDPERS agree to the Health Plan Performance Guarantees, as outlined in the attached Exhibit B.

6.3 NDPERS will use best efforts to pay SHP, on or before the twentieth day of each month (but not later than the last day of the month), for the current month's premium income based on the amount identified in Exhibit C.

6.4 NDPERS will maintain a deposit of $3,000,000 in a Cash Reserve Account held by SHP until the settlement of the biennium. This Cash Reserve Account shall earn interest at a rate to be determined monthly, based on US Treasury Notes quoted by the Wall Street Journal. The monthly rate will be established at the close of the first trading day each month based on the closing yield to maturity of US Treasury Notes maturing 24 months hence. If there are multiple notes for that maturity, the rate will be based on an average. If there are no notes with that maturity, the next subsequent maturity will be used.

NDPERS will also maintain funds in a Programs Cash Reserve Account held by SHP for purposes of funding the Pharmacy Disease Management Program, the Wellness Benefit Program and any other programs funded outside of premium. NDPERS will maintain a

balance reasonably estimated to anticipate experience of such programs. This Programs Cash Reserve Account shall earn interest at a rate to be determined monthly, based on US Treasury Notes quoted by the Wall Street Journal. The monthly rate will be established at the close of the first trading day each month based on the closing yield to maturity of US Treasury Notes maturing 24 months hence. If there are multiple notes for that maturity, the rate will be based on an average. If there are no notes with that maturity, the next subsequent maturity will be used.

6.5 SHP will retain any surplus funds from the amounts identified as such in a schedule to the Premium Rate Table attached as Exhibit C. Surplus funds retained by SHP shall earn interest at a rate to be determined monthly, based on US Treasury Notes quoted by the Wall Street Journal. The monthly rate will be established at the close of the first trading day each month based on the closing yield to maturity of US Treasury Notes maturing 24 months hence. If there are multiple notes for that maturity, the rate will be based on an average. If there are no notes with that maturity, the next subsequent maturity will be used.

Surplus funds described in the above section 6.5 not used by SHP to pay NDPERS Health Plan incurred claims plus retention will be subject to the Final Accounting as described in Section 7 of this Agreement.

6.6 Medicare Part D will be handled by incumbent carrier through and until 12/31/15.

6.7 In the event any Federal or State authority imposes any changes to plan design, plan benefits or other mandate affecting the Plan, SHP and NDPERS shall reasonably cooperate to anticipate material increased expenses or other material effects and negotiate in good faith to incorporate consequent premium rate or other contractual changes. In the event the parties are unable to reach agreement, either party may terminate this Agreement pursuant to Section 8.2(b) hereof. SHP reserves the right to adjust premium rates, with a 90-day notice, for any such changes in taxes and/or benefits imposed upon SHP for the NDPERS health plan. SHP further reserves the right to adjust premium rates for any health plan design, plan benefit changes or other mandates imposed by State or Federal legislative action or NDPERS Board mandate when such changes become effective.

7. FINAL ACCOUNTING

7.1 A continual accounting of NDPERS Health Plan experience will take place during the 2015-2017 biennium. Monthly reports of earned income less incurred claims and retention will be produced during the biennium and the twenty-four months following the biennium.

7.2 Within 31 days of 12 months after the end of the biennium (by July 31, 2018), SHP will provide an accounting of PPACA fees. This adjustment is in addition to the settlement in 7.3 and 7.4.

1. Estimated PPACA fees paid by NDPERS during the biennium ($11.75 per Non-Medicare member per month from July 1, 2015 through June 30, 2016 and $9.91 per Non-Medicare member per month from July 1, 2016 through June 30, 2017)

2. Less actual PPACA fees paid by SHP for the biennium including:

a. Patient Centered Outcomes Research Tax will be calculated based on actual average Non-Medicare members at the rate defined by the respective federal

agency. This amount is currently estimated to be $2.16 per Non-Medicare member for July 1, 2015 through December 31, 2015, increasing each calendar year with inflation at the rate defined by the federal government.

b. Transitional Reinsurance Assessment will be calculated based on actual average Non-Medicare members at the rate of $3.67 per Non-Medicare member per month for July 1, 2015 through December 31, 2015 and is estimated at $2.50 per Non-Medicare member per month for January 1, 2016 through December 31, 2016.

c. Health Insurer Tax will be calculated using NDPERS' portion of the premium used to calculate the bill from the Federal Government, grossed up by 20% for Federal Income Tax. The billing for this tax is on a year in arrears basis. The 2016 bill will reflect premiums paid to SHP in 2015. The 2017 bill will reflect premiums paid to SHP in 2016 and the 2018 bill will reflect premiums paid to SHP in 2017. (Illustrative example for 2015 payment: Assume SHP receives a $10 million HIT tax bill in 2016. That is based on $1 billion of 2015 premium. If NDPERS contributed $200 million to the $1 billion of 2015 premium, the NDPERS would be charged 20% of $12 million – the $10 million dollar HIT tax bill grossed up by 20% for Federal Tax. The same approach would be taken for 2016 and 2017.)

3. If 1-2 of 7.2 is positive, the remainder equals Refund paid to NDPERS. If 1-2 of 7.2 is negative, the remainder will be refunded by NDPERS to SHP.

4. The parties agree that the above identified PPACA fees are subject to modification by the respective federal agencies at any time. If the PPACA fees are so modified, the modifications shall automatically be incorporated into this Agreement without further action by the parties.

7.3 Within 31 days of 12 months after the end of the biennium (by July 31, 2018) SHP will provide an accounting which will result in an initial settlement of the biennium agreement as follows:

1. Earned Premium Income (which is net of the NDPERS monthlyadmin fee) during the Biennium
2. Plus interest on Surplus Funds
3. Less Claims Incurred during the Biennium and paid July 1, 2015 – June 30, 2018
4. Less Estimated Claims Incurred and unpaid at June 30, 2018 as calculated using standard actuarial completion factors
5. Less Administrative Expense during the Biennium ($11.60 per member per month)
6. Less Service Charge during the Biennium ($4.89 per member per month)
7. Less Disease Management Program fees during the Biennium ($0.64 per member per month)
8. Less Health Club/Wellness Credit Program fees during the Biennium ($1.96 per member per month)
9. Less Actual PPACA fees paid by SHP for the Biennium (as defined by 7.2.2)
10. Less applicable PPACA fees refunded to NDPERS or plus applicable PPACA fees funded to SHP as defined by 7.2.3.

11. If 1+2-3-4-5-6-7-8-9(-/+10) of 7.3 is positive, the lesser of 50% of this amount or $1.5 million is retained by SHP. The remainder equals Refund paid to NDPERS.
12. If 1+2-3-4-5-6-7-8-9 (-/+10) of 7.3 is negative, the lesser of 50% of this amount or $3.0 million will be refunded by NDPERS to SHP.

Within 62 days of 12 months after the end of the biennium (by August 31, 2018) refunds will be paid to NDPERS or SHP as defined by 7.3.

7.4 Within 31 days of 24 months after the end of the biennium (by July 31, 2019) SHP will provide an accounting which will result in a final settlement of the biennium agreement as follows:

1. Earned Premium Income (which is net of the NDPERS monthly admin fee) during the Biennium
2. Plus interest on Surplus Funds
3. Less Claims Incurred during the Biennium and paid July 1, 2015 – June 30, 2019
4. Less Administrative Expense during the Biennium ($11.60 per member per month)
5. Less Service Charge during the Biennium ($4.89 per member per month)
6. Less Disease Management Program fees during the Biennium ($0.64 per member per month)
7. Less Health Club/Wellness Credit Program fees during the Biennium ($1.96 per member per month)
8. Less Actual PPACA fees paid by SHP for the Biennium (as defined by 7.2.2)
9. Less applicable PPACA fees refunded to NDPERS or plus applicable PPACA fees funded to SHP as defined by 7.2.3.
10. If 1+2-3-4-5-6-7-8 (-/+9) of 7.4 is positive, the lesser of 50% of this amount or $1.5 million is retained by SHP. The remainder equals Refund paid to NDPERS. If applicable, the final settlement amount will be net of initial settlement payments.
11. If 1+2-3-4-5-6-7-8 (-/+9) of 7.4 is negative, the lesser of 50% of this amount or $3.0 million will be refunded by NDPERS to SHP. If applicable, the final settlement amount will be net of initial settlement payments.

Within 62 days of 24 months after the end of the biennium (by August 31, 2019) the final settlement will be paid to NDPERS or SHP as defined by 7.2, 7.3 and 7.4. Sample illustrations of Sections 7.3 and 7.4 are Attached as Exhibit D.

8. TERM AND TERMINATION OF AGREEMENT

8.1 The term of this Agreement shall be for a two year period from July 1, 2015 through June 30, 2017; provided, however, that, upon satisfactory completion of the initial Agreement term and final approval of the NDPERS Board, this Agreement may be renewed for up to two additional two-year terms, beginning July 1, 2017 to June 30, 2019, and July 1, 2019 to June 30, 2021. NDPERS and SHP will renegotiate the contract terms during the initial, and any subsequent two-year term, for any subsequent two-year term. During the initial contract term, renegotiations will begin in August, 2016 and end in September 2016 and NDPERS will not initiate a formal bidding process during these renegotiations. If the Agreement is renewed, renegotiations for a

subsequent two year term will begin in August, 2018 and end in September 2018. If NDPERS and SHP are unable to reach an agreement during renegotiations, a formal bidding process may be initiated by NDPERS.

8.2 This Agreement may be terminated by mutual agreement of both parties, upon 60 days notice, in writing.

Either party may terminate this Agreement effective 90 days following delivery of written notice to the other party, or at such later date as may be stated in the notice, under any of the following conditions:

a. If funding from federal, state or other sources is not obtained and continued at levels sufficient to allow for purchase of the services or supplies in the indicated quantities or term. The Agreement may be modified by agreement of the parties in writing to accommodate a reduction of funds.

b. If federal or state laws, rules or regulations are modified, changed or interpreted in such a way that the services are no longer allowable or appropriate for purchase under this Agreement or are no longer eligible for the funding proposed for payments authorized by this Agreement.

c. If any license, permit or certificate required by law, rule or regulation, or by the terms of this Agreement, is for any reason denied, revoked, suspended or not renewed.

Any such termination of this Agreement shall be without prejudice to any obligations or liabilities of either party already accrued prior to such termination.

d. In the event of a breach by either party, other than for nonpayment of premium, the other party may terminate this Agreement by written notice to the breaching party. The breaching party has 31 days to fully cure the breach. If the breach is not cured within 31 days after written notice, this Agreement will immediately terminate.

9. PROVIDER NETWORK DISCOUNT PROGRAMS

SHP has a variety of relationships with regional and national PPO discount Programs. Whenever a Member accesses health care services outside of the geographic area SHP serves, the claim for those services may be processed through one of these discount Programs and presented to SHP for payment in accordance with the rules of the discount program policies then in effect. The discount programs available to Members under this Agreement are described generally below.

Typically when accessing care outside the SHP service area, a Member will obtain care from health care providers that have a contractual agreement (i.e., "participating agreement") with the discount program. In some instances, a Member may obtain care from health care providers who have not entered into a "participating agreement" with SHP directly. SHP payment practices in both instances are described below.

A. Regional and National Network Discount Program

When Members access health care services outside the geographic area served by SHP, SHP will adjudicate claims with the health care providers who have entered into a "participating agreement" with any one of SHP's discount network programs (participating health care providers). The financial terms of the Regional or National Network Discount Program are described generally below. Individual circumstances may arise that are not

directly covered by this description; however, in those instances, SHP's action will be consistent with the spirit of this description.

Liability Calculation Method Per Claim - The calculation of Member liability on claims for Covered Services processed through the Regional or National Network Discount Program will be based on the negotiated price made available to SHP by the Regional or National Network Discount program.

The Regional or National Network discount program may use various methods to determine a negotiated price, depending on the terms of each health care provider contracts. The negotiated price made available to SHP represents a payment negotiated by a Regional or National Network discount program with a health care provider that is the difference between the applicable contract rate and the participating provider's billed charges.

The amount paid by the Member is a final price; no future price adjustment will result in increases or decreases to the pricing of past claims.

Should the state in which health care services are accessed mandate liability calculation methods that differ from the negotiated price methodology or require a surcharge, SHP would then calculate the Member's liability in accordance with applicable law.

Return of Overpayments - recoveries from participating health care providers can arise in several ways, including, but not limited to, anti-fraud and abuse recoveries, provider/hospital audits, credit balance audits, utilization review refunds, and unsolicited refunds. In some cases, SHP will engage third parties to assist in discovery or collection of recovery amounts. The fees of such a third party may be netted against the recovery. Recovery amounts determined in this way will be applied in accordance with applicable SHP policies, which generally require correction on a claim-by-claim or prospective basis.

B. **Nonparticipating Providers Outside the SHP Service Area**

When Covered Services are provided outside of SHP's service area by health care providers who have not entered into a "participating agreement" with SHP or SHP-contracted Regional or National Network Discount Programs (nonparticipating health care providers), the amount the Member pays for such services will be based on SHP's maximum allowed amount, which is the lesser of (a) the amount charged for a covered service or supply, or (b) reasonable costs as established by SHP. Members are responsible for any difference between the amount charged and SHP's payment for covered services.

In certain situations, SHP may pay claims based on the payment SHP would make if the Covered Services had been obtained within the SHP service area by a Participating Provider. Such situations include where a Member did not have reasonable access to a participating health care provider, as determined by SHP in its sole and absolute discretion or by applicable state law. SHP may also in its sole and absolute discretion, negotiate a payment with such a health care provider on an exception basis. In any of these situations, the Member may be responsible for the difference between the amount that the nonparticipating health care provider bills and payment SHP will make for the Covered Services as set forth in this paragraph.

10. PBM/REBATE PAYMENTS

Regarding prescription medications or drugs purchased by Members under the terms of the Plan, SHP will pay PBM according to the terms of the agreement between SHP and PBM. The amount due to the pharmacy under the terms of the agreement between PBM and the

pharmacy provider is that which is due at the time the prescription medication or drug is purchased by the Member. The amount due to the pharmacy under the pharmacy provider participating agreement with the PBM is calculated without regard to any subsequent, retrospective manufacturer discount that may apply to the cost of the prescription medication or drug.

The Plan Administrator acknowledges and agrees that, in some cases but not all, drug manufacturers may offer rebates to SHP on prescription medications and drugs purchased under the terms of the Plan. SHP agrees to use best efforts to establish and maintain a drug rebate program pursuant to which such rebates directly benefit Members in a manner substantially similar to that provided by the incumbent carrier.

11. **GENERAL PROVISIONS:**

11.1 SHP is an independent entity under this Agreement and is not a State employee for any purpose, including the application of the Social Security Act, the Fair Labor Standards Act, the Federal Insurance Contribution Act, the North Dakota Unemployment Compensation Law and the North Dakota Workforce Safety and Insurance Act. HSP retains sole and absolute discretion in the manner and means of carrying out HSP'S activities and responsibilities under This Agreement, except to the extent specified intthis Agreement.

11.2 This Agreement, including the following documents, constitutes the entire agreement between the parties. There are no understandings, agreements, or representations, oral or written, not specified within this Agreement. This Agreement may not be modified, supplemented or amended, in any manner, except by written agreement signed by both parties.
Notwithstanding anything herein to the contrary, in the event of any inconsistency or conflict among the documents making up this Agreement, the documents must control in this order of precedence:

a. The terms of this Agreement as may be amended;
b. SHP's Proposal dated September 4, 2014 and Rebid Proposal dated November 19, 2014 in response to the RFP;
c. State's Request for Proposal Fully-Insured Group Medical and Prescription Drug Coverage (the "RFP") reissued and dated October 30, 2014.

11.3 This Agreement shall be governed by and construed according to the laws of the state of North Dakota.

11.4 Failure of either party at any time to require performance by the other party of any provision of this Agreement shall not be deemed to be a continuing waiver of that provision or a waiver of any other provision of this Agreement.

11.5 No assignment of this Agreement in whole or in part may be made by either party without written agreement approved by both parties. SHP may not assign or otherwise transfer or delegate any right or duty hereunder without NDPERS express written consent, or as otherwise set forth in this Agreement. However, SHP may enter into subcontracts for the provision of services under this Agreement provided that any subcontract acknowledges the binding nature of this Agreement and incorporates this Agreement, including any attachments. SHP is solely responsible for the performance of any subcontractor. Notwithstanding the foregoing, NDPERS acknowledges and agrees that SHP is a party to existing subcontracts with the PBM and other entities and may be bound by, or subject to, exclusivity or other limiting

provisions under such existing subcontracts. SHP does not have authority to contract for or incur obligations on behalf of the Plan Sponsor or Plan Administrator.

11.6 All notices and correspondence required or permitted to be given under this Agreement shall be given by personal delivery to the other party or may be sent by mail, postage prepaid to the other party at the following addresses:

NORTH DAKOTA PUBLIC EMPLOYEES RETIREMENT SYSTEM
PO Box 1657
Bismarck, North Dakota 58502

SANFORD HEALTH PLAN
300 Cherapa Place, Suite 201
Sioux Falls, SD 57103

11.7 Neither party shall be liable for any delay in or failure to perform under this Agreement due to an act of God or due to war mobilization, insurrection, rebellion, civil commotion, riot, act of an extremist or public enemy, sabotage, labor dispute, explosion, fire, flood, storm, accident, drought, equipment failure, power failure, fuel or energy shortages, unavoidable delay of carriers, embargo, law, ordinance, act, rule or regulation of any government, whether valid or invalid.

11.8 If NDPERS or SHP creates benefit communications for Members, relating to the Certificate of Insurance attached as Exhibit A, such communications will be sent to SHP or NDPERS for comment prior to distribution. Either party will have 5 business days to comment on the communication. If one party fails to advise the other within that 5-day period, it will be presumed there are no comments on the communication. If NDPERS has a digital or online version of the Certificate of Insurance available to its Members, NDPERS agrees that it will not alter, modify or change the language of the Certificate of Insurance, and further agrees the Certificate of Insurance, attached as Exhibit A, will be the controlling document in the event of any conflict or liability that might arise as the result of any alterations, modifications or changes made by NDPERS. In the event a claim is paid based on NDPERS's modified or altered digital or online Certificate of Insurance, NDPERS is liable for all such claims. NDPERS further agrees that no waiver of this agreement is valid unless in writing and approved by SHP.

11.9 SHP will prepare Summaries of Benefits and Coverage for distribution to applicants and Members by NDPERS so that SHP, the Plan and NDPERS may all satisfy related disclosure obligations under federal law. It shall be the sole responsibility of NDPERS to distribute the Summaries of Benefits and Coverage in accordance with federal law, and the Plan Administrator acknowledges and agrees that SHP will rely upon NDPERS for compliance with the requirements for distribution of the Summaries of Benefits and Coverage to applicants and Members.

11.10 When coverage under this Agreement is terminated, SHP will, within a reasonable period of time, issue a Certificate of Creditable Coverage to the Subscriber to the extent the certificate is required under state and/or federal law. Upon notification by the Subscriber of the ineligibility of a dependent, a Certificate of Creditable Coverage will be issued to the affected Member within a reasonable period of time. Certificates of Creditable Coverage may also be obtained from SHP upon request within 24 months

after coverage is terminated. Certificates of Creditable Coverage will only reflect continuous coverage provided through SHP.

11.11 Upon the effective date of any final regulation or amendment to final regulations with respect to PHI, Standard Transactions, the security of health information or other aspects of the Health Insurance Portability and Accountability Act of 1996 applicable to this Agreement, this Agreement will automatically amend such that the obligations imposed on the Plan Sponsor, the Plan Administrator and SHP remain in compliance with such regulations, unless SHP elects to terminate this Agreement by providing the Plan Sponsor and the Plan Administrator notice of termination in accordance with this Agreement at least thirty-one (31) days before the effective date of such final regulation or amendment to final regulations.

11.12 The parties agree that all participation by Members in programs administered by NDPERS is confidential under North Dakota law. SHP may request and NDPERS shall provide directly to SHP upon such request, confidential information necessary for SHP to provide the services described herein. SHP shall keep confidential all NDPERS information obtained in the course of delivering services in accordance with law and the BAA, and shall not use any PHI or other Member information for any marketing purposes without express consent. Failure of SHP to maintain the confidentiality of such information may be considered a material breach of the contract and may constitute the basis for additional civil and criminal penalties under North Dakota law. SHP shall not disclose any individual employee or dependent information unless otherwise permitted by the terms of this Agreement or the BAA without the prior written consent of the employee or family member. SHP has exclusive control over the direction and guidance of the persons rendering services under this Agreement. Upon termination of this Agreement, for any reason, SHP shall return or destroy all confidential information received from NDPERS, or created or received by SHP on behalf of NDPERS except as provided in the BAA. This provision applies to confidential information that may be in the possession of subcontractors or agents of SHP. SHP shall retain no copies of the confidential information except as provided in the BAA. In the event that SHP asserts that returning or destroying the confidential information is not feasible, SHP shall provide to NDPERS notification of the conditions that make return or destruction infeasible. Upon explicit written agreement of NDPERS that return or destruction of confidential information is not feasible, SHP shall extend the protections of this Agreement to that confidential information and limit further uses and disclosures of any such confidential information to those purposes that make the return or destruction infeasible, for so long as SHP maintains the confidential information.

SHP understands that, except for disclosures prohibited in this Agreement, NDPERS must disclose to the public upon request any records it receives from SHP unless such disclosure is not permitted by law. SHP further understands that any records that are obtained or generated by SHP under this Agreement, except for records that are confidential under this Agreement, may, under certain circumstances, be open to the public upon request under the North Dakota open records law. SHP agrees to contact NDPERS immediately upon receiving a request for information under the open records law and to comply with NDPERS's instructions on how to respond to the request.

The parties acknowledge and agree that the provisions of N.D.C.C. § 54-52.1-12 apply with respect to Member information.

11.13 SHP agrees to comply with all laws, rules, and policies, including those relating to nondiscrimination, accessibility and civil rights. SHP agrees to timely file all required reports, make required payroll deductions, and timely pay all taxes and premiums owed,

including sales and use taxes and unemployment compensation and workers' compensation premiums. SHP shall have and keep current at all times during the term of this Agreement all licenses and permits required by law.

11.14 All records, regardless of physical form, and the accounting practices and procedures of SHP relevant to this Agreement are subject to examination by the North Dakota State Auditor, the Auditor's designee, or Federal auditors. SHP shall maintain all of these records for at least three (3) years following completion of this Agreement and be able to provide them at any reasonable time. State, State Auditor, or Auditor's designee shall provide reasonable notice.

12. DISPUTES AND INDEMNIFICATION

If litigation is filed regarding denial of benefits or otherwise, and SHP is named as the sole defendant, SHP will have the right to manage and have full control of litigation and to determine whether to pay, compromise, litigate or appeal the litigation. Except as otherwise provided in this Agreement, NDPERS and SHP each agree to assume their own liability for any and all legal or equitable claims of any nature including all costs, expenses and attorneys' fees which may in any manner result from or arise out of this Agreement.

NDPERS agrees that all Retrospective Discount Payments will be made to Members of the Plan. SHP agrees to indemnify NDPERS for any judgments against NDPERS solely arising out of NDPERS' decision to participate in the Retrospective Discount Payment program.

SHP shall secure and keep in force during the term of this Agreement, from insurance companies, government self-insurance pools or government self-retention funds, authorized to do business in North Dakota, the following insurance coverages:

1. Commercial general liability, including premises or operations, contractual, and products or completed operations coverages (if applicable), with minimum liability limits of $250,000 per occurrence and $1,000,000 aggregate.

2. Professional errors and omissions with minimum liability limits of $1,000,000 per occurrence and in the aggregate, SHP shall continuously maintain such coverage during the term of the Agreement and for three years thereafter. In the event of a change or cancellation of such coverage, SHP shall purchase an extended reporting period to meet the time periods required in this section.

3. Automobile liability, including Owned (if any), Hired, and Non-Owned automobiles, with minimum liability limits of $250,000 per person and $500,000 per occurrence.

4. Workers compensation coverage meeting all statutory requirements.

The insurance coverages listed above must meet the following additional requirements:

1. Any deductible or self-insured retention amount or other similar obligation under the policies shall be the sole responsibility of SHP. The amount of any deductible or self retention is subject to approval by NDPERS, upon request.

2. This insurance may be in policy or policies of insurance, primary and excess, including the so-called umbrella or catastrophe form and must be placed with insurers rated "A-" or better by A.M. Best Company, Inc., provided any excess policy follows form for

coverage. Less than an "A-" rating must be approved by NDPERS. The policies shall be in form and terms approved by NDPERS, upon request.

3. SHP shall furnish a certificate of insurance to the undersigned NDPERS representative, upon request.

4. Failure to provide insurance as required in this Agreement is a material breach of contract entitling NDPERS to terminate this Agreement immediately.

SHP shall not cancel insurance coverage required by this Agreement or modify the insurance coverage below limits required by this Agreement without thirty (30) days' prior written notice to the undersigned NDPERS representative.

IN WITNESS WHEREOF, the parties hereto have caused this Agreement to be executed, in their names by their undersigned officers, the same being duly authorized to do so.

NORTH DAKOTA PUBLIC EMPLOYEES RETIREMENT SYSTEM (PLAN ADMINISTRATOR)
PO Box 1657
Bismarck, North Dakota 58502

By: _____

Title: Chairman

Date: 3-5-2015

SANFORD HEALTH PLAN
300 Cherapa Place, Suite 201
Sioux Falls, SD 67103

By: _____

Title: President / CEO

Date: 3-5-15

NORTH DAKOTA PUBLIC EMPLOYEES RETIREMENT SYSTEM (PLAN SPONSOR)
PO Box 1657
Bismarck, North Dakota 58502

By: _____

Title: Chairman

Date: 3-5-2015

Administrative Service Agreement
07/01/2015-06/30/2017

Business Associate Agreement

(Revised 10-2013)

This Business Associate Agreement, which is an addendum to the underlying contract, is entered into by and between, the North Dakota Public Employees Retirement System ("NDPERS") and the **Sanford Health Plan, 300 Cherapa Place, Suite 201 PO Box 91110, Sioux Falls, SD 57109-1110.**

1. Definitions

a. Terms used, but not otherwise defined, in this Agreement have the same meaning as those terms in the HIPAA Privacy Rule, 45 C.F.R. Part 160 and Part 164, Subparts A and E, and the HIPAA Security rule, 45 C.F.R., pt. 164, subpart C.
b. Business Associate. "Business Associate" means the **Sanford Health Plan.**
c. Covered Entity. "Covered Entity" means the **North Dakota Public Employees Retirement System Health Plans**.
d. PHI and ePHI. "PHI" means Protected Health Information; "ePHI" means Electronic Protected Health Information.

2. Obligations of Business Associate.

2.1. The Business Associate agrees:

a. To use or disclose PHI and ePHI only as permitted or required by this Agreement or as Required by Law.
b. To use appropriate safeguards and security measures to prevent use or disclosure of the PHI and ePHI other than as provided for by this Agreement, and to comply with all security requirements of the HIPAA Security rule.
c. To implement administrative, physical, and technical safeguards that reasonably and appropriately protect the confidentiality, integrity, and availability of ePHI that it creates, receives, maintains or transmits on behalf of the Covered Entity as required by the HIPAA Security rule.
d. To mitigate, to the extent practicable, any harmful effect that is known to Business Associate of a use or disclosure of PHI or ePHI by Business Associate in violation of the requirements of this Agreement.
e. To report to Covered Entity (1) any use or disclosure of the PHI not provided for by this Agreement, and (2) any "security incident" as defined in 45 C.F.R. § 164.304 involving ePHI, of which it becomes aware without unreasonable delay and in any case within thirty (30) days from the date after discovery and provide the Covered Entity with a written notification that complies with 45 C.F.R. § 164.410 which shall include the following information:
    i. to the extent possible, the identification of each individual whose Unsecured Protected Health Information has been, or is reasonably believed by the Business Associate to have been, accessed, acquired or disclosed during the breach;
    ii. a brief description of what happened;
    iii. the date of discovery of the breach and date of the breach;
    iv. the nature of the Protected Health Information that was involved;

v. identify of any person who received the non-permitted Protected Health Information;
vi. any steps individuals should take to protect themselves from potential harm resulting from the breach;
vii. a brief description of what the Business Associate is doing to investigate the breach, to mitigate harm to individuals, and to protect against any further breaches; and
viii. any other available information that the Covered Entity is required to include in notification to an individual under 45 C.F.R. § 164.404(c) at the time of the notification to the State required by this subsection or promptly thereafter as information becomes available.

f. With respect to any use or disclosure of Unsecured Protected Health Information not permitted by the Privacy Rule that is caused by the Business Associate's failure to comply with one or more of its obligations under this Agreement, the Business Associate agrees to pay its reasonable share of cost-based fees associated with activities the Covered Entity must undertake to meet its notification obligations under the HIPAA Rules and any other security breach notification laws;
g. Ensure that any agent or subcontractor that creates, receives, maintains, or transmits electronic PHI on behalf of the Business Associate agree to comply with the same restrictions and conditions that apply through this Agreement to the Business Associate.
h. To make available to the Secretary of Health and Human Services the Business Associate's internal practices, books, and records, including policies and procedures relating to the use and disclosure of PHI and ePHI received from, or created or received by Business Associate on behalf of Covered Entity, for the purpose of determining the Covered Entity's compliance with the HIPAA Privacy Rule, subject to any applicable legal privileges.
i. To document the disclosure of PHI related to any disclosure of PHI as would be required for Covered Entity to respond to a request by an Individual for an accounting of disclosures of PHI in accordance with 45 C.F.R. § 164.528.
j. To provide to Covered Entity within 15 days of a written notice from Covered Entity, information necessary to permit the Covered Entity to respond to a request by an Individual for an accounting of disclosures of PHI in accordance with 45 C.F.R. § 164.528.
k. To provide, within 10 days of receiving a written request, information necessary for the Covered Entity to respond to an Individual's request for access to PHI about himself or herself, in the event that PHI in the Business Associate's possession constitutes a Designated Record Set.
l. Make amendments(s) to PHI in a designated record set as directed or agreed by the Covered Entity pursuant to 45 C.F.R. § 164.526 or take other measures as necessary to satisfy the covered entity's obligations under that section of law.

3. Permitted Uses and Disclosures by Business Associate

3.1. General Use and Disclosure Provisions

Except as otherwise limited in this Agreement, Business Associate may Use or Disclose PHI and ePHI to perform functions, activities, or services for, or on behalf of, Covered Entity, provided that such use or disclosure would not violate the Privacy Rule or the Security Rule if done by Covered Entity or the minimum necessary policies and procedures of the Covered Entity.

3.2. Specific Use and Disclosure Provisions

Except as otherwise limited in this Agreement, Business Associate may use PHI and ePHI:

a. For the proper management and administration of the Business Associate, provided that disclosures are Required By Law, or Business Associate obtains reasonable assurances from the person to whom the information is disclosed that it will remain confidential and used or further disclosed only as Required By Law or for the purpose for which it was disclosed to the person, and the person notifies the Business Associate of any instances of which it is aware in which the confidentiality of the information has been breached.
b. To provide Data Aggregation services to Covered Entity as permitted by 45 C.F.R. § 164.504(e)(2)(i)(B), but Business Associate may not disclose the PHI or ePHI of the Covered Entity to any other client of the Business Associate without the written authorization of the covered entity Covered Entity.
c. To report violations of law to appropriate Federal and State authorities, consistent with 45 C.F.R. §§ 164.304 and 164.502(j)(1).

4. Obligations of Covered Entity

4.1. Provisions for Covered Entity to Inform Business Associate of Privacy Practices and Restrictions

Covered Entity shall notify Business Associate of:

a. Any limitation(s) in its notice of privacy practices of Covered Entity in accordance with 45 C.F.R. § 164.520, to the extent that any such limitation may affect Business Associate's use or disclosure of PHI.
b. Any changes in, or revocation of, permission by an Individual to use or disclose PHI, to the extent that any such changes may affect Business Associate's use or disclosure of PHI.
c. Any restriction to the use or disclosure of PHI that Covered Entity has agreed to in accordance with 45 C.F.R. § 164.522, to the extent that any such restriction may affect Business Associate's use or disclosure of PHI.

4.2. Additional Obligations of Covered Entity. Covered Entity agrees that it:

a. Has included, and will include, in the Covered Entity's Notice of Privacy Practices required by the Privacy Rule that the Covered Entity may disclose PHI for Health Care Operations purposes.

b. Has obtained, and will obtain, from Individuals any consents, authorizations and other permissions necessary or required by laws applicable to the Covered Entity for Business Associate and the Covered Entity to fulfill their obligations under the Underlying Agreement and this Agreement.

c. Will promptly notify Business Associate in writing of any restrictions on the Use and Disclosure of PHI about Individuals that the Covered Entity has agreed to that may affect Business Associate's ability to perform its obligations under the Underlying Agreement or this Agreement.

d. Will promptly notify Business Associate in writing of any change in, or revocation of, permission by an Individual to Use or Disclose PHI, if the change or revocation may affect Business Associate's ability to perform its obligations under the Underlying Agreement or this Agreement.

4.2. Permissible Requests by Covered Entity

Covered Entity may not request Business Associate to use or disclose PHI in any manner that would not be permissible under the Privacy Rule or the Security Rule if done by Covered Entity, except that the Business Associate may use or disclose PHI and ePHI for management and administrative activities of Business Associate.

5. Term and Termination

a. Term. The Term of this Agreement shall be effective as of March 3, 2015, and shall terminate when all of the PHI and ePHI provided by Covered Entity to Business Associate, or created or received by Business Associate on behalf of Covered Entity, is destroyed or returned to Covered Entity, or, if it is infeasible to return or destroy PHI and ePHI, protections are extended to any such information, in accordance with the termination provisions in this Section.
b. Automatic Termination. This Agreement will automatically terminate upon the termination or expiration of the Underlying Agreement.
c. Termination for Cause. Upon Covered Entity's knowledge of a material breach by Business Associate, Covered Entity shall either:
    1. Provide an opportunity for Business Associate to cure the breach or end the violation and terminate this Agreement and the Underlying Agreement if Business Associate does not cure the breach or end the violation within the time specified by Covered Entity;
    2. Immediately terminate this Agreement and the Underlying Agreement if Business Associate has breached a material term of this Agreement and cure is not possible; or
    3. If neither termination nor cure is feasible, Covered Entity shall report the violation to the Secretary.
d. Effect of Termination.
    1. Except as provided in paragraph (2) of this subsection, upon termination of this Agreement, for any reason, Business Associate shall return or destroy all PHI received from Covered Entity, or created or received by Business Associate on behalf of Covered Entity. This provision shall apply to PHI and ePHI that is in the possession of subcontractors or agents of Business Associate. Business Associate shall retain no copies of the PHI or ePHI.
    2. In the event that Business Associate determines that returning or destroying the PHI or ePHI is not feasible, Business Associate shall provide to Covered Entity notification of the conditions that make return or destruction infeasible. Upon explicit written agreement of Covered Entity that return or destruction of PHI or ePHI is not feasible, Business

Associate shall extend the protections of this Agreement to that PHI and ePHI and limit further uses and disclosures of any such PHI and ePHI to those purposes that make the return or destruction infeasible, for so long as Business Associate maintains that PHI or ePHI.

6. Miscellaneous

a. Regulatory References. A reference in this Agreement to a section in the HIPAA Privacy or Security Rule means the section as in effect or as amended.
b. Amendment. The Parties agree to take such action as is necessary to amend this Agreement from time to time as is necessary for Covered Entity to comply with the requirements of the Privacy Rule, the Security Rule, and the Health Insurance Portability and Accountability Act of 1996, Pub. L. No. 104-191.
c. Survival. The respective rights and obligations of Business Associate under Section 5.c, related to "Effect of Termination," of this Agreement shall survive the termination of this Agreement.
d. Interpretation. Any ambiguity in this Agreement shall be resolved to permit Covered Entity to comply with the Privacy and Security Rules.
e. No Third Party Beneficiaries. Nothing express or implied in this Agreement is intended to confer, nor shall anything this Agreement confer, upon any person other than the parties and their respective successors or assigns, any rights, remedies, obligations or liabilities whatsoever.
f. Applicable Law and Venue. This Business Associate Agreement is governed by and construed in accordance with the laws of the State of North Dakota. Any action commenced to enforce this Contract must be brought in the District Court of Burleigh County, North Dakota.
g. Business Associate agrees to comply with all the requirements imposed on a business associate under Title XIII of the American Recovery and Reinvestment Act of 2009, the Health Information Technology for Economic and Clinical Health (HI-TECH) Act, and, at the request of NDPERS, to agree to any reasonable modification of this agreement required to conform the agreement to any Model Business Associate Agreement published by the Department of Health and Human Services.

7. Entire Agreement

This Agreement contains all of the agreements and understandings between the parties with respect to the subject matter of this Agreement. No agreement or other understanding in any way modifying the terms of this Agreement will be binding unless made in writing as a modification or amendment to this Agreement and executed by both parties.

IN WITNESS OF THIS, **NDPERS** [CE] and **Sanford Health Plan** [BA] agree to and intend to be legally bound by all terms and conditions set forth above and hereby execute this Agreement as of the effective date set forth above.

For Covered Entity:

Jon Strinden, Board Chairman
ND Public Employees Retirement System

3-05-2015
Date

For Business Associate:

Ruth A. Krystopolski
Signature

Ruth A. Krystopolski
Printed Name

President
Title

3/5/15
Date

North Dakota Public Employees Retirement System

July 1, 2015 through June 30, 2017

Amendment to Administrative Service Agreement

This Amendment to Administrative Service Agreement (this "Amendment") is entered into effective as of July 1, 2015 (the "Effective Date"), by and among the State of North Dakota, acting through its Public Employees Retirement System ("the Plan Sponsor"), the North Dakota Public Employees Retirement System (NDPERS) ("the Plan Administrator") and Sanford Health Plan, a South Dakota nonprofit corporation ("SHP").

WHEREAS, the parties entered into an Administrative Services Agreement to administer a fully insured group health plan (hereinafter "Agreement") effective July 1, 2015; and

WHEREAS, the parties now desire to amend the Agreement pursuant to Sections 6.7, 11.2, and 11.3 of the Agreement and N.D.C.C. §§54-52-04(7) and (12), and 54-52.1-08, as set forth below.

NOW, THEREFORE, it is mutually agreed by and among the parties that the Agreement is amended as follows:

1. Section 4 relating to NDPERS responsibilities, is amended to include the following section:

> 4.13 Direct Member appeals regarding the infertility services deductible to the attention of the Public Employees Retirement Board (the "Board") to be resolved in a manner consistent with N.D.A.C. § 71-03-05-05, and removed from the Internal Appeal Procedure of SHP as set forth in Exhibit A to the Agreement. NDPERS must promptly report the result of an appeal process described herein to SHP and authorize SHP to reimburse the Member subject of the appeal in the amount authorized by the Board, if any.

2. Section 7.3, subparts 11 and 12, relating to the Final Accounting, are hereby deleted in their entirety and the following inserted in lieu thereof:

> 11. If 1+2-3-4-5-6-7-8-9(-/+10) of 7.3 is positive, the lesser of 50% of this amount or $1.5 million is retained by SHP. The remainder equals Refund paid to NDPERS, less a credit for member benefit adjustments approved by the Board under Section 4.13, if any.
>
> 12. If 1+2-3-4-5-6-7-8-9 (-/+10) of 7.3 is negative, the lesser of 50% of this amount or $3.0 million will be refunded by NDPERS to SHP, plus a credit for member benefit adjustments approved by the Board under Section 4.13, if any.

3. Section 7.4, subparts 10 and 11, relating to the Final Accounting, are hereby deleted in their entirety and the following inserted in lieu thereof:

> 10. If 1+2-3-4-5-6-7-8(-/+9) of 7.4 is positive, the lesser of 50% of this amount or $1.5 million is retained by SHP. The remainder equals Refund paid to NDPERS, reduced by

member benefit adjustments approved by the Board under Section 4.13, if any. If applicable, the final settlement amount will be net of initial settlement payments.

11. If 1+2-3-4-5-6-7-8(-/+9) of 7.4 is negative, the lesser of 50% of this amount or $3.0 million will be refunded by NDPERS to SHP, reduced by member benefit adjustments approved by the Board under Section 4.13, if any. If applicable, the final settlement amount will be net of initial settlement payments.

4. Exhibit D is hereby replaced in its entirety with the attached Exhibit D.

5. Except as expressly modified by this Amendment, all other terms and conditions of the Agreement will remain in full force and effect.

IN WITNESS WHEREOF, the parties have executed this Amendment as of March ___, 2016.

NORTH DAKOTA PUBLIC EMPLOYEES RETIREMENT SYSTEM (PLAN ADMINISTRATOR)
PO Box 1657
Bismarck, North Dakota 58502
By: _____
Title: Chairman
Date: 3-21-2016

SANFORD HEALTH PLAN
300 Cherapa Place, Suite 201
Sioux Falls, SD 67103
By: _____
Title: President
Date: 3/21/16

NORTH DAKOTA PUBLIC EMPLOYEES RETIREMENT SYSTEM (PLAN SPONSOR)
PO Box 1657
Bismarck, North Dakota 58502
By: _____
Title: Chairman
Date: 3-21-2016

SANFORD HEALTH PLAN

North Dakota Public Employees Retirement System Grandfathered Dakota Plan

Summary of Benefits and Coverage: What this Plan Covers & What it Costs

Coverage Period: 07/01/15 – 06/30/17
Coverage for: Single, Family
Plan Type: PPO | Grandfathered

This is only a summary. If you want more detail about your coverage and costs, you can get the complete terms in the policy at www.sanfordhealthplan.com/ndpers or by calling **1-800-499-3416** *(toll-free)* | TTY/TDD: **1-877-652-1844** *(toll-free)*.

Important Questions	Answers	Why this Matters:
What is the overall deductible?	For in-network providers: **$400** person / **$1,200** family For out-of-network providers: **$400** person / **$1,200** family Doesn't apply to preventive care or prescription drugs. Copays and coinsurance do not apply to the deductible.	You must pay all the costs up to the **deductible** amount before this plan begins to pay for covered services you use. Check your policy to see when the **deductible** starts over (usually, but not always, January 1st). See the chart starting on page 2 for how much you pay for covered services after you meet the **deductible**.
Are there other deductibles for specific services?	Yes. **$500** for infertility services. There are no other specific **deductibles**.	You must pay all of the costs for these services up to the specific **deductible** amount before this plan begins to pay for these services.
Is there an out-of-pocket limit on my expenses?	For in-network providers: **$1,150** person / **$2,700** family For out-of-network providers: **$1,650** person / **$3,700** family	The **out-of-pocket limit** is the most you could pay during a coverage period (annually/usually one year) for your share of the cost of covered services. This limit helps you plan for health care expenses.
What is not included in the out-of-pocket limit?	Premiums, balance-billed charges, infertility services, copayments, and health care this plan doesn't cover.	Even though you pay these expenses, they don't count toward the **out-of-pocket limit**.
Is there an overall annual limit on what the plan pays?	No.	The chart starting on page 2 describes any limits on what the plan will pay for *specific* covered services, such as office visits.
Does this plan use a network of providers?	Yes. See **www.sanfordhealthplan.com/ndpers or call 1-800-499-3416** *(toll-free)* for a list of participating providers.	If you use an in-network doctor or other health care **provider**, this plan will pay some or all of the costs of covered services. Be aware, your in-network doctor or hospital may use an out-of-network **provider** for some services. Plans use the term in-network, **preferred**, or **participating** for **providers** in their **network**. See the chart starting on page 2 for how this plan pays different kinds of **providers**.
Do I need a referral to see a specialist?	No. You don't need a referral to see a **participating** specialist.	You can see the **participating specialist** you choose without permission from this plan.
Are there services this plan doesn't cover?	Yes.	Some of the services this plan doesn't cover are listed on page 4. See your policy for additional information about **excluded services**.

Questions: Call 1-800-499-3416 *(toll-free)* or visit us at **www.sanfordhealthplan.com/ndpers.** If you aren't clear about any of the bolded terms used in this form, see the Glossary. You can view the Glossary at **www.dol.gov/ebsa/pdf/SBCUniformGlossary.pdf** or call 1-800-499-3416 to request a copy.

North Dakota Public Employees Retirement System

HP-0491 7-15 NDPERS GF

- **Copayments** are fixed dollar amounts (for example, $15) you pay for covered health care, usually when you receive the service.
- **Coinsurance** is *your* share of the costs of a covered service, calculated as a percent of the **allowed amount** for the service. For example, if the Plan's **allowed amount** for an overnight hospital stay is $1,000; your **coinsurance** payment of 20% would be $200. This may change if you haven't met your **deductible**.
- The amount the plan pays for covered services is based on the **allowed amount**. If an out-of-network **provider** charges more than the **allowed amount**, you may have to pay the difference. For example, if an out-of-network hospital charges $1,500 for an overnight stay and the **allowed amount** is $1,000; you may have to pay the $500 difference. (This is called **balance billing**.)
- This plan may encourage you to use **participating providers** by charging you lower **deductibles**, **copayments** and **coinsurance** amounts.

Common Medical Event	Services You May Need	Your cost if you use Basic Plan After Deductible	Your cost if you use PPO Plan After Deductible	Limitations & Exceptions
If you visit a health care provider's office or clinic	Primary care to treat an injury or illness	$30 copay/visit	$25 copay/visit	Deductible is waived.
	Chiropractic care			Deductible is waived.
	Office visit	$30 copay/visit	$25 copay/visit	Includes chiropractic consult and manual manipulations.
	Ancillary services	25% coinsurance	20% coinsurance	Includes but not limited to x-rays, labs, ultrasounds and rehabilitative therapy.
	Specialist visit	$30 copay/visit	$25 copay/visit	Deductible is waived.
	Other practitioner office visit	$30 copay/visit	$25 copay/visit	Deductible is waived.
	Preventive care/screening	$30 copay/related office visit. No charge for other services.	$25 copay/related office visit. No charge for other services.	Deductible is waived. 25% coinsurance for prostate cancer screening out-of-network and 20% coinsurance for prostate cancer screening in-network.
	Immunizations	No charge	No charge	
If you have a test	Diagnostic test (x-ray, blood work)	25% coinsurance	20% coinsurance	——————none——————
	Imaging (CT/PET scans, MRIs)	25% coinsurance	20% coinsurance	——————none——————

Common Medical Event	Services You May Need	Your cost if you use Basic Plan After Deductible	Your cost if you use PPO Plan After Deductible	Limitations & Exceptions
If you need drugs to treat your illness or condition More information about prescription drug coverage is available at sanfordhealthplan.com/ndpers	Generic Formulary Drugs	$5 copay/ prescription, then 15% coinsurance	$5 copay/ prescription; then 15% coinsurance	Covers up to a 34 day supply. Two copays for a 35-100 day supply. $1,000 coinsurance maximum per person per benefit period. Refer to your Formulary to determine which benefit applies to your medication.
	Brand Name Formulary Drugs	$20 copay/ prescription, then 25% coinsurance	$20 copay/ prescription; then 25% coinsurance	
	Non-Formulary Drugs	$25 copay/ prescription, then 50% coinsurance	$25 copay/ prescription; then 50% coinsurance	Covers up to a 34 day supply. Two copays for a 35-100 day supply.
If you have outpatient surgery	Facility fee (e.g., ambulatory surgery center)	25% coinsurance	20% coinsurance	These services require preauthorization/prior approval by the Health Plan.
	Physician/surgeon fees	25% coinsurance	20% coinsurance	————————none————————
If you need immediate medical attention	Emergency room services	$50 copay/visit, then 20% coinsurance	$50 copay/visit, then 20% coinsurance	Copay waived if directly admitted.
	Emergency medical transportation	20% coinsurance	20% coinsurance	
	Urgent care	$25 copay/visit	$25 copay/visit	Deductible is waived.
If you have a hospital stay	Facility fee (e.g., hospital room)	25% coinsurance	20% coinsurance	These services require preauthorization/prior approval by the Health Plan.
	Physician/surgeon fee	25% coinsurance	20% coinsurance	————————none————————

Common Medical Event	Services You May Need	Your cost if you use Basic Plan After Deductible	Your cost if you use PPO Plan After Deductible	Limitations & Exceptions
If you have mental/behavioral health, or substance abuse needs	Mental/Behavioral health outpatient services Office visit All other services	 $30 copay/visit 20% coinsurance	 $25 copay/visit 20% coinsurance	For outpatient treatment services, the first five (5) hours in a calendar year will be covered at 100% (no charge). For full details, please refer to your Policy.
	Mental/Behavioral health inpatient services	25% coinsurance	20% coinsurance	These services require preauthorization/prior approval by the Health Plan. For full details, please refer to your Policy.
	Substance use disorder outpatient services Office visit All other services	 $30 copay/visit 20% coinsurance	 $25 copay/visit 20% coinsurance	For outpatient treatment services, the first five (5) visits in a calendar year will be covered at 100% (no charge). For full details, please refer to your Policy.
	Substance use disorder inpatient services	25% coinsurance	20% coinsurance	These services require preauthorization/prior approval by the Health Plan. For full details, please refer to your Policy.
If you are pregnant	Prenatal and postnatal care	25% coinsurance	20% coinsurance	Deductible is waived.
	Delivery and all inpatient services	25% coinsurance	20% coinsurance	Deductible is waived for delivery services received from a PPO health care provider when a Member is enrolled in the Healthy Pregnancy Program.
If you need help recovering or have other special health needs	Home health care	25% coinsurance	20% coinsurance	These services require preauthorization/prior approval by the Health Plan.
	Rehabilitation services	$25 copay/visit, then 25% coinsurance	$20 copay/visit, then 20% coinsurance	Deductible is waived.
	Habilitation services	$25 copay/visit, then 25% coinsurance	$20 copay/visit, then 20% coinsurance	Deductible is waived.

Common Medical Event	Services You May Need	Your cost if you use Basic Plan After Deductible	PPO Plan After Deductible	Limitations & Exceptions
If you need help recovering or have other special health needs (continued)	Skilled nursing care	25% coinsurance	20% coinsurance	These services require preauthorization/prior approval by the Health Plan.
	Durable medical equipment	25% coinsurance	20% coinsurance	These services require preauthorization/prior approval by the Health Plan.
	Hospice service	25% coinsurance	20% coinsurance	These services require preauthorization/prior approval by the Health Plan.
If your child needs dental or eye care	Routine eye exam	Not covered	Not covered	——————none——————
	Glasses	Not covered	Not covered	——————none——————
	Routine dental check-up	Not covered	Not covered	——————none——————

Excluded Services & Other Covered Services:

Services Your Plan Does NOT Cover (This isn't a complete list. Check your policy or plan document for other excluded services.)

- Acupuncture
- Cosmetic surgery
- Dental care (Adult)
- Hearing aids (unless for Members under age 18)
- Long-term care
- Pediatric dental and vision care
- Routine eye care (Adult)
- Weight loss programs

Other Covered Services (This isn't a complete list. Check your policy or plan document for other covered services and your costs for these services.)

- Bariatric surgery
- Chiropractic care
- Coverage provided outside the United States. For full details, please refer to your Policy or see www.sanfordhealth.com/ndpers
- Infertility treatment; $20,000 lifetime maximum
- Private-duty nursing
- Routine foot care (for diabetics only)

Your Rights to Continue Coverage:

If you lose coverage under the plan, then, depending upon the circumstances, Federal and State laws may provide protections that allow you to keep health coverage. Any such rights may be limited in duration and will require you to pay a **premium**, which may be significantly higher than the premium you pay while covered under the plan. Other limitations on your right to continue coverage may also apply.

For more information on your rights to continue coverage, contact the Plan toll-free at (800) 499-3416. You may also contact your state insurance department, the U.S. Department of Labor, Employee Benefits Security Administration at (866) 444-3272 or www.dol.gov/ebsa, or the U.S. Department of Health and Human Services at (877) 267-2323 x61565 or www.cciio.cms.gov.

Your Grievance and Appeals Rights:

If you have a complaint or are dissatisfied with a denial of coverage for claims under your Plan, you may be able to **appeal** or file a **grievance**. For questions about your rights, this notice, or assistance, you can contact:

- Sanford Health Plan/Member Services toll-free at (800) 499-3416
- The U.S. Department of Labor, Employee Benefits Security Administration at (866) 444-3272 *(toll-free)* or www.dol.gov/ebsa
- North Dakota Insurance Department at (800) 247-0560 *(toll-free)* or www.nd.gov/ndins/contact

Does this Coverage Provide Minimum Essential Coverage?

The Affordable Care Act requires most people to have health care coverage that qualifies as "minimum essential coverage." **This plan does provide minimum essential coverage.**

Does this Coverage Meet the Minimum Value Standard?

The Affordable Care Act establishes a minimum value standard of benefits of a health plan. The minimum value standard is 60% (actuarial value). **This health coverage does meet the minimum value standard for the benefits it provides.**

Language Access Services:

Spanish (Español): Para obtener asistencia en Español, llame al 1-800-892-0675 *(toll-free)*.

Tagalog (Tagalog): Kung kailangan ninyo ang tulong sa Tagalog tumawag sa 1-800-892-0675 *(toll-free)*.

Chinese (中文): 如果需要中文的帮助，请拨打这个号码 1-800-892-0675 *(toll-free)*.

Navajo (Dine): Dinek'ehgo shika at'ohwol ninisingo, kwiijigo holne' 1-800-892-0675 *(toll-free)*.

To see examples of how this plan might cover costs for a sample medical situation, see the next page.

About these Coverage Examples:

These examples show how this plan might cover medical care in given situations. Use these examples to see, in general, how much financial protection a sample patient might get if they are covered under different plans.

This is not a cost estimator.

Don't use these examples to estimate your actual costs under this plan. The actual care you receive will be different from these examples, and the cost of that care will also be different.

See the next page for important information about these examples.

Having a baby
(normal delivery)

- **Amount owed to providers:** $7,540
- **Plan pays** $6,200
- **Patient pays** $1,340

Sample care costs:

Hospital charges (mother)	$2,700
Routine obstetric care	$2,100
Hospital charges (baby)	$900
Anesthesia	$900
Laboratory tests	$500
Prescriptions	$200
Radiology	$200
Vaccines, other preventive	$40
Total	**$7,540**

Patient pays:

Deductibles	$0
Copays	$10
Coinsurance	$1,300
Limits or exclusions	$30
Total	**$1,340**

Note: These numbers assume the patient has enrolled in the Plan's Health Pregnancy Program. If you are pregnant, and have not given notice of your pregnancy to the Plan, your costs may be higher. For more information, please contact Sanford Health Plan at 1-888-315-0885 *(toll-free)* | TTY/TDD: 1-877-652-1844 *(toll-free)*.

Managing type 2 diabetes
(routine maintenance of a well-controlled condition)

- **Amount owed to providers:** $5,400
- **Plan pays** $4,520
- **Patient pays** $880

Sample care costs:

Prescriptions	$2,900
Medical Equipment and Supplies	$1,300
Office Visits and Procedures	$700
Education	$300
Laboratory tests	$100
Vaccines, other preventive	$100
Total	**$5,400**

Patient pays:

Deductibles	$400
Copays	$400
Coinsurance	$0
Limits or exclusions	$80
Total	**$880**

Note: These examples do not reflect cost sharing for any Consumer Driven Health Plan such as HRA, HSA, FSA or any wellness program.

Questions and answers about the Coverage Examples:

What are some of the assumptions behind the Coverage Examples?

- Costs don't include **premiums**.
- Sample care costs are based on national averages supplied by the U.S. Department of Health and Human Services, and aren't specific to a particular geographic area or health plan.
- The patient's condition was not an excluded or preexisting condition.
- All services and treatments started and ended in the same coverage period.
- There are no other medical expenses for any member covered under this plan.
- Out-of-pocket expenses are based only on treating the condition in the example.
- The patient received all care from in-network **providers**. If the patient had received care from out-of-network **providers**, costs would have been higher.

What does a Coverage Example show?

For each treatment situation, the Coverage Example helps you see how **deductibles**, **copayments**, and **coinsurance** can add up. It also helps you see what expenses might be left up to you to pay because the service or treatment isn't covered or payment is limited.

Does the Coverage Example predict my own care needs?

✘ **No.** Treatments shown are just examples. The care you would receive for this condition could be different based on your doctor's advice, your age, how serious your condition is, and many other factors.

Does the Coverage Example predict my future expenses?

✘ **No.** Coverage Examples are **not** cost estimators. You can't use the examples to estimate costs for an actual condition. They are for comparative purposes only. Your own costs will be different depending on the care you receive, the prices your **providers** charge, and the reimbursement your health plan allows.

Can I use Coverage Examples to compare plans?

✓ **Yes.** When you look at the Summary of Benefits and Coverage for other plans, you'll find the same Coverage Examples. When you compare plans, check the "Patient Pays" box in each example. The smaller that number, the more coverage the plan provides.

Are there other costs I should consider when comparing plans?

✓ **Yes.** An important cost is the **premium** you pay. Generally, the lower your **premium**, the more you'll pay in out-of-pocket costs, such as **copayments**, **deductibles**, and **coinsurance**. You should also consider contributions to accounts such as health savings accounts (HSAs), flexible spending arrangements (FSAs) or health reimbursement accounts (HRAs) that help you pay out-of-pocket expenses.

Questions: Call 1-800-499-3416 *(toll-free)* or visit us at **www.sanfordhealthplan.com/ndpers**. If you aren't clear about any of the bolded terms used in this form, see the Glossary. You can view the Glossary at **www.dol.gov/ebsa/pdf/SBCUniformGlossary.pdf** or call 1-800-499-3416 to request a copy.

North Dakota Public Employees Retirement System | SANFORD HEALTH PLAN

North Dakota Public Employees Retirement System (NDPERS)

Certificate of Insurance

Dakota Plan Grandfathered PPO/Basic

Plan on the best fit.

North Dakota Public Employees Retirement System
Dakota Plan Health Benefits

SANFORD HEALTH PLAN

Notice

Your employer has established an employee welfare benefit plan for Eligible Employees and their Eligible Dependents. The following Summary Plan Description/Certificate of Insurance (Certificate) is provided to you in accordance with the Employee Retirement Income Security Act of 1974. Every attempt has been made to provide concise and accurate information.

This COI and the NDPERS Service Agreement are the official benefit plan documents for the employee welfare benefit plan established by the Plan Administrator. In case of conflict between this Certificate of Insurance/Summary Plan Description and the NDPERS Service Agreement, the provisions of the NDPERS Service Agreement will control.

Although it is the intention of the Plan Administrator to continue the employee welfare benefit plan for an indefinite period of time, the Plan Administrator reserves the right, whether in an individual case or in general, to eliminate the Benefit Plan.

Sanford Health Plan shall construe and interpret the provisions of the Service Agreement, the Certificate and related documents, including doubtful or disputed terms; and to conduct any and all reviews of claims denied in whole or in part. NDPERS shall determine all questions of eligibility.

Plan Name

North Dakota Public Employees Retirement System Dakota Plan

Name and Address of Employer (Plan Sponsor)

North Dakota Public Employees Retirement System
400 East Broadway, Suite 505
PO Box 1657
Bismarck, ND 58502

Plan Sponsor's IRS Employer Identification Number

45-0282090

Plan Number Assigned By the Plan Sponsor

N/A

Type of Welfare Plan

Health

Type of Administration

This employee welfare benefit plan is fully insured by Sanford Health Plan and issued by Sanford Health Plan. Sanford Health Plan is the Claims Administrator for this employee welfare benefit plan.

Name and Address of Sanford Health Plan

Sanford Health Plan
300 Cherapa Place, Suite 201
Sioux Falls, SD 57103
(877) 305-5463 *(toll-free)*
TTY/TDD: (877) 652-1844 *(toll-free)*

Plan Administrator's Name, Business Address and Business Telephone Number

North Dakota Public Employees Retirement System
400 East Broadway, Suite 505
PO Box 1657
Bismarck, ND 58502
(701) 328-3900

Name and Address of Agent for Service of Legal Process

Plan Administrator	Sanford Health Plan
North Dakota Public Employees Retirement System Sparb Collins, Executive Director 400 East Broadway, Suite 505 PO Box 1657 Bismarck, ND 58502	Sanford Health Plan ATTN: President 300 Cherapa Place, Suite 201 PO Box 91110 Sioux Falls, SD 57109-1110

Service of legal process may be made upon a Plan trustee or the Plan Administrator.

Title of Employees Authorized To Receive Protected Health Information

- Administrative Services Division
- Accounting & IT Division
- Accounting Division
- Benefit Programs Division
- Benefit Program Development & Research
- Executive Director
- Internal Audit Division

This includes every employee, class of employees, or other workforce person under control of the Plan Sponsor who may receive the Member's Protected Health Information relating to payment under, health care operations of, or other matters pertaining to the Benefit Plan in the ordinary course of business.

These identified individuals will have access to the Member's Protected Health Information only to perform the plan administrative functions the Plan Sponsor provides to the Benefit Plan. Such individuals will be subject to disciplinary action for any use or disclosure of the Member's Protected Health Information in breach or in violation of, or noncompliance with, the privacy provisions of the Benefit Plan. The Plan Sponsor shall promptly report any such breach, violation, or noncompliance to the Plan Administrator; will cooperate with the Plan Administrator to correct the breach, violation and noncompliance to impose appropriate disciplinary action on each employee or other workforce person causing the breach, violation, or noncompliance; and will mitigate any harmful effect of the breach, violation, or noncompliance on any Member whose privacy may have been compromised.

Statement of Eligibility to Receive Benefits

As provided in N.D.C.C. §54-52.1-01(4), individuals eligible to receive benefits are every permanent employee who is employed by a governmental unit, as that term is defined in N.D.C.C. §54-52-01, whose services are not limited in duration, who is filling an approved and regularly funded position in a governmental unit, and who is employed at least seventeen and one-half hours per week and at least five months each year or for those first employed after August 1,2003, is employed at least twenty hours per week and at least twenty weeks each year of employment. An eligible employee includes members of the Legislative Assembly, judges of the Supreme Court, paid members of state or political subdivision boards, commissions, or associations, full-time employees of political subdivisions, elective state officers as defined by N.D.C.C. §54-06-01(2), and disabled permanent employees who are receiving compensation from the North Dakota workforce safety and insurance fund.

A temporary employee employed before August 1, 2007, may elect to participate in the uniform group insurance program by completing the necessary enrollment forms and qualifying under the medical underwriting requirements of the program if such election is made before January 1, 2015, and if the temporary employee is participating in the uniform group insurance program on January 1, 2015. In order for a temporary employee employed after July 31, 2007, to qualify to participate in the uniform group insurance program, the employee must be employed at least twenty hours per week; must be employed at least twenty weeks each year of employment; must make the election to participate before January 1, 2015; and must be participating in the uniform group insurance program as of January 1, 2015. To be eligible to participate in the uniform group insurance program, a temporary employee first employed after December 31, 2014, or any temporary employee not participating in the uniform group insurance program as of January 1, 2015, must meet the definition of a full-time employee under §4980H(c)(4) of the Internal Revenue Code [26 U.S.C. 4980H(c)(4)].

An eligible employee is entitled to coverage the first of the month following the month of employment, provided the employee submits an application for coverage within the first 31 days of employment or eligibility for a special enrollment period as set forth in N.D.A.C. §71-03-03. Each eligible employee may elect to enroll his/her Eligible Dependents.

Eligible employees also include non-Medicare eligible retired and terminated employees, and their Eligible Dependents, who remain eligible to participate in the uniform group insurance program pursuant to applicable state law, as provided in N.D.C.C. §54-52.1-03 and federal regulations. For a comprehensive description of eligibility, refer to the NDPERS web site at www.nd.gov/ndpers.

Eligibility to receive benefits under the Benefit Plan is initially determined by the Plan Administrator. When an eligible employee meets the criteria for eligibility, a membership application must be completed. NDPERS has the ultimate decision making authority regarding eligibility to receive benefits.

Description of Benefits

See the Schedule of Benefits in Section 1 and the Covered Services in Section 5. Refer to the Table of Contents for page numbers.

Sources of Premium Contributions to the Plan and the Method by Which the Amount of Contribution Is Calculated

The contributions for single or family for state employees are paid at 100% by the State.

The contributions for employees of participating political subdivisions are at the discretion of the subdivision and subject to the minimum contribution requirements and participation requirements of Sanford Health Plan. Either the contributions for temporary employees are at their own expense or their employer may pay the premium subject to its budget authority.

End of the Year Date for Purposes of Maintaining the Plan's Fiscal Records

June 30

Clerical Error

Any clerical error by either the Plan or Claims Administrators, or the aforementioned entities' designees, in keeping pertinent records or a delay in making any changes will not invalidate coverage otherwise validly in force or continue coverage validly terminated. An equitable adjustment of contributions will be made when the error or delay is discovered.

If, due to a clerical error, an overpayment occurs in a Plan reimbursement amount, Sanford Health Plan and NDPERS retain contractual rights to the overpayment. The person or institution receiving the overpayment will be required to return the incorrect amount of money.

Recovery of Benefit Payments

Pursuant to N.D.A.C. §71-03-05-06, whenever benefits are paid in noncompliance with the Contract, NDPERS, which is the Plan Administrator, or an agent of the Plan Administrator, retains the right to recover the payments from the party responsible.

If Sanford Health Plan, which is the Claims Administrator and Payor, or an agent of Sanford Health Plan, is at fault, the amount of overpayment will be withheld from the administrative fees paid by NDPERS.

If overpayments are made because of false or misleading information provided by a Member, Sanford Health Plan, or an agent of Sanford Health Plan, shall attempt to recover the amount. Any moneys recovered shall be credited to NDPERS.

If an overpayment is made because of a mistake or deliberate act by a Health Care Provider, Sanford Health Plan shall collect the money from the Provider and credit that amount to NDPERS.

If fraud is suspected, Sanford Health Plan shall inform NDPERS and NDPERS may turn the evidence over to the North Dakota State's Attorney or Attorney General's office for possible prosecution.

Amending and Terminating this Benefit Plan

As Plan Administrator, NDPERS has delegated responsibility for determinations regarding covered benefits, and the amount and manner of the payment of benefits, including the appeal of denied claims, to Sanford Health Plan, the insurer of the plan.

NDPERS reserves the right to terminate the plan, or amend or eliminate benefits under the North Dakota Public Employees Retirement System Dakota Plan, as insured and issued by Sanford Health Plan, at any time and at its discretion, upon mutual agreement between NDPERS and Sanford Health Plan. Should this Benefit Plan be amended or terminated, such action shall be by a written instrument duly adopted by both NDPERS and Sanford Health Plan, or the aforementioned entities' designees.

Summary Notice and Important Phone Numbers

This Certificate describes in detail your Employer's health care Benefit Plan and governs the Plan's coverage. This Certificate, any amendments, and related documents comprise the entire Plan between the Employer and the Claims Administrator.

A thorough understanding of your coverage will enable you to use your benefits wisely. Please read this Certificate carefully. If you have any questions about the benefits, please contact Sanford Health Plan's Member Services.

This Certificate describes in detail the Covered Services provisions and other terms and conditions of the Plan.

Physical Address	**Mailing Address**
Sanford Health Plan 300 Cherapa Place, Suite 201 Sioux Falls, SD 57103	Sanford Health Plan PO Box 91110 Sioux Falls, SD 57109-1110
Member Services	**Preauthorization/Prior Approval**
(800) 499-3416 *(toll-free)* or TTY/TDD: (877) 652-1844 *(toll-free)*	The Hospital, your Provider, or you should call *(toll-free)*: (888) 315-0885 or TTY/TDD: (877) 652-1844
Sanford Health Plan Physician Locator	**Website**
If you need to locate a provider in your area, call *(toll-free)*: (800) 499-3416 or TTY/TDD: (877) 652-1844	www.sanfordhealthplan.com/ndpers

Notice of Privacy Practices

THIS NOTICE DESCRIBES HOW HEALTH INFORMATION ABOUT YOU MAY BE USED AND DISCLOSED AND HOW YOU CAN GET ACCESS TO THIS INFORMATION. PLEASE REVIEW IT CAREFULLY.

This Notice applies to Sanford Health Plan. If you have questions about this Notice, please contact Member Services at (800) 499-3416 *(toll-free)* | TTY/TDD (877) 652-1844 *(toll-free)*. You may also email your questions to memberservices@sanfordhealth.org.

This Notice describes how we will use and disclose your health information. The terms of this Notice apply to all health information generated or received by Sanford Health Plan, whether recorded in our business records, your medical record, billing invoices, paper forms, or in other ways.

HOW WE USE AND DISCLOSE YOUR HEALTH INFORMATION

We use or disclose your health information as follows (In Minnesota we will obtain your prior consent):

- **Help manage the health care treatment you receive:** We can use your health information and share it with professionals who are treating you. For example, a doctor may send us information about your diagnosis and treatment plan so we can arrange additional services.
- **Pay for your health services:** We can use and disclose your health information as we pay for your health services. For example, we share information about you with your primary care Practitioner and/or Provider to coordinate payment for those services.
- **For our health care operations:** We may use and share your health information for our day-to-day operations, to improve our services, and contact you when necessary. For example, we use health information about you to develop better services for you. We are not allowed to use genetic information to decide whether we will give you coverage and the price of that coverage. This does not apply to long-term care plans.
- **Administer your plan:** We may disclose your health information to your health plan sponsor for plan administration. For example, your company contracts with us to provide a health plan, and we provide your company with certain statistics to explain the premiums we charge.

We may share your health information in the following situations unless you tell us otherwise. If you are not able to tell us your preference, we may go ahead and share your information if we believe it is in your best interest or needed to lessen a serious and imminent threat to health or safety:

- **Friends and Family:** We may disclose to your family and close personal friends any health information directly related to that person's involvement in payment for your care.
- **Disaster Relief:** We may disclose your health information to disaster relief organizations in an emergency.

We may also use and share your health information for other reasons without your prior consent:

- **When required by law:** We will share information about you if state or federal law require it, including with the Department of Health and Human services if it wants to see that we're complying with federal privacy law.
- **For public health and safety:** We can share information in certain situations to help prevent disease, assist with product recalls, report adverse reactions to medications, and to prevent or reduce a serious threat to anyone's health or safety.
- **Organ and tissue donation:** We can share information about you with organ procurement organizations.
- **Medical examiner or funeral director:** We can share information with a coroner, medical examiner, or funeral director when an individual dies.
- **Workers' compensation and other government requests:** We can share information to employers for workers' compensation claims. Information may also be shared with health oversight agencies when authorized by law, and other special government functions such as military, national security and presidential protective services.
- **Law enforcement:** We may share information for law enforcement purposes. This includes sharing information to help locate a suspect, fugitive, missing person or witness.
- **Lawsuits and legal actions:** We may share information about you in response to a court or administrative order, or in response to a subpoena.
- **Research:** We can use or share your information for certain research projects that have been evaluated and approved through a process that considers a patient's need for privacy.

We may contact you in the following situations:

- **Treatment options:** To provide information about treatment alternatives or other health related benefits or Sanford Health Plan services that may be of interest to you.
- **Fundraising:** We may contact you about fundraising activities, but you can tell us not to contact you again.

YOUR RIGHTS THAT APPLY TO YOUR HEALTH INFORMATION

When it comes to your health information, you have certain rights.

- **Get a copy of your health and claims records:** You can ask to see or get a paper or electronic copy of your health and claims records and other health information we have about you. We will provide a copy or summary to you usually within 30 days of your request. We may charge a reasonable, cost-based fee.
- **Ask us to correct your health and claims records:** You can ask us to correct health information that you think is incorrect or incomplete. We may deny your request, but we'll tell you why in writing. These requests should be submitted in writing to the contact listed below.

- **Request confidential communications:** You can ask us to contact you in a specific way (for example, home or office phone) or to send mail to a different address. Reasonable requests will be approved. We must say "yes" if you tell us you would be in danger if we do not.
- **Ask us to limit what we use or share:** You can ask us to restrict how we share your health information for treatment, payment, or our operations. We are not required to agree to your request, and we may say "no" if it would affect your care. If you are not able to tell us your preference, for example if you are unconscious, we may go ahead and share your information if we believe it is in your best interest. We may also share your information when needed to lessen a serious and imminent threat to health or safety.
- **Get a list of those with whom we've shared information:** You can ask for a list (accounting) of the times we've shared your health information for six (6) years prior, who we've shared it with, and why. We will include all disclosures except for those about your treatment, payment, and our health care operations, and certain other disclosures (such as those you asked us to make). We will provide one (1) accounting a year for free, but we will charge a reasonable cost-based fee if you ask for another within twelve (12) months.
- **Get a copy of this privacy notice:** You can ask for a paper copy of this Notice at any time, even if you have agreed to receive it electronically. We will provide you with a paper copy promptly.
- **Choose someone to act for you:** If you have given someone medical power of attorney or if someone is your legal guardian, that person can exercise your rights and make choices about your health information. We will make sure the person has this authority and can act for you before we take any action.
- **File a complaint if you feel your rights are violated:** You can complain to the U.S. Department of Health and Human Services Office for Civil Rights if you feel we have violated your rights. We can provide you with their address. You can also file a complaint with us by using the contact information below. We will not retaliate against you for filing a complaint.

  Contact Information:
  Sanford Health Plan
  ATTN: NDPERS/Member Services
  PO Box 91110
  Sioux Falls, SD 57109-1110
  Phone: (800) 499-3416 *(toll-free)*
  TTY/TDD: (877) 652-1844 *(toll-free)*

OUR RESPONSIBILITIES REGARDING YOUR HEALTH INFORMATION

- We are required by law to maintain the privacy and security of your health information.
- We will let you know promptly if a breach occurs that may have compromised the privacy or security of your health information.
- We must follow the duties and privacy practices described in this Notice and offer to give you a copy.
- We will not use, share, or sell your information for marketing or any purpose other than as described in this Notice unless you tell us to in writing. You may change your mind at any time by letting us know in writing.

CHANGES TO THIS NOTICE

We may change the terms of this Notice, and the changes will apply to all information we have about you. The new Notice will be available upon request and on our website www.sanfordhealthplan.com/ndpers.

EFFECTIVE DATE

This Notice of Privacy Practices is effective September 23, 2013.

NOTICE OF ORGANIZED HEALTH CARE ARRANGEMENT FOR Sanford Health Plan

Sanford Health Plan and Sanford Health Plan of Minnesota have agreed, as permitted by law, to share your health information among themselves for the purposes of treatment, payment, or health care operations. This notice is being provided to you as a supplement to the above Notice of Privacy Practices.

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Introduction

Member Rights

The Plan is committed to treating Members in a manner that respects their rights. In this regard, the Plan recognizes that each Member (or the Member's parent, legal guardian or other representative if the Member is a minor or incompetent) has the right to the following:

1. Members have the right to receive impartial access to treatment and/or accommodations that are available or medically indicated, regardless of race; ethnicity; national origin; gender; age; sexual orientation; medical condition, including current or past history of a mental health and/or substance use disorder; disability; religious beliefs; or sources of payment for care.
2. Members have the right to considerate, respectful treatment at all times and under all circumstances with recognition of their personal dignity.
3. Members have the right to be interviewed and examined in surroundings designed to assure reasonable visual and auditory privacy.
4. Members have the right, but are not required, to select a Primary Care Practitioner and/or Provider (PCP) of their choice. If a Member is dissatisfied for any reason with the PCP initially chosen, he/she has the right to choose another PCP.
5. Members have the right to expect communications and other records pertaining to their care, including the source of payment for treatment, to be treated as confidential in accordance with the guidelines established in applicable North Dakota law.
6. Members have the right to know the identity and professional status of individuals providing service to them and to know which Physician or other Provider is primarily responsible for their individual care. Members also have the right to receive information about our clinical guidelines and protocols.
7. Members have the right to a candid discussion with the Practitioners and/or Providers responsible for coordinating appropriate or medically necessary treatment options for their conditions in a way that is understandable, regardless of cost or benefit coverage for those treatment options. Members also have the right to participate with Practitioners and/or Providers in decision making regarding their treatment plan.
8. Members have the right to give informed consent before the start of any procedure or treatment.
9. When Members do not speak or understand the predominant language of the community, the Plan will make reasonable efforts to access an interpreter. The Plan has the responsibility to make reasonable efforts to access a treatment clinician that is able to communicate with the Member.
10. Members have the right to receive printed materials that describe important information about the Plan in a format that is easy to understand and easy to read.
11. Members have the right to a clear Grievance and Appeal process for complaints and comments and to have their issues resolved in a timely manner.
12. Members have the right to Appeal any decision regarding medical necessity made by the Plan and its Practitioners and/or Providers.
13. Members have the right to terminate from the Plan, in accordance with Employer and/or Plan guidelines.
14. Members have the right to make recommendations regarding the organization's Member's rights and responsibilities policies.
15. Members have the right to receive information about the organization, its services, its Practitioners and Providers and Members' rights and responsibilities.

Member Responsibilities

Each Member (or the Member's parent, legal guardian or other representative if the Member is a minor or incompetent) is responsible for cooperating with those providing Health Care Services to the Member, and shall have the following responsibilities:

1. Members have the responsibility to provide, to the best of their knowledge, accurate and complete information about present complaints, past illnesses, Hospitalizations, medications, and other matters relating to their health. They have the responsibility to report unexpected changes in their condition to the responsible Practitioner. Members are responsible for verbalizing whether they clearly comprehend a contemplated course of action and what is expected of them.
2. Members are responsible for carrying their Plan ID cards with them and for having Member identification numbers available when telephoning or contacting the Plan.
3. Members are responsible for following all access and availability procedures.
4. Members are responsible for seeking Emergency care at a Plan participating Emergency Facility whenever possible. In the event an ambulance is used, direct the ambulance to the nearest participating Emergency Facility unless the condition is so severe that you must use the nearest Emergency Facility. State law requires that the ambulance transport you to the Hospital of your choice unless that transport puts you at serious risk.
5. Members are responsible for notifying the Plan of an Emergency admission as soon as reasonably possible and no later than forty-eight (48) hours after becoming physically or mentally able to give notice.
6. Members are responsible for keeping appointments and, when they are unable to do so for any reason, for notifying the responsible Practitioner or the Hospital.
7. Members are responsible for following their treatment plan as recommended by the Practitioner primarily responsible for their care. Members are also responsible for participating in developing mutually agreed-upon treatment goals, and to the degree possible, for understanding their health conditions, including mental health and/or substance use disorders.
8. Members are responsible for their actions if they refuse treatment or do not follow the Practitioner's instructions.
9. Members are responsible for notifying NDPERS within *thirty-one (31)* days if they change their name, address, or telephone number.
10. Members are responsible for notifying NDPERS of any changes of eligibility that may affect their membership or access to services. The employer is responsible for notifying the Plan.

Disclosure of Grandfathered Status

This employer group health plan is a "grandfathered health plan" under the Patient Protection and Affordable Care Act (the Affordable Care Act). As permitted by the Affordable Care Act, a grandfathered health plan can preserve certain basic health coverage that was already in effect when that law was enacted. Being a grandfathered health plan means your plan may not include certain consumer protections of the Affordable Care Act that apply to other plans. However, grandfathered health plans must comply with certain other consumer protections in the Affordable Care Act, for example, the elimination of lifetime limits on benefits; and requirements under the Mental Health Parity and Addiction Equity Act of 2008 (MHPAEA).

Questions regarding which protections apply and which protections do not apply to a grandfathered health plan, and what might cause a plan to change from grandfathered health plan status can be directed to Sanford Health Plan at memberservices@sanfordhealth.org. You may also contact the Employee Benefits Security Administration, U.S. Department of Labor at (866) 444-3272 or www.dol.gov/ebsa/healthreform. The Department of Labor website has a table summarizing which protections do and do not apply to grandfathered health plans.

Fraud

Fraud is a crime that can be prosecuted. Any Member who willfully and knowingly engages in an activity intended to defraud the Plan is guilty of fraud.

As a Member, you must:

1. File accurate claims. If someone else files claims on your behalf, you should review the form before you sign it;
2. Review the Explanation of Benefits (EOB) form when it is returned to you. Make certain that benefits have been paid correctly based on your knowledge of the expenses incurred and the services rendered;
3. Never allow another person to seek medical treatment under your identity. If your ID card is lost, you should report the loss to Sanford Health Plan immediately; and
4. Provide complete and accurate information on claim forms and any other forms. Answer all questions to the best of your knowledge.

If you are concerned about any of the charges that appear on a bill or Explanation of Benefits form, or if you know of or suspect any illegal activity, call Sanford Health Plan toll-free at (800) 499-3416. All calls are strictly confidential.

Service Area

The Service Area for **SOUTH DAKOTA** includes all counties in the state.

The Service Area for **NORTH DAKOTA** includes all counties in the state.

The Service Area for **IOWA** includes the following counties:

Clay	Emmet	Lyon	Osceola	Plymouth
Dickinson	Ida	O'Brien	Sioux	Woodbury

The Service Area for **MINNESOTA** includes the following counties:

Becker	Clay	Jackson	Lincoln	Meeker	Pennington	Renville	Swift
Beltrami	Clearwater	Kandiyohi	Lyon	Murray	Pipestone	Rock	Traverse
Big Stone	Cottonwood	Kittson	Mahnomen	Nicollet	Polk	Roseau	Wilkin
Blue Earth	Douglas	Lac Qui Parle	Marshall	Nobles	Pope	Sibley	Watonwan
Brown	Grant	Lake of the	Martin	Norman	Red Lake	Stearns	Yellow Medicine
Chippewa	Hubbard	Woods	McLeod	Otter Tail	Redwood	Stevens	

Medical Terminology

All medical terminology referenced in this Certificate of Insurance follows the industry standard definitions of the American Medical Association.

Definitions

Capitalized terms are defined in Section 10 of the Certificate of Insurance.

Conformity with State and Federal Laws

Any provision in this Contract not in conformity with N.D.C.C. chs. 26.1-18.1, 54-52.1, N.D.A.C. chs. 45-06-07, 71-03, and/or any other applicable law or rule in this State, may not be rendered invalid but be must construed and applied as if it were in full compliance with applicable State and Federal laws and rules.

Special Communication Needs

Please call the Plan if you need help understanding written information at (800) 499-3416 *(toll-free)*. We can read forms to you over the phone and we offer free oral translation in any language through our translation services.

Anyone with any disability, who might need some form of accommodation or assistance concerning the services or information provided, please contact the NDPERS ADA Coordinator at (701) 328-3900.

Translation Services

The Plan can arrange for translation services. Free written materials are available in several different languages and free oral translation services are available. Call toll-free (800) 499-3416 for help and to access translation services.

Spanish (Español): Para obtener asistencia en Español, llame al (800) 892-0675 *(toll-free)*.

Tagalog (Tagalog): Kung kailangan ninyo ang tulong sa Tagalog tumawag sa (800) 892-0675 *(toll-free)*.

Chinese (中文): 如果需要中文的帮助，请拨打这个号码 (800) 892-0675 *(toll-free)*.

Navajo (Dine): Dinek'ehgo shika at'ohwol ninisingo, kwiijigo holne' (800) 892-0675 *(toll-free)*.

Services for the Deaf, Hearing Impaired, and/or Visually Impaired

If you are deaf or hearing impaired and need to speak to the Plan, call TTY/TDD: (877) 652-1844 *(toll-free)*. Please contact the Plan toll-free at (800) 499-3416 if you are in need of a large print copy or cassette/CD of this COI or other written materials.

In compliance with the Americans with Disabilities Act, this document can be provided in alternate formats. If you require accommodation or assistance concerning the services or information provided, please contact the NDPERS ADA Coordinator at (701) 328-3900.

Section 1. Schedule of Benefits

General

This section outlines the payment provisions for Covered Services described in Sections 2 and 5; and is subject to the definitions, exclusions, conditions and limitations of this Benefit Plan.

Overview of Cost Sharing Amounts and How They Accumulate

Cost Sharing Amounts include Coinsurance, Copayment, and Deductibles; as well as the Prescription Drug Coinsurance Maximum, Infertility Services Deductible and Out-of-Pocket Maximum Amounts. See *Cost Sharing Amounts – Details & Definitions* later in this Section for more information.

- The Deductible Amounts for Covered Services received from a PPO Health Care Provider, or on a Basic Plan basis, accumulate jointly up to the PPO Deductible Amount.
- The Out-of-Pocket Maximum Amounts for Covered Services received from a PPO Health Care Provider or on the Basic Plan, accumulate jointly up to the Out-of-Pocket Maximum Amount.
- When the PPO Out-of-Pocket Maximum Amount has been met, all Covered Services received from a PPO Health Care Provider will be paid at 100% of Allowed Charge. Covered Services sought under the Basic Plan will continue to be paid at 75% of the Allowed Charge until the Out-of-Pocket Maximum Amount for Basic Plan services is met.
- Prescription Medication Cost Sharing Amounts do not apply toward the Out-of-Pocket Maximum Amounts.
- Prescription Medication Copayment Amounts do not apply toward the Prescription Drug Coinsurance Maximum Amount.

A Member is responsible for Cost Sharing Amounts. All Members in the family contribute to Deductible and Coinsurance Amounts. However, a Member's contribution cannot be more than the Single Coverage amount. Health Care Providers may bill you directly or request payment of Coinsurance, Copayment and Deductible Amounts at the time services are provided. For the specific benefits and limitations that apply to this Plan, please see Section 2, *Outline of Covered Services*; your Summary of Benefits and Coverage; and Section 5.

If Sanford Health Plan pays amounts to the Health Care Provider that are the Member's responsibility, such as Deductibles, Copayments or Coinsurance Amounts, Sanford Health Plan may collect such amounts directly from the Member. The Member agrees that Sanford Health Plan has the right to collect such amounts from the Member.

Benefit Schedule	Basic Plan	PPO Plan
Under this Benefit Plan the Deductible Amounts are:		
Single Coverage	$400 per Benefit Period	$400 per Benefit Period
Family Coverage	$1,200 per Benefit Period	$1,200 per Benefit Period
Under this Benefit Plan the Coinsurance Maximum Amounts are:		
Single Coverage	$1,250 per Benefit Period	$750 per Benefit Period
Family Coverage	$2,500 per Benefit Period	$1,500 per Benefit Period
Under this Benefit Plan the Out-of-Pocket Maximum Amounts are:		
Single Coverage	$1,650 per Benefit Period	$1,150 per Benefit Period
Family Coverage	$3,700 per Benefit Period	$2,700 per Benefit Period
Under this Benefit Plan the Prescription Drug Coinsurance Maximum Amount is:		
$1,000 per Member per Benefit Period		
Under this Benefit Plan the Lifetime Infertility Services Deductible Amount is:		
$500 per Member		

Selecting a Health Care Provider

The benefit payment available under this Benefit Plan differs depending on the Subscriber's choice of a Health Care Provider. This Benefit Plan recognizes the following categories of Health Care Providers based on the Health Care Provider's relationship with Sanford Health Plan. Providers that are contracted with Sanford Health Plan and participate in the Plan's Network will be paid at either the PPO Plan or Basic Plan level.

Members should refer to the Sanford Health Plan website (www.sanfordhealthplan.com/ndpers) for the Provider Directory, which lists Participating Health Care Providers. The Sanford Health Plan website is continuously updated and has the most up-to-date listing of Health Care Providers. Members may also call Member Services at (800) 499-3416 *(toll-free)* or TTY/TDD: (877) 652-1844 *(toll-free)* to request a provider directory.

How PPO vs. Basic Plan Determines Benefit Payment

PPO Plan

PPO stands for "Preferred Provider Organization" and is a group of Health Care Providers who provide discounted services to the Members of NDPERS. Because PPO Health Care Providers charge Sanford Health Plan less for medical care services provided to the Members of NDPERS, cost savings are passed on to Members by way of reduced Cost Sharing Amounts.

To receive a higher payment level, Covered Services must be received from an NDPERS PPO Health Care Provider. Please see the NDPERS PPO Health Care Provider Listing at www.sanfordhealthplan.com/ndpers.

Note: Benefits for Covered Services received by Eligible Dependents, as outlined in Section 3, *Eligibility Requirements for Dependents*, who are residing out of the state of North Dakota, will be paid at the Basic Plan level. If the Subscriber, or the Subscriber's spouse, is required by court order to provide health coverage for that Eligible Dependent, you may be asked to provide a copy of the court order to the Plan.

Basic Plan

If a PPO Health Care Provider is: 1) not available in the Member's area; or 2) if the Member either chooses or is referred to a Health Care Provider not participating in the Preferred Provider Organization (PPO), the Member will receive the Basic Plan benefits.

Other Health Care Providers

Participating Health Care Providers

When Covered Services are received from a Participating Health Care Provider, the Participating Health Care Provider agrees to submit claims to Sanford Health Plan on behalf of the Member. Reimbursement for Covered Services will be made directly to the Participating Health Care Provider according to the terms of this Benefit Plan and the participation agreement between the Health Care Provider and Sanford Health Plan.

When Covered Services are received from a **Participating Health Care Provider** (health care providers who are contracted with Sanford Health Plan), a provider discount provision is in effect. This means the Allowance paid by Sanford Health Plan will be considered by the Participating Health Care Provider as payment in full, except for Cost Sharing Amounts, or if applicable, Maximum Benefit Allowances or Lifetime Maximums.

Participating Health Care Providers have also agreed to perform managed benefits requirements on behalf of the Member. If the Health Care Provider is a Participating Health Care Provider, as defined in Section 10, the benefit payment will be as indicated in the Outline of Covered Services and the Member's Summary of Benefits and Coverage (SBC).

Non-Participating Health Care Providers

If a Member receives Covered Services from a **Non-Participating Health Care Provider** (health care providers who are not contracted with Sanford Health Plan), the Member will be responsible for notifying Sanford Health Plan of the receipt of services. If Sanford Health Plan needs copies of medical records to process the Member's claim, the Member is responsible for obtaining such records from the Non-Participating Health Care Provider.

Non-Participating Health Care Providers within the State of North Dakota

If a Member receives Covered Services from a Non-Participating Health Care Provider within the state of North Dakota, benefit payments will be based on the Allowance and reduced by an additional 20%. The 20% payment reduction does not apply toward the Out-of-Pocket Maximum Amount. The Allowance will not exceed 80% of the billed charge.

Note: The Member is responsible for the 20% payment reduction and any charges in excess of the Allowance for Covered Services.

Benefit payments will be made directly to the Provider for Covered Services received from a Non-Participating Health Care Provider. Sanford Health Plan may designate a Health Care Provider as Non-Payable.

Non-Participating Health Care Providers outside the State of North Dakota

If a Member receives Covered Services from a Non-Participating Health Care Provider outside the state of North Dakota, the Allowance for Covered Services will be an amount within a general range of payments made and judged to be reasonable by Sanford Health Plan.

Note: The Member is responsible for any charges in excess of the Allowance for Covered Services.

If a Member receives Covered Services from a Health Care Provider in a county contiguous to North Dakota, the benefit payment will be provided on the same basis as a Health Care Provider located in the state of North Dakota. **Note:** If the Health Care Provider is a Participating Health Care Provider, the benefit payment will be as indicated in the Outline of Covered Services and SBC. If the Health Care Provider is not a Participating Health Care Provider, benefits will be available at the same level as Non-Participating Health Care Providers within the state of North Dakota. Sanford Health Plan may designate a Health Care Provider as Non-Payable.

Non-Participating Providers outside the Sanford Health Plan Service Area

When Covered Services are provided outside of Sanford Health Plan's Service Area by health care providers who have not entered into a "participating agreement" with Sanford Health Plan (Non-Participating health care providers), the amount the Member pays for such services will generally be based on either Sanford Health Plan's Non-Participating health care provider local payment or the pricing arrangements

required by applicable state law. In these situations, the Member may be liable for the difference between the amount that the Non-Participating health care provider bills and the payment Sanford Health Plan will make for the Covered Services as set forth in this paragraph.

In certain situations, Sanford Health Plan may use other payment bases, such as the payment Sanford Health Plan would make if the Covered Services had been obtained within the Sanford Health Plan Service Area, or a special negotiated payment, as permitted, to determine the amount Sanford Health Plan will pay for Covered Services provided by Non-Participating health care providers. In these situations, a Member may be liable for the difference between the amount that the Non-Participating health care provider bills and the payment Sanford Health Plan will make for the Covered Services as set forth in this paragraph.

Health Care Providers outside the United States

The benefits available under this Benefit Plan are also available to Members traveling or living outside of the United States. The same Preauthorization/Prior Approval requirements will apply. If the Health Care Provider is a Participating Provider, the Participating Health Care Provider will submit claims for reimbursement on behalf of the Member. Reimbursement for Covered Services will be made directly to the Participating Health Care Provider. If the Health Care Provider is not a Participating Provider, the Member will be responsible for payment of services and submitting a claim for reimbursement to Sanford Health Plan. Sanford Health Plan will provide translation and currency conversion services for the Member's claims outside of the United States.

Sanford Health Plan will reimburse Prescription Medications purchased outside the United States by Members who live outside the United States where no suitable alternative exists. Reimbursement will also be made in instances where Members are traveling and new drug therapy is initiated for acute conditions, or where emergency replacement of medications originally prescribed and purchased in the United States is necessary. The reimbursable supply of medications in travel situations will be limited to an amount necessary to assure continuation of therapy during the travel period and for a reasonable period thereafter.

Non-Payable Health Care Providers

If Sanford Health Plan designates a Health Care Provider as *Non-Payable*, no benefits will be available for Covered Services prescribed by, performed by or under the direct supervision of the *Non-Payable Health Care Provider*. Notice of designation as a Non-Payable Health Care Provider will be provided to Members at least 30 days prior to the effective date of designation as a Non-Payable Health Care Provider. As of the date of termination, all charges incurred by a Member for services received from the Non-Payable Health Care Provider will be the Subscriber's responsibility.

Medicare Private Contracts

A Health Care Provider may ask a Member who is eligible for Medicare to enter into a Medicare private contract where the Member and the Health Care Provider agree that the Member is to be provided with services outside of the Medicare program. This Medicare private contract must be entered into between the Member and the Health Care Provider prior to the receipt of any services and indicate that neither the Member nor the Health Care Provider is permitted to file a request for reimbursement with Medicare for any of the services provided by the Health Care Provider and that the Health Care Provider can charge any amount agreed to by the Member for services instead of the Medicare limiting charge.

Under a Medicare private contract, the Health Care Provider can set any price for services but Medicare will not pay anything. If the Member enters into a Medicare private contract, Medicare will not pay any portion of the services and Sanford Health Plan will limit its payment to the amount Sanford Health Plan would have paid as though Medicare was paying for such Covered Services. If a Member enters into a Medicare private contract, the Member is responsible for paying the difference between the amount billed by the Health Care Provider for Covered Services and the amount paid by Sanford Health Plan.

Cost Sharing Amounts – Details & Definitions

A Cost Sharing Amount is the dollar amount a Member is responsible for paying when Covered Services are received from a Health Care Provider. Cost Sharing Amounts include Coinsurance, Copayment and Deductible Amounts. Applicable Cost Sharing Amounts are identified in Section 2 and the Member's Summary of Benefits and Coverage. See the schedule above in *Overview of Cost Sharing Amounts and how they accumulate* for the specific Cost Sharing Amounts that apply to this Benefit Plan.

Coinsurance

Sanford Health Plan shall calculate Coinsurance Amounts on behalf of Members obtaining Covered Services within the Sanford Health Plan contracted provider network on the lesser of (1) billed charges or (2) provider negotiated payment rates (Allowed Charge).

If Covered Services are obtained by a Member out of the Sanford Health Plan contracted provider network, the coinsurance calculation may be based on the Health Care Provider's billed charges. This may result in a significantly higher Coinsurance Amount for certain services a Member incurs out of the Sanford Health Plan contracted provider network. It is not possible to provide specific information for each Health Care Provider outside of Sanford Health Plan's Service Area because of the many different arrangements between Health Care Providers. However, if a Member contacts Sanford Health Plan prior to receiving services from a Health Care Provider outside of Sanford Health Plan's Service Area, Sanford Health Plan may be able to provide information regarding specific Health Care Providers.

Coinsurance Maximum Amounts

The total Coinsurance Amount that is a Member's responsibility during a Benefit Period. The Coinsurance Maximum Amount renews on January 1 of each consecutive Benefit Period.

Deductibles

The Deductible Amount renews on January 1 of each consecutive Benefit Period. Copayment Amounts do not apply toward the Deductible Amount.

Note: The Deductible Amounts for Covered Services received from a PPO Health Care Provider, or on a Basic Plan basis, cross accumulate jointly up to the PPO Deductible Amount.

Out-of-Pocket Maximum Amounts

When the Out-of-Pocket Maximum Amount is met, this Benefit Plan will pay 100% of the Allowed Charge for Covered Services, less Copayment Amounts incurred during the remainder of the Benefit Period. The Out-of-Pocket Maximum Amount renews on January 1st of each consecutive Benefit Period. Prescription Medication Cost Sharing Amounts do not apply toward the Out-of-Pocket Maximum Amount.

Note: The Out-of-Pocket Maximum Amounts for Covered Services received from a PPO Health Care Provider, or on a Basic Plan basis, cross accumulate jointly up to the PPO Out-of-Pocket Maximum Amount.

Note: When the PPO Out-of-Pocket Maximum Amount has been met, all Covered Services received from a PPO Health Care Provider will be paid at 100% of Allowed Charge. Covered Services sought on a Basic Plan basis will continue to be paid at 75% of the Allowed Charge until the Out-of-Pocket Maximum Amount for Basic Plan services is met.

Prescription Drug Coinsurance Maximum Amount

When the Prescription Drug Coinsurance Maximum Amount that is a Member's responsibility during a Benefit Period is met, this Benefit Plan will pay 100% of the Allowed Charge for Formulary Prescription Medications, less Copayment Amounts incurred during the remainder of the Benefit Period. This Prescription Drug Coinsurance Maximum Amount renews on January 1 of each consecutive Benefit Period.
Note: Copayment Amounts do not apply toward this Coinsurance Maximum Amount.

Infertility Services Coinsurance/Deductible

Neither the Infertility Services Lifetime Deductible Amount nor any Member-paid coinsurance for infertility services applies toward the annual Out-of-Pocket Maximum Amounts. Infertility services are limited per Member to a lifetime benefit maximum of $20,000.

Covered Services	PROVIDER OF SERVICE Basic Plan *After Deductible Amount*	PPO Plan *After Deductible Amount*
Inpatient Hospital and Medical Services		
• **Inpatient Hospital Services**	75% of Allowed Charge.	80% of Allowed Charge.
• **Inpatient Medical Care Visits**	75% of Allowed Charge.	80% of Allowed Charge.
• **Ancillary Services**	75% of Allowed Charge.	80% of Allowed Charge.
• **Inpatient Consultations**	75% of Allowed Charge.	80% of Allowed Charge.
• **Concurrent Services**	75% of Allowed Charge.	80% of Allowed Charge.
• **Initial Newborn Care**	75% of Allowed Charge. *Deductible Amount is waived.*	80% of Allowed Charge. *Deductible Amount is waived.*
Inpatient and Outpatient Surgical Services		
• **Professional Health Care Provider Services**	75% of Allowed Charge.	80% of Allowed Charge.
• **Assistant Surgeon Services**	75% of Allowed Charge.	80% of Allowed Charge.
• **Ambulatory Surgical Facility Services**	75% of Allowed Charge.	80% of Allowed Charge.
• **Hospital Ancillary Services**	75% of Allowed Charge.	80% of Allowed Charge.
• **Anesthesia Services**	75% of Allowed Charge.	80% of Allowed Charge.
Transplant Services		
• **Inpatient and Outpatient Hospital and Medical Services**	75% of Allowed Charge. *Preauthorization/Prior Approval required.*	80% of Allowed Charge. *Preauthorization/Prior Approval required.*
• **Transportation Services**	75% of Allowed Charge. *Benefits are subject to a Maximum Benefit Allowance of $1,000 per transplant procedure.*	80% of Allowed Charge.
Dental Services		
• **Temporomandibular (TMJ) or Craniomandibular (CMJ) Joint Treatment**	75% of Allowed Charge. *Benefits are subject to a Maximum Benefit Allowance of 1 splint per Member per Benefit Period.*	80% of Allowed Charge.
• **Dental Services Related to Accidental Injury**	75% of Allowed Charge.	80% of Allowed Charge.
• **Dental Anesthesia and Hospitalization**	75% of Allowed Charge. *Preauthorization/Prior Approval is required for all Members age 9 and older.*	80% of Allowed Charge. *Preauthorization/Prior Approval is required for all Members age 9 and older.*
Outpatient Hospital and Medical Services		
• **Home and Office Visits**	$30 Copayment Amount per Office Visit, then 100% of Allowed Charge. *Deductible Amount is waived.*	$25 Copayment Amount per Office Visit, then 100% of Allowed Charge. *Deductible Amount is waived*
• **Diagnostic Services**	75% of Allowed Charge.	80% of Allowed Charge.

Covered Services	PROVIDER OF SERVICE Basic Plan *After Deductible Amount*	PPO Plan *After Deductible Amount*
• **Emergency Services**	$50 Copayment Amount, then 80% of Allowed Charge for emergency room facility fee billed by a Hospital. *The Copayment Amount for the emergency room facility fee is waived when a Member is admitted directly as an Inpatient to a Hospital.*	$50 Copayment Amount, then 80% of Allowed Charge for emergency room facility fee billed by a Hospital.
	80% of Allowed Charge for office or emergency room visit billed by a Professional Health Care Provider. *Deductible Amount is waived.*	80% of Allowed Charge for office or emergency room visit billed by a Professional Health Care Provider. *Deductible Amount is waived.*
	80% of Allowed Charge for all Ancillary Services received in an emergency room or Professional Health Care Provider's office.	80% of Allowed Charge for all Ancillary Services received in an emergency room or Professional Health Care Provider's office.
• **Ambulance Services**	80% of Allowed Charge.	80% of Allowed Charge.
• **Radiation Therapy and Chemotherapy**	75% of Allowed Charge.	80% of Allowed Charge.
• **Dialysis Treatment**	75% of Allowed Charge.	80% of Allowed Charge.
• **Home Infusion Therapy Services**	75% of Allowed Charge.	80% of Allowed Charge.
• **Visual Training for Members under age 10**	75% of Allowed Charge. *Benefits are subject to an Annual Maximum of 16 visits per Member.*	80% of Allowed Charge.
• **Allergy Services**	75% of Allowed Charge.	80% of Allowed Charge.
• **Phenylketonuria (PKU)** - *Foods and food products for the dietary treatment of Members born after 12/31/62 with maple syrup urine disease or phenylketonuria (PKU)*	75% of Allowed Charge.	80% of Allowed Charge.

Wellness Services

The Plan will pay up to a Maximum Benefit Allowance of $200 per Member per Benefit Period for any non-routine screening services not listed below or not recommended with a rating of "A" or "B" by the United States Preventive Services Task Force. Such non-routine screening services will be subject to Copayment, Deductible and Coinsurance amounts after the $200 Benefit Allowance has been met.

• **Well Child Care to the Member's 6th birthday**	$30 Copayment Amount per Office Visit, then 100% of Allowed Charge. *Deductible Amount is waived.* *Benefits are available as follows:* • *7 visits for Members from birth through 12 months;* • *3 visits for Members from 13 months through 24 months; and* • *1 visit per Benefit Period for Members 25 months through 72 months.*	$25 Copayment Amount per Office Visit, then 100% of Allowed Charge. *Deductible Amount is waived.*
• **Well Child Care Immunizations to the Member's 6th Birthday**	100% of Allowed Charge. *Deductible Amount is waived.* *Covered immunizations are those that have been published as policy by the Centers for Disease Control, including DPT (Diphtheria-Pertussis-Tetanus); MMR (Measles-Mumps-Rubella); Hemophilus; Influenza B; Hepatitis; Polio; Varicella (Chicken Pox); Pneumococcal Disease; and Influenza Virus.*	100% of Allowed Charge. *Deductible Amount is waived.*
• **Preventive Screening Services for Members age 6 and older**	$30 Copayment Amount per Office Visit, then 100% of Allowed Charge. *Deductible Amount is waived.* *Benefits include:* • *One routine physical examination per Member per Benefit Period.* • *Routine diagnostic screenings.* • *Routine screening procedures for cancer.* *A Health Care Provider will counsel Members as to how often preventive services are need based on the age, gender and medical status of the Member.*	$25 Copayment Amount per Office Visit, then 100% of Allowed Charge. *Deductible Amount is waived.*

Covered Services	PROVIDER OF SERVICE Basic Plan *After Deductible Amount*	PPO Plan *After Deductible Amount*
• **Mammography Screening Services**	100% of Allowed Charge. *Deductible Amount is waived.* *Benefits are available as follows:* • *One service for Members between the ages of 35 and 40* • *One service per year for Members age 40 and older.* *Additional benefits will be available for mammography services when Medically appropriate and Necessary and ordered by a Professional Health Care Provider. See Section 5(a).*	100% of Allowed Charge. *Deductible Amount is waived.*
• **Routine Pap Smear**	100% of Allowed Charge. *Deductible Amount is waived.* *Benefits are subject to a Maximum Benefit Allowance of 1 Pap smear per Benefit Period.*	100% of Allowed Charge. *Deductible Amount is waived.*
Related Office Visit	$30 Copayment Amount per Office Visit, then 100% of Allowed Charge. *Deductible Amount is waived.* *Additional benefits will be available for Pap smears when Medically Appropriate and Necessary and ordered by a Professional Health Care Provider. See Section 5(a).*	$25 Copayment Amount per Office Visit, then 100% of Allowed Charge. *Deductible Amount is waived.*
• **Prostate Cancer Screening**	75% of Allowed Charge. *Deductible Amount is waived.* *Benefits are available for an annual digital rectal examination and an annual prostate-specific antigen test for the following: an asymptomatic male age 50 and older; a male age 40 and older of African American descent; and a male age 40 with a family history of prostate cancer.*	80% of Allowed Charge. *Deductible Amount is waived.*
Related Office Visit	$30 Copayment Amount per Office Visit, then 100% of Allowed Charge. *Deductible Amount is waived.* *Additional benefits will be available for prostate cancer screening when Medically Appropriate and Necessary and ordered by a Professional Health Care Provider. See Section 5(a).*	$25 Copayment Amount per Office Visit, then 100% of Allowed Charge. *Deductible Amount is waived.*
• **Fecal Occult Blood Testing for Colorectal Cancer Screening**	100% of Allowed Charge. *Deductible Amount is waived.* *Benefits are available for Members age 50 and older, subject to a Maximum Benefit Allowance of 1 test per Benefit Period.*	100% of Allowed Charge. *Deductible Amount is waived.*
• **Immunizations other than Well Child Care**	100% of Allowed Charge. *Deductible Amount is waived.* *Covered immunizations are those that have been published as policy by the Centers for Disease Control, Including Tetanus, Influenza Virus, Pneumococcal Pneumonia, MMR (Measles-Mumps-Rubella), Varicella (Chicken Pox), Shingles (Zoster) Vaccine, Meningococcal Disease and Human Papillomavirus (HPV). Certain age restrictions may apply.*	100% of Allowed Charge. *Deductible Amount is waived.*
• **Outpatient Nutritional Care Services**	$30 Copayment Amount per Office Visit, then 100% of Allowed Charge. *Deductible Amount is waived.* *Benefits are available to the Maximum Benefit Allowance for the following diagnosed medical conditions:* • *Hyperlipidemia – Two (2) Office Visits per Member per Benefit Period.* • *Gestational Diabetes – Two (2) Office Visits per Member per Benefit Period.* • *Chronic Renal Failure – Four (4) Office Visits per Member per Benefit Period.* • *Diabetes Mellitus – Four (4) Office Visits per Member per Benefit Period.* • *Anorexia Nervosa – Four (4) Office Visits per Member per Benefit Period.* • *Bulimia – Four (4) Office Visits per Member per Benefit Period.* • *PKU – Four (4) Office Visits per Member per Benefit Period.* • *Obesity – One (1) Office Visit per Member per Benefit Period.*	$25 Copayment Amount per Office Visit, then 100% of Allowed Charge. *Deductible Amount is waived.*
• **Diabetes Education Services**	75% of Allowed Charge. *Deductible Amount is waived.*	80% of Allowed Charge. *Deductible Amount is waived.*

Covered Services	PROVIDER OF SERVICE Basic Plan *After Deductible Amount*	PPO Plan *After Deductible Amount*
• **Dilated Eye Examination** *(for diabetes related diagnosis)*	$30 Copayment Amount, then 75% of Allowed Charge. *Deductible Amount is waived.* *Benefits are subject to a Maximum Benefit Allowance of 1 examination per Member per Benefit Period.*	$25 Copayment Amount, then 80% of Allowed Charge. *Deductible Amount is waived.*
Outpatient Therapy Services		
• **Physical Therapy**	$25 Copayment Amount per visit, then 75% of Allowed Charge. *Deductible Amount is waived.* *Benefits are subject to the medical guidelines established by Sanford Health Plan.*	$20 Copayment Amount per visit, then 80% of Allowed Charge. *Deductible Amount is waived.*
• **Occupational Therapy**	$25 Copayment Amount per visit, then 75% of Allowed Charge. *Deductible Amount is waived.* *Benefits are available for 90 consecutive calendar days, beginning on the date of the first therapy treatment for the condition. Additional benefits may be allowed after the 90 days when Medically Appropriate and Necessary.*	$20 Copayment Amount per visit, then 80% of Allowed Charge. *Deductible Amount is waived.*
• **Speech Therapy**	$25 Copayment Amount per visit, then 75% of Allowed Charge. *Deductible Amount is waived.* *Benefits are available for 90 consecutive calendar days, beginning on the date of the first therapy treatment for the condition. Additional benefits may be allowed after the 90 days when Medically Appropriate and Necessary.*	$20 Copayment Amount per visit, then 80% of Allowed Charge. *Deductible Amount is waived.*
• **Respiratory Therapy Services**	75% of Allowed Charge.	80% of Allowed Charge.
• **Cardiac Rehabilitation Services**	75% of Allowed Charge. *Deductible Amount is waived.* *Benefits are subject to a Maximum Benefit Allowance of 12 visits per Member per episode for the following diagnosed medical conditions:* • *Myocardial Infarction* • *Coronary Artery Bypass Surgery* • *Coronary Angioplasty and Stenting* • *Heart Valve Surgery* • *Heart Transplant Surgery* *Cardiac Rehabilitation Services must begin within 2 months following discharge from the Hospital.*	80% of Allowed Charge. *Deductible Amount is waived.*
• **Pulmonary Rehabilitation Services**	75% of Allowed Charge. *Deductible Amount is waived.*	80% of Allowed Charge. *Deductible Amount is waived.*
Chiropractic Services	Only the Office Visit Copayment Amount will apply if both an Office Visit and Therapy/Manipulation are billed on the same day by the same Health Care Provider.	
• **Home and Office Visits**	$30 Copayment Amount per Office Visit, then 100% of Allowed Charge. *Deductible Amount is waived.*	$25 Copayment Amount per Office Visit, then 100% of Allowed Charge. *Deductible Amount is waived.*
• **Therapy and Manipulations**	$25 Copayment Amount per visit, then 75% of Allowed Charge. *Deductible Amount is waived.*	$20 Copayment Amount per visit, then 80% of Allowed Charge. *Deductible Amount is waived.*
• **Diagnostic Services**	75% of Allowed Charge.	80% of Allowed Charge.
Maternity Services	The Deductible Amount is waived for delivery services received from a PPO Health Care Provider when the Member is enrolled in the Healthy Pregnancy Program.	
• **Inpatient Hospital and Medical Services**	75% of Allowed Charge.	80% of Allowed Charge.

Covered Services	PROVIDER OF SERVICE Basic Plan *After Deductible Amount*	PPO Plan *After Deductible Amount*
• **Prenatal and Postnatal Care**	75% of Allowed Charge. *Deductible Amount is waived.*	80% of Allowed Charge. *Deductible Amount is waived.*
• **One (1) Prenatal Nutritional Counseling visit per pregnancy**	100% of Allowed Charge. *Deductible Amount is waived.*	100% of Allowed Charge. *Deductible Amount is waived.*
Infertility Services		
• **Diagnostics, Treatment, Office Visits, and other Services**	80% of Allowed Charge.	80% of Allowed Charge.
	Benefits are subject to a $500 Lifetime Infertility Services Deductible Amount and a $20,000 Lifetime Benefit Maximum Amount per Member. The Infertility Services Deductible Amount and any Member-paid coinsurance for infertility services do not apply toward the Out-of-Pocket Maximum Amount. Prior Approval is required for assisted reproductive technology, including GIFT, ZIFT, ICSI and IVF.	
Mental Health and Substance Use Disorder Treatment Services		
• **Mental Health Treatment Services**		
Inpatient		
Includes Acute Inpatient Admissions and Residential Treatment	75% of Allowed Charge. *Preauthorization/Prior Approval is required.*	80% of Allowed Charge. *Preauthorization/Prior Approval is required.*
Outpatient	*For all Outpatient Services, 100% of the Allowed Charge (includes Copayment and Deductible/Coinsurance) is waived for the initial 5 hours, per Member per Benefit Period.*	
Office Visits	$30 Copayment Amount per Office Visit, then 100% of Allowed Charge. *Deductible Amount is waived.*	$25 Copayment Amount per Office Visit, then 100% of Allowed Charge. *Deductible Amount is waived*
All Other Services, including:		
Intensive Outpatient	80% of Allowed Charge.	80% of Allowed Charge.
Partial Hospitalization	80% of Allowed Charge. *Covered Services received during the remainder of the Benefit Period are payable at 80% of Allowed Charge and subject to Deductible Amounts.*	80% of Allowed Charge. *Covered Services received during the remainder of the Benefit Period are payable at 80% of Allowed Charge and are subject to Deductible Amounts.*
• **Substance Use Disorder Treatment Services**		
Inpatient		
Includes Acute Inpatient Admissions and Residential Treatment	75% of Allowed Charge. *Preauthorization/Prior Approval is required.*	80% of Allowed Charge. *Preauthorization/Prior Approval is required.*
Outpatient	*For all Outpatient Services, 100% of Allowed Charge (includes Copayment and Deductible/Coinsurance) is waived for the initial 5 visits, per Member per Benefit Period.*	
Office Visits	$30 Copayment Amount per Office Visit, then 100% of Allowed Charge. *Deductible Amount is waived.*	$25 Copayment Amount per Office Visit, then 100% of Allowed Charge. *Deductible Amount is waived*
All Other Services, including:		
Intensive Outpatient	80% of Allowed Charge.	80% of Allowed Charge.
Partial Hospitalization	80% of Allowed Charge. *Covered Services received during the remainder of the Benefit Period are payable at 80% of Allowed Charge and are subject to any Deductible Amount.*	80% of Allowed Charge. *Covered Services received during the remainder of the Benefit Period are payable at 80% of Allowed Charge and are subject to any Deductible Amount.*

Covered Services	PROVIDER OF SERVICE Basic Plan *After Deductible Amount*	PPO Plan *After Deductible Amount*
Other Services Not Previously Listed Above		
• **Skilled Nursing Facility Services**	75% of Allowed Charge.	80% of Allowed Charge.
• **Home Health Care Services**	75% of Allowed Charge.	80% of Allowed Charge.
• **Hospice Services**	75% of Allowed Charge.	80% of Allowed Charge.
• **Private Duty Nursing Services**	75% of Allowed Charge.	80% of Allowed Charge.
• **Medical Supplies and Equipment** - Home Medical Equipment - Prosthetic Appliances and Limbs - Orthotic Devices - Supplies for Administration of Prescription Medications other than the diabetes supplies specified in Prescription Drug Benefit – See Section 5(e) - Oxygen Equipment and Supplies - Ostomy Supplies - External Hearing aids	75% of Allowed Charge. *Limited to one hearing aid, per ear, per Member every 3 years. For Members ages 18 and older, excludes hearing aids to correct gradual hearing impairment or loss that occurs with aging and/or other lifestyle factors.*	80% of Allowed Charge.
• **Eyeglasses or Contact Lenses** *(following a covered cataract surgery)*	75% of Allowed Charge. *Benefits are subject to a Maximum Allowance of 1 pair of eyeglasses or contact lenses per Member when purchased within 6 months following the surgery.*	80% of Allowed Charge.
Prescription Drug and Diabetes Supplies Benefits		
• **Retail and Mail Order**		
Formulary Medication		
➢ Generic	$5 Copayment Amount, then 85% of Allowed Charge. Benefits are subject to the Prescription Drug Coinsurance Maximum Amount and the Copayment Amount application listed below. *Deductible Amount is waived.*	
➢ Brand Name	$20 Copayment Amount, then 75% of Allowed Charge. Benefits are subject to the Prescription Drug Coinsurance Maximum Amount and the Copayment Amount application listed below. *Deductible Amount is waived.*	
Non-Formulary Medication		
➢ Generic and Brand Name	$25 Copayment Amount, then 50% of Allowed Charge. Benefits are subject to the Copayment Amount application listed below. *Deductible Amount is waived.*	
Under this Benefit Plan the Prescription Drug Coinsurance Maximum Amount is:		
——— $1,000 per Member per Benefit Period ———		

Copayment Amount Application

- One Copayment Amount per Prescription Order or refill for a 1 – 34-day supply.
- Two Copayment Amounts per Prescription Order or refill for a 35 – 100-day supply.

Copayment Amounts do not apply to the following nonprescription diabetes supplies: syringes, lancets, blood glucose test strips, urine test products and control solutions.

If a Generic Prescription Medication is the therapeutic equivalent for a Brand Name Prescription Medication, and is authorized by a Member's Professional Health Care Provider, benefits will be based on the Allowance for the Generic equivalent. If the Member does not accept the Generic equivalent, the Member is responsible for the cost difference between the Generic and the Brand Name Prescription Medication, and applicable Cost Sharing Amounts. For details, see Section 5(e).

Prescription Medication Cost Sharing Amounts do not apply toward the Member's Out-of-Pocket Maximum Amounts.

Prescription Medications and nonprescription diabetes supplies are subject to a dispensing limit of a 100-day supply.

Cost Sharing Amounts are waived for prenatal vitamins. For details, see Sections 5(a) and 5(e).

Section 3. Enrollment

Eligibility and When to Enroll

As provided in N.D.C.C. §54-52.1-01(4), individuals eligible to receive benefits are every permanent employee who is employed by a governmental unit, as that term is defined in N.D.C.C. §54-52-01, whose services are not limited in duration, who is filling an approved and regularly funded position in a governmental unit, and who is employed at least seventeen and one-half hours per week and at least five months each year or for those first employed after August 1,2003, is employed at least twenty hours per week and at least twenty weeks each year of employment. An eligible employee includes members of the Legislative Assembly, judges of the Supreme Court, paid members of state or political subdivision boards, commissions, or associations, full-time employees of political subdivisions, elective state officers as defined by N.D.C.C. §54-06-01(2), and disabled permanent employees who are receiving compensation from the North Dakota workforce safety and insurance fund.

A temporary employee employed before August 1, 2007, may elect to participate in the uniform group insurance program by completing the necessary enrollment forms and qualifying under the medical underwriting requirements of the program if such election is made before January 1, 2015, and if the temporary employee is participating in the uniform group insurance program on January 1, 2015. In order for a temporary employee employed after July 31, 2007, to qualify to participate in the uniform group insurance program, the employee must be employed at least twenty hours per week; must be employed at least twenty weeks each year of employment; must make the election to participate before January 1, 2015; and must be participating in the uniform group insurance program as of January 1, 2015. To be eligible to participate in the uniform group insurance program, a temporary employee first employed after December 31, 2014, or any temporary employee not participating in the uniform group insurance program as of January 1, 2015, must meet the definition of a full-time employee under §4980H(c)(4) of the Internal Revenue Code [26 U.S.C. 4980H(c)(4)].

An eligible employee is entitled to coverage the first of the month following the month of employment, provided the employee submits an application for coverage within the first 31 days of employment or eligibility for a special enrollment period as set forth in N.D.A.C. §71-03-03. Each eligible employee may elect to enroll his/her Eligible Dependents.

Eligible employees also include non-Medicare eligible retired and terminated employees, and their Eligible Dependents, who remain eligible to participate in the uniform group insurance program pursuant to applicable state law, as provided in N.D.C.C. §54-52.1-03 and federal regulations. For a comprehensive description of eligibility, refer to the NDPERS web site at www.nd.gov/ndpers.

Eligibility to receive benefits under the Benefit Plan is initially determined by the Plan Administrator. When an eligible employee meets the criteria for eligibility, a membership application must be completed. NDPERS has the ultimate decision making authority regarding eligibility to receive benefits.

A "Late Enrollee" is an Eligible Group Member or Eligible Dependent who declines coverage when he or she is initially eligible to enroll and later requests to enroll for coverage. A Late Enrollee can only enroll during the next scheduled Annual Enrollment Period. A Member is not a "Late Enrollee" if any "special enrollment right(s)" apply, as described later in this section.

How to Enroll

Both the Group and Group Member are involved in the enrollment process.

The Group Member must:

1. Complete the enrollment process, as designated by NDPERS, for the Group Member and any Eligible Dependents; and
2. Provide all information needed to determine the eligibility of the Group Member and/or Dependents, if requested by the Plan.

The Group must:

1. Provide all information needed by the Plan to determine eligibility; and
2. Agree to pay the required premium payments on behalf of the Group Member.

When Coverage Begins

Coverage generally becomes effective on the first day of the month that follows the date of hire, as designated by NDPERS.

If you are an inpatient in a Hospital or other Facility on the day your coverage begins, we will pay benefits for Covered Services that you receive beginning on the date your coverage becomes effective, as long as you receive Covered Services in accordance with the terms of this Certificate. Payment of benefits is subject to any obligations under a previous plan or coverage arrangement in accordance with state law and applicable regulations.

For more information, see Section 11, "*Continuation of Coverage for Confined Members*" and "*Extension of Benefits for Total Disability*".

Eligibility Requirements for Dependents

The following Dependents are eligible for coverage ("Dependent coverage"):

Spouse - The Subscriber's spouse, under a legally existing marriage between persons of the opposite sex, is always eligible for coverage, subject to the eligibility requirements as designated by NDPERS.

Dependent Child - To be eligible for coverage, a dependent child must meet all of the following requirements:

1. Be your natural child, a child placed with you for adoption, a legally adopted child, a child for whom you have legal guardianship, a stepchild, or foster child; and
2. Be one of the following:
   a. under age twenty-six (26); or
   b. incapable of self-sustaining employment by reason of a disabling condition and chiefly dependent upon the Certificate

holder/Subscriber for support and maintenance If the Plan so requests, the Subscriber must provide proof of the child's disability within *thirty-one (31)* days of the Plan's request. Such a request may be no more than annually following the two year period of the disabled dependent child's attainment of the limiting age [N.D.C.C. §26.1-36-22 (4)]; or

c. the Subscriber's grandchild(ren) or those of the Subscriber's living, covered Spouse, who legally reside with the Certificate holder/Subscriber and (1) the parent of the grandchild(ren) is an Covered Dependent also covered by this Plan; and (2) both the Dependent and child of such Dependent (grandchild) are chiefly dependent upon the Certificate holder/Subscriber for support.

Dependent coverage does not include the spouse of an adult Dependent child. Coverage will continue to the end of the month in which the adult Dependent child reaches the limiting age. Coverage does not include the adult Dependent child's spouse or child of such Dependent (grandchild) unless that grandchild meets other coverage criteria established under state law. The adult Dependent's marital status, financial dependency, residency, student status or employment status will not be considered in determining eligibility for initial or continued coverage.

Limitations. A Dependent shall not be covered under this Contract if he or she is eligible to be a Subscriber, already covered as a Dependent of another Subscriber, or already covered as a Subscriber.

Noncustodial Subscribers

Whenever a Dependent Child receives coverage under the Plan through the noncustodial parent who is the Subscriber, the Plan shall do all of the following:

1. Provide necessary information to the custodial parent in order for the Dependent Child to receive benefits under the Plan;
2. Allow the custodial parent or Provider, with the custodial parent's approval, to submit claims for Covered Services without approval from the noncustodial parent; and
3. Make payment on the submitted claims directly to the custodial parent or Provider.

Status of Member Eligibility

The Plan Administrator agrees to furnish Sanford Health Plan with any information required by Sanford Health Plan for the purpose of enrollment. Any changes affecting a Member's eligibility for coverage must be provided to Sanford Health Plan by the Plan Administrator and/or the Member immediately, but in any event, the Plan Administrator and/or the Member shall notify Sanford Health Plan within 31 days of the change.

Statements made on membership applications are deemed representations and not warranties. No statements made on the membership application may be used in any contest unless a copy has been furnished to that person, or in the event of the death or incapacity of that person, to the individual's beneficiary or personal representative. The Subscriber is provided a copy of the membership application at the time of completion.

A Member making a statement (including the omission of information) on the membership application or in relation to any of the terms of this Benefit Plan constituting fraud or an intentional misrepresentation of a material fact will result in the rescission of this Benefit Plan by Sanford Health Plan. A rescission is a cancellation or discontinuance of coverage, including any benefits paid, that has a retroactive effect of voiding this Benefit Plan or any benefits paid under the terms of this Benefit Plan.

Physical Examinations

Sanford Health Plan at its own expense may require a physical examination of the Member as often as necessary during the pendency of a Claim for Benefits and may require an autopsy in case of death if the autopsy is not prohibited by law.

Qualified Medical Child Support Order (QMCSO) Provision

A QMCSO is an order of a court or administrative tribunal that creates the right of a Member's child to be enrolled under this Plan. If a QMCSO is issued, this Plan will provide benefits to the child(ren) of a covered person regardless of whether the child(ren) resides with the Member. In the event that a QMCSO is issued, each named child(ren) will be covered by this Plan in the same manner as any other Dependent child(ren) by this Plan.

When the Plan is in receipt of a medical child support order, the Plan will notify the Member and each child named in the order, that the Plan is in receipt of a QMCSO which contains the following required information:

- Name and last known address of the Member and the child(ren) to be covered by the Plan.
- A description of the type of coverage to be provided by this Plan to each named child.
- The applicable period determined by the order.
- The plan determined by the order.

In order for the child's coverage to become effective as of the date of the court order issued, the Member must apply for coverage as defined previously in this section. Each named child may designate another person, such as a custodial guardian, to receive copies of explanation of benefits, payments, and other materials.

Exceptions. If a court has ordered a Subscriber to provide health coverage for a Dependent Child, the requirements in the *Dependent Child* subsection above, "*Eligibility Requirements for Dependents,*" need not be satisfied, but the Subscriber must still request enrollment on behalf of the Dependent Child as set forth in this Plan. If the Subscriber fails to enroll the Dependent Child, the other parent or the legal representative of the Dependent Child, may enroll the Dependent Child. A Dependent Child who is provided coverage pursuant to this exception shall not be terminated unless the Plan is provided satisfactory written evidence of any of the following:

1. The court or administrative order is no longer in effect;
2. The Dependent Child is or will be enrolled in comparable health coverage through an insurer which will take effect not later than the effective date of the termination; or
3. The Group has eliminated family coverage for all of its Members.

Michelle's Law

Federal law requires that we provide the following notice regarding Michelle's Law [Public Law 110-381]. Please note that changes in federal law may eliminate certain elements of Michelle's Law, and the Plan intends to provide continuing coverage of Eligible Dependents up to age twenty-six (26), irrespective of their student status, for Plan Years beginning on or after September 23, 2010.

A Dependent Child under twenty-five (25) years old and enrolled in and attending an accredited college, university, or trade or secondary school at least five (5) months each year will remain covered if the Dependent takes a medically necessary leave of absence from school or changes to part-time status. The leave of absence must:

1. Be medically necessary;
2. Commence while the child is suffering from a serious illness or injury; and
3. Cause the child to lose coverage under the plan.

Students are only eligible as long as they were covered by their parent's health insurance Certificate prior to diagnosis. Coverage will continue until the earlier of one year from the first day of the leave of absence or the date on which coverage would otherwise terminate because the child no longer meets the requirements to be an Eligible Dependent (e.g., reaching the plan's limiting age).

You must provide a written and signed certification from the Dependent Child's treating Practitioner and/or Provider stating that the Dependent Child is suffering from a serious illness or injury and that the leave of absence is medically necessary and the effective date of the leave.

When and How to Enroll Dependents

When to Enroll Dependents

A Subscriber shall apply for coverage for a Dependent during the same periods of time that the Subscriber may apply for his or her own coverage. However, there is an exception for newborn and adopted children; see "*Coverage from Birth*" and "*Adoption or Children Placed for Adoption*" below. There is also an exception for Spouses; see "*New Spouses and Dependent Children*" below.

How to Enroll Dependents

The Group Member must:

1. Complete the enrollment process, as designated by NDPERS, for the Group Member and any Eligible Dependents; and
2. Provide all information needed to determine the eligibility of the Group Member and/or Dependents, if requested by the Plan.

When Dependent Coverage Begins

1. **General.** If a Dependent is enrolled at the same time the Subscriber enrolls for coverage, the Dependent's effective date of coverage will be the same as the Subscriber's effective date as described in "*When Coverage Begins*" above.
2. **Delayed Effective Date of Dependent Coverage.** Except for newborns (see item 3 below), if, on the date Dependent coverage becomes effective, the Dependent is Hospitalized and covered under an extension of health benefits from a previous Group health plan or other coverage arrangement, coverage under this Contract shall be subject to benefits payable under the previous plan or coverage arrangement.
3. **Coverage from Birth.** If a Subscriber has a child through birth, the child will become a covered Dependent from the date of birth. Depending on the Class of Coverage the Subscriber is enrolled under, the following provisions apply:
   a. **Subscribers with Single Coverage:** For coverage to continue beyond thirty-one (31) days of the newborn's date of birth, coverage must applied for through NDPERS within thirty-one (31) days of the newborn's date of birth.
   b. **Subscribers with Family Coverage:** Subscribers with Family Coverage under the Plan are encouraged to notify the Plan in advance when a pregnancy and expected due date is known. Newborn children will be added to the Certificate automatically if the Subscriber is enrolled in Family Coverage and the Plan and/or NDPERS is notified of the pregnancy.

   An Eligible Group Member, and any other Dependents, eligible to be enrolled in the Plan, but who failed to enroll during a previous enrollment period, shall be covered under this Contract from the date of the newborn child's birth, provided that coverage is applied for through NDPERS within thirty-one (31) days. Pursuant to N.D.A.C. §71-03-03-01, an employee who previously waived coverage must enroll for coverage at the same time that the Employee's Eligible Dependent is enrolled.

   Dependent coverage is available for the Spouse, if the Spouse is otherwise eligible for coverage under the Plan, provided coverage is applied through NDPERS for the Spouse and, if applicable, the Group Member, within thirty-one (31) days of the newborn child's birth.
4. **Adoption or Children Placed for Adoption.** If a Subscriber adopts a child or has a child placed with him or her as a Dependent, that child will become covered as an Eligible Dependent as of the date specified within a court order or other legal adoption papers. Regardless of the Class of Coverage the Subscriber is enrolled under, the following provisions apply:
   a. **Subscribers with either Single or Family Coverage:** For coverage to continue beyond thirty-one (31) days of the date specified within the court order or other legal adoption papers granting an adoption, placement for adoption, legal guardianship, or order to provide health coverage, the Subscriber must submit an application for coverage to NDPERS within thirty-one (31) days of the date specified within the court order or other legal adoption papers that granted initial eligibility.

   An Eligible Group Member, and any other Dependents, eligible to be enrolled in the Plan, who failed to enroll during a previous enrollment period, shall be covered as of the date specified within a court order or other legal adoption papers, if the Eligible Group Member, and any other Eligible Dependents, submits an application for coverage to NDPERS within thirty-one (31) days of the date specified within the court order or in the legal adoption papers granting an adoption, placement for adoption, legal guardianship, or order to provide health coverage. Pursuant to N.D.A.C. §71-03-03-01, an employee who previously waived coverage must enroll for coverage at the same time that the Employee's Eligible Dependent is enrolled.

   Dependent coverage is available for the Spouse, if the Spouse is otherwise eligible for coverage under the Plan, provided that an

application for coverage is submitted to NDPERS for the Spouse and, if applicable, the Group Member, within thirty-one (31) days of the date specified within the court order or in the legal adoption papers granting an adoption, placement for adoption, legal guardianship, or order to provide health coverage.

Coverage at the time of placement for adoption includes the necessary care and treatment of medical conditions existing prior to the date of placement.

5. **New Spouses and Dependent Children.** If a Subscriber gets married, his or her Spouse, and any of the Spouse's Dependents who become Eligible Dependents of the Subscriber as a result of the marriage, will become covered as a Member from the first day of the calendar month beginning after the date of marriage, provided that coverage is applied for the Spouse and/or the Dependent within thirty-one (31) days of the date of marriage.

   If an Eligible Group Member, who is an Employee eligible to enroll in the Plan, but who did not do so during a previous enrollment period, gets married, the employee becomes an eligible Subscriber under the following conditions. The Subscriber, his or her Spouse, and any Dependents who become Eligible Dependents of the Subscriber as a result of the marriage, will become covered as a Member from the first day of the calendar month beginning after the date of marriage, provided that coverage is applied for within thirty-one (31) days of the date of marriage. Pursuant to N.D.A.C. §71-03-03-01, an employee who previously waived coverage must enroll for coverage at the same time that the Employee's Eligible Dependent is enrolled.

Special Enrollment Rights

A. The Subscriber is responsible for notifying the Plan Administrator (NDPERS) of any mailing address change within 31 days of the change.

B. The Subscriber is responsible for notifying the Plan Administrator (NDPERS) of any change in marital status within 31 days of the change.
   1. If the Subscriber marries, Eligible Dependents may be added as a Member if a membership application is submitted within 31 days of the date of marriage. If the membership application is not submitted within the 31-day period, and the Eligible Dependent is a Late Enrollee, the effective date of coverage will be the Group's anniversary date.

      If the membership application is submitted within 31 days of the date of marriage, the effective date of coverage for the Eligible Dependent will be the first of the month immediately following the date of marriage. If the membership application is not submitted within 31 days of the date of marriage and the Eligible Dependent is a Late Enrollee, the effective date of coverage will be the Group's anniversary date.
   2. If a Member becomes otherwise ineligible for group membership under this Benefit Plan due to legal separation, divorce, annulment, or death, coverage for the Subscriber's Spouse and/or Dependents under Family Coverage will cease, effective the first of the month immediately following timely notice of the event causing ineligibility.

      If living in the Sanford Health Plan Service Area (see *Service Area* in Introduction Section), a Member has the option to continue coverage through one of Sanford Health Plan's individual plans. For more information on options available through Sanford Health Plan, visit www.sanfordhealthplan.com/ndpers or call Member Services toll-free at (800) 499-3416 | TTY/TDD: (877) 652-1844 *(toll-free)*.

      There may also be other coverage options through the Health Insurance Marketplace, Medicaid, or other group health plan coverage options (such as another employer's plan) through what is called a "special enrollment period." The cost of these options may vary depending on a Subscriber's individual circumstances. To learn more about offerings on the Marketplace, and options outside the Sanford Health Plan Service Area, visit www.healthcare.gov or call (800) 318-2596 | TTY/TDD: (855) 889-4325.

C. The Subscriber is responsible for notifying the Plan Administrator (NDPERS) and Sanford Health Plan of any change in family status within 31 days of the change. The effective date of coverage for dependents added to this Benefit Plan within the designated time period will be the date of birth, physical placement, or the first of the month immediately following the date established by court order. If a membership application is not submitted within the designated time period and the Eligible Dependent is a Late Enrollee, the effective date of coverage will be the Group's anniversary date.

   The following provisions will apply:
   1. At the time of birth, natural children will automatically be added to the Subscriber's Benefit Plan if Family Coverage is in force. If the Subscriber is enrolled under another Class of Coverage, the Subscriber must submit a membership application for the newborn child within 31 days of the date of birth. If the membership application is not submitted within the designated time period and the child is a Late Enrollee, the effective date of coverage will be the Group's anniversary date.
   2. Adopted children may be added to this Benefit Plan if a membership application, accompanied by a copy of the placement agreement or court order, is submitted to Sanford Health Plan within 31 days of physical placement of the child. If the membership application is not received in accordance with this provision and the child is a Late Enrollee, the effective date of coverage will be the Group's anniversary date.
   3. Children for whom the Subscriber or the Subscriber's living, covered spouse have been appointed legal guardian may be added to this Benefit Plan by submitting a membership application within 31 days of the date legal guardianship is established by court order. If the membership application is not received in accordance with this provision and the child is a Late Enrollee, the effective date of coverage will be the Group's anniversary date.
   4. Children for whom the Subscriber or the Subscriber's living, covered spouse are required by court order to provide health benefits may be added to this Benefit Plan by submitting a membership application within 31 days of the date established by court order. If the membership application is not received in accordance with this provision and the child is a Late Enrollee, the effective date of coverage will be the Group's anniversary date.
   5. If any of the Subscriber's children, who are beyond the age of 26 and incapable of self-sustaining employment by reason of a disabling condition and chiefly dependent upon the Certificate holder/Subscriber for support and maintenance, coverage will remain in effect as long as the disabled child remains dependent upon the Certificate holder/Subscriber or the Subscriber's spouse for

support and maintenance. If the Plan so requests, the Subscriber must provide proof of the child's disability within *thirty-one (31)* days of the Plan's request.

6. If a child is no longer an Eligible Dependent under this Benefit Plan, and the child is living in the Sanford Health Plan Service Area (see *Service Area* in the above Introduction Section), the Dependent has the option to continue coverage through one of Sanford Health Plan's individual plans. For more information on options available through Sanford Health Plan, visit www.sanfordhealthplan.com/ndpers or call Member Services toll-free at (800) 499-3416 | TTY/TDD: (877) 652-1844 *(toll-free)*. There may also be other coverage options through the Health Insurance Marketplace, Medicaid, or other group health plan coverage options (such as another employer's plan) through what is called a "special enrollment period." The cost of these options may vary depending on a Subscriber's individual circumstances. To learn more about offerings on the Marketplace, and options outside the Sanford Health Plan Service Area, visit www.healthcare.gov or call (800) 318-2596 | TTY/TDD: (855) 889-4325.
7. At the time of birth or adoption, other Eligible Dependents may be added to this Benefit Plan if a membership application is submitted to NDPERS within 31 days of birth or physical placement of the adopted child. If the membership application is not received in accordance with this provision, and the Eligible Dependent is a Late Enrollee, the effective date of coverage will be the Group's anniversary date.

D. Employees and/or dependents who previously declined coverage under this Benefit Plan will be able to enroll under this Benefit Plan if each of the following conditions are met:
   1. During the initial enrollment period the employee or dependent states, in writing, that coverage under a group health plan or health insurance coverage was the reason for declining enrollment at such time.
   2. The employee's or dependent's coverage under a group health plan or other health insurance coverage:
      a. was either terminated as a result of loss of eligibility (Including loss as a result of legal separation, divorce, death, termination of employment or reduction of hours, loss as a result of having a subsequent opportunity for late enrollment [including the Annual Enrollment Period] or special enrollment under the Benefit Plan but again choosing not to enroll, or employer contributions toward such coverage were terminated; or
      b. was under COBRA and the coverage was exhausted.
   3. The employee requests such enrollment within 31 days after the exhaustion or termination of coverage.

   The effective date of coverage for an employee and/or dependent that previously declined coverage under this Benefit Plan, and is enrolling pursuant to this provision, will be the first of the month following the exhaustion or termination of the employee's and/or dependent's previous coverage. The employee and/or dependent shall be responsible for any and all premium payments from the effective date of coverage under this provision through the date the employee and/or dependent requests enrollment under the terms of this Benefit Plan.

   If the membership application is not received in accordance with this provision, and the Employee or Dependent is a Late Enrollee, the Late Enrollee's effective date of coverage will be the Group's anniversary date.

E. Employees and/or Dependents will be able to enroll under this Benefit Plan if either of the following conditions is met:
   1. The employee or dependent is covered under a Medicaid plan under Title XIX of the Social Security Act or under a state child health plan under Title XXI of the Social Security Act and the employee's or dependent's coverage under such a plan is terminated as a result of loss of eligibility. The employee must request enrollment within 60 days of the date of termination of coverage; or
   2. The employee or dependent becomes eligible for premium assistance under a Medicaid plan under Title XIX of the Social Security Act or under a state child health plan under Title XXI of the Social Security Act. The employee must request enrollment within 60 days of the date the employee or dependent is determined to be eligible for premium assistance.

      The effective date of coverage under this Benefit Plan for an employee and/or dependent enrolling pursuant to this provision will be the first day immediately following the termination of coverage or eligibility for premium assistance. The employee and/or dependent shall be responsible for any and all premium payments from the effective date of coverage under this provision through the date the employee and/or dependent requests enrollment under the terms of this Benefit Plan.

Note: The following do not qualify for a special enrollment period: 1) Loss of Minimum Essential Coverage due to failure to make premium payment and/or allowable rescissions of coverage; 2) Voluntarily terminating/dropping COBRA coverage before it runs out outside Annual Enrollment. COBRA coverage must be exhausted (usually 18 or 36 months) or another qualifying life event must occur before eligible for special enrollment.

Children's Health Insurance Program Reauthorization Act of 2009 (CHIPRA)

The Children's Health Insurance Program Reauthorization Act of 2009 grants Special Enrollment Rights to employees and dependents who are eligible for, but not enrolled in, a group health plan to enroll in the plan upon:

- losing eligibility for coverage under a State Medicaid or CHIP program, or
- becoming eligible for State premium assistance under Medicaid or CHIP.

In order to qualify for Special Enrollment, an Eligible Employee or Dependent must request coverage within sixty (60) days of either being terminated from Medicaid or CHIP coverage or being determined to be eligible for premium assistance. The Plan will also require the Eligible Employee to enroll. Special enrollment rights extend to all benefit packages available under the Plan. If you have questions about enrolling in your employer's plan under CHIPRA Special Enrollment Rights, contact the Department of Labor at www.askebsa.dol.gov or call (866) 444-3272 *(toll-free)*.

If you or your dependents are NOT currently enrolled in Medicaid or CHIP, and you think you or any of your dependents might be eligible for either of these programs, contact your State Medicaid or CHIP office or dial **(877) KIDS NOW** or **www.insurekidsnow.gov** to find out how to apply.

Section 4. How You Get Care

Identification cards

The Plan will send you an identification (ID) card when you enroll. You should carry your ID card with you at all times. You must show it whenever you receive services from a Provider, a health care Facility, or fill a prescription at a Plan pharmacy. If you fail to show your ID card at the time you receive health care services or prescription medications, you may be responsible for payment of the claim after the Participating Practitioner and/or Provider's timely filing period of one-hundred-eighty (180) days has expired. Your coverage will be terminated if you use your ID card fraudulently or allow another individual to use your ID card to obtain services.

If you do not receive your ID card within *thirty (30)* days after the effective date of your enrollment, or if you need replacement cards, call us at (800) 499-3416 or write to us at Sanford Health Plan, ATTN: NDPERS, PO Box 91110 Sioux Falls, SD 57109-1110. You may also request replacement cards by signing into your account at www.sanfordhealthplan.com/memberlogin. Information on creating an account is available at www.sanfordhealthplan.com/ndpers.

Conditions for Coverage

Members shall be entitled to coverage for the Health Care Services (listed Section 5, *Covered Services*) that are:

1. Medically Necessary and/or Preventive;
2. Received from or provided under the orders or direction of a Participating Provider;
3. Approved by the Plan, including Preauthorization/Prior Approval where required; and
4. Within the scope of health care benefits covered by the Plan.

However, the requirements to use Participating Providers and obtain preauthorization/prior approval do not apply to Emergency Conditions or Urgent Care Situations, both in and out of the Service Area. In such cases, services for Emergency Conditions and Urgent Care Situations will be covered if they are provided by a Non-Participating Provider.

If during an Emergency care or Urgent Care Situation, the Member is in the Service Area and is alert, oriented and able to communicate (as documented in medical records); the Member must direct the ambulance to the nearest Participating Provider.

Members are not required, but are strongly encouraged, to select a Primary Care Practitioner and/or Provider (PCP) and use that PCP to coordinate their Health Care Services.

In addition, all Health Care Services are subject to:

1. The exclusions and limitations described in Sections 5 and 6; and
2. Any applicable Copay, Deductible, and Coinsurance amounts as stated in this COI, your Summary of Benefits and Coverage (SBC), and your Summary of Pharmacy Benefits.

In-Network Coverage

In-Network coverage is provided under two (2) plan levels. For more information, see *Selecting a Health Care Provider* in Section 1. In-Network benefit payments pay according to coverage under:

1. Basic Plan; or
2. PPO Plan

Note: If you travel out of the Plan's Service Area for the purpose of seeking medical treatment outside the Plan's Service Area, as defined in this COI, without Preauthorization/Prior Approval for a service that requires such authorization/approval, your claims will be paid according to the Basic Plan benefits and stipulations set forth in Section 1. Additionally, the Member will receive the Basic Plan benefits if: 1) a PPO Health Care Provider is not available in the Member's area; or 2) if the Member either chooses or is referred to a Health Care Provider not participating in the Preferred Provider Organization (PPO).

Appropriate Access

Primary Care Practitioner and Hospital Providers

Appropriate access for Primary Care Practitioners and/or Providers and Hospital Provider sites is within *fifty (50)* miles of a Member's city of legal residence.

Specialty Practitioners and Other Providers

For other Participating Practitioners and Providers such as Specialty Physicians, Diagnostic Service Centers, Nursing Homes, and Rehabilitation Providers, appropriate access is within *fifty (50)* miles of a Member's city of legal residence. Appropriate access includes access to Participating Practitioners and Providers when the Member has traveled outside of the Service Area. If you are traveling within the Service Area where other Participating Practitioners and Providers are available then you must use Participating Practitioners and Providers.

Members who live outside of the Plan's Service Area must use the Plan's contracted Network of Participating Practitioners and Providers as indicated in the Plan's Provider Directory. Members who live outside the Service Area will receive Identification Cards that display their network logo along with instructions on how to access this Network. If a Member chooses to go to a Non-Participating Practitioner or Provider when appropriate access (within *fifty (50)* miles of a Member's city of legal residence) is available, claims will be processed at the Basic Plan (Out-of-Network) level.

Transplant Services

Transplant Services must be performed at designated Plan Participating Centers of Excellence and are not subject to Appropriate Access standards as outlined above. Transplant coverage includes related post-surgical treatment, medications, eligible travel, and living expenses and shall be subject to, and in accordance with, the provisions, limitations and terms of the Plan's transplant policy.

Case Management

Case management is a collaborative process that assesses, plans, implements, coordinates, monitors and evaluates the options and services required to meet an individual's health needs, using communication and available resources to promote quality, cost effective outcomes.

Cases are identified for possible case management, based on a request for review or the presence of a number of parameters, such as:

a. admissions that exceed the recommended or approved length of stay;
b. utilization of health care services that generates ongoing and/or excessively high costs;
c. conditions that are known to require extensive and/or long term follow up care and/or treatment.

Sanford Health Plan's case management process allows professional case managers to assist Members with certain complex and/or chronic health issues by coordinating complicated treatment plans and other types of complex patient care plans.

In consultation with case managers, Sanford Health Plan may approve coverage that extends beyond the limited time period and/or scope of treatment initially approved. This consultation also includes utilization management processes as described below.

All decisions made through case management are based on the individual circumstances of a Member's case. Each case is reviewed on its own merits by appropriate health plan medical professionals to ensure the best health outcome(s) of the Member.

Utilization Review Process – OVERVIEW

The Plan's Utilization Management Department is available between the hours of 8:00am and 5:00pm Central Time, Monday through Friday, by calling the Plan's toll-free number (888) 315-0885 or TTY/TDD: (877) 652-1844 *(toll-free)*. After business hours, you may leave a confidential voicemail for the Utilization Management Department and someone will return your call on the next business day. You can also fax the Plan at (701) 234-4547. The date of receipt for Non-Urgent Requests received outside of normal business hours will be the next business day. The date of receipt for Urgent Requests will be the actual date of receipt, whether or not it is during normal business hours. All Utilization Management Adverse Determinations will be made by the Sanford Health Plan Chief Medical Officer or appropriate Practitioner. All benefit Adverse Determinations will be made by a person assigned to coordinate the benefit, denial and Appeal process. **For detailed information on the below, see Section 8, *Problem Resolution.***

Prospective (Pre-service) Review of Services (Preauthorization/Prior Approval)

The Member is ultimately responsible for obtaining Preauthorization/Prior Approval from the Utilization Management Department in order to receive In-Network coverage. However, information provided by the Practitioner's office will also satisfy this requirement. Participating Health Care Practitioners and Providers have been given instructions on how to get the necessary authorizations/approvals for surgical procedures or hospitalizations/admissions you may need. Members are responsible to confirm with the Participating Practitioner and/or Provider that any required Plan Preauthorization/Prior Approval has been obtained.

Preauthorization/Prior Approval is the authorization/approval of a requested service prior to receiving the service. Preauthorization/Prior Approval (a pre-service determination) is designed to facilitate early identification of the treatment plan to ensure medical management and appropriate resources are provided throughout an episode of care. See *"Services that Require Prospective Review"* on the following pages.

The Plan determines approval for Preauthorization/Prior Approval based on appropriateness of care and service and existence of coverage. The Plan does not compensate practitioners and/or providers or other individuals conducting utilization review for issuing denials of coverage or service care. Any financial incentives offered to Utilization Management decision makers do not encourage decisions that result in underutilization and do not encourage denials of coverage or service.

Preauthorization/Prior Approval is required for all Inpatient Admissions of Members. This requirement applies but is not limited to:

1. Acute care Hospitalizations (including medical, surgical, and non-Emergency mental health and/or substance use disorder admissions);
2. Residential Treatment Facility Admissions; and
3. Rehabilitation center Admissions.

Note: Admissions and Hospitalizations require an overnight stay, as defined in Section 10. Admission before the day of non-Emergency surgery will not be authorized/approved unless the early admission is medically necessary and specifically approved by the Plan. Coverage for Hospital expenses prior to the day of surgery will be denied unless authorized/approved prior to being incurred.

Urgent Care Requests

In determining whether a request is "Urgent," the Plan shall apply the judgment of a Prudent Layperson, as defined in Section 10. A Practitioner, with knowledge of the Member's medical condition, who determines a request to be "Urgent", as defined in Section 10, shall have such a request treated as an Urgent Care Request.

Services that Require Prospective Review/Preauthorization/Prior Approval

1. Inpatient Hospital Admissions (includes Admissions for medical, surgical, mental health and/or substance use disorders);
2. Selected Outpatient Procedures including but not limited to:
   a. Covered Rhinoplasty Surgeries for Non-Cosmetic Reasons;
   b. Obstructive Sleep Apnea Treatment, except for Continuous Positive Airway Pressure (CPAP);
   c. Medically-Necessary Orthodontics;
3. Home Health, Hospice and Home IV therapy services;
4. Select Durable Medical Equipment (DME) including the below. For more details, see DME requiring Preauthorization/Prior Approval in Section 5(a):
   a. Prosthetic Limbs requiring replacement within 5 years;
   b. Insulin infusion devices;

c. Insulin pumps;
d. Continuous Glucose Monitoring Systems (CGM);
e. Electric wheelchairs;
f. External hearing aids for the treatment of a hearing loss that is not due to the gradual deterioration that occurs with aging and/or other lifestyle factors. For details, see Section 5(a), *Hearing services (testing, treatment, and supplies*

5. Skilled nursing and sub-acute care;
6. Dental Anesthesia and associated Hospitalizations for all Members age 9 and older;
7. Chronic Pain Management;
8. Transplant Services;
9. Infertility Services, including assisted reproductive technology for GIFT, ZIFT, ICSI and IVF;
10. Genetic Testing;
11. Osseointegrated implants, including Cochlear implants and bone-anchored (hearing aid) implants;
12. Select Specialty Medications including:
    a. Restricted Use Medications; and
    b. Growth Hormone Therapy/Treatment;
13. Bariatric Surgery; and
14. Referrals to Non-Participating Providers, which are recommended by Participating Providers. Preauthorization/Prior Approval is required for the purposes of receiving Basic Plan level coverage. If Preauthorization/Prior Approval is not obtained for referrals to Non-Participating Providers, the services will be covered at the Basic Plan level. Preauthorization/Prior Approval does not apply to services that are provided by Non-Participating Providers as a result of a lack of appropriate access to Participating Providers as described in this section.

Prospective (Non-Urgent Pre-service) Review Process for Elective Inpatient Hospitalizations, Non-Urgent Medical Care, and Pharmaceutical Benefit Requests

All requests for Preauthorization/Prior Approval are to be made by the Member or Practitioner and/or Provider's office at least *three (3)* business days prior to the scheduled admission or requested service. For Non-Urgent preauthorization/prior approval requests, the Plan's Utilization Management Department may review a request for a period of up to fifteen (15) calendar days from the date of the request, provided that all information supporting the request has been received. The Utilization Management Department will review the Member's medical request against standard criteria.

Determination of the appropriateness of an admission is based on standard review criteria and assessment of:

a. Patient medical information including:
    i. diagnosis
    ii. medical history
    iii. presence of complications and/or co-morbidities;
b. Consultation with the treating Practitioner, as appropriate;
c. Availability of resources and alternate modes of treatment; and
d. For admissions to facilities other than acute Hospitals, additional information may include, but is not limited to, the following:
    i. history of present illness
    ii. patient treatment plan and goals
    iii. prognosis
    iv. staff qualifications
    v. *twenty-four (24)* hour availability of qualified medical staff.

You are ultimately responsible for obtaining Preauthorization/Prior Approval from the Utilization Management Department. Failure to obtain Preauthorization/Prior Approval may result in coverage at the Basic Level (see Section 1). However, information provided by the Practitioner and/or Provider's office also satisfies this requirement.

Note: Members are responsible to confirm with the Participating Practitioner and/or Provider that any required Plan Preauthorization/Prior Approval has been obtained.

For medical necessity requests: the Utilization Management Department will review the Member profile information against standard criteria. A determination for *elective inpatient or non-Urgent Care Situations* will be made by the Utilization Management Department *within fifteen (15) calendar days* of receipt of the request. If the Utilization Management Department is unable to make a decision *due to matters beyond its control*, it may extend the decision timeframe once, for up to *fifteen* (*15) calendar days*. Within *fifteen (15*) *calendar days* of the request for authorization/approval, Sanford Health Plan must notify the Member or Member's Authorized Representative of the need for an extension and the date by which it expects to make a decision.

For benefit determinations: a person assigned to coordinate the benefit, denial and Appeal process will review the request using standards established by the Plan and, if the request is approved, provide notification of the determination, or if the request is denied, provide notification of the denial and relevant appeal rights. A benefit determination will be made *within fifteen (15) calendar days* of receipt of the request. If the Plan is unable to make a decision due to matters beyond its control, it may extend the decision timeframe once, for up to *fifteen (15) calendar days*. Within *fifteen (15) calendar days* of the request for authorization/approval, Sanford Health Plan must notify the Member or Member's Authorized Representative of the need for an extension and the date by which it expects to make a decision.

Lack of Necessary Information

If the Plan is unable to make a decision *due to lack of necessary information*, it must notify the Member or the Member's Authorized Representative of what specific information is necessary to make the decision *within fifteen (15)* calendar days of the Prospective (Pre-

service) Review request. Sanford Health Plan must give the Member or the Member's Authorized Representative a reasonable amount of time taking into account the circumstances, but not less than *forty-five (45)* calendar days to provide the specified information. In lieu of notifying the Member, the Plan may notify the Practitioner and/or Provider of the information needed, if the request for health care services came from the Practitioner and/or Provider.

The decision time period is suspended, and the Plan shall have the remainder of the fifteen (15) calendar days from receipt of the request for authorization/approval to consider the request, measured from the earlier of the date in which the Plan receives additional information from the Member or Practitioner or *forty-five (45)* days after the notification to the Member or Practitioner. The Prospective (Pre-service) Review determination shall either be Preauthorization/Prior Approval of the requested service, or additional review will be needed by the Plan Chief Medical Officer; however, the decision will be made within *fifteen (15) calendar* days of that date. If the information is not received by the end of *the forty-five (45) calendar* day extension, Sanford Health Plan will deny the request.

If the Plan receives a request that fails to meet the procedures for Prospective (Pre-service) Review requests, the Plan will notify the Practitioner or Member of the failure, and proper procedures to be followed, as soon as possible but no later than *five (5)* calendar days after the date of the failure. Notification may be oral unless the Practitioner or Member request written notification.

Sanford Health Plan will give written and/or electronic notification of the *determination to authorize/approve or deny* the service *within fifteen (15) calendar* days of the request (or in the case of an extension, of the end of the timeframe given to provide information) to the Member, or the Member's Authorized Representative, attending Practitioner and those Providers involved in the provision of the service. The Utilization Management Department will assign an authorization number for the approved service.

If the Plan's determination is an Adverse Determination, the Plan shall provide written notice in accordance with the *Written Notification Process for Adverse Determinations* procedure below. At this point, the Member can request an Appeal of Adverse Determination. Refer to "*Problem Resolution*" in Section 8 for details.

Prospective Review Process for Urgent/Emergency (Urgent Pre-service) Medical Care and Pharmaceutical Requests

An **Emergency Medical Condition** is a medical condition of recent onset and severity, including severe pain, that would lead a prudent layperson acting reasonably and possessing an average knowledge of health and medicine to believe that the absence of immediate medical attention could reasonably be expected to result in serious impairment to bodily function, serious dysfunction of any bodily organ or part, or would place the person's health, or with respect to a pregnant woman, the health of the woman or her unborn child, in serious jeopardy.

An **Urgent Care Situation** is a degree of illness or injury, which is less severe than an Emergency Condition, but requires prompt medical attention within *twenty-four (24)* hours, such as stitches for a cut finger. **Urgent Care Request** means a request for a health care service or course of treatment with respect to which the time periods for making a non-Urgent Care Request determination:

1. Could seriously jeopardize the life or health of the Member or the ability of the Member to regain maximum function, based on a Prudent Layperson's judgment; or
2. In the opinion of a Practitioner with knowledge of the Member's medical condition, would subject the Member to severe pain that cannot be adequately managed without the health care service or treatment that is the subject of the request.

If an Urgent Care Situation occurs, Members should contact their Primary Care Provider immediately, if one has been selected, and follow his or her instructions. A Member may always go directly to a participating urgent care or after-hours clinic. In determining whether a request is "Urgent," the Plan shall apply the judgment of a Prudent Layperson that possesses an average knowledge of health and medicine, as defined in Section 10. When a Practitioner with knowledge of the Member's medical condition determines a request to be an Urgent Care Situation, the Plan shall treat such a request as an Urgent Care Request.

Note: Prospective (Pre-service) Review (Preauthorization/Prior Approval) is not required for maternity admissions, Emergency Medical Conditions or Urgent Care Situations. However, the Plan must be notified by the Member as soon as reasonably possible and no later than *forty-eight (48)* hours after the Member is physically or mentally able to do so. A Member's Authorized Representative may notify the Plan on the Member's behalf with written permission of the Member.

For Urgent Care Requests (Prospective (Pre-service) Reviews): the determination for medical care, including care for behavioral, mental health, and/or substance use disorders will be made by the Utilization Management Department as soon as possible (taking into account medical exigencies), but no later than *seventy-two (72) hours* after receipt of the request. Notification of the determination will be made to the Member or the Member's Authorized Representative, Practitioner and those Providers involved in the provision of the service via telephone by the Utilization Management Department as soon as possible but no later than within *seventy-two (72) hours* of receipt of the request. For authorizations/approvals and Adverse Determinations, the Plan will give electronic or written notification of the decision to the Member or the Member's Authorized Representative, Practitioner and those Providers involved in the provision of the service as soon as possible (taking into account medical exigencies) but no later than within *three (3)* calendar days of the telephone notification.

Lack of Necessary Information

If the Plan is unable to make a decision due to lack of necessary information, it may extend the decision timeframe once for up to *forty-eight (48) hours* to request additional information. Within *twenty-four (24) hours* after receipt of the request, the Plan will notify the Member or the Member's Authorized Representative of what specific information is necessary to make the decision. In lieu of notifying the Member, the Plan can notify the Practitioner of the information needed if the request for health care services came from the Practitioner. Sanford Health Plan must give the Member or the Member's Authorized Representative a reasonable amount of time taking into account the circumstances, but not less than *forty-eight (48) hours* to provide the specified information. If the Plan receives a request that fails to meet the procedures for Urgent Prospective (Pre-service) Review requests, the Plan will notify the Practitioner and Member of the failure and proper procedures to be followed as soon as possible but no later than *twenty-four (24) hours* after the date of the failure. Notification may be oral unless the Practitioner or Member request written notification. The Member, or the Member's Authorized Representative, Practitioner and those Providers involved in the provision of the service will be notified by telephone of the Plan's determination as soon as possible but no later

than forty-eight (48) hours after the earlier of: 1) the Plan's receipt of the requested information or 2) the end of the period provided to submit the requested information. The Plan will also give electronic or written notification of the decision as soon as possible but no later than within *three (3)* calendar days of the telephone notification. Failure to submit necessary information is grounds for denial of authorization/approval.

If the Plan's determination is an Adverse Determination, the Plan shall provide written notice in accordance with the *Written Notification Process for Adverse Determinations* procedure below. At this point, the Member can request an Appeal of Adverse Determination. Refer to "*Problem Resolution*" in Section 8 for details.

Concurrent Review Process for Medical Care Requests

Concurrent Review is utilized for medical care, including care for behavioral, mental health, and/or substance use disorders when a request for an extension of an approved ongoing course of treatment over a period of time or number of treatments is warranted. Additional stay days must meet the continued stay review criteria and, if acute levels of care criteria are not met, a decision to authorize/approve further treatment must be made at that time. Preauthorization/Prior Approval of inpatient health care stays will terminate on the date the Member is to be discharged from the Hospital or Facility (as ordered by the attending Practitioner). Hospital/Facility days accumulated beyond the ordered discharge date will not be authorized/approved unless the continued stay criteria continue to be met. Charges by Practitioners and/or Providers associated with these non-authorized/approved days are non-covered.

The health care service or treatment that is the subject of the Adverse Determination shall be continued without liability to the Member until the Member has been notified of the determination by the Plan with respect to the internal review request made pursuant to the Plan's Appeal Procedures. Any reduction or termination by the Plan during the course of treatment before the end of the period or number treatments shall constitute an Adverse Determination. For requests to extend the course of treatment beyond the initial period of time or the number of treatments, if the request is made at least twenty-four (24) hours prior to the expiration of the prescribed period of time or number of treatments, the Plan shall make an urgent Concurrent determination and notify the Member, or the Member's Authorized Representative, Practitioner and those Providers involved in the provision of the service by telephone of the determination as soon as possible taking into account the Member's medical condition but in no event more than twenty-four (24) hours after the date of the Plan's receipt of the request.

The Plan will provide electronic or written notification of an authorization/approval to the Member or the Member's Authorized Representative, Practitioner and those Providers involved in the provision of the service within *three (3) calendar* days after the telephone notification. The Plan shall provide written or electronic notification of the Adverse Determination to the Member or the Member's Authorized Representative and those Providers involved in the provision of the service sufficiently in advance (but no later than within *three (3) calendar* days of the telephone notification) of the reduction or termination to allow the Member or, the Member's Authorized Representative to file an Appeal request to review of the Adverse Determination and obtain a determination with respect to that review before the benefit is reduced or terminated.

In cases where the Member is not at financial risk, Members will not be notified of an Adverse Determination. Members will be notified in all other cases.

Urgent Concurrent Reviews Requested Within Twenty-Four (24) Hours of Expiring Authorization/Approval

If the request to extend Urgent Concurrent Review is not made at least *twenty-four (24) hours* prior to the expiration of the prescribed period of time, or number of treatments for medical care, including care for behavioral, mental health, and/or substance use disorders, Sanford Health Plan will treat it as an Urgent Prospective (Pre-service) Review decision and make the decision as soon as possible (taking into account the medical exigencies) but no later than *seventy-two (72) hours* after the request. For authorizations/approvals and denials, the Plan will give telephone notification of the decision to the Member, Practitioner and those Providers involved in the provision of the service within *seventy-two (72) hours* of receipt of the request. The Plan will give written or electronic notification of the decision to the Member, Practitioner and those Providers involved in the provision of the service as soon as possible but no later than within *three (3) calendar* days of the telephone notification.

If the Plan's determination is an Adverse Determination, the Plan shall provide written notice in accordance with the *Written Notification Process for Adverse Determinations* procedures outlined below. At this point, the Member can request an Appeal of Adverse Determination. Refer to the "*Problem Resolution*" in Section 8 for details.

Retrospective (Post-service) Review Process for Medical Care Requests

Retrospective (Post-service) Review is used by Sanford Health Plan for medical care, including care for behavioral, mental health, and/or substance use disorders to review services that have already been utilized by the Member where such services have not involved a Prospective (Pre-service) Review request, and where the review is not limited to the veracity of documentation, accuracy of coding, or adjudication for payment. The Plan will review the request and make the decision to approve or deny within *thirty (30)* calendar days of receipt of the request. Written or electronic notification will be made to the Member, Practitioner and those Providers involved in the provision of the service within *thirty (30) calendar* days of receipt of the request. In cases where the Member is not at financial risk, Members will not be notified of an Adverse Determination. Members will be notified in all other cases.

If the Utilization Management Department is unable to make a decision due to matters beyond its control, it may extend the decision timeframe once, for up to *fifteen (15)* calendar days. Within *thirty (30)* calendar days of the request for review, Sanford Health Plan must notify the Member or Member's Authorized Representative of the need for an extension and the date by which it expects to make a decision.

Lack of Necessary Information

If the Utilization Management Department is unable to make a decision due to lack of necessary information, it must notify the Member or the Member's Authorized Representative of what specific information is necessary to make the decision within *thirty (30) calendar* days of the Retrospective (Post-service) Review request. Sanford Health Plan must give the Member or the Member's Authorized Representative *forty-five (45)* calendar days to provide the specified information. In lieu of notifying the Member, the Plan can notify the Practitioner of the information needed if the request for health care services came from the Practitioner.

The decision time period is suspended from the date of the notification to the Member or Practitioner as applicable, until the earlier of the date on which the Plan receives any information from the Member or Practitioner or *forty-five (45)* days after the notification to the Member or Practitioner. A decision and written or electronic notification to the Member, Practitioner and those Providers involved in the provision of the service will be made within *fifteen (15)* calendar days of that date. If the information is not received by the end of the *forty-five (45)* calendar day extension Sanford Health Plan will issue an Adverse Determination and written or electronic notification will be made to the Member, Practitioner and those Providers involved in the provision of the service within *fifteen (15)* calendar days.

If the Plan's determination is an Adverse Determination, the Plan shall provide written notice in accordance with the *Written Notification Process for Adverse Determinations* procedure below. At this point, the Member can request an Appeal of Adverse Determination. Refer to the "Problem Resolution" in Section 8 for details.

Written Notification Process for Adverse Determinations

The written notifications for Adverse Determinations will include the following:

1. The specific reason for the Adverse Determination in easily understandable language.
2. Reference to the specific internal Plan rule, provision, guideline, or protocol on which the determination was based and notification that the Member will be provided a copy of the actual plan provisions, guidelines, and protocols free of charge upon request. Reasons for any denial or reimbursement or payment for services with respect to benefits under the Plan will be provided within 30 business days of a request.
3. If the Adverse Determination is regarding coverage for a mental health and/or substance use disorder, a statement notifying members of their opportunity to request treatment and diagnosis code information free of charge. Any request for diagnosis and treatment code information may not be (and is not) considered a request for an internal appeal or external review.
4. If the Adverse Determination is based in whole or in part upon the Member failing to submit necessary information, the notice shall include, a description of any additional material or information which the Member failed to provide to support the request, including an explanation of why the material is necessary.
5. If the Adverse Determination is based on medical necessity or an Experimental or Investigational treatment or similar exclusion or limit, either an explanation of the scientific or clinical judgment for making the determination, applying the terms of the Plan to the Member's medical circumstances or a statement that an explanation will be provided to the Member free of charge upon request.
6. For Mental Health and/or Substance Use Disorder (MH/SUD) Adverse Determinations, if information on any medical necessity criteria is requested, documents will be provided for both MH/SUD and medical/surgical benefits within 30 business days of a Member/Member's Authorized Representative/Provider's request. This information will include documentation of processes, strategies, evidentiary standards and other factors used by the plan, in compliance with the Mental Health Parity and Addiction Equity Act of 2008 (MHPAEA).
7. If the Adverse Determination is based on medical necessity, a written statement of clinical rationale, including clinical review criteria used to make the decision if applicable. If the denial is due to a lack of clinical information, a reference to the clinical criteria that have not been met must be included in the letter. If there is insufficient clinical information to reference a specific clinical practice guideline or policy, the letter must state the inability to reference the specific criteria and must describe the information needed to render a decision.
8. A description of the Plan's Appeal procedures including how to obtain an expedited review if necessary and any time limits applicable to those procedures, the right to submit written comments, documents or other information relevant to the appeal; an explanation of the Appeal process including the right to member representation; how to obtain an Expedited review if necessary and any time limits applicable to those procedures; and the timeframe the Member has to make an appeal and the amount of time the Plan has to decide it (including the different timeframes for Expedited Appeals).
9. If the Adverse Determination is based on medical necessity, notification and instructions on how the Practitioner can contact the appropriate Practitioner and/or Provider to discuss the determination.
10. If a determination is adverse, the right to bring a civil action in a court of competent jurisdiction.
11. To contact the North Dakota Insurance Commissioner at any time at:

    North Dakota Insurance Department
    600 E. Boulevard Ave.
    Bismarck, ND 58505-0320

    Email: insurance@nd.gov
    Consumer hotline: (800) 247-0560 *(toll-free)*
    TTY: (800) 366-6888 *(toll-free)*

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Section 5(a) Medical services and supplies provided by health care Practitioners and Providers

IMPORTANT		IMPORTANT

Here are some important things you should keep in mind about these benefits:

Please remember that all benefits are subject to the definitions, limitations, and exclusions in this Certificate of Insurance and are payable only when we determine they are Medically Necessary.

Be sure to read Section 4, "How you get care", for valuable information about conditions for coverage.

You or your Practitioner and/or Provider must get Preauthorization/Prior Approval of some services in this Section. The benefit description will say "**Note:** Preauthorization/Prior Approval is required" for certain services.

Failure to get Preauthorization/Prior Approval may result in a reduction or denial of benefits (See Services requiring Preauthorization/Prior Approval in Section 4.)

Benefit Description

Diagnostic and treatment services

We cover professional services from Practitioners, Providers, Physicians, Nurse Practitioners, and Physician's Assistants in a Practitioner and/or Provider's office, an urgent care center; as well as medical office consultations, and second surgical opinions.

Note: You or your Practitioner and/or Provider must get Preauthorization/Prior Approval of the following services; Failure to get Preauthorization/Prior Approval may result in a reduction or denial of benefits (See Services requiring Preauthorization/Prior Approval in Section 4.):

- Inpatient Hospital stays, Outpatient surgical procedures, and Skilled Nursing Facility stays

Lab, x-ray and other diagnostic test coverage includes:

- Blood tests
- Urinalysis
- Non-routine PAP tests
- Non-routine PSA tests
- Pathology
- X-rays
- PET Scans
- DEXA Scans
- Non-routine mammograms
- CT Scans/MRI
- Ultrasound
- Electrocardiogram (EKG)
- Electroencephalography (EEG)

Not Covered: *Thermograms or thermography*

Preventive care, adults & children

Note: The Plan will pay up to a Maximum Benefit Allowance of $200 per Member per Benefit Period for any *non-routine screening services* not listed below or not recommended with a rating of "A" or "B" by the United States Preventive Services Task Force. Such *non-routine screening services* will be subject to Copayment, Deductible and Coinsurance amounts after the $200 Benefit Allowance has been met.

A Health Care Provider will counsel Members as to how often preventive services are need based on the age, gender and medical status of the Member. Services include:

- **Well Child Care to the Member's 6th birthday**
  - Seven (7) visits for Members from birth through 12 months;
  - Three (3) visits for Members from 13 months through 24 months; and
  - One (1) visit per Benefit Period for Members 25 months through 72 months.
- **Well Child Care Immunizations to the Member's 6th Birthday**
  - Covered immunizations are those that have been published as policy by the Centers for Disease Control, including DPT (Diphtheria-Pertussis-Tetanus), MMR (Measles-Mumps-Rubella), Hemophilus, Influenza B, Hepatitis, Polio, Varicella (Chicken Pox), Pneumococcal Disease, Influenza Virus.
- **Preventive Screening Services for Members age 6 and older**
  - One routine physical examination per Member per Benefit Period.
  - Routine diagnostic screenings.
  - Routine screening procedures for cancer.
- **Mammography Screening Services**
  - One (1) screening service for Members between the ages of 35 and 40.
  - One (1) screening service per year per Members ages 40 and older.
  - Additional benefits will be available for prostate cancer screening when Medically Necessary and ordered by a Professional Health Care Provider.
- **Routine Pap Smear**
  - One (1) Pap smear per Member per Benefit Period. Office Visit Copay applies.
  - Additional benefits will be available for Pap smears when Medically Necessary and ordered by a Professional Health Care Provider.
- **Prostate Cancer Screening for the following: Asymptomatic Males Ages 50 and Older; Males ages 40 and Older of African American descent; and Males Ages 40 with a Family History of Prostate Cancer**

- One (1) digital rectal examination annually per Member. Office Visit Copay applies.
- One (1) prostate-specific antigen test annually per Member. Office Visit Copay applies.
- Additional benefits will be available for prostate cancer screening when Medically Necessary and ordered by a Professional Health Care Provider.

- **Fecal Occult Blood Testing for Colorectal Cancer Screening for Members age 50 and older**
  - One (1) test per Member per benefit period.
- **Immunizations other than Well Child Care**
  - Covered immunizations are those that have been published as policy by the Centers for Disease Control, Including Tetanus, Influenza Virus, Pneumococcal Pneumonia, MMR (Measles-Mumps-Rubella), Varicella (Chicken Pox), Shingles (Zoster), Meningococcal Disease, and Human Papillomavirus (HPV). Certain age restrictions may apply.

Not Covered:

- *Physical examinations, including but not limited to: pre-employment and employment physicals, insurance physicals, or government licensing physicals (including, but not limited to, physicals and eye exams for drivers' licenses)*
- *Virtual colonoscopies*

Maternity care

Note: Due to the inability to predict admission; you or your Practitioner and/or Provider are encouraged to notify the Plan of your expected due date when the pregnancy is confirmed. You are also encouraged to notify the Plan of the date of scheduled C-sections when it is confirmed.

Covered maternity services include:

- Screening for gestational diabetes mellitus during pregnancy
  - Testing includes a screening blood sugar followed by a glucose tolerance test if the sugar is high.
  - Outpatient Nutrition Care Services available for gestational diabetes and diabetes mellitus. See
- Anemia screening
- Bacteruria (bacteria in urine) screening
- Hepatitis B screening
- Rh (Rhesus) incompatibility screening: first pregnancy visit and 24-28 weeks gestation
- Genetic counseling or testing that has in effect a rating of "A" or "B" in the current recommendations of the United States Preventive Services Task Force unless excluded under "Not Covered" conditions below. *Preauthorization/Prior Approval is required*.
- Prenatal vitamins without Cost Sharing if prescribed by a Practitioner
- Deductible for delivery services is waived if services are rendered at a PPO Provider, and the Member is enrolled in Sanford Health Plan's *Healthy Pregnancy Program*.

Maternity care includes prenatal through postnatal maternity care and delivery, and care for complications of pregnancy in the mother. We cover up to two (2) routine ultrasounds per pregnancy to determine fetal age, size, and development, per plan guidelines.

The minimum inpatient Hospital stay, when complications are not present, ranges from a minimum of *forty-eight (48)* hours for a vaginal delivery to a minimum of *ninety-six (96)* hours for a cesarean birth, excluding the day of delivery. Such inpatient stays may be shortened if the treating Practitioner and/or Provider, after consulting with the mother, determines that the mother and child meet certain criteria and that discharge is medically appropriate. If the inpatient stay is shortened, a post-discharge follow-up visit shall be provided to the mother and newborn by Participating Practitioners and/or Providers competent in postpartum care and newborn assessments.

Note: We encourage you to participate in our *Healthy Pregnancy Program*; Call toll-free (888) 315-0885 | TTY/TDD: (877) 652-1844 *(toll-free)* to enroll.

Not Covered:

- *Amniocentesis or chorionic villi sampling (CVS) solely for sex determination.*
- *Genetic testing when performed in the absence of symptoms or high risk factors for a heritable disease; genetic testing when knowledge of genetic status will not affect treatment decisions, frequency of screening for the disease, or reproductive choices; genetic testing that has been performed in response to direct-to-consumer marketing and not under the direction of the Member's Practitioner and/or Provider.*

Healthy Pregnancy Program – DETAILS

The *Healthy Pregnancy Program* is designed to identify women at higher risk for premature birth and to prevent the incidence of preterm birth through assessment, intervention and education. Participation in the *Healthy Pregnancy Program* is voluntary and free to all Members in the Plan.

To enroll, call Sanford Health Plan's Care Management Department at (877) 652-1847 *(toll-free)* | TTY/TDD: (877) 652-1844 *(toll-free)* after the first prenatal visit, preferably before the 12th week and no later than the 34th week. You may also send a secure message to the Plan by signing into your account at www.sanfordhealthplan.com/memberlogin, and a representative from the Care Management Department will contact you to complete your enrollment in the program.

Enrolling in the *Healthy Pregnancy Program* is easy and free to the Member. When a Member enrolls, a Case Manager will review a brief preterm labor risk assessment questionnaire with the Member. To complete this questionnaire, Members will need their Member ID number; Professional Health Care Provider's name, address and telephone number; and expected due date. As a program participant, the Member will receive information concerning pregnancy and prenatal care.

Note: When a Member is enrolled under the *Healthy Pregnancy Program*, the Deductible Amount is waived for delivery services received from a PPO Health Care Provider.

Newborn care

A newborn is eligible to be covered from birth. Members must complete and sign the Plan's enrollment application form requesting coverage for the newborn within *thirty-one (31)* days of the infant's birth. For more information, see Section 3 on Enrollment and "*When and How Dependent Coverage Begins"*.

We cover care for the enrolled newborn child from the moment of birth including care and treatment for illness, injury, premature birth and medically diagnosed congenital defects and birth abnormalities (Please refer to "Reconstructive Surgery" in Section 5(a) for coverage information of surgery to correct congenital defects).

Not Covered: *Newborn delivery and nursery charges for adopted dependents prior to the adoption-bonding period (See Section 3, "When and How Dependent Coverage Begins.")*

Infertility services

Note: Preauthorization/Prior Approval is required; failure to get Preauthorization/Prior Approval may result in a reduction or denial of benefits. (See Services requiring Preauthorization/Prior Approval in Section 4.)

- Benefits are available for services, supplies and medications related to artificial insemination (AI) and assisted reproductive technology (ART); includes gamete intrafallopian transfer (GIFT), zygote intrafallopian transfer (ZIFT), intracytoplasmic sperm injection (ICSI), or in-vitro fertilization (IVF). *Prior Approval is required for assisted reproductive technology for GIFT, ZIFT, ICSI and IVF.*

Note: Benefits are subject to a $500 Lifetime Infertility Services Deductible Amount and a $20,000 Lifetime Maximum per Member. This Coinsurance Amount and the Infertility Services Deductible Amount do not apply toward the Out-of-Pocket Maximum Amount.

Not Covered:

- *Donor eggs including any donor treatment and retrieval costs, donor sperm, cryopreservation or storage of unfertilized sperm or eggs; Surrogate pregnancy and delivery; Gestational Carrier pregnancy and delivery; and preimplantation genetic diagnosis testing;*
- *Genetic testing when performed in the absence of symptoms or high risk factors for a heritable disease; genetic testing when knowledge of genetic status will not affect treatment decisions, frequency of screening for the disease, or reproductive choices; genetic testing that has been performed in response to direct-to-consumer marketing and not under the direction of the Member's Practitioner and/or Provider;*
- *Reversals of prior sterilization procedures; and*
- *Any expenses related to surrogate parenting.*

Allergy care

We cover:

- Testing and treatment
- Allergy injections
- Allergy serum

Not Covered:

- *The following allergy testing modalities: nasal challenge testing, provocative/neutralization testing for food and food additive allergies, leukocyte histamine release, Rebuck skin window test, passive transfer or Prausnitz-Kustner test, cytotoxic food testing, metabisulfite testing, candidiasis hypersensitivity syndrome testing, IgG level testing for food allergies, general volatile organic screening test and mauve urine test.*
- *Methods of desensitization treatment: provocation/neutralization therapy for food/chemical or inhalant allergies by sublingual, intradermal and subcutaneous routes, Urine Autoinjections, Repository Emulsion Therapy, Candidiasis Hypersensitivity Syndrome Treatment or IV Vitamin C Therapy (unless otherwise specified as covered in this COI).*
- *Clinical ecology, orthomolecular therapy, vitamins (unless otherwise specified as covered in this COI) or dietary nutritional supplements, or related testing provided on an inpatient or outpatient basis.*

Dialysis

Dialysis for renal disease, unless or until the Member qualifies for federally funded dialysis services under the End Stage Renal Disease (ESRD) program. Services include equipment, training, and medical supplies required for effective dialysis care. See *Outpatient Nutrition Care Services* in this Section for additional Chronic Renal Failure benefits. Coordination of Benefit (COB) Provisions apply. For more information on COB, please see Section 9.

Treatment therapies

We cover:

- Inhalation Therapy
- Radiation Therapy
- Chemotherapy, regardless of whether the Member has separate prescription drug benefit coverage
- Pheresis Therapy

Diabetes supplies, equipment, and education

- Blood glucose monitors, including continuous glucose monitoring systems (CGM), *Preauthorization/Prior Approval is required*
- Blood glucose monitors for the legally blind
- Test strips for glucose monitors
- Urine testing strips
- Insulin injection aids
- Lancets and lancet devices
- Insulin pumps and all supplies for the pump, *Preauthorization/Prior Approval is required*
- Routine foot care, including toe nail trimming
- Syringes
- Insulin infusion devices, *Preauthorization/Prior Approval is required*
- Custom diabetic shoes and inserts limited to *one (1) pair* of depth-inlay shoes and *three (3) pairs* of inserts; or *one (1) pair* of custom molded shoes (including inserts) and three *(3)* additional pairs of inserts
- Prescribed oral agents for controlling blood sugars
- Glucose agents
- Glucagon kits
- Insulin measurement and administration aids for the visually impaired and other medical devices for the treatment of diabetes
- Dilated Eye Examination, limited to one (1) examination per Member per Benefit Period

Diabetes self-management training and education services shall only be covered if:

- the service is provided by a Physician, nurse, dietitian, pharmacist or other licensed health care Practitioner and/or Provider who satisfies the current academic eligibility requirements of the National Certification Board for Diabetic Educators and has completed a course in diabetes education and training, or has been certified by a diabetes educator; and
- the training and education is based upon a diabetes program recognized by the American Diabetes Association; or a diabetes program with a curriculum approved by the American Diabetes Association or the North Dakota Department on Health.

Not Covered: *Food items for medical nutrition therapy*

Outpatient rehabilitative and habilitative therapy services

Coverage is as follows for outpatient rehabilitative and habilitative therapy services, which include the management of limitations and disabilities, and services or programs that help maintain or prevent deterioration in physical, cognitive, or behavioral function:

- **Physical Therapy:** Benefits are subject to medical necessity and performed by or under the direct supervision of a licensed Physical Therapist. Services must be provided in accordance with a prescribed plan of treatment ordered by a Professional Health Care Provider.
- **Occupational Therapy:** Benefits are available for 90 consecutive calendar days, beginning on the date of the first therapy treatment for the condition. Additional benefits may be allowed after the 90 days when Medically Necessary. Benefits are available when performed by or under the direct supervision of a licensed Occupational Therapist. Services must be provided in accordance with a prescribed plan of treatment ordered by a Professional Health Care Provider.
- **Speech Therapy:** Benefits are available for 90 consecutive calendar days, beginning on the date of the first therapy treatment for the condition. Additional benefits may be allowed after the 90 days when Medically Necessary. Benefits are available when performed by or under the direct supervision of a certified and licensed Speech Therapist. Services must be provided in accordance with a prescribed plan of treatment ordered by a Professional Health Care Provider.
- **Respiratory/Pulmonary Therapy:** Available when services are performed by or under the direct supervision of a registered respiratory care practitioner for the treatment, management, control and care of Members with deficiencies and abnormalities of the cardiorespiratory system. Services must be provided in accordance with an order from a Professional Health Care Provider.
- **Cardiac Rehabilitation Services:** Cardiac Rehabilitation Services must begin within 2 months following discharge from the Hospital. Twelve (12) visits per Member per episode, limited to the following diagnosed medical conditions:
  - Myocardial Infarction
  - Coronary Artery Bypass Surgery
  - Coronary Angioplasty and Stenting
  - Heart Valve Surgery
  - Heart Transplant Surgery

Not Covered:

- *Educational or non-medical services for learning disabilities and/or behavioral problems, including those educational or non-medical services provided under the Individuals with Disabilities Education Act (IDEA)*
- *Maintenance Care that is typically long-term, by definition not therapeutically necessary but is provided at regular intervals to promote health and enhance the quality of life; this includes care provided after maximum therapeutic improvement, without a trial of withdrawal of treatment, to prevent symptomatic deterioration or initiated by Members without symptoms in order to promote health and to prevent further problems*
- *Services provided in the Member's home for convenience*
- *Hot/cold pack therapy including polar ice therapy and water circulating devices*

Phenylketonuria (PKU)

Testing, diagnosis and treatment of Phenylketonuria (PKU) including dietary management, formulas, Case Management, intake and screening, assessment, comprehensive care planning and service referral.

Not Covered:

- *PKU dietary desserts and snack items*
- *Low protein modified food products or medical food for PKU to the extent those benefits are available under a Department of Health program or other state agency*

Amino acid-based elemental oral formulas

Coverage for medical foods and low-protein modified food products determined by a Practitioner and/or Provider to be medically necessary for the therapeutic treatment of an inherited metabolic disease of amino acid or organic acid.

Not Covered:

- *Dietary desserts and snack items*
- *Low protein modified food products or medical food for PKU to the extent those benefits are available under a Department of Health program or other state agency*

Outpatient nutrition care services

Benefits are available for the following medical conditions:

- **Hyperlipidemia** – Maximum Benefit Allowance of two (2) Office Visits per Member per Benefit Period.
- **Gestational Diabetes** – Maximum Benefit Allowance of two (2) Office Visits per Member per Benefit Period.
- **Chronic Renal Failure** – Maximum Benefit Allowance of four (4) Office Visits per Member per Benefit Period.
- **Diabetes Mellitus** – Maximum Benefit Allowance of two (4) Office Visits per Member per Benefit Period.
- **Anorexia Nervosa** – Maximum Benefit Allowance of four (4) Office Visits per Member per Benefit Period.
- **Bulimia** – Maximum Benefit Allowance of four (4) Office Visits per Member per Benefit Period.
- **PKU** – Maximum Benefit Allowance of four (4) Office Visits per Member per Benefit Period.

Not Covered:

- *Education Programs or Tutoring Services (not specifically defined elsewhere) including, but not limited to, education on self-care or home management*
- *Lifestyle Improvement Services, such as physical fitness programs, health or weight loss clubs or clinics*

Hearing services (testing, treatment, and supplies)

Hearing services coverage is provided for the following:

- Sudden sensorineural hearing loss (SSNHL), and diagnostic testing and treatment related to acute illness or injury.

Note: Preauthorization/Prior Approval is required for the following services; failure to get Preauthorization/Prior Approval may result in a reduction or denial of benefits. (See Services requiring Preauthorization/Prior Approval in Section 4.):

1. External hearing aids for the treatment of a hearing loss that is not due to the gradual deterioration that occurs with aging and/or other lifestyle factors.
    a. Benefit is limited to one hearing aid, per ear, per Member, every three (3) years, in alignment with medical necessity and Plan guidelines.
    b. The provision of hearing aids must meet criteria for rehabilitative and/or habilitative services coverage and either:
        i. provide significant improvement to the Member within two (2) months, as certified on a prospective and timely basis by the Plan; or
        ii. help maintain or prevent deterioration in physical, cognitive, or behavioral function.
2. Cochlear implants and bone-anchored (hearing-aid) implants.
3. Hearing aids for Members under age 18.

Not Covered:

- *Treatment of gradual deterioration of hearing that occurs with aging and/or other lifestyle factors, and related adult hearing screening services, testing and supplies*
- *For Members ages 18 and older, external hearing aids; non-implant devices; or equipment to correct gradual hearing impairment or loss that occurs with aging and/or other lifestyle factors*
- *Tinnitus Maskers*
- *All other hearing related supplies, purchases, examinations, testing or fittings*

Vision services (testing, treatment, and supplies)

Vision services coverage is as follows:

- Non-routine vision exams relating to disease or injury of the eye
- Eyeglasses or contact lenses for Members diagnosed with aphakia (the absence of the lens of the eye, due to surgical removal, a perforated wound or ulcer, or a congenital condition resulting in complications which include the detachment of the vitreous or retina, and glaucoma)
- Eyeglasses, including lenses and one frame per lifetime up to up to a net allowance of $200 or clear contact lenses for the aphakia eye will be covered for *two (2)* single lens per calendar year
- Scleral Shells: Soft shells limited to *two (2)* per calendar year. Hard shells limited to *one (1)* per lifetime
- Cataract Surgery
- One (1) pair of eyeglasses or contact lenses per Member when purchased within 6 months following a covered cataract surgery the surgery
- Visual Training for Members under age 10. Benefits are subject to an Annual Maximum of 16 visits per Member.

Not Covered:

- *Adult vision exams (routine)*
- *Eyeglasses or contact lenses and the vision examination for prescribing or fitting eyeglasses or contact lenses, unless specified as Covered elsewhere in this Certificate of Insurance*
- *Refractive errors of the eye*
- *Refractive eye surgery when used in otherwise healthy eyes to replace eyeglasses or contact lenses*
- *Purchase, examination, or fitting of eyeglasses or contact lenses, except as specifically covered elsewhere*
- *Radial Keratotomy, Myopic Keratomileusis, and any surgery involving corneal tissue for the purpose of altering, modifying, or correcting myopia, hyperopia, or stigmatic error*
- *Replacement of lost, stolen, broken, or damaged lenses or glasses*
- *Bifocal contact lenses*
- *Special lens coating or lens treatments for prosthetic eyewear*
- *Routine cleaning of Scleral Shells*

Foot care

Routine foot care covered for Members with diabetes only. See Section 5(a) *Diabetes supplies, equipment, and education* for more information on Plan policies.

Non-routine diagnostic testing and treatment of the foot due to illness or injury

Note: See Section on *Orthotic and prosthetic devices* for information on podiatric shoe inserts

Not Covered:

- *Cutting, removal, or treatment of corns, calluses, or nails for reasons other than authorized/approved corrective surgery (except as stated above and in Section 5(a) "Diabetes supplies, equipment, and education")*
- *Diagnosis and treatment of weak, strained, or flat feet*

Orthotic and prosthetic devices

Prosthetic limbs, sockets and supplies, and prosthetic eyes limited to *one (1)* per lifetime

Externally worn breast prostheses and surgical bras, including necessary replacements following a mastectomy. Includes *two (2)* external prosthesis per Calendar Year and *two (2)* bras per Calendar Year. For double mastectomy: coverage extends to *four (4)* external prosthesis per Calendar Year and *two (2)* bras per Calendar Year.

Adjustments and/or modification to the prosthesis required by wear/tear, due to a change in Member's condition, or to improve its function are eligible for coverage and do not require Preauthorization/Prior Approval.

Repairs necessary to make the prosthetic functional are covered and do not require authorization/approval. The expense for repairs is not to exceed the estimated expense of purchasing another prosthesis.

Note: The following requires Preauthorization/Prior Approval; failure to get Preauthorization/Prior Approval may result in a reduction or denial of benefits. (See Services requiring Preauthorization/Prior Approval in Section 4.):

- Cochlear implants and related services
- Devices permanently implanted that are not Experimental or Investigational such as artificial joints, pacemakers, and surgically implanted breast implant following mastectomy.

Note: Internal prosthetic devices are paid as Hospital benefits; see Section 5(b) for payment information. Insertion of the device is paid under the surgery benefit.

Not Covered:

- *Experimental and/or Investigational services or devices*
- *Revision/replacement of prosthetics (except as noted per Plan guidelines (available upon request))*
- *Replacement or repair of items, if the items are damaged or destroyed by the Member's misuse, abuse or carelessness, lost, or stolen*
- *Duplicate or similar items*
- *Service call charges, labor charges, charges for repair estimates*
- *Wigs, cranial prosthesis, or hair transplants*
- *Cleaning and polishing of prosthetic eye(s)*

Durable medical equipment (DME)

Covered DME equipment prescribed by an attending Practitioner and/or Provider, which is Medically Necessary, not primarily and customarily used for non-medical purposes, designed for prolonged use, and for a specific therapeutic purpose in the treatment of an illness or injury. Limitations per Certificate of Insurance guidelines apply (available upon request).

Casts, splints, braces, crutches and dressings for the treatment of fracture, dislocation, torn muscles or ligaments and other chronic conditions per Plan guidelines (available upon request).

Note: The following DME require Preauthorization/Prior Approval; failure to get Preauthorization/Prior Approval may result in a reduction or denial of benefits. (See Services requiring Preauthorization/Prior Approval in Section 4.):

- Respiratory equipment such as ventilators, pleural catheters, hand-held battery operated nebulizers, and suction pumps

- Gastrointestinal equipment such as TPN enteral supplies and formula, parenteral nutrition, and suction pumps
- Beds such as Hospital beds and mattresses
- Musculoskeletal equipment such as neuromuscular stimulators, and bone growth stimulators
- Integumentary supplies such as wound vacuum systems
- Wheelchairs
- Home IV therapy supplies and medications
- Repair, replacement, and periodic maintenance of durable medical equipment

Note: This list is not all-inclusive and is subject to change per Certificate of Insurance updates.

Not Covered:

- *Orthopedic shoes; custom made orthotics; over-the-counter orthotics and appliance, except if covered elsewhere in this Certificate of Insurance*
- *Disposable supplies (including diapers) or non-durable supplies and appliances, including those associated with equipment determined not to be eligible for coverage*
- *Revision of durable medical equipment, except when made necessary by normal wear or use*
- *Replacement or repair of equipment if items are damaged or destroyed by Member misuse, abuse, or carelessness; or if lost or stolen*
- *Duplicate or similar items*
- *Sales tax, mailing, delivery charges, service call charges, or charges for repair estimates*
- *Items which are primarily educational in nature or for vocation, comfort, convenience or recreation*
- *Household equipment which primarily has customary uses other than medical, such as, but not limited to, air purifiers, central or unit air conditioners, water purifiers, non-allergic pillows, mattresses or waterbeds, physical fitness equipment, hot tubs, or whirlpools*
- *Household fixtures including, but not limited to, escalators or elevators, ramps, swimming pools and saunas*
- *Home Modifications including, but not limited to, its wiring, plumbing or changes for installation of equipment*
- *Vehicle modifications including, but not limited to, hand brakes, hydraulic lifts, and car carrier*
- *Remote control devices as optional accessories*
- *Any other equipment and supplies which the Plan determines are not eligible for coverage*

Home health services

Note: Preauthorization/Prior Approval is required; failure to get Preauthorization/Prior Approval may result in a reduction or denial of benefits. (See Services requiring Preauthorization/Prior Approval in Section 4.)
Member must be home-bound to receive home health services. The following are covered if approved by the Plan in lieu of Hospital or Skilled Nursing Facility:

- part-time or intermittent care by a RN or LPN/LVN
- part-time or intermittent home health aide services for direct patient care only
- physical, occupational, speech, inhalation, and intravenous therapies up to the maximum benefit allowable
- medical supplies, prescribed medications, and lab services, to the extent they would be covered if the Member were Hospitalized

Not Covered:

- *Nursing care requested by, or for the convenience of the Member or the Member's family (rest cures)*
- *Custodial or convalescent care*

Chiropractic services

Chiropractic services provided on an inpatient or outpatient basis when Medically Necessary as determined by Sanford Health Plan and within the scope of licensure and practice of a Chiropractor, to the extent services would be covered if provided by a Physician. Benefits are not available for maintenance care.

Not Covered:

- *Maintenance care*
- *Vitamins (unless otherwise specified as covered in this COI), minerals, therabands, cervical pillows, and hot/cold pack therapy including polar ice therapy and water circulating devices*

Reconstructive surgery

Note: The following services require Preauthorization/Prior Approval; failure to get Preauthorization/Prior Approval may result in a reduction or denial of benefits. (See Services requiring Preauthorization/Prior Approval in Section 4.)

- Surgery to restore bodily function or correct a deformity caused by illness or injury
- If you have had or are going to have a mastectomy, you may be entitled to certain benefits under the Women's Health and Cancer Rights Act of 1998 (WHCRA). Coverage for mastectomy related benefits will be provided in a manner determined in consultation with the attending Practitioner and/or Provider and Member. Coverage will be provided for reconstructive breast surgery and physical complications at all stages of a mastectomy, including lymphedema for those Members who had a mastectomy resultant from a disease, illness, or injury. For single mastectomy: coverage extends to the non-affected side to make it symmetrical with the affected breast post-surgical reconstruction. Breast prostheses and surgical bras and replacements are also covered (see Prosthetic devices in Section 5(a)). Deductible and coinsurance applies as outlined in your *Summary of Benefits and Coverage*.

Not Covered:

- *Surgeries related to gender transformation/gender reassignment*
- *Cosmetic Services and/or supplies to repair or reshape a body structure primarily for the improvement of a Member's appearance or psychological well-being or self-esteem, including but not limited to, breast augmentation, skin disorders, rhinoplasty, liposuction, scar revisions, and cosmetic dental services*
- *Removal, revision or re-implantation of saline or silicone implants for: breast implant malposition; unsatisfactory aesthetic outcome; patient desire for change of implant; patient fear of possible negative health effects; or removal of ruptured saline implants that do not meet medical necessity criteria*
- *Prophylactic (preventive) surgeries (i.e. mastectomy, oophorectomy)*

Oral and maxillofacial surgery

Note: The following services require Preauthorization/Prior Approval; failure to get Preauthorization/Prior Approval may result in a reduction or denial of benefits. (See Services requiring Preauthorization/Prior Approval in Section 4.)

- Oral surgical procedures limited to services required because of injury, accident or cancer that damages Natural Teeth
  - "Injury" does not include injuries to Natural Teeth caused by biting or chewing
  - Care must be received within *six (6)* months of the occurrence
  - Associated radiology services are included
- Orthognathic Surgery per Plan guidelines (available upon request)
- Diagnosis and treatment for Temporomandibular Joint (TMJ) Dysfunction and/or Temporomandibular Disorder (TMD) and TMJ splints and adjustments if your primary diagnosis is TMJ/TMD.
- Preauthorization/Prior Approval is required for dental anesthesia for Members over age nine (9) and/or Members with a developmental disability, as determined by a licensed Practitioner and/or Provider, which places such a person at serious risk.
- Coverage applies regardless of whether the services are provided in a Hospital or a dental office

Note: Dental care Anesthesia and Hospitalization for the extraction of teeth is covered for a Member who:

a. is a child under age nine (9); or
b. is severely disabled or otherwise suffers from a developmental disability, or
c. has high risk medical condition(s) as determined by a licensed Practitioner and/or Provider, which places such a person at serious risk.

Not Covered:

- *Routine dental care and treatment*
- *Natural teeth replacements including crowns, bridges, braces or implants*
- *Osseointegrated implant surgery (dental implants)*
- *Extraction of wisdom teeth*
- *Hospitalization for extraction of teeth except as stated above in this subsection*
- *Dental x-rays or dental appliances*
- *Shortening of the mandible or maxillae for cosmetic purposes*
- *Services and supplies related to ridge augmentation, implantology, and Preventive vestibuloplasty*
- *Dental appliances of any sort, including but not limited to bridges, braces, and retainers (except for appliances for treatment of TMJ/TMD)*

Transplant services

Note: Preauthorization/Prior Approval is required; failure to get Preauthorization/Prior Approval may result in a reduction or denial of benefits. (See Services requiring Preauthorization/Prior Approval in Section 4.)

Coverage is provided for the organ donor expenses under the transplant recipient's benefit plan when billed under the transplant recipient's name when the recipient of the transplant meets ALL of the following criteria:

- Is eligible for coverage under the Plan;
- Has a condition for which the proposed transplant is considered medically necessary;
- Meets the Plan's medical coverage guidelines for transplant; and
- The charges are not covered by the donor's own benefit plan, by another group health plan or other coverage arrangement.

Coverage is provided for transplants according to the Plan's medical coverage guidelines (available upon request) for the following services:

- Pre-operative care
- Transplant procedure, Facility and professional fees
- Organ acquisition costs including:
  - For living donors: organ donor fees, recipient registration fees, laboratory tests (including tissue typing of recipient and donor), and Hospital services that are directly related to the excision of the organ
  - For cadaver donors: operating room services, intensive care cost, preservation supplies (perfusion materials and equipment), preservation technician's services, transportation cost, and tissue typing of the cadaver organ
- Bone marrow or stem cell acquisition and short term storage during therapy for a Member with a covered illness
- Short-term storage of umbilical cord blood for a Member with a malignancy undergoing treatment when there is a donor match.
- Post-transplant care and treatment
- Medications (including immunosuppressive medications)

- Supplies (must be Preauthorized/Prior Approved)
- Psychological testing
- Living donor transplant-related complications for sixty (60) days following the date the organ is removed, if not otherwise covered by donor's own health benefit plan, by another group health plan, or other coverage arrangement

Transplants that meet the United Network for Organ Sharing (UNOS) criteria and/or Plan COI requirements, and are performed at Plan Participating Providers or contracted Centers of Excellence, are covered for the following:

1. Small bowel transplants
2. Kidney transplants for End Stage Renal Disease
3. Cornea transplants
4. Heart transplants
5. Implantable ventricular assist device used while waiting for a heart transplant
6. Lung transplants or heart/lung transplants for:
    a. Primary pulmonary hypertension;
    b. Eisenmenger's syndrome;
    c. End stage pulmonary fibrosis;
    d. Alpha 1 antitrypsin disease;
    e. Cystic fibrosis; and
    f. Emphysema for members with specific indications.
7. Liver transplants for:
    a. Biliary atresia in children;
    b. Primary biliary cirrhosis;
    c. Post-acute viral infection (including hepatitis a, hepatitis b antigen e negative and hepatitis c causing acute atrophy or post necrotic cirrhosis);
    d. Primary sclerosing cholangitis; and
    e. Alcoholic cirrhosis.
8. Pancreas transplants (cadaver organ) for Members with Type I uncontrolled diabetes for:
    a. Simultaneous pancreas kidney;
    b. Pancreas after kidney; and
    c. Pancreas before kidney.
9. Allogenic bone marrow transplants or peripheral stem cell support (myeloablative or non-myeloablative) for:
    a. Acute Lymphoblastic Leukemia
    b. Acute Myelogenous Leukemia
    c. Chronic Myelogenous Leukemia
    d. Pediatric Neuroblastoma
    e. Myelodysplastic Diseases
    f. Hodgkin's Disease (Lymphoma)
    g. Non-Hodgkin's Lymphoma
    h. Genetic Diseases and Acquired Anemias:
        i. Sickle cell anemia
        ii. Severe aplastic anemia
        iii. Wiskott-Aldrich syndrome
        iv. Severe combined immunodeficiencies
        v. Mucopolysaccharidoses
        vi. Mucolipidoses
10. Autologous bone marrow transplants or peripheral stem cell support associated with high dose chemotherapy for:
    a. Acute Lymphoblastic Leukemia
    b. Acute Myelogenous Leukemia
    c. Chronic Myelogenous leukemia
    d. Pediatric Neuroblastoma
    e. Ewing's Sarcoma
    f. Primitive Neuroectodermal Tumors
    g. Germ Cell Tumors
    h. Multiple Myeloma
    i. Primary Amyloidosis
    j. Hodgkin's Disease (Lymphoma)
    k. Non-Hodgkin's Lymphoma
    l. Breast cancer

Not Covered:

- *Transplant evaluations with no end organ complications*
- *Storage of stem cells, including storing umbilical cord blood of non-diseased persons, for possible future use*
- *Artificial organs, any transplant or transplant services not listed above*
- *Expenses incurred by a Member as a donor, unless the recipient is also a Member*
- *Costs related to locating and/or screening organ donors*

- *Donor expenses for complications that occur after sixty (60) days from the date the organ is removed, regardless of whether the donor is covered as a Member under this Plan*
- *Services, chemotherapy, radiation therapy (or any therapy that damaged the bone marrow), supplies, medications and aftercare for, or related to, artificial or non-human organ transplants*
- *Services, chemotherapy, supplies, medications and aftercare for or related to human organ transplants not specifically approved by the Plan's Chief Medical Officer or its designee*
- *Services, chemotherapy, supplies, medications and aftercare for, or related to, transplants performed at a non-Plan Participating Center of Excellence*
- *Transplants and transplant evaluations that do not meet the United Network for Organ Sharing (UNOS) criteria*

Anesthesia

We cover services of an anesthesiologist or other certified anesthesia Provider in connection with an authorized/approved procedure or treatment.

Concurrent services received while inpatient

Concurrent services including medical, surgical, maternity, Chemotherapy or Radiation Therapy provided during one inpatient stay by one Professional Health Care Provider. Benefits for concurrent services will be based on the Covered Service with the highest Allowance.

When two or more Professional Health Care Providers have attended the Member during one inpatient stay because the nature or severity of the Member's condition requires the skills of separate Professional Health Care Providers, benefits will be available for the Covered Service that carries the highest Allowance for the type of service provided by each Professional Health Care Provider, provided the service is Medically Appropriate and Necessary and would otherwise be a Covered Service under this Benefit Plan.

Section 5(b) Services provided by a Hospital or other Facility

IMPORTANT

Here are some important things you should keep in mind about these benefits:

- Please remember that all benefits are subject to the definitions, limitations, and exclusions in this Certificate of Insurance and are payable only when we determine they are Medically Necessary.
- Participating Providers must provide or arrange your care, and you must be Hospitalized in a Participating Facility, per Plan guidelines.
- Mental Health and Substance Use Disorder benefits provided by a Hospital or other Facility are outlined in Section 5(d).
- Be sure to read Section 4, "How you get care", for valuable information about conditions for coverage.
- **YOU MUST GET PREAUTHORIZATION/PRIOR APPROVAL OF SOME OF THESE SERVICES**. See the benefits description below.

IMPORTANT

Benefit Description

Inpatient Hospital

Note: Preauthorization/Prior Approval is required; failure to get Preauthorization/Prior Approval may result in a reduction or denial of benefits. (See Services requiring Preauthorization/Prior Approval in Section 4.)

The following Hospital Services are covered:

- Room and board
- Critical care services
- Use of the operating room and related facilities
- General Nursing Services, including special duty Nursing Services if approved by the Plan
- The administration of whole blood and blood plasma is a Covered Service. The purchase of whole blood and blood components is not covered unless such blood components are classified as medications in the *United States Pharmacopoeia*.
- Special diets during Hospitalization, when specifically ordered
- Other services, supplies, biologicals, and medications prescribed by a Practitioner and/or Provider during Hospitalization

Note: If you need a mastectomy, you may choose to have the procedure performed on an inpatient basis and remain in the Hospital up to 48 hours after the procedure.

Not Covered:

- *Take-home medications (Prescription medications provided to a Member at discharge are paid under the Prescription Drug Benefit. See Sections 2 and 5(e) for payment amount details.)*
- *Personal comfort items (telephone, television, guest meals and beds)*
- *Admissions to Hospitals performed only for the convenience of the Member, the Member's family, or the Member's Practitioner and/or Provider*
- *Custodial or Convalescent care*
- *Intermediate level or Domiciliary care*
- *Rest cures*
- *Services to assist in activities of daily living (ADLs)*

Outpatient Hospital or Ambulatory Surgical Center

Note: Preauthorization/Prior Approval is required; failure to get Preauthorization/Prior Approval may result in a reduction or denial of benefits. (See Services requiring Preauthorization/Prior Approval in Section 4.)

Health care services furnished in connection with a surgical procedure performed in a participating surgical center include:

- Outpatient Hospital surgical center
- Outpatient Hospital services such as diagnostic tests
- Ambulatory surgical center (same day surgery)

Not Covered:

- *Surgical procedures that can be done in a Practitioner office setting (i.e. vasectomy, toe nail removal)*
- *Blood and blood derivatives replaced by the Member*
- *Take-home medications (Prescription medications provided to a Member at discharge are paid under the Prescription Drug Benefit. See Sections 2 and 5(e) for payment amount details.)*

Skilled Nursing Facility Benefits

Note: Preauthorization/Prior Approval is required; failure to get Preauthorization/Prior Approval may result in a reduction or denial of benefits. (See Services requiring Preauthorization/Prior Approval in Section 4.)

Skilled Nursing Facility Services are covered if approved by the Plan in lieu of continued or anticipated Hospitalization. The following Skilled Nursing Facility Services are covered when provided through a state-licensed nursing Facility or program:

- Skilled nursing care, whether provided in an inpatient skilled nursing unit; a Skilled Nursing Facility; or a subacute (swing bed) Facility

- Room and board in a Skilled Nursing Facility
- Special diets in a Skilled Nursing Facility, if specifically ordered

Skilled nursing care in a Hospital shall be covered if the level of care needed by a Member has been reclassified from acute care to skilled nursing care and no designated skilled nursing care beds or swing beds are available in the Hospital or in another Hospital or health care Facility within a *thirty-mile (30)* radius of the Hospital.

Not Covered:

- *Custodial or Convalescent care*
- *Intermediate level or Domiciliary care*
- *Residential care*
- *Rest cures*
- *Services to assist in activities of daily living*

Hospice Care

Note: Preauthorization/Prior Approval is required; failure to get Preauthorization/Prior Approval may result in a reduction or denial of benefits. (See Services requiring Preauthorization/Prior Approval in Section 4.)

A Member may elect to receive hospice care, instead of the traditional Covered Services provided under the Plan, when the following circumstances apply:

a. The Member has been diagnosed with a terminal disease and a life expectancy of *six (6)* months or less;
b. The Member has chosen a palliative treatment focus (i.e. emphasizing comfort and support services rather than treatment attempting to cure the disease or condition);
c. The Member continues to meet the terminally ill prognosis as reviewed by the Plan's Chief Medical Officer over the course of care; and
d. The hospice service has been approved by the Plan.

The following Hospice Services are Covered Services:

a. Admission to a hospice Facility, Hospital, or Skilled Nursing Facility for room and board, supplies and services for pain management and other acute/chronic symptom management
b. In-home hospice care per Plan guidelines (available upon request)
c. Part-time or intermittent nursing care by a RN, LPN/LVN, or home health aide for patient care up to *eight (8)* hours per day
d. Social services under the direction of a Participating Provider
e. Psychological and dietary counseling
f. Physical or occupational therapy, as described under *Section 5(a)*
g. Consultation and Case Management services by a Participating Provider
h. Medical supplies, DME and medications prescribed by a Participating Provider
i. Expenses for Participating Providers for consultant or Case Management services, or for physical or occupational therapists, who are not Group Members of the hospice, to the extent of coverage for these services as listed in this *Section 5(a)*, but only where the hospice retains responsibility for the care of the Member

Not Covered: *Independent nursing, homemaker services, respite care*

IMPORTANT		IMPORTANT
	Here are some important things to keep in mind about these benefits: Please remember that all benefits are subject to the definitions, limitations, and exclusions in this Certificate of Insurance and are payable only when we determine they are Medically Necessary. Be sure to read Section 4, "How you get care", for valuable information about conditions for coverage.	

What is an Emergency Medical Condition?

An **Emergency Medical Condition** is the sudden and unexpected onset of a health condition that would lead a Prudent Layperson, acting reasonably, and possessing the average knowledge of health and medicine, to believe that the absence of immediate medical attention could result in serious impairment to bodily functions or serious dysfunction of a bodily organ or part or would place the person's health; or with respect to a pregnant woman, the health of the woman or her unborn child, in serious jeopardy.

What is a Prudent Layperson?

A **Prudent Layperson** is a person who is without medical training and who possess an average knowledge of health and medicine and who draws on his/her practical experience when making a decision regarding the need to seek Emergency medical treatment.

What is an Urgent Care Situation?

An **Urgent Care Situation** is a degree of illness or injury, which is less severe than an Emergency Condition, but requires prompt medical attention within *twenty-four (24)* hours, such as stitches for a cut finger. **Urgent Care Request** means a request for a health care service or course of treatment with respect to which the time periods for making a non-Urgent Care Request determination which:

a. Could seriously jeopardize the life or health of the Member or the ability of the Member to regain maximum function, based on a Prudent Layperson's judgment; or
b. In the opinion of a Practitioner and/or Provider with knowledge of the Member's medical condition, would subject the Member to severe pain that cannot be adequately managed without the health care service or treatment that is the subject of the request.

If an Urgent Care Situation occurs, Members should contact their Primary Care Practitioner and/or Provider immediately, if one has been selected, and follows his or her instructions. A Member may always go directly to a participating urgent care or after-hours clinic (listing available upon request or visit www.sanfordhealthplan.com/ndpers).

The Health Plan covers worldwide Emergency services necessary to screen and stabilize Members without Preauthorization/Prior Approval in cases where a Prudent Layperson would reasonably believe that an Emergency Medical Condition existed. Network restrictions do not apply to Emergency services received by Practitioners and/or Providers outside of the United States.

Benefit Description

Emergency Medical Conditions

Emergency services from Basic Plan-level Providers will be covered at the same benefit and cost sharing level as services provided by PPO-level Providers both within and outside of the Sanford Health Plan Service Area in cases where a Prudent Layperson reasonably believed that an Emergency Medical Condition existed.

Note: If the Plan determines the condition did not meet Prudent Layperson definition of an Emergency, then Basic Plan level cost-sharing amounts will apply, and the Member is responsible for charges above the Reasonable Cost.

If an Emergency Medical Condition arises, Members are encouraged to seek services at the nearest Emergency Facility that is a Participating Provider. If the Emergency Medical Condition is such that a Member cannot go safely to the nearest Participating Emergency Facility, then the Member should seek care at the nearest Emergency Facility. To find a listing of Participating Providers and Facilities, sign into your account at www.sanfordhealthplan.com/memberlogin or call the Plan toll-free at (800) 499-3416 | TTY/TDD: (877) 652-1844 *(toll-free)*.

The Member, or a designated relative or friend must notify the Plan, and the Member's Primary Care Practitioner and/or Provider, if one has been selected, as soon as reasonably possible after receiving treatment for an Emergency Medical Condition, but no later than *forty-eight (48)* hours after the Member is physically or mentally able to do so.

Participating Emergency Providers/Facilities

The Plan covers Emergency services necessary to screen and stabilize Members without Preauthorization/Prior Approval in cases where a Prudent Layperson reasonably believed that an Emergency Medical Condition existed.

Note: If the Plan determines the Member's condition did not meet the Prudent Layperson definition of an Emergency, then Basic Plan level cost-sharing amounts may apply, subject to whether services were received from a PPO-level or Basic-level Participating Provider/Facility, as set forth in Section 1. See Section 1, "*Participating Providers*" and "*How PPO vs. Basic Plan Determines Benefit Payment*" for details.

Non-Participating Emergency Providers/Facilities

The Plan covers Emergency services necessary to screen and stabilize a Member and may not require Prospective (Pre-Service) Review of

such services if a Prudent Layperson would have reasonably believed that use of a Participating Provider would result in a delay that would worsen the Emergency, or if a provision of federal, state, or local law requires the use of a specific Practitioner and/or Provider. The coverage shall be at the same benefit level as if the service or treatment had been rendered by a Participating Provider.

Note: If the Plan determines the Member's condition did not meet the Prudent Layperson definition of an Emergency, then Basic Plan level cost-sharing amounts will apply, subject to the limitations on Non-Participating Providers set forth in Section 1, and whether services were rendered within or outside the state of North Dakota and its contiguous counties. See Section 1, "*Non-Participating Health Care Providers*", for more information.

If a Member is admitted as an inpatient to a Non-Participating Provider Facility, then the Plan will contact the admitting Practitioner and/or Provider to determine medical necessity and a plan for treatment. In some cases, where it is medically safe to do so, the Member may be transferred to a Participating Hospital and/or other appropriate Facility.

Urgent Care Situations

Treatment provided in Urgent Care Situations from Basic Plan-level Providers will be covered at the same benefit and cost sharing level as services provided by PPO-level Providers both within and outside of the Sanford Health Plan Service Area in cases where a Prudent Layperson reasonably believed that an Urgent Care Situation existed.

Note: If the Plan determines the condition did not meet Prudent Layperson definition of an Urgent Care Situation, then Basic Plan level cost-sharing amounts will apply, and the Member is responsible for charges above the Reasonable Cost.

If an **Urgent Care Situation** occurs, Members should contact their Primary Care Practitioner and/or Provider immediately, if one has been selected, and follow his or her instructions. If a Primary Care Practitioner and/or Provider has not been selected, the Member should contact the Plan and follow the Plan's instructions. A Member may always go directly to a participating urgent care or after-hours clinic. To find a listing of Participating Providers and Facilities, sign into your account at www.sanfordhealthplan.com/memberlogin or call the Plan toll-free at (800) 499-3416 | TTY/TDD: (877) 652-1844 *(toll-free)*.

Participating Providers/Facilities

The Plan covers services in an Urgent Care Situation without Preauthorization/Prior Approval in cases where a Prudent Layperson reasonably believed that an Urgent Care Situation existed.

Note: If the Plan determines the Member's condition did not meet the Prudent Layperson definition of an Urgent Care Situation, then Basic Plan level cost-sharing amounts may apply, subject to whether services were received from a PPO-level or Basic-level Participating Provider/Facility, as set forth in Section 1. See Section 1, "*Participating Providers*" and "*How PPO vs. Basic Plan Determines Benefit Payment*" for details.

Non-Participating Providers/Facilities

The Plan covers services in an Urgent Care Situation without Preauthorization/Prior Approval requirements if a Prudent Layperson would have reasonably believed that use of a Participating Provider would result in a delay that would worsen the Urgent Care Situation, or if a provision of federal, state, or local law requires the use of a specific Practitioner and/or Provider. The coverage shall be at the same benefit level as if the service or treatment had been rendered by a Participating Provider.

Note: If the Plan determines the Member's condition did not meet the Prudent Layperson definition of an Urgent Care Situation, then Basic Plan level cost-sharing amounts will apply, subject to the limitations on Non-Participating Providers set forth in Section 1, and whether services were rendered within or outside the state of North Dakota and its contiguous counties. See Section 1, "*Non-Participating Health Care Providers*", for more information.

Ambulance and Transportation Services

Transportation by professional ground ambulance, air ambulance, or on a regularly scheduled flight on a commercial airline is covered when transportation is:

a. Medically Necessary; and
b. To the nearest Participating Provider equipped to furnish the necessary Health Care Services, or as otherwise approved and arranged by the Plan.

Not Covered:

- *Reimbursement for personal transportation costs incurred while traveling to/from Practitioner and/or Provider visits or other health care services*
- *Transfers performed only for the convenience of the Member, the Member's family or the Member's Practitioner and/or Provider*
- *Services and/or travel expenses relating to a Non-Emergency Medical Condition*

Non-Emergency or Non-Urgent Care Situations Outside the Plan's Service Area

For non-Emergency medical care or non-Urgent Care Situations when traveling outside the Plan's Service Area, benefits will be payable at Basic level. For details, see Section 1.

Section 5(d) Mental health and substance use disorder benefits

IMPORTANT

Here are some important things to keep in mind about these benefits:

All benefits are subject to the definitions, limitations, and exclusions in this Certificate of Insurance and are payable only when we determine they are Medically Necessary.

Be sure to read Section 4, "How you get care", for valuable information about conditions for coverage.

YOU MUST GET PREAUTHORIZATION/PRIOR APPROVAL OF SOME OF THESE SERVICES. See the benefits description below.

IMPORTANT

Benefit Description

Mental health benefits

In compliance with the Mental Health Parity and Addiction Equity Act of 2008 (MHPAEA), the financial requirements and treatment limitations that apply to the Plan's mental health and/or substance use disorder benefits are no more restrictive than the predominant financial requirements or treatment limitations that apply to substantially all medical/surgical benefits. In addition, mental health and substance use disorder benefits are not subject to separate cost sharing requirements or treatment limitations. Mental health and substance use disorders are covered consistent with generally recognized independent standards of current medical practice, which includes the current editions of the Diagnostic and Statistical Manual of Mental Disorders (DSM) and the International Classification of Diseases (ICD).

Coverage is provided for mental health conditions which current prevailing medical consensus affirms substantially impairs perception, cognitive function, judgment, and/or emotional stability, and limits the life activities of the person with the condition(s). This includes but is not limited to the following conditions: schizophrenia; schizoaffective disorders; bipolar disorder; major depressive disorders (single episode and/or recurrent); obsessive-compulsive disorders; attention-deficit/hyperactivity disorder; autism spectrum disorders; eating disorders; post-traumatic stress disorders (acute, chronic, or with delayed onset); and anxiety disorders that cause significant impairment of function.

Mental health benefits are covered with the same Copays, Deductibles, Coinsurance factors, and restrictions as other medical/surgical benefits under the Plan. Coverage for mental health conditions includes:

- Outpatient Professional services, including therapy by Providers such as psychiatrists, psychologists, clinical social workers, or other qualified mental health professionals
- Inpatient services, including Hospitalizations
- Medication management
- Diagnostic tests
- Electroconvulsive therapy (ECT)
- Partial Hospitalization
- Intensive Outpatient Programs

For outpatient treatment services, the first five (5) hours of treatment of any calendar year will be covered at 100% (no charge).

If you are having difficulty obtaining an appointment with a mental health practitioner and/or Provider, or for mental health needs or assessment services by phone, call the Sanford USD Medical Center Triage Line toll-free at (888) 996-4673.

Telephonic consultation for a Member diagnosed with depression and within twelve (12) weeks of starting antidepressant therapy per Plan guidelines (available upon request). Coverage limited to one (1) telephonic consult per Member per year for depression and one (1) telephonic consult for Attention Deficit Hyperactive Disorder (ADHD).

Note: Preauthorization/Prior Approval is required for these benefits. As with other medical/surgical benefits, failure to get Preauthorization/ Prior Approval may result in a reduction or denial of benefits. (See Services requiring Preauthorization/Prior Approval in Section 4):

- All Inpatient services, including those provided by a Hospital or a Residential Treatment Facility

Not Covered:

- *Convalescent care*
- *Marriage or bereavement counseling; pastoral counseling; financial or legal counseling; and custodial care counseling*
- *Educational or non-medical services provided under the Individuals with Disabilities Education Act (IDEA)*
- *Educational or non-medical services for learning disabilities and/or Behavioral problems*
- *Services related to environmental change*
- *Behavioral therapy, modification, or training, including Applied Behavioral Analysis (ABA)*
- *Milieu therapy*
- *Sensitivity training*

Substance use disorder benefits

In compliance with the Mental Health Parity and Addiction Equity Act of 2008 (MHPAEA), the financial requirements and treatment limitations that apply to the Plan's mental health and/or substance use disorder benefits are no more restrictive than the predominant financial requirements or treatment limitations that apply to substantially all medical/surgical benefits. In addition, mental health and substance use

disorder benefits are not subject to separate cost sharing requirements or treatment limitations. Mental health and substance use disorders are covered consistent with generally recognized independent standards of current medical practice, which includes the current editions of the Diagnostic and Statistical Manual of Mental Disorders (DSM), the American Society of Addiction Medicine Criteria (ASAM Criteria), and the International Classification of Diseases (ICD).

Substance use disorder benefits are covered with the same Copays, Deductibles, Coinsurance factors, and restrictions as other medical/surgical benefits under the Plan. Coverage for substance use disorders includes:

- Addiction treatment, including for alcohol, drug-dependence, and gambling issues
- Inpatient services, including Hospitalization
- Outpatient professional services, including therapy by Providers such as psychiatrists, psychologists, clinical social workers, Licensed Chemical Dependency Counselors, or other qualified mental health and substance use disorder professionals
- Partial Hospitalization
- Intensive Outpatient Programs

For outpatient treatment services, the first five (5) visits of treatment of any calendar year will be covered at 100% (no charge).

Note: Preauthorization/Prior Approval is required for these benefits; failure to get Preauthorization/Prior Approval may result in a reduction or denial of benefits. (See Services requiring Preauthorization/Prior Approval in Section 4):

- All Inpatient services, including those provided by a Hospital or a Residential Treatment Facility.

Not Covered:

- *Confinement Services to hold or confine a Member under chemical influence when no Medically Necessary services are provided, regardless of where the services are received (e.g. detoxification centers)*
- *Methadone or Cyclazocine therapy not part of an approved treatment program*
- *Marriage or bereavement counseling; pastoral counseling; financial or legal counseling; and custodial care counseling*
- *Educational or non-medical services provided under the Individuals with Disabilities Education Act (IDEA)*
- *Educational or non-medical services for learning disabilities or behavioral problems*
- *Services related to environmental change*
- *Milieu therapy*
- *Sensitivity training*
- *Domiciliary care or Maintenance Care*
- *Convalescent care*

Section 5(e) Prescription drug and diabetes supplies benefits

IMPORTANT		IMPORTANT
	Here are some important things to keep in mind about these benefits: We cover prescribed medications, as described in this Section. All benefits are subject to the definitions, limitations and exclusions in this Certificate of Insurance and are payable only when we determine they are Medically Necessary. Be sure to read Section 4, "How you get care", for valuable information about conditions for coverage. **YOU MUST GET PREAUTHORIZATION/PRIOR APPROVAL OF SOME OF THESE SERVICES.** See the benefits description below.	

- **Where you can obtain them.** You must fill the prescription at a Plan Participating pharmacy for Cost Sharing amounts to apply. A Member may be responsible for payment of the Cost Sharing Amounts at the time the Prescription Medication is dispensed. A Participating Pharmacy agrees not to charge or collect any amount from the Member that exceeds the Cost Sharing Amounts. All claims from a Participating Pharmacy must be submitted by the Participating Pharmacy. A listing of the Plan's Participating pharmacies is available by contacting the Plan or online at www.sanfordhealthplan.com/ndpers.

  If a Member receives Prescription Medications from a Non-Participating Pharmacy, the Member is responsible for submitting a Claim for Benefits. Charges in excess of the Allowed Charge are the Member's responsibility.
- **Specialty Medications.** Some specialty medications may be obtained with applicable cost-sharing amounts at a retail pharmacy and some medications must be obtained through the Plan's contracted specialty drug vendor. To enroll, and obtain prior-approval to join the Specialty/Injectable Drugs Program, call toll-free (866) 333-9721. Please refer to your *Summary of Pharmacy Benefits* handbook for a complete listing of specialty medications that require Preauthorization/Prior Approval.
- **How you can obtain them.** You must present your ID card to the Plan Participating pharmacy; if you do not present your ID card to the Plan Participating pharmacy, you must pay 100% of the costs of the medication to the pharmacy. Additionally, if you choose to go to a Non-Participating pharmacy, you must pay 100% of the costs of the medication to the pharmacy.

  Note: If a Member receives Prescription Medications from a Non-Participating Pharmacy, the Member is responsible for payment of the Prescription Order or refill in full at the time it is dispensed, and must submit appropriate reimbursement information to Sanford Health Plan. Payment for covered Prescription Medications will be sent to the Subscriber. Any charges in excess of the Allowed Charge are the Subscriber's responsibility.
- **We use a formulary.** Sanford Health Plan covers prescribed medications according to our Formulary. A formulary is a list of Prescription Medication Products, which are preferred by the Plan for dispensing to Members when appropriate. This list is subject to periodic review and modifications. Additional medications may be added or removed from the formulary throughout the year. Sanford Health Plan will notify you of any formulary changes. For a copy of the Plan formulary, contact Pharmacy Management toll-free at (888) 315-0885 | TTY/TDD: (877) 652-1844 *(toll-free)* or you can view the formulary online by signing into your account at www.sanfordhealthplan.com/memberlogin.
- **Exception to formulary.** The Plan will use appropriate pharmacists and Practitioner and/or Providers to consider exception requests and promptly grant an exception to the drug formulary, including exceptions for anti-psychotic and other mental health medications, for a Member when the health care Practitioner and/or Provider prescribing the drug indicates to the health plan company that:
  1. the formulary drug causes an adverse reaction in the patient;
  2. the formulary drug is contraindicated for the patient; or
  3. the prescription drug must be dispensed as written to provide maximum medical benefit to the patient.

  Note: Members must generally try formulary medications before an exception for the formulary will be made for non-formulary medication use unless a Member's Practitioner and/or Provider determines that use of the formulary drug may cause an adverse reaction to the Member or be contraindicated for the Member. To request an exception to the formulary, please call the Pharmacy Management toll-free at (888) 315-0885 | TTY/TDD: (877) 652-1844 *(toll-free)*.
- **There are dispensing limitations.** One (1) Copayment Amount applies per Prescription Order or refill for a *1 - 34-day* supply, plus any applicable coinsurance amount(s). Two (2) Copayment Amounts apply per Prescription Order or refill for a *35 - 100-day* supply, plus any applicable coinsurance amount(s). Prescription Medications and nonprescription diabetes supplies are subject to a dispensing limit of a *100-day* supply.
- **Generic vs. Brand.** If a Generic Prescription Medication is the therapeutic equivalent of a Brand Name Prescription Medication, and is authorized by a Member's Professional Health Care Provider, benefits will be based on the Allowance for the Generic equivalent. If the Member does not accept the Generic equivalent, the Member is responsible for the cost difference between the Generic and the Brand Name Prescription Medication and applicable Cost Sharing Amounts.

Benefit Description

Covered medications and supplies

- Medications prescribed by a Provider of health services, including off-label use of medications, in accordance with federal and state laws and regulations

- Self-Administered Injectable Medications per Plan guidelines (available upon request). Please refer to your *Summary of Pharmacy Benefits* for a list of medications (injectable and high cost medications that must receive Preauthorization/Prior Approval, and must be obtained from Express Scripts Specialty Pharmacy by calling (888) 333-9721 *(toll-free)*. If these medications are obtained from a retail pharmacy, or Practitioner and/or Provider's office, without Preauthorization/Prior Approval by Sanford Health Plan's Utilization Management Department, the Member may be responsible for the full cost of the medication.
- Diabetic medications (See Section 5(a) for Diabetic supplies, equipment, and self-management training benefits)

Not Covered:

- *Replacement of a prescription drug due to loss, damage, or theft*
- *Outpatient medications dispensed in a Provider's office or non-retail pharmacy location*
- *Medications that may be received without charge under a federal, state, or local program*
- *Medications for cosmetic purposes, including baldness, removal of facial hair, and pigmenting or anti-pigmenting of the skin*
- *Refills of any prescription older than one (1) year*
- *Compound medications with no legend (prescription) medications*
- *Acne medication for Members over age thirty (30)*
- *B-12 injection (except for pernicious anemia)*
- *Drug Efficacy Study Implementation ("DESI") medications*
- *Experimental or Investigational medications*
- *Growth hormone, except when medically indicated and approved by the Plan*
- *Orthomolecular therapy, including nutrients, vitamins (unless otherwise specified as covered in this COI),multi-vitamins with iron and/or fluoride, food supplements and baby formula (except to treat PKU or otherwise required to sustain life or amino acid-based elemental oral formulas), nutritional and electrolyte substances*
- *Medications, equipment or supplies available over-the-counter (OTC) (except for insulin, and select diabetic supplies, e.g., insulin syringes, needles, test strips and lancets, or prenatal vitamins with a written prescription order) that by federal or state law do not require a prescription order*
- *Any medication that is equivalent to an OTC medication except for medications that have a rating of "A" or "B" in the current recommendations of the United States Preventive Services Task Force and only when prescribed by a health care Practitioner and/or Provider*
- *Anorexiants or weight management medications (except when Medically Necessary)*
- *Whole Blood and Blood Components Not Classified as Medications in the United States Pharmacopoeia*
- *Unit dose packaging*
- *Synthetic opioids (e.g. Methadone or Cyclazocine)*
- *All contraceptive medications, devices, appliances, supplies and related services when used for contraception, including contraceptive products that do not require a Prescription Order or dispensing by a Health Care Provider*

Section 5(f) Dental benefits

IMPORTANT	**Here are some important things to keep in mind about these benefits:**	IMPORTANT
	Please remember that all benefits are subject to the definitions, limitations, and exclusions in this Certificate of Insurance and are payable only when we determine they are Medically Necessary.	
	We cover Hospitalization for dental procedures only when a non-dental physical impairment exists which makes Hospitalization necessary to safeguard the health of the patient. See Section 5(b) for inpatient Hospital benefits. We do not cover the dental procedure unless it is described below.	
	Be sure to read Section 4, "How you get care", for valuable information about conditions for coverage.	
	YOU MUST GET PREAUTHORIZATION/PRIOR APPROVAL OF THESE SERVICES. See the benefits description below.	

Benefit Description

Note: The following services require Preauthorization/Prior Approval; failure to get Preauthorization/Prior Approval may result in a reduction or denial of benefits. (See Services requiring Preauthorization/Prior Approval in Section 4.)

- Dental services provided by a Dentist (D.D.S.) in an office setting as a result of an accidental injury to the jaw, sound natural teeth, dentures, mouth or face.
  - Covered Services must be initiated within 12 months of the date of injury and completed within 24 months of the start of treatment or longer if a dental treatment plan approved by Sanford Health Plan is in place.
  - Oral surgical procedures limited to services required because of injury, accident or cancer that damages Natural Teeth
  - Associated radiology services are included
  - "Injury" does not include injuries to Natural Teeth caused by biting or chewing
- Diagnosis and treatment for Temporomandibular Joint (TMJ) Dysfunction and/or Temporomandibular Disorder (TMD) and TMJ splints and adjustments if your primary diagnosis is TMJ/TMD
  - Splint limited to one (1) per Member per benefit period
- Coverage applies regardless of whether the services are provided in a Hospital or a dental office

Note: The following services require Preauthorization/Prior Approval; failure to get Preauthorization/Prior Approval may result in a reduction or denial of benefits. (See Services requiring Preauthorization/Prior Approval in Section 4.)

- Dental anesthesia for Members over age nine (9) and/or Members with a developmental disability, as determined by a licensed Practitioner and/or Provider, which places such a person at serious risk.

Note: Anesthesia and Hospitalization charges for dental care are Covered for a Member who:

a. is a child under age nine (9);
b. is severely disabled or otherwise suffers from a developmental disability; or
c. has a high risk medical condition(s) as determined by a licensed Practitioner and/or Provider, which places such a person at serious risk.

Not Covered:

- *Natural teeth replacements including crowns, bridges, braces or implants*
- *Osseointegrated implant surgery (dental implants)*
- *Extraction of wisdom teeth*
- *Hospitalization for extraction of teeth if not otherwise specified as Covered in this Certificate of Insurance*
- *Dental x-rays or dental appliances*
- *Shortening of the mandible or maxillae for cosmetic purposes*
- *Services and supplies related to ridge augmentation, implantology, and preventive vestibuloplasty*
- *Dental appliances of any sort, including but not limited to bridges, braces, and retainers (except for appliances for treatment of TMJ/TMD)*

Section 6. Limited and Non-Covered Services

This section describes services that are subject to limitations or **NOT** covered under this Certificate. The Plan is not responsible for payment of non-covered or excluded benefits.

General Exclusions

1. Health Care Services provided either before the effective date of the Member's coverage with the Plan or after the Member's coverage is terminated.
2. Health Care Services performed by any Provider who is the Member or a member of the Member's immediate family, including any person normally residing in the Member's home. This exclusion does not apply in those areas in which the immediate family member is the only Provider in the area. If the immediate family member is the only Participating Provider in the area, the Member may go to a Non-Participating Provider and receive In-Network coverage (Section 4). If the immediate family member is not the only Participating Provider in the area, the Member must go to another Participating Provider in order to receive coverage at the In-Network level.
3. Health Care Services Covered by Any Governmental Agency/Unit for military service-related injuries/diseases, unless applicable law requires the Plan to provide primary coverage for the same.
4. Health Care Services for injury or disease due to voluntary participation in a riot, unless source of injury is a result of domestic violence or a medical condition.
5. Health Care Services for sickness or injury sustained in the commission of a felony, unless source of injury is a result of domestic violence or a medical condition.
6. Health Care Services that the Plan determines are not Medically Necessary.
7. Experimental and Investigational Services.
8. Services that are not Health Care Services.
9. Complications from a non-covered procedure or service.
10. Charges for telephone calls to or from a Physician, Hospital or other medical Practitioner and/or Provider or electronic consultations
11. Services not performed in the most cost-efficient setting appropriate for the condition based on medical standards and accepted practice parameters of the community, or provided at a frequency other than that accepted by the medical community as medically appropriate.
12. Charges for professional sign language and foreign language interpreter services.
13. Charges for duplicating and obtaining medical records from *Non-Participating Providers* unless requested by the Plan.
14. Charges for sales tax, mailing, interest and delivery.
15. Charges for services determined to be duplicate services by the Plan's Chief Medical Officer or designee.
16. Charges that exceed the *Reasonable Costs* for Non-Participating Providers.
17. Services to assist in activities of daily living.
18. Alternative treatment therapies including, but not limited to: acupuncture, acupressure, biofeedback, chelation therapy, massage therapy unless covered per plan guidelines under Women's Health and Cancer Rights Act of 1998 (WHCRA) for mastectomy/lymphedema treatment, naturopathy, homeopathy, holistic medicine, hypnotism, hypnotherapy, hypnotic anesthesia, or therapeutic touch.
19. Education Programs or Tutoring Services (not specifically defined elsewhere) including, but not limited to, education on self-care or home management.
20. Lifestyle Improvement Services, such as physical fitness programs, health or weight loss clubs or clinics.
21. Services by a vocational residential rehabilitation center, a community reentry program, halfway house or group home.
22. Any services or supplies for the treatment of obesity that do not meet the Plan's medical necessity coverage guidelines, including but not limited to: dietary regimen (except as related to covered nutritional counseling), nutritional supplements or food supplements; and weight loss or exercise programs.
23. Special education, including lessons in sign language to instruct a Member, whose ability to speak has been lost or impaired, to function without that ability.
24. Gender reassignment.
25. Sequela, which are primarily cosmetic that occur secondary to a weight loss procedure (e.g., Panniculectomy, breast reduction or reconstruction).
26. Incidental cholecystectomy performed at the time of weight loss surgery.
27. Cosmetic Services and/or supplies to repair or reshape a body structure primarily for the improvement of a Member's appearance or psychological well-being or self-esteem, including but not limited to, breast augmentation, treatment of gynecomastia and any related reduction services, skin disorders, rhinoplasty, liposuction, scar revisions, and cosmetic dental services.
28. Food items for medical nutrition therapy (except as specifically allowed in the Covered Benefits Section of this Certificate of Insurance).
29. Any fraudulently billed charges or services received under fraudulent circumstances.
30. Genetic testing when performed in the absence of symptoms or high risk factors for a heritable disease; genetic testing when knowledge of genetic status will not affect treatment decisions, frequency of screening for the disease, or reproductive choices; genetic testing that has been performed in response to direct-to-consumer marketing and not under the direction of the Member's Practitioner and/or Provider.
31. Never Events, Avoidable Hospital Conditions, or Serious Reportable Events. Participating Providers are not permitted to bill Members for services related to such events.
32. Autopsies, unless the autopsy is at the request of the Plan in order to settle a dispute concerning provision or payment of benefits. The autopsy will be at the Plan's expense.
33. Iatrogenic condition, illness, or injury as a result of mistakes made in medical treatment, such as surgical mistakes, prescribing or dispensing the wrong medication or poor hand writing resulting in a treatment error. Charges related to Iatrogenic illness or injury are not

the responsibility of the Member.

34. Elective health services received outside of the United States.
35. Smoking deterrents.
36. All contraceptive medications, devices, appliances, supplies and related services when used for contraception, including contraceptive products that do not require a Prescription Order or dispensing by a Health Care Provider.
37. Abortions, except for those necessary to prevent the death of the woman. No benefits are available for removal of all or part of a multiple gestation.
38. Procedures to evaluate and reverse sterilization
39. Sleep studies performed at a facility not accredited by the American Academy of Sleep Medicine
40. Transplants and pre and post-transplant services at Non-Participating Center Of Excellence Facilities
41. Health Care Services ordered by a court or as a condition of parole or probation

Special Situations Affecting Coverage

Neither the Plan, nor any Participating Provider, shall have any liability or obligation because of a delay or failure to provide services as a result of the following circumstances:

a. Complete or partial destruction of the Plan's facilities;
b. Declared or undeclared acts of War or Terrorism;
c. Riot;
d. Civil insurrection;
e. Major disaster or unforeseen natural events which materially interfere with the ability to provide Health Care Services;
f. Disability of a significant portion of the Participating Providers;
g. Epidemic or the inability to obtain vaccines or medications due to circumstances beyond the control of the Plan; or
h. A labor dispute not involving the Plan Participating Providers, the Plan will use its best efforts to arrange for the provision of Covered Services within the limitations of available facilities and personnel. If provision or approval of Covered Services under this Certificate is delayed due to a labor dispute involving the Plan or Participating Providers, Non-Emergency Care may be deferred until after resolution of the labor dispute.

Additionally, non-Emergency care may be deferred until after resolution of the above circumstances.

Services covered by other payors

The following are excluded from coverage:

1. Health services for which other coverage is either (1) required by federal, state or local law to be purchased or provided through other arrangements or (2) has been made available to and was purchased by the Covered Person. Examples include coverage required by workers' compensation, no-fault auto insurance, medical payments coverage or similar legislation.
   The Plan is not issued in lieu of nor does it affect any requirements for coverage by Workers' Compensation. This Plan contains a limitation which states that health services for injuries or sickness which are job, employment or work related for which benefits are provided or payable under any Workers' Compensation or Occupational Disease Act or Law, are excluded from coverage by the Plan. However, if benefits are paid by the Plan and it is determined that the Member is eligible to receive Workers' Compensation for the same incident; the Plan has the right to recover any amounts paid. As a condition of receiving benefits on a contested work or occupational claim, Member agrees to reimburse the Plan the full amount that the Plan has paid for Health Care Services when entering into a settlement or compromise agreement relating to compensation for Health Care Services covered by Workers' Compensation, or as part of any Workers' Compensation Award. The Plan reserves its right to recover against Member even though:
   a. The Workers' Compensation benefits are in dispute or are made by means of settlement or compromise; or
   b. No final determination is made that the injury or sickness was sustained in the course of or resulted from employment;
   c. The amount of Workers' Compensation for medical or health care is not agreed upon or defined by Member or the Workers' Compensation carrier; or
   d. The medical or health care benefits are specifically excluded from the Workers' Compensation settlement or compromise.
   Member will not enter into a compromise or hold harmless agreement relating to any work related claims paid by the Plan, whether or not such claims are disputed by the Workers' Compensation insurer, without the express written agreement of the Plan.
2. Health Care Services received directly from Providers employed by or directly under contract with the Member's employer, mutual benefit association, labor union, trust, or any similar person or Group.
3. Health Care Services for injury or sickness for which there is other non-Group insurance providing medical payments or medical expense coverage, regardless of whether the other coverage is primary, excess, or contingent to the Plan. If the benefits subject to this provision are paid for or provided by the Plan, the Plan may exercise its Rights of Subrogation.
4. Health Care Services for conditions that under the laws of This State must be provided in a governmental institution.
5. Health Care Services covered by any governmental health benefit program such as Medicare, Medicaid, ESRD and TRICARE, unless applicable law requires the Plan to provide primary coverage for the same.

Services and payments that are the responsibility of the Member

1. Out-of-pocket costs, including Copays, Deductibles, and Coinsurance are the responsibility of the Member in accordance with the Summary of Benefits and Coverage and Summary of Pharmacy Benefits. Additionally, the Member is responsible to the Provider for payment for Non-Covered Services;
2. Finance charges, late fees, charges for missed appointments and other administrative charges; and
3. Services for which a Member is neither legally nor as customary practice required to pay in the absence of a Group health plan or other coverage arrangement.

Section 7. How Services Are Paid By The Plan

Reimbursement of Charges by Participating Providers

When you see Participating Providers, receive services at Participating Providers and facilities, or obtain your prescription medications at Network pharmacies, you will not have to file claims. You must present your current identification card and pay your Copay.

When a Member receives Covered Services from a Participating Provider, the Plan will pay the Participating Provider directly, and the Member will not have to submit claims for payment. The Member's only payment responsibility, in this case, is to pay the Participating Provider, at the time of service, any Copay, Deductible, or Coinsurance amount, which is required for that service. Participating Providers agree to accept Sanford Health Plan's payment arrangements, or the negotiated contract amounts.

Time Limits. Participating Providers must file claims to the Plan within *one hundred eighty (180)* days after the date that the cost was incurred. If the Member fails to show his/her Plan ID card at the time of service, then the Member may be responsible for payment of claim after Practitioner and/or Provider's timely filing period of *one hundred eighty (180)* days has expired.

In any event, the claim must be submitted to the Plan no later than *one hundred eighty (180)* days after the date that the cost was incurred, unless the claimant was legally incapacitated.

Reimbursement of Charges by Non-Participating Providers

Sanford Health Plan does not have contractual relationships with Non-Participating Practitioner and/or Providers and they may not accept the Plan's payment arrangements. In addition to any Copay, Deductible, or Coinsurance amount, which is required for that service, Members are responsible for any difference between the amount charged and the Plan's payment for covered services. Non-Participating Practitioner and/or Providers are reimbursed the Maximum Allowed Amount, which is the lesser of (a) the amount charged for a covered service or supply, or (b) Reasonable Costs.

You may need to file a claim when you receive services from Non-Participating Practitioner and/or Providers. Sometimes, Non-Participating Practitioners and/or Providers submit a claim to us directly. Check with the Practitioner and/or Provider to make sure they are submitting the claim. You are responsible for making sure claim is submitted to the Plan within one-hundred-eighty (180) days after the date that the cost was incurred. **If you, or the Non-Participating Practitioner and/or Provider, does not file the claim within one-hundred-eighty (180) days after the date that the cost was incurred, you may be responsible for payment of the claim.**

If you need to file the claim, here is the process:

The Member must give the Plan written notice of the costs to be reimbursed. Claim forms are available from the Plan to aid in this process. Bills and receipts should be itemized, showing:

1. Covered Member's name and ID number;
2. Name and address of the Practitioner and/or Provider or Facility that provided the service or supply;
3. Dates Member received the services or supplies;
4. Diagnosis;
5. Type of each service or supply;
6. The charge for each service or supply;
7. A copy of the explanation of benefits, payments, or denial from any primary payer, such as the Medicare Summary Notice (MSN); and
8. Receipts/Member Costs, if you paid for your services.

Health Care Services Received Outside of the United States. Covered services for medically necessary Emergency and Urgent care services received in a foreign country are covered at the In-Network level. There is no coverage for elective health care services if a Member travels to another country for the purpose of seeking medical treatment outside the United States.

Time Limits. Claims must be submitted to the Plan within *one-hundred-eighty (180)* days after the date that the cost was incurred. If you, or the Non-Participating Practitioner and/or Provider, file the claim after the one-hundred-eighty (180) timely-filing limit has expired, you may be responsible for payment of the claim.

Submit your claims to: Sanford Health Plan, ATTN: NDPERS, PO Box 91110, Sioux Falls, SD 57109-1110

Timeframe for Payment of Claims

The payment for reimbursement of the Member's costs will be made within *fifteen (15)* days of when the Plan receives a complete written claim with all required supporting information.

When a Member receives Covered Services from a Non-Participating Provider and payment is to be made according to Plan guidelines, the Plan will arrange for direct payment to either the Non-Participating Provider or the Member, per plan Certificate of Insurance. If the Provider refuses direct payment, the Member will be reimbursed for the Reasonable Costs of the services in accordance with the terms of this Certificate. The Member will be responsible for any expenses that exceed Reasonable Costs, as well as any Copay, Deductible, or Coinsurance required for the Covered Service.

When We Need Additional Information

Please reply promptly when we ask for additional information. We may delay processing or deny your claim if you do not respond.

Member Bill Audit Program

Upon receiving notice of a claims payment, or Explanation of Benefits (EOB), from Sanford Health Plan, Members are encouraged to audit their medical bills and notify the Plan of any services which are improperly billed or of services that the Member did not receive.

If, upon audit of a bill, an error of $40 or more is found, the Member will receive a minimum payment of $20 or 50% of the resulting savings for paid Covered Services up to a maximum payment of $500.

To obtain payment through the Member Bill Audit Program, the Member must complete a *Member Bill Audit Refund Request Form*. To obtain a form, sign into your account at www.sanfordhealthplan.com/memberlogin or call Sanford Health Plan Member Services toll-free at (800) 499-3416 | TTY/TDD: (877) 652-1844 *(toll-free)* and request a form be mailed to you.

Note: This program does not apply when the NDPERS Benefit Plan is the secondary payor on a claim. For more information on claims with more than one payor, see Section 9, *Coordination of Benefits*.

Section 8. Problem Resolution

Member Appeal Procedures

Sanford Health Plan makes decisions in a timely manner to accommodate the clinical urgency of the situation and to minimize any disruption in the provision of health care. A Member, health care Practitioner and/or Provider with knowledge of the Member's medical condition, a Member's Authorized Representative, or an attorney have the right to file a complaint or an appeal of any Adverse Determination by Sanford Health Plan. The Member or his/her legal guardian may designate in writing to Sanford Health Plan an Authorized Representative to act on his/her behalf. This written designation of representation from the Member should accompany the request. For Expedited Appeals, a health care practitioner with knowledge of the Member's condition (e.g., treating practitioner) may act as the Member's authorized representative.

For members who request language services, Sanford Health Plan will provide service in the requested language through an interpreter or translated documents to help members register a complaint or appeal and to notify members about their complaint or appeal.

Language Access Services:

Spanish (Español): Para obtener asistencia en Español, llame al (800) 892-0675 *(toll-free)*.

Tagalog (Tagalog): Kung kailangan ninyo ang tulong sa Tagalog tumawag sa (800) 892-0675 *(toll-free)*.

Chinese (中文): 如果需要中文的帮助，请拨打这个号码(800) 892-0675 *(toll-free)*.

Navajo (Dine): Dinek'ehgo shika at'ohwol ninisingo, kwiijigo holne' (800) 892-0675 *(toll-free)*.

A TTY/TDD line is also available toll-free at (877) 652-1844 for members who are deaf, hard of hearing or speech-impaired.

Definitions

Adverse Determination: Means a denial, reduction or termination of, or a failure to provide or make payment (in whole or in part) for a benefit, including any such denial, reduction, termination, or failure to provide or make payment (for pre-service or post-service claims) that is based on:

1. A determination of an individual's eligibility to participate in a plan;
2. A determination that a benefit is not a Covered Benefit;
3. The imposition of a source-of-injury exclusion, network exclusion, application of any utilization review, or other limitation on otherwise covered benefits;
4. A determination that a benefit is Experimental, Investigational or not Medically Necessary or appropriate; or
5. A rescission of coverage. Only an act, practice, or omission that constitutes fraud or intentional misrepresentations of material fact, made by an applicant for health insurance coverage may be used to void application or Certificate of Insurance and deny claims.

Appeal: Request to change a previous Adverse Determination made by Sanford Health Plan.

Inquiry: A telephone call regarding eligibility, plan interpretation, plan policies and procedures, or plan design. It is the policy of Sanford Health Plan to address Member and Practitioner and/or Provider inquiries through informal resolution over the telephone whenever possible. If the resolution is not satisfactory to the inquirer, he or she will be instructed of his or her rights to file a verbal or written Complaint.

Complaint: An oral or written expression of dissatisfaction. It is the policy of Sanford Health Plan to make reasonable efforts to resolve Member and Practitioner and/or Provider Complaints. A process has been established for Members (or their designees) and Practitioners and/or Providers to use when they are dissatisfied with the Plan, its Practitioners and/or Providers, or processes. Examples of Complaints are eligibility issues; coverage denials, cancellations, or nonrenewals of coverage; administrative operations; and the quality, timeliness, and appropriateness of health care services provided.

Complainant: This is a Member, applicant, or former Member or anyone acting on behalf of a Member, applicant, or former Member, who submits a Complaint. The Member and his/her legal guardian may designate in writing to Sanford Health Plan an Authorized Representative to act on his/her behalf. This written designation of representation from the Member should accompany the Complaint.

External Review: An External Review is a request for an Independent, External Review of a medical necessity final determination made by Sanford Health through its External Appeals process.

Urgent Care Situation: A degree of illness or injury that is less severe than an Emergency Condition, but requires prompt medical attention within twenty-four (24) hours. An Urgent care request means a request for a health care service or course of treatment with respect to which the time periods for making a non-Urgent Care Request determination:

a. Could seriously jeopardize the life or health of the Member or the ability of the Member to regain maximum function, based on a Prudent Layperson's judgment; or
b. In the opinion of a Practitioner with knowledge of the Member's medical condition, would subject the Member to severe pain that cannot be adequately managed without the health care service or treatment that is the subject of the request.

In determining whether a request is "Urgent," the Plan shall apply the judgment of a Prudent Layperson as defined in Section 10. A Practitioner, with knowledge of the Member's medical condition, who determines a request to be "Urgent" within the meaning of subdivisions (1) and (2) in this paragraph, shall have their request be treated as an Urgent Care Request.

Complaint Procedure

A Member has the right to file a Complaint either by telephone or in writing to the Plan. Member Services will make every effort to investigate and resolve all Complaints. Member Services can be reached at (800) 499-3416 *(toll-free)*.

Oral Complaints: A complainant may orally submit a Complaint to the Plan. If the oral Complaint is not resolved to the complainant's satisfaction within *ten (10) business days* of receipt of the Complaint, the Plan will provide a Complaint form to the complainant, which must be completed and returned to the Plan for further consideration. Upon request, Member Services will provide assistance in submitting the Complaint form.

Written Complaints: A complainant can seek further review of a Complaint not resolved by phone by submitting a written Complaint form. A Member, or his/her Authorized Representative may send the completed Complaint form, including comments, documents, records and other information relating to the Complaint, the reasons they believe they are entitled to benefits and any other supporting documents to: Sanford Health Plan, ATTN: NDPERS/Member Services, PO Box 91110, Sioux Falls, SD 57109.

Member Services will notify the complainant within *ten (10) business days* upon receipt of the Complaint form, unless the Complaint has been resolved to the complainant's satisfaction within those *ten (10) business days*.

Upon request and at no charge, the complainant will be given reasonable access to and copies of all documents, records and other information relevant to the Complaint.

Member Services will investigate and review the Complaint and notify the complainant of Sanford Health Plan's decision in accordance with the following timelines:

- A decision and written notification on the Complaint will be made to the complainant, his or her Practitioners and/or Providers involved in the provision of the service within *thirty (30) calendar days* from the date the Plan receives your request.
- In certain circumstances, the time period may be extended by up to fourteen (14) days upon agreement. In such cases, the Plan will notify the complainant in advance, of the reasons for the extension.

Any complaints related to the quality of care received are subject to practitioner review. If the complaint is related to an Urgent clinical matter, it will be handled in an expedited manner and a response will be provided within seventy-two (72) hours.

If the complaint is not resolved to the Member's satisfaction, the Member, or his/her Authorized Representative, has the right to appeal any adverse determination made by Sanford Health Plan. Appeal Rights may be requested by calling the Plan at (800) 499-3416.

All notifications described above will comply with applicable law. A complete description of your Appeal Rights and the Appeal process will be included in your written response.

Types of Appeals

Types of appeals include:

- A **Prospective (Pre-Service) Appeal** is a request to change an Adverse Determination that the Plan must approve in whole or in part in advance of the Member obtaining care or services.
- A **Retrospective (Post-Service) Appeal** is a request to change an Adverse Determination for care or services already received by the Member.
- An **Expedited Appeal for Urgent Care** is a request to change a previous Adverse Determination made by Sanford Health Plan for an Urgent Care Request. If the Member's situation meets the definition of Urgent, their review will generally be conducted within 72 hours.

Continued Coverage for Concurrent Care

A Member is entitled to continued coverage for concurrent care pending the outcome of the appeals process; benefits for an ongoing course of treatment cannot be reduced or terminated without providing advance notice sufficient to allow the claimant to appeal and obtain a review determination before the benefit is reduced or terminated. Review determinations would be made within *twenty-four (24)* hours.

Audit Trails

Audit trails for Complaints, Adverse Determinations and Appeals are provided by the Plan's Information System and an Access database which includes documentation of the Complaints, Adverse Determination and/or Appeals by date, service, procedure, substance of the Complaint/Appeal (including any clinical aspects/details, and reason for the Complaint, Adverse Determination and/or Appeal. The Appeal file includes telephone notification, and documentation indicating the date; the name of the person spoken to; the Member; the service, procedure, or admission authorization/approval; and the date of the service, procedure, or Adverse Determination and reason for determination. If the Plan indicates authorization/approval by use of a number, the number must be called the "authorization number."

Internal Appeal Procedure

Filing Deadline

Appeals can be made for up to 180 days from notification of the Adverse Determination.

Within *one-hundred-eighty (180) days* after the date of receipt of a notice of an Adverse Determination sent to a Member or the Member's Authorized Representative (as designated in writing by the Member), the Member or their Authorized Representative may file an Appeal with the Plan requesting a review of the Adverse Determination.

To Appeal, the Member may sign into their account at www.sanfordhealthplan.com/memberlogin and complete the "Appeal Filing Form" under the *Forms* tab. The Member or their Authorized Representative may also contact the Plan by sending a written Appeal to the following address: Sanford Health Plan, ATTN: NDPERS, PO Box 91110, Sioux Falls, SD 57109-1110 or calling phone: (800) 499-3416 | TTY/TDD: (877) 652-1844 *(toll-free)*. If the Member, Authorized Representative, Practitioner/Provider, and/or attorney, has questions, they are encouraged to contact the Plan toll-free at (800) 499-3416 | TTY/TDD: (877) 652-1844 *(toll-free)*. Member Services is available to help with understanding information and processes. Alternate formats are also available and translation is available free of charge for written materials and Member communication with the Plan.

Appeal Rights

If the Member or their Authorized Representative (as designated in writing by the Member) files an Appeal for an Adverse Determination, the following Appeal Rights apply:

1. The Member shall have the opportunity to submit written comments, documents, records and other information relating to the claim for

benefits. Members do not have the right to attend or have a representative attend the first level review.

2. The Member shall be provided, free of charge, with any new or additional evidence considered, relied upon, or generated by, or at the direction of, Sanford Health Plan in connection with the claim; and such evidence shall be provided as soon as possible and sufficiently in advance of the date on which the notice of final internal Adverse Determination is required to be provided to give the Member a reasonable opportunity to respond prior to that date.
3. Before Sanford Health Plan can issue a final Adverse Determination based on a new or additional rationale, the Member must be provided, free of charge, with the rationale; the rationale must be provided as soon as possible and sufficiently in advance of the date on which the notice of Adverse Determination is required to be provided and give the Member a reasonable opportunity to respond prior to the date.
4. The Member shall be provided, upon request and free of charge, reasonable access to, and copies of, all documents, records and other information relevant to the Member's initial request.
5. The review shall take into account all comments, documents, records, and other information submitted by the Member relating to the claim, without regard to whether such information was submitted or considered in the initial benefit determination.
6. Full and thorough investigation of the substance of the Appeal, including any aspects of clinical care involved, will be coordinated by the Member Services Manager. The Plan will document the substance of the Appeal and any actions taken.
7. The review shall not afford deference to the initial Adverse Determination and shall be conducted by a named Plan representative who is neither the individual who made the Adverse Determination that is the subject of the appeal, nor the subordinate of such individual.
8. In deciding an appeal of any Adverse Determination that is based in whole or in part on a medical judgment, including determinations with regard to whether a particular treatment, drug or other item is Experimental, Investigational, or not Medically Necessary or appropriate, the Plan shall consult with a health care professional who has appropriate training and experience in the field of medicine involved in the medical judgment. The health care Practitioner and/or Provider engaged for purposes of a consultation under this paragraph shall be an individual who is neither an individual who was consulted in connection with the Adverse Determination that is the subject of the appeal, nor the subordinate of any such individual.
9. The Plan shall identify the medical or vocational experts whose advice was obtained on behalf of the Plan in connection with a Member's Adverse Determination, without regard to whether the advice was relied upon in making the benefit request determination.
10. In order to ensure the independence and impartiality of the persons involved in making claims determinations and appeals decisions, all decisions regarding hiring, compensation, termination, promotion, or other similar matters with respect to any individual (such as a claims adjudicator or medical expert) shall not be made based upon the likelihood that the individual will support the denial of benefits.
11. The attending Practitioner and/or Provider and the Member will be made aware of their responsibility for submitting the documentation required for resolution of the Appeal within three (3) business days of receipt of the Appeal. Sanford Health Plan will provide notice of any Adverse Determination in a manner consistent with applicable federal regulations.

For Prospective (Pre-service) Appeals: the Plan will notify the Member or their Authorized Representative and any Practitioner and/or Providers involved in the Appeal in writing or electronically within thirty (30) calendar days of receipt of the Appeal.

For Retrospective (Post-service) Appeals: the Plan will notify the Member or their Authorized Representative and any Practitioner and/or Providers involved in the Appeal in writing or electronically within sixty (60) calendar days of receipt of the Appeal.

Expedited Internal Appeal Procedure

An **Expedited Appeal Procedure** is used when the condition presents as part of an Urgent Care Situation, as defined previously in this Certificate of Insurance.

An expedited review involving **Urgent Care Requests for Adverse Determinations of Pre-service or Concurrent** claims must be utilized if the Member or Practitioner and/or Provider acting on behalf of the Member believe that an expedited determination is warranted. All of the procedures of a standard review described apply. In addition, for an Expedited Appeal, the request for an expedited review may be submitted. This can be done orally or in writing and the Plan will accept all necessary information by telephone or electronically. In such situations, the Practitioner who made the initial Adverse Determination may review the appeal and overturn the previous decision.

The determination will be made and provided to the Member and those Practitioners and/or Providers involved in the appeal via oral notification by the Utilization Management Department as expeditiously as the Member's medical condition requires but no later than within seventy-two (72) hours of receipt of the request. Sanford Health Plan will notify you orally by telephone or in writing by facsimile or via other expedient means. The Member and those Practitioners and/or Providers involved in the appeal will receive written notification within three (3) calendar days of the telephone notification. If your claim is no longer considered Urgent, it will be handled in the same manner as a Non-Urgent Pre-service or a Non-Urgent Post-Service Appeal, depending upon the circumstances.

If the Expedited Review is a Concurrent Review determination, the service must be continued without liability to the Member until the Member or the representative has been notified of the determination.

Written Notification Process for Internal Appeals

The written notification from Sanford Health Plan for an Appeal of an Adverse Determination will include the following:

1. The results and date of the Appeal Determination;
2. The specific reason for the Adverse Determination in easily understandable language;
3. The titles and qualifications, including specialty, of the person or persons participating in the first level review process (Reviewer names are available upon request);
4. Reference to the evidence, benefit provision, guideline, and/or protocol used as the basis for the decision and notification that the Member on request can have a copy of the actual benefit provisions, guidelines, and protocols free of charge;
5. Notification the Member can receive, upon request and free of charge, reasonable access and copies of all documents, records and other

information relevant to the Member's benefit request;
6. Statement of the reviewer's understanding of the Member's Appeal;
7. The Reviewer's decision in clear terms and the Certificate basis or medical rationale in sufficient detail for the Member to respond further;
8. If the Adverse Determination is based on medical necessity, notification and instructions on how the Practitioner and/or Provider can contact the Practitioner and/or Provider or appropriate specialist to discuss the determination;
9. If the Adverse Determination is based on medical necessity or an Experimental or Investigational treatment or similar exclusion or limit, either an explanation of the scientific or clinical judgment for making the determination, applying the terms of the Plan to the Member's medical circumstances or a statement that an explanation will be provided to the Member free of charge upon request;
10. If applicable, instructions for requesting:
    a. A copy of the rule, guideline, protocol, or other similar criterion relied upon in making the Adverse Determination; or
    b. The written statement of the scientific or clinical rationale for the determination;
11. For Adverse Determinations of **Prospective (Pre-service) or Retrospective (Post-service)** Review, a statement indicating:
    a. The written procedures governing the voluntary review, including any required timeframe for the review; and
    b. The Member's right to bring a civil action in a court of competent jurisdiction;
12. Notice of the Member's right to contact the North Dakota Insurance Commissioner for assistance at any time at:
    North Dakota Insurance Department
    600 E. Boulevard Ave.
    Bismarck, ND 58505-0320
    Email: insurance@nd.gov
    Consumer hotline: (800) 247-0560 *(toll-free)*
    TTY: (800) 366-6888 *(toll-free)*
13. Notice of the right to initiate the External Review process for Adverse Determinations based on medical necessity. Refer to "Independent, External Review of Final Determinations" in this Section for details on this process. Final Adverse Determination letters will contain information on the circumstances under which Appeals are eligible for External Review and information on how the Member can seek further information about these rights.
14. If the Adverse Determination is completely overturned, the decision notice must state the decision and the date.

Independent, External Review of Final Determinations (Denials)

External Review Requests

Members may file a request for External Review with the Plan or with the North Dakota Insurance Commissioner at:
North Dakota Insurance Department
600 E. Boulevard Ave.
Bismarck, ND 58505-0320
Email: insurance@nd.gov
Consumer hotline: (800) 247-0560 *(toll-free)*
TTY: (800) 366-6888 *(toll-free)*

For independent, External Review of a final Adverse Determination, the Plan will provide:

1. Members the right to an independent, third party, binding review whenever they meet ALL of the following eligibility criteria:
    a. The Member is Appealing an Adverse Determination that is based on medical necessity (benefits Adverse Determinations are not eligible); and
    b. The Member has exhausted Sanford Health Plan's internal Appeal process and the Plan's decision is unfavorable to the Member; and
    c. The request for independent, External Review is filed within four (4) months of the date that the Plan's final Adverse Determination was made.
2. Notification to Members about the independent, External Appeal program and decision are as follows:
    a. General communications to Members, at least annually, to announce the availability of the right to independent, External Review.
    b. Letters informing Members and Practitioners of the upholding of an Adverse Determination covered by this standard including notice of the independent, External Appeal rights, directions on how to use the process, contact information for the independent, External Review organization, and a statement that the Member does not bear any costs of the independent, External Review organization.
    c. The External Review organization will communicate its decision in clear terms in writing to the Member and the Plan. The decision will include:
        i. a general description of the reason for the request for external review;
        ii. the date the independent review organization received the assignment from the Plan to conduct the external review;
        iii. the date the external review was conducted;
        iv. the date of its decision;
        v. the date the external review was conducted;
        vi. the date of its decision;
        vii. the principal reason(s) for the decision, including any, medical necessity rationale or evidence-based standards that were a basis for its decision; and
        viii. the list of titles and qualifications, including specialty, of individuals participating in the appeal review; a statement that the reviewer understands the pertinent facts of the appeal, with references to the evidence or documentation that was used as a basis for the decision.
    d. The External Review organization must also notify the Member how and when Members receive any payment or service in the case of overturned Adverse Determinations.
3. Conduct of the External Appeal Review program is as follows:
        a. Within five (5) business days following the date of receipt of the external review request, the Plan shall complete a preliminary review of the request to determine whether:

i. The Member is or was a covered person in the health benefit plan at the time the health care service was requested or, in the case of a Retrospective Review, was a covered person in the Plan at the time the health care service was provided;
ii. The health care service that is the subject of the Adverse Determination is a covered service under the Member's health benefit plan, but for a determination by the health carrier that the health care service is not covered because it does not meet the Plan's requirements for medical necessity, appropriateness, health care setting, or level of care or effectiveness;
iii. The Member has exhausted the Plan's internal Appeal process; and
iv. The Member has provided all the information and forms required to process an external review.

b. Within one (1) business day after completion of the preliminary review, the North Dakota Insurance Department (NDID) shall notify the Member and, if applicable, the Member's authorized representative in writing whether the request is complete and eligible for external review.
   i. If the request is not complete, the NDID shall inform the Member and, if applicable, the Member's authorized representative in writing and include in the notice what information or materials are needed to make the request complete; or if the request is not eligible for external review, the NDID shall inform the Member and, if applicable, the Member's authorized representative in writing and include the reasons for its ineligibility. If the Independent Review Organization upheld the denial, there is no further review available under this appeals process. However, you may have other remedies available under State or Federal law, such as filing a lawsuit.
   ii. If the request is complete, within one (1) business day after verifying eligibility, the NDID shall assign an independent review organization and notify in writing the Member, and, if applicable, the Member's authorized representative of the request's eligibility and acceptance for external review. The Member may submit in writing to the assigned Independent Review Organization within five (5) business days following the date of receipt of the notice provided by the NDID any additional information that the independent review organization shall consider when conducting the external review. The independent review organization is not required to, but may, accept and consider additional information submitted after ten (10) business days.
   iii. Within five (5) business days after the date the NDID determines the request is eligible for external review, of receipt, the NDID shall provide to the assigned independent review organization the documents and any information considered in making the adverse determination or final adverse determination. For Grandfathered Plans, External reviews are conducted by the North Dakota Health Care Review, Inc., another peer review organization meeting the requirements of §1152 of the Social Security Act, or any person designated by the Insurance Commissioner.

c. The North Dakota Insurance Department contracts with the independent, external review organization that:
   i. is accredited by a nationally recognized private accrediting entity;
   ii. conducts a thorough review in which it considers all previously determined facts, allows the introduction of new information, considers and assesses sound medical evidence, and makes a decision that is not bound by the decisions or conclusions of the Plan or determinations made in any prior appeal.
   iii. has no material professional, familial or financial conflict of interest with Sanford Health Plan.

d. With the exception of exercising its rights as party to the appeal, Sanford Health Plan must not attempt to interfere with the Independent Review Organization's proceeding or appeal decision.

e. Sanford Health Plan will provide the Independent Review Organization with all relevant medical records as permitted by state law, supporting documentation used to render the decision pertaining to the Member's case (summary description of applicable issues including the Plan's decision, criteria used and clinical reasons, utilization management criteria, communication from the Member to the Plan regarding the appeal), and any new information related to the case that has become available since the internal appeal decision.

f. The Member is not required to bear costs of the Independent Review Organization's review, including any filing fees.

g. The Member or his/her legal guardian may designate in writing a representative to act on his/her behalf. A Practitioner and/or Provider may not file an Appeal without explicit, written designation by the Member.

h. The Independent Review Organization's decision is final and binding to the Plan and the Plan implements the Independent Review Organization's decision within the timeframe specified by the Independent Review Organization. The decision is not binding to the Member, because the Member has legal rights to pursue further appeals in court if they are dissatisfied with the outcome. However, a Member may not file a subsequent request for external review involving the same adverse determination for which the Member has already received an external review decision.

4. Sanford Health Plan maintains and tracks data on each appeal case, including descriptions of the denied item(s), reasons for denial, Independent, External Review organization decisions and reasons for decisions. Sanford Health Plan uses this information in tracking and evaluating its medical necessity decision-making process and improving the quality of its clinical decision making procedures. This information is reported to the Medical Management Quality Committee when a case is resolved for discussion and plan of care or action.

Expedited External Review Requests

1. A Member or the Member's authorized representative may request an expedited external review of a final Adverse Determination if the Plan's Adverse Determination involves either an Urgent Care Request for Prospective (pre-service) or a Concurrent Review Request for which:
   a. the timeframe for completion of a standard internal review would seriously jeopardize the life or health of the Member; or would jeopardize the Member's ability to regain maximum function; or
   b. in the case of a request for Experimental or Investigational services, the treating Provider certifies, in writing, that the requested health care services or treatment would be significantly less effective if not promptly initiated; and
   c. The Member has exhausted Sanford Health Plan's internal Appeal process and the Plan's final determination is unfavorable to the Member.

2. The Member has the right to contact the North Dakota Insurance Commissioner for assistance at any time at:
   North Dakota Insurance Department
   600 E. Boulevard Ave.
   Bismarck, ND 58505-0320
   Email: insurance@nd.gov
   Consumer hotline: (800) 247-0560 *(toll-free)*
   TTY: (800) 366-6888 *(toll-free)*
3. An expedited external review is not provided for Retrospective Adverse Determinations.
4. Immediately upon receipt of the request from the Member or the Member's Representative, the NDID shall determine whether the request is eligible for Expedited External Review. If the request is ineligible for an Expedited External Review as described in (1) above, the NDID will give notification to the Member or the Member's Representative that they may appeal to the state insurance department.
5. Upon determination that the Expedited External Review request meets the reviewability requirements, the NDID shall assign a contracted, independent review organization to conduct the expedited external review. The assigned independent review organization is not bound by any decisions or conclusions reached during the Plan's utilization review or internal appeal process.
6. The Plan will send all necessary documents and information considered in making the Adverse Determination to the assigned independent review organization electronically, by telephone, or facsimile or any other available expeditious method.
7. The independent review organization will make a decision to uphold or reverse the adverse determination and provide oral notification to the Member, and, if applicable, the Member's authorized representative, and the treating Practitioners and/or Providers as expeditiously as the Member's medical condition or circumstances requires but in no event more than *seventy-two (72)* hours after the date of receipt of the request for an expedited external review. The Member and those Practitioners and/or Providers involved in the appeal will receive written notification within *forty-eight (48)* hours of the oral notification.
8. Upon the Plan's receipt of the independent review organization's decision to reverse the adverse determination, the Plan shall immediately approve the coverage that was the subject of the adverse determination.

Section 9. Coordination of Benefits

Sanford Health Plan follows North Dakota Administrative Code §45-08-01.2-03 regarding Coordination of Benefits (COB). The COB provision applies when a person has health care coverage under more than one "plan" as defined for COB purposes.

Applicability

The order of benefits determination rules govern the order in which each plan will pay a claim for benefits. The plan that pays first is called the primary plan. The primary plan must pay benefits in accordance with its policy terms without regard to the possibility that another plan may cover some expenses. The plan that pays after the primary plan is called the secondary plan. The secondary plan may reduce the benefits it pays so that payments from all plans do not exceed 100% of the total Allowable Expense.

Definitions (for COB Purposes Only)

A. **A Plan** is any of the following that provides benefits or services for medical or dental care or treatment. If separate contracts are used to provide coordinated coverage for Members of a group, the separate contracts are considered parts of the same plan and there is no COB among those separate contracts.
   1. **Plan includes:** group and non-group insurance contracts, health maintenance organization (HMO) contracts, closed panel plans or other forms of group or group type coverage (whether insured or uninsured); medical care components of long-term care contracts, such as skilled nursing care; medical benefits under group or individual automobile contracts; and Medicare or any other federal governmental plan, as permitted by law.
   2. **Plan does not include:** Hospital indemnity coverage or other fixed indemnity coverage; accident-only coverage; specified disease or specified accident coverage; limited benefit health coverage, as defined by state law; school accident-type coverage; benefits for nonmedical components of long-term care policies; Medicare supplement policies; Medicaid policies; or coverage under other federal governmental plans, unless permitted by law.

   Each contract for coverage under Section A. (1) or (2) above is a separate plan. If a plan has two parts and COB rules apply only to one of the two, each of the parts is treated as a separate plan.

B. **This Plan** means, in a COB provision, the part of the Certificate providing the health care benefits to which the COB provision applies and which may be reduced because of the benefits of other plans. Any other part of the Certificate providing health care benefits is separate from this Plan. A contract may apply one COB provision to certain benefits, such as dental benefits, coordinating only with similar benefits, and may apply another COB provision to coordinate other benefits.

C. **The order of benefit determination rules determine whether this Plan is a primary plan or secondary plan when the person has health care coverage under more than one plan**. When this Plan is primary, it determines payment for its benefits first before those of any other plan without considering any other plan's benefits. When this Plan is secondary, it determines its benefits after those of another plan and may reduce the benefits it pays so that total plan benefits do not exceed 100% of the total Allowable Expense.

D. **Allowable Expense** is a health care expense, including deductibles, coinsurance and copayments, that is covered at least in part by any plan covering the person. When a plan provides benefits in the form of services, the reasonable cash value of each service will be considered an Allowable Expense and a benefit paid. An expense that is not covered by any plan covering the person is not an Allowable Expense. In addition, any expense that a provider by law or in accordance with a contractual agreement is prohibited from charging a covered person is not an Allowable Expense. The following are examples of expenses that are not Allowable Expenses:
   1. The difference between the cost of a semiprivate Hospital room and a private Hospital room is not an Allowable Expense, unless one of the plans provides coverage for private Hospital room expenses.
   2. If a person is covered by two or more plans that compute their benefit payments on the basis of usual and customary fees or relative value schedule reimbursement methodology or other similar reimbursement methodology, any amount in excess of the highest reimbursement amount for a specific benefit is not an Allowable Expense.
   3. If a person is covered by two or more plans that provide benefits or services on the basis of negotiated fees, an amount in excess of the highest of the negotiated fees is not an Allowable Expense.
   4. If a person is covered by one plan that calculates its benefits or services on the basis of usual and customary fees or relative value schedule reimbursement methodology or other similar reimbursement methodology and another plan that provides its benefits or services on the basis of negotiated fees, the primary plan's payment arrangement shall be the Allowable Expense for all plans. However, if the provider has contracted with the secondary plan to provide the benefit or service for a specific negotiated fee or payment amount that is different than the primary plan's payment arrangement and if the provider's contract permits, the negotiated fee or payment shall be the Allowable Expense used by the secondary plan to determine its benefits.
   5. The amount of any benefit reduction by the primary plan because a covered person has failed to comply with the plan provisions is not an Allowable Expense. Examples of these types of plan provisions include second surgical opinions, Preauthorization/Prior Approval of admissions, and preferred provider arrangements.

E. **Closed Panel Plan** is a plan that provides health care benefits to covered persons primarily in the form of services through a panel of Providers contracted with or employed by the plan, and that excludes coverage for services provided by other Providers, except in cases of Emergency or referral by a panel member.

F. **Custodial Parent** is the parent awarded custody by a court decree or, in the absence of a court decree, is the parent with whom the child resides more than one-half of the calendar year excluding any temporary visitation.

Order of Benefit Determination Rules

When a person is covered by two or more plans, the rules for determining the order of benefits payments are as follows:

A. The primary plan pays or provides its benefits according to its terms of coverage and without regard to the benefits of any other plan.

B. (1) Except as provided in paragraph 2.(a) below, plan that does not contain a coordination of benefits provision that is consistent with this regulation is always primary unless the provisions of both plans state that the complying plan is primary.
(2) Coverage that is obtained by virtue of membership in a group that is designed to supplement a part of a basic package of benefits and provides that this supplementary coverage shall be excess to any other parts of the plan provided by the Certificate holder. Examples of these types of situations are major medical coverages that are superimposed over base plan Hospital and surgical benefits, and insurance type coverages that are written in connection with a closed panel plan to provide out-of-network benefits.

C. A plan may consider the benefits paid or provided by another plan in calculating payment of its benefits only when it is secondary to that other plan.

D. Each plan determines its order of benefits using the first of the following rules that apply:

1. **Nondependent or dependent.** The plan that covers the person other than as a dependent, for example as an employee, member, Certificate holder, subscriber, or retiree, is the primary plan and the plan that covers the person as a dependent is the secondary plan. However, if the person is a Medicare beneficiary and, as a result of federal law, Medicare is secondary to the plan covering the person as a dependent; and primary to the plan covering the person as other than a Dependent (e.g., a retired employee); then the order of benefits between the two plans is reversed so that the plan covering the person as an employee, member, Certificate holder, subscriber, or retiree is the secondary plan and the other plan is the primary plan.
2. **Dependent child covered under more than one plan.** Unless there is a court decree stating otherwise, when a Dependent child is covered by more than one plan the order of benefits is determined as follows:
   (a) For a Dependent child whose parents are married or are living together, whether or not they have ever been married:
      i. the plan of the parent whose birthday falls earlier in the calendar year is the primary plan; or
      ii. if both parents have the same birthday, the plan that has covered the parent the longest is the primary plan.
   (b) For a Dependent child whose parents are divorced or separated or not living together, whether or not they have ever been married:
      i. If a court decree states that one of the parents is responsible for the Dependent child's health care expenses or health care coverage, and the plan of that parent has actual knowledge of those terms, that plan is primary. This rule applies to plan years commencing after the plan is given notice of the court decree;
      ii. If a court decree states that both parents are responsible for the Dependent child's health care expenses or health care coverage, the provisions of subparagraph a above shall determine the order of benefits;
      iii. If a court decree states that the parents have joint custody without specifying that one parent has responsibility for the health care expenses or health care coverage of the Dependent child, the provisions of subparagraph a above shall determine the order of benefits; or
      iv. If there is no court decree allocating responsibility for the Dependent child's health care expenses or health care coverage, the order of benefits for the child are as follows:
         (1) The plan covering the Custodial Parent;
         (2) The plan covering the Spouse of the Custodial Parent;
         (3) The plan covering the non-Custodial Parent; and then
         (4) The plan covering the Spouse of the non-Custodial Parent.
   (c) For a Dependent child covered under more than one plan of individuals who are the parents of the child, the provisions of subparagraph (a) or (b) above shall determine the order of benefits as if those individuals were the parents of the child.
3. **Active employee or retired or laid-off employee.** The plan that covers a person is an active employee, that is, an employee who is neither laid off nor retired, is the primary plan. The plan covering that same person as a retired or laid-off employee is the secondary plan. The same would hold true if a person is a Dependent of an active employee and that same person is a Dependent of a retired or laid-off employee. If the other plan does not have this rule, and as a result, the plans do not agree on the order of benefits, this rule is ignored. This rule does not apply if the rule labeled D.(1) can determine the order of benefits.
4. **COBRA or state continuation coverage.** If a person whose coverage is provided pursuant to COBRA or under a right of continuation provided by state or other federal law is covered under another plan, the plan covering the person as an employee, Member, subscriber, or retiree or covering the person as a Dependent of an employee, Member, subscriber, or retiree is the primary plan and the COBRA or state or other federal continuation coverage is the secondary plan. If the other plan does not have this rule, and as a result, the plans do not agree on the order of benefits, this rule is ignored. This rule does not apply if the rule labeled D.(1) can determine the order of benefits.
5. **Longer or shorter length of coverage.** The plan that covered the person as an employee, Member, Certificate holder, subscriber, or retiree longer is the primary plan and the plan that covered the person the shorter period of time is the secondary plan.
6. **If the preceding rules do not determine the order of benefits**, that Allowable Expenses shall be shared equally between the plans meeting the definition of plan. In addition, this Plan will not pay more than it would have paid had it been the primary plan.

Effect of COB on the Benefits of this Plan

A. When this Plan is secondary, it may reduce its benefits so that the total benefits paid or provided by all plans during a plan year are not more than the total Allowable Expenses. In determining the amount to be paid for any claim, the secondary plan will calculate the benefits it would have paid in the absence of other health care coverage and apply that calculated amount to any Allowable Expense under its plan that is unpaid by the primary plan. The secondary plan may then reduce its payment by the amount so that, when combined with the amount paid by the primary plan, the total benefits paid or provided by all plans for the claim do not exceed the total Allowable Expense for that claim. In addition, the secondary plan shall credit to its plan deductible any amounts it would have credited to its deductible in the absence of other health care coverage.

B. If a covered person is enrolled in two or more closed panel plans, and if, for any reason, including the provision of service by a non-panel provider, benefits are not payable by one closed panel plan; COB shall not apply between that plan and other closed panel plans.

Right to Receive and Release Needed Information

Certain facts about health care coverage and services are needed to apply these COB rules and to determine benefits payable under this Plan and other plans. Sanford Health Plan may get the facts it needs from or give them to other organizations or persons for the purpose of applying these rules and determining benefits payable under this Plan and other plans covering the person claiming benefits. Sanford Health Plan need not tell, or get the consent of, any person to do this. Each person claiming benefits under this Plan must give Sanford Health Plan any facts it needs to apply those rules and determine benefits payable.

Facility of Payment

A payment made under another plan may include an amount that should have been paid under this Plan. If it does, Sanford Health Plan may pay that amount to the organization that made that payment. That amount will then be treated as though it were a benefit paid under this Plan. Sanford Health Plan will not have to pay that amount again. The term "payment made" includes providing benefits in the form of services, in which case "payment made" means the reasonable cash value of the benefits provided in the form of services.

Right of Recovery

If the amount of the payments made by Sanford Health Plan is more than it should have paid under this COB provision, it may recover the excess from one or more of the persons it has paid or for whom it has paid; or any other person or organization that may be responsible for the benefits or services provided for the covered person. The "amount of the payments made" includes the reasonable cash value of any benefits provided in the form of services.

Coordination of Benefits with Medicare

Medicare Coordination of Benefits provisions apply when a Member has health coverage under the Plan and is enrolled in Medicare, under Parts A, B, or D. This provision applies before any other Coordination of Benefits Provision of the Plan.

If a Practitioner and/or Provider has accepted assignment of Medicare, the Plan pays the difference between what Medicare pays and the Plan's Allowable Expense.

Members with End Stage Renal Disease (ESRD)

1. The Plan has primary responsibility for the claims of a Member:
   a. Who is eligible for Medicare secondary benefits because of ESRD, and;
   b. During the Medicare coordination period of 30 months, which begins with the earlier of:
      i. the month in which a regular course of renal dialysis is initiated, or
      ii. in the case of an individual who receives a kidney transplant, the first month in which the individual became entitled to Medicare.
2. The Plan has secondary responsibility for the claims of a Member:
   a. Who is eligible for Medicare primary benefits because of ESRD, and the Medicare coordination period of thirty (30) months has expired; or
   b. Who is eligible for Medicare on the basis of age or disability when the Member becomes eligible on the basis of ESRD, and certain other conditions are met.

Section 10. Definitions of terms we use in this Certificate of Insurance

Admission	Entry into a facility as an Inpatient for treatment and care when ordered by a Health Care Provider with admitting privileges. An Admission ends when a Member is discharged or released from the facility and is no longer registered as a patient. Also known as Hospitalization.
Allowance or Allowed Charge	The maximum dollar amount that payment for a procedure or service is based on as determined by Sanford Health Plan.
Ambulatory Surgical Center	A lawfully operated, public or private establishment that: a. Has an organized staff of Practitioners; b. Has permanent facilities that are equipped and operated mostly for performing surgery; c. Has continuous Practitioner services and Nursing Services when a patient is in the Facility; and d. Does not have services for an overnight stay.
Annual Enrollment	A period of time at least once a year when Eligible Group Members may enroll themselves and their Dependents in the Plan. Annual Enrollment does not pertain to non-Medicare retirees.
Authorized Representative	A person to whom a covered person has given express written consent to represent the Member, a person authorized by law to provide substituted consent for a Member, a family member of the Member or the Member's treating health care professional if the Member is unable to provide consent, or a health care professional if the Member's Plan requires that a request for a benefit under the plan be initiated by the health care professional. For any Urgent Care Request, the term includes a health care professional with knowledge of the Member's medical condition.
Avoidable Hospital Conditions	Conditions that could reasonably have been prevented through application of evidence-based guidelines. These conditions are not present on admission, but present during the course of the stay. Participating Providers are not permitted to bill the Plan or Members for services related to Avoidable Hospital Conditions.
Basic Plan	The Member elects to access the health care system through a Health Care Provider that is not a part of the Preferred Provider Organization. Benefit payment will be at the Basic Plan level. Health Care Providers accessed at the Basic Plan level are also Participating Providers.
Benefit Period	A specified period of time when benefits are available for Covered Services under this Benefit Plan. A Claim for Benefits will be considered for payment only if the date of service or supply was within the Benefit Period. All benefits are determined on a Calendar Year (January 1st through December 31st) Benefit Period.
Benefit Plan	The agreement with Sanford Health Plan, including the Subscriber's membership application, Identification Card, the Benefit Plan Agreement, this Certificate of Insurance, the Benefit Plan Attachment and any supplements, endorsements, attachments, addenda or amendments
[The] Board	Means the North Dakota Public Employees Retirement System (NDPERS) board.
Calendar Year	A period of one year which starts on January 1st and ends December 31st.
Case Management	A coordinated set of activities conducted for individual patient management of chronic, serious, complicated, protracted, or other health conditions.
Claims Administrator or Claims Payor	Sanford Health Plan
Class of Coverage	The type of coverage the Subscriber is enrolled under, identifying who is eligible to receive benefits for Covered Services under this Benefit Plan. Classes of Coverage under this Benefit Plan are Single Coverage and Family Coverage.
Coinsurance Amount	A percentage of the Allowed Charge for Covered Services that is a Member's responsibility.
Coinsurance Maximum Amount	The total Coinsurance Amount that is a Member's responsibility during a Benefit Period. The Coinsurance Maximum Amount renews on January 1 of each consecutive Benefit Period
Concurrent Review	Concurrent Review is Utilization Review for an extension of previously approved, ongoing course of treatment over a period of time or number of treatments typically associated with Hospital inpatient care including care received at a Residential Treatment Facility and ongoing outpatient services, including ongoing ambulatory care.
[This] Contract or [The] Contract	This Certificate of Insurance, which is a statement of the essential features and services given to the Subscriber by the Plan, including all attachments, the Group's application, the applications of the Subscribers and the Health Maintenance Contract.

Copayment (Copay)	A specified dollar amount payable by the Member for certain Covered Services. Health Care Providers may request payment of the Copayment Amount at the time of service.
Cost Sharing	The share of costs covered by your insurance that you pay out of your own pocket. This term generally includes coinsurance, copayments, or similar charges, but it doesn't include premiums, balance-billing amounts for non-network providers, or the cost of non-covered services.
Covered Services	Those Health Care Services to which a Member is entitled under the terms of this Contract.
Creditable Coverage	Benefits or coverage provided under: a. A group health benefit plan (as such term is defined under North Dakota law); b. A health benefit plan (as such term is defined under North Dakota law); c. Medicare; d. Medicaid; e. Civilian health and medical program for uniformed services; f. A health plan offered under 5 U.S.C. 89; g. A medical care program of the Indian Health Service or of a tribal organization; h. A state health benefits risk pool, including coverage issued under N.D.C.C. Chapter 26.1-08; i. A public health plan as defined in federal regulations, including a plan maintained by a state government, the United States government, or a foreign government; j. A health benefit plan under section 5(e) of the Peace Corps Act [Pub. L. 87-293; 75 Stat. 612; 22 U.S.C. 2504(e)]; and k. A state's children's health insurance program funded through Title XXI of the federal Social Security Act [42 U.S.C. 1397aa et seq.].
Custodial Care	Care designed to assist the patient in meeting the activities of daily living and not primarily provided for its therapeutic value in the treatment of an illness, disease, injury or condition.
Deductible Amount	A specified dollar amount payable by the Member for certain Covered Services received during the Benefit Period.
Dependent	The Spouse and any Dependent Child of a Subscriber.
Dependent Child	The definition of a Dependent Child of a Subscriber includes a child who is related to the Subscriber as a natural child, a child placed for adoption, a legally adopted child, a child for whom the Subscriber has legal guardianship, a stepchild, or a foster child; and is one of the following: (a) under the age of twenty-six (26), (b) incapable of self-sustaining employment by reason of a disabling condition and chiefly dependent upon the Certificate holder/Subscriber for support and maintenance. If the Plan so requests, the Subscriber must provide proof of the child's disability within thirty-one (31) days of the Plan's request; or (c) the Subscriber's grandchild(ren) or those of the Subscriber's living, covered Spouse, who legally reside with the Certificate holder/Subscriber and (1) the parent of the grandchild(ren) is an Covered Dependent also covered by this Plan; and (2) both the Dependent and child of such Dependent (grandchild) are chiefly dependent upon the Certificate holder/Subscriber for support. Dependent coverage does not include the spouse of an adult Dependent child.
Domiciliary Care	Domiciliary Care consists of a protected situation in a community or Facility, which includes room, board, and personal services for individuals who cannot live independently yet do not require 24-hour Facility or nursing care.
Eligible Dependent	An Eligible Dependent includes: (1) The Spouse of the Subscriber; and (2) A Dependent child who is related to the Subscriber as a natural child, a child placed for adoption, a legally adopted child, a child for whom the Subscriber has legal guardianship, a stepchild, or a foster child; and is one of the following: (a) under the age of twenty-six (26), (b) incapable of self-sustaining employment by reason of a disabling condition and chiefly dependent upon the Certificate holder/Subscriber for support and maintenance. If the Plan so requests, the Subscriber must provide proof of the child's disability within thirty-one (31) days of the Plan's request; or (c) the Subscriber's grandchild(ren) or those of the Subscriber's living, covered Spouse, who legally reside with the Certificate holder/Subscriber and (1) the parent of the grandchild(ren) is an Covered Dependent also covered by this Plan; and (2) both the Dependent and child of such Dependent (grandchild) are chiefly dependent upon the Certificate holder/Subscriber for support. Eligible Dependents do not include the spouse of an adult Dependent child.
Eligible Group Member	Any Group Member who meets the specific eligibility requirements of NDPERS.

Emergency Care Services	Emergency Care Services means: (1) Within the Service Area: covered health care services rendered by Participating or Non-Participating Providers under unforeseen conditions that require immediate medical attention. Emergency care services within the Service Area include covered health care services from Non-Participating Providers only when delay in receiving care from Participating Providers could reasonably be expected to cause severe jeopardy to the Member's condition or (2) Outside the Service Area: medically necessary health care services that are immediately required because of unforeseen illness or injury while the enrollee is outside the geographical limits of the Plan's Service Area.
Emergency Medical Condition	A medical condition of recent onset and severity, including severe pain, that would lead a prudent layperson acting reasonably and possessing an average knowledge of health and medicine to believe that the absence of immediate medical attention could reasonably be expected to result in serious impairment to bodily function, serious dysfunction of any bodily organ or part, or would place the person's health, or with respect to a pregnant woman, the health of the woman or her unborn child, in serious jeopardy.
Enrollee	An individual who is covered by this Plan.
ESRD	The federal End Stage Renal Disease program.
Expedited Appeal	An expedited review involving Urgent Care Requests for Adverse Determinations of Prospective (Pre-service) or Concurrent Reviews must be utilized if the Member, or Practitioner and/or Provider acting on behalf of the Member, believes that an expedited determination is warranted.
Experimental or Investigational Services	Health Care Services where the Health Care Service in question either: a. is not recognized in accordance with generally accepted medical standards as being safe and effective for treatment of the condition in question, regardless of whether the service is authorized by law or used in testing or other studies; or b. requires approval by any governmental authority and such approval has not been granted prior to the service being rendered.
Facility	An institution providing Health Care Services or a health care setting, including Hospitals and other licensed inpatient centers, ambulatory surgical or treatment centers, Skilled Nursing Facilities, Residential Treatment Facilities, diagnostic, laboratory, and imaging centers, and rehabilitation, and other therapeutic health settings.
Family Coverage	The Class Of Coverage identifying that the Subscriber and Eligible Dependents are enrolled to received benefits for Covered Services under this Plan.
Formulary	A list of prescription medication products, which are preferred by the Plan for dispensing to Members when appropriate. This list is subject to periodic review and modifications. Additional medications may be added or removed from the Formulary throughout the year.
Gestational Carrier	An adult woman who enters into an agreement to have a fertilized egg, gamete, zygote or embryo implanted in her and bear the resulting child for intended parents, where the embryo is conceived by using the egg and sperm of the intended parents.
Grievance	A written complaint submitted in accordance with the Plan's formal grievance procedure by or on behalf of the enrollee regarding any aspect of the Plan relative to the Member.
[The] Group or [This] Group	NDPERS has signed an agreement with Sanford Health Plan to provide health care benefits for its eligible employees, retirees, and Eligible Dependents.
Group Contract Holder	The individual to whom a [Group] Contract has been issued.
Group Member	Any employee, sole proprietor, partner, director, officer or Member of the Group.
Health Care Services	Services for the diagnosis, prevention, treatment, cure, or relief of a health condition, illness, injury or disease.
Hospital	A short-term, acute care, duly licensed institution that is primarily engaged in providing inpatient diagnostic and therapeutic services for the diagnosis, treatment, and care of injured and sick persons by or under the supervision of Physicians. It has organized departments of medicine and/or major surgery and provides 24-hour nursing service by or under the supervision of registered nurses. The term "Hospital" specifically excludes rest homes, places that are primarily for the care of convalescents, nursing homes, skilled nursing facilities, Residential Care Facilities, custodial care homes, intermediate care facilities, health resorts, clinics, Practitioner and/or Provider's offices, private homes, Ambulatory Surgical Centers, residential or transitional living centers, or similar facilities.
Hospitalization	A stay as an inpatient in a Hospital. Each "day" of Hospitalization includes an overnight stay for which a charge is customarily made. Benefits may not be restricted in a way that is based upon the number of hours that the Member stays in the Hospital.
Iatrogenic Condition	Illness or injury because of mistakes made in medical treatment, such as surgical mistakes, prescribing or dispensing the wrong medication or poor hand writing resulting in a treatment error.

Infertility Services Deductible Amount	A specified dollar amount payable by the Member during their lifetime for infertility services. The Infertility Services Deductible Amount does not apply toward the Out-of-Pocket Maximum Amount.
In-Network Benefit Level	The PPO Plan level of benefits provided when a Member seeks services from a Participating Practitioner and/or Provider.
Intensive Outpatient Program (IOP)	Provides mental health and/or substance use disorder outpatient treatment services during which a Member remains in the program a minimum of three (3) continuous hours per day and does not remain in the program overnight. Programs may be available in the evenings or weekends.
Intermediate Care	Intermediate Care means care in a Facility, corporation or association licensed or regulated by the State for the accommodation of persons, who, because of incapacitating infirmities, require minimum but continuous care but are not in need of continuous medical or nursing services. The term also includes facilities for the nonresident care of elderly individuals and others who are able to live independently but who require care during the day.
Maintenance Care	Treatment provided to a Member whose condition/progress has ceased improvement or could reasonably be expected to be managed without the skills of a Health Care Provider. Exception: periodic reassessments are not considered Maintenance Care
Maximum Allowed Amount	The amount established by Sanford Health Plan using various methodologies for covered services and supplies. Sanford Health Plan's Maximum Allowable Amount is the lesser of (a) the amount charged for a covered service or supply; or (b) Reasonable Costs.
Medically Necessary or Medical Necessity	Health Care Services that are appropriate and necessary as determined by any Participating Provider, in terms or type, frequency, level, setting, and duration, according to the Member's diagnosis or condition, and diagnostic testing and Preventive services. Medically Necessary care must be consistent with generally accepted standards of medical practice as recognized by the Plan, as determined by health care Practitioner and/or Providers in the same or similar general specialty as typically manages the condition, procedure, or treatment at issue; and a. help restore or maintain the Members health; or b. prevent deterioration of the Member's condition; or c. prevent the reasonably likely onset of a health problem or detect an incipient problem; or d. not considered Experimental or Investigative
Member	The Subscriber and, if another Class of Coverage is in force, the Subscriber's Eligible Dependents
Mental Health and/or Substance Use Disorder Services	Health Care Services for disorders specified in the Diagnostic and Statistical Manual of Mental Disorders (DSM), the American Society of Addiction Medicine Criteria (ASAM Criteria), and the International Classification of Diseases (ICD), current editions. Also referred to as behavioral health, psychiatric, chemical dependency, substance abuse, and/or addiction services.
Natural Teeth	Teeth, which are whole and without impairment or periodontal disease, and are not in need of the treatment provided for reasons other than dental injury.
Never Event	Errors in medical care that are clearly identifiable, preventable, and serious in their consequences for patients, and indicate a problem in the safety and credibility of a health care Facility. Participating Providers are not permitted to bill the Plan or Members for services related to Never Events.
NDPERS	The North Dakota Public Employees Retirement System.
Non-Covered Services	Those Health Care Services to which a Member is not entitled and are not part of the benefits paid under the terms of this Contract.
Non-Participating Provider	A Provider that has not signed a contract with the Plan.
Non-Payable Health Care Provider	A Health Care Provider that is not reimbursable by the Plan. No benefits will be available for Covered Services prescribed by, performed by or under the direct supervision of a Non-Payable Health Care Provider.
Nursing Services	Health Care Services which are provided by a registered nurse (RN), licensed practical nurse (LPN), or other licensed nurse who is: (1) acting within the scope of that person's license, (2) authorized by a Provider, and (3) not a Member of the Member's immediate family.
Out-of-Network Benefit Level	The Basic Plan level of benefits provided when a Member seeks services from a Non-PPO Practitioner and/or Provider. This is most often referred to as benefits received under the Basic Plan level but may include services received from Practitioners and/or Providers that have not signed a contract with the Plan.

Out-of-Pocket Maximum Amount	The total Deductible and Coinsurance Amounts for certain Covered Services that are a Member's responsibility during a Benefit Period. When the Out-of-Pocket Maximum Amount is met, this Benefit Plan will pay 100% of the Allowed Charge for Covered Services, less Copayment Amounts incurred during the remainder of the Benefit Period. The Out-of-Pocket Maximum Amount renews on January 1 of each consecutive Benefit Period. Medical and prescription drug Copayment amounts do not apply toward the Out-of-Pocket Maximum Amount.
Partial Hospitalization	Also known as day treatment; A licensed or approved day or evening outpatient treatment program that includes the major diagnostic, medical, psychiatric and psychosocial rehabilitation treatment modalities designed for individuals with mental health and/or substance use disorders who require coordinated, intensive, comprehensive and multi-disciplinary treatment.
Participating [Health Care] Provider	A Provider who, under a contract with the Plan, or with its contractor or subcontractor, has agreed to provide Health Care Services to Members with an expectation of receiving payment, other than Coinsurance, Copays, or Deductibles, directly or indirectly, from the Plan. A Participating Provider includes Health Care Providers at either the Basic or PPO Plan level.
Physician	An individual licensed to practice medicine or osteopathy.
[The] Plan or [This] Plan	Sanford Health Plan.
Plan Administrator	North Dakota Public Employees Retirement System (NDPERS)
PPO (Preferred Provider Organization) Plan	A group of Health Care Providers who provide discounted services to the Members of NDPERS. Because PPO Health Care Providers charge Sanford Health Plan less for medical care services provided to the Members of NDPERS, cost savings are passed on to Members by way of reduced Cost Sharing Amounts. To receive a higher payment level, Covered Services must be received from an NDPERS PPO Health Care Provider. Health Care Providers accessed at the PPO level are also Participating Providers.
Practitioner	A professional who provides health care services. Practitioners are usually required to be licensed as required by law. Practitioners are also Physicians.
Preauthorization	The process of the Member or the Member's representative notifying Sanford Health Plan to request approval for specified services. Eligibility for benefits for services requiring Preauthorization is contingent upon compliance with the provisions in Sections 2, 4 and 5. Preauthorization does not guarantee payment of benefits.
Prescription Drug Coinsurance Maximum Amount	The total Formulary Coinsurance Amount for Prescription Medications that is a Member's responsibility during a Benefit Period. When this Coinsurance Maximum Amount is met, this Benefit Plan will pay 100% of the Allowed Charge for Formulary Prescription Medications, less Copayment Amounts incurred during the remainder of the Benefit Period. This Coinsurance Maximum Amount renews on January 1 of each consecutive Benefit Period. Copayment Amounts do not apply toward this Coinsurance Maximum Amount.
Preventive	Health Care Services that are medically accepted methods of prophylaxis or diagnosis which prevent disease or provide early diagnosis of illness and/or which are otherwise recognized by the Plan.
Primary Care Practitioner and/or Provider (PCP)	A Participating Practitioner and/or Provider who is an internist, family practice Physician, pediatrician, or obstetrician/gynecologist who is a Participating Practitioner and who has been chosen to be designated as a Primary Care Practitioner and/or Provider as indicated in the Provider Directory and may be responsible for providing, prescribing, directing, referring, and/or authorizing all care and treatment of a Member.
Prior Approval	The process of the Member or Member's representative providing information to Sanford Health Plan substantiating medical necessity of services in order to receive benefits for the requested service. Sanford Health Plan reserves the right to deny or pay benefits at the Basic Plan level if Prior Approval is not obtained.
Prospective (Pre-service) Review	Means Urgent and non-Urgent Utilization Review conducted prior to an admission or the provision of a Health Care Service or a course of treatment. Also referred to as Preauthorization/Prior Approval.
[Health Care] Provider	An individual, institution or organization that provides services for Members. Examples of Providers include but are not limited to Hospitals, Physicians, Practitioners, and home health agencies.
Prudent Layperson	A person who is without medical training and who possess an average knowledge of health and medicine and who draws on his/her practical experience when making a decision regarding the need to seek Emergency medical treatment.
Qualified Mental Health Professional	A licensed Physician who is a psychiatrist; a licensed clinical psychologist who is qualified for listing on the national register of health service providers in psychology; a licensed certified social worker who is a board-certified in clinical social work; or a nurse who holds advanced licensure in psychiatric nursing.
Reasonable Costs	Those costs that do not exceed the lesser of (a) negotiated schedules of payment developed by the Plan, which are accepted by Participating Practitioners and/or Providers; or (b) the prevailing marketplace charges.

Residential Treatment Facility	An inpatient mental health or substance use disorder treatment Facility that provides twenty-four (24) hour availability of qualified medical staff for psychiatric, substance abuse, and other therapeutic and clinically informed services to individuals whose immediate treatment needs require a structured twenty-four (24) hour residential setting that provides all required services on site. Services provided include, but are not limited to, multi-disciplinary evaluation, medication management, individual, family and group therapy, substance abuse education/counseling. Facilities must be under the direction of a board-eligible or certified psychiatrist, with appropriate staffing on-site at all times. If the Facility provides services to children and adolescents, it must be under the direction of a board-eligible or certified child psychiatrist or general psychiatrist with experience in the treatment of children. Hospital licensure is required if the treatment is Hospital-based. The treatment Facility must be licensed by the state in which it operates.
Retrospective (Post-service) Review	Means any review of a request for a benefit that is not a Prospective (Pre-service) Review request, which does not include the review of a claim that is limited to veracity of documentation, or accuracy of coding, or adjudication of payment. Retrospective (Post-service) Review will be utilized by Sanford Health Plan to review services that have already been utilized.
Serious Reportable Event	An event that results in a physical or mental impairment that substantially limits one or more major life activities of a Member or a loss of bodily function, if the impairment or loss lasts more than seven (7) days or is still present at the time of discharge from an inpatient health care Facility. Serious events also include loss of a body part and death. Participating Providers are not permitted to bill Members or the Plan for services related to Serious Reportable Events.
[NDPERS] Service Agreement and/or [Group] Contract	The Service Agreement between NDPERS and Sanford Health Plan that is a contract for Health Care Services, which by its terms limits eligibility to enrollees of a specified group. The Group Contract may include coverage for Dependents.
Service Area	The geographic Service Area of the Plan approved by the State's Insurance Department.
Single Coverage	The Class of Coverage identifying that only the Subscriber is enrolled to received benefits for Covered Services under this Plan.
Skilled Nursing Facility	A Facility that is operated pursuant to the presiding state law and is primarily engaged in providing room and board accommodations and skilled nursing care under the supervision of a duly-licensed Physician.
Spouse	The Subscriber's Spouse under a legally existing marriage between persons of the opposite sex
[This] State or [The] State	The State of North Dakota.
Subscriber	An Eligible Group Member who is enrolled in the Plan whose employment or other status (except family dependency) is the basis for eligibility for enrollment in the Plan. A Subscriber is also a Member and Enrollee.
Surrogate	An adult woman who enters into an agreement to bear a child conceived through assisted conception for intended parents.
Urgent Care Request	Means a request for a Health Care Service or course of treatment with respect to which the time periods for making a non-Urgent Care Request determination which: 1. Could seriously jeopardize the life or health of the Member or the ability of the Member to regain maximum function, based on a Prudent Layperson's judgment; or 2. In the opinion of a Practitioner and/or Provider with knowledge of the Member's medical condition, would subject the Member to severe pain that cannot be adequately managed without the health care service or treatment that is the subject of the request.
Urgent Care Situation	An Urgent Care Situation is a degree of illness or injury, which is less severe than an Emergency Condition, but requires prompt medical attention within *twenty-four (24)* hours, such as stitches for a cut finger. Urgent care means a request for a health care service or course of treatment with respect to which the time periods for making a non-Urgent Care Request determination: a. Could seriously jeopardize the life or health of the Member or the ability of the Member to regain maximum function, based on a Prudent Layperson's judgment; or b. In the opinion of a Practitioner and/or Provider with knowledge of the Member's medical condition, would subject the Member to severe pain that cannot be adequately managed without the health care service or treatment that is the subject of the request.
Us/We/Our	Refers to Sanford Health Plan
Utilization Review	A set of formal techniques used by the Plan to monitor and evaluate the medical necessity, appropriateness, and efficiency of Health Care Services and procedures including techniques such as ambulatory review, Prospective (pre-service) Review, second opinion, Preauthorization/Prior Approval, Concurrent Review, Case Management, discharge planning, and retrospective (post-service) review.

Section 11. When Coverage Ends

Termination of Member Coverage

For the purposes of this Benefit Plan, upon termination of Member Coverage, the following provisions control:

1. **Determining Ineligibility.** Eligibility for benefits subsequent to retirement or termination will be determined pursuant to N.D.C.C. §54-52.1-03.
2. **Continuation of health, dental, vision, or prescription drug coverage after termination.** An employee who terminates employment and is not receiving a monthly retirement benefit from one of the eligible retirement systems, and applies for continued coverage with the health, dental, vision, or prescription drug plan may continue such coverage for a maximum of eighteen (18) months by remitting timely payments to the Board. The employee desiring coverage shall notify the Board within sixty (60) days of the termination. Coverage will become effective on the first day of the month following the last day of coverage by the employing agency, if an application is submitted within sixty (60) days. An individual who fails to timely notify the board is not eligible for coverage. [N.D.A.C. §71-03-03-06]
3. **Continuation of health, dental, vision, or prescription drug coverage for dependents.** Dependents of employees with family coverage may continue coverage with the group after their eligibility would ordinarily cease. This provision includes divorced or widowed spouses and children when they are no longer dependent on the employee. Coverage is contingent on the prompt payment of the premium, and in no case will coverage continue for more than thirty-six (36) months. Dependents desiring coverage shall notify the board within sixty (60) days of the qualifying event and must submit an application in a timely manner. An individual who fails to notify the Board within the sixty (60) days, and who desires subsequent coverage, will not be eligible for coverage. [N.D.A.C. §71-03-03-07]
4. **Leave without pay.** An employee on an approved leave without pay may elect to continue coverage for the periods specified in the plans for life insurance, health, dental, vision, or prescription drug coverages by paying the full premium to the agency. An eligible employee electing not to continue coverage during a leave of absence is entitled to renew coverage for the first of the month following the month that the employee has returned to work if the employee submits an application for coverage within the first thirty-one (31) days of returning to work. An eligible employee failing to submit an application for coverage within the first thirty-one (31) days of returning to work or eligibility for a special enrollment period, may enroll during the annual open enrollment. Upon a showing of good cause, the executive director may waive the thirty-one day application requirement. [N.D.A.C. §71-03-03-09]
   a. In the event an enrolled eligible employee is not entitled to receive salary, wages, or other compensation for a particular calendar month, that employee may make direct payment of the required premium to the board to continue the employee's coverage, and the employing department, board, or agency shall provide for the giving of a timely notice to the employee of that person's right to make such payment at the time the right arises. [N.D.C.C. §54-52.1-06]

Note: A Member's coverage may not be terminated due to the status of the Member's health or because the Member has exercised his or her rights under the Plan's policy on member complaints or the policy on appeal procedures for medical review determinations. For details on Complaints and Appeals, see Section 8 of this COI.

Continuation

1. If the Subscriber becomes ineligible for group membership under this Benefit Plan due to an inability to meet NDPERS requirements and enrollment regulations, coverage will be canceled at the end of the last month that premium was received from the Plan Administrator. Exceptions may be made if:
   a. The Plan Administrator cancels coverage. Conversion coverage will not be offered to a Subscriber, if on the date of conversion the Plan Administrator, through which the Subscriber is eligible, has terminated coverage with Sanford Health Plan, and the Plan Administrator has enrolled with another insurance carrier.
   b. The Plan Administrator no longer meets Sanford Health Plan's group coverage requirements. The Subscriber will be given the right to convert to a nongroup benefit plan, subject to premiums and benefit plan provisions in effect, if application for such coverage is made within 31 days after the termination date of the previous benefit plan.
   c. Ineligibility occurs because the Subscriber elects to discontinue employment, is terminated or is otherwise no longer covered under the group health plan. The Subscriber may elect continuation coverage through the Plan Administrator in accordance with state and federal law.
   d. Ineligibility occurs because the Subscriber is no longer eligible to continue coverage under the group (NDPERS). The Subscriber may elect conversion (individual) coverage on a nongroup basis, subject to premiums and benefit plan provisions for nongroup coverage then in effect, if the Subscriber applies for nongroup coverage within 31 days after the termination date of the previous group health plan coverage.
2. If a Member becomes otherwise ineligible for group membership under this Benefit Plan, Sanford Health Plan must at least offer the Subscriber its conversion (individual) benefit plan, if the Member lives in the Sanford Health Plan Service Area. There may be other coverage options for the Subscriber and/or Eligible Dependents through the Health Insurance Marketplace, Medicaid, or other group health plan coverage options (such as a spouse's plan) through what is called a "special enrollment period." The cost of these options may vary depending on a Subscriber's individual circumstances. To learn more, visit www.healthcare.gov or call (800) 318-2596 | TTY/TDD: (855) 889-4325.

Continuation of Coverage for Confined Members

Any Member who is an inpatient in a Hospital or other Facility on the date of coverage termination under this Benefit Plan will be covered in accordance with the terms of this Certificate until they are discharged from such Hospital or other Facility. Applicable charges for coverage that was in effect prior to termination of this Certificate will apply.

Extension of Benefits for Total Disability

An extension of benefits is provided Covered Members/Subscribers who become totally disabled while enrolled under this Benefit Plan and whom continue to be totally disabled at the date of termination of this Certificate. Upon payment applicable premium charges at the current Group rate, coverage will remain in full force and effect until the first of the following occurs:

1. The end of a period of twelve (12) months starting with the date of termination of the Group contract;
2. The date the Member is no longer totally disabled; or
3. The date a succeeding plan provides replacement coverage to that Member without limitation as to the disabling condition.

Upon termination of the extension of benefits, the Member/Subscriber will have continuation and conversion rights as stated in Sections 11 and 12.

Cancellation of This or Previous Benefit Plans

If the Benefit Plan is terminated, modified or amended, coverage is automatically terminated, modified or amended for all enrolled Members of the NDPERS Dakota Plan. It is the Plan Administrator's responsibility to notify Members of the termination of coverage.

Notice of Creditable Coverage

You, the Member, may request a Certificate of Creditable Coverage for you and your covered family Members upon your voluntary or involuntary termination from the Plan. You may also request a Certificate of Creditable Coverage at any time by calling Member Services toll-free at (800) 499-3416 | TTY/TDD: (877) 652-1844 *(toll-free)*. Written requests can be sent to MemberServices@sanfordhealth.org or:
Sanford Health Plan
ATTN: NDPERS/Member Services
PO Box 91110
Sioux Falls, SD 57109-1110

Section 12. Options After Coverage Ends

Federal Continuation of Coverage Provisions ("COBRA")

Notice of Continuation Coverage Rights Under COBRA

Introduction

You're getting this notice because you recently gained coverage under a group health plan (the Plan). This notice has important information about your right to COBRA continuation coverage, which is a temporary extension of coverage under the Plan. This notice explains COBRA continuation coverage, when it may become available to you and your family, and what you need to do to protect your right to get it. When you become eligible for COBRA, you may also become eligible for other coverage options that may cost less than COBRA continuation coverage.

The right to COBRA continuation coverage was created by a federal law, the Consolidated Omnibus Budget Reconciliation Act of 1985 (COBRA). COBRA continuation coverage can become available to you and other members of your family when group health coverage would otherwise end. For more information about your rights and obligations under the Plan and under federal law, you should review the Plan's Summary Plan Description or contact the Plan Administrator.

You may have other options available to you when you lose group health coverage. For example, you may be eligible to buy an individual plan through the Health Insurance Marketplace. By enrolling in coverage through the Marketplace, you may qualify for lower costs on your monthly premiums and lower out-of-pocket costs. Additionally, you may qualify for a 30-day special enrollment period for another group health plan for which you are eligible (such as a spouse's plan), even if that plan generally doesn't accept "Late Enrollees".

What is COBRA Continuation Coverage?

COBRA continuation coverage is a continuation of Plan coverage when it would otherwise end because of a life event. This is also called a "qualifying event." Specific qualifying events are listed later in this notice. After a qualifying event, COBRA continuation coverage must be offered to each person who is a "qualified beneficiary." You, your spouse, and your dependent children could become qualified beneficiaries if coverage under the Plan is lost because of the qualifying event. Under the Plan, qualified beneficiaries who elect COBRA continuation coverage must pay for COBRA continuation coverage.

If you're an employee, you'll become a qualified beneficiary if you lose your coverage under the Plan because of the following qualifying events:

- Your hours of employment are reduced, or
- Your employment ends for any reason other than your gross misconduct.

If you're the spouse of an employee, you'll become a qualified beneficiary if you lose your coverage under the Plan because of the following qualifying events:

- Your spouse dies;
- Your spouse's hours of employment are reduced;
- Your spouse's employment ends for any reason other than his or her gross misconduct;
- Your spouse becomes entitled to Medicare benefits (under Part A, Part B, or both); or
- You become divorced or legally separated from your spouse.

Your dependent children will become qualified beneficiaries if they lose coverage under the Plan because of the following qualifying events:

- The parent-employee dies;
- The parent-employee's hours of employment are reduced;
- The parent-employee's employment ends for any reason other than his or her gross misconduct;
- The parent-employee becomes entitled to Medicare benefits (Part A, Part B, or both);
- The parents become divorced or legally separated; or
- The child stops being eligible for coverage under the Plan as a "dependent child."

Sometimes, filing a proceeding in bankruptcy under title 11 of the United States Code can be a qualifying event. If a proceeding in bankruptcy is filed with respect to NDPERS, and that bankruptcy results in the loss of coverage of any retired employee covered under the Plan, the retired employee will become a qualified beneficiary. The retired employee's spouse, surviving spouse, and dependent children will also become qualified beneficiaries if bankruptcy results in the loss of their coverage under the Plan.

When is COBRA Coverage Available?

The Plan will offer COBRA continuation coverage to qualified beneficiaries only after the Plan Administrator has been notified that a qualifying event has occurred. The employer must notify the Plan Administrator of the following qualifying events:

- The end of employment or reduction of hours of employment;
- Death of the employee;
- Commencement of a proceeding in bankruptcy with respect to the employer; or
- The employee's becoming entitled to Medicare benefits (under Part A, Part B, or both).

For all other qualifying events (divorce or legal separation of the employee and spouse or a dependent child's losing eligibility for coverage as a dependent child), you must notify the Plan Administrator within 60 days after the qualifying event occurs. You must provide this notice to:

North Dakota Public Employees Retirement System
400 East Broadway, Suite 505
PO Box 1657
Bismarck, ND 58502
(701) 328-3900

How is COBRA Coverage Provided?

Once the Plan Administrator receives notice that a qualifying event has occurred, COBRA continuation coverage will be offered to each of the qualified beneficiaries. Each qualified beneficiary will have an independent right to elect COBRA continuation coverage. Covered employees may elect COBRA continuation coverage on behalf of their spouses, and parents may elect COBRA continuation coverage on behalf of their children.

COBRA continuation coverage is a temporary continuation of coverage that generally lasts for 18 months due to employment termination or reduction of hours of work. Certain qualifying events, or a second qualifying event during the initial period of coverage, may permit a beneficiary to receive a maximum of 36 months of coverage.

There are also ways in which this 18-month period of COBRA continuation coverage can be extended:

- *Disability extension of 18-month period of COBRA continuation coverage*
  If you or anyone in your family covered under the Plan is determined by Social Security to be disabled and you notify the Plan Administrator in a timely fashion, you and your entire family may be entitled to get up to an additional 11 months of COBRA continuation coverage, for a maximum of 29 months. The disability would have to have started at some time before the 60th day of COBRA continuation coverage and must last at least until the end of the 18-month period of COBRA continuation coverage.
- *Second qualifying event extension of 18-month period of continuation coverage*
  If your family experiences another qualifying event during the 18 months of COBRA continuation coverage, the spouse and dependent children in your family can get up to 18 additional months of COBRA continuation coverage, for a maximum of 36 months, if the Plan is properly notified about the second qualifying event. This extension may be available to the spouse and any dependent children getting COBRA continuation coverage if the employee or former employee dies; becomes entitled to Medicare benefits (under Part A, Part B, or both); gets divorced or legally separated; or if the dependent child stops being eligible under the Plan as a dependent child. This extension is only available if the second qualifying event would have caused the spouse or dependent child to lose coverage under the Plan had the first qualifying event not occurred.

Are there other coverage options besides COBRA Continuation Coverage?

Yes. Instead of enrolling in COBRA continuation coverage, there may be other coverage options for you and your family through the Health Insurance Marketplace, Medicaid, or other group health plan coverage options (such as a spouse's plan) through what is called a "special enrollment period." Some of these options may cost less than COBRA continuation coverage. You can learn more about many of these options at www.healthcare.gov.

If You Have Questions

Questions concerning your Plan or your COBRA continuation coverage rights should be addressed to the contact or contacts identified below. For more information about your rights under the Employee Retirement Income Security Act (ERISA), including COBRA, the Patient Protection and Affordable Care Act, and other laws affecting group health plans, contact the nearest Regional or District Office of the U.S. Department of Labor's Employee Benefits Security Administration (EBSA) in your area or visit www.dol.gov/ebsa. (Addresses and phone numbers of Regional and District EBSA Offices are available through EBSA's website.) For more information about the Marketplace, visit www.healthcare.gov.

Keep Your Plan Informed of Address Changes

To protect your family's rights, let the Plan Administrator know about any changes in the addresses of family members. You should also keep a copy, for your records, of any notices you send to the Plan Administrator.

Plan Contact Information

Sanford Health Plan
300 Cherapa Place, Suite 201
Sioux Falls, SD 57103
(877) 305-5463 *(toll-free)*
TTY/TDD: (877) 652-1844 *(toll-free)*

Section 13. Subrogation and Right of Reimbursement

If a Member is injured or becomes ill because of an action or omission of a third party who is or may be liable to the Member for the injury or illness, the Health Plan may be able to "step into the shoes" of the Member to recover health care costs from the party responsible for the injury or illness. This is called "Subrogation," and this part of this Certificate covers such situations.

If a Member has received or receives a recovery from the third party, the Health Plan has a right to reduce benefits, or to be reimbursed for that which it has provided to the Member. This is called "Reimbursement" and this part of this Certificate covers such situations.

The Plan will provide Health Care Services to the Member for the illness or injury, just as it would in any other case. However, if the Member accepts the services from the Plan, this acceptance constitutes the Member's consent to the provisions discussed below.

Plan's Rights of Subrogation

In the event of any payments for benefits provided to a Member under this Contract, the Plan, to the extent of such payment, shall be subrogated to all rights of recovery such Member, the Member's parents, heirs, guardians, executors, or other representatives may have against any person or organization. These subrogation and reimbursement rights also include the right to recover from uninsured motorist insurance, underinsured motorist insurance, no-fault insurance, automobile medical payments coverage, premises medical expense coverage, and workers compensation insurance or substitute coverage. The Plan shall be entitled to receive from any such recovery an amount up to the Reasonable Cost for the services provided by the Plan. In providing benefits to a Member, the Plan may obtain discounts from its health care Providers, compensate Providers on a capitated basis or enter into other arrangements under which it pays to another less than the Reasonable Costs of the benefits provided to the Member. Regardless of any such arrangement, when a Member receives a benefit under the Plan for an illness or injury, the Plan is subrogated to the Member's right to recover the Reasonable Costs of the benefits it provides on account of such illness or injury, even if those Reasonable Costs exceed the amount paid by the Plan.

The Plan is granted a first priority right to subrogation or reimbursement from any source of recovery. The Plan's first priority right applies whether or not the Member has been made whole by any recovery. The Plan shall have a lien on all funds received by the Member, the Member's parents, heirs, guardians, executors, or other representatives up to the Reasonable Costs Charge for any past, present, or future Health Care Services provided to the Member. The Plan may give notice of that lien to any party who may have contributed to the loss.

If the Plan so decides, it may be subrogated to the Member's rights to the extent of the benefits provided or to be provided under this Contract. This includes the Plan's right to bring suit against the third party in the Member's name.

Plan's Right to Reduction and Reimbursement

The Plan shall have the right to reduce or deny benefits otherwise payable by the Plan, or to recover benefits previously paid by the Plan, to the extent of any and all payments made to or for a Member by or on behalf of a third party who is or may be liable to the Member, regardless of whether such payments are designated as payment for, but not limited to, pain and suffering, loss of income, medical benefits or expenses, or other specified damages.

Any such right of reduction or reimbursement provided to the Plan under this Contract shall not apply or shall be limited to the extent that statutes or the courts of this State eliminate or restrict such rights.

The Plan shall have a lien on all funds received by the Member, the Member's parents, heirs, guardians, executors, or other representatives up to the Reasonable Cost for the Health Care Services provided to the Member.

Member's Responsibilities

The Member, the Member's parents, heirs, guardians, executors, or other representatives must take such action, furnish such information and assistance, and execute such instruments as the Plan requires to facilitate enforcement of its rights under this Part. The Member shall take no action prejudicing the rights and interests of the Plan under this provision. Neither a Member nor the Member's attorney or other representative is authorized to accept subrogation or reimbursement payments on behalf of the Plan, to negotiate or compromise the Plan's subrogation or reimbursement claim, or to release any right of recovery or reimbursement without the Plan's express written consent. Any Member who fails to cooperate in the Plan's administration of this Part shall be responsible for the Reasonable Cost for services subject to this section and any legal costs incurred by the Plan to enforce its rights under this section. Members must also report any recoveries from insurance companies or other persons or organizations arising form or relating to an act or omission that caused or contributed to an injury or illness to the Member paid for by the Plan. Failure to comply will entitle the Plan to withhold benefits, services, payments, or credits due under the Plan.

This page is intentionally left blank. Your *Summary of Benefits and Coverage* is an attachment to this Certificate of Insurance.

North Dakota Public Employees Retirement System (NDPERS)

Certificate of Insurance

Dakota Plan Non-Grandfathered PPO/Basic

Plan on the best fit.

North Dakota Public Employees Retirement System
Dakota Plan Health Benefits

SANFORD HEALTH PLAN

Notice

Your employer has established an employee welfare benefit plan for Eligible Employees and their Eligible Dependents. The following Summary Plan Description/Certificate of Insurance (COI) is provided to you in accordance with the Employee Retirement Income Security Act of 1974. Every attempt has been made to provide concise and accurate information.

This COI and the NDPERS Service Agreement are the official benefit plan documents for the employee welfare benefit plan established by the Plan Administrator. In case of conflict between this Certificate of Insurance/Summary Plan Description and the NDPERS Service Agreement, the provisions of the NDPERS Service Agreement will control.

Although it is the intention of the Plan Administrator to continue the employee welfare benefit plan for an indefinite period of time, the Plan Administrator reserves the right, whether in an individual case or in general, to eliminate the Benefit Plan.

Sanford Health Plan shall construe and interpret the provisions of the Service Agreement, the COI and related documents, including doubtful or disputed terms; and to conduct any and all reviews of claims denied in whole or in part. NDPERS shall determine all questions of eligibility.

Plan Name

North Dakota Public Employees Retirement System Dakota Plan

Name and Address of Employer (Plan Sponsor)

North Dakota Public Employees Retirement System
400 East Broadway, Suite 505
PO Box 1657
Bismarck, ND 58502

Plan Sponsor's IRS Employer Identification Number

45-0282090

Plan Number Assigned By the Plan Sponsor

N/A

Type of Welfare Plan

Health

Type of Administration

This employee welfare benefit plan is fully insured by Sanford Health Plan and issued by Sanford Health Plan. Sanford Health Plan is the Claims Administrator for this employee welfare benefit plan.

Name and Address of Sanford Health Plan

Sanford Health Plan
300 Cherapa Place, Suite 201
Sioux Falls, SD 57103
(877) 305-5463 *(toll-free)*
TTY/TDD: (877) 652-1844 *(toll-free)*

Plan Administrator's Name, Business Address and Business Telephone Number

North Dakota Public Employees Retirement System
400 East Broadway, Suite 505
PO Box 1657
Bismarck, ND 58502
(701) 328-3900

Name and Address of Agent for Service of Legal Process

Plan Administrator	Sanford Health Plan
North Dakota Public Employees Retirement System Sparb Collins, Executive Director 400 East Broadway, Suite 505 PO Box 1657 Bismarck, ND 58502	Sanford Health Plan ATTN: President 300 Cherapa Place, Suite 201 PO Box 91110 Sioux Falls, SD 57109-1110

Service of legal process may be made upon a Plan trustee or the Plan Administrator.

Title of Employees Authorized To Receive Protected Health Information

- Administrative Services Division
- Accounting & IT Division
- Accounting Division
- Benefit Programs Division
- Benefit Program Development & Research
- Executive Director
- Internal Audit Division

This includes every employee, class of employees, or other workforce person under control of the Plan Sponsor who may receive the Member's Protected Health Information relating to payment under, health care operations of, or other matters pertaining to the Benefit Plan in the ordinary course of business.

These identified individuals will have access to the Member's Protected Health Information only to perform the plan administrative functions the Plan Sponsor provides to the Benefit Plan. Such individuals will be subject to disciplinary action for any use or disclosure of the Member's Protected Health Information in breach or in violation of, or noncompliance with, the privacy provisions of the Benefit Plan. The Plan Sponsor shall promptly report any such breach, violation, or noncompliance to the Plan Administrator; will cooperate with the Plan Administrator to correct the breach, violation and noncompliance to impose appropriate disciplinary action on each employee or other workforce person causing the breach, violation, or noncompliance; and will mitigate any harmful effect of the breach, violation, or noncompliance on any Member whose privacy may have been compromised.

Statement of Eligibility to Receive Benefits

As provided in N.D.C.C. §54-52.1-01(4), individuals eligible to receive benefits are every permanent employee who is employed by a governmental unit, as that term is defined in N.D.C.C. §54-52-01, whose services are not limited in duration, who is filling an approved and regularly funded position in a governmental unit, and who is employed at least seventeen and one-half hours per week and at least five months each year or for those first employed after August 1,2003, is employed at least twenty hours per week and at least twenty weeks each year of employment. An eligible employee includes members of the Legislative Assembly, judges of the Supreme Court, paid members of state or political subdivision boards, commissions, or associations, full-time employees of political subdivisions, elective state officers as defined by N.D.C.C. §54-06-01(2), and disabled permanent employees who are receiving compensation from the North Dakota workforce safety and insurance fund.

A temporary employee employed before August 1, 2007, may elect to participate in the uniform group insurance program by completing the necessary enrollment forms and qualifying under the medical underwriting requirements of the program if such election is made before January 1, 2015, and if the temporary employee is participating in the uniform group insurance program on January 1, 2015. In order for a temporary employee employed after July 31, 2007, to qualify to participate in the uniform group insurance program, the employee must be employed at least twenty hours per week; must be employed at least twenty weeks each year of employment; must make the election to participate before January 1, 2015; and must be participating in the uniform group insurance program as of January 1, 2015. To be eligible to participate in the uniform group insurance program, a temporary employee first employed after December 31, 2014, or any temporary employee not participating in the uniform group insurance program as of January 1, 2015, must meet the definition of a full-time employee under §4980H(c)(4) of the Internal Revenue Code [26 U.S.C. 4980H(c)(4)].

An eligible employee is entitled to coverage the first of the month following the month of employment, provided the employee submits an application for coverage within the first 31 days of employment or eligibility for a special enrollment period as set forth in N.D.A.C. §71-03-03. Each eligible employee may elect to enroll his/her Eligible Dependents.

Eligible employees also include non-Medicare eligible retired and terminated employees, and their Eligible Dependents, who remain eligible to participate in the uniform group insurance program pursuant to applicable state law, as provided in N.D.C.C. §54-52.1-03 and federal regulations. For a comprehensive description of eligibility, refer to the NDPERS web site at www.nd.gov/ndpers.

Eligibility to receive benefits under the Benefit Plan is initially determined by the Plan Administrator. When an eligible employee meets the criteria for eligibility, a membership application must be completed. NDPERS has the ultimate decision making authority regarding eligibility to receive benefits.

Description of Benefits

See the Schedule of Benefits and the Covered Services Sections. Refer to the Table of Contents for page numbers.

Sources of Premium Contributions to the Plan and the Method by Which the Amount of Contribution Is Calculated

The contributions for single or family for state employees are paid at 100% by the State. The contributions for employees of participating political subdivisions are at the discretion of the subdivision and subject to the minimum contribution requirements and participation requirements of Sanford Health Plan. Either the contributions for temporary employees are at their own expense or their employer may pay the premium subject to its budget authority.

End of the Year Date for Purposes of Maintaining the Plan's Fiscal Records

June 30

Clerical Error

Any clerical error by either the Plan or Claims Administrators, or the aforementioned entities' designees, in keeping pertinent records or a delay in making any changes will not invalidate coverage otherwise validly in force or continue coverage validly terminated. An equitable adjustment of contributions will be made when the error or delay is discovered.

If, due to a clerical error, an overpayment occurs in a Plan reimbursement amount, Sanford Health Plan and NDPERS retain contractual rights to the overpayment. The person or institution receiving the overpayment will be required to return the incorrect amount of money.

Recovery of Benefit Payments

Pursuant to N.D.A.C. §71-03-05-06, whenever benefits are paid in noncompliance with the Contract, NDPERS, which is the Plan Administrator, or an agent of the Plan Administrator, retains the right to recover the payments from the party responsible.

If Sanford Health Plan, which is the Claims Administrator and Payor, or an agent of Sanford Health Plan, is at fault, the amount of overpayment will be withheld from the administrative fees paid by NDPERS.

If overpayments are made because of false or misleading information provided by a Member, Sanford Health Plan, or an agent of Sanford Health Plan, shall attempt to recover the amount. Any moneys recovered shall be credited to NDPERS.

If an overpayment is made because of a mistake or deliberate act by a Health Care Provider, Sanford Health Plan shall collect the money from the Provider and credit that amount to NDPERS.

If fraud is suspected, Sanford Health Plan shall inform NDPERS and NDPERS may turn the evidence over to the North Dakota State's Attorney or Attorney General's office for possible prosecution.

Amending and Terminating this Benefit Plan

As Plan Administrator, NDPERS has delegated responsibility for determinations regarding covered benefits, and the amount and manner of the payment of benefits, including the appeal of denied claims, to Sanford Health Plan, the insurer of the plan.

NDPERS reserves the right to terminate the plan, or amend or eliminate benefits under the North Dakota Public Employees Retirement System Dakota Plan, as insured and issued by Sanford Health Plan, at any time and at its discretion, upon mutual agreement between NDPERS and Sanford Health Plan. Should this Benefit Plan be amended or terminated, such action shall be by a written instrument duly adopted by both NDPERS and Sanford Health Plan, or the aforementioned entities' designees.

Summary Notice and Important Phone Numbers

This COI describes in detail your Employer's health care benefit Plan and governs the Plan's coverage. This COI, any amendments, and related documents comprise the entire Plan between the Employer and the Claims Administrator.

A thorough understanding of your coverage will enable you to use your benefits wisely. Please read this COI carefully. If you have any questions about the benefits, please contact Sanford Health Plan's Member Services.

This COI describes in detail the Covered Services provisions and other terms and conditions of the Plan.

Physical Address	**Mailing Address**
Sanford Health Plan 300 Cherapa Place, Suite 201 Sioux Falls, SD 57103	Sanford Health Plan PO Box 91110 Sioux Falls, SD 57109-1110
Member Services	**Preauthorization/Prior Approval**
(800) 499-3416 *(toll-free)* or TTY/TDD: (877) 652-1844 *(toll-free)*	The Hospital, your Provider, or you should call *(toll-free)*: (888) 315-0885 or TTY/TDD: (877) 652-1844
Sanford Health Plan Physician/Provider Locator	**Website**
If you need to locate a provider in your area, call *(toll-free)*: (800) 499-3416 or TTY/TDD: (877) 652-1844	www.sanfordhealthplan.com/ndpers

Notice of Privacy Practices

THIS NOTICE DESCRIBES HOW HEALTH INFORMATION ABOUT YOU MAY BE USED AND DISCLOSED AND HOW YOU CAN GET ACCESS TO THIS INFORMATION. PLEASE REVIEW IT CAREFULLY.

This Notice applies to Sanford Health Plan. If you have questions about this Notice, please contact the Plan at (800) 499-3416 *(toll-free)* | TTY/TDD (877) 652-1844 *(toll-free)*. You may also email your questions to memberservices@sanfordhealth.org.

This Notice describes how we will use and disclose your health information. The terms of this Notice apply to all health information generated or received by Sanford Health Plan, whether recorded in our business records, your medical record, billing invoices, paper forms, or in other ways.

HOW WE USE AND DISCLOSE YOUR HEALTH INFORMATION

We use or disclose your health information as follows (In Minnesota we will obtain your prior consent):

- **Help manage the health care treatment you receive:** We can use your health information and share it with professionals who are treating you. For example, a doctor may send us information about your diagnosis and treatment plan so we can arrange additional services.
- **Pay for your health services:** We can use and disclose your health information as we pay for your health services. For example, we share information about you with your primary care Practitioner and/or Provider to coordinate payment for those services.
- **For our health care operations:** We may use and share your health information for our day-to-day operations, to improve our services, and contact you when necessary. For example, we use health information about you to develop better services for you. We are not allowed to use genetic information to decide whether we will give you coverage and the price of that coverage. This does not apply to long-term care plans.
- **Administer your plan:** We may disclose your health information to your health plan sponsor for plan administration. For example, your company contracts with us to provide a health plan, and we provide your company with certain statistics to explain the premiums we charge.

We may share your health information in the following situations unless you tell us otherwise. If you are not able to tell us your preference, we may go ahead and share your information if we believe it is in your best interest or needed to lessen a serious and imminent threat to health or safety:

- **Friends and Family:** We may disclose to your family and close personal friends any health information directly related to that person's involvement in payment for your care.
- **Disaster Relief:** We may disclose your health information to disaster relief organizations in an emergency.

We may also use and share your health information for other reasons without your prior consent:

- **When required by law:** We will share information about you if state or federal law require it, including with the Department of Health and Human services if it wants to see that we're complying with federal privacy law.
- **For public health and safety:** We can share information in certain situations to help prevent disease, assist with product recalls, report adverse reactions to medications, and to prevent or reduce a serious threat to anyone's health or safety.
- **Organ and tissue donation:** We can share information about you with organ procurement organizations.
- **Medical examiner or funeral director:** We can share information with a coroner, medical examiner, or funeral director when an individual dies.
- **Workers' compensation and other government requests:** We can share information to employers for workers' compensation claims. Information may also be shared with health oversight agencies when authorized by law, and other special government functions such as military, national security and presidential protective services.
- **Law enforcement:** We may share information for law enforcement purposes. This includes sharing information to help locate a suspect, fugitive, missing person or witness.
- **Lawsuits and legal actions:** We may share information about you in response to a court or administrative order, or in response to a subpoena.
- **Research:** We can use or share your information for certain research projects that have been evaluated and approved through a process that considers a patient's need for privacy.

We may contact you in the following situations:

- **Treatment options:** To provide information about treatment alternatives or other health related benefits or Sanford Health Plan services that may be of interest to you.
- **Fundraising:** We may contact you about fundraising activities, but you can tell us not to contact you again.

YOUR RIGHTS THAT APPLY TO YOUR HEALTH INFORMATION

When it comes to your health information, you have certain rights.

- **Get a copy of your health and claims records:** You can ask to see or get a paper or electronic copy of your health and claims records and other health information we have about you. We will provide a copy or summary to you usually within 30 days of your request. We may charge a reasonable, cost-based fee.
- **Ask us to correct your health and claims records:** You can ask us to correct health information that you think is incorrect or incomplete. We may deny your request, but we'll tell you why in writing. These requests should be submitted in writing to the contact listed below.
- **Request confidential communications:** You can ask us to contact you in a specific way (for example, home or office phone) or to send mail to a different address. Reasonable requests will be approved. We must say "yes" if you tell us you would be in danger if we do not.
- **Ask us to limit what we use or share:** You can ask us to restrict how we share your health information for treatment, payment, or our operations. We are not required to agree to your request, and we may say "no" if it would affect your care. If you are not able to tell us your preference, for example if you are unconscious, we may go ahead and share your information if we believe it is in your best interest. We may also share your information when needed to lessen a serious and imminent threat to health or safety.
- **Get a list of those with whom we've shared information:** You can ask for a list (accounting) of the times we've shared your health information for six (6) years prior, who we've shared it with, and why. We will include all disclosures except for those about your treatment, payment, and our health care operations, and certain other disclosures (such as those you asked us to make). We will provide one (1) accounting a year for free, but we will charge a reasonable cost-based fee if you ask for another within twelve (12) months.
- **Get a copy of this privacy notice:** You can ask for a paper copy of this Notice at any time, even if you have agreed to receive it electronically. We will provide you with a paper copy promptly.
- **Choose someone to act for you:** If you have given someone medical power of attorney or if someone is your legal guardian, that person can exercise your rights and make choices about your health information. We will make sure the person has this authority and can act for you before we take any action.
- **File a complaint if you feel your rights are violated:** You can complain to the U.S. Department of Health and Human Services Office for Civil Rights if you feel we have violated your rights. We can provide you with their address. You can also file a complaint with us by using the contact information below. We will not retaliate against you for filing a complaint.

  Contact Information:
  Sanford Health Plan
  ATTN: NDPERS/Member Services
  PO Box 91110
  Sioux Falls, SD 57109-1110
  (800) 499-3416 *(toll-free)* | TTY/TDD (877) 652-1844 *(toll-free)*

OUR RESPONSIBILITIES REGARDING YOUR HEALTH INFORMATION

- We are required by law to maintain the privacy and security of your health information.
- We will let you know promptly if a breach occurs that may have compromised the privacy or security of your health information.
- We must follow the duties and privacy practices described in this Notice and offer to give you a copy.
- We will not use, share, or sell your information for marketing or any purpose other than as described in this Notice unless you tell us to in writing. You may change your mind at any time by letting us know in writing.

CHANGES TO THIS NOTICE

We may change the terms of this Notice, and the changes will apply to all information we have about you. The new Notice will be available upon request and on our website www.sanfordhealthplan.com/ndpers.

EFFECTIVE DATE

This Notice of Privacy Practices is effective September 23, 2013.

NOTICE OF ORGANIZED HEALTH CARE ARRANGEMENT FOR SANFORD HEALTH PLAN

Sanford Health Plan and Sanford Health Plan of Minnesota have agreed, as permitted by law, to share your health information among themselves for the purposes of treatment, payment, or health care operations. This notice is being provided to you as a supplement to the above Notice of Privacy Practices.

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Introduction

Member Rights

The Plan is committed to treating Members in a manner that respects their rights. In this regard, the Plan recognizes that each Member (or the Member's parent, legal guardian or other representative if the Member is a minor or incompetent) has the right to the following:

1. Members have the right to receive impartial access to treatment and/or accommodations that are available or medically indicated, regardless of race; ethnicity; national origin; gender; age; sexual orientation; medical condition, including current or past history of a mental health and substance use disorder; disability; religious beliefs; or sources of payment for care.
2. Members have the right to considerate, respectful treatment at all times and under all circumstances with recognition of their personal dignity.
3. Members have the right to be interviewed and examined in surroundings designed to assure reasonable visual and auditory privacy.
4. Members have the right, but are not required, to select a Primary Care Practitioner and/or Provider (PCP) of their choice. If a Member is dissatisfied for any reason with the PCP initially chosen, he/she has the right to choose another PCP.
5. Members have the right to expect communications and other records pertaining to their care, including the source of payment for treatment, to be treated as confidential in accordance with the guidelines established in applicable North Dakota law.
6. Members have the right to know the identity and professional status of individuals providing service to them and to know which Practitioner and/or Provider is primarily responsible for their individual care. Members also have the right to receive information about our clinical guidelines and protocols.
7. Members have the right to a candid discussion with the Practitioners and/or Providers responsible for coordinating appropriate or medically necessary treatment options for their conditions in a way that is understandable, regardless of cost or benefit coverage for those treatment options. Members also have the right to participate with Practitioners and/or Providers in decision making regarding their treatment plan.
8. Members have the right to give informed consent before the start of any procedure or treatment.
9. When Members do not speak or understand the predominant language of the community, the Plan will make reasonable efforts to access an interpreter. The Plan has the responsibility to make reasonable efforts to access a treatment clinician that is able to communicate with the Member.
10. Members have the right to receive printed materials that describe important information about the Plan in a format that is easy to understand and easy to read.
11. Members have the right to a clear Grievance and Appeal process for complaints and comments and to have their issues resolved in a timely manner.
12. Members have the right to Appeal any decision regarding medical necessity made by the Plan and its Practitioners and/or Providers.
13. Members have the right to terminate from the Plan, in accordance with Employer and/or Plan guidelines.
14. Members have the right to make recommendations regarding the organization's Member's rights and responsibilities policies.
15. Members have the right to receive information about the organization, its services, its Practitioners and Providers and Members' rights and responsibilities.

Member Responsibilities

Each Member (or the Member's parent, legal guardian or other representative if the Member is a minor or incompetent) is responsible for cooperating with those providing Health Care Services to the Member, and shall have the following responsibilities:

1. Members have the responsibility to provide, to the best of their knowledge, accurate and complete information about present complaints, past illnesses, Hospitalizations, medications, and other matters relating to their health. They have the responsibility to report unexpected changes in their condition to the responsible Practitioner. Members are responsible for verbalizing whether they clearly comprehend a contemplated course of action and what is expected of them.
2. Members are responsible for carrying their Plan ID cards with them and for having Member identification numbers available when telephoning or contacting the Plan.
3. Members are responsible for following all access and availability procedures.
4. Members are responsible for seeking Emergency care at a Plan participating Emergency Facility whenever possible. In the event an ambulance is used, direct the ambulance to the nearest participating Emergency Facility unless the condition is so severe that you must use the nearest Emergency Facility. State law requires that the ambulance transport you to the Hospital of your choice unless that transport puts you at serious risk.
5. Members are responsible for notifying the Plan of an Emergency admission as soon as reasonably possible and no later than forty-eight (48) hours after becoming physically or mentally able to give notice.
6. Members are responsible for keeping appointments and, when they are unable to do so for any reason, for notifying the responsible Practitioner or the Hospital.
7. Members are responsible for following their treatment plan as recommended by the Practitioner primarily responsible for their care. Members are also responsible for participating in developing mutually agreed-upon treatment goals, and to the degree possible, for understanding their health conditions, including mental health and/or substance use disorders.
8. Members are responsible for their actions if they refuse treatment or do not follow the Practitioner's instructions.
9. Members are responsible for notifying NDPERS within *thirty-one (31)* days if they change their name, address, or telephone number.
10. Members are responsible for notifying NDPERS of any changes of eligibility that may affect their membership or access to services.

Grandfathered versus Non-Grandfathered Plans

A "Grandfathered" health plan is a health plan that was in place prior to March 23, 2010. Grandfathered plans are able to make routine changes to policies but are exempt from some of the Affordable Care Act's (ACA) health insurance reforms.

A "Non-Grandfathered" health plan is a health plan that must comply with all the Patient Protection and Affordable Care Act's health insurance reforms.

Please refer to your Summary of Benefits and Coverage (SBC) to find out if you have a grandfathered or non-grandfathered health plan.

Fraud

Fraud is a crime that can be prosecuted. Any Member who willfully and knowingly engages in an activity intended to defraud the Plan is guilty of fraud.

As a Member, you must:

1. File accurate claims. If someone else files claims on your behalf, you should review the form before you sign it;
2. Review the Explanation of Benefits (EOB) form when it is returned to you. Make certain that benefits have been paid correctly based on your knowledge of the expenses incurred and the services rendered;
3. Never allow another person to seek medical treatment under your identity. If your ID card is lost, you should report the loss to Sanford Health Plan immediately; and
4. Provide complete and accurate information on claim forms and any other forms. Answer all questions to the best of your knowledge.

If you are concerned about any of the charges that appear on a bill or Explanation of Benefits form, or if you know of or suspect any illegal activity, call Sanford Health Plan toll-free at (800) 499-3416. All calls are strictly confidential.

Service Area

The Service Area for **SOUTH DAKOTA** includes all counties in the state.

The Service Area for **NORTH DAKOTA** includes all counties in the state.

The Service Area for **IOWA** includes the following counties:

Clay	Emmet	Lyon	Osceola	Plymouth
Dickinson	Ida	O'Brien	Sioux	Woodbury

The Service Area for **MINNESOTA** includes the following counties:

Becker	Cottonwood	Lake of the Woods	Murray	Pope	Stevens
Beltrami	Douglas	Lincoln	Nicollet	Red Lake	Swift
Big Stone	Grant	Lyon	Nobles	Redwood	Traverse
Blue Earth	Hubbard	Mahnomen	Norman	Renville	Wilkin
Brown	Jackson	Marshall	Otter Tail	Rock	Watonwan
Chippewa	Kandiyohi	Martin	Pennington	Roseau	Yellow Medicine
Clay	Kittson	McLeod	Pipestone	Sibley	
Clearwater	Lac Qui Parle	Meeker	Polk	Stearns	

Medical Terminology

All medical terminology referenced in this Certificate of Insurance follow the industry standard definitions of the American Medical Association.

Definitions

Capitalized terms are defined in Section 10 of the Certificate of Insurance.

Conformity with State and Federal Laws

Any provision in this Contract not in conformity with N.D.C.C. chs. 26.1-18.1, 54-52.1, N.D.A.C. chs. 45-06-07, 71-03, and/or any other applicable law or rule in this State may not be rendered invalid, but be must construed and applied as if it were in full compliance with applicable State and Federal laws and rules.

Special Communication Needs

Please call the Plan if you need help understanding written information at (800) 499-3416 *(toll-free)*. We can read forms to you over the phone and we offer free oral translation in any language through our translation services. Anyone with any disability, who might need some form of accommodation or assistance concerning the services or information provided, please contact the NDPERS ADA Coordinator at (701) 328-3900.

Translation Services

The Plan can arrange for translation services. Free written materials are available in several different languages and free oral translation services are available. Call toll-free (800) 499-3416 for help and to access translation services.

Spanish (Español): Para obtener asistencia en Español, llame al (800) 892-0675 *(toll-free)*.

Tagalog (Tagalog): Kung kailangan ninyo ang tulong sa Tagalog tumawag sa (800) 892-0675 *(toll-free)*.

Chinese (中文): 如果需要中文的帮助，请拨打这个号码 (800) 892-0675 *(toll-free)*.

Navajo (Dine): Dinek'ehgo shika at'ohwol ninisingo, kwiijigo holne' (800) 892-0675 *(toll-free)*.

Services for the Deaf, Hearing Impaired, and/or Visually Impaired

If you are deaf or hearing impaired and need to speak to the Plan, call TTY/TDD: (877) 652-1844 *(toll-free)*. Please contact the Plan toll-free at (800) 499-3416 if you are in need of a large print copy or cassette/CD of this COI or other written materials.

In compliance with the Americans with Disabilities Act, this document can be provided in alternate formats. If you require accommodation or assistance concerning the services or information provided, please contact the NDPERS ADA Coordinator at (701) 328-3900.

Section 1. Schedule of Benefits

General

This section outlines the payment provisions for Covered Services described in Sections 2 and 5, subject to the definitions, exclusions, conditions and limitations of this Benefit Plan.

Overview of Cost Sharing Amounts and How They Accumulate

Cost Sharing Amounts include Coinsurance, Copayments, and Deductibles, which accumulate to the separate Prescription Drug Out-of-Pocket Maximum Amount; Infertility Services Deductible and Out-of-Pocket Maximum Amount; and the Medical Out-of-Pocket Maximum Amount. See *Cost Sharing Amounts – Details & Definitions* later in this Section for more information.

Note:

- A Member must meet the annual Deductible Amount before Coinsurance Amounts apply to the cost of Covered Services, unless otherwise specified in this Certificate of Insurance and/or the Member's Summary of Benefits and Coverage (SBC).
- The Deductible Amounts for Covered Services received from a PPO Health Care Provider, or on a Basic Plan basis, accumulate jointly up to the PPO Deductible Amount.
- The Out-of-Pocket Maximum Amounts for Covered Services, whether received under the PPO Plan or the Basic Plan, accumulate jointly up to the PPO Medical Out-of-Pocket Maximum Amount. Medical Out-of-Pocket Maximum Amounts are separate from the Prescription Drug Out-of-Pocket Maximum Amount.
- Covered Services sought on a Basic Plan basis will continue to be paid at 75% of the Allowed Charge until the Medical Out-of-Pocket Maximum Amount for Basic Plan services is met. Medical Out-of-Pocket Maximum Amounts are separate from the Prescription Drug Out-of-Pocket Maximum Amount.
- Prescription Medication Copayments and Coinsurance costs accumulate toward a Member's cumulative annual Prescription Drug Out-of-Pocket Maximum.

A Member is responsible for Cost Sharing Amounts. All Members in the family contribute to Deductible and Coinsurance Amounts. However, a Member's contribution cannot be more than the Single Coverage amount. Health Care Providers may bill you directly or request payment of Coinsurance, Copayment and Deductible Amounts at the time services are provided. For the specific benefits and limitations that apply to this Plan, please see Section 2, *Outline of Covered Services*; Section 5, *Covered Services*; Section 6, *Limited and Non-Covered Services*; and your Summary of Benefits and Coverage.

If Sanford Health Plan pays amounts to the Health Care Provider that are the Member's responsibility, such as Deductibles, Copayments or Coinsurance Amounts, Sanford Health Plan may collect such amounts directly from the Member. The Member agrees that Sanford Health Plan has the right to collect such amounts from the Member.

Benefit Schedule	Basic Plan	PPO Plan
Under this Benefit Plan the Medical Deductible Amounts are:		
Single Coverage	$400 per Benefit Period	$400 per Benefit Period
Family Coverage	$1,200 per Benefit Period	$1,200 per Benefit Period
Under this Benefit Plan the Coinsurance and Copay Maximum Amounts are:		
Single Coverage	$1,250 per Benefit Period	$750 per Benefit Period
Family Coverage	$2,500 per Benefit Period	$1,500 per Benefit Period
Under this Benefit Plan the Medical Out-of-Pocket Maximum Amounts are:		
Single Coverage	$1,650 per Benefit Period	$1,150 per Benefit Period
Family Coverage	$3,700 per Benefit Period	$2,700 per Benefit Period
Under this Benefit Plan the Prescription Drug Out-of-Pocket Maximum Amount is:		
—— $1,000 per Member per Benefit Period ——		
Under this Benefit Plan the Lifetime Infertility Services Deductible Amount is:		
—— $500 per Member ——		

Selecting a Health Care Provider

The benefit payment available under this Benefit Plan differs depending on the Subscriber's choice of a Health Care Provider. This Benefit Plan recognizes the following categories of Health Care Providers based on the Health Care Provider's relationship with Sanford Health Plan. Providers that are contracted with Sanford Health Plan, and participate in the Plan's Network, will be paid at either the PPO Plan or Basic Plan level.

Members should refer to the Sanford Health Plan website (www.sanfordhealthplan.com/ndpers) for the Provider Directory, which lists Participating Health Care Providers. The Sanford Health Plan website is continuously updated and has the most up-to-date listing of Health Care Providers. Members may also call Member Services at (800) 499-3416 *(toll-free)* or TTY/TDD: (877) 652-1844 *(toll-free)* to request a provider directory.

How PPO vs. Basic Plan Determines Benefit Payment

PPO Plan

PPO stands for "Preferred Provider Organization" and is a group of Health Care Providers who provide discounted services to the Members of NDPERS. Because PPO Health Care Providers charge Sanford Health Plan less for medical care services provided to the Members of NDPERS, cost savings are passed on to Members by way of reduced Cost Sharing Amounts.

To receive a higher payment level, Covered Services must be received from an NDPERS PPO Health Care Provider. Please see the NDPERS PPO Health Care Provider Listing at www.sanfordhealthplan.com/ndpers.

Note: Benefits for Covered Services received by Eligible Dependents, as outlined in Section 3, *Eligibility Requirements for Dependents*, who are residing out of the state of North Dakota will be paid at the Basic Plan level. If the Subscriber, or the Subscriber's spouse, is required by court order to provide health coverage for that Eligible Dependent, you may be asked to provide a copy of the court order to the Plan.

Basic Plan

If a PPO Health Care Provider is: 1) not available in the Member's area; or 2) if the Member either chooses or is referred to a Health Care Provider not participating in the Preferred Provider Organization (PPO), the Member will receive the Basic Plan benefits.

Other Health Care Providers

Participating Health Care Providers

When Covered Services are received from a Participating Health Care Provider, the Participating Health Care Provider agrees to submit claims to Sanford Health Plan on behalf of the Member. Reimbursement for Covered Services will be made directly to the Participating Health Care Provider according to the terms of this Benefit Plan and the participation agreement between the Health Care Provider and Sanford Health Plan.

When Covered Services are received from a Participating Health Care Provider, a provider discount provision is in effect. This means the Allowance paid by Sanford Health Plan will be considered by the Participating Health Care Provider as payment in full, except for Cost Sharing Amounts, or if applicable, Maximum Benefit Allowances or Lifetime Maximums.

Participating Health Care Providers have also agreed to perform managed benefits requirements on behalf of the Member. If the Health Care Provider is a Participating Health Care Provider, as defined in Section 10, the benefit payment will be as indicated in the Outline of Covered Services and the Member's Summary of Benefits and Coverage (SBC).

Non-Participating Health Care Providers

If a Member receives Covered Services from a Non-Participating Health Care Provider (health care providers who are not contracted with Sanford Health Plan), the Member will be responsible for notifying Sanford Health Plan of the receipt of services. If Sanford Health Plan needs copies of medical records to process the Member's claim, the Member is responsible for obtaining such records from the Non-Participating Health Care Provider.

Non-Participating Health Care Providers within the State of North Dakota

If a Member receives Covered Services from a Non-Participating Health Care Provider within the state of North Dakota, benefit payments will be based on the Allowance and reduced by an additional 20%. The 20% payment reduction does not apply toward the Out-of-Pocket Maximum Amount. The Allowance will not exceed 80% of the billed charge.

Note: The Member is responsible for the 20% payment reduction and any charges in excess of the Allowance for Covered Services.

Benefit payments will be made directly to the Provider for Covered Services received from a Non-Participating Health Care Provider. Sanford Health Plan may designate a Health Care Provider as Non-Payable.

Non-Participating Health Care Providers outside the State of North Dakota

If a Member receives Covered Services from a Non-Participating Health Care Provider outside the state of North Dakota, the Allowance for Covered Services will be an amount within a general range of payments made and judged to be reasonable by Sanford Health Plan.

Note: The Member is responsible for any charges in excess of the Allowance for Covered Services.

If a Member receives Covered Services from a Health Care Provider in a county contiguous to North Dakota, the benefit payment will be provided on the same basis as a Health Care Provider located in the state of North Dakota. If the Health Care Provider is a Participating Health Care Provider, the benefit payment will be as indicated in the Outline of Covered Services and SBC. If the Health Care Provider is not a Participating Health Care Provider, benefits will be available at the same level as Non-Participating Health Care Providers within the state of North Dakota. Sanford Health Plan may designate a Health Care Provider as Non-Payable.

Non-Participating Providers outside the Sanford Health Plan Service Area

When Covered Services are provided outside of Sanford Health Plan's Service Area by health care providers who have not entered into a "participating agreement" with Sanford Health Plan (Non-Participating Health Care Providers), the amount the Member pays for such services will generally be based on either Sanford Health Plan's Non-Participating Health Care Provider local payment or the pricing arrangements required by applicable state law. In these situations, the Member may be liable for the difference between the amount that the Non-Participating Health Care Provider bills and the payment Sanford Health Plan will make for the Covered Services as set forth in this paragraph.

In certain situations, Sanford Health Plan may use other payment bases, such as the payment Sanford Health Plan would make if the Covered Services had been obtained within the Sanford Health Plan Service Area, or a special negotiated payment, as permitted, to determine the amount Sanford Health Plan will pay for Covered Services provided by Non-Participating Health Care Providers. In these situations, a Member may be liable for the difference between the amount that the Non-Participating Health Care Provider bills and the payment Sanford Health Plan will make for the Covered Services as set forth in this paragraph.

Health Care Providers outside the United States

The benefits available under this Benefit Plan are also available to Members traveling or living outside of the United States. The same Preauthorization/Prior Approval requirements will apply. If the Health Care Provider is a Participating Provider, the Participating Health Care Provider will submit claims for reimbursement on behalf of the Member. Reimbursement for Covered Services will be made directly to the Participating Health Care Provider. If the Health Care Provider is not a Participating Provider, the Member will be responsible for payment of services and submitting a claim for reimbursement to Sanford Health Plan. Sanford Health Plan will provide translation and currency conversion services for the Member's claims outside of the United States.

Sanford Health Plan will reimburse Prescription Medications purchased outside the United States by Members who live outside the United States where no suitable alternative exists. Reimbursement will also be made in instances where Members are traveling and new medication therapy is initiated for acute conditions or where emergency replacement of medications originally prescribed and purchased in the United States is necessary. The reimbursable supply of medications in travel situations will be limited to an amount necessary to assure continuation of therapy during the travel period and for a reasonable period thereafter.

Non-Payable Health Care Providers

If Sanford Health Plan designates a Health Care Provider as *Non-Payable*, no benefits will be available for Covered Services prescribed by, performed by or under the direct supervision of the *Non-Payable Health Care Provider*. Notice of designation as a Non-Payable Health Care Provider will be provided to Members at least 30 days prior to the effective date of designation as a Non-Payable Health Care Provider.

As of the date of termination, all charges incurred by a Member for services received from the Non-Payable Health Care Provider will be the Subscriber's responsibility.

Medicare Private Contracts

A Health Care Provider may ask a Member who is eligible for Medicare to enter into a Medicare private contract where the Member and the Health Care Provider agree that the Member is to be provided with services outside of the Medicare program. This Medicare private contract must be entered into between the Member and the Health Care Provider prior to the receipt of any services, and indicate that 1) neither the Member nor the Health Care Provider is permitted to file a request for reimbursement with Medicare for any of the services provided by the Health Care Provider; and 2) the Health Care Provider can charge any amount agreed to by the Member for services instead of the Medicare limiting charge.

Under a Medicare private contract, the Health Care Provider can set any price for services but Medicare will not pay anything. If the Member enters into a Medicare private contract, Medicare will not pay any portion of the services and Sanford Health Plan will limit its payment to the amount Sanford Health Plan would have paid as though Medicare was paying for such Covered Services. If a Member enters into a Medicare private contract, the Member is responsible for paying the difference between the amount billed by the Health Care Provider for Covered Services and the amount paid by Sanford Health Plan.

Cost Sharing Amounts – Details & Definitions

A Cost Sharing Amount is the dollar amount a Member is responsible for paying when Covered Services are received from a Health Care Provider. Cost Sharing Amounts include Coinsurance, Copayment and Deductible Amounts. Applicable Cost Sharing Amounts are identified in Section 2 and the Member's Summary of Benefits and Coverage. See the schedule above in *Overview of Cost Sharing Amounts and how they accumulate* for the specific Cost Sharing Amounts that apply to this Benefit Plan.

Coinsurance

Sanford Health Plan shall calculate Coinsurance Amounts on behalf of Members obtaining Covered Services within the Sanford Health Plan contracted provider network on the lesser of (1) billed charges or (2) provider negotiated payment rates (Allowed Charge).

If Covered Services are obtained by a Member out of the Sanford Health Plan contracted provider network, the coinsurance calculation may be based on the Health Care Provider's billed charges. This may result in a significantly higher Coinsurance Amount for certain services a Member incurs out of the Sanford Health Plan contracted provider network. It is not possible to provide specific information for each Health Care Provider outside of Sanford Health Plan's Service Area because of the many different arrangements between Health Care Providers. However, if a Member contacts Sanford Health Plan prior to receiving services from a Health Care Provider outside of Sanford Health Plan's Service Area, Sanford Health Plan may be able to provide information regarding specific Health Care Providers.

Coinsurance and Copay Maximum Amounts

The cumulative Coinsurance and Copay Amount that is a Member's responsibility during a Benefit Period. The Coinsurance and Copay Maximum Amounts renew on January 1 of each consecutive Benefit Period.

Deductibles

The Deductible Amounts renew on January 1 of each consecutive Benefit Period. Copayment Amounts do not apply toward the Deductible Amount.

Note: The deductible amounts for Covered Services received from a PPO Health Care Provider, or on a Basic Plan basis, cross accumulate jointly up to the PPO Deductible Amount.

Medical Out-of-Pocket Maximum Amounts

When the Out-of-Pocket Maximum Amounts are met, this Benefit Plan will pay 100% of the Allowed Charge for Covered Services. The Out-of-Pocket Maximum Amounts renew on January 1 of each consecutive Benefit Period. The Medical Out-of-Pocket Maximum Amounts accumulate separately from the Prescription Drug Out-of-Pocket Maximum Amount.

Note: The Out-of-Pocket Maximum Amounts for Covered Services received under the PPO Plan, or under the Basic Plan, cross accumulate jointly to the PPO Out-of-Pocket Maximum Amount.

Note: When the PPO Out-of-Pocket Maximum Amount has been met, all Covered Services received from a PPO Health Care Provider will be paid at 100% of Allowed Charge. Covered Services sought on a Basic Plan basis will continue to be paid at 75% of the Allowed Charge until the Out-of-Pocket Maximum Amount for Basic Plan services is met.

Prescription Drug Out-of-Pocket Maximum Amount

When the Prescription Drug Out-of-Pocket Maximum Amount is met, this Benefit Plan will pay 100% of the Allowed Charge for Formulary Prescription Medications. The Medical Out-of-Pocket Maximum Amounts accumulate separately from the Prescription Drug Out-of-Pocket Maximum Amount.

Note: Prescription Medication Coinsurance and Copay Amounts accumulate toward a Member's Prescription Drug Out-of-Pocket Maximum. The Out-of-Pocket Maximum Amount renews on January 1 of each consecutive Benefit Period.

Infertility Services Coinsurance/Deductible

Neither the Infertility Services Lifetime Deductible Amount nor any Member-paid Copays or Coinsurance for infertility services apply toward the Medical Deductible or Out-of-Pocket Maximum Amounts. Infertility services are limited to a lifetime benefit maximum, per Member, of $20,000.

Section 2. Outline of Covered Services

Covered Services	PROVIDER OF SERVICE Basic Plan After Deductible Amount	PROVIDER OF SERVICE PPO Plan After Deductible Amount
Inpatient Hospital and Medical Services		
• **Inpatient Hospital Services**	75% of Allowed Charge.	80% of Allowed Charge.
• **Inpatient Medical Care Visits**	75% of Allowed Charge.	80% of Allowed Charge.
• **Ancillary Services**	75% of Allowed Charge.	80% of Allowed Charge.
• **Inpatient Consultations**	75% of Allowed Charge.	80% of Allowed Charge.
• **Concurrent Services**	75% of Allowed Charge.	80% of Allowed Charge.
• **Initial Newborn Care**	75% of Allowed Charge. *Deductible Amount is waived.*	80% of Allowed Charge. *Deductible Amount is waived.*
Inpatient and Outpatient Surgical Services		
• **Professional Health Care Provider Services**	75% of Allowed Charge.	80% of Allowed Charge.
• **Assistant Surgeon Services**	75% of Allowed Charge.	80% of Allowed Charge.
• **Ambulatory Surgical Facility Services**	75% of Allowed Charge.	80% of Allowed Charge.
• **Hospital Ancillary Services**	75% of Allowed Charge.	80% of Allowed Charge.
• **Anesthesia Services**	75% of Allowed Charge.	80% of Allowed Charge.
• **Outpatient Sterilization Procedures for Females**	100% of Allowed Charge. *Deductible Amount is waived.*	100% of Allowed Charge. *Deductible Amount is waived.*
Transplant Services		
• **Inpatient and Outpatient Hospital and Medical Services**	75% of Allowed Charge *when Preauthorization/Prior Approval is received from Sanford Health Plan.*	80% of Allowed Charge *when Preauthorization/Prior Approval is received from Sanford Health Plan.*
• **Transportation Services**	75% of Allowed Charge. *Maximum Benefit Allowance of $1,000 per transplant procedure.*	80% of Allowed Charge.
Dental Services		
• **Temporomandibular (TMJ) or Craniomandibular (CMJ) Joint Treatment**	75% of Allowed Charge. *Benefits are subject to a Maximum Benefit Allowance of 1 splint per Member per Benefit Period.*	80% of Allowed Charge.
• **Dental Services Related to Accidental Injury**	75% of Allowed Charge.	80% of Allowed Charge.
• **Dental Anesthesia and Hospitalization**	75% of Allowed Charge. *Prior Approval is required for all Members age 9 and older.*	80% of Allowed Charge. *Prior Approval is required for all Members age 9 and older.*
Outpatient Hospital and Medical Services		
• **Home and Office Visits**	$30 Copayment Amount per Office Visit, then 100% of Allowed Charge. *Deductible Amount is waived.*	$25 Copayment Amount per Office Visit, then 100% of Allowed Charge. *Deductible Amount is waived.*
• **Diagnostic Services**	75% of Allowed Charge.	80% of Allowed Charge.

Covered Services	PROVIDER OF SERVICE Basic Plan After Deductible Amount	PPO Plan After Deductible Amount
• **Emergency Services**	$50 Copayment Amount, then 80% of Allowed Charge for emergency room facility fee billed by a Hospital.	$50 Copayment Amount, then 80% of Allowed Charge for emergency room facility fee billed by a Hospital.
	The Copayment Amount for the emergency room facility fee is waived when a Member is admitted directly as an Inpatient to a Hospital.	
	80% of Allowed Charge for office or emergency room visit billed by a Professional Health Care Provider. *Deductible Amount is waived.*	80% of Allowed Charge for office or emergency room visit billed by a Professional Health Care Provider. *Deductible Amount is waived.*
	80% of Allowed Charge for all Ancillary Services received in an emergency room or Professional Health Care Provider's office.	80% of Allowed Charge for all Ancillary Services received in an emergency room or Professional Health Care Provider's office.
• **Ambulance Services**	80% of Allowed Charge.	80% of Allowed Charge.
• **Radiation Therapy and Chemotherapy**	75% of Allowed Charge.	80% of Allowed Charge.
• **Dialysis Treatment**	75% of Allowed Charge.	80% of Allowed Charge.
• **Home Infusion Therapy Services**	75% of Allowed Charge.	80% of Allowed Charge.
• **Visual Training for Members under age 10**	75% of Allowed Charge.	80% of Allowed Charge.
	Benefits are subject to an Annual Maximum of 16 visits per Member.	
• **Allergy Services**	75% of Allowed Charge.	80% of Allowed Charge.
• **Phenylketonuria (PKU)** - *Foods and food products for the dietary treatment of Members born after 12/31/62 with maple syrup urine disease or phenylketonuria (PKU)*	75% of Allowed Charge.	80% of Allowed Charge.
Wellness Services	Evidence-based items or services that have, in effect, a rating of "A" or "B" in the current recommendations of the United States Preventive Services Task Force, when received from a Participating Provider, are covered without payment of any deductible, copayment, or coinsurance requirement that would otherwise apply. As these recommendations change, your coverage may also change. Services performed outside of Plan Preventive Guidelines, and with a medical diagnosis, will be applied to your deductible and coinsurance.	
• **Well Child Care to the Member's 18th birthday**	100% of Allowed Charge. *Deductible Amount is waived.* *Benefits are available as follows:* • *Pediatric services based on guidelines supported by the HRSA, including recommendations by the American Academy of Pediatrics Bright Future pediatric schedule, and newborn metabolic screenings;* • *Pediatric services based on evidence-informed preventive care and screening guidelines supported by the HRSA;* • *Medical History for all children throughout development at the following ages: 0 to 11 months, 1 to 4 years, 5 to 10 years, 11 to 14 years, 15 to 17 years.*	100% of Allowed Charge. *Deductible Amount is waived.*
• **Immunizations**	100% of Allowed Charge. *Deductible Amount is waived.* *Immunizations are provided and covered as recommended by the Centers for Disease Control and Prevention Advisory Committee on Immunization Practices (ACIP) and by the Health Resources and Services Administration (HRSA), with respect to the Member involved.*	100% of Allowed Charge. *Deductible Amount is waived.*

Covered Services	PROVIDER OF SERVICE Basic Plan After Deductible Amount	PROVIDER OF SERVICE PPO Plan After Deductible Amount
Preventive Screening Services for Members ages 18 and older		
• **Routine Preventive Wellness (Physical) Examination** *Preauthorization is not required when using a participating provider. Your annual preventive services do not need to be scheduled 12 months apart. For example, if your services were done July last year, it is okay to schedule them before July this year.*	100% of Allowed Charge. *Deductible Amount is waived.*	100% of Allowed Charge. *Deductible Amount is waived.*
	Office visit exam includes health advice and counseling on blood pressure, counseling and interventions on tobacco use, screening and counseling for alcohol use, sun exposure, screening for depression, obesity screening with referral for behavioral interventions for patients with a body mass index of 30 or higher and referrals to intensive behavioral counseling to promote a healthful diet and physical activity to decrease cardiovascular risk in adults that are overweight or obese and with cardiovascular disease risk factors. During the visit, you may receive immunizations/screenings based on your practitioner's recommendation.	
• **Routine Diagnostic Screenings**	100% of Allowed Charge. *Deductible Amount is waived.*	100% of Allowed Charge. *Deductible Amount is waived.*
	Screenings include, but are not limited to the following: • *Abdominal Aortic Aneurysm Screening; Lifetime Maximum Benefit Allowance of one (1) ultrasound screening per male Member ages 65 through 75 with a history of smoking* • *Anemia screening – Hemoglobin or Hematocrit (one or the other); one (1) per Member per year.* • *Basic Metabolic Panel; one (1) per Member per year.* • *Cholesterol Screening; coverage for frequency of Lipid Profile is dependent on Member age. Additional tests, such as comprehensive metabolic panels will be applied to your deductible/coinsurance.* • *Diabetes Screening; benefit allowance of one (1) per Member per year.* • *Hepatitis B Virus infection screening.* • *Hepatitis C Virus (HCV) infection screening; Lifetime Maximum Benefit Allowance of either: one (1) screening for Members born between 1945-1965; or one (1) screening for Members at risk.* • *Lung Cancer Screening; benefit allowance of one (1) per Member ages 55 through 80 who: 1) have a 30 pack-year smoking history; 2) currently smoke; or 3) have quit smoking within the past 15 years.* • *Osteoporosis Screening for female Members ages 65 and older, or younger if at increased risk.* • *Sexually Transmitted Disease (STD) Screening; one (1) per Member per year.* • *Genetic counseling and evaluation for BRCA Testing and BRCA lab screening for female members with a family history (breast, ovarian, tubal, or peritoneal cancer) associated with increased risk for harmful mutation in BRC or BRC. Lifetime Maximum Benefit Allowance of one (1) screening per Member.* *For a complete listing, see the Preventive Health Guidelines for Members by signing into your account at www.sanfordhealthplan.com/memberlogin or call (800) 499-3416 to request a copy. As these recommendations change, your coverage may also change.*	
• **Mammography Screening**	100% of Allowed Charge. *Deductible Amount is waived.*	100% of Allowed Charge. *Deductible Amount is waived.*
	• *One (1) service for Members between the ages of 35 and 40.* • *One (1) service per year for Members age 40 and older.* • *Additional mammograms will be covered if recommended by a physician per N.D.C.C. §26.1-36-09.1.*	
• **Cervical Cancer Screening**	100% of Allowed Charge. *Deductible Amount is waived.*	100% of Allowed Charge. *Deductible Amount is waived.*
	Benefits are subject to a Maximum Benefit Allowance of 1 Pap smear per Benefit Period. Includes Office Visit.	

Covered Services	PROVIDER OF SERVICE Basic Plan After Deductible Amount	PPO Plan After Deductible Amount
• **Colorectal Cancer Screening for Members ages 50 and older**	***Note:*** *Expenses incurred for tissue samples taken during a screening and sent for evaluation or colonoscopies due to a medical condition will be applied to your deductible/coinsurance.*	
➢ Fecal Occult Blood Test; *or*	100% of Allowed Charge. *Deductible Amount is waived.* *Maximum Benefit Allowance of one (1) test per Member per year.*	100% of Allowed Charge. *Deductible Amount is waived.*
➢ Colonoscopy; *or*	100% of Allowed Charge. *Deductible Amount is waived.* *Maximum Benefit Allowance of one (1) test per Member every 10 years.*	100% of Allowed Charge. *Deductible Amount is waived.*
➢ Sigmoidoscopy	100% of Allowed Charge. *Deductible Amount is waived.* *Maximum Benefit Allowance of one (1) test per Member every 5 years.*	100% of Allowed Charge. *Deductible Amount is waived.*
• **Prostate Cancer Screening**	100% of Allowed Charge. *Deductible Amount is waived.* *Benefits are available for an annual digital rectal examination and an annual prostate-specific antigen test for the following: an asymptomatic male age 50 and older; a male age 40 and older of African American descent; and a male age 40 with a family history of prostate cancer. Includes Office Visit.*	100% of Allowed Charge. *Deductible Amount is waived.*
• **Nutritional Counseling**	100% of Allowed Charge. *Deductible Amount is waived.* • *Hyperlipidemia – Maximum of four (4) visits per Member per year.* • *Gestational Diabetes – Maximum of four (4) visits per Member per year.* • *Diabetes Mellitus – Maximum of four (4) visits per Member per year.* • *Hypertension – Maximum of two (2) visits per Member per year.* • *Obesity – Maximum of four (4) visits per Member per year.*	100% of Allowed Charge. *Deductible Amount is waived.*
• **Aspirin to prevent cardiovascular disease**	100% of Allowed Charge. *Deductible Amount is waived.* *Benefit is available for Male Members ages 45 through 79, and female Members ages 55 through 79 at risk for developing cardiovascular disease.*	100% of Allowed Charge. *Deductible Amount is waived.*
The preventive care benefits listed above provide a brief overview. For a detailed list of covered services, view the Plan's Preventive Health Guidelines by signing into your account at www.sanfordhealthplan.com/memberlogin.		
• **Outpatient Nutritional Care Services**	$30 Copayment Amount per Office Visit, then 100% of Allowed Charge. *Deductible Amount is waived.* *Benefits are available to the Maximum Benefit Allowance for the following diagnosed medical conditions:* • *Chronic Renal Failure – Four (4) Office Visits per Member per year.* • *Anorexia Nervosa – Four (4) Office Visits per Member per year.* • *Bulimia – Four (4) Office Visits per Member per year.* • *PKU – Four (4) Office Visits per Member per year.*	$25 Copayment Amount per Office Visit, then 100% of Allowed Charge. *Deductible Amount is waived.*
• **Diabetes Education Services**	75% of Allowed Charge. *Deductible Amount is waived.*	80% of Allowed Charge. *Deductible Amount is waived.*
• **Dilated Eye Examination** *(for diabetes related diagnosis)*	$30 Copayment Amount, then 75% of Allowed Charge. *Deductible Amount is waived.* *Maximum Benefit Allowance of 1 examination per Member per year.*	$25 Copayment Amount, then 80% of Allowed Charge. *Deductible Amount is waived.*

Covered Services	PROVIDER OF SERVICE Basic Plan After Deductible Amount	PROVIDER OF SERVICE PPO Plan After Deductible Amount
• **Tobacco Cessation Services**	*Tobacco cessation services include screening for tobacco use and at least two (2) tobacco cessation attempts per year (for Members who use tobacco products). Covering a cessation attempt is defined to include coverage for:* • *Four (4) tobacco cessation counseling sessions of at least ten (10) minutes each (including telephone counseling, group counseling and individual counseling) without Preauthorization/Prior Approval; and* • *All Food and Drug Administration (FDA)-approved tobacco cessation medications (including both prescription and over-the-counter medications) for a 90-day treatment regimen when prescribed by a health care provider without Preauthorization/Prior Approval.*	
Outpatient Therapy Services		
• **Physical Therapy**	$25 Copayment Amount per visit, then 75% of Allowed Charge. *Deductible Amount is waived.*	$20 Copayment Amount per visit, then 80% of Allowed Charge. *Deductible Amount is waived.*
	Benefits are subject to the medical guidelines established by Sanford Health Plan.	
• **Occupational Therapy**	$25 Copayment Amount per visit, then 75% of Allowed Charge. *Deductible Amount is waived.*	$20 Copayment Amount per visit, then 80% of Allowed Charge. *Deductible Amount is waived.*
	Benefits are available for 90 consecutive calendar days per condition, beginning on the date of the first therapy treatment for the condition. Additional benefits may be allowed after the 90 days when Medically Appropriate and Necessary.	
• **Speech Therapy**	$25 Copayment Amount per visit, then 75% of Allowed Charge. *Deductible Amount is waived.*	$20 Copayment Amount per visit, then 80% of Allowed Charge. *Deductible Amount is waived.*
	Benefits are available for 90 consecutive calendar days per condition, beginning on the date of the first therapy treatment for the condition. Additional benefits may be allowed after the 90 days when Medically Appropriate and Necessary.	
• **Respiratory Therapy Services**	75% of Allowed Charge.	80% of Allowed Charge.
• **Cardiac Rehabilitation Services**	75% of Allowed Charge. *Deductible Amount is waived.*	80% of Allowed Charge. *Deductible Amount is waived.*
	Benefits are subject to a Maximum Benefit Allowance of 12 visits per Member per episode for the following diagnosed medical conditions: • *Myocardial Infarction* • *Coronary Artery Bypass Surgery* • *Coronary Angioplasty and Stenting* • *Heart Valve Surgery* • *Heart Transplant Surgery* *Cardiac Rehabilitation Services must begin within 2 months following discharge from the Hospital.*	
• **Pulmonary Rehabilitation Services**	75% of Allowed Charge. *Deductible Amount is waived.*	80% of Allowed Charge. *Deductible Amount is waived.*
• **Physical Therapy for Members age 65 and older at risk for falls**	100% of Allowed Charge. *Deductible Amount is waived.*	100% of Allowed Charge. *Deductible Amount is waived.*
	——————Benefit subject to Medical Necessity——————	
Chiropractic Services	Only the Office Visit Copayment Amount will apply if both an Office Visit and Therapy/Manipulation are billed on the same day by the same Health Care Provider.	
• **Home and Office Visits**	$30 Copayment Amount per Office Visit, then 100% of Allowed Charge. *Deductible Amount is waived.*	$25 Copayment Amount per Office Visit, then 100% of Allowed Charge. *Deductible Amount is waived.*
• **Therapy and Manipulations**	$25 Copayment Amount per visit, then 75% of Allowed Charge. *Deductible Amount is waived.*	$20 Copayment Amount per visit, then 80% of Allowed Charge. *Deductible Amount is waived.*
• **Diagnostic Services**	75% of Allowed Charge.	80% of Allowed Charge.

Covered Services	PROVIDER OF SERVICE Basic Plan After Deductible Amount	PROVIDER OF SERVICE PPO Plan After Deductible Amount
Maternity Services	The Deductible Amount is waived for delivery services received from a PPO Health Care Provider when the Member is enrolled in the *Healthy Pregnancy* Program.	
• **Inpatient Hospital and Medical Services**	75% of Allowed Charge.	80% of Allowed Charge.
• **Routine Prenatal and Postnatal Care**	100% of Allowed Charge. *Deductible Amount is waived.*	100% of Allowed Charge. *Deductible Amount is waived.*
• **One (1) Prenatal Nutritional Counseling visit per pregnancy**	100% of Allowed Charge. *Deductible Amount is waived.*	100% of Allowed Charge. *Deductible Amount is waived.*
• **Lactation Counseling**	100% of Allowed Charge. *Deductible Amount is waived.*	100% of Allowed Charge. *Deductible Amount is waived.*
Infertility Services		
• **Diagnostics, Treatment, Office Visits, and Other Services**	80% of Allowed Charge.	80% of Allowed Charge.
	Benefits are subject to a $500 Lifetime Infertility Services Deductible Amount and a $20,000 Lifetime Benefit Maximum Amount per Member. The Infertility Services Deductible Amount and any Member-paid coinsurance for infertility services do not apply toward the Out-of-Pocket Maximum Amount. Preauthorization/Prior Approval is required for assisted reproductive technology, including GIFT, ZIFT, ICSI and IVF.	
Contraceptive Services		
• **Diagnostics, Treatment, Office Visits, and Other Services**	100% of Allowed Charge. *Deductible Amount is waived.*	100% of Allowed Charge. *Deductible Amount is waived.*
	Prescription contraceptive services, obtainable with a Prescription Order, are paid under the Prescription Drug benefit. See Section 5(e).	
Mental Health and Substance Use Disorder Treatment Services		
• **Mental Health Treatment Services**		
Inpatient		
Includes Acute Inpatient Admissions and Residential Treatment	75% of Allowed Charge. *Preauthorization is required.*	80% of Allowed Charge. *Preauthorization is required.*
Outpatient	*For all Outpatient Services, 100% of the Allowed Charge (includes Copayment and Deductible/Coinsurance) is waived for the initial 5 hours, per Member per Benefit Period.*	
Office Visits	$30 Copayment Amount per Office Visit, then 100% of Allowed Charge. *Deductible Amount is waived.*	$25 Copayment Amount per Office Visit, then 100% of Allowed Charge. *Deductible Amount is waived*
All Other Services, Including:		
Intensive Outpatient	80% of Allowed Charge.	80% of Allowed Charge.
Partial Hospitalization	80% of Allowed Charge. *Covered Services received during the remainder of the Benefit Period are payable at 80% of Allowed Charge and are subject to any Deductible Amount.*	80% of Allowed Charge. *Covered Services received during the remainder of the Benefit Period are payable at 80% of Allowed Charge and are subject to any Deductible Amount.*

Covered Services	PROVIDER OF SERVICE Basic Plan After Deductible Amount	PROVIDER OF SERVICE PPO Plan After Deductible Amount
• **Substance Use Disorder Treatment Services**		
Inpatient		
Includes Acute Inpatient Admissions and Residential Treatment	75% of Allowed Charge. *Preauthorization is required.*	80% of Allowed Charge. *Preauthorization is required.*
Outpatient	*For all Outpatient Services, 100% of Allowed Charge (includes Copayment and Deductible/Coinsurance) is waived for the initial 5 visits, per Member per Benefit Period.*	
Office Visits	$30 Copayment Amount per Office Visit, then 100% of Allowed Charge. *Deductible Amount is waived.*	$25 Copayment Amount per Office Visit, then 100% of Allowed Charge. *Deductible Amount is waived*
All Other Services, Including:		
Intensive Outpatient	80% of Allowed Charge.	80% of Allowed Charge.
Partial Hospitalization	80% of Allowed Charge. *Covered Services received during the remainder of the Benefit Period are payable at 80% of Allowed Charge and are subject to any Deductible Amount.*	80% of Allowed Charge. *Covered Services received during the remainder of the Benefit Period are payable at 80% of Allowed Charge and are subject to any Deductible Amount.*
Other Services Not Previously Listed Above		
• **Skilled Nursing Facility Services**	75% of Allowed Charge.	80% of Allowed Charge.
• **Home Health Care Services**	75% of Allowed Charge.	80% of Allowed Charge.
• **Hospice Services**	75% of Allowed Charge.	80% of Allowed Charge.
• **Private Duty Nursing Services**	75% of Allowed Charge.	80% of Allowed Charge.
• **Medical Supplies and Equipment** - Home Medical Equipment - Prosthetic Appliances and Limbs - Orthotic Devices - Supplies for Administration of Prescription Medications other than the diabetes supplies specified in Prescription Drug Benefit – See Section 5(e) - Oxygen Equipment and Supplies - Ostomy Supplies - External Hearing aids	75% of Allowed Charge. *Limited to one hearing aid, per ear, per Member every 3 years. For Members ages 18 and older, excludes hearing aids to correct gradual hearing impairment or loss that occurs with aging and/or other lifestyle factors.*	80% of Allowed Charge.
• **Breast Pumps**	100% of Allowed Charge. *Deductible Amount is waived. Benefits are available for the rental or purchase of 1 breast pump per pregnancy. Supplies also covered; see Section 5(a).*	100% of Allowed Charge. *Deductible Amount is waived. Benefits are available for the rental or purchase of 1 breast pump per pregnancy. Supplies also covered; see Section 5(a).*
• **Eyeglasses or Contact Lenses** *(following a covered cataract surgery)*	75% of Allowed Charge. *Benefits are subject to a Maximum Benefit Allowance of 1 pair of eyeglasses or contact lenses per Member when purchased within 6 months following the surgery.*	80% of Allowed Charge.

Covered Services	PROVIDER OF SERVICE Basic Plan After Deductible Amount	PROVIDER OF SERVICE PPO Plan After Deductible Amount
Prescription Drug and Diabetes Supplies Benefits		
Retail and Mail Order		
Formulary Prescription Medication		
➢ Generic	$5 Copayment Amount, then 85% of Allowed Charge. Benefits are subject to the Prescription Drug Out-of-Pocket Maximum Amount and the Copayment Amount application listed below. *Deductible Amount is waived.*	
➢ Brand Name	$20 Copayment Amount, then 75% of Allowed Charge. Benefits are subject to the Prescription Drug Out-of-Pocket Maximum Amount and the Copayment Amount application listed below. *Deductible Amount is waived.*	
Non-Formulary Prescription Medication		
	$25 Copayment Amount, then 50% of Allowed Charge. Benefits are subject to the Copayment Amount application listed below. *Deductible Amount is waived.*	

Copayment Amount Application

- One Copayment Amount per Prescription Order or refill for a 1 - 34-day supply.
- Two Copayment Amounts per Prescription Order or refill for a 35 - 100-day supply.
- Two Copayment Amounts per Prescription Order or refill for a 2- or 3-month supply of Non-Formulary contraceptives.

Formulary contraceptive medications obtainable with a Prescription Order are paid at 100% of Allowed Charge; this includes over-the-counter Plan-B, if obtained with a Prescription Order. Copayment Amounts and any applicable Cost Sharing do not apply. *Deductible Amount is waived.*

Copayment Amounts do not apply to the following nonprescription diabetes supplies: syringes, lancets, blood glucose test strips, urine test products and control solutions. Coinsurance still applies.

If a Generic Prescription Medication is the therapeutic equivalent for a Brand Name Prescription Medication, and is authorized by a Member's Health Care Provider, benefits will be based on the Allowance for the Generic equivalent. If the Member does not accept the Generic equivalent, the Member is responsible for the cost difference between the Generic and the Brand Name Prescription Medication and applicable Cost Sharing Amounts. For details, see Section 5(e).

Prescription Medications and nonprescription diabetes supplies are subject to a dispensing limit of a 100-day supply.

Cost Sharing amounts are waived for prenatal vitamins.

Folic Acid Supplements are covered at 100% (no charge) for women planning to become pregnant or in their childbearing years, if obtained with a Prescription Order. *Deductible Amount is waived.* For details, see Section 5(e).

Vitamin D supplements are covered at 100% (no charge) for Members ages 65 and older at risk for falls, if obtained with a Prescription Order. *Deductible Amount is waived.* For details, see Section 5(e).

Formulary breast cancer preventive medications obtainable with a Prescription Order are covered at 100% (no charge) for women at increased risk for breast cancer. *Deductible Amount is waived.* For details, see Section 5(e).

Section 3. Enrollment

Eligibility and When to Enroll

As provided in N.D.C.C. §54-52.1-01(4), individuals eligible to receive benefits are every permanent employee who is employed by a governmental unit, as that term is defined in N.D.C.C. §54-52-01, whose services are not limited in duration, who is filling an approved and regularly funded position in a governmental unit, and who is employed at least seventeen and one-half hours per week and at least five months each year or for those first employed after August 1,2003, is employed at least twenty hours per week and at least twenty weeks each year of employment. An eligible employee includes members of the Legislative Assembly, judges of the Supreme Court, paid members of state or political subdivision boards, commissions, or associations, full-time employees of political subdivisions, elective state officers as defined by N.D.C.C. §54-06-01(2), and disabled permanent employees who are receiving compensation from the North Dakota workforce safety and insurance fund.

A temporary employee employed before August 1, 2007, may elect to participate in the uniform group insurance program by completing the necessary enrollment forms and qualifying under the medical underwriting requirements of the program if such election is made before January 1, 2015, and if the temporary employee is participating in the uniform group insurance program on January 1, 2015. In order for a temporary employee employed after July 31, 2007, to qualify to participate in the uniform group insurance program, the employee must be employed at least twenty hours per week; must be employed at least twenty weeks each year of employment; must make the election to participate before January 1, 2015; and must be participating in the uniform group insurance program as of January 1, 2015. To be eligible to participate in the uniform group insurance program, a temporary employee first employed after December 31, 2014, or any temporary employee not participating in the uniform group insurance program as of January 1, 2015, must meet the definition of a full-time employee under §4980H(c)(4) of the Internal Revenue Code [26 U.S.C. 4980H(c)(4)].

An eligible employee is entitled to coverage the first of the month following the month of employment, provided the employee submits an application for coverage within the first 31 days of employment or eligibility for a special enrollment period as set forth in N.D.A.C. §71-03-03. Each eligible employee may elect to enroll his/her Eligible Dependents.

Eligible employees also include non-Medicare eligible retired and terminated employees, and their Eligible Dependents, who remain eligible to participate in the uniform group insurance program pursuant to applicable state law, as provided in N.D.C.C. §54-52.1-03 and federal regulations. For a comprehensive description of eligibility, refer to the NDPERS web site at www.nd.gov/ndpers.

Eligibility to receive benefits under the Benefit Plan is initially determined by the Plan Administrator. When an eligible employee meets the criteria for eligibility, a membership application must be completed. NDPERS has the ultimate decision making authority regarding eligibility to receive benefits.

A "Late Enrollee" is an Eligible Group Member or Eligible Dependent who declines coverage when he or she is initially eligible to enroll and later requests to enroll for coverage. A Late Enrollee can only enroll during the next scheduled Annual Enrollment Period. A Member is not a "Late Enrollee" if any "special enrollment right(s)" apply, as described later in this section.

How to Enroll

Both the Group and Group Member are involved in the enrollment process.

The Group Member must:

1. Complete the enrollment process, as designated by NDPERS, for the Group Member and any Eligible Dependents; and
2. Provide all information needed to determine the eligibility of the Group Member and/or Dependents, if requested by the Plan.

The Group must:

1. Provide all information needed by the Plan to determine eligibility; and
2. Agree to pay required premium payments on behalf of the Group Member.

When Coverage Begins

Coverage generally becomes effective on the first day of the month that follows the date of hire, as designated by NDPERS.

If you are an inpatient in a Hospital or other Facility on the day your coverage begins, we will pay benefits for Covered Services that you receive beginning on the date your coverage becomes effective, as long as you receive Covered Services in accordance with the terms of this Certificate. Payment of benefits is subject to any obligations under a previous plan or coverage arrangement in accordance with state law and applicable regulations.

For more information, see Section 11, "*Continuation of Coverage for Confined Members*" and "*Extension of Benefits for Total Disability*".

Eligibility Requirements for Dependents

The following Dependents are eligible for coverage ("Dependent coverage"):

Spouse - The Subscriber's spouse under a legally existing marriage between persons of the opposite sex. A Spouse is always eligible for coverage, subject to eligibility requirements as designated by NDPERS.

Dependent Child - To be eligible for coverage, a dependent child must meet all the following requirements:

1. Be your natural child, a child placed with you for adoption, a legally adopted child, a child for whom you have legal guardianship, a stepchild, or foster child; and
2. Be one of the following:
   a. under age twenty-six (26); or
   b. incapable of self-sustaining employment by reason of a disabling condition and chiefly dependent upon the Certificate

holder/Subscriber for support and maintenance. If the Plan so requests, the Subscriber must provide proof of the child's disability within *thirty-one (31)* days of the Plan's request. Such a request may be no more than annually following the two year period of the disabled dependent child's attainment of the limiting age [N.D.C.C. §26.1-36-22 (4)]; or

c. the Subscriber's grandchild(ren) or those of the Subscriber's living, covered Spouse, who legally reside with the Certificate holder/Subscriber, and (1) the parent of the grandchild(ren) is an Covered Dependent also covered by this Plan; and (2) both the Dependent and child of such Dependent (grandchild) are chiefly dependent upon the Certificate holder/Subscriber for support.

Dependent coverage does not include the spouse of an adult Dependent child. Coverage will continue to the end of the month in which the adult Dependent child reaches the limiting age. Coverage does not include the adult Dependent child's spouse or child of such Dependent (grandchild) unless that grandchild meets other coverage criteria established under state law. The adult Dependent's marital status, financial dependency, residency, student status or employment status will not be considered in determining eligibility for initial or continued coverage.

Limitations. A Dependent shall not be covered under this Contract if he or she is eligible to be a Subscriber, already covered as a Dependent of another Subscriber, or already covered as a Subscriber.

Noncustodial Subscribers

Whenever a Dependent Child receives coverage under the Plan through the noncustodial parent who is the Subscriber, the Plan shall do all of the following:

1. Provide necessary information to the custodial parent in order for the Dependent Child to receive benefits under the Plan;
2. Allow the custodial parent or Provider, with the custodial parent's approval, to submit claims for Covered Services without approval from the noncustodial parent; and
3. Make payment on the submitted claims directly to the custodial parent or Provider.

Status of Member Eligibility

The Plan Administrator agrees to furnish Sanford Health Plan with any information required by Sanford Health Plan for the purpose of enrollment. Any changes affecting a Member's eligibility for coverage must be provided to Sanford Health Plan by the Plan Administrator and/or the Member immediately, but in any event, the Plan Administrator and/or the Member shall notify Sanford Health Plan within 31 days of the change.

Statements made on membership applications are deemed representations and not warranties. No statements made on the membership application may be used in any contest unless a copy has been furnished to that person, or in the event of the death or incapacity of that person, to the individual's beneficiary or personal representative. The Subscriber is provided a copy of the membership application at the time of completion.

A Member making a statement (including the omission of information) on the membership application or in relation to any of the terms of this Benefit Plan constituting fraud or an intentional misrepresentation of a material fact will result in the rescission of this Benefit Plan by Sanford Health Plan. A rescission is a cancellation or discontinuance of coverage, including any benefits paid, that has a retroactive effect of voiding this Benefit Plan or any benefits paid under the terms of this Benefit Plan.

Physical Examinations

Sanford Health Plan at its own expense may require a physical examination of the Member as often as necessary during the pendency of a Claim for Benefits and may require an autopsy in case of death if the autopsy is not prohibited by law.

Qualified Medical Child Support Order (QMCSO) Provision

A QMCSO is an order of a court or administrative tribunal that creates the right of a Member's child to be enrolled under this Plan. If a QMCSO is issued, this Plan will provide benefits to the child(ren) of a covered person regardless of whether the child(ren) resides with the Member. In the event that a QMCSO is issued, each named child(ren) will be covered by this Plan in the same manner as any other Dependent child(ren) by this Plan.

When the Plan is in receipt of a medical child support order, the Plan will notify the Member and each child named in the order, that the Plan is in receipt of a QMCSO which contains the following required information:

- Name and last known address of the Member and the child(ren) to be covered by the Plan.
- A description of the type of coverage to be provided by this Plan to each named child.
- The applicable period determined by the order.
- The plan determined by the order.

In order for the child's coverage to become effective as of the date of the court order issued, the Member must apply for coverage as defined previously in this section. Each named child may designate another person, such as a custodial guardian, to receive copies of explanation of benefits, payments, and other materials.

Exceptions. If a court has ordered a Subscriber to provide health coverage for a Dependent Child, the requirements in the *Dependent Child* subsection above, "*Eligibility Requirements for Dependents*" need not be satisfied, but the Subscriber must still request enrollment on behalf of the Dependent Child as set forth in this Plan. If the Subscriber fails to enroll the Dependent Child, the other parent or the legal representative of the Dependent Child, may enroll the Dependent Child. A Dependent Child who is provided coverage pursuant to this exception shall not be terminated unless the Plan is provided satisfactory written evidence of any of the following:

1. The court or administrative order is no longer in effect;
2. The Dependent Child is or will be enrolled in comparable health coverage through an insurer which will take effect not later than the effective date of the termination; or
3. The Group has eliminated family coverage for all of its Members.

Michelle's Law

Federal law requires that we provide the following notice regarding Michelle's Law [Public Law 110-381]. Please note that changes in federal law may eliminate certain elements of Michelle's Law, and the Plan intends to provide continuing coverage of Eligible Dependents up to age twenty-six (26), irrespective of their student status, for Plan Years beginning on or after September 23, 2010.

A Dependent Child under twenty-five (25) years old and enrolled in and attending an accredited college, university, or trade or secondary school at least five (5) months each year will remain covered if the Dependent takes a medically necessary leave of absence from school or changes to part-time status. The leave of absence must:

1. Be medically necessary;
2. Commence while the child is suffering from a serious illness or injury; and
3. Cause the child to lose coverage under the plan.

Students are only eligible as long as they were covered by their parent's health insurance Certificate prior to diagnosis. Coverage will continue until the earlier of one year from the first day of the leave of absence or the date on which coverage would otherwise terminate because the child no longer meets the requirements to be an Eligible Dependent (e.g., reaching the plan's limiting age).

You must provide a written and signed certification from the Dependent Child's treating Practitioner and/or Provider stating that the Dependent Child is suffering from a serious illness or injury and that the leave of absence is medically necessary and the effective date of the leave.

When and How to Enroll Dependents

When to Enroll Dependents

A Subscriber shall apply for coverage for a Dependent during the same periods of time that the Subscriber may apply for his or her own coverage. However, there is an exception for newborn and adopted children; see "*Coverage from Birth*" and "*Adoption or Children Placed for Adoption*" below. There is also an exception for Spouses; see "*New Spouses and Dependent Children*" below.

How to Enroll Dependents

The Group Member must:

1. Complete the enrollment process, as designated by NDPERS, for the Group Member and any Eligible Dependents; and
2. Provide all information needed to determine the eligibility of the Group Member and/or Dependents, if requested by the Plan.

When Dependent Coverage Begins

1. **General.** If a Dependent is enrolled at the same time the Subscriber enrolls for coverage, the Dependent's effective date of coverage will be the same as the Subscriber's effective date as described in "*When Coverage Begins*" above.
2. **Delayed Effective Date of Dependent Coverage.** Except for newborns (see item 3 below), if, on the date Dependent coverage becomes effective, the Dependent is Hospitalized and covered under an extension of health benefits from a previous Group health plan or other coverage arrangement, coverage under this Contract shall be subject to benefits payable under the previous plan or coverage arrangement.
3. **Coverage from Birth.** If a Subscriber has a child through birth, the child will become a covered Dependent from the date of birth. Depending on the Class of Coverage the Subscriber is enrolled under, the following provisions apply:
   a. **Subscribers with Single Coverage:** For coverage to continue beyond thirty-one (31) days of the newborn's date of birth, coverage must applied for through NDPERS within thirty-one (31) days of the newborn's date of birth.
   b. **Subscribers with Family Coverage:** Subscribers with Family Coverage under the Plan are encouraged to notify the Plan in advance when a pregnancy and expected due date is known. Newborn children will be added to the Certificate automatically if the Subscriber is enrolled in Family Coverage and the Plan and/or NDPERS is notified of the pregnancy.

   An Eligible Group Member, and any other Dependents, eligible to be enrolled in the Plan, but who failed to enroll during a previous enrollment period, shall be covered under this Contract from the date of the newborn child's birth, provided that coverage is applied for through NDPERS within thirty-one (31) days. Pursuant to N.D.A.C. §71-03-03-01, an employee who previously waived coverage must enroll for coverage at the same time that the Employee's Eligible Dependent is enrolled.

   Dependent coverage is available for the Spouse, if the Spouse is otherwise eligible for coverage under the Plan, provided coverage is applied through NDPERS for the Spouse and, if applicable, the Group Member, within thirty-one (31) days of the newborn child's birth.
4. **Adoption or Children Placed for Adoption.** If a Subscriber adopts a child or has a child placed with him or her as a Dependent, that child will become covered as an Eligible Dependent as of the date specified within a court order or other legal adoption papers. Regardless of the Class of Coverage the Subscriber is enrolled under, the following provisions apply:
   a. **Subscribers with either Single or Family Coverage:** For coverage to continue beyond thirty-one (31) days of the date specified within the court order or other legal adoption papers granting an adoption, placement for adoption, legal guardianship, or order to provide health coverage, the Subscriber must submit an application for coverage to NDPERS within thirty-one (31) days of the date specified within the court order or other legal adoption papers that granted initial eligibility.

   An Eligible Group Member, and any other Dependents, eligible to be enrolled in the Plan, who failed to enroll during a previous enrollment period, shall be covered as of the date specified within a court order or other legal adoption papers, if the Eligible Group Member, and any other Eligible Dependents, submits an application for coverage to NDPERS within thirty-one (31) days of the date specified within the court order or in the legal adoption papers granting an adoption, placement for adoption, legal guardianship, or order to provide health coverage. Pursuant to N.D.A.C. §71-03-03-01, an employee who previously waived coverage must enroll for coverage at the same time that the Employee's Eligible Dependent is enrolled.

   Dependent coverage is available for the Spouse, if the Spouse is otherwise eligible for coverage under the Plan, provided that an

application for coverage is submitted to NDPERS for the Spouse and, if applicable, the Group Member, within thirty-one (31) days of the date specified within the court order or in the legal adoption papers granting an adoption, placement for adoption, legal guardianship, or order to provide health coverage.

Coverage at the time of placement for adoption includes the necessary care and treatment of medical conditions existing prior to the date of placement.

5. **New Spouses and Dependent Children.** If a Subscriber gets married, his or her Spouse, and any of the Spouse's Dependents who become Eligible Dependents of the Subscriber as a result of the marriage, will become covered as a Member from the first day of the calendar month beginning after the date of marriage, provided that coverage is applied for the Spouse and/or the Dependent within thirty-one (31) days of the date of marriage.

   If an Eligible Group Member, who is an Employee eligible to enroll in the Plan, but who did not do so during a previous enrollment period, gets married, the employee becomes an eligible Subscriber under the following conditions. The Subscriber, his or her Spouse, and any Dependents who become Eligible Dependents of the Subscriber as a result of the marriage, will become covered as a Member from the first day of the calendar month beginning after the date of marriage, provided that coverage is applied for within thirty-one (31) days of the date of marriage. Pursuant to N.D.A.C. §71-03-03-01, an employee who previously waived coverage must enroll for coverage at the same time that the employee's Eligible Dependent is enrolled.

Special Enrollment Procedures & Rights

A. The Subscriber is responsible for notifying the Plan Administrator (NDPERS) of any mailing address change within 31 days of the change.

B. The Subscriber is responsible for notifying the Plan Administrator (NDPERS) of any change in marital status within 31 days of the change.

   1. If the Subscriber marries, Eligible Dependents may be added as a Member if a membership application is submitted within 31 days of the date of marriage. If the membership application is not submitted within the 31-day period, and the Eligible Dependent is a Late Enrollee, the effective date of coverage will be the Group's anniversary date.

      If the membership application is submitted within 31 days of the date of marriage, the effective date of coverage for the Eligible Dependent will be the first of the month immediately following the date of marriage. If the membership application is not submitted within 31 days of the date of marriage and the Eligible Dependent is a Late Enrollee, the effective date of coverage will be the Group's anniversary date.

   2. If a Member becomes otherwise ineligible for group membership under this Benefit Plan due to legal separation, divorce, annulment, or death, coverage for the Subscriber's Spouse and/or Dependents under Family Coverage will cease, effective the first of the month immediately following timely notice of the event causing ineligibility.

      If living in the Sanford Health Plan Service Area (see *Service Area* in Introduction Section), a Member has the option to continue coverage through one of Sanford Health Plan's individual plans. For more information on options available through Sanford Health Plan, visit www.sanfordhealthplan.com/ndpers or call Member Services toll-free at (800) 499-3416 | TTY/TDD: (877) 652-1844 *(toll-free)*.

      There may also be other coverage options through the Health Insurance Marketplace, Medicaid, or other group health plan coverage options (such as another employer's plan) through what is called a "special enrollment period." The cost of these options may vary depending on a Subscriber's individual circumstances. To learn more about offerings on the Marketplace, and options outside the Sanford Health Plan Service Area, visit www.healthcare.gov or call (800) 318-2596 | TTY/TDD: (855) 889-4325.

C. The Subscriber is responsible for notifying the Plan Administrator (NDPERS) and Sanford Health Plan of any change in family status within 31 days of the change. The effective date of coverage for dependents added to this Benefit Plan within the designated time period will be the date of birth, physical placement, or the first of the month immediately following the date established by court order. If a membership application is not submitted within the designated time period and the Eligible Dependent is a Late Enrollee, the effective date of coverage will be the Group's anniversary date.

   The following provisions will apply:

   1. At the time of birth, natural children will automatically be added to the Subscriber's Benefit Plan if Family Coverage is in force. If the Subscriber is enrolled under another Class of Coverage, the Subscriber must submit a membership application for the newborn child within 31 days of the date of birth. If the membership application is not submitted within the designated time period and the child is a Late Enrollee, the effective date of coverage will be the Group's anniversary date.
   2. Adopted children may be added to this Benefit Plan if a membership application, accompanied by a copy of the placement agreement or court order, is submitted to Sanford Health Plan within 31 days of physical placement of the child. If the membership application is not received in accordance with this provision and the child is a Late Enrollee, the effective date of coverage will be the Group's anniversary date.
   3. Children for whom the Subscriber or the Subscriber's living, covered spouse have been appointed legal guardian may be added to this Benefit Plan by submitting a membership application within 31 days of the date legal guardianship is established by court order. If the membership application is not received in accordance with this provision and the child is a Late Enrollee, the effective date of coverage will be the Group's anniversary date.
   4. Children for whom the Subscriber or the Subscriber's living, covered spouse are required by court order to provide health benefits may be added to this Benefit Plan by submitting a membership application within 31 days of the date established by court order. If the membership application is not received in accordance with this provision and the child is a Late Enrollee, the effective date of coverage will be the Group's anniversary date.
   5. If any of the Subscriber's children, who are beyond the age of 26 and incapable of self-sustaining employment by reason of a

disabling condition and chiefly dependent upon the Certificate holder/Subscriber for support and maintenance, coverage will remain in effect as long as the disabled child remains dependent upon the Certificate holder/Subscriber or the Subscriber's spouse for support and maintenance. If the Plan so requests, the Subscriber must provide proof of the child's disability within *thirty-one (31)* days of the Plan's request.

6. If a child is no longer an Eligible Dependent under this Benefit Plan, and the child is living in the Sanford Health Plan Service Area (see *Service Area* in the above Introduction Section), the Dependent has the option to continue coverage through one of Sanford Health Plan's individual plans. For more information on options available through Sanford Health Plan, visit www.sanfordhealthplan.com/ndpers or call Member Services toll-free at (800) 499-3416 | TTY/TDD: (877) 652-1844 *(toll-free)*. There may also be other coverage options through the Health Insurance Marketplace, Medicaid, or other group health plan coverage options (such as another employer's plan) through what is called a "special enrollment period." The cost of these options may vary depending on a Subscriber's individual circumstances. To learn more about offerings on the Marketplace, and options outside the Sanford Health Plan Service Area, visit www.healthcare.gov or call (800) 318-2596 | TTY/TDD: (855) 889-4325.
7. At the time of birth or adoption, other Eligible Dependents may be added to this Benefit Plan if a membership application is submitted to NDPERS within 31 days of birth or physical placement of the adopted child. If the membership application is not received in accordance with this provision, and the Eligible Dependent is a Late Enrollee, the effective date of coverage will be the Group's anniversary date.

D. Employees and/or dependents who previously declined coverage under this Benefit Plan will be able to enroll under this Benefit Plan if each of the following conditions are met:
   1. During the initial enrollment period the employee or dependent states, in writing, that coverage under a group health plan or health insurance coverage was the reason for declining enrollment at such time.
   2. The employee's or dependent's coverage under a group health plan or other health insurance coverage:
      a. was either terminated as a result of loss of eligibility (Including loss as a result of legal separation, divorce, death, termination of employment or reduction of hours, loss as a result of having a subsequent opportunity for late enrollment [including the Annual Enrollment Period] or special enrollment under the Benefit Plan but again choosing not to enroll, or employer contributions toward such coverage were terminated; or
      b. was under COBRA and the coverage was exhausted.
   3. The employee requests such enrollment within 31 days after the exhaustion or termination of coverage.

   The effective date of coverage for an employee and/or dependent that previously declined coverage under this Benefit Plan, and is enrolling pursuant to this provision, will be the first of the month following the exhaustion or termination of the employee's and/or dependent's previous coverage. The employee and/or dependent shall be responsible for any and all premium payments from the effective date of coverage under this provision through the date the employee and/or dependent requests enrollment under the terms of this Benefit Plan.

   If the membership application is not received in accordance with this provision and the employee or dependent is a Late Enrollee, the Late Enrollee's effective date of coverage will be the Group's anniversary date.

E. Employees and/or dependents will be able to enroll under this Benefit Plan if either of the following conditions is met:
   1. The employee or dependent is covered under a Medicaid plan under Title XIX of the Social Security Act or under a state child health plan under Title XXI of the Social Security Act and the employee's or dependent's coverage under such a plan is terminated as a result of loss of eligibility. The employee must request enrollment within 60 days of the date of termination of coverage; or
   2. The employee or dependent becomes eligible for premium assistance under a Medicaid plan under Title XIX of the Social Security Act or under a state child health plan under Title XXI of the Social Security Act. The employee must request enrollment within 60 days of the date the employee or dependent is determined to be eligible for premium assistance.

      The effective date of coverage under this Benefit Plan for an employee and/or dependent enrolling pursuant to this provision will be the first day immediately following the termination of coverage or eligibility for premium assistance. The employee and/or dependent shall be responsible for any and all premium payments from the effective date of coverage under this provision through the date the employee and/or dependent requests enrollment under the terms of this Benefit Plan.

Note: The following do not qualify for a special enrollment period: 1) Loss of Minimum Essential Coverage due to failure to make premium payment and/or allowable rescissions of coverage; 2) Voluntarily terminating/dropping COBRA coverage before it runs out outside Annual Enrollment. COBRA coverage must be exhausted (usually 18 or 36 months) or another qualifying life event must occur before eligible for special enrollment.

Children's Health Insurance Program Reauthorization Act of 2009 (CHIPRA)

The Children's Health Insurance Program Reauthorization Act of 2009 grants Special Enrollment Rights to employees and dependents who are eligible for, but not enrolled in, a group health plan to enroll in the plan upon:

- losing eligibility for coverage under a State Medicaid or CHIP program; or
- becoming eligible for State premium assistance under Medicaid or CHIP.

In order to qualify for Special Enrollment, an Eligible Employee or Dependent must request coverage within sixty (60) days of either being terminated from Medicaid or CHIP coverage or being determined to be eligible for premium assistance. The Plan will also require the Eligible Employee to enroll. Special enrollment rights extend to all benefit packages available under the Plan. If you have questions about enrolling in your employer's plan under CHIPRA Special Enrollment Rights, contact the Department of Labor at www.askebsa.dol.gov or call (866) 444-3272 *(toll-free)*.

If you or your dependents are NOT currently enrolled in Medicaid or CHIP, and you think you or any of your dependents might be eligible for either of these programs, contact your State Medicaid or CHIP office or dial **(877) KIDS NOW** or **www.insurekidsnow.gov** to find out how to apply.

Section 4. How you get care

Identification cards

The Plan will send you an identification (ID) card when you enroll. You should carry your ID card with you at all times. You must show it whenever you receive services from a Provider, a health care Facility, or fill a prescription at a Plan pharmacy. If you fail to show your ID card at the time you receive health care services or prescription medications, you may be responsible for payment of the claim after the Participating Practitioner and/or Provider's timely filing period of one-hundred-eighty (180) days has expired. Your coverage will be terminated if you use your ID card fraudulently or allow another individual to use your ID card to obtain services.

If you do not receive your ID card within *thirty (30)* days after the effective date of your enrollment, or if you need replacement cards, call us at (800) 499-3416 or write to us at Sanford Health Plan, ATTN: NDPERS, PO Box 91110 Sioux Falls, SD 57109-1110. You may also request replacement cards by signing into your account at www.sanfordhealthplan.com/memberlogin. Information on creating an account is available at www.sanfordhealthplan.com/ndpers.

Conditions for Coverage

Members shall be entitled to coverage for the Health Care Services (listed in the "*Covered Services*," in Sections 2 and 5) that are:

1. Medically Necessary and/or Preventive;
2. Received from or provided under the orders or direction of a Participating Provider;
3. Approved by the Plan, including Preauthorization/Prior Approval where required; and
4. Within the scope of health care benefits covered by the Plan.

However, the requirements to use Participating Providers and obtain preauthorization/prior approval do not apply to Emergency Conditions or Urgent Care Situations, both in and out of the Service Area. In such cases, services for Emergency Conditions and Urgent Care Situations will be covered if they are provided by a Non-Participating Provider.

If, while in the Service Area, the Member is alert, oriented and able to communicate (as documented in medical records); the Member must direct the ambulance to the nearest Participating Provider.

Members are not required, but are strongly encouraged, to select a Primary Care Practitioner and/or Provider (PCP) and use that PCP to coordinate their Health Care Services.

In addition, all Health Care Services are subject to:

1. The exclusions and limitations described in Sections 5 and 6; and
2. Any applicable Copay, Deductible, and Coinsurance amounts as stated in this COI, your Summary of Benefits and Coverage (SBC), and your Summary of Pharmacy Benefits.

In-Network Coverage

In-Network coverage is provided under two (2) plan levels. For more information, see *Selecting a Health Care Provider* in Section 1. In-Network benefit payments pay according to coverage under:

1. Basic Plan; or
2. PPO Plan

Note: If you travel out of the Plan's Service Area for the purpose of seeking medical treatment outside the Plan's Service Area, as defined in this COI, without Preauthorization/Prior Approval for a service that requires such authorization/approval, your claims will be paid according to the Basic Plan benefits and stipulations set forth in Section 1. Additionally, the Member will receive Basic Plan benefits if: 1) a PPO Health Care Provider is not available in the Member's area; or 2) if the Member either chooses or is referred to a Health Care Provider not participating in the Preferred Provider Organization (PPO).

Appropriate Access

Primary Care Practitioners and/or Providers and Hospital Providers

Appropriate access for Primary Care Practitioners and/or Providers and Hospital Provider sites is within *fifty (50)* miles of a Member's city of legal residence.

Specialty Practitioners and Other Providers

For other Participating Practitioners and Providers such as Specialty Physicians, Diagnostic Service Centers, Nursing Homes, and Rehabilitation Providers, appropriate access is within *fifty (50)* miles of a Member's city of legal residence. Appropriate access includes access to Participating Practitioners and Providers when the Member has traveled outside of the Service Area. If you are traveling within the Service Area where other Participating Practitioners and Providers are available, then you must use Participating Practitioners and Providers.

Members who live outside of the Plan's Service Area must use the Plan's contracted Network of Participating Practitioners and Providers as indicated in the Plan's Provider Directory. Members who live outside the Service Area will receive Identification Cards that display their network logo along with instructions on how to access this Network. If a Member chooses to go to a Non-Participating Practitioner or Provider when appropriate access (within *fifty (50)* miles of a Member's city of legal residence) is available, claims will be processed at the Basic Plan (Out-of-Network) level.

Transplant Services

Transplant Services must be performed at designated Plan Participating Centers of Excellence and are not subject to Appropriate Access standards as outlined above. Transplant coverage includes related post-surgical treatment, medications, eligible travel, and living expenses and shall be subject to and in accordance with the provisions, limitations and terms of the Plan's transplant policy.

Case Management

Case management is a collaborative process that assesses, plans, implements, coordinates, monitors and evaluates the options and services required to meet an individual's health needs, using communication and available resources to promote quality, cost effective outcomes.

Cases are identified for possible case management, based on a request for review or the presence of a number of parameters, such as:

a. admissions that exceed the recommended or approved length of stay;
b. utilization of health care services that generates ongoing and/or excessively high costs;
c. conditions that are known to require extensive and/or long term follow up care and/or treatment.

Sanford Health Plan's case management process allows professional case managers to assist Members with certain complex and/or chronic health issues by coordinating complicated treatment plans and other types of complex patient care plans.

In consultation with case managers, Sanford Health Plan may approve coverage that extends beyond the limited time period and/or scope of treatment initially approved. This consultation also includes utilization management processes as described below.

All decisions made through case management are based on the individual circumstances of a Member's case. Each case is reviewed on its own merits by appropriate health plan medical professionals to ensure the best health outcome(s) of the Member.

Utilization Review Process – OVERVIEW

The Plan's Utilization Management Department is available between the hours of 8:00 a.m. and 5:00 p.m. Central Time, Monday through Friday, by calling the Plan's toll-free number (888) 315-0885 or TTY/TDD: (877) 652-1844 *(toll-free)*. After business hours, you may leave a confidential voicemail for the Utilization Management Department and someone will return your call on the next business day. You can also fax the Plan at (701) 234-4547. The date of receipt for non-Urgent requests received outside of normal business hours will be the next business day. The date of receipt for Urgent Requests will be the actual date of receipt, whether or not it is during normal business hours.

All Utilization Management Adverse Determinations will be made by the Sanford Health Plan Chief Medical Officer or appropriate Practitioner. All benefit Adverse Determinations will be made by a person assigned to coordinate the benefit, denial and Appeal process. **For detailed information on the below, see Section 8, *Problem Resolution.***

Prospective (Pre-service) Review of Services (Preauthorization/Prior Approval)

The Member is ultimately responsible for obtaining Preauthorization/Prior Approval from the Utilization Management Department in order to receive In-Network coverage. However, information provided by the practitioner's office will also satisfy this requirement. Participating Health Care Practitioners and Providers have been given instructions on how to get the necessary authorizations/approvals for surgical procedures or hospitalizations/admissions you may need. Members are responsible to confirm with the Participating Practitioner and/or Provider that any required Plan Preauthorization/Prior Approval has been obtained.

Preauthorization/Prior Approval is the authorization/approval of a requested service prior to receiving the service. Preauthorization/Prior Approval (a pre-service determination) is designed to facilitate early identification of the treatment plan to ensure medical management and appropriate resources are provided throughout an episode of care. See *"Services that Require Prospective Review"* on the following pages.

The Plan determines approval for Preauthorization/Prior Approval based on appropriateness of care and service and existence of coverage. The Plan does not compensate practitioners and/or providers or other individuals conducting utilization review for issuing denials of coverage or service care. Any financial incentives offered to Utilization Management decision makers do not encourage decisions that result in underutilization and do not encourage denials of coverage or service.

Preauthorization/Prior Approval is required for all Inpatient Admissions of Members. This requirement applies but is not limited to the following:

1. Acute care Hospitalizations (including medical, surgical, and non-Emergency mental health and/or substance use disorder Admissions);
2. Residential Treatment Facility Admissions; and
3. Rehabilitation center Admissions

Note: Admissions and Hospitalizations require an overnight stay, as defined in Section 10. Admission before the day of non-Emergency surgery will not be authorized/approved unless the early admission is medically necessary and specifically approved by the Plan. Coverage for Hospital expenses prior to the day of surgery will be denied unless authorized/approved prior to being incurred.

Urgent Care Requests

In determining whether a request is "Urgent," the Plan shall apply the judgment of a Prudent Layperson as defined in Section 10. A Practitioner, with knowledge of the Member's medical condition, who determines a request to be "Urgent", as defined in Section 10, shall have such a request treated as an Urgent Care Request.

Services that Require Prospective Review/Preauthorization/Prior Approval

1. Inpatient Hospital Admissions (includes Admissions for medical, surgical, mental health and/or substance use disorders);
2. Selected Outpatient Procedures including but not limited to:
   a. Covered Rhinoplasty Surgeries for Non-Cosmetic Reasons;
   b. Obstructive Sleep Apnea Treatment, except for Continuous Positive Airway Pressure (CPAP);
   c. Medically-Necessary Orthodontics;
3. Home Health, Hospice and Home IV therapy services;
4. Select Durable Medical Equipment (DME) including the below. For more details, see DME requiring Preauthorization/Prior Approval in Section 5(a):
   a. Prosthetic Limbs requiring replacement within 5 years;
   b. Insulin infusion devices;

c. Insulin pumps;
d. Continuous Glucose Monitoring Systems (CGM);
e. Electric wheelchairs;
f. External hearing aids for the treatment of a hearing loss that is not due to the gradual deterioration that occurs with aging and/or other lifestyle factors. For details, see Section 5(a), *Hearing services (testing, treatment, and supplies);*

5. Skilled nursing and sub-acute care;
6. Dental Anesthesia and associated Hospitalizations for all Members age 9 and older;
7. Chronic Pain Management;
8. Transplant Services;
9. Infertility Services, including assisted reproductive technology for GIFT, ZIFT, ICSI and IVF;
10. Genetic Testing;
11. Osseointegrated implants, including Cochlear implants and bone-anchored (hearing aid) implants;
12. Select Specialty Medications including:
    a. Restricted Use Medications; and
    b. Growth Hormone Therapy/Treatment;
13. Bariatric Surgery; and
14. Referrals to Non-Participating Providers, which are recommended by Participating Providers. Preauthorization/Prior Approval is required for the purposes of receiving Basic Plan level coverage. If Preauthorization/Prior Approval is not obtained for referrals to Non-Participating Providers, the services will be covered at the Basic Plan level. Preauthorization/Prior Approval does not apply to services that are provided by Non-Participating Providers as a result of a lack of appropriate access to Participating Providers as described in this section.

Prospective (Non-Urgent Pre-service) Review Process for Elective Inpatient Hospitalizations, Non-Urgent Medical Care, and Pharmaceutical Benefit Requests

All requests for Preauthorization/Prior Approval are to be made by the Member or Practitioner and/or Provider's office at least *three (3)* business days prior to the scheduled Admission or requested service. For Non-Urgent preauthorization/prior approval requests, the Plan's Utilization Management Department may review a request for a period of up to fifteen (15) calendar days from the date of the request, provided that all information supporting the request has been received. The Utilization Management Department will review the Member's medical request against standard criteria.

Determination of the appropriateness of an admission is based on standard review criteria and assessment of:

a. Patient medical information including:
    i. diagnosis
    ii. medical history
    iii. presence of complications and/or co-morbidities;
b. Consultation with the treating Practitioner, as appropriate;
c. Availability of resources and alternate modes of treatment; and
d. For admissions to facilities other than acute Hospitals, additional information may include but is not limited to the following:
    i. history of present illness
    ii. patient treatment plan and goals
    iii. prognosis
    iv. staff qualifications
    v. *twenty-four (24)* hour availability of qualified medical staff.

You are ultimately responsible for obtaining authorization/approval from the Utilization Management Department. Failure to obtain Preauthorization/Prior Approval may result in coverage at the Basic Plan level *(see Section 1)*. However, information provided by the Practitioner and/or Provider's office also satisfies this requirement.

Note: Members are responsible to confirm with the Participating Practitioner and/or Provider that any required Plan Preauthorization/Prior Approval has been obtained.

For medical necessity requests: the Utilization Management Department will review the Member profile information against standard criteria. A determination for *elective inpatient or non-Urgent Care Situations* will be made by the Utilization Management Department *within fifteen (15) calendar days* of receipt of the request. If the Utilization Management Department is unable to make a decision *due to matters beyond its control*, it may extend the decision timeframe once, for up to *fifteen* (*15) calendar days*. Within *fifteen (15*) *calendar days* of the request for authorization/approval, Sanford Health Plan must notify the Member, or Member's Authorized Representative, of the need for an extension and the date by which it expects to make a decision.

For benefit determinations: a person assigned to coordinate the benefit, denial and Appeal process will review the request using standards established by the Plan and, if the request is approved, provide notification of the determination, or if the request is denied, provide notification of the denial and relevant appeal rights. A benefit determination will be made *within fifteen (15) calendar days* of receipt of the request. If the Plan is unable to make a decision due to matters beyond its control, it may extend the decision timeframe once, for up to *fifteen (15) calendar days*. Within *fifteen (15) calendar days* of the request for authorization/approval, Sanford Health Plan must notify the Member, or Member's Authorized Representative, of the need for an extension and the date by which it expects to make a decision.

Lack of Necessary Information

If the Plan is unable to make a decision *due to lack of necessary information*, it must notify the Member, or the Member's Authorized Representative, of what specific information is necessary to make the decision *within fifteen (15)* calendar days of the Prospective (Pre-service) Review request. Sanford Health Plan must give the Member, or the Member's Authorized Representative, a reasonable amount of

time taking into account the circumstances, but not less than *forty-five (45)* calendar days to provide the specified information. In lieu of notifying the Member, the Plan may notify the Practitioner and/or Provider of the information needed, if the request for health care services came from the Practitioner and/or Provider.

The decision time period is suspended, and the Plan shall have the remainder of the fifteen (15) calendar days from receipt of the request for authorization/approval to consider the request, measured from the earlier of the date in which the Plan receives additional information from the Member or Practitioner or *forty-five (45)* days after the notification to the Member or Practitioner.

The Prospective (Pre-service) Review determination shall either be a Preauthorization/Prior Approval of the requested service, or additional review will be needed by the Plan Chief Medical Officer; however, the decision will be made within *fifteen (15) calendar* days of that date. If the information is not received by the end of *the forty-five (45) calendar* day extension, Sanford Health Plan will deny the request. If the Plan receives a request that fails to meet the procedures for Prospective (Pre-service) Review requests, the Plan will notify the Practitioner or Member of the failure and proper procedures to be followed as soon as possible but no later than *five (5)* calendar days after the date of the failure. Notification may be oral unless the Practitioner or Member request written notification.

Sanford Health Plan will give written and/or electronic notification of the *determination to authorize/approve or deny* the service *within fifteen (15) calendar* days of the request (or in the case of an extension, of the end of the timeframe given to provide information) to the Member, or the Member's Authorized Representative, attending Practitioner and those Providers involved in the provision of the service. The Utilization Management Department will assign an authorization number for the approved service.

If the Plan's determination is an Adverse Determination, the Plan shall provide written notice in accordance with the *Written Notification Process for Adverse Determinations* procedure below. At this point, the Member can request an Appeal of Adverse Determination. Refer to "Problem Resolution" in Section 8 for details.

Prospective Review Process for Urgent/Emergency (Urgent Pre-service) Medical Care and Pharmaceutical Requests

An **Emergency Medical Condition** is a medical condition of recent onset and severity, including severe pain, that would lead a prudent layperson acting reasonably and possessing an average knowledge of health and medicine to believe that the absence of immediate medical attention could reasonably be expected to result in serious impairment to bodily function, serious dysfunction of any bodily organ or part, or would place the person's health, or with respect to a pregnant woman, the health of the woman or her unborn child, in serious jeopardy.

An **Urgent Care Situation** is a degree of illness or injury, which is less severe than an Emergency Condition, but requires prompt medical attention within *twenty-four (24)* hours, such as stitches for a cut finger. **Urgent Care Request** means a request for a health care service or course of treatment with respect to which the time periods for making a non-Urgent Care Request determination:

1. Could seriously jeopardize the life or health of the Member or the ability of the Member to regain maximum function, based on a Prudent Layperson's judgment; or
2. In the opinion of a Practitioner with knowledge of the Member's medical condition, would subject the Member to severe pain that cannot be adequately managed without the health care service or treatment that is the subject of the request.

If an Urgent Care Situation occurs, Members should contact their Primary Care Practitioner and/or Provider immediately, if one has been selected, and follow his or her instructions. A Member may always go directly to a participating Urgent care or after-hours clinic. In determining whether a request is "Urgent," the Plan shall apply the judgment of a Prudent Layperson that possesses an average knowledge of health and medicine. When a Practitioner with knowledge of the Member's medical condition determines a request to be an Urgent Care Situation, the Plan shall treat the prospective review as an Urgent Care Request.

Note: Prospective (Pre-service) Review is not required for maternity Admissions, Emergency Medical Conditions, or Urgent Care Situations. However, the Plan must be notified by the Member as soon as reasonably possible and no later than *forty-eight (48)* hours after the Member is physically or mentally able to do so. A Member's Authorized Representative may notify the Plan on the Member's behalf with written permission of the Member.

For Urgent Care Requests (Prospective (Pre-service) Reviews): the determination for medical care, including care for behavioral, mental health, and/or substance use disorders will be made by the Utilization Management Department as soon as possible (taking into account medical exigencies), but no later than *seventy-two (72) hours* after receipt of the request. Notification of the determination will be made to the Member, the Member's Authorized Representative, Practitioner and those Providers involved in the provision of the service via oral communication by the Utilization Management Department as soon as possible but no later than within *seventy-two (72) hours* of receipt of the request. For authorizations/approvals and Adverse Determinations, the Plan will give electronic or written notification of the decision to the Member or the Member's Authorized Representative, Practitioner and those Providers involved in the provision of the service as soon as possible (taking into account medical exigencies) but no later than within *three (3)* calendar days of the oral notification.

Lack of Necessary Information

If the Plan is unable to make a decision due to lack of necessary information, it may extend the decision timeframe once for up to *forty-eight (48) hours* to request additional information. Within *twenty-four (24) hours* after receipt of the request, the Plan will notify the Member or the Member's Authorized Representative of what specific information is necessary to make the decision. In lieu of notifying the Member, the Plan can notify the Practitioner of the information needed if the request for health care services came from the Practitioner. Sanford Health Plan must give the Member or the Member's Authorized Representative a reasonable amount of time taking into account the circumstances, but not less than *forty-eight (48) hours* to provide the specified information. If the Plan receives a request that fails to meet the procedures for Urgent Prospective (Pre-service) Review requests, the Plan will notify the Practitioner and Member of the failure and proper procedures to be followed as soon as possible but no later than *twenty-four (24) hours* after the date of the failure. Notification may be oral unless the Practitioner or Member request written notification. The Member, or the Member's Authorized Representative, Practitioner and those Providers involved in the provision of the service will be notified by telephone of the Plan's determination as soon as possible but no later than forty-eight (48) hours after the earlier of: 1) the Plan's receipt of the requested information or 2) the end of the period provided to submit

the requested information. The Plan will also give electronic or written notification of the decision as soon as possible but no later than within *three (3)* calendar days of the telephone notification. Failure to submit necessary information is grounds for denial of authorization/approval.

If the Plan's determination is an Adverse Determination, the Plan shall provide written notice in accordance with the *Written Notification Process for Adverse Determinations* procedure below. At this point, the Member can request an Appeal of Adverse Determinations. Refer to "Problem Resolution" in Section 8 for details.

Concurrent Review Process for Medical Care Requests

Concurrent Review is utilized for medical care, including care for behavioral, mental health, and/or substance use disorders when a request for an extension of an approved ongoing course of treatment over a period of time or number of treatments is warranted. Additional stay days must meet the continued stay review criteria and, if acute levels of care criteria are not met, a decision to authorize/approve further treatment must be made at that time. Preauthorization/Prior Approval of inpatient health care stays will terminate on the date the Member is to be discharged from the Hospital or Facility (as ordered by the attending Practitioner). Hospital/Facility days accumulated beyond the ordered discharge date will not be authorized/approved unless the continued stay criteria continue to be met. Charges by Practitioners and/or Providers associated with these non-authorized/approved days are non-covered.

The health care service or treatment that is the subject of the Adverse Determination shall be continued without liability to the Member until the Member has been notified of the determination by the Plan with respect to the internal review request made pursuant to the Plan's Appeal Procedures. Any reduction or termination by the Plan during the course of treatment before the end of the period or number treatments shall constitute an Adverse Determination. For requests to extend the course of treatment beyond the initial period of time or the number of treatments, if the request is made at least twenty-four (24) hours prior to the expiration of the prescribed period of time or number of treatments, the Plan shall make an urgent Concurrent determination and notify the Member, or the Member's Authorized Representative, Practitioner and those Providers involved in the provision of the service by telephone of the determination as soon as possible taking into account the Member's medical condition but in no event more than twenty-four (24) hours after the date of the Plan's receipt of the request.

The Plan will provide electronic or written notification of an authorization/approval to the Member or the Member's Authorized Representative, Practitioner and those Providers involved in the provision of the service within *three (3) calendar* days after the telephone notification. The Plan shall provide written or electronic notification of the Adverse Determination to the Member or the Member's Authorized Representative and those Providers involved in the provision of the service sufficiently in advance (but no later than within *three (3) calendar* days of the telephone notification) of the reduction or termination to allow the Member or, the Member's Authorized Representative to file an Appeal request to review of the Adverse Determination and obtain a determination with respect to that review before the benefit is reduced or terminated.

In cases where the Member is not at financial risk, Members will not be notified of an Adverse Determination. Members will be notified in all other cases.

Urgent Concurrent Reviews Requested Within Twenty-Four (24) Hours of Expiring Authorization/Approval

If the request to extend Urgent Concurrent Review is not made at least *twenty-four (24) hours* prior to the expiration of the prescribed period of time, or number of treatments for medical care, including care for behavioral, mental health, and/or substance use disorders, Sanford Health Plan will treat it as an Urgent Prospective (Pre-service) Review decision and make the decision as soon as possible (taking into account the medical exigencies) but no later than *seventy-two (72) hours* after the request. For authorizations/approvals and denials, the Plan will give telephone notification of the decision to the Member, Practitioner and those Providers involved in the provision of the service within *seventy-two (72) hours* of receipt of the request. The Plan will give written or electronic notification of the decision to the Member, Practitioner and those Providers involved in the provision of the service as soon as possible but no later than within *three (3) calendar* days of the telephone notification.

If the Plan's determination is an Adverse Determination, the Plan shall provide written notice in accordance with the *Written Notification Process for Adverse Determinations* procedures outlined below. At this point, the Member can request an Appeal of Adverse Determination. Refer to the "*Problem Resolution*" in Section 8 for details.

Retrospective (Post-service) Review Process for Medical Care Requests

Retrospective (Post-service) Review is used by Sanford Health Plan for medical care, including care for behavioral, mental health, and/or substance use disorders to review services that have already been utilized by the Member where such services have not involved a Prospective (Pre-service) Review request, and where the review is not limited to the veracity of documentation, accuracy of coding, or adjudication for payment. The Plan will review the request and make the decision to approve or deny within *thirty (30)* calendar days of receipt of the request. Written or electronic notification will be made to the Member, Practitioner and those Providers involved in the provision of the service within *thirty (30) calendar* days of receipt of the request. In cases where the Member is not at financial risk, Members will not be notified of an Adverse Determination. Members will be notified in all other cases.

If the Utilization Management Department is unable to make a decision due to matters beyond its control, it may extend the decision timeframe once, for up to *fifteen (15)* calendar days. Within *thirty (30)* calendar days of the request for review, Sanford Health Plan must notify the Member or Member's Authorized Representative of the need for an extension and the date by which it expects to make a decision.

Lack of Necessary Information

If the Utilization Management Department is unable to make a decision due to lack of necessary information, it must notify the Member or the Member's Authorized Representative of what specific information is necessary to make the decision within *thirty (30) calendar* days of the Retrospective (Post-service) Review request. Sanford Health Plan must give the Member or the Member's Authorized Representative *forty-five (45)* calendar days to provide the specified information. In lieu of notifying the Member, the Plan can notify the Practitioner of the information needed if the request for health care services came from the Practitioner. The decision time period is suspended from the date of the notification to the Member or Practitioner as applicable, until the earlier of the date on which the Plan receives any information from the Member or Practitioner or *forty-five (45)* days after the notification to the Member or Practitioner. A decision and written or electronic

notification to the Member, Practitioner and those Providers involved in the provision of the service will be made within *fifteen (15)* calendar days of that date. If the information is not received by the end of the *forty-five (45)* calendar day extension Sanford Health Plan will issue an Adverse Determination and written or electronic notification will be made to the Member, Practitioner and those Providers involved in the provision of the service within *fifteen (15)* calendar days.

If the Plan's determination is an Adverse Determination, the Plan shall provide written notice in accordance with the *Written Notification Process for Adverse Determinations* procedure below. At this point, the Member can request an Appeal of Adverse Determinations. Refer to the "Problem Resolution" in Section 8 for details.

Written Notification Process for Adverse Determinations

The written notifications for Adverse Determinations will include the following:

1. The specific reason for the Adverse Determination in easily understandable language.
2. Reference to the specific internal plan rule, provision, guideline, or protocol on which the determination was based and notification that the Member will be provided a copy of the actual plan provisions, guidelines, and protocols free of charge upon request. Reasons for any denial or reimbursement or payment for services with respect to benefits under the plan will be provided within 30 business days of a request.
3. If the Adverse Determination is regarding coverage for a mental health and/or substance use disorder, a statement notifying members of their opportunity to request treatment and diagnosis code information free of charge. Any request for diagnosis and treatment code information may not be (and is not) considered a request for an internal appeal or external review.
4. If the Adverse Determination is based in whole or in part upon the Member failing to submit necessary information, the notice shall include, a description of any additional material or information which the Member failed to provide to support the request, including an explanation of why the material is necessary.
5. If the Adverse Determination is based on medical necessity or an Experimental or Investigational treatment or similar exclusion or limit, either an explanation of the scientific or clinical judgment for making the determination, applying the terms of the Plan to the Member's medical circumstances or a statement that an explanation will be provided to the Member free of charge upon request.
6. For Mental Health and/or Substance Use Disorder (MH/SUD) Adverse Determinations, if information on any medical necessity criteria is requested, documents will be provided for both MH/SUD and medical/surgical benefits within 30 business days of a Member/Member's Authorized Representative/Provider's request. This information will include documentation of processes, strategies, evidentiary standards and other factors used by the plan, in compliance with the Mental Health Parity and Addiction Equity Act of 2008 (MHPAEA).
7. If the Adverse Determination is based on medical necessity, a written statement of clinical rationale, including clinical review criteria used to make the decision if applicable. If the denial is due to a lack of clinical information, a reference to the clinical criteria that have not been met must be included in the letter. If there is insufficient clinical information to reference a specific clinical practice guideline or policy, the letter must state the inability to reference the specific criteria and must describe the information needed to render a decision.
8. A description of the Plan's Appeal procedures including how to obtain an expedited review if necessary and any time limits applicable to those procedures, the right to submit written comments, documents or other information relevant to the appeal; an explanation of the Appeal process including the right to member representation; how to obtain an Expedited review if necessary and any time limits applicable to those procedures; notification that Expedited External Review can occur concurrently with the internal Appeal process for urgent care/ongoing treatment; and the timeframe the Member has to make an appeal and the amount of time the Plan has to decide it (including the different timeframes for Expedited Appeals).
9. If the Adverse Determination is based on medical necessity, notification and instructions on how the Practitioner can contact the appropriate Practitioner and/or Provider to discuss the determination.
10. If a determination is adverse, the right to bring a civil action in a court of competent jurisdiction.
11. To contact the North Dakota Insurance Commissioner at any time at:

    North Dakota Insurance Department
    600 E. Boulevard Ave.
    Bismarck, ND 58505-0320

    Email: insurance@nd.gov
    Consumer hotline: (800) 247-0560 *(toll-free)*
    TTY: (800) 366-6888 *(toll-free)*

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Section 5(a) Medical services and supplies provided by health care Practitioners and Providers

IMPORTANT

Here are some important things you should keep in mind about these benefits:

Please remember that all benefits are subject to the definitions, limitations, and exclusions in this Certificate of Insurance and are payable only when we determine they are Medically Necessary.

Be sure to read Section 4, "How you get care", for valuable information about conditions for coverage.

You or your Practitioner and/or Provider must get Preauthorization/Prior Approval for some services in this Section. The benefit description will say "**Note:** Preauthorization/Prior Approval is required" for certain services. Failure to get Preauthorization/Prior Approval may result in a reduction or denial of benefits (See Services requiring Preauthorization/Prior Approval in Section 4.)

IMPORTANT

Benefit Description

Diagnostic and treatment services

Note: You or your Practitioner and/or Provider must get Preauthorization/Prior Approval of these services; Failure to get Preauthorization/ Prior Approval may result in a reduction or denial of benefits (See Services requiring Preauthorization/Prior Approval in Section 4.):

- Inpatient Hospital stays, Outpatient surgical procedures, and Skilled Nursing Facility stays

Professional services are covered from Practitioners, Providers, Physicians, nurse practitioners, and Physician's assistants when received:

- In Practitioner and/or Provider's office, an urgent care center; as well as medical office consultations, and second surgical opinions

Lab, X-ray and other diagnostic test coverage includes:

- Blood tests
- Urinalysis
- Non-routine pap tests
- Non-routine PSA tests
- Pathology
- X-rays
- PET Scans
- DEXA Scans
- Non-routine mammograms
- CT Scans/MRI
- Ultrasound
- Electrocardiogram (EKG)
- Electroencephalography (EEG)

Not Covered: *Thermograms or thermography*

Preventive care, adults & children

§2713 of the Public Health Service Act (PHS Act) and its implementing regulations relating to coverage of preventive services, the following services, when received from a Participating Provider, are covered without payment of any deductible, copayment, or coinsurance requirement that would otherwise apply:

1. Evidenced-based items or services that have in effect a rating of "A" or "B" in the current recommendations of the United States Preventive Services Task Force (USPSTF) with respect to the individual involved, except for the recommendations of the USPSTF regarding breast cancer screening, mammography, and prevention issued in or around November 2009;
2. Immunizations for routine use in children, adolescents, and adults that have in effect a recommendation from the Advisory Committee on Immunization Practices (ACIP) of the Centers for Disease Control and Prevention (CDC) with respect to the individual involved;
3. With respect to infants, children, and adolescents, evidence-informed preventive care and screenings provided for in comprehensive guidelines supported by the Health Resources and Services Administration (HRSA); and
4. With respect to women, evidence-informed preventive care and screening provided for in comprehensive guidelines supported by HRSA, to the extent not included in certain recommendations of the USPSTF. You do not need Preauthorization/Prior Approval from the Plan, or any other person, in order to obtain access to obstetrical and/or gynecological care through a participating provider.

The above is an overview of preventive services covered by the Plan. As recommendations change, your coverage may also change. To view the Plan's *Preventive Health Guidelines*, visit www.sanfordhealthplan.com/ndpers. You may also request a copy by calling Member Services at (800) 499-3416 *(toll-free)* | TTY/TDD: (877) 652-1844 *(toll-free)*.

Not Covered:

- *Pre-employment and employment physicals, insurance physicals, or government licensing physicals (including, but not limited to, physicals and eye exams for driver's licenses)*
- *Virtual colonoscopies*

Wellness nutritional counseling services

Benefits are available for the following medical conditions:

- **Hyperlipidemia** – Maximum Benefit Allowance of four (4) Office Visits per Member per Benefit Period.
- **Gestational Diabetes** – Maximum Benefit Allowance of four (4) Office Visits per Member per Benefit Period.
- **Diabetes Mellitus** – Maximum Benefit Allowance of four (4) Office Visits per Member per Benefit Period.
- **Hypertension** – Maximum Benefit Allowance of two (2) Office Visits per Member per Benefit Period.
- **Obesity** – Maximum Benefit Allowance of four (4) Office Visits per Member per Benefit Period.

Not Covered:

- *Education Programs or Tutoring Services (not specifically defined elsewhere) including, but not limited to, education on self-care or home management*
- *Lifestyle Improvement Services, such as physical fitness programs, health or weight loss clubs or clinics*

Maternity care

Note: Due to the inability to predict admission; you or your Practitioner and/or Provider are encouraged to notify the Plan of your expected due date when the pregnancy is confirmed. You are also encouraged to notify the Plan of the date of scheduled C-sections when it is confirmed.

Covered maternity services include:

- Screening for gestational diabetes mellitus during pregnancy
  - Testing includes a screening blood sugar followed by a glucose tolerance test if the sugar is high.
  - Outpatient Nutrition Care Services available for gestational diabetes and diabetes mellitus. See *Wellness Nutritional Counseling* in this Section.
- Anemia screening
- Bacteruria (bacteria in urine) screening
- Hepatitis B screening
- Rh (Rhesus) incompatibility screening: first pregnancy visit and 24-28 weeks gestation
- Genetic counseling or testing that has in effect a rating of "A" or "B" in the current recommendations of the United States Preventive Services Task Force. *Preauthorization/Prior Approval is required.*
- Prenatal vitamins without Cost Sharing if prescribed by a Practitioner
- Deductible for delivery services is waived if services are rendered at a PPO Provider, and the Member is enrolled in Sanford Health Plan's *Healthy Pregnancy Program*.
- Preeclampsia prevention

Maternity care includes prenatal through postnatal maternity care and delivery and care for complication of pregnancy of mother. We cover up to four (4) routine ultrasounds per pregnancy to determine fetal age, size, and development, per plan guidelines.

The minimum inpatient Hospital stay, when complications are not present, ranges from a minimum of *forty-eight (48)* hours for a vaginal delivery to a minimum of *ninety-six (96)* hours for a cesarean birth, excluding the day of delivery. Such inpatient stays may be shortened if the treating Practitioner and/or Provider, after consulting with the mother, determines that the mother and child meet certain criteria and that discharge is medically appropriate. If the inpatient stay is shortened, a post-discharge follow-up visit shall be provided to the mother and newborn by Participating Practitioners and/or Providers competent in postpartum care and newborn assessments.

Breastfeeding support, supplies and counseling are covered in the following manner:

- One (1) breast pump (electric or manual, non-Hospital grade) per pregnancy. Replacement tubing, breast shields, and splash protectors are also covered.
  - Pumps and supplies are covered only when obtained from a Sanford Health Plan Participating durable medical equipment Provider. This does NOT include drugstores or department stores.
  - Bottles, breast milk storage bags and supplies related to bottles are NOT covered.
- Consultation with a lactation (breastfeeding) specialist is covered at 100% (no charge)

Note: We encourage you to participate in our *Healthy Pregnancy Program*; Call (888) 315-0885 *(toll-free)* or TTY/TDD: (877) 652-1844 *(toll-free)* to enroll.

Not Covered: *Amniocentesis or chorionic villi sampling (CVS) solely for sex determination*

Healthy Pregnancy Program – DETAILS

The *Healthy Pregnancy Program* is designed to identify women at higher risk for premature birth and to prevent the incidence of preterm birth through assessment, intervention and education. Participation in the *Healthy Pregnancy Program* is voluntary and free to all Members in the Plan.

To enroll, call Sanford Health Plan's Care Management Department at (877) 652-1847 *(toll-free)* | TTY/TDD: (877) 652-1844 *(toll-free)* after the first prenatal visit, preferably before the 12th week and no later than the 34th week. You may also send a secure message to the Plan by signing into your account at www.sanfordhealthplan.com/memberlogin, and a representative from the Care Management Department will contact you to complete your enrollment in the program.

Enrolling in the Healthy Pregnancy Program is easy and free to the Member. When a Member enrolls, a Case Manager will review a brief preterm labor risk assessment questionnaire with the Member. To complete this questionnaire, Members will need their Member ID number; Professional Health Care Provider's name, address and telephone number; and expected due date.

As a program participant, the Member will receive information concerning pregnancy and prenatal car**e.**

Note: When a Member is enrolled under the Healthy Pregnancy Program, the Deductible Amount is waived for delivery services received from a PPO Health Care Provider.

Newborn care

A newborn is eligible to be covered from birth. Members must complete NDPERS designated enrollment within *thirty-one (31)* days of the infant's birth if enrolled in Single Coverage. If the Subscriber is already enrolled in Family Coverage, the newborn will automatically be added to the Certificate if the Plan was aware of the pregnancy. The Subscriber should confirm enrollment of the new child with the Plan. For

further details, see Section 3.

We cover care for the enrolled newborn child from the moment of birth including care and treatment for illness, injury, premature birth and medically diagnosed congenital defects and birth abnormalities (Please refer to "Reconstructive Surgery" in Section 5(a) for coverage information of surgery to correct congenital defects).

Not Covered: *Newborn delivery and nursery charges for adopted dependents prior to the adoption-bonding period (See Section 3, "When Dependent Coverage Begins.")*

Family planning benefits

Family Planning Services include consultations, and pre-pregnancy planning. The following medications, services and devices are covered:

- Barrier methods: diaphragm and cervical cap fitting and purchase.
- We cover implantable devices; including Mirena and ParaGard intrauterine devices. Placement and removal is covered once every five (5) years or as medically necessary.
- We cover sterilizations, including voluntary tubal ligations and vasectomies:
  - Medical – Occlusion of the fallopian tubes by use of permanent implants (e.g. Essure).
  - Surgical – Tubal ligation covered at 100% of allowed only when performed as the primary procedure. When performed as part of a maternity delivery or for any other medical reason, it will be covered as a medical benefit with the applicable cost-share applied.
- Generic contraceptives are covered at 100% (no cost). If no generic equivalent exists for a formulary brand-name contraceptive, then that contraceptive is covered at 100% (no cost) per the Affordable Care Act. (See your Pharmacy Handbook/Formulary)
- Other contraceptives including injectable medroxyprogesterone acetate and emergency contraception with a written prescription (generic Plan B) are also covered at 100% (no cost).
- Folic acid supplements are covered at 100% (no cost) for women planning to become pregnant or in their childbearing years if obtained with a written prescription order, per Plan guidelines.

Not Covered:

- *Genetic counseling or testing except for services that have a rating of "A" or "B" in the current recommendations of the United States Preventive Services Task Force; Preauthorization/Prior Approval is required)*
- *Reproductive Health Care Services prohibited by the laws of This State*
- *Elective abortion services*
- *Reversal of voluntary sterilization*

Infertility services

Note: Preauthorization/Prior Approval is required for assisted reproductive technology for GIFT, ZIFT, ICSI and IVF; failure to get Preauthorization/Prior Approval may result in a reduction or denial of benefits. (See Services requiring Preauthorization/Prior Approval in Section 4.)

- Benefits are available for services, supplies and medications related to artificial insemination (AI) and assisted reproductive technology (ART), includes gamete intrafallopian transfer (GIFT), zygote intrafallopian transfer (ZIFT), intracytoplasmic sperm injection (ICSI) or in vitro fertilization (IVF). Preauthorization/Prior Approval *is required.*

Note: Benefits are subject to a $500 Lifetime Infertility Services Deductible Amount and a $20,000 Lifetime Maximum per Member. This Coinsurance Amount and the Infertility Services Deductible Amount do not apply toward the Out-of-Pocket Maximum Amount.

Not Covered:

- *Donor eggs including any donor treatment and retrieval costs, donor sperm, cryopreservation or storage of unfertilized sperm or eggs; Surrogate pregnancy and delivery; Gestational Carrier pregnancy and delivery; and preimplantation genetic diagnosis testing;*
- *Reversals of prior sterilization procedures; and*
- *Any expenses related to surrogate parenting.*

Allergy care

We cover:

- Testing and treatment
- Allergy injections
- Allergy serum

Not Covered:

- *The following allergy testing modalities: nasal challenge testing, provocative/neutralization testing for food and food additive allergies, leukocyte histamine release, Rebuck skin window test, passive transfer or Prausnitz-Kustner test, cytotoxic food testing, metabisulfite testing, candidiasis hypersensitivity syndrome testing, IgG level testing for food allergies, general volatile organic screening test and mauve urine test.*
- *Methods of desensitization treatment: provocation/neutralization therapy for food/chemical or inhalant allergies by sublingual, intradermal and subcutaneous routes, Urine Autoinjections, Repository Emulsion Therapy, Candidiasis Hypersensitivity Syndrome Treatment or IV Vitamin C Therapy.*
- *Clinical ecology, orthomolecular therapy, vitamins (unless listed as covered elsewhere in this COI) or dietary nutritional supplements, or related testing provided on an inpatient or outpatient basis.*

Diabetes supplies, equipment, and education

- Blood glucose monitors, including continuous glucose monitoring systems (CGM), *Preauthorization/Prior Approval is required*
- Blood glucose monitors for the legally blind
- Test strips for glucose monitors
- Urine testing strips
- Dilated Eye Examination, *limited to one (1) examination per Member per Benefit Period*
- Glucagon kits
- Insulin infusion devices, *Preauthorization/Prior Approval is required*
- Prescribed oral agents for controlling blood sugars
- Glucose agents
- Custom diabetic shoes and inserts limited to *one (1) pair* of depth-inlay shoes and *three (3) pairs* of inserts; or *one (1) pair* of custom molded shoes (including inserts) and *three (3)* additional pairs of inserts
- Syringes
- Insulin measurement and administration aids for the visually impaired and other medical devices for the treatment of diabetes
- Routine foot care, including toe nail trimming
- Insulin pumps and all supplies for the pump, *Preauthorization/Prior Approval is required*
- Insulin injection aids
- Lancets and lancet devices

See *Wellness Nutritional Counseling* in this Section. Diabetes self-management training and education services shall only be covered if:

- the service is provided by a Physician, nurse, dietitian, pharmacist or other licensed health care Practitioner and/or Provider who satisfies the current academic eligibility requirements of the National Certification Board for Diabetic Educators and has completed a course in diabetes education and training or has been certified by a diabetes educator; and
- the training and education is based upon a diabetes program recognized by the American Diabetes Association or a diabetes program with a curriculum approved by the American Diabetes Association or the North Dakota Department on Health.

Not Covered: *Food items for medical nutrition therapy*

Dialysis

Dialysis for renal disease, unless or until the Member qualifies for federally funded dialysis services under the End Stage Renal Disease (ESRD) program. Services include equipment, training, and medical supplies required for effective dialysis care. See *Outpatient Nutrition Care Services* in this Section for additional Chronic Renal Failure benefits. Coordination of Benefit (COB) Provisions apply. For more information on COB, please see Section 9.

Treatment therapies

We cover:

- Inhalation Therapy
- Radiation Therapy
- Chemotherapy, regardless of whether the Member has separate prescription drug benefit coverage
- Pheresis Therapy

Phenylketonuria (PKU)

Testing, diagnosis and treatment of Phenylketonuria including dietary management, formulas, Case Management, intake and screening, assessment, comprehensive care planning and service referral.

Not Covered:

- *PKU dietary desserts and snack items*
- *Low protein modified food products or medical food for PKU to the extent those benefits are available under a Department of Health program or other state agency*

Amino acid-based elemental oral formulas

Coverage for medical foods and low-protein modified food products determined by a Practitioner and/or Provider to be medically necessary for the therapeutic treatment of an inherited metabolic disease of amino acid or organic acid.

Not Covered:

- *Dietary desserts and snack items*
- *Low protein modified food products or medical food for PKU to the extent those benefits are available under a Department of Health program or other state agency*

Outpatient nutritional care services

Benefits are available for the following medical conditions:

- **Chronic Renal Failure** – Maximum Benefit Allowance of four (4) Office Visits per Member per Benefit Period.
- **Anorexia Nervosa** – Maximum Benefit Allowance of four (4) Office Visits per Member per Benefit Period.
- **Bulimia** – Maximum Benefit Allowance of four (4) Office Visits per Member per Benefit Period.
- **PKU** – Maximum Benefit Allowance of four (4) Office Visits per Member per Benefit Period.

Not Covered:

- *Education Programs or Tutoring Services (not specifically defined elsewhere) including, but not limited to, education on self-care or home management*
- *Lifestyle Improvement Services, such as physical fitness programs, health or weight loss clubs or clinics*

Outpatient rehabilitative and habilitative therapy services

Coverage is as follows for outpatient rehabilitative and habilitative therapy services, which include the management of limitations and disabilities, and services or programs that help maintain or prevent deterioration in physical, cognitive, or behavioral function:

- **Physical Therapy:** Benefits are subject to medical necessity and performed by or under the direct supervision of a licensed Physical Therapist. Services must be provided in accordance with a prescribed plan of treatment ordered by a Professional Health Care Provider.
  - Physical therapy and Vitamin D supplements with a prescription order are covered at 100% (no cost) for Members ages 65 and older who are at increased risk for falls. Benefits are subject to medical necessity.
- **Occupational Therapy:** Benefits are available for 90 consecutive calendar days per condition, beginning on the date of the first therapy treatment for the condition. Additional benefits may be allowed after the 90 days when Medically Necessary. Benefits are available when performed by or under the direct supervision of a licensed Occupational Therapist. Services must be provided in accordance with a prescribed plan of treatment ordered by a Professional Health Care Provider.
- **Speech Therapy:** Benefits are available for 90 consecutive calendar days per condition, beginning on the date of the first therapy treatment for the condition. Additional benefits may be allowed after the 90 days when Medically Necessary. Benefits are available when performed by or under the direct supervision of a certified and licensed Speech Therapist. Services must be provided in accordance with a prescribed plan of treatment ordered by a Professional Health Care Provider.
- **Respiratory/Pulmonary Therapy:** Available when services are performed by or under the direct supervision of a registered respiratory care practitioner for the treatment, management, control and care of Members with deficiencies and abnormalities of the cardiorespiratory system. Services must be provided in accordance with an order from a Professional Health Care Provider.
- **Cardiac Rehabilitation Services:** Cardiac Rehabilitation Services must begin within 2 months following discharge from the Hospital. Twelve (12) visits per Member per episode, limited to the following diagnosed medical conditions:
  - Myocardial Infarction
  - Coronary Artery Bypass Surgery
  - Coronary Angioplasty and Stenting
  - Heart Valve Surgery
  - Heart Transplant Surgery

Not Covered:

- *Educational or non-medical services for learning disabilities and/or behavioral problems, including those educational or non-medical services provided under the Individuals with Disabilities Education Act (IDEA)*
- *Maintenance Care that is typically long-term, by definition not therapeutically necessary but is provided at regular intervals to promote health and enhance the quality of life; this includes care provided after maximum therapeutic improvement, without a trial of withdrawal of treatment, to prevent symptomatic deterioration or initiated by Members without symptoms in order to promote health and to prevent further problems, unless specifically stated as covered elsewhere in this Certificate of Insurance*
- *Services provided in the Member's home for convenience*
- *Hot/cold pack therapy including polar ice therapy and water circulating devices*

Hearing services (testing, treatment, and supplies)

Hearing services coverage is provided for the following:

- Sudden sensorineural hearing loss (SSNHL), and diagnostic testing and treatment related to acute illness or injury.

Note: Preauthorization/Prior Approval is required for the following services; failure to get Preauthorization/Prior Approval may result in a reduction or denial of benefits. (See Services requiring Preauthorization/Prior Approval in Section 4.):

1. External hearing aids for the treatment of a hearing loss that is not due to the gradual deterioration that occurs with aging and/or other lifestyle factors.
   a. Benefit is limited to one hearing aid, per ear, per Member, every three (3) years, in alignment with medical necessity and Plan guidelines.
   b. The provision of hearing aids must meet criteria for rehabilitative and/or habilitative services coverage and either:
      i. provide significant improvement to the Member within two (2) months, as certified on a prospective and timely basis by the Plan; or
      ii. help maintain or prevent deterioration in physical, cognitive, or behavioral function.
2. Hearing aids for Members under age 18.
3. Cochlear implants and bone-anchored (hearing aid) implants.

Not Covered:

- *Treatment of gradual deterioration of hearing that occurs with aging and/or other lifestyle factors, and related adult hearing screening services, testing and supplies*
- *For Members ages 18 and older, external hearing aids; non-implant devices; or equipment to correct gradual hearing impairment or loss that occurs with aging and/or other lifestyle factors*
- *Tinnitus Maskers*
- *All other hearing related supplies, purchases, examinations, testing or fittings*

Vision services (testing, treatment, and supplies)

The following vision services are covered:

- Non-routine vision exams relating to disease or injury of the eye
- Eyeglasses or contact lenses for Members diagnosed with aphakia (the absence of the lens of the eye, due to surgical removal, a perforated wound or ulcer, or a congenital condition resulting in complications which include the detachment of the vitreous or retina, and glaucoma)
- Eyeglasses, including lenses and one frame per lifetime up to up to a net allowance of $200 or clear contact lenses for the aphakia eye will be covered for *two (2)* single lens per calendar year
- Scleral Shells: Soft shells limited to *two (2)* per calendar year. Hard shells limited to *one (1)* per lifetime
- Cataract Surgery
- One (1) pair of eyeglasses or contact lenses per Member when purchased within 6 months following a covered cataract surgery
- Visual Training for Members under age 10. Benefits are subject to an Annual Maximum of 16 visits per Member.
- Dilated Eye Examination for Members with Diabetes, limited to one (1) examination per Member per Benefit Period

Not Covered:

- *Adult vision exams (routine)*
- *Eyeglasses or contact lenses and the vision examination for prescribing or fitting eyeglasses or contact lenses, unless specified as Covered elsewhere in this Certificate of Insurance*
- *Refractive errors of the eye*
- *Refractive eye surgery when used in otherwise healthy eyes to replace eyeglasses or contact lenses*
- *Purchase, examination, or fitting of eyeglasses or contact lenses, except as specifically covered elsewhere*
- *Radial Keratotomy, Myopic Keratomileusis, and any surgery involving corneal tissue for the purpose of altering, modifying, or correcting myopia, hyperopia, or stigmatic error*
- *Replacement of lost, stolen, broken, or damaged lenses or glasses*
- *Bifocal contact lenses*
- *Special lens coating or lens treatments for prosthetic eyewear*
- *Routine cleaning of Scleral Shells*
- *Services or supplies determined by the Plan to be special or unusual, including orthoptics, vision training and vision aids (except for Members under the age of ten (10)*

Foot care

Routine foot care covered for Members with diabetes only. See Section 5(a) *Diabetes supplies, equipment, and education* for more information on Plan policies.

Non-routine diagnostic testing and treatment of the foot due to illness or injury

Note: See Section on *Orthotic and prosthetic devices* below for information on podiatric shoe inserts.

Not Covered:

- *Cutting, removal, or treatment of corns, calluses, or nails for reasons other than authorized corrective surgery (except as stated above and in Section 5(a) "Diabetes supplies, equipment, and education")*
- *Diagnosis and treatment of weak, strained, or flat feet*

Orthotic and prosthetic devices

Prosthetic limbs, sockets and supplies, and prosthetic eyes limited to *one (1)* per lifetime

Externally worn breast prostheses and surgical bras, including necessary replacements following a mastectomy. Includes *two (2)* external prosthesis per Calendar Year and *two (2)* bras per Calendar Year. For double mastectomy: coverage extends to *four (4)* external prosthesis per Calendar Year and *two (2)* bras per Calendar Year.

Adjustments and/or modification to the prosthesis required by wear/tear or due to a change in Member's condition or to improve the function are eligible for coverage and do not require Preauthorization/Prior Approval.

Repairs necessary to make the prosthetic functional are covered and do not require authorization/approval. The expense for repairs is not to exceed the estimated expense of purchasing another prosthesis.

Note: The following requires Preauthorization/Prior Approval; failure to get Preauthorization/Prior Approval may result in a reduction or denial of benefits. (See Services requiring Preauthorization/Prior Approval in Section 4.):

- Cochlear implants and related services
- Devices permanently implanted that are not Experimental or Investigational such as artificial joints, pacemakers, and surgically implanted breast implant(s) following mastectomy.

Note: Internal prosthetic devices are paid as Hospital benefits; see Section 5(b) for benefit information. Insertion of the device is paid under the surgery benefit.

Not Covered:

- *Experimental and/or Investigational services or devices except as part of an Approved Clinical Trial*
- *Revision/replacement of prosthetics (except as noted per Plan guidelines (available upon request))*
- *Replacement or repair of items, if the items are damaged or destroyed by the Member's misuse, abuse or carelessness, lost, or stolen*

- *Duplicate or similar items*
- *Service call charges, labor charges, charges for repair estimates*
- *Wigs, cranial prosthesis, or hair transplants*
- *Cleaning and polishing of prosthetic eye(s)*

Durable medical equipment (DME)

Covered DME equipment prescribed by an attending Practitioner and/or Provider, which is Medically Necessary, not primarily and customarily used for non-medical purposes, designed for prolonged use, and for a specific therapeutic purpose in the treatment of an illness or injury. Limitations per Plan policy guidelines apply (available upon request).

Casts, splints, braces, crutches and dressings for the treatment of fracture, dislocation, torn muscles or ligaments and other chronic conditions per Plan guidelines (available upon request).

Note: The following DME require Preauthorization/Prior Approval; failure to get Preauthorization/Prior Approval may result in a reduction or denial of benefits. (See Services requiring Preauthorization/Prior Approval in Section 4.):

- Respiratory equipment such as ventilators, pleural catheters, hand-held battery operated nebulizers, and suction pumps
- Gastrointestinal equipment such as TPN enteral supplies and formula, parenteral nutrition, and suction pumps
- Beds such as Hospital beds and mattresses
- Musculoskeletal equipment such as neuromuscular stimulators, and bone growth stimulators
- Integumentary supplies such as wound vacuum systems
- Wheelchairs
- Home IV therapy supplies and medications
- Repair, replacement, and periodic maintenance of durable medical equipment

This list is not all-inclusive and is subject to change per Plan policy updates.

Not Covered:

- *Orthopedic shoes; custom made orthotics; over-the-counter orthotics and appliances*
- *Disposable supplies (including diapers) or non-durable supplies and appliances, including those associated with equipment determined not to be eligible for coverage*
- *Revision of durable medical equipment, except when made necessary by normal wear or use*
- *Replacement or repair of equipment if items are damaged or destroyed by Member misuse, abuse, or carelessness, lost, or stolen*
- *Duplicate or similar items*
- *Sales tax, mailing, delivery charges, service call charges, or charges for repair estimates*
- *Items which are primarily educational in nature or for vocation, comfort, convenience or recreation*
- *Household equipment which primarily has customary uses other than medical, such as, but not limited to, air purifiers, central or unit air conditioners, water purifiers, non-allergic pillows, mattresses or waterbeds, physical fitness equipment, hot tubs, or whirlpools*
- *Household fixtures including, but not limited to, escalators or elevators, ramps, swimming pools and saunas*
- *Home Modifications including, but not limited to, its wiring, plumbing or changes for installation of equipment*
- *Vehicle modifications including, but not limited to, hand brakes, hydraulic lifts, and car carrier*
- *Remote control devices as optional accessories*
- *Any other equipment and supplies which the Plan determines are not eligible for coverage*

Home health services

Note: Preauthorization/Prior Approval is required; failure to get Preauthorization/Prior Approval may result in a reduction or denial of benefits. (See Services requiring Preauthorization/Prior Approval in Section 4.)

Member must be home-bound to receive home health services. The following is covered if approved by the Plan in lieu of Hospital or Skilled Nursing Facility:

- part-time or intermittent care by a RN or LPN/LVN
- part-time or intermittent home health aide services for direct patient care only
- physical, occupational, speech, inhalation, and intravenous therapies up to the maximum benefit allowable
- medical supplies, prescribed medicines, and lab services, to the extent they would be covered if the Member were Hospitalized

Not Covered:

- *Nursing care requested by, or for the convenience of the patient or the patient's family (rest cures)*
- *Custodial or convalescent care*

Chiropractic services

Chiropractic services provided on an inpatient or outpatient basis when Medically Necessary as determined by Sanford Health Plan and within the scope of licensure and practice of a Chiropractor, to the extent services would be covered if provided by a Physician. Benefits are not available for Maintenance Care.

Not Covered:

- *Maintenance Care;*
- *Vitamins (unless listed as covered elsewhere in this COI), minerals, therabands, cervical pillows, and hot/cold pack therapy including polar ice therapy and water circulating devices*

Tobacco cessation treatment services

As defined in the Affordable Care Act, evidence-based items or services that have in effect a rating of "A" or "B" in the current recommendations of the United States Preventive Services Task Force when received from an In-Network provider are covered without payment of any deductible, copayment, or coinsurance requirement that would otherwise apply. Tobacco cessation treatment includes:

- Screening for tobacco use; and
- At least two (2) tobacco cessation attempts per year (for participants who use tobacco products). Covering a cessation attempt is defined to include coverage for:
  - Four (4) tobacco cessation counseling sessions of at least ten (10) minutes each (including telephone counseling, group counseling and individual counseling) without Preauthorization/Prior Approval, and
  - All Food and Drug Administration (FDA)-approved tobacco cessation medications (including both prescription and over-the-counter medications) for a 90-day treatment regimen when prescribed by a health care provider without Preauthorization/Prior Approval.

Not Covered: *Hypnotism and Acupuncture*

Reconstructive surgery

Note: The following services require Preauthorization/Prior Approval; failure to get Preauthorization/Prior Approval may result in a reduction or denial of benefits. (See Services requiring Preauthorization/Prior Approval in Section 4.)

- Surgery to restore bodily function or correct a deformity caused by illness or injury
- If you have had or are going to have a mastectomy, you may be entitled to certain benefits under the Women's Health and Cancer Rights Act of 1998 (WHCRA). Coverage for mastectomy related benefits will be provided in a manner determined in consultation with the attending Practitioner and/or Provider and Member. Coverage will be provided for reconstructive breast surgery and physical complications at all stages of a mastectomy, including lymphedema for those Members who had a mastectomy resultant from a disease, illness, or injury. Breast prostheses and surgical bras and replacements are also covered (see Prosthetic devices in Section 5(a)). Deductible and coinsurance applies as outlined in your *Summary of Benefits and Coverage*.

  Note: For single mastectomies, coverage extends to the non-affected side to make it symmetrical with the affected breast post-surgical reconstruction.

Not Covered:

- *Surgeries related to gender transformation/gender reassignment*
- *Cosmetic Services and/or supplies to repair or reshape a body structure primarily for the improvement of a Member's appearance or psychological well-being or self-esteem, including but not limited to, breast augmentation, skin disorders, rhinoplasty, liposuction, scar revisions, and cosmetic dental services*
- *Removal, revision or re-implantation of saline or silicone implants for: breast implant malposition; unsatisfactory aesthetic outcome; patient desire for change of implant; patient fear of possible negative health effects; or removal of ruptured saline implants that do not meet medical necessity criteria.*
- *Prophylactic (preventive) surgeries (i.e. mastectomy, oophorectomy)*

Oral and maxillofacial surgery

Note: The following services require Preauthorization/Prior Approval; failure to get Preauthorization/Prior Approval may result in a reduction or denial of benefits. (See Services requiring Preauthorization/Prior Approval in Section 4.)

- Oral surgical procedures limited to services required because of injury, accident or cancer that damages Natural Teeth
- Care must be received within *six (6)* months of the occurrence
- Orthognathic Surgery per Plan guidelines (available upon request)
- Associated radiology services are included
- Diagnosis and treatment for Temporomandibular Joint (TMJ) Dysfunction and/or Temporomandibular Disorder (TMD) and TMJ splints and adjustments if your primary diagnosis is TMJ/TMD.
- Preauthorization/Prior Approval is required for dental anesthesia for Members over age nine (9) and/or Members with a developmental disability, as determined by a licensed Practitioner and/or Provider, which places such a person at serious risk.
- "Injury" does not include injuries to Natural Teeth caused by biting or chewing
- Coverage applies regardless of whether the services are provided in a Hospital or a dental office

Note: For more information on Dental Services, see Section 5(f).

Note: Dental care Anesthesia and Hospitalization for the extraction of teeth is covered for a Member who:

a. is a child under age nine (9); or
b. is severely disabled or otherwise suffers from a developmental disability, or
c. has high risk medical condition(s) as determined by a licensed Practitioner and/or Provider, which places such a person at serious risk.

Not Covered:

- *Routine dental care and treatment*
- *Natural teeth replacements including crowns, bridges, braces or implants*
- *Osseointegrated implant surgery (dental implants)*
- *Extraction of wisdom teeth*
- *Hospitalization for extraction of teeth except as stated above in this subsection*

- *Dental x-rays or dental appliances*
- *Shortening of the mandible or maxillae for cosmetic purposes*
- *Services and supplies related to ridge augmentation, implantology, and Preventive vestibuloplasty*
- *Dental appliances of any sort, including but not limited to bridges, braces, and retainers (except for appliances for treatment of TMJ/TMD)*

Transplant services

Note: Preauthorization/Prior Approval is required; failure to get Preauthorization/Prior Approval may result in a reduction or denial of benefits. (See Services requiring Preauthorization/Prior Approval in Section 4.)

Coverage is provided for the organ donor expenses under the transplant recipient's benefit plan when billed under the transplant recipient's name when the recipient of the transplant meets ALL of the following criteria:

a. Is eligible for coverage under the Plan;
b. Has a condition for which the proposed transplant is considered medically necessary;
c. Meets the Plan's medical coverage guidelines for transplant; and
d. The charges are not covered by the donor's own benefit plan, by another group health plan or other coverage arrangement.

Coverage is provided for transplants according to the Plan's medical coverage guidelines (available upon request) for the following services:

- Pre-operative care
- Transplant procedure, Facility and professional fees
- Organ acquisition costs including:
  - For living donors: organ donor fees, recipient registration fees, laboratory tests (including tissue typing of recipient and donor), and Hospital services that are directly related to the excision of the organ
  - For cadaver donors: operating room services, intensive care cost, preservation supplies (perfusion materials and equipment), preservation technician's services, transportation cost, and tissue typing of the cadaver organ
- Bone marrow or stem cell acquisition and short term storage during therapy for a Member with a covered illness
- Short-term storage of umbilical cord blood for a Member with a malignancy undergoing treatment when there is a donor match
- Post-transplant care and treatment
- Medications (including immunosuppressive medications)
- Supplies (must be Preauthorized/Approved)
- Psychological testing
- Living donor transplant-related complications for sixty (60) days following the date the organ is removed, if not otherwise covered by donor's own health benefit plan, by another group health plan, or other coverage arrangement

Transplants that meet the United Network for Organ Sharing (UNOS) criteria and/or Plan Certificate of Insurance requirements and are performed at Plan Participating Providers or contracted Centers of Excellence are covered for the following conditions:

1. Small bowel transplants
2. Kidney transplants for End Stage Renal Disease
3. Cornea transplants
4. Heart transplants
5. Implantable ventricular assist device used while waiting for a heart transplant
6. Lung transplants or heart/lung transplants for:
   a. Primary pulmonary hypertension;
   b. Eisenmenger's syndrome;
   c. End stage pulmonary fibrosis;
   d. Alpha 1 antitrypsin disease;
   e. Cystic fibrosis; and
   f. Emphysema for members with specific indications.
7. Liver transplants for:
   a. Biliary atresia in children;
   b. Primary biliary cirrhosis;
   c. Post-acute viral infection (including hepatitis a, hepatitis b antigen e negative, and hepatitis c, causing acute atrophy or post necrotic cirrhosis);
   d. Primary sclerosing cholangitis; and
   e. Alcoholic cirrhosis.
8. Pancreas transplants (cadaver organ) for Members with Type I uncontrolled diabetes for:
   a. Simultaneous pancreas kidney;
   b. Pancreas after kidney; and
   c. Pancreas before kidney.
9. Allogenic bone marrow transplants or peripheral stem cell support (myeloablative or non-myeloablative) for:
   a. Acute Lymphoblastic Leukemia
   b. Acute Myelogenous Leukemia
   c. Chronic Myelogenous Leukemia
   d. Pediatric Neuroblastoma

e. Myelodysplastic Diseases
f. Hodgkin's Disease (Lymphoma)
g. Non-Hodgkin's Lymphoma
h. Genetic Diseases and Acquired Anemias:
   i. Sickle cell anemia
   ii. Severe aplastic anemia
   iii. Wiskott-Aldrich syndrome
   iv. Severe combined immunodeficiencies
   v. Mucopolysaccharidoses
   vi. Mucolipidoses

10. Autologous bone marrow transplants or peripheral stem cell support associated with high dose chemotherapy for:
    a. Acute Lymphoblastic Leukemia
    b. Acute Myelogenous Leukemia
    c. Chronic Myelogenous leukemia
    d. Pediatric Neuroblastoma
    e. Ewing's Sarcoma
    f. Primitive Neuroectodermal Tumors
    g. Germ Cell Tumors
    h. Multiple Myeloma
    i. Primary Amyloidosis
    j. Hodgkin's Disease (Lymphoma)
    k. Non-Hodgkin's Lymphoma
    l. Breast cancer

Not Covered:

- *Transplant evaluations with no end organ complications*
- *Storage of stem cells including storing umbilical cord blood of non-diseased persons for possible future use*
- *Artificial organs, any transplant or transplant services not listed above*
- *Expenses incurred by a Member as a donor, unless the recipient is also a Member Costs related to locating and/or screening organ donors*
- *Donor expenses for complications that occur after sixty (60) days from the date the organ is removed, regardless if the donor is covered as a Member under this Plan or not*
- *Services, chemotherapy, radiation therapy (or any therapy that damaged the bone marrow), supplies, medications and aftercare for or related to artificial or non-human organ transplants*
- *Services, chemotherapy, supplies, medications and aftercare for or related to human organ transplants not specifically approved by the Plan's Chief Medical Officer or its designee*
- *Services, chemotherapy, supplies, medications and aftercare for or related to transplants performed at a non-Plan Participating Center of Excellence*
- *Transplants and transplant evaluations that do not meet the United Network for Organ Sharing (UNOS) criteria*

Anesthesia

We cover services of an anesthesiologist or other certified anesthesia Provider in connection with an authorized/approved procedure or treatment.

Concurrent services received while inpatient

Concurrent services including medical, surgical, maternity, Chemotherapy or Radiation Therapy provided during one inpatient stay by one Professional Health Care Provider. Benefits for concurrent services will be based on the Covered Service with the highest Allowance.

When two or more Professional Health Care Providers have attended the Member during one inpatient stay because the nature or severity of the Member's condition requires the skills of separate Professional Health Care Providers, benefits will be available for the Covered Service that carries the highest Allowance for the type of service provided by each Professional Health Care Provider, provided the service is Medically Appropriate and Necessary and would otherwise be a Covered Service under this Benefit Plan.

Section 5(b) Services provided by a Hospital or other Facility

IMPORTANT

Here are some important things you should keep in mind about these benefits:

- Please remember that all benefits are subject to the definitions, limitations, and exclusions in this Certificate of Insurance and are payable only when we determine they are Medically Necessary.
- Participating Providers must provide or arrange your care and you must be Hospitalized in a Participating Facility.
- Mental Health and Substance Use Disorder benefits provided by a Hospital or other Facility are outlined in Section 5(d).
- Be sure to read Section 4, "How you get care", for valuable information about conditions for coverage.
- **YOU MUST GET PREAUTHORIZATION/PRIOR APPROVAL FOR SOME OF THESE SERVICES**. See the benefits description below.

IMPORTANT

Benefit Description

Inpatient Hospital

Note: Preauthorization/Prior Approval is required; failure to get Preauthorization/Prior Approval may result in a reduction or denial of benefits. (See Services requiring Preauthorization/Prior Approval in Section 4.)

The following Hospital Services are covered:

- Room and board
- Critical care services
- Use of the operating room and related facilities
- General Nursing Services, including special duty Nursing Services if approved by the Plan
- The administration of whole blood and blood plasma is a Covered Service. The purchase of whole blood and blood components is not covered unless such blood components are classified as medications in the *United States Pharmacopoeia*.
- Special diets during Hospitalization, when specifically ordered
- Other services, supplies, biologicals, and medicines prescribed by a Practitioner and/or Provider during Hospitalization

Note: If you need a mastectomy, you may choose to have the procedure performed on an inpatient basis and remain in the Hospital up to 48 hours after the procedure.

Not Covered:

- *Take-home medications (Prescription medications provided to a Member at discharge are paid under the Prescription Drug benefit. See Sections 1, 2, and 5(e) for benefit details.)*
- *Personal comfort items (telephone, television, guest meals and beds)*
- *Admissions to Hospitals performed only for the convenience of the Member, the Member's family or the Member's Practitioner and/or Provider*
- *Custodial or Convalescent care*
- *Intermediate level or Domiciliary care*
- *Rest cures*
- *Services to assist in activities of daily living*

Outpatient Hospital or Ambulatory Surgical Center

Note: Preauthorization/Prior Approval is required; failure to get Preauthorization/Prior Approval may result in a reduction or denial of benefits. (See Services requiring Preauthorization/Prior Approval in Section 4.)

Health care services furnished in connection with a surgical procedure performed in a participating surgical center include:

- Outpatient Hospital surgical center
- Outpatient Hospital services such as diagnostic tests
- Ambulatory surgical center (same day surgery)

Not Covered:

- *Surgical procedures that can be done in a Practitioner office setting (i.e. vasectomy, toe nail removal)*
- *Blood and blood derivatives replaced by the Member*
- *Take-home medications (Prescription medications provided to a Member at discharge are paid under the Prescription Drug benefit. See Sections 1, 2, and 5(e) for benefit details.)*

Skilled nursing care facility benefits

Note: Preauthorization/Prior Approval is required; failure to get Preauthorization/Prior Approval may result in a reduction or denial of benefits. (See Services requiring Preauthorization/Prior Approval in Section 4.)

Skilled Nursing Facility Services are covered if approved by the Plan in lieu of continued or anticipated Hospitalization. The following Skilled Nursing Facility Services are covered when provided through a state-licensed nursing Facility or program:

- Skilled nursing care, whether provided in an inpatient skilled nursing unit, a Skilled Nursing Facility, or a subacute (swing bed) Facility

- Room and board in a Skilled Nursing Facility
- Special diets in a Skilled Nursing Facility, if specifically ordered

Skilled nursing care in a Hospital shall be covered if the level of care needed by a Member has been reclassified from acute care to skilled nursing care and no designated skilled nursing care beds or swing beds are available in the Hospital or in another Hospital or health care Facility within a *thirty-mile (30)* radius of the Hospital.

Not Covered:

- *Custodial or Convalescent care*
- *Intermediate level or Domiciliary care*
- *Residential care*
- *Rest cures*
- *Services to assist in activities of daily living*

Hospice care

Note: Preauthorization/Prior Approval is required; failure to get Preauthorization/Prior Approval may result in a reduction or denial of benefits. (See Services requiring Preauthorization/Prior Approval in Section 4.)

A Member may elect to receive hospice care, instead of the traditional Covered Services provided under the Plan, when the following circumstances apply:

a. The Member has been diagnosed with a terminal disease and a life expectancy of *six (6)* months or less;
b. The Member has chosen a palliative treatment focus (i.e. emphasizing comfort and support services rather than treatment attempting to cure the disease or condition);
c. The Member continues to meet the terminally ill prognosis as reviewed by the Plan's Chief Medical Officer over the course of care; and
d. The hospice service has been approved by the Plan.

The following Hospice Services are Covered:

a. Admission to a hospice Facility, Hospital, or Skilled Nursing Facility for room and board, supplies and services for pain management and other acute/chronic symptom management
b. In-home hospice care per Plan guidelines (available upon request)
c. Part-time or intermittent nursing care by a RN, LPN/LVN, or home health aide for patient care up to *eight (8)* hours per day
d. Social services under the direction of a Participating Provider
e. Psychological and dietary counseling
f. Physical or occupational therapy, as described under *Section 5(a)*
g. Consultation and Case Management services by a Participating Provider
h. Medical supplies, DME and medications prescribed by a Participating Provider
i. Expenses for Participating Providers for consultant or Case Management services, or for physical or occupational therapists, who are not Group Members of the hospice, to the extent of coverage for these services as listed in *Section 5(a)*, but only where the hospice retains responsibility for the care of the Member

Not Covered: *Independent nursing, homemaker services, respite care*

IMPORTANT

Here are some important things to keep in mind about these benefits:

Please remember that all benefits are subject to the definitions, limitations, and exclusions in this Certificate of Insurance and are payable only when we determine they are Medically Necessary.

Be sure to read Section 4, "How you get care", for valuable information about conditions for coverage.

IMPORTANT

What is an Emergency Medical Condition?

An **Emergency Medical Condition** is the sudden and unexpected onset of a health condition that would lead a Prudent Layperson, acting reasonably, and possessing the average knowledge of health and medicine, to believe that the absence of immediate medical attention could result in serious impairment to bodily functions or serious dysfunction of a bodily organ or part or would place the person's health; or with respect to a pregnant woman, the health of the woman or her unborn child, in serious jeopardy.

What is a Prudent Layperson?

A **Prudent Layperson** is a person who is without medical training and who possess an average knowledge of health and medicine and who draws on his/her practical experience when making a decision regarding the need to seek Emergency medical treatment.

What is an Urgent Care Situation?

An **Urgent Care Situation** is a degree of illness or injury, which is less severe than an Emergency Condition, but requires prompt medical attention within *twenty-four (24)* hours, such as stitches for a cut finger. **Urgent Care Request** means a request for a health care service or course of treatment with respect to which the time periods for making a non-Urgent Care Request determination which:

a. Could seriously jeopardize the life or health of the Member or the ability of the Member to regain maximum function, based on a Prudent Layperson's judgment; or
b. In the opinion of a Practitioner and/or Provider with knowledge of the Member's medical condition, would subject the Member to severe pain that cannot be adequately managed without the health care service or treatment that is the subject of the request.

If an Urgent Care Situation occurs, Members should contact their Primary Care Practitioner and/or Provider immediately, if one has been selected, and follows his or her instructions. A Member may always go directly to a participating urgent care or after-hours clinic (listing available upon request or visit www.sanfordhealthplan.com/ndpers).

The Health Plan covers worldwide Emergency services necessary to screen and stabilize Members without Preauthorization/Prior Approval in cases where a Prudent Layperson reasonably believed that an Emergency Medical Condition existed. Network restrictions do not apply to Emergency services received by Practitioners and/or Providers outside of the United States.

Benefit Description

Emergency Medical Conditions

Emergency services from Basic Plan-level Providers will be covered at the same benefit and cost sharing level as services provided by PPO-level Providers both within and outside of the Sanford Health Plan Service Area in cases where a Prudent Layperson reasonably believed that an Emergency Medical Condition existed.

Note: If the Plan determines the condition did not meet Prudent Layperson definition of an Emergency, then Basic Plan level cost-sharing amounts will apply, and the Member is responsible for charges above the Reasonable Cost.

If an Emergency Medical Condition arises, Members are encouraged to seek services at the nearest Emergency Facility that is a Participating Provider. If the Emergency Medical Condition is such that a Member cannot go safely to the nearest Participating Emergency Facility, then the Member should seek care at the nearest Emergency Facility. To find a listing of Participating Providers and Facilities, sign into your account at www.sanfordhealthplan.com/memberlogin or call the Plan toll-free at (800) 499-3416 | TTY/TDD: (877) 652-1844 *(toll-free)*.

The Member, or a designated relative or friend must notify the Plan, and the Member's Primary Care Practitioner and/or Provider, if one has been selected, as soon as reasonably possible after receiving treatment for an Emergency Medical Condition, but no later than *forty-eight (48)* hours after the Member is physically or mentally able to do so.

Participating Emergency Providers/Facilities

The Plan covers Emergency services necessary to screen and stabilize Members without Preauthorization/Prior Approval in cases where a Prudent Layperson reasonably believed that an Emergency Medical Condition existed.

Note: If the Plan determines the Member's condition did not meet the Prudent Layperson definition of an Emergency, then Basic Plan level cost-sharing amounts may apply, subject to whether services were received from a PPO-level or Basic-level Participating Provider/Facility, as set forth in Section 1. See Section 1, "*Participating Providers*" and "*How PPO vs. Basic Plan Determines Benefit Payment*" for details.

Non-Participating Emergency Providers/Facilities

The Plan covers Emergency services necessary to screen and stabilize a Member and may not require Prospective (Pre-Service) Review of such services if a Prudent Layperson would have reasonably believed that use of a Participating Provider would result in a delay that would

worsen the Emergency, or if a provision of federal, state, or local law requires the use of a specific Practitioner and/or Provider. The coverage shall be at the same benefit level as if the service or treatment had been rendered by a Participating Provider.

Note: If the Plan determines the Member's condition did not meet the Prudent Layperson definition of an Emergency, then Basic Plan level cost-sharing amounts will apply, subject to the limitations on Non-Participating Providers set forth in Section 1, and whether services were rendered within or outside the state of North Dakota and its contiguous counties. See Section 1, "*Non-Participating Health Care Providers*", for more information.

If a Member is admitted as an inpatient to a Non-Participating Provider Facility, then the Plan will contact the admitting Practitioner and/or Provider to determine medical necessity and a plan for treatment. In some cases, where it is medically safe to do so, the Member may be transferred to a Participating Hospital and/or other appropriate Facility.

Urgent Care Situations

Treatment provided in Urgent Care Situations from Basic Plan-level Providers will be covered at the same benefit and cost sharing level as services provided by PPO-level Providers both within and outside of the Sanford Health Plan Service Area in cases where a Prudent Layperson reasonably believed that an Urgent Care Situation existed.

Note: If the Plan determines the condition did not meet Prudent Layperson definition of an Urgent Care Situation, then Basic Plan level cost-sharing amounts will apply, and the Member is responsible for charges above the Reasonable Cost.

If an **Urgent Care Situation** occurs, Members should contact their Primary Care Practitioner and/or Provider immediately, if one has been selected, and follow his or her instructions. If a Primary Care Practitioner and/or Provider has not been selected, the Member should contact the Plan and follow the Plan's instructions. A Member may always go directly to a participating urgent care or after-hours clinic. To find a listing of Participating Providers and Facilities, sign into your account at www.sanfordhealthplan.com/memberlogin or call the Plan toll-free at (800) 499-3416 | TTY/TDD: (877) 652-1844 *(toll-free)*.

Participating Providers/Facilities

The Plan covers services in an Urgent Care Situation without Preauthorization/Prior Approval in cases where a Prudent Layperson reasonably believed that an Urgent Care Situation existed.

Note: If the Plan determines the Member's condition did not meet the Prudent Layperson definition of an Urgent Care Situation, then Basic Plan level cost-sharing amounts may apply, subject to whether services were received from a PPO-level or Basic-level Participating Provider/Facility, as set forth in Section 1. See Section 1, "*Participating Providers*" and "*How PPO vs. Basic Plan Determines Benefit Payment*" for details.

Non-Participating Providers/Facilities

The Plan covers services in an Urgent Care Situation without Preauthorization/Prior Approval requirements if a Prudent Layperson would have reasonably believed that use of a Participating Provider would result in a delay that would worsen the Urgent Care Situation, or if a provision of federal, state, or local law requires the use of a specific Practitioner and/or Provider. The coverage shall be at the same benefit level as if the service or treatment had been rendered by a Participating Provider.

Note: If the Plan determines the Member's condition did not meet the Prudent Layperson definition of an Urgent Care Situation, then Basic Plan level cost-sharing amounts will apply, subject to the limitations on Non-Participating Providers set forth in Section 1, and whether services were rendered within or outside the state of North Dakota and its contiguous counties. See Section 1, "*Non-Participating Health Care Providers*", for more information.

Ambulance and transportation services

Transportation by professional ground ambulance, air ambulance, or on a regularly scheduled flight on a commercial airline is covered when transportation is:

a. Medically Necessary; and
b. To the nearest Participating Provider equipped to furnish the necessary Health Care Services, or as otherwise approved and arranged by the Plan.

Not Covered:

- *Reimbursement for personal transportation costs incurred while traveling to/from Practitioner and/or Provider visits or other health care services*
- *Transfers performed only for the convenience of the Member, the Member's family or the Member's Practitioner and/or Provider*
- *Services and/or travel expenses relating to a Non-Emergency Medical Condition*

Non-Emergency or Non-Urgent Care Situations Outside the Plan's Service Area

For non-Emergency medical care or non-Urgent Care Situations when traveling outside the Plan's Service Area, benefits will be payable at Basic level. For details, see Section 1.

Section 5(d) Mental health and substance use disorder benefits

IMPORTANT		IMPORTANT
	Here are some important things to keep in mind about these benefits: All benefits are subject to the definitions, limitations, and exclusions in this Certificate of Insurance and are payable only when we determine they are Medically Necessary. Be sure to read Section 4, "How you get care", for valuable information about conditions for coverage. **YOU MUST GET PREAUTHORIZATION/PRIOR APPROVAL OF SOME OF THESE SERVICES.** See the benefits description below.	

Benefit Description

Mental health benefits

In compliance with the Mental Health Parity and Addiction Equity Act of 2008 (MHPAEA), the financial requirements and treatment limitations that apply to the Plan's mental health and/or substance use disorder benefits are no more restrictive than the predominant financial requirements or treatment limitations that apply to substantially all medical/surgical benefits. In addition, mental health and substance use disorder benefits are not subject to separate cost sharing requirements or treatment limitations. Mental health and substance use disorders are covered consistent with generally recognized independent standards of current medical practice, which include the current editions of the Diagnostic and Statistical Manual of Mental Disorders (DSM) and the International Classification of Diseases (ICD).

Coverage is provided for mental health conditions which current prevailing medical consensus affirms substantially impairs perception, cognitive function, judgment, and/or emotional stability, and limits the life activities of the person with the condition(s). This includes but is not limited to the following conditions: schizophrenia; schizoaffective disorders; bipolar disorder; major depressive disorders (single episode or recurrent); obsessive-compulsive disorders; attention-deficit/hyperactivity disorder; autism spectrum disorders; post-traumatic stress disorders (acute, chronic, or with delayed onset); and anxiety disorders that cause significant impairment of function.

Mental health benefits are covered with the same Copays, Deductibles, Coinsurance factors, and restrictions as other medical/surgical benefits under the Plan. Coverage for mental health conditions includes:

- Outpatient Professional services, including therapy by Providers such as psychiatrists, psychologists, clinical social workers, or other qualified mental health professionals
- Inpatient services, including Hospitalizations
- Medication management
- Diagnostic tests
- Electroconvulsive therapy (ECT)
- Partial Hospitalization
- Intensive Outpatient Programs

For outpatient treatment services, the first five (5) hours of treatment of any calendar year will be covered at 100% (no charge).

If you are having difficulty obtaining an appointment with a mental health practitioner and/or Provider, or for mental health needs or assessment services by phone, call the Sanford USD Medical Center Triage Line toll-free at (888) 996-4673.

Telephonic consultation for a Member diagnosed with depression and within twelve (12) weeks of starting antidepressant therapy per Plan guidelines (available upon request). Coverage limited to one (1) telephonic consult per Member per year for depression and one (1) telephonic consult for Attention Deficit Hyperactive Disorder (ADHD). For Members with an eating disorder, see additional benefits in Section 5(a), *Outpatient nutritional care services*.

Note: Preauthorization/Prior Approval is required for these benefits. As with other medical/surgical benefits, failure to get Preauthorization/ Prior Approval may result in a reduction or denial of benefits. (See Services requiring Preauthorization/Prior Approval in Section 4):

- All Inpatient services, including those provided by a Hospital or a Residential Treatment Facility

Not Covered:

- *Convalescent care*
- *Marriage or bereavement counseling; pastoral counseling; financial or legal counseling; and custodial care counseling*
- *Educational or non-medical services provided under the Individuals with Disabilities Education Act (IDEA)*
- *Educational or non-medical services for learning disabilities and/or Behavioral problems*
- *Services related to environmental change*
- *Behavioral therapy, modification, or training, including Applied Behavioral Analysis (ABA)*
- *Milieu therapy*
- *Sensitivity training*

Substance use disorder benefits

In compliance with the Mental Health Parity and Addiction Equity Act of 2008 (MHPAEA), the financial requirements and treatment limitations that apply to the Plan's mental health and/or substance use disorder benefits are no more restrictive than the predominant financial requirements or treatment limitations that apply to substantially all medical/surgical benefits. In addition, mental health and substance use

disorder benefits are not subject to separate cost sharing requirements or treatment limitations. Mental health and substance use disorders are covered consistent with generally recognized independent standards of current medical practice, which include the current editions of the Diagnostic and Statistical Manual of Mental Disorders (DSM), the American Society of Addiction Medicine Criteria (ASAM Criteria), and the International Classification of Diseases (ICD).

Substance use disorder benefits are covered with the same Copays, Deductibles, Coinsurance factors, and restrictions as other medical/surgical benefits under the Plan. Coverage for substance use disorders includes:

- Addiction treatment, including for alcohol, drug-dependence, and gambling issues
- Inpatient services, including Hospitalization
- Outpatient professional services, including therapy by Providers such as psychiatrists, psychologists, clinical social workers, Licensed Chemical Dependency Counselors, or other qualified mental health and substance abuse disorder professionals
- Partial Hospitalization
- Intensive Outpatient Programs

For outpatient treatment services, the first five (5) visits of treatment of any calendar year will be covered at 100% (no charge).

Note: Preauthorization/Prior Approval is required for these benefits; failure to get Preauthorization/Prior Approval may result in a reduction or denial of benefits. (See Services requiring Preauthorization/Prior Approval in Section 4):

- All Inpatient services, including those provided by a Hospital or a Residential Treatment Facility.

Not Covered:

- *Confinement Services to hold or confine a Member under chemical influence when no Medically Necessary services are provided, regardless of where the services are received (e.g. detoxification centers)*
- *Methadone or Cyclazocine therapy not part of an approved treatment program*
- *Marriage or bereavement counseling; pastoral counseling; financial or legal counseling; and custodial care counseling*
- *Educational or non-medical services provided under the Individuals with Disabilities Education Act (IDEA)*
- *Educational or non-medical services for learning disabilities or behavioral problems*
- *Services related to environmental change*
- *Milieu therapy*
- *Sensitivity training*
- *Domiciliary care or Maintenance Care*
- *Convalescent care*

Section 5(e) Prescription drug and diabetes supplies benefits

IMPORTANT		IMPORTANT
	Here are some important things to keep in mind about these benefits: We cover prescribed medications, as described in the chart beginning on the next page. All benefits are subject to the definitions, limitations and exclusions in this Certificate of Insurance and are payable only when we determine they are Medically Necessary. Be sure to read Section 4, "How you get care", for valuable information about conditions for coverage. **YOU MUST GET PREAUTHORIZATION/PRIOR APPROVAL FOR SOME OF THESE SERVICES.** See the benefits description below.	

- **Where you can obtain them.** You must fill the prescription at a Plan Participating pharmacy for Cost Sharing amounts to apply. A Member may be responsible for payment of the Cost Sharing Amounts at the time the Prescription Medication is dispensed. A Participating Pharmacy agrees not to charge or collect any amount from the Member that exceeds the Cost Sharing Amounts. All claims from a Participating Pharmacy must be submitted by the Participating Pharmacy. A listing of the Plan's Participating pharmacies is available by contacting the Plan or online at www.sanfordhealthplan.com/ndpers.

  If a Member receives Prescription Medications from a Non-Participating Pharmacy, the Member is responsible for submitting a Claim for Benefits. Charges in excess of the Allowed Charge are the Member's responsibility.
- **Specialty medications.** Some specialty medications may be obtained at a retail pharmacy, and some medications must be obtained through the Plan's contracted specialty medication vendor. To enroll, and obtain preauthorization/prior approval to join the Specialty/Injectable Drugs Program, call toll-free (866) 333-9721(888) . Please refer to your *Summary of Pharmacy Benefits* handbook for a complete listing of specialty medications that require Preauthorization/Prior Approval.
- **How you can obtain them.** You must present your ID card to the Plan Participating pharmacy; if you do not present your ID card to the Plan Participating pharmacy, you must pay 100% of the costs of the medication to the pharmacy. Additionally, if you choose to go to a Non-Participating pharmacy, you must pay 100% of the costs of the medication to the pharmacy.

  Note: If a Member receives Prescription Medications from a Non-Participating Pharmacy, the Member is responsible for payment of the Prescription Order or refill in full at the time it is dispensed and to submit appropriate reimbursement information to Sanford Health Plan. Payment for covered Prescription Medications will be sent to the Subscriber. Any charges in excess of the Allowed Charge are the Subscriber's responsibility.
- **We use a formulary.** Sanford Health Plan covers prescribed medications according to our Formulary. A formulary is a list of Prescription Medication Products, which are preferred by the Plan for dispensing to Members when appropriate. This list is subject to periodic review and modifications. Additional medications may be added or removed from the formulary throughout the year. Sanford Health Plan will notify you of any formulary changes. For a copy of the Plan formulary, contact Pharmacy Management toll-free at (888) 315-0885 | TTY/TDD: (877) 652-1844 *(toll-free)* or sign into your account at www.sanfordhealthplan.com/memberlogin to view the formulary online.

  Formulary contraceptive medications obtainable with a Prescription Order are paid at 100% of Allowed Charge; this includes over-the-counter Plan-B, if obtained with a Prescription Order. *Deductible Amount is waived.*
- **Exception to formulary.** The Plan will use appropriate pharmacists and Practitioner and/or Providers to consider exception requests and promptly grant an exception to the medication formulary, including exceptions for anti-psychotic and other mental health treatment medications, for a Member when the health care Practitioner and/or Provider prescribing the medication indicates to the Plan:
  1. the formulary medication causes an adverse reaction in the patient;
  2. the formulary medication is contraindicated for the patient; or
  3. the prescription medication must be dispensed as written to provide maximum medical benefit to the patient.

  Note: Members must generally try formulary medications before an exception for the formulary will be made for non-formulary medication use unless a Member's Practitioner and/or Provider determines that use of the formulary medication may cause an adverse reaction to the Member or be contraindicated for the Member. To request an exception to the formulary, please call Pharmacy Management toll-free at (888) 315-0885 | TTY/TDD: (877) 652-1844 *(toll-free)*.
- **There are dispensing limitations.** One (1) Copayment Amount, plus any applicable coinsurance amount, applies per Prescription Order or refill for a *1 – 34-day* supply. Two (2) Copayment Amounts, plus any applicable coinsurance amounts, apply per Prescription Order or refill for a *35 – 100-day* supply. Prescription Medications and nonprescription diabetes supplies are subject to a dispensing limit of a *100-day* supply.
- **Generic vs. Brand.** If a Generic Prescription Medication is the therapeutic equivalent of a Brand Name Prescription Medication, and is authorized by a Member's Professional Health Care Provider, benefits will be based on the Allowance for the Generic equivalent. If the Member does not accept the Generic equivalent, the Member is responsible for the cost difference between the Generic and the Brand Name Prescription Medication and applicable Cost Sharing Amounts, except for cases in which the prescribed drug is a contraceptive, per Plan guidelines.

Benefit Description

Covered medications and supplies

- Medicines prescribed by a Provider of health services, including off-label use of medications, in accordance with federal and state laws and regulations
- Self-Administered Injectable medications, per Plan guidelines (available upon request). Please refer to your *Summary of Pharmacy Benefits* for a list of medications (injectable and high cost medications that must receive Preauthorization/Prior Approval, and must be obtained from Express Scripts Specialty Pharmacy by calling (888) 333-9721 *(toll-free)*. If these medications are obtained from a retail pharmacy or Practitioner and/or Provider's office without Preauthorization/Prior Approval by Sanford Health Plan's Utilization Management Department, the Member may be responsible for the full cost of the medication.
- Diabetic medications and supplies (See Section 5(a) *Diabetes supplies, equipment, and education* for additional benefits)
- The following preventive medications/supplies are covered at 100% (no charge) with a written prescription order:
  - Folic Acid Supplements for women planning to become pregnant or in their childbearing years
  - Vitamin D Supplements for Members ages 65 and older at risk for falls
  - Aspirin to prevent cardiovascular disease for male Members ages 45 through 79 and female Members ages 55 through 79 who are at risk for developing cardiovascular disease
  - Formulary breast cancer preventive medications for women at increased risk for breast cancer

Not Covered:

- *Replacement of a prescription medication due to loss, damage, or theft*
- *Outpatient medications dispensed in a Provider's office or non-retail pharmacy location*
- *Medications that may be received without charge under a federal, state, or local program*
- *Medications for cosmetic purposes, including baldness, removal of facial hair, and pigmenting or anti-pigmenting of the skin*
- *Medications and associated expenses and devices not approved by the FDA for a particular use except as required by law (unless the Practitioner certifies off-label use with a letter of medical necessity)*
- *Refills of any prescription older than one (1) year*
- *Compound medications with no legend (prescription) medications*
- *Acne medication for Members over age thirty (30)*
- *B-12 injection (except for pernicious anemia)*
- *Drug Efficacy Study Implementation ("DESI") medications*
- *Experimental or Investigational medications not part of an Approved Clinical Trial*
- *Growth hormone, except when medically indicated and approved by the Plan*
- *Orthomolecular therapy, including nutrients, vitamins (unless otherwise specified as covered in this Certificate), food supplements and baby formula (except to treat PKU or otherwise required to sustain life or amino acid-based elemental oral formulas), nutritional and electrolyte substances*
- *Medications, equipment or supplies available over-the-counter (OTC) that by federal or state law do not require a prescription order (except for Plan B and its generic equivalents; insulin; and select diabetic supplies, e.g., insulin syringes, needles, test strips and lancets, or aspirin to prevent cardiovascular disease when prescribed by a health care Practitioner and/or Provider)*
- *Any medication that is equivalent to an OTC medication except for medications that have a rating of "A" or "B" in the current recommendations of the United States Preventive Services Task Force and only when prescribed by a health care Practitioner and/or Provider*
- *Anorexiants or weight management medications (except when Medically Necessary)*
- *Whole Blood and Blood Components Not Classified as Medications in the United States Pharmacopoeia*
- *Unit dose packaging*
- *Synthetic opioids (e.g. Methadone or Cyclazocine)*

Section 5(f) Dental benefits

IMPORTANT

Here are some important things to keep in mind about these benefits:

Please remember that all benefits are subject to the definitions, limitations, and exclusions in this Certificate of Insurance and are payable only when we determine they are Medically Necessary.

We cover Hospitalization for dental procedures only when a non-dental physical impairment exists which makes Hospitalization necessary to safeguard the health of the patient. See Section 5(b) for inpatient Hospital benefits. We do not cover the dental procedure unless it is described below.

Be sure to read Section 4, "How you get care", for valuable information about conditions for coverage.

YOU MUST GET PREAUTHORIZATION/PRIOR APPROVAL FOR SOME OF THESE SERVICES. See the benefits description below.

IMPORTANT

Benefit Description

Note: The following services require Preauthorization/Prior Approval; failure to get Preauthorization/Prior Approval may result in a reduction or denial of benefits. (See Services requiring Preauthorization/Prior Approval in Section 4.)

- Dental services provided by a Dentist (D.D.S.) in an office setting as a result of an accidental injury to the jaw, sound natural teeth, dentures, mouth or face.
  - Covered Services must be initiated within 12 months of the date of injury and completed within 24 months of the start of treatment or longer if a dental treatment plan approved by Sanford Health Plan is in place.
  - Oral surgical procedures limited to services required because of injury, accident or cancer that damages Natural Teeth
  - Associated radiology services are included
  - "Injury" does not include injuries to Natural Teeth caused by biting or chewing
- Diagnosis and treatment for Temporomandibular Joint (TMJ) Dysfunction and/or Temporomandibular Disorder (TMD) and TMJ splints and adjustments if your primary diagnosis is TMJ/TMD
  - Splint limited to one (1) per Member per benefit period
- Coverage applies regardless of whether the services are provided in a Hospital or a dental office

Note: The following services require Preauthorization/Prior Approval; failure to get Preauthorization/Prior Approval may result in a reduction or denial of benefits. (See Services requiring Preauthorization/Prior Approval in Section 4.)

- Dental anesthesia for Members over age nine (9) and/or Members with a developmental disability or high-risk medical condition, as determined by a licensed Practitioner and/or Provider, which places such a person at serious risk.

Note: Anesthesia and Hospitalization charges for dental care are covered for a Member who:

a. is a child under age nine (9);
b. is severely disabled or otherwise suffers from a developmental disability, or
c. has a high risk medical condition(s), as determined by a licensed Practitioner and/or Provider, which places such a person at serious risk.

Not Covered:

- *Natural teeth replacements including crowns, bridges, braces or implants*
- *Osseointegrated implant surgery (dental implants)*
- *Extraction of wisdom teeth*
- *Hospitalization for extraction of teeth if not otherwise specified as Covered in this Certificate of Insurance*
- *Dental x-rays or dental appliances*
- *Shortening of the mandible or maxillae for cosmetic purposes*
- *Services and supplies related to ridge augmentation, implantology, and preventive vestibuloplasty*
- *Dental appliances of any sort, including but not limited to bridges, braces, and retainers (except for appliances for treatment of TMJ/TMD)*

Section 6. Limited and Non-Covered Services

This section describes services that are subject to limitations or **NOT** covered under this Contract. The Plan is not responsible for payment of non-covered or excluded benefits.

General Exclusions

1. Health Care Services provided either before the effective date of the Member's coverage with the Plan or after the Member's coverage is terminated.
2. Health Care Services performed by any Provider who is a Member of the Member's immediate family, including any person normally residing in the Member's home. This exclusion does not apply in those areas in which the immediate family member is the only Provider in the area. If the immediate family member is the only Participating Provider in the area, the Member may go to a Non-Participating Provider and receive In-Network coverage (Section 4). If the immediate family member is not the only Participating Provider in the area, the Member must go to another Participating Provider in order to receive coverage at the In-Network level.
3. Health Care Services Covered by Any Governmental Agency/Unit for military service-related injuries/diseases, unless applicable law requires the Plan to provide primary coverage for the same.
4. Health Care Services for injury or disease due to voluntary participation in a riot, unless source of injury is a result of domestic violence or a medical condition.
5. Health Care Services for sickness or injury sustained in the commission of a felony, unless source of injury is a result of domestic violence or a medical condition.
6. Health Care Services that the Plan determines are not Medically Necessary.
7. Experimental and Investigational Services not part of an Approved Clinical Trial.
8. Services that are not Health Care Services.
9. Complications from a non-covered procedure or service.
10. Charges for telephone calls to or from a Physician, Hospital or other medical Practitioner and/or Provider or electronic consultations
11. Services not performed in the most cost-efficient setting appropriate for the condition based on medical standards and accepted practice parameters of the community, or provided at a frequency other than that accepted by the medical community as medically appropriate
12. Charges for professional sign language and foreign language interpreter services.
13. Charges for duplicating and obtaining medical records from *Non-Participating Providers* unless requested by the Plan.
14. Charges for sales tax, mailing, interest and delivery.
15. Charges for services determined to be duplicate services by the Plan Chief Medical Officer or designee.
16. Charges that exceed the *Reasonable Costs* for Non-Participating Providers.
17. Services to assist in activities of daily living.
18. Alternative treatment therapies including, but not limited to: acupuncture, acupressure, biofeedback, chelation therapy, massage therapy unless covered per plan guidelines under the Women's Health and Cancer Rights Act of 1998 (WHCRA) for mastectomy/lymphedema treatment, naturopathy, homeopathy, holistic medicine, hypnotism, hypnotherapy, hypnotic anesthesia, or therapeutic touch.
19. Education Programs or Tutoring Services (not specifically defined elsewhere) including, but not limited to, education on self-care or home management.
20. Lifestyle Improvement Services, such as physical fitness programs, health or weight loss clubs or clinics.
21. Services by a vocational residential rehabilitation center, a community reentry program, halfway house or group home.
22. Any services or supplies for the treatment of obesity that do not meet the Plan's medical necessity coverage guidelines, including but not limited to: dietary regimen (except as related to covered nutritional counseling) nutritional supplements or food supplements; and weight loss or exercise programs.
23. Gender reassignment surgery.
24. Sequela, which are primarily cosmetic that occur secondary to a weight loss procedure (e.g., Panniculectomy, breast reduction or reconstruction).
25. Incidental cholecystectomy performed at the time of weight loss surgery.
26. Cosmetic Services and/or supplies to repair or reshape a body structure primarily for the improvement of a Member's appearance or psychological well-being or self-esteem, including but not limited to, breast augmentation, treatment of gynecomastia and any related reduction services, skin disorders, rhinoplasty, liposuction, scar revisions, and cosmetic dental services.
27. Food items for medical nutrition therapy (except as specifically allowed in the Covered Benefits Section of this Certificate of Insurance).
28. Any fraudulently billed charges or services received under fraudulent circumstances.
29. Never Events, Avoidable Hospital Conditions, or Serious Reportable Events. Participating Providers are not permitted to bill Members for services related to such events.
30. Genetic testing except as required by the evidence-based services that have a rating of "A" or "B" in the current recommendations of the United States Preventive Services Task Force.
31. Autopsies, unless the autopsy is at the request of the Plan in order to settle a dispute concerning provision or payment of benefits. The autopsy will be at the Plan's expense.
32. Iatrogenic condition, illness, or injury as a result of mistakes made in medical treatment, such as surgical mistakes, prescribing or dispensing the wrong medication or poor hand writing resulting in a treatment error. Charges related to Iatrogenic illness or injury are not the responsibility of the Member.
33. Elective health services received outside of the United States.
34. Transplants and pre and post-transplant services at Non-Participating Center of Excellence Facilities.

35. Health Care Services ordered by a court or as a condition of parole or probation.

Special Situations Affecting Coverage

Neither the Plan, nor any Participating Provider, shall have any liability or obligation because of a delay or failure to provide services as a result of the following circumstances:

a. Complete or partial destruction of the Plan's facilities;
b. Declared or undeclared acts of War or Terrorism;
c. Riot;
d. Civil insurrection;
e. Major disaster or unforeseen natural events which materially interfere with the ability to provide Health Care Services;
f. Disability of a significant portion of the Participating Providers;
g. Epidemic or the inability to obtain vaccines or medicines due to circumstances beyond the control of the Plan; or
h. A labor dispute not involving the Plan Participating Providers, the Plan will use its best efforts to arrange for the provision of Covered Services within the limitations of available facilities and personnel. If provision or approval of Covered Services under this Contract is delayed due to a labor dispute involving the Plan or Participating Providers, Non-Emergency Care may be deferred until after resolution of the labor dispute.

Additionally, non-Emergency care may be deferred until after resolution of the above circumstances.

Services Covered By Other Payors

The following are excluded from coverage:

1. Health services for which other coverage is either (1) required by federal, state or local law to be purchased or provided through other arrangements or (2) has been made available to and was purchased by the Covered Person. Examples include coverage required by workers' compensation, no-fault auto insurance, medical payments coverage or similar legislation.

   The Plan is not issued in lieu of nor does it affect any requirements for coverage by Workers' Compensation. This Plan contains a limitation which states that health services for injuries or sickness which are job, employment or work related for which benefits are provided or payable under any Workers' Compensation or Occupational Disease Act or Law, are excluded from coverage by the Plan. However, if benefits are paid by the Plan and it is determined that the Member is eligible to receive Workers' Compensation for the same incident; the Plan has the right to recover any amounts paid. As a condition of receiving benefits on a contested work or occupational claim, Member agrees to reimburse the Plan the full amount that the Plan has paid for Health Care Services when entering into a settlement or compromise agreement relating to compensation for Health Care Services covered by Workers' Compensation, or as part of any Workers' Compensation Award. The Plan reserves its right to recover against Member even though:

   a. The Workers' Compensation benefits are in dispute or are made by means of settlement or compromise; or
   b. No final determination is made that the injury or sickness was sustained in the course of or resulted from employment;
   c. The amount of Workers' Compensation for medical or health care is not agreed upon or defined by Member or the Workers' Compensation carrier; or
   d. The medical or health care benefits are specifically excluded from the Workers' Compensation settlement or compromise.

   Member will not enter into a compromise or hold harmless agreement relating to any work related claims paid by the Plan, whether or not such claims are disputed by the Workers' Compensation insurer, without the express written agreement of the Plan.
2. Health Care Services received directly from Providers employed by or directly under contract with the Member's employer, mutual benefit association, labor union, trust, or any similar person or Group.
3. Health Care Services for injury or sickness for which there is other non-Group insurance providing medical payments or medical expense coverage, regardless of whether the other coverage is primary, excess, or contingent to the Plan. If the benefits subject to this provision are paid for or provided by the Plan, the Plan may exercise its Rights of Subrogation.
4. Health Care Services for conditions that under the laws of This State must be provided in a governmental institution.
5. Health Care Services covered by any governmental health benefit program such as Medicare, Medicaid, ESRD and TRICARE, unless applicable law requires the Plan to provide primary coverage for the same.

Services and Payments that are the Responsibility of Member

1. Out-of-pocket costs, including Copays, Deductibles, and Coinsurance are the responsibility of the Member in accordance with the Summary of Benefits and Coverage and Summary of Pharmacy Benefits. Additionally, the Member is responsible to the Provider for payment for Non-Covered Services;
2. Finance charges, late fees, charges for missed appointments and other administrative charges; and
3. Services for which a Member is neither legally nor as customary practice required to pay in the absence of a Group health plan or other coverage arrangement.

Section 7. How Services are paid by the Plan

Reimbursement of Charges by Participating Providers

When you see Participating Providers, receive services at Participating Providers and facilities, or obtain your prescription medications at Network pharmacies, you will not have to file claims. You must present your current identification card and pay your Copay.

When a Member receives Covered Services from a Participating Provider, the Plan will pay the Participating Provider directly, and the Member will not have to submit claims for payment. The Member's only payment responsibility, in this case, is to pay the Participating Provider, at the time of service, any Copay, Deductible, or Coinsurance amount, which is required for that service. Participating Providers agree to accept either Sanford Health Plan's payment arrangements or its negotiated contract amounts.

Time Limits. Participating Providers must file claims to the Plan within *one hundred eighty (180)* days after the date that the cost was incurred. If the Member fails to show his/her Plan ID card at the time of service, then the Member may be responsible for payment of claim after Practitioner and/or Provider's timely filing period of *one hundred eighty (180)* days has expired.

In any event, the claim must be submitted to the Plan no later than *one hundred eighty (180)* days after the date that the cost was incurred, unless the claimant was legally incapacitated.

Reimbursement of Charges by Non-Participating Providers

Sanford Health Plan does not have contractual relationships with Non-Participating Practitioner and/or Providers and they may not accept the Plan's payment arrangements. In addition to any Copay, Deductible, or Coinsurance amount, which is required for that service, Members are responsible for any difference between the amount charged and the Plan's payment for covered services. Non-Participating Practitioner and/or Providers are reimbursed the Maximum Allowed Amount, which is the lesser of (a) the amount charged for a covered service or supply, or (b) Reasonable Costs.

You may need to file a claim when you receive services from Non-Participating Practitioner and/or Providers. Sometimes, Non-Participating Practitioners and/or Providers submit a claim to us directly. Check with the Practitioner and/or Provider to make sure they are submitting the claim. You are responsible for making sure claim is submitted to the Plan within one-hundred-eighty (180) days after the date that the cost was incurred. **If you, or the Non-Participating Practitioner and/or Provider, does not file the claim within one-hundred-eighty (180) days after the date that the cost was incurred you will be responsible for payment of the claim.**

If you need to file the claim, here is the process:

The Member must give the Plan written notice of the costs to be reimbursed. Claim forms are available from the Plan to aid in this process. Bills and receipts should be itemized and show:

- Covered Member's name and ID number;
- Name and address of the Practitioner and/or Provider or Facility that provided the service or supply;
- Dates Member received the services or supplies;
- Diagnosis;
- Type of each service or supply;
- The charge for each service or supply;
- A copy of the explanation of benefits, payments, or denial from any primary payer – such as the Medicare Summary Notice (MSN); and
- Receipts, if you paid for your services.

Health Care Services Received Outside of the United States

Covered services for medically necessary Emergency and Urgent care services received in a foreign country are covered at the In-Network level. There is no coverage for elective health care services if a Member travels to another country for the purpose of seeking medical treatment outside the United States.

Time Limits. Claims must be submitted to the Plan within *one-hundred-eighty (180)* days after the date that the cost was incurred. If you, or the Non-Participating Practitioner and/or Provider, file the claim after the one-hundred-eighty (180) timely-filing limit has expired, you will be responsible for payment of the claim.

Submit your claims to: Sanford Health Plan, ATTN: NDPERS, PO Box 91110, Sioux Falls, SD 57109-1110

Timeframe for Payment of Claims

The payment for reimbursement of the Member's costs will be made within *fifteen (15)* days of when the Plan receives a complete written claim with all required supporting information.

When a Member receives Covered Services from a Non-Participating Provider and payment is to be made according to Plan guidelines, the Plan will arrange for direct payment to either the Non-Participating Provider or the Member, per Plan policy. If the Provider refuses direct payment, the Member will be reimbursed for the Reasonable Costs of the services in accordance with the terms of This Contract. The Member will be responsible for any expenses that exceed Reasonable Costs, as well as any Copay, Deductible, or Coinsurance required for the Covered Service.

When We Need Additional Information

Please reply promptly when we ask for additional information. We may delay processing or deny your claim if you do not respond.

Member Bill Audit Program

Upon receiving notice of a claims payment, or Explanation of Benefits (EOB), from Sanford Health Plan, Members are encouraged to audit their medical bills and notify the Plan of any services which are improperly billed or of services that the Member did not receive.

If, upon audit of a bill, an error of $40 or more is found, the Member will receive a minimum payment of $20 or 50% of the resulting savings for paid Covered Services up to a maximum payment of $500.

To obtain payment through the Member Bill Audit Program, the Member must complete a *Member Bill Audit Refund Request Form*. To obtain a form, sign into your account at www.sanfordhealthplan.com/memberlogin or call Sanford Health Plan Member Services toll-free at (800) 499-3416 | TTY/TDD: (877) 652-1844 *(toll-free)* and request a form be mailed to you.

Note: This program does not apply when the NDPERS Benefit Plan is the secondary payor on a claim. For more information on claims with more than one payor, see Section 9, *Coordination of Benefits*.

Section 8. Problem Resolution

Member Appeal Procedures

Sanford Health Plan makes decisions in a timely manner to accommodate the clinical urgency of the situation and to minimize any disruption in the provision of health care. A Member, health care Practitioner and/or Provider with knowledge of the Member's medical condition, a Member's Authorized Representative, or an attorney have the right to file a complaint or an appeal of any Adverse Determination by Sanford Health Plan. The Member or his/her legal guardian may designate in writing to Sanford Health Plan an Authorized Representative to act on his/her behalf. This written designation of representation from the Member should accompany the request. For Expedited Appeals, a health care practitioner with knowledge of the Member's condition (e.g., treating practitioner) may act as the Member's authorized representative.

For members who request language services, Sanford Health Plan will provide service in the requested language through an interpreter or translated documents to help members register a complaint or appeal and to notify members about their complaint or appeal.

Language Access Services:

Spanish (Español): Para obtener asistencia en Español, llame al (800) 892-0675 *(toll-free)*.

Tagalog (Tagalog): Kung kailangan ninyo ang tulong sa Tagalog tumawag sa (800) 892-0675 *(toll-free)*.

Chinese (中文): 如果需要中文的帮助， 请拨打这个号码 (800) 892-0675 *(toll-free)*.

Navajo (Dine): Dinek'ehgo shika at'ohwol ninisingo, kwiijigo holne' (800) 892-0675 *(toll-free)*.

A TTY/TDD line is also available toll-free at (877) 652-1844 for members who are deaf, hard of hearing or speech-impaired.

Definitions

Adverse Determination: Means a denial, reduction or termination of, or a failure to provide or make payment (in whole or in part) for a benefit, including any such denial, reduction, termination, or failure to provide or make payment (for pre-service or post-service claims) that is based on:

1. A determination of an individual's eligibility to participate in a plan;
2. A determination that a benefit is not a Covered Benefit;
3. The imposition of a source-of-injury exclusion, network exclusion, application of any utilization review, or other limitation on otherwise covered benefits;
4. A determination that a benefit is Experimental, Investigational or not Medically Necessary or appropriate; or
5. A rescission of coverage. Only an act, practice, or omission that constitutes fraud or intentional misrepresentations of material fact, made by an applicant for health insurance coverage may be used to void application or Certificate of Insurance and deny claims.

Appeal: Request to change a previous Adverse Determination made by Sanford Health Plan.

Inquiry: A telephone call regarding eligibility, plan interpretation, plan policies and procedures, or plan design. It is the policy of Sanford Health Plan to address Member and Practitioner and/or Provider inquiries through informal resolution over the telephone whenever possible. If the resolution is not satisfactory to the inquirer, he or she will be instructed of his or her rights to file a verbal or written Complaint.

Complaint: An oral or written expression of dissatisfaction. It is the policy of Sanford Health Plan to make reasonable efforts to resolve Member and Practitioner and/or Provider Complaints. A process has been established for Members (or their designees) and Practitioners and/or Providers to use when they are dissatisfied with the Plan, its Practitioners and/or Providers, or processes. Examples of Complaints are eligibility issues; coverage denials, cancellations, or nonrenewals of coverage; administrative operations; and the quality, timeliness, and appropriateness of health care services provided.

Complainant: This is a Member, applicant, or former Member or anyone acting on behalf of a Member, applicant, or former Member, who submits a Complaint. The Member and his/her legal guardian may designate in writing to Sanford Health Plan an Authorized Representative to act on his/her behalf. This written designation of representation from the Member should accompany the Complaint.

External Review: An External Review is a request for an Independent, External Review of a medical necessity final determination made by Sanford Health through its External Appeals process.

Urgent Care Situation: A degree of illness or injury that is less severe than an Emergency Condition, but requires prompt medical attention within twenty-four (24) hours. An Urgent care request means a request for a health care service or course of treatment with respect to which the time periods for making a non-Urgent Care Request determination:

a. Could seriously jeopardize the life or health of the Member or the ability of the Member to regain maximum function, based on a Prudent Layperson's judgment; or
b. In the opinion of a Practitioner with knowledge of the Member's medical condition, would subject the Member to severe pain that cannot be adequately managed without the health care service or treatment that is the subject of the request.

In determining whether a request is "Urgent," the Plan shall apply the judgment of a Prudent Layperson as defined in Section 10. A Practitioner, with knowledge of the Member's medical condition, who determines a request to be "Urgent," shall have their request be treated as an Urgent Care Request.

Complaint Procedure

A Member has the right to file a Complaint either by telephone or in writing to the Plan. Member Services will make every effort to investigate and resolve all Complaints. Member Services can be reached at (800) 499-3416 *(toll-free)*.

Oral Complaints: A complainant may orally submit a Complaint to the Plan. If the oral Complaint is not resolved to the complainant's satisfaction within *ten (10) business days* of receipt of the Complaint, the Plan will provide a Complaint form to the complainant, which must be completed and returned to the Plan for further consideration. Upon request, Member Services will provide assistance in submitting the Complaint form.

Written Complaints: A complainant can seek further review of a Complaint not resolved by phone by submitting a written Complaint form. A Member, or his/her Authorized Representative may send the completed Complaint form, including comments, documents, records and other information relating to the Complaint, the reasons they believe they are entitled to benefits and any other supporting documents to: Sanford Health Plan, ATTN: NDPERS/Member Services, PO Box 91110, Sioux Falls, SD 57109.

Member Services will notify the complainant within *ten (10) business days* upon receipt of the Complaint form, unless the Complaint has been resolved to the complainant's satisfaction within those *ten (10) business days*.

Upon request and at no charge, the complainant will be given reasonable access to and copies of all documents, records and other information relevant to the Complaint. Member Services will investigate and review the Complaint and notify the complainant of Sanford Health Plan's decision in accordance with the following timelines:

- A decision and written notification on the Complaint will be made to the complainant, his or her Practitioners and/or Providers involved in the provision of the service within *thirty (30) calendar days* from the date the Plan receives your request.
- In certain circumstances, the time period may be extended by up to fourteen (14) days upon agreement. In such cases, the Plan will notify the complainant in advance, of the reasons for the extension.

Any complaints related to the quality of care received are subject to practitioner review. If the complaint is related to an Urgent clinical matter, it will be handled in an expedited manner and a response will be provided within seventy-two (72) hours.

If the complaint is not resolved to the Member's satisfaction, the Member, or his/her Authorized Representative, has the right to appeal any adverse determination made by Sanford Health Plan. Appeal Rights may be requested by calling the Plan at (800) 499-3416.

All notifications described above will comply with applicable law. A complete description of your Appeal rights and the Appeal process will be included in your written response.

Types of Appeals

Types of appeals include:

- A **Prospective (Pre-Service) Appeal** is a request to change an Adverse Determination that the Plan must approve in whole or in part in advance of the Member obtaining care or services.
- A **Retrospective (Post-Service) Appeal** is a request to change an Adverse Determination for care or services already received by the Member.
- An **Expedited Appeal for Urgent Care** is a request to change a previous Adverse Determination made by Sanford Health Plan for an Urgent Care Request. If the Member's situation meets the definition of Urgent, their review will generally be conducted within 72 hours.

Continued Coverage for Concurrent Care

A Member is entitled to continued coverage for concurrent care pending the outcome of the appeals process; benefits for an ongoing course of treatment cannot be reduced or terminated without providing advance notice sufficient to allow the claimant to appeal and obtain a review determination before the benefit is reduced or terminated. Review determinations would be made within *twenty-four (24)* hours.

Audit Trails

Audit trails for Complaints, Adverse Determinations and Appeals are provided by the Plan's Information System and an Access database which includes documentation of the Complaints, Adverse Determination and/or Appeals by date, service, procedure, substance of the Complaint/Appeal (including any clinical aspects/details, and reason for the Complaint, Adverse Determination and/or Appeal. The Appeal file includes telephone notification, and documentation indicating the date; the name of the person spoken to; the Member; the service, procedure, or admission authorization/approval; and the date of the service, procedure, or Adverse Determination and reason for determination. If the Plan indicates authorization/approval by use of a number, the number must be called the "authorization number."

Internal Appeal Procedure

Filing Deadline

Appeals may be made for up to 180 days from notification of the Adverse Determination.

Within *one-hundred-eighty (180) days* after the date of receipt of a notice of an Adverse Determination sent to a Member or the Member's Authorized Representative (as designated in writing by the Member), the Member or their Authorized Representative may file an Appeal with the Plan requesting a review of the Adverse Determination.

To Appeal, the Member may sign into their account at www.sanfordhealthplan.com/memberlogin and complete the "Appeal Filing Form" under the *Forms* tab. The Member or their Authorized Representative may also contact the Plan by sending a written Appeal to the following address: Sanford Health Plan, ATTN: NDPERS, PO Box 91110, Sioux Falls, SD 57109-1110 or calling phone: (800) 499-3416 | TTY/TDD: (877) 652-1844 *(toll-free)*. If the Member, Authorized Representative, Practitioner/Provider, and/or attorney, has questions, they are encouraged to contact the Plan toll-free at (800) 499-3416 | TTY/TDD: (877) 652-1844 *(toll-free)*. Member Services is available to help with understanding information and processes. Alternate formats are also available and translation is available free of charge for written materials and Member communication with the Plan.

Appeal Rights

If the Member or their Authorized Representative (as designated in writing by the Member) files an Appeal for an Adverse Determination, the following Appeal Rights apply:

1. The Member shall have the opportunity to submit written comments, documents, records and other information relating to the claim for benefits. Members do not have the right to attend or have a representative attend the first level review.

2. The Member shall be provided, free of charge, with any new or additional evidence considered, relied upon, or generated by, or at the direction of, Sanford Health Plan in connection with the claim; and such evidence shall be provided as soon as possible and sufficiently in advance of the date on which the notice of final internal Adverse Determination is required to be provided to give the Member a reasonable opportunity to respond prior to that date.
3. Before Sanford Health Plan can issue a final Adverse Determination based on a new or additional rationale, the Member must be provided, free of charge, with the rationale; the rationale must be provided as soon as possible and sufficiently in advance of the date on which the notice of Adverse Determination is required to be provided and give the Member a reasonable opportunity to respond prior to the date.
4. The Member shall be provided, upon request and free of charge, reasonable access to, and copies of, all documents, records and other information relevant to the Member's initial request.
5. The review shall take into account all comments, documents, records, and other information submitted by the Member relating to the claim, without regard to whether such information was submitted or considered in the initial benefit determination.
6. Full and thorough investigation of the substance of the Appeal, including any aspects of clinical care involved, will be coordinated by the Member Services Manager. The Plan will document the substance of the Appeal and any actions taken.
7. The review shall not afford deference to the initial Adverse Determination and shall be conducted by a named Plan representative who is neither the individual who made the Adverse Determination that is the subject of the appeal, nor the subordinate of such individual.
8. In deciding an appeal of any Adverse Determination that is based in whole or in part on a medical judgment, including determinations with regard to whether a particular treatment, medication or other item is Experimental, Investigational, or not Medically Necessary or appropriate, the Plan shall consult with a health care professional who has appropriate training and experience in the field of medicine involved in the medical judgment. The health care Practitioner and/or Provider engaged for purposes of a consultation under this paragraph shall be an individual who is neither an individual who was consulted in connection with the Adverse Determination that is the subject of the appeal, nor the subordinate of any such individual.
9. The Plan shall identify the medical or vocational experts whose advice was obtained on behalf of the Plan in connection with a Member's Adverse Determination, without regard to whether the advice was relied upon in making the benefit request determination.
10. In order to ensure the independence and impartiality of the persons involved in making claims determinations and appeals decisions, all decisions regarding hiring, compensation, termination, promotion, or other similar matters with respect to any individual (such as a claims adjudicator or medical expert) shall not be made based upon the likelihood that the individual will support the denial of benefits.
11. The attending Practitioner and/or Provider and the Member will be made aware of their responsibility for submitting the documentation required for resolution of the Appeal within three (3) business days of receipt of the Appeal. Sanford Health Plan will provide notice of any Adverse Determination in a manner consistent with applicable federal regulations.

For Prospective (Pre-service) Appeals: the Plan will notify the Member or their Authorized Representative and any Practitioner and/or Providers involved in the Appeal in writing or electronically within thirty (30) calendar days of receipt of the Appeal.

For Retrospective (Post-service) Appeals: the Plan will notify the Member or their Authorized Representative and any Practitioner and/or Providers involved in the Appeal in writing or electronically within sixty (60) calendar days of receipt of the Appeal.

Expedited Internal Appeal Procedure

An **Expedited Appeal Procedure** is used when the condition presents as part of an Urgent Care Situation, as defined previously in this Certificate of Insurance.

An expedited review involving **Urgent Care Requests for Adverse Determinations of Pre-service or Concurrent** claims must be utilized if the Member or Practitioner and/or Provider acting on behalf of the Member believe that an expedited determination is warranted. All of the procedures of a standard review described apply. In addition, for an Expedited Appeal, the request for an expedited review may be submitted. This can be done orally or in writing and the Plan will accept all necessary information by telephone or electronically. In such situations, the Practitioner who made the initial Adverse Determination may review the appeal and overturn the previous decision.

The determination will be made and provided to the Member and those Practitioners and/or Providers involved in the appeal via oral notification by the Utilization Management Department as expeditiously as the Member's medical condition requires but no later than within seventy-two (72) hours of receipt of the request. Sanford Health Plan will notify you orally by telephone or in writing by facsimile or via other expedient means. The Member and those Practitioners and/or Providers involved in the appeal will receive written notification within three (3) calendar days of the telephone notification. If your claim is no longer considered Urgent, it will be handled in the same manner as a Non-Urgent Pre-service or a Non-Urgent Post-Service Appeal, depending upon the circumstances.

If the Expedited Review is a Concurrent Review determination, the service must be continued without liability to the Member until the Member or the representative has been notified of the determination.

Written Notification Process for Internal Appeals

The written notification from Sanford Health Plan for an Appeal of an Adverse Determination will include the following:

1. The results and date of the Appeal Determination;
2. The specific reason for the Adverse Determination in easily understandable language;
3. The titles and qualifications, including specialty, of the person or persons participating in the first level review process (Reviewer names are available upon request);
4. Reference to the evidence, benefit provision, guideline, and/or protocol used as the basis for the decision and notification that the Member on request can have a copy of the actual benefit provisions, guidelines, and protocols free of charge;
5. Notification the Member can receive, upon request and free of charge, reasonable access and copies of all documents, records and other

information relevant to the Member's benefit request;
6. Statement of the reviewer's understanding of the Member's Appeal;
7. The Reviewer's decision in clear terms and the Contract basis or medical rationale in sufficient detail for the Member to respond further;
8. If the Adverse Determination is based on medical necessity, notification and instructions on how the Practitioner and/or Provider can contact the Practitioner and/or Provider or appropriate specialist to discuss the determination;
9. If the Adverse Determination is based on medical necessity or an Experimental or Investigational treatment or similar exclusion or limit, either an explanation of the scientific or clinical judgment for making the determination, applying the terms of the Plan to the Member's medical circumstances or a statement that an explanation will be provided to the Member free of charge upon request;
10. If applicable, instructions for requesting:
    a. A copy of the rule, guideline, protocol, or other similar criterion relied upon in making the Adverse Determination; or
    b. The written statement of the scientific or clinical rationale for the determination;
11. For Adverse Determinations of **Prospective (Pre-service)** or **Retrospective (Post-service) Review**, a statement indicating:
    a. The written procedures governing the voluntary review, including any required timeframe for the review; and
    b. The Member's right to bring a civil action in a court of competent jurisdiction;
12. Notice of the Member's right to contact the North Dakota Insurance Commissioner for assistance at any time at:
    North Dakota Insurance Department
    600 E. Boulevard Ave.
    Bismarck, ND 58505-0320
    Email: insurance@nd.gov
    Consumer hotline: (800) 247-0560 *(toll-free)*
    TTY: (800) 366-6888 *(toll-free)*
13. Notice of the right to initiate the External Review process for Adverse Determinations based on medical necessity. Refer to "Independent, External Review of Final Determinations" in this Section for details on this process. Final Adverse Determination letters will contain information on the circumstances under which Appeals are eligible for External Review and information on how the Member can seek further information about these rights.
14. If the Adverse Determination is completely overturned, the decision notice must state the decision and the date.

Independent, External Review of Final Determinations (Denials)

Standard External Review Request

Members may file a request for External Review with the Plan or with the North Dakota Commissioner of Insurance at:

North Dakota Insurance Department
600 E. Boulevard Avenue
Bismarck, ND 58505-0320
Phone: (800) 247-0560 *(toll-free)*
Email: insurance@nd.gov
TTY: (800) 366-6888 *(toll-free)*

For independent, External Review of a final Adverse Determination, the Plan will provide:

1. Members the right to an independent, third party, binding review whenever they meet the following eligibility criteria:
    a. The Member is Appealing an Adverse Determination that is based on medical necessity (benefits Adverse Determinations are not eligible);
    b. Sanford Health Plan has completed the internal Appeal review and its decision is unfavorable to the Member, or has exceeded the time limit for making a decision, or Sanford Health Plan has elected to bypass the available internal level of Appeal with the Member's permission;
    c. The request for independent, External Review is filed within four (4) months of the date that the Plan's Adverse Determination was made.
2. Notification to Members about the independent, External Appeal program and decision are as follows:
    a. General communications to Members, at least annually, to announce the availability of the right to independent, External Review.
    b. Letters informing Members and Practitioners of the upholding of an Adverse Determination covered by this standard including notice of the independent, External Appeal rights, directions on how to use the process, contact information for the independent, External Review organization, and a statement that the Member does not bear any costs of the independent, External Review organization, unless otherwise required by state law.
    c. The External Review organization will communicate its decision in clear terms in writing to the Member and the Plan. The decision will include:
        i. a general description of the reason for the request for external review;
        ii. the date the independent review organization received the assignment from the Plan to conduct the external review;
        iii. the date the external review was conducted;
        iv. the date of its decision;
        v. the date the external review was conducted;
        vi. the date of its decision;
        vii. the principal reason(s) for the decision, including any, medical necessity rationale or evidence-based standards that were a basis for its decision; and
        viii. the list of titles and qualifications, including specialty, of individuals participating in the appeal review, statement of the reviewer's understanding of the pertinent facts of the appeal and reference to evidence or documentation used as a basis for the decision.
    d. The External Review organization must also notify the Member how and when Members receive any payment or service in the case of overturned Adverse Determinations.
3. Conduct of the External Appeal Review program as follows:
    a. Within five (5) business days following the date of receipt of the external review request, the Plan shall complete a preliminary review of the request to determine whether:

i. The Member is or was a covered person in the health benefit plan at the time the health care service was requested or, in the case of a Retrospective Review, was a covered person in the Plan at the time the health care service was provided;
ii. The health care service that is the subject of the Adverse Determination is a covered service under the Member's health benefit plan, but for a determination by the health carrier that the health care service is not covered because it does not meet the Plan's requirements for medical necessity, appropriateness, health care setting, or level of care or effectiveness;
iii. The Member has exhausted the Plan's internal Appeal process unless the Member is not required to exhaust the Plan's internal Appeal process; and
iv. The Member has provided all the information and forms required to process an external review.

b. Within one (1) business day after completion of the preliminary review, the North Dakota Insurance Department (NDID) shall notify the Member and, if applicable, the Member's authorized representative in writing whether the request is complete and eligible for external review.
   i. If the request is not complete, the NDID shall inform the Member and, if applicable, the Member's authorized representative in writing and include in the notice what information or materials are needed to make the request complete; or if the request is not eligible for external review, the NDID shall inform the Member and, if applicable, the Member's authorized representative in writing and include the reasons for its ineligibility. If the Independent Review Organization upheld the denial, there is no further review available under this appeals process. However, you may have other remedies available under State or Federal law, such as filing a lawsuit.
   ii. If the request is complete, within one (1) business day after verifying eligibility, the NDID shall assign an independent review organization and notify in writing the Member, and, if applicable, the Member's authorized representative of the request's eligibility and acceptance for external review. The Member may submit in writing to the assigned Independent Review Organization within five (5) business days following the date of receipt of the notice provided by the NDID any additional information that the independent review organization shall consider when conducting the external review. The independent review organization is not required to, but may, accept and consider additional information submitted after ten (10) business days.
   iii. Within five (5) business days after the date the NDID determines the request is eligible for external review, of receipt, the NDID shall provide to the assigned independent review organization the documents and any information considered in making the adverse determination or final adverse determination.

c. The North Dakota Insurance Department contracts with the independent, external review organization that:
   i. is accredited by a nationally recognized private accrediting entity;
   ii. conducts a thorough review in which it considers all previously determined facts, allows the introduction of new information, considers and assesses sound medical evidence, and makes a decision that is not bound by the decisions or conclusions of the Plan or determinations made in any prior appeal.
   iii. completes their review and issues a written final decision for non-Urgent appeals within forty-five (45) calendar days of the request. For clinically Urgent Care appeals, the review and decision will be made and orally communicated as expeditiously as the Member's medical condition or circumstances requires, but in no event more than seventy-two (72) hours after the date of receipt of the request for an expedited external review. Within forty-eight (48) hours after the date of providing the oral notification, the assigned independent review organization will provide written confirmation of the decision to the Member, or if applicable, the Member's authorized representative, and their treating Practitioner and/or Provider.
   iv. has no material professional, familial or financial conflict of interest with Sanford Health Plan.

d. With the exception of exercising its rights as party to the appeal, Sanford Health Plan must not attempt to interfere with the Independent Review Organization's proceeding or appeal decision.
e. Sanford Health Plan will provide the Independent Review Organization with all relevant medical records as permitted by state law, supporting documentation used to render the decision pertaining to the Member's case (summary description of applicable issues including the Plan's decision, criteria used and clinical reasons, utilization management criteria, communication from the Member to the Plan regarding the appeal), and any new information related to the case that has become available since the internal appeal decision.
f. The Member is not required to bear costs of the Independent Review Organization's review, including any filing fees.
g. The Member or his/her legal guardian may designate in writing a representative to act on his/her behalf. A Practitioner and/or Provider may not file an Appeal without explicit, written designation by the Member.
h. The Independent Review Organization's decision is final and binding to the Plan and the Plan implements the Independent Review Organization's decision within the timeframe specified by the Independent Review Organization. The decision is not binding to the Member, because the Member has legal rights to pursue further appeals in court if they are dissatisfied with the outcome. However, a Member may not file a subsequent request for external review involving the same adverse determination for which the Member has already received an external review decision.

4. Sanford Health Plan maintains and tracks data on each appeal case, including descriptions of the denied item(s), reasons for denial, Independent, External Review organization decisions and reasons for decisions. Sanford Health Plan uses this information in tracking and evaluating its medical necessity decision-making process and improving the quality of its clinical decision making procedures. This information is reported to the Medical Management Quality Committee when a case is resolved for discussion and plan of care or action.

Expedited External Review Requests

1. A Member or the Member's authorized representative may request an expedited external review of an adverse determination if the adverse determination involves an Urgent Care requests for Prospective (pre-service) or Concurrent Review request for which
   a. the timeframe for completion of a standard internal review would seriously jeopardize the life or health of the Member; or would jeopardize the Member's ability to regain maximum function; or

b. in the case of a request for Experimental or Investigational services, the treating Provider certifies, in writing, that the requested
c. health care services or treatment would be significantly less effective if not promptly initiated.

2. The Member has the right to contact the North Dakota Insurance Commissioner for assistance at any time at:
   North Dakota Insurance Department — Phone: (800) 247-0560 *(toll-free)*
   600 E. Boulevard Avenue — Email: insurance@nd.gov
   Bismarck, ND 58505-0320 — TTY: (800) 366-6888 *(toll-free)*
3. An expedited external review is not provided for Retrospective Adverse Determinations.
4. Immediately upon receipt of the request from the Member or the Member's Representative, the NDID shall determine whether the request is eligible for Expedited External Review. If the request is ineligible for an Expedited External Review as described in (1) above, the NDID will give notification to the Member or the Member's Representative that they may appeal to the state insurance department.
5. Upon determination that the Expedited External Review request meets the reviewability requirements, the NDID shall assign a contracted, independent review organization to conduct the expedited external review. The assigned independent review organization is not bound by any decisions or conclusions reached during the Plan's utilization review or internal appeal process.
6. The Plan will send all necessary documents and information considered in making the Adverse Determination to the assigned independent review organization electronically, by telephone, or facsimile or any other available expeditious method.
7. The independent review organization will make a decision to uphold or reverse the adverse determination and provide oral notification to the Member, and, if applicable, the Member's authorized representative, and the treating Practitioners and/or Providers as expeditiously as the Member's medical condition or circumstances requires but in no event more than *seventy-two (72)* hours after the date of receipt of the request for an expedited external review. The Member and those Practitioners and/or Providers involved in the appeal will receive written notification within *forty-eight (48)* hours of the oral notification.
8. At the same time a Member, or the Member's authorized representative, files a request for an internal Expedited Review of an Appeal involving an Adverse Determination, the Member, or the Member's authorized representative, may also file a request for an external Expedited External Review if the Member has a medical condition where the timeframe for completion of an expedited review would seriously jeopardize the life or health of the Member or would jeopardize their ability to regain maximum function; or if the requested health care service or treatment is Experimental or Investigational and the Member's treating Practitioner and/or Provider certifies in writing that the recommended or requested health care service or treatment that is the subject of the Adverse Determination would be significantly less effective if not promptly initiated.
9. Upon the Plan's receipt of the independent review organization's decision to reverse the adverse determination, the Plan shall immediately approve the coverage that was the subject of the adverse determination.

Section 9. Coordination of Benefits

Sanford Health Plan follows North Dakota Administrative Code §45-08-01.2-03 regarding Coordination of Benefits (COB). The COB provision applies when a person has health care coverage under more than one "plan" as defined for COB purposes.

Applicability

The order of benefits determination rules govern the order in which each plan will pay a claim for benefits. The plan that pays first is called the *primary plan*. The primary plan must pay benefits in accordance with its Certificate of Insurance terms without regard to the possibility that another plan may cover some expenses. The plan that pays after the primary plan is called the *secondary plan*. The secondary plan may reduce the benefits it pays so that payments from all plans do not exceed 100% of the total Allowable Expense.

Definitions (for COB Purposes Only)

A. **A Plan** is any of the following that provides benefits or services for medical or dental care or treatment. If separate contracts are used to provide coordinated coverage for Members of a group, the separate contracts are considered parts of the same plan and there is no COB among those separate contracts.

1. Plan includes: group and non-group insurance contracts, health maintenance organization (HMO) contracts, closed panel plans or other forms of group or group type coverage (whether insured or uninsured); medical care components of long-term care contracts, such as skilled nursing care; medical benefits under group or individual automobile contracts; and Medicare or any other federal governmental plan, as permitted by law.
2. Plan does not include: Hospital indemnity coverage or other fixed indemnity coverage; accident-only coverage; specified disease or specified accident coverage; limited benefit health coverage, as defined by state law; school accident-type coverage; benefits for nonmedical components of long-term care policies; Medicare supplement policies; Medicaid policies; or coverage under other federal governmental plans, unless permitted by law.

Each contract for coverage under Section A. (1) or (2) above is a separate plan. If a plan has two parts and COB rules apply only to one of the two, each of the parts is treated as a separate plan.

B. **This Plan** means, in a COB provision, the part of the contract providing the health care benefits to which the COB provision applies and which may be reduced because of the benefits of other plans. Any other part of the contract providing health care benefits is separate from this Plan. A contract may apply one COB provision to certain benefits, such as dental benefits, coordinating only with similar benefits, and may apply another COB provision to coordinate other benefits.

C. **The order of benefit determination rules** determine whether this Plan is a primary plan or secondary plan when the person has health care coverage under more than one plan. When this Plan is primary, it determines payment for its benefits first before those of any other plan without considering any other plan's benefits. When this Plan is secondary, it determines its benefits after those of another plan and may reduce the benefits it pays so that all plans' benefits do not exceed 100% of the total Allowable Expense.

D. **Allowable Expense** is a health care expense, including deductibles, coinsurance and copayments, that is covered at least in part by any plan covering the person. When a plan provides benefits in the form of services, the reasonable cash value of each service will be considered an Allowable Expense and a benefit paid. An expense that is not covered by any plan covering the person is not an Allowable Expense.

In addition, any expense that a provider by law or in accordance with a contractual agreement is prohibited from charging a covered person is not an Allowable Expense. The following are examples of expenses that are not Allowable Expenses:

1. The difference between the cost of a semiprivate Hospital room and a private Hospital room is not an Allowable Expense, unless one of the plans provides coverage for private Hospital room expenses.
2. If a person is covered by two or more plans that compute their benefit payments on the basis of usual and customary fees or relative value schedule reimbursement methodology or other similar reimbursement methodology, any amount in excess of the highest reimbursement amount for a specific benefit is not an Allowable Expense.
3. If a person is covered by two or more plans that provide benefits or services on the basis of negotiated fees, an amount in excess of the highest of the negotiated fees is not an Allowable Expense.
4. If a person is covered by one plan that calculates its benefits or services on the basis of usual and customary fees or relative value schedule reimbursement methodology or other similar reimbursement methodology and another plan that provides its benefits or services on the basis of negotiated fees, the primary plan's payment arrangement shall be the Allowable Expense for all plans. However, if the provider has contracted with the secondary plan to provide the benefit or service for a specific negotiated fee or payment amount that is different than the primary plan's payment arrangement and if the provider's contract permits, the negotiated fee or payment shall be the Allowable Expense used by the secondary plan to determine its benefits.
5. The amount of any benefit reduction by the primary plan because a covered person has failed to comply with the plan provisions is not an Allowable Expense. Examples of these types of plan provisions include second surgical opinions, Preauthorization/Prior Approval, and preferred provider arrangements.

E. **Closed Panel Plan** is a plan that provides health care benefits to covered persons primarily in the form of services through a panel of providers who have contracted with, or are employed by, the plan; and that excludes coverage for services provided by other providers, except in cases of Emergency or referral by a panel member.

F. **Custodial Parent** is the parent awarded custody by a court decree or, in the absence of a court decree, is the parent with whom the child resides more than one-half of the calendar year excluding any temporary visitation.

Order of Benefit Determination Rules

When a person is covered by two or more plans, the rules for determining the order of benefits payments are as follows:

A. The primary plan pays or provides its benefits according to its terms of coverage and without regard to the benefits of any other plan.

B. (1) Except as provided in paragraph 2.(a) below, plan that does not contain a coordination of benefits provision that is consistent with this regulation is always primary unless the provisions of both plans state that the complying plan is primary.
(2) Coverage that is obtained by virtue of membership in a group that is designed to supplement a part of a basic package of benefits and provides that this supplementary coverage shall be excess to any other parts of the plan provided by the contract holder. Examples of these types of situations are major medical coverages that are superimposed over base plan Hospital and surgical benefits, and insurance type coverages that are written in connection with a closed panel plan to provide Out-of-Network benefits.

C. A plan may consider the benefits paid or provided by another plan in calculating payment of its benefits only when it is secondary to that other plan.

D. Each plan determines its order of benefits using the first of the following rules that apply:

1. Nondependent or Dependent. The plan that covers the person other than as a Dependent, for example as an employee, Member, Certificate holder, subscriber, or retiree, is the primary plan and the plan that covers the person as a Dependent is the secondary plan. However, if the person is a Medicare beneficiary and, as a result of federal law, Medicare is secondary to the plan covering the person as a Dependent; and primary to the plan covering the person as other than a Dependent (e.g., a retired employee); then the order of benefits between the two plans is reversed so that the plan covering the person as an employee, Member, Certificate holder, subscriber, or retiree is the secondary plan and the other plan is the primary plan.
2. Dependent child covered under more than one plan. Unless there is a court decree stating otherwise, when a Dependent child is covered by more than one plan the order of benefits is determined as follows:
   (a) For a Dependent child whose parents are married or are living together, whether or not they have ever been married:
      i. The plan of the parent whose birthday falls earlier in the calendar year is the primary plan; or
      ii. If both parents have the same birthday, the plan that has covered the parent the longest is the primary plan.
   (b) For a Dependent child whose parents are divorced or separated or not living together, whether or not they have ever been married:
      i. If a court decree states that one of the parents is responsible for the Dependent child's health care expenses or health care coverage, and the plan of that parent has actual knowledge of those terms, that plan is primary. This rule applies to plan years commencing after the plan is given notice of the court decree;
      ii. If a court decree states that both parents are responsible for the Dependent child's health care expenses or health care coverage, the provisions of subparagraph a above shall determine the order of benefits;
      iii. If a court decree states that the parents have joint custody without specifying that one parent has responsibility for the health care expenses or health care coverage of the Dependent child, the provisions of subparagraph a above shall determine the order of benefits; or
      iv. If there is no court decree allocating responsibility for the Dependent child's health care expenses or health care coverage, the order of benefits for the child are as follows:
         (i) The plan covering the Custodial Parent;
         (ii) The plan covering the Spouse of the Custodial Parent;
         (iii) The plan covering the non-Custodial Parent; and then
         (iv) The plan covering the Spouse of the non-Custodial Parent.
   (c) For a Dependent child covered under more than one plan of individuals who are the parents of the child, the provisions of subparagraph (a) or (b) above shall determine the order of benefits as if those individuals were the parents of the child.
3. Active employee or retired or laid-off employee. The plan that covers a person is an active employee, that is, an employee who is neither laid off nor retired, is the primary plan. The plan covering that same person as a retired or laid-off employee is the secondary plan. The same would hold true if a person is a Dependent of an active employee and that same person is a Dependent of a retired or laid-off employee. If the other plan does not have this rule, and as a result, the plans do not agree on the order of benefits, this rule is ignored. This rule does not apply if the rule labeled D.(1) can determine the order of benefits.
4. COBRA or state continuation coverage. If a person whose coverage is provided pursuant to COBRA or under a right of continuation provided by state or other federal law is covered under another plan, the plan covering the person as an employee, Member, subscriber, or retiree or covering the person as a Dependent of an employee, Member, subscriber, or retiree is the primary plan and the COBRA or state or other federal continuation coverage is the secondary plan. If the other plan does not have this rule, and as a result, the plans do not agree on the order of benefits, this rule is ignored. This rule does not apply if the rule labeled D.(1) can determine the order of benefits.
5. Longer or shorter length of coverage. The plan that covered the person as an employee, Member, Certificate holder, subscriber, or retiree longer is the primary plan and the plan that covered the person the shorter period of time is the secondary plan.
6. If the preceding rules do not determine the order of benefits, that Allowable Expenses shall be shared equally between the plans meeting the definition of plan. In addition, this Plan will not pay more than it would have paid had it been the primary plan.

Effect of COB on the Benefits of this Plan

A. When this Plan is secondary, it may reduce its benefits so that the total benefits paid or provided by all plans during a plan year are not more than the total Allowable Expenses. In determining the amount to be paid for any claim, the secondary plan will calculate the benefits it would have paid in the absence of other health care coverage and apply that calculated amount to any Allowable Expense under its plan that is unpaid by the primary plan. The secondary plan may then reduce its payment by the amount so that, when combined with the amount paid by the primary plan, the total benefits paid or provided by all plans for the claim do not exceed the total Allowable

Expense for that claim. In addition, the secondary plan shall credit to its plan deductible any amounts it would have credited to its deductible in the absence of other health care coverage.

B. If a covered person is enrolled in two or more closed panel plans and if, for any reason, including the provision of service by a Non-Panel provider, benefits are not payable by one closed panel plan; COB shall not apply between that plan and other closed panel plans.

Right to Receive and Release Needed Information

Certain facts about health care coverage and services are needed to apply these COB rules and to determine benefits payable under this Plan and other plans. Sanford Health Plan may get the facts it needs from or give them to other organizations or persons for the purpose of applying these rules and determining benefits payable under this Plan and other plans covering the person claiming benefits. Sanford Health Plan need not tell, or get the consent of, any person to do this. Each person claiming benefits under this Plan must give Sanford Health Plan any facts it needs to apply those rules and determine benefits payable.

Facility of Payment

A payment made under another plan may include an amount that should have been paid under this Plan. If it does, Sanford Health Plan may pay that amount to the organization that made that payment. That amount will then be treated as though it were a benefit paid under this Plan. Sanford Health Plan will not have to pay that amount again. The term "payment made" includes providing benefits in the form of services, in which case "payment made" means the reasonable cash value of the benefits provided in the form of services.

Right of Recovery

If the amount of the payments made by Sanford Health Plan is more than it should have paid under this COB provision, it may recover the excess from one or more of the persons it has paid or for whom it has paid; or any other person or organization that may be responsible for the benefits or services provided for the covered person. The "amount of the payments made" includes the reasonable cash value of any benefits provided in the form of services.

Coordination of Benefits with Medicare

Medicare Coordination of Benefits provisions apply when a Member has health coverage under the Plan and is enrolled in Medicare, under Parts A, B, or D. This provision applies before any other Coordination of Benefits Provision of the Plan.

If a Practitioner and/or Provider has accepted assignment of Medicare, the Plan pays the difference between what Medicare pays and the Plan's Allowable Expense.

Members with End Stage Renal Disease (ESRD)

1. The Plan has primary responsibility for the claims of a Member:
   a. Who is eligible for Medicare secondary benefits because of ESRD, and;
   b. During the Medicare coordination period of 30 months, which begins with the earlier of:
      i. the month in which a regular course of renal dialysis is initiated, or
      ii. in the case of an individual who receives a kidney transplant, the first month in which the individual became entitled to Medicare.
2. The Plan has secondary responsibility for the claims of a Member:
   a. Who is eligible for Medicare primary benefits because of ESRD, and the Medicare coordination period of thirty (30) months has expired; or
   b. Who is eligible for Medicare on the basis of age or disability when the Member becomes eligible on the basis of ESRD, and certain other conditions are met.

Section 10. Definitions of terms we use in this Certificate of Insurance

Admission	Entry into a facility as an Inpatient for treatment and care when ordered by a Health Care Provider with admitting privileges. An Admission ends when a Member is discharged or released from the facility and is no longer registered as a patient. Also known as Hospitalization.
Allowance or Allowed Charge	The maximum dollar amount that payment for a procedure or service is based on as determined by Sanford Health Plan.
Ambulatory Surgical Center	A lawfully operated, public or private establishment that: a. Has an organized staff of Practitioners; b. Has permanent facilities that are equipped and operated mostly for performing surgery; c. Has continuous Practitioner services and Nursing Services when a patient is in the Facility; and d. Does not have services for an overnight stay.
Annual Enrollment	A period of time at least once a year when Eligible Group Members may enroll themselves and their Dependents in the Plan. Annual Enrollment does not pertain to non-Medicare retirees.
Approved Clinical Trial	A phase I, phase II, phase III, or phase IV clinical trial that is conducted in relation to the prevention, detection, or treatment of cancer or other life-threatening disease or condition and is one of the following: a. A federally funded or approved trial; b. A clinical trial conducted under an FDA investigational new medication application; or c. A medication trial that is exempt from the requirement of an FDA investigational new medication application.
Authorized Representative	A person to whom a covered person has given express written consent to represent the Member, a person authorized by law to provide substituted consent for a Member, a family member of the Member or the Member's treating health care professional if the Member is unable to provide consent, or a health care professional if the Member's Plan requires that a request for a benefit under the plan be initiated by the health care professional. For any Urgent Care Request, the term includes a health care professional with knowledge of the Member's medical condition.
Avoidable Hospital Conditions	Conditions that could reasonably have been prevented through application of evidence-based guidelines. These conditions are not present on admission, but present during the course of the stay. Participating Providers are not permitted to bill the Plan or Members for services related to Avoidable Hospital Conditions.
Basic Plan	The Member elects to access the health care system through a Health Care Provider that is not a part of the Preferred Provider Organization. Benefit payment will be at the Basic Plan level. Health Care Providers accessed at the Basic Plan level are also Participating Providers.
Benefit Period	A specified period of time when benefits are available for Covered Services under this Benefit Plan. A Claim for Benefits will be considered for payment only if the date of service or supply was within the Benefit Period. All benefits are determined on a Calendar Year (January 1st through December 31st) Benefit Period.
Benefit Plan	The agreement with Sanford Health Plan, including the Subscriber's membership application, Identification Card, the Benefit Plan Agreement, this Certificate of Insurance, the Benefit Plan Attachment and any supplements, endorsements, attachments, addenda or amendments
[The] Board	Means the North Dakota Public Employees Retirement System (NDPERS) board.
Calendar Year	A period of one year which starts on January 1st and ends December 31st.
Case Management	A coordinated set of activities conducted for individual patient management of chronic, serious, complicated, protracted, or other health conditions.
Claims Administrator or Claims Payor	Sanford Health Plan
Class of Coverage	The type of coverage the Subscriber is enrolled under, identifying who is eligible to receive benefits for Covered Services under this Benefit Plan. Classes of Coverage under this Benefit Plan are Single Coverage and Family Coverage.
Coinsurance Amount	A percentage of the Allowed Charge for Covered Services that is a Member's responsibility.
Coinsurance Maximum Amount	The total Coinsurance Amount that is a Member's responsibility during a Benefit Period. The Coinsurance Maximum Amount renews on January 1 of each consecutive Benefit Period
Concurrent Review	Concurrent Review is Utilization Review for an extension of previously approved, ongoing course of treatment over a period of time or number of treatments typically associated with Hospital inpatient care including care received at a Residential Treatment Facility and ongoing outpatient services, including ongoing ambulatory care.

[This] Contract or [The] Contract	This Certificate of Insurance, which is a statement of the essential features and services given to the Subscriber by the Plan, including all attachments, the Group's application, the applications of the Subscribers and the Health Maintenance Contract.
Copayment (Copay)	A specified dollar amount payable by the Member for certain Covered Services. Health Care Providers may request payment of the Copayment Amount at the time of service.
Cost Sharing	The share of costs covered by your insurance that you pay out of your own pocket. This term generally includes coinsurance, copayments, or similar charges, but it doesn't include premiums, balance-billing amounts for non-network providers, or the cost of non-covered services.
Covered Services	Those Health Care Services to which a Member is entitled under the terms of This Contract.
Creditable Coverage	Benefits or coverage provided under: a. A group health benefit plan (as such term is defined under North Dakota law); b. A health benefit plan (as such term is defined under North Dakota law); c. Medicare; d. Medicaid; e. Civilian health and medical program for uniformed services; f. A health plan offered under 5 U.S.C. 89; g. A medical care program of the Indian Health Service or of a tribal organization; h. A state health benefits risk pool, including coverage issued under N.D.C.C. Chapter 26.1-08; i. A public health plan as defined in federal regulations, including a plan maintained by a state government, the United States government, or a foreign government; j. A health benefit plan under Section 5(e) of the Peace Corps Act [Pub. L. 87-293; 75 Stat. 612; 22 U.S.C. 2504(e)]; and k. A state's children's health insurance program funded through Title XXI of the federal Social Security Act [42 U.S.C. 1397aa et seq.].
Custodial Care	Care designed to assist the patient in meeting the activities of daily living and not primarily provided for its therapeutic value in the treatment of an illness, disease, injury or condition.
Deductible Amount	A specified dollar amount payable by the Member for certain Covered Services received during the Benefit Period.
Dependent	The Spouse and any Dependent Child of a Subscriber.
Dependent Child	The definition of a Dependent Child of a Subscriber includes a child who is related to the Subscriber as a natural child, a child placed for adoption, a legally adopted child, a child for whom the Subscriber has legal guardianship, a stepchild, or a foster child; and is one of the following: (a) under the age of twenty-six (26), (b) incapable of self-sustaining employment by reason of a disabling condition and chiefly dependent upon the Certificate holder/Subscriber for support and maintenance. If the Plan so requests, the Subscriber must provide proof of the child's disability within thirty-one (31) days of the Plan's request; or (c) the Subscriber's grandchild(ren) or those of the Subscriber's living, covered Spouse, who legally reside with the Certificate holder/Subscriber and (1) the parent of the grandchild(ren) is an Covered Dependent also covered by this Plan; and (2) both the Dependent and child of such Dependent (grandchild) are chiefly dependent upon the Certificate holder/Subscriber for support. Dependent coverage does not include the spouse of an adult Dependent child.
Domiciliary Care	Domiciliary Care consists of a protected situation in a community or Facility, which includes room, board, and personal services for individuals who cannot live independently yet do not require a 24-hour Facility or nursing care.
Eligible Dependent	An Eligible Dependent includes: (1) The Spouse of the Subscriber; and (2) A Dependent child who is related to the Subscriber as a natural child, a child placed for adoption, a legally adopted child, a child for whom the Subscriber has legal guardianship, a stepchild, or a foster child; and is one of the following: (a) under the age of twenty-six (26), (b) incapable of self-sustaining employment by reason of a disabling condition and chiefly dependent upon the Certificate holder/Subscriber for support and maintenance. If the Plan so requests, the Subscriber must provide proof of the child's disability within thirty-one (31) days of the Plan's request; or (c) the Subscriber's grandchild(ren) or those of the Subscriber's living, covered Spouse, who legally reside with the Certificate holder/Subscriber and (1) the parent of the grandchild(ren) is an Covered Dependent also covered by this Plan; and (2) both the Dependent and child of such Dependent (grandchild) are chiefly dependent upon the Certificate holder/Subscriber for support. Eligible Dependents do not include the spouse of an adult Dependent child.
Eligible Group Member	Any Group Member who meets the specific eligibility requirements of NDPERS.

Emergency Care Services	Emergency Care Services means: (1) Within the Service Area: covered health care services rendered by Participating or Non-Participating Providers under unforeseen conditions that require immediate medical attention. Emergency care services within the Service Area include covered health care services from Non-Participating Providers only when delay in receiving care from Participating Providers could reasonably be expected to cause severe jeopardy to the Member's condition or (2) Outside the Service Area: medically necessary health care services that are immediately required because of unforeseen illness or injury while the enrollee is outside the geographical limits of the Plan's Service Area.
Emergency Medical Condition	A medical condition of recent onset and severity, including severe pain, that would lead a prudent layperson acting reasonably and possessing an average knowledge of health and medicine to believe that the absence of immediate medical attention could reasonably be expected to result in serious impairment to bodily function, serious dysfunction of any bodily organ or part, or would place the person's health, or with respect to a pregnant woman, the health of the woman or her unborn child, in serious jeopardy.
Enrollee	An individual who is covered by this Plan.
ESRD	The federal End Stage Renal Disease program.
Expedited Appeal	An expedited review involving Urgent Care Requests for Adverse Determinations of Prospective (Pre-service) or Concurrent Reviews must be utilized if the Member, or Practitioner and/or Provider acting on behalf of the Member, believes that an expedited determination is warranted.
Experimental or Investigational Services	Health Care Services where the Health Care Service in question either: a. is not recognized in accordance with generally accepted medical standards as being safe and effective for treatment of the condition in question, regardless of whether the service is authorized by law or used in testing or other studies; or b. requires approval by any governmental authority and such approval has not been granted prior to the service being rendered.
Facility	An institution providing Health Care Services or a health care setting, including Hospitals and other licensed inpatient centers, ambulatory surgical or treatment centers, Skilled Nursing Facilities, Residential Treatment Facilities, diagnostic, laboratory, and imaging centers, and rehabilitation, and other therapeutic health settings.
Family Coverage	The Class Of Coverage identifying that the Subscriber and Eligible Dependents are enrolled to received benefits for Covered Services under this Plan.
Formulary	A list of prescription medication products, which are preferred by the Plan for dispensing to Members when appropriate. This list is subject to periodic review and modifications. Additional medications may be added or removed from the Formulary throughout the year.
Gestational Carrier	An adult woman who enters into an agreement to have a fertilized egg, gamete, zygote or embryo implanted in her and bear the resulting child for intended parents, where the embryo is conceived by using the egg and sperm of the intended parents.
Grievance	A written complaint submitted in accordance with the Plan's formal grievance procedure by or on behalf of the enrollee regarding any aspect of the Plan relative to the Member.
[The] Group or [This] Group	NDPERS has signed an agreement with Sanford Health Plan to provide health care benefits for its eligible employees, retirees, and Eligible Dependents.
Group Contract Holder	The individual to whom a Group Contract has been issued.
Group Member	Any employee, sole proprietor, partner, director, officer or Member of the Group.
Health Care Services	Services for the diagnosis, prevention, treatment, cure, or relief of a health condition, illness, injury or disease.
Hospital	A short-term, acute care, duly licensed institution that is primarily engaged in providing inpatient diagnostic and therapeutic services for the diagnosis, treatment, and care of injured and sick persons by or under the supervision of Physicians. It has organized departments of medicine and/or major surgery and provides 24-hour nursing service by or under the supervision of registered nurses. The term "Hospital" specifically excludes rest homes, places that are primarily for the care of convalescents, nursing homes, skilled nursing facilities, Residential Care Facilities, custodial care homes, intermediate care facilities, health resorts, clinics, Practitioner and/or Provider's offices, private homes, Ambulatory Surgical Centers, residential or transitional living centers, or similar facilities.
Hospitalization	A stay as an inpatient in a Hospital. Each "day" of Hospitalization includes an overnight stay for which a charge is customarily made. Benefits may not be restricted in a way that is based upon the number of hours that the Member stays in the Hospital.
Iatrogenic Condition	Illness or injury because of mistakes made in medical treatment, such as surgical mistakes, prescribing or dispensing the wrong medication or poor hand writing resulting in a treatment error.

Infertility Services Deductible Amount	A specified dollar amount payable by the Member during their lifetime for infertility services. The Infertility Services Deductible Amount does not apply toward the Out-of-Pocket Maximum Amount.
In-Network Benefit Level	The PPO Plan level of benefits when a Member seeks services from a Participating Practitioner and/or Provider.
Intensive Outpatient Program (IOP)	Provides mental health and/or substance use disorder outpatient treatment services during which a Member remains in the program a minimum of three (3) continuous hours per day and does not remain in the program overnight. Programs may be available in the evenings or weekends.
Intermediate Care	Intermediate Care means care in a Facility, corporation or association licensed or regulated by the State for the accommodation of persons, who, because of incapacitating infirmities, require minimum but continuous care but are not in need of continuous medical or nursing services. The term also includes facilities for the nonresident care of elderly individuals and others who are able to live independently but who require care during the day.
Late Enrollee	An individual who enrolls in a group health plan on a date other than either the earliest date on which coverage can begin under the plan terms or on a special enrollment date.
Maintenance Care	Treatment provided to a Member whose condition/progress has ceased improvement or could reasonably be expected to be managed without the skills of a Health Care Provider. *Exception: periodic reassessments are not considered Maintenance Care.*
Maximum Allowed Amount	The amount established by Sanford Health Plan using various methodologies for covered services and supplies. Sanford Health Plan's Maximum Allowable Amount is the lesser of (a) the amount charged for a covered service or supply; or (b) Reasonable Costs.
Medically Necessary or Medical Necessity	Health Care Services that are appropriate and necessary as determined by any Participating Provider, in terms or type, frequency, level, setting, and duration, according to the Member's diagnosis or condition, and diagnostic testing and Preventive services. Medically Necessary care must be consistent with generally accepted standards of medical practice as recognized by the Plan, as determined by health care Practitioner and/or Providers in the same or similar general specialty as typically manages the condition, procedure, or treatment at issue; and a. help restore or maintain the Members health; or b. prevent deterioration of the Member's condition; or c. prevent the reasonably likely onset of a health problem or detect an incipient problem; or d. not considered Experimental or Investigative
Medical Out-of-Pocket Maximum Amount	The total Deductible and Coinsurance Amounts for certain Covered Services that are a Member's responsibility during a Benefit Period. When the Out-of-Pocket Maximum Amount is met, this Benefit Plan will pay 100% of the Allowed Charge for Covered Services, less Copayment Amounts incurred during the remainder of the Benefit Period. The Out-of-Pocket Maximum Amount renews on January 1 of each consecutive Benefit Period. Medical Copay amounts apply toward the Medical Out-of-Pocket Maximum Amount. Prescription Medication Copay and Coinsurance Amounts apply toward the Prescription Drug Out-of-Pocket Maximum Amount.
Member	The Subscriber and, if another Class of Coverage is in force, the Subscriber's Eligible Dependents
Mental Health and/or Substance Use Disorder Services	Health Care Services for disorders specified in the Diagnostic and Statistical Manual of Mental Disorders (DSM), the American Society of Addiction Medicine Criteria (ASAM Criteria), and the International Classification of Diseases (ICD), current editions. Also referred to as behavioral health, psychiatric, chemical dependency, substance abuse, and/or addiction services.
Natural Teeth	Teeth, which are whole and without impairment or periodontal disease, and are not in need of the treatment provided for reasons other than dental injury.
NDPERS	the North Dakota Public Employees Retirement System.
Never Event	Errors in medical care that are clearly identifiable, preventable, and serious in their consequences for patients, and indicate a problem in the safety and credibility of a health care Facility. Participating Providers are not permitted to bill the Plan or Members for services related to Never Events.
Non-Covered Services	Those Health Care Services to which a Member is not entitled and are not part of the benefits paid under the terms of This Contract.
Non-Participating Provider	A Provider that has not signed a contract with the Plan.
Non-Payable Health Care Provider	A Health Care Provider that is not reimbursable by the Plan. No benefits will be available for Covered Services prescribed by, performed by or under the direct supervision of a Non-Payable Health Care Provider.

Nursing Services	Health Care Services which are provided by a registered nurse (RN), licensed practical nurse (LPN), or other licensed nurse who is: (1) acting within the scope of that person's license, (2) authorized by a Provider, and (3) not a Member of the Member's immediate family.
Out-of-Network Benefit Level	The Basic Plan level of benefits provided when a Member seeks services from a Non-Participating Practitioner and/or Provider. This is most often referred to as benefits received under the Basic Plan level but may include services received from Practitioners and/or Providers that have not signed a contract with the Plan.
Partial Hospitalization	Also known as day treatment; A licensed or approved day or evening outpatient treatment program that includes the major diagnostic, medical, psychiatric and psychosocial rehabilitation treatment modalities designed for individuals with mental health and/or substance use disorders who require coordinated, intensive, comprehensive and multi-disciplinary treatment.
Participating [Health Care] Provider	A Provider who, under a contract with the Plan, or with its contractor or subcontractor, has agreed to provide Health Care Services to Members with an expectation of receiving payment, other than Coinsurance, Copays, or Deductibles, directly or indirectly, from the Plan. A Participating Provider includes Providers at either the Basic or PPO Plan level.
Physician	An individual licensed to practice medicine or osteopathy.
[The] Plan or [This] Plan	Sanford Health Plan.
Plan Administrator	North Dakota Public Employees Retirement System (NDPERS)
PPO (Preferred Provider Organization) Plan	A group of Health Care Providers who provide discounted services to the Members of NDPERS. Because PPO Health Care Providers charge Sanford Health Plan less for medical care services provided to the Members of NDPERS, cost savings are passed on to Members by way of reduced Cost Sharing Amounts. To receive a higher payment level, Covered Services must be received from an NDPERS PPO Health Care Provider. Health Care Providers accessed at the PPO level are also Participating Providers.
Practitioner	A professional who provides health care services. Practitioners are usually required to be licensed as required by law. Practitioners are also Physicians.
Preauthorization	The process of the Member or the Member's representative notifying Sanford Health Plan to request approval for specified services. Eligibility for benefits for services requiring Preauthorization is contingent upon compliance with the provisions in Sections 2, 4 and 5. Preauthorization does not guarantee payment of benefits.
Prescription Drug Out-of-Pocket Maximum Amount	The total Formulary Coinsurance Amount for Prescription Medications that is a Member's responsibility during a Benefit Period. When this Prescription Drug Out-of-Pocket Maximum Amount is met, this Benefit Plan will pay 100% of the Allowed Charge for Formulary Prescription Medications. This Prescription Drug Out-of-Pocket Maximum Amount renews on January 1 of each consecutive Benefit Period. Medical Copay amounts apply toward the Medical Out-of-Pocket Maximum Amount. Prescription Medication Copay and Coinsurance Amounts apply toward the Prescription Drug Out-of-Pocket Maximum Amount
Preventive	Health Care Services that are medically accepted methods of prophylaxis or diagnosis which prevent disease or provide early diagnosis of illness and/or which are otherwise recognized by the Plan.
Primary Care Practitioner and/or Provider (PCP)	A Participating Practitioner and/or Provider who is an internist, family practice Physician, pediatrician, or obstetrician/gynecologist, who is a Participating Practitioner, and who has been chosen to be designated as a Primary Care Practitioner and/or Provider as indicated in the Provider Directory and may be responsible for providing, prescribing, directing, referring, and/or authorizing all care and treatment of a Member.
Prior Approval	The process of the Member or Member's representative providing information to Sanford Health Plan substantiating the medical appropriateness of specified services in order to receive benefits for such service. This information must be submitted in writing from the Member's Health Care Provider. Sanford Health Plan reserves the right to deny benefits if Preauthorization/Prior Approval is not obtained.
Prospective (Pre-service) Review	Means Urgent and non-Urgent Utilization Review conducted prior to an admission or the provision of a Health Care Service or a course of treatment.
[Health Care] Provider	An individual, institution or organization that provides services for Plan Members. Examples of Providers include but are not limited to Hospitals, Physicians, Practitioners and/or Providers, and home health agencies.
Prudent Layperson	A person who is without medical training and who possess an average knowledge of health and medicine and who draws on his/her practical experience when making a decision regarding the need to seek Emergency medical treatment.
Qualified Mental Health Professional	A licensed Physician who is a psychiatrist; a licensed clinical psychologist who is qualified for listing on the national register of health service providers in psychology; a licensed certified social worker who is a board-certified in clinical social work; or a nurse who holds advanced licensure in psychiatric nursing

Reasonable Costs	Those costs that do not exceed the lesser of (a) negotiated schedules of payment developed by the Plan, which are accepted by Participating Practitioners and/or Providers; or (b) the prevailing marketplace charges.
Residential Treatment Facility	An inpatient mental health or substance use disorder treatment Facility that provides twenty-four (24) hour availability of qualified medical staff for psychiatric, substance abuse, and other therapeutic and clinically informed services to individuals whose immediate treatment needs require a structured twenty-four (24) hour residential setting that provides all required services on site. Services provided include, but are not limited to, multi-disciplinary evaluation, medication management, individual, family and group therapy, substance abuse education/counseling. Facilities must be under the direction of a board-eligible or certified psychiatrist, with appropriate staffing on-site at all times. If the Facility provides services to children and adolescents, it must be under the direction of a board-eligible or certified child psychiatrist or general psychiatrist with experience in the treatment of children. Hospital licensure is required if the treatment is Hospital-based. The treatment Facility must be licensed by the state in which it operates.
Retrospective (Post-service) Review	Means any review of a request for a benefit that is not a Prospective (Pre-service) Review request, which does not include the review of a claim that is limited to veracity of documentation, or accuracy of coding, or adjudication of payment. Retrospective (Post-service) Review will be utilized by Sanford Health Plan to review services that have already been utilized.
Serious Reportable Event	An event that results in a physical or mental impairment that substantially limits one or more major life activities of a Member or a loss of bodily function, if the impairment or loss lasts more than seven (7) days or is still present at the time of discharge from an inpatient health care Facility. Serious events also include loss of a body part and death. Participating Providers are not permitted to bill Members or the Plan for services related to Serious Reportable Events.
[NDPERS] Service Agreement and/or [Group] Contract	The Service Agreement between NDPERS and Sanford Health Plan that is a contract for Health Care Services, which by its terms limits eligibility to enrollees of a specified group. The Group Contract may include coverage for Dependents.
Service Area	The geographic Service Area approved by the State's Insurance Department.
Single Coverage	The Class Of Coverage identifying that only the Subscriber is enrolled to received benefits for Covered Services under this Plan.
Skilled Nursing Facility	A Facility that is operated pursuant to the presiding state law and is primarily engaged in providing room and board accommodations and skilled nursing care under the supervision of a duly-licensed Physician.
Spouse	The Subscriber's spouse under a legally existing marriage between persons of the opposite sex.
[This] State	The State of North Dakota.
Subscriber	An Eligible Group Member who is enrolled in the Plan whose employment or other status (except family dependency) is the basis for eligibility for enrollment in the Plan. A Subscriber is also a Member and Enrollee.
Surrogate	An adult woman who enters into an agreement to bear a child conceived through assisted conception for intended parents.
Urgent Care Request	Means a request for a Health Care Service or course of treatment with respect to which the time periods for making a non-Urgent Care Request determination which: 1. Could seriously jeopardize the life or health of the Member or the ability of the Member to regain maximum function, based on a Prudent Layperson's judgment; or 2. In the opinion of a Practitioner and/or Provider with knowledge of the Member's medical condition, would subject the Member to severe pain that cannot be adequately managed without the health care service or treatment that is the subject of the request.
Urgent Care Situation	An Urgent Care Situation is a degree of illness or injury, which is less severe than an Emergency Condition, but requires prompt medical attention within *twenty-four (24)* hours, such as stitches for a cut finger. Urgent care means a request for a health care service or course of treatment with respect to which the time periods for making a non-Urgent Care Request determination: 1. Could seriously jeopardize the life or health of the Member or the ability of the Member to regain maximum function, based on a Prudent Layperson's judgment; or 2. In the opinion of a Practitioner and/or Provider with knowledge of the Member's medical condition, would subject the Member to severe pain that cannot be adequately managed without the health care service or treatment that is the subject of the request.
Us/We/Our	Refers to Sanford Health Plan

Utilization Review	A set of formal techniques used by the Plan to monitor and evaluate the medical necessity, appropriateness, and efficiency of Health Care Services and procedures including techniques such as ambulatory review, Prospective (pre-service) Review, second opinion, Preauthorization/Prior Approval, Concurrent Review, Case Management, discharge planning, and retrospective (post-service) review.

Section 11. How coverage ends

Termination of Member Coverage

For the purposes of this Benefit Plan, upon termination of Member Coverage, the following provisions control:

1. **Determining Ineligibility.** Eligibility for benefits subsequent to retirement or termination will be determined pursuant to N.D.C.C. §54-52.1-03.
2. **Continuation of health, dental, vision, or prescription drug coverage after termination.** An employee who terminates employment and is not receiving a monthly retirement benefit from one of the eligible retirement systems, and applies for continued coverage with the health, dental, vision, or prescription drug plan may continue such coverage for a maximum of eighteen (18) months by remitting timely payments to the Board. The employee desiring coverage shall notify the Board within sixty (60) days of the termination. Coverage will become effective on the first day of the month following the last day of coverage by the employing agency, if an application is submitted within sixty (60) days. An individual who fails to timely notify the board is not eligible for coverage. [N.D.A.C. §71-03-03-06]
3. **Continuation of health, dental, vision, or prescription drug coverage for dependents.** Dependents of employees with family coverage may continue coverage with the group after their eligibility would ordinarily cease. This provision includes divorced or widowed spouses and children when they are no longer dependent on the employee. Coverage is contingent on the prompt payment of the premium, and in no case will coverage continue for more than thirty-six (36) months. Dependents desiring coverage shall notify the board within sixty (60) days of the qualifying event and must submit an application in a timely manner. An individual who fails to notify the Board within the sixty (60) days, and who desires subsequent coverage, will not be eligible for coverage. [N.D.A.C. §71-03-03-07]
4. **Leave without pay.** An employee on an approved leave without pay may elect to continue coverage for the periods specified in the plans for life insurance, health, dental, vision, or prescription drug coverages by paying the full premium to the agency. An eligible employee electing not to continue coverage during a leave of absence is entitled to renew coverage for the first of the month following the month that the employee has returned to work if the employee submits an application for coverage within the first thirty-one (31) days of returning to work. An eligible employee failing to submit an application for coverage within the first thirty-one (31) days of returning to work or eligibility for a special enrollment period, may enroll during the annual open enrollment. Upon a showing of good cause, the executive director may waive the thirty-one day application requirement. [N.D.A.C. §71-03-03-09]
    a. In the event an enrolled eligible employee is not entitled to receive salary, wages, or other compensation for a particular calendar month, that employee may make direct payment of the required premium to the board to continue the employee's coverage, and the employing department, board, or agency shall provide for the giving of a timely notice to the employee of that person's right to make such payment at the time the right arises. [N.D.C.C. §54-52.1-06]

Note: A Member's coverage may not be terminated due to the status of the Member's health, or because the Member has exercised his or her rights, under the Plan's policy on member complaints, or the policy on appeal procedures for medical review determinations. For details on Complaints and Appeals, see Section 8 of this COI.

Continuation

1. If the Subscriber becomes ineligible for group membership under this Benefit Plan due to an inability to meet NDPERS requirements and enrollment regulations, coverage will be canceled at the end of the last month that premium was received from the Plan Administrator. Exceptions may be made if:
    a. The Plan Administrator cancels coverage. Conversion coverage will not be offered to a Subscriber, if on the date of conversion, the Plan Administrator through which the Subscriber is eligible has terminated coverage with Sanford Health Plan, and the Plan Administrator has enrolled with another insurance carrier.
    b. The Plan Administrator no longer meets Sanford Health Plan's group coverage requirements. The Subscriber will be given the right to convert to a nongroup benefit plan, subject to premiums and benefit plan provisions in effect, if application for such coverage is made within 31 days after the termination date of the previous benefit plan.
    c. Ineligibility occurs because the Subscriber elects to discontinue employment, is terminated or is otherwise no longer covered under the group health plan. The Subscriber may elect continuation coverage through the Plan Administrator in accordance with state and federal law.
    d. Ineligibility occurs because the Subscriber is no longer eligible to continue coverage under the group (NDPERS). The Subscriber may elect conversion (individual) coverage on a nongroup basis, subject to premiums and benefit plan provisions for nongroup coverage then in effect, if the Subscriber applies for nongroup coverage within 31 days after the termination date of the previous group health plan coverage.
2. If a Member becomes otherwise ineligible for group membership under this Benefit Plan, Sanford Health Plan must at least offer the Subscriber its conversion (individual) benefit plan, if the Member lives in the Sanford Health Plan Service Area. There may be other coverage options for the Subscriber and/or Eligible Dependents through the Health Insurance Marketplace, Medicaid, or other group health plan coverage options (such as a spouse's plan) through what is called a "special enrollment period." The cost of these options may vary depending on a Subscriber's individual circumstances. To learn more, visit www.healthcare.gov or call (800) 318-2596 | TTY/TDD: (855) 889-4325.

Continuation of Coverage for Confined Members

Any Member who is an inpatient in a Hospital or other Facility on the date of coverage termination under this Benefit Plan will be covered in accordance with the terms of this Certificate until they are discharged from such Hospital or other Facility. Applicable charges for coverage that was in effect prior to termination of this Certificate will apply.

Extension of Benefits for Total Disability

An extension of benefits is provided Covered Members/Subscribers who become totally disabled while enrolled under this Benefit Plan and whom continue to be totally disabled at the date of termination of this Certificate. Upon payment applicable premium charges at the current Group rate, coverage will remain in full force and effect until the first of the following occurs:

1. The end of a period of twelve (12) months starting with the date of termination of the Group contract;
2. The date the Member is no longer totally disabled; or
3. The date a succeeding plan provides replacement coverage to that Member without limitation as to the disabling condition.

Upon termination of the extension of benefits, the Member/Subscriber will have continuation and conversion rights as stated in Sections 11 and 12.

Cancellation of This or Previous Benefit Plans

If the Benefit Plan is terminated, modified or amended, coverage is automatically terminated, modified or amended for all enrolled Members of the NDPERS Dakota Plan. It is the Plan Administrator's responsibility to notify Members of the termination of coverage.

Notice of Creditable Coverage

You may request a Certificate of Creditable Coverage for you and your covered family Members upon your voluntary or involuntary termination from the Plan. You may also request a Certificate of Creditable Coverage at any time by calling Member Services toll-free at (800) 499-3416 | TTY/TDD: (877) 652-1844 *(toll-free)*. Written requests can be sent to MemberServices@sanfordhealth.org or:
Sanford Health Plan
ATTN: NDPERS/Member Services
PO Box 91110
Sioux Falls, SD 57109-1110

Section 12. Options after Coverage Ends

Federal Continuation of Coverage Provisions ("COBRA")

Notice of Continuation Coverage Rights Under COBRA

Introduction

You're getting this notice because you recently gained coverage under a group health plan (the Plan). This notice has important information about your right to COBRA continuation coverage, which is a temporary extension of coverage under the Plan. This notice explains COBRA continuation coverage, when it may become available to you and your family, and what you need to do to protect your right to get it. When you become eligible for COBRA, you may also become eligible for other coverage options that may cost less than COBRA continuation coverage.

The right to COBRA continuation coverage was created by a federal law, the Consolidated Omnibus Budget Reconciliation Act of 1985 (COBRA). COBRA continuation coverage can become available to you and other members of your family when group health coverage would otherwise end. For more information about your rights and obligations under the Plan and under federal law, you should review the Plan's Summary Plan Description or contact the Plan Administrator.

You may have other options available to you when you lose group health coverage. For example, you may be eligible to buy an individual plan through the Health Insurance Marketplace. By enrolling in coverage through the Marketplace, you may qualify for lower costs on your monthly premiums and lower out-of-pocket costs. Additionally, you may qualify for a 30-day special enrollment period for another group health plan for which you are eligible (such as a spouse's plan), even if that plan generally doesn't accept "Late Enrollees".

What is COBRA Continuation Coverage?

COBRA continuation coverage is a continuation of Plan coverage when it would otherwise end because of a life event. This is also called a "qualifying event." Specific qualifying events are listed later in this notice. After a qualifying event, COBRA continuation coverage must be offered to each person who is a "qualified beneficiary." You, your spouse, and your dependent children could become qualified beneficiaries if coverage under the Plan is lost because of the qualifying event. Under the Plan, qualified beneficiaries who elect COBRA continuation coverage must pay for COBRA continuation coverage.

If you're an employee, you'll become a qualified beneficiary if you lose your coverage under the Plan because of the following qualifying events:

- Your hours of employment are reduced, or
- Your employment ends for any reason other than your gross misconduct.

If you're the spouse of an employee, you'll become a qualified beneficiary if you lose your coverage under the Plan because of the following qualifying events:

- Your spouse dies;
- Your spouse's hours of employment are reduced;
- Your spouse's employment ends for any reason other than his or her gross misconduct;
- Your spouse becomes entitled to Medicare benefits (under Part A, Part B, or both); or
- You become divorced or legally separated from your spouse.

Your dependent children will become qualified beneficiaries if they lose coverage under the Plan because of the following qualifying events:

- The parent-employee dies;
- The parent-employee's hours of employment are reduced;
- The parent-employee's employment ends for any reason other than his or her gross misconduct;
- The parent-employee becomes entitled to Medicare benefits (Part A, Part B, or both);
- The parents become divorced or legally separated; or
- The child stops being eligible for coverage under the Plan as a "dependent child."

Sometimes, filing a proceeding in bankruptcy under title 11 of the United States Code can be a qualifying event. If a proceeding in bankruptcy is filed with respect to NDPERS, and that bankruptcy results in the loss of coverage of any retired employee covered under the Plan, the retired employee will become a qualified beneficiary. The retired employee's spouse, surviving spouse, and dependent children will also become qualified beneficiaries if bankruptcy results in the loss of their coverage under the Plan.

When is COBRA Coverage Available?

The Plan will offer COBRA continuation coverage to qualified beneficiaries only after the Plan Administrator has been notified that a qualifying event has occurred. The employer must notify the Plan Administrator of the following qualifying events:

- The end of employment or reduction of hours of employment;
- Death of the employee;
- Commencement of a proceeding in bankruptcy with respect to the employer; or
- The employee's becoming entitled to Medicare benefits (under Part A, Part B, or both).

For all other qualifying events (divorce or legal separation of the employee and spouse or a dependent child's losing eligibility for coverage as a dependent child), you must notify the Plan Administrator within 60 days after the qualifying event occurs. You must provide this notice to:

North Dakota Public Employees Retirement System
400 East Broadway, Suite 505
PO Box 1657
Bismarck, ND 58502
(701) 328-3900

How is COBRA Coverage Provided?

Once the Plan Administrator receives notice that a qualifying event has occurred, COBRA continuation coverage will be offered to each of the qualified beneficiaries. Each qualified beneficiary will have an independent right to elect COBRA continuation coverage. Covered employees may elect COBRA continuation coverage on behalf of their spouses, and parents may elect COBRA continuation coverage on behalf of their children.

COBRA continuation coverage is a temporary continuation of coverage that generally lasts for 18 months due to employment termination or reduction of hours of work. Certain qualifying events, or a second qualifying event during the initial period of coverage, may permit a beneficiary to receive a maximum of 36 months of coverage.

There are also ways in which this 18-month period of COBRA continuation coverage can be extended:

- *Disability extension of 18-month period of COBRA continuation coverage*
  If you or anyone in your family covered under the Plan is determined by Social Security to be disabled and you notify the Plan Administrator in a timely fashion, you and your entire family may be entitled to get up to an additional 11 months of COBRA continuation coverage, for a maximum of 29 months. The disability would have to have started at some time before the 60th day of COBRA continuation coverage and must last at least until the end of the 18-month period of COBRA continuation coverage.
- *Second qualifying event extension of 18-month period of continuation coverage*
  If your family experiences another qualifying event during the 18 months of COBRA continuation coverage, the spouse and dependent children in your family can get up to 18 additional months of COBRA continuation coverage, for a maximum of 36 months, if the Plan is properly notified about the second qualifying event. This extension may be available to the spouse and any dependent children getting COBRA continuation coverage if the employee or former employee dies; becomes entitled to Medicare benefits (under Part A, Part B, or both); gets divorced or legally separated; or if the dependent child stops being eligible under the Plan as a dependent child. This extension is only available if the second qualifying event would have caused the spouse or dependent child to lose coverage under the Plan had the first qualifying event not occurred.

Are there other coverage options besides COBRA Continuation Coverage?

Yes. Instead of enrolling in COBRA continuation coverage, there may be other coverage options for you and your family through the Health Insurance Marketplace, Medicaid, or other group health plan coverage options (such as a spouse's plan) through what is called a "special enrollment period." Some of these options may cost less than COBRA continuation coverage. You can learn more about many of these options at www.healthcare.gov.

If You Have Questions

Questions concerning your Plan or your COBRA continuation coverage rights should be addressed to the contact or contacts identified below. For more information about your rights under the Employee Retirement Income Security Act (ERISA), including COBRA, the Patient Protection and Affordable Care Act, and other laws affecting group health plans, contact the nearest Regional or District Office of the U.S. Department of Labor's Employee Benefits Security Administration (EBSA) in your area or visit www.dol.gov/ebsa. (Addresses and phone numbers of Regional and District EBSA Offices are available through EBSA's website.) For more information about the Marketplace, visit www.healthcare.gov.

Keep Your Plan Informed of Address Changes

To protect your family's rights, let the Plan Administrator know about any changes in the addresses of family members. You should also keep a copy, for your records, of any notices you send to the Plan Administrator.

Plan Contact Information

Sanford Health Plan
300 Cherapa Place, Suite 201
Sioux Falls, SD 57103
(877) 305-5463 *(toll-free)*
TTY/TDD: (877) 652-1844 *(toll-free)*

Section 13. Subrogation and Right of Reimbursement

If a Member is injured or becomes ill because of an action or omission of a third party who is or may be liable to the Member for the injury or illness, the Health Plan may be able to "step into the shoes" of the Member to recover health care costs from the party responsible for the injury or illness. This is called "Subrogation," and this part of This Contract covers such situations.

If a Member has received or receives a recovery from the third party, the Health Plan has a right to reduce benefits, or to be reimbursed for that which it has provided to the Member. This is called "Reimbursement" and this part of This Contract covers such situations.

The Plan will provide Health Care Services to the Member for the illness or injury, just as it would in any other case. However, if the Member accepts the services from the Plan, this acceptance constitutes the Member's consent to the provisions discussed below.

Plan's Rights of Subrogation

In the event of any payments for benefits provided to a Member under this Contract, the Plan, to the extent of such payment, shall be subrogated to all rights of recovery such Member, Member's parents, heirs, guardians, executors, or other representatives may have against any person or organization. These subrogation and reimbursement rights also include the right to recover from uninsured motorist insurance, underinsured motorist insurance, no-fault insurance, automobile medical payments coverage, premises medical expense coverage, and workers compensation insurance or substitute coverage. The Plan shall be entitled to receive from any such recovery an amount up to the Reasonable Cost for the services provided by the Plan. In providing benefits to a Member, the Plan may obtain discounts from its health care Providers, compensate Providers on a capitated basis or enter into other arrangements under which it pays to another less than the Reasonable Costs of the benefits provided to the Member. Regardless of any such arrangement, when a Member receives a benefit under the Plan for an illness or injury, the Plan is subrogated to the Member's right to recover the Reasonable Costs of the benefits it provides on account of such illness or injury, even if those Reasonable Costs exceed the amount paid by the Plan.

The Plan is granted a first priority right to subrogation or reimbursement from any source of recovery. The Plan's first priority right applies whether or not the Member has been made whole by any recovery. The Plan shall have a lien on all funds received by the Member, Member's parents, heirs, guardians, executors, or other representatives up to the Reasonable Costs Charge for any past, present, or future Health Care Services provided to the Member. The Plan may give notice of that lien to any party who may have contributed to the loss.

If the Plan so decides, it may be subrogated to the Member's rights to the extent of the benefits provided or to be provided under this Contract. This includes the Plan's right to bring suit against the third party in the Member's name.

Plan's Right to Reduction and Reimbursement

The Plan shall have the right to reduce or deny benefits otherwise payable by the Plan, or to recover benefits previously paid by the Plan, to the extent of any and all payments made to or for a Member by or on behalf of a third party who is or may be liable to the Member, regardless of whether such payments are designated as payment for, but not limited to, pain and suffering, loss of income, medical benefits or expenses, or other specified damages.

Any such right of reduction or reimbursement provided to the Plan under this Contract shall not apply or shall be limited to the extent that statutes or the courts of This State eliminate or restrict such rights.

The Plan shall have a lien on all funds received by the Member, Member's parents, heirs, guardians, executors, or other representatives up to the Reasonable Cost for the Health Care Services provided to the Member.

Member's Responsibilities

The Member, Member's parents, heirs, guardians, executors, or other representatives must take such action, furnish such information and assistance, and execute such instruments as the Plan requires to facilitate enforcement of its rights under this Part. The Member shall take no action prejudicing the rights and interests of the Plan under this provision. Neither a Member nor Member's attorney or other representative is authorized to accept subrogation or reimbursement payments on behalf of the Plan, to negotiate or compromise the Plan's subrogation or reimbursement claim, or to release any right of recovery or reimbursement without the Plan's express written consent. Any Member who fails to cooperate in the Plan's administration of this Part shall be responsible for the Reasonable Cost for services subject to this section and any legal costs incurred by the Plan to enforce its rights under this section. Members must also report any recoveries from insurance companies or other persons or organizations arising form or relating to an act or omission that caused or contributed to an injury or illness to the Member paid for by the Plan. Failure to comply will entitle the Plan to withhold benefits, services, payments, or credits due under the Plan.

This page is intentionally left blank. Your *Summary of Benefits and Coverage* is an attachment to this Certificate of Insurance.

SANFORD HEALTH PLAN

North Dakota Public Employees Retirement System
Non-Grandfathered Dakota Plan

Coverage Period: 7/1/15 – 6/30/17
Coverage for: Single, Family
Plan Type: PPO | Non-Grandfathered

Summary of Benefits and Coverage: What this Plan Covers & What it Costs

This is only a summary. If you want more detail about your coverage and costs, you can get the complete terms in the policy at www.sanfordhealthplan.com/ndpers or by calling **1-800-499-3416** *(toll-free)* | TTY/TDD: **1-877-652-1844** *(toll-free)*.

Important Questions	Answers	Why this Matters:
What is the overall deductible?	For in-network providers: **$400** person / **$1,200** family For out-of-network providers: **$400** person / **$1,200** family Doesn't apply to preventive care.	You must pay all the costs up to the **deductible** amount before this plan begins to pay for covered services you use. Check your policy to see when the **deductible** starts over (usually, but not always, January 1st). See the chart starting on page 2 for how much you pay for covered services after you meet the **deductible**.
Are there other deductibles for specific services?	Yes. **$500** for infertility services. There are no other specific **deductibles**.	You must pay all of the costs for these services up to the specific **deductible** amount before this plan begins to pay for these services.
Is there an out-of-pocket limit on my expenses?	Yes. **For Medical Out-of-Pocket:** In-network providers: **$1,150** person / **$2,700** family For out-of-network providers: **$1,650** person / **$3,700** family **For Prescription Drug Out-of-Pocket:** **$1,000** per person	The **out-of-pocket limit** is the most you could pay during a coverage period (annually/usually one year) for your share of the cost of covered services. This limit helps you plan for health care expenses.
What is not included in the out-of-pocket limit?	Premiums, balance-billed charges, infertility services, and health care this plan doesn't cover.	Even though you pay these expenses, they don't count toward the **out-of-pocket limit**.
Is there an overall annual limit on what the plan pays?	No.	The chart starting on page 2 describes any limits on what the plan will pay for *specific* covered services, such as office visits.
Does this plan use a network of providers?	Yes. See **www.sanfordhealthplan.com/ndpers or call 1-800-499-3416** *(toll-free)* for a list of participating providers.	If you use an in-network doctor or other health care **provider**, this plan will pay some or all of the costs of covered services. Be aware, your in-network doctor or hospital may use an out-of-network **provider** for some services. Plans use the term in-network, **preferred**, or **participating** for **providers** in their **network**. See the chart starting on page 2 for how this plan pays different kinds of **providers**.
Do I need a referral to see a specialist?	No. You don't need a referral to see a **participating** specialist.	You can see the **participating specialist** you choose without permission from this plan.
Are there services this plan doesn't cover?	Yes.	Some of the services this plan doesn't cover are listed on page 5. See your policy for additional information about **excluded services**.

Questions: Call 1-800-499-3416 *(toll-free)* or visit us at **www.sanfordhealthplan.com/ndpers.** If you aren't clear about any of the bolded terms used in this form, see the Glossary. You can view the Glossary at **www.dol.gov/ebsa/pdf/SBCUniformGlossary.pdf** or call 1-800-499-3416 to request a copy.

North Dakota Public Employees Retirement System

HP-0492 7-15 NDPERS NGF

- **Copayments** are fixed dollar amounts (for example, $15) you pay for covered health care, usually when you receive the service.
- **Coinsurance** is *your* share of the costs of a covered service, calculated as a percent of the **allowed amount** for the service. For example, if the Plan's **allowed amount** for an overnight hospital stay is $1,000; your **coinsurance** payment of 20% would be $200. This may change if you haven't met your **deductible**.
- The amount the plan pays for covered services is based on the **allowed amount**. If an out-of-network **provider** charges more than the **allowed amount**, you may have to pay the difference. For example, if an out-of-network hospital charges $1,500 for an overnight stay and the **allowed amount** is $1,000; you may have to pay the $500 difference. (This is called **balance billing**.)
- This plan may encourage you to use **participating providers** by charging you lower **deductibles**, **copayments** and **coinsurance** amounts.

Common Medical Event	Services You May Need	Your cost if you use Basic Plan After Deductible	Your cost if you use PPO Plan After Deductible	Limitations & Exceptions
If you visit a health care provider's office or clinic	Primary care to treat an injury or illness	$30 copay/visit	$25 copay/visit	Deductible is waived.
	Chiropractic care			Deductible is waived.
	Office visit	$30 copay/visit	$25 copay/visit	Includes chiropractic consult and manual manipulations.
	Ancillary services	25% coinsurance	20% coinsurance	Includes but not limited to x-rays, labs, ultrasounds and rehabilitative therapy.
	Specialist visit	$30 copay/visit	$25 copay/visit	Deductible is waived.
	Other practitioner office visit	$30 copay/visit	$25 copay/visit	Deductible is waived.
	Preventive care/screening/ immunization	No charge	No charge	For details, reference the Preventive Health Guidelines or contact Member Services. Deductible is waived.
If you have a test	Diagnostic test (x-ray, blood work)	25% coinsurance	20% coinsurance	————————none————————
	Imaging (CT/PET scans, MRIs)	25% coinsurance	20% coinsurance	————————none————————

Common Medical Event	Services You May Need	Your cost if you use Basic Plan After Deductible	Your cost if you use PPO Plan After Deductible	Limitations & Exceptions
If you need drugs to treat your illness or condition More information about **prescription drug coverage** is available at sanfordhealthplan.com/ndpers	Generic Formulary Drugs	$5 copay/ prescription; then 15% coinsurance	$5 copay/ prescription; then 15% coinsurance	Covers up to a 34 day supply. Two copays for a 35-100 day supply. Copays and Coinsurance apply to $1,000 Prescription Drug Out-of-Pocket Maximum per person per benefit period. Refer to your formulary to determine which benefit applies to your medication. Certain contraceptive drugs covered at 100%.
	Brand Name Formulary Drugs	$20 copay/ prescription; then 25% coinsurance	$20 copay/ prescription; then 25% coinsurance	
	Non-Formulary Drugs	$25 copay/ prescription; then 50% coinsurance	$25 copay/ prescription; then 50% coinsurance	Covers up to a 34 day supply. Two copays for a 35-100 day supply.
If you have outpatient surgery	Facility fee (e.g., ambulatory surgery center)	25% coinsurance	20% coinsurance	These services require preauthorization/prior approval by the Health Plan.
	Physician/surgeon fees	25% coinsurance	20% coinsurance	——————none——————
If you need immediate medical attention	Emergency room services	$50 copay/visit, then 20% coinsurance	$50 copay/visit, then 20% coinsurance	Copay waived if directly admitted.
	Emergency medical transportation	20% coinsurance	20% coinsurance	
	Urgent care	$25 copay/visit	$25 copay/visit	Deductible is waived.
If you have a hospital stay	Facility fee (e.g., hospital room)	25% coinsurance	20% coinsurance	These services require preauthorization/prior approval by the Health Plan.
	Physician/surgeon fee	25% coinsurance	20% coinsurance	——————none——————

Common Medical Event	Services You May Need	Your cost if you use Basic Plan After Deductible	Your cost if you use PPO Plan After Deductible	Limitations & Exceptions
If you have mental/behavioral health, or substance abuse needs	Mental/Behavioral health outpatient services Office visits All other services	 $30 copay/visit 20% coinsurance	 $25 copay/visit 20% coinsurance	For outpatient treatment services, the first five (5) hours of any calendar year will be covered at 100% (no charge). For full details, please refer to your Policy.
	Mental/Behavioral health inpatient services	25% coinsurance	20% coinsurance	These services require preauthorization/prior approval by the Health Plan. For full details, please refer to your Policy.
	Substance use disorder outpatient services Office visits All other services	 $30 copay/visit 20% coinsurance	 $25 copay/visit 20% coinsurance	For outpatient treatment services, the first five (5) visits in a calendar year will be covered at 100% (no charge). For full details, please refer to your Policy.
	Substance use disorder inpatient services	25% coinsurance	20% coinsurance	These services require preauthorization/prior approval by the Health Plan. For full details, please refer to your Policy.
If you are pregnant	Prenatal and postnatal care	No charge	No charge	Routine prenatal and postnatal visits are covered under your Preventive Health Care Services benefit. Deductible is waived.
	Delivery and all inpatient services	25% coinsurance	20% coinsurance	Deductible is waived for delivery services received from a PPO health care provider when a Member is enrolled under the Healthy Pregnancy Program.
If you need help recovering or have other special health needs	Home health care	25% coinsurance	20% coinsurance	These services require preauthorization/prior approval by the Health Plan.
	Rehabilitation services	$25 copay/visit, then 25% coinsurance	$20 copay/visit, then 20% coinsurance	Deductible is waived.

Common Medical Event	Services You May Need	Your cost if you use Basic Plan After Deductible	Your cost if you use PPO Plan After Deductible	Limitations & Exceptions
If you need help recovering or have other special health needs (continued)	Habilitation services	$25 copay/visit, then 25% coinsurance	$20 copay/visit, then 20% coinsurance	Deductible is waived.
	Skilled nursing care	25% coinsurance	20% coinsurance	These services require preauthorization/prior approval by the Health Plan.
	Durable medical equipment	25% coinsurance	20% coinsurance	These services require preauthorization/prior approval by the Health Plan.
	Hospice service	25% coinsurance	20% coinsurance	These services require preauthorization/prior approval by the Health Plan.
If your child needs dental or eye care	Routine eye exam	No charge	No charge	Covered when part of a preventive exam.
	Glasses	Not Covered	Not Covered	——————none——————
	Routine dental check-up	Not Covered	Not Covered	——————none——————

Excluded Services & Other Covered Services:

Services Your Plan Does NOT Cover (This isn't a complete list. Check your policy or plan document for other excluded services.)

- Acupuncture
- Cosmetic surgery
- Dental care (Adult)
- Hearing aids (unless for Members under age 18)
- Long-term care
- Routine eye care (Adult), except Dilation Exam for diabetics
- Routine pediatric dental and vision care
- Weight loss programs

Other Covered Services (This isn't a complete list. Check your policy or plan document for other covered services and your costs for these services.)

- Bariatric surgery
- Chiropractic care
- Coverage provided outside the United States. For full details, please refer to your Policy or see www.sanfordhealthplan.com/ndpers
- Infertility treatment; $20,000 lifetime maximum
- Private-duty nursing
- Routine foot care (for diabetics only)

Your Rights to Continue Coverage:

If you lose coverage under the plan, then, depending upon the circumstances, Federal and State laws may provide protections that allow you to keep health coverage. Any such rights may be limited in duration and will require you to pay a **premium**, which may be significantly higher than the premium you pay while covered under the plan. Other limitations on your right to continue coverage may also apply.

For more information on your rights to continue coverage, contact the Plan toll-free at (800) 499-3416. You may also contact your state insurance department, the U.S. Department of Labor, Employee Benefits Security Administration at (866) 444-3272 or www.dol.gov/ebsa, or the U.S. Department of Health and Human Services at (877) 267-2323 x61565 or www.cciio.cms.gov.

Your Grievance and Appeals Rights:

If you have a complaint or are dissatisfied with a denial of coverage for claims under your Plan, you may be able to **appeal** or file a **grievance**. For questions about your rights, this notice, or assistance, you can contact:

- Sanford Health Plan/Member Services toll-free at (800) 499-3416
- The U.S. Department of Labor, Employee Benefits Security Administration at (866) 444-3272 *(toll-free)* or www.dol.gov/ebsa
- North Dakota Insurance Department at (800) 247-0560 *(toll-free)* or www.nd.gov/ndins/contact

Does this Coverage Provide Minimum Essential Coverage?

The Affordable Care Act requires most people to have health care coverage that qualifies as "minimum essential coverage." **This plan does provide minimum essential coverage.**

Does this Coverage Meet the Minimum Value Standard?

The Affordable Care Act establishes a minimum value standard of benefits of a health plan. The minimum value standard is 60% (actuarial value). **This health coverage does meet the minimum value standard for the benefits it provides.**

Language Access Services:

Spanish (Español): Para obtener asistencia en Español, llame al 1-800-892-0675 *(toll-free)*.

Tagalog (Tagalog): Kung kailangan ninyo ang tulong sa Tagalog tumawag sa 1-800-892-0675 *(toll-free)*.

Chinese (中文): 如果需要中文的帮助，请拨打这个号码 1-800-892-0675 *(toll-free)*.

Navajo (Dine): Dinek'ehgo shika at'ohwol ninisingo, kwiijigo holne' 1-800-892-0675 *(toll-free)*.

To see examples of how this plan might cover costs for a sample medical situation, see the next page.

About these Coverage Examples:

These examples show how this plan might cover medical care in given situations. Use these examples to see, in general, how much financial protection a sample patient might get if they are covered under different plans.

This is not a cost estimator.

Don't use these examples to estimate your actual costs under this plan. The actual care you receive will be different from these examples, and the cost of that care will also be different.

See the next page for important information about these examples.

Having a baby
(normal delivery)

- **Amount owed to providers:** $7,540
- **Plan pays** $6,600
- **Patient pays** $940

Sample care costs:

Hospital charges (mother)	$2,700
Routine obstetric care	$2,100
Hospital charges (baby)	$900
Anesthesia	$900
Laboratory tests	$500
Prescriptions	$200
Radiology	$200
Vaccines, other preventive	$40
Total	**$7,540**

Patient pays:

Deductibles	$0
Co-pays	$10
Coinsurance	$900
Limits or exclusions	$30
Total	**$940**

Note: These numbers assume the patient has enrolled in the Plan's Health Pregnancy Program. If you are pregnant, and have not given notice of your pregnancy to the Plan, your costs may be higher. For more information, please contact Sanford Health Plan at 1-888-315-0885 *(toll-free)* | TTY/TDD: 1-877-652-1844 *(toll-free)*.

Managing type 2 diabetes
(routine maintenance of a well-controlled condition)

- **Amount owed to providers:** $5,400
- **Plan pays** $4,660
- **Patient pays** $740

Sample care costs:

Prescriptions	$2,900
Medical Equipment and Supplies	$1,300
Office Visits and Procedures	$700
Education	$300
Laboratory tests	$100
Vaccines, other preventive	$100
Total	**$5,400**

Patient pays:

Deductibles	$400
Co-pays	$300
Coinsurance	$0
Limits or exclusions	$40
Total	**$740**

Note: These examples do not reflect cost sharing for any Consumer Driven Health Plan such as HRA, HSA, FSA or any wellness program.

Questions and answers about the Coverage Examples:

What are some of the assumptions behind the Coverage Examples?

- Costs don't include **premiums**.
- Sample care costs are based on national averages supplied by the U.S. Department of Health and Human Services, and aren't specific to a particular geographic area or health plan.
- The patient's condition was not an excluded or preexisting condition.
- All services and treatments started and ended in the same coverage period.
- There are no other medical expenses for any member covered under this plan.
- Out-of-pocket expenses are based only on treating the condition in the example.
- The patient received all care from in-network **providers**. If the patient had received care from out-of-network **providers**, costs would have been higher.

What does a Coverage Example show?

For each treatment situation, the Coverage Example helps you see how **deductibles**, **copayments**, and **coinsurance** can add up. It also helps you see what expenses might be left up to you to pay because the service or treatment isn't covered or payment is limited.

Does the Coverage Example predict my own care needs?

✘ **No.** Treatments shown are just examples. The care you would receive for this condition could be different based on your doctor's advice, your age, how serious your condition is, and many other factors.

Does the Coverage Example predict my future expenses?

✘ **No.** Coverage Examples are **not** cost estimators. You can't use the examples to estimate costs for an actual condition. They are for comparative purposes only. Your own costs will be different depending on the care you receive, the prices your **providers** charge, and the reimbursement your health plan allows.

Can I use Coverage Examples to compare plans?

✓ **Yes.** When you look at the Summary of Benefits and Coverage for other plans, you'll find the same Coverage Examples. When you compare plans, check the "Patient Pays" box in each example. The smaller that number, the more coverage the plan provides.

Are there other costs I should consider when comparing plans?

✓ **Yes.** An important cost is the **premium** you pay. Generally, the lower your **premium**, the more you'll pay in out-of-pocket costs, such as **copayments**, **deductibles**, and **coinsurance**. You should also consider contributions to accounts such as health savings accounts (HSAs), flexible spending arrangements (FSAs) or health reimbursement accounts (HRAs) that help you pay out-of-pocket expenses.

Questions: Call 1-800-499-3416 *(toll-free)* or visit us at **www.sanfordhealthplan.com/ndpers**. If you aren't clear about any of the bolded terms used in this form, see the Glossary. You can view the Glossary at **www.dol.gov/ebsa/pdf/SBCUniformGlossary.pdf** or call 1-800-499-3416 to request a copy.

North Dakota Public Employees Retirement System | SANFORD HEALTH PLAN

North Dakota Public Employees Retirement System (NDPERS)

Certificate of Insurance

Non-Grandfathered High Deductible Health Plan PPO/Basic

Plan on the best fit.

North Dakota Public Employees Retirement System
Dakota Plan Health Benefits

SANFORD HEALTH PLAN

Notice

Your employer has established an employee welfare benefit plan for Eligible Employees and their Eligible Dependents. The following Summary Plan Description/Certificate of Insurance (COI) is provided to you in accordance with the Employee Retirement Income Security Act of 1974. Every attempt has been made to provide concise and accurate information.

This COI and the NDPERS Service Agreement are the official benefit plan documents for the employee welfare benefit plan established by the Plan Administrator. In case of conflict between this Certificate of Insurance/Summary Plan Description and the NDPERS Service Agreement, the provisions of the NDPERS Service Agreement will control.

Although it is the intention of the Plan Administrator to continue the employee welfare benefit plan for an indefinite period of time, the Plan Administrator reserves the right, whether in an individual case or in general, to eliminate the Benefit Plan.

Sanford Health Plan shall construe and interpret the provisions of the Service Agreement, the COI and related documents, including doubtful or disputed terms; and to conduct any and all reviews of claims denied in whole or in part. NDPERS shall determine all questions of eligibility.

Plan Name

North Dakota Public Employees Retirement System Dakota Plan

Name and Address of Employer (Plan Sponsor)

North Dakota Public Employees Retirement System
400 East Broadway, Suite 505
PO Box 1657
Bismarck, ND 58502

Plan Sponsor's IRS Employer Identification Number

45-0282090

Plan Number Assigned By the Plan Sponsor

N/A

Type of Welfare Plan

Health

Type of Administration

This employee welfare benefit plan is fully insured by Sanford Health Plan and issued by Sanford Health Plan. Sanford Health Plan is the Claims Administrator for this employee welfare benefit plan.

Name and Address of Sanford Health Plan

Sanford Health Plan
300 Cherapa Place, Suite 201
Sioux Falls, SD 57103
(877) 305-5463 *(toll-free)*
TTY/TDD: (877) 652-1844 *(toll-free)*

Plan Administrator's Name, Business Address and Business Telephone Number

North Dakota Public Employees Retirement System
400 East Broadway, Suite 505
PO Box 1657
Bismarck, ND 58502
(701) 328-3900

Name and Address of Agent for Service of Legal Process

Plan Administrator	**Sanford Health Plan**
North Dakota Public Employees Retirement System Sparb Collins, Executive Director 400 East Broadway, Suite 505 PO Box 1657 Bismarck, ND 58502	Sanford Health Plan ATTN: President 300 Cherapa Place, Suite 201 PO Box 91110 Sioux Falls, SD 57109-1110

Service of legal process may be made upon a Plan trustee or the Plan Administrator.

Title of Employees Authorized To Receive Protected Health Information

- Administrative Services Division
- Accounting & IT Division
- Accounting Division
- Benefit Programs Division
- Benefit Program Development & Research
- Executive Director
- Internal Audit Division

This includes every employee, class of employees, or other workforce person under control of the Plan Sponsor who may receive the Member's Protected Health Information relating to payment under, health care operations of, or other matters pertaining to the Benefit Plan in the ordinary course of business.

These identified individuals will have access to the Member's Protected Health Information only to perform the plan administrative functions the Plan Sponsor provides to the Benefit Plan. Such individuals will be subject to disciplinary action for any use or disclosure of the Member's Protected Health Information in breach or in violation of, or noncompliance with, the privacy provisions of the Benefit Plan. The Plan Sponsor shall promptly report any such breach, violation, or noncompliance to the Plan Administrator; will cooperate with the Plan Administrator to correct the breach, violation and noncompliance to impose appropriate disciplinary action on each employee or other workforce person causing the breach, violation, or noncompliance; and will mitigate any harmful effect of the breach, violation, or noncompliance on any Member whose privacy may have been compromised.

Statement of Eligibility to Receive Benefits

As provided in N.D.C.C. §54-52.1-01(4) and §54-52.1-18, individuals eligible to receive benefits are every permanent employee who is employed by the state, and political subdivisions which elect the HDHP option, whose services are not limited in duration, who is filling an approved and regularly funded position in the state, and political subdivisions which elect the HDHP option, and who is employed at least seventeen and one-half hours per week and at least five months each year or for those first employed after August 1,2003, is employed at least twenty hours per week and at least twenty weeks each year of employment. An eligible employee includes members of the Legislative Assembly, judges of the Supreme Court, paid members of state boards, commissions, or associations, or political subdivision boards, commissions, or associations which elect the HDHP option, full-time employees of political subdivisions which elect the HDHP option, elective state officers as defined by N.D.C.C. §54-06-01(2), disabled permanent state employees and disabled employees of political subdivisions which elect the HDHP option, who are receiving compensation from the North Dakota workforce safety and insurance.

A temporary employee of a political subdivision which elects the HDHP option, who is employed before August 1, 2007, may elect to participate in the uniform group insurance program by completing the necessary enrollment forms and qualifying under the medical underwriting requirements of the program if such election is made before January 1, 2015, and if the temporary employee is participating in the uniform group insurance program on January 1, 2015. In order for a temporary employee of a political subdivision which elect the HDHP option, who is employed after July 31, 2007, to qualify to participate in the uniform group insurance program, the employee must be employed at least twenty hours per week; must be employed at least twenty weeks each year of employment; must make the election to participate before January 1, 2015; and must be participating in the uniform group insurance program as of January 1, 2015. To be eligible to participate in the uniform group insurance program, a temporary employee of a political subdivision which elects the HDHP option, who is first employed after December 31, 2014, or any temporary employee not participating in the uniform group insurance program as of January 1, 2015, must meet the definition of a full-time employee under §4980H(c)(4) of the Internal Revenue Code [26 U.S.C. 4980H(c)(4)]. Temporary employees employed by the state of North Dakota are not eligible to participate in this Benefit Plan.

An eligible employee is entitled to coverage the first of the month following the month of employment, provided the employee submits an application for coverage within the first 31 days of employment or eligibility for a special enrollment period as set forth in N.D.A.C. §71-03-03. Each eligible employee may elect to enroll his/her Eligible Dependents.

Eligible employees also include non-Medicare eligible retired and terminated employees, and their Eligible Dependents, who remain eligible to participate in the uniform group insurance program pursuant to applicable state law, as provided in N.D.C.C. §54-52.1-03 and federal regulations. For a comprehensive description of eligibility, refer to the NDPERS web site at www.nd.gov/ndpers.

Eligibility to receive benefits under the Benefit Plan is initially determined by the Plan Administrator. When an eligible employee meets the criteria for eligibility, a membership application must be completed. NDPERS has the ultimate decision making authority regarding eligibility to receive benefits.

Description of Benefits

See the Schedule of Benefits and the Covered Services Sections. Refer to the Table of Contents for page numbers.

Sources of Premium Contributions to the Plan and the Method by Which the Amount of Contribution Is Calculated

The contributions for single or family for state employees are paid at 100% by the state. The contributions for employees of participating political subdivisions are at the discretion of the subdivision and subject to the minimum contribution requirements and participation requirements of Sanford Health Plan. The contributions for temporary employees are either at their own expense, or their employer may pay the premium, subject to its budget authority.

End of the Year Date for Purposes of Maintaining the Plan's Fiscal Records

June 30

Clerical Error

Any clerical error by either the Plan or Claims Administrators, or the aforementioned entities' designees, in keeping pertinent records or a delay in making any changes will not invalidate coverage otherwise validly in force or continue coverage validly terminated. An equitable adjustment of contributions will be made when the error or delay is discovered.

If, due to a clerical error, an overpayment occurs in a Plan reimbursement amount, Sanford Health Plan and NDPERS retain contractual rights to the overpayment. The person or institution receiving the overpayment will be required to return the incorrect amount of money.

Recovery of Benefit Payments

Pursuant to N.D.A.C. §71-03-05-06, whenever benefits are paid in noncompliance with the Contract, NDPERS, which is the Plan Administrator, or an agent of the Plan Administrator, retains the right to recover the payments from the party responsible.

If Sanford Health Plan, which is the Claims Administrator and Payor, or an agent of Sanford Health Plan, is at fault, the amount of overpayment will be withheld from the administrative fees paid by NDPERS.

If overpayments are made because of false or misleading information provided by a Member, Sanford Health Plan, or an agent of Sanford Health Plan, shall attempt to recover the amount. Any moneys recovered shall be credited to NDPERS.

If an overpayment is made because of a mistake or deliberate act by a Health Care Provider, Sanford Health Plan shall collect the money from the Provider and credit that amount to NDPERS.

If fraud is suspected, Sanford Health Plan shall inform NDPERS and NDPERS may turn the evidence over to the North Dakota State's Attorney or Attorney General's office for possible prosecution.

Amending and Terminating this Benefit Plan

As Plan Administrator, NDPERS has delegated responsibility for determinations regarding covered benefits, and the amount and manner of the payment of benefits, including the appeal of denied claims, to Sanford Health Plan, the insurer of the plan.

NDPERS reserves the right to terminate the plan, or amend or eliminate benefits under the North Dakota Public Employees Retirement System Dakota Plan, as insured and issued by Sanford Health Plan, at any time and at its discretion, upon mutual agreement between NDPERS and Sanford Health Plan. Should this Benefit Plan be amended or terminated, such action shall be by a written instrument duly adopted by both NDPERS and Sanford Health Plan, or the aforementioned entities' designees.

Summary Notice and Important Phone Numbers

This Certificate describes in detail your Employer's health care benefit Plan and governs the Plan's coverage. This Certificate and any amendments comprise the entire Plan between the Employer and the Claims Administrator.

A thorough understanding of your coverage will enable you to use your benefits wisely. Please read this Certificate carefully. If you have any questions about the benefits, please contact Member Services.

This Certificate describes in detail the Covered Services provisions and other terms and conditions of the Plan.

Physical Address	**Mailing Address**
Sanford Health Plan 300 Cherapa Place, Suite 201 Sioux Falls, SD 57103	Sanford Health Plan PO Box 91110 Sioux Falls, SD 57109-1110
Member Services	**Preauthorization/Prior Approval**
(800) 499-3416 *(toll-free)* or TTY/TDD: (877) 652-1844 *(toll-free)*	The Hospital, your Provider, or you should call *(toll-free)*: (888) 315-0885 or TTY/TDD: (877) 652-1844
Sanford Health Plan Physician/Provider Locator	**Website**
If you need to locate a Provider in your area, call *(toll-free)*: (800) 499-3416 or TTY/TDD: (877) 652-1844	www.sanfordhealthplan.com/ndpers

Notice of Privacy Practices

THIS NOTICE DESCRIBES HOW HEALTH INFORMATION ABOUT YOU MAY BE USED AND DISCLOSED AND HOW YOU CAN GET ACCESS TO THIS INFORMATION. PLEASE REVIEW IT CAREFULLY.

This Notice applies to Sanford Health Plan. If you have questions about this Notice, please contact the Plan at (800) 499-3416 *(toll-free)* | TTY/TDD (877) 652-1844 *(toll-free)*. You may also email your questions to memberservices@sanfordhealth.org.

This Notice describes how we will use and disclose your health information. The terms of this Notice apply to all health information generated or received by Sanford Health Plan, whether recorded in our business records, your medical record, billing invoices, paper forms, or in other ways.

HOW WE USE AND DISCLOSE YOUR HEALTH INFORMATION

We use or disclose your health information as follows (In Minnesota we will obtain your prior consent):

- **Help manage the health care treatment you receive:** We can use your health information and share it with professionals who are treating you. For example, a doctor may send us information about your diagnosis and treatment plan so we can arrange additional services.
- **Pay for your health services:** We can use and disclose your health information as we pay for your health services. For example, we share information about you with your primary care Practitioner and/or Provider to coordinate payment for those services.
- **For our health care operations:** We may use and share your health information for our day-to-day operations, to improve our services, and contact you when necessary. For example, we use health information about you to develop better services for you. We are not allowed to use genetic information to decide whether we will give you coverage and the price of that coverage. This does not apply to long-term care plans.
- **Administer your plan:** We may disclose your health information to your health plan sponsor for plan administration. For example, your company contracts with us to provide a health plan, and we provide your company with certain statistics to explain the premiums we charge.

We may share your health information in the following situations unless you tell us otherwise. If you are not able to tell us your preference, we may go ahead and share your information if we believe it is in your best interest or needed to lessen a serious and imminent threat to health or safety:

- **Friends and Family:** We may disclose to your family and close personal friends any health information directly related to that person's involvement in payment for your care.
- **Disaster Relief:** We may disclose your health information to disaster relief organizations in an emergency.

We may also use and share your health information for other reasons without your prior consent:

- **When required by law:** We will share information about you if state or federal law require it, including with the Department of Health and Human services if it wants to see that we're complying with federal privacy law.
- **For public health and safety:** We can share information in certain situations to help prevent disease, assist with product recalls, report adverse reactions to medications, and to prevent or reduce a serious threat to anyone's health or safety.
- **Organ and tissue donation:** We can share information about you with organ procurement organizations.
- **Medical examiner or funeral director:** We can share information with a coroner, medical examiner, or funeral director when an individual dies.
- **Workers' compensation and other government requests:** We can share information to employers for workers' compensation claims. Information may also be shared with health oversight agencies when authorized by law, and other special government functions such as military, national security and presidential protective services.
- **Law enforcement:** We may share information for law enforcement purposes. This includes sharing information to help locate a suspect, fugitive, missing person or witness.
- **Lawsuits and legal actions:** We may share information about you in response to a court or administrative order, or in response to a subpoena.
- **Research:** We can use or share your information for certain research projects that have been evaluated and approved through a process that considers a patient's need for privacy.

We may contact you in the following situations:

- **Treatment options:** To provide information about treatment alternatives or other health related benefits or Sanford Health Plan services that may be of interest to you.
- **Fundraising:** We may contact you about fundraising activities, but you can tell us not to contact you again.

YOUR RIGHTS THAT APPLY TO YOUR HEALTH INFORMATION

When it comes to your health information, you have certain rights.

- **Get a copy of your health and claims records:** You can ask to see or get a paper or electronic copy of your health and claims records and other health information we have about you. We will provide a copy or summary to you usually within 30 days of your request. We may charge a reasonable, cost-based fee.

- **Ask us to correct your health and claims records:** You can ask us to correct health information that you think is incorrect or incomplete. We may deny your request, but we'll tell you why in writing. These requests should be submitted in writing to the contact listed below.
- **Request confidential communications:** You can ask us to contact you in a specific way (for example, home or office phone) or to send mail to a different address. Reasonable requests will be approved. We must say "yes" if you tell us you would be in danger if we do not.
- **Ask us to limit what we use or share:** You can ask us to restrict how we share your health information for treatment, payment, or our operations. We are not required to agree to your request, and we may say "no" if it would affect your care. If you are not able to tell us your preference, for example if you are unconscious, we may go ahead and share your information if we believe it is in your best interest. We may also share your information when needed to lessen a serious and imminent threat to health or safety.
- **Get a list of those with whom we've shared information:** You can ask for a list (accounting) of the times we've shared your health information for six (6) years prior, who we've shared it with, and why. We will include all disclosures except for those about your treatment, payment, and our health care operations, and certain other disclosures (such as those you asked us to make). We will provide one (1) accounting a year for free, but we will charge a reasonable cost-based fee if you ask for another within twelve (12) months.
- **Get a copy of this privacy notice:** You can ask for a paper copy of this Notice at any time, even if you have agreed to receive it electronically. We will provide you with a paper copy promptly.
- **Choose someone to act for you:** If you have given someone medical power of attorney or if someone is your legal guardian, that person can exercise your rights and make choices about your health information. We will make sure the person has this authority and can act for you before we take any action.
- **File a complaint if you feel your rights are violated:** You can complain to the U.S. Department of Health and Human Services Office for Civil Rights if you feel we have violated your rights. We can provide you with their address. You can also file a complaint with us by using the contact information below. We will not retaliate against you for filing a complaint.

  Contact Information:
  Sanford Health Plan
  ATTN: NDPERS/Member Services
  PO Box 91110
  Sioux Falls, SD 57109-1110
  (800) 499-3416 *(toll-free)* | TTY/TDD (877) 652-1844 *(toll-free)*

OUR RESPONSIBILITIES REGARDING YOUR HEALTH INFORMATION

- We are required by law to maintain the privacy and security of your health information.
- We will let you know promptly if a breach occurs that may have compromised the privacy or security of your health information.
- We must follow the duties and privacy practices described in this Notice and offer to give you a copy.
- We will not use, share, or sell your information for marketing or any purpose other than as described in this Notice unless you tell us to in writing. You may change your mind at any time by letting us know in writing.

CHANGES TO THIS NOTICE

We may change the terms of this Notice, and the changes will apply to all information we have about you. The new Notice will be available upon request and on our website www.sanfordhealthplan.com/ndpers.

EFFECTIVE DATE

This Notice of Privacy Practices is effective September 23, 2013.

NOTICE OF ORGANIZED HEALTH CARE ARRANGEMENT FOR Sanford Health Plan

Sanford Health Plan and Sanford Health Plan of Minnesota have agreed, as permitted by law, to share your health information among themselves for the purposes of treatment, payment, or health care operations. This notice is being provided to you as a supplement to the above Notice of Privacy Practices.

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Introduction

Member Rights

The Plan is committed to treating Members in a manner that respects their rights. In this regard, the Plan recognizes that each Member (or the Member's parent, legal guardian or other representative if the Member is a minor or incompetent) has the right to the following:

1. Members have the right to receive impartial access to treatment and/or accommodations that are available or medically indicated, regardless of race; ethnicity; national origin; gender; age; sexual orientation; medical condition, including current or past history of a mental health and substance use disorder; disability; religious beliefs; or sources of payment for care.
2. Members have the right to considerate, respectful treatment at all times and under all circumstances with recognition of their personal dignity.
3. Members have the right to be interviewed and examined in surroundings designed to assure reasonable visual and auditory privacy.
4. Members have the right, but are not required, to select a Primary Care Practitioner and/or Provider (PCP) of their choice. If a Member is dissatisfied for any reason with the PCP initially chosen, he/she has the right to choose another PCP.
5. Members have the right to expect communications and other records pertaining to their care, including the source of payment for treatment, to be treated as confidential in accordance with the guidelines established in applicable North Dakota law.
6. Members have the right to know the identity and professional status of individuals providing service to them and to know which Practitioner and/or Provider is primarily responsible for their individual care. Members also have the right to receive information about our clinical guidelines and protocols.
7. Members have the right to a candid discussion with the Practitioners and/or Providers responsible for coordinating appropriate or medically necessary treatment options for their conditions in a way that is understandable, regardless of cost or benefit coverage for those treatment options. Members also have the right to participate with Practitioners and/or Providers in decision making regarding their treatment plan.
8. Members have the right to give informed consent before the start of any procedure or treatment.
9. When Members do not speak or understand the predominant language of the community, the Plan will make reasonable efforts to access an interpreter. The Plan has the responsibility to make reasonable efforts to access a treatment clinician that is able to communicate with the Member.
10. Members have the right to receive printed materials that describe important information about the Plan in a format that is easy to understand and easy to read.
11. Members have the right to a clear Grievance and Appeal process for complaints and comments and to have their issues resolved in a timely manner.
12. Members have the right to Appeal any decision regarding medical necessity made by the Plan and its Practitioners and/or Providers.
13. Members have the right to terminate from the Plan, in accordance with Employer and/or Plan guidelines.
14. Members have the right to make recommendations regarding the organization's Member's rights and responsibilities policies.
15. Members have the right to receive information about the organization, its services, its Practitioners and Providers and Members' rights and responsibilities.

Member Responsibilities

Each Member (or the Member's parent, legal guardian or other representative if the Member is a minor or incompetent) is responsible for cooperating with those providing Health Care Services to the Member, and shall have the following responsibilities:

1. Members have the responsibility to provide, to the best of their knowledge, accurate and complete information about present complaints, past illnesses, Hospitalizations, medications, and other matters relating to their health. They have the responsibility to report unexpected changes in their condition to the responsible Practitioner. Members are responsible for verbalizing whether they clearly comprehend a contemplated course of action and what is expected of them.
2. Members are responsible for carrying their Plan ID cards with them and for having Member identification numbers available when telephoning or contacting the Plan.
3. Members are responsible for following all access and availability procedures.
4. Members are responsible for seeking Emergency care at a Plan participating Emergency Facility whenever possible. In the event an ambulance is used, direct the ambulance to the nearest participating Emergency Facility unless the condition is so severe that you must use the nearest Emergency Facility. State law requires that the ambulance transport you to the Hospital of your choice unless that transport puts you at serious risk.
5. Members are responsible for notifying the Plan of an Emergency admission as soon as reasonably possible and no later than forty-eight (48) hours after becoming physically or mentally able to give notice.
6. Members are responsible for keeping appointments and, when they are unable to do so for any reason, for notifying the responsible Practitioner or the Hospital.
7. Members are responsible for following their treatment plan as recommended by the Practitioner primarily responsible for their care. Members are also responsible for participating in developing mutually agreed-upon treatment goals, and to the degree possible, for understanding their health conditions, including mental health and/or substance use disorders.
8. Members are responsible for their actions if they refuse treatment or do not follow the Practitioner's instructions.
9. Members are responsible for notifying NDPERS within *thirty-one (31)* days if they change their name, address, or telephone number.
10. Members are responsible for notifying NDPERS of any changes of eligibility that may affect their membership or access to services.

Grandfathered versus Non-Grandfathered Plans

A "Grandfathered" health plan is a health plan that was in place prior to March 23, 2010. Grandfathered plans are able to make routine changes to policies but are exempt from some of the Affordable Care Act's (ACA) health insurance reforms.

A "Non-Grandfathered" health plan is a health plan that must comply with all the Patient Protection and Affordable Care Act's health insurance reforms.

Please refer to your Summary of Benefits and Coverage (SBC) to find out if you have a grandfathered or non-grandfathered health plan.

Fraud

Fraud is a crime that can be prosecuted. Any Member who willfully and knowingly engages in an activity intended to defraud the Plan is guilty of fraud.

As a Member, you must:

1. File accurate claims. If someone else files claims on your behalf, you should review the form before you sign it;
2. Review the Explanation of Benefits (EOB) form when it is returned to you. Make certain that benefits have been paid correctly based on your knowledge of the expenses incurred and the services rendered;
3. Never allow another person to seek medical treatment under your identity. If your ID card is lost, you should report the loss to Sanford Health Plan immediately; and
4. Provide complete and accurate information on claim forms and any other forms. Answer all questions to the best of your knowledge.

If you are concerned about any of the charges that appear on a bill or Explanation of Benefits form, or if you know of or suspect any illegal activity, call Sanford Health Plan toll-free at (800) 499-3416. All calls are strictly confidential.

Service Area

The Service Area for SOUTH DAKOTA includes all counties in the state.

The Service Area for NORTH DAKOTA includes all counties in the state.

The Service Area for IOWA includes the following counties:

Clay	Emmet	Lyon	Osceola	Plymouth
Dickinson	Ida	O'Brien	Sioux	Woodbury

The Service Area for MINNESOTA includes the following counties:

Becker	Clay	Jackson	Lincoln	Meeker	Pennington	Renville	Swift
Beltrami	Clearwater	Kandiyohi	Lyon	Murray	Pipestone	Rock	Traverse
Big Stone	Cottonwood	Kittson	Mahnomen	Nicollet	Polk	Roseau	Wilkin
Blue Earth	Douglas	Lac Qui Parle	Marshall	Nobles	Pope	Sibley	Watonwan
Brown	Grant	Lake of the	Martin	Norman	Red Lake	Stearns	Yellow Medicine
Chippewa	Hubbard	Woods	McLeod	Otter Tail	Redwood	Stevens	

Medical Terminology

All medical terminology referenced in this Certificate of Insurance follow the industry standard definitions of the American Medical Association.

Definitions

Capitalized terms are defined in Section 10 of the Certificate of Insurance.

Conformity with State and Federal Laws

Any provision in this Contract not in conformity with N.D.C.C. chs. 26.1-18.1, 54-52.1; N.D.A.C. chs. 45-06-07, 71-03; and/or any other applicable law or rule in this state may not be rendered invalid but be must construed and applied as if it were in full compliance with any applicable State and Federal laws and rules.

Special Communication Needs

Please call the Plan if you need help understanding written information at (800) 499-3416 *(toll-free)*. We can read forms to you over the phone and we offer free oral translation in any language through our translation services. Anyone with any disability, who might need some form of accommodation or assistance concerning the services or information provided, please contact the NDPERS ADA Coordinator at (701) 328-3900.

Translation Services

The Plan can arrange for translation services. Free written materials are available in several different languages and free oral translation services are available. Call toll-free (800) 499-3416 for help and to access translation services.

Spanish (Español): Para obtener asistencia en Español, llame al (800) 892-0675 *(toll-free)*.

Tagalog (Tagalog): Kung kailangan ninyo ang tulong sa Tagalog tumawag sa (800) 892-0675 *(toll-free)*.

Chinese (中文): 如果需要中文的帮助，请拨打这个号码 (800) 892-0675 *(toll-free)*.

Navajo (Dine): Dinek'ehgo shika at'ohwol ninisingo, kwiijigo holne' (800) 892-0675 *(toll-free)*.

Services for the Deaf, Hearing Impaired, and/or Visually Impaired

If you are deaf or hearing impaired and need to speak to the Plan, call TTY/TDD: (877) 652-1844 *(toll-free)*. Please contact the Plan toll-free at (800) 499-3416 if you are in need of a large print copy or cassette/CD of this COI or other written materials.

In compliance with the Americans with Disabilities Act, this document can be provided in alternate formats. If you require accommodation or assistance concerning the services or information provided, please contact the NDPERS ADA Coordinator at (701) 328-3900.

Notice Regarding High Deductible Health Plan (HDHP) and a Health Savings Account (HSA)

This Benefit Plan is a high deductible health plan designed to comply with §223 of the U.S. Internal Revenue Code and is intended for use with a Health Savings Account (HSA).

Sanford Health Plan does not, and is not authorized to, provide legal or tax advice to Members. Sanford Health Plan expressly disclaims responsibility for, and makes no representation or warranty regarding: (1) the eligibility of any Member to establish or contribute to an HSA; or (2) the suitability of this product in all circumstances for use with HSAs.

Health Savings Account (HSA) Eligibility

This Benefit Plan is intended to be compatible with Health Savings Accounts (HSAs) as described in §223 of the U.S. Internal Revenue Code, which means the Benefit Plan is designed to comply with federal law requirements regarding Deductible Amounts and Out-of-Pocket Maximum Amounts. If a Member desires to establish an HSA, the Member must enter into a separate written agreement with an HSA trustee or custodian. An HSA will be established for permanent employees of the State by NDPERS pursuant to the requirements and restrictions of N.D.C.C. §54-52.1-18. Since HSAs are personal health care savings vehicles, Sanford Health Plan is unable to provide legal or tax advice as to whether Members are eligible to establish or contribute to an HSA in any tax year.

In addition, although a Member must be covered by a High Deductible Health Plan in order to contribute to an HSA, additional rules apply:

a. Members may not contribute to an HSA, for example, if:
    1. the Member can be claimed as a dependent on someone else's tax return (this is different from an Eligible Dependent for purposes of insurance coverage under the Plan); or
    2. the Member has other health coverage (other than high deductible coverage), including Medicare, coverage through a spouse, or coverage under a cafeteria plan that provides reimbursement of medical expenses.
b. Members are solely responsible for determining the legal and tax implications of:
    1. establishing an HSA;
    2. eligibility for an HSA;
    3. the amount of contributions made to an HSA;
    4. the deductibility of contributions made to an HSA; and
    5. withdrawals from an HSA and related taxation.

Sanford Health Plan encourages Members to consult with an accountant, lawyer, or other qualified tax adviser about how HSA and HDHP rules apply to their own individual situations.

Section 1. Schedule of Benefits

General

This section outlines the payment provisions for Covered Services described in Sections 2 and 5, subject to the definitions, exclusions, conditions and limitations of this Benefit Plan.

Overview of Cost Sharing Amounts and How They Accumulate

Cost Sharing Amounts include Coinsurance, Deductible, Prescription Drug Coinsurance Maximum, Infertility Services Deductible and Out-of-Pocket Maximum Amounts. See *Cost Sharing Amounts – Details & Definitions* later in this Section for more information.

Note:

- A Member must meet the annual Deductible Amount before Coinsurance Amounts apply to the cost of Covered Services, unless otherwise specified in this Certificate of Insurance and/or the Member's Summary of Benefits and Coverage (SBC).
- The Deductible Amounts for Covered Services received from a PPO Health Care Provider, or on a Basic Plan basis, accumulate jointly up to the PPO Deductible Amount.
- The Out-of-Pocket Maximum Amounts for Covered Services received from a PPO Health Care Provider, or on a Basic Plan basis, accumulate jointly up to the PPO Out-of-Pocket Maximum Amount.
- When the PPO Out-of-Pocket Maximum Amount has been met, all Covered Services received from a PPO Health Care Provider will be paid at 100% of Allowed Charge
- Covered Services sought on a Basic Plan basis will continue to be paid at 75% of the Allowed Charge until the Out-of-Pocket Maximum Amount for Basic Plan services is met.
- Prescription Medication/Coinsurance costs accumulate toward a Member's cumulative annual Out-of-Pocket Maximum.

A Member is responsible for Cost Sharing Amounts. All Members in the family contribute to Deductible and Coinsurance Amounts. Health Care Providers may bill you directly or request payment of Coinsurance and Deductible Amounts at the time services are provided. For the specific benefits and limitations that apply to this plan, please see Section 2, *Outline of Covered Services*; Section 5, *Covered Services*; Section 6, *Limited and Non-Covered Services*; and your Summary of Benefits and Coverage.

If Sanford Health Plan pays amounts to the Health Care Provider that are the Member's responsibility, such as Deductibles or Coinsurance Amounts, Sanford Health Plan may collect such amounts directly from the Member. The Member agrees that Sanford Health Plan has the right to collect such amounts from the Member.

Benefit Schedule	Basic Plan	PPO Plan
Under this Benefit Plan the Deductible Amounts are:		
Single Coverage	$1,500 per Benefit Period	$1,500 per Benefit Period
Family Coverage	$3,000 per Benefit Period	$3,000 per Benefit Period
Under this Benefit Plan the Coinsurance Maximum Amounts are:		
Single Coverage	$2,000 per Benefit Period	$1,500 per Benefit Period
Family Coverage	$4,000 per Benefit Period	$3,000 per Benefit Period
Under this Benefit Plan the Out-of-Pocket Maximum Amounts are:		
Single Coverage	$3,500 per Benefit Period	$3,000 per Benefit Period
Family Coverage	$7,000 per Benefit Period	$6,000 per Benefit Period

Selecting a Health Care Provider

The benefit payment available under this Benefit Plan differs depending on the Subscriber's choice of a Health Care Provider. This Benefit Plan recognizes Health Care Providers based on the Health Care Provider's relationship with Sanford Health Plan. Providers that are contracted with Sanford Health Plan and participate in the Plan's Network will be paid at either the PPO Plan or Basic Plan level.

Members should refer to the Sanford Health Plan website (www.sanfordhealthplan.com/ndpers) for the Provider Director, which lists Participating Health Care Providers. The Sanford Health Plan website is continuously updated and has the most up-to-date listing of Health Care Providers. Members may also call Member Services at (800) 499-3416 *(toll-free)* or TTY/TDD: (877) 652-1844 *(toll-free)* to request a provider directory.

How PPO vs. Basic Plan Determines Benefit Payment

PPO Plan

PPO stands for "Preferred Provider Organization" and is a group of Health Care Providers who provide discounted services to the Members of NDPERS. Because PPO Health Care Providers charge Sanford Health Plan less for medical care services provided to the Members of NDPERS, cost savings are passed on to Members by way of reduced Cost Sharing Amounts.

To receive a higher payment level, Covered Services must be received from an NDPERS PPO Health Care Provider. Please see the NDPERS PPO Health Care Provider Listing at www.sanfordhealthplan.com/ndpers.

Note: Benefits for Covered Services received by Eligible Dependents, as outlined in Section 3, *Eligibility Requirements for Dependents*, who are residing out of the state of North Dakota, will be paid at the Basic Plan level, if the Subscriber, or the Subscriber's spouse, is required by court order to provide health coverage for that Eligible Dependent. You may be asked to provide a copy of the court order to the Plan.

Basic Plan

If a PPO Health Care Provider is: 1) not available in the Member's area; or 2) if the Member either chooses or is referred to a Health Care Provider not participating in the Preferred Provider Organization (PPO), the Member will receive the Basic Plan benefits if the Health Care Provider is contracted as part of the Sanford Health Plan Network.

Other Health Care Providers

Participating Health Care Providers

When Covered Services are received from a Participating Health Care Provider, the Participating Health Care Provider agrees to submit claims to Sanford Health Plan on behalf of the Member. Reimbursement for Covered Services will be made directly to the Participating Health Care Provider according to the terms of this Benefit Plan and the participation agreement between the Health Care Provider and Sanford Health Plan.

When Covered Services are received from a Participating Health Care Provider, a provider discount provision is in effect. This means the Allowance paid by Sanford Health Plan will be considered by the Participating Health Care Provider as payment in full, except for Cost Sharing Amounts, or if applicable, Maximum Benefit Allowances or Lifetime Maximums.

Participating Health Care Providers have also agreed to perform managed benefits requirements on behalf of the Member. If the Health Care Provider is a Participating Health Care Provider (either at the PPO or Basic Plan level by contracted "participation agreement" with Sanford Health Plan), the benefit payment will be as indicated in the Outline of Covered Services and the Member's Summary of Benefits and Coverage (SBC).

Non-Participating Health Care Providers

If a Member receives Covered Services from a Non-Participating Health Care Provider (health care providers who are not contracted with Sanford Health Plan), the Member will be responsible for notifying Sanford Health Plan of the receipt of services. If Sanford Health Plan needs copies of medical records to process the Member's claim, the Member is responsible for obtaining such records from the Non-Participating Health Care Provider.

Non-Participating Health Care Providers within the State of North Dakota

If a Member receives Covered Services from a Non-Participating Health Care Provider within the state of North Dakota, benefit payments will be based on the Allowance and reduced by an additional 20%. The 20% payment reduction does not apply toward the Out-of-Pocket Maximum Amount. The Allowance will not exceed 80% of the billed charge.

Note: The Member is responsible for the 20% payment reduction and any charges in excess of the Allowance for Covered Services.

Benefit payments will be made directly to the Provider for Covered Services received from a Non-Participating Health Care Provider. Sanford Health Plan may designate a Health Care Provider as Non-Payable.

Non-Participating Health Care Providers outside the State of North Dakota

If a Member receives Covered Services from a Non-Participating Health Care Provider outside the state of North Dakota, the Allowance for Covered Services will be an amount within a general range of payments made and judged to be reasonable by Sanford Health Plan.

Note: The Member is responsible for any charges in excess of the Allowance for Covered Services.

If a Member receives Covered Services from a Health Care Provider in a county contiguous to North Dakota, the benefit payment will be provided on the same basis as a Health Care Provider located in the state of North Dakota. If the Health Care Provider is a Participating Health Care Provider, the benefit payment will be as indicated in the Outline of Covered Services and SBC. If the Health Care Provider is not a Participating Health Care Provider, benefits will be available at the same level as Non-Participating Health Care Providers within the state of North Dakota. Sanford Health Plan may designate a Health Care Provider as Non-Payable

Non-Participating Providers outside the Sanford Health Plan Service Area

When Covered Services are provided outside of Sanford Health Plan's Service Area by health care providers who have not entered into a "participating agreement" with Sanford Health Plan (non-participating health care providers), the amount the Member pays for such services will generally be based on either Sanford Health Plan's non-participating health care provider local payment or the pricing arrangements required by applicable state law. In these situations, the Member may be liable for the difference between the amount that the non-participating health care provider bills and the payment Sanford Health Plan will make for the Covered Services as set forth in this paragraph.

In certain situations, Sanford Health Plan may use other payment bases, such as the payment Sanford Health Plan would make if the Covered Services had been obtained within the Sanford Health Plan Service Area, or a special negotiated payment, as permitted, to determine the amount Sanford Health Plan will pay for Covered Services provided by non-participating health care providers. In these situations, a Member may be liable for the difference between the amount that the non-participating health care provider bills and the payment Sanford Health Plan will make for the Covered Services as set forth in this paragraph.

Health Care Providers outside the United States

The benefits available under this Benefit Plan are also available to Members traveling or living outside of the United States. The same Preauthorization/Prior Approval requirements will apply. If the Health Care Provider is a Participating Provider, the Participating Health Care Provider will submit claims for reimbursement on behalf of the Member. Reimbursement for Covered Services will be made directly to the Participating Health Care Provider. If the Health Care Provider is not a Participating Provider, the Member will be responsible for payment of services and submitting a claim for reimbursement to Sanford Health Plan. Sanford Health Plan will provide translation and currency conversion services for the Member's claims outside of the United States.

Sanford Health Plan will reimburse Prescription Medications purchased outside the United States by Members who live outside the United States where no suitable alternative exists. Reimbursement will also be made in instances where Members are traveling and new medication therapy is initiated for acute conditions or where emergency replacement of medications originally prescribed and purchased in the United States is necessary. The reimbursable supply of medications in travel situations will be limited to an amount necessary to assure continuation of therapy during the travel period and for a reasonable period thereafter.

Non-Payable Health Care Providers

If Sanford Health Plan designates a Health Care Provider as *Non-Payable*, no benefits will be available for Covered Services prescribed by, performed by, or under the direct supervision of the *Non-Payable Health Care Provider*. Notice of designation as a Non-Payable Health Care Provider will be provided to Members at least 30 days prior to the effective date of designation as a Non-Payable Health Care Provider.

As of the date of termination, all charges incurred by a Member for services received from the Non-Payable Health Care Provider will be the Subscriber's responsibility.

Medicare Private Contracts

A Health Care Provider may ask a Member who is eligible for Medicare to enter into a Medicare private contract where the Member and the Health Care Provider agree that the Member is to be provided with services outside of the Medicare program. This Medicare private contract must be entered into between the Member and the Health Care Provider prior to the receipt of any services and indicate that 1) neither the Member nor the Health Care Provider is permitted to file a request for reimbursement with Medicare for any of the services provided by the Health Care Provider; and 2) the Health Care Provider can charge any amount agreed to by the Member for services instead of the Medicare limiting charge.

Under a Medicare private contract, the Health Care Provider can set any price for services but Medicare will not pay anything. If the Member enters into a Medicare private contract, Medicare will not pay any portion of the services and Sanford Health Plan will limit its payment to the amount Sanford Health Plan would have paid as though Medicare was paying for such Covered Services. If a Member enters into a Medicare private contract, the Member is responsible for paying the difference between the amount billed by the Health Care Provider for Covered Services and the amount paid by Sanford Health Plan.

Cost Sharing Amounts – Details & Definitions

A **Cost Sharing Amount** is the dollar amount a Member is responsible for paying when Covered Services are received from a Health Care Provider. Cost Sharing Amounts include Coinsurance and Deductible Amounts.

Applicable Cost Sharing Amounts are identified in Section 2 and the Member's Summary of Benefits and Coverage. Also, see the schedule above in *Overview of Cost Sharing Amounts and how they accumulate* for the specific Cost Sharing Amounts that apply to this Benefit Plan.

Coinsurance

Sanford Health Plan shall calculate Coinsurance Amounts on behalf of Members obtaining Covered Services within the Sanford Health Plan contracted provider network on the lesser of (1) billed charges or (2) provider negotiated payment rates (Allowed Charge).

If Covered Services are obtained by a Member out of the Sanford Health Plan contracted provider network, the coinsurance calculation may be based on the Health Care Provider's billed charges. This may result in a significantly higher Coinsurance Amount for certain services a Member incurs out of the Sanford Health Plan contracted provider network. It is not possible to provide specific information for each Health Care Provider outside of Sanford Health Plan's Service Area because of the many different arrangements between Health Care Providers. However, if a Member contacts Sanford Health Plan prior to receiving services from a Health Care Provider outside of Sanford Health Plan's Service Area, Sanford Health Plan may be able to provide information regarding specific Health Care Providers.

Coinsurance Maximum Amounts

The total Coinsurance Amount that is a Member's responsibility during a Benefit Period. The Coinsurance Maximum Amount renews on January 1 of each consecutive Benefit Period.

Deductibles

The Deductible Amount renews on January 1 of each consecutive Benefit Period. A Member must meet the annual Deductible Amount before Coinsurance Amounts apply to the cost of Covered Services, unless otherwise specified in this Certificate of Insurance.

Note: The Deductible Amounts for Covered Services received from a PPO Health Care Provider, or on a Basic Plan basis, accumulate jointly up to the PPO Deductible Amount.

Out-of-Pocket Maximum Amounts

When the Out-of-Pocket Maximum Amount is met, this Benefit Plan will pay 100% of the Allowed Charge for Covered Services. The Out-of-Pocket Maximum Amount renews on January 1 of each consecutive Benefit Period.

Note: The Out-of-Pocket Maximum Amounts for Covered Services received from a PPO Health Care Provider, or on a Basic Plan basis, cross accumulate jointly up to the PPO Out-of-Pocket Maximum Amount.

Note: When the PPO Out-of-Pocket Maximum Amount has been met, all Covered Services received from a PPO Health Care Provider will be paid at 100% of Allowed Charge. Covered Services sought on a Basic Plan basis will continue to be paid at 75% of the Allowed Charge until the Out-of-Pocket Maximum Amount for Basic Plan services is met.

Prescription Medications and Coinsurance

A Member must meet the Annual Deductible before Coinsurance Amounts will apply to prescription medications. When the Out-of-Pocket Maximum Amount that is a Member's responsibility during a Benefit Period is met, this Benefit Plan will pay 100% of the Allowed Charge for Formulary Prescription Medications. This Out-of-Pocket Maximum Amount renews on January 1 of each consecutive Benefit Period.

Note: Prescription Medication Coinsurance Amounts accumulate toward a Member's cumulative annual Out-of-Pocket Maximum. The Out-of-Pocket Maximum Amount renews on January 1 of each consecutive Benefit Period.

Infertility Services Coinsurance

Any Member-paid coinsurance costs for infertility services do not apply toward annual Out-of-Pocket Maximum Amounts. Infertility services are limited to a lifetime benefit maximum, per Member, of $20,000.

Section 2. Outline of Covered Services

Covered Services	PROVIDER OF SERVICE Basic Plan After Deductible Amount	PROVIDER OF SERVICE PPO Plan After Deductible Amount
Inpatient Hospital and Medical Services		
• **Inpatient Hospital Services**	75% of Allowed Charge.	80% of Allowed Charge.
• **Inpatient Medical Care Visits**	75% of Allowed Charge.	80% of Allowed Charge.
• **Ancillary Services**	75% of Allowed Charge.	80% of Allowed Charge.
• **Inpatient Consultations**	75% of Allowed Charge.	80% of Allowed Charge.
• **Concurrent Services**	75% of Allowed Charge.	80% of Allowed Charge.
• **Initial Newborn Care**	75% of Allowed Charge. *Deductible Amount is waived.*	80% of Allowed Charge. *Deductible Amount is waived.*
Inpatient and Outpatient Surgical Services		
• **Professional Health Care Provider Services**	75% of Allowed Charge.	80% of Allowed Charge.
• **Assistant Surgeon Services**	75% of Allowed Charge.	80% of Allowed Charge.
• **Ambulatory Surgical Facility Services**	75% of Allowed Charge.	80% of Allowed Charge.
• **Hospital Ancillary Services**	75% of Allowed Charge.	80% of Allowed Charge.
• **Anesthesia Services**	75% of Allowed Charge.	80% of Allowed Charge.
• **Outpatient Sterilization Procedures for Females**	100% of Allowed Charge. *Deductible Amount is waived.*	100% of Allowed Charge. *Deductible Amount is waived.*
Transplant Services		
• **Inpatient and Outpatient Hospital and Medical Services**	75% of Allowed Charge *when Preauthorization/Prior Approval is received from Sanford Health Plan.*	80% of Allowed Charge *when Preauthorization/Prior Approval is received from Sanford Health Plan.*
• **Transportation Services**	75% of Allowed Charge. *Maximum Benefit Allowance of $1,000 per transplant procedure.*	80% of Allowed Charge.
Dental Services		
• **Temporomandibular (TMJ) or Craniomandibular (CMJ) Joint Treatment**	75% of Allowed Charge. *Benefits are subject to a Maximum Benefit Allowance of 1 splint per Member per Benefit Period.*	80% of Allowed Charge.
• **Dental Services Related to Accidental Injury**	75% of Allowed Charge.	80% of Allowed Charge.
• **Dental Anesthesia and Hospitalization**	75% of Allowed Charge. *Prior Approval is required for Members age 9 and older.*	80% of Allowed Charge
Outpatient Hospital and Medical Services		
• **Home and Office Visits**	75% of Allowed Charge	80% of Allowed Charge
• **Diagnostic Services**	75% of Allowed Charge.	80% of Allowed Charge.

Covered Services	PROVIDER OF SERVICE Basic Plan After Deductible Amount	PROVIDER OF SERVICE PPO Plan After Deductible Amount
• **Emergency Services**	80% of Allowed Charge for emergency room facility fee billed by a Hospital.	80% of Allowed Charge for emergency room facility fee billed by a Hospital.
	80% of Allowed Charge for office or emergency room visit billed by a Professional Health Care Provider.	80% of Allowed Charge for office or emergency room visit billed by a Professional Health Care Provider.
	80% of Allowed Charge for all Ancillary Services received in an emergency room or Professional Health Care Provider's office.	80% of Allowed Charge for all Ancillary Services received in an emergency room or Professional Health Care Provider's office.
• **Ambulance Services**	80% of Allowed Charge.	80% of Allowed Charge.
• **Radiation Therapy and Chemotherapy**	75% of Allowed Charge.	80% of Allowed Charge.
• **Dialysis Treatment**	75% of Allowed Charge.	80% of Allowed Charge.
• **Home Infusion Therapy Services**	75% of Allowed Charge.	80% of Allowed Charge.
• **Visual Training for Members under age 10**	75% of Allowed Charge.	80% of Allowed Charge.
	Benefits are subject to an Annual Maximum of 16 visits per Member.	
• **Allergy Services**	75% of Allowed Charge.	80% of Allowed Charge.
• **Phenylketonuria (PKU) Foods and food products** - *for the dietary treatment of Members born after 12/31/62 with maple syrup urine disease or phenylketonuria (PKU)*	75% of Allowed Charge.	80% of Allowed Charge.
Wellness Services	Evidence-based items or services that have, in effect, a rating of "A" or "B" in the current recommendations of the United States Preventive Services Task Force, when received from a Participating Provider, are covered without payment of any deductible or coinsurance requirement that would otherwise apply. As these recommendations change, your coverage may also change. Services performed outside of Plan Preventive Guidelines, and with a medical diagnosis, will be applied to your deductible and coinsurance.	
• **Well Child Care to the Member's 18th birthday**	100% of Allowed Charge. *Deductible Amount is waived.* *Benefits are available as follows:* • *Pediatric services based on guidelines supported by the HRSA, including recommendations by the American Academy of Pediatrics Bright Future pediatric schedule, and newborn metabolic screenings;* • *Pediatric services based on evidence-informed preventive care and screening guidelines supported by the HRSA;* • *Medical History for all children throughout development at the following ages: 0 to 11 months, 1 to 4 years, 5 to 10 years, 11 to 14 years, 15 to 17 years.*	100% of Allowed Charge. *Deductible Amount is waived.*
• **Immunizations**	100% of Allowed Charge. *Deductible Amount is waived.* *Immunizations are provided and covered as recommended by the Centers for Disease Control and Prevention Advisory Committee on Immunization Practices (ACIP) and by the Health Resources and Services Administration (HRSA), with respect to the Member involved.*	100% of Allowed Charge. *Deductible Amount is waived.*

Covered Services	PROVIDER OF SERVICE Basic Plan After Deductible Amount	PROVIDER OF SERVICE PPO Plan After Deductible Amount
Preventive Screening Services for Members ages 18 and older		
• **Routine Preventive Wellness (Physical) Examination** *No preauthorization/prior approval is required when using a participating provider. Your annual preventive services do not need to be scheduled 12 months apart. You may have your preventive services one time per calendar year. For example, if your services were done July last year, it is okay to schedule them before July this year.*	100% of Allowed Charge. *Deductible Amount is waived.*	100% of Allowed Charge. *Deductible Amount is waived.*
	Office visit exams Exam includes health advice and counseling on blood pressure, counseling and interventions on tobacco use, screening and counseling for alcohol use, sun exposure, screening for depression, obesity screening with referral for behavioral interventions for patients with a body mass index of 30 or higher and referrals to intensive behavioral counseling to promote a healthful diet and physical activity to decrease cardiovascular risk in adults that are overweight or obese and with cardiovascular disease risk factors. During the visit, you may receive immunizations and screenings based on your health care practitioner's recommendation.	
• **Routine Diagnostic Screenings**	100% of Allowed Charge. *Deductible Amount is waived.*	100% of Allowed Charge. *Deductible Amount is waived.*
	Screenings include, but are not limited to the following: • *Abdominal Aortic Aneurysm Screening; Lifetime Maximum Benefit Allowance of one (1) ultrasound screening per male Member ages 65 through 75 with a history of smoking* • *Anemia screening – Hemoglobin or Hematocrit (one or the other); one (1) per Member per year.* • *Basic Metabolic Panel; one (1) per Member per year.* • *Cholesterol Screening; coverage for frequency of Lipid Profile is dependent on Member age. Additional tests, such as comprehensive metabolic panels will be applied to your deductible/coinsurance.* • *Diabetes Screening; benefit allowance of one (1) per Member per year.* • *Hepatitis B Virus infection screening.* • *Hepatitis C Virus (HCV) infection screening; Lifetime Maximum Benefit Allowance of either: one (1) screening for Members born between 1945-1965; or one (1) screening for Members at risk.* • *Lung Cancer Screening; benefit allowance of one (1) per Member ages 55 through 80 who: 1) have a 30 pack-year smoking history; 2) currently smoke; or 3) have quit smoking within the past 15 years.* • *Osteoporosis Screening for female Members ages 65 and older, or younger if at increased risk.* • *Sexually Transmitted Disease (STD) Screening; one (1) per Member per year.* • *Genetic counseling and evaluation for BRCA Testing and BRCA lab screening for female members with a family history (breast, ovarian, tubal, or peritoneal cancer) associated with increased risk for harmful mutation in BRCA1 or BRCA2. Lifetime Maximum Benefit Allowance of one (1) screening per Member.* *For a complete listing, see the Preventive Health Guidelines for Members by signing into your account at www.sanfordhealthplan.com/memberlogin or call toll-free (800) 499-3416 to request a copy. As these recommendations change, your coverage may also change.*	
• **Mammography Screening**	100% of Allowed Charge. *Deductible Amount is waived.*	100% of Allowed Charge. *Deductible Amount is waived.*
	• *One (1) service for Members between the ages of 35 and 40.* • *One (1) service per year for Members age 40 and older.* • *Additional mammograms will be covered if recommended by a physician per N.D.C.C. §26.1-36-09.1*	
• **Cervical Cancer Screening**	100% of Allowed Charge. *Deductible Amount is waived.*	100% of Allowed Charge. *Deductible Amount is waived.*
	Benefits are subject to a Maximum Benefit Allowance of 1 Pap smear per Benefit Period. Includes Office Visit.	

Covered Services	PROVIDER OF SERVICE Basic Plan After Deductible Amount	PROVIDER OF SERVICE PPO Plan After Deductible Amount
• **Colorectal Cancer Screening for Members ages 50 and older**	***Note:*** *Expenses incurred for tissue samples taken during a screening and sent for evaluation or colonoscopies due to a medical condition will be applied to your deductible/coinsurance.*	
➢ Fecal Occult Blood Test; *or*	100% of Allowed Charge. *Deductible Amount is waived.* *Maximum Benefit Allowance of one (1) test per Member per year.*	100% of Allowed Charge. *Deductible Amount is waived.*
➢ Colonoscopy; *or*	100% of Allowed Charge. *Deductible Amount is waived.* *Maximum Benefit Allowance of one (1) test per Member every 10 years.*	100% of Allowed Charge. *Deductible Amount is waived.*
➢ Sigmoidoscopy	100% of Allowed Charge. *Deductible Amount is waived.* *Maximum Benefit Allowance of one (1) test per Member every 5 years.*	100% of Allowed Charge. *Deductible Amount is waived.*
• **Prostate Cancer Screening**	100% of Allowed Charge. *Deductible Amount is waived.* *Benefits are available for an annual digital rectal examination and an annual prostate-specific antigen test for the following: an asymptomatic male age 50 and older; a male age 40 and older of African American descent; and a male age 40 with a family history of prostate cancer. Includes Office Visit.*	100% of Allowed Charge. *Deductible Amount is waived.*
• **Nutritional Counseling**	100% of Allowed Charge. *Deductible Amount is waived.* • *Hyperlipidemia – Maximum of 4 visits per Member per Benefit Period.* • *Gestational Diabetes – Maximum of 4 visits per Member per Benefit Period.* • *Diabetes Mellitus – Maximum of 4 visits per Member per Benefit Period.* • *Hypertension – Maximum of 2 visits per Member per Benefit Period.* • *Obesity – Maximum of 4 visits per Member per Benefit Period.*	100% of Allowed Charge. *Deductible Amount is waived.*
• **Aspirin to prevent cardiovascular disease**	100% of Allowed Charge. *Deductible Amount is waived.* *Benefit is available for Male Members ages 45 through 79, and female Members ages 55 through 79 at risk for developing cardiovascular disease.*	100% of Allowed Charge. *Deductible Amount is waived.*
The preventive care benefits listed above provide a brief overview. For a detailed list of covered services, view the Plan's Preventive Health Guidelines by signing into your account at www.sanfordhealthplan.com/memberlogin.		
• **Outpatient Nutritional Care Services**	75% of Allowed Charge. *Deductible Amount is waived.* *Benefits are available to the Maximum Benefit Allowance for the following diagnosed medical conditions:* • *Chronic Renal Failure – Four (4) Office Visits per Member per Benefit Period.* • *Anorexia Nervosa – Four (4) Office Visits per Member per Benefit Period.* • *Bulimia – Four (4) Office Visits per Member per Benefit Period.* • *PKU – Four (4) Office Visits per Member per Benefit Period.*	80% of Allowed Charge. *Deductible Amount is waived.*
• **Diabetes Education Services**	75% of Allowed Charge. *Deductible Amount is waived.*	80% of Allowed Charge. *Deductible Amount is waived.*
• **Dilated Eye Examination** *(for diabetes related diagnosis)*	75% of Allowed Charge. *Deductible Amount is waived.* *Benefits are subject to a Maximum Benefit Allowance of 1 examination per Member per Benefit Period.*	80% of Allowed Charge. *Deductible Amount is waived.*
• **Tobacco Cessation Services**	*Tobacco cessation services include screening for tobacco use and at least two (2) tobacco cessation attempts per year (for Members who use tobacco products). Covering a cessation attempt is defined to include coverage for:* • *Four (4) tobacco cessation counseling sessions of at least ten (10) minutes each (including telephone counseling, group counseling and individual counseling) without Preauthorization/Prior Approval; and* • *All Food and Drug Administration (FDA)-approved tobacco cessation medications (including both prescription and over-the-counter medications) for a 90-day treatment regimen when prescribed by a health care provider without Preauthorization/Prior Approval.*	

Covered Services	PROVIDER OF SERVICE Basic Plan After Deductible Amount	PPO Plan After Deductible Amount
Outpatient Therapy Services		
• **Physical Therapy**	75% of Allowed Charge. *Benefits are subject to the medical guidelines established by the Plan.*	80% of Allowed Charge.
• **Occupational Therapy**	75% of Allowed Charge. *Benefits are available for 90 consecutive days, beginning on the date of the first therapy treatment for the condition. Additional benefits may be allowed after the 90 days when Medically Appropriate and Necessary.*	80% of Allowed Charge.
• **Speech Therapy**	75% of Allowed Charge. *Benefits are available for 90 consecutive days, beginning on the date of the first therapy treatment for the condition. Additional benefits may be allowed after the 90 days when Medically Appropriate and Necessary.*	80% of Allowed Charge.
• **Respiratory Therapy Services**	75% of Allowed Charge.	80% of Allowed Charge.
• **Cardiac Rehabilitation Services**	75% of Allowed Charge. *Benefits are subject to a Maximum Benefit Allowance of 12 visits per Member per episode for the following diagnosed medical conditions:* • *Myocardial Infarction* • *Coronary Artery Bypass Surgery* • *Coronary Angioplasty and Stenting* • *Heart Valve Surgery* • *Heart Transplant Surgery* *Cardiac Rehabilitation Services must begin within 2 months following discharge from the Hospital.*	80% of Allowed Charge.
• **Pulmonary Rehabilitation Services**	75% of Allowed Charge.	80% of Allowed Charge.
• **Physical Therapy for Members age 65 and older at risk for falls**	100% of Allowed Charge. *Deductible Amount is waived.*	100% of Allowed Charge. *Deductible Amount is waived.*
	Benefit subject to Medical Necessity	
Chiropractic Services		
• **Home and Office Visits**	75% of Allowed Charge.	80% of Allowed Charge.
• **Therapy and Manipulations**	75% of Allowed Charge.	80% of Allowed Charge.
• **Diagnostic Services**	75% of Allowed Charge.	80% of Allowed Charge.
Maternity Services		
• **Inpatient Hospital and Medical Services**	75% of Allowed Charge.	80% of Allowed Charge.
• **Routine Prenatal and Postnatal Care**	100% of Allowed Charge. *Deductible Amount is waived.*	100% of Allowed Charge. *Deductible Amount is waived.*
• **One (1) Prenatal Nutritional Counseling visit per pregnancy**	100% of Allowed Charge. *Deductible Amount is waived.*	100% of Allowed Charge. *Deductible Amount is waived.*
• **Lactation Counseling**	100% of Allowed Charge. *Deductible Amount is waived.*	100% of Allowed Charge. *Deductible Amount is waived.*
Infertility Services		
• **Diagnostics, Treatment, Office Visits, and Other Services**	80% of Allowed Charge. *Benefits are subject to a $20,000 Lifetime Benefit Maximum Amount per Member. Any Member-paid coinsurance for infertility services does not apply toward the Out-of-Pocket Maximum Amount.* *Prior Approval is required for assisted reproductive technology, including GIFT, ZIFT, ICSI and IVF.*	80% of Allowed Charge.

Covered Services	PROVIDER OF SERVICE Basic Plan After Deductible Amount	PROVIDER OF SERVICE PPO Plan After Deductible Amount
Contraceptive Services		
• **Diagnostics, Treatment, Office Visits, and Other Services**	100% of Allowed Charge. *Deductible Amount is waived.* *Prescription contraceptive services obtainable with a Prescription Order are paid under the Prescription Drug benefit. See Section 5(e).*	100% of Allowed Charge. *Deductible Amount is waived.*
Mental Health and Substance Use Disorder Treatment Services		
• **Mental Health Treatment Services**		
Inpatient		
Includes Acute Inpatient Admissions and Residential Treatment	75% of Allowed Charge. *Preauthorization is required.*	80% of Allowed Charge. *Preauthorization is required.*
Outpatient	*For all Outpatient Services, 100% of the Allowed Charge (includes Deductible/ Coinsurance) is waived for the initial 5 hours, per Member per Benefit Period. Coverage of the first five (5) hours will not apply when you elect an HSA.*	
Office Visits	80% of Allowed Charge.	80% of Allowed Charge.
All Other Services, Including:		
Intensive Outpatient	80% of Allowed Charge.	80% of Allowed Charge.
Partial Hospitalization	80% of Allowed Charge.	80% of Allowed Charge.
• **Substance Use Disorder Treatment Services**		
Inpatient		
Includes Acute Inpatient Admissions and Residential Treatment	75% of Allowed Charge. *Preauthorization is required.*	80% of Allowed Charge. *Preauthorization is required.*
Outpatient	*For all Outpatient Services, 100% of Allowed Charge (includes Deductible/ Coinsurance) is waived for the initial 5 visits, per Member per Benefit Period. Coverage of the first five (5) visits will not apply when you elect an HSA.*	
Office Visits	80% of Allowed Charge.	80% of Allowed Charge.
All Other Services, Including:		
Intensive Outpatient	80% of Allowed Charge.	80% of Allowed Charge.
Partial Hospitalization	80% of Allowed Charge.	80% of Allowed Charge.
Other Services Not Previously Listed Above		
• **Skilled Nursing Facility Services**	75% of Allowed Charge.	80% of Allowed Charge.
• **Home Health Care Services**	75% of Allowed Charge.	80% of Allowed Charge.
• **Hospice Services**	75% of Allowed Charge.	80% of Allowed Charge.
• **Private Duty Nursing Services**	75% of Allowed Charge.	80% of Allowed Charge.
• **Medical Supplies and Equipment** ➢ Home Medical Equipment ➢ Prosthetic Appliances and Limbs ➢ Orthotic Devices ➢ Supplies for Administration of Prescription Medications other than the diabetes supplies specified Section 5(e) ➢ Oxygen Equipment and Supplies ➢ Ostomy Supplies	75% of Allowed Charge.	80% of Allowed Charge.
➢ External Hearing aids	*Limited to one hearing aid, per ear, per Member every 3 years. For Members ages 18 and older, excludes hearing aids to correct gradual hearing impairment or loss that occurs with aging and/or other lifestyle factors.*	

Covered Services	PROVIDER OF SERVICE Basic Plan After Deductible Amount	PPO Plan After Deductible Amount
• **Breast Pumps**	100% of Allowed Charge. *Deductible Amount is waived. Benefits are available for the rental or purchase of 1 breast pump per pregnancy. Supplies also covered; see Section 5(a).*	100% of Allowed Charge. *Deductible Amount is waived. Benefits are available for the rental or purchase of 1 breast pump per pregnancy. Supplies also covered; see Section 5(a).*
• **Eyeglasses or Contact Lenses** *(following a covered cataract surgery)*	75% of Allowed Charge. *Benefits are subject to a Maximum Benefit Allowance of 1 pair of eyeglasses or contact lenses per Member when purchased within 6 months following the surgery.*	80% of Allowed Charge.

Prescription Medications and Diabetes Supplies

Retail and Mail Order

➢ Formulary Medication	80% of Allowed Charge.	80% of Allowed Charge.
➢ Non-Formulary Medication	50% of Allowed Charge.	50% of Allowed Charge.

Formulary contraceptive medications obtainable with a Prescription Order are paid at 100% of Allowed Charge; this includes over-the-counter Plan-B, if obtained with a Prescription Order. *Deductible Amount is waived.*

If a Generic Prescription Medication is the therapeutic equivalent for a Brand Name Prescription Medication, and is authorized by a Member's Professional Health Care Provider, benefits will be based on the Allowance for the Generic equivalent. If the Member does not accept the Generic equivalent, the Member is responsible for the cost difference between the Generic and the Brand Name Prescription Medication and applicable Cost Sharing Amounts. For more information, see Section 5(e).

Prescription Medications and nonprescription diabetes supplies are subject to a dispensing limit of a 100-day supply.

Folic Acid Supplements are covered at 100% (no charge) for women planning to become pregnant or in their childbearing years, if obtained with a Prescription Order. *Deductible Amount is waived.* For details, see Section 5(e).

Vitamin D supplements are covered at 100% (no charge) for Members ages 65 and older at risk for falls, if obtained with a Prescription Order. *Deductible Amount is waived.* For details, see Section 5(e).

Formulary breast cancer preventive medications obtainable with a Prescription Order are covered at 100% (no charge) for women at increased risk for breast cancer. *Deductible Amount is waived.* For details, see Section 5(e).

Section 3. Enrollment

Eligibility and When to Enroll

As provided in N.D.C.C. §54-52.1-01(4) and §54-52.1-18, individuals eligible to receive benefits are every permanent employee who is employed by the state, and political subdivisions which elect the HDHP option, whose services are not limited in duration, who is filling an approved and regularly funded position in the state, and political subdivisions which elect the HDHP option, and who is employed at least seventeen and one-half hours per week and at least five months each year or for those first employed after August 1,2003, is employed at least twenty hours per week and at least twenty weeks each year of employment. An eligible employee includes members of the Legislative Assembly, judges of the Supreme Court, paid members of state boards, commissions, or associations, or political subdivision boards, commissions, or associations which elect the HDHP option, full-time employees of political subdivisions which elect the HDHP option, elective state officers as defined by N.D.C.C. §54-06-01(2), disabled permanent state employees and disabled employees of political subdivisions which elect the HDHP option, who are receiving compensation from the North Dakota workforce safety and insurance.

A temporary employee of a political subdivision which elects the HDHP option, who is employed before August 1, 2007, may elect to participate in the uniform group insurance program by completing the necessary enrollment forms and qualifying under the medical underwriting requirements of the program if such election is made before January 1, 2015, and if the temporary employee is participating in the uniform group insurance program on January 1, 2015. In order for a temporary employee of a political subdivision which elect the HDHP option, who is employed after July 31, 2007, to qualify to participate in the uniform group insurance program, the employee must be employed at least twenty hours per week; must be employed at least twenty weeks each year of employment; must make the election to participate before January 1, 2015; and must be participating in the uniform group insurance program as of January 1, 2015. To be eligible to participate in the uniform group insurance program, a temporary employee of a political subdivision which elects the HDHP option, who is first employed after December 31, 2014, or any temporary employee not participating in the uniform group insurance program as of January 1, 2015, must meet the definition of a full-time employee under §4980H(c)(4) of the Internal Revenue Code [26 U.S.C. 4980H(c)(4)]. Temporary employees employed by the state of North Dakota are not eligible to participate in this Benefit Plan.

An eligible employee is entitled to coverage the first of the month following the month of employment, provided the employee submits an application for coverage within the first 31 days of employment or eligibility for a special enrollment period as set forth in N.D.A.C. §71-03-03. Each eligible employee may elect to enroll his/her Eligible Dependents.

Eligible employees also include non-Medicare eligible retired and terminated employees, and their Eligible Dependents, who remain eligible to participate in the uniform group insurance program pursuant to applicable state law, as provided in N.D.C.C. §54-52.1-03 and federal regulations. For a comprehensive description of eligibility, refer to the NDPERS web site at www.nd.gov/ndpers.

Eligibility to receive benefits under the Benefit Plan is initially determined by the Plan Administrator. When an eligible employee meets the criteria for eligibility, a membership application must be completed. NDPERS has the ultimate decision making authority regarding eligibility to receive benefits.

A "Late Enrollee" is an Eligible Group Member or Eligible Dependent who declines coverage when he or she is initially eligible to enroll and later requests to enroll for coverage. A Late Enrollee can only enroll during the next scheduled Annual Enrollment Period. A Member is not a "Late Enrollee" if any "special enrollment right(s)" apply, as described later in this section.

How to Enroll

Both the Group and Group Member are involved in the enrollment process.

The Group Member must:

1. Complete the enrollment process, as designated by NDPERS, for the Group Member and any Eligible Dependents; and
2. Provide all information needed to determine the eligibility of the Group Member and/or Dependents, if requested by the Plan.

The Group must:

1. Provide all information needed by the Plan to determine eligibility; and
2. Agree to pay required premium payments on behalf of the Group Member.

When Coverage Begins

Coverage generally becomes effective on the first day of the month that follows the date of hire, as designated by NDPERS.

If you are an inpatient in a Hospital or other Facility on the day your coverage begins, we will pay benefits for Covered Services that you receive beginning on the date your coverage becomes effective, as long as you receive Covered Services in accordance with the terms of this Certificate. Payment of benefits is subject to any obligations under a previous plan or coverage arrangement in accordance with state law and applicable regulations.

For more information, see Section 11, "*Continuation of Coverage for Confined Members*" and "*Extension of Benefits for Total Disability*".

Eligibility Requirements for Dependents

The following Dependents are eligible for coverage ("Dependent coverage"):

Spouse - The Subscriber's spouse under a legally existing marriage between persons of the opposite sex. A Spouse is always eligible for coverage, subject to eligibility requirements as designated by NDPERS.

Dependent Child - To be eligible for coverage, a dependent child must meet all the following requirements:

1. Be your natural child, a child placed with you for adoption, a legally adopted child, a child for whom you have legal guardianship, a stepchild, or foster child; and

2. Be one of the following:
   a. under age twenty-six (26); or
   b. incapable of self-sustaining employment by reason of a disabling condition and chiefly dependent upon the Certificate holder/Subscriber for support and maintenance. If the Plan so requests, the Subscriber must provide proof of the child's disability within *thirty-one (31)* days of the Plan's request. Such a request may be no more than annually following the two year period of the disabled dependent child's attainment of the limiting age [N.D.C.C. §26.1-36-22 (4)]; or
   c. the Subscriber's grandchild(ren) or those of the Subscriber's living, covered Spouse, who legally reside with the Certificate holder/Subscriber and (1) the parent of the grandchild(ren) is an Covered Dependent also covered by this Plan; and (2) both the Dependent and child of such Dependent (grandchild) are chiefly dependent upon the Certificate holder/Subscriber for support.

Dependent coverage does not include the spouse of an adult Dependent child. Coverage will continue to the end of the month in which the adult Dependent child reaches the limiting age. Coverage does not include the adult Dependent child's spouse or child of such Dependent (grandchild) unless that grandchild meets other coverage criteria established under state law. The adult Dependent's marital status, financial dependency, residency, student status or employment status will not be considered in determining eligibility for initial or continued coverage.

Limitations. A Dependent shall not be covered under this Contract if he or she is eligible to be a Subscriber, already covered as a Dependent of another Subscriber, or already covered as a Subscriber.

Noncustodial Subscribers

Whenever a Dependent Child receives coverage under the Plan through the noncustodial parent who is the Subscriber, the Plan shall do all of the following:

1. Provide necessary information to the custodial parent in order for the Dependent Child to receive benefits under the Plan;
2. Allow the custodial parent or Provider, with the custodial parent's approval, to submit claims for Covered Services without approval from the noncustodial parent; and
3. Make payment on the submitted claims directly to the custodial parent or Provider.

Status of Member Eligibility

The Plan Administrator agrees to furnish Sanford Health Plan with any information required by Sanford Health Plan for the purpose of enrollment. Any changes affecting a Member's eligibility for coverage must be provided to Sanford Health Plan by the Plan Administrator and/or the Member immediately, but in any event, the Plan Administrator and/or the Member shall notify Sanford Health Plan within 31 days of the change.

Statements made on membership applications are deemed representations and not warranties. No statements made on the membership application may be used in any contest unless a copy has been furnished to that person, or in the event of the death or incapacity of that person, to the individual's beneficiary or personal representative. The Subscriber is provided a copy of the membership application at the time of completion.

A Member making a statement (including the omission of information) on the membership application or in relation to any of the terms of this Benefit Plan constituting fraud or an intentional misrepresentation of a material fact will result in the rescission of this Benefit Plan by Sanford Health Plan. A rescission is a cancellation or discontinuance of coverage, including any benefits paid, that has a retroactive effect of voiding this Benefit Plan or any benefits paid under the terms of this Benefit Plan.

Physical Examinations

Sanford Health Plan at its own expense may require a physical examination of the Member as often as necessary during the pendency of a Claim for Benefits and may require an autopsy in case of death if the autopsy is not prohibited by law.

Qualified Medical Child Support Order (QMCSO) Provision

A QMCSO is an order of a court or administrative tribunal that creates the right of a Member's child to be enrolled under this Plan. If a QMCSO is issued, this Plan will provide benefits to the child(ren) of a covered person regardless of whether the child(ren) resides with the Member. In the event that a QMCSO is issued, each named child(ren) will be covered by this Plan in the same manner as any other Dependent child(ren) by this Plan.

When the Plan is in receipt of a medical child support order, the Plan will notify the Member and each child named in the order, that the Plan is in receipt of a QMCSO which contains the following required information:

- Name and last known address of the Member and the child(ren) to be covered by the Plan.
- A description of the type of coverage to be provided by this Plan to each named child.
- The applicable period determined by the order.
- The plan determined by the order.

In order for the child's coverage to become effective as of the date of the court order issued, the Member must apply for coverage as defined previously in this section. Each named child may designate another person, such as a custodial guardian, to receive copies of explanation of benefits, payments, and other materials.

Exceptions. If a court has ordered a Subscriber to provide health coverage for a Dependent Child, the requirements in the *Dependent Child* subsection above, "*Eligibility Requirements for Dependents*" need not be satisfied, but the Subscriber must still request enrollment on behalf of the Dependent Child as set forth in this Plan. If the Subscriber fails to enroll the Dependent Child, the other parent or the legal representative of the Dependent Child, may enroll the Dependent Child. A Dependent Child who is provided coverage pursuant to this exception shall not be terminated unless the Plan is provided satisfactory written evidence of any of the following:

1. The court or administrative order is no longer in effect;
2. The Dependent Child is or will be enrolled in comparable health coverage through an insurer which will take effect not later than the

effective date of the termination; or
3. The Group has eliminated family coverage for all of its Members.

Michelle's Law

Federal law requires that we provide the following notice regarding Michelle's Law [Public Law 110-381]. Please note that changes in federal law may eliminate certain elements of Michelle's Law, and the Plan intends to provide continuing coverage of Eligible Dependents up to age twenty-six (26), irrespective of their student status, for Plan Years beginning on or after September 23, 2010.

A Dependent Child under twenty-five (25) years old and enrolled in and attending an accredited college, university, or trade or secondary school at least five (5) months each year will remain covered if the Dependent takes a medically necessary leave of absence from school or changes to part-time status. The leave of absence must:

1. Be medically necessary;
2. Commence while the child is suffering from a serious illness or injury; and
3. Cause the child to lose coverage under the plan.

Students are only eligible as long as they were covered by their parent's health insurance Certificate prior to diagnosis.

Coverage will continue until the earlier of one year from the first day of the leave of absence or the date on which coverage would otherwise terminate because the child no longer meets the requirements to be an Eligible Dependent (e.g., reaching the Plan's limiting age).

You must provide a written and signed certification from the Dependent Child's treating Practitioner and/or Provider stating that the Dependent Child is suffering from a serious illness or injury and that the leave of absence is medically necessary and the effective date of the leave.

When and How to Enroll Dependents

When to Enroll Dependents

A Subscriber shall apply for coverage for a Dependent during the same periods of time that the Subscriber may apply for his or her own coverage. However, there is an exception for newborn and adopted children; see "*Coverage from Birth*" and "*Adoption or Children Placed for Adoption*" below. There is also an exception for Spouses; see "*New Spouses and Dependent Children*" below.

How to Enroll Dependents

The Group Member must:

1. Complete the enrollment process, as designated by NDPERS, for the Group Member and any Eligible Dependents; and
2. Provide all information needed to determine the eligibility of the Group Member and/or Dependents, if requested by the Plan.

When Dependent Coverage Begins

1. **General.** If a Dependent is enrolled at the same time the Subscriber enrolls for coverage, the Dependent's effective date of coverage will be the same as the Subscriber's effective date as described in "*When Coverage Begins*" above.
2. **Delayed Effective Date of Dependent Coverage.** Except for newborns (see item 3 below), if, on the date Dependent coverage becomes effective, the Dependent is Hospitalized and covered under an extension of health benefits from a previous Group health plan or other coverage arrangement, coverage under this Contract shall be subject to benefits payable under the previous plan or coverage arrangement.
3. **Coverage from Birth.** If a Subscriber has a child through birth, the child will become a covered Dependent from the date of birth. Depending on the Class of Coverage the Subscriber is enrolled under, the following provisions apply:
   a. **Subscribers with Single Coverage:** For coverage to continue beyond thirty-one (31) days of the newborn's date of birth, coverage must applied for through NDPERS within thirty-one (31) days of the newborn's date of birth.
   b. **Subscribers with Family Coverage:** Subscribers with Family Coverage under the Plan are encouraged to notify the Plan in advance when a pregnancy and expected due date is known. Newborn children will be added to the Certificate automatically if the Subscriber is enrolled in Family Coverage and the Plan and/or NDPERS is notified of the pregnancy.

   An Eligible Group Member, and any other Dependents, eligible to be enrolled in the Plan, but who failed to enroll during a previous enrollment period, shall be covered under this Contract from the date of the newborn child's birth, provided that coverage is applied for through NDPERS within thirty-one (31) days. Pursuant to N.D.A.C. §71-03-03-01, an employee who previously waived coverage must enroll for coverage at the same time that the Employee's Eligible Dependent is enrolled.

   Dependent coverage is available for the Spouse, if the Spouse is otherwise eligible for coverage under the Plan, provided coverage is applied through NDPERS for the Spouse and, if applicable, the Group Member, within thirty-one (31) days of the newborn child's birth.
4. **Adoption or Children Placed for Adoption.** If a Subscriber adopts a child or has a child placed with him or her as a Dependent, that child will become covered as an Eligible Dependent as of the date specified within a court order or other legal adoption papers. Regardless of the Class of Coverage the Subscriber is enrolled under, the following provisions apply:
   a. **Subscribers with either Single or Family Coverage:** For coverage to continue beyond thirty-one (31) days of the date specified within the court order or other legal adoption papers granting an adoption, placement for adoption, legal guardianship, or order to provide health coverage, the Subscriber must submit an application for coverage to NDPERS within thirty-one (31) days of the date specified within the court order or other legal adoption papers that granted initial eligibility.

   An Eligible Group Member, and any other Dependents, eligible to be enrolled in the Plan, who failed to enroll during a previous enrollment period, shall be covered as of the date specified within a court order or other legal adoption papers, if the Eligible Group Member, and any other Eligible Dependents, submits an application for coverage to NDPERS within thirty-one (31) days of the date specified within the court order or in the legal adoption papers granting an adoption, placement for adoption, legal guardianship, or order to provide health coverage. Pursuant to N.D.A.C. §71-03-03-01, an employee who previously waived coverage must enroll for coverage

at the same time that the Employee's Eligible Dependent is enrolled.

Dependent coverage is available for the Spouse, if the Spouse is otherwise eligible for coverage under the Plan, provided that an application for coverage is submitted to NDPERS for the Spouse and, if applicable, the Group Member, within thirty-one (31) days of the date specified within the court order or in the legal adoption papers granting an adoption, placement for adoption, legal guardianship, or order to provide health coverage.

Coverage at the time of placement for adoption includes the necessary care and treatment of medical conditions existing prior to the date of placement.

5. **New Spouses and Dependent Children.** If a Subscriber gets married, his or her Spouse, and any of the Spouse's Dependents who become Eligible Dependents of the Subscriber as a result of the marriage, will become covered as a Member from the first day of the calendar month beginning after the date of marriage, provided that coverage is applied for the Spouse and/or the Dependent within thirty-one (31) days of the date of marriage.

   If an Eligible Group Member, who is an Employee eligible to enroll in the Plan, but who did not do so during a previous enrollment period, gets married, the employee becomes an eligible Subscriber under the following conditions. The Subscriber, his or her Spouse, and any Dependents who become Eligible Dependents of the Subscriber as a result of the marriage, will become covered as a Member from the first day of the calendar month beginning after the date of marriage, provided that coverage is applied for within thirty-one (31) days of the date of marriage. Pursuant to N.D.A.C. §71-03-03-01, an employee who previously waived coverage must enroll for coverage at the same time that the employee's Eligible Dependent is enrolled.

Special Enrollment Procedures & Rights

A. The Subscriber is responsible for notifying the Plan Administrator (NDPERS) of any mailing address change within 31 days of the change.

B. The Subscriber is responsible for notifying the Plan Administrator (NDPERS) of any change in marital status within 31 days of the change.
   1. If the Subscriber marries, Eligible Dependents may be added as a Member if a membership application is submitted within 31 days of the date of marriage. If the membership application is not submitted within the 31-day period, and the Eligible Dependent is a Late Enrollee, the effective date of coverage will be the Group's anniversary date.

      If the membership application is submitted within 31 days of the date of marriage, the effective date of coverage for the Eligible Dependent will be the first of the month immediately following the date of marriage. If the membership application is not submitted within 31 days of the date of marriage and the Eligible Dependent is a Late Enrollee, the effective date of coverage will be the Group's anniversary date.
   2. If a Member becomes otherwise ineligible for group membership under this Benefit Plan due to legal separation, divorce, annulment, or death, coverage for the Subscriber's Spouse and/or Dependents under Family Coverage will cease, effective the first of the month immediately following timely notice of the event causing ineligibility.

      If living in the Sanford Health Plan Service Area (see *Service Area* in Introduction Section), a Member has the option to continue coverage through one of Sanford Health Plan's individual plans. For more information on options available through Sanford Health Plan, visit www.sanfordhealthplan.com/ndpers or call Member Services toll-free at (800) 499-3416 | TTY/TDD: (877) 652-1844 *(toll-free)*.

      There may also be other coverage options through the Health Insurance Marketplace, Medicaid, or other group health plan coverage options (such as another employer's plan) through what is called a "special enrollment period." The cost of these options may vary depending on a Subscriber's individual circumstances. To learn more about offerings on the Marketplace, and options outside the Sanford Health Plan Service Area, visit www.healthcare.gov or call (800) 318-2596 | TTY/TDD: (855) 889-4325.

C. The Subscriber is responsible for notifying the Plan Administrator (NDPERS) and Sanford Health Plan of any change in family status within 31 days of the change. The effective date of coverage for dependents added to this Benefit Plan within the designated time period will be the date of birth, physical placement, or the first of the month immediately following the date established by court order. If a membership application is not submitted within the designated time period and the Eligible Dependent is a Late Enrollee, the effective date of coverage will be the Group's anniversary date.

   The following provisions will apply:
   1. At the time of birth, natural children will automatically be added to the Subscriber's Benefit Plan if Family Coverage is in force. If the Subscriber is enrolled under another Class of Coverage, the Subscriber must submit a membership application for the newborn child within 31 days of the date of birth. If the membership application is not submitted within the designated time period and the child is a Late Enrollee, the effective date of coverage will be the Group's anniversary date.
   2. Adopted children may be added to this Benefit Plan if a membership application, accompanied by a copy of the placement agreement or court order, is submitted to Sanford Health Plan within 31 days of physical placement of the child. If the membership application is not received in accordance with this provision and the child is a Late Enrollee, the effective date of coverage will be the Group's anniversary date.
   3. Children for whom the Subscriber or the Subscriber's living, covered spouse have been appointed legal guardian may be added to this Benefit Plan by submitting a membership application within 31 days of the date legal guardianship is established by court order. If the membership application is not received in accordance with this provision and the child is a Late Enrollee, the effective date of coverage will be the Group's anniversary date.
   4. Children for whom the Subscriber or the Subscriber's living, covered spouse are required by court order to provide health benefits may be added to this Benefit Plan by submitting a membership application within 31 days of the date established by court order. If the membership application is not received in accordance with this provision and the child is a Late Enrollee, the effective date of coverage will be the Group's anniversary date.

5. If any of the Subscriber's children, who are beyond the age of 26 and incapable of self-sustaining employment by reason of a disabling condition and chiefly dependent upon the Certificate holder/Subscriber for support and maintenance, coverage will remain in effect as long as the disabled child remains dependent upon the Certificate holder/Subscriber or the Subscriber's spouse for support and maintenance. If the Plan so requests, the Subscriber must provide proof of the child's disability within *thirty-one (31)* days of the Plan's request.
6. If a child is no longer an Eligible Dependent under this Benefit Plan, and the child is living in the Sanford Health Plan Service Area (see *Service Area* in the above Introduction Section), the Dependent has the option to continue coverage through one of Sanford Health Plan's individual plans. For more information on options available through Sanford Health Plan, visit www.sanfordhealthplan.com/ndpers or call Member Services toll-free at (800) 499-3416 | TTY/TDD: (877) 652-1844 *(toll-free)*. There may also be other coverage options through the Health Insurance Marketplace, Medicaid, or other group health plan coverage options (such as another employer's plan) through what is called a "special enrollment period." The cost of these options may vary depending on a Subscriber's individual circumstances. To learn more about offerings on the Marketplace, and options outside the Sanford Health Plan Service Area, visit www.healthcare.gov or call (800) 318-2596 | TTY/TDD: (855) 889-4325.
7. At the time of birth or adoption, other Eligible Dependents may be added to this Benefit Plan if a membership application is submitted to NDPERS within 31 days of birth or physical placement of the adopted child. If the membership application is not received in accordance with this provision, and the Eligible Dependent is a Late Enrollee, the effective date of coverage will be the Group's anniversary date.

D. Employees and/or dependents who previously declined coverage under this Benefit Plan will be able to enroll under this Benefit Plan if each of the following conditions are met:
   1. During the initial enrollment period the employee or dependent states, in writing, that coverage under a group health plan or health insurance coverage was the reason for declining enrollment at such time.
   2. The employee's or dependent's coverage under a group health plan or other health insurance coverage:
      a. was either terminated as a result of loss of eligibility (Including loss as a result of legal separation, divorce, death, termination of employment or reduction of hours, loss as a result of having a subsequent opportunity for late enrollment [including the Annual Enrollment Period] or special enrollment under the Benefit Plan but again choosing not to enroll, or employer contributions toward such coverage were terminated; or
      b. was under COBRA and the coverage was exhausted.
   3. The employee requests such enrollment within 31 days after the exhaustion or termination of coverage.

   The effective date of coverage for an employee and/or dependent that previously declined coverage under this Benefit Plan, and is enrolling pursuant to this provision, will be the first of the month following the exhaustion or termination of the employee's and/or dependent's previous coverage. The employee and/or dependent shall be responsible for any and all premium payments from the effective date of coverage under this provision through the date the employee and/or dependent requests enrollment under the terms of this Benefit Plan.

   If the membership application is not received in accordance with this provision and the employee or dependent is a Late Enrollee, the Late Enrollee's effective date of coverage will be the Group's anniversary date.

E. Employees and/or dependents will be able to enroll under this Benefit Plan if either of the following conditions is met:
   1. The employee or dependent is covered under a Medicaid plan under Title XIX of the Social Security Act or under a state child health plan under Title XXI of the Social Security Act and the employee's or dependent's coverage under such a plan is terminated as a result of loss of eligibility. The employee must request enrollment within 60 days of the date of termination of coverage; or
   2. The employee or dependent becomes eligible for premium assistance under a Medicaid plan under Title XIX of the Social Security Act or under a state child health plan under Title XXI of the Social Security Act. The employee must request enrollment within 60 days of the date the employee or dependent is determined to be eligible for premium assistance.

      The effective date of coverage under this Benefit Plan for an employee and/or dependent enrolling pursuant to this provision will be the first day immediately following the termination of coverage or eligibility for premium assistance. The employee and/or dependent shall be responsible for any and all premium payments from the effective date of coverage under this provision through the date the employee and/or dependent requests enrollment under the terms of this Benefit Plan.

Note: The following do not qualify for a special enrollment period: 1) Loss of Minimum Essential Coverage due to failure to make premium payment and/or allowable rescissions of coverage; 2) Voluntarily terminating/dropping COBRA coverage before it runs out outside Annual Enrollment. COBRA coverage must be exhausted (usually 18 or 36 months) or another qualifying life event must occur before eligible for special enrollment.

Children's Health Insurance Program Reauthorization Act of 2009 (CHIPRA)

The Children's Health Insurance Program Reauthorization Act of 2009 grants Special Enrollment Rights to employees and dependents who are eligible for, but not enrolled in, a group health plan to enroll in the plan upon:

- losing eligibility for coverage under a State Medicaid or CHIP program; or
- becoming eligible for State premium assistance under Medicaid or CHIP.

In order to qualify for Special Enrollment, an Eligible Employee or Dependent must request coverage within sixty (60) days of either being terminated from Medicaid or CHIP coverage or being determined to be eligible for premium assistance. The Plan will also require the Eligible Employee to enroll. Special enrollment rights extend to all benefit packages available under the Plan. If you have questions about enrolling in your employer's plan under CHIPRA Special Enrollment Rights, contact the Department of Labor at www.askebsa.dol.gov or call (866) 444-3272 *(toll-free)*.

If you or your dependents are NOT currently enrolled in Medicaid or CHIP, and you think you or any of your dependents might be eligible for either of these programs, contact your State Medicaid or CHIP office or dial **(877) KIDS NOW** or **www.insurekidsnow.gov** to find out how to apply.

Section 4. How you get care

Identification cards

The Plan will send you an identification (ID) card when you enroll. You should carry your ID card with you at all times. You must show it whenever you receive services from a Provider, a health care Facility, or fill a prescription at a Plan pharmacy. If you fail to show your ID card at the time you receive health care services or prescription medications, you may be responsible for payment of the claim after the Participating Practitioner and/or Provider's timely filing period of one-hundred-eighty (180) days has expired. Your coverage will be terminated if you use your ID card fraudulently or allow another individual to use your ID card to obtain services.

If you do not receive your ID card within *thirty (30)* days after the effective date of your enrollment, or if you need replacement cards, call us at (800) 499-3416 or write to us at Sanford Health Plan, ATTN: NDPERS, PO Box 91110 Sioux Falls, SD 57109-1110. You may also request replacement cards by signing into your account at www.sanfordhealthplan.com/memberlogin. Information on creating an account is available at www.sanfordhealthplan.com/ndpers.

Conditions for Coverage

Members shall be entitled to coverage for the Health Care Services (listed in the "*Covered Services*," in Section 5) that are:

1. Medically Necessary and/or Preventive;
2. Received from or provided under the orders or direction of a Participating Provider;
3. Approved by the Plan, including Preauthorization/Prior Approval where required; and
4. Within the scope of health care benefits covered by the Plan.

However, the requirements to use Participating Providers and obtain preauthorization/prior approval do not apply to Emergency Conditions or Urgent Care Situations, both in and out of the Service Area. In such cases, services for Emergency Conditions and Urgent Care Situations will be covered if they are provided by a Non-Participating Provider.

If, while in the Service Area, the Member is alert, oriented and able to communicate (as documented in medical records); the Member must direct the ambulance to the nearest Participating Provider.

Members are not required, but are strongly encouraged, to select a Primary Care Practitioner and/or Provider (PCP) and use that PCP to coordinate their Health Care Services.

In addition, all Health Care Services are subject to:

1. The exclusions and limitations described in Sections 5 and 6; and
2. Any applicable Deductible and Coinsurance amount as stated in the Member's Summary of Benefits and Coverage, and Pharmacy Handbook.

In-Network Coverage

In-Network coverage is provided under two (2) plan levels. For more information, see *Selecting a Health Care Provider* in Section 1. In-Network benefit payments pay according to coverage under:

1. Basic Plan; or
2. PPO Plan

Note: If you travel out of the Plan's Service Area for the purpose of seeking medical treatment outside the Plan's Service Area, as defined in this COI, without Preauthorization/Prior Approval for a service that requires such authorization/approval, your claims will be paid according to the Basic Plan benefits and stipulations set forth in Section 1. Additionally, the Member will receive Basic Plan benefits if: 1) a PPO Health Care Provider is not available in the Member's area; or 2) if the Member either chooses or is referred to a Health Care Provider not participating in the Preferred Provider Organization (PPO).

Appropriate Access

Primary Care Practitioners and/or Providers and Hospital Providers

Appropriate access for Primary Care Practitioners and/or Providers and Hospital Provider sites is within *fifty (50)* miles of a Member's city of legal residence.

Specialty Practitioners and Other Providers

For other Participating Practitioners and Providers such as Specialty Physicians, Diagnostic Service Centers, Nursing Homes, and Rehabilitation Providers, appropriate access is within *fifty (50)* miles of a Member's city of legal residence. Appropriate access includes access to Participating Practitioners and Providers when the Member has traveled outside of the Service Area. If you are traveling within the Service Area where other Participating Practitioners and Providers are available, then you must use Participating Practitioners and Providers.

Members who live outside of the Plan's Service Area must use the Plan's contracted Network of Participating Practitioners and Providers as indicated in the Plan's Provider Directory. Members who live outside the Service Area will receive Identification Cards that display their network logo along with instructions on how to access this Network. If a Member chooses to go to a Non-Participating Practitioner or Provider when appropriate access (within *fifty (50)* miles of a Member's city of legal residence) is available, claims will be processed at the Basic Plan (Out-of-Network) level.

Transplant Services

Transplant Services must be performed at designated Plan Participating centers of excellence and are not subject to Appropriate Access standards as outlined above. Transplant coverage includes related post-surgical treatment, medications, eligible travel, and living expenses and shall be subject to, and in accordance with, the provisions, limitations and terms of the Plan's transplant policy.

Case Management

Case management is a collaborative process that assesses, plans, implements, coordinates, monitors and evaluates the options and services required to meet an individual's health needs, using communication and available resources to promote quality, cost effective outcomes.

Cases are identified for possible case management, based on a request for review or the presence of a number of parameters, such as:

a. admissions that exceed the recommended or approved length of stay;
b. utilization of health care services that generates ongoing and/or excessively high costs;
c. conditions that are known to require extensive and/or long term follow up care and/or treatment.

Sanford Health Plan's case management process allows professional case managers to assist Members with certain complex and/or chronic health issues by coordinating complicated treatment plans and other types of complex patient care plans.

In consultation with case managers, Sanford Health Plan may approve coverage that extends beyond the limited time period and/or scope of treatment initially approved. This consultation also includes utilization management processes as described below.

All decisions made through case management are based on the individual circumstances of a Member's case. Each case is reviewed on its own merits by appropriate health plan medical professionals to ensure the best health outcome(s) of the Member.

Utilization Review Process – OVERVIEW

The Plan's Utilization Management Department is available between the hours of 8 a.m. and 5 p.m. Central Time, Monday through Friday, by calling the Plan's toll-free number (888) 315-0885 or TTY/TDD: (877) 652-1844 *(toll-free)*. After business hours, you may leave a confidential voicemail for the Utilization Management Department and someone will return your call on the next business day. You can also fax the Plan at (701) 234-4547. The date of receipt for non-Urgent requests received outside of normal business hours will be the next business day. The date of receipt for Urgent requests will be the actual date of receipt, whether or not it is during normal business hours.

All Utilization Management Adverse Determinations will be made by the Sanford Health Plan Chief Medical Officer or appropriate Practitioner. All benefit Adverse Determinations will be made by a person assigned to coordinate the benefit, denial and Appeal process. **For detailed information on the below, see Section 8, *Problem Resolution.***

Prospective (Pre-service) Review of Services (Preauthorization/Prior Approval)

The Member is ultimately responsible for obtaining Preauthorization/Prior Approval from the Utilization Management Department in order to receive In-Network coverage. However, information provided by the practitioner's office will also satisfy this requirement. Participating Health Care Practitioners and Providers have been given instructions on how to get the necessary authorizations/approvals for surgical procedures or hospitalizations/admissions you may need. Members are responsible to confirm with the Participating Practitioner and/or Provider that any required Plan Preauthorization/Prior Approval has been obtained.

Preauthorization/Prior Approval is the authorization/approval of a requested service prior to receiving the service. Preauthorization/Prior Approval (a pre-service determination) is designed to facilitate early identification of the treatment plan to ensure medical management and appropriate resources are provided throughout an episode of care. See *"Services that Require Prospective Review"* on the following pages.

The Plan determines approval for Preauthorization/Prior Approval based on appropriateness of care and service and existence of coverage. The Plan does not compensate practitioners and/or providers or other individuals conducting utilization review for issuing denials of coverage or service care. Any financial incentives offered to Utilization Management decision makers do not encourage decisions that result in underutilization and do not encourage denials of coverage or service.

Preauthorization/Prior Approval is required for all Inpatient Admissions of Members. This requirement applies but is not limited to the following:

1. Acute care Hospitalizations (including medical, surgical, and non-Emergency mental health and/or substance use disorder Admissions);
2. Residential Treatment Facility Admissions; and
3. Rehabilitation center Admissions

Note: Admissions and Hospitalizations require an overnight stay, as defined in Section 10. Admission before the day of non-Emergency surgery will not be authorized/approved unless the early admission is medically necessary and specifically approved by the Plan. Coverage for Hospital expenses prior to the day of surgery will be denied unless authorized/approved prior to being incurred.

Urgent Care Requests

In determining whether a request is "Urgent," the Plan shall apply the judgment of a Prudent Layperson as defined in Section 10. A Practitioner, with knowledge of the Member's medical condition, who determines a request to be "Urgent", as defined in Section 10, shall have such a request treated as an Urgent Care Request.

Services that Require Prospective Review/Preauthorization/Prior Approval

1. Inpatient Hospital Admissions (includes Admissions for medical, surgical, mental health and/or substance use disorders);
2. Selected Outpatient Procedures including but not limited to:
   a. Covered Rhinoplasty Surgeries for Non-Cosmetic Reasons;
   b. Obstructive Sleep Apnea Treatment, except for Continuous Positive Airway Pressure (CPAP);
   c. Medically-Necessary Orthodontics;
3. Home Health, Hospice and Home IV therapy services;
4. Select Durable Medical Equipment (DME) including the below. For details, see DME requiring Preauthorization/Prior Approval in Section 5(a):
   a. Prosthetic Limbs requiring replacement within 5 years;
   b. Insulin infusion devices;

c. Insulin pumps;
d. Continuous Glucose Monitoring Systems (CGM);
e. Electric wheelchairs;
f. External hearing aids for the treatment of a hearing loss that is not due to the gradual deterioration that occurs with aging and/or other lifestyle factors. For details, see Section 5(a), *Hearing services (testing, treatment, and supplies);*

5. Skilled nursing and sub-acute care;
6. Dental Anesthesia and associated Hospitalizations for all Members age 9 and older;
7. Chronic Pain Management;
8. Transplant Services;
9. Infertility Services, including assisted reproductive technology for GIFT, ZIFT, ICSI and IVF;
10. Genetic Testing;
11. Osseointegrated implants, including Cochlear implants and bone-anchored (hearing aid) implants;
12. Select Specialty Medications including:
    a. Restricted Use Medications; and
    b. Growth Hormone Therapy/Treatment;
13. Bariatric Surgery; and
14. Referrals to Non-Participating Providers, which are recommended by Participating Providers. Preauthorization/Prior Approval is required for the purposes of receiving Basic Plan level coverage. If Preauthorization/Prior Approval is not obtained for referrals to Non-Participating Providers, the services will be covered at the Basic Plan level. Preauthorization/Prior Approval does not apply to services that are provided by Non-Participating Providers as a result of a lack of appropriate access to Participating Providers as described in this section.

Prospective (Non-Urgent Pre-service) Review Process for Elective Inpatient Hospitalizations, Non-Urgent Medical Care, and Pharmaceutical Benefit Requests

All requests for Preauthorization/Prior Approval are to be made by the Member or Practitioner and/or Provider's office at least *three (3)* business days prior to the scheduled Admission or requested service. For Non-Urgent preauthorization/prior approval requests, the Plan's Utilization Management Department may review a request for a period of up to fifteen (15) calendar days from the date of the request, provided that all information supporting the request has been received. The Utilization Management Department will review the Member's medical request against standard criteria.

Determination of the appropriateness of an admission is based on standard review criteria and assessment of:

a. Patient medical information including:
    i. diagnosis
    ii. medical history
    iii. presence of complications and/or co-morbidities;
b. Consultation with the treating Practitioner, as appropriate;
c. Availability of resources and alternate modes of treatment; and
d. For admissions to facilities other than acute Hospitals, additional information may include but is not limited to the following:
    i. history of present illness
    ii. patient treatment plan and goals
    iii. prognosis
    iv. staff qualifications
    v. *twenty-four (24)* hour availability of qualified medical staff.

You are ultimately responsible for obtaining authorization/approval from the Utilization Management Department. Failure to obtain Preauthorization/Prior Approval may result in coverage at the Basic Plan level (see Section 1). However, information provided by the Practitioner and/or Provider's office also satisfies this requirement.

Note: Members are responsible to confirm with the Participating Practitioner and/or Provider that any required Plan Preauthorization/Prior Approval has been obtained.

For medical necessity requests: the Utilization Management Department will review the Member profile information against standard criteria. A determination for *elective inpatient or non-Urgent Care Situations* will be made by the Utilization Management Department *within fifteen (15) calendar days* of receipt of the request. If the Utilization Management Department is unable to make a decision *due to matters beyond its control*, it may extend the decision timeframe once, for up to *fifteen* (*15) calendar days*. Within *fifteen (15*) *calendar days* of the request for authorization/approval, Sanford Health Plan must notify the Member, or Member's Authorized Representative, of the need for an extension and the date by which it expects to make a decision.

For benefit determinations: a person assigned to coordinate the benefit, denial and Appeal process will review the request using standards established by the Plan and, if the request is approved, provide notification of the determination, or if the request is denied, provide notification of the denial and relevant appeal rights. A benefit determination will be made *within fifteen (15) calendar days* of receipt of the request. If the Plan is unable to make a decision due to matters beyond its control, it may extend the decision timeframe once, for up to *fifteen (15) calendar days*. Within *fifteen (15) calendar days* of the request for authorization/approval, Sanford Health Plan must notify the Member, or Member's Authorized Representative, of the need for an extension and the date by which it expects to make a decision.

Lack of Necessary Information

If the Plan is unable to make a decision *due to lack of necessary information*, it must notify the Member, or the Member's Authorized Representative, of what specific information is necessary to make the decision *within fifteen (15)* calendar days of the Prospective (Pre-service) Review request. Sanford Health Plan must give the Member, or the Member's Authorized Representative, a reasonable amount of

time taking into account the circumstances, but not less than *forty-five (45)* calendar days to provide the specified information. In lieu of notifying the Member, the Plan may notify the Practitioner and/or Provider of the information needed, if the request for health care services came from the Practitioner and/or Provider.

The decision time period is suspended, and the Plan shall have the remainder of the fifteen (15) calendar days from receipt of the request for authorization/approval to consider the request, measured from the earlier of the date in which the Plan receives additional information from the Member or Practitioner or *forty-five (45)* days after the notification to the Member or Practitioner.

The Prospective (Pre-service) Review determination shall either be a Preauthorization/Prior Approval of the requested service, or additional review will be needed by the Plan Chief Medical Officer; however, the decision will be made within *fifteen (15) calendar* days of that date. If the information is not received by the end of *the forty-five (45) calendar* day extension, Sanford Health Plan will deny the request. If the Plan receives a request that fails to meet the procedures for Prospective (Pre-service) Review requests, the Plan will notify the Practitioner or Member of the failure and proper procedures to be followed as soon as possible but no later than *five (5)* calendar days after the date of the failure. Notification may be oral unless the Practitioner or Member request written notification.

Sanford Health Plan will give written and/or electronic notification of the *determination to authorize/approve or deny* the service *within fifteen (15) calendar* days of the request (or in the case of an extension, of the end of the timeframe given to provide information) to the Member, or the Member's Authorized Representative, attending Practitioner and those Providers involved in the provision of the service. The Utilization Management Department will assign an authorization number for the approved service.

If the Plan's determination is an Adverse Determination, the Plan shall provide written notice in accordance with the *Written Notification Process for Adverse Determinations* procedure below. At this point, the Member can request an Appeal of Adverse Determination. Refer to "Problem Resolution" in Section 8 for details.

Prospective Review Process for Urgent/Emergency (Urgent Pre-service) Medical Care and Pharmaceutical Requests

An **Emergency Medical Condition** is a medical condition of recent onset and severity, including severe pain, that would lead a prudent layperson acting reasonably and possessing an average knowledge of health and medicine to believe that the absence of immediate medical attention could reasonably be expected to result in serious impairment to bodily function, serious dysfunction of any bodily organ or part, or would place the person's health, or with respect to a pregnant woman, the health of the woman or her unborn child, in serious jeopardy.

An **Urgent Care Situation** is a degree of illness or injury, which is less severe than an Emergency Condition, but requires prompt medical attention within *twenty-four (24)* hours, such as stitches for a cut finger. **Urgent Care Request** means a request for a health care service or course of treatment with respect to which the time periods for making a non-Urgent Care Request determination:

1. Could seriously jeopardize the life or health of the Member or the ability of the Member to regain maximum function, based on a Prudent Layperson's judgment; or
2. In the opinion of a Practitioner with knowledge of the Member's medical condition, would subject the Member to severe pain that cannot be adequately managed without the health care service or treatment that is the subject of the request.

If an Urgent Care Situation occurs, Members should contact their Primary Care Practitioner and/or Provider immediately, if one has been selected, and follow his or her instructions. A Member may always go directly to a participating Urgent care or after-hours clinic. In determining whether a request is "Urgent," the Plan shall apply the judgment of a Prudent Layperson that possesses an average knowledge of health and medicine. When a Practitioner with knowledge of the Member's medical condition determines a request to be an Urgent Care Situation, the Plan shall treat the prospective review as an Urgent Care Request.

Note: Prospective (Pre-service) Review is not required for maternity Admissions, Emergency Medical Conditions, or Urgent Care Situations. However, the Plan must be notified by the Member as soon as reasonably possible and no later than *forty-eight (48)* hours after the Member is physically or mentally able to do so. A Member's Authorized Representative may notify the Plan on the Member's behalf with written permission of the Member.

For Urgent Care Requests (Prospective (Pre-service) Reviews): the determination for medical care, including care for behavioral, mental health, and/or substance use disorders will be made by the Utilization Management Department as soon as possible (taking into account medical exigencies), but no later than *seventy-two (72) hours* after receipt of the request. Notification of the determination will be made to the Member, the Member's Authorized Representative, Practitioner and those Providers involved in the provision of the service via oral communication by the Utilization Management Department as soon as possible but no later than within *seventy-two (72) hours* of receipt of the request. For authorizations/approvals and Adverse Determinations, the Plan will give electronic or written notification of the decision to the Member or the Member's Authorized Representative, Practitioner and those Providers involved in the provision of the service as soon as possible (taking into account medical exigencies) but no later than within *three (3)* calendar days of the oral notification.

Lack of Necessary Information

If the Plan is unable to make a decision due to lack of necessary information, it may extend the decision timeframe once for up to *forty-eight (48) hours* to request additional information. Within *twenty-four (24) hours* after receipt of the request, the Plan will notify the Member or the Member's Authorized Representative of what specific information is necessary to make the decision. In lieu of notifying the Member, the Plan can notify the Practitioner of the information needed if the request for health care services came from the Practitioner. Sanford Health Plan must give the Member or the Member's Authorized Representative a reasonable amount of time taking into account the circumstances, but not less than *forty-eight (48) hours* to provide the specified information.

If the Plan receives a request that fails to meet the procedures for Urgent Prospective (Pre-service) Review requests, the Plan will notify the Practitioner and Member of the failure and proper procedures to be followed as soon as possible but no later than *twenty-four (24) hours* after the date of the failure. Notification may be oral unless the Practitioner or Member request written notification. The Member, or the Member's Authorized Representative, Practitioner and those Providers involved in the provision of the service will be notified by telephone of the Plan's determination as soon as possible but no later than forty-eight (48) hours after the earlier of: 1) the Plan's receipt of the requested information or 2) the end of the period provided to submit the requested information. The Plan will also give electronic or written notification of the

decision as soon as possible but no later than within *three (3)* calendar days of the telephone notification. Failure to submit necessary information is grounds for denial of authorization/approval.

If the Plan's determination is an Adverse Determination, the Plan shall provide written notice in accordance with the *Written Notification Process for Adverse Determinations* procedure below. At this point, the Member can request an Appeal of Adverse Determinations. Refer to "Problem Resolution" in Section 8 for details.

Concurrent Review Process for Medical Care Requests

Concurrent Review is utilized for medical care, including care for behavioral, mental health, and/or substance use disorders when a request for an extension of an approved ongoing course of treatment over a period of time or number of treatments is warranted. Additional stay days must meet the continued stay review criteria and, if acute levels of care criteria are not met, a decision to authorize/approve further treatment must be made at that time. Preauthorization/Prior Approval of inpatient health care stays will terminate on the date the Member is to be discharged from the Hospital or Facility (as ordered by the attending Practitioner). Hospital/Facility days accumulated beyond the ordered discharge date will not be authorized/approved unless continued stay criteria continue to be met. Charges by Practitioners and/or Providers associated with these non-authorized/approved days are non-covered.

The health care service or treatment that is the subject of the Adverse Determination shall be continued without liability to the Member until the Member has been notified of the determination by the Plan with respect to the internal review request made pursuant to the Plan's Appeal Procedures. Any reduction or termination by the Plan during the course of treatment before the end of the period or number treatments shall constitute an Adverse Determination. For requests to extend the course of treatment beyond the initial period of time or the number of treatments, if the request is made at least twenty-four (24) hours prior to the expiration of the prescribed period of time or number of treatments, the Plan shall make an urgent Concurrent determination and notify the Member, or the Member's Authorized Representative, Practitioner and those Providers involved in the provision of the service by telephone of the determination as soon as possible taking into account the Member's medical condition but in no event more than twenty-four (24) hours after the date of the Plan's receipt of the request.

The Plan will provide electronic or written notification of an authorization/approval to the Member or the Member's Authorized Representative, Practitioner and those Providers involved in the provision of the service within *three (3) calendar* days after the telephone notification. The Plan shall provide written or electronic notification of the Adverse Determination to the Member or the Member's Authorized Representative and those Providers involved in the provision of the service sufficiently in advance (but no later than within *three (3) calendar* days of the telephone notification) of the reduction or termination to allow the Member or, the Member's Authorized Representative to file an Appeal request to review of the Adverse Determination and obtain a determination with respect to that review before the benefit is reduced or terminated.

In cases where the Member is not at financial risk, Members will not be notified of an Adverse Determination. Members will be notified in all other cases.

Urgent Concurrent Reviews Requested Within Twenty-Four (24) Hours of Expiring Authorization/Approval

If the request to extend Urgent Concurrent Review is not made at least *twenty-four (24) hours* prior to the expiration of the prescribed period of time, or number of treatments for medical care, including care for behavioral, mental health, and/or substance use disorders, Sanford Health Plan will treat it as an Urgent Prospective (Pre-service) Review decision and make the decision as soon as possible (taking into account the medical exigencies) but no later than *seventy-two (72) hours* after the request. For authorizations/approvals and denials, the Plan will give telephone notification of the decision to the Member, Practitioner and those Providers involved in the provision of the service within *seventy-two (72) hours* of receipt of the request. The Plan will give written or electronic notification of the decision to the Member, Practitioner and those Providers involved in the provision of the service as soon as possible but no later than within *three (3) calendar* days of the telephone notification.

If the Plan's determination is an Adverse Determination, the Plan shall provide written notice in accordance with the *Written Notification Process for Adverse Determinations* procedures outlined below. At this point, the Member can request an Appeal of Adverse Determination. Refer to the "*Problem Resolution*" in Section 8 for details.

Retrospective (Post-service) Review Process for Medical Care Requests

Retrospective (Post-service) Review is used by Sanford Health Plan for medical care, including care for behavioral, mental health, and/or substance use disorders to review services that have already been utilized by the Member where such services have not involved a Prospective (Pre-service) Review request, and where the review is not limited to the veracity of documentation, accuracy of coding, or adjudication for payment. The Plan will review the request and make the decision to approve or deny within *thirty (30)* calendar days of receipt of the request. Written or electronic notification will be made to the Member, Practitioner and those Providers involved in the provision of the service within *thirty (30) calendar* days of receipt of the request. In cases where the Member is not at financial risk, Members will not be notified of an Adverse Determination. Members will be notified in all other cases.

If the Utilization Management Department is unable to make a decision due to matters beyond its control, it may extend the decision timeframe once, for up to *fifteen (15)* calendar days. Within *thirty (30)* calendar days of the request for review, Sanford Health Plan must notify the Member or Member's Authorized Representative of the need for an extension and the date by which it expects to make a decision.

Lack of Necessary Information

If the Utilization Management Department is unable to make a decision due to lack of necessary information, it must notify the Member or the Member's Authorized Representative of what specific information is necessary to make the decision within *thirty (30) calendar* days of the Retrospective (Post-service) Review request. Sanford Health Plan must give the Member or the Member's Authorized Representative *forty-five (45)* calendar days to provide the specified information. In lieu of notifying the Member, the Plan can notify the Practitioner of the information needed if the request for health care services came from the Practitioner. The decision time period is suspended from the date of the notification to the Member or Practitioner as applicable, until the earlier of the date on which the Plan receives any information from the Member or Practitioner or *forty-five (45)* days after the notification to the Member or Practitioner. A decision and written or electronic

notification to the Member, Practitioner and those Providers involved in the provision of the service will be made within *fifteen (15)* calendar days of that date. If the information is not received by the end of the *forty-five (45)* calendar day extension Sanford Health Plan will issue an Adverse Determination and written or electronic notification will be made to the Member, Practitioner and those Providers involved in the provision of the service within *fifteen (15)* calendar days.

If the Plan's determination is an Adverse Determination, the Plan shall provide written notice in accordance with the *Written Notification Process for Adverse Determinations* procedure below. At this point, the Member can request an Appeal of Adverse Determinations. Refer to the "Problem Resolution" in Section 8 for details.

Written Notification Process for Adverse Determinations

The written notifications for Adverse Determinations will include the following:

1. The specific reason for the Adverse Determination in easily understandable language.
2. Reference to the specific internal plan rule, provision, guideline, or protocol on which the determination was based and notification that the Member will be provided a copy of the actual plan provisions, guidelines, and protocols free of charge upon request. Reasons for any denial or reimbursement or payment for services with respect to benefits under the plan will be provided within 30 business days of a request.
3. If the Adverse Determination is regarding coverage for a mental health and/or substance use disorder, a statement notifying members of their opportunity to request treatment and diagnosis code information free of charge. Any request for diagnosis and treatment code information may not be (and is not) considered a request for an internal appeal or external review.
4. If the Adverse Determination is based in whole or in part upon the Member failing to submit necessary information, the notice shall include, a description of any additional material or information which the Member failed to provide to support the request, including an explanation of why the material is necessary.
5. If the Adverse Determination is based on medical necessity or an Experimental or Investigational treatment or similar exclusion or limit, either an explanation of the scientific or clinical judgment for making the determination, applying the terms of The Plan to the Member's medical circumstances or a statement that an explanation will be provided to the Member free of charge upon request.
6. For Mental Health and/or Substance Use Disorder (MH/SUD) Adverse Determinations, if information on any medical necessity criteria is requested, documents will be provided for both MH/SUD and medical/surgical benefits within 30 business days of a Member/Member's Authorized Representative/Provider's request. This information will include documentation of processes, strategies, evidentiary standards and other factors used by the plan, in compliance with the Mental Health Parity and Addiction Equity Act of 2008 (MHPAEA).
7. If the Adverse Determination is based on medical necessity, a written statement of clinical rationale, including clinical review criteria used to make the decision if applicable. If the denial is due to a lack of clinical information, a reference to the clinical criteria that have not been met must be included in the letter. If there is insufficient clinical information to reference a specific clinical practice guideline or policy, the letter must state the inability to reference the specific criteria and must describe the information needed to render a decision.
8. A description of the Plan's Appeal procedures including how to obtain an expedited review if necessary and any time limits applicable to those procedures, the right to submit written comments, documents or other information relevant to the appeal; an explanation of the Appeal process including the right to member representation; how to obtain an Expedited review if necessary and any time limits applicable to those procedures; notification that Expedited External Review can occur concurrently with the internal Appeal process for urgent care/ongoing treatment; and the timeframe the Member has to make an appeal and the amount of time the Plan has to decide it (including the different timeframes for Expedited Appeals).
9. If the Adverse Determination is based on medical necessity, notification and instructions on how the Practitioner can contact the appropriate Practitioner and/or Provider to discuss the determination.
10. If a determination is adverse, the right to bring a civil action in a court of competent jurisdiction.
11. To contact the North Dakota Insurance Commissioner at any time at:

    North Dakota Insurance Department
    600 E. Boulevard Ave.
    Bismarck, ND 58505-0320

    Email: insurance@nd.gov
    Consumer hotline: (800) 247-0560 *(toll-free)*
    TTY: (800) 366-6888 *(toll-free)*

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Section 5(a) Medical services and supplies provided by health care Practitioners and Providers

IMPORTANT	**Here are some important things you should keep in mind about these benefits:** • Please remember that all benefits are subject to the definitions, limitations, and exclusions in this COI and are payable only when we determine they are Medically Necessary. • Be sure to read Section 4, *How you get care*, for valuable information about conditions for coverage. • **You or your Practitioner and/or Provider must get Preauthorization/Prior Approval for some services in this Section.** The benefit description will say "**Note:** Preauthorization/Prior Approval is required" for certain services. Failure to get Preauthorization/Prior Approval may result in a reduction or denial of benefits (See Services requiring Preauthorization/Prior Approval in Section 4.)	IMPORTANT

Benefit Description

Diagnostic and treatment services

Note: You or your Practitioner and/or Provider must get Preauthorization/Prior Approval of these services; Failure to get Preauthorization/ Prior Approval may result in a reduction or denial of benefits (See Services requiring Preauthorization/Prior Approval in Section 4.):

- Inpatient Hospital stays, Outpatient surgical procedures, and Skilled Nursing Facility stays

Lab, x-ray and other diagnostic test coverage includes:

- Blood tests
- Urinalysis
- Non-routine pap tests
- Non-routine PSA tests
- Pathology
- X-rays
- PET Scans
- DEXA Scans
- Non-routine mammograms
- CT Scans/MRI
- Ultrasound
- Electrocardiogram (EKG)
- Electroencephalography (EEG)

Professional services are covered from Practitioners, Providers, Physicians, nurse practitioners, and Physician's assistants when received:

- In Practitioner and/or Provider's office, an urgent care center; as well as medical office consultations, and second surgical opinions

Not Covered: *Thermograms or thermography*

Preventive care, adults & children

§2713 of the Public Health Service Act (PHS Act) and its implementing regulations relating to coverage of preventive services, the following services, when received from a Participating Provider, are covered without payment of any deductible or coinsurance requirement that would otherwise apply:

1. Evidenced-based items or services that have in effect a rating of "A" or "B" in the current recommendations of the United States Preventive Services Task Force (USPSTF) with respect to the individual involved, except for the recommendations of the USPSTF regarding breast cancer screening, mammography, and prevention issued in or around November 2009;
2. Immunizations for routine use in children, adolescents, and adults that have in effect a recommendation from the Advisory Committee on Immunization Practices (ACIP) of the Centers for Disease Control and Prevention (CDC) with respect to the individual involved;
3. With respect to infants, children, and adolescents, evidence-informed preventive care and screenings provided for in comprehensive guidelines supported by the Health Resources and Services Administration (HRSA); and
4. With respect to women, evidence-informed preventive care and screening provided for in comprehensive guidelines supported by HRSA, to the extent not included in certain recommendations of the USPSTF. You do not need Preauthorization/Prior Approval from the Plan, or any other person, in order to obtain access to obstetrical and/or gynecological care through a Participating Provider.

The above is an overview of preventive services covered by the Plan. As recommendations change, your coverage may also change. To view the Plan's *Preventive Health Guidelines*, visit www.sanfordhealthplan.com/ndpers. You may also request a copy by calling Member Services at (800) 499-3416 *(toll-free)* | TTY/TDD: (877) 652-1844 *(toll-free)*.

Not Covered:

- *Pre-employment and employment physicals, insurance physicals, or government licensing physicals (including, but not limited to, physicals and eye exams for driver's licenses)*
- *Virtual colonoscopies*

Wellness nutritional counseling services

Benefits are available for the following medical conditions:

- **Hyperlipidemia** – Maximum Benefit Allowance of four (4) Office Visits per Member per Benefit Period.
- **Gestational Diabetes** – Maximum Benefit Allowance of four (4) Office Visits per Member per Benefit Period.
- **Diabetes Mellitus** – Maximum Benefit Allowance of four (4) Office Visits per Member per Benefit Period.
- **Hypertension** – Maximum Benefit Allowance of two (2) Office Visits per Member per Benefit Period.
- **Obesity** – Maximum Benefit Allowance of four (4) Office Visits per Member per Benefit Period.

Not Covered:

- *Education Programs or Tutoring Services (not specifically defined elsewhere) including, but not limited to, education on self-care or home management*
- *Lifestyle Improvement Services, such as physical fitness programs, health or weight loss clubs or clinics*

Maternity care

Note: Due to the inability to predict admission; you or your Practitioner and/or Provider are encouraged to notify the Plan of your expected due date when the pregnancy is confirmed. You are also encouraged to notify the Plan of the date of scheduled C-sections when it is confirmed.

Covered maternity services include:

- Screening for gestational diabetes mellitus during pregnancy
  - Testing includes a screening blood sugar followed by a glucose tolerance test if the sugar is high.
  - Outpatient Nutrition Care Services available for gestational diabetes and diabetes mellitus. See *Wellness Nutritional Counseling* in this Section.
- Anemia screening
- Bacteruria (bacteria in urine) screening
- Hepatitis B screening
- Rh (Rhesus) incompatibility screening: first pregnancy visit and 24-28 weeks gestation
- Genetic counseling or testing that has in effect a rating of "A" or "B" in the current recommendations of the United States Preventive Services Task Force. *Preauthorization/Prior Approval is required.*
- Preeclampsia prevention
- Prenatal vitamins without Cost Sharing if prescribed by a Practitioner

Maternity care includes prenatal through postnatal maternity care and delivery and care for complication of pregnancy of mother. We cover up to four (4) routine ultrasounds per pregnancy to determine fetal age, size, and development, per plan guidelines.

The minimum inpatient Hospital stay, when complications are not present, ranges from a minimum of *forty-eight (48)* hours for a vaginal delivery to a minimum of *ninety-six (96)* hours for a cesarean birth, excluding the day of delivery. Such inpatient stays may be shortened if the treating Practitioner and/or Provider, after consulting with the mother, determines that the mother and child meet certain criteria and that discharge is medically appropriate. If the inpatient stay is shortened, a post-discharge follow-up visit shall be provided to the mother and newborn by Participating Practitioners and/or Providers competent in postpartum care and newborn assessments.

Breastfeeding support, supplies and counseling are covered in the following manner:

- One (1) breast pump (electric or manual, non-Hospital grade) per pregnancy. Replacement tubing, breast shields, and splash protectors are also covered.
  - Pumps and supplies are covered only when obtained from a Sanford Health Plan Participating durable medical equipment Provider. This does NOT include drugstores or department stores.
  - Bottles, breast milk storage bags and supplies related to bottles are NOT covered.
- Consultation with a lactation (breastfeeding) specialist is covered at 100% (no charge)

Note: We encourage you to participate in our *Healthy Pregnancy Program*; Call (888) 315-0885 *(toll-free)* or TTY/TDD: (877) 652-1844 *(toll-free)* to enroll.

Not Covered: *Amniocentesis or chorionic villi sampling (CVS) solely for sex determination*

Healthy Pregnancy Program – DETAILS

The *Healthy Pregnancy Program* is designed to identify women at higher risk for premature birth and to prevent the incidence of preterm birth through assessment, intervention and education. Participation in the *Healthy Pregnancy Program* is voluntary and free to all Members in the Plan.

To enroll, call Sanford Health Plan's Care Management Department at (877) 652-1847 *(toll-free)* | TTY/TDD: (877) 652-1844 *(toll-free)* after the first prenatal visit, preferably before the 12th week and no later than the 34th week. You may also send a secure message to the Plan by signing into your account at www.sanfordhealthplan.com/memberlogin, and a representative from the Care Management Department will contact you to complete your enrollment in the program.

Enrolling in the *Healthy Pregnancy Program* is easy and free to the Member. When a Member enrolls, a Case Manager will review a brief preterm labor risk assessment questionnaire with the Member. To complete this questionnaire, Members will need their Member ID number; Professional Health Care Provider's name, address and telephone number; and expected due date.

As a program participant, the Member will receive information concerning pregnancy and prenatal care.

Newborn Care

A newborn is eligible to be covered from birth. Members must complete NDPERS designated enrollment within *thirty-one (31)* days of the infant's birth if enrolled in Single Coverage. If the Subscriber is already enrolled in Family Coverage, the newborn will automatically be added to the Certificate if the Plan was aware of the pregnancy. The Subscriber should confirm enrollment of the new child with the Plan. For further details, see Section 3.

We cover care for the enrolled newborn child from the moment of birth including care and treatment for illness, injury, premature birth and medically diagnosed congenital defects and birth abnormalities (Please refer to "Reconstructive Surgery" in Section 5(a) for coverage information of surgery to correct congenital defects).

Not Covered: *Newborn delivery and nursery charges for adopted dependents prior to the adoption-bonding period (See Section 3, "When Dependent Coverage Begins.")*

Family planning benefits

Family Planning Services include consultations, and pre-pregnancy planning. The following medications, services and devices are covered:

- Barrier methods: diaphragm and cervical cap fitting and purchase.
- We cover implantable devices; including Mirena and ParaGard intrauterine devices. Placement and removal is covered once every five (5) years or as medically necessary.
- We cover sterilizations, including voluntary tubal ligations and vasectomies:
  - Medical – Occlusion of the fallopian tubes by use of permanent implants (e.g. Essure).
  - Surgical – Tubal ligation covered at 100% of allowed only when performed as the primary procedure. When performed as part of a maternity delivery or for any other medical reason, it will be covered as a medical benefit with the applicable cost-share applied.
- Generic contraceptives are covered at 100% (no cost). If no generic equivalent exists for a formulary brand-name contraceptive, then that contraceptive is covered at 100% (no cost) per the Affordable Care Act. (See your Pharmacy Handbook/Formulary)
- Other contraceptives including injectable medroxyprogesterone acetate and emergency contraception with a written prescription (generic Plan B) are also covered at 100% (no cost).
- Folic acid supplements are covered at 100% (no cost) for women planning to become pregnant or in their childbearing years if obtained with a written prescription order, per Plan guidelines.

Not Covered:

- *Genetic counseling or testing except for services that have a rating of "A" or "B" in the current recommendations of the United States Preventive Services Task Force; Preauthorization/Prior Approval is required*
- *Reproductive Health Care Services prohibited by the laws of This State*
- *Elective abortion services*
- *Reversal of voluntary sterilization*

Infertility services

Note: Preauthorization/Prior Approval is required for some services in this subsection; failure to get Preauthorization/Prior Approval may result in a reduction or denial of benefits. (See Services requiring Preauthorization/Prior Approval in Section 4.)

Benefits are available for services, supplies and medications related to artificial insemination (AI) and assisted reproductive technology (ART), includes gamete intrafallopian transfer (GIFT), zygote intrafallopian transfer (ZIFT), intracytoplasmic sperm injection (ICSI) or in vitro fertilization (IVF). *Preauthorization/Prior Approval is required for assisted reproductive technology for GIFT, ZIFT, ICSI and IVF.*

Note: Benefits are subject a $20,000 Lifetime Maximum per Member. Any Member-paid Coinsurance for infertility services does not apply toward the Out-of-Pocket Maximum Amount.

Not Covered:

- *Donor eggs including any donor treatment and retrieval costs, donor sperm, cryopreservation or storage of unfertilized sperm or eggs; Surrogate pregnancy and delivery; Gestational Carrier pregnancy and delivery; and preimplantation genetic diagnosis testing;*
- *Reversals of prior sterilization procedures; and*
- *Any expenses related to surrogate parenting.*

Allergy care

We cover:

- Testing and treatment
- Allergy injections
- Allergy serum

Not Covered:

- *The following allergy testing modalities: nasal challenge testing, provocative/neutralization testing for food and food additive allergies, leukocyte histamine release, Rebuck skin window test, passive transfer or Prausnitz-Kustner test, cytotoxic food testing, metabisulfite testing, candidiasis hypersensitivity syndrome testing, IgG level testing for food allergies, general volatile organic screening test and mauve urine test.*
- *Methods of desensitization treatment: provocation/neutralization therapy for food/chemical or inhalant allergies by sublingual, intradermal and subcutaneous routes, Urine Autoinjections, Repository Emulsion Therapy, Candidiasis Hypersensitivity Syndrome Treatment or IV Vitamin C Therapy (unless otherwise specified as covered in this COI).*
- *Clinical ecology, orthomolecular therapy, vitamins (unless listed as covered elsewhere in this COI) or dietary nutritional supplements, or related testing provided on an inpatient or outpatient basis.*

Dialysis

Dialysis for renal disease, unless or until the Member qualifies for federally funded dialysis services under the End Stage Renal Disease (ESRD) program. Services include equipment, training, and medical supplies required for effective dialysis care. Coordination of Benefit (COB) Provisions apply. For more information on COB, please see Section 9.

Treatment therapies

- Inhalation Therapy
- Radiation Therapy
- Chemotherapy, regardless of whether the Member has separate prescription drug benefit coverage
- Pheresis Therapy

Phenylketonuria

Testing, diagnosis and treatment of Phenylketonuria including dietary management, formulas, Case Management, intake and screening, assessment, comprehensive care planning and service referral.

Not Covered:

- *PKU dietary desserts and snack items*
- *Low protein modified food products or medical food for PKU to the extent those benefits are available under a Department of Health program or other state agency*

Amino acid-based elemental oral formulas

Coverage for medical foods and low-protein modified food products determined by a physician to be medically necessary for the therapeutic treatment of an inherited metabolic disease of amino acid or organic acid.

Not Covered:

- *Dietary desserts and snack items*
- *Low protein modified food products or medical food for PKU to the extent those benefits are available under a Department of Health program or other state agency*

Diabetes supplies, equipment, and education

- Blood glucose monitors, including continuous glucose monitoring systems (CGM), *Preauthorization/Prior Approval is required*
- Blood glucose monitors for the legally blind
- Test strips for glucose monitors
- Urine testing strips
- Lancets and lancet devices
- Routine foot care, including toe nail trimming
- Dilated Eye Examination, *limited to one (1) examination per Member per Benefit Period*
- Glucagon kits
- Glucose agents
- Syringes
- Custom diabetic shoes and inserts limited to *one (1) pair* of depth-inlay shoes and *three (3) pairs* of inserts; or *one (1) pair* of custom molded shoes (including inserts) and *three (3)* additional pairs of inserts
- Insulin injection aids
- Insulin infusion devices, *Preauthorization/Prior Approval is required*
- Prescribed oral agents for controlling blood sugars
- Insulin pumps and all supplies for the pump, *Preauthorization/ Prior Approval is required*
- Insulin measurement and administration aids for the visually impaired and other medical devices for the treatment of diabetes

Diabetes self-management training and education shall only be covered if:

- the service is provided by a Physician, nurse, dietitian, pharmacist or other licensed health care Practitioner and/or Provider who satisfies the current academic eligibility requirements of the National Certification Board for Diabetic Educators and has completed a course in diabetes education and training or has been certified by a diabetes educator; and
- the training and education is based upon a diabetes program recognized by the American Diabetes Association or a diabetes program with a curriculum approved by the American Diabetes Association or the North Dakota Department on Health.

Not Covered: *Food items for medical nutrition therapy*

Outpatient nutrition care services

Benefits are available for the following medical conditions:

- **Chronic Renal Failure** – Maximum Benefit Allowance of four (4) Office Visits per Member per Benefit Period.
- **Anorexia Nervosa** – Maximum Benefit Allowance of four (4) Office Visits per Member per Benefit Period.
- **Bulimia** – Maximum Benefit Allowance of four (4) Office Visits per Member per Benefit Period.
- **PKU** – Maximum Benefit Allowance of four (4) Office Visits per Member per Benefit Period.

Not Covered:

- *Education Programs or Tutoring Services (not specifically defined elsewhere) including, but not limited to, education on self-care or home management*
- *Lifestyle Improvement Services, such as physical fitness programs, health or weight loss clubs or clinics*

Outpatient rehabilitative and habilitative therapy services

Coverage is as follows for outpatient rehabilitative and habilitative therapy services, which include the management of limitations and disabilities, and services or programs that help maintain or prevent deterioration in physical, cognitive, or behavioral function:

- **Physical Therapy:** Benefits are subject to medical necessity and performed by or under the direct supervision of a licensed Physical Therapist. Services must be provided in accordance with a prescribed plan of treatment ordered by a Professional Health Care Provider.

- Physical therapy and Vitamin D supplements with a prescription order are covered at 100% (no cost) for Members ages 65 and older who are at increased risk for falls. Benefits are subject to medical necessity.

- **Occupational Therapy:** Benefits are available for 90 consecutive calendar days, beginning on the date of the first therapy treatment for the condition. Additional benefits may be allowed after the 90 days when Medically Necessary. Benefits are available when performed by or under the direct supervision of a licensed Occupational Therapist. Services must be provided in accordance with a prescribed plan of treatment ordered by a Professional Health Care Provider.
- **Speech Therapy:** Benefits are available for 90 consecutive calendar days, beginning on the date of the first therapy treatment for the condition. Additional benefits may be allowed after the 90 days when Medically Necessary. Benefits are available when performed by or under the direct supervision of a certified and licensed Speech Therapist. Services must be provided in accordance with a prescribed plan of treatment ordered by a Professional Health Care Provider.
- **Respiratory/Pulmonary Therapy:** Available when services are performed by or under the direct supervision of a registered respiratory care practitioner for the treatment, management, control and care of Members with deficiencies and abnormalities of the cardiorespiratory system. Services must be provided in accordance with an order from a Professional Health Care Provider.
- **Cardiac Rehabilitation Services:** Cardiac Rehabilitation Services must begin within two (2) months following discharge from the Hospital. Twelve (12) visits per Member per episode, limited to the following diagnosed medical conditions:
  - Myocardial Infarction
  - Coronary Artery Bypass Surgery
  - Coronary Angioplasty and Stenting
  - Heart Valve Surgery
  - Heart Transplant Surgery

Not Covered:

- *Educational or non-medical services for learning disabilities and/or behavioral problems, including those educational or non-medical services provided under the Individuals with Disabilities Education Act (IDEA)*
- *Maintenance Care that is typically long-term, by definition not therapeutically necessary but is provided at regular intervals to promote health and enhance the quality of life; this includes care provided after maximum therapeutic improvement, without a trial of withdrawal of treatment, to prevent symptomatic deterioration or initiated by Members without symptoms in order to promote health and to prevent further problems, unless specifically stated as covered elsewhere in this Certificate of Insurance*
- *Services provided in the Member's home for convenience*
- *Hot/cold pack therapy including polar ice therapy and water circulating devices*

Hearing services (testing, treatment, and supplies)

Hearing services coverage is provided for the following:

- Sudden sensorineural hearing loss (SSNHL), and diagnostic testing and treatment related to acute illness or injury.

Note: Preauthorization/Prior Approval is required for the following services; failure to get Preauthorization/Prior Approval may result in a reduction or denial of benefits. (See Services requiring Preauthorization/Prior Approval in Section 4.):

1. External hearing aids for the treatment of a hearing loss that is not due to the gradual deterioration that occurs with aging and/or other lifestyle factors.
   a. Benefit is limited to one hearing aid, per ear, per Member, every three (3) years, in alignment with medical necessity and Plan guidelines.
   b. The provision of hearing aids must meet criteria for rehabilitative and/or habilitative services coverage and either:
      i. provide significant improvement to the Member within two (2) months, as certified on a prospective and timely basis by the Plan; or
      ii. help maintain or prevent deterioration in physical, cognitive, or behavioral function.
2. Hearing aids for Members under age 18.
3. Cochlear implants and bone-anchored (hearing aid) implants.

Not Covered:

- *Treatment of gradual deterioration of hearing that occurs with aging and/or other lifestyle factors, and related adult hearing screening services, testing and supplies*
- *For Members ages 18 and older, external hearing aids; non-implant devices; or equipment to correct gradual hearing impairment or loss that occurs with aging and/or other lifestyle factors*
- *Tinnitus Maskers*
- *All other hearing related supplies, purchases, examinations, testing or fittings*

Vision services (testing, treatment, and supplies)

The following are covered:

- Eyeglasses or contact lenses for Members diagnosed with aphakia (the absence of the lens of the eye, due to surgical removal, a perforated wound or ulcer, or a congenital condition resulting in complications which include the detachment of the vitreous or retina, and glaucoma)
- Non-routine vision exams relating to disease or injury of the eye
- Eyeglasses, including lenses and one frame per lifetime up to up to a net allowance of $200 or clear contact lenses for the aphakia eye will be covered for *two (2)* single lens per calendar year
- Scleral Shells: Soft shells limited to *two (2)* per calendar year. Hard shells limited to *one (1)* per lifetime

- Cataract Surgery
  - One (1) pair of eyeglasses or contact lenses per Member when purchased within 6 months following a covered cataract surgery
- Visual Training for Members under age 10. Benefits are subject to an Annual Maximum of 16 visits per Member.
- Dilated Eye Examination for Members with Diabetes, limited to one (1) examination per Member per Benefit Period.

Not Covered:

- *Adult vision exams (routine)*
- *Eyeglasses or contact lenses and the vision examination for prescribing or fitting eyeglasses or contact lenses, unless specified as Covered elsewhere in this Certificate of Insurance*
- *Refractive errors of the eye*
- *Refractive eye surgery when used in otherwise healthy eyes to replace eyeglasses or contact lenses*
- *Purchase, examination, or fitting of eyeglasses or contact lenses, except as specifically covered elsewhere*
- *Radial Keratotomy, Myopic Keratomileusis, and any surgery involving corneal tissue for the purpose of altering, modifying, or correcting myopia, hyperopia, or stigmatic error*
- *Replacement of lost, stolen, broken, or damaged lenses or glasses*
- *Bifocal contact lenses*
- *Special lens coating or lens treatments for prosthetic eyewear*
- *Routine cleaning of Scleral Shells*
- *Services or supplies determined by the Plan to be special or unusual, including orthoptics, vision training and vision aids (except for Members under the age of ten (10)*

Foot care

Routine foot care covered for Members with diabetes only. See Section 5(a) *Diabetes supplies, equipment, and education* for more information on Plan policies.

Non-routine diagnostic testing and treatment of the foot due to illness or injury

Note: See Section on *Orthotic and prosthetic devices* for information on podiatric shoe inserts

Not Covered:

- *Cutting, removal, or treatment of corns, calluses, or nails for reasons other than authorized corrective surgery (except as stated above and in Section 5(a) Diabetes supplies, equipment, and education)*
- *Diagnosis and treatment of weak, strained, or flat feet*

Orthotic and prosthetic devices

Prosthetic limbs, sockets and supplies, and prosthetic eyes limited to *one (1)* per lifetime

Externally worn breast prostheses and surgical bras, including necessary replacements following a mastectomy. Includes *two (2)* external prosthesis per Calendar Year and *two (2)* bras per Calendar Year. For double mastectomy: coverage extends to *four (4)* external prosthesis per Calendar Year and *two (2)* bras per Calendar Year.

Adjustments and/or modification to the prosthesis required by wear/tear or due to a change in Member's condition or to improve the function are eligible for coverage and do not require Preauthorization/Prior Approval.

Repairs necessary to make the prosthetic functional are covered and do not require authorization/approval. The expense for repairs is not to exceed the estimated expense of purchasing another prosthesis.

Note: The following requires Preauthorization/Prior Approval; failure to get Preauthorization/Prior Approval may result in a reduction or denial of benefits. (See Services requiring Preauthorization/Prior Approval in Section 4.):

- Cochlear implants and related services
- Devices permanently implanted that are not Experimental or Investigational such as artificial joints, pacemakers, and surgically implanted breast implant(s) following mastectomy.

Note: Internal prosthetic devices are paid as Hospital benefits; see Section 5(b) for benefit information. Insertion of the device is paid under the surgery benefit.

Not Covered:

- *Experimental and/or Investigational services or devices except as part of an Approved Clinical Trial*
- *Revision/replacement of prosthetics (except as noted per Plan guidelines (available upon request))*
- *Replacement or repair of items, if the items are damaged or destroyed by the Member's misuse, abuse or carelessness, lost, or stolen*
- *Duplicate or similar items*
- *Service call charges, labor charges, charges for repair estimates*
- *Wigs, cranial prosthesis, or hair transplants*
- *Cleaning and polishing of prosthetic eye(s)*

Durable medical equipment (DME)

Covered DME equipment prescribed by an attending Practitioner and/or Provider, which is Medically Necessary, not primarily and customarily used for non-medical purposes, designed for prolonged use, and for a specific therapeutic purpose in the treatment of an illness or injury. Limitations per Plan policy guidelines apply (available upon request).

Casts, splints, braces, crutches and dressings for the treatment of fracture, dislocation, torn muscles or ligaments and other chronic conditions per Plan guidelines (available upon request).

Note: The following DME require Preauthorization/Prior Approval; failure to get Preauthorization/Prior Approval may result in a reduction or denial of benefits. (See Services requiring Preauthorization/Prior Approval in Section 4.):

- Respiratory equipment such as ventilators, pleural catheters, hand-held battery operated nebulizers, and suction pumps
- Gastrointestinal equipment such as TPN enteral supplies and formula, parenteral nutrition, and suction pumps
- Beds such as Hospital beds and mattresses
- Musculoskeletal equipment such as neuromuscular stimulators, and bone growth stimulators
- Integumentary supplies such as wound vacuum systems
- Wheelchairs
- Home IV therapy supplies and medications
- Repair, replacement, and periodic maintenance of durable medical equipment

Note: This list is not all-inclusive and is subject to change per Plan policy updates.

Not Covered:

- *Orthopedic shoes; custom made orthotics; over-the-counter orthotics and appliances*
- *Disposable supplies (including diapers) or non-durable supplies and appliances, including those associated with equipment determined not to be eligible for coverage*
- *Revision of durable medical equipment, except when made necessary by normal wear or use*
- *Replacement or repair of equipment if items are damaged or destroyed by Member misuse, abuse, or carelessness, lost, or stolen*
- *Duplicate or similar items*
- *Sales tax, mailing, delivery charges, service call charges, or charges for repair estimates*
- *Items which are primarily educational in nature or for vocation, comfort, convenience or recreation*
- *Household equipment which primarily has customary uses other than medical, such as, but not limited to, air purifiers, central or unit air conditioners, water purifiers, non-allergic pillows, mattresses or waterbeds, physical fitness equipment, hot tubs, or whirlpools*
- *Household fixtures including, but not limited to, escalators or elevators, ramps, swimming pools and saunas*
- *Home Modifications including, but not limited to, its wiring, plumbing or changes for installation of equipment*
- *Vehicle modifications including, but not limited to, hand brakes, hydraulic lifts, and car carrier*
- *Remote control devices as optional accessories*
- *Any other equipment and supplies which the Plan determines are not eligible for coverage*

Home health services

Note: Preauthorization/Prior Approval is required; failure to get Preauthorization/Prior Approval may result in a reduction or denial of benefits. (See Services requiring Preauthorization/Prior Approval in Section 4.)

Member must be home-bound to receive home health services. The following is covered if approved by the Plan in lieu of Hospital or Skilled Nursing Facility:

- part-time or intermittent care by a RN or LPN/LVN
- part-time or intermittent home health aide services for direct patient care only
- physical, occupational, speech, inhalation, and intravenous therapies up to the maximum benefit allowable
- medical supplies, prescribed medicines, and lab services, to the extent they would be covered if the Member were Hospitalized

Not Covered:

- *Nursing care requested by, or for the convenience of the patient or the patient's family (rest cures)*
- *Custodial or convalescent care*

Chiropractic services

Chiropractic services provided on an inpatient or outpatient basis when Medically Necessary as determined by Sanford Health Plan and within the scope of licensure and practice of a Chiropractor, to the extent services would be covered if provided by a Physician. Benefits are not available for Maintenance Care.

Not Covered:

- *Maintenance Care*
- *Vitamins (unless listed as covered elsewhere in this COI), minerals, therabands, cervical pillows, and hot/cold pack therapy including polar ice therapy and water circulating devices*

Tobacco cessation treatment

As defined in the Affordable Care Act, evidence-based items or services that have in effect a rating of "A" or "B" in the current recommendations of the United States Preventive Services Task Force when received from an In-Network provider are covered without payment of any deductible or coinsurance requirement that would otherwise apply. Tobacco cessation treatment includes:

- Screening for tobacco use; and
- At least two (2) tobacco cessation attempts per year (for participants who use tobacco products). Covering a cessation attempt is defined to include coverage for:
    - Four (4) tobacco cessation counseling sessions of at least ten (10) minutes each (including telephone counseling, group counseling and individual counseling) without Preauthorization/Prior Approval; and
    - All Food and Drug Administration (FDA)-approved tobacco cessation medications (including both prescription and over-the-counter medications) for a 90-day treatment regimen when prescribed by a health care provider without Preauthorization/Prior Approval.

Not Covered: *Hypnotism and Acupuncture*

Reconstructive surgery

Note: The following services require Preauthorization/Prior Approval; failure to get Preauthorization/Prior Approval may result in a reduction or denial of benefits. (See Services requiring Preauthorization/Prior Approval in Section 4.)

- Surgery to restore bodily function or correct a deformity caused by illness or injury
- If you have had or are going to have a mastectomy, you may be entitled to certain benefits under the Women's Health and Cancer Rights Act of 1998 (WHCRA). Coverage for mastectomy related benefits will be provided in a manner determined in consultation with the attending physician and Member. Coverage will be provided for reconstructive breast surgery and physical complications at all stages of a mastectomy, including lymphedema for those Members who had a mastectomy resultant from a disease, illness, or injury. Breast prostheses and surgical bras and replacements are also covered (see Prosthetic devices in Section 5(a)). Deductible and coinsurance applies as outlined in your *Summary of Benefits and Coverage*.

  Note: For single mastectomies, coverage extends to the non-affected side to make it symmetrical with the affected breast post-surgical reconstruction.

Not Covered:

- *Surgeries related to gender transformation/gender reassignment*
- *Cosmetic Services and/or supplies to repair or reshape a body structure primarily for the improvement of a Member's appearance or psychological well-being or self-esteem, including but not limited to, breast augmentation, skin disorders, rhinoplasty, liposuction, scar revisions, and cosmetic dental services*
- *Removal, revision or re-implantation of saline or silicone implants for: breast implant malposition; unsatisfactory aesthetic outcome; patient desire for change of implant; patient fear of possible negative health effects; or removal of ruptured saline implants that do not meet medical necessity criteria.*
- *Prophylactic (preventive) surgeries (i.e. mastectomy, oophorectomy)*

Oral and maxillofacial surgery

Note: The following services require Preauthorization/Prior Approval; failure to get Preauthorization/Prior Approval may result in a reduction or denial of benefits. (See Services requiring Preauthorization/Prior Approval in Section 4.)

- Oral surgical procedures limited to services required because of injury, accident or cancer that damages Natural Teeth
  - Care must be received within *six (6)* months of the occurrence
  - Orthognathic Surgery per Plan guidelines (available upon request)
  - Associated radiology services are included
  - "Injury" does not include injuries to Natural Teeth caused by biting or chewing
- Diagnosis and treatment for Temporomandibular Joint (TMJ) Dysfunction and/or Temporomandibular Disorder (TMD) and TMJ splints and adjustments if your primary diagnosis is TMJ/TMD.
- Preauthorization/Prior Approval is required for dental anesthesia for Members over age nine (9) and/or Members with a developmental disability, as determined by a licensed Physician, which places such a person at serious risk.
- Coverage applies regardless of whether the services are provided in a Hospital or a dental office

Note: For more information on Dental Services, see Section 5(f).

Note: Dental care Anesthesia and Hospitalization for the extraction of teeth is covered for a Member who:

a. is a child under age nine (9); or
b. is severely disabled or otherwise suffers from a developmental disability, or
c. has high risk medical condition(s) as determined by a licensed Physician, which places such a person at serious risk.

Not Covered:

- *Routine dental care and treatment*
- *Natural teeth replacements including crowns, bridges, braces or implants*
- *Osseointegrated implant surgery (dental implants)*
- *Extraction of wisdom teeth*
- *Hospitalization for extraction of teeth except as required by N.D.C.C. §26.1-36-09.9*
- *Dental x-rays or dental appliances*
- *Shortening of the mandible or maxillae for cosmetic purposes*
- *Services and supplies related to ridge augmentation, implantology, and Preventive vestibuloplasty*
- *Dental appliances of any sort, including but not limited to bridges, braces, and retainers(except for appliances for treatment of TMJ/TMD)*

Transplant services

Note: Preauthorization/Prior Approval is required; failure to get Preauthorization/Prior Approval may result in a reduction or denial of benefits. (See Services requiring Preauthorization/Prior Approval in Section 4.)

Coverage is provided for the organ donor expenses under the transplant recipient's benefit plan when billed under the transplant recipient's name when the recipient of the transplant meets <u>ALL</u> of the following criteria:

a. Is eligible for coverage under the Plan;
b. Has a condition for which the proposed transplant is considered medically necessary;

c. Meets the Plan's medical coverage guidelines for transplant; and
d. The charges are not covered by the donor's own benefit plan, by another group health plan or other coverage arrangement.

Coverage is provided for transplants according to the Plan's medical coverage guidelines (available upon request) for the following services:

- Pre-operative care
- Transplant procedure, Facility and professional fees
- Organ acquisition costs including:
  - For living donors: organ donor fees, recipient registration fees, laboratory tests (including tissue typing of recipient and donor), and Hospital services that are directly related to the excision of the organ
  - For cadaver donors: operating room services, intensive care cost, preservation supplies (perfusion materials and equipment), preservation technician's services, transportation cost, and tissue typing of the cadaver organ
- Bone marrow or stem cell acquisition and short term storage during therapy for a Member with a covered illness
- Short-term storage of umbilical cord blood for a Member with a malignancy undergoing treatment when there is a donor match.
- Post-transplant care and treatment
- Medications (including immunosuppressive medications)
- Supplies (must be Preauthorized/Approved)
- Psychological testing
- Living donor transplant-related complications for sixty (60) days following the date the organ is removed, if not otherwise covered by donor's own health benefit plan, by another group health plan or other coverage arrangement

Transplants that meet the United Network for Organ Sharing (UNOS) criteria and/or Plan policy requirements and are performed at Plan Participating Providers or contracted Centers of Excellence are covered for the following conditions:

1. Small bowel transplants
2. Kidney transplants for end stage disease
3. Cornea transplants
4. Heart transplants
5. Implantable ventricular assist device used while waiting for a heart transplant
6. Lung transplants or heart/lung transplants for:
   a. Primary pulmonary hypertension;
   b. Eisenmenger's syndrome;
   c. End stage pulmonary fibrosis;
   d. Alpha 1 antitrypsin disease;
   e. Cystic fibrosis; and
   f. Emphysema for members with specific indications.
7. Liver transplants for:
   a. Biliary atresia in children;
   b. Primary biliary cirrhosis;
   c. Post-acute viral infection (including hepatitis a, hepatitis b antigen e negative and hepatitis c causing acute atrophy or post necrotic cirrhosis);
   d. Primary sclerosing cholangitis; and
   e. Alcoholic cirrhosis.
8. Pancreas transplants (cadaver organ) for Members with Type I uncontrolled diabetes for:
   a. Simultaneous pancreas kidney;
   b. Pancreas after kidney; and
   c. Pancreas before kidney.
9. Allogenic bone marrow transplants or peripheral stem cell support (myeloablative or non-myeloablative) for:
   a. Acute Lymphoblastic Leukemia
   b. Acute Myelogenous Leukemia
   c. Chronic Myelogenous Leukemia
   d. Pediatric Neuroblastoma
   e. Myelodysplastic Diseases
   f. Hodgkin's Disease (Lymphoma)
   g. Non-Hodgkin's Lymphoma
   h. Genetic Diseases and Acquired Anemias:
      i. Sickle cell anemia
      ii. Severe aplastic anemia
      iii. Wiskott-Aldrich syndrome
      iv. Severe combined immunodeficiencies
      v. Mucopolysaccharidoses
      vi. Mucolipidoses
10. Autologous bone marrow transplants or peripheral stem cell support associated with high dose chemotherapy for:
    a. Acute Lymphoblastic Leukemia
    b. Acute Myelogenous Leukemia
    c. Chronic Myelogenous leukemia

d. Pediatric Neuroblastoma
e. Ewing's Sarcoma
f. Primitive Neuroectodermal Tumors
g. Germ Cell Tumors
h. Multiple Myeloma
i. Primary Amyloidosis
j. Hodgkin's Disease (Lymphoma)
k. Non-Hodgkin's Lymphoma
l. Breast cancer

Not Covered:

- *Transplant evaluations with no end organ complications*
- *Storage of stem cells including storing umbilical cord blood of non-diseased persons for possible future use*
- *Artificial organs, any transplant or transplant services not listed above*
- *Expenses incurred by a Member as a donor, unless the recipient is also a Member Costs related to locating and/or screening organ donors*
- *Donor expenses for complications that occur after sixty (60) days from the date the organ is removed, regardless if the donor is covered as a Member under this Plan or not*
- *Services, chemotherapy, radiation therapy (or any therapy that damaged the bone marrow), supplies, medications and aftercare for or related to artificial or non-human organ transplants*
- *Services, chemotherapy, supplies, medications and aftercare for or related to human organ transplants not specifically approved by the Plan's Chief Medical Officer or its designee*
- *Services, chemotherapy, supplies, medications and aftercare for or related to transplants performed at a non-Plan Participating Center of Excellence*
- *Transplants and transplant evaluations that do not meet the United Network for Organ Sharing (UNOS) criteria*

Anesthesia

We cover services of an anesthesiologist or other certified anesthesia Provider in connection with an authorized/approved procedure or treatment.

Concurrent services received while inpatient

Concurrent services including medical, surgical, maternity, Chemotherapy or Radiation Therapy provided during one inpatient stay by one Professional Health Care Provider. Benefits for concurrent services will be based on the Covered Service with the highest Allowance.

When two or more Professional Health Care Providers have attended the Member during one inpatient stay because the nature or severity of the Member's condition requires the skills of separate Professional Health Care Providers, benefits will be available for the Covered Service that carries the highest Allowance for the type of service provided by each Professional Health Care Provider, provided the service is Medically Appropriate and Necessary and would otherwise be a Covered Service under this Benefit Plan.

Section 5(b) Services provided by a Hospital or other Facility

IMPORTANT

Here are some important things you should keep in mind about these benefits:

- Please remember that all benefits are subject to the definitions, limitations, and exclusions in this COI and are payable only when we determine they are Medically Necessary.
- Participating Providers must provide or arrange your care and you must be Hospitalized in a Participating Facility.
- Mental Health and Substance Use Disorder benefits provided by a Hospital or other Facility are outlined in Section 5(d).
- Be sure to read Section 4, *How you get care*, for valuable information about conditions for coverage.
- **YOU MUST GET PREAUTHORIZATION/PRIOR APPROVAL FOR SOME OF THESE SERVICES**. See the benefits description below.

IMPORTANT

Benefit Description

Inpatient Hospital

Note: Preauthorization/Prior Approval is required; failure to get Preauthorization/Prior Approval may result in a reduction or denial of benefits. (See Services requiring Preauthorization/Prior Approval in Section 4.)

The following Hospital Services are covered:

- Room and board
- Critical care services
- Use of the operating room and related facilities
- General Nursing Services, including special duty Nursing Services if approved by the Plan
- The administration of whole blood and blood plasma is a Covered Service. The purchase of whole blood and blood components is not covered unless such blood components are classified as medications in the *United States Pharmacopoeia*.
- Special diets during Hospitalization, when specifically ordered
- Other services, supplies, biologicals, and medications prescribed by a Practitioner and/or Provider during Hospitalization

Note: If you need a mastectomy, you may choose to have the procedure performed on an inpatient basis and remain in the Hospital up to 48 hours after the procedure.

Not Covered:

- *Take-home medications (Prescription medications provided to a Member at discharge are paid under the Prescription Drugs benefit. See Section 2 and Section 5(e) for payment amount details.)*
- *Personal comfort items (telephone, television, guest meals and beds)*
- *Admissions to Hospitals performed only for the convenience of the Member, the Member's family or the Member's Practitioner and/or Provider*
- *Custodial care*
- *Convalescent care*
- *Intermediate level or Domiciliary care*
- *Rest cures*
- *Services to assist in activities of daily living*

Outpatient Hospital or Ambulatory Surgical Center

Note: Preauthorization/Prior Approval is required; failure to get Preauthorization/Prior Approval may result in a reduction or denial of benefits. (See Services requiring Preauthorization/Prior Approval in Section 4.)

Health care services furnished in connection with a surgical procedure performed in a participating surgical center include:

- Outpatient Hospital surgical center
- Outpatient Hospital services such as diagnostic tests
- Ambulatory surgical center (same day surgery)

Not Covered:

- *Surgical procedures that can be done in a Practitioner office setting (i.e. vasectomy, toe nail removal)*
- *Blood and blood derivatives replaced by the Member*
- *Take-home medications (Prescription medications provided to a Member at discharge are paid under the Prescription Drugs benefit. See Section 2 and Section 5(e) for payment amount details.)*

Skilled nursing care facility benefits

Note: Preauthorization/Prior Approval is required; failure to get Preauthorization/Prior Approval may result in a reduction or denial of benefits. (See Services requiring Preauthorization/Prior Approval in Section 4.)

Skilled Nursing Facility Services are covered if approved by the Plan in lieu of continued or anticipated Hospitalization.

The following Skilled Nursing Facility Services are covered when provided through a state-licensed nursing Facility or program:

- Skilled nursing care, whether provided in an inpatient skilled nursing unit, a Skilled Nursing Facility, or a subacute (swing bed) Facility
- Room and board in a Skilled Nursing Facility
- Special diets in a Skilled Nursing Facility, if specifically ordered

Skilled nursing care in a Hospital shall be covered if the level of care needed by a Member has been reclassified from acute care to skilled nursing care and no designated skilled nursing care beds or swing beds are available in the Hospital or in another Hospital or health care Facility within a *thirty-mile (30)* radius of the Hospital.

Not Covered:

- *Custodial care*
- *Convalescent care*
- *Intermediate level or Domiciliary care*
- *Residential care*
- *Rest cures*
- *Services to assist in activities of daily living*

Hospice care

Note: Preauthorization/Prior Approval is required; failure to get Preauthorization/Prior Approval may result in a reduction or denial of benefits. (See Services requiring Preauthorization/Prior Approval in Section 4.)

A Member may elect to receive hospice care, instead of the traditional Covered Services provided under the Plan, when the following circumstances apply:

a. The Member has been diagnosed with a terminal disease and a life expectancy of *six (6)* months or less;
b. The Member has chosen a palliative treatment focus (i.e. emphasizing comfort and support services rather than treatment attempting to cure the disease or condition);
c. The Member continues to meet the terminally ill prognosis as reviewed by the Plan's Chief Medical Officer over the course of care; and
d. The hospice service has been approved by the Plan.

The following hospice services are covered:

a. Admission to a hospice Facility, Hospital, or Skilled Nursing Facility for room and board, supplies and services for pain management and other acute/chronic symptom management
b. In-home hospice care per Plan guidelines (available upon request)
c. Part-time or intermittent nursing care by a RN, LPN/LVN, or home health aide for patient care up to *eight (8)* hours per day
d. Social services under the direction of a Participating Provider
e. Psychological and dietary counseling
f. Physical or occupational therapy, as described under *Section 5(a)*
g. Consultation and Case Management services by a Participating Provider
h. Medical supplies, DME and medications prescribed by a Participating Provider
i. Expenses for Participating Providers for consultant or Case Management services, or for physical or occupational therapists, who are not Group Members of the hospice, to the extent of coverage for these services as listed in *Section 5(a)*, but only where the hospice retains responsibility for the care of the Member

Not Covered:

- *Independent nursing, homemaker services, respite care*

IMPORTANT

Here are some important things to keep in mind about these benefits:

Please remember that all benefits are subject to the definitions, limitations, and exclusions in this COI and are payable only when we determine they are Medically Necessary.

Be sure to read Section 4, *How you get care*, for valuable information about conditions for coverage.

IMPORTANT

What is an Emergency Medical Condition?

An **Emergency Medical Condition** is the sudden and unexpected onset of a health condition that would lead a Prudent Layperson, acting reasonably, and possessing the average knowledge of health and medicine, to believe that the absence of immediate medical attention could result in serious impairment to bodily functions or serious dysfunction of a bodily organ or part or would place the person's health; or with respect to a pregnant woman, the health of the woman or her unborn child, in serious jeopardy.

What is a Prudent Layperson?

A **Prudent Layperson** is a person who is without medical training and who possess an average knowledge of health and medicine and who draws on his/her practical experience when making a decision regarding the need to seek Emergency medical treatment.

What is an Urgent Care Situation?

An **Urgent Care Situation** is a degree of illness or injury, which is less severe than an Emergency Condition, but requires prompt medical attention within *twenty-four (24)* hours, such as stitches for a cut finger. **Urgent Care Request** means a request for a health care service or course of treatment with respect to which the time periods for making a non-Urgent Care Request determination which:

a. Could seriously jeopardize the life or health of the Member or the ability of the Member to regain maximum function, based on a Prudent Layperson's judgment; or
b. In the opinion of a Practitioner and/or Provider with knowledge of the Member's medical condition, would subject the Member to severe pain that cannot be adequately managed without the health care service or treatment that is the subject of the request.

If an Urgent Care Situation occurs, Members should contact their Primary Care Practitioner and/or Provider immediately, if one has been selected, and follows his or her instructions. A Member may always go directly to a participating urgent care or after-hours clinic (listing available upon request or visit www.sanfordhealthplan.com/ndpers).

The Health Plan covers worldwide Emergency services necessary to screen and stabilize Members without Preauthorization/Prior Approval in cases where a Prudent Layperson reasonably believed that an Emergency Medical Condition existed. Network restrictions do not apply to Emergency services received by Practitioners and/or Providers outside of the United States.

Benefit Description

Emergency Medical Conditions

Emergency services from Basic Plan-level Providers will be covered at the same benefit and cost sharing level as services provided by PPO-level Providers both within and outside of the Sanford Health Plan Service Area in cases where a Prudent Layperson reasonably believed that an Emergency Medical Condition existed.

Note: If the Plan determines the condition did not meet Prudent Layperson definition of an Emergency, then Basic Plan level cost-sharing amounts will apply, and the Member is responsible for charges above the Reasonable Cost.

If an Emergency Medical Condition arises, Members are encouraged to seek services at the nearest Emergency Facility that is a Participating Provider. If the Emergency Medical Condition is such that a Member cannot go safely to the nearest Participating Emergency Facility, then the Member should seek care at the nearest Emergency Facility. To find a listing of Participating Providers and Facilities, sign into your account at www.sanfordhealthplan.com/memberlogin or call the Plan toll-free at (800) 499-3416 | TTY/TDD: (877) 652-1844 *(toll-free)*.

The Member, or a designated relative or friend must notify the Plan, and the Member's Primary Care Practitioner and/or Provider, if one has been selected, as soon as reasonably possible after receiving treatment for an Emergency Medical Condition, but no later than *forty-eight (48)* hours after the Member is physically or mentally able to do so.

Participating Emergency Providers/Facilities

The Plan covers Emergency services necessary to screen and stabilize Members without Preauthorization/Prior Approval in cases where a Prudent Layperson reasonably believed that an Emergency Medical Condition existed.

Note: If the Plan determines the Member's condition did not meet the Prudent Layperson definition of an Emergency, then Basic Plan level cost-sharing amounts may apply, subject to whether services were received from a PPO-level or Basic-level Participating Provider/Facility, as set forth in Section 1. See Section 1, "*Participating Providers*" and "*How PPO vs. Basic Plan Determines Benefit Payment*" for details.

Non-Participating Emergency Providers/Facilities

The Plan covers Emergency services necessary to screen and stabilize a Member and may not require Prospective (Pre-Service) Review of such services if a Prudent Layperson would have reasonably believed that use of a Participating Provider would result in a delay that would

worsen the Emergency, or if a provision of federal, state, or local law requires the use of a specific Practitioner and/or Provider. The coverage shall be at the same benefit level as if the service or treatment had been rendered by a Participating Provider.

Note: If the Plan determines the Member's condition did not meet the Prudent Layperson definition of an Emergency, then Basic Plan level cost-sharing amounts will apply, subject to the limitations on Non-Participating Providers set forth in Section 1, and whether services were rendered within or outside the state of North Dakota and its contiguous counties. See Section 1, "*Non-Participating Health Care Providers*", for more information.

If a Member is admitted as an inpatient to a Non-Participating Provider Facility, then the Plan will contact the admitting Practitioner and/or Provider to determine medical necessity and a plan for treatment. In some cases, where it is medically safe to do so, the Member may be transferred to a Participating Hospital and/or other appropriate Facility.

Urgent Care Situations

Treatment provided in Urgent Care Situations from Basic Plan-level Providers will be covered at the same benefit and cost sharing level as services provided by PPO-level Providers both within and outside of the Sanford Health Plan Service Area in cases where a Prudent Layperson reasonably believed that an Urgent Care Situation existed.

Note: If the Plan determines the condition did not meet Prudent Layperson definition of an Urgent Care Situation, then Basic Plan level cost-sharing amounts will apply, and the Member is responsible for charges above the Reasonable Cost.

If an **Urgent Care Situation** occurs, Members should contact their Primary Care Practitioner and/or Provider immediately, if one has been selected, and follow his or her instructions. If a Primary Care Practitioner and/or Provider has not been selected, the Member should contact the Plan and follow the Plan's instructions. A Member may always go directly to a participating urgent care or after-hours clinic. To find a listing of Participating Providers and Facilities, sign into your account at www.sanfordhealthplan.com/memberlogin or call the Plan toll-free at (800) 499-3416 | TTY/TDD: (877) 652-1844 *(toll-free)*.

Participating Providers/Facilities

The Plan covers services in an Urgent Care Situation without Preauthorization/Prior Approval in cases where a Prudent Layperson reasonably believed that an Urgent Care Situation existed.

Note: If the Plan determines the Member's condition did not meet the Prudent Layperson definition of an Urgent Care Situation, then Basic Plan level cost-sharing amounts may apply, subject to whether services were received from a PPO-level or Basic-level Participating Provider/Facility, as set forth in Section 1. See Section 1, "*Participating Providers*" and "*How PPO vs. Basic Plan Determines Benefit Payment*" for details.

Non-Participating Providers/Facilities

The Plan covers services in an Urgent Care Situation without Preauthorization/Prior Approval requirements if a Prudent Layperson would have reasonably believed that use of a Participating Provider would result in a delay that would worsen the Urgent Care Situation, or if a provision of federal, state, or local law requires the use of a specific Practitioner and/or Provider. The coverage shall be at the same benefit level as if the service or treatment had been rendered by a Participating Provider.

Note: If the Plan determines the Member's condition did not meet the Prudent Layperson definition of an Urgent Care Situation, then Basic Plan level cost-sharing amounts will apply, subject to the limitations on Non-Participating Providers set forth in Section 1, and whether services were rendered within or outside the state of North Dakota and its contiguous counties. See Section 1, "*Non-Participating Health Care Providers*", for more information.

Ambulance and transportation services

Transportation by professional ground ambulance, air ambulance, or on a regularly scheduled flight on a commercial airline is covered when transportation is:

a. Medically Necessary; and
b. To the nearest Participating Provider equipped to furnish the necessary Health Care Services, or as otherwise approved and arranged by the Plan.

Not Covered:

- *Reimbursement for personal transportation costs incurred while traveling to/from Practitioner and/or Provider visits or other health care services*
- *Transfers performed only for the convenience of the Member, the Member's family or the Member's Practitioner and/or Provider*
- *Services and/or travel expenses relating to a Non-Emergency Medical Condition*

Non-Emergency or Non-Urgent Care Situations Outside the Plan's Service Area

For non-Emergency medical care or non-Urgent Care Situations when traveling outside the Plan's Service Area, benefits will be payable at Basic level. For details, see Section 1.

Section 5(d) Mental health and substance use disorder benefits

IMPORTANT

Here are some important things to keep in mind about these benefits:

All benefits are subject to the definitions, limitations, and exclusions in this COI and are payable only when we determine they are Medically Necessary.

Be sure to read Section 4, *How you get care*, for valuable information about conditions for coverage.

YOU MUST GET PREAUTHORIZATION/PRIOR APPROVAL OF SOME OF THESE SERVICES. See the benefits description below.

IMPORTANT

Benefit Description

Mental health benefits

In compliance with the Mental Health Parity and Addiction Equity Act of 2008 (MHPAEA), the financial requirements and treatment limitations that apply to the Plan's mental health and/or substance use disorder benefits are no more restrictive than the predominant financial requirements or treatment limitations that apply to substantially all medical/surgical benefits. In addition, mental health and substance use disorder benefits are not subject to separate cost sharing requirements or treatment limitations. Mental health and substance use disorders are covered consistent with generally recognized independent standards of current medical practice, which include the current editions of the Diagnostic and Statistical Manual of Mental Disorders (DSM) and the International Classification of Diseases (ICD).

Coverage is provided for mental health conditions which current prevailing medical consensus affirms substantially impairs perception, cognitive function, judgment, and/or emotional stability, and limits the life activities of the person with the condition(s). This includes but is not limited to the following conditions: schizophrenia; schizoaffective disorders; bipolar disorder; major depressive disorders (single episode or recurrent); obsessive-compulsive disorders; attention-deficit/hyperactivity disorder; autism spectrum disorders; post-traumatic stress disorders (acute, chronic, or with delayed onset); and anxiety disorders that cause significant impairment of function.

Mental health benefits are covered with the same Deductibles, Coinsurance factors, and restrictions as other medical/surgical benefits under the Plan. Coverage for mental health conditions includes:

- Outpatient Professional services, including therapy by Providers such as psychiatrists, psychologists, clinical social workers, or other qualified mental health professionals
- Inpatient services, including Hospitalizations
- Medication management
- Diagnostic tests
- Electroconvulsive therapy (ECT)
- Partial Hospitalization
- Intensive Outpatient Programs

For outpatient treatment services, the first five (5) hours of treatment of any calendar year will be covered at 100% (no charge). Coverage of the first five (5) hours will not apply when you elect an HSA.

If you are having difficulty obtaining an appointment with a mental health practitioner and/or Provider, or for mental health needs or assessment services by phone, call the Sanford USD Medical Center Triage Line toll-free at (888) 996-4673.

Telephonic consultation for a Member diagnosed with depression and within twelve (12) weeks of starting antidepressant therapy per Plan guidelines (available upon request). Coverage limited to one (1) telephonic consult per Member per year for depression and one (1) telephonic consult for Attention Deficit Hyperactive Disorder (ADHD). For Members with an eating disorder, see additional benefits in Section 5(a), *Outpatient nutritional care services*.

Note: Preauthorization/Prior Approval is required for these benefits. As with other medical/surgical benefits, failure to get Preauthorization/ Prior Approval may result in a reduction or denial of benefits. (See Services requiring Preauthorization/Prior Approval in Section 4):

- All Inpatient services, including those provided by a Hospital or a Residential Treatment Facility

Not Covered:

- *Convalescent care*
- *Marriage or bereavement counseling; pastoral counseling; financial or legal counseling; and custodial care counseling*
- *Educational or non-medical services provided under the Individuals with Disabilities Education Act (IDEA)*
- *Educational or non-medical services for learning disabilities and/or Behavioral problems*
- *Services related to environmental change*
- *Behavioral therapy, modification, or training, including Applied Behavioral Analysis (ABA)*
- *Milieu therapy*
- *Sensitivity training*

Substance use disorder benefits

In compliance with the Mental Health Parity and Addiction Equity Act of 2008 (MHPAEA), the financial requirements and treatment limitations that apply to the Plan's mental health and/or substance use disorder benefits are no more restrictive than the predominant financial requirements or treatment limitations that apply to substantially all medical/surgical benefits. In addition, mental health and substance use disorder benefits are not subject to separate cost sharing requirements or treatment limitations. Mental health and substance use disorders are covered consistent with generally recognized independent standards of current medical practice, which include the current editions of the Diagnostic and Statistical Manual of Mental Disorders (DSM), the American Society of Addiction Medicine Criteria (ASAM Criteria), and the International Classification of Diseases (ICD).

Substance use disorder benefits are covered with the same Deductibles, Coinsurance factors, and restrictions as other medical/surgical benefits under the Plan. Coverage for substance use disorders includes:

- Addiction treatment, including for alcohol, drug-dependence, and gambling issues
- Inpatient services, including Hospitalization
- Outpatient professional services, including therapy by Providers such as psychiatrists, psychologists, clinical social workers, Licensed Chemical Dependency Counselors, or other qualified mental health and substance abuse disorder professionals
- Partial Hospitalization
- Intensive Outpatient Programs

For outpatient treatment services, the first five (5) visits of treatment of any calendar year will be covered at 100% (no charge). Coverage of the first five (5) visits will not apply when you elect an HSA.

Note: Preauthorization/Prior Approval is required for these benefits; failure to get Preauthorization/Prior Approval may result in a reduction or denial of benefits. (See Services requiring Preauthorization/Prior Approval in Section 4):

- All Inpatient services, including those provided by a Hospital or a Residential Treatment Facility.

Not Covered:

- *Confinement Services to hold or confine a Member under chemical influence when no Medically Necessary services are provided, regardless of where the services are received (e.g. detoxification centers)*
- *Methadone or Cyclazocine therapy*
- *Marriage or bereavement counseling; pastoral counseling; financial or legal counseling; and custodial care counseling*
- *Educational or non-medical services for learning disabilities or behavioral problems*
- *Services related to environmental change*
- *Milieu therapy*
- *Sensitivity training*
- *Domiciliary care or Maintenance Care*
- *Convalescent care*

Section 5(e) Prescription drug and diabetes supplies benefits

IMPORTANT	**Here are some important things to keep in mind about these benefits:** We cover prescribed medications, as described in this Section. All benefits are subject to the definitions, limitations and exclusions in this COI and are payable only when we determine they are Medically Necessary. Be sure to read Section 4, *How you get care*, for valuable information about conditions for coverage. **YOU MUST GET PREAUTHORIZATION/PRIOR APPROVAL FOR SOME OF THESE SERVICES.** See the benefits description below.	IMPORTANT

- **Where you can obtain them.** You must fill the prescription at a Plan Participating pharmacy for Cost Sharing amounts to apply. A Member may be responsible for payment of the Cost Sharing Amounts at the time the Prescription Medication is dispensed. A Participating Pharmacy agrees not to charge or collect any amount from the Member that exceeds the Cost Sharing Amounts. All claims from a Participating Pharmacy must be submitted by the Participating Pharmacy. A listing of the Plan's Participating pharmacies is available by contacting the Plan or online at www.sanfordhealthplan.com/ndpers.

  If a Member receives Prescription Medications from a Non-Participating Pharmacy, the Member is responsible for submitting a Claim for Benefits. Charges in excess of the Allowed Charge are the Member's responsibility.
- **Specialty medications.** Some specialty medications may be obtained at a retail pharmacy and some medications must be obtained through The Plan's contracted specialty medication vendor. To enroll, and obtain preauthorization/prior approval to join the Specialty/Injectable Drugs Program, call toll-free (866) 333-9721. Please refer to your *Summary of Pharmacy Benefits* handbook for a complete listing of specialty medications that require Preauthorization/Prior Approval.
- **How you can obtain them.** You must present your ID card to the Plan Participating pharmacy; if you do not present your ID card to the Plan Participating pharmacy, you must pay 100% of the costs of the medication to the pharmacy. Additionally, if you choose to go to a Non-Participating pharmacy, you must pay 100% of the costs of the medication to the pharmacy.

  Note: If a Member receives Prescription Medications from a Non-Participating Pharmacy, the Member is responsible for payment of the Prescription Order or refill in full at the time it is dispensed and to submit appropriate reimbursement information to Sanford Health Plan. Payment for covered Prescription Medications will be sent to the Subscriber. Any charges in excess of the Allowed Charge are the Subscriber's responsibility.
- **We use a formulary.** Sanford Health Plan covers prescribed medications according to our Formulary. A formulary is a list of Prescription Drug Products, which are preferred by the Plan for dispensing to Members when appropriate. This list is subject to periodic review and modifications. Additional medications may be added or removed from the formulary throughout the year. Sanford Health Plan will notify you of any formulary changes. For a copy of the Plan formulary, contact Pharmacy Management toll-free at (888) 315-0885 | TTY/TDD: (877) 652-1844 *(toll-free)* or sign into your account at www.sanfordhealthplan.com/memberlogin to view the formulary online.

  Formulary contraceptive medications obtainable with a Prescription Order are paid at 100% of Allowed Charge; this includes over-the-counter Plan-B, if obtained with a Prescription Order. *Deductible Amount is waived.*
- **Exception to formulary.** The Plan will use appropriate pharmacists and Practitioner and/or Providers to consider exception requests and promptly grant an exception to the medication formulary, including exceptions for anti-psychotic and other mental health medications, for a Member when the health care Practitioner and/or Provider prescribing the medication indicates to the Plan:
  1. the formulary medication causes an adverse reaction in the patient;
  2. the formulary medication is contraindicated for the patient; or
  3. the prescription medication must be dispensed as written to provide maximum medical benefit to the patient.

  Note: Members must generally try formulary medications before an exception for the formulary will be made for non-formulary medication use, unless a Member's Practitioner and/or Provider determines that use of the formulary medication may cause an adverse reaction to the Member or be contraindicated for the Member. To request an exception to the formulary, please call Pharmacy Management toll-free at (888) 315-0885 | TTY/TDD: (877) 652-1844 *(toll-free)*.
- **There are dispensing limitations.** Prescription Medications and nonprescription diabetes supplies are subject to a dispensing limit of a 100-day supply.
- **Generic vs. Brand.** If a Generic Prescription Medication is the therapeutic equivalent for a Brand Name Prescription Medication, and is authorized by a Member's Professional Health Care Provider, benefits will be based on the Allowance for the Generic equivalent. If the Member does not accept the Generic equivalent, the Member is responsible for the cost difference between the Generic and the Brand Name Prescription Medication and applicable Cost Sharing Amounts, except for cases in which the prescribed drug is a contraceptive, per Plan guidelines.

Benefit Description

Covered medications and supplies

- Medicines prescribed by a Provider of health services, including off-label use of medications, in accordance with federal and state laws and regulations

- Self-Administered Injectable medications, per Plan guidelines (available upon request). Please refer to your *Pharmacy Handbook* for a list of medications (injectable and high cost medications) that must receive Preauthorization/Prior Approval, and must be obtained from Express Scripts Specialty Pharmacy by calling (888) 333-9721 *(toll-free)*. If these medications are obtained from a retail pharmacy or physician office without Preauthorization/Prior Approval by Sanford Health Plan Utilization Management Department, the Member will be responsible for the full cost of the medication.
- Diabetic medications and supplies (See Section 5(a) *Diabetes supplies, equipment, and education* for additional benefits)
- The following preventive medications/supplies are covered at 100% (no charge) with a written prescription order:
  - Folic Acid Supplements for women planning to become pregnant or in their childbearing years
  - Vitamin D Supplements for Members ages 65 and older at risk for falls
  - Aspirin to prevent cardiovascular disease for male Members ages 45 through 79 and female Members ages 55 through 79 who are at risk for developing cardiovascular disease
  - Formulary breast cancer preventive medications for women at increased risk for breast cancer

Not Covered:

- *Replacement of a prescription medication due to loss, damage, or theft*
- *Outpatient medications dispensed in a Provider's office or non-retail pharmacy location*
- *Medications that may be received without charge under a federal, state, or local program*
- *Medications for cosmetic purposes, including baldness, removal of facial hair, and pigmenting or anti-pigmenting of the skin*
- *Refills of any prescription older than one year*
- *Compound medications with no legend (prescription) medications*
- *Acne medication for Members over age thirty (30)*
- *B-12 injection (except for pernicious anemia)*
- *Drug Efficacy Study Implementation ("DESI") medications*
- *Experimental or Investigational medications, or medication usage, if not recognized by the Food and Drug Administration, or part of an Approved Clinical Trial*
- *Growth hormone, except when medically indicated and approved by the Plan*
- *Orthomolecular therapy, including nutrients, vitamins (unless otherwise specified as covered in this COI), food supplements and baby formula (except to treat PKU or otherwise required to sustain life or amino acid-based elemental oral formulas),and nutritional and electrolyte substances*
- *Medications, equipment or supplies available over-the-counter (OTC) that by federal or state law do not require a prescription order (except for Plan B and its generic equivalents; insulin; and select diabetic supplies, e.g., insulin syringes, needles, test strips and lancets, or aspirin to prevent cardiovascular disease when prescribed by a health care Practitioner and/or Provider)*
- *Any medication that is equivalent to an OTC medication except for medications that have a rating of "A" or "B" in the current recommendations of the United States Preventive Services Task Force and only when prescribed by a health care Practitioner and/or Provider*
- *Medications, and associated expenses and devices, not approved by the FDA for a particular use except as required by law (unless the Practitioner certifies off-label use with a letter of medical necessity)*
- *Anorexiants or weight management medications (except when Medically Necessary)*
- *Whole Blood and Blood Components Not Classified as Medications in the United States Pharmacopoeia*
- *Unit dose packaging*
- *Synthetic opioids (e.g. Methadone or Cyclazocine)*

Section 5(f) Dental benefits

IMPORTANT

Here are some important things to keep in mind about these benefits:

Please remember that all benefits are subject to the definitions, limitations, and exclusions in this COI and are payable only when we determine they are Medically Necessary.

We cover Hospitalization for dental procedures only when a non-dental physical impairment exists which makes Hospitalization necessary to safeguard the health of the patient. See Section 5(b) for Inpatient Hospital benefits. We do not cover the dental procedure unless described below.

Be sure to read Section 4, *How you get care*, for valuable information about conditions for coverage.

YOU MUST GET PREAUTHORIZATION/PRIOR APPROVAL FOR THESE SERVICES. See the benefits description below.

IMPORTANT

Benefit Description

Note: The following services require Preauthorization/Prior Approval; failure to get Preauthorization/Prior Approval may result in a reduction or denial of benefits. (See Services requiring Preauthorization/Prior Approval in Section 4.)

- Dental services provided by a Dentist (D.D.S.) in an office setting as a result of an accidental injury to the jaw, sound natural teeth, dentures, mouth or face.
  - Covered Services must be initiated within 12 months of the date of injury and completed within 24 months of the start of treatment or longer if a dental treatment plan approved by Sanford Health Plan is in place.
  - Oral surgical procedures limited to services required because of injury, accident or cancer that damages Natural Teeth
  - Associated radiology services are included
  - "Injury" does not include injuries to Natural Teeth caused by biting or chewing
- Diagnosis and treatment for Temporomandibular Joint (TMJ) Dysfunction and/or Temporomandibular Disorder (TMD) and TMJ splints and adjustments if your primary diagnosis is TMJ/TMD
  - Splint limited to one (1) per Member per benefit period
- Coverage applies regardless of whether the services are provided in a Hospital or a dental office

Note: The following services require Preauthorization/Prior Approval; failure to get Preauthorization/Prior Approval may result in a reduction or denial of benefits. (See Services requiring Preauthorization/Prior Approval in Section 4.)

- Dental anesthesia for Members over age nine (9) and/or Members with a developmental disability or high-risk medical condition, as determined by a licensed Physician, which places such a person at serious risk.

Note: Anesthesia and Hospitalization charges for dental care are covered for a Member who:

a. is a child under age nine (9);
b. is severely disabled or otherwise suffers from a developmental disability, or
c. has a high risk medical condition(s), as determined by a licensed Physician, which places such a person at serious risk.

Not Covered:

- *Natural teeth replacements including crowns, bridges, braces or implants*
- *Osseointegrated implant surgery (dental implants)*
- *Extraction of wisdom teeth*
- *Hospitalization for extraction of teeth if not otherwise specified as Covered in this Certificate of Insurance*
- *Dental x-rays or dental appliances*
- *Shortening of the mandible or maxillae for cosmetic purposes*
- *Services and supplies related to ridge augmentation, implantology, and preventive vestibuloplasty*
- *Dental appliances of any sort, including but not limited to bridges, braces, and retainers (except for appliances for treatment of TMJ/TMD)*

Section 6. Limited and Non-Covered Services

This section describes services that are subject to limitations or **NOT** covered under this Contract. The Plan is not responsible for payment of non-covered or excluded benefits.

General Exclusions

1. Health Care Services provided either before the effective date of the Member's coverage with the Plan or after the Member's coverage is terminated
2. Health Care Services performed by any Provider who is a Member of the Member's immediate family, including any person normally residing in the Member's home. This exclusion does not apply in those areas in which the immediate family member is the only Provider in the area. If the immediate family member is the only Participating Provider in the area, the Member may go to a Non-Participating Provider and receive In-Network coverage (Section 4). If the immediate family member is not the only Participating Provider in the area, the Member must go to another Participating Provider in order to receive coverage at the in Network level.
3. Health Care Services Covered By Any Governmental Agency/Unit for military service-related injuries/diseases, unless applicable law requires the Plan to provide primary coverage for the same
4. Health Care Services for injury or disease due to voluntary participation in a riot, unless source of injury is a result of domestic violence or a medical condition
5. Health Care Services for sickness or injury sustained in the commission of a felony, unless source of injury is a result of domestic violence or a medical condition
6. Health Care Services that the Plan determines are not Medically Necessary
7. Experimental and Investigational Services not part of an Approved Clinical Trial
8. Services that are not Health Care Services
9. Complications from a non-covered procedure or service
10. Charges for telephone calls to or from a Physician, Hospital or other medical Practitioner and/or Provider or electronic consultations
11. Services not performed in the most cost-efficient setting appropriate for the condition based on medical standards and accepted practice parameters of the community, or provided at a frequency other than that accepted by the medical community as medically appropriate
12. Charges for professional sign language and foreign language interpreter services
13. Charges for duplicating and obtaining medical records from *Non-Participating Providers* unless requested by the Plan
14. Charges for sales tax, mailing, interest and delivery
15. Charges for services determined to be duplicate services by the Plan Chief Medical Officer or designee
16. Charges that exceed the *Reasonable Costs* for Non-Participating Providers
17. Services to assist in activities of daily living
18. Alternative treatment therapies including, but not limited to: acupuncture, acupressure, biofeedback, chelation therapy, massage therapy unless covered per plan guidelines under Women's Health and Cancer Rights Act of 1998 (WHCRA) for mastectomy/lymphedema treatment, naturopathy, homeopathy, holistic medicine, hypnotism, hypnotherapy, hypnotic anesthesia, or therapeutic touch
19. Education Programs or Tutoring Services (not specifically defined elsewhere) including, but not limited to, education on self-care or home management
20. Lifestyle Improvement Services, such as physical fitness programs, health or weight loss clubs or clinics
21. Services by a vocational residential rehabilitation center, a community reentry program, halfway house or group home
22. Any services or supplies for the treatment of obesity that do not meet the Plan's medical necessity coverage guidelines, including but not limited to: dietary regimen (except as related to covered nutritional counseling) nutritional supplements or food supplements; and weight loss or exercise programs
23. Gender reassignment surgery
24. Sequela, which are primarily cosmetic that occur secondary to a weight loss procedure (e.g., Panniculectomy, breast reduction or reconstruction).
25. Incidental cholecystectomy performed at the time of weight loss surgery
26. Cosmetic Services and/or supplies to repair or reshape a body structure primarily for the improvement of a Member's appearance or psychological well-being or self-esteem, including but not limited to, breast augmentation, treatment of gynecomastia and any related reduction services, skin disorders, rhinoplasty, liposuction, scar revisions, and cosmetic dental services
27. Food items for medical nutrition therapy (except as specifically allowed in the Covered Benefits Section of this Certificate of Insurance).
28. Any fraudulently billed charges or services received under fraudulent circumstances.
29. Genetic testing except as required by the evidence-based services that have a rating of "A" or "B" in the current recommendations of the United States Preventive Services Task Force.
30. Never Events, Avoidable Hospital Conditions, or Serious Reportable Events. Participating Providers are not permitted to bill Members for services related to such events.
31. Autopsies, unless the autopsy is at the request of the Plan in order to settle a dispute concerning provision or payment of benefits. The autopsy will be at the Plan's expense.
32. Iatrogenic condition, illness, or injury as a result of mistakes made in medical treatment, such as surgical mistakes, prescribing or dispensing the wrong medication or poor hand writing resulting in a treatment error. Charges related to Iatrogenic illness or injury are not the responsibility of the Member.
33. Elective health services received outside of the United States.
34. Transplants and pre and post-transplant services at Non-Participating Center Of Excellence Facilities; and
35. Health Care Services ordered by a court or as a condition of parole or probation

Special Situations Affecting Coverage

Neither the Plan, nor any Participating Provider, shall have any liability or obligation because of a delay or failure to provide services as a result of the following circumstances:

a. Complete or partial destruction of the Plan's facilities;
b. Declared or undeclared acts of War or Terrorism;
c. Riot;
d. Civil insurrection;
e. Major disaster or unforeseen natural events which materially interfere with the ability to provide Health Care Services;
f. Disability of a significant portion of the Participating Providers;
g. Epidemic or the inability to obtain vaccines or medicines due to circumstances beyond the control of the Plan; or
h. A labor dispute not involving the Plan Participating Providers, the Plan will use its best efforts to arrange for the provision of Covered Services within the limitations of available facilities and personnel. If provision or approval of Covered Services under this Contract is delayed due to a labor dispute involving the Plan or Participating Providers, Non-Emergency Care may be deferred until after resolution of the labor dispute.

Additionally, non-Emergency care may be deferred until after resolution of the above circumstances.

Services Covered By Other Payors

The following are excluded from coverage:

1. Health services for which other coverage is either (1) required by federal, state or local law to be purchased or provided through other arrangements or (2) has been made available to and was purchased by the Covered Person. Examples include coverage required by workers' compensation, no-fault auto insurance, medical payments coverage or similar legislation.
   The Plan is not issued in lieu of nor does it affect any requirements for coverage by Workers' Compensation. This Plan contains a limitation which states that health services for injuries or sickness which are job, employment or work related for which benefits are provided or payable under any Workers' Compensation or Occupational Disease Act or Law, are excluded from coverage by the Plan. However, if benefits are paid by the Plan and it is determined that the Member is eligible to receive Workers' Compensation for the same incident; the Plan has the right to recover any amounts paid. As a condition of receiving benefits on a contested work or occupational claim, Member agrees to reimburse the Plan the full amount that the Plan has paid for Health Care Services when entering into a settlement or compromise agreement relating to compensation for Health Care Services covered by Workers' Compensation, or as part of any Workers' Compensation Award. The Plan reserves its right to recover against Member even though:
   a. The Workers' Compensation benefits are in dispute or are made by means of settlement or compromise; or
   b. No final determination is made that the injury or sickness was sustained in the course of or resulted from employment;
   c. The amount of Workers' Compensation for medical or health care is not agreed upon or defined by Member or the Workers' Compensation carrier; or
   d. The medical or health care benefits are specifically excluded from the Workers' Compensation settlement or compromise.

   Member will not enter into a compromise or hold harmless agreement relating to any work related claims paid by the Plan, whether or not such claims are disputed by the Workers' Compensation insurer, without the express written agreement of the Plan.
2. Health Care Services received directly from Providers employed by or directly under contract with the Member's employer, mutual benefit association, labor union, trust, or any similar person or Group.
3. Health Care Services for injury or sickness for which there is other non-Group insurance providing medical payments or medical expense coverage, regardless of whether the other coverage is primary, excess, or contingent to the Plan. If the benefits subject to this provision are paid for or provided by the Plan, the Plan may exercise its Rights of Subrogation.
4. Health Care Services for conditions that under the laws of This State must be provided in a governmental institution.
5. Health Care Services covered by any governmental health benefit program such as Medicare, Medicaid, ESRD and TRICARE, unless applicable law requires the Plan to provide primary coverage for the same.

Services and payments that are the responsibility of Member

1. Out-of-pocket costs, including Copays, Deductibles, and Coinsurance are the responsibility of the Member in accordance with the Summary of Benefits and Coverage and Summary of Pharmacy Benefits. Additionally, the Member is responsible to the Provider for payment for Non-Covered Services;
2. Finance charges, late fees, charges for missed appointments and other administrative charges; and
3. Services for which a Member is neither legally nor as customary practice required to pay in the absence of a Group health plan or other coverage arrangement.

Section 7. How Services Are Paid By The Plan

Reimbursement of Charges by Participating Providers

When you see Participating Providers, receive services at Participating Providers and facilities, or obtain your prescription medications at Network pharmacies, you will not have to file claims. You must present your current identification card and pay any deductible/coinsurance amount due.

When a Member receives Covered Services from a Participating Provider, the Plan will pay the Participating Provider directly, and the Member will not have to submit claims for payment. The Member's only payment responsibility, in this case, is to pay the Participating Provider, at the time of service, any Deductible or Coinsurance amount, which is required for that service. Participating Providers agree to accept either Sanford Health Plan's payment arrangements or its negotiated contract amounts.

Time Limits. Participating Providers must file claims to the Plan within *one hundred eighty (180)* days after the date that the cost was incurred. If the Member fails to show his/her Plan ID card at the time of service, then the Member may be responsible for payment of claim after Practitioner and/or Provider's timely filing period of *one hundred eighty (180)* days has expired.

In any event, the claim must be submitted to the Plan no later than *one hundred eighty (180)* days after the date that the cost was incurred, unless the claimant was legally incapacitated.

Reimbursement of Charges by Non-Participating Providers

Sanford Health Plan does not have contractual relationships with Non-Participating Practitioner and/or Providers and they may not accept the Plan's payment arrangements. In addition to any Deductible or Coinsurance amount, which is required for that service, Members are responsible for any difference between the amount charged and the Plan's payment for covered services. Non-Participating Practitioner and/or Providers are reimbursed the Maximum Allowed Amount, which is the lesser of (a) the amount charged for a covered service or supply, or (b) Reasonable Costs.

You may need to file a claim when you receive services from Non-Participating Practitioner and/or Providers. Sometimes, Non-Participating Practitioners and/or Providers submit a claim to us directly. Check with the Practitioner and/or Provider to make sure they are submitting the claim. You are responsible for making sure claim is submitted to the Plan within one-hundred-eighty (180) days after the date that the cost was incurred. **If you, or the Non-Participating Practitioner and/or Provider, does not file the claim within one-hundred-eighty (180) days after the date that the cost was incurred you will be responsible for payment of the claim.**

If you need to file the claim, here is the process:
The Member must give the Plan written notice of the costs to be reimbursed. Claim forms are available from the Plan to aid in this process. Bills and receipts should be itemized and show:

- Covered Member's name and ID number;
- Name and address of the Practitioner and/or Provider or Facility that provided the service or supply;
- Dates Member received the services or supplies;
- Diagnosis;
- Type of each service or supply;
- The charge for each service or supply;
- A copy of the explanation of benefits, payments, or denial from any primary payer – such as the Medicare Summary Notice (MSN); and
- Receipts, if you paid for your services.

Health Care Services Received Outside of the United States
Covered services for medically necessary Emergency and Urgent care services received in a foreign country are covered at the In-Network level. There is no coverage for elective health care services if a Member travels to another country for the purpose of seeking medical treatment outside the United States.

Time Limits. Claims must be submitted to the Plan within *one-hundred-eighty (180)* days after the date that the cost was incurred. If you, or the Non-Participating Practitioner and/or Provider, file the claim after the one-hundred-eighty (180) timely-filing limit has expired, you will be responsible for payment of the claim.

Submit your claims to: Sanford Health Plan/ATTN: NDPERS, PO Box 91110, Sioux Falls, SD 57109-1110

Timeframe for Payment of Claims

The payment for reimbursement of the Member's costs will be made within *fifteen (15)* days of when the Plan receives a complete written claim with all required supporting information.

When a Member receives Covered Services from a Non-Participating Provider and payment is to be made according to Plan guidelines, the Plan will arrange for direct payment to either the Non-Participating Provider or the Member, per Plan policy. If the Provider refuses direct payment, the Member will be reimbursed for the Reasonable Costs of the services in accordance with the terms of This Contract. The Member will be responsible for any expenses that exceed Reasonable Costs, as well as any Deductible or Coinsurance required for the Covered Service.

When we need additional information

Please reply promptly when we ask for additional information. We may delay processing or deny your claim if you do not respond.

Member Bill Audit Program

Upon receiving notice of a claims payment, or Explanation of Benefits (EOB), from Sanford Health Plan, Members are encouraged to audit their medical bills and notify the Plan of any services which are improperly billed or of services that the Member did not receive.

If, upon audit of a bill, an error of $40 or more is found, the Member will receive a minimum payment of $20 or 50% of the resulting savings for paid Covered Services up to a maximum payment of $500.

To obtain payment through the Member Bill Audit Program, the Member must complete a *Member Bill Audit Refund Request Form*. To obtain a form, sign into your account at www.sanfordhealthplan.com/memberlogin or call Sanford Health Plan Member Services toll-free at (800) 499-3416 | TTY/TDD: (877) 652-1844 *(toll-free)* and request a form be mailed to you.

Note: This program does not apply when the NDPERS Benefit Plan is the secondary payor on a claim. For more information on claims with more than one payor, see Section 9, *Coordination of Benefits*.

Section 8. Problem Resolution

Member Appeal Procedures

Sanford Health Plan makes decisions in a timely manner to accommodate the clinical urgency of the situation and to minimize any disruption in the provision of health care. A Member, health care Practitioner and/or Provider with knowledge of the Member's medical condition, a Member's Authorized Representative, or an attorney have the right to file a complaint or an appeal of any Adverse Determination by Sanford Health Plan. The Member or his/her legal guardian may designate in writing to Sanford Health Plan an Authorized Representative to act on his/her behalf. This written designation of representation from the Member should accompany the request. For Expedited Appeals, a health care practitioner with knowledge of the Member's condition (e.g., treating practitioner) may act as the Member's authorized representative.

For members who request language services, Sanford Health Plan will provide service in the requested language through an interpreter or translated documents to help members register a complaint or appeal and to notify members about their complaint or appeal.

Language Access Services:

Spanish (Español): Para obtener asistencia en Español, llame al (800) 892-0675 *(toll-free)*.
Tagalog (Tagalog): Kung kailangan ninyo ang tulong sa Tagalog tumawag sa (800) 892-0675 *(toll-free)*.
Chinese (中文): 如果需要中文的帮助， 请拨打这个号码 (800) 892-0675 *(toll-free)*.
Navajo (Dine): Dinek'ehgo shika at'ohwol ninisingo, kwiijigo holne' (800) 892-0675 *(toll-free)*.

A TTY/TDD line is also available toll-free at (877) 652-1844 for members who are deaf, hard of hearing or speech-impaired.

Definitions

Adverse Determination: Means a denial, reduction or termination of, or a failure to provide or make payment (in whole or in part) for a benefit, including any such denial, reduction, termination, or failure to provide or make payment (for pre-service or post-service claims) that is based on:

1. A determination of an individual's eligibility to participate in a plan;
2. A determination that a benefit is not a Covered Benefit;
3. The imposition of a source-of-injury exclusion, network exclusion, application of any utilization review, or other limitation on otherwise covered benefits;
4. A determination that a benefit is Experimental, Investigational or not Medically Necessary or appropriate; or
5. A rescission of coverage. Only an act, practice, or omission that constitutes fraud or intentional misrepresentations of material fact, made by an applicant for health insurance coverage may be used to void application or Certificate of Insurance and deny claims.

Appeal: a request to change a previous Adverse Determination made by Sanford Health Plan.

Inquiry: A telephone call regarding eligibility, plan interpretation, plan policies and procedures, or plan design. It is the policy of Sanford Health Plan to address Member and Practitioner and/or Provider inquiries through informal resolution over the telephone whenever possible. If the resolution is not satisfactory to the inquirer, he or she will be instructed of his or her rights to file a verbal or written Complaint.

Complaint: An oral or written expression of dissatisfaction. It is the policy of Sanford Health Plan to make reasonable efforts to resolve Member and Practitioner and/or Provider Complaints. A process has been established for Members (or their designees) and Practitioners and/or Providers to use when they are dissatisfied with the Plan, its Practitioners and/or Providers, or processes. Examples of Complaints are eligibility issues; coverage denials, cancellations, or non-renewals of coverage; administrative operations; and the quality, timeliness, and appropriateness of health care services provided.

Complainant: This is a Member, applicant, or former Member or anyone acting on behalf of a Member, applicant, or former Member, who submits a Complaint. The Member and his/her legal guardian may designate in writing to Sanford Health Plan an Authorized Representative to act on his/her behalf. This written designation of representation from the Member should accompany the Complaint.

External Review: An External Review is a request for an Independent, External Review of a medical necessity final determination made by Sanford Health through its External Appeals process.

Urgent Care Situation: A degree of illness or injury that is less severe than an Emergency Condition, but requires prompt medical attention within twenty-four (24) hours. An Urgent care request means a request for a health care service or course of treatment with respect to which the time periods for making a non-Urgent Care Request determination could:

a. Seriously jeopardize the life or health of the Member or the ability of the Member to regain maximum function, based on a Prudent Layperson's judgment; or
b. In the opinion of a Practitioner with knowledge of the Member's medical condition, would subject the Member to severe pain that cannot be adequately managed without the health care service or treatment that is the subject of the request.

In determining whether a request is "Urgent," the Plan shall apply the judgment of a Prudent Layperson as defined in Section 10. A Practitioner, with knowledge of the Member's medical condition, who determines a request to be "Urgent," shall have such a request be treated as an Urgent Care Request.

Complaint Procedure

A Member has the right to file a Complaint either by telephone or in writing to the Plan. Member Services will make every effort to investigate and resolve all Complaints. Member Services can be reached at (800) 499-3416 *(toll-free)*.

Oral Complaints: A complainant may orally submit a Complaint to the Plan. If the oral Complaint is not resolved to the complainant's satisfaction within *ten (10) business days* of receipt of the Complaint, the Plan will provide a Complaint form to the complainant, which must be completed and returned to the Plan for further consideration. Upon request, Member Services will provide assistance in submitting the Complaint form.

Written Complaints: A complainant can seek further review of a Complaint not resolved by phone by submitting a written Complaint form. A Member, or his/her Authorized Representative may send the completed Complaint form, including comments, documents, records and other information relating to the Complaint, the reasons they believe they are entitled to benefits and any other supporting documents to: Sanford Health Plan, ATTN: NDPERS/Member Services, PO Box 91110, Sioux Falls, SD 57109-1110

Member Services will notify the complainant within *ten (10) business days* upon receipt of the Complaint form, unless the Complaint has been resolved to the complainant's satisfaction within those *ten (10) business days*.

Upon request and at no charge, the complainant will be given reasonable access to and copies of all documents, records and other information relevant to the Complaint.

Member Services will investigate and review the Complaint and notify the complainant of Sanford Health Plan's decision in accordance with the following timelines:

- A decision and written notification on the Complaint will be made to the complainant, his or her Practitioners and/or Providers involved in the provision of the service within *thirty (30) calendar days* from the date the Plan receives your request.
- In certain circumstances, the time period may be extended by up to fourteen (14) days upon agreement. In such cases, the Plan will notify the complainant in advance, of the reasons for the extension.

Any complaints related to the quality of care received are subject to practitioner review. If the complaint is related to an Urgent clinical matter, it will be handled in an expedited manner and a response will be provided within seventy-two (72) hours.

If the complaint is not resolved to the Member's satisfaction, the Member, or his/her Authorized Representative, has the right to appeal any adverse determination made by Sanford Health Plan. Appeal Rights may be requested by calling Member Services toll-free at (800) 499-3416.

All notifications described above will comply with applicable law. A complete description of your Appeal rights and the Appeal process will be included in your written response.

Types of Appeals

Types of appeals include:

- A **Prospective (Pre-Service) Appeal** is a request to change an Adverse Determination that the Plan must approve in whole or in part in advance of the Member obtaining care or services.
- A **Retrospective (Post-Service) Appeal** is a request to change an Adverse Determination for care or services already received by the Member.
- An **Expedited Appeal for Urgent Care** is a request to change a previous Adverse Determination made by Sanford Health Plan for an Urgent Care Request. If the Member's situation meets the definition of Urgent, their review will generally be conducted within 72 hours.

Continued Coverage for Concurrent Care

A Member is entitled to continued coverage for concurrent care pending the outcome of the appeals process; benefits for an ongoing course of treatment cannot be reduced or terminated without providing advance notice sufficient to allow the claimant to appeal and obtain a review determination before the benefit is reduced or terminated. Review determinations would be made within *twenty-four (24)* hours.

Audit Trails

Audit trails for Complaints, Adverse Determinations and Appeals are provided by the Plan's Information System and an Access database which includes documentation of the Complaints, Adverse Determination and/or Appeals by date, service, procedure, substance of the Complaint/Appeal (including any clinical aspects/details, and reason for the Complaint, Adverse Determination and/or Appeal. The Appeal file includes telephone notification, and documentation indicating the date; the name of the person spoken to; the Member; the service, procedure, or authorization/approval; and the date of the service, procedure, or Adverse Determination and reason for determination. If the Plan indicates authorization/approval by use of a number, the number must be called the "authorization number."

Internal Appeal Procedure

Filing Deadline

Appeals may be made for up to 180 days from notification of the Adverse Determination.

Within *one-hundred-eighty (180) days* after the date of receipt of a notice of an Adverse Determination sent to a Member or the Member's Authorized Representative (as designated in writing by the Member), the Member or their Authorized Representative may file an Appeal with the Plan requesting a review of the Adverse Determination.

To Appeal, the Member may sign into their account at www.sanfordhealthplan.com/memberlogin and complete the "Appeal Filing Form" under the *Forms* tab. The Member or their Authorized Representative may also contact the Plan by sending a written Appeal to the following address: Sanford Health Plan, ATTN: NDPERS, PO Box 91110, Sioux Falls, SD 57109-1110 or calling phone: (800) 499-3416 | TTY/TDD: (877) 652-1844 *(toll-free)*.

If the Member, Authorized Representative, Practitioner/Provider, and/or attorney, has questions, they are encouraged to contact the Plan toll-free at (800) 499-3416 | TTY/TDD: (877) 652-1844 *(toll-free)*. Member Services is available to help with understanding information and processes. Alternate formats are also available and translation is available free of charge for written materials and Member communication with the Plan.

Appeal Rights

If the Member or their authorized representative (as designated in writing by the Member) files an Appeal for an Adverse Determination, the following Appeal Rights apply:

1. The Member shall have the opportunity to submit written comments, documents, records and other information relating to the claim for benefits. Members do not have the right to attend or have a representative attend the first level review.
2. The Member shall be provided, free of charge, with any new or additional evidence considered, relied upon, or generated by, or at the direction of, Sanford Health Plan in connection with the claim; and such evidence shall be provided as soon as possible and sufficiently in advance of the date on which the notice of final internal Adverse Determination is required to be provided to give the Member a reasonable opportunity to respond prior to that date.
3. Confirm with the Member whether additional information will be provided for appeal review. The Plan will document if additional information is provided or no new information is provided for appeal review.
4. Before Sanford Health Plan can issue a final Adverse Determination based on a new or additional rationale, the Member must be provided, free of charge, with the rationale; the rationale must be provided as soon as possible and sufficiently in advance of the date on which the notice of Adverse Determination is required to be provided and give the Member a reasonable opportunity to respond prior to the date.
5. The Member shall be provided, upon request and free of charge, reasonable access to, and copies of, all documents, records and other information relevant to the Member's initial request.
6. The review shall take into account all comments, documents, records, and other information submitted by the Member relating to the claim, without regard to whether such information was submitted or considered in the initial benefit determination.
7. Full and thorough investigation of the substance of the Appeal, including any aspects of clinical care involved, will be coordinated by the Member Services Manager.
8. The Plan will document the substance of the Appeal, including but not limited to, the Member's reason for appealing the previous decision and additional clinical or other information provided with the appeal request. The Plan will also document any actions taken, including but not limited to, previous denial or appeal history and follow-up activities associated with the denial and conducted before the current appeal.
9. The review shall not afford deference to the initial Adverse Determination and shall be conducted by a named Plan representative who is neither the individual who made the Adverse Determination that is the subject of the appeal, nor the subordinate of such individual.
10. In deciding an appeal of any Adverse Determination that is based in whole or in part on a medical judgment, including determinations with regard to whether a particular treatment, medication or other item is Experimental, Investigational, or not Medically Necessary or appropriate, the Plan shall consult with a health care professional (same-or-similar specialist) who has appropriate training and experience in the field of medicine involved in the medical judgment. The health care Practitioner and/or Provider engaged for purposes of a consultation under this paragraph shall be an individual who is neither an individual who was consulted in connection with the Adverse Determination that is the subject of the appeal, nor the subordinate of any such individual.
11. The Plan shall identify the medical or vocational experts whose advice was obtained on behalf of the Plan in connection with a Member's Adverse Determination, without regard to whether the advice was relied upon in making the benefit request determination.
12. In order to ensure the independence and impartiality of the persons involved in making claims determinations and appeals decisions, all decisions regarding hiring, compensation, termination, promotion, or other similar matters with respect to any individual (such as a claims adjudicator or medical expert) shall not be made based upon the likelihood that the individual will support the denial of benefits.
13. The attending Practitioner and/or Provider and the Member will be made aware of their responsibility for submitting the documentation required for resolution of the Appeal within three (3) business days of receipt of the Appeal. Sanford Health Plan will provide notice of any Adverse Determination in a manner consistent with applicable federal regulations.

For Prospective (Pre-service) Appeals: the Plan will notify the Member or their Authorized Representative and any Practitioner and/or Providers involved in the Appeal in writing or electronically within thirty (30) calendar days of receipt of the Appeal.

For Retrospective (Post-service) Appeals: the Plan will notify the Member or their Authorized Representative and any Practitioner and/or Providers involved in the Appeal in writing or electronically within sixty (60) calendar days of receipt of the Appeal.

Expedited Internal Appeal Procedure

An **Expedited Appeal Procedure** is used when the condition presents as part of an Urgent Care Situation, as defined previously in this Certificate of Insurance.

An expedited review involving **Urgent Care Requests for Adverse Determinations of Pre-service or Concurrent** claims must be utilized if the Member or Practitioner and/or Provider acting on behalf of the Member believe that an expedited determination is warranted. All of the procedures of a standard review described apply. In addition, for an Expedited Appeal, the request for an expedited review may be submitted. This can be done orally or in writing and the Plan will accept all necessary information by telephone or electronically. In such situations, the Practitioner who made the initial Adverse Determination may review the appeal and overturn the previous decision.

The determination will be made and provided to the Member and those Practitioners and/or Providers involved in the appeal via oral notification by the Utilization Management Department as expeditiously as the Member's medical condition requires but no later than within seventy-two (72) hours of receipt of the request. Sanford Health Plan will notify you orally by telephone or in writing by facsimile or via other expedient means. The Member and those Practitioners and/or Providers involved in the appeal will receive written notification within three (3) calendar days of the telephone notification. If your claim is no longer considered Urgent, it will be handled in the same manner as a Non-Urgent Pre-service or a Non-Urgent Post-Service Appeal, depending upon the circumstances.

If the Expedited Review is a Concurrent Review determination, the service must be continued without liability to the Member until the Member or the representative has been notified of the determination.

Written Notification Process for Internal Appeals

The written notification from Sanford Health Plan for an Appeal of an Adverse Determination will include the following:

1. The results and date of the Appeal Determination;
2. The specific reason for the Adverse Determination in easily understandable language;
3. The titles and qualifications, including specialty, of the person or persons participating in the first level review process (Reviewer names are available upon request);
4. Reference to the evidence, benefit provision, guideline, and/or protocol used as the basis for the decision and notification that the Member on request can have a copy of the actual benefit provisions, guidelines, and protocols free of charge;
5. Notification the Member can receive, upon request and free of charge, reasonable access and copies of all documents, records and other information relevant to the Member's benefit request;
6. Statement of the reviewer's understanding of the Member's Appeal;
7. The Reviewer's decision in clear terms and The Contract basis or medical rationale in sufficient detail for the Member to respond further;
8. If the Adverse Determination is based on medical necessity, notification and instructions on how the Practitioner and/or Provider can contact the Practitioner and/or Provider or appropriate specialist to discuss the determination;
9. If the Adverse Determination is based on medical necessity or an Experimental or Investigational treatment or similar exclusion or limit, either an explanation of the scientific or clinical judgment for making the determination, applying the terms of The Plan to the Member's medical circumstances or a statement that an explanation will be provided to the Member free of charge upon request;
10. If applicable, instructions for requesting:
    a. A copy of the rule, guideline, protocol, or other similar criterion relied upon in making the Adverse Determination; or
    b. The written statement of the scientific or clinical rationale for the determination;
11. For Adverse Determinations of **Prospective (Pre-service) or Retrospective (Post-service)** Review, a statement indicating:
    a. The written procedures governing the voluntary review, including any required timeframe for the review; and
    b. The Member's right to bring a civil action in a court of competent jurisdiction;
12. Notice of the Member's right to contact the North Dakota Insurance Commissioner for assistance at any time at:
    North Dakota Insurance Department
    600 E. Boulevard Ave.
    Bismarck, ND 58505-0320
    Email: insurance@nd.gov
    Consumer hotline: (800) 247-0560 *(toll-free)*
    TTY: (800) 366-6888 *(toll-free)*
13. Notice of the right to initiate the External Review process for Adverse Determinations based on medical necessity. Refer to "Independent, External Review of Final Determinations" in this Section for details on this process. Final Adverse Determination letters will contain information on the circumstances under which Appeals are eligible for External Review and information on how the Member can seek further information about these rights.
14. If the Adverse Determination is completely overturned, the decision notice must state the decision and the date.

Independent, External Review of Final Determinations (Denials)

Standard External Review Request

Members may file a request for External Review with the Plan or with the North Dakota Commissioner of Insurance at:

North Dakota Insurance Department
600 E. Boulevard Ave.
Bismarck, ND 58505-0320
Email: insurance@nd.gov
Consumer hotline: (800) 247-0560 *(toll-free)*
TTY: (800) 366-6888 *(toll-free)*

For independent, External Review of a final Adverse Determination, the Plan will provide:

1. Members the right to an independent, third party, binding review whenever they meet the following eligibility criteria:
    a. The Member is Appealing an Adverse Determination that is based on medical necessity (benefits Adverse Determinations are not eligible);
    b. Sanford Health Plan has completed the internal Appeal review and its decision is unfavorable to the Member, or has exceeded the time limit for making a decision, or Sanford Health Plan has elected to bypass the available internal level of Appeal with the Member's permission;
    c. The request for independent, External Review is filed within four (4) months of the date that the Plan's Adverse Determination was made.
2. Notification to Members about the independent, External Appeal program and decision are as follows:
    a. General communications to Members, at least annually, to announce the availability of the right to independent, External Review.
    b. Letters informing Members and Practitioners of the upholding of an Adverse Determination covered by this standard including notice of the independent, External Appeal rights, directions on how to use the process, contact information for the independent, External Review organization, and a statement that the Member does not bear any costs of the independent, External Review organization, unless otherwise required by state law.
    c. The External Review organization will communicate its decision in clear terms in writing to the Member and the Plan. The decision will include:
        i. a general description of the reason for the request for external review;
        ii. the date the independent review organization received the assignment from the Plan to conduct the external review;
        iii. the date the external review was conducted;
        iv. the date of its decision;
        v. the date the external review was conducted;
        vi. the date of its decision;

vii. the principal reason(s) for the decision, including any, medical necessity rationale or evidence-based standards that were a basis for its decision; and

viii. the list of titles and qualifications, including specialty, of individuals participating in the appeal review, statement of the reviewer's understanding of the pertinent facts of the appeal and reference to evidence or documentation used as a basis for the decision.

d. The External Review organization must also notify the Member how and when Members receive any payment or service in the case of overturned Adverse Determinations.

3. Conduct of the External Appeal Review program as follows:
   a. Within five (5) business days following the date of receipt of the external review request, the Plan shall complete a preliminary review of the request to determine whether:
      i. The Member is or was a covered person in the health benefit plan at the time the health care service was requested or, in the case of a Retrospective Review, was a covered person in the Plan at the time the health care service was provided;
      ii. The health care service that is the subject of the Adverse Determination is a covered service under the Member's health benefit plan, but for a determination by the health carrier that the health care service is not covered because it does not meet the Plan's requirements for medical necessity, appropriateness, health care setting, or level of care or effectiveness;
      iii. The Member has exhausted the Plan's internal Appeal process unless the Member is not required to exhaust the Plan's internal Appeal process; and
      iv. The Member has provided all the information and forms required to process an external review.
   b. Within one (1) business day after completion of the preliminary review, the North Dakota Insurance Department (NDID) shall notify the Member and, if applicable, the Member's authorized representative in writing whether the request is complete and eligible for external review.
      i. If the request is not complete, the NDID shall inform the Member and, if applicable, the Member's authorized representative in writing and include in the notice what information or materials are needed to make the request complete; or if the request is not eligible for external review, the NDID shall inform the Member and, if applicable, the Member's authorized representative in writing and include the reasons for its ineligibility. If the Independent Review Organization upheld the denial, there is no further review available under this appeals process. However, you may have other remedies available under State or Federal law, such as filing a lawsuit.
      ii. If the request is complete, within one (1) business day after verifying eligibility, the NDID shall assign an independent review organization and notify in writing the Member, and, if applicable, the Member's authorized representative of the request's eligibility and acceptance for external review. The Member may submit in writing to the assigned Independent Review Organization within five (5) business days following the date of receipt of the notice provided by the NDID any additional information that the independent review organization shall consider when conducting the external review. The independent review organization is not required to, but may, accept and consider additional information submitted after ten (10) business days.
      iii. Within five (5) business days after the date the NDID determines the request is eligible for external review, of receipt, the NDID shall provide to the assigned independent review organization the documents and any information considered in making the adverse determination or final adverse determination.
   c. The North Dakota Insurance Department contracts with the independent, external review organization that:
      i. is accredited by a nationally recognized private accrediting entity;
      ii. conducts a thorough review in which it considers all previously determined facts, allows the introduction of new information, considers and assesses sound medical evidence, and makes a decision that is not bound by the decisions or conclusions of the Plan or determinations made in any prior appeal.
      iii. completes their review and issues a written final decision for non-Urgent appeals within forty-five (45) calendar days of the request. For clinically Urgent Care appeals, the review and decision will be made and orally communicated as expeditiously as the Member's medical condition or circumstances requires, but in no event more than seventy-two (72) hours after the date of receipt of the request for an expedited external review. Within forty-eight (48) hours after the date of providing the oral notification, the assigned independent review organization will provide written confirmation of the decision to the Member, or if applicable, the Member's authorized representative, and their treating Practitioner and/or Provider.
      iv. has no material professional, familial or financial conflict of interest with Sanford Health Plan.
   d. With the exception of exercising its rights as party to the appeal, Sanford Health Plan must not attempt to interfere with the Independent Review Organization's proceeding or appeal decision.
   e. Sanford Health Plan will provide the Independent Review Organization with all relevant medical records as permitted by state law, supporting documentation used to render the decision pertaining to the Member's case (summary description of applicable issues including the Plan's decision, criteria used and clinical reasons, utilization management criteria, communication from the Member to the Plan regarding the appeal), and any new information related to the case that has become available since the internal appeal decision.
   f. The Member is not required to bear costs of the Independent Review Organization's review, including any filing fees.
   g. The Member or his/her legal guardian may designate in writing a representative to act on his/her behalf. A Practitioner and/or Provider may not file an Appeal without explicit, written designation by the Member.
   h. The Independent Review Organization's decision is final and binding to the Plan and the Plan implements the Independent Review Organization's decision within the timeframe specified by the Independent Review Organization. The decision is not binding to the Member, because the Member has legal rights to pursue further appeals in court if they are dissatisfied with the outcome. However, a Member may not file a subsequent request for external review involving the same adverse determination for which the Member has already received an external review decision.

4. Sanford Health Plan maintains and tracks data on each appeal case, including descriptions of the denied item(s), reasons for denial, Independent, External Review organization decisions and reasons for decisions. Sanford Health Plan uses this information in tracking and evaluating its medical necessity decision-making process and improving the quality of its clinical decision making procedures. This information is reported to the Medical Management Quality Committee when a case is resolved for discussion and plan of care or action.

Expedited External Review Requests

1. A Member or the Member's authorized representative may request an expedited external review of an adverse determination if the adverse determination involves an Urgent Care requests for Prospective (pre-service) or Concurrent Review request for which
   a. the timeframe for completion of a standard internal review would seriously jeopardize the life or health of the Member; or would jeopardize the Member's ability to regain maximum function; or
   b. in the case of a request for Experimental or Investigational services, the treating Provider certifies, in writing, that the requested health care services or treatment would be significantly less effective if not promptly initiated.
2. The Member has the right to contact the North Dakota Insurance Commissioner for assistance at any time at:
   North Dakota Insurance Department
   600 E. Boulevard Ave.
   Bismarck, ND 58505-0320
   Email: insurance@nd.gov
   Consumer hotline: (800) 247-0560 *(toll-free)*
   TTY: (800) 366-6888 *(toll-free)*
3. An expedited external review is not provided for Retrospective Adverse Determinations.
4. Immediately upon receipt of the request from the Member or the Member's Representative, the NDID shall determine whether the request is eligible for Expedited External Review. If the request is ineligible for an Expedited External Review as described in (1) above, the NDID will give notification to the Member or the Member's Representative that they may appeal to the state insurance department.
5. Upon determination that the Expedited External Review request meets the reviewability requirements, the NDID shall assign a contracted, independent review organization to conduct the expedited external review. The assigned independent review organization is not bound by any decisions or conclusions reached during the Plan's utilization review or internal appeal process.
6. The Plan will send all necessary documents and information considered in making the Adverse Determination to the assigned independent review organization electronically, by telephone, or facsimile or any other available expeditious method.
7. The independent review organization will make a decision to uphold or reverse the adverse determination and provide oral notification to the Member, and, if applicable, the Member's authorized representative, and the treating Practitioners and/or Providers as expeditiously as the Member's medical condition or circumstances requires but in no event more than *seventy-two (72)* hours after the date of receipt of the request for an expedited external review. The Member and those Practitioners and/or Providers involved in the appeal will receive written notification within *forty-eight (48)* hours of the oral notification.
8. At the same time a Member, or the Member's authorized representative, files a request for an internal Expedited Review of an Appeal involving an Adverse Determination, the Member, or the Member's authorized representative, may also file a request for an external Expedited External Review if the Member has a medical condition where the timeframe for completion of an expedited review would seriously jeopardize the life or health of the Member or would jeopardize their ability to regain maximum function; or if the requested health care service or treatment is Experimental or Investigational and the Member's treating Practitioner and/or Provider certifies in writing that the recommended or requested health care service or treatment that is the subject of the Adverse Determination would be significantly less effective if not promptly initiated.
9. Upon the Plan's receipt of the independent review organization's decision to reverse the adverse determination, the Plan shall immediately approve the coverage that was the subject of the adverse determination.

Section 9. Coordination of Benefits

Sanford Health Plan follows North Dakota Administrative Code §45-08-01.2-03 regarding Coordination of Benefits (COB). The COB provision applies when a person has health care coverage under more than one "Plan" as defined for COB purposes.

Applicability

The order of benefits determination rules govern the order in which each Plan will pay a claim for benefits. The Plan that pays first is called the primary Plan. The primary Plan must pay benefits in accordance with its Certificate of Insurance terms without regard to the possibility that another Plan may cover some expenses. The Plan that pays after the primary Plan is called the secondary Plan. The secondary Plan may reduce the benefits it pays so that payments from all Plans do not exceed 100% of the total Allowable Expense.

Definitions (for COB Purposes Only)

A. **A Plan** is any of the following that provides benefits or services for medical or dental care or treatment. If separate contracts are used to provide coordinated coverage for Members of a group, the separate contracts are considered parts of the same Plan and there is no COB among those separate contracts.

1. Plan includes: group and non-group insurance contracts, health maintenance organization (HMO) contracts, closed panel Plans or other forms of group or group type coverage (whether insured or uninsured); medical care components of long-term care contracts, such as skilled nursing care; medical benefits under group or individual automobile contracts; and Medicare or any other federal governmental Plan, as permitted by law.
2. Plan does not include: Hospital indemnity coverage or other fixed indemnity coverage; accident-only coverage; specified disease or specified accident coverage; limited benefit health coverage, as defined by state law; school accident-type coverage; benefits for nonmedical components of long-term care policies; Medicare supplement policies; Medicaid policies; or coverage under other federal governmental Plans, unless permitted by law.

Each contract for coverage under Section A. (1) or (2) above is a separate Plan. If a Plan has two parts and COB rules apply only to one of the two, each of the parts is treated as a separate Plan.

B. **This Plan** means, in a COB provision, the part of the contract providing the health care benefits to which the COB provision applies and which may be reduced because of the benefits of other Plans. Any other part of the contract providing health care benefits is separate from this Plan.

A contract may apply one COB provision to certain benefits, such as dental benefits, coordinating only with similar benefits, and may apply another COB provision to coordinate other benefits.

C. **The order of benefit determination rules** determine whether this Plan is a primary Plan or secondary Plan when the person has health care coverage under more than one Plan. When this Plan is primary, it determines payment for its benefits first before those of any other plan without considering any other plan's benefits. When this Plan is secondary, it determines its benefits after those of another Plan and may reduce the benefits it pays so that all Plans' benefits do not exceed 100% of the total Allowable Expense.

D. **Allowable Expense** is a health care expense, including deductibles, coinsurance, that is covered at least in part by any Plan covering the person. When a Plan provides benefits in the form of services, the reasonable cash value of each service will be considered an Allowable Expense and a benefit paid. An expense that is not covered by any Plan covering the person is not an Allowable Expense.

In addition, any expense that a provider by law or in accordance with a contractual agreement is prohibited from charging a covered person is not an Allowable Expense. The following are examples of expenses that are not Allowable Expenses:

1. The difference between the cost of a semiprivate Hospital room and a private Hospital room is not an Allowable Expense, unless one of the Plans provides coverage for private Hospital room expenses.
2. If a person is covered by two or more Plans that compute their benefit payments on the basis of usual and customary fees or relative value schedule reimbursement methodology or other similar reimbursement methodology, any amount in excess of the highest reimbursement amount for a specific benefit is not an Allowable Expense.
3. If a person is covered by two or more Plans that provide benefits or services on the basis of negotiated fees, an amount in excess of the highest of the negotiated fees is not an Allowable Expense.
4. If a person is covered by one Plan that calculates its benefits or services on the basis of usual and customary fees or relative value schedule reimbursement methodology or other similar reimbursement methodology and another Plan that provides its benefits or services on the basis of negotiated fees, the primary plan's payment arrangement shall be the Allowable Expense for all Plans. However, if the provider has contracted with the secondary Plan to provide the benefit or service for a specific negotiated fee or payment amount that is different than the primary plan's payment arrangement and if the provider's contract permits, the negotiated fee or payment shall be the Allowable Expense used by the secondary Plan to determine its benefits.
5. The amount of any benefit reduction by the primary Plan because a covered person has failed to comply with the Plan provisions is not an Allowable Expense. Examples of these types of Plan provisions include second surgical opinions, Preauthorization/Prior Approval of admissions, and preferred provider arrangements.

E. **Closed Panel Plan** is a Plan that provides health care benefits to covered persons primarily in the form of services through a panel of providers who have contracted with or are employed by the Plan, and that excludes coverage for services provided by other providers, except in cases of Emergency or referral by a panel member.

F. **Custodial Parent** is the parent awarded custody by a court decree or, in the absence of a court decree, is the parent with whom the child resides more than one-half of the calendar year excluding any temporary visitation.

Order of Benefit Determination Rules

When a person is covered by two or more Plans, the rules for determining the order of benefits payments are as follows:

A. The primary Plan pays or provides its benefits according to its terms of coverage and without regard to the benefits of any other Plan.

B. (1) Except as provided in paragraph 2.(a) below, Plan that does not contain a coordination of benefits provision that is consistent with this regulation is always primary unless the provisions of both Plans state that the complying Plan is primary.
(2) Coverage that is obtained by virtue of membership in a group that is designed to supplement a part of a basic package of benefits and provides that this supplementary coverage shall be excess to any other parts of the Plan provided by the contract holder. Examples of these types of situations are major medical coverages that are superimposed over base Plan Hospital and surgical benefits, and insurance type coverages that are written in connection with a closed panel Plan to provide out-of-network benefits.

C. A Plan may consider the benefits paid or provided by another Plan in calculating payment of its benefits only when it is secondary to that other Plan.

D. Each Plan determines its order of benefits using the first of the following rules that apply:

1. Nondependent or Dependent. The Plan that covers the person other than as a Dependent, for example as an employee, Member, Certificate holder, subscriber, or retiree, is the primary Plan and the Plan that covers the person as a Dependent is the secondary Plan. However, if the person is a Medicare beneficiary and, as a result of federal law, Medicare is secondary to the Plan covering the person as a Dependent; and primary to the Plan covering the person as other than a Dependent (e.g., a retired employee); then the order of benefits between the two Plans is reversed so that the Plan covering the person as an employee, Member, Certificate holder, subscriber, or retiree is the secondary Plan and the other Plan is the primary Plan.
2. Dependent child covered under more than one Plan. Unless there is a court decree stating otherwise, when a Dependent child is covered by more than one Plan the order of benefits is determined as follows:
   (a) For a Dependent child whose parents are married or are living together, whether or not they have ever been married:
      i. The Plan of the parent whose birthday falls earlier in the calendar year is the primary Plan; or
      ii. If both parents have the same birthday, the Plan that has covered the parent the longest is the primary Plan.
   (b) For a Dependent child whose parents are divorced or separated or not living together, whether or not they have ever been married:
      i. If a court decree states that one of the parents is responsible for the Dependent child's health care expenses or health care coverage, and the Plan of that parent has actual knowledge of those terms, that Plan is primary. This rule applies to Plan years commencing after the Plan is given notice of the court decree;
      ii. If a court decree states that both parents are responsible for the Dependent child's health care expenses or health care coverage, the provisions of subparagraph a above shall determine the order of benefits;
      iii. If a court decree states that the parents have joint custody without specifying that one parent has responsibility for the health care expenses or health care coverage of the Dependent child, the provisions of subparagraph a above shall determine the order of benefits; or
      iv. If there is no court decree allocating responsibility for the Dependent child's health care expenses or health care coverage, the order of benefits for the child are as follows:
         (i) The Plan covering the Custodial Parent;
         (ii) The Plan covering the Spouse of the Custodial Parent;
         (iii) The Plan covering the non-Custodial Parent; and then
         (iv) The Plan covering the Spouse of the non-Custodial Parent.
   (c) For a Dependent child covered under more than one Plan of individuals who are the parents of the child, the provisions of subparagraph (a) or (b) above shall determine the order of benefits as if those individuals were the parents of the child.
3. Active employee or retired or laid-off employee. The Plan that covers a person is an active employee, that is, an employee who is neither laid off nor retired, is the primary Plan. The Plan covering that same person as a retired or laid-off employee is the secondary Plan. The same would hold true if a person is a Dependent of an active employee and that same person is a Dependent of a retired or laid-off employee. If the other Plan does not have this rule, and as a result, the Plans do not agree on the order of benefits, this rule is ignored. This rule does not apply if the rule labeled D.(1) can determine the order of benefits.
4. COBRA or state continuation coverage. If a person whose coverage is provided pursuant to COBRA or under a right of continuation provided by state or other federal law is covered under another Plan, the Plan covering the person as an employee, Member, subscriber, or retiree or covering the person as a Dependent of an employee, Member, subscriber, or retiree is the primary Plan and the COBRA or state or other federal continuation coverage is the secondary Plan. If the other Plan does not have this rule, and as a result, the Plans do not agree on the order of benefits, this rule is ignored. This rule does not apply if the rule labeled D.(1) can determine the order of benefits.
5. Longer or shorter length of coverage. The Plan that covered the person as an employee, Member, Certificate holder, subscriber, or retiree longer is the primary Plan and the Plan that covered the person the shorter period of time is the secondary Plan.
6. If the preceding rules do not determine the order of benefits, that Allowable Expenses shall be shared equally between the Plans meeting the definition of Plan. In addition, this Plan will not pay more than it would have paid had it been the primary Plan.

Effect of COB on the Benefits of this Plan

A. When this Plan is secondary, it may reduce its benefits so that the total benefits paid or provided by all Plans during a Plan year are not more than the total Allowable Expenses. In determining the amount to be paid for any claim, the secondary Plan will calculate the benefits it would have paid in the absence of other health care coverage and apply that calculated amount to any Allowable Expense under its Plan that is unpaid by the primary Plan. The secondary Plan may then reduce its payment by the amount so that, when combined with the amount paid by the primary Plan, the total benefits paid or provided by all Plans for the claim do not exceed the total

Allowable Expense for that claim. In addition, the secondary Plan shall credit to its Plan deductible any amounts it would have credited to its deductible in the absence of other health care coverage.

B. If a covered person is enrolled in two or more closed panel Plans and if, for any reason, including the provision of service by a non-panel provider, benefits are not payable by one closed panel Plan, COB shall not apply between that Plan and other closed panel Plans.

Right to Receive and Release Needed Information

Certain facts about health care coverage and services are needed to apply these COB rules and to determine benefits payable under this Plan and other Plans. Sanford Health Plan may get the facts it needs from or give them to other organizations or persons for the purpose of applying these rules and determining benefits payable under this Plan and other Plans covering the person claiming benefits. Sanford Health Plan need not tell, or get the consent of, any person to do this. Each person claiming benefits under this Plan must give Sanford Health Plan any facts it needs to apply those rules and determine benefits payable.

Facility of Payment

A payment made under another Plan may include an amount that should have been paid under this Plan. If it does, Sanford Health Plan may pay that amount to the organization that made that payment. That amount will then be treated as though it were a benefit paid under this Plan. Sanford Health Plan will not have to pay that amount again. The term "payment made" includes providing benefits in the form of services, in which case "payment made" means the reasonable cash value of the benefits provided in the form of services.

Right of Recovery

If the amount of the payments made by Sanford Health Plan is more than it should have paid under this COB provision, it may recover the excess from one or more of the persons it has paid or for whom it has paid; or any other person or organization that may be responsible for the benefits or services provided for the covered person. The "amount of the payments made" includes the reasonable cash value of any benefits provided in the form of services.

Coordination of Benefits with Medicare

Medicare Coordination of Benefits provisions apply when a Member has health coverage under the Plan and is enrolled in Medicare, under Parts A, B, or D. This provision applies before any other Coordination of Benefits Provision of the Plan.

If a Practitioner and/or Provider has accepted assignment of Medicare, the Plan pays the difference between what Medicare pays and the Plan's Allowable Expense.

Members with End Stage Renal Disease (ESRD)

1. The Plan has primary responsibility for the claims of a Member:
   a. Who is eligible for Medicare secondary benefits because of ESRD, and;
   b. During the Medicare coordination period of 30 months, which begins with the earlier of:
      i. the month in which a regular course of renal dialysis is initiated, or
      ii. in the case of an individual who receives a kidney transplant, the first month in which the individual became entitled to Medicare.
2. The Plan has secondary responsibility for the claims of a Member:
   a. Who is eligible for Medicare primary benefits because of ESRD, and the Medicare coordination period of thirty (30) months has expired; or
   b. Who is eligible for Medicare on the basis of age or disability when the Member becomes eligible on the basis of ESRD, and certain other conditions are met.

Section 10. Definitions of Terms We Use in this COI

Admission	Entry into a facility as an Inpatient for treatment and care when ordered by a Health Care Provider with admitting privileges. An Admission ends when a Member is discharged or released from the facility and is no longer registered as a patient. Also known as Hospitalization.
Allowance or Allowed Charge	The maximum dollar amount that payment for a procedure or service is based on as determined by Sanford Health Plan.
Ambulatory Surgical Center	A lawfully operated, public or private establishment that: a. Has an organized staff of Practitioners; b. Has permanent facilities that are equipped and operated mostly for performing surgery; c. Has continuous Practitioner services and Nursing Services when a patient is in the Facility; and d. Does not have services for an overnight stay.
Annual Enrollment	A period of time at least once a year when Eligible Group Members may enroll themselves and their Dependents in the Plan. Annual Enrollment does not pertain to non-Medicare retirees.
Approved Clinical Trial	A phase I, phase II, phase III, or phase IV clinical trial that is conducted in relation to the prevention, detection, or treatment of cancer or other life-threatening disease or condition and is one of the following: a. A federally funded or approved trial; b. A clinical trial conducted under an FDA investigational new medication application; or c. A medication trial that is exempt from the requirement of an FDA investigational new medication application.
Authorized Representative	A person to whom a covered person has given express written consent to represent the Member, a person authorized by law to provide substituted consent for a Member, a family member of the Member or the Member's treating health care professional if the Member is unable to provide consent, or a health care professional if the Member's Plan requires that a request for a benefit under the plan be initiated by the health care professional. For any Urgent Care Request, the term includes a health care professional with knowledge of the Member's medical condition.
Avoidable Hospital Conditions	Conditions that could reasonably have been prevented through application of evidence-based guidelines. These conditions are not present on admission, but present during the course of the stay. Participating Providers are not permitted to bill the Plan or Members for services related to Avoidable Hospital Conditions.
Basic Plan	The Member elects to access the health care system through a Health Care Provider that is not a part of the Preferred Provider Organization. Benefit payment will be at the Basic Plan level.
Benefit Period	A specified period of time when benefits are available for Covered Services under this Benefit Plan. A Claim for Benefits will be considered for payment only if the date of service or supply was within the Benefit Period. All benefits are determined on a Calendar Year (January 1st through December 31st) Benefit Period.
Benefit Plan	The agreement with Sanford Health Plan, including the Subscriber's membership application, Identification Card, the Benefit Plan Agreement, this Certificate of Insurance, the Benefit Plan Attachment and any supplements, endorsements, attachments, addenda or amendments
[The] Board	Means the North Dakota Public Employees Retirement System (NDPERS) board.
Calendar Year	A period of one year which starts on January 1st and ends December 31st.
Case Management	A coordinated set of activities conducted for individual patient management of chronic, serious, complicated, protracted, or other health conditions.
Claims Administrator or Claims Payor	Sanford Health Plan
Class of Coverage	The type of coverage the Subscriber is enrolled under, identifying who is eligible to receive benefits for Covered Services under this Benefit Plan. Classes of Coverage under this Benefit Plan are Single Coverage and Family Coverage.
Coinsurance Amount	A percentage of the Allowed Charge for Covered Services that is a Member's responsibility.
Coinsurance Maximum Amount	The total Coinsurance Amount that is a Member's responsibility during a Benefit Period. The Coinsurance Maximum Amount renews on January 1 of each consecutive Benefit Period
Concurrent Review	Concurrent Review is Utilization Review for an extension of previously approved, ongoing course of treatment over a period of time or number of treatments typically associated with Hospital inpatient care including care received at a Residential Treatment Facility and ongoing outpatient services, including ongoing ambulatory care.

[This] Contract or [The] Contract	This Certificate of Insurance, which is a statement of the essential features and services given to the Subscriber by the Plan, including all attachments, the Group's application, the applications of the Subscribers and the Health Maintenance Contract.
Cost Sharing	The share of costs covered by your insurance that you pay out of your own pocket. This term generally includes coinsurance or similar charges, but it doesn't include premiums, balance-billing amounts for non-network providers, or the cost of non-covered services.
Covered Services	Those Health Care Services to which a Member is entitled under the terms of This Contract.
Creditable Coverage	Benefits or coverage provided under: a. A group health benefit plan (as such term is defined under North Dakota law); b. A health benefit plan (as such term is defined under North Dakota law); c. Medicare or Medicaid; d. Civilian health and medical program for uniformed services; e. A health plan offered under 5 U.S.C. 89; f. A medical care program of the Indian Health Service or of a tribal organization; g. A state health benefits risk pool, including coverage issued under N.D.C.C. §26.1-08; h. A public health plan as defined in federal regulations, including a plan maintained by a state government, the United States government, or a foreign government; i. A health benefit plan under section 5(e) of the Peace Corps Act [Pub. L. 87-293; 75 Stat. 612; 22 U.S.C. 2504(e)]; and j. A state's children's health insurance program funded through Title XXI of the federal Social Security Act [42 U.S.C. 1397aa et seq.].
Custodial Care	Care designed to assist the patient in meeting the activities of daily living and not primarily provided for its therapeutic value in the treatment of an illness, disease, injury or condition.
Deductible Amount	A specified dollar amount payable by the Member for certain Covered Services received during the Benefit Period. The Deductible Amount renews on January 1 of each consecutive Benefit Period.
Dependent	The Spouse and any Dependent Child of a Subscriber.
Dependent Child	The definition of a Dependent Child of a Subscriber includes a child who is related to the Subscriber as a natural child, a child placed for adoption, a legally adopted child, a child for whom the Subscriber has legal guardianship, a stepchild, or a foster child; and is one of the following: (a) under the age of twenty-six (26), (b) incapable of self-sustaining employment by reason of a disabling condition and chiefly dependent upon the Certificate holder/Subscriber for support and maintenance. If the Plan so requests, the Subscriber must provide proof of the child's disability within thirty-one (31) days of the Plan's request; or (c) the Subscriber's grandchild(ren) or those of the Subscriber's living, covered Spouse, who legally reside with the Certificate holder/Subscriber and (1) the parent of the grandchild(ren) is an Covered Dependent also covered by this Plan; and (2) both the Dependent and child of such Dependent (grandchild) are chiefly dependent upon the Certificate holder/Subscriber for support. Dependent coverage does not include the spouse of an adult Dependent child.
Domiciliary Care	Domiciliary Care consists of a protected situation in a community or Facility, which includes room, board, and personal services for individuals who cannot live independently yet do not require a 24-hour Facility or nursing care.
Eligible Dependent	An Eligible Dependent includes: (1) The Spouse of the Subscriber; and (2) A Dependent child who is related to the Subscriber as a natural child, a child placed for adoption, a legally adopted child, a child for whom the Subscriber has legal guardianship, a stepchild, or a foster child; and is one of the following: (a) under the age of twenty-six (26), (b) incapable of self-sustaining employment by reason of a disabling condition and chiefly dependent upon the Certificate holder/Subscriber for support and maintenance. If the Plan so requests, the Subscriber must provide proof of the child's disability within thirty-one (31) days of the Plan's request; or (c) the Subscriber's grandchild(ren) or those of the Subscriber's living, covered Spouse, who legally reside with the Certificate holder/Subscriber and (1) the parent of the grandchild(ren) is an Covered Dependent also covered by this Plan; and (2) both the Dependent and child of such Dependent (grandchild) are chiefly dependent upon the Certificate holder/Subscriber for support. Eligible Dependents do not include the spouse of an adult Dependent child.
Eligible Group Member	Any Group Member who meets the specific eligibility requirements of NDPERS.
Emergency Care Services	Emergency Care Services means: (1) Within the Service Area: covered health care services rendered by Participating or Non-Participating Providers under unforeseen conditions that require immediate medical attention. Emergency care services within the Service Area include covered health care services from Non-Participating Providers only when delay in receiving care from Participating Providers could reasonably be expected to cause severe jeopardy to the Member's condition or (2) Outside the Service Area: medically necessary health care services that are immediately required because of unforeseen illness or injury while the enrollee is outside the geographical limits of the Plan's Service Area.

Emergency Medical Condition	A medical condition of recent onset and severity, including severe pain, that would lead a prudent layperson acting reasonably and possessing an average knowledge of health and medicine to believe that the absence of immediate medical attention could reasonably be expected to result in serious impairment to bodily function, serious dysfunction of any bodily organ or part, or would place the person's health, or with respect to a pregnant woman, the health of the woman or her unborn child, in serious jeopardy.
Enrollee	An individual who is covered by this Plan.
ESRD	The federal End Stage Renal Disease program.
Expedited Appeal	An expedited review involving Urgent Care Requests for Adverse Determinations of Prospective (Pre-service) or Concurrent Reviews must be utilized if the Member, or Practitioner and/or Provider acting on behalf of the Member, believes that an expedited determination is warranted.
Experimental or Investigational Services	Health Care Services where the Health Care Service in question either: a. is not recognized in accordance with generally accepted medical standards as being safe and effective for treatment of the condition in question, regardless of whether the service is authorized by law or used in testing or other studies; or b. requires approval by any governmental authority and such approval has not been granted prior to the service being rendered.
Facility	An institution providing Health Care Services or a health care setting, including Hospitals and other licensed inpatient centers, ambulatory surgical or treatment centers, Skilled Nursing Facilities, Residential Treatment Facilities, diagnostic, laboratory, and imaging centers, and rehabilitation, and other therapeutic health settings.
Family Coverage	The Class Of Coverage identifying that the Subscriber and Eligible Dependents are enrolled to received benefits for Covered Services under this Plan.
Formulary	A list of prescription medication products, which are preferred by the Plan for dispensing to Members when appropriate. This list is subject to periodic review and modifications. Additional medications may be added or removed from the Formulary throughout the year.
Gestational Carrier	An adult woman who enters into an agreement to have a fertilized egg, gamete, zygote or embryo implanted in her and bear the resulting child for intended parents, where the embryo is conceived by using the egg and sperm of the intended parents.
Grievance	A written complaint submitted in accordance with the Plan's formal grievance procedure by or on behalf of the enrollee regarding any aspect of the Plan relative to the Member.
[The] Group or [This] Group	NDPERS has signed an agreement with Sanford Health Plan to provide health care benefits for its eligible employees and Eligible Dependents.
Group Contract Holder	The individual to whom a Group Contract has been issued.
Group Member	Any employee, sole proprietor, partner, director, officer or Member of the Group.
Health Care Services	Services for the diagnosis, prevention, treatment, cure, or relief of a health condition, illness, injury or disease.
Health Savings Account (HSA)	A medical savings account available to taxpayers who are enrolled in a High Deductible Health Plan. The funds contributed to the account aren't subject to federal income tax at the time of deposit. Funds must be used to pay for qualified medical expenses, and roll over year to year, if you don't spend them.
High Deductible Health Plan (HDHP)	A plan that features higher deductibles than traditional insurance plans. High Deductible Health Plans can be combined with a health savings account or a health reimbursement arrangement to allow you to pay for qualified out-of-pocket medical expenses on a pre-tax basis.
Hospital	A short-term, acute care, duly licensed institution that is primarily engaged in providing inpatient diagnostic and therapeutic services for the diagnosis, treatment, and care of injured and sick persons by or under the supervision of Physicians. It has organized departments of medicine and/or major surgery and provides 24-hour nursing service by or under the supervision of registered nurses. The term "Hospital" specifically excludes rest homes, places that are primarily for the care of convalescents, nursing homes, skilled nursing facilities, Residential Care Facilities, custodial care homes, intermediate care facilities, health resorts, clinics, Practitioner and/or Provider's offices, private homes, Ambulatory Surgical Centers, residential or transitional living centers, or similar facilities.
Hospitalization	A stay as an inpatient in a Hospital. Each "day" of Hospitalization includes an overnight stay for which a charge is customarily made. Benefits may not be restricted in a way that is based upon the number of hours that the Member stays in the Hospital.
Iatrogenic Condition	Illness or injury because of mistakes made in medical treatment, such as surgical mistakes, prescribing or dispensing the wrong medication or poor hand writing resulting in a treatment error.

In-Network Benefit Level	The PPO Plan level of benefits when a Member seeks services from a Participating Practitioner and/or Provider.
Intensive Outpatient Program (IOP)	Provides mental health and/or substance use disorder outpatient treatment services during which a Member remains in the program a minimum of three (3) continuous hours per day and does not remain in the program overnight. Programs may be available in the evenings or weekends.
Intermediate Care	Intermediate Care means care in a Facility, corporation or association licensed or regulated by the State for the accommodation of persons, who, because of incapacitating infirmities, require minimum but continuous care but are not in need of continuous medical or nursing services. The term also includes facilities for the nonresident care of elderly individuals and others who are able to live independently but who require care during the day.
Late Enrollee	An individual who enrolls in a group health plan on a date other than either the earliest date on which coverage can begin under the plan terms or on a special enrollment date.
Maintenance Care	Treatment provided to a Member whose condition/progress has ceased improvement or could reasonably be expected to be managed without the skills of a Health Care Provider. Exception: periodic reassessments are not considered Maintenance Care
Maximum Allowed Amount	The amount established by Sanford Health Plan using various methodologies for covered services and supplies. Sanford Health Plan's Maximum Allowable Amount is the lesser of (a) the amount charged for a covered service or supply; or (b) Reasonable Costs.
Medically Necessary or Medical Necessity	Health Care Services that are appropriate and necessary as determined by any Participating Provider, in terms or type, frequency, level, setting, and duration, according to the Member's diagnosis or condition, and diagnostic testing and Preventive services. Medically Necessary care must be consistent with generally accepted standards of medical practice as recognized by the Plan, as determined by health care Practitioner and/or Providers in the same or similar general specialty as typically manages the condition, procedure, or treatment at issue; and a. help restore or maintain the Members health; or b. prevent deterioration of the Member's condition; or c. prevent the reasonably likely onset of a health problem or detect an incipient problem; or d. not considered Experimental or Investigative
Member	The Subscriber and, if another Class of Coverage is in force, the Subscriber's Eligible Dependents
Mental Health and Substance Use Disorder Services	Health Care Services for disorders specified in the Diagnostic and Statistical Manual of Mental Disorders (DSM), the American Society of Addiction Medicine Criteria (ASAM Criteria), and the International Classification of Diseases (ICD), current editions. Also referred to as behavioral health, psychiatric, chemical dependency, substance abuse, and/or addiction services.
Natural Teeth	Teeth, which are whole and without impairment or periodontal disease, and are not in need of the treatment provided for reasons other than dental injury.
NDPERS	The North Dakota Public Employees Retirement System.
Never Event	Errors in medical care that are clearly identifiable, preventable, and serious in their consequences for patients, and indicate a problem in the safety and credibility of a health care Facility. Participating Providers are not permitted to bill the Plan or Members for services related to Never Events.
Non-Covered Services	Those Health Care Services to which a Member is not entitled and are not part of the benefits paid under the terms of This Contract.
Non-Participating Provider	A Provider that has not signed a contract with the Plan.
Non-Payable Health Care Provider	A Health Care Provider that is not reimbursable by the Plan. No benefits will be available for Covered Services prescribed by, performed by or under the direct supervision of a Non-Payable Health Care Provider.
Nursing Services	Health Care Services which are provided by a registered nurse (RN), licensed practical nurse (LPN), or other licensed nurse who is: (1) acting within the scope of that person's license, (2) authorized by a Provider, and (3) not a Member of the Member's immediate family.
Out-of-Network Benefit Level	The Basic Plan level of benefits provided when a Member seeks services from a Non-Participating Practitioner and/or Provider. This is most often referred to as benefits received under the Basic Plan level but may include services received from Practitioners and/or Providers that have not signed a contract with the Plan.
Out-of-Pocket Maximum Amount	The total Deductible and Coinsurance Amounts for certain Covered Services that are a Member's responsibility during a Benefit Period. The Out-of-Pocket Maximum Amount renews on January 1 of each consecutive Benefit Period.

Partial Hospitalization	Also known as day treatment; A licensed or approved day or evening outpatient treatment program that includes the major diagnostic, medical, psychiatric and psychosocial rehabilitation treatment modalities designed for individuals with mental health and/or substance use disorders who require coordinated, intensive, comprehensive and multi-disciplinary treatment.
Participating [Health Care] Provider	A Provider who, under a contract with the Plan, or with its contractor or subcontractor, has agreed to provide Health Care Services to Members with an expectation of receiving payment, other than Coinsurance, Copays, or Deductibles, directly or indirectly, from the Plan. A Participating Provider includes Providers at either the Basic or PPO Plan level.
Physician	An individual licensed to practice medicine or osteopathy.
[The] Plan or [This] Plan	Sanford Health Plan.
Plan Administrator	North Dakota Public Employees Retirement System (NDPERS)
PPO (Preferred Provider Organization) Plan	A group of Health Care Providers who provide discounted services to the Members of NDPERS. Because PPO Health Care Providers charge Sanford Health Plan less for medical care services provided to the Members of NDPERS, cost savings are passed on to Members by way of reduced Cost Sharing Amounts. To receive a higher payment level, Covered Services must be received from an NDPERS PPO Health Care Provider.
Practitioner	A professional who provides health care services. Practitioners are usually required to be licensed as required by law. Practitioners are also Physicians.
Preauthorization	The process of the Member or the Member's representative notifying Sanford Health Plan to request approval for specified services. Eligibility for benefits for services requiring Preauthorization is contingent upon compliance with the provisions in Sections 2, 4 and 5. Preauthorization does not guarantee payment of benefits.
Preventive	Health Care Services that are medically accepted methods of prophylaxis or diagnosis which prevent disease or provide early diagnosis of illness and/or which are otherwise recognized by the Plan.
Primary Care Physician (PCP)	A Participating Physician who is an internist, family practice Physician, pediatrician, or obstetrician/gynecologist who is a Participating Practitioner and who has been chosen to be designated as a Primary Care Physician as indicated in the Provider Directory and may be responsible for providing, prescribing, directing, referring, and/or authorizing all care and treatment of a Member.
Prior Approval	The process of the Member or Member's representative providing information to Sanford Health Plan substantiating the medical appropriateness of specified services in order to receive benefits for such service. This information must be submitted in writing from the Member's Health Care Provider. Sanford Health Plan reserves the right to deny benefits if Preauthorization/Prior Approval is not obtained.
Prospective (Pre-service) Review	Means Urgent and non-Urgent Utilization Review conducted prior to an admission or the provision of a Health Care Service or a course of treatment.
[Health Care] Provider	An individual, institution or organization that provides services for Plan Members. Examples of Providers include but are not limited to Hospitals, Physicians and home health agencies.
Prudent Layperson	A person who is without medical training and who possess an average knowledge of health and medicine and who draws on his/her practical experience when making a decision regarding the need to seek Emergency medical treatment.
Qualified Mental Health Professional	A licensed physician who is a psychiatrist; a licensed clinical psychologist who is qualified for listing on the national register of health service providers in psychology; a licensed certified social worker who is a board-certified in clinical social work; or a nurse who holds advanced licensure in psychiatric nursing
Reasonable Costs	Those costs that do not exceed the lesser of (a) negotiated schedules of payment developed by the Plan, which are accepted by Participating Practitioners and/or Providers; or (b) the prevailing marketplace charges.
Residential Treatment Facility	An inpatient mental health or substance use disorder treatment Facility that provides twenty-four (24) hour availability of qualified medical staff for psychiatric, substance abuse, and other therapeutic and clinically informed services to individuals whose immediate treatment needs require a structured twenty-four (24) hour residential setting that provides all required services on site. Services provided include, but are not limited to, multi-disciplinary evaluation, medication management, individual, family and group therapy, substance abuse education/counseling. Facilities must be under the direction of a board-eligible or certified psychiatrist, with appropriate staffing on-site at all times. If the Facility provides services to children and adolescents, it must be under the direction of a board-eligible or certified child psychiatrist or general psychiatrist with experience in the treatment of children. Hospital licensure is required if the treatment is Hospital-based. The treatment Facility must be licensed by the state in which it operates.

Retrospective (Post-service) Review	Means any review of a request for a benefit that is not a Prospective (Pre-service) Review request, which does not include the review of a claim that is limited to veracity of documentation, or accuracy of coding, or adjudication of payment. Retrospective (Post-service) Review will be utilized by Sanford Health Plan to review services that have already been utilized.
Serious Reportable Event	An event that results in a physical or mental impairment that substantially limits one or more major life activities of a Member or a loss of bodily function, if the impairment or loss lasts more than seven (7) days or is still present at the time of discharge from an inpatient health care Facility. Serious events also include loss of a body part and death. Participating Providers are not permitted to bill Members or the Plan for services related to Serious Reportable Events.
[NDPERS] Service Agreement and/or [Group] Contract	The Service Agreement between NDPERS and Sanford Health Plan that is a contract for Health Care Services, which by its terms limits eligibility to enrollees of a specified group. The Group Contract may include coverage for Dependents.
Service Area	The geographic Service Area approved by the State's Insurance Department.
Single Coverage	The Class Of Coverage identifying that only the Subscriber is enrolled to received benefits for Covered Services under this Plan.
Skilled Nursing Facility	A Facility that is operated pursuant to the presiding state law and is primarily engaged in providing room and board accommodations and skilled nursing care under the supervision of a duly licensed physician.
Spouse	The Subscriber's spouse under a legally existing marriage between persons of the opposite sex.
[This] State	The State of North Dakota.
Subscriber	An Eligible Group Member who is enrolled in the Plan whose employment or other status (except family dependency) is the basis for eligibility for enrollment in the Plan. A Subscriber is also a Member and Enrollee.
Surrogate	An adult woman who enters into an agreement to bear a child conceived through assisted conception for intended parents.
Urgent Care Request	Means a request for a Health Care Service or course of treatment with respect to which the time periods for making a Non-Urgent Care Request determination which: 1. Could seriously jeopardize the life or health of the Member or the ability of the Member to regain maximum function, based on a Prudent Layperson's judgment; or 2. In the opinion of a Practitioner and/or Provider with knowledge of the Member's medical condition, would subject the Member to severe pain that cannot be adequately managed without the health care service or treatment that is the subject of the request.
Urgent Care Situation	An Urgent Care Situation is a degree of illness or injury, which is less severe than an Emergency Condition, but requires prompt medical attention within *twenty-four (24)* hours, such as stitches for a cut finger. Urgent care means a request for a health care service or course of treatment with respect to which the time periods for making a Non-Urgent Care Request determination: 1. Could seriously jeopardize the life or health of the Member or the ability of the Member to regain maximum function, based on a Prudent Layperson's judgment; or 2. In the opinion of a Practitioner and/or Provider with knowledge of the Member's medical condition, would subject the Member to severe pain that cannot be adequately managed without the health care service or treatment that is the subject of the request.
Us/We/Our	Refers to Sanford Health Plan
Utilization Review	A set of formal techniques used by the Plan to monitor and evaluate the medical necessity, appropriateness, and efficiency of Health Care Services and procedures including techniques such as ambulatory review, Prospective (pre-service) Review, second opinion, Preauthorization/Prior Approval, Concurrent Review, Case Management, discharge planning, and retrospective (post-service) review.

Section 11. How coverage ends

Termination of Member Coverage

For the purposes of this Benefit Plan, upon termination of Member Coverage, the following provisions control:

1. **Determining Ineligibility.** Eligibility for benefits subsequent to retirement or termination will be determined pursuant to N.D.C.C. §54-52.1-03.
2. **Continuation of health, dental, vision, or prescription drug coverage after termination.** An employee who terminates employment and is not receiving a monthly retirement benefit from one of the eligible retirement systems, and applies for continued coverage with the health, dental, vision, or prescription drug plan may continue such coverage for a maximum of eighteen (18) months by remitting timely payments to the Board. The employee desiring coverage shall notify the Board within sixty (60) days of the termination. Coverage will become effective on the first day of the month following the last day of coverage by the employing agency, if an application is submitted within sixty (60) days. An individual who fails to timely notify the board is not eligible for coverage. [N.D.A.C. §71-03-03-06]
3. **Continuation of health, dental, vision, or prescription drug coverage for dependents.** Dependents of employees with family coverage may continue coverage with the group after their eligibility would ordinarily cease. This provision includes divorced or widowed spouses and children when they are no longer dependent on the employee. Coverage is contingent on the prompt payment of the premium, and in no case will coverage continue for more than thirty-six (36) months. Dependents desiring coverage shall notify the board within sixty (60) days of the qualifying event and must submit an application in a timely manner. An individual who fails to notify the Board within the sixty (60) days, and who desires subsequent coverage, will not be eligible for coverage. [N.D.A.C. §71-03-03-07]
4. **Leave without pay.** An employee on an approved leave without pay may elect to continue coverage for the periods specified in the plans for life insurance, health, dental, vision, or prescription drug coverages by paying the full premium to the agency. An eligible employee electing not to continue coverage during a leave of absence is entitled to renew coverage for the first of the month following the month that the employee has returned to work if the employee submits an application for coverage within the first thirty-one (31) days of returning to work. An eligible employee failing to submit an application for coverage within the first thirty-one (31) days of returning to work or eligibility for a special enrollment period, may enroll during the annual open enrollment. Upon a showing of good cause, the executive director may waive the thirty-one day application requirement. [N.D.A.C. §71-03-03-09]
    a. In the event an enrolled eligible employee is not entitled to receive salary, wages, or other compensation for a particular calendar month, that employee may make direct payment of the required premium to the board to continue the employee's coverage, and the employing department, board, or agency shall provide for the giving of a timely notice to the employee of that person's right to make such payment at the time the right arises. [N.D.C.C. §54-52.1-06]

Note: A Member's coverage may not be terminated due to the status of the Member's health or because the Member has exercised his or her rights under the Plan's policy on member complaints or the policy on appeal procedures for medical review determinations. For details on Complaints and Appeals, see Section 8 of this COI.

Continuation

1. If the Subscriber becomes ineligible for group membership under this Benefit Plan due to an inability to meet NDPERS requirements and enrollment regulations, coverage will be canceled at the end of the last month that premium was received from the Plan Administrator. Exceptions may be made if:
    a. The Plan Administrator cancels coverage. Conversion coverage will not be offered to a Subscriber, if on the date of conversion the Plan Administrator through which the Subscriber is eligible has terminated coverage with Sanford Health Plan and the Plan Administrator has enrolled with another insurance carrier.
    b. The Plan Administrator no longer meets Sanford Health Plan's group coverage requirements. The Subscriber will be given the right to convert to a nongroup benefit plan, subject to premiums and benefit plan provisions in effect, if application for such coverage is made within 31 days after the termination date of the previous benefit plan.
    c. Ineligibility occurs because the Subscriber elects to discontinue employment, is terminated or is otherwise no longer covered under the group health plan. The Subscriber may elect continuation coverage through the Plan Administrator in accordance with state and federal law.
    d. Ineligibility occurs because the Subscriber is no longer eligible to continue coverage under the group (NDPERS). The Subscriber may elect conversion (individual) coverage on a nongroup basis, subject to premiums and benefit plan provisions for nongroup coverage then in effect, if the Subscriber applies for nongroup coverage within 31 days after the termination date of the previous group health plan coverage.
2. If a Member becomes otherwise ineligible for group membership under this Benefit Plan, Sanford Health Plan must at least offer the Subscriber its conversion (individual) benefit plan, if the Member lives in the Sanford Health Plan Service Area. There may be other coverage options for the Subscriber and/or Eligible Dependents through the Health Insurance Marketplace, Medicaid, or other group health plan coverage options (such as a spouse's plan) through what is called a "special enrollment period." The cost of these options may vary depending on a Subscriber's individual circumstances. To learn more, visit www.healthcare.gov or call (800) 318-2596 | TTY/TDD: (855) 889-4325.

Continuation of Coverage for Confined Members

Any Member who is an inpatient in a Hospital or other Facility on the date of coverage termination under this Benefit Plan will be covered in accordance with the terms of this Certificate until they are discharged from such Hospital or other Facility. Applicable charges for coverage that was in effect prior to termination of this Certificate will apply.

Extension of Benefits for Total Disability

An extension of benefits is provided Covered Members/Subscribers who become totally disabled while enrolled under this Benefit Plan and whom continue to be totally disabled at the date of termination of this Certificate. Upon payment applicable premium charges at the current Group rate, coverage will remain in full force and effect until the first of the following occurs:

1. The end of a period of twelve (12) months starting with the date of termination of the Group contract;
2. The date the Member is no longer totally disabled; or
3. The date a succeeding plan provides replacement coverage to that Member without limitation as to the disabling condition.

Upon termination of the extension of benefits, the Member/Subscriber will have continuation and conversion rights as stated in Sections 11 and 12.

Cancellation of This or Previous Benefit Plans

If the Benefit Plan is terminated, modified or amended, coverage is automatically terminated, modified or amended for all enrolled Members of the NDPERS Dakota Plan. It is the Plan Administrator's responsibility to notify Members of the termination of coverage.

Notice of Creditable Coverage

You may request a Certificate of Creditable Coverage for you and your covered family Members upon your voluntary or involuntary termination from the Plan. You may also request a Certificate of Creditable Coverage at any time by calling Member Services toll-free at (800) 499-3416 | TTY/TDD: (877) 652-1844 *(toll-free)*. Written requests can be sent to MemberServices@sanfordhealth.org or:

Sanford Health Plan
ATTN: NDPERS/Member Services
PO Box 91110
Sioux Falls, SD 57109-1110

Section 12. Options after Coverage Ends

Federal Continuation of Coverage Provisions ("COBRA")

Notice of Continuation Coverage Rights Under COBRA

Introduction
You're getting this notice because you recently gained coverage under a group health plan (the Plan). This notice has important information about your right to COBRA continuation coverage, which is a temporary extension of coverage under the Plan. This notice explains COBRA continuation coverage, when it may become available to you and your family, and what you need to do to protect your right to get it. When you become eligible for COBRA, you may also become eligible for other coverage options that may cost less than COBRA continuation coverage.

The right to COBRA continuation coverage was created by a federal law, the Consolidated Omnibus Budget Reconciliation Act of 1985 (COBRA). COBRA continuation coverage can become available to you and other members of your family when group health coverage would otherwise end. For more information about your rights and obligations under the Plan and under federal law, you should review the Plan's Summary Plan Description or contact the Plan Administrator.

You may have other options available to you when you lose group health coverage. For example, you may be eligible to buy an individual plan through the Health Insurance Marketplace. By enrolling in coverage through the Marketplace, you may qualify for lower costs on your monthly premiums and lower out-of-pocket costs. Additionally, you may qualify for a 30-day special enrollment period for another group health plan for which you are eligible (such as a spouse's plan), even if that plan generally doesn't accept "Late Enrollees".

What is COBRA Continuation Coverage?
COBRA continuation coverage is a continuation of Plan coverage when it would otherwise end because of a life event. This is also called a "qualifying event." Specific qualifying events are listed later in this notice. After a qualifying event, COBRA continuation coverage must be offered to each person who is a "qualified beneficiary." You, your spouse, and your dependent children could become qualified beneficiaries if coverage under the Plan is lost because of the qualifying event. Under the Plan, qualified beneficiaries who elect COBRA continuation coverage must pay for COBRA continuation coverage.

If you're an employee, you'll become a qualified beneficiary if you lose your coverage under the Plan because of the following qualifying events:
- Your hours of employment are reduced, or
- Your employment ends for any reason other than your gross misconduct.

If you're the spouse of an employee, you'll become a qualified beneficiary if you lose your coverage under the Plan because of the following qualifying events:
- Your spouse dies;
- Your spouse's hours of employment are reduced;
- Your spouse's employment ends for any reason other than his or her gross misconduct;
- Your spouse becomes entitled to Medicare benefits (under Part A, Part B, or both); or
- You become divorced or legally separated from your spouse.

Your dependent children will become qualified beneficiaries if they lose coverage under the Plan because of the following qualifying events:
- The parent-employee dies;
- The parent-employee's hours of employment are reduced;
- The parent-employee's employment ends for any reason other than his or her gross misconduct;
- The parent-employee becomes entitled to Medicare benefits (Part A, Part B, or both);
- The parents become divorced or legally separated; or
- The child stops being eligible for coverage under the Plan as a "dependent child."

Sometimes, filing a proceeding in bankruptcy under title 11 of the United States Code can be a qualifying event. If a proceeding in bankruptcy is filed with respect to NDPERS, and that bankruptcy results in the loss of coverage of any retired employee covered under the Plan, the retired employee will become a qualified beneficiary. The retired employee's spouse, surviving spouse, and dependent children will also become qualified beneficiaries if bankruptcy results in the loss of their coverage under the Plan.

When is COBRA Coverage Available?
The Plan will offer COBRA continuation coverage to qualified beneficiaries only after the Plan Administrator has been notified that a qualifying event has occurred. The employer must notify the Plan Administrator of the following qualifying events:
- The end of employment or reduction of hours of employment;
- Death of the employee;
- Commencement of a proceeding in bankruptcy with respect to the employer; or
- The employee's becoming entitled to Medicare benefits (under Part A, Part B, or both).

For all other qualifying events (divorce or legal separation of the employee and spouse or a dependent child's losing eligibility for coverage as a dependent child), you must notify the Plan Administrator within 60 days after the qualifying event occurs. You must provide this notice to:
North Dakota Public Employees Retirement System
400 East Broadway, Suite 505
PO Box 1657
Bismarck, ND 58502
(701) 328-3900

How is COBRA Coverage Provided?
Once the Plan Administrator receives notice that a qualifying event has occurred, COBRA continuation coverage will be offered to each of the qualified beneficiaries. Each qualified beneficiary will have an independent right to elect COBRA continuation coverage. Covered employees may elect COBRA continuation coverage on behalf of their spouses, and parents may elect COBRA continuation coverage on behalf of their children.

COBRA continuation coverage is a temporary continuation of coverage that generally lasts for 18 months due to employment termination or reduction of hours of work. Certain qualifying events, or a second qualifying event during the initial period of coverage, may permit a beneficiary to receive a maximum of 36 months of coverage.

There are also ways in which this 18-month period of COBRA continuation coverage can be extended:

- *Disability extension of 18-month period of COBRA continuation coverage*
  If you or anyone in your family covered under the Plan is determined by Social Security to be disabled and you notify the Plan Administrator in a timely fashion, you and your entire family may be entitled to get up to an additional 11 months of COBRA continuation coverage, for a maximum of 29 months. The disability would have to have started at some time before the 60th day of COBRA continuation coverage and must last at least until the end of the 18-month period of COBRA continuation coverage.
- *Second qualifying event extension of 18-month period of continuation coverage*
  If your family experiences another qualifying event during the 18 months of COBRA continuation coverage, the spouse and dependent children in your family can get up to 18 additional months of COBRA continuation coverage, for a maximum of 36 months, if the Plan is properly notified about the second qualifying event. This extension may be available to the spouse and any dependent children getting COBRA continuation coverage if the employee or former employee dies; becomes entitled to Medicare benefits (under Part A, Part B, or both); gets divorced or legally separated; or if the dependent child stops being eligible under the Plan as a dependent child. This extension is only available if the second qualifying event would have caused the spouse or dependent child to lose coverage under the Plan had the first qualifying event not occurred.

Are there other coverage options besides COBRA Continuation Coverage?
Yes. Instead of enrolling in COBRA continuation coverage, there may be other coverage options for you and your family through the Health Insurance Marketplace, Medicaid, or other group health plan coverage options (such as a spouse's plan) through what is called a "special enrollment period." Some of these options may cost less than COBRA continuation coverage. You can learn more about many of these options at www.healthcare.gov.

If You Have Questions
Questions concerning your Plan or your COBRA continuation coverage rights should be addressed to the contact or contacts identified below. For more information about your rights under the Employee Retirement Income Security Act (ERISA), including COBRA, the Patient Protection and Affordable Care Act, and other laws affecting group health plans, contact the nearest Regional or District Office of the U.S. Department of Labor's Employee Benefits Security Administration (EBSA) in your area or visit www.dol.gov/ebsa. (Addresses and phone numbers of Regional and District EBSA Offices are available through EBSA's website.) For more information about the Marketplace, visit www.healthcare.gov.

Keep Your Plan Informed of Address Changes
To protect your family's rights, let the Plan Administrator know about any changes in the addresses of family members. You should also keep a copy, for your records, of any notices you send to the Plan Administrator.

Plan Contact Information
Sanford Health Plan
300 Cherapa Place, Suite 201
Sioux Falls, SD 57103
(877) 305-5463 *(toll-free)*
TTY/TDD: (877) 652-1844 *(toll-free)*

Section 13. Subrogation and Right of Reimbursement

If a Member is injured or becomes ill because of an action or omission of a third party who is or may be liable to the Member for the injury or illness, the Health Plan may be able to "step into the shoes" of the Member to recover health care costs from the party responsible for the injury or illness. This is called "Subrogation," and this part of This Contract covers such situations.

If a Member has received or receives a recovery from the third party, the Health Plan has a right to reduce benefits, or to be reimbursed for that which it has provided to the Member. This is called "Reimbursement" and this part of This Contract covers such situations.

The Plan will provide Health Care Services to the Member for the illness or injury, just as it would in any other case. However, if the Member accepts the services from the Plan, this acceptance constitutes the Member's consent to the provisions discussed below.

Plan's Rights of Subrogation

In the event of any payments for benefits provided to a Member under this Contract, the Plan, to the extent of such payment, shall be subrogated to all rights of recovery such Member, Member's parents, heirs, guardians, executors, or other representatives may have against any person or organization. These subrogation and reimbursement rights also include the right to recover from uninsured motorist insurance, underinsured motorist insurance, no-fault insurance, automobile medical payments coverage, premises medical expense coverage, and workers compensation insurance or substitute coverage. The Plan shall be entitled to receive from any such recovery an amount up to the Reasonable Cost for the services provided by the Plan. In providing benefits to a Member, the Plan may obtain discounts from its health care Providers, compensate Providers on a capitated basis or enter into other arrangements under which it pays to another less than the Reasonable Costs of the benefits provided to the Member. Regardless of any such arrangement, when a Member receives a benefit under the Plan for an illness or injury, the Plan is subrogated to the Member's right to recover the Reasonable Costs of the benefits it provides on account of such illness or injury, even if those Reasonable Costs exceed the amount paid by the Plan.

The Plan is granted a first priority right to subrogation or reimbursement from any source of recovery. The Plan's first priority right applies whether or not the Member has been made whole by any recovery. The Plan shall have a lien on all funds received by the Member, Member's parents, heirs, guardians, executors, or other representatives up to the Reasonable Costs Charge for any past, present, or future Health Care Services provided to the Member. The Plan may give notice of that lien to any party who may have contributed to the loss.

If the Plan so decides, it may be subrogated to the Member's rights to the extent of the benefits provided or to be provided under this Contract. This includes the Plan's right to bring suit against the third party in the Member's name.

Plan's Right to Reduction and Reimbursement

The Plan shall have the right to reduce or deny benefits otherwise payable by the Plan, or to recover benefits previously paid by the Plan, to the extent of any and all payments made to or for a Member by or on behalf of a third party who is or may be liable to the Member, regardless of whether such payments are designated as payment for, but not limited to, pain and suffering, loss of income, medical benefits or expenses, or other specified damages.

Any such right of reduction or reimbursement provided to the Plan under this Contract shall not apply or shall be limited to the extent that statutes or the courts of This State eliminate or restrict such rights.

The Plan shall have a lien on all funds received by the Member, Member's parents, heirs, guardians, executors, or other representatives up to the Reasonable Cost for the Health Care Services provided to the Member.

Member's Responsibilities

The Member, Member's parents, heirs, guardians, executors, or other representatives must take such action, furnish such information and assistance, and execute such instruments as the Plan requires to facilitate enforcement of its rights under this Part. The Member shall take no action prejudicing the rights and interests of the Plan under this provision. Neither a Member nor Member's attorney or other representative is authorized to accept subrogation or reimbursement payments on behalf of the Plan, to negotiate or compromise the Plan's subrogation or reimbursement claim, or to release any right of recovery or reimbursement without the Plan's express written consent. Any Member who fails to cooperate in the Plan's administration of this Part shall be responsible for the Reasonable Cost for services subject to this section and any legal costs incurred by the Plan to enforce its rights under this section. Members must also report any recoveries from insurance companies or other persons or organizations arising form or relating to an act or omission that caused or contributed to an injury or illness to the Member paid for by the Plan. Failure to comply will entitle the Plan to withhold benefits, services, payments, or credits due under the Plan.

This page is intentionally left blank. Your *Summary of Benefits and Coverage* is an attachment to this Certificate of Insurance.

SANFORD HEALTH PLAN

North Dakota Public Employees Retirement System
High Deductible Non-Grandfathered Dakota Plan

Coverage Period: 07/01/15 – 06/30/17
Coverage for: Single, Family

Summary of Benefits and Coverage: What this Plan Covers & What it Costs

Plan Type: High Deductible | Non-Grandfathered

This is only a summary. If you want more detail about your coverage and costs, you can get the complete terms in the policy at www.sanfordhealthplan.com/ndpers or by calling **1-800-499-3416** *(toll-free)* | TTY/TDD: **1-877-652-1844** *(toll-free)*.

Important Questions	Answers	Why this Matters:
What is the overall deductible?	For in-network providers: **$1,500** person/**$3,000** family For out-of-network providers: **$1,500** person/**$3,000** family Doesn't apply to preventive care.	You must pay all the costs up to the **deductible** amount before this plan begins to pay for covered services you use. Check your policy to see when the **deductible** starts over (usually, but not always, January 1st). See the chart starting on page 2 for how much you pay for covered services after you meet the **deductible**.
Are there other deductibles for specific services?	No.	You don't have to meet **deductibles** for specific services, but see the chart starting on page 2 for other costs for services this plan covers.
Is there an out-of-pocket limit on my expenses?	Yes. For in-network providers: **$3,000** person/**$6,000** family For out-of-network providers: **$3,500** person/**$7,000** family	The **out-of-pocket limit** is the most you could pay during a coverage period (annually/usually one year) for your share of the cost of covered services. This limit helps you plan for health care expenses.
What is not included in the out-of-pocket limit?	Premiums, balance-billed charges, infertility services, and health care this plan doesn't cover.	Even though you pay these expenses, they don't count toward the **out-of-pocket limit**.
Is there an overall annual limit on what the plan pays?	No.	The chart starting on page 2 describes any limits on what the plan will pay for *specific* covered services, such as office visits.
Does this plan use a network of providers?	Yes. See **www.sanfordhealthplan.com/ndpers or call 1-800-499-3416** *(toll-free)* for a list of participating providers.	If you use an in-network doctor or other health care **provider**, this plan will pay some or all of the costs of covered services. Be aware, your in-network doctor or hospital may use an out-of-network **provider** for some services. Plans use the term in-network, **preferred**, or **participating** for **providers** in their **network**. See the chart starting on page 2 for how this plan pays different kinds of **providers**.
Do I need a referral to see a specialist?	No. You don't need a referral to see a **participating** specialist.	You can see the **participating specialist** you choose without permission from this plan.
Are there services this plan doesn't cover?	Yes.	Some of the services this plan doesn't cover are listed on page 5. See your policy for additional information about **excluded services**.

Questions: Call 1-800-499-3416 *(toll-free)* or visit us at **www.sanfordhealthplan.com/ndpers.** If you aren't clear about any of the bolded terms used in this form, see the Glossary. You can view the Glossary at **www.dol.gov/ebsa/pdf/SBCUniformGlossary.pdf** or call 1-800-499-3416 to request a copy.

North Dakota Public Employees Retirement System

HP-0493 7-15 NDPERS NGF HDHP

- **Copayments** are fixed dollar amounts (for example, $15) you pay for covered health care, usually when you receive the service.
- **Coinsurance** is *your* share of the costs of a covered service, calculated as a percent of the **allowed amount** for the service. For example, if the Plan's **allowed amount** for an overnight hospital stay is $1,000; your **coinsurance** payment of 20% would be $200. This may change if you haven't met your **deductible**.
- The amount the plan pays for covered services is based on the **allowed amount**. If an out-of-network **provider** charges more than the **allowed amount**, you may have to pay the difference. For example, if an out-of-network hospital charges $1,500 for an overnight stay and the **allowed amount** is $1,000; you may have to pay the $500 difference. (This is called **balance billing**.)
- This plan may encourage you to use **participating providers** by charging you lower **deductibles**, **copayments** and **coinsurance** amounts.

Common Medical Event	Services You May Need	Your cost if you use Basic Plan After Deductible	Your cost if you use PPO Plan After Deductible	Limitations & Exceptions
If you visit a health care provider's office or clinic	Primary care to treat an injury or illness	25% coinsurance	20% coinsurance	——————none——————
	Chiropractic care Office visit	25% coinsurance	20% coinsurance	Includes chiropractic consult and manual manipulations.
	Ancillary services	25% coinsurance	20% coinsurance	Includes but not limited to x-rays, labs, ultrasounds and rehabilitative therapy.
	Specialist visit	25% coinsurance	20% coinsurance	——————none——————
	Other practitioner office visit	25% coinsurance	20% coinsurance	——————none——————
	Preventive care/screening/ immunization	No charge	No charge	Preventive health exams and immunizations are included in your health plan coverage. For details, reference the Preventive Health Brochure or contact Member Services.
If you have a test	Diagnostic test (x-ray, blood work)	25% coinsurance	20% coinsurance	——————none——————
	Imaging (CT/PET scans, MRIs)	25% coinsurance	20% coinsurance	——————none——————

Common Medical Event	Services You May Need	Your cost if you use Basic Plan After Deductible	Your cost if you use PPO Plan After Deductible	Limitations & Exceptions
If you need drugs to treat your illness or condition More information about **prescription drug coverage** is available at sanfordhealthplan.com/ndpers	Formulary Drugs	20% coinsurance	20% coinsurance	Prescription Medications or Drugs and nonprescription diabetes supplies are subject to a dispensing limit of a 100-day supply. Refer to your formulary to determine which benefit applies to your medication. Certain contraceptive drugs covered at 100%.
	Non-Formulary Drugs	50% coinsurance	50% coinsurance	
If you have outpatient surgery	Facility fee (e.g., ambulatory surgery center)	25% coinsurance	20% coinsurance	These services require preauthorization/prior approval by the Health Plan.
	Physician/surgeon fees	25% coinsurance	20% coinsurance	————————none————————
If you need immediate medical attention	Emergency room services	20% coinsurance	20% coinsurance	————————none————————
	Emergency medical transportation	20% coinsurance	20% coinsurance	
	Urgent care	20% coinsurance	20% coinsurance	
If you have a hospital stay	Facility fee (e.g., hospital room)	25% coinsurance	20% coinsurance	These services require preauthorization/prior approval by the Health Plan.
	Physician/surgeon fee	25% coinsurance	20% coinsurance	

Common Medical Event	Services You May Need	Your cost if you use Basic Plan After Deductible	Your cost if you use PPO Plan After Deductible	Limitations & Exceptions
If you have mental/behavioral health, or substance abuse needs	Mental/Behavioral health outpatient services Office visit All other services	 20% coinsurance 20% coinsurance	 20% coinsurance 20% coinsurance	For outpatient treatment services, the first five (5) hours of any calendar year will be covered at 100% (no charge). Coverage of the first five (5) hours will not apply when you elect an HSA. For full details, please refer to your Policy.
	Mental/Behavioral health inpatient services	25% coinsurance	20% coinsurance	These services require preauthorization/prior approval by the Health Plan. For full details, please refer to your Policy.
	Substance use disorder outpatient services Office visit All other services	 20% coinsurance 20% coinsurance	 20% coinsurance 20% coinsurance	For outpatient treatment services, the first five (5) visits in a calendar year will be covered at 100% (no charge). Coverage of the first five (5) visits will not apply when you elect an HSA. For full details, please refer to your Policy.
	Substance use disorder inpatient services	25% coinsurance	20% coinsurance	These services require preauthorization/prior approval by the Health Plan. For full details, please refer to your Policy.
If you are pregnant	Prenatal and postnatal care	No charge	No charge	Routine prenatal and postnatal visits are covered under your Preventive Health Care Services benefit. Deductible is waived.
	Delivery and all inpatient services	25% coinsurance	20% coinsurance	Deductible is waived for delivery services received from a PPO health care provider when a Member is enrolled under the Healthy Pregnancy Program.
If you need help recovering or have other special health needs	Home health care	25% coinsurance	20% coinsurance	These services require preauthorization/prior approval by the Health Plan.
	Rehabilitation services	25% coinsurance	20% coinsurance	——————none——————
	Habilitation services	25% coinsurance	20% coinsurance	——————none——————

Common Medical Event	Services You May Need	Your cost if you use Basic Plan After Deductible	Your cost if you use PPO Plan After Deductible	Limitations & Exceptions
If you need help recovering or have other special health needs (continued)	Skilled nursing care	25% coinsurance	20% coinsurance	These services require preauthorization/prior approval by the Health Plan.
	Durable medical equipment	25% coinsurance	20% coinsurance	These services require preauthorization/prior approval by the Health Plan.
	Hospice service	25% coinsurance	20% coinsurance	These services require preauthorization/prior approval by the Health Plan.
If your child needs dental or eye care	Routine eye exam	No charge	No charge	Covered when part of a preventive exam.
	Glasses	Not Covered	Not Covered	——————none——————
	Routine dental check-up	Not Covered	Not Covered	——————none——————

Excluded Services & Other Covered Services:

Services Your Plan Does NOT Cover (This isn't a complete list. Check your policy or plan document for other excluded services.)

- Acupuncture
- Cosmetic surgery
- Dental care (Adult)
- Hearing aids (unless for Members under age 18)
- Long-term care
- Routine eye care (Adult), except for Dilation Exam for Diabetes
- Routine pediatric dental and vision care
- Weight loss programs

Other Covered Services (This isn't a complete list. Check your policy or plan document for other covered services and your costs for these services.)

- Bariatric surgery
- Chiropractic care
- Coverage provided outside the United States. For full details, please refer to your Policy or see www.sanfordhealthplan.com/ndpers
- Infertility treatment; $20,000 lifetime maximum
- Private-duty nursing
- Routine foot care (for diabetics only)

Your Rights to Continue Coverage:

If you lose coverage under the plan, then, depending upon the circumstances, Federal and State laws may provide protections that allow you to keep health coverage. Any such rights may be limited in duration and will require you to pay a **premium**, which may be significantly higher than the premium you pay while covered under the plan. Other limitations on your right to continue coverage may also apply.

For more information on your rights to continue coverage, contact the Plan toll-free at (800) 499-3416. You may also contact your state insurance department, the U.S. Department of Labor, Employee Benefits Security Administration at (866) 444-3272 or www.dol.gov/ebsa, or the U.S. Department of Health and Human Services at (877) 267-2323 x61565 or www.cciio.cms.gov.

Your Grievance and Appeals Rights:

If you have a complaint or are dissatisfied with a denial of coverage for claims under your Plan, you may be able to **appeal** or file a **grievance**. For questions about your rights, this notice, or assistance, you can contact:

- Sanford Health Plan/Member Services toll-free at (800) 499-3416
- The U.S. Department of Labor, Employee Benefits Security Administration at (866) 444-3272 *(toll-free)* or www.dol.gov/ebsa
- North Dakota Insurance Department at (800) 247-0560 *(toll-free)* or www.nd.gov/ndins/contact

Does this Coverage Provide Minimum Essential Coverage?

The Affordable Care Act requires most people to have health care coverage that qualifies as "minimum essential coverage." **This plan does provide minimum essential coverage.**

Does this Coverage Meet the Minimum Value Standard?

The Affordable Care Act establishes a minimum value standard of benefits of a health plan. The minimum value standard is 60% (actuarial value). **This health coverage does meet the minimum value standard for the benefits it provides.**

Language Access Services:

Spanish (Español): Para obtener asistencia en Español, llame al 1-800-892-0675 *(toll-free)*.

Tagalog (Tagalog): Kung kailangan ninyo ang tulong sa Tagalog tumawag sa 1-800-892-0675 *(toll-free)*.

Chinese (中文): 如果需要中文的帮助，请拨打这个号码 1-800-892-0675 *(toll-free)*.

Navajo (Dine): Dinek'ehgo shika at'ohwol ninisingo, kwiijigo holne' 1-800-892-0675 *(toll-free)*.

To see examples of how this plan might cover costs for a sample medical situation, see the next page.

About these Coverage Examples:

These examples show how this plan might cover medical care in given situations. Use these examples to see, in general, how much financial protection a sample patient might get if they are covered under different plans.

This is not a cost estimator.

Don't use these examples to estimate your actual costs under this plan. The actual care you receive will be different from these examples, and the cost of that care will also be different.

See the next page for important information about these examples.

Having a baby
(normal delivery)

- **Amount owed to providers:** $7,540
- **Plan pays** $6,210
- **Patient pays** $1,330

Sample care costs:

Hospital charges (mother)	$2,700
Routine obstetric care	$2,100
Hospital charges (baby)	$900
Anesthesia	$900
Laboratory tests	$500
Prescriptions	$200
Radiology	$200
Vaccines, other preventive	$40
Total	**$7,540**

Patient pays:

Deductibles	$0
Copays	$0
Coinsurance	$1,300
Limits or exclusions	$30
Total	**$1,330**

Note: These numbers assume the patient has enrolled in the Plan's Health Pregnancy Program. If you are pregnant, and have not given notice of your pregnancy to the Plan, your costs may be higher. For more information, please contact Sanford Health Plan at 1-888-315-0885 *(toll-free)* | TTY/TDD: 1-877-652-1844 *(toll-free)*.

Managing type 2 diabetes
(routine maintenance of a well-controlled condition)

- **Amount owed to providers:** $5,400
- **Plan pays** $3,350
- **Patient pays** $2,050

Sample care costs:

Prescriptions	$2,900
Medical Equipment and Supplies	$1,300
Office Visits and Procedures	$700
Education	$300
Laboratory tests	$100
Vaccines, other preventive	$100
Total	**$5,400**

Patient pays:

Deductibles	$1,500
Copays	$0
Coinsurance	$500
Limits or exclusions	$50
Total	**$2,050**

Note: These examples do not reflect cost sharing for any Consumer Driven Health Plan such as HRA, HSA, FSA or any wellness program.

North Dakota Public Employees Retirement System | SANFORD HEALTH PLAN

Questions and answers about the Coverage Examples:

What are some of the assumptions behind the Coverage Examples?

- Costs don't include **premiums**.
- Sample care costs are based on national averages supplied by the U.S. Department of Health and Human Services, and aren't specific to a particular geographic area or health plan.
- The patient's condition was not an excluded or preexisting condition.
- All services and treatments started and ended in the same coverage period.
- There are no other medical expenses for any member covered under this plan.
- Out-of-pocket expenses are based only on treating the condition in the example.
- The patient received all care from in-network **providers**. If the patient had received care from out-of-network **providers**, costs would have been higher.

What does a Coverage Example show?

For each treatment situation, the Coverage Example helps you see how **deductibles**, **copayments**, and **coinsurance** can add up. It also helps you see what expenses might be left up to you to pay because the service or treatment isn't covered or payment is limited.

Does the Coverage Example predict my own care needs?

✘ **No.** Treatments shown are just examples. The care you would receive for this condition could be different based on your doctor's advice, your age, how serious your condition is, and many other factors.

Does the Coverage Example predict my future expenses?

✘ **No.** Coverage Examples are **not** cost estimators. You can't use the examples to estimate costs for an actual condition. They are for comparative purposes only. Your own costs will be different depending on the care you receive, the prices your **providers** charge, and the reimbursement your health plan allows.

Can I use Coverage Examples to compare plans?

✓ **Yes.** When you look at the Summary of Benefits and Coverage for other plans, you'll find the same Coverage Examples. When you compare plans, check the "Patient Pays" box in each example. The smaller that number, the more coverage the plan provides.

Are there other costs I should consider when comparing plans?

✓ **Yes.** An important cost is the **premium** you pay. Generally, the lower your **premium**, the more you'll pay in out-of-pocket costs, such as **copayments**, **deductibles**, and **coinsurance**. You should also consider contributions to accounts such as health savings accounts (HSAs), flexible spending arrangements (FSAs) or health reimbursement accounts (HRAs) that help you pay out-of-pocket expenses.

Questions: Call 1-800-499-3416 *(toll-free)* or visit us at **www.sanfordhealthplan.com/ndpers**. If you aren't clear about any of the bolded terms used in this form, see the Glossary. You can view the Glossary at **www.dol.gov/ebsa/pdf/SBCUniformGlossary.pdf** or call 1-800-499-3416 to request a copy.

North Dakota Public Employees Retirement System | SANFORD HEALTH PLAN

North Dakota Public Employees Retirement System (NDPERS)

Dakota Retiree Plan

Medicare Supplement Certificate of Insurance

Plan on the best fit.

North Dakota Public Employees Retirement System
Dakota Plan Health Benefits

SANFORD HEALTH PLAN

North Dakota Public Employees Retirement System (NDPERS) Dakota Retiree Plan

Medicare Supplement Certificate of Insurance

ATTN: NDPERS
PO Box 91110
Sioux Falls, SD 57109
Toll-Free: (800) 499-3416
TTY/TDD: (877) 652-1844
Fax: (701) 234-4570
sanfordhealthplan.com/ndpers

SANFORD HEALTH PLAN
Medicare Supplement

North Dakota Public Employees Retirement System (NDPERS) has established an employee welfare benefit plan for Eligible Employees, Retirees, and their Eligible Dependents. The following Certificate of Insurance (COI) is provided to you in the same manner as required under the Employee Retirement Income Security Act of 1974. Every attempt has been made to provide concise and accurate information. This Certificate of Insurance and the NDPERS Service Agreement, together, are the official benefit plan document for the employee welfare benefit plan established by the Plan Administrator. In case of conflict between this Certificate of Insurance and the NDPERS Service Agreement, the provisions of the NDPERS Service Agreement will control.

Although it is the intention of the Plan Administrator to continue the employee welfare benefit plan for an indefinite period of time, the Plan Administrator reserves the right, whether in an individual case or in general, to eliminate the Benefit Plan.

Sanford Health Plan shall construe and interpret the provisions of the Service Agreement, the Certificate of Insurance and related documents, including doubtful or disputed terms and to determine all questions of eligibility; and to conduct any and all reviews of claims denied in whole or in part.

PLAN NAME

North Dakota Public Employees Retirement System – Dakota Retiree Plan

NAME AND ADDRESS OF EMPLOYER (PLAN SPONSOR)

North Dakota Public Employees Retirement System
400 East Broadway, Suite 505
PO Box 1657
Bismarck, ND 58502

PLAN SPONSOR'S IRS EMPLOYER IDENTIFICATION NUMBER

45-0282090

TYPE OF WELFARE PLAN

Health

TYPE OF ADMINISTRATION

This employee welfare benefit plan is fully insured through Sanford Health Plan and issued by Sanford Health Plan.

NAME AND ADDRESS OF SANFORD HEALTH PLAN

Sanford Health Plan
300 Cherapa Place, Suite 201
Sioux Falls, SD 57103

PLAN ADMINISTRATOR'S NAME, BUSINESS ADDRESS AND BUSINESS TELEPHONE NUMBER

North Dakota Public Employees Retirement System
400 East Broadway, Suite 505
PO Box 1657
Bismarck, ND 58502
1-800-803-7377 | 701-328-3900

NAME AND ADDRESS OF AGENT FOR SERVICE OF LEGAL PROCESS

Plan Administrator	Sanford Health Plan
North Dakota Public Employees Retirement System Sparb Collins, Executive Director 400 East Broadway, Suite 505 PO Box 1657 Bismarck, ND 58502	Sanford Health Plan ATTN: President 300 Cherapa Place, Suite 201 PO Box 91110 Sioux Falls, SD 57109-1110

Service of legal process may be made upon a Plan trustee or the Plan Administrator.

TITLE OF EMPLOYEES AUTHORIZED TO RECEIVE PROTECTED HEALTH INFORMATION

- Administrative Services Division
- Accounting Division
- Benefit Program Development & Research
- Internal Audit Division
- Accounting & IT Division
- Benefit Programs Division
- Executive Director

This includes every employee, class of employees, or other workforce person under control of the Plan Sponsor who may receive the Member's Protected Health Information relating to payment under, health care operations of, or other matters pertaining to the Benefit Plan in the ordinary course of business. These identified individuals will have access to the Member's Protected Health Information only to perform the plan administrative functions the Plan Sponsor provides to the Benefit Plan. Such individuals will be subject to disciplinary action for any use or disclosure of the Member's Protected Health Information in breach or in violation of, or noncompliance with, the privacy provisions of the Benefit Plan. The Plan Sponsor shall promptly report any such breach, violation, or noncompliance to the Plan Administrator; will cooperate with the Plan Administrator to correct the breach, violation and noncompliance to impose appropriate disciplinary action on each employee or other workforce person causing the breach, violation, or noncompliance; and will mitigate any harmful effect of the breach, violation, or noncompliance on any Member whose privacy may have been compromised.

STATEMENT OF ELIGIBILITY TO RECEIVE BENEFITS

Retirees or surviving spouses who are age 65 or entitled to Medicare and are receiving a retirement benefit from the Public Employees Retirement System, the Highway Patrolmen's Retirement System, the Teachers' Insurance and Annuity Association of America-College Retirement Equities Fund (TIAA-CREF), the Job Service Retirement System, Judges' Retirement System, the Teachers' Fund for Retirement (TFFR), or an eligible public retirement system are eligible to receive benefits.

An eligible retiree or surviving spouse is entitled to coverage if an application is submitted within thirty-one (31) days of Medicare entitlement. Each eligible retiree may elect to enroll his/her Eligible Dependents. Eligible employees include Medicare-eligible retired and terminated employees, and their Eligible Dependents, who remain eligible to participate in the uniform group insurance program pursuant to applicable state law as provided in N.D.C.C. §54-52.1-03. For a comprehensive description of eligibility, refer to the NDPERS web site at www.nd.gov/ndpers.

Eligibility to receive benefits under the Benefit Plan is initially determined by the Plan Administrator. When an eligible retiree meets the criteria for eligibility, a membership application must be completed. NDPERS has the ultimate decision making authority regarding eligibility to receive benefits.

DESCRIPTION OF BENEFITS

Refer to Section III.

SOURCES OF PREMIUM CONTRIBUTIONS TO THE PLAN AND THE METHOD BY WHICH THE AMOUNT OF CONTRIBUTION IS CALCULATED

The contributions for single and family coverage are paid by the retiree or surviving spouse.

END OF THE YEAR DATE FOR PURPOSES OF MAINTAINING THE PLAN'S FISCAL RECORDS

June 30

SUMMARY NOTICE AND IMPORTANT PHONE NUMBERS

This COI describes in detail your health care Benefit Plan and governs the Plan's coverage. This COI, any amendments, and related documents comprise the entire Plan between the NDPERS and the Claims Administrator.

A thorough understanding of your coverage will enable you to use your benefits wisely. Please read this COI carefully. If you have any questions about the benefits, please contact Sanford Health Plan's Member Services Department.

This COI describes in detail the Covered Services provisions and other terms and conditions of the Plan.

Physical Address	Mailing Address
Sanford Health Plan 300 Cherapa Place, Suite 201 Sioux Falls, SD 57103	Sanford Health Plan ATTN: NDPERS PO Box 91110 Sioux Falls, SD 57109-1110
Member Services	**Preauthorization/Prior Approval**
(800) 499-3416 *(toll-free)* or TTY/TDD: 1-877-652-1844 *(toll-free)*	The Hospital, your Provider, or you should call: (888) 315-0885 *(toll-free)* or TTY/TDD: (877) 652-1844 *(toll-free)*
Sanford Health Plan Physician Locator	**Website**
If you need to locate a provider in your area, call *(toll-free)*: (800) 499-3416 or TTY/TDD: (877) 652-1844	www.sanfordhealthplan.com/ndpers

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IMPORTANT INFORMATION

Your Medicare supplement health care coverage was developed to help you pay for some of your health care expenses not paid in full by Medicare. *This coverage only pays for those services accepted and approved by Medicare with the exception of benefits for Medically Necessary Emergency Care in a foreign country.*

To understand your supplemental benefits, you must first understand your Medicare benefits. Therefore, it is very important that you read your *Medicare Handbook* carefully. If you do not have a Medicare Handbook, you may order one by calling your Social Security office.

Medicare benefits are divided into two categories: Medicare Part A and Medicare Part B.

- MEDICARE PART A
  Medicare Part A helps pay for inpatient hospital care, care in a skilled nursing facility, home health care, and hospice services. We offer you supplemental benefits in all of these categories.

- MEDICARE PART B
  Medicare Part B helps pay for physician services, outpatient hospital services, durable medical equipment, and a number of other medical services and supplies that are not covered by Medicare Part A. We offer you supplemental benefits in all these categories as stated in *SECTION III: Schedule of Benefits,* with the addition of benefits for Medically Necessary Emergency Care in a foreign country.

Special Communication Needs

In compliance with the Americans with Disabilities Act (ADA), this document can be provided in alternate formats. Anyone with any disability who might need some form of accommodation or assistance concerning the services or information provided, please contact the NDPERS ADA Coordinator at 701-328-3900. The North Dakota Relay Service (TTY) toll-free number is (800) 366-6888.

Please call Sanford Health Plan Member Services if you need help understanding written Plan information at (800) 499-3416 *(toll-free)*. We can read forms to you over the phone and we offer free oral translation in any language through our translation services.

Services for the Deaf and Hearing Impaired

If you are deaf or hearing impaired and need to speak to the Plan, call TTY/TDD: (877) 652-1844 *(toll-free)*.

Services for Visually Impaired

Please contact Member Services toll-free at (800) 499-3416 if you are in need of a large print copy or cassette/CD of this COI or other written materials.

Translation Services

The Plan can arrange for translation services. Free written materials are available in several different languages and free oral translation services are available. Call toll-free 1-877-652-1844 for help and to access translation services.

English: We have free interpreter services to answer any questions you may have about our health or drug plan. To get an interpreter, just call us at 1-877-652-1844 *(toll-free)*. Someone who speaks English/Language can help you. This is a free service.

Spanish: Tenemos servicios de intérprete sin costo alguno para responder cualquier pregunta que pueda tener sobre nuestro plan de salud o medicamentos. Para hablar con un intérprete, por favor llame al 1-877-652-1844 *(toll-free)*. Alguien que hable español le podrá ayudar. Este es un servicio gratuito.

Chinese Mandarin: 我们提供免费的翻译服务，帮助您解答关于健康或药物保险的任何疑 问。如果您需要此翻译服务，请致电 1-877-652-1844 *(toll-free)*. 我们的中文工作人员很乐意帮助您。 这是一项免费服务。

Chinese Cantonese: 您對我們的健康或藥物保險可能存有疑問，為此我們提供免費的翻譯 服務。如需翻譯服務，請致電 1-877-652-1844 *(toll-free)*。我們講中文的人員將樂意為您提供幫助。這 是一項免費服務。

Tagalog: Mayroon kaming libreng serbisyo sa pagsasaling-wika upang masagot ang anumang mga katanungan ninyo hinggil sa aming planong pangkalusugan o panggamot. Upang makakuha ng tagasaling-wika, tawagan lamang kami sa 1-877-652-1844 *(toll-free)*. Maaari kayong tulungan ng isang nakakapagsalita ng Tagalog. Ito ay libreng serbisyo.

French: Nous proposons des services gratuits d'interprétation pour répondre à toutes vos questions relatives à notre régime de santé ou d'assurance-médicaments. Pour accéder au service d'interprétation, il vous suffit de nous appeler au 1-877-652-1844 *(toll-free)*. Un interlocuteur parlant Français pourra vous aider. Ce service est gratuit.

Vietnamese: Chúng tôi có dịch vụ thông dịch miễn phí để trả lời các câu hỏi về chương sức khỏe và chương trình thuốc men. Nếu quí vị cần thông dịch viên xin gọi 1-877-652-1844 *(toll-free)* sẽ có nhân viên nói tiếng Việt giúp đỡ quí vị. Đây là dịch vụ miễn phí .

German: Unser kostenloser Dolmetscherservice beantwortet Ihren Fragen zu unserem Gesundheits- und Arzneimittelplan. Unsere Dolmetscher erreichen Sie unter 1-877-652-1844 *(toll-free)*. Man wird Ihnen dort auf Deutsch weiterhelfen. Dieser Service ist kostenlos.

Korean: 당사는 의료 보험 또는 약품 보험에 관한 질문에 답해 드리고자 무료 통역 서비스를 제공하고 있습니다. 통역 서비스를 이용하려면 전화 1-877-652-1844 *(toll-free)* 번으로 문의해 주십시오. 한국어를 하는 담당자가 도와 드릴 것입니다. 이 서비스는 무료로 운영됩니다.

Russian: Если у вас возникнут вопросы относительно страхового или медикаментного плана, вы можете воспользоваться нашими бесплатными услугами переводчиков. Чтобы воспользоваться услугами переводчика, позвоните нам по телефону 1-877-652-1844 *(toll-free)*. Вам окажет помощь сотрудник, который говорит по-русски. Данная услуга бесплатная.

Arabic:
إننا نقدم خدمات المترجم الفوري المجانية للإجابة عن أي أسئلة تتعلق بالصحة أو جدول الأدوية لدينا. للحصول على مترجم فوري، ليس عليك بمساعدتك. هذه خدمة مجانية سوى الاتصال بنا على 1-877-652-1844. سيقوم شخص ما يتحدث العربية.

Hindi: हमारे स्वास्थ्य या दवा की योजना के बारे में आपके किसी भी प्रश्न के जवाब देने के लिए हमारे पास मुफ्त दुभाषिया सेवाएँ उपलब्ध हैं. एक दुभाषिया प्राप्त करने के लिए, बस हमें 1-877-652-1844 (toll-free) पर फोन करें. कोई व्यक्ति जो हिन्दी बोलता है आपकी मदद कर सकता है. यह एक मुफ्त सेवा है.

Italian: È disponibile un servizio di interpretariato gratuito per rispondere a eventuali domande sul nostro piano sanitario e farmaceutico. Per un interprete, contattare il numero 1-877-652-1844 *(toll-free)*. Un nostro incaricato che parla Italianovi fornirà l'assistenza necessaria. È un servizio gratuito.

Portugués: Dispomos de serviços de interpretação gratuitos para responder a qualquer questão que tenha acerca do nosso plano de saúde ou de medicação. Para obter um intérprete, contacte-nos através do número 1-877-652-1844 *(toll-free)*. Irá encontrar alguém que fale o idioma Português para o ajudar. Este serviço é gratuito.

French Creole: Nou genyen sèvis entèprèt gratis pou reponn tout kesyon ou ta genyen konsènan plan medikal oswa dwòg nou an. Pou jwenn yon entèprèt, jis rele nou nan 1-877-652-1844 *(toll-free)*. Yon moun ki pale Kreyòl kapab ede w. Sa a se yon sèvis ki gratis.

Polish: Umożliwiamy bezpłatne skorzystanie z usług tłumacza ustnego, który pomoże w uzyskaniu odpowiedzi na temat planu zdrowotnego lub dawkowania leków. Aby skorzystać z pomocy tłumacza znającego język polski, należy zadzwonić pod numer 1-877-652-1844 *(toll-free)*. Ta usługa jest bezpłatna.

Japanese: 当社の健康 健康保険と薬品 処方薬プランに関するご質問にお答えするため に、無料の通訳サービスがありますございます。通訳をご用命になるには、1-877-652-1844 *(toll-free)* にお電話ください。日本語を話す人 者 が支援いたします。これは無料のサー ビスです。

INTRODUCTION

This Benefit Plan describes the benefits available to you as a person enrolled under the North Dakota Public Employees Retirement System (NDPERS – Dakota Retiree Plan, which is a Medicare Supplement Benefit Plan).

This Benefit Plan, together with your application for coverage, is a legal agreement between Sanford Health Plan, and You, the Certificate holder, as named on Your Identification Card.

The benefits described are available as long as the required premium is paid. Changes to provisions or premium amounts by NDPERS will be sent to the Certificate holder's address as shown in NDPERS records by ordinary mail no less than thirty-one (31) days prior to the effective date of change.

Benefits described in this Benefit Plan are available to you, for your personal use only, and cannot be transferred or assigned. Any attempt to transfer or assign the benefits of this Benefit Plan to ineligible persons will result in automatic termination of this Benefit Plan by Sanford Health Plan.

You, as the Certificate holder, hereby expressly acknowledge and understand that this Benefit Plan was not entered into based upon representations by any person or entity other than Sanford Health Plan and that no person, entity, or organization other than Sanford Health Plan shall be held accountable or liable to the Certificate holder for any of Sanford Health Plan's obligations to the Certificate holder created under this Benefit Plan. This paragraph shall not create any additional obligations whatsoever on the part of Sanford Health Plan other than those obligations created under other provisions of this Benefit Plan.

Sanford Health Plan (Referred to in this contract as "we", "us", "our", or "the Plan") will provide the coverage stated in this Certificate subject to the provisions and limitations contained herein. We have issued this Certificate in consideration of the payment of the first premium and the statements made in your application.

Cancellation of this or Previous Benefit Plans

A. The Certificate holder may cancel this Benefit Plan at any time by giving written notice to NDPERS in advance of the requested cancellation date. Coverage will be cancelled the first (1st) of the month following NDPERS' receipt of the request for cancellation. Premium paid beyond the date of cancellation will be refunded.

B. This Benefit Plan supersedes all Benefit Plans previously issued under the NDPERS Dakota Retiree Plan.

C. Sanford Health Plan may cancel this Benefit Plan for the following reasons:
   1. Nonpayment of required premium.
   2. Misrepresentation of a material fact by the Certificate holder.

Certificate Term and Renewal

This Certificate is automatically renewed each month with your premium payments unless it is terminated by you or us. Renewal premiums must be paid on or before the renewal date or during the thirty-one (31) days that follow. We cannot refuse to renew this Certificate or place any restrictions on it if you pay the premiums on time. In the event of termination for nonpayment of premium, reinstatement of this Benefit Plan will be at the sole discretion of and subject to conditions established by Sanford Health Plan.

If premium amounts are determined according to age; and it is determined the age has been misstated or miscalculated, premium adjustments will be made as follows:

- If premium amounts were paid in excess of the amount due, the excess premium will be refunded.
- If the premium amount billed was less than required for the age, premium will be increased on the next billing date.

We will send you a written notice at least thirty-one (31) days in advance when we change the premium rates for all Certificates of this form issued by us and in force in North Dakota.

Notice to Buyer

This Certificate may not cover all of the costs associated with medical care incurred by the Buyer during the period of coverage. You are advised to review carefully all Certificate limitations.

Read Your Certificate Carefully

It is a legal contract between You and Us.

DEFINITIONS

Definitions of Terms Included In This Certificate

This section provides an alphabetical list of certain terms and their meaning as used in this Certificate. Defined terms are capitalized wherever they occur in the Certificate.

Accident means accidental bodily injury or injuries sustained by the insured person that occurs while insurance coverage is in force and for which benefits are provided as a direct result, independent of disease or bodily injury or any other cause. This definition does not include injuries for which benefits are provided or available under any workers' compensation, employer's liability or similar law, or motor vehicle no-fault plan.

Assignment means a provider or supplier agrees to accept Medicare's approved charge as full payment for a service or supply. This does not include any deductible or coinsurance amount you are responsible for paying.

Benefit Period means a period of consecutive days that begins with the first day (not included in the previous spell of illness) on which you are furnished inpatient hospital, skilled nursing, or rehabilitation services by a qualified provider in a month for which you are entitled to Medicare Part A benefits. A benefit period ends when you have been out of a hospital or other facility primarily providing skilled nursing or rehabilitation services for sixty (60) days in a row (including the day of discharge).

Calendar Year means the twelve-month period that begins on January 1 and ends with December 31. When you first become covered under this Certificate, the first Calendar Year begins for you on the effective date of your Certificate and ends on the following December 31.

Certificate (may also be called **Benefit Plan** or **Contract**) means the benefits available to you as a person enrolled under the North Dakota Public Employees Retirement System (NDPERS – Dakota Retiree Plan, which is a Medicare Supplement Benefit Plan). This Certificate, together with your application for coverage, is a legal agreement between Sanford Health Plan, and You, the Certificate holder, as named on Your Identification Card.

Certificate holder means You, the person who signed for this Certificate. Certificate is also referred to in this document as "Benefit Plan."

Copayment or Coinsurance means that portion of expenses which must be paid by you.

Covered Services means Medically Necessary, Medicare-approved services and supplies that qualify for payment of benefits under this Certificate.

Custodial Care means Room and Board and other care which is provided for a person due to a mental or physical condition mainly to aid the person in daily living or meeting personal needs.

Deductible (may also be called **Out-of-Pocket Deductible** or **Medicare Deductible**) means the amount of covered expenses which you must pay yourself before benefits will be paid.

Emergency Medical Condition or Emergency Care means the sudden and unexpected onset of a health condition that would lead a Prudent Layperson acting reasonably and possessing the average knowledge of health and medicine to believe that the absence of that requires immediate medical attention , if failure to provide medical attention would could result in serious impairment to bodily functions or serious dysfunction of a bodily organ or part or would place the person's health, or with respect to a pregnant woman, the health of the woman or her unborn child, in serious jeopardy.

Group means the Plan Sponsor that has signed an agreement with Sanford Health Plan to provide health care benefits for Certificate holders.

Health Care Expenses means expenses of health maintenance organizations associated with the delivery of health care services, which expenses are analogous to incurred losses of insurers. Such expenses shall not include: home office and overhead costs; advertising costs commissions and other acquisition costs taxes, capital costs, administrative costs and claims processing costs.

Hospital means a place which provides care and treatment for sick or injured persons as resident bed patients. It must also have:

1. A Registered Graduate Nurse (R.N.) on duty or on call at all times to supervise 24-hour nursing service;
2. The means for diagnosis, treatment and surgery on its premises or in facilities available on a contractually prearranged basis; and
3. A physician is present or on call at all times to supervise all care.

It must be licensed by the laws of the jurisdiction where it is located and run as a Hospital as defined by those laws.

Its main purpose must not be to provide rest, educational or custodial care, care for the aged-or treatment such as that provided by a convalescent home or sanitarium. A place that treats mental or nervous disorders, or provides treatment of a physical disability, will be deemed a Hospital even if it does not have a means for surgery, if it qualifies in all other respects.

Injury means accidental bodily injury sustained by the insured which is the direct cause of loss, independent of disease, bodily infirmity or other causes. This definition does not include injuries for which benefits are provided or available under any workers' compensation, employer's liability or similar law, or motor vehicle no-fault plan.

Inpatient Lifetime Reserve Days means the additional non-renewable sixty (60) days of hospital coverage provided under Medicare Part A for an admission which exceeds ninety (90) days. **Important Note:** Once you use an Inpatient Lifetime Reserve Day, it is not replaced because Inpatient Lifetime Reserve Days are non-renewable.

Medically Necessary or Medical Necessity means services that are appropriate and necessary as determined by a Provider, in terms or type, frequency, level, setting, and duration, according to your diagnosis or condition, and diagnostic testing and preventive services. Medically Necessary care must:

a. be consistent with generally accepted standards of medical practice as recognized by the Plan, as determined by health care Providers in the same or similar general specialty as typically manages the condition, procedure, or treatment at issue; and
b. help restore or maintain your health; or
c. prevent deterioration of your condition; or
d. prevent the reasonably likely onset of a health problem or detect an incipient problem

Medicare means "The Health Insurance for the Aged Act, Title XVIII of the Social Security Amendments of 1965" as then constituted, or later amended.

Medicare Part A means insurance to cover Hospital expenses, such as Room and Board and other inpatient Hospital services.

Medicare Part B means insurance to cover medical expenses, such as Physicians' services, outpatient Hospital services and a number of other non-hospital medical services and supplies.

Medicare Eligible Expenses means expenses which are of the kind covered by Medicare, to the extent recognized as reasonable and Medically Necessary by Medicare.

Medicare Summary Notice (MSN) is a form summarizing the action Medicare took on your claim and what amount, if any, Medicare paid for the services you received.

Nurse means one of the following licensed professionals:
1. Registered Nurse (R.N.);
2. Licensed Practical Nurse (L.P.N.); or
3. Licensed Vocational Nurse (L.V.N.).

Physician means a person who is licensed to practice the healing arts. The Physician must perform only those services permitted by his or her license. Examiners as a physician, or similar boards in other states, and those licensed persons required by State insurance laws to be reimbursed for services legally performed and covered under this Certificate. **Important Note:** This definition will apply to this Certificate only to the extent that it is not more restrictive than the definition of *physician* as defined in the Medicare program. Services rendered otherwise shall not be covered by this Certificate. "Physician" does not include you or any immediate family member. This exclusion does not apply to those in areas in which the immediate family member is the only physician in the area and acting within the scope of their normal employment.

Plan Administrator means the North Dakota Public Employees Retirement System (NDPERS).

Protected Health Information (PHI) means individually identifiable health information, including summary and statistical information, collected from You or on Your behalf that is transmitted by or maintained in electronic media, or transmitted or maintained in any other form or medium and that:
a. is created by or received from a Health Care Provider, health care employer, or health care clearinghouse;
b. relates to Your past, present or future physical or mental health or condition;
c. relates to the provision of health care to You;
d. relates to the past, present, or future payment for health care to You or on Your behalf; or
e. identifies You or could reasonably be used to identify You.

Educational records and employment records are not considered PHI under federal law.

Provider means any licensed or approved health care professional including a physician, psychologist (who has a doctorate degree in psychology with two years clinical experience or who meets the standards of a national register), a chiropractor, optometrist, podiatrist, physical therapist, oral surgeon, certified registered nurse anesthetist, or any other provider approved by Medicare.

Prudent Layperson means a person who is without medical training and who possess an average knowledge of health and medicine and who draws on his or her practical experience when making a decision regarding the need to seek emergency medical treatment.

Qualifying Previous Coverage means with respect to an individual, health benefits, or coverage provided under any of the following:
a. A group health benefit plan;
b. A health benefit plan;
c. Medicare Part A or Part B;
d. Medicaid, other than coverage consisting solely of benefits under a program for distribution of pediatric vaccines;
e. TRICARE (the health care program for military dependents and retirees);
f. A medical care program of the Indian Health Service or of a tribal organization;
g. A state health benefit risk pool, including coverage issued under N.D.C.C. §26.1-08;
h. A Federal Employees Health Benefits Program;
i. A public health plan as defined in federal regulations; and
j. A health benefit plan under §5(e) of the Peace Corps Act [Pub. L. 87-293; 75 Stat. 612; 22 U.S.C. 2504(e)].

Qualifying Previous Coverage must be continuous until at least sixty-three (63) days prior to the Subscriber's Effective Date under this Benefit Plan.

Sickness means illness or disease of the insured person that occurs while insurance coverage is in force. This definition does not include sickness or diseases for which benefits are provided or available under any workers' compensation, employer's liability or similar law, or motor vehicle no-fault plan.

Skilled Nursing Facility means a place which, by law, provides care and treatment to persons who are convalescing as resident bed patients' from a Sickness or Injury after a Hospital stay. It must also:

1. Qualify as a Skilled Nursing Facility under Medicare, or be qualified to receive such approval if requested;
2. Have a registered graduate nurse (R.N.) on duty or on call in the place at all times to supervise 24-hour nursing service;
3. Have a Physician to supervise the operation of the place, and
4. Maintain daily medical records for all patients.

Its main purpose must not be to provide Custodial Care, rest-care for the aged or treatment such as that provided by a clinic or sanitarium.

Total Disability or Totally Disabled means your inability, as a result of injury or sickness, to perform the substantial and material duties of your own occupation or any occupation for which you are fitted by reason of education, training or experience.

Urgent Care Situation means a degree of illness or injury which is less severe than an Emergency Condition, but requires prompt medical attention within twenty-four (24) hours, such as stitches for a cut finger. Urgent care means a request for a health care service or course of treatment with respect to which the time periods for making a non-Urgent Care Request determination:

- Could seriously jeopardize the life or health of the Certificate holder or the ability of the Certificate holder to regain maximum function, based on a prudent layperson's judgment; or
- In the opinion of a Practitioner and/or Provider with knowledge of the Certificate holder's medical condition, would subject the Certificate holder to severe pain that cannot be adequately managed without the health care service or treatment that is the subject of the request.

We, Us or **Our** means Sanford Health Plan.

You or **Your** means the insured under this Certificate. Also known as the Certificate holder.

SECTION I - SERVICES NOT COVERED

No benefits are available for:

1. Services received prior to the Effective Date of this Benefit Plan.
2. Services not allowed by Medicare as Benefits, except as stated in *Section III, Schedule of Benefits.*
3. Services denied by Medicare, except as stated in *Section III, Schedule of Benefits.*
4. Expenses incurred prior to this Certificate's effective date or while your Certificate is not in force.
5. Services when benefits are provided by any governmental unit or social agency, except for Medicaid, or when payment has been made under Medicare Part A or Part B. Medicare Part A and Part B will be considered the primary payor with respect to benefit payments, unless otherwise required by federal law.
6. Services that are experimental or investigative in nature or that are not Medically Necessary as determined by Medicare.
7. Outpatient prescription drugs, unless eligible under Medicare.
8. Services received from a Hospital or a distinct part of a Hospital located in the United States that is not certified by Medicare.
9. Custodial care provided in a Hospital or by a home health agency.
10. Skilled Nursing Facility care costs beyond what is covered by Medicare and this Benefit Plan.
11. Surgery and related services intended solely to improve appearance, but not to restore bodily function or to correct deformity resulting from disease, trauma, congenital or developmental anomalies or previous therapeutic processes.
12. Services when benefits are provided or available under any workers' compensation, employers' liability or similar law, or motor vehicle no-fault plan, unless prohibited by law.
13. Services, treatments or supplies that are not a Medicare Eligible Expense.

If you have any questions after reading your Medicare Handbook and this Certificate, please call Member Services toll-free at (800) 499-3416 | TTY/TDD: (877) 652-1844 *(toll-free)*.

SECTION II - CERTIFICATE PROVISIONS

The documents that make up your contract with us consist of:

- The application you submitted;
- This Benefits Certificate; and
- Any amendments.

Persons Eligible for Coverage

To be eligible for coverage under this Certificate, you must be:

1. Eligible for Medicare;
2. Enrolled in both Medicare Parts A and B; and
3. Eligible for NDPERS Dakota Retiree Plan Coverage.

Effective Date of Insurance

We must receive your Application for Coverage prior to the requested effective date. The effective date of insurance shall then be the date listed on your Application for Coverage or upon underwriting approval (if applicable), whichever is later.

Premiums

1. Premium Changes.
   We will send you a written notice at least thirty-one (31) days in advance when we change the premium rates for all Certificates of this form issued by us and in force in North Dakota.
2. Payment of Premium. All premiums are due and payable on the first of the month. If premium is not received before the date due, a grace period of thirty-one (31) days is allowed. The Certificate holder remains responsible for payment of any premium due during the grace period. In the event of termination for nonpayment of premium, reinstatement of this Benefit Plan will be at the sole discretion of and subject to conditions established by NDPERS.
3. Grace Period. If any premium is not paid within the time allowed for payment, the grace period will begin. A grace period of thirty-one (31) days will be granted for the payment of each premium. During this grace period, the Certificate shall continue in force.
4. Lapse in Coverage. If you fail to pay the premium within the thirty-one (31) day grace period, your coverage will lapse.
5. Reinstatement. You may request reinstatement of this Certificate by submitting new applications to reinstate your health and prescription drug coverage. NDPERS will give you written notice of the decision to accept or deny your application. If reinstated, this Certificate will cover only claims that occurred after the date of reinstatement.

How Payment Works

When a physician or supplier agrees to accept the charge approved by Medicare as full payment for covered services, he or she is said to accept *assignment.* All physicians who participate in the Medicare program agree to accept assignment. If you are not sure if your physician participates in the Medicare program, ask, and he or she will tell you.

If a physician does not accept assignment, he or she may collect more than Medicare's approved amount; we will pay this difference for you when this happens.

If your provider accepts assignment, we will send our payment directly to that provider. If your provider does not accept assignment, we send our payments to you, or, in the event of your death, to your estate.

Filing Claims

You do not need to file a claim for your services. By law, physicians or other suppliers must fill out claim forms for you and send them to Medicare, even if they do not accept assignment. We will accept notice from Medicare Carriers on claims submitted on your behalf by physicians and suppliers or you may submit the Medicare Summary Notice (MSN). Notice of claims should include your name and Certificate number.

You should always make sure your providers know that you have supplemental coverage with us. When you receive health services in North Dakota, Medicare will automatically send your claim to us.

Out-of-State Services

If you receive health services outside of North Dakota, the provider will submit your claim to the Medicare office in that state. After the office processes the claim, you will receive a Medicare Summary Notice (MSN). If the *Notes* section of the MSN says that the information is being sent to your private insurer, we will automatically receive the MSN. If the MSN does not say your private insurer is receiving the information, you need to send the MSN to us so we can process your Medicare supplement benefits. Be sure your identification number and mailing address are shown accurately on the MSN form. You do not need to complete a claim form, just send the MSN, and keep a copy for your own records.

Send your MSN to:

Sanford Health Plan
NDPERS/Medicare Supplement Claims
PO Box 91110
Sioux Falls, SD 57109-1110

Authorized Certificate Changes

No agent, employee or representative of ours has authority to change this Certificate or waive any of its provisions.

No change in this Certificate shall be valid until approved by an executive office of the company and unless such approval be endorsed hereon or attached hereto.

Medicare Deductible and Coinsurance Changes

If Medicare changes its deductible and coinsurance amounts, your Certificate will automatically change to cover the amounts determined by Medicare. Your premium may also be changed at this time. We will give you appropriate notice of such change. This usually happens on January 1st of each year.

When Coverage Ends

Your coverage will end immediately if any of the following occurs:

1. You fraudulently misrepresent or conceal material facts in your application. If this happens, we will recover any claim payment we made, minus any premium paid.
2. If you fail to pay your premium by the end of the thirty-one (31) day grace period See "*Reinstatement*" in the Premium Section above.
3. You terminate this Certificate by giving written notice of termination to NDPERS in advance of the requested cancellation date. Coverage will be cancelled the first (1st) of the month following NDPERS' receipt of the request for cancellation. Premium paid beyond the date of cancellation will be refunded.
4. You are no longer eligible according to the criteria set forth under "*Persons Eligible for Coverage"* in the *Certificate Provisions* Section.

Effects of Termination

If your Certificate is terminated for misrepresentation or the concealment of material facts we will not pay for any services or supplies provided after the date the Certificate is terminated; we will retain legal rights,

including the right to sue based on concealment or misrepresentation; and NDPERS may, at its option, declare the Certificate void.

If, at any time while your insurance under this Certificate is in effect, NDPERS or Sanford Health Plan becomes aware that you are no longer enrolled in both Medicare Parts A and B, NDPERS will notify you and you will need to provide the appropriate information in order to process any claim.

Note: Failure to be enrolled, and maintain continuous coverage, in Medicare Parts A and B will result in termination of your Certificate. You may be required to change your Benefit Plan, which may result in coverage differences and increased premiums.

If your Certificate is terminated for reasons other than concealment or misrepresentation of material facts, we may stop payment for any services or supplies the day your Certificate is terminated.

An exception to this applies in the case of a continuous loss that commenced while this Certificate is in force. If you receive covered professional or facility services as an inpatient of a hospital or skilled nursing facility on the date this Certificate terminates, payment for these covered services will end on the earliest of the following:

- the date you are first discharged from the facility following termination of this Certificate;
- the date the Certificate coverage period would have ended if this Certificate had not been terminated, that is, the end of the calendar year during which you were an inpatient;
- the date your Medicare benefits are exhausted if no additional benefits would otherwise have been covered under this Certificate had it remained in effect; or
- payment of maximum benefits.

Suspension of Coverage and Reinstatement

1. During Medicaid Eligibility

   At your request, your Certificate will be suspended for a period of time not to exceed twenty-four (24) months during which you have applied for and are entitled to medical assistance under Title XIX of the Social Security Act (Medicaid). You must notify NDPERS within ninety (90) days of the date you become entitled to such assistance.

   Provided you notified NDPERS within ninety (90) days after the date you have become entitled to Medicaid, NDPERS shall return to you that portion of the premium you paid which is attributable to the period of Medicaid eligibility, subject to adjustment for paid claims.

   If your entitlement to this assistance (Medicaid) is terminated during the twenty-four (24) month period, and you notify NDPERS within ninety (90) days of this termination, coverage that is substantially the same as that in effect at the point of suspension shall be reinstated at premium classification terms that would have applied to you had your coverage never been suspended. You must pay the premium attributable to the period, effective as of the date of termination of Medicaid entitlement.

   Reinstatement of Coverage:

   - will not provide for any waiting period for treatment of preexisting conditions;
   - will provide coverage substantially equivalent to the coverage in effect before the date of suspension; and
   - will provide for premium classification on terms at least as favorable to you as the premium classification terms that would have applied had the coverage not been suspended.

2. During Enrollment in Group Health Plan

   You may request a suspension in coverage if you are under age 65, enrolled in Medicare benefits as the result of disability, and enrolled in a group health plan sponsored by your current or former employer, or employee organization. To suspend your Certificate, you must notify NDPERS within ninety (90) days after the date you become enrolled in such group coverage. NDPERS shall return to you that portion of the premium paid by you which is attributable to the period of the other coverage, subject to adjustment for paid claims.

   If a suspension occurs and you lose entitlement to the group coverage, your Medicare supplement Certificate will be reinstated automatically as of the date your group coverage is terminated, if you notify

NDPERS that you lost your group coverage. You must notify NDPERS within ninety (90) days after the date of such loss.

Reinstatement of Coverage:

- will not provide for any waiting period for treatment of preexisting conditions;
- will provide coverage substantially equivalent to the coverage in effect before the date of suspension; and
- will provide for premium classification on terms at least as favorable to you as the premium classification terms that would have applied had the coverage not been suspended.

Our Right to Recover Payments

If for any reason we make payment under this Certificate in error, we may recover the amount we paid.

1. Medical Payment Benefit Coordination
   If a Certificate holder is eligible for medical payment benefits provided by any other collectible insurance as a result of an injury, the benefits available under this Benefit Plan will be reduced by and coordinated with the medical payment benefits provided by any other collectible insurance not prohibited from coordination of benefits.

2. Rights of Subrogation, Reimbursement, and Assignment
   Once you receive benefits under this Certificate arising from an illness or injury, we will assume any legal right you have to collect compensation, damages, or any other payment related to the illness or injury, including benefits from any of the following:
   - The responsible person's insurer;
   - Uninsured motorist coverage;
   - Underinsured motorist coverage; or
   - Other insurance coverage.

   You agree to the following:
   - You will let us know about any potential claims or rights of recovery related to the illness or injury;
   - You will furnish any information and assistance that we may reasonably require to enforce our rights under this Certificate;
   - You will do nothing to prejudice our rights and interests;
   - You will not compromise, settle, surrender, or release any claim or right of recovery described above, without getting our written permission; and
   - You must reimburse us to the extent of benefit payments made under this Certificate if payment is received from the other party or parties.
   - You must notify us if you have the potential right to receive payment from someone else.
   - You must cooperate with us to ensure our rights to subrogation are protected.

Notice of Communication

You may send any written notice or communication to our office at:
Sanford Health Plan
ATTN: NDPERS/Member Services
PO Box 91110
Sioux Falls, SD 57109-1110

Any notice from us is acceptable when sent to your address as it appears on our records.

Legal Actions

No legal or equitable action may be brought against us because of a claim under this Certificate, or because of the alleged breach of this Certificate, sooner than sixty (60) days from the filing of a claim and not more than three (3) years after the end of the calendar year in which the health care services or supplies were provided under this Benefit Plan.

Time Limit on Certain Defenses

The validity of this Benefit Plan may not be contested, except for nonpayment of premium, after it has been in force for two (2) years, beginning on the individual Certificate holder's Effective Date. Further, the validity of this Benefit Plan may not be contested on the basis of a statement made relating to insurability by any Certificate holder after continuous coverage has been in force for two (2) years during the Certificate holder's lifetime, unless the statement is written and signed by such Certificate holder. This time limit does not apply to fraudulent misstatements.

After two (2) years from the effective date of this Certificate, no misstatements, except fraudulent misstatements, made by you in the application for such Certificate shall be used to void the Certificate or to deny a claim for loss incurred or disability commencing, after the expiration of such two (2) year period.

Notice and Proof of Claim

You are responsible for providing Sanford Health Plan with written notice and proof of a claim for benefits within 24 months after the occurrence or commencement of a loss for which benefits are available under this Benefit Plan. The written notice and proof of claim must include the information necessary for Sanford Health Plan to determine benefits.

Payment of claims will be made upon receipt of written notice and proof of a claim as stated above.

Premium Refund Due to Death

In the event of death, Sanford Health Plan will refund to the Plan Administrator (NDPERS) all premiums paid beyond the month of the Certificate holder's death, within thirty-one (31) days after receiving notice of the death.

Physical Examinations

Sanford Health Plan, at its own expense may require a physical examination of the Certificate holder as often as necessary during the pendency of a claim and may require an autopsy in case of death if the autopsy is not prohibited by law.

Non-assignment

Benefits for covered services in this Certificate are for your personal benefit and cannot be transferred or assigned to anyone else. Any attempt to assign this Certificate or rights to payment will be void.

Conformity with State and Federal Laws

Any provision of this Benefit Plan that, on its effective date, is in conflict with the statutes of the state of North Dakota on such date is hereby amended to conform to the minimum requirements of such statutes.

If at any time during the life of the Certificate, federal or state law changes which would require a corresponding change in the coverage, we reserve the right, subject to regulatory approval, to change Certificate language, benefits or premium rates, but only insofar as necessary to comply with the changes in law.

To the extent not superseded by the laws of the United States, this Certificate will be construed in accordance with and governed by the laws of the State. Any action brought because of a claim under this Certificate will be litigated in the state or federal courts located in your State of legal residence and no other.

Certificate of Creditable Coverage

When coverage under this Benefit Plan is terminated, Sanford Health Plan will, within a reasonable period of time, issue you a Certificate of Creditable Coverage. Certificates of Creditable Coverage may also be obtained from Sanford Health Plan upon request within 24 months after coverage is terminated. Certificates of Creditable Coverage will only reflect continuous coverage provided through Sanford Health Plan.

Assignment of Records

You agree that any Provider or person(s) having information relating to an illness or injury for which benefits are claimed under this Benefit Plan may furnish such information to Sanford Health Plan upon request.

The Certificate holder authorizes the Centers for Medicare and Medicaid Services to furnish information as to any payments under Medicare Part A or Part B to Sanford Health Plan for use in determining benefit payment under this Benefit Plan. Sanford Health Plan agrees to use this information only for the stated purpose.

Confidentiality

All Protected Health Information (PHI) maintained by Sanford Health Plan under this Benefit Plan is confidential. Any PHI about You under this Benefit Plan obtained by Sanford Health Plan from You or from a Provider may not be disclosed to any person except:

1. Upon a written, dated, and signed authorization by you or by a person authorized to provide consent for a minor or an incapacitated person;
2. If PHI identifies the Provider, upon a written, dated, and signed approval by the Provider. Sanford Health Plan may also disclose to a Provider, as part of a contract or agreement in which the Provider is a party, data or information that identifies a Provider as part of mutually agreed upon terms and conditions of the contract or agreement;
3. If the data or information does not identify either the Certificate holder or the Provider, the data or information may be disclosed upon request for use for statistical purposes or research;
4. Pursuant to statute or court order for the production or discovery of evidence; or
5. In the event of a claim or litigation between the Certificate holder or prospective Certificate holder and Sanford Health Plan in which the PHI is pertinent.

This section may not be construed to prevent disclosure necessary for Sanford Health Plan to conduct health care operations, including utilization review or management consistent with state law, to facilitate payment of a claim, to analyze health plan claims or health care records data, to conduct disease management programs with Providers, or to reconcile or verify claims under a shared risk or capitation arrangement. This section does not apply to PHI disclosed by Sanford Health Plan as part of a research project approved by an institutional review board established under federal law. This section does not apply to PHI disclosed by Sanford Health Plan to the insurance commissioner for access to records of Sanford Health Plan for purposes of enforcement or other activities related to compliance with state or federal laws.

Sanford Health Plan has implemented administrative, physical and technical safeguards that reasonably and appropriately protect the confidentiality, integrity and availability of Your PHI that Sanford Health Plan creates, receives, maintains, or transmits.

Privacy of Protected Health Information

Sanford Health Plan will not disclose the Certificate holder's Protected Health Information (PHI) to the Group unless the Group certifies that the Benefit Plan has been amended to incorporate the privacy restrictions required under federal and state law, and agrees to abide by them.

Sanford Health Plan will disclose the Certificate holder's PHI to the Group to carry out administrative functions under the terms of the Benefit Plan, but only in accordance with applicable federal and state law. Any disclosure to and use by the Group of the Certificate holder's PHI will be subject to and consistent with this section. Sanford Health Plan will not disclose the Certificate holder's PHI to the Group unless such disclosures are included in a notice of privacy practices distributed to the Certificate holder. Sanford Health Plan will not disclose the Certificate holder's PHI to the Group for actions or decisions related to the Certificate holder's employment or in connection with any other benefits made available to the Certificate holder.

The following restricts the Group's use and disclosure of the Certificate holder's PHI:

1. The Group will neither use nor further disclose the Certificate holder's PHI except as permitted by the Benefit Plan or required by law.

2. The Group will ensure that anyone who receives the Certificate holder's PHI agrees to the restrictions and conditions of the Benefit Plan with respect to the Certificate holder's PHI.
3. The Group will not use or disclose the Certificate holder's PHI for actions or decisions related to the Certificate holder's employment or in connection with any other benefit made available to the Certificate holder.
4. The Group will promptly report to the Plan Administrator any use or disclosure of the Certificate holder's PHI that is inconsistent with the uses and disclosures allowed under this section upon learning of such inconsistent use or disclosure.
5. In accordance with federal law, the Group will make PHI available to the Certificate holder who is the subject of the information. Such information is subject to amendment; and, upon proper notice, the Group will amend the Certificate holder's PHI where appropriate.
6. The Group will document disclosures it makes of the Certificate holder's PHI so the Plan Administrator is able to provide an accounting of disclosures as required under applicable state and federal law.
7. The Group will make its internal practices, books, and records relating to its use and disclosure of the Certificate holder's PHI available to the Plan Administrator and to the U.S. Department of Health and Human Services as necessary to determine compliance with federal law.
8. The Group will, where feasible, return or destroy all Certificate holders' PHI in whatever form or medium received from the Plan Administrator, including all copies of and any data or compilations derived from and allowing identification of any Certificate holder when the Certificate holder's PHI is no longer needed for the plan administration functions for which the disclosure was made. If it is not feasible to return or destroy all Certificate holders' PHI, the Group will limit the use or disclosure of any Certificate holders' PHI to those purposes that make the return or destruction of the information infeasible.

Notice of Privacy Practices

THIS NOTICE DESCRIBES HOW HEALTH INFORMATION ABOUT YOU MAY BE USED AND DISCLOSED AND HOW YOU CAN GET ACCESS TO THIS INFORMATION. PLEASE REVIEW IT CAREFULLY.

This Notice applies to Sanford Health Plan. If you have questions about this Notice, please contact Member Services at (800) 499-3416 *(toll-free)* | TTY/TDD (877) 652-1844 *(toll-free)*. You may also email your questions to memberservices@sanfordhealth.org.

This Notice describes how we will use and disclose your health information. The terms of this Notice apply to all health information generated or received by Sanford Health Plan, whether recorded in our business records, your medical record, billing invoices, paper forms, or in other ways.

HOW WE USE AND DISCLOSE YOUR HEALTH INFORMATION

We use or disclose your health information as follows (In Minnesota we will obtain your prior consent):

- Help manage the health care treatment you receive: We can use your health information and share it with professionals who are treating you. For example, a doctor may send us information about your diagnosis and treatment plan so we can arrange additional services.
- Pay for your health services: We can use and disclose your health information as we pay for your health services. For example, we share information about you with your primary care physician to coordinate payment for those services.
- For our health care operations: We may use and share your health information for our day-to-day operations, to improve our services, and contact you when necessary. For example, we use health information about you to develop better services for you. We are not allowed to use genetic information to decide whether we will give you coverage and the price of that coverage. This does not apply to long-term care plans.

- Administer your plan: We may disclose your health information to your health plan sponsor for plan administration. For example, your company contracts with us to provide a health plan, and we provide your company with certain statistics to explain the premiums we charge.

We may share your health information in the following situations unless you tell us otherwise. If you are not able to tell us your preference, we may go ahead and share your information if we believe it is in your best interest or needed to lessen a serious and imminent threat to health or safety:

- Friends and Family: We may disclose to your family and close personal friends any health information directly related to that person's involvement in payment for your care.
- Disaster Relief: We may disclose your health information to disaster relief organizations in an emergency.

We may also use and share your health information for other reasons without your prior consent:

- When required by law: We will share information about you if state or federal law require it, including with the Department of Health and Human services if it wants to see that we're complying with federal privacy law.
- For public health and safety: We can share information in certain situations to help prevent disease, assist with product recalls, report adverse reactions to medications, and to prevent or reduce a serious threat to anyone's health or safety.
- Organ and tissue donation: We can share information about you with organ procurement organizations.
- Medical examiner or funeral director: We can share information with a coroner, medical examiner, or funeral director when an individual dies.
- Workers' compensation and other government requests: We can share information to employers for workers' compensation claims. Information may also be shared with health oversight agencies when authorized by law, and other special government functions such as military, national security and presidential protective services.
- Law enforcement: We may share information for law enforcement purposes. This includes sharing information to help locate a suspect, fugitive, missing person or witness.
- Lawsuits and legal actions: We may share information about you in response to a court or administrative order, or in response to a subpoena.
- Research: We can use or share your information for certain research projects that have been evaluated and approved through a process that considers a patient's need for privacy.

We may contact you in the following situations:

- Treatment options: To provide information about treatment alternatives or other health related benefits or Sanford Health Plan services that may be of interest to you.
- Fundraising: We may contact you about fundraising activities, but you can tell us not to contact you again.

YOUR RIGHTS THAT APPLY TO YOUR HEALTH INFORMATION

When it comes to your health information, you have certain rights.

- Get a copy of your health and claims records: You can ask to see or get a paper or electronic copy of your health and claims records and other health information we have about you. We will provide a copy or summary to you usually within thirty (30) days of your request. We may charge a reasonable, cost-based fee.
- Ask us to correct your health and claims records: You can ask us to correct health information that you think is incorrect or incomplete. We may deny your request, but we'll tell you why in writing. These requests should be submitted in writing to the contact listed below.
- Request confidential communications: You can ask us to contact you in a specific way (for example, home or office phone) or to send mail to a different address. Reasonable requests will be approved. We must say "yes" if you tell us you would be in danger if we do not.
- Ask us to limit what we use or share: You can ask us to restrict how we share your health information for treatment, payment, or our operations. We are not required to agree to your request, and we may say "no" if it would affect your care. If you are not able to tell us your preference, for example if you are unconscious, we may go ahead and share your information if we believe it is in your best interest. We may also share your information when needed to lessen a serious and imminent threat to health or safety.

- Get a list of those with whom we've shared information: You can ask for a list (accounting) of the times we've shared your health information for six (6) years prior, who we've shared it with, and why. We will include all disclosures except for those about your treatment, payment, and our health care operations, and certain other disclosures (such as those you asked us to make). We will provide one (1) accounting a year for free, but we will charge a reasonable cost-based fee if you ask for another within twelve (12) months.
- Get a copy of this privacy notice: You can ask for a paper copy of this Notice at any time, even if you have agreed to receive it electronically. We will provide you with a paper copy promptly.
- Choose someone to act for you: If you have given someone medical power of attorney or if someone is your legal guardian, that person can exercise your rights and make choices about your health information. We will make sure the person has this authority and can act for you before we take any action.
- File a complaint if you feel your rights are violated: You can complain to the U.S. Department of Health and Human Services Office for Civil Rights if you feel we have violated your rights. We can provide you with their address. You can also file a complaint with us by using the contact information below. We will not retaliate against you for filing a complaint.

  Contact Information:
  Sanford Health Plan
  ATTN: NDPERS/Member Services
  PO Box 91110
  Sioux Falls, SD 57109-1110
  Phone: (800) 499-3416 *(toll-free)*
  TTY/TDD: (877) 652-1844 *(toll-free)*

OUR RESPONSIBILITIES REGARDING YOUR HEALTH INFORMATION

- We are required by law to maintain the privacy and security of your health information.
- We will let you know promptly if a breach occurs that may have compromised the privacy or security of your health information.
- We must follow the duties and privacy practices described in this Notice and offer to give you a copy.
- We will not use, share, or sell your information for marketing or any purpose other than as described in this Notice unless you tell us to in writing. You may change your mind at any time by letting us know in writing.

CHANGES TO THIS NOTICE

We may change the terms of this Notice, and the changes will apply to all information we have about you. The new Notice will be available upon request and on our website www.sanfordhealthplan.com/ndpers.

EFFECTIVE DATE

This Notice of Privacy Practices is effective September 23, 2013.

NOTICE OF ORGANIZED HEALTH CARE ARRANGEMENT FOR SANFORD HEALTH PLAN

Sanford Health Plan and Sanford Health Plan of Minnesota have agreed, as permitted by law, to share your health information among themselves for the purposes of treatment, payment, or health care operations. This notice is being provided to you as a supplement to the above Notice of Privacy Practices.

Security Measures for Electronic Protected Health Information

1. The Group will implement administrative, physical, and technical safeguards that reasonably and appropriately protect the confidentiality, integrity, and availability of Certificate holders' electronic PHI that the Group creates, receives, maintains, or transmits on the Plan Administrator's behalf.

2. The Group will report to the Plan Administrator any attempted or successful: (1) unauthorized access, use, disclosure, modification, or destruction of Certificate holders' electronic PHI; or (2) interference with the Group's system operations in the Group's information systems, of which the Group becomes aware, except any such security incident that results in disclosure of Certificate holders' PHI not permitted by the Benefit

Plan must be reported to the Plan Administrator as required in accordance with the provisions of this Certificate, and state and federal laws.

3. The Group will support the adequate separation between the Group and the Plan Administrator, as specified in the Benefit Plan, with reasonable and appropriate security measures.

Time Periods

All periods begin and end at 12:00 A.M. local time in the city of your legal residence.

SECTION III - SCHEDULE OF BENEFITS

NDPERS – Dakota Retiree Plan

This Benefit Plan supplements Your Medicare Part A and Part B coverage by providing benefits for that portion of Medicare Cost Sharing Amounts applied to Medicare Eligible Expenses not paid by Medicare. Medicare Cost Sharing Amounts include Medicare Deductible, Coinsurance and Copayment Amounts. The benefits available under this Benefit Plan shall automatically change to coincide with any changes in the applicable Medicare Deductible, Coinsurance and Copayment Amounts. Premium may be modified to reflect such changes in the Cost Sharing Amounts.

You are entitled to the following covered services subject to the terms, conditions and limitations of this Benefit Plan.

Basic "Core" Benefits

Inpatient Hospital Services

1. The Medicare Part A Deductible Amount applied during the initial sixty (60) days of an inpatient Hospital Admission in a Benefit Period.
2. The Medicare Coinsurance Amounts applied to Medicare Eligible Expenses for days sixty-one (61) through ninety (90) of an Admission in any Benefit Period.
3. The Medicare Coinsurance Amounts applied to Medicare Eligible Expenses for Lifetime Reserve Days utilized after the ninetieth (90^{th}) day of an Admission in any Benefit Period.
4. If an Admission continues beyond the ninetieth (90^{th}) day and the Certificate holder has utilized all of the Lifetime Reserve Days, benefits will be available for Medically Necessary care up to a lifetime maximum of an additional 365 days.
5. Upon exhaustion of the Medicare hospital inpatient coverage, including the Lifetime Reserve Days, 100% coverage of the Medicare Part A eligible expenses for hospitalization paid at the rate at which Medicare was paying on the last day prior to exhaustion of Medicare hospital inpatient coverage, subject to a lifetime maximum benefit of an additional 365 days. The provider shall accept the Plan's payment as payment in full and may not bill the insured for any balance.
6. Coverage of Medicare Part A copayment/coinsurance amount for all eligible hospice care and respite care expenses.

Blood Services

1. The first three (3) pints of blood under Medicare Part A.
2. The first three (3) pints of blood and Medicare Coinsurance Amount applied under Medicare Part B.

Medicare Part B Eligible Expenses

The Medicare Coinsurance Amounts, or in the case of Hospital outpatient department services paid under a prospective payment system, the Copayment Amounts, applied to Medicare-Eligible Expenses under Medicare Part B, regardless of Hospital confinement.

Additional Benefits

1. Medicare Part A deductible: Coverage for the entire Medicare Part A inpatient hospital deductible amount for each benefit period.
2. Medicare Part B deductible: Coverage for all of the Medicare Part B deductible amounts for each calendar year regardless of hospital confinement.

Medicare Part B Excess Charges

Coverage for all of the difference (100%) between the actual Medicare Part B charge, as billed, not to exceed any charge limitation established by the Medicare program or state law, and the Medicare-approved Part B charge.

In addition to the Medicare Deductible and Coinsurance Amounts, this Benefit Plan provides benefits for the difference between the actual Medicare Part B allowed charge and the actual charge for the service as billed, not to exceed any charge limitation established by the Medicare program.

Skilled Nursing Facility Services

Coverage for the actual billed charges up to the coinsurance amount from the twenty-first (21^{st}) day through the one-hundredth (100^{th}) day in a Medicare benefit period for post-hospital skilled nursing facility care eligible under Medicare Part A. No benefits will be available if the Admission is not approved by Medicare.

Benefits for Emergency Care in a Foreign Country

Coverage to the extent not covered by Medicare for 80% of the billed charges for Medicare-eligible expenses for Medically Necessary emergency hospital, physician, and medical care received in a foreign country, if the care would have been covered by Medicare if provided in the United States and if the care began during the first sixty (60) consecutive days of each trip outside the United States, subject to a deductible for each calendar year of $250 and a lifetime maximum benefit of $50,000.

NDPERS Dakota Retiree Plan

Outline of Medicare Supplement Coverage

Plan on the best fit.

SANFORD HEALTH PLAN

Medicare Supplement

HP-0496 7/15

NDPERS Dakota Retiree Plan Medicare (Part A) Hospital Services – Per Benefit Period			
Services	**Medicare Pays**	**Dakota Retiree Plan Pays**	**You Pay**
Hospitalization [1] Semiprivate room and board, general nursing and miscellaneous services and supplies			
• First 60 days	All but $1,260	$1,260 (Part A deductible)	$0
• 61st thru 90th day	All but $315 a day	$315 a day	$0
• 91st day and after:			
- While using 60 lifetime reserve days	All but $630 a day	$630 a day	$0
• Once lifetime reserve days are used:			
- Additional 365 days	$0	100% of Medicare eligible expenses [2]	$0 [2]
- Beyond the additional 365 days	$0	$0	All costs
Skilled Nursing Facility Care [1] You must meet Medicare's requirements, including having been in a hospital for at least 3 days and entered a Medicare approved facility within 30 days after leaving the hospital			
• First 20 days	All approved amounts	$0	$0
• 21st thru 100th day	All but $157.50 a day	Up to $157.50 a day	$0
• 101st day and after	$0	$0	All costs
Blood			
• First 3 pints	$0	3 pints	$0
• Additional amounts	100%	$0	$0
Hospice Care You must meet Medicare's requirements, including a doctor's certification of terminal illness.	All but very limited copayment/ coinsurance for outpatient drugs and inpatient respite care	$0	Balance

[1] A benefit period begins on the first day you receive services as an inpatient in a hospital and ends after you have been out of the hospital and have not received skilled care in any other facility for 60 days in a row.

[2] When your Medicare Part A hospital benefits are exhausted, the insurer stands in the place of Medicare and will pay whatever amount Medicare would have paid for up to an additional 365 days as provided in the policy's "Core Benefits." During this time, the hospital is prohibited from billing you for the balance based on any difference between its billed charges and the amount Medicare would have paid.

NDPERS Dakota Retiree Plan Medicare (Part B) Medicare Services – Per Calendar Year			
Services	**Medicare Pays**	**Dakota Retiree Plan Pays**	**You Pay**
Medical Expenses In or out of the hospital and outpatient hospital treatment, such as Physician's services, inpatient and outpatient medical and surgical services and supplies, physical and speech therapy, diagnostic tests, durable medical equipment			
• First $147 of Medicare approved amounts [3]	$0	$147 (Part B deductible)	$0
• Remainder of Medicare approved amounts	Generally 80%	Generally 20%	$0
Part B Excess Charges (Above Medicare approved amounts)	$0	100%	$0
Blood			
• First 3 pints	$0	All costs	$0
• Next $147 of Medicare approved amounts [3]	$0	$147 (Part B deductible)	$0
• Remainder of Medicare approved amounts	80%	20%	$0
Clinical Laboratory Services Blood tests for diagnostic services	100%	$0	$0
Parts A & B			
Home Health Care Medicare approved services			
• Medically necessary skilled care services and medical supplies	100%	$0	$0
• Durable medical equipment			
- First $147 of Medicare approved amounts [3]	$0	$147 (Part B deductible)	$0
- Remainder of Medicare approved amounts	80%	20%	$0

[3] Once you have been billed $147 of Medicare Approved Amounts for covered services, you Part B Deductible will have been met for the calendar year.

NDPERS Dakota Retiree Plan Medicare (Part B) Medicare Services – Per Calendar Year			
Services	**Medicare Pays**	**Dakota Retiree Plan Pays**	**You Pay**
Other Benefits – Not Covered by Medicare			
Foreign Travel Not covered by Medicare, medically necessary emergency care services • Beginning during the first 60 days of each trip outside the USA - First $250 each calendar year - Remainder of charges	 $0 $0	 $0 80% to a lifetime maximum benefit of $50,000	 $250 20% and amounts over the $50,000 lifetime maximum

These Are Some Items Not Covered

- Services that are experimental or investigative in nature or that are not medically necessary as determined by Medicare.
- Services received prior to the effective date of your benefit plan.
- Services when benefits are provided by any governmental unit or social agency except Medicaid or when payment has been made under Medicare Part A or Part B.
- Outpatient prescription drugs, unless eligible under Medicare.
- Custodial care provided in a hospital or by a home health agency.
- Surgery to improve appearance.
- Services, treatments or supplies that are not a Medicare eligible expense.

Notice

This Policy may not fully cover all of your medical costs.

This outline of coverage does not give all the details of Medicare coverage. Contact your Social Security Office or consult "*The Medicare and You Handbook*" for more details.

Neither Sanford Health Plan nor its agents are connected with Medicare.

Exhibit B
Health Plan Performance Guarantees

Performance Standards and Guarantees for the Biennium

Criteria	Value of Forfeiture
By December 31, 2015, 10% of NDPERS members have completed a Health Risk Assessment	$15,000
By December 31 2016, NDPERS will have a 5% point increase in the NDPERS group aggregate HRA wellness score.	$10,000
By December 31, 2015, 10% of NDPERS members will have created a myHealthPlan account where they can access our beWell Health Management Tool and the incentive program.	$7,500
By July 1, 2016 annual percentage average of NDPERS members receiving the Health Club Credit will meet the 2014 annual NDPERS rate.	$7,500
By July 1, 2016, 30% of the NDPERS population will be enrolled in a medical home.	$15,000
HEDIS-like measures breast cancer screening rates will be at least 80%	$15,000
HEDIS-like measures cervical cancer screening rates will be at least 85%	$15,000
HEDIS-like measures colorectal cancer screening rates will be at least 60%	$15,000
Amount incorporates a requested increase from the current level. By Dec. 31st, 2015 SHP will maintain an NDPERS PPO network consisting of 85% or more of the in-state hospitals, MDs and DOs that participate in the Company's Par Network.	$75,000
SHP guarantees NDPERS a minimum provider discount from in-network providers (1-(Allowed/Billed)) of 30% for Non-Medicare contracts.	$140,000
Claims Financial Accuracy will be 99% or greater	$25,000
Claims Payment incidence Accuracy will be 97% or greater	$25,000
Claim Timeliness – clean claims processing within 30 calendar days will be 99% or greater	$25,000
Average Speed of Answer will be 45 seconds or less	$25,000
Abandoned rate will be 7% or less	$25,000
The interest rate utilized currently is based on the US Treasury Notes quoted by the Wall Street Journal	$50,000
100% of Rx rebates will be passed-through to NDPERS	$10,000
Grand Total	**$500,000**

Forfeiture values are over the entire biennium and forfeitures will be paid within 30 days of failure to meet standard.

JULY 2015 NDPERS Health Rates
Rate Structure A
For Anyone Enrolled Prior to July 1, 2015
Rates for July 1, 2015 - December 31, 2015

Code	Struct	Description	Total Health Premiums	Medicare Part D Premiums	Total Premiums	Less NDPERS Retention	Total Prem Paid to SHP	Total Prem Paid to BCBSND	Total Paid to SHP	NDPERS Retention	**NDPERS Billing Rate**
Medicare Retiree											
41	11	1 Medicare only	$183.76	$77.90	$261.66	$2.80	$180.96	$77.90	$180.96	$2.80	**$261.66**
42	11	2 Medicare only	$364.42	$155.80	$520.22	$2.80	$361.62	$155.80	$361.62	$2.80	**$520.22**
50	11	3 Medicare only	$545.68	$233.70	$779.38	$2.80	$542.88	$233.70	$542.88	$2.80	**$779.38**
51	11	4 Medicare only	$726.64	$311.60	$1,038.24	$2.80	$723.84	$311.60	$723.84	$2.80	**$1,038.24**
43	11	1 Medicare+Others	$621.44	$77.90	$699.34	$2.80	$618.64	$77.90	$618.64	$2.80	**$699.34**
49	11	2 Medicare+Others	$802.10	$155.80	$957.90	$2.80	$799.30	$155.80	$799.30	$2.80	**$957.90**
55	11	3 Medicare+Others	$983.36	$233.70	$1,217.06	$2.80	$980.56	$233.70	$980.56	$2.80	**$1,217.06**
58	11	4 Medicare+Others	$1,164.32	$311.60	$1,475.92	$2.80	$1,161.52	$311.60	$1,161.52	$2.80	**$1,475.92**
98	11	Single NM Dep GF Status	$437.68		$437.68		$437.68		$437.68		**$437.68**
99	11	Family NM Dep GF Status	$437.68		$437.68		$437.68		$437.68		**$437.68**
44	11	Part A Single	$461.02	$77.90	$538.92	$2.80	$458.22	$77.90	$458.22	$2.80	**$538.92**
Grandfathered Rates											
42	14	2 Medicare only	$364.46	$155.80	$520.26	$2.80	$361.66	$155.80	$361.66	$2.80	**$520.26**
50	14	3 Medicare only	$387.50	$233.70	$621.20	$2.80	$384.70	$233.70	$384.70	$2.80	**$621.20**
51	14	4 Medicare only	$237.84	$311.60	$549.44	$2.80	$235.04	$311.60	$235.04	$2.80	**$549.44**
49	14	2 Medicare+Others	$575.12	$155.80	$730.92	$2.80	$572.32	$155.80	$572.32	$2.80	**$730.92**
98	14	Single NM Dep GF Status	$210.66		$210.66		$210.66		$210.66		**$210.66**
GF Medicare Retirees COBRA (for Non-Medicare dependents of Medicare Retirees)											
30	11	Single	$440.48		$440.48	$2.80	$437.68		$437.68	$11.60	**$449.28**
31	11	Family	$621.14		$621.14	$2.80	$618.34		$618.34	$15.22	**$633.56**
GF Non-Medicare Retiree											
21	11	Single			$816.42	$2.80	$813.62		$813.62	$2.80	**$816.42**
22	11	Family			$1,632.84	$2.80	$1,630.04		$1,630.04	$2.80	**$1,632.84**
23	11	Family (3+)			$2,041.04	$2.80	$2,038.24		$2,038.24	$2.80	**$2,041.04**
GF COBRA											
24	11	Single			$816.42	$2.80	$813.62		$813.62	$19.12	**$832.74**
25	11	Family			$1,632.84	$2.80	$1,630.04		$1,630.04	$35.46	**$1,665.50**
26	11	Family (3+)			$2,041.04	$2.80	$2,038.24		$2,038.24	$43.62	**$2,081.86**

JULY 2015 NDPERS Health Rates
Rate Structure A
For Anyone Enrolled Prior to July 1, 2015
Rates for July 1, 2015 - December 31, 2015

Code	Struct	Description	Total Health Premiums	Medicare Part D Premiums	Total Premiums	Less NDPERS Retention	Total Prem Paid to SHP	Total Prem Paid to BCBSND	Total Paid to SHP	NDPERS Retention	**NDPERS Billing Rate**
GF State Contracts with Wellness Program											
Active					(Flat Single/Family Rate)						
1-3	2	S/F/Dual			$1,130.22	$2.80	$1,127.42		$1,127.42	$2.80	**$1,130.22**
COBRA											
4	2	Single			$544.28	$2.80	$541.48		$541.48	$13.68	**$555.16**
5	2	Family			$1,311.74	$2.80	$1,308.94		$1,308.94	$29.02	**$1,337.96**
Part-Time/Temporary/LOA											
6	2	Single			$544.28	$2.80	$541.48		$541.48	$2.80	**$544.28**
7	2	Family			$1,311.74	$2.80	$1,308.94		$1,308.94	$2.80	**$1,311.74**
NGF State Contracts with Wellness Program											
Active HDHP											
1-3	17	S/F/Dual			$989.68	$2.80	$986.88		$986.88	$143.34	**$1,130.22**
COBRA HDHP											
4	17	Single			$474.34	$2.80	$471.54		$471.54	$12.28	**$483.82**
5	17	Family			$1,142.50	$2.80	$1,139.70		$1,139.70	$25.64	**$1,165.34**
LOA HDHP											
6	17	Single			$474.34	$2.80	$471.54		$471.54	$2.80	**$474.34**
7	17	Family			$1,142.50	$2.80	$1,139.70		$1,139.70	$2.80	**$1,142.50**
GF State Contracts w/o Wellness Program											
Active					(Flat Single/Family Rate)						
1-3	1	S/F/Dual			$1,130.22	$2.80	$1,127.42		$1,127.42	$14.10	**$1,141.52**
COBRA											
4	1	Single			$544.28	$2.80	$541.48		$541.48	$13.68	**$555.16**
5	1	Family			$1,311.74	$2.80	$1,308.94		$1,308.94	$29.02	**$1,337.96**
Part-Time/Temporary/LOA											
6	1	Single			$544.28	$2.80	$541.48		$541.48	$7.54	**$549.02**
7	1	Family			$1,311.74	$2.80	$1,308.94		$1,308.94	$14.22	**$1,323.16**
NGF State Contracts w/o Wellness Program											
Active HDHP											
1-3	16	S/F/Dual			$989.68	$2.80	$986.88		$986.88	$154.64	**$1,141.52**
COBRA HDHP											
4	16	Single			$474.34	$2.80	$471.54		$471.54	$12.28	**$483.82**
5	16	Family			$1,142.50	$2.80	$1,139.70		$1,139.70	$25.64	**$1,165.34**
LOA HDHP											
6	16	Single			$474.34	$2.80	$471.54		$471.54	$7.54	**$479.08**
7	16	Family			$1,142.50	$2.80	$1,139.70		$1,139.70	$14.22	**$1,153.92**

JULY 2015 NDPERS Health Rates
Rate Structure A
For Anyone Enrolled Prior to July 1, 2015
Rates for July 1, 2015 - December 31, 2015

Code	Struct	Description	Total Health Premiums	Medicare Part D Premiums	Total Premiums	Less NDPERS Retention	Total Prem Paid to SHP	Total Prem Paid to BCBSND	Total Paid to SHP	NDPERS Retention	**NDPERS Billing Rate**
GF Political Subdivision Rates with Wellness Program											
Active											
1	4	Single			$581.48	$2.80	$578.68		$578.68	$2.80	**$581.48**
2	4	Family			$1,404.84	$2.80	$1,402.04		$1,402.04	$2.80	**$1,404.84**
COBRA											
4	4	Single			$581.48	$2.80	$578.68		$578.68	$14.42	**$593.10**
5	4	Family			$1,404.84	$2.80	$1,402.04		$1,402.04	$30.90	**$1,432.94**
GF Political Subdivision Rates w/o Wellness Program											
Active											
1	3	Single			$581.48	$2.80	$578.68		$578.68	$8.60	**$587.28**
2	3	Family			$1,404.84	$2.80	$1,402.04		$1,402.04	$16.84	**$1,418.88**
COBRA											
4	3	Single			$581.48	$2.80	$578.68		$578.68	$14.42	**$593.10**
5	3	Family			$1,404.84	$2.80	$1,402.04		$1,402.04	$30.90	**$1,432.94**
NGF Political Subdivision Rates with Wellness Program											
Active											
1	24	Single			$590.32	$2.80	$587.52		$587.52	$2.80	**$590.32**
2	24	Family			$1,426.20	$2.80	$1,423.40		$1,423.40	$2.80	**$1,426.20**
COBRA											
4	24	Single			$590.32	$2.80	$587.52		$587.52	$14.60	**$602.12**
5	24	Family			$1,426.20	$2.80	$1,423.40		$1,423.40	$31.32	**$1,454.72**
Active HDHP											
1	26	Single			$521.10	$2.80	$518.30		$518.30	$2.80	**$521.10**
2	26	Family			$1,258.98	$2.80	$1,256.18		$1,256.18	$2.80	**$1,258.98**
COBRA HDHP											
4	26	Single			$521.10	$2.80	$518.30		$518.30	$13.22	**$531.52**
5	26	Family			$1,258.98	$2.80	$1,256.18		$1,256.18	$27.98	**$1,284.16**
NGF Political Subdivision Rates w/o Wellness Program											
Active											
1	23	Single			$590.32	$2.80	$587.52		$587.52	$8.00	**$595.52**
2	23	Family			$1,426.20	$2.80	$1,423.40		$1,423.40	$15.38	**$1,438.78**
COBRA											
4	23	Single			$590.32	$2.80	$587.52		$587.52	$14.60	**$602.12**
5	23	Family			$1,426.20	$2.80	$1,423.40		$1,423.40	$31.32	**$1,454.72**
Active HDHP											
1	25	Single			$521.10	$2.80	$518.30		$518.30	$8.00	**$526.30**
2	25	Family			$1,258.98	$2.80	$1,256.18		$1,256.18	$15.38	**$1,271.56**
COBRA HDHP											
4	25	Single			$521.10	$2.80	$518.30		$518.30	$13.22	**$531.52**
5	25	Family			$1,258.98	$2.80	$1,256.18		$1,256.18	$27.98	**$1,284.16**

JULY 2015 NDPERS Health Rates
Rate Structure B
New Subscribers or Groups July 1, 2015 and After
Rates for July 1, 2015 - December 31, 2015

Code	Struct	Description	Total Health Premiums	Medicare Part D Premiums	Total Premiums	NDPERS Retention	Total Prem Paid to SHP	Total Prem Paid to BCBSND	Total Paid to SHP	NDPERS Retention	**NDPERS Billing Rate**
Medicare Retiree											
41	12	1 Medicare only	$181.42	$77.90	$259.32	$2.80	$178.62	$77.90	$178.62	$2.80	**$259.32**
42	12	2 Medicare only	$359.76	$155.80	$515.56	$2.80	$356.96	$155.80	$356.96	$2.80	**$515.56**
50	12	3 Medicare only	$538.70	$233.70	$772.40	$2.80	$535.90	$233.70	$535.90	$2.80	**$772.40**
51	12	4 Medicare only	$717.34	$311.60	$1,028.94	$2.80	$714.54	$311.60	$714.54	$2.80	**$1,028.94**
43	12	1 Medicare+Others	$613.50	$77.90	$691.40	$2.80	$610.70	$77.90	$610.70	$2.80	**$691.40**
49	12	2 Medicare+Others	$791.84	$155.80	$947.64	$2.80	$789.04	$155.80	$789.04	$2.80	**$947.64**
55	12	3 Medicare+Others	$970.78	$233.70	$1,204.48	$2.80	$967.98	$233.70	$967.98	$2.80	**$1,204.48**
58	12	4 Medicare+Others	$1,149.42	$311.60	$1,461.02	$2.80	$1,146.62	$311.60	$1,146.62	$2.80	**$1,461.02**
98	12	Single NM Dep GF Status	$432.08		$432.08		$432.08		$432.08		**$432.08**
99	12	Family NM Dep GF Status	$432.08		$432.08		$432.08		$432.08		**$432.08**
GF Medicare Retirees COBRA (for Non-Medicare dependents of Medicare Retirees)											
30	12	Single	$434.88		$434.88	$2.80	$432.08		$432.08	$11.50	**$443.58**
31	12	Family	$613.22		$613.22	$2.80	$610.42		$610.42	$15.06	**$625.48**
GF Non-Medicare Retiree											
21	12	Single			$816.42	$2.80	$813.62		$813.62	$2.80	**$816.42**
22	12	Family			$1,632.84	$2.80	$1,630.04		$1,630.04	$2.80	**$1,632.84**
23	12	Family (3+)			$2,041.04	$2.80	$2,038.24		$2,038.24	$2.80	**$2,041.04**
GF COBRA											
24	12	Single			$816.42	$2.80	$813.62		$813.62	$19.12	**$832.74**
25	12	Family			$1,632.84	$2.80	$1,630.04		$1,630.04	$35.46	**$1,665.50**
26	12	Family (3+)			$2,041.04	$2.80	$2,038.24		$2,038.24	$43.62	**$2,081.86**

JULY 2015 NDPERS Health Rates
Rate Structure B
New Subscribers or Groups July 1, 2015 and After
Rates for July 1, 2015 - December 31, 2015

Code	Struct	Description	Total Health Premiums	Medicare Part D Premiums	Total Premiums	NDPERS Retention	Total Prem Paid to SHP	Total Prem Paid to BCBSND	Total Paid to SHP	NDPERS Retention	**NDPERS Billing Rate**
GF Political Subdivision Rates with Wellness Program											
Active											
1	8	Single			$566.46	$2.80	$563.66		$563.66	$2.80	**$566.46**
2	8	Family			$1,369.74	$2.80	$1,366.94		$1,366.94	$2.80	**$1,369.74**
COBRA											
4	8	Single			$566.46	$2.80	$563.66		$563.66	$14.12	**$577.78**
5	8	Family			$1,369.74	$2.80	$1,366.94		$1,366.94	$30.18	**$1,397.12**
GF Political Subdivision Rates w/o Wellness Program											
Active											
1	7	Single			$566.46	$2.80	$563.66		$563.66	$8.46	**$572.12**
2	7	Family			$1,369.74	$2.80	$1,366.94		$1,366.94	$16.50	**$1,383.44**
COBRA											
4	7	Single			$566.46	$2.80	$563.66		$563.66	$14.12	**$577.78**
5	7	Family			$1,369.74	$2.80	$1,366.94		$1,366.94	$30.18	**$1,397.12**
NGF Political Subdivision Rates with Wellness Program											
Active											
1	28	Single			$575.06	$2.80	$572.26		$572.26	$2.80	**$575.06**
2	28	Family			$1,389.28	$2.80	$1,386.48		$1,386.48	$2.80	**$1,389.28**
COBRA											
4	28	Single			$575.06	$2.80	$572.26		$572.26	$14.30	**$586.56**
5	28	Family			$1,389.28	$2.80	$1,386.48		$1,386.48	$30.58	**$1,417.06**
Active HDHP											
1	30	Single			$507.16	$2.80	$504.36		$504.36	$2.80	**$507.16**
2	30	Family			$1,225.34	$2.80	$1,222.54		$1,222.54	$2.80	**$1,225.34**
COBRA HDHP											
4	30	Single			$507.16	$2.80	$504.36		$504.36	$12.94	**$517.30**
5	30	Family			$1,225.34	$2.80	$1,222.54		$1,222.54	$27.30	**$1,249.84**
NGF Political Subdivision Rates w/o Wellness Program											
Active											
1	27	Single			$575.06	$2.80	$572.26		$572.26	$7.86	**$580.12**
2	27	Family			$1,389.28	$2.80	$1,386.48		$1,386.48	$15.04	**$1,401.52**
COBRA											
4	27	Single			$575.06	$2.80	$572.26		$572.26	$14.30	**$586.56**
5	27	Family			$1,389.28	$2.80	$1,386.48		$1,386.48	$30.58	**$1,417.06**
Active HDHP											
1	29	Single			$507.16	$2.80	$504.36		$504.36	$7.86	**$512.22**
2	29	Family			$1,225.34	$2.80	$1,222.54		$1,222.54	$15.04	**$1,237.58**
COBRA HDHP											
4	29	Single			$507.16	$2.80	$504.36		$504.36	$12.94	**$517.30**
5	29	Family			$1,225.34	$2.80	$1,222.54		$1,222.54	$27.30	**$1,249.84**

JULY 2015 NDPERS Health Rates
Rate Structure A
For Anyone Enrolled Prior to July 1, 2015
Rates for January 1, 2016 -December 31, 2016

Code	Struct	Description	Total Health Premiums	Medicare Part D Premiums	Total Premiums	Less NDPERS Retention	Total Prem Paid to SHP	Total Prem Paid to BCBSND	Total Paid to SHP	NDPERS Retention	**NDPERS Billing Rate**
Medicare Retiree											
41	11	1 Medicare only	$183.76	TBD	TBD	$2.80	TBD	$0.00	TBD	$2.80	**TBD**
42	11	2 Medicare only	$364.42	TBD	TBD	$2.80	TBD	$0.00	TBD	$2.80	**TBD**
50	11	3 Medicare only	$545.68	TBD	TBD	$2.80	TBD	$0.00	TBD	$2.80	**TBD**
51	11	4 Medicare only	$726.64	TBD	TBD	$2.80	TBD	$0.00	TBD	$2.80	**TBD**
43	11	1 Medicare+Others	$621.44	TBD	TBD	$2.80	TBD	$0.00	TBD	$2.80	**TBD**
49	11	2 Medicare+Others	$802.10	TBD	TBD	$2.80	TBD	$0.00	TBD	$2.80	**TBD**
55	11	3 Medicare+Others	$983.36	TBD	TBD	$2.80	TBD	$0.00	TBD	$2.80	**TBD**
58	11	4 Medicare+Others	$1,164.32	TBD	TBD	$2.80	TBD	$0.00	TBD	$2.80	**TBD**
98	11	Single NM Dep GF Status	$437.68		TBD		TBD		TBD		**TBD**
99	11	Family NM Dep GF Status	$437.68		TBD		TBD		TBD		**TBD**
44	11	Part A Single	$461.02	TBD	TBD	$2.80	TBD	$0.00	TBD	$2.80	**TBD**
Grandfathered Rates											
42	14	2 Medicare only	$364.46	TBD	TBD	$2.80	TBD	$0.00	TBD	$2.80	**TBD**
50	14	3 Medicare only	$387.50	TBD	TBD	$2.80	TBD	$0.00	TBD	$2.80	**TBD**
51	14	4 Medicare only	$237.84	TBD	TBD	$2.80	TBD	$0.00	TBD	$2.80	**TBD**
49	14	2 Medicare+Others	$575.12	TBD	TBD	$2.80	TBD	$0.00	TBD	$2.80	**TBD**
98	14	Single NM Dep GF Status	$210.66		TBD		TBD		TBD		**TBD**
GF Medicare Retirees COBRA (for Non-Medicare dependents of Medicare Retirees)											
30	11	Single	$440.48		$440.48	$2.80	$437.68		$437.68	$11.60	**$449.28**
31	11	Family	$621.14		$621.14	$2.80	$618.34		$618.34	$15.22	**$633.56**
GF Non-Medicare Retiree											
21	11	Single			$816.42	$2.80	$813.62		$813.62	$2.80	**$816.42**
22	11	Family			$1,632.84	$2.80	$1,630.04		$1,630.04	$2.80	**$1,632.84**
23	11	Family (3+)			$2,041.04	$2.80	$2,038.24		$2,038.24	$2.80	**$2,041.04**
GF COBRA											
24	11	Single			$816.42	$2.80	$813.62		$813.62	$19.12	**$832.74**
25	11	Family			$1,632.84	$2.80	$1,630.04		$1,630.04	$35.46	**$1,665.50**
26	11	Family (3+)			$2,041.04	$2.80	$2,038.24		$2,038.24	$43.62	**$2,081.86**

JULY 2015 NDPERS Health Rates
Rate Structure A
For Anyone Enrolled Prior to July 1, 2015
Rates for January 1, 2016 -December 31, 2016

Code	Struct	Description	Total Health Premiums	Medicare Part D Premiums	Total Premiums	Less NDPERS Retention	Total Prem Paid to SHP	Total Prem Paid to BCBSND	Total Paid to SHP	NDPERS Retention	**NDPERS Billing Rate**
GF State Contracts with Wellness Program											
Active					(Flat Single/Family Rate)						
1-3	2	S/F/Dual			$1,130.22	$2.80	$1,127.42		$1,127.42	$2.80	**$1,130.22**
COBRA											
4	2	Single			$544.28	$2.80	$541.48		$541.48	$13.68	**$555.16**
5	2	Family			$1,311.74	$2.80	$1,308.94		$1,308.94	$29.02	**$1,337.96**
Part-Time/Temporary/LOA											
6	2	Single			$544.28	$2.80	$541.48		$541.48	$2.80	**$544.28**
7	2	Family			$1,311.74	$2.80	$1,308.94		$1,308.94	$2.80	**$1,311.74**
NGF State Contracts with Wellness Program											
Active HDHP											
1-3	17	S/F/Dual			$989.68	$2.80	$986.88		$986.88	$143.34	**$1,130.22**
COBRA HDHP											
4	17	Single			$474.34	$2.80	$471.54		$471.54	$12.28	**$483.82**
5	17	Family			$1,142.50	$2.80	$1,139.70		$1,139.70	$25.64	**$1,165.34**
LOA HDHP											
6	17	Single			$474.34	$2.80	$471.54		$471.54	$2.80	**$474.34**
7	17	Family			$1,142.50	$2.80	$1,139.70		$1,139.70	$2.80	**$1,142.50**
GF State Contracts w/o Wellness Program											
Active					(Flat Single/Family Rate)						
1-3	1	S/F/Dual			$1,130.22	$2.80	$1,127.42		$1,127.42	$14.10	**$1,141.52**
COBRA											
4	1	Single			$544.28	$2.80	$541.48		$541.48	$13.68	**$555.16**
5	1	Family			$1,311.74	$2.80	$1,308.94		$1,308.94	$29.02	**$1,337.96**
Part-Time/Temporary/LOA											
6	1	Single			$544.28	$2.80	$541.48		$541.48	$7.54	**$549.02**
7	1	Family			$1,311.74	$2.80	$1,308.94		$1,308.94	$14.22	**$1,323.16**
NGF State Contracts w/o Wellness Program											
Active HDHP											
1-3	16	S/F/Dual			$989.68	$2.80	$986.88		$986.88	$154.64	**$1,141.52**
COBRA HDHP											
4	16	Single			$474.34	$2.80	$471.54		$471.54	$12.28	**$483.82**
5	16	Family			$1,142.50	$2.80	$1,139.70		$1,139.70	$25.64	**$1,165.34**
LOA HDHP											
6	16	Single			$474.34	$2.80	$471.54		$471.54	$7.54	**$479.08**
7	16	Family			$1,142.50	$2.80	$1,139.70		$1,139.70	$14.22	**$1,153.92**

JULY 2015 NDPERS Health Rates
Rate Structure A
For Anyone Enrolled Prior to July 1, 2015
Rates for January 1, 2016 -December 31, 2016

Code	Struct	Description	Total Health Premiums	Medicare Part D Premiums	Total Premiums	Less NDPERS Retention	Total Prem Paid to SHP	Total Prem Paid to BCBSND	Total Paid to SHP	NDPERS Retention	**NDPERS Billing Rate**
GF Political Subdivision Rates with Wellness Program											
Active											
1	4	Single			$581.48	$2.80	$578.68		$578.68	$2.80	**$581.48**
2	4	Family			$1,404.84	$2.80	$1,402.04		$1,402.04	$2.80	**$1,404.84**
COBRA											
4	4	Single			$581.48	$2.80	$578.68		$578.68	$14.42	**$593.10**
5	4	Family			$1,404.84	$2.80	$1,402.04		$1,402.04	$30.90	**$1,432.94**
GF Political Subdivision Rates w/o Wellness Program											
Active											
1	3	Single			$581.48	$2.80	$578.68		$578.68	$8.60	**$587.28**
2	3	Family			$1,404.84	$2.80	$1,402.04		$1,402.04	$16.84	**$1,418.88**
COBRA											
4	3	Single			$581.48	$2.80	$578.68		$578.68	$14.42	**$593.10**
5	3	Family			$1,404.84	$2.80	$1,402.04		$1,402.04	$30.90	**$1,432.94**
NGF Political Subdivision Rates with Wellness Program											
Active											
1	24	Single			$590.32	$2.80	$587.52		$587.52	$2.80	**$590.32**
2	24	Family			$1,426.20	$2.80	$1,423.40		$1,423.40	$2.80	**$1,426.20**
COBRA											
4	24	Single			$590.32	$2.80	$587.52		$587.52	$14.60	**$602.12**
5	24	Family			$1,426.20	$2.80	$1,423.40		$1,423.40	$31.32	**$1,454.72**
Active HDHP											
1	26	Single			$521.10	$2.80	$518.30		$518.30	$2.80	**$521.10**
2	26	Family			$1,258.98	$2.80	$1,256.18		$1,256.18	$2.80	**$1,258.98**
COBRA HDHP											
4	26	Single			$521.10	$2.80	$518.30		$518.30	$13.22	**$531.52**
5	26	Family			$1,258.98	$2.80	$1,256.18		$1,256.18	$27.98	**$1,284.16**
NGF Political Subdivision Rates w/o Wellness Program											
Active											
1	23	Single			$590.32	$2.80	$587.52		$587.52	$8.00	**$595.52**
2	23	Family			$1,426.20	$2.80	$1,423.40		$1,423.40	$15.38	**$1,438.78**
COBRA											
4	23	Single			$590.32	$2.80	$587.52		$587.52	$14.60	**$602.12**
5	23	Family			$1,426.20	$2.80	$1,423.40		$1,423.40	$31.32	**$1,454.72**
Active HDHP											
1	25	Single			$521.10	$2.80	$518.30		$518.30	$8.00	**$526.30**
2	25	Family			$1,258.98	$2.80	$1,256.18		$1,256.18	$15.38	**$1,271.56**
COBRA HDHP											
4	25	Single			$521.10	$2.80	$518.30		$518.30	$13.22	**$531.52**
5	25	Family			$1,258.98	$2.80	$1,256.18		$1,256.18	$27.98	**$1,284.16**

JULY 2015 NDPERS Health Rates
Rate Structure B
New Subscribers or Groups July 1, 2015 and After
Rates for January 1, 2016 -June 30, 2016

Code	Struct	Description	Total Health Premiums	Medicare Part D Premiums	Total Premiums	NDPERS Retention	Total Prem Paid to SHP	Total Prem Paid to BCBSND	Total Paid to SHP	NDPERS Retention	NDPERS Billing Rate
Medicare Retiree											
41	12	1 Medicare only	$181.42	TBD	TBD	$2.80	TBD	$0.00	TBD	$2.80	**TBD**
42	12	2 Medicare only	$359.76	TBD	TBD	$2.80	TBD	$0.00	TBD	$2.80	**TBD**
50	12	3 Medicare only	$538.70	TBD	TBD	$2.80	TBD	$0.00	TBD	$2.80	**TBD**
51	12	4 Medicare only	$717.34	TBD	TBD	$2.80	TBD	$0.00	TBD	$2.80	**TBD**
43	12	1 Medicare+Others	$613.50	TBD	TBD	$2.80	TBD	$0.00	TBD	$2.80	**TBD**
49	12	2 Medicare+Others	$791.84	TBD	TBD	$2.80	TBD	$0.00	TBD	$2.80	**TBD**
55	12	3 Medicare+Others	$970.78	TBD	TBD	$2.80	TBD	$0.00	TBD	$2.80	**TBD**
58	12	4 Medicare+Others	$1,149.42	TBD	TBD	$2.80	TBD	$0.00	TBD	$2.80	**TBD**
98	12	Single NM Dep GF Status	$432.08		TBD		TBD		TBD		**TBD**
99	12	Family NM Dep GF Status	$432.08		TBD		TBD		TBD		**TBD**
GF Medicare Retirees COBRA (for Non-Medicare dependents of Medicare Retirees)											
30	12	Single	$434.88		$434.88	$2.80	$432.08		$432.08	$11.50	**$443.58**
31	12	Family	$613.22		$613.22	$2.80	$610.42		$610.42	$15.06	**$625.48**
GF Non-Medicare Retiree											
21	12	Single			$816.42	$2.80	$813.62		$813.62	$2.80	**$816.42**
22	12	Family			$1,632.84	$2.80	$1,630.04		$1,630.04	$2.80	**$1,632.84**
23	12	Family (3+)			$2,041.04	$2.80	$2,038.24		$2,038.24	$2.80	**$2,041.04**
GF COBRA											
24	12	Single			$816.42	$2.80	$813.62		$813.62	$19.12	**$832.74**
25	12	Family			$1,632.84	$2.80	$1,630.04		$1,630.04	$35.46	**$1,665.50**
26	12	Family (3+)			$2,041.04	$2.80	$2,038.24		$2,038.24	$43.62	**$2,081.86**

JULY 2015 NDPERS Health Rates
Rate Structure B
New Subscribers or Groups July 1, 2015 and After
Rates for January 1, 2016 -June 30, 2016

Code	Struct	Description	Total Health Premiums	Medicare Part D Premiums	Total Premiums	NDPERS Retention	Total Prem Paid to SHP	Total Prem Paid to BCBSND	Total Paid to SHP	NDPERS Retention	NDPERS Billing Rate
GF Political Subdivision Rates with Wellness Program											
Active											
1	8	Single			$566.46	$2.80	$563.66		$563.66	$2.80	**$566.46**
2	8	Family			$1,369.74	$2.80	$1,366.94		$1,366.94	$2.80	**$1,369.74**
COBRA											
4	8	Single			$566.46	$2.80	$563.66		$563.66	$14.12	**$577.78**
5	8	Family			$1,369.74	$2.80	$1,366.94		$1,366.94	$30.18	**$1,397.12**
GF Political Subdivision Rates w/o Wellness Program											
Active											
1	7	Single			$566.46	$2.80	$563.66		$563.66	$8.46	**$572.12**
2	7	Family			$1,369.74	$2.80	$1,366.94		$1,366.94	$16.50	**$1,383.44**
COBRA											
4	7	Single			$566.46	$2.80	$563.66		$563.66	$14.12	**$577.78**
5	7	Family			$1,369.74	$2.80	$1,366.94		$1,366.94	$30.18	**$1,397.12**
NGF Political Subdivision Rates with Wellness Program											
Active											
1	28	Single			$575.06	$2.80	$572.26		$572.26	$2.80	**$575.06**
2	28	Family			$1,389.28	$2.80	$1,386.48		$1,386.48	$2.80	**$1,389.28**
COBRA											
4	28	Single			$575.06	$2.80	$572.26		$572.26	$14.30	**$586.56**
5	28	Family			$1,389.28	$2.80	$1,386.48		$1,386.48	$30.58	**$1,417.06**
Active HDHP											
1	30	Single			$507.16	$2.80	$504.36		$504.36	$2.80	**$507.16**
2	30	Family			$1,225.34	$2.80	$1,222.54		$1,222.54	$2.80	**$1,225.34**
COBRA HDHP											
4	30	Single			$507.16	$2.80	$504.36		$504.36	$12.94	**$517.30**
5	30	Family			$1,225.34	$2.80	$1,222.54		$1,222.54	$27.30	**$1,249.84**
NGF Political Subdivision Rates w/o Wellness Program											
Active											
1	27	Single			$575.06	$2.80	$572.26		$572.26	$7.86	**$580.12**
2	27	Family			$1,389.28	$2.80	$1,386.48		$1,386.48	$15.04	**$1,401.52**
COBRA											
4	27	Single			$575.06	$2.80	$572.26		$572.26	$14.30	**$586.56**
5	27	Family			$1,389.28	$2.80	$1,386.48		$1,386.48	$30.58	**$1,417.06**
Active HDHP											
1	29	Single			$507.16	$2.80	$504.36		$504.36	$7.86	**$512.22**
2	29	Family			$1,225.34	$2.80	$1,222.54		$1,222.54	$15.04	**$1,237.58**
COBRA HDHP											
4	29	Single			$507.16	$2.80	$504.36		$504.36	$12.94	**$517.30**
5	29	Family			$1,225.34	$2.80	$1,222.54		$1,222.54	$27.30	**$1,249.84**

JULY 2015 NDPERS Health Rates
Rate Structure B
New Subscribers or Groups July 1, 2015 and After
Rates for July 1, 2016 -December 31, 2016

Code	Struct	Description	Total Health Premiums	Medicare Part D Premiums	Total Premiums	Less NDPERS Retention	Total Prem Paid to SHP	Total Prem Paid to BCBSND	Total Paid to SHP	NDPERS Retention	NDPERS Billing Rate
Medicare Retiree											
41	12	1 Medicare only	$186.10	TBD	TBD	$2.80	TBD	$0.00	TBD	$2.80	**TBD**
42	12	2 Medicare only	$369.08	TBD	TBD	$2.80	TBD	$0.00	TBD	$2.80	**TBD**
50	12	3 Medicare only	$552.66	TBD	TBD	$2.80	TBD	$0.00	TBD	$2.80	**TBD**
51	12	4 Medicare only	$735.94	TBD	TBD	$2.80	TBD	$0.00	TBD	$2.80	**TBD**
43	12	1 Medicare+Others	$629.38	TBD	TBD	$2.80	TBD	$0.00	TBD	$2.80	**TBD**
49	12	2 Medicare+Others	$812.36	TBD	TBD	$2.80	TBD	$0.00	TBD	$2.80	**TBD**
55	12	3 Medicare+Others	$995.94	TBD	TBD	$2.80	TBD	$0.00	TBD	$2.80	**TBD**
58	12	4 Medicare+Others	$1,179.22	TBD	TBD	$2.80	TBD	$0.00	TBD	$2.80	**TBD**
98	12	Single NM Dep GF Status	$443.28		TBD		TBD		TBD		**TBD**
99	12	Family NM Dep GF Status	$443.28		TBD		TBD		TBD		**TBD**
GF Medicare Retirees COBRA (for Non-Medicare dependents of Medicare Retirees)											
30	12	Single	$446.08		$446.08	$2.80	$443.28		$443.28	$11.72	**$455.00**
31	12	Family	$629.06		$629.06	$2.80	$626.26		$626.26	$15.38	**$641.64**
GF Non-Medicare Retiree											
21	12	Single			$816.42	$2.80	$813.62		$813.62	$2.80	**$816.42**
22	12	Family			$1,632.84	$2.80	$1,630.04		$1,630.04	$2.80	**$1,632.84**
23	12	Family (3+)			$2,041.04	$2.80	$2,038.24		$2,038.24	$2.80	**$2,041.04**
GF COBRA											
24	12	Single			$816.42	$2.80	$813.62		$813.62	$19.12	**$832.74**
25	12	Family			$1,632.84	$2.80	$1,630.04		$1,630.04	$35.46	**$1,665.50**
26	12	Family (3+)			$2,041.04	$2.80	$2,038.24		$2,038.24	$43.62	**$2,081.86**

JULY 2015 NDPERS Health Rates
Rate Structure B
New Subscribers or Groups July 1, 2015 and After
Rates for July 1, 2016 -December 31, 2016

Code	Struct	Description	Total Health Premiums	Medicare Part D Premiums	Total Premiums	Less NDPERS Retention	Total Prem Paid to SHP	Total Prem Paid to BCBSND	Total Paid to SHP	NDPERS Retention	NDPERS Billing Rate
GF Political Subdivision Rates with Wellness Program											
Active											
1	8	Single			$596.54	$2.80	$593.74		$593.74	$2.80	**$596.54**
2	8	Family			$1,439.98	$2.80	$1,437.18		$1,437.18	$2.80	**$1,439.98**
COBRA											
4	8	Single			$596.54	$2.80	$593.74		$593.74	$14.72	**$608.46**
5	8	Family			$1,439.98	$2.80	$1,437.18		$1,437.18	$31.60	**$1,468.78**
GF Political Subdivision Rates w/o Wellness Program											
Active											
1	7	Single			$596.54	$2.80	$593.74		$593.74	$8.76	**$602.50**
2	7	Family			$1,439.98	$2.80	$1,437.18		$1,437.18	$17.20	**$1,454.38**
COBRA											
4	7	Single			$596.54	$2.80	$593.74		$593.74	$14.72	**$608.46**
5	7	Family			$1,439.98	$2.80	$1,437.18		$1,437.18	$31.60	**$1,468.78**
NGF Political Subdivision Rates with Wellness Program											
Active											
1	28	Single			$605.62	$2.80	$602.82		$602.82	$2.80	**$605.62**
2	28	Family			$1,463.12	$2.80	$1,460.32		$1,460.32	$2.80	**$1,463.12**
COBRA											
4	28	Single			$605.62	$2.80	$602.82		$602.82	$14.90	**$617.72**
5	28	Family			$1,463.12	$2.80	$1,460.32		$1,460.32	$32.06	**$1,492.38**
Active HDHP											
1	30	Single			$534.12	$2.80	$531.32		$531.32	$2.80	**$534.12**
2	30	Family			$1,290.46	$2.80	$1,287.66		$1,287.66	$2.80	**$1,290.46**
COBRA HDHP											
4	30	Single			$534.12	$2.80	$531.32		$531.32	$13.48	**$544.80**
5	30	Family			$1,290.46	$2.80	$1,287.66		$1,287.66	$28.60	**$1,316.26**
NGF Political Subdivision Rates w/o Wellness Program											
Active											
1	27	Single			$605.62	$2.80	$602.82		$602.82	$8.14	**$610.96**
2	27	Family			$1,463.12	$2.80	$1,460.32		$1,460.32	$15.70	**$1,476.02**
COBRA											
4	27	Single			$605.62	$2.80	$602.82		$602.82	$14.90	**$617.72**
5	27	Family			$1,463.12	$2.80	$1,460.32		$1,460.32	$32.06	**$1,492.38**
Active HDHP											
1	29	Single			$534.12	$2.80	$531.32		$531.32	$8.14	**$539.46**
2	29	Family			$1,290.46	$2.80	$1,287.66		$1,287.66	$15.70	**$1,303.36**
COBRA HDHP											
4	29	Single			$534.12	$2.80	$531.32		$531.32	$13.48	**$544.80**
5	29	Family			$1,290.46	$2.80	$1,287.66		$1,287.66	$28.60	**$1,316.26**

JULY 2015 NDPERS Health Rates
Rate Structure A
For Anyone Enrolled Prior to July 1, 2015
Rates for January 1, 2017 - June 30, 2017

Code	Struct	Description	Total Health Premiums	Medicare Part D Premiums	Total Premiums	Less NDPERS Retention	Total Prem Paid to SHP	Total Prem Paid to BCBSND	Total Paid to SHP	NDPERS Retention	**NDPERS Billing Rate**
Medicare Retiree											
41	11	1 Medicare only	$183.76	TBD	TBD	$2.80	TBD	$0.00	TBD	$2.80	**TBD**
42	11	2 Medicare only	$364.42	TBD	TBD	$2.80	TBD	$0.00	TBD	$2.80	**TBD**
50	11	3 Medicare only	$545.68	TBD	TBD	$2.80	TBD	$0.00	TBD	$2.80	**TBD**
51	11	4 Medicare only	$726.64	TBD	TBD	$2.80	TBD	$0.00	TBD	$2.80	**TBD**
43	11	1 Medicare+Others	$621.44	TBD	TBD	$2.80	TBD	$0.00	TBD	$2.80	**TBD**
49	11	2 Medicare+Others	$802.10	TBD	TBD	$2.80	TBD	$0.00	TBD	$2.80	**TBD**
55	11	3 Medicare+Others	$983.36	TBD	TBD	$2.80	TBD	$0.00	TBD	$2.80	**TBD**
58	11	4 Medicare+Others	$1,164.32	TBD	TBD	$2.80	TBD	$0.00	TBD	$2.80	**TBD**
98	11	Single NM Dep GF Status	$437.68		TBD		TBD		TBD		**TBD**
99	11	Family NM Dep GF Status	$437.68		TBD		TBD		TBD		**TBD**
44	11	Part A Single	$461.02	TBD	TBD	$2.80	TBD	$0.00	TBD	$2.80	**TBD**
Grandfathered Rates											
42	14	2 Medicare only	$364.46	TBD	TBD	$2.80	TBD	$0.00	TBD	$2.80	**TBD**
50	14	3 Medicare only	$387.50	TBD	TBD	$2.80	TBD	$0.00	TBD	$2.80	**TBD**
51	14	4 Medicare only	$237.84	TBD	TBD	$2.80	TBD	$0.00	TBD	$2.80	**TBD**
49	14	2 Medicare+Others	$575.12	TBD	TBD	$2.80	TBD	$0.00	TBD	$2.80	**TBD**
98	14	Single NM Dep GF Status	$210.66		TBD		TBD		TBD		**TBD**
GF Medicare Retirees COBRA (for Non-Medicare dependents of Medicare Retirees)											
30	11	Single	$440.48		$440.48	$2.80	$437.68		$437.68	$11.60	**$449.28**
31	11	Family	$621.14		$621.14	$2.80	$618.34		$618.34	$15.22	**$633.56**
GF Non-Medicare Retiree											
21	11	Single			$816.42	$2.80	$813.62		$813.62	$2.80	**$816.42**
22	11	Family			$1,632.84	$2.80	$1,630.04		$1,630.04	$2.80	**$1,632.84**
23	11	Family (3+)			$2,041.04	$2.80	$2,038.24		$2,038.24	$2.80	**$2,041.04**
GF COBRA											
24	11	Single			$816.42	$2.80	$813.62		$813.62	$19.12	**$832.74**
25	11	Family			$1,632.84	$2.80	$1,630.04		$1,630.04	$35.46	**$1,665.50**
26	11	Family (3+)			$2,041.04	$2.80	$2,038.24		$2,038.24	$43.62	**$2,081.86**

JULY 2015 NDPERS Health Rates
Rate Structure A
For Anyone Enrolled Prior to July 1, 2015
Rates for January 1, 2017 - June 30, 2017

Code	Struct	Description	Total Health Premiums	Medicare Part D Premiums	Total Premiums	Less NDPERS Retention	Total Prem Paid to SHP	Total Prem Paid to BCBSND	Total Paid to SHP	NDPERS Retention	**NDPERS Billing Rate**
GF State Contracts with Wellness Program											
Active					(Flat Single/Family Rate)						
1-3	2	S/F/Dual			$1,130.22	$2.80	$1,127.42		$1,127.42	$2.80	**$1,130.22**
COBRA											
4	2	Single			$544.28	$2.80	$541.48		$541.48	$13.68	**$555.16**
5	2	Family			$1,311.74	$2.80	$1,308.94		$1,308.94	$29.02	**$1,337.96**
Part-Time/Temporary/LOA											
6	2	Single			$544.28	$2.80	$541.48		$541.48	$2.80	**$544.28**
7	2	Family			$1,311.74	$2.80	$1,308.94		$1,308.94	$2.80	**$1,311.74**
NGF State Contracts with Wellness Program											
Active HDHP											
1-3	17	S/F/Dual			$989.68	$2.80	$986.88		$986.88	$143.34	**$1,130.22**
COBRA HDHP											
4	17	Single			$474.34	$2.80	$471.54		$471.54	$12.28	**$483.82**
5	17	Family			$1,142.50	$2.80	$1,139.70		$1,139.70	$25.64	**$1,165.34**
LOA HDHP											
6	17	Single			$474.34	$2.80	$471.54		$471.54	$2.80	**$474.34**
7	17	Family			$1,142.50	$2.80	$1,139.70		$1,139.70	$2.80	**$1,142.50**
GF State Contracts w/o Wellness Program											
Active					(Flat Single/Family Rate)						
1-3	1	S/F/Dual			$1,130.22	$2.80	$1,127.42		$1,127.42	$14.10	**$1,141.52**
COBRA											
4	1	Single			$544.28	$2.80	$541.48		$541.48	$13.68	**$555.16**
5	1	Family			$1,311.74	$2.80	$1,308.94		$1,308.94	$29.02	**$1,337.96**
Part-Time/Temporary/LOA											
6	1	Single			$544.28	$2.80	$541.48		$541.48	$7.54	**$549.02**
7	1	Family			$1,311.74	$2.80	$1,308.94		$1,308.94	$14.22	**$1,323.16**
NGF State Contracts w/o Wellness Program											
Active HDHP											
1-3	16	S/F/Dual			$989.68	$2.80	$986.88		$986.88	$154.64	**$1,141.52**
COBRA HDHP											
4	16	Single			$474.34	$2.80	$471.54		$471.54	$12.28	**$483.82**
5	16	Family			$1,142.50	$2.80	$1,139.70		$1,139.70	$25.64	**$1,165.34**
LOA HDHP											
6	16	Single			$474.34	$2.80	$471.54		$471.54	$7.54	**$479.08**
7	16	Family			$1,142.50	$2.80	$1,139.70		$1,139.70	$14.22	**$1,153.92**

JULY 2015 NDPERS Health Rates
Rate Structure A
For Anyone Enrolled Prior to July 1, 2015
Rates for January 1, 2017 - June 30, 2017

Code	Struct	Description	Total Health Premiums	Medicare Part D Premiums	Total Premiums	Less NDPERS Retention	Total Prem Paid to SHP	Total Prem Paid to BCBSND	Total Paid to SHP	NDPERS Retention	**NDPERS Billing Rate**
GF Political Subdivision Rates with Wellness Program											
Active											
1	4	Single			$581.48	$2.80	$578.68		$578.68	$2.80	**$581.48**
2	4	Family			$1,404.84	$2.80	$1,402.04		$1,402.04	$2.80	**$1,404.84**
COBRA											
4	4	Single			$581.48	$2.80	$578.68		$578.68	$14.42	**$593.10**
5	4	Family			$1,404.84	$2.80	$1,402.04		$1,402.04	$30.90	**$1,432.94**
GF Political Subdivision Rates w/o Wellness Program											
Active											
1	3	Single			$581.48	$2.80	$578.68		$578.68	$8.60	**$587.28**
2	3	Family			$1,404.84	$2.80	$1,402.04		$1,402.04	$16.84	**$1,418.88**
COBRA											
4	3	Single			$581.48	$2.80	$578.68		$578.68	$14.42	**$593.10**
5	3	Family			$1,404.84	$2.80	$1,402.04		$1,402.04	$30.90	**$1,432.94**
NGF Political Subdivision Rates with Wellness Program											
Active											
1	24	Single			$590.32	$2.80	$587.52		$587.52	$2.80	**$590.32**
2	24	Family			$1,426.20	$2.80	$1,423.40		$1,423.40	$2.80	**$1,426.20**
COBRA											
4	24	Single			$590.32	$2.80	$587.52		$587.52	$14.60	**$602.12**
5	24	Family			$1,426.20	$2.80	$1,423.40		$1,423.40	$31.32	**$1,454.72**
Active HDHP											
1	26	Single			$521.10	$2.80	$518.30		$518.30	$2.80	**$521.10**
2	26	Family			$1,258.98	$2.80	$1,256.18		$1,256.18	$2.80	**$1,258.98**
COBRA HDHP											
4	26	Single			$521.10	$2.80	$518.30		$518.30	$13.22	**$531.52**
5	26	Family			$1,258.98	$2.80	$1,256.18		$1,256.18	$27.98	**$1,284.16**
NGF Political Subdivision Rates w/o Wellness Program											
Active											
1	23	Single			$590.32	$2.80	$587.52		$587.52	$8.00	**$595.52**
2	23	Family			$1,426.20	$2.80	$1,423.40		$1,423.40	$15.38	**$1,438.78**
COBRA											
4	23	Single			$590.32	$2.80	$587.52		$587.52	$14.60	**$602.12**
5	23	Family			$1,426.20	$2.80	$1,423.40		$1,423.40	$31.32	**$1,454.72**
Active HDHP											
1	25	Single			$521.10	$2.80	$518.30		$518.30	$8.00	**$526.30**
2	25	Family			$1,258.98	$2.80	$1,256.18		$1,256.18	$15.38	**$1,271.56**
COBRA HDHP											
4	25	Single			$521.10	$2.80	$518.30		$518.30	$13.22	**$531.52**
5	25	Family			$1,258.98	$2.80	$1,256.18		$1,256.18	$27.98	**$1,284.16**

JULY 2015 NDPERS Health Rates
Rate Structure B
New Subscribers or Groups July 1, 2015 and After
Rates for January 1, 2017 - June 30, 2017

Code	Struct	Description	Total Health Premiums	Medicare Part D Premiums	Total Premiums	Less NDPERS Retention	Total Prem Paid to SHP	Total Prem Paid to BCBSND	Total Paid to SHP	NDPERS Retention	NDPERS Billing Rate
Medicare Retiree											
41	12	1 Medicare only	$186.10	TBD	TBD	$2.80	TBD	$0.00	TBD	$2.80	**TBD**
42	12	2 Medicare only	$369.08	TBD	TBD	$2.80	TBD	$0.00	TBD	$2.80	**TBD**
50	12	3 Medicare only	$552.66	TBD	TBD	$2.80	TBD	$0.00	TBD	$2.80	**TBD**
51	12	4 Medicare only	$735.94	TBD	TBD	$2.80	TBD	$0.00	TBD	$2.80	**TBD**
43	12	1 Medicare+Others	$629.38	TBD	TBD	$2.80	TBD	$0.00	TBD	$2.80	**TBD**
49	12	2 Medicare+Others	$812.36	TBD	TBD	$2.80	TBD	$0.00	TBD	$2.80	**TBD**
55	12	3 Medicare+Others	$995.94	TBD	TBD	$2.80	TBD	$0.00	TBD	$2.80	**TBD**
58	12	4 Medicare+Others	$1,179.22	TBD	TBD	$2.80	TBD	$0.00	TBD	$2.80	**TBD**
98	12	Single NM Dep GF Status	$443.28		TBD		TBD		TBD		**TBD**
99	12	Family NM Dep GF Status	$443.28		TBD		TBD		TBD		**TBD**
GF Medicare Retirees COBRA (for Non-Medicare dependents of Medicare Retirees)											
30	12	Single	$446.08		$446.08	$2.80	$443.28		$443.28	$11.72	**$455.00**
31	12	Family	$629.06		$629.06	$2.80	$626.26		$626.26	$15.38	**$641.64**
GF Non-Medicare Retiree											
21	12	Single			$816.42	$2.80	$813.62		$813.62	$2.80	**$816.42**
22	12	Family			$1,632.84	$2.80	$1,630.04		$1,630.04	$2.80	**$1,632.84**
23	12	Family (3+)			$2,041.04	$2.80	$2,038.24		$2,038.24	$2.80	**$2,041.04**
GF COBRA											
24	12	Single			$816.42	$2.80	$813.62		$813.62	$19.12	**$832.74**
25	12	Family			$1,632.84	$2.80	$1,630.04		$1,630.04	$35.46	**$1,665.50**
26	12	Family (3+)			$2,041.04	$2.80	$2,038.24		$2,038.24	$43.62	**$2,081.86**

JULY 2015 NDPERS Health Rates
Rate Structure B
New Subscribers or Groups July 1, 2015 and After
Rates for January 1, 2017 - June 30, 2017

Code	Struct	Description	Total Health Premiums	Medicare Part D Premiums	Total Premiums	Less NDPERS Retention	Total Prem Paid to SHP	Total Prem Paid to BCBSND	Total Paid to SHP	NDPERS Retention	NDPERS Billing Rate
GF Political Subdivision Rates with Wellness Program											
Active											
1	8	Single			$596.54	$2.80	$593.74		$593.74	$2.80	**$596.54**
2	8	Family			$1,439.98	$2.80	$1,437.18		$1,437.18	$2.80	**$1,439.98**
COBRA											
4	8	Single			$596.54	$2.80	$593.74		$593.74	$14.72	**$608.46**
5	8	Family			$1,439.98	$2.80	$1,437.18		$1,437.18	$31.60	**$1,468.78**
GF Political Subdivision Rates w/o Wellness Program											
Active											
1	7	Single			$596.54	$2.80	$593.74		$593.74	$8.76	**$602.50**
2	7	Family			$1,439.98	$2.80	$1,437.18		$1,437.18	$17.20	**$1,454.38**
COBRA											
4	7	Single			$596.54	$2.80	$593.74		$593.74	$14.72	**$608.46**
5	7	Family			$1,439.98	$2.80	$1,437.18		$1,437.18	$31.60	**$1,468.78**
NGF Political Subdivision Rates with Wellness Program											
Active											
1	28	Single			$605.62	$2.80	$602.82		$602.82	$2.80	**$605.62**
2	28	Family			$1,463.12	$2.80	$1,460.32		$1,460.32	$2.80	**$1,463.12**
COBRA											
4	28	Single			$605.62	$2.80	$602.82		$602.82	$14.90	**$617.72**
5	28	Family			$1,463.12	$2.80	$1,460.32		$1,460.32	$32.06	**$1,492.38**
Active HDHP											
1	30	Single			$534.12	$2.80	$531.32		$531.32	$2.80	**$534.12**
2	30	Family			$1,290.46	$2.80	$1,287.66		$1,287.66	$2.80	**$1,290.46**
COBRA HDHP											
4	30	Single			$534.12	$2.80	$531.32		$531.32	$13.48	**$544.80**
5	30	Family			$1,290.46	$2.80	$1,287.66		$1,287.66	$28.60	**$1,316.26**
NGF Political Subdivision Rates w/o Wellness Program											
Active											
1	27	Single			$605.62	$2.80	$602.82		$602.82	$8.14	**$610.96**
2	27	Family			$1,463.12	$2.80	$1,460.32		$1,460.32	$15.70	**$1,476.02**
COBRA											
4	27	Single			$605.62	$2.80	$602.82		$602.82	$14.90	**$617.72**
5	27	Family			$1,463.12	$2.80	$1,460.32		$1,460.32	$32.06	**$1,492.38**
Active HDHP											
1	29	Single			$534.12	$2.80	$531.32		$531.32	$8.14	**$539.46**
2	29	Family			$1,290.46	$2.80	$1,287.66		$1,287.66	$15.70	**$1,303.36**
COBRA HDHP											
4	29	Single			$534.12	$2.80	$531.32		$531.32	$13.48	**$544.80**
5	29	Family			$1,290.46	$2.80	$1,287.66		$1,287.66	$28.60	**$1,316.26**

JULY 2015 NDPERS Health Rates
Rate Structure A
For Anyone Enrolled Prior to July 1, 2015
Rates for January 1, 2016 -June 30, 2016

Code	Struct	Description	Total Health Premiums	Medicare Part D Premiums	Total Premiums	Less NDPERS Retention	Total Prem Paid to SHP	Total Prem Paid to ESI	Total Paid to SHP	NDPERS Retention	**NDPERS Billing Rate**
Medicare Retiree											
41	11	1 Medicare only	$183.76	$82.00	$265.76	$2.80	$180.96	$82.00	$180.96	$2.80	**$265.76**
42	11	2 Medicare only	$364.42	$164.00	$528.42	$2.80	$361.62	$164.00	$361.62	$2.80	**$528.42**
50	11	3 Medicare only	$545.68	$246.00	$791.68	$2.80	$542.88	$246.00	$542.88	$2.80	**$791.68**
51	11	4 Medicare only	$726.64	$328.00	$1,054.64	$2.80	$723.84	$328.00	$723.84	$2.80	**$1,054.64**
43	11	1 Medicare+Others	$621.44	$82.00	$703.44	$2.80	$618.64	$82.00	$618.64	$2.80	**$703.44**
49	11	2 Medicare+Others	$802.10	$164.00	$966.10	$2.80	$799.30	$164.00	$799.30	$2.80	**$966.10**
55	11	3 Medicare+Others	$983.36	$246.00	$1,229.36	$2.80	$980.56	$246.00	$980.56	$2.80	**$1,229.36**
58	11	4 Medicare+Others	$1,164.32	$328.00	$1,492.32	$2.80	$1,161.52	$328.00	$1,161.52	$2.80	**$1,492.32**
98	11	Single NM Dep GF Status	$437.68		$437.68		$437.68		$437.68		**$437.68**
99	11	Family NM Dep GF Status	$437.68		$437.68		$437.68		$437.68		**$437.68**
44	11	Part A Single	$461.02	$82.00	$543.02	$2.80	$458.22	$82.00	$458.22	$2.80	**$543.02**
Grandfathered Rates											
42	14	2 Medicare only	$364.46	$164.00	$528.46	$2.80	$361.66	$164.00	$361.66	$2.80	**$528.46**
50	14	3 Medicare only	$387.50	$246.00	$633.50	$2.80	$384.70	$246.00	$384.70	$2.80	**$633.50**
51	14	4 Medicare only	$237.84	$328.00	$565.84	$2.80	$235.04	$328.00	$235.04	$2.80	**$565.84**
49	14	2 Medicare+Others	$575.12	$164.00	$739.12	$2.80	$572.32	$164.00	$572.32	$2.80	**$739.12**
98	14	Single NM Dep GF Status	$210.66		$210.66		$210.66		$210.66		**$210.66**
GF Medicare Retirees COBRA (for Non-Medicare dependents of Medicare Retirees)											
30	11	Single	$440.48		$440.48	$2.80	$437.68		$437.68	$11.60	**$449.28**
31	11	Family	$621.14		$621.14	$2.80	$618.34		$618.34	$15.22	**$633.56**
GF Non-Medicare Retiree											
21	11	Single			$816.42	$2.80	$813.62		$813.62	$2.80	**$816.42**
22	11	Family			$1,632.84	$2.80	$1,630.04		$1,630.04	$2.80	**$1,632.84**
23	11	Family (3+)			$2,041.04	$2.80	$2,038.24		$2,038.24	$2.80	**$2,041.04**
GF COBRA											
24	11	Single			$816.42	$2.80	$813.62		$813.62	$19.12	**$832.74**
25	11	Family			$1,632.84	$2.80	$1,630.04		$1,630.04	$35.46	**$1,665.50**
26	11	Family (3+)			$2,041.04	$2.80	$2,038.24		$2,038.24	$43.62	**$2,081.86**

JULY 2015 NDPERS Health Rates
Rate Structure A
For Anyone Enrolled Prior to July 1, 2015
Rates for January 1, 2016 -June 30, 2016

Code	Struct	Description	Total Health Premiums	Medicare Part D Premiums	Total Premiums	Less NDPERS Retention	Total Prem Paid to SHP	Total Prem Paid to ESI	Total Paid to SHP	NDPERS Retention	**NDPERS Billing Rate**
GF State Contracts with Wellness Program											
Active					(Flat Single/Family Rate)						
1-3	2	S/F/Dual			$1,130.22	$2.80	$1,127.42		$1,127.42	$2.80	**$1,130.22**
COBRA											
4	2	Single			$544.28	$2.80	$541.48		$541.48	$13.68	**$555.16**
5	2	Family			$1,311.74	$2.80	$1,308.94		$1,308.94	$29.02	**$1,337.96**
Part-Time/Temporary/LOA											
6	2	Single			$544.28	$2.80	$541.48		$541.48	$2.80	**$544.28**
7	2	Family			$1,311.74	$2.80	$1,308.94		$1,308.94	$2.80	**$1,311.74**
NGF State Contracts with Wellness Program											
Active HDHP											
1-3	17	S/F/Dual			$989.68	$2.80	$986.88		$986.88	$143.34	**$1,130.22**
COBRA HDHP											
4	17	Single			$474.34	$2.80	$471.54		$471.54	$12.28	**$483.82**
5	17	Family			$1,142.50	$2.80	$1,139.70		$1,139.70	$25.64	**$1,165.34**
LOA HDHP											
6	17	Single			$474.34	$2.80	$471.54		$471.54	$2.80	**$474.34**
7	17	Family			$1,142.50	$2.80	$1,139.70		$1,139.70	$2.80	**$1,142.50**
GF State Contracts w/o Wellness Program											
Active					(Flat Single/Family Rate)						
1-3	1	S/F/Dual			$1,130.22	$2.80	$1,127.42		$1,127.42	$14.10	**$1,141.52**
COBRA											
4	1	Single			$544.28	$2.80	$541.48		$541.48	$13.68	**$555.16**
5	1	Family			$1,311.74	$2.80	$1,308.94		$1,308.94	$29.02	**$1,337.96**
Part-Time/Temporary/LOA											
6	1	Single			$544.28	$2.80	$541.48		$541.48	$7.54	**$549.02**
7	1	Family			$1,311.74	$2.80	$1,308.94		$1,308.94	$14.22	**$1,323.16**
NGF State Contracts w/o Wellness Program											
Active HDHP											
1-3	16	S/F/Dual			$989.68	$2.80	$986.88		$986.88	$154.64	**$1,141.52**
COBRA HDHP											
4	16	Single			$474.34	$2.80	$471.54		$471.54	$12.28	**$483.82**
5	16	Family			$1,142.50	$2.80	$1,139.70		$1,139.70	$25.64	**$1,165.34**
LOA HDHP											
6	16	Single			$474.34	$2.80	$471.54		$471.54	$7.54	**$479.08**
7	16	Family			$1,142.50	$2.80	$1,139.70		$1,139.70	$14.22	**$1,153.92**

JULY 2015 NDPERS Health Rates
Rate Structure A
For Anyone Enrolled Prior to July 1, 2015
Rates for January 1, 2016 -June 30, 2016

Code	Struct	Description	Total Health Premiums	Medicare Part D Premiums	Total Premiums	Less NDPERS Retention	Total Prem Paid to SHP	Total Prem Paid to ESI	Total Paid to SHP	NDPERS Retention	**NDPERS Billing Rate**
GF Political Subdivision Rates with Wellness Program											
Active											
1	4	Single			$581.48	$2.80	$578.68		$578.68	$2.80	**$581.48**
2	4	Family			$1,404.84	$2.80	$1,402.04		$1,402.04	$2.80	**$1,404.84**
COBRA											
4	4	Single			$581.48	$2.80	$578.68		$578.68	$14.42	**$593.10**
5	4	Family			$1,404.84	$2.80	$1,402.04		$1,402.04	$30.90	**$1,432.94**
Temp											
6	4	Single			$581.48	$2.80	$578.68		$578.68	$2.80	**$581.48**
7	4	Family			$1,404.84	$2.80	$1,402.04		$1,402.04	$2.80	**$1,404.84**
GF Political Subdivision Rates w/o Wellness Program											
Active											
1	3	Single			$581.48	$2.80	$578.68		$578.68	$8.60	**$587.28**
2	3	Family			$1,404.84	$2.80	$1,402.04		$1,402.04	$16.84	**$1,418.88**
COBRA											
4	3	Single			$581.48	$2.80	$578.68		$578.68	$14.42	**$593.10**
5	3	Family			$1,404.84	$2.80	$1,402.04		$1,402.04	$30.90	**$1,432.94**
Temp											
6	3	Single			$581.48	$2.80	$578.68		$578.68	$8.60	**$587.28**
7	3	Family			$1,404.84	$2.80	$1,402.04		$1,402.04	$16.84	**$1,418.88**
NGF Political Subdivision Rates with Wellness Program											
Active											
1	24	Single			$590.32	$2.80	$587.52		$587.52	$2.80	**$590.32**
2	24	Family			$1,426.20	$2.80	$1,423.40		$1,423.40	$2.80	**$1,426.20**
COBRA											
4	24	Single			$590.32	$2.80	$587.52		$587.52	$14.60	**$602.12**
5	24	Family			$1,426.20	$2.80	$1,423.40		$1,423.40	$31.32	**$1,454.72**
Temp											
6	24	Single			$590.32	$2.80	$587.52		$587.52	$2.80	**$590.32**
7	24	Family			$1,426.20	$2.80	$1,423.40		$1,423.40	$2.80	**$1,426.20**
Active HDHP											
1	26	Single			$521.10	$2.80	$518.30		$518.30	$2.80	**$521.10**
2	26	Family			$1,258.98	$2.80	$1,256.18		$1,256.18	$2.80	**$1,258.98**
COBRA HDHP											
4	26	Single			$521.10	$2.80	$518.30		$518.30	$13.22	**$531.52**
5	26	Family			$1,258.98	$2.80	$1,256.18		$1,256.18	$27.98	**$1,284.16**
NGF Political Subdivision Rates w/o Wellness Program											
Active											
1	23	Single			$590.32	$2.80	$587.52		$587.52	$8.00	**$595.52**
2	23	Family			$1,426.20	$2.80	$1,423.40		$1,423.40	$15.38	**$1,438.78**
COBRA											
4	23	Single			$590.32	$2.80	$587.52		$587.52	$14.60	**$602.12**
5	23	Family			$1,426.20	$2.80	$1,423.40		$1,423.40	$31.32	**$1,454.72**
Temp											
6	23	Single			$590.32	$2.80	$587.52		$587.52	$8.00	**$595.52**
7	23	Family			$1,426.20	$2.80	$1,423.40		$1,423.40	$15.38	**$1,438.78**
Active HDHP											
1	25	Single			$521.10	$2.80	$518.30		$518.30	$8.00	**$526.30**
2	25	Family			$1,258.98	$2.80	$1,256.18		$1,256.18	$15.38	**$1,271.56**
COBRA HDHP											
4	25	Single			$521.10	$2.80	$518.30		$518.30	$13.22	**$531.52**
5	25	Family			$1,258.98	$2.80	$1,256.18		$1,256.18	$27.98	**$1,284.16**

JULY 2015 NDPERS Health Rates
Rate Structure B
New Subscribers or Groups July 1, 2015 and After
Rates for January 1, 2016 -June 30, 2016

Code	Struct	Description	Total Health Premiums	Medicare Part D Premiums	Total Premiums	NDPERS Retention	Total Prem Paid to SHP	Total Prem Paid to ESI	Total Paid to SHP	NDPERS Retention	NDPERS Billing Rate
Medicare Retiree											
41	12	1 Medicare only	$181.42	$82.00	$263.42	$2.80	$178.62	$82.00	$178.62	$2.80	**$263.42**
42	12	2 Medicare only	$359.76	$164.00	$523.76	$2.80	$356.96	$164.00	$356.96	$2.80	**$523.76**
50	12	3 Medicare only	$538.70	$246.00	$784.70	$2.80	$535.90	$246.00	$535.90	$2.80	**$784.70**
51	12	4 Medicare only	$717.34	$328.00	$1,045.34	$2.80	$714.54	$328.00	$714.54	$2.80	**$1,045.34**
43	12	1 Medicare+Others	$613.50	$82.00	$695.50	$2.80	$610.70	$82.00	$610.70	$2.80	**$695.50**
49	12	2 Medicare+Others	$791.84	$164.00	$955.84	$2.80	$789.04	$164.00	$789.04	$2.80	**$955.84**
55	12	3 Medicare+Others	$970.78	$246.00	$1,216.78	$2.80	$967.98	$246.00	$967.98	$2.80	**$1,216.78**
58	12	4 Medicare+Others	$1,149.42	$328.00	$1,477.42	$2.80	$1,146.62	$328.00	$1,146.62	$2.80	**$1,477.42**
98	12	Single NM Dep GF Status	$432.08		$432.08		$432.08		$432.08		**$432.08**
99	12	Family NM Dep GF Status	$432.08		$432.08		$432.08		$432.08		**$432.08**
GF Medicare Retirees COBRA (for Non-Medicare dependents of Medicare Retirees)											
30	12	Single	$434.88		$434.88	$2.80	$432.08		$432.08	$11.50	**$443.58**
31	12	Family	$613.22		$613.22	$2.80	$610.42		$610.42	$15.06	**$625.48**
GF Non-Medicare Retiree											
21	12	Single			$816.42	$2.80	$813.62		$813.62	$2.80	**$816.42**
22	12	Family			$1,632.84	$2.80	$1,630.04		$1,630.04	$2.80	**$1,632.84**
23	12	Family (3+)			$2,041.04	$2.80	$2,038.24		$2,038.24	$2.80	**$2,041.04**
GF COBRA											
24	12	Single			$816.42	$2.80	$813.62		$813.62	$19.12	**$832.74**
25	12	Family			$1,632.84	$2.80	$1,630.04		$1,630.04	$35.46	**$1,665.50**
26	12	Family (3+)			$2,041.04	$2.80	$2,038.24		$2,038.24	$43.62	**$2,081.86**

JULY 2015 NDPERS Health Rates
Rate Structure B
New Subscribers or Groups July 1, 2015 and After
Rates for January 1, 2016 -June 30, 2016

Code	Struct	Description	Total Health Premiums	Medicare Part D Premiums	Total Premiums	NDPERS Retention	Total Prem Paid to SHP	Total Prem Paid to ESI	Total Paid to SHP	NDPERS Retention	NDPERS Billing Rate
GF Political Subdivision Rates with Wellness Program											
Active											
1	8	Single			$566.46	$2.80	$563.66		$563.66	$2.80	**$566.46**
2	8	Family			$1,369.74	$2.80	$1,366.94		$1,366.94	$2.80	**$1,369.74**
COBRA											
4	8	Single			$566.46	$2.80	$563.66		$563.66	$14.12	**$577.78**
5	8	Family			$1,369.74	$2.80	$1,366.94		$1,366.94	$30.18	**$1,397.12**
Temp											
6	8	Single			$566.46	$2.80	$563.66		$563.66	$2.80	**$566.46**
7	8	Family			$1,369.74	$2.80	$1,366.94		$1,366.94	$2.80	**$1,369.74**
GF Political Subdivision Rates w/o Wellness Program											
Active											
1	7	Single			$566.46	$2.80	$563.66		$563.66	$8.46	**$572.12**
2	7	Family			$1,369.74	$2.80	$1,366.94		$1,366.94	$16.50	**$1,383.44**
COBRA											
4	7	Single			$566.46	$2.80	$563.66		$563.66	$14.12	**$577.78**
5	7	Family			$1,369.74	$2.80	$1,366.94		$1,366.94	$30.18	**$1,397.12**
Temp											
6	7	Single			$566.46	$2.80	$563.66		$563.66	$8.46	**$572.12**
7	7	Family			$1,369.74	$2.80	$1,366.94		$1,366.94	$16.50	**$1,383.44**
NGF Political Subdivision Rates with Wellness Program											
Active											
1	28	Single			$575.06	$2.80	$572.26		$572.26	$2.80	**$575.06**
2	28	Family			$1,389.28	$2.80	$1,386.48		$1,386.48	$2.80	**$1,389.28**
COBRA											
4	28	Single			$575.06	$2.80	$572.26		$572.26	$14.30	**$586.56**
5	28	Family			$1,389.28	$2.80	$1,386.48		$1,386.48	$30.58	**$1,417.06**
Temp											
6	28	Single			$575.06	$2.80	$572.26		$572.26	$2.80	**$575.06**
7	28	Family			$1,389.28	$2.80	$1,386.48		$1,386.48	$2.80	**$1,389.28**
Active HDHP											
1	30	Single			$507.16	$2.80	$504.36		$504.36	$2.80	**$507.16**
2	30	Family			$1,225.34	$2.80	$1,222.54		$1,222.54	$2.80	**$1,225.34**
COBRA HDHP											
4	30	Single			$507.16	$2.80	$504.36		$504.36	$12.94	**$517.30**
5	30	Family			$1,225.34	$2.80	$1,222.54		$1,222.54	$27.30	**$1,249.84**
NGF Political Subdivision Rates w/o Wellness Program											
Active											
1	27	Single			$575.06	$2.80	$572.26		$572.26	$7.86	**$580.12**
2	27	Family			$1,389.28	$2.80	$1,386.48		$1,386.48	$15.04	**$1,401.52**
COBRA											
4	27	Single			$575.06	$2.80	$572.26		$572.26	$14.30	**$586.56**
5	27	Family			$1,389.28	$2.80	$1,386.48		$1,386.48	$30.58	**$1,417.06**
Temp											
6	27	Single			$575.06	$2.80	$572.26		$572.26	$7.86	**$580.12**
7	27	Family			$1,389.28	$2.80	$1,386.48		$1,386.48	$15.04	**$1,401.52**
Active HDHP											
1	29	Single			$507.16	$2.80	$504.36		$504.36	$7.86	**$512.22**
2	29	Family			$1,225.34	$2.80	$1,222.54		$1,222.54	$15.04	**$1,237.58**
COBRA HDHP											
4	29	Single			$507.16	$2.80	$504.36		$504.36	$12.94	**$517.30**
5	29	Family			$1,225.34	$2.80	$1,222.54		$1,222.54	$27.30	**$1,249.84**

JULY 2015 NDPERS Health Rates
Rate Structure A
For Anyone Enrolled Prior to July 1, 2015
Rates for July 1, 2016 -December 31, 2016

Code	Struct	Description	Total Health Premiums	Medicare Part D Premiums	Total Premiums	Less NDPERS Retention	Total Prem Paid to SHP	Total Prem Paid to ESI	Total Paid to SHP	NDPERS Retention	**NDPERS Billing Rate**
Medicare Retiree											
41	11	1 Medicare only	$183.76	$82.00	$265.76	$2.80	$180.96	$82.00	$180.96	$2.80	**$265.76**
42	11	2 Medicare only	$364.42	$164.00	$528.42	$2.80	$361.62	$164.00	$361.62	$2.80	**$528.42**
50	11	3 Medicare only	$545.68	$246.00	$791.68	$2.80	$542.88	$246.00	$542.88	$2.80	**$791.68**
51	11	4 Medicare only	$726.64	$328.00	$1,054.64	$2.80	$723.84	$328.00	$723.84	$2.80	**$1,054.64**
43	11	1 Medicare+Others	$621.44	$82.00	$703.44	$2.80	$618.64	$82.00	$618.64	$2.80	**$703.44**
49	11	2 Medicare+Others	$802.10	$164.00	$966.10	$2.80	$799.30	$164.00	$799.30	$2.80	**$966.10**
55	11	3 Medicare+Others	$983.36	$246.00	$1,229.36	$2.80	$980.56	$246.00	$980.56	$2.80	**$1,229.36**
58	11	4 Medicare+Others	$1,164.32	$328.00	$1,492.32	$2.80	$1,161.52	$328.00	$1,161.52	$2.80	**$1,492.32**
98	11	Single NM Dep GF Status	$437.68		$437.68		$437.68		$437.68		**$437.68**
99	11	Family NM Dep GF Status	$437.68		$437.68		$437.68		$437.68		**$437.68**
44	11	Part A Single	$461.02	$82.00	$543.02	$2.80	$458.22	$82.00	$458.22	$2.80	**$543.02**
Grandfathered Rates											
42	14	2 Medicare only	$364.46	$164.00	$528.46	$2.80	$361.66	$164.00	$361.66	$2.80	**$528.46**
50	14	3 Medicare only	$387.50	$246.00	$633.50	$2.80	$384.70	$246.00	$384.70	$2.80	**$633.50**
51	14	4 Medicare only	$237.84	$328.00	$565.84	$2.80	$235.04	$328.00	$235.04	$2.80	**$565.84**
49	14	2 Medicare+Others	$575.12	$164.00	$739.12	$2.80	$572.32	$164.00	$572.32	$2.80	**$739.12**
98	14	Single NM Dep GF Status	$210.66		$210.66		$210.66		$210.66		**$210.66**
GF Medicare Retirees COBRA (for Non-Medicare dependents of Medicare Retirees)											
30	11	Single	$440.48		$440.48	$2.80	$437.68		$437.68	$11.60	**$449.28**
31	11	Family	$621.14		$621.14	$2.80	$618.34		$618.34	$15.22	**$633.56**
GF Non-Medicare Retiree											
21	11	Single			$816.42	$2.80	$813.62		$813.62	$2.80	**$816.42**
22	11	Family			$1,632.84	$2.80	$1,630.04		$1,630.04	$2.80	**$1,632.84**
23	11	Family (3+)			$2,041.04	$2.80	$2,038.24		$2,038.24	$2.80	**$2,041.04**
GF COBRA											
24	11	Single			$816.42	$2.80	$813.62		$813.62	$19.12	**$832.74**
25	11	Family			$1,632.84	$2.80	$1,630.04		$1,630.04	$35.46	**$1,665.50**
26	11	Family (3+)			$2,041.04	$2.80	$2,038.24		$2,038.24	$43.62	**$2,081.86**
GAP Coverage											
61	11	GAP Single			$816.42	$2.80	$813.62		$813.62	$2.80	**$816.42**
62	11	GAP Family			$1,632.84	$2.80	$1,630.04		$1,630.04	$2.80	**$1,632.84**
63	11	GAP Family (3+)			$2,041.04	$2.80	$2,038.24		$2,038.24	$2.80	**$2,041.04**
64	11	GAP 1 Medicare + Others	$621.44	$82.00	$703.44	$2.80	$618.64	$82.00	$618.64	$2.80	**$703.44**
65	11	GAP 2 Medicare + Others	$802.10	$164.00	$966.10	$2.80	$799.30	$164.00	$799.30	$2.80	**$966.10**
66	11	GAP 3 Medicare + Others	$983.36	$246.00	$1,229.36	$2.80	$980.56	$246.00	$980.56	$2.80	**$1,229.36**
67	11	GAP 4 Medicare + Others	$1,164.32	$328.00	$1,492.32	$2.80	$1,161.52	$328.00	$1,161.52	$2.80	**$1,492.32**

JULY 2015 NDPERS Health Rates
Rate Structure A
For Anyone Enrolled Prior to July 1, 2015
Rates for July 1, 2016 -December 31, 2016

Code	Struct	Description	Total Health Premiums	Medicare Part D Premiums	Total Premiums	Less NDPERS Retention	Total Prem Paid to SHP	Total Prem Paid to ESI	Total Paid to SHP	NDPERS Retention	**NDPERS Billing Rate**
GF State Contracts with Wellness Program											
Active				(Flat Single/Family Rate)							
1-3	2	S/F/Dual			$1,130.22	$2.80	$1,127.42		$1,127.42	$2.80	**$1,130.22**
COBRA											
4	2	Single			$544.28	$2.80	$541.48		$541.48	$13.68	**$555.16**
5	2	Family			$1,311.74	$2.80	$1,308.94		$1,308.94	$29.02	**$1,337.96**
Part-Time/Temporary/LOA											
6	2	Single			$544.28	$2.80	$541.48		$541.48	$2.80	**$544.28**
7	2	Family			$1,311.74	$2.80	$1,308.94		$1,308.94	$2.80	**$1,311.74**
GF State Contracts with Wellness Program											
Active HDHP											
1-3	17	S/F/Dual			$989.68	$2.80	$986.88		$986.88	$143.34	**$1,130.22**
COBRA HDHP											
4	17	Single			$474.34	$2.80	$471.54		$471.54	$12.28	**$483.82**
5	17	Family			$1,142.50	$2.80	$1,139.70		$1,139.70	$25.64	**$1,165.34**
LOA HDHP											
6	17	Single			$474.34	$2.80	$471.54		$471.54	$2.80	**$474.34**
7	17	Family			$1,142.50	$2.80	$1,139.70		$1,139.70	$2.80	**$1,142.50**
GF State Contracts w/o Wellness Program											
Active				(Flat Single/Family Rate)							
1-3	1	S/F/Dual			$1,130.22	$2.80	$1,127.42		$1,127.42	$14.10	**$1,141.52**
COBRA											
4	1	Single			$544.28	$2.80	$541.48		$541.48	$13.68	**$555.16**
5	1	Family			$1,311.74	$2.80	$1,308.94		$1,308.94	$29.02	**$1,337.96**
Part-Time/Temporary/LOA											
6	1	Single			$544.28	$2.80	$541.48		$541.48	$7.54	**$549.02**
7	1	Family			$1,311.74	$2.80	$1,308.94		$1,308.94	$14.22	**$1,323.16**
NGF State Contracts w/o Wellness Program											
Active HDHP											
1-3	16	S/F/Dual			$989.68	$2.80	$986.88		$986.88	$154.64	**$1,141.52**
COBRA HDHP											
4	16	Single			$474.34	$2.80	$471.54		$471.54	$12.28	**$483.82**
5	16	Family			$1,142.50	$2.80	$1,139.70		$1,139.70	$25.64	**$1,165.34**
LOA HDHP											
6	16	Single			$474.34	$2.80	$471.54		$471.54	$7.54	**$479.08**
7	16	Family			$1,142.50	$2.80	$1,139.70		$1,139.70	$14.22	**$1,153.92**

JULY 2015 NDPERS Health Rates
Rate Structure A
For Anyone Enrolled Prior to July 1, 2015
Rates for July 1, 2016 -December 31, 2016

Code	Struct	Description	Total Health Premiums	Medicare Part D Premiums	Total Premiums	Less NDPERS Retention	Total Prem Paid to SHP	Total Prem Paid to ESI	Total Paid to SHP	NDPERS Retention	**NDPERS Billing Rate**
GF Political Subdivision Rates with Wellness Program											
Active											
1	4	Single			$581.48	$2.80	$578.68		$578.68	$2.80	**$581.48**
2	4	Family			$1,404.84	$2.80	$1,402.04		$1,402.04	$2.80	**$1,404.84**
COBRA											
4	4	Single			$581.48	$2.80	$578.68		$578.68	$14.42	**$593.10**
5	4	Family			$1,404.84	$2.80	$1,402.04		$1,402.04	$30.90	**$1,432.94**
Temp											
6	4	Single			$581.48	$2.80	$578.68		$578.68	$2.80	**$581.48**
7	4	Family			$1,404.84	$2.80	$1,402.04		$1,402.04	$2.80	**$1,404.84**
GF Political Subdivision Rates w/o Wellness Program											
Active											
1	3	Single			$581.48	$2.80	$578.68		$578.68	$8.60	**$587.28**
2	3	Family			$1,404.84	$2.80	$1,402.04		$1,402.04	$16.84	**$1,418.88**
COBRA											
4	3	Single			$581.48	$2.80	$578.68		$578.68	$14.42	**$593.10**
5	3	Family			$1,404.84	$2.80	$1,402.04		$1,402.04	$30.90	**$1,432.94**
Temp											
6	3	Single			$581.48	$2.80	$578.68		$578.68	$8.60	**$587.28**
7	3	Family			$1,404.84	$2.80	$1,402.04		$1,402.04	$16.84	**$1,418.88**
NGF Political Subdivision Rates with Wellness Program											
Active											
1	24	Single			$590.32	$2.80	$587.52		$587.52	$2.80	**$590.32**
2	24	Family			$1,426.20	$2.80	$1,423.40		$1,423.40	$2.80	**$1,426.20**
COBRA											
4	24	Single			$590.32	$2.80	$587.52		$587.52	$14.60	**$602.12**
5	24	Family			$1,426.20	$2.80	$1,423.40		$1,423.40	$31.32	**$1,454.72**
Temp											
6	24	Single			$590.32	$2.80	$587.52		$587.52	$2.80	**$590.32**
7	24	Family			$1,426.20	$2.80	$1,423.40		$1,423.40	$2.80	**$1,426.20**
Active HDHP											
1	26	Single			$521.10	$2.80	$518.30		$518.30	$2.80	**$521.10**
2	26	Family			$1,258.98	$2.80	$1,256.18		$1,256.18	$2.80	**$1,258.98**
COBRA HDHP											
4	26	Single			$521.10	$2.80	$518.30		$518.30	$13.22	**$531.52**
5	26	Family			$1,258.98	$2.80	$1,256.18		$1,256.18	$27.98	**$1,284.16**
NGF Political Subdivision Rates w/o Wellness Program											
Active											
1	23	Single			$590.32	$2.80	$587.52		$587.52	$8.00	**$595.52**
2	23	Family			$1,426.20	$2.80	$1,423.40		$1,423.40	$15.38	**$1,438.78**
COBRA											
4	23	Single			$590.32	$2.80	$587.52		$587.52	$14.60	**$602.12**
5	23	Family			$1,426.20	$2.80	$1,423.40		$1,423.40	$31.32	**$1,454.72**
Temp											
6	23	Single			$590.32	$2.80	$587.52		$587.52	$8.00	**$595.52**
7	23	Family			$1,426.20	$2.80	$1,423.40		$1,423.40	$15.38	**$1,438.78**
Active HDHP											
1	25	Single			$521.10	$2.80	$518.30		$518.30	$8.00	**$526.30**
2	25	Family			$1,258.98	$2.80	$1,256.18		$1,256.18	$15.38	**$1,271.56**
COBRA HDHP											
4	25	Single			$521.10	$2.80	$518.30		$518.30	$13.22	**$531.52**
5	25	Family			$1,258.98	$2.80	$1,256.18		$1,256.18	$27.98	**$1,284.16**

JULY 2015 NDPERS Health Rates
Rate Structure B
New Subscribers or Groups July 1, 2015 and After
Rates for July 1, 2016 -December 31, 2016

Code	Struct	Description	Total Health Premiums	Medicare Part D Premiums	Total Premiums	Less NDPERS Retention	Total Prem Paid to SHP	Total Prem Paid to ESI	Total Paid to SHP	NDPERS Retention	NDPERS Billing Rate
Medicare Retiree											
41	12	1 Medicare only	$186.10	$82.00	$268.10	$2.80	$183.30	$82.00	$183.30	$2.80	**$268.10**
42	12	2 Medicare only	$369.08	$164.00	$533.08	$2.80	$366.28	$164.00	$366.28	$2.80	**$533.08**
50	12	3 Medicare only	$552.66	$246.00	$798.66	$2.80	$549.86	$246.00	$549.86	$2.80	**$798.66**
51	12	4 Medicare only	$735.94	$328.00	$1,063.94	$2.80	$733.14	$328.00	$733.14	$2.80	**$1,063.94**
43	12	1 Medicare+Others	$629.38	$82.00	$711.38	$2.80	$626.58	$82.00	$626.58	$2.80	**$711.38**
49	12	2 Medicare+Others	$812.36	$164.00	$976.36	$2.80	$809.56	$164.00	$809.56	$2.80	**$976.36**
55	12	3 Medicare+Others	$995.94	$246.00	$1,241.94	$2.80	$993.14	$246.00	$993.14	$2.80	**$1,241.94**
58	12	4 Medicare+Others	$1,179.22	$328.00	$1,507.22	$2.80	$1,176.42	$328.00	$1,176.42	$2.80	**$1,507.22**
98	12	Single NM Dep GF Status	$443.28		$443.28		$443.28		$443.28		**$443.28**
99	12	Family NM Dep GF Status	$443.28		$443.28		$443.28		$443.28		**$443.28**
GF Medicare Retirees COBRA (for Non-Medicare dependents of Medicare Retirees)											
30	12	Single	$446.08		$446.08	$2.80	$443.28		$443.28	$11.72	**$455.00**
31	12	Family	$629.06		$629.06	$2.80	$626.26		$626.26	$15.38	**$641.64**
GF Non-Medicare Retiree											
21	12	Single			$816.42	$2.80	$813.62		$813.62	$2.80	**$816.42**
22	12	Family			$1,632.84	$2.80	$1,630.04		$1,630.04	$2.80	**$1,632.84**
23	12	Family (3+)			$2,041.04	$2.80	$2,038.24		$2,038.24	$2.80	**$2,041.04**
GF COBRA											
24	12	Single			$816.42	$2.80	$813.62		$813.62	$19.12	**$832.74**
25	12	Family			$1,632.84	$2.80	$1,630.04		$1,630.04	$35.46	**$1,665.50**
26	12	Family (3+)			$2,041.04	$2.80	$2,038.24		$2,038.24	$43.62	**$2,081.86**
GAP Coverage											
61	12	GAP Single			$816.42	$2.80	$813.62		$813.62	$2.80	**$816.42**
62	12	GAP Family			$1,632.84	$2.80	$1,630.04		$1,630.04	$2.80	**$1,632.84**
63	12	GAP Family (3+)			$2,041.04	$2.80	$2,038.24		$2,038.24	$2.80	**$2,041.04**
64	12	GAP 1 Medicare + Others	$629.38	$82.00	$711.38	$2.80	$626.58	$82.00	$626.58	$2.80	**$711.38**
65	12	GAP 2 Medicare + Others	$812.36	$164.00	$976.36	$2.80	$809.56	$164.00	$809.56	$2.80	**$976.36**
66	12	GAP 3 Medicare + Others	$995.94	$246.00	$1,241.94	$2.80	$993.14	$246.00	$993.14	$2.80	**$1,241.94**
67	12	GAP 4 Medicare + Others	$1,179.22	$328.00	$1,507.22	$2.80	$1,176.42	$328.00	$1,176.42	$2.80	**$1,507.22**

JULY 2015 NDPERS Health Rates
Rate Structure B
New Subscribers or Groups July 1, 2015 and After
Rates for July 1, 2016 -December 31, 2016

Code	Struct	Description	Total Health Premiums	Medicare Part D Premiums	Total Premiums	Less NDPERS Retention	Total Prem Paid to SHP	Total Prem Paid to ESI	Total Paid to SHP	NDPERS Retention	NDPERS Billing Rate
GF Political Subdivision Rates with Wellness Program											
Active											
1	8	Single			$596.54	$2.80	$593.74		$593.74	$2.80	**$596.54**
2	8	Family			$1,439.98	$2.80	$1,437.18		$1,437.18	$2.80	**$1,439.98**
COBRA											
4	8	Single			$596.54	$2.80	$593.74		$593.74	$14.72	**$608.46**
5	8	Family			$1,439.98	$2.80	$1,437.18		$1,437.18	$31.60	**$1,468.78**
Temp											
6	8	Single			$596.54	$2.80	$593.74		$593.74	$2.80	**$596.54**
7	8	Family			$1,439.98	$2.80	$1,437.18		$1,437.18	$2.80	**$1,439.98**
GF Political Subdivision Rates w/o Wellness Program											
Active											
1	7	Single			$596.54	$2.80	$593.74		$593.74	$8.76	**$602.50**
2	7	Family			$1,439.98	$2.80	$1,437.18		$1,437.18	$17.20	**$1,454.38**
COBRA											
4	7	Single			$596.54	$2.80	$593.74		$593.74	$14.72	**$608.46**
5	7	Family			$1,439.98	$2.80	$1,437.18		$1,437.18	$31.60	**$1,468.78**
Temp											
6	7	Single			$596.54	$2.80	$593.74		$593.74	$8.76	**$602.50**
7	7	Family			$1,439.98	$2.80	$1,437.18		$1,437.18	$17.20	**$1,454.38**
NGF Political Subdivision Rates with Wellness Program											
Active											
1	28	Single			$605.62	$2.80	$602.82		$602.82	$2.80	**$605.62**
2	28	Family			$1,463.12	$2.80	$1,460.32		$1,460.32	$2.80	**$1,463.12**
COBRA											
4	28	Single			$605.62	$2.80	$602.82		$602.82	$14.90	**$617.72**
5	28	Family			$1,463.12	$2.80	$1,460.32		$1,460.32	$32.06	**$1,492.38**
Temp											
6	28	Single			$605.62	$2.80	$602.82		$602.82	$2.80	**$605.62**
7	28	Family			$1,463.12	$2.80	$1,460.32		$1,460.32	$2.80	**$1,463.12**
Active HDHP											
1	30	Single			$534.12	$2.80	$531.32		$531.32	$2.80	**$534.12**
2	30	Family			$1,290.46	$2.80	$1,287.66		$1,287.66	$2.80	**$1,290.46**
COBRA HDHP											
4	30	Single			$534.12	$2.80	$531.32		$531.32	$13.48	**$544.80**
5	30	Family			$1,290.46	$2.80	$1,287.66		$1,287.66	$28.60	**$1,316.26**
NGF Political Subdivision Rates w/o Wellness Program											
Active											
1	27	Single			$605.62	$2.80	$602.82		$602.82	$8.14	**$610.96**
2	27	Family			$1,463.12	$2.80	$1,460.32		$1,460.32	$15.70	**$1,476.02**
COBRA											
4	27	Single			$605.62	$2.80	$602.82		$602.82	$14.90	**$617.72**
5	27	Family			$1,463.12	$2.80	$1,460.32		$1,460.32	$32.06	**$1,492.38**
Temp											
6	27	Single			$605.62	$2.80	$602.82		$602.82	$8.14	**$610.96**
7	27	Family			$1,463.12	$2.80	$1,460.32		$1,460.32	$15.70	**$1,476.02**
Active HDHP											
1	29	Single			$534.12	$2.80	$531.32		$531.32	$8.14	**$539.46**
2	29	Family			$1,290.46	$2.80	$1,287.66		$1,287.66	$15.70	**$1,303.36**
COBRA HDHP											
4	29	Single			$534.12	$2.80	$531.32		$531.32	$13.48	**$544.80**
5	29	Family			$1,290.46	$2.80	$1,287.66		$1,287.66	$28.60	**$1,316.26**

JULY 2015 NDPERS Health Rates
Rate Structure A
For Anyone Enrolled Prior to July 1, 2015
Rates for January 1, 2017 - June 30, 2017

Code	Struct	Description	Total Health Premiums	Medicare Part D Premiums	Total Premiums	Less NDPERS Retention	Total Prem Paid to SHP	Total Prem Paid to ESI	Total Paid to SHP	NDPERS Retention	**NDPERS Billing Rate**
Medicare Retiree											
41	11	1 Medicare only	$183.76	$90.32	$274.08	$2.80	$180.96	$90.32	$180.96	$2.80	**$274.08**
42	11	2 Medicare only	$364.42	$180.64	$545.06	$2.80	$361.62	$180.64	$361.62	$2.80	**$545.06**
50	11	3 Medicare only	$545.68	$270.96	$816.64	$2.80	$542.88	$270.96	$542.88	$2.80	**$816.64**
51	11	4 Medicare only	$726.64	$361.28	$1,087.92	$2.80	$723.84	$361.28	$723.84	$2.80	**$1,087.92**
43	11	1 Medicare+Others	$621.44	$90.32	$711.76	$2.80	$618.64	$90.32	$618.64	$2.80	**$711.76**
49	11	2 Medicare+Others	$802.10	$180.64	$982.74	$2.80	$799.30	$180.64	$799.30	$2.80	**$982.74**
55	11	3 Medicare+Others	$983.36	$270.96	$1,254.32	$2.80	$980.56	$270.96	$980.56	$2.80	**$1,254.32**
58	11	4 Medicare+Others	$1,164.32	$361.28	$1,525.60	$2.80	$1,161.52	$361.28	$1,161.52	$2.80	**$1,525.60**
98	11	Single NM Dep GF Status	$437.68		$437.68		$437.68		$437.68		**$437.68**
99	11	Family NM Dep GF Status	$437.68		$437.68		$437.68		$437.68		**$437.68**
44	11	Part A Single	$461.02	$90.32	$551.34	$2.80	$458.22	$90.32	$458.22	$2.80	**$551.34**
Grandfathered Rates											
42	14	2 Medicare only	$364.46	$180.64	$545.10	$2.80	$361.66	$180.64	$361.66	$2.80	**$545.10**
50	14	3 Medicare only	$387.50	$270.96	$658.46	$2.80	$384.70	$270.96	$384.70	$2.80	**$658.46**
51	14	4 Medicare only	$237.84	$361.28	$599.12	$2.80	$235.04	$361.28	$235.04	$2.80	**$599.12**
49	14	2 Medicare+Others	$575.12	$180.64	$755.76	$2.80	$572.32	$180.64	$572.32	$2.80	**$755.76**
98	14	Single NM Dep GF Status	$210.66		$210.66		$210.66		$210.66		**$210.66**
GF Medicare Retirees COBRA (for Non-Medicare dependents of Medicare Retirees)											
30	11	Single	$440.48		$440.48	$2.80	$437.68		$437.68	$11.60	**$449.28**
31	11	Family	$621.14		$621.14	$2.80	$618.34		$618.34	$15.22	**$633.56**
GF Non-Medicare Retiree											
21	11	Single			$816.42	$2.80	$813.62		$813.62	$2.80	**$816.42**
22	11	Family			$1,632.84	$2.80	$1,630.04		$1,630.04	$2.80	**$1,632.84**
23	11	Family (3+)			$2,041.04	$2.80	$2,038.24		$2,038.24	$2.80	**$2,041.04**
GF COBRA											
24	11	Single			$816.42	$2.80	$813.62		$813.62	$19.12	**$832.74**
25	11	Family			$1,632.84	$2.80	$1,630.04		$1,630.04	$35.46	**$1,665.50**
26	11	Family (3+)			$2,041.04	$2.80	$2,038.24		$2,038.24	$43.62	**$2,081.86**
GAP Coverage											
61	11	GAP Single			$816.42	$2.80	$813.62		$813.62	$7.54	**$821.16**
62	11	GAP Family			$1,632.84	$2.80	$1,630.04		$1,630.04	$7.54	**$1,637.58**
63	11	GAP Family (3+)			$2,041.04	$2.80	$2,038.24		$2,038.24	$7.54	**$2,045.78**
64	11	GAP 1 Medicare + Others	$621.44	$90.32	$711.76	$2.80	$618.64	$90.32	$618.64	$7.54	**$716.50**
65	11	GAP 2 Medicare + Others	$802.10	$180.64	$982.74	$2.80	$799.30	$180.64	$799.30	$2.80	**$982.74**
66	11	GAP 3 Medicare + Others	$983.36	$270.96	$1,254.32	$2.80	$980.56	$270.96	$980.56	$2.80	**$1,254.32**
67	11	GAP 4 Medicare + Others	$1,164.32	$361.28	$1,525.60	$2.80	$1,161.52	$361.28	$1,161.52	$2.80	**$1,525.60**

JULY 2015 NDPERS Health Rates
Rate Structure A
For Anyone Enrolled Prior to July 1, 2015
Rates for January 1, 2017 - June 30, 2017

Code	Struct	Description	Total Health Premiums	Medicare Part D Premiums	Total Premiums	Less NDPERS Retention	Total Prem Paid to SHP	Total Prem Paid to ESI	Total Paid to SHP	NDPERS Retention	**NDPERS Billing Rate**
GF State Contracts with Wellness Program											
Active					(Flat Single/Family Rate)						
1-3	2	S/F/Dual			$1,130.22	$2.80	$1,127.42		$1,127.42	$2.80	**$1,130.22**
COBRA											
4	2	Single			$544.28	$2.80	$541.48		$541.48	$13.68	**$555.16**
5	2	Family			$1,311.74	$2.80	$1,308.94		$1,308.94	$29.02	**$1,337.96**
Part-Time/Temporary/LOA											
6	2	Single			$544.28	$2.80	$541.48		$541.48	$2.80	**$544.28**
7	2	Family			$1,311.74	$2.80	$1,308.94		$1,308.94	$2.80	**$1,311.74**
NGF State Contracts with Wellness Program											
Active HDHP											
1-3	17	S/F/Dual			$989.68	$2.80	$986.88		$986.88	$143.34	**$1,130.22**
COBRA HDHP											
4	17	Single			$474.34	$2.80	$471.54		$471.54	$12.28	**$483.82**
5	17	Family			$1,142.50	$2.80	$1,139.70		$1,139.70	$25.64	**$1,165.34**
LOA HDHP											
6	17	Single			$474.34	$2.80	$471.54		$471.54	$2.80	**$474.34**
7	17	Family			$1,142.50	$2.80	$1,139.70		$1,139.70	$2.80	**$1,142.50**
GF State Contracts w/o Wellness Program											
Active					(Flat Single/Family Rate)						
1-3	1	S/F/Dual			$1,130.22	$2.80	$1,127.42		$1,127.42	$14.10	**$1,141.52**
COBRA											
4	1	Single			$544.28	$2.80	$541.48		$541.48	$13.68	**$555.16**
5	1	Family			$1,311.74	$2.80	$1,308.94		$1,308.94	$29.02	**$1,337.96**
Part-Time/Temporary/LOA											
6	1	Single			$544.28	$2.80	$541.48		$541.48	$7.54	**$549.02**
7	1	Family			$1,311.74	$2.80	$1,308.94		$1,308.94	$14.22	**$1,323.16**
NGF State Contracts w/o Wellness Program											
Active HDHP											
1-3	16	S/F/Dual			$989.68	$2.80	$986.88		$986.88	$154.64	**$1,141.52**
COBRA HDHP											
4	16	Single			$474.34	$2.80	$471.54		$471.54	$12.28	**$483.82**
5	16	Family			$1,142.50	$2.80	$1,139.70		$1,139.70	$25.64	**$1,165.34**
LOA HDHP											
6	16	Single			$474.34	$2.80	$471.54		$471.54	$7.54	**$479.08**
7	16	Family			$1,142.50	$2.80	$1,139.70		$1,139.70	$14.22	**$1,153.92**

JULY 2015 NDPERS Health Rates
Rate Structure A
For Anyone Enrolled Prior to July 1, 2015
Rates for January 1, 2017 - June 30, 2017

Code	Struct	Description	Total Health Premiums	Medicare Part D Premiums	Total Premiums	Less NDPERS Retention	Total Prem Paid to SHP	Total Prem Paid to ESI	Total Paid to SHP	NDPERS Retention	**NDPERS Billing Rate**
GF Political Subdivision Rates with Wellness Program											
Active											
1	4	Single			$581.48	$2.80	$578.68		$578.68	$2.80	**$581.48**
2	4	Family			$1,404.84	$2.80	$1,402.04		$1,402.04	$2.80	**$1,404.84**
COBRA											
4	4	Single			$581.48	$2.80	$578.68		$578.68	$14.42	**$593.10**
5	4	Family			$1,404.84	$2.80	$1,402.04		$1,402.04	$30.90	**$1,432.94**
Temp											
6	4	Single			$581.48	$2.80	$578.68		$578.68	$2.80	**$581.48**
7	4	Family			$1,404.84	$2.80	$1,402.04		$1,402.04	$2.80	**$1,404.84**
GF Political Subdivision Rates w/o Wellness Program											
Active											
1	3	Single			$581.48	$2.80	$578.68		$578.68	$8.60	**$587.28**
2	3	Family			$1,404.84	$2.80	$1,402.04		$1,402.04	$16.84	**$1,418.88**
COBRA											
4	3	Single			$581.48	$2.80	$578.68		$578.68	$14.42	**$593.10**
5	3	Family			$1,404.84	$2.80	$1,402.04		$1,402.04	$30.90	**$1,432.94**
Temp											
6	3	Single			$581.48	$2.80	$578.68		$578.68	$8.60	**$587.28**
7	3	Family			$1,404.84	$2.80	$1,402.04		$1,402.04	$16.84	**$1,418.88**
NGF Political Subdivision Rates with Wellness Program											
Active											
1	24	Single			$590.32	$2.80	$587.52		$587.52	$2.80	**$590.32**
2	24	Family			$1,426.20	$2.80	$1,423.40		$1,423.40	$2.80	**$1,426.20**
COBRA											
4	24	Single			$590.32	$2.80	$587.52		$587.52	$14.60	**$602.12**
5	24	Family			$1,426.20	$2.80	$1,423.40		$1,423.40	$31.32	**$1,454.72**
Temp											
6	24	Single			$590.32	$2.80	$587.52		$587.52	$2.80	**$590.32**
7	24	Family			$1,426.20	$2.80	$1,423.40		$1,423.40	$2.80	**$1,426.20**
Active HDHP											
1	26	Single			$521.10	$2.80	$518.30		$518.30	$2.80	**$521.10**
2	26	Family			$1,258.98	$2.80	$1,256.18		$1,256.18	$2.80	**$1,258.98**
COBRA HDHP											
4	26	Single			$521.10	$2.80	$518.30		$518.30	$13.22	**$531.52**
5	26	Family			$1,258.98	$2.80	$1,256.18		$1,256.18	$27.98	**$1,284.16**
NGF Political Subdivision Rates w/o Wellness Program											
Active											
1	23	Single			$590.32	$2.80	$587.52		$587.52	$8.00	**$595.52**
2	23	Family			$1,426.20	$2.80	$1,423.40		$1,423.40	$15.38	**$1,438.78**
COBRA											
4	23	Single			$590.32	$2.80	$587.52		$587.52	$14.60	**$602.12**
5	23	Family			$1,426.20	$2.80	$1,423.40		$1,423.40	$31.32	**$1,454.72**
Temp											
6	23	Single			$590.32	$2.80	$587.52		$587.52	$8.00	**$595.52**
7	23	Family			$1,426.20	$2.80	$1,423.40		$1,423.40	$15.38	**$1,438.78**
Active HDHP											
1	25	Single			$521.10	$2.80	$518.30		$518.30	$8.00	**$526.30**
2	25	Family			$1,258.98	$2.80	$1,256.18		$1,256.18	$15.38	**$1,271.56**
COBRA HDHP											
4	25	Single			$521.10	$2.80	$518.30		$518.30	$13.22	**$531.52**
5	25	Family			$1,258.98	$2.80	$1,256.18		$1,256.18	$27.98	**$1,284.16**

JULY 2015 NDPERS Health Rates
Rate Structure B
New Subscribers or Groups July 1, 2015 and After
Rates for January 1, 2017 - June 30, 2017

Code	Struct	Description	Total Health Premiums	Medicare Part D Premiums	Total Premiums	Less NDPERS Retention	Total Prem Paid to SHP	Total Prem Paid to ESI	Total Paid to SHP	NDPERS Retention	NDPERS Billing Rate
Medicare Retiree											
41	12	1 Medicare only	$186.10	$90.32	$276.42	$2.80	$183.30	$90.32	$183.30	$2.80	**$276.42**
42	12	2 Medicare only	$369.08	$180.64	$549.72	$2.80	$366.28	$180.64	$366.28	$2.80	**$549.72**
50	12	3 Medicare only	$552.66	$270.96	$823.62	$2.80	$549.86	$270.96	$549.86	$2.80	**$823.62**
51	12	4 Medicare only	$735.94	$361.28	$1,097.22	$2.80	$733.14	$361.28	$733.14	$2.80	**$1,097.22**
43	12	1 Medicare+Others	$629.38	$90.32	$719.70	$2.80	$626.58	$90.32	$626.58	$2.80	**$719.70**
49	12	2 Medicare+Others	$812.36	$180.64	$993.00	$2.80	$809.56	$180.64	$809.56	$2.80	**$993.00**
55	12	3 Medicare+Others	$995.94	$270.96	$1,266.90	$2.80	$993.14	$270.96	$993.14	$2.80	**$1,266.90**
58	12	4 Medicare+Others	$1,179.22	$361.28	$1,540.50	$2.80	$1,176.42	$361.28	$1,176.42	$2.80	**$1,540.50**
98	12	Single NM Dep GF Status	$443.28		$443.28		$443.28		$443.28		**$443.28**
99	12	Family NM Dep GF Status	$443.28		$443.28		$443.28		$443.28		**$443.28**
GF Medicare Retirees COBRA (for Non-Medicare dependents of Medicare Retirees)											
30	12	Single	$446.08		$446.08	$2.80	$443.28		$443.28	$11.72	**$455.00**
31	12	Family	$629.06		$629.06	$2.80	$626.26		$626.26	$15.38	**$641.64**
GF Non-Medicare Retiree											
21	12	Single			$816.42	$2.80	$813.62		$813.62	$2.80	**$816.42**
22	12	Family			$1,632.84	$2.80	$1,630.04		$1,630.04	$2.80	**$1,632.84**
23	12	Family (3+)			$2,041.04	$2.80	$2,038.24		$2,038.24	$2.80	**$2,041.04**
GF COBRA											
24	12	Single			$816.42	$2.80	$813.62		$813.62	$19.12	**$832.74**
25	12	Family			$1,632.84	$2.80	$1,630.04		$1,630.04	$35.46	**$1,665.50**
26	12	Family (3+)			$2,041.04	$2.80	$2,038.24		$2,038.24	$43.62	**$2,081.86**
GAP Coverage											
61	12	GAP Single			$816.42	$2.80	$813.62		$813.62	$2.80	**$816.42**
62	12	GAP Family			$1,632.84	$2.80	$1,630.04		$1,630.04	$2.80	**$1,632.84**
63	12	GAP Family (3+)			$2,041.04	$2.80	$2,038.24		$2,038.24	$2.80	**$2,041.04**
64	12	GAP 1 Medicare + Others	$629.38	$90.32	$719.70	$2.80	$626.58	$90.32	$626.58	$2.80	**$719.70**
65	12	GAP 2 Medicare + Others	$812.36	$180.64	$993.00	$2.80	$809.56	$180.64	$809.56	$2.80	**$993.00**
66	12	GAP 3 Medicare + Others	$995.94	$270.96	$1,266.90	$2.80	$993.14	$270.96	$993.14	$2.80	**$1,266.90**
67	12	GAP 4 Medicare + Others	$1,179.22	$361.28	$1,540.50	$2.80	$1,176.42	$361.28	$1,176.42	$2.80	**$1,540.50**

JULY 2015 NDPERS Health Rates
Rate Structure B
New Subscribers or Groups July 1, 2015 and After
Rates for January 1, 2017 - June 30, 2017

Code	Struct	Description	Total Health Premiums	Medicare Part D Premiums	Total Premiums	Less NDPERS Retention	Total Prem Paid to SHP	Total Prem Paid to ESI	Total Paid to SHP	NDPERS Retention	NDPERS Billing Rate
GF Political Subdivision Rates with Wellness Program											
Active											
1	8	Single			$596.54	$2.80	$593.74		$593.74	$2.80	**$596.54**
2	8	Family			$1,439.98	$2.80	$1,437.18		$1,437.18	$2.80	**$1,439.98**
COBRA											
4	8	Single			$596.54	$2.80	$593.74		$593.74	$14.72	**$608.46**
5	8	Family			$1,439.98	$2.80	$1,437.18		$1,437.18	$31.60	**$1,468.78**
Temp											
6	8	Single			$596.54	$2.80	$593.74		$593.74	$2.80	**$596.54**
7	8	Family			$1,439.98	$2.80	$1,437.18		$1,437.18	$2.80	**$1,439.98**
GF Political Subdivision Rates w/o Wellness Program											
Active											
1	7	Single			$596.54	$2.80	$593.74		$593.74	$8.76	**$602.50**
2	7	Family			$1,439.98	$2.80	$1,437.18		$1,437.18	$17.20	**$1,454.38**
COBRA											
4	7	Single			$596.54	$2.80	$593.74		$593.74	$14.72	**$608.46**
5	7	Family			$1,439.98	$2.80	$1,437.18		$1,437.18	$31.60	**$1,468.78**
Temp											
6	7	Single			$596.54	$2.80	$593.74		$593.74	$8.76	**$602.50**
7	7	Family			$1,439.98	$2.80	$1,437.18		$1,437.18	$17.20	**$1,454.38**
NGF Political Subdivision Rates with Wellness Program											
Active											
1	28	Single			$605.62	$2.80	$602.82		$602.82	$2.80	**$605.62**
2	28	Family			$1,463.12	$2.80	$1,460.32		$1,460.32	$2.80	**$1,463.12**
COBRA											
4	28	Single			$605.62	$2.80	$602.82		$602.82	$14.90	**$617.72**
5	28	Family			$1,463.12	$2.80	$1,460.32		$1,460.32	$32.06	**$1,492.38**
Temp											
6	28	Single			$605.62	$2.80	$602.82		$602.82	$2.80	**$605.62**
7	28	Family			$1,463.12	$2.80	$1,460.32		$1,460.32	$2.80	**$1,463.12**
Active HDHP											
1	30	Single			$534.12	$2.80	$531.32		$531.32	$2.80	**$534.12**
2	30	Family			$1,290.46	$2.80	$1,287.66		$1,287.66	$2.80	**$1,290.46**
COBRA HDHP											
4	30	Single			$534.12	$2.80	$531.32		$531.32	$13.48	**$544.80**
5	30	Family			$1,290.46	$2.80	$1,287.66		$1,287.66	$28.60	**$1,316.26**
NGF Political Subdivision Rates w/o Wellness Program											
Active											
1	27	Single			$605.62	$2.80	$602.82		$602.82	$8.14	**$610.96**
2	27	Family			$1,463.12	$2.80	$1,460.32		$1,460.32	$15.70	**$1,476.02**
COBRA											
4	27	Single			$605.62	$2.80	$602.82		$602.82	$14.90	**$617.72**
5	27	Family			$1,463.12	$2.80	$1,460.32		$1,460.32	$32.06	**$1,492.38**
Temp											
6	27	Single			$605.62	$2.80	$602.82		$602.82	$8.14	**$610.96**
7	27	Family			$1,463.12	$2.80	$1,460.32		$1,460.32	$15.70	**$1,476.02**
Active HDHP											
1	29	Single			$534.12	$2.80	$531.32		$531.32	$8.14	**$539.46**
2	29	Family			$1,290.46	$2.80	$1,287.66		$1,287.66	$15.70	**$1,303.36**
COBRA HDHP											
4	29	Single			$534.12	$2.80	$531.32		$531.32	$13.48	**$544.80**
5	29	Family			$1,290.46	$2.80	$1,287.66		$1,287.66	$28.60	**$1,316.26**

Exhibit D
Illustration of the NDPERS Settlement Process

ND PERS Settlement Illustration - No Settlement		Section 7.3 Initial Settlement		Section 7.4 Final Settlement
First Period of Biennium		7/1/15-6/30/16		7/1/15-6/30/16
Second Period of Biennium		7/1/16-6/30/17		7/1/16-6/30/17
Paid Through Date		6/30/2018		6/30/2019
Initial Settlement Due		7/31/2018		7/31/2019
Average Members (includes attrition of Non-Medicare retirees)		64,795		64,795
Average Non-Medicare Members		56,083		56,083
Earned Biennium Premium (which is net of NDPERS Admin Fee)	1 $	614,809	1 $	614,809
Plus Interest on Surplus	2 $	-	2 $	-
Less Claims Incurred for Biennium Paid through 6/30/18	3 $	(565,548)	3 $	(570,548)
Less Estimated Unpaid claims	4 $	(5,000)	$	-
Less Admin Expense ($11.60 per member)	5 $	(18,037)	4 $	(18,037)
Less Service Charge ($4.89 per member) Retention/Reinsurance	6 $	(7,595)	5 $	(7,595)
Less Disease Management Program ($0.64 per member)	7 $	(1,002)	6 $	(1,002)
Less Health Club/Wellness Credit Program ($1.96 per member)	8 $	(3,047)	7 $	(3,047)
Less Actual PPACA Fees Paid (per 7.2.2)	9 $	(14,581)	8 $	(14,581)
Less/Plus Refunded PPACA Fees to NDPERS/SHP (per 7.2.3)	10 $	-	9 $	-
Subtotal	$	(0)	$	(0)
Initial Settlement Amount Due to NDPERS 7/31/18	$	-	$	-
Final Settlement Amount Due to NDPERS 7/31/18		N/A	$	-
Net Carrier Retained	$	-	$	-

ND PERS Settlement Illustration - with Settlement		Section 7.3 Initial Settlement		Section 7.4 Final Settlement
First Period of Biennium		7/1/15-6/30/16		7/1/15-6/30/16
Second Period of Biennium		7/1/16-6/30/17		7/1/16-6/30/17
Paid Through Date		6/30/2018		6/30/2019
Initial Settlement Due		7/31/2018		7/31/2019
Average Members (includes attrition of Non-Medicare retirees)		64,795		64,795
Average Non-Medicare Members		56,083		56,083
Earned Biennium Premium (which is net of NDPERS Admin Fee)	1 $	614,809	1 $	614,809
Plus Interest on Surplus	2 $	-	2 $	-
Less Claims Incurred for Biennium Paid through 6/30/18	3 $	(560,640)	3 $	(565,640)
Less Estimated Unpaid claims	4 $	(5,000)	$	-
Less Admin Expense ($11.60 per member)	5 $	(19,945)	4 $	(19,945)
Less Service Charge ($4.89 per member) Retention/Reinsurance	6 $	(7,595)	5 $	(7,595)
Less Disease Management Program ($0.64 per member)	7 $	(1,002)	6 $	(1,002)
Less Health Club/Wellness Credit Program ($1.96 per member)	8 $	(3,047)	7 $	(3,047)
Less Actual PPACA Fees Paid (per 7.2.2)	9 $	(14,581)	8 $	(14,581)
Less/Plus Refunded PPACA Fees to NDPERS/SHP (per 7.2.3)	10 $	-	9 $	-
Subtotal	$	3,000	$	3,000
Initial Settlement Amount Due to NDPERS 7/31/18	$	(1,500)	$	(1,500)
Final Settlement Amount Due to NDPERS 7/31/18		N/A	$	-
Net Carrier Retained	$	1,500	$	1,500

Exhibit E

Pharmacy Disease Management Program Obligations

PHARMACY DISEASE MANAGEMENT PROGRAM
TERMS

WHEREAS, during the 2007 North Dakota legislative session, House Bill 1433 was passed and enacted into law. House Bill 1433 allows pharmacists and other qualified North Dakota health care providers to provide "disease state management" (DSM) to North Dakota public employees that suffer from chronic diseases and specifically have diabetes; and

WHEREAS, The North Dakota Pharmacy Service Corporation wants to offer a disease state management program of diabetes through delivery of services and support to individual North Dakota public employees (NDPERS Members) that have a chronic disease identified as diabetes (Type 1 or Type 2). To this end, the North Dakota Pharmacy Service Corporation desires to implement a program to increase access to health care, redefine how services are delivered, increase the participants' knowledgebase regarding their disease, increase the quality of life for participants, improve overall health status and medication adherence for their participants, and reduce health care costs on multiple levels for numerous interest groups; and

WHEREAS, the North Dakota Pharmacy Service Corporation in collaboration with the North Dakota Pharmacists Association, the North Dakota Society of Health-System Pharmacists, and North Dakota State University College of Pharmacy, Nursing and Allied Sciences, proposed an acting model to extend such disease management program to NDPERS Members; and

WHEREAS, NDPERS is interested in offering the services proposed by the acting model to NDPERS Members and reimbursing the North Dakota Pharmacy Service Corporation for the costs of administering this program out of the NDPERS reserve fund currently held in trust by SHP; and

WHEREAS, as it relates to this acting model diabetes disease management program, NDPERS is desirous of entering into The terms hereof to sponsor and extend the disease management program with SHP to administer certain facets of the program on behalf of NDPERS, including certain reporting requirements, program promotion, and cost reconciliation for the administration of the program based on the responsibilities of SHP in relation to its management of the NDPERS group health plan and the program objectives for monitoring and containing health care; and

WHEREAS, because SHP is contracted with NDPERS to provide health care benefits to NDPERS Members, NDPERS has determined that SHP is best positioned to act as its agent in the administration of the diabetes disease management program.

NOW, WHEREFORE, in recognition of the mutual promises herein contained and for other good and valuable consideration hereby acknowledged by the parties hereto, NDPERS and SHP agree to the following.

I. RECOGNIZING THE PHARMACY DISEASE MANAGEMENT PROGRAM.

SHP acknowledges and agrees that it has reviewed the diabetes disease management program established through the enactment of House Bill 1433 and that the program as outlined provides services consistent with the wellness initiative reflected in the Administrative Services Agreement between SHP and NDPERS. SHP agrees that this program should remain in force through the next biennium.

II. TERM.

The terms relating to the program shall begin on July 1, 2015, and shall extend to June 30, 2017.

III. SCOPE OF PROGRAM.

The duties and responsibilities of SHP in furtherance of the diabetes disease management program as outlined herein shall be limited in nature as specifically set forth herein.

IV. FEES.

As a result of the responsibilities assigned to SHP under the terms of The terms hereof, SHP shall be paid a program promotion fee equal to its actual costs for its development and implementation of a plan to promote the diabetes disease management program contemplated through The terms hereof.

V. REPORTING. SHP agrees to provide the following reports:

A. Covered Drug List. A covered drug list with established criteria related to drugs by class.

B. NDPERS Member Eligibility List. A database to identify those NDPERS Members who appear to be eligible for the diabetes disease management program based on criteria developed and provided by NDPERS and/or its vendor, and on a monthly basis track those NDPERS Members eligible for the diabetes disease management program during the term of The terms hereof.

C. Co-Pay Report. A quarterly co-pay report that NDPERS and/or its vendor can use to reconcile appropriate co-pays incurred by eligible NDPERS Members to facilitate incentive payments under the diabetes disease management program, including coinsurance for diabetic testing supplies. SHP agrees to work with NDPERS to develop a reporting format that can be used by NDPERS and/or its vendor in administering the diabetes disease management program.

VI. PROMOTION.

Upon request and subject to approval by the NDPERS Board of Directors, SHP will provide promotional support for the diabetes disease management program services which may include but not be limited to agency notes, paycheck stuffers, e-mail notices, posters, and notices to home addresses to be distributed at periodic intervals throughout the term of The terms hereof. SHP shall be reimbursed its costs for these promotional activities and materials.

VII. PAYMENT RECONCILIATION.

Program costs such as provider payments, copay/coinsurance reimbursements and promotional charges are funded through the NDPERS Programs Cash Reserve Account maintained by SHP after authorization from NDPERS.

Exhibit F

Tobacco Cessation Program Obligations

TOBACCO CESSATION PROGRAM TERMS

WHEREAS, as it relates to this appropriation, the Department of Health has determined that NDPERS is to sponsor this tobacco cessation program based on its responsibilities related to the management of the group health plan and the program objectives for monitoring and containing health care; and

WHEREAS, because SHP is contracted with NDPERS to provide health care benefits to NDPERS Members, NDPERS has determined that SHP is to act as the administrator of the tobacco cessation program.

NOW, WHEREFORE, in recognition of the mutual promises herein contained and for other good and valuable consideration hereby acknowledged by the parties hereto, NDPERS and SHP agree to the following.

I. RECOGNIZING THE TOBACCO CESSATION PROGRAM.

SHP acknowledges and agrees that it has reviewed the tobacco cessation program grant documents and that the program as outlined in the grant documents provides services consistent with the wellness initiative reflected in the Administrative Services Agreement between SHP and NDPERS.

II. TERM.

The terms relating to the program shall begin on July 1, 2015, and shall extend to June 30, 2016.

III. SCOPE OF PROGRAM.

The tobacco cessation program as outlined herein shall be made available to eligible Members as determined by the NDPERS Board, together with their eligible family members that are at least 18 years of age. An estimate of the total number of eligible employees and family members and those anticipated will participate are outlined in the grant documents.

IV. BENEFITS AVAILABLE.

Tobacco Cessation Benefits pursuant to this TCP Agreement are as follows:

- $200.00 per Member/per Benefit Period for office visits and/or Department of Health-approved counseling services if the provider charges for these services.
- $500.00 per Member/per Benefit Period for prescription drugs and over-the-counter drugs prescribed for tobacco cessation.
- $700.00 is the total amount of expenses available per Member/per Benefit Period under the program.

Each participant is eligible to participate in the tobacco cessation program for a maximum benefit of $700.00 for each 6-month period hereunder.

All funds shall be billed by and paid directly to SHP. NDPERS will not charge any fees to the tobacco cessation program nor will it administer any funds for the program.

SHP shall reimburse providers monthly based on the paper billings submitted by those providers. SHP will then submit the total claims received for reimbursement to the Department of Health on a monthly basis. Funds shall be allocated on a first come first serve basis until all available funds are exhausted. Reimbursement shall be made to SHP on a monthly basis based on actual costs accrued by local providers for services provided to eligible state employees and family members plus the administrative fee paid to SHP up to a total maximum amount of $35,000.00.

A Member is eligible to participate in the tobacco cessation program during each of two separate benefit periods as follows. All members must enroll by April 30, 2016.

07/01/2015 through 12/31/2015

01/01/2016 through 06/30/2016

The tobacco cessation program shall provide a combination of counseling to include initial assessment, physician office visit, nicotine replacement therapy, and prescription medication, if indicated, and follow-up support counseling as necessary by individual, group or telephone.

Re-treatment shall be made available within 6 months and will be the responsibility of the counseling program with reimbursement available on the same basis as during any initial treatment phase.

V. FEES.

As a result of the responsibilities assigned to SHP under the terms of the grant documents and hereunder, SHP shall be paid an administrative fee for administering the tobacco cessation program that shall be equal to nine percent (9%) of claims paid to providers to pay costs incurred by SHP as program administrator and granting entity. For example, if total claims submitted by the providers are $60,000.00, SHP will add a 9% administration fee for a total of $5,400.00.

VI. REPORTING.

SHP agrees to provide the following reports:

- Track each patient receiving therapy and level of therapy based on claims data.
- Report every six months to the NDPERS and Department of Health program results and participation rates.

- Work with an independent outside evaluator to evaluate program. Any administrative costs associated with collaborating with the outside consultant in evaluating the program would be borne by the program.

Exhibit G

Wellness Benefit Program Obligations

WELLNESS BENEFIT PROGRAM TERMS

WHEREAS, the state of North Dakota, acting through NDPERS, and SHP, in an effort to create healthier lifestyles for NDPERS Members and to help contain health care costs, desire to promote, support and sponsor health and wellness initiatives; and

WHEREAS, NDPERS and SHP have agreed to administer a Wellness Benefit Program related to health and wellness promotion for NDPERS Members; and

WHEREAS, the Wellness Benefit Program anticipates there will be costs and fees associated with supporting such health and wellness programs provided to NDPERS Members and to be administered through this agreement with SHP.

NOW, WHEREFORE, in recognition of the mutual promises herein contained and for other good and valuable consideration hereby acknowledged by the parties hereto, NDPERS and SHP agree to the following.

I. TERM.

The terms relating to the program shall begin on July 1, 2015, and shall extend to June 30, 2017.

II. FUNDING.

The parties acknowledge, understand and agree that funding for the benefits and services of the program shall be taken from the NDPERS Programs Cash Reserve Account maintained by SHP.

NDPERS agrees to pay costs associated with the benefits and services extended hereunder to SHP.

Program related activities will be reimbursed based on the following schedule:

Calculation 1: 100% of the first $500 or actual program expenses, whichever is less, plus 75% of actual expenses in excess of $500 to a maximum benefit of $1,000,

OR

Calculation 2: $2.00 multiplied by the number of health contracts.

The Wellness Committee will use the calculation that provides the best benefit to the state agency or political subdivision based on actual program expenses. The state agency or political subdivision will be responsible for expenses that exceed the maximum benefit allowed under either calculation method.

The parties acknowledge, understand and agree that the fees and charges provisions of the foregoing Administrative Services Agreement, including fees set forth for various wellness programs as approved and funded, are subject to specific funding provisions as set forth between the parties and as available, and are not subject to the final accounting provisions contained in Sections 7.2, 7.3 and 7.4.

III. OTHER TERMS AND CONDITIONS.

Applications for approval of benefits and services under the Wellness Benefit Program shall be submitted to the Bismarck NDPERS office to the attention of the Wellness Benefit Program Manager by each agency interested in establishing such a program.

A Wellness Committee shall be established to review any such applications submitted. The Wellness Committee shall be comprised of: two (2) NDPERS staff members, and one (1) SHP staff member. Upon appointment, the Wellness Committee shall establish criteria to ensure a uniform basis upon which it may grant or deny each agency application. Wellness benefits or healthy lifestyle programs, such as smoking cessation, nutrition, exercise, stress management, weight control, wellness education and the number of people affected by each program will be taken into consideration and shall be part of the criteria established by the Wellness Committee.

The applying agency will be notified by the Wellness Committee of the approval or denial of the proposed program.

Funds may either be distributed directly to the applying agency or, preferably, paid directly to the vendor providing said service or facilitating said Wellness Benefit Program.

All funds distributed shall be for Wellness Benefit Programs completed within the current 2015-2017 biennium budget.

Funds are available for agency group activities only and will not be available to specific individuals or to fund specific individual memberships in diet programs or health, athletic or fitness clubs.

Applying agencies that receive funds for a Wellness Benefit Program are required to submit to the Wellness Committee an evaluation of the sponsored program after its completion. The Wellness Committee will communicate an outline of the program funded and an evaluation of said program to all state agencies and encourage participation in those programs showing positive results in wellness and healthy lifestyle habits.

Exhibit H

Form of Business Associate Agreement

Business Associate Agreement

(Revised 10-2013)

This Business Associate Agreement, which is an addendum to the underlying contract, is entered into by and between, the North Dakota Public Employees Retirement System ("NDPERS") and the **Sanford Health Plan, 300 Cherapa Place, Suite 201 PO Box 91110, Sioux Falls, SD 57109-1110.**

1. Definitions

a. Terms used, but not otherwise defined, in this Agreement have the same meaning as those terms in the HIPAA Privacy Rule, 45 C.F.R. Part 160 and Part 164, Subparts A and E, and the HIPAA Security rule, 45 C.F.R., pt. 164, subpart C.
b. Business Associate. "Business Associate" means the **Sanford Health Plan.**
c. Covered Entity. "Covered Entity" means the **North Dakota Public Employees Retirement System Health Plans**.
d. PHI and ePHI. "PHI" means Protected Health Information; "ePHI" means Electronic Protected Health Information.

2. Obligations of Business Associate.

2.1. The Business Associate agrees:

a. To use or disclose PHI and ePHI only as permitted or required by this Agreement or as Required by Law.
b. To use appropriate safeguards and security measures to prevent use or disclosure of the PHI and ePHI other than as provided for by this Agreement, and to comply with all security requirements of the HIPAA Security rule.
c. To implement administrative, physical, and technical safeguards that reasonably and appropriately protect the confidentiality, integrity, and availability of ePHI that it creates, receives, maintains or transmits on behalf of the Covered Entity as required by the HIPAA Security rule.
d. To mitigate, to the extent practicable, any harmful effect that is known to Business Associate of a use or disclosure of PHI or ePHI by Business Associate in violation of the requirements of this Agreement.
e. To report to Covered Entity (1) any use or disclosure of the PHI not provided for by this Agreement, and (2) any "security incident" as defined in 45 C.F.R. § 164.304 involving ePHI, of which it becomes aware without unreasonable delay and in any case within thirty (30) days from the date after discovery and provide the Covered Entity with a written notification that complies with 45 C.F.R. § 164.410 which shall include the following information:
    i. to the extent possible, the identification of each individual whose Unsecured Protected Health Information has been, or is reasonably believed by the Business Associate to have been, accessed, acquired or disclosed during the breach;
    ii. a brief description of what happened;
    iii. the date of discovery of the breach and date of the breach;
    iv. the nature of the Protected Health Information that was involved;

v. identify of any person who received the non-permitted Protected Health Information;
vi. any steps individuals should take to protect themselves from potential harm resulting from the breach;
vii. a brief description of what the Business Associate is doing to investigate the breach, to mitigate harm to individuals, and to protect against any further breaches; and
viii. any other available information that the Covered Entity is required to include in notification to an individual under 45 C.F.R. § 164.404(c) at the time of the notification to the State required by this subsection or promptly thereafter as information becomes available.

f. With respect to any use or disclosure of Unsecured Protected Health Information not permitted by the Privacy Rule that is caused by the Business Associate's failure to comply with one or more of its obligations under this Agreement, the Business Associate agrees to pay its reasonable share of cost-based fees associated with activities the Covered Entity must undertake to meet its notification obligations under the HIPAA Rules and any other security breach notification laws;
g. Ensure that any agent or subcontractor that creates, receives, maintains, or transmits electronic PHI on behalf of the Business Associate agree to comply with the same restrictions and conditions that apply through this Agreement to the Business Associate.
h. To make available to the Secretary of Health and Human Services the Business Associate's internal practices, books, and records, including policies and procedures relating to the use and disclosure of PHI and ePHI received from, or created or received by Business Associate on behalf of Covered Entity, for the purpose of determining the Covered Entity's compliance with the HIPAA Privacy Rule, subject to any applicable legal privileges.
i. To document the disclosure of PHI related to any disclosure of PHI as would be required for Covered Entity to respond to a request by an Individual for an accounting of disclosures of PHI in accordance with 45 C.F.R. § 164.528.
j. To provide to Covered Entity within 15 days of a written notice from Covered Entity, information necessary to permit the Covered Entity to respond to a request by an Individual for an accounting of disclosures of PHI in accordance with 45 C.F.R. § 164.528.
k. To provide, within 10 days of receiving a written request, information necessary for the Covered Entity to respond to an Individual's request for access to PHI about himself or herself, in the event that PHI in the Business Associate's possession constitutes a Designated Record Set.
l. Make amendments(s) to PHI in a designated record set as directed or agreed by the Covered Entity pursuant to 45 C.F.R. § 164.526 or take other measures as necessary to satisfy the covered entity's obligations under that section of law.

3. Permitted Uses and Disclosures by Business Associate

3.1. General Use and Disclosure Provisions

Except as otherwise limited in this Agreement, Business Associate may Use or Disclose PHI and ePHI to perform functions, activities, or services for, or on behalf of, Covered Entity, provided that such use or disclosure would not violate the Privacy Rule or the Security Rule if done by Covered Entity or the minimum necessary policies and procedures of the Covered Entity.

3.2. Specific Use and Disclosure Provisions

Except as otherwise limited in this Agreement, Business Associate may use PHI and ePHI:

a. For the proper management and administration of the Business Associate, provided that disclosures are Required By Law, or Business Associate obtains reasonable assurances from the person to whom the information is disclosed that it will remain confidential and used or further disclosed only as Required By Law or for the purpose for which it was disclosed to the person, and the person notifies the Business Associate of any instances of which it is aware in which the confidentiality of the information has been breached.
b. To provide Data Aggregation services to Covered Entity as permitted by 45 C.F.R. § 164.504(e)(2)(i)(B), but Business Associate may not disclose the PHI or ePHI of the Covered Entity to any other client of the Business Associate without the written authorization of the covered entity Covered Entity.
c. To report violations of law to appropriate Federal and State authorities, consistent with 45 C.F.R. §§ 164.304 and 164.502(j)(1).

4. Obligations of Covered Entity

4.1. Provisions for Covered Entity to Inform Business Associate of Privacy Practices and Restrictions

Covered Entity shall notify Business Associate of:

a. Any limitation(s) in its notice of privacy practices of Covered Entity in accordance with 45 C.F.R. § 164.520, to the extent that any such limitation may affect Business Associate's use or disclosure of PHI.
b. Any changes in, or revocation of, permission by an Individual to use or disclose PHI, to the extent that any such changes may affect Business Associate's use or disclosure of PHI.
c. Any restriction to the use or disclosure of PHI that Covered Entity has agreed to in accordance with 45 C.F.R. § 164.522, to the extent that any such restriction may affect Business Associate's use or disclosure of PHI.

4.2. Additional Obligations of Covered Entity. Covered Entity agrees that it:

a. Has included, and will include, in the Covered Entity's Notice of Privacy Practices required by the Privacy Rule that the Covered Entity may disclose PHI for Health Care Operations purposes.

b. Has obtained, and will obtain, from Individuals any consents, authorizations and other permissions necessary or required by laws applicable to the Covered Entity for Business Associate and the Covered Entity to fulfill their obligations under the Underlying Agreement and this Agreement.

c. Will promptly notify Business Associate in writing of any restrictions on the Use and Disclosure of PHI about Individuals that the Covered Entity has agreed to that may affect Business Associate's ability to perform its obligations under the Underlying Agreement or this Agreement.

d. Will promptly notify Business Associate in writing of any change in, or revocation of, permission by an Individual to Use or Disclose PHI, if the change or revocation may affect Business Associate's ability to perform its obligations under the Underlying Agreement or this Agreement.

4.2. Permissible Requests by Covered Entity

Covered Entity may not request Business Associate to use or disclose PHI in any manner that would not be permissible under the Privacy Rule or the Security Rule if done by Covered Entity, except that the Business Associate may use or disclose PHI and ePHI for management and administrative activities of Business Associate.

5. Term and Termination

a. Term. The Term of this Agreement shall be effective as of March 3, 2015, and shall terminate when all of the PHI and ePHI provided by Covered Entity to Business Associate, or created or received by Business Associate on behalf of Covered Entity, is destroyed or returned to Covered Entity, or, if it is infeasible to return or destroy PHI and ePHI, protections are extended to any such information, in accordance with the termination provisions in this Section.
b. Automatic Termination. This Agreement will automatically terminate upon the termination or expiration of the Underlying Agreement.
c. Termination for Cause. Upon Covered Entity's knowledge of a material breach by Business Associate, Covered Entity shall either:
    1. Provide an opportunity for Business Associate to cure the breach or end the violation and terminate this Agreement and the Underlying Agreement if Business Associate does not cure the breach or end the violation within the time specified by Covered Entity;
    2. Immediately terminate this Agreement and the Underlying Agreement if Business Associate has breached a material term of this Agreement and cure is not possible; or
    3. If neither termination nor cure is feasible, Covered Entity shall report the violation to the Secretary.
d. Effect of Termination.
    1. Except as provided in paragraph (2) of this subsection, upon termination of this Agreement, for any reason, Business Associate shall return or destroy all PHI received from Covered Entity, or created or received by Business Associate on behalf of Covered Entity. This provision shall apply to PHI and ePHI that is in the possession of subcontractors or agents of Business Associate. Business Associate shall retain no copies of the PHI or ePHI.
    2. In the event that Business Associate determines that returning or destroying the PHI or ePHI is not feasible, Business Associate shall provide to Covered Entity notification of the conditions that make return or destruction infeasible. Upon explicit written agreement of Covered Entity that return or destruction of PHI or ePHI is not feasible, Business

Associate shall extend the protections of this Agreement to that PHI and ePHI and limit further uses and disclosures of any such PHI and ePHI to those purposes that make the return or destruction infeasible, for so long as Business Associate maintains that PHI or ePHI.

6. Miscellaneous

a. Regulatory References. A reference in this Agreement to a section in the HIPAA Privacy or Security Rule means the section as in effect or as amended.
b. Amendment. The Parties agree to take such action as is necessary to amend this Agreement from time to time as is necessary for Covered Entity to comply with the requirements of the Privacy Rule, the Security Rule, and the Health Insurance Portability and Accountability Act of 1996, Pub. L. No. 104-191.
c. Survival. The respective rights and obligations of Business Associate under Section 5.c, related to "Effect of Termination," of this Agreement shall survive the termination of this Agreement.
d. Interpretation. Any ambiguity in this Agreement shall be resolved to permit Covered Entity to comply with the Privacy and Security Rules.
e. No Third Party Beneficiaries. Nothing express or implied in this Agreement is intended to confer, nor shall anything this Agreement confer, upon any person other than the parties and their respective successors or assigns, any rights, remedies, obligations or liabilities whatsoever.
f. Applicable Law and Venue. This Business Associate Agreement is governed by and construed in accordance with the laws of the State of North Dakota. Any action commenced to enforce this Contract must be brought in the District Court of Burleigh County, North Dakota.
g. Business Associate agrees to comply with all the requirements imposed on a business associate under Title XIII of the American Recovery and Reinvestment Act of 2009, the Health Information Technology for Economic and Clinical Health (HI-TECH) Act, and, at the request of NDPERS, to agree to any reasonable modification of this agreement required to conform the agreement to any Model Business Associate Agreement published by the Department of Health and Human Services.

7. Entire Agreement

This Agreement contains all of the agreements and understandings between the parties with respect to the subject matter of this Agreement. No agreement or other understanding in any way modifying the terms of this Agreement will be binding unless made in writing as a modification or amendment to this Agreement and executed by both parties.

IN WITNESS OF THIS, **NDPERS** [CE] and **Sanford Health Plan** [BA] agree to and intend to be legally bound by all terms and conditions set forth above and hereby execute this Agreement as of the effective date set forth above.

For Covered Entity:

Jon Strinden, Board Chairman
ND Public Employees Retirement System

3-05-2015
Date

For Business Associate:

Ruth A. Krystopolski
Signature

RUTH A. KRYSTOPOLSKI
Printed Name

President
Title

3/5/15
Date

North Dakota Public Employees Retirement System

Request for Proposal

Fully Insured Group Medical
and
Prescription Drug Coverage

July 9, 2014

Proposals Due:
By 5:00 p.m. CT
September 4, 2014

Key Information

Objective

North Dakota Public Employees Retirement System ("NDPERS") is soliciting proposals for the insurance and administration of its employee/retiree medical and prescription drug insurance plan, with a July 1, 2015 effective date. Medical insurance responses are required for the fully-insured financial arrangement as described in this RFP. Proposals will be accepted from insurance companies that are capable of offering a statewide provider network, utilization management, disease management, wellness program and pharmacy benefit manager services along with other related services.

This is the first of two RFP's relating to the NDPERS group insurance plan. This first RFP is for a fully insured plan arrangement and is for a six year contract arrangement with renewals each two years (see contract term discussion). A second RFP requesting proposals for self-insured administration will be distributed in August. The Prescription Drug Plan ("PDP"), however, will have a contract date beginning January 1, 2016 to December 31, 2018.

The PERS Board will determine which funding approach it will implement based on the results of both RFPs.

Background

NDPERS is responsible for the administration of the State of North Dakota's Retirement, Health, Life, Deferred Compensation, FlexComp, and Retiree Health Credit programs. In addition, cities, counties, schools and other political subdivisions of the state participate at their option. NDPERS also administers three voluntary insurance programs: a group dental, vision, and long-term care program. Approximately 23,000 active employees and 8,000 retirees are eligible to participate in these plans.

NDPERS reserves the right to select the health plan proposals that best fit its needs and the needs of its eligible employees/retirees. NDPERS has retained Deloitte Consulting LLP ("Deloitte Consulting") to assist with the RFP process.

Currently Blue Cross Blue Shield of North Dakota ("BCBSND") insures the medical and prescription drug plan under a fully-insured arrangement with some risk sharing provisions.

In determining which bid, if any, will best serve the interests of eligible employees/retirees and the state, the NDPERS and its Board shall give adequate consideration to the following factors:

1. The economy to be affected.
2. The ease of administration.
3. The adequacy of the coverages.
4. The financial position of the carrier, with special emphasis as to its solvency.
5. The reputation of the carrier and any other information that is available tending to show past experience with the carrier in matters of claim settlement, underwriting, and services.

Proposed Timetable

The timeline is provided below for informational purposes. NDPERS reserves the right to change the dates. Every effort will be made to notify vendors of changes to the proposed timeline.

Activity	Date/Time (All Times in CT)
NDPERS publishes Request for Proposal (RFP)	July 9, 2014
Vendor questions (in writing) due	July 25, 2014 (5 pm)
NDPERS distributes answers to vendors' questions	August 4, 2014
Proposals due	**September 4, 2014 (5 pm)**
Finalist presentations (if requested)	TBD
NDPERS notifies finalist of intent to negotiate	TBD December 2014
Contractor and NDPERS complete negotiations	TBD Jan/Feb 2015
Contractor and NDPERS begin implementation	March 2015
Contractor(s) begins providing services	July 1, 2015

RFP Coordinator Contact
Josh Johnson

Deloitte Consulting LLP
50 South 6th Street
Suite 2800
Minneapolis, MN 55402
jkjohnson@deloitte.com

Note:

From the date of issuance until the announcement of the finalist(s), vendors may contact only the RFP Coordinator. All correspondence and questions must be submitted in writing via e-mail to the RFP Coordinator in accordance with the timeline set forth in this RFP. NDPERS personnel are not authorized to discuss this RFP with vendors; doing so may result in disqualification. Vendors may continue to communicate with NDPERS staff regarding other relevant business matters.

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I. Overview of the NDPERS Program

NDPERS

North Dakota Public Employees Retirement System (NDPERS) is a separate agency created under North Dakota state statute, and while subject to state budgetary controls and procedures, as are all state agencies, is not a state agency subject to direct executive control. NDPERS is managed by a Board comprised of seven members:

- Chairman – appointed by the Governor
- Member – appointed by the Attorney General
- Member – elected by retirees
- Members (3) – elected by active employees
- State Health Officer or Designee

Dakota Plan

Currently, NDPERS contracts with Blue Cross/Blue Shield of North Dakota ("BCBSND") to provide fully-insured health care coverage with a risk sharing agreement. If incurred claims plus expenses are more than premiums during the biennium, 50% of the first $6,000,000 is refunded to BCBSND. If incurred claims plus expenses are less than premiums plus interest during the biennium, BCBSND retains 50% of the first $3,000,000 of surplus and any remaining funds are returned to NDPERS. Prior to July 1, 1989, the program was self-insured. The plans provided pursuant to this fully funded arrangement are:

- PPO/Basic – Grandfathered plan
- PPO/Basic – Non grandfathered plan
- HDHP/HSA Plan – Non grandfathered
- Dakota Retiree Plan including Prescription Drug Program (PDP)

PPO

PPO stands for "Preferred Provider Organization" and is a group of hospitals, clinics, and physicians who have agreed to discount their services to members of NDPERS. Members have "freedom of choice" in selecting which physician or medical facility to use for services. Because PPO health care providers charge less for medical care services, cost savings are passed on to the members by way of reduced cost sharing amounts. The PPO discount NDPERS receives is in addition to the BCBSND negotiated reimbursement schedule with participating professional service providers in North Dakota. The present NDPERS PPO network discounts are not transferable and would need to re-negotiated by a new vendor.

Basic Plan

If a PPO health care provider is not available in the member's area, or if the member chooses or is referred to a health care provider not participating in the Preferred Provider Organization, the member will receive the Basic Plan benefits.

High Deductible Health Plan (HDHP)

In addition to the PPO / Basic Plans, NDPERS offers eligible participants the option to enroll in a

high-deductible health plan (HDHP) through BCBSND, with a Health Savings Account (HSA) administered by Discovery Benefits. The HDHP/HSA option has a higher annual deductible and larger out-of-pocket cost for medical services. However, the higher out-of-pocket costs are partially offset by an employer contribution to the HSA. For the 7/1/13-6/30/14 plan year the NDPERS annual HSA contributions are: $728.88 for single coverage and $1,764.00 for family coverage. NDPERS members enrolled in the HDHP/HSA options are eligible to participate in BCBSND's HealthyBlue and Health Club Credit wellness programs, and may earn the same rewards available to NDPERS members enrolled in the Dakota PPO/Basic plan.

Coverage Rules: When Coverage Begins & Eligibility

An eligible employee is entitled to coverage the first of the month following the month of employment, provided the employee submits an application for coverage within the first 31 days of employment. Each eligible employee may elect to enroll his/her eligible dependents.

Eligible employees include:

- State employees or employees of participating Political Subdivisions first employed prior to August 1, 2013 who are at least eighteen (18) years of age and whose services are not limited in duration, who are filling an approved and regularly funded position, and who are employed at least 17 and one-half hours per week and at least five months each year;

- State employees first employed after August 1, 2013, who are employed at least twenty (20) hours per week and at least twenty weeks each year of employment are eligible to receive benefits; and

- A temporary employee employed before August 1, 2007, may elect to participate in the uniform group insurance program by completing the necessary enrollment forms and qualifying under the medical underwriting requirements of the program if such election is made prior to and they are participating in the uniform group insurance program as of January 1, 2015. A temporary employee employed on or after August 1, 2007, is only eligible to participate in the uniform group insurance program if the employee is employed at least twenty hours per week and at least twenty weeks each year of employment and elected to participate prior to, and is participating in the uniform group insurance program as of January 1, 2015. A temporary employee first employed on or after January 1, 2015, or any temporary employee not participating in the uniform group insurance program as of January 1, 2015, is eligible to participate in the uniform group insurance program only if the employee meets the definition of a full-time employee under section 4980H(c)(4) of the Internal Revenue Code [26 U.S.C. 4980H(c)(4)].

- An eligible dependent includes the eligible employee's spouse under a legally existing marriage between persons of the opposite sex, the employee's or the employee's living, covered spouse's children under the age of 26 years. Children are considered under age 26 until the end of the month in which the child becomes 26 years of age. The term child or children includes:

1. Children physically placed with the employee for adoption or whom the employee or the employee's living, covered spouse has legally adopted.

2. Children living with the employee for whom the employee or the employee's living, covered spouse has been appointed legal guardian by court order.

3. The employee's grandchildren or those of the employee's living, covered spouse if: (a) the parent of the grandchild is unmarried, (b) the parent of the grandchild is covered under this Benefit Plan and (c) both the parent and the grandchild are primarily dependent on the employee for support. If a lapse in coverage occurs due to ineligibility of the parent under this Benefit Plan, the grandchild cannot be reenrolled unless the employee has been appointed legal guardian.

4. Children for whom the employee or the employee's living, covered spouse are required by court order to provide health benefits.

5. Children beyond the age of 26 who are incapable of self-support because of intellectual disability or physical handicap that began before the child attained age 26 and who are primarily dependent on the employee or the employee's spouse for support. Coverage for such a disabled child will continue for as long as the child remains unmarried, disabled and the employee's dependent for federal income tax purposes. The employee may be asked periodically to provide evidence satisfactory to BCBSND of these disabilities.

Retiree Eligibility

Retirees or surviving spouses who are under age 65 and are receiving a retirement allowance from the Public Employees Retirement System, the Highway Patrol Retirement System, the Teachers Insurance and Annuity Association College Retirement Equities Fund (TIAA-CREF), the Job Service Retirement Plan, the Teachers' Fund for Retirement (TFFR), or retirees who have accepted a retirement allowance from a participating political subdivision's retirement plan are eligible for benefits. However beginning July 1, 2015 all new Pre-Medicare retirees after that date will only be eligible for COBRA coverage. The pre-Medicare plan will no longer be available to retirees after that date. Pre-Medicare retirees who retiree before that date will continue to be eligible and may participate.

The Non-Medicare retiree single rate is 150% of the active member single rate; the rate for a non-Medicare retiree plus one is twice the non-Medicare single rate, and the rate for a non-Medicare retiree plus two or more dependents is two and one-half times the non-Medicare retiree single rate.

Detailed information regarding current eligibility for dependents for the Dakota Plan can be found in the 2013-2014 Summary of Benefits at http://www.nd.gov/ndpers/forms-and-publications/publications/grp-hlth-spd-actives.pdf.

Dakota Retiree Plan

Employees who retire have the option to continue insurance coverage through NDPERS. The Dakota Retiree Plan provides health care coverage as a secondary payer to Medicare. Coverage for Medicare retirees is different than the coverage for non-Medicare retirees. The PERS Medicare retiree plan is identical to a Medicare supplement Plan F. Each eligible

retiree may elect to enroll his/her eligible dependents as described in the *Eligibility* section above. The prescription drug benefit for retirees is provided through a group Prescription Drug Program (PDP) on a calendar year basis.

Detailed information regarding current eligibility for dependents for the Dakota Plan can be found in the 2013-2014 Summary of Benefits at http://www.nd.gov/ndpers/forms-and-publications/publications/grp-hlth-spd-retirees.pdf

Pharmacy Benefit Manager

Currently, the prescription drug plan coverage for active and non-Medicare retirees is bundled with the medical plan provided by BCBSND who provides the core pharmacy benefit functions and services including claims processing, pharmacy network development/maintenance, drug formulary design, clinical program management, mail service, and specialty pharmacy except the Rx plan for Medicare eligible members. The plan for Medicare eligible members is identical in terms of plan provisions (out of pocket expenses) except this coverage is provided separately through a qualified PDP. Consequently, differences do exist in terms of the formulary and other such items. The PDP contract is on a calendar year basis.

Data Warehouse

NDPERS maintains a health care data warehouse. The medical records and related data of the employees, retirees, and dependents, obtained as the result of enrollment in the uniform group insurance program, are the property of the Public Employees Retirement System (Century Code Statute 54-52.1-12). Currently the health plan provides raw data, including detailed claims and enrollment data sets, based on a mutually agreed upon format no less than monthly for the data warehouse repository. All administrators are expected to submit claims and enrollment data, in an agreed upon format.

Reporting Requirements

All monthly reports should be done for each plan offered (e.g. Grandfathered PPO, Non-Grandfathered PPO, HDHP, etc.) and should also roll up to an annual, aggregate report. NDPERS requires vendors to provide reporting which includes, but is not limited to the following.

1. Monthly enrollment counts by plan. (Exhibit 18)

2. Yearly breakdown, by plan of membership, high dollar cases, claims, medical charges submitted, ineligible charges, provider discounts, COB savings, copayments, deductibles and coinsurance paid by participants and final paid claims. (Exhibit 5)

3. Annual policy accounting statement including claim reserves.

4. Quarterly summary to include financial/trend analysis, membership and health utilization summary, high dollar claims, RX and specialty spending and payment trend, health management and wellness program key indicators, performance standards and guarantees measures and accounting of completed and ongoing activities. (Exhibit 4)

5. Monthly experience report of premium, administration, interest, paid claims, Incurred But Not Reported (IBNR), refunds, reserves, and payments paid to date and projected through biennium.

Each vendor must:

1. Provide NDPERS with claims specific data on a monthly basis on compact disc or other agreed upon medium. This information shall be in a format acceptable to NDPERS and subject to all federal and state laws on confidentiality and open records.

2. Carry over any deductible and or coinsurance amounts incurred from January 1 to June 30, of the prior contract period.

3. Be able to provide upon request annual accounting of HSA accounts, including the following information:

   a. Year end balances
   b. Number (and value) of eligible expense withdrawals
   c. Number (and value) of non-eligible expense withdrawals.

4. Provide Biennial close-out report

   In addition to the above plan wide reporting, the successful vendor will provide plan specific reporting as requested for the following:

   - PPO/Basic – grandfathered plan
   - PPO/Basic – Non grandfathered plan
   - HDHP/HSA Plan – Non grandfathered
   - Dakota Retiree Plan including PDP

   Also please note NDCC 54-52.1-12 which applies to all information the vendors acquire relating to NDPERS.

Funding

Currently NDPERS contracts with BCBSND to provide its health care coverage on a fully-insured basis with a risk sharing arrangement. BCBSND maintains full liability for incurred claims in excess of paid premium (no deficit carryover) subject to a risk corridor. All funds in the account get interest paid each month based upon the yield to maturity of US Treasury Notes maturing 24 months hence. Contractor shall identify the rate they propose to use in their proposal.

Risk Sharing Arrangements

A risk sharing arrangement is currently in place with BCBSND. If incurred claims plus expenses are more than premiums during the biennium, 50% of the first $6,000,000 is refunded to BCBSND. If incurred claims plus expenses are less than premiums plus interest during the biennium, BCBSND retains 50% of the first $3,000,000 of surplus. Any additional surplus is returned to NDPERS with interest. The interest rate shall be based on the US Treasury Notes quoted by the Wall Street Journal. NDPERS is requesting a similar or enhanced risk share arrangement for all quotes.

Performance Standards and Guarantees

The current health plan administrators adhere to agreed-upon performance standards and guarantees with a financial incentive/forfeiture component that is negotiated each biennium as part of the renewal process. The settlement/payment for such incentive/forfeiture is included in the annual settlement process. See appendix H for a copy of these performance standards and guarantees. You are required to offer your performance standards and guarantees for the board's consideration using appendix H. It is a priority for the board to have a comprehensive set of standards and guarantees relating to this plan.

Current Annual Settlement and Reconciliation

Within 31 days of 12 months after the end of the biennium NDPERS requires an accounting summary which will result in an initial settlement of the biennium agreement. Within 31 days of 24 months after the end of the biennium BCBSND provides an accounting summary which will result in a final settlement of the biennium agreement.

Current and Desired Plan Designs

In addition to replicating the current coverage provision, as noted below, the successful vendor shall include adding any federally required coverage provisions on or after July 1, 2015. For details, refer to the following:

Dakota Plan:
http://www.nd.gov/ndpers/insurance-plans/group-health.html
PPO/Basic – Grandfathered Plan
PPO/Basic – Non Grandfathered Plan
HDHP/HSA – Non Grandfathered Plan

Please note NDPERS is requesting that the proposer also provide a HSA product as part of this proposal for the HDHP product

Dakota Retiree Plan - http://www.nd.gov/ndpers/forms-and-publications/publications/grp-hlth-spd-retirees.pdf
PDP coverage for retirees - http://www.nd.gov/ndpers/forms-and-publications/publications/medicare-benefits-summary-current.pdf

Member Access

Members have "freedom of choice" in selecting which physician or medical facility to use for services. PPO benefits are currently available in the state of North Dakota, unless the medical facility provides services at a satellite location in another state. If a PPO health care provider is not available in the member's area, or if the member chooses or is referred to a health care provider not participating in the PPO, the member will receive the Basic Plan benefits. The copayments, annual deductibles and coinsurance amounts vary between the PPO Plan and Basic Plan.

Directory

The current provider directory is available through the BCBSND website at http://provider.bcbsnd.com. Health plan vendors must be able to reasonably match the existing provider networks to provide appropriate access on a statewide basis.

Disease and Other Health Management Programs

Currently, BCBSND provides disease management and health improvement programs for eligible members. The list below includes most of the programs currently offered:

- Coronary Heart Disease
- Diabetes
- Hypertension
- Immunizations
- ADHD
- Colorectal Cancer
- Asthma

BCBSND and most major Health Systems collaborate to offer a program called the Advanced Medical Home Program or MediQHome.

Vendors are expected to offer comprehensive, high quality case/disease management programs, including rare and chronic diseases, for the plans offered to both actives and retirees. Proposed programs and vendors shall be identified in this RFP.

Wellness Programs

Partnering with BCBSND, NDPERS participates in and offers a variety of wellness programs for eligible members and employers. The list below provides more details on some of the programs currently offered:

Employee Wellness Incentives:

- Covered employees and/or spouses are each eligible to receive up to $250 per year through participation. All covered retirees and/or spouses are also eligible for this incentive. Each participant must complete an annual health risk assessment through HealthyBlue, the online wellness tool. Two programs are available to achieve the $250 benefit. The programs are: HealthyBlue Online Wellness Tool – participants utilize the online wellness tool to take steps towards better health goals, including tracking activity and performing challenges to receive points for their participation. The points are then redeemed towards various gift cards or fitness related prizes - see Exhibit 1.
- Health Club Credit – participants who utilize a health club facility 12 days per month will be reimbursed $20 per month towards their membership fee - see Exhibit 2.

Employer Wellness Initiatives:

Employer Based Wellness Program & Wellness Funding Program:

- The employer based wellness program provides that employers who do not have an on site wellness program pay premiums that are 1% higher. The program is given its authority in NDCC 54-52.1-14. The goals for the program are to:

  - have 100% of our employers supporting a wellness message at their worksite
  - have our members get a greater understanding of wellness
  - create a better quality of life for our membership

- Employers that participate in the NDPERS Group Health Insurance Plan have the opportunity to enroll in the employer based wellness program on an annual basis. For the wellness year July 1, 2014 to June 30, 2015, there are 192 of 273 employers participating. The wellness plan year is from July 1 to June 30. See the following for more details:

http://www.nd.gov/ndpers/insurance-plans/docs/wellness-forum/employer-based-wellness-overview.pdf

Wellness Benefit Funding Program:

The NDPERS Wellness Benefit Funding Program is available to employer groups that participate in the NDPERS group health plan and have been approved for the Employer Based Wellness Discount Program. The Wellness Funding Program, in conjunction with the Wellness Discount Program, encourages employers to commit to promoting wellness planning and programming at their work sites. The funding program provides funding assistance to employers that develop and sponsor on-site wellness programs for their employees. Benefits are available to eligible employers once each fiscal year of the biennium. For details, visit http://www.nd.gov/ndpers/insurance-plans/docs/wellness-forum/wellness-program-funding-overview.pdf

Additional Wellness Related Services & Programs:

- **Wellness Consultant** – a dedicated staff member to assist employees and employers with their wellness initiatives. Examples of services provided include:

To members:

- Assist with online wellness tool issues and questions.

- Develops various challenges for participants to do through online wellness tool.

To employers:

- Conducts monthly coordinator calls with employer wellness coordinators. – see Exhibit 15
- Prepares and distributes a monthly wellness newsletter for coordinators. – see Exhibit 14
- Coordinates monthly wellness star designee on online wellness tool. – see Exhibit 13
- Conducts coordinator workshops each summer across state for wellness coordinators to attend. – see Exhibit 19

Coordinates the awarding of up to 6000 points on the online tool for an employee's participation in the employer sponsored wellness program activities. – see Exhibit 11.**Member Education Presentations on Wellness Topics** – current vendor provides two member education consultants that travel statewide to worksites and conduct presentations for employees on various wellness related topics. There are currently 11 different topics provided. See Exhibit 16 for an example.

Added Value Programs: (See exhibit 10 for other details)

- Tobacco Cessation – All current state employees and their dependents age 18 and older who have coverage are eligible to participate. The program provides telephone counseling and up to $700 in expenses including up to $200 for a participant's office visit and co-pays and $500 every six months for FDA-approved medications. See the following website for further details: https://www.bcbsnd.com/search-preview/-/ndpers-tobacco-cessation. This is a collaboration between the current vendor, the ND Department of Health and NDPERS.
- Prenatal Plus Program – a program designed to identify women at higher risk for premature birth and to prevent the incidence of preterm birth. See http://www.nd.gov/ndpers/forms-and-publications/publications/grp-hlth-spd-actives.pdf#page=35 for details.
- Diabetes Management – this program is offered to covered members that are diabetic. The program is coordinated with the ND Pharmacy Association. See http://www.aboutthepatient.net/patients/diabetes-info/ndpers-program-info/ for details.

Other Administrative Services – See Exhibit 10 for details

The successful vendor will also need to perform the following administrative services:

- Make payments for the NDPERS Tobacco Cessation Program https://www.bcbsnd.com/search-preview/-/ndpers-tobacco-cessation2. Make payment for the NDPERS Diabetes Program . See http://www.aboutthepatient.net/patients/diabetes-info/ndpers-program-info/ for details.
- Make payments for the NDPERS Wellness Funding Program. – see http://www.nd.gov/ndpers/insurance-plans/docs/wellness-forum/wellness-program-funding-overview.pdf for details.

NDPERS will submit enrollment, billing and premium remittance via a centralized electronic system. NDPERS will collect enrollment/eligibility information which will be provided to the successful contractor on a data file that follows the HIPAA 834 file specifications. Premium payment information will be provided on a data file that follows the HIPAA 820 file specifications. Files will be transmitted using a secure file transmission process. The successful contractor must be able to receive this data in that format and media. Premiums will be eligible for salary reduction on a pre-tax basis, through IRC Section 125.

Employee Assistance Program (EAP)

The mission of the Employee Assistance Program (EAP) is to provide confidential, accessible counseling and referral services to individual employees in order to restore and strengthen the health and productivity of employees and the workplace. The EAP is available to employees and their immediate family members. For more information regarding the current EAP, refer to the website: http://www.nd.gov/ndpers/eap/index.html

The selected vendor(s) are expected to cooperate as needed to ensure seamless administration and member service. NDPERS is not seeking proposals for this service as part of this RFP.

COBRA Administration

NDPERS provides COBRA continuation for terminated/retired employees in compliance with federal regulations. NDPERS administers this program. The selected vendor(s) are expected to cooperate as needed to ensure seamless administration and member service. NDPERS is not seeking proposals for this service as part of this RFP.

Workers' Compensation Program

If benefits or compensation are available, in whole or in part, under provisions of a state workers' compensation act, laws of the United States or any state or political subdivision thereof, the benefits under the Dakota Plan will be reduced by and coordinated with such benefits or compensation available.

Conversion

The 2014 ACA environment has significantly changed how conversion works. There is no longer a specific conversion product, but there is still a conversion privilege used to purchase an individual metallic plan. This conversion privilege impacts what effective date a member can sign up once employment with NDPERS ends and ensures continuous coverage for members that apply within required timeframes. Administration of the conversion privilege shall comply with any applicable federal or state law or regulation. The vendor is expected to administer all notices and transactions, including billing (where applicable), with respect to this service.

Out of Area Coverage

If a member receives care from a non-participating health care provider within the state of North Dakota, benefit payments are reduced by a certain percentage and the member is responsible for the payment reduction. If a member receives care from a non-participating health care provider outside the state of North Dakota, the allowance for covered services will be an amount within a general range of payments made and judged to be reasonable by BCBSND. The benefits available under the Dakota Plan and Dakota Retiree Plan are also available to

members traveling or living outside of the United States (subject to certain requirements such as preauthorization and prior approval). Detailed information regarding eligibility and out of area benefit levels can be found in the 2013-2014 Summary of Benefits at http://www.nd.gov/ndpers/forms-and-publications/publications/grp-hlth-spd-actives.pdf.

Open Enrollment

Dakota Plan annual open enrollment typically takes place in October/November of each year. Employees may enroll in coverage or make changes in coverage during this period. Annual open enrollment is not applicable to Non-Medicare retirees.

Current and Historical Monthly Rates and Employee Contributions

The contributions for single or family coverage for state employees are currently paid at 100% by the State. Please note that for the state, a single composite rate is used instead of the single/family rate. The contributions for employees of participating political subdivisions are at the discretion of the subdivision and subject to the minimum contribution requirements of BCBSND. The contributions for temporary employees are either at their own expense or their employer may pay any portion of the premium subject to its budget authority. Effective January 1, 2015, the following applies:

In the case of a temporary employee who is an applicable taxpayer as defined in section 36B(c)(1)(A) of the Internal Revenue Code [26 U.S.C. 36B(c)(1)(A)], the temporary employee's required contribution for medical and hospital benefits self-only coverage may not exceed the maximum employee required contribution specified under section 36B(c)(2)(C) of the Internal Revenue Code [26 U.S.C. 36B(c)(2)(C)], and the employer shall pay any difference between the maximum employee required contribution for medical and hospital benefits for self-only coverage and the cost of the premiums in effect for this coverage.

The chart below shows the current total monthly rates for NDPERS members:

Dakota Plan		Single	Family		Single	Family
Enrolled Prior to July 1, 2013						
State Program	**Grandfathered Plan**			**High Deductible Health Plan**		
July 1, 2013 – June 30, 2015	Active		$981.68	Active		$981.68
July 1, 2013 – June 30, 2015	COBRA/Part-Time/Temporary/LOA	$472.74	$1,139.34	COBRA/Part-Time/Temporary/LOA	$412.00	$992.34
Political Subdivision	**Grandfathered Plan**			**NonGrandfathered Plan**		
July 1, 2013 – June 30, 2015	Active/COBRA	$505.06	$1,220.22	Active/COBRA	$512.74	$1,238.76
Non Medicare Retirees	**Grandfathered Plan**					
July 1, 2013 – June 30, 2015	Non-Medicare Retirees	$709.10	$1,418.20			
	Family 3+		$1,772.74			
Enrolled On or After July 1, 2013						
Political Subdivision	**Grandfathered Plan**			**NonGrandfathered Plan**		
July 1, 2013 – June 30, 2014	Active/COBRA	$501.00	$1,210.80	Active/COBRA	$512.14	$1,237.72
July 1, 2014 – June 30, 2015		$529.28	$1,279.40		$541.06	$1,307.84

Dakota Retiree Plan		Single	Family
Enrolled Prior to July 1, 2013			
July 1, 2013 – June 30, 2015	Medicare Eligible	$221.24	$439.72
	One Medicare/One Non-Medicare		$609.40
Enrolled On or After July 1, 2013			
July 1, 2013 – June 30, 2014	Medicare Eligible	$222.16	$441.50
	One Medicare/One Non-Medicare		$573.38
July 1, 2014 – June 30, 2015	Medicare Eligible	$227.00	$451.22
	One Medicare/One Non-Medicare		$636.24

Note: The retiree plan rates are a composite of the PDP premiums and medical premiums.

Age/Gender Statistics

Appendix E – Item 1 displays a breakdown of the member counts by age and gender for the period May 2014.

Contract Count

Appendix E – Item 2 displays a breakdown of the contract counts by month and cost category for the period of 1/2011 – 5/2014.

Member Count

Appendix E – Item 3 displays a breakdown of the member counts by month and cost category for the period of 1/2011 – 5/2014.

Claims Volume

Appendix E – Item 4 displays a breakdown of the total claims transactions by month and cost category for the period of 1/2011 – 5/2014.

Claims Dollars

Appendix E – Item 5 displays a breakdown of the total claims plan paid dollars by month and cost category for the period of 1/2011 – 5/2014.

Large Claim History

Appendix E – Item 6 displays a high level summary of unique members with plan paid dollars in excess of $100,000 for the period of 7/1/12 – 6/30/13 and 7/1/13 – 5/30/14.

Contracts by Zip Code

Appendix E – Item 7 displays a breakdown of the contract counts by residence zip code for the period May 2014.

II. RFP Objectives and Vendor Responsibilities

RFP Objectives

North Dakota Public Employees Retirement System ("NDPERS") is soliciting proposals for the insurance and administration of its employee medical and prescription drug insurance plan, with a July 1, 2015 effective date. Medical insurance responses are required for the fully-insured financial arrangement as described in this RFP. Proposals will be accepted for insurance companies that are capable of offering a statewide provider network, utilization management, disease management, wellness program, pharmacy benefit manager services along with other related services. In addition, the successful vendor will provide an HSA product for the HDHP. Approximately 23,000 active employees and 8,000 retirees are eligible to participate in these plans. Total membership in the plan is approximately 65,000 individuals.

In August, a separate RFP requesting self-insured administration of the same plans and programs will be distributed. In order for a self-insured arrangement to be elected (NDCC 54-52.1-04.3), it must be determined to be less costly than the lowest bid submitted by a carrier for underwriting the plan with equivalent contract benefits on a fully insured basis. Based upon this legislative direction the Board is issuing this fully insured plan RFP and will be reviewing those responses first to determine which fully insured bid to compare to the self-insured bids when submitted.

Requested Bids

Fully Insured (This RFP)

- All services
- All services except pharmacy

Self-insured (2nd RFP)

- All services
- Pharmacy only

The contract will be for a six year term with two year renewals, beginning July 1, 2015 through June 30, 2017.

NDPERS is interested in providing high quality, comprehensive and affordable health care to all of its employees and their dependents. The intent of this RFP is to identify and evaluate the proposals that meet the minimum requirements as defined, and select one vendor that will support the program goals and objectives. Current goals and objectives include, but are not limited to, the following:

- **Competitive Overall Cost** – NDPERS intends to continue to provide its employees and retirees with comprehensive health care that is affordable and competitive. NDPERS is especially interested in stabilizing or controlling costs and increases to both the employer and employees. To accomplish this, it is interested in competitive administrative and program fees and competitive provider reimbursement arrangements.

- **Transparent PBM.** PERS is interested in evaluating financial arrangements based on the traditional approach to PBM pricing and pricing under a transparent arrangement. "Traditional" financial proposals should include guaranteed effective rate discounts, as well as specific fees and guaranteed rebate dollar amounts. "Transparency" for purposes of this Request for Proposal is defined as a full pass through to PERS of all monies paid to the PBM arising from all contracted arrangements as well as elimination of spread pricing. When answering questions and completing exhibits related to your financial proposal, please indicate if your answer would differ under a transparent or a traditional pricing arrangement. PERS will give preference to transparent proposals.

- **Replication of existing coverage and arrangement.** NDPERS is interested in replicating the existing coverage (http://www.nd.gov/ndpers/forms-and-publications/publications/grp-hlth-spd-actives.pdf) and financial arrangements for six years, subject to two year renewals including having a PDP and an HSA . In addition, NDPERS is requesting the effect on premiums for the following benefit plan changes:

  - Annual Premium Reductions to change deductible from $400 single/$1,200 family to $450 single/$1,350 family.
  - Annual Premium Reductions to change deductible from $400 single/$1,200 family to $500 single/$1,500 family
  - Annual Premium Reductions to change coinsurance maximum from $750/$1,500 to $900/$1,800 in network and $1,250/$2,500 to $1,500/$3,000 out of network
  - Annual Premium Reductions to change coinsurance maximum from $750/$1,500 to $1,050/$2,100 in network and $1,250/$2,500 to $1,750/$3,500 out of network
  - Annual Premium Reduction for a $5 increase in office visit copay
  - Annual Premium Reduction for a $10 increase in office visit copay
  - Annual Premium Reduction for a $10 increase in emergency room copay.
  - Annual Premium Reduction for a $25 increase in emergency room copay
  - Annual Premium Reductions to change Rx formulary Generic copay from $5 to $10 copay
  - Annual Premium Reductions to change Rx formulary Generic copay from $5 to $7.50 copay
  - Annual Premium Reductions to change Rx Formulary Brand copay from $20 to $25 copay
  - Annual Premium Reductions to change Rx Formulary Brand copay from $20 to $22.50 copay

- Annual Premium Reductions to change Rx Non-Formulary copay from $25 to $30 copay

- Annual Premium Reductions to change Rx Non-Formulary copay from $25 to $27.50 copay

- Annual Premium Reductions to change Rx Formulary coinsurance maximum from $1,000 to $1,200.

- Annual Premium Reductions to change Rx Formulary coinsurance maximum from $1,000 to $1,500

- Annual Premium Increases to provide coverage for colonoscopy pursuant to the appropriate national standards

- **Comprehensive, Statewide Provider Network –** NDPERS is interested in the following:

- Broad network in terms of the number (%), breadth, quality and location of network providers, with the goal of matching as close as possible the current provider networks and geographic access.

- Limited doctor/patient disruption – NDPERS is interested in limiting the disruption employees may experience in the event of a change in vendors. (see Appendix I.)

- Access to preferred providers outside the local geographic service area (national).

- Ability of the vendor to negotiate NDPERS-specific contracts.

- The ability to match or exceed existing discount levels

- Commitment to pay for performance and other cost and quality initiatives.

- **Plan Design –** with respect to plan options and design, NDPERS is interested in:

- Confirming the vendor's previous experience with and ability to administer the current plan designs.

- Continuing to provide employees with choice and flexibility at an affordable cost.

- Ability to administer existing Medicare Part D Group PDP plan.

- **Disease and Other Care Management Programs** – NDPERS wishes to continue to offer assertive disease management, care management and care support programs as part of the overall health care program, and is interested in exploring innovative, positive incentives for participation in these programs. Vendors must demonstrate their ability to report and provide meaningful, interpretive data to better support the disease and other care management programs.

- **Health Improvement, Education and Wellness Programs** – NDPERS is interested in partnering with its vendors to offer the same or similar program. Our existing program also links to the NDPERS employer based wellness program and this should also be supported. Please refer to http://www.nd.gov/ndpers/insurance-plans/employer-based-wellness.html for details on this program. NDPERS also wishes to maintain a dedicated wellness staff member with the successful vendor who will work with our worksite wellness coordinators. The successful vendor must provide this resource.

- **Retiree Coverage –** provide the same levels of coverage to our Medicare retirees.

Vendor Responsibilities

The selected vendor must demonstrate the ability to develop and manage a health care provider network, provide claims processing services, utilization management, medical management, disease management, wellness program, dedicated account service and support, dedicated member/customer service, data/management reporting, billing, and other administrative services. Vendors should also adjudicate and resolve Medicare Secondary Payer demand claims from the Center for Medicare and Medicaid Services (CMS) in a timely manner and reconcile Medicare D eligibility and premium discrepancies. (See Exhibit 8)

In addition, vendors are expected to conduct ongoing performance review meetings with NDPERS regarding plan financial performance, provider contracting issues, progress related to network goals and new network development, patient satisfaction, new or emerging legal issues, and other relevant and timely operational issues that may affect the plan. Vendors are to identify actions to enhance that performance.

Additional details regarding expected health plan administrator duties can be found in Appendix A – Existing Administrative Service Agreement of this RFP. Vendors must review this section carefully to identify potential deviations and exceptions. As noted throughout the RFP, vendors are required to list all exceptions and suggest proposed alternative contract language in Appendix F and submit this information with your proposal. Failure to provide this may eliminate your proposal from consideration.

The proposed effective date of the program is July 1, 2015, except the PDP, that effective date is January 1, 2016. Vendors will have the opportunity to demonstrate capabilities in these areas by responding to the questionnaire provided in Appendix C of this RFP and potentially with additional finalist questions and presentations.

III.Proposal Content

This section describes minimum requirements, unique content requirements, and outlines general conditions and requirements that are not specifically addressed in the sample contract/ASA. Review the general conditions and requirements carefully, and include any deviations and exceptions to these with your submission as described in this section and elsewhere in the RFP. Also refer to Section IV., Proposal Submission, for instructions and additional information regarding proposal format and content.

Required Forms

The following forms can be found in Appendix B, Response Template, of this RFP.

1. Face Sheet – This is included in Appendix B, Item 1.

2. Minimum Requirements for Administrative Services Checklist – This is included in Appendix B, Item 2.

3. Affidavit of Non-collusion – Each responder must complete the Affidavit of Non-collusion form and include it with the response. This is included in Appendix B, Item 3.

4. Conflicts of Interest list. Responder must provide a list of all entities with which it has relationships that create, or appear to create, a conflict of interest with the work that is contemplated in this Request for Proposals. The list should indicate the name of the entity, the relationship, and a discussion of the conflict. This is included in Appendix B, Item 4.

5. Compliance with Federal and State Laws Form – Responder must provide certification to NDPERS that they comply or if notified will comply with applicable Federal and State laws. This is included in Appendix B, Item 5.

6. Location of Service Disclosure Certification. Proposers must certify the location where services to be provided will be performed, and agree that the location will not change during the course of the contract without prior written approval from NDPERS. This is included in Appendix B, Item 6.

Unique Content Requirements

1. Questionnaire - This is included in Appendix C.

2. Cost proposal - This is included in Appendix D.

3. Deviations and suggested alternatives to sample contract/ASA – This is included in Appendix F, Item F1.

   Responders should review in detail the standard contract terms and conditions provided in the sample Administrative Agreement in preparing their responses. A sample NDPERS Financial and Administrative Services Agreement (ASA) is attached for your reference in Appendix A. Any final contract will include, but not be limited to, the

elements in the sample contract. Vendors should note that much of the language reflected in the contract is required by State statute and therefore is not negotiable.

If you take exception to any of the terms, conditions or language in the sample ASA, you must indicate those exceptions and suggest alternative language in your response to the RFP by submitting Appendix F and a redline version of the generic contract language (pertaining primarily to the narrative rather than the financial terms and provisions); certain exceptions may result in your proposal being disqualified from further review and evaluation. Only those exceptions indicated in your response to the RFP will be available for discussion or negotiation.

4. Deviations to other RFP requirements. This is included in Appendix F, Item F2.

5. Summary/checklist of specific items identified as trade secret.

   All materials submitted in response to this RFP will become property of NDPERS and will become public record, after the evaluation process is completed. Completion of the evaluation process occurs when the government entity has completed negotiating the contract with the selected vendor. If the Responder submits information in response to this RFP that it believes to be propriety or trade secret materials the Responder must:

   a. clearly mark each provision that respondent believes to be proprietary or trade secret materials in its response at the time the response is submitted,

   b. include a statement with its response justifying the proprietary or trade secret designation for each provision.

      Responder is put on notice that, except for information that is confidential or otherwise exempt from the North Dakota open records law (NDCC § 44-04), NDPERS must disclose to the public upon request any records it receives from Responder. If NDPERS receives an open records request for information that has been identified by respondent as proprietary or trade secret, NDPERS will review the above information submitted by Responder and may also contact Responder for additional input regarding the nature of those records, but NDPERS will be solely responsible for making the ultimate determination of whether the records are open or exempt. All information that has not been clearly identified by respondent as being proprietary or trade secret will be deemed to be open record. NDPERS will not consider the prices submitted by the Responder to be proprietary or trade secret materials.

6. Appendix H: Performance Standards and Guarantees

7. Appendix I: Disruption Analysis

8. Appendix J: Fee Schedule Analysis

9. Appendix K: Suggested General Conditions and Requirements

1. Proposal Contents

By submission of a proposal, Responder warrants that the information provided is true, correct and reliable for purposes of evaluation for potential contract award. The submission of inaccurate or misleading information may be grounds for disqualification from the award as well as subject the responder to suspension or debarment proceedings as well as other remedies available by law. The contents of the proposal and any subsequent clarifications submitted by the successful proposers will become part of the contractual obligation and incorporated by reference into the ensuing contract.

The proposal that you submit will constitute your unqualified consent to the following mandatory requirements:

- Proposals submitted in response to this request will be considered the only submission; revised proposals will not be allowed after the proposal return date and time unless requested by NDPERS or approved by the NDPERS Board.
- All proposals must answer all applicable questions on the attached questionnaire.
- All proposals become the property of NDPERS and will not be returned to the offering company. Also all information provided is a public record under North Dakota unless specifically exempted by law.
- All offering companies must be prepared to make oral presentations if requested.

2. Term of Contract

The North Dakota Public Employees Retirement System is governed by North Dakota State statues, which includes a requirement to solicit bids for medical benefits coverage for a specified term for a fully-insured arrangement and every other biennium for an Administrative Services arrangement. NDPERS has determined that the specified term for providing such hospital and medical benefits under a fully insured arrangement shall be six years to include three biennium periods: July 1, 2015 to June 30, 2017, July 1, 2017 to June 30, 2019, and July 1, 2019 to June 30, 2021.

If the plan is awarded as a fully insured plan pursuant to this RFP NDPERS and the successful proposer(s) may renegotiate the existing contract during the interim of each biennium without resorting to a formal bidding process. If the NDPERS and the successful proposer(s) are unable to reach an agreement during renegotiations, a formal bidding process will be initiated. Negotiations will begin in August and end in September in the final fixed year of the biennium. NDPERS also reserves the right to terminate any contract awarded pursuant to this bidding process within thirty (30) days notice.

3. Minimum Requirements

The following are the minimum requirements that need to be addressed in each proposal and apply unless waived by the board:

1) Electronic Data Collection and Reporting Requirements: Respondents must, at a minimum, meet the data collection and reporting requirements described in Section 1 under Reporting Requirements of the RFP.

2) Vendor must be able to take current 834 electronic enrollment file (containing member eligibility) at no cost.

3) Effective Date of Coverage: Respondents must be able to provide required coverages and services by July 1, 2015 and for the PDP by January 1, 2016.

4) Licensure: Respondents must have all applicable licenses required by North Dakota or agree to obtain necessary licensure prior to the effective dates of coverage.

5) Term of Contract: NDPERS is required by state statue to solicit bids for medical benefit coverage for a specified term for a fully-insured arrangement and every other biennium for a self-funded arrangement. NDPERS has determined that the specified term for fully-insured arrangement shall be six years, subject to two year renewals; however, NDPERS reserves the right to extend the agreement subject to negotiation with the successful vendor if the Board deems it necessary.

6) Premium Rate Guarantees: For all insured proposals premium rates must be guaranteed for a period of two years, from July 1, 2015 to June 30, 2017. PDP rates will be developed each year based upon the federal subsidy.

7) Non-Medicare Retirees: Rates are governed by state statute. Non-Medicare retiree single rate is 150% of the active member single rate; the rate for a non-Medicare retiree plus one is twice the non-Medicare single rate, and the rate for a non-Medicare retiree plus two or more dependents is two and one-half times the non-Medicare retiree single rate.

8) PDP rates: Must be submitted to PERS by September of each year.

9) Renewals: Renewals must be submitted to NDPERS in August of the year preceding the contract renewal date and in September of each year for the PDP.

10) Contract Termination: Respondent's contract termination provision may not require more than 120-day notice and can occur only at renewal. NDPERS can terminate coverage at any time.

11) Replicate coverage: Respondent should replicate the existing coverage and financial terms for two years, including providing an HSA arrangement. Variances and exceptions to existing coverage can be offered in appendix F item F2.

12) Legislative Compliance: Respondents agree to comply with all provisions of the Health Insurance Portability Act of 1996 including, but not limited to providing certificates of creditable coverage.

    Respondents must also be in compliance with all HIPAA Privacy and HIPAA EDI requirements and be able to conduct all applicable employer/plan sponsor and provider transactions consistent with those requirements. Respondents will be

expected to meet HIPAA security requirements when applicable to NDPERS. Respondents will also be expected to be in compliance with all ACA requirements

13) Transition Management: Respondents agree, should they be selected, they will proactively manage the transition of coverage (e.g. claim accumulators, etc.) from the subsequent carrier.

14) Administration: Respondents must agree to comply with existing administration of NDPERS. Any modifications needed to accommodate NDPERS data will be done at the vendor's own expense.

15) Audit: Section 54-52-04 (10) relating to the audit authority of NDPERS .

16) North Dakota Legislation Requirements: Respondent must meet all requirements in the North Dakota Century Code including 54-52; 54-52.1, 54-52.4 and all requirements in the North Dakota Administrative Code including 71-03 and other applicable State Laws. Specific recognition of 54-52.1-12 should be acknowledged.

17) Ability to meet the specifications outlined in the RFP unless specifically noted.

18) Premium rates must be divisible by two.

19) Subject matter experts and other appropriate personnel will be available to attend board meetings, legislative hearings, etc. as needed.

IV. Proposal Submission

Instructions

All proposals should be submitted simply and economically providing a direct, concise delineation of the vendor's proposal and qualifications adhering to the proposal format guidelines outlined below. Vendors should also refer to Section III, Proposal Contents, for a list of minimum requirements.

- Proposals should be typed or printed on 8.5" x 11" paper (one side only).
- All proposals must include the transmittal letter/statement which includes the following:
  - An acknowledgement of receipt of the group health RFP specifications and any addenda and a statement that the proposal conforms to the RFP minimum requirements. This letter must include the title and signature of a Duly Authorized Officer of the company. As noted above, any deviations from the specifications must be clearly noted in your proposal. Failure to note deviations may exclude the proposal from further consideration.
- All proposals must include a table of contents and appropriate page number references.
- All pages of proposals must have consecutive page numbers.
- Proposals must respond to RFP minimum, unique, and general requirements.
- Responses to questions must include a restatement of the question (number and text) with the response immediately following.
- Appendices and other supplemental information provided with your proposal must be clearly identified.
- Cost proposal must be submitted in a separate, sealed envelope and clearly marked Cost Proposal. Premiums quoted in Appendix D: Cost Proposal Exhibits will be fully loaded rates. NDPERS will not be billed any additional amounts for services, including commissions or brokerage fees.
- North Dakota insurance law 54-52.1-10 (Exemption From State Premium Tax) provides that "All premiums, consideration for annuities, policy fees, and membership fees collected under this chapter are exempt from the tax payable pursuance to section 26.1-03-17". Thus, Offeror's responses should not reflect any amounts for premium taxes.
- Any and all deviations must be clearly noted and submitted under separate cover. If you do not identify and explain deviations, your proposal will be deemed a certification that you will comply in every respect with the requirements and contractual language set forth in this RFP. Deviations and exceptions to the sample contract/Administrative Services Agreement (ASA) must be submitted in the form of 1) completed Appendix F, Item F1, in a sealed envelope clearly marked as such. If you are unable to perform any required or requested service, you must also clearly identify in Appendix F, Item F2 a) the specific deviation or requirement your organization is unable to meet and b) the suggested alternative or solution.

Proposal Format and Contact Information

Vendors must use the response template/questionnaire provided in Appendices B, C and D in preparing proposals. Proposals should be submitted in two parts, with the cost proposal and deviations separate from the qualitative proposal in a clearly marked, sealed envelope (submitted to Deloitte Consulting only). Proposals will be sent to two parties, as described below

Vendors are required to submit one (1) unbound original and ten (10) paper copies of the ***qualitative proposals*** along with one (1) electronic copy to:

Cheryl Stockert
Manager, Administrative Services
North Dakota PERS
400 East Broadway
Suite 505
Bismarck, ND 58502

An electronic copy (on CD) of your entire qualitative proposal must be included with the hard copy original. Late proposals will not be considered unless approved by the board.

Two (2) hard copies and one full electronic copy (on CD) of the qualitative proposal and a separate, clearly marked envelope containing Two (2) hard copies and one electronic copy of the cost proposal and deviations must be submitted to:

Josh Johnson
Manager
Deloitte Consulting LLP
50 South 6th Street
Suite 2800
Minneapolis, MN 55402

***PLEASE NOTE*:** As indicated above, vendors must separate the cost proposal and deviations from the rest of the proposal and submit two paper copies and one electronic copy in a sealed envelope clearly marked "**Cost Proposal for NDPERS for Health Plan Vendor**", along with your organization's name, to Josh Johnson at Deloitte Consulting at the address listed above. Vendors must submit hard and electronic copies of the entire proposal.

From the date of issuance until the announcement of the finalist, vendors should only contact the Deloitte RFP coordinator, Josh Johnson. All correspondence and questions must be submitted in writing via e-mail to the RFP coordinator in accordance with the timeline set forth in this RFP. NDPERS personnel are not authorized to discuss this RFP with vendor; doing so may result in disqualification. Vendors may continue to communicate with NDPERS staff regarding other relevant business matters.

Questions and Answers

Vendors must submit questions in writing via e-mail to Josh Johnson at jkjohnson@deloitte.com ***by 5:00 p.m. CT on July 25th, 2014***. Answers will be summarized and distributed to all vendors who have requested the RFP via email no later than close of business on July 29th, 2014 as well as posted on the NDPERS website. *Telephone inquiries will not be accepted.*

Proposal Deadline

All proposals must be received by Josh Johnson ***by 5:00 p.m. CT on September 4th, 2014.*** Late proposals will not be considered.

Proposed Timetable

The timeline is provided below for informational purposes. NDPERS reserves the right to change the dates. Every effort will be made to notify vendors of changes to the proposed timeline.

Activity	**Date/Time (All Times in CT)**
NDPERS publishes Request for Proposal (RFP)	July 9, 2014
Vendor questions (in writing) due	July 25, 2014 (5 pm)
NDPERS distributes answers to vendors' questions	August 4, 2014
Proposals due	**September 4, 2014 (5 pm)**
Finalist presentations (if requested)	TBD
NDPERS notifies finalist of intent to negotiate	TBD December 2014
Contractor and NDPERS complete negotiations	TBD Jan/Feb 2015
Contractor and NDPERS begin implementation	-March 2015
Contractor(s) begins providing services	July 1, 2015

V. Proposal Review and Evaluation

Rights of NDPERS

This RFP does not obligate NDPERS to complete the proposed project. NDPERS reserves the right to cancel the solicitation if it is considered to be in its best interest. Costs incurred for developing a proposal are the sole responsibility of the vendor. NDPERS also reserves the right to:

1. Reject any and all proposals received in response to this RFP.
2. Amend and re-issue this RFP.
3. Select proposals for contract award or for negotiations other than those with the lowest cost.
4. Consider a late modification of a proposal if the proposal itself was submitted on time, if the modifications were requested by the state, and if the modifications make the terms of the proposal more favorable to the state.
5. Determine that a deficiency is not substantive and waive the deficiency as immaterial. However, waiver of the deficiency shall in no way modify the RFP documents or relieve the vendor from full compliance with the terms of the contract if the vendor is awarded the contract.
6. Negotiate any aspect of the proposal with any vendor and negotiate with more than one vendor at the same time.
7. Use any or all ideas presented in any proposal received in response to this RFP, unless the vendor presents a positive statement of objection in the proposal. Objections will be considered as valid only relative to proprietary information of the vendor and so designated in the proposal. Exceptions to this are ideas that were known to NDPERS before submission of such proposal or properly became known to NDPERS thereafter through other sources or through acceptance of the proposal.

Selection Team

A review team made up of NDPERS staff and its hired consultant will evaluate all proposals. The NDPERS Board will make the final decision on the award. NDPERS reserves the right to alter the composition of this selection team and its responsibilities.

Proposal Review and Evaluation Criteria

Proposals will be reviewed and evaluated using multiple evaluation criteria. The cost proposal will be reviewed independently to ensure that it is complete and submitted in the format requested. In reviewing the proposals the requirements in NDCC 54-52.1-04 will be considered.

Phase I Preliminary Review Criteria

Proposals will initially be evaluated to determine if they comply with the following minimum requirements:

- Completeness of proposal, including minimum vendor requirements, unique content requirements, and general requirements as outlined in Section III., Proposal Content, and submitted in the format designated in Appendices B through F.
- Completeness and quality of responses to questionnaire provided in Appendix C and completeness of cost proposal provided in Appendix D.
- Extensive statewide provider network which provides access to key population areas within the State.

Phase II Evaluation Criteria

Proposals that have met the minimum requirements criteria listed above will then be reviewed based on the factors contained in the table below:

Phase II Evaluation Criteria
1. Ability to comply with terms outlined in the RFP and Board evaluation criteria
2. Equivalent Contract Benefits (Appendix G) including the following. 2a. Organizational experience and staff qualifications/experience – Dedicated unit comprised of account management team, customer service, provider relations, and provider contracting – Access to senior leadership team – Ability to respond to unique challenges with solution-focused flexibility and innovation – Client references – Financial stability and solvency 2b. Plan Design 2c. Provider network capabilities – Similar or greater number of providers in contract network – Similar or greater level of discounts – State-specific contracts – Quality initiatives – Contractual terms – Increase number of network providers

Phase II Evaluation Criteria
2d. Quality and comprehensiveness of health population, disease management, and health education and wellness programs – Utilization/case management capabilities – Quality initiatives – Ability to present appropriate innovative cost control strategies – Ability to support NDPERS employer based wellness program and employee wellness initiatives – Dedicated staff member for wellness program 2e. Cost of requested services and return on investment – Value of provider reimbursement discounts – Administrative fees – Care, disease management, and health improvement programs – Medicare Part D Group PDP Offering – Rx rebates
3. Statutory Criteria – The economy to be affected. – The ease of administration. – The adequacy of the coverages. – The financial position of the carrier, with special emphasis as to its solvency. – The reputation of the carrier and any other information that is available tending to show past experience with the carrier in matters of claim settlement, underwriting, and services

Preference Criteria

Preference Criteria will be applied by the board in the final evaluation of proposals as determined by the board.

PBM

NDPERS is interested in evaluating financial arrangements based on the traditional approach to PBM pricing and pricing under a transparent arrangement. “Traditional” financial proposals should include guaranteed effective rate discounts, as well as specific fees and guaranteed rebate dollar amounts. “Transparency” for purposes of this Request for Proposal is defined as a full pass through to NDPERS of all monies paid to the PBM arising from all contracted arrangements. When answering questions and completing exhibits related to your financial proposal, please indicate if your answer would differ under a transparent or a traditional pricing arrangement. NDPERS will give preference to transparent proposals.

Transparent “Pass Through” Pharmacy Contract:

- Retail discounts and dispensing fees are 100% pass through
- No spread pricing

- Bidder may assess an administration fee if appropriate

- Mail service terms reflect a standard "traditional" proposal where discounts are fixed

Bidder will pass through 100% of rebates and "rebate-like" revenues received from pharmaceutical manufacturers (defined as all revenue/financial benefits and credits received from outside sources attributed to the utilization of NDPERS or enrollment in programs. These would include but are not limited to all Manufacturer Administration Fees, Formulary Access Rebates (inclusive of any bundling), Market Share Rebates, Performance/Incentive Rebates, Data Fees, Compliance Program Funding, Clinical Program support/funding, Therapeutic Intervention funding, Education Fees, Marketing Grants for Clinical Studies, Specialty Drug Rebates, Specialty Clinical/Case Management Funding, Specialty Compliance Program funding, Research, Prompt Payment Discounts, etc.as a consequence of any relationship with NDPERS. Bidder will also include minimum rebate guarantee, preferably on a per paid claim basis (per brand basis may is also acceptable, however per rebatable claim basis is not acceptable).

Audit

PERS is also interested in being able to audit the PBM as determined by the board which could be annually. Preference will be given to those who agree to audits.

Proposal Evaluation Process

Evaluation of the proposals will be conducted in four phases:

1. **Phase I — Preliminary Review**

   Proposals will receive preliminary review to determine if they meet the minimum proposal requirements and criteria listed above. NDPERS reserves the right to ask clarifying questions. Only proposals meeting the minimum requirements above will be considered for further evaluation in Phase II.

2. **Phase II — Proposal Evaluation**

   Proposals will be evaluated based on the criteria specified above and per the terms outlined in this RFP. Proposers are encouraged to highlight how they differentiate themselves in these areas and provide this information in appendix K. Only the top proposals will be approved for further evaluation in Phase III. Once the initial evaluation is completed, the review team may ask for additional information to supplement the initial information gathered in response to these questions.

3. **Phase III – Reference Checks, Best and Final Offer and Presentations**

   NDPERS staff may check references, request answers to further questions, and require presentations by key administrator personnel, which will be evaluated based on the stated criteria. During final consideration a best and final offer may be requested. Only the top proposals will be approved for further evaluation in Phase IV.

4. Phase IV – Site Visits, Final Selection, and Notification

The evaluation committee will forward findings and conclusions to the NDPERS Board and may request site visits and make a final review of the top proposals based on all of the criteria above to select a finalist. Vendors will be notified of the intent of NDPERS to negotiate a contract with the selected vendors via e-mail.

Note: Self-insured proposals will be evaluated after the fully insured bids to determine which contract type is expected to be most cost effective for NDPERS. .

NDPERS reserves the right to request clarifications and additional information regarding the proposal during the proposal evaluation process. However, NDPERS Board reserves the right to make an award without further clarification of the proposal received. Therefore, it is important that each proposal be submitted in the most complete manner possible.

VI. Appendices

Appendix A: Sample Existing Contract/Administrative Services Agreement

Appendix B: Response Template

Appendix C: Questionnaire

Appendix D: Cost Proposal Exhibits

Appendix E: Program Information/Data

Appendix F: Proposal Deviations

Appendix G: Existing Contract Benefits

Appendix H: Performance Standards and Guarantees

Appendix I: Disruption Analysis

Appendix J: Fee Schedule Analysis

Appendix K: Suggested Changes to Plan Design, Programs and Services

VII. Exhibits

E1 Healthy Blue Overview
E2 Health Club Credit Overview
E3 Health Mandate Cost Fiscal Note
E4 Quarterly Executive Summary
E5 Annual Executive Summary
E6 Monthly Financial Report
E7 Annual Claims Audit
E8 MSP Data Match Compliance
E9 2015 – 2017 NDPERS Plan Options
E10 Memorandum of Understanding for Value added programs
E11 Wellness Program Voucher
E12 Wellness Challenge
E13 Wellness Star
E14 Monthly Newsletter for Wellness Coordinators
E15 Wellness Coordinator Call
E16 Member Education Presentations
E17 Enrollment/disenrollment Medicare Part-D Exception Report
E18 Monthly Enrollment Report
E19 Wellness Coordinator Workshop Agenda

North Dakota Public Employees Retirement System

Request for Proposal

Self-Insured Group Medical and Prescription Drug Coverage

August 13, 2014

Proposals Due:
By 5:00 p.m. CT
October 10, 2014

Key Information

Objective

North Dakota Public Employees Retirement System ("NDPERS") is soliciting proposals for the administration of its employee/retiree medical and prescription drug insurance plan, with a July 1, 2015 effective date. Responses are required for the self-insured financial arrangement as described in this Request For Proposal (RFP). Proposals will be accepted from vendors that are capable of offering a statewide provider network, utilization management, disease management, wellness program and pharmacy benefit manager services along with other related services.

This is the second of two RFP's relating to the NDPERS group insurance plan. The first RFP is for a fully insured plan arrangement and is for a six year contract arrangement with renewals every two years. It was issued July 9, 2014. This is the second RFP requesting proposals for self-insured administration, which is a four year contract subject to two year renewals beginning July 1, 2015 through June 30, 2017. The Prescription Drug Plan ("PDP"), however, will have a contract date beginning January 1, 2016 to December 31, 2016 and renewing for a second year January 1, 2017 to December 31, 2017.

The NDPERS Board will determine which funding approach it will implement based on the results of both RFPs (See Section II of this RFP for further detail).

Background

NDPERS is responsible for the administration of the State of North Dakota's Retirement, Health, Life, Deferred Compensation, FlexComp, EAP, and Retiree Health Credit programs. In addition, cities, counties, schools and other political subdivisions of the state participate at their option. NDPERS also administers three voluntary insurance programs: a group dental, vision, and long-term care program. Approximately 23,000 active employees and 8,000 retirees are eligible to participate in these plans.

NDPERS reserves the right to select the health plan proposals that best fit its needs and the needs of its eligible employees/retirees. NDPERS has retained Deloitte Consulting LLP ("Deloitte Consulting") to assist with the RFP process.

Currently Blue Cross Blue Shield of North Dakota ("BCBSND") insures the medical and prescription drug plan under a fully-insured arrangement with some risk sharing provisions.

In determining which bid, if any, will best serve the interests of eligible employees/retirees and the state, the NDPERS and its Board shall give adequate consideration to the following factors:

1. The economy to be affected.
2. The ease of administration.
3. The adequacy of the coverages.
4. The financial position of the carrier, with special emphasis as to its solvency.
5. The reputation of the carrier and any other information that is available tending to show past experience with the carrier in matters of claim settlement, underwriting, and services.

6. The board may establish a self-insured plan only if it is determined to be less costly than the lowest bid submitted by a carrier for underwriting the plan with equivalent contract benefits

Proposed Timetable

The timeline is provided below for informational purposes. NDPERS reserves the right to change the dates. Every effort will be made to notify vendors of changes to the proposed timeline.

Activity	**Date/Time (All Times in CT)**
NDPERS publishes Request for Proposal (RFP)	August 13, 2014
Vendor Conference*	September 4, 2014
Vendor questions (in writing) due	September 15 , 2014 (5 pm)
NDPERS distributes answers to vendors' questions	September 24 , 2014
Proposals due	**October 10, 2014 (5 pm)**
Finalist presentations (if requested)	TBD
NDPERS notifies finalist of intent to negotiate	TBD December 2014
Contractor and NDPERS complete negotiations	TBD Jan/Feb 2015
Contractor and NDPERS begin implementation	March 2015
Contractor(s) begins providing services	July 1, 2015

RFP Coordinator Contact
Josh Johnson

Deloitte Consulting LLP
50 South 6th Street
Suite 2800
Minneapolis, MN 55402
jkjohnson@deloitte.com

*A vendors' conference will be held in Bismarck on September 4, 2014 at **the North Dakota Association of Counties Building at 1661 Capital Way from 1:00 – 3:00 p.m.** or until all questions have been submitted. Vendors may attend in

Note:

From the date of issuance until the announcement of the finalist(s), vendors may contact only the RFP Coordinator. All correspondence and questions must be submitted in writing via e-mail to the RFP Coordinator in accordance with the timeline set forth in this RFP. NDPERS personnel are not authorized to discuss this RFP with vendors; doing so may result in disqualification. Vendors may continue to communicate with NDPERS staff regarding other relevant business matters.

person or call in to 701-328-9754 the day of the conference. The phone number will be activated at 12:55 p.m. central time. Anyone calling in must identify themselves for everyone in the room. Expenses incurred by vendors to participate in the vendors conference, either in person or by voice, are the responsibility of the vendor and will, under no circumstances, be reimbursed by NDPERS. Those who elect to participate via teleconference must understand that no accommodation will be made in the event of lost connectivity on their part for poor audio quality, for missed questions asked at the conference, etc. Other than for publishing questions and final answers, no follow-up meeting or broadcast will be made to accommodate or rectify any shortcomings in the teleconference format. Questions and answers will be posted to the NDPERS website by September 24, 2014.

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I. Overview of the NDPERS Program

NDPERS

North Dakota Public Employees Retirement System (NDPERS) is a separate agency created under North Dakota state statute, and while subject to state budgetary controls and procedures, as are all state agencies, is not a state agency subject to direct executive control. NDPERS is managed by a Board comprised of seven members:

- Chairman – appointed by the Governor
- Member – appointed by the Attorney General
- Member – elected by retirees
- Members (3) – elected by active employees
- State Health Officer or Designee

Dakota Plan

Currently, NDPERS contracts with Blue Cross/Blue Shield of North Dakota ("BCBSND") to provide fully-insured health care coverage with a risk sharing agreement. If incurred claims plus expenses are more than premiums during the biennium, 50% of the first $6,000,000 is refunded to BCBSND. If incurred claims plus expenses are less than premiums plus interest during the biennium, BCBSND retains 50% of the first $3,000,000 of surplus and any remaining funds are returned to NDPERS. Prior to July 1, 1989, the program was self-insured. The plans provided pursuant to this fully funded arrangement are:

- PPO/Basic – Grandfathered plan
- PPO/Basic – Non grandfathered plan
- HDHP/HSA Plan – Non grandfathered
- Dakota Retiree Plan including Prescription Drug Program (PDP)

PPO

PPO stands for "Preferred Provider Organization" and is a group of hospitals, clinics, and physicians who have agreed to discount their services to members of NDPERS. Members have "freedom of choice" in selecting which physician or medical facility to use for services. Because PPO health care providers charge less for medical care services, cost savings are passed on to the members by way of reduced cost sharing amounts. The PPO discount NDPERS receives is in addition to the BCBSND negotiated reimbursement schedule with participating professional service providers in North Dakota. The present NDPERS PPO network discounts are not transferable and would need to be re-negotiated by a new vendor.

Basic Plan

If a PPO health care provider is not available in the member's area, or if the member chooses or is referred to a health care provider not participating in the Preferred Provider Organization, the member will receive the Basic Plan benefits.

High Deductible Health Plan (HDHP)

In addition to the PPO / Basic Plans, NDPERS offers eligible participants the option to enroll in a

high-deductible health plan (HDHP) through BCBSND, with a Health Savings Account (HSA) administered by Discovery Benefits. The HDHP/HSA option has a higher annual deductible and larger out-of-pocket cost for medical services. However, the higher out-of-pocket costs are partially offset by an employer contribution to the HSA. For the 7/1/13-6/30/14 plan year the NDPERS annual HSA contributions are: $728.88 for single coverage and $1,764.00 for family coverage. NDPERS members enrolled in the HDHP/HSA options are eligible to participate in BCBSND's HealthyBlue and Health Club Credit wellness programs, and may earn the same rewards available to NDPERS members enrolled in the Dakota PPO/Basic plan.

Coverage Rules: When Coverage Begins & Eligibility

An eligible employee is entitled to coverage the first of the month following the month of employment, provided the employee submits an application for coverage within the first 31 days of employment. Each eligible employee may elect to enroll his/her eligible dependents.

Eligible employees include:

- State employees or employees of participating Political Subdivisions first employed prior to August 1, 2013 who are at least eighteen (18) years of age and whose services are not limited in duration, who are filling an approved and regularly funded position, and who are employed at least 17 and one-half hours per week and at least five months each year;

- State employees first employed after August 1, 2013, who are employed at least twenty (20) hours per week and at least twenty weeks each year of employment are eligible to receive benefits; and

- A temporary employee employed before August 1, 2007, may elect to participate in the uniform group insurance program by completing the necessary enrollment forms and qualifying under the medical underwriting requirements of the program if such election is made prior to and they are participating in the uniform group insurance program as of January 1, 2015. A temporary employee employed on or after August 1, 2007, is only eligible to participate in the uniform group insurance program if the employee is employed at least twenty hours per week and at least twenty weeks each year of employment and elected to participate prior to, and is participating in the uniform group insurance program as of January 1, 2015. A temporary employee first employed on or after January 1, 2015, or any temporary employee not participating in the uniform group insurance program as of January 1, 2015, is eligible to participate in the uniform group insurance program only if the employee meets the definition of a full-time employee under section 4980H(c)(4) of the Internal Revenue Code [26 U.S.C. 4980H(c)(4)].

- An eligible dependent includes the eligible employee's spouse under a legally existing marriage between persons of the opposite sex, the employee's or the employee's living, covered spouse's children under the age of 26 years. Children are considered under age 26 until the end of the month in which the child becomes 26 years of age. The term child or children includes:

1. Children physically placed with the employee for adoption or whom the employee or the employee's living, covered spouse has legally adopted.

2. Children living with the employee for whom the employee or the employee's living, covered spouse has been appointed legal guardian by court order.

3. The employee's grandchildren or those of the employee's living, covered spouse if: (a) the parent of the grandchild is unmarried, (b) the parent of the grandchild is covered under this Benefit Plan and (c) both the parent and the grandchild are primarily dependent on the employee for support. If a lapse in coverage occurs due to ineligibility of the parent under this Benefit Plan, the grandchild cannot be reenrolled unless the employee has been appointed legal guardian.

4. Children for whom the employee or the employee's living, covered spouse are required by court order to provide health benefits.

5. Children beyond the age of 26 who are incapable of self-support because of intellectual disability or physical handicap that began before the child attained age 26 and who are primarily dependent on the employee or the employee's spouse for support. Coverage for such a disabled child will continue for as long as the child remains unmarried, disabled and the employee's dependent for federal income tax purposes. The employee may be asked periodically to provide evidence satisfactory to BCBSND of these disabilities.

Retiree Eligibility

Retirees or surviving spouses who are under age 65 and are receiving a retirement allowance from the Public Employees Retirement System, the Highway Patrol Retirement System, the Teachers Insurance and Annuity Association College Retirement Equities Fund (TIAA-CREF), the Job Service Retirement Plan, the Teachers' Fund for Retirement (TFFR), or retirees who have accepted a retirement allowance from a participating political subdivision's retirement plan are eligible for benefits. However beginning July 1, 2015 all new Pre-Medicare retirees after that date will only be eligible for COBRA coverage. The pre-Medicare plan will no longer be available to retirees after that date. Pre-Medicare retirees who retiree before that date will continue to be eligible and may participate.

The Non-Medicare retiree single rate is 150% of the active member single rate; the rate for a non-Medicare retiree plus one is twice the non-Medicare single rate, and the rate for a non-Medicare retiree plus two or more dependents is two and one-half times the non-Medicare retiree single rate.

Detailed information regarding current eligibility for dependents for the Dakota Plan can be found in the 2013-2014 Summary of Benefits at http://www.nd.gov/ndpers/forms-and-publications/publications/grp-hlth-spd-actives.pdf.

Dakota Retiree Plan

Employees who retire have the option to continue insurance coverage through NDPERS. The Dakota Retiree Plan provides health care coverage as a secondary payer to Medicare. Coverage for Medicare retirees is different than the coverage for non-Medicare retirees. The NDPERS Medicare retiree plan is identical to a Medicare supplement Plan F. Each eligible

retiree may elect to enroll his/her eligible dependents as described in the *Eligibility* section above. The prescription drug benefit for retirees is provided through a group Prescription Drug Program (PDP) on a calendar year basis.

Detailed information regarding current eligibility for dependents for the Dakota Plan can be found in the 2013-2014 Summary of Benefits at http://www.nd.gov/ndpers/forms-and-publications/publications/grp-hlth-spd-retirees.pdf

Pharmacy Benefit Manager

Currently, the prescription drug plan coverage for active and non-Medicare retirees is bundled with the medical plan provided by BCBSND who provides the core pharmacy benefit functions and services including claims processing, pharmacy network development/maintenance, drug formulary design, clinical program management, mail service, and specialty pharmacy except the Rx plan for Medicare eligible members. The plan for Medicare eligible members is identical in terms of plan provisions (out of pocket expenses) except this coverage is provided separately through a qualified PDP. Consequently, differences do exist in terms of the formulary and other such items. The PDP contract is on a calendar year basis.

Data Warehouse

NDPERS maintains a health care data warehouse. The medical records and related data of the employees, retirees, and dependents, obtained as the result of enrollment in the uniform group insurance program, are the property of the Public Employees Retirement System (Century Code Statute 54-52.1-12). Currently the health plan provides raw data, including detailed claims and enrollment data sets, based on a mutually agreed upon format no less than monthly for the data warehouse repository. All administrators are expected to submit claims and enrollment data, in an agreed upon format.

Reporting Requirements

All monthly reports should be done for each plan offered (e.g. Grandfathered PPO, Non-Grandfathered PPO, HDHP, etc.) and should also roll up to an annual, aggregate report. NDPERS requires vendors to provide reporting which includes, but is not limited to the following.

1. Monthly enrollment counts by plan. (Exhibit 18)

2. Yearly breakdown, by plan of membership, high dollar cases, claims, medical charges submitted, ineligible charges, provider discounts, COB savings, copayments, deductibles and coinsurance paid by participants and final paid claims. (Exhibit 5)

3. Annual policy accounting statement including claim reserves.

4. Quarterly summary to include financial/trend analysis, membership and health utilization summary, high dollar claims, RX and specialty spending and payment trend, health management and wellness program key indicators, performance standards and guarantees measures and accounting of completed and ongoing activities. (Exhibit 4)

5. Monthly experience report including paid claims, administration fees, stop loss reimbursements, etc.. A sample of the current monthly report is included as (Exhibit 6),

however NDPERS understands that a monthly report format will include different data under a self-insured contract.

Each vendor must:

1. Provide NDPERS with claims specific data on a monthly basis on compact disc, secure download, or other agreed upon medium. This information shall be in a format acceptable to NDPERS and subject to all federal and state laws on confidentiality and open records.

2. Carry over any deductible and or coinsurance amounts incurred from January 1 to June 30, of the prior contract period.

3. Be able to provide upon request annual accounting of HSA accounts, including the following information:

   a. Year end balances
   b. Number (and value) of eligible expense withdrawals
   c. Number (and value) of non-eligible expense withdrawals.

4. Provide Biennial close-out report

   In addition to the above plan wide reporting, the successful vendor will provide plan specific reporting as requested for the following:

   - PPO/Basic – grandfathered plan
   - PPO/Basic – Non grandfathered plan
   - HDHP/HSA Plan – Non grandfathered
   - Dakota Retiree Plan including PDP

   Also please note NDCC 54-52.1-12 which applies to all information the vendors acquire relating to NDPERS.

Funding

Currently NDPERS contracts with BCBSND to provide its health care coverage on a fully-insured basis with a risk sharing arrangement. BCBSND maintains full liability for incurred claims in excess of paid premium (no deficit carryover) subject to a risk corridor. All funds in the account get interest paid each month based upon the yield to maturity of US Treasury Notes maturing 24 months hence. NDPERS recognizes that different funding arrangements will be necessary to implement a self-insured program.

Risk Sharing Arrangements

A risk sharing arrangement is currently in place with BCBSND. If incurred claims plus expenses are more than premiums during the biennium, 50% of the first $6,000,000 is refunded to BCBSND. If incurred claims plus expenses are less than premiums plus interest during the biennium, BCBSND retains 50% of the first $3,000,000 of surplus. Any additional surplus is returned to NDPERS with interest. The interest rate shall be based on the US Treasury Notes quoted by the Wall Street Journal. NDPERS recognizes that different funding arrangements will be necessary to implement a self-insured program.

Performance Standards and Guarantees

The current health plan administrators adhere to agreed-upon performance standards and guarantees with a financial incentive/forfeiture component that is negotiated each biennium as part of the renewal process. The settlement/payment for such incentive/forfeiture is included in the annual settlement process. See appendix H for a copy of these performance standards and guarantees. You are required to offer your performance standards and guarantees for the board's consideration using appendix H. It is a priority for the board to have a comprehensive set of standards and guarantees relating to this plan.

Current Annual Settlement and Reconciliation

Within 31 days of 12 months after the end of the biennium NDPERS requires an accounting summary which will result in an initial settlement of the biennium agreement. Within 31 days of 24 months after the end of the biennium BCBSND provides an accounting summary which will result in a final settlement of the biennium agreement. NDPERS recognizes that different settlement arrangements will be necessary to implement a self-insured program.

Current and Desired Plan Designs

In addition to replicating the current coverage provisions, as noted below, the successful vendor shall include adding any federally required coverage provisions on or after July 1, 2015. For details, refer to the following:

Dakota Plan:
http://www.nd.gov/ndpers/insurance-plans/group-health.html
PPO/Basic – Grandfathered Plan
PPO/Basic – Non Grandfathered Plan
HDHP/HSA – Non Grandfathered Plan

Please note NDPERS is requesting that the proposer also provide a HSA product as part of this proposal for the HDHP product

Dakota Retiree Plan - http://www.nd.gov/ndpers/forms-and-publications/publications/grp-hlth-spd-retirees.pdf
PDP coverage for retirees - http://www.nd.gov/ndpers/forms-and-publications/publications/medicare-benefits-summary-current.pdf

Member Access

Members have "freedom of choice" in selecting which physician or medical facility to use for services. PPO benefits are currently available in the state of North Dakota, unless the medical facility provides services at a satellite location in another state. If a PPO health care provider is not available in the member's area, or if the member chooses or is referred to a health care provider not participating in the PPO, the member will receive the Basic Plan benefits. The copayments, annual deductibles and coinsurance amounts vary between the PPO Plan and Basic Plan.

Directory

The current provider directory is available through the BCBSND website at http://provider.bcbsnd.com. Health plan vendors must be able to reasonably match the existing provider networks to provide appropriate access on a statewide basis.

Disease and Other Health Management Programs

Currently, BCBSND provides disease management and health improvement programs for eligible members. The list below includes most of the programs currently offered:

- Coronary Heart Disease
- Diabetes
- Hypertension
- Immunizations
- ADHD
- Colorectal Cancer
- Asthma

BCBSND and most major Health Systems collaborate to offer a program called the Advanced Medical Home Program or MediQHome.

Vendors are expected to offer comprehensive, high quality case/disease management programs, including rare and chronic diseases, for the plans offered to both actives and retirees. Proposed programs and vendors shall be identified in this RFP.

Wellness Programs

Partnering with BCBSND, NDPERS participates in and offers a variety of wellness programs for eligible members and employers. The list below provides more details on some of the programs currently offered:

Employee Wellness Incentives:

- Covered employees and/or spouses are each eligible to receive up to $250 per year through participation. All covered retirees and/or spouses are also eligible for this incentive. Each participant must complete an annual health risk assessment through HealthyBlue, the online wellness tool. Two programs are available to achieve the $250 benefit. The programs are:
  - 1)HealthyBlue Online Wellness Tool – participants utilize the online wellness tool to take steps towards better health goals, including tracking activity and performing challenges to receive points for their participation. The points are then redeemed towards various gift cards or fitness related prizes - see Exhibit 1.
  - 2) Health Club Credit – participants who utilize a health club facility 12 days per month will be reimbursed $20 per month towards their membership fee - see Exhibit 2.

Employer Wellness Initiatives:

Employer Based Wellness Program & Wellness Funding Program:

- The employer based wellness program provides that employers who do not have an on site wellness program pay premiums to NDPERS that are 1% higher. The program is given its authority in NDCC 54-52.1-14. The goals for the program are to:

  - have 100% of our employers supporting a wellness message at their worksite
  - have our members get a greater understanding of wellness
  - create a better quality of life for our membership

- Employers that participate in the NDPERS Group Health Insurance Plan have the opportunity to enroll in the employer based wellness program on an annual basis. For the wellness year July 1, 2014 to June 30, 2015, there are 192 of 273 employers participating. The wellness plan year is from July 1 to June 30. See the following for more details:

http://www.nd.gov/ndpers/insurance-plans/docs/wellness-forum/employer-based-wellness-overview.pdf

Wellness Benefit Funding Program:

The NDPERS Wellness Benefit Funding Program is available to employer groups that participate in the NDPERS group health plan and have been approved for the Employer Based Wellness Discount Program. The Wellness Funding Program, in conjunction with the Wellness Discount Program, encourages employers to commit to promoting wellness planning and programming at their work sites. The funding program provides funding assistance to employers that develop and sponsor on-site wellness programs for their employees. Benefits are available to eligible employers once each fiscal year of the biennium. For details, visit http://www.nd.gov/ndpers/insurance-plans/docs/wellness-forum/wellness-program-funding-overview.pdf

Additional Wellness Related Services & Programs:

- **Wellness Consultant** – a dedicated staff member to assist employees and employers with their wellness initiatives. Examples of services provided include:

To members:

- Assist with online wellness tool issues and questions.

- Develops various challenges for participants to do through online wellness tool.

To employers:

- Conducts monthly coordinator calls with employer wellness coordinators. – see Exhibit 15
- Prepares and distributes a monthly wellness newsletter for coordinators. – see Exhibit 14
- Coordinates monthly wellness star designee on online wellness tool. – see Exhibit 13
- Conducts coordinator workshops each summer across state for wellness coordinators to attend. – see Exhibit 19Coordinates the awarding of up to 6000 points (towards $250 maximum) on the online tool for an employee's participation in the employer sponsored wellness program activities. – see Exhibit 11.

Member Education Presentations on Wellness Topics – current vendor provides two member education consultants that travel statewide to worksites and conduct presentations for employees on various wellness related topics. There are currently 11 different topics provided. See Exhibit 16 for an example.

Added Value Programs: (See exhibit 10 for other details)

- Tobacco Cessation – All currently covered state employees and their dependents age 18 and older are eligible to participate. The program provides telephone counseling and up to $700 in expenses including up to $200 for a participant's office visit and co-pays and $500 every six months for FDA-approved medications. See the following website for further details: https://www.bcbsnd.com/search-preview/-/ndpers-tobacco-cessation. This is a collaboration between the current vendor, the ND Department of Health and NDPERS.
- Prenatal Plus Program – a program designed to identify women at higher risk for premature birth and to prevent the incidence of preterm birth. See http://www.nd.gov/ndpers/forms-and-publications/publications/grp-hlth-spd-actives.pdf#page=35 for details.
- Diabetes Management – this program is offered to covered members that are diabetic. The program is coordinated with the ND Pharmacy Association. See http://www.aboutthepatient.net/patients/diabetes-info/ndpers-program-info/ for details.

Other Administrative Services – See Exhibit 10 for details

The successful vendor will also need to perform the following administrative services:

- Make payments for the NDPERS Tobacco Cessation Program https://www.bcbsnd.com/search-preview/-/ndpers-tobacco-cessation
- Make payment for the NDPERS Diabetes Program . See http://www.aboutthepatient.net/patients/diabetes-info/ndpers-program-info/ for details.
- Make payments for the NDPERS Wellness Funding Program. – see http://www.nd.gov/ndpers/insurance-plans/docs/wellness-forum/wellness-program-funding-overview.pdf for details.

NDPERS will submit enrollments via a centralized electronic system. NDPERS will collect enrollment/eligibility information which will be provided to the successful contractor on a data file that follows the HIPAA 834 file specifications. Files will be transmitted using a secure file transmission process. The successful contractor must be able to receive this data in that format and media.

Employee Assistance Program (EAP)

The mission of the Employee Assistance Program (EAP) is to provide confidential, accessible counseling and referral services to individual employees in order to restore and strengthen the health and productivity of employees and the workplace. The EAP is available to employees and their immediate family members. For more information regarding the current EAP, refer to the website: http://www.nd.gov/ndpers/eap/index.html

The selected vendor(s) are expected to cooperate as needed to ensure seamless administration and member service. NDPERS is not seeking proposals for this service as part of this RFP.

COBRA Administration

NDPERS provides COBRA continuation for terminated/retired employees in compliance with federal regulations. NDPERS administers this program. The selected vendor(s) are expected to cooperate as needed to ensure seamless administration and member service. NDPERS is not seeking proposals for this service as part of this RFP.

Workers' Compensation Program

If benefits or compensation are available, in whole or in part, under provisions of a state workers' compensation act, laws of the United States or any state or political subdivision thereof, the benefits under the Dakota Plan will be reduced by and coordinated with such benefits or compensation available.

Conversion

The 2014 ACA environment has significantly changed how conversion works. There is no longer a specific conversion product, but there is still a conversion privilege used to purchase an individual metallic plan. This conversion privilege impacts what effective date a member can sign up once employment with NDPERS ends and ensures continuous coverage for members that apply within required timeframes. Administration of the conversion privilege shall comply with any applicable federal or state law or regulation. The vendor is expected to administer all notices and transactions, including billing (where applicable), with respect to this service.

Out of Area Coverage

If a member receives care from a non-participating health care provider within the state of North Dakota, benefit payments are reduced by a certain percentage and the member is responsible for the payment reduction. If a member receives care from a non-participating health care provider outside the state of North Dakota, the allowance for covered services will be an amount within a general range of payments made and judged to be reasonable by BCBSND. The

benefits available under the Dakota Plan and Dakota Retiree Plan are also available to members traveling or living outside of the United States (subject to certain requirements such as preauthorization and prior approval). Detailed information regarding eligibility and out of area benefit levels can be found in the 2013-2014 Summary of Benefits at http://www.nd.gov/ndpers/forms-and-publications/publications/grp-hlth-spd-actives.pdf.

Open Enrollment

Dakota Plan annual open enrollment typically takes place in October/November of each year. Employees may enroll in coverage or make changes in coverage during this period. Annual open enrollment is not applicable to Non-Medicare retirees.

Current and Historical Monthly Rates and Employee Contributions

The contributions for single or family coverage for state employees are currently paid at 100% by the State. Please note that for the state, a single composite rate is used instead of the single/family rate. The contributions for employees of participating political subdivisions are at the discretion of the subdivision and subject to the minimum contribution requirements of BCBSND. The contributions for temporary employees are either at their own expense or their employer may pay any portion of the premium subject to its budget authority. Effective January 1, 2015, the following applies:

In the case of a temporary employee who is an applicable taxpayer as defined in section 36B(c)(1)(A) of the Internal Revenue Code [26 U.S.C. 36B(c)(1)(A)], the temporary employee's required contribution for medical and hospital benefits self-only coverage may not exceed the maximum employee required contribution specified under section 36B(c)(2)(C) of the Internal Revenue Code [26 U.S.C. 36B(c)(2)(C)], and the employer shall pay any difference between the maximum employee required contribution for medical and hospital benefits for self-only coverage and the cost of the premiums in effect for this coverage.

The chart below shows the current total monthly rates for NDPERS members:

Dakota Plan		Single	Family		Single	Family
Enrolled Prior to July 1, 2013						
State Program	**Grandfathered Plan**			**High Deductible Health Plan**		
July 1, 2013 – June 30, 2015	Active		$981.68	Active		$981.68
July 1, 2013 – June 30, 2015	COBRA/Part-Time/Temporary/LOA	$472.74	$1,139.34	COBRA/Part-Time/Temporary/LOA	$412.00	$992.34
Political Subdivision	**Grandfathered Plan**			**NonGrandfathered Plan**		
July 1, 2013 – June 30, 2015	Active/COBRA	$505.06	$1,220.22	Active/COBRA	$512.74	$1,238.76
Non Medicare Retirees	**Grandfathered Plan**					
July 1, 2013 – June 30, 2015	Non-Medicare Retirees	$709.10	$1,418.20			
	Family 3+		$1,772.74			
Enrolled On or After July 1, 2013						
Political Subdivision	**Grandfathered Plan**			**NonGrandfathered Plan**		
July 1, 2013 – June 30, 2014	Active/COBRA	$501.00	$1,210.80	Active/COBRA	$512.14	$1,237.72
July 1, 2014 – June 30, 2015		$529.28	$1,279.40		$541.06	$1,307.84

Dakota Retiree Plan		Single	Family
Enrolled Prior to July 1, 2013			
July 1, 2013 – June 30, 2015	Medicare Eligible	$221.24	$439.72
	One Medicare/One Non-Medicare		$609.40
Enrolled On or After July 1, 2013			
July 1, 2013 – June 30, 2014	Medicare Eligible	$222.16	$441.50
	One Medicare/One Non-Medicare		$573.38
July 1, 2014 – June 30, 2015	Medicare Eligible	$227.00	$451.22
	One Medicare/One Non-Medicare		$636.24

Note: The retiree plan rates are a composite of the PDP premiums and medical premiums.

Age/Gender Statistics

Appendix E – Item 1 displays a breakdown of the member counts by age and gender for the period May 2014.

Contract Count

Appendix E – Item 2 displays a breakdown of the contract counts by month and cost category for the period of 1/2011 – 5/2014.

Member Count

Appendix E – Item 3 displays a breakdown of the member counts by month and cost category for the period of 1/2011 – 5/2014.

Claims Volume

Appendix E – Item 4 displays a breakdown of the total claims transactions by month and cost category for the period of 1/2011 – 5/2014.

Claims Dollars

Appendix E – Item 5 displays a breakdown of the total claims plan paid dollars by month and cost category for the period of 1/2011 – 5/2014.

Large Claim History

Appendix E – Item 6 displays a high level summary of unique members with plan paid dollars in excess of $100,000 for the period of 7/1/12 – 6/30/13 and 7/1/13 – 5/30/14.

Contracts by Zip Code

Appendix E – Item 7 displays a breakdown of the contract counts by residence zip code for the period May 2014.

II. RFP Objectives and Vendor Responsibilities

RFP Objectives

North Dakota Public Employees Retirement System ("NDPERS") is soliciting proposals for the administration of its employee medical and prescription drug insurance plan, with a July 1, 2015 effective date. Responses are required for the self-insured financial arrangement as described in this RFP. Proposals will be accepted for vendors that are capable of offering a statewide provider network, utilization management, disease management, wellness program, pharmacy benefit manager services along with other related services. In addition, the successful vendor will provide an HSA product for the HDHP. Approximately 23,000 active employees and 8,000 retirees are eligible to participate in these plans. Total membership in the plan is approximately 65,000 individuals.

A separate RFP requesting fully-insured administration of the same plans and programs was distributed on July 9, 2014. In order for a self-insured arrangement to be elected (NDCC 54-52.1-04.3), it must be determined to be less costly than the lowest bid submitted by a carrier for underwriting the plan with equivalent contract benefits on a fully insured basis. Based upon this legislative direction, the Board is issuing this self-insured plan RFP and will be reviewing the responses from the fully insured proposals first to determine which fully insured bid to compare to the self-insured bids when submitted.

Requested Bids

Fully Insured (First RFP released July 9, 2014)

- All services
- All services except pharmacy

Self-insured (This RFP)

- All services
- Pharmacy only

The contract will be for a four year term with two year renewals, beginning July 1, 2015 through June 30, 2017.

NDPERS is interested in providing high quality, comprehensive and affordable health care to all of its employees and their dependents. The intent of this RFP is to identify and evaluate the proposals that meet the minimum requirements as defined, and select one vendor that will support the program goals and objectives. Current goals and objectives include, but are not limited to, the following:

- **Competitive Overall Cost** – NDPERS intends to continue to provide its employees and retirees with comprehensive health care that is affordable and competitive. NDPERS is especially interested in stabilizing or controlling costs and increases to both the employer and employees. To accomplish this, it is interested in competitive administrative and program fees and competitive provider reimbursement arrangements.

- **Transparent PBM.** NDPERS is interested in evaluating financial arrangements based on the traditional approach to PBM pricing and pricing under a transparent arrangement. "Traditional" financial proposals should include guaranteed effective rate discounts, as well as specific fees and guaranteed rebate dollar amounts. "Transparency" for purposes of this Request for Proposal is defined as a full pass through to NDPERS of all monies paid to the PBM arising from all contracted arrangements as well as elimination of spread pricing. When answering questions and completing exhibits related to your financial proposal, please indicate if your answer would differ under a transparent or a traditional pricing arrangement. NDPERS will give preference to transparent proposals.

- **Replication of existing coverage.** NDPERS is interested in replicating the existing coverage (http://www.nd.gov/ndpers/forms-and-publications/publications/grp-hlth-spd-actives.pdf) for four years, subject to a two year renewal including having a PDP and an HSA . In addition, NDPERS is requesting the effect on expected plan costs or premium-equivalents for the following benefit plan changes expressed as a percentage change:

  - Annual Premium Reductions to change deductible from $400 single/$1,200 family to $450 single/$1,350 family.
  - Annual Premium Reductions to change deductible from $400 single/$1,200 family to $500 single/$1,500 family
  - Annual Premium Reductions to change coinsurance maximum from $750/$1,500 to $900/$1,800 in network and $1,250/$2,500 to $1,500/$3,000 out of network
  - Annual Premium Reductions to change coinsurance maximum from $750/$1,500 to $1,050/$2,100 in network and $1,250/$2,500 to $1,750/$3,500 out of network
  - Annual Premium Reduction for a $5 increase in office visit copay
  - Annual Premium Reduction for a $10 increase in office visit copay
  - Annual Premium Reduction for a $10 increase in emergency room copay.
  - Annual Premium Reduction for a $25 increase in emergency room copay
  - Annual Premium Reductions to change Rx formulary Generic copay from $5 to $10 copay
  - Annual Premium Reductions to change Rx formulary Generic copay from $5 to $7.50 copay
  - Annual Premium Reductions to change Rx Formulary Brand copay from $20 to $25 copay

- Annual Premium Reductions to change Rx Formulary Brand copay from $20 to $22.50 copay

- Annual Premium Reductions to change Rx Non-Formulary copay from $25 to $30 copay

- Annual Premium Reductions to change Rx Non-Formulary copay from $25 to $27.50 copay

- Annual Premium Reductions to change Rx Formulary coinsurance maximum from $1,000 to $1,200.

- Annual Premium Reductions to change Rx Formulary coinsurance maximum from $1,000 to $1,500

- Annual Premium Increases to provide coverage for colonoscopy pursuant to the appropriate national standards

- **Comprehensive, Statewide Provider Network –** NDPERS is interested in the following:

- Broad network in terms of the number (%), breadth, quality and location of network providers, with the goal of matching as close as possible the current provider networks and geographic access.

- Limited doctor/patient disruption – NDPERS is interested in limiting the disruption employees may experience in the event of a change in vendors. (see Appendix I.)

- Access to preferred providers outside the local geographic service area (national).

- Ability of the vendor to negotiate NDPERS-specific contracts.

- The ability to match or exceed existing discount levels

- Commitment to pay for performance and other cost and quality initiatives.

- **Plan Design –** with respect to plan options and design, NDPERS is interested in:

- Confirming the vendor's previous experience with and ability to administer the current plan designs.

- Continuing to provide employees with choice and flexibility at an affordable cost.

- Ability to administer existing Medicare Part D Group PDP plan.

- **Disease and Other Care Management Programs** – NDPERS wishes to continue to offer assertive disease management, care management and care support programs as part of the overall health care program, and is interested in exploring innovative, positive incentives for participation in these programs. Vendors must demonstrate

their ability to report and provide meaningful, interpretive data to better support the disease and other care management programs.

- **Health Improvement, Education and Wellness Programs** – NDPERS is interested in partnering with its vendors to offer the same or similar program. Our existing program also links to the NDPERS employer based wellness program and this should also be supported. Please refer to http://www.nd.gov/ndpers/insurance-plans/employer-based-wellness.html for details on this program. NDPERS also wishes to maintain a dedicated wellness staff member with the successful vendor who will work with our worksite wellness coordinators. The successful vendor must provide this resource.

- **Retiree Coverage –** provide the same levels of coverage to our Medicare retirees.

Vendor Responsibilities

The selected vendor must demonstrate the ability to develop and manage a health care provider network, provide claims processing services, utilization management, medical management, disease management, wellness program, dedicated account service and support, dedicated member/customer service, data/management reporting, billing, appeals process and other administrative services. Vendors should also adjudicate and resolve Medicare Secondary manner and reconcile Medicare D eligibility and premium discrepancies. (See Exhibit 8)

In addition, vendors are expected to conduct ongoing performance review meetings with NDPERS regarding plan financial performance, provider contracting issues, progress related to network goals and new network development, patient satisfaction, new or emerging legal issues, and other relevant and timely operational issues that may affect the plan. Vendors are to identify actions to enhance that performance.

Additional details regarding expected health plan administrator duties can be found in Appendix A – Minimum Contract Provisions of this RFP and Appendix G. Vendors must review these sections carefully to identify how you would provide current contract benefits and what contracting provisions you could agree to, while maintaining the minimum requirements specified in Section III – Proposal Content outlined below. A sample ASA must be included with the proposal in Appendix F. Specific responses are needed for the analysis of “equivalent contract benefits”. In addition the board will consider other information.

The proposed effective date of the program is July 1, 2015, except the PDP, that effective date is January 1, 2016. Vendors will have the opportunity to demonstrate capabilities in these areas by responding to the questionnaire provided in Appendix C of this RFP and potentially with additional finalist questions and presentations.

III.Proposal Content

This section describes minimum requirements, unique content requirements, and outlines general conditions and requirements that are not specifically addressed in the Minimum Contract Provisions in Appendix A. Review the general conditions and requirements carefully, and include any deviations and exceptions to these with your submission as described in this section and elsewhere in the RFP. Also refer to Section IV., Proposal Submission, for instructions and additional information regarding proposal format and content.

Required Forms

The following forms can be found in Appendix B, Response Template, of this RFP.

1. Face Sheet – This is included in Appendix B, Item 1.

2. Minimum Requirements for Administrative Services Checklist – This is included in Appendix B, Item 2.

3. Affidavit of Non-collusion – Each responder must complete the Affidavit of Non-collusion form and include it with the response. This is included in Appendix B, Item 3.

4. Conflicts of Interest list. Responder must provide a list of all entities with which it has relationships that create, or appear to create, a conflict of interest with the work that is contemplated in this Request for Proposals. The list should indicate the name of the entity, the relationship, and a discussion of the conflict. This is included in Appendix B, Item 4.

5. Compliance with Federal and State Laws Form – Responder must provide certification to NDPERS that they comply or if notified will comply with applicable Federal and State laws. This is included in Appendix B, Item 5.

6. Location of Service Disclosure Certification. Proposers must certify the location where services to be provided will be performed, and agree that the location will not change during the course of the contract without prior written approval from NDPERS. This is included in Appendix B, Item 6.

Unique Content Requirements

1. Medical Questionnaire - This is included in Appendix C.

2. Cost proposal - This is included in Appendix D.

3. Deviations and suggested alternatives to Minimum Contract Provisions – This is included in Appendix F, Item F1.

   Responders should review in detail the minimum contract requirements and conditions provided in Appendix A.

   If you take exception to any of the terms, conditions or language , you must indicate those exceptions and suggest alternative language in your response to the RFP by

submitting Appendix F certain exceptions may result in your proposal being disqualified from further review and evaluation. Only those exceptions indicated in your response to the RFP will be available for discussion or negotiation.

4. Deviations to other RFP requirements. This is included in Appendix F, Item F2.

5. Summary/checklist of specific items identified as trade secret.

   All materials submitted in response to this RFP will become property of NDPERS and will become public record, after the evaluation process is completed. Completion of the evaluation process occurs when the government entity has completed negotiating the contract with the selected vendor. If the Responder submits information in response to this RFP that it believes to be propriety or trade secret materials the Responder must:

   a. Clearly mark each provision that respondent believes to be proprietary or trade secret materials in its response at the time the response is submitted,

   b. Include a statement with its response justifying the proprietary or trade secret designation for each provision.

      Responder is put on notice that, except for information that is confidential or otherwise exempt from the North Dakota open records law (NDCC § 44-04), NDPERS must disclose to the public upon request any records it receives from Responder. If NDPERS receives an open records request for information that has been identified by respondent as proprietary or trade secret, NDPERS will review the above information submitted by Responder and may also contact Responder for additional input regarding the nature of those records, but NDPERS will be solely responsible for making the ultimate determination of whether the records are open or exempt. All information that has not been clearly identified by respondent as being proprietary or trade secret will be deemed to be open record. NDPERS will not consider the prices submitted by the Responder to be proprietary or trade secret materials.

6. Appendix G: Existing Contract Benefits

7. Appendix H: Performance Standards and Guarantees

8. Appendix I: Disruption Analysis

9. Appendix J: Fee Schedule Analysis

10. Appendix K: Suggested General Conditions and Requirements

11. Appendix L: Pharmacy Questionnaire

12. Appendix M: Sample Business Associate Agreement

13. Appendix N: Pharmacy Experience

1. Proposal Contents

By submission of a proposal, Responder warrants that the information provided is true, correct and reliable for purposes of evaluation for potential contract award. The submission of inaccurate or misleading information may be grounds for disqualification from the award. The contents of the proposal and any subsequent clarifications submitted by the successful proposers will become part of the contractual obligation and incorporated by reference into the ensuing contract.

The proposal that you submit will constitute your unqualified consent to the following mandatory requirements:

- Proposals submitted in response to this request will be considered the only submission; revised proposals will not be allowed after the proposal return date and time unless requested by NDPERS or approved by the NDPERS Board.
- All proposals must answer all applicable questions on the attached questionnaire.
- All proposals become the property of NDPERS and will not be returned to the offering company. Also all information provided is a public record under North Dakota unless specifically exempted by law.
- All offering companies must be prepared to make finalist presentations and allow site visits..

2. Term of Contract

The North Dakota Public Employees Retirement System is governed by North Dakota State statutes, which includes a requirement to solicit bids for medical benefits coverage for a specified term for a fully-insured arrangement and every other biennium for an Administrative Services arrangement. NDPERS has determined that the specified term for providing such hospital and medical benefits under a self-insured arrangement shall be four years to include two biennium periods: July 1, 2015 to June 30, 2017and July 1, 2017 to June 30, 2019. This contracting period is set in NDCC 54-52.1-04.2

If the plan is awarded as a self-insured plan pursuant to this RFP, NDPERS and the successful proposer(s) may renegotiate the existing contract during the interim biennium without resorting to a formal bidding process. If the NDPERS and the successful proposer(s) are unable to reach an agreement during renegotiations, a formal bidding process will be initiated. Negotiations will begin in June and end in September in the final fixed year of the biennium. NDPERS also reserves the right to terminate any contract awarded pursuant to this bidding process within thirty (30) days notice.

3. Minimum Requirements

The following are the minimum requirements that need to be addressed in each proposal and apply unless waived by the board:

1) Electronic Data Collection and Reporting Requirements: Respondents must, at a minimum, meet the data collection and reporting requirements described in Section 1 under Reporting Requirements of the RFP.

2) Vendor must be able to take current 834 electronic enrollment file (containing member eligibility) at no cost.

3) Effective Date of Coverage: Respondents must be able to provide required coverages and services by July 1, 2015 and for the PDP by January 1, 2016.

4) Licensure: Respondents must have all applicable licenses required by North Dakota or agree to obtain necessary licensure prior to the effective dates of coverage.

5) Term of Contract: NDPERS is required by state statute to solicit bids for medical benefit coverage for a specified term for a fully-insured arrangement and every other biennium for a self-funded arrangement (i.e., 4-year contract with a renewal after 2 years). .NDPERS reserves the right to extend the agreement subject to negotiation with the successful vendor if the board deems it necessary.

6) Rate Guarantees: For all proposals, premium rates and administrative fees must be guaranteed for a period of two years, from July 1, 2015 to June 30, 2017. PDP rates will be developed each year based upon the federal subsidy.

7) Recommended PDP rates: Must be submitted to NDPERS end of September of each year.

8) Renewals: Renewals must be submitted to NDPERS in August of the year preceding the contract renewal date and in September of each year for the PDP.

9) Contract Termination: Respondent's contract termination provision may not require more than 120-day notice and can occur only at renewal. NDPERS can terminate coverage at any time.

10) Replicate coverage: Respondent should replicate the existing coverage for two years, including providing an HSA arrangement. Variances and exceptions to existing coverage can be offered in Appendix F item F2.

11) Legislative Compliance: Respondents agree to comply with all provisions of the Health Insurance Portability Act of 1996 including, but not limited to providing certificates of creditable coverage.

    Respondents must also be in compliance with all HIPAA Privacy and HIPAA EDI requirements and be able to conduct all applicable employer/plan sponsor and provider transactions consistent with those requirements. Respondents will be expected to meet HIPAA security requirements when applicable to NDPERS. Respondents will also be expected to be in compliance with all ACA requirements

12) Transition Management: Respondents agree, should they be selected, they will proactively manage the transition of coverage (e.g. claim accumulators, etc.) from the current carrier.

13) Administration: Respondents must agree to comply with existing administration of NDPERS. Any modifications needed to accommodate NDPERS data will be done at the vendor's own expense.

14) Audit: Section 54-52-04 (10) relating to the audit authority of NDPERS.

15) North Dakota Legislation Requirements: Respondent must meet all requirements in the North Dakota Century Code including 54-52; 54-52.1, 54-52.4 and all requirements in the North Dakota Administrative Code including 71-03 and other applicable State Laws. Specific recognition of 54-52.1-12 should be acknowledged.

16) Ability to meet the specifications outlined in the RFP unless specifically noted.

17) Premium rates must be divisible by two.

18) Subject matter experts and other appropriate personnel will be available to attend board meetings, legislative hearings, etc. as needed.

IV. Proposal Submission

Instructions

All proposals should be submitted simply and economically providing a direct, concise delineation of the vendor's proposal and qualifications adhering to the proposal format guidelines outlined below. Vendors should also refer to Section III, Proposal Contents, for a list of minimum requirements.

- Proposals should be typed or printed on 8.5" x 11" paper (one side only).
- All proposals must include the transmittal letter/statement which includes the following:
  - An acknowledgement of receipt of the group health RFP specifications and any addenda and a statement that the proposal conforms to the RFP minimum requirements. This letter must include the title and signature of a Duly Authorized Officer of the company. As noted above, any deviations from the specifications must be clearly noted in your proposal. Failure to note deviations may exclude the proposal from further consideration.
- All proposals must include a table of contents and appropriate page number references.
- All pages of proposals must have consecutive page numbers.
- Proposals must respond to RFP minimum, unique, and general requirements.
- Responses to questions must include a restatement of the question (number and text) with the response immediately following.
- Appendices and other supplemental information provided with your proposal must be clearly identified.
- Cost proposal must be submitted in a separate, sealed envelope and clearly marked, "Cost Proposal". Administrative fees and stop loss premiums quoted in Appendix D: Cost Proposal Exhibits will be all-inclusive. NDPERS will not be billed any additional amounts for services, including commissions or brokerage fees.
- North Dakota insurance law 54-52.1-10 (Exemption From State Premium Tax) provides that "All premiums, consideration for annuities, policy fees, and membership fees collected under this chapter are exempt from the tax payable pursuance to section 26.1-03-17". Thus, Offeror's responses should not reflect any amounts for premium taxes.
- Any and all deviations must be clearly noted and submitted under separate cover. If you do not identify and explain deviations, your proposal will be deemed a certification that you will comply in every respect with the requirements and contractual language set forth in this RFP. Deviations and exceptions to the Minimum Contract Provisions in Appendix 1 must be submitted in the form of 1) completed Appendix F, Item F1, in a sealed envelope clearly marked as such. If you are unable to perform any required or requested service, you must also clearly identify in Appendix F, Item F2 a) the specific deviation or requirement your organization is unable to meet and b) the suggested alternative or solution.

Proposal Format and Contact Information

Vendors must use the response template/questionnaire provided in Appendices B, C D and G in preparing proposals. Proposals should be submitted in two parts, with the cost proposal and deviations separate from the qualitative proposal in a clearly marked, sealed envelope (submitted to Deloitte Consulting only). Proposals will be sent to two parties, as described below

Vendors are required to submit one (1) unbound original and ten (10) paper copies of the ***qualitative proposals*** along with one (1) electronic copy to:

Cheryl Stockert
Manager, Administrative Services
North Dakota PERS
400 East Broadway
Suite 505
Bismarck, ND 58502

An electronic copy (on CD) of your entire qualitative proposal must be included with the hard copy original. Late proposals will not be considered unless approved by the board.

Two (2) hard copies and one full electronic copy (on CD) of the qualitative proposal and a separate, clearly marked envelope containing Two (2) hard copies and one electronic copy of the cost proposal and deviations must be submitted to:

Josh Johnson
Manager
Deloitte Consulting LLP
50 South 6th Street
Suite 2800
Minneapolis, MN 55402

***PLEASE NOTE*:** As indicated above, vendors must separate the cost proposal and deviations from the rest of the proposal and submit two paper copies and one electronic copy in a sealed envelope clearly marked "**Cost Proposal for NDPERS for Health Plan Vendor**", along with your organization's name, to Josh Johnson at Deloitte Consulting at the address listed above. Vendors must submit hard and electronic copies of the entire proposal.

From the date of issuance until the announcement of the finalist, vendors should only contact the Deloitte RFP coordinator, Josh Johnson. All correspondence and questions must be submitted in writing via e-mail to the RFP coordinator in accordance with the timeline set forth in this RFP. NDPERS personnel are not authorized to discuss this RFP with vendor; doing so may result in disqualification. Vendors may continue to communicate with NDPERS staff regarding other relevant business matters.

Questions and Answers

Vendors must submit questions in writing via e-mail to Josh Johnson at jkjohnson@deloitte.com ***by 5:00 p.m. CT on September 15th, 2014***. Answers will be summarized and distributed to all vendors who have requested the RFP via email no later than close of business on September 24th, 2014 as well as posted on the NDPERS website. *Telephone inquiries will not be accepted.*

Vendor Conference

A vendors' conference will be held in Bismarck on September 4, 2014 at **the North Dakota Association of Counties Building at 1661 Capital Way from 1:00 – 3:00** or until all questions have been submitted. Bidders may attend in person or call in to 701-328-9754 the day of the conference. The phone number will be activated at 12:55 p.m. central time. Anyone calling in must identify themselves for everyone in the room. Expenses incurred by vendors to participate in the vendors' conference, either in person or by voice, are the responsibility of the vendor and will, under no circumstances, be reimbursed by NDPERS. Those who elect to participate via teleconference must understand that no accommodation will be made in the event of lost connectivity on their part for poor audio quality, for missed questions asked at the conference, etc. Other than for publishing questions and final answers, no follow-up meeting or broadcast will be made to accommodate or rectify any shortcomings in the teleconference format. Questions and answers will be posted to the NDPERS website by September 24, 2014.

Proposal Deadline

All proposals must be received by Josh Johnson ***by 5:00 p.m. CT on October 10, 2014.*** Late proposals will not be considered.

Proposed Timetable

The timeline is provided below for informational purposes. NDPERS reserves the right to change the dates. Every effort will be made to notify vendors of changes to the proposed timeline.

Activity	**Date/Time (All Times in CT)**
NDPERS publishes Request for Proposal (RFP)	August 13, 2014
Vendor Conference	September 4, 2014
Vendor questions (in writing) due	September 15, 2014 (5 pm)
NDPERS distributes answers to vendors' questions	September 24, 2014
Proposals due	**October 10, 2014 (5 pm)**
Finalist presentations (if requested)	TBD
NDPERS notifies finalist of intent to negotiate	TBD December 2014
Contractor and NDPERS complete negotiations	TBD Jan/Feb 2015

Contractor and NDPERS begin implementation	March 2015
Contractor(s) begins providing services	July 1, 2015

V. Proposal Review and Evaluation

Rights of NDPERS

This RFP does not obligate NDPERS to complete the proposed project. NDPERS reserves the right to cancel the solicitation if it is considered to be in its best interest. Costs incurred for developing a proposal are the sole responsibility of the vendor. NDPERS also reserves the right to:

1. Reject any and all proposals received in response to this RFP.
2. Amend and re-issue this RFP.
3. Select proposals for contract award or for negotiations other than those with the lowest cost.
4. Consider a late modification of a proposal if the proposal itself was submitted on time, if the modifications were requested by the State, and if the modifications make the terms of the proposal more favorable to the State.
5. Determine that a deficiency is not substantive and waive the deficiency as immaterial. However, waiver of the deficiency shall in no way modify the RFP documents or relieve the vendor from full compliance with the terms of the contract if the vendor is awarded the contract.
6. Negotiate any aspect of the proposal with any vendor and negotiate with more than one vendor at the same time.
7. Use any or all ideas presented in any proposal received in response to this RFP, unless the vendor presents a positive statement of objection in the proposal. Objections will be considered as valid only relative to proprietary information of the vendor and so designated in the proposal. Exceptions to this are ideas that were known to NDPERS before submission of such proposal or properly became known to NDPERS thereafter through other sources or through acceptance of the proposal.

Selection Team

A review team made up of NDPERS staff and its hired consultant will evaluate all proposals. The NDPERS Board will make the final decision on the award. NDPERS reserves the right to alter the composition of this selection team and its responsibilities.

Proposal Review and Evaluation Criteria

Proposals will be reviewed and evaluated using multiple evaluation criteria. The cost proposal will be reviewed independently to ensure that it is complete and submitted in the format requested. In reviewing the proposals the requirements in NDCC 54-52.1-04 will be considered.

Phase I Preliminary Review Criteria

Proposals will initially be evaluated to determine if they comply with the following minimum requirements:

- Completeness of proposal, including minimum vendor requirements, unique content requirements, and general requirements as outlined in Section III., Proposal Content, and submitted in the format designated in Appendices B through F.
- Completeness and quality of responses to questionnaire provided in Appendix C and completeness of cost proposal provided in Appendix D.
- Extensive statewide provider network which provides access to key population areas within the State.

Phase II Evaluation Criteria

Proposals that have met the minimum requirements criteria listed above will then be reviewed based on the factors contained in the table below:

Phase II Evaluation Criteria
1. Ability to comply with terms outlined in the RFP and Board evaluation criteria
2. Equivalent Contract Benefits (Appendix G) including the following. 2a. Organizational experience and staff qualifications/experience – Dedicated unit comprised of account management team, customer service, provider relations, and provider contracting – Access to senior leadership team – Ability to respond to unique challenges with solution-focused flexibility and innovation – Client references – Financial stability and solvency 2b. Plan Design 2c. Provider network capabilities – Similar or greater number of providers in contract network – Similar or greater level of discounts – State-specific contracts – Quality initiatives – Contractual terms – Increase number of network providers

Phase II Evaluation Criteria
2d. Quality and comprehensiveness of health population, disease management, and health education and wellness programs – Utilization/case management capabilities – Quality initiatives – Ability to present appropriate innovative cost control strategies – Ability to support NDPERS employer based wellness program and employee wellness initiatives – Dedicated staff member for wellness program 2e. Cost of requested services and return on investment – Value of provider reimbursement discounts – Administrative fees – Care, disease management, and health improvement programs – Medicare Part D Group PDP Offering – Rx rebates
3. General Statutory Criteria (NDCC 54-52.1-04) – The economy to be affected. – The ease of administration. – The adequacy of the coverages. – The financial position of the carrier, with special emphasis as to its solvency. – The reputation of the carrier and any other information that is available tending to show past experience with the carrier in matters of claim settlement, underwriting, and services
4. Specific Statutory Critieria (NDCC 54-52.1-04.3 & 54-52.1-04.3)* - The board may establish a self-insured plan only if it is determined to be less costly than the lowest bid submitted by a carrier for underwriting the plan with equivalent contract benefits (appendix G will be one key source used in making this assessment) - In determining cost for self-insurance the board is required in statute to establish a plan to fund the reserve requirements in 54-52.1-04.3 within sixty months

* **Self insurance Reserve Requirement (54-52.1-04.3 NDCC)**

1. The board shall establish under a self-insurance plan a contingency reserve fund to provide for adverse fluctuations in future charges, claims, costs, or expenses of the uniform group insurance program.
2. The board shall determine the amount necessary to provide a balance in the contingency reserve fund between one and one-half months and three months of claims paid based on the average monthly claims paid during the twelve-month period immediately preceding March first of each year.
3. The board also shall determine the amount necessary to provide an additional balance in the contingency reserve fund between one month and one and one-half months for claims incurred but not yet reported.
4. The board may arrange for the services of an actuarial consultant to assist the board in making these determinations
5. Upon the initial changeover from a contract for insurance pursuant to section 54-52.1-04 to a self-insurance plan pursuant to section 54-52.1-04.2, the board must have a plan in place which is reasonably calculated to meet the funding requirements of this chapter within sixty months.

Preference Criteria

Preference Criteria will be applied by the board in the final evaluation of proposals as determined by the board.

PBM

NDPERS is interested in evaluating financial arrangements based on the traditional approach to PBM pricing and pricing under a transparent arrangement. "Traditional" financial proposals should include guaranteed effective rate discounts, as well as specific fees and guaranteed rebate dollar amounts. "Transparency" for purposes of this Request for Proposal is defined as a full pass through to NDPERS of all monies paid to the PBM arising from all contracted arrangements. When answering questions and completing exhibits related to your financial proposal, please indicate if your answer would differ under a transparent or a traditional pricing arrangement. NDPERS will give preference to transparent proposals.

Proposals will be accepted from PBMs on a stand-alone basis (i.e. response to the medical portion is not required). The questionnaire and cost proposals must be completed as they are applicable to the PBM. A questionnaire specific to Rx can be found in Appendix L in a separate attachment.

After PBM Contestants' RFP Responses are received, NDPERS may be drafting and providing to PBM Contestants a proposed PBM / NDPERS contract. If this occurs, PBM Contestants will be expected to review the proposed contract and provide requested pricing terms and guarantees in that contract.

Transparent "Pass Through" Pharmacy Contract:

- Retail discounts and dispensing fees are 100% pass through
- No spread pricing
- Bidder may assess an administration fee if appropriate
- Mail service terms reflect a standard "traditional" proposal where discounts are fixed

Bidder will pass through 100% of rebates and "rebate-like" revenues received from pharmaceutical manufacturers,defined as all revenue/financial benefits and credits received from outside sources attributed to the utilization of NDPERS or enrollment in programs. These would include but are not limited to all Manufacturer Administration Fees, Formulary Access Rebates (inclusive of any bundling), Market Share Rebates, Performance/Incentive Rebates, Data Fees, Compliance Program Funding, Clinical Program support/funding, Therapeutic Intervention funding, Education Fees, Marketing Grants for Clinical Studies, Specialty Drug Rebates, Specialty Clinical/Case Management Funding, Specialty Compliance Program funding, Research, Prompt Payment Discounts, etc.as a consequence of any relationship with NDPERS. Bidder will also include minimum rebate guarantee, preferably on a per paid claim basis (per brand basis may is also acceptable, however per rebatable claim basis is not acceptable).

Audit

NDPERS is also interested in being able to audit the PBM as determined by the board which could be annually. Preference will be given to those who agree to audits.

Proposal Evaluation Process

Evaluation of the proposals will be conducted in four phases:

1. **Phase I — Preliminary Review**
   Proposals will receive preliminary review to determine if they meet the minimum proposal requirements and criteria listed above. NDPERS reserves the right to ask clarifying questions. Only proposals meeting the minimum requirements above will be considered for further evaluation in Phase II.

2. **Phase II — Proposal Evaluation**
   Proposals will be evaluated based on the criteria specified above and per the terms outlined in this RFP. Proposers are encouraged to highlight how they differentiate themselves in these areas and provide this information in appendix K. Only the top proposals will be approved for further evaluation in Phase III. Once the initial evaluation is completed, the review team may ask for additional information to supplement the initial information gathered in response to these questions.

3. **Phase III – Reference Checks, Best and Final Offer and Presentations**
   NDPERS staff may check references, request answers to further questions, and require presentations by key administrator personnel, which will be evaluated based on the stated criteria. During final consideration a best and final offer may be requested. Only the top proposals will be approved for further evaluation in Phase IV.

4. **Phase IV – Site Visits, Final Selection, and Notification**

   The evaluation committee will forward findings and conclusions to the NDPERS Board and may request site visits and make a final review of the top proposals based on all of the criteria above to select a finalist. Vendors will be notified of the intent of NDPERS to negotiate a contract with the selected vendors via e-mail.

   Note: Self-insured proposals will be evaluated after the fully insured bids to determine which contract type is expected to be most cost effective for NDPERS. .

   NDPERS reserves the right to request clarifications and additional information regarding the proposal during the proposal evaluation process. However, NDPERS Board reserves the right to make an award without further clarification of the proposal received. Therefore, it is important that each proposal be submitted in the most complete manner possible.

VI. Appendices

Appendix A: Minimum Contract Provisions

Appendix B: Response Template

Appendix C: Questionnaire

Appendix D: Cost Proposal Exhibits

Appendix E: Program Information/Data

Appendix F: Proposal Deviations

Appendix G: Existing Contract Benefits

Appendix H: Performance Standards and Guarantees

Appendix I: Disruption Analysis

Appendix J: Fee Schedule Analysis

Appendix K: Suggested Changes to Plan Design, Programs and Services

Appendix L: PBM Questionnaire

Appendix M: Sample Business Associate Agreement

Appendix N: Pharmacy Experience

VII. Exhibits

E1 Healthy Blue Overview
E2 Health Club Credit Overview
E3 Health Mandate Cost Fiscal Note
E4 Quarterly Executive Summary
E5 Annual Executive Summary
E6 Monthly Financial Report
E7 Annual Claims Audit
E8 MSP Data Match Compliance
E9 2015 – 2017 NDPERS Plan Options
E10 Memorandum of Understanding for Value added programs
E11 Wellness Program Voucher
E12 Wellness Challenge
E13 Wellness Star
E14 Monthly Newsletter for Wellness Coordinators
E15 Wellness Coordinator Call
E16 Member Education Presentations
E17 Enrollment/disenrollment Medicare Part-D Exception Report
E18 Monthly Enrollment Report
E19 Wellness Coordinator Workshop Agenda

I. Appendices

Appendix A: Sample Existing Contract/Administrative Services Agreement

Appendix B: Response Template

Appendix C: Questionnaire

Appendix D: Cost Proposal Exhibits

Appendix E: Program Information/Data

Appendix F: Proposal Deviations

Appendix G: Existing Contract Benefits

Appendix H: Performance Standards and Guarantees

Appendix I: Disruption Analysis

Appendix J: Fee Schedule Analysis

Appendix K: Suggested Changes to Plan Design, Programs and Services

Self-Insured includes the following additional appendices:

Appendix L: PBM Questionnaire

Appendix M: Sample Business Associate Agreement

North Dakota Public Employees Retirement System

July 1, 2013 through June 30, 2015

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ADMINISTRATIVE SERVICE AGREEMENT

This Administrative Service Agreement ("Agreement") is entered into between North Dakota Public Employees Retirement System (NDPERS) ("the Plan Sponsor"), North Dakota Public Employees Retirement System (NDPERS) ("the Plan Administrator") and Blue Cross Blue Shield of North Dakota ("BCBSND") the terms of which are as follows:

The Plan Sponsor has established and maintains a fully insured group health plan (the Plan) which provides, among other things, various benefits to Members in the Plan, as set forth in the Certificate of Insurance provided to plan Members. The Plan Administrator is the administrator of the Plan established through this Agreement.

In consideration of payment of required premium and acceptance of membership applications, BCBSND enters into this Agreement with the Plan Sponsor and the Plan Administrator. BCBSND agrees to provide plan Members the benefits set forth in the Certificate of Insurance, in accordance with its terms and conditions. This Agreement also includes the Certificate of Insurance, membership applications, Identification Cards, Benefit Plan Attachments and any endorsements, supplements, attachments, addenda or amendments.

1. EFFECTIVE DATE AND PLAN YEAR

This Agreement is effective July 1, 2013 through June 30, 2015, unless terminated as provided.

For the purposes of the costs of any and all benefits and services extended through this Benefit Plan, including the implementation of any benefit changes required under federal or state law, the Plan Administrator agrees that the Plan Year shall commence on July 1, unless it is terminated by one of the parties as specified in Section 8. TERM AND TERMINATION OF AGREEMENT.

2. DEFINITIONS

This section defines the terms used in this Agreement. These terms will be capitalized throughout this Agreement when referred to in the context defined.

A. **BENEFIT PAYMENTS** - payments of benefits under the Plan.

B. **CERTIFICATE OF CREDITABLE COVERAGE** - a certificate disclosing information relating to an individual's creditable coverage under a health care benefit program for purposes of reducing any preexisting condition waiting period imposed by any group health plan coverage.

C. **CLAIM** - notification in a form acceptable to BCBSND that service has been provided or furnished to a Member.

D. **DRG** - shall mean diagnostic related groups.

E. **DATA AGGREGATION** - the combining of Protected Health Information that BCBSND creates or receives for or from the Plan and for or from other health plans or health care providers for which BCBSND is acting as a business associate to permit data analyses that relate to the Health Care Operations of the Plan and those other health plans or providers.

F. **FEES AND CHARGES** - the amounts the Plan Administrator must pay BCBSND for the administrative services described in Section 6. FEES AND CHARGES.

G. **HEALTH CARE OPERATIONS** - any of the activities of a health plan to the extent the activities relate to functions that make it a health plan.

H. **HEALTH CARE PROVIDER** - any eligible provider that has provided care, diagnosis, or treatment to or for a Member for which benefits are sought under the Plan.

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I. **INELIGIBLE PERSON** - any person, firm, or corporation that has received benefits or on whose behalf benefits have been paid but for whom benefits are not payable under the terms of the Plan.

J. **MEMBER** - the Subscriber and any dependent of a Subscriber or any other person designated by a Subscriber or by the terms of the Plan who is or may become entitled to a benefit under the Plan. The term shall also include any proprietor, partner, or owner of the Plan Sponsor, if any, who is designated by the terms of the Plan who is or may become entitled to a benefit under the Plan. In no case shall the term Member include any person not otherwise entitled to coverage under the terms of the Plan.

For the purposes of determining the various benefits and restrictions or other limitations thereto made available to a Member under the terms of this Agreement, all benefits under any Plan option or tier (and any restrictions or other limitations thereto) made available to or received by a Member shall accumulate toward that Member's benefits and any restrictions and other limitations thereto.

K. **PAYMENT** - activities undertaken to obtain premiums, determine or fulfill coverage and benefits, or obtain or provide reimbursement for health care services.

L. **PLAN ADMINISTRATOR – NORTH DAKOTA PUBLIC EMPLOYEES RETIREMENT SYSTEM.** North Dakota Public Employees Retirement System (NDPERS) is the administrator of the Plan with all of the duties and responsibilities applicable to plan administrators, including but not necessarily limited to compliance with any and all administrative, reporting, and disclosure requirements. BCBSND is not the Plan Sponsor or the Plan Administrator of the Plan and is not responsible for any of the duties assigned to the Plan Sponsor or the Plan Administrator by the terms of the Plan, or by this Agreement.

M. **PROTECTED HEALTH INFORMATION (PHI)** - individually identifiable health information, including summary and statistical information, collected from or on behalf of a Member that is transmitted by or maintained in electronic media, or transmitted or maintained in any other form or medium and that:

1. is created by or received from a Health Care Provider, health care employer, or health care clearinghouse;
2. relates to a Member's past, present or future physical or mental health or condition;
3. relates to the provision of health care to a Member;
4. relates to the past, present, or future payment for health care to or on behalf of a Member; or
5. identifies a Member or could reasonably be used to identify a Member.

Educational records and employment records are not considered PHI under federal law.

N. **SECURITY INCIDENT** - any attempted or successful unauthorized access, use, disclosure, modification, or destruction of a Member's electronic PHI or interference with BCBSND's system operations in BCBSND's information systems.

O. **STANDARD TRANSACTIONS** - health care financial or administrative transactions conducted electronically for which standard data elements, code sets and formats have been adopted in accordance with federal or state law.

P. **SUBSCRIBER** - any employee of the Plan Sponsor who is or may become eligible to receive a benefit under the Plan. The term includes all common law employees and possibly proprietors, partners, or other owners who work for the Plan Sponsor and are otherwise entitled to coverage under the Plan. Notwithstanding the above, in no case shall the term Subscriber include any person not otherwise entitled to coverage under the terms of the Plan.

Q. **SUCCESSFUL SECURITY INCIDENTS** - Security Incidents that result in unauthorized access, use, disclosure, modification, or destruction of information or interference with system operations.

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R. **UNSUCCESSFUL SECURITY INCIDENTS** - Security Incidents that do not result in unauthorized access, use, disclosure, modification, or destruction of information or interference with system operations.

3. **BCBSND SHALL:**

3.1 Establish a membership record for existing Members containing information as provided by NDPERS.

3.2 Provide Identification Cards, Certificates of Insurance/Summary Plan Descriptions and applications for enrollment for each Subscriber.

3.3 Provide the Health Plan Performance Guarantees, as outlined in Exhibit B.

3.4 Upon enrollment under the NDPERS Benefit Plan, BCBSND will provide written notice to covered employees and their covered spouses of their continuation rights pursuant to the Consolidated Omnibus Budget Reconciliation Act. ("COBRA").

3.5 Receive applications for enrollment for late entrants.

3.6 Provide Managed Benefits services in accordance with appropriate licensure and certification requirements including a dedicated staff person.

3.7 Provide a dedicated service unit to adjudicate all claims and respond to Member's inquiries. Provide toll-free Member and Health Care Provider service lines between the hours of 8 AM and 5:00 PM CST or CDT at the home office in Fargo, ND, as appropriate. A toll-free managed benefits line for Health Care Providers will also be available between the hours of 7:30 AM and 5:30 PM CST or CDT. During nonbusiness hours, answering machine services will be available for managed benefits calls.

3.8 Process claims and inquiries per MTM (Member Touchpoint Measures) for Non-BlueCard claims.

3.9 Correspond with the Members and Health Care Providers if additional information is deemed necessary by BCBSND to complete the administrative process.

3.10 Administer other party liability programs.

3.11 Provide to Members an Explanation of Benefits Statement.

3.12 Provide a procedure for detection of fraud and unlawful activity.

3.13 Provide to Members a conversion policy when application is made within 31 days of the termination of enrollment under NDPERS.

3.14 Provide assistance to NDPERS for the conduct of enrollment, servicing and education.

3.15 Provide to NDPERS formal Policy and Procedure guidelines for the conduct of external audits or reviews commissioned by NDPERS.

NDPERS shall provide BCBSND with the scope and requirements of any audit or review prior to the commencement of activities. If a sample of claims is required, BCBSND will provide or NDPERS will select a statistically valid computerized sample of claims, if not prohibited by law, regulation or rule.

NDPERS will provide a copy of the report of all audit or review findings and shall discuss the findings with BCBSND upon discovery to allow further investigation or implementation of corrective action.

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3.16 Provide NDPERS with reporting to include but not limited to:

a. Annual group reporting of membership and utilization by group segments and product.

b. Estimates of future claim reserves and premium to claim ratio.

c. Such other special claims reports as requested from time-to-time by NDPERS, subject to the availability of data and appropriate cost considerations.

d. Interest calculation monthly report.

e. Semi-annual performance objectives as outlined in section 2 of the BCBSND response to question 15 of the RFP.

3.17 Provide NDPERS with claims specific data on a monthly basis on compact disc or other agreed upon medium. This information shall be in a format acceptable to NDPERS and subject to all federal and state laws on confidentiality and open records.

3.18 Provide support to NDPERS for the establishment of a Preferred Provider Network consistent with objectives established by NDPERS.

a. BCBSND will provide technical and administrative advice to NDPERS relative to the appropriateness of PPO arrangements compared to existing Blue Cross Blue Shield participation and reimbursement arrangements, to verify that PPO arrangements provide for payments which are no greater than the existing arrangements. BCBSND will provide current information regarding Blue Cross Blue Shield participation and reimbursement arrangements in place on a provider-specific basis for comparative purposes.

b. BCBSND will develop jointly with NDPERS a written instrument to be used as the basis for providers participating in the PPO Program.

c. BCBSND will secure provider agreements upon completion of negotiations with providers. Such negotiations will be conducted jointly by BCBSND and NDPERS.

d. BCBSND will enforce strict managed benefits, utilization review and quality assurance criteria to assure attainment of Preferred Provider program objectives.

e. BCBSND will, upon NDPERS direction, terminate a Provider's NDPERS PPO participation agreement in accordance with terms of the agreement, when a PPO Provider is noncompliant with NDPERS policies and procedures. Said policies and procedures shall be documented and communicated to the participating provider prior to implementation.

3.19 Carry over any Deductible and/or Coinsurance Amounts incurred from January 1 to June 30, of the prior contract period.

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4. **NDPERS SHALL:**

4.1 Prepare and distribute monthly billings to participating employers and retirees participating in the Plan. NDPERS shall respond to the participating employers inquiries concerning eligibility rules, billing, etc.

4.2 Prepare monthly eligibility tape by participating employer and premium classification for both active and retired employees and provide the tape to BCBSND to be used for eligibility certification purposes. Along with the eligibility tape, NDPERS will furnish a monthly listing of participants added or terminated during the month. Such listing will reflect the name of the employee, dependents, Social Security Number, the effective date of coverage for a new employee or the termination date of a terminated employee and the coverage classification.

4.3 Provide enrollment forms, obtain completed classifications or addresses, etc. from participants and furnish BCBSND with a copy of the enrollment forms or request for coverage or address changes and retain the original copy. Enrollment forms will include the NDPERS and Blue Cross Blue Shield Service Marks.

4.4 Be responsible for the administration of and compliance with COBRA. BCBSND will forward requests for COBRA participation by membership to NDPERS upon notification.

4.5 Comply with BCBSND's established administrative policies which are reasonable and consistent with the NDPERS Health Plan and the bid specifications agreed to by the parties, including but not limited to: underwriting policies, standard adjudication and Medical Policy Guidelines, Payable Provider Guidelines, Managed Benefits Program Guidelines and claim payment procedures.

4.6 Develop and provide BCBSND the objectives established for the Preferred Provider programs.

4.7 Assume joint responsibility for the determination of provider eligibility and performance criteria in the Preferred Provider programs.

4.8 Be responsible for any systems redesign costs to BCBSND which result from the implementation of any new reimbursement mechanisms not presently in place within BCBSND automated claims payment systems. Those reimbursement mechanisms currently in place include:

Institutional	Professional
Percent of Billed Charges	Percent of Physician Payment Schedule
Percent of DRGs	Percent of Billed Charges
Percent of Per Diems	Capitation
Targeted Cost per Member	Targeted Cost per Member

4.9 Pay premiums to BCBSND according to the schedule in Section 6.

4.10 NDPERS acknowledges that the administration of the Benefit Plan that is the subject of this Agreement may be subject to regulation under federal and/or state law. NDPERS agrees to furnish BCBSND with any and all information necessary to comply with any applicable federal and/or state laws and to certify that this information is accurate. If there are any changes in the employer contribution rate for benefits and services available under this Agreement, NDPERS agrees that it is its obligation to provide information related to the change in contribution rates immediately to BCBSND.

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5. PRIVACY USE AND DISCLOSURE RESPONSIBILITIES

5.1 RESPONSIBILITIES OF BCBSND

A. Privacy of Protected Health Information (PHI)

1. BCBSND will keep confidential all Claim records and all other PHI that BCBSND creates or receives in the performance of its duties under this Agreement. Except as permitted or required by this Agreement for BCBSND to perform its duties under this Agreement, BCBSND will not use or disclose such Claim information or other PHI without the authorization of the Member who is the subject of such information or as required by law.

2. BCBSND will neither use nor disclose Members' PHI (including any Members' PHI received from a business associate of the Plan) except (1) as permitted or required by this Agreement, (2) as permitted in writing by the Plan Administrator, (3) as authorized by Members, or (4) as required by law.

3. BCBSND will be permitted to use or disclose Members' PHI only as follows:

   a. BCBSND will be permitted to use and disclose Members' PHI (a) for the management, operation and administration of the Plan the Plan Administrator offers Members, and (b) for the services set forth in the Plan, which include Payment Activities, Health Care Operations, and Data Aggregation as these terms are defined under federal law.

      1. BCBSND will be permitted to use Members' PHI as necessary for BCBSND's proper management and administration or to carry out BCBSND's legal responsibilities.

      2. BCBSND will be permitted to disclose Members' PHI as necessary for BCBSND's proper management and administration or to carry out BCBSND's legal responsibilities only if (i) the disclosure is required by law, or (ii) before the disclosure, BCBSND obtains from the entity to which the disclosure is to be made reasonable assurance, evidenced by a written contract, that the entity will hold Members' PHI in confidence, use or further disclose Members' PHI only for the purposes for which BCBSND disclosed it to the entity or as required by law, and notify BCBSND of any instance the entity becomes aware of where the confidentiality of any Members' PHI was breached.

   b. BCBSND will make reasonable efforts in accordance with its written privacy policies and procedures to use, disclose, or request only the minimum necessary amount of Members' PHI to accomplish the intended purpose. BCBSND will make its written privacy policies and procedures available to the Plan Sponsor, upon request.

4. Other than disclosures permitted by Section 5.1(A)3, BCBSND will not disclose Members' PHI to the Plan Administrator or to the Plan's business associate except as directed by the Plan Administrator in writing.

5. BCBSND will require each subcontractor and agent to which BCBSND is permitted by this Agreement or in writing by the Plan Administrator to disclose Members' PHI to provide reasonable assurance, evidenced by written contract, that such other entity will comply with the same privacy and security obligations with respect to Members' PHI as this Agreement applies to BCBSND.

6. BCBSND will not disclose any Members' PHI to the Plan Sponsor, except as permitted by and in accordance with Section 5.1(A)3.

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7. BCBSND will report to the Plan Administrator any use or disclosure of Members' PHI not permitted by this Agreement. BCBSND will make any such report to the Plan Administrator after BCBSND learns of such non-permitted use or disclosure.

8. BCBSND will report to the Plan Administrator attempted or successful unauthorized access, use, disclosure, modification or destruction of a Member's electronic PHI or interference with BCBSND's system operations in BCBSND's information systems ("Security Incident"), of which BCBSND becomes aware. With regard to attempted unauthorized access, use, etc., BCBSND and the Plan Administrator recognize and agree that the significant number of meaningless attempts to, without authorization, access, use, disclose, modify or destroy electronic PHI will make real-time reporting formidable. Therefore, BCBSND and the Plan Administrator agree to the following reporting procedures for Security Incidents that result in unauthorized access, use, disclosure, modification, or destruction of information or interference with system operations ("Successful Security Incidents") and for Security Incidents that do not so result ("Unsuccessful Security Incidents").

   For Unsuccessful Security Incidents, BCBSND and the Plan Administrator agree that this Agreement constitutes notice from BCBSND of any such Unsuccessful Security Incidents. In other words, the Plan Administrator waives any separate notice of Unsuccessful Security Incidents. By way of example, BCBSND and the Plan Administrator consider the following to be illustrative of Unsuccessful Security Incidents when they do not result in unauthorized access, use, disclosure, modification, or destruction of a Member's electronic PHI or interference with an information system:

   1. Pings on BCBSND's firewall,

   2. Port scans,

   3. Attempts to log on to a system or enter a database with an invalid password or username,

   4. Denial-of-service attacks that do not result in a server being taken off-line, and

   5. Malware (e.g., worms, viruses).

   For Successful Security Incidents, BCBSND shall give notice promptly to the Plan Administrator in the event a Member's electronic PHI was compromised.

9. Disposition of Protected Health Information

   The parties agree that upon termination, cancellation, expiration or other conclusion of this Agreement, BCBSND will return or destroy all PHI received or created by BCBSND on the Plan Administrator's behalf as soon as feasible. Due to various regulatory and legal requirements, the Plan Administrator acknowledges that immediate return or destruction of all such information is not feasible. BCBSND agrees that upon conclusion of this Agreement for any reason, it will use or disclose the PHI it received or created on the Plan's behalf only as necessary to meet BCBSND's regulatory and legal requirements and for no other purposes unless permitted in writing by the Plan Administrator. BCBSND will destroy PHI received or created by BCBSND on the Plan Administrator's behalf that is in BCBSND's possession under such circumstances and upon such schedule as BCBSND deems consistent with its regulatory and other legal obligations.

   These responsibilities agreed to by BCBSND and related to protecting the privacy and safeguarding the security of PHI, as well as any terms directly related thereto, shall survive the termination of this Agreement and, where applicable, shall govern BCBSND's receipt, use or disclosure of PHI pursuant to the terms of this Agreement.

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B. **Access, Amendment and Disclosure Accounting for Protected Health Information**

1. Upon the Plan Administrator's written request, BCBSND will make available for inspection and obtaining copies by the Plan Administrator, or at the Plan Administrator's direction by the Member (or the Members' representative), any PHI about the Member created or received for or from the Plan Administrator in BCBSND's custody or control so the Plan Administrator may meet its access obligations under federal law.

2. Upon receipt of a written request from the Plan Administrator, or at the Plan Administrator's direction by the Member (or the Members' representative), BCBSND will amend or permit the Plan Administrator access to amend any portion of the PHI created or received for or from the Plan Administrator in BCBSND's custody or control, so the Plan Administrator may meet its amendment obligations under federal law.

3. So the Plan Administrator may meet its disclosure accounting obligations under federal law or state law, BCBSND will do the following:

   a. BCBSND will record each disclosure of Members' PHI which is not excepted from disclosure accounting under Section 5.1(B)3.b, that BCBSND makes to the Plan Administrator or to a third party.

      The information about each disclosure that BCBSND must record ("Disclosure Information") is (i) the disclosure date, (ii) the name and (if known) address of the person or entity to whom BCBSND made the disclosure, (iii) a brief description of the PHI disclosed, and (iv) a brief statement of the purpose of the disclosure.

      For repetitive disclosures of Members' PHI that BCBSND makes for a single purpose to the same person or entity (including the Plan Administrator), BCBSND may record (i) the disclosure information for the first of these repetitive disclosures, (ii) the frequency, periodicity or number of these repetitive disclosures, and (iii) the date of the last of these repetitive disclosures.

   b. BCBSND will not be required to record disclosure information or otherwise account for disclosures of Members' PHI that this Agreement or the Plan Administrator in writing permits or requires:

      (1) for Payment Activities or Health Care Operations,
      (2) to the Member who is the subject of the PHI or to that Members' personal representative,
      (3) to persons involved in that Members' health care or payment for health care, as provided under federal law,
      (4) for notification for disaster relief purposes or national security or intelligence purposes as provided under federal law,
      (5) to law enforcement officials or correctional institutions regarding inmates,
      (6) for incidental uses or disclosures,
      (7) as part of a limited data set in accordance with federal law,
      (8) that occurred prior to the HIPAA Privacy Compliance Date,
      (9) pursuant to a valid authorization.

   c. BCBSND will have available for the Plan Administrator the disclosure information required by Section 5.1(B)3.a. for the six (6) years immediately preceding the date of the Plan Administrator's request for the disclosure information.

   d. Upon the Plan Administrator's written request, BCBSND will make available to the Plan Administrator, or at the Plan Administrator's direction to the Member (or the Member's representative), disclosure information regarding the Member so the Plan Administrator may meet its disclosure accounting obligations under federal law.

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C. **Information Safeguards**

1. BCBSND will maintain reasonable and appropriate administrative, technical and physical safeguards to protect the privacy of Member PHI. The safeguards must reasonably protect Member PHI from any intentional or unintentional use or disclosure in violation of federal law and limit incidental uses or disclosures made pursuant to a use or disclosure otherwise permitted by this Agreement.

2. BCBSND will implement administrative, technical, and physical safeguards that reasonably and appropriately protect the confidentiality, integrity, and availability of electronic PHI BCBSND creates, receives, maintains, or transmits on behalf of the Plan Administrator as required by federal law.

D. **Inspection of Books and Records**

BCBSND will make its internal practices, books, and records relating to its use and disclosure of PHI created or received for or from the Plan Administrator available to the Plan Administrator and to the U.S. Department of Health and Human Services to determine compliance with federal law or this Agreement.

E. BCBSND will prepare and distribute a notice of privacy practices appropriate for the Plan to meet its notice obligations under federal law. The Plan Administrator authorizes BCBSND to disclose the minimum necessary PHI to the Plan Sponsor for plan administration functions specified in the Plan documents as amended.

F. **Information Privacy and Safeguard Provisions Survive Termination of Agreement**

These responsibilities agreed to by BCBSND and related to protecting the privacy of PHI, as well as any terms directly related thereto, shall survive the termination of this Agreement and where applicable, shall govern BCBSND's receipt and use of PHI obtained pursuant to the terms of this Agreement.

5.2 **RESPONSIBILITIES OF THE PLAN SPONSOR**

A. The Plan Sponsor retains full and final authority and responsibility for the Plan and its operation. BCBSND is empowered to act on behalf of the Plan only as stated in this Agreement or as mutually agreed in writing by the Plan Sponsor and BCBSND.

B. Except with respect to services provided by BCBSND set forth in this agreement, the Plan Sponsor will have the sole responsibility for and will bear the entire cost of compliance with all federal, state and local laws, rules, and regulations concerning the privacy of PHI, including any licensing, filing, reporting, and disclosure requirements, that may apply to the Plan. BCBSND will have no responsibility for or liability with respect to the Plan's compliance or noncompliance with any applicable federal, state, or local law, rule, or regulation, that the Plan Sponsor is responsible for under this subsection.

C. By executing this Agreement, the Plan Sponsor certifies to BCBSND that it has amended the Plan documents to incorporate the provisions required by and under federal law, and agrees to comply with the Plan Administrator's plan documents as amended.

BCBSND may rely on Plan Sponsor's certification and Plan Administrator's written authorization, and will have no obligation to verify (1) the Plan Administrator's plan documents have been amended to comply with the requirements of federal law or this Agreement or (2) the Plan Sponsor is complying with the Plan Administrator's plan document as amended.

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D. For any high deductible health plan offered by the Plan Sponsor, the Plan Sponsor assumes sole responsibility for determining whether the Plan qualifies as a high deductible health plan under Section 223(c)(2) of the U.S. Internal Revenue Code. BCBSND MAKES NO WARRANTY, EXPRESS OR IMPLIED, INCLUDING, BUT NOT LIMITED TO, ANY IMPLIED WARRANTIES OF MERCHANTABILITY OR FITNESS FOR A PARTICULAR PURPOSE REGARDING THE PLAN.

For any high deductible health plan offered by the Plan Sponsor, BCBSND does not provide legal or tax advice, and expressly disclaims responsibility for determining, on behalf of any individual or group, the legal and tax implications of: (1) establishing a health savings account; (2) eligibility for a health savings account; (3) the contributions made to a health savings account; (4) the deductibility of contributions to a health savings account; and (5) withdrawals from a health savings account and related taxation.

6. **FEES AND CHARGES:**

6.1 In consideration of the fully insured contract under this Agreement, BCBSND agrees to accept the following provisions and premium rates for the Effective Date of this Agreement. See attached Premium Rate Structure Table.

6.2 BCBSND and NDPERS agree to the Health Plan Performance Guarantees, as outlined in the attached Exhibit B.

6.3 NDPERS will pay BCBSND, on or before the last day of each month, premium income based on the amount identified in Column 6 of the attached Table for type of contract for that month.

6.4 NDPERS will maintain a deposit of $3,000,000 in a Cash Reserve Account held by BCBSND until the settlement of the biennium. This Cash Reserve Account shall earn interest at a rate to be determined monthly, based on US Treasury Notes quoted by the Wall Street Journal. The monthly rate will be established at the close of the first trading day each month based on the closing yield to maturity of US Treasury Notes maturing 24 months hence. If there are multiple notes for that maturity, the rate will be based on an average. If there are no notes with that maturity, the next subsequent maturity will be used.

6.5 BCBSND will retain any surplus funds from the amounts identified in Column 4 of the attached table. Surplus funds retained by BCBSND shall earn interest at a rate to be determined monthly, based on US Treasury Notes quoted by the Wall Street Journal. The monthly rate will be established at the close of the first trading day each month based on the closing yield to maturity of US Treasury Notes maturing 24 months hence. If there are multiple notes for that maturity, the rate will be based on an average. If there are no notes with that maturity, the next subsequent maturity will be used.

Surplus funds described in the above section 6.5 not used by BCBSND to pay NDPERS Health Plan incurred claims plus retention will be subject to the Final Accounting as described in Section 7 of this Agreement.

6.6 Payments made pursuant to Section 6.3 and pursuant to Column 5 of the attached Table will be handled as follows:

BCBSND will dispense to Regional Advantage Services LLC, Medicare Part D premiums identified in Column 5 of the attached Table for type of contract for that month. Interest will not be paid on this account.

Funds described in section 6.6 are not subject to final accounting as described in section 7 of this Agreement.

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6.7 BCBSND reserves the right to adjust premium rates, with a 90-day notice, for any changes in taxes and/or benefits imposed upon BCBSND for the NDPERS health plan by any Federal, State or Local government authority that impact BCBSND expenses and/or NDPERS health plan benefits.

7. FINAL ACCOUNTING

7.1 A continual accounting of NDPERS Health Plan experience will take place during the 2013-2015 biennium. Monthly reports of earned income less incurred claims and retention will be produced during the biennium and the twenty-four months following the biennium.

7.2 Within 31 days of 12 months after the end of the biennium (by July 31, 2016) BCBSND will provide an accounting which will result in an initial settlement of the biennium agreement as follows:

1. Earned Premium Income during the Biennium
2. Plus interest on Surplus Funds
3. Less Claims Incurred during the Biennium and Paid July 1, 2013 through June 30, 2016
4. Less Estimated Claims Incurred and Unpaid at June 30, 2016
5. Less Administrative Expense during the Biennium ($28.36 per contract per month)
6. Less Conversion Cost during the Biennium ($1.92 per Non-Medicare contract per month)
7. Less Service Charge during the Biennium ($9.58 per Non-Medicare contract per month and $2.16 per Medicare contract per month)
8. Less Disease Management Program fees during the Biennium ($1.40 per contract per month)
9. Less Wellness Program fees during the Biennium ($4.26 per contract per month)
10. Less PPACA fees during the Biennium ($21.54 per Non-Medicare contract per month)
11. If 1+2-3-4-5-6-7-8-9-10 of 7.2 is positive, the lesser of 50% of this amount or $1.5 million is retained by BCBSND. The remainder equals Refund paid to NDPERS.
12. If 1+2-3-4-5-6-7-8-9-10 of 7.2 is negative, the lesser of 50% of this amount or $3.0 million will be refunded by NDPERS to BCBSND.

Claims incurred and unpaid will be estimated by the mean of the latest three actual IBNR claims (Incurred But Not Reported) amounts for equivalent periods in the NDPERS history.

7.3 Within 31 days of 24 months after the end of the biennium (by July 31, 2017), BCBSND will provide an accounting, which will result in a final settlement of the biennium agreement as follows:

1. Earned Premium Income during the Biennium
2. Plus interest on Surplus Funds
3. Less Claims Incurred during the Biennium and Paid July 1, 2013 through June 30, 2017
4. Less Administrative Expense during the Biennium ($28.36 per contract per month)
5. Less Conversion Cost during the Biennium ($1.92 per Non-Medicare contract per month)
6. Less Service Charge during the Biennium ($9.58 per Non-Medicare contract per month and $2.16 per Medicare contract per month)
7. Less Disease Management Program fees during the Biennium ($1.40 per contract per month)
8. Less Wellness Program fees during the Biennium ($4.26 per contract per month)
9. Less PPACA fees during the Biennium ($21.54 per Non-Medicare contract per month)
10. Less any refund paid to NDPERS at initial settlement on July 31, 2016
11. If 1+2-3-4-5-6-7-8-9-10 of 7.3 is positive, the lesser of 50% of this amount or $1.5 million is retained by BCBSND for the July 1, 2013 through June 30, 2015 biennium. The remainder equals Refund paid to NDPERS. The maximum retained by BCBSND for the biennium is 50% of $3.0 million of gain.
12. If 1+2-3-4-5-6-7-8-9-10 of 7.3 is negative, the lesser of 50% of this amount or $3.0 million will be refunded by NDPERS to BCBSND. BCBSND retains all losses beyond $6.0 million and any estimated gains previously distributed to NDPERS are subject to refund back to BCBSND based on this final settlement. The maximum loss NDPERS is subject to is 50% of $6.0 million of loss.

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The language in red was filed with the Insurance Department 6-2-14 Still waiting for approval.7-8-14

7.4 Within 31 days of 12 months after the end of the biennium (by July 31, 2016), BCBSND will provide an accounting of PPACA fees. This adjustment is in addition to the settlement calculated in 7.2. The calculation will be as follows:

1. Estimated PPACA fees paid by NDPERS during the biennium ($21.54 per Non-Medicare contract per month)

2. Less actual PPACA fees paid by BCBSND for the biennium including:

   a. Patient Centered Outcomes Research Tax will be calculated based on actual average Non-Medicare Members at the rate of $2.00 per Member per year for July 1, 2013 through June 30, 2014, and the updated amount for the following year (unknown at this time) for July 1, 2014 through June 30, 2015.

   b. Transitional Reinsurance Assessment will be calculated based on actual average Non-Medicare Members at the rate of $5.25 per Member per month ($63.00 annual) for January 1, 2014 through December 31, 2014, and $3.67 per Member per month ($44.00 annual) for January 1, 2015 through June 30, 2015.

   c. Health Insurer Tax will be calculated using NDPERS' portion of the premium used to calculate the bill from the Federal Government, grossed up by 20% for Federal Income Tax. The 2014 bill is based on 2013 premium. The 2015 bill is based on 2014 premium, and only half of that amount will be charged to NDPERS since this biennium ends June 30, 2015. (Illustrative Example for 2014 payment: Assume BCBSND receives a $10 million HIT tax bill in 2014 that is based on $1 billion of 2013 premium. If NDPERS contributed $200 million to the $1 billion of 2013 premium, then NDPERS would be charged 20% of $12 million – the $10 million HIT tax bill grossed up by 20% for Federal Tax. The same approach would be taken for 2015 except that only half of the amount would be used to account for half of the year.)

3. If 1-2 of 7.4 is positive, the remainder equals Refund paid to NDPERS. If 1-2 of 7.4 is negative, the remainder will be refunded by NDPERS to BCBSND.

4. The parties agree that the above identified PPACA fees are subject to modification by the respective federal agencies at any time. If the PPACA fees are so modified, the modifications shall automatically be incorporated into this Agreement without further action by the parties.

8. TERM AND TERMINATION OF AGREEMENT

8.1 The term of this Agreement shall be for a two year period from July 1, 2013 through June 30, 2015.

8.2 This Agreement may be terminated by mutual agreement of both parties, upon 60 days notice, in writing.

Either party may terminate this Agreement effective 90 days following delivery of written notice to the other party, or at such later date as may be stated in the notice, under any of the following conditions:

a. If funding from federal, state or other sources is not obtained and continued at levels sufficient to allow for purchase of the services or supplies in the indicated quantities or term. The Agreement may be modified by agreement of the parties in writing to accommodate a reduction of funds.

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b. If federal or state laws, rules or regulations are modified, changed or interpreted in such a way that the services are no longer allowable or appropriate for purchase under this Agreement or are no longer eligible for the funding proposed for payments authorized by this Agreement.
c. If any license, permit or certificate required by law, rule or regulation, or by the terms of this Agreement, is for any reason denied, revoked, suspended or not renewed.

Any such termination of this Agreement shall be without prejudice to any obligations or liabilities of either party already accrued prior to such termination.

d. In the event of a breach by either party, other than for nonpayment of premium, the other party may terminate this Agreement by written notice to the breaching party. The breaching party has 31 days to fully cure the breach. If the breach is not cured within 31 days after written notice, this Agreement will immediately terminate.

9. **INTER-PLAN PROGRAMS**

BCBSND has a variety of relationships with other Blue Cross and/or Blue Shield Licensees referred to generally as "Inter-Plan Programs" Whenever a Member accesses health care services outside of the geographic area BCBSND serves, the claim for those services may be processed through one of these Inter-Plan Programs and presented to BCBSND for payment in accordance with the rules of the Inter-Plan Programs policies then in effect. The Inter-Plan Programs available to Members under this Agreement are described generally below.

Typically when accessing care outside the BCBSND service area, a Member will obtain care from health care providers that have a contractual agreement (i.e., "participating agreement") with the local Blue Cross and/or Blue Shield Licensee in that other geographic area ("Host Blue"). In some instances, a Member may obtain care from health care providers who have not entered into a "participating agreement" with a Host Blue. BCBSND payment practices in both instances are described below.

A. BlueCard® Program

Under the BlueCard Program, when Members access health care services within the geographic area served by a Host Blue, BCBSND will remain responsible to the Group for fulfilling BCBSND's contractual obligations. However, in accordance with applicable Inter-Plan Programs policies then in effect, the Host Blue will be responsible for providing such services as contracting and handling substantially all interactions with the health care providers who have entered into a "participating agreement" with it (participating health care providers). The financial terms of the BlueCard Program are described generally below. Individual circumstances may arise that are not directly covered by this description; however, in those instances, BCBSND's action will be consistent with the spirit of this description.

Liability Calculation Method Per Claim - The calculation of Member liability on claims for Covered Services processed through the BlueCard Program will be based on the lower of the billed charges of the Host Blue's participating health care provider or the negotiated price made available to BCBSND by the Host Blue.

Host Blues may use various methods to determine a negotiated price, depending on the terms of each Host Blue's health care provider contracts. The negotiated price made available to BCBSND by the Host Blue may represent a payment negotiated by a Host Blue with a health care provider that is one of the following:

1. the actual price. An actual price is a negotiated payment without any other increases or decreases; or

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2. an estimated price. An estimated price is a negotiated payment reduced or increased by a percentage to take into account certain payments negotiated with the provider and other claim- and non-claim-related transactions. Such transactions may include, but are not limited to, anti-fraud and abuse recoveries, provider refunds not applied on a claim-specific basis, retrospective settlements, and performance-related bonuses or incentives; or

3. an average price. An average price is a percentage of billed covered charges representing the aggregate payments negotiated by the Host Blue with all of its health care providers or a similar classification of its providers and other claim- and non-claim-related transactions. Such transactions may include the same ones as noted above for an estimated price.

Host Blues using either an estimated price or an average price may, in accordance with Inter-Plan Programs policies, prospectively increase or reduce such prices to correct for over- or underestimation of past prices (i.e., prospective adjustments may mean that a current price reflects additional amounts or credits for claims already paid to providers or anticipated to be paid to or received from providers). However, the amount paid by the Member is a final price; no future price adjustment will result in increases or decreases to the pricing of past claims. The BlueCard Program requires that the price submitted by a Host Blue to BCBSND is a final price irrespective of any future adjustments based on the use of estimated or average pricing.

A small number of states require a Host Blue either (i) to use a basis for determining Member liability for Covered Services that does not reflect the entire savings realized, or expected to be realized, on a particular claim or (ii) to add a surcharge. Should the state in which health care services are accessed mandate liability calculation methods that differ from the negotiated price methodology or require a surcharge, BCBSND would then calculate the Member's liability in accordance with applicable law.

Return of Overpayments - Under the BlueCard Program, recoveries from a Host Blue or from participating health care providers of a Host Blue can arise in several ways, including, but not limited to, anti-fraud and abuse recoveries, provider/hospital audits, credit balance audits, utilization review refunds, and unsolicited refunds. In some cases, the Host Blue will engage third parties to assist in discovery or collection of recovery amounts. The fees of such a third party may be netted against the recovery. Recovery amounts determined in this way will be applied in accordance with applicable Inter-Plan Programs policies, which generally require correction on a claim-by-claim or prospective basis.

B. **Nonparticipating Providers Outside the BCBSND Service Area**

When Covered Services are provided outside of BCBSND's service area by health care providers who have not entered into a "participating agreement" with a Host Blue (nonparticipating health care providers), the amount the Member pays for such services will generally be based on either the Host Blue's nonparticipating health care provider local payment or the pricing arrangements required by applicable state law. In these situations, the Member may be liable for the difference between the amount that the nonparticipating health care provider bills and the payment BCBSND will make for the Covered Services as set forth in this paragraph.

In certain situations, BCBSND may pay claims based on the payment BCBSND would make if the Covered Services had been obtained within the BCBSND service area. Such situations include where a Member did not have reasonable access to a participating health care provider, as determined by BCBSND in its sole and absolute discretion or by applicable state law. In other situations, BCBSND may pay such a claim based on the payment BCBSND would make if BCBSND were paying a nonparticipating health care provider inside of BCBSND's service area (as described in the Member's Certificate of Insurance) where the Host Blue's corresponding payment would be more than BCBSND's payment to a nonparticipating health care provider within the BCBSND service area. BCBSND may also in its sole and absolute discretion, negotiate a payment with such a health care provider on an exception basis. In any of these situations, the Member may be responsible for the difference between the amount that the nonparticipating health care provider bills and payment BCBSND will make for the Covered Services as set forth in this paragraph.

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10. **RETROSPECTIVE DISCOUNT PAYMENT**

Regarding prescription medications or drugs purchased by Members under the terms of the Plan, BCBSND will pay the amount due to the pharmacy (or other prescription drug retailer) under the terms of the pharmacy provider participating agreement. The amount due to the pharmacy under the terms of the pharmacy provider participating agreement is that which is due at the time the prescription medication or drug is purchased by the Member. The amount due to the pharmacy under the pharmacy provider participating agreement is calculated without regard to any subsequent, retrospective manufacturer discount that may apply to the cost of the prescription medication or drug. The Plan Administrator acknowledges and agrees that, in some cases but not all, drug manufacturers may offer retrospective discounts to BCBSND on prescription medications and drugs purchased under the terms of the Plan. If a drug manufacturer makes a retrospective discount payment available, the Plan Administrator acknowledges and agrees that a portion of any such rebate may be retained by an entity that performs manufacturer discount program services on behalf of BCBSND under the terms of this Agreement. The Plan Administrator further acknowledges and agrees that, when made available by the drug manufacturer, another portion of the retrospective discount payment is retained by BCBSND. In its sole discretion, BCBSND may periodically refund to the Plan all or part of any rebate payments received. The calculation of any refund rests in the sole discretion of BCBSND.

In its sole discretion, and only in the case where a Member is required to pay Coinsurance as part of the Cost Sharing Amounts for each Prescription Medication and Drug provided under the terms of this Benefit Plan, BCBSND may periodically refund to Members a proportional amount of any retrospective discount payments received. The calculation and payment of any such proportional refund rests in the sole discretion of BCBSND. The manner in which such retrospective discount program payment refund, if any, is distributed to a Member rests in the sole discretion of BCBSND. The Member waives any right, title, or interest in and to such proportional retrospective discount payment once the Member is no longer eligible for benefits under the terms of this Benefit Plan, and BCBSND may use its discretion and disburse any such retrospective discount payments as it deems appropriate and necessary in its administration of this Benefit Plan. The Member shall pay all Cost Sharing Amounts at the time the Prescription Medication or Drug is purchased, without regard to any potential retrospective discount.

11. **GENERAL PROVISIONS:**

11.1 This Agreement is between NDPERS and BCBSND and does not create any rights or legal relationships between BCBSND and any Member(s).

11.2 This Agreement, together with the Response to the Request for Proposal and any exhibits, attachments and amendments constitutes the entire Agreement between the parties. No promises, terms, conditions or obligations other than those contained in this Agreement are valid or binding. Any prior agreements, statements, promises, negotiations, inducements or representations, either oral or written, made by either party or agent of either party that are not contained in this Agreement are of no effect. No modification of the terms or provisions of this Agreement shall be effective unless evidenced by a written amendment, signed by an authorized officer or employee of NDPERS and BCBSND.

11.3 This Agreement shall be governed by and construed according to the laws of the state of North Dakota.

11.4 Failure of either party at any time to require performance by the other party of any provision of this Agreement shall not be deemed to be a continuing waiver of that provision or a waiver of any other provision of this Agreement.

11.5 No assignment of this Agreement in whole or in part may be made by either party without written agreement approved by both parties.

11.6 All notices and correspondence required or permitted to be given under this Agreement shall be given by personal delivery to the other party or may be sent by mail, postage prepaid to the other party at the following addresses:

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11.7 Neither party shall be liable for any delay in or failure to perform under this Agreement due to an act of God or due to war mobilization, insurrection, rebellion, civil commotion, riot, act of an extremist or public enemy, sabotage, labor dispute, explosion, fire, flood, storm, accident, drought, equipment failure, power failure, fuel or energy shortages, unavoidable delay of carriers, embargo, law, ordinance, act, rule or regulation of any government, whether valid or invalid.

11.8 NDPERS hereby expressly acknowledges and understands that BCBSND is an independent corporation operating under a license with the Blue Cross and Blue Shield Association, an association of independent Blue Cross and Blue Shield Plans (the "Association"), permitting BCBSND to use the Blue Cross and Blue Shield Service Marks in the state of North Dakota, and that BCBSND is not contracting as an agent of the Association. NDPERS further acknowledges and agrees this Agreement was not entered into based upon representations by any person or entity other than BCBSND and that no person, entity, or organization other than BCBSND shall be held accountable or liable to NDPERS for any of BCBSND's obligations to NDPERS created under this Agreement. This paragraph shall not create any additional obligations whatsoever on the part of BCBSND other than those obligations created under other provisions of this Agreement.

11.9 If NDPERS or BCBSND creates benefit communications for Members, relating to the Certificate of Insurance attached as Exhibit A, such communications will be sent to BCBSND or NDPERS for comment prior to distribution. Either party will have 5 business days to comment on the communication. If one party fails to advise the other within that 5-day period, it will be presumed there are no comments on the communication. If NDPERS has a digital or online version of the Certificate of Insurance available to its Members, NDPERS agrees that it will not alter, modify or change the language of the Certificate of Insurance, and further agrees the Certificate of Insurance, attached as Exhibit A, will be the controlling document in the event of any conflict or liability that might arise as the result of any alterations, modifications or changes made by NDPERS. In the event a claim is paid based on NDPERS's modified or altered digital or online Certificate of Insurance, NDPERS is liable for all such claims. NDPERS further agrees that no waiver of this agreement is valid unless in writing and approved by BCBSND.

11.10 BCBSND will prepare Summaries of Benefits and Coverage for distribution to applicants and Members by NDPERS so that BCBSND, the Plan and NDPERS may all satisfy related disclosure obligations under federal law. It shall be the sole responsibility of NDPERS to distribute the Summaries of Benefits and Coverage in accordance with federal law, and the Plan Administrator acknowledges and agrees that BCBSND will rely upon NDPERS for compliance with the requirements for distribution of the Summaries of Benefits and Coverage to applicants and Members.

11.11 When coverage under this Agreement is terminated, BCBSND will, within a reasonable period of time, issue a Certificate of Creditable Coverage to the Subscriber. Upon notification by the Subscriber of the ineligibility of a dependent, a Certificate of Creditable Coverage will be issued to the affected Member within a reasonable period of time. Certificates of Creditable Coverage may also be obtained from BCBSND upon request within 24 months after coverage is terminated. Certificates of Creditable Coverage will only reflect continuous coverage provided through BCBSND.

11.12 Upon the effective date of any final regulation or amendment to final regulations with respect to PHI, Standard Transactions, the security of health information or other aspects of the Health

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Insurance Portability and Accountability Act of 1996 applicable to this Agreement, this Agreement will automatically amend such that the obligations imposed on the Plan Sponsor, the Plan Administrator and BCBSND remain in compliance with such regulations, unless BCBSND elects to terminate this Agreement by providing the Plan Sponsor and the Plan Administrator notice of termination in accordance with this Agreement at least thirty-one (31) days before the effective date of such final regulation or amendment to final regulations.

12. **DISPUTES AND INDEMNIFICATION**

If litigation is filed regarding denial of benefits or otherwise, and BCBSND is named as the sole defendant, BCBSND will have the right to manage and have full control of litigation and to determine whether to pay, compromise, litigate or appeal the litigation. Except as otherwise provided in this Agreement, NDPERS and BCBSND each agree to assume their own liability for any and all legal or equitable claims of any nature including all costs, expenses and attorneys' fees which may in any manner result from or arise out of this Agreement.

NDPERS agrees that all Retrospective Discount Payments will be made to Members of the Plan. BCBSND agrees to indemnify NDPERS for any judgments against NDPERS solely arising out of NDPERS' decision to participate in the Retrospective Discount Payment program.

BCBSND shall secure and keep in force during the term of this Agreement, from insurance companies, government self-insurance pools or government self-retention funds, authorized to do business in North Dakota, the following insurance coverages:

1. Commercial general liability, including premises or operations, contractual, and products or completed operations coverages (if applicable), with minimum liability limits of $250,000 per person and $1,000,000 per occurrence.

2. Professional errors and omissions with minimum liability limits of $1,000,000 per occurrence and in the aggregate, BCBSND shall continuously maintain such coverage during the term of the Agreement and for three years thereafter. In the event of a change or cancellation of such coverage, BCBSND shall purchase an extended reporting period to meet the time periods required in this section.

3. Automobile liability, including Owned (if any), Hired, and Non-Owned automobiles, with minimum liability limits of $250,000 per person and $500,000 per occurrence.

4. Workers compensation coverage meeting all statutory requirements.

The insurance coverages listed above must meet the following additional requirements:

1. Any deductible or self-insured retention amount or other similar obligation under the policies shall be the sole responsibility of BCBSND. The amount of any deductible or self retention is subject to approval by NDPERS, upon request.

2. This insurance may be in policy or policies of insurance, primary and excess, including the so-called umbrella or catastrophe form and must be placed with insurers rated “A-” or better by A.M. Best Company, Inc., provided any excess policy follows form for coverage. Less than an “A-” rating must be approved by NDPERS. The policies shall be in form and terms approved by NDPERS, upon request.

3. BCBSND shall furnish a certificate of insurance to the undersigned NDPERS representative, upon request.

4. Failure to provide insurance as required in this Agreement is a material breach of contract entitling NDPERS to terminate this Agreement immediately.

BCBSND shall not cancel or modify the insurance coverage required by this Agreement without thirty (30) days’ prior written notice to the undersigned NDPERS representative.

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IN WITNESS WHEREOF, the parties hereto have caused this Agreement to be executed, in their names by their undersigned officers, the same being duly authorized to do so.

NORTH DAKOTA PUBLIC EMPLOYEES RETIREMENT SYSTEM (PLAN ADMINISTRATOR)
PO Box 1657
Bismarck, North Dakota 58502

By: _____

Title: _____

Date: _____

BLUE CROSS BLUE SHIELD OF NORTH DAKOTA*
4510 13th Avenue South
Fargo, North Dakota 58121

NORTH DAKOTA PUBLIC EMPLOYEES RETIREMENT SYSTEM (PLAN SPONSOR)
PO Box 1657
Bismarck, North Dakota 58502

By: _____

Title: _____

Date: _____

Administrative Service Agreement
07/01/2013-06/30/2015

*An Independent Licensee of the Blue Cross and Blue Shield Association.

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Exhibit "A"

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Appendix B: Response Template

1. Face sheet

Name of Proposer's Firm:	
Federal Tax I.D. Number:	
Principal Place of Business:	
Address:	
City:	
State and Zip:	
Contact Person:	
Title:	
Telephone:	
Fax:	
E-mail address:	

2. Minimum Requirements (please identify if you would be able to meet this existing service and if not what you would propose.

Minimum Requirements	Response
Electronic Data Collection and Reporting Requirements: Respondents must, at a minimum, meet the data collection and reporting requirements described in Section 1 under Reporting Requirements of the RFP.	
Vendor must be able to take current 834 electronic enrollment file (containing member eligibility) at no cost.	
Effective Date of Coverage: Respondents must be able to provide required coverages and services by July 1, 2015 and January 1 2016 for the PDP.	
Licensure: Respondents must have all applicable licenses required by North Dakota or agree to obtain necessary licensure prior to the effective dates of coverage.	
Term of Contract: NDPERS is required by state statute to solicit bids for medical benefit coverage for a specified term for a fully-insured arrangement and every other biennium for a self-funded arrangement. NDPERS has determined that the specified term for fully-insured arrangement shall be six years subject to two year renewals, however, NDPERS reserves the right to extend the agreement subject to negotiation with the successful vendor if the Board deems it necessary.	
Premium Rate Guarantees: For all insured proposals premium rates must be guaranteed for a period of two years, from July 1, 2015 to June 30, 2017. PDP rates will be developed each year based upon the federal subsidy.	
PDP rates: Must be submitted to PERS by September of each year.	
Non-Medicare Retirees: Rates are governed by state statue. Non-	

Minimum Requirements	Response
Medicare retiree single rate is 150% of the active member single rate; the rate for a non-Medicare retiree plus one is twice the non-Medicare single rate, and the rate for a non-Medicare retiree plus two or more dependents is two and one-half times the non-Medicare retiree single rate.	
Renewals: Renewals must be submitted to NDPERS in August of the year preceding the contract renewal date and in September of each year for the PDP.	
Contract Termination: Respondent's contract termination provision may not require more than 120-day notice and can occur only at renewal. NDPERS can terminate coverage at any time.	
Replicate Coverage: Respondent should replicate the existing coverage and financial terms for two years including an HSA arrangement. Variances and exceptions to existing coverage can be offered in appendix F item F2.	
Legislative Compliance: Respondents agree to comply with all provisions of the Health Insurance Portability Act of 1996 including, but not limited to providing certificates of creditable coverage. Respondents must also be in compliance with all HIPAA Privacy and HIPAA EDI requirements and be able to conduct all applicable employer/plan sponsor and provider transactions consistent with those requirements. Respondents will be expected to meet HIPAA security requirements when applicable to NDPERS. Respondents will also be expected to be in compliance with all ACA requirements	
Transition Management: Respondents agree, should they be selected, they will proactively manage the transition of coverage (e.g. claim accumulators, lifetime maximums, etc.) from the subsequent carrier.	
Administration: Respondents must agree to comply with existing administration of NDPERS. Any modifications needed to accommodate NDPERS data will be done at the vendor's own	

Minimum Requirements	Response
expense.	
Audit: NDCC 54-52-05 (10) relating to the audit authority of NDPERS.	
North Dakota Legislation Requirements: Respondent must meet all requirements in the North Dakota Century Code including 54-52.1 and all requirements in the North Dakota Administrative Code including 71-03. Specific recognition of 54-52.1-12 should be acknowledged.	
Ability to meet the specifications outlined in the RFP unless specifically noted	
Premium rates must be divisible by two.	
Subject matter experts and other appropriate personnel will be available to attend board meetings, legislative hearings, etc. as needed	

3. Affidavit of Non-collusion

I swear (or affirm) under the penalty of perjury:

1. That I am the Responder (if the Responder is an individual), a partner in the company (if the Responder is a partnership), or an officer or employee of the responding corporation having authority to sign on its behalf (if the Responder is a corporation);

2. That the attached proposal submitted in response to the Group Medical Coverage Request for Proposals has been arrived at by the Responder independently and has been submitted without collusion with and without any agreement, understanding or planned common course of action with, any other Responder of materials, supplies, equipment or services described in the Request for Proposal, designed to limit fair and open competition;

3. That the contents of the proposal have not been communicated by the Responder or its employees or agents to any person not an employee or agent of the Responder and will not be communicated to any such persons prior to the official opening of the proposals; and

4. That I am fully informed regarding the accuracy of the statements made in this affidavit.

Responder's Firm Name: _____

Authorized Signature: _____

Date: _____

Subscribed and sworn to me this _____ day of _____

Notary Public: _____

My commission expires: _____

4. Conflicts of interest list
Responders must provide a list of all entities with which it has relationships that create, or appear to create, a conflict of interest with the work that is contemplated in this request for proposals. The list should indicate the name of the entity, the relationship, and a discussion of the conflict.

5. Compliance with Federal and State Laws Form

NDPERS — Federal and State Law Compliance Certification

1. The company shown below is or will be in compliance with Federal and State laws and does not knowingly violate North Dakota or United States Laws. The company shown below will obtain this certification from all subcontractors who will participate in the performance of this contract; and

I certify that the company shown below is in compliance with items 1 above and that I am authorized to sign on its behalf.

Name of Company: _____Date: _____

Authorized Signature: _____Telephone Number: _____

Printed Name: _____Title: _____

6. Location of Service Disclosure and Certification

STATE OF NORTH DAKOTA

LOCATION OF SERVICE DISCLOSURE AND CERTIFICATION

LOCATION OF SERVICE DISCLOSURE

Check all that apply:

- ❑ The services to be performed under the anticipated contract as specified in our proposal will be performed ENTIRELY within the State of North Dakota.
- ❑ The services to be performed under the anticipated contract as specified in our proposal entail work ENTIRELY within another state within the United States.
- ❑ The services to be performed under the anticipated contract as specified in our proposal will be performed in part within North Dakota and in part within another state within the United States.
- ❑ The services to be performed under the anticipated contract as specified in our proposal DO involve work outside the United States. Below (or attached) is a description of

  (1) the identity of the company (identify if subcontractor) performing services outside the United States;

  (2) the location where services under the contract will be performed; and

  (3) the percentage of work (in dollars) as compared to the whole that will be conducted in each identified foreign location.

CERTIFICATION

By signing this statement, I certify that the information provided above is accurate and that the location where services have been indicated to be performed will not change during the course of the contract without prior, written approval from the State of North Dakota.

Name of Company: _____

Authorized Signature:_____

Printed Name: _____

Title: _____

Date:_____ Telephone Number:_____

Appendix C. Questionnaire

In order for your proposal to be considered and accepted, your organization must provide answers to the questions presented in this section. Each question must be answered specifically and in detail. Include both the question and the answer in your proposal response. An electronic copy of this questionnaire has been provided to facilitate your response.

Reference should not be made to a prior response unless the question involved specifically provides such an option. Proposers should refer to the earlier sections of this RFP before responding to any of the questions, to ensure that you have a complete understanding of the requirements with respect to your organization's proposal.

Vendors may include additional information that you consider relevant or useful to NDPERS. However, responses to all of the questions set forth below must be provided.

PERS is interested in evaluating financial arrangements based on the traditional approach to PBM pricing and pricing under a transparent arrangement. "Traditional" financial proposals should include guaranteed effective rate discounts, as well as specific fees and guaranteed rebate dollar amounts. "Transparency" for purposes of this Request for Proposal is defined as a full pass through to PERS of all monies paid to the PBM arising from all contracted arrangements. **When answering questions and completing exhibits related to your financial proposal, please indicate if your answer would differ under a transparent or a traditional pricing arrangement.** PERS will give preference to transparent proposals.

If this proposal results in your company being awarded a contract and if, in the preparation of that contract, there are inconsistencies between what was proposed and accepted versus the contract language that has been generated and executed, any controversy arising over such discrepancy will be resolved in favor of the language contained in the proposal or correspondence relating to your proposal. Vendors are reminded that **any and all deviations must be clearly identified and described in the RFP and the deviations worksheet provided in Appendix F.**

The questionnaire is broken down into the following 13 (thirteen) categories:

- Organizational Background, Strength, and Experience
- Implementation and Account Management
- Communications and Website
- Plan Administration
- Eligibility and Billing
- Customer/Member Service
- Claims Administration
- Reporting
- Case/Utilization Management
- Health Risk Management and Wellness Programs
- Provider Network
- Performance Standards and Guarantees
- Pharmacy Benefits Management Services

6.1 Organizational Background, Strength, and Experience

1. Provide a brief description of your organization, including your company history, organizational structure, services provided, location of headquarters, and length of time you have been in business. Describe any significant historical or future organizational developments (acquisitions, mergers, change in subcontracted vendors, etc.).
2. Vendors responding to this RFP must be able to substantiate their financial stability. Provide a copy of your audited financial statement or other financial information. Include, at a minimum, a Balance Sheet and a Profit and Loss Statement, together with the name and address of the bank(s) with which you conduct business and the public accounting firm(s) that audit your financial statements. Other sufficient information may include a written statement from a financial institution confirming the creditworthiness and financial stability of the vendor.
3. Provide a copy of any State or Federal regulatory audit performed within the last two years.
4. Confirm that your organization agrees to be accountable for everything stated in and submitted as part of your proposal, even if not specifically addressed in the proposed sample contract/ASA.
5. Indicate whether your company has ever been or is currently a party to litigation regarding a medical benefit plan contract or agreement. If so, provide details of the litigation or action. Failure to disclose this may constitute grounds for rejection of any proposal or termination of any contract.
6. State whether the vendor, its officers, agents or employees, who are expected to perform services under the NDPERS contract, have been disciplined, admonished, warned, or had a license, registration, charter, certification, or any similar authorization to do business suspended or revoked for any reason.
7. Include a description of your organization's major short term strategic initiatives and your long term strategic business plan. Specifically address cost containment efforts.
8. Describe how your organization differentiates itself from your competitors. Specifically, what makes your organization the best partner for NDPERS?
9. Identify all services that are currently outsourced or subcontracted, the name of the vendor/partner, and length of the relationship. Describe how you ensure quality customer service and timely and effective issue resolution.
10. What ratings have you received from the following third party rating companies and organizations?

Rating Organization	Rating	Date of Last Accreditation / Rating
A.M. Best		
Standard & Poor's		
Moody's		
NCQA (by product)		

JCAHO		
URAC		
American HealthCare Commission		

11. What fidelity and surety insurance or bond coverage do you carry to protect your clients? Specifically describe the type and amount of the fidelity bond insuring your employees that would protect this plan in the event of a loss. Do you agree to furnish a copy of all such policies for review by legal counsel if requested?
12. Are any of the services you are proposing to provide to NDPERS contracted outside the U.S.A? Describe any business you do outside the U.S.A. and the financial impact, if any, of requiring those services to be provided within the U.S.A.
13. Confirm that your proposal includes any and all deviations to the sample ASA (via submission of Exhibit F) and to the other RFP requirements (via Exhibit F, worksheet 2).
14. Confirm that you will to the best of your ability conform to the Patient Protection and Affordable Care Act and the Health Care and Education Reconciliation Act of 2010. Describe any provisions that NDPERS must be prepared to comply with beginning July 1, 2015.

6.1.2 References and Experience

15. Provide the following information on a maximum of three (3) of your largest medical plan clients for whom you provide medical network, insurance, and administrative services. References of similar size and scope to NDPERS are preferred; one must be your largest public sector client and one must be your largest North Dakota-based client.
    a. Name of employer sponsoring plan and location
    b. Type of services provided to plan sponsor
    c. Plan inception date
    d. Length of time as client
    e. Number of contracts and members participating in the plan
    f. Contact information (name, title, phone number, email address)
16. Provide the following information for two (2) of your largest medical plan clients that have terminated services during the preceding 3-year period. References of similar size and scope to NDPERS are preferred.
    a. Name of employer sponsoring plan and location
    b. Type of services provided to plan sponsor
    c. Plan inception date
    d. Length of time as client
    e. Number of contracts and members participating in the plan
    f. Reason for termination
    g. Contact information (name, title, phone number, email address)

6.2 Implementation and Account Management

17. Proposers must outline in detail the specific activities and tasks necessary to implement the NDPERS program. Be specific with regard to the following:
    - Amount of total time needed to effectively implement the program
    - Activities/tasks and corresponding timing
    - Responsible parties and amount of time dedicated to implementation, broken out by vendor and NDPERS staff
    - Any transition activities required with incumbent carriers, including providing members adequate notice regarding current care or treatment plans at least 60 days prior to a change
    - Length of time implementation team lead and members will be available to NDPERS
18. Provide an overview of how the NDPERS relationship will be managed, both strategically and on a day-to-day basis. Include an organizational chart. NDPERS will give preference to vendors who are willing to assign a dedicated account management team and provide access to senior leadership. Designate the names, titles, location, telephone numbers, and email addresses for the representatives listed below. For the account service individuals listed (b, c, d, and e below), provide brief biographical information, such as years of service with your company, experience as it relates to this proposal, and the number of clients for which they perform similar services.
    a. The key individual representing your company during the proposal process;
    b. The key individuals on your proposed implementation team;
    c. The key individual assigned to overall contract management;
    d. The key dedicated individual or team members responsible for day-to-day account management and service;
    e. The key individual responsible for provider contracting; and
    f. The key individual responsible for provider relations if different than letter e. above.

19. Please provide the requested information for the functions that will be servicing NDPERS in the table below:

Area	**Geographical Location(s) and Organization Name (if out-sourced)**	**Hours of Operation (Specify PST/CST/EST)**	**Is this service Outsourced? Yes or No?** ***If Yes, provide name of company to which the function is outsourced***
Member Service			❑ Yes *Specify Company Name:* _____ ❑ No
Claims Processing			❑ Yes *Specify Company Name:* _____ ❑ No

Area	Geographical Location(s) and Organization Name (if out-sourced)	Hours of Operation (Specify PST/CST/EST)	Is this service Outsourced? Yes or No? *If Yes, provide name of company to which the function is outsourced*
Enrollment, Eligibility, and Billing			❑ Yes *Specify Company Name:* _____ ❑ No
Disease Management			❑ Yes *Specify Company Name:* _____ ❑ No
Case and Utilization Management			❑ Yes *Specify Company Name:* _____ ❑ No
Health, Education and Wellness Programs/Services (including dedicated wellness support staff)			❑ Yes *Specify Company Name:* _____ ❑ No
Pharmacy Benefit Management			❑ Yes *Specify Company Name:* _____ ❑ No
HSA			❑ Yes *Specify Company Name:* _____ ❑ No
Other (Specify functional area)			❑ Yes *Specify Company Name:* _____ ❑ No

Communications and Website

20. Please complete the table below by providing a description of the pre-enrollment communication materials you will provide to support NDPERS during its open enrollment period:

Area	Description	Can it be customized for NDPERS?
Website		☐ Yes ☐ No
Employee Newsletter(s)		☐ Yes ☐ No
Brochures		☐ Yes ☐ No
Direct mail (internal or home distribution)		☐ Yes ☐ No
Enrollment guide		☐ Yes ☐ No
Employee open enrollment meeting support and attendance		☐ Yes ☐ No
Benefits/HR staff training support		☐ Yes ☐ No
Video		☐ Yes ☐ No
Employee healthcare cost calculator worksheets (cost estimates)		☐ Yes ☐ No
Other (please list)		☐ Yes ☐ No

21. Are you willing to provide communication and marketing resources to work with NDPERS in the development of NDPERS-specific member communication materials (educational, open enrollment, benefit plan related, ongoing communications)? Describe the resources, sample communications, and your proposed approach and strategy/plan.

22. How much lead time is necessary for you to guarantee that ID cards will be received by members prior to the plan year effective date of July 1, 2015?

23. Describe your plan for the post-65 programs that you will offer to NDPERS retirees.

Plan Administration

24. Confirm that you will communicate legislative changes related to the operations of the plan in a timely manner, and describe the support staff and process.

25. Describe your proposed transition of care plan. At a minimum, the transition plan must address:
    a. Conditions or type of care that is typically transitioned;
    b. Individuals who are in a course of treatment;
    c. Transition process of current medical treatment;
    d. Communication of transition issues to all plan members.

26. What is your total commercial and Medicare health plan enrollment? Complete the table below.

Dates	Commercial	Medicare
As of January 2012		
As of January 2013		
As of January 2014		

6.3 Eligibility and Billing

27. Are ID cards the sole means of determining member eligibility? If not, please describe.
28. If desired, can NDPERS update and maintain eligibility and check employee claim status online? Are there any special charges for access to and use of these tools?
29. NDPERS will submit enrollment, billing and premium remittance via a centralized electronic system. NDPERS will collect enrollment/eligibility information which will be provided to the successful contractor on a data file that follows the HIPAA 834 file specifications. Premium payment information will be provided on a data file that follows the HIPAA 820 file specifications. Files will be transmitted using a secure file transmission process. Please confirm that you can receive this data in that format and media. Please confirm your ability to conform to this process and identify any potential issues.

30. Please describe how you handle manual eligibility updates and the turn-around/timing of such updates.

Customer/Member Service

31. Confirm if you will provide and maintain dedicated customer service staff acceptable to NDPERS. This unit will provide dedicated local and toll-free telephone numbers and shall respond directly to member inquiries regarding benefits, claim status, selecting participating providers, and provide general assistance with navigating on-line and other resources available through the health plan and NDPERS websites. Describe the structure and organization and provide an organizational chart of the unit you are proposing.

6.4 Claims Administration

32. Provide the following information regarding the claims administration unit that will handle the NDPERS account. If there is more than one claims processing location, provide information for each.

	Claims Processing Unit
Address/Location	
Phone Numbers	
Days and Hours of Operation	
Number of Members Serviced	
Number of Employer Groups Serviced	
Ratio of Claims Unit Staff to Members Serviced	
Volume of Claims Processed Daily	

33. Will your organization identify a dedicated team of claims processors for the NDPERS account? If processors are shared with other clients, on average, how many clients does one team service? What is the average length of service of the claim processors?

34. Confirm that you are able to administer the NDPERS designs (Dakota Plan and Dakota Retiree Plan) and benefit levels without manual intervention. If you are unable to administer the plan, you must specify any plan design deviations proposed as specified in the RFP.

35. Describe your claims processing system/platform and claims administration process.

36. How do you determine reasonable and customary ("R&C") charge allowances? What methodology is used (i.e., HIAA)? What percentile is used? How often are R&C schedules updated?

6.5 Reporting

37. Confirm your ability to provide the reports described in the RFP and provide samples.
38. Describe your online reporting capabilities. Please describe the data/information and types of reports that can be accessed and downloaded from your online system.
39. Explain your ability to comply with the NDPERS current data warehouse arrangement by providing medical claims and enrollment data to NDPERS in a format agreed upon between you and NDPERS no less than monthly.

6.6 Case/Utilization Management

40. Provide a brief overview of your utilization management programs, including pre-certification, concurrent review, discharge planning, and large case management.
41. What is the source of the criteria used for the following:
    a. Determining surgical necessity and whether a second opinion is required.
    b. Determining approved length of stay.
    c. What percentile of the data is used?
    d. Approximately what percentages of review cases are referred to a physician because the initial review and attending physician cannot reach agreement on the proposed level of care?
    e. Does this percentage vary between medical/surgical and psychiatric/substance abuse cases? If so, provide variances.

6.7 Health Risk Management Programs

42. Indicate in the table below if you currently provide the care or disease management program listed, the number of members from ND-based employers currently enrolled, the cost per participant, and its accreditation status.

	Program	Number of Members Enrolled (ND)	Cost per Participant	Accredited? If so, indicate accrediting organization.		Program	Number of Enrolled Members (ND)	Cost per Participant	Accredited? If so, indicate accrediting organization.
☐	Arthritis				☐	High Risk Pregnancy/ Prenatal Support			
☐	Asthma				☐	Hypercholesterolemia			
☐	Cancer				☐	Pain Management			

	Program	Number of Members Enrolled (ND)	Cost per Participant	Accredited? If so, indicate accrediting organization.		Program	Number of Enrolled Members (ND)	Cost per Participant	Accredited? If so, indicate accrediting organization.
☐	Congestive Heart Failure				☐	Renal Failure			
☐	COPD				☐	Smoking/Tobacco Cessation			
☐	Depression				☐	Weight Management			
☐	Diabetes				☐	Other, please indicate:			
☐	Low Back Pain				☐	Other, please indicate:			

43. Briefly describe each of the programs currently offered and the cost of each program. Do you currently track and report specific clinical outcome measurements for each of the conditions for which care/disease management is offered? Please list them.

44. Are you willing to customize your care management/DM programs and services for NDPERS? If so, please explain and provide an example.

45. Describe the programs offered to patients with rare and chronic diseases. Is this program outsourced? Who is the current vendor?

46. Describe in detail your ability to provide online wellness programs. Compare it to the existing program presently in the NDPERS program (see our website). Specifically identify any deviations from the existing program.

47. Describe Wellness incentives you offer. Compare and contrast that with the existing incentives.

48. Describe your ability to support PERS Wellness initiatives by providing the administrative services for:
    a. Tobacco Cessation program (This program is coordinated with the ND Department of Health)
    b. PERS Diabetes Program
    c. Dedicated Wellness Program Staff
    d. Prenatal program

49. Describe your ability to support the employer based wellness program and the wellness benefit funding program (see our website).

6.8 Network Accessibility and Disruption

49. We are requesting that vendors provide a GeoAccess network accessibility and disruption analysis outlining network access based on the access standards listed

below separately by North Dakota County. If you are proposing a combination of owned and leased networks, please provide your results separately by network. This GeoAccess analysis must be provided for your proposed NDPERS network(s). A census file has been provided in Appendix E for your use.

Provider Type	Access
Primary Care Providers (family/general practice, pediatrics, internal medicine and OB/GYN)	2 providers within 30 miles
Specialists	2 providers within 30 miles
Hospitals	1 hospital within 50 miles

Please provide the GeoAccess summaries in the table below as well as back-up detail (back-up detail on CD submission only) for employees who fall both within and outside the following access standards. Your match should include all valid zip codes in each of the counties in North Dakota that your network serves and in which participants reside. In addition, you should include only open practices in your analysis.

Percent of NDPERS Employees Meeting the Access						
Provider Type	**Family/ General Practice**	**Pediatrics**	**Internal Medicine**	**OB/GYN**	**Specialists**	**Hospital**
North Dakota						
County 1						
County 2						
County 3						
County 4						
County 5						
County 6						
County 7						
County 8						
County 9						
County 10						

50. Provide a listing or provider directory and link to the web for the provider networks you are proposing for NDPERS.

51. Identify and describe your national preferred provider organization.

52. Confirm your willingness to negotiate and maintain NDPERS-specific provider contracts to allow for cost control mechanisms and alignment of contract and plan years. Describe your process and approach for accomplishing this.

53. Do you anticipate any significant provider contract changes for 2015? Describe.

6.8.1 Cost, Quality, and Pay for Performance

54. Describe the programs and methodologies currently in place to gather and measure meaningful provider quality and efficiency data that can be shared with members.

55. Describe in detail the performance standards you currently have in place with your contracted physicians, provider groups, hospitals, and other providers. Outline the types of measures utilized, how you monitor and track these measures, how providers are held accountable, and how frequently the data is compiled and shared with the physicians and provider groups.

56. Describe your participation in pay-for-performance initiatives. To what extent do these activities impact the health care costs of NDPERS or claims incurred by its covered population?

6.8.2 Credentialing and Contracting

57. Briefly describe the initial credentialing process. How often are physician, hospital and other contracts (labs, imaging facilities, DME, home health care) reviewed?

6.8.3 Reimbursement and Discounts

58. Provide the reimbursement methodologies (by percentage) agreed to in your contractual arrangements to reimburse inpatient and outpatient hospital services (e.g., discount from charges, case rate, per diem, global DRG, fee schedule, etc.).

59. Provide the reimbursement methodologies (by percentage) used to reimburse professional services (e.g., fee-for-service from billed charges, fee-for-service with discount, percent of RBRVS, capitation).
60. Provide your estimate of discounts from paid charges in North Dakota.
61. Provide your estimate of percent of charges that will be processed in North Dakota under your fees schedule

62. Provide details on how prescription rebates are reimbursed to the plan.

6.9 Performance Standards and Guarantees

As described in Section I. Overview, of this RFP, health plan vendors are required to comply with performance standards and guarantees that include a financial incentive/forfeiture which is negotiated as part of the renewal process. See appendix H for a copy of these performance standards and guarantees. You are required to offer your performance standards and guarantees for the board's consideration using appendix H. It is a priority for the board to have a comprehensive set of standards and guarantees relating to this plan.

63. Please confirm you have completed appendix H and confirm your willingness to comply with the performance standards and guarantees or provide suitable alternatives. Identify any additional standards and metrics your organization would be willing to include.

6.10 Pharmacy Benefits Management Services

64. Describe your company's experience with administering pharmacy benefits. Provide a summary that includes the number of years that your company has provided such services, number and type (governmental or private) of clients, the total number of eligible employees, and the total number of actual participants that your company currently serves. Identify those clients who are large employers with multiple payroll processing centers and Medicare Part D program support.
65. Describe your company's expertise and experience in implementing PBM services for a program that is comparable in size to the NDPERS program, based on the number of covered lives.
66. Describe your mail order pharmacy program and provide details on how you market this service.
67. Describe your PBM rebate process. NDPERS is requesting that you provide a rebate guarantee in appendix H?

6.10.1 Services Provided to the NDPERS

68. Describe the timetable and specific tasks involved to have the NDPERS' program operative for the July 2015 Plan Year. Include a detailed implementation plan and business plan or timeline related to prescription drug coverage including Medicare Part D program support. At a minimum be specific with regard to the following:
    a. Amount of time needed for implementing the new program
    b. Recommended activities/tasks and timing
    c. Responsibilities of the vendor and the NDPERS staff
    d. Transition with incumbent, including providing members 90 day notice regarding formulary changes, and the communication of transition issues to all plan members.
    e. Length of time implementation team will be available and accountable to NDPERS.
    f. Identify the staff members, by area of expertise, who will be assigned to the implementation team.

6.10.2 Formulary

69. Provide details and the capabilities of your organization to provide a formulary that is at a minimum equivalent to and as comprehensive as the current formulary used by the NDPERS program. Provide sample formulary documents. At a minimum include the following:
    i Describe your policy regarding formulary changes and your procedures for educating and notifying members. Indicate how often the formulary is changed.
    ii Describe how drugs are evaluated for possible inclusion on the formulary.
    iii Describe the basis of your formulary development and maintenance?
    iv Provide specific information where a higher cost option of therapeutic equivalent drug has been included in your formulary and provide rationale for doing so.
    v What is your definition of a Generic Drug?

vi What is your definition of a Brand Drug? Describe the composition of your review board/committee and how often do they meet and how are they selected to be a member.

6.10.3 Management of Clinical Programs

70. Provide information that demonstrates your organization can effectively administer the programs listed below in order to partner the pharmacist, other health professionals and the member to ensure the optimum therapeutic outcomes for our members. Also provide information that demonstrates your organization's ability to promote the safe and effective use of medications, and help our members achieve targeted outcomes.
    a. Drug Utilization Reviews - retrospective, concurrent and prospective.
    b. Disease Management
    c. Medication Therapy Management
71. Does your organization perform retrospective DUR for all claims of a given client? Please provide frequency of retrospective DUR.
72. What is the generic utilization and substitution rate for your overall book of business nationally and in North Dakota?

	2012	2013	2014 YTD
BOOK OF BUSINESS			
Generic utilization rate			
Generic substitution rate			
NORTH DAKOTA			
Generic utilization rate			
Generic substitution rate			

73. How many MAC lists do you have for pharmacies and clients? If more than one, which list will you use for NDPERS?

	Number of MAC lists
Pharmacies	
Clients	

74. Describe your methodology for pricing (AWP, AAC, WAC, etc.)? Please explain in detail.

6.10.4 Trend Analysis

75. Your organization must be able to provide NDPERS with a comprehensive, annual trend analysis report as background for making pricing decisions. At a minimum the report must:
    a. Contain extensive utilization and drug spend data that presents future trend drivers, both industry wide and specific to our programs;
    b. Provide information on the generic pipeline, drug indication changes that may affect drug utilization, specialty drug utilization trends, new drug introductions and other similar trend drivers;
    c. Show the impacts of, and provide recommendations for addressing price inflation, rebate performance and other pricing related drivers, in addition to pharmacy network trends and opportunities.
76. Describe your organizations Trend Analysis reporting capabilities. Provide sample reports that reflect your organization's ability to provide thorough trend analysis for NDPERS.

6.10.5 Specialty Drug Program

77. Describe in detail how your organization will manage specialty and compound drugs based on NDPERS's current plan design. Provide detailed information about your organization's capabilities to administer a specialty drug program. Indicate specific results your specialty drug program has achieved for your current and past clients in terms of reduced program costs (quantitative and qualitative). Include details about the Specialty pharmacy you contract with. Provide your listing of "Specialty" drugs.

6.10.6 Network Accessibility and Disruption

78. Submit a current listing of the participating pharmacies in North Dakota.
79. How are pharmacies selected for inclusion in your network? Would your organization be willing to contract with additional pharmacies if there are geographic locations where participants live but which do not have access to one of your pharmacies?
80. Indicate which major chain stores are not included in your proposed network for NDPERS.

6.10.7 Medicare Part D

Describe the ability of your organization to provide Medicare Part D coverage for Medicare eligible retirees enrolled in the NDPERS group health insurance program. Identify any subcontractor that would be used to provide Medicare Part D coverage to the NDPERS Medicare eligible retirees and note that NDPERS reserves the right to approve the subcontractor. Also identify what type of plan would be used (e.g. fully-insured PDP, 800-Series EGWP, Direct-Contract EGWP)

6.10.8 HDHP/HSA

81. Describe how your organization will do the administration of the HSA option. What details are provided to individuals that select this option, the name of the service vendor and any other applicable information.

6.10.9 Economy to be effected

82. Please indicate if you will have an office in North Dakota and where most of the work on this contract will be done?
83. Please identify the number of employees you will employ in North Dakota pursuant to this contract
84. Of your total administrative fee please estimate the amount that will be spent in North Dakota and the amount that will spent outside the state.

North Dakota Public Employees Retirement System

Request for Proposals - Health Plan Administrator

FULLY INSURED - WITH & WITHOUT PRESCRIPTION DRUG COVERAGE

Proposers are required to complete the questions and cost proposal exhibits provided in this section. As described in Section IV., Proposal Submission, of this RFP, cost proposal exhibits (two (2) hard copies and one electronic copy) must be submitted in a separate, clearly marked sealed envelope to Deloitte Consulting only. The exhibits must be submitted in the prescribed format. Vendors may provide supplemental information but may not deviate from utilizing the provided Excel worksheets. Refer to Section IV. Proposal Submission for details. Instructions are outlined in the RFP and with each of the required exhibits (tabs).

Transparent PBM. NDPERS is interested in evaluating financial arrangements based on the traditional approach to PBM pricing and pricing under a transparent arrangement. "Traditional" financial proposals should include guaranteed effective rate discounts, as well as specific fees and guaranteed rebate dollar amounts. "Transparency" for purposes of this Request for Proposal is defined as a full pass through to NDPERS of all monies paid to the PBM arising from all contracted arrangements as well as elimination of spread pricing. When answering questions and completing exhibits related to your financial proposal, please indicate if your answer would differ under a transparent or a traditional pricing arrangement. NDPERS will give preference to transparent proposals.

The cost proposal consists of the following components and related exhibits:

- Medical & Rx Premiums (D1.1)
- Medical & Rx Premium Development (D1.2)
- Traditional Rx Terms (D1.3)
- Transparent (Pass-through) Rx Terms (D1.4)
- Medical (Only) Premiums (D1.5)
- Medical (Only) Premium Development (D1.6)
- Medicare Part D Group Prescription Drug Plan (PDP) Premiums (D2.1)
- Medicare Part D Group Prescription Drug Plan (PDP) Premium Development (D2.2)
- ACA Requirements (D3)

North Dakota Public Employees Retirement System

Request for Proposals - Health Plan Administrator

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D1.1 MEDICAL + PRESCRIPTION DRUG PREMIUMS

Proposing Vendor:

- **RATES MUST INCLUDE THE $2.80 NDPERS ADMINISTRATION FEE**
- **ASSUMES PROPOSING VENDOR WILL BE SOLE CARRIER**
- **MEDICARE RATES EXCLUDE RX**

Dakota Plan	Status	Coverage Level	Current Rate	May-14 Enrollment	Proposed Rate	Biannual Premium
State Program						
Grandfathered Plan						
July 1, 2013 – June 30, 2015	Active	Flat Rate per Contract	$981.68	15,246		
	COBRA/Part-Time/Temporary/LOA	Single	$472.74	245		
		Family	$1,139.34	48		
High Deductible Health Plan						
July 1, 2013 – June 30, 2015	Active	Flat Rate per Contract	$981.68	148		
	COBRA/Part-Time/Temporary/LOA	Single	$412.00	1		
		Family	$992.34	1		
Political Subdivision						
Grandfathered Plan						
July 1, 2013 – June 30, 2015	Active/COBRA	Single	$505.06	2,552		
		Family	$1,220.22	2,883		
NonGrandfathered Plan						
July 1, 2013 – June 30, 2015	Active/COBRA	Single	$512.74	169		
		Family	$1,238.76	213		
Non-Medicare Retirees						
Grandfathered Plan						
July 1, 2013 – June 30, 2015	Non-Medicare Retirees	Single	$709.10	385		
		Family	$1,418.20	140		
		Family 3+	$1,772.74	14		
Total				22,045		

Dakota Retiree Plan	Status	Coverage Level	Current Rate (Medical Only)	Enrollment	Proposed Rate (Medical Only)	Biannual Premium
July 1, 2013 – June 30, 2015	Medicare Eligible (Parts A&B)	Single	$167.18	4,194		
		Family	$331.56	2,015		
		One Medicare/ One Non-Medicare	$565.42	462		
Total				6,671		

CONFIRM WHETHER THE RATES ABOVE ASSUME TRADITIONAL OR TRANSPARENT/PASS-THROUGH RX TERMS. PROVIDE THE PERCENTAGE IMPACT TO THE ABOVE ACTIVE/NON-MEDICARE RATES UNDER THE OTHER RX CONTRACT TYPE

	Traditional/Pass-Through		**Impact to change to Traditional/Pass-Through**

CONFIRM THAT THE PROPOSED RATES INCLUDE $2.80 PER CONTRACT FOR THE NDPERS ADMINISTRATIVE FEE.

	Yes or No

CONFIRM YOU ARE WILLING TO ENTER INTO A RISK SHARE ARRANGEMENT AS DESCRIBED IN THE OVERVIEW OF THE NDPERS PROGRAM.

	Yes or No

North Dakota Public Employees Retirement System

Request for Proposals - Health Plan Administrator

FULLY INSURED

D1.2 PREMIUM DEVELOPMENT - MEDICAL + PRESCRIPTION DRUG PREMIUMS

Proposing Vendor:

- **RATES MUST INCLUDE THE $2.80 NDPERS ADMINISTRATION FEE**
- **ASSUMES PROPOSING VENDOR WILL BE SOLE CARRIER**
- **COMPLETE THE FOLLOWING TABLE TO DEMONSTRATE HOW YOU DEVELOPED THE PROPOSED PREMIUM RATES IN D1.1**
- **RETENTION COSTS SHOULD BE CONSISTENT WITH OVERALL/TOTAL ADMINISTRATION COST**

PREMIUM DEVELOPMENT

	YEAR 1 7/1/2015 - 6/30/2016	YEAR 2 7/1/2016 - 6/30/2017	COMBINED 7/1/2015 - 6/30/2017
Experience Period			
Claims			
Projection Period	7/1/2015 - 6/30/2016	7/1/2016 - 6/30/2017	
Midpoint	1/1/2016	1/1/2017	
Number of Months of Trend			
Trend Rate*			
Estimated Projected Claims	$	$	$
IBNR			
Estimated Projected Incurred Claims	$	$	$
Adjustments (list, explain)			
Administration/Retention**	$	$	$
Total Claims and Expenses	$	$	$

**From Trend Assumptions Table Below*
***From Administration and Retention Table Below*

TREND ASSUMPTIONS

Category	Cost	Utilization	Combined (Cost*Utilization)	Weighted Trend
Hospital Inpatient				
Hospital Outpatient				
Other Facility				
Physician Services				
Other Professional Services				
Additional Services				
Prescription Drug				
Other				
			OVERALL TREND	

ADMINISTRATION AND RETENTION - PER MEMBER PER MONTH BASIS

Component	YEAR 1 7/1/2015 - 6/30/2016	YEAR 2 7/1/2016 - 6/30/2017
Claims Processing		
Customer Service		
Communications		
Account Servicing		
Booklets		
Provider Directories		
Profit Margin		
Interest (Float)		
Risk/Contingency		
Network Access Fees		
COBRA Administration		
Conversion Charges		
Disease Management Programs		
Wellness Programs		
PPACA Fees		
All Other (list, explain)		
TOTAL		

COMMENTS:

1. List Disease Management Programs to be provided and included in the administrative fee above.

2. List Wellness Programs to be provided and included in the administrative fee above.

3. List any additional fees not included above NDPERS may be responsible for.

North Dakota Public Employees Retirement System
Request for Proposals - Health Plan Administrator

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D1.3 TRADITIONAL PRESCRIPTION DRUG PROPOSAL

Proposing Vendor:

Assumptions:
- Retail and mail discounts are fixed and guaranteed
- PERS will not be assessed administration fees
- Dispensing fees are fixed at retail with guaranteed per script maximum and no dispensing fees at mail
- Bidder will pass through 100% of rebates and “rebate-like” revenues received from pharmaceutical manufacturers (defined as all revenue/financial benefits and credits received from outside sources attributed to the utilization of PERS or enrollment in programs. These would include but are not limited to all Manufacturer Administration Fees, Formulary Access Rebates (inclusive of any bundling), Market Share Rebates, Performance/Incentive Rebates, Data Fees, Compliance Program Funding, Clinical Program support/funding, Therapeutic Intervention funding, Education Fees, Marketing Grants for Clinical Studies, Specialty Drug Rebates, Specialty Clinical/Case Management Funding, Specialty Compliance Program funding, Research, Prompt Payment Discounts, etc.as a consequence of any relationship with PERS. Bidder will also include minimum rebate guarantees, preferably on a per paid claim basis (per brand basis may is also acceptable, however per rebatable claim basis is not acceptable).

Traditional Proposal - Contract Pricing Terms

Ingredient discounts based on the following definitions:	Confirm	If not "Confirm" Explanation:
Guarantees are based on the AWP and MAC (combined MAC and Non-MAC) discounts	Confirmed	
Guarantees include "Zero Balance Due" claims at the guaranteed AWP component discount and shall not be counted as AWP-100%	Confirmed	
Guarantees exclude all claims that adjudicate at the "Usual & Customary" price	Confirmed	
Brand discount guarantees exclude multi-source brand (MSB) drugs subject to MAC pricing; generic discount guarantees include MSB drugs subject to MAC pricing	Confirmed	
Calculations exclude specialty/biotech drugs, compound drugs, vaccines, claim audit recoveries, therapeutic substitution savings, COB savings, DMR savings	Confirmed	

1.) Broadest Network Offering		
I. Guaranteed Ingredient Discounts	**7/1/2015 - 6/30/2017**	**Comments**
Retail		
Brand (AWP - __%)		
Generic (MAC - __%)		
Generic (not on MAC) (AWP - __%)		
Guaranteed Overall Generic Discount		
Mail Order		
Brand (AWP - __%)		
Generic (MAC - __%)		
Generic (not on MAC) (AWP - __%)		
Guaranteed Overall Generic Discount		
Specialty		
Brand (AWP - __%)		
Generic (MAC - __%)		
Generic (not on MAC) (AWP - __%)		
Guaranteed Overall Generic Discount		
II. Guaranteed Dispensing Fees (Per Paid Script)		
Retail		
Brand		
Generic		
Mail Order		
Brand		
Generic		
Specialty		
Brand at Retail		
Generic at Retail		
Brand at Mail (Specialty Provider)		
Generic at Mail (Specialty Provider)		
III. Administrative Fees		
Per Employee Per Month (PEPM)		
Retail (per script)		
Brand		
Generic		
Mail Order (per script)		
Brand		

Generic		
Specialty (per script)		
Brand at Retail		
Generic at Retail		
Brand at Mail (Specialty Provider)		
Generic at Mail (Specialty Provider)		
Per Paper Claim		
IV. Guaranteed Rebates		
Retail		
Per Script		
Per Brand Script		
Estimated Annual Rebate (Total)		
Mail Order		
Per Script		
Per Brand Script		
Estimated Annual Rebate (Total)		
Specialty at Retail		
Per Script		
Per Brand Script		
Estimated Annual Rebate (Total)		
Specialty at Mail (through Specialty Provider)		
Per Script		
Per Brand Script		
Estimated Annual Rebate (Total)		
Are there any terms attached to the rebate guarantee? (i.e. formulary compliance). Provide all details.		
Confirm 100% of rebates will be shared.		
Will rebates earned above the guarantee be shared with PERS?		
At what percentage will rebates above the guarantee be shared with PERS?		

V. Allowances	7/1/2015 - 6/30/2017	Comments
Pre-Implementation Audit		
Total Dollar ($) Amount		
Basis: Per Member or Per Employee		
Implementation		
Total Dollar ($) Amount		
Basis: Per Member or Per Employee		
Communication		
Total Dollar ($) Amount		
Basis: Per Member or Per Employee		
Audit		
Total Dollar ($) Amount		
Basis: Per Member or Per Employee		
Other (Please Describe)		
Total Dollar ($) Amount		
Basis: Per Member or Per Employee		

North Dakota Public Employees Retirement System
Request for Proposals - Health Plan Administrator

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D1.4 PASS-THROUGH PRESCRIPTION DRUG PROPOSAL

Proposing Vendor:

Assumptions:
- Retail discounts and dispensing fees are 100% pass through
- Bidder may assess an administration fee if appropriate
- Mail service terms reflect a standard “traditional” proposal where discounts are fixed
- Bidder will pass through 100% of rebates and “rebate-like” revenues received from pharmaceutical manufacturers (defined as all revenue/financial benefits and credits received from outside sources attributed to the utilization of PERS or enrollment in programs. These would include but are not limited to all Manufacturer Administration Fees, Formulary Access Rebates (inclusive of any bundling), Market Share Rebates, Performance/Incentive Rebates, Data Fees, Compliance Program Funding, Clinical Program support/funding, Therapeutic Intervention funding, Education Fees, Marketing Grants for Clinical Studies, Specialty Drug Rebates, Specialty Clinical/Case Management Funding, Specialty Compliance Program funding, Research, Prompt Payment Discounts, etc.as a consequence of any relationship with PERS. Bidder will also include minimum rebate guarantees, preferably on a per paid claim basis (per brand basis may is also acceptable, however per rebatable claim basis is not acceptable).

Pass Through Proposal - Contract Pricing Terms

Ingredient discounts based on the following definitions:	Confirm	If not "Confirm" Explanation:
Guarantees are based on the AWP and MAC (combined MAC and Non-MAC) discounts	Confirmed	
Guarantees include "Zero Balance Due" claims at the guaranteed AWP component discount and shall not be counted as AWP-100%	Confirmed	
Guarantees exclude all claims that adjudicate at the "Usual & Customary" price	Confirmed	
Brand discount guarantees exclude multi-source brand (MSB) drugs subject to MAC pricing; generic discount guarantees include MSB drugs subject to MAC pricing	Confirmed	
Calculations exclude specialty/biotech drugs, compound drugs, vaccines, claim audit recoveries, therapeutic substitution savings, COB savings, DMR savings	Confirmed	

1.) Broadest Network Offering		
I. Guaranteed Ingredient Discounts	**7/1/2015 - 6/30/2017**	**Comments**
Retail		
Brand (AWP - __%)		
Generic (MAC - __%)		
Generic (not on MAC) (AWP - __%)		
Guaranteed Overall Generic Discount		
Mail Order		
Brand (AWP - __%)		
Generic (MAC - __%)		
Generic (not on MAC) (AWP - __%)		
Guaranteed Overall Generic Discount		
Specialty		
Brand (AWP - __%)		
Generic (MAC - __%)		
Generic (not on MAC) (AWP - __%)		
Guaranteed Overall Generic Discount		
II. Guaranteed Dispensing Fees (Per Paid Script)		
Retail		
Brand		
Generic		
Mail Order		
Brand		
Generic		
Specialty		
Brand at Retail		
Generic at Retail		
Brand at Mail (Specialty Provider)		
Generic at Mail (Specialty Provider)		
III. Administrative Fees		
Per Employee Per Month (PEPM)		
Retail (per script)		
Brand		
Generic		
Mail Order (per script)		
Brand		

Generic		
Specialty (per script)		
Brand at Retail		
Generic at Retail		
Brand at Mail (Specialty Provider)		
Generic at Mail (Specialty Provider)		
Per Paper Claim		
IV. Guaranteed Rebates		
Retail		
Per Script		
Per Brand Script		
Estimated Annual Rebate (Total)		
Mail Order		
Per Script		
Per Brand Script		
Estimated Annual Rebate (Total)		
Specialty at Retail		
Per Script		
Per Brand Script		
Estimated Annual Rebate (Total)		
Specialty at Mail (through Specialty Provider)		
Per Script		
Per Brand Script		
Estimated Annual Rebate (Total)		
Are there any terms attached to the rebate guarantee? (i.e. formulary compliance). Provide all details.		
Confirm 100% of rebates will be shared.		
Will rebates earned above the guarantee be shared with PERS?		
At what percentage will rebates above the guarantee be shared with PERS?		

V. Allowances	7/1/2015 - 6/30/2017	Comments
Pre-Implementation Audit		
Total Dollar ($) Amount		
Basis: Per Member or Per Employee		
Implementation		
Total Dollar ($) Amount		
Basis: Per Member or Per Employee		
Communication		
Total Dollar ($) Amount		
Basis: Per Member or Per Employee		
Audit		
Total Dollar ($) Amount		
Basis: Per Member or Per Employee		
Other (Please Describe)		
Total Dollar ($) Amount		
Basis: Per Member or Per Employee		

North Dakota Public Employees Retirement System
Request for Proposals - Health Plan Administrator

FULLY INSURED

D1.5 MEDICAL (ONLY) PREMIUMS

Proposing Vendor:

- **RATES MUST INCLUDE THE $2.80 NDPERS ADMINISTRATION FEE**
- **ASSUMES PROPOSING VENDOR WILL BE SOLE CARRIER**
- **ALL PROPOSED RATES SHOULD ASSUME RX IS CARVED OUT**

Dakota Plan	Status	Coverage Level	Current Rate	May-14 Enrollment	Proposed Rate	Biannual Premium
State Program						
Grandfathered Plan						
July 1, 2013 – June 30, 2015	Active	Flat Rate per Contract	$981.68	15,246		
	COBRA/Part-Time/Temporary/LOA	Single	$472.74	245		
		Family	$1,139.34	48		
High Deductible Health Plan						
July 1, 2013 – June 30, 2015	Active	Flat Rate per Contract	$981.68	148		
	COBRA/Part-Time/Temporary/LOA	Single	$412.00	1		
		Family	$992.34	1		
Political Subdivision						
Grandfathered Plan						
July 1, 2013 – June 30, 2015	Active/COBRA	Single	$505.06	2,552		
		Family	$1,220.22	2,883		
NonGrandfathered Plan						
July 1, 2013 – June 30, 2015	Active/COBRA	Single	$512.74	169		
		Family	$1,238.76	213		
Non-Medicare Retirees						
Grandfathered Plan						
July 1, 2013 – June 30, 2015	Non-Medicare Retirees	Single	$709.10	385		
		Family	$1,418.20	140		
		Family 3+	$1,772.74	14		
Total				22,045		

Dakota Retiree Plan	Status	Coverage Level	Current Rate (Medical Only)	Enrollment	Proposed Rate (Medical Only)	Biannual Premium
July 1, 2013 – June 30, 2015	Medicare Eligible (Parts A&B)	Single	$167.18	4,194		
		Family	$331.56	2,015		
		One Medicare/ One Non-Medicare	$565.42	462		
Total				6,671		

CONFIRM THAT THE PROPOSED RATES INCLUDE $2.80 PER CONTRACT FOR THE NDPERS ADMINISTRATIVE FEE.

	Yes or No

CONFIRM YOU ARE WILLING TO ENTER INTO A RISK SHARE ARRANGEMENT AS DESCRIBED IN THE OVERVIEW OF THE NDPERS PROGRAM.

	Yes or No

North Dakota Public Employees Retirement System

Request for Proposals - Health Plan Administrator

FULLY INSURED

D1.6 PREMIUM DEVELOPMENT - MEDICAL (ONLY) PREMIUMS

Proposing Vendor:

- **RATES MUST INCLUDE THE $2.80 NDPERS ADMINISTRATION FEE**
- **ASSUMES PROPOSING VENDOR WILL BE SOLE CARRIER**
- **COMPLETE THE FOLLOWING TABLE TO DEMONSTRATE HOW YOU DEVELOPED THE PROPOSED PREMIUM RATES IN D1.1**
- **RETENTION COSTS SHOULD BE CONSISTENT WITH OVERALL/TOTAL ADMINISTRATION COST**

PREMIUM DEVELOPMENT

	YEAR 1 7/1/2015 - 6/30/2016	YEAR 2 7/1/2016 - 6/30/2017	COMBINED 7/1/2015 - 6/30/2017
Experience Period **Claims**			
Projection Period **Midpoint**	7/1/2015 - 6/30/2016 1/1/2016	7/1/2016 - 6/30/2017 1/1/2017	
Number of Months of Trend **Trend Rate***			
Estimated Projected Claims	$	$	$
IBNR			
Estimated Projected Incurred Claims	$	$	$
Adjustments (list, explain)			
Administration/Retention**	$	$	$
Total Claims and Expenses	$	$	$

**From Trend Assumptions Table Below*
***From Administration and Retention Table Below*

TREND ASSUMPTIONS

Category	Cost	Utilization	Combined (Cost*Utilization)	Weighted Trend
Hospital Inpatient				
Hospital Outpatient				
Other Facility				
Physician Services				
Other Professional Services				
Additional Services				
~~Prescription Drug~~				
Other				
			OVERALL TREND	

ADMINISTRATION AND RETENTION - PER MEMBER PER MONTH BASIS

Component	YEAR 1 7/1/2015 - 6/30/2016	YEAR 2 7/1/2016 - 6/30/2017
Claims Processing		
Customer Service		
Communications		
Account Servicing		
Booklets		
Provider Directories		
Profit Margin		
Interest (Float)		
Risk/Contingency		
Network Access Fees		
COBRA Administration		
Conversion Charges		
Disease Management Programs		
Wellness Programs		
PPACA Fees		
All Other (list, explain)		
TOTAL		

COMMENTS:

1. List Disease Management Programs to be provided and included in the administrative fee above.

2. List Wellness Programs to be provided and included in the administrative fee above.

3. List any additional fees not included above NDPERS may be responsible for.

North Dakota Public Employees Retirement System

Request for Proposals - Health Plan Administrator

FULLY INSURED

D2.1 MEDICARE PART D GROUP PDP

Proposing Vendor:

• PREMIUM ESTIMATE TO BE BASED ON CURRENT ENROLLMENT AND PLAN DESIGN
• PRODUCT SHOULD BE CMS-ENDORSED, INSURED PDP PRODUCT WITH FULLY-INSURED WRAP-AROUND COVERAGE THAT COVERS ANY GAPS BETWEEN WHAT IS COVERED BY THE PDP PRODUCT AND THE EXISTING PLAN BENEFITS AVAILABLE TO QUALIFYING MEMBERS.

Premium	PDP Product	Wrap-around Coverage	Total
2016 Single	$	$	$
2016 Family	$	$	$
2017 Single	$	$	$
2017 Family	$	$	$

Please describe any assumptions that went into the rates above:

North Dakota Public Employees Retirement System

Request for Proposals - Health Plan Administrator

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D2.2 MEDICARE PART D GROUP PDP PREMIUM DEVELOPMENT

Proposing Vendor:

- **PREMIUM ESTIMATE TO BE BASED ON CURRENT ENROLLMENT AND PLAN DESIGN**
- **PRODUCT SHOULD BE CMS-ENDORSED, INSURED PDP PRODUCT WITH FULLY-INSURED WRAP-AROUND COVERAGE THAT COVERS ANY GAPS BETWEEN WHAT IS COVERED BY THE PDP PRODUCT AND THE EXISTING PLAN BENEFITS AVAILABLE TO QUALIFYING MEMBERS.**
- **PROVIDE A CLEAR RATE DEVELOPMENT SUMMARY INCLUDING ESTIMATES OF TREND, ADMINISTRATIVE EXPENSES, REBATES, PROFIT MARGIN, ETC.**

North Dakota Public Employees Retirement System

Request for Proposals - Health Plan Administrator

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D3 ACA Requirements

Proposing Vendor:

- **PLEASE CONFIRM THE ACA REQUIREMENTS BELOW WILL BE IMPLEMENTED AND PROVIDE THE ACTUARIAL IMPACT (IF ANY) OF EACH**
- **PLEASE CONFIRM THESE REQUIREMENTS WILL BE IMPLEMENTED**

NDPERS 2015-2017 ACA Implementation Impact

	Issue	*Description*	*NDPERS*			*Actuarial Impact (%)*
			Grandfathered Dakota Plan	**Not Grandfathered Dakota Plan**	**Not Grandfathered NDPERS HDHP**	
1	***Out-of-Pocket Maximum***	All member out of pocket costs including deductible, coinsurance, copays, and Rx are required to accumulate to the out of pocket maximum. Current separate Rx OOP maximum will be removed and Rx will apply to the overall OOP max. Non-formulary Rx sanction and infertility will not apply to OOP max.	**N/A**	**X**	**X**	
2	***Removal of Waiting Period***	Removal of all waiting periods associated with pre-existing conditions	**X**	**X**	**X**	
3	***Conversion Language***	There is no longer a specific conversion product, but there is still a conversion privilege used to purchase an individual metallic plan. This conversion privilege impacts what effective date a member can sign up once employment with NDPERS ends and ensures continuous coverage for members that apply within required timeframes	**X**	**X**	**X**	

4	***BlueCard (Applicable to BCBS Only)***	Federal law or laws in a small number or states may require the Host Blue to add a surcharge to the calculation. If federal law or any state laws mandate other liability calculation methods, including a surcharge, BCBSND would then calculate the Member's liability for any Covered Services according to applicable law.	**X**	**X**	**X**	
5	***20% Non-Par Sanction (Remove)***	Remove the 20% non-par reduction from the Non-Grandfathered plans to comply with the OOPM mandate.	**N/A**	**X**	**X**	
6	***Eliminate Medical Qualification***	PPACA mandates that all references to Medical Qualification be removed from all products and this ties to WPD's	**X**	**X**	**X**	
7	***Alcohol Misuse***	The USPSTF recommends that clinicians screen adults age 18 years or older for alcohol misuse and provide persons engaged in risky or hazardous drinking with brief behavioral counseling interventions to reduce alcohol misuse.	**N/A**	**X**	**X**	
8	***Required Screening for Hepatitis C Virus***	The USPSTF recommends screening for hepatitis C virus (HCV) infection in persons at high risk for infection. The USPSTF also recommends offering a one-time screening for HCV infection if: born between 1945 and 1965; or ever injected drugs; or received a blood transfusion before 1992.	**N/A**	**X**	**X**	
9	***Breast Cancer Preventive Medications***	The USPSTF recommends that clinicians engage in shared, informed decision-making with women who are increased risk for breast cancer about medications to reduce their risk. For women who are at increased risk for breast cancer and at low risk for adverse medication effects, clinicians should offer to prescribe risk-reducing medications, such as tamoxifen or raloxifene.	**N/A**	**X**	**X**	

10	***Lung Cancer Screening***	The USPSTF recommends annual screening for lung cancer with low-dose computed tomography in adults ages 55 to 80 years who have a 30 pack/year smoking history and currently smoke or have quit within the past 15 years. Screening should be discontinued once a person has not smoked for 15 years or develops a health problem that substantially limits life expectancy or the ability or willingness to have curative lung surgery.	**N/A**	**X**	**X**	

NOTE: The issues that affect the Grandfathered plans are shown in red.
All of the above benefits would be effective 7-1-2015.

Comments

North Dakota Public Employees Retirement System

Health Plan Administrator Request for Proposals - Data Request

Appendix E - Item 1

Age_Gender Member Statistics

STATE EMPLOYEES

Age Range	May 2014 Member Counts Dakota Plan Male	Female	Total
Under 1	294	287	**581**
1-4	1,221	1,191	**2,412**
5-14	3,123	2,960	**6,083**
15-17	976	928	**1,904**
18-24	2,515	2,546	**5,061**
25-34	2,515	2,864	**5,379**
35-44	2,836	3,096	**5,932**
45-54	3,279	3,723	**7,002**
55-64	3,464	3,479	**6,943**
65-74	824	469	**1,293**
75+	51	20	**71**
Total	**21,098**	**21,563**	**42,661**

COBRA & Non-Medicare Retirees

Age Range	May 2014 Member Counts Dakota Plan Male	Female	Total
Under 1	1	1	**2**
1-4	2	3	**5**
5-14	15	10	**25**
15-17	5	9	**14**
18-24	23	19	**42**
25-34	11	17	**28**
35-44	7	9	**16**
45-54	28	44	**72**
55-64	433	586	**1,019**
65-74	6	4	**10**
75+	0	0	**0**
Total	**531**	**702**	**1,233**

POLITICAL SUBDIVISION

Age Range	May 2014 Member Counts Dakota Plan Male	Female	Total
Under 1	68	63	**131**
1-4	295	312	**607**
5-14	861	807	**1,668**
15-17	274	267	**541**
18-24	760	777	**1,537**
25-34	843	885	**1,728**
35-44	811	857	**1,668**
45-54	1,046	1,109	**2,155**
55-64	1,110	1,088	**2,198**
65-74	214	152	**366**
75+	12	10	**22**
Total	**6,294**	**6,327**	**12,621**

MEDICARE RETIREES

Age Range	May 2014 Member Counts Dakota Retiree Plan Male	Female	Total
Under 1	0	0	**0**
1-4	0	0	**0**
5-14	2	2	**4**
15-17	2	2	**4**
18-24	9	10	**19**
25-34	7	9	**16**
35-44	3	4	**7**
45-54	12	20	**32**
55-64	112	469	**581**
65-74	1,938	2,482	**4,420**
75+	1,477	2,152	**3,629**
Total	**3,562**	**5,150**	**8,712**

GRAND TOTAL

	May 2014 Member Counts		
Age Range	**Male**	**Female**	**Total**
Under 1	363	351	**714**
1-4	1,518	1,506	**3,024**
5-14	4,001	3,779	**7,780**
15-17	1,257	1,206	**2,463**
18-24	3,307	3,352	**6,659**
25-34	3,376	3,775	**7,151**
35-44	3,657	3,966	**7,623**
45-54	4,365	4,896	**9,261**
55-64	5,119	5,622	**10,741**
65-74	2,982	3,107	**6,089**
75+	1,540	2,182	**3,722**
Total	**31,485**	**33,742**	**65,227**

North Dakota Public Employees Retirement System

Health Plan Administrator Request for Proposals - Data Request

Appendix E - Item 2

Contract Count Summary

STATE EMPLOYEES

	Dakota Plan		
	Single	Family	Total
Jan-11	3520	11663	15183
Feb-11	3503	11655	15158
Mar-11	3510	11657	15167
Apr-11	3518	11662	15180
May-11	3515	11666	15181
Jun-11	3514	11656	15170
Jul-11	3463	11668	15131
Aug-11	3462	11674	15135
Sep-11	3495	11744	15239
Oct-11	3570	11841	15411
Nov-11	3543	11848	15391
Dec-11	3539	11867	15406
Jan-12	3521	11925	15446
Feb-12	3548	11897	15444
Mar-12	3555	11883	15438
Apr-12	3562	11886	15448
May-12	3546	11863	15409
Jun-12	3536	11858	15394
Jul-12	3521	11868	15389
Aug-12	3522	11859	15381
Sep-12	3547	11865	15411
Oct-12	3525	11822	15347
Nov-12	3557	11856	15413
Dec-12	3550	11868	15418
Jan-13	3514	11809	15323
Feb-13	3522	11840	15362
Mar-13	3532	11847	15378
Apr-13	3548	11847	15395
May-13	3546	11839	15385
Jun-13	3572	11816	15388
Jul-13	3548	11839	15387
Aug-13	3564	11842	15406
Sep-13	3611	11865	15476
Oct-13	3599	11884	15482
Nov-13	3609	11880	15489
Dec-13	3609	11873	15482
Jan-14	3580	11960	15540
Feb-14	3608	11988	15596
Mar-14	3609	11993	15602
Apr-14	3619	11993	15612
May-14	3632	11972	15604
Grand Total	**145,464**	**485,138**	**630,597**

COBRA & Non-Medicare Retirees

	Dakota Plan		
	Single	Family	Total
Jan-11	706	289	995
Feb-11	704	296	1000
Mar-11	703	293	996
Apr-11	704	289	993
May-11	696	290	986
Jun-11	701	290	991
Jul-11	681	291	972
Aug-11	691	300	991
Sep-11	708	312	1020
Oct-11	701	307	1008
Nov-11	695	306	1001
Dec-11	695	298	993
Jan-12	681	296	977
Feb-12	681	293	974
Mar-12	686	293	979
Apr-12	698	286	984
May-12	695	282	977
Jun-12	704	286	990
Jul-12	709	286	995
Aug-12	711	280	991
Sep-12	725	296	1021
Oct-12	730	289	1019
Nov-12	727	283	1010
Dec-12	722	276	997
Jan-13	730	275	1005
Feb-13	737	274	1011
Mar-13	736	271	1007
Apr-13	732	270	1002
May-13	736	268	1004
Jun-13	723	258	981
Jul-13	733	257	990
Aug-13	755	251	1006
Sep-13	779	258	1037
Oct-13	780	251	1031
Nov-13	772	248	1020
Dec-13	769	247	1016
Jan-14	738	234	972
Feb-14	733	218	951
Mar-14	729	210	939
Apr-14	721	214	935
May-14	708	216	924
Grand Total	**29,465**	**11,227**	**40,691**

GRAND TOTAL

	Single	Family	Total
Jan-11	9,820	16,331	**26,151**
Feb-11	9,825	16,323	**26,148**
Mar-11	9,845	16,318	**26,163**
Apr-11	9,864	16,327	**26,191**
May-11	9,862	16,343	**26,205**
Jun-11	9,872	16,334	**26,206**
Jul-11	9,800	16,346	**26,146**
Aug-11	9,820	16,364	**26,184**
Sep-11	9,899	16,470	**26,369**
Oct-11	9,968	16,582	**26,550**
Nov-11	9,943	16,605	**26,548**
Dec-11	9,952	16,630	**26,582**
Jan-12	10,325	17,100	**27,425**
Feb-12	10,395	17,076	**27,471**
Mar-12	10,423	17,073	**27,496**
Apr-12	10,457	17,070	**27,527**
May-12	10,431	17,068	**27,499**
Jun-12	10,466	17,058	**27,524**
Jul-12	10,463	17,099	**27,562**
Aug-12	10,481	17,105	**27,586**
Sep-12	10,600	17,167	**27,767**
Oct-12	10,566	17,142	**27,708**
Nov-12	10,618	17,182	**27,800**
Dec-12	10,612	17,200	**27,812**
Jan-13	10,598	17,274	**27,872**
Feb-13	10,639	17,324	**27,963**
Mar-13	10,657	17,344	**28,001**
Apr-13	10,687	17,347	**28,034**
May-13	10,706	17,346	**28,052**
Jun-13	10,751	17,327	**28,078**
Jul-13	10,736	17,351	**28,087**
Aug-13	10,805	17,375	**28,180**
Sep-13	10,923	17,436	**28,359**
Oct-13	10,920	17,468	**28,388**
Nov-13	10,956	17,470	**28,426**
Dec-13	10,962	17,468	**28,430**
Jan-14	10,926	17,615	**28,541**
Feb-14	10,978	17,646	**28,624**
Mar-14	10,989	17,656	**28,645**
Apr-14	11,019	17,665	**28,684**
May-14	11,049	17,662	**28,711**
Grand Total	**428,608**	**699,087**	**1,127,695**

POLITICAL SUBDIVISION

	Dakota Plan		
	Single	Family	Total
Jan-11	2045	2397	4442
Feb-11	2061	2389	4450
Mar-11	2063	2381	4444
Apr-11	2066	2380	4446
May-11	2061	2386	4447
Jun-11	2056	2384	4440
Jul-11	2039	2382	4421
Aug-11	2040	2376	4416
Sep-11	2036	2379	4415
Oct-11	2014	2383	4397
Nov-11	2011	2390	4401

MEDICARE RETIREES

	Dakota Retiree Plan			
	Single	Family	Family 1	Total
Jan-11	3549	1618	364	5531
Feb-11	3557	1618	365	5540
Mar-11	3569	1621	366	5555
Apr-11	3576	1627	369	5572
May-11	3590	1627	374	5591
Jun-11	3601	1630	374	5605
Jul-11	3617	1632	373	5622
Aug-11	3627	1641	373	5641
Sep-11	3660	1652	383	5695
Oct-11	3683	1666	385	5734
Nov-11	3694	1673	388	5755

Dec-11	2009	2393	4402
Jan-12	2342	2763	5105
Feb-12	2358	2750	5108
Mar-12	2362	2751	5113
Apr-12	2367	2748	5115
May-12	2352	2756	5108
Jun-12	2376	2744	5119
Jul-12	2375	2756	5131
Aug-12	2368	2758	5126
Sep-12	2425	2773	5198
Oct-12	2397	2772	5169
Nov-12	2412	2782	5194
Dec-12	2413	2784	5197
Jan-13	2422	2920	5342
Feb-13	2430	2922	5352
Mar-13	2429	2926	5355
Apr-13	2440	2933	5373
May-13	2451	2939	5390
Jun-13	2462	2943	5405
Jul-13	2447	2926	5373
Aug-13	2459	2930	5389
Sep-13	2471	2932	5403
Oct-13	2450	2930	5380
Nov-13	2468	2944	5412
Dec-13	2466	2936	5402
Jan-14	2473	3005	5478
Feb-14	2491	3003	5494
Mar-14	2493	2999	5492
Apr-14	2499	3003	5502
May-14	2517	3008	5525
Grand Total	**94,916**	**111,956**	**206,871**

Dec-11	3709	1678	394	5780
Jan-12	3781	1719	397	5896
Feb-12	3808	1725	411	5944
Mar-12	3820	1739	407	5966
Apr-12	3830	1740	410	5980
May-12	3838	1756	411	6005
Jun-12	3850	1759	411	6020
Jul-12	3858	1777	412	6047
Aug-12	3880	1797	411	6088
Sep-12	3903	1812	421	6135
Oct-12	3914	1831	428	6173
Nov-12	3922	1836	425	6183
Dec-12	3927	1844	428	6198
Jan-13	3932	1842	428	6202
Feb-13	3950	1859	429	6238
Mar-13	3960	1868	432	6260
Apr-13	3967	1872	425	6264
May-13	3973	1883	417	6272
Jun-13	3994	1889	421	6304
Jul-13	4008	1911	418	6337
Aug-13	4027	1927	425	6379
Sep-13	4062	1949	432	6443
Oct-13	4091	1959	444	6494
Nov-13	4107	1959	439	6504
Dec-13	4118	1976	436	6529
Jan-14	4135	1973	443	6551
Feb-14	4146	1981	456	6583
Mar-14	4158	1998	456	6611
Apr-14	4180	1999	456	6634
May-14	4192	2007	459	6658
Grand Total	**158,763**	**73,870**	**16,896**	**249,519**

North Dakota Public Employees Retirement System

Health Plan Administrator Request for Proposals - Data Request

Appendix E - Item 3

Member Count Summary

STATE EMPLOYEES

	Dakota Plan		
	Single	Family	Total
Jan-11	3520	36591	40111
Feb-11	3503	36602	40105
Mar-11	3510	36622	40132
Apr-11	3518	36654	40172
May-11	3515	36687	40202
Jun-11	3514	36676	40189
Jul-11	3463	37041	40504
Aug-11	3462	37155	40616
Sep-11	3495	37369	40864
Oct-11	3570	37663	41233
Nov-11	3543	37699	41242
Dec-11	3539	37775	41314
Jan-12	3521	37998	41519
Feb-12	3548	37963	41510
Mar-12	3555	37956	41511
Apr-12	3562	37998	41560
May-12	3546	37979	41525
Jun-12	3536	38000	41536
Jul-12	3521	38172	41693
Aug-12	3522	38184	41706
Sep-12	3547	38236	41783
Oct-12	3525	38074	41598
Nov-12	3557	38208	41765
Dec-12	3550	38248	41798
Jan-13	3514	38119	41633
Feb-13	3522	38265	41787
Mar-13	3532	38307	41838
Apr-13	3548	38307	41855
May-13	3546	38285	41830
Jun-13	3572	38210	41782
Jul-13	3548	38339	41886
Aug-13	3564	38413	41977
Sep-13	3611	38523	42134
Oct-13	3599	38582	42181
Nov-13	3609	38589	42198
Dec-13	3609	38587	42196
Jan-14	3580	38885	42465
Feb-14	3608	38998	42606
Mar-14	3609	39040	42649
Apr-14	3619	39065	42684
May-14	3632	39027	42659
Grand Total	**145,464**	**1,557,091**	**1,702,548**

COBRA & Non-Medicare Retirees

	Dakota Plan		
	Single	Family	Total
Jan-11	707	637	1344
Feb-11	705	658	1363
Mar-11	704	649	1353
Apr-11	705	638	1343
May-11	697	645	1342
Jun-11	702	652	1354
Jul-11	681	653	1334
Aug-11	691	676	1367
Sep-11	708	715	1423
Oct-11	701	700	1401
Nov-11	695	698	1393
Dec-11	695	681	1376
Jan-12	681	669	1350
Feb-12	681	659	1340
Mar-12	686	648	1333
Apr-12	698	627	1325
May-12	695	620	1315
Jun-12	704	637	1341
Jul-12	709	634	1343
Aug-12	711	610	1321
Sep-12	725	660	1385
Oct-12	730	660	1390
Nov-12	727	646	1373
Dec-12	722	637	1358
Jan-13	730	634	1364
Feb-13	737	644	1381
Mar-13	736	631	1367
Apr-13	732	630	1362
May-13	736	621	1357
Jun-13	723	599	1322
Jul-13	733	603	1336
Aug-13	755	596	1351
Sep-13	779	623	1402
Oct-13	780	606	1386
Nov-13	772	593	1365
Dec-13	769	592	1361
Jan-14	738	560	1298
Feb-14	733	516	1249
Mar-14	729	496	1225
Apr-14	721	510	1231
May-14	708	523	1231
Grand Total	**29,471**	**25,686**	**55,155**

GRAND TOTAL

	Single	Family	Total
Jan-11	9,821	48,574	**58,395**
Feb-11	9,826	48,597	**58,423**
Mar-11	9,846	48,602	**58,448**
Apr-11	9,865	48,645	**58,510**
May-11	9,863	48,717	**58,580**
Jun-11	9,873	48,729	**58,602**
Jul-11	9,800	49,143	**58,943**
Aug-11	9,820	49,291	**59,111**
Sep-11	9,899	49,594	**59,493**
Oct-11	9,968	49,900	**59,868**
Nov-11	9,943	50,004	**59,947**
Dec-11	9,952	50,101	**60,053**
Jan-12	10,325	51,708	**62,033**
Feb-12	10,395	51,669	**62,064**
Mar-12	10,423	51,682	**62,105**
Apr-12	10,457	51,699	**62,156**
May-12	10,431	51,729	**62,160**
Jun-12	10,466	51,734	**62,200**
Jul-12	10,463	52,023	**62,486**
Aug-12	10,481	52,051	**62,532**
Sep-12	10,600	52,242	**62,842**
Oct-12	10,566	52,131	**62,697**
Nov-12	10,618	52,312	**62,930**
Dec-12	10,612	52,385	**62,997**
Jan-13	10,598	52,724	**63,322**
Feb-13	10,639	52,915	**63,554**
Mar-13	10,657	52,981	**63,638**
Apr-13	10,687	52,998	**63,685**
May-13	10,706	53,007	**63,713**
Jun-13	10,751	52,942	**63,693**
Jul-13	10,736	53,045	**63,781**
Aug-13	10,805	53,174	**63,979**
Sep-13	10,923	53,364	**64,287**
Oct-13	10,920	53,456	**64,376**
Nov-13	10,956	53,476	**64,432**
Dec-13	10,962	53,500	**64,462**
Jan-14	10,926	54,007	**64,933**
Feb-14	10,978	54,064	**65,042**
Mar-14	10,989	54,108	**65,097**
Apr-14	11,019	54,171	**65,190**
May-14	11,049	54,168	**65,217**
Grand Total	**428,614**	**2,121,362**	**2,549,976**

POLITICAL SUBDIVISION

	Dakota Plan		
	Single	Family	Total
Jan-11	2045	7718	9763
Feb-11	2061	7706	9767
Mar-11	2063	7690	9753
Apr-11	2066	7698	9763
May-11	2061	7726	9787
Jun-11	2056	7734	9790
Jul-11	2039	7777	9816
Aug-11	2040	7771	9811
Sep-11	2036	7788	9824
Oct-11	2014	7783	9797
Nov-11	2011	7835	9846

MEDICARE RETIREES

	Dakota Retiree Plan			
	Single	Family	Family 1	Total
Jan-11	3549	3236	392	7177
Feb-11	3557	3236	395	7188
Mar-11	3569	3245	396	7209
Apr-11	3576	3256	399	7231
May-11	3590	3255	404	7249
Jun-11	3601	3263	404	7267
Jul-11	3617	3266	406	7289
Aug-11	3627	3284	405	7316
Sep-11	3660	3306	416	7382
Oct-11	3683	3333	421	7437
Nov-11	3694	3348	424	7466

Dec-11	2009	7859	9868
Jan-12	2342	9170	11512
Feb-12	2358	9147	11505
Mar-12	2362	9155	11517
Apr-12	2367	9146	11513
May-12	2352	9171	11523
Jun-12	2376	9129	11505
Jul-12	2375	9214	11588
Aug-12	2368	9216	11583
Sep-12	2425	9265	11690
Oct-12	2397	9268	11665
Nov-12	2412	9324	11736
Dec-12	2413	9344	11757
Jan-13	2422	9815	12237
Feb-13	2430	9816	12246
Mar-13	2429	9832	12261
Apr-13	2440	9850	12290
May-13	2451	9875	12326
Jun-13	2462	9890	12352
Jul-13	2447	9821	12267
Aug-13	2459	9843	12302
Sep-13	2471	9844	12315
Oct-13	2450	9861	12311
Nov-13	2468	9893	12361
Dec-13	2466	9889	12355
Jan-14	2473	10129	12601
Feb-14	2491	10086	12577
Mar-14	2493	10075	12568
Apr-14	2499	10097	12596
May-14	2517	10099	12616
Grand Total	**94,916**	**372,349**	**467,260**

Dec-11	3709	3356	430	7495
Jan-12	3781	3438	433	7652
Feb-12	3808	3453	447	7708
Mar-12	3820	3479	444	7742
Apr-12	3830	3482	446	7758
May-12	3838	3512	447	7797
Jun-12	3850	3519	449	7818
Jul-12	3858	3554	449	7861
Aug-12	3880	3594	447	7921
Sep-12	3903	3624	457	7983
Oct-12	3914	3664	465	8043
Nov-12	3922	3672	462	8056
Dec-12	3927	3688	468	8082
Jan-13	3932	3686	470	8087
Feb-13	3950	3719	471	8140
Mar-13	3960	3736	475	8171
Apr-13	3967	3744	467	8178
May-13	3973	3767	459	8198
Jun-13	3994	3779	464	8236
Jul-13	4008	3822	460	8290
Aug-13	4027	3856	466	8348
Sep-13	4062	3899	475	8436
Oct-13	4091	3920	487	8498
Nov-13	4107	3919	482	8507
Dec-13	4118	3953	479	8549
Jan-14	4135	3947	486	8568
Feb-14	4146	3964	500	8610
Mar-14	4158	3996	501	8654
Apr-14	4180	3999	500	8678
May-14	4192	4015	504	8711
Grand Total	**158,763**	**147,784**	**18,452**	**324,986**

North Dakota Public Employees Retirement System

Health Plan Administrator Request for Proposals - Data Request

Appendix E - Item 4

Services Count Summary (Paid Month)

STATE EMPLOYEES

	Dakota Plan			
	Pharmacy	Hospital	Physician	Total
Jan-11	28724	990	13197	42911
Feb-11	29301	3020	30337	62658
Mar-11	30142	4416	41150	75708
Apr-11	36703	3716	32958	73377
May-11	28944	4099	42006	75049
Jun-11	27428	3475	30252	61155
Jul-11	34383	3376	27940	65699
Aug-11	27169	4624	41903	73696
Sep-11	29271	3286	34758	67315
Oct-11	36817	3506	39439	79762
Nov-11	29253	4487	44350	78090
Dec-11	38364	3932	40300	82596
Jan-12	31123	4350	41576	77049
Feb-12	31578	4064	42604	78246
Mar-12	38726	4331	40465	83522
Apr-12	30824	4570	38270	73664
May-12	30293	5342	46858	82493
Jun-12	36372	4283	34723	75378
Jul-12	28264	4213	41774	74251
Aug-12	29587	4135	38591	72313
Sep-12	36972	4106	35450	76528
Oct-12	30028	5243	50157	85428
Nov-12	29279	3982	39154	72415
Dec-12	39524	3891	42275	85690
Jan-13	31732	5447	47042	84221
Feb-13	31981	4405	38843	75229
Mar-13	40213	4242	41270	85725
Apr-13	30421	5505	46573	82499
May-13	30619	3898	44231	78748
Jun-13	36691	3941	50872	91504
Jul-13	28750	4211	49591	82552
Aug-13	37121	4281	40124	81526
Sep-13	29237	4373	37713	71323
Oct-13	31037	5110	51181	87328
Nov-13	38215	4361	44418	86994
Dec-13	31220	4553	45925	81698
Jan-14	31086	4276	38486	73848
Feb-14	31688	4078	41048	76814
Mar-14	39853	4726	40454	85033
Apr-14	30368	5257	47901	83526
May-14	6743	4015	38230	48988
Grand Total	1,306,044	172,116	1,654,389	3,132,549

COBRA & Non-Medicare Retirees

	Dakota Plan			
	Pharmacy	Hospital	Physician	Total
Jan-11	2016	65	555	2636
Feb-11	1959	180	1355	3494
Mar-11	2075	233	1807	4115
Apr-11	2561	194	1628	4383
May-11	2197	266	2077	4540
Jun-11	2129	226	1688	4043
Jul-11	2449	227	1387	4063
Aug-11	2217	246	1976	4439
Sep-11	2327	179	1620	4126
Oct-11	2839	245	1999	5083
Nov-11	2296	261	2080	4637
Dec-11	2966	288	2193	5447
Jan-12	2261	302	2064	4627
Feb-12	2259	245	2026	4530
Mar-12	2724	234	1924	4882
Apr-12	2053	292	1788	4133
May-12	2192	320	2315	4827
Jun-12	2619	290	1819	4728
Jul-12	2147	304	2090	4541
Aug-12	2145	269	1887	4301
Sep-12	2857	269	1830	4956
Oct-12	2336	411	2540	5287
Nov-12	2339	288	2153	4780
Dec-12	3005	276	2257	5538
Jan-13	2261	378	2465	5104
Feb-13	2273	264	1954	4491
Mar-13	2719	243	2113	5075
Apr-13	2211	312	2186	4709
May-13	2353	264	2433	5050
Jun-13	2732	258	2508	5498
Jul-13	2202	272	2242	4716
Aug-13	2612	268	1855	4735
Sep-13	2253	273	1923	4449
Oct-13	2361	379	2582	5322
Nov-13	2726	315	2111	5152
Dec-13	2257	297	2111	4665
Jan-14	2211	249	1813	4273
Feb-14	2104	253	1941	4298
Mar-14	2498	274	1785	4557
Apr-14	2039	264	2133	4436
May-14	430	207	1733	2370
Grand Total	95,210	10,880	80,946	187,036

GRAND TOTAL

	Pharmacy	Hospital	Physician	Total
Jan-11	39,040	1,374	17,945	**58,359**
Feb-11	39,818	5,948	46,870	**92,636**
Mar-11	41,188	10,155	66,397	**117,740**
Apr-11	50,720	9,023	53,336	**113,079**
May-11	39,980	10,515	70,791	**121,286**
Jun-11	37,951	8,625	51,158	**97,734**
Jul-11	47,437	8,945	47,737	**104,119**
Aug-11	37,952	11,306	68,255	**117,513**
Sep-11	40,361	8,312	55,914	**104,587**
Oct-11	50,650	9,016	63,094	**122,760**
Nov-11	40,178	12,828	72,571	**125,577**
Dec-11	52,984	11,022	66,851	**130,857**
Jan-12	43,166	11,398	67,908	**122,472**
Feb-12	44,003	9,832	65,759	**119,594**
Mar-12	54,077	11,385	66,584	**132,046**
Apr-12	43,097	12,234	63,983	**119,314**
May-12	42,334	15,160	78,526	**136,020**
Jun-12	50,867	11,692	60,955	**123,514**
Jul-12	39,700	12,810	70,496	**123,006**
Aug-12	41,299	10,865	64,218	**116,382**
Sep-12	51,894	10,688	60,023	**122,605**
Oct-12	42,315	13,474	85,734	**141,523**
Nov-12	41,468	13,490	67,777	**122,735**
Dec-12	55,333	10,537	72,312	**138,182**
Jan-13	44,850	16,460	80,102	**141,412**
Feb-13	44,933	11,619	64,116	**120,668**
Mar-13	56,683	11,553	69,558	**137,794**
Apr-13	42,992	14,376	79,651	**137,019**
May-13	43,461	11,902	73,747	**129,110**
Jun-13	51,769	11,077	81,791	**144,637**
Jul-13	41,037	12,737	84,266	**138,040**
Aug-13	52,668	12,222	67,144	**132,034**
Sep-13	41,634	12,256	64,203	**118,093**
Oct-13	44,161	15,093	88,457	**147,711**
Nov-13	53,897	13,648	76,399	**143,944**
Dec-13	44,162	13,620	79,526	**137,308**
Jan-14	44,057	10,966	66,258	**121,281**
Feb-14	44,771	11,367	69,579	**125,717**
Mar-14	56,033	13,049	68,361	**137,443**
Apr-14	42,572	14,411	82,746	**139,729**
May-14	9,346	11,707	65,146	**86,199**
Grand Total	1,826,838	468,697	2,766,244	5,061,779

POLITICAL SUBDIVISION

	Dakota Plan			
	Pharmacy	Hospital	Physician	Total
Jan-11	7724	283	2451	10458
Feb-11	7945	844	6188	14977
Mar-11	8358	1275	8872	18505
Apr-11	10708	1094	7208	19010
May-11	8240	1308	9303	18851
Jun-11	7798	1093	6737	15628
Jul-11	9921	1089	6187	17197
Aug-11	8013	1507	9858	19378
Sep-11	8093	1282	7685	17060
Oct-11	10173	1165	8755	20093
Nov-11	8021	1411	9837	19269
Dec-11	10895	1231	9161	21287
Jan-12	9169	1520	9939	20628
Feb-12	9562	1434	10297	21293
Mar-12	11880	1763	10104	23747
Apr-12	9565	1868	9503	20936
May-12	9236	2001	11541	22778
Jun-12	11141	1556	8545	21242
Jul-12	8674	1618	10150	20442
Aug-12	8977	1494	9506	19977
Sep-12	11349	1551	9100	22000
Oct-12	9250	1971	13052	24273
Nov-12	9226	1617	10303	21146
Dec-12	11982	1414	10492	23888
Jan-13	10166	2074	12416	24656
Feb-13	10023	1556	10049	21628
Mar-13	12874	1682	10783	25339
Apr-13	9728	2185	12383	24296
May-13	9844	1453	11073	22370
Jun-13	11458	1517	12821	25796
Jul-13	9483	1771	12940	24194

MEDICARE RETIREES

	Dakota Retiree Plan			
	Pharmacy	Hospital	Physician	Total
Jan-11	576	36	1742	2354
Feb-11	613	1904	8990	11507
Mar-11	613	4231	14568	19412
Apr-11	748	4019	11542	16309
May-11	599	4842	17405	22846
Jun-11	596	3831	12481	16908
Jul-11	684	4253	12223	17160
Aug-11	553	4929	14518	20000
Sep-11	670	3565	11851	16086
Oct-11	821	4100	12901	17822
Nov-11	608	6669	16304	23581
Dec-11	759	5571	15197	21527
Jan-12	613	5226	14329	20168
Feb-12	604	4089	10832	15525
Mar-12	747	5057	14091	19895
Apr-12	655	5504	14422	20581
May-12	613	7497	17812	25922
Jun-12	735	5563	15868	22166
Jul-12	615	6675	16482	23772
Aug-12	590	4967	14234	19791
Sep-12	716	4762	13643	19121
Oct-12	701	5849	19985	26535
Nov-12	624	7603	16167	24394
Dec-12	822	4956	17288	23066
Jan-13	691	8561	18179	27431
Feb-13	656	5394	13270	19320
Mar-13	877	5386	15392	21655
Apr-13	632	6374	18509	25515
May-13	645	6287	16010	22942
Jun-13	888	5361	15590	21839
Jul-13	602	6483	19493	26578

Aug-13	12148	1690	10486	24324
Sep-13	9424	1612	10065	21101
Oct-13	10024	2020	14024	26068
Nov-13	12085	1821	11727	25633
Dec-13	9903	1888	11853	23644
Jan-14	10100	1496	10334	21930
Feb-14	10236	1634	11253	23123
Mar-14	12803	1949	10759	25511
Apr-14	9437	1865	12990	24292
May-14	2007	1521	10166	13694
Grand Total	**397,643**	**63,123**	**410,896**	**871,662**

Aug-13	787	5983	14679	21449
Sep-13	720	5998	14502	21220
Oct-13	739	7584	20670	28993
Nov-13	871	7151	18143	26165
Dec-13	782	6882	19637	27301
Jan-14	660	4945	15625	21230
Feb-14	743	5402	15337	21482
Mar-14	879	6100	15363	22342
Apr-14	728	7025	19722	27475
May-14	166	5964	15017	21147
Grand Total	**27,941**	**222,578**	**620,013**	**870,532**

North Dakota Public Employees Retirement System

Health Plan Administrator Request for Proposals - Data Request
Appendix E - Item 5
Plan Paid Dollars Summary (Paid Month)

STATE EMPLOYEES

	Dakota Plan			
	Pharmacy	Hospital	Physician	Total
Jan-11	$1,415,364	$663,715	$982,871	$3,061,950
Feb-11	$1,335,610	$2,971,747	$3,143,178	$7,450,535
Mar-11	$1,364,106	$5,431,677	$4,613,888	$11,409,670
Apr-11	$1,813,430	$4,758,903	$3,720,857	$10,293,190
May-11	$1,423,491	$5,874,085	$4,917,602	$12,215,178
Jun-11	$1,331,335	$5,026,206	$3,653,894	$10,011,435
Jul-11	$1,791,648	$4,641,477	$3,307,365	$9,740,490
Aug-11	$1,409,432	$6,434,093	$5,192,382	$13,035,906
Sep-11	$1,414,736	$5,102,656	$4,645,841	$11,163,233
Oct-11	$1,905,193	$4,529,205	$4,688,735	$11,123,132
Nov-11	$1,485,176	$5,686,072	$5,190,958	$12,362,206
Dec-11	$2,139,626	$5,162,840	$5,255,639	$12,558,105
Jan-12	$1,466,848	$6,053,614	$5,151,228	$12,671,690
Feb-12	$1,476,464	$5,065,324	$4,816,444	$11,358,232
Mar-12	$1,951,268	$5,429,619	$4,516,077	$11,896,965
Apr-12	$1,686,866	$4,983,696	$4,878,043	$11,548,605
May-12	$1,641,566	$6,481,318	$5,492,575	$13,615,460
Jun-12	$2,039,898	$5,173,108	$4,737,442	$11,950,448
Jul-12	$1,552,295	$5,990,232	$5,747,468	$13,289,995
Aug-12	$1,625,401	$4,699,182	$5,109,336	$11,433,919
Sep-12	$2,017,844	$5,316,137	$4,480,589	$11,814,570
Oct-12	$1,633,949	$8,010,168	$6,388,158	$16,032,274
Nov-12	$1,612,959	$5,473,759	$5,116,697	$12,203,415
Dec-12	$2,233,612	$5,108,692	$5,292,875	$12,635,179
Jan-13	$1,545,718	$6,453,566	$5,655,172	$13,654,456
Feb-13	$1,733,366	$5,762,390	$4,406,686	$11,902,443
Mar-13	$2,213,128	$5,641,649	$4,794,802	$12,649,579
Apr-13	$1,788,904	$6,209,221	$5,719,115	$13,717,240
May-13	$1,926,981	$5,219,729	$4,775,164	$11,921,874
Jun-13	$2,216,275	$4,682,911	$4,650,583	$11,549,769
Jul-13	$1,798,962	$6,515,449	$5,661,237	$13,975,648
Aug-13	$2,340,481	$6,048,959	$5,236,943	$13,626,383
Sep-13	$1,929,798	$5,892,107	$4,952,131	$12,774,036
Oct-13	$1,911,871	$6,255,211	$6,560,136	$14,727,218
Nov-13	$2,386,825	$5,216,660	$5,649,914	$13,253,399
Dec-13	$2,004,231	$7,284,781	$6,057,173	$15,346,186
Jan-14	$1,792,525	$5,586,367	$4,973,152	$12,352,044
Feb-14	$1,879,560	$4,916,502	$5,216,025	$12,012,087
Mar-14	$2,414,084	$6,749,386	$4,972,765	$14,136,235
Apr-14	$1,994,547	$6,338,104	$6,585,950	$14,918,601
May-14	$324,747	$5,192,755	$5,321,340	$10,838,842
Grand Total	71,970,120	224,033,272	202,228,430	498,231,822

COBRA & Non-Medicare Retirees

	Dakota Plan			
	Pharmacy	Hospital	Physician	Total
Jan-11	$106,673	$22,256	$52,536	$181,465
Feb-11	$110,260	$230,625	$210,326	$551,211
Mar-11	$116,376	$379,426	$297,955	$793,756
Apr-11	$139,778	$249,599	$273,543	$662,921
May-11	$113,818	$487,872	$434,230	$1,035,920
Jun-11	$130,028	$503,066	$367,984	$1,001,078
Jul-11	$170,923	$672,779	$210,245	$1,053,946
Aug-11	$153,027	$411,417	$368,764	$933,208
Sep-11	$131,366	$283,123	$279,280	$693,769
Oct-11	$189,714	$482,629	$369,408	$1,041,751
Nov-11	$145,687	$545,326	$357,754	$1,048,767
Dec-11	$219,806	$959,557	$449,906	$1,629,269
Jan-12	$122,336	$595,110	$289,604	$1,007,050
Feb-12	$129,707	$266,148	$353,089	$748,944
Mar-12	$168,967	$797,596	$275,906	$1,242,469
Apr-12	$128,735	$404,695	$327,667	$861,098
May-12	$157,947	$514,738	$340,457	$1,013,142
Jun-12	$157,460	$443,722	$358,269	$959,451
Jul-12	$182,625	$391,027	$416,006	$989,658
Aug-12	$145,764	$316,871	$322,829	$785,464
Sep-12	$230,487	$378,822	$315,483	$924,791
Oct-12	$189,108	$542,756	$440,069	$1,171,933
Nov-12	$168,540	$732,444	$460,205	$1,361,190
Dec-12	$199,327	$486,097	$409,571	$1,094,994
Jan-13	$136,261	$827,090	$470,622	$1,433,973
Feb-13	$167,702	$390,604	$286,152	$844,459
Mar-13	$173,193	$655,145	$352,651	$1,180,989
Apr-13	$166,554	$606,365	$413,055	$1,185,974
May-13	$142,740	$527,662	$405,142	$1,075,544
Jun-13	$202,362	$800,445	$360,398	$1,363,205
Jul-13	$158,598	$465,893	$332,974	$957,465
Aug-13	$194,197	$511,236	$382,975	$1,088,407
Sep-13	$199,640	$366,522	$300,818	$866,981
Oct-13	$175,812	$709,265	$433,346	$1,318,423
Nov-13	$195,916	$585,102	$355,142	$1,136,160
Dec-13	$198,236	$419,073	$347,367	$964,676
Jan-14	$199,647	$602,552	$309,389	$1,111,588
Feb-14	$128,796	$546,482	$283,857	$959,135
Mar-14	$225,338	$704,357	$248,443	$1,178,137
Apr-14	$164,432	$486,075	$454,958	$1,105,466
May-14	$36,496	$459,326	$327,185	$823,008
Grand Total	6,574,379	20,760,895	14,045,560	41,380,835

GRAND TOTAL

	Pharmacy	Hospital	Physician	Total
Jan-11	1,898,982	929,840	1,308,936	**4,137,758**
Feb-11	1,808,704	4,288,777	4,425,122	**10,522,603**
Mar-11	1,874,678	8,007,037	6,586,706	**16,468,421**
Apr-11	2,491,077	7,022,889	5,430,890	**14,944,856**
May-11	1,944,185	8,516,364	7,053,046	**17,513,595**
Jun-11	1,849,937	7,596,833	5,291,929	**14,738,699**
Jul-11	2,459,955	7,980,992	4,738,737	**15,179,684**
Aug-11	1,931,476	9,568,250	7,110,574	**18,610,300**
Sep-11	1,951,884	7,493,967	6,341,524	**15,787,375**
Oct-11	2,612,380	6,779,823	6,419,000	**15,811,203**
Nov-11	2,035,695	8,605,530	7,350,561	**17,991,786**
Dec-11	2,895,590	8,274,507	7,264,857	**18,434,954**
Jan-12	1,985,662	8,412,601	7,182,989	**17,581,252**
Feb-12	2,067,807	7,026,081	6,747,856	**15,841,744**
Mar-12	2,716,258	8,693,899	6,500,932	**17,911,089**
Apr-12	2,319,397	7,907,753	6,961,215	**17,188,365**
May-12	2,290,614	9,685,805	7,880,895	**19,857,314**
Jun-12	2,795,859	7,748,401	6,644,212	**17,188,472**
Jul-12	2,256,091	8,634,915	8,034,237	**18,925,243**
Aug-12	2,267,099	7,270,387	7,167,341	**16,704,827**
Sep-12	2,844,492	7,621,899	6,343,302	**16,809,693**
Oct-12	2,323,834	11,193,273	8,941,497	**22,458,604**
Nov-12	2,288,553	8,719,221	7,320,406	**18,328,180**
Dec-12	3,420,123	7,758,339	7,543,108	**18,721,570**
Jan-13	2,185,283	11,244,153	8,223,234	**21,652,670**
Feb-13	2,449,364	8,933,273	6,546,655	**17,929,292**
Mar-13	3,027,896	9,105,527	7,050,450	**19,183,873**
Apr-13	2,504,916	10,223,984	8,424,497	**21,153,397**
May-13	2,649,019	8,199,839	6,981,975	**17,830,833**
Jun-13	3,085,495	7,546,128	6,553,994	**17,185,617**
Jul-13	2,521,339	9,553,575	8,092,401	**20,167,315**
Aug-13	3,263,390	9,214,712	7,609,978	**20,088,080**
Sep-13	2,692,159	8,985,255	7,164,651	**18,842,065**
Oct-13	2,730,292	9,939,678	9,594,177	**22,264,147**
Nov-13	3,337,795	9,137,804	8,077,890	**20,553,489**
Dec-13	2,881,658	10,961,895	8,589,362	**22,432,915**
Jan-14	2,560,584	8,446,410	7,144,040	**18,151,034**
Feb-14	2,621,822	7,829,528	7,628,407	**18,079,757**
Mar-14	3,402,659	10,763,551	7,130,945	**21,297,155**
Apr-14	2,786,471	9,990,547	9,427,833	**22,204,851**
May-14	466,239	8,077,773	7,507,510	**16,051,522**
Grand Total	100,496,713	343,891,015	288,337,871	**732,725,599**

POLITICAL SUBDIVISION

	Dakota Plan			
	Pharmacy	Hospital	Physician	Total
Jan-11	$339,430	$238,533	$166,025	$743,987
Feb-11	$334,902	$789,986	$611,021	$1,735,908
Mar-11	$372,321	$1,466,714	$1,153,169	$2,992,204
Apr-11	$484,869	$1,417,463	$1,022,804	$2,925,136
May-11	$379,452	$1,453,619	$1,177,022	$3,010,093
Jun-11	$352,082	$1,516,117	$910,087	$2,778,286
Jul-11	$464,560	$2,056,605	$864,442	$3,385,608
Aug-11	$341,270	$2,063,514	$1,135,958	$3,540,743
Sep-11	$380,961	$1,529,641	$1,081,254	$2,991,857
Oct-11	$483,752	$1,207,375	$996,839	$2,687,966
Nov-11	$376,409	$1,589,771	$1,332,573	$3,298,753
Dec-11	$498,802	$1,464,548	$1,171,677	$3,135,026
Jan-12	$374,554	$1,114,245	$1,293,695	$2,782,493
Feb-12	$432,026	$1,021,721	$1,063,830	$2,517,577
Mar-12	$549,014	$1,766,298	$1,179,979	$3,495,291
Apr-12	$462,580	$1,845,667	$1,265,808	$3,574,055
May-12	$459,599	$1,853,673	$1,468,599	$3,781,871
Jun-12	$560,393	$1,477,844	$1,098,920	$3,137,157
Jul-12	$488,721	$1,482,586	$1,364,622	$3,335,929
Aug-12	$472,792	$1,413,133	$1,304,251	$3,190,176
Sep-12	$566,670	$1,317,271	$1,133,188	$3,017,129
Oct-12	$469,804	$1,809,680	$1,570,900	$3,850,384
Nov-12	$473,901	$1,507,664	$1,310,215	$3,291,781
Dec-12	$938,982	$1,414,296	$1,344,425	$3,697,702
Jan-13	$473,761	$2,687,838	$1,560,786	$4,722,385
Feb-13	$508,063	$2,005,309	$1,279,288	$3,792,660
Mar-13	$595,232	$1,947,004	$1,326,690	$3,868,926
Apr-13	$500,239	$2,505,202	$1,718,383	$4,723,825
May-13	$545,404	$1,508,099	$1,294,428	$3,347,931
Jun-13	$618,169	$1,329,800	$1,090,664	$3,038,633
Jul-13	$523,040	$1,843,478	$1,536,992	$3,903,510
Aug-13	$684,418	$1,893,296	$1,601,570	$4,179,284
Sep-13	$529,039	$1,988,737	$1,530,302	$4,048,078
Oct-13	$590,407	$1,990,121	$2,026,171	$4,606,699
Nov-13	$709,108	$2,481,048	$1,553,914	$4,744,070

MEDICARE RETIREES

	Dakota Retiree Plan			
	Pharmacy	Hospital	Physician	Total
Jan-11	$37,515	$5,336	$107,504	$150,355
Feb-11	$27,932	$296,419	$460,597	$784,947
Mar-11	$21,875	$729,220	$521,694	$1,272,789
Apr-11	$53,000	$596,924	$413,686	$1,063,610
May-11	$27,424	$700,788	$524,192	$1,252,404
Jun-11	$36,492	$551,444	$359,964	$947,900
Jul-11	$32,824	$610,131	$356,685	$999,640
Aug-11	$27,747	$659,226	$413,470	$1,100,443
Sep-11	$24,821	$578,547	$335,149	$938,518
Oct-11	$33,721	$560,614	$364,018	$958,352
Nov-11	$28,423	$784,361	$469,276	$1,282,061
Dec-11	$37,356	$687,562	$387,635	$1,112,553
Jan-12	$21,924	$649,632	$448,462	$1,120,017
Feb-12	$29,610	$672,888	$514,493	$1,216,991
Mar-12	$47,009	$700,386	$528,970	$1,276,365
Apr-12	$41,216	$673,695	$489,697	$1,204,608
May-12	$31,502	$836,076	$579,264	$1,446,843
Jun-12	$38,108	$653,727	$449,581	$1,141,416
Jul-12	$32,450	$771,070	$506,141	$1,309,661
Aug-12	$23,142	$841,201	$430,925	$1,295,269
Sep-12	$29,491	$609,669	$414,042	$1,053,203
Oct-12	$30,973	$830,669	$542,370	$1,404,012
Nov-12	$33,153	$1,005,354	$433,289	$1,471,796
Dec-12	$48,202	$749,254	$496,237	$1,293,694
Jan-13	$29,543	$1,275,659	$536,654	$1,841,855
Feb-13	$40,233	$774,970	$574,529	$1,389,732
Mar-13	$46,343	$861,729	$576,307	$1,484,379
Apr-13	$49,219	$903,196	$573,944	$1,526,359
May-13	$33,894	$944,349	$507,241	$1,485,483
Jun-13	$48,689	$732,972	$452,349	$1,234,010
Jul-13	$40,739	$728,755	$561,198	$1,330,691
Aug-13	$44,294	$761,221	$388,490	$1,194,005
Sep-13	$33,682	$737,889	$381,400	$1,152,970
Oct-13	$52,202	$985,081	$574,524	$1,611,807
Nov-13	$45,946	$854,994	$518,920	$1,419,860

Dec-13	$630,547	$2,444,738	$1,629,212	$4,704,497
Jan-14	$525,264	$1,493,120	$1,407,157	$3,425,541
Feb-14	$571,810	$1,690,412	$1,453,494	$3,715,716
Mar-14	$716,846	$2,410,415	$1,382,913	$4,510,174
Apr-14	$588,522	$2,205,978	$1,773,281	$4,567,780
May-14	$95,093	$1,619,715	$1,370,844	$3,085,652
Grand Total	**20,462,808**	**68,862,274**	**52,557,392**	**141,882,473**

Dec-13	$48,644	$813,303	$555,610	$1,417,557
Jan-14	$43,148	$764,371	$454,342	$1,261,861
Feb-14	$41,656	$676,132	$675,031	$1,392,820
Mar-14	$46,391	$899,393	$526,824	$1,472,608
Apr-14	$38,970	$960,390	$613,644	$1,613,005
May-14	$9,903	$805,977	$488,141	$1,304,021
Grand Total	**1,489,406**	**30,234,574**	**19,506,489**	**51,230,470**

North Dakota Public Employees Retirement System
Health Plan Administrator Request for Proposals - Data Request
Appendix E - Item 6
High Claims - Total claim amounts in excess of $100,000
Institutional, Professional, and Pharmacy

Claims Paid Period 7/2012 – 6/2013 paid through May 2014

Claimant #	Claimant Group	Subscriber/ Dependent	Primary Diagnosis Code	Total Plan Paid
1	FAMILY STATE ACTIVE	Dependent	9986	$1,051,358
2	FAMILY STATE ACTIVE	Dependent	V7281	$1,045,940
3	FAMILY STATE ACTIVE	Dependent	V582	$854,686
4	FAMILY STATE ACTIVE	Subscriber	V5882	$784,954
5	FAMILY ONE MEDICARE	Subscriber	99932	$733,340
6	FAMILY STATE ACTIVE	Dependent	2860	$723,615
7	FAMILY POL-SUB	Subscriber	V5881	$706,501
8	FAMILY STATE ACTIVE	Dependent	V5789	$702,853
9	FAMILY POL-SUB	Dependent	V3101	$668,465
10	SINGLE STATE ACTIVE	Subscriber	V5489	$659,680
11	FAMILY STATE ACTIVE	Subscriber	V7283	$620,038
12	FAMILY STATE ACTIVE	Dependent	V7651	$514,238
13	FAMILY STATE ACTIVE	Dependent	V3101	$513,142
14	FAMILY STATE ACTIVE	Dependent	V3101	$496,572
15	FAMILY POL-SUB	Dependent	V3101	$466,866
16	FAMILY NON-MEDICARE	Subscriber	V552	$443,522
17	FAMILY POL-SUB	Dependent	V5789	$427,772
18	FAMILY POL-SUB	Dependent	V700	$408,871
19	FAMILY STATE ACTIVE	Dependent	V7262	$392,396
20	FAMILY STATE ACTIVE	Dependent	V5881	$377,994
21	SINGLE NON-MEDICARE	Subscriber	V7611	$362,455
22	SINGLE STATE ACTIVE	Subscriber	V5841	$346,567
23	FAMILY POL-SUB	Dependent	V3101	$339,922
24	FAMILY POL-SUB	Dependent	V5861	$339,652
25	SINGLE STATE ACTIVE	Subscriber	78199	$331,181
26	FAMILY STATE ACTIVE	Dependent	V5883	$324,281
27	FAMILY STATE ACTIVE	Dependent	V707	$294,156
28	FAMILY STATE ACTIVE	Dependent	V7231	$286,426
29	FAMILY STATE ACTIVE	Dependent	78039	$285,455
30	FAMILY STATE ACTIVE	Subscriber	V528	$284,081
31	FAMILY STATE ACTIVE	Dependent	V7283	$283,742
32	SINGLE POL-SUB	Subscriber	V5881	$283,041
33	SINGLE STATE ACTIVE	Subscriber	V662	$276,350
34	FAMILY STATE ACTIVE	Dependent	79402	$265,765
35	FAMILY STATE ACTIVE	Dependent	V6759	$258,451
36	FAMILY ONE MEDICARE	Subscriber	V5883	$255,522
37	FAMILY POL-SUB	Dependent	2860	$254,316
38	FAMILY STATE ACTIVE	Subscriber	V5789	$252,151
39	FAMILY STATE ACTIVE	Dependent	V3000	$250,782
40	FAMILY STATE ACTIVE	Dependent	V5844	$250,274
41	FAMILY POL-SUB	Dependent	7847	$248,142
42	FAMILY STATE ACTIVE	Dependent	V5881	$246,845
43	FAMILY STATE ACTIVE	Dependent	V7260	$240,677
44	SINGLE POL-SUB	Subscriber	V7651	$232,709
45	FAMILY ONE MEDICARE	Subscriber	V420	$225,321
46	SINGLE COBRA	Subscriber	V7283	$225,294
47	FAMILY STATE ACTIVE	Dependent	V554	$223,506
48	FAMILY STATE ACTIVE	Dependent	V5789	$222,071
49	FAMILY STATE ACTIVE	Dependent	78039	$220,522
50	SINGLE STATE ACTIVE	Subscriber	V6709	$220,388
51	FAMILY STATE ACTIVE	Subscriber	V580	$215,114
52	FAMILY STATE ACTIVE	Dependent	V5789	$210,585
53	FAMILY STATE ACTIVE	Subscriber	99680	$208,394
54	FAMILY POL-SUB	Subscriber	V5844	$206,464
55	SINGLE NON-MEDICARE	Subscriber	6826	$206,167
56	FAMILY STATE ACTIVE	Subscriber	V5875	$205,071
57	FAMILY STATE ACTIVE	Subscriber	V5849	$204,605
58	FAMILY STATE ACTIVE	Dependent	V5881	$204,545
59	SINGLE NON-MEDICARE	Subscriber	V5881	$202,054
60	FAMILY STATE ACTIVE	Subscriber	73730	$196,248
61	FAMILY STATE ACTIVE	Subscriber	70719	$190,056
62	FAMILY POL-SUB	Dependent	V812	$189,765
63	FAMILY STATE ACTIVE	Dependent	V6759	$188,927
64	FAMILY STATE ACTIVE	Subscriber	V7612	$188,461
65	FAMILY STATE ACTIVE	Dependent	2860	$187,634
66	FAMILY STATE ACTIVE	Dependent	V5789	$186,535
67	FAMILY STATE ACTIVE	Dependent	31381	$186,492
68	FAMILY STATE ACTIVE	Dependent	9181	$186,244
69	SINGLE STATE ACTIVE	Subscriber	V580	$186,009
70	FAMILY STATE ACTIVE	Subscriber	V5883	$184,353
71	FAMILY STATE ACTIVE	Dependent	V700	$182,518
72	FAMILY STATE ACTIVE	Dependent	78321	$182,028
73	FAMILY STATE ACTIVE	Dependent	V7612	$181,894
74	FAMILY STATE ACTIVE	Dependent	V5842	$181,581
75	FAMILY STATE ACTIVE	Dependent	V3001	$180,417
76	FAMILY STATE ACTIVE	Subscriber	7856	$180,387
77	SINGLE NON-MEDICARE	Subscriber	V580	$179,981
78	FAMILY STATE ACTIVE	Subscriber	V5811	$179,060
79	FAMILY STATE ACTIVE	Dependent	78959	$177,540

Claims Paid Period 7/2013 – 5/2014 paid through May 2014

Claimant #	Claimant Group	Subscriber/ Dependent	Primary Diagnosis Code	Total Plan Paid
1	FAMILY POL-SUB	Dependent	V7281	$872,299
2	FAMILY STATE ACTIVE	Dependent	V7281	$813,670
3	FAMILY POL-SUB	Dependent	V7284	$638,529
4	FAMILY STATE ACTIVE	Subscriber	V5789	$458,221
5	SINGLE NON-MEDICARE	Subscriber	71946	$428,360
6	FAMILY STATE ACTIVE	Dependent	V671	$421,297
7	FAMILY STATE ACTIVE	Dependent	7241	$420,566
8	FAMILY STATE ACTIVE	Dependent	V5883	$415,066
9	SINGLE STATE ACTIVE	Subscriber	V5789	$414,773
10	FAMILY POL-SUB	Dependent	V7283	$397,754
11	FAMILY STATE ACTIVE	Dependent	79431	$391,928
12	SINGLE POL-SUB	Subscriber	99749	$378,874
13	FAMILY POL-SUB	Dependent	V5789	$369,950
14	FAMILY STATE ACTIVE	Dependent	7944	$367,306
15	FAMILY STATE ACTIVE	Dependent	V3000	$359,537
16	FAMILY STATE ACTIVE	Subscriber	V4589	$340,651
17	FAMILY STATE ACTIVE	Dependent	V5811	$337,307
18	FAMILY STATE ACTIVE	Subscriber	V5811	$335,114
19	FAMILY STATE ACTIVE	Dependent	V662	$331,741
20	FAMILY STATE ACTIVE	Dependent	V3001	$318,829
21	FAMILY STATE ACTIVE	Dependent	79311	$309,307
22	FAMILY STATE ACTIVE	Dependent	V7219	$304,186
23	FAMILY STATE ACTIVE	Subscriber	V5883	$298,348
24	FAMILY STATE ACTIVE	Dependent	V7283	$289,801
25	FAMILY STATE ACTIVE	Subscriber	V5869	$278,082
26	SINGLE POL-SUB	Subscriber	7862	$265,887
27	FAMILY STATE ACTIVE	Subscriber	V7283	$264,783
28	FAMILY ONE MEDICARE	Subscriber	99932	$259,754
29	FAMILY POL-SUB	Dependent	V5849	$258,732
30	SINGLE STATE ACTIVE	Subscriber	V5789	$248,902
31	FAMILY POL-SUB	Subscriber	V551	$246,513
32	FAMILY STATE ACTIVE	Subscriber	V5789	$243,910
33	FAMILY STATE ACTIVE	Dependent	V829	$239,842
34	FAMILY STATE ACTIVE	Dependent	V5411	$238,131
35	FAMILY POL-SUB	Dependent	73390	$233,169
36	FAMILY STATE ACTIVE	Dependent	79431	$226,586
37	FAMILY POL-SUB	Dependent	V5861	$225,444
38	SINGLE STATE ACTIVE	Subscriber	V7283	$222,100
39	FAMILY STATE ACTIVE	Dependent	9720	$220,526
40	FAMILY STATE ACTIVE	Subscriber	V5789	$219,255
41	SINGLE POL-SUB	Subscriber	V662	$214,539
42	FAMILY STATE ACTIVE	Subscriber	V550	$207,532
43	SINGLE POL-SUB	Subscriber	V5883	$207,176
44	SINGLE POL-SUB	Subscriber	78900	$204,809
45	FAMILY STATE ACTIVE	Subscriber	V5849	$202,344
46	FAMILY STATE ACTIVE	Dependent	78060	$201,646
47	FAMILY STATE ACTIVE	Dependent	78650	$201,434
48	FAMILY STATE ACTIVE	Subscriber	V7283	$201,411
49	FAMILY POL-SUB	Dependent	V5811	$199,166
50	FAMILY NON-MEDICARE	Dependent	V1272	$197,205
51	SINGLE STATE ACTIVE	Subscriber	V662	$196,568
52	FAMILY STATE ACTIVE	Subscriber	V580	$196,557
53	FAMILY STATE ACTIVE	Subscriber	67484	$195,106
54	FAMILY STATE ACTIVE	Subscriber	V5789	$190,136
55	FAMILY STATE ACTIVE	Dependent	34889	$187,752
56	FAMILY POL-SUB	Subscriber	V662	$179,383
57	FAMILY STATE ACTIVE	Subscriber	78909	$177,951
58	FAMILY STATE ACTIVE	Subscriber	V5881	$175,816
59	FAMILY STATE ACTIVE	Subscriber	V5873	$174,779
60	FAMILY COBRA	Subscriber	V5849	$166,716
61	FAMILY POL-SUB	Subscriber	V5789	$165,129
62	SINGLE STATE ACTIVE	Subscriber	V5789	$164,256
63	FAMILY STATE ACTIVE	Dependent	V7651	$163,599
64	FAMILY STATE ACTIVE	Dependent	V7219	$162,530
65	FAMILY STATE ACTIVE	Dependent	7840	$161,816
66	FAMILY STATE ACTIVE	Subscriber	19889	$159,907
67	SINGLE STATE ACTIVE	Subscriber	V662	$158,587
68	FAMILY STATE ACTIVE	Dependent	V5878	$157,128
69	FAMILY STATE ACTIVE	Subscriber	V7651	$154,944
70	FAMILY STATE ACTIVE	Dependent	V5883	$154,894
71	FAMILY POL-SUB	Subscriber	V7284	$152,755
72	FAMILY STATE ACTIVE	Dependent	78651	$151,763
73	FAMILY STATE ACTIVE	Dependent	V5883	$151,726
74	FAMILY STATE ACTIVE	Subscriber	V5811	$150,951
75	FAMILY POL-SUB	Dependent	V580	$150,794
76	FAMILY STATE ACTIVE	Dependent	V3001	$148,677
77	SINGLE POL-SUB	Subscriber	V662	$147,225
78	FAMILY POL-SUB	Subscriber	V580	$146,149
79	FAMILY POL-SUB	Subscriber	V5881	$145,991

80	FAMILY POL-SUB	Dependent	7840	$177,387
81	FAMILY STATE ACTIVE	Dependent	V7189	$175,210
82	FAMILY STATE ACTIVE	Dependent	V580	$173,661
83	FAMILY STATE ACTIVE	Dependent	V5869	$173,583
84	FAMILY POL-SUB	Dependent	V829	$171,453
85	FAMILY STATE ACTIVE	Subscriber	V5882	$169,916
86	SINGLE NON-MEDICARE	Subscriber	V7612	$166,127
87	FAMILY POL-SUB	Dependent	V7651	$165,995
88	FAMILY NON-MEDICARE	Dependent	V5811	$165,835
89	SINGLE STATE ACTIVE	Subscriber	V7283	$165,472
90	FAMILY STATE ACTIVE	Dependent	V5861	$164,842
91	FAMILY STATE ACTIVE	Dependent	V5811	$164,199
92	SINGLE POL-SUB	Subscriber	V5881	$163,701
93	FAMILY STATE ACTIVE	Dependent	V3001	$163,686
94	FAMILY STATE ACTIVE	Subscriber	V5883	$163,381
95	FAMILY ONE MEDICARE	Subscriber	V662	$162,781
96	FAMILY STATE ACTIVE	Dependent	4373	$162,576
97	SINGLE STATE ACTIVE	Subscriber	V7284	$161,368
98	FAMILY STATE ACTIVE	Subscriber	V5842	$161,183
99	FAMILY NON-MEDICARE	Subscriber	42732	$158,872
100	FAMILY STATE ACTIVE	Dependent	V580	$158,477
101	FAMILY STATE ACTIVE	Dependent	V662	$157,223
102	SINGLE STATE ACTIVE	Subscriber	49121	$157,033
103	FAMILY STATE ACTIVE	Dependent	7856	$156,947
104	FAMILY POL-SUB	Subscriber	V5811	$155,862
105	SINGLE STATE ACTIVE	Subscriber	V8289	$155,772
106	SINGLE STATE ACTIVE	Subscriber	99659	$155,682
107	FAMILY STATE ACTIVE	Dependent	78060	$155,627
108	SINGLE STATE ACTIVE	Subscriber	V5883	$155,328
109	FAMILY STATE ACTIVE	Dependent	1970	$155,179
110	FAMILY STATE ACTIVE	Subscriber	59971	$152,468
111	FAMILY STATE ACTIVE	Subscriber	V5789	$150,932
112	FAMILY STATE ACTIVE	Dependent	V5721	$150,738
113	FAMILY STATE ACTIVE	Dependent	V6709	$150,208
114	FAMILY STATE ACTIVE	Subscriber	V707	$149,759
115	FAMILY POL-SUB	Dependent	V7612	$148,744
116	FAMILY POL-SUB	Subscriber	V7611	$148,124
117	FAMILY STATE ACTIVE	Dependent	V5881	$147,762
118	SINGLE STATE ACTIVE	Subscriber	V5861	$146,573
119	FAMILY POL-SUB	Subscriber	V7281	$144,910
120	FAMILY STATE ACTIVE	Dependent	30520	$144,229
121	SINGLE COBRA	Subscriber	5849	$143,961
122	FAMILY STATE ACTIVE	Subscriber	V5869	$142,421
123	SINGLE STATE ACTIVE	Subscriber	6826	$141,660
124	FAMILY STATE ACTIVE	Dependent	V580	$140,953
125	SINGLE POL-SUB	Subscriber	V812	$140,256
126	SINGLE COBRA	Subscriber	78499	$139,789
127	FAMILY POL-SUB	Subscriber	496	$137,185
128	FAMILY STATE ACTIVE	Subscriber	V5811	$137,182
129	FAMILY STATE ACTIVE	Dependent	9181	$137,077
130	FAMILY STATE ACTIVE	Dependent	V5883	$136,813
131	FAMILY STATE ACTIVE	Subscriber	9694	$136,774
132	SINGLE STATE ACTIVE	Subscriber	V5849	$136,294
133	FAMILY STATE ACTIVE	Subscriber	7880	$136,160
134	FAMILY STATE ACTIVE	Subscriber	99859	$136,026
135	FAMILY STATE ACTIVE	Subscriber	V4589	$135,948
136	FAMILY POL-SUB	Dependent	V5811	$135,919
137	FAMILY STATE ACTIVE	Dependent	V3000	$135,603
138	FAMILY POL-SUB	Dependent	V7612	$134,252
139	FAMILY STATE ACTIVE	Subscriber	V5883	$133,889
140	SINGLE COBRA	Subscriber	57410	$133,766
141	FAMILY POL-SUB	Dependent	V5883	$133,186
142	FAMILY STATE ACTIVE	Dependent	V3001	$133,000
143	SINGLE STATE ACTIVE	Subscriber	9895	$132,261
144	FAMILY STATE ACTIVE	Dependent	V700	$131,864
145	SINGLE NON-MEDICARE	Subscriber	51889	$131,481
146	FAMILY STATE ACTIVE	Subscriber	V580	$130,324
147	FAMILY STATE ACTIVE	Subscriber	V5881	$130,149
148	FAMILY POL-SUB	Dependent	V553	$128,453
149	FAMILY STATE ACTIVE	Dependent	78959	$128,302
150	FAMILY STATE ACTIVE	Subscriber	V5881	$128,270
151	FAMILY STATE ACTIVE	Dependent	V7231	$126,847
152	FAMILY STATE ACTIVE	Dependent	V0481	$126,371
153	FAMILY STATE ACTIVE	Dependent	51884	$125,907
154	FAMILY STATE ACTIVE	Subscriber	99932	$125,830
155	FAMILY STATE ACTIVE	Dependent	V762	$123,277
156	FAMILY POL-SUB	Subscriber	V5832	$122,756
157	FAMILY STATE ACTIVE	Subscriber	V433	$122,631
158	FAMILY STATE ACTIVE	Dependent	V7651	$122,470
159	SINGLE STATE ACTIVE	Subscriber	V662	$122,401
160	FAMILY STATE ACTIVE	Subscriber	V7651	$122,218
161	FAMILY STATE ACTIVE	Dependent	V5883	$121,330
162	FAMILY STATE ACTIVE	Dependent	V5881	$121,149
163	SINGLE STATE ACTIVE	Subscriber	V5811	$120,836
164	FAMILY POL-SUB	Dependent	V7283	$120,346
165	SINGLE POL-SUB	Subscriber	V5881	$119,469
166	FAMILY STATE ACTIVE	Subscriber	V7612	$119,455
167	FAMILY STATE ACTIVE	Subscriber	V580	$119,029

80	FAMILY ONE MEDICARE	Subscriber	V7284	$144,835
81	FAMILY STATE ACTIVE	Dependent	7840	$140,065
82	FAMILY STATE ACTIVE	Dependent	V5878	$139,306
83	FAMILY STATE ACTIVE	Subscriber	9961	$138,378
84	FAMILY POL-SUB	Subscriber	7823	$137,468
85	FAMILY STATE ACTIVE	Subscriber	59971	$137,424
86	FAMILY STATE ACTIVE	Dependent	V556	$135,669
87	SINGLE STATE ACTIVE	Subscriber	V7651	$135,321
88	FAMILY STATE ACTIVE	Dependent	V7612	$134,875
89	FAMILY NON-MEDICARE	Subscriber	V5811	$134,123
90	FAMILY STATE ACTIVE	Subscriber	V5869	$132,392
91	SINGLE COBRA	Subscriber	V5875	$131,968
92	FAMILY STATE ACTIVE	Subscriber	73027	$131,725
93	FAMILY STATE ACTIVE	Dependent	V7612	$131,066
94	FAMILY STATE ACTIVE	Dependent	99649	$128,750
95	FAMILY POL-SUB	Dependent	V5881	$128,458
96	SINGLE POL-SUB	Subscriber	V4582	$127,753
97	FAMILY STATE ACTIVE	Dependent	79409	$127,504
98	FAMILY COBRA	Subscriber	V5831	$127,295
99	FAMILY STATE ACTIVE	Dependent	7245	$126,875
100	FAMILY POL-SUB	Dependent	V5789	$126,281
101	FAMILY STATE ACTIVE	Subscriber	V5881	$126,132
102	SINGLE POL-SUB	Subscriber	73679	$126,033
103	SINGLE POL-SUB	Subscriber	V4582	$125,804
104	FAMILY STATE ACTIVE	Dependent	V641	$125,799
105	FAMILY POL-SUB	Dependent	V202	$125,555
106	FAMILY STATE ACTIVE	Dependent	83500	$125,015
107	FAMILY STATE ACTIVE	Subscriber	V5882	$124,411
108	SINGLE STATE ACTIVE	Subscriber	V5849	$123,722
109	FAMILY STATE ACTIVE	Subscriber	V7283	$122,224
110	SINGLE COBRA	Subscriber	389	$121,899
111	FAMILY STATE ACTIVE	Dependent	V5789	$121,053
112	FAMILY STATE ACTIVE	Dependent	V5811	$117,917
113	FAMILY STATE ACTIVE	Subscriber	V5861	$117,490
114	FAMILY STATE ACTIVE	Dependent	V7284	$116,636
115	FAMILY STATE ACTIVE	Subscriber	99664	$116,613
116	FAMILY STATE ACTIVE	Subscriber	7019	$116,570
117	FAMILY STATE ACTIVE	Subscriber	V662	$116,282
118	FAMILY STATE ACTIVE	Subscriber	V5849	$115,507
119	SINGLE STATE ACTIVE	Subscriber	V5842	$115,312
120	SINGLE NON-MEDICARE	Subscriber	V1272	$115,054
121	FAMILY STATE ACTIVE	Dependent	9899	$114,688
122	FAMILY STATE ACTIVE	Dependent	V5789	$114,652
123	SINGLE NON-MEDICARE	Subscriber	42843	$114,646
124	FAMILY STATE ACTIVE	Dependent	V662	$114,467
125	FAMILY STATE ACTIVE	Dependent	V5811	$113,983
126	FAMILY STATE ACTIVE	Dependent	V6709	$113,444
127	FAMILY POL-SUB	Dependent	31401	$113,269
128	FAMILY STATE ACTIVE	Subscriber	V552	$111,791
129	SINGLE STATE ACTIVE	Subscriber	V762	$110,365
130	FAMILY POL-SUB	Dependent	55221	$109,889
131	FAMILY STATE ACTIVE	Dependent	7862	$109,337
132	SINGLE COBRA	Subscriber	32723	$109,107
133	SINGLE STATE ACTIVE	Subscriber	7847	$108,968
134	FAMILY POL-SUB	Subscriber	V7281	$108,310
135	FAMILY STATE ACTIVE	Dependent	7140	$106,517
136	FAMILY STATE ACTIVE	Dependent	V454	$106,392
137	FAMILY STATE ACTIVE	Dependent	99639	$106,247
138	FAMILY STATE ACTIVE	Dependent	70211	$106,177
139	FAMILY STATE ACTIVE	Dependent	V672	$105,122
140	SINGLE STATE ACTIVE	Subscriber	99831	$105,020
141	FAMILY POL-SUB	Dependent	V6759	$104,548
142	FAMILY STATE ACTIVE	Dependent	V3101	$104,200
143	SINGLE NON-MEDICARE	Subscriber	7840	$104,076
144	FAMILY STATE ACTIVE	Dependent	7560	$103,979
145	FAMILY STATE ACTIVE	Dependent	1749	$103,835
146	FAMILY POL-SUB	Subscriber	V7651	$103,795
147	FAMILY STATE ACTIVE	Dependent	V641	$103,527
148	SINGLE STATE ACTIVE	Subscriber	V662	$103,269
149	FAMILY STATE ACTIVE	Dependent	7833	$102,253
150	FAMILY STATE ACTIVE	Subscriber	28803	$102,037
151	FAMILY POL-SUB	Dependent	V5849	$100,739
152	FAMILY STATE ACTIVE	Dependent	V3101	$100,254
153	FAMILY STATE ACTIVE	Dependent	30501	$100,043

168	FAMILY STATE ACTIVE	Subscriber	V662	$117,517
169	FAMILY POL-SUB	Subscriber	V551	$117,436
170	FAMILY STATE ACTIVE	Dependent	V5811	$117,204
171	FAMILY POL-SUB	Subscriber	V5811	$115,332
172	FAMILY STATE ACTIVE	Dependent	V5883	$114,883
173	FAMILY STATE ACTIVE	Dependent	V662	$114,652
174	FAMILY STATE ACTIVE	Dependent	99859	$113,682
175	FAMILY POL-SUB	Dependent	V4365	$113,251
176	FAMILY STATE ACTIVE	Dependent	20300	$112,495
177	FAMILY COBRA	Dependent	V5481	$112,028
178	FAMILY STATE ACTIVE	Subscriber	2859	$111,776
179	SINGLE STATE ACTIVE	Subscriber	V5869	$110,093
180	FAMILY STATE ACTIVE	Subscriber	2550	$109,869
181	SINGLE NON-MEDICARE	Subscriber	V7611	$109,279
182	FAMILY STATE ACTIVE	Dependent	V7281	$109,276
183	FAMILY STATE ACTIVE	Dependent	5856	$108,906
184	SINGLE COBRA	Subscriber	V160	$108,482
185	FAMILY ONE MEDICARE	Subscriber	57512	$108,048
186	FAMILY STATE ACTIVE	Subscriber	65421	$107,514
187	FAMILY STATE ACTIVE	Subscriber	V580	$106,358
188	FAMILY STATE ACTIVE	Dependent	71945	$105,949
189	SINGLE POL-SUB	Subscriber	V4582	$104,715
190	FAMILY COBRA	Subscriber	7821	$104,278
191	FAMILY STATE ACTIVE	Dependent	V0481	$104,264
192	SINGLE POL-SUB	Subscriber	V5883	$103,619
193	FAMILY STATE ACTIVE	Dependent	8052	$103,564
194	FAMILY STATE ACTIVE	Subscriber	V5849	$103,379
195	FAMILY POL-SUB	Subscriber	V5832	$103,373
196	SINGLE POL-SUB	Subscriber	8505	$103,176
197	FAMILY STATE ACTIVE	Dependent	V7263	$103,167
198	SINGLE POL-SUB	Subscriber	V7281	$102,677
199	FAMILY STATE ACTIVE	Dependent	V711	$102,405
200	FAMILY STATE ACTIVE	Dependent	V7283	$102,346
201	SINGLE STATE ACTIVE	Subscriber	99668	$101,948
202	FAMILY STATE ACTIVE	Dependent	V3001	$101,524
203	FAMILY STATE ACTIVE	Subscriber	V5873	$101,521
204	FAMILY STATE ACTIVE	Subscriber	V7281	$101,489
205	FAMILY STATE ACTIVE	Dependent	78609	$101,332
206	FAMILY POL-SUB	Dependent	V7283	$101,298
207	FAMILY POL-SUB	Subscriber	V6709	$100,236
208	FAMILY POL-SUB	Dependent	V7189	$100,234
209	FAMILY STATE ACTIVE	Dependent	486	$100,193

North Dakota Public Employees Retirement System

Health Plan Administrator Request for Proposals - Data Request

Appendix E - Item 7

Contracts by Zip Code - For Geo Access Submission

As of May 2014

GRAND TOTAL	28,714
Zip Code	Number of Contracts
01002	1
01201	2
03215	1
04021	1
04032	1
04455	1
05408	1
05491	1
06611	1
08620	1
14850	1
15931	1
16801	1
19967	1
20176	1
21045	1
21647	1
24088	1
24554	1
27006	2
27265	1
27278	1
27511	1
27523	1
27705	1
27713	1
28092	2
28327	2
28445	1
28460	1
29205	1
29466	1
29483	1
29576	1

To be used with GeoAccess for Network Adequancy Assessment

29801	1
30075	1
30606	2
32043	1
32131	1
32141	1
32162	2
32163	1
32225	1
32526	1
32583	1
32605	1
32735	1
32765	1
32792	1
32904	1
32907	1
33062	1
33066	1
33437	1
33573	1
33597	1
33706	1
33823	1
33903	3
33908	1
33912	1
33914	1
33919	1
33950	1
33980	1
34104	3
34110	1
34139	1
34209	1
34231	2
34238	1
34293	3
34481	1
34684	1
34689	1
34715	1
34982	1
35603	1

35749	1
35802	1
36303	1
36542	1
37211	1
37601	2
37743	1
37862	2
43055	1
43220	1
43235	1
43402	1
44060	1
44427	1
45224	1
45244	1
45324	1
46062	1
46234	1
46544	1
47909	1
49423	1
49456	1
49506	2
49546	2
49612	1
49707	1
50014	1
50023	2
50125	1
50401	1
50501	1
50511	2
50583	1
50616	1
51503	2
52101	1
52233	1
52240	1
52241	1
52806	1
53027	1
53083	1
53105	1

53132	1
53143	1
53151	1
53209	1
53719	1
54002	1
54016	2
54246	1
54449	1
54481	1
54501	1
54636	1
54650	1
54656	1
55009	1
55014	1
55016	1
55024	2
55033	2
55037	1
55044	2
55045	1
55057	2
55066	1
55068	3
55075	1
55102	1
55103	1
55104	1
55105	1
55106	3
55108	2
55109	1
55110	1
55113	2
55116	1
55118	1
55122	1
55124	1
55125	5
55126	2
55129	1
55303	2
55309	1

55311	1
55313	1
55316	1
55317	1
55318	2
55337	2
55345	1
55346	1
55350	2
55352	1
55364	1
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55403	2
55408	1
55416	3
55417	1
55419	1
55422	3
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55428	1
55431	2
55432	1
55433	2
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55443	2
55444	1
55445	2
55446	2
55706	1
55721	1
55734	1
55744	1
55746	1
55775	1
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55902	1
55903	1
55904	1
55906	1
55912	1
55944	2
55964	1
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56326	1
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56334	2
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56524	2
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56529	64
56531	2
56534	1
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56536	4
56537	32
56540	4
56542	1
56543	1
56544	5
56545	1
56546	5
56547	24
56548	3
56549	52
56550	4
56552	2
56553	5
56554	23
56556	2
56557	1
56560	491

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56568	1
56569	2
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56587	5
56589	2
56594	7
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56633	3
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56651	1
56673	1
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56716	36
56720	1
56721	403
56722	7
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56727	2
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56736	4
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56750	6

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57005	2
57006	2
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58033	12
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58038	8
58040	13
58041	39
58042	49
58043	4
58045	120
58046	14
58047	67
58048	5
58049	9
58051	27
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58053	13
58054	198

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58478	2

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58482	38
58483	13
58484	2
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58487	17
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58579	70
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58760	8
58761	20
58762	2
58763	33
58765	6

58768	13
58769	8
58770	15
58771	7
58772	1
58773	13
58776	8
58779	6
58781	17
58782	4
58783	12
58784	96
58785	32
58787	3
58788	53
58789	5
58790	25
58792	5
58793	6
58794	2
58795	1
58801	750
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58830	4
58831	9
58835	4
58838	1
58843	16
58844	5
58845	3
58849	20
58852	29
58853	9
58854	44
58856	2
59014	1
59029	1
59047	1
59068	3
59102	6
59106	2
59108	1
59201	1
59212	1

59218	1
59219	1
59221	5
59243	1
59247	2
59254	4
59275	2
59301	1
59313	2
59327	1
59330	1
59353	1
59601	3
59602	1
59635	1
59645	1
59714	1
59718	3
59801	1
59803	1
59808	2
59840	1
59860	2
59866	1
59868	1
59901	3
59912	1
59923	1
60012	1
60060	1
60115	1
60188	1
60193	1
60436	1
60646	1
61080	1
61615	1
61701	1
61704	2
61878	1
62249	1
62702	1
62901	1
62903	1

63304	1
63366	1
63385	1
63501	1
63901	1
64083	1
64086	2
64505	1
65018	1
65624	1
65686	1
65810	1
66049	1
66062	1
66210	1
66217	1
66434	1
67147	1
67212	1
67217	1
67401	1
67456	1
68008	1
68025	1
68046	1
68123	2
68135	1
68305	1
68506	1
69001	1
69101	1
69153	1
69341	2
70122	1
72403	1
72631	1
72701	1
72712	1
73071	1
73505	1
74012	2
74701	1
74723	1
75034	1

75086	1
75087	2
75230	1
75238	1
75605	1
76063	1
76082	2
76092	1
76207	1
76208	1
76234	1
76657	1
77406	1
77577	1
78218	1
78232	2
78362	1
78542	3
78550	1
78626	1
78641	1
78645	1
78681	1
79416	1
80013	2
80014	1
80016	1
80020	2
80022	4
80023	1
80026	1
80031	1
80116	1
80121	1
80122	1
80123	1
80124	1
80125	1
80127	1
80128	1
80130	1
80134	4
80211	1
80214	1

80222	1
80227	2
80304	1
80401	1
80403	1
80465	1
80504	1
80510	1
80521	2
80525	2
80526	1
80538	1
80542	1
80601	1
80602	2
80631	1
80642	1
80643	1
80831	1
80917	1
80919	2
80920	1
80922	1
81005	1
81201	1
81401	2
81501	1
81504	1
81521	1
81632	1
81652	1
82009	1
82070	1
82435	1
82520	1
82601	1
82605	1
82609	2
82718	1
82801	1
82834	3
82901	1
83333	1
83340	1

83616	1
83661	1
83716	1
83805	1
83815	1
83835	1
84032	1
84068	1
84084	1
84093	1
84321	1
84720	1
84738	1
85024	2
85028	2
85032	1
85035	1
85044	1
85086	2
85118	4
85119	2
85120	1
85122	6
85132	1
85138	1
85140	2
85142	1
85143	4
85205	10
85206	7
85207	2
85208	2
85209	7
85213	2
85215	4
85226	3
85248	3
85249	2
85250	1
85255	1
85268	2
85286	1
85297	1
85298	1

85331	2
85335	2
85351	4
85361	1
85364	1
85365	2
85373	2
85375	4
85378	2
85382	3
85383	1
85387	1
85388	1
85392	1
85395	1
85396	2
85614	2
85622	3
85635	4
85650	1
85712	1
85719	1
85747	1
85750	1
85755	1
86001	1
86301	1
86314	1
86325	2
86351	1
86404	1
86406	1
86426	2
86440	1
87505	1
87747	1
87901	2
88005	1
88011	2
88203	1
88345	1
89028	1
89030	1
89031	1

89052	1
89060	1
89061	1
89084	1
89121	1
89128	1
89131	1
89134	1
89178	1
91040	1
91711	1
92007	1
92009	1
92011	1
92024	1
92056	1
92064	1
92075	1
92101	1
92260	1
92363	1
92835	1
92868	1
93110	1
93117	1
93534	1
93536	1
93551	1
93552	1
94301	1
95122	1
95321	1
95425	1
95476	2
95747	2
95833	1
96740	2
96789	1
97006	1
97062	1
97071	1
97201	1
97203	1
97208	1

97209	1
97224	1
97322	1
97355	1
97388	2
97394	1
97402	1
97424	1
97439	1
97465	1
97520	1
97701	1
97741	1
97756	1
97801	1
98004	1
98022	2
98056	1
98087	1
98092	1
98102	1
98110	1
98116	1
98136	1
98208	1
98221	1
98229	1
98258	2
98290	1
98311	1
98321	1
98532	1
98612	1
98643	1
98651	1
98675	1
98901	1
98926	1
99114	1
99203	1

Appendix F, Items F1 and F2 – Proposal Deviations (2 pages)

Proposers are required to submit deviations in two parts and under separate cover with their proposals using the exhibits that follow:

1. Item F1 – Contract/ASA deviations and exceptions must be described in detail, and include proposed alternative language.
2. Item F2 - Deviations from other RFP requirements must also be described in detail and submitted with your proposal.

   Use the exhibits provided in the following pages to submit specific deviations.

   In addition, proposers must submit:

3. Item F3 – Submit the redline version of the sample contract/ASA with your proposal reflecting the deviations identified in your response to Exhibit F1. Note that electronic and hard copy formats must be submitted with the cost proposal as described earlier in the RFP.

Proposal Deviations

Instructions:
Vendors must complete and submit two separate proposal deviations worksheets. Item F1 for exceptions and suggested alternatives to the terms and provisions in the sample contract/ASA and Exhibit F2 for deviations to other RFP requirements (plan designs, administration, etc.). Failure to include this information with your proposal may exclude your organization from further consideration. As noted in Item F3, vendors are also required to submit a redline version of the ASA that reflects the deviations and suggested alternatives noted below (as outlined in Section III., Proposal Contents, of the RFP).

Appendix F, Item F1 – Proposal Deviations to Sample Contract/ASA

Please complete the following worksheet for any and all deviations and exceptions to the required contract language and provisions as outlined in the sample contract provided with this RFP. Suggested alternatives must be included. Vendors should add additional pages as needed.

NDPERS RFP SAMPLE CONTRACT/ASA DEVIATIONS AND EXCEPTIONS		
Contract Section/ Number	**Description/Contract Language**	**Suggested/Proposed Alternative Language or Provision**

Appendix F, Item F2 – All Other Proposal Deviations

Please complete the following worksheet for all deviations and exceptions to the RFP requirements. Suggested alternatives or solutions must be included. Vendors should add additional pages as needed.

NDPERS RFP ALL OTHER DEVIATIONS AND EXCEPTIONS	
Specific Deviation	**Proposed Alternative/Solution**

Appendix F, Item F3 – Redline version of contract/ASA (to be submitted by vendors)

Appendix G – Existing contract benefits (plan design, wellness, services, standards, etc.) this section identifies the existing PERS plans contract benefits. Please indicate if you can match these benefits/services and if so with what resources and if not what specifically you would not be able to provide.

Current Contract Benefits	Reference Resources	Discuss and Identify comparable service offering.
NDPERS Specific Plan Designs		
• Actives and Pre Medicare Retirees Medical plans o PPO/Basic Plan – Grandfathered o PPO/Basic Plan – Non Grandfathered • Active and Pre Medicare Retirees Rx plan o	http://www.nd.gov/ndpers/insurance-plans/group-health-ppo-basic-grandfathered.html http://www.nd.gov/ndpers/insurance-plans/group-health-ppo-basic-non-grandfathered.html	
• Wellness Program o Dedicated Wellness Website and program similar to existing program with incentives, health club membership and employer efforts o Employer Based Wellness Program	http://www.nd.gov/ndpers/insurance-plans/employer-based-wellness.html Exhibit 1 Exhibit 2	
HDHP/HSA Option for State agencies	http://www.nd.gov/ndpers/insurance-plans/group-health-hdhp.html	
Medicare Retiree Plan o Plan F look alike	http://www.nd.gov/ndpers/insurance-plans/medicare-rx.html	
Separate Medicare Part D RX plan	http://www.nd.gov/ndpers/forms-and-publications/publications/grp-hlth-spd-retirees.pdf http://www.nd.gov/ndpers/forms-and-publications/publications/medicare-benefits-summary-current.pdf	

Current Contract Benefits	Reference Resources	Discuss and Identify comparable service offering.
General Services		
<u>Actuarial Services</u> • • Mandate cost estimates & reporting during Legislative session within 24 to 48 hours. • Trending • Financial reporting • Plan Design Options	Mandate Estimates – Exhibit 3 See Quarterly Report and Annual Report – (Exhibit 4 & 5 (Exhibit 6) See Exhibit 9	
<u>Underwriting Services</u> • Dedicated NDPERS underwriter • Enrollment processes – verify enrollments entered by NDPERS staff and sent through 834 file. Rush enrollments with immediate PTI updates, generate ID cards, mail benefit books, notify NDPERS when 834 file is bad, 834 file is mapped to correct group, roll, class of coverage using their rate structure code and coverage codes (other 834 files are required to send carrier our basic codes and class codes) and staff available always to answer questions by NDPERS office. • Eligibility (removal of dependents (EOM age 26), grandchildren when parent marries, divorce (removal for spouse and step children with or without rescission letters) • ID cards • Benefit books • Summary of Benefits & Coverage • 834 Enrollment Discrepancy Reports		

Current Contract Benefits	Reference Resources	Discuss and Identify comparable service offering.
Communications Services • NDPERS newsletter items • Health focused Newsletter generated by Carrier • Letters, posters, brochures and grids • Directories	http://www.nd.gov/ndpers/forms-and-publications/index.html	
Claims Administration & Member Services • Dedicated NDPERS Pod for claims and customer calls • Subrogation, Medicare secondary payer, coordination of benefits processes • Member advocacy program • Annual satisfaction survey • Annual NDPERS claims audit • Facilitate PBM Audit • MSP Data Match Compliance • Prenatal Program enrollment/claims processing for NDPERS specific benefit • Enrollment for Tobacco Cessation Program • Subscriber Appeals • Telephone support for dedicated wellness website –dedicated PERS service unit handles calls from members	https://www.bcbsnd.com/health-and-wellness-programs/member-advocate (Exhibit 7) (Exhibit 8) http://www.nd.gov/ndpers/forms-and-publications/publications/grp-hlth-spd-actives.pdf#page=35 https://www.bcbsnd.com/search-preview/-/ndpers-tobacco-cessation	
Finance • Manage & Report NDPERS risk sharing arrangement • Manage & Report NDPERS Cash Reserve Account • Process payments for NDPERS value added programs		

Current Contract Benefits	Reference Resources	Discuss and Identify comparable service offering.
• Tobacco Cessation Program • RX Disease Management Program • Employer Based Wellness Program • Billing (create monthly premium billings and group accounts receivables that report and track the total amount of premium due for all NDPERS members covered through carrier. These accounts are reconciled monthly with the payments and enrollment files submitted by NDPERS to ensure enrollment and billing accuracy) • 820 Premium Payment Discrepancy Reports		
All funds in the NDPERS account at BCBS get interest paid each month based upon the yield to maturity of US Treasury Notes maturing 24 months hence. Contractor shall identify the rate they propose to use in their proposal.	Contract provision 6.5	
Risk Sharing arrangement and return of funds if claims are less than premium	Sample Contract provisions 6 & 7	
<u>Information Technologies</u> • NDPERS specific 820 payment file • NDPERS specific 834 enrollment file • NDPERS specific benefit matrix and claims processing logic • System for processing claims for Tobacco Cessation Program • Secure file transfer system • Monthly Process Improvement team		

Current Contract Benefits	Reference Resources	Discuss and Identify comparable service offering.
meetings		
<u>Legislative and Legal Services</u> Monitor State and Federal legislation for changes affecting NDPERSMandate co estimates during Legislative session Contract reviews Develop Memorandum of Understandings for value added programsCompliance Pharmacy class action settlements Internal audit functions System for monitoring provider trends	Exhibit 3 Exhibit 10	
<u>ACA Reporting & Compliance</u> • Reporting of Minimum Essential Coverage (6055) • ACA required notices upon loss of coverage for exchanges • Monitor employer lapse in coverage for change to NGF and loss of participation if small group		
<u>Marketing and Adm Staff</u> • Dedicated NDPERS Account Executive • Dedicated NDPERS Account Manager • Dedicated NDPERS Wellness Consultant • Dedicated NDPERS Group Consultant • Pharmacy Consulting		
• Provide a stable Grandfathered benefit design by monitoring activities and regulations to limit risks		

Current Contract Benefits	Reference Resources	Discuss and Identify comparable service offering.
• Benefit overviews for agencies and political subdivisions • Complete an annual minimum participation and contribution survey • Monitor performance guarantees • Monitor and address Legislative items • Member education programs for agencies and political subdivisions • Conduct routine meetings with NDPERS staff to ensure adequate communication on items such as wellness, process improvement, benefit designs changes, and new programs.	In 2013, there were 37 employers who held benefit overview presentations. https://www.bcbsnd.com/web/employers/wellness-programs/member-education In 2013, 87 employer groups held member education presentations (3,423 members).	
Reporting • Quarterly Executive Summary and Annual Assessment • Monthly data files through secure file transfer system • Adhoc reporting including cost, utilization and risk analysis • Provide flexible spending account files to NDPERS ADP o	See Quarterly Report and Annual Report – Exhibit 4 & 5	
Wellness Programs		
Dedicated Wellness Website o Dedicated Wellness Program o Dedicated NDPERS portal o NDPERS specific voucher points o Developed wellness website challenges • Health Club Credit program • Support Wellness Star of the Month award designation. • Promote community based wellness	Exhibit 1 Exhibit 11 Exhibit 12 Exhibit 2 Exhibit 13	

Current Contract Benefits	Reference Resources	Discuss and Identify comparable service offering.
activities and award points for participation. • Develop and promote targeted messaging on Blood Pressure. • Monthly WebEx's provided by member education on dedicated wellness website and health club credit. <u>Employer Based Wellness Program</u> • Dedicated wellness specialist to assist coordinators with wellness activities, planning and implementing ideas. • Planned and coordinated summer Wellness Coordinator workshops. • Support the Lt Governor's Award for Worksite Wellness with HealthyND. • Monthly Newsletter for Wellness Coordinators • Monthly conference call with Wellness Coordinators • Provide monthly wellness articles for distribution to coordinators/employees. • Provide monthly posters for distribution to wellness worksites. <u>Employer Based Wellness Funding Program</u> • Wellness consultant on evaluation team • Review and score applications • Administer payment of invoices from NDPERS <u>Wellness Education</u>On site wellness presentations at employer worksites • Benefit presentations at employer worksites • Support Vaccination Awareness	http://www.nd.gov/ndpers/insurance-plans/employer-based-wellness.html Exhibit 14 Exhibit 15 http://www.nd.gov/ndpers/insurance-plans/employer-based-wellness.html Exhibit 16 http://www.nd.gov/ndpers/forms-and-publications/publications/additional-bcbs-wellness-programs.pdf	

Current Contract Benefits	Reference Resources	Discuss and Identify comparable service offering.
program with Department of Health • Create flyers for NDPERS web targeting specific disease/medical conditions • Organize the NDPERS Retiree Health Fairs . • Coordinate National Walk @ Lunch Day • Participate in COSE wellness fair at capitol each September		
Rx Services		

<u>Pharmacy Benefit Manager Programs</u>
• Integrated medical and pharmacy services
• Clinical programs
• Generic incentive programs
• Specialty pharmacy program
• RX mail order services
• Formulary program
• Drug utilization reviews
  • Retrospective DUR
  • Concurrent DUR
  • Prospective DUR
  • Guided Health Medication Therapy Management Program
  • Member rebate accounts
  • Rebates passed to NDPERS
Carrier has set up a Member Rebate Account (MRA) in the member's name. Accounts are set up at the member level. For every eligible brand prescription medication a member purchases at the point-of-sale (electronic claim), they will receive an appropriate portion of the manufacturer rebate associated
	https://www.myprime.com	

Current Contract Benefits	Reference Resources	Discuss and Identify comparable service offering.
with that particular medication into their MRA. Please note this program does not apply to COB or paper claims. • Establish a nationwide Select Pharmacy Network • Claims processing for Part D program		
Medical Management and Provider Services		
Medical Management • – Patient medical home • – rare and complex disease management • Disease management program for out of state members • member advocacy programs • Preauthorization's • Concurrent review/discharge planning • Prior approvals • Benefit inquiries • Therapy review process • Chiropractic review • Large case management • Prenatal Program with NDPERS specific benefits • Prenatal text messaging program • Provider news letters	https://www.bcbsnd.com/health-and-wellness-programs/mediqhome https://www.bcbsnd.com/health-and-wellness-programs/disease-management https://www.bcbsnd.com/health-and-wellness-programs/member-advocate http://www.nd.gov/ndpers/forms-and-publications/publications/grp-hlth-spd-actives.pdf#page=35 https://www.bcbsnd.com/health-and-wellness-programs/text4baby	

Current Contract Benefits	Reference Resources	Discuss and Identify comparable service offering.
<u>Provider Relations</u> • Carrier owned provider network7 • Total cost of care contracts • National network (total out of state discounts = Provider credentialing and contracting • Physician Quality Measurement Program • Physician Recognition Program • Patient Review of Physicians Program	http://provider.bcbsnd.com 97.7% of providers in Network 35% discount off in state changes. An NDPERS specific PPO network in addition to vendors network	
Medicare Part D		
• Special contract for administration of Part D product • NDPERS specific benefit plan design • NDPERS specific Part D online enrollments – NDPERS does handle enrollment, however carrier receives reports each week with any enrollment discrepancies and then works with the PDP vendor and NDPERS to rectify those. NDPERS and carrier both share in working with specific Part D enrollments. • NDPERS specific Part D billing – carrier handles the billing that come directly from Medicare Rx each month in a paper format. Carrier pays directly to Medicare Rx the premium amount requested on the bill. A dedicated Membership person that manually goes over the bill for discrepancies each month and will find any issues we may have with the bill. • Research member enrollment/disenrollment exception	http://www.nd.gov/ndpers/insurance-plans/medicare-rx.html	

Current Contract Benefits	Reference Resources	Discuss and Identify comparable service offering.

report
• Monthly meetings with Part D vendors
• Notification and tracking of late enrollment penalty (LEP)
• Notifications and tracking of Income-related monthly adjustment amount (IRMAA)
• Annual Adjustment to Part D rates based on the Federal subsidy and the Low Income Subsidy (LIS)
• Part D Reporting
  • Request for Information reports
  • NDPERS PDP Member Change reports
  • NDPERS PDP Response Error report
  • HICN reports
  • Gap/Cat
  • Process other internal and adhoc reporting
	Exhibit 17	

Health Savings Account		
Health Savings Account • Administration of HSA's • Administer payment of monthly invoice from NDPERS Cash Reserve Account •	http://www.nd.gov/ndpers/insurance-plans/group-health-hdhp.html	
Additional Administrative Programs		

• Tobacco Cessation Program
  • Grant application and contract
  • Enrollment
  • Claims processing
  • Reporting requirements
  • Invoices for grant reimbursement
	https://www.bcbsnd.com/search-preview/-/ndpers-tobacco-cessation	

Current Contract Benefits	Reference Resources	Discuss and Identify comparable service offering.

• RX Disease Management Program (About the Patient)
  • Eligibility reporting
  • Cost share incentive reporting
  • Administer payment of invoices from NDPERS Cash Reserve Account
	http://www.aboutthepatient.net/NDPERS-Program.html	

Miscellaneous		
Provide access to all subject matter experts and other appropriate personnel and make them available for attending board meetings, legislative, hearings, etc. as needed • Provide access to video or teleconference for Board meetings •		

Appendix H – Performance Standards and Guarantees

This section identifies the existing PERS performance standards and guarantees with the current plan administrator as modified to incorporate additional changes requested by PERS. Please indicate if you can match these standards/guarantees or suggest improvements or modifications in the space provided.

Criteria	Value of Incentive	Value of Forfeiture	Confirm acceptance of standard/guarantee or propose an improved or suggested modification
Cost Management:			
By December 31, 2014, 17% of NDPERS members have completed a Health Risk Assessment (currently at 15.5%).	$0.00	$15,000	
By December 31 2014, NDPERS will have a 5% point increase in the NDPERS group aggregate HRA wellness score.	$0.00	$10,000	
By December 31, 2014, HealthyBlue NDPERS group aggregate incentives paid for HealthyBlue redemptions will increase by 10% over 2013 NDPERS rate.	$0.00	$7,500	
2014 annual percentage average of NDPERS members receiving the Health Club Credit will increase by 10% over 2013 NDPERS rate.	$0.00	$7,500	
Health Outcomes:			
80% of the NDPERS population will be enrolled in a medical home.	$0.00	$15,000	
HEDIS-like measures breast cancer screening rates will be at least 80%.	$0.00	$15,000	
HEDIS-like measures cervical cancer screening rates will be at least 85%.	$0.00	$15,000	
HEDIS-like measures colorectal cancer screening rates will be at least 60%.	$0.00	$15,000	
Provider Network Management:			
BCBSND will maintain an NDPERS PPO network consisting of 92% or more of the in-	$0.00	$75,000	Amount incorporates a requested increase from the current level

Criteria	Value of Incentive	Value of Forfeiture	Confirm acceptance of standard/guarantee or propose an improved or suggested modification
state hospitals, MDs and Dos that participate in the Company's Par Network.			
BCBSND guarantees NDPERS a minimum provider discount (1-(Allowed/Billed)) of 30% for Non-Medicare contracts.	$0.00	$140,000	Amount incorporates a requested increase from the current level
Operational Performance:			
Claims Financial Accuracy will be 99% or greater.	$0.00	$25,000	
Claims Payment Incidence Accuracy will be 97% or greater.	$0.00	$25,000	
Claim Timeliness – claims processing within 30 calendar days will be 99% or greater.	$0.00	$25,000	
Average Speed of Answer will be 30 seconds or less.	$0.00	$25,000	
Abandoned rate will be 5% or less.	$0.00	$25,000	
Requested New Standards/Guarantees:			
Provide a standard by which interest rates will be set at a level at least as favorable to NDPERS as the current methodology	$0.00	$50,000	The interest rate utilized currently is based on the US Treasury Notes quoted by the Wall Street Journal
Provide a guarantee on Rx rebates that will be passed-through to NDPERS	$0.00	$10,000	
Total	**$0.00**	**$500,000**	

																	Owned Network	Other/Rented Network
totalsvc	totalpaid	EIN	surname	name	A1	A2	City	ST	zip	NPI	Spec	Specialty	CL	Cname	Cnpi		Network Yes/No	Network Yes/No
2,030	$1,094,086	450311334	MID DAKOTA SURGICE		401 N 9TH ST		BISMARCK	ND	58501	1366484404	70	Clinic	236001	MID DAKOTA CLINIC	1275587826			
1,745	$789,097	450450254	BISMARCK SURGICAL	CIATES	600 N 9TH ST		BISMARCK	ND	58501	1255339628	70	Clinic	1261002	BISMARCK SURGICAL ASSOCI	1255339628			
5,005	$772,208	450311334	RAO	VIJAY	401 N 9TH ST		BISMARCK	ND	58501	1982725180	75	Oncology	236001	MID DAKOTA CLINIC	1275587826			
44,311	$669,219	450226700	FISHER	CATHERINE	222 N 7TH ST		BISMARCK	ND	58501	1740326479	22	Pathology, Anatomy, Clinical Pathology	4001	SANFORD CLINIC	1811941172			
6,170	$592,618	450311334	RUHLAND	JESSICA	401 N 9TH ST		BISMARCK	ND	58501	1356440481	30	Radiology	236001	MID DAKOTA CLINIC	1275587826			
20,294	$588,163	999509846	PHARMACY		4510 13TH AVE SW		FARGO	ND	58121	0	63	Pharmacy	2635001	PHARMACY	0			
3,826	$574,399	450311334	BHARADWAJ	JAYARAM	401 N 9TH ST		BISMARCK	ND	58501	1083602155	11	Internal Medicine	236001	MID DAKOTA CLINIC	1275587826			
37,201	$567,721	911770748	SANFORD CLINIC BRO	Y EAST/FGO	801 BROADWAY NORTH		FARGO	ND	58102	1225194574	69	Independent Laboratory	3001	SANFORD BROADWAY CLINIC	1942241351			
23	$483,291	911770748	SANFORD PHARMACY B	WAY	737 BROADWAY N		FARGO	ND	58122	1235173519	63	Pharmacy	3085	SANFORD PHARMACY BROADWA	1235173519			
1,728	$410,006	450454363	DUFAN	TAREK	500 N 8TH ST		BISMARCK	ND	58501	1356585293	75	Oncology	1694001	BISMARCK CANCER CENTER	1538212162			
1,470	$393,681	450454363	WATKINS	JOHN	500 N 8TH ST		BISMARCK	ND	58501	1558450841	75	Oncology	1694001	BISMARCK CANCER CENTER	1538212162			
2,761	$390,282	450310462	DENTCHEV	TODOR	960 S COLUMBIA RD		GRAND FORKS	ND	58201	1669563771	75	Oncology	9028	ALTRU CANCER CENTER	1043309552			
516	$373,308	450447267	NORTH DAKOTA SURGE	ENTER	3035 DEMERS AVE		GRAND FORKS	ND	58201	1164428272	70	Clinic	752001	NORTH DAKOTA SURGERY CEN	1164428272			
5,303	$347,882	202404179	SANFORD HEALTHCARE	ESSORIES F	3223 32ND AVE S		FARGO	ND	58103	1770527590	54	Home Medical Equipment	3303001	SANFORD HEALTHCARE ACCES	1770527590			
5,240	$328,606	450395652	ALTRU SPECIALTY SE	ES DBA YOR	1200 S COLUMBIA RD		GRAND FORKS	ND	58201	1497844906	54	Home Medical Equipment	1973001	ALTRU SPECIALTY SERVICES	1497844906			
4,804	$319,560	450226662	VA MEDICAL CENTER		2101 ELM ST		FARGO	ND	58102	1437100971	60	Public Health or Welfare Agency	4534001	VA MEDICAL CENTER	1437100971			
4,815	$299,129	450226711	GREAT PLAINS REHAB	VICE	1212 E MAIN AVE		BISMARCK	ND	58501	1659435105	54	Home Medical Equipment	3320001	GREAT PLAINS REHAB SERVI	1659435105			
500	$294,584	450226909	STEEN	PRESTON	820 4TH ST N		FARGO	ND	58102	1124053285	75	Oncology	7742002	SANFORD ROGER MARIS CANC	1184917924			
849	$252,086	954662001	MINIMED DISTRIBUTI	ORPORATION	18000 DEVONSHIRE STREET		NORTHRIDGE	CA	91325	1356334577	54	Home Medical Equipment	6839001	MINIMED DISTRIBUTION COR	1356334577			
236	$235,024	113358535	ACCREDO HEALTH GRO	NC	2915 WATERS ROAD STE 109		EAGAN	MN	55121	1821048950	79	Home Infusion	4351001	ACCREDO HEALTH GROUP INC	1821048950			
815	$219,721	450226700	PETERSON	LYNNE	222 N 7TH ST		BISMARCK	ND	58501	1801908231	76	Heumatology	4001	SANFORD CLINIC	1811941172			
3,461	$218,879	202404179	SANFORD HEALTHCARE	ESSORIES B	121 E CENTURY AVE		BISMARCK	ND	58503	1851488332	54	Home Medical Equipment	3302001	SANFORD HEALTHCARE ACCES	1851488332			
1,739	$215,026	450310462	PANICO	KEVIN	960 S COLUMBIA RD		GRAND FORKS	ND	58201	1225120652	75	Oncology	9028	ALTRU CANCER CENTER	1043309552			
3,832	$202,861	450310462	GREEK	GREGORY	725 HAMLINE ST		GRAND FORKS	ND	58203	1376634386	8	Family Practice	9009	ALTRU FAMILY MEDICINE RE	1043309552			
565	$198,002	450226909	GEERAERTS	LOUIS	820 4TH ST N		FARGO	ND	58102	1770500639	75	Oncology	7742002	SANFORD ROGER MARIS CANC	1184917924			
70	$197,009	273282381	VALLEY MED FLIGHT		469 BURDICK CT		GRAND FORKS	ND	58203	1326354978	59	Ambulance Service	7656001	VALLEY MED FLIGHT INC	1326354978			
1,478	$193,864	450310462	WALSH	DANIEL	960 S COLUMBIA RD		GRAND FORKS	ND	58201	1093801359	75	Oncology	9028	ALTRU CANCER CENTER	1043309552			
2,438	$192,598	450226909	MARSDEN	RICHARD	801 BROADWAY NORTH		FARGO	ND	58102	1801814413	30	Radiology	7742001	SANFORD BROADWAY CLINIC	1184917924			
2,431	$176,033	450226700	FOGARTY	EDWARD	222 N 7TH ST		BISMARCK	ND	58501	1902826340	30	Radiology	4001	SANFORD CLINIC	1811941172			
583	$174,331	450226909	KREIS	REBECCA	820 4TH ST N		FARGO	ND	58102	1164775441	50	Nurse Practitioner	7742002	SANFORD ROGER MARIS CANC	1184917924			
656	$172,968	450373704	METRO AREA AMBULAN	ER	2940 N 19TH ST		BISMARCK	ND	58503	1922004092	59	Ambulance Service	2991001	METRO AREA AMBULANCE SER	1922004092			
2,258	$172,783	450226700	TELLO-SKJERSETH	CHRISTINA	222 N 7TH ST		BISMARCK	ND	58501	1144480971	30	Radiology	4001	SANFORD CLINIC	1811941172			
386	$169,109	911770748	SANFORD PHARMACY B	WAY	737 BROADWAY N		FARGO	ND	58122	1235173519	79	Home Infusion	3085	SANFORD PHARMACY BROADWA	1235173519			
6,934	$165,981	911770748	SANFORD SOUTH UNIV	TY CAMPUS/	1720 UNIVERSITY DR S		FARGO	ND	58103	1174680052	69	Independent Laboratory	3904	SANFORD SOUTH UNIVERSITY	1942241351			
4,077	$165,761	911770748	MARSDEN	RICHARD	1412 MAIN ST		HAWLEY	MN	56549	1801814413	30	Radiology	513001	SANFORD HAWLEY CLINIC	1942241351			
2,469	$164,041	450226700	MILLER	JOHN	222 N 7TH ST		BISMARCK	ND	58501	1346448925	30	Radiology	4001	SANFORD CLINIC	1811941172			
525	$157,820	450226711	BELANGER	ERIC	900 E BROADWAY AVE		BISMARCK	ND	58501	1801972161	14	Neurological Surgery	501001	ST ALEXIUS MEDICAL CENTE	1205868429			
1,226	$156,447	450311334	BRADLEY	SHANNON	401 N 9TH ST		BISMARCK	ND	58501	1225082647	16	Obstet/Gynecology	236001	MID DAKOTA CLINIC	1275587826			
4,290	$155,683	450311334	ERICKSTAD	JOHN	401 N 9TH ST		BISMARCK	ND	58501	1457399644	8	Family Practice	236001	MID DAKOTA CLINIC	1275587826			
1,304	$153,965	450450745	SCHALL	DAVID	3035 DEMERS AVE		GRAND FORKS	ND	58201	1932170057	20	Orthopedic Surgery	112001	VALLEY BONE AND JOINT CL	1033180153			
1,653	$151,954	911770748	BALDWIN	JERRY	801 BROADWAY NORTH		FARGO	ND	58102	1659399350	22	Pathology, Anatomy, Clinical Pathology	3001	SANFORD BROADWAY CLINIC	1942241351			
2,231	$151,468	450226700	MCINTEE	MICHAEL	222 N 7TH ST		BISMARCK	ND	58501	1053423525	30	Radiology	4001	SANFORD CLINIC	1811941172			
610	$150,582	450226909	GROSS	GERALD	820 4TH ST N		FARGO	ND	58102	1013935667	75	Oncology	7742002	SANFORD ROGER MARIS CANC	1184917924			
683	$148,016	450226909	GITAU	MARK	820 4TH ST N		FARGO	ND	58102	1225073661	75	Oncology	7742002	SANFORD ROGER MARIS CANC	1184917924			
765	$145,546	201200995	POTTI	ANIL	1451 44 AVE S UNIT E		GRAND FORKS	ND	58201	1427122266	11	Internal Medicine	6336001	NOYES, WILLIAM, MD, PC D	1245332311			
2,035	$145,283	450226700	IWAMOTO	MATTHEW	222 N 7TH ST		BISMARCK	ND	58501	1073547014	30	Radiology	4001	SANFORD CLINIC	1811941172			
2,592	$141,952	450442285	QN BURDICK		1 MAIN		BELCOURT	ND	58316	1952346934	1	General Practice	1349001	QN BURDICK MEMORIAL HEAL	1952346934			
964	$140,785	450408552	JOHNSON	MAX	2829 S UNIV DR STE 204		FARGO	ND	58103	1679559975	18	Opthalmology	530001	RETINA CONSULTANTS	1972589182			
140	$140,486	870514323	MYRIAD GENETIC LAB	ORIES INC	320 WAKARA WAY		SALT LAKE CITY	UT	84108	1669484473	95	Genetic Lab	7732001	MYRIAD GENETIC LABORATOR	1669484473			
440	$139,678	450447247	NORTHERN PLAINS SU	Y	44 4TH ST S		FARGO	ND	58103	1649350844	70	Clinic	1319001	NORTHERN PLAINS SURGERY	1649350844			
431	$138,541	450226711	KRALJIC	STEVEN	900 E BROADWAY AVE		BISMARCK	ND	58501	1043227630	14	Neurological Surgery	501001	ST ALEXIUS MEDICAL CENTE	1205868429			
1,454	$136,781	450310462	HOVERSON-SCHOTT	ALYSSA	3165 DEMERS AVE		GRAND FORKS	ND	58201	1982613246	7	Dermatology	9016	TRUYU AESTHETIC CENTER	1043309552			
1,503	$136,159	272711099	GRUBE	THOMAS	107 3RD AVE NW		MANDAN	ND	58554	1659328516	18	Opthalmology	7567001	GRUBE RETINA CLINIC, PC	1528389871			
702	$131,091	450344371	FM AMBULANCE		2215 18TH ST S		FARGO	ND	58103	1770528606	59	Ambulance Service	1855001	FM AMBULANCE SERVICE, IN	1770528606			
770	$130,849	450321538	JUELSON	TIMOTHY	310 N 9TH ST		BISMARCK	ND	58501	1174569826	20	Orthopedic Surgery	188001	THE BONE & JOINT CENTER,	1750307872			
1,441	$128,416	450226700	MILLER	BRENDA	1040 TOCOMA AVE		BISMARCK	ND	58504	1619089109	8	Family Practice	4059	SANFORD SOUTH CLINIC	1811941172			
731	$126,632	450311334	APPERT	DAVID	2700 STATE ST		BISMARCK	ND	58503	1144294208	7	Dermatology	236006	MID DAKOTA CLINIC - GATE	1275587826			
458	$126,628	450226909	PANWALKAR	AMIT	820 4TH ST N		FARGO	ND	58102	1043426034	75	Oncology	7742002	SANFORD ROGER MARIS CANC	1184917924			
1,695	$125,999	450310462	SHELTON	FRANK	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1801888334	37	Pediatrics	9001	ALTRU HEALTH SYSTEM	1043309552			
1,276	$125,547	450311334	BURY	JAN	1000 E ROSSER AVE		BISMARCK	ND	58501	1790731214	16	Obstet/Gynecology	236008	MID DAKOTA CLINIC-CENTER	1275587826			
310	$124,045	450450745	CLELAND	ESPERANZA	3035 DEMERS AVE		GRAND FORKS	ND	58201	1891995445	76	Heumatology	112001	VALLEY BONE AND JOINT CL	1033180153			
1,143	$120,694	450311334	KATHAWALA	MUSTAFA	401 N 9TH ST		BISMARCK	ND	58501	1497709695	10	Gastronenterology	236001	MID DAKOTA CLINIC	1275587826			
435	$120,480	201200995	NOYES	WILLIAM	1451 44 AVE S UNIT E		GRAND FORKS	ND	58201	1649382292	75	Oncology	6336001	NOYES, WILLIAM, MD, PC D	1245332311			
1,074	$117,817	450321538	CARLSON	CHAD	310 N 9TH ST		BISMARCK	ND	58501	1588873186	20	Orthopedic Surgery	188001	THE BONE & JOINT CENTER,	1750307872			

30	$116,680	721538378	BISMARCK AIR MEDIC	LC	1139 MEMORIAL HIGHWAY		BISMARCK	ND	58504	1255337333	59	Ambulance Service	5925001	BISMARCK AIR MEDICAL LLC	1255337333		
1,132	$115,106	450311334	HUTCHENS	THOMAS	401 N 9TH ST		BISMARCK	ND	58501	1982658134	16	Obstet/Gynecology	236001	MID DAKOTA CLINIC	1275587826		
844	$114,817	450321538	PIERCE	TROY	310 N 9TH ST		BISMARCK	ND	58501	1972521870	40	Hand Surgery	188001	THE BONE & JOINT CENTER,	1750307872		
753	$112,893	450450745	THOMPSON	JOFFREY	3035 DEMERS AVE		GRAND FORKS	ND	58201	1780655845	20	Orthopedic Surgery	112001	VALLEY BONE AND JOINT CL	1033180153		
808	$111,898	450226711	FRANCIS	LISA	900 E BROADWAY AVE		BISMARCK	ND	58501	1891958435	76	Heumatology	501001	ST ALEXIUS MEDICAL CENTE	1205868429		
758	$111,534	450448386	DAKOTA SURGERY AND	ER	430 E SWEET AVE		BISMARCK	ND	58504	1952348013	70	Clinic	1052001	DAKOTA SURGERY & LASER C	1952348013		
761	$111,201	450226909	MATZKE	THOMAS	4656 40TH AVE S		FARGO	ND	58104	1639121304	7	Dermatology	7742010	SANFORD DERMATOLOGY & LA	1184917924		
3,116	$111,007	450311334	ROSWICK	ROBERT	2700 STATE ST		BISMARCK	ND	58503	1942240668	8	Family Practice	236006	MID DAKOTA CLINIC - GATE	1275587826		
2,940	$109,937	450311334	MOEN	DOUGLAS	2700 STATE ST		BISMARCK	ND	58503	1477506137	8	Family Practice	236006	MID DAKOTA CLINIC - GATE	1275587826		
1,027	$109,928	450310462	BROWN	MICHAEL	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1679670459	16	Obstet/Gynecology	9001	ALTRU HEALTH SYSTEM	1043309552		
1,172	$109,632	450413089	VOLK	CHARLES	200 S 5TH ST		BISMARCK	ND	58504	1821044926	18	Opthalmology	278001	DAKOTA EYE INSTITUTE	1962449835		
1,174	$108,722	450226700	STEIN	SHERRY	1040 TOCOMA AVE		BISMARCK	ND	58504	1134227895	8	Family Practice	4059	SANFORD SOUTH CLINIC	1811941172		
1,076	$108,694	450226700	CUSIC	ROBERT	3318 N 14TH STREET		BISMARCK	ND	58503	1851388490	72	Emergency Medicine	4064	SANFORD NORTH WALK-IN CL	1811941172		
1,759	$107,902	450310462	ZELEWSKI	SUSAN	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1538255898	37	Pediatrics	9001	ALTRU HEALTH SYSTEM	1043309552		
2,805	$106,901	450311334	MOE	JASON	401 N 9TH ST		BISMARCK	ND	58501	1396763975	8	Family Practice	236001	MID DAKOTA CLINIC	1275587826		
2,333	$106,509	911770748	MUHS	DAVID	904 5TH AVE NE		JAMESTOWN	ND	58401	1114945797	8	Family Practice	3005	SANFORD HEALTH JAMESTOWN	1942241351		
1,902	$106,244	450311334	LORAAS	DAWN	1000 E ROSSER AVE		BISMARCK	ND	58501	1679520183	50	Nurse Practitioner	236008	MID DAKOTA CLINIC-CENTER	1275587826		
531	$106,106	450226909	TINGUELY	MATTHEW	820 4TH ST N		FARGO	ND	58102	1548348410	11	Internal Medicine	7742002	SANFORD ROGER MARIS CANC	1184917924		
2,337	$106,083	911770748	MCMILLAN	WILLIAM	904 5TH AVE NE		JAMESTOWN	ND	58401	1831117415	8	Family Practice	3005	SANFORD HEALTH JAMESTOWN	1942241351		
1,387	$105,710	450226700	SMITH	STUART	1040 TOCOMA AVE		BISMARCK	ND	58504	1821196577	8	Family Practice	4059	SANFORD SOUTH CLINIC	1811941172		
588	$104,664	450226909	KOBRINSKY	NATHAN	820 4TH ST N		FARGO	ND	58102	1659398329	75	Oncology	7742002	SANFORD ROGER MARIS CANC	1184917924		
1,743	$104,276	450320853	LEIDENIX	MONTE	620 N 9TH ST		BISMARCK	ND	58501	1104814425	18	Opthalmology	202001	EYE CLINIC OF NORTH DAKO	1497853717		
1,994	$104,173	450310462	DEERE	JOSHUA	1380 S COLUMBIA RD		GRAND FORKS	ND	58201	1083838411	8	Family Practice	9021	ALTRU FAMILY MEDICINE CE	1043309552		
895	$103,711	450321538	CARLSON	JOSEPH	310 N 9TH ST		BISMARCK	ND	58501	1013939693	20	Orthopedic Surgery	188001	THE BONE & JOINT CENTER,	1750307872		
895	$103,185	450226700	RAUTA	OLIMPIA	3318 N 14TH STREET		BISMARCK	ND	58503	1043224348	8	Family Practice	4064	SANFORD NORTH WALK-IN CL	1811941172		
1,792	$102,626	202404179	SANFORD HEALTHCARE	ESSORIES J	1023 10TH ST SE		JAMESTOWN	ND	58401	1548357023	54	Home Medical Equipment	3371001	SANFORD HEALTHCARE ACCES	1548357023		
725	$102,213	450321538	ACKERMAN	DUNCAN	310 N 9TH ST		BISMARCK	ND	58501	1508842154	20	Orthopedic Surgery	188001	THE BONE & JOINT CENTER,	1750307872		
1,818	$101,829	450311334	EARSLEY	ANNE	401 N 9TH ST		BISMARCK	ND	58501	1679518484	97	Physician Assistant	236001	MID DAKOTA CLINIC	1275587826		
633	$101,474	450226700	BERGLUND	DOUGLAS	222 N 7TH ST		BISMARCK	ND	58501	1396708418	2	General Surgery	4001	SANFORD CLINIC	1811941172		
825	$100,810	450321538	BOPP	TIMOTHY	310 N 9TH ST		BISMARCK	ND	58501	1124046016	20	Orthopedic Surgery	188001	THE BONE & JOINT CENTER,	1750307872		
329	$99,996	450226909	SHAHIDI	HOMAYOON	820 4TH ST N		FARGO	ND	58102	1295756419	75	Oncology	7742002	SANFORD ROGER MARIS CANC	1184917924		
1,539	$99,586	911770748	SORLIE	MANDY	904 5TH AVE NE		JAMESTOWN	ND	58401	1649478090	8	Family Practice	3005	SANFORD HEALTH JAMESTOWN	1942241351		
1,249	$99,462	450413089	HILTS	GEORGE	200 S 5TH ST		BISMARCK	ND	58504	1235186040	18	Opthalmology	278001	DAKOTA EYE INSTITUTE	1962449835		
284	$98,857	208818487	MATTHYS	GARY	2301 25TH ST S SUITE I		FARGO	ND	58103	1922025568	20	Orthopedic Surgery	7030001	MATTHYS, GARY, MD	1568643823		
1,172	$98,385	450226700	TINCHER	MICHELLE	1040 TOCOMA AVE		BISMARCK	ND	58504	1457422883	8	Family Practice	4059	SANFORD SOUTH CLINIC	1811941172		
400	$97,710	911770748	MAIER	STEVEN	904 5TH AVE NE		JAMESTOWN	ND	58401	1710905385	2	General Surgery	3005	SANFORD HEALTH JAMESTOWN	1942241351		
529	$95,705	450311334	HELBLING	BRANDON	401 N 9TH ST		BISMARCK	ND	58501	1295938413	2	General Surgery	236001	MID DAKOTA CLINIC	1275587826		
1,708	$95,264	450311334	KOZEL	LISA	828 KIRKWOOD MALL		BISMARCK	ND	58504	1487692661	37	Pediatrics	236002	MID DAKOTA CLINIC-KIRKWO	1275587826		
683	$94,284	450310462	SETNESS HOEFS	TANA	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1083700348	16	Obstet/Gynecology	9001	ALTRU HEALTH SYSTEM	1043309552		
1,796	$93,730	450310462	GAUL	JOANNE	4440 S WASHINGTON ST		GRAND FORKS	ND	58201	1194816108	8	Family Practice	9033	ALTRU PROFESSIONAL CENTE	1043309552		
1,154	$93,516	450226700	MCDONOUGH	STEPHEN	222 N 7TH ST		BISMARCK	ND	58501	1912019480	37	Pediatrics	4001	SANFORD CLINIC	1811941172		
1,122	$93,500	450311334	WITT	JOHN	1000 E ROSSER AVE		BISMARCK	ND	58501	1629012695	16	Obstet/Gynecology	236008	MID DAKOTA CLINIC-CENTER	1275587826		
1,420	$93,149	450278212	KEYCARE MEDICAL		530 20TH AVE SW		MINOT	ND	58701	1467473827	54	Home Medical Equipment	1938001	KEYCARE MEDICAL	1467473827		
1,621	$93,148	450310462	EICKMAN	JEFFREY	4440 S WASHINGTON ST		GRAND FORKS	ND	58201	1578654588	8	Family Practice	9033	ALTRU PROFESSIONAL CENTE	1043309552		
1,798	$92,583	450310462	MILLETTE	KEITH	1380 S COLUMBIA RD		GRAND FORKS	ND	58201	1144312570	8	Family Practice	9021	ALTRU FAMILY MEDICINE CE	1043309552		
800	$91,587	450226700	OCEJO	RAFAEL	222 N 7TH ST		BISMARCK	ND	58501	1346352861	37	Pediatrics	4001	SANFORD CLINIC	1811941172		
608	$90,338	450310462	ANDRESON	LAURA	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1003823907	16	Obstet/Gynecology	9001	ALTRU HEALTH SYSTEM	1043309552		
776	$90,270	450311334	SCHAFER MCLEAN	RHONDA	401 N 9TH ST		BISMARCK	ND	58501	1396891065	16	Obstet/Gynecology	236001	MID DAKOTA CLINIC	1275587826		
1,850	$89,970	450311334	TRAXINGER	STEPHANIE	401 N 9TH ST		BISMARCK	ND	58501	1366608465	8	Family Practice	236001	MID DAKOTA CLINIC	1275587826		
7,271	$89,605	841641341	NORTHERN PLAINS LA	TORY LLC	401 N 9TH ST		BISMARCK	ND	58501	1174504989	69	Independent Laboratory	6589001	NORTHERN PLAINS LABORATO	1174504989		
2,743	$89,185	450311334	GRENZ	DON	401 N 9TH ST		BISMARCK	ND	58501	1699720995	11	Internal Medicine	236001	MID DAKOTA CLINIC	1275587826		
407	$89,021	450226558	DIRI	ERDAL	400 BURDICK EXPY E		MINOT	ND	58701	1245328681	76	Heumatology	635006	TRINITY MEDICAL GROUP	1083653752		
239	$88,949	450226909	ALZOUBI	AMMAR	820 4TH ST N		FARGO	ND	58102	1386720340	75	Oncology	7742002	SANFORD ROGER MARIS CANC	1184917924		
1,412	$88,926	450311334	ANDERSON	KATHY	401 N 9TH ST		BISMARCK	ND	58501	1942405923	37	Pediatrics	236001	MID DAKOTA CLINIC	1275587826		
769	$88,703	450226711	TARIQ	FARHAN	900 E BROADWAY AVE		BISMARCK	ND	58501	1356481600	13	Neurology	501001	ST ALEXIUS MEDICAL CENTE	1205868429		
1,352	$88,175	450413089	LITCHFIELD	DOUGLAS	200 S 5TH ST		BISMARCK	ND	58504	1316994130	18	Opthalmology	278001	DAKOTA EYE INSTITUTE	1962449835		
1,697	$86,653	450310462	BAKKE	ERIC	4440 S WASHINGTON ST		GRAND FORKS	ND	58201	1043317829	8	Family Practice	9033	ALTRU PROFESSIONAL CENTE	1043309552		
841	$86,210	200250311	ADDO	FERDINAND	300 W CENTURY AVE		BISMARCK	ND	58503	1760461388	11	Internal Medicine	5954001	ADDO, FEK MD	1154505360		
1,333	$85,329	450310462	PHILPOT	HEIDI	725 HAMLINE ST		GRAND FORKS	ND	58203	1841217320	8	Family Practice	9009	ALTRU FAMILY MEDICINE RE	1043309552		
3,243	$85,273	450311334	TANOUS	ROBERT	401 N 9TH ST		BISMARCK	ND	58501	1174550180	11	Internal Medicine	236001	MID DAKOTA CLINIC	1275587826		
1,567	$84,877	911770748	SKARI	BRADLY	904 5TH AVE NE		JAMESTOWN	ND	58401	1376747030	8	Family Practice	3005	SANFORD HEALTH JAMESTOWN	1942241351		
1,015	$84,872	450311334	KARLS	KEVIN	401 N 9TH ST		BISMARCK	ND	58501	1790762086	10	Gastronenterology	236001	MID DAKOTA CLINIC	1275587826		
1,080	$84,637	450226700	TWOGOOD	TODD	222 N 7TH ST		BISMARCK	ND	58501	1013015783	37	Pediatrics	4001	SANFORD CLINIC	1811941172		
2,118	$84,609	270342077	IVERSON HARSTAD	CHARITY	911 W INTERSTATE AVE	STE 12 BLDG 3	BISMARCK	ND	58503	1295968220	65	Physical Therapy	7476001	NORTHERN LIGHTS PHYSICAL	1760613632		
1,635	$84,475	450310462	GOMEZ	YVONNE	1380 S COLUMBIA RD		GRAND FORKS	ND	58201	1265568851	8	Family Practice	9021	ALTRU FAMILY MEDICINE CE	1043309552		
1,302	$84,002	450310462	SONDROL	LORI	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1164518429	37	Pediatrics	9001	ALTRU HEALTH SYSTEM	1043309552		

105	$83,495	450226711	ST ALEXIUS COMMUNI	HARMACY	900 E BROADWAY		BISMARCK	ND	58501	1336283928	79	Home Infusion	92004	ST ALEXIUS COMMUNITY PHA	1336283928		
2,094	$82,968	450311334	JONDAHL	PAUL	828 KIRKWOOD MALL		BISMARCK	ND	58504	1780638981	8	Family Practice	236002	MID DAKOTA CLINIC-KIRKWO	1275587826		
388	$82,481	450226700	BOYKO	KIMBER	222 N 7TH ST		BISMARCK	ND	58501	1386602043	2	General Surgery	4001	SANFORD CLINIC	1811941172		
1,111	$81,683	450226700	OKSA	AMY	2615 FAIRWAY ST		DICKINSON	ND	58601	1073611711	37	Pediatrics	4008	SANFORD HEALTH DICKINSON	1811941172		
700	$81,530	450311334	HETLAND	ANDREW	401 N 9TH ST		BISMARCK	ND	58501	1457302622	4	Otology, Laryngology, Rhinology	236001	MID DAKOTA CLINIC	1275587826		
681	$81,384	450452983	CHELLIAH	NOAH	1191 S COLUMBIA RD		GRAND FORKS	ND	58201	1952485740	6	Cardivascular Disease	1268001	THE HEART INSTITUTE OF N	1609945914		
1,025	$80,570	450311334	WISDOM	MARISSA	401 N 9TH ST		BISMARCK	ND	58501	1972713337	16	Obstet/Gynecology	236001	MID DAKOTA CLINIC	1275587826		
930	$80,554	450226700	PENGILLY	DAVID	1040 TOCOMA AVE		BISMARCK	ND	58504	1710099114	8	Family Practice	4059	SANFORD SOUTH CLINIC	1811941172		
115	$80,545	450226909	EICKMAN	JOHN	700 1ST AVE S		FARGO	ND	58103	1114106820	14	Neurological Surgery	7742007	SANFORD NEUROSCIENCE CLI	1184917924		
569	$79,982	450310462	BARBOT	PIERRE	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1184821985	16	Obstet/Gynecology	9001	ALTRU HEALTH SYSTEM	1043309552		
1,231	$79,789	450310462	PETERSON	JENNIFER	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1144333022	37	Pediatrics	9001	ALTRU HEALTH SYSTEM	1043309552		
916	$79,492	450226909	WELLE	PATRICK	2701 13TH AVE S		FARGO	ND	58103	1487675724	37	Pediatrics	7742009	SANFORD CHILDRENS SOUTHW	1184917924		
840	$79,121	450226700	BOSSORT	JAMES	715 E BROADWAY AVE		BISMARCK	ND	58501	1003879545	1	General Practice	4050	SANFORD SEVENTH AND BROA	1811941172		
828	$78,517	450413089	FORTNEY	AARON	200 S 5TH ST		BISMARCK	ND	58504	1447297189	18	Opthalmology	278001	DAKOTA EYE INSTITUTE	1962449835		
823	$78,240	450226700	BETTING	SUSAN	3318 N 14TH STREET		BISMARCK	ND	58503	1700849833	8	Family Practice	4064	SANFORD NORTH WALK-IN CL	1811941172		
402	$78,098	450226700	COOMBE	WALTER	715 E BROADWAY AVE		BISMARCK	ND	58501	1639196454	4	Otology, Laryngology, Rhinology	4050	SANFORD SEVENTH AND BROA	1811941172		
694	$77,659	450450745	CLAYBURGH	ROBERT	3035 DEMERS AVE		GRAND FORKS	ND	58201	1598736662	20	Orthopedic Surgery	112001	VALLEY BONE AND JOINT CL	1033180153		
1,000	$76,956	450311334	OBRITSCH	JERRY	1000 E ROSSER AVE		BISMARCK	ND	58501	1093769291	16	Obstet/Gynecology	236008	MID DAKOTA CLINIC-CENTER	1275587826		
226	$76,900	200364229	RINGDAHL INC DBA J	TOWN AMBUL	1002 3RD AVE SE		JAMESTOWN	ND	58401	1710047162	59	Ambulance Service	6193001	RINGDAHL INC DBA JAMESTO	1710047162		
1,052	$76,721	450310462	ROERS IRMEN	STACY	1200 S COLUMBIA RD		GRAND FORKS	ND	58201	1578723789	8	Family Practice	62001	ALTRU HOSPITAL	1154346161		
1,539	$76,002	450311334	WELLS	ROBERT	401 N 9TH ST		BISMARCK	ND	58501	1174545743	8	Family Practice	236001	MID DAKOTA CLINIC	1275587826		
736	$75,795	450310462	LEICHTER	ERIC	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1295822104	34	Urology	9001	ALTRU HEALTH SYSTEM	1043309552		
855	$75,198	450310462	HAUG	WILLIAM	1300 S COLUMBIA RD		GRAND FORKS	ND	58201	1922084284	96	#N/A	232001	ALTRU REHABILITATION CEN	1437248945		
1,341	$75,014	450310462	CALIN	CRISTINA	1380 S COLUMBIA RD		GRAND FORKS	ND	58201	1811093255	8	Family Practice	9021	ALTRU FAMILY MEDICINE CE	1043309552		
1,191	$73,981	450311334	TOMAN	KRISTIE	401 N 9TH ST		BISMARCK	ND	58501	1548452733	37	Pediatrics	236001	MID DAKOTA CLINIC	1275587826		
654	$73,808	450310462	WILDEY	BRIAN	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1578754388	16	Obstet/Gynecology	9001	ALTRU HEALTH SYSTEM	1043309552		
1,280	$73,764	450311334	GRAF	STACIE	1000 E ROSSER AVE		BISMARCK	ND	58501	1124075619	97	Physician Assistant	236008	MID DAKOTA CLINIC-CENTER	1275587826		
1,413	$73,591	450310462	NALUBEGA	RITA	1001 7TH ST		DEVILS LAKE	ND	58301	1003837964	8	Family Practice	9027	ALTRU CLINIC LAKE REGION	1861581373		
1,196	$73,558	450311334	STRAND	MEGAN	2700 STATE ST		BISMARCK	ND	58503	1841447166	7	Dermatology	236006	MID DAKOTA CLINIC - GATE	1275587826		
839	$73,283	450226909	MARSDEN	RICHARD	2400 32ND AVE S		FARGO	ND	58103	1801814413	30	Radiology	7742008	SANFORD SOUTHPOINTE CLIN	1184917924		
922	$72,925	450226711	FUKUDA	CHRISTOPHE	900 E BROADWAY AVE		BISMARCK	ND	58501	1922089721	34	Urology	501001	ST ALEXIUS MEDICAL CENTE	1205868429		
1,256	$72,615	450311334	ZACHER	CARLA	828 KIRKWOOD MALL		BISMARCK	ND	58504	1700828225	37	Pediatrics	236002	MID DAKOTA CLINIC-KIRKWO	1275587826		
1,007	$72,347	450226909	HANSON	STEPHANIE	2701 13TH AVE S		FARGO	ND	58103	1548227846	37	Pediatrics	7742009	SANFORD CHILDRENS SOUTHW	1184917924		
998	$71,916	450458138	MATHISON	SUSAN	1800 21 AVE S		FARGO	ND	58103	1952469165	4	Otology, Laryngology, Rhinology	2004001	CATALYST MEDICAL CENTER,	1043378268		
1,031	$71,558	450226700	LANGE	DARWIN	222 N 7TH ST		BISMARCK	ND	58501	1790855252	8	Family Practice	4001	SANFORD CLINIC	1811941172		
1,364	$70,613	450310462	NYGARD	SHANE	4440 S WASHINGTON ST		GRAND FORKS	ND	58201	1053403485	8	Family Practice	9033	ALTRU PROFESSIONAL CENTE	1043309552		
383	$70,602	450226909	WOLF	LORELEI	820 4TH ST N		FARGO	ND	58102	1891717468	50	Nurse Practitioner	7742002	SANFORD ROGER MARIS CANC	1184917924		
199	$70,515	450226909	KNUTSON	CYNTHIA	700 1ST AVE S		FARGO	ND	58103	1841218419	13	Neurology	7742007	SANFORD NEUROSCIENCE CLI	1184917924		
5,310	$70,027	450226700	RODACKER	MARK	300 N 7TH ST		BISMARCK	ND	58501	1437261724	21	Pathology, Anatomy, Clinical Pathology	440001	SANFORD MEDICAL CENTER/B	1811941172		
866	$69,611	450226700	GARDNER	BRUCE	300 N 7TH ST		BISMARCK	ND	58501	1508032103	30	Radiology	440001	SANFORD MEDICAL CENTER/B	1811941172		
1,067	$69,500	450226700	KLEIN	DALE	222 N 7TH ST		BISMARCK	ND	58501	1215048277	8	Family Practice	4001	SANFORD CLINIC	1811941172		
1,584	$68,914	450310462	FUNK	PETER	1380 S COLUMBIA RD		GRAND FORKS	ND	58201	1386735397	8	Family Practice	9021	ALTRU FAMILY MEDICINE CE	1043309552		
568	$68,784	450226700	NELSON	JEFFREY	715 E BROADWAY AVE		BISMARCK	ND	58501	1649433608	4	Otology, Laryngology, Rhinology	4050	SANFORD SEVENTH AND BROA	1811941172		
1,100	$68,782	450433852	WINMAR DIAGNOSTICS		2700 12TH AVE S STE B		FARGO	ND	58103	1114071040	54	Home Medical Equipment	616005	WINMAR DIAGNOSTICS NORTH	1114071040		
194	$68,621	450226909	SNOW	DENISE	820 4TH ST N		FARGO	ND	58102	1669494209	75	Oncology	7742002	SANFORD ROGER MARIS CANC	1184917924		
292	$68,487	450226909	TERSTRIEP	SHELBY	820 4TH ST N		FARGO	ND	58102	1578536728	75	Oncology	7742002	SANFORD ROGER MARIS CANC	1184917924		
256	$68,336	331071823	CORPUS JR	EDUARDO	2400 10 ST SW STE 418		MINOT	ND	58701	1144333709	2	General Surgery	6124001	THE CORTINO GROUP LTD, L	1144333709		
883	$68,005	450226700	SHULTZ PIATZ	KINSEY	300 N 7TH ST		BISMARCK	ND	58501	1770598427	8	Family Practice	440001	SANFORD MEDICAL CENTER/B	1811941172		
613	$67,568	450226700	KOLEILAT	NADIM	222 N 7TH ST		BISMARCK	ND	58501	1700997780	34	Urology	4001	SANFORD CLINIC	1811941172		
567	$67,399	450310462	WOODWARD	GEORGE	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1811922628	13	Neurology	9001	ALTRU HEALTH SYSTEM	1043309552		
1,212	$67,221	911770748	MARSDEN	RICHARD	2400 32ND AVE S		FARGO	ND	58103	1801814413	30	Radiology	3014	SANFORD SOUTHPOINTE CLIN	1942241351		
4,254	$66,944	456004318	FIRST DISTRICT HLT	IT	801 11TH AVE SW		MINOT	ND	58701	1245314533	60	Public Health or Welfare Agency	347001	FIRST DISTRICT HEALTH UN	1245314533		
1,769	$66,855	261175213	TORRANCE	JAMES	2430 20TH ST SW		JAMESTOWN	ND	58401	1316986649	8	Family Practice	6885018	INNOVIS HEALTH, LLC DBA	1073793725		
1,452	$66,829	450311334	EBERTZ	J MARK	2700 STATE ST		BISMARCK	ND	58503	1649224809	7	Dermatology	236009	MID DAKOTA CLINIC-GATEWA	1275587826		
745	$66,416	450226700	THORSON	THOMAS	102 MANDAN AVE		MANDAN	ND	58554	1942308614	8	Family Practice	4057	SANFORD EAST MANDAN CLIN	1811941172		
600	$66,126	450226700	KOSIAK	DONALD	801 21ST AVE SE		MINOT	ND	58701	1629162706	8	Family Practice	4065	SANFORD HEALTH WALK-IN C	1811941172		
628	$65,466	450226700	SERABE	BARUTI	222 N 7TH ST		BISMARCK	ND	58501	1093813743	37	Pediatrics	4001	SANFORD CLINIC	1811941172		
304	$65,465	450311334	ALTRINGER	WILLIAM	401 N 9TH ST		BISMARCK	ND	58501	1114970266	2	General Surgery	236001	MID DAKOTA CLINIC	1275587826		
377	$65,414	450226700	VINEY	JEANETTE	222 N 7TH ST		BISMARCK	ND	58501	1578662482	2	General Surgery	4001	SANFORD CLINIC	1811941172		
1,865	$64,757	450311334	SCHERR	STEVEN	401 N 9TH ST		BISMARCK	ND	58501	1083654792	8	Family Practice	236001	MID DAKOTA CLINIC	1275587826		
4,325	$64,597	450226711	PETERSON	DOUGLAS	900 E BROADWAY AVE		BISMARCK	ND	58501	1720015597	30	Radiology	501001	ST ALEXIUS MEDICAL CENTE	1205868429		
542	$64,490	450226700	BLANCHARD	JOEL	3318 N 14TH STREET		BISMARCK	ND	58503	1356368021	8	Family Practice	4064	SANFORD NORTH WALK-IN CL	1811941172		
790	$64,420	205396241	MASA	CEDRIC	2650 32ND AVE S	STE D	GRAND FORKS	ND	58201	1558386466	8	Family Practice	6860001	AURORA URGENT CARE	1942318308		
295	$64,345	450226909	DANGERFIELD	JON	1220 SHEYENNE ST		WEST FARGO	ND	58078	1245258896	16	Obstet/Gynecology	7742013	SANFORD WEST FARGO CLINI	1184917924		
340	$64,204	450226909	ASKEW	R MARK	2301 S 25TH ST STE A		FARGO	ND	58103	1114979655	20	Orthopedic Surgery	7742011	SANFORD ORTHOPEDICS SPOR	1184917924		
1,685	$64,158	450310462	GERHARDT	ANNIE	1001 7TH ST		DEVILS LAKE	ND	58301	1811932387	50	Nurse Practitioner	9027	ALTRU CLINIC LAKE REGION	1861581373		

989	$63,882	450310462	ROXAS	RODRIGO	1380 S COLUMBIA RD		GRAND FORKS	ND	58201	1023204641	8	Family Practice	9021	ALTRU FAMILY MEDICINE CE	1043309552		
606	$63,751	203005235	TROTTIER	RORY	2810 17TH AVE S		GRAND FORKS	ND	58201	1427002930	16	Obstet/Gynecology	6749001	NORTHERN VALLEY OBSTETRI	1194778035		
1,505	$63,622	311824372	HOLTE	LAURIE	3035 DEMERS AVE		GRAND FORKS	ND	58201	1306903729	65	Physical Therapy	6037001	ACHIEVE THERAPY, LLC	1346370640		
1,009	$63,282	450339815	LARSEN	RAYMOND	916 5TH AVE NE		JAMESTOWN	ND	58401	1932193737	18	Opthalmology	1578001	LARSEN, RAYMOND, MD	1932193737		
582	$63,074	450310462	ROLLER	MATTHEW	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1033283379	13	Neurology	9001	ALTRU HEALTH SYSTEM	1043309552		
1,182	$62,917	911770748	SCHATZ	SARAH	904 5TH AVE NE		JAMESTOWN	ND	58401	1144317744	8	Family Practice	3005	SANFORD HEALTH JAMESTOWN	1942241351		
1,224	$62,406	450311334	VANDER LINDEN	JACLYN	401 N 9TH ST		BISMARCK	ND	58501	1740586841	97	Physician Assistant	236001	MID DAKOTA CLINIC	1275587826		
1,257	$62,387	911770748	HALVORSON	JAMES	332 2ND AVE N		WAHPETON	ND	58075	1972521524	8	Family Practice	3016	SANFORD HEALTH WAHPETON	1942241351		
1,170	$61,883	450417100	CORNATZER	WILLIAM JR	225 N 7TH ST STE B		BISMARCK	ND	58501	1952360711	7	Dermatology	1576001	CORNATZER JR, WILLIAM, M	1386970671		
354	$61,776	450226909	BERGLUND	HOWARD	2301 S 25TH ST STE A		FARGO	ND	58103	1831141175	20	Orthopedic Surgery	7742011	SANFORD ORTHOPEDICS SPOR	1184917924		
746	$61,550	450311818	LASZEWSKI	MICHAEL	3502 FRANKLIN AVE		BISMARCK	ND	58503	1801907118	22	Pathology, Anatomy, Clinical Pathology	55001	PATHOLOGY CONSULTANTS, P	1497736151		
753	$61,449	450311818	ELLISON	WESLEY	3502 FRANKLIN AVE		BISMARCK	ND	58503	1740391044	22	Pathology, Anatomy, Clinical Pathology	55001	PATHOLOGY CONSULTANTS, P	1497736151		
1,278	$61,198	450310462	CHAN	PAUL	1380 S COLUMBIA RD		GRAND FORKS	ND	58201	1821183179	8	Family Practice	9021	ALTRU FAMILY MEDICINE CE	1043309552		
988	$61,023	450226711	RAINWATER	LESLIE	900 E BROADWAY AVE		BISMARCK	ND	58501	1427160860	34	Urology	501001	ST ALEXIUS MEDICAL CENTE	1205868429		
1,649	$60,978	450311334	BOTSFORD	JOHN	401 N 9TH ST		BISMARCK	ND	58501	1639125321	8	Family Practice	236001	MID DAKOTA CLINIC	1275587826		
580	$60,689	450310462	YOSHIDA	GLEN	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1710073077	4	Otology, Laryngology, Rhinology	9001	ALTRU HEALTH SYSTEM	1043309552		
500	$60,393	450226700	WINK	SUE	715 E BROADWAY AVE		BISMARCK	ND	58501	1992803662	4	Otology, Laryngology, Rhinology	4050	SANFORD SEVENTH AND BROA	1811941172		
1,210	$60,371	450311334	ORCHARD	JEFFREY	2700 STATE ST		BISMARCK	ND	58503	1710931977	8	Family Practice	236006	MID DAKOTA CLINIC - GATE	1275587826		
736	$59,749	450226700	JOHNSON	ANTHONY	102 MANDAN AVE		MANDAN	ND	58554	1912918772	8	Family Practice	4057	SANFORD EAST MANDAN CLIN	1811941172		
1,708	$59,581	431995854	NELSON	WILLIAM	1051 E INTERSTATE AVE		BISMARCK	ND	58503	1174597272	35	Chiropractor	5842001	NELSON, WILLIAM, DC, PC	1134378946		
826	$59,436	450309162	SCZEPANSKI	MARK	3035 DEMERS AVE		GRAND FORKS	ND	58201	1295731040	18	Opthalmology	222001	NORTH DAKOTA EYE CLINIC	1972563815		
886	$59,403	450226700	FIELD	DAVID	209 7 ST N		BISMARCK	ND	58501	1598788390	8	Family Practice	4048	SANFORD SEVENTH AND THAY	1811941172		
1,238	$59,046	450310462	KONZAK-JONES	M. KIM	725 HAMLINE ST		GRAND FORKS	ND	58203	1386735181	8	Family Practice	9009	ALTRU FAMILY MEDICINE RE	1043309552		
1,243	$58,903	260226034	SMITH	JEFFREY	1033 BASIN AVE		BISMARCK	ND	58504	1629017785	8	Family Practice	6975001	SMITH, JEFF, MD PC	1275732638		
598	$58,781	450310462	WAYMAN	DEREK	1001 7TH ST		DEVILS LAKE	ND	58301	1841390762	8	Family Practice	9027	ALTRU CLINIC LAKE REGION	1861581373		
1,566	$58,654	911770748	BEACH	SUEELLEN	904 5TH AVE NE		JAMESTOWN	ND	58401	1528080199	50	Nurse Practitioner	3005	SANFORD HEALTH JAMESTOWN	1942241351		
492	$58,506	450310462	LAPP	GREGORY	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1730270539	4	Otology, Laryngology, Rhinology	9001	ALTRU HEALTH SYSTEM	1043309552		
756	$58,501	450311334	STEINLE	JILL	401 N 9TH ST		BISMARCK	ND	58501	1437314473	16	Obstet/Gynecology	236001	MID DAKOTA CLINIC	1275587826		
90	$58,416	133683081	BETTER LIVING NOW		185 OSER AVE		HAUPPAUGE	NY	11788	1093711996	54	Home Medical Equipment	7898001	BETTER LIVING NOW INC	1093711996		
1,389	$58,412	261175213	DIEGEL	TANYA	132 4TH AVE NE		VALLEY CITY	ND	58072	1780629311	8	Family Practice	6885024	INNOVIS HEALTH, LLC DBA	1962682617		
521	$58,393	450226909	LI	HUNG-KEI	801 BROADWAY NORTH		FARGO	ND	58102	1992906689	11	Internal Medicine	7742001	SANFORD BROADWAY CLINIC	1184917924		
535	$58,120	450226909	BIER	DENNIS	820 4TH ST N		FARGO	ND	58102	1114945847	32	Radiation Therapy	7742002	SANFORD ROGER MARIS CANC	1184917924		
752	$57,873	450226909	KVISTAD	BONNIE	2701 13TH AVE S		FARGO	ND	58103	1659491090	37	Pediatrics	7742009	SANFORD CHILDRENS SOUTHW	1184917924		
320	$57,645	450226700	KLEMIN	PETER	414 N 7TH ST		BISMARCK	ND	58501	1124228630	16	Obstet/Gynecology	4046	SANFORD SEVENTH AND ROSS	1811941172		
102	$57,475	450226909	GARCIA	LUIS	801 BROADWAY NORTH		FARGO	ND	58102	1104844752	2	General Surgery	7742001	SANFORD BROADWAY CLINIC	1184917924		
884	$57,449	450432961	GALE	BRIAN	1733 E CAPITAL AVE		BISMARCK	ND	58501	1902873458	48	Podiatry, Surgical chiropody	671001	DAKOTA FOOT & ANKLE CLIN	1427190206		
2,876	$57,244	432012890	KIEFAT	DANIEL	2525 DEMERS AVE SUITE B		GRAND FORKS	ND	58201	1629157458	35	Chiropractor	5911001	HEARTLAND CLINIC OF CHIR	1477739795		
523	$57,126	911770748	MARSH	JULIE	801 BROADWAY NORTH		FARGO	ND	58102	1164440731	22	Pathology, Anatomy, Clinical Pathology	3001	SANFORD BROADWAY CLINIC	1942241351		
2,089	$56,962	450311334	SCHWARTZ	JULIE	401 N 9TH ST		BISMARCK	ND	58501	1134168685	11	Internal Medicine	236001	MID DAKOTA CLINIC	1275587826		
1,212	$56,930	450310462	TINKLER	JENNIFER	3165 DEMERS AVE		GRAND FORKS	ND	58201	1982790242	50	Nurse Practitioner	9016	TRUYU AESTHETIC CENTER	1043309552		
502	$56,789	204854786	SOLBERG	SARA	1700 11TH ST W		WILLISTON	ND	58801	1487692182	16	Obstet/Gynecology	6825001	GREAT PLAINS WOMENS HEAL	1144277484		
1,079	$56,426	911770748	BRADBURY	JON	929 CENTRAL AVE NW		E GRAND FORKS	MN	56721	1679514285	8	Family Practice	3055	SANFORD HEALTH 929 CENTR	1942241351		
669	$56,292	450226909	KHAN	YULIA	4656 40TH AVE S		FARGO	ND	58104	1386808368	7	Dermatology	7742010	SANFORD DERMATOLOGY & LA	1184917924		
1,006	$56,199	450310462	LIM	ELSON	1001 7TH ST		DEVILS LAKE	ND	58301	1144510389	8	Family Practice	9027	ALTRU CLINIC LAKE REGION	1861581373		
1,262	$55,703	450311334	OLSON	AARON	525 N 9 ST		BISMARCK	ND	58501	1033129002	48	Podiatry, Surgical chiropody	236010	MID DAKOTA CLINIC	1275587826		
548	$55,690	450226909	NASEER	OSAMA	1720 UNIVERSITY DR S		FARGO	ND	58103	1346267887	8	Family Practice	7742004	SANFORD SOUTH UNIVERSITY	1184917924		
144	$55,111	450226909	GABA	ANU	820 4TH ST N		FARGO	ND	58102	1922025907	75	Oncology	7742002	SANFORD ROGER MARIS CANC	1184917924		
436	$54,950	911770748	LAPPINGA	PAUL	801 BROADWAY NORTH		FARGO	ND	58102	1508870544	21	Pathology, Anatomy, Clinical Pathology	3001	SANFORD BROADWAY CLINIC	1942241351		
684	$54,945	450226558	WOLSKY	CHAD	2815 16TH ST SW STE 102		MINOT	ND	58701	1508931676	18	Opthalmology	731001	TRINITY REGIONAL EYECARE	1083653752		
1,320	$54,855	450311334	LONGIE	KELLY	828 KIRKWOOD MALL		BISMARCK	ND	58504	1427182823	8	Family Practice	236002	MID DAKOTA CLINIC-KIRKWO	1275587826		
2,022	$54,674	450310462	STEVENS	KERRY	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1891934311	30	Radiology	9001	ALTRU HEALTH SYSTEM	1043309552		
745	$54,587	911770748	LUITHLE	TIMOTHY	315 E CALEDONIA AVE		HILLSBORO	ND	58045	1578581146	8	Family Practice	3010	SANFORD HEALTH HILLSBORO	1942241351		
894	$54,510	450228899	MEHUS	JAMES	600 1ST STREET SE		MAYVILLE	ND	58257	1497772032	11	Internal Medicine	3076	SANFORD MAYVILLE	1366478760		
1,373	$54,417	450311334	LONGIE	KEVIN	401 N 9TH ST		BISMARCK	ND	58501	1326176223	8	Family Practice	236001	MID DAKOTA CLINIC	1275587826		
647	$54,329	450310462	MEES	SARA	1200 S COLUMBIA RD		GRAND FORKS	ND	58201	1417182163	8	Family Practice	62001	ALTRU HOSPITAL	1154346161		
718	$54,269	450226909	THURLOW	BRENDA	801 BROADWAY NORTH		FARGO	ND	58102	1033130372	37	Pediatrics	7742001	SANFORD BROADWAY CLINIC	1184917924		
964	$54,255	450310462	SVEDJAN-WALZ	HAYLEY	4440 S WASHINGTON ST		GRAND FORKS	ND	58201	1306932660	8	Family Practice	9033	ALTRU PROFESSIONAL CENTE	1043309552		
1,341	$53,871	450311334	STARR	DANIEL	401 N 9TH ST		BISMARCK	ND	58501	1669624912	11	Internal Medicine	236001	MID DAKOTA CLINIC	1275587826		
326	$53,857	341650951	EDGEPARK MEDICAL S	IES	1810 SUMMIT COMMERCE	PARK	TWINSBURG	OH	44087	1609858729	54	Home Medical Equipment	6829001	RGH ENTERPRISES, INC DBA	1609858729		
756	$53,702	450310462	SWANK	COLLEEN	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1891881157	37	Pediatrics	9001	ALTRU HEALTH SYSTEM	1043309552		
1,509	$53,671	432003025	SLEEPEASY THERAPEU	, INC	3003 32ND AVE S STE 7C		FARGO	ND	58103	1093782633	54	Home Medical Equipment	6033001	SLEEP EASY THERAPEUTICS,	1093782633		
711	$53,628	450226700	BELZER-CURL	GRETCHEN	222 N 7TH ST		BISMARCK	ND	58501	1699878405	26	Psychiatry (MD)	4001	SANFORD CLINIC	1811941172		
865	$53,623	911770748	LOKENSGARD PIERCE	KARIN	929 CENTRAL AVE NW		E GRAND FORKS	MN	56721	1942425384	8	Family Practice	3055	SANFORD HEALTH 929 CENTR	1942241351		
383	$53,500	450310462	CHU	ANTHONY	4440 S WASHINGTON ST		GRAND FORKS	ND	58201	1649365990	10	Gastronenterology	9033	ALTRU PROFESSIONAL CENTE	1043309552		
520	$53,499	450226909	ENG	WOEI YEANG	2400 32ND AVE S		FARGO	ND	58103	1154513018	3	Allergy	7742008	SANFORD SOUTHPOINTE CLIN	1184917924		
400	$53,079	450226558	REDER	MICHAEL	400 BURDICK EXPY E		MINOT	ND	58701	1700837259	3	Allergy	635006	TRINITY MEDICAL GROUP	1083653752		

949	$53,060	450226429	MEDQUEST/ST JOSEPH	SP	584 12TH ST W		DICKINSON	ND	58601	1124051230	54	Home Medical Equipment	2928001	MEDQUEST/ST JOSEPHS HOSP	1124051230		
1,153	$52,932	450310462	GASPARINI	ANDREW	725 HAMLINE ST		GRAND FORKS	ND	58203	1700011459	8	Family Practice	9009	ALTRU FAMILY MEDICINE RE	1043309552		
564	$52,924	911770748	TEIGEN	COREY	801 BROADWAY NORTH		FARGO	ND	58102	1043232614	30	Radiology	3001	SANFORD BROADWAY CLINIC	1942241351		
629	$52,920	450226909	HUTCHISON	WILLIAM	2701 13TH AVE S		FARGO	ND	58103	1427092238	37	Pediatrics	7742009	SANFORD CHILDRENS SOUTHW	1184917924		
587	$52,747	450226700	KLOP	KRISSONDRA	1040 TOCOMA AVE		BISMARCK	ND	58504	1205088515	8	Family Practice	4059	SANFORD SOUTH CLINIC	1811941172		
628	$52,677	450226909	GUNDERSON	AARON	2701 13TH AVE S		FARGO	ND	58103	1922026574	37	Pediatrics	7742009	SANFORD CHILDRENS SOUTHW	1184917924		
152	$52,593	450226700	DEWING	BREE	222 N 7TH ST		BISMARCK	ND	58501	1801058383	2	General Surgery	4001	SANFORD CLINIC	1811941172		
161	$52,514	450310462	DEBELTZ	DONALD	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1750472866	2	General Surgery	9001	ALTRU HEALTH SYSTEM	1043309552		
471	$52,436	900763539	SOINE	LESLEY	2700 12TH AVE S		FARGO	ND	58103	1700944915	4	Otology, Laryngology, Rhinology	7778001	PLAINS EAR NOSE THROAT &	1003199829		
1,119	$52,292	911770748	STAYMAN	MATHEW	929 CENTRAL AVE NW		E GRAND FORKS	MN	56721	1548217268	8	Family Practice	3055	SANFORD HEALTH 929 CENTR	1942241351		
1,320	$52,287	450310462	NAUSHEEN	SARA	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1821261256	11	Internal Medicine	9001	ALTRU HEALTH SYSTEM	1043309552		
687	$52,260	450226909	CARD	CHARLENE	2601 BROADWAY N		FARGO	ND	58102	1487671483	8	Family Practice	7742003	SANFORD NORTH FARGO CLIN	1184917924		
716	$52,245	450226711	MARKEWICH	STEPHEN	900 E BROADWAY AVE		BISMARCK	ND	58501	1295959823	5	Anesthesiology (MD)	501001	ST ALEXIUS MEDICAL CENTE	1205868429		
493	$52,186	450226700	ASHLEY	LYNN	222 N 7TH ST		BISMARCK	ND	58501	1558317388	8	Family Practice	4001	SANFORD CLINIC	1811941172		
534	$52,081	204854786	TONG	BEVERLY	1700 11TH ST W		WILLISTON	ND	58801	1326087404	16	Obstet/Gynecology	6825001	GREAT PLAINS WOMENS HEAL	1144277484		
821	$52,025	450450745	KRUGER	MICHAEL	3035 DEMERS AVE		GRAND FORKS	ND	58201	1801811971	8	Family Practice	112001	VALLEY BONE AND JOINT CL	1033180153		
2,337	$52,020	450310462	BHARATH	SOMASUNDAR	1001 7TH ST		DEVILS LAKE	ND	58301	1093714800	11	Internal Medicine	9027	ALTRU CLINIC LAKE REGION	1861581373		
884	$51,757	450226700	EMERY	RUSSELL	222 N 7TH ST		BISMARCK	ND	58501	1801994538	8	Family Practice	4001	SANFORD CLINIC	1811941172		
119	$51,645	411818809	DANDO	CARL	4133 30TH AVE S STE 101		FARGO	ND	58104	1184666323	11	Internal Medicine	6443001	ROGER S HOGUE MD PA DBA	1760429237		
501	$51,312	450226700	SHERMAN	KAMILLE	2615 FAIRWAY ST		DICKINSON	ND	58601	1770682726	8	Family Practice	4008	SANFORD HEALTH DICKINSON	1811941172		
393	$51,166	450310462	LAYS	ANDREA	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1043479660	16	Obstet/Gynecology	9001	ALTRU HEALTH SYSTEM	1043309552		
852	$51,042	274936426	BAKER	BIRON	300 WEST CENTURY AVE		BISMARCK	ND	58503	1124081658	8	Family Practice	7725001	BAKER FAMILY MEDICINE PC	1326330887		
302	$50,973	450226558	STANGA	SEAN	400 BURDICK EXPY E		MINOT	ND	58701	1306040134	37	Pediatrics	635006	TRINITY MEDICAL GROUP	1083653752		
223	$50,826	450226909	WELLE	ERIN	820 4TH ST N		FARGO	ND	58102	1942503172	97	Physician Assistant	7742002	SANFORD ROGER MARIS CANC	1184917924		
1,060	$50,754	261175213	JAMSA TOLLEFSON	LISA	275 11TH ST S		WAHPETON	ND	58075	1962627398	8	Family Practice	6885019	INNOVIS HEALTH, LLC DBA	1790965440		
450	$50,731	911770748	LESSARD	JULIE	801 BROADWAY NORTH		FARGO	ND	58102	1801814470	22	Pathology, Anatomy, Clinical Pathology	3001	SANFORD BROADWAY CLINIC	1942241351		
706	$50,690	450226909	KUNKEL	MELISSA	2701 13TH AVE S		FARGO	ND	58103	1336334606	37	Pediatrics	7742009	SANFORD CHILDRENS SOUTHW	1184917924		
738	$50,412	450226909	PETERSON	TERRY	2601 BROADWAY N		FARGO	ND	58102	1093733693	97	Physician Assistant	7742003	SANFORD NORTH FARGO CLIN	1184917924		
633	$50,369	450447872	INSTITUTE OF DIAGN	C IMAGING	2829 S UNIV DR S	SUITE 102	FARGO	ND	58103	1578674586	30	Radiology	6621001	INSTITUTE OF DIAGNOSTIC	1578674586		
901	$50,286	450310462	LUNN	ERIC	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1558452359	37	Pediatrics	9001	ALTRU HEALTH SYSTEM	1043309552		
317	$50,138	450226909	KANTAK	ANAND	2400 32ND AVE S		FARGO	ND	58103	1669499331	3	Allergy	7742008	SANFORD SOUTHPOINTE CLIN	1184917924		
518	$50,053	450226909	JESSEN	JAMEY	1720 UNIVERSITY DR S		FARGO	ND	58103	1982643219	8	Family Practice	7742004	SANFORD SOUTH UNIVERSITY	1184917924		
924	$49,995	450226700	LARSON	JAMES	715 E BROADWAY AVE		BISMARCK	ND	58501	1134231749	3	Allergy	4050	SANFORD SEVENTH AND BROA	1811941172		
207	$49,990	450226711	SONGSIRIDEJ	NOWARAT	900 E BROADWAY AVE		BISMARCK	ND	58501	1346321429	76	Heumatology	501001	ST ALEXIUS MEDICAL CENTE	1205868429		
1,352	$49,988	450311334	MURPHY	LOUISE	2700 STATE ST		BISMARCK	ND	58503	1609820869	8	Family Practice	236006	MID DAKOTA CLINIC - GATE	1275587826		
677	$49,933	450311818	LINZ	LAURIE	3502 FRANKLIN AVE		BISMARCK	ND	58503	1184735474	22	Pathology, Anatomy, Clinical Pathology	55001	PATHOLOGY CONSULTANTS, P	1497736151		
1,278	$49,822	450422119	ROBINSON SAMPLES	AMY	33 9TH ST W		DICKINSON	ND	58601	1376816587	97	Physician Assistant	231001	GREAT PLAINS CLINIC, PC	1720075377		
598	$49,727	450226909	KRASNIEWSKA	LIDIA	2701 13TH AVE S		FARGO	ND	58103	1003833773	37	Pediatrics	7742009	SANFORD CHILDRENS SOUTHW	1184917924		
655	$49,467	911770748	NYARANDI	TIMOTHY	332 2ND AVE N		WAHPETON	ND	58075	1124222351	8	Family Practice	3016	SANFORD HEALTH WAHPETON	1942241351		
643	$49,375	450226909	KENNINGER	RANDALL	2400 32ND AVE S		FARGO	ND	58103	1013934785	8	Family Practice	7742008	SANFORD SOUTHPOINTE CLIN	1184917924		
855	$49,173	911770748	PEARSON	ERIC	929 CENTRAL AVE NW		E GRAND FORKS	MN	56721	1003835984	8	Family Practice	3055	SANFORD HEALTH 929 CENTR	1942241351		
369	$49,035	450226558	COLLINS	KEVIN	831 S BROADWAY		MINOT	ND	58701	1174611511	32	Radiation Therapy	635001	TRINITY MEDICAL GROUP	1083653752		
514	$49,005	450226700	ZIMMERMAN	RYAN	2615 FAIRWAY ST		DICKINSON	ND	58601	1447456686	8	Family Practice	4008	SANFORD HEALTH DICKINSON	1811941172		
1,007	$48,996	450311334	FUERSTENBERG	LAURA	2700 STATE ST		BISMARCK	ND	58503	1619912326	50	Nurse Practitioner	236006	MID DAKOTA CLINIC - GATE	1275587826		
443	$48,958	450321538	DAHL	CHARLES	310 N 9TH ST		BISMARCK	ND	58501	1750304556	20	Orthopedic Surgery	188001	THE BONE & JOINT CENTER,	1750307872		
270	$48,762	450310462	HAPE	ROBIN	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1639371818	2	General Surgery	9001	ALTRU HEALTH SYSTEM	1043309552		
118	$48,378	450226909	MOHAMED	MOHAMED	801 BROADWAY NORTH		FARGO	ND	58102	1568612968	37	Pediatrics	7742001	SANFORD BROADWAY CLINIC	1184917924		
443	$48,092	450226700	KOSIAK	DONALD	3318 N 14TH STREET		BISMARCK	ND	58503	1629162706	8	Family Practice	4064	SANFORD NORTH WALK-IN CL	1811941172		
201	$48,053	450448737	COMMUNITY MRI SERV	, LLC	300 2ND AVE NE		JAMESTOWN	ND	58401	1083635247	30	Radiology	1811001	COMMUNITY MRI SERVICES L	1083635247		
1,962	$48,014	450422119	RATHGEBER	CORY	33 9TH ST W		DICKINSON	ND	58601	1649367343	8	Family Practice	231001	GREAT PLAINS CLINIC, PC	1720075377		
1,042	$47,704	911770748	BERNTSON	MARK	929 CENTRAL AVE NW		E GRAND FORKS	MN	56721	1508807116	8	Family Practice	3055	SANFORD HEALTH 929 CENTR	1942241351		
134	$47,428	450226909	KOZOJED	MIA	820 4TH ST N		FARGO	ND	58102	1124281043	50	Nurse Practitioner	7742002	SANFORD ROGER MARIS CANC	1184917924		
187	$47,139	450231181	DEAN	MICHAEL	2422 20TH ST SW		JAMESTOWN	ND	58401	1427058676	20	Orthopedic Surgery	532001	JAMESTOWN REGIONAL MEDIC	1073569794		
1,868	$47,081	911770748	GOLDENBERG	JACOB	801 BROADWAY NORTH		FARGO	ND	58102	1215954177	30	Radiology	3001	SANFORD BROADWAY CLINIC	1942241351		
678	$47,008	450228899	OSTLIE	JANE	600 1ST STREET SE		MAYVILLE	ND	58257	1063672749	8	Family Practice	3076	SANFORD MAYVILLE	1366478760		
214	$46,928	450226909	RONDEAU	DENISE	2400 32ND AVE S		FARGO	ND	58103	1124049341	16	Obstet/Gynecology	7742008	SANFORD SOUTHPOINTE CLIN	1184917924		
475	$46,734	204129496	KIEFFER	NICOLE	2951 34TH ST S		GRAND FORKS	ND	58201	1164659199	67	Occupational Therapy	6775001	LITTLE MIRACLES, INC	1821110982		
1,703	$46,641	450422741	MARTIN	SHIH RU	225 N 7TH ST SUITE B		BISMARCK	ND	58501	1629256318	50	Nurse Practitioner	1647001	FORTE PATHROFF, DENISE,	1306046545		
305	$46,485	450226909	NOAH	THOMAS	801 BROADWAY NORTH		FARGO	ND	58102	1720005275	34	Urology	7742001	SANFORD BROADWAY CLINIC	1184917924		
480	$46,415	450226700	CARLSON	JESSICA	2830 N WASHINGTON ST		BISMARCK	ND	58503	1265685432	8	Family Practice	4062	SANFORD NORTH CLINIC	1811941172		
586	$46,383	204854786	LOO	LI ER	1700 11TH ST W		WILLISTON	ND	58801	1164716692	16	Obstet/Gynecology	6825001	GREAT PLAINS WOMENS HEAL	1144277484		
1,528	$46,306	450311334	HETLAND	BRUCE	401 N 9TH ST		BISMARCK	ND	58501	1346294592	11	Internal Medicine	236001	MID DAKOTA CLINIC	1275587826		
236	$46,284	261175213	LI	ANSON	2430 20TH ST SW		JAMESTOWN	ND	58401	1326064015	2	General Surgery	6885018	INNOVIS HEALTH, LLC DBA	1073793725		
213	$46,210	450226700	NELSON	BROOK	2615 FAIRWAY ST		DICKINSON	ND	58601	1215156476	2	General Surgery	4008	SANFORD HEALTH DICKINSON	1811941172		
461	$46,200	450226700	FYFE	ALISTAIR	715 E BROADWAY AVE		BISMARCK	ND	58501	1245253954	1	General Practice	4050	SANFORD SEVENTH AND BROA	1811941172		
404	$46,173	450310462	BROCKMAN	RONALD	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1851498638	18	Opthalmology	9001	ALTRU HEALTH SYSTEM	1043309552		

800	$46,172	450310462	ROED	JAMES	725 HAMLINE ST		GRAND FORKS	ND	58203	1235221664	8	Family Practice	9009	ALTRU FAMILY MEDICINE RE	1043309552		
944	$46,171	450310462	ZAKS	WILLIAM	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1437249307	73	Endocrinology	9001	ALTRU HEALTH SYSTEM	1043309552		
454	$46,164	450310462	BANSAL	ASHOK	860 S COLUMBIA RD		GRAND FORKS	ND	58201	1861599649	26	Psychiatry (MD)	9024	ALTRU PSYCHIATRIC CENTER	1043309552		
109	$46,114	450226909	FABIAN	MATTHEW	801 BROADWAY NORTH		FARGO	ND	58102	1497928972	2	General Surgery	7742001	SANFORD BROADWAY CLINIC	1184917924		
2,008	$46,111	450433903	GRUHOT	KEVIN	2840 19TH AVE S		GRAND FORKS	ND	58201	1679570758	35	Chiropractor	675001	ADVANCE CHIROPRACTIC CLI	1003950023		
1,406	$46,021	450231183	KEMP	ROBERT	1213 15TH AVE W		WILLISTON	ND	58801	1114951431	8	Family Practice	711001	CRAVEN-HAGAN/MERCY MEDIC	1760549000		
855	$45,666	911770748	MARSDEN	RICHARD	904 5TH AVE NE		JAMESTOWN	ND	58401	1801814413	30	Radiology	3005	SANFORD HEALTH JAMESTOWN	1942241351		
437	$45,504	450311334	HAMAR	STEVEN	401 N 9TH ST		BISMARCK	ND	58501	1063469336	2	General Surgery	236001	MID DAKOTA CLINIC	1275587826		
1,910	$45,450	270381826	BERG	PHILLIP	2625 24 AVE S STE B		GRAND FORKS	ND	58201	1831374446	35	Chiropractor	7389001	CHIRO RX LTD	1245468891		
863	$45,394	911770748	GRIMM	TERRENCE	801 BROADWAY NORTH		FARGO	ND	58102	1194752618	22	Pathology, Anatomy, Clinical Pathology	3001	SANFORD BROADWAY CLINIC	1942241351		
2,020	$45,392	274812526	BLACKWOOD	KIRK	1925 FRONTIER DR		BISMARCK	ND	58504	1033442678	35	Chiropractor	7663001	BLACKWOOD CHIROPRACTIC H	1033442678		
589	$45,234	450311818	SCHMIDT	JARED	3502 FRANKLIN AVE		BISMARCK	ND	58503	1154475101	21	Pathology, Anatomy, Clinical Pathology	55001	PATHOLOGY CONSULTANTS, P	1497736151		
631	$45,215	450226558	JACOBS	DAVID	2815 16TH ST SW STE 102		MINOT	ND	58701	1184675100	18	Opthalmology	731001	TRINITY REGIONAL EYECARE	1083653752		
645	$45,189	450226909	BOROWICZ	RONALD	1220 SHEYENNE ST		WEST FARGO	ND	58078	1588681589	8	Family Practice	7742013	SANFORD WEST FARGO CLINI	1184917924		
544	$45,091	450311334	WILDER	ANDREW	401 N 9TH ST		BISMARCK	ND	58501	1275607509	8	Family Practice	236001	MID DAKOTA CLINIC	1275587826		
491	$44,861	450226909	NYHUS	CURTIS	1720 UNIVERSITY DR S		FARGO	ND	58103	1639197213	8	Family Practice	7742004	SANFORD SOUTH UNIVERSITY	1184917924		
582	$44,842	450226909	NEWMAN	TRACIE	2701 13TH AVE S		FARGO	ND	58103	1699967810	37	Pediatrics	7742009	SANFORD CHILDRENS SOUTHW	1184917924		
623	$44,708	450226558	HOLLAND	MICHAEL	400 BURDICK EXPY E		MINOT	ND	58701	1104913045	37	Pediatrics	635006	TRINITY MEDICAL GROUP	1083653752		
1,090	$44,622	861123162	PIYAMAHUNT	ARKAPOL	310 N 10TH ST		BISMARCK	ND	58501	1215036199	11	Internal Medicine	6459001	ST ALEXIUS HEART & LUNG	1194823021		
456	$44,575	450226909	WEBSTER	MICHAEL	1720 UNIVERSITY DR S		FARGO	ND	58103	1659393239	8	Family Practice	7742004	SANFORD SOUTH UNIVERSITY	1184917924		
1,102	$44,508	450311334	BORROWMAN	THERESA	2700 STATE ST		BISMARCK	ND	58503	1083694269	7	Dermatology	236006	MID DAKOTA CLINIC - GATE	1275587826		
994	$44,502	450310462	WALZ	JOEL	1380 S COLUMBIA RD		GRAND FORKS	ND	58201	1639265994	8	Family Practice	9021	ALTRU FAMILY MEDICINE CE	1043309552		
1,246	$44,406	911770748	GEIER	DEBRA	904 5TH AVE NE		JAMESTOWN	ND	58401	1568449114	11	Internal Medicine	3005	SANFORD HEALTH JAMESTOWN	1942241351		
631	$44,240	450226909	JOST	AARON	2701 13TH AVE S		FARGO	ND	58103	1598783151	37	Pediatrics	7742009	SANFORD CHILDRENS SOUTHW	1184917924		
1,163	$44,205	450310462	PETERSON	KIRSTEN	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1285636423	11	Internal Medicine	9001	ALTRU HEALTH SYSTEM	1043309552		
885	$44,195	450310462	MANN	WILLIAM	725 HAMLINE ST		GRAND FORKS	ND	58203	1215024310	8	Family Practice	9009	ALTRU FAMILY MEDICINE RE	1043309552		
1,335	$44,166	261175213	HOFFMAN	LEAH	2430 20TH ST SW		JAMESTOWN	ND	58401	1982965224	97	Physician Assistant	6885018	INNOVIS HEALTH, LLC DBA	1073793725		
421	$44,099	273567775	JOHNSON	PHILIP	2829 S UNIVERSITY DR	STE 202	FARGO	ND	58103	1366494809	20	Orthopedic Surgery	7598001	ORTHOPEDIC AND SPORT MED	1285943746		
871	$44,078	450310462	RIENDEAU	ANDREA	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1548423932	50	Nurse Practitioner	9001	ALTRU HEALTH SYSTEM	1043309552		
421	$44,077	204874580	SCHMUTZER	PETER	725 HAMLINE ST		GRAND FORKS	ND	58203	1477623866	62	Psychology	6806001	ASSESSMENT AND THERAPY A	1437181591		
855	$44,066	450310462	RIAZ	FREAHA	1380 S COLUMBIA RD		GRAND FORKS	ND	58201	1073743589	8	Family Practice	9021	ALTRU FAMILY MEDICINE CE	1043309552		
286	$44,007	450226558	BILLINGS	DAVID	831 S BROADWAY		MINOT	ND	58701	1588752919	16	Obstet/Gynecology	635001	TRINITY MEDICAL GROUP	1083653752		
864	$43,864	450310462	ADJEKUM	GLORIA	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1548495534	37	Pediatrics	9001	ALTRU HEALTH SYSTEM	1043309552		
169	$43,675	450226909	HOFLAND	SUSAN	820 4TH ST N		FARGO	ND	58102	1265453492	50	Nurse Practitioner	7742002	SANFORD ROGER MARIS CANC	1184917924		
144	$43,634	450226909	BOUTON	MICHAEL	801 BROADWAY NORTH		FARGO	ND	58102	1356336358	2	General Surgery	7742001	SANFORD BROADWAY CLINIC	1184917924		
516	$43,545	450450745	MILLER	JOHN	3035 DEMERS AVE		GRAND FORKS	ND	58201	1407810575	48	Podiatry, Surgical chiropody	112001	VALLEY BONE AND JOINT CL	1033180153		
569	$43,509	450311818	HIPP	JOHN	3502 FRANKLIN AVE		BISMARCK	ND	58503	1598876807	22	Pathology, Anatomy, Clinical Pathology	55001	PATHOLOGY CONSULTANTS, P	1497736151		
1,083	$43,318	450311334	CHAUSSEE	KEVIN	401 N 9TH ST		BISMARCK	ND	58501	1962424440	50	Nurse Practitioner	236001	MID DAKOTA CLINIC	1275587826		
1,316	$43,216	450226429	BAKKER	HILTON	30 7TH ST W		DICKINSON	ND	58601	1992745533	30	Radiology	95001	ST JOSEPHS HOSPITAL AND	1992947956		
663	$43,212	450310462	BITTNER	HEIDI	1001 7TH ST		DEVILS LAKE	ND	58301	1609876127	8	Family Practice	9027	ALTRU CLINIC LAKE REGION	1861581373		
326	$43,038	450310462	OJURO	PETER	4440 S WASHINGTON ST		GRAND FORKS	ND	58201	1992919559	10	Gastronenterology	9033	ALTRU PROFESSIONAL CENTE	1043309552		
686	$42,992	450310462	LYSTE	DEREK	1380 S COLUMBIA RD		GRAND FORKS	ND	58201	1174724116	8	Family Practice	9021	ALTRU FAMILY MEDICINE CE	1043309552		
209	$42,800	450461636	BAZEY	LORI	3035 DEMERS AVE		GRAND FORKS	ND	58201	1780790394	43	Certified Registered Nurse Anesthetist	5522001	GRAND FORKS ANESTHESIA S	1124135546		
497	$42,773	450226700	SEIBEL	MELISSA	222 N 7TH ST		BISMARCK	ND	58501	1477735926	37	Pediatrics	4001	SANFORD CLINIC	1811941172		
611	$42,723	450226700	DENDY	KHALIN	222 N 7TH ST		BISMARCK	ND	58501	1659500155	11	Internal Medicine	4001	SANFORD CLINIC	1811941172		
411	$42,659	450450745	ADAMS	EDWARD	3035 DEMERS AVE		GRAND FORKS	ND	58201	1346287554	20	Orthopedic Surgery	112001	VALLEY BONE AND JOINT CL	1033180153		
529	$42,639	450226700	KUMAR	PARAG	222 N 7TH ST		BISMARCK	ND	58501	1780795773	37	Pediatrics	4001	SANFORD CLINIC	1811941172		
1,412	$42,547	450457949	SHEETS-OLSON	BARBARA	10 9TH AVE E		LISBON	ND	58054	1477538775	8	Family Practice	1956001	FAMILY MEDICAL CLINIC, P	1952331159		
1,971	$42,538	456002491	BETTING	GARY	701 E ROSSER		BISMARCK	ND	58501	1003844648	8	Family Practice	102001	CENTER FOR FAMILY MEDICI	1619905528		
818	$42,420	450310462	SUDA	AMY	3165 DEMERS AVE		GRAND FORKS	ND	58201	1942465851	50	Nurse Practitioner	9016	TRUYU AESTHETIC CENTER	1043309552		
205	$42,400	450310462	BELLUK	BRADLEY	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1073512885	2	General Surgery	9001	ALTRU HEALTH SYSTEM	1043309552		
49	$42,380	450226909	NEWMAN	ROXANNE	801 BROADWAY NORTH		FARGO	ND	58102	1033146543	33	Thoracic Surgery	7742001	SANFORD BROADWAY CLINIC	1184917924		
422	$42,331	450310462	CRISWELL	SAMUEL	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1114018223	48	Podiatry, Surgical chiropody	9001	ALTRU HEALTH SYSTEM	1043309552		
755	$42,210	450309162	GAUL	GERALD	3035 DEMERS AVE		GRAND FORKS	ND	58201	1801893490	18	Opthalmology	222001	NORTH DAKOTA EYE CLINIC	1972563815		
1,158	$42,009	204710911	JOLLIFFE	RHONDA	1001 GATEWAY AVE		BISMARCK	ND	58503	1063461507	50	Nurse Practitioner	6462001	LIFEWAYS PARTNERS IN HEA	1053360594		
2,067	$41,962	450422119	OLIN	BRUCE	33 9TH ST W		DICKINSON	ND	58601	1134116775	11	Internal Medicine	231001	GREAT PLAINS CLINIC, PC	1720075377		
242	$41,939	450226558	JUSTINO	EDMUNDO	400 BURDICK EXPY E		MINOT	ND	58701	1720156136	11	Internal Medicine	635006	TRINITY MEDICAL GROUP	1083653752		
182	$41,799	237272195	PATH		1112 NODAK DRIVE #200		FARGO	ND	58103	1245258953	49	Miscellaneous	5523001	PATH	1245258953		
461	$41,679	450310462	ONYEKA	IKECHUKWU	1200 S COLUMBIA RD		GRAND FORKS	ND	58201	1659435204	11	Internal Medicine	62001	ALTRU HOSPITAL	1154346161		
148	$41,370	450310462	MUIDERMAN	ANTHONY	3165 DEMERS AVE		GRAND FORKS	ND	58201	1003802430	24	Plastic Surgery	9016	TRUYU AESTHETIC CENTER	1043309552		
54	$41,321	450226909	FRIEDERICHS	MATTHEW	1720 UNIVERSITY DR S		FARGO	ND	58103	1790703338	20	Orthopedic Surgery	7742004	SANFORD SOUTH UNIVERSITY	1184917924		
1,075	$41,137	450311334	RAUTA	RADU	401 N 9TH ST		BISMARCK	ND	58501	1134213671	11	Internal Medicine	236001	MID DAKOTA CLINIC	1275587826		
823	$40,977	861123162	MURTHY	MYLAPANAHA	310 N 10TH ST		BISMARCK	ND	58501	1124127113	6	Cardivascular Disease	6459001	ST ALEXIUS HEART & LUNG	1194823021		
95	$40,829	450283168	LAKE REGION AMBULA	SE	314 2ND AVE S		DEVILS LAKE	ND	58301	1679591929	59	Ambulance Service	1863001	LAKE REGION AMBULANCE SE	1679591929		
1,094	$40,801	450311334	BHARADWAJ	SAVITHA	401 N 9TH ST		BISMARCK	ND	58501	1760470926	11	Internal Medicine	236001	MID DAKOTA CLINIC	1275587826		
381	$40,610	450310462	BECK	GWENDOLYN	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1770597916	4	Otology, Laryngology, Rhinology	9001	ALTRU HEALTH SYSTEM	1043309552		

412	$40,516	450226700	THOMPSON	ERIC	222 N 7TH ST		BISMARCK	ND	58501	1043242290	8	Family Practice	4001	SANFORD CLINIC	1811941172		
470	$40,421	450226909	LIEN	DAVID	1720 UNIVERSITY DR S		FARGO	ND	58103	1194743765	8	Family Practice	7742004	SANFORD SOUTH UNIVERSITY	1184917924		
104	$40,229	742152396	KCI USA, INC		4209 12TH AVE NW		FARGO	ND	58102	1295722254	54	Home Medical Equipment	4350002	KCI USA, INC	1447332572		
260	$40,199	450310462	WOOD	JAMES	4440 S WASHINGTON ST		GRAND FORKS	ND	58201	1073573044	10	Gastronenterology	9033	ALTRU PROFESSIONAL CENTE	1043309552		
417	$40,189	450226700	HART	ERIC	222 N 7TH ST		BISMARCK	ND	58501	1942497243	48	Podiatry, Surgical chiropody	4001	SANFORD CLINIC	1811941172		
18	$40,166	208056374	BECKER PLASTIC SUR	CENTER	1500 INTERCHANGE AVE	STE 100	BISMARCK	ND	58501	1205082948	70	Clinic	1079002	BECKER PLASTIC SURGERY C	1205082948		
1,462	$40,094	450310462	JAMES	JOHN	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1770787830	30	Radiology	9001	ALTRU HEALTH SYSTEM	1043309552		
447	$40,068	450226558	JOSHI	RAVINDRA	101 3RD AVE SW		MINOT	ND	58701	1477551422	20	Orthopedic Surgery	635027	TRINITY MEDICAL GROUP	1083653752		
838	$40,042	450310462	GRISSOM	DOUGLAS	725 HAMLINE ST		GRAND FORKS	ND	58203	1932326493	8	Family Practice	9009	ALTRU FAMILY MEDICINE RE	1043309552		
1,767	$39,985	911770748	PROMERSBERGER	ERIC	801 BROADWAY NORTH		FARGO	ND	58102	1669490264	30	Radiology	3001	SANFORD BROADWAY CLINIC	1942241351		
382	$39,977	450226700	DIBBELL	DAVID	222 N 7TH ST		BISMARCK	ND	58501	1093738064	24	Plastic Surgery	4001	SANFORD CLINIC	1811941172		
313	$39,960	450226700	RENTON	DOUGLAS	222 N 7TH ST		BISMARCK	ND	58501	1972623577	10	Gastronenterology	4001	SANFORD CLINIC	1811941172		
223	$39,786	450226909	PERKEREWICZ	JEDIDIAH	801 BROADWAY NORTH		FARGO	ND	58102	1548469208	16	Obstet/Gynecology	7742001	SANFORD BROADWAY CLINIC	1184917924		
62	$39,714	450226700	IVERSON	CHRISTIE	222 N 7TH ST		BISMARCK	ND	58501	1346251253	16	Obstet/Gynecology	4001	SANFORD CLINIC	1811941172		
429	$39,696	911770748	WOOD	ANGELA	801 BROADWAY NORTH		FARGO	ND	58102	1235237439	21	Pathology, Anatomy, Clinical Pathology	3001	SANFORD BROADWAY CLINIC	1942241351		
2,235	$39,689	450310462	DALLUM	BERNIE	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1023109139	30	Radiology	9001	ALTRU HEALTH SYSTEM	1043309552		
1,122	$39,576	450226711	SCHIRADO	MIKE	900 E BROADWAY AVE		BISMARCK	ND	58501	1104852185	30	Radiology	501001	ST ALEXIUS MEDICAL CENTE	1205868429		
895	$39,421	911770748	PFENNIG	GREGORY	520 CHAUTAUQUA BLVD		VALLEY CITY	ND	58072	1932126414	50	Nurse Practitioner	3002	SANFORD HEALTH VALLEY CI	1942241351		
491	$39,380	450226909	FLACH	DAVID	4656 40TH AVE S		FARGO	ND	58104	1316964273	7	Dermatology	7742010	SANFORD DERMATOLOGY & LA	1184917924		
483	$39,347	450455540	HAYNIE	GARY	4642 AMBER VALLEY PKWY S		FARGO	ND	58104	1487641817	18	Opthalmology	1725001	RETINA ASSOCIATES, PC	1104045202		
282	$39,198	450311334	CHALMERS	AARON	401 N 9TH ST		BISMARCK	ND	58501	1639352719	2	General Surgery	236001	MID DAKOTA CLINIC	1275587826		
96	$39,088	450226909	ALTAF	WASEEM	801 BROADWAY NORTH		FARGO	ND	58102	1770500761	37	Pediatrics	7742001	SANFORD BROADWAY CLINIC	1184917924		
292	$39,042	521486235	HANGER PROSTHETICS	RTHOTICS	721 E ROSSER AVE		BISMARCK	ND	58501	1245304120	54	Home Medical Equipment	1767001	HANGER PROSTHETICS & ORT	1245304120		
352	$39,007	911770748	AUSMUS	GREGORY	801 BROADWAY NORTH		FARGO	ND	58102	1437202496	7	Dermatology	3001	SANFORD BROADWAY CLINIC	1942241351		
947	$38,895	450310462	GAUTHAM	SHANTA	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1851562375	11	Internal Medicine	9001	ALTRU HEALTH SYSTEM	1043309552		
264	$38,867	450226909	UGLEM	TIMOTHY	2400 32ND AVE S		FARGO	ND	58103	1396766630	48	Podiatry, Surgical chiropody	7742008	SANFORD SOUTHPOINTE CLIN	1184917924		
357	$38,782	450462585	STRINDEN	THOMAS	4344 20TH AVE S		FARGO	ND	58103	1841212404	18	Opthalmology	7176001	EYE PHYSICIANS GROUP, LL	1346405891		
462	$38,501	450226700	REINKE	SARA	222 N 7TH ST		BISMARCK	ND	58501	1871721811	37	Pediatrics	4001	SANFORD CLINIC	1811941172		
158	$38,442	450226909	LUNDEEN	MARK	2301 S 25TH ST STE A		FARGO	ND	58103	1730130493	20	Orthopedic Surgery	7742011	SANFORD ORTHOPEDICS SPOR	1184917924		
306	$38,361	204874580	YEAGER	CATHERINE	725 HAMLINE ST		GRAND FORKS	ND	58203	1770549032	62	Psychology	6806001	ASSESSMENT AND THERAPY A	1437181591		
858	$38,325	911770748	SPIEKERMEIER	MICHELE	929 CENTRAL AVE NW		E GRAND FORKS	MN	56721	1477575033	50	Nurse Practitioner	3055	SANFORD HEALTH 929 CENTR	1942241351		
328	$38,321	450226558	UTHUS	DAVID	101 3RD AVE SW		MINOT	ND	58701	1750456265	20	Orthopedic Surgery	635027	TRINITY MEDICAL GROUP	1083653752		
199	$38,261	450395652	ALTRU SPECIALTY SE	ES DBA YOR	1200 S COLUMBIA RD		GRAND FORKS	ND	58201	1497844906	79	Home Infusion	4563001	ALTRU SPECIALTY SERVICES	1497844906		
238	$38,189	450226700	O'REGAN	DAVID	225 N 7TH ST		BISMARCK	ND	58501	1609988088	20	Orthopedic Surgery	4061	SANFORD SEVENTH AND THAY	1811941172		
470	$38,135	450226909	VAN EERDEN	PETER	801 BROADWAY NORTH		FARGO	ND	58102	1851397509	16	Obstet/Gynecology	7742001	SANFORD BROADWAY CLINIC	1184917924		
821	$38,076	261175213	ANDERSON	ELISHA	819 MAIN ST		LISBON	ND	58054	1851698344	50	Nurse Practitioner	6885021	INNOVIS HEALTH, LLC DBA	1043490790		
470	$38,021	450226700	KLEMIN	JILL	2830 N WASHINGTON ST		BISMARCK	ND	58503	1740449040	8	Family Practice	4062	SANFORD NORTH CLINIC	1811941172		
213	$38,016	911810720	CHALASANI	NAGESWARAR	2301 S 25TH ST STE K		FARGO	ND	58103	1184672891	5	Anesthesiology (MD)	757001	VALLEY ANESTHESIA ASSOCI	1467513176		
364	$37,936	204874580	JACKSON	DAVID	725 HAMLINE ST		GRAND FORKS	ND	58203	1801853775	62	Psychology	6806001	ASSESSMENT AND THERAPY A	1437181591		
424	$37,917	450413089	RADUCU	ELENA	200 S 5TH ST		BISMARCK	ND	58504	1194936492	18	Opthalmology	278001	DAKOTA EYE INSTITUTE	1962449835		
1,010	$37,729	311824372	WALSH	HEATHER	408 3RD ST NW		E GRAND FORKS	MN	56721	1437158268	65	Physical Therapy	6037005	ACHIEVE THERAPY EAST GRA	1003145376		
76	$37,727	450226909	STICCA	ROBERT	801 BROADWAY NORTH		FARGO	ND	58102	1568526119	2	General Surgery	7742001	SANFORD BROADWAY CLINIC	1184917924		
740	$37,538	300539607	MIDGARDEN	KRISTI	503 PARK ST W SUITE B		PARK RIVER	ND	58270	1841374030	8	Family Practice	7348001	MIDGARDEN FAMILY CLINIC,	1619119591		
354	$37,512	450226700	ASHLEY	LYNN	3318 N 14TH STREET		BISMARCK	ND	58503	1558317388	8	Family Practice	4064	SANFORD NORTH WALK-IN CL	1811941172		
433	$37,445	450226700	PERKEREWICZ	KATHLEEN	414 N 7TH ST		BISMARCK	ND	58501	1306958715	16	Obstet/Gynecology	4046	SANFORD SEVENTH AND ROSS	1811941172		
1,612	$37,420	450433903	FULP	JOHN	2840 19TH AVE S		GRAND FORKS	ND	58201	1003814484	35	Chiropractor	675001	ADVANCE CHIROPRACTIC CLI	1003950023		
170	$37,387	450310462	SEVERUD	ROBIN	1200 S COLUMBIA RD		GRAND FORKS	ND	58201	1245326503	5	Anesthesiology (MD)	62001	ALTRU HOSPITAL	1154346161		
2,167	$37,316	261337706	NESS	DOUGLAS	535 S 7TH ST		BISMARCK	ND	58504	1205012994	35	Chiropractor	7063001	ACTIVE LIFE CHIROPRACTIC	1609059377		
250	$37,245	450226909	COAUETTE	JORDAN	2400 32ND AVE S		FARGO	ND	58103	1457471880	16	Obstet/Gynecology	7742008	SANFORD SOUTHPOINTE CLIN	1184917924		
1,975	$37,226	450412672	CHUPPE	STEVEN	1936 N 11TH ST		BISMARCK	ND	58501	1770506685	35	Chiropractor	275001	CHUPPE CHIROPRACTIC CLIN	1649285396		
377	$37,166	204874580	WELKE	CHARLES	725 HAMLINE ST		GRAND FORKS	ND	58203	1790741999	62	Psychology	6806001	ASSESSMENT AND THERAPY A	1437181591		
237	$37,163	450226909	MICKELSON	MARGARET	801 BROADWAY NORTH		FARGO	ND	58102	1124045760	16	Obstet/Gynecology	7742001	SANFORD BROADWAY CLINIC	1184917924		
750	$37,042	450310462	STEVENS	KIRK	1380 S COLUMBIA RD		GRAND FORKS	ND	58201	1811164205	8	Family Practice	9021	ALTRU FAMILY MEDICINE CE	1043309552		
958	$36,967	450310462	BROSSEAU	JAMES	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1760589543	11	Internal Medicine	9001	ALTRU HEALTH SYSTEM	1043309552		
326	$36,896	450310462	BUSTILLO CHAMS	IVAN	960 S COLUMBIA RD		GRAND FORKS	ND	58201	1457501827	75	Oncology	9028	ALTRU CANCER CENTER	1043309552		
1,417	$36,834	450231183	MILLER	CORY	1213 15TH AVE W		WILLISTON	ND	58801	1598783631	11	Internal Medicine	711001	CRAVEN-HAGAN/MERCY MEDIC	1760549000		
237	$36,826	450311334	KAVLIE	GAYLORD	401 N 9TH ST		BISMARCK	ND	58501	1760437198	2	General Surgery	236001	MID DAKOTA CLINIC	1275587826		
274	$36,787	450226909	ANDERSON	STEVEN	1717 SOUTH UNIVERSITY DR		FARGO	ND	58103	1518991678	18	Opthalmology	7742027	SANFORD 1717 MEDICAL BUI	1184917924		
383	$36,777	450226909	PIERCE	CHRISTOPHE	801 BROADWAY NORTH		FARGO	ND	58102	1932127537	6	Cardivascular Disease	7742001	SANFORD BROADWAY CLINIC	1184917924		
70	$36,771	450226700	PERKEREWICZ	KATHLEEN	222 N 7TH ST		BISMARCK	ND	58501	1306958715	16	Obstet/Gynecology	4001	SANFORD CLINIC	1811941172		
355	$36,745	450459704	BOUTROUS	ATTAS	600 N 9TH ST SUITE 2		BISMARCK	ND	58501	1346362423	5	Anesthesiology (MD)	5349001	PAIN TREATMENT CENTER AN	1780707836		
1,629	$36,732	450310462	MORALEDA	ROBERTO	1001 7TH ST		DEVILS LAKE	ND	58301	1427057231	11	Internal Medicine	9027	ALTRU CLINIC LAKE REGION	1861581373		
1,730	$36,636	450226700	BLANCHARD	JOEL	2603 E BROADWAY AVE		BISMARCK	ND	58501	1356368021	8	Family Practice	4032	SANFORD HEALTH OCCUPATIO	1669524351		
64	$36,625	450226909	MONSON	TIMOTHY	801 BROADWAY NORTH		FARGO	ND	58102	1740207281	2	General Surgery	7742001	SANFORD BROADWAY CLINIC	1184917924		
177	$36,501	450226909	LEITCH	JOHN	820 4TH ST N		FARGO	ND	58102	1811914583	75	Oncology	7742002	SANFORD ROGER MARIS CANC	1184917924		
139	$36,469	450363014	DICKINSON AMBULANC	RV	42 B AVE EAST		DICKINSON	ND	58601	1578622999	59	Ambulance Service	1859001	DICKINSON AMBULANCE SERV	1578622999		

331	$36,394	911770748	PENG	HONG QI	801 BROADWAY NORTH		FARGO	ND	58102	1194754002	21	Pathology, Anatomy, Clinical Pathology	3001	SANFORD BROADWAY CLINIC	1942241351		
945	$36,386	450226711	HOLMEN	JOHN	900 E BROADWAY AVE		BISMARCK	ND	58501	1912931783	30	Radiology	501001	ST ALEXIUS MEDICAL CENTE	1205868429		
498	$36,369	450226700	RAKOWSKI	JANA	1040 TOCOMA AVE		BISMARCK	ND	58504	1013220508	50	Nurse Practitioner	4059	SANFORD SOUTH CLINIC	1811941172		
641	$36,352	450460288	RINEHART	KAREN	310 S 5TH STREET		BISMARCK	ND	58504	1124197728	48	Podiatry, Surgical chiropody	1832001	FOOT CARE ASSOCIATES, PC	1669591038		
358	$36,347	201090052	RUSSELL	SUE	628 7TH AVE S STE B		GRAND FORKS	ND	58201	1043382773	62	Psychology	1648001	RUSSELL, SUE A, PHD P.C.	1942371067		
554	$36,344	450226700	THOMAS	JACK	2615 FAIRWAY ST		DICKINSON	ND	58601	1871691543	8	Family Practice	4008	SANFORD HEALTH DICKINSON	1811941172		
134	$36,340	202404179	SANFORD HEALTHCARE	ESSORIES B	121 E CENTURY AVE		BISMARCK	ND	58503	1851488332	79	Home Infusion	3302001	SANFORD HEALTHCARE ACCES	1851488332		
832	$36,303	861058655	EGGIMAN	ANTHONY	430 5TH ST N		BRECKENRIDGE	MN	56520	1275762312	65	Physical Therapy	5909001	ORTHOPEDIC AND SPORTS PH	1811923535		
209	$36,181	450226700	GRAY	THANDIWE	300 N 7TH ST		BISMARCK	ND	58501	1194884338	11	Internal Medicine	440001	SANFORD MEDICAL CENTER/B	1811941172		
667	$36,113	450310462	CHEBACLO	MOHAMED	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1386708931	6	Cardivascular Disease	9001	ALTRU HEALTH SYSTEM	1043309552		
491	$36,058	911770748	NAGALA	RUPKUMAR	420 S 7TH ST		OAKES	ND	58474	1336138601	8	Family Practice	3068	SANFORD HEALTH OAKES CLI	1942241351		
621	$35,952	450310462	HEISE	AMBER	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1013077478	37	Pediatrics	9001	ALTRU HEALTH SYSTEM	1043309552		
341	$35,951	861123162	BROWN	MICHAEL	310 N 10TH ST		BISMARCK	ND	58501	1912007642	6	Cardivascular Disease	6459001	ST ALEXIUS HEART & LUNG	1194823021		
298	$35,934	450226909	SAWCHUK	THEODORE	801 BROADWAY NORTH		FARGO	ND	58102	1629090261	34	Urology	7742001	SANFORD BROADWAY CLINIC	1184917924		
437	$35,884	450310462	MUDIREDDY	UMA	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1710047600	29	Pulmonary Diseases	9001	ALTRU HEALTH SYSTEM	1043309552		
181	$35,827	450226909	NALLURI	MURALI	801 BROADWAY NORTH		FARGO	ND	58102	1669660379	10	Gastronenterology	7742001	SANFORD BROADWAY CLINIC	1184917924		
1,082	$35,804	450226711	HARJU	RENEE	2700 8TH ST NW		MINOT	ND	58703	1750478780	50	Nurse Practitioner	501016	ST ALEXIUS CLINIC	1205868429		
660	$35,669	911770748	HOCHHALTER	DAVID	520 CHAUTAUQUA BLVD		VALLEY CITY	ND	58072	1669583183	8	Family Practice	3002	SANFORD HEALTH VALLEY CI	1942241351		
435	$35,597	450226700	WOLF	TERRY	102 MANDAN AVE		MANDAN	ND	58554	1386721066	8	Family Practice	4057	SANFORD EAST MANDAN CLIN	1811941172		
1,708	$35,564	470929724	MILLER	SHANE	2911 N 14TH ST STE 102		BISMARCK	ND	58503	1093867541	35	Chiropractor	6064001	CAPITAL CHIROPRACTIC & S	1689704553		
382	$35,558	450226909	BRAUNAGEL	BRADLEY	1720 UNIVERSITY DR S		FARGO	ND	58103	1396762399	8	Family Practice	7742004	SANFORD SOUTH UNIVERSITY	1184917924		
276	$35,543	450226909	TOMPKINS	REBEKAH	2400 32ND AVE S		FARGO	ND	58103	1871783704	16	Obstet/Gynecology	7742008	SANFORD SOUTHPOINTE CLIN	1184917924		
466	$35,416	450226909	WIISANEN	RONALD	2400 32ND AVE S		FARGO	ND	58103	1790794295	8	Family Practice	7742008	SANFORD SOUTHPOINTE CLIN	1184917924		
1,058	$35,411	911770748	MAYO	WILLIAM	332 2ND AVE N		WAHPETON	ND	58075	1750313946	8	Family Practice	3016	SANFORD HEALTH WAHPETON	1942241351		
240	$35,307	450226558	BEDELL	TIMOTHY	400 BURDICK EXPY E		MINOT	ND	58701	1356565964	16	Obstet/Gynecology	635006	TRINITY MEDICAL GROUP	1083653752		
835	$35,122	450310462	ABOUFAKHER	RABEEA	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1881896223	6	Cardivascular Disease	9001	ALTRU HEALTH SYSTEM	1043309552		
355	$35,100	450226909	ROESLER	SEAN	1720 UNIVERSITY DR S		FARGO	ND	58103	1750303392	8	Family Practice	7742004	SANFORD SOUTH UNIVERSITY	1184917924		
315	$35,042	450310462	BRITTEN	JOSHUA	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1023274230	48	Podiatry, Surgical chiropody	9001	ALTRU HEALTH SYSTEM	1043309552		
706	$34,999	450310462	ENGEL	PAMELA	1380 S COLUMBIA RD		GRAND FORKS	ND	58201	1295826204	50	Nurse Practitioner	9021	ALTRU FAMILY MEDICINE CE	1043309552		
1,033	$34,967	450226711	FORTNEY	MICHAEL	900 E BROADWAY AVE		BISMARCK	ND	58501	1891721858	30	Radiology	501001	ST ALEXIUS MEDICAL CENTE	1205868429		
1,816	$34,936	263487344	KERSTEN	BRAD	1800 E MAIN ST STE B		MANDAN	ND	58554	1376732321	35	Chiropractor	7253001	KERSTEN CHIROPRACTIC PC	1255583019		
264	$34,890	450311334	KANE	DEREK	401 N 9TH ST		BISMARCK	ND	58501	1508942897	2	General Surgery	236001	MID DAKOTA CLINIC	1275587826		
1,029	$34,834	450311334	OLSON	NICOLE	401 N 9TH ST		BISMARCK	ND	58501	1346478500	65	Physical Therapy	236001	MID DAKOTA CLINIC	1275587826		
755	$34,806	911770748	ANDERSON	JUDY	520 CHAUTAUQUA BLVD		VALLEY CITY	ND	58072	1073825089	97	Physician Assistant	3002	SANFORD HEALTH VALLEY CI	1942241351		
546	$34,799	203617501	SOLBERG	JULIE	1451 44TH AVE S UNIT F		GRAND FORKS	ND	58201	1407024326	97	Physician Assistant	6692001	NORTHLAND FAMILY PHYSICI	1215990791		
556	$34,782	450226700	QUAST	MICHAEL	414 N 7TH ST		BISMARCK	ND	58501	1548287634	5	Anesthesiology (MD)	4046	SANFORD SEVENTH AND ROSS	1811941172		
216	$34,747	208928600	OLSON	STEPHEN	3060 FRONTIER WAY S		FARGO	ND	58104	1861540973	67	Occupational Therapy	6961001	PEDIATRIC THERAPY PARTNE	1457479958		
228	$34,680	450226909	JALIL	SAJID	801 BROADWAY NORTH		FARGO	ND	58102	1699989939	11	Internal Medicine	7742001	SANFORD BROADWAY CLINIC	1184917924		
1,079	$34,583	911770748	GOVEN	GENEVIEVE	520 CHAUTAUQUA BLVD		VALLEY CITY	ND	58072	1033136999	8	Family Practice	3002	SANFORD HEALTH VALLEY CI	1942241351		
450	$34,553	450226558	ROACH	BRUCE	400 BURDICK EXPY E		MINOT	ND	58701	1255402301	8	Family Practice	635006	TRINITY MEDICAL GROUP	1083653752		
581	$34,547	450226700	KORTE	STEPHEN	222 N 7TH ST		BISMARCK	ND	58501	1881615318	6	Cardivascular Disease	4001	SANFORD CLINIC	1811941172		
1,061	$34,531	450414630	WOSICK	WILLIAM	2829 UNIVERSITY DR S	STE 104	FARGO	ND	58103	1700808375	30	Radiology	284001	INDEPENDENT RADIOLOGY SE	1538254586		
368	$34,432	450226909	FOSTER	ETHAN	820 4TH ST N		FARGO	ND	58102	1679693147	75	Oncology	7742002	SANFORD ROGER MARIS CANC	1184917924		
1,752	$34,323	450311334	STECKLER	JAY	401 N 9TH ST		BISMARCK	ND	58501	1083634521	65	Physical Therapy	236001	MID DAKOTA CLINIC	1275587826		
144	$34,298	450226700	NGATIA	JOSEPHAT	300 N 7TH ST		BISMARCK	ND	58501	1235332206	5	Anesthesiology (MD)	440001	SANFORD MEDICAL CENTER/B	1811941172		
324	$34,241	450226700	THOMPSON	ERIC	715 E BROADWAY AVE		BISMARCK	ND	58501	1043242290	8	Family Practice	4050	SANFORD SEVENTH AND BROA	1811941172		
1,014	$34,192	450310462	HOWSON	CHRISTOPHE	4401 S 11TH ST		GRAND FORKS	ND	58201	1154354454	35	Chiropractor	9034	ALTRU AT CHOICE	1043309552		
408	$34,172	204110580	SHAWCHUCK	CARITA	1121 WESTRAC DR STE 204		FARGO	ND	58103	1093757791	62	Psychology	6753001	SHAWCHUCK, CARITA, PHD,	1871650267		
685	$34,148	450232743	JOHNSON	JOEL	115 VIVAN ST		PARK RIVER	ND	58270	1528138542	8	Family Practice	598001	P.R. HEALTH CORPORATION	1306850706		
621	$34,060	450226700	REDDY	KARTHIK	222 N 7TH ST		BISMARCK	ND	58501	1881755429	6	Cardivascular Disease	4001	SANFORD CLINIC	1811941172		
484	$33,996	205604919	RAGHIB	ENDER	2829 S UNIV DR STE 101		FARGO	ND	58103	1629155643	37	Pediatrics	6875001	PEDIATRIC ARTS CLINIC, P	1093937203		
507	$33,986	450226711	JOHNSON	GARY	900 E BROADWAY AVE		BISMARCK	ND	58501	1962555847	5	Anesthesiology (MD)	501001	ST ALEXIUS MEDICAL CENTE	1205868429		
1,273	$33,984	261175213	STRAND	DUANE	275 11TH ST S		WAHPETON	ND	58075	1871521245	11	Internal Medicine	6885019	INNOVIS HEALTH, LLC DBA	1790965440		
736	$33,960	911770748	BERGE	CHERI	332 2ND AVE N		WAHPETON	ND	58075	1073535662	50	Nurse Practitioner	3016	SANFORD HEALTH WAHPETON	1942241351		
176	$33,951	450226909	MEIDINGER	ROSS	801 BROADWAY NORTH		FARGO	ND	58102	1043420722	10	Gastronenterology	7742001	SANFORD BROADWAY CLINIC	1184917924		
950	$33,942	450231183	KEENE	DAVID	1213 15TH AVE W		WILLISTON	ND	58801	1659532844	37	Pediatrics	711001	CRAVEN-HAGAN/MERCY MEDIC	1760549000		
389	$33,904	450226909	TIONGSON	CHRISTOPHE	2701 13TH AVE S		FARGO	ND	58103	1821010406	37	Pediatrics	7742009	SANFORD CHILDRENS SOUTHW	1184917924		
773	$33,862	450310462	WEILAND	TIMOTHY	1200 S COLUMBIA RD		GRAND FORKS	ND	58201	1235225590	22	Pathology, Anatomy, Clinical Pathology	62001	ALTRU HOSPITAL	1154346161		
449	$33,838	450310159	OMOTUNDE	JOSHUA	164 WEST 13TH STREET		GRAFTON	ND	58237	1134190192	8	Family Practice	282001	GRAFTON FAMILY CLINIC	1558423665		
261	$33,817	450226700	MCMACKEN	AUDREY	2615 FAIRWAY ST		DICKINSON	ND	58601	1215199781	16	Obstet/Gynecology	4008	SANFORD HEALTH DICKINSON	1811941172		
750	$33,792	311824372	PALMGREN	ANNETTE	1425 S COLUMBIA RD		GRAND FORKS	ND	58201	1346307758	65	Physical Therapy	6037002	ACHIEVE THERAPY, LLC	1013009232		
142	$33,723	450226700	TAN	AQUILINO	300 N 7TH ST		BISMARCK	ND	58501	1629098769	5	Anesthesiology (MD)	440001	SANFORD MEDICAL CENTER/B	1811941172		
900	$33,631	450310462	FETTERLY	PAUL	1001 7TH ST		DEVILS LAKE	ND	58301	1801895610	8	Family Practice	9027	ALTRU CLINIC LAKE REGION	1861581373		
324	$33,521	450226700	TELLO	FRANCISCO	222 N 7TH ST		BISMARCK	ND	58501	1376641035	48	Podiatry, Surgical chiropody	4001	SANFORD CLINIC	1811941172		
124	$33,510	450310462	GRIEVE	BILLIE	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1598700882	2	General Surgery	9001	ALTRU HEALTH SYSTEM	1043309552		
316	$33,452	450226909	MAGURA	CONNIE	1720 UNIVERSITY DR S		FARGO	ND	58103	1235156845	8	Family Practice	7742004	SANFORD SOUTH UNIVERSITY	1184917924		

379	$33,359	450226700	PATEL	NIRAL	3318 N 14TH STREET		BISMARCK	ND	58503	1841479730	8	Family Practice	4064	SANFORD NORTH WALK-IN CL	1811941172		
203	$33,323	450226909	TINGUELY	CHRISTINA	2400 32ND AVE S		FARGO	ND	58103	1740333079	16	Obstet/Gynecology	7742008	SANFORD SOUTHPOINTE CLIN	1184917924		
158	$33,314	450226909	FETNER	ERIK	801 BROADWAY NORTH		FARGO	ND	58102	1033302062	2	General Surgery	7742001	SANFORD BROADWAY CLINIC	1184917924		
142	$33,286	861123162	LO	LIM-CHE	310 N 10TH ST		BISMARCK	ND	58501	1720186653	5	Anesthesiology (MD)	6459001	ST ALEXIUS HEART & LUNG	1194823021		
492	$33,229	450226558	UDEKWE	ANTHONY	400 BURDICK EXPY E		MINOT	ND	58701	1740354646	37	Pediatrics	635006	TRINITY MEDICAL GROUP	1083653752		
173	$33,167	450310462	MORK	KEVIN	1200 S COLUMBIA RD		GRAND FORKS	ND	58201	1235248410	5	Anesthesiology (MD)	62001	ALTRU HOSPITAL	1154346161		
561	$33,151	450226558	REE	CHERYL	400 BURDICK EXPY E		MINOT	ND	58701	1275604316	8	Family Practice	635006	TRINITY MEDICAL GROUP	1083653752		
121	$33,126	830501678	STANLEY	JOHN	2331 TYLER PKWY STE 4		BISMARCK	ND	58503	1285670067	19	Oral Surgery	7104001	INSTITUTE OF FACIAL SURG	1427226125		
1,163	$33,081	450310462	COOLEY	A. MARVIN	1200 S COLUMBIA RD		GRAND FORKS	ND	58201	1710078720	22	Pathology, Anatomy, Clinical Pathology	62001	ALTRU HOSPITAL	1154346161		
340	$33,036	450226700	MOEN	R	715 E BROADWAY AVE		BISMARCK	ND	58501	1528092772	72	Emergency Medicine	4050	SANFORD SEVENTH AND BROA	1811941172		
120	$33,028	450310462	PANDA	DURGA	1200 S COLUMBIA RD		GRAND FORKS	ND	58201	1609073915	37	Pediatrics	62001	ALTRU HOSPITAL	1154346161		
153	$33,011	450310462	MELAND	N. BRADLY	3165 DEMERS AVE		GRAND FORKS	ND	58201	1932275088	24	Plastic Surgery	9016	TRUYU AESTHETIC CENTER	1043309552		
263	$32,978	911770748	BIANCO	MICHELLE	1720 UNIVERSITY DR S		FARGO	ND	58103	1225084460	21	Pathology, Anatomy, Clinical Pathology	3904	SANFORD SOUTH UNIVERSITY	1942241351		
453	$32,939	450226700	MEYER	JASON	222 N 7TH ST		BISMARCK	ND	58501	1215129283	21	Pathology, Anatomy, Clinical Pathology	4001	SANFORD CLINIC	1811941172		
424	$32,922	450310462	LO	SHOUA	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1689761785	48	Podiatry, Surgical chiropody	9001	ALTRU HEALTH SYSTEM	1043309552		
516	$32,878	911770748	ALAM	MOHAMMAD	929 CENTRAL AVE NW		E GRAND FORKS	MN	56721	1356574016	8	Family Practice	3055	SANFORD HEALTH 929 CENTR	1942241351		
538	$32,872	450226700	JOHNSON	CRAIG	222 N 7TH ST		BISMARCK	ND	58501	1720199755	22	Pathology, Anatomy, Clinical Pathology	4001	SANFORD CLINIC	1811941172		
405	$32,870	450226909	MYRMOE	JASON	2601 BROADWAY N		FARGO	ND	58102	1003076894	8	Family Practice	7742003	SANFORD NORTH FARGO CLIN	1184917924		
401	$32,738	450226700	COLBY	KARNA	222 N 7TH ST		BISMARCK	ND	58501	1407047913	22	Pathology, Anatomy, Clinical Pathology	4001	SANFORD CLINIC	1811941172		
384	$32,661	450226909	GULLICKSON	NICOLE	2400 32ND AVE S		FARGO	ND	58103	1174783211	8	Family Practice	7742008	SANFORD SOUTHPOINTE CLIN	1184917924		
269	$32,650	450226909	JENSEN	ASHLEY	820 4TH ST N		FARGO	ND	58102	1992729230	75	Oncology	7742002	SANFORD ROGER MARIS CANC	1184917924		
306	$32,629	450226700	REISENAUER	JUSTIN	300 N 7TH ST		BISMARCK	ND	58501	1932366143	72	Emergency Medicine	440001	SANFORD MEDICAL CENTER/B	1811941172		
343	$32,572	450226909	WILLIAMS	BRENT	801 BROADWAY NORTH		FARGO	ND	58102	1710125893	34	Urology	7742001	SANFORD BROADWAY CLINIC	1184917924		
1,716	$32,569	450412672	MORITZ	LACI	1936 N 11TH ST		BISMARCK	ND	58501	1104929983	35	Chiropractor	275001	CHUPPE CHIROPRACTIC CLIN	1649285396		
525	$32,510	450226700	LEBEAU	MICHAEL	209 7 ST N		BISMARCK	ND	58501	1760488746	11	Internal Medicine	4048	SANFORD SEVENTH AND THAY	1811941172		
450	$32,480	450226909	TINGUELY	STEPHEN	801 BROADWAY NORTH		FARGO	ND	58102	1215969415	37	Pediatrics	7742001	SANFORD BROADWAY CLINIC	1184917924		
660	$32,396	861123162	NELSON	MATTHEW	310 N 10TH ST		BISMARCK	ND	58501	1376622985	6	Cardivascular Disease	6459001	ST ALEXIUS HEART & LUNG	1194823021		
243	$32,288	450226909	RAISEN	JAY	801 BROADWAY NORTH		FARGO	ND	58102	1740305473	4	Otology, Laryngology, Rhinology	7742001	SANFORD BROADWAY CLINIC	1184917924		
334	$32,279	450226909	LEWIS	DAVID	2701 13TH AVE S		FARGO	ND	58103	1386662955	37	Pediatrics	7742009	SANFORD CHILDRENS SOUTHW	1184917924		
550	$32,276	450310462	LAFRAMBOISE	JENNIFER	3165 DEMERS AVE		GRAND FORKS	ND	58201	1336494574	50	Nurse Practitioner	9016	TRUYU AESTHETIC CENTER	1043309552		
408	$32,182	450226909	KANTAK	SUNITA	2701 13TH AVE S		FARGO	ND	58103	1578580247	37	Pediatrics	7742009	SANFORD CHILDRENS SOUTHW	1184917924		
328	$32,103	450459704	CARLSON	HUGH	600 N 9TH ST SUITE 2		BISMARCK	ND	58501	1093837197	5	Anesthesiology (MD)	5349001	PAIN TREATMENT CENTER AN	1780707836		
467	$32,097	261175213	MALKASIAN	LUCY	275 11TH ST S		WAHPETON	ND	58075	1215972773	37	Pediatrics	6885019	INNOVIS HEALTH, LLC DBA	1790965440		
1,049	$32,006	911770748	CARSON	JANINE	801 BROADWAY NORTH		FARGO	ND	58102	1295752293	30	Radiology	3001	SANFORD BROADWAY CLINIC	1942241351		
77	$31,973	450226909	SUDER	JANA	820 4TH ST N		FARGO	ND	58102	1639442411	50	Nurse Practitioner	7742002	SANFORD ROGER MARIS CANC	1184917924		
1,194	$31,823	450363176	LILLESTOL	MICHAEL	1707 GOLD DR S STE 101		FARGO	ND	58103	1669427688	11	Internal Medicine	5595001	INTERNAL MEDICINE ASSOCI	1144313743		
2,358	$31,709	456004395	LAKE REGION DISTRI	LT	524 4TH AVE NE UNIT 9		DEVILS LAKE	ND	58301	1164553160	60	Public Health or Welfare Agency	4480001	LAKE REGION DISTRICT HLT	1164553160		
452	$31,679	450310462	MARTIN	CANDELARIA	1001 7TH ST		DEVILS LAKE	ND	58301	1871714808	8	Family Practice	9027	ALTRU CLINIC LAKE REGION	1861581373		
887	$31,644	450311334	HEBERT	BRIAN	2700 STATE ST		BISMARCK	ND	58503	1235177577	11	Internal Medicine	236006	MID DAKOTA CLINIC - GATE	1275587826		
782	$31,616	450310462	HUTTON	CORA LEN	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1578654372	50	Nurse Practitioner	9001	ALTRU HEALTH SYSTEM	1043309552		
573	$31,578	911770748	LUECK	MICHELLE	201 4TH AVE STE 1		ENDERLIN	ND	58027	1366469033	97	Physician Assistant	3025	SANFORD HEALTH ENDERLIN	1942241351		
372	$31,561	450310462	PULAGAM	SRINIVAS	1200 S COLUMBIA RD		GRAND FORKS	ND	58201	1366516833	11	Internal Medicine	62001	ALTRU HOSPITAL	1154346161		
323	$31,509	450321538	HART	MARK	310 N 9TH ST		BISMARCK	ND	58501	1912929449	20	Orthopedic Surgery	188001	THE BONE & JOINT CENTER,	1750307872		
179	$31,486	450226700	EGGERT	DOUGLAS	222 N 7TH ST		BISMARCK	ND	58501	1740366590	25	Physical Medicine and Rehab	4001	SANFORD CLINIC	1811941172		
286	$31,464	450226909	BENTZ	BARBARA	2701 13TH AVE S		FARGO	ND	58103	1275631640	37	Pediatrics	7742009	SANFORD CHILDRENS SOUTHW	1184917924		
272	$31,437	450226558	AMSBURY	JOHN	400 BURDICK EXPY E		MINOT	ND	58701	1336304906	16	Obstet/Gynecology	635006	TRINITY MEDICAL GROUP	1083653752		
1,451	$31,430	450310462	HOOD	LARISSA	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1205927001	30	Radiology	9001	ALTRU HEALTH SYSTEM	1043309552		
510	$31,371	450226558	FIFE	TODD	831 S BROADWAY		MINOT	ND	58701	1063500403	8	Family Practice	635001	TRINITY MEDICAL GROUP	1083653752		
1,417	$31,350	450310462	TREUER	JODY	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1790871051	30	Radiology	9001	ALTRU HEALTH SYSTEM	1043309552		
1,233	$31,330	453515622	POKORNY	JEFFREY	1035 3RD AVE W		DICKINSON	ND	58601	1710083175	35	Chiropractor	6139001	POKORNY CHIROPRACTIC CLI	1255607305		
323	$31,292	450226700	PATEL	NIRAL	300 N 7TH ST		BISMARCK	ND	58501	1841479730	8	Family Practice	440001	SANFORD MEDICAL CENTER/B	1811941172		
82	$31,168	450226909	LINDLEY	TIMOTHY	700 1ST AVE S		FARGO	ND	58103	1659589240	14	Neurological Surgery	7742007	SANFORD NEUROSCIENCE CLI	1184917924		
341	$31,144	450226909	SAMPSON	STEVEN	1720 UNIVERSITY DR S		FARGO	ND	58103	1225050875	8	Family Practice	7742004	SANFORD SOUTH UNIVERSITY	1184917924		
856	$31,140	261175213	MICKELSON	BARBARA	2430 20TH ST SW		JAMESTOWN	ND	58401	1225292311	50	Nurse Practitioner	6885018	INNOVIS HEALTH, LLC DBA	1073793725		
442	$31,120	450226700	ANDERSON	PATRICIA	2615 FAIRWAY ST		DICKINSON	ND	58601	1013970532	11	Internal Medicine	4008	SANFORD HEALTH DICKINSON	1811941172		
18	$31,113	770552594	GENOMIC HEALTH INC		301 PENOBSCOT DR		REDWOOD CITY	CA	94063	1215003603	69	Independent Laboratory	7564001	GENOMIC HEALTH INC	1215003603		
104	$31,106	450310462	GUTTORMSON	ROBERT	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1427222033	2	General Surgery	9001	ALTRU HEALTH SYSTEM	1043309552		
1,757	$31,072	450311334	ERICKSTAD	MARK	401 N 9TH ST		BISMARCK	ND	58501	1700824984	11	Internal Medicine	236001	MID DAKOTA CLINIC	1275587826		
1,611	$31,023	450412672	CHUPPE	GREGORY	1936 N 11TH ST		BISMARCK	ND	58501	1124048665	35	Chiropractor	275001	CHUPPE CHIROPRACTIC CLIN	1649285396		
232	$31,000	450310462	WEISER	STEVEN	1200 S COLUMBIA RD		GRAND FORKS	ND	58201	1528158490	72	Emergency Medicine	62001	ALTRU HOSPITAL	1154346161		
70	$30,974	450459704	PAIN TREATMENT CEN	DBA COMMUN	600 N 9TH ST ST SUITE 3		BISMARCK	ND	58501	1912270729	30	Radiology	5349002	PAIN TREATMENT CENTER DB	1912270729		
361	$30,952	450226558	OSUALA	FRIDAY	400 BURDICK EXPY E		MINOT	ND	58701	1700972973	37	Pediatrics	635006	TRINITY MEDICAL GROUP	1083653752		
219	$30,921	911770748	CAIN	KRISTEN	1111 HARWOOD DR		FARGO	ND	58104	1932185451	73	Endocrinology	3048	SANFORD REPRODUCTIVE MED	1942241351		
459	$30,919	273840445	METTLER	APRIL	215 E BROADWAY AVE	STE 130	BISMARCK	ND	58501	1225290653	65	Physical Therapy	7624001	CC'S PHYSICAL THERAPY, L	1932400983		
420	$30,857	450226909	DAHL	DANIEL	1220 SHEYENNE ST		WEST FARGO	ND	58078	1285884767	8	Family Practice	7742013	SANFORD WEST FARGO CLINI	1184917924		
362	$30,788	450226700	SARRIGIANNIDIS	ANDREAS	222 N 7TH ST		BISMARCK	ND	58501	1497853147	29	Pulmonary Diseases	4001	SANFORD CLINIC	1811941172		

253	$30,749	450422741	FORTE-PATHROFF	DENISE	225 N 7TH ST SUITE B		BISMARCK	ND	58501	1518904101	7	Dermatology	1647001	FORTE PATHROFF, DENISE,	1306046545		
304	$30,737	450459704	KNUTSON	RONALD	600 N 9TH ST SUITE 2		BISMARCK	ND	58501	1649392739	5	Anesthesiology (MD)	5349001	PAIN TREATMENT CENTER AN	1780707836		
166	$30,665	450310462	KOLTES-EDWARDS	RENEE	1200 S COLUMBIA RD		GRAND FORKS	ND	58201	1477644276	5	Anesthesiology (MD)	62001	ALTRU HOSPITAL	1154346161		
405	$30,578	450226909	MILLER	RON	801 BROADWAY NORTH		FARGO	ND	58102	1760400345	37	Pediatrics	7742001	SANFORD BROADWAY CLINIC	1184917924		
438	$30,316	911770748	BREEN	CHARLES	315 E CALEDONIA AVE		HILLSBORO	ND	58045	1114944113	8	Family Practice	3010	SANFORD HEALTH HILLSBORO	1942241351		
299	$30,314	10650829	BRUSTAD	LAURIE	1551 28 AVE S STE C		GRAND FORKS	ND	58201	1326169921	62	Psychology	5650001	CENTER FOR SELF GROWTH &	1265658967		
147	$30,271	450310462	SCHUSTER	MICHAEL	1200 S COLUMBIA RD		GRAND FORKS	ND	58201	1689667909	5	Anesthesiology (MD)	62001	ALTRU HOSPITAL	1154346161		
665	$30,255	460478304	RADKE	MICHELLE	1711 GOLD DRIVE S #160		FARGO	ND	58103	1417040189	8	Family Practice	5709001	INDEPENDENT FAMILY DOCTO	1659477149		
425	$30,230	450226909	BAKKE	REBECCA	2701 13TH AVE S		FARGO	ND	58103	1841456324	37	Pediatrics	7742009	SANFORD CHILDRENS SOUTHW	1184917924		
1,087	$30,200	450422119	OHARA	BRIAN	33 9TH ST W		DICKINSON	ND	58601	1568459113	37	Pediatrics	231001	GREAT PLAINS CLINIC, PC	1720075377		
294	$30,195	450226700	CHAUDHARY	VIJAY	300 N 7TH ST		BISMARCK	ND	58501	1134388051	75	Oncology	440001	SANFORD MEDICAL CENTER/B	1811941172		
41	$30,193	911841100	HONEYCUTT	D'ARCY	3913 LOCKPORT ST		BISMARCK	ND	58503	1184720948	24	Plastic Surgery	1065001	ADVANCED SURGICAL ARTS C	1578669354		
319	$30,130	204874580	HAUGEN	ERIN	725 HAMLINE ST		GRAND FORKS	ND	58203	1528276458	62	Psychology	6806001	ASSESSMENT AND THERAPY A	1437181591		
352	$30,130	450226700	BECKWITH	JENNIFER	910 18TH ST NW		MANDAN	ND	58554	1073719399	8	Family Practice	4060	SANFORD NORTH MANDAN CLI	1811941172		
169	$30,103	450226909	MCNELIS	JOSEPH	801 BROADWAY NORTH		FARGO	ND	58102	1538179734	10	Gastronenterology	7742001	SANFORD BROADWAY CLINIC	1184917924		
1,037	$30,099	450311334	HAPPEL	KEITH	401 N 9TH ST		BISMARCK	ND	58501	1871547067	11	Internal Medicine	236001	MID DAKOTA CLINIC	1275587826		
264	$30,056	450226909	BLAUFUSS	MARK	801 BROADWAY NORTH		FARGO	ND	58102	1841218575	37	Pediatrics	7742001	SANFORD BROADWAY CLINIC	1184917924		
694	$30,021	450310462	OKUNDAYE	EBIMA	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1063546406	39	Nephrology	9001	ALTRU HEALTH SYSTEM	1043309552		
441	$30,007	450226558	MESSERLY	MELISSA	400 BURDICK EXPY E		MINOT	ND	58701	1164512091	37	Pediatrics	635006	TRINITY MEDICAL GROUP	1083653752		
178	$29,992	202841067	TAHERI	AREZOO	1665 43 ST S STE 100		FARGO	ND	58103	1215917992	10	Gastronenterology	6581001	FARGO GASTROENTEROLOGY &	1518047091		
358	$29,982	450226700	ANDERSON	TAMALA	2615 FAIRWAY ST		DICKINSON	ND	58601	1417212408	50	Nurse Practitioner	4008	SANFORD HEALTH DICKINSON	1811941172		
1,059	$29,951	450310462	CHOU	DAVID	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1710926878	30	Radiology	9001	ALTRU HEALTH SYSTEM	1043309552		
262	$29,860	450226700	PETERSON	GREGORY	222 N 7TH ST		BISMARCK	ND	58501	1699887018	25	Physical Medicine and Rehab	4001	SANFORD CLINIC	1811941172		
268	$29,857	450226909	SEGAL	MICHAEL	801 BROADWAY NORTH		FARGO	ND	58102	1578585121	34	Urology	7742001	SANFORD BROADWAY CLINIC	1184917924		
412	$29,785	450226700	JIA	HONGCHEN	222 N 7TH ST		BISMARCK	ND	58501	1790796548	22	Pathology, Anatomy, Clinical Pathology	4001	SANFORD CLINIC	1811941172		
1,308	$29,687	456002085	GRAND FORKS PUBLIC	LTH DEPART	151 S 4TH ST STE N301		GRAND FORKS	ND	58201	1801907720	60	Public Health or Welfare Agency	4478001	GRAND FORKS PUBLIC HEALT	1801907720		
1,127	$29,612	450311334	BOSSERT	AMBER	401 N 9TH ST		BISMARCK	ND	58501	1518136159	65	Physical Therapy	236001	MID DAKOTA CLINIC	1275587826		
388	$29,469	450226700	KRISTENSEN	KARLEE	1040 TOCOMA AVE		BISMARCK	ND	58504	1417257635	97	Physician Assistant	4059	SANFORD SOUTH CLINIC	1811941172		
851	$29,457	456002491	QUISNO	JACQUELINE	701 E ROSSER		BISMARCK	ND	58501	1326016163	8	Family Practice	102001	CENTER FOR FAMILY MEDICI	1619905528		
150	$29,421	861123162	VOIGT	MATTHEW	310 N 10TH ST		BISMARCK	ND	58501	1922270834	5	Anesthesiology (MD)	6459001	ST ALEXIUS HEART & LUNG	1194823021		
66	$29,399	450412577	FIRST MEDIC AMBULA		1100 OAK ST		LISBON	ND	58054	1588724553	59	Ambulance Service	3278001	FIRST MEDIC AMBULANCE	1588724553		
422	$29,396	450310462	BANSAL	ARVIND	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1962523381	29	Pulmonary Diseases	9001	ALTRU HEALTH SYSTEM	1043309552		
536	$29,373	450310462	RAHMAN	MOHAMMED	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1528216926	39	Nephrology	9001	ALTRU HEALTH SYSTEM	1043309552		
299	$29,371	450226700	ARTHAM	SURYA	222 N 7TH ST		BISMARCK	ND	58501	1215127493	11	Internal Medicine	4001	SANFORD CLINIC	1811941172		
511	$29,343	450310462	JACOBSEN	JOHN	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1548244288	3	Allergy	9001	ALTRU HEALTH SYSTEM	1043309552		
1,090	$29,257	450226558	HANJANI	FARZODD	1 BURDICK EXPY W		MINOT	ND	58701	1255530853	30	Radiology	635032	TRINITY MEDICAL GROUP	1083653752		
736	$29,220	861123162	OATFIELD	ROBERT	310 N 10TH ST		BISMARCK	ND	58501	1578662433	6	Cardivascular Disease	6459001	ST ALEXIUS HEART & LUNG	1194823021		
85	$29,214	450226909	SMITH	JO-ANN	801 BROADWAY NORTH		FARGO	ND	58102	1649475344	37	Pediatrics	7742001	SANFORD BROADWAY CLINIC	1184917924		
638	$29,213	450363176	YOHE	MARK	1707 GOLD DR S STE 101		FARGO	ND	58103	1346403995	11	Internal Medicine	5595001	INTERNAL MEDICINE ASSOCI	1144313743		
1,007	$29,203	450311334	ORCHARD	JEFFREY	401 N 9TH ST		BISMARCK	ND	58501	1710931977	8	Family Practice	236001	MID DAKOTA CLINIC	1275587826		
619	$29,134	450310462	KOTRBA	JESSICA	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1801141049	50	Nurse Practitioner	9001	ALTRU HEALTH SYSTEM	1043309552		
472	$29,097	203617501	PETERSON	MARK	1451 44TH AVE S UNIT F		GRAND FORKS	ND	58201	1134182355	8	Family Practice	6692001	NORTHLAND FAMILY PHYSICI	1215990791		
314	$29,048	204129496	COLE	KAREN	2951 34TH ST S		GRAND FORKS	ND	58201	1316166606	65	Physical Therapy	6775001	LITTLE MIRACLES, INC	1821110982		
475	$28,946	450226558	OLSON	MARK	1321 W DAKOTA PARKWAY		WILLISTON	ND	58801	1023182110	8	Family Practice	635039	TRINITY COMMUNITY CLINIC	1083653752		
147	$28,926	861123162	PRESZLER	TODD	310 N 10TH ST		BISMARCK	ND	58501	1396724282	5	Anesthesiology (MD)	6459001	ST ALEXIUS HEART & LUNG	1194823021		
234	$28,920	450428323	GROSZ	DAVID	100 4TH ST S STE 612		FARGO	ND	58103	1336237684	18	Opthalmology	488001	FERCHO CATARACT & EYE CL	1447348602		
343	$28,885	261175213	BLANKINSHIP	MICHAEL	1702 UNIVERSITY DR S		FARGO	ND	58103	1780826867	7	Dermatology	6885031	INNOVIS HEALTH, LLC DBA	1255677084		
285	$28,878	201278075	JENSEN	HEIDI	1407 24TH AVE S STE 520		GRAND FORKS	ND	58201	1851487276	62	Psychology	6359001	AGASSIZ ASSOCIATES, PLLC	1700972122		
359	$28,791	450310462	LANTORIA	GERARDO	1200 S COLUMBIA RD		GRAND FORKS	ND	58201	1992972756	8	Family Practice	62001	ALTRU HOSPITAL	1154346161		
531	$28,743	460478304	JOHNSON	THERESE	1711 GOLD DRIVE S #160		FARGO	ND	58103	1518052042	8	Family Practice	5709001	INDEPENDENT FAMILY DOCTO	1659477149		
152	$28,713	450226711	FERNANDEZ-MARTOREL	PATRICIO	900 E BROADWAY AVE		BISMARCK	ND	58501	1033303268	37	Pediatrics	501001	ST ALEXIUS MEDICAL CENTE	1205868429		
255	$28,695	450310462	MADARAM	KONDAL	860 S COLUMBIA RD		GRAND FORKS	ND	58201	1003952144	26	Psychiatry (MD)	9024	ALTRU PSYCHIATRIC CENTER	1043309552		
473	$28,670	450226700	HERRERA	MARCOS	222 N 7TH ST		BISMARCK	ND	58501	1720066749	30	Radiology	4001	SANFORD CLINIC	1811941172		
82	$28,660	710882645	BARNES COUNTY CITY	UL	914 11TH AVE SW		VALLEY CITY	ND	58072	1194926659	59	Ambulance Service	4518001	BARNES COUNTY CITY AMBUL	1194926659		
136	$28,639	450310462	PARIKH	JITENDRA	1200 S COLUMBIA RD		GRAND FORKS	ND	58201	1699867028	5	Anesthesiology (MD)	62001	ALTRU HOSPITAL	1154346161		
132	$28,624	261175213	MOHAMMED RAFIYATH	SHAMUDHEEN	1702 UNIVERSITY DR S		FARGO	ND	58103	1528202900	75	Oncology	6885031	INNOVIS HEALTH, LLC DBA	1255677084		
255	$28,619	450387077	WHALEN	JONATHAN	2808 17TH AVE S		GRAND FORKS	ND	58201	1043240914	62	Psychology	203001	LIPP CARLSON LOMMEN & WI	1043316961		
951	$28,597	450422119	FLOBERG	LEA	33 9TH ST W		DICKINSON	ND	58601	1881673119	50	Nurse Practitioner	231001	GREAT PLAINS CLINIC, PC	1720075377		
758	$28,596	450310462	RYAN	CASEY	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1497833933	73	Endocrinology	9001	ALTRU HEALTH SYSTEM	1043309552		
160	$28,545	450226700	GATTEY	PHILIP	225 N 7TH ST		BISMARCK	ND	58501	1760402051	20	Orthopedic Surgery	4061	SANFORD SEVENTH AND THAY	1811941172		
370	$28,542	450310462	SEEGER	GRANT	960 S COLUMBIA RD		GRAND FORKS	ND	58201	1427252014	75	Oncology	9028	ALTRU CANCER CENTER	1043309552		
531	$28,489	450226558	TURK	SAMIR	400 BURDICK EXPY E		MINOT	ND	58701	1770657157	6	Cardivascular Disease	635006	TRINITY MEDICAL GROUP	1083653752		
719	$28,453	261175213	LARSON	BRUCE	819 MAIN ST		LISBON	ND	58054	1265470371	97	Physician Assistant	6885021	INNOVIS HEALTH, LLC DBA	1043490790		
930	$28,439	263994620	MUTH	CARSON	3750 32ND AVE S STE 103		GRAND FORKS	ND	58201	1285863050	35	Chiropractor	7341001	PLAINS CHIROPRACTIC & AC	1245470343		
125	$28,404	450226558	JUN	HONG	101 3RD AVE SW		MINOT	ND	58701	1689713620	2	General Surgery	635027	TRINITY MEDICAL GROUP	1083653752		
280	$28,273	450226700	DANIELSON	CHRISTOPHE	414 N 7TH ST		BISMARCK	ND	58501	1194925891	16	Obstet/Gynecology	4046	SANFORD SEVENTH AND ROSS	1811941172		

424	$28,243	450226558	HURLY	MARY	400 BURDICK EXPY E		MINOT	ND	58701	1104913052	8	Family Practice	635006	TRINITY MEDICAL GROUP	1083653752				
233	$28,201	450310462	SCHANZENBACH	STEWART	1200 S COLUMBIA RD		GRAND FORKS	ND	58201	1427144781	72	Emergency Medicine	62001	ALTRU HOSPITAL	1154346161				
872	$28,115	592852900	LINCARE INC		2100 S COLUMBIA RD	STE 110	GRAND FORKS	ND	58201	1932273281	54	Home Medical Equipment	5604002	LINCARE INC	1932273281				
327	$28,071	411310335	EMPI INC		599 CARDIGAN RD		ST PAUL	MN	55126	1174574032	54	Home Medical Equipment	4296001	EMPI INC	1174574032				
595	$27,974	450310462	GO	JASON	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1447475637	11	Internal Medicine	9001	ALTRU HEALTH SYSTEM	1043309552				
366	$27,951	450310159	TRONTVET	SHEILA	164 WEST 13TH STREET		GRAFTON	ND	58237	1629054838	50	Nurse Practitioner	282001	GRAFTON FAMILY CLINIC	1558423665				
460	$27,949	450226558	CARVER	THOMAS	101 3RD AVE SW		MINOT	ND	58701	1275621609	37	Pediatrics	635027	TRINITY MEDICAL GROUP	1083653752				
678	$27,907	450310462	HARGREAVES	JAMES	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1306937107	74	Infectious Diseases	9001	ALTRU HEALTH SYSTEM	1043309552				
577	$27,892	450310462	AHMED	ABDEL	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1184784076	6	Cardivascular Disease	9001	ALTRU HEALTH SYSTEM	1043309552				
233	$27,823	450311334	JOHNSON	STEVEN	401 N 9TH ST		BISMARCK	ND	58501	1477597516	2	General Surgery	236001	MID DAKOTA CLINIC	1275587826				
485	$27,808	450228899	BJORE	ZACHERY	600 1ST STREET SE		MAYVILLE	ND	58257	1831425388	97	Physician Assistant	3076	SANFORD MAYVILLE	1366478760				
20	$27,742	450226700	PERKEREWICZ	KATHLEEN	300 N 7TH ST		BISMARCK	ND	58501	1306958715	16	Obstet/Gynecology	440001	SANFORD MEDICAL CENTER/B	1811941172				
2,217	$27,719	450434251	WALTH	ROBERT	1655 N GRANDVIEW LN	STE 204	BISMARCK	ND	58503	1538204078	35	Chiropractor	1382001	WALTH ROBERT JR DC	1538204078				
460	$27,679	450226558	MATTSON	STEVEN	1500 24TH AVE SW		MINOT	ND	58701	1841388444	11	Internal Medicine	635040	TRINITY MEDICAL GROUP SO	1083653752				
1,345	$27,652	450310462	OMDAHL	BONNIE	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1427140854	30	Radiology	9001	ALTRU HEALTH SYSTEM	1043309552				
1,030	$27,643	450363176	CLEMENSON	STEVEN	1707 GOLD DR S STE 101		FARGO	ND	58103	1174541874	11	Internal Medicine	5595001	INTERNAL MEDICINE ASSOCI	1144313743				
783	$27,622	450457949	KELSEN	MEREDITH	10 9TH AVE E		LISBON	ND	58054	1417932823	50	Nurse Practitioner	1956001	FAMILY MEDICAL CLINIC, P	1952331159				
679	$27,594	261175213	ARYAL	SUIMA	275 11TH ST S		WAHPETON	ND	58075	1881801959	8	Family Practice	6885019	INNOVIS HEALTH, LLC DBA	1790965440				
476	$27,574	450310462	SCHREINER	SHAWN	1200 S COLUMBIA RD		GRAND FORKS	ND	58201	1538229422	30	Radiology	62001	ALTRU HOSPITAL	1154346161				
278	$27,533	411529424	KOLOTKIN	RICHARD	403 CENTER AVE STE 601		MOORHEAD	MN	56560	1841338548	62	Psychology	1352001	KOLOTKIN, RICHARD, PHD	1841338548				
1,031	$27,512	202105497	HORNSTEIN	ANDREA	715 DAKOTA AVE STE 2		WAHPETON	ND	58075	1780758847	35	Chiropractor	6494001	HORNSTEIN FAMILY CHIROPR	1619041670				
364	$27,512	450310462	PODDUTURU	VIKRAM	1300 S COLUMBIA RD		GRAND FORKS	ND	58201	1861584294	25	Physical Medicine and Rehab	232001	ALTRU REHABILITATION CEN	1437248945				
729	$27,509	861123162	PAULO	MONICA	310 N 10TH ST		BISMARCK	ND	58501	1982703849	29	Pulmonary Diseases	6459001	ST ALEXIUS HEART & LUNG	1194823021				
241	$27,502	450226909	RONDEAU	JEFFREY	2400 32ND AVE S		FARGO	ND	58103	1033130257	16	Obstet/Gynecology	7742008	SANFORD SOUTHPOINTE CLIN	1184917924				
665	$27,482	261175213	OVERVOLD	ANGEL	2430 20TH ST SW		JAMESTOWN	ND	58401	1326057043	8	Family Practice	6885018	INNOVIS HEALTH, LLC DBA	1073793725				
185	$27,475	450226700	BRONSON	DAVIS	225 N 7TH ST		BISMARCK	ND	58501	1154367324	24	Plastic Surgery	4061	SANFORD SEVENTH AND THAY	1811941172				
1,072	$27,467	453135520	WEISS	NATHAN	2100 S COLUMBIA RD	STE 114	GRAND FORKS	ND	58201	1518265362	35	Chiropractor	7782001	NEW HORIZON CHIROPRACTIC	1013299882				
412	$27,467	261175213	CLUTTER	DAVID	1702 UNIVERSITY DR S		FARGO	ND	58103	1700802634	37	Pediatrics	6885031	INNOVIS HEALTH, LLC DBA	1255677084				
10	$27,463	911841100	ADVANCED SURGICAL	CENTER	3913 LOCKPORT ST		BISMARCK	ND	58503	1578669354	70	Clinic	1065001	ADVANCED SURGICAL ARTS C	1578669354				
135	$27,354	861123162	RUSSON	TROY	310 N 10TH ST		BISMARCK	ND	58501	1790977957	5	Anesthesiology (MD)	6459001	ST ALEXIUS HEART & LUNG	1194823021				
381	$27,325	450226700	YALAMANCHILI	PRASHANTHI	2830 N WASHINGTON ST		BISMARCK	ND	58503	1639355076	8	Family Practice	4062	SANFORD NORTH CLINIC	1811941172				
41	$27,271	450226700	DANIELSON	CHRISTOPHE	222 N 7TH ST		BISMARCK	ND	58501	1194925891	16	Obstet/Gynecology	4001	SANFORD CLINIC	1811941172				
640	$27,222	261175213	CRIDER	MITCHELL	3000 32ND AVE S		FARGO	ND	58103	1306980875	30	Radiology	6885030	INNOVIS HEALTH, LLC DBA	1578907655				
136	$27,219	450310462	CARCOANA	OLIVIA	1200 S COLUMBIA RD		GRAND FORKS	ND	58201	1093800344	5	Anesthesiology (MD)	62001	ALTRU HOSPITAL	1154346161				
467	$27,158	450310462	SHIMEK	HEATHER	1380 S COLUMBIA RD		GRAND FORKS	ND	58201	1447406129	50	Nurse Practitioner	9021	ALTRU FAMILY MEDICINE CE	1043309552				
1,288	$27,152	450444288	OMDALEN	SCOTT	45 1ST AVE SE		MAYVILLE	ND	58257	1376635755	35	Chiropractor	1210001	OMDALEN CHIROPRACTIC	1346365079				
174	$27,117	450226909	HVIDSTON	ANDREW	2301 S 25TH ST STE A		FARGO	ND	58103	1477505725	20	Orthopedic Surgery	7742011	SANFORD ORTHOPEDICS SPOR	1184917924				
290	$27,097	450226700	IVERSON	CHRISTIE	414 N 7TH ST		BISMARCK	ND	58501	1346251253	16	Obstet/Gynecology	4046	SANFORD SEVENTH AND ROSS	1811941172				
403	$26,998	450226558	CADWALADER	ANN	400 BURDICK EXPY E		MINOT	ND	58701	1922196351	37	Pediatrics	635006	TRINITY MEDICAL GROUP	1083653752				
297	$26,936	450310462	DALMI	ATTILA	1200 S COLUMBIA RD		GRAND FORKS	ND	58201	1932290046	11	Internal Medicine	62001	ALTRU HOSPITAL	1154346161				
583	$26,924	450395652	ALTRU SPECIALTY SE	ES DEVILS	223 4TH AVE NE STE B		DEVILS LAKE	ND	58301	1245534668	54	Home Medical Equipment	7774001	ALTRU SPECIALTY SERVICES	1245534668				
533	$26,917	861123162	MATHEW	BOBAN	310 N 10TH ST		BISMARCK	ND	58501	1548423080	6	Cardivascular Disease	6459001	ST ALEXIUS HEART & LUNG	1194823021				
354	$26,890	861123162	MAHR	NICHOLAS	310 N 10TH ST		BISMARCK	ND	58501	1003923780	6	Cardivascular Disease	6459001	ST ALEXIUS HEART & LUNG	1194823021				
659	$26,874	450321538	DSCHAAK	BRENT	310 N 9TH ST		BISMARCK	ND	58501	1083632939	65	Physical Therapy	188001	THE BONE & JOINT CENTER,	1750307872				
116	$26,777	861123162	CLEARY	WILLIAM	310 N 10TH ST		BISMARCK	ND	58501	1740371855	5	Anesthesiology (MD)	6459001	ST ALEXIUS HEART & LUNG	1194823021				
187	$26,747	450226909	KEUP	CHRISTINE	801 BROADWAY NORTH		FARGO	ND	58102	1083876361	16	Obstet/Gynecology	7742001	SANFORD BROADWAY CLINIC	1184917924				
260	$26,740	450310462	HAMPTON	ARLENE	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1407075708	71	Certified Diabetic Educator	9001	ALTRU HEALTH SYSTEM	1043309552				
68	$26,737	450226909	DAHL	KEVIN	2400 32ND AVE S		FARGO	ND	58103	1356551089	20	Orthopedic Surgery	7742008	SANFORD SOUTHPOINTE CLIN	1184917924				
113	$26,697	450226700	FYFE	IAN	225 N 7TH ST		BISMARCK	ND	58501	1144240532	20	Orthopedic Surgery	4061	SANFORD SEVENTH AND THAY	1811941172				
207	$26,677	911770748	BING	ZHANYONG	801 BROADWAY NORTH		FARGO	ND	58102	1023051810	21	Pathology, Anatomy, Clinical Pathology	3001	SANFORD BROADWAY CLINIC	1942241351				
448	$26,650	450311334	JUELSON	AMY	401 N 9TH ST		BISMARCK	ND	58501	1912032970	37	Pediatrics	236001	MID DAKOTA CLINIC	1275587826				
282	$26,632	911770748	SANFORD PHARMACY B	WAY	737 BROADWAY N		FARGO	ND	58122	1235173519	54	Home Medical Equipment	3085	SANFORD PHARMACY BROADWA	1235173519				
66	$26,604	450226909	HUTCHISON	JOHN	700 1ST AVE S		FARGO	ND	58103	1912937111	14	Neurological Surgery	7742007	SANFORD NEUROSCIENCE CLI	1184917924				
329	$26,576	450226700	NORDENG ZIMMERMANN	RENA	2615 FAIRWAY ST		DICKINSON	ND	58601	1578758926	8	Family Practice	4008	SANFORD HEALTH DICKINSON	1811941172				
1,230	$26,483	208482502	GADER	JODI	1304 EAST BOULEVARD AVE		BISMARCK	ND	58501	1891766697	63	Pharmacy	7159001	JKRX INC DBA THE MEDICIN	1851485262				
49	$26,449	450226700	VINEY	JEANETTE	300 N 7TH ST		BISMARCK	ND	58501	1578662482	2	General Surgery	440001	SANFORD MEDICAL CENTER/B	1811941172				
79	$26,443	450226909	STOVER	DAVID	801 BROADWAY NORTH		FARGO	ND	58102	1932121597	2	General Surgery	7742001	SANFORD BROADWAY CLINIC	1184917924				
572	$26,432	911770748	HOLZWARTH	RYAN	904 5TH AVE NE		JAMESTOWN	ND	58401	1437102324	7	Dermatology	3005	SANFORD HEALTH JAMESTOWN	1942241351				
89	$26,414	450310462	BJORGAARD	BARRY	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1144250226	33	Thoracic Surgery	9001	ALTRU HEALTH SYSTEM	1043309552				
1,094	$26,359	911770748	KEARNS	MARTHA	801 BROADWAY NORTH		FARGO	ND	58102	1649251224	30	Radiology	3001	SANFORD BROADWAY CLINIC	1942241351				
442	$26,358	450226909	GIGSTAD-STAVE	DOREEN	801 BROADWAY NORTH		FARGO	ND	58102	1497772354	97	Physician Assistant	7742001	SANFORD BROADWAY CLINIC	1184917924				
205	$26,274	204874580	MUSE	SHYLA	725 HAMLINE ST		GRAND FORKS	ND	58203	1972756583	62	Psychology	6806001	ASSESSMENT AND THERAPY A	1437181591				
1,299	$26,267	456002069	FARGO CASS PUBLIC	TH	401 3RD AVE N		FARGO	ND	58102	1891879839	60	Public Health or Welfare Agency	7130001	FARGO CASS PUBLIC HEALTH	1891879839				
122	$26,265	861123162	JANKOVIAK	MICHAEL	310 N 10TH ST		BISMARCK	ND	58501	1255422895	5	Anesthesiology (MD)	6459001	ST ALEXIUS HEART & LUNG	1194823021				
342	$26,233	861123162	HERBEL	BRENT	310 N 10TH ST		BISMARCK	ND	58501	1053409086	30	Radiology	6459001	ST ALEXIUS HEART & LUNG	1194823021				
371	$26,226	710880821	RABADI	KHALED	1451 44TH AVE S STE 112D		GRAND FORKS	ND	58201	1639180425	39	Nephrology	5677001	THE KIDNEY AND HYPERTENS	1285742262				

298	$26,212	450226909	KENIEN ERPELDING	JULIE	2701 13TH AVE S		FARGO	ND	58103	1538387253	37	Pediatrics	7742009	SANFORD CHILDRENS SOUTHW	1184917924		
298	$26,176	450226909	HAUGO	AMIE	4000 28TH AVE S		MOORHEAD	MN	56560	1609855873	8	Family Practice	7742014	SANFORD MOORHEAD CLINIC	1184917924		
349	$26,149	450226909	GHAZI	MAJID	1720 UNIVERSITY DR S		FARGO	ND	58103	1689691545	5	Anesthesiology (MD)	7742004	SANFORD SOUTH UNIVERSITY	1184917924		
2,135	$26,141	456002036	BISMARCK BURLEIGH	IC HEALTH	500 E FRONT AVE		BISMARCK	ND	58504	1174599070	60	Public Health or Welfare Agency	4509001	BISMARCK BURLEIGH PUBLIC	1174599070		
135	$26,112	450310462	HAUG	JONATHAN	1200 S COLUMBIA RD		GRAND FORKS	ND	58201	1851482657	5	Anesthesiology (MD)	62001	ALTRU HOSPITAL	1154346161		
143	$26,098	450310462	CHILDS	ROBERT	1200 S COLUMBIA RD		GRAND FORKS	ND	58201	1255580940	5	Anesthesiology (MD)	62001	ALTRU HOSPITAL	1154346161		
376	$26,062	450226558	HUNTER	JENNIFER	1500 24TH AVE SW		MINOT	ND	58701	1295822146	7	Dermatology	635040	TRINITY MEDICAL GROUP SO	1083653752		
241	$26,056	450231183	KEENE	ROXANNE	1213 15TH AVE W		WILLISTON	ND	58801	1184661118	20	Orthopedic Surgery	711001	CRAVEN-HAGAN/MERCY MEDIC	1760549000		
278	$26,050	450231183	MACUGA	MICHAEL	1301 15TH AVE W		WILLISTON	ND	58801	1750351748	72	Emergency Medicine	142001	MERCY MEDICAL/HOSPITAL E	1720194624		
1,450	$25,983	450310462	AAFEDT	BRADLEY	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1639272438	30	Radiology	9001	ALTRU HEALTH SYSTEM	1043309552		
297	$25,933	450226700	FAIRBAIRN	THOMAS	715 E BROADWAY AVE		BISMARCK	ND	58501	1982702619	72	Emergency Medicine	4050	SANFORD SEVENTH AND BROA	1811941172		
128	$25,916	450226909	BAILEY	DAVID	2301 S 25TH ST STE A		FARGO	ND	58103	1639197338	40	Hand Surgery	7742011	SANFORD ORTHOPEDICS SPOR	1184917924		
84	$25,915	450226909	KUBALAK	GARY	801 BROADWAY NORTH		FARGO	ND	58102	1649297318	2	General Surgery	7742001	SANFORD BROADWAY CLINIC	1184917924		
855	$25,914	911770748	ANDERSON	MISTY	520 CHAUTAUQUA BLVD		VALLEY CITY	ND	58072	1417109760	11	Internal Medicine	3002	SANFORD HEALTH VALLEY CI	1942241351		
1,406	$25,857	450311334	LERVICK	JESSICA	2700 STATE ST		BISMARCK	ND	58503	1184801045	65	Physical Therapy	236006	MID DAKOTA CLINIC - GATE	1275587826		
131	$25,800	450311334	YEARSLEY	STEVEN	401 N 9TH ST		BISMARCK	ND	58501	1720131451	24	Plastic Surgery	236001	MID DAKOTA CLINIC	1275587826		
564	$25,762	450310462	NIELSEN	A MARC	725 HAMLINE ST		GRAND FORKS	ND	58203	1063430122	8	Family Practice	9009	ALTRU FAMILY MEDICINE RE	1043309552		
561	$25,705	911770748	NYGAARD	JESSICA	300 2ND AVE NE		JAMESTOWN	ND	58401	1013144773	50	Nurse Practitioner	3090	SANFORD HEALTH 2ND AVE C	1942241351		
229	$25,689	900763539	FRISK	JAMES	800 NORTH 4TH ST		CARRINGTON	ND	58421	1871651943	4	Otology, Laryngology, Rhinology	7778002	PLAINS EAR NOSE THROAT &	1003199829		
767	$25,653	911770748	KREITER	CANDACE	300 2ND AVE NE		JAMESTOWN	ND	58401	1699871061	50	Nurse Practitioner	3090	SANFORD HEALTH 2ND AVE C	1942241351		
319	$25,653	204129496	WOOLSEY	DIANE	2951 34TH ST S		GRAND FORKS	ND	58201	1285716571	66	Speech Therapy	6775001	LITTLE MIRACLES, INC	1821110982		
194	$25,633	450226700	CARPENTER	MATTHEW	225 N 7TH ST		BISMARCK	ND	58501	1154532547	20	Orthopedic Surgery	4061	SANFORD SEVENTH AND THAY	1811941172		
1,350	$25,595	456004376	SOUTHWESTERN DISTR	HEALTH	609 2 AVE NORTH	PO BOX 227	HETTINGER	ND	58639	1346468808	60	Public Health or Welfare Agency	4526002	SOUTHWESTERN DISTRICT HE	1346468808		
390	$25,513	450425948	COX	AMY	425 S COLLEGE DR STE 14		DEVILS LAKE	ND	58301	1609803394	50	Nurse Practitioner	398004	TOWNER COUNTY MEDICAL CE	1194745935		
721	$25,486	450310462	ANDERSON	MARIE	1003 N MAIN ST		DRAYTON	ND	58225	1154412518	50	Nurse Practitioner	9014	ALTRU DRAYTON	1043309552		
730	$25,474	450226558	LEWIS	SCOTT	1 BURDICK EXPY W		MINOT	ND	58701	1679663744	30	Radiology	635032	TRINITY MEDICAL GROUP	1083653752		
12	$25,378	450310462	SETNESS HOEFS	TANA	1200 S COLUMBIA RD		GRAND FORKS	ND	58201	1083700348	16	Obstet/Gynecology	62001	ALTRU HOSPITAL	1154346161		
343	$25,352	450226558	PETERSON	DIANA	400 BURDICK EXPY E		MINOT	ND	58701	1811068950	37	Pediatrics	635006	TRINITY MEDICAL GROUP	1083653752		
85	$25,340	450226700	BOCK	STEVEN	222 N 7TH ST		BISMARCK	ND	58501	1194850867	2	General Surgery	4001	SANFORD CLINIC	1811941172		
834	$25,287	450422119	PIRKL	ERIN	33 9TH ST W		DICKINSON	ND	58601	1760662571	97	Physician Assistant	231001	GREAT PLAINS CLINIC, PC	1720075377		
108	$25,279	450226909	MISTRY	BHARGAV	736 BROADWAY N		FARGO	ND	58102	1033136676	2	General Surgery	7742022	SANFORD BROADWAY MEDICAL	1184917924		
891	$25,264	456002491	NYBAKKEN	MARY	701 E ROSSER		BISMARCK	ND	58501	1013163963	8	Family Practice	102001	CENTER FOR FAMILY MEDICI	1619905528		
378	$25,235	450226909	HEGGE	ERIN	4656 40TH AVE S		FARGO	ND	58104	1609894344	97	Physician Assistant	7742010	SANFORD DERMATOLOGY & LA	1184917924		
339	$25,217	450226700	SEIBEL	MELISSA	765 W INTERSTATE AVE		BISMARCK	ND	58503	1477735926	37	Pediatrics	4072	SANFORD CHILDREN'S NORTH	1811941172		
457	$25,210	450311334	GRENZ	DON	2700 STATE ST		BISMARCK	ND	58503	1699720995	11	Internal Medicine	236006	MID DAKOTA CLINIC - GATE	1275587826		
144	$25,192	450226700	JONES	MARSHALL	300 N 7TH ST		BISMARCK	ND	58501	1285821645	5	Anesthesiology (MD)	440001	SANFORD MEDICAL CENTER/B	1811941172		
273	$25,173	450226700	MARTIN	HEATHER	2615 FAIRWAY ST		DICKINSON	ND	58601	1760610638	8	Family Practice	4008	SANFORD HEALTH DICKINSON	1811941172		
332	$25,168	450310462	KARTHAM	SUNIL	1200 S COLUMBIA RD		GRAND FORKS	ND	58201	1225228836	11	Internal Medicine	62001	ALTRU HOSPITAL	1154346161		
199	$25,122	450310462	RICHARDSON	SHOSHONE	1200 S COLUMBIA RD		GRAND FORKS	ND	58201	1477666881	72	Emergency Medicine	62001	ALTRU HOSPITAL	1154346161		
405	$25,105	450227311	SCHAFFER	TODD	820 5TH ST N		CARRINGTON	ND	58421	1063499879	8	Family Practice	507001	FOSTER COUNTY MEDICAL CE	1558389338		
145	$25,074	450226700	RUSSELL	SEAN	222 N 7TH ST		BISMARCK	ND	58501	1750493052	33	Thoracic Surgery	4001	SANFORD CLINIC	1811941172		
368	$25,013	450226909	BRANCA	AUTUMN	2601 BROADWAY N		FARGO	ND	58102	1275763955	97	Physician Assistant	7742003	SANFORD NORTH FARGO CLIN	1184917924		
333	$24,979	450231183	GRORUD	JANE	1213 15TH AVE W		WILLISTON	ND	58801	1386664696	37	Pediatrics	711001	CRAVEN-HAGAN/MERCY MEDIC	1760549000		
613	$24,970	456002491	STRIPE	STEPHEN	1201 11TH AVE SW		MINOT	ND	58701	1366540098	8	Family Practice	78001	CENTER FOR FAMILY MEDICI	1316008238		
1,511	$24,947	202387240	REMILLARD	KELLY	1122 DIVIDE AVE W		BISMARCK	ND	58501	1922117670	35	Chiropractor	6506001	REMILLARD PC DBA FOCUS C	1477740199		
109	$24,924	861123162	KLEIN	SCOTT	310 N 10TH ST		BISMARCK	ND	58501	1801994710	5	Anesthesiology (MD)	6459001	ST ALEXIUS HEART & LUNG	1194823021		
136	$24,898	450231183	VIBETO	BRETT	1213 15TH AVE W		WILLISTON	ND	58801	1891721841	2	General Surgery	711001	CRAVEN-HAGAN/MERCY MEDIC	1760549000		
1,486	$24,885	450318954	CENTRAL VALLEY HLT	IT	122 2ND STREET NW		JAMESTOWN	ND	58401	1902846462	60	Public Health or Welfare Agency	4473001	CENTRAL VALLEY HEALTH UN	1902846462		
76	$24,868	450226711	PATEL	MAHESH	900 E BROADWAY AVE		BISMARCK	ND	58501	1578648325	37	Pediatrics	501001	ST ALEXIUS MEDICAL CENTE	1205868429		
311	$24,854	450226909	STEGMILLER	DANA	2400 32ND AVE S		FARGO	ND	58103	1003837220	97	Physician Assistant	7742008	SANFORD SOUTHPOINTE CLIN	1184917924		
223	$24,841	450310462	KNECHT	TONY	1200 S COLUMBIA RD		GRAND FORKS	ND	58201	1568553360	72	Emergency Medicine	62001	ALTRU HOSPITAL	1154346161		
190	$24,773	450387077	WITUCKI	MARTY	2808 17TH AVE S		GRAND FORKS	ND	58201	1477587772	62	Psychology	203001	LIPP CARLSON LOMMEN & WI	1043316961		
592	$24,771	911770748	BRAUN	LISA	332 2ND AVE N		WAHPETON	ND	58075	1720075666	97	Physician Assistant	3016	SANFORD HEALTH WAHPETON	1942241351		
327	$24,767	450226909	ATCHISON	MICHELLE	1717 SOUTH UNIVERSITY DR		FARGO	ND	58103	1659563039	18	Opthalmology	7742027	SANFORD 1717 MEDICAL BUI	1184917924		
904	$24,754	261175213	RODGERS-RIEGER	ELENA	1702 UNIVERSITY DR S		FARGO	ND	58103	1972657120	21	Pathology, Anatomy, Clinical Pathology	6885031	INNOVIS HEALTH, LLC DBA	1255677084		
324	$24,738	450226558	JONES	FREDERICK	400 BURDICK EXPY E		MINOT	ND	58701	1013004969	37	Pediatrics	635006	TRINITY MEDICAL GROUP	1083653752		
503	$24,736	456002491	LUGER	JOSEPH	701 E ROSSER		BISMARCK	ND	58501	1174577332	7	Dermatology	102001	CENTER FOR FAMILY MEDICI	1619905528		
1,434	$24,681	450310462	COOLEY	A. MARVIN	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1710078720	22	Pathology, Anatomy, Clinical Pathology	9001	ALTRU HEALTH SYSTEM	1043309552		
297	$24,576	450226909	WALKER	DEBRA	2400 32ND AVE S		FARGO	ND	58103	1396903654	8	Family Practice	7742008	SANFORD SOUTHPOINTE CLIN	1184917924		
469	$24,572	450226711	RADUCU	RADU	900 E BROADWAY AVE		BISMARCK	ND	58501	1588847578	11	Internal Medicine	501001	ST ALEXIUS MEDICAL CENTE	1205868429		
385	$24,499	911770748	OWENS	ANN	315 E CALEDONIA AVE		HILLSBORO	ND	58045	1013935600	97	Physician Assistant	3010	SANFORD HEALTH HILLSBORO	1942241351		
371	$24,491	450226909	REESE	JUDITH	4656 40TH AVE S		FARGO	ND	58104	1932126919	97	Physician Assistant	7742010	SANFORD DERMATOLOGY & LA	1184917924		
24	$24,491	450226909	DYKE	CORNELIUS	801 BROADWAY NORTH		FARGO	ND	58102	1245226083	2	General Surgery	7742001	SANFORD BROADWAY CLINIC	1184917924		
204	$24,491	911770748	BING	ZHANYONG	1720 UNIVERSITY DR S		FARGO	ND	58103	1023051810	21	Pathology, Anatomy, Clinical Pathology	3904	SANFORD SOUTH UNIVERSITY	1942241351		
1,141	$24,482	911770748	MITCHELL	STEVEN	801 BROADWAY NORTH		FARGO	ND	58102	1588682165	30	Radiology	3001	SANFORD BROADWAY CLINIC	1942241351		
225	$24,474	450310462	KHAN	ZAKI	1200 S COLUMBIA RD		GRAND FORKS	ND	58201	1700058849	11	Internal Medicine	62001	ALTRU HOSPITAL	1154346161		

171	$24,458	450226700	ARNDORFER	RICHARD	414 N 7TH ST		BISMARCK	ND	58501	1174586697	62	Psychology	4046	SANFORD SEVENTH AND ROSS	1811941172		
601	$24,385	450310462	ADAMS	ALLISON	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1124119920	97	Physician Assistant	9001	ALTRU HEALTH SYSTEM	1043309552		
804	$24,382	450435498	BOSSART	THOMAS	1815 SOUTH UNIVERSITY DR		FARGO	ND	58103	1467471714	35	Chiropractor	1189001	BOSSART CHIROPRACTIC	1659563310		
735	$24,362	861123162	KRIENGKRAIRUT	SOMSAK	310 N 10TH ST		BISMARCK	ND	58501	1487752390	29	Pulmonary Diseases	6459001	ST ALEXIUS HEART & LUNG	1194823021		
311	$24,342	450422821	MUELLER	KAREN	400 E BROADWAY STE 611		BISMARCK	ND	58501	1740377043	80	Clinical Social Worker	1653001	MUELLER, KAREN, LICSW	1740377043		
440	$24,306	861123162	ILIE	CAMELIA	310 N 10TH ST		BISMARCK	ND	58501	1851565022	6	Cardivascular Disease	6459001	ST ALEXIUS HEART & LUNG	1194823021		
676	$24,242	450310462	BROWN	ANN	1200 S COLUMBIA RD		GRAND FORKS	ND	58201	1588761365	22	Pathology, Anatomy, Clinical Pathology	62001	ALTRU HOSPITAL	1154346161		
496	$24,240	450226558	PERCELL	ROBERT	400 BURDICK EXPY E		MINOT	ND	58701	1316025505	6	Cardivascular Disease	635006	TRINITY MEDICAL GROUP	1083653752		
850	$24,231	450363176	HELLA	BRENT	1707 GOLD DR S STE 101		FARGO	ND	58103	1245286988	11	Internal Medicine	5595001	INTERNAL MEDICINE ASSOCI	1144313743		
182	$24,230	450226700	HATLESTAD	DAVIN	300 N 7TH ST		BISMARCK	ND	58501	1609989268	72	Emergency Medicine	440001	SANFORD MEDICAL CENTER/B	1811941172		
610	$24,220	450310462	GORDER	VICKI	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1467543470	97	Physician Assistant	9001	ALTRU HEALTH SYSTEM	1043309552		
272	$24,184	450226700	ORSER	SHARI	414 N 7TH ST		BISMARCK	ND	58501	1932211323	16	Obstet/Gynecology	4046	SANFORD SEVENTH AND ROSS	1811941172		
920	$24,175	204178304	VOLLMERS	ALICIA	1401 SKYLINE BLVD	STE 240	BISMARCK	ND	58503	1760425037	35	Chiropractor	6782001	TOTAL WELLNESS CHIROPRAC	1750508123		
400	$24,136	261175213	QUANRUD	MYRA	2430 20TH ST SW		JAMESTOWN	ND	58401	1598705758	37	Pediatrics	6885018	INNOVIS HEALTH, LLC DBA	1073793725		
57	$24,127	450226711	BROWN	KAREN	900 E BROADWAY AVE		BISMARCK	ND	58501	1821180282	37	Pediatrics	501007				
276	$24,085	450310462	SAMIMIAN TEHRANI	PEZHMAN	1200 S COLUMBIA RD		GRAND FORKS	ND	58201	1770744880	11	Internal Medicine	62001	ALTRU HOSPITAL	1154346161		
365	$24,082	450226909	DAHL	BRUCE	1220 SHEYENNE ST		WEST FARGO	ND	58078	1801814546	8	Family Practice	7742013	SANFORD WEST FARGO CLINI	1184917924		
1,332	$24,022	261337706	WEIGEL	SARA	535 S 7TH ST		BISMARCK	ND	58504	1255417226	35	Chiropractor	7063001	ACTIVE LIFE CHIROPRACTIC	1609059377		
88	$23,956	450310462	MALLIPADDI	PRAMOD	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1083817886	37	Pediatrics	9001	ALTRU HEALTH SYSTEM	1043309552		
246	$23,900	450226909	KNUTSON BUELING	ROBYN	2601 BROADWAY N		FARGO	ND	58102	1497921308	96	#N/A	7742003	SANFORD NORTH FARGO CLIN	1184917924		
541	$23,879	450226700	TELLO	RONALD	222 N 7TH ST		BISMARCK	ND	58501	1538267299	11	Internal Medicine	4001	SANFORD CLINIC	1811941172		
642	$23,876	450369255	TELLO	TIMOTHY	1221 W DIVIDE AVE		BISMARCK	ND	58501	1346348000	41	Optometrist	1040001	EYE CENTER OF THE DAKOTA	1548360761		
599	$23,822	460478304	DUNKEL	SHARON	1711 GOLD DRIVE S #160		FARGO	ND	58103	1053509273	50	Nurse Practitioner	5709001	INDEPENDENT FAMILY DOCTO	1659477149		
719	$23,800	450310462	HAASTRUP	ADETOLA	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1932174588	39	Nephrology	9001	ALTRU HEALTH SYSTEM	1043309552		
406	$23,793	450310462	MISHRA	RAMESH	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1487967212	37	Pediatrics	9001	ALTRU HEALTH SYSTEM	1043309552		
217	$23,789	450387077	KING	BRENDA	2808 17TH AVE S		GRAND FORKS	ND	58201	1598799892	62	Psychology	203001	LIPP CARLSON LOMMEN & WI	1043316961		
350	$23,778	43604495	BLOCK	TERRY	1401 13TH AVE E		WEST FARGO	ND	58078	1538192232	26	Psychiatry (MD)	5635001	KNOWLTON ONEILL & ASSOCI	1538198759		
1,064	$23,739	203271938	VAN DAM	SCOTT	2701 9TH AVE SW STE 800		FARGO	ND	58103	1750343877	35	Chiropractor	6315001	VAN DAM CHIROPRACTIC PC	1750343877		
58	$23,722	450226700	BERGLUND	DOUGLAS	300 N 7TH ST		BISMARCK	ND	58501	1396708418	2	General Surgery	440001	SANFORD MEDICAL CENTER/B	1811941172		
797	$23,681	260039525	THOMSEN	BRADLEY	1425 S COLUMBIA RD STE 3		GRAND FORKS	ND	58201	1801888342	35	Chiropractor	5636001	RED RIVER FAMILY CHIROPR	1033395280		
551	$23,658	450226711	KITZMAN	ANNIE	2700 8TH ST NW		MINOT	ND	58703	1962759464	50	Nurse Practitioner	501016	ST ALEXIUS CLINIC	1205868429		
133	$23,619	450226909	ALBRECHT	WARREN	801 BROADWAY NORTH		FARGO	ND	58102	1134146129	2	General Surgery	7742001	SANFORD BROADWAY CLINIC	1184917924		
252	$23,597	450226700	ZIMNY	MATTHEW	300 N 7TH ST		BISMARCK	ND	58501	1669636205	72	Emergency Medicine	440001	SANFORD MEDICAL CENTER/B	1811941172		
362	$23,576	450226909	ARNESS	RICHARD	2400 32ND AVE S		FARGO	ND	58103	1902824600	48	Podiatry, Surgical chiropody	7742008	SANFORD SOUTHPOINTE CLIN	1184917924		
484	$23,548	450310462	BYERS	NORMAN	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1205933082	18	Opthalmology	9001	ALTRU HEALTH SYSTEM	1043309552		
452	$23,534	911770748	BRICKNER	DEREK	300 2ND AVE NE		JAMESTOWN	ND	58401	1346405602	8	Family Practice	3090	SANFORD HEALTH 2ND AVE C	1942241351		
184	$23,529	450310462	TEMPLE	KEVIN	1200 S COLUMBIA RD		GRAND FORKS	ND	58201	1417043779	72	Emergency Medicine	62001	ALTRU HOSPITAL	1154346161		
175	$23,506	274361413	KENNEY	EMMET	3201 33RD ST S		FARGO	ND	58104	1902998081	26	Psychiatry (MD)	7702001	ST SOPHIES LLC	1336443654		
332	$23,451	731653027	VIRDEE	HARJINDER	2704 N BROADWAY STE C		FARGO	ND	58102	1134260482	26	Psychiatry (MD)	5737001	FARGO PSYCHIATRIC CLINIC	1396915120		
284	$23,424	450310462	ESPRIT	LORI	860 S COLUMBIA RD		GRAND FORKS	ND	58201	1548572688	26	Psychiatry (MD)	9024	ALTRU PSYCHIATRIC CENTER	1043309552		
202	$23,419	450310462	JOHNSON	JOEL	1200 S COLUMBIA RD		GRAND FORKS	ND	58201	1295826097	72	Emergency Medicine	62001	ALTRU HOSPITAL	1154346161		
1,193	$23,413	450310462	HAGEN	WILLIAM	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1639260649	30	Radiology	9001	ALTRU HEALTH SYSTEM	1043309552		
361	$23,409	450226909	CAIN	KRISTEN	1111 HARWOOD DR		FARGO	ND	58104	1932185451	73	Endocrinology	7742012	SANFORD REPRODUCTIVE MED	1184917924		
274	$23,396	450226700	SKAGER	TANYA	2615 FAIRWAY ST		DICKINSON	ND	58601	1851331656	8	Family Practice	4008	SANFORD HEALTH DICKINSON	1811941172		
1,116	$23,378	275414185	JOHNSON	ERIC	718 OAK ST		GRAND FORKS	ND	58201	1104917905	8	Family Practice	7707001	WELCORE HEALTH, LLC	1760780126		
792	$23,356	450231181	REDDY	MADHUSUDHA	2422 20TH ST SW		JAMESTOWN	ND	58401	1639389133	30	Radiology	496001	JAMESTOWN REGIONAL MEDIC	1700038981		
299	$23,353	450226909	MARTINDALE	DONALD	4000 28TH AVE S		MOORHEAD	MN	56560	1841222031	8	Family Practice	7742014	SANFORD MOORHEAD CLINIC	1184917924		
1,071	$23,351	450422119	WOLF	DENNIS	33 9TH ST W		DICKINSON	ND	58601	1205823846	8	Family Practice	231001	GREAT PLAINS CLINIC, PC	1720075377		
557	$23,347	450321538	SULLIVAN	TERRI	310 N 9TH ST		BISMARCK	ND	58501	1295757698	67	Occupational Therapy	188001	THE BONE & JOINT CENTER,	1750307872		
687	$23,274	263031507	HALLGREN	STACY	4350 S WASHINGTON ST	STE 100	GRAND FORKS	ND	58201	1407036627	35	Chiropractor	7138001	PERFORMANCE CHIROPRACTIC	1720237258		
188	$23,265	450321538	MOORE	MICHAEL	310 N 9TH ST		BISMARCK	ND	58501	1871515387	20	Orthopedic Surgery	188001	THE BONE & JOINT CENTER,	1750307872		
326	$23,252	450226909	JONES	CORWIN	2400 32ND AVE S		FARGO	ND	58103	1932126604	97	Physician Assistant	7742008	SANFORD SOUTHPOINTE CLIN	1184917924		
142	$23,240	450226700	JARAMILLO	DIOSDADO	300 N 7TH ST		BISMARCK	ND	58501	1114129103	5	Anesthesiology (MD)	440001	SANFORD MEDICAL CENTER/B	1811941172		
94	$23,236	202404179	SANFORD HEALTHCARE	ESSORIES F	3223 32ND AVE S		FARGO	ND	58103	1770527590	79	Home Infusion	3303001	SANFORD HEALTHCARE ACCES	1770527590		
522	$23,216	261175213	REGMI	SUMAN	275 11TH ST S		WAHPETON	ND	58075	1629285531	8	Family Practice	6885019	INNOVIS HEALTH, LLC DBA	1790965440		
1,387	$23,193	450452160	WINKLER	CAROL	1431 INTERSTATE LOOP		BISMARCK	ND	58503	1952487498	35	Chiropractor	1658001	WINKLER CHIROPRACTIC, PC	1285966192		
55	$23,172	450226909	TRAYNOR	MICHAEL	801 BROADWAY NORTH		FARGO	ND	58102	1841212412	2	General Surgery	7742001	SANFORD BROADWAY CLINIC	1184917924		
77	$23,103	450226909	BELLAS	WILLIAM	801 BROADWAY NORTH		FARGO	ND	58102	1487672184	37	Pediatrics	7742001	SANFORD BROADWAY CLINIC	1184917924		
160	$23,097	450310462	GARDNER	JEREMY	1300 S COLUMBIA RD		GRAND FORKS	ND	58201	1881886497	20	Orthopedic Surgery	232001	ALTRU REHABILITATION CEN	1437248945		
957	$23,091	202987449	CHURCHILL	STEPHEN	2945 N 11 ST		BISMARCK	ND	58503	1407807464	65	Physical Therapy	6697001	DSJ ENTERPRISES, LLC DBA	1447200373		
635	$23,087	861058655	DOCKTER	REBECCA	430 5TH ST N		BRECKENRIDGE	MN	56520	1902009491	65	Physical Therapy	5909001	ORTHOPEDIC AND SPORTS PH	1811923535		
105	$23,077	450226700	CAVE	JEFFREY	300 N 7TH ST		BISMARCK	ND	58501	1730109885	5	Anesthesiology (MD)	440001	SANFORD MEDICAL CENTER/B	1811941172		
230	$23,055	450226909	LIEN	SARAH	2701 13TH AVE S		FARGO	ND	58103	1750309324	37	Pediatrics	7742009	SANFORD CHILDRENS SOUTHW	1184917924		
115	$23,049	521486235	HANGER PROSTHETICS	ORTHOTICS	3003 32ND AVE S STE 102		FARGO	ND	58103	1295809184	54	Home Medical Equipment	1767002	HANGER PROSTHETICS AND O	1295809184		
242	$23,047	450451306	SKJOLDEN	JESSICA	314 OHMER ST		BOTTINEAU	ND	58318	1285845917	8	Family Practice	1262001	ST ANDREWS BOTTINEAU CLI	1902803802		
240	$23,037	450446509	BELL	LLOYD	601 18TH AVE SE STE 101		MINOT	ND	58701	1386681682	26	Psychiatry (MD)	746001	PSYCHIATRIC SERVICES PC	1477508034		

761	$23,015	911770748	MISLAN	GARRY	332 2ND AVE N		WAHPETON	ND	58075	1770504011	8	Family Practice	3016	SANFORD HEALTH WAHPETON	1942241351		
413	$22,996	450226711	ARTHURS	SUPHA	900 E BROADWAY AVE		BISMARCK	ND	58501	1790765865	74	Infectious Diseases	501001	ST ALEXIUS MEDICAL CENTE	1205868429		
260	$22,965	450428323	RODENBIKER	HAROLD	100 4TH ST S STE 612		FARGO	ND	58103	1043308372	18	Opthalmology	488001	FERCHO CATARACT & EYE CL	1447348602		
314	$22,928	450430824	KLUG	MARNA	2315 LIBRARY CIRCLE		GRAND FORKS	ND	58201	1477758845	88	#N/A	1300001	NORTHLAND CHRISTIAN COUN	1215131016		
1,011	$22,849	450310462	LEIPHON	KELLY	1001 7TH ST		DEVILS LAKE	ND	58301	1952699282	50	Nurse Practitioner	9027	ALTRU CLINIC LAKE REGION	1861581373		
126	$22,827	760215922	CORAM HEALTHCARE I		2901 FRONTAGE ROAD S	HWY 10 E STE 7	MOORHEAD	MN	56560	1780614461	79	Home Infusion	4564001	CORAM ALTERNATE SITE SER	1780614461		
322	$22,820	450310462	BREWSTER	EARL	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1356513261	16	Obstet/Gynecology	9001	ALTRU HEALTH SYSTEM	1043309552		
691	$22,784	450457949	TANNER	KATIE	10 9TH AVE E		LISBON	ND	58054	1225013634	97	Physician Assistant	1956001	FAMILY MEDICAL CLINIC, P	1952331159		
487	$22,741	911770748	BUHR	JAMES	520 CHAUTAUQUA BLVD		VALLEY CITY	ND	58072	1013935782	8	Family Practice	3002	SANFORD HEALTH VALLEY CI	1942241351		
170	$22,739	450226909	CHAITHONGDI	NIYUTCHAI	2400 32ND AVE S		FARGO	ND	58103	1952502700	73	Endocrinology	7742008	SANFORD SOUTHPOINTE CLIN	1184917924		
924	$22,710	264342787	FELDNER	BRAD	300 45TH ST S STE 315		FARGO	ND	58103	1861693038	35	Chiropractor	7340001	PURE CHIROPRACTIC & REHA	1770727703		
124	$22,708	450226909	KHAN	HASRAT	801 BROADWAY NORTH		FARGO	ND	58102	1699752964	11	Internal Medicine	7742001	SANFORD BROADWAY CLINIC	1184917924		
385	$22,668	450226909	BHUNIA	KAUSHIK	801 BROADWAY NORTH		FARGO	ND	58102	1043404585	11	Internal Medicine	7742001	SANFORD BROADWAY CLINIC	1184917924		
195	$22,656	450226700	DOPPLER	MATTHEW	414 N 7TH ST		BISMARCK	ND	58501	1952404659	62	Psychology	4046	SANFORD SEVENTH AND ROSS	1811941172		
300	$22,602	450226700	CASTER	AMBER	222 N 7TH ST		BISMARCK	ND	58501	1053692566	50	Nurse Practitioner	4001	SANFORD CLINIC	1811941172		
236	$22,599	450226700	BALVITSCH	JESSICA	414 N 7TH ST		BISMARCK	ND	58501	1043316524	50	Nurse Practitioner	4046	SANFORD SEVENTH AND ROSS	1811941172		
1,034	$22,585	261625635	ROLOFF	JOEL	2000 N 19TH ST		BISMARCK	ND	58501	1750566840	35	Chiropractor	7106001	ADJUST LIFE	1346411873		
61	$22,518	450226558	EICHLER	MARC	20 BURDICK EXPRESSWAY W		MINOT	ND	58701	1881677235	14	Neurological Surgery	635029	TRINITY MEDICAL GROUP	1083653752		
276	$22,509	205749003	HAY	CHELSEA	1303 E CENTRAL AVE		BISMARCK	ND	58501	1013277664	66	Speech Therapy	6880001	RED DOOR PEDIATRIC THERA	1639257033		
256	$22,508	205749003	ARNT	HEATHER	1303 E CENTRAL AVE		BISMARCK	ND	58501	1538287305	66	Speech Therapy	6880001	RED DOOR PEDIATRIC THERA	1639257033		
489	$22,472	911770748	EMERY	PATRICK	332 2ND AVE N		WAHPETON	ND	58075	1144247008	8	Family Practice	3016	SANFORD HEALTH WAHPETON	1942241351		
311	$22,387	450226909	DAHL	STEPHANIE	1111 HARWOOD DR		FARGO	ND	58104	1265545784	16	Obstet/Gynecology	7742012	SANFORD REPRODUCTIVE MED	1184917924		
452	$22,349	371616627	YUNKER	JEFFERY	2900 S COLUMBIA RD		GRAND FORKS	ND	58201	1821065335	41	Optometrist	7686001	LVCTR, PC DBA LIFETIME V	1720385263		
446	$22,290	450226700	LUNN	GERRY	209 7 ST N		BISMARCK	ND	58501	1548372196	11	Internal Medicine	4048	SANFORD SEVENTH AND THAY	1811941172		
13	$22,281	450310462	WILDEY	BRIAN	1200 S COLUMBIA RD		GRAND FORKS	ND	58201	1578754388	16	Obstet/Gynecology	62001	ALTRU HOSPITAL	1154346161		
158	$22,277	450226909	MUNOZ	JUAN	2400 32ND AVE S		FARGO	ND	58103	1194742635	73	Endocrinology	7742008	SANFORD SOUTHPOINTE CLIN	1184917924		
285	$22,255	201278075	ANVINSON	NICOLE	1407 24TH AVE S STE 520		GRAND FORKS	ND	58201	1518923994	97	Physician Assistant	6359001	AGASSIZ ASSOCIATES, PLLC	1700972122		
815	$22,243	203276091	SEFCIK	CHARLES	1023 EAST CAPITOL AVE		BISMARCK	ND	58501	1578642781	35	Chiropractor	6643001	LIFE ENHANCEMENT CLINIC,	1578642781		
1,101	$22,220	911751184	FREIJE	BONNIE	204 COLLEGE DR N		DEVILS LAKE	ND	58301	1265430466	35	Chiropractor	1029001	FREIJE CHIROPRACTIC CENT	1417155342		
261	$22,201	450226909	KENNEDY	GARY	2400 32ND AVE S		FARGO	ND	58103	1578585063	8	Family Practice	7742008	SANFORD SOUTHPOINTE CLIN	1184917924		
234	$22,193	450226700	HINTZ	KADON	300 N 7TH ST		BISMARCK	ND	58501	1245437730	72	Emergency Medicine	440001	SANFORD MEDICAL CENTER/B	1811941172		
628	$22,183	450310462	LAUZON	CHRISTINE	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1225268469	50	Nurse Practitioner	9001	ALTRU HEALTH SYSTEM	1043309552		
288	$22,178	450226909	CAMPBELL	ROBERT	4000 28TH AVE S		MOORHEAD	MN	56560	1013935758	8	Family Practice	7742014	SANFORD MOORHEAD CLINIC	1184917924		
192	$22,143	450310462	JOHNSON	ROBERT	1300 S COLUMBIA RD		GRAND FORKS	ND	58201	1013008812	20	Orthopedic Surgery	232001	ALTRU REHABILITATION CEN	1437248945		
464	$22,138	911770748	MATHISON	DAVID	300 2ND AVE NE		JAMESTOWN	ND	58401	1295847861	8	Family Practice	3090	SANFORD HEALTH 2ND AVE C	1942241351		
250	$22,130	208976315	GROMMESH	KELSEY	3001 11TH ST S		FARGO	ND	58103	1699063461	66	Speech Therapy	5881001	BEYOND BOUNDARIES SPEECH	1790999605		
154	$22,106	450226909	ELLIOTT	CLARK	801 BROADWAY NORTH		FARGO	ND	58102	1871540567	4	Otology, Laryngology, Rhinology	7742001	SANFORD BROADWAY CLINIC	1184917924		
796	$22,103	861123162	DIEDE	STANLEY	310 N 10TH ST		BISMARCK	ND	58501	1366533382	6	Cardivascular Disease	6459001	ST ALEXIUS HEART & LUNG	1194823021		
298	$22,082	450226909	ANDERSON	BRAD	2400 32ND AVE S		FARGO	ND	58103	1649298381	48	Podiatry, Surgical chiropody	7742008	SANFORD SOUTHPOINTE CLIN	1184917924		
645	$22,070	450363176	HANSON	SUSAN	1707 GOLD DR S STE 101		FARGO	ND	58103	1114966751	97	Physician Assistant	5595001	INTERNAL MEDICINE ASSOCI	1144313743		
365	$22,056	470757739	ASH	CORY	683 STATE AVE STE B		DICKINSON	ND	58601	1831290311	65	Physical Therapy	1985001	OMAHA THERAPY INC. DBA R	1730280371		
590	$22,022	450231183	WIENS	GLENN	1213 15TH AVE W		WILLISTON	ND	58801	1316971567	8	Family Practice	711001	CRAVEN-HAGAN/MERCY MEDIC	1760549000		
17	$21,999	450226700	O'REGAN	DAVID	300 N 7TH ST		BISMARCK	ND	58501	1609988088	20	Orthopedic Surgery	440001	SANFORD MEDICAL CENTER/B	1811941172		
1,309	$21,998	450348068	REDINGTON	DEAN	1001 20TH AVE SW		MINOT	ND	58701	1891720231	35	Chiropractor	1214001	CHIROPRACTIC ARTS CLINIC	1679604755		
650	$21,984	911770748	DAHL	BENJAMIN	1720 UNIVERSITY DR S		FARGO	ND	58103	1558565762	30	Radiology	3904	SANFORD SOUTH UNIVERSITY	1942241351		
104	$21,966	450226909	ORSON	GREGORY	2400 32ND AVE S		FARGO	ND	58103	1932130036	20	Orthopedic Surgery	7742008	SANFORD SOUTHPOINTE CLIN	1184917924		
1,167	$21,945	911770748	STALLMAN	DONALD	332 2ND AVE N		WAHPETON	ND	58075	1386665503	30	Radiology	3016	SANFORD HEALTH WAHPETON	1942241351		
331	$21,943	450226711	KICHLOO	AMIR	900 E BROADWAY AVE		BISMARCK	ND	58501	1194978734	11	Internal Medicine	501001	ST ALEXIUS MEDICAL CENTE	1205868429		
454	$21,937	271505326	HOLLAR	ANTHONY	1000 TACOMA AVE STE 500		BISMARCK	ND	58504	1487748679	65	Physical Therapy	7569001	ADVANCED PHYSICAL THERAP	1013238112		
765	$21,911	450226558	TURNEAU	KEVIN	1 BURDICK EXPY W		MINOT	ND	58701	1427032572	30	Radiology	635032	TRINITY MEDICAL GROUP	1083653752		
514	$21,895	450392137	MEDQUEST INC		1602 W 11TH ST		WILLISTON	ND	58801	1912932567	54	Home Medical Equipment	3284001	MEDQUEST INC	1912932567		
189	$21,883	450310462	RAYMOND	JON	1200 S COLUMBIA RD		GRAND FORKS	ND	58201	1508958935	72	Emergency Medicine	62001	ALTRU HOSPITAL	1154346161		
155	$21,877	450311904	VALLEY AMBULANCE &	CU	1317 GRIGGS AVE		GRAFTON	ND	58237	1669533394	59	Ambulance Service	1978001	VALLEY AMBULANCE & RESCU	1669533394		
130	$21,840	450226558	LEE	LANE	101 3RD AVE SW		MINOT	ND	58701	1073600979	2	General Surgery	635027	TRINITY MEDICAL GROUP	1083653752		
408	$21,829	274936426	TODD-REISNOUR	KRISTIE	300 WEST CENTURY AVE		BISMARCK	ND	58503	1770689945	50	Nurse Practitioner	7725001	BAKER FAMILY MEDICINE PC	1326330887		
242	$21,823	450226909	OVERIENE	VIKTORIJA	2400 32ND AVE S		FARGO	ND	58103	1952500803	76	Heumatology	7742008	SANFORD SOUTHPOINTE CLIN	1184917924		
12	$21,806	450335533	LAMB PLASTIC SURGE	SC	1507 UNIVERSITY DR S		FARGO	ND	58103	1700907912	70	Clinic	380001	LAMB PLASTIC SURGERY CEN	1700907912		
173	$21,786	450310462	BOE	CHRISTOPHE	1200 S COLUMBIA RD		GRAND FORKS	ND	58201	1992865885	72	Emergency Medicine	62001	ALTRU HOSPITAL	1154346161		
184	$21,777	450226909	SWENSON	LEAH	820 4TH ST N		FARGO	ND	58102	1891942405	50	Nurse Practitioner	7742002	SANFORD ROGER MARIS CANC	1184917924		
140	$21,766	450422119	GREAT PLAINS CLINI		33 9TH ST W		DICKINSON	ND	58601	1801092358	70	Clinic	231001	GREAT PLAINS CLINIC, PC	1720075377		
793	$21,756	450226711	MONTEAU	LANCE	2700 8TH ST NW		MINOT	ND	58703	1003015454	11	Internal Medicine	501016	ST ALEXIUS CLINIC	1205868429		
613	$21,724	450226909	FARKAS	SUSAN	801 BROADWAY NORTH		FARGO	ND	58102	1275568933	6	Cardivascular Disease	7742001	SANFORD BROADWAY CLINIC	1184917924		
526	$21,668	450425948	ALMEN	JOANN	425 S COLLEGE DR STE 14		DEVILS LAKE	ND	58301	1952530156	50	Nurse Practitioner	398004	TOWNER COUNTY MEDICAL CE	1194745935		
334	$21,653	450226909	CHRISTENSEN	STEFFEN	1111 HARWOOD DR		FARGO	ND	58104	1336167063	16	Obstet/Gynecology	7742012	SANFORD REPRODUCTIVE MED	1184917924		
486	$21,624	450310462	KIRNUS	MIKHAIL	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1922272228	6	Cardivascular Disease	9001	ALTRU HEALTH SYSTEM	1043309552		
616	$21,520	450226909	CLARDY	DAVID	801 BROADWAY NORTH		FARGO	ND	58102	1063430791	6	Cardivascular Disease	7742001	SANFORD BROADWAY CLINIC	1184917924		

898	$21,512	456002491	KROHN	KIMBERLY	1201 11TH AVE SW		MINOT	ND	58701	1053419861	8	Family Practice	78001	CENTER FOR FAMILY MEDICI	1316008238		
1,120	$21,489	363166982	CITY COUNTY HEALTH	TRICT	230 4TH ST NW RM 102		VALLEY CITY	ND	58072	1841333697	60	Public Health or Welfare Agency	4481001	CITY COUNTY HEALTH DISTR	1841333697		
521	$21,481	202404179	SANFORD HEALTHCARE	ESSORIES M	116 1ST ST SW		MINOT	ND	58701	1598852972	54	Home Medical Equipment	3368001	SANFORD HEALTHCARE ACCES	1598852972		
86	$21,474	450226700	KRUSE	KENYON	300 N 7TH ST		BISMARCK	ND	58501	1013028091	5	Anesthesiology (MD)	440001	SANFORD MEDICAL CENTER/B	1811941172		
2,248	$21,464	450311334	HEBERT	BRIAN	401 N 9TH ST		BISMARCK	ND	58501	1235177577	11	Internal Medicine	236001	MID DAKOTA CLINIC	1275587826		
909	$21,455	450310462	PEGG	JUDY	201 E 3RD AVE S		CAVALIER	ND	58220	1265525299	97	Physician Assistant	37001	ALTRU CAVALIER	1053400523		
225	$21,445	450226909	WELLER	MARIA	2701 13TH AVE S		FARGO	ND	58103	1285656868	37	Pediatrics	7742009	SANFORD CHILDRENS SOUTHW	1184917924		
693	$21,432	450226700	FRANK	WALTER	222 N 7TH ST		BISMARCK	ND	58501	1639192339	6	Cardivascular Disease	4001	SANFORD CLINIC	1811941172		
261	$21,389	450226909	JORDAN	ANDREW	1717 SOUTH UNIVERSITY DR		FARGO	ND	58103	1992723563	18	Opthalmology	7742027	SANFORD 1717 MEDICAL BUI	1184917924		
371	$21,291	450310462	STAUSS CARLSON	KELLY	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1306126255	50	Nurse Practitioner	9001	ALTRU HEALTH SYSTEM	1043309552		
440	$21,285	460478304	MARTIN	TRACY	1711 GOLD DRIVE S #160		FARGO	ND	58103	1528151099	8	Family Practice	5709001	INDEPENDENT FAMILY DOCTO	1659477149		
96	$21,268	271777130	WESSMAN	KARI	1665 43 ST S		FARGO	ND	58103	1235150574	16	Obstet/Gynecology	7554001	WESSMAN, KARI, MD, PC	1144540089		
1,684	$21,267	273844177	SCHMIDT	DWIGHT	102 2ND AVE SW		JAMESTOWN	ND	58401	1801849971	35	Chiropractor	629001	SCHMIDT CHIROPRACTIC CLI	1780622191		
228	$21,263	450226700	SCHMIDT	STEVEN	300 N 7TH ST		BISMARCK	ND	58501	1841428885	72	Emergency Medicine	440001	SANFORD MEDICAL CENTER/B	1811941172		
149	$21,246	450226711	MILLER	CAROL	900 E BROADWAY AVE		BISMARCK	ND	58501	1629121595	50	Nurse Practitioner	501001	ST ALEXIUS MEDICAL CENTE	1205868429		
171	$21,139	450310462	FELDMAN	ELLEN	860 S COLUMBIA RD		GRAND FORKS	ND	58201	1831280841	26	Psychiatry (MD)	9024	ALTRU PSYCHIATRIC CENTER	1043309552		
192	$21,135	260490103	KENNEY	SARA	211 4TH ST NE STE 4		DEVILS LAKE	ND	58301	1346346780	62	Psychology	6978001	BLOOMING PRAIRIE ASSESSM	1649461344		
392	$21,118	450309291	HALL	LYLE	2200 S WASHINGTON ST		GRAND FORKS	ND	58201	1790858306	41	Optometrist	234001	VALLEY VISION CLINIC LTD	1619168267		
596	$21,108	911770748	GARRITY	STEPHEN	801 BROADWAY NORTH		FARGO	ND	58102	1033137682	30	Radiology	3001	SANFORD BROADWAY CLINIC	1942241351		
108	$21,100	861123162	HOSKINS	NICHOLAS	310 N 10TH ST		BISMARCK	ND	58501	1932369634	5	Anesthesiology (MD)	6459001	ST ALEXIUS HEART & LUNG	1194823021		
233	$21,050	331010781	HOLDEN	HARLEY	1501 N 12TH ST		BISMARCK	ND	58501	1144376385	88	#N/A	5719001	ANCHOR CHRISTIAN COUNSEL	1730380973		
80	$21,032	450455106	PAULSON	RICK	115 W CENTURY AVE STE B		BISMARCK	ND	58503	1790705168	24	Plastic Surgery	1748001	AESTHETIC CENTER OF PLAS	1033306998		
222	$20,987	201278075	GREEN	REBECCA	1407 24TH AVE S STE 520		GRAND FORKS	ND	58201	1508951856	62	Psychology	6359001	AGASSIZ ASSOCIATES, PLLC	1700972122		
361	$20,956	680575639	MARTIRE	MICHAEL	121 W CENTURY AVE		BISMARCK	ND	58503	1013999572	25	Physical Medicine and Rehab	1060002	SPINE ORTHOPEDIC AND PAI	1639148463		
719	$20,946	260069726	LEINTZ	TYLER	448 21ST ST W UNIT D2		DICKINSON	ND	58601	1770554453	35	Chiropractor	6241001	HEALTH AND WELLNESS CHIR	1629195342		
267	$20,913	450226909	HORNER	MELISSA	2701 13TH AVE S		FARGO	ND	58103	1477672921	37	Pediatrics	7742009	SANFORD CHILDRENS SOUTHW	1184917924		
533	$20,892	450310462	LOCKHART	CHRISTOPHE	1200 S COLUMBIA RD		GRAND FORKS	ND	58201	1750313045	21	Pathology, Anatomy, Clinical Pathology	62001	ALTRU HOSPITAL	1154346161		
109	$20,870	911770748	DAHL	STEPHANIE	1111 HARWOOD DR		FARGO	ND	58104	1265545784	16	Obstet/Gynecology	3048	SANFORD REPRODUCTIVE MED	1942241351		
792	$20,869	450226558	KAMBA	THOMPSON	1 BURDICK EXPY W		MINOT	ND	58701	1548279003	32	Radiation Therapy	635032	TRINITY MEDICAL GROUP	1083653752		
354	$20,843	260226034	MIDDLETON	DEBRA	1033 BASIN AVE		BISMARCK	ND	58504	1427073188	50	Nurse Practitioner	6975001	SMITH, JEFF, MD PC	1275732638		
1,317	$20,831	800001464	KRAFT	BRADLEY	212 S BROADWAY #4		MINOT	ND	58701	1558343707	35	Chiropractor	5581001	MID TOWN CHIROPRACTIC	1558343707		
66	$20,821	450226909	PROCHASKA	VERN	2301 S 25TH ST STE A		FARGO	ND	58103	1891845947	20	Orthopedic Surgery	7742011	SANFORD ORTHOPEDICS SPOR	1184917924		
891	$20,803	263067129	LUNDY	MARY	204 N COLLEGE DR		DEVILS LAKE	ND	58301	1477626117	65	Physical Therapy	6452001	LUNDY, MARY E PT DBA PRO	1609026103		
1,046	$20,798	562595409	BERGER	CODY	3123 N 14TH ST		BISMARCK	ND	58503	1669558318	35	Chiropractor	6903001	BERGER CHIROPRACTIC & AC	1730212093		
837	$20,772	432056751	RUMMEL	GREGORY	705 E MAIN AVE		BISMARCK	ND	58501	1548306319	35	Chiropractor	6358003	RUMMEL CHIROPRACTIC PC	1497893242		
265	$20,680	450226558	DOCKTER	LORI	400 BURDICK EXPY E		MINOT	ND	58701	1154419596	97	Physician Assistant	635006	TRINITY MEDICAL GROUP	1083653752		
215	$20,678	911770748	MARSDEN	RICHARD	929 CENTRAL AVE NW		E GRAND FORKS	MN	56721	1801814413	30	Radiology	3055	SANFORD HEALTH 929 CENTR	1942241351		
513	$20,620	911770748	JOHNSON	LARRY	300 2ND AVE NE		JAMESTOWN	ND	58401	1578674511	8	Family Practice	3090	SANFORD HEALTH 2ND AVE C	1942241351		
235	$20,588	203749270	STAEHNKE	EMILEE	3509 INTERSTATE BLVD	STE B	FARGO	ND	58103	1689804692	66	Speech Therapy	1516002	MAGELKY, PHYLLIS LTD	1821324476		
602	$20,574	450311334	SEIFERT	SHELLY	727 KIRKWOOD MALL		BISMARCK	ND	58504	1245286764	8	Family Practice	236011	MID DAKOTA CLINIC - 727	1275587826		
325	$20,552	450433512	PETERSON	THOMAS	1451 44TH AVE S UNIT A		GRAND FORKS	ND	58201	1639131014	26	Psychiatry (MD)	567001	CENTER FOR PSYCHIATRIC C	1043271885		
179	$20,506	450226700	GHERING	KARLI	414 N 7TH ST		BISMARCK	ND	58501	1669572574	62	Psychology	4046	SANFORD SEVENTH AND ROSS	1811941172		
165	$20,492	450226700	HOROWITZ	ANDREW	222 N 7TH ST		BISMARCK	ND	58501	1336337591	34	Urology	4001	SANFORD CLINIC	1811941172		
759	$20,486	450231181	WADE	GARY	2422 20TH ST SW		JAMESTOWN	ND	58401	1306832571	30	Radiology	496001	JAMESTOWN REGIONAL MEDIC	1700038981		
717	$20,474	911770748	OSTMO	ROBERT	332 2ND AVE N		WAHPETON	ND	58075	1487686689	8	Family Practice	3016	SANFORD HEALTH WAHPETON	1942241351		
1,372	$20,466	450433194	NESS	ANGELA	425 S 7TH ST		BISMARCK	ND	58504	1295747996	35	Chiropractor	572001	SOUTHRIDGE CHIROPRACTIC	1205848108		
199	$20,448	450226558	SCOTT	EARL	101 3RD AVE SW		MINOT	ND	58701	1497826549	20	Orthopedic Surgery	635027	TRINITY MEDICAL GROUP	1083653752		
249	$20,413	450226909	CULLEN	NICOLE	2400 32ND AVE S		FARGO	ND	58103	1114257656	48	Podiatry, Surgical chiropody	7742008	SANFORD SOUTHPOINTE CLIN	1184917924		
286	$20,372	450226700	NOTTESTAD	STEPHANIE	414 N 7TH ST		BISMARCK	ND	58501	1285730689	97	Physician Assistant	4046	SANFORD SEVENTH AND ROSS	1811941172		
635	$20,354	450310462	SCHALL	TOBEY	1001 7TH ST		DEVILS LAKE	ND	58301	1700175643	50	Nurse Practitioner	9027	ALTRU CLINIC LAKE REGION	1861581373		
105	$20,347	261175213	GUPTA	MAHENDRA	1702 UNIVERSITY DR S		FARGO	ND	58103	1508899139	11	Internal Medicine	6885031	INNOVIS HEALTH, LLC DBA	1255677084		
707	$20,340	450321538	AXTMAN	KEVIN	310 N 9TH ST		BISMARCK	ND	58501	1649298555	65	Physical Therapy	188001	THE BONE & JOINT CENTER,	1750307872		
247	$20,313	450447269	HERITAGE PHARMACY		401 N 9TH ST		BISMARCK	ND	58501	1548281736	54	Home Medical Equipment	3332001	HERITAGE PHARMACY	1548281736		
300	$20,313	200544802	SONDREAL	PHILIP	2829 S UNIV DR STE 101		FARGO	ND	58103	1154337400	8	Family Practice	6252001	URGENT MEDICINE ASSOCIAT	1154490399		
449	$20,307	450310462	BREITWIESER	WAYNE	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1942307723	29	Pulmonary Diseases	9001	ALTRU HEALTH SYSTEM	1043309552		
1,246	$20,284	450428854	WOLLMANN	TROY	1033 BASIN AVE		BISMARCK	ND	58504	1376517763	35	Chiropractor	1668001	INNATE, PC	1851628275		
112	$20,262	450226909	LESTEBERG	KEITH	2400 32ND AVE S		FARGO	ND	58103	1639196306	16	Obstet/Gynecology	7742008	SANFORD SOUTHPOINTE CLIN	1184917924		
1,141	$20,261	450452159	NEMECEK	CAMERON	1431 INTERSTATE LOOP		BISMARCK	ND	58503	1033294392	35	Chiropractor	1397001	NEMECEK CHIROPRACTIC, PC	1780912774		
451	$20,255	450226700	HOWARD	RICHARD	222 N 7TH ST		BISMARCK	ND	58501	1447249255	6	Cardivascular Disease	4001	SANFORD CLINIC	1811941172		
226	$20,238	450226909	OLSON	ROBERT	801 BROADWAY NORTH		FARGO	ND	58102	1518985118	26	Psychiatry (MD)	7742001	SANFORD BROADWAY CLINIC	1184917924		
314	$20,217	450226909	NAKASATO	YURI	2400 32ND AVE S		FARGO	ND	58103	1639146855	76	Heumatology	7742008	SANFORD SOUTHPOINTE CLIN	1184917924		
880	$20,200	450226558	HADDON	MARGARET	1 BURDICK EXPY W		MINOT	ND	58701	1841248903	30	Radiology	635032	TRINITY MEDICAL GROUP	1083653752		
252	$20,180	450254692	LINDSEY	JACQUELYN	702 1ST ST SW		CROSBY	ND	58730	1225030521	50	Nurse Practitioner	428001	ST LUKES HOSPITAL DBA CR	1184737231		
32	$20,117	450310462	HAPE	ROBIN	1200 S COLUMBIA RD		GRAND FORKS	ND	58201	1639371818	2	General Surgery	62001	ALTRU HOSPITAL	1154346161		
361	$20,104	450226909	LANG	DARIN	2400 32ND AVE S		FARGO	ND	58103	1780602342	11	Internal Medicine	7742008	SANFORD SOUTHPOINTE CLIN	1184917924		
263	$20,057	450226558	NARDOZZI	KRISTEN	1321 W DAKOTA PARKWAY		WILLISTON	ND	58801	1841429321	8	Family Practice	635039	TRINITY COMMUNITY CLINIC	1083653752		

201	$20,018	450226558	BEDELL	HEATHER	400 BURDICK EXPY E		MINOT	ND	58701	1447474994	16	Obstet/Gynecology	635006	TRINITY MEDICAL GROUP	1083653752		
561	$19,991	592852900	LINCARE INC		1609 32 AVE S STE C		FARGO	ND	58103	1831263185	54	Home Medical Equipment	5604001	LINCARE INC	1831263185		
1,521	$19,946	450374335	REMMICK	MICHAEL	201 6TH AVE NE		DEVILS LAKE	ND	58301	1982692638	35	Chiropractor	437001	REMMICK, MICHAEL A, DC	1982692638		
231	$19,936	450226711	MAIER	MICHELLE	900 E BROADWAY AVE		BISMARCK	ND	58501	1831243005	50	Nurse Practitioner	501001	ST ALEXIUS MEDICAL CENTE	1205868429		
121	$19,899	450226909	STAVENGER	JEFFREY	2301 S 25TH ST STE A		FARGO	ND	58103	1659322865	20	Orthopedic Surgery	7742011	SANFORD ORTHOPEDICS SPOR	1184917924		
1,348	$19,892	450455546	DALLMAN	JOHN	1395 S COLUMBIA RD #B		GRAND FORKS	ND	58201	1437142486	35	Chiropractor	1201001	DALLMAN CHIROPRACTIC PC	1831425685		
49	$19,850	450226700	BOYKO	KIMBER	300 N 7TH ST		BISMARCK	ND	58501	1386602043	2	General Surgery	440001	SANFORD MEDICAL CENTER/B	1811941172		
303	$19,818	450226909	ULMER	TOSHA	801 BROADWAY NORTH		FARGO	ND	58102	1205857547	50	Nurse Practitioner	7742001	SANFORD BROADWAY CLINIC	1184917924		
428	$19,813	450369255	MOCH	DANELLE	1221 W DIVIDE AVE		BISMARCK	ND	58501	1255323796	41	Optometrist	1040001	EYE CENTER OF THE DAKOTA	1548360761		
239	$19,765	450310462	OWENS	CHARLES	1200 S COLUMBIA RD		GRAND FORKS	ND	58201	1518970607	30	Radiology	62001	ALTRU HOSPITAL	1154346161		
252	$19,741	450226558	TVEDT-DAVIS	HEATHER	400 BURDICK EXPY E		MINOT	ND	58701	1073698684	37	Pediatrics	635006	TRINITY MEDICAL GROUP	1083653752		
92	$19,736	450310462	ALI	SYED	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1518113562	33	Thoracic Surgery	9001	ALTRU HEALTH SYSTEM	1043309552		
6	$19,722	920173583	GUARDIAN FLIGHT,IN		2301 5TH ST W	STE 208-209	WILLISTON	ND	58801	1649564931	59	Ambulance Service	8081001	GUARDIAN FLIGHT, INC	1649564931		
96	$19,698	450226909	SEPE	FRANK	801 BROADWAY NORTH		FARGO	ND	58102	1578584793	72	Emergency Medicine	7742001	SANFORD BROADWAY CLINIC	1184917924		
284	$19,667	273981362	BOSTON	KARI	512 MAIN ST		WILLISTON	ND	58801	1083793061	65	Physical Therapy	7662001	ELITE HEALTH & FITNESS	1841594900		
792	$19,627	911770748	KHAGHANY	KAMRAN	801 BROADWAY NORTH		FARGO	ND	58102	1255502498	30	Radiology	3001	SANFORD BROADWAY CLINIC	1942241351		
18	$19,619	450226700	KLEMIN	PETER	300 N 7TH ST		BISMARCK	ND	58501	1124228630	16	Obstet/Gynecology	440001	SANFORD MEDICAL CENTER/B	1811941172		
192	$19,605	450387077	LIPP	LELAND	2808 17TH AVE S		GRAND FORKS	ND	58201	1619904984	62	Psychology	203001	LIPP CARLSON LOMMEN & WI	1043316961		
495	$19,563	261175213	WRIGHT	AARON	3000 32ND AVE S		FARGO	ND	58103	1457309478	30	Radiology	6885030	INNOVIS HEALTH, LLC DBA	1578907655		
165	$19,493	450226700	STAHL	NIGERIA	300 N 7TH ST		BISMARCK	ND	58501	1780629055	72	Emergency Medicine	440001	SANFORD MEDICAL CENTER/B	1811941172		
85	$19,478	450310462	DWARAKANATH	KIRAN	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1699980847	37	Pediatrics	9001	ALTRU HEALTH SYSTEM	1043309552		
354	$19,466	450226700	KNUDSON	WANDA	222 N 7TH ST		BISMARCK	ND	58501	1760581714	97	Physician Assistant	4001	SANFORD CLINIC	1811941172		
282	$19,461	263455361	THOM	STEVEN	2601 S UNIVERSITY DR		FARGO	ND	58103	1063434637	18	Opthalmology	7291001	THOM STEVEN, MD PC	1821233073		
293	$19,449	450226909	ARAVAPALLI	ARUNA	801 BROADWAY NORTH		FARGO	ND	58102	1710139068	11	Internal Medicine	7742001	SANFORD BROADWAY CLINIC	1184917924		
154	$19,387	450431752	PORTER	WILLIAM	100 S 4TH ST STE 608		FARGO	ND	58103	1801886445	4	Otology, Laryngology, Rhinology	1167001	PORTER, WILLIAM, MD	1124058326		
237	$19,356	450226700	KOSIAK	MAUREEN	801 21ST AVE SE		MINOT	ND	58701	1861707531	97	Physician Assistant	4065	SANFORD HEALTH WALK-IN C	1811941172		
527	$19,335	261175213	SAMPSON	JEROME	3000 32ND AVE S		FARGO	ND	58103	1487681599	30	Radiology	6885030	INNOVIS HEALTH, LLC DBA	1578907655		
561	$19,328	450309291	JONES	AVERY	2200 S WASHINGTON ST		GRAND FORKS	ND	58201	1770661183	41	Optometrist	234001	VALLEY VISION CLINIC LTD	1619168267		
545	$19,317	456013474	SUMRA	KULVINDER	301 MOUNTAIN ST E		CAVALIER	ND	58220	1184760274	8	Family Practice	5633001	PEMBINA COUNTY HOSPITAL	1417093949		
23	$19,301	450226700	IVERSON	CHRISTIE	300 N 7TH ST		BISMARCK	ND	58501	1346251253	16	Obstet/Gynecology	440001	SANFORD MEDICAL CENTER/B	1811941172		
217	$19,298	208928600	MILLER	LINAYA	3060 FRONTIER WAY S		FARGO	ND	58104	1023371374	66	Speech Therapy	6961001	PEDIATRIC THERAPY PARTNE	1457479958		
255	$19,283	200544802	KOOYER	KURT	2829 S UNIV DR STE 101		FARGO	ND	58103	1063456218	11	Internal Medicine	6252001	URGENT MEDICINE ASSOCIAT	1154490399		
253	$19,278	261175213	OSTLIE	DANIEL	3000 32ND AVE S		FARGO	ND	58103	1083632673	96	#N/A	6885030	INNOVIS HEALTH, LLC DBA	1578907655		
477	$19,238	450310462	JOHNSON	ERIC	1380 S COLUMBIA RD		GRAND FORKS	ND	58201	1104917905	8	Family Practice	9021	ALTRU FAMILY MEDICINE CE	1043309552		
462	$19,225	456002491	THOMAS-EAPEN	NEENA	1201 11TH AVE SW		MINOT	ND	58701	1295928091	8	Family Practice	78001	CENTER FOR FAMILY MEDICI	1316008238		
722	$19,201	450226558	HENINGER	ROBERT	1 BURDICK EXPY W		MINOT	ND	58701	1821179847	30	Radiology	635032	TRINITY MEDICAL GROUP	1083653752		
135	$19,200	450226558	KORDLAR	BAHRAM	20 BURDICK EXPRESSWAY W		MINOT	ND	58701	1821054347	13	Neurology	635029	TRINITY MEDICAL GROUP	1083653752		
249	$19,182	450226558	WILLIAMS	DARRELL	2815 16TH ST SW STE 102		MINOT	ND	58701	1598830051	18	Opthalmology	731001	TRINITY REGIONAL EYECARE	1083653752		
976	$19,166	450422733	GOEHNER	MATTHEW	805 10TH ST SE		JAMESTOWN	ND	58401	1083887236	35	Chiropractor	403001	QUAL CHIROPRACTIC	1104095751		
432	$19,158	450321538	STORK	BRADLEY	310 N 9TH ST		BISMARCK	ND	58501	1285675728	50	Nurse Practitioner	188001	THE BONE & JOINT CENTER,	1750307872		
715	$19,125	861123162	ESHOO	NORMAN	310 N 10TH ST		BISMARCK	ND	58501	1912098971	6	Cardivascular Disease	6459001	ST ALEXIUS HEART & LUNG	1194823021		
265	$19,119	450226700	DASIVAL	CHRISTINA	222 N 7TH ST		BISMARCK	ND	58501	1346561222	37	Pediatrics	4001	SANFORD CLINIC	1811941172		
193	$19,105	450226909	HALLANGER-JOHNSON	JULIE	2400 32ND AVE S		FARGO	ND	58103	1417921677	73	Endocrinology	7742008	SANFORD SOUTHPOINTE CLIN	1184917924		
297	$19,071	450226558	REEVE	HOWARD	400 BURDICK EXPY E		MINOT	ND	58701	1538230677	8	Family Practice	635006	TRINITY MEDICAL GROUP	1083653752		
89	$18,907	861123162	CAVE	JEFFREY	310 N 10TH ST		BISMARCK	ND	58501	1730109885	5	Anesthesiology (MD)	6459001	ST ALEXIUS HEART & LUNG	1194823021		
215	$18,900	450226700	BENNETT	REBEKAH	801 21ST AVE SE		MINOT	ND	58701	1194000869	97	Physician Assistant	4065	SANFORD HEALTH WALK-IN C	1811941172		
383	$18,854	456002491	CONNELL	JOAN	701 E ROSSER		BISMARCK	ND	58501	1306888623	37	Pediatrics	102001	CENTER FOR FAMILY MEDICI	1619905528		
422	$18,838	450310462	MACKI	KAMRIN	4440 S WASHINGTON ST		GRAND FORKS	ND	58201	1073605408	50	Nurse Practitioner	9033	ALTRU PROFESSIONAL CENTE	1043309552		
842	$18,835	450455375	BRINTNELL	JASON	720 20TH AVE SW		MINOT	ND	58701	1417020827	35	Chiropractor	756001	BRINTNELL CHIROPRACTIC P	1811160955		
628	$18,814	450226909	MANJUNATH	HEERAIMANG	801 BROADWAY NORTH		FARGO	ND	58102	1366472441	6	Cardivascular Disease	7742001	SANFORD BROADWAY CLINIC	1184917924		
62	$18,806	450226700	RENTON	DOUGLAS	300 N 7TH ST		BISMARCK	ND	58501	1972623577	10	Gastronenterology	440001	SANFORD MEDICAL CENTER/B	1811941172		
40	$18,781	450226909	JOLLY	SHASHANK	801 BROADWAY NORTH		FARGO	ND	58102	1902047814	33	Thoracic Surgery	7742001	SANFORD BROADWAY CLINIC	1184917924		
470	$18,741	450321538	ZACHMEIER-BABB	AMANDA	310 N 9TH ST		BISMARCK	ND	58501	1437175577	97	Physician Assistant	188001	THE BONE & JOINT CENTER,	1750307872		
150	$18,737	450226909	NEWMAN	DAVID	2400 32ND AVE S		FARGO	ND	58103	1770759227	73	Endocrinology	7742008	SANFORD SOUTHPOINTE CLIN	1184917924		
212	$18,737	450226700	KLEIN	KATHERINE	222 N 7TH ST		BISMARCK	ND	58501	1609037100	37	Pediatrics	4001	SANFORD CLINIC	1811941172		
161	$18,725	450226700	DORNACKER	ANGELA	3318 N 14TH STREET		BISMARCK	ND	58503	1730109257	8	Family Practice	4064	SANFORD NORTH WALK-IN CL	1811941172		
313	$18,666	861123162	KALAGHER	SEAN	310 N 10TH ST		BISMARCK	ND	58501	1972715282	30	Radiology	6459001	ST ALEXIUS HEART & LUNG	1194823021		
440	$18,610	450310462	BEKDASH	ISMAIL	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1386814044	6	Cardivascular Disease	9001	ALTRU HEALTH SYSTEM	1043309552		
503	$18,586	261175213	CROWE	CHRISTOPHE	3000 32ND AVE S		FARGO	ND	58103	1720016330	30	Radiology	6885030	INNOVIS HEALTH, LLC DBA	1578907655		
767	$18,560	911770748	ASLESON	JOHN	801 BROADWAY NORTH		FARGO	ND	58102	1114190493	30	Radiology	3001	SANFORD BROADWAY CLINIC	1942241351		
555	$18,539	450310462	SWANSON	KEITH	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1508952862	11	Internal Medicine	9001	ALTRU HEALTH SYSTEM	1043309552		
460	$18,529	450321538	WESTIN	LESLEY	310 N 9TH ST		BISMARCK	ND	58501	1073784476	65	Physical Therapy	188001	THE BONE & JOINT CENTER,	1750307872		
138	$18,525	208869566	BANNACH	LADONNA	3001 S 11TH ST		FARGO	ND	58103	1437231578	67	Occupational Therapy	6569001	BEYOND BOUNDARIES OCCUPA	1245312388		
401	$18,512	261175213	HUBER	AMANDA	2430 20TH ST SW		JAMESTOWN	ND	58401	1316184195	97	Physician Assistant	6885018	INNOVIS HEALTH, LLC DBA	1073793725		
119	$18,510	911770748	CHRISTENSEN	STEFFEN	1720 UNIVERSITY DR S		FARGO	ND	58103	1336167063	16	Obstet/Gynecology	3904	SANFORD SOUTH UNIVERSITY	1942241351		
206	$18,495	450226700	NICHOLSON	JACLYN	801 21ST AVE SE		MINOT	ND	58701	1932450525	97	Physician Assistant	4065	SANFORD HEALTH WALK-IN C	1811941172		

1,103	$18,478	450396231	CEYNAR	ROBERT	2315 2 AVE W		WILLISTON	ND	58801	1750493169	35	Chiropractor	1388001	CEYNAR CHIROPRACTIC	1750493169		
249	$18,454	450226909	HALDIS	THOMAS	801 BROADWAY NORTH		FARGO	ND	58102	1588681449	6	Cardivascular Disease	7742001	SANFORD BROADWAY CLINIC	1184917924		
38	$18,449	450226909	JACKSON	ADAM	700 1ST AVE S		FARGO	ND	58103	1881801694	14	Neurological Surgery	7742007	SANFORD NEUROSCIENCE CLI	1184917924		
149	$18,408	450226558	BENAISSA	RAFIK	101 3RD AVE SW		MINOT	ND	58701	1851489280	20	Orthopedic Surgery	635027	TRINITY MEDICAL GROUP	1083653752		
418	$18,408	460478304	JOHNSON	STEVEN	1711 GOLD DRIVE S #160		FARGO	ND	58103	1326133877	8	Family Practice	5709001	INDEPENDENT FAMILY DOCTO	1659477149		
120	$18,390	450226700	VAN NORMAN	ALAN	222 N 7TH ST		BISMARCK	ND	58501	1285732958	14	Neurological Surgery	4001	SANFORD CLINIC	1811941172		
151	$18,388	450226558	THOMAS	ROBERT	101 3RD AVE SW		MINOT	ND	58701	1720284508	4	Otology, Laryngology, Rhinology	635027	TRINITY MEDICAL GROUP	1083653752		
159	$18,366	450387077	TAIT	ALISON	2808 17TH AVE S		GRAND FORKS	ND	58201	1366479669	62	Psychology	203001	LIPP CARLSON LOMMEN & WI	1043316961		
58	$18,326	450226909	GABA	VIJAY	801 BROADWAY NORTH		FARGO	ND	58102	1952328817	5	Anesthesiology (MD)	7742001	SANFORD BROADWAY CLINIC	1184917924		
268	$18,321	450226558	NWAIGWE	CASMIAR	400 BURDICK EXPY E		MINOT	ND	58701	1902832041	74	Infectious Diseases	635006	TRINITY MEDICAL GROUP	1083653752		
165	$18,302	450226700	RENTON	STANLEY	300 N 7TH ST		BISMARCK	ND	58501	1487696662	72	Emergency Medicine	440001	SANFORD MEDICAL CENTER/B	1811941172		
162	$18,254	279700894	EATON	TIMOTHY	1705 4TH AVE NW		MINOT	ND	58703	1083710800	62	Psychology	1437001	EATON, TIMOTHY, PHD	1083710800		
283	$18,239	450226558	MONTANEZ CONCEPCIO	ANA	400 BURDICK EXPY E		MINOT	ND	58701	1679875934	37	Pediatrics	635006	TRINITY MEDICAL GROUP	1083653752		
377	$18,141	271711457	HELGOE	AMANDA	3242 20TH ST S		FARGO	ND	58104	1235119892	65	Physical Therapy	7584001	BODYWORKS PHYSICAL THERA	1487960522		
171	$18,120	261175213	MOHS	THOMAS	275 11TH ST S		WAHPETON	ND	58075	1427085836	2	General Surgery	6885019	INNOVIS HEALTH, LLC DBA	1790965440		
32	$18,107	450317568	COMMUNITY AMBULANC	RV	217 5TH AVE NE		ROLLA	ND	58367	1346318268	59	Ambulance Service	1889001	COMMUNITY AMBULANCE SERV	1346318268		
440	$18,104	450310462	MASON	ANN	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1952696049	50	Nurse Practitioner	9001	ALTRU HEALTH SYSTEM	1043309552		
240	$18,099	450310462	CAOILI	HENRI ROMM	1300 S COLUMBIA RD		GRAND FORKS	ND	58201	1285729533	25	Physical Medicine and Rehab	232001	ALTRU REHABILITATION CEN	1437248945		
171	$18,075	208869566	STEVENSON	VALERIE	3001 S 11TH ST		FARGO	ND	58103	1124359922	67	Occupational Therapy	6569001	BEYOND BOUNDARIES OCCUPA	1245312388		
697	$18,015	450427926	CAVALIER CTY HLTH		901 3RD ST STE 11		LANGDON	ND	58249	1174566335	60	Public Health or Welfare Agency	4485001	CAVALIER CTY HLTH DIST	1174566335		
63	$17,993	202404179	SANFORD HEALTHCARE	ESSORIES J	1023 10TH ST SE		JAMESTOWN	ND	58401	1548357023	79	Home Infusion	3371001	SANFORD HEALTHCARE ACCES	1548357023		
165	$17,986	450226558	NOEL	MARK	101 3RD AVE SW		MINOT	ND	58701	1396935920	4	Otology, Laryngology, Rhinology	635027	TRINITY MEDICAL GROUP	1083653752		
144	$17,981	450226700	GROOMS	PAUL	300 N 7TH ST		BISMARCK	ND	58501	1104801760	72	Emergency Medicine	440001	SANFORD MEDICAL CENTER/B	1811941172		
382	$17,967	911770748	LEVEE	LINDA	904 5TH AVE NE		JAMESTOWN	ND	58401	1144242637	50	Nurse Practitioner	3005	SANFORD HEALTH JAMESTOWN	1942241351		
520	$17,936	450309162	DUNHAM	THOMAS	3035 DEMERS AVE		GRAND FORKS	ND	58201	1982601357	41	Optometrist	222001	NORTH DAKOTA EYE CLINIC	1972563815		
228	$17,935	870694180	SCHAUER	LAURIE	701 3RD STREET NW		JAMESTOWN	ND	58401	1033243605	66	Speech Therapy	5919001	ANNE CARLSEN CENTER	1598930109		
280	$17,900	450226909	CRABILL	JAMES	2301 S 25TH ST STE A		FARGO	ND	58103	1194778068	97	Physician Assistant	7742011	SANFORD ORTHOPEDICS SPOR	1184917924		
124	$17,892	450226909	ROEMBACH	JEANINE	100 4TH ST S		FARGO	ND	58103	1306867528	26	Psychiatry (MD)	7742006	SANFORD PROFESSIONAL BUI	1184917924		
248	$17,882	450310462	SMITH	RANDALL	1200 S COLUMBIA RD		GRAND FORKS	ND	58201	1154417418	30	Radiology	62001	ALTRU HOSPITAL	1154346161		
669	$17,873	450226700	MARTIN	C KENT	222 N 7TH ST		BISMARCK	ND	58501	1922110576	11	Internal Medicine	4001	SANFORD CLINIC	1811941172		
257	$17,845	450226558	SMOTHERS	JOE	400 BURDICK EXPY E		MINOT	ND	58701	1558435933	8	Family Practice	635006	TRINITY MEDICAL GROUP	1083653752		
335	$17,833	273224344	HENKE	THOMAS	448 21 ST W STE D-1		DICKINSON	ND	58601	1952361040	65	Physical Therapy	7711001	THERAPY SOLUTIONS	1801195045		
566	$17,818	208482521	HAGER	CAITLYN	1655 N GRANDVIEW LN #204		BISMARCK	ND	58503	1306154570	65	Physical Therapy	6950001	JONES PHYSICAL THERAPY,	1962523076		
214	$17,762	450226909	BRANDT	CHRISTINE	2400 32ND AVE S		FARGO	ND	58103	1669728929	97	Physician Assistant	7742008	SANFORD SOUTHPOINTE CLIN	1184917924		
201	$17,751	455324575	MADZIWA	FELISTAS	305 37TH AVE SW STE B		MINOT	ND	58701	1124006879	11	Internal Medicine	8014001	TOTAL TRANSFORMATION CLI	1376963520		
383	$17,732	450226909	SCHUE	RICHARD	4656 40TH AVE S		FARGO	ND	58104	1962424523	50	Nurse Practitioner	7742010	SANFORD DERMATOLOGY & LA	1184917924		
169	$17,721	204159369	BAER	ROBERT	11 2ND AVE E STE B		DICKINSON	ND	58601	1801862990	62	Psychology	6783001	DICKINSON FAMILY COUNSEL	1720054810		
522	$17,703	450226711	WOLFF	LORI	2700 8TH ST NW		MINOT	ND	58703	1932455094	97	Physician Assistant	501016	ST ALEXIUS CLINIC	1205868429		
351	$17,680	450310159	KOTNIK	ANTHONY	164 WEST 13TH STREET		GRAFTON	ND	58237	1386621209	8	Family Practice	282001	GRAFTON FAMILY CLINIC	1558423665		
48	$17,675	450226909	HASS	BRIAN	801 BROADWAY NORTH		FARGO	ND	58102	1770510414	5	Anesthesiology (MD)	7742001	SANFORD BROADWAY CLINIC	1184917924		
208	$17,661	272172561	MEYERS	VALERIE	600 S 2ND ST STE 201		BISMARCK	ND	58504	1518193622	88	#N/A	7552001	THE KIDS THERAPY CENTER	1518193622		
641	$17,607	450231183	PETERSON	LISA	1213 15TH AVE W		WILLISTON	ND	58801	1619156411	97	Physician Assistant	711001	CRAVEN-HAGAN/MERCY MEDIC	1760549000		
288	$17,590	911770748	HINKLE	STEPHANIE	445 1ST ST E		HALSTAD	MN	56548	1871823021	97	Physician Assistant	503001	SANFORD HEALTH HALSTAD C	1942241351		
413	$17,580	450311334	TOWNSEND	CAMMY	401 N 9TH ST		BISMARCK	ND	58501	1619920345	50	Nurse Practitioner	236001	MID DAKOTA CLINIC	1275587826		
234	$17,572	450226909	PARVATHAREDDY	VISHNUPRIY	2400 32ND AVE S		FARGO	ND	58103	1073530549	11	Internal Medicine	7742008	SANFORD SOUTHPOINTE CLIN	1184917924		
1,033	$17,566	450365426	SIEFKEN	ARNOLD	701 1ST AVE S		JAMESTOWN	ND	58401	1699861195	35	Chiropractor	1206001	SIEFKEN CHIROPRACTIC	1699861195		
313	$17,524	450226558	KNAPKEWICZ	CAMI	1321 W DAKOTA PARKWAY		WILLISTON	ND	58801	1457664617	50	Nurse Practitioner	635039	TRINITY COMMUNITY CLINIC	1083653752		
176	$17,505	450458948	WEISZ	SHANNON	309 N MANDAN ST STE 1		BISMARCK	ND	58501	1730254418	62	Psychology	2045001	CHAMBERS & BLOHM PSYCHOL	1114045465		
426	$17,477	450231183	SMALL	WILLIAM	1213 15TH AVE W		WILLISTON	ND	58801	1992793673	8	Family Practice	711001	CRAVEN-HAGAN/MERCY MEDIC	1760549000		
156	$17,450	450226700	KOESTER	KEVIN	300 N 7TH ST		BISMARCK	ND	58501	1518078583	48	Podiatry, Surgical chiropody	440001	SANFORD MEDICAL CENTER/B	1811941172		
1,189	$17,437	450462606	ROSHAU	BRAD	1715 BURNT BOAT DR		BISMARCK	ND	58503	1891831624	35	Chiropractor	1561001	ROSHAU CHIROPRACTIC WELL	1548456254		
177	$17,435	450310462	FASBENDER	JAMES	1200 S COLUMBIA RD		GRAND FORKS	ND	58201	1922199934	72	Emergency Medicine	62001	ALTRU HOSPITAL	1154346161		
582	$17,424	450412672	ROMSAAS	JODI	1936 N 11TH ST		BISMARCK	ND	58501	1245266717	65	Physical Therapy	275001	CHUPPE CHIROPRACTIC CLIN	1649285396		
128	$17,420	450226909	BRO	WALTER	801 BROADWAY NORTH		FARGO	ND	58102	1164440863	16	Obstet/Gynecology	7742001	SANFORD BROADWAY CLINIC	1184917924		
232	$17,396	450226700	RODRIGUEZ	CARMEN	225 N 7TH ST		BISMARCK	ND	58501	1417045295	50	Nurse Practitioner	4061	SANFORD SEVENTH AND THAY	1811941172		
247	$17,382	450226558	TEMPLER	MICHAEL	1500 24TH AVE SW		MINOT	ND	58701	1386839041	5	Anesthesiology (MD)	635040	TRINITY MEDICAL GROUP SO	1083653752		
757	$17,368	263047434	BJELLUM	HANS	4622 40TH AVE S		FARGO	ND	58104	1396736443	8	Family Practice	7174001	7 DAY CLINIC OSGOOD	1619123593		
408	$17,363	450311334	AHMED	BILAL	401 N 9TH ST		BISMARCK	ND	58501	1720025034	73	Endocrinology	236001	MID DAKOTA CLINIC	1275587826		
529	$17,363	450310462	SCHMALTZ	DEBRA	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1174619431	50	Nurse Practitioner	9001	ALTRU HEALTH SYSTEM	1043309552		
250	$17,360	450458948	HELLMAN	LAUREE	309 N MANDAN ST STE 1		BISMARCK	ND	58501	1962635078	44	Psychiatric Nurse	2045001	CHAMBERS & BLOHM PSYCHOL	1114045465		
292	$17,349	450310462	WINCHESTER	MARSHALL	960 S COLUMBIA RD		GRAND FORKS	ND	58201	1184710444	75	Oncology	9028	ALTRU CANCER CENTER	1043309552		
289	$17,347	450451306	KOCH	BRENDA	314 OHMER ST		BOTTINEAU	ND	58318	1831196732	50	Nurse Practitioner	1262001	ST ANDREWS BOTTINEAU CLI	1902803802		
165	$17,344	450419100	ROTTMAN	LORI	509 25TH AVE N		FARGO	ND	58102	1114018678	62	Psychology	528001	VALLEY CHRISTIAN COUNSEL	1467559427		
658	$17,331	760747847	SCHOEPP-ERHARDT	DEBRA	405 BURLINGTON STREET SE		MANDAN	ND	58554	1598832701	35	Chiropractor	6189001	SCHOEPP FAMILY CHIROPRAC	1598832701		
305	$17,307	450310159	FILLIPI	LINDA	164 WEST 13TH STREET		GRAFTON	ND	58237	1851379861	8	Family Practice	282001	GRAFTON FAMILY CLINIC	1558423665		
289	$17,296	450226429	LENNARD-LOVE	COLLEEN	30 7TH ST W		DICKINSON	ND	58601	1316913197	4	Otology, Laryngology, Rhinology	95001	ST JOSEPHS HOSPITAL AND	1992947956		

231	$17,276	450226700	BASHUS	SARA	414 N 7TH ST		BISMARCK	ND	58501	1457580110	80	Clinical Social Worker	4046	SANFORD SEVENTH AND ROSS	1811941172		
134	$17,262	261175213	WASEMILLER	PAUL	275 11TH ST S		WAHPETON	ND	58075	1275561649	2	General Surgery	6885019	INNOVIS HEALTH, LLC DBA	1790965440		
21	$17,245	412002771	TRINITY HOSPITAL P	ACY	1 BURDICK EXPRESSWAY W		MINOT	ND	58701	1932359544	79	Home Infusion	4369001	TRINITY HOSPITALS PHARMA	1427103910		
89	$17,210	261175213	RAJENDER	SETTIHALLI	3000 32ND AVE S		FARGO	ND	58103	1992735757	10	Gastronenterology	6885030	INNOVIS HEALTH, LLC DBA	1578907655		
226	$17,197	450227311	PAGE	MICHAEL	820 5TH ST N		CARRINGTON	ND	58421	1487631032	8	Family Practice	507001	FOSTER COUNTY MEDICAL CE	1558389338		
271	$17,195	450447439	BERGSTROM	LANCE	2601 S UNIVERSITY		FARGO	ND	58103	1578509733	18	Opthalmology	1068001	BERGSTROM EYE AND LASER	1801819826		
197	$17,184	450226909	LUCHT	KAMILLA	2701 13TH AVE S		FARGO	ND	58103	1326080656	37	Pediatrics	7742009	SANFORD CHILDRENS SOUTHW	1184917924		
170	$17,168	450226700	RENO	CLAUDETTE	414 N 7TH ST		BISMARCK	ND	58501	1396857686	62	Psychology	4046	SANFORD SEVENTH AND ROSS	1811941172		
196	$17,165	203901662	PORTER	THERESA	600 2 ST S STE 201		BISMARCK	ND	58504	1386755023	80	Clinical Social Worker	6732001	NU VATION HEALTH SERVICE	1982754552		
245	$17,126	450226909	GLATT	DAVID	2400 32ND AVE S		FARGO	ND	58103	1467489039	8	Family Practice	7742008	SANFORD SOUTHPOINTE CLIN	1184917924		
174	$17,116	264348313	BRY	ANNE	1911 NORTH 11TH STREET		BISMARCK	ND	58501	1801090410	66	Speech Therapy	599001	THE ENRICHMENT GARDEN	1730212325		
931	$17,103	450422733	QUAL	RICHARD	805 10TH ST SE		JAMESTOWN	ND	58401	1902968431	35	Chiropractor	403001	QUAL CHIROPRACTIC	1104095751		
86	$17,083	450226700	SMITH	CRAIG	300 N 7TH ST		BISMARCK	ND	58501	1275602740	5	Anesthesiology (MD)	440001	SANFORD MEDICAL CENTER/B	1811941172		
35	$17,082	450226429	ARNOLD	THOMAS	30 7TH ST W		DICKINSON	ND	58601	1235237918	16	Obstet/Gynecology	95001	ST JOSEPHS HOSPITAL AND	1992947956		
1,051	$17,062	352350390	JELINEK	JONATHAN	728 HILL AVE		GRAFTON	ND	58237	1538166624	35	Chiropractor	7317001	GRAFTON CHIROPRACTIC CLI	1952547978		
988	$17,053	800009237	BJORLIE	KEVIN	1383 21ST AVE N STE A		FARGO	ND	58102	1467599084	35	Chiropractor	537001	BJORLIE CHIROPRACTIC CLI	1952448573		
182	$17,033	450433512	PETERSON	TIMOTHY	1451 44TH AVE S UNIT A		GRAND FORKS	ND	58201	1134211568	8	Family Practice	567001	CENTER FOR PSYCHIATRIC C	1043271885		
23	$16,996	450440576	KHOSLA	SEEMA	2422 20 ST SW		JAMESTOWN	ND	58401	1659462455	11	Internal Medicine	6236002	PRECISION DIAGNOSTIC SER	1619944253		
173	$16,982	450226909	BAUER-OLSON	CHERYL	4000 28TH AVE S		MOORHEAD	MN	56560	1871553313	8	Family Practice	7742014	SANFORD MOORHEAD CLINIC	1184917924		
236	$16,961	450226700	DOCKTER	DEBRA	414 N 7TH ST		BISMARCK	ND	58501	1902853492	50	Nurse Practitioner	4046	SANFORD SEVENTH AND ROSS	1811941172		
351	$16,940	450310462	DUDGEON	AMANDA	960 S COLUMBIA RD		GRAND FORKS	ND	58201	1225316433	50	Nurse Practitioner	9028	ALTRU CANCER CENTER	1043309552		
456	$16,927	261175213	SHELDON	MICHAEL	1702 UNIVERSITY DR S		FARGO	ND	58103	1487689469	11	Internal Medicine	6885031	INNOVIS HEALTH, LLC DBA	1255677084		
118	$16,883	450450254	PIERCE	KELLIE	600 N 9TH ST		BISMARCK	ND	58501	1609894039	43	Certified Registered Nurse Anesthetist	1261001	BISMARCK SURGICAL ASSOCI	1487814356		
835	$16,850	450341980	JOHNSON	RICHARD	1031 7TH ST		DEVILS LAKE	ND	58301	1720013253	30	Radiology	216001	MEDICAL IMAGING ASSOCIAT	1861674210		
280	$16,839	450462585	BAGAN	STEVEN	4344 20TH AVE S		FARGO	ND	58103	1487747267	18	Opthalmology	7176001	EYE PHYSICIANS GROUP, LL	1346405891		
704	$16,825	760792321	IVERSON	KENN	312 2ND AVE SW STE 101		JAMESTOWN	ND	58401	1275625030	35	Chiropractor	6577001	IVERSON, KENN, DC, PC	1265629240		
191	$16,819	204874580	GAMLIEL	TIRAM	725 HAMLINE ST		GRAND FORKS	ND	58203	1104882935	88	#N/A	6806001	ASSESSMENT AND THERAPY A	1437181591		
212	$16,753	450226909	RAUM	JENNIFER	2400 32ND AVE S		FARGO	ND	58103	1306821038	11	Internal Medicine	7742008	SANFORD SOUTHPOINTE CLIN	1184917924		
512	$16,696	208879803	WURGLER	MATTHEW	3175 SIENNA DR STE 105		FARGO	ND	58104	1235444019	35	Chiropractor	7051001	HEALTHSOURCE OF FARGO-MO	1639367121		
270	$16,683	450226700	TELLO	ANTHONY	222 N 7TH ST		BISMARCK	ND	58501	1558469916	11	Internal Medicine	4001	SANFORD CLINIC	1811941172		
88	$16,681	450226909	ANIM	SAMUEL	820 4TH ST N		FARGO	ND	58102	1053514844	37	Pediatrics	7742002	SANFORD ROGER MARIS CANC	1184917924		
532	$16,665	274932600	ERDMANN	MELISSA	827 28 ST S UNIT B		FARGO	ND	58103	1992727481	50	Nurse Practitioner	7705001	STELLAR HEALTHCARE LTD	1760781033		
94	$16,655	861123162	LOVEN	ROGER	310 N 10TH ST		BISMARCK	ND	58501	1922107853	5	Anesthesiology (MD)	6459001	ST ALEXIUS HEART & LUNG	1194823021		
164	$16,630	43604495	HEGSTAD	HOLLY	1401 13TH AVE E		WEST FARGO	ND	58078	1720058852	62	Psychology	5635001	KNOWLTON ONEILL & ASSOCI	1538198759		
222	$16,603	300476402	NESS	RACHEL	4141 31ST AVE S STE 103		FARGO	ND	58104	1205031713	7	Dermatology	7170001	NESS RACHEL MD PLLC	1699942581		
436	$16,596	450226429	JEPSON	LORI	150 CENTRAL AVE N		KILLDEER	ND	58640	1316967615	50	Nurse Practitioner	295001	ST JOSEPHS HOSPITAL/KILL	1184641110		
214	$16,563	450310462	WRIGHT	SHELLIE	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1801982160	97	Physician Assistant	9001	ALTRU HEALTH SYSTEM	1043309552		
82	$16,562	410957165	AMBULANCE SERVICE		120 MINNESOTA AVENUE		BRECKENRIDGE	MN	56520	1528023231	59	Ambulance Service	3414001	AMBULANCE SERVICE INC	1528023231		
252	$16,553	450321538	MITTLEIDER	ERICA	310 N 9TH ST		BISMARCK	ND	58501	1194957019	97	Physician Assistant	188001	THE BONE & JOINT CENTER,	1750307872		
892	$16,519	204713458	FETZER	CHRISTY	1555 43 ST S SUITE 107		FARGO	ND	58103	1154369718	35	Chiropractor	6817001	FETZER FAMILY CHIROPRACT	1750311940		
207	$16,496	450226711	LEINGANG	GORDON	900 E BROADWAY AVE		BISMARCK	ND	58501	1538187125	8	Family Practice	459001	ST ALEXIUS MEDICAL CENTE	1306832654		
768	$16,494	911770748	KALLENBACH	CHRISTOPHE	1720 UNIVERSITY DR S		FARGO	ND	58103	1649460551	30	Radiology	3904	SANFORD SOUTH UNIVERSITY	1942241351		
998	$16,487	456002491	UND STUDENT HEALTH		MCCANNEL HALL ROOM 100	2891 2ND AVE I	GRAND FORKS	ND	58202	1922067305	70	Clinic	180001	UND STUDENT HEALTH SERVI	1922067305		
224	$16,477	450226711	PRICE	TYLER	900 E BROADWAY AVE		BISMARCK	ND	58501	1811159403	72	Emergency Medicine	459001	ST ALEXIUS MEDICAL CENTE	1306832654		
179	$16,453	450226711	BATHURST	ROBERT	900 E BROADWAY AVE		BISMARCK	ND	58501	1821001447	72	Emergency Medicine	459001	ST ALEXIUS MEDICAL CENTE	1306832654		
414	$16,445	460513090	DUNDERLAND	PAUL	522 MAIN ST		BOTTINEAU	ND	58318	1750599916	41	Optometrist	1043001	FAMILY VISION CENTER	1669787289		
1,225	$16,410	456004474	UPPER MISSOURI DIS	T HEALTH	110 W BROADWAY STE 101		WILLISTON	ND	58801	1083889430	60	Public Health or Welfare Agency	7136001	UPPER MISSOURI DISTRICT	1083889430		
192	$16,410	450226558	MAKONI	STEPHEN	831 S BROADWAY		MINOT	ND	58701	1073544532	75	Oncology	635001	TRINITY MEDICAL GROUP	1083653752		
287	$16,396	450310462	COOLEY	MICHELLE	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1235393315	50	Nurse Practitioner	9001	ALTRU HEALTH SYSTEM	1043309552		
23	$16,390	450226909	SIEGEL	ERIC	801 BROADWAY NORTH		FARGO	ND	58102	1205010642	16	Obstet/Gynecology	7742001	SANFORD BROADWAY CLINIC	1184917924		
40	$16,359	450226700	NELSON	JEFFREY	300 N 7TH ST		BISMARCK	ND	58501	1649433608	4	Otology, Laryngology, Rhinology	440001	SANFORD MEDICAL CENTER/B	1811941172		
106	$16,344	274241577	THOMPSON	SUSAN	3301 30TH AVE S #101		GRAND FORKS	ND	58201	1396968061	62	Psychology	7634001	MIDWEST NEUROPSYCHOLOGY,	1699078626		
128	$16,344	450226700	HOWARD	RICHARD	300 N 7TH ST		BISMARCK	ND	58501	1447249255	6	Cardivascular Disease	440001	SANFORD MEDICAL CENTER/B	1811941172		
395	$16,281	43755538	HARRIS	HOADLEY	3290 20TH ST S		FARGO	ND	58104	1811991607	8	Family Practice	5917001	PLAINS MEDICAL CLINIC LL	1073698460		
201	$16,273	450226429	WICKS	MARY JO	30 W 7TH ST		DICKINSON	ND	58601	1407952542	50	Nurse Practitioner	95008	ST JOSEPHS WOMENS CLINIC	1730464108		
112	$16,270	450226909	PIATT	BRUCE	2301 S 25TH ST STE A		FARGO	ND	58103	1972532240	20	Orthopedic Surgery	7742011	SANFORD ORTHOPEDICS SPOR	1184917924		
15	$16,264	450226700	CARPENTER	MATTHEW	300 N 7TH ST		BISMARCK	ND	58501	1154532547	20	Orthopedic Surgery	440001	SANFORD MEDICAL CENTER/B	1811941172		
50	$16,259	450231181	ELLINGSON	LEE	2422 20TH ST SW		JAMESTOWN	ND	58401	1871511410	43	Certified Registered Nurse Anesthetist	77001	JAMESTOWN REGIONAL MEDIC	1407957277		
194	$16,237	450226558	RAYMOND	MARK	1321 W DAKOTA PARKWAY		WILLISTON	ND	58801	1649249723	18	Opthalmology	635038	TRINITY REGIONAL EYECARE	1083653752		
468	$16,214	911770748	REYNOLDS	RYAN	1720 UNIVERSITY DR S		FARGO	ND	58103	1568662252	30	Radiology	3904	SANFORD SOUTH UNIVERSITY	1942241351		
751	$16,213	450443788	JONGEWARD	BRIAN	2812 17TH AVE S STE C		GRAND FORKS	ND	58201	1376620831	35	Chiropractor	742001	CHIROCENTER ONE	1407909120		
195	$16,185	450226700	HUBER	CHERYL	414 N 7TH ST		BISMARCK	ND	58501	1114025855	26	Psychiatry (MD)	4046	SANFORD SEVENTH AND ROSS	1811941172		
386	$16,110	450321538	CLARKE	RENEE	310 N 9TH ST		BISMARCK	ND	58501	1194700336	67	Occupational Therapy	188001	THE BONE & JOINT CENTER,	1750307872		
129	$16,093	264356339	LINK	JAMES	1424 W CENTURY AVE	SUITE 207	BISMARCK	ND	58503	1689812810	62	Psychology	7360001	LINK PSYCHOLOGICAL SERVI	1790919090		
265	$16,045	450226711	RAMDEEN	KHRIS	900 E BROADWAY AVE		BISMARCK	ND	58501	1861652471	11	Internal Medicine	501001	ST ALEXIUS MEDICAL CENTE	1205868429		
162	$16,037	450226700	KNUDSON	RICHELLE	2830 N WASHINGTON ST		BISMARCK	ND	58503	1811149156	7	Dermatology	4062	SANFORD NORTH CLINIC	1811941172		

194	$16,032	731631366	KRAEMER	CHRISTOPHE	3170 43RD ST SOUTH	STE 101	FARGO	ND	58104	1912129602	65	Physical Therapy	7726001	REHAB AUTHORITY	1730159690				
135	$16,016	450340688	KILWEIN	STEVEN	1000 HIGHWAY 12		HETTINGER	ND	58639	1437244043	48	Podiatry, Surgical chiropody	367001	WEST RIVER HEALTH SERVIC	1174606271				
19	$15,976	450335533	LAMB	DONALD	1507 UNIVERSITY DR S		FARGO	ND	58103	1558448712	24	Plastic Surgery	380001	LAMB PLASTIC SURGERY CEN	1700907912				
167	$15,962	450226558	MACLEOD	PAUL	101 3RD AVE SW		MINOT	ND	58701	1982796314	20	Orthopedic Surgery	635027	TRINITY MEDICAL GROUP	1083653752				
392	$15,960	261175213	DOMM	BRUCE	5 9TH AVE N		CASSELTON	ND	58012	1730106329	8	Family Practice	6885035	INNOVIS HEALTH, LLC DBA	1114361177				
224	$15,892	861123162	FERNANDEZ-MARTOREL	PATRICIO	310 N 10TH ST		BISMARCK	ND	58501	1033303268	37	Pediatrics	6459001	ST ALEXIUS HEART & LUNG	1194823021				
148	$15,889	261175213	KEATING	ANNE	1702 UNIVERSITY DR S		FARGO	ND	58103	1306089750	18	Opthalmology	6885031	INNOVIS HEALTH, LLC DBA	1255677084				
910	$15,821	456002491	TANGEDAHL	GUY	701 E ROSSER		BISMARCK	ND	58501	1447288352	8	Family Practice	102001	CENTER FOR FAMILY MEDICI	1619905528				
209	$15,811	450226711	ST ALEXIUS MEDICAL	TER	900 E BROADWAY AVE		BISMARCK	ND	58501	1659435105	79	Home Infusion	92002	ST ALEXIUS MEDICAL CENTE	1659435105				
102	$15,811	450226558	CADER	RUKSHANA	400 BURDICK EXPY E		MINOT	ND	58701	1295943660	10	Gastronenterology	635006	TRINITY MEDICAL GROUP	1083653752				
325	$15,790	208482521	JONES	ELIZABETH	1655 N GRANDVIEW LN #204		BISMARCK	ND	58503	1730114828	65	Physical Therapy	6950001	JONES PHYSICAL THERAPY,	1962523076				
990	$15,781	270008373	OLSEN	BLAINE	1921 N 13TH ST		BISMARCK	ND	58501	1801997143	35	Chiropractor	5675001	CHIROPRACTIC CARECENTRE,	1083813992				
38	$15,748	261175213	ESSENTIA HEALTH		275 11TH ST S		WAHPETON	ND	58075	1548446669	70	Clinic	6885019	INNOVIS HEALTH, LLC DBA	1790965440				
651	$15,742	113686120	GARMAN	AARON	1312 HIGHWAY 49 N		BEULAH	ND	58523	1457339939	8	Family Practice	6103001	COAL COUNTRY COMMUNITY H	1942288329				
119	$15,714	410724029	GULLICKS	JEAN	1428 CENTRAL AVE NE		E GRAND FORKS	MN	56721	1871520635	50	Nurse Practitioner	5548002	RIVERVIEW SPECIALTY CLIN	1811918436				
757	$15,712	502662397	SAD	CARL	204 COLLEGE DR N		DEVILS LAKE	ND	58301	1033117247	35	Chiropractor	5820001	SAD, CARL F. DC	1033117247				
301	$15,710	450227311	GEIER	RICK	820 5TH ST N		CARRINGTON	ND	58421	1063499804	1	General Practice	507001	FOSTER COUNTY MEDICAL CE	1558389338				
634	$15,687	911770748	MICKELSON	DANIEL	2400 32ND AVE S		FARGO	ND	58103	1215954854	30	Radiology	3014	SANFORD SOUTHPOINTE CLIN	1942241351				
817	$15,651	450310462	PAULSON	ROLF	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1245322676	11	Internal Medicine	9001	ALTRU HEALTH SYSTEM	1043309552				
100	$15,614	450226558	WILLIAMS	DANIEL	400 BURDICK EXPY E		MINOT	ND	58701	1104074483	40	Hand Surgery	635006	TRINITY MEDICAL GROUP	1083653752				
257	$15,583	450226558	YOUNG	MARCEL	1500 24TH AVE SW		MINOT	ND	58701	1659446730	8	Family Practice	635040	TRINITY MEDICAL GROUP SO	1083653752				
396	$15,561	450320853	HANSTED	THOMAS	620 N 9TH ST		BISMARCK	ND	58501	1134117401	41	Optometrist	202001	EYE CLINIC OF NORTH DAKO	1497853717				
303	$15,553	450311334	BOTSFORD	JOHN	2700 STATE ST		BISMARCK	ND	58503	1639125321	8	Family Practice	236006	MID DAKOTA CLINIC - GATE	1275587826				
245	$15,537	450226558	FITZPATRICK	DEMARIS	400 BURDICK EXPY E		MINOT	ND	58701	1881782225	97	Physician Assistant	635006	TRINITY MEDICAL GROUP	1083653752				
185	$15,512	450408552	JOHNSON	MAX	4350 S WASHINGTON	STE 112	GRAND FORKS	ND	58201	1679559975	18	Opthalmology	530003	RETINA CONSULTANTS LTD	1649462037				
252	$15,508	450458242	LANCHBURY	FORREST	12 6TH AVE SW		BOWMAN	ND	58623	1063460830	1	General Practice	2086001	SOUTHWEST MEDICAL CLINIC	1023083714				
467	$15,507	450422119	GOLD	MARYANN	33 9TH ST W		DICKINSON	ND	58601	1891825733	50	Nurse Practitioner	231001	GREAT PLAINS CLINIC, PC	1720075377				
168	$15,450	273134469	GROVE	JANET	1150 PRAIRIE PKWY	STE 105	WEST FARGO	ND	58078	1386867919	66	Speech Therapy	7574001	PROGRESSIVE THERAPY ASSO	1699075945				
60	$15,449	450226700	STRIEBEL	ROBERT	300 N 7TH ST		BISMARCK	ND	58501	1962593517	43	Certified Registered Nurse Anesthetist	440001	SANFORD MEDICAL CENTER/B	1811941172				
218	$15,440	273981362	FORTNEY	RACHEL	512 MAIN ST		WILLISTON	ND	58801	1487903407	65	Physical Therapy	7662001	ELITE HEALTH & FITNESS	1841594900				
142	$15,409	450226909	GARRELS	KRISTINA	801 BROADWAY NORTH		FARGO	ND	58102	1447288261	34	Urology	7742001	SANFORD BROADWAY CLINIC	1184917924				
240	$15,367	450321538	SZYMANSKI	KILA	310 N 9TH ST		BISMARCK	ND	58501	1407874266	97	Physician Assistant	188001	THE BONE & JOINT CENTER,	1750307872				
318	$15,362	450226909	JORDAN	ANDREW	1717 SOUTH UNIVERSITY DR		FARGO	ND	58103	1992723563	18	Opthalmology	7742024	SANFORD SOUTH UNIVERSITY	1184917924				
209	$15,340	261175213	HOMAN	ZENA	3000 32ND AVE S		FARGO	ND	58103	1003006651	16	Obstet/Gynecology	6885030	INNOVIS HEALTH, LLC DBA	1578907655				
48	$15,338	450226909	DANIELS	STEVEN	801 BROADWAY NORTH		FARGO	ND	58102	1710905450	5	Anesthesiology (MD)	7742001	SANFORD BROADWAY CLINIC	1184917924				
935	$15,336	450451059	NICOLAI	MICHAEL	207 1ST AVE S		NEW ROCKFORD	ND	58356	1760449417	35	Chiropractor	1260001	NICOLAI CHIROPRACTIC CEN	1760606388				
66	$15,314	261175213	SYRQUIN	MICKEY	3000 32ND AVE S		FARGO	ND	58103	1346330214	14	Neurological Surgery	6885030	INNOVIS HEALTH, LLC DBA	1578907655				
416	$15,307	450310462	GRAND FORKS FAMILY	ICINE RESI	725 HAMLINE ST		GRAND FORKS	ND	58203	1144368085	54	Home Medical Equipment	9009	ALTRU FAMILY MEDICINE RE	1043309552				
126	$15,297	450231183	ANDERSON	WAYNE	1213 15TH AVE W		WILLISTON	ND	58801	1053417840	2	General Surgery	711001	CRAVEN-HAGAN/MERCY MEDIC	1760549000				
309	$15,292	450226909	ANDERSON	STEVEN	1717 SOUTH UNIVERSITY DR		FARGO	ND	58103	1518991678	18	Opthalmology	7742024	SANFORD SOUTH UNIVERSITY	1184917924				
745	$15,279	911770748	MARSDEN	RICHARD	801 BROADWAY NORTH		FARGO	ND	58102	1801814413	30	Radiology	3001	SANFORD BROADWAY CLINIC	1942241351				
81	$15,262	911770748	KROETSCH	COREY	520 CHAUTAUQUA BLVD		VALLEY CITY	ND	58072	1194987669	2	General Surgery	3002	SANFORD HEALTH VALLEY CI	1942241351				
302	$15,250	450310462	MUUS	JOHN	3165 DEMERS AVE		GRAND FORKS	ND	58201	1518059948	7	Dermatology	9016	TRUYU AESTHETIC CENTER	1043309552				
216	$15,215	450227391	BUCHER	BENJAMIN	213 2ND AVE NE		ROLLA	ND	58367	1114282936	50	Nurse Practitioner	401001	PRESENTATION MEDICAL CEN	1265404958				
212	$15,177	450226909	CLARKE	PAULA	1720 UNIVERSITY DR S		FARGO	ND	58103	1538187265	97	Physician Assistant	7742004	SANFORD SOUTH UNIVERSITY	1184917924				
576	$15,128	450422119	GARR	KELLY	33 9TH ST W		DICKINSON	ND	58601	1578817466	97	Physician Assistant	231001	GREAT PLAINS CLINIC, PC	1720075377				
154	$15,114	450226558	WATANABOONYAKHET	PATANIT	831 S BROADWAY		MINOT	ND	58701	1629143169	75	Oncology	635001	TRINITY MEDICAL GROUP	1083653752				
198	$15,113	450226558	MATTERN	DAWN	101 3RD AVE SW		MINOT	ND	58701	1962590661	8	Family Practice	635027	TRINITY MEDICAL GROUP	1083653752				
178	$15,102	432003025	SLEEP EASY THERAPE	S LTD DBA	3301 30TH AVE S STE 103		GRAND FORKS	ND	58201	1487988747	54	Home Medical Equipment	6033002	SLEEP EASY THERAPEUTICS	1487988747				
101	$15,100	450226909	BJERKE	GREGORY	801 BROADWAY NORTH		FARGO	ND	58102	1023036753	72	Emergency Medicine	7742001	SANFORD BROADWAY CLINIC	1184917924				
244	$15,089	450226909	CARR	KRISTEN	2400 32ND AVE S		FARGO	ND	58103	1538208806	97	Physician Assistant	7742008	SANFORD SOUTHPOINTE CLIN	1184917924				
593	$15,034	450358986	HAUFF	ROSEMARY	4 FIRST AVE SE		KULM	ND	58456	1225062722	97	Physician Assistant	571001	WISHEK RURAL HEALTH CLIN	1932300951				
146	$15,020	450226909	KADLEC	KELLY	1717 SOUTH UNIVERSITY DR		FARGO	ND	58103	1750308425	62	Psychology	7742027	SANFORD 1717 MEDICAL BUI	1184917924				
20	$15,016	450226700	RUSSELL	SEAN	300 N 7TH ST		BISMARCK	ND	58501	1750493052	33	Thoracic Surgery	440001	SANFORD MEDICAL CENTER/B	1811941172				
252	$15,011	261175213	TOPLEY	STUART	3902 13TH AVE S		FARGO	ND	58103	1871539304	8	Family Practice	6885032	INNOVIS HEALTH, LLC DBA	1437495264				
447	$15,008	592852900	LINCARE INC		507 DAKOTA AVE		WAHPETON	ND	58075	1043384399	54	Home Medical Equipment	5604003	LINCARE INC	1043384399				
751	$15,005	450460228	CARTER	JOSHUA	408 1ST ST NW #A		MANDAN	ND	58554	1225176936	35	Chiropractor	5663001	CARTER CHIROPRACTIC PC D	1174645550				
275	$14,997	450422119	FULLMER	CLARK	33 9TH ST W		DICKINSON	ND	58601	1649240557	48	Podiatry, Surgical chiropody	231001	GREAT PLAINS CLINIC, PC	1720075377				
284	$14,989	205749003	BREITBACH	BRANDI	1303 E CENTRAL AVE		BISMARCK	ND	58501	1467572214	67	Occupational Therapy	6880001	RED DOOR PEDIATRIC THERA	1639257033				
75	$14,988	450226558	LIN	STEVEN	1 BURDICK EXPRESSWAY W		MINOT	ND	58701	1720041692	5	Anesthesiology (MD)	635031	TRINITY MEDICAL GROUP AN	1083653752				
230	$14,987	450226909	SHELDON	PEGGY	801 BROADWAY NORTH		FARGO	ND	58102	1104857200	11	Internal Medicine	7742001	SANFORD BROADWAY CLINIC	1184917924				
68	$14,956	450226558	TIN-MAUNG	BRIAN	1 BURDICK EXPRESSWAY W		MINOT	ND	58701	1558346882	5	Anesthesiology (MD)	635031	TRINITY MEDICAL GROUP AN	1083653752				
964	$14,937	450456273	SMITH	AIMEE	322 4TH AVE SE		HILLSBORO	ND	58045	1134175417	35	Chiropractor	1779001	SMITH CHIROPRACTIC, INC.	1730198748				
68	$14,920	861123162	WHITE	PETER	310 N 10TH ST		BISMARCK	ND	58501	1508966524	5	Anesthesiology (MD)	6459001	ST ALEXIUS HEART & LUNG	1194823021				
356	$14,915	450321538	GERRITY	JOSHUA	310 N 9TH ST		BISMARCK	ND	58501	1447437256	67	Occupational Therapy	188001	THE BONE & JOINT CENTER,	1750307872				
858	$14,915	911770748	SHOOK	ROBERT	1720 UNIVERSITY DR S		FARGO	ND	58103	1548282106	30	Radiology	3904	SANFORD SOUTH UNIVERSITY	1942241351				

153	$14,903	261175213	GEFROH ELLISON	STEFANIE	3000 32ND AVE S		FARGO	ND	58103	1326072232	16	Obstet/Gynecology	6885030	INNOVIS HEALTH, LLC DBA	1578907655		
394	$14,896	261175213	NELSON	SUSAN	275 11TH ST S		WAHPETON	ND	58075	1174617732	8	Family Practice	6885019	INNOVIS HEALTH, LLC DBA	1790965440		
396	$14,865	263047434	ZINK	JAMIE	4622 40TH AVE S		FARGO	ND	58104	1235325549	97	Physician Assistant	7174001	7 DAY CLINIC OSGOOD	1619123593		
647	$14,839	270993534	NELSON	ERIC	20 WEST BROADWAY		WILLISTON	ND	58801	1538499793	35	Chiropractor	7511001	HEALTH SOURCE OF WILLIST	1740502046		
247	$14,832	450226558	PUGATCH	BRUCE	400 BURDICK EXPY E		MINOT	ND	58701	1700862232	11	Internal Medicine	635006	TRINITY MEDICAL GROUP	1083653752		
250	$14,791	450226700	THOMPSON	ASHLEY	1040 TOCOMA AVE		BISMARCK	ND	58504	1619108420	50	Nurse Practitioner	4059	SANFORD SOUTH CLINIC	1811941172		
212	$14,785	450226909	SKATVOLD	LINDA	2400 32ND AVE S		FARGO	ND	58103	1740201961	50	Nurse Practitioner	7742008	SANFORD SOUTHPOINTE CLIN	1184917924		
293	$14,756	450226700	FRANK	SALLY	209 7 ST N		BISMARCK	ND	58501	1215248547	50	Nurse Practitioner	4048	SANFORD SEVENTH AND THAY	1811941172		
310	$14,744	450226909	DAHL	LINDSEY	2400 32ND AVE S		FARGO	ND	58103	1962529446	11	Internal Medicine	7742008	SANFORD SOUTHPOINTE CLIN	1184917924		
290	$14,734	300539607	PENGILLY	PAULA	503 PARK ST W SUITE B		PARK RIVER	ND	58270	1306839865	50	Nurse Practitioner	7348001	MIDGARDEN FAMILY CLINIC,	1619119591		
48	$14,720	450226909	WILLIAMS	ELISA	801 BROADWAY NORTH		FARGO	ND	58102	1598857088	5	Anesthesiology (MD)	7742001	SANFORD BROADWAY CLINIC	1184917924		
74	$14,717	861123162	LASZEWSKI	LINDA	310 N 10TH ST		BISMARCK	ND	58501	1336247253	5	Anesthesiology (MD)	6459001	ST ALEXIUS HEART & LUNG	1194823021		
283	$14,706	261175213	BUSCH	TANIA	2430 20TH ST SW		JAMESTOWN	ND	58401	1447378104	50	Nurse Practitioner	6885018	INNOVIS HEALTH, LLC DBA	1073793725		
49	$14,701	450226909	GOSWAMI	ARUNDHATI	801 BROADWAY NORTH		FARGO	ND	58102	1225250715	5	Anesthesiology (MD)	7742001	SANFORD BROADWAY CLINIC	1184917924		
124	$14,680	450226909	HUSHKA	DOUGLAS	801 BROADWAY NORTH		FARGO	ND	58102	1013934975	72	Emergency Medicine	7742001	SANFORD BROADWAY CLINIC	1184917924		
271	$14,655	911770748	MACHAYYA	JON	1720 UNIVERSITY DR S		FARGO	ND	58103	1437323557	30	Radiology	3904	SANFORD SOUTH UNIVERSITY	1942241351		
787	$14,655	450310462	THOMPSON	SUSAN	201 E 3RD AVE S		CAVALIER	ND	58220	1245327899	11	Internal Medicine	37001	ALTRU CAVALIER	1053400523		
158	$14,654	450226558	MULLIN	SARAH	831 S BROADWAY		MINOT	ND	58701	1174613038	8	Family Practice	635001	TRINITY MEDICAL GROUP	1083653752		
128	$14,628	450226909	CHRISTIANSON	KENNETH	2400 32ND AVE S		FARGO	ND	58103	1154349884	62	Psychology	7742008	SANFORD SOUTHPOINTE CLIN	1184917924		
2,001	$14,603	911770748	SANFORD CLINIC WES	RGO/LAB	1220 SHEYENNE ST		WEST FARGO	ND	58078	1609144294	69	Independent Laboratory	3020	SANFORD WEST FARGO CLINI	1942241351		
637	$14,596	911770748	WEINER	MICHAEL	801 BROADWAY NORTH		FARGO	ND	58102	1568484145	30	Radiology	3001	SANFORD BROADWAY CLINIC	1942241351		
177	$14,591	450458948	BOSCH	DEBRA	309 N MANDAN ST STE 1		BISMARCK	ND	58501	1134244882	80	Clinical Social Worker	2045001	CHAMBERS & BLOHM PSYCHOL	1114045465		
45	$14,576	450231181	METZGER	JAMES	2422 20TH ST SW		JAMESTOWN	ND	58401	1548407372	43	Certified Registered Nurse Anesthetist	77001	JAMESTOWN REGIONAL MEDIC	1407957277		
463	$14,533	208879803	ZIMMERMAN	CHAD	3175 SIENNA DR STE 105		FARGO	ND	58104	1225106099	35	Chiropractor	7051001	HEALTHSOURCE OF FARGO-MO	1639367121		
115	$14,529	450226700	CONNELL	GUY	300 N 7TH ST		BISMARCK	ND	58501	1598788523	72	Emergency Medicine	440001	SANFORD MEDICAL CENTER/B	1811941172		
6	$14,516	752608036	ORTHOFIX INC		3451 PLANO PARKWAY		LEWISVILLE	TX	75056	1235136060	54	Home Medical Equipment	8051001	ORTHOFIX INC	1235136060		
231	$14,495	470757739	METZ	DANIEL	683 STATE AVE STE B		DICKINSON	ND	58601	1831290303	65	Physical Therapy	1985001	OMAHA THERAPY INC. DBA R	1730280371		
105	$14,440	450226909	BAKKE	ANDREW	801 BROADWAY NORTH		FARGO	ND	58102	1659597714	72	Emergency Medicine	7742001	SANFORD BROADWAY CLINIC	1184917924		
169	$14,424	450226909	FABER	KEVIN	2801 UNIVERSITY DR S		FARGO	ND	58103	1720095482	13	Neurology	7742005	SANFORD 2801 MEDICAL BUI	1184917924		
386	$14,418	450226909	KOHLMAN-PETRICK	JOELLEN	801 BROADWAY NORTH		FARGO	ND	58102	1114985454	6	Cardivascular Disease	7742001	SANFORD BROADWAY CLINIC	1184917924		
463	$14,413	450226909	KOUBA	CRAIG	801 BROADWAY NORTH		FARGO	ND	58102	1871511436	6	Cardivascular Disease	7742001	SANFORD BROADWAY CLINIC	1184917924		
730	$14,412	450425136	COOK	JAMES	103 9TH ST N STE 1		WAHPETON	ND	58075	1528052917	35	Chiropractor	1212001	COOK CHIROPRACTIC CLINIC	1093737066		
218	$14,368	261175213	SLECKMAN	JOSEPH	1702 UNIVERSITY DR S		FARGO	ND	58103	1184652414	76	Heumatology	6885031	INNOVIS HEALTH, LLC DBA	1255677084		
115	$14,357	450310462	BABA	TAKETO	1200 S COLUMBIA RD		GRAND FORKS	ND	58201	1003047952	72	Emergency Medicine	62001	ALTRU HOSPITAL	1154346161		
453	$14,341	450457949	WALTON	STACEY	10 9TH AVE E		LISBON	ND	58054	1801868062	97	Physician Assistant	1956001	FAMILY MEDICAL CLINIC, P	1952331159		
97	$14,311	450226909	MUNTEAN	EUGENIU	700 1ST AVE S		FARGO	ND	58103	1407017882	13	Neurology	7742007	SANFORD NEUROSCIENCE CLI	1184917924		
166	$14,239	450226558	MAXSON	JANET	831 S BROADWAY		MINOT	ND	58701	1851462014	50	Nurse Practitioner	635001	TRINITY MEDICAL GROUP	1083653752		
64	$14,236	456002186	WILLISTON AMBULANC	RV	22 E BDWY		WILLISTON	ND	58801	1174737712	59	Ambulance Service	1854001	WILLISTON AMBULANCE SERV	1174737712		
106	$14,229	208928600	SAYLER	KATHLEEN	3060 FRONTIER WAY S		FARGO	ND	58104	1003168444	67	Occupational Therapy	6961001	PEDIATRIC THERAPY PARTNE	1457479958		
91	$14,220	208446818	ARNTSON	BARBARA	2750 GATEWAY DRIVE STE B		GRAND FORKS	ND	58203	1932366481	68	Licensed Registered Dietitian	7369001	ARNTSON ENTERPRISES INC	1467617464		
278	$14,208	450451306	KULKARNI	AMIT	314 OHMER ST		BOTTINEAU	ND	58318	1710939996	11	Internal Medicine	1262001	ST ANDREWS BOTTINEAU CLI	1902803802		
116	$14,198	450226909	SAHA	JOYOTI	2400 32ND AVE S		FARGO	ND	58103	1851624944	16	Obstet/Gynecology	7742008	SANFORD SOUTHPOINTE CLIN	1184917924		
113	$14,162	450387077	LOMMEN	DAVID	2808 17TH AVE S		GRAND FORKS	ND	58201	1356375646	62	Psychology	203001	LIPP CARLSON LOMMEN & WI	1043316961		
462	$14,133	450226711	KLABUNDE	LORI	900 E BROADWAY AVE		BISMARCK	ND	58501	1912925876	97	Physician Assistant	501001	ST ALEXIUS MEDICAL CENTE	1205868429		
118	$14,115	450226909	MADSEN	SHANE	801 BROADWAY NORTH		FARGO	ND	58102	1669693982	72	Emergency Medicine	7742001	SANFORD BROADWAY CLINIC	1184917924		
285	$14,107	208482521	MEES	MELISSA	1655 N GRANDVIEW LN #204		BISMARCK	ND	58503	1942274758	65	Physical Therapy	6950001	JONES PHYSICAL THERAPY,	1962523076		
55	$14,106	450226909	INDERGAARD	PATRICK	801 BROADWAY NORTH		FARGO	ND	58102	1114944881	5	Anesthesiology (MD)	7742001	SANFORD BROADWAY CLINIC	1184917924		
293	$14,101	450226711	SANDHU	ANKUR	900 E BROADWAY AVE		BISMARCK	ND	58501	1285838698	11	Internal Medicine	501001	ST ALEXIUS MEDICAL CENTE	1205868429		
113	$14,082	450226909	KLOSTERMAN	BRUCE	801 BROADWAY NORTH		FARGO	ND	58102	1740207414	72	Emergency Medicine	7742001	SANFORD BROADWAY CLINIC	1184917924		
198	$14,080	501522192	KVASAGER	MARLYS	1133A S COLUMBIA RD		GRAND FORKS	ND	58203	1851531008	80	Clinical Social Worker	7614001	KVASAGER MARLYS, LICSW	1851531008		
512	$14,078	450311334	DIETZ	TRACI	401 N 9TH ST		BISMARCK	ND	58501	1891062089	50	Nurse Practitioner	236001	MID DAKOTA CLINIC	1275587826		
553	$14,073	450226909	SOLIEN	THOMAS	2400 32ND AVE S		FARGO	ND	58103	1578585113	35	Chiropractor	7742008	SANFORD SOUTHPOINTE CLIN	1184917924		
155	$14,073	450450736	JOHNSON	DEBORAH	1015 S BROADWAY STE 37		MINOT	ND	58701	1104996271	44	Psychiatric Nurse	1496001	CENTER FOR MIND & BODY W	1104996271		
324	$14,058	450226700	SHRESTHA	BHAJA	222 N 7TH ST		BISMARCK	ND	58501	1831354679	29	Pulmonary Diseases	4001	SANFORD CLINIC	1811941172		
176	$14,038	201278075	WALTON	KARIN	1407 24TH AVE S STE 520		GRAND FORKS	ND	58201	1740462605	88	#N/A	6359001	AGASSIZ ASSOCIATES, PLLC	1700972122		
119	$14,034	450311516	JASZCZAK	LESZEK	3 EAST 4TH ST #100		WILLISTON	ND	58801	1467528455	30	Radiology	114001	WILLISTON RADIOLOGY CONS	1942375852		
271	$14,021	450310462	DORMAN	SETH	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1841205689	50	Nurse Practitioner	9001	ALTRU HEALTH SYSTEM	1043309552		
56	$13,991	450310462	SPIVEY	MATTHEW	1200 S COLUMBIA RD		GRAND FORKS	ND	58201	1790743268	43	Certified Registered Nurse Anesthetist	62001	ALTRU HOSPITAL	1154346161		
318	$13,970	261175213	KUHLMANN	CRAIG	1401 13TH AVE E		WEST FARGO	ND	58078	1316989882	96	#N/A	6885033	INNOVIS HEALTH, LLC DBA	1487990339		
116	$13,942	450310462	USATII	ANATOLIE	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1306890710	2	General Surgery	9001	ALTRU HEALTH SYSTEM	1043309552		
50	$13,936	450226700	HAWK	JAMIE	300 N 7TH ST		BISMARCK	ND	58501	1033123351	43	Certified Registered Nurse Anesthetist	440001	SANFORD MEDICAL CENTER/B	1811941172		
193	$13,905	450411741	OPGRANDE	J. DONALD	2829 S UNIV DR STE 2		FARGO	ND	58103	1184641656	20	Orthopedic Surgery	782001	OPGRANDE, J. DONALD MD P	1063747012		
525	$13,904	450459227	BURCKHARD-TEETS	TIFANY	1825 16TH ST SW		MINOT	ND	58701	1982762407	35	Chiropractor	2089001	TIFANY A. BURCKHARD-TEET	1528199387		
600	$13,887	450226909	SARJI	RAWA	801 BROADWAY NORTH		FARGO	ND	58102	1396978128	6	Cardivascular Disease	7742001	SANFORD BROADWAY CLINIC	1184917924		
639	$13,883	920178452	PAAPE	KEVIN	3240 15TH ST S STE C		FARGO	ND	58104	1063485084	35	Chiropractor	5831001	HEALING ARTS CHIROPRACTI	1598959793		
290	$13,879	261175213	LAMPL	SHILA	275 11TH ST S		WAHPETON	ND	58075	1487661351	41	Optometrist	6885019	INNOVIS HEALTH, LLC DBA	1790965440		

310	$13,878	911770748	FALK	KARA	904 5TH AVE NE		JAMESTOWN	ND	58401	1548362502	50	Nurse Practitioner	3005	SANFORD HEALTH JAMESTOWN	1942241351		
248	$13,877	450226700	KUMAR	PARAG	765 W INTERSTATE AVE		BISMARCK	ND	58503	1780795773	37	Pediatrics	4072	SANFORD CHILDREN'S NORTH	1811941172		
171	$13,856	450310462	KAUSHIK	SHIVU	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1871709295	29	Pulmonary Diseases	9001	ALTRU HEALTH SYSTEM	1043309552		
10	$13,853	450310462	BROWN	MICHAEL	1200 S COLUMBIA RD		GRAND FORKS	ND	58201	1679670459	16	Obstet/Gynecology	62001	ALTRU HOSPITAL	1154346161		
136	$13,844	450226711	ECKROTH	JANEL	900 E BROADWAY AVE		BISMARCK	ND	58501	1902167117	50	Nurse Practitioner	501001	ST ALEXIUS MEDICAL CENTE	1205868429		
213	$13,822	204854786	NEWTON	YOLANDA	1700 11TH ST W		WILLISTON	ND	58801	1841482304	16	Obstet/Gynecology	6825001	GREAT PLAINS WOMENS HEAL	1144277484		
2,697	$13,788	911770748	SANFORD SOUTHPOINT	INIC LAB	2400 32ND AVE S		FARGO	ND	58103	1609144294	69	Independent Laboratory	3014	SANFORD SOUTHPOINTE CLIN	1942241351		
132	$13,762	450226700	EVANS	PATRICK	801 21ST AVE SE		MINOT	ND	58701	1285688226	8	Family Practice	4065	SANFORD HEALTH WALK-IN C	1811941172		
540	$13,760	450226909	MCDOWELL	CHRISTINA	801 BROADWAY NORTH		FARGO	ND	58102	1316153737	6	Cardivascular Disease	7742001	SANFORD BROADWAY CLINIC	1184917924		
163	$13,745	450226711	MICKELSON	KEVIN	900 E BROADWAY AVE		BISMARCK	ND	58501	1396837761	72	Emergency Medicine	459001	ST ALEXIUS MEDICAL CENTE	1306832654		
264	$13,734	450226909	SANDA	JANELLE	801 BROADWAY NORTH		FARGO	ND	58102	1063434611	11	Internal Medicine	7742001	SANFORD BROADWAY CLINIC	1184917924		
211	$13,727	450226909	MEARS	JULIE	2400 32ND AVE S		FARGO	ND	58103	1508136003	50	Nurse Practitioner	7742008	SANFORD SOUTHPOINTE CLIN	1184917924		
260	$13,727	450311334	TOMAN	KRISTIE	828 KIRKWOOD MALL		BISMARCK	ND	58504	1548452733	37	Pediatrics	236002	MID DAKOTA CLINIC-KIRKWO	1275587826		
39	$13,725	450226909	COLON-DEJESUS	MANUEL	801 BROADWAY NORTH		FARGO	ND	58102	1083702427	5	Anesthesiology (MD)	7742001	SANFORD BROADWAY CLINIC	1184917924		
420	$13,713	450231183	NORBY	CHERISE	1213 15TH AVE W		WILLISTON	ND	58801	1669750469	50	Nurse Practitioner	711001	CRAVEN-HAGAN/MERCY MEDIC	1760549000		
662	$13,694	450438324	GERMAN	DAVID	1033 BASIN AVE		BISMARCK	ND	58504	1699741884	35	Chiropractor	1669001	GERMAN, PC	1760719173		
160	$13,676	450226711	ROLLER	BENEDICT	900 E BROADWAY AVE		BISMARCK	ND	58501	1427140888	1	General Practice	459001	ST ALEXIUS MEDICAL CENTE	1306832654		
217	$13,665	450226700	HAALAND	ROBIN	414 N 7TH ST		BISMARCK	ND	58501	1861590507	26	Psychiatry (MD)	4046	SANFORD SEVENTH AND ROSS	1811941172		
54	$13,649	450310462	NUELLE	DAVID	1200 S COLUMBIA RD		GRAND FORKS	ND	58201	1376737536	43	Certified Registered Nurse Anesthetist	62001	ALTRU HOSPITAL	1154346161		
271	$13,623	450226711	HOOVESTOL	RYAN	900 E BROADWAY AVE		BISMARCK	ND	58501	1972769677	1	General Practice	501001	ST ALEXIUS MEDICAL CENTE	1205868429		
139	$13,599	450226700	GEHRIG	LAURA	225 N 7TH ST		BISMARCK	ND	58501	1982796892	20	Orthopedic Surgery	4061	SANFORD SEVENTH AND THAY	1811941172		
496	$13,576	30477097	BERGAN	CHAD	2004 TWIN CITY DR		MANDAN	ND	58554	1083675987	65	Physical Therapy	5470001	DAKOTA PHYSICAL THERAPY,	1740211267		
155	$13,573	450226700	MILLER	STEPHANIE	222 N 7TH ST		BISMARCK	ND	58501	1104024488	13	Neurology	4001	SANFORD CLINIC	1811941172		
459	$13,563	450310462	BOETTCHER	TERRA	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1124125901	41	Optometrist	9001	ALTRU HEALTH SYSTEM	1043309552		
423	$13,559	450226711	HOFFERBER	RICK	900 E BROADWAY AVE		BISMARCK	ND	58501	1811073174	50	Nurse Practitioner	501001	ST ALEXIUS MEDICAL CENTE	1205868429		
29	$13,548	450226909	MATTHYS	GARY	801 BROADWAY NORTH		FARGO	ND	58102	1922025568	20	Orthopedic Surgery	7742001	SANFORD BROADWAY CLINIC	1184917924		
847	$13,544	450433194	KAHL	JAMIE	425 S 7TH ST		BISMARCK	ND	58504	1548272263	35	Chiropractor	572001	SOUTHRIDGE CHIROPRACTIC	1205848108		
52	$13,543	450310462	CHARETTE	SCOTT	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1730274085	2	General Surgery	9001	ALTRU HEALTH SYSTEM	1043309552		
188	$13,528	450226711	GAYTON	DAVID	900 E BROADWAY AVE		BISMARCK	ND	58501	1356433718	72	Emergency Medicine	459001	ST ALEXIUS MEDICAL CENTE	1306832654		
709	$13,528	208500426	LIVESAY	TRAVIS	1136 W DIVIDE AVE		BISMARCK	ND	58501	1205971058	35	Chiropractor	6941001	DISCOVER HEALTH CHIROPRA	1205971058		
112	$13,527	450310462	MCKINNON	WILLIAM	1200 S COLUMBIA RD		GRAND FORKS	ND	58201	1881786218	72	Emergency Medicine	62001	ALTRU HOSPITAL	1154346161		
185	$13,512	450226700	DOLL	SARA	300 N 7TH ST		BISMARCK	ND	58501	1679801153	50	Nurse Practitioner	440001	SANFORD MEDICAL CENTER/B	1811941172		
259	$13,504	450226711	DATZ	KURT	900 E BROADWAY AVE		BISMARCK	ND	58501	1720159973	11	Internal Medicine	501001	ST ALEXIUS MEDICAL CENTE	1205868429		
357	$13,491	263531132	IHRY HODEM	KAMERON	550 13 AVE E		WEST FARGO	ND	58078	1811907256	65	Physical Therapy	7198001	APEX PHYSICAL THERAPY AN	1417109059		
180	$13,484	450226909	KRINGLIE	JENNIFER	2601 BROADWAY N		FARGO	ND	58102	1235151721	50	Nurse Practitioner	7742003	SANFORD NORTH FARGO CLIN	1184917924		
97	$13,484	450226909	HINTZ	WARREN	801 BROADWAY NORTH		FARGO	ND	58102	1841217700	72	Emergency Medicine	7742001	SANFORD BROADWAY CLINIC	1184917924		
972	$13,463	450433194	TENBROEK	SHERI	425 S 7TH ST		BISMARCK	ND	58504	1639181464	35	Chiropractor	572001	SOUTHRIDGE CHIROPRACTIC	1205848108		
12	$13,453	208056374	BECKER	RICKY	1500 INTERCHANGE AVE	STE 100	BISMARCK	ND	58501	1477655660	24	Plastic Surgery	1079002	BECKER PLASTIC SURGERY C	1205082948		
43	$13,435	261175213	GEBUR	JOSHUA	3000 32ND AVE S		FARGO	ND	58103	1639115868	2	General Surgery	6885030	INNOVIS HEALTH, LLC DBA	1578907655		
923	$13,421	450433194	KAHL	CHAD	425 S 7TH ST		BISMARCK	ND	58504	1346252178	35	Chiropractor	572001	SOUTHRIDGE CHIROPRACTIC	1205848108		
172	$13,408	450306787	PATEL	SURESH	909 2ND ST		LANGDON	ND	58249	1235151705	8	Family Practice	54001	CAVALIER COUNTY MEMORIAL	1750328662		
229	$13,363	450340688	THORNGREN	FRANK	1000 HIGHWAY 12		HETTINGER	ND	58639	1386738730	8	Family Practice	367001	WEST RIVER HEALTH SERVIC	1174606271		
158	$13,356	450226909	OSOWSKI	ELIZABETH	2701 13TH AVE S		FARGO	ND	58103	1730497660	50	Nurse Practitioner	7742009	SANFORD CHILDRENS SOUTHW	1184917924		
1,486	$13,336	450226558	TRINITY COMMUNITY	WE	1321 W DAKOTA PARKWAY		WILLISTON	ND	58801	1316273998	69	Independent Laboratory	635039	TRINITY COMMUNITY CLINIC	1083653752		
34	$13,335	208056374	BECKER	RICKY	1500 INTERCHANGE AVE	STE 100	BISMARCK	ND	58501	1477655660	24	Plastic Surgery	1079001	BECKER PLASTIC SURGERY,	1619195807		
40	$13,303	261175213	MAHONEY	TIMOTHY	3000 32ND AVE S		FARGO	ND	58103	1689608192	2	General Surgery	6885030	INNOVIS HEALTH, LLC DBA	1578907655		
191	$13,295	450226700	REINKE	SARA	765 W INTERSTATE AVE		BISMARCK	ND	58503	1871721811	37	Pediatrics	4072	SANFORD CHILDREN'S NORTH	1811941172		
159	$13,295	861123162	MARTS	BOYD	310 N 10TH ST		BISMARCK	ND	58501	1295823425	2	General Surgery	6459001	ST ALEXIUS HEART & LUNG	1194823021		
528	$13,283	911770748	CATALAN	RICHARD	1720 UNIVERSITY DR S		FARGO	ND	58103	1194771097	30	Radiology	3904	SANFORD SOUTH UNIVERSITY	1942241351		
191	$13,279	450226711	ALLEN	CHARLES	900 E BROADWAY AVE		BISMARCK	ND	58501	1174609432	72	Emergency Medicine	459001	ST ALEXIUS MEDICAL CENTE	1306832654		
117	$13,275	450450254	SCHMITZ	CATHY	600 N 9TH ST		BISMARCK	ND	58501	1194743542	43	Certified Registered Nurse Anesthetist	1261001	BISMARCK SURGICAL ASSOCI	1487814356		
148	$13,273	203901662	BECK	DEAN	600 2 ST S STE 201		BISMARCK	ND	58504	1821032053	80	Clinical Social Worker	6732001	NU VATION HEALTH SERVICE	1982754552		
48	$13,261	450310462	MACLEOD	MARY	1200 S COLUMBIA RD		GRAND FORKS	ND	58201	1972695302	43	Certified Registered Nurse Anesthetist	62001	ALTRU HOSPITAL	1154346161		
676	$13,260	20761623	ROLETTE COUNTY PUB	HEALTH	211 1ST AVE NE		ROLLA	ND	58367	1346300704	60	Public Health or Welfare Agency	6738001	ROLETTE COUNTY PUBLIC HE	1346300704		
311	$13,250	261175213	ROHLA	RICHARD	3902 13TH AVE S		FARGO	ND	58103	1578598553	8	Family Practice	6885032	INNOVIS HEALTH, LLC DBA	1437495264		
231	$13,245	450226909	JUHL	KIRSTEN	2400 32ND AVE S		FARGO	ND	58103	1902092620	11	Internal Medicine	7742008	SANFORD SOUTHPOINTE CLIN	1184917924		
109	$13,231	208818487	MCDONALD	SEAN	2301 25TH ST S SUITE I		FARGO	ND	58103	1942228523	97	Physician Assistant	7030001	MATTHYS, GARY, MD	1568643823		
59	$13,230	450310462	STRAND	JAMES	1200 S COLUMBIA RD		GRAND FORKS	ND	58201	1699861955	43	Certified Registered Nurse Anesthetist	62001	ALTRU HOSPITAL	1154346161		
228	$13,211	450228899	UNTERSEHER	JEANNE	600 1ST STREET SE		MAYVILLE	ND	58257	1932120276	50	Nurse Practitioner	3076	SANFORD MAYVILLE	1366478760		
275	$13,206	263531132	ERSTAD	BROOKE	550 13 AVE E		WEST FARGO	ND	58078	1629095716	65	Physical Therapy	7198001	APEX PHYSICAL THERAPY AN	1417109059		
949	$13,181	456004343	CUSTER HEALTH		210 2ND AVE NW		MANDAN	ND	58554	1659379436	60	Public Health or Welfare Agency	4479001	CUSTER HEALTH	1659379436		
238	$13,159	450226558	DODIN	EMAD	400 BURDICK EXPY E		MINOT	ND	58701	1295929255	6	Cardivascular Disease	635006	TRINITY MEDICAL GROUP	1083653752		
159	$13,152	450226909	BJORKLUND	GREGORY	700 1ST AVE S		FARGO	ND	58103	1932127669	97	Physician Assistant	7742007	SANFORD NEUROSCIENCE CLI	1184917924		
171	$13,135	450226700	CIAVARELLA	TANA	225 N 7TH ST		BISMARCK	ND	58501	1891891214	97	Physician Assistant	4061	SANFORD SEVENTH AND THAY	1811941172		
94	$13,122	205925283	PETERSEN	TROY	1165 S COLUMBIA RD STE C		GRAND FORKS	ND	58201	1073697157	19	Oral Surgery	6622001	VALLEY ORAL & FACIAL SUR	1801959788		
84	$13,106	450311334	LUEBKE	AARON	401 N 9TH ST		BISMARCK	ND	58501	1699929281	11	Internal Medicine	236001	MID DAKOTA CLINIC	1275587826		

769	$13,104	911778400	SCHWARTZ	KENT	503 E MAIN ST PLAZA 2		MANDAN	ND	58554	1992880363	35	Chiropractor	6620001	SCHWARTZ FAMILY CHIROPRA	1730266636		
182	$13,091	450226909	MONTPLAISIR	PAMELA	2400 32ND AVE S		FARGO	ND	58103	1437470200	50	Nurse Practitioner	7742008	SANFORD SOUTHPOINTE CLIN	1184917924		
347	$13,081	450226558	WELCH	ANN	400 BURDICK EXPY E		MINOT	ND	58701	1962577411	50	Nurse Practitioner	635006	TRINITY MEDICAL GROUP	1083653752		
248	$13,077	911770748	BRAUNAGEL	BRADLEY	520 CHAUTAUQUA BLVD		VALLEY CITY	ND	58072	1396762399	8	Family Practice	3002	SANFORD HEALTH VALLEY CI	1942241351		
76	$13,069	450310462	OSOWSKI	LYNN	1200 S COLUMBIA RD		GRAND FORKS	ND	58201	1528175155	43	Certified Registered Nurse Anesthetist	62001	ALTRU HOSPITAL	1154346161		
56	$13,056	450226419	SKIPPER	RONALD	800 S MAIN AVE		RUGBY	ND	58368	1932143880	2	General Surgery	18001	GOOD SAMARITAN HOSPITAL	1588751325		
593	$13,045	450435819	MINDT III	JOHN	1211 MEMORIAL HWY STE 7		BISMARCK	ND	58504	1376665372	35	Chiropractor	1457001	ALIGN-MINDT CHIROPRACTIC	1376665372		
204	$13,042	261175213	JONES	JENIFER	3902 13TH AVE S		FARGO	ND	58103	1588698088	37	Pediatrics	6885032	INNOVIS HEALTH, LLC DBA	1437495264		
150	$13,039	450226909	ERPELDING	JASON	2301 S 25TH ST STE A		FARGO	ND	58103	1013131325	40	Hand Surgery	7742011	SANFORD ORTHOPEDICS SPOR	1184917924		
171	$13,038	450226909	CROSS	CHERI	2400 32ND AVE S		FARGO	ND	58103	1215287495	50	Nurse Practitioner	7742008	SANFORD SOUTHPOINTE CLIN	1184917924		
981	$13,025	203568057	MESSER	AMANDA	1050 E INTERSTATE AVE	#21	BISMARCK	ND	58503	1154359677	35	Chiropractor	6690001	MESSER CHIROPRACTIC, P.C	1093997868		
161	$13,025	450226558	SAFFARIAN	NASSER	20 BURDICK EXPRESSWAY W		MINOT	ND	58701	1073684122	39	Nephrology	635029	TRINITY MEDICAL GROUP	1083653752		
51	$13,014	450226909	HABLI	NADER	801 BROADWAY NORTH		FARGO	ND	58102	1265660757	5	Anesthesiology (MD)	7742001	SANFORD BROADWAY CLINIC	1184917924		
389	$13,013	861123162	HUGHES	JAMES	310 N 10TH ST		BISMARCK	ND	58501	1124119078	29	Pulmonary Diseases	6459001	ST ALEXIUS HEART & LUNG	1194823021		
143	$12,998	450306787	NOYES	RANDAL	909 2ND ST		LANGDON	ND	58249	1912979345	8	Family Practice	54001	CAVALIER COUNTY MEMORIAL	1750328662		
230	$12,993	450226558	KENNEDY	JAMES	1321 W DAKOTA PARKWAY		WILLISTON	ND	58801	1225102304	1	General Practice	635039	TRINITY COMMUNITY CLINIC	1083653752		
44	$12,986	450231181	SCHOTT	ANDREW	2422 20TH ST SW		JAMESTOWN	ND	58401	1891068045	43	Certified Registered Nurse Anesthetist	77001	JAMESTOWN REGIONAL MEDIC	1407957277		
101	$12,972	450226909	TESKE	OWEN GARTH	801 BROADWAY NORTH		FARGO	ND	58102	1669403762	72	Emergency Medicine	7742001	SANFORD BROADWAY CLINIC	1184917924		
353	$12,968	450231183	ADDUCCI	JOSEPH	1213 15TH AVE W		WILLISTON	ND	58801	1710042817	16	Obstet/Gynecology	711001	CRAVEN-HAGAN/MERCY MEDIC	1760549000		
586	$12,967	912124548	PEDERSON	MARK	603 N MAIN ST		WARREN	MN	56762	1215045604	35	Chiropractor	5363001	FAMILY CHIROPRACTIC	1598875171		
242	$12,963	43755538	SCHOCK	JOEL	3290 20TH ST S		FARGO	ND	58104	1790789576	8	Family Practice	5917001	PLAINS MEDICAL CLINIC LL	1073698460		
146	$12,959	208976315	RADERMACHER	KATHARINE	3001 11TH ST S		FARGO	ND	58103	1700811338	66	Speech Therapy	5881001	BEYOND BOUNDARIES SPEECH	1790999605		
198	$12,959	450226700	MELBERG	TIFFANY	414 N 7TH ST		BISMARCK	ND	58501	1063782126	44	Psychiatric Nurse	4046	SANFORD SEVENTH AND ROSS	1811941172		
631	$12,939	412022652	GALSTAD	RICHARD	2600 DEMERS AVE #110		GRAND FORKS	ND	58201	1194712091	35	Chiropractor	1417001	MIDWEST CHIROPRACTIC	1952582983		
135	$12,937	450226558	RHULE	GARETT	1321 W DAKOTA PARKWAY		WILLISTON	ND	58801	1972791259	11	Internal Medicine	635039	TRINITY COMMUNITY CLINIC	1083653752		
230	$12,929	450226558	EBERLE	SALLY	400 BURDICK EXPY E		MINOT	ND	58701	1255590220	50	Nurse Practitioner	635006	TRINITY MEDICAL GROUP	1083653752		
48	$12,926	450226909	HARRIS	BRIAN	801 BROADWAY NORTH		FARGO	ND	58102	1396904785	5	Anesthesiology (MD)	7742001	SANFORD BROADWAY CLINIC	1184917924		
501	$12,914	456002491	BRAASCH	TERRILYN	1201 11TH AVE SW		MINOT	ND	58701	1205986742	50	Nurse Practitioner	78001	CENTER FOR FAMILY MEDICI	1316008238		
210	$12,883	261175213	HOLM	MARY	1401 13TH AVE E		WEST FARGO	ND	58078	1477583664	16	Obstet/Gynecology	6885033	INNOVIS HEALTH, LLC DBA	1487990339		
183	$12,879	450226909	HALL	KATHERINE	801 BROADWAY NORTH		FARGO	ND	58102	1740208396	11	Internal Medicine	7742001	SANFORD BROADWAY CLINIC	1184917924		
92	$12,879	450310462	EICKENBROCK	ANDREA	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1093943656	16	Obstet/Gynecology	9001	ALTRU HEALTH SYSTEM	1043309552		
253	$12,878	861123162	BOOTH	A MICHAEL	310 N 10TH ST		BISMARCK	ND	58501	1568562098	33	Thoracic Surgery	6459001	ST ALEXIUS HEART & LUNG	1194823021		
248	$12,875	450226909	TREFZ	MATTHEW	801 BROADWAY NORTH		FARGO	ND	58102	1376735035	37	Pediatrics	7742001	SANFORD BROADWAY CLINIC	1184917924		
735	$12,858	263101922	BORKHUIS	STACI	1350 20TH AVE SW		MINOT	ND	58701	1033375662	35	Chiropractor	7196001	STACI BORKHUIS CHIROPRAC	1356599427		
262	$12,843	911770748	WALTER	PATRICK	904 5TH AVE NE		JAMESTOWN	ND	58401	1679891907	97	Physician Assistant	3005	SANFORD HEALTH JAMESTOWN	1942241351		
85	$12,839	450226909	HANISCH	STEFANIE	100 4TH ST S		FARGO	ND	58103	1447350400	26	Psychiatry (MD)	7742006	SANFORD PROFESSIONAL BUI	1184917924		
49	$12,838	450226909	MOUSSA	ADIB	801 BROADWAY NORTH		FARGO	ND	58102	1831366855	5	Anesthesiology (MD)	7742001	SANFORD BROADWAY CLINIC	1184917924		
916	$12,832	260059940	MOSSER	MARK	1825 16TH ST SW		MINOT	ND	58701	1023176641	35	Chiropractor	1446001	MOSSER CHIROPRACTIC PC D	1962532804		
244	$12,827	450226700	TESCHER	STEELE	209 7 ST N		BISMARCK	ND	58501	1851642847	97	Physician Assistant	4048	SANFORD SEVENTH AND THAY	1811941172		
482	$12,796	911770748	NAGALA	VANI	420 S 7TH ST		OAKES	ND	58474	1851380125	11	Internal Medicine	3068	SANFORD HEALTH OAKES CLI	1942241351		
170	$12,794	455198954	RITZ	LYNNEA	4023 STATE ST STE 120		BISMARCK	ND	58503	1881705465	80	Clinical Social Worker	7885001	DAKOTA INSTITUTE OF TRAU	1114286986		
55	$12,789	450226700	EGGERT	DOUGLAS	300 N 7TH ST		BISMARCK	ND	58501	1740366590	25	Physical Medicine and Rehab	440001	SANFORD MEDICAL CENTER/B	1811941172		
161	$12,773	450226558	ALBERTSON	MARISA	400 BURDICK EXPY E		MINOT	ND	58701	1710117312	8	Family Practice	635006	TRINITY MEDICAL GROUP	1083653752		
165	$12,765	450226909	HARLOW	TANYA	700 1ST AVE S		FARGO	ND	58103	1740498104	13	Neurology	7742007	SANFORD NEUROSCIENCE CLI	1184917924		
102	$12,732	450226909	BILSTAD	PAUL	801 BROADWAY NORTH		FARGO	ND	58102	1033136031	72	Emergency Medicine	7742001	SANFORD BROADWAY CLINIC	1184917924		
187	$12,729	450226700	PETERSON	GARY	2615 FAIRWAY ST		DICKINSON	ND	58601	1821180050	37	Pediatrics	4008	SANFORD HEALTH DICKINSON	1811941172		
199	$12,699	450226909	JOYCE	REBECCA	1220 SHEYENNE ST		WEST FARGO	ND	58078	1912977133	50	Nurse Practitioner	7742013	SANFORD WEST FARGO CLINI	1184917924		
148	$12,680	450226700	ARNDORFER	BROOKE	715 E BROADWAY AVE		BISMARCK	ND	58501	1376649848	97	Physician Assistant	4050	SANFORD SEVENTH AND BROA	1811941172		
132	$12,654	272597409	DELAP	SUSAN	4023 STATE ST STE 100		BISMARCK	ND	58503	1396809919	26	Psychiatry (MD)	7592001	A BALANCED MIND PSYCHIAT	1336454438		
105	$12,652	450226909	STURGILL	DANIAL	100 4TH ST S		FARGO	ND	58103	1992859664	62	Psychology	7742006	SANFORD PROFESSIONAL BUI	1184917924		
212	$12,643	450226909	CHRISTENSEN	MELISSA	2400 32ND AVE S		FARGO	ND	58103	1801079231	97	Physician Assistant	7742008	SANFORD SOUTHPOINTE CLIN	1184917924		
221	$12,606	450226711	GUANZON	RICARDO	900 E BROADWAY AVE		BISMARCK	ND	58501	1629257514	8	Family Practice	501001	ST ALEXIUS MEDICAL CENTE	1205868429		
653	$12,587	450441595	PEWE	MARK	909 11TH ST E		BOTTINEAU	ND	58318	1801879481	35	Chiropractor	1377001	CHIROPRACTIC ARTS	1053595223		
202	$12,582	450226909	BREKKE	BROOKE	2400 32ND AVE S		FARGO	ND	58103	1760759302	50	Nurse Practitioner	7742008	SANFORD SOUTHPOINTE CLIN	1184917924		
174	$12,580	261175213	LAQUA	PATRICIA	3902 13TH AVE S		FARGO	ND	58103	1588690903	8	Family Practice	6885032	INNOVIS HEALTH, LLC DBA	1437495264		
181	$12,567	410724029	PETERSON	DAVID	1428 CENTRAL AVE NE		E GRAND FORKS	MN	56721	1780760868	48	Podiatry, Surgical chiropody	5548002	RIVERVIEW SPECIALTY CLIN	1811918436		
419	$12,557	456002491	PENN	JEREMIAH	701 E ROSSER		BISMARCK	ND	58501	1043237522	8	Family Practice	102001	CENTER FOR FAMILY MEDICI	1619905528		
1,052	$12,545	450310462	CORBETT	THOMAS	1001 7TH ST		DEVILS LAKE	ND	58301	1083613491	11	Internal Medicine	9027	ALTRU CLINIC LAKE REGION	1861581373		
1,089	$12,539	450433194	GIETZEN	LORI	425 S 7TH ST		BISMARCK	ND	58504	1245242072	35	Chiropractor	572001	SOUTHRIDGE CHIROPRACTIC	1205848108		
276	$12,488	113686120	KLINDWORTH	JACINTA	1312 HIGHWAY 49 N		BEULAH	ND	58523	1205814787	8	Family Practice	6103001	COAL COUNTRY COMMUNITY H	1942288329		
53	$12,472	450226909	KAPPENMAN	JAMES	2400 32ND AVE S		FARGO	ND	58103	1235369604	16	Obstet/Gynecology	7742008	SANFORD SOUTHPOINTE CLIN	1184917924		
99	$12,442	450226909	BROWER BREITWIESER	CARRIE	801 BROADWAY NORTH		FARGO	ND	58102	1811231962	62	Psychology	7742001	SANFORD BROADWAY CLINIC	1184917924		
119	$12,423	450226558	REEVES	JULIANA	1321 W DAKOTA PARKWAY		WILLISTON	ND	58801	1578772208	18	Opthalmology	635038	TRINITY REGIONAL EYECARE	1083653752		
157	$12,394	450226700	COLLINS	SUSAN	801 21ST AVE SE		MINOT	ND	58701	1235409764	50	Nurse Practitioner	4065	SANFORD HEALTH WALK-IN C	1811941172		
102	$12,393	450226909	GROSZ	KENNETH	801 BROADWAY NORTH		FARGO	ND	58102	1821226887	72	Emergency Medicine	7742001	SANFORD BROADWAY CLINIC	1184917924		
223	$12,376	450310462	BAUDUIN	TAMRA	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1942227939	97	Physician Assistant	9001	ALTRU HEALTH SYSTEM	1043309552		

212	$12,368	450226558	BOZEMAN	JAMES	400 BURDICK EXPY E		MINOT	ND	58701	1215909049	16	Obstet/Gynecology	635006	TRINITY MEDICAL GROUP	1083653752		
364	$12,364	450363176	ENGBERG	DACIA	1707 GOLD DR S STE 101		FARGO	ND	58103	1528221769	97	Physician Assistant	5595001	INTERNAL MEDICINE ASSOCI	1144313743		
420	$12,357	263031507	ANDERSON	KRISTIAN	4350 S WASHINGTON ST	STE 100	GRAND FORKS	ND	58201	1619121662	35	Chiropractor	7138001	PERFORMANCE CHIROPRACTIC	1720237258		
172	$12,330	261175213	BELIZARIO	FRANCISCO	1702 UNIVERSITY DR S		FARGO	ND	58103	1942398375	4	Otology, Laryngology, Rhinology	6885031	INNOVIS HEALTH, LLC DBA	1255677084		
207	$12,324	450226711	HSU	CHIA CHUN	900 E BROADWAY AVE		BISMARCK	ND	58501	1518162072	11	Internal Medicine	501001	ST ALEXIUS MEDICAL CENTE	1205868429		
187	$12,296	450226419	HAGER	DUSTIN	800 3RD AVE SW		RUGBY	ND	58368	1144531203	97	Physician Assistant	18067	HEART OF AMERICA JOHNSON	1578734869		
54	$12,285	450226700	CANHAM	WILLIAM	225 N 7TH ST		BISMARCK	ND	58501	1265535074	20	Orthopedic Surgery	4061	SANFORD SEVENTH AND THAY	1811941172		
151	$12,275	562318351	LAIDLAW	ROBERT	3301 30TH AVE S #101		GRAND FORKS	ND	58201	1629031166	62	Psychology	5872001	LAIDLAW PSYCHOLOGICAL SE	1699859173		
121	$12,267	450226909	NELSEN	MATTHEW	2301 S 25TH ST STE A		FARGO	ND	58103	1699727958	20	Orthopedic Surgery	7742011	SANFORD ORTHOPEDICS SPOR	1184917924		
146	$12,247	450458948	JOHNSON	ROBERT	309 N MANDAN ST STE 1		BISMARCK	ND	58501	1952619298	62	Psychology	2045001	CHAMBERS & BLOHM PSYCHOL	1114045465		
647	$12,245	450396098	SWANSON	THOMAS	1102 S WASHINGTON ST		BISMARCK	ND	58504	1285766287	35	Chiropractor	1598001	SWANSON, THOMAS, DC	1285766287		
119	$12,244	450417963	KOTSCHWAR	JEANINE	2100 S COLUMBIA RD	STE 202	GRAND FORKS	ND	58201	1083630974	62	Psychology	474001	FAMILY INSTITUTE PC	1003832783		
125	$12,223	450226711	BRADLEY	AMANDA	900 E BROADWAY AVE		BISMARCK	ND	58501	1336341866	72	Emergency Medicine	459001	ST ALEXIUS MEDICAL CENTE	1306832654		
84	$12,214	450226909	SCHAFF	TROY	801 BROADWAY NORTH		FARGO	ND	58102	1740202381	72	Emergency Medicine	7742001	SANFORD BROADWAY CLINIC	1184917924		
42	$12,206	450226909	BERNDT	STEVEN	801 BROADWAY NORTH		FARGO	ND	58102	1205854932	5	Anesthesiology (MD)	7742001	SANFORD BROADWAY CLINIC	1184917924		
234	$12,204	450226558	RASMUSSEN	NORA	1500 24TH AVE SW		MINOT	ND	58701	1417028978	50	Nurse Practitioner	635040	TRINITY MEDICAL GROUP SO	1083653752		
576	$12,121	470929724	DOCKTER	TONYA	2911 N 14TH ST STE 102		BISMARCK	ND	58503	1902958606	35	Chiropractor	6064001	CAPITAL CHIROPRACTIC & S	1689704553		
699	$12,077	450343320	PAAPE	WILLIAM	433 BISMARCK EXPY E		BISMARCK	ND	58504	1073524344	35	Chiropractor	1152001	PAAPE CHIROPRACTIC CLINI	1770766362		
66	$12,069	450226700	HESSINGER	KEVIN	300 N 7TH ST		BISMARCK	ND	58501	1891884136	43	Certified Registered Nurse Anesthetist	440001	SANFORD MEDICAL CENTER/B	1811941172		
153	$12,061	450226711	MAGILL	THOMAS	900 E BROADWAY AVE		BISMARCK	ND	58501	1992728752	8	Family Practice	459001	ST ALEXIUS MEDICAL CENTE	1306832654		
53	$12,059	450226429	VOLESKY	PATRICK	30 7TH ST W		DICKINSON	ND	58601	1952316424	5	Anesthesiology (MD)	95001	ST JOSEPHS HOSPITAL AND	1992947956		
49	$12,051	450226909	RAAD	ROBERT	801 BROADWAY NORTH		FARGO	ND	58102	1588874788	5	Anesthesiology (MD)	7742001	SANFORD BROADWAY CLINIC	1184917924		
132	$12,048	450226429	ARNOLD	THOMAS	30 W 7TH ST		DICKINSON	ND	58601	1235237918	16	Obstet/Gynecology	95008	ST JOSEPHS WOMENS CLINIC	1730464108		
215	$12,032	450422119	BROOKE	JAMES	33 9TH ST W		DICKINSON	ND	58601	1871580407	2	General Surgery	231001	GREAT PLAINS CLINIC, PC	1720075377		
38	$12,026	411919461	SPLICHAL	ROBERT	824 RICHLAND ST		WAHPETON	ND	58075	1689781171	43	Certified Registered Nurse Anesthetist	1224001	RED RIVER ANESTHESIA PC	1295842623		
641	$12,018	450448835	LIPP	STEVEN	1825 16TH ST SW		MINOT	ND	58701	1982762597	35	Chiropractor	1986001	LIPP CHIROPRACTIC CLINIC	1801927637		
906	$12,017	273844177	SCHMIDT	NICHOLAS	102 2ND AVE SW		JAMESTOWN	ND	58401	1134171853	35	Chiropractor	629001	SCHMIDT CHIROPRACTIC CLI	1780622191		
159	$12,013	450226700	RICKS	MARC	2615 FAIRWAY ST		DICKINSON	ND	58601	1669613089	37	Pediatrics	4008	SANFORD HEALTH DICKINSON	1811941172		
44	$12,009	450226909	PORTER	SCOTT	700 1ST AVE S		FARGO	ND	58103	1841218443	62	Psychology	7742007	SANFORD NEUROSCIENCE CLI	1184917924		
321	$11,988	450226558	CHIKWENDU	VALENTINE	400 BURDICK EXPY E		MINOT	ND	58701	1356439798	6	Cardivascular Disease	635006	TRINITY MEDICAL GROUP	1083653752		
1,316	$11,987	200893237	HEARTLAND DIAGNOST	ERVICES LL	3280 20TH ST S		FARGO	ND	58104	1861432361	69	Independent Laboratory	6365001	HEARTLAND DIAGNOSTIC SER	1861432361		
326	$11,982	261175213	KLABO	MARK	132 4TH AVE NE		VALLEY CITY	ND	58072	1275793978	97	Physician Assistant	6885024	INNOVIS HEALTH, LLC DBA	1962682617		
134	$11,970	450226700	LAYAWEN	ASELO	300 N 7TH ST		BISMARCK	ND	58501	1437164399	11	Internal Medicine	440001	SANFORD MEDICAL CENTER/B	1811941172		
481	$11,967	460224598	MARTIN	VALERIE	240 MAIN ST		ELLENDALE	ND	58436	1477624278	97	Physician Assistant	1000001	AVERA ST LUKES DBA AVERA	1760423057		
206	$11,937	861058655	HOLUBOK	GREGORY	430 5TH ST N		BRECKENRIDGE	MN	56520	1861749079	67	Occupational Therapy	5909001	ORTHOPEDIC AND SPORTS PH	1811923535		
430	$11,910	911770748	BURGESS	MICHEL	904 5TH AVE NE		JAMESTOWN	ND	58401	1285893867	65	Physical Therapy	3005	SANFORD HEALTH JAMESTOWN	1942241351		
99	$11,906	450226700	FISCHER	BRIDGIT	222 N 7TH ST		BISMARCK	ND	58501	1710118526	50	Nurse Practitioner	4001	SANFORD CLINIC	1811941172		
211	$11,900	450422119	PRESCOTT	KRISTEN	33 9TH ST W		DICKINSON	ND	58601	1881640878	37	Pediatrics	231001	GREAT PLAINS CLINIC, PC	1720075377		
212	$11,894	450447670	LONGMUIR	MARK	615 6TH ST SE		STANLEY	ND	58784	1326278912	8	Family Practice	473001	MOUNTRAIL COUNTY MEDICAL	1831289362		
543	$11,870	450231183	MORTENSON	DUANE	1213 15TH AVE W		WILLISTON	ND	58801	1578848487	97	Physician Assistant	711001	CRAVEN-HAGAN/MERCY MEDIC	1760549000		
564	$11,840	320044259	RAY	SHANON	418 DEMERS AVE		E GRAND FORKS	MN	56721	1164603833	35	Chiropractor	5800001	RAY CHIROPRACTIC, PA	1811076086		
135	$11,838	450226909	MARSDEN	RICHARD	929 CENTRAL AVE NW		E GRAND FORKS	MN	56721	1801814413	30	Radiology	7742021	SANFORD HEALTH 929 CENTR	1184917924		
175	$11,834	450226429	HOLLAND	RANDY	227 16TH ST W		DICKINSON	ND	58601	1053422154	97	Physician Assistant	95009	ST JOSEPHS WALK IN CLINI	1992947956		
132	$11,823	450226909	KOENIG	CYNTHIA	1220 SHEYENNE ST		WEST FARGO	ND	58078	1710908942	50	Nurse Practitioner	7742013	SANFORD WEST FARGO CLINI	1184917924		
66	$11,813	450226700	ARTHAM	SURYA	300 N 7TH ST		BISMARCK	ND	58501	1215127493	11	Internal Medicine	440001	SANFORD MEDICAL CENTER/B	1811941172		
332	$11,796	274664038	REDINGER	DERON	2829 UNIVERSITY DR S	STE 2	FARGO	ND	58103	1710929443	47	#N/A	7667001	PT OT PARTNERS PC	1194021873		
142	$11,782	450226558	BOUCHARD KINDY	EVELYNE	2815 16TH ST SW STE 102		MINOT	ND	58701	1396833729	18	Opthalmology	731001	TRINITY REGIONAL EYECARE	1083653752		
14	$11,764	450226700	DANIELSON	CHRISTOPHE	300 N 7TH ST		BISMARCK	ND	58501	1194925891	16	Obstet/Gynecology	440001	SANFORD MEDICAL CENTER/B	1811941172		
524	$11,762	450362001	WRIGHT	RONALD	2204 2ND AVE W		WILLISTON	ND	58801	1588750897	35	Chiropractor	199001	WRIGHT CHIROPRACTIC OFFI	1588750897		
94	$11,747	450420800	RAGLAND	JAMES	1033 BASIN AVE STE A		BISMARCK	ND	58504	1417068420	13	Neurology	1041001	REGIONAL NEUROLOGICAL CE	1124032487		
114	$11,740	450226909	BAILLY	RICHARD	700 1ST AVE S		FARGO	ND	58103	1215954201	13	Neurology	7742007	SANFORD NEUROSCIENCE CLI	1184917924		
55	$11,735	450226558	SHIDYAK	GUS	1 BURDICK EXPRESSWAY W		MINOT	ND	58701	1760553812	5	Anesthesiology (MD)	635031	TRINITY MEDICAL GROUP AN	1083653752		
106	$11,706	450226558	KINDY	ALEXANDRE	101 3RD AVE SW		MINOT	ND	58701	1437246303	20	Orthopedic Surgery	635027	TRINITY MEDICAL GROUP	1083653752		
174	$11,702	450226909	KRINGLIE	ROSS	4000 28TH AVE S		MOORHEAD	MN	56560	1912924689	8	Family Practice	7742014	SANFORD MOORHEAD CLINIC	1184917924		
50	$11,699	450310462	BOLDUC	JULIE	1200 S COLUMBIA RD		GRAND FORKS	ND	58201	1952463507	43	Certified Registered Nurse Anesthetist	62001	ALTRU HOSPITAL	1154346161		
547	$11,688	205785892	ANDERSON	BRANDAN	4132 30TH AVE S #102		FARGO	ND	58104	1154329589	35	Chiropractor	5379001	ANDERSON, BRANDAN, LTD D	1154329589		
88	$11,684	450226909	WIEST	ERIC	801 BROADWAY NORTH		FARGO	ND	58102	1285898031	72	Emergency Medicine	7742001	SANFORD BROADWAY CLINIC	1184917924		
200	$11,660	261175213	HOWELL	CHRISTA	3000 32ND AVE S		FARGO	ND	58103	1083811236	46	Nurse Midwives	6885030	INNOVIS HEALTH, LLC DBA	1578907655		
147	$11,659	201278075	OSOWSKI	PAULA	1407 24TH AVE S STE 520		GRAND FORKS	ND	58201	1770549941	97	Physician Assistant	6359001	AGASSIZ ASSOCIATES, PLLC	1700972122		
152	$11,659	450226700	MURDOFF	LISA	222 N 7TH ST		BISMARCK	ND	58501	1689805228	50	Nurse Practitioner	4001	SANFORD CLINIC	1811941172		
541	$11,658	272396967	SCHROEDER	RYAN	3212 14TH AVE SW #2		FARGO	ND	58103	1790912954	35	Chiropractor	6238001	UNITED HEALTH CHIROPRACT	1932426509		
140	$11,651	450226909	NYAYAPATI	NEELIMA	2400 32ND AVE S		FARGO	ND	58103	1417186586	8	Family Practice	7742008	SANFORD SOUTHPOINTE CLIN	1184917924		
230	$11,648	261175213	VETTER	RICHARD	801 BELSLY BLVD S		MOORHEAD	MN	56560	1427085042	8	Family Practice	6885034	INNOVIS HEALTH, LLC DBA	1659617504		
718	$11,639	651162065	WALSH COUNTY HEALT	PT	638 COOPER AVE STE 3		GRAFTON	ND	58237	1679672646	60	Public Health or Welfare Agency	4538001	WALSH COUNTY HEALTH DIST	1679672646		
40	$11,634	450226700	OCEJO	RAFAEL	300 N 7TH ST		BISMARCK	ND	58501	1346352861	37	Pediatrics	440001	SANFORD MEDICAL CENTER/B	1811941172		
43	$11,609	450226700	LINK	MATT	300 N 7TH ST		BISMARCK	ND	58501	1851464309	43	Certified Registered Nurse Anesthetist	440001	SANFORD MEDICAL CENTER/B	1811941172		

109	$11,591	450443648	CHENEY	ANGELA	600 DEMERS AVE STE 301		GRAND FORKS	ND	58201	1932127420	62	Psychology	1467001	DAKOTA THERAPY CENTER, L	1932265048		
127	$11,574	454472718	GREYBULL	IAN	300 WEST CENTURY AVE		BISMARCK	ND	58503	1801105531	50	Nurse Practitioner	7838001	FOUR DIRECTIONS CLINIC	1447522206		
223	$11,574	450310462	DOUVOYIANNIS	MILTIADIS	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1356692339	37	Pediatrics	9001	ALTRU HEALTH SYSTEM	1043309552		
316	$11,574	450358986	RAU	KAY	420 MAIN AVE		NAPOLEON	ND	58561	1821020538	97	Physician Assistant	173001	WISHEK RURAL HEALTH CLIN	1679774616		
372	$11,572	452521311	NAGEL	STEVEN	4501 COLEMAN ST STE 106		BISMARCK	ND	58503	1255580767	35	Chiropractor	7746001	NAGEL FAMILY CHIROPRACTI	1316232887		
112	$11,571	260480153	MARTINSEN	WAYNE	1227 N 35TH ST		BISMARCK	ND	58501	1851352504	26	Psychiatry (MD)	6986003	DAKOTA FAMILY SERVICES	1023200896		
107	$11,563	450310462	PARIKH	VINITA	4440 S WASHINGTON ST		GRAND FORKS	ND	58201	1780842963	5	Anesthesiology (MD)	9033	ALTRU PROFESSIONAL CENTE	1043309552		
32	$11,523	450408917	CAVALIER AMBULANCE	VI	105 W 2ND AVE N		CAVALIER	ND	58220	1205962909	59	Ambulance Service	1952001	CAVALIER AMBULANCE SERVI	1205962909		
245	$11,519	450340688	HOULE	CATHERINE	1000 HIGHWAY 12		HETTINGER	ND	58639	1013003755	8	Family Practice	367001	WEST RIVER HEALTH SERVIC	1174606271		
58	$11,507	450226909	NOONAN	BENJAMIN	2301 S 25TH ST STE A		FARGO	ND	58103	1326222514	20	Orthopedic Surgery	7742011	SANFORD ORTHOPEDICS SPOR	1184917924		
286	$11,493	861123162	RENNER	CINDY	310 N 10TH ST		BISMARCK	ND	58501	1780757948	97	Physician Assistant	6459001	ST ALEXIUS HEART & LUNG	1194823021		
164	$11,480	261175213	BEXELL-GIERKE	JAN	3000 32ND AVE S		FARGO	ND	58103	1861425472	16	Obstet/Gynecology	6885030	INNOVIS HEALTH, LLC DBA	1578907655		
220	$11,477	450321538	KITTLESON	SHANNON	310 N 9TH ST		BISMARCK	ND	58501	1326066275	50	Nurse Practitioner	188001	THE BONE & JOINT CENTER,	1750307872		
8	$11,461	411801204	TACTILE SYSTEMS TE	LOGY INC	1331 TYLER ST NE STE 200		MINNEAPOLIS	MN	55413	1427131424	54	Home Medical Equipment	7971001	TACTILE SYSTEMS TECHNOLO	1427131424		
245	$11,451	450321538	HILZENDEGER	JEFF	310 N 9TH ST		BISMARCK	ND	58501	1861536427	97	Physician Assistant	188001	THE BONE & JOINT CENTER,	1750307872		
40	$11,430	450226909	ONUORA	TOCHUKWU	801 BROADWAY NORTH		FARGO	ND	58102	1558447961	5	Anesthesiology (MD)	7742001	SANFORD BROADWAY CLINIC	1184917924		
76	$11,417	450226558	CUMANI	BLENDI	400 BURDICK EXPY E		MINOT	ND	58701	1164744942	40	Hand Surgery	635006	TRINITY MEDICAL GROUP	1083653752		
121	$11,412	261175213	BEEHLER	AMANDA	1702 UNIVERSITY DR S		FARGO	ND	58103	1538308242	7	Dermatology	6885031	INNOVIS HEALTH, LLC DBA	1255677084		
62	$11,409	450226700	GOEDDERTZ	JOHN	300 N 7TH ST		BISMARCK	ND	58501	1659424125	43	Certified Registered Nurse Anesthetist	440001	SANFORD MEDICAL CENTER/B	1811941172		
768	$11,408	911770748	LICHT	LAWRENCE	801 BROADWAY NORTH		FARGO	ND	58102	1578595773	30	Radiology	3001	SANFORD BROADWAY CLINIC	1942241351		
501	$11,397	450431997	ISAACSON	ERIK	1302 1ST ST NE		MANDAN	ND	58554	1487709580	35	Chiropractor	6623001	MANDAN CHIROPRACTIC CLIN	1073668182		
257	$11,388	450226711	PATHROFF	ROBERT	900 E BROADWAY AVE		BISMARCK	ND	58501	1912947847	34	Urology	501001	ST ALEXIUS MEDICAL CENTE	1205868429		
247	$11,388	450226909	ADHAMI	NAEEM	801 BROADWAY NORTH		FARGO	ND	58102	1407081169	29	Pulmonary Diseases	7742001	SANFORD BROADWAY CLINIC	1184917924		
16	$11,382	450433852	WINMAR DIAGNOSTICS		2700 12TH AVE S STE B		FARGO	ND	58103	1811041270	70	Clinic	616001	WINMAR DIAGNOSTICS NORTH	1811041270		
87	$11,378	450226909	GRIFFIN	DAVID	801 BROADWAY NORTH		FARGO	ND	58102	1649298290	72	Emergency Medicine	7742001	SANFORD BROADWAY CLINIC	1184917924		
200	$11,376	450425948	FANOUS	BASEM	425 S COLLEGE DR STE 14		DEVILS LAKE	ND	58301	1336173871	48	Podiatry, Surgical chiropody	398004	TOWNER COUNTY MEDICAL CE	1194745935		
159	$11,361	450226700	LUCKENBILL	MICHAEL	300 N 7TH ST		BISMARCK	ND	58501	1922108653	11	Internal Medicine	440001	SANFORD MEDICAL CENTER/B	1811941172		
166	$11,358	450226700	AUCK	TONYA	414 N 7TH ST		BISMARCK	ND	58501	1447514203	50	Nurse Practitioner	4046	SANFORD SEVENTH AND ROSS	1811941172		
241	$11,355	450226711	KIM	IN-AH	900 E BROADWAY AVE		BISMARCK	ND	58501	1376707224	8	Family Practice	501001	ST ALEXIUS MEDICAL CENTE	1205868429		
184	$11,346	450226558	FENNERN	TRISHA	400 BURDICK EXPY E		MINOT	ND	58701	1013220490	50	Nurse Practitioner	635006	TRINITY MEDICAL GROUP	1083653752		
68	$11,342	450226700	REDDY	KARTHIK	300 N 7TH ST		BISMARCK	ND	58501	1881755429	6	Cardivascular Disease	440001	SANFORD MEDICAL CENTER/B	1811941172		
167	$11,337	450458948	FIKE	MICHELLE	309 N MANDAN ST STE 1		BISMARCK	ND	58501	1174858468	44	Psychiatric Nurse	2045001	CHAMBERS & BLOHM PSYCHOL	1114045465		
96	$11,325	450310462	SIDDIQUI	TARIQ	960 S COLUMBIA RD		GRAND FORKS	ND	58201	1518908516	75	Oncology	9028	ALTRU CANCER CENTER	1043309552		
267	$11,319	261175213	NELSON	SUSAN	501 MAIN AVENUE SOUTH		HANKINSON	ND	58041	1174617732	8	Family Practice	6885036	INNOVIS HEALTH, LLC DBA	1750725743		
121	$11,310	450226909	KARAZ	SAMY	2801 UNIVERSITY DR S		FARGO	ND	58103	1861556557	26	Psychiatry (MD)	7742005	SANFORD 2801 MEDICAL BUI	1184917924		
103	$11,310	450226909	TIONGSON	JEFFREY	801 BROADWAY NORTH		FARGO	ND	58102	1578537460	72	Emergency Medicine	7742001	SANFORD BROADWAY CLINIC	1184917924		
138	$11,309	731702938	LORENZ	KRISTY	300 2ND AVE NE	STE 215A	JAMESTOWN	ND	58401	1447303656	66	Speech Therapy	6276001	T AND K SPEECH LANGUAGE	1184741340		
253	$11,306	870738986	SCHINDLER	KEITH	204 W CENTURY AVE		BISMARCK	ND	58503	1386776052	41	Optometrist	487001	DRS SCHINDLER & DEIS	1609894054		
128	$11,294	43604495	KNOWLTON	GLENN	1401 13TH AVE E		WEST FARGO	ND	58078	1063482297	62	Psychology	5635001	KNOWLTON ONEILL & ASSOCI	1538198759		
52	$11,287	450231181	MOSER	MARCO	2422 20TH ST SW		JAMESTOWN	ND	58401	1437467073	43	Certified Registered Nurse Anesthetist	77001	JAMESTOWN REGIONAL MEDIC	1407957277		
137	$11,275	450226909	CHEMITI	GOPAL	736 BROADWAY N		FARGO	ND	58102	1740207745	39	Nephrology	7742022	SANFORD BROADWAY MEDICAL	1184917924		
222	$11,263	431995854	CHASE	WILLIAM	1051 E INTERSTATE AVE		BISMARCK	ND	58503	1568708154	35	Chiropractor	5842001	NELSON, WILLIAM, DC, PC	1134378946		
65	$11,247	261175213	JOHNSON	JULIE	3000 32ND AVE S		FARGO	ND	58103	1861601809	20	Orthopedic Surgery	6885030	INNOVIS HEALTH, LLC DBA	1578907655		
45	$11,240	450226909	GASEVIC	ENEJ	801 BROADWAY NORTH		FARGO	ND	58102	1376753459	2	General Surgery	7742001	SANFORD BROADWAY CLINIC	1184917924		
104	$11,236	450226909	KLAVA	WILLIAM	736 BROADWAY N		FARGO	ND	58102	1174544308	25	Physical Medicine and Rehab	7742022	SANFORD BROADWAY MEDICAL	1184917924		
131	$11,233	454058145	MARTIN	ANDREA	1120 COLLEGE DR STE 201		BISMARCK	ND	58501	1447356506	88	#N/A	1789001	SOUL SURVIVOR COUNSELING	1447356506		
439	$11,215	450444338	SWANSON	WILLIAM	612 7TH ST NE		HAZEN	ND	58545	1356439947	35	Chiropractor	1383001	SWANSON CHIROPRACTIC PC	1649368226		
494	$11,214	202987449	FISCHER	JONATHAN	2945 N 11 ST		BISMARCK	ND	58503	1013968981	65	Physical Therapy	6697001	DSJ ENTERPRISES, LLC DBA	1447200373		
56	$11,212	450226700	BOHLMAN	LORRISSA	222 N 7TH ST		BISMARCK	ND	58501	1518111558	43	Certified Registered Nurse Anesthetist	4001	SANFORD CLINIC	1811941172		
545	$11,199	450458895	WAGNER	BARRY	1431 INTERSTATE LOOP		BISMARCK	ND	58503	1437235934	35	Chiropractor	2062001	WAGNER CHIROPRACTIC, PC	1649502212		
174	$11,196	450226909	TURMAN	RANELLE	2400 32ND AVE S		FARGO	ND	58103	1760403000	50	Nurse Practitioner	7742008	SANFORD SOUTHPOINTE CLIN	1184917924		
66	$11,190	450226700	KOVAR	KATHRYN	300 N 7TH ST		BISMARCK	ND	58501	1598795767	43	Certified Registered Nurse Anesthetist	440001	SANFORD MEDICAL CENTER/B	1811941172		
718	$11,167	20702284	SHAW	ROBERT	1003 E INTERSTATE AVE	STE 5	BISMARCK	ND	58503	1053416578	35	Chiropractor	6069001	SHAW CHIROPRACTIC HEALTH	1184811184		
72	$11,163	410724029	SCHULTZ	STEVEN	323 S MINNESOTA ST		CROOKSTON	MN	56716	1053414631	34	Urology	5548016	RIVERVIEW SPECIALTY CLIN	1487944898		
236	$11,158	261175213	JOHNSON	ROXANNE	132 4TH AVE NE		VALLEY CITY	ND	58072	1609912450	50	Nurse Practitioner	6885024	INNOVIS HEALTH, LLC DBA	1962682617		
45	$11,136	450310462	SCHMIEDEBERG	TIMOTHY	1200 S COLUMBIA RD		GRAND FORKS	ND	58201	1194919357	43	Certified Registered Nurse Anesthetist	62001	ALTRU HOSPITAL	1154346161		
74	$11,107	261175213	LANTZ	STEVEN	3000 32ND AVE S		FARGO	ND	58103	1457381212	20	Orthopedic Surgery	6885030	INNOVIS HEALTH, LLC DBA	1578907655		
54	$11,081	450310462	HANSON	DANE	1200 S COLUMBIA RD		GRAND FORKS	ND	58201	1801987813	43	Certified Registered Nurse Anesthetist	62001	ALTRU HOSPITAL	1154346161		
160	$11,063	450311334	BERTRAM	JUERGEN	401 N 9TH ST		BISMARCK	ND	58501	1326093022	11	Internal Medicine	236001	MID DAKOTA CLINIC	1275587826		
61	$11,057	450310462	BOEN	CHAD	1200 S COLUMBIA RD		GRAND FORKS	ND	58201	1215034095	43	Certified Registered Nurse Anesthetist	62001	ALTRU HOSPITAL	1154346161		
38	$11,032	861123162	BENSON	JEFFRE	310 N 10TH ST		BISMARCK	ND	58501	1487655288	5	Anesthesiology (MD)	6459001	ST ALEXIUS HEART & LUNG	1194823021		
241	$11,023	450226711	CHRISTIANSON	JANE	1177 BORDER LANE		WASHBURN	ND	58577	1689699001	50	Nurse Practitioner	1298001	WASHBURN FAMILY CLINIC	1831267236		
56	$11,020	450226700	KIENZLE	MIKE	300 N 7TH ST		BISMARCK	ND	58501	1699864942	43	Certified Registered Nurse Anesthetist	440001	SANFORD MEDICAL CENTER/B	1811941172		
152	$11,017	450226558	BURGARDT	KATHARYN	400 BURDICK EXPY E		MINOT	ND	58701	1720376452	50	Nurse Practitioner	635006	TRINITY MEDICAL GROUP	1083653752		
156	$11,015	502705713	KUZNIA	COLETTE	403 CENTER AVE STE 405		MOORHEAD	MN	56560	1174707566	88	#N/A	1342001	KUZNIA COLETTE C. LPCC	1174707566		
385	$11,004	208229952	ERICKSON	BETHANY	2600 GATEWAY AVE STE 2		BISMARCK	ND	58503	1700912672	35	Chiropractor	6940001	PATHWAYS CHIROPRACTIC &	1700912672		

91	$10,981	410724029	BELL	DEBRA	323 S MINNESOTA ST		CROOKSTON	MN	56716	1770680555	8	Family Practice	5548016	RIVERVIEW SPECIALTY CLIN	1487944898		
183	$10,958	203005235	HEMLER	ELIZABETH	2810 17TH AVE S		GRAND FORKS	ND	58201	1437128162	46	Nurse Midwives	6749001	NORTHERN VALLEY OBSTETRI	1194778035		
239	$10,951	861058655	KRAUSE-ROBERTS	SHAWN	430 5TH ST N		BRECKENRIDGE	MN	56520	1861449019	65	Physical Therapy	5909001	ORTHOPEDIC AND SPORTS PH	1811923535		
56	$10,926	450226700	DOLLINGER	JAY	300 N 7TH ST		BISMARCK	ND	58501	1609967785	43	Certified Registered Nurse Anesthetist	440001	SANFORD MEDICAL CENTER/B	1811941172		
44	$10,924	450226558	WU	JOANNE	1 BURDICK EXPRESSWAY W		MINOT	ND	58701	1922267723	5	Anesthesiology (MD)	635031	TRINITY MEDICAL GROUP AN	1083653752		
563	$10,913	450455627	FICEK	DION	562 1/2 12TH ST W		DICKINSON	ND	58601	1598849184	35	Chiropractor	1053001	FICEK CHIROPRACTIC, PC	1396824017		
26	$10,913	450226700	DEWING	BREE	300 N 7TH ST		BISMARCK	ND	58501	1801058383	2	General Surgery	440001	SANFORD MEDICAL CENTER/B	1811941172		
240	$10,895	261404354	ANDELIN	JOHN	201 2ND AVE W		WILLISTON	ND	58801	1982793386	22	Pathology, Anatomy, Clinical Pathology	7276001	JOHN B ANDELIN MD PC DBA	1821248477		
191	$10,893	450226711	PANDEYA	SAMEER	900 E BROADWAY AVE		BISMARCK	ND	58501	1275770760	11	Internal Medicine	501001	ST ALEXIUS MEDICAL CENTE	1205868429		
94	$10,886	450226700	PANSEGRAU	TIMOTHY	222 N 7TH ST		BISMARCK	ND	58501	1871605279	6	Cardivascular Disease	4001	SANFORD CLINIC	1811941172		
163	$10,875	450226909	CHAVOUR	SREEKANTH	2400 32ND AVE S		FARGO	ND	58103	1588998918	11	Internal Medicine	7742008	SANFORD SOUTHPOINTE CLIN	1184917924		
10	$10,870	450226700	GATTEY	PHILIP	300 N 7TH ST		BISMARCK	ND	58501	1760402051	20	Orthopedic Surgery	440001	SANFORD MEDICAL CENTER/B	1811941172		
411	$10,854	680488233	WAIND	MICHAEL	2506 S WASHINGTON ST		GRAND FORKS	ND	58201	1245361450	35	Chiropractor	5599001	WAIND CHIROPRACTIC AND A	1245361450		
152	$10,853	450310462	OLSON	JOANN	860 S COLUMBIA RD		GRAND FORKS	ND	58201	1316039746	80	Clinical Social Worker	9024	ALTRU PSYCHIATRIC CENTER	1043309552		
278	$10,830	201728951	REXINE	MICHAEL	34 CENTER AVE S		MAYVILLE	ND	58257	1700899143	41	Optometrist	6412001	REXINE FAMILY EYECARE	1609062272		
134	$10,820	450226700	FIECHTNER	MARCUS	715 E BROADWAY AVE		BISMARCK	ND	58501	1205859014	4	Otology, Laryngology, Rhinology	4050	SANFORD SEVENTH AND BROA	1811941172		
33	$10,819	450226711	ST ALEXIUS INDEPEN	DIAGNOSTI	2700 8TH ST NW		MINOT	ND	58703	1952572208	30	Radiology	501016	ST ALEXIUS CLINIC	1205868429		
162	$10,806	450226700	MILLER	JOHN	300 N 7TH ST		BISMARCK	ND	58501	1346448925	30	Radiology	440001	SANFORD MEDICAL CENTER/B	1811941172		
36	$10,804	450226909	PEZHMAN	ERIC	801 BROADWAY NORTH		FARGO	ND	58102	1154531366	5	Anesthesiology (MD)	7742001	SANFORD BROADWAY CLINIC	1184917924		
55	$10,801	450226711	MANDERS	LANDA	900 E BROADWAY AVE		BISMARCK	ND	58501	1598833980	43	Certified Registered Nurse Anesthetist	92001	ST ALEXIUS MEDICAL CENTE	1629121074		
343	$10,791	260069726	DORVAL	TODD	448 21ST ST W UNIT D2		DICKINSON	ND	58601	1619948460	35	Chiropractor	6241001	HEALTH AND WELLNESS CHIR	1629195342		
57	$10,783	450226700	SCHWAB	JESSICA	300 N 7TH ST		BISMARCK	ND	58501	1811134976	43	Certified Registered Nurse Anesthetist	440001	SANFORD MEDICAL CENTER/B	1811941172		
201	$10,777	450321538	SCHILLO	JAMELLE	310 N 9TH ST		BISMARCK	ND	58501	1306123435	97	Physician Assistant	188001	THE BONE & JOINT CENTER,	1750307872		
245	$10,770	450310462	ALLEN	JON	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1811088602	11	Internal Medicine	9001	ALTRU HEALTH SYSTEM	1043309552		
286	$10,767	261175213	KHANAL	BINAYA	3000 32ND AVE S		FARGO	ND	58103	1073779831	11	Internal Medicine	6885016	ESSENTIA HEALTH HOSPITAL	1215125463		
135	$10,766	450226700	BROWN	SHARON	222 N 7TH ST		BISMARCK	ND	58501	1336225101	80	Clinical Social Worker	4001	SANFORD CLINIC	1811941172		
332	$10,758	450422119	KOMOROWSKA	DANUTA	33 9TH ST W		DICKINSON	ND	58601	1396732947	8	Family Practice	231001	GREAT PLAINS CLINIC, PC	1720075377		
181	$10,758	450226909	HUNG	ROBERT	801 BROADWAY NORTH		FARGO	ND	58102	1770769432	29	Pulmonary Diseases	7742001	SANFORD BROADWAY CLINIC	1184917924		
86	$10,756	208928600	MITTENESS	LISA	3060 FRONTIER WAY S		FARGO	ND	58104	1518237791	67	Occupational Therapy	6961001	PEDIATRIC THERAPY PARTNE	1457479958		
92	$10,746	911770748	ADLOFF	VLADIMIR	801 BROADWAY NORTH		FARGO	ND	58102	1841266103	21	Pathology, Anatomy, Clinical Pathology	3001	SANFORD BROADWAY CLINIC	1942241351		
418	$10,743	200150710	LEIDHOLM	MICHELE	87 LINCOLN AVE		UNDERWOOD	ND	58576	1417942335	50	Nurse Practitioner	6053001	UNDERWOOD CLINIC	1770591927		
254	$10,723	450226558	MARTINSON-REDEKOPP	JILL	2815 16TH ST SW STE 102		MINOT	ND	58701	1659469351	41	Optometrist	731001	TRINITY REGIONAL EYECARE	1083653752		
374	$10,709	450418143	CARTER	MICHELLE	415 HILL AVE		GRAFTON	ND	58237	1497747984	41	Optometrist	485001	HEARTLAND EYE CARE PC/GR	1518026046		
372	$10,698	911770748	GULSVIG	NANCY	420 S 7TH ST		OAKES	ND	58474	1811986102	97	Physician Assistant	3068	SANFORD HEALTH OAKES CLI	1942241351		
543	$10,684	200568259	OUELLETTE	MICHELLE	745 STATE AVE STE A		DICKINSON	ND	58601	1770668196	35	Chiropractor	6269001	OUELLETTE CHIROPRACTIC P	1063551844		
95	$10,683	450226909	FLEISSNER	RACHEL	100 4TH ST S		FARGO	ND	58103	1427084995	26	Psychiatry (MD)	7742006	SANFORD PROFESSIONAL BUI	1184917924		
494	$10,675	450418143	HELGESON	MARK	415 HILL AVE		GRAFTON	ND	58237	1932160132	41	Optometrist	485001	HEARTLAND EYE CARE PC/GR	1518026046		
69	$10,661	911810720	JOACHIM	KARI	2301 S 25TH ST STE K		FARGO	ND	58103	1669422770	43	Certified Registered Nurse Anesthetist	757001	VALLEY ANESTHESIA ASSOCI	1467513176		
788	$10,656	450457024	FROEHLING	ERIC	20 N 5TH ST		WISHEK	ND	58495	1003881715	35	Chiropractor	652001	FROEHLING THERAPEUTIC SE	1295884237		
109	$10,643	203856645	LINK	ANNETTE	1655 N GRANDVIEW LANDE	#204	BISMARCK	ND	58503	1477658508	88	#N/A	6716001	LINK COUNSELING SERVICE,	1477658508		
47	$10,620	261175213	COOPER	MARK	1702 UNIVERSITY DR S		FARGO	ND	58103	1962427351	32	Radiation Therapy	6885031	INNOVIS HEALTH, LLC DBA	1255677084		
727	$10,616	450447222	PETERS	TIMOTHY	562 12TH ST W		DICKINSON	ND	58601	1124137955	35	Chiropractor	1693001	PETERS, TIMOTHY, DC	1518028331		
306	$10,613	450226909	OTERO-CAGIDE	MANUEL	801 BROADWAY NORTH		FARGO	ND	58102	1437176906	6	Cardivascular Disease	7742001	SANFORD BROADWAY CLINIC	1184917924		
103	$10,605	450310462	JOHNSON	ALAN	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1831224641	4	Otology, Laryngology, Rhinology	9001	ALTRU HEALTH SYSTEM	1043309552		
151	$10,605	450226700	KLEIN	KATHERINE	765 W INTERSTATE AVE		BISMARCK	ND	58503	1609037100	37	Pediatrics	4072	SANFORD CHILDREN'S NORTH	1811941172		
127	$10,596	502505634	LOEN-BAKKE	SHERRY	652 130TH AVE NE		FINLEY	ND	58230	1558521757	67	Occupational Therapy	1519001	INTEGRATED THERAPY	1558521757		
236	$10,595	450462069	WOLDEN	MITCHELL	1711 GOLD DR STE 120		FARGO	ND	58103	1467688192	65	Physical Therapy	5517001	PROFESSIONAL REHABILITAT	1215014105		
34	$10,590	731724140	FM ENDOSCOPY CENTE	C	300 MAIN AVE STE 205		FARGO	ND	58103	1326144221	70	Clinic	6509001	FM ENDOSCOPY CENTER LLC	1326144221		
519	$10,588	456002491	CHRISTENSON	MARK	MCCANNEL HALL ROOM 100	2891 2ND AVE I	GRAND FORKS	ND	58202	1093774499	8	Family Practice	180001	UND STUDENT HEALTH SERVI	1922067305		
194	$10,556	261175213	LUNDE	LARA	801 BELSLY BLVD S		MOORHEAD	MN	56560	1992722664	8	Family Practice	6885034	INNOVIS HEALTH, LLC DBA	1659617504		
47	$10,548	450461522	MEIDINGER	AMY	1220 MAIN AVE #100		FARGO	ND	58103	1265612204	62	Psychology	5475001	NEUROPSYCHOLOGY ASSOCIAT	1669420923		
62	$10,547	911810720	CHRISTENSEN	TRACIE	2301 S 25TH ST STE K		FARGO	ND	58103	1063785327	43	Certified Registered Nurse Anesthetist	757001	VALLEY ANESTHESIA ASSOCI	1467513176		
113	$10,531	450226909	CHRISTIANSON	ALICE	100 4TH ST S		FARGO	ND	58103	1245258979	88	#N/A	7742006	SANFORD PROFESSIONAL BUI	1184917924		
129	$10,530	450226909	LEE	ERIN	1111 HARWOOD DR		FARGO	ND	58104	1932364650	50	Nurse Practitioner	7742012	SANFORD REPRODUCTIVE MED	1184917924		
113	$10,526	450226909	ALTAF	MISBAH	2400 32ND AVE S		FARGO	ND	58103	1790917052	8	Family Practice	7742008	SANFORD SOUTHPOINTE CLIN	1184917924		
273	$10,511	450226558	SIGAUKE	ELLEN	1 BURDICK EXPY W		MINOT	ND	58701	1740200336	22	Pathology, Anatomy, Clinical Pathology	635032	TRINITY MEDICAL GROUP	1083653752		
75	$10,506	911770748	STASKO	ANDREW	332 2ND AVE N		WAHPETON	ND	58075	1265516439	2	General Surgery	3016	SANFORD HEALTH WAHPETON	1942241351		
297	$10,502	450226711	TOMAN	JEAN	900 E BROADWAY AVE		BISMARCK	ND	58501	1104927839	50	Nurse Practitioner	501001	ST ALEXIUS MEDICAL CENTE	1205868429		
910	$10,498	204605243	BLOWERS	BYRON	3712 LOCKPORT ST #B		BISMARCK	ND	58503	1528163409	35	Chiropractor	1443001	DAKOTA FAMILY CHIROPRACT	1104999663		
113	$10,495	501863082	HAUGEN	STACEY	6221 UNIVERSITY DR		BISMARCK	ND	58504	1255436226	44	Psychiatric Nurse	1696001	HAUGEN, STACEY, CNS	1255436226		
144	$10,487	450430824	SEAY	STEPHEN	2315 LIBRARY CIRCLE		GRAND FORKS	ND	58201	1467657460	88	#N/A	1300001	NORTHLAND CHRISTIAN COUN	1215131016		
115	$10,474	450226909	VANDROVEC	SARA	1720 UNIVERSITY DR S		FARGO	ND	58103	1881765915	5	Anesthesiology (MD)	7742004	SANFORD SOUTH UNIVERSITY	1184917924		
85	$10,472	261175213	VIJAYALAKSHMI	BANGALORE	1702 UNIVERSITY DR S		FARGO	ND	58103	1003843574	25	Physical Medicine and Rehab	6885031	INNOVIS HEALTH, LLC DBA	1255677084		
345	$10,470	760746279	RASMUSSON	KAREN	2700 8TH ST NW		MINOT	ND	58703	1639164890	65	Physical Therapy	5439001	FIRST CHOICE PHYSICAL TH	1013098797		
108	$10,461	450310462	LARKINS	MARK	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1740230317	14	Neurological Surgery	9001	ALTRU HEALTH SYSTEM	1043309552		
560	$10,453	263910303	GRINAKER	JACOB	3120 25TH ST S STE V		FARGO	ND	58103	1386889426	35	Chiropractor	7310001	STRIVE CHIROPRACTIC PC	1932346285		

38	$10,446	450226909	VANDROVEC	CHAD	801 BROADWAY NORTH		FARGO	ND	58102	1790856839	5	Anesthesiology (MD)	7742001	SANFORD BROADWAY CLINIC	1184917924		
140	$10,410	450359048	FARAH	SAMIR	20 BURDICK EXPY W	STE 500	MINOT	ND	58701	1952436073	73	Endocrinology	1150001	FARAH, SAMIR, MD	1720112139		
121	$10,364	450226909	MARSDEN	RICHARD	332 2ND AVE N		WAHPETON	ND	58075	1801814413	30	Radiology	7742019	SANFORD HEALTH WAHPETON	1184917924		
295	$10,362	450309291	BIBERDORF	DAVID	2200 S WASHINGTON ST		GRAND FORKS	ND	58201	1518045921	41	Optometrist	234001	VALLEY VISION CLINIC LTD	1619168267		
300	$10,347	261175213	AKKERMAN	DAVE	3902 13TH AVE S		FARGO	ND	58103	1912936329	8	Family Practice	6885032	INNOVIS HEALTH, LLC DBA	1437495264		
103	$10,341	450311334	ROLOFF	KENDRA	401 N 9TH ST		BISMARCK	ND	58501	1285899138	50	Nurse Practitioner	236001	MID DAKOTA CLINIC	1275587826		
139	$10,331	450226700	MEIER	DAWN	515 EAST BROADWAY AVE		BISMARCK	ND	58501	1720184112	50	Nurse Practitioner	4066	SANFORD 5TH & BROADWAY C	1811941172		
175	$10,323	450340688	RANUM	CARRIE ANN	1000 HIGHWAY 12		HETTINGER	ND	58639	1861623456	37	Pediatrics	367001	WEST RIVER HEALTH SERVIC	1174606271		
60	$10,291	450226700	DROOG	LANE	300 N 7TH ST		BISMARCK	ND	58501	1487743712	43	Certified Registered Nurse Anesthetist	440001	SANFORD MEDICAL CENTER/B	1811941172		
78	$10,285	450226558	MEUNIER	RONNY	407 3RD STREET SE		MINOT	ND	58701	1518152289	26	Psychiatry (MD)	635005	TRINITY MEDICAL GROUP	1871532598		
126	$10,283	450226711	MCCULLOUGH	SARAH	900 E BROADWAY AVE		BISMARCK	ND	58501	1659393734	72	Emergency Medicine	459001	ST ALEXIUS MEDICAL CENTE	1306832654		
176	$10,277	270056777	SHANNON	HEIDI	301 HWY 15		NORTHWOOD	ND	58267	1659635738	50	Nurse Practitioner	6163001	VALLEY COMMUNITY HEALTH	1356327001		
67	$10,272	450226700	FIROZI	M TARIK	222 N 7TH ST		BISMARCK	ND	58501	1962481648	10	Gastronenterology	4001	SANFORD CLINIC	1811941172		
185	$10,271	450310462	KROGSTAD	SHERI	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1134129042	50	Nurse Practitioner	9001	ALTRU HEALTH SYSTEM	1043309552		
67	$10,259	450226700	NELSON	DENISE	300 N 7TH ST		BISMARCK	ND	58501	1669707964	43	Certified Registered Nurse Anesthetist	440001	SANFORD MEDICAL CENTER/B	1811941172		
146	$10,251	450226909	KRINGLIE	JENNIFER	2400 32ND AVE S		FARGO	ND	58103	1235151721	50	Nurse Practitioner	7742008	SANFORD SOUTHPOINTE CLIN	1184917924		
112	$10,246	261175213	BUELL	BRAD	1702 UNIVERSITY DR S		FARGO	ND	58103	1558530311	4	Otology, Laryngology, Rhinology	6885031	INNOVIS HEALTH, LLC DBA	1255677084		
212	$10,239	450310462	CONSING	RAUL	1200 S COLUMBIA RD		GRAND FORKS	ND	58201	1205927316	11	Internal Medicine	62001	ALTRU HOSPITAL	1154346161		
148	$10,223	450226429	ISACKSON	RONALD	109 W 7TH ST		DICKINSON	ND	58601	1134111404	20	Orthopedic Surgery	6804001	ST. JOSEPH'S HOSPITAL AN	1225058217		
54	$10,206	410695598	JOHNSON	JAMES	2400 ST FRANCIS DRIVE		BRECKENRIDGE	MN	56520	1518939974	20	Orthopedic Surgery	207001	ST FRANCIS MEDICAL CENTE	1891954574		
27	$10,200	410724029	PETERSON	DAVID	323 S MINNESOTA ST		CROOKSTON	MN	56716	1780760868	48	Podiatry, Surgical chiropody	5548001	RIVERVIEW HEALTHCARE ASS	1477525566		
145	$10,199	43755538	ANDVIK	DEBRA	3290 20TH ST S		FARGO	ND	58104	1821172404	97	Physician Assistant	5917001	PLAINS MEDICAL CLINIC LL	1073698460		
16	$10,195	830501678	NORTHERN FACIAL SU	NS, PC	2331 TYLER PKWY STE 4		BISMARCK	ND	58503	1427226125	70	Clinic	7104001	INSTITUTE OF FACIAL SURG	1427226125		
50	$10,177	261175213	SHAHZAD	FAROOQ	3000 32ND AVE S		FARGO	ND	58103	1104018225	2	General Surgery	6885030	INNOVIS HEALTH, LLC DBA	1578907655		
251	$10,159	450310462	HUSO	JOAN	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1861492779	50	Nurse Practitioner	9001	ALTRU HEALTH SYSTEM	1043309552		
207	$10,157	261175213	HAUGEN	JOEL	3902 13TH AVE S		FARGO	ND	58103	1083643498	8	Family Practice	6885032	INNOVIS HEALTH, LLC DBA	1437495264		
379	$10,148	261523977	KOCH	RYAN	2600 GATEWAY AVE STE 2		BISMARCK	ND	58503	1437200839	35	Chiropractor	7066001	KOCH RYAN, DC, PC	1811171499		
51	$10,129	450226700	ERICKSON	JAY	300 N 7TH ST		BISMARCK	ND	58501	1992896864	43	Certified Registered Nurse Anesthetist	440001	SANFORD MEDICAL CENTER/B	1811941172		
32	$10,120	450226909	FISHER	CRISTINA	801 BROADWAY NORTH		FARGO	ND	58102	1548294457	5	Anesthesiology (MD)	7742001	SANFORD BROADWAY CLINIC	1184917924		
49	$10,104	450226700	KRAFT	RODNEY	300 N 7TH ST		BISMARCK	ND	58501	1003907841	43	Certified Registered Nurse Anesthetist	440001	SANFORD MEDICAL CENTER/B	1811941172		
131	$10,053	450226909	FILLMORE	SCOTT	736 BROADWAY N		FARGO	ND	58102	1336146703	25	Physical Medicine and Rehab	7742022	SANFORD BROADWAY MEDICAL	1184917924		
272	$10,040	261175213	PANKOW	DAWN	275 11TH ST S		WAHPETON	ND	58075	1457396822	8	Family Practice	6885019	INNOVIS HEALTH, LLC DBA	1790965440		
91	$10,025	450226909	MAUSBACH	THOMAS	2701 13TH AVE S		FARGO	ND	58103	1932134764	37	Pediatrics	7742009	SANFORD CHILDRENS SOUTHW	1184917924		
324	$10,024	450442280	SPIRIT LAKE HEALTH	TER	3883 74TH AVE NE		FORT TOTTEN	ND	58335	1073665493	1	General Practice	1350001	SPIRIT LAKE HEALTH CENTE	1073665493		
173	$9,995	450311334	CHAUSSEE	KEVIN	2700 STATE ST		BISMARCK	ND	58503	1962424440	50	Nurse Practitioner	236006	MID DAKOTA CLINIC - GATE	1275587826		
249	$9,956	450340688	WILLOUGHBY	BRIAN	1000 HIGHWAY 12		HETTINGER	ND	58639	1801981451	11	Internal Medicine	367001	WEST RIVER HEALTH SERVIC	1174606271		
214	$9,939	456002491	DEVLIN	KWANZA	1201 11TH AVE SW		MINOT	ND	58701	1871716845	8	Family Practice	78001	CENTER FOR FAMILY MEDICI	1316008238		
304	$9,930	452572513	BEKKUM	PAUL	4325 13TH AVE S STE 5		FARGO	ND	58103	1164431789	35	Chiropractor	7743001	ALL SEASONS FULL BODY CH	1245526201		
171	$9,929	450311516	SHAFER	JUSTIN	3 EAST 4TH ST #100		WILLISTON	ND	58801	1366659278	8	Family Practice	114001	WILLISTON RADIOLOGY CONS	1942375852		
394	$9,911	450408552	MASON	CRAIG	2829 S UNIV DR STE 204		FARGO	ND	58103	1366428666	18	Opthalmology	530001	RETINA CONSULTANTS	1972589182		
48	$9,910	450310462	HARMS	KENDALL	1200 S COLUMBIA RD		GRAND FORKS	ND	58201	1215028014	43	Certified Registered Nurse Anesthetist	62001	ALTRU HOSPITAL	1154346161		
166	$9,895	450387526	JETHWA	RATILAL	20 W BURDICK EXPWY #302		MINOT	ND	58701	1366515652	8	Family Practice	1579001	JETHWA, RATILAL, MD	1366515652		
36	$9,894	450226558	HE	CHAOYING	1 BURDICK EXPRESSWAY W		MINOT	ND	58701	1104913136	5	Anesthesiology (MD)	635031	TRINITY MEDICAL GROUP AN	1083653752		
121	$9,893	450306787	WITZEL	GWEN	901 2ND ST		LANGDON	ND	58249	1720026768	50	Nurse Practitioner	54002	CCMH CLINIC	1336201433		
118	$9,888	450310462	ROSTAD	CHRISTINA	1001 7TH ST		DEVILS LAKE	ND	58301	1942221163	8	Family Practice	9027	ALTRU CLINIC LAKE REGION	1861581373		
61	$9,888	450226558	LAGRONE	ROBERT	1 BURDICK EXPRESSWAY W		MINOT	ND	58701	1740329788	5	Anesthesiology (MD)	635031	TRINITY MEDICAL GROUP AN	1083653752		
376	$9,875	911770748	BURGESS	JACY	904 5TH AVE NE		JAMESTOWN	ND	58401	1275792855	65	Physical Therapy	3005	SANFORD HEALTH JAMESTOWN	1942241351		
179	$9,870	911770748	HENDRICKS	LARRY	100 1ST AVE SW STE 2		LAMOURE	ND	58458	1992723530	97	Physician Assistant	3073	SANFORD HEALTH LAMOURE C	1942241351		
155	$9,851	450448386	HUBER-MANSTROM	CHARLOTTE	430 E SWEET AVE		BISMARCK	ND	58504	1689763922	43	Certified Registered Nurse Anesthetist	1052001	DAKOTA SURGERY & LASER C	1952348013		
133	$9,828	450226909	PHADKE	GAUTAM	801 BROADWAY NORTH		FARGO	ND	58102	1396997649	39	Nephrology	7742001	SANFORD BROADWAY CLINIC	1184917924		
110	$9,818	450306787	SILLERS	ELIZABETH	901 2ND ST		LANGDON	ND	58249	1891732293	50	Nurse Practitioner	54002	CCMH CLINIC	1336201433		
1,200	$9,796	204747701	AURORA MEDICAL PAR	BORATORY,	1451 44TH AVE S	UNIT A	GRAND FORKS	ND	58201	1104862606	69	Independent Laboratory	6872001	AURORA MEDICAL PARK LABO	1104862606		
84	$9,796	450226429	KUYLEN	DAVID	30 7TH ST W		DICKINSON	ND	58601	1275732455	72	Emergency Medicine	95001	ST JOSEPHS HOSPITAL AND	1992947956		
126	$9,790	502707092	ENGEL	BONNIE	418 N 2ND STREET		BISMARCK	ND	58501	1013930833	44	Psychiatric Nurse	6857001	TRUE NORTH SOLUTIONS	1013930833		
103	$9,788	911770748	WILSON	JOEL	904 5TH AVE NE		JAMESTOWN	ND	58401	1083636658	62	Psychology	3005	SANFORD HEALTH JAMESTOWN	1942241351		
63	$9,782	450226909	GOLDSTEIN	HEIDI	736 BROADWAY N		FARGO	ND	58102	1912096710	25	Physical Medicine and Rehab	7742022	SANFORD BROADWAY MEDICAL	1184917924		
219	$9,775	200474245	HONL	BETH	4141 31ST AVE S STE 103		FARGO	ND	58104	1902978455	7	Dermatology	6218001	DERMATOLOGY ASSOCIATES P	1821273681		
87	$9,768	264314533	BRONSON	NATALYA	510 4TH ST S		FARGO	ND	58103	1841377264	26	Psychiatry (MD)	7444001	PSJ ACQUISITION LLC	1679709802		
45	$9,765	450310462	HILL	DEBORAH	1200 S COLUMBIA RD		GRAND FORKS	ND	58201	1588755383	43	Certified Registered Nurse Anesthetist	62001	ALTRU HOSPITAL	1154346161		
40	$9,756	450310462	KRUEGER	CURTIS	1200 S COLUMBIA RD		GRAND FORKS	ND	58201	1952341026	43	Certified Registered Nurse Anesthetist	62001	ALTRU HOSPITAL	1154346161		
145	$9,742	450231183	SHAHIN	SALEM	1219 KNOLL ST		WILLISTON	ND	58801	1578529392	34	Urology	711008	MERCY MEDICAL CENTER	1760549000		
161	$9,739	450226909	KARY	SHELBY	4000 28TH AVE S		MOORHEAD	MN	56560	1730376633	50	Nurse Practitioner	7742014	SANFORD MOORHEAD CLINIC	1184917924		
56	$9,735	450226558	HEILMAN	REBECCA	1 BURDICK EXPRESSWAY W		MINOT	ND	58701	1619080751	43	Certified Registered Nurse Anesthetist	635031	TRINITY MEDICAL GROUP AN	1083653752		
86	$9,715	450226700	TIMM	LYLA	515 EAST BROADWAY AVE		BISMARCK	ND	58501	1992893168	71	Certified Diabetic Educator	4066	SANFORD 5TH & BROADWAY C	1811941172		
59	$9,702	261175213	MOHAMMED RAFIYATH	SHAMUDHEEN	2430 20TH ST SW		JAMESTOWN	ND	58401	1528202900	75	Oncology	6885018	INNOVIS HEALTH, LLC DBA	1073793725		
36	$9,696	450227012	REINER	TIMOTHY	1031 7TH ST NE		DEVILS LAKE	ND	58301	1982798955	43	Certified Registered Nurse Anesthetist	76001	THE MERCY HOSPITAL OF DE	1790751170		

39	$9,695	450226909	KEIM	JEFFREY	2801 UNIVERSITY DR S		FARGO	ND	58103	1639259310	24	Plastic Surgery	7742005	SANFORD 2801 MEDICAL BUI	1184917924		
268	$9,684	113686120	MOLLMAN	BURTON	111 E MAIN ST		CENTER	ND	58530	1003038811	97	Physician Assistant	6103006	COAL COUNTRY COMMUNITY H	1003052952		
532	$9,684	261175213	BROWN	JEFFREY	132 4TH AVE NE		VALLEY CITY	ND	58072	1639170269	35	Chiropractor	6885024	INNOVIS HEALTH, LLC DBA	1962682617		
13	$9,683	450226700	KOLEILAT	NADIM	300 N 7TH ST		BISMARCK	ND	58501	1700997780	34	Urology	440001	SANFORD MEDICAL CENTER/B	1811941172		
132	$9,683	450226558	WILSON	GEORGE	1321 W DAKOTA PARKWAY		WILLISTON	ND	58801	1396092219	11	Internal Medicine	635039	TRINITY COMMUNITY CLINIC	1083653752		
102	$9,677	450226909	HOCHHALTER	DAVID	1720 UNIVERSITY DR S		FARGO	ND	58103	1669583183	8	Family Practice	7742004	SANFORD SOUTH UNIVERSITY	1184917924		
69	$9,660	450226909	GAFFREY	JANE	100 4TH ST S		FARGO	ND	58103	1538218391	26	Psychiatry (MD)	7742006	SANFORD PROFESSIONAL BUI	1184917924		
213	$9,660	456002491	SCHLECHT	KRISTINA	1201 11TH AVE SW		MINOT	ND	58701	1083639363	8	Family Practice	78001	CENTER FOR FAMILY MEDICI	1316008238		
167	$9,660	450226558	STRAND	GINGER	831 S BROADWAY		MINOT	ND	58701	1750397063	97	Physician Assistant	635001	TRINITY MEDICAL GROUP	1083653752		
162	$9,659	450226700	CASTER	AMBER	765 W INTERSTATE AVE		BISMARCK	ND	58503	1053692566	50	Nurse Practitioner	4072	SANFORD CHILDREN'S NORTH	1811941172		
459	$9,656	260709747	CHURCHILL PHARMACY		1190 W TURNPIKE AVE		BISMARCK	ND	58501	1639111230	54	Home Medical Equipment	7033001	CHURCHILL PHARMACY INC	1639111230		
205	$9,651	450226700	HORNER	MELISSA	209 7 ST N		BISMARCK	ND	58501	1356495592	50	Nurse Practitioner	4048	SANFORD SEVENTH AND THAY	1811941172		
101	$9,635	450226429	BAUTISTA-AZORES	RICHELLE	227 16TH ST W		DICKINSON	ND	58601	1619943024	37	Pediatrics	95009	ST JOSEPHS WALK IN CLINI	1992947956		
84	$9,617	450226909	TUPA	DAVID	100 4TH ST S		FARGO	ND	58103	1952323529	62	Psychology	7742006	SANFORD PROFESSIONAL BUI	1184917924		
83	$9,602	450226909	BIEBL	SARA	100 4TH ST S		FARGO	ND	58103	1558662148	62	Psychology	7742006	SANFORD PROFESSIONAL BUI	1184917924		
147	$9,598	450226700	TELLO-SKJERSETH	CHRISTINA	300 N 7TH ST		BISMARCK	ND	58501	1144480971	30	Radiology	440001	SANFORD MEDICAL CENTER/B	1811941172		
83	$9,590	450226700	KIOK	MAXIMO	222 N 7TH ST		BISMARCK	ND	58501	1851359244	13	Neurology	4001	SANFORD CLINIC	1811941172		
213	$9,578	911770748	ANDERSEN	JEFFREY	401 12TH ST N		WHEATON	MN	56296	1184701856	8	Family Practice	3083	SANFORD WHEATON	1942241351		
78	$9,572	450437652	WHITE	KELLY	151 S 4TH ST STE 401		GRAND FORKS	ND	58201	1831121920	83	Licenses Addiction Counselor-Chemical Dependency	242001	NORTHEAST HUMAN SERVICE	1366496341		
77	$9,571	450311334	NOLZ-LEINGANG	JACQUELINE	401 N 9TH ST		BISMARCK	ND	58501	1346297827	97	Physician Assistant	236001	MID DAKOTA CLINIC	1275587826		
50	$9,558	450226700	LINGLE	STEVEN	300 N 7TH ST		BISMARCK	ND	58501	1831280692	43	Certified Registered Nurse Anesthetist	440001	SANFORD MEDICAL CENTER/B	1811941172		
83	$9,542	450226909	VIGESAA	GREGORY	801 BROADWAY NORTH		FARGO	ND	58102	1639346653	72	Emergency Medicine	7742001	SANFORD BROADWAY CLINIC	1184917924		
336	$9,539	263226667	BELL	BRIAN	1462 I-94 BUS LOOP E #1		DICKINSON	ND	58601	1326199860	35	Chiropractor	7211001	BELL CHIROPRACTIC AND FI	1013164862		
15	$9,532	261175213	SELLAND	BRADFORD	3000 32ND AVE S		FARGO	ND	58103	1497845234	14	Neurological Surgery	6885030	INNOVIS HEALTH, LLC DBA	1578907655		
72	$9,529	450226909	DIAMOND	AMANDA	700 1ST AVE S		FARGO	ND	58103	1093932212	13	Neurology	7742007	SANFORD NEUROSCIENCE CLI	1184917924		
176	$9,517	450226700	HAIDER	CASSANDRA	222 N 7TH ST		BISMARCK	ND	58501	1750698585	50	Nurse Practitioner	4001	SANFORD CLINIC	1811941172		
117	$9,508	870694180	LILLEBERG	STEPHANIE	701 3RD STREET NW		JAMESTOWN	ND	58401	1578810214	66	Speech Therapy	5919001	ANNE CARLSEN CENTER	1598930109		
309	$9,506	450311334	SCHLITTENHARDT	MELANIE	401 N 9TH ST		BISMARCK	ND	58501	1174561617	50	Nurse Practitioner	236001	MID DAKOTA CLINIC	1275587826		
96	$9,473	261175213	CHRISTENSON	SHAUN	3000 32ND AVE S		FARGO	ND	58103	1104033968	13	Neurology	6885030	INNOVIS HEALTH, LLC DBA	1578907655		
380	$9,470	450309291	EMMERICH	MICHAEL	2200 S WASHINGTON ST		GRAND FORKS	ND	58201	1821176231	41	Optometrist	234001	VALLEY VISION CLINIC LTD	1619168267		
403	$9,467	450358677	LITTLE	DANIEL	107 6TH AVE NW		MANDAN	ND	58554	1619997848	41	Optometrist	1626001	VISION SOURCE MANDAN	1194714212		
142	$9,462	450226700	AL BITAR	SADO	300 N 7TH ST		BISMARCK	ND	58501	1073742466	11	Internal Medicine	440001	SANFORD MEDICAL CENTER/B	1811941172		
103	$9,456	450458948	BLOHM	KATHY	309 N MANDAN ST STE 1		BISMARCK	ND	58501	1225153968	62	Psychology	2045001	CHAMBERS & BLOHM PSYCHOL	1114045465		
30	$9,456	450226909	LEE	CAROL	801 BROADWAY NORTH		FARGO	ND	58102	1316965981	43	Certified Registered Nurse Anesthetist	7742001	SANFORD BROADWAY CLINIC	1184917924		
130	$9,447	450458138	BELLIS	MORRIS	1800 21 AVE S		FARGO	ND	58103	1730280892	4	Otology, Laryngology, Rhinology	2004001	CATALYST MEDICAL CENTER,	1043378268		
112	$9,445	450226909	SEICARESCU	CRISTINA	100 4TH ST S		FARGO	ND	58103	1295942290	26	Psychiatry (MD)	7742006	SANFORD PROFESSIONAL BUI	1184917924		
383	$9,433	274664038	KROKE	MIKE	2829 UNIVERSITY DR S	STE 2	FARGO	ND	58103	1750318952	65	Physical Therapy	7667001	PT OT PARTNERS PC	1194021873		
79	$9,427	450226909	WENSTROM	TIMOTHY	100 4TH ST S		FARGO	ND	58103	1326069667	62	Psychology	7742006	SANFORD PROFESSIONAL BUI	1184917924		
33	$9,408	450226909	BRUNSVOLD	ROBERT	801 BROADWAY NORTH		FARGO	ND	58102	1932126935	5	Anesthesiology (MD)	7742001	SANFORD BROADWAY CLINIC	1184917924		
51	$9,406	450226711	SPEARS	LURA	900 E BROADWAY AVE		BISMARCK	ND	58501	1619208675	43	Certified Registered Nurse Anesthetist	92001	ST ALEXIUS MEDICAL CENTE	1629121074		
212	$9,401	450226558	ALAKECH	BADIE	1 BURDICK EXPY W		MINOT	ND	58701	1700899580	22	Pathology, Anatomy, Clinical Pathology	635032	TRINITY MEDICAL GROUP	1083653752		
105	$9,399	450395967	HERNER	DIANA	1655 N GRANDVIEW LN 204		BISMARCK	ND	58503	1801812862	88	#N/A	1478001	CHOICES COUNSELING & EDU	1801812862		
68	$9,374	450311334	RITTER	REBECCA	1000 E ROSSER AVE		BISMARCK	ND	58501	1013964527	50	Nurse Practitioner	236008	MID DAKOTA CLINIC-CENTER	1275587826		
83	$9,371	450417963	BRADLEY	APRIL	2100 S COLUMBIA RD	STE 202	GRAND FORKS	ND	58201	1336179456	62	Psychology	474001	FAMILY INSTITUTE PC	1003832783		
299	$9,364	731631366	JOHNSON	ELDON	3170 43RD ST SOUTH	STE 101	FARGO	ND	58104	1689886699	65	Physical Therapy	7726001	REHAB AUTHORITY	1730159690		
313	$9,350	450428323	MELICHER	PAUL	100 4TH ST S STE 612		FARGO	ND	58103	1174611438	41	Optometrist	488001	FERCHO CATARACT & EYE CL	1447348602		
99	$9,321	450226909	CUSHING	ANNE	100 4TH ST S		FARGO	ND	58103	1265475305	50	Nurse Practitioner	7742006	SANFORD PROFESSIONAL BUI	1184917924		
62	$9,313	450226558	DAIGLE BJERKE	ADELLE	1 BURDICK EXPRESSWAY W		MINOT	ND	58701	1326010992	43	Certified Registered Nurse Anesthetist	635031	TRINITY MEDICAL GROUP AN	1083653752		
142	$9,301	261175213	KANG	JILL	2430 20TH ST SW		JAMESTOWN	ND	58401	1356618870	48	Podiatry, Surgical chiropody	6885018	INNOVIS HEALTH, LLC DBA	1073793725		
98	$9,294	450437652	GOODMAN	PATRICK	151 S 4TH ST STE 401		GRAND FORKS	ND	58201	1962500694	26	Psychiatry (MD)	242001	NORTHEAST HUMAN SERVICE	1366496341		
340	$9,289	200150710	WEISENBURGER	KELLIE	1167 BORDER LANE RD		WASHBURN	ND	58577	1134118748	50	Nurse Practitioner	6053002	WASHBURN CLINIC	1770591927		
215	$9,288	450321538	HOLLENBECK	KELLEE	310 N 9TH ST		BISMARCK	ND	58501	1184916850	50	Nurse Practitioner	188001	THE BONE & JOINT CENTER,	1750307872		
426	$9,275	261312876	WEIGEL	CHARLES	123 LAKE AVE W		NAPOLEON	ND	58561	1841474111	35	Chiropractor	7107001	TOTAL LIFE CHIROPRACTIC	1669656930		
105	$9,273	208928600	OLSON	RACHEL	3060 FRONTIER WAY S		FARGO	ND	58104	1417103102	66	Speech Therapy	6961001	PEDIATRIC THERAPY PARTNE	1457479958		
52	$9,273	450226909	BRIGGS	STEVEN	801 BROADWAY NORTH		FARGO	ND	58102	1063423895	2	General Surgery	7742001	SANFORD BROADWAY CLINIC	1184917924		
65	$9,262	450226700	MORGAN	MENA	300 N 7TH ST		BISMARCK	ND	58501	1861703134	11	Internal Medicine	440001	SANFORD MEDICAL CENTER/B	1811941172		
175	$9,259	450310462	LESSARD	COLLETTE	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1619107380	16	Obstet/Gynecology	9001	ALTRU HEALTH SYSTEM	1043309552		
47	$9,253	450226909	BERGLOFF	PAULA	700 1ST AVE S		FARGO	ND	58103	1306863303	62	Psychology	7742007	SANFORD NEUROSCIENCE CLI	1184917924		
235	$9,249	450226909	KELLY	BRENDAN	1717 SOUTH UNIVERSITY DR		FARGO	ND	58103	1689873275	41	Optometrist	7742024	SANFORD SOUTH UNIVERSITY	1184917924		
196	$9,240	450232743	CLEMETSON	TAMARA	115 VIVAN ST		PARK RIVER	ND	58270	1891888582	97	Physician Assistant	598001	P.R. HEALTH CORPORATION	1306850706		
175	$9,227	450226700	SCHIRADO	KEVIN	222 N 7TH ST		BISMARCK	ND	58501	1225166523	44	Psychiatric Nurse	4001	SANFORD CLINIC	1811941172		
170	$9,215	450226700	IWAMOTO	MATTHEW	300 N 7TH ST		BISMARCK	ND	58501	1073547014	30	Radiology	440001	SANFORD MEDICAL CENTER/B	1811941172		
18	$9,207	450226700	FYFE	IAN	300 N 7TH ST		BISMARCK	ND	58501	1144240532	20	Orthopedic Surgery	440001	SANFORD MEDICAL CENTER/B	1811941172		
49	$9,202	450226700	FRIGSTAD	SAMANTHA	300 N 7TH ST		BISMARCK	ND	58501	1619275013	43	Certified Registered Nurse Anesthetist	440001	SANFORD MEDICAL CENTER/B	1811941172		
108	$9,188	208928600	DELANEY	SARA	3060 FRONTIER WAY S		FARGO	ND	58104	1215256227	66	Speech Therapy	6961001	PEDIATRIC THERAPY PARTNE	1457479958		
396	$9,179	450370592	NELSON GRIGGS DIST	H	116 MAIN ST S		MCVILLE	ND	58254	1598741381	60	Public Health or Welfare Agency	4484001	NELSON GRIGGS DIST HLTH	1598741381		

65	$9,175	450226558	NORDELL	MARGARET	831 S BROADWAY		MINOT	ND	58701	1598891178	16	Obstet/Gynecology	635001	TRINITY MEDICAL GROUP	1083653752		
163	$9,175	450226700	FRIED	DENISE	414 N 7TH ST		BISMARCK	ND	58501	1740254739	97	Physician Assistant	4046	SANFORD SEVENTH AND ROSS	1811941172		
199	$9,174	450226558	SHEEHAN	JOHN	831 S BROADWAY		MINOT	ND	58701	1124199278	11	Internal Medicine	635001	TRINITY MEDICAL GROUP	1083653752		
278	$9,170	270852337	HILLMER	JED	101 10TH ST N STE 120		FARGO	ND	58102	1174622245	41	Optometrist	7630001	HILLMER JED D, OD, PLLC	1568795623		
208	$9,159	450367038	MEHTA	RAJNIKANT	315 MAIN ST S STE 102		MINOT	ND	58701	1427043827	25	Physical Medicine and Rehab	1366001	NECK & BACK PAIN CLINIC	1427043827		
17	$9,155	450226558	WESTERN DAKOTA SUR	CENTER	1321 W DAKOTA PARKWAY		WILLISTON	ND	58801	1841526332	70	Clinic	635039	TRINITY COMMUNITY CLINIC	1083653752		
45	$9,152	450310462	WOLFGRAM	ALICIA	1200 S COLUMBIA RD		GRAND FORKS	ND	58201	1851664304	43	Certified Registered Nurse Anesthetist	62001	ALTRU HOSPITAL	1154346161		
40	$9,148	450226558	LEWIS	AARON	1 BURDICK EXPRESSWAY W		MINOT	ND	58701	1750598959	5	Anesthesiology (MD)	635031	TRINITY MEDICAL GROUP AN	1083653752		
248	$9,145	113686120	ZIMMERMAN	BETH	1312 HIGHWAY 49 N		BEULAH	ND	58523	1073587085	97	Physician Assistant	6103001	COAL COUNTRY COMMUNITY H	1942288329		
662	$9,138	450462260	OLSON	CHAD	906 MAIN ST		LISBON	ND	58054	1073506499	35	Chiropractor	1786001	LISBON CHIROPRACTIC CLIN	1285627521		
125	$9,138	450227391	CORDY	ROY	213 2ND AVE NE		ROLLA	ND	58367	1902848971	72	Emergency Medicine	401001	PRESENTATION MEDICAL CEN	1265404958		
97	$9,135	274361413	HJELLE	CATHERINE	3201 33RD ST S		FARGO	ND	58104	1528115052	88	#N/A	7702001	ST SOPHIES LLC	1336443654		
85	$9,133	450226429	SWENSON	SHELDON	30 7TH ST W		DICKINSON	ND	58601	1104830298	72	Emergency Medicine	95001	ST JOSEPHS HOSPITAL AND	1992947956		
55	$9,127	450226909	SPELLMAN	STEPHEN	801 BROADWAY NORTH		FARGO	ND	58102	1821020066	10	Gastronenterology	7742001	SANFORD BROADWAY CLINIC	1184917924		
316	$9,123	456002491	WILLIS	KARIN	701 E ROSSER		BISMARCK	ND	58501	1881873776	1	General Practice	102001	CENTER FOR FAMILY MEDICI	1619905528		
6	$9,121	450226700	CANHAM	WILLIAM	300 N 7TH ST		BISMARCK	ND	58501	1265535074	20	Orthopedic Surgery	440001	SANFORD MEDICAL CENTER/B	1811941172		
408	$9,118	383790040	WAGNER	ASHLEY	1655 N GRANDVIEW LANE	SUITE 204	BISMARCK	ND	58503	1982855888	35	Chiropractor	7290001	A L WAGNER FAMILY CHIROP	1790921856		
119	$9,114	450226909	STOMPRO	GREGORY	2301 S 25TH ST STE A		FARGO	ND	58103	1558382770	97	Physician Assistant	7742011	SANFORD ORTHOPEDICS SPOR	1184917924		
46	$9,099	450226909	WOOD	SUSAN	700 1ST AVE S		FARGO	ND	58103	1669777561	62	Psychology	7742007	SANFORD NEUROSCIENCE CLI	1184917924		
92	$9,090	502929444	MITZEL	JULIE	1655 N GRANDVIEW LANE	#204	BISMARCK	ND	58503	1619153699	88	#N/A	7949001	CROSSPOINT COUNSELING	1619153699		
130	$9,063	205749003	ELLENBAUM	KELLI	1303 E CENTRAL AVE		BISMARCK	ND	58501	1003934878	66	Speech Therapy	6880001	RED DOOR PEDIATRIC THERA	1639257033		
240	$9,058	911770748	AUSTIN	WILLIAM	801 BROADWAY NORTH		FARGO	ND	58102	1881633634	30	Radiology	3001	SANFORD BROADWAY CLINIC	1942241351		
159	$9,056	261175213	CARVER	LINDA	3000 32ND AVE S		FARGO	ND	58103	1497786149	46	Nurse Midwives	6885030	INNOVIS HEALTH, LLC DBA	1578907655		
53	$9,054	450231183	BASTIAN	ZACHARY	1213 15TH AVE W		WILLISTON	ND	58801	1447412929	2	General Surgery	711001	CRAVEN-HAGAN/MERCY MEDIC	1760549000		
563	$9,044	450453262	TOWNLEY	BROOK	2701 9TH AVE SW STE 800		FARGO	ND	58103	1033163001	35	Chiropractor	1288001	ORIGIN CHIROPRACTIC PHYS	1033163001		
61	$9,043	450226700	SCHMIDT	CLORIS	300 N 7TH ST		BISMARCK	ND	58501	1346493459	43	Certified Registered Nurse Anesthetist	440001	SANFORD MEDICAL CENTER/B	1811941172		
44	$9,040	450310462	WRAY	GARTH	1200 S COLUMBIA RD		GRAND FORKS	ND	58201	1992891253	43	Certified Registered Nurse Anesthetist	62001	ALTRU HOSPITAL	1154346161		
224	$9,036	450310462	COOK	GINA	1200 S COLUMBIA RD		GRAND FORKS	ND	58201	1063696425	50	Nurse Practitioner	62001	ALTRU HOSPITAL	1154346161		
31	$9,026	450226909	BROWN	ANTHONY	2301 S 25TH ST STE A		FARGO	ND	58103	1053348755	20	Orthopedic Surgery	7742011	SANFORD ORTHOPEDICS SPOR	1184917924		
37	$9,026	450226700	WALTER	DONALD	300 N 7TH ST		BISMARCK	ND	58501	1639264328	43	Certified Registered Nurse Anesthetist	440001	SANFORD MEDICAL CENTER/B	1811941172		
25	$9,022	450226909	SCHMIDT KRINGS	DIANE	2801 UNIVERSITY DR S		FARGO	ND	58103	1346347531	24	Plastic Surgery	7742005	SANFORD 2801 MEDICAL BUI	1184917924		
44	$9,020	450226711	GRENZ	MELODEE	900 E BROADWAY AVE		BISMARCK	ND	58501	1356494835	43	Certified Registered Nurse Anesthetist	92001	ST ALEXIUS MEDICAL CENTE	1629121074		
186	$9,014	450310462	FREDSTROM	RENE'	1200 S COLUMBIA RD		GRAND FORKS	ND	58201	1326064817	11	Internal Medicine	62001	ALTRU HOSPITAL	1154346161		
112	$9,011	450226419	HARDER	TAMMIE	800 3RD AVE SW		RUGBY	ND	58368	1477651628	50	Nurse Practitioner	18067	HEART OF AMERICA JOHNSON	1578734869		
159	$9,010	456002491	HOSTETTER	JEFFREY	701 E ROSSER		BISMARCK	ND	58501	1275561102	8	Family Practice	102001	CENTER FOR FAMILY MEDICI	1619905528		
350	$9,006	331029318	BRAUN	SHEILA	114 3RD ST NE		ROLLA	ND	58367	1194063503	97	Physician Assistant	5836004	NORTHLAND HEALTH PARTNER	1225369523		
120	$9,003	261175213	FIEBIGER	SIRI	3000 32ND AVE S		FARGO	ND	58103	1073544995	16	Obstet/Gynecology	6885030	INNOVIS HEALTH, LLC DBA	1578907655		
185	$9,002	261175213	ZIEGLER	REBECCA	3000 32ND AVE S		FARGO	ND	58103	1396993283	7	Dermatology	6885030	INNOVIS HEALTH, LLC DBA	1578907655		
147	$8,987	450226700	KODJOE	GLADYS	300 N 7TH ST		BISMARCK	ND	58501	1326281882	11	Internal Medicine	440001	SANFORD MEDICAL CENTER/B	1811941172		
145	$8,980	450226909	ALONTO	AUGUSTO	736 BROADWAY N		FARGO	ND	58102	1700833845	11	Internal Medicine	7742022	SANFORD BROADWAY MEDICAL	1184917924		
129	$8,977	450227391	HELD	SAMUEL	213 2ND AVE NE		ROLLA	ND	58367	1740575000	50	Nurse Practitioner	401001	PRESENTATION MEDICAL CEN	1265404958		
103	$8,958	273981362	HOWARD	HEATHER	512 MAIN ST		WILLISTON	ND	58801	1912269952	65	Physical Therapy	7662001	ELITE HEALTH & FITNESS	1841594900		
139	$8,953	450226700	CHARBONNEAU	LORI	414 N 7TH ST		BISMARCK	ND	58501	1700074341	80	Clinical Social Worker	4046	SANFORD SEVENTH AND ROSS	1811941172		
95	$8,948	273015895	WATKINS	LISA	1850 BILLINGS DRIVE		BISMARCK	ND	58504	1841443025	44	Psychiatric Nurse	7571001	LDW, INC	1346540663		
176	$8,948	261175213	HANSEN	SARA	3902 13TH AVE S		FARGO	ND	58103	1144592486	50	Nurse Practitioner	6885032	INNOVIS HEALTH, LLC DBA	1437495264		
141	$8,944	450226909	ALONTO	EILEEN	801 BROADWAY NORTH		FARGO	ND	58102	1326290677	11	Internal Medicine	7742001	SANFORD BROADWAY CLINIC	1184917924		
149	$8,941	450226700	ALLAN	NORA	414 N 7TH ST		BISMARCK	ND	58501	1033317854	50	Nurse Practitioner	4046	SANFORD SEVENTH AND ROSS	1811941172		
182	$8,934	261175213	GUPTA	PARUL	1702 UNIVERSITY DR S		FARGO	ND	58103	1669483038	11	Internal Medicine	6885031	INNOVIS HEALTH, LLC DBA	1255677084		
476	$8,923	201659965	MITSKOG	ALISA	319 11TH ST N		WAHPETON	ND	58075	1578598587	35	Chiropractor	296001	VALLEY SPINE CENTER INC	1427171636		
78	$8,917	261175213	TIWARI	PRIYANKA	3000 32ND AVE S		FARGO	ND	58103	1295837441	11	Internal Medicine	6885030	INNOVIS HEALTH, LLC DBA	1578907655		
143	$8,898	450226711	LELITO	NICHOLAS	900 E BROADWAY AVE		BISMARCK	ND	58501	1265704795	97	Physician Assistant	501001	ST ALEXIUS MEDICAL CENTE	1205868429		
90	$8,878	450226711	JACOBSON-BAUER	HEATHER	900 E BROADWAY AVE		BISMARCK	ND	58501	1447303334	50	Nurse Practitioner	501001	ST ALEXIUS MEDICAL CENTE	1205868429		
53	$8,877	450226711	REEMS	BRENDA	900 E BROADWAY AVE		BISMARCK	ND	58501	1548400260	43	Certified Registered Nurse Anesthetist	92001	ST ALEXIUS MEDICAL CENTE	1629121074		
62	$8,874	450226909	ROBERTSON	CHRISTOPHE	2301 S 25TH ST STE A		FARGO	ND	58103	1104128909	20	Orthopedic Surgery	7742011	SANFORD ORTHOPEDICS SPOR	1184917924		
451	$8,872	450348068	ROEDOCKER	TRAVIS	1001 20TH AVE SW		MINOT	ND	58701	1700811148	35	Chiropractor	1214001	CHIROPRACTIC ARTS CLINIC	1679604755		
276	$8,868	450231183	HEGGE	RYAN	1301 15TH AVE W		WILLISTON	ND	58801	1669634184	30	Radiology	711004	MERCY RADIOLOGY SERVICES	1629234257		
59	$8,866	911810720	KURTZ	JULIE	2301 S 25TH ST STE K		FARGO	ND	58103	1215124573	43	Certified Registered Nurse Anesthetist	757001	VALLEY ANESTHESIA ASSOCI	1467513176		
214	$8,861	731631366	BERNTSON	MARY LYNN	701 DEMERS AVE		GRAND FORKS	ND	58201	1639159338	67	Occupational Therapy	7726002	REHAB AUTHORITY	1730159690		
140	$8,857	450226700	DASILVA	LAWRENCE	300 N 7TH ST		BISMARCK	ND	58501	1750300612	11	Internal Medicine	440001	SANFORD MEDICAL CENTER/B	1811941172		
87	$8,857	911490213	RS MEDICAL		14001 SE FIRST ST		VANCOUVER	WA	98684	1992791230	54	Home Medical Equipment	7139001	RS MEDICAL	1992791230		
238	$8,846	450309291	OTTO	GREGORY	2200 S WASHINGTON ST		GRAND FORKS	ND	58201	1801979745	41	Optometrist	234001	VALLEY VISION CLINIC LTD	1619168267		
92	$8,844	450226711	LANG	MARNY	900 E BROADWAY AVE		BISMARCK	ND	58501	1386859973	62	Psychology	501001	ST ALEXIUS MEDICAL CENTE	1205868429		
135	$8,839	450226909	CAMERON	KATHRYN	100 4TH ST S		FARGO	ND	58103	1104844844	44	Psychiatric Nurse	7742006	SANFORD PROFESSIONAL BUI	1184917924		
261	$8,835	450226700	QUAST	MICHAEL	222 N 7TH ST		BISMARCK	ND	58501	1548287634	5	Anesthesiology (MD)	4001	SANFORD CLINIC	1811941172		
110	$8,834	264314533	CONTEH	PATRICIA	2925 20TH ST S		MOORHEAD	MN	56560	1316968654	50	Nurse Practitioner	7444002	PSJ ACQUISITION LLC	1679709802		
149	$8,814	450227311	NELSON	JACQUELINE	820 5TH ST N		CARRINGTON	ND	58421	1750586772	97	Physician Assistant	507001	FOSTER COUNTY MEDICAL CE	1558389338		

360	$8,803	450310572	MOTACEK	LAWRENCE	300 2ND AVE NE		JAMESTOWN	ND	58401	1114951951	41	Optometrist	349001	LIFETIME VISION SOURCE	1912052234		
102	$8,799	731631366	PETERSON	KRISTOPHER	3170 43RD ST SOUTH	STE 101	FARGO	ND	58104	1548607526	65	Physical Therapy	7726001	REHAB AUTHORITY	1730159690		
53	$8,779	450310462	FONTAINE	SCOTT	1200 S COLUMBIA RD		GRAND FORKS	ND	58201	1801956792	43	Certified Registered Nurse Anesthetist	62001	ALTRU HOSPITAL	1154346161		
118	$8,743	431966857	EDWARDS	ROBERT	304 BURDICK EXPY W		MINOT	ND	58701	1861680548	88	#N/A	7042001	EDWARDS, ROBERT B LPCC	1861680548		
229	$8,742	261175213	MCKINNON	DAWN	1401 13TH AVE E		WEST FARGO	ND	58078	1982649455	50	Nurse Practitioner	6885033	INNOVIS HEALTH, LLC DBA	1487990339		
211	$8,735	450226558	NELSON	SHAWN	2815 16TH ST SW STE 102		MINOT	ND	58701	1891848149	41	Optometrist	731001	TRINITY REGIONAL EYECARE	1083653752		
68	$8,735	450226909	ULVEN	JON	2400 32ND AVE S		FARGO	ND	58103	1114948452	62	Psychology	7742008	SANFORD SOUTHPOINTE CLIN	1184917924		
281	$8,731	450226558	KELLER	KENNETH	1 BURDICK EXPY W		MINOT	ND	58701	1891781886	30	Radiology	635032	TRINITY MEDICAL GROUP	1083653752		
90	$8,729	450226700	HOGGARTH	TONIA	801 21ST AVE SE		MINOT	ND	58701	1619988508	8	Family Practice	4065	SANFORD HEALTH WALK-IN C	1811941172		
219	$8,728	450310462	OLIVER	SARAH	1200 S COLUMBIA RD		GRAND FORKS	ND	58201	1033297262	97	Physician Assistant	62001	ALTRU HOSPITAL	1154346161		
85	$8,705	450226711	KRIENGKRAIRUT	SIRIWAN	900 E BROADWAY AVE		BISMARCK	ND	58501	1578644647	13	Neurology	501001	ST ALEXIUS MEDICAL CENTE	1205868429		
53	$8,692	450226711	MARTIN	DONALD	900 E BROADWAY AVE		BISMARCK	ND	58501	1043517295	43	Certified Registered Nurse Anesthetist	92001	ST ALEXIUS MEDICAL CENTE	1629121074		
188	$8,691	450226711	CHOW	LING SING	900 E BROADWAY AVE		BISMARCK	ND	58501	1003010570	1	General Practice	501001	ST ALEXIUS MEDICAL CENTE	1205868429		
77	$8,689	450226909	STONE	KENNETH	100 4TH ST S		FARGO	ND	58103	1992739262	62	Psychology	7742006	SANFORD PROFESSIONAL BUI	1184917924		
17	$8,683	450341161	MCVILLE AMBULANCE	IC	200 N MAIN ST		MCVILLE	ND	58254	1558581918	59	Ambulance Service	1867001	MCVILLE AMBULANCE SERVIC	1558581918		
139	$8,678	450226909	MAINGI	CHETAN	4656 40TH AVE S		FARGO	ND	58104	1952408809	7	Dermatology	7742010	SANFORD DERMATOLOGY & LA	1184917924		
165	$8,670	450226909	TESCH	YAN	2400 32ND AVE S		FARGO	ND	58103	1467722702	97	Physician Assistant	7742008	SANFORD SOUTHPOINTE CLIN	1184917924		
27	$8,663	450226700	KNAUP	KEETA	300 N 7TH ST		BISMARCK	ND	58501	1982951422	50	Nurse Practitioner	440001	SANFORD MEDICAL CENTER/B	1811941172		
33	$8,662	450231183	RADIC	ZELJKO	1301 15TH AVE W		WILLISTON	ND	58801	1134127327	5	Anesthesiology (MD)	2061001	MERCY MEDICAL CENTER DBA	1245397736		
31	$8,658	233016770	ANIMAS DIABETES CA	LC	965 CHESTERBROOK BLVD		WAYNE	PA	19087	1871578815	54	Home Medical Equipment	7937001	ANIMAS DIABETES CARE LLC	1871578815		
137	$8,651	450226711	THOMAS	KARI	900 E BROADWAY AVE		BISMARCK	ND	58501	1073606505	97	Physician Assistant	459001	ST ALEXIUS MEDICAL CENTE	1306832654		
84	$8,648	450226909	BALDWIN	GRETCHEN	700 1ST AVE S		FARGO	ND	58103	1679817266	97	Physician Assistant	7742007	SANFORD NEUROSCIENCE CLI	1184917924		
81	$8,647	450226909	PARKS	J SCOTT	801 BROADWAY NORTH		FARGO	ND	58102	1164449633	72	Emergency Medicine	7742001	SANFORD BROADWAY CLINIC	1184917924		
131	$8,644	450226909	SAND	MICHAEL	4000 28TH AVE S		MOORHEAD	MN	56560	1154343705	11	Internal Medicine	7742014	SANFORD MOORHEAD CLINIC	1184917924		
134	$8,640	450231181	JYSTAD	PHILIP	2422 20TH ST SW		JAMESTOWN	ND	58401	1447213202	72	Emergency Medicine	124001	JAMESTOWN REGIONAL MEDIC	1821044652		
262	$8,639	911770748	PARVEY	CHRISTEL	621 DEMERS AVE		E GRAND FORKS	MN	56721	1851670707	65	Physical Therapy	3080	SANFORD HEALTH 621 DEMER	1942241351		
103	$8,637	450340688	JACOBSEN	THOMAS	1000 HIGHWAY 12		HETTINGER	ND	58639	1053405662	8	Family Practice	367001	WEST RIVER HEALTH SERVIC	1174606271		
330	$8,623	450462069	BAUMGARTNER	TOM	1711 GOLD DR STE 120		FARGO	ND	58103	1215908876	65	Physical Therapy	5517001	PROFESSIONAL REHABILITAT	1215014105		
53	$8,622	450226909	KJELSTRUP	DIANE	100 4TH ST S		FARGO	ND	58103	1306036017	26	Psychiatry (MD)	7742006	SANFORD PROFESSIONAL BUI	1184917924		
165	$8,620	450227311	HOFF	MARY	820 5TH ST N		CARRINGTON	ND	58421	1700863362	97	Physician Assistant	507001	FOSTER COUNTY MEDICAL CE	1558389338		
122	$8,588	261175213	KESSEL	RYAN	3000 32ND AVE S		FARGO	ND	58103	1831123744	97	Physician Assistant	6885030	INNOVIS HEALTH, LLC DBA	1578907655		
78	$8,584	450226558	OLSON	PAUL	1 BURDICK EXPY W		MINOT	ND	58701	1730250879	72	Emergency Medicine	635032	TRINITY MEDICAL GROUP	1083653752		
167	$8,572	450310462	WILLARDSON	JAMES	1200 S COLUMBIA RD		GRAND FORKS	ND	58201	1457447716	11	Internal Medicine	62001	ALTRU HOSPITAL	1154346161		
91	$8,565	450310462	CHEBACLO	MOHAMED	1200 S COLUMBIA RD		GRAND FORKS	ND	58201	1386708931	6	Cardivascular Disease	62001	ALTRU HOSPITAL	1154346161		
47	$8,555	450226711	TOWN	JERRY	900 E BROADWAY AVE		BISMARCK	ND	58501	1841343191	43	Certified Registered Nurse Anesthetist	92001	ST ALEXIUS MEDICAL CENTE	1629121074		
45	$8,554	208928600	BUCKMIER	SHANNON	3060 FRONTIER WAY S		FARGO	ND	58104	1922155043	65	Physical Therapy	6961001	PEDIATRIC THERAPY PARTNE	1457479958		
92	$8,552	264314533	BURTNETT	LAWANA	510 4TH ST S		FARGO	ND	58103	1053359943	26	Psychiatry (MD)	7444001	PSJ ACQUISITION LLC	1679709802		
73	$8,549	450226909	KESHAVARZ	TAHEREH	700 1ST AVE S		FARGO	ND	58103	1326287244	97	Physician Assistant	7742007	SANFORD NEUROSCIENCE CLI	1184917924		
336	$8,538	911770748	LUKE	MADELINE	520 CHAUTAUQUA BLVD		VALLEY CITY	ND	58072	1184641854	11	Internal Medicine	3002	SANFORD HEALTH VALLEY CI	1942241351		
134	$8,535	450226909	HOLZWARTH	RYAN	4656 40TH AVE S		FARGO	ND	58104	1437102324	7	Dermatology	7742010	SANFORD DERMATOLOGY & LA	1184917924		
169	$8,512	450226700	FOGARTY	EDWARD	300 N 7TH ST		BISMARCK	ND	58501	1902826340	30	Radiology	440001	SANFORD MEDICAL CENTER/B	1811941172		
182	$8,499	450231181	HARRIS	MANUEL	2422 20TH ST SW		JAMESTOWN	ND	58401	1326021882	48	Podiatry, Surgical chiropody	532001	JAMESTOWN REGIONAL MEDIC	1073569794		
321	$8,498	331029318	MCQUEENEY	MICHAEL	114 3RD ST NE		ROLLA	ND	58367	1720334410	97	Physician Assistant	5836004	NORTHLAND HEALTH PARTNER	1225369523		
277	$8,493	760746279	ARGENT	REED	2700 8TH ST NW		MINOT	ND	58703	1699712802	65	Physical Therapy	5439001	FIRST CHOICE PHYSICAL TH	1013098797		
100	$8,493	461482526	GARAAS	JENNIFER	102 WEST BEATON DR #103		WEST FARGO	ND	58078	1407009400	62	Psychology	7973001	BEACON BEHAVIORAL HEALTH	1912243148		
84	$8,487	274333989	HAMANN	LINDA	403 CENTER AVE STE 410		MOORHEAD	MN	56560	1922088442	62	Psychology	6142001	RED RIVER COUNSELING PLL	1275838781		
103	$8,471	450226700	HERMANSON	PATRICIA	209 7 ST N		BISMARCK	ND	58501	1164528519	50	Nurse Practitioner	4048	SANFORD SEVENTH AND THAY	1811941172		
228	$8,469	261175213	OLSON-FITZGERALD	HEIDI	801 BELSLY BLVD S		MOORHEAD	MN	56560	1528094943	97	Physician Assistant	6885034	INNOVIS HEALTH, LLC DBA	1659617504		
33	$8,466	450310462	HAGERT	KAREN	1200 S COLUMBIA RD		GRAND FORKS	ND	58201	1548351554	43	Certified Registered Nurse Anesthetist	62001	ALTRU HOSPITAL	1154346161		
30	$8,465	450315225	WEST TRAILL AMBULA	SE	42 6TH AVE SE		MAYVILLE	ND	58257	1689697062	59	Ambulance Service	1850001	WEST TRAILL AMBULANCE SE	1689697062		
90	$8,454	203005235	NORTHERN VALLEY OB	RICS & GYN	2810 17TH AVE S		GRAND FORKS	ND	58201	1194778035	30	Radiology	6749001	NORTHERN VALLEY OBSTETRI	1194778035		
42	$8,445	450422944	PREISLER	SCOTT	4344 20TH AVE S STE 2		FARGO	ND	58103	1780761031	19	Oral Surgery	455002	FACE & JAW SURGERY CENTE	1295804300		
92	$8,441	264314533	AKGUL	FETIH	510 4TH ST S		FARGO	ND	58103	1093807182	26	Psychiatry (MD)	7444001	PSJ ACQUISITION LLC	1679709802		
201	$8,436	450226558	JANSEN	WAYNE	1 BURDICK EXPY W		MINOT	ND	58701	1962424721	22	Pathology, Anatomy, Clinical Pathology	635032	TRINITY MEDICAL GROUP	1083653752		
404	$8,428	202467100	MEYER	JENNIFER	1428 WEST VILLARD ST		DICKINSON	ND	58601	1861468332	35	Chiropractor	6545001	MEYER FAMILY CHIROPRACTI	1861468332		
51	$8,424	450226711	GABEL	KELLI	900 E BROADWAY AVE		BISMARCK	ND	58501	1205133873	43	Certified Registered Nurse Anesthetist	92001	ST ALEXIUS MEDICAL CENTE	1629121074		
265	$8,424	456002207	DICKEY COUNTY HEAL	ISTRICT	205 15TH ST N		ELLENDALE	ND	58436	1063613438	60	Public Health or Welfare Agency	1727001	DICKEY COUNTY HEALTH DIS	1063613438		
34	$8,423	450310462	HARRISON	JENNIFER	1200 S COLUMBIA RD		GRAND FORKS	ND	58201	1033200837	43	Certified Registered Nurse Anesthetist	62001	ALTRU HOSPITAL	1154346161		
516	$8,407	450226909	MARTINO	ROBERT	801 BROADWAY NORTH		FARGO	ND	58102	1467470062	8	Family Practice	7742001	SANFORD BROADWAY CLINIC	1184917924		
168	$8,399	450413089	BALLIET	PAUL	200 S 5TH ST		BISMARCK	ND	58504	1174560080	41	Optometrist	278001	DAKOTA EYE INSTITUTE	1962449835		
126	$8,389	450226909	HOOVER	CASEY	801 BROADWAY NORTH		FARGO	ND	58102	1780607788	50	Nurse Practitioner	7742001	SANFORD BROADWAY CLINIC	1184917924		
290	$8,389	680601122	JENKINS	RYAN	1207 PRAIRIE PKWY		WEST FARGO	ND	58078	1255404711	35	Chiropractor	1001001	THE CLINIC: FHSC, PC	1023286614		
153	$8,386	205749003	STRAND	CASEY	1303 E CENTRAL AVE		BISMARCK	ND	58501	1427349752	67	Occupational Therapy	6880001	RED DOOR PEDIATRIC THERA	1639257033		
111	$8,383	450226700	TAYLOR	JOSEPH	222 N 7TH ST		BISMARCK	ND	58501	1932295714	34	Urology	4001	SANFORD CLINIC	1811941172		
45	$8,379	450226558	WOODLAND	MICHAEL	1 BURDICK EXPRESSWAY W		MINOT	ND	58701	1144595844	43	Certified Registered Nurse Anesthetist	635031	TRINITY MEDICAL GROUP AN	1083653752		
161	$8,378	911770748	BRICKNER	DEREK	904 5TH AVE NE		JAMESTOWN	ND	58401	1346405602	8	Family Practice	3005	SANFORD HEALTH JAMESTOWN	1942241351		

464	$8,376	456002236	RICHLAND CTY HEALT	PT	413 3RD AVE N		WAHPETON	ND	58075	1275626053	60	Public Health or Welfare Agency	4488001	RICHLAND CTY HEALTH DEPT	1275626053		
117	$8,375	450226909	MCLEOD	MATTHEW	1220 SHEYENNE ST		WEST FARGO	ND	58078	1477870681	8	Family Practice	7742013	SANFORD WEST FARGO CLINI	1184917924		
96	$8,372	450443648	BADRAN-WAKEFIELD	AIDA	600 DEMERS AVE STE 301		GRAND FORKS	ND	58201	1386663573	80	Clinical Social Worker	551001	DAKOTA THERAPY CENTER, L	1932265048		
170	$8,368	450226700	MCINTEE	MICHAEL	300 N 7TH ST		BISMARCK	ND	58501	1053423525	30	Radiology	440001	SANFORD MEDICAL CENTER/B	1811941172		
275	$8,367	450364463	EKLOF	RICHARD	324 9TH AVE		LANGDON	ND	58249	1306822861	41	Optometrist	1622001	EKLOF, RICHARD, OD	1306822861		
64	$8,365	450226909	REVLAND	PAUL	100 4TH ST S		FARGO	ND	58103	1629265814	62	Psychology	7742006	SANFORD PROFESSIONAL BUI	1184917924		
47	$8,360	450310462	SECORD	MELISSA	1200 S COLUMBIA RD		GRAND FORKS	ND	58201	1336235696	43	Certified Registered Nurse Anesthetist	62001	ALTRU HOSPITAL	1154346161		
320	$8,359	203655254	SUNDBY	JESSICA	100 1ST AVE SW		LAMOURE	ND	58458	1336198464	35	Chiropractor	7541001	SUNDBY FAMILY CHIROPRACT	1912178724		
49	$8,346	450226711	KLESER	CHRIS	900 E BROADWAY AVE		BISMARCK	ND	58501	1720228448	43	Certified Registered Nurse Anesthetist	92001	ST ALEXIUS MEDICAL CENTE	1629121074		
197	$8,345	450226909	HORNER	JUSTIN	801 BROADWAY NORTH		FARGO	ND	58102	1326169061	37	Pediatrics	7742001	SANFORD BROADWAY CLINIC	1184917924		
52	$8,338	450226558	ZAHN	DENISE	1 BURDICK EXPRESSWAY W		MINOT	ND	58701	1891970083	43	Certified Registered Nurse Anesthetist	635031	TRINITY MEDICAL GROUP AN	1083653752		
332	$8,324	680601122	JONES	AARON	1207 PRAIRIE PKWY		WEST FARGO	ND	58078	1497832182	35	Chiropractor	1001001	THE CLINIC: FHSC, PC	1023286614		
18	$8,308	450226700	PANSEGRAU	TIMOTHY	300 N 7TH ST		BISMARCK	ND	58501	1871605279	6	Cardivascular Disease	440001	SANFORD MEDICAL CENTER/B	1811941172		
48	$8,293	450226909	BAKKEN	ANDREW	801 BROADWAY NORTH		FARGO	ND	58102	1376648113	23	Peripheral Vascular Diseases or Surgery	7742001	SANFORD BROADWAY CLINIC	1184917924		
155	$8,279	261084122	HENDRICKSON	KATHY	110 9TH AVE S		CARRINGTON	ND	58421	1770558249	41	Optometrist	7045001	FAMILY VISION CENTER	1871780627		
9	$8,269	450455462	IPA, LLC		115 W CENTURY AVE STE B		BISMARCK	ND	58503	1538189907	70	Clinic	6475001	IPA, LLC	1538189907		
161	$8,265	450226558	TRINITY COMMUNITY	WE	1321 W DAKOTA PARKWAY		WILLISTON	ND	58801	1962738542	30	Radiology	635039	TRINITY COMMUNITY CLINIC	1083653752		
51	$8,261	450226711	KUENNEN	TIMOTHY	900 E BROADWAY AVE		BISMARCK	ND	58501	1639251143	43	Certified Registered Nurse Anesthetist	92001	ST ALEXIUS MEDICAL CENTE	1629121074		
104	$8,252	261175213	POWELL	DENISE	3000 32ND AVE S		FARGO	ND	58103	1326373127	46	Nurse Midwives	6885030	INNOVIS HEALTH, LLC DBA	1578907655		
12	$8,250	450226909	ANTONIUK	PAMELA	2801 UNIVERSITY DR S		FARGO	ND	58103	1366513970	24	Plastic Surgery	7742005	SANFORD 2801 MEDICAL BUI	1184917924		
57	$8,235	450226700	NAMMOUR	FADEL	222 N 7TH ST		BISMARCK	ND	58501	1922039684	10	Gastronenterology	4001	SANFORD CLINIC	1811941172		
131	$8,213	450226700	HELD	DEBRA	222 N 7TH ST		BISMARCK	ND	58501	1265538607	97	Physician Assistant	4001	SANFORD CLINIC	1811941172		
349	$8,201	261156722	TICKEL	WILLIAM	819 30TH AVE S STE 100		MOORHEAD	MN	56560	1629295498	35	Chiropractor	7040001	TICKEL CHIROPRACTIC, PC	1811184120		
78	$8,199	450226558	NELSON	JOHN	1 BURDICK EXPY W		MINOT	ND	58701	1952481723	72	Emergency Medicine	635032	TRINITY MEDICAL GROUP	1083653752		
309	$8,197	450310462	VIVATSON	DEBRA	201 E 3RD AVE S		CAVALIER	ND	58220	1720355233	50	Nurse Practitioner	37001	ALTRU CAVALIER	1053400523		
148	$8,196	611481142	ST CLAIR	KELI	4622 40 AVE S STE B		FARGO	ND	58104	1215038971	65	Physical Therapy	6456001	AT HOME THERAPY SERVICES	1437173945		
94	$8,190	450226909	BARUN	BIPIN	801 BROADWAY NORTH		FARGO	ND	58102	1558503037	11	Internal Medicine	7742001	SANFORD BROADWAY CLINIC	1184917924		
113	$8,185	450226909	DAHL	KEVIN	2301 S 25TH ST STE A		FARGO	ND	58103	1356551089	20	Orthopedic Surgery	7742011	SANFORD ORTHOPEDICS SPOR	1184917924		
31	$8,181	450231183	JOHNSON	KAREN	1301 15TH AVE W		WILLISTON	ND	58801	1073841227	43	Certified Registered Nurse Anesthetist	98001	MERCY MEDICAL CENTER DBA	1700990041		
91	$8,180	450310462	KOLBERG	JON	1200 S COLUMBIA RD		GRAND FORKS	ND	58201	1790910446	8	Family Practice	62001	ALTRU HOSPITAL	1154346161		
59	$8,178	911810720	CURRIER	MICHELLE	2301 S 25TH ST STE K		FARGO	ND	58103	1508806993	43	Certified Registered Nurse Anesthetist	757001	VALLEY ANESTHESIA ASSOCI	1467513176		
244	$8,176	911770748	BUCHHOLZ	BRENT	420 S 7TH ST		OAKES	ND	58474	1619288305	97	Physician Assistant	3068	SANFORD HEALTH OAKES CLI	1942241351		
148	$8,176	261175213	ALMANASEER	YASSAR	3000 32ND AVE S		FARGO	ND	58103	1467585349	11	Internal Medicine	6885030	INNOVIS HEALTH, LLC DBA	1578907655		
24	$8,174	450226909	ABRAHAMSON	NICOLE	801 BROADWAY NORTH		FARGO	ND	58102	1851319529	43	Certified Registered Nurse Anesthetist	7742001	SANFORD BROADWAY CLINIC	1184917924		
101	$8,170	450226909	KALLAMADI	REKHA	2400 32ND AVE S		FARGO	ND	58103	1437483823	11	Internal Medicine	7742008	SANFORD SOUTHPOINTE CLIN	1184917924		
72	$8,167	450226909	PREUSSLER	REBECCA	100 4TH ST S		FARGO	ND	58103	1497776736	62	Psychology	7742006	SANFORD PROFESSIONAL BUI	1184917924		
389	$8,166	450425136	COOK	DAVID	103 9TH ST N STE 1		WAHPETON	ND	58075	1427041029	35	Chiropractor	1212001	COOK CHIROPRACTIC CLINIC	1093737066		
187	$8,145	450226700	GLASS	FAE	222 N 7TH ST		BISMARCK	ND	58501	1841498052	50	Nurse Practitioner	4001	SANFORD CLINIC	1811941172		
74	$8,126	450437649	MOOS	PATRICIA	520 3RD ST NW		JAMESTOWN	ND	58401	1275826810	78	Clinical Nurse Specialist	123001	SOUTH CENTRAL HUMAN SERV	1225075906		
169	$8,119	450226909	GUERRERO	DUBERT	736 BROADWAY N		FARGO	ND	58102	1811103989	74	Infectious Diseases	7742022	SANFORD BROADWAY MEDICAL	1184917924		
88	$8,117	450226909	LYSTAD	JEFFREY	2301 S 25TH ST STE A		FARGO	ND	58103	1710904487	96	#N/A	7742011	SANFORD ORTHOPEDICS SPOR	1184917924		
45	$8,111	450226909	AALAND	MARY	801 BROADWAY NORTH		FARGO	ND	58102	1568463321	2	General Surgery	7742001	SANFORD BROADWAY CLINIC	1184917924		
204	$8,103	261175213	BELKNAP	BURTON	1702 UNIVERSITY DR S		FARGO	ND	58103	1770516478	7	Dermatology	6885031	INNOVIS HEALTH, LLC DBA	1255677084		
228	$8,100	450310462	BELVILLE	KAYLAN	1300 S COLUMBIA RD		GRAND FORKS	ND	58201	1689771461	25	Physical Medicine and Rehab	232001	ALTRU REHABILITATION CEN	1437248945		
150	$8,096	911770748	VAN EERDEN	PETER	801 BROADWAY NORTH		FARGO	ND	58102	1851397509	16	Obstet/Gynecology	3001	SANFORD BROADWAY CLINIC	1942241351		
27	$8,091	450226700	BEAR	BRANDI	300 N 7TH ST		BISMARCK	ND	58501	1538348529	43	Certified Registered Nurse Anesthetist	440001	SANFORD MEDICAL CENTER/B	1811941172		
33	$8,084	450226909	MATHIASON	KURT	801 BROADWAY NORTH		FARGO	ND	58102	1073871141	43	Certified Registered Nurse Anesthetist	7742001	SANFORD BROADWAY CLINIC	1184917924		
259	$8,082	205782624	RATH	MANDY	110 WEST BROADWAY		STEELE	ND	58482	1386964138	50	Nurse Practitioner	6935001	KIDDER COUNTY PRIMARY HE	1487731030		
400	$8,080	450311334	ULBERG	MELISSA	401 N 9TH ST		BISMARCK	ND	58501	1457583460	50	Nurse Practitioner	236001	MID DAKOTA CLINIC	1275587826		
21	$8,072	450311718	MERCER CTY AMBULAN	ER	801 4TH ST NE		HAZEN	ND	58545	1386660843	59	Ambulance Service	2858001	MERCER COUNTY AMBULANCE	1386660843		
105	$8,071	450226909	LINDQUIST	PAUL	801 BROADWAY NORTH		FARGO	ND	58102	1962424457	25	Physical Medicine and Rehab	7742001	SANFORD BROADWAY CLINIC	1184917924		
29	$8,046	450226909	ZARLING	JEFFREY	801 BROADWAY NORTH		FARGO	ND	58102	1508965492	43	Certified Registered Nurse Anesthetist	7742001	SANFORD BROADWAY CLINIC	1184917924		
195	$8,031	263876486	DANDURAN	CHRISTOPHE	1383 21ST AVE N		FARGO	ND	58102	1346485463	35	Chiropractor	7272001	DAKOTA HEALTH SOLUTIONS,	1811132145		
99	$8,028	450226558	KIM	KWANGHEE	831 S BROADWAY		MINOT	ND	58701	1851621064	11	Internal Medicine	635001	TRINITY MEDICAL GROUP	1083653752		
44	$8,007	450461636	ANDRUSKI	HEIDI	3035 DEMERS AVE		GRAND FORKS	ND	58201	1881780146	43	Certified Registered Nurse Anesthetist	5522001	GRAND FORKS ANESTHESIA S	1124135546		
152	$8,003	450227311	GEIER	RICK	118 1ST ST S		NEW ROCKFORD	ND	58356	1063499804	1	General Practice	507002	COMMUNITY HEALTH CLINIC	1801811666		
91	$7,987	450226711	FAHN	J PATRICK	900 E BROADWAY AVE		BISMARCK	ND	58501	1902818933	8	Family Practice	501001	ST ALEXIUS MEDICAL CENTE	1205868429		
370	$7,981	450348068	HOWE	BRENDEN	1001 20TH AVE SW		MINOT	ND	58701	1023149655	35	Chiropractor	1214001	CHIROPRACTIC ARTS CLINIC	1679604755		
99	$7,969	261175213	GRAY	TODD	3000 32ND AVE S		FARGO	ND	58103	1679587422	34	Urology	6885030	INNOVIS HEALTH, LLC DBA	1578907655		
282	$7,964	452557066	DAMMEN	JASON	2010 4TH AVE NW STE 106		MINOT	ND	58703	1568775773	35	Chiropractor	7790001	ACTIVE BODY CHIROPRACTIC	1346527819		
18	$7,960	450226558	PHILLIPS	CHRISTOPHE	101 3RD AVE SW		MINOT	ND	58701	1205940483	33	Thoracic Surgery	635027	TRINITY MEDICAL GROUP	1083653752		
125	$7,957	450227753	BITZ	TRENT	1200 ROBERTS AVE NE		COOPERSTOWN	ND	58425	1740576115	50	Nurse Practitioner	121001	COOPERSTOWN MEDICAL CENT	1962548214		
51	$7,955	450226909	CLEVELAND	CHRIS	2400 32ND AVE S		FARGO	ND	58103	1982693875	37	Pediatrics	7742008	SANFORD SOUTHPOINTE CLIN	1184917924		
53	$7,943	911810720	PANTZKE	TRACI	2301 S 25TH ST STE K		FARGO	ND	58103	1932159183	43	Certified Registered Nurse Anesthetist	757001	VALLEY ANESTHESIA ASSOCI	1467513176		
81	$7,940	450226909	TOUMEH	MOHAMED	801 BROADWAY NORTH		FARGO	ND	58102	1598920969	11	Internal Medicine	7742001	SANFORD BROADWAY CLINIC	1184917924		
246	$7,938	311824372	CHINE	NICOLE	1425 S COLUMBIA RD		GRAND FORKS	ND	58201	1548370752	65	Physical Therapy	6037002	ACHIEVE THERAPY, LLC	1013009232		

108	$7,928	113718959	INSTITUTE FOR LOW	CARE, LLC	300 MAIN AVE SUITE 212		FARGO	ND	58103	1124125109	70	Clinic	6436001	INSTITUTE FOR LOW BACK C	1124125109		
31	$7,902	450231183	LEWIS	MELISSA	1301 15TH AVE W		WILLISTON	ND	58801	1679850192	43	Certified Registered Nurse Anesthetist	98001	MERCY MEDICAL CENTER DBA	1700990041		
54	$7,890	260480153	WILLERT JR	MERYL	7151 15TH ST S		FARGO	ND	58104	1346210499	62	Psychology	6986002	DAKOTA FAMILY SERVICES	1578755344		
260	$7,865	261175213	KEMPF	THOMAS	1702 UNIVERSITY DR S		FARGO	ND	58103	1215967393	11	Internal Medicine	6885031	INNOVIS HEALTH, LLC DBA	1255677084		
49	$7,862	450226700	SHRESTHA	BHAJA	300 N 7TH ST		BISMARCK	ND	58501	1831354679	29	Pulmonary Diseases	440001	SANFORD MEDICAL CENTER/B	1811941172		
527	$7,859	450437563	BARTOSH-HEACOX	ANNETTE	15 11TH AVE W		LISBON	ND	58054	1427193051	35	Chiropractor	615001	SHEYENNE VALLEY CHIROPRA	1992900393		
93	$7,853	450226909	CASAS	LUIS	801 BROADWAY NORTH		FARGO	ND	58102	1679541841	37	Pediatrics	7742001	SANFORD BROADWAY CLINIC	1184917924		
126	$7,844	450226909	NAGLE	JAMES	801 BROADWAY NORTH		FARGO	ND	58102	1528019429	4	Otology, Laryngology, Rhinology	7742001	SANFORD BROADWAY CLINIC	1184917924		
110	$7,843	450310462	HOLUM	LYNN	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1396948493	68	Licensed Registered Dietitian	9001	ALTRU HEALTH SYSTEM	1043309552		
98	$7,835	450227753	KARKI	MOHAN	1200 ROBERTS AVE NE		COOPERSTOWN	ND	58425	1679720999	8	Family Practice	121001	COOPERSTOWN MEDICAL CENT	1962548214		
174	$7,823	450226558	LER	BONNIE	400 BURDICK EXPY E		MINOT	ND	58701	1336239490	50	Nurse Practitioner	635006	TRINITY MEDICAL GROUP	1083653752		
178	$7,817	263047434	ALLARD	AMY	1517 32ND AVE S		FARGO	ND	58103	1316171903	50	Nurse Practitioner	7174002	7 DAY CLINIC SOUTH FARGO	1851547160		
195	$7,805	760786684	TJELTA	JODI	207 1ST AVE S SUITE C		NEW ROCKFORD	ND	58356	1437247665	65	Physical Therapy	6541001	PEAK PERFORMANCE PHYSICA	1336237403		
121	$7,802	450340688	KLUDT	JOHN	1000 HIGHWAY 12		HETTINGER	ND	58639	1053404756	41	Optometrist	377001	WEST RIVER EYE CENTER	1588784870		
48	$7,799	450226558	SIMON	JEFFREY	1 BURDICK EXPRESSWAY W		MINOT	ND	58701	1659445021	43	Certified Registered Nurse Anesthetist	635031	TRINITY MEDICAL GROUP AN	1083653752		
186	$7,794	450340688	RANUM	JOSHUA	1000 HIGHWAY 12		HETTINGER	ND	58639	1609035120	11	Internal Medicine	367001	WEST RIVER HEALTH SERVIC	1174606271		
39	$7,776	411919461	GENEREUX	HEIDI	824 RICHLAND ST		WAHPETON	ND	58075	1124135629	43	Certified Registered Nurse Anesthetist	1224001	RED RIVER ANESTHESIA PC	1295842623		
262	$7,751	263226667	DUKART	JESSICA	1462 I-94 BUS LOOP E #1		DICKINSON	ND	58601	1134270689	35	Chiropractor	7211001	BELL CHIROPRACTIC AND FI	1013164862		
158	$7,744	270342077	OLHEISER	RACHEL	911 W INTERSTATE AVE	STE 12 BLDG 3	BISMARCK	ND	58503	1871926113	65	Physical Therapy	7476001	NORTHERN LIGHTS PHYSICAL	1760613632		
118	$7,736	450226909	POTLURI	RAJENDRA	801 BROADWAY NORTH		FARGO	ND	58102	1679562953	11	Internal Medicine	7742001	SANFORD BROADWAY CLINIC	1184917924		
38	$7,734	450226711	HEYERMAN	JAMES	900 E BROADWAY AVE		BISMARCK	ND	58501	1558414037	43	Certified Registered Nurse Anesthetist	92001	ST ALEXIUS MEDICAL CENTE	1629121074		
100	$7,734	450226700	SKAGER	TANYA	30 7TH ST W		DICKINSON	ND	58601	1851331656	8	Family Practice	4092	SANFORD BISMARCK AT ST J	1811941172		
182	$7,734	450310462	NYGAARD	ANNE	960 S COLUMBIA RD		GRAND FORKS	ND	58201	1386653293	50	Nurse Practitioner	9028	ALTRU CANCER CENTER	1043309552		
139	$7,732	261175213	KUHN	JESSICA	1702 UNIVERSITY DR S		FARGO	ND	58103	1245591502	50	Nurse Practitioner	6885031	INNOVIS HEALTH, LLC DBA	1255677084		
129	$7,727	450226909	ORSON	GREGORY	2301 S 25TH ST STE A		FARGO	ND	58103	1932130036	20	Orthopedic Surgery	7742011	SANFORD ORTHOPEDICS SPOR	1184917924		
203	$7,725	911770748	JUNG	LAURIE	621 DEMERS AVE		E GRAND FORKS	MN	56721	1942236815	65	Physical Therapy	3080	SANFORD HEALTH 621 DEMER	1942241351		
488	$7,723	911770748	NG	SU-ANN	801 BROADWAY NORTH		FARGO	ND	58102	1336183482	30	Radiology	3001	SANFORD BROADWAY CLINIC	1942241351		
16	$7,716	450314626	OAKES AMBULANCE SE	E	615 IVY AVE		OAKES	ND	58474	1548390735	59	Ambulance Service	2857001	OAKES AMBULANCE SERVICE	1548390735		
182	$7,702	261404354	MCCOY JR	FRANKLIN	201 2ND AVE W		WILLISTON	ND	58801	1760572770	22	Pathology, Anatomy, Clinical Pathology	7276001	JOHN B ANDELIN MD PC DBA	1821248477		
145	$7,698	731631366	HAYES	KIRK	701 DEMERS AVE		GRAND FORKS	ND	58201	1639233109	65	Physical Therapy	7726002	REHAB AUTHORITY	1730159690		
65	$7,694	450226558	RIORDAN	ERICA	400 BURDICK EXPY E		MINOT	ND	58701	1932480282	46	Nurse Midwives	635006	TRINITY MEDICAL GROUP	1083653752		
324	$7,690	208482521	HOCHHALTER	MINDY	1655 N GRANDVIEW LN #204		BISMARCK	ND	58503	1417203704	65	Physical Therapy	6950001	JONES PHYSICAL THERAPY,	1962523076		
186	$7,687	450310462	RUSTVANG	DANIEL	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1902992266	50	Nurse Practitioner	9001	ALTRU HEALTH SYSTEM	1043309552		
38	$7,686	261175213	BHIDE	SUWARNA	3000 32ND AVE S		FARGO	ND	58103	1841466307	5	Anesthesiology (MD)	6885030	INNOVIS HEALTH, LLC DBA	1578907655		
53	$7,673	450226558	SCHAFFNER	CAROL	831 S BROADWAY		MINOT	ND	58701	1780755835	16	Obstet/Gynecology	635001	TRINITY MEDICAL GROUP	1083653752		
94	$7,663	473988731	TALLAKSON	MARTIN	808 3 AVE S SUITE 303		FARGO	ND	58103	1598848897	88	#N/A	7134001	CLARITY COUNSELING	1598848897		
47	$7,660	450226700	SARRIGIANNIDIS	ANDREAS	300 N 7TH ST		BISMARCK	ND	58501	1497853147	29	Pulmonary Diseases	440001	SANFORD MEDICAL CENTER/B	1811941172		
142	$7,652	410695598	TORSON	NANCY	2400 ST FRANCIS DRIVE		BRECKENRIDGE	MN	56520	1104042092	26	Psychiatry (MD)	207001	ST FRANCIS MEDICAL CENTE	1891954574		
730	$7,648	460387005	KENDALL	CRAIG	305 1ST AVE S		ELLENDALE	ND	58436	1003928797	35	Chiropractor	1387001	ELLENDALE CHIROPRACTIC	1003928797		
115	$7,647	450226909	HOCKETT	STEPHAINE	801 BROADWAY NORTH		FARGO	ND	58102	1982626479	50	Nurse Practitioner	7742001	SANFORD BROADWAY CLINIC	1184917924		
93	$7,645	450226700	STAFFORD	DARLA	222 N 7TH ST		BISMARCK	ND	58501	1053493494	80	Clinical Social Worker	4001	SANFORD CLINIC	1811941172		
68	$7,639	450417963	WHITCOMB	DAVID	2100 S COLUMBIA RD	STE 202	GRAND FORKS	ND	58201	1316140346	62	Psychology	474001	FAMILY INSTITUTE PC	1003832783		
97	$7,635	205749003	SEHN	STEPHANIE	1303 E CENTRAL AVE		BISMARCK	ND	58501	1235397639	66	Speech Therapy	6880001	RED DOOR PEDIATRIC THERA	1639257033		
42	$7,601	450226558	ULLOA	JUAN	2815 16TH ST SW STE 100		MINOT	ND	58701	1811196504	19	Oral Surgery	7766001	TRINITY ORAL AND MAXILLO	1245272277		
328	$7,600	450423504	BADINGER	CORY	1617 32ND AVE S		FARGO	ND	58103	1609929033	35	Chiropractor	544001	BADINGER CHIROPRACTIC CL	1609929033		
353	$7,593	273693098	SIMNIONIW	KYLIE	352 1ST ST E STE D		DICKINSON	ND	58601	1154560274	35	Chiropractor	7625001	SIMNIONIW FAMILY CHIROPR	1811299811		
343	$7,588	911770748	KARLINS	NATHANIEL	801 BROADWAY NORTH		FARGO	ND	58102	1295752962	30	Radiology	3001	SANFORD BROADWAY CLINIC	1942241351		
119	$7,587	261175213	HOFSOMMER	LEE	1702 UNIVERSITY DR S		FARGO	ND	58103	1972534642	48	Podiatry, Surgical chiropody	6885031	INNOVIS HEALTH, LLC DBA	1255677084		
222	$7,579	261175213	JOHNSON	WALTER	1702 UNIVERSITY DR S		FARGO	ND	58103	1124043468	11	Internal Medicine	6885031	INNOVIS HEALTH, LLC DBA	1255677084		
70	$7,573	450226429	WILKIE	PENNY	30 7TH ST W		DICKINSON	ND	58601	1861557977	72	Emergency Medicine	95001	ST JOSEPHS HOSPITAL AND	1992947956		
103	$7,572	450226700	AHMANN	JESSICA	225 N 7TH ST		BISMARCK	ND	58501	1275866824	50	Nurse Practitioner	4061	SANFORD SEVENTH AND THAY	1811941172		
172	$7,570	450413089	SPRINGAN	JOEL	200 S 5TH ST		BISMARCK	ND	58504	1194767129	41	Optometrist	278001	DAKOTA EYE INSTITUTE	1962449835		
27	$7,570	450226909	CURRIE	MICHAEL	801 BROADWAY NORTH		FARGO	ND	58102	1588743561	43	Certified Registered Nurse Anesthetist	7742001	SANFORD BROADWAY CLINIC	1184917924		
226	$7,569	450226909	BLEHM	JULIE	801 BROADWAY NORTH		FARGO	ND	58102	1760409767	11	Internal Medicine	7742008	SANFORD SOUTHPOINTE CLIN	1184917924		
424	$7,566	680575639	NEAMEYER	TONY	121 W CENTURY AVE		BISMARCK	ND	58503	1518946474	65	Physical Therapy	1060002	SPINE ORTHOPEDIC AND PAI	1639148463		
67	$7,566	450226909	HELLMAN	JASON	2400 32ND AVE S		FARGO	ND	58103	1801814454	97	Physician Assistant	7742008	SANFORD SOUTHPOINTE CLIN	1184917924		
22	$7,534	911770748	SCHMIDT KRINGS	DIANE	2801 UNIVERSITY DR S		FARGO	ND	58103	1346347531	24	Plastic Surgery	3067	SANFORD 2801 MEDICAL BUI	1942241351		
49	$7,522	450226558	MCMAHON	MICHAEL	307 5TH AVE SE		MINOT	ND	58701	1700967890	19	Oral Surgery	635012	TRINITY HEALTH DBA ORAL	1245272277		
176	$7,522	450311334	SMITH	MEGAN	2700 STATE ST		BISMARCK	ND	58503	1659429777	67	Occupational Therapy	236006	MID DAKOTA CLINIC - GATE	1275587826		
67	$7,518	450226558	KELLENBERGER	EDWARD	20 BURDICK EXPRESSWAY W		MINOT	ND	58701	1487817904	13	Neurology	635029	TRINITY MEDICAL GROUP	1083653752		
432	$7,518	30477097	GIETZEN	CHRIS	2004 TWIN CITY DR		MANDAN	ND	58554	1205898319	65	Physical Therapy	5470001	DAKOTA PHYSICAL THERAPY,	1740211267		
326	$7,515	461789081	JORDE	ERICA	2 3RD AVE SW		TOWNER	ND	58788	1114220175	35	Chiropractor	7982001	ALIGN CHIROPRACTIC PC	1912248576		
71	$7,502	450226711	DAHMEN	KEVIN	900 E BROADWAY AVE		BISMARCK	ND	58501	1821174178	26	Psychiatry (MD)	501001	ST ALEXIUS MEDICAL CENTE	1205868429		
320	$7,493	911841831	OLTMANNS	MELANIE	2273 3RD AVE W		DICKINSON	ND	58601	1053310243	41	Optometrist	1086001	OLTMANNS, MELANIE, OD,PC	1508865700		
93	$7,485	450458242	TOMBOULIAN	SHERRYL	12 6TH AVE SW		BOWMAN	ND	58623	1003847971	8	Family Practice	2086001	SOUTHWEST MEDICAL CLINIC	1023083714		
98	$7,485	731702938	CARROLL	TRISTY	300 2ND AVE NE	STE 215A	JAMESTOWN	ND	58401	1588766059	66	Speech Therapy	6276001	T AND K SPEECH LANGUAGE	1184741340		

44	$7,483	450226711	TURMAN	RICHARD	900 E BROADWAY AVE		BISMARCK	ND	58501	1578616827	43	Certified Registered Nurse Anesthetist	92001	ST ALEXIUS MEDICAL CENTE	1629121074		
85	$7,482	271691028	ELHARD	DEBORAH	240 MAIN ST		ELLENDALE	ND	58436	1639246937	88	#N/A	1315001	LIFE SEASONS COUNSELING,	1639246937		
84	$7,475	208976315	SCILLEY	MEGAN	3001 11TH ST S		FARGO	ND	58103	1205273950	66	Speech Therapy	5881001	BEYOND BOUNDARIES SPEECH	1790999605		
108	$7,474	208869566	ANDERSON	BRITTANY	3001 S 11TH ST		FARGO	ND	58103	1033374954	65	Physical Therapy	6569001	BEYOND BOUNDARIES OCCUPA	1245312388		
65	$7,468	450226558	FRANKS	KEVIN	1 BURDICK EXPY W		MINOT	ND	58701	1144294216	72	Emergency Medicine	635032	TRINITY MEDICAL GROUP	1083653752		
87	$7,459	450310462	PARIKH	VINITA	1200 S COLUMBIA RD		GRAND FORKS	ND	58201	1780842963	5	Anesthesiology (MD)	62001	ALTRU HOSPITAL	1154346161		
362	$7,459	450455512	SCHULER	JEROME	1050 31ST AVE SW STE D		MINOT	ND	58701	1063482438	35	Chiropractor	744001	BACK TO BACK CHIROPRACTI	1023331345		
147	$7,452	450226429	LABRIE	SONJA	30 7TH ST W		DICKINSON	ND	58601	1295789451	11	Internal Medicine	95001	ST JOSEPHS HOSPITAL AND	1992947956		
85	$7,444	450226700	HENKE	MELISSA	414 N 7TH ST		BISMARCK	ND	58501	1083734172	26	Psychiatry (MD)	4046	SANFORD SEVENTH AND ROSS	1811941172		
80	$7,444	450359201	ADDY	BOYD	2008 TWIN CITY DR		MANDAN	ND	58554	1134188121	8	Family Practice	1061001	REGIONAL MEDICAL CENTER	1578594016		
40	$7,415	450226711	SAILER	JILL	900 E BROADWAY AVE		BISMARCK	ND	58501	1265616395	43	Certified Registered Nurse Anesthetist	92001	ST ALEXIUS MEDICAL CENTE	1629121074		
77	$7,415	450226909	JOHNSON	LUCY	100 4TH ST S		FARGO	ND	58103	1184642753	44	Psychiatric Nurse	7742006	SANFORD PROFESSIONAL BUI	1184917924		
373	$7,413	141967908	BADINGER	JOHN	117 E CENTURY AVE		BISMARCK	ND	58503	1528136017	35	Chiropractor	678001	FAMILY HEALTH CHIROPRACT	1801964481		
427	$7,410	273795972	SAMSON	MATTHEW	1400 37TH AVE SW STE C		MINOT	ND	58701	1366742603	35	Chiropractor	7626001	SAMSON FAMILY CHIROPRACT	1609177542		
408	$7,410	450448635	WALKER	JODY	3001 S COLUMBIA RD STE C		GRAND FORKS	ND	58201	1407947567	35	Chiropractor	5367001	GRAND FORKS CHIROPRACTIC	1407947567		
54	$7,404	411346366	MAYO MEDICAL LABOR	IE	200 1ST ST SW		ROCHESTER	MN	55905	1093792350	69	Independent Laboratory	3512001	MAYO MEDICAL LABORATORIE	1093792350		
300	$7,396	205561370	SCHLAGER	TODD	2303 S WASHINGTON STE I		GRAND FORKS	ND	58201	1972595379	35	Chiropractor	6878001	A SCHLAGER CHIROPRACTIC	1982829768		
79	$7,394	450226909	STAVENGER	CHRISTOPHE	2301 S 25TH ST STE A		FARGO	ND	58103	1447337126	97	Physician Assistant	7742011	SANFORD ORTHOPEDICS SPOR	1184917924		
167	$7,389	61663341	MENDOZA	PEDRO	300 W CENTURY AVE		BISMARCK	ND	58503	1609825132	29	Pulmonary Diseases	5839001	PNEUMOS CLINIC	1700836160		
32	$7,387	731724140	LUDWIG	RODNEY	300 MAIN AVE STE 205		FARGO	ND	58103	1518901172	11	Internal Medicine	6509001	FM ENDOSCOPY CENTER LLC	1326144221		
232	$7,380	20731583	WALKER	CHARLES	250 25TH ST S		FARGO	ND	58103	1679718571	35	Chiropractor	6378002	WALKER CHIROPRACTIC PC	1538167150		
51	$7,376	450226700	KOVACS	GREGG	2615 FAIRWAY ST		DICKINSON	ND	58601	1942270426	20	Orthopedic Surgery	4008	SANFORD HEALTH DICKINSON	1811941172		
85	$7,374	450437649	CRAMER	DANIEL	520 3RD ST NW		JAMESTOWN	ND	58401	1821237116	62	Psychology	123001	SOUTH CENTRAL HUMAN SERV	1225075906		
88	$7,369	450226558	GASSER	CHARLES	101 3RD AVE SW		MINOT	ND	58701	1023105020	4	Otology, Laryngology, Rhinology	635027	TRINITY MEDICAL GROUP	1083653752		
178	$7,367	450462069	KURTZ	LYNDEN	1711 GOLD DR STE 120		FARGO	ND	58103	1548240104	65	Physical Therapy	5517001	PROFESSIONAL REHABILITAT	1215014105		
86	$7,341	450226909	HOFFMANN-CARROLL	JOANNA	4000 28TH AVE S		MOORHEAD	MN	56560	1629096268	97	Physician Assistant	7742014	SANFORD MOORHEAD CLINIC	1184917924		
452	$7,340	320397461	REDINGTON	JONATHAN	205 SHEYENNE STREET		WEST FARGO	ND	58078	1285642280	35	Chiropractor	7969001	WEST FARGO CHIROPRACTIC	1144566746		
28	$7,339	261175213	DEES	BRIAN	3000 32ND AVE S		FARGO	ND	58103	1255363693	2	General Surgery	6885030	INNOVIS HEALTH, LLC DBA	1578907655		
152	$7,337	450425948	LARSON	JESSICA	HWY 281 N		CANDO	ND	58324	1083901490	50	Nurse Practitioner	398001	TOWNER COUNTY MEDICAL CE	1124041389		
267	$7,334	450320853	TOWLE	STEVEN	620 N 9TH ST		BISMARCK	ND	58501	1932197209	41	Optometrist	202001	EYE CLINIC OF NORTH DAKO	1497853717		
213	$7,331	450374878	NYHUS	CHARLES	922 LINCOLN AVE		HARVEY	ND	58341	1700954633	8	Family Practice	113001	CENTRAL DAKOTA FAMILY PH	1720156664		
38	$7,326	450226711	KLEIN	KEVIN	900 E BROADWAY AVE		BISMARCK	ND	58501	1639222110	43	Certified Registered Nurse Anesthetist	92001	ST ALEXIUS MEDICAL CENTE	1629121074		
43	$7,326	450226711	STAIGER	JOSHUA	900 E BROADWAY AVE		BISMARCK	ND	58501	1548507197	43	Certified Registered Nurse Anesthetist	92001	ST ALEXIUS MEDICAL CENTE	1629121074		
149	$7,325	450226429	BROPHY	SHAD	30 7TH ST W		DICKINSON	ND	58601	1215290416	97	Physician Assistant	95001	ST JOSEPHS HOSPITAL AND	1992947956		
655	$7,316	456002234	RANSOM CTY COM HEA		404 FOREST STREET		LISBON	ND	58054	1558562975	60	Public Health or Welfare Agency	4492001	RANSOM COUNTY PUBLIC HEA	1558562975		
36	$7,296	450310462	SIEMERS	TRENT	1200 S COLUMBIA RD		GRAND FORKS	ND	58201	1326154956	43	Certified Registered Nurse Anesthetist	62001	ALTRU HOSPITAL	1154346161		
319	$7,290	470929724	ANDERSON	DANIEL	2911 N 14TH ST STE 102		BISMARCK	ND	58503	1578892303	35	Chiropractor	6064001	CAPITAL CHIROPRACTIC & S	1689704553		
29	$7,290	261175213	PERENCEVIC	BORIS	3000 32ND AVE S		FARGO	ND	58103	1376576975	5	Anesthesiology (MD)	6885030	INNOVIS HEALTH, LLC DBA	1578907655		
422	$7,289	450226558	SEREBRENNIK	MIKHAIL	1 BURDICK EXPY W		MINOT	ND	58701	1629279021	30	Radiology	635032	TRINITY MEDICAL GROUP	1083653752		
215	$7,288	271505326	HIEB	MARCUS	1000 TACOMA AVE STE 500		BISMARCK	ND	58504	1790709673	65	Physical Therapy	7569001	ADVANCED PHYSICAL THERAP	1013238112		
21	$7,286	450226909	JOHNSON	LEIF	801 BROADWAY NORTH		FARGO	ND	58102	1437495447	43	Certified Registered Nurse Anesthetist	7742001	SANFORD BROADWAY CLINIC	1184917924		
193	$7,264	450310462	KROPP	MICHAEL	1200 S COLUMBIA RD		GRAND FORKS	ND	58201	1306092069	50	Nurse Practitioner	62001	ALTRU HOSPITAL	1154346161		
52	$7,259	450226909	MAYFIELD JORGENSEN	MICHELLE	1720 UNIVERSITY DR S		FARGO	ND	58103	1588777569	26	Psychiatry (MD)	7742004	SANFORD SOUTH UNIVERSITY	1184917924		
101	$7,258	371616627	TORKELSON	KARI	2900 S COLUMBIA RD		GRAND FORKS	ND	58201	1528034022	41	Optometrist	7686001	LVCTR, PC DBA LIFETIME V	1720385263		
187	$7,252	263047434	HAMILTON	ANDREW	4622 40TH AVE S		FARGO	ND	58104	1093979882	50	Nurse Practitioner	7174001	7 DAY CLINIC OSGOOD	1619123593		
49	$7,250	450226711	AHNEMAN	JON	900 E BROADWAY AVE		BISMARCK	ND	58501	1982757449	43	Certified Registered Nurse Anesthetist	92001	ST ALEXIUS MEDICAL CENTE	1629121074		
268	$7,249	450310462	SCHUMACHER	JENNIFER	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1407181589	41	Optometrist	9001	ALTRU HEALTH SYSTEM	1043309552		
45	$7,249	450226711	WALFORD	STEVEN	900 E BROADWAY AVE		BISMARCK	ND	58501	1477606317	43	Certified Registered Nurse Anesthetist	92001	ST ALEXIUS MEDICAL CENTE	1629121074		
14	$7,246	450227311	KHOKHA	INDER	820 5TH ST N		CARRINGTON	ND	58421	1225089949	2	General Surgery	507001	FOSTER COUNTY MEDICAL CE	1558389338		
57	$7,246	450310462	JACKSON	WALTER	1200 S COLUMBIA RD		GRAND FORKS	ND	58201	1902982796	72	Emergency Medicine	62001	ALTRU HOSPITAL	1154346161		
34	$7,227	450226909	LAMMLE	WILLIAM	801 BROADWAY NORTH		FARGO	ND	58102	1285651950	97	Physician Assistant	7742001	SANFORD BROADWAY CLINIC	1184917924		
93	$7,224	450231183	LUKENBILL	DEBRA	1301 15TH AVE W		WILLISTON	ND	58801	1265456370	50	Nurse Practitioner	711002	MERCY MEDICAL CENTER DBA	1801928593		
217	$7,224	113686120	SAILER	DEBRA	111 E MAIN ST		CENTER	ND	58530	1447548623	50	Nurse Practitioner	6103006	COAL COUNTRY COMMUNITY H	1003052952		
459	$7,211	450433194	NAGEL	TIMOTHY	425 S 7TH ST		BISMARCK	ND	58504	1578575353	35	Chiropractor	572001	SOUTHRIDGE CHIROPRACTIC	1205848108		
176	$7,197	311824372	WILCOX	LACEY	1425 S COLUMBIA RD		GRAND FORKS	ND	58201	1922396480	65	Physical Therapy	6037005	ACHIEVE THERAPY EAST GRA	1003145376		
80	$7,196	261175213	STRINDEN	STEVEN	3000 32ND AVE S		FARGO	ND	58103	1639108814	34	Urology	6885030	INNOVIS HEALTH, LLC DBA	1578907655		
38	$7,196	450226711	MCARTHUR	RYAN	900 E BROADWAY AVE		BISMARCK	ND	58501	1679626972	43	Certified Registered Nurse Anesthetist	92001	ST ALEXIUS MEDICAL CENTE	1629121074		
84	$7,187	450226909	MEIER	RAYMOND	801 BROADWAY NORTH		FARGO	ND	58102	1740208321	43	Certified Registered Nurse Anesthetist	7742001	SANFORD BROADWAY CLINIC	1184917924		
81	$7,186	450226909	MARTENS	KRISTINE	2400 32ND AVE S		FARGO	ND	58103	1477867943	8	Family Practice	7742008	SANFORD SOUTHPOINTE CLIN	1184917924		
97	$7,186	450226419	DANIELSON	GAIL	800 3RD AVE SW		RUGBY	ND	58368	1629178256	97	Physician Assistant	18067	HEART OF AMERICA JOHNSON	1578734869		
109	$7,179	264198087	HAWLEY	LISA	424 3 ST SE		DEVILS LAKE	ND	58301	1891996179	80	Clinical Social Worker	7315001	ADVANCED COUNSELING FOR	1700026317		
60	$7,149	450226558	WALTERS	JUSTIN	1 BURDICK EXPY W		MINOT	ND	58701	1124264205	72	Emergency Medicine	635032	TRINITY MEDICAL GROUP	1083653752		
251	$7,148	456013474	LEE	RENEE	301 MOUNTAIN ST E		CAVALIER	ND	58220	1104962299	50	Nurse Practitioner	5633001	PEMBINA COUNTY HOSPITAL	1417093949		
77	$7,148	208928600	VENAAS-GILBRAITH	JANETTE	3060 FRONTIER WAY S		FARGO	ND	58104	1376699744	66	Speech Therapy	6961001	PEDIATRIC THERAPY PARTNE	1457479958		
69	$7,146	208869566	HENSRUD	ANDREA	3001 S 11TH ST		FARGO	ND	58103	1386909539	67	Occupational Therapy	6569001	BEYOND BOUNDARIES OCCUPA	1245312388		
34	$7,141	450226909	HUBER	JASON	801 BROADWAY NORTH		FARGO	ND	58102	1467470104	43	Certified Registered Nurse Anesthetist	7742001	SANFORD BROADWAY CLINIC	1184917924		

28	$7,139	450231183	OLSON	JEFFREY	1301 15TH AVE W		WILLISTON	ND	58801	1093734683	43	Certified Registered Nurse Anesthetist	98001	MERCY MEDICAL CENTER DBA	1700990041		
59	$7,121	274361413	SCHUMACHER	KEVIN	3201 33RD ST S		FARGO	ND	58104	1699878256	62	Psychology	7702001	ST SOPHIES LLC	1336443654		
204	$7,114	450226700	NESS	BRADY	715 E BROADWAY AVE		BISMARCK	ND	58501	1518079011	64	Audiology	4050	SANFORD SEVENTH AND BROA	1811941172		
124	$7,104	861123162	WIEDRICH	SARA	310 N 10TH ST		BISMARCK	ND	58501	1346504016	50	Nurse Practitioner	6459001	ST ALEXIUS HEART & LUNG	1194823021		
47	$7,099	208928600	SAUVAGEAU	ALYSSA	3060 FRONTIER WAY S		FARGO	ND	58104	1215201314	67	Occupational Therapy	6961001	PEDIATRIC THERAPY PARTNE	1457479958		
63	$7,099	450226700	HUGHES	JOHN	222 N 7TH ST		BISMARCK	ND	58501	1194755900	10	Gastronenterology	4001	SANFORD CLINIC	1811941172		
165	$7,099	911770748	JOHNSON	LARRY	904 5TH AVE NE		JAMESTOWN	ND	58401	1578674511	8	Family Practice	3005	SANFORD HEALTH JAMESTOWN	1942241351		
134	$7,094	205749003	OSWALD	JESSICA	1303 E CENTRAL AVE		BISMARCK	ND	58501	1326383787	67	Occupational Therapy	6880001	RED DOOR PEDIATRIC THERA	1639257033		
27	$7,088	456013474	KHOKHA	INDER	301 MOUNTAIN ST E		CAVALIER	ND	58220	1225089949	2	General Surgery	5633001	PEMBINA COUNTY HOSPITAL	1417093949		
92	$7,088	450310462	CONRAD	DANIELLE	860 S COLUMBIA RD		GRAND FORKS	ND	58201	1952552937	80	Clinical Social Worker	9024	ALTRU PSYCHIATRIC CENTER	1043309552		
150	$7,084	261175213	SWENSON	TIFFANY	3902 13TH AVE S		FARGO	ND	58103	1619164654	97	Physician Assistant	6885032	INNOVIS HEALTH, LLC DBA	1437495264		
128	$7,047	911770748	HOLZWARTH	RYAN	520 CHAUTAUQUA BLVD		VALLEY CITY	ND	58072	1437102324	7	Dermatology	3002	SANFORD HEALTH VALLEY CI	1942241351		
113	$7,043	450226909	MAHALE	ADIT	736 BROADWAY N		FARGO	ND	58102	1144247750	11	Internal Medicine	7742022	SANFORD BROADWAY MEDICAL	1184917924		
440	$7,038	450462260	WILLIAMS	COREY	906 MAIN ST		LISBON	ND	58054	1013919638	35	Chiropractor	1786001	LISBON CHIROPRACTIC CLIN	1285627521		
148	$7,035	270056777	SOLBERG	ROBERTA	607 TOWNER AVE		LARIMORE	ND	58251	1215186523	50	Nurse Practitioner	6163002	VALLEY COMMUNITY HEALTH	1255317905		
28	$7,031	450226909	WENTZ	NINA	801 BROADWAY NORTH		FARGO	ND	58102	1407128135	43	Certified Registered Nurse Anesthetist	7742001	SANFORD BROADWAY CLINIC	1184917924		
62	$7,030	450437649	ROBLES	MARIA DIAN	520 3RD ST NW		JAMESTOWN	ND	58401	1922145309	26	Psychiatry (MD)	123001	SOUTH CENTRAL HUMAN SERV	1225075906		
134	$7,029	261175213	WESTON	PENNI	801 BELSLY BLVD S		MOORHEAD	MN	56560	1134417140	50	Nurse Practitioner	6885034	INNOVIS HEALTH, LLC DBA	1659617504		
89	$7,025	204129496	THOMPSON	HEIDI	2951 34TH ST S		GRAND FORKS	ND	58201	1245593169	66	Speech Therapy	6775001	LITTLE MIRACLES, INC	1821110982		
27	$7,024	450226909	LAGLER	REGIS	801 BROADWAY NORTH		FARGO	ND	58102	1467479139	11	Internal Medicine	7742001	SANFORD BROADWAY CLINIC	1184917924		
89	$7,015	450226419	WEICK	KERI	301 ROOSEVELT AVE		MADDOCK	ND	58348	1518288299	97	Physician Assistant	18209	HEART OF AMERICA JOHNSON	1740451038		
251	$7,013	352311081	KOVACS	THOMAS	2304 11TH AVE W STE 104		WILLISTON	ND	58801	1790836922	35	Chiropractor	7474001	KOVACS CHIROPRACTIC AND	1790836922		
170	$7,008	870738986	DEIS	THOMAS	204 W CENTURY AVE		BISMARCK	ND	58503	1205968971	41	Optometrist	487001	DRS SCHINDLER & DEIS	1609894054		
83	$7,005	261175213	HOLM	MARY	3902 13TH AVE S		FARGO	ND	58103	1477583664	16	Obstet/Gynecology	6885032	INNOVIS HEALTH, LLC DBA	1437495264		
102	$7,003	450310462	CHAUDHRY	AISHA	1380 S COLUMBIA RD		GRAND FORKS	ND	58201	1518274398	8	Family Practice	9021	ALTRU FAMILY MEDICINE CE	1043309552		
142	$6,994	450455686	SIVANNA	PANJINI	300 MAIN AVE SUITE 200		FARGO	ND	58103	1013948116	5	Anesthesiology (MD)	2005001	VALLEY MEDICAL CLINIC, P	1164537569		
24	$6,985	450310462	VAN DYKEN	IRMINNE	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1528221785	2	General Surgery	9001	ALTRU HEALTH SYSTEM	1043309552		
367	$6,961	450447222	STEFFES	CASSANDRA	562 12TH ST W		DICKINSON	ND	58601	1437485265	35	Chiropractor	1693001	PETERS, TIMOTHY, DC	1518028331		
71	$6,959	410724029	SCHULTZ	STEVEN	1428 CENTRAL AVE NE		E GRAND FORKS	MN	56721	1053414631	34	Urology	5548002	RIVERVIEW SPECIALTY CLIN	1811918436		
249	$6,958	450363176	BAUMGARDNER	DAVID	1707 GOLD DR S STE 101		FARGO	ND	58103	1205070943	11	Internal Medicine	5595001	INTERNAL MEDICINE ASSOCI	1144313743		
80	$6,956	450226558	YEUNG	CHI KONG	20 BURDICK EXPRESSWAY W		MINOT	ND	58701	1689749764	34	Urology	635029	TRINITY MEDICAL GROUP	1083653752		
476	$6,947	462460141	DEROSIER	MATTHEW	1921 N 13TH ST		BISMARCK	ND	58501	1649271610	35	Chiropractor	8023001	DEROSIER, MATTHEW, R	1649271610		
17	$6,939	911770748	ANTONIUK	PAMELA	2801 UNIVERSITY DR S		FARGO	ND	58103	1366513970	24	Plastic Surgery	3067	SANFORD 2801 MEDICAL BUI	1942241351		
233	$6,936	273981362	HURAVITCH	CHRIS	512 MAIN ST		WILLISTON	ND	58801	1861524076	65	Physical Therapy	7662001	ELITE HEALTH & FITNESS	1841594900		
23	$6,934	450226909	KLEVEN	LORI	801 BROADWAY NORTH		FARGO	ND	58102	1386662948	43	Certified Registered Nurse Anesthetist	7742001	SANFORD BROADWAY CLINIC	1184917924		
58	$6,934	450226909	AAMOLD	ROBYN	801 BROADWAY NORTH		FARGO	ND	58102	1205091824	97	Physician Assistant	7742001	SANFORD BROADWAY CLINIC	1184917924		
41	$6,928	450226909	PEZHMAN	ERIC	1720 UNIVERSITY DR S		FARGO	ND	58103	1154531366	5	Anesthesiology (MD)	7742004	SANFORD SOUTH UNIVERSITY	1184917924		
57	$6,921	261175213	KHAN GALZIE	SARDAR MOH	3000 32ND AVE S		FARGO	ND	58103	1952541690	34	Urology	6885030	INNOVIS HEALTH, LLC DBA	1578907655		
59	$6,919	650936904	LIBERATOR MEDICAL	LY, INC	2979 SE GRAN PARK WAY		STUART	FL	34997	1881698439	54	Home Medical Equipment	7957001	LIBERATOR MEDICAL SUPPLY	1881698439		
10	$6,918	450310462	MELAND	N. BRADLY	1200 S COLUMBIA RD		GRAND FORKS	ND	58201	1932275088	24	Plastic Surgery	62001	ALTRU HOSPITAL	1154346161		
63	$6,916	450226429	CASSIDY	MICHAEL	30 7TH ST W		DICKINSON	ND	58601	1558381939	72	Emergency Medicine	95001	ST JOSEPHS HOSPITAL AND	1992947956		
145	$6,911	450340688	HOERAUF	KENT	608 HIGHWAY 12 W		BOWMAN	ND	58623	1104912849	11	Internal Medicine	434006	WEST RIVER HEALTH SERVIC	1497856025		
116	$6,900	450231183	PONZIO	SHEILA	1213 15TH AVE W		WILLISTON	ND	58801	1992742381	37	Pediatrics	711001	CRAVEN-HAGAN/MERCY MEDIC	1760549000		
19	$6,895	450226909	PARVES	SHAH	801 BROADWAY NORTH		FARGO	ND	58102	1538394838	5	Anesthesiology (MD)	7742001	SANFORD BROADWAY CLINIC	1184917924		
133	$6,883	450311334	PENN	JEREMIAH	401 N 9TH ST		BISMARCK	ND	58501	1043237522	8	Family Practice	236001	MID DAKOTA CLINIC	1275587826		
289	$6,873	450310572	MATHISON	TAMARA	300 2ND AVE NE		JAMESTOWN	ND	58401	1134161706	41	Optometrist	349001	LIFETIME VISION SOURCE	1912052234		
38	$6,872	450226711	TESKE	ARLA	900 E BROADWAY AVE		BISMARCK	ND	58501	1396898649	43	Certified Registered Nurse Anesthetist	92001	ST ALEXIUS MEDICAL CENTE	1629121074		
196	$6,867	261175213	SCHULTZ	JOAN	1401 13TH AVE E		WEST FARGO	ND	58078	1750303301	50	Nurse Practitioner	6885033	INNOVIS HEALTH, LLC DBA	1487990339		
132	$6,863	264314533	PFEIFER	JAMES	510 4TH ST S		FARGO	ND	58103	1184724148	88	#N/A	7444001	PSJ ACQUISITION LLC	1679709802		
89	$6,862	261175213	LINN	STEPHEN	3000 32ND AVE S		FARGO	ND	58103	1235216862	16	Obstet/Gynecology	6885030	INNOVIS HEALTH, LLC DBA	1578907655		
89	$6,859	450226909	LUNDEEN	TINA	2400 32ND AVE S		FARGO	ND	58103	1023030517	50	Nurse Practitioner	7742008	SANFORD SOUTHPOINTE CLIN	1184917924		
219	$6,847	450363176	ODEDRA-MISTRY	BHANU	1707 GOLD DR S STE 101		FARGO	ND	58103	1194742668	11	Internal Medicine	5595001	INTERNAL MEDICINE ASSOCI	1144313743		
65	$6,845	450226558	HERINGTON	AARON	1 BURDICK EXPY W		MINOT	ND	58701	1629236369	72	Emergency Medicine	635032	TRINITY MEDICAL GROUP	1083653752		
23	$6,840	450226700	ORSER	SHARI	222 N 7TH ST		BISMARCK	ND	58501	1932211323	16	Obstet/Gynecology	4001	SANFORD CLINIC	1811941172		
84	$6,836	320304357	KHOSLA	SEEMA	3301 30 AVE S STE 102		GRAND FORKS	ND	58201	1659462455	11	Internal Medicine	7238002	CENTER FOR SLEEP LLC	1740503358		
403	$6,834	453438023	BERGER	SHAWN	745 STATE AVE STE A		DICKINSON	ND	58601	1215206834	35	Chiropractor	7823001	BERGER FAMILY CHIROPRACT	1770854200		
148	$6,831	450310462	SPERLE	RONI	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1730379348	50	Nurse Practitioner	9001	ALTRU HEALTH SYSTEM	1043309552		
51	$6,823	450226909	HUND	MORRIS	100 4TH ST S		FARGO	ND	58103	1790703437	26	Psychiatry (MD)	7742006	SANFORD PROFESSIONAL BUI	1184917924		
148	$6,802	450462069	ENGLAND	HEATHER	1711 GOLD DR STE 120		FARGO	ND	58103	1750361002	65	Physical Therapy	5517001	PROFESSIONAL REHABILITAT	1215014105		
26	$6,783	261175213	FRISK (MOVCHAN)	CARI	1702 UNIVERSITY DR S		FARGO	ND	58103	1871520114	64	Audiology	6885031	INNOVIS HEALTH, LLC DBA	1255677084		
154	$6,773	450226909	DONALDSON	MARY ANN	100 4TH ST S		FARGO	ND	58103	1417974379	80	Clinical Social Worker	7742006	SANFORD PROFESSIONAL BUI	1184917924		
96	$6,768	450282159	HENKE	MELISSA	101 E BROADWAY AVE		BISMARCK	ND	58501	1083734172	11	Internal Medicine	269001	HEARTVIEW FOUNDATION	1417000233		
484	$6,757	450437563	SANDNESS-RIEGER	JODI	15 11TH AVE W		LISBON	ND	58054	1407999022	35	Chiropractor	615001	SHEYENNE VALLEY CHIROPRA	1992900393		
49	$6,754	450226909	SPAETH	JAMES	700 1ST AVE S		FARGO	ND	58103	1568483782	97	Physician Assistant	7742007	SANFORD NEUROSCIENCE CLI	1184917924		
61	$6,745	261175213	SOLLOM	DENNIS	1702 UNIVERSITY DR S		FARGO	ND	58103	1336170265	25	Physical Medicine and Rehab	6885031	INNOVIS HEALTH, LLC DBA	1255677084		
164	$6,745	911770748	ASHEIM	JASON	1720 UNIVERSITY DR S		FARGO	ND	58103	1780693424	30	Radiology	3904	SANFORD SOUTH UNIVERSITY	1942241351		

21	$6,735	450226909	BALVITSCH	DEANNA	801 BROADWAY NORTH		FARGO	ND	58102	1124045117	43	Certified Registered Nurse Anesthetist	7742001	SANFORD BROADWAY CLINIC	1184917924		
185	$6,733	263047434	RATAJCZAK	AMY	4622 40TH AVE S		FARGO	ND	58104	1245444561	97	Physician Assistant	7174001	7 DAY CLINIC OSGOOD	1619123593		
127	$6,732	263047434	NUELLE	BETHANN	1517 32ND AVE S		FARGO	ND	58103	1003887076	50	Nurse Practitioner	7174002	7 DAY CLINIC SOUTH FARGO	1851547160		
100	$6,732	450310462	HANSON	BRENDA	4440 S WASHINGTON ST		GRAND FORKS	ND	58201	1497846299	97	Physician Assistant	9033	ALTRU PROFESSIONAL CENTE	1043309552		
113	$6,732	470757739	SCHLOSSER	KATIE	683 STATE AVE STE B		DICKINSON	ND	58601	1215378120	65	Physical Therapy	1985001	OMAHA THERAPY INC. DBA R	1730280371		
101	$6,725	450433512	OSOWSKI	KIMBER LEE	1451 44TH AVE S UNIT A		GRAND FORKS	ND	58201	1982660908	80	Clinical Social Worker	567001	CENTER FOR PSYCHIATRIC C	1043271885		
43	$6,718	264314533	SIEMENS	CHARLOTTE	510 4TH ST S		FARGO	ND	58103	1285664169	26	Psychiatry (MD)	7444001	PSJ ACQUISITION LLC	1679709802		
28	$6,715	450226909	SWAMI	SWATI	1720 UNIVERSITY DR S		FARGO	ND	58103	1215984950	5	Anesthesiology (MD)	7742004	SANFORD SOUTH UNIVERSITY	1184917924		
73	$6,713	450226909	THOMPSON	JODY	801 BROADWAY NORTH		FARGO	ND	58102	1912201864	11	Internal Medicine	7742001	SANFORD BROADWAY CLINIC	1184917924		
103	$6,711	450310462	WERKLEY	CHRISTOPHE	860 S COLUMBIA RD		GRAND FORKS	ND	58201	1447299417	80	Clinical Social Worker	9024	ALTRU PSYCHIATRIC CENTER	1043309552		
53	$6,702	911810720	PENDER	JANEL	2301 S 25TH ST STE K		FARGO	ND	58103	1588614614	43	Certified Registered Nurse Anesthetist	757001	VALLEY ANESTHESIA ASSOCI	1467513176		
43	$6,702	264348313	JOHNSON	ASHLEY	1911 NORTH 11TH STREET		BISMARCK	ND	58501	1629341755	67	Occupational Therapy	599001	THE ENRICHMENT GARDEN	1730212325		
88	$6,701	450226909	MARSDEN	JENNY	4000 28TH AVE S		MOORHEAD	MN	56560	1164678660	97	Physician Assistant	7742014	SANFORD MOORHEAD CLINIC	1184917924		
99	$6,684	460440414	WISCHMEIER	CURT	111 E CENTURY AVE		BISMARCK	ND	58503	1134123565	18	Opthalmology	1638001	OPHTHALMOLOGY ASSOCIATES	1306900634		
148	$6,684	261175213	BURRELL	TERRY	3000 32ND AVE S		FARGO	ND	58103	1235166323	46	Nurse Midwives	6885030	INNOVIS HEALTH, LLC DBA	1578907655		
33	$6,683	450226909	ONUORA	TOCHUKWU	1720 UNIVERSITY DR S		FARGO	ND	58103	1558447961	5	Anesthesiology (MD)	7742004	SANFORD SOUTH UNIVERSITY	1184917924		
348	$6,676	204147226	ST LOUIS	ELIZABETH	2506 35TH AVE SW		FARGO	ND	58104	1952357162	35	Chiropractor	6826001	ABOVE & BEYOND CHIROPRAC	1952357162		
85	$6,675	450227752	DORNACKER	JON	437 3RD AVE SE		GARRISON	ND	58540	1801804588	8	Family Practice	432001	GARRISON FAMILY CLINIC	1952381873		
99	$6,664	450226909	MARIANI	PAUL	736 BROADWAY N		FARGO	ND	58102	1164597480	74	Infectious Diseases	7742022	SANFORD BROADWAY MEDICAL	1184917924		
93	$6,659	450226700	GRAVNING	STEPHANIE	300 N 7TH ST		BISMARCK	ND	58501	1366670366	11	Internal Medicine	440001	SANFORD MEDICAL CENTER/B	1811941172		
189	$6,653	450342671	DETKE	KATHRYN	360 DIVISION AVE STE 200		GRAND FORKS	ND	58201	1720034622	50	Nurse Practitioner	189001	VALLEY HEALTH	1194922328		
131	$6,652	450311334	MAGILL	THOMAS	401 N 9TH ST		BISMARCK	ND	58501	1992728752	8	Family Practice	236001	MID DAKOTA CLINIC	1275587826		
38	$6,628	450226700	HOGGARTH	JENNIFER	300 N 7TH ST		BISMARCK	ND	58501	1104167402	43	Certified Registered Nurse Anesthetist	440001	SANFORD MEDICAL CENTER/B	1811941172		
53	$6,626	263464382	KRAUSE	CAROL	705 E MAIN AVE STE 300		BISMARCK	ND	58501	1184715559	25	Physical Medicine and Rehab	7210001	DAKOTA PAIN MANAGEMENT C	1588817936		
406	$6,622	450226558	NAIDU	SRIDHAR	1 BURDICK EXPY W		MINOT	ND	58701	1629236690	30	Radiology	635032	TRINITY MEDICAL GROUP	1083653752		
44	$6,617	450226711	SCHAAR	LAUNI	900 E BROADWAY AVE		BISMARCK	ND	58501	1952352148	43	Certified Registered Nurse Anesthetist	92001	ST ALEXIUS MEDICAL CENTE	1629121074		
49	$6,614	450226700	HERRICK	CHRISTEN	414 N 7TH ST		BISMARCK	ND	58501	1689829202	62	Psychology	4046	SANFORD SEVENTH AND ROSS	1811941172		
115	$6,614	450310462	ROXAS	SHARON	1380 S COLUMBIA RD		GRAND FORKS	ND	58201	1912211483	8	Family Practice	9021	ALTRU FAMILY MEDICINE CE	1043309552		
75	$6,601	43755538	BROSOWSKE	CRISTY	3290 20TH ST S		FARGO	ND	58104	1245541051	97	Physician Assistant	5917001	PLAINS MEDICAL CLINIC LL	1073698460		
205	$6,595	274664038	SCHUMACHER	CALLIE	2829 UNIVERSITY DR S	STE 2	FARGO	ND	58103	1720355175	67	Occupational Therapy	7667001	PT OT PARTNERS PC	1194021873		
78	$6,595	502505366	JOYCE	CHARLES	200 E MAIN AVE STE 102A		BISMARCK	ND	58501	1578784112	80	Clinical Social Worker	7737001	CHARLEY JOYCE, LICSW, CO	1578784112		
59	$6,592	911770748	MEHUS	JAMES	600 1ST ST SE		MAYVILLE	ND	58257	1497772032	11	Internal Medicine	3003	SANFORD MAYVILLE	1942241351		
202	$6,586	450231183	REDDY	MADHUSUDHA	1301 15TH AVE W		WILLISTON	ND	58801	1639389133	30	Radiology	711004	MERCY RADIOLOGY SERVICES	1629234257		
23	$6,574	450226909	GROSS	BRENDA	801 BROADWAY NORTH		FARGO	ND	58102	1467470013	43	Certified Registered Nurse Anesthetist	7742001	SANFORD BROADWAY CLINIC	1184917924		
96	$6,566	450226558	LESMANN	ALLISON	101 3RD AVE SW		MINOT	ND	58701	1699036392	50	Nurse Practitioner	635027	TRINITY MEDICAL GROUP	1083653752		
216	$6,566	461386737	BACHMEIER	DIXIE	108 N MAIN ST		BOWMAN	ND	58623	1003097973	35	Chiropractor	7183001	BACHMEIER CHIROPRACTIC	1003097973		
109	$6,565	450437652	GRIMSLEY	TANNER	151 S 4TH ST STE 401		GRAND FORKS	ND	58201	1922342955	83	Licenses Addiction Counselor-Chemical Dependency	242001	NORTHEAST HUMAN SERVICE	1366496341		
31	$6,565	450226909	WILLIAMS	ELISA	1720 UNIVERSITY DR S		FARGO	ND	58103	1598857088	5	Anesthesiology (MD)	7742004	SANFORD SOUTH UNIVERSITY	1184917924		
30	$6,558	450231183	SKURDAL	DAVID	1301 15TH AVE W		WILLISTON	ND	58801	1265450316	5	Anesthesiology (MD)	2061001	MERCY MEDICAL CENTER DBA	1245397736		
92	$6,557	450226909	BHORA	MILAPCHAND	801 BROADWAY NORTH		FARGO	ND	58102	1538184023	11	Internal Medicine	7742001	SANFORD BROADWAY CLINIC	1184917924		
127	$6,557	450425948	PETTY	RUSSELL	425 S COLLEGE DR STE 14		DEVILS LAKE	ND	58301	1043245277	8	Family Practice	398004	TOWNER COUNTY MEDICAL CE	1194745935		
100	$6,552	450308484	COUGHLIN	CORINNE	710 N WELO ST		TIOGA	ND	58852	1821039249	97	Physician Assistant	327001	TIOGA MEDICAL CENTER	1245296078		
92	$6,538	450254692	WARREN	GINGER	702 1ST ST SW		CROSBY	ND	58730	1790815454	50	Nurse Practitioner	428001	ST LUKES HOSPITAL DBA CR	1184737231		
36	$6,537	450226429	VANDALL	MICHAEL	30 7TH ST W		DICKINSON	ND	58601	1720209414	16	Obstet/Gynecology	95001	ST JOSEPHS HOSPITAL AND	1992947956		
79	$6,537	261175213	KELLY	KIMBERLY	1702 UNIVERSITY DR S		FARGO	ND	58103	1245223023	7	Dermatology	6885031	INNOVIS HEALTH, LLC DBA	1255677084		
61	$6,531	450226700	SHRESTHA	SACHEEN	414 N 7TH ST		BISMARCK	ND	58501	1669622197	26	Psychiatry (MD)	4046	SANFORD SEVENTH AND ROSS	1811941172		
18	$6,530	208242493	BOTTINEAU AMBULANC	RVICE	1310 THOMPSON ST S		BOTTINEAU	ND	58318	1699817270	59	Ambulance Service	1861001	BOTTINEAU AMBULANCE SERV	1699817270		
201	$6,513	274932600	GIBSON	BEVERLY	827 28 ST S UNIT B		FARGO	ND	58103	1801024294	50	Nurse Practitioner	7705001	STELLAR HEALTHCARE LTD	1760781033		
39	$6,506	261175213	SAWARDEKER	PRASAD	3000 32ND AVE S		FARGO	ND	58103	1154522746	20	Orthopedic Surgery	6885030	INNOVIS HEALTH, LLC DBA	1578907655		
13	$6,504	410724029	FENNELL	COLLIN	323 S MINNESOTA ST		CROOKSTON	MN	56716	1356313480	20	Orthopedic Surgery	5548001	RIVERVIEW HEALTHCARE ASS	1477525566		
161	$6,503	450310462	ABOUFAKHER	RABEEA	1200 S COLUMBIA RD		GRAND FORKS	ND	58201	1881896223	6	Cardivascular Disease	62001	ALTRU HOSPITAL	1154346161		
258	$6,495	460919952	EBERTS	MARVIN	383 15TH ST W		DICKINSON	ND	58601	1841526688	35	Chiropractor	7936001	HEALTHSOURCE CHIROPRACTI	1902158264		
100	$6,491	450306787	SKAAR	DANIELLE	909 2ND ST		LANGDON	ND	58249	1558383653	50	Nurse Practitioner	54001	CAVALIER COUNTY MEMORIAL	1750328662		
103	$6,488	450310462	OLSON	WADE	1300 S COLUMBIA RD		GRAND FORKS	ND	58201	1619290590	50	Nurse Practitioner	232001	ALTRU REHABILITATION CEN	1437248945		
83	$6,472	10672165	VOLNESS	LINDA	1316 23RD STREET S		FARGO	ND	58102	1376581710	44	Psychiatric Nurse	6764001	D & L PC DBA QUALITY LIF	1871684530		
164	$6,468	450226909	QVAMMEN	BRIAN	801 BROADWAY NORTH		FARGO	ND	58102	1225059447	64	Audiology	7742001	SANFORD BROADWAY CLINIC	1184917924		
141	$6,462	460858383	VICKERS	BRITTANY	1106 2ND ST W		WILLISTON	ND	58801	1437318268	66	Speech Therapy	7863001	WILLISTON CENTER PEDIATR	1912242223		
57	$6,461	450310462	NOVACEK	REBECCA	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1861628711	13	Neurology	9001	ALTRU HEALTH SYSTEM	1043309552		
83	$6,457	272963118	DECOTEAU	TAMI	200 E MAIN AVE STE 202		BISMARCK	ND	58501	1356426993	62	Psychology	7791001	DECOTEAU TRAUMA-INFORMED	1174890016		
28	$6,449	450226909	REUTER	PATRIC	801 BROADWAY NORTH		FARGO	ND	58102	1952322174	43	Certified Registered Nurse Anesthetist	7742001	SANFORD BROADWAY CLINIC	1184917924		
57	$6,442	450437652	HILL	STEVEN	151 S 4TH ST STE 401		GRAND FORKS	ND	58201	1851334858	26	Psychiatry (MD)	242001	NORTHEAST HUMAN SERVICE	1366496341		
71	$6,435	450310462	ALHASHIM	MINHAL	3165 DEMERS AVE		GRAND FORKS	ND	58201	1639309602	7	Dermatology	9016	TRUYU AESTHETIC CENTER	1043309552		
132	$6,411	450226419	FERNANDEZ	OSCAR	800 3RD AVE SW		RUGBY	ND	58368	1184613465	8	Family Practice	18209	HEART OF AMERICA JOHNSON	1740451038		
147	$6,404	911770748	HACK	VICKI	141 MAIN ST		ELLENDALE	ND	58436	1831188127	97	Physician Assistant	3071	SANFORD HEALTH ELLENDALE	1942241351		
267	$6,402	911770748	QUITBERG	JOY	253 CENTRAL AVE N		VALLEY CITY	ND	58072	1477583466	41	Optometrist	3043	SANFORD HEALTH VALLEY CI	1427077361		
281	$6,399	760833789	STAFFORD	JAMES	15 N MAIN ST		BOWMAN	ND	58623	1326054107	35	Chiropractor	6827001	BOWMAN CHIROPRACTIC CLIN	1689682031		

106	$6,395	203198828	WIEDENMAN	KATYANA	1220 MAIN AVE STE 120		FARGO	ND	58103	1770899577	66	Speech Therapy	6659001	KENNELLY SPEECH-LANGUAGE	1154370187		
76	$6,395	468588187	BELZER	JOY	1330 PAGE DR S STE 202B		FARGO	ND	58103	1215173976	88	#N/A	1539001	JOY BELZER COUNSELING	1215173976		
66	$6,387	261175213	PROANO	MARITZA	3000 32ND AVE S		FARGO	ND	58103	1194742676	10	Gastronenterology	6885030	INNOVIS HEALTH, LLC DBA	1578907655		
27	$6,384	450226909	KRUPICH	MARY	801 BROADWAY NORTH		FARGO	ND	58102	1730106402	43	Certified Registered Nurse Anesthetist	7742001	SANFORD BROADWAY CLINIC	1184917924		
59	$6,372	450226558	BROOKING	SHAWN	400 BURDICK EXPY E		MINOT	ND	58701	1154403749	46	Nurse Midwives	635006	TRINITY MEDICAL GROUP	1083653752		
38	$6,361	450226711	FICEK	JENNA	900 E BROADWAY AVE		BISMARCK	ND	58501	1871830422	43	Certified Registered Nurse Anesthetist	92001	ST ALEXIUS MEDICAL CENTE	1629121074		
70	$6,354	450437654	CLINKENBEARD	JAMES	200 HIGHWAY 2 SW		DEVILS LAKE	ND	58301	1568403772	26	Psychiatry (MD)	159001	LAKE REGION HUMAN SERVIC	1669411930		
92	$6,352	450226700	SCHNEIDER	CHELSEY	225 N 7TH ST		BISMARCK	ND	58501	1992068555	50	Nurse Practitioner	4061	SANFORD SEVENTH AND THAY	1811941172		
20	$6,352	450226909	VINCENT	MATTHEW	801 BROADWAY NORTH		FARGO	ND	58102	1194007682	43	Certified Registered Nurse Anesthetist	7742001	SANFORD BROADWAY CLINIC	1184917924		
46	$6,351	450226909	HESHMAT	SAMY	801 BROADWAY NORTH		FARGO	ND	58102	1124218664	34	Urology	7742001	SANFORD BROADWAY CLINIC	1184917924		
35	$6,346	450310462	HARMS	BETHANY	1200 S COLUMBIA RD		GRAND FORKS	ND	58201	1568553576	43	Certified Registered Nurse Anesthetist	62001	ALTRU HOSPITAL	1154346161		
87	$6,345	450430824	BRODEN	RENAE	2315 LIBRARY CIRCLE		GRAND FORKS	ND	58201	1902001373	80	Clinical Social Worker	1300001	NORTHLAND CHRISTIAN COUN	1215131016		
38	$6,326	450226711	WALTH	DORAN	900 E BROADWAY AVE		BISMARCK	ND	58501	1992858831	43	Certified Registered Nurse Anesthetist	92001	ST ALEXIUS MEDICAL CENTE	1629121074		
81	$6,318	264348313	JOHNSON	BROOKE	1911 NORTH 11TH STREET		BISMARCK	ND	58501	1376880021	66	Speech Therapy	599001	THE ENRICHMENT GARDEN	1730212325		
176	$6,314	911770748	MATHISON	DAVID	904 5TH AVE NE		JAMESTOWN	ND	58401	1295847861	8	Family Practice	3005	SANFORD HEALTH JAMESTOWN	1942241351		
430	$6,311	502608811	WANGLER	LEO	118 BROADWAY ST S		LINTON	ND	58552	1093700437	35	Chiropractor	1595001	WANGLER, LEO, DC	1093700437		
66	$6,308	450231181	DUGAN	ANGELA	2422 20TH ST SW		JAMESTOWN	ND	58401	1700023512	97	Physician Assistant	532001	JAMESTOWN REGIONAL MEDIC	1073569794		
154	$6,303	456002491	ZIEGLER	CATHY	2751 2ND AVE N STOP 9013		GRAND FORKS	ND	58202	1760565634	65	Physical Therapy	427001	UND CENTER FOR SPORTS ME	1215080437		
126	$6,298	450413089	BEATTIE	SHARON	200 S 5TH ST		BISMARCK	ND	58504	1467494302	41	Optometrist	278001	DAKOTA EYE INSTITUTE	1962449835		
94	$6,296	450310462	AHMED	ABDEL	1200 S COLUMBIA RD		GRAND FORKS	ND	58201	1184784076	6	Cardivascular Disease	62001	ALTRU HOSPITAL	1154346161		
108	$6,294	450119890	KELLY	DARLENE	108 N MAIN ST		MCVILLE	ND	58254	1114058468	50	Nurse Practitioner	301001	NELSON COUNTY HEALTH SYS	1578624136		
35	$6,289	208928600	RODENBURG	SARAH	3060 FRONTIER WAY S		FARGO	ND	58104	1962743690	67	Occupational Therapy	6961001	PEDIATRIC THERAPY PARTNE	1457479958		
155	$6,288	450226558	REPP	MARK	1 BURDICK EXPY W		MINOT	ND	58701	1376557041	22	Pathology, Anatomy, Clinical Pathology	635032	TRINITY MEDICAL GROUP	1083653752		
150	$6,284	760746279	KIHLE	CYNTHIA	2700 8TH ST NW		MINOT	ND	58703	1316989338	65	Physical Therapy	5439001	FIRST CHOICE PHYSICAL TH	1013098797		
246	$6,280	911770748	SHOOK	ROBERT	801 BROADWAY NORTH		FARGO	ND	58102	1548282106	30	Radiology	3001	SANFORD BROADWAY CLINIC	1942241351		
112	$6,274	261175213	BEISEKER	ANDREA	3000 32ND AVE S		FARGO	ND	58103	1023390663	50	Nurse Practitioner	6885030	INNOVIS HEALTH, LLC DBA	1578907655		
81	$6,271	201278075	ABERLE RIDDLE	JULIE	1407 24TH AVE S STE 520		GRAND FORKS	ND	58201	1669662284	80	Clinical Social Worker	6359001	AGASSIZ ASSOCIATES, PLLC	1700972122		
21	$6,270	450226909	FABIAN	MATTHEW	929 CENTRAL AVE NW		E GRAND FORKS	MN	56721	1497928972	2	General Surgery	7742021	SANFORD HEALTH 929 CENTR	1184917924		
47	$6,269	450226711	KNOWLEN	KIM	900 E BROADWAY AVE		BISMARCK	ND	58501	1700939287	43	Certified Registered Nurse Anesthetist	92001	ST ALEXIUS MEDICAL CENTE	1629121074		
50	$6,263	450422119	TOOZ	LAURA	33 9TH ST W		DICKINSON	ND	58601	1538296751	43	Certified Registered Nurse Anesthetist	231001	GREAT PLAINS CLINIC, PC	1720075377		
156	$6,262	911770748	SORENSON	BECKY	300 2ND AVE NE		JAMESTOWN	ND	58401	1346338100	65	Physical Therapy	3090	SANFORD HEALTH 2ND AVE C	1942241351		
35	$6,261	450226558	HENJUM	JENNIFER	1 BURDICK EXPRESSWAY W		MINOT	ND	58701	1598071185	43	Certified Registered Nurse Anesthetist	635031	TRINITY MEDICAL GROUP AN	1083653752		
28	$6,258	450226909	CANNON	SHARON	1720 UNIVERSITY DR S		FARGO	ND	58103	1578580577	43	Certified Registered Nurse Anesthetist	7742004	SANFORD SOUTH UNIVERSITY	1184917924		
81	$6,250	450226700	BAYER	TOSHA	222 N 7TH ST		BISMARCK	ND	58501	1376702175	50	Nurse Practitioner	4001	SANFORD CLINIC	1811941172		
62	$6,247	450226909	BURD	RONALD	1720 UNIVERSITY DR S		FARGO	ND	58103	1750308755	26	Psychiatry (MD)	7742004	SANFORD SOUTH UNIVERSITY	1184917924		
331	$6,244	320397461	REDINGTON	BRUCE	205 SHEYENNE STREET		WEST FARGO	ND	58078	1346258340	35	Chiropractor	7969001	WEST FARGO CHIROPRACTIC	1144566746		
67	$6,231	264314533	FRISSELL	JENNY	510 4TH ST S		FARGO	ND	58103	1467555078	62	Psychology	7444001	PSJ ACQUISITION LLC	1679709802		
51	$6,231	450226700	LEBEAU	MICHAEL	300 N 7TH ST		BISMARCK	ND	58501	1760488746	11	Internal Medicine	440001	SANFORD MEDICAL CENTER/B	1811941172		
297	$6,227	273169686	SUNDBY	HALEY	534 N MAIN ST UNIT A		HORACE	ND	58047	1780903864	35	Chiropractor	7587001	HORACE FAMILY CHIROPRACT	1396050373		
63	$6,222	450226700	MATTHEWS	CHRISTIAN	222 N 7TH ST		BISMARCK	ND	58501	1982620282	43	Certified Registered Nurse Anesthetist	4001	SANFORD CLINIC	1811941172		
97	$6,220	450253272	GRUNEFELDER	JACQUELINE	511 ELM AVE		LINTON	ND	58552	1790701241	50	Nurse Practitioner	430001	LINTON MEDICAL CENTER	1568471563		
41	$6,210	450226711	GEIGER	KIM	900 E BROADWAY AVE		BISMARCK	ND	58501	1033262506	43	Certified Registered Nurse Anesthetist	92001	ST ALEXIUS MEDICAL CENTE	1629121074		
114	$6,208	263047434	EK	MARILYN	4622 40TH AVE S		FARGO	ND	58104	1487745493	50	Nurse Practitioner	7174001	7 DAY CLINIC OSGOOD	1619123593		
78	$6,207	450226909	ANDERSON	MISTY	1720 UNIVERSITY DR S		FARGO	ND	58103	1417109760	11	Internal Medicine	7742004	SANFORD SOUTH UNIVERSITY	1184917924		
101	$6,198	450310462	LIZAKOWSKI	LAURA	1200 S COLUMBIA RD		GRAND FORKS	ND	58201	1730387606	11	Internal Medicine	62001	ALTRU HOSPITAL	1154346161		
35	$6,192	450310462	KOLAND	NATHAN	1200 S COLUMBIA RD		GRAND FORKS	ND	58201	1194085225	43	Certified Registered Nurse Anesthetist	62001	ALTRU HOSPITAL	1154346161		
18	$6,191	450226700	WINK	SUE	300 N 7TH ST		BISMARCK	ND	58501	1992803662	4	Otology, Laryngology, Rhinology	440001	SANFORD MEDICAL CENTER/B	1811941172		
215	$6,189	450340688	HOERAUF	KENT	1000 HIGHWAY 12		HETTINGER	ND	58639	1104912849	11	Internal Medicine	367001	WEST RIVER HEALTH SERVIC	1174606271		
21	$6,184	450226558	KLABUNDE	JENNA	1 BURDICK EXPY W		MINOT	ND	58701	1891033049	43	Certified Registered Nurse Anesthetist	635032	TRINITY MEDICAL GROUP	1083653752		
18	$6,182	450226700	COOMBE	WALTER	300 N 7TH ST		BISMARCK	ND	58501	1639196454	4	Otology, Laryngology, Rhinology	440001	SANFORD MEDICAL CENTER/B	1811941172		
102	$6,170	911770748	ANDERSEN	JEFFREY	520 CHAUTAUQUA BLVD		VALLEY CITY	ND	58072	1184701856	8	Family Practice	3002	SANFORD HEALTH VALLEY CI	1942241351		
142	$6,170	261175213	MOTSCHENBACHER	KURTIS	3902 13TH AVE S		FARGO	ND	58103	1225064868	97	Physician Assistant	6885032	INNOVIS HEALTH, LLC DBA	1437495264		
24	$6,168	450310462	EAGLETON	KVAME	1200 S COLUMBIA RD		GRAND FORKS	ND	58201	1376779827	5	Anesthesiology (MD)	62001	ALTRU HOSPITAL	1154346161		
82	$6,158	450226909	MACHANI	SATHYANARA	801 BROADWAY NORTH		FARGO	ND	58102	1912206020	11	Internal Medicine	7742001	SANFORD BROADWAY CLINIC	1184917924		
79	$6,157	450226558	KINYUNGU	ERICK	1500 24TH AVE SW		MINOT	ND	58701	1043451883	5	Anesthesiology (MD)	635040	TRINITY MEDICAL GROUP SO	1083653752		
50	$6,153	261175213	GLASNER	GREGORY	3000 32ND AVE S		FARGO	ND	58103	1952331233	16	Obstet/Gynecology	6885030	INNOVIS HEALTH, LLC DBA	1578907655		
6	$6,143	453135923	ABDULLAH SURGERY C	R	3280 20 ST S		FARGO	ND	58104	1184905309	70	Clinic	7772001	ABDULLAH SURGERY CENTER	1184905309		
255	$6,133	450340688	KRISTY	MARK	1000 HIGHWAY 12		HETTINGER	ND	58639	1609974195	30	Radiology	367001	WEST RIVER HEALTH SERVIC	1174606271		
71	$6,122	450340688	WELLMAN	STACIE	1000 HIGHWAY 12		HETTINGER	ND	58639	1669793410	8	Family Practice	367001	WEST RIVER HEALTH SERVIC	1174606271		
63	$6,111	450231183	LANOUE	DAVID	1213 15TH AVE W		WILLISTON	ND	58801	1477888022	20	Orthopedic Surgery	711001	CRAVEN-HAGAN/MERCY MEDIC	1760549000		
26	$6,109	450310462	CARTER	SCOTT	1200 S COLUMBIA RD		GRAND FORKS	ND	58201	1003901356	43	Certified Registered Nurse Anesthetist	62001	ALTRU HOSPITAL	1154346161		
155	$6,108	261175213	KEMPTON	MARCIA	3902 13TH AVE S		FARGO	ND	58103	1548293350	50	Nurse Practitioner	6885032	INNOVIS HEALTH, LLC DBA	1437495264		
245	$6,105	411960880	SHOGREN	PAUL	312 HWY 75 N		MOORHEAD	MN	56560	1972608511	35	Chiropractor	619001	MED-PLUS HEALTHCARE, P.L	1114028503		
92	$6,104	450226909	HELLMAN	JASON	2301 S 25TH ST STE A		FARGO	ND	58103	1801814454	97	Physician Assistant	7742011	SANFORD ORTHOPEDICS SPOR	1184917924		
82	$6,101	911770748	COLLINS	JOHN	300 2ND AVE NE		JAMESTOWN	ND	58401	1417977463	62	Psychology	3090	SANFORD HEALTH 2ND AVE C	1942241351		
302	$6,093	456002069	ELLINGSON	LORI	401 3RD AVE N		FARGO	ND	58102	1396820452	50	Nurse Practitioner	534001	FARGO CASS PUBLIC HEALTH	1447335245		

72	$6,085	450227752	LARSON	KATHLEEN	437 3RD AVE SE		GARRISON	ND	58540	1912987843	97	Physician Assistant	432001	GARRISON FAMILY CLINIC	1952381873		
41	$6,083	450226909	BRUDEVOLD	JEREMY	801 BROADWAY NORTH		FARGO	ND	58102	1699094748	72	Emergency Medicine	7742001	SANFORD BROADWAY CLINIC	1184917924		
31	$6,080	861123162	MATHIEU	MARYSE	310 N 10TH ST		BISMARCK	ND	58501	1700971199	5	Anesthesiology (MD)	6459001	ST ALEXIUS HEART & LUNG	1194823021		
160	$6,079	450321538	STALOCH	COLEEN	310 N 9TH ST		BISMARCK	ND	58501	1609938182	50	Nurse Practitioner	188001	THE BONE & JOINT CENTER,	1750307872		
24	$6,075	450226909	WATSON	ERIK	801 BROADWAY NORTH		FARGO	ND	58102	1205145794	43	Certified Registered Nurse Anesthetist	7742001	SANFORD BROADWAY CLINIC	1184917924		
58	$6,074	450226909	SWAN-KREMEIER	LORRAINE	1717 SOUTH UNIVERSITY DR		FARGO	ND	58103	1093736217	62	Psychology	7742027	SANFORD 1717 MEDICAL BUI	1184917924		
45	$6,064	450226909	VOTH	JOSHUA	2301 S 25TH ST STE A		FARGO	ND	58103	1982751681	97	Physician Assistant	7742011	SANFORD ORTHOPEDICS SPOR	1184917924		
79	$6,062	261175213	NELSON	KINSEY	801 BELSLY BLVD S		MOORHEAD	MN	56560	1427276260	8	Family Practice	6885034	INNOVIS HEALTH, LLC DBA	1659617504		
65	$6,058	450226909	MYERS	TRICIA	1717 SOUTH UNIVERSITY DR		FARGO	ND	58103	1528085065	62	Psychology	7742027	SANFORD 1717 MEDICAL BUI	1184917924		
53	$6,053	450231183	MARTIN	JAMES	1301 15TH AVE W		WILLISTON	ND	58801	1144260787	72	Emergency Medicine	142001	MERCY MEDICAL/HOSPITAL E	1720194624		
31	$6,051	450310462	BRATRUD	JESSICA	1200 S COLUMBIA RD		GRAND FORKS	ND	58201	1073886511	43	Certified Registered Nurse Anesthetist	62001	ALTRU HOSPITAL	1154346161		
536	$6,049	911770748	WEILKE	FLORIAN	801 BROADWAY NORTH		FARGO	ND	58102	1437100245	30	Radiology	3001	SANFORD BROADWAY CLINIC	1942241351		
31	$6,048	450226909	MONTICELLO	ANTHONY	801 BROADWAY NORTH		FARGO	ND	58102	1467401935	10	Gastronenterology	7742001	SANFORD BROADWAY CLINIC	1184917924		
75	$6,044	450433512	BIALIK	DAVID	1451 44TH AVE S UNIT A		GRAND FORKS	ND	58201	1427014752	80	Clinical Social Worker	567001	CENTER FOR PSYCHIATRIC C	1043271885		
145	$6,037	263531132	BUSKE	ALLISON	550 13 AVE E		WEST FARGO	ND	58078	1649525080	65	Physical Therapy	7198001	APEX PHYSICAL THERAPY AN	1417109059		
225	$6,032	271484797	PETERMEIER	JANE	1450 25TH ST S STE B		FARGO	ND	58103	1538250469	35	Chiropractor	1997001	CHIROPRACTIC FIRST, PC	1750611653		
97	$6,028	450458242	PETERSON	CHRISTINE	12 6TH AVE SW		BOWMAN	ND	58623	1750385399	50	Nurse Practitioner	2086001	SOUTHWEST MEDICAL CLINIC	1023083714		
149	$6,023	450340688	SHEFFIELD	JENNIFER	1000 HIGHWAY 12		HETTINGER	ND	58639	1497987812	1	General Practice	367001	WEST RIVER HEALTH SERVIC	1174606271		
60	$6,009	450226700	ARNDORFER	BROOKE	222 N 7TH ST		BISMARCK	ND	58501	1376649848	97	Physician Assistant	4001	SANFORD CLINIC	1811941172		
25	$6,000	450231183	JOHNSON	KRISTI	1301 15TH AVE W		WILLISTON	ND	58801	1336496579	43	Certified Registered Nurse Anesthetist	98001	MERCY MEDICAL CENTER DBA	1700990041		
34	$5,998	450226700	FAULK	KELLIE	222 N 7TH ST		BISMARCK	ND	58501	1023000676	73	Endocrinology	4001	SANFORD CLINIC	1811941172		
203	$5,989	450226558	PAIGE	DICK	504 1ST ST SE		MOHALL	ND	58761	1093739732	97	Physician Assistant	635033	TRINITY COMMUNITY CLINIC	1083653752		
24	$5,988	261175213	SORNSON	MICHAEL	1702 UNIVERSITY DR S		FARGO	ND	58103	1154384493	5	Anesthesiology (MD)	6885031	INNOVIS HEALTH, LLC DBA	1255677084		
95	$5,982	450226909	BANDE	DINESH	801 BROADWAY NORTH		FARGO	ND	58102	1083866339	11	Internal Medicine	7742001	SANFORD BROADWAY CLINIC	1184917924		
69	$5,976	208928600	VANDEN HOEK	AMANDA	3060 FRONTIER WAY S		FARGO	ND	58104	1639457112	66	Speech Therapy	6961001	PEDIATRIC THERAPY PARTNE	1457479958		
697	$5,972	450436504	BRYANT	JULIE	1424 W CENTURY AVE #202		BISMARCK	ND	58503	1467525824	35	Chiropractor	602001	BRYANT CLINIC OF CHIROPR	1861661142		
22	$5,954	450226700	BOHLMAN	LORRISSA	300 N 7TH ST		BISMARCK	ND	58501	1518111558	43	Certified Registered Nurse Anesthetist	440001	SANFORD MEDICAL CENTER/B	1811941172		
55	$5,951	450310462	KHAN	FATIMA	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1235157637	11	Internal Medicine	9001	ALTRU HEALTH SYSTEM	1043309552		
30	$5,947	450226909	DALLMAN	MEGAN	801 BROADWAY NORTH		FARGO	ND	58102	1336440924	43	Certified Registered Nurse Anesthetist	7742001	SANFORD BROADWAY CLINIC	1184917924		
182	$5,947	911770748	KALLENBACH	CHRISTOPHE	801 BROADWAY NORTH		FARGO	ND	58102	1649460551	30	Radiology	3001	SANFORD BROADWAY CLINIC	1942241351		
71	$5,945	10672165	HOLT JOHNSON	GEORGIA	1316 23RD STREET S		FARGO	ND	58102	1376803957	88	#N/A	6764001	D & L PC DBA QUALITY LIF	1871684530		
143	$5,943	450413089	SAMSON	THOMAS	201 SW 7TH ST STE 2		RUGBY	ND	58368	1639117625	41	Optometrist	595001	DAKOTA EYE INSTITUTE	1962449835		
307	$5,939	450433379	KREIN	KYLE	404 HIGHWAY 2 E		DEVILS LAKE	ND	58301	1659477206	41	Optometrist	538001	DRS KREIN & MOEN, PC	1265539639		
81	$5,937	450226909	PYAE	NYAN	801 BROADWAY NORTH		FARGO	ND	58102	1992033922	11	Internal Medicine	7742001	SANFORD BROADWAY CLINIC	1184917924		
89	$5,932	450119890	CZARNIK	TAMARACK	108 N MAIN ST		MCVILLE	ND	58254	1639113749	8	Family Practice	301001	NELSON COUNTY HEALTH SYS	1578624136		
217	$5,931	450370384	HAALAND	JAIME	10 1ST ST SW		MINOT	ND	58701	1275513152	41	Optometrist	1635001	DR JAIME L HAALAND OD PC	1023154390		
134	$5,931	450227311	HOFF	BRADLEY	820 5TH ST N		CARRINGTON	ND	58421	1639498777	97	Physician Assistant	507001	FOSTER COUNTY MEDICAL CE	1558389338		
65	$5,925	264314533	UNDERWOOD	AMY	510 4TH ST S		FARGO	ND	58103	1386783918	26	Psychiatry (MD)	7444001	PSJ ACQUISITION LLC	1679709802		
20	$5,915	450226700	MCPHERSON	DANIELLE	300 N 7TH ST		BISMARCK	ND	58501	1427140409	50	Nurse Practitioner	440001	SANFORD MEDICAL CENTER/B	1811941172		
232	$5,901	450226711	SMITH	C MILTON	2700 8TH ST NW		MINOT	ND	58703	1275559262	8	Family Practice	501016	ST ALEXIUS CLINIC	1205868429		
74	$5,901	450226700	KORTE	STEPHEN	300 N 7TH ST		BISMARCK	ND	58501	1881615318	6	Cardivascular Disease	440001	SANFORD MEDICAL CENTER/B	1811941172		
18	$5,901	450310462	BROCKMAN	RONALD	1200 S COLUMBIA RD		GRAND FORKS	ND	58201	1851498638	18	Opthalmology	62001	ALTRU HOSPITAL	1154346161		
267	$5,898	450440017	ERICKSON	DONLYN	212 W MAIN ST		BEULAH	ND	58523	1285668814	35	Chiropractor	1681001	ERICKSON CHIROPRACTIC	1447581202		
25	$5,889	450226700	FIROZI	M TARIK	300 N 7TH ST		BISMARCK	ND	58501	1962481648	10	Gastronenterology	440001	SANFORD MEDICAL CENTER/B	1811941172		
69	$5,874	273224344	ERIE	BRENDA	448 21 ST W STE D-1		DICKINSON	ND	58601	1003122987	80	Clinical Social Worker	7711001	THERAPY SOLUTIONS	1801195045		
156	$5,862	450231183	GRONDAHL	HEIDI	1213 15TH AVE W		WILLISTON	ND	58801	1619281987	50	Nurse Practitioner	711001	CRAVEN-HAGAN/MERCY MEDIC	1760549000		
288	$5,861	200427049	YOHE	KENT	2800 S UNIVERSITY DR		FARGO	ND	58103	1023192143	35	Chiropractor	1198001	ASKLAND YOHE CHIROPRACTO	1023192143		
49	$5,858	450226909	ANADY	KARA	100 4TH ST S		FARGO	ND	58103	1184901720	62	Psychology	7742006	SANFORD PROFESSIONAL BUI	1184917924		
255	$5,849	450226700	SMALL	RENEE	515 EAST BROADWAY AVE		BISMARCK	ND	58501	1194821355	50	Nurse Practitioner	4066	SANFORD 5TH & BROADWAY C	1811941172		
173	$5,849	450310462	MEES	SARA	725 HAMLINE ST		GRAND FORKS	ND	58203	1417182163	8	Family Practice	9009	ALTRU FAMILY MEDICINE RE	1043309552		
213	$5,840	273224344	LAUMB	BRIAN	448 21 ST W STE D-1		DICKINSON	ND	58601	1306810346	65	Physical Therapy	7711001	THERAPY SOLUTIONS	1801195045		
7	$5,838	450310462	BREWSTER	EARL	1200 S COLUMBIA RD		GRAND FORKS	ND	58201	1356513261	16	Obstet/Gynecology	62001	ALTRU HOSPITAL	1154346161		
91	$5,838	450340688	KETTERLING	ELLEN	1000 HIGHWAY 12		HETTINGER	ND	58639	1245323930	37	Pediatrics	367001	WEST RIVER HEALTH SERVIC	1174606271		
76	$5,831	820558836	LOPERENA	RUDOLF	905 MAIN ST		LISBON	ND	58054	1881620805	8	Family Practice	5840004	LISBON AREA HEALTH SERVI	1811168958		
21	$5,828	450226909	MARSH	TODD	801 BROADWAY NORTH		FARGO	ND	58102	1750308383	43	Certified Registered Nurse Anesthetist	7742001	SANFORD BROADWAY CLINIC	1184917924		
100	$5,828	450458242	MEADOWS	DAVID	12 6TH AVE SW		BOWMAN	ND	58623	1770514390	8	Family Practice	2086001	SOUTHWEST MEDICAL CLINIC	1023083714		
24	$5,804	411919461	VAUGHN	RITA	2400 ST FRANCIS DR		BRECKENRIDGE	MN	56520	1457426975	43	Certified Registered Nurse Anesthetist	1224002	RED RIVER ANESTHESIA PC	1295842623		
278	$5,785	450433379	MOEN	MARK	404 HIGHWAY 2 E		DEVILS LAKE	ND	58301	1124124623	41	Optometrist	538001	DRS KREIN & MOEN, PC	1265539639		
156	$5,779	450433379	ENDERLE	CAREY	404 HIGHWAY 2 E		DEVILS LAKE	ND	58301	1275726887	41	Optometrist	538001	DRS KREIN & MOEN, PC	1265539639		
299	$5,777	461605293	THOMSEN	BRENT	1530 W MAIN STREET		VALLEY CITY	ND	58072	1326332032	35	Chiropractor	7976001	THOMSEN CHIROPRACTIC PC	1104162924		
32	$5,773	450310462	REYNOLDS-COOLEY	LYNN	1200 S COLUMBIA RD		GRAND FORKS	ND	58201	1326083460	43	Certified Registered Nurse Anesthetist	62001	ALTRU HOSPITAL	1154346161		
111	$5,766	450231183	HOGLUND	CHRISTINE	1213 15TH AVE W		WILLISTON	ND	58801	1184600926	5	Anesthesiology (MD)	711001	CRAVEN-HAGAN/MERCY MEDIC	1760549000		
110	$5,765	450255914	BICHLER	LORI	612 CENTER AVE N		ASHLEY	ND	58413	1295840395	50	Nurse Practitioner	343001	AMC CLINIC INC	1851335830		
19	$5,761	456002048	COOPERSTOWN AMBULA	SV	611 9TH ST NE		COOPERSTOWN	ND	58425	1982814497	59	Ambulance Service	1890001	COOPERSTOWN AMBULANCE SE	1982814497		
41	$5,757	450226711	CHRIST	RENEE	900 E BROADWAY AVE		BISMARCK	ND	58501	1023161585	43	Certified Registered Nurse Anesthetist	92001	ST ALEXIUS MEDICAL CENTE	1629121074		
51	$5,752	450226909	DRAGE	DAVID	801 BROADWAY NORTH		FARGO	ND	58102	1053339697	72	Emergency Medicine	7742001	SANFORD BROADWAY CLINIC	1184917924		

56	$5,752	450226909	GROTH	BONNIE	801 BROADWAY NORTH		FARGO	ND	58102	1407151921	50	Nurse Practitioner	7742001	SANFORD BROADWAY CLINIC	1184917924		
31	$5,747	450226909	UNDERDAHL	TODD	801 BROADWAY NORTH		FARGO	ND	58102	1023039369	43	Certified Registered Nurse Anesthetist	7742001	SANFORD BROADWAY CLINIC	1184917924		
95	$5,734	264581116	ANDRUSKI	HEIDI	1451 44TH AVE S #A		GRAND FORKS	ND	58201	1881780146	43	Certified Registered Nurse Anesthetist	7392001	SWEET DREAMS ANESTHESIA	1770710659		
89	$5,727	450226909	LEVITSKI-HEIKKILA	TERESA	736 BROADWAY N		FARGO	ND	58102	1366408536	11	Internal Medicine	7742022	SANFORD BROADWAY MEDICAL	1184917924		
266	$5,725	450226700	MARTIN	C KENT	3318 N 14TH STREET		BISMARCK	ND	58503	1922110576	74	Infectious Diseases	4064	SANFORD NORTH WALK-IN CL	1811941172		
20	$5,723	450310159	KHOKHA	INDER	164 WEST 13TH STREET		GRAFTON	ND	58237	1225089949	2	General Surgery	282001	GRAFTON FAMILY CLINIC	1558423665		
177	$5,708	450226700	CURTIS-HABERLOCK	TARA	222 N 7TH ST		BISMARCK	ND	58501	1932205366	97	Physician Assistant	4001	SANFORD CLINIC	1811941172		
226	$5,705	273224344	BINSTOCK	JESSIE	448 21 ST W STE D-1		DICKINSON	ND	58601	1699705368	65	Physical Therapy	7711001	THERAPY SOLUTIONS	1801195045		
98	$5,701	456013474	LINDEMANN	ALAN	301 MOUNTAIN ST E		CAVALIER	ND	58220	1285606665	8	Family Practice	5633002	PEMBINA COUNTY MEMORIAL	1417093949		
30	$5,695	450226711	SCHUMACHER-FEILER	PAULA	900 E BROADWAY AVE		BISMARCK	ND	58501	1417000985	43	Certified Registered Nurse Anesthetist	92001	ST ALEXIUS MEDICAL CENTE	1629121074		
69	$5,692	450226909	KENIEN	ALAN	801 BROADWAY NORTH		FARGO	ND	58102	1750309316	37	Pediatrics	7742001	SANFORD BROADWAY CLINIC	1184917924		
22	$5,692	450310462	BRANBY	MICHAEL	1200 S COLUMBIA RD		GRAND FORKS	ND	58201	1811237753	43	Certified Registered Nurse Anesthetist	62001	ALTRU HOSPITAL	1154346161		
71	$5,691	450228899	UNTERSEHER	JEANNE	HWY 200 E		FINLEY	ND	58230	1932120276	50	Nurse Practitioner	3077	SANFORD HEALTH FINLEY CL	1366478760		
27	$5,689	450226909	TRIEPKE	SHERI	801 BROADWAY NORTH		FARGO	ND	58102	1750303327	43	Certified Registered Nurse Anesthetist	7742001	SANFORD BROADWAY CLINIC	1184917924		
42	$5,672	450310462	OXENHANDLER	DONALD	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1669408662	14	Neurological Surgery	9001	ALTRU HEALTH SYSTEM	1043309552		
80	$5,664	450226909	JOHNSON	JULIE	801 BROADWAY NORTH		FARGO	ND	58102	1386906733	50	Nurse Practitioner	7742001	SANFORD BROADWAY CLINIC	1184917924		
244	$5,663	270044652	MORTENSEN	GREGORY	108 MAIN ST		STANLEY	ND	58784	1528183522	35	Chiropractor	5859001	MORTENSEN CHIROPRACTIC	1528183522		
84	$5,654	461434257	LAGODINSKI-CHRISTI	JULIE	2860 10TH AVE N STE 350		GRAND FORKS	ND	58203	1386626976	41	Optometrist	7965001	ADVANCED EYECARE	1134463565		
25	$5,649	450226558	DESAUTEL	DAVID	1 BURDICK EXPRESSWAY W		MINOT	ND	58701	1841389160	43	Certified Registered Nurse Anesthetist	635031	TRINITY MEDICAL GROUP AN	1083653752		
110	$5,642	450413089	RISING	CHERYL	200 S 5TH ST		BISMARCK	ND	58504	1134225436	50	Nurse Practitioner	278001	DAKOTA EYE INSTITUTE	1962449835		
95	$5,642	450231181	GOECKE	SCOTT	2422 20TH ST SW		JAMESTOWN	ND	58401	1750367322	8	Family Practice	124001	JAMESTOWN REGIONAL MEDIC	1821044652		
30	$5,636	450226700	KNAUP	KEETA	222 N 7TH ST		BISMARCK	ND	58501	1982951422	50	Nurse Practitioner	4001	SANFORD CLINIC	1811941172		
202	$5,621	911770748	PFEIFER	LORETTA	21 WILEY AVE S		LIDGERWOOD	ND	58053	1225027519	97	Physician Assistant	3070	SANFORD HEALTH LIDGERWOO	1942241351		
22	$5,618	450226909	SCHAUER	SUMMER	801 BROADWAY NORTH		FARGO	ND	58102	1679883680	43	Certified Registered Nurse Anesthetist	7742001	SANFORD BROADWAY CLINIC	1184917924		
68	$5,616	450226909	PRATT	AMANDA	2801 UNIVERSITY DR S		FARGO	ND	58103	1922353275	97	Physician Assistant	7742005	SANFORD 2801 MEDICAL BUI	1184917924		
77	$5,610	273222255	STEIN	SUZI	1809 S BROADWAY PLAZA	STE A	MINOT	ND	58701	1134215387	80	Clinical Social Worker	7582001	STEIN'S SPECIALIZED COUN	1104125483		
27	$5,605	450226909	STENEHJEM	JENNY	801 BROADWAY NORTH		FARGO	ND	58102	1821010489	43	Certified Registered Nurse Anesthetist	7742001	SANFORD BROADWAY CLINIC	1184917924		
93	$5,596	450226711	KILLEN	SHELLEY	900 E BROADWAY AVE		BISMARCK	ND	58501	1184798746	25	Physical Medicine and Rehab	501001	ST ALEXIUS MEDICAL CENTE	1205868429		
23	$5,594	450226700	OWEN	MICHAEL	222 N 7TH ST		BISMARCK	ND	58501	1124042437	14	Neurological Surgery	4001	SANFORD CLINIC	1811941172		
1,104	$5,589	450311334	MID DAKOTA CLINIC		401 N 9TH ST		BISMARCK	ND	58501	1710920285	69	Independent Laboratory	236001	MID DAKOTA CLINIC	1275587826		
89	$5,589	450417963	ADAMS LARSEN	MARGO	2100 S COLUMBIA RD	STE 202	GRAND FORKS	ND	58201	1124128756	62	Psychology	474001	FAMILY INSTITUTE PC	1003832783		
307	$5,588	900330423	MORLOCK	GREGG	1602 30TH AVE S		MOORHEAD	MN	56560	1093813677	35	Chiropractor	1394001	MORLOCK CHIROPRACTIC CEN	1336348283		
33	$5,585	450340688	ELDER	WILLIAM	1000 HIGHWAY 12		HETTINGER	ND	58639	1023103421	2	General Surgery	367001	WEST RIVER HEALTH SERVIC	1174606271		
67	$5,582	450321538	MOORE	JODI	310 N 9TH ST		BISMARCK	ND	58501	1366412843	97	Physician Assistant	188001	THE BONE & JOINT CENTER,	1750307872		
57	$5,582	450226909	LYSTAD	JEFFREY	2400 32ND AVE S		FARGO	ND	58103	1710904487	72	Emergency Medicine	7742008	SANFORD SOUTHPOINTE CLIN	1184917924		
31	$5,580	204874580	ERTELT	TROY	725 HAMLINE ST		GRAND FORKS	ND	58203	1720344898	62	Psychology	6806001	ASSESSMENT AND THERAPY A	1437181591		
220	$5,579	262829566	BENSON	RACHEL	824 UNIVERSITY AVE STE A		GRAND FORKS	ND	58203	1952377293	35	Chiropractor	7223001	BENSON CHIROPRACTIC	1952377293		
125	$5,574	450340688	WILLOUGHBY	BRIAN	608 HIGHWAY 12 W		BOWMAN	ND	58623	1801981451	11	Internal Medicine	434006	WEST RIVER HEALTH SERVIC	1497856025		
54	$5,574	450226429	HENDRZAK	ANN MARIE	227 16TH ST W		DICKINSON	ND	58601	1558426502	16	Obstet/Gynecology	95009	ST JOSEPHS WALK IN CLINI	1992947956		
213	$5,571	263475281	THREE AFFILIATED T	S - MINNE	1058 COLLEGE DRIVE		NEW TOWN	ND	58763	1831365519	70	Clinic	7313001	ELBOWOODS MEMORIAL HEALT	1831365519		
162	$5,569	911770748	NYGAARD	JESSICA	904 5TH AVE NE		JAMESTOWN	ND	58401	1013144773	50	Nurse Practitioner	3005	SANFORD HEALTH JAMESTOWN	1942241351		
53	$5,561	450419100	WATNEMO	LARRY	509 25TH AVE N		FARGO	ND	58102	1063568301	88	#N/A	528001	VALLEY CHRISTIAN COUNSEL	1467559427		
19	$5,554	450226909	RASHID	KARIM	801 BROADWAY NORTH		FARGO	ND	58102	1720311921	5	Anesthesiology (MD)	7742001	SANFORD BROADWAY CLINIC	1184917924		
83	$5,551	450226909	DESAI	MONALI	801 BROADWAY NORTH		FARGO	ND	58102	1417111303	6	Cardivascular Disease	7742001	SANFORD BROADWAY CLINIC	1184917924		
16	$5,551	450347243	KIDDER COUNTY AMBU	E	120 1ST ST SW		STEELE	ND	58482	1164592184	59	Ambulance Service	2993001	KIDDER COUNTY AMBULANCE	1164592184		
13	$5,551	450226909	ROBERTSON	CHRISTOPHE	2400 32ND AVE S		FARGO	ND	58103	1104128909	20	Orthopedic Surgery	7742008	SANFORD SOUTHPOINTE CLIN	1184917924		
31	$5,542	450310462	PETERSON	STEVEN	1300 S COLUMBIA RD		GRAND FORKS	ND	58201	1083774897	20	Orthopedic Surgery	232001	ALTRU REHABILITATION CEN	1437248945		
66	$5,531	264314533	LEVERENCE	MELISSA	2925 20TH ST S		MOORHEAD	MN	56560	1639313539	80	Clinical Social Worker	7444002	PSJ ACQUISITION LLC	1679709802		
57	$5,526	450306787	PETERSON	MARK	901 2ND ST		LANGDON	ND	58249	1134182355	8	Family Practice	54002	CCMH CLINIC	1336201433		
99	$5,525	450226429	CHAMPA	WHITNEY	227 16TH ST W		DICKINSON	ND	58601	1730487851	97	Physician Assistant	95009	ST JOSEPHS WALK IN CLINI	1992947956		
120	$5,510	450425948	PETTY	RUSSELL	HWY 281 N		CANDO	ND	58324	1043245277	8	Family Practice	398004	TOWNER COUNTY MEDICAL CE	1194745935		
60	$5,493	261175213	RAVAL	MIHIR	3000 32ND AVE S		FARGO	ND	58103	1962639427	11	Internal Medicine	6885030	INNOVIS HEALTH, LLC DBA	1578907655		
22	$5,491	450226558	NELSON	CHRISTINE	1 BURDICK EXPRESSWAY W		MINOT	ND	58701	1972819563	43	Certified Registered Nurse Anesthetist	635031	TRINITY MEDICAL GROUP AN	1083653752		
18	$5,487	450226909	MATTERN	TRAVIS	801 BROADWAY NORTH		FARGO	ND	58102	1376561977	43	Certified Registered Nurse Anesthetist	7742001	SANFORD BROADWAY CLINIC	1184917924		
113	$5,467	450226711	BITZ	CHERYLE	900 E BROADWAY AVE		BISMARCK	ND	58501	1013966456	50	Nurse Practitioner	501001	ST ALEXIUS MEDICAL CENTE	1205868429		
61	$5,466	502941475	NESS	TAMMY	1809 S BROADWAY SUITE Q2		MINOT	ND	58701	1558458265	80	Clinical Social Worker	7029001	TAMMY NESS, LICSW	1558458265		
71	$5,460	383823337	FLOOD	MELISSA	1705 4 AVE NW		MINOT	ND	58703	1205897634	80	Clinical Social Worker	7657001	FLOOD, MELISSA K, LICSW	1205897634		
66	$5,455	450430628	ESPEJO	NAPOLEON	301 NP AVE		FARGO	ND	58102	1972682532	8	Family Practice	576001	FAMILY HEALTHCARE CENTER	1710066352		
24	$5,447	450226909	SENN	LAURIE	801 BROADWAY NORTH		FARGO	ND	58102	1407933989	43	Certified Registered Nurse Anesthetist	7742001	SANFORD BROADWAY CLINIC	1184917924		
26	$5,444	450226909	HINES	LINDSAY	700 1ST AVE S		FARGO	ND	58103	1568759868	62	Psychology	7742007	SANFORD NEUROSCIENCE CLI	1184917924		
93	$5,439	450226909	HAO	WEIMIN	801 BROADWAY NORTH		FARGO	ND	58102	1205853165	11	Internal Medicine	7742001	SANFORD BROADWAY CLINIC	1184917924		
153	$5,434	450226700	OLSON	JANEL	222 N 7TH ST		BISMARCK	ND	58501	1841501236	50	Nurse Practitioner	4001	SANFORD CLINIC	1811941172		
120	$5,424	450226558	RIME	HEDI	131 N MAIN ST		GARRISON	ND	58540	1144391608	50	Nurse Practitioner	635034	TRINITY COMMUNITY CLINIC	1083653752		
57	$5,422	450226700	FIELD	DAVID	300 N 7TH ST		BISMARCK	ND	58501	1598788390	8	Family Practice	440001	SANFORD MEDICAL CENTER/B	1811941172		
82	$5,419	450226711	WOLF	GLORIA	900 E BROADWAY AVE		BISMARCK	ND	58501	1063556652	50	Nurse Practitioner	459001	ST ALEXIUS MEDICAL CENTE	1306832654		
55	$5,419	450419100	CONKINS	ELIZABETH	509 25TH AVE N		FARGO	ND	58102	1366793606	80	Clinical Social Worker	528001	VALLEY CHRISTIAN COUNSEL	1467559427		

34	$5,418	450310462	LALONDE	THERESA	1200 S COLUMBIA RD		GRAND FORKS	ND	58201	1912098716	50	Nurse Practitioner	62001	ALTRU HOSPITAL	1154346161		
78	$5,411	450226909	LAHAISE	KIM	1717 SOUTH UNIVERSITY DR		FARGO	ND	58103	1376560045	62	Psychology	7742027	SANFORD 1717 MEDICAL BUI	1184917924		
172	$5,401	261175213	RAU	KEITH	1702 UNIVERSITY DR S		FARGO	ND	58103	1699700625	11	Internal Medicine	6885031	INNOVIS HEALTH, LLC DBA	1255677084		
83	$5,398	450226558	FORSBERG	JERANE	1500 24TH AVE SW		MINOT	ND	58701	1336229129	97	Physician Assistant	635040	TRINITY MEDICAL GROUP SO	1083653752		
138	$5,394	450310462	MEYER	LANA	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1851520647	50	Nurse Practitioner	9001	ALTRU HEALTH SYSTEM	1043309552		
454	$5,392	911770748	FISHER	MARK	801 BROADWAY NORTH		FARGO	ND	58102	1528062924	30	Radiology	3001	SANFORD BROADWAY CLINIC	1942241351		
95	$5,388	450310462	RUSTVANG	PAMELA	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1851312078	50	Nurse Practitioner	9001	ALTRU HEALTH SYSTEM	1043309552		
318	$5,386	450260821	WHITE DRUG #47 DBA	L DRUG	323 5TH ST		DEVILS LAKE	ND	58301	1396834909	63	Pharmacy	4394002	WHITE DRUG #47 DBA BELL	1396834909		
59	$5,386	264314533	MEZA	EDUARDO	510 4TH ST S		FARGO	ND	58103	1487729422	26	Psychiatry (MD)	7444001	PSJ ACQUISITION LLC	1679709802		
85	$5,384	450226909	MATCHA	SARAH	700 1ST AVE S		FARGO	ND	58103	1891944013	50	Nurse Practitioner	7742007	SANFORD NEUROSCIENCE CLI	1184917924		
96	$5,372	861123162	SULIEMAN DAOUD	AHMED	310 N 10TH ST		BISMARCK	ND	58501	1104026731	29	Pulmonary Diseases	6459001	ST ALEXIUS HEART & LUNG	1194823021		
138	$5,370	450340688	JOYCE	JOHN	1000 HIGHWAY 12		HETTINGER	ND	58639	1144315441	8	Family Practice	367001	WEST RIVER HEALTH SERVIC	1174606271		
39	$5,363	450226909	DIERS	SHARA	2301 S 25TH ST STE A		FARGO	ND	58103	1912951427	97	Physician Assistant	7742011	SANFORD ORTHOPEDICS SPOR	1184917924		
108	$5,362	311824372	CARSON	THOMAS	408 3RD ST NW		E GRAND FORKS	MN	56721	1134383227	65	Physical Therapy	6037005	ACHIEVE THERAPY EAST GRA	1003145376		
73	$5,356	450226909	GLUNBERG	STEVEN	4000 28TH AVE S		MOORHEAD	MN	56560	1689692220	8	Family Practice	7742014	SANFORD MOORHEAD CLINIC	1184917924		
249	$5,353	680575639	FOLK	HEIDI	121 W CENTURY AVE		BISMARCK	ND	58503	1851370704	65	Physical Therapy	1060002	SPINE ORTHOPEDIC AND PAI	1639148463		
8	$5,352	450310462	SZLABICK	RANDOLPH	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1184725921	2	General Surgery	9001	ALTRU HEALTH SYSTEM	1043309552		
91	$5,352	450226909	PALADUGU	GOPIKRISHN	801 BROADWAY NORTH		FARGO	ND	58102	1710140843	11	Internal Medicine	7742001	SANFORD BROADWAY CLINIC	1184917924		
153	$5,349	113686120	JACKSON	ORLAN	111 E MAIN ST		CENTER	ND	58530	1184602666	8	Family Practice	6103006	COAL COUNTRY COMMUNITY H	1003052952		
73	$5,346	450226700	JIA	HONGCHEN	300 N 7TH ST		BISMARCK	ND	58501	1790796548	22	Pathology, Anatomy, Clinical Pathology	440001	SANFORD MEDICAL CENTER/B	1811941172		
291	$5,326	411817080	PURCELL	ROBERT	623 10TH ST SE		JAMESTOWN	ND	58401	1740234947	35	Chiropractor	1203001	ABSOLUTE CHIROPRACTIC	1740234947		
39	$5,322	450226700	KLEIN	KATHERINE	300 N 7TH ST		BISMARCK	ND	58501	1609037100	37	Pediatrics	440001	SANFORD MEDICAL CENTER/B	1811941172		
300	$5,320	352209058	PLADSON	JEFF	420 CENTER AVE SUITE 48		MOORHEAD	MN	56560	1962414789	35	Chiropractor	5946001	PLADSON CHIROPRACTIC CLI	1144381187		
87	$5,316	450226558	LEE	KON HWEII	20 BURDICK EXPRESSWAY W		MINOT	ND	58701	1437246337	13	Neurology	635029	TRINITY MEDICAL GROUP	1083653752		
64	$5,311	272822919	TOSSETH	GERI	1929 N WASHINGTON ST	STE W	BISMARCK	ND	58501	1932430642	67	Occupational Therapy	7557001	HOPE THERAPY CENTER, PLL	1467765420		
43	$5,305	450231183	COLLINS	KEVIN	1213 15TH AVE W		WILLISTON	ND	58801	1174611511	32	Radiation Therapy	711001	CRAVEN-HAGAN/MERCY MEDIC	1760549000		
38	$5,305	450226909	GOYAL	HARISH	100 4TH ST S		FARGO	ND	58103	1558517391	26	Psychiatry (MD)	7742006	SANFORD PROFESSIONAL BUI	1184917924		
27	$5,304	450226429	LEFOR	GLENN	30 7TH ST W		DICKINSON	ND	58601	1619991973	43	Certified Registered Nurse Anesthetist	95001	ST JOSEPHS HOSPITAL AND	1992947956		
50	$5,302	450314527	DEMOLEN	RICHARD	300 13 AVE W STE 1		DICKINSON	ND	58601	1982711867	62	Psychology	235001	BADLANDS HUMAN SERVICE C	1124072525		
131	$5,288	204710911	WETZEL	DENISE	1001 GATEWAY AVE		BISMARCK	ND	58503	1962767772	65	Physical Therapy	6462001	LIFEWAYS PARTNERS IN HEA	1053360594		
137	$5,274	450226700	RUD	BILLIE	225 N 7TH ST		BISMARCK	ND	58501	1639275944	50	Nurse Practitioner	4061	SANFORD SEVENTH AND THAY	1811941172		
45	$5,271	710880821	VELANDER	BYRON	1451 44TH AVE S STE 112D		GRAND FORKS	ND	58201	1578501672	11	Internal Medicine	5677001	THE KIDNEY AND HYPERTENS	1285742262		
100	$5,268	450226909	FRIEDERICHS	MATTHEW	2301 S 25TH ST STE A		FARGO	ND	58103	1790703338	20	Orthopedic Surgery	7742011	SANFORD ORTHOPEDICS SPOR	1184917924		
103	$5,264	450311334	BHARADWAJ	SAVITHA	727 KIRKWOOD MALL		BISMARCK	ND	58504	1760470926	11	Internal Medicine	236011	MID DAKOTA CLINIC - 727	1275587826		
23	$5,263	450226909	DIEHL	MARGARET	801 BROADWAY NORTH		FARGO	ND	58102	1548288335	43	Certified Registered Nurse Anesthetist	7742001	SANFORD BROADWAY CLINIC	1184917924		
308	$5,263	450462610	ELLENBECKER	PAUL	1050 31 AVE SW STE B		MINOT	ND	58701	1679508089	35	Chiropractor	5586001	ELLENBECKER CHIROPRACTIC	1831372416		
92	$5,259	261175213	PATRON	ROBERTO	3000 32ND AVE S		FARGO	ND	58103	1962437780	74	Infectious Diseases	6885030	INNOVIS HEALTH, LLC DBA	1578907655		
81	$5,257	450226700	COLBY	KARNA	300 N 7TH ST		BISMARCK	ND	58501	1407047913	22	Pathology, Anatomy, Clinical Pathology	440001	SANFORD MEDICAL CENTER/B	1811941172		
152	$5,257	911770748	ASHEIM	JASON	801 BROADWAY NORTH		FARGO	ND	58102	1780693424	30	Radiology	3001	SANFORD BROADWAY CLINIC	1942241351		
114	$5,249	261175213	CABO CHAN	ALBERTO	1702 UNIVERSITY DR S		FARGO	ND	58103	1750314449	11	Internal Medicine	6885031	INNOVIS HEALTH, LLC DBA	1255677084		
204	$5,236	450342671	HALVERSON	GAIL	360 DIVISION AVE STE 200		GRAND FORKS	ND	58201	1154319911	50	Nurse Practitioner	189001	VALLEY HEALTH	1194922328		
16	$5,233	450310462	STAGGS	KAREN	1200 S COLUMBIA RD		GRAND FORKS	ND	58201	1629256581	5	Anesthesiology (MD)	62001	ALTRU HOSPITAL	1154346161		
39	$5,214	450226909	WAGNER	ANGELA	700 1ST AVE S		FARGO	ND	58103	1073531711	97	Physician Assistant	7742007	SANFORD NEUROSCIENCE CLI	1184917924		
48	$5,213	450419100	ZAESKE	ELLEN	509 25TH AVE N		FARGO	ND	58102	1346313616	44	Psychiatric Nurse	528001	VALLEY CHRISTIAN COUNSEL	1467559427		
83	$5,209	450227753	JACOBSON	KEVIN	1200 ROBERTS AVE NE		COOPERSTOWN	ND	58425	1528093077	50	Nurse Practitioner	121001	COOPERSTOWN MEDICAL CENT	1962548214		
57	$5,194	450310462	NAZIR	ASAD	4440 S WASHINGTON ST		GRAND FORKS	ND	58201	1346567633	8	Family Practice	9033	ALTRU PROFESSIONAL CENTE	1043309552		
270	$5,191	262343785	SICBLE	COTY	1921 N 13TH ST		BISMARCK	ND	58501	1871766865	35	Chiropractor	7144001	SICBLE COTY, DC	1871766865		
240	$5,185	450436680	THOMPSON	JOHN	HWY 83 COUNTY RD 22		WASHBURN	ND	58577	1548473598	35	Chiropractor	1145001	WASHBURN CHIROPRACTIC, P	1548475023		
81	$5,182	450227391	MOE	CHRISTINE	213 2ND AVE NE		ROLLA	ND	58367	1467715763	50	Nurse Practitioner	401001	PRESENTATION MEDICAL CEN	1265404958		
39	$5,182	450226909	AGEMA	RYAN	801 BROADWAY NORTH		FARGO	ND	58102	1124214366	72	Emergency Medicine	7742001	SANFORD BROADWAY CLINIC	1184917924		
99	$5,182	450358986	BENSON	PAULETTE	1015 4TH AVE S		WISHEK	ND	58495	1295767994	50	Nurse Practitioner	441001	WISHEK RURAL HEALTH CLIN	1376584623		
45	$5,171	450226700	KLOP	KRISSONDRA	715 E BROADWAY AVE		BISMARCK	ND	58501	1205088515	8	Family Practice	4050	SANFORD SEVENTH AND BROA	1811941172		
69	$5,171	261175213	HOUSTON	SARA	1702 UNIVERSITY DR S		FARGO	ND	58103	1083856884	37	Pediatrics	6885031	INNOVIS HEALTH, LLC DBA	1255677084		
118	$5,170	450231181	JONAS	ROXANNE	2422 20TH ST SW		JAMESTOWN	ND	58401	1134176779	8	Family Practice	124001	JAMESTOWN REGIONAL MEDIC	1821044652		
386	$5,166	450366385	FOELL	KIM	150 9TH AVE NW		VALLEY CITY	ND	58072	1417040353	35	Chiropractor	1028001	FOELL CHIROPRACTIC CLINI	1417040353		
22	$5,164	450461636	JOHNSON	AMBER	3035 DEMERS AVE		GRAND FORKS	ND	58201	1619041860	43	Certified Registered Nurse Anesthetist	5522001	GRAND FORKS ANESTHESIA S	1124135546		
121	$5,162	261175213	WHITBECK	MATTHEW	3000 32ND AVE S		FARGO	ND	58103	1932316924	11	Internal Medicine	6885030	INNOVIS HEALTH, LLC DBA	1578907655		
70	$5,155	450310462	HIGHSHAW	RALPH	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1386726453	34	Urology	9001	ALTRU HEALTH SYSTEM	1043309552		
13	$5,147	450310462	JONES	ROGER	1200 S COLUMBIA RD		GRAND FORKS	ND	58201	1790797504	20	Orthopedic Surgery	62001	ALTRU HOSPITAL	1154346161		
30	$5,147	450226558	RIST	KARI	1 BURDICK EXPRESSWAY W		MINOT	ND	58701	1619048766	43	Certified Registered Nurse Anesthetist	635031	TRINITY MEDICAL GROUP AN	1083653752		
97	$5,145	261175213	SOPER	CONSTANCE	1401 13TH AVE E		WEST FARGO	ND	58078	1780849265	97	Physician Assistant	6885033	INNOVIS HEALTH, LLC DBA	1487990339		
68	$5,144	450311818	FREDRICKSON	WARD	3502 FRANKLIN AVE		BISMARCK	ND	58503	1598876898	22	Pathology, Anatomy, Clinical Pathology	55001	PATHOLOGY CONSULTANTS, P	1497736151		
76	$5,135	227744149	WILHELM	VICKIE	1111 WESTRAC DR STE 201		FARGO	ND	58103	1861679508	88	#N/A	7037001	WILHELM, VICKIE A., MS,	1861679508		
25	$5,133	450226558	BRANDT	KRAIG	1 BURDICK EXPRESSWAY W		MINOT	ND	58701	1609817139	43	Certified Registered Nurse Anesthetist	635031	TRINITY MEDICAL GROUP AN	1083653752		
82	$5,121	311824372	CHINE	NICOLE	3035 DEMERS AVE		GRAND FORKS	ND	58201	1548370752	65	Physical Therapy	6037001	ACHIEVE THERAPY, LLC	1346370640		
28	$5,115	261175213	DOSCH	HELEN	3000 32ND AVE S		FARGO	ND	58103	1538222351	5	Anesthesiology (MD)	6885030	INNOVIS HEALTH, LLC DBA	1578907655		

26	$5,112	450226909	FLOM	ADRIANNE	801 BROADWAY NORTH		FARGO	ND	58102	1225055189	43	Certified Registered Nurse Anesthetist	7742001	SANFORD BROADWAY CLINIC	1184917924		
101	$5,108	261175213	AZIMIAN	MORTEZA	1702 UNIVERSITY DR S		FARGO	ND	58103	1295940229	76	Heumatology	6885031	INNOVIS HEALTH, LLC DBA	1255677084		
214	$5,107	113686120	ROGNESS	CORRIE	1312 HIGHWAY 49 N		BEULAH	ND	58523	1609078302	50	Nurse Practitioner	6103001	COAL COUNTRY COMMUNITY H	1942288329		
23	$5,105	450226558	BOSSERT	MELANIE	1 BURDICK EXPRESSWAY W		MINOT	ND	58701	1740551365	43	Certified Registered Nurse Anesthetist	635031	TRINITY MEDICAL GROUP AN	1083653752		
29	$5,104	261175213	POULOSE	JAISE	3000 32ND AVE S		FARGO	ND	58103	1497872675	72	Emergency Medicine	6885030	INNOVIS HEALTH, LLC DBA	1578907655		
73	$5,103	450340688	KILWEIN	STEVEN	683 STATE AVE STE E		DICKINSON	ND	58601	1437244043	48	Podiatry, Surgical chiropody	434010	WEST RIVER FOOT AND ANKL	1629169008		
59	$5,099	450310462	TESCHER	JODI	860 S COLUMBIA RD		GRAND FORKS	ND	58201	1821338922	80	Clinical Social Worker	9024	ALTRU PSYCHIATRIC CENTER	1043309552		
133	$5,091	911770748	KOBRINSKY	NATHAN	820 4TH ST N		FARGO	ND	58102	1659398329	75	Oncology	3030	SANFORD ROGER MARIS CANC	1942241351		
29	$5,085	450226558	VAN BIBBER	MICHAEL	400 BURDICK EXPY E		MINOT	ND	58701	1598851503	34	Urology	635006	TRINITY MEDICAL GROUP	1083653752		
42	$5,084	293481835	BARRETT	TERENCE	115 N UNIVERSITY DR		FARGO	ND	58102	1285731802	62	Psychology	543001	TERENCE W. BARRETT DBA D	1285731802		
99	$5,078	450413089	RANUM	MICHAEL	200 S 5TH ST		BISMARCK	ND	58504	1437101888	41	Optometrist	278001	DAKOTA EYE INSTITUTE	1962449835		
53	$5,076	450226909	NOTEBOOM	KURT	2301 S 25TH ST STE A		FARGO	ND	58103	1124135264	97	Physician Assistant	7742011	SANFORD ORTHOPEDICS SPOR	1184917924		
50	$5,074	450226700	BHANDARI	SUMIT	300 N 7TH ST		BISMARCK	ND	58501	1336452572	11	Internal Medicine	440001	SANFORD MEDICAL CENTER/B	1811941172		
48	$5,071	450226909	WAGES	LEANN	2801 UNIVERSITY DR S		FARGO	ND	58103	1396763983	78	Clinical Nurse Specialist	7742005	SANFORD 2801 MEDICAL BUI	1184917924		
111	$5,070	273224344	WOCK	ROBERTA	448 21 ST W STE D-1		DICKINSON	ND	58601	1033311089	65	Physical Therapy	7711001	THERAPY SOLUTIONS	1801195045		
131	$5,063	450310462	DROWN	PAUL	1200 S COLUMBIA RD		GRAND FORKS	ND	58201	1669563672	97	Physician Assistant	62001	ALTRU HOSPITAL	1154346161		
15	$5,057	450227012	OVEREND	TIMOTHY	1031 7TH ST NE		DEVILS LAKE	ND	58301	1427345586	43	Certified Registered Nurse Anesthetist	76001	THE MERCY HOSPITAL OF DE	1790751170		
17	$5,045	450226909	COULTER	CASIE	801 BROADWAY NORTH		FARGO	ND	58102	1740426568	43	Certified Registered Nurse Anesthetist	7742001	SANFORD BROADWAY CLINIC	1184917924		
82	$5,043	450226711	WALKER	LAURA	900 E BROADWAY AVE		BISMARCK	ND	58501	1376638825	8	Family Practice	501001	ST ALEXIUS MEDICAL CENTE	1205868429		
161	$5,039	261175213	METZGER	TODD	1702 UNIVERSITY DR S		FARGO	ND	58103	1033134374	41	Optometrist	6885031	INNOVIS HEALTH, LLC DBA	1255677084		
12	$5,034	410724029	REESE	GREGORY	323 S MINNESOTA ST		CROOKSTON	MN	56716	1851408413	43	Certified Registered Nurse Anesthetist	5548001	RIVERVIEW HEALTHCARE ASS	1477525566		
382	$5,026	450433379	BURDICK	BLAINE	211 4TH ST NE SUITE 1		DEVILS LAKE	ND	58301	1235393489	41	Optometrist	525001	DRS KREIN & MOEN, PC DBA	1598944373		
125	$5,019	261175213	SAFRANSKI	MARY	801 BELSLY BLVD S		MOORHEAD	MN	56560	1659367621	50	Nurse Practitioner	6885034	INNOVIS HEALTH, LLC DBA	1659617504		
111	$5,009	261175213	SIKKINK	KARI RAE	3902 13TH AVE S		FARGO	ND	58103	1942233432	8	Family Practice	6885032	INNOVIS HEALTH, LLC DBA	1437495264		
25	$5,004	450226909	GABA	VIJAY	1720 UNIVERSITY DR S		FARGO	ND	58103	1952328817	5	Anesthesiology (MD)	7742004	SANFORD SOUTH UNIVERSITY	1184917924		
82	$5,004	450226558	MELBY	KRISTIN	400 BURDICK EXPY E		MINOT	ND	58701	1114974987	50	Nurse Practitioner	635006	TRINITY MEDICAL GROUP	1083653752		
229	$5,002	450459447	PEDERSON	STEVEN	720 20TH AVE SW		MINOT	ND	58701	1063581338	35	Chiropractor	1054001	PEDERSON CHIROPRACTIC CL	1831360635		
104	$4,999	273224344	CRESPO	ERICA	448 21 ST W STE D-1		DICKINSON	ND	58601	1780818336	67	Occupational Therapy	7711001	THERAPY SOLUTIONS	1801195045		
51	$4,996	450226558	HILLESTAD	CHANTEL	1 BURDICK EXPY W		MINOT	ND	58701	1043508526	50	Nurse Practitioner	635032	TRINITY MEDICAL GROUP	1083653752		
17	$4,996	450226909	HERBRANDSON	JEREMY	801 BROADWAY NORTH		FARGO	ND	58102	1124366216	43	Certified Registered Nurse Anesthetist	7742001	SANFORD BROADWAY CLINIC	1184917924		
104	$4,993	450340688	JOYCE	JOHN	820 2ND AVE W		NEW ENGLAND	ND	58647	1144315441	8	Family Practice	434004	WEST RIVER HEALTH SERVIC	1831286160		
48	$4,990	911770748	GETZ	ARIANE	332 2ND AVE N		WAHPETON	ND	58075	1588945919	62	Psychology	3016	SANFORD HEALTH WAHPETON	1942241351		
60	$4,987	450226700	STAFFORD	DARLA	414 N 7TH ST		BISMARCK	ND	58501	1053493494	80	Clinical Social Worker	4046	SANFORD SEVENTH AND ROSS	1811941172		
103	$4,985	450226700	SCHEURER	ELIZABETH	222 N 7TH ST		BISMARCK	ND	58501	1912285578	50	Nurse Practitioner	4001	SANFORD CLINIC	1811941172		
16	$4,985	450340688	CHRISTENSEN	RANDY	1000 HIGHWAY 12		HETTINGER	ND	58639	1992892996	43	Certified Registered Nurse Anesthetist	367001	WEST RIVER HEALTH SERVIC	1174606271		
221	$4,984	503904583	RENELT	AARON	1383 21ST AVE N STE A		FARGO	ND	58102	1740338425	35	Chiropractor	1241001	RENELT FAMILY CHIROPRACT	1740338425		
58	$4,983	450226700	PENN	JEREMIAH	300 N 7TH ST		BISMARCK	ND	58501	1043237522	8	Family Practice	440001	SANFORD MEDICAL CENTER/B	1811941172		
140	$4,979	450457259	FIRE	KEVIN	121 N WASHINGTON ST		GRAND FORKS	ND	58203	1861595753	64	Audiology	2022001	FIRE AUDIOLOGICAL SERVIC	1477715910		
21	$4,976	450226909	BJORNSTAD	MARK	801 BROADWAY NORTH		FARGO	ND	58102	1376853945	43	Certified Registered Nurse Anesthetist	7742001	SANFORD BROADWAY CLINIC	1184917924		
47	$4,972	450226700	DOERNER	MARK	414 N 7TH ST		BISMARCK	ND	58501	1437252293	62	Psychology	4046	SANFORD SEVENTH AND ROSS	1811941172		
83	$4,968	450226909	AL HALLAK	MOHAMMED	801 BROADWAY NORTH		FARGO	ND	58102	1205088556	11	Internal Medicine	7742001	SANFORD BROADWAY CLINIC	1184917924		
94	$4,963	450310462	WARNER-NOREEN	DANIKA	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1922201029	68	Licensed Registered Dietitian	9001	ALTRU HEALTH SYSTEM	1043309552		
92	$4,957	450226558	DICKEN	ROBERT	404 HWY 2 EAST		DEVILS LAKE	ND	58301	1568554285	18	Opthalmology	635036	TRINITY REGIONAL EYECARE	1083653752		
111	$4,952	202404179	SANFORD HEALTHCARE	ESSORIES E	621 DEMERS AVE		E GRAND FORKS	MN	56721	1689857203	54	Home Medical Equipment	7364001	SANFORD HEALTHCARE ACCES	1689857203		
56	$4,946	450226558	TALLEY	WADE	1 BURDICK EXPY W		MINOT	ND	58701	1801994629	8	Family Practice	635032	TRINITY MEDICAL GROUP	1083653752		
25	$4,942	450310462	ANSARI	AFTAB	1300 S COLUMBIA RD		GRAND FORKS	ND	58201	1124182068	20	Orthopedic Surgery	232001	ALTRU REHABILITATION CEN	1437248945		
208	$4,938	275079760	WAALE	DAVID	417 MAIN AVE STE 301		FARGO	ND	58103	1033141353	35	Chiropractor	7703001	WAALE CHIROPRACTIC CLINI	1962791863		
29	$4,932	450310462	SPERLE	JAMES	1200 S COLUMBIA RD		GRAND FORKS	ND	58201	1972699239	43	Certified Registered Nurse Anesthetist	62001	ALTRU HOSPITAL	1154346161		
17	$4,922	450226429	RIDDICK	ROBERT	30 7TH ST W		DICKINSON	ND	58601	1093711871	1	General Practice	95001	ST JOSEPHS HOSPITAL AND	1992947956		
59	$4,914	502803388	BAUMBACH	DIANE	1407 24 AVE S STE 530		GRAND FORKS	ND	58201	1033217955	80	Clinical Social Worker	7560001	BAUMBACH, DIANE, LICSW	1033217955		
78	$4,912	450311334	KRAFT	BERNADETTE	401 N 9TH ST		BISMARCK	ND	58501	1366484727	68	Licensed Registered Dietitian	236001	MID DAKOTA CLINIC	1275587826		
242	$4,910	461209870	FISCHER	DEREK	226 14 ST W		WILLISTON	ND	58801	1245416312	35	Chiropractor	8003001	FISCHER FAMILY CHIROPRAC	1861702581		
288	$4,908	800008821	WALTON	STEPHEN	120 BROADWAY		FARGO	ND	58102	1023183191	35	Chiropractor	558001	WALTON CHIROPRACTIC CLIN	1023183191		
198	$4,905	911770748	MYRON	SARAH	332 2ND AVE N		WAHPETON	ND	58075	1235141698	41	Optometrist	3086	SANFORD HEALTH WAHPETON	1942241351		
20	$4,901	450231183	LEWIS	JAMES	1301 15TH AVE W		WILLISTON	ND	58801	1922385442	43	Certified Registered Nurse Anesthetist	98001	MERCY MEDICAL CENTER DBA	1700990041		
82	$4,899	450226909	MAURIELLO	CLIFFORD	801 BROADWAY NORTH		FARGO	ND	58102	1366604878	37	Pediatrics	7742001	SANFORD BROADWAY CLINIC	1184917924		
46	$4,898	411674021	MIDWEST MEDICAL EQ	ENT & SUPP	530 E 2ND ST		DULUTH	MN	55805	1083797252	54	Home Medical Equipment	7917001	MIDWEST MEDICAL EQUIPMEN	1083797252		
319	$4,897	450404495	NEWGARD	SCOTT	104 W MAIN ST		MANDAN	ND	58554	1649219924	35	Chiropractor	1593001	SCOTT L NEWGARD DC	1649219924		
57	$4,894	450226909	WIISANEN	MATTHEW	801 BROADWAY NORTH		FARGO	ND	58102	1215945001	11	Internal Medicine	7742001	SANFORD BROADWAY CLINIC	1184917924		
42	$4,889	450226558	HOFF	ANN	1 BURDICK EXPY W		MINOT	ND	58701	1962629006	72	Emergency Medicine	635032	TRINITY MEDICAL GROUP	1083653752		
593	$4,883	450436504	NEIBAUER	KAYLA	1424 W CENTURY AVE #202		BISMARCK	ND	58503	1851663983	35	Chiropractor	602001	BRYANT CLINIC OF CHIROPR	1861661142		
25	$4,880	261175213	BRUMWELL	MELANIE	3000 32ND AVE S		FARGO	ND	58103	1699947929	5	Anesthesiology (MD)	6885030	INNOVIS HEALTH, LLC DBA	1578907655		
58	$4,874	450437655	SHANNON	KATIE	316 2ND AVE W		WILLISTON	ND	58801	1295862621	80	Clinical Social Worker	156001	NORTHWEST HUMAN SERVICE	1770524613		
77	$4,874	830501678	STANLEY	MIRANDA	2331 TYLER PKWY STE 4		BISMARCK	ND	58503	1093029076	50	Nurse Practitioner	7104001	INSTITUTE OF FACIAL SURG	1427226125		
27	$4,861	264348313	KRAPP	EMILY	1911 NORTH 11TH STREET		BISMARCK	ND	58501	1972868735	67	Occupational Therapy	599001	THE ENRICHMENT GARDEN	1730212325		
69	$4,858	450340688	WEST RIVER EYE CEN		1000 HIGHWAY 12		HETTINGER	ND	58639	1215026117	58	Other Individual Supplier - Optometric Supplier	377001	WEST RIVER EYE CENTER	1588784870		

30	$4,855	450226700	VANDALL	MICHAEL	2615 FAIRWAY ST		DICKINSON	ND	58601	1720209414	16	Obstet/Gynecology	4008	SANFORD HEALTH DICKINSON	1811941172		
253	$4,849	450454446	HAUG	CHRISTIAN	3301 13TH AVE SW		FARGO	ND	58103	1154489599	35	Chiropractor	1217001	GREAT PLAINS CHIROPRACTI	1154489599		
102	$4,843	410695598	LYNCH	BRIAN	2400 ST FRANCIS DRIVE		BRECKENRIDGE	MN	56520	1629209796	65	Physical Therapy	207001	ST FRANCIS MEDICAL CENTE	1891954574		
108	$4,841	261175213	SIKKINK	KARI RAE	801 BELSLY BLVD S		MOORHEAD	MN	56560	1942233432	8	Family Practice	6885034	INNOVIS HEALTH, LLC DBA	1659617504		
16	$4,840	450226909	STEVENSON	JAMES	801 BROADWAY NORTH		FARGO	ND	58102	1417286683	43	Certified Registered Nurse Anesthetist	7742001	SANFORD BROADWAY CLINIC	1184917924		
34	$4,839	450437648	RIDL	JEFFREY	1237 W DIVIDE AVE STE 5		BISMARCK	ND	58501	1508890013	83	Licenses Addiction Counselor-Chemical Dependency	241001	WEST CENTRAL HUMAN SERVI	1649226713		
39	$4,835	450226909	WIEST	DAVID	2301 S 25TH ST STE A		FARGO	ND	58103	1528010873	20	Orthopedic Surgery	7742011	SANFORD ORTHOPEDICS SPOR	1184917924		
105	$4,833	450310462	BEKDASH	ISMAIL	1200 S COLUMBIA RD		GRAND FORKS	ND	58201	1386814044	6	Cardivascular Disease	62001	ALTRU HOSPITAL	1154346161		
71	$4,828	450226909	SAARINEN	HEIDI	2801 UNIVERSITY DR S		FARGO	ND	58103	1104123298	50	Nurse Practitioner	7742005	SANFORD 2801 MEDICAL BUI	1184917924		
101	$4,817	450226700	GIBSON	ALLEN	225 N 7TH ST		BISMARCK	ND	58501	1205836384	97	Physician Assistant	4061	SANFORD SEVENTH AND THAY	1811941172		
133	$4,811	260012477	FROHLICH	DOUGLAS	210 10TH ST SE		JAMESTOWN	ND	58401	1013008655	41	Optometrist	686005	PROFESSIONAL EYECARE CEN	1699866244		
278	$4,805	261215496	ROTH	JASON	1906 30TH AVE S		MOORHEAD	MN	56560	1144326349	35	Chiropractor	7032001	ROTH FAMILY CHIROPRACTIC	1104018373		
183	$4,804	113686120	OLSON	SHARON	1312 HIGHWAY 49 N		BEULAH	ND	58523	1598743072	50	Nurse Practitioner	6103001	COAL COUNTRY COMMUNITY H	1942288329		
19	$4,800	450226909	HABLI	NADER	1720 UNIVERSITY DR S		FARGO	ND	58103	1265660757	5	Anesthesiology (MD)	7742004	SANFORD SOUTH UNIVERSITY	1184917924		
109	$4,796	450399320	HELMERS	JAMES	113 3RD AVE NW		MANDAN	ND	58554	1407954613	41	Optometrist	1169001	EYECARE PROFESSIONALS	1508964867		
120	$4,779	450226558	VERHEY	JEFFREY	20 BURDICK EXPRESSWAY W		MINOT	ND	58701	1962577486	29	Pulmonary Diseases	635029	TRINITY MEDICAL GROUP	1083653752		
139	$4,776	261175213	SCHEEL	LORI	1702 UNIVERSITY DR S		FARGO	ND	58103	1427083401	41	Optometrist	6885031	INNOVIS HEALTH, LLC DBA	1255677084		
111	$4,773	911770748	GITAU	MARK	401 12TH ST N		WHEATON	MN	56296	1225073661	75	Oncology	3083	SANFORD WHEATON	1942241351		
6	$4,761	271167415	SCHINDLER	ROBERT	210 WEST CENTURY AVENUE		BISMARCK	ND	58503	1548361769	42	Dentist	7299001	SCHINDLER & STEWART FAMI	1497950059		
436	$4,759	562587064	AMERICAN DRUG STOR	ELAWARE LL	2700 STATE STREET		BISMARCK	ND	58503	1730120601	63	Pharmacy	7162004	AMERICAN DRUG STORES DEL	1730120601		
89	$4,757	450226909	ALBERTO	NEVILLE	801 BROADWAY NORTH		FARGO	ND	58102	1225055213	11	Internal Medicine	7742001	SANFORD BROADWAY CLINIC	1184917924		
14	$4,755	450232743	KHOKHA	INDER	115 VIVAN ST		PARK RIVER	ND	58270	1225089949	2	General Surgery	598001	P.R. HEALTH CORPORATION	1306850706		
85	$4,754	261175213	DANYLKOVA	NATALIYA	1702 UNIVERSITY DR S		FARGO	ND	58103	1497808307	18	Opthalmology	6885031	INNOVIS HEALTH, LLC DBA	1255677084		
28	$4,751	450226909	PAUL	NAVIN	801 BROADWAY NORTH		FARGO	ND	58102	1164674644	10	Gastronenterology	7742001	SANFORD BROADWAY CLINIC	1184917924		
259	$4,751	261331810	LEINGANG	ANDREA	307 1ST ST NE		MANDAN	ND	58554	1497858880	35	Chiropractor	7058001	LEINGANG CHIROPRACTIC &	1760666887		
180	$4,747	20489001	MAIRS	COREY	17 11TH AVE W		LISBON	ND	58054	1992775944	41	Optometrist	1149001	LISBON VISION CENTER, P.	1407896673		
157	$4,746	263994620	MUTH	NATALIE	3750 32ND AVE S STE 103		GRAND FORKS	ND	58201	1760620025	35	Chiropractor	7341001	PLAINS CHIROPRACTIC & AC	1245470343		
17	$4,746	450226553	KRUTA	CLARK	570 CHAUTAUQUA BLVD		VALLEY CITY	ND	58072	1205862273	43	Certified Registered Nurse Anesthetist	75001	MERCY HOSPITAL	1972698975		
34	$4,746	450226909	HALL	NATHANIEL	801 BROADWAY NORTH		FARGO	ND	58102	1063695948	11	Internal Medicine	7742001	SANFORD BROADWAY CLINIC	1184917924		
65	$4,745	261175213	PENNEY	CURTIS	3000 32ND AVE S		FARGO	ND	58103	1366423048	13	Neurology	6885030	INNOVIS HEALTH, LLC DBA	1578907655		
28	$4,740	450310462	HOVERSON	LYNNE	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1568578169	43	Certified Registered Nurse Anesthetist	9001	ALTRU HEALTH SYSTEM	1043309552		
34	$4,735	450226711	SILBERNAGEL	PAUL	900 E BROADWAY AVE		BISMARCK	ND	58501	1407860208	43	Certified Registered Nurse Anesthetist	92001	ST ALEXIUS MEDICAL CENTE	1629121074		
49	$4,734	410724029	PETERSON	DAVID	323 S MINNESOTA ST		CROOKSTON	MN	56716	1780760868	48	Podiatry, Surgical chiropody	5548016	RIVERVIEW SPECIALTY CLIN	1487944898		
436	$4,727	450410216	GATEWAY PHARMACY N		3101 N 11TH ST STE 2		BISMARCK	ND	58503	1447356399	54	Home Medical Equipment	4298001	GATEWAY PHARMACY	1447356399		
116	$4,725	261175213	SHILLING	JOHN	3902 13TH AVE S		FARGO	ND	58103	1568775906	97	Physician Assistant	6885032	INNOVIS HEALTH, LLC DBA	1437495264		
62	$4,716	412002769	ONI	OLUBUKOLA	307 1ST AVE NW		KENMARE	ND	58746	1912137449	8	Family Practice	6176001	KENMARE HEALTH CENTER	1649226671		
49	$4,709	450226909	WIISANEN	RONALD	1717 SOUTH UNIVERSITY DR		FARGO	ND	58103	1790794295	8	Family Practice	7742027	SANFORD 1717 MEDICAL BUI	1184917924		
13	$4,705	450310462	BECK	GWENDOLYN	1200 S COLUMBIA RD		GRAND FORKS	ND	58201	1770597916	4	Otology, Laryngology, Rhinology	62001	ALTRU HOSPITAL	1154346161		
61	$4,703	861058655	HOFFERT	APRIL	430 5TH ST N		BRECKENRIDGE	MN	56520	1295178077	66	Speech Therapy	5909001	ORTHOPEDIC AND SPORTS PH	1811923535		
53	$4,699	450422944	CHAHAL	OMAR	2845 36TH AVE S		GRAND FORKS	ND	58201	1639248719	19	Oral Surgery	455003	FACE & JAW SURGERY CENTE	1457420564		
28	$4,695	450311334	ROLOFF	DIANA	401 N 9TH ST		BISMARCK	ND	58501	1699843078	43	Certified Registered Nurse Anesthetist	236001	MID DAKOTA CLINIC	1275587826		
21	$4,689	450226909	BAUMEISTER	ANN	1720 UNIVERSITY DR S		FARGO	ND	58103	1851318844	43	Certified Registered Nurse Anesthetist	7742004	SANFORD SOUTH UNIVERSITY	1184917924		
75	$4,686	263047434	EK	MARILYN	720 MAIN AVE		MOORHEAD	MN	56560	1487745493	50	Nurse Practitioner	7174003	7 DAY CLINIC MOORHEAD	1790931467		
119	$4,680	450226909	WYNNE	JOSHUA	801 BROADWAY NORTH		FARGO	ND	58102	1376565960	6	Cardivascular Disease	7742001	SANFORD BROADWAY CLINIC	1184917924		
85	$4,678	450226711	WARDNER	SUSAN	1177 BORDER LANE		WASHBURN	ND	58577	1235213695	50	Nurse Practitioner	1298001	WASHBURN FAMILY CLINIC	1831267236		
51	$4,677	208928600	VOIGT	TIFFANY	3060 FRONTIER WAY S		FARGO	ND	58104	1609922897	66	Speech Therapy	6961001	PEDIATRIC THERAPY PARTNE	1457479958		
63	$4,674	264314533	HALONE	CAROLE	510 4TH ST S		FARGO	ND	58103	1144323700	80	Clinical Social Worker	7444001	PSJ ACQUISITION LLC	1679709802		
95	$4,665	450437652	JONES	ANGELA	151 S 4TH ST STE 401		GRAND FORKS	ND	58201	1861427700	83	Licenses Addiction Counselor-Chemical Dependency	242001	NORTHEAST HUMAN SERVICE	1366496341		
176	$4,662	450325561	NORTHBROOK DRUG		1929 N WASHINGTON ST	SUITE C	BISMARCK	ND	58501	1144231705	63	Pharmacy	1951001	NORTHBROOK DRUG	1144231705		
21	$4,660	450226909	HARRIS	BRIAN	1720 UNIVERSITY DR S		FARGO	ND	58103	1396904785	5	Anesthesiology (MD)	7742004	SANFORD SOUTH UNIVERSITY	1184917924		
21	$4,658	261175213	KREMENS	KAROL	3000 32ND AVE S		FARGO	ND	58103	1235314741	11	Internal Medicine	6885030	INNOVIS HEALTH, LLC DBA	1578907655		
91	$4,658	450226909	LADWIG	JOHN	4000 28TH AVE S		MOORHEAD	MN	56560	1932131125	11	Internal Medicine	7742014	SANFORD MOORHEAD CLINIC	1184917924		
31	$4,650	450226419	HARDER	TAMMIE	800 S MAIN AVE		RUGBY	ND	58368	1477651628	50	Nurse Practitioner	18001	GOOD SAMARITAN HOSPITAL	1588751325		
164	$4,645	450310462	ALTRU PROSTHETICS	ORTHOTICS	1300 S COLUMBIA RD		GRAND FORKS	ND	58201	1033257704	53	Medical Supply Co with Prosthetist/Orthotist	232001	ALTRU REHABILITATION CEN	1437248945		
39	$4,644	450226909	MEYER	SHANE	801 BROADWAY NORTH		FARGO	ND	58102	1154675577	97	Physician Assistant	7742001	SANFORD BROADWAY CLINIC	1184917924		
194	$4,642	10915228	SEIL	ELIZABETH	1929 N WASHINGTON ST	STE OA	BISMARCK	ND	58501	1730331117	35	Chiropractor	7231001	DAKOTA LIFE CHIROPRACTIC	1174776439		
40	$4,642	450437652	DECKER	GREG	151 S 4TH ST STE 401		GRAND FORKS	ND	58201	1285912840	62	Psychology	242001	NORTHEAST HUMAN SERVICE	1366496341		
110	$4,642	450231181	KASPARI	JON	2422 20TH ST SW		JAMESTOWN	ND	58401	1366460925	22	Pathology, Anatomy, Clinical Pathology	124001	JAMESTOWN REGIONAL MEDIC	1821044652		
82	$4,635	450437652	THEISEN	JANA	151 S 4TH ST STE 401		GRAND FORKS	ND	58201	1851694806	83	Licenses Addiction Counselor-Chemical Dependency	242001	NORTHEAST HUMAN SERVICE	1366496341		
58	$4,635	450310462	DAHL	JEAN MARIE	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1528300167	68	Licensed Registered Dietitian	9001	ALTRU HEALTH SYSTEM	1043309552		
54	$4,629	411949975	WITTE-BAKKEN	JAN	891 BELSLY BLVD		MOORHEAD	MN	56560	1013001114	62	Psychology	1697002	SOLUTIONS BEHAVIORAL HEA	1801909239		
47	$4,629	585032215	DUKE	BILL	420 CENTER AVE STE 7		MOORHEAD	MN	56560	1710196522	62	Psychology	1160001	DUKE, BILL, PHD	1710196522		
113	$4,627	270973546	LINDEMANN	ALAN	110 9TH ST E		HARVEY	ND	58341	1285606665	16	Obstet/Gynecology	7482001	HARVEY CLINIC PC	1922335538		
95	$4,626	450309162	LAGODINSKI-CHRISTI	JULIE	3035 DEMERS AVE		GRAND FORKS	ND	58201	1386626976	41	Optometrist	222001	NORTH DAKOTA EYE CLINIC	1972563815		
118	$4,616	450413089	OTTESON	GUY	200 S 5TH ST		BISMARCK	ND	58504	1558308817	41	Optometrist	278001	DAKOTA EYE INSTITUTE	1962449835		
42	$4,614	450226558	SATHER	JEFFREY	1 BURDICK EXPY W		MINOT	ND	58701	1508937657	72	Emergency Medicine	635032	TRINITY MEDICAL GROUP	1083653752		

157	$4,613	452503969	FEARING	MITCHELL	1213 15TH AVE W		WILLISTON	ND	58801	1447347547	41	Optometrist	7751001	WILLISTON BASIN EYECARE	1225323504		
165	$4,613	450310462	BERG	JONATHON	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1073513982	8	Family Practice	9001	ALTRU HEALTH SYSTEM	1043309552		
36	$4,613	911770748	WILSON	JOEL	520 CHAUTAUQUA BLVD		VALLEY CITY	ND	58072	1083636658	62	Psychology	3002	SANFORD HEALTH VALLEY CI	1942241351		
130	$4,611	450201405	THRIFTY WHITE DRUG		511 1ST ST NW		MANDAN	ND	58554	1588753198	63	Pharmacy	3089001	THRIFTY WHITE DRUG #43	1588753198		
33	$4,609	450226711	FILLER	LAURA	900 E BROADWAY AVE		BISMARCK	ND	58501	1679514194	43	Certified Registered Nurse Anesthetist	92001	ST ALEXIUS MEDICAL CENTE	1629121074		
95	$4,608	450226558	SANKE	ROBERT	2815 16TH ST SW STE 102		MINOT	ND	58701	1427129576	18	Opthalmology	731001	TRINITY REGIONAL EYECARE	1083653752		
119	$4,604	452407520	LOOYSEN	STEVE	821 1 AVE S		JAMESTOWN	ND	58401	1285725820	41	Optometrist	7738001	LOOYSEN I CARE	1639462351		
8	$4,602	411462927	STADEM	PAUL	706 DEMERS AVE		E GRAND FORKS	MN	56721	1336247980	42	Dentist	7245001	STADEM, PAUL, DDS DBA DE	1366734295		
50	$4,601	450452124	BURCKHARD	MIKE	315 S MAIN ST STE 315		MINOT	ND	58701	1104814789	80	Clinical Social Worker	1242001	THE BURCKHARD CLINIC, PC	1346305190		
16	$4,600	450389929	GARRISON AMBULANCE	VI	143 5TH ST SE		GARRISON	ND	58540	1851491641	59	Ambulance Service	3218001	GARRISON AMBULANCE SERVI	1851491641		
19	$4,598	450226909	MURPHY	MATTHEW	801 BROADWAY NORTH		FARGO	ND	58102	1760400352	97	Physician Assistant	7742001	SANFORD BROADWAY CLINIC	1184917924		
32	$4,598	450226558	CEDERSTROM	LUANN	1 BURDICK EXPRESSWAY W		MINOT	ND	58701	1184712515	43	Certified Registered Nurse Anesthetist	635031	TRINITY MEDICAL GROUP AN	1083653752		
21	$4,594	450226558	KLEESPIE	MYCA	1 BURDICK EXPRESSWAY W		MINOT	ND	58701	1003151564	43	Certified Registered Nurse Anesthetist	635031	TRINITY MEDICAL GROUP AN	1083653752		
48	$4,589	450226909	HEIM	KATHY	100 4TH ST S		FARGO	ND	58103	1780606277	88	#N/A	7742006	SANFORD PROFESSIONAL BUI	1184917924		
143	$4,586	611481142	KELLER	TRACY	4622 40 AVE S STE B		FARGO	ND	58104	1629015300	65	Physical Therapy	6456001	AT HOME THERAPY SERVICES	1437173945		
25	$4,585	450226700	MURPHY	KEVIN	222 N 7TH ST		BISMARCK	ND	58501	1912019415	25	Physical Medicine and Rehab	4001	SANFORD CLINIC	1811941172		
35	$4,578	410724029	BAIG	MIRZA	323 S MINNESOTA ST		CROOKSTON	MN	56716	1265404073	11	Internal Medicine	5548016	RIVERVIEW SPECIALTY CLIN	1487944898		
53	$4,577	450226700	FISHER	CATHERINE	300 N 7TH ST		BISMARCK	ND	58501	1740326479	22	Pathology, Anatomy, Clinical Pathology	440001	SANFORD MEDICAL CENTER/B	1811941172		
105	$4,577	261175213	HALL	JEANNE	801 BELSLY BLVD S		MOORHEAD	MN	56560	1861417107	65	Physical Therapy	6885034	INNOVIS HEALTH, LLC DBA	1659617504		
88	$4,576	450447439	COLLINS	NICOLE	2601 S UNIVERSITY		FARGO	ND	58103	1639425556	41	Optometrist	1068001	BERGSTROM EYE AND LASER	1801819826		
96	$4,571	460478304	SCHMIDT	LORI	1711 GOLD DRIVE S #160		FARGO	ND	58103	1558440040	50	Nurse Practitioner	5709001	INDEPENDENT FAMILY DOCTO	1659477149		
72	$4,570	204854786	ADUM	VIVIAN	1700 11TH ST W		WILLISTON	ND	58801	1003252909	16	Obstet/Gynecology	6825001	GREAT PLAINS WOMENS HEAL	1144277484		
257	$4,567	462230313	THEIGE	CHASE	1319 2ND AVE W		WILLISTON	ND	58801	1447558978	35	Chiropractor	7777001	BASIN HEALTH AND SPINE C	1447558978		
35	$4,566	456002491	RICKERT	JULIE	1201 11TH AVE SW		MINOT	ND	58701	1215035944	62	Psychology	78001	CENTER FOR FAMILY MEDICI	1316008238		
268	$4,565	450442142	DAVIS	DEBRA	1515 S UNIVERSITY DR		FARGO	ND	58103	1447432976	35	Chiropractor	1191001	FARGO CHIROPRACTIC	1396803979		
131	$4,564	450226909	OLSON	ARDELL	801 BROADWAY NORTH		FARGO	ND	58102	1790703395	64	Audiology	7742001	SANFORD BROADWAY CLINIC	1184917924		
26	$4,559	450226909	TOMPKINS	REBEKAH	801 BROADWAY NORTH		FARGO	ND	58102	1871783704	16	Obstet/Gynecology	7742001	SANFORD BROADWAY CLINIC	1184917924		
55	$4,558	264314533	ZHAO	XIUJUN	510 4TH ST S		FARGO	ND	58103	1326205261	26	Psychiatry (MD)	7444001	PSJ ACQUISITION LLC	1679709802		
293	$4,556	450430847	ROKKE	VINCENT	1411 32ND ST SW		FARGO	ND	58103	1447308051	35	Chiropractor	1196001	ROKKE CHIROPRACTIC	1447308051		
50	$4,555	450455540	HAYNIE	GARY	2534 17TH AVE S		GRAND FORKS	ND	58201	1487641817	18	Opthalmology	1725002	RETINA ASSOCIATES, PC	1104045202		
241	$4,547	456002069	ECKES	AUDREY	401 3RD AVE N		FARGO	ND	58102	1750466801	50	Nurse Practitioner	534001	FARGO CASS PUBLIC HEALTH	1447335245		
25	$4,540	450226700	BROWN	MARLAND	222 N 7TH ST		BISMARCK	ND	58501	1578633020	62	Psychology	4001	SANFORD CLINIC	1811941172		
241	$4,528	263101922	MYERS	TRAVIS	1350 20TH AVE SW		MINOT	ND	58701	1912182544	35	Chiropractor	7196001	STACI BORKHUIS CHIROPRAC	1356599427		
94	$4,524	870694180	ECKSTEIN	ANDREA	701 3RD STREET NW		JAMESTOWN	ND	58401	1770617458	67	Occupational Therapy	5919001	ANNE CARLSEN CENTER	1598930109		
61	$4,523	450226700	BLEES	KRISTEN	515 EAST BROADWAY AVE		BISMARCK	ND	58501	1659469385	68	Licensed Registered Dietitian	4066	SANFORD 5TH & BROADWAY C	1811941172		
132	$4,519	911770748	MICKELSON	DANIEL	801 BROADWAY NORTH		FARGO	ND	58102	1215954854	30	Radiology	3001	SANFORD BROADWAY CLINIC	1942241351		
72	$4,517	450226700	LEIER	JENNIFER	209 7 ST N		BISMARCK	ND	58501	1649610742	50	Nurse Practitioner	4048	SANFORD SEVENTH AND THAY	1811941172		
20	$4,505	450226429	GROSULAK	TAMMY	30 7TH ST W		DICKINSON	ND	58601	1083892095	43	Certified Registered Nurse Anesthetist	95001	ST JOSEPHS HOSPITAL AND	1992947956		
95	$4,498	810486055	LAPAN	MICHAEL	1213 15TH AVE W		WILLISTON	ND	58801	1811981681	48	Podiatry, Surgical chiropody	1654001	LAPAN, MICHAEL, DPM	1811981681		
53	$4,490	450433512	LIND	JACKSON	1202 23RD ST S		FARGO	ND	58103	1215982319	26	Psychiatry (MD)	567003	CENTER FOR PSYCHIATRIC C	1043271885		
53	$4,486	450226558	KNAPP	STEFANIE	1321 W DAKOTA PARKWAY		WILLISTON	ND	58801	1376651257	18	Opthalmology	635039	TRINITY COMMUNITY CLINIC	1083653752		
154	$4,485	911770748	CATALAN	RICHARD	801 BROADWAY NORTH		FARGO	ND	58102	1194771097	30	Radiology	3001	SANFORD BROADWAY CLINIC	1942241351		
9	$4,483	270610322	FEIL	BLAKE	416 N 6TH ST		BISMARCK	ND	58501	1750619730	92	Orthodontist	7749001	FEIL ORTHODONTICS	1750619730		
22	$4,482	450226909	NELSON	STEPHEN	801 BROADWAY NORTH		FARGO	ND	58102	1720006307	37	Pediatrics	7742001	SANFORD BROADWAY CLINIC	1184917924		
265	$4,482	911770748	REICH	BRENDA	420 S 7TH ST		OAKES	ND	58474	1073502357	97	Physician Assistant	3068	SANFORD HEALTH OAKES CLI	1942241351		
49	$4,478	450310462	WESTERENG	REBECCA	725 HAMLINE ST		GRAND FORKS	ND	58203	1457408239	68	Licensed Registered Dietitian	9009	ALTRU FAMILY MEDICINE RE	1043309552		
45	$4,476	450314527	BOOMGAARDEN	RENEE	300 13 AVE W STE 1		DICKINSON	ND	58601	1215971056	62	Psychology	235001	BADLANDS HUMAN SERVICE C	1124072525		
63	$4,468	450253272	MOCH	PAULA	511 ELM AVE		LINTON	ND	58552	1851633804	50	Nurse Practitioner	430001	LINTON MEDICAL CENTER	1568471563		
122	$4,466	911770748	DAHL	BENJAMIN	801 BROADWAY NORTH		FARGO	ND	58102	1558565762	30	Radiology	3001	SANFORD BROADWAY CLINIC	1942241351		
64	$4,465	261175213	SCHENCK	JASON	3000 32ND AVE S		FARGO	ND	58103	1871547125	72	Emergency Medicine	6885016	ESSENTIA HEALTH HOSPITAL	1215125463		
45	$4,462	455497627	GEER	KYLEE	315 MAIN ST S SUITE 104		MINOT	ND	58701	1780881391	66	Speech Therapy	7881001	MINOT CENTER FOR PEDIATR	1821353848		
79	$4,460	450458242	GILBERT	PATRICIA	12 6TH AVE SW		BOWMAN	ND	58623	1801862115	97	Physician Assistant	2086001	SOUTHWEST MEDICAL CLINIC	1023083714		
203	$4,456	450310462	FERRY	RHEA	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1740371756	50	Nurse Practitioner	9001	ALTRU HEALTH SYSTEM	1043309552		
18	$4,453	450226558	CASEY	GREGORY	101 3RD AVE SW		MINOT	ND	58701	1487604260	2	General Surgery	635027	TRINITY MEDICAL GROUP	1083653752		
23	$4,452	208928600	BLUHM	ERICA	3060 FRONTIER WAY S		FARGO	ND	58104	1275979528	67	Occupational Therapy	6961001	PEDIATRIC THERAPY PARTNE	1457479958		
53	$4,450	203749270	MAGELKY	PHYLLIS	3509 INTERSTATE BLVD	STE B	FARGO	ND	58103	1407968522	66	Speech Therapy	1516002	MAGELKY, PHYLLIS LTD	1821324476		
95	$4,446	450231183	GRONDAHL	HEIDI	1301 15TH AVE W		WILLISTON	ND	58801	1619281987	50	Nurse Practitioner	142001	MERCY MEDICAL/HOSPITAL E	1720194624		
58	$4,441	205358294	AXTMAN	MYSTAL	1323 23 ST S SUITE H		FARGO	ND	58103	1285775569	88	#N/A	6866001	INNER LIGHT COUNSELING S	1285775569		
46	$4,437	450226909	CHAVOUR	SUDHIR	801 BROADWAY NORTH		FARGO	ND	58102	1891710604	11	Internal Medicine	7742001	SANFORD BROADWAY CLINIC	1184917924		
56	$4,431	810231784	SANTALA	ROGER	1301 15TH AVE W		WILLISTON	ND	58801	1396828059	75	Oncology	1263001	BILLINGS CLINIC	1376598714		
84	$4,430	450311334	SMITH	LORI	401 N 9TH ST		BISMARCK	ND	58501	1548297302	71	Certified Diabetic Educator	236001	MID DAKOTA CLINIC	1275587826		
54	$4,427	410695598	KETTERLING	JAN	2400 ST FRANCIS DRIVE		BRECKENRIDGE	MN	56520	1063542371	62	Psychology	207001	ST FRANCIS MEDICAL CENTE	1891954574		
9	$4,426	410724029	CHANNEL	EILEEN	323 S MINNESOTA ST		CROOKSTON	MN	56716	1497831580	43	Certified Registered Nurse Anesthetist	5548001	RIVERVIEW HEALTHCARE ASS	1477525566		
245	$4,424	273450262	JORGENSEN	MICHAEL	3411 FIECHTNER DR		FARGO	ND	58103	1881802742	35	Chiropractor	1194001	JORGENSEN CHIROPRACTIC,	1992975072		
159	$4,422	450226700	ASKEW	JEFFREY	1833 E BISMARCK EXPRESSW		BISMARCK	ND	58504	1811031826	35	Chiropractor	4053	SANFORD HEALTH CHIROPRAC	1811941172		
150	$4,421	260562958	JOHNSON	DARIN	1525 31 AVE SW SUITE E		MINOT	ND	58701	1710090485	41	Optometrist	7019001	JOHNSON EYECARE AND EYEW	1073708533		

40	$4,419	450226700	GROOMS	PAUL	715 E BROADWAY AVE		BISMARCK	ND	58501	1104801760	72	Emergency Medicine	4050	SANFORD SEVENTH AND BROA	1811941172		
69	$4,414	731631366	RUSTEBAKKE	KATHRYN	701 DEMERS AVE		GRAND FORKS	ND	58201	1750500054	65	Physical Therapy	7726002	REHAB AUTHORITY	1730159690		
34	$4,408	450226700	WOS	EDWARD	300 N 7TH ST		BISMARCK	ND	58501	1457429680	75	Oncology	440001	SANFORD MEDICAL CENTER/B	1811941172		
64	$4,405	450310462	GILLOON	BENJAMIN	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1902919376	30	Radiology	9001	ALTRU HEALTH SYSTEM	1043309552		
27	$4,402	450226711	MADDOCK	JEROME	900 E BROADWAY AVE		BISMARCK	ND	58501	1295888774	43	Certified Registered Nurse Anesthetist	92001	ST ALEXIUS MEDICAL CENTE	1629121074		
106	$4,400	450226700	HUBER	CHERYL	222 N 7TH ST		BISMARCK	ND	58501	1114025855	26	Psychiatry (MD)	4001	SANFORD CLINIC	1811941172		
8	$4,396	450379143	OLIVER COUNTY AMBU	E	208 MARKET ST		CENTER	ND	58530	1982793030	59	Ambulance Service	3000001	OLIVER COUNTY AMBULANCE	1982793030		
51	$4,394	262174879	MEEHL	STACEY	412 MAIN AVE		OAKES	ND	58474	1518931914	88	#N/A	7132001	JAMES RIVER COUNSELING S	1518931914		
137	$4,392	450226558	SCHIMKE	BRADLEY	2815 16TH ST SW STE 102		MINOT	ND	58701	1316018468	41	Optometrist	731001	TRINITY REGIONAL EYECARE	1083653752		
14	$4,391	410724029	EVERSVIK	JEREMY	323 S MINNESOTA ST		CROOKSTON	MN	56716	1437345295	43	Certified Registered Nurse Anesthetist	5548001	RIVERVIEW HEALTHCARE ASS	1477525566		
12	$4,390	450226909	ATCHISON	MICHELLE	1720 UNIVERSITY DR S		FARGO	ND	58103	1659563039	18	Opthalmology	7742004	SANFORD SOUTH UNIVERSITY	1184917924		
74	$4,386	450226558	BERG	GLORIA	831 S BROADWAY		MINOT	ND	58701	1679661003	46	Nurse Midwives	635001	TRINITY MEDICAL GROUP	1083653752		
76	$4,382	261175213	HOWDEN	RICHARD	1401 13TH AVE E		WEST FARGO	ND	58078	1689619470	8	Family Practice	6885033	INNOVIS HEALTH, LLC DBA	1487990339		
102	$4,381	261175213	ROGERS	JERRY	801 BELSLY BLVD S		MOORHEAD	MN	56560	1457381980	8	Family Practice	6885034	INNOVIS HEALTH, LLC DBA	1659617504		
50	$4,375	450226909	SHRESTHA	ALOK	801 BROADWAY NORTH		FARGO	ND	58102	1558509034	11	Internal Medicine	7742001	SANFORD BROADWAY CLINIC	1184917924		
12	$4,375	450310462	MARTIN	JEFFREY	1200 S COLUMBIA RD		GRAND FORKS	ND	58201	1053425173	20	Orthopedic Surgery	62001	ALTRU HOSPITAL	1154346161		
22	$4,372	450305918	PARK RIVER VOLUNTE	MB	115 VIVIAN ST W		PARK RIVER	ND	58270	1861582884	59	Ambulance Service	1887001	PARK RIVER VOLUNTEER AMB	1861582884		
92	$4,368	450226429	KOVACS	SIMIN	30 7TH ST W		DICKINSON	ND	58601	1659394948	22	Pathology, Anatomy, Clinical Pathology	95001	ST JOSEPHS HOSPITAL AND	1992947956		
151	$4,362	451067953	ROERS	STEPHANIE	300 45 ST S #315		FARGO	ND	58103	1750683389	35	Chiropractor	7717001	SUMMIT CHIROPRACTIC, PLL	1093014235		
332	$4,358	202404179	SANFORD HEALTHCARE	ESSORIES L	2801 S UNIVERSITY		FARGO	ND	58103	1477878114	54	Home Medical Equipment	3303002	SANFORD HEALTHCARE ACCES	1477878114		
44	$4,350	421614937	THIELGES	TOBY	119 MAIN ST SE STE A		LAMOURE	ND	58458	1417921800	65	Physical Therapy	7016001	THIELGES THERAPY, INC	1942486113		
18	$4,346	450226909	SAMARAWEERA	RAVINDA	700 1ST AVE S		FARGO	ND	58103	1053573287	13	Neurology	7742007	SANFORD NEUROSCIENCE CLI	1184917924		
78	$4,345	263047434	RATAJCZAK	AMY	1100 19TH AVE N STE L-M		FARGO	ND	58102	1245444561	97	Physician Assistant	7174006	7 DAY CLINIC	1841547387		
46	$4,336	261175213	SCHENCK	JASON	3000 32ND AVE S		FARGO	ND	58103	1871547125	72	Emergency Medicine	6885030	INNOVIS HEALTH, LLC DBA	1578907655		
13	$4,334	261175213	ZUEL	MELISSA	1702 UNIVERSITY DR S		FARGO	ND	58103	1629214184	43	Certified Registered Nurse Anesthetist	6885031	INNOVIS HEALTH, LLC DBA	1255677084		
43	$4,333	450226700	WYMAN	ALLEN	801 21ST AVE SE		MINOT	ND	58701	1386691533	8	Family Practice	4065	SANFORD HEALTH WALK-IN C	1811941172		
108	$4,333	411598427	GANDER	STEVEN	421 DEMERS AVE NW		E GRAND FORKS	MN	56721	1376639476	41	Optometrist	1407001	OPTICARE	1144357211		
67	$4,327	450226700	MEYER	JASON	300 N 7TH ST		BISMARCK	ND	58501	1215129283	21	Pathology, Anatomy, Clinical Pathology	440001	SANFORD MEDICAL CENTER/B	1811941172		
54	$4,326	450226909	SEE	JAY	801 BROADWAY NORTH		FARGO	ND	58102	1184670812	11	Internal Medicine	7742001	SANFORD BROADWAY CLINIC	1184917924		
11	$4,312	450226909	STORM	WALDEMAR	801 BROADWAY NORTH		FARGO	ND	58102	1023030681	37	Pediatrics	7742001	SANFORD BROADWAY CLINIC	1184917924		
897	$4,312	911770748	SANFORD NORTH FARG	INIC LAB	2601 N BROADWAY		FARGO	ND	58102	1609144294	69	Independent Laboratory	3028	SANFORD NORTH FARGO CLIN	1942241351		
187	$4,308	470875881	MRACHEK	MARTY	2700 STATE ST		BISMARCK	ND	58503	1104963099	41	Optometrist	5477001	MARTY J MRACHEK OD DBA S	1154468767		
30	$4,305	450226711	FREITAG	HEATHER	900 E BROADWAY AVE		BISMARCK	ND	58501	1063457000	43	Certified Registered Nurse Anesthetist	92001	ST ALEXIUS MEDICAL CENTE	1629121074		
41	$4,304	450226558	KNUTSON	SCOTT	1 BURDICK EXPY W		MINOT	ND	58701	1972690865	8	Family Practice	635032	TRINITY MEDICAL GROUP	1083653752		
30	$4,303	450310462	MCBRIDE	ELIZABETH	1200 S COLUMBIA RD		GRAND FORKS	ND	58201	1992045835	43	Certified Registered Nurse Anesthetist	62001	ALTRU HOSPITAL	1154346161		
53	$4,303	450226909	FALCK	SUSAN	700 1ST AVE S		FARGO	ND	58103	1013008028	97	Physician Assistant	7742007	SANFORD NEUROSCIENCE CLI	1184917924		
26	$4,296	261175213	BEARD	DAVID	3000 32ND AVE S		FARGO	ND	58103	1053376079	20	Orthopedic Surgery	6885030	INNOVIS HEALTH, LLC DBA	1578907655		
177	$4,291	204004582	WEHRMAN	KAMI	206 N MAIN ST		CROSBY	ND	58730	1497785158	35	Chiropractor	6229001	WEHRMAN, KAMI DC DBA CRO	1710156237		
88	$4,286	450226909	SANAULLAH	MOHAMED	801 BROADWAY NORTH		FARGO	ND	58102	1588685705	11	Internal Medicine	7742001	SANFORD BROADWAY CLINIC	1184917924		
49	$4,279	450226558	EL HOYEK	GEORGES	1 BURDICK EXPY W		MINOT	ND	58701	1255521092	8	Family Practice	635032	TRINITY MEDICAL GROUP	1083653752		
13	$4,275	450310462	MACK	KENNETH	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1689651044	37	Pediatrics	9001	ALTRU HEALTH SYSTEM	1043309552		
229	$4,272	562595409	HEID	DANE	3123 N 14TH ST		BISMARCK	ND	58503	1407192362	35	Chiropractor	6903001	BERGER CHIROPRACTIC & AC	1730212093		
72	$4,270	450226909	HARDMEYER	GABRIEL	801 BROADWAY NORTH		FARGO	ND	58102	1235315938	97	Physician Assistant	7742001	SANFORD BROADWAY CLINIC	1184917924		
279	$4,266	261560888	TURCK	NATHAN	101 N MAIN ST		GARRISON	ND	58540	1164603551	35	Chiropractor	7083001	COMPLETE CHIROPRACTIC	1154504967		
45	$4,262	450226558	SINGH	RASHPAL	20 BURDICK EXPRESSWAY W		MINOT	ND	58701	1285629014	11	Internal Medicine	635029	TRINITY MEDICAL GROUP	1083653752		
85	$4,260	450226711	ASTORNE FIGARI	WALTER	900 E BROADWAY AVE		BISMARCK	ND	58501	1518177500	11	Internal Medicine	501001	ST ALEXIUS MEDICAL CENTE	1205868429		
184	$4,239	271614773	ELLENBECKER	AMY	1050 31 AVE SW STE C		MINOT	ND	58701	1962732370	35	Chiropractor	7513001	LIFETIME CHIROPRACTIC	1245560432		
38	$4,224	450226909	STEPHENS	SCOTT	801 BROADWAY NORTH		FARGO	ND	58102	1528227212	37	Pediatrics	7742001	SANFORD BROADWAY CLINIC	1184917924		
54	$4,217	450226909	THEIGE	DAVID	801 BROADWAY NORTH		FARGO	ND	58102	1245252816	11	Internal Medicine	7742001	SANFORD BROADWAY CLINIC	1184917924		
31	$4,216	450226909	SWENSEN	ERIC	1720 UNIVERSITY DR S		FARGO	ND	58103	1679669139	26	Psychiatry (MD)	7742004	SANFORD SOUTH UNIVERSITY	1184917924		
52	$4,214	208928600	DONAHUE	ELIZABETH	3060 FRONTIER WAY S		FARGO	ND	58104	1356658751	66	Speech Therapy	6961001	PEDIATRIC THERAPY PARTNE	1457479958		
35	$4,210	450226558	SHIPLEY	FRANK	101 3RD AVE SW		MINOT	ND	58701	1023189172	2	General Surgery	635027	TRINITY MEDICAL GROUP	1083653752		
7	$4,203	113358535	ACCREDO HEALTH GRO	NC	2915 WATERS ROAD STE 109		EAGAN	MN	55121	1821048950	63	Pharmacy	4674001	ACCREDO HEALTH GROUP INC	1821048950		
75	$4,202	450447670	EFFERTZ	ABBEY	615 6TH ST SE		STANLEY	ND	58784	1356680086	97	Physician Assistant	473001	MOUNTRAIL COUNTY MEDICAL	1831289362		
45	$4,200	450226909	HYSJULIEN	CHERYL	100 4TH ST S		FARGO	ND	58103	1750330338	62	Psychology	7742006	SANFORD PROFESSIONAL BUI	1184917924		
129	$4,199	450358186	EMMERICH	MARK	34 1ST ST E		DICKINSON	ND	58601	1902864390	41	Optometrist	1046001	EMMERICH EYE CLINIC	1902864390		
57	$4,195	261175213	HAMILTON	TONY	3000 32ND AVE S		FARGO	ND	58103	1063442358	72	Emergency Medicine	6885016	ESSENTIA HEALTH HOSPITAL	1215125463		
293	$4,195	450404571	SAUNDERS	WILLIAM	1015 S BROADWAY SUITE 16		MINOT	ND	58701	1407919616	35	Chiropractor	1390001	SAUNDERS CHIROPRACTIC HE	1407919616		
83	$4,193	450226909	STABO	SUSAN	801 BROADWAY NORTH		FARGO	ND	58102	1881782258	50	Nurse Practitioner	7742001	SANFORD BROADWAY CLINIC	1184917924		
94	$4,189	450310462	MEYER	LANA	607 DEMERS AVE		E GRAND FORKS	MN	56721	1851520647	50	Nurse Practitioner	9040	ALTRU CLINIC EAST GRAND	1740621556		
6	$4,177	450438060	SARGENT COUNTY AMB	CE	316 MAIN ST S		FORMAN	ND	58032	1265514756	59	Ambulance Service	2867001	SARGENT COUNTY AMBULANCE	1265514756		
257	$4,177	456002220	LAMOURE COUNTY HEA	DEPT	100 1ST AVE SW		LAMOURE	ND	58458	1144418906	60	Public Health or Welfare Agency	7103001	LAMOURE COUNTY HEALTH DE	1144418906		
43	$4,176	205925283	TANABE	MARCUS	1165 S COLUMBIA RD STE C		GRAND FORKS	ND	58201	1336368240	19	Oral Surgery	6622001	VALLEY ORAL & FACIAL SUR	1801959788		
9	$4,176	410724029	ROED	ERIC	323 S MINNESOTA ST		CROOKSTON	MN	56716	1932216579	43	Certified Registered Nurse Anesthetist	5548001	RIVERVIEW HEALTHCARE ASS	1477525566		
80	$4,173	261175213	CABO CHAN	ALBERTO	3902 13TH AVE S		FARGO	ND	58103	1750314449	73	Endocrinology	6885032	INNOVIS HEALTH, LLC DBA	1437495264		
12	$4,169	450226909	MOSER	KENT	801 BROADWAY NORTH		FARGO	ND	58102	1710138375	43	Certified Registered Nurse Anesthetist	7742001	SANFORD BROADWAY CLINIC	1184917924		

29	$4,165	450226909	GOSWAMI	ARUNDHATI	1720 UNIVERSITY DR S		FARGO	ND	58103	1225250715	5	Anesthesiology (MD)	7742004	SANFORD SOUTH UNIVERSITY	1184917924		
37	$4,153	450226558	MEUNIER	RONNY	1 BURDICK EXPY W		MINOT	ND	58701	1518152289	26	Psychiatry (MD)	635032	TRINITY MEDICAL GROUP	1083653752		
158	$4,144	450437633	THREE NINETEENTH M	AL	1599 J ST		GRAND FORKS AFB	ND	58205	1578523924	60	Public Health or Welfare Agency	4583001	319TH MEDICAL GROUP	1578523924		
85	$4,144	331029318	GOVEN	JILL	416 KUNDERT ST		TURTLE LAKE	ND	58575	1780776559	50	Nurse Practitioner	5836001	NORTHLAND COMMUNITY HEAL	1457435802		
91	$4,137	203617501	ROYAL	NATALIE	1451 44TH AVE S UNIT F		GRAND FORKS	ND	58201	1457636003	50	Nurse Practitioner	6692001	NORTHLAND FAMILY PHYSICI	1215990791		
39	$4,133	450226700	HOGGARTH	TONIA	715 E BROADWAY AVE		BISMARCK	ND	58501	1619988508	8	Family Practice	4050	SANFORD SEVENTH AND BROA	1811941172		
43	$4,124	261175213	SEHGAL	BANTOO	3000 32ND AVE S		FARGO	ND	58103	1558677690	20	Orthopedic Surgery	6885030	INNOVIS HEALTH, LLC DBA	1578907655		
75	$4,122	261175213	KAPPHAHN	SAMANTHA	3000 32ND AVE S		FARGO	ND	58103	1548420904	11	Internal Medicine	6885030	INNOVIS HEALTH, LLC DBA	1578907655		
132	$4,116	450311334	DARRAS	KYLE	7500 UNIVERSITY DR		BISMARCK	ND	58504	1235271388	50	Nurse Practitioner	236004	MID DAKOTA CLINIC - U OF	1275587826		
45	$4,116	208976315	PERMAN	NICOLE	3001 11TH ST S		FARGO	ND	58103	1255657268	66	Speech Therapy	5881001	BEYOND BOUNDARIES SPEECH	1790999605		
83	$4,112	450253272	OLIVEIRA-FILHO	EDGAR	511 ELM AVE		LINTON	ND	58552	1376565903	8	Family Practice	430001	LINTON MEDICAL CENTER	1568471563		
95	$4,110	450310462	GO	JASON	1200 S COLUMBIA RD		GRAND FORKS	ND	58201	1447475637	11	Internal Medicine	62001	ALTRU HOSPITAL	1154346161		
45	$4,107	450226558	GHARBI	NAEL	1 BURDICK EXPY W		MINOT	ND	58701	1578874202	11	Internal Medicine	635032	TRINITY MEDICAL GROUP	1083653752		
173	$4,107	800670734	KEMPER	THOMAS	1450 25 ST S		FARGO	ND	58103	1235230301	35	Chiropractor	1216001	NATURAL HEALTH AND CHIRO	1750685517		
65	$4,103	450227311	NELSON	JACQUELINE	118 1ST ST S		NEW ROCKFORD	ND	58356	1750586772	97	Physician Assistant	507002	COMMUNITY HEALTH CLINIC	1801811666		
108	$4,100	450440223	NYRE	ROBERT	1100 N BROADWAY STE 110		MINOT	ND	58703	1528067212	41	Optometrist	649001	NYRE, ROBERT, OD	1528116969		
19	$4,099	450226909	PARVES	SHAH	1720 UNIVERSITY DR S		FARGO	ND	58103	1538394838	5	Anesthesiology (MD)	7742004	SANFORD SOUTH UNIVERSITY	1184917924		
38	$4,098	450448386	KOVAR	KATHRYN	430 E SWEET AVE		BISMARCK	ND	58504	1598795767	43	Certified Registered Nurse Anesthetist	1052001	DAKOTA SURGERY & LASER C	1952348013		
15	$4,094	820558836	BAKKE	AMY	905 MAIN ST		LISBON	ND	58054	1750340360	43	Certified Registered Nurse Anesthetist	5840005	LISBON AREA HEALTH SERVI	1811168958		
5	$4,091	450460852	HIRST	STANLEY	1839 S BROADWAY		MINOT	ND	58701	1922197524	42	Dentist	7202001	HIRST STANLEY B DDS, PC	1922197524		
6	$4,089	911770748	KARAZ	SAMY	904 5TH AVE NE		JAMESTOWN	ND	58401	1861556557	26	Psychiatry (MD)	3005	SANFORD HEALTH JAMESTOWN	1942241351		
47	$4,085	450226909	EDWARDS	ROBERT	1717 SOUTH UNIVERSITY DR		FARGO	ND	58103	1508903253	41	Optometrist	7742024	SANFORD SOUTH UNIVERSITY	1184917924		
17	$4,077	450226909	RASMUSSEN	TAMI	801 BROADWAY NORTH		FARGO	ND	58102	1437171006	43	Certified Registered Nurse Anesthetist	7742001	SANFORD BROADWAY CLINIC	1184917924		
74	$4,076	911770748	REN	YONGSHEN	1720 UNIVERSITY DR S		FARGO	ND	58103	1770510828	22	Pathology, Anatomy, Clinical Pathology	3904	SANFORD SOUTH UNIVERSITY	1942241351		
254	$4,072	911778400	MOTTA	RACHEL	503 E MAIN ST PLAZA 2		MANDAN	ND	58554	1194073098	35	Chiropractor	6620001	SCHWARTZ FAMILY CHIROPRA	1730266636		
66	$4,069	450226711	SCHAFFNER	PRESTON	900 E BROADWAY AVE		BISMARCK	ND	58501	1154666006	97	Physician Assistant	501001	ST ALEXIUS MEDICAL CENTE	1205868429		
272	$4,068	911770748	STALLMAN	DONALD	801 BROADWAY NORTH		FARGO	ND	58102	1386665503	36	Nuclear Medicine	3001	SANFORD BROADWAY CLINIC	1942241351		
53	$4,064	450310462	CARLSON	BLAKE	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1548249956	30	Radiology	9001	ALTRU HEALTH SYSTEM	1043309552		
73	$4,064	261175213	BAUGH	JOHN	3000 32ND AVE S		FARGO	ND	58103	1447297239	8	Family Practice	6885016	ESSENTIA HEALTH HOSPITAL	1215125463		
88	$4,056	261175213	JANKE	JENNIFER	3000 32ND AVE S		FARGO	ND	58103	1174503577	46	Nurse Midwives	6885030	INNOVIS HEALTH, LLC DBA	1578907655		
204	$4,046	861123162	SVEEN	JANE	310 N 10TH ST		BISMARCK	ND	58501	1487754487	97	Physician Assistant	6459001	ST ALEXIUS HEART & LUNG	1194823021		
45	$4,046	450226558	BANSODE	GAURAV	400 BURDICK EXPY E		MINOT	ND	58701	1134433857	8	Family Practice	635006	TRINITY MEDICAL GROUP	1083653752		
25	$4,035	450226558	KELLY	KAREN	1 BURDICK EXPRESSWAY W		MINOT	ND	58701	1649504242	43	Certified Registered Nurse Anesthetist	635031	TRINITY MEDICAL GROUP AN	1083653752		
40	$4,034	450226909	SWENSEN	ERIC	2400 32ND AVE S		FARGO	ND	58103	1679669139	26	Psychiatry (MD)	7742008	SANFORD SOUTHPOINTE CLIN	1184917924		
48	$4,032	450231675	OBRIEN PARADIS	KATIE	1200 N 7TH ST		OAKES	ND	58474	1164689931	11	Internal Medicine	47001	OAKES COMMUNITY HOSPITAL	1477724433		
23	$4,029	450413089	HILTS	GEORGE	3119 N 14TH ST		BISMARCK	ND	58503	1235186040	18	Opthalmology	278002	DAKOTA EYE INSTITUTE	1962449835		
17	$4,027	450226700	MCPHERSON	DANIELLE	209 7 ST N		BISMARCK	ND	58501	1427140409	50	Nurse Practitioner	4048	SANFORD SEVENTH AND THAY	1811941172		
33	$4,022	450310462	HARGREAVES	JAMES	1200 S COLUMBIA RD		GRAND FORKS	ND	58201	1306937107	74	Infectious Diseases	62001	ALTRU HOSPITAL	1154346161		
71	$4,017	450310462	HAUG	WILLIAM	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1922084284	96	#N/A	9001	ALTRU HEALTH SYSTEM	1043309552		
449	$4,014	450360514	JACKLITCH	MICHAEL	320 DAKOTA AVE		WAHPETON	ND	58075	1477674794	35	Chiropractor	669001	DAKOTA CHIROPRACTIC CLIN	1477674794		
128	$4,005	502069866	MOON	BARRY	3431 4TH AVE S		FARGO	ND	58103	1467742981	35	Chiropractor	7944001	MOON CHIROPRACTIC HEALTH	1467742981		
245	$4,001	201398783	KELLY	KRISTA	1415 2ND AVE SW		MINOT	ND	58701	1750351144	35	Chiropractor	6362001	KELLY CHIROPRACTIC, PC	1306944202		
121	$4,000	456002491	TRACY	ROBIN	2751 2ND AVE N STOP 9013		GRAND FORKS	ND	58202	1205919198	65	Physical Therapy	427001	UND CENTER FOR SPORTS ME	1215080437		
91	$3,997	264410576	HAROLDSON	ERIK	2280 S 45TH ST STE B		FARGO	ND	58104	1972737062	35	Chiropractor	7426001	CHIROPRACTIC REHABILITAT	1528294022		
19	$3,996	450226909	BLAZE	JODEE	801 BROADWAY NORTH		FARGO	ND	58102	1093955593	43	Certified Registered Nurse Anesthetist	7742001	SANFORD BROADWAY CLINIC	1184917924		
79	$3,994	911770748	SIEDSCHLAG	KATHLEEN	102 10TH AVE W		LISBON	ND	58054	1992925499	97	Physician Assistant	3074	SANFORD HEALTH LISBON CL	1942241351		
22	$3,975	450226711	OSHEA	CAROL	900 E BROADWAY AVE		BISMARCK	ND	58501	1285788927	43	Certified Registered Nurse Anesthetist	92001	ST ALEXIUS MEDICAL CENTE	1629121074		
41	$3,972	450226909	MICKELSON	JOHN	1720 UNIVERSITY DR S		FARGO	ND	58103	1497773097	8	Family Practice	7742004	SANFORD SOUTH UNIVERSITY	1184917924		
38	$3,971	450226909	BHATTARAL	JAYA	801 BROADWAY NORTH		FARGO	ND	58102	1013172717	11	Internal Medicine	7742001	SANFORD BROADWAY CLINIC	1184917924		
36	$3,962	450226909	YOE	NORBERT	801 BROADWAY NORTH		FARGO	ND	58102	1538132782	37	Pediatrics	7742001	SANFORD BROADWAY CLINIC	1184917924		
5	$3,961	450310462	LEETUN	DARIN	1200 S COLUMBIA RD		GRAND FORKS	ND	58201	1225080476	20	Orthopedic Surgery	62001	ALTRU HOSPITAL	1154346161		
176	$3,952	208482502	BROSZ	TANYA	1304 EAST BOULEVARD AVE		BISMARCK	ND	58501	1588784086	63	Pharmacy	7159001	JKRX INC DBA THE MEDICIN	1851485262		
76	$3,949	450308484	MOBERG	JEFFREY	710 N WELO ST		TIOGA	ND	58852	1235490269	97	Physician Assistant	327001	TIOGA MEDICAL CENTER	1245296078		
32	$3,948	450226909	MOSER	RICHARD	100 4TH ST S		FARGO	ND	58103	1689606873	62	Psychology	7742006	SANFORD PROFESSIONAL BUI	1184917924		
302	$3,947	450310462	LANTORIA	GERARDO	1380 S COLUMBIA RD		GRAND FORKS	ND	58201	1992972756	8	Family Practice	9021	ALTRU FAMILY MEDICINE CE	1043309552		
42	$3,938	502766548	FUHER	JESSIE	619 8TH AVE SE		JAMESTOWN	ND	58401	1225233083	88	#N/A	6976001	FUHER, JESSIE, LPCC	1225233083		
70	$3,936	911770748	KLABUNDE	JOSHUA	621 DEMERS AVE		E GRAND FORKS	MN	56721	1235563917	65	Physical Therapy	3080	SANFORD HEALTH 621 DEMER	1942241351		
51	$3,930	261175213	KOOYER	KURT	132 4TH AVE NE		VALLEY CITY	ND	58072	1063456218	37	Pediatrics	6885024	INNOVIS HEALTH, LLC DBA	1962682617		
79	$3,915	450226700	HUSTON	LAURIE	300 N 7TH ST		BISMARCK	ND	58501	1215901228	50	Nurse Practitioner	440001	SANFORD MEDICAL CENTER/B	1811941172		
55	$3,911	450226700	GIBSON	DAVID	414 N 7TH ST		BISMARCK	ND	58501	1942398383	26	Psychiatry (MD)	4046	SANFORD SEVENTH AND ROSS	1811941172		
56	$3,909	450430628	SPRAGUE	MARY	301 NP AVE		FARGO	ND	58102	1366650277	50	Nurse Practitioner	576001	FAMILY HEALTHCARE CENTER	1710066352		
81	$3,906	261175213	SHRAWNY	SHAWN	3000 32ND AVE S		FARGO	ND	58103	1376583013	30	Radiology	6885030	INNOVIS HEALTH, LLC DBA	1578907655		
79	$3,904	450226429	OLSTAD	KRISTINA	95 2ND ST NW		BEACH	ND	58621	1609872043	97	Physician Assistant	201001	ST JOSEPHS HOSPITAL/BEAC	1669491262		
27	$3,899	261175213	ERIE	JOHN	3000 32ND AVE S		FARGO	ND	58103	1336189539	5	Anesthesiology (MD)	6885030	INNOVIS HEALTH, LLC DBA	1578907655		
124	$3,898	461817876	PATCHEN	AARON	2600 GATEWAY AVE STE 2		BISMARCK	ND	58503	1437497625	35	Chiropractor	8004001	PATCHEN, DR AARON, PC	1164760294		
224	$3,895	450445795	SAYLER	NATHAN	323 CENTRAL AVE N	STE 202	VALLEY CITY	ND	58072	1942382312	35	Chiropractor	1049001	CENTRAL AVE CHIROPRACTIC	1891877239		

49	$3,892	450226700	COLLINS	SUSAN	300 N 7TH ST		BISMARCK	ND	58501	1235409764	50	Nurse Practitioner	440001	SANFORD MEDICAL CENTER/B	1811941172		
29	$3,891	450226558	BERENTSON	KARI	1 BURDICK EXPRESSWAY W		MINOT	ND	58701	1760570196	43	Certified Registered Nurse Anesthetist	635031	TRINITY MEDICAL GROUP AN	1083653752		
24	$3,891	450226909	ZAGNOON	ABBAS	801 BROADWAY NORTH		FARGO	ND	58102	1033313028	10	Gastronenterology	7742001	SANFORD BROADWAY CLINIC	1184917924		
95	$3,891	911770748	HOLZWARTH	RYAN	332 2ND AVE N		WAHPETON	ND	58075	1437102324	7	Dermatology	3016	SANFORD HEALTH WAHPETON	1942241351		
58	$3,889	261175213	BALVITSCH	JASON	3000 32ND AVE S		FARGO	ND	58103	1629179106	97	Physician Assistant	6885030	INNOVIS HEALTH, LLC DBA	1578907655		
83	$3,888	450399320	LONG	DANIEL	113 3RD AVE NW		MANDAN	ND	58554	1891894564	41	Optometrist	1169001	EYECARE PROFESSIONALS	1508964867		
39	$3,886	450226909	STAROSTA	VITALIY	801 BROADWAY NORTH		FARGO	ND	58102	1336443233	11	Internal Medicine	7742001	SANFORD BROADWAY CLINIC	1184917924		
78	$3,875	20625423	PETERSON	DEBRA	300 2ND AVE NE		JAMESTOWN	ND	58401	1770603813	83	Licenses Addiction Counselor-Chemical Dependency	5754001	PETERSON DEBRA I PC DBA	1699983932		
26	$3,865	450310462	WOOD	CHARLES	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1528064144	14	Neurological Surgery	9001	ALTRU HEALTH SYSTEM	1043309552		
63	$3,853	450437810	OLSON	KIMBERLY	701 W 6TH ST		GRAFTON	ND	58237	1609952365	65	Physical Therapy	453001	LIFE SKILLS AND TRANSITI	1558427708		
314	$3,853	450419318	TRAILL DISTRICT HE		114 W CALEDONIA AVE		HILLSBORO	ND	58045	1588763932	60	Public Health or Welfare Agency	4517001	TRAILL DISTRICT HEALTH	1588763932		
33	$3,850	450226558	AKHTER	SAEED	400 BURDICK EXPY E		MINOT	ND	58701	1982818753	34	Urology	635006	TRINITY MEDICAL GROUP	1083653752		
18	$3,849	450226909	HOLMAN	AMY	801 BROADWAY NORTH		FARGO	ND	58102	1538492921	43	Certified Registered Nurse Anesthetist	7742001	SANFORD BROADWAY CLINIC	1184917924		
96	$3,849	450433512	FRANK	BRADFORD	1451 44TH AVE S UNIT A		GRAND FORKS	ND	58201	1922057074	26	Psychiatry (MD)	567001	CENTER FOR PSYCHIATRIC C	1043271885		
34	$3,847	450437649	NITSCHKE	JENNIFER	520 3RD ST NW		JAMESTOWN	ND	58401	1023378023	62	Psychology	123001	SOUTH CENTRAL HUMAN SERV	1225075906		
23	$3,844	450226558	FOISY	SHANNON	1 BURDICK EXPRESSWAY W		MINOT	ND	58701	1659640159	43	Certified Registered Nurse Anesthetist	635031	TRINITY MEDICAL GROUP AN	1083653752		
19	$3,841	261175213	HILL	MICHAEL	3000 32ND AVE S		FARGO	ND	58103	1568789188	14	Neurological Surgery	6885030	INNOVIS HEALTH, LLC DBA	1578907655		
142	$3,830	911770748	HACK	VICKI	420 S 7TH ST		OAKES	ND	58474	1831188127	97	Physician Assistant	3068	SANFORD HEALTH OAKES CLI	1942241351		
42	$3,830	264314533	STANTON	BARBARA	510 4TH ST S		FARGO	ND	58103	1518980846	88	#N/A	7444001	PSJ ACQUISITION LLC	1679709802		
65	$3,829	450227752	SCHROEDER	DARA	437 3RD AVE SE		GARRISON	ND	58540	1740501386	50	Nurse Practitioner	432001	GARRISON FAMILY CLINIC	1952381873		
176	$3,821	450403515	GALT	JEFFREY	615 MAIN ST		CARRINGTON	ND	58421	1447356225	35	Chiropractor	1044001	GALT CHIROPRACTIC CLINIC	1447356225		
159	$3,815	262951210	VEIN	MARC	3222 28TH ST SW		FARGO	ND	58104	1730150475	35	Chiropractor	6191001	WELLNESS SOLUTIONS, PC D	1861648834		
53	$3,814	450314527	GABBERT	NANCY	300 13 AVE W STE 1		DICKINSON	ND	58601	1063443976	62	Psychology	235001	BADLANDS HUMAN SERVICE C	1124072525		
239	$3,811	562587064	AMERICAN DRUG STOR	ELAWARE LL	2400 10TH ST SW		MINOT	ND	58701	1700828993	63	Pharmacy	7162001	AMERICAN DRUG STORES DEL	1700828993		
8	$3,807	450420048	KINDRED AREA AMBUL		100 1ST AVE N		KINDRED	ND	58051	1891854212	59	Ambulance Service	3002001	KINDRED AREA AMBULANCE	1891854212		
18	$3,806	450226429	STENGEL	SUSAN	30 7TH ST W		DICKINSON	ND	58601	1861411076	43	Certified Registered Nurse Anesthetist	95001	ST JOSEPHS HOSPITAL AND	1992947956		
175	$3,801	920178452	GUNDERSON	MARK	3240 15TH ST S STE C		FARGO	ND	58104	1568730026	35	Chiropractor	5831001	HEALING ARTS CHIROPRACTI	1598959793		
84	$3,797	450228899	GUSTAFSON	SARAH	600 1ST STREET SE		MAYVILLE	ND	58257	1134552763	50	Nurse Practitioner	3076	SANFORD MAYVILLE	1366478760		
95	$3,796	204710911	ALLMARAS	AMANDA	1001 GATEWAY AVE		BISMARCK	ND	58503	1184063000	50	Nurse Practitioner	6462001	LIFEWAYS PARTNERS IN HEA	1053360594		
48	$3,796	450226700	FISHER	KELLY	515 EAST BROADWAY AVE		BISMARCK	ND	58501	1285722926	68	Licensed Registered Dietitian	4066	SANFORD 5TH & BROADWAY C	1811941172		
111	$3,793	450226909	KELLY	BRENDAN	1717 SOUTH UNIVERSITY DR		FARGO	ND	58103	1689873275	41	Optometrist	7742027	SANFORD 1717 MEDICAL BUI	1184917924		
69	$3,787	731684053	LORENZ	RYAN	11 NORTH MAIN		GWINNER	ND	58040	1063731180	65	Physical Therapy	6658002	MOBILITY PLUS REHABILITA	1881631299		
64	$3,779	450437648	SATHER	KATHERINE	1237 W DIVIDE AVE STE 5		BISMARCK	ND	58501	1376807909	83	Licenses Addiction Counselor-Chemical Dependency	241001	WEST CENTRAL HUMAN SERVI	1649226713		
112	$3,779	911770748	KAISER	KAREN	100 1ST AVE SW STE 2		LAMOURE	ND	58458	1205825593	50	Nurse Practitioner	3073	SANFORD HEALTH LAMOURE C	1942241351		
120	$3,778	911770748	LEVEE	LINDA	506 2ND ST		EDGELEY	ND	58433	1144242637	50	Nurse Practitioner	3024	SANFORD HEALTH EDGELEY C	1942241351		
19	$3,778	450226909	KOSTECKI	KAREN	1720 UNIVERSITY DR S		FARGO	ND	58103	1386661056	43	Certified Registered Nurse Anesthetist	7742004	SANFORD SOUTH UNIVERSITY	1184917924		
61	$3,777	450226558	LAMICHHANE	DIMAN	1 BURDICK EXPY W		MINOT	ND	58701	1700067360	11	Internal Medicine	635032	TRINITY MEDICAL GROUP	1083653752		
17	$3,776	450226909	COLON-DEJESUS	MANUEL	1720 UNIVERSITY DR S		FARGO	ND	58103	1083702427	5	Anesthesiology (MD)	7742004	SANFORD SOUTH UNIVERSITY	1184917924		
131	$3,775	411598427	STORHAUG	BRUCE	421 DEMERS AVE NW		E GRAND FORKS	MN	56721	1275561482	41	Optometrist	1407001	OPTICARE	1144357211		
132	$3,773	261175213	BRIGGS	MICHAEL	3000 32ND AVE S		FARGO	ND	58103	1710911185	11	Internal Medicine	6885030	INNOVIS HEALTH, LLC DBA	1578907655		
546	$3,770	450453558	FRITZ	NATHAN	603 COLLEGE DR S UNIT 4		DEVILS LAKE	ND	58301	1881687135	35	Chiropractor	1279001	FRITZ, NATHAN, DC	1881687135		
57	$3,764	911770748	REICH	BRENDA	69 HIGHWAY 13 W		GWINNER	ND	58040	1073502357	97	Physician Assistant	3072	SANFORD HEALTH GWINNER C	1942241351		
19	$3,763	450226909	RASHID	KARIM	1720 UNIVERSITY DR S		FARGO	ND	58103	1720311921	5	Anesthesiology (MD)	7742004	SANFORD SOUTH UNIVERSITY	1184917924		
111	$3,759	273224344	HALVERSON	ERIC	448 21 ST W STE D-1		DICKINSON	ND	58601	1962461616	67	Occupational Therapy	7711001	THERAPY SOLUTIONS	1801195045		
49	$3,751	450437649	REINARTS	COURTNEY	520 3RD ST NW		JAMESTOWN	ND	58401	1578761045	80	Clinical Social Worker	123001	SOUTH CENTRAL HUMAN SERV	1225075906		
102	$3,745	450422119	NIES	TROY	33 9TH ST W		DICKINSON	ND	58601	1578908638	97	Physician Assistant	231001	GREAT PLAINS CLINIC, PC	1720075377		
2	$3,743	450310462	ALI	SYED	1200 S COLUMBIA RD		GRAND FORKS	ND	58201	1518113562	33	Thoracic Surgery	62001	ALTRU HOSPITAL	1154346161		
10	$3,741	450226700	SANFORD PHARMACY/H		300 N 7TH ST		BISMARCK	ND	58501	1790889715	79	Home Infusion	4627001	SANFORD PHARMACY/BISMARC	1790889715		
65	$3,738	450226711	CAPAN	MICHAEL	900 E BROADWAY AVE		BISMARCK	ND	58501	1689728818	26	Psychiatry (MD)	501001	ST ALEXIUS MEDICAL CENTE	1205868429		
42	$3,737	203198828	KENNELLY	NANETTE	1220 MAIN AVE STE 120		FARGO	ND	58103	1316160914	66	Speech Therapy	6659001	KENNELLY SPEECH-LANGUAGE	1154370187		
263	$3,727	911770748	SCHNEIDER	MARK	801 BROADWAY NORTH		FARGO	ND	58102	1477584258	30	Radiology	3001	SANFORD BROADWAY CLINIC	1942241351		
20	$3,726	450226909	STAHL	HEIDI	801 BROADWAY NORTH		FARGO	ND	58102	1629344569	43	Certified Registered Nurse Anesthetist	7742001	SANFORD BROADWAY CLINIC	1184917924		
20	$3,724	450226909	INDERGAARD	PATRICK	1720 UNIVERSITY DR S		FARGO	ND	58103	1114944881	5	Anesthesiology (MD)	7742004	SANFORD SOUTH UNIVERSITY	1184917924		
50	$3,714	261175213	SAUTER	BRIAN	3000 32ND AVE S		FARGO	ND	58103	1558390294	72	Emergency Medicine	6885016	ESSENTIA HEALTH HOSPITAL	1215125463		
16	$3,712	450226909	SMOGARD	WAYNE	801 BROADWAY NORTH		FARGO	ND	58102	1659392876	43	Certified Registered Nurse Anesthetist	7742001	SANFORD BROADWAY CLINIC	1184917924		
31	$3,705	20625423	OWENS	SANDRA	300 2ND AVE NE		JAMESTOWN	ND	58401	1083750541	62	Psychology	5754001	PETERSON DEBRA I PC DBA	1699983932		
36	$3,703	450226909	SHAMSHAD	FAISAL	801 BROADWAY NORTH		FARGO	ND	58102	1225022320	6	Cardivascular Disease	7742001	SANFORD BROADWAY CLINIC	1184917924		
48	$3,698	201278075	MUHS	ANGELA	1407 24TH AVE S STE 520		GRAND FORKS	ND	58201	1457365082	80	Clinical Social Worker	6359001	AGASSIZ ASSOCIATES, PLLC	1700972122		
40	$3,689	461116401	OLSON	JEFF	418 E ROSSER AVE STE A		BISMARCK	ND	58501	1861547143	83	Licenses Addiction Counselor-Chemical Dependency	7952001	PATHWAY TO FREEDOM	1922352194		
39	$3,685	450226909	LIEN	DAVID	2400 32ND AVE S		FARGO	ND	58103	1194743765	8	Family Practice	7742008	SANFORD SOUTHPOINTE CLIN	1184917924		
79	$3,679	450310462	HANSON	ROLF	400 S MINNESOTA ST		CROOKSTON	MN	56716	1992896906	8	Family Practice	406001	ALTRU CROOKSTON	1760494330		
7	$3,675	450226558	WILLIAMS	DANIEL	1 BURDICK EXPY W		MINOT	ND	58701	1104074483	40	Hand Surgery	635032	TRINITY MEDICAL GROUP	1083653752		
41	$3,671	450226711	MIRZAI	MICHAEL	900 E BROADWAY AVE		BISMARCK	ND	58501	1508909540	26	Psychiatry (MD)	501001	ST ALEXIUS MEDICAL CENTE	1205868429		
464	$3,667	30477097	LANG	MONICA	1000 W CENTURY AVE		BISMARCK	ND	58503	1164709804	65	Physical Therapy	5470002	DAKOTA PHYSICAL THERAPY	1588797922		
206	$3,664	911875071	SABOURIN	JENNIFER	1220 2ND AVE S		MOORHEAD	MN	56560	1881876472	35	Chiropractor	1545001	NOKKEN CHIROPRACTIC CLIN	1164595955		
293	$3,657	460860311	LUNDBY	ELIZABETH	1830 E CENTURY AVE	STE 17	BISMARCK	ND	58503	1265735526	35	Chiropractor	7997001	UPPER CERVICAL HEALTH CE	1427394527		

120	$3,641	261175213	REFSLAND	BRADLEY	3902 13TH AVE S		FARGO	ND	58103	1174579650	8	Family Practice	6885032	INNOVIS HEALTH, LLC DBA	1437495264		
71	$3,640	261175213	GARBERG	TAMRA	801 BELSLY BLVD S		MOORHEAD	MN	56560	1104065499	50	Nurse Practitioner	6885034	INNOVIS HEALTH, LLC DBA	1659617504		
55	$3,633	261175213	PRAVEEN KUMAR	VALIPARAMB	1702 UNIVERSITY DR S		FARGO	ND	58103	1609141811	37	Pediatrics	6885031	INNOVIS HEALTH, LLC DBA	1255677084		
17	$3,628	450226909	WOITZEL	ASHLEY	801 BROADWAY NORTH		FARGO	ND	58102	1184972275	43	Certified Registered Nurse Anesthetist	7742001	SANFORD BROADWAY CLINIC	1184917924		
60	$3,617	450226909	HASS	TABITHA	1412 MAIN ST		HAWLEY	MN	56549	1174761084	97	Physician Assistant	7742015	SANFORD HAWLEY CLINIC	1184917924		
367	$3,617	820458524	BORGEN	AMY	309 27TH ST NW		MINOT	ND	58703	1427080266	35	Chiropractor	1449001	CHIROCARE FAMILY CENTER,	1427080266		
45	$3,610	261175213	BURNS	JOSEPH	3000 32ND AVE S		FARGO	ND	58103	1184654287	72	Emergency Medicine	6885030	INNOVIS HEALTH, LLC DBA	1578907655		
223	$3,605	263590186	HERITAGE PHARMACY	WAY MALL	2700 STATE ST STE F13		BISMARCK	ND	58503	1326291238	54	Home Medical Equipment	7440001	HERITAGE PHARMACY GATEWA	1326291238		
16	$3,600	450226909	DALLMAN	MEGAN	1720 UNIVERSITY DR S		FARGO	ND	58103	1336440924	43	Certified Registered Nurse Anesthetist	7742004	SANFORD SOUTH UNIVERSITY	1184917924		
104	$3,599	450311334	SMITH	LORI	401 N 9TH ST		BISMARCK	ND	58501	1548297302	68	Licensed Registered Dietitian	236001	MID DAKOTA CLINIC	1275587826		
49	$3,593	911770748	BIEGLER	PETER	1720 UNIVERSITY DR S		FARGO	ND	58103	1164683363	30	Radiology	3904	SANFORD SOUTH UNIVERSITY	1942241351		
30	$3,592	450226909	CORNELIUSSEN	STEPHANIE	100 4TH ST S		FARGO	ND	58103	1255605762	62	Psychology	7742006	SANFORD PROFESSIONAL BUI	1184917924		
18	$3,587	450226429	JORDA	ARLYS	30 7TH ST W		DICKINSON	ND	58601	1073533139	43	Certified Registered Nurse Anesthetist	95001	ST JOSEPHS HOSPITAL AND	1992947956		
163	$3,585	450310462	ZWILLING	JANA	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1184873911	50	Nurse Practitioner	9001	ALTRU HEALTH SYSTEM	1043309552		
65	$3,583	450226700	CARLSON	DENISE	222 N 7TH ST		BISMARCK	ND	58501	1336247832	50	Nurse Practitioner	4001	SANFORD CLINIC	1811941172		
217	$3,580	450405242	GERO	GEORGE	111 E CENTURY AVE		BISMARCK	ND	58503	1255388294	41	Optometrist	328001	FAMILY VISION CLINIC	1235249475		
70	$3,576	911770748	LAWRENCE	SCOTT	108 VIKING AVE W		ULEN	MN	56585	1407874076	8	Family Practice	3019	SANFORD HEALTH ULEN CLIN	1942241351		
24	$3,572	450226909	KJELSTRUP	DIANE	2701 13TH AVE S		FARGO	ND	58103	1306036017	26	Psychiatry (MD)	7742009	SANFORD CHILDRENS SOUTHW	1184917924		
34	$3,564	461661358	HANSON	DAVID	119 4TH ST S		MOORHEAD	MN	56560	1932262474	5	Anesthesiology (MD)	8010001	RENEW MEDICAL CLINIC, LL	1811234032		
101	$3,556	260012477	FRONK	KENT	210 10TH ST SE		JAMESTOWN	ND	58401	1306937941	41	Optometrist	686005	PROFESSIONAL EYECARE CEN	1699866244		
104	$3,551	450226558	BENDER	HEIDI	20 BURDICK EXPRESSWAY W		MINOT	ND	58701	1942400726	50	Nurse Practitioner	635029	TRINITY MEDICAL GROUP	1083653752		
1,455	$3,551	450226700	SANFORD LABORATORY	MARCK	222 N 7TH ST		BISMARCK	ND	58501	1154485944	69	Independent Laboratory	4001	SANFORD CLINIC	1811941172		
95	$3,531	261175213	NELLES	RACHEL	1401 13TH AVE E		WEST FARGO	ND	58078	1073530515	50	Nurse Practitioner	6885033	INNOVIS HEALTH, LLC DBA	1487990339		
35	$3,531	450226909	MANNURU	DEVENDRANA	801 BROADWAY NORTH		FARGO	ND	58102	1023273273	11	Internal Medicine	7742001	SANFORD BROADWAY CLINIC	1184917924		
45	$3,529	450310462	HANSON	BRENDA	1200 S COLUMBIA RD		GRAND FORKS	ND	58201	1497846299	97	Physician Assistant	62001	ALTRU HOSPITAL	1154346161		
38	$3,528	450226423	HILLESHEIM	NADINE	1201 25TH ST S		FARGO	ND	58103	1265577746	88	#N/A	283001	THE VILLAGE FAMILY SERVI	1568492353		
42	$3,520	450226909	WILLIAMS	MICHELLE	2400 32ND AVE S		FARGO	ND	58103	1851313449	68	Licensed Registered Dietitian	7742008	SANFORD SOUTHPOINTE CLIN	1184917924		
14	$3,507	363317176	BELFIELD AMBULANCE	VI	304 MAIN ST S		BELFIELD	ND	58622	1588735401	59	Ambulance Service	1885001	BELFIELD AMBULANCE SERVI	1588735401		
156	$3,506	541882269	DOMINION DIAGNOSTI	LC	211 CIRCUIT DRIVE		NORTH KINGSTOWN	RI	2852	1912903717	69	Independent Laboratory	8111001	DOMINION DIAGNOSTICS, LL	1912903717		
57	$3,506	450359913	THRIFTY DRUG		1521 S UNIVERSITY DR		FARGO	ND	58103	1952407892	54	Home Medical Equipment	1940001	THRIFTY DRUG	1952407892		
181	$3,505	202032920	WELDER	WILLIAM	315 11TH ST N STE A		WAHPETON	ND	58075	1629097332	41	Optometrist	6508001	PRAIRIE VISION CENTER PC	1952383713		
232	$3,504	611481142	STROH	ROGER	4622 40 AVE S STE B		FARGO	ND	58104	1851329478	65	Physical Therapy	6456001	AT HOME THERAPY SERVICES	1437173945		
179	$3,498	450460228	RUDOLPH	ALLEN	408 1ST ST NW #A		MANDAN	ND	58554	1831217462	35	Chiropractor	5663001	CARTER CHIROPRACTIC PC D	1174645550		
50	$3,497	450447670	WACKER	DONNA	615 6TH ST SE		STANLEY	ND	58784	1356431894	50	Nurse Practitioner	473001	MOUNTRAIL COUNTY MEDICAL	1831289362		
66	$3,492	450231675	HEDLUND	JEFFREY	1200 N 7TH ST		OAKES	ND	58474	1982679650	97	Physician Assistant	47001	OAKES COMMUNITY HOSPITAL	1477724433		
119	$3,488	450443616	HAMMERSCHMIDT	MICHAEL	204 W MAIN ST		BEULAH	ND	58523	1245248418	41	Optometrist	1033001	BEULAH VISION PC	1881687010		
58	$3,483	450226711	WONGJIRAD	CHATREE	900 E BROADWAY AVE		BISMARCK	ND	58501	1376624445	13	Neurology	501005				
81	$3,480	263047434	UPTON	SUSAN	4622 40TH AVE S		FARGO	ND	58104	1023164845	50	Nurse Practitioner	7174001	7 DAY CLINIC OSGOOD	1619123593		
18	$3,479	450311334	ANDERSON	DANIELLE	401 N 9TH ST		BISMARCK	ND	58501	1831430644	97	Physician Assistant	236001	MID DAKOTA CLINIC	1275587826		
18	$3,473	261175213	OLSON	JEFFREY	3000 32ND AVE S		FARGO	ND	58103	1770757221	43	Certified Registered Nurse Anesthetist	6885030	INNOVIS HEALTH, LLC DBA	1578907655		
77	$3,473	450441817	FIFTH MED SUPPORT	GS	10 MISSILE AVE		MINOT AFB	ND	58705	1427031673	60	Public Health or Welfare Agency	4612001	FIFTH MED SUPPORT SQ/SGS	1427031673		
100	$3,466	911770748	STOLTZ	JOAN	520 CHAUTAUQUA BLVD		VALLEY CITY	ND	58072	1649291865	97	Physician Assistant	3002	SANFORD HEALTH VALLEY CI	1942241351		
5	$3,463	450226909	PASCHALL	JOHN	801 BROADWAY NORTH		FARGO	ND	58102	1184688772	37	Pediatrics	7742001	SANFORD BROADWAY CLINIC	1184917924		
44	$3,462	450226558	TALEBDOOST	ALEX	1 BURDICK EXPY W		MINOT	ND	58701	1033326954	8	Family Practice	635032	TRINITY MEDICAL GROUP	1083653752		
39	$3,462	261175213	HAMILTON	TONY	3000 32ND AVE S		FARGO	ND	58103	1063442358	72	Emergency Medicine	6885030	INNOVIS HEALTH, LLC DBA	1578907655		
17	$3,459	450226909	BOE	JULIE	801 BROADWAY NORTH		FARGO	ND	58102	1679590673	43	Certified Registered Nurse Anesthetist	7742001	SANFORD BROADWAY CLINIC	1184917924		
289	$3,457	456002212	FOSTER COUNTY PUBL	EALTH	881 MAIN ST		CARRINGTON	ND	58421	1275659831	60	Public Health or Welfare Agency	6642001	FOSTER COUNTY PUBLIC HEA	1275659831		
185	$3,457	383666991	AKER	JANYNE	1150 PRAIRIE PKWY	STE 102	WEST FARGO	ND	58078	1508931064	35	Chiropractor	5832001	AKER CHIROPRACTIC LTD	1437348786		
3	$3,456	450226558	BILLINGS	DAVID	1 BURDICK EXPY W		MINOT	ND	58701	1588752919	16	Obstet/Gynecology	635032	TRINITY MEDICAL GROUP	1083653752		
47	$3,448	450227012	RAYMOND	ARTHUR	1031 7TH ST NE		DEVILS LAKE	ND	58301	1568438893	8	Family Practice	76001	THE MERCY HOSPITAL OF DE	1790751170		
10	$3,441	450226909	SZCZEPANSKI	AMBER	801 BROADWAY NORTH		FARGO	ND	58102	1073760237	43	Certified Registered Nurse Anesthetist	7742001	SANFORD BROADWAY CLINIC	1184917924		
34	$3,431	450226909	SANFORD SOUTHPOINT	INIC/DIABE	2400 32ND AVE S		FARGO	ND	58103	1184917924	71	Certified Diabetic Educator	7742008	SANFORD SOUTHPOINTE CLIN	1184917924		
20	$3,430	450226909	HOLTE	RALPH	801 BROADWAY NORTH		FARGO	ND	58102	1578580437	43	Certified Registered Nurse Anesthetist	7742001	SANFORD BROADWAY CLINIC	1184917924		
93	$3,428	450310462	LAMBERT	DAVID	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1154384527	30	Radiology	9001	ALTRU HEALTH SYSTEM	1043309552		
77	$3,423	450226711	KUNRATH	SCOTT	900 E BROADWAY AVE		BISMARCK	ND	58501	1790968261	97	Physician Assistant	501001	ST ALEXIUS MEDICAL CENTE	1205868429		
61	$3,421	450310159	MATTSON	JAIME	164 W 13TH ST		GRAFTON	ND	58237	1306134309	50	Nurse Practitioner	40001	UNITY MEDICAL CENTER	1245216852		
67	$3,421	450226700	SCHIRADO	KEVIN	414 N 7TH ST		BISMARCK	ND	58501	1225166523	44	Psychiatric Nurse	4046	SANFORD SEVENTH AND ROSS	1811941172		
37	$3,415	501965841	NORDAUNE	TINA	501 MAIN ST		WILLISTON	ND	58802	1013096049	80	Clinical Social Worker	7180001	PLAYWORKS	1013096049		
254	$3,410	203568057	BENTZ	ASHLEIGH	1050 E INTERSTATE AVE	#21	BISMARCK	ND	58503	1386936847	35	Chiropractor	6690001	MESSER CHIROPRACTIC, P.C	1093997868		
47	$3,406	261175213	COURSEY	RICHARD	3000 32ND AVE S		FARGO	ND	58103	1821294695	30	Radiology	6885030	INNOVIS HEALTH, LLC DBA	1578907655		
12	$3,404	450231181	ERRETT	BRUCE	2422 20TH ST SW		JAMESTOWN	ND	58401	1063565802	43	Certified Registered Nurse Anesthetist	77001	JAMESTOWN REGIONAL MEDIC	1407957277		
17	$3,399	410724029	BAIG	MIRZA	323 S MINNESOTA ST		CROOKSTON	MN	56716	1265404073	11	Internal Medicine	5548001	RIVERVIEW HEALTHCARE ASS	1477525566		
32	$3,396	450456320	CHRISTOFFERSON	SANDI	11 N COLLEGE DRIVE STE C		DEVILS LAKE	ND	58301	1710976386	80	Clinical Social Worker	1768001	CHRISTOFFERSON CONSULTIN	1710976386		
142	$3,396	450226700	ASKEW	JEFFREY	2603 E BROADWAY AVE		BISMARCK	ND	58501	1811031826	35	Chiropractor	4068	SANFORD HEALTH CHIROPRAC	1811941172		
46	$3,394	261175213	CHAN	LESLIE	3000 32ND AVE S		FARGO	ND	58103	1912039850	5	Anesthesiology (MD)	6885030	INNOVIS HEALTH, LLC DBA	1578907655		
60	$3,376	450226700	ARAZI	RICHARD	300 N 7TH ST		BISMARCK	ND	58501	1710915681	13	Neurology	440001	SANFORD MEDICAL CENTER/B	1811941172		

17	$3,374	450226909	CARR	MICHAEL	801 BROADWAY NORTH		FARGO	ND	58102	1104844802	43	Certified Registered Nurse Anesthetist	7742001	SANFORD BROADWAY CLINIC	1184917924		
26	$3,371	450226909	FINES	MICHELLE	1720 UNIVERSITY DR S		FARGO	ND	58103	1619003381	43	Certified Registered Nurse Anesthetist	7742004	SANFORD SOUTH UNIVERSITY	1184917924		
148	$3,370	611481142	WOLD	JEFFREY	4622 40 AVE S STE B		FARGO	ND	58104	1578509899	65	Physical Therapy	6456001	AT HOME THERAPY SERVICES	1437173945		
97	$3,370	450226711	BAKER	SARAH	2700 8TH ST NW		MINOT	ND	58703	1780832634	50	Nurse Practitioner	501016	ST ALEXIUS CLINIC	1205868429		
69	$3,369	450442284	FORT YATES		NORTH RIVER RD		FORT YATES	ND	58538	1609851039	70	Clinic	1347001	FORT YATES IHS	1609851039		
144	$3,366	271009138	POZARNSKY	DANIEL	300 45TH ST S # 315		FARGO	ND	58103	1558507418	35	Chiropractor	7459001	BALANCE CHIROPRACTIC & R	1851626055		
50	$3,365	450226909	FIDLER	NANCY	100 4TH ST S		FARGO	ND	58103	1528136298	80	Clinical Social Worker	7742006	SANFORD PROFESSIONAL BUI	1184917924		
56	$3,363	273134469	HEDSTROM	JODI	1150 PRAIRIE PKWY	STE 105	WEST FARGO	ND	58078	1528281136	66	Speech Therapy	7574001	PROGRESSIVE THERAPY ASSO	1699075945		
77	$3,361	450310462	BRANDT	ROSE	400 S MINNESOTA ST		CROOKSTON	MN	56716	1033216817	8	Family Practice	406001	ALTRU CROOKSTON	1760494330		
17	$3,360	450226909	FISHER	CRISTINA	1720 UNIVERSITY DR S		FARGO	ND	58103	1548294457	5	Anesthesiology (MD)	7742004	SANFORD SOUTH UNIVERSITY	1184917924		
52	$3,358	450310462	MAGNUSON	JEFFREY	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1457330409	30	Radiology	9001	ALTRU HEALTH SYSTEM	1043309552		
80	$3,357	911770748	MARTINO	ROBERT	3838 12TH AVE N		FARGO	ND	58102	1467470062	8	Family Practice	587001	SANFORD HEALTH OCCUPATIO	1952323974		
21	$3,354	450226909	GLYNN	ALICIA	801 BROADWAY NORTH		FARGO	ND	58102	1437364155	72	Emergency Medicine	7742001	SANFORD BROADWAY CLINIC	1184917924		
22	$3,354	450226558	UNDERDAHL	NICOLE	1 BURDICK EXPRESSWAY W		MINOT	ND	58701	1598090250	43	Certified Registered Nurse Anesthetist	635031	TRINITY MEDICAL GROUP AN	1083653752		
79	$3,353	450310462	CLAUSON	CARRIE	400 S MINNESOTA ST		CROOKSTON	MN	56716	1811932551	97	Physician Assistant	406001	ALTRU CROOKSTON	1760494330		
23	$3,345	450226700	REYNOLDS	JOHN	300 N 7TH ST		BISMARCK	ND	58501	1417027988	11	Internal Medicine	440001	SANFORD MEDICAL CENTER/B	1811941172		
91	$3,344	261175213	MOEN	LISA	1702 UNIVERSITY DR S		FARGO	ND	58103	1982955159	50	Nurse Practitioner	6885031	INNOVIS HEALTH, LLC DBA	1255677084		
106	$3,338	261175213	BUECHLER-PRICE	JONI	1702 UNIVERSITY DR S		FARGO	ND	58103	1104025113	30	Radiology	6885031	INNOVIS HEALTH, LLC DBA	1255677084		
23	$3,335	450226700	SERABE	BARUTI	300 N 7TH ST		BISMARCK	ND	58501	1093813743	37	Pediatrics	440001	SANFORD MEDICAL CENTER/B	1811941172		
389	$3,334	450368238	BLANCHARD	DAVID	620 3RD ST		LANGDON	ND	58249	1225208358	35	Chiropractor	1087001	BLANCHARD CHIROPRACTIC	1225208358		
38	$3,332	450226909	OLSON	KATHERINE	2400 32ND AVE S		FARGO	ND	58103	1164512273	68	Licensed Registered Dietitian	7742008	SANFORD SOUTHPOINTE CLIN	1184917924		
92	$3,332	450338325	CLARK	SELMER	201 E 3RD AVE S		CAVALIER	ND	58220	1598941288	41	Optometrist	197001	CAVALIER OPTOMETRY CLINI	1730173238		
115	$3,330	331029318	BUSCH	CASSIE	122 2ND ST E		MCCLUSKY	ND	58463	1679911622	50	Nurse Practitioner	5836003	NORTHLAND COMMUNITY HEAL	1528142981		
133	$3,329	450342671	SPICER	LAURA	360 DIVISION AVE STE 200		GRAND FORKS	ND	58201	1619054327	50	Nurse Practitioner	189001	VALLEY HEALTH	1194922328		
76	$3,328	204139005	BRADLEY	JASON	207 S MAIN ST		MINOT	ND	58701	1275621161	41	Optometrist	1475002	BRADLEY EYECARE, PC	1538257415		
52	$3,325	10650829	REITEN EYLANDS	MARY	1551 28 AVE S STE C		GRAND FORKS	ND	58201	1285968404	88	#N/A	5650001	CENTER FOR SELF GROWTH &	1265658967		
39	$3,323	450226909	FRIEDERICHS	MATTHEW	2400 32ND AVE S		FARGO	ND	58103	1790703338	20	Orthopedic Surgery	7742008	SANFORD SOUTHPOINTE CLIN	1184917924		
52	$3,323	411949975	MOYNIHAN	PETER	891 BELSLY BLVD		MOORHEAD	MN	56560	1477647576	80	Clinical Social Worker	1697002	SOLUTIONS BEHAVIORAL HEA	1801909239		
144	$3,320	455561443	HUTZENBILER	MATTHIAS	1428 W VILLARD ST		DICKINSON	ND	58601	1235334988	35	Chiropractor	7911001	HUTZENBILER CHIROPRACTIC	1962751511		
61	$3,320	450447670	LANGAGER	TYRONE	615 6TH ST SE		STANLEY	ND	58784	1992822464	8	Family Practice	473001	MOUNTRAIL COUNTY MEDICAL	1831289362		
10	$3,318	450432031	KILLDEER AREA AMBU	E	151 CENTRAL AVE N		KILLDEER	ND	58640	1922121276	59	Ambulance Service	4500001	KILLDEER AREA AMBULANCE	1922121276		
131	$3,316	450418143	CARLSON	DORI	121 BRIGGS AVE N		PARK RIVER	ND	58270	1649231192	41	Optometrist	339001	HEARTLAND EYE CARE, PC	1932277936		
10	$3,313	450226558	ZAK	LINDA	101 3RD AVE SW		MINOT	ND	58701	1215993365	37	Pediatrics	635027	TRINITY MEDICAL GROUP	1083653752		
61	$3,310	450227012	CHENG	STEPHEN	1031 7TH ST NE		DEVILS LAKE	ND	58301	1053354514	8	Family Practice	76001	THE MERCY HOSPITAL OF DE	1790751170		
28	$3,309	450226909	FLOM	BEAU	801 BROADWAY NORTH		FARGO	ND	58102	1134146095	97	Physician Assistant	7742001	SANFORD BROADWAY CLINIC	1184917924		
33	$3,308	710880821	LANGE	MARSHA	1451 44TH AVE S STE 112D		GRAND FORKS	ND	58201	1699793265	8	Family Practice	5677001	THE KIDNEY AND HYPERTENS	1285742262		
58	$3,303	450321538	PIERCE	TROY	1600 2ND AVE SW STE 19		MINOT	ND	58701	1972521870	40	Hand Surgery	188002	THE BONE & JOINT CENTER,	1750307872		
15	$3,300	450417976	NOFFZE	MICHAEL	300 MAIN AVE STE 201		FARGO	ND	58103	1538147848	19	Oral Surgery	411001	OMS ASSOCIATES	1164631560		
25	$3,300	450226700	TWOGOOD	TODD	300 N 7TH ST		BISMARCK	ND	58501	1013015783	37	Pediatrics	440001	SANFORD MEDICAL CENTER/B	1811941172		
132	$3,299	450425948	NICHOLAS	LANA	HWY 281 N		CANDO	ND	58324	1144255985	35	Chiropractor	398001	TOWNER COUNTY MEDICAL CE	1124041389		
26	$3,298	911770748	LEVITT	HELEN	2400 32ND AVE S		FARGO	ND	58103	1477571040	71	Certified Diabetic Educator	3014	SANFORD SOUTHPOINTE CLIN	1942241351		
86	$3,296	450310462	SAVCENKO	VLADIMIR	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1861471658	30	Radiology	9001	ALTRU HEALTH SYSTEM	1043309552		
12	$3,293	450226909	HOLTE	RALPH	1720 UNIVERSITY DR S		FARGO	ND	58103	1578580437	43	Certified Registered Nurse Anesthetist	7742004	SANFORD SOUTH UNIVERSITY	1184917924		
32	$3,290	261175213	OSTLIE	DANIEL	132 4TH AVE NE		VALLEY CITY	ND	58072	1083632673	96	#N/A	6885024	INNOVIS HEALTH, LLC DBA	1962682617		
187	$3,290	450451059	SMITH	ZACHARY	207 1ST AVE S		NEW ROCKFORD	ND	58356	1194062927	35	Chiropractor	1260001	NICOLAI CHIROPRACTIC CEN	1760606388		
259	$3,290	911770748	NAKASATO	YURI	2400 32ND AVE S		FARGO	ND	58103	1639146855	76	Heumatology	3014	SANFORD SOUTHPOINTE CLIN	1942241351		
27	$3,281	911770748	UNTERSEHER	JEANNE	600 1ST ST SE		MAYVILLE	ND	58257	1932120276	50	Nurse Practitioner	3003	SANFORD MAYVILLE	1942241351		
76	$3,278	450226711	FOLK	CYNTHIA	900 E BROADWAY AVE		BISMARCK	ND	58501	1356678296	50	Nurse Practitioner	501001	ST ALEXIUS MEDICAL CENTE	1205868429		
24	$3,278	450226909	MASHAQI	SAIF	100 4TH ST S		FARGO	ND	58103	1043424633	11	Internal Medicine	7742006	SANFORD PROFESSIONAL BUI	1184917924		
18	$3,272	450226558	BRAAFLAT	TYLER	1 BURDICK EXPRESSWAY W		MINOT	ND	58701	1932415759	43	Certified Registered Nurse Anesthetist	635031	TRINITY MEDICAL GROUP AN	1083653752		
184	$3,269	204713458	KUMMROW	BELINDA	1555 43 ST S SUITE 107		FARGO	ND	58103	1629253018	35	Chiropractor	6817001	FETZER FAMILY CHIROPRACT	1750311940		
191	$3,267	450455627	BIEL-FICEK	MARIPAT	562 1/2 12TH ST W		DICKINSON	ND	58601	1043221880	35	Chiropractor	1053001	FICEK CHIROPRACTIC, PC	1396824017		
47	$3,267	450437648	LELM	JACQUELINE	1237 W DIVIDE AVE STE 5		BISMARCK	ND	58501	1053354662	80	Clinical Social Worker	241001	WEST CENTRAL HUMAN SERVI	1649226713		
105	$3,266	450321020	MELICHER	KEVIN	3902 13TH AVE SW		FARGO	ND	58103	1144257965	41	Optometrist	7916001	EYECARE ASSOCIATES PC	1811077100		
85	$3,261	450310572	MOTACEK	ADAM	300 2ND AVE NE		JAMESTOWN	ND	58401	1568797124	41	Optometrist	349001	LIFETIME VISION SOURCE	1912052234		
54	$3,257	515603600	SCHNEWEIS	CAROL	1407 24TH AVE S STE 530		GRAND FORKS	ND	58201	1477642981	80	Clinical Social Worker	6871001	CAROL SCHNEWEIS, LICSW	1477642981		
9	$3,256	911770748	FABER	KEVIN	904 5TH AVE NE		JAMESTOWN	ND	58401	1720095482	13	Neurology	3005	SANFORD HEALTH JAMESTOWN	1942241351		
169	$3,256	450319218	NELSON	JAY	446 3RD AVE W		DICKINSON	ND	58601	1639149891	41	Optometrist	729001	ADVANCED VISION CENTERS	1710966049		
53	$3,255	450340688	HOULE	CATHERINE	820 2ND AVE W		NEW ENGLAND	ND	58647	1013003755	8	Family Practice	434004	WEST RIVER HEALTH SERVIC	1831286160		
49	$3,251	450253272	SCHATZ	ALICE	511 ELM AVE		LINTON	ND	58552	1275551780	97	Physician Assistant	430001	LINTON MEDICAL CENTER	1568471563		
175	$3,250	411506440	MAYO CLINIC STORE	ENS	200 1ST ST SW STE SL123		ROCHESTER	MN	55905	1417923475	54	Home Medical Equipment	7983001	MAYO CLINIC STORE SIEBEN	1417923475		
17	$3,248	450226700	FONDAHN	DEAN	222 N 7TH ST		BISMARCK	ND	58501	1710074653	34	Urology	4001	SANFORD CLINIC	1811941172		
114	$3,241	450319218	PRZYMUS	DAVID	446 3RD AVE W		DICKINSON	ND	58601	1043489925	41	Optometrist	729001	ADVANCED VISION CENTERS	1710966049		
52	$3,231	263047434	STANGER	CAROLE	1100 19TH AVE N STE L-M		FARGO	ND	58102	1629062138	50	Nurse Practitioner	7174006	7 DAY CLINIC	1841547387		
187	$3,227	273283935	SCHWAB	CHRIS	1033 S WASHINGTON ST		BISMARCK	ND	58504	1750536025	35	Chiropractor	7588001	SCHWAB FAMILY CHIROPRACT	1750536025		
132	$3,227	450310462	SHIMEK	HEATHER	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1447406129	50	Nurse Practitioner	9001	ALTRU HEALTH SYSTEM	1043309552		

45	$3,223	501567490	SWANSON	CYNTHIA	315 11 ST N SUITE E		WAHPETON	ND	58075	1629112800	88	#N/A	7504001	SWANSON COUNSELING	1629112800		
17	$3,222	450226909	RAAD	ROBERT	1720 UNIVERSITY DR S		FARGO	ND	58103	1588874788	5	Anesthesiology (MD)	7742004	SANFORD SOUTH UNIVERSITY	1184917924		
82	$3,215	450310462	LINNEN	KATHERINE	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1023322963	97	Physician Assistant	9001	ALTRU HEALTH SYSTEM	1043309552		
120	$3,205	450425948	ELLENBECKER	PAUL	HWY 281 N		CANDO	ND	58324	1679508089	35	Chiropractor	398001	TOWNER COUNTY MEDICAL CE	1124041389		
53	$3,193	450311334	WANNER	KAY	401 N 9TH ST		BISMARCK	ND	58501	1689619397	71	Certified Diabetic Educator	236001	MID DAKOTA CLINIC	1275587826		
50	$3,192	450310462	DEVINE ROBERTS	JACQUELINE	960 S COLUMBIA RD		GRAND FORKS	ND	58201	1336285931	50	Nurse Practitioner	9028	ALTRU CANCER CENTER	1043309552		
35	$3,189	450226909	VILENSKI	LEONID	801 BROADWAY NORTH		FARGO	ND	58102	1750302097	11	Internal Medicine	7742001	SANFORD BROADWAY CLINIC	1184917924		
17	$3,188	450226909	MOUSSA	ADIB	1720 UNIVERSITY DR S		FARGO	ND	58103	1831366855	5	Anesthesiology (MD)	7742004	SANFORD SOUTH UNIVERSITY	1184917924		
125	$3,186	331029318	JENSEN	BRIAN	401 2ND AVE		ROLETTE	ND	58366	1689927964	97	Physician Assistant	5836002	NORTHLAND COMMUNITY HEAL	1689758039		
71	$3,184	450226711	FINKIELMAN	JAVIER	900 E BROADWAY AVE		BISMARCK	ND	58501	1083651962	11	Internal Medicine	501001	ST ALEXIUS MEDICAL CENTE	1205868429		
56	$3,176	450226558	BARTAULA	RAJIV	1 BURDICK EXPY W		MINOT	ND	58701	1699903534	11	Internal Medicine	635032	TRINITY MEDICAL GROUP	1083653752		
27	$3,175	450226909	HAIDER	NAVEED	801 BROADWAY NORTH		FARGO	ND	58102	1831117480	26	Psychiatry (MD)	7742001	SANFORD BROADWAY CLINIC	1184917924		
162	$3,175	450310462	COOLEY	A. MARVIN	1380 S COLUMBIA RD		GRAND FORKS	ND	58201	1710078720	22	Pathology, Anatomy, Clinical Pathology	9021	ALTRU FAMILY MEDICINE CE	1043309552		
44	$3,174	450226909	GARVEY	CATHERINE	2801 UNIVERSITY DR S		FARGO	ND	58103	1861419723	97	Physician Assistant	7742005	SANFORD 2801 MEDICAL BUI	1184917924		
51	$3,174	450226909	SCHATZ	SARAH	1720 UNIVERSITY DR S		FARGO	ND	58103	1144317744	8	Family Practice	7742004	SANFORD SOUTH UNIVERSITY	1184917924		
252	$3,172	911875071	NOKKEN	BETH	1220 2ND AVE S		MOORHEAD	MN	56560	1326158908	35	Chiropractor	1545001	NOKKEN CHIROPRACTIC CLIN	1164595955		
14	$3,169	450354864	HARVEY AMBULANCE S	CE	318 6TH ST W		HARVEY	ND	58341	1528164068	59	Ambulance Service	1849001	HARVEY AMBULANCE SERVICE	1528164068		
110	$3,169	911770748	REYNOLDS	RYAN	801 BROADWAY NORTH		FARGO	ND	58102	1568662252	30	Radiology	3001	SANFORD BROADWAY CLINIC	1942241351		
33	$3,165	261175213	SAUTER	BRIAN	3000 32ND AVE S		FARGO	ND	58103	1558390294	72	Emergency Medicine	6885030	INNOVIS HEALTH, LLC DBA	1578907655		
47	$3,157	450226558	STRIHA	DESIREE	101 3RD AVE SW		MINOT	ND	58701	1356661474	50	Nurse Practitioner	635027	TRINITY MEDICAL GROUP	1083653752		
13	$3,156	450226558	WILSON	RONI	1 BURDICK EXPRESSWAY W		MINOT	ND	58701	1124127972	43	Certified Registered Nurse Anesthetist	635031	TRINITY MEDICAL GROUP AN	1083653752		
7	$3,155	450226700	MILLER	BRENDA	300 N 7TH ST		BISMARCK	ND	58501	1619089109	8	Family Practice	440001	SANFORD MEDICAL CENTER/B	1811941172		
61	$3,153	261175213	HOLTZ	PAMELA	3000 32ND AVE S		FARGO	ND	58103	1982973251	50	Nurse Practitioner	6885016	ESSENTIA HEALTH HOSPITAL	1215125463		
24	$3,152	450310462	HANKEY	JILL	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1366533374	97	Physician Assistant	9001	ALTRU HEALTH SYSTEM	1043309552		
47	$3,149	450226419	SEILER	HUBERT	800 3RD AVE SW		RUGBY	ND	58368	1124128608	8	Family Practice	18067	HEART OF AMERICA JOHNSON	1578734869		
69	$3,146	450310462	KROGSTAD	MARY BETH	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1972733186	50	Nurse Practitioner	9001	ALTRU HEALTH SYSTEM	1043309552		
62	$3,146	261175213	STEINKE	EMIL	801 BELSLY BLVD S		MOORHEAD	MN	56560	1720018245	8	Family Practice	6885034	INNOVIS HEALTH, LLC DBA	1659617504		
7	$3,145	450226700	FIECHTNER	MARCUS	300 N 7TH ST		BISMARCK	ND	58501	1205859014	4	Otology, Laryngology, Rhinology	440001	SANFORD MEDICAL CENTER/B	1811941172		
33	$3,144	450226909	KOHOUTEK	BRADLEY	100 4TH ST S		FARGO	ND	58103	1649406703	26	Psychiatry (MD)	7742006	SANFORD PROFESSIONAL BUI	1184917924		
14	$3,136	450226909	HILSCHER DECKER	TARA	801 BROADWAY NORTH		FARGO	ND	58102	1962517227	43	Certified Registered Nurse Anesthetist	7742001	SANFORD BROADWAY CLINIC	1184917924		
28	$3,136	450226909	BABU	VARSHA	2400 32ND AVE S		FARGO	ND	58103	1972755452	73	Endocrinology	7742008	SANFORD SOUTHPOINTE CLIN	1184917924		
40	$3,133	450437654	ALLEN-HALVORSON	NATASCHA	113 MAIN AVE E		ROLLA	ND	58367	1588932206	88	#N/A	159002	LAKE REGION HSC/ROLLA OU	1669411930		
55	$3,133	450226700	JOHNSON	CRAIG	300 N 7TH ST		BISMARCK	ND	58501	1720199755	22	Pathology, Anatomy, Clinical Pathology	440001	SANFORD MEDICAL CENTER/B	1811941172		
11	$3,128	450226909	MARSH	TODD	1720 UNIVERSITY DR S		FARGO	ND	58103	1750308383	43	Certified Registered Nurse Anesthetist	7742004	SANFORD SOUTH UNIVERSITY	1184917924		
24	$3,127	450226909	KRUEGER	MAREN	2400 32ND AVE S		FARGO	ND	58103	1952581530	68	Licensed Registered Dietitian	7742008	SANFORD SOUTHPOINTE CLIN	1184917924		
6	$3,122	450226909	HONG	BACK	801 BROADWAY NORTH		FARGO	ND	58102	1497706436	5	Anesthesiology (MD)	7742001	SANFORD BROADWAY CLINIC	1184917924		
11	$3,120	450226909	VANDROVEC	CHAD	1720 UNIVERSITY DR S		FARGO	ND	58103	1790856839	5	Anesthesiology (MD)	7742004	SANFORD SOUTH UNIVERSITY	1184917924		
14	$3,114	261175213	STRASBURG	RYAN	3000 32ND AVE S		FARGO	ND	58103	1376832576	43	Certified Registered Nurse Anesthetist	6885030	INNOVIS HEALTH, LLC DBA	1578907655		
12	$3,111	261484393	LARSON	ANDREA	1400 37TH AVE SW		MINOT	ND	58701	1366470593	64	Audiology	690001	PROFESSIONAL HEARING SER	1649216169		
26	$3,110	450226700	KUMAR	PARAG	300 N 7TH ST		BISMARCK	ND	58501	1780795773	37	Pediatrics	440001	SANFORD MEDICAL CENTER/B	1811941172		
233	$3,104	454293988	STORLIE	TROY	40 4TH ST N		MOORHEAD	MN	56560	1851403802	35	Chiropractor	7830001	STORLIE FAMILY CHIROPRAC	1609141050		
173	$3,103	450424074	WELLS COUNTY DISTR	HE	101 RAILWAY ST S		FESSENDEN	ND	58438	1205931516	60	Public Health or Welfare Agency	4497001	WELLS COUNTY DISTRICT HE	1205931516		
148	$3,099	271819817	DOCKTER	CHRISTOPHE	2553 KIRSTEN LANE SOUTH	SUITE 207	FARGO	ND	58104	1518190651	35	Chiropractor	7545001	VENTURE CHIROPRACTIC	1326370602		
76	$3,099	450309291	SCHAFF	JASON	2200 S WASHINGTON ST		GRAND FORKS	ND	58201	1124283148	41	Optometrist	234001	VALLEY VISION CLINIC LTD	1619168267		
25	$3,098	450226909	GOETZ	JENNIFER	2400 32ND AVE S		FARGO	ND	58103	1760439061	68	Licensed Registered Dietitian	7742008	SANFORD SOUTHPOINTE CLIN	1184917924		
93	$3,093	450226909	GILBERTSON	KIMBERLY	1717 SOUTH UNIVERSITY DR		FARGO	ND	58103	1306863261	41	Optometrist	7742024	SANFORD SOUTH UNIVERSITY	1184917924		
57	$3,085	261175213	FEWLESS	THERESA	3000 32ND AVE S		FARGO	ND	58103	1801189931	97	Physician Assistant	6885016	ESSENTIA HEALTH HOSPITAL	1215125463		
18	$3,079	450375803	HERMAN	ROLLIN	206 5TH AVE SE		DEVILS LAKE	ND	58301	1891707774	42	Dentist	1107001	SMILEQUEST	1578670691		
33	$3,078	450226700	BADAR	MUBASHIR	300 N 7TH ST		BISMARCK	ND	58501	1992041123	11	Internal Medicine	440001	SANFORD MEDICAL CENTER/B	1811941172		
4	$3,075	450226558	BEDELL	TIMOTHY	1 BURDICK EXPY W		MINOT	ND	58701	1356565964	16	Obstet/Gynecology	635032	TRINITY MEDICAL GROUP	1083653752		
91	$3,073	450313085	MITZEL-DUBOIS	AMY	3232 13TH AVE S		FARGO	ND	58103	1144275702	41	Optometrist	562001	PEARLE VISION	1659326205		
30	$3,071	273892374	HUEBSCHWERLEN	STEPHEN	418 E BROADWAY AVE	STE 216	BISMARCK	ND	58501	1528268539	80	Clinical Social Worker	7688001	ALLIANCE MEDIATION & THE	1922304716		
84	$3,068	450226909	HESTBECK	AMY	1720 UNIVERSITY DR S		FARGO	ND	58103	1306137195	50	Nurse Practitioner	7742004	SANFORD SOUTH UNIVERSITY	1184917924		
27	$3,065	450226909	TEHVEN	KATHY	2400 32ND AVE S		FARGO	ND	58103	1215958558	68	Licensed Registered Dietitian	7742008	SANFORD SOUTHPOINTE CLIN	1184917924		
127	$3,064	262443674	KOSTELECKY	CHRISTINA	1428 W VILLARD ST		DICKINSON	ND	58601	1245405018	35	Chiropractor	7146001	WESTERN SKIES CHIROPRACT	1700051588		
77	$3,055	450226909	BLICKENSDERFER	RHONDA	1720 UNIVERSITY DR S		FARGO	ND	58103	1407877749	50	Nurse Practitioner	7742004	SANFORD SOUTH UNIVERSITY	1184917924		
104	$3,052	450382077	CORNER DRUG WAHPET		619 DAKOTA AVE		WAHPETON	ND	58075	1134345457	63	Pharmacy	3119001	CORNER DRUG STORE, INC	1134345457		
35	$3,047	450227311	SCHAFFER	TODD	118 1ST ST S		NEW ROCKFORD	ND	58356	1063499879	8	Family Practice	507002	COMMUNITY HEALTH CLINIC	1801811666		
8	$3,045	450345286	CASSELTON AMBULANC	RV	101 6TH AVE S		CASSELTON	ND	58012	1629072590	59	Ambulance Service	1865001	CASSELTON AMBULANCE SERV	1629072590		
48	$3,043	450437648	MICKELSON	DAVID	1237 W DIVIDE AVE STE 5		BISMARCK	ND	58501	1356387534	83	Licenses Addiction Counselor-Chemical Dependency	241001	WEST CENTRAL HUMAN SERVI	1649226713		
59	$3,039	450226909	SEUNG	CHANTEE	801 BROADWAY NORTH		FARGO	ND	58102	1457615155	50	Nurse Practitioner	7742001	SANFORD BROADWAY CLINIC	1184917924		
202	$3,038	263999960	SWENSON	GARRET	1726 S WASHINGTON ST	STE 79	GRAND FORKS	ND	58201	1285875666	35	Chiropractor	7358001	RENEWED HOPE CHIROPRACTI	1851532949		
14	$3,037	300470787	STANLEY AMBULANCE	ICE	14 1ST ST SE		STANLEY	ND	58784	1174777676	59	Ambulance Service	7377001	STANLEY AMBULANCE SERVIC	1174777676		
47	$3,034	450226909	BHATTA	PUSPA	801 BROADWAY NORTH		FARGO	ND	58102	1922231216	11	Internal Medicine	7742001	SANFORD BROADWAY CLINIC	1184917924		
106	$3,034	800308523	TUFTE	MARK	311 BROADWAY N		FARGO	ND	58102	1669494233	41	Optometrist	7246002	MARK TUFTE OD PC DBA EYE	1750536272		
10	$3,025	450226909	SCHREIBER	CHARLENE	801 BROADWAY NORTH		FARGO	ND	58102	1144242702	43	Certified Registered Nurse Anesthetist	7742001	SANFORD BROADWAY CLINIC	1184917924		

69	$3,022	470757739	GROSS	MARY	683 STATE AVE STE B		DICKINSON	ND	58601	1881918076	67	Occupational Therapy	1985001	OMAHA THERAPY INC. DBA R	1730280371		
37	$3,021	260494989	HANSON	DEBORAH	400 12 AVE NE STE D		DEVILS LAKE	ND	58301	1326144791	80	Clinical Social Worker	6984001	COUNTRY COUNSELING AND C	1326144791		
47	$3,020	450226909	MCGREGOR	MICHAEL	2301 S 25TH ST STE A		FARGO	ND	58103	1740207380	97	Physician Assistant	7742011	SANFORD ORTHOPEDICS SPOR	1184917924		
70	$3,019	273224344	ERIE	JARED	448 21 ST W STE D-1		DICKINSON	ND	58601	1871567826	67	Occupational Therapy	7711001	THERAPY SOLUTIONS	1801195045		
21	$3,017	450461522	SWENSON	RODNEY	1220 MAIN AVE #100		FARGO	ND	58103	1841413507	62	Psychology	5475001	NEUROPSYCHOLOGY ASSOCIAT	1669420923		
8	$3,015	450226700	BRONSON	DAVIS	300 N 7TH ST		BISMARCK	ND	58501	1154367324	24	Plastic Surgery	440001	SANFORD MEDICAL CENTER/B	1811941172		
30	$3,014	450308379	ZIMMERMAN	RODNEY	517 8TH AVE NE		HAZEN	ND	58545	1417149279	8	Family Practice	340004	SAKAKAWEA HAZEN CLINIC	1174597173		
10	$3,014	450226909	WATSON	ERIK	1720 UNIVERSITY DR S		FARGO	ND	58103	1205145794	43	Certified Registered Nurse Anesthetist	7742004	SANFORD SOUTH UNIVERSITY	1184917924		
28	$3,013	450226429	RIDDICK	ROBERT	45 8 ST W		DICKINSON	ND	58601	1093711871	1	General Practice	95007	ST JOSEPHS SURGICAL CARE	1073745279		
16	$3,013	450226711	ST ALEXIUS INDEPEN	DIAGNOSTI	2700 8TH ST NW		MINOT	ND	58703	1295979086	30	Radiology	501016	ST ALEXIUS CLINIC	1205868429		
43	$3,007	450231183	MULU	MENELIK	1213 15TH AVE W		WILLISTON	ND	58801	1144526740	37	Pediatrics	711001	CRAVEN-HAGAN/MERCY MEDIC	1760549000		
152	$2,997	205332108	BEATTIE	BRIAN	2331 TYLER PARKWAY STE 2		BISMARCK	ND	58503	1437197191	41	Optometrist	6900001	EYES ON PARKWAY, INC	1679631477		
109	$2,996	520829280	PLOTNER	KELLE	10 2ND ST W # 3		DICKINSON	ND	58601	1124393863	35	Chiropractor	7877001	PLOTNER CHIROPRACTIC	1124393863		
175	$2,996	502463160	HERRING	RICHARD	12 10TH AVE W		LISBON	ND	58054	1912054065	35	Chiropractor	1208001	HERRING CHIROPRACTIC CLI	1912054065		
4	$2,994	450440576	KHOSLA	SEEMA	4152 30TH AVE S STE 103		FARGO	ND	58104	1659462455	11	Internal Medicine	6236001	PRECISION DIAGNOSTIC SER	1619944253		
7	$2,994	450455462	HUBER-MANSTROM	CHARLOTTE	115 W CENTURY AVE STE B		BISMARCK	ND	58503	1689763922	43	Certified Registered Nurse Anesthetist	6475001	IPA, LLC	1538189907		
44	$2,993	450437653	SLAUGHTER	STACY	1015 S BROADWAY STE 18		MINOT	ND	58701	1356473409	62	Psychology	238001	NORTH CENTRAL HUMAN SERV	1477592533		
105	$2,992	262958645	FINLEY	MATHEW	4040 42ND ST S STE K		FARGO	ND	58104	1952552663	35	Chiropractor	7230001	VERTICAL HEALTH CHIROPRA	1952552663		
30	$2,991	450226700	TELLO-SKJERSETH	CHRISTINA	414 N 7TH ST		BISMARCK	ND	58501	1144480971	30	Radiology	4046	SANFORD SEVENTH AND ROSS	1811941172		
21	$2,986	450226909	MCGREGOR	MICHAEL	2400 32ND AVE S		FARGO	ND	58103	1740207380	97	Physician Assistant	7742008	SANFORD SOUTHPOINTE CLIN	1184917924		
75	$2,985	431996219	HOFF	CANDACE	341 1ST ST E		DICKINSON	ND	58601	1518121615	41	Optometrist	1284002	KING FAMILY EYE CLINIC,	1124200688		
69	$2,982	455373728	PEDERSEN	ANITA	301 12TH ST SE		WATFORD CITY	ND	58854	1790030187	50	Nurse Practitioner	7907001	ANOVA FAMILY HEALTH CENT	1801145206		
32	$2,979	450226558	EVERT	SETH	101 3RD AVE SW		MINOT	ND	58701	1467704486	97	Physician Assistant	635027	TRINITY MEDICAL GROUP	1083653752		
52	$2,976	263047434	STANGER	CAROLE	4622 40TH AVE S		FARGO	ND	58104	1629062138	50	Nurse Practitioner	7174001	7 DAY CLINIC OSGOOD	1619123593		
116	$2,974	261852734	BARTON	DUSTIN	4955 17TH AVE S STE 108		FARGO	ND	58103	1568632347	35	Chiropractor	7169001	CORE HEALTH CHIRO, PA	1144487893		
12	$2,972	450226909	TORPEN	S MICHELLE	801 BROADWAY NORTH		FARGO	ND	58102	1477570919	43	Certified Registered Nurse Anesthetist	7742001	SANFORD BROADWAY CLINIC	1184917924		
32	$2,970	502549288	DASSINGER	GERALD	25 1ST AVE W STE 140		DICKINSON	ND	58601	1588860662	80	Clinical Social Worker	7407001	PRAIRIE HORIZONS	1588860662		
103	$2,970	450226700	HERMANSON	PATRICIA	222 N 7TH ST		BISMARCK	ND	58501	1164528519	50	Nurse Practitioner	4001	SANFORD CLINIC	1811941172		
62	$2,964	450308484	NEELAMEGAM PREMNAT	VIJAY	710 N WELO ST		TIOGA	ND	58852	1285834614	8	Family Practice	327001	TIOGA MEDICAL CENTER	1245296078		
35	$2,958	204129496	SPORBERT	JESSICA	2951 34TH ST S		GRAND FORKS	ND	58201	1013054063	66	Speech Therapy	6775001	LITTLE MIRACLES, INC	1821110982		
55	$2,952	450226909	BREIDENBACH	TERRY	1720 UNIVERSITY DR S		FARGO	ND	58103	1902098031	50	Nurse Practitioner	7742004	SANFORD SOUTH UNIVERSITY	1184917924		
40	$2,946	450226558	GHARBI	SHAZEL	1 BURDICK EXPY W		MINOT	ND	58701	1134449713	11	Internal Medicine	635032	TRINITY MEDICAL GROUP	1083653752		
44	$2,945	450451306	LARSON	TRACY	314 OHMER ST		BOTTINEAU	ND	58318	1033551569	50	Nurse Practitioner	1262001	ST ANDREWS BOTTINEAU CLI	1902803802		
79	$2,945	450278212	KEYCARE MEDICAL		400 BURDICK EXPY E	STE E117	MINOT	ND	58701	1205184256	54	Home Medical Equipment	7995001	KEYCARE MEDICAL	1205184256		
18	$2,943	450226558	DIRI	ERDAL	1321 W DAKOTA PARKWAY		WILLISTON	ND	58801	1245328681	76	Heumatology	635039	TRINITY COMMUNITY CLINIC	1083653752		
15	$2,943	450226909	KHERALLAH	MAZEN	801 BROADWAY NORTH		FARGO	ND	58102	1922025691	11	Internal Medicine	7742001	SANFORD BROADWAY CLINIC	1184917924		
75	$2,942	760746279	KJELSHUS	MEGHAN	2700 8TH ST NW		MINOT	ND	58703	1346520301	65	Physical Therapy	5439001	FIRST CHOICE PHYSICAL TH	1013098797		
43	$2,942	450437652	CARSON	ROBERTA	151 S 4TH ST STE 401		GRAND FORKS	ND	58201	1972546000	80	Clinical Social Worker	242001	NORTHEAST HUMAN SERVICE	1366496341		
143	$2,940	260632409	ANDERSON	JADEAN	4132 30TH AVE S #102		FARGO	ND	58104	1871790832	35	Chiropractor	6996001	ANDERSON FAMILY CHIROPRA	1871790832		
108	$2,940	450311334	KOIVULA	MARK	401 N 9TH ST		BISMARCK	ND	58501	1265660740	50	Nurse Practitioner	236001	MID DAKOTA CLINIC	1275587826		
17	$2,939	450450254	MAUND	MICHELLE	600 N 9TH ST		BISMARCK	ND	58501	1659350437	43	Certified Registered Nurse Anesthetist	1261001	BISMARCK SURGICAL ASSOCI	1487814356		
23	$2,933	450226909	POTTER	MATTHEW	700 1ST AVE S		FARGO	ND	58103	1427327980	14	Neurological Surgery	7742007	SANFORD NEUROSCIENCE CLI	1184917924		
15	$2,932	450226909	VANMATRE	MELISSA	801 BROADWAY NORTH		FARGO	ND	58102	1588974596	43	Certified Registered Nurse Anesthetist	7742001	SANFORD BROADWAY CLINIC	1184917924		
223	$2,927	450226700	ARNESON-THILMONY	DEBRA	715 E BROADWAY AVE		BISMARCK	ND	58501	1568565364	64	Audiology	4050	SANFORD SEVENTH AND BROA	1811941172		
42	$2,926	261175213	MULLALLY	JENNIFER	1702 UNIVERSITY DR S		FARGO	ND	58103	1871814863	37	Pediatrics	6885031	INNOVIS HEALTH, LLC DBA	1255677084		
266	$2,923	450371260	WEISS	JOEL	1360 10TH ST N		FARGO	ND	58102	1174524318	35	Chiropractor	557001	WEISS CHIROPRACTIC CLINI	1841336930		
91	$2,916	450340688	WILLOUGHBY	BRIAN	420 PACIFIC AVE		MOTT	ND	58646	1801981451	11	Internal Medicine	434003	WEST RIVER HEALTH SERVIC	1942398508		
46	$2,915	870694180	MURILLO	FLORA	701 3RD STREET NW		JAMESTOWN	ND	58401	1245499813	66	Speech Therapy	5919001	ANNE CARLSEN CENTER	1598930109		
146	$2,905	450374878	KELLER	JULIE	922 LINCOLN AVE		HARVEY	ND	58341	1114095064	97	Physician Assistant	113001	CENTRAL DAKOTA FAMILY PH	1720156664		
107	$2,896	450226700	WOODROW	PETER	222 N 7TH ST		BISMARCK	ND	58501	1174621858	16	Obstet/Gynecology	4001	SANFORD CLINIC	1811941172		
216	$2,890	202426242	LANGDON COMMUNITY		805 3RD ST		LANGDON	ND	58249	1235177221	54	Home Medical Equipment	6651001	LANGDON COMMUNITY DRUG	1235177221		
44	$2,889	450226711	MADLER	BILLIE	900 E BROADWAY AVE		BISMARCK	ND	58501	1427192111	50	Nurse Practitioner	459001	ST ALEXIUS MEDICAL CENTE	1306832654		
36	$2,888	450226429	STEWART	JEANNE	30 W 7TH ST		DICKINSON	ND	58601	1871574244	16	Obstet/Gynecology	95008	ST JOSEPHS WOMENS CLINIC	1730464108		
44	$2,887	450226711	WILLIS	KARIN	900 E BROADWAY AVE		BISMARCK	ND	58501	1881873776	1	General Practice	501001	ST ALEXIUS MEDICAL CENTE	1205868429		
14	$2,886	261175213	LARSON	TARA	3000 32ND AVE S		FARGO	ND	58103	1184914160	43	Certified Registered Nurse Anesthetist	6885030	INNOVIS HEALTH, LLC DBA	1578907655		
22	$2,882	262417959	SMITH	KELLY	1308 23RD ST S STE G		FARGO	ND	58103	1376896803	62	Psychology	7036001	BENSON PSYCHOLOGICAL SER	1477709574		
62	$2,880	450226429	NESS	DAVID	30 7TH ST W		DICKINSON	ND	58601	1700012739	64	Audiology	95001	ST JOSEPHS HOSPITAL AND	1992947956		
22	$2,879	450226700	WISEMAN	AMBER	222 N 7TH ST		BISMARCK	ND	58501	1952346678	97	Physician Assistant	4001	SANFORD CLINIC	1811941172		
47	$2,878	450321538	LAUMB	KELLIE	310 N 9TH ST		BISMARCK	ND	58501	1982683215	97	Physician Assistant	188001	THE BONE & JOINT CENTER,	1750307872		
192	$2,878	412139234	LBG PHARMACY DBA T	EDICINE SH	116 2 AVE NW		MANDAN	ND	58554	1265504054	54	Home Medical Equipment	6403001	LBG PHARMACY DBA THE MED	1265504054		
12	$2,876	450226700	MATTHEWS	CHRISTIAN	300 N 7TH ST		BISMARCK	ND	58501	1982620282	43	Certified Registered Nurse Anesthetist	440001	SANFORD MEDICAL CENTER/B	1811941172		
45	$2,875	261175213	BAUGH	JOHN	3000 32ND AVE S		FARGO	ND	58103	1447297239	8	Family Practice	6885030	INNOVIS HEALTH, LLC DBA	1578907655		
50	$2,874	450340688	SHEFFIELD	JENNIFER	420 PACIFIC AVE		MOTT	ND	58646	1497987812	1	General Practice	434003	WEST RIVER HEALTH SERVIC	1942398508		
105	$2,872	450226558	ULVEN	CHERYL	604 1ST STREET NORTH		NEW TOWN	ND	58763	1467527820	97	Physician Assistant	635030	TRINITY COMMUNITY CLINIC	1083653752		
21	$2,864	450226909	ROERIG	DEBORAH	100 4TH ST S		FARGO	ND	58103	1346262912	44	Psychiatric Nurse	7742006	SANFORD PROFESSIONAL BUI	1184917924		
11	$2,864	261175213	HAYES	ANGELA	1702 UNIVERSITY DR S		FARGO	ND	58103	1669412474	43	Certified Registered Nurse Anesthetist	6885031	INNOVIS HEALTH, LLC DBA	1255677084		

94	$2,862	450226558	GRUBB	M	400 BURDICK EXPY E		MINOT	ND	58701	1912094947	7	Dermatology	635006	TRINITY MEDICAL GROUP	1083653752		
9	$2,859	450226909	CARSON	JANINE	801 BROADWAY NORTH		FARGO	ND	58102	1295752293	30	Radiology	7742001	SANFORD BROADWAY CLINIC	1184917924		
47	$2,858	450226558	PADGETT	DANIAL	1 BURDICK EXPY W		MINOT	ND	58701	1013124981	8	Family Practice	635032	TRINITY MEDICAL GROUP	1083653752		
147	$2,854	450440755	CARRINGTON DRUG CO		415 MAIN ST		CARRINGTON	ND	58421	1275569790	54	Home Medical Equipment	1974001	CARRINGTON DRUG	1275569790		
70	$2,853	450310462	DURRANI	QASIM	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1336462886	11	Internal Medicine	9001	ALTRU HEALTH SYSTEM	1043309552		
184	$2,853	450430566	LINSON PHARMACY		3175 25TH ST S		FARGO	ND	58103	1386664829	63	Pharmacy	4472001	LINSON PHARMACY	1386664829		
34	$2,848	450226419	SCHONEBERG	STEVEN	800 3RD AVE SW		RUGBY	ND	58368	1841398666	8	Family Practice	18067	HEART OF AMERICA JOHNSON	1578734869		
204	$2,847	450365419	DAVIS	KEITH	722 FRONT ST		CASSELTON	ND	58012	1699875419	35	Chiropractor	1071001	DAVIS CHIROPRACTIC CLINI	1699875419		
47	$2,846	450222079	DUPPONG	LINDA	602 ASH AVE E		GLEN ULLIN	ND	58631	1053399436	97	Physician Assistant	6043003	JACOBSON MEMORIAL HOSPIT	1003929944		
35	$2,844	450413089	FORTNEY	AARON	3119 N 14TH ST		BISMARCK	ND	58503	1447297189	18	Opthalmology	278002	DAKOTA EYE INSTITUTE	1962449835		
28	$2,842	450226423	ELBERT	REBECCA	1201 25TH ST S		FARGO	ND	58103	1235156191	44	Psychiatric Nurse	283001	THE VILLAGE FAMILY SERVI	1568492353		
15	$2,837	450340688	SCHWINDT	BRIAN	1000 HIGHWAY 12		HETTINGER	ND	58639	1841389095	43	Certified Registered Nurse Anesthetist	367001	WEST RIVER HEALTH SERVIC	1174606271		
62	$2,837	450447670	NARDACCI	TARA	615 6TH ST SE		STANLEY	ND	58784	1972734499	50	Nurse Practitioner	473001	MOUNTRAIL COUNTY MEDICAL	1831289362		
49	$2,836	273981362	HAUG	MARTIN	512 MAIN ST		WILLISTON	ND	58801	1639139405	65	Physical Therapy	7662001	ELITE HEALTH & FITNESS	1841594900		
28	$2,834	501904772	HOWERY-SIERCKS	LAURA	701 100TH ST NW		SOURIS	ND	58783	1134217748	80	Clinical Social Worker	7142001	FAMILY MENTAL HEALTH CLI	1134217748		
25	$2,829	450226558	JETHWA	RATILAL	1 BURDICK EXPY W		MINOT	ND	58701	1366515652	72	Emergency Medicine	635032	TRINITY MEDICAL GROUP	1083653752		
33	$2,829	450226909	HERRICK	KELSEY	1717 SOUTH UNIVERSITY DR		FARGO	ND	58103	1215211750	68	Licensed Registered Dietitian	7742027	SANFORD 1717 MEDICAL BUI	1184917924		
256	$2,827	273844177	HEIM	HEIDI	102 2ND AVE SW		JAMESTOWN	ND	58401	1053366153	35	Chiropractor	629001	SCHMIDT CHIROPRACTIC CLI	1780622191		
60	$2,823	263047434	STANGER	CAROLE	1517 32ND AVE S		FARGO	ND	58103	1629062138	50	Nurse Practitioner	7174002	7 DAY CLINIC SOUTH FARGO	1851547160		
145	$2,823	452097160	OLLERMAN INC DBA M	INE SHOPPE	1571 W VILLARD #1		DICKINSON	ND	58601	1043504574	54	Home Medical Equipment	7820001	OLLERMAN INC DBA MEDICIN	1043504574		
18	$2,822	450226909	MCNEALLY	SHAWN	1720 UNIVERSITY DR S		FARGO	ND	58103	1689691222	43	Certified Registered Nurse Anesthetist	7742004	SANFORD SOUTH UNIVERSITY	1184917924		
66	$2,820	450310462	DORMAN	RONALD	400 S MINNESOTA ST		CROOKSTON	MN	56716	1750472767	8	Family Practice	406001	ALTRU CROOKSTON	1760494330		
23	$2,815	450437648	HAY	LISA	1237 W DIVIDE AVE STE 5		BISMARCK	ND	58501	1356383574	62	Psychology	241001	WEST CENTRAL HUMAN SERVI	1649226713		
11	$2,812	450231183	CEDERSTROM	LUANN	1301 15TH AVE W		WILLISTON	ND	58801	1184712515	43	Certified Registered Nurse Anesthetist	98001	MERCY MEDICAL CENTER DBA	1700990041		
69	$2,811	870694180	FUGLEBERG	M BETH	701 3RD STREET NW		JAMESTOWN	ND	58401	1083748750	67	Occupational Therapy	5919001	ANNE CARLSEN CENTER	1598930109		
76	$2,809	911770748	LONG	LILLIAN	420 S 7TH ST		OAKES	ND	58474	1699086124	50	Nurse Practitioner	3068	SANFORD HEALTH OAKES CLI	1942241351		
68	$2,807	450226558	WRIGHT	SHARON	400 BURDICK EXPY E		MINOT	ND	58701	1407174279	50	Nurse Practitioner	635006	TRINITY MEDICAL GROUP	1083653752		
147	$2,807	201398783	KELLY	MICHAEL	1415 2ND AVE SW		MINOT	ND	58701	1588635783	35	Chiropractor	6362001	KELLY CHIROPRACTIC, PC	1306944202		
17	$2,805	450226909	HOGANSON	TAMMY	801 BROADWAY NORTH		FARGO	ND	58102	1669499521	43	Certified Registered Nurse Anesthetist	7742001	SANFORD BROADWAY CLINIC	1184917924		
197	$2,799	450374378	CLARK	RAYMOND	1306 23RD ST S		FARGO	ND	58103	1619075298	35	Chiropractor	1596001	CLARK, RAYMOND, DC	1619075298		
30	$2,798	450226909	TWEDT	HEIDI	4000 28TH AVE S		MOORHEAD	MN	56560	1861414435	11	Internal Medicine	7742014	SANFORD MOORHEAD CLINIC	1184917924		
2	$2,797	208056374	KUENNEN	TIMOTHY	1500 INTERCHANGE AVE	STE 100	BISMARCK	ND	58501	1639251143	43	Certified Registered Nurse Anesthetist	1079002	BECKER PLASTIC SURGERY C	1205082948		
63	$2,797	450231183	MCCOY	AUSTIN	1213 15TH AVE W		WILLISTON	ND	58801	1508092933	11	Internal Medicine	711001	CRAVEN-HAGAN/MERCY MEDIC	1760549000		
34	$2,795	450226419	SEILER	HUBERT	301 ROOSEVELT AVE		MADDOCK	ND	58348	1124128608	8	Family Practice	18209	HEART OF AMERICA JOHNSON	1740451038		
43	$2,794	411687554	ADLER	RICHARD	1104 7TH AVE S		MOORHEAD	MN	56563	1336231943	66	Speech Therapy	1430001	MSUM SPEECH, LANGUAGE &	1215000963		
17	$2,794	450226909	TORPEN	S MICHELLE	1720 UNIVERSITY DR S		FARGO	ND	58103	1477570919	43	Certified Registered Nurse Anesthetist	7742004	SANFORD SOUTH UNIVERSITY	1184917924		
27	$2,788	450226909	NAGPAL	AVISH	801 BROADWAY NORTH		FARGO	ND	58102	1922250273	74	Infectious Diseases	7742001	SANFORD BROADWAY CLINIC	1184917924		
168	$2,788	450373338	WALLS MEDICINE CEN		708 S WASHINGTON ST		GRAND FORKS	ND	58201	1407946338	54	Home Medical Equipment	3168001	WALLS MEDICINE CENTER	1407946338		
38	$2,786	450226429	SWANSON	KAREN	30 7TH ST W		DICKINSON	ND	58601	1194005553	50	Nurse Practitioner	95001	ST JOSEPHS HOSPITAL AND	1992947956		
35	$2,783	450226909	BURD	RONALD	100 4TH ST S		FARGO	ND	58103	1750308755	26	Psychiatry (MD)	7742006	SANFORD PROFESSIONAL BUI	1184917924		
67	$2,777	450340688	HOULE	CATHERINE	608 HIGHWAY 12 W		BOWMAN	ND	58623	1013003755	8	Family Practice	434006	WEST RIVER HEALTH SERVIC	1497856025		
4	$2,772	237434794	ASHLEY AMBULANCE S	CE	612 CENTER AVE N		ASHLEY	ND	58413	1104931815	59	Ambulance Service	2885001	ASHLEY AMBULANCE SERVICE	1104931815		
14	$2,769	450226558	HILL	KENNETH	1 BURDICK EXPRESSWAY W		MINOT	ND	58701	1629020953	5	Anesthesiology (MD)	635031	TRINITY MEDICAL GROUP AN	1083653752		
47	$2,768	450228899	PROCHASKA	VERN	600 1ST STREET SE		MAYVILLE	ND	58257	1891845947	20	Orthopedic Surgery	3076	SANFORD MAYVILLE	1366478760		
47	$2,765	450226558	HO	WARREN	20 BURDICK EXPRESSWAY W		MINOT	ND	58701	1073721965	39	Nephrology	635029	TRINITY MEDICAL GROUP	1083653752		
107	$2,765	450377245	COLBY	DAVID	28 2ND ST NW		KENMARE	ND	58746	1649243288	41	Optometrist	1619001	COLBY, DAVID, OD	1649243288		
80	$2,760	261175213	MEYER	LANA	132 4TH AVE NE		VALLEY CITY	ND	58072	1851520647	50	Nurse Practitioner	6885024	INNOVIS HEALTH, LLC DBA	1962682617		
34	$2,757	450226700	NORDMEYER	COURTNEY	102 MANDAN AVE		MANDAN	ND	58554	1760814222	50	Nurse Practitioner	4057	SANFORD EAST MANDAN CLIN	1811941172		
14	$2,756	450226909	HASS	BRIAN	1720 UNIVERSITY DR S		FARGO	ND	58103	1770510414	5	Anesthesiology (MD)	7742004	SANFORD SOUTH UNIVERSITY	1184917924		
12	$2,755	450226909	DANIELS	STEVEN	1720 UNIVERSITY DR S		FARGO	ND	58103	1710905450	5	Anesthesiology (MD)	7742004	SANFORD SOUTH UNIVERSITY	1184917924		
42	$2,754	450226700	KLEIN	DALE	910 18TH ST NW		MANDAN	ND	58554	1215048277	8	Family Practice	4060	SANFORD NORTH MANDAN CLI	1811941172		
109	$2,753	450369269	RATH	GEOFFREY	409 MAIN AVE		OAKES	ND	58474	1821136524	41	Optometrist	1586001	RATH, GEOFFREY, OD	1205093416		
20	$2,749	450226909	LEON	ZELKO	100 4TH ST S		FARGO	ND	58103	1720005499	26	Psychiatry (MD)	7742006	SANFORD PROFESSIONAL BUI	1184917924		
41	$2,745	450226909	REIL	TODD	801 BROADWAY NORTH		FARGO	ND	58102	1154355311	23	Peripheral Vascular Diseases or Surgery	7742001	SANFORD BROADWAY CLINIC	1184917924		
49	$2,744	450311334	WANNER	KAY	401 N 9TH ST		BISMARCK	ND	58501	1689619397	68	Licensed Registered Dietitian	236001	MID DAKOTA CLINIC	1275587826		
27	$2,743	134229257	LARSON	DORRANCE	415 1/2 NEBRASKA AVE		BRECKENRIDGE	MN	56520	1508174830	62	Psychology	5824001	SOLUTIONS COUNSELING SER	1578614038		
3	$2,743	450453902	SHEYENNE HEARING S	CE	205 SHEYENNE ST #2		WEST FARGO	ND	58078	1427265990	54	Home Medical Equipment	2024001	SHEYENNE HEARING SERVICE	1427265990		
23	$2,741	450437648	CAPAN	MICHAEL	1237 W DIVIDE AVE STE 5		BISMARCK	ND	58501	1689728818	26	Psychiatry (MD)	241001	WEST CENTRAL HUMAN SERVI	1649226713		
9	$2,741	261175213	CALLAHAN	JOSEPH	3000 32ND AVE S		FARGO	ND	58103	1962446534	43	Certified Registered Nurse Anesthetist	6885030	INNOVIS HEALTH, LLC DBA	1578907655		
118	$2,733	460942340	PFLIGER	DUANE	706 8TH AVE NE		HAZEN	ND	58545	1205924891	35	Chiropractor	7939001	PFLIGER CHIROPRACTIC CLI	1962746776		
159	$2,731	461209870	FISCHER	CHRISTINE	226 14 ST W		WILLISTON	ND	58801	1306156195	35	Chiropractor	8003001	FISCHER FAMILY CHIROPRAC	1861702581		
24	$2,723	450226558	AUCH	ALLISON	20 BURDICK EXPRESSWAY W		MINOT	ND	58701	1295968022	50	Nurse Practitioner	635029	TRINITY MEDICAL GROUP	1083653752		
143	$2,719	456002491	HEINLEY	TIMOTHY	MCCANNEL HALL ROOM 100	2891 2ND AVE I	GRAND FORKS	ND	58202	1629037031	8	Family Practice	180001	UND STUDENT HEALTH SERVI	1922067305		
50	$2,718	450227012	MCINTOSH	JOSEPHINE	1031 7TH ST NE		DEVILS LAKE	ND	58301	1881797462	50	Nurse Practitioner	76001	THE MERCY HOSPITAL OF DE	1790751170		
30	$2,717	450226700	AMUNDSON	DONNA	515 EAST BROADWAY AVE		BISMARCK	ND	58501	1972691236	71	Certified Diabetic Educator	4066	SANFORD 5TH & BROADWAY C	1811941172		
118	$2,714	450358677	SCHMIDT	TERRY	107 6TH AVE NW		MANDAN	ND	58554	1407876634	41	Optometrist	1626001	VISION SOURCE MANDAN	1194714212		

107	$2,708	271711457	GRUNEWALD	CLAIRE	3242 20TH ST S		FARGO	ND	58104	1245525682	65	Physical Therapy	7584001	BODYWORKS PHYSICAL THERA	1487960522		
36	$2,704	450226700	BAUTISTA-AZORES	RICHELLE	300 N 7TH ST		BISMARCK	ND	58501	1619943024	37	Pediatrics	440001	SANFORD MEDICAL CENTER/B	1811941172		
134	$2,704	113686120	SAILER	DEBRA	1312 HIGHWAY 49 N		BEULAH	ND	58523	1447548623	50	Nurse Practitioner	6103001	COAL COUNTRY COMMUNITY H	1942288329		
37	$2,702	450440929	HALL	SHELLY	135 W VILLARD ST		DICKINSON	ND	58601	1336115435	62	Psychology	665001	WESTWIND CONSULTING CENT	1619943776		
37	$2,700	450310462	PASSE	THEODORE	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1881673218	30	Radiology	9001	ALTRU HEALTH SYSTEM	1043309552		
15	$2,697	450226909	GREENE	SUSAN	801 BROADWAY NORTH		FARGO	ND	58102	1730107384	43	Certified Registered Nurse Anesthetist	7742001	SANFORD BROADWAY CLINIC	1184917924		
4	$2,690	450455987	POWERS LAKE AMBULA		RAILROAD AVE N		POWERS LAKE	ND	58773	1952481822	59	Ambulance Service	1948001	POWERS LAKE AMBULANCE	1952481822		
11	$2,683	261175213	KREMER	RANDALL	1702 UNIVERSITY DR S		FARGO	ND	58103	1538109335	43	Certified Registered Nurse Anesthetist	6885031	INNOVIS HEALTH, LLC DBA	1255677084		
18	$2,679	450228899	STOVER	DAVID	600 1ST STREET SE		MAYVILLE	ND	58257	1932121597	2	General Surgery	3076	SANFORD MAYVILLE	1366478760		
14	$2,677	450228899	FABIAN	MATTHEW	600 1ST STREET SE		MAYVILLE	ND	58257	1497928972	2	General Surgery	3076	SANFORD MAYVILLE	1366478760		
62	$2,672	261175213	ISAAK	CHRISTINE	1702 UNIVERSITY DR S		FARGO	ND	58103	1417235466	65	Physical Therapy	6885031	INNOVIS HEALTH, LLC DBA	1255677084		
52	$2,671	450310462	STREITZ	SUSAN	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1750584850	68	Licensed Registered Dietitian	9001	ALTRU HEALTH SYSTEM	1043309552		
55	$2,668	861123162	TORSKE	BRIAN	310 N 10TH ST		BISMARCK	ND	58501	1558591131	50	Nurse Practitioner	6459001	ST ALEXIUS HEART & LUNG	1194823021		
130	$2,665	450311586	HAGEN	N BOYD	115 SOUTH STREET		MICHIGAN	ND	58259	1518049931	1	General Practice	1574001	HAGEN, BOYD, MD DBA MICH	1518049931		
11	$2,661	450397005	ANDERSON	JOHN	3425 S WASHINGTON		GRAND FORKS	ND	58201	1992885602	42	Dentist	7273001	ANDERSON, JOHN, DDS	1992885602		
35	$2,658	450226909	HARRY	ERIC	2301 S 25TH ST STE A		FARGO	ND	58103	1861478745	97	Physician Assistant	7742011	SANFORD ORTHOPEDICS SPOR	1184917924		
29	$2,655	450231675	CHAPEL	DEAN	1200 N 7TH ST		OAKES	ND	58474	1215981725	97	Physician Assistant	47001	OAKES COMMUNITY HOSPITAL	1477724433		
14	$2,654	450226909	DECOCK	CHRISTOPHE	801 BROADWAY NORTH		FARGO	ND	58102	1720252216	37	Pediatrics	7742001	SANFORD BROADWAY CLINIC	1184917924		
31	$2,652	450226909	MCCANN	MICHELLE	801 BROADWAY NORTH		FARGO	ND	58102	1841452992	16	Obstet/Gynecology	7742001	SANFORD BROADWAY CLINIC	1184917924		
182	$2,650	450410216	BRUNELLE	PATRICK	3101 N 11TH ST STE 2		BISMARCK	ND	58503	1528187994	63	Pharmacy	5541002	GATEWAY PHARMACY NORTH	1447356399		
140	$2,648	263101922	HANSON	MATTHEW	1350 20TH AVE SW		MINOT	ND	58701	1144450263	35	Chiropractor	7196001	STACI BORKHUIS CHIROPRAC	1356599427		
49	$2,641	261175213	WELK	NIKKI	3000 32ND AVE S		FARGO	ND	58103	1427310614	97	Physician Assistant	6885016	ESSENTIA HEALTH HOSPITAL	1215125463		
86	$2,641	456002491	WILLIS	KARIN	549 AIRPORT RD		BISMARCK	ND	58504	1881873776	1	General Practice	165001	CUSTER FAMILY PLANNING	1861500415		
34	$2,640	450226429	HOFFMAN	CARA	30 W 7TH ST		DICKINSON	ND	58601	1033222534	16	Obstet/Gynecology	95008	ST JOSEPHS WOMENS CLINIC	1730464108		
31	$2,639	450226909	MEIER	NICOLE	2301 S 25TH ST STE A		FARGO	ND	58103	1801104039	97	Physician Assistant	7742011	SANFORD ORTHOPEDICS SPOR	1184917924		
8	$2,637	911770748	STASKO	ANDREW	520 CHAUTAUQUA BLVD		VALLEY CITY	ND	58072	1265516439	2	General Surgery	3002	SANFORD HEALTH VALLEY CI	1942241351		
30	$2,628	450422944	CRAGO	CHARLES	4344 20TH AVE S STE 2		FARGO	ND	58103	1629147723	19	Oral Surgery	455002	FACE & JAW SURGERY CENTE	1295804300		
70	$2,627	450399320	HELMERS	JOHN	113 3RD AVE NW		MANDAN	ND	58554	1740388941	41	Optometrist	1169001	EYECARE PROFESSIONALS	1508964867		
8	$2,626	456002064	ELLENDALE AMBULANC		51 3RD AVE S		ELLENDALE	ND	58436	1609926013	59	Ambulance Service	2955001	ELLENDALE AMBULANCE	1609926013		
39	$2,626	450227752	HARCHENKO	VERN	437 3RD AVE SE		GARRISON	ND	58540	1659328722	8	Family Practice	432001	GARRISON FAMILY CLINIC	1952381873		
79	$2,610	911770748	HALLANGER-JOHNSON	JULIE	2400 32ND AVE S		FARGO	ND	58103	1417921677	73	Endocrinology	3014	SANFORD SOUTHPOINTE CLIN	1942241351		
44	$2,608	450425948	HELD	SAMUEL	HWY 281 N		CANDO	ND	58324	1740575000	50	Nurse Practitioner	398001	TOWNER COUNTY MEDICAL CE	1124041389		
79	$2,604	680601122	KIECKER	SAMANTHA	1207 PRAIRIE PKWY		WEST FARGO	ND	58078	1811265903	35	Chiropractor	1001001	THE CLINIC: FHSC, PC	1023286614		
32	$2,603	911770748	CHAITHONGDI	NIYUTCHAI	2400 32ND AVE S		FARGO	ND	58103	1952502700	73	Endocrinology	3014	SANFORD SOUTHPOINTE CLIN	1942241351		
33	$2,601	450226909	TUFTY	GEOFFREY	1717 SOUTH UNIVERSITY DR		FARGO	ND	58103	1104886654	18	Opthalmology	7742024	SANFORD SOUTH UNIVERSITY	1184917924		
32	$2,599	261175213	MATTHEES	DONALD	1702 UNIVERSITY DR S		FARGO	ND	58103	1699706358	11	Internal Medicine	6885031	INNOVIS HEALTH, LLC DBA	1255677084		
153	$2,599	450425464	SYVRUD	RYAN	825 25TH ST S STE C		FARGO	ND	58103	1609977313	35	Chiropractor	1175001	SYVRUD CHIROPRACTIC CLIN	1518287101		
33	$2,595	450226909	WILKE	RUSSELL	4000 28TH AVE S		MOORHEAD	MN	56560	1811007966	11	Internal Medicine	7742014	SANFORD MOORHEAD CLINIC	1184917924		
23	$2,592	262417959	STONE	EILEEN	1308 23RD ST S STE G		FARGO	ND	58103	1114949773	62	Psychology	7036001	BENSON PSYCHOLOGICAL SER	1477709574		
25	$2,591	450226909	MCGRANN	PAMELA	801 BROADWAY NORTH		FARGO	ND	58102	1356311898	52	Medical Supply Co with Prosthetist	7742001	SANFORD BROADWAY CLINIC	1184917924		
42	$2,591	450311334	SCHINDLER	KAREN	401 N 9TH ST		BISMARCK	ND	58501	1245275957	71	Certified Diabetic Educator	236001	MID DAKOTA CLINIC	1275587826		
37	$2,591	450451306	KIHLE	KENNETH	314 OHMER ST		BOTTINEAU	ND	58318	1477660082	1	General Practice	1262001	ST ANDREWS BOTTINEAU CLI	1902803802		
76	$2,589	911748705	SOUTHEAST DAKOTA P	ACIES, INC	407 MAIN ST		LISBON	ND	58054	1265535389	63	Pharmacy	5530001	SOUTHEAST DAKOTA PHARMAC	1265535389		
14	$2,588	450228899	GARCIA	LUIS	600 1ST STREET SE		MAYVILLE	ND	58257	1104844752	2	General Surgery	3076	SANFORD MAYVILLE	1366478760		
49	$2,588	450226909	DAMODARAN NAIR	HARIKRISHN	801 BROADWAY NORTH		FARGO	ND	58102	1871608125	6	Cardivascular Disease	7742001	SANFORD BROADWAY CLINIC	1184917924		
27	$2,586	450226558	LEIER	KRISTY	1 BURDICK EXPY W		MINOT	ND	58701	1093028334	50	Nurse Practitioner	635032	TRINITY MEDICAL GROUP	1083653752		
4	$2,583	450417647	WILTON AMBULANCE S	CE	117 DAKOTA AVE		WILTON	ND	58579	1255410841	59	Ambulance Service	3158001	WILTON AMBULANCE SERVICE	1255410841		
5	$2,582	450226700	TELLO	FRANCISCO	300 N 7TH ST		BISMARCK	ND	58501	1376641035	48	Podiatry, Surgical chiropody	440001	SANFORD MEDICAL CENTER/B	1811941172		
12	$2,582	450226909	BERNDT	STEVEN	1720 UNIVERSITY DR S		FARGO	ND	58103	1205854932	5	Anesthesiology (MD)	7742004	SANFORD SOUTH UNIVERSITY	1184917924		
16	$2,578	450226909	CHEMITI	GOPAL	2801 UNIVERSITY DRIVE S		FARGO	ND	58103	1740207745	39	Nephrology	7742025	SANFORD DIALYSIS FARGO	1821154253		
40	$2,576	261175213	KAUFFMAN	RUSSELL	3000 32ND AVE S		FARGO	ND	58103	1669629549	97	Physician Assistant	6885030	INNOVIS HEALTH, LLC DBA	1578907655		
172	$2,575	201708018	PARTNER MEDICAL		3138 S MINNESOTA AVE		SIOUX FALLS	SD	57105	1922188846	54	Home Medical Equipment	7128001	PARTNER MEDICAL	1922188846		
47	$2,574	367843935	CAVALLI	KRISTINA	1407 24TH AVE S #217		GRAND FORKS	ND	58201	1912092263	80	Clinical Social Worker	6876001	CAVALLI KRISTINA, LICSW	1912092263		
35	$2,573	450437648	KITZAN	JUSTUN	1237 W DIVIDE AVE STE 5		BISMARCK	ND	58501	1124307285	83	Licenses Addiction Counselor-Chemical Dependency	241001	WEST CENTRAL HUMAN SERVI	1649226713		
13	$2,571	450226909	UNDERDAHL	TODD	1720 UNIVERSITY DR S		FARGO	ND	58103	1023039369	43	Certified Registered Nurse Anesthetist	7742004	SANFORD SOUTH UNIVERSITY	1184917924		
6	$2,570	911770748	KEIM	JEFFREY	2801 UNIVERSITY DR S		FARGO	ND	58103	1639259310	24	Plastic Surgery	3067	SANFORD 2801 MEDICAL BUI	1942241351		
255	$2,568	911768295	BLANCHARD	DARREN	100 DIVISION AVE		CAVALIER	ND	58220	1841372794	35	Chiropractor	6428001	BLANCHARD'S CHIROPRACTIC	1841372794		
25	$2,564	450226909	ALLICK	ALBERT	100 4TH ST S		FARGO	ND	58103	1467534669	26	Psychiatry (MD)	7742006	SANFORD PROFESSIONAL BUI	1184917924		
33	$2,557	450425948	COX	AMY	HWY 281 N		CANDO	ND	58324	1609803394	50	Nurse Practitioner	398001	TOWNER COUNTY MEDICAL CE	1124041389		
93	$2,557	202032920	PICKEN	JACE	315 11TH ST N STE A		WAHPETON	ND	58075	1194755249	41	Optometrist	6508001	PRAIRIE VISION CENTER PC	1952383713		
24	$2,555	264314533	METCALFE	WILLIAM	510 4TH ST S		FARGO	ND	58103	1396831509	80	Clinical Social Worker	7444001	PSJ ACQUISITION LLC	1679709802		
43	$2,549	450231183	NIELSEN	A MARC	1213 15TH AVE W		WILLISTON	ND	58801	1063430122	8	Family Practice	711001	CRAVEN-HAGAN/MERCY MEDIC	1760549000		
36	$2,546	450226909	TALHA	MUHAMMAD	801 BROADWAY NORTH		FARGO	ND	58102	1376769851	11	Internal Medicine	7742001	SANFORD BROADWAY CLINIC	1184917924		
210	$2,541	411417967	SCHULTE	ROBERT	2800 S UNIVERSITY DR		FARGO	ND	58103	1922182021	35	Chiropractor	1158001	DR. ROBERT J. SCHULTE, J	1922182021		
56	$2,539	450340688	THORNGREN	FRANK	608 HIGHWAY 12 W		BOWMAN	ND	58623	1386738730	8	Family Practice	434006	WEST RIVER HEALTH SERVIC	1497856025		
4	$2,535	311189447	MEDINA AMBULANCE S	CE	107 COLLEGE ST SW		MEDINA	ND	58467	1851439939	59	Ambulance Service	1873001	MEDINA AMBULANCE SERVICE	1851439939		

91	$2,534	450278212	KEYCARE PHARMACY		400 BURDICK EXPY E	STE 201	MINOT	ND	58701	1093764599	54	Home Medical Equipment	7100001	KEYCARE PHARMACY	1093764599		
16	$2,532	450226558	STOCK	TERRY	1 BURDICK EXPRESSWAY W		MINOT	ND	58701	1093889479	43	Certified Registered Nurse Anesthetist	635031	TRINITY MEDICAL GROUP AN	1083653752		
31	$2,532	452512977	JENSEN	KAMA	26 ROBERTS ST STE 114		FARGO	ND	58102	1982927851	88	#N/A	7535001	CONSCIOUS LIVING COUNSEL	1982927851		
216	$2,532	450226700	MATTHEIS ANDERSON	AMY	715 E BROADWAY AVE		BISMARCK	ND	58501	1225294747	64	Audiology	4050	SANFORD SEVENTH AND BROA	1811941172		
63	$2,531	450226558	NETO	MANUEL	400 BURDICK EXPY E		MINOT	ND	58701	1578680013	34	Urology	635006	TRINITY MEDICAL GROUP	1083653752		
18	$2,530	450228899	MCCANN	MICHELLE	600 1ST STREET SE		MAYVILLE	ND	58257	1841452992	16	Obstet/Gynecology	3076	SANFORD MAYVILLE	1366478760		
28	$2,529	450437652	SHULIND	JOAN	151 S 4TH ST STE 401		GRAND FORKS	ND	58201	1093815300	88	#N/A	242001	NORTHEAST HUMAN SERVICE	1366496341		
99	$2,524	450448589	THE MEDICINE SHOPP		703 1ST AVE S		JAMESTOWN	ND	58401	1134110463	54	Home Medical Equipment	3067001	THE MEDICINE SHOPPE	1134110463		
30	$2,522	450226558	SADLER	MARY	1 BURDICK EXPY W		MINOT	ND	58701	1821300153	50	Nurse Practitioner	635032	TRINITY MEDICAL GROUP	1083653752		
11	$2,522	450226909	BIALAS	JEDD	801 BROADWAY NORTH		FARGO	ND	58102	1003157488	43	Certified Registered Nurse Anesthetist	7742001	SANFORD BROADWAY CLINIC	1184917924		
133	$2,522	450226700	GRAY	THANDIWE	222 N 7TH ST		BISMARCK	ND	58501	1194884338	11	Internal Medicine	4001	SANFORD CLINIC	1811941172		
106	$2,519	450462069	STUDSRUD	HEATHER	1711 GOLD DR STE 120		FARGO	ND	58103	1326249467	65	Physical Therapy	5517001	PROFESSIONAL REHABILITAT	1215014105		
85	$2,516	461084979	KRAFT	CHRISTINA	120 N 3RD STREET STE 25		BISMARCK	ND	58501	1861729139	35	Chiropractor	7941001	ACCELERATE HEALTH CHIROP	1942551981		
83	$2,514	450313085	GUNHUS	DON	3232 13TH AVE S		FARGO	ND	58103	1922053214	41	Optometrist	562001	PEARLE VISION	1659326205		
5	$2,514	208056374	KLEIN	KEVIN	1500 INTERCHANGE AVE	STE 100	BISMARCK	ND	58501	1639222110	43	Certified Registered Nurse Anesthetist	1079002	BECKER PLASTIC SURGERY C	1205082948		
37	$2,511	450311334	NASEER	KHALID	401 N 9TH ST		BISMARCK	ND	58501	1851341366	11	Internal Medicine	236001	MID DAKOTA CLINIC	1275587826		
104	$2,511	421585350	HOLKUP	JACOB	110 CENTRAL AVE S		BEACH	ND	58621	1851483242	35	Chiropractor	6306001	HOLKUP CHIROPRACTIC CLIN	1194752717		
21	$2,502	274361413	KENNEY	EMMET	3000 N 14TH ST #2A		BISMARCK	ND	58503	1902998081	26	Psychiatry (MD)	8027001	ST SOPHIES, LLC	1679916621		
86	$2,501	911770748	MATTSON	HEATHER	420 S 7TH ST		OAKES	ND	58474	1346559523	65	Physical Therapy	3068	SANFORD HEALTH OAKES CLI	1942241351		
14	$2,500	450226909	CASAS	KARI	801 BROADWAY NORTH		FARGO	ND	58102	1497723662	52	Medical Supply Co with Prosthetist	7742001	SANFORD BROADWAY CLINIC	1184917924		
41	$2,500	411949975	LOVEHAUG	MICHELE	891 BELSLY BLVD		MOORHEAD	MN	56560	1780778886	80	Clinical Social Worker	1697002	SOLUTIONS BEHAVIORAL HEA	1801909239		
128	$2,493	468961496	THORLAKSON	MIKA	1015 5TH AVE NE		JAMESTOWN	ND	58401	1740331875	35	Chiropractor	7962001	THORLAKSON CHIROPRACTIC	1053547786		
47	$2,492	450437649	DARDIS	PATRICIA	520 3RD ST NW		JAMESTOWN	ND	58401	1346262839	50	Nurse Practitioner	123001	SOUTH CENTRAL HUMAN SERV	1225075906		
56	$2,489	450282159	CARLSON	BRUCE	101 E BROADWAY AVE		BISMARCK	ND	58501	1508912288	83	Licenses Addiction Counselor-Chemical Dependency	269001	HEARTVIEW FOUNDATION	1417000233		
10	$2,489	450226909	BREDING	JOANNA	700 1ST AVE S		FARGO	ND	58103	1528243573	97	Physician Assistant	7742007	SANFORD NEUROSCIENCE CLI	1184917924		
137	$2,487	450444652	IHRY	KEVIN	1411 32ND ST S		FARGO	ND	58103	1851465975	35	Chiropractor	1193001	IHRY, KEVIN, DC	1518031640		
4	$2,484	911841100	FREITAG	HEATHER	3913 LOCKPORT ST		BISMARCK	ND	58503	1063457000	43	Certified Registered Nurse Anesthetist	1065001	ADVANCED SURGICAL ARTS C	1578669354		
42	$2,484	770637498	RAMAGE	GARY	525 N MAIN ST		WATFORD CITY	ND	58854	1184645533	1	General Practice	6340001	MCKENZIE COUNTY HEALTHCA	1063420495		
27	$2,478	410724029	BELL	DEBRA	323 S MINNESOTA ST		CROOKSTON	MN	56716	1770680555	8	Family Practice	5548001	RIVERVIEW HEALTHCARE ASS	1477525566		
78	$2,477	203642544	MCCABE	TOBIAS	218 S MAIN AVE		RUGBY	ND	58368	1740353374	35	Chiropractor	6744001	MCCABE FAMILY CHIROPRACT	1386820751		
18	$2,470	450226909	HAGER	MOLISSA	700 1ST AVE S		FARGO	ND	58103	1780903047	50	Nurse Practitioner	7742007	SANFORD NEUROSCIENCE CLI	1184917924		
13	$2,468	450310462	CHARETTE	SCOTT	1200 S COLUMBIA RD		GRAND FORKS	ND	58201	1730274085	2	General Surgery	62001	ALTRU HOSPITAL	1154346161		
39	$2,467	731684053	JOHNSON	LORIANN	520 MAIN STREET		HAWLEY	MN	56549	1275575300	65	Physical Therapy	6658004	MOBILITY PLUS REHABILITA	1790990968		
14	$2,466	450324908	MCKENZIE COUNTY AM	NCE	203 3RD AVE NE		WATFORD CITY	ND	58854	1518056142	59	Ambulance Service	2949001	MCKENZIE COUNTY AMBULANC	1518056142		
18	$2,464	450226700	SANFORD PHARMACY/H		300 N 7TH ST		BISMARCK	ND	58501	1790889715	54	Home Medical Equipment	4592001	SANFORD PHARMACY/BISMARC	1790889715		
92	$2,461	861058655	PAULSON	TERA	112 5TH ST SW		HANKINSON	ND	58041	1609829621	65	Physical Therapy	5909002	ORTHOPEDIC & SPORTS PHYS	1225215338		
29	$2,459	450228899	SAWCHUK	THEODORE	600 1ST STREET SE		MAYVILLE	ND	58257	1629090261	34	Urology	3076	SANFORD MAYVILLE	1366478760		
23	$2,454	450226700	SEIBEL	MELISSA	300 N 7TH ST		BISMARCK	ND	58501	1477735926	37	Pediatrics	440001	SANFORD MEDICAL CENTER/B	1811941172		
105	$2,448	470915406	MOEN	BRUCE	1100 31ST AVE SW STE 2		MINOT	ND	58701	1588694194	41	Optometrist	5855001	OPTICAL OUTLOOK	1568407153		
14	$2,446	450226909	KOSTECKI	KAREN	801 BROADWAY NORTH		FARGO	ND	58102	1386661056	43	Certified Registered Nurse Anesthetist	7742001	SANFORD BROADWAY CLINIC	1184917924		
36	$2,446	450226909	TALLURI	KRISHNA	801 BROADWAY NORTH		FARGO	ND	58102	1023246824	11	Internal Medicine	7742001	SANFORD BROADWAY CLINIC	1184917924		
27	$2,443	450226423	BLUMHARDT	RACHEL	1201 25TH ST S		FARGO	ND	58103	1003146861	88	#N/A	283001	THE VILLAGE FAMILY SERVI	1568492353		
35	$2,442	450437653	HANSON	LEAH	1015 S BROADWAY STE 18		MINOT	ND	58701	1427146109	44	Psychiatric Nurse	238001	NORTH CENTRAL HUMAN SERV	1477592533		
9	$2,442	450226700	KNUDSON	JOSHUA	300 N 7TH ST		BISMARCK	ND	58501	1043505654	2	General Surgery	440001	SANFORD MEDICAL CENTER/B	1811941172		
220	$2,438	562587064	AMERICAN DRUG STOR	ELAWARE LL	2401 13TH AVE S		FARGO	ND	58103	1821039793	54	Home Medical Equipment	7162002	AMERICAN DRUG STORES DEL	1821039793		
37	$2,435	261175213	BURNS	JOSEPH	3000 32ND AVE S		FARGO	ND	58103	1184654287	72	Emergency Medicine	6885016	ESSENTIA HEALTH HOSPITAL	1215125463		
31	$2,434	410724029	FASHORO	OLATUBOSUN	323 S MINNESOTA ST		CROOKSTON	MN	56716	1700823598	11	Internal Medicine	5548016	RIVERVIEW SPECIALTY CLIN	1487944898		
15	$2,434	450437654	BRADLEY	PATRICIA	200 HIGHWAY 2 SW		DEVILS LAKE	ND	58301	1356651228	62	Psychology	159001	LAKE REGION HUMAN SERVIC	1669411930		
42	$2,433	412002769	OLSON	JODY	307 1ST AVE NW		KENMARE	ND	58746	1992789069	50	Nurse Practitioner	6176001	KENMARE HEALTH CENTER	1649226671		
29	$2,433	870694180	COPPIN	RACHEL	701 3RD STREET NW		JAMESTOWN	ND	58401	1356475982	66	Speech Therapy	5919001	ANNE CARLSEN CENTER	1598930109		
82	$2,432	205332108	HOULE	MICHAEL	2331 TYLER PARKWAY STE 2		BISMARCK	ND	58503	1669530259	41	Optometrist	6900001	EYES ON PARKWAY, INC	1679631477		
15	$2,432	450226558	NELSON	DAYNE	400 BURDICK EXPY E		MINOT	ND	58701	1962479766	34	Urology	635006	TRINITY MEDICAL GROUP	1083653752		
36	$2,427	261175213	HOLTZ	PAMELA	3000 32ND AVE S		FARGO	ND	58103	1982973251	50	Nurse Practitioner	6885030	INNOVIS HEALTH, LLC DBA	1578907655		
120	$2,423	274648577	LEESEBERG	THOMAS	102 1ST ST SW		HILLSBORO	ND	58045	1831213198	35	Chiropractor	7623001	TRAIL COUNTY CHIROPRACTI	1831213198		
57	$2,423	431996219	KING	ALAN	341 1ST ST E		DICKINSON	ND	58601	1922079821	41	Optometrist	1284002	KING FAMILY EYE CLINIC,	1124200688		
77	$2,422	452503969	TOFTE	MICHAEL	1213 15TH AVE W		WILLISTON	ND	58801	1437223815	41	Optometrist	7751001	WILLISTON BASIN EYECARE	1225323504		
96	$2,421	450310462	MACKI	KAMRIN	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1073605408	50	Nurse Practitioner	9001	ALTRU HEALTH SYSTEM	1043309552		
21	$2,415	450226909	ESSARY	SHIRLEY	2400 32ND AVE S		FARGO	ND	58103	1962429829	71	Certified Diabetic Educator	7742008	SANFORD SOUTHPOINTE CLIN	1184917924		
13	$2,409	450226909	NOAH	THOMAS	520 CHAUTAUQUA BLVD		VALLEY CITY	ND	58072	1720005275	34	Urology	7742016	SANFORD HEALTH VALLEY CI	1184917924		
128	$2,405	205277029	MOSEY	MICHAEL	1032 CENTER AVE		MOORHEAD	MN	56560	1225052665	35	Chiropractor	6873001	MOSEY CHIROPRACTIC LTD D	1104836691		
12	$2,403	261175213	MATEUSZCZYK	JAROSLAW	3000 32ND AVE S		FARGO	ND	58103	1003997230	11	Internal Medicine	6885030	INNOVIS HEALTH, LLC DBA	1578907655		
16	$2,401	450375411	VELVA AMBULANCE SE	E	105 1ST ST W		VELVA	ND	58790	1831288968	59	Ambulance Service	3214001	VELVA AMBULANCE SERVICE	1831288968		
43	$2,397	450310462	JACKSON	CHRISTOPHE	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1073591012	30	Radiology	9001	ALTRU HEALTH SYSTEM	1043309552		
13	$2,393	450226909	HUBRIG	JONI	2701 13TH AVE S		FARGO	ND	58103	1821372947	80	Clinical Social Worker	7742009	SANFORD CHILDRENS SOUTHW	1184917924		
20	$2,392	450226700	SCHUMACHER	MARGARET	515 EAST BROADWAY AVE		BISMARCK	ND	58501	1942398102	71	Certified Diabetic Educator	4066	SANFORD 5TH & BROADWAY C	1811941172		
54	$2,384	450231675	MYKLEBUST	KIMBERLEY	1200 N 7TH ST		OAKES	ND	58474	1881980894	50	Nurse Practitioner	47001	OAKES COMMUNITY HOSPITAL	1477724433		

33	$2,383	10672165	GRAHAM STEINHAUER	JESSICA	1316 23RD STREET S		FARGO	ND	58102	1760777031	50	Nurse Practitioner	6764001	D & L PC DBA QUALITY LIF	1871684530				
44	$2,382	412002769	HOCHHAUSEN	HEIDI	307 1ST AVE NW		KENMARE	ND	58746	1063412799	50	Nurse Practitioner	6176001	KENMARE HEALTH CENTER	1649226671				
93	$2,382	455499343	HAM	LORI	402 4TH ST SW		COOPERSTOWN	ND	58425	1730438995	35	Chiropractor	7906001	ESSENTIAL CHIROPRACTIC P	1992051221				
210	$2,375	450311334	JACOBUS	KAREN	401 N 9TH ST		BISMARCK	ND	58501	1649583006	64	Audiology	236001	MID DAKOTA CLINIC	1275587826				
49	$2,375	450437649	WEBER	JOHN	520 3RD ST NW		JAMESTOWN	ND	58401	1194950527	80	Clinical Social Worker	123001	SOUTH CENTRAL HUMAN SERV	1225075906				
93	$2,375	450384159	KESSLER	DAVID	1809 S BROADWAY STE Y		MINOT	ND	58701	1184811853	35	Chiropractor	1386001	KESSLER CHIROPRACTIC	1184811853				
53	$2,374	261175213	KUNECKA	PAULINA	3000 32ND AVE S		FARGO	ND	58103	1609051242	11	Internal Medicine	6885030	INNOVIS HEALTH, LLC DBA	1578907655				
34	$2,371	261175213	VETTER	RICHARD	275 11TH ST S		WAHPETON	ND	58075	1427085042	8	Family Practice	6885019	INNOVIS HEALTH, LLC DBA	1790965440				
38	$2,371	261175213	HUNT	DANIEL	3000 32ND AVE S		FARGO	ND	58103	1689608267	72	Emergency Medicine	6885030	INNOVIS HEALTH, LLC DBA	1578907655				
34	$2,370	450226909	ALKHALAF	ABDULHAMID	801 BROADWAY NORTH		FARGO	ND	58102	1043237035	11	Internal Medicine	7742001	SANFORD BROADWAY CLINIC	1184917924				
35	$2,369	450310159	OMOTUNDE	JOSHUA	164 W 13TH ST		GRAFTON	ND	58237	1134190192	8	Family Practice	40001	UNITY MEDICAL CENTER	1245216852				
49	$2,367	450437654	KLIGMANN	MARCI	200 HIGHWAY 2 SW		DEVILS LAKE	ND	58301	1780906768	80	Clinical Social Worker	159001	LAKE REGION HUMAN SERVIC	1669411930				
90	$2,366	450226429	HARDY	MICHELLE	95 2ND ST NW		BEACH	ND	58621	1871513259	50	Nurse Practitioner	201001	ST JOSEPHS HOSPITAL/BEAC	1669491262				
8	$2,366	261175213	SKATVOLD	SARA	3000 32ND AVE S		FARGO	ND	58103	1770860322	43	Certified Registered Nurse Anesthetist	6885030	INNOVIS HEALTH, LLC DBA	1578907655				
15	$2,363	260480153	WILLERT JR	MERYL	1227 N 35TH ST		BISMARCK	ND	58501	1346210499	62	Psychology	6986003	DAKOTA FAMILY SERVICES	1023200896				
13	$2,363	450226909	DANGERFIELD	JON	929 CENTRAL AVE NW		E GRAND FORKS	MN	56721	1245258896	16	Obstet/Gynecology	7742021	SANFORD HEALTH 929 CENTR	1184917924				
60	$2,362	270973546	NEUMILLER	LISA	110 9TH ST E		HARVEY	ND	58341	1639486368	50	Nurse Practitioner	7482001	HARVEY CLINIC PC	1922335538				
45	$2,358	261175213	BARNHARDT	SCOTT	1401 13TH AVE E		WEST FARGO	ND	58078	1699905018	65	Physical Therapy	6885033	INNOVIS HEALTH, LLC DBA	1487990339				
115	$2,357	450458837	FRISK	MATTHEW	2700 12TH AVE SW STE D		FARGO	ND	58103	1356409429	64	Audiology	5350001	HEARING SOLUTIONS, INC.	1629291240				
41	$2,356	273981362	BALTZ	HALEY	512 MAIN ST		WILLISTON	ND	58801	1003053331	65	Physical Therapy	7662001	ELITE HEALTH & FITNESS	1841594900				
31	$2,354	261175213	FEWLESS	THERESA	3000 32ND AVE S		FARGO	ND	58103	1801189931	97	Physician Assistant	6885030	INNOVIS HEALTH, LLC DBA	1578907655				
117	$2,351	911841831	SHILMAN	NATHANIEL	2273 3RD AVE W		DICKINSON	ND	58601	1275532467	41	Optometrist	1086001	OLTMANNS, MELANIE, OD,PC	1508865700				
21	$2,348	450226558	DOBRZELECKI	SHAWNA	1 BURDICK EXPY W		MINOT	ND	58701	1205023926	50	Nurse Practitioner	635032	TRINITY MEDICAL GROUP	1083653752				
74	$2,346	450310462	KIRNUS	MIKHAIL	1200 S COLUMBIA RD		GRAND FORKS	ND	58201	1922272228	6	Cardivascular Disease	62001	ALTRU HOSPITAL	1154346161				
109	$2,339	273169686	SCHULTZ	JEREMY	534 N MAIN ST UNIT A		HORACE	ND	58047	1952610685	35	Chiropractor	7587001	HORACE FAMILY CHIROPRACT	1396050373				
65	$2,336	450226558	STANLEY	RUTH	504 1ST ST SE		MOHALL	ND	58761	1558659292	50	Nurse Practitioner	635033	TRINITY COMMUNITY CLINIC	1083653752				
21	$2,332	450359987	TINSATUL	UDOM	612 CENTER AVE N		ASHLEY	ND	58413	1508963950	2	General Surgery	125001	ASHLEY CLINIC PC TINSATU	1063525103				
76	$2,329	270973546	MERTZ	DEBORAH	110 9TH ST E		HARVEY	ND	58341	1245419951	50	Nurse Practitioner	7482001	HARVEY CLINIC PC	1922335538				
9	$2,329	450310462	CARCOANA	OLIVIA	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1093800344	5	Anesthesiology (MD)	9001	ALTRU HEALTH SYSTEM	1043309552				
30	$2,328	450226909	FERAGEN	SHANTELLE	801 BROADWAY NORTH		FARGO	ND	58102	1922369115	50	Nurse Practitioner	7742001	SANFORD BROADWAY CLINIC	1184917924				
78	$2,327	452503969	SIME	LAURALI	1213 15TH AVE W		WILLISTON	ND	58801	1851465223	41	Optometrist	7751001	WILLISTON BASIN EYECARE	1225323504				
17	$2,325	450226558	NOVEY	WALTER	1 BURDICK EXPY W		MINOT	ND	58701	1558306530	72	Emergency Medicine	635032	TRINITY MEDICAL GROUP	1083653752				
6	$2,321	450226558	CORBETT	JOSEPH	20 BURDICK EXPRESSWAY W		MINOT	ND	58701	1487793600	14	Neurological Surgery	635029	TRINITY MEDICAL GROUP	1083653752				
35	$2,318	450254692	BARLOW	STEVEN	702 1ST ST SW		CROSBY	ND	58730	1275815680	50	Nurse Practitioner	428001	ST LUKES HOSPITAL DBA CR	1184737231				
102	$2,318	271819817	DOCKTER	MELANIE	2553 KIRSTEN LANE SOUTH	SUITE 207	FARGO	ND	58104	1497989602	35	Chiropractor	7545001	VENTURE CHIROPRACTIC	1326370602				
25	$2,318	450226909	MEIER	NICOLE	2400 32ND AVE S		FARGO	ND	58103	1801104039	97	Physician Assistant	7742008	SANFORD SOUTHPOINTE CLIN	1184917924				
47	$2,313	450340688	RANUM	CARRIE ANN	608 HIGHWAY 12 W		BOWMAN	ND	58623	1861623456	37	Pediatrics	434006	WEST RIVER HEALTH SERVIC	1497856025				
79	$2,310	460224598	SNYDER	MICHELLE	240 MAIN ST		ELLENDALE	ND	58436	1982660411	97	Physician Assistant	1000001	AVERA ST LUKES DBA AVERA	1760423057				
6	$2,309	450310462	PANDA	DURGA	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1609073915	37	Pediatrics	9001	ALTRU HEALTH SYSTEM	1043309552				
29	$2,305	450226558	SELL	SHANON	400 BURDICK EXPY E		MINOT	ND	58701	1609895879	8	Family Practice	635006	TRINITY MEDICAL GROUP	1083653752				
11	$2,295	261175213	CALLAHAN	KEVIN	3000 32ND AVE S		FARGO	ND	58103	1336188218	43	Certified Registered Nurse Anesthetist	6885030	INNOVIS HEALTH, LLC DBA	1578907655				
105	$2,294	760746279	BECKER	KRISTA	2700 8TH ST NW		MINOT	ND	58703	1578761649	65	Physical Therapy	5439001	FIRST CHOICE PHYSICAL TH	1013098797				
49	$2,293	261175213	NORBY	BRENDA	801 BELSLY BLVD S		MOORHEAD	MN	56560	1265405252	97	Physician Assistant	6885034	INNOVIS HEALTH, LLC DBA	1659617504				
373	$2,292	411342677	LOTZER	DAVID	213 7TH ST S		MOORHEAD	MN	56560	1427106145	35	Chiropractor	1400001	MOORHEAD CHIROPRACTIC CL	1427106145				
183	$2,292	710900389	JORGENSON	BRETT	1201 13TH AVE E		WEST FARGO	ND	58078	1396893038	35	Chiropractor	5761001	JORGENSON FAMILY CHIROPR	1982752630				
28	$2,291	205445275	REINARDY	RENAE	1450 25TH ST SO		FARGO	ND	58103	1730399601	62	Psychology	7730001	LAKESIDE CENTER FOR BEHA	1730399601				
20	$2,289	450226700	REINKE	SARA	300 N 7TH ST		BISMARCK	ND	58501	1871721811	37	Pediatrics	440001	SANFORD MEDICAL CENTER/B	1811941172				
10	$2,286	208833347	CROOKSTON AREA AMB	CE	201 W LONG ST		CROOKSTON	MN	56716	1093910838	59	Ambulance Service	7081001	CROOKSTON AREA AMBULANCE	1093910838				
86	$2,284	450226909	KELLY	MAGGIE	2400 32ND AVE S		FARGO	ND	58103	1497944615	41	Optometrist	7742008	SANFORD SOUTHPOINTE CLIN	1184917924				
87	$2,283	450226419	PEDERSON	STEVEN	800 3RD AVE SW		RUGBY	ND	58368	1063581338	35	Chiropractor	18067	HEART OF AMERICA JOHNSON	1578734869				
23	$2,280	450226909	NEWMAN	WILLIAM	801 BROADWAY NORTH		FARGO	ND	58102	1881643377	11	Internal Medicine	7742001	SANFORD BROADWAY CLINIC	1184917924				
38	$2,275	450226909	JOHNSON	KARA	801 BROADWAY NORTH		FARGO	ND	58102	1578708228	29	Pulmonary Diseases	7742001	SANFORD BROADWAY CLINIC	1184917924				
69	$2,274	743068160	SALWEY	TODD	2808 N BROADWAY		FARGO	ND	58102	1881815769	35	Chiropractor	5792001	ACTIVE FAMILY CHIROPRACT	1144432279				
20	$2,272	204874580	BOULTON-OLSON	CHRISTINE	2755 10TH AVE N		GRAND FORKS	ND	58203	1821340548	62	Psychology	6806002	ASSESSMENT AND THERAPY A	1437181591				
32	$2,269	450308484	JOYCE	GAIL	710 N WELO ST		TIOGA	ND	58852	1174564595	97	Physician Assistant	327001	TIOGA MEDICAL CENTER	1245296078				
218	$2,268	208482502	THE MEDICINE SHOPP		1304 EAST BOULEVARD AVE		BISMARCK	ND	58501	1851485262	63	Pharmacy	7159001	JKRX INC DBA THE MEDICIN	1851485262				
25	$2,266	450226909	MEYER	ELIZABETH	100 4TH ST S		FARGO	ND	58103	1831473263	68	Licensed Registered Dietitian	7742006	SANFORD PROFESSIONAL BUI	1184917924				
39	$2,266	261175213	MATTHEES	DONALD	3000 32ND AVE S		FARGO	ND	58103	1699706358	11	Internal Medicine	6885030	INNOVIS HEALTH, LLC DBA	1578907655				
62	$2,265	261175213	GARRAHY	SHAUNA	1401 13TH AVE E		WEST FARGO	ND	58078	1447504006	65	Physical Therapy	6885033	INNOVIS HEALTH, LLC DBA	1487990339				
28	$2,259	410695598	TURNER	STEPHEN	2400 ST FRANCIS DRIVE		BRECKENRIDGE	MN	56520	1326238338	8	Family Practice	207001	ST FRANCIS MEDICAL CENTE	1891954574				
6	$2,259	421712135	NEW SALEM AMBULANC	RV	111 N 5TH ST		NEW SALEM	ND	58563	1790856706	59	Ambulance Service	1950001	NEW SALEM AMBULANCE SERV	1790856706				
37	$2,258	450231183	ANDELIN	SAMUEL	1213 15TH AVE W		WILLISTON	ND	58801	1619132834	8	Family Practice	711001	CRAVEN-HAGAN/MERCY MEDIC	1760549000				
111	$2,256	522411016	JUDISCH	RICK	1411 32ND ST S		FARGO	ND	58103	1669518999	35	Chiropractor	1187001	JUDISCH CHIROPRACTIC	1598802886				
4	$2,256	743085608	GACKLE AMBULANCE S	CE	401 MAIN ST		GACKLE	ND	58442	1689751158	59	Ambulance Service	5936001	GACKLE AMBULANCE SERVICE	1689751158				
45	$2,248	450226558	TURNEAU	KELLY	1 BURDICK EXPY W		MINOT	ND	58701	1326134685	11	Internal Medicine	635032	TRINITY MEDICAL GROUP	1083653752				
32	$2,248	450226700	KRAFT	DIANE	222 N 7TH ST		BISMARCK	ND	58501	1255541983	6	Cardivascular Disease	4001	SANFORD CLINIC	1811941172				

56	$2,245	456002491	WEISZ	SHARI	MONTGOMERY HALL ROOM 101	290 CENTENNIA	GRAND FORKS	ND	58202	1760538730	66	Speech Therapy	606001	UND SPEECH LANGUAGE & HE	1093910762				
23	$2,245	450226711	HORNER	SARA	900 E BROADWAY AVE		BISMARCK	ND	58501	1265623177	62	Psychology	501001	ST ALEXIUS MEDICAL CENTE	1205868429				
48	$2,242	450425948	ALMEN	JOANN	HWY 281 N		CANDO	ND	58324	1952530156	50	Nurse Practitioner	398001	TOWNER COUNTY MEDICAL CE	1124041389				
12	$2,240	450226700	DIBBELL	DAVID	300 N 7TH ST		BISMARCK	ND	58501	1093738064	2	General Surgery	440001	SANFORD MEDICAL CENTER/B	1811941172				
9	$2,223	450226909	HOLZER	TONYA	1720 UNIVERSITY DR S		FARGO	ND	58103	1710211800	43	Certified Registered Nurse Anesthetist	7742004	SANFORD SOUTH UNIVERSITY	1184917924				
4	$2,222	450226909	GHEEN	KENNETH	801 BROADWAY NORTH		FARGO	ND	58102	1699727602	37	Pediatrics	7742001	SANFORD BROADWAY CLINIC	1184917924				
52	$2,220	861123162	JAHN	PAUL	310 N 10TH ST		BISMARCK	ND	58501	1902966856	30	Radiology	6459001	ST ALEXIUS HEART & LUNG	1194823021				
35	$2,216	450226700	SHULTZ PIATZ	KINSEY	910 18TH ST NW		MANDAN	ND	58554	1770598427	8	Family Practice	4060	SANFORD NORTH MANDAN CLI	1811941172				
21	$2,215	460426548	RICE	STUART	683 STATE AVE N		DICKINSON	ND	58601	1033188594	14	Neurological Surgery	5788001	NEUROSURGICAL & SPINAL S	1538128491				
26	$2,213	450226711	WANGLER	VALENTINE	900 E BROADWAY AVE		BISMARCK	ND	58501	1184760043	80	Clinical Social Worker	501001	ST ALEXIUS MEDICAL CENTE	1205868429				
12	$2,211	450226700	MURPHY	KEVIN	300 N 7TH ST		BISMARCK	ND	58501	1912019415	25	Physical Medicine and Rehab	440001	SANFORD MEDICAL CENTER/B	1811941172				
26	$2,211	450417963	NAVARRO	RACHEL	2100 S COLUMBIA RD	STE 202	GRAND FORKS	ND	58201	1659651933	62	Psychology	474001	FAMILY INSTITUTE PC	1003832783				
24	$2,208	208928600	GRAHAM	HEATHER	3060 FRONTIER WAY S		FARGO	ND	58104	1972847341	66	Speech Therapy	6961001	PEDIATRIC THERAPY PARTNE	1457479958				
3	$2,207	261175213	ZUEL	MELISSA	3000 32ND AVE S		FARGO	ND	58103	1629214184	43	Certified Registered Nurse Anesthetist	6885030	INNOVIS HEALTH, LLC DBA	1578907655				
33	$2,203	261175213	HUNT	DANIEL	3000 32ND AVE S		FARGO	ND	58103	1689608267	72	Emergency Medicine	6885016	ESSENTIA HEALTH HOSPITAL	1215125463				
20	$2,202	383904865	VOLK	ANDREA	121 N WASHINGTON ST		GRAND FORKS	ND	58203	1285987081	66	Speech Therapy	8076001	QUOTABLE KIDS SPEECH LAN	1376989855				
20	$2,198	800646884	SOLBERG	MARY	1705 4TH AVE NW		MINOT	ND	58703	1548591225	80	Clinical Social Worker	7532001	SOLBERG, MARY LICSW	1548591225				
50	$2,196	450313085	KOEPPE	MICHAEL	3232 13TH AVE S		FARGO	ND	58103	1407086960	41	Optometrist	562001	PEARLE VISION	1659326205				
22	$2,195	450437652	STEIN FUGAZZI	ALISSA	151 S 4TH ST STE 401		GRAND FORKS	ND	58201	1447447511	80	Clinical Social Worker	242001	NORTHEAST HUMAN SERVICE	1366496341				
30	$2,194	261175213	GUPTA	PARUL	3000 32ND AVE S		FARGO	ND	58103	1669483038	11	Internal Medicine	6885030	INNOVIS HEALTH, LLC DBA	1578907655				
96	$2,194	30477097	BERGAN	APRIL	2004 TWIN CITY DR		MANDAN	ND	58554	1841446606	65	Physical Therapy	5470002	DAKOTA PHYSICAL THERAPY	1588797922				
29	$2,194	450226700	LANGE	DARWIN	910 18TH ST NW		MANDAN	ND	58554	1790855252	8	Family Practice	4060	SANFORD NORTH MANDAN CLI	1811941172				
177	$2,193	271446721	NELSON	LAFE	3712 LOCKPORT ST STE B		BISMARCK	ND	58503	1023347796	35	Chiropractor	7566001	SIMS CREEK CHIROPRACTIC,	1063742864				
8	$2,193	261175213	DEPPE	SCOTT	3000 32ND AVE S		FARGO	ND	58103	1437131422	72	Emergency Medicine	6885030	INNOVIS HEALTH, LLC DBA	1578907655				
37	$2,191	450226711	ROW	JEFFREY	900 E BROADWAY AVE		BISMARCK	ND	58501	1134185515	26	Psychiatry (MD)	501001	ST ALEXIUS MEDICAL CENTE	1205868429				
31	$2,190	450226909	ANDERSON	BRAD	904 5TH AVE NE		JAMESTOWN	ND	58401	1649298381	48	Podiatry, Surgical chiropody	7742018	SANFORD HEALTH JAMESTOWN	1184917924				
197	$2,190	911770748	MARSDEN	RICHARD	332 2ND AVE N		WAHPETON	ND	58075	1801814413	30	Radiology	3016	SANFORD HEALTH WAHPETON	1942241351				
13	$2,187	450226558	CHINN	DOUGLAS	400 BURDICK EXPY E		MINOT	ND	58701	1386605194	34	Urology	635006	TRINITY MEDICAL GROUP	1083653752				
45	$2,186	450425948	JORDE	JEANA	425 S COLLEGE DR STE 14		DEVILS LAKE	ND	58301	1346275062	97	Physician Assistant	398004	TOWNER COUNTY MEDICAL CE	1194745935				
90	$2,184	450405242	HEIL	KRISTA	111 E CENTURY AVE		BISMARCK	ND	58503	1215991799	41	Optometrist	328001	FAMILY VISION CLINIC	1235249475				
17	$2,184	261175213	ECKMAN	NIKKI	3000 32ND AVE S		FARGO	ND	58103	1457549594	43	Certified Registered Nurse Anesthetist	6885030	INNOVIS HEALTH, LLC DBA	1578907655				
68	$2,182	455373728	JOHNSON	VONNIE	301 12TH ST SE		WATFORD CITY	ND	58854	1124279633	50	Nurse Practitioner	7907001	ANOVA FAMILY HEALTH CENT	1801145206				
28	$2,172	450437655	FERRELL	CHARLOTTE	316 2ND AVE W		WILLISTON	ND	58801	1841490554	50	Nurse Practitioner	156001	NORTHWEST HUMAN SERVICE	1770524613				
73	$2,172	450419397	PAUL BILDENS PHARM		10 N MAIN		NORTHWOOD	ND	58267	1063690774	63	Pharmacy	4463001	PAUL BILDENS PHARMACY	1063690774				
113	$2,166	460448160	KELLER	NIOMI	601 MAIN AVE		LEMMON	SD	57638	1245203264	65	Physical Therapy	7521001	HANDS ON HEALTH, INC.	1821061847				
28	$2,160	450437652	MILLER	KIM	151 S 4TH ST STE 401		GRAND FORKS	ND	58201	1932131836	83	Licenses Addiction Counselor-Chemical Dependency	242001	NORTHEAST HUMAN SERVICE	1366496341				
22	$2,158	450226711	DEGREE	CRAIG	900 E BROADWAY AVE		BISMARCK	ND	58501	1033274816	62	Psychology	501001	ST ALEXIUS MEDICAL CENTE	1205868429				
43	$2,158	450437652	MCMILLAN	CYNTHIA	151 S 4TH ST STE 401		GRAND FORKS	ND	58201	1346483245	83	Licenses Addiction Counselor-Chemical Dependency	242001	NORTHEAST HUMAN SERVICE	1366496341				
23	$2,158	450437648	SCHATZ	KIKI	1237 W DIVIDE AVE STE 5		BISMARCK	ND	58501	1306910666	83	Licenses Addiction Counselor-Chemical Dependency	241001	WEST CENTRAL HUMAN SERVI	1649226713				
23	$2,157	450226909	WOODBURY	KARA	1720 UNIVERSITY DR S		FARGO	ND	58103	1528081528	88	#N/A	7742004	SANFORD SOUTH UNIVERSITY	1184917924				
93	$2,156	710980088	LUNDE	MARCIA E.R	112 MAIN ST		SHERWOOD	ND	58782	1356472724	35	Chiropractor	6209001	LUNDE, MARCIA E.R., DC D	1730343161				
59	$2,153	450226711	EKLOF	JONATHAN	900 E BROADWAY AVE		BISMARCK	ND	58501	1982995973	11	Internal Medicine	501001	ST ALEXIUS MEDICAL CENTE	1205868429				
18	$2,153	450226558	WALLNER	ASHLEY	20 BURDICK EXPRESSWAY W		MINOT	ND	58701	1952748923	50	Nurse Practitioner	635029	TRINITY MEDICAL GROUP	1083653752				
62	$2,149	450260821	BERGERON	BRYCE	1015 S BROADWAY		MINOT	ND	58701	1134460231	63	Pharmacy	4654001	WHITE DRUG #17	1306935911				
34	$2,144	450255914	GEIER	DAVID	612 CENTER AVE N		ASHLEY	ND	58413	1649273913	8	Family Practice	343001	AMC CLINIC INC	1851335830				
42	$2,144	450310462	GREWAL	SURINDER	1200 S COLUMBIA RD		GRAND FORKS	ND	58201	1093806002	8	Family Practice	62001	ALTRU HOSPITAL	1154346161				
13	$2,143	450226909	FABER	KEVIN	904 5TH AVE NE		JAMESTOWN	ND	58401	1720095482	13	Neurology	7742018	SANFORD HEALTH JAMESTOWN	1184917924				
110	$2,142	911770748	WIISANEN	RONALD	1720 UNIVERSITY DR S		FARGO	ND	58103	1790794295	8	Family Practice	3904	SANFORD SOUTH UNIVERSITY	1942241351				
4	$2,140	450226700	GARCIA	LUIS	222 N 7TH ST		BISMARCK	ND	58501	1104844752	2	General Surgery	4001	SANFORD CLINIC	1811941172				
28	$2,140	450226700	ARAZI	RICHARD	222 N 7TH ST		BISMARCK	ND	58501	1710915681	13	Neurology	4001	SANFORD CLINIC	1811941172				
6	$2,139	450227311	MYERS	MICHAEL	800 4TH ST N		CARRINGTON	ND	58421	1457387391	43	Certified Registered Nurse Anesthetist	60001	CARRINGTON HEALTH CENTER	1205807013				
23	$2,134	261175213	TANANUSONT	WEERAWAT	3000 32ND AVE S		FARGO	ND	58103	1720226202	11	Internal Medicine	6885030	INNOVIS HEALTH, LLC DBA	1578907655				
123	$2,133	450226909	BOLDA	MEGAN	801 BROADWAY NORTH		FARGO	ND	58102	1609054337	64	Audiology	7742001	SANFORD BROADWAY CLINIC	1184917924				
31	$2,128	450226558	VERHASSELT	DONNA	101 3RD AVE SW		MINOT	ND	58701	1417004912	97	Physician Assistant	635027	TRINITY MEDICAL GROUP	1083653752				
14	$2,127	450437653	SCHIELD	LAURA	1015 S BROADWAY STE 18		MINOT	ND	58701	1124064431	26	Psychiatry (MD)	238001	NORTH CENTRAL HUMAN SERV	1477592533				
65	$2,126	450310462	BERENS	BRUCE	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1811994858	30	Radiology	9001	ALTRU HEALTH SYSTEM	1043309552				
75	$2,126	450310462	PARRINO	SUZANNE	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1730113671	30	Radiology	9001	ALTRU HEALTH SYSTEM	1043309552				
20	$2,125	450254692	PETERSON	MARK	702 1ST ST SW		CROSBY	ND	58730	1134182355	8	Family Practice	428001	ST LUKES HOSPITAL DBA CR	1184737231				
23	$2,123	450226429	REIMAN	JENNIFER	30 7TH ST W		DICKINSON	ND	58601	1821106485	97	Physician Assistant	95001	ST JOSEPHS HOSPITAL AND	1992947956				
21	$2,121	450310462	LEETUN	DARIN	1300 S COLUMBIA RD		GRAND FORKS	ND	58201	1225080476	20	Orthopedic Surgery	232001	ALTRU REHABILITATION CEN	1437248945				
12	$2,119	450226558	BROWN	TERRI	1 BURDICK EXPRESSWAY W		MINOT	ND	58701	1114015542	43	Certified Registered Nurse Anesthetist	635031	TRINITY MEDICAL GROUP AN	1083653752				
52	$2,118	450310462	MAY	BENJAMIN	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1710172960	30	Radiology	9001	ALTRU HEALTH SYSTEM	1043309552				
26	$2,115	411949975	COX	JOSEPH	891 BELSLY BLVD		MOORHEAD	MN	56560	1497027841	62	Psychology	1697002	SOLUTIONS BEHAVIORAL HEA	1801909239				
23	$2,110	450226558	JACKSON	WALTER	1 BURDICK EXPY W		MINOT	ND	58701	1902982796	72	Emergency Medicine	635032	TRINITY MEDICAL GROUP	1083653752				
22	$2,110	450311334	KRAFT	BERNADETTE	401 N 9TH ST		BISMARCK	ND	58501	1366484727	71	Certified Diabetic Educator	236001	MID DAKOTA CLINIC	1275587826				
13	$2,109	261175213	BORGEN	MELISSA	3000 32ND AVE S		FARGO	ND	58103	1659311033	43	Certified Registered Nurse Anesthetist	6885030	INNOVIS HEALTH, LLC DBA	1578907655				

94	$2,107	450343320	NAGEL	TIMOTHY	433 BISMARCK EXPY E		BISMARCK	ND	58504	1578575353	35	Chiropractor	1152001	PAAPE CHIROPRACTIC CLINI	1770766362		
50	$2,106	450226711	KOIVULA	MARK	900 E BROADWAY AVE		BISMARCK	ND	58501	1265660740	50	Nurse Practitioner	501001	ST ALEXIUS MEDICAL CENTE	1205868429		
10	$2,104	450226558	PETERSON	RENEE	1 BURDICK EXPRESSWAY W		MINOT	ND	58701	1093886137	43	Certified Registered Nurse Anesthetist	635031	TRINITY MEDICAL GROUP AN	1083653752		
39	$2,101	450226423	KNIPFER	JODEE	409 7TH ST S		FARGO	ND	58103	1689968521	83	Licenses Addiction Counselor-Chemical Dependency	283018	THE VILLAGE FAMILY SERVI	1952679318		
48	$2,097	450358986	THIRUMALA REDDY	JOSEPH	1015 4TH AVE S		WISHEK	ND	58495	1356611941	11	Internal Medicine	441001	WISHEK RURAL HEALTH CLIN	1376584623		
23	$2,097	200540911	FORMAN DRUG		330 MAIN ST S		FORMAN	ND	58032	1417945080	63	Pharmacy	4635001	FORMAN DRUG	1417945080		
46	$2,096	450310462	DOWNS	JACQUELINE	1001 7TH ST		DEVILS LAKE	ND	58301	1245279702	11	Internal Medicine	9027	ALTRU CLINIC LAKE REGION	1861581373		
199	$2,094	911814315	DETHLEFSEN	BRIAN	14 N 5TH ST		OAKES	ND	58474	1861599730	35	Chiropractor	1211001	DETHLEFSEN CHIROPRACTIC	1861599730		
17	$2,086	450226711	BROOKS	DAVID	900 E BROADWAY AVE		BISMARCK	ND	58501	1790839934	62	Psychology	501001	ST ALEXIUS MEDICAL CENTE	1205868429		
17	$2,084	20625423	RANDALL	TIMOTHY	300 2ND AVE NE		JAMESTOWN	ND	58401	1598962987	83	Licenses Addiction Counselor-Chemical Dependency	5754001	PETERSON DEBRA I PC DBA	1699983932		
266	$2,083	450310843	BLANCHARD	JERRY	HIGHWAY 17 W		GRAFTON	ND	58237	1932275203	35	Chiropractor	574001	BLANCHARD CHIROPRACTIC	1275727588		
121	$2,082	201659965	DOHMAN	ROBB	319 11TH ST N		WAHPETON	ND	58075	1033288154	35	Chiropractor	296001	VALLEY SPINE CENTER INC	1427171636		
44	$2,081	450310462	MOORE	PATRICK	1200 S COLUMBIA RD		GRAND FORKS	ND	58201	1265528525	8	Family Practice	62001	ALTRU HOSPITAL	1154346161		
75	$2,080	450444338	WINKLER	KYLE	612 7TH ST NE		HAZEN	ND	58545	1124364914	35	Chiropractor	1383001	SWANSON CHIROPRACTIC PC	1649368226		
9	$2,075	450226700	TELLO	ANTHONY	300 N 7TH ST		BISMARCK	ND	58501	1558469916	72	Emergency Medicine	440001	SANFORD MEDICAL CENTER/B	1811941172		
6	$2,074	208977300	WITTEMAN	LORI	109 5TH ST E		BOTTINEAU	ND	58318	1790893899	42	Dentist	7773001	WITTEMAN, LORI, DDS, PC	1790893899		
60	$2,073	456004318	JETHWA	RATILAL	801 11TH AVE SW		MINOT	ND	58701	1366515652	8	Family Practice	347002	FIRST DISTRICT HEALTH UN	1972770030		
24	$2,072	461487188	CROCKETT	JODI	312 HWY 75 N		MOORHEAD	MN	56560	1992800551	65	Physical Therapy	7959001	MED-PLUS THERAPY LTD	1528303310		
111	$2,072	450310462	HANSON	ERICA	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1275624280	50	Nurse Practitioner	9001	ALTRU HEALTH SYSTEM	1043309552		
21	$2,071	450226700	DOERNER	MARK	765 W INTERSTATE AVE		BISMARCK	ND	58503	1437252293	62	Psychology	4072	SANFORD CHILDREN'S NORTH	1811941172		
55	$2,070	450226472	BERG	JONATHON	4 N PARK ST		NORTHWOOD	ND	58267	1073513982	8	Family Practice	64001	NORTHWOOD DEACONESS HEAL	1356449136		
128	$2,068	450455150	GOTTENBORG	ROBB	817 LINCOLN AVE		HARVEY	ND	58341	1568680429	35	Chiropractor	1704001	DAKOTA PLAINS CHIROPRACT	1427277839		
90	$2,067	263047434	BJELLUM	HANS	1100 19TH AVE N STE L-M		FARGO	ND	58102	1396736443	8	Family Practice	7174006	7 DAY CLINIC	1841547387		
285	$2,067	270533739	NICHOLS	JARED	4553 9TH AVE S		FARGO	ND	58103	1659504736	35	Chiropractor	7475001	NICHOLS FAMILY CHIROPRAC	1659504736		
4	$2,063	352281920	HEBRON AMBULANCE S	CE	620 WASHINGTON AVE		HEBRON	ND	58638	1003935024	59	Ambulance Service	1884001	HEBRON AMBULANCE SERVICE	1003935024		
5	$2,063	450226429	RAU	SASHA	30 7TH ST W		DICKINSON	ND	58601	1376885616	43	Certified Registered Nurse Anesthetist	95001	ST JOSEPHS HOSPITAL AND	1992947956		
97	$2,063	113686120	KASPARI	THOMAS	1312 HIGHWAY 49 N		BEULAH	ND	58523	1528046000	8	Family Practice	6103001	COAL COUNTRY COMMUNITY H	1942288329		
25	$2,061	450226711	VAN VALKENBURG	DAISY	900 E BROADWAY AVE		BISMARCK	ND	58501	1154468064	26	Psychiatry (MD)	501001	ST ALEXIUS MEDICAL CENTE	1205868429		
6	$2,057	450410034	AMUNDSON	ROGER	2600 DEMERS AVE STE 107		GRAND FORKS	ND	58201	1437228095	42	Dentist	7220001	AMUNDSON, ROGER, DDS	1437228095		
29	$2,055	261175213	WELK	NIKKI	3000 32ND AVE S		FARGO	ND	58103	1427310614	97	Physician Assistant	6885030	INNOVIS HEALTH, LLC DBA	1578907655		
18	$2,053	450226909	BROWN	AMANDA	2400 32ND AVE S		FARGO	ND	58103	1285941872	97	Physician Assistant	7742008	SANFORD SOUTHPOINTE CLIN	1184917924		
16	$2,052	450437652	TEVINGTON	KATHRYN	151 S 4TH ST STE 401		GRAND FORKS	ND	58201	1285770081	26	Psychiatry (MD)	242001	NORTHEAST HUMAN SERVICE	1366496341		
8	$2,052	450226429	BARRETT	MARY	30 W 7TH ST		DICKINSON	ND	58601	1902983976	16	Obstet/Gynecology	95008	ST JOSEPHS WOMENS CLINIC	1730464108		
29	$2,052	450254692	SELLAND	BRIAN	702 1ST ST SW		CROSBY	ND	58730	1710052626	8	Family Practice	428001	ST LUKES HOSPITAL DBA CR	1184737231		
565	$2,050	911770748	SANFORD MOORHEAD C	C LAB	1301 8TH ST S		MOORHEAD	MN	56560	1609144294	69	Independent Laboratory	3035	SANFORD MOORHEAD CLINIC	1942241351		
116	$2,049	450364091	NITSCHKE	HARVEY	726 13TH AVE E		WEST FARGO	ND	58078	1982705950	35	Chiropractor	626001	NITSCHKE CHIROPRACTIC	1982705950		
29	$2,046	810231784	WHITTENBERGER	BROCK	1301 15TH AVE W		WILLISTON	ND	58801	1033293444	75	Oncology	1263001	BILLINGS CLINIC	1376598714		
6	$2,044	450226909	JARANDEH	ERIC	801 BROADWAY NORTH		FARGO	ND	58102	1740455500	37	Pediatrics	7742001	SANFORD BROADWAY CLINIC	1184917924		
24	$2,041	264314533	MADLER	TAMARA	2925 20TH ST S		MOORHEAD	MN	56560	1053474411	80	Clinical Social Worker	7444002	PSJ ACQUISITION LLC	1679709802		
27	$2,034	450226909	BROWN	AMANDA	2301 S 25TH ST STE A		FARGO	ND	58103	1285941872	97	Physician Assistant	7742011	SANFORD ORTHOPEDICS SPOR	1184917924		
66	$2,030	261175213	HAGER	ALLEN	1702 UNIVERSITY DR S		FARGO	ND	58103	1497770739	35	Chiropractor	6885031	INNOVIS HEALTH, LLC DBA	1255677084		
24	$2,025	264314533	DENTON-GRABER	RUTH	510 4TH ST S		FARGO	ND	58103	1578596789	88	#N/A	7444001	PSJ ACQUISITION LLC	1679709802		
163	$2,024	456002238	SARGENT CTY DIST H		316 MAIN ST		FORMAN	ND	58032	1255469631	60	Public Health or Welfare Agency	4482001	SARGENT COUNTY DISTRICT	1255469631		
8	$2,023	261175213	HONEYMAN	RON	1702 UNIVERSITY DR S		FARGO	ND	58103	1356434914	43	Certified Registered Nurse Anesthetist	6885031	INNOVIS HEALTH, LLC DBA	1255677084		
103	$2,023	911770748	NG	SU-ANN	1720 UNIVERSITY DR S		FARGO	ND	58103	1336183482	30	Radiology	3904	SANFORD SOUTH UNIVERSITY	1942241351		
74	$2,020	450226700	HATLESTAD	DAVIN	222 N 7TH ST		BISMARCK	ND	58501	1609989268	72	Emergency Medicine	4001	SANFORD CLINIC	1811941172		
27	$2,019	501709300	QUINN	PAMELA	47 W 6 ST		GRAFTON	ND	58237	1770873143	83	Licenses Addiction Counselor-Chemical Dependency	7706001	QUINN DUI/MIP COUNSELING	1124318738		
10	$2,019	450348219	OLSON	ROBERT	1197 S COLUMBIA RD STE A		GRAND FORKS	ND	58201	1811194129	42	Dentist	5871001	TANABE, CURTIS, DDS	1790888295		
21	$2,018	502044058	LANDSIEDEL	ANDREA	1712 13TH STREET NW		MINOT	ND	58703	1710131693	66	Speech Therapy	7858001	LANDSIEDEL, ANDREA ST	1710131693		
22	$2,017	450226558	WEASE	GARY	101 3RD AVE SW		MINOT	ND	58701	1538200381	2	General Surgery	635027	TRINITY MEDICAL GROUP	1083653752		
69	$2,016	450405242	FLECK	AMY	111 E CENTURY AVE		BISMARCK	ND	58503	1598712515	41	Optometrist	328001	FAMILY VISION CLINIC	1235249475		
19	$2,016	134229257	THOMPSON	PAMELA	415 1/2 NEBRASKA AVE		BRECKENRIDGE	MN	56520	1881794642	80	Clinical Social Worker	5824001	SOLUTIONS COUNSELING SER	1578614038		
18	$2,016	450226909	CHRISTENSEN	STEFFEN	929 CENTRAL AVE NW		E GRAND FORKS	MN	56721	1336167063	16	Obstet/Gynecology	7742021	SANFORD HEALTH 929 CENTR	1184917924		
82	$2,014	261175213	QARNI	AHMER	3000 32ND AVE S		FARGO	ND	58103	1518997691	39	Nephrology	6885030	INNOVIS HEALTH, LLC DBA	1578907655		
2	$2,005	450342960	WING RURAL AMBULAN	O	211 MAIN		WING	ND	58494	1275639064	59	Ambulance Service	1866001	WING RURAL AMBULANCE	1275639064		
14	$2,003	460488581	WASHBURN VOLUNTEER	UL	305 9TH ST		WASHBURN	ND	58577	1417027459	59	Ambulance Service	1970001	WASHBURN VOLUNTEER AMBUL	1417027459		
10	$2,002	450310462	SCHUSTER	MICHAEL	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1689667909	5	Anesthesiology (MD)	9001	ALTRU HEALTH SYSTEM	1043309552		
25	$2,000	208976315	SUPPES	JILL	3001 11TH ST S		FARGO	ND	58103	1326218405	66	Speech Therapy	5881001	BEYOND BOUNDARIES SPEECH	1790999605		
10	$1,994	261175213	HORNER	BRADLEY	3000 32ND AVE S		FARGO	ND	58103	1205172921	43	Certified Registered Nurse Anesthetist	6885030	INNOVIS HEALTH, LLC DBA	1578907655		
38	$1,993	450226558	JONES	DURAND	20 BURDICK EXPRESSWAY W		MINOT	ND	58701	1346501046	50	Nurse Practitioner	635029	TRINITY MEDICAL GROUP	1083653752		
63	$1,992	450231183	JASZCZAK	LESZEK	1301 15TH AVE W		WILLISTON	ND	58801	1467528455	30	Radiology	711004	MERCY RADIOLOGY SERVICES	1629234257		
98	$1,989	911770748	HENDRICKS	LARRY	420 S 7TH ST		OAKES	ND	58474	1992723530	97	Physician Assistant	3068	SANFORD HEALTH OAKES CLI	1942241351		
203	$1,988	481292308	BIERMAIER	STEVEN	1226 UNIVERSITY AVE		CROOKSTON	MN	56716	1942208913	35	Chiropractor	1924001	BIERMAIER CHIROPRACTIC C	1942327549		
100	$1,987	450321020	BROOKSHIRE	BARBRA	3902 13TH AVE SW		FARGO	ND	58103	1003992694	41	Optometrist	7916001	EYECARE ASSOCIATES PC	1811077100		
7	$1,985	450226558	BEAUCHAMP	BRUCE	1 BURDICK EXPRESSWAY W		MINOT	ND	58701	1609881036	5	Anesthesiology (MD)	635031	TRINITY MEDICAL GROUP AN	1083653752		
31	$1,981	450226700	JAVAID	MIAN	300 N 7TH ST		BISMARCK	ND	58501	1184960452	11	Internal Medicine	440001	SANFORD MEDICAL CENTER/B	1811941172		

102	$1,979	421586229	DRAKE	JASON	3301 13TH AVE SW		FARGO	ND	58103	1346384518	35	Chiropractor	5882001	DRAKE JASON M DC PC	1346384518		
56	$1,978	261175213	MITZEL	WYATT	3000 32ND AVE S		FARGO	ND	58103	1770518599	97	Physician Assistant	6885030	INNOVIS HEALTH, LLC DBA	1578907655		
13	$1,976	450226558	JANG	THOMAS	400 BURDICK EXPY E		MINOT	ND	58701	1699927566	34	Urology	635006	TRINITY MEDICAL GROUP	1083653752		
69	$1,975	352209058	LAU	MATTHEW	420 CENTER AVE SUITE 48		MOORHEAD	MN	56560	1689991416	35	Chiropractor	5946001	PLADSON CHIROPRACTIC CLI	1144381187		
26	$1,974	411687554	VOSSLER	KRISTI	1104 7TH AVE S		MOORHEAD	MN	56563	1588756175	66	Speech Therapy	1430001	MSUM SPEECH, LANGUAGE &	1215000963		
27	$1,974	950000000	FOREIGN COUNTR	PROVIDER	4510 13TH AVE SW		FARGO	ND	58121	0	8	Family Practice	4190001	PROVIDER FOREIGN COUNTR	0		
51	$1,973	450222079	RIVINIUS	CAREY	603 EAST ST N		ELGIN	ND	58533	1225294101	50	Nurse Practitioner	6043002	JACOBSON MEMORIAL ELGIN	1871691519		
17	$1,973	450227012	LEE	LENAE	1031 7TH ST NE		DEVILS LAKE	ND	58301	1497974794	68	Licensed Registered Dietitian	76001	THE MERCY HOSPITAL OF DE	1790751170		
19	$1,972	450226909	ROESLER	SEAN	2400 32ND AVE S		FARGO	ND	58103	1750303392	8	Family Practice	7742008	SANFORD SOUTHPOINTE CLIN	1184917924		
24	$1,972	450308379	CZYWCZYNSKI	HEATHER	517 8TH AVE NE		HAZEN	ND	58545	1285920587	50	Nurse Practitioner	340004	SAKAKAWEA HAZEN CLINIC	1174597173		
25	$1,971	450310462	ONYEKA	IKECHUKWU	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1659435204	11	Internal Medicine	9001	ALTRU HEALTH SYSTEM	1043309552		
31	$1,967	204129496	KOCOUREK	ERIN	2951 34TH ST S		GRAND FORKS	ND	58201	1619227212	66	Speech Therapy	6775001	LITTLE MIRACLES, INC	1821110982		
14	$1,967	450310462	PODDUTURU	VIKRAM	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1861584294	25	Physical Medicine and Rehab	9001	ALTRU HEALTH SYSTEM	1043309552		
15	$1,966	450226700	DENDY	KHALIN	300 N 7TH ST		BISMARCK	ND	58501	1659500155	11	Internal Medicine	440001	SANFORD MEDICAL CENTER/B	1811941172		
24	$1,963	450437649	HART	TIM	520 3RD ST NW		JAMESTOWN	ND	58401	1295043362	80	Clinical Social Worker	123001	SOUTH CENTRAL HUMAN SERV	1225075906		
35	$1,960	450226909	SIEG	DARYL	700 1ST AVE S		FARGO	ND	58103	1922029149	97	Physician Assistant	7742007	SANFORD NEUROSCIENCE CLI	1184917924		
38	$1,957	261175213	REARDON	SCOTT	3000 32ND AVE S		FARGO	ND	58103	1598797896	30	Radiology	6885030	INNOVIS HEALTH, LLC DBA	1578907655		
16	$1,957	911770748	BJORE	ZACHERY	600 1ST ST SE		MAYVILLE	ND	58257	1831425388	97	Physician Assistant	3003	SANFORD MAYVILLE	1942241351		
10	$1,955	450226909	TRIEPKE	SHERI	1720 UNIVERSITY DR S		FARGO	ND	58103	1750303327	43	Certified Registered Nurse Anesthetist	7742004	SANFORD SOUTH UNIVERSITY	1184917924		
4	$1,954	472603980	MOSEY	KAREN	1507 S UNIVERSITY DR		FARGO	ND	58103	1386661825	43	Certified Registered Nurse Anesthetist	1009001	INDEPENDENT ANESTHESIA	1386661825		
19	$1,953	450226909	CAVALIER	SUSAN	2400 32ND AVE S		FARGO	ND	58103	1831117530	71	Certified Diabetic Educator	7742008	SANFORD SOUTHPOINTE CLIN	1184917924		
11	$1,950	450310462	HAPE	ROBIN	4500 S WASHINGTON ST		GRAND FORKS	ND	58201	1639371818	2	General Surgery	9045	ALTRU SPECIALTY CENTER	1154346161		
24	$1,938	450310462	LUCIANO	ANDREW	725 HAMLINE ST		GRAND FORKS	ND	58203	1467766907	8	Family Practice	9009	ALTRU FAMILY MEDICINE RE	1043309552		
55	$1,935	731653027	COOPER	ROBERT	2704 N BROADWAY STE C		FARGO	ND	58102	1093912578	25	Physical Medicine and Rehab	5737001	FARGO PSYCHIATRIC CLINIC	1396915120		
60	$1,934	261877737	WIEGEL	RACHAEL	207 E FRONT AVE STE A		BISMARCK	ND	58504	1558546259	35	Chiropractor	8018001	BIS-MAN CHIROPRACTIC ACU	1578804316		
63	$1,931	450226700	HERTZ	KRISTIN	222 N 7TH ST		BISMARCK	ND	58501	1760741482	50	Nurse Practitioner	4001	SANFORD CLINIC	1811941172		
3	$1,930	450226909	BAILEY	DAVID	1720 UNIVERSITY DR S		FARGO	ND	58103	1639197338	40	Hand Surgery	7742004	SANFORD SOUTH UNIVERSITY	1184917924		
41	$1,929	502923318	FROSLIE	STEPHANIE	810 4TH AVE S STE 205		MOORHEAD	MN	56560	1578622833	51	Medical Supply Co with Orthotist	6921001	FROSLIE STEPHANIE, LMFT	1578622833		
43	$1,929	450282159	GERHARDT	RONALD	101 E BROADWAY AVE		BISMARCK	ND	58501	1376696195	83	Licenses Addiction Counselor-Chemical Dependency	269001	HEARTVIEW FOUNDATION	1417000233		
23	$1,920	261175213	LUGER	PATRICK	3902 13TH AVE S		FARGO	ND	58103	1275550949	11	Internal Medicine	6885032	INNOVIS HEALTH, LLC DBA	1437495264		
43	$1,918	450310462	VELDMAN	MARK	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1538188511	30	Radiology	9001	ALTRU HEALTH SYSTEM	1043309552		
9	$1,914	450310462	SEVERUD	ROBIN	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1245326503	5	Anesthesiology (MD)	9001	ALTRU HEALTH SYSTEM	1043309552		
33	$1,911	450226909	BERGLUND	HOWARD	904 5TH AVE NE		JAMESTOWN	ND	58401	1831141175	20	Orthopedic Surgery	7742018	SANFORD HEALTH JAMESTOWN	1184917924		
31	$1,909	450308379	VOLK	ROBERT	510 8TH AVE NE		HAZEN	ND	58545	1932140050	50	Nurse Practitioner	340006	SAKAKAWEA CLINIC	1356315220		
25	$1,909	450437648	SCHON	DEBORAH	1237 W DIVIDE AVE STE 5		BISMARCK	ND	58501	1861433690	80	Clinical Social Worker	241001	WEST CENTRAL HUMAN SERVI	1649226713		
60	$1,909	261175213	BITZ	JAMES	3000 32ND AVE S		FARGO	ND	58103	1104853928	65	Physical Therapy	6885030	INNOVIS HEALTH, LLC DBA	1578907655		
48	$1,907	450310462	ANDERSON	KARI	1200 S COLUMBIA RD		GRAND FORKS	ND	58201	1336242916	50	Nurse Practitioner	62001	ALTRU HOSPITAL	1154346161		
135	$1,907	450260821	WHITE DRUG #15		320 10 ST SE		JAMESTOWN	ND	58401	1497844005	54	Home Medical Equipment	4363001	WHITE DRUG #15	1497844005		
10	$1,906	261175213	DEUTSCH	SARAH	3000 32ND AVE S		FARGO	ND	58103	1053498824	43	Certified Registered Nurse Anesthetist	6885030	INNOVIS HEALTH, LLC DBA	1578907655		
45	$1,905	411949975	NARUM	DENETTE	891 BELSLY BLVD		MOORHEAD	MN	56560	1790728210	80	Clinical Social Worker	1697002	SOLUTIONS BEHAVIORAL HEA	1801909239		
15	$1,900	450226909	WILLIAMS	BRENT	929 CENTRAL AVE NW		E GRAND FORKS	MN	56721	1710125893	34	Urology	7742021	SANFORD HEALTH 929 CENTR	1184917924		
7	$1,896	450226700	TINCHER	MICHELLE	300 N 7TH ST		BISMARCK	ND	58501	1457422883	73	Endocrinology	440001	SANFORD MEDICAL CENTER/B	1811941172		
7	$1,893	450226558	SMOLIK	MARTIN	1 BURDICK EXPRESSWAY W		MINOT	ND	58701	1891745030	5	Anesthesiology (MD)	635031	TRINITY MEDICAL GROUP AN	1083653752		
4	$1,893	450232743	MYERS	MICHAEL	115 VIVIAN ST		PARK RIVER	ND	58270	1457387391	43	Certified Registered Nurse Anesthetist	99001	P.R HEALTH CORPORATION D	1679669741		
47	$1,889	450260821	LUNDE	MARCUS	425 COLLEGE DR S #10		DEVILS LAKE	ND	58301	1639425176	63	Pharmacy	6210001	WHITE DRUG #63	1386734226		
5	$1,889	450227311	TRONTVET	KENT	800 4TH ST N		CARRINGTON	ND	58421	1093746877	43	Certified Registered Nurse Anesthetist	60001	CARRINGTON HEALTH CENTER	1205807013		
29	$1,887	450232743	JOHNSON	MANDI	115 VIVAN ST		PARK RIVER	ND	58270	1639374960	8	Family Practice	598001	P.R. HEALTH CORPORATION	1306850706		
52	$1,887	450226711	LEIER	HEATHER	900 E BROADWAY AVE		BISMARCK	ND	58501	1225057417	50	Nurse Practitioner	501001	ST ALEXIUS MEDICAL CENTE	1205868429		
38	$1,883	450310462	ASIS	MARTIN	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1598743833	30	Radiology	9001	ALTRU HEALTH SYSTEM	1043309552		
31	$1,882	870694180	ROALDSON	TARA	701 3RD STREET NW		JAMESTOWN	ND	58401	1306970926	65	Physical Therapy	5919001	ANNE CARLSEN CENTER	1598930109		
16	$1,881	450226909	LEVITT	HELEN	2400 32ND AVE S		FARGO	ND	58103	1477571040	71	Certified Diabetic Educator	7742008	SANFORD SOUTHPOINTE CLIN	1184917924		
6	$1,877	450232743	TRONTVET	KENT	115 VIVIAN ST		PARK RIVER	ND	58270	1093746877	43	Certified Registered Nurse Anesthetist	99001	P.R HEALTH CORPORATION D	1679669741		
21	$1,876	900763539	FRISK	JAMES	2700 12TH AVE S		FARGO	ND	58103	1871651943	4	Otology, Laryngology, Rhinology	7778001	PLAINS EAR NOSE THROAT &	1003199829		
34	$1,875	411949975	STALLMAN	SARA	891 BELSLY BLVD		MOORHEAD	MN	56560	1912204264	80	Clinical Social Worker	1697002	SOLUTIONS BEHAVIORAL HEA	1801909239		
11	$1,874	450226558	KARIMIAN	SIAMAK	400 BURDICK EXPY E		MINOT	ND	58701	1225091812	6	Cardivascular Disease	635006	TRINITY MEDICAL GROUP	1083653752		
11	$1,871	450226909	MOSER	KENT	1720 UNIVERSITY DR S		FARGO	ND	58103	1710138375	43	Certified Registered Nurse Anesthetist	7742004	SANFORD SOUTH UNIVERSITY	1184917924		
28	$1,869	203198828	GLYNN	VALERIE	1220 MAIN AVE STE 120		FARGO	ND	58103	1720426455	66	Speech Therapy	6659001	KENNELLY SPEECH-LANGUAGE	1154370187		
2	$1,867	450226700	VAN NORMAN	ALAN	300 N 7TH ST		BISMARCK	ND	58501	1285732958	14	Neurological Surgery	440001	SANFORD MEDICAL CENTER/B	1811941172		
19	$1,864	450311334	DELVO	STEPHANIE	1000 E ROSSER AVE		BISMARCK	ND	58501	1336377357	16	Obstet/Gynecology	236008	MID DAKOTA CLINIC-CENTER	1275587826		
18	$1,861	43604495	BRATTON	BRENDA	1401 13TH AVE E		WEST FARGO	ND	58078	1073682902	62	Psychology	5635001	KNOWLTON ONEILL & ASSOCI	1538198759		
2	$1,860	450442814	ABDULLAH	AHMED	3270 20TH ST S		FARGO	ND	58103	1457353690	24	Plastic Surgery	1163001	PLASTIC SURGERY INSTITUT	1477638864		
82	$1,856	450226711	BRYAN	JENNIFER	900 E BROADWAY AVE		BISMARCK	ND	58501	1417981713	50	Nurse Practitioner	501001	ST ALEXIUS MEDICAL CENTE	1205868429		
68	$1,855	411671999	JOHNSON	RONALD	209 2ND ST SE		BARNESVILLE	MN	56514	1336225200	97	Physician Assistant	463001	BARNESVILLE AREA CLINIC	1104902121		
17	$1,855	450308484	PETERSON	MARK	710 N WELO ST		TIOGA	ND	58852	1134182355	8	Family Practice	327001	TIOGA MEDICAL CENTER	1245296078		
31	$1,855	205749003	WAGNER	SCOTT	1303 E CENTRAL AVE		BISMARCK	ND	58501	1538486162	67	Occupational Therapy	6880001	RED DOOR PEDIATRIC THERA	1639257033		
17	$1,852	261175213	HAGER	JAKE	3000 32ND AVE S		FARGO	ND	58103	1588892053	11	Internal Medicine	6885016	ESSENTIA HEALTH HOSPITAL	1215125463		

79	$1,848	411671999	THOMPSON	OWEN	209 2ND ST SE		BARNESVILLE	MN	56514	1104902121	8	Family Practice	463001	BARNESVILLE AREA CLINIC	1104902121		
40	$1,846	261175213	HALLS	RUTH ANN	801 BELSLY BLVD S		MOORHEAD	MN	56560	1992742985	65	Physical Therapy	6885034	INNOVIS HEALTH, LLC DBA	1659617504		
12	$1,845	450226419	DANIELSON	GAIL	800 S MAIN AVE		RUGBY	ND	58368	1629178256	97	Physician Assistant	18001	GOOD SAMARITAN HOSPITAL	1588751325		
19	$1,845	10650829	SERNA	CARRIE	1551 28 AVE S STE C		GRAND FORKS	ND	58201	1679897383	88	#N/A	5650001	CENTER FOR SELF GROWTH &	1265658967		
98	$1,842	721545798	ENGSTROM	KRISTIN	4731 13TH AVE SW STE 1		FARGO	ND	58103	1154427565	41	Optometrist	5807001	ENGSTROM, KRISTIN F., OD	1972609303		
21	$1,842	261175213	VINYCH	JOHN	3000 32ND AVE S		FARGO	ND	58103	1093745382	5	Anesthesiology (MD)	6885030	INNOVIS HEALTH, LLC DBA	1578907655		
24	$1,841	356307548	STATON	R	509 25TH AVE N		FARGO	ND	58102	1457398711	26	Psychiatry (MD)	1988001	STATON, R. DENNIS, MD	1457398711		
20	$1,838	261175213	BEECHER	TRACY	3000 32ND AVE S		FARGO	ND	58103	1417026550	50	Nurse Practitioner	6885030	INNOVIS HEALTH, LLC DBA	1578907655		
7	$1,836	450226909	HERBRANDSON	JEREMY	1720 UNIVERSITY DR S		FARGO	ND	58103	1124366216	43	Certified Registered Nurse Anesthetist	7742004	SANFORD SOUTH UNIVERSITY	1184917924		
37	$1,836	450222079	DENT	TYESHA	602 ASH AVE E		GLEN ULLIN	ND	58631	1811036247	97	Physician Assistant	6043003	JACOBSON MEMORIAL HOSPIT	1003929944		
28	$1,833	450431679	LOYLAND	VICKI	311 4 ST S STE 106		GRAND FORKS	ND	58201	1407921752	83	Licenses Addiction Counselor-Chemical Dependency	423002	DRAKE COUNSELING SERVICE	1427243948		
5	$1,833	260709747	CHURCHILL PHARMACY		1190 W TURNPIKE AVE		BISMARCK	ND	58501	1639111230	79	Home Infusion	7033001	CHURCHILL PHARMACY INC	1639111230		
4	$1,832	450226700	ORSER	SHARI	300 N 7TH ST		BISMARCK	ND	58501	1932211323	16	Obstet/Gynecology	440001	SANFORD MEDICAL CENTER/B	1811941172		
98	$1,832	501829523	GILLETTE	DARRIN	825 25TH ST S STE C		FARGO	ND	58103	1669533683	35	Chiropractor	1343001	GILLETTE FAMILY CHIROPRA	1669533683		
106	$1,827	263686353	EVENSON	GABRIEL	1665 43RD ST S STE 102		FARGO	ND	58103	1083742597	67	Occupational Therapy	6934001	BLUE WATER THERAPY, LLC	1245475797		
18	$1,826	450437654	BOE	JAMIE	200 HIGHWAY 2 SW		DEVILS LAKE	ND	58301	1679875991	80	Clinical Social Worker	159001	LAKE REGION HUMAN SERVIC	1669411930		
20	$1,821	450310462	JONES	ROGER	1300 S COLUMBIA RD		GRAND FORKS	ND	58201	1790797504	20	Orthopedic Surgery	232001	ALTRU REHABILITATION CEN	1437248945		
31	$1,818	456002491	OLSON	PAUL	1201 11TH AVE SW		MINOT	ND	58701	1730250879	8	Family Practice	78001	CENTER FOR FAMILY MEDICI	1316008238		
6	$1,816	450311334	SPEARS	LURA	401 N 9TH ST		BISMARCK	ND	58501	1619208675	43	Certified Registered Nurse Anesthetist	236001	MID DAKOTA CLINIC	1275587826		
47	$1,813	320220382	PATZMAN	TAYA	921 25 ST SW		JAMESTOWN	ND	58401	1750345252	41	Optometrist	5759001	JAMESTOWN EYECARE	1750345252		
132	$1,813	450410216	GATEWAY PHARMACY S		835 S WASHINGTON ST		BISMARCK	ND	58504	1205927571	54	Home Medical Equipment	4581001	GATEWAY PHARMACY SOUTH	1205927571		
14	$1,813	450310462	SWOPE	RYAN	1300 S COLUMBIA RD		GRAND FORKS	ND	58201	1790975787	20	Orthopedic Surgery	232001	ALTRU REHABILITATION CEN	1437248945		
122	$1,813	861072174	DEUTSCHER	JOEL	11 E 4TH ST		LEMMON	SD	57638	1952482002	35	Chiropractor	1399001	DEUTSCHER CLINICS PC	1992032882		
23	$1,812	454508610	GOLDADE	TERRY	612 4 ST E		WILLISTON	ND	58801	1033202114	80	Clinical Social Worker	7857001	DAKOTA FAMILY SOLUTIONS	1134487671		
19	$1,810	450437652	GAGNER-TJELLESEN	DESIREE	151 S 4TH ST STE 401		GRAND FORKS	ND	58201	1518906437	44	Psychiatric Nurse	242001	NORTHEAST HUMAN SERVICE	1366496341		
108	$1,807	461014292	BORUD	CATHERINE	104 E HWY 66 STE 4		DRAYTON	ND	58225	1194071696	35	Chiropractor	7935001	CATHERINE J. H. BORUD DB	1194071696		
31	$1,803	450226909	HESS	APRIL	801 BROADWAY NORTH		FARGO	ND	58102	1932408812	11	Internal Medicine	7742001	SANFORD BROADWAY CLINIC	1184917924		
20	$1,802	450446509	ZULEGER	ZANE	601 18TH AVE SE STE 101		MINOT	ND	58701	1598791618	44	Psychiatric Nurse	746001	PSYCHIATRIC SERVICES PC	1477508034		
15	$1,800	450226909	TOMPKINS	REBEKAH	332 2ND AVE N		WAHPETON	ND	58075	1871783704	16	Obstet/Gynecology	7742019	SANFORD HEALTH WAHPETON	1184917924		
35	$1,795	450309764	MEDICAL SERVICES D		600 E BLVD AVEDEPT 325		BISMARCK	ND	58505	1215190574	60	Public Health or Welfare Agency	3445001	STATE OF NORTH DAKOTA CE	1215190574		
19	$1,790	262269067	ALTENDORF	JOHN	1351 PAGE DR SW STE 100		FARGO	ND	58103	1801999461	88	#N/A	7020001	ALTENDORF COUNSELING & A	1801999461		
35	$1,782	450310462	HAUGEN	JENNIFER	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1316166614	68	Licensed Registered Dietitian	9001	ALTRU HEALTH SYSTEM	1043309552		
7	$1,780	450375803	MACK	BENJAMIN	206 5TH AVE SE		DEVILS LAKE	ND	58301	1609070226	42	Dentist	1107001	SMILEQUEST	1578670691		
93	$1,780	450226419	HEART OF AMERICA M	AL CENTER	800 S MAIN AVE		RUGBY	ND	58368	1922198803	54	Home Medical Equipment	18001	GOOD SAMARITAN HOSPITAL	1588751325		
8	$1,778	450226909	STENEHJEM	JENNY	1720 UNIVERSITY DR S		FARGO	ND	58103	1821010489	43	Certified Registered Nurse Anesthetist	7742004	SANFORD SOUTH UNIVERSITY	1184917924		
20	$1,777	450437651	FAY	JULIE	2624 9TH AVE S		FARGO	ND	58103	1710994355	83	Licenses Addiction Counselor-Chemical Dependency	100001	SOUTHEAST HUMAN SERVICE	1932146941		
74	$1,777	450226700	BOUTILIER	AMANDA	715 E BROADWAY AVE		BISMARCK	ND	58501	1164869277	64	Audiology	4050	SANFORD SEVENTH AND BROA	1811941172		
23	$1,775	450228899	BJORE	ZACHERY	HWY 200 E		FINLEY	ND	58230	1831425388	97	Physician Assistant	3077	SANFORD HEALTH FINLEY CL	1366478760		
112	$1,774	450424398	NEUMILLER	JOEL	2717 ROCK ISLAND PL		BISMARCK	ND	58504	1568446359	41	Optometrist	1646001	BIS-MAN EYECARE ASSOCIAT	1669401527		
21	$1,769	260480153	MARTINSEN	WAYNE	6301 19TH AVE NW		MINOT	ND	58703	1851352504	26	Psychiatry (MD)	6986001	DAKOTA FAMILY SERVICES	1114119989		
4	$1,768	450310462	GARDNER	JEREMY	1200 S COLUMBIA RD		GRAND FORKS	ND	58201	1881886497	20	Orthopedic Surgery	62001	ALTRU HOSPITAL	1154346161		
25	$1,767	450310462	SILVERNAIL	RIO	1300 S COLUMBIA RD		GRAND FORKS	ND	58201	1891881116	97	Physician Assistant	232001	ALTRU REHABILITATION CEN	1437248945		
29	$1,765	450226558	CARMACK	ADRIENNE	400 BURDICK EXPY E		MINOT	ND	58701	1346430527	34	Urology	635006	TRINITY MEDICAL GROUP	1083653752		
41	$1,765	450226711	LARDY	SUSAN	900 E BROADWAY AVE		BISMARCK	ND	58501	1962683276	50	Nurse Practitioner	501001	ST ALEXIUS MEDICAL CENTE	1205868429		
11	$1,760	261175213	HARVEY	LYNDA	1702 UNIVERSITY DR S		FARGO	ND	58103	1386622991	43	Certified Registered Nurse Anesthetist	6885031	INNOVIS HEALTH, LLC DBA	1255677084		
17	$1,760	450227012	MATHESON	THOMAS	1031 7TH ST NE		DEVILS LAKE	ND	58301	1558365106	8	Family Practice	76001	THE MERCY HOSPITAL OF DE	1790751170		
26	$1,758	450226909	MOE	BARBARA	2400 32ND AVE S		FARGO	ND	58103	1942227582	68	Licensed Registered Dietitian	7742008	SANFORD SOUTHPOINTE CLIN	1184917924		
18	$1,758	450413089	LITCHFIELD	DOUGLAS	3119 N 14TH ST		BISMARCK	ND	58503	1316994130	18	Opthalmology	278002	DAKOTA EYE INSTITUTE	1962449835		
22	$1,757	411687554	RIEDINGER	VICKI	1104 7TH AVE S		MOORHEAD	MN	56563	1003908492	66	Speech Therapy	1430001	MSUM SPEECH, LANGUAGE &	1215000963		
23	$1,757	911770748	ERICKSON	GRACIA	904 5TH AVE NE		JAMESTOWN	ND	58401	1356439053	68	Licensed Registered Dietitian	3005	SANFORD HEALTH JAMESTOWN	1942241351		
66	$1,755	450226558	DURKIN	ROBERT	20 BURDICK EXPRESSWAY W		MINOT	ND	58701	1114915535	11	Internal Medicine	635029	TRINITY MEDICAL GROUP	1083653752		
71	$1,755	450460971	DYE	J	1207 PRAIRIE PARKWAY		WEST FARGO	ND	58078	1003085523	41	Optometrist	1621001	DYE, J G., OD	1720140577		
118	$1,746	450456936	KNUTSON	BRYON	2125 SIMS ST STE 3		DICKINSON	ND	58601	1538369244	35	Chiropractor	1815001	PRAIRIE HILLS CHIROPRACT	1538369244		
27	$1,744	450226909	ARORA	KANWARDEEP	801 BROADWAY NORTH		FARGO	ND	58102	1508026428	11	Internal Medicine	7742001	SANFORD BROADWAY CLINIC	1184917924		
5	$1,733	270309152	TRONSGARD	PAUL	1231 27TH ST S STE C		FARGO	ND	58103	1154458446	42	Dentist	7502001	TRONSGARD & SULLIVAN, DD	1578791117		
65	$1,730	450226700	JURGENS-DINIUS	NICHOLL	1531 W VILLARD ST STE A		DICKINSON	ND	58601	1124129614	65	Physical Therapy	4041	SANFORD HEALTH OCCUPATIO	1669524351		
2	$1,730	450319300	EXECUTIVE AIR TAXI	P	2301 UNIVERSITY DRIVE		BISMARCK	ND	58504	1881990745	59	Ambulance Service	3154001	EXECUTIVE AIR TAXI CORP	1881990745		
303	$1,729	261458960	PETERSON	MARGARET	207 BROADWAY ST		ENDERLIN	ND	58027	1770522351	35	Chiropractor	5707001	FAMILY CHIROPRACTIC AND	1720265168		
32	$1,727	261175213	JANKE	JENNIFER	1401 13TH AVE E		WEST FARGO	ND	58078	1174503577	46	Nurse Midwives	6885033	INNOVIS HEALTH, LLC DBA	1487990339		
13	$1,725	450226909	SINCLAIR	GARY	801 BROADWAY NORTH		FARGO	ND	58102	1891757613	74	Infectious Diseases	7742001	SANFORD BROADWAY CLINIC	1184917924		
4	$1,721	510178032	BERTHOLD AMBULANCE		15 3 AVE NW		BERTHOLD	ND	58718	1871719914	59	Ambulance Service	3082001	BERTHOLD AMBULANCE	1871719914		
20	$1,720	450226909	CAREY	JANTEY	801 BROADWAY NORTH		FARGO	ND	58102	1396181509	11	Internal Medicine	7742001	SANFORD BROADWAY CLINIC	1184917924		
11	$1,720	450311334	AHNEMAN	JON	401 N 9TH ST		BISMARCK	ND	58501	1982757449	43	Certified Registered Nurse Anesthetist	236001	MID DAKOTA CLINIC	1275587826		
16	$1,718	450226711	ENGELHART	JOLENE	900 E BROADWAY AVE		BISMARCK	ND	58501	1952454829	50	Nurse Practitioner	501001	ST ALEXIUS MEDICAL CENTE	1205868429		
23	$1,718	410724029	ANDERSON	KARI	1428 CENTRAL AVE NE		E GRAND FORKS	MN	56721	1336242916	50	Nurse Practitioner	5548002	RIVERVIEW SPECIALTY CLIN	1811918436		
10	$1,715	450310462	BOE	CHRISTOPHE	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1992865885	72	Emergency Medicine	9001	ALTRU HEALTH SYSTEM	1043309552		

12	$1,714	450310462	JAHN	PAUL	1200 S COLUMBIA RD		GRAND FORKS	ND	58201	1902966856	30	Radiology	62001	ALTRU HOSPITAL	1154346161		
45	$1,712	261175213	SONDREAL	PHILIP	132 4TH AVE NE		VALLEY CITY	ND	58072	1154337400	8	Family Practice	6885024	INNOVIS HEALTH, LLC DBA	1962682617		
92	$1,711	411926516	WAHL	SEAN	423 FRONT STREET NORTH		BARNESVILLE	MN	56514	1922114321	35	Chiropractor	1161001	BARNESVILLE CHIROPRACTIC	1487870648		
7	$1,709	450226909	VANMATRE	MELISSA	1720 UNIVERSITY DR S		FARGO	ND	58103	1588974596	43	Certified Registered Nurse Anesthetist	7742004	SANFORD SOUTH UNIVERSITY	1184917924		
29	$1,705	261175213	HOLM	MARY	3000 32ND AVE S		FARGO	ND	58103	1477583664	16	Obstet/Gynecology	6885030	INNOVIS HEALTH, LLC DBA	1578907655		
152	$1,701	450390277	SKIPS BUDGET DRUG		SOUTH FORKS PLAZA		GRAND FORKS	ND	58201	1306931977	54	Home Medical Equipment	1939001	SKIPS BUDGET DRUG	1306931977		
36	$1,699	450311552	THE PRESCRIPTION S	WF	1210 SHEYENNE ST		WEST FARGO	ND	58078	1891891149	54	Home Medical Equipment	2908001	THE PRESCRIPTION SHOP WF	1891891149		
42	$1,696	870694180	LONNBERG	NATALIE	701 3RD STREET NW		JAMESTOWN	ND	58401	1821225111	65	Physical Therapy	5919001	ANNE CARLSEN CENTER	1598930109		
59	$1,696	113686120	KLINDWORTH	ERIC	1312 HIGHWAY 49 N		BEULAH	ND	58523	1508074162	65	Physical Therapy	6103001	COAL COUNTRY COMMUNITY H	1942288329		
23	$1,695	450226909	SMITH	JENNIFER	801 BROADWAY NORTH		FARGO	ND	58102	1750688206	50	Nurse Practitioner	7742001	SANFORD BROADWAY CLINIC	1184917924		
94	$1,692	450418893	AGNES	STEVEN	3105 N BROADWAY		FARGO	ND	58102	1902912470	41	Optometrist	1729001	FAMILY EYE CLINIC, DR. S	1902912470		
27	$1,691	205396241	ROYAL	NATALIE	2650 32ND AVE S	STE D	GRAND FORKS	ND	58201	1457636003	50	Nurse Practitioner	6860001	AURORA URGENT CARE	1942318308		
14	$1,691	141998472	VOLK	GREGORY	501 3RD ST NE STE 1		DEVILS LAKE	ND	58301	1093811473	62	Psychology	6967001	VOLK HUMAN SERVICES, PC	1003009457		
12	$1,688	262417959	DARVEAUX	DION	1308 23RD ST S STE G		FARGO	ND	58103	1952407751	62	Psychology	7036001	BENSON PSYCHOLOGICAL SER	1477709574		
47	$1,687	450226700	RODACKER	MARK	222 N 7TH ST		BISMARCK	ND	58501	1437261724	21	Pathology, Anatomy, Clinical Pathology	4001	SANFORD CLINIC	1811941172		
32	$1,684	450226558	LARSEN	KENDRA	111 W 1ST ST		VELVA	ND	58790	1013354018	50	Nurse Practitioner	635008	TRINITY COMMUNITY CLINIC	1083653752		
22	$1,683	450430824	SLAVENS	RANDALL	2315 LIBRARY CIRCLE		GRAND FORKS	ND	58201	1225070865	80	Clinical Social Worker	1300001	NORTHLAND CHRISTIAN COUN	1215131016		
18	$1,680	450226700	BALF	DRAGOS	222 N 7TH ST		BISMARCK	ND	58501	1619178258	11	Internal Medicine	4001	SANFORD CLINIC	1811941172		
30	$1,680	261175213	SUNDE	LIZETTE	801 BELSLY BLVD S		MOORHEAD	MN	56560	1508173832	65	Physical Therapy	6885034	INNOVIS HEALTH, LLC DBA	1659617504		
10	$1,677	450226909	RUBIN	DAVID	1717 SOUTH UNIVERSITY DR		FARGO	ND	58103	1992705891	19	Oral Surgery	7742027	SANFORD 1717 MEDICAL BUI	1184917924		
6	$1,676	450311334	WALFORD	STEVEN	401 N 9TH ST		BISMARCK	ND	58501	1477606317	43	Certified Registered Nurse Anesthetist	236001	MID DAKOTA CLINIC	1275587826		
29	$1,676	450119890	MARTINSON	ERLING	108 N MAIN ST		MCVILLE	ND	58254	1558401554	8	Family Practice	301001	NELSON COUNTY HEALTH SYS	1578624136		
30	$1,674	450308484	BARLOW	STEVEN	710 N WELO ST		TIOGA	ND	58852	1275815680	50	Nurse Practitioner	327001	TIOGA MEDICAL CENTER	1245296078		
2	$1,669	450439149	MED TRANS CORPORAT		2463 EMPIRE RD		DICKINSON	ND	58601	1215372164	59	Ambulance Service	8112001	MED TRANS CORPORATION	1215372164		
13	$1,667	450226909	ROERIG	DEBORAH	1717 SOUTH UNIVERSITY DR		FARGO	ND	58103	1346262912	44	Psychiatric Nurse	7742027	SANFORD 1717 MEDICAL BUI	1184917924		
12	$1,663	450226700	MCDONOUGH	STEPHEN	300 N 7TH ST		BISMARCK	ND	58501	1912019480	37	Pediatrics	440001	SANFORD MEDICAL CENTER/B	1811941172		
12	$1,663	450226909	MACGREGOR	JAY	801 BROADWAY NORTH		FARGO	ND	58102	1851553325	2	General Surgery	7742001	SANFORD BROADWAY CLINIC	1184917924		
33	$1,659	201815895	BOGERT	MARK	602 ASH AVE		GLEN ULLIN	ND	58631	1235302878	65	Physical Therapy	6310001	BOGEROSA INC	1043289895		
80	$1,656	911770748	KENNINGER	RANDALL	1720 UNIVERSITY DR S		FARGO	ND	58103	1013934785	8	Family Practice	3904	SANFORD SOUTH UNIVERSITY	1942241351		
34	$1,656	450431679	BARTSCH	JENNIFER	1202 23RD ST S		FARGO	ND	58103	1710165832	83	Licenses Addiction Counselor-Chemical Dependency	423001	DRAKE COUNSELING SERVICE	1154378057		
9	$1,655	450226558	HOWE	MELINDA	1 BURDICK EXPRESSWAY W		MINOT	ND	58701	1306145628	43	Certified Registered Nurse Anesthetist	635031	TRINITY MEDICAL GROUP AN	1083653752		
24	$1,654	450226558	PERCELL	ROBERT	1 BURDICK EXPY W		MINOT	ND	58701	1316025505	6	Cardivascular Disease	635032	TRINITY MEDICAL GROUP	1083653752		
16	$1,652	450310462	ADJEKUM	GLORIA	1200 S COLUMBIA RD		GRAND FORKS	ND	58201	1548495534	37	Pediatrics	62001	ALTRU HOSPITAL	1154346161		
5	$1,652	450226700	GEHRIG	LAURA	300 N 7TH ST		BISMARCK	ND	58501	1982796892	20	Orthopedic Surgery	440001	SANFORD MEDICAL CENTER/B	1811941172		
18	$1,651	450226558	LESMANN	ALLISON	400 BURDICK EXPY E		MINOT	ND	58701	1699036392	50	Nurse Practitioner	635006	TRINITY MEDICAL GROUP	1083653752		
17	$1,651	410724029	FENNELL	COLLIN	1428 CENTRAL AVE NE		E GRAND FORKS	MN	56721	1356313480	20	Orthopedic Surgery	5548002	RIVERVIEW SPECIALTY CLIN	1811918436		
97	$1,651	450383579	GRANT	GREGORY	1515 S UNIVERSITY DR		FARGO	ND	58103	1528134160	35	Chiropractor	1192001	GRANT, GREGORY, DC	1528134160		
24	$1,649	410851371	MICHELS	PAUL	603 BRUCE ST		CROOKSTON	MN	56716	1265586440	26	Psychiatry (MD)	1269001	NORTHWESTERN MENTAL HEAL	1508835133		
25	$1,648	450226558	BROWN	ROXANN	407 3RD STREET SE		MINOT	ND	58701	1679861520	50	Nurse Practitioner	635005	TRINITY MEDICAL GROUP	1871532598		
29	$1,648	450226700	HENKE	MELISSA	222 N 7TH ST		BISMARCK	ND	58501	1083734172	26	Psychiatry (MD)	4001	SANFORD CLINIC	1811941172		
26	$1,647	274361413	DOLL	REBECCA	3000 N 14TH ST #2A		BISMARCK	ND	58503	1952541294	80	Clinical Social Worker	8027001	ST SOPHIES, LLC	1679916621		
33	$1,646	261175213	KAFLE	PRAKASH	3000 32ND AVE S		FARGO	ND	58103	1073746897	11	Internal Medicine	6885030	INNOVIS HEALTH, LLC DBA	1578907655		
18	$1,645	261175213	LINDQUIST	ELISE	1702 UNIVERSITY DR S		FARGO	ND	58103	1356696611	66	Speech Therapy	6885031	INNOVIS HEALTH, LLC DBA	1255677084		
7	$1,643	261175213	HUNTINGTON	TRACY	3000 32ND AVE S		FARGO	ND	58103	1225297724	43	Certified Registered Nurse Anesthetist	6885030	INNOVIS HEALTH, LLC DBA	1578907655		
21	$1,640	208056374	SONDROL	CYNTHIA	1500 INTERCHANGE AVE	STE 100	BISMARCK	ND	58501	1851493050	50	Nurse Practitioner	1079001	BECKER PLASTIC SURGERY,	1619195807		
78	$1,637	450226700	SCHMIT	JULIE	209 7 ST N		BISMARCK	ND	58501	1225085491	50	Nurse Practitioner	4048	SANFORD SEVENTH AND THAY	1811941172		
42	$1,637	450226558	PEARSON	PAMELA	831 S BROADWAY		MINOT	ND	58701	1215298914	50	Nurse Practitioner	635001	TRINITY MEDICAL GROUP	1083653752		
12	$1,637	450226909	HAUGO	AMIE	1720 UNIVERSITY DR S		FARGO	ND	58103	1609855873	8	Family Practice	7742004	SANFORD SOUTH UNIVERSITY	1184917924		
24	$1,634	450314527	LEFOR	KATIE	300 13 AVE W STE 1		DICKINSON	ND	58601	1295041697	88	#N/A	235001	BADLANDS HUMAN SERVICE C	1124072525		
74	$1,627	263047434	BJELLUM	HANS	1517 32ND AVE S		FARGO	ND	58103	1396736443	8	Family Practice	7174002	7 DAY CLINIC SOUTH FARGO	1851547160		
25	$1,625	261175213	REFSLAND	BRADLEY	275 11TH ST S		WAHPETON	ND	58075	1174579650	8	Family Practice	6885019	INNOVIS HEALTH, LLC DBA	1790965440		
14	$1,625	450226909	POTLURI	RAJENDRA	1720 UNIVERSITY DR S		FARGO	ND	58103	1679562953	11	Internal Medicine	7742004	SANFORD SOUTH UNIVERSITY	1184917924		
61	$1,622	450358986	KETTERLING	MARCIA	1015 4TH AVE S		WISHEK	ND	58495	1396895942	50	Nurse Practitioner	441001	WISHEK RURAL HEALTH CLIN	1376584623		
18	$1,622	203749270	HENRICH	STACY	3509 INTERSTATE BLVD	STE B	FARGO	ND	58103	1720322373	66	Speech Therapy	1516002	MAGELKY, PHYLLIS LTD	1821324476		
24	$1,622	450227311	PAGE	MICHAEL	118 1ST ST S		NEW ROCKFORD	ND	58356	1487631032	8	Family Practice	507002	COMMUNITY HEALTH CLINIC	1801811666		
7	$1,621	450226909	GARCIA	LUIS	1717 SOUTH UNIVERSITY DR		FARGO	ND	58103	1104844752	2	General Surgery	7742027	SANFORD 1717 MEDICAL BUI	1184917924		
30	$1,619	450255914	KLEIN	NINA	612 CENTER AVE N		ASHLEY	ND	58413	1235244542	50	Nurse Practitioner	343001	AMC CLINIC INC	1851335830		
5	$1,618	450226909	BOATMAN	JAMES	801 BROADWAY NORTH		FARGO	ND	58102	1285615724	6	Cardivascular Disease	7742001	SANFORD BROADWAY CLINIC	1184917924		
7	$1,617	450310462	STUART	JOSEPH	1300 S COLUMBIA RD		GRAND FORKS	ND	58201	1205047404	20	Orthopedic Surgery	232001	ALTRU REHABILITATION CEN	1437248945		
48	$1,614	450226700	SHARMA	DEEPTI	222 N 7TH ST		BISMARCK	ND	58501	1831353093	8	Family Practice	4001	SANFORD CLINIC	1811941172		
7	$1,613	450226909	NELSON	AUSTIN	801 BROADWAY NORTH		FARGO	ND	58102	1831316066	10	Gastronenterology	7742001	SANFORD BROADWAY CLINIC	1184917924		
143	$1,612	450333670	SIMONSON	BONI	6301 19TH AVE NW		MINOT	ND	58703	1568558559	88	#N/A	244001	DAKOTA BOYS RANCH	1750467999		
26	$1,612	450340688	JOYCE	JOHN	211 MAIN STREET S		SCRANTON	ND	58653	1144315441	8	Family Practice	434002	WEST RIVER HEALTH SERVIC	1760570394		
41	$1,608	261175213	KOHLER	BRITTANY	1702 UNIVERSITY DR S		FARGO	ND	58103	1053652974	65	Physical Therapy	6885031	INNOVIS HEALTH, LLC DBA	1255677084		
11	$1,607	261175213	ALLY	SAEED	3000 32ND AVE S		FARGO	ND	58103	1609845460	33	Thoracic Surgery	6885030	INNOVIS HEALTH, LLC DBA	1578907655		
25	$1,606	412002771	FUNDINGSLAND	MICHELLE	1 BURDICK EXPRESSWAY W		MINOT	ND	58701	1184694127	68	Licensed Registered Dietitian	5656001	TRINITY HOSPITALS	1427103910		

9	$1,602	450226909	OKOH	EMUEJEVOKE	801 BROADWAY NORTH		FARGO	ND	58102	1013970482	10	Gastronenterology	7742001	SANFORD BROADWAY CLINIC	1184917924		
12	$1,600	410695598	MOLSTRE	JOHN	2400 ST FRANCIS DRIVE		BRECKENRIDGE	MN	56520	1710920905	62	Psychology	207001	ST FRANCIS MEDICAL CENTE	1891954574		
97	$1,600	20727727	THORSGARD	ERIK	12 N PARK ST		NORTHWOOD	ND	58267	1780877787	35	Chiropractor	6363001	NORTHWOOD CHIROPRACTIC,	1699954545		
53	$1,599	450226909	GILBERTSON	KIMBERLY	1717 SOUTH UNIVERSITY DR		FARGO	ND	58103	1306863261	41	Optometrist	7742027	SANFORD 1717 MEDICAL BUI	1184917924		
21	$1,597	450437810	DUSEK	MARY	701 W 6TH ST		GRAFTON	ND	58237	1003963042	67	Occupational Therapy	453001	LIFE SKILLS AND TRANSITI	1558427708		
15	$1,596	450226700	WALTER	JULIEANNE	300 N 7TH ST		BISMARCK	ND	58501	1720336753	71	Certified Diabetic Educator	440001	SANFORD MEDICAL CENTER/B	1811941172		
34	$1,595	261175213	RODGERS-RIEGER	ELENA	3000 32ND AVE S		FARGO	ND	58103	1972657120	21	Pathology, Anatomy, Clinical Pathology	6885030	INNOVIS HEALTH, LLC DBA	1578907655		
3	$1,593	450226429	STEWART	JEANNE	30 7TH ST W		DICKINSON	ND	58601	1871574244	16	Obstet/Gynecology	95001	ST JOSEPHS HOSPITAL AND	1992947956		
26	$1,593	450310462	FLEISSNER	PAUL	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1659462661	25	Physical Medicine and Rehab	9001	ALTRU HEALTH SYSTEM	1043309552		
7	$1,590	450226700	WOODROW	PETER	300 N 7TH ST		BISMARCK	ND	58501	1174621858	16	Obstet/Gynecology	440001	SANFORD MEDICAL CENTER/B	1811941172		
48	$1,589	450226700	BALVITSCH	JESSICA	222 N 7TH ST		BISMARCK	ND	58501	1043316524	50	Nurse Practitioner	4001	SANFORD CLINIC	1811941172		
18	$1,588	450226558	ABDALRHIM	AHMED	1 BURDICK EXPY W		MINOT	ND	58701	1679671762	11	Internal Medicine	635032	TRINITY MEDICAL GROUP	1083653752		
117	$1,588	263999960	SWENSON	SHEILA	1726 S WASHINGTON ST	STE 79	GRAND FORKS	ND	58201	1992926935	35	Chiropractor	7358001	RENEWED HOPE CHIROPRACTI	1851532949		
45	$1,586	410988446	THORMAN	JOSEPH	118 3RD ST NE		ROLLA	ND	58367	1386662427	41	Optometrist	1059001	THORMAN JOSEPH A OD	1386662427		
24	$1,585	450226909	FOLDESI-PENAS	TRACY	100 4TH ST S		FARGO	ND	58103	1043237902	80	Clinical Social Worker	7742006	SANFORD PROFESSIONAL BUI	1184917924		
26	$1,584	450451306	HAMILTON	ROBERT	314 OHMER ST		BOTTINEAU	ND	58318	1902013857	8	Family Practice	1262001	ST ANDREWS BOTTINEAU CLI	1902803802		
18	$1,584	261175213	PARAJULI	ANJALI	3000 32ND AVE S		FARGO	ND	58103	1871759639	11	Internal Medicine	6885030	INNOVIS HEALTH, LLC DBA	1578907655		
32	$1,584	450226909	SAUNDERS	MARY	2801 UNIVERSITY DR S		FARGO	ND	58103	1710909353	97	Physician Assistant	7742005	SANFORD 2801 MEDICAL BUI	1184917924		
5	$1,583	450226558	GAUTHIER	ROBERT	1 BURDICK EXPRESSWAY W		MINOT	ND	58701	1558337154	5	Anesthesiology (MD)	635031	TRINITY MEDICAL GROUP AN	1083653752		
14	$1,578	450226909	BAUSTE	LARRY	1720 UNIVERSITY DR S		FARGO	ND	58103	1760409759	62	Psychology	7742004	SANFORD SOUTH UNIVERSITY	1184917924		
47	$1,569	450310462	BARKMEIER	JEFFREY	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1871571083	30	Radiology	9001	ALTRU HEALTH SYSTEM	1043309552		
215	$1,569	455597755	DIETZ	MANDY	418 EAST BROADWAY AVE	STE 222	BISMARCK	ND	58501	1528313087	35	Chiropractor	7887001	LIFE EXPRESSIONS FAMILY	1528313087		
17	$1,564	411687554	PLANKERS	MARIBETH	1104 7TH AVE S		MOORHEAD	MN	56563	1659688034	66	Speech Therapy	1430001	MSUM SPEECH, LANGUAGE &	1215000963		
84	$1,556	411598427	COLES	DESTIN	421 DEMERS AVE NW		E GRAND FORKS	MN	56721	1275695025	41	Optometrist	1407001	OPTICARE	1144357211		
22	$1,552	450226700	BELZER-CURL	GRETCHEN	910 18TH ST NW		MANDAN	ND	58554	1699878405	26	Psychiatry (MD)	4060	SANFORD NORTH MANDAN CLI	1811941172		
106	$1,552	450421131	MCINTOSH DIST HLTH	T	511 3RD AVE NW		ASHLEY	ND	58413	1770594459	60	Public Health or Welfare Agency	4487001	MCINTOSH DISTRICT HEALTH	1770594459		
27	$1,546	450226700	EMERY	RUSSELL	2830 N WASHINGTON ST		BISMARCK	ND	58503	1801994538	8	Family Practice	4062	SANFORD NORTH CLINIC	1811941172		
42	$1,544	450226700	WOODROW	PETER	414 N 7TH ST		BISMARCK	ND	58501	1174621858	16	Obstet/Gynecology	4046	SANFORD SEVENTH AND ROSS	1811941172		
8	$1,544	450450254	KUENNEN	TIMOTHY	600 N 9TH ST		BISMARCK	ND	58501	1639251143	43	Certified Registered Nurse Anesthetist	1261001	BISMARCK SURGICAL ASSOCI	1487814356		
7	$1,544	261175213	SPICER	NATHAN	3000 32ND AVE S		FARGO	ND	58103	1770763062	43	Certified Registered Nurse Anesthetist	6885030	INNOVIS HEALTH, LLC DBA	1578907655		
11	$1,544	450226909	VAAGEN	ROGER	1720 UNIVERSITY DR S		FARGO	ND	58103	1770505349	43	Certified Registered Nurse Anesthetist	7742004	SANFORD SOUTH UNIVERSITY	1184917924		
12	$1,540	450226558	KENISTON	DIERDRE	1 BURDICK EXPRESSWAY W		MINOT	ND	58701	1760761613	43	Certified Registered Nurse Anesthetist	635031	TRINITY MEDICAL GROUP AN	1083653752		
65	$1,540	911770748	MARSDEN	RICHARD	420 S 7TH ST		OAKES	ND	58474	1801814413	30	Radiology	3068	SANFORD HEALTH OAKES CLI	1942241351		
19	$1,540	273981362	FALCON	MISTY	512 MAIN ST		WILLISTON	ND	58801	1417983164	50	Nurse Practitioner	7662002	ELITE HEALTH & FITNESS	1235481540		
28	$1,539	410724034	ANDERSON	PAUL	205 ROOSEVELT AVE		KARLSTAD	MN	56732	1780613042	97	Physician Assistant	2059002	KITTSON MEMORIAL CLINIC	1508947458		
135	$1,539	30580758	CLINE	NICOLE	9 5TH ST N		OAKES	ND	58474	1811071541	35	Chiropractor	6924001	BACK TO HEALTH CHIROPRAC	1811071541		
29	$1,536	450226909	WOJCIK	SUSAN	801 BROADWAY NORTH		FARGO	ND	58102	1144241480	50	Nurse Practitioner	7742001	SANFORD BROADWAY CLINIC	1184917924		
30	$1,535	911770748	AFFIELD	CARRIE	1412 MAIN ST		HAWLEY	MN	56549	1881889673	97	Physician Assistant	513001	SANFORD HAWLEY CLINIC	1942241351		
59	$1,531	450451333	KOURAJIAN	STEVEN	901 LINCOLN AVE		HARVEY	ND	58341	1255315792	41	Optometrist	1625001	KOURAJIAN, STEVEN, OD	1053591537		
14	$1,529	450430824	SCOTT	DAVID	308 5TH ST S		GRAND FORKS	ND	58201	1033364013	88	#N/A	1300004	NORTHLAND CHRISTIAN COUN	1215131016		
106	$1,527	911770748	BURD	ANN	3838 12TH AVE N		FARGO	ND	58102	1982747713	65	Physical Therapy	587001	SANFORD HEALTH OCCUPATIO	1952323974		
64	$1,526	460360287	ARROWHEALTH MEDICA	PPLY DETRO	495A FRAZEE ST E		DETROIT LAKES	MN	56501	1831179464	54	Home Medical Equipment	4618002	PSI HEALTHCARE, INC. DBA	1831179464		
17	$1,525	262417959	FLANDERS	LYNNE	1308 23RD ST S STE G		FARGO	ND	58103	1174698641	80	Clinical Social Worker	7036001	BENSON PSYCHOLOGICAL SER	1477709574		
207	$1,524	562587064	AMERICAN DRUG STOR	ELAWARE LL	1950 32ND AVE S STE A		GRAND FORKS	ND	58201	1619919800	63	Pharmacy	7162005	AMERICAN DRUG STORES DEL	1619919800		
64	$1,524	450321020	WILNER	MASON	3902 13TH AVE SW		FARGO	ND	58103	1295991396	41	Optometrist	7916001	EYECARE ASSOCIATES PC	1811077100		
50	$1,524	450309291	RUTZ	DUANE	204 S ATLANTIC		HALLOCK	MN	56728	1790759090	41	Optometrist	234002	VALLEY VISION CLINIC LTD	1619168267		
11	$1,522	450417963	MOE	BRIAN	2100 S COLUMBIA RD	STE 202	GRAND FORKS	ND	58201	1396048518	62	Psychology	474001	FAMILY INSTITUTE PC	1003832783		
123	$1,518	450226558	NECHODOM	TRICIA	101 3RD AVE SW		MINOT	ND	58701	1902197411	64	Audiology	635027	TRINITY MEDICAL GROUP	1083653752		
44	$1,517	411687554	LUISTRO	ALLAN	1104 7TH AVE S		MOORHEAD	MN	56563	1073648259	8	Family Practice	6085001	HENDRIX HEALTH CENTER	1497881494		
14	$1,516	450310462	ZELEWSKI	SUSAN	1200 S COLUMBIA RD		GRAND FORKS	ND	58201	1538255898	37	Pediatrics	62001	ALTRU HOSPITAL	1154346161		
22	$1,515	450226429	SWAMI	SHARAD	30 7TH ST W		DICKINSON	ND	58601	1548217813	11	Internal Medicine	95001	ST JOSEPHS HOSPITAL AND	1992947956		
28	$1,513	450226700	EBACH	CONNIE	222 N 7TH ST		BISMARCK	ND	58501	1053417493	50	Nurse Practitioner	4001	SANFORD CLINIC	1811941172		
106	$1,512	450404544	NEWGARD	JOEL	104 W MAIN ST		MANDAN	ND	58554	1518967066	35	Chiropractor	1384001	JOEL A NEWGARD DC	1518967066		
24	$1,512	770637498	RAMAGE	GARY	516 N MAIN ST		WATFORD CITY	ND	58854	1184645533	1	General Practice	57003	MCKENZIE COUNTY HEALTHCA	1518988948		
5	$1,511	450306787	TRONTVET	KENT	909 2ND ST		LANGDON	ND	58249	1093746877	43	Certified Registered Nurse Anesthetist	54001	CAVALIER COUNTY MEMORIAL	1750328662		
94	$1,508	450433194	TENBROEK	SHERI	105 BROADWAY EAST		STEELE	ND	58482	1639181464	35	Chiropractor	6772002	STEELE CHIROPRACTIC CLIN	1205848108		
5	$1,506	450227311	SHEFLAND	RAYMOND	800 4TH ST N		CARRINGTON	ND	58421	1235184557	43	Certified Registered Nurse Anesthetist	60001	CARRINGTON HEALTH CENTER	1205807013		
487	$1,505	911770748	SANFORD CHILDREN'S	THWEST CLI	2701 13TH AVE S		FARGO	ND	58103	1609144294	69	Independent Laboratory	3015	SANFORD CHILDRENS SOUTHW	1942241351		
27	$1,503	450226909	BELL	MARIA	801 BROADWAY NORTH		FARGO	ND	58102	1174529929	16	Obstet/Gynecology	7742001	SANFORD BROADWAY CLINIC	1184917924		
104	$1,499	911770748	GROSS	GERALD	904 5TH AVE NE		JAMESTOWN	ND	58401	1013935667	75	Oncology	3005	SANFORD HEALTH JAMESTOWN	1942241351		
32	$1,498	502749355	DUNHAM	THOMAS	104 E HIWAY 66 STE 102		DRAYTON	ND	58225	1982601357	41	Optometrist	1636001	DUNHAM, THOMAS, OD	1982601357		
76	$1,494	911770748	PETERSON	TERRY	2601 N BROADWAY		FARGO	ND	58102	1093733693	97	Physician Assistant	3028	SANFORD NORTH FARGO CLIN	1942241351		
7	$1,493	450226909	KLEVEN	LORI	1720 UNIVERSITY DR S		FARGO	ND	58103	1386662948	43	Certified Registered Nurse Anesthetist	7742004	SANFORD SOUTH UNIVERSITY	1184917924		
19	$1,493	261175213	JONES	JENIFER	1702 UNIVERSITY DR S		FARGO	ND	58103	1588698088	37	Pediatrics	6885031	INNOVIS HEALTH, LLC DBA	1255677084		
16	$1,492	450437654	LONGIE	GLENN	113 MAIN AVE E		ROLLA	ND	58367	1992912554	83	Licenses Addiction Counselor-Chemical Dependency	159002	LAKE REGION HSC/ROLLA OU	1669411930		
21	$1,489	450340688	RANUM	CARRIE ANN	820 2ND AVE W		NEW ENGLAND	ND	58647	1861623456	37	Pediatrics	434004	WEST RIVER HEALTH SERVIC	1831286160		

79	$1,489	450260821	WHITE DRUG #59		239 2ND AVE NW		VALLEY CITY	ND	58072	1023107638	54	Home Medical Equipment	7874001	WHITE DRUG #59	1023107638		
13	$1,489	861123162	BRAUN	MANDI	310 N 10TH ST		BISMARCK	ND	58501	1407891112	97	Physician Assistant	6459001	ST ALEXIUS HEART & LUNG	1194823021		
13	$1,488	264314533	BLEESS TOPPEN	JACQUELINE	510 4TH ST S		FARGO	ND	58103	1336481803	50	Nurse Practitioner	7444001	PSJ ACQUISITION LLC	1679709802		
103	$1,487	450445795	SAYLER	LARRY	323 CENTRAL AVE N	STE 202	VALLEY CITY	ND	58072	1831271287	35	Chiropractor	1049001	CENTRAL AVE CHIROPRACTIC	1891877239		
9	$1,487	450226909	GROSS	GERALD	904 5TH AVE NE		JAMESTOWN	ND	58401	1013935667	75	Oncology	7742018	SANFORD HEALTH JAMESTOWN	1184917924		
4	$1,487	450339582	GLEN ULLIN AMBULAN	VC	206 2ND ST S		GLEN ULLIN	ND	58631	1881766525	59	Ambulance Service	1961001	GLEN ULLIN AMBULANCE SER	1881766525		
31	$1,486	261175213	CROWE	CHERYL	3000 32ND AVE S		FARGO	ND	58103	1760416374	67	Occupational Therapy	6885030	INNOVIS HEALTH, LLC DBA	1578907655		
14	$1,486	911770748	MCGRANN	PAMELA	801 BROADWAY NORTH		FARGO	ND	58102	1356311898	52	Medical Supply Co with Prosthetist	3001	SANFORD BROADWAY CLINIC	1942241351		
27	$1,484	450226558	CHWEH	THOMAS	1 BURDICK EXPY W		MINOT	ND	58701	1073702361	37	Pediatrics	635032	TRINITY MEDICAL GROUP	1083653752		
10	$1,483	450226711	ACHARYA	PRANAB	900 E BROADWAY AVE		BISMARCK	ND	58501	1629385117	11	Internal Medicine	501001	ST ALEXIUS MEDICAL CENTE	1205868429		
6	$1,481	450226909	STEVENSON	JAMES	1720 UNIVERSITY DR S		FARGO	ND	58103	1417286683	43	Certified Registered Nurse Anesthetist	7742004	SANFORD SOUTH UNIVERSITY	1184917924		
98	$1,480	450363176	VETTLESON	LINDSAY	1707 GOLD DR S STE 101		FARGO	ND	58103	1619157302	68	Licensed Registered Dietitian	5595001	INTERNAL MEDICINE ASSOCI	1144313743		
9	$1,478	450450254	ALBERT	KORY	600 N 9TH ST		BISMARCK	ND	58501	1326148859	43	Certified Registered Nurse Anesthetist	1261001	BISMARCK SURGICAL ASSOCI	1487814356		
10	$1,478	450226909	WYNNE	JOSHUA	929 CENTRAL AVE NW		E GRAND FORKS	MN	56721	1376565960	6	Cardivascular Disease	7742021	SANFORD HEALTH 929 CENTR	1184917924		
23	$1,478	450226909	VOGT	DAVID	1412 MAIN ST		HAWLEY	MN	56549	1063463966	8	Family Practice	7742015	SANFORD HAWLEY CLINIC	1184917924		
28	$1,477	450231181	MARTIN	RICHARD	2422 20TH ST SW		JAMESTOWN	ND	58401	1689662983	8	Family Practice	124001	JAMESTOWN REGIONAL MEDIC	1821044652		
40	$1,476	450226558	DANNENBERG	LEE	404 HWY 2 EAST		DEVILS LAKE	ND	58301	1992897615	18	Opthalmology	635036	TRINITY REGIONAL EYECARE	1083653752		
16	$1,475	450413089	HELLEBUSH	LESLIE	201 SW 7TH ST STE 2		RUGBY	ND	58368	1619317724	41	Optometrist	595001	DAKOTA EYE INSTITUTE	1962449835		
5	$1,473	450231181	BLOCK	TERESA	2422 20TH ST SW		JAMESTOWN	ND	58401	1326176181	43	Certified Registered Nurse Anesthetist	77001	JAMESTOWN REGIONAL MEDIC	1407957277		
17	$1,473	450310462	KLAVA	WILLIAM	1300 S COLUMBIA RD		GRAND FORKS	ND	58201	1174544308	25	Physical Medicine and Rehab	232001	ALTRU REHABILITATION CEN	1437248945		
34	$1,472	450226909	LEVITT	RALPH	820 4TH ST N		FARGO	ND	58102	1548287212	75	Oncology	7742002	SANFORD ROGER MARIS CANC	1184917924		
7	$1,467	450450745	CARSON	KATHERINE	3035 DEMERS AVE		GRAND FORKS	ND	58201	1396184123	50	Nurse Practitioner	112001	VALLEY BONE AND JOINT CL	1033180153		
28	$1,466	261175213	VETTER	RICHARD	1401 13TH AVE E		WEST FARGO	ND	58078	1427085042	8	Family Practice	6885033	INNOVIS HEALTH, LLC DBA	1487990339		
18	$1,461	264348313	FAWCETT	DONNA	1911 NORTH 11TH STREET		BISMARCK	ND	58501	1801097480	66	Speech Therapy	599001	THE ENRICHMENT GARDEN	1730212325		
6	$1,460	274251591	COMMUNITY AMBULANC	RVICE OF N	818 1ST AVE N		NEW ROCKFORD	ND	58356	1770824492	59	Ambulance Service	1979002	COMMUNITY AMBULANCE SERV	1770824492		
95	$1,458	450226558	MAXSON	JERRICA	101 3RD AVE SW		MINOT	ND	58701	1366699779	64	Audiology	635027	TRINITY MEDICAL GROUP	1083653752		
16	$1,453	450310462	GASPARINI	ANDREW	1200 S COLUMBIA RD		GRAND FORKS	ND	58201	1700011459	8	Family Practice	62001	ALTRU HOSPITAL	1154346161		
17	$1,450	450431679	BOSTYAN	EVA	311 4 ST S STE 106		GRAND FORKS	ND	58201	1932274149	83	Licenses Addiction Counselor-Chemical Dependency	423002	DRAKE COUNSELING SERVICE	1427243948		
4	$1,448	450231675	BAKKE	AMY	1200 N 7TH ST		OAKES	ND	58474	1750340360	43	Certified Registered Nurse Anesthetist	47001	OAKES COMMUNITY HOSPITAL	1477724433		
47	$1,447	450226558	TURK	SAMIR	1 BURDICK EXPY W		MINOT	ND	58701	1770657157	6	Cardivascular Disease	635032	TRINITY MEDICAL GROUP	1083653752		
16	$1,447	450226426	KULKARNI	AMIT	316 OHMER ST		BOTTINEAU	ND	58318	1710939996	11	Internal Medicine	43001	ST ANDREWS HEALTH CENTER	1306903331		
5	$1,447	450254692	OXNER	WILLIAM	702 1ST ST SW		CROSBY	ND	58730	1396740460	43	Certified Registered Nurse Anesthetist	50001	ST LUKES HOSPITAL	1215942032		
90	$1,447	454159294	ANDRIST	STANTON	420 CENTER AVE STE 41		MOORHEAD	MN	56560	1336133586	41	Optometrist	7843001	MOORHEAD VISION ASSOCIAT	1164794780		
6	$1,445	450226558	CHAUDHARY	AYAZ	400 BURDICK EXPY E		MINOT	ND	58701	1639289382	10	Gastronenterology	635006	TRINITY MEDICAL GROUP	1083653752		
83	$1,443	743177186	KB PHARMACY PLLC D	RAFTON DRU	38 E 12TH ST		GRAFTON	ND	58237	1740228774	54	Home Medical Equipment	6862001	KB PHARMACY PLLC DBA GRA	1740228774		
52	$1,443	450226558	NARANJA	IMELDA	604 1ST STREET NORTH		NEW TOWN	ND	58763	1609957034	1	General Practice	635030	TRINITY COMMUNITY CLINIC	1083653752		
134	$1,442	911770748	BOROWICZ	RONALD	1220 SHEYENNE ST		WEST FARGO	ND	58078	1588681589	8	Family Practice	3020	SANFORD WEST FARGO CLINI	1942241351		
87	$1,441	450451299	WOODMANSEE	JAMES	3750 32ND AVE S STE 109		GRAND FORKS	ND	58201	1912008335	41	Optometrist	1562001	WOODMANSEE, JAMES, OD DB	1154590727		
12	$1,440	450226700	SCHMIT	JULIE	300 N 7TH ST		BISMARCK	ND	58501	1225085491	50	Nurse Practitioner	440001	SANFORD MEDICAL CENTER/B	1811941172		
23	$1,435	450226711	GUTHMILLER	TANYA	900 E BROADWAY AVE		BISMARCK	ND	58501	1740333616	50	Nurse Practitioner	501001	ST ALEXIUS MEDICAL CENTE	1205868429		
20	$1,435	450226700	BALF	GABRIELA	414 N 7TH ST		BISMARCK	ND	58501	1124024724	26	Psychiatry (MD)	4046	SANFORD SEVENTH AND ROSS	1811941172		
11	$1,434	204947673	LOPEZ	DAVID	300 NP AVE SUITE 101		FARGO	ND	58102	1275629719	26	Psychiatry (MD)	7505001	PSYCHIATRY NETWORKS	1992045108		
41	$1,433	261175213	MEHTA	DHARMESH	3000 32ND AVE S		FARGO	ND	58103	1992918023	11	Internal Medicine	6885030	INNOVIS HEALTH, LLC DBA	1578907655		
24	$1,433	261175213	NEUMANN	JAMES	3000 32ND AVE S		FARGO	ND	58103	1841239480	11	Internal Medicine	6885030	INNOVIS HEALTH, LLC DBA	1578907655		
44	$1,429	450311516	CARBONELL	ANTONIO	3 EAST 4TH ST #100		WILLISTON	ND	58801	1891869723	72	Emergency Medicine	114001	WILLISTON RADIOLOGY CONS	1942375852		
50	$1,428	452503969	BRENNO-WATTERUD	DANIELLE	1213 15TH AVE W		WILLISTON	ND	58801	1205924636	41	Optometrist	7751001	WILLISTON BASIN EYECARE	1225323504		
16	$1,428	450437652	OLSON	NEIL	151 S 4TH ST STE 401		GRAND FORKS	ND	58201	1336171255	83	Licenses Addiction Counselor-Chemical Dependency	242001	NORTHEAST HUMAN SERVICE	1366496341		
81	$1,427	450433194	KAHL	JAMIE	105 BROADWAY EAST		STEELE	ND	58482	1548272263	35	Chiropractor	6772002	STEELE CHIROPRACTIC CLIN	1205848108		
5	$1,427	450306787	MYERS	MICHAEL	909 2ND ST		LANGDON	ND	58249	1457387391	43	Certified Registered Nurse Anesthetist	54001	CAVALIER COUNTY MEMORIAL	1750328662		
381	$1,425	911770748	CLARDY	DAVID	621 DEMERS AVE		E GRAND FORKS	MN	56721	1063430791	6	Cardivascular Disease	3080	SANFORD HEALTH 621 DEMER	1942241351		
51	$1,418	260562958	AHMANN	JESSICA	1525 31 AVE SW SUITE E		MINOT	ND	58701	1477709459	41	Optometrist	7019001	JOHNSON EYECARE AND EYEW	1073708533		
184	$1,416	562587064	AMERICAN DRUG STOR	ELAWARE LL	601 KIRKWOOD MALL		BISMARCK	ND	58504	1528000718	63	Pharmacy	7162006	AMERICAN DRUG STORES DEL	1528000718		
37	$1,416	450363176	HOLTZ	PAMELA	1707 GOLD DR S STE 101		FARGO	ND	58103	1982973251	50	Nurse Practitioner	5595001	INTERNAL MEDICINE ASSOCI	1144313743		
21	$1,415	450226909	TROUT	MALACHIA	2400 32ND AVE S		FARGO	ND	58103	1063641579	37	Pediatrics	7742008	SANFORD SOUTHPOINTE CLIN	1184917924		
22	$1,415	450437654	MCEWEN	BILLY	200 HIGHWAY 2 SW		DEVILS LAKE	ND	58301	1568805778	83	Licenses Addiction Counselor-Chemical Dependency	159001	LAKE REGION HUMAN SERVIC	1669411930		
6	$1,414	450226909	STAHL	HEIDI	1720 UNIVERSITY DR S		FARGO	ND	58103	1629344569	43	Certified Registered Nurse Anesthetist	7742004	SANFORD SOUTH UNIVERSITY	1184917924		
11	$1,414	450437648	AASEN	PAULETTE	1237 W DIVIDE AVE STE 5		BISMARCK	ND	58501	1679512586	62	Psychology	241001	WEST CENTRAL HUMAN SERVI	1649226713		
30	$1,411	261175213	SKOGEN	JEFFREY	3000 32ND AVE S		FARGO	ND	58103	1891802278	11	Internal Medicine	6885030	INNOVIS HEALTH, LLC DBA	1578907655		
57	$1,410	411545797	THOMAS	KENNEDY	406 E MAIN ST		ADA	MN	56510	1336241785	35	Chiropractor	1402001	ADA CHIROPRACTIC CLINIC	1336241785		
7	$1,409	450226700	HOSKINS	NICHOLAS	300 N 7TH ST		BISMARCK	ND	58501	1932369634	5	Anesthesiology (MD)	440001	SANFORD MEDICAL CENTER/B	1811941172		
26	$1,408	450282159	FETTING	BRENDA	101 E BROADWAY AVE		BISMARCK	ND	58501	1124202353	83	Licenses Addiction Counselor-Chemical Dependency	269001	HEARTVIEW FOUNDATION	1417000233		
27	$1,405	200544802	BROWN	WENDY	2829 S UNIV DR STE 101		FARGO	ND	58103	1952565517	97	Physician Assistant	6252001	URGENT MEDICINE ASSOCIAT	1154490399		
16	$1,403	450437651	HAJEK	PHILIP	2624 9TH AVE S		FARGO	ND	58103	1588693253	26	Psychiatry (MD)	100001	SOUTHEAST HUMAN SERVICE	1932146941		
14	$1,403	450310462	STULL	BENJAMIN	1200 S COLUMBIA RD		GRAND FORKS	ND	58201	1073718169	72	Emergency Medicine	62001	ALTRU HOSPITAL	1154346161		
14	$1,402	261175213	ZARLING	ANNE	1702 UNIVERSITY DR S		FARGO	ND	58103	1740224906	43	Certified Registered Nurse Anesthetist	6885031	INNOVIS HEALTH, LLC DBA	1255677084		
23	$1,401	261175213	WRIGHT	AARON	132 4TH AVE NE		VALLEY CITY	ND	58072	1457309478	30	Radiology	6885024	INNOVIS HEALTH, LLC DBA	1962682617		

9	$1,401	450226909	BOE	JULIE	1720 UNIVERSITY DR S		FARGO	ND	58103	1679590673	43	Certified Registered Nurse Anesthetist	7742004	SANFORD SOUTH UNIVERSITY	1184917924		
7	$1,400	204503232	COOK	JERRY	4710 AMBER VALLEY PKWY S	STE A	FARGO	ND	58104	1114074960	42	Dentist	7203001	COOK ENDODONTICS	1114074960		
17	$1,400	450226909	REINHOLZ	TERESA	2301 S 25TH ST STE A		FARGO	ND	58103	1043231269	97	Physician Assistant	7742011	SANFORD ORTHOPEDICS SPOR	1184917924		
56	$1,399	203909937	WEIR	JOHN	849 3RD AVE W		DICKINSON	ND	58601	1972596518	41	Optometrist	256001	WEIR EYE CLINIC, LLC	1629076245		
50	$1,399	391653261	MITTET	DAVID	112 1ST AVE SE		DILWORTH	MN	56529	1700093242	35	Chiropractor	1498001	DILWORTH CHIROPRACTIC	1700093242		
4	$1,398	450226700	HART	ERIC	300 N 7TH ST		BISMARCK	ND	58501	1942497243	48	Podiatry, Surgical chiropody	440001	SANFORD MEDICAL CENTER/B	1811941172		
11	$1,397	450226558	ZAHN	KEITH	1321 W DAKOTA PARKWAY		WILLISTON	ND	58801	1649294836	43	Certified Registered Nurse Anesthetist	635039	TRINITY COMMUNITY CLINIC	1083653752		
65	$1,397	450226909	FISHER	JENNIFER	2400 32ND AVE S		FARGO	ND	58103	1881980415	97	Physician Assistant	7742008	SANFORD SOUTHPOINTE CLIN	1184917924		
20	$1,396	911770748	ANDERSON	STEVEN	1720 UNIVERSITY DR S		FARGO	ND	58103	1518991678	18	Opthalmology	3904	SANFORD SOUTH UNIVERSITY	1942241351		
28	$1,396	450226700	WEIGUM	CINDY	209 7 ST N		BISMARCK	ND	58501	1669578753	50	Nurse Practitioner	4048	SANFORD SEVENTH AND THAY	1811941172		
97	$1,395	450462069	KIRCHNER	TRACY	1711 GOLD DR STE 120		FARGO	ND	58103	1326294513	65	Physical Therapy	5517001	PROFESSIONAL REHABILITAT	1215014105		
98	$1,391	450375236	EMMONS COUNTY PUBL	EALTH	118 SPRUCE AVE E		LINTON	ND	58552	1952511438	60	Public Health or Welfare Agency	4615001	EMMONS COUNTY PUBLIC HEA	1952511438		
29	$1,391	450226711	LARDY	SUSAN	900 E BROADWAY AVE		BISMARCK	ND	58501	1962683276	50	Nurse Practitioner	459001	ST ALEXIUS MEDICAL CENTE	1306832654		
12	$1,390	411873633	CORFMAN	RANDLE	1000 EAST ROSSER		BISMARCK	ND	58501	1649314584	73	Endocrinology	1226001	GREAT PLANES REPRODUCTIV	1396976437		
22	$1,390	450226558	OXNER	WILLIAM	1321 W DAKOTA PARKWAY		WILLISTON	ND	58801	1396740460	43	Certified Registered Nurse Anesthetist	635039	TRINITY COMMUNITY CLINIC	1083653752		
54	$1,389	450310462	BOGER	ESTELLA	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1003833435	50	Nurse Practitioner	9001	ALTRU HEALTH SYSTEM	1043309552		
52	$1,389	454288159	CARR	LACEE	2204 2ND AVE W		WILLISTON	ND	58801	1841591799	35	Chiropractor	7864001	FULL CIRCLE CHIROPRACTIC	1679845960		
35	$1,386	450226711	ABRAMOVITH FEIJO	PAULA	900 E BROADWAY AVE		BISMARCK	ND	58501	1386653384	8	Family Practice	501001	ST ALEXIUS MEDICAL CENTE	1205868429		
23	$1,386	261175213	SKOGEN	JEFFREY	2430 20TH ST SW		JAMESTOWN	ND	58401	1891802278	39	Nephrology	6885018	INNOVIS HEALTH, LLC DBA	1073793725		
43	$1,384	261175213	KEATING	ANNE	275 11TH ST S		WAHPETON	ND	58075	1306089750	18	Opthalmology	6885019	INNOVIS HEALTH, LLC DBA	1790965440		
11	$1,384	260490103	NORMANDIN	SHERMAN	211 4TH ST NE STE 4		DEVILS LAKE	ND	58301	1578838090	62	Psychology	6978001	BLOOMING PRAIRIE ASSESSM	1649461344		
45	$1,382	680560920	JOHNSEN	MELISSA	2800 S COLUMBIA RD #81		GRAND FORKS	ND	58201	1992890586	41	Optometrist	6086001	JOHNSEN, MELISSA, OD	1992890586		
7	$1,382	450226909	WOITZEL	ASHLEY	1720 UNIVERSITY DR S		FARGO	ND	58103	1184972275	43	Certified Registered Nurse Anesthetist	7742004	SANFORD SOUTH UNIVERSITY	1184917924		
51	$1,376	450310462	BERGER	MARK	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1962481747	30	Radiology	9001	ALTRU HEALTH SYSTEM	1043309552		
39	$1,375	450310462	MULCAHY	PAUL	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1467431262	30	Radiology	9001	ALTRU HEALTH SYSTEM	1043309552		
16	$1,374	450310462	KHAN	ZAKI	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1700058849	11	Internal Medicine	9001	ALTRU HEALTH SYSTEM	1043309552		
4	$1,371	450226419	BEARE	RONALD	800 S MAIN AVE		RUGBY	ND	58368	1508895954	43	Certified Registered Nurse Anesthetist	18001	GOOD SAMARITAN HOSPITAL	1588751325		
11	$1,367	450226909	LOUVAR	DANIEL	736 BROADWAY N		FARGO	ND	58102	1912984923	39	Nephrology	7742022	SANFORD BROADWAY MEDICAL	1184917924		
7	$1,366	450226558	MUAWWAD	RAFIK	101 3RD AVE SW		MINOT	ND	58701	1184629420	20	Orthopedic Surgery	635027	TRINITY MEDICAL GROUP	1083653752		
48	$1,365	450432961	DAKOTA FOOT & ANKL	INIC	1733 E CAPITAL AVE		BISMARCK	ND	58501	1427190206	54	Home Medical Equipment	671001	DAKOTA FOOT & ANKLE CLIN	1427190206		
30	$1,365	450226700	ANDES	REBECCA	222 N 7TH ST		BISMARCK	ND	58501	1033315718	50	Nurse Practitioner	4001	SANFORD CLINIC	1811941172		
19	$1,362	450417963	PAULSON	MICHAEL	2100 S COLUMBIA RD	STE 202	GRAND FORKS	ND	58201	1831109818	62	Psychology	474001	FAMILY INSTITUTE PC	1003832783		
8	$1,360	450311334	REEMS	BRENDA	401 N 9TH ST		BISMARCK	ND	58501	1548400260	43	Certified Registered Nurse Anesthetist	236001	MID DAKOTA CLINIC	1275587826		
28	$1,359	760746279	LAMBRECHT	KAYLA	2700 8TH ST NW		MINOT	ND	58703	1033404546	65	Physical Therapy	5439001	FIRST CHOICE PHYSICAL TH	1013098797		
1	$1,357	450226909	MANNHEIMER	ALAN	801 BROADWAY NORTH		FARGO	ND	58102	1679717789	37	Pediatrics	7742001	SANFORD BROADWAY CLINIC	1184917924		
26	$1,355	455428987	SLANN	GUY	3 4TH ST E STE 102		WILLISTON	ND	58801	1487945630	48	Podiatry, Surgical chiropody	8121001	ACCESSIBLE PODIATRY LLC	1962753749		
105	$1,353	450369057	WEBER	GENEVIEVE	1008 ADAMS AVE		HARVEY	ND	58341	1144255423	35	Chiropractor	365001	WEBER CHIROPRACTIC CLINI	1083793749		
18	$1,353	450310462	KARTHAM	SUNIL	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1225228836	11	Internal Medicine	9001	ALTRU HEALTH SYSTEM	1043309552		
5	$1,352	450310159	MYERS	MICHAEL	164 W 13TH ST		GRAFTON	ND	58237	1457387391	43	Certified Registered Nurse Anesthetist	40001	UNITY MEDICAL CENTER	1245216852		
12	$1,351	208928600	MART	MICHELLE	3060 FRONTIER WAY S		FARGO	ND	58104	1083900971	66	Speech Therapy	6961001	PEDIATRIC THERAPY PARTNE	1457479958		
16	$1,350	450226909	TIESZEN	MARK	801 BROADWAY NORTH		FARGO	ND	58102	1003838681	11	Internal Medicine	7742001	SANFORD BROADWAY CLINIC	1184917924		
5	$1,346	450425948	ANDRUSKI	HEIDI	HWY 281 N		CANDO	ND	58324	1881780146	43	Certified Registered Nurse Anesthetist	74001	TOWNER COUNTY MEDICAL CE	1154352169		
30	$1,345	450363176	LUDWIG	RODNEY	1707 GOLD DR S STE 101		FARGO	ND	58103	1518901172	11	Internal Medicine	5595001	INTERNAL MEDICINE ASSOCI	1144313743		
40	$1,345	450226909	IHLE	LORNA	801 BROADWAY NORTH		FARGO	ND	58102	1205853975	97	Physician Assistant	7742001	SANFORD BROADWAY CLINIC	1184917924		
11	$1,343	450226909	BROWN	CHAD	100 4TH ST S		FARGO	ND	58103	1710121116	80	Clinical Social Worker	7742006	SANFORD PROFESSIONAL BUI	1184917924		
16	$1,338	450310462	WOODWARD	GEORGE	1200 S COLUMBIA RD		GRAND FORKS	ND	58201	1811922628	13	Neurology	62001	ALTRU HOSPITAL	1154346161		
41	$1,336	261175213	GUNKELMAN	ASHLEY	1702 UNIVERSITY DR S		FARGO	ND	58103	1629323027	65	Physical Therapy	6885031	INNOVIS HEALTH, LLC DBA	1255677084		
12	$1,332	450437653	WALLS	PAMELA	1015 S BROADWAY STE 18		MINOT	ND	58701	1962573394	44	Psychiatric Nurse	238001	NORTH CENTRAL HUMAN SERV	1477592533		
13	$1,332	450310462	WESTERENG	REBECCA	725 HAMLINE ST		GRAND FORKS	ND	58203	1457408239	71	Certified Diabetic Educator	9009	ALTRU FAMILY MEDICINE RE	1043309552		
3	$1,332	456013474	MYERS	MICHAEL	301 MOUNTAIN ST E		CAVALIER	ND	58220	1457387391	43	Certified Registered Nurse Anesthetist	5633001	PEMBINA COUNTY HOSPITAL	1417093949		
13	$1,331	450226909	TALLURI	KRISHNA	1720 UNIVERSITY DR S		FARGO	ND	58103	1023246824	11	Internal Medicine	7742004	SANFORD SOUTH UNIVERSITY	1184917924		
5	$1,330	450226909	RITTER	FRANK	225 SMITH AVE N STE 201		ST PAUL	MN	55102	1104843002	37	Pediatrics	7748009	MINNESOTA EPILEPSY GROUP	1184917924		
2	$1,330	450439661	HANKINSON AMBULANC	C	102 N MAIN AVE		HANKINSON	ND	58041	1538369780	59	Ambulance Service	3013001	HANKINSON AMBULANCE DIST	1538369780		
21	$1,329	261175213	LADELLA	SUBHASHINI	3000 32ND AVE S		FARGO	ND	58103	1114981255	16	Obstet/Gynecology	6885030	INNOVIS HEALTH, LLC DBA	1578907655		
14	$1,327	261175213	BEDNAR	JENNIFER	1702 UNIVERSITY DR S		FARGO	ND	58103	1083865620	71	Certified Diabetic Educator	6885031	INNOVIS HEALTH, LLC DBA	1255677084		
30	$1,327	450358986	RAU	KAY	1015 4TH AVE S		WISHEK	ND	58495	1821020538	97	Physician Assistant	441001	WISHEK RURAL HEALTH CLIN	1376584623		
86	$1,323	911770748	BREEN	CHARLES	929 CENTRAL AVE NW		E GRAND FORKS	MN	56721	1114944113	8	Family Practice	3055	SANFORD HEALTH 929 CENTR	1942241351		
35	$1,322	261175213	URLAUB	CATHY	3000 32ND AVE S		FARGO	ND	58103	1962433623	97	Physician Assistant	6885030	INNOVIS HEALTH, LLC DBA	1578907655		
119	$1,320	452460915	SMYKOWSKI	BREANNA	22 WILEY AVE		LIDGERWOOD	ND	58053	1962706184	35	Chiropractor	7837001	ALIGNED HEALTH CHIROPRAC	1265789150		
73	$1,320	450422944	DEATHERAGE	JOSEPH	1140 W CAPITOL AVE		BISMARCK	ND	58501	1003859117	19	Oral Surgery	455001	FACE & JAW SURGERY CENTE	1184667305		
114	$1,320	1	GRAND FORKS PUBLIC	OOL	2400 47TH AVE S		GRAND FORKS	ND	58201	0	60	Public Health or Welfare Agency	7788001	GRAND FORKS PUBLIC SCHOO	0		
13	$1,318	911770748	HOMUTH	ANGELA	801 BROADWAY NORTH		FARGO	ND	58102	1699793331	71	Certified Diabetic Educator	3001	SANFORD BROADWAY CLINIC	1942241351		
22	$1,317	450226419	COSTNER	DAVID	215 MAIN ST SE		DUNSEITH	ND	58329	1346542867	50	Nurse Practitioner	18068	HEART OF AMERICA JOHNSON	1568633865		
19	$1,316	274361413	HOLLEVOET	JACQUALINE	3000 N 14TH ST #2A		BISMARCK	ND	58503	1710905716	50	Nurse Practitioner	8027001	ST SOPHIES, LLC	1679916621		
112	$1,314	461473718	BYRD	NANCY	320 BOOTH AVE		LARIMORE	ND	58251	1477690501	35	Chiropractor	7955001	LARIMORE CHIROPRACTIC CL	1376888354		
12	$1,314	450412887	PODRYGULA	STEPHAN	600 22ND AVE NW		MINOT	ND	58703	1205821527	62	Psychology	1608001	PSYCHOLOGICAL SERVICES P	1164624458		

36	$1,312	450226700	JUDICE	ROSS	414 N 7TH ST		BISMARCK	ND	58501	1558368514	27	Psychiatry, Neurology	4046	SANFORD SEVENTH AND ROSS	1811941172		
15	$1,310	202404179	SANFORD HEALTHCARE	ESSORIES E	621 DEMERS AVE		E GRAND FORKS	MN	56721	1689857203	79	Home Infusion	7364001	SANFORD HEALTHCARE ACCES	1689857203		
66	$1,310	450433194	KJOS	RUSTY	425 S 7TH ST		BISMARCK	ND	58504	1487993044	35	Chiropractor	572001	SOUTHRIDGE CHIROPRACTIC	1205848108		
9	$1,310	450226909	BIEBL	SARA	2701 13TH AVE S		FARGO	ND	58103	1558662148	62	Psychology	7742009	SANFORD CHILDRENS SOUTHW	1184917924		
28	$1,308	450226909	ARNESS	RICHARD	904 5TH AVE NE		JAMESTOWN	ND	58401	1902824600	48	Podiatry, Surgical chiropody	7742018	SANFORD HEALTH JAMESTOWN	1184917924		
47	$1,308	450310462	KOSMATKA	ERIKA	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1760745228	97	Physician Assistant	9001	ALTRU HEALTH SYSTEM	1043309552		
18	$1,305	450226909	CRAWFORD	MELISSA	1720 UNIVERSITY DR S		FARGO	ND	58103	1437404795	50	Nurse Practitioner	7742004	SANFORD SOUTH UNIVERSITY	1184917924		
14	$1,305	273981362	PAULSON	BREANNA	512 MAIN ST		WILLISTON	ND	58801	1447690458	50	Nurse Practitioner	7662002	ELITE HEALTH & FITNESS	1235481540		
29	$1,304	261175213	WASEMILLER	PEGGY	275 11TH ST S		WAHPETON	ND	58075	1225069693	67	Occupational Therapy	6885019	INNOVIS HEALTH, LLC DBA	1790965440		
6	$1,301	450311334	CHRIST	RENEE	401 N 9TH ST		BISMARCK	ND	58501	1023161585	43	Certified Registered Nurse Anesthetist	236001	MID DAKOTA CLINIC	1275587826		
11	$1,300	450226700	WALTER	JULIEANNE	515 EAST BROADWAY AVE		BISMARCK	ND	58501	1720336753	71	Certified Diabetic Educator	4066	SANFORD 5TH & BROADWAY C	1811941172		
12	$1,299	450226909	TEHVEN	KATHY	1717 SOUTH UNIVERSITY DR		FARGO	ND	58103	1215958558	68	Licensed Registered Dietitian	7742027	SANFORD 1717 MEDICAL BUI	1184917924		
25	$1,298	261175213	SAMPSON	JEROME	132 4TH AVE NE		VALLEY CITY	ND	58072	1487681599	30	Radiology	6885024	INNOVIS HEALTH, LLC DBA	1962682617		
14	$1,296	450226423	THOMPSON	ANNA	107 WEST MAIN SUITE 350		BISMARCK	ND	58501	1821329079	88	#N/A	283002	THE VILLAGE FAMILY SERVI	1568492353		
5	$1,295	450226909	JOHNSON	LEIF	1720 UNIVERSITY DR S		FARGO	ND	58103	1437495447	43	Certified Registered Nurse Anesthetist	7742004	SANFORD SOUTH UNIVERSITY	1184917924		
53	$1,294	450342671	KONZAK-JONES	M. KIM	360 DIVISION AVE STE 200		GRAND FORKS	ND	58201	1386735181	8	Family Practice	189001	VALLEY HEALTH	1194922328		
73	$1,294	911770748	ALZOUBI	AMMAR	820 4TH ST N		FARGO	ND	58102	1386720340	75	Oncology	3030	SANFORD ROGER MARIS CANC	1942241351		
27	$1,293	450226909	SANAULLAH	MOHAMED	1720 UNIVERSITY DR S		FARGO	ND	58103	1588685705	11	Internal Medicine	7742004	SANFORD SOUTH UNIVERSITY	1184917924		
134	$1,286	450416059	THE MEDICINE SHOPP		1605 S UNIVERSITY DR		FARGO	ND	58103	1538271549	63	Pharmacy	3171001	THE MEDICINE SHOPPE	1538271549		
19	$1,285	911770748	PFENNIG	GREGORY	201 4TH AVE STE 1		ENDERLIN	ND	58027	1932126414	50	Nurse Practitioner	3025	SANFORD HEALTH ENDERLIN	1942241351		
86	$1,284	364598949	TOWNER COUNTY PUBL	EALTH DIST	404 5TH AVE STE 3		CANDO	ND	58324	1356495675	60	Public Health or Welfare Agency	7072001	TOWNER COUNTY PUBLIC HEA	1356495675		
20	$1,284	261175213	TEPASTTE	MICHELLE	132 4TH AVE NE		VALLEY CITY	ND	58072	1346285541	8	Family Practice	6885024	INNOVIS HEALTH, LLC DBA	1962682617		
98	$1,283	450311334	NESS	JOE	401 N 9TH ST		BISMARCK	ND	58501	1811938343	64	Audiology	236001	MID DAKOTA CLINIC	1275587826		
47	$1,282	261687506	GABRIEL-JOHNSON	JANICE	136 2 AVE NE		VALLEY CITY	ND	58072	1104000124	67	Occupational Therapy	7088001	PAIN RELIEF CENTER	1104000124		
20	$1,282	450226558	NORBY	ALICIA	1 BURDICK EXPY W		MINOT	ND	58701	1558589994	11	Internal Medicine	635032	TRINITY MEDICAL GROUP	1083653752		
101	$1,282	450384778	TRAUGER	GARY	105 2ND AVE NE		WATFORD CITY	ND	58854	1710063771	35	Chiropractor	628001	TRAUGER CHIROPRACTIC CEN	1710063771		
51	$1,281	208704808	HELGESON	DANIELLE	1121 9TH AVE W		WEST FARGO	ND	58078	1679635312	66	Speech Therapy	5937001	LEAPS AND BOUNDS SPEECH	1689731879		
69	$1,281	474964063	BURUD	CHAD	1325 N HWY 75		BRECKENRIDGE	MN	56520	1104927268	35	Chiropractor	1142002	BURUD CHIROPRACTIC	1104927268		
64	$1,280	450310159	WOLD	PETER	164 WEST 13TH STREET		GRAFTON	ND	58237	1861471633	30	Radiology	282001	GRAFTON FAMILY CLINIC	1558423665		
8	$1,279	450226909	CLARDY	DAVID	904 5TH AVE NE		JAMESTOWN	ND	58401	1063430791	6	Cardivascular Disease	7742018	SANFORD HEALTH JAMESTOWN	1184917924		
48	$1,278	450309162	ND EYE CLINIC		3035 DEMERS AVE		GRAND FORKS	ND	58201	1023168663	58	Other Individual Supplier - Optometric Supplier	222001	NORTH DAKOTA EYE CLINIC	1972563815		
13	$1,275	410695598	SALAZAR-TIER	MARY RUTH	2400 ST FRANCIS DRIVE		BRECKENRIDGE	MN	56520	1467560441	8	Family Practice	207001	ST FRANCIS MEDICAL CENTE	1891954574		
15	$1,274	450437651	MASTEL	LISA	2624 9TH AVE S		FARGO	ND	58103	1013934652	83	Licenses Addiction Counselor-Chemical Dependency	100001	SOUTHEAST HUMAN SERVICE	1932146941		
9	$1,273	410724029	NUPDAL	JASON	323 S MINNESOTA ST		CROOKSTON	MN	56716	1881625150	50	Nurse Practitioner	5548016	RIVERVIEW SPECIALTY CLIN	1487944898		
38	$1,268	450310462	MAKAREM	ANDRES	400 S MINNESOTA ST		CROOKSTON	MN	56716	1831327964	11	Internal Medicine	406001	ALTRU CROOKSTON	1760494330		
24	$1,268	911770748	HENDRICKS	LARRY	69 HIGHWAY 13 W		GWINNER	ND	58040	1992723530	97	Physician Assistant	3072	SANFORD HEALTH GWINNER C	1942241351		
16	$1,268	261175213	BEDNAR	JENNIFER	1702 UNIVERSITY DR S		FARGO	ND	58103	1083865620	68	Licensed Registered Dietitian	6885031	INNOVIS HEALTH, LLC DBA	1255677084		
11	$1,267	450226700	OLSON	JANEL	300 N 7TH ST		BISMARCK	ND	58501	1841501236	50	Nurse Practitioner	440001	SANFORD MEDICAL CENTER/B	1811941172		
30	$1,265	411384358	BOCHENSKI	ROBERT	109 S MINNESOTA ST		WARREN	MN	56762	1558587717	8	Family Practice	2067001	NORTH VALLEY HEALTH CENT	1073516357		
18	$1,265	911770748	SPINA	JULIE	211 E MILL ST		PELICAN RAPIDS	MN	56572	1194747758	8	Family Practice	3906	SANFORD HEALTH PELICAN R	1942241351		
18	$1,265	271588494	VOSBURG	DOREEN	2913 12TH ST S		FARGO	ND	58103	1114251063	88	#N/A	7489001	VOSBURG COUNSELING	1114251063		
20	$1,264	450310462	MEES	CHRISTOPHE	1200 S COLUMBIA RD		GRAND FORKS	ND	58201	1750676342	8	Family Practice	62001	ALTRU HOSPITAL	1154346161		
7	$1,263	450310462	RUSTEN	HEATHER	1200 S COLUMBIA RD		GRAND FORKS	ND	58201	1619067584	11	Internal Medicine	62001	ALTRU HOSPITAL	1154346161		
42	$1,263	450430628	GROTHEM	AVIS	301 NP AVE		FARGO	ND	58102	1841379401	50	Nurse Practitioner	576001	FAMILY HEALTHCARE CENTER	1710066352		
5	$1,256	450310462	HANSON	DANE	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1801987813	43	Certified Registered Nurse Anesthetist	9001	ALTRU HEALTH SYSTEM	1043309552		
26	$1,255	450226700	HAHN	SONDRA	801 21ST AVENUE SE		MINOT	ND	58701	1730349929	65	Physical Therapy	4052	SANFORD HEALTH OCCUPATIO	1669524351		
13	$1,255	261175213	LANTZ	LEO	1702 UNIVERSITY DR S		FARGO	ND	58103	1720022296	43	Certified Registered Nurse Anesthetist	6885031	INNOVIS HEALTH, LLC DBA	1255677084		
54	$1,255	800514151	BIESIOT	VINCENT	2456 3RD AVE W		DICKINSON	ND	58601	1376695932	41	Optometrist	7214001	BETTER VISION PC	1093003386		
17	$1,253	450226711	HYDER	SYED	900 E BROADWAY AVE		BISMARCK	ND	58501	1245383108	13	Neurology	501001	ST ALEXIUS MEDICAL CENTE	1205868429		
36	$1,253	911770748	KHAGHANY	KAMRAN	1720 UNIVERSITY DR S		FARGO	ND	58103	1255502498	30	Radiology	3904	SANFORD SOUTH UNIVERSITY	1942241351		
12	$1,252	450226909	CULLEN	NICOLE	929 CENTRAL AVE NW		E GRAND FORKS	MN	56721	1114257656	48	Podiatry, Surgical chiropody	7742021	SANFORD HEALTH 929 CENTR	1184917924		
30	$1,251	450310462	RING	KARIN	400 S MINNESOTA ST		CROOKSTON	MN	56716	1407948839	97	Physician Assistant	406001	ALTRU CROOKSTON	1760494330		
21	$1,244	450321538	ACKERMAN	DUNCAN	1600 2ND AVE SW STE 19		MINOT	ND	58701	1508842154	20	Orthopedic Surgery	188002	THE BONE & JOINT CENTER,	1750307872		
1	$1,244	450226909	PIATT	BRUCE	2400 32ND AVE S		FARGO	ND	58103	1972532240	20	Orthopedic Surgery	7742008	SANFORD SOUTHPOINTE CLIN	1184917924		
9	$1,243	43755538	SKYBERG	ANGELA	3290 20TH ST S		FARGO	ND	58104	1508917659	97	Physician Assistant	5917001	PLAINS MEDICAL CLINIC LL	1073698460		
20	$1,241	450226700	LAUMB	KELLIE	2615 FAIRWAY ST		DICKINSON	ND	58601	1982683215	97	Physician Assistant	4008	SANFORD HEALTH DICKINSON	1811941172		
6	$1,238	450311334	KLEIN	KEVIN	401 N 9TH ST		BISMARCK	ND	58501	1639222110	43	Certified Registered Nurse Anesthetist	236001	MID DAKOTA CLINIC	1275587826		
138	$1,238	753228871	WHITE	LINDSEY	3108 S BROADWAY STE B		MINOT	ND	58701	1770617219	35	Chiropractor	6937001	CHIROPRACTIC SOLUTIONS	1770617219		
7	$1,238	450226909	WICK	TWYLA	1720 UNIVERSITY DR S		FARGO	ND	58103	1194742866	43	Certified Registered Nurse Anesthetist	7742004	SANFORD SOUTH UNIVERSITY	1184917924		
13	$1,237	450310462	BRYAN	ERICH	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1740459551	30	Radiology	9001	ALTRU HEALTH SYSTEM	1043309552		
25	$1,236	410851371	TAYLOR	HEATHER	603 BRUCE ST		CROOKSTON	MN	56716	1053691436	88	#N/A	1269001	NORTHWESTERN MENTAL HEAL	1508835133		
25	$1,235	450310462	WIESE	DON	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1114908159	30	Radiology	9001	ALTRU HEALTH SYSTEM	1043309552		
32	$1,234	452503969	ANDERSON	ALLISON	1213 15TH AVE W		WILLISTON	ND	58801	1336478924	41	Optometrist	7751001	WILLISTON BASIN EYECARE	1225323504		
26	$1,233	261175213	BROWN	CAMILLE	3000 32ND AVE S		FARGO	ND	58103	1407127848	50	Nurse Practitioner	6885030	INNOVIS HEALTH, LLC DBA	1578907655		
2	$1,231	263357435	DUCHSHERER	CHARLES	4357 13 AVE S SUITE 106		FARGO	ND	58103	1861436974	42	Dentist	8102001	DAKOTA SMILES	1740430198		
12	$1,230	450310462	FLEISSNER	PAUL	1300 S COLUMBIA RD		GRAND FORKS	ND	58201	1659462661	25	Physical Medicine and Rehab	232001	ALTRU REHABILITATION CEN	1437248945		

18	$1,230	450226909	ANDERSON	BRAD	520 CHAUTAUQUA BLVD		VALLEY CITY	ND	58072	1649298381	48	Podiatry, Surgical chiropody	7742016	SANFORD HEALTH VALLEY CI	1184917924		
24	$1,228	450260821	WAGNER	AMANDA	2211 16TH ST NW STE B		MINOT	ND	58703	1144579087	63	Pharmacy	4467001	WHITE DRUG #40	1679663512		
3	$1,228	456013474	TRONTVET	KENT	301 MOUNTAIN ST E		CAVALIER	ND	58220	1093746877	43	Certified Registered Nurse Anesthetist	5633001	PEMBINA COUNTY HOSPITAL	1417093949		
18	$1,227	261175213	KITAGAWA	BENJI	3000 32ND AVE S		FARGO	ND	58103	1770685265	72	Emergency Medicine	6885016	ESSENTIA HEALTH HOSPITAL	1215125463		
12	$1,226	911770748	OSTLIE	JANE	600 1ST ST SE		MAYVILLE	ND	58257	1063672749	8	Family Practice	3003	SANFORD MAYVILLE	1942241351		
16	$1,225	450437648	IBACH	HEATHER	1237 W DIVIDE AVE STE 5		BISMARCK	ND	58501	1972829950	83	Licenses Addiction Counselor-Chemical Dependency	241001	WEST CENTRAL HUMAN SERVI	1649226713		
11	$1,225	208928600	HENDRICKSON	JODI	3060 FRONTIER WAY S		FARGO	ND	58104	1275680720	65	Physical Therapy	6961001	PEDIATRIC THERAPY PARTNE	1457479958		
8	$1,218	264314533	JARVIS	JULIE	510 4TH ST S		FARGO	ND	58103	1417181546	26	Psychiatry (MD)	7444001	PSJ ACQUISITION LLC	1679709802		
9	$1,218	450437653	SHALEEN	LORI	1015 S BROADWAY STE 18		MINOT	ND	58701	1356487821	62	Psychology	238001	NORTH CENTRAL HUMAN SERV	1477592533		
9	$1,218	201278075	MCBRIDE	ROSANNE	1407 24TH AVE S STE 520		GRAND FORKS	ND	58201	1942397708	62	Psychology	6359001	AGASSIZ ASSOCIATES, PLLC	1700972122		
2	$1,215	911749011	EDGELEY COMMUNITY	LA	108 7TH ST		EDGELEY	ND	58433	1053491860	59	Ambulance Service	2886001	EDGELEY COMMUNITY AMBULA	1053491860		
8	$1,213	450226558	ROBINSON	WILLIAM	504 1ST ST SE		MOHALL	ND	58761	1023052321	72	Emergency Medicine	635033	TRINITY COMMUNITY CLINIC	1083653752		
2	$1,212	363417532	MICHIGAN AMBULANCE	VI	117 BROADWAY		MICHIGAN	ND	58259	1962614461	59	Ambulance Service	1882001	MICHIGAN AREA AMBULANCE	1962614461		
6	$1,212	450311334	TURMAN	RICHARD	401 N 9TH ST		BISMARCK	ND	58501	1578616827	43	Certified Registered Nurse Anesthetist	236001	MID DAKOTA CLINIC	1275587826		
32	$1,211	450321538	THE BONE & JOINT C	R	310 N 9TH ST		BISMARCK	ND	58501	1750307872	30	Radiology	188001	THE BONE & JOINT CENTER,	1750307872		
87	$1,211	273224344	TSIBUR-MAYER	ALEXANDRA	448 21 ST W STE D-1		DICKINSON	ND	58601	1508068503	65	Physical Therapy	7711001	THERAPY SOLUTIONS	1801195045		
63	$1,211	274664038	CROCKETT	JODI	2829 UNIVERSITY DR S	STE 2	FARGO	ND	58103	1992800551	65	Physical Therapy	7667001	PT OT PARTNERS PC	1194021873		
151	$1,210	450462069	RUGG	JENNIFER	1711 GOLD DR STE 120		FARGO	ND	58103	1235161670	65	Physical Therapy	5517001	PROFESSIONAL REHABILITAT	1215014105		
17	$1,210	450226700	AUCK	TONYA	300 N 7TH ST		BISMARCK	ND	58501	1447514203	50	Nurse Practitioner	440001	SANFORD MEDICAL CENTER/B	1811941172		
4	$1,207	456016649	MOHALL AMBULANCE S	CE	104 CENTRAL AVE N		MOHALL	ND	58761	1154411676	59	Ambulance Service	1860001	MOHALL AMBULANCE SERVICE	1154411676		
28	$1,207	261175213	GUNKELMAN	ASHLEY	801 BELSLY BLVD S		MOORHEAD	MN	56560	1629323027	65	Physical Therapy	6885034	INNOVIS HEALTH, LLC DBA	1659617504		
80	$1,205	450274857	NORTHPORT DRUG		2522 N BROADWAY		FARGO	ND	58102	1457419962	63	Pharmacy	3094001	NORTHPORT DRUG	1457419962		
15	$1,205	411384358	HOUSER	JEREMY	109 S MINNESOTA ST		WARREN	MN	56762	1275794596	97	Physician Assistant	2067001	NORTH VALLEY HEALTH CENT	1073516357		
2	$1,204	861123162	HARVEY	WILLIAM	310 N 10TH ST		BISMARCK	ND	58501	1265592547	5	Anesthesiology (MD)	6459001	ST ALEXIUS HEART & LUNG	1194823021		
32	$1,203	450358986	HAUFF	ROSEMARY	321 MAIN ST		GACKLE	ND	58442	1225062722	97	Physician Assistant	610001	WISHEK RURAL HEALTH CLIN	1154522241		
17	$1,202	450227391	SHARP	JODY	213 2ND AVE NE		ROLLA	ND	58367	1942451596	50	Nurse Practitioner	401001	PRESENTATION MEDICAL CEN	1265404958		
9	$1,202	411687554	LALL	RITA	1104 7TH AVE S		MOORHEAD	MN	56563	1508804543	62	Psychology	6085001	HENDRIX HEALTH CENTER	1497881494		
2	$1,200	450231181	PETERSON	RENEE	2422 20TH ST SW		JAMESTOWN	ND	58401	1093886137	43	Certified Registered Nurse Anesthetist	77001	JAMESTOWN REGIONAL MEDIC	1407957277		
16	$1,197	450227391	BENNING	KIMBERLY	213 2ND AVE NE		ROLLA	ND	58367	1619301975	50	Nurse Practitioner	401001	PRESENTATION MEDICAL CEN	1265404958		
11	$1,197	450311334	FICEK	JENNA	401 N 9TH ST		BISMARCK	ND	58501	1871830422	43	Certified Registered Nurse Anesthetist	236001	MID DAKOTA CLINIC	1275587826		
19	$1,195	410695598	RICK	BRENDA	401 MAIN ST		MILNOR	ND	58060	1720273436	50	Nurse Practitioner	274001	ST FRANCIS HEALTHCARE CA	1235215252		
98	$1,194	450231181	MATTHIESEN	SUSAN	2422 20TH ST SW		JAMESTOWN	ND	58401	1467406652	64	Audiology	124001	JAMESTOWN REGIONAL MEDIC	1821044652		
39	$1,193	911770748	LORENZ	RYAN	100 1ST AVE SW STE 2		LAMOURE	ND	58458	1063731180	65	Physical Therapy	3073	SANFORD HEALTH LAMOURE C	1942241351		
21	$1,193	261175213	ROHLA	RICHARD	1702 UNIVERSITY DR S		FARGO	ND	58103	1578598553	8	Family Practice	6885031	INNOVIS HEALTH, LLC DBA	1255677084		
84	$1,190	450226909	LIEN	MORGAN	801 BROADWAY NORTH		FARGO	ND	58102	1245585587	97	Physician Assistant	7742001	SANFORD BROADWAY CLINIC	1184917924		
28	$1,190	450226700	CLAIRMONT	LISA	222 N 7TH ST		BISMARCK	ND	58501	1174611370	50	Nurse Practitioner	4001	SANFORD CLINIC	1811941172		
24	$1,190	200544802	KJOS	JANELL	2829 S UNIV DR STE 101		FARGO	ND	58103	1063414084	50	Nurse Practitioner	6252001	URGENT MEDICINE ASSOCIAT	1154490399		
96	$1,189	450446349	KILLDEER PHARMACY		400 CENTRAL AVE S		KILLDEER	ND	58640	1508972936	54	Home Medical Equipment	5495001	KILLDEER PHARMACY	1508972936		
10	$1,188	911770748	MAURIELLO	CLIFFORD	801 BROADWAY NORTH		FARGO	ND	58102	1366604878	37	Pediatrics	3001	SANFORD BROADWAY CLINIC	1942241351		
139	$1,187	450284035	DAKOTA PHARMACY		705 E MAIN AVE		BISMARCK	ND	58501	1548202369	63	Pharmacy	3231001	DAKOTA PHARMACY	1548202369		
43	$1,187	450226558	SCHMIDT	JAMES	1 BURDICK EXPY W		MINOT	ND	58701	1073720983	8	Family Practice	635032	TRINITY MEDICAL GROUP	1083653752		
9	$1,186	450226700	MALARD	MAYSIL	515 EAST BROADWAY AVE		BISMARCK	ND	58501	1346330362	71	Certified Diabetic Educator	4066	SANFORD 5TH & BROADWAY C	1811941172		
15	$1,185	450226700	FAIRBAIRN	THOMAS	3318 N 14TH STREET		BISMARCK	ND	58503	1982702619	72	Emergency Medicine	4064	SANFORD NORTH WALK-IN CL	1811941172		
18	$1,184	450451306	COSTNER	DAVID	314 OHMER ST		BOTTINEAU	ND	58318	1346542867	50	Nurse Practitioner	1262001	ST ANDREWS BOTTINEAU CLI	1902803802		
19	$1,183	450431679	DRAKE	CHARLES	1202 23RD ST S		FARGO	ND	58103	1427113703	88	#N/A	423001	DRAKE COUNSELING SERVICE	1154378057		
21	$1,179	261175213	SAUVAGEAU	KATIE	1401 13TH AVE E		WEST FARGO	ND	58078	1114048378	65	Physical Therapy	6885033	INNOVIS HEALTH, LLC DBA	1487990339		
32	$1,177	432108667	ISAAK	CHAD	301 4TH AVE NE		HAZEN	ND	58545	1306959879	35	Chiropractor	6869001	ISAAK CHIROPRACTIC OF HA	1306959879		
7	$1,173	410724029	WESSMAN	KARI	1428 CENTRAL AVE NE		E GRAND FORKS	MN	56721	1235150574	16	Obstet/Gynecology	5548002	RIVERVIEW SPECIALTY CLIN	1811918436		
20	$1,172	450340688	JACOBSEN	THOMAS	608 HIGHWAY 12 W		BOWMAN	ND	58623	1053405662	8	Family Practice	434006	WEST RIVER HEALTH SERVIC	1497856025		
21	$1,172	261175213	HARRIS	SCOTT	275 11TH ST S		WAHPETON	ND	58075	1740402858	2	General Surgery	6885019	INNOVIS HEALTH, LLC DBA	1790965440		
72	$1,172	275414185	BEATTIE	ROBERT	718 OAK ST		GRAND FORKS	ND	58201	1215957402	8	Family Practice	7707001	WELCORE HEALTH, LLC	1760780126		
20	$1,171	450226909	HENNESSY	JILL	736 BROADWAY N		FARGO	ND	58102	1932126893	97	Physician Assistant	7742022	SANFORD BROADWAY MEDICAL	1184917924		
24	$1,167	450340688	SHEFFIELD	JENNIFER	820 2ND AVE W		NEW ENGLAND	ND	58647	1497987812	1	General Practice	434004	WEST RIVER HEALTH SERVIC	1831286160		
31	$1,167	450340688	WEST RIVER HOME ME	L SERVICES	1000 HIGHWAY 12		HETTINGER	ND	58639	1215026117	54	Home Medical Equipment	563002	WEST RIVER HOME MEDICAL	1215026117		
14	$1,165	450226909	FOLDESI-PENAS	TRACY	4000 28TH AVE S		MOORHEAD	MN	56560	1043237902	80	Clinical Social Worker	7742014	SANFORD MOORHEAD CLINIC	1184917924		
53	$1,165	450310159	WEINMANN	ROBERT	164 WEST 13TH STREET		GRAFTON	ND	58237	1780663450	30	Radiology	282001	GRAFTON FAMILY CLINIC	1558423665		
7	$1,164	450226909	RASMUSSEN	TAMI	1720 UNIVERSITY DR S		FARGO	ND	58103	1437171006	43	Certified Registered Nurse Anesthetist	7742004	SANFORD SOUTH UNIVERSITY	1184917924		
117	$1,163	411655043	PROFESSIONAL PORTA	RADIOLOGIC	2111 EAST MAIN AVE	UNIT A15	WEST FARGO	ND	58078	1598056384	30	Radiology	7895001	PROFESSIONAL PORTABLE RA	1598056384		
7	$1,163	261175213	STRASBURG	RYAN	1702 UNIVERSITY DR S		FARGO	ND	58103	1376832576	43	Certified Registered Nurse Anesthetist	6885031	INNOVIS HEALTH, LLC DBA	1255677084		
2	$1,161	911841100	CHRIST	RENEE	3913 LOCKPORT ST		BISMARCK	ND	58503	1023161585	43	Certified Registered Nurse Anesthetist	1065001	ADVANCED SURGICAL ARTS C	1578669354		
84	$1,161	450414005	BARRETT PHARMACY		145 N MAIN STREET		WATFORD CITY	ND	58854	1790795987	54	Home Medical Equipment	6628001	BARRETT PHARMACY	1790795987		
87	$1,161	411640169	WASWICK	GERALD	10 N MAIN ST		GWINNER	ND	58040	1629131891	35	Chiropractor	549001	WASWICK CHIROPRACTIC	1629131891		
10	$1,160	450231183	EICK	THOMAS	1301 15TH AVE W		WILLISTON	ND	58801	1972544708	26	Psychiatry (MD)	711002	MERCY MEDICAL CENTER DBA	1801928593		
46	$1,159	450375673	BEULAH DRUG CO		147 W MAIN		BEULAH	ND	58523	1295778082	54	Home Medical Equipment	3359001	BEULAH DRUG CO	1295778082		
44	$1,158	450437648	MCCONNACHIE	REBECCA	1237 W DIVIDE AVE STE 5		BISMARCK	ND	58501	1275566143	88	#N/A	241001	WEST CENTRAL HUMAN SERVI	1649226713		
5	$1,157	410724029	KAISER	BRENT	323 S MINNESOTA ST		CROOKSTON	MN	56716	1376871475	43	Certified Registered Nurse Anesthetist	5548001	RIVERVIEW HEALTHCARE ASS	1477525566		

24	$1,157	450310159	KETTERLING	MARCIA	164 W 13TH ST		GRAFTON	ND	58237	1396895942	50	Nurse Practitioner	40001	UNITY MEDICAL CENTER	1245216852		
12	$1,157	450226909	HOMUTH	ANGELA	801 BROADWAY NORTH		FARGO	ND	58102	1699793331	71	Certified Diabetic Educator	7742001	SANFORD BROADWAY CLINIC	1184917924		
7	$1,156	450425948	VISCITO	MATTHEW	HWY 281 N		CANDO	ND	58324	1497969570	8	Family Practice	398001	TOWNER COUNTY MEDICAL CE	1124041389		
7	$1,154	450226700	COLLIER	JEANINE	414 N 7TH ST		BISMARCK	ND	58501	1427166487	26	Psychiatry (MD)	4046	SANFORD SEVENTH AND ROSS	1811941172		
119	$1,150	911770748	STEEN	PRESTON	820 4TH ST N		FARGO	ND	58102	1124053285	75	Oncology	3030	SANFORD ROGER MARIS CANC	1942241351		
12	$1,150	450222079	GOYAL	DEEPAK	603 EAST ST N		ELGIN	ND	58533	1508161811	11	Internal Medicine	6043002	JACOBSON MEMORIAL ELGIN	1871691519		
28	$1,149	911770748	MACHAYYA	JON	801 BROADWAY NORTH		FARGO	ND	58102	1437323557	30	Radiology	3001	SANFORD BROADWAY CLINIC	1942241351		
13	$1,148	261175213	ERIKSSON	KELLI	3000 32ND AVE S		FARGO	ND	58103	1043318264	50	Nurse Practitioner	6885030	INNOVIS HEALTH, LLC DBA	1578907655		
10	$1,145	450392137	MEDQUEST INC.		1602 W 11TH ST		WILLISTON	ND	58801	1912932567	79	Home Infusion	3284001	MEDQUEST INC	1912932567		
6	$1,144	450226909	SEGAL	MICHAEL	332 2ND AVE N		WAHPETON	ND	58075	1578585121	34	Urology	7742019	SANFORD HEALTH WAHPETON	1184917924		
10	$1,143	411998489	ASCANO	R	614 NEBRASKA AVE		BRECKENRIDGE	MN	56520	1104869049	62	Psychology	465001	R P ASCANO & ASSOCIATES	1104869049		
22	$1,138	261175213	BOERBOOM	SARAH	3000 32ND AVE S		FARGO	ND	58103	1720330178	67	Occupational Therapy	6885030	INNOVIS HEALTH, LLC DBA	1578907655		
9	$1,136	450226909	PETERSON	BETHANY	100 4TH ST S		FARGO	ND	58103	1134493471	80	Clinical Social Worker	7742006	SANFORD PROFESSIONAL BUI	1184917924		
54	$1,136	450369650	ND PHARMACY INC		20 E 26TH ST		WILLISTON	ND	58801	1558376152	63	Pharmacy	3104001	ND PHARMACY INC	1558376152		
55	$1,135	450226700	STAHL	NIGERIA	222 N 7TH ST		BISMARCK	ND	58501	1780629055	72	Emergency Medicine	4001	SANFORD CLINIC	1811941172		
85	$1,132	450310462	KAUSHIK	SHIVU	1200 S COLUMBIA RD		GRAND FORKS	ND	58201	1871709295	29	Pulmonary Diseases	62001	ALTRU HOSPITAL	1154346161		
15	$1,132	450226700	KNUDSON	JOSHUA	222 N 7TH ST		BISMARCK	ND	58501	1043505654	2	General Surgery	4001	SANFORD CLINIC	1811941172		
9	$1,132	450422119	HILDEBRANDT-FOLSKE	CARLA	33 9TH ST W		DICKINSON	ND	58601	1487741484	43	Certified Registered Nurse Anesthetist	231001	GREAT PLAINS CLINIC, PC	1720075377		
9	$1,132	450437648	EICK	THOMAS	1237 W DIVIDE AVE STE 5		BISMARCK	ND	58501	1972544708	26	Psychiatry (MD)	241001	WEST CENTRAL HUMAN SERVI	1649226713		
16	$1,129	411384358	WOINAROWICZ	MICHELLE	109 S MINNESOTA ST		WARREN	MN	56762	1336151257	50	Nurse Practitioner	2067001	NORTH VALLEY HEALTH CENT	1073516357		
97	$1,126	450374591	KIDDER CTY DIST HE		422 2ND AVE NW		STEELE	ND	58482	1184720864	60	Public Health or Welfare Agency	4483001	KIDDER CTY DIST HEALTH	1184720864		
53	$1,125	270623219	ANDERSON	ALISHA	4132 30TH AVE S STE 102		FARGO	ND	58104	1932338845	35	Chiropractor	7425001	ANDERSON FAMILY CHIROPRA	1932338845		
2	$1,123	911841100	OSHEA	CAROL	3913 LOCKPORT ST		BISMARCK	ND	58503	1285788927	43	Certified Registered Nurse Anesthetist	1065001	ADVANCED SURGICAL ARTS C	1578669354		
123	$1,123	911770748	GEERAERTS	LOUIS	621 DEMERS AVE		E GRAND FORKS	MN	56721	1770500639	75	Oncology	3080	SANFORD HEALTH 621 DEMER	1942241351		
19	$1,123	450222079	RIVINIUS	CAREY	602 ASH AVE E		GLEN ULLIN	ND	58631	1225294101	50	Nurse Practitioner	6043003	JACOBSON MEMORIAL HOSPIT	1003929944		
95	$1,121	911770748	SHELDON	PEGGY	801 BROADWAY NORTH		FARGO	ND	58102	1104857200	11	Internal Medicine	3001	SANFORD BROADWAY CLINIC	1942241351		
5	$1,118	450450254	GOEDDERTZ	JOHN	600 N 9TH ST		BISMARCK	ND	58501	1659424125	43	Certified Registered Nurse Anesthetist	1261001	BISMARCK SURGICAL ASSOCI	1487814356		
6	$1,118	113686120	LANGELIERS	JEAN	1312 HIGHWAY 49 N		BEULAH	ND	58523	1144208521	68	Licensed Registered Dietitian	6103001	COAL COUNTRY COMMUNITY H	1942288329		
7	$1,117	450226909	SCHAUER	SUMMER	1720 UNIVERSITY DR S		FARGO	ND	58103	1679883680	43	Certified Registered Nurse Anesthetist	7742004	SANFORD SOUTH UNIVERSITY	1184917924		
6	$1,116	450226558	BOUMA	KELLY	1 BURDICK EXPRESSWAY W		MINOT	ND	58701	1255630570	43	Certified Registered Nurse Anesthetist	635031	TRINITY MEDICAL GROUP AN	1083653752		
16	$1,115	911770748	WELLE	PATRICK	2701 13TH AVE S		FARGO	ND	58103	1487675724	37	Pediatrics	3015	SANFORD CHILDRENS SOUTHW	1942241351		
44	$1,115	412002771	TRINITY HOSPITAL		1 BURDICK EXPRESSWAY W		MINOT	ND	58701	1427103910	69	Independent Laboratory	684001	TRINITY HOSPITALS	1427103910		
21	$1,113	450431679	WALEN	CHARLYNE	1202 23RD ST S		FARGO	ND	58103	1447398813	83	Licenses Addiction Counselor-Chemical Dependency	423001	DRAKE COUNSELING SERVICE	1154378057		
66	$1,110	721545798	PERZINSKI	BRANDEN	4731 13TH AVE SW STE 1		FARGO	ND	58103	1588829485	41	Optometrist	5807001	ENGSTROM, KRISTIN F., OD	1972609303		
11	$1,109	450226700	MALARD	MAYSIL	300 N 7TH ST		BISMARCK	ND	58501	1346330362	71	Certified Diabetic Educator	440001	SANFORD MEDICAL CENTER/B	1811941172		
42	$1,106	450358677	SCHAUER	BRITTANY	107 6TH AVE NW		MANDAN	ND	58554	1245565324	41	Optometrist	1626001	VISION SOURCE MANDAN	1194714212		
8	$1,106	450226909	FARKAS	SUSAN	929 CENTRAL AVE NW		E GRAND FORKS	MN	56721	1275568933	6	Cardivascular Disease	7742021	SANFORD HEALTH 929 CENTR	1184917924		
7	$1,106	450310462	FONTAINE	SCOTT	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1801956792	43	Certified Registered Nurse Anesthetist	9001	ALTRU HEALTH SYSTEM	1043309552		
120	$1,106	450226909	BERG	MICHAEL	801 BROADWAY NORTH		FARGO	ND	58102	1396763025	64	Audiology	7742001	SANFORD BROADWAY CLINIC	1184917924		
26	$1,105	450340688	WELLMAN	STACIE	608 HIGHWAY 12 W		BOWMAN	ND	58623	1669793410	8	Family Practice	434006	WEST RIVER HEALTH SERVIC	1497856025		
101	$1,105	911770748	BHUNIA	KAUSHIK	801 BROADWAY NORTH		FARGO	ND	58102	1043404585	11	Internal Medicine	3001	SANFORD BROADWAY CLINIC	1942241351		
13	$1,103	861123162	BRACKIN	ILENE	310 N 10TH ST		BISMARCK	ND	58501	1457451981	97	Physician Assistant	6459001	ST ALEXIUS HEART & LUNG	1194823021		
13	$1,103	450226909	HVIDSTON	ANDREW	332 2ND AVE N		WAHPETON	ND	58075	1477505725	20	Orthopedic Surgery	7742019	SANFORD HEALTH WAHPETON	1184917924		
28	$1,103	205332108	BEATTIE	BRIAN	210 W FRONT AVE		BISMARCK	ND	58504	1437197191	41	Optometrist	6900002	EYES ON PARKWAY	1679631477		
90	$1,099	450226700	SCHAUER	DOUGLAS	222 N 7TH ST		BISMARCK	ND	58501	1578661229	64	Audiology	4001	SANFORD CLINIC	1811941172		
22	$1,097	450226909	KOLTES	LESLIE	700 1ST AVE S		FARGO	ND	58103	1467771758	50	Nurse Practitioner	7742007	SANFORD NEUROSCIENCE CLI	1184917924		
18	$1,096	911770748	DAHL	BRUCE	1220 SHEYENNE ST		WEST FARGO	ND	58078	1801814546	8	Family Practice	3020	SANFORD WEST FARGO CLINI	1942241351		
16	$1,095	450231183	MCNULTY	JOHN	1213 15TH AVE W		WILLISTON	ND	58801	1043207418	20	Orthopedic Surgery	711001	CRAVEN-HAGAN/MERCY MEDIC	1760549000		
19	$1,093	410695598	HOUSERMAN	LEIGHANNE	2400 ST FRANCIS DRIVE		BRECKENRIDGE	MN	56520	1063487684	1	General Practice	207001	ST FRANCIS MEDICAL CENTE	1891954574		
20	$1,088	731631366	BURCHAM	TYLER	3170 43RD ST SOUTH	STE 101	FARGO	ND	58104	1912138231	65	Physical Therapy	7726001	REHAB AUTHORITY	1730159690		
21	$1,087	273224344	ZASTOUPIL-HARTZE	DONNA	448 21 ST W STE D-1		DICKINSON	ND	58601	1184674947	65	Physical Therapy	7711001	THERAPY SOLUTIONS	1801195045		
45	$1,084	450445938	PRASAD	NIROPA	3402 13TH AVE S		FARGO	ND	58103	1235288267	41	Optometrist	715001	3-D OPTICAL DBA STERLING	1528175429		
12	$1,083	450437648	HELLMAN	LORY	1237 W DIVIDE AVE STE 5		BISMARCK	ND	58501	1972772515	88	#N/A	241001	WEST CENTRAL HUMAN SERVI	1649226713		
16	$1,083	450422944	CRAGO	CHARLES	2845 36TH AVE S		GRAND FORKS	ND	58201	1629147723	19	Oral Surgery	455003	FACE & JAW SURGERY CENTE	1457420564		
20	$1,081	911770748	SMITH	STACEY	1412 MAIN ST		HAWLEY	MN	56549	1649210832	8	Family Practice	513001	SANFORD HAWLEY CLINIC	1942241351		
2	$1,081	450226700	FABIAN	MATTHEW	222 N 7TH ST		BISMARCK	ND	58501	1497928972	2	General Surgery	4001	SANFORD CLINIC	1811941172		
46	$1,081	450226909	GROSS	BRENDA	1111 HARWOOD DR		FARGO	ND	58104	1467470013	43	Certified Registered Nurse Anesthetist	7742012	SANFORD REPRODUCTIVE MED	1184917924		
3	$1,078	450226909	WOMELDORPH	CRAIG	801 BROADWAY NORTH		FARGO	ND	58102	1649274135	11	Internal Medicine	7742001	SANFORD BROADWAY CLINIC	1184917924		
32	$1,078	410695598	GREGERSON	KYLE	2400 ST FRANCIS DRIVE		BRECKENRIDGE	MN	56520	1366757841	65	Physical Therapy	207001	ST FRANCIS MEDICAL CENTE	1891954574		
73	$1,078	450385688	JOHNSON	KURTIS	112 S MAIN ST		STANLEY	ND	58784	1760581698	35	Chiropractor	1600001	JOHNSON, KURTIS, DC	1760581698		
46	$1,077	861123162	PENGILLY	DANETTE	310 N 10TH ST		BISMARCK	ND	58501	1013016989	50	Nurse Practitioner	6459001	ST ALEXIUS HEART & LUNG	1194823021		
23	$1,077	410695598	NYARANDI	TIMOTHY	2400 ST FRANCIS DRIVE		BRECKENRIDGE	MN	56520	1124222351	8	Family Practice	207001	ST FRANCIS MEDICAL CENTE	1891954574		
47	$1,076	450226700	RENTON	STANLEY	222 N 7TH ST		BISMARCK	ND	58501	1487696662	72	Emergency Medicine	4001	SANFORD CLINIC	1811941172		
10	$1,076	262252400	GREGORY	JEFFREY	1323 23RD ST S STE B		FARGO	ND	58103	1427274729	62	Psychology	6983003	JEFFREY C GREGORY, PHD P	1194989590		
61	$1,074	454044655	KLEIN	SARA	309 27TH AVE SW		MINOT	ND	58701	1265700850	35	Chiropractor	7821001	KLEIN CHIROPRACTIC & WEL	1346519683		
5	$1,073	450226909	MICKELSON	DANIEL	801 BROADWAY NORTH		FARGO	ND	58102	1215954854	30	Radiology	7742001	SANFORD BROADWAY CLINIC	1184917924		

6	$1,073	450226909	MATTERN	TRAVIS	1720 UNIVERSITY DR S		FARGO	ND	58103	1376561977	43	Certified Registered Nurse Anesthetist	7742004	SANFORD SOUTH UNIVERSITY	1184917924		
74	$1,073	450422944	AFSHAR	ANDREW	1140 W CAPITOL AVE		BISMARCK	ND	58501	1659314888	19	Oral Surgery	455001	FACE & JAW SURGERY CENTE	1184667305		
7	$1,070	455381084	GRAY	SCHARAZARD	1720 BURNT BOAT DRIVE	STE 108	BISMARCK	ND	58503	1447332895	8	Family Practice	7882001	NORTHERN PLAINS FAMILY M	1588929004		
4	$1,069	450414380	LEEDS AMBULANCE SE	E	130 1ST AVE NW		LEEDS	ND	58346	1346395191	59	Ambulance Service	1880001	LEEDS AMBULANCE SERVICE	1346395191		
15	$1,069	450314527	WU	ZONGJIAN	300 13 AVE W STE 1		DICKINSON	ND	58601	1407095292	62	Psychology	235001	BADLANDS HUMAN SERVICE C	1124072525		
10	$1,068	450254692	SULLIVAN	BRIAN	702 1ST ST SW		CROSBY	ND	58730	1972761252	8	Family Practice	428001	ST LUKES HOSPITAL DBA CR	1184737231		
38	$1,067	450458242	SOUTHWEST HEALTHCA	ERVICES	14 6TH AVE SW		BOWMAN	ND	58623	1588745004	54	Home Medical Equipment	2086004	SOUTHWEST HEALTHCARE SER	1588745004		
52	$1,067	452097160	OLLERMAN	BRANDI	1571 W VILLARD #1		DICKINSON	ND	58601	1932134426	63	Pharmacy	7820001	OLLERMAN INC DBA MEDICIN	1043504574		
4	$1,067	450253272	KHOKHA	INDER	511 ELM AVE		LINTON	ND	58552	1225089949	2	General Surgery	430001	LINTON MEDICAL CENTER	1568471563		
7	$1,067	450413089	LITCHFIELD	DOUGLAS	446 3RD AVE W		DICKINSON	ND	58601	1316994130	18	Opthalmology	278008	DAKOTA EYE INSTITUTE DBA	1962449835		
15	$1,067	450231183	OLSON	PAUL	1301 15TH AVE W		WILLISTON	ND	58801	1730250879	8	Family Practice	142001	MERCY MEDICAL/HOSPITAL E	1720194624		
22	$1,059	450226419	TOWNSEND	CAMMY	301 ROOSEVELT AVE		MADDOCK	ND	58348	1619920345	50	Nurse Practitioner	18209	HEART OF AMERICA JOHNSON	1740451038		
14	$1,059	410843966	STATON	R	1010 32ND AVE S		MOORHEAD	MN	56560	1457398711	26	Psychiatry (MD)	288001	LAKELAND MENTAL HEALTH C	1366480287		
11	$1,058	410851371	GREEN	CHRISTOPHE	603 BRUCE ST		CROOKSTON	MN	56716	1942438239	80	Clinical Social Worker	1269001	NORTHWESTERN MENTAL HEAL	1508835133		
91	$1,057	450260821	WHITE DRUG #5		117 N 5TH ST		BISMARCK	ND	58501	1760572606	54	Home Medical Equipment	2884001	WHITE DRUG #5	1760572606		
8	$1,056	261175213	ANDERSON	CHRISTOPHE	3000 32ND AVE S		FARGO	ND	58103	1184871758	72	Emergency Medicine	6885030	INNOVIS HEALTH, LLC DBA	1578907655		
10	$1,056	450226423	AASNESS	MARY	1201 25TH ST S		FARGO	ND	58103	1598800781	88	#N/A	283001	THE VILLAGE FAMILY SERVI	1568492353		
9	$1,053	450226558	UDEKWE	ANTHONY	1 BURDICK EXPY W		MINOT	ND	58701	1740354646	37	Pediatrics	635032	TRINITY MEDICAL GROUP	1083653752		
21	$1,053	800378943	GOODMAN	DINA	1809 S BDWY STE S		MINOT	ND	58703	1598847931	83	Licenses Addiction Counselor-Chemical Dependency	6824001	GOODMAN ADDICTION SERVIC	1598847931		
10	$1,053	573843789	BRULEY	CHARLENE	308 2ND AVE SW		MINOT	ND	58701	1346325198	80	Clinical Social Worker	6328001	CHARLENE P BRULEY, LICSW	1346325198		
10	$1,052	450228899	FABER	KEVIN	600 1ST STREET SE		MAYVILLE	ND	58257	1720095482	13	Neurology	3076	SANFORD MAYVILLE	1366478760		
40	$1,050	261175213	BERGS	LAURA	3000 32ND AVE S		FARGO	ND	58103	1366408395	50	Nurse Practitioner	6885030	INNOVIS HEALTH, LLC DBA	1578907655		
26	$1,048	450310462	MYRFIELD	DEBORAH	400 S MINNESOTA ST		CROOKSTON	MN	56716	1598857922	97	Physician Assistant	406001	ALTRU CROOKSTON	1760494330		
58	$1,048	273200188	RUFF	DANNIELLE	214 4TH ST NW		STEELE	ND	58482	1376757567	35	Chiropractor	7586001	KIDDER COUNTY CHIROPRACT	1447404165		
4	$1,047	450226909	CULLEN	NICOLE	621 DEMERS AVE		E GRAND FORKS	MN	56721	1114257656	48	Podiatry, Surgical chiropody	7742020	SANFORD HEALTH 621 DEMER	1184917924		
1	$1,044	410724029	AFONYA	IDATONYE	323 S MINNESOTA ST		CROOKSTON	MN	56716	1598710154	2	General Surgery	5548001	RIVERVIEW HEALTHCARE ASS	1477525566		
7	$1,044	450226909	GRAFF	ARNE	100 4TH ST S		FARGO	ND	58103	1366481418	8	Family Practice	7742006	SANFORD PROFESSIONAL BUI	1184917924		
30	$1,043	450310462	BROWN	ANN	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1588761365	22	Pathology, Anatomy, Clinical Pathology	9001	ALTRU HEALTH SYSTEM	1043309552		
10	$1,042	450437655	STENEHJEM	GERALD	316 2ND AVE W		WILLISTON	ND	58801	1740437516	80	Clinical Social Worker	156001	NORTHWEST HUMAN SERVICE	1770524613		
33	$1,041	450334785	MOON	DERRYL	110 MAIN AVE		FAIRMOUNT	ND	58030	1396758611	35	Chiropractor	1074001	MOON CHIROPRACTIC CLINIC	1780940221		
40	$1,041	455094897	KOVASH	JESSE	653 19TH ST W		DICKINSON	ND	58601	1093019366	35	Chiropractor	7871001	WORK PARTNERS OF ND	1629339239		
11	$1,040	450226700	MILLER	JOHN	414 N 7TH ST		BISMARCK	ND	58501	1346448925	30	Radiology	4046	SANFORD SEVENTH AND ROSS	1811941172		
6	$1,039	450226909	NYGAARD	LYNETTE	1720 UNIVERSITY DR S		FARGO	ND	58103	1144255787	43	Certified Registered Nurse Anesthetist	7742004	SANFORD SOUTH UNIVERSITY	1184917924		
32	$1,037	861123162	VANKLOOTWYK	MICHELLE	310 N 10TH ST		BISMARCK	ND	58501	1053411066	50	Nurse Practitioner	6459001	ST ALEXIUS HEART & LUNG	1194823021		
13	$1,036	870694180	ROECKER	AMANDA	701 3RD STREET NW		JAMESTOWN	ND	58401	1821344789	66	Speech Therapy	5919001	ANNE CARLSEN CENTER	1598930109		
3	$1,035	450311334	GEIGER	KIM	401 N 9TH ST		BISMARCK	ND	58501	1033262506	43	Certified Registered Nurse Anesthetist	236001	MID DAKOTA CLINIC	1275587826		
33	$1,034	450226909	DOWSLEY	TAYLOR	801 BROADWAY NORTH		FARGO	ND	58102	1518926534	6	Cardivascular Disease	7742001	SANFORD BROADWAY CLINIC	1184917924		
19	$1,032	450222079	KNECHT	JOHN	603 EAST ST N		ELGIN	ND	58533	1386731065	1	General Practice	6043002	JACOBSON MEMORIAL ELGIN	1871691519		
58	$1,029	205332108	KOSTELECKY	EVE	2331 TYLER PARKWAY STE 2		BISMARCK	ND	58503	1578755757	41	Optometrist	6900001	EYES ON PARKWAY, INC	1679631477		
4	$1,028	450310159	TRONTVET	KENT	164 W 13TH ST		GRAFTON	ND	58237	1093746877	43	Certified Registered Nurse Anesthetist	40001	UNITY MEDICAL CENTER	1245216852		
8	$1,027	208928600	DAILY	ALISHIA	3060 FRONTIER WAY S		FARGO	ND	58104	1184908113	65	Physical Therapy	6961001	PEDIATRIC THERAPY PARTNE	1457479958		
27	$1,025	411671999	HOHMAN	ADAM	209 2ND ST SE		BARNESVILLE	MN	56514	1679728786	50	Nurse Practitioner	463001	BARNESVILLE AREA CLINIC	1104902121		
30	$1,024	911770748	ASHEIM	JASON	1412 MAIN ST		HAWLEY	MN	56549	1780693424	30	Radiology	513001	SANFORD HAWLEY CLINIC	1942241351		
18	$1,024	450310462	BRYSON	THOMAS	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1811101116	30	Radiology	9001	ALTRU HEALTH SYSTEM	1043309552		
24	$1,024	911770748	STEGMILLER	DANA	2400 32ND AVE S		FARGO	ND	58103	1003837220	97	Physician Assistant	3014	SANFORD SOUTHPOINTE CLIN	1942241351		
15	$1,024	450226909	HAUGEN	ANDREA	801 BROADWAY NORTH		FARGO	ND	58102	1346268992	68	Licensed Registered Dietitian	7742001	SANFORD BROADWAY CLINIC	1184917924		
2	$1,023	456002200	BILLINGS COUNTY AM	NCE SERVIC	604 EAST RIVER ROAD S		MEDORA	ND	58645	1548597685	59	Ambulance Service	7498001	BILLINGS COUNTY AMBULANC	1548597685		
5	$1,023	411437835	BOND	ROBERT	2851 S UNIVERSITY DR		FARGO	ND	58103	1649331562	42	Dentist	5449001	BOND, ROBERT A., DDS	1649331562		
5	$1,022	450311334	KNOWLEN	KIM	401 N 9TH ST		BISMARCK	ND	58501	1700939287	43	Certified Registered Nurse Anesthetist	236001	MID DAKOTA CLINIC	1275587826		
16	$1,021	264737734	HERZOG	SUSAN	200 E MAIN AVE STE 202		BISMARCK	ND	58501	1992747042	80	Clinical Social Worker	7336001	RESILIENCY CLINICAL SERV	1992747042		
94	$1,021	450318954	MELLO	BETHANY	122 2ND STREET NW		JAMESTOWN	ND	58401	1033479696	50	Nurse Practitioner	1219001	CENTRAL VALLEY HEALTH DI	1902853120		
10	$1,021	450226909	LEON	ZELKO	1720 UNIVERSITY DR S		FARGO	ND	58103	1720005499	26	Psychiatry (MD)	7742004	SANFORD SOUTH UNIVERSITY	1184917924		
4	$1,020	450255914	METTLER	DANIEL	612 CENTER AVE N		ASHLEY	ND	58413	1952525966	43	Certified Registered Nurse Anesthetist	581001	ASHLEY MEDICAL CENTER	1740286616		
77	$1,020	450226700	IWAMOTO	MATTHEW	3318 N 14TH STREET		BISMARCK	ND	58503	1073547014	30	Radiology	4064	SANFORD NORTH WALK-IN CL	1811941172		
2	$1,019	421727772	MCHENRY AMBULANCE	IC	178 JOHNSTON ST		MCHENRY	ND	58464	1609968122	59	Ambulance Service	2003001	MCHENRY AMBULANCE SERVIC	1609968122		
17	$1,018	261175213	BUELL	BRAD	2430 20TH ST SW		JAMESTOWN	ND	58401	1558530311	4	Otology, Laryngology, Rhinology	6885018	INNOVIS HEALTH, LLC DBA	1073793725		
35	$1,017	502829132	JOHNSON	TINA	1321 23RD ST S STE H		FARGO	ND	58103	1073579306	80	Clinical Social Worker	5416001	JOHNSON, TINA M, LICSW	1073579306		
8	$1,016	557943748	DUKE	DENISE	420 CENTER AVE STE 7		MOORHEAD	MN	56560	1487731014	62	Psychology	1159001	DUKE, DENISE, EDD	1487731014		
23	$1,014	410724029	MASSMANN	MATTHEW	323 S MINNESOTA ST		CROOKSTON	MN	56716	1215292750	97	Physician Assistant	5548016	RIVERVIEW SPECIALTY CLIN	1487944898		
26	$1,013	450226711	WHITE	PETER	900 E BROADWAY AVE		BISMARCK	ND	58501	1508966524	5	Anesthesiology (MD)	501001	ST ALEXIUS MEDICAL CENTE	1205868429		
34	$1,012	261175213	TEPASTTE	MICHELLE	801 BELSLY BLVD S		MOORHEAD	MN	56560	1346285541	8	Family Practice	6885034	INNOVIS HEALTH, LLC DBA	1659617504		
8	$1,012	410724029	BRITO	PAULA	323 S MINNESOTA ST		CROOKSTON	MN	56716	1508030396	37	Pediatrics	5548016	RIVERVIEW SPECIALTY CLIN	1487944898		
28	$1,012	450437648	CHAUSSEE	JEROME	1237 W DIVIDE AVE STE 5		BISMARCK	ND	58501	1982640546	80	Clinical Social Worker	241001	WEST CENTRAL HUMAN SERVI	1649226713		
6	$1,011	450226558	LOWE	DOUGLAS	400 BURDICK EXPY E		MINOT	ND	58701	1194755728	11	Internal Medicine	635006	TRINITY MEDICAL GROUP	1083653752		
16	$1,011	450456027	WEISS	FAYE	234 14TH AVE SE	STE 317	MINOT	ND	58701	1932107166	44	Psychiatric Nurse	1764001	WEISS, FAYE, RN, CNS, PC	1932107166		
38	$1,010	450460971	DYE, J G., OD		1207 PRAIRIE PARKWAY		WEST FARGO	ND	58078	1720140577	58	Other Individual Supplier - Optometric Supplier	1621001	DYE, J G., OD	1720140577		

16	$1,009	450226700	STEIN	SHERRY	300 N 7TH ST		BISMARCK	ND	58501	1134227895	8	Family Practice	440001	SANFORD MEDICAL CENTER/B	1811941172		
11	$1,008	450226909	NAMMOUR	FADEL	801 BROADWAY NORTH		FARGO	ND	58102	1922039684	10	Gastronenterology	7742001	SANFORD BROADWAY CLINIC	1184917924		
19	$1,005	450226909	THURLOW	BRENDA	2701 13TH AVE S		FARGO	ND	58103	1033130372	37	Pediatrics	7742009	SANFORD CHILDRENS SOUTHW	1184917924		
12	$1,004	450226909	JASTI	ANIL	801 BROADWAY NORTH		FARGO	ND	58102	1669433009	11	Internal Medicine	7742001	SANFORD BROADWAY CLINIC	1184917924		
6	$1,001	264314533	JORDAN	NATALIE	510 4TH ST S		FARGO	ND	58103	1023252269	26	Psychiatry (MD)	7444001	PSJ ACQUISITION LLC	1679709802		
44	$999	450310462	BARAGA	JOSEPH	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1730167073	30	Radiology	9001	ALTRU HEALTH SYSTEM	1043309552		
16	$999	770637498	COOPER	BRIAN	525 N MAIN ST		WATFORD CITY	ND	58854	1053563957	97	Physician Assistant	6340001	MCKENZIE COUNTY HEALTHCA	1063420495		
15	$998	450226711	LANDSIEDEL	JULIE	900 E BROADWAY AVE		BISMARCK	ND	58501	1164629671	50	Nurse Practitioner	459001	ST ALEXIUS MEDICAL CENTE	1306832654		
12	$997	450226700	HORNER	JUSTIN	300 N 7TH ST		BISMARCK	ND	58501	1326169061	37	Pediatrics	440001	SANFORD MEDICAL CENTER/B	1811941172		
5	$994	456002491	MARTSOLF	JOHN	501 N COLUMBIA RD	STOP 9037	GRAND FORKS	ND	58202	1497842595	37	Pediatrics	120001	MEDICAL SCHOOL PRACTICE	1013032663		
105	$994	450333761	NIELSEN	TERESA	202 E VILLARD ST		DICKINSON	ND	58601	1629160080	97	Physician Assistant	1675001	COMMUNITY ACTION PARTNER	1174501712		
10	$994	450226909	GARRITY	STEPHEN	801 BROADWAY NORTH		FARGO	ND	58102	1033137682	30	Radiology	7742001	SANFORD BROADWAY CLINIC	1184917924		
31	$993	450226558	ROLES	CYNTHIA	1321 W DAKOTA PARKWAY		WILLISTON	ND	58801	1760402267	41	Optometrist	635038	TRINITY REGIONAL EYECARE	1083653752		
5	$990	450226909	HOGANSON	TAMMY	1720 UNIVERSITY DR S		FARGO	ND	58103	1669499521	43	Certified Registered Nurse Anesthetist	7742004	SANFORD SOUTH UNIVERSITY	1184917924		
4	$987	450310462	SPIVEY	MATTHEW	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1790743268	43	Certified Registered Nurse Anesthetist	9001	ALTRU HEALTH SYSTEM	1043309552		
6	$986	510183396	HOFF	ERICA	505 40TH ST S SUITE B		FARGO	ND	58103	1518240332	62	Psychology	514004	SHAREHOUSE TRANSITIONS	1235412388		
11	$986	450226700	DOPPLER	MATTHEW	222 N 7TH ST		BISMARCK	ND	58501	1952404659	62	Psychology	4001	SANFORD CLINIC	1811941172		
4	$985	450352210	BJORK	KEVIN	1929 N WASHINGTON		BISMARCK	ND	58501	1003960410	42	Dentist	7126001	BJORK, KEVIN, DDS	1003960410		
6	$982	450227391	CEDERSTROM	LUANN	213 2ND AVE NE		ROLLA	ND	58367	1184712515	43	Certified Registered Nurse Anesthetist	401001	PRESENTATION MEDICAL CEN	1265404958		
10	$982	450310462	POROT	MARC	4440 S WASHINGTON ST		GRAND FORKS	ND	58201	1750347159	5	Anesthesiology (MD)	9033	ALTRU PROFESSIONAL CENTE	1043309552		
8	$982	911749640	HIEB	RICHARD	121 E FRONT AVE		BISMARCK	ND	58504	1467419390	42	Dentist	7261001	PRAIRIE ROSE FAMILY DENT	1144391632		
18	$981	502749355	DUNHAM, TOM, OD -	TON OFFICE	104 E HIWAY 66 STE 102		DRAYTON	ND	58225	1982601357	58	Other Individual Supplier - Optometric Supplier	1636001	DUNHAM, THOMAS, OD	1982601357		
55	$980	450310462	SALBERG	RACHEL	1200 S COLUMBIA RD		GRAND FORKS	ND	58201	1134468192	50	Nurse Practitioner	62001	ALTRU HOSPITAL	1154346161		
30	$980	911770748	LORENZ	RYAN	21 WILEY AVE S		LIDGERWOOD	ND	58053	1063731180	65	Physical Therapy	3070	SANFORD HEALTH LIDGERWOO	1942241351		
51	$980	450318194	RAMSEY DRUG CO000		401 COLLEGE DR S		DEVILS LAKE	ND	58301	1588686539	54	Home Medical Equipment	2918001	RAMSEY DRUG CO	1588686539		
19	$979	410724029	FASHORO	OLATUBOSUN	323 S MINNESOTA ST		CROOKSTON	MN	56716	1700823598	11	Internal Medicine	5548001	RIVERVIEW HEALTHCARE ASS	1477525566		
14	$977	450231181	HASNAIN	MOHSIN	2422 20TH ST SW		JAMESTOWN	ND	58401	1093779829	11	Internal Medicine	124001	JAMESTOWN REGIONAL MEDIC	1821044652		
5	$976	261175213	GROSS	AMANDA	3000 32ND AVE S		FARGO	ND	58103	1609184043	43	Certified Registered Nurse Anesthetist	6885030	INNOVIS HEALTH, LLC DBA	1578907655		
36	$976	450226700	SEAMANDS	ERIC	1833 E BISMARCK EXPRESSW		BISMARCK	ND	58504	1326386061	35	Chiropractor	4053	SANFORD HEALTH CHIROPRAC	1811941172		
26	$975	911770748	LIEN	DAVID	1720 UNIVERSITY DR S		FARGO	ND	58103	1194743765	8	Family Practice	3904	SANFORD SOUTH UNIVERSITY	1942241351		
28	$975	450310462	CASPERS	JOHN	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1750369989	30	Radiology	9001	ALTRU HEALTH SYSTEM	1043309552		
6	$974	450310462	BUETTNER	KEVIN	1200 S COLUMBIA RD		GRAND FORKS	ND	58201	1942480629	43	Certified Registered Nurse Anesthetist	62001	ALTRU HOSPITAL	1154346161		
12	$967	450437648	TELLMANN	JANNA	1237 W DIVIDE AVE STE 5		BISMARCK	ND	58501	1659528941	80	Clinical Social Worker	241001	WEST CENTRAL HUMAN SERVI	1649226713		
27	$967	202896555	HELLA	BRENT	1500 INTERCHANGE AVE	STE 210	BISMARCK	ND	58501	1245286988	11	Internal Medicine	7855001	VALLEY WEIGHT LOSS CLINI	1841464286		
9	$967	411949975	PAULSON	MICHAEL	891 BELSLY BLVD		MOORHEAD	MN	56560	1831109818	62	Psychology	1697002	SOLUTIONS BEHAVIORAL HEA	1801909239		
8	$966	410724029	FENNELL	COLLIN	323 S MINNESOTA ST		CROOKSTON	MN	56716	1356313480	20	Orthopedic Surgery	5548016	RIVERVIEW SPECIALTY CLIN	1487944898		
4	$966	450226909	LAMB	PAUL	801 BROADWAY NORTH		FARGO	ND	58102	1386769404	10	Gastronenterology	7742001	SANFORD BROADWAY CLINIC	1184917924		
54	$964	450226700	TELLO-SKJERSETH	CHRISTINA	3318 N 14TH STREET		BISMARCK	ND	58503	1144480971	30	Radiology	4064	SANFORD NORTH WALK-IN CL	1811941172		
12	$963	450226419	LIM	ALAN FH	800 S MAIN AVE		RUGBY	ND	58368	1710050927	34	Urology	18001	GOOD SAMARITAN HOSPITAL	1588751325		
7	$962	410695598	CHUKWUANI	OKWUDILI	2400 ST FRANCIS DRIVE		BRECKENRIDGE	MN	56520	1396862900	2	General Surgery	207001	ST FRANCIS MEDICAL CENTE	1891954574		
69	$962	320397461	HASSE	ROBERT	205 SHEYENNE STREET		WEST FARGO	ND	58078	1639187636	35	Chiropractor	7969001	WEST FARGO CHIROPRACTIC	1144566746		
7	$960	450226700	HIEB	ROBERT	222 N 7TH ST		BISMARCK	ND	58501	1154497196	33	Thoracic Surgery	4001	SANFORD CLINIC	1811941172		
18	$958	450437651	STOE	ANNE	2624 9TH AVE S		FARGO	ND	58103	1952359903	8	Family Practice	100001	SOUTHEAST HUMAN SERVICE	1932146941		
9	$958	261175213	STRINDEN	STEVEN	819 MAIN ST		LISBON	ND	58054	1639108814	34	Urology	6885021	INNOVIS HEALTH, LLC DBA	1043490790		
14	$958	261175213	BERGS	LAURA	2430 20TH ST SW		JAMESTOWN	ND	58401	1366408395	50	Nurse Practitioner	6885018	INNOVIS HEALTH, LLC DBA	1073793725		
48	$957	450226909	HOFFMANN	JENNIFER	2400 32ND AVE S		FARGO	ND	58103	1295926145	50	Nurse Practitioner	7742008	SANFORD SOUTHPOINTE CLIN	1184917924		
32	$955	450459810	NORTHERN LIGHTS OP	L, INC	620 N 9TH ST		BISMARCK	ND	58501	1841381811	58	Other Individual Supplier - Optometric Supplier	5550001	NORTHERN LIGHTS OPTICAL,	1841381811		
15	$954	450226419	PAGEL-TRANA- DUTTE	BOBBIE	301 ROOSEVELT AVE		MADDOCK	ND	58348	1629174701	50	Nurse Practitioner	18209	HEART OF AMERICA JOHNSON	1740451038		
81	$953	911770748	WELLE	ERIN	1717 S UNIVERSITY DRIVE		FARGO	ND	58103	1942503172	97	Physician Assistant	3084	SANFORD 1717 MEDICAL BUI	1942241351		
10	$952	411949975	OCHSENDORF	AMY	891 BELSLY BLVD		MOORHEAD	MN	56560	1831346873	62	Psychology	1697002	SOLUTIONS BEHAVIORAL HEA	1801909239		
17	$951	450310462	RING	BRUCE	400 S MINNESOTA ST		CROOKSTON	MN	56716	1063504496	11	Internal Medicine	406001	ALTRU CROOKSTON	1760494330		
41	$948	261175213	JENNY	DONALD	3000 32ND AVE S		FARGO	ND	58103	1568402097	6	Cardivascular Disease	6885030	INNOVIS HEALTH, LLC DBA	1578907655		
59	$947	911770748	GLATT	DAVID	1720 UNIVERSITY DR S		FARGO	ND	58103	1467489039	8	Family Practice	3904	SANFORD SOUTH UNIVERSITY	1942241351		
6	$947	200519300	CLAYBURGH	JOHN	667 DEMERS AVE		GRAND FORKS	ND	58201	1396907416	42	Dentist	7239001	GREAT NORTHERN DENTAL CA	1396907416		
28	$946	274407451	DUSEK	AMY	4040 42 ST S STE K		FARGO	ND	58104	1881999225	35	Chiropractor	7681001	BODY IN BALANCE CHIROPRA	1881999225		
5	$945	911749640	SCHMIDT	SIDNEY	121 E FRONT AVE		BISMARCK	ND	58504	1912091026	42	Dentist	7261001	PRAIRIE ROSE FAMILY DENT	1144391632		
66	$944	263022643	KREPS	DAVID	1675 CENTER AVE W STE B		DILWORTH	MN	56529	1992883870	35	Chiropractor	1508001	KREPS CHIROPRACTIC , PC	1144461005		
5	$943	450310462	HAGERT	KAREN	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1548351554	43	Certified Registered Nurse Anesthetist	9001	ALTRU HEALTH SYSTEM	1043309552		
9	$941	450226423	UONG-KAALE	MARY	1201 25TH ST S		FARGO	ND	58103	1174839724	51	Medical Supply Co with Orthotist	283001	THE VILLAGE FAMILY SERVI	1568492353		
9	$940	450437655	GOLDADE	TERRY	316 2ND AVE W		WILLISTON	ND	58801	1033202114	80	Clinical Social Worker	156001	NORTHWEST HUMAN SERVICE	1770524613		
18	$940	911770748	MAASJO	PEGGY	1245 WASHINGTON AVE		DETROIT LAKES	MN	56501	1508883117	50	Nurse Practitioner	3007	SANFORD HEALTH DETROIT L	1942241351		
8	$940	450226429	ZEHRA	NIDA	30 7TH ST W		DICKINSON	ND	58601	1578853008	11	Internal Medicine	95001	ST JOSEPHS HOSPITAL AND	1992947956		
9	$938	450226909	BRANCA	AUTUMN	2400 32ND AVE S		FARGO	ND	58103	1275763955	97	Physician Assistant	7742008	SANFORD SOUTHPOINTE CLIN	1184917924		
12	$937	911770748	KAFLE	RAM	1245 WASHINGTON AVE		DETROIT LAKES	MN	56501	1609003516	8	Family Practice	3007	SANFORD HEALTH DETROIT L	1942241351		
40	$937	450310159	KNOEDLER	JOHN	164 WEST 13TH STREET		GRAFTON	ND	58237	1023097078	30	Radiology	282001	GRAFTON FAMILY CLINIC	1558423665		
41	$937	911770748	PARVATHAREDDY	VISHNUPRIY	2400 32ND AVE S		FARGO	ND	58103	1073530549	11	Internal Medicine	3014	SANFORD SOUTHPOINTE CLIN	1942241351		

7	$936	450226700	SCHNEIDER	CHELSEY	300 N 7TH ST		BISMARCK	ND	58501	1992068555	50	Nurse Practitioner	440001	SANFORD MEDICAL CENTER/B	1811941172		
11	$936	450226909	MEYERSON	REBECCA	700 1ST AVE S		FARGO	ND	58103	1487688933	13	Neurology	7742007	SANFORD NEUROSCIENCE CLI	1184917924		
10	$935	450228899	CULLEN	NICOLE	600 1ST STREET SE		MAYVILLE	ND	58257	1114257656	48	Podiatry, Surgical chiropody	3076	SANFORD MAYVILLE	1366478760		
11	$935	450437652	SCOTT	DAVID	151 S 4TH ST STE 401		GRAND FORKS	ND	58201	1033364013	83	Licenses Addiction Counselor-Chemical Dependency	242001	NORTHEAST HUMAN SERVICE	1366496341		
10	$932	461482526	CAVETT	ANGELA	102 WEST BEATON DR #103		WEST FARGO	ND	58078	1659300713	62	Psychology	7973001	BEACON BEHAVIORAL HEALTH	1912243148		
2	$932	450376909	MOTT AMBULANCE SER		301 E 5TH ST		MOTT	ND	58646	1265582092	59	Ambulance Service	1894001	MOTT AMBULANCE SERVICE	1265582092		
3	$930	450310462	HILL	DEBORAH	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1588755383	43	Certified Registered Nurse Anesthetist	9001	ALTRU HEALTH SYSTEM	1043309552		
32	$927	208879803	ORTH	MASON	3175 SIENNA DR STE 105		FARGO	ND	58104	1336150333	35	Chiropractor	7051001	HEALTHSOURCE OF FARGO-MO	1639367121		
17	$926	450226700	CORNELL	CARISSA	222 N 7TH ST		BISMARCK	ND	58501	1629323605	50	Nurse Practitioner	4001	SANFORD CLINIC	1811941172		
99	$925	562587064	AMERICAN DRUG STOR	ELAWARE LL	1321 19TH AVE N		FARGO	ND	58102	1649211517	63	Pharmacy	7162003	AMERICAN DRUG STORES DEL	1649211517		
10	$925	410851371	JORGENS	MICHAL	603 BRUCE ST		CROOKSTON	MN	56716	1689635898	62	Psychology	1269001	NORTHWESTERN MENTAL HEAL	1508835133		
151	$925	911770748	MANJUNATH	HEERAIMANG	904 5TH AVE NE		JAMESTOWN	ND	58401	1366472441	6	Cardivascular Disease	3005	SANFORD HEALTH JAMESTOWN	1942241351		
10	$922	450311334	JONDAHL	PAUL	401 N 9TH ST		BISMARCK	ND	58501	1780638981	8	Family Practice	236001	MID DAKOTA CLINIC	1275587826		
23	$922	450226909	LIZAKOWSKI	JASON	736 BROADWAY N		FARGO	ND	58102	1457378127	97	Physician Assistant	7742022	SANFORD BROADWAY MEDICAL	1184917924		
10	$920	208928600	RODKE	STEPHANIE	3060 FRONTIER WAY S		FARGO	ND	58104	1881973048	66	Speech Therapy	6961001	PEDIATRIC THERAPY PARTNE	1457479958		
12	$920	450340688	KILWEIN	STEVEN	420 PACIFIC AVE		MOTT	ND	58646	1437244043	48	Podiatry, Surgical chiropody	434003	WEST RIVER HEALTH SERVIC	1942398508		
32	$917	450310462	WEINMANN	ROBERT	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1780663450	30	Radiology	9001	ALTRU HEALTH SYSTEM	1043309552		
9	$916	450231183	LEE	PETER	1301 15TH AVE W		WILLISTON	ND	58801	1881673374	30	Radiology	711004	MERCY RADIOLOGY SERVICES	1629234257		
2	$914	450310462	SIEMERS	TRENT	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1326154956	43	Certified Registered Nurse Anesthetist	9001	ALTRU HEALTH SYSTEM	1043309552		
12	$913	450226909	EVANSON	CANDYCE	736 BROADWAY N		FARGO	ND	58102	1871510735	97	Physician Assistant	7742022	SANFORD BROADWAY MEDICAL	1184917924		
60	$913	450226700	WEGH	AMANDA	801 21ST AVENUE SE		MINOT	ND	58701	1376783134	65	Physical Therapy	4052	SANFORD HEALTH OCCUPATIO	1669524351		
53	$910	911770748	ARAVAPALLI	ARUNA	801 BROADWAY NORTH		FARGO	ND	58102	1710139068	11	Internal Medicine	3001	SANFORD BROADWAY CLINIC	1942241351		
21	$910	911770748	SMALL	DONNA	420 S 7TH ST		OAKES	ND	58474	1326195777	8	Family Practice	3068	SANFORD HEALTH OAKES CLI	1942241351		
29	$910	450226700	SEAMANDS	ERIC	2603 E BROADWAY AVE		BISMARCK	ND	58501	1326386061	35	Chiropractor	4068	SANFORD HEALTH CHIROPRAC	1811941172		
36	$906	450310462	PHELAN	JEFFREY	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1497734123	30	Radiology	9001	ALTRU HEALTH SYSTEM	1043309552		
13	$906	450308379	BLACKSMITH	MICHAEL	517 8TH AVE NE		HAZEN	ND	58545	1750355533	8	Family Practice	340004	SAKAKAWEA HAZEN CLINIC	1174597173		
90	$905	450226700	MANN	KRYSTAL	715 E BROADWAY AVE		BISMARCK	ND	58501	1114277068	64	Audiology	4050	SANFORD SEVENTH AND BROA	1811941172		
8	$905	450226700	HUBER	CHERYL	300 N 7TH ST		BISMARCK	ND	58501	1114025855	26	Psychiatry (MD)	440001	SANFORD MEDICAL CENTER/B	1811941172		
7	$904	261175213	STICH	SHERREY	1702 UNIVERSITY DR S		FARGO	ND	58103	1407181639	66	Speech Therapy	6885031	INNOVIS HEALTH, LLC DBA	1255677084		
92	$902	270664491	ALTRU CLINIC PHARM		1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1326279548	54	Home Medical Equipment	7558001	ALTRU CLINIC PHARMACY	1326279548		
19	$902	450310462	METZGER	DANA	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1154376135	8	Family Practice	9001	ALTRU HEALTH SYSTEM	1043309552		
9	$899	450254692	SEDO	PHILIP	702 1ST ST SW		CROSBY	ND	58730	1568569622	8	Family Practice	428001	ST LUKES HOSPITAL DBA CR	1184737231		
15	$898	450226711	LEVORA	JAN	900 E BROADWAY AVE		BISMARCK	ND	58501	1952599524	39	Nephrology	501001	ST ALEXIUS MEDICAL CENTE	1205868429		
83	$897	456002491	BIBERDORF	PEGGY	MONTGOMERY HALL ROOM 101	290 CENTENNIA	GRAND FORKS	ND	58202	1639267735	66	Speech Therapy	606001	UND SPEECH LANGUAGE & HE	1093910762		
5	$897	450226909	CANNON	SHARON	801 BROADWAY NORTH		FARGO	ND	58102	1578580577	43	Certified Registered Nurse Anesthetist	7742001	SANFORD BROADWAY CLINIC	1184917924		
11	$897	450437652	JUAREZ	GUADALUPE	151 S 4TH ST STE 401		GRAND FORKS	ND	58201	1386860286	83	Licenses Addiction Counselor-Chemical Dependency	242001	NORTHEAST HUMAN SERVICE	1366496341		
6	$895	450226909	ARUSELL	ROBERT	820 4TH ST N		FARGO	ND	58102	1811915515	32	Radiation Therapy	7742002	SANFORD ROGER MARIS CANC	1184917924		
25	$894	450310462	WOLD	PETER	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1861471633	30	Radiology	9001	ALTRU HEALTH SYSTEM	1043309552		
83	$894	450260821	WHITE DRUG #65		544 HILL AVE		GRAFTON	ND	58237	1932298544	54	Home Medical Equipment	4578001	WHITE DRUG #65	1932298544		
26	$893	470757739	PETERS	HAYLEE	683 STATE AVE STE B		DICKINSON	ND	58601	1033421698	67	Occupational Therapy	1985001	OMAHA THERAPY INC. DBA R	1730280371		
27	$893	450226429	ROSENBERG	ZACHARY	227 16TH ST W		DICKINSON	ND	58601	1750395844	4	Otology, Laryngology, Rhinology	6838001	BADLANDS ENT CLINIC	1851311815		
3	$891	450226558	LUNDGREN	MARK	1 BURDICK EXPRESSWAY W		MINOT	ND	58701	1700996857	43	Certified Registered Nurse Anesthetist	635031	TRINITY MEDICAL GROUP AN	1083653752		
21	$888	450226909	SMITH	CYNTHIA	801 BROADWAY NORTH		FARGO	ND	58102	1568484129	97	Physician Assistant	7742001	SANFORD BROADWAY CLINIC	1184917924		
16	$888	261175213	BITZ	HEIDI	801 BELSLY BLVD S		MOORHEAD	MN	56560	1386680080	65	Physical Therapy	6885034	INNOVIS HEALTH, LLC DBA	1659617504		
10	$886	450310462	RAYMOND	JON	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1508958935	72	Emergency Medicine	9001	ALTRU HEALTH SYSTEM	1043309552		
11	$884	450226700	HERMANSON	PATRICIA	300 N 7TH ST		BISMARCK	ND	58501	1164528519	50	Nurse Practitioner	440001	SANFORD MEDICAL CENTER/B	1811941172		
22	$883	861123162	FUELLER	DEBRA	310 N 10TH ST		BISMARCK	ND	58501	1689878902	50	Nurse Practitioner	6459001	ST ALEXIUS HEART & LUNG	1194823021		
21	$882	450226909	GRANDHI	ANUPAMA	1717 SOUTH UNIVERSITY DR		FARGO	ND	58103	1821185844	19	Oral Surgery	7742027	SANFORD 1717 MEDICAL BUI	1184917924		
10	$881	450253272	BIEL	ARDALIA	208 N MAIN ST		HERREID	SD	57632	1811913379	97	Physician Assistant	586001	CAMPBELL COUNTY CLINIC	1629175237		
6	$881	450226558	CHIANG	GEORGE	400 BURDICK EXPY E		MINOT	ND	58701	1093773954	34	Urology	635006	TRINITY MEDICAL GROUP	1083653752		
32	$879	477045039	RILEY	JANA	205 ROOSEVELT		KARLSTAD	MN	56732	1821311309	35	Chiropractor	7550001	KARLSTAD FAMILY CHIROPRA	1821311309		
8	$878	450226909	SEE	JAY	1720 UNIVERSITY DR S		FARGO	ND	58103	1184670812	11	Internal Medicine	7742004	SANFORD SOUTH UNIVERSITY	1184917924		
90	$878	911770748	CAMPBELL	ROBERT	1301 8TH ST S		MOORHEAD	MN	56560	1013935758	8	Family Practice	3035	SANFORD MOORHEAD CLINIC	1942241351		
4	$877	861123162	KESSLER	KENNETH	310 N 10TH ST		BISMARCK	ND	58501	1538250246	97	Physician Assistant	6459001	ST ALEXIUS HEART & LUNG	1194823021		
2	$877	450370048	GLENBURN AREA AMBU	E	104 3RD AVE S		GLENBURN	ND	58740	1598837346	59	Ambulance Service	3217001	GLENBURN AREA AMBULANCE	1598837346		
20	$877	870694180	COLBURN	JEANNINE	701 3RD STREET NW		JAMESTOWN	ND	58401	1508990193	67	Occupational Therapy	5919001	ANNE CARLSEN CENTER	1598930109		
20	$877	412002769	NELSON	JOHN	307 1ST AVE NW		KENMARE	ND	58746	1952481723	72	Emergency Medicine	6176001	KENMARE HEALTH CENTER	1649226671		
22	$876	261175213	SIKKINK	KARI RAE	819 MAIN ST		LISBON	ND	58054	1942233432	8	Family Practice	6885021	INNOVIS HEALTH, LLC DBA	1043490790		
4	$873	450308484	OXNER	WILLIAM	810 N WELO ST		TIOGA	ND	58852	1396740460	43	Certified Registered Nurse Anesthetist	59001	TIOGA MEDICAL CENTER HOS	1285728378		
13	$872	470757739	OLSON	SAVANNAH	683 STATE AVE STE B		DICKINSON	ND	58601	1780022541	65	Physical Therapy	1985001	OMAHA THERAPY INC. DBA R	1730280371		
19	$872	272042143	RINKE	MICHELLE	401 12 ST N		WHEATON	MN	56296	1730198383	50	Nurse Practitioner	7810001	SANFORD WHEATON	1245524669		
2	$870	450311334	TOWN	JERRY	401 N 9TH ST		BISMARCK	ND	58501	1841343191	43	Certified Registered Nurse Anesthetist	236001	MID DAKOTA CLINIC	1275587826		
16	$870	113686120	JACKSON	ORLAN	1312 HIGHWAY 49 N		BEULAH	ND	58523	1184602666	8	Family Practice	6103001	COAL COUNTRY COMMUNITY H	1942288329		
26	$867	450226909	BORGESON	DEBRA	801 BROADWAY NORTH		FARGO	ND	58102	1982626578	50	Nurse Practitioner	7742001	SANFORD BROADWAY CLINIC	1184917924		
17	$867	450226558	NASUR	ALI	1 BURDICK EXPY W		MINOT	ND	58701	1922011782	1	General Practice	635032	TRINITY MEDICAL GROUP	1083653752		
39	$865	911770748	GABRIEL	JAMES	420 S 7TH ST		OAKES	ND	58474	1235577685	50	Nurse Practitioner	3068	SANFORD HEALTH OAKES CLI	1942241351		

62	$864	911770748	KREIS	REBECCA	820 4TH ST N		FARGO	ND	58102	1164775441	50	Nurse Practitioner	3030	SANFORD ROGER MARIS CANC	1942241351		
14	$864	205396241	SOLBERG	JULIE	2650 32ND AVE S	STE D	GRAND FORKS	ND	58201	1407024326	97	Physician Assistant	6860001	AURORA URGENT CARE	1942318308		
19	$862	450231181	OMOTUNDE	JOSHUA	2422 20TH ST SW		JAMESTOWN	ND	58401	1134190192	8	Family Practice	124001	JAMESTOWN REGIONAL MEDIC	1821044652		
108	$862	611481142	THOMPSON	KARI	4622 40 AVE S STE B		FARGO	ND	58104	1528307972	65	Physical Therapy	6456001	AT HOME THERAPY SERVICES	1437173945		
29	$860	450440223	LINSTER	CAROLYN	1100 N BROADWAY STE 110		MINOT	ND	58703	1861727943	41	Optometrist	649001	NYRE, ROBERT, OD	1528116969		
20	$860	450231181	MALLBERG	TRACIE	2422 20TH ST SW		JAMESTOWN	ND	58401	1871502740	8	Family Practice	124001	JAMESTOWN REGIONAL MEDIC	1821044652		
2	$859	450226909	VAAGEN	ROGER	801 BROADWAY NORTH		FARGO	ND	58102	1770505349	43	Certified Registered Nurse Anesthetist	7742001	SANFORD BROADWAY CLINIC	1184917924		
5	$859	450462585	STRINDEN	THOMAS	34 CENTER AVE SUITE B		MAYVILLE	ND	58257	1841212404	18	Opthalmology	7176005	EYE PHYSICIANS GROUP, LL	1346405891		
39	$856	450424398	BORSTAD	JOSH	2717 ROCK ISLAND PL		BISMARCK	ND	58504	1245414457	41	Optometrist	1646001	BIS-MAN EYECARE ASSOCIAT	1669401527		
104	$854	411674021	MIDWEST MEDICAL EQ	ENT & SUPP	4418 HAINES RD #1200		DULUTH	MN	55811	1730181124	54	Home Medical Equipment	7917003	MIDWEST MEDICAL EQUIPMEN	1730181124		
8	$853	450437649	COOMBS	LINCOLN	520 3RD ST NW		JAMESTOWN	ND	58401	1043356405	62	Psychology	123001	SOUTH CENTRAL HUMAN SERV	1225075906		
16	$852	450226909	OLSON	KATHERINE	1717 SOUTH UNIVERSITY DR		FARGO	ND	58103	1164512273	68	Licensed Registered Dietitian	7742027	SANFORD 1717 MEDICAL BUI	1184917924		
3	$852	450311334	MCARTHUR	RYAN	401 N 9TH ST		BISMARCK	ND	58501	1679626972	43	Certified Registered Nurse Anesthetist	236001	MID DAKOTA CLINIC	1275587826		
14	$852	450231183	CAGGIANO	JOHN	1213 15TH AVE W		WILLISTON	ND	58801	1922008192	20	Orthopedic Surgery	711001	CRAVEN-HAGAN/MERCY MEDIC	1760549000		
21	$851	450226700	STENSGARD	KATHRYN	222 N 7TH ST		BISMARCK	ND	58501	1437591062	50	Nurse Practitioner	4001	SANFORD CLINIC	1811941172		
53	$850	450226909	KRINGLIE	CASSANDRA	2400 32ND AVE S		FARGO	ND	58103	1336228246	97	Physician Assistant	7742008	SANFORD SOUTHPOINTE CLIN	1184917924		
12	$849	412002771	COLE	KAYLA	1 BURDICK EXPRESSWAY W		MINOT	ND	58701	1114237542	68	Licensed Registered Dietitian	5656001	TRINITY HOSPITALS	1427103910		
4	$847	450226909	GABA	ANU	332 2ND AVE N		WAHPETON	ND	58075	1922025907	75	Oncology	7742019	SANFORD HEALTH WAHPETON	1184917924		
65	$845	456002491	FREELAND	BONNIE	MCCANNEL HALL ROOM 100	2891 2ND AVE N	GRAND FORKS	ND	58202	1194784595	50	Nurse Practitioner	180001	UND STUDENT HEALTH SERVI	1922067305		
19	$844	450437652	WALKER	ANDREA	151 S 4TH ST STE 401		GRAND FORKS	ND	58201	1881775039	80	Clinical Social Worker	242001	NORTHEAST HUMAN SERVICE	1366496341		
97	$844	911770748	SARJI	RAWA	801 BROADWAY NORTH		FARGO	ND	58102	1396978128	6	Cardivascular Disease	3001	SANFORD BROADWAY CLINIC	1942241351		
24	$844	911770748	GIGSTAD-STAVE	DOREEN	801 BROADWAY NORTH		FARGO	ND	58102	1497772354	97	Physician Assistant	3001	SANFORD BROADWAY CLINIC	1942241351		
3	$843	261175213	HARVEY	LYNDA	3000 32ND AVE S		FARGO	ND	58103	1386622991	43	Certified Registered Nurse Anesthetist	6885030	INNOVIS HEALTH, LLC DBA	1578907655		
12	$843	911770748	KRASNIEWSKA	LIDIA	2701 13TH AVE S		FARGO	ND	58103	1003833773	37	Pediatrics	3015	SANFORD CHILDRENS SOUTHW	1942241351		
21	$843	261877737	WIEGEL	LANCE	207 E FRONT AVE STE A		BISMARCK	ND	58504	1275718975	35	Chiropractor	8018001	BIS-MAN CHIROPRACTIC ACU	1578804316		
16	$843	261175213	SAUVAGEAU	KATIE	801 BELSLY BLVD S		MOORHEAD	MN	56560	1114048378	65	Physical Therapy	6885034	INNOVIS HEALTH, LLC DBA	1659617504		
46	$840	450310462	NAZIR	ASAD	1380 S COLUMBIA RD		GRAND FORKS	ND	58201	1346567633	8	Family Practice	9021	ALTRU FAMILY MEDICINE CE	1043309552		
12	$840	460440414	BORMES	JOHN	111 MAIN ST		ELLENDALE	ND	58436	1578568978	18	Opthalmology	593001	OPHTHALMOLOGY ASSOCIATES	1306900634		
18	$838	410851371	BERG	CAROLYN	603 BRUCE ST		CROOKSTON	MN	56716	1629037742	80	Clinical Social Worker	1269001	NORTHWESTERN MENTAL HEAL	1508835133		
12	$836	450358986	VEGIRAJU	THAMMI	1015 4TH AVE S		WISHEK	ND	58495	1356611958	1	General Practice	441001	WISHEK RURAL HEALTH CLIN	1376584623		
18	$834	450226909	SHAHIRA	ERAM	801 BROADWAY NORTH		FARGO	ND	58102	1578762548	11	Internal Medicine	7742001	SANFORD BROADWAY CLINIC	1184917924		
12	$834	450321538	MOORE	MICHAEL	1600 2ND AVE SW STE 19		MINOT	ND	58701	1871515387	20	Orthopedic Surgery	188002	THE BONE & JOINT CENTER,	1750307872		
9	$834	260480153	MARTINSEN	WAYNE	7151 15TH ST S		FARGO	ND	58104	1851352504	26	Psychiatry (MD)	6986002	DAKOTA FAMILY SERVICES	1578755344		
49	$834	450226700	ALLAN	NORA	222 N 7TH ST		BISMARCK	ND	58501	1033317854	50	Nurse Practitioner	4001	SANFORD CLINIC	1811941172		
7	$832	275083786	POSPISHIL	CHARLES	1425 21ST AVE NW		MINOT	ND	58703	1871680488	80	Clinical Social Worker	7697002	POSPISHIL & ASSOCIATES,	1134426463		
13	$832	454159294	BARTZ	CASEY	420 CENTER AVE STE 41		MOORHEAD	MN	56560	1447480520	41	Optometrist	7843001	MOORHEAD VISION ASSOCIAT	1164794780		
10	$831	911770748	VOLDEN	ERIN	1245 WASHINGTON AVE		DETROIT LAKES	MN	56501	1003838590	50	Nurse Practitioner	3007	SANFORD HEALTH DETROIT L	1942241351		
9	$831	450226700	MELBERG	TIFFANY	300 N 7TH ST		BISMARCK	ND	58501	1063782126	44	Psychiatric Nurse	440001	SANFORD MEDICAL CENTER/B	1811941172		
19	$828	450437654	FISHER	TROY	200 HIGHWAY 2 SW		DEVILS LAKE	ND	58301	1952671117	83	Licenses Addiction Counselor-Chemical Dependency	159001	LAKE REGION HUMAN SERVIC	1669411930		
9	$827	450226909	BREKKEN	MARIE	1720 UNIVERSITY DR S		FARGO	ND	58103	1023035029	97	Physician Assistant	7742004	SANFORD SOUTH UNIVERSITY	1184917924		
69	$827	450260821	WHITE DRUG #63		425 COLLEGE DR S #10		DEVILS LAKE	ND	58301	1386734226	54	Home Medical Equipment	6210001	WHITE DRUG #63	1386734226		
18	$826	450431679	EBERHARDT	SHAUNA	1202 23RD ST S		FARGO	ND	58103	1285908855	83	Licenses Addiction Counselor-Chemical Dependency	423001	DRAKE COUNSELING SERVICE	1154378057		
12	$825	411687554	HANSON	BRUCE	1104 7TH AVE S		MOORHEAD	MN	56563	1073605697	66	Speech Therapy	1430001	MSUM SPEECH, LANGUAGE &	1215000963		
15	$823	450226711	ANDERSON	DANIELLE	900 E BROADWAY AVE		BISMARCK	ND	58501	1831430644	97	Physician Assistant	501001	ST ALEXIUS MEDICAL CENTE	1205868429		
19	$823	450226909	JAMIL	MOUHAMAD	801 BROADWAY NORTH		FARGO	ND	58102	1841226305	29	Pulmonary Diseases	7742001	SANFORD BROADWAY CLINIC	1184917924		
44	$823	450424921	KRIEGER	SHARON	23 N MAIN ST		TIOGA	ND	58852	1144348384	35	Chiropractor	1447001	CHIROPRACTIC CARE CLINIC	1144348384		
44	$822	450226558	KIHLE	KENNETH	400 BURDICK EXPY E		MINOT	ND	58701	1477660082	1	General Practice	635006	TRINITY MEDICAL GROUP	1083653752		
17	$822	450226700	JUDAH	GRANT	2603 E BROADWAY AVE		BISMARCK	ND	58501	1528260536	65	Physical Therapy	4032	SANFORD HEALTH OCCUPATIO	1669524351		
30	$821	271966847	SCHANANDORE	AMY	100 ELM AVE		NEW SALEM	ND	58563	1851552137	65	Physical Therapy	7940003	ST JOSEPHS HOSPICE AND H	1487969952		
20	$821	911770748	BIER	DENNIS	820 4TH ST N		FARGO	ND	58102	1114945847	32	Radiation Therapy	3030	SANFORD ROGER MARIS CANC	1942241351		
6	$819	450226909	SMOGARD	WAYNE	1720 UNIVERSITY DR S		FARGO	ND	58103	1659392876	43	Certified Registered Nurse Anesthetist	7742004	SANFORD SOUTH UNIVERSITY	1184917924		
17	$815	205749003	BECKER	RACHEL	1303 E CENTRAL AVE		BISMARCK	ND	58501	1255763033	67	Occupational Therapy	6880001	RED DOOR PEDIATRIC THERA	1639257033		
124	$815	450226700	FISHER	CATHERINE	801 21ST AVE SE		MINOT	ND	58701	1740326479	22	Pathology, Anatomy, Clinical Pathology	4065	SANFORD HEALTH WALK-IN C	1811941172		
30	$815	261175213	SKOVE	MARCIE	3000 32ND AVE S		FARGO	ND	58103	1730113507	97	Physician Assistant	6885030	INNOVIS HEALTH, LLC DBA	1578907655		
5	$815	450226909	HILSCHER DECKER	TARA	1720 UNIVERSITY DR S		FARGO	ND	58103	1962517227	43	Certified Registered Nurse Anesthetist	7742004	SANFORD SOUTH UNIVERSITY	1184917924		
12	$814	450308379	KASPARI	THOMAS	510 8TH AVE NE		HAZEN	ND	58545	1528046000	8	Family Practice	340006	SAKAKAWEA CLINIC	1356315220		
20	$814	911770748	LUNDEEN	TINA	2400 32ND AVE S		FARGO	ND	58103	1023030517	50	Nurse Practitioner	3014	SANFORD SOUTHPOINTE CLIN	1942241351		
75	$814	450260821	THRIFTY WHITE DRUG		2475 32 AVE S STE 1		GRAND FORKS	ND	58201	1689763294	54	Home Medical Equipment	1932001	WHITE DRUG #9	1689763294		
8	$814	450226909	VOLK	JAMES	801 BROADWAY NORTH		FARGO	ND	58102	1902828593	11	Internal Medicine	7742001	SANFORD BROADWAY CLINIC	1184917924		
17	$813	261175213	ROTH	SHANNON	3000 32ND AVE S		FARGO	ND	58103	1144208976	50	Nurse Practitioner	6885030	INNOVIS HEALTH, LLC DBA	1578907655		
10	$813	264314533	WIGER	DONALD	510 4TH ST S		FARGO	ND	58103	1427285253	26	Psychiatry (MD)	7444001	PSJ ACQUISITION LLC	1679709802		
7	$812	450226700	WEIGUM	CINDY	300 N 7TH ST		BISMARCK	ND	58501	1669578753	50	Nurse Practitioner	440001	SANFORD MEDICAL CENTER/B	1811941172		
20	$811	450310462	AIZPURU	RICHARD	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1558367789	30	Radiology	9001	ALTRU HEALTH SYSTEM	1043309552		
3	$808	450226909	BLAZE	JODEE	1720 UNIVERSITY DR S		FARGO	ND	58103	1093955593	43	Certified Registered Nurse Anesthetist	7742004	SANFORD SOUTH UNIVERSITY	1184917924		
16	$807	450227012	JUREK	THOMAS	1031 7TH ST NE		DEVILS LAKE	ND	58301	1538120662	50	Nurse Practitioner	76001	THE MERCY HOSPITAL OF DE	1790751170		
30	$806	450226553	HI LINE MED EQUIP		570 CHAUTAUQUA BLVD		VALLEY CITY	ND	58072	1457313819	54	Home Medical Equipment	1975001	MERCY HOSPITAL DBA HI LI	1457313819		

14	$804	450226909	KIM	DUK	700 1ST AVE S		FARGO	ND	58103	1760423354	13	Neurology	7742007	SANFORD NEUROSCIENCE CLI	1184917924		
18	$803	450310462	OLSON	WADE	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1619290590	50	Nurse Practitioner	9001	ALTRU HEALTH SYSTEM	1043309552		
45	$802	263652837	PAUSCH	DANA	1665 43RD ST S STE 102		FARGO	ND	58103	1396996815	35	Chiropractor	7280001	PAUSCH CHIROPRACTIC	1871815647		
32	$802	262214685	GOSSETT	MICHAEL	1421 MAPLETON AVE		BISMARCK	ND	58503	1235332511	35	Chiropractor	7149001	GOSSETT CHIROPRACTIC ART	1942482492		
8	$802	450310462	CHOU	DAVID	4500 S WASHINGTON ST		GRAND FORKS	ND	58201	1710926878	30	Radiology	9045	ALTRU SPECIALTY CENTER	1154346161		
12	$802	450437652	DUSENBURY	KATHERINE	151 S 4TH ST STE 401		GRAND FORKS	ND	58201	1720150642	80	Clinical Social Worker	242001	NORTHEAST HUMAN SERVICE	1366496341		
28	$800	450231183	PETERSON	JEFFREY	1301 15TH AVE W		WILLISTON	ND	58801	1972552107	30	Radiology	711004	MERCY RADIOLOGY SERVICES	1629234257		
7	$798	450226429	MCCULLOUGH	SARAH	30 7TH ST W		DICKINSON	ND	58601	1659393734	72	Emergency Medicine	95001	ST JOSEPHS HOSPITAL AND	1992947956		
34	$798	450310159	VELDMAN	MARK	164 WEST 13TH STREET		GRAFTON	ND	58237	1538188511	30	Radiology	282001	GRAFTON FAMILY CLINIC	1558423665		
8	$798	450226700	FOGARTY	EDWARD	414 N 7TH ST		BISMARCK	ND	58501	1902826340	30	Radiology	4046	SANFORD SEVENTH AND ROSS	1811941172		
39	$797	450450539	LAMOURE DRUG STORE	C	100 1ST AVE SW		LAMOURE	ND	58458	1740249929	54	Home Medical Equipment	3157001	LAMOURE DRUG STORE	1740249929		
5	$796	450310462	PEARSON	ROBERTA	4440 S WASHINGTON ST		GRAND FORKS	ND	58201	1336452374	97	Physician Assistant	9033	ALTRU PROFESSIONAL CENTE	1043309552		
11	$795	450308484	SULLIVAN	BRIAN	710 N WELO ST		TIOGA	ND	58852	1972761252	8	Family Practice	327001	TIOGA MEDICAL CENTER	1245296078		
27	$795	450310462	HOMMEYER	STEVEN	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1356329593	30	Radiology	9001	ALTRU HEALTH SYSTEM	1043309552		
2	$793	261175213	ZARLING	ANNE	3000 32ND AVE S		FARGO	ND	58103	1740224906	43	Certified Registered Nurse Anesthetist	6885030	INNOVIS HEALTH, LLC DBA	1578907655		
16	$792	270056777	CHRISTIANSON	CHARLES	301 HWY 15		NORTHWOOD	ND	58267	1083674337	8	Family Practice	6163001	VALLEY COMMUNITY HEALTH	1356327001		
3	$790	450310462	BOEN	CHAD	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1215034095	43	Certified Registered Nurse Anesthetist	9001	ALTRU HEALTH SYSTEM	1043309552		
24	$788	450230083	EBEL	JODINE	16351 I 94		SENTINEL BUTTE	ND	58654	1841452828	83	Licenses Addiction Counselor-Chemical Dependency	6887001	HOME ON THE RANGE	1114059805		
50	$787	450226700	MILLER	JOHN	3318 N 14TH STREET		BISMARCK	ND	58503	1346448925	30	Radiology	4064	SANFORD NORTH WALK-IN CL	1811941172		
26	$787	450231183	GRAMITH	FREDERICK	1301 15TH AVE W		WILLISTON	ND	58801	1245283274	30	Radiology	711004	MERCY RADIOLOGY SERVICES	1629234257		
19	$787	450310462	WEILAND	TIMOTHY	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1235225590	22	Pathology, Anatomy, Clinical Pathology	9001	ALTRU HEALTH SYSTEM	1043309552		
8	$785	272163607	TURMAN	MICHAEL	1611 E CENTURY AVE	STE 400	BISMARCK	ND	58503	1326354812	91	Endodontist	7655001	TURMAN ENDODONTICS	1326354812		
39	$785	450310159	BERGER	MARK	164 WEST 13TH STREET		GRAFTON	ND	58237	1962481747	30	Radiology	282001	GRAFTON FAMILY CLINIC	1558423665		
25	$785	450310462	FRECENTESE	DOMINIC	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1144209008	30	Radiology	9001	ALTRU HEALTH SYSTEM	1043309552		
23	$785	261175213	ISAAK	CHRISTINE	801 BELSLY BLVD S		MOORHEAD	MN	56560	1417235466	65	Physical Therapy	6885034	INNOVIS HEALTH, LLC DBA	1659617504		
5	$784	450437651	GJERDE	ELIZABETH	2624 9TH AVE S		FARGO	ND	58103	1699883363	88	#N/A	100001	SOUTHEAST HUMAN SERVICE	1932146941		
5	$783	450226909	OLSON	ROBERT	1720 UNIVERSITY DR S		FARGO	ND	58103	1518985118	26	Psychiatry (MD)	7742004	SANFORD SOUTH UNIVERSITY	1184917924		
4	$783	450450254	DOLLINGER	JAY	600 N 9TH ST		BISMARCK	ND	58501	1609967785	43	Certified Registered Nurse Anesthetist	1261001	BISMARCK SURGICAL ASSOCI	1487814356		
1	$782	410724029	FONTAINE	SCOTT	323 S MINNESOTA ST		CROOKSTON	MN	56716	1801956792	43	Certified Registered Nurse Anesthetist	5548001	RIVERVIEW HEALTHCARE ASS	1477525566		
9	$782	264314533	ARMSTRONG	LACEY	510 4TH ST S		FARGO	ND	58103	1942520325	26	Psychiatry (MD)	7444001	PSJ ACQUISITION LLC	1679709802		
151	$780	911770748	CHEMITI	GOPAL	420 S 7TH ST		OAKES	ND	58474	1740207745	39	Nephrology	3068	SANFORD HEALTH OAKES CLI	1942241351		
6	$780	450440929	REHMERT	AMANDA	135 W VILLARD ST		DICKINSON	ND	58601	1871802181	62	Psychology	665001	WESTWIND CONSULTING CENT	1619943776		
31	$778	450416372	OLSON	TIMOTHY	3220 18TH ST S STE 2		FARGO	ND	58104	1801945746	35	Chiropractor	559001	SOUTH POINTE CHIROPRACTI	1023270683		
7	$776	450226558	PERCELL	ROBERT	1321 W DAKOTA PARKWAY		WILLISTON	ND	58801	1316025505	6	Cardivascular Disease	635039	TRINITY COMMUNITY CLINIC	1083653752		
13	$774	450226909	WILLIAMS	MICHELLE	1717 SOUTH UNIVERSITY DR		FARGO	ND	58103	1851313449	68	Licensed Registered Dietitian	7742027	SANFORD 1717 MEDICAL BUI	1184917924		
43	$774	450201405	THRIFTY WHITE DRUG		511 1ST ST NW		MANDAN	ND	58554	1588753198	54	Home Medical Equipment	3089001	THRIFTY WHITE DRUG #43	1588753198		
9	$774	911770748	FABER	KEVIN	2801 UNIVERSITY DR S		FARGO	ND	58103	1720095482	13	Neurology	3067	SANFORD 2801 MEDICAL BUI	1942241351		
9	$773	911770748	BEAUCLAIR	JOHN	3838 12TH AVE N		FARGO	ND	58102	1477571172	8	Family Practice	587001	SANFORD HEALTH OCCUPATIO	1952323974		
5	$773	450226558	WUTHRICH	CATHERINE	1 BURDICK EXPY W		MINOT	ND	58701	1477745842	27	Psychiatry, Neurology	635032	TRINITY MEDICAL GROUP	1083653752		
15	$771	261175213	HARRIS	SCOTT	1401 13TH AVE E		WEST FARGO	ND	58078	1740402858	2	General Surgery	6885033	INNOVIS HEALTH, LLC DBA	1487990339		
13	$771	450227012	JONAS	ROXANNE	1031 7TH ST NE		DEVILS LAKE	ND	58301	1134176779	8	Family Practice	76001	THE MERCY HOSPITAL OF DE	1790751170		
9	$770	450231183	NIEDERHAUSER	CARISSA	1301 15TH AVE W		WILLISTON	ND	58801	1831458744	97	Physician Assistant	142001	MERCY MEDICAL/HOSPITAL E	1720194624		
6	$769	450310462	METELMANN	STACIE	201 E 3RD AVE S		CAVALIER	ND	58220	1962605162	71	Certified Diabetic Educator	37001	ALTRU CAVALIER	1053400523		
10	$769	411656511	PEDIATRIC HOME SER		2800 CLEVELAND AVE N		ROSEVILLE	MN	55113	1629141213	54	Home Medical Equipment	8028001	PEDIATRIC HOME SERVICE	1629141213		
8	$769	450226429	KHELGHATI	AMRULLAH	227 16TH ST W		DICKINSON	ND	58601	1376698829	37	Pediatrics	95009	ST JOSEPHS WALK IN CLINI	1992947956		
70	$768	450260821	WHITE DRUG # 34		1681 THIRD AVE WEST		DICKINSON	ND	58601	1124117734	54	Home Medical Equipment	7880001	WHITE DRUG #34	1124117734		
103	$768	456002491	LARSON	ANNETTE	MCCANNEL HALL ROOM 100	2891 2ND AVE I	GRAND FORKS	ND	58202	1649361445	97	Physician Assistant	180001	UND STUDENT HEALTH SERVI	1922067305		
32	$767	450226711	ERICKSTAD	FAITH	900 E BROADWAY AVE		BISMARCK	ND	58501	1346281870	50	Nurse Practitioner	501001	ST ALEXIUS MEDICAL CENTE	1205868429		
31	$767	450310462	CHU	ANTHONY	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1649365990	10	Gastronenterology	9001	ALTRU HEALTH SYSTEM	1043309552		
8	$767	450310462	KNECHT	TONY	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1568553360	72	Emergency Medicine	9001	ALTRU HEALTH SYSTEM	1043309552		
7	$766	450425948	FANOUS	BASEM	HWY 281 N		CANDO	ND	58324	1336173871	48	Podiatry, Surgical chiropody	398001	TOWNER COUNTY MEDICAL CE	1124041389		
16	$765	260012477	SAYLER	LARRY	200 CENTRAL AVE N STE F		VALLEY CITY	ND	58072	1730261843	41	Optometrist	686009	PROFESSIONAL EYECARE CEN	1699866244		
7	$765	450226909	ANDERSON	STEVEN	332 2ND AVE N		WAHPETON	ND	58075	1518991678	18	Opthalmology	7742019	SANFORD HEALTH WAHPETON	1184917924		
21	$764	450310462	COOK	GINA	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1063696425	50	Nurse Practitioner	9001	ALTRU HEALTH SYSTEM	1043309552		
36	$763	450260821	WHITE DRUG #53		201 E 3RD AVE S		CAVALIER	ND	58220	1730242728	63	Pharmacy	1934004	WHITE DRUG #53	1730242728		
7	$762	264314533	SMITH	TIMOTHY	510 4TH ST S		FARGO	ND	58103	1881821619	26	Psychiatry (MD)	7444001	PSJ ACQUISITION LLC	1679709802		
5	$761	450226909	MANJUNATH	HEERAIMANG	904 5TH AVE NE		JAMESTOWN	ND	58401	1366472441	6	Cardivascular Disease	7742018	SANFORD HEALTH JAMESTOWN	1184917924		
34	$761	502686072	SIMLE	SUSAN	240 MAIN		ELLENDALE	ND	58436	1811127822	80	Clinical Social Worker	7427001	HEALING HEARTS COUNSELIN	1811127822		
8	$760	450226429	MAGILL	THOMAS	30 7TH ST W		DICKINSON	ND	58601	1992728752	72	Emergency Medicine	95001	ST JOSEPHS HOSPITAL AND	1992947956		
8	$760	450461525	WICKS	KERRY	3952 HWY 281 SE		JAMESTOWN	ND	58401	1255429643	88	#N/A	1281001	PRAIRIE COUNSELING	1255429643		
10	$758	450226553	ANDERSEN	JEFFREY	570 CHAUTAUQUA BLVD		VALLEY CITY	ND	58072	1184701856	8	Family Practice	75001	MERCY HOSPITAL	1972698975		
34	$757	263047434	BJELLUM	HANS	720 MAIN AVE		MOORHEAD	MN	56560	1396736443	8	Family Practice	7174003	7 DAY CLINIC MOORHEAD	1790931467		
13	$755	510183396	SHIRKEY	AMIE	4227 9TH AVE SW		FARGO	ND	58103	1194095968	83	Licenses Addiction Counselor-Chemical Dependency	514001	SHAREHOUSE, INC	1205903481		
79	$754	911770748	WOLF	LORELEI	820 4TH ST N		FARGO	ND	58102	1891717468	50	Nurse Practitioner	3030	SANFORD ROGER MARIS CANC	1942241351		
11	$754	450437651	NICOLI	SARA	2624 9TH AVE S		FARGO	ND	58103	1013929371	83	Licenses Addiction Counselor-Chemical Dependency	100001	SOUTHEAST HUMAN SERVICE	1932146941		
2	$754	410724029	PALKERT	DIANE	323 S MINNESOTA ST		CROOKSTON	MN	56716	1093807786	20	Orthopedic Surgery	5548001	RIVERVIEW HEALTHCARE ASS	1477525566		

13	$753	261175213	HOWELL	CHRISTA	819 MAIN ST		LISBON	ND	58054	1083811236	46	Nurse Midwives	6885021	INNOVIS HEALTH, LLC DBA	1043490790		
23	$752	911770748	MARTINDALE	DONALD	1301 8TH ST S		MOORHEAD	MN	56560	1841222031	8	Family Practice	3035	SANFORD MOORHEAD CLINIC	1942241351		
11	$751	450226711	MALUCKY	ANDREA	900 E BROADWAY AVE		BISMARCK	ND	58501	1265664726	50	Nurse Practitioner	459001	ST ALEXIUS MEDICAL CENTE	1306832654		
14	$750	911770748	LARSON	JULIE	1245 WASHINGTON AVE		DETROIT LAKES	MN	56501	1598783169	8	Family Practice	3007	SANFORD HEALTH DETROIT L	1942241351		
13	$749	261175213	LARSON	BRUCE	2430 20TH ST SW		JAMESTOWN	ND	58401	1265470371	97	Physician Assistant	6885018	INNOVIS HEALTH, LLC DBA	1073793725		
12	$749	450253272	OLIVEIRA-FILHO	EDGAR	511 ELM AVE		LINTON	ND	58552	1376565903	72	Emergency Medicine	430004	LINTON MEDICAL CENTER ER	1972784155		
63	$748	456002491	HJELDNESS	MARLENE	MCCANNEL HALL ROOM 100	2891 2ND AVE I	GRAND FORKS	ND	58202	1023077427	50	Nurse Practitioner	180001	UND STUDENT HEALTH SERVI	1922067305		
9	$747	261175213	KHANAL	BINAYA	2430 20TH ST SW		JAMESTOWN	ND	58401	1073779831	11	Internal Medicine	6885018	INNOVIS HEALTH, LLC DBA	1073793725		
74	$747	463544617	COLEMAN	SANDEE	725 MAIN ST		HEBRON	ND	58638	1902059926	35	Chiropractor	7747001	HOMETOWN WELLNESS, PC	1902059926		
9	$747	450227012	LARSON	RICHARD	1031 7TH ST NE		DEVILS LAKE	ND	58301	1063512895	8	Family Practice	76001	THE MERCY HOSPITAL OF DE	1790751170		
8	$747	273134469	SIMON	TESSA	1150 PRAIRIE PKWY	STE 105	WEST FARGO	ND	58078	1669734547	66	Speech Therapy	7574001	PROGRESSIVE THERAPY ASSO	1699075945		
53	$745	450226700	TAN	AQUILINO	222 N 7TH ST		BISMARCK	ND	58501	1629098769	5	Anesthesiology (MD)	4001	SANFORD CLINIC	1811941172		
20	$744	456002491	DETIENNE	SHAUNA	MONTGOMERY HALL ROOM 101	290 CENTENNIA	GRAND FORKS	ND	58202	1538364070	66	Speech Therapy	606001	UND SPEECH LANGUAGE & HE	1093910762		
5	$743	501982819	MITCHELL	JENNIFER	300 2ND AVE NE STE 215		JAMESTOWN	ND	58401	1821350679	88	#N/A	8099001	JAMESTOWN COUNSELING CEN	1821350679		
12	$742	450310462	ZWILLING	JANA	1200 S COLUMBIA RD		GRAND FORKS	ND	58201	1184873911	50	Nurse Practitioner	62001	ALTRU HOSPITAL	1154346161		
9	$741	450310462	STABO	KRISTIN	1300 S COLUMBIA RD		GRAND FORKS	ND	58201	1538501226	50	Nurse Practitioner	232001	ALTRU REHABILITATION CEN	1437248945		
12	$741	911770748	GROSS	DEAN	1412 MAIN ST		HAWLEY	MN	56549	1689697682	50	Nurse Practitioner	513001	SANFORD HAWLEY CLINIC	1942241351		
37	$739	911770748	CARR	KRISTEN	4420 37 AVE S		FARGO	ND	58104	1538208806	97	Physician Assistant	3081	SANFORD HEALTH EDGEWOOD	1942241351		
25	$739	911770748	BRANCA	AUTUMN	1720 UNIVERSITY DR S		FARGO	ND	58103	1275763955	97	Physician Assistant	3904	SANFORD SOUTH UNIVERSITY	1942241351		
15	$738	261175213	BARNHARDT	SCOTT	1702 UNIVERSITY DR S		FARGO	ND	58103	1699905018	65	Physical Therapy	6885031	INNOVIS HEALTH, LLC DBA	1255677084		
54	$736	450277380	BOTTINEAU CL PHARM		314 OHMER ST		BOTTINEAU	ND	58318	1285651984	63	Pharmacy	1912001	BOTTINEAU CLINIC PHARMAC	1285651984		
29	$736	800313847	CENTRAL PHARMACY		990 MAIN ST		CARRINGTON	ND	58421	1497767990	54	Home Medical Equipment	2966001	CENTRAL PHARMACY - CARRI	1497767990		
106	$735	450260821	WHITE DRUG #39		1401 33RD ST S		FARGO	ND	58103	1215026828	63	Pharmacy	1934001	WHITE DRUG #39	1215026828		
6	$734	501583234	BRAUN	TERRY	1042 14 AVE E STE 210		WEST FARGO	ND	58078	1558588780	88	#N/A	6904001	TERRY BRAUN, LPCC	1558588780		
31	$734	861123162	WAGNER	SHEILA	310 N 10TH ST		BISMARCK	ND	58501	1093815011	50	Nurse Practitioner	6459001	ST ALEXIUS HEART & LUNG	1194823021		
8	$733	911770748	RAUM	JENNIFER	2400 32ND AVE S		FARGO	ND	58103	1306821038	11	Internal Medicine	3014	SANFORD SOUTHPOINTE CLIN	1942241351		
5	$733	208928600	DREWLO	SHARON	3060 FRONTIER WAY S		FARGO	ND	58104	1356427447	67	Occupational Therapy	6961001	PEDIATRIC THERAPY PARTNE	1457479958		
26	$732	460224598	HOLKESVIK	REID	240 MAIN ST		ELLENDALE	ND	58436	1285699322	8	Family Practice	1000001	AVERA ST LUKES DBA AVERA	1760423057		
36	$731	450226700	KRUSE	KENYON	222 N 7TH ST		BISMARCK	ND	58501	1013028091	5	Anesthesiology (MD)	4001	SANFORD CLINIC	1811941172		
6	$731	450226909	KLAVA	WILLIAM	904 5TH AVE NE		JAMESTOWN	ND	58401	1174544308	25	Physical Medicine and Rehab	7742018	SANFORD HEALTH JAMESTOWN	1184917924		
3	$729	450226909	FABIAN	MATTHEW	1717 SOUTH UNIVERSITY DR		FARGO	ND	58103	1497928972	2	General Surgery	7742027	SANFORD 1717 MEDICAL BUI	1184917924		
8	$729	450253272	KNECHT	JOHN	343 MAIN ST		HAZELTON	ND	58544	1386731065	1	General Practice	1050001	LINTON HOSPITAL DBA HAZE	1851317317		
37	$729	450457259	GOWAN	JENNIFER	121 N WASHINGTON ST		GRAND FORKS	ND	58203	1114281540	64	Audiology	2022001	FIRE AUDIOLOGICAL SERVIC	1477715910		
16	$729	680610904	MCCULLEY	MELISSA	2553 KIRSTEN LANE	STE 202	FARGO	ND	58104	1912023714	41	Optometrist	6711001	MCCULLEY, MELISSA OD, PC	1497871214		
9	$728	261175213	FORBES CROWE	FENETA	3000 32ND AVE S		FARGO	ND	58103	1619080371	50	Nurse Practitioner	6885016	ESSENTIA HEALTH HOSPITAL	1215125463		
18	$727	450226700	HUNT	HEATHER	801 21ST AVENUE SE		MINOT	ND	58701	1194918300	65	Physical Therapy	4052	SANFORD HEALTH OCCUPATIO	1669524351		
12	$726	450253272	GRUNEFELDER	JACQUELINE	511 ELM AVE		LINTON	ND	58552	1790701241	50	Nurse Practitioner	430004	LINTON MEDICAL CENTER ER	1972784155		
5	$725	450310462	TEMPLE	KEVIN	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1417043779	72	Emergency Medicine	9001	ALTRU HEALTH SYSTEM	1043309552		
9	$723	450226909	FRIEDERICHS	MATTHEW	332 2ND AVE N		WAHPETON	ND	58075	1790703338	20	Orthopedic Surgery	7742019	SANFORD HEALTH WAHPETON	1184917924		
15	$721	412002769	STANLEY	RUTH	307 1ST AVE NW		KENMARE	ND	58746	1558659292	50	Nurse Practitioner	6176001	KENMARE HEALTH CENTER	1649226671		
5	$721	450226700	HUGHES	JOHN	300 N 7TH ST		BISMARCK	ND	58501	1194755900	10	Gastronenterology	440001	SANFORD MEDICAL CENTER/B	1811941172		
36	$721	450226558	CHILCOTE	WAYNE	1 BURDICK EXPY W		MINOT	ND	58701	1508861840	30	Radiology	635032	TRINITY MEDICAL GROUP	1083653752		
7	$720	450226558	ZORN	KEVIN	400 BURDICK EXPY E		MINOT	ND	58701	1881805380	34	Urology	635006	TRINITY MEDICAL GROUP	1083653752		
72	$720	800313847	CENTRAL PHARMACY		4 N 8TH ST		NEW ROCKFORD	ND	58356	1154333730	54	Home Medical Equipment	4370001	CENTRAL PHARMACY	1154333730		
11	$719	261175213	GEFROH ELLISON	STEFANIE	275 11TH ST S		WAHPETON	ND	58075	1326072232	16	Obstet/Gynecology	6885019	INNOVIS HEALTH, LLC DBA	1790965440		
30	$718	911770748	JONES	CORWIN	1720 UNIVERSITY DR S		FARGO	ND	58103	1932126604	97	Physician Assistant	3904	SANFORD SOUTH UNIVERSITY	1942241351		
6	$718	450310462	BELVILLE	KAYLAN	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1689771461	25	Physical Medicine and Rehab	9001	ALTRU HEALTH SYSTEM	1043309552		
16	$718	826000995	STATE OF IDAHO DHW			PO BOX 94630	SEATTLE	WA	98124	0	60	Public Health or Welfare Agency	7424001	STATE OF IDAHO DHW	0		
34	$715	450455627	FICEK	DION	820 2ND AVE W		NEW ENGLAND	ND	58647	1598849184	35	Chiropractor	108001	FICEK CHIROPRACTIC, PC	1144390998		
21	$715	911770748	GLUNBERG	STEVEN	100 4TH ST S		FARGO	ND	58103	1689692220	8	Family Practice	3903	SANFORD PROFESSIONAL BUI	1942241351		
172	$714	911770748	PIERCE	CHRISTOPHE	801 BROADWAY NORTH		FARGO	ND	58102	1932127537	6	Cardivascular Disease	3001	SANFORD BROADWAY CLINIC	1942241351		
8	$713	450316160	DRAYTON VOLUNTEER	LA	105 GRANT AVE		DRAYTON	ND	58225	1457405698	59	Ambulance Service	2870001	DRAYTON VOLUNTEER AMBULA	1457405698		
51	$712	450226700	MCINTEE	MICHAEL	3318 N 14TH STREET		BISMARCK	ND	58503	1053423525	30	Radiology	4064	SANFORD NORTH WALK-IN CL	1811941172		
14	$710	261175213	HALL	JEANNE	1702 UNIVERSITY DR S		FARGO	ND	58103	1861417107	65	Physical Therapy	6885031	INNOVIS HEALTH, LLC DBA	1255677084		
9	$709	450226909	WOODBURY	KARA	1717 SOUTH UNIVERSITY DR		FARGO	ND	58103	1528081528	88	#N/A	7742027	SANFORD 1717 MEDICAL BUI	1184917924		
2	$709	450226553	STRASBURG	RYAN	570 CHAUTAUQUA BLVD		VALLEY CITY	ND	58072	1376832576	43	Certified Registered Nurse Anesthetist	75001	MERCY HOSPITAL	1972698975		
14	$707	911770748	HERBST	HAROLD	1412 MAIN ST		HAWLEY	MN	56549	1679599864	97	Physician Assistant	513001	SANFORD HAWLEY CLINIC	1942241351		
11	$707	450227012	MARTIN	RICHARD	1031 7TH ST NE		DEVILS LAKE	ND	58301	1689662983	8	Family Practice	76001	THE MERCY HOSPITAL OF DE	1790751170		
6	$707	450226909	PETERSON	ANDREA	801 BROADWAY NORTH		FARGO	ND	58102	1770731473	50	Nurse Practitioner	7742001	SANFORD BROADWAY CLINIC	1184917924		
6	$707	450311334	KOZEL	LISA	401 N 9TH ST		BISMARCK	ND	58501	1487692661	37	Pediatrics	236001	MID DAKOTA CLINIC	1275587826		
21	$706	450310462	ARSENAULT	TODD	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1902890726	30	Radiology	9001	ALTRU HEALTH SYSTEM	1043309552		
26	$703	264206324	WANNER	VICTOR	112 3 ST W STE 301		DICKINSON	ND	58601	1881611572	83	Licenses Addiction Counselor-Chemical Dependency	7346001	SACAJAWEA SUBSTANCE ABUS	1043451370		
17	$702	450226711	KAISER	TRINA	900 E BROADWAY AVE		BISMARCK	ND	58501	1861474017	50	Nurse Practitioner	501001	ST ALEXIUS MEDICAL CENTE	1205868429		
170	$701	911770748	FARKAS	SUSAN	621 DEMERS AVE		E GRAND FORKS	MN	56721	1275568933	6	Cardivascular Disease	3080	SANFORD HEALTH 621 DEMER	1942241351		
18	$699	450310462	STAVETEIG	MINDY	400 S MINNESOTA ST		CROOKSTON	MN	56716	1154509479	97	Physician Assistant	406001	ALTRU CROOKSTON	1760494330		
8	$699	450226419	HAGER	DUSTIN	800 S MAIN AVE		RUGBY	ND	58368	1144531203	97	Physician Assistant	18001	GOOD SAMARITAN HOSPITAL	1588751325		

3	$698	450226909	SZCZEPANSKI	AMBER	1720 UNIVERSITY DR S		FARGO	ND	58103	1073760237	43	Certified Registered Nurse Anesthetist	7742004	SANFORD SOUTH UNIVERSITY	1184917924		
7	$697	410709579	ABRAHAM	DAVID	1720 HIGHWAY 59 S		THIEF RIVER FLS	MN	56701	1306874920	4	Otology, Laryngology, Rhinology	2075002	SANFORD THIEF RIVER FALL	1144401514		
14	$697	450358986	HAUFF	ROSEMARY	1015 4TH AVE S		WISHEK	ND	58495	1225062722	97	Physician Assistant	441001	WISHEK RURAL HEALTH CLIN	1376584623		
20	$697	450226711	GRAEBER	LUANNA	1177 BORDER LANE		WASHBURN	ND	58577	1609846823	97	Physician Assistant	1298001	WASHBURN FAMILY CLINIC	1831267236		
15	$696	861123162	ZACHER	CARLA	310 N 10TH ST		BISMARCK	ND	58501	1700828225	37	Pediatrics	6459001	ST ALEXIUS HEART & LUNG	1194823021		
8	$694	611675349	GJERDE	ELIZABETH	3309 FIECHTNER DR STE C		FARGO	ND	58103	1699883363	88	#N/A	7763001	GJERDE, ELIZABETH LPCC D	1699883363		
13	$693	456004474	KNAPKEWICZ	CAMI	110 W BROADWAY STE 101		WILLISTON	ND	58801	1457664617	50	Nurse Practitioner	1930001	UPPER MISSOURI DISTRICT	1689677585		
5	$692	450226558	SMITH	LAKESHA	1 BURDICK EXPY W		MINOT	ND	58701	1780867283	5	Anesthesiology (MD)	635032	TRINITY MEDICAL GROUP	1083653752		
3	$692	450226909	ERRETT	BRUCE	801 BROADWAY NORTH		FARGO	ND	58102	1063565802	43	Certified Registered Nurse Anesthetist	7742001	SANFORD BROADWAY CLINIC	1184917924		
13	$691	450314527	FAST	RUSSELL	300 13 AVE W STE 1		DICKINSON	ND	58601	1578593026	80	Clinical Social Worker	235001	BADLANDS HUMAN SERVICE C	1124072525		
2	$690	760719373	SCHMALZ	PAULA	3280 20TH ST S		FARGO	ND	58104	1861427338	43	Certified Registered Nurse Anesthetist	1708001	SCHMALZ, PAULA, CRNA	1679605513		
4	$687	450226909	ZELLEM	RONALD	700 1ST AVE S		FARGO	ND	58103	1518908466	14	Neurological Surgery	7742007	SANFORD NEUROSCIENCE CLI	1184917924		
11	$685	450226423	SUMMERS	STEVEN	1201 25TH ST S		FARGO	ND	58103	1679807564	51	Medical Supply Co with Orthotist	283001	THE VILLAGE FAMILY SERVI	1568492353		
7	$684	450226700	HELD	DEBRA	300 N 7TH ST		BISMARCK	ND	58501	1265538607	97	Physician Assistant	440001	SANFORD MEDICAL CENTER/B	1811941172		
12	$683	450321538	LARSEN	DAVID	310 N 9TH ST		BISMARCK	ND	58501	1669495461	20	Orthopedic Surgery	188001	THE BONE & JOINT CENTER,	1750307872		
9	$683	450226558	SULE	SANDEEP	101 3RD AVE SW		MINOT	ND	58701	1972512325	4	Otology, Laryngology, Rhinology	635027	TRINITY MEDICAL GROUP	1083653752		
6	$682	450226700	FISCHER	BRIDGIT	300 N 7TH ST		BISMARCK	ND	58501	1710118526	50	Nurse Practitioner	440001	SANFORD MEDICAL CENTER/B	1811941172		
13	$682	450226418	STARKEY-LABAT	JULIE	2902 UNIVERSITY DR S		FARGO	ND	58103	1184762551	80	Clinical Social Worker	7836001	FRASER, LTD	1013285337		
13	$681	450306982	HILLSBORO REXALL D		13 N MAIN		HILLSBORO	ND	58045	1740380542	63	Pharmacy	2974001	HILLSBORO REXALL DRUG	1740380542		
53	$681	450352182	M & S INC DBA GREE	RUG	16 W VILLARD		DICKINSON	ND	58601	1245322437	54	Home Medical Equipment	1980001	GREENE DRUG	1245322437		
12	$679	450226558	KHAN	AMER	1 BURDICK EXPY W		MINOT	ND	58701	1487699476	11	Internal Medicine	635032	TRINITY MEDICAL GROUP	1083653752		
5	$679	522165554	DJO, LLC		1430 DECISION ST		VISTA	CA	92081	1497731533	54	Home Medical Equipment	8064001	DJO, LLC	1497731533		
31	$678	10915228	SEIL	CHARLES	1929 N WASHINGTON ST	STE OA	BISMARCK	ND	58501	1376795757	35	Chiropractor	7231001	DAKOTA LIFE CHIROPRACTIC	1174776439		
17	$678	450227012	VEARRIER	TRACY	1031 7TH ST NE		DEVILS LAKE	ND	58301	1043255755	97	Physician Assistant	76001	THE MERCY HOSPITAL OF DE	1790751170		
3	$676	450311334	MADDOCK	JEROME	401 N 9TH ST		BISMARCK	ND	58501	1295888774	43	Certified Registered Nurse Anesthetist	236001	MID DAKOTA CLINIC	1275587826		
1	$675	450226419	BRANDT	KRAIG	800 S MAIN AVE		RUGBY	ND	58368	1609817139	43	Certified Registered Nurse Anesthetist	18001	GOOD SAMARITAN HOSPITAL	1588751325		
15	$675	911770748	HAUGO	AMIE	1720 UNIVERSITY DR S		FARGO	ND	58103	1609855873	8	Family Practice	3904	SANFORD SOUTH UNIVERSITY	1942241351		
56	$675	450260821	WHITE DRUG #40		2211 16TH ST NW STE B		MINOT	ND	58703	1679663512	54	Home Medical Equipment	4467001	WHITE DRUG #40	1679663512		
17	$675	450226426	SKJOLDEN	JESSICA	316 OHMER ST		BOTTINEAU	ND	58318	1285845917	8	Family Practice	43001	ST ANDREWS HEALTH CENTER	1306903331		
7	$675	450311334	KLESER	CHRIS	401 N 9TH ST		BISMARCK	ND	58501	1720228448	43	Certified Registered Nurse Anesthetist	236001	MID DAKOTA CLINIC	1275587826		
15	$674	450226558	ULEBERG	TAMMY	407 3RD STREET SE		MINOT	ND	58701	1710051628	50	Nurse Practitioner	635005	TRINITY MEDICAL GROUP	1871532598		
4	$673	450310462	PYLMAN	MICHAEL	4440 S WASHINGTON ST		GRAND FORKS	ND	58201	1407803893	5	Anesthesiology (MD)	9033	ALTRU PROFESSIONAL CENTE	1043309552		
9	$673	450310462	JOHNSON	ADAM	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1467683987	30	Radiology	9001	ALTRU HEALTH SYSTEM	1043309552		
67	$672	450260821	WHITE DRUG #45		310 1ST AVE S		JAMESTOWN	ND	58401	1588754428	54	Home Medical Equipment	4667001	WHITE DRUG #45	1588754428		
7	$672	450253272	GRUNEFELDER	JACQUELINE	511 ELM AVE		LINTON	ND	58552	1790701241	50	Nurse Practitioner	430005	LINTON MEDICAL CENTER AC	1508047788		
5	$672	450417963	ROWAN	LESLIE	2100 S COLUMBIA RD	STE 202	GRAND FORKS	ND	58201	1033210570	62	Psychology	474001	FAMILY INSTITUTE PC	1003832783		
55	$671	501667544	PETERSON	RODNEY	2800 S UNIVERSITY DR		FARGO	ND	58103	1225112311	35	Chiropractor	1188001	PETERSON, RODNEY, DC	1225112311		
6	$671	450310159	MYERS	JANE	164 WEST 13TH STREET		GRAFTON	ND	58237	1427103183	68	Licensed Registered Dietitian	282001	GRAFTON FAMILY CLINIC	1558423665		
12	$670	820558836	CROWLEY	LANA	905 MAIN ST		LISBON	ND	58054	1386661387	8	Family Practice	5840005	LISBON AREA HEALTH SERVI	1811168958		
12	$670	450437649	SCHAGUNN LERE	CARA	520 3RD ST NW		JAMESTOWN	ND	58401	1871603167	88	#N/A	123001	SOUTH CENTRAL HUMAN SERV	1225075906		
14	$669	450226553	KAUFFMAN	RUSSELL	570 CHAUTAUQUA BLVD		VALLEY CITY	ND	58072	1669629549	97	Physician Assistant	75001	MERCY HOSPITAL	1972698975		
132	$669	450410216	GATEWAY PHARMACY S		835 S WASHINGTON ST		BISMARCK	ND	58504	1205927571	63	Pharmacy	4581001	GATEWAY PHARMACY SOUTH	1205927571		
6	$669	461599024	COX	DARRIN	1820 WALNUT ST E STE 7		DEVILS LAKE	ND	58301	1780732297	80	Clinical Social Worker	8039001	LIFEWISE CHRISTIAN COUNS	1619312568		
3	$668	450226909	BIALAS	JEDD	1720 UNIVERSITY DR S		FARGO	ND	58103	1003157488	43	Certified Registered Nurse Anesthetist	7742004	SANFORD SOUTH UNIVERSITY	1184917924		
133	$668	30477097	BERGAN	APRIL	3124 COLORADO LANE		BISMARCK	ND	58503	1841446606	65	Physical Therapy	5470004	DAKOTA PHYSICAL THERAPY,	1225261274		
24	$668	450358986	KETTERLING	MARCIA	321 MAIN ST		GACKLE	ND	58442	1396895942	50	Nurse Practitioner	610001	WISHEK RURAL HEALTH CLIN	1154522241		
7	$667	410843966	MAY	COLEEN	1010 32ND AVE S		MOORHEAD	MN	56560	1346280435	80	Clinical Social Worker	288001	LAKELAND MENTAL HEALTH C	1366480287		
7	$666	450428361	GOEBEL	BRYCE	407 EAST AVE C		BISMARCK	ND	58501	1497968226	42	Dentist	7237001	GOEBEL MICHAEL, DDS	1821152869		
17	$663	410724029	BUSETH	OLIVER	1424 CENTRAL AVE NE		E GRAND FORKS	MN	56721	1326352816	83	Licenses Addiction Counselor-Chemical Dependency	5548011	RIVERVIEW HEALTH DBA GLE	1407905136		
45	$663	911770748	KUBALAK	GARY	801 BROADWAY NORTH		FARGO	ND	58102	1649297318	2	General Surgery	3001	SANFORD BROADWAY CLINIC	1942241351		
16	$660	202469496	WIEGLENDA	MARSHA	7 1ST AVE W STE 101		DICKINSON	ND	58601	1992825095	83	Licenses Addiction Counselor-Chemical Dependency	452001	HEART RIVER ALCOHOL DRUG	1205932233		
6	$659	450430824	LANGE	MARSHA	2315 LIBRARY CIRCLE		GRAND FORKS	ND	58201	1699793265	8	Family Practice	1300001	NORTHLAND CHRISTIAN COUN	1215131016		
2	$658	450311334	OSHEA	CAROL	401 N 9TH ST		BISMARCK	ND	58501	1285788927	43	Certified Registered Nurse Anesthetist	236001	MID DAKOTA CLINIC	1275587826		
58	$657	450337952	YE OLDE MEDICINE S	E	503 PARK ST W		PARK RIVER	ND	58270	1720020324	54	Home Medical Equipment	3149001	YE OLDE MEDICINE SHOPPE	1720020324		
5	$657	911770748	HUND	MORRIS	1720 UNIVERSITY DR S		FARGO	ND	58103	1790703437	26	Psychiatry (MD)	3904	SANFORD SOUTH UNIVERSITY	1942241351		
13	$656	261175213	BELIZARIO	FRANCISCO	275 11TH ST S		WAHPETON	ND	58075	1942398375	4	Otology, Laryngology, Rhinology	6885019	INNOVIS HEALTH, LLC DBA	1790965440		
11	$655	450430628	LENZMEIER	RICHARD	301 NP AVE		FARGO	ND	58102	1225056898	8	Family Practice	576001	FAMILY HEALTHCARE CENTER	1710066352		
10	$655	261175213	MIDDLESTEAD	ANDREA	3000 32ND AVE S		FARGO	ND	58103	1548600661	50	Nurse Practitioner	6885030	INNOVIS HEALTH, LLC DBA	1578907655		
6	$655	450226700	GIBSON	DAVID	300 N 7TH ST		BISMARCK	ND	58501	1942398383	26	Psychiatry (MD)	440001	SANFORD MEDICAL CENTER/B	1811941172		
5	$655	450310462	THOMAS	MARY	860 S COLUMBIA RD		GRAND FORKS	ND	58201	1134553803	80	Clinical Social Worker	9024	ALTRU PSYCHIATRIC CENTER	1043309552		
9	$653	911770748	KAISER	KAREN	141 MAIN ST		ELLENDALE	ND	58436	1205825593	50	Nurse Practitioner	3071	SANFORD HEALTH ELLENDALE	1942241351		
34	$652	201398783	KELLY	KRISTA	141 N MAIN ST		GARRISON	ND	58540	1750351144	35	Chiropractor	6362002	KELLY CHIROPRACTIC, PC	1811080682		
6	$651	450226909	BAUMEISTER	ANN	801 BROADWAY NORTH		FARGO	ND	58102	1851318844	43	Certified Registered Nurse Anesthetist	7742001	SANFORD BROADWAY CLINIC	1184917924		
4	$651	450226909	SCHNEIDER	MONICA	2400 32ND AVE S		FARGO	ND	58103	1609116037	80	Clinical Social Worker	7742008	SANFORD SOUTHPOINTE CLIN	1184917924		
2	$650	450310462	SPERLE	JAMES	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1972699239	43	Certified Registered Nurse Anesthetist	9001	ALTRU HEALTH SYSTEM	1043309552		
82	$650	450311334	MID DAKOTA CLINIC		401 N 9TH ST		BISMARCK	ND	58501	1275587826	30	Radiology	236001	MID DAKOTA CLINIC	1275587826		

8	$648	911770748	TIONGSON	CHRISTOPHE	2701 13TH AVE S		FARGO	ND	58103	1821010406	37	Pediatrics	3015	SANFORD CHILDRENS SOUTHW	1942241351		
9	$647	450226909	STARLEY	BRAD	801 BROADWAY NORTH		FARGO	ND	58102	1669443909	10	Gastronenterology	7742001	SANFORD BROADWAY CLINIC	1184917924		
12	$646	450310462	WINCHESTER	MARSHALL	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1184710444	75	Oncology	9001	ALTRU HEALTH SYSTEM	1043309552		
9	$646	300415229	MCGRATH	CLAUDIA	417 38TH ST SW STE B		FARGO	ND	58103	1467677690	88	#N/A	6928001	CLAUDIA MCGRATH COUNSELI	1467677690		
39	$644	911770748	BAKKEN	ANDREW	801 BROADWAY NORTH		FARGO	ND	58102	1376648113	23	Peripheral Vascular Diseases or Surgery	3001	SANFORD BROADWAY CLINIC	1942241351		
5	$643	450226909	FINES	MICHELLE	801 BROADWAY NORTH		FARGO	ND	58102	1619003381	43	Certified Registered Nurse Anesthetist	7742001	SANFORD BROADWAY CLINIC	1184917924		
6	$643	450410216	GATEWAY PHARMACY N		3101 N 11TH ST STE 2		BISMARCK	ND	58503	1447356399	63	Pharmacy	4298001	GATEWAY PHARMACY	1447356399		
27	$641	460384530	BLACK	CARL	107 2ND AVE NE		LAMOURE	ND	58458	1730185794	35	Chiropractor	7324001	BLACK CHIROPRACTIC	1730185794		
5	$641	450226909	GOLDENBERG	JACOB	801 BROADWAY NORTH		FARGO	ND	58102	1215954177	30	Radiology	7742001	SANFORD BROADWAY CLINIC	1184917924		
3	$641	450226558	CHARITY	LYNETTE	1 BURDICK EXPY W		MINOT	ND	58701	1972555175	5	Anesthesiology (MD)	635032	TRINITY MEDICAL GROUP	1083653752		
12	$640	820558836	MICHAUD	BRIAN	905 MAIN ST		LISBON	ND	58054	1346554813	8	Family Practice	5840005	LISBON AREA HEALTH SERVI	1811168958		
7	$638	450310462	JOHNSON	JOEL	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1295826097	72	Emergency Medicine	9001	ALTRU HEALTH SYSTEM	1043309552		
5	$637	450226700	TIMM	LYLA	222 N 7TH ST		BISMARCK	ND	58501	1992893168	71	Certified Diabetic Educator	4001	SANFORD CLINIC	1811941172		
5	$637	450226909	HERRICK	KELSEY	2400 32ND AVE S		FARGO	ND	58103	1215211750	68	Licensed Registered Dietitian	7742008	SANFORD SOUTHPOINTE CLIN	1184917924		
5	$637	450226909	MCNEALLY	SHAWN	801 BROADWAY NORTH		FARGO	ND	58102	1689691222	43	Certified Registered Nurse Anesthetist	7742001	SANFORD BROADWAY CLINIC	1184917924		
49	$636	450416059	THE MEDICINE SHOPP		2806 N BROADWAY		FARGO	ND	58102	1447362454	63	Pharmacy	4402001	THE MEDICINE SHOPPE	1447362454		
5	$635	450417963	WETTERSTEN	KARA	2100 S COLUMBIA RD	STE 202	GRAND FORKS	ND	58201	1023035102	62	Psychology	474001	FAMILY INSTITUTE PC	1003832783		
11	$635	450226558	KORDLAR	BAHRAM	1 BURDICK EXPY W		MINOT	ND	58701	1821054347	13	Neurology	635032	TRINITY MEDICAL GROUP	1083653752		
21	$635	911770748	MICKELSON	JOHN	3838 12TH AVE N		FARGO	ND	58102	1497773097	8	Family Practice	587001	SANFORD HEALTH OCCUPATIO	1952323974		
2	$635	450226909	FLOM	ADRIANNE	1720 UNIVERSITY DR S		FARGO	ND	58103	1225055189	43	Certified Registered Nurse Anesthetist	7742004	SANFORD SOUTH UNIVERSITY	1184917924		
6	$634	450226909	ULVEN	JON	100 4TH ST S		FARGO	ND	58103	1114948452	62	Psychology	7742006	SANFORD PROFESSIONAL BUI	1184917924		
21	$633	450456236	NORDBY	DOUGLAS	109 5TH ST SW		WATFORD CITY	ND	58854	1972785335	41	Optometrist	1628001	NORDBY VISION CENTER, LT	1205812393		
26	$633	450260821	HOCHHALTER	PAUL	310 1ST AVE S		JAMESTOWN	ND	58401	1245586080	63	Pharmacy	4667001	WHITE DRUG #45	1588754428		
5	$632	450226558	MAUND	MICHELLE	1 BURDICK EXPRESSWAY W		MINOT	ND	58701	1659350437	43	Certified Registered Nurse Anesthetist	635031	TRINITY MEDICAL GROUP AN	1083653752		
65	$632	264686343	GABRIEL	NICOLE	101 W MAIN ST		BEULAH	ND	58523	1023250610	35	Chiropractor	7353001	HEART IN HAND CHIROPRACT	1023250610		
23	$632	452407520	LOOYSEN	STEVE	1230 W MAIN		VALLEY CITY	ND	58072	1285725820	41	Optometrist	7738002	LOOYSEN I CARE	1639462351		
18	$631	261175213	WOJCIK	SUSAN	3000 32ND AVE S		FARGO	ND	58103	1144241480	50	Nurse Practitioner	6885030	INNOVIS HEALTH, LLC DBA	1578907655		
6	$630	450310462	MARTIN	JEFFREY	1300 S COLUMBIA RD		GRAND FORKS	ND	58201	1053425173	20	Orthopedic Surgery	232001	ALTRU REHABILITATION CEN	1437248945		
49	$630	911770748	ALBRECHT	WARREN	621 DEMERS AVE		E GRAND FORKS	MN	56721	1134146129	2	General Surgery	3080	SANFORD HEALTH 621 DEMER	1942241351		
21	$630	450457450	BOWMAN DRUG CO		12 N MAIN		BOWMAN	ND	58623	1023193554	63	Pharmacy	3358001	THE BOWMAN DRUG CO	1023193554		
4	$628	450226700	FRIED	DENISE	300 N 7TH ST		BISMARCK	ND	58501	1740254739	97	Physician Assistant	440001	SANFORD MEDICAL CENTER/B	1811941172		
12	$627	450310462	KHROMACHOU	TAMIM	1200 S COLUMBIA RD		GRAND FORKS	ND	58201	1023300688	2	General Surgery	62001	ALTRU HOSPITAL	1154346161		
4	$624	450310462	SLOMINSKI	VERA	1200 S COLUMBIA RD		GRAND FORKS	ND	58201	1952498057	43	Certified Registered Nurse Anesthetist	62001	ALTRU HOSPITAL	1154346161		
42	$623	911770748	CARD	CHARLENE	2601 N BROADWAY		FARGO	ND	58102	1487671483	8	Family Practice	3028	SANFORD NORTH FARGO CLIN	1942241351		
7	$623	450310462	WRIGHT	SHELLIE	1001 7TH ST		DEVILS LAKE	ND	58301	1801982160	97	Physician Assistant	9027	ALTRU CLINIC LAKE REGION	1861581373		
25	$623	450260821	HELLAND	ASHLEY	387 11TH ST S OFC 2		WAHPETON	ND	58075	1275799751	63	Pharmacy	4672003	Thrifty White Pharmacy #	1477997005		
20	$623	261175213	NORBY	BRENDA	1702 UNIVERSITY DR S		FARGO	ND	58103	1265405252	97	Physician Assistant	6885031	INNOVIS HEALTH, LLC DBA	1255677084		
73	$623	450226700	FISHER	CATHERINE	2615 FAIRWAY ST		DICKINSON	ND	58601	1740326479	22	Pathology, Anatomy, Clinical Pathology	4008	SANFORD HEALTH DICKINSON	1811941172		
6	$622	450437652	FELDMAN	ELLEN	151 S 4TH ST STE 401		GRAND FORKS	ND	58201	1831280841	26	Psychiatry (MD)	242001	NORTHEAST HUMAN SERVICE	1366496341		
45	$621	456002439	NDSU STUDENT HEALT		1707 CENTENNIAL BLVD		FARGO	ND	58102	1427152115	70	Clinic	3702001	NDSU STUDENT HEALTH SERV	1427152115		
17	$621	650666550	BUEGEL	HUYEN	1315 S UNIVERSITY DRIVE		FARGO	ND	58103	1982983789	50	Nurse Practitioner	7851001	HCR MANORCARE MEDICAL SE	1386750420		
8	$621	450226429	VEARRIER	TRACY	30 7TH ST W		DICKINSON	ND	58601	1043255755	97	Physician Assistant	95001	ST JOSEPHS HOSPITAL AND	1992947956		
43	$620	450226700	FOGARTY	EDWARD	3318 N 14TH STREET		BISMARCK	ND	58503	1902826340	30	Radiology	4064	SANFORD NORTH WALK-IN CL	1811941172		
11	$618	450226909	HERBST	HAROLD	1412 MAIN ST		HAWLEY	MN	56549	1679599864	97	Physician Assistant	7742015	SANFORD HAWLEY CLINIC	1184917924		
14	$618	450311334	SCHINDLER	KAREN	401 N 9TH ST		BISMARCK	ND	58501	1245275957	68	Licensed Registered Dietitian	236001	MID DAKOTA CLINIC	1275587826		
4	$616	461566024	ANDREWS	KIRSTEN	503 3RD ST NE		DEVILS LAKE	ND	58301	1225230881	42	Dentist	6972001	JOHNSON FAMILY DENTISTRY	1780851014		
23	$614	261175213	CABO CHAN	ALBERTO	275 11TH ST S		WAHPETON	ND	58075	1750314449	11	Internal Medicine	6885019	INNOVIS HEALTH, LLC DBA	1790965440		
55	$614	450397461	AASEN DRUG INC		15 E MAIN		MAYVILLE	ND	58257	1609908631	63	Pharmacy	2920001	AASEN DRUG INC	1609908631		
32	$612	311824372	WALSH	HEATHER	3035 DEMERS AVE		GRAND FORKS	ND	58201	1437158268	65	Physical Therapy	6037001	ACHIEVE THERAPY, LLC	1346370640		
23	$611	911770748	WAAGEN	GAIL	801 BROADWAY NORTH		FARGO	ND	58102	1578584819	78	Clinical Nurse Specialist	3001	SANFORD BROADWAY CLINIC	1942241351		
12	$610	450226558	PEASE	CARLA	400 BURDICK EXPY E		MINOT	ND	58701	1356777395	50	Nurse Practitioner	635006	TRINITY MEDICAL GROUP	1083653752		
40	$609	911770748	GULLICKSON	NICOLE	2400 32ND AVE S		FARGO	ND	58103	1174783211	8	Family Practice	3014	SANFORD SOUTHPOINTE CLIN	1942241351		
16	$609	450226909	KAUFFMAN	RUSSELL	1720 UNIVERSITY DR S		FARGO	ND	58103	1669629549	97	Physician Assistant	7742004	SANFORD SOUTH UNIVERSITY	1184917924		
4	$608	270276823	SPRIGGS	KENT	2910 UNIVERSITY DR S		FARGO	ND	58103	1972711331	91	Endodontist	7385001	SPRIGGS KENT, DDS	1972711331		
1	$608	203975360	BAKKUM	NICHOLAS	1213 PRAIRIE PARKWAY		WEST FARGO	ND	58078	1669631859	42	Dentist	7319001	ELMWOOD FAMILY DENTISTRY	1891810537		
83	$608	650670195	UNITED STATES MEDI	SUPPLY INC	8260 NW 27TH ST STE 401		MIAMI	FL	33122	1700889227	54	Home Medical Equipment	7383001	UNITED STATES MEDICAL SU	1700889227		
61	$607	450260821	WHITE DRUG #55		112 S MAIN ST		HETTINGER	ND	58639	1396835237	63	Pharmacy	1934002	WHITE DRUG #55	1396835237		
39	$606	450415104	JORDE	DENNIS	2921 HOMESTEAD DR		BISMARCK	ND	58503	1780718841	35	Chiropractor	193001	JORDE CHIROPRACTIC CLINI	1780718841		
22	$605	450231183	FARAH	NAZIH	1301 15TH AVE W		WILLISTON	ND	58801	1508816315	30	Radiology	711004	MERCY RADIOLOGY SERVICES	1629234257		
18	$605	911841831	KELLER	JESSICA	2273 3RD AVE W		DICKINSON	ND	58601	1972812063	41	Optometrist	1086001	OLTMANNS, MELANIE, OD,PC	1508865700		
21	$604	450424398	BORSTAD	JOSH	1400 SKYLINE BLVD		BISMARCK	ND	58503	1245414457	41	Optometrist	1646002	BIS-MAN EYECARE ASSOCIAT	1063602050		
6	$604	456013474	BLOCK	NATHAN	301 MOUNTAIN ST E		CAVALIER	ND	58220	1871571125	30	Radiology	5633001	PEMBINA COUNTY HOSPITAL	1417093949		
44	$604	450260821	WHITE DRUG #17		1015 S BROADWAY		MINOT	ND	58701	1306935911	54	Home Medical Equipment	4654001	WHITE DRUG #17	1306935911		
5	$603	450226909	KLOCKE	JANET	1220 SHEYENNE ST		WEST FARGO	ND	58078	1679710347	71	Certified Diabetic Educator	7742013	SANFORD WEST FARGO CLINI	1184917924		
8	$603	264314533	RAMOS	RUFINO	510 4TH ST S		FARGO	ND	58103	1689753550	26	Psychiatry (MD)	7444001	PSJ ACQUISITION LLC	1679709802		
5	$603	261175213	SCHMIDT	NICOLE	1401 13TH AVE E		WEST FARGO	ND	58078	1558301762	65	Physical Therapy	6885033	INNOVIS HEALTH, LLC DBA	1487990339		

28	$603	450310159	BARKMEIER	JEFFREY	164 WEST 13TH STREET		GRAFTON	ND	58237	1871571083	30	Radiology	282001	GRAFTON FAMILY CLINIC	1558423665		
8	$602	450226429	SWENSON	KJIRSTEN	30 7TH ST W		DICKINSON	ND	58601	1346482569	72	Emergency Medicine	95001	ST JOSEPHS HOSPITAL AND	1992947956		
13	$602	450226909	MAHALE	ADIT	2801 UNIVERSITY DRIVE S		FARGO	ND	58103	1144247750	39	Nephrology	7742025	SANFORD DIALYSIS FARGO	1821154253		
9	$602	450310462	SCHANZENBACH	STEWART	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1427144781	72	Emergency Medicine	9001	ALTRU HEALTH SYSTEM	1043309552		
7	$602	450310159	WITTENBERG	KEITH	164 WEST 13TH STREET		GRAFTON	ND	58237	1154300929	30	Radiology	282001	GRAFTON FAMILY CLINIC	1558423665		
18	$600	450413089	SANDNESS	AMBER	3119 N 14TH ST		BISMARCK	ND	58503	1336446988	50	Nurse Practitioner	278002	DAKOTA EYE INSTITUTE	1962449835		
2	$599	820558836	GENEREUX	HEIDI	905 MAIN ST		LISBON	ND	58054	1124135629	43	Certified Registered Nurse Anesthetist	5840005	LISBON AREA HEALTH SERVI	1811168958		
2	$599	450311334	GABEL	KELLI	401 N 9TH ST		BISMARCK	ND	58501	1205133873	43	Certified Registered Nurse Anesthetist	236001	MID DAKOTA CLINIC	1275587826		
19	$599	450422944	GRAY	JONATHAN	2845 36TH AVE S		GRAND FORKS	ND	58201	1508048521	19	Oral Surgery	455003	FACE & JAW SURGERY CENTE	1457420564		
2	$595	261175213	LANTZ	LEO	3000 32ND AVE S		FARGO	ND	58103	1720022296	43	Certified Registered Nurse Anesthetist	6885030	INNOVIS HEALTH, LLC DBA	1578907655		
33	$594	450433194	GIETZEN	LORI	602 ASH AVE E		GLEN ULLIN	ND	58631	1245242072	35	Chiropractor	572007	GLEN ULLIN CHIROPRACTIC	1205848108		
5	$594	450226909	REINHOLZ	TERESA	1720 UNIVERSITY DR S		FARGO	ND	58103	1043231269	97	Physician Assistant	7742004	SANFORD SOUTH UNIVERSITY	1184917924		
10	$594	410724029	REESE	PAUL	306 NORTH MILL STREET		FERTILE	MN	56540	1144269374	97	Physician Assistant	5548013	RIVERVIEW FAMILY PRACTIC	1750671186		
4	$594	450226909	DOROSTKAR	PARVIN	801 BROADWAY NORTH		FARGO	ND	58102	1962412056	37	Pediatrics	7742001	SANFORD BROADWAY CLINIC	1184917924		
6	$593	450226909	BEARD	DEBRA	801 BROADWAY NORTH		FARGO	ND	58102	1932120151	11	Internal Medicine	7742001	SANFORD BROADWAY CLINIC	1184917924		
2	$592	450437654	KUNA	DAVID	200 HIGHWAY 2 SW		DEVILS LAKE	ND	58301	1730120882	62	Psychology	159001	LAKE REGION HUMAN SERVIC	1669411930		
6	$591	450226700	LITCHFIELD	DOUGLAS	300 N 7TH ST		BISMARCK	ND	58501	1316994130	18	Opthalmology	440001	SANFORD MEDICAL CENTER/B	1811941172		
18	$589	450226429	SHEPS	DANIEL	30 7TH ST W		DICKINSON	ND	58601	1245580331	11	Internal Medicine	95001	ST JOSEPHS HOSPITAL AND	1992947956		
7	$589	411384358	DANIELSON	BRET	109 S MINNESOTA ST		WARREN	MN	56762	1366461873	97	Physician Assistant	2067001	NORTH VALLEY HEALTH CENT	1073516357		
36	$585	261852734	JAEGER	JOSHUA	4955 17TH AVE S STE 108		FARGO	ND	58103	1669702536	35	Chiropractor	7169001	CORE HEALTH CHIRO, PA	1144487893		
1	$585	450423697	SWANSON	STEVEN	1323 2ND AVE N		GRAND FORKS	ND	58203	1932273091	42	Dentist	7296001	SWANSON, STEVEN, DDS	1932273091		
33	$585	911770748	HALL	KATHERINE	1412 MAIN ST		HAWLEY	MN	56549	1740208396	11	Internal Medicine	513001	SANFORD HAWLEY CLINIC	1942241351		
5	$584	410851371	KRONLUND	SHANNON	603 BRUCE ST		CROOKSTON	MN	56716	1598734147	80	Clinical Social Worker	1269001	NORTHWESTERN MENTAL HEAL	1508835133		
4	$583	262417959	BENSON	STACEY	1308 23RD ST S STE G		FARGO	ND	58103	1164457040	62	Psychology	7036001	BENSON PSYCHOLOGICAL SER	1477709574		
5	$583	208928600	BORCHARDT	BRIAN	3060 FRONTIER WAY S		FARGO	ND	58104	1053468223	65	Physical Therapy	6961001	PEDIATRIC THERAPY PARTNE	1457479958		
14	$582	450437653	ANDERSEN	JASON	1015 S BROADWAY STE 18		MINOT	ND	58701	1841229648	83	Licenses Addiction Counselor-Chemical Dependency	238001	NORTH CENTRAL HUMAN SERV	1477592533		
2	$580	450226553	HUNTINGTON	TRACY	570 CHAUTAUQUA BLVD		VALLEY CITY	ND	58072	1225297724	43	Certified Registered Nurse Anesthetist	75001	MERCY HOSPITAL	1972698975		
3	$579	450226700	ANEES	MUKHTAR	300 N 7TH ST		BISMARCK	ND	58501	1073714200	10	Gastronenterology	440001	SANFORD MEDICAL CENTER/B	1811941172		
32	$579	383666991	WESTERN	HEIDI	1150 PRAIRIE PKWY	STE 102	WEST FARGO	ND	58078	1124365911	35	Chiropractor	5832001	AKER CHIROPRACTIC LTD	1437348786		
5	$578	261175213	QUINONES	EDUARDO	3000 32ND AVE S		FARGO	ND	58103	1376797084	30	Radiology	6885030	INNOVIS HEALTH, LLC DBA	1578907655		
70	$576	274078330	FELCHLE	AMY	2972 25 ST NE		HARVEY	ND	58341	1720382153	35	Chiropractor	7682001	NORTHERN FAMILY WELLNESS	1720382153		
34	$576	450433194	TENBROEK	SHERI	105 MAIN ST N		FLASHER	ND	58535	1639181464	35	Chiropractor	572010	SOUTHRIDGE CHIROPRACTIC	1205848108		
8	$576	450310462	GHIMIRE	ROSHAN	725 HAMLINE ST		GRAND FORKS	ND	58203	1184936072	8	Family Practice	9009	ALTRU FAMILY MEDICINE RE	1043309552		
22	$576	450424398	NEUMILLER	JOEL	1400 SKYLINE BLVD		BISMARCK	ND	58503	1568446359	41	Optometrist	1646002	BIS-MAN EYECARE ASSOCIAT	1063602050		
36	$576	911770748	DAHL	LINDSEY	2400 32ND AVE S		FARGO	ND	58103	1962529446	11	Internal Medicine	3014	SANFORD SOUTHPOINTE CLIN	1942241351		
76	$574	760746279	GLESSING-LASKOWSKI	KATIE	2700 8TH ST NW		MINOT	ND	58703	1225073893	65	Physical Therapy	5439001	FIRST CHOICE PHYSICAL TH	1013098797		
10	$573	450358986	PATEL	SURESH	1015 4TH AVE S		WISHEK	ND	58495	1235151705	8	Family Practice	441001	WISHEK RURAL HEALTH CLIN	1376584623		
8	$573	261175213	STOWERS	JOHN	3000 32ND AVE S		FARGO	ND	58103	1578500112	72	Emergency Medicine	6885030	INNOVIS HEALTH, LLC DBA	1578907655		
13	$572	411949975	MOEN	KRISTIN	891 BELSLY BLVD		MOORHEAD	MN	56560	1962739904	80	Clinical Social Worker	1697002	SOLUTIONS BEHAVIORAL HEA	1801909239		
7	$572	450227311	HOFF	MARY	118 1ST ST S		NEW ROCKFORD	ND	58356	1700863362	97	Physician Assistant	507002	COMMUNITY HEALTH CLINIC	1801811666		
8	$571	450226558	EVANS	BOOKER	407 3RD STREET SE		MINOT	ND	58701	1093756736	26	Psychiatry (MD)	635005	TRINITY MEDICAL GROUP	1871532598		
19	$571	30477097	BERGAN	CHAD	1000 W CENTURY AVE		BISMARCK	ND	58503	1083675987	65	Physical Therapy	5470002	DAKOTA PHYSICAL THERAPY	1588797922		
2	$571	450311334	FILLER	LAURA	401 N 9TH ST		BISMARCK	ND	58501	1679514194	43	Certified Registered Nurse Anesthetist	236001	MID DAKOTA CLINIC	1275587826		
7	$571	450310462	WITTENBERG	KEITH	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1154300929	30	Radiology	9001	ALTRU HEALTH SYSTEM	1043309552		
10	$570	469601789	KAZMIERCZAK	AUDREY	418 E ROSSER STE 304		BISMARCK	ND	58501	1609026277	88	#N/A	5638001	AUDREY KAZMIERCZAK COUNS	1609026277		
19	$568	456013474	WEINMANN	ROBERT	301 MOUNTAIN ST E		CAVALIER	ND	58220	1780663450	30	Radiology	5633001	PEMBINA COUNTY HOSPITAL	1417093949		
9	$567	450226558	MUGGE	JESSICA	1321 W DAKOTA PARKWAY		WILLISTON	ND	58801	1891011342	62	Psychology	635039	TRINITY COMMUNITY CLINIC	1083653752		
37	$566	450423036	MARKET PHARMACY		1930 S BROADWAY		MINOT	ND	58701	1235264862	63	Pharmacy	4457001	MARKET PHARMACY	1235264862		
5	$566	450358986	THIRUMALA REDDY	JOSEPH	4 FIRST AVE SE		KULM	ND	58456	1356611941	11	Internal Medicine	571001	WISHEK RURAL HEALTH CLIN	1932300951		
7	$565	410724029	ERIKSSON	PETER	323 S MINNESOTA ST		CROOKSTON	MN	56716	1053338913	8	Family Practice	5548001	RIVERVIEW HEALTHCARE ASS	1477525566		
9	$563	450351564	CENTURY EYEWEAR		207 SOUTH MAIN		MINOT	ND	58701	1881725737	58	Other Individual Supplier - Optometric Supplier	3190001	CENTURY EYEWEAR	1881725737		
2	$562	205269581	COMMUNITY VOLUNTEE	S OF LAMOU	31 CENTER AVE E		LAMOURE	ND	58458	1629159074	59	Ambulance Service	6894001	COMMUNITY VOLUNTEER EMS	1629159074		
2	$562	450226909	HOLZER	TONYA	801 BROADWAY NORTH		FARGO	ND	58102	1710211800	43	Certified Registered Nurse Anesthetist	7742001	SANFORD BROADWAY CLINIC	1184917924		
1	$562	450226909	KREKLAU	JOSEPH	801 BROADWAY NORTH		FARGO	ND	58102	1760566467	43	Certified Registered Nurse Anesthetist	7742001	SANFORD BROADWAY CLINIC	1184917924		
24	$560	450226711	WELDER	SHEILA	900 E BROADWAY AVE		BISMARCK	ND	58501	1629174750	50	Nurse Practitioner	501001	ST ALEXIUS MEDICAL CENTE	1205868429		
6	$559	501864512	BARFIELD	CELESTE	1705 4TH AVE NW		MINOT	ND	58703	1659683977	80	Clinical Social Worker	7613001				
13	$558	410724034	LOHSTRETER	THOMAS	1010 S BIRCH		HALLOCK	MN	56728	1568664514	8	Family Practice	2059001	KITTSON MEMORIAL CLINIC	1740359348		
51	$558	911770748	LEE	ERIN	1111 HARWOOD DR		FARGO	ND	58104	1932364650	50	Nurse Practitioner	3048	SANFORD REPRODUCTIVE MED	1942241351		
9	$558	450368774	SHAHIN	SALEM	1219 KNOLL ST		WILLISTON	ND	58801	1578529392	34	Urology	264001	SHAHIN, SALEM, MD	1205104080		
5	$557	450226700	GLASS	FAE	300 N 7TH ST		BISMARCK	ND	58501	1841498052	50	Nurse Practitioner	440001	SANFORD MEDICAL CENTER/B	1811941172		
25	$555	450310462	AJAYI	OLUMIDE	400 S MINNESOTA ST		CROOKSTON	MN	56716	1821228255	8	Family Practice	406001	ALTRU CROOKSTON	1760494330		
12	$555	450358986	KETTERLING	MARCIA	420 MAIN AVE		NAPOLEON	ND	58561	1396895942	50	Nurse Practitioner	173001	WISHEK RURAL HEALTH CLIN	1679774616		
7	$554	264314533	MACH	DAVID	510 4TH ST S		FARGO	ND	58103	1497945158	26	Psychiatry (MD)	7444001	PSJ ACQUISITION LLC	1679709802		
33	$553	450458138	BRAKKE	ROSE	1800 21 AVE S		FARGO	ND	58103	1023297348	64	Audiology	2004001	CATALYST MEDICAL CENTER,	1043378268		
36	$553	731684053	LONG	CHARLES	11 NORTH MAIN		GWINNER	ND	58040	1285678441	65	Physical Therapy	6658002	MOBILITY PLUS REHABILITA	1881631299		
12	$553	450369650	PRUITT	DAWN	446 18TH ST W STE 2		DICKINSON	ND	58601	1043351042	63	Pharmacy	3205001	ND PHARMACY INC	1386680767		

5	$552	450437655	SEMCHENKO	ALANA	316 2ND AVE W		WILLISTON	ND	58801	1316272503	62	Psychology	156001	NORTHWEST HUMAN SERVICE	1770524613		
8	$551	261175213	DANILENKO	DIANA	3000 32ND AVE S		FARGO	ND	58103	1043270994	16	Obstet/Gynecology	6885030	INNOVIS HEALTH, LLC DBA	1578907655		
29	$550	911770748	WILLIAMS	BRENT	621 DEMERS AVE		E GRAND FORKS	MN	56721	1710125893	34	Urology	3080	SANFORD HEALTH 621 DEMER	1942241351		
6	$549	450437652	HEMMING	BETH	151 S 4TH ST STE 401		GRAND FORKS	ND	58201	1326087107	80	Clinical Social Worker	242001	NORTHEAST HUMAN SERVICE	1366496341		
13	$549	203541481	DEETER	LUCAS	745 W INTERSTATE AVE		BISMARCK	ND	58503	1306969910	42	Dentist	5947001	DEETER AND DEETER DENTIS	1295904670		
6	$549	911770748	HUTCHISON	WILLIAM	2701 13TH AVE S		FARGO	ND	58103	1427092238	37	Pediatrics	3015	SANFORD CHILDRENS SOUTHW	1942241351		
7	$549	450413089	OTTESON	KYLE	100 BROADWAY N		LINTON	ND	58552	1679907307	41	Optometrist	278004	DAKOTA EYE INSTITUTE	1962449835		
6	$548	450358986	KOSIAK	DONALD	420 MAIN AVE		NAPOLEON	ND	58561	1629162706	8	Family Practice	173001	WISHEK RURAL HEALTH CLIN	1679774616		
4	$548	260480153	MATTSON	STEVEN	6301 19TH AVE NW		MINOT	ND	58703	1841388444	37	Pediatrics	6986001	DAKOTA FAMILY SERVICES	1114119989		
16	$547	261175213	PURNAMA	PAULINA	3000 32ND AVE S		FARGO	ND	58103	1275724981	97	Physician Assistant	6885030	INNOVIS HEALTH, LLC DBA	1578907655		
4	$547	450226423	JANDRO	JOANNE	20 1ST ST SW STE 250		MINOT	ND	58701	1699050377	88	#N/A	1257001	THE VILLAGE FAMILY SERVI	1568492353		
41	$546	450226700	FRANK	WALTER	300 N 7TH ST		BISMARCK	ND	58501	1639192339	6	Cardivascular Disease	440001	SANFORD MEDICAL CENTER/B	1811941172		
10	$546	456004474	GRONDAHL	HEIDI	110 W BROADWAY STE 101		WILLISTON	ND	58801	1619281987	50	Nurse Practitioner	1930001	UPPER MISSOURI DISTRICT	1689677585		
25	$544	450441595	JORDE	ERICA	909 11TH ST E		BOTTINEAU	ND	58318	1114220175	35	Chiropractor	1377001	CHIROPRACTIC ARTS	1053595223		
10	$544	261175213	REFSLAND	BRADLEY	1401 13TH AVE E		WEST FARGO	ND	58078	1174579650	8	Family Practice	6885033	INNOVIS HEALTH, LLC DBA	1487990339		
45	$544	911770748	KAISER	KAREN	420 S 7TH ST		OAKES	ND	58474	1205825593	50	Nurse Practitioner	3068	SANFORD HEALTH OAKES CLI	1942241351		
7	$544	450231183	CAPLAN	GARY	1213 15TH AVE W		WILLISTON	ND	58801	1164470043	1	General Practice	711001	CRAVEN-HAGAN/MERCY MEDIC	1760549000		
21	$544	50546085	LAWSON-KOPP	WENDY	2400 SW 10TH ST		MINOT	ND	58701	1669581765	41	Optometrist	2730006	MIDWEST VISION CENTERS -	1245303874		
6	$542	208869566	ASKVIG	JANELLE	3001 S 11TH ST		FARGO	ND	58103	1013242999	65	Physical Therapy	6569001	BEYOND BOUNDARIES OCCUPA	1245312388		
16	$542	263047434	HAMILTON	ANDREW	1100 19TH AVE N STE L-M		FARGO	ND	58102	1093979882	50	Nurse Practitioner	7174006	7 DAY CLINIC	1841547387		
14	$542	450226423	SENN	PATTI	409 7TH ST S		FARGO	ND	58103	1891849592	83	Licenses Addiction Counselor-Chemical Dependency	283018	THE VILLAGE FAMILY SERVI	1952679318		
19	$542	450226558	PANDOVE	SANDEEP	1 BURDICK EXPY W		MINOT	ND	58701	1679511059	11	Internal Medicine	635032	TRINITY MEDICAL GROUP	1083653752		
21	$541	261175213	HOFSOMMER	LEE	819 MAIN ST		LISBON	ND	58054	1972534642	48	Podiatry, Surgical chiropody	6885021	INNOVIS HEALTH, LLC DBA	1043490790		
6	$540	450306787	SKAAR	DANIELLE	901 2ND ST		LANGDON	ND	58249	1558383653	50	Nurse Practitioner	54002	CCMH CLINIC	1336201433		
17	$539	450231183	KANE	JON	1301 15TH AVE W		WILLISTON	ND	58801	1528005535	30	Radiology	711004	MERCY RADIOLOGY SERVICES	1629234257		
7	$538	450227012	BEATY	JAMES	1031 7TH ST NE		DEVILS LAKE	ND	58301	1609044262	72	Emergency Medicine	76001	THE MERCY HOSPITAL OF DE	1790751170		
5	$538	261175213	SUKUMARAN	ANJU	1702 UNIVERSITY DR S		FARGO	ND	58103	1982868030	37	Pediatrics	6885031	INNOVIS HEALTH, LLC DBA	1255677084		
8	$538	450253272	GRUNEFELDER	JACQUELINE	343 MAIN ST		HAZELTON	ND	58544	1790701241	50	Nurse Practitioner	1050001	LINTON HOSPITAL DBA HAZE	1851317317		
1	$538	911841100	SCHAAR	LAUNI	3913 LOCKPORT ST		BISMARCK	ND	58503	1952352148	43	Certified Registered Nurse Anesthetist	1065001	ADVANCED SURGICAL ARTS C	1578669354		
9	$535	450226909	AAMOLD	ROBYN	1717 SOUTH UNIVERSITY DR		FARGO	ND	58103	1205091824	97	Physician Assistant	7742027	SANFORD 1717 MEDICAL BUI	1184917924		
6	$534	450369255	PATHROFF	KELLEN	1221 W DIVIDE AVE		BISMARCK	ND	58501	1588004592	41	Optometrist	1040001	EYE CENTER OF THE DAKOTA	1548360761		
8	$533	450310462	JAMES	JOHN	4500 S WASHINGTON ST		GRAND FORKS	ND	58201	1770787830	30	Radiology	9045	ALTRU SPECIALTY CENTER	1154346161		
10	$532	450226700	BROUSSEAU	MICHAEL	2603 E BROADWAY AVE		BISMARCK	ND	58501	1477780526	65	Physical Therapy	4032	SANFORD HEALTH OCCUPATIO	1669524351		
2	$532	450311334	WALTH	DORAN	401 N 9TH ST		BISMARCK	ND	58501	1992858831	43	Certified Registered Nurse Anesthetist	236001	MID DAKOTA CLINIC	1275587826		
7	$530	411687554	DOBMEIER	TERRY	1104 7TH AVE S		MOORHEAD	MN	56563	1508883463	44	Psychiatric Nurse	6085001	HENDRIX HEALTH CENTER	1497881494		
3	$530	450310462	HARMS	KENDALL	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1215028014	43	Certified Registered Nurse Anesthetist	9001	ALTRU HEALTH SYSTEM	1043309552		
24	$530	450310462	KNOEDLER	JOHN	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1023097078	30	Radiology	9001	ALTRU HEALTH SYSTEM	1043309552		
13	$529	270056777	HARSELL	CHRISTINE	607 TOWNER AVE		LARIMORE	ND	58251	1982861647	50	Nurse Practitioner	6163002	VALLEY COMMUNITY HEALTH	1255317905		
5	$529	470757739	HERAUF	JEAN	683 STATE AVE STE B		DICKINSON	ND	58601	1972695211	66	Speech Therapy	1985001	OMAHA THERAPY INC. DBA R	1730280371		
2	$528	203311866	VOIGT	MATTHEW	401 N 9TH STREET		BISMARCK	ND	58501	1922270834	5	Anesthesiology (MD)	6669001	MISSOURI BASIN ANESTHESI	1952413585		
8	$526	450231183	ANDELIN	PAUL	1213 15TH AVE W		WILLISTON	ND	58801	1457413858	8	Family Practice	711001	CRAVEN-HAGAN/MERCY MEDIC	1760549000		
17	$526	450310159	JACKSON	CHRISTOPHE	164 WEST 13TH STREET		GRAFTON	ND	58237	1073591012	30	Radiology	282001	GRAFTON FAMILY CLINIC	1558423665		
24	$525	50546085	KENSOK	SHARI	3051 25TH ST S		FARGO	ND	58103	1366548752	41	Optometrist	2730002	MIDWEST VISION CENTERS -	1699847293		
9	$525	450226909	DIEDERICK	LEE	801 BROADWAY NORTH		FARGO	ND	58102	1699792556	43	Certified Registered Nurse Anesthetist	7742001	SANFORD BROADWAY CLINIC	1184917924		
3	$525	450355988	LAUF	ROBERT	37 1/2 E MAIN ST		MAYVILLE	ND	58257	1275621864	42	Dentist	1127001	GOOSE RIVER DENTAL ASSOC	1164522306		
10	$525	261175213	MUELLER	AMY	1702 UNIVERSITY DR S		FARGO	ND	58103	1437445327	67	Occupational Therapy	6885031	INNOVIS HEALTH, LLC DBA	1255677084		
8	$523	201278075	WALTON	KARIN	1407 24TH AVE S STE 520		GRAND FORKS	ND	58201	1740462605	83	Licenses Addiction Counselor-Chemical Dependency	6359001	AGASSIZ ASSOCIATES, PLLC	1700972122		
13	$522	454072448	ANDERSON	DANIEL	416 KUNDERT ST		TURTLE LAKE	ND	58575	1578892303	35	Chiropractor	7814001	ANDERSON HEALTH & WELLNE	1194095331		
10	$522	450260821	DEMONTIGNY	KYLE	107 SECOND ST SE		RUGBY	ND	58368	1538389754	63	Pharmacy	7873001	WHITE DRUG #50	1205925815		
15	$522	456013474	BERGER	MARK	301 MOUNTAIN ST E		CAVALIER	ND	58220	1962481747	30	Radiology	5633001	PEMBINA COUNTY HOSPITAL	1417093949		
41	$520	208891914	LOTZER	JEFFREY	213 7TH ST S		MOORHEAD	MN	56560	1699832600	35	Chiropractor	1413001	MOORHEAD CHIROPRACTIC CL	1699832600		
2	$520	450400760	RAY COMMUNITY AMBU	E	101 MAIN ST		RAY	ND	58849	1902996457	59	Ambulance Service	1960001	RAY COMMUNITY AMBULANCE	1902996457		
36	$520	450226558	VISION GALLERIA		2815 16TH ST SW STE 101		MINOT	ND	58701	1982770996	58	Other Individual Supplier - Optometric Supplier	5655001	VISION GALLERIA	1982770996		
21	$519	450260821	WHITE DRUG #72		404 MAIN ST		LISBON	ND	58054	1184932063	63	Pharmacy	7612001	WHITE DRUG #72	1184932063		
37	$519	911770748	SIEDSCHLAG	KATHLEEN	420 S 7TH ST		OAKES	ND	58474	1992925499	97	Physician Assistant	3068	SANFORD HEALTH OAKES CLI	1942241351		
25	$519	450260821	THRIFTY WHITE DRUG		2475 32 AVE S STE 1		GRAND FORKS	ND	58201	1689763294	63	Pharmacy	4653001	THRIFTY WHITE DRUG #9	1689763294		
27	$519	911770748	OURADNIK	HEATHER	801 BROADWAY NORTH		FARGO	ND	58102	1851665814	50	Nurse Practitioner	3001	SANFORD BROADWAY CLINIC	1942241351		
38	$519	450410216	RAUHAUSER	ROBERT	500 BURLINGTON ST SE		MANDAN	ND	58554	1790805810	63	Pharmacy	4666001	GATEWAY PHARMACY	1497847776		
2	$518	450226700	MARTIN	C KENT	300 N 7TH ST		BISMARCK	ND	58501	1922110576	74	Infectious Diseases	440001	SANFORD MEDICAL CENTER/B	1811941172		
11	$518	450226909	DUFFY	KRISTINA	700 1ST AVE S		FARGO	ND	58103	1184695348	13	Neurology	7742007	SANFORD NEUROSCIENCE CLI	1184917924		
26	$518	202404179	SANFORD HEALTHCARE	ESSORIES B	1705 ANNE ST NW STE 1		BEMIDJI	MN	56601	1487741765	54	Home Medical Equipment	6671001	SANFORD HEALTHCARE ACCES	1487741765		
1	$516	450310462	SLOMINSKI	VERA	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1952498057	43	Certified Registered Nurse Anesthetist	9001	ALTRU HEALTH SYSTEM	1043309552		
20	$516	450310159	BARAGA	JOSEPH	164 WEST 13TH STREET		GRAFTON	ND	58237	1730167073	30	Radiology	282001	GRAFTON FAMILY CLINIC	1558423665		
3	$516	450440576	PRECISION DIAGNOST	ERVICES IN	4152 30TH AVE S STE 103		FARGO	ND	58104	1619944253	70	Clinic	6236001	PRECISION DIAGNOSTIC SER	1619944253		
32	$515	502569174	ELLENDALE PHARMACY		117 MAIN ST		ELLENDALE	ND	58436	1447273099	54	Home Medical Equipment	3124001	THOMAS L. ULMER DBA ELLE	1811031511		
4	$515	208976315	FISKNESS	HEIDI	3001 11TH ST S		FARGO	ND	58103	1114252129	66	Speech Therapy	5881001	BEYOND BOUNDARIES SPEECH	1790999605		

5	$514	113686120	HERMAN	MELISSA	1312 HIGHWAY 49 N		BEULAH	ND	58523	1558502336	80	Clinical Social Worker	6103001	COAL COUNTRY COMMUNITY H	1942288329		
13	$514	450226423	SCHMOLL	KARISSA	1401 8 ST S		MOORHEAD	MN	56560	1164668695	51	Medical Supply Co with Orthotist	283003	THE VILLAGE FAMILY SERVI	1568492353		
34	$514	911770748	NOAH	THOMAS	520 CHAUTAUQUA BLVD		VALLEY CITY	ND	58072	1720005275	34	Urology	3002	SANFORD HEALTH VALLEY CI	1942241351		
2	$513	450226909	VINCENT	MATTHEW	1720 UNIVERSITY DR S		FARGO	ND	58103	1194007682	43	Certified Registered Nurse Anesthetist	7742004	SANFORD SOUTH UNIVERSITY	1184917924		
9	$512	450231181	SKARI	BRADLY	2422 20TH ST SW		JAMESTOWN	ND	58401	1376747030	8	Family Practice	124001	JAMESTOWN REGIONAL MEDIC	1821044652		
15	$511	331029318	JENSEN	BRIAN	114 3RD ST NE		ROLLA	ND	58367	1689927964	97	Physician Assistant	5836004	NORTHLAND HEALTH PARTNER	1225369523		
6	$509	411992627	POLLARD	JOHN	1221 HARWOOD DRIVE S		FARGO	ND	58104	1609923036	42	Dentist	7212001	POLLARD, JOHN, DDS, PC	1457565079		
117	$509	450226700	FISHER	CATHERINE	1040 TOCOMA AVE		BISMARCK	ND	58504	1740326479	22	Pathology, Anatomy, Clinical Pathology	4059	SANFORD SOUTH CLINIC	1811941172		
7	$508	410843966	GRAHAM STEINHAUER	JESSICA	1010 32ND AVE S		MOORHEAD	MN	56560	1760777031	50	Nurse Practitioner	288001	LAKELAND MENTAL HEALTH C	1366480287		
4	$507	450440929	FEHR	ALAN	135 W VILLARD ST		DICKINSON	ND	58601	1740256163	62	Psychology	665001	WESTWIND CONSULTING CENT	1619943776		
4	$506	450226419	SCHONEBERG	STEVEN	215 MAIN ST SE		DUNSEITH	ND	58329	1841398666	8	Family Practice	18068	HEART OF AMERICA JOHNSON	1568633865		
3	$505	450226909	CURRIE	MICHAEL	1720 UNIVERSITY DR S		FARGO	ND	58103	1588743561	43	Certified Registered Nurse Anesthetist	7742004	SANFORD SOUTH UNIVERSITY	1184917924		
15	$505	450445938	CRISSLER	DARREL	3402 13TH AVE S		FARGO	ND	58103	1831110626	41	Optometrist	715001	3-D OPTICAL DBA STERLING	1528175429		
10	$504	205225893	DARVEAUX	ANGELA	3902 13TH AVE S STE 256		FARGO	ND	58103	1194735118	41	Optometrist	7004001	ANGELA DARVEAUX OD PC	1477884930		
7	$504	450413089	VOLK	CHARLES	3119 N 14TH ST		BISMARCK	ND	58503	1821044926	18	Opthalmology	278002	DAKOTA EYE INSTITUTE	1962449835		
4	$504	450226909	CAREY	JANTEY	1720 UNIVERSITY DR S		FARGO	ND	58103	1396181509	11	Internal Medicine	7742004	SANFORD SOUTH UNIVERSITY	1184917924		
9	$503	450226553	STOLTZ	JOAN	570 CHAUTAUQUA BLVD		VALLEY CITY	ND	58072	1649291865	97	Physician Assistant	75001	MERCY HOSPITAL	1972698975		
12	$503	450314527	WALLER	LINDA	300 13 AVE W STE 1		DICKINSON	ND	58601	1407888621	83	Licenses Addiction Counselor-Chemical Dependency	235001	BADLANDS HUMAN SERVICE C	1124072525		
8	$502	911770748	STOCK	NANCY	501 2ND ST NW		TWIN VALLEY	MN	56584	1144248212	50	Nurse Practitioner	3021	SANFORD HEALTH TWIN VALL	1942241351		
15	$502	450310572	RENE	THOMAS	300 2ND AVE NE		JAMESTOWN	ND	58401	1386895290	41	Optometrist	349001	LIFETIME VISION SOURCE	1912052234		
4	$501	450310462	ROBINSON	BEN	1300 S COLUMBIA RD		GRAND FORKS	ND	58201	1619181302	20	Orthopedic Surgery	232001	ALTRU REHABILITATION CEN	1437248945		
3	$501	450253272	SCHATZ	ALICE	511 ELM AVE		LINTON	ND	58552	1275551780	97	Physician Assistant	430005	LINTON MEDICAL CENTER AC	1508047788		
41	$499	261215496	ROTH	STACEY	1906 30TH AVE S		MOORHEAD	MN	56560	1770849929	35	Chiropractor	7032001	ROTH FAMILY CHIROPRACTIC	1104018373		
2	$499	450458242	HILDEBRANDT-FOLSKE	CARLA	12 6TH AVE SW		BOWMAN	ND	58623	1487741484	43	Certified Registered Nurse Anesthetist	2086001	SOUTHWEST MEDICAL CLINIC	1023083714		
5	$498	450226700	FOGARTY	EDWARD	2615 FAIRWAY ST		DICKINSON	ND	58601	1902826340	30	Radiology	4008	SANFORD HEALTH DICKINSON	1811941172		
26	$497	450369255	TELLO	TIMOTHY	611 CENTER AVE		ASHLEY	ND	58413	1346348000	41	Optometrist	1040002	EYE CENTER OF THE DAKOTA	1548360761		
4	$497	450228899	ANDERSEN	JEFFREY	600 1ST STREET SE		MAYVILLE	ND	58257	1184701856	8	Family Practice	3076	SANFORD MAYVILLE	1366478760		
3	$497	450226558	KADER	ANDREW	400 BURDICK EXPY E		MINOT	ND	58701	1184731127	34	Urology	635006	TRINITY MEDICAL GROUP	1083653752		
6	$495	450310462	HAUG	JONATHAN	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1851482657	5	Anesthesiology (MD)	9001	ALTRU HEALTH SYSTEM	1043309552		
5	$495	261175213	RATHER	SANDRA	275 11TH ST S		WAHPETON	ND	58075	1649215153	68	Licensed Registered Dietitian	6885019	INNOVIS HEALTH, LLC DBA	1790965440		
26	$494	450231183	DOYSCHER	MARK	1301 15TH AVE W		WILLISTON	ND	58801	1538184569	30	Radiology	711004	MERCY RADIOLOGY SERVICES	1629234257		
4	$494	450226558	WOLSKY	CHAD	1 BURDICK EXPY W		MINOT	ND	58701	1508931676	18	Opthalmology	635032	TRINITY MEDICAL GROUP	1083653752		
25	$494	450433194	NESS	ANGELA	122 2ND ST E		MC CLUSKY	ND	58463	1295747996	35	Chiropractor	572009	SOUTHRIDGE CHIROPRACTIC	1205848108		
53	$494	450369650	ND PHARMACY INC		446 18TH ST W STE 2		DICKINSON	ND	58601	1386680767	63	Pharmacy	3205001	ND PHARMACY INC	1386680767		
32	$493	50546085	CONNELLY	JAMES	517 DAKOTA AVE		WAHPETON	ND	58075	1508884016	41	Optometrist	2730005	MIDWEST VISION CENTERS -	1457677130		
5	$492	410724029	WESSMAN	KARI	323 S MINNESOTA ST		CROOKSTON	MN	56716	1235150574	16	Obstet/Gynecology	5548016	RIVERVIEW SPECIALTY CLIN	1487944898		
10	$492	411949975	CARLSON	DAVID	891 BELSLY BLVD		MOORHEAD	MN	56560	1073538468	26	Psychiatry (MD)	1697002	SOLUTIONS BEHAVIORAL HEA	1801909239		
12	$491	410724029	BALARAMAN	SARAVANA	323 S MINNESOTA ST		CROOKSTON	MN	56716	1972740488	8	Family Practice	5548016	RIVERVIEW SPECIALTY CLIN	1487944898		
5	$491	264314533	HESS	DOUGLAS	510 4TH ST S		FARGO	ND	58103	1679864441	26	Psychiatry (MD)	7444001	PSJ ACQUISITION LLC	1679709802		
29	$490	450226700	GADE	ASHWINI	222 N 7TH ST		BISMARCK	ND	58501	1619109972	8	Family Practice	4001	SANFORD CLINIC	1811941172		
15	$488	450343518	RATH	JENNIFER	300 MAIN ST S		VELVA	ND	58790	1477760700	65	Physical Therapy	589002	SOURIS VALLEY CARE CENTE	1306821087		
19	$488	261175213	DOMM	BRUCE	1702 UNIVERSITY DR S		FARGO	ND	58103	1730106329	8	Family Practice	6885031	INNOVIS HEALTH, LLC DBA	1255677084		
4	$486	450226909	GOETZ	JENNIFER	801 BROADWAY NORTH		FARGO	ND	58102	1760439061	68	Licensed Registered Dietitian	7742001	SANFORD BROADWAY CLINIC	1184917924		
11	$486	450310462	KAISER	STEPHANIE	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1922199728	50	Nurse Practitioner	9001	ALTRU HEALTH SYSTEM	1043309552		
2	$486	450226700	CHINN	DOUGLAS	300 N 7TH ST		BISMARCK	ND	58501	1386605194	34	Urology	440001	SANFORD MEDICAL CENTER/B	1811941172		
7	$485	450437655	MOORE	CHELSEY	316 2ND AVE W		WILLISTON	ND	58801	1225265374	80	Clinical Social Worker	156001	NORTHWEST HUMAN SERVICE	1770524613		
33	$485	450353767	CLINIC PHARMACY DI	SO	2615 FARIWAY ST		DICKINSON	ND	58601	1013029024	63	Pharmacy	3226001	CLINIC PHARMACY DICKINSO	1013029024		
4	$485	450448386	NELSON	DENISE	430 E SWEET AVE		BISMARCK	ND	58504	1669707964	43	Certified Registered Nurse Anesthetist	1052001	DAKOTA SURGERY & LASER C	1952348013		
16	$484	450231183	HITE	STEPHEN	1301 15TH AVE W		WILLISTON	ND	58801	1619914645	30	Radiology	711004	MERCY RADIOLOGY SERVICES	1629234257		
8	$484	450226909	BARUN	BIPIN	1720 UNIVERSITY DR S		FARGO	ND	58103	1558503037	11	Internal Medicine	7742004	SANFORD SOUTH UNIVERSITY	1184917924		
21	$483	578503549	KEAVENY	JOHN	669 12TH ST W		DICKINSON	ND	58601	1770584500	19	Oral Surgery	1258004	KEAVENY, JOHN, DDS	1568676310		
5	$481	261175213	HAUGE	GREGORY	1702 UNIVERSITY DR S		FARGO	ND	58103	1063443729	62	Psychology	6885031	INNOVIS HEALTH, LLC DBA	1255677084		
7	$481	450310462	TRUMAN	SUSAN	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1356320105	30	Radiology	9001	ALTRU HEALTH SYSTEM	1043309552		
18	$480	680577766	ABERLE	WAYNE	2304 CLYDESDALE DR		BISMARCK	ND	58503	1427165356	41	Optometrist	6219001	PRECISION EYEZ, PC	1841307766		
14	$480	501023896	VAUDT	CHERYL	24 MAIN ST N STE H		MINOT	ND	58701	1720399454	80	Clinical Social Worker	7953001	VAUDT, CHERYL, LICSW	1720399454		
11	$479	450227012	STRAND	GINGER	1031 7TH ST NE		DEVILS LAKE	ND	58301	1750397063	97	Physician Assistant	76001	THE MERCY HOSPITAL OF DE	1790751170		
24	$479	450448589	PERKINS	MATTHEW	703 1ST AVE S		JAMESTOWN	ND	58401	1154675361	63	Pharmacy	3067001	THE MEDICINE SHOPPE	1134110463		
35	$477	450310159	MULCAHY	PAUL	164 WEST 13TH STREET		GRAFTON	ND	58237	1467431262	30	Radiology	282001	GRAFTON FAMILY CLINIC	1558423665		
10	$476	450340688	HOERAUF	KENT	820 2ND AVE W		NEW ENGLAND	ND	58647	1104912849	11	Internal Medicine	434004	WEST RIVER HEALTH SERVIC	1831286160		
12	$476	410851371	BOERGER-WILDER	JODI	603 BRUCE ST		CROOKSTON	MN	56716	1699744227	62	Psychology	1269001	NORTHWESTERN MENTAL HEAL	1508835133		
5	$475	501649373	YOCKIM	JAMES	1705 3RD AVE W STE 101		WILLISTON	ND	58801	1831379809	80	Clinical Social Worker	1684001	YOCKIM, JAMES, LICSW	1831379809		
9	$475	261175213	LANTZ	STEVEN	275 11TH ST S		WAHPETON	ND	58075	1457381212	20	Orthopedic Surgery	6885019	INNOVIS HEALTH, LLC DBA	1790965440		
5	$475	450437651	KILEN	KRISTI	2624 9TH AVE S		FARGO	ND	58103	1346514049	83	Licenses Addiction Counselor-Chemical Dependency	100001	SOUTHEAST HUMAN SERVICE	1932146941		
2	$475	454451428	ALM	MATTHEW	1616 30TH AVE S		MOORHEAD	MN	56560	1861596140	42	Dentist	7853001	FAMILY DENTISTRY OF MOOR	1861596140		
22	$474	261175213	STROBEL	AMBER	2430 20TH ST SW		JAMESTOWN	ND	58401	1972938843	50	Nurse Practitioner	6885018	INNOVIS HEALTH, LLC DBA	1073793725		
5	$473	450226711	PFENNING	STACEY	900 E BROADWAY AVE		BISMARCK	ND	58501	1558405142	50	Nurse Practitioner	459001	ST ALEXIUS MEDICAL CENTE	1306832654		

6	$472	450255914	VEGIRAJU	THAMMI	612 CENTER AVE N		ASHLEY	ND	58413	1356611958	1	General Practice	343001	AMC CLINIC INC	1851335830		
1	$472	411919461	SPLICHAL	ROBERT	2400 ST FRANCIS DR		BRECKENRIDGE	MN	56520	1689781171	43	Certified Registered Nurse Anesthetist	1224002	RED RIVER ANESTHESIA PC	1295842623		
18	$469	450231183	QUINONES	EDUARDO	1301 15TH AVE W		WILLISTON	ND	58801	1376797084	30	Radiology	711004	MERCY RADIOLOGY SERVICES	1629234257		
35	$466	861123162	STONE	JENNIFER	310 N 10TH ST		BISMARCK	ND	58501	1295968980	50	Nurse Practitioner	6459001	ST ALEXIUS HEART & LUNG	1194823021		
29	$465	450260821	WHITE DRUG #50		107 SECOND ST SE		RUGBY	ND	58368	1205925815	54	Home Medical Equipment	7873001	WHITE DRUG #50	1205925815		
50	$464	911770748	SANDA	JANELLE	801 BROADWAY NORTH		FARGO	ND	58102	1063434611	11	Internal Medicine	3001	SANFORD BROADWAY CLINIC	1942241351		
4	$464	450437649	LISTUL	DAVID	520 3RD ST NW		JAMESTOWN	ND	58401	1881708279	88	#N/A	123001	SOUTH CENTRAL HUMAN SERV	1225075906		
4	$464	264140921	DOBLER	JANET	400 12TH AVE NE STE D		DEVILS LAKE	ND	58301	1215978481	80	Clinical Social Worker	7436001	HOPE UNLIMITED INC	1205009123		
10	$464	450226909	JOHNSON	KAMI	2301 S 25TH ST STE A		FARGO	ND	58103	1336491026	97	Physician Assistant	7742011	SANFORD ORTHOPEDICS SPOR	1184917924		
5	$464	502158671	HANSON	LEAH	1809 S BROADWAY STE QZ		MINOT	ND	58701	1427146109	44	Psychiatric Nurse	8029001	HANSON, LEAH A PMH, NP,	1427146109		
4	$463	450437648	GOLDADE	JENNIFER	1237 W DIVIDE AVE STE 5		BISMARCK	ND	58501	1235490970	83	Licenses Addiction Counselor-Chemical Dependency	241001	WEST CENTRAL HUMAN SERVI	1649226713		
5	$463	450226423	LYON	JOHN	1201 25TH ST S		FARGO	ND	58103	1316121189	80	Clinical Social Worker	283001	THE VILLAGE FAMILY SERVI	1568492353		
6	$462	261175213	SOPER	CONSTANCE	3902 13TH AVE S		FARGO	ND	58103	1780849265	97	Physician Assistant	6885032	INNOVIS HEALTH, LLC DBA	1437495264		
4	$460	410695598	TORSETH	JOHN	2400 ST FRANCIS DRIVE		BRECKENRIDGE	MN	56520	1437246808	11	Internal Medicine	207001	ST FRANCIS MEDICAL CENTE	1891954574		
3	$460	450226558	WOOL	RONALD	400 BURDICK EXPY E		MINOT	ND	58701	1205814316	11	Internal Medicine	635006	TRINITY MEDICAL GROUP	1083653752		
55	$459	911770748	LADWIG	JOHN	1301 8TH ST S		MOORHEAD	MN	56560	1932131125	11	Internal Medicine	3035	SANFORD MOORHEAD CLINIC	1942241351		
5	$458	450437810	DEVELOPMENTAL CENT		701 W 6TH ST		GRAFTON	ND	58237	1558427708	54	Home Medical Equipment	453001	LIFE SKILLS AND TRANSITI	1558427708		
3	$458	450226909	HUBER	JASON	1720 UNIVERSITY DR S		FARGO	ND	58103	1467470104	43	Certified Registered Nurse Anesthetist	7742004	SANFORD SOUTH UNIVERSITY	1184917924		
36	$458	450410216	UHDE	THOMAS	835 S WASHINGTON STE 2		BISMARCK	ND	58504	1508086463	63	Pharmacy	5541001	GATEWAY PHARMACY SOUTH	1205927571		
12	$457	450226558	KRAMER	MICHAEL	1 BURDICK EXPY W		MINOT	ND	58701	1538112628	30	Radiology	635032	TRINITY MEDICAL GROUP	1083653752		
3	$456	592427815	QUAM	SARA	3220 S 18TH STREET STE 6		FARGO	ND	58104	1255449989	62	Psychology	7057001	WEGNER PSYCHOLOGICAL AND	1306930417		
13	$456	456013474	MAGUIRE	FRANK	301 MOUNTAIN ST E		CAVALIER	ND	58220	1306825278	30	Radiology	5633001	PEMBINA COUNTY HOSPITAL	1417093949		
2	$455	450226700	KNUDSON	WANDA	300 N 7TH ST		BISMARCK	ND	58501	1760581714	97	Physician Assistant	440001	SANFORD MEDICAL CENTER/B	1811941172		
16	$455	450226700	CLAIRMONT	LISA	300 N 7TH ST		BISMARCK	ND	58501	1174611370	50	Nurse Practitioner	440001	SANFORD MEDICAL CENTER/B	1811941172		
3	$451	204110580	FRY	LISA	1121 WESTRAC DR STE 204		FARGO	ND	58103	1730271909	80	Clinical Social Worker	6753001	SHAWCHUCK, CARITA, PHD,	1871650267		
6	$451	450254692	WARREN	GINGER	115 MAIN ST		LIGNITE	ND	58752	1790815454	50	Nurse Practitioner	428002	ST LUKES HOSPITAL DBA LI	1578575502		
17	$451	450374878	HAGEMEISTER	ERIN	922 LINCOLN AVE		HARVEY	ND	58341	1811065766	50	Nurse Practitioner	113001	CENTRAL DAKOTA FAMILY PH	1720156664		
2	$451	450226909	GOLDSTEIN	HEIDI	801 BROADWAY NORTH		FARGO	ND	58102	1912096710	25	Physical Medicine and Rehab	7742001	SANFORD BROADWAY CLINIC	1184917924		
24	$451	450310462	MAGUIRE	FRANK	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1306825278	30	Radiology	9001	ALTRU HEALTH SYSTEM	1043309552		
7	$451	263047434	WORREL	LESLIE	1517 32ND AVE S		FARGO	ND	58103	1942426788	97	Physician Assistant	7174002	7 DAY CLINIC SOUTH FARGO	1851547160		
8	$450	450353178	LEGACIE	LARRY	323A MAIN ST		EDMORE	ND	58330	1467530840	42	Dentist	7629001	LEGACIE DENTAL CLINIC	1467530840		
76	$450	911770748	DAHL	DANIEL	1220 SHEYENNE ST		WEST FARGO	ND	58078	1285884767	8	Family Practice	3020	SANFORD WEST FARGO CLINI	1942241351		
5	$449	261175213	DARKHABANI	ZIAD	3000 32ND AVE S		FARGO	ND	58103	1871815225	13	Neurology	6885030	INNOVIS HEALTH, LLC DBA	1578907655		
2	$449	203311866	KLESER	CHRIS	401 N 9TH STREET		BISMARCK	ND	58501	1720228448	43	Certified Registered Nurse Anesthetist	6669001	MISSOURI BASIN ANESTHESI	1952413585		
18	$448	911770748	SORUM	HEATHER	1245 WASHINGTON AVE		DETROIT LAKES	MN	56501	1144265513	65	Physical Therapy	3007	SANFORD HEALTH DETROIT L	1942241351		
4	$447	450226700	SANFORD HEALTH HEA	CENTER	300 2ND AVE NE		JAMESTOWN	ND	58401	1811941172	54	Home Medical Equipment	4045	SANFORD HEALTH HEARING C	1811941172		
22	$445	450402888	TIOGA DRUG INC		106 N MAIN		TIOGA	ND	58852	1689725434	54	Home Medical Equipment	4328001	TIOGA DRUG INC	1689725434		
51	$445	453771512	PARTNER MEDICAL ND		5256 50TH AVE S		FARGO	ND	58104	1942569512	54	Home Medical Equipment	8132001	PARTNER MEDICAL ND LLC	1942569512		
8	$444	450226909	JONES	MOSES	700 1ST AVE S		FARGO	ND	58103	1548239072	14	Neurological Surgery	7742007	SANFORD NEUROSCIENCE CLI	1184917924		
1	$443	261175213	SORNSON	MICHAEL	3000 32ND AVE S		FARGO	ND	58103	1154384493	5	Anesthesiology (MD)	6885030	INNOVIS HEALTH, LLC DBA	1578907655		
6	$443	450358423	WALHALLA AMBULANCE	VICE	1309 DELANO AVE		WALHALLA	ND	58282	1467665513	59	Ambulance Service	1847001	WALHALLA AMBULANCE SERVI	1467665513		
19	$443	450226700	MCINTEE	MICHAEL	715 E BROADWAY AVE		BISMARCK	ND	58501	1053423525	30	Radiology	4050	SANFORD SEVENTH AND BROA	1811941172		
4	$443	450231181	KURTZ	RYAN	2422 20TH ST SW		JAMESTOWN	ND	58401	1891889622	43	Certified Registered Nurse Anesthetist	77001	JAMESTOWN REGIONAL MEDIC	1407957277		
7	$442	411949975	HANISCH	STEFANIE	891 BELSLY BLVD		MOORHEAD	MN	56560	1447350400	26	Psychiatry (MD)	1697002	SOLUTIONS BEHAVIORAL HEA	1801909239		
2	$442	410724029	MACLEOD	MARY	323 S MINNESOTA ST		CROOKSTON	MN	56716	1972695302	43	Certified Registered Nurse Anesthetist	5548001	RIVERVIEW HEALTHCARE ASS	1477525566		
2	$442	450226909	COULTER	CASIE	1720 UNIVERSITY DR S		FARGO	ND	58103	1740426568	43	Certified Registered Nurse Anesthetist	7742004	SANFORD SOUTH UNIVERSITY	1184917924		
22	$441	450260821	NELSON	DANIELLE	1100 13TH AVE E		WEST FARGO	ND	58078	1265719397	63	Pharmacy	4672001	THRIFTY WHITE DRUG #46	1033208640		
13	$441	261175213	DEWEY	PHILLIP	3000 32ND AVE S		FARGO	ND	58103	1033445093	97	Physician Assistant	6885030	INNOVIS HEALTH, LLC DBA	1578907655		
18	$441	450310462	OLSON	THEODORE	400 S MINNESOTA ST		CROOKSTON	MN	56716	1437242476	11	Internal Medicine	406001	ALTRU CROOKSTON	1760494330		
10	$441	261175213	SAFRANSKI	MARY	3902 13TH AVE S		FARGO	ND	58103	1659367621	50	Nurse Practitioner	6885032	INNOVIS HEALTH, LLC DBA	1437495264		
11	$440	311824372	BOLEK	MEGAN	424 BRIGGS AVE		PARK RIVER	ND	58270	1205123957	65	Physical Therapy	6037006	ACHIEVE THERAPY, LLC	1063850436		
7	$440	450226419	WEICK	KERI	800 3RD AVE SW		RUGBY	ND	58368	1518288299	97	Physician Assistant	18067	HEART OF AMERICA JOHNSON	1578734869		
23	$440	456002491	MELBY	KRISTIN	701 E ROSSER		BISMARCK	ND	58501	1114974987	50	Nurse Practitioner	102001	CENTER FOR FAMILY MEDICI	1619905528		
8	$440	450340688	KILWEIN	STEVEN	608 HIGHWAY 12 W		BOWMAN	ND	58623	1437244043	48	Podiatry, Surgical chiropody	434006	WEST RIVER HEALTH SERVIC	1497856025		
5	$439	450226909	COOLEY	MICHELLE	801 BROADWAY NORTH		FARGO	ND	58102	1609050186	50	Nurse Practitioner	7742001	SANFORD BROADWAY CLINIC	1184917924		
30	$438	450260821	WHITE DRUG #72		404 MAIN ST		LISBON	ND	58054	1184932063	54	Home Medical Equipment	7612001	WHITE DRUG #72	1184932063		
8	$437	450226429	JAMIL	MUHAMMAD	227 16TH ST W		DICKINSON	ND	58601	1356647978	11	Internal Medicine	95009	ST JOSEPHS WALK IN CLINI	1992947956		
6	$437	450455686	HALL	JEANNE	300 MAIN AVE SUITE 200		FARGO	ND	58103	1861417107	65	Physical Therapy	2005001	VALLEY MEDICAL CLINIC, P	1164537569		
27	$436	450310159	UNITY HOSPITAL DME		164 W 13TH ST		GRAFTON	ND	58237	1245216852	54	Home Medical Equipment	2836001	UNITY HOSPITAL DME	1245216852		
5	$436	450226909	STAVENGER	JEFFREY	520 CHAUTAUQUA BLVD		VALLEY CITY	ND	58072	1659322865	20	Orthopedic Surgery	7742016	SANFORD HEALTH VALLEY CI	1184917924		
3	$434	810231784	GUNVILLE	FRED	1301 15TH AVE W		WILLISTON	ND	58801	1912019969	37	Pediatrics	1263001	BILLINGS CLINIC	1376598714		
7	$432	450231183	MILLS	DAVID	1301 15TH AVE W		WILLISTON	ND	58801	1407915226	30	Radiology	711004	MERCY RADIOLOGY SERVICES	1629234257		
12	$432	263047434	NUELLE	BETHANN	1100 19TH AVE N STE L-M		FARGO	ND	58102	1003887076	50	Nurse Practitioner	7174006	7 DAY CLINIC	1841547387		
6	$432	450226419	TOWNSEND	CAMMY	800 3RD AVE SW		RUGBY	ND	58368	1619920345	50	Nurse Practitioner	18067	HEART OF AMERICA JOHNSON	1578734869		
22	$432	450226700	BERTSCHE	SHANNON	300 N 7TH ST		BISMARCK	ND	58501	1629359070	97	Physician Assistant	440001	SANFORD MEDICAL CENTER/B	1811941172		
20	$432	450231183	IBACH	THOMAS	1301 15TH AVE W		WILLISTON	ND	58801	1538116595	30	Radiology	711004	MERCY RADIOLOGY SERVICES	1629234257		

13	$430	450226558	CHIKWENDU	VALENTINE	1 BURDICK EXPY W		MINOT	ND	58701	1356439798	6	Cardivascular Disease	635032	TRINITY MEDICAL GROUP	1083653752		
6	$430	450226700	HORNER	JUSTIN	222 N 7TH ST		BISMARCK	ND	58501	1326169061	37	Pediatrics	4001	SANFORD CLINIC	1811941172		
5	$430	450231183	TILLOTSON	CHRISTOPHE	1301 15TH AVE W		WILLISTON	ND	58801	1295714954	30	Radiology	711004	MERCY RADIOLOGY SERVICES	1629234257		
2	$429	462997955	AMAN	CHRISTINE	200 E MAIN ST STE 204		BISMARCK	ND	58501	1306155726	50	Nurse Practitioner	8116001	INSPIRED LIFE WELLNESS C	1033558168		
11	$429	450310462	KROPP	MICHAEL	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1306092069	50	Nurse Practitioner	9001	ALTRU HEALTH SYSTEM	1043309552		
42	$428	450310572	LIFETIME VISION SO		300 2ND AVE NE		JAMESTOWN	ND	58401	1912052234	58	Other Individual Supplier - Optometric Supplier	349001	LIFETIME VISION SOURCE	1912052234		
2	$428	331071823	CORPUS	IAN MANUEL	2400 10 ST SW STE 418		MINOT	ND	58701	1932412970	8	Family Practice	6124001	THE CORTINO GROUP LTD, L	1144333709		
3	$428	450437651	KROETSCH	LAURA	2624 9TH AVE S		FARGO	ND	58103	1740382456	26	Psychiatry (MD)	100001	SOUTHEAST HUMAN SERVICE	1932146941		
24	$426	450260821	MCKAY	SARA	1401 33RD ST S		FARGO	ND	58103	1437404290	63	Pharmacy	1934001	WHITE DRUG #39	1215026828		
3	$426	911770748	KLOCKE	JANET	1220 SHEYENNE ST		WEST FARGO	ND	58078	1679710347	71	Certified Diabetic Educator	3020	SANFORD WEST FARGO CLINI	1942241351		
23	$425	911770748	KRINGLIE	ROSS	1720 UNIVERSITY DR S		FARGO	ND	58103	1912924689	8	Family Practice	3904	SANFORD SOUTH UNIVERSITY	1942241351		
1	$425	208056374	WALFORD	STEVEN	1500 INTERCHANGE AVE	STE 100	BISMARCK	ND	58501	1477606317	43	Certified Registered Nurse Anesthetist	1079002	BECKER PLASTIC SURGERY C	1205082948		
13	$423	261175213	TSEN	DAVID	2430 20TH ST SW		JAMESTOWN	ND	58401	1982657128	4	Otology, Laryngology, Rhinology	6885018	INNOVIS HEALTH, LLC DBA	1073793725		
19	$422	462923243	COLEMAN	ALEX	2000 N 12TH ST #101		BISMARCK	ND	58501	1316388093	35	Chiropractor	8143001	MAXIMIZED CHIROPRACTIC	1326472911		
3	$421	450450254	GEIGER	KIM	600 N 9TH ST		BISMARCK	ND	58501	1033262506	43	Certified Registered Nurse Anesthetist	1261001	BISMARCK SURGICAL ASSOCI	1487814356		
6	$419	450459147	MRG INC DBA GARRYS	ICIANS	2810 N BROADWAY		FARGO	ND	58102	1245301852	58	Other Individual Supplier - Optometric Supplier	2093001	MRG INC DBA GARRYS OPTIC	1245301852		
22	$417	450201405	BIEL	MARK	511 1ST ST NW		MANDAN	ND	58554	1679646574	63	Pharmacy	3089001	THRIFTY WHITE DRUG #43	1588753198		
1	$416	450392134	BADEN	JOHN	2512-A S WASHINGTON		GRAND FORKS	ND	58201	1366503500	42	Dentist	1135001	BADEN, JOHN, DDS	1366503500		
33	$414	460454141	SKJEFTE	ANTHONY	520 MOCCASIN DR		ABERDEEN	SD	57401	1649260787	35	Chiropractor	1422001	DAKOTA CHIROPRACTIC OF A	1518115005		
1	$414	208056374	MCARTHUR	RYAN	1500 INTERCHANGE AVE	STE 100	BISMARCK	ND	58501	1679626972	43	Certified Registered Nurse Anesthetist	1079002	BECKER PLASTIC SURGERY C	1205082948		
11	$414	911770748	HASS	TABITHA	1412 MAIN ST		HAWLEY	MN	56549	1174761084	97	Physician Assistant	513001	SANFORD HAWLEY CLINIC	1942241351		
2	$414	450310462	KOLTES-EDWARDS	RENEE	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1477644276	5	Anesthesiology (MD)	9001	ALTRU HEALTH SYSTEM	1043309552		
16	$413	450410216	RAUHAUSER	BARBARA	3101 N 11TH ST STE 2		BISMARCK	ND	58503	1932229432	63	Pharmacy	5541002	GATEWAY PHARMACY NORTH	1447356399		
2	$411	237195265	TOWNER COUNTY AMBU	E	716 4TH AVE		CANDO	ND	58324	1790811032	59	Ambulance Service	2855001	TOWNER COUNTY AMBULANCE	1790811032		
14	$409	450310159	HOMMEYER	STEVEN	164 WEST 13TH STREET		GRAFTON	ND	58237	1356329593	30	Radiology	282001	GRAFTON FAMILY CLINIC	1558423665		
17	$408	411940432	NORTHWEST RESPIRAT	SERVICES,	500 10TH ST NE STE 230		WEST FARGO	ND	58078	1326025669	54	Home Medical Equipment	7948001	NORTHWEST RESPIRATORY SE	1326025669		
10	$408	450310462	CONSING	RAUL	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1205927316	11	Internal Medicine	9001	ALTRU HEALTH SYSTEM	1043309552		
3	$406	450226558	WILSON	APRIL	1 BURDICK EXPY W		MINOT	ND	58701	1982853776	50	Nurse Practitioner	635032	TRINITY MEDICAL GROUP	1083653752		
32	$406	450410216	BOGENRIEF	LOUISE	3101 N 11TH ST STE 2		BISMARCK	ND	58503	1801916333	63	Pharmacy	5541002	GATEWAY PHARMACY NORTH	1447356399		
31	$406	911748705	SOUTHEAST DAKOTA P	ACIES, INC	407 MAIN ST		LISBON	ND	58054	1265535389	54	Home Medical Equipment	5530001	SOUTHEAST DAKOTA PHARMAC	1265535389		
12	$405	450226700	IWAMOTO	MATTHEW	801 21ST AVE SE		MINOT	ND	58701	1073547014	30	Radiology	4065	SANFORD HEALTH WALK-IN C	1811941172		
3	$405	450226423	JUNTUNEN	CINDY	1726 S WASHINGTON STREET	STE 33A	GRAND FORKS	ND	58201	1215000617	62	Psychology	680001	THE VILLAGE FAMILY SERVI	1568492353		
20	$404	450430628	ROSS	CHERYL	901 S 8TH ST		MOORHEAD	MN	56560	1609897883	50	Nurse Practitioner	590002	FAMILY HEALTHCARE CENTER	1043389117		
146	$403	911770748	KOHLMAN-PETRICK	JOELLEN	621 DEMERS AVE		E GRAND FORKS	MN	56721	1114985454	6	Cardivascular Disease	3080	SANFORD HEALTH 621 DEMER	1942241351		
2	$403	450448737	COMMUNITY MRI SERV		10 MISSILE AVE		MINOT AFB	ND	58705	1902852973	30	Radiology	1811005	COMMUNITY MRI SERVICES L	1902852973		
11	$403	800001773	OCONNELL	JAMES	117 N WASHINGTON ST		GRAND FORKS	ND	58203	1699879213	42	Dentist	1133002	CENTER FOR SMILE DESIGN,	1699879213		
4	$403	450314527	HERTLER	CHRIS	300 13 AVE W STE 1		DICKINSON	ND	58601	1295765733	62	Psychology	235001	BADLANDS HUMAN SERVICE C	1124072525		
10	$402	410843966	MICHELS	PAUL	1010 32ND AVE S		MOORHEAD	MN	56560	1265586440	26	Psychiatry (MD)	288001	LAKELAND MENTAL HEALTH C	1366480287		
9	$402	450309291	SOLSENG	DAVID	402 3RD ST E #1		ADA	MN	56510	1104915990	41	Optometrist	19001	VALLEY VISION CLINIC LTD	1619168267		
2	$401	450450254	ROLOFF	DIANA	600 N 9TH ST		BISMARCK	ND	58501	1699843078	43	Certified Registered Nurse Anesthetist	1261001	BISMARCK SURGICAL ASSOCI	1487814356		
4	$401	450222079	GOYAL	DEEPAK	602 ASH AVE E		GLEN ULLIN	ND	58631	1508161811	11	Internal Medicine	6043003	JACOBSON MEMORIAL HOSPIT	1003929944		
8	$401	450226909	CHRISTENSEN	STEFFEN	1720 UNIVERSITY DR S		FARGO	ND	58103	1336167063	16	Obstet/Gynecology	7742004	SANFORD SOUTH UNIVERSITY	1184917924		
14	$400	450260821	STADHEIM-OLSON	ALAINA	1681 THIRD AVE WEST		DICKINSON	ND	58601	1578818225	63	Pharmacy	7880001	WHITE DRUG #34	1124117734		
6	$399	510179928	NEW LEIPZIG AMBULA		18 E 1ST ST		NEW LEIPZIG	ND	58562	1487734331	59	Ambulance Service	2911001	NEW LEIPZIG AMBULANCE	1487734331		
8	$399	410695598	CARRERA	RAFAEL	2400 ST FRANCIS DRIVE		BRECKENRIDGE	MN	56520	1568459394	8	Family Practice	207001	ST FRANCIS MEDICAL CENTE	1891954574		
5	$398	450310462	FASBENDER	JAMES	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1922199934	72	Emergency Medicine	9001	ALTRU HEALTH SYSTEM	1043309552		
6	$398	510183396	CAMERON	LISA	505 40TH ST S STE B		FARGO	ND	58103	1154670610	83	Licenses Addiction Counselor-Chemical Dependency	514003	SHAREHOUSE - GENESIS	1356576979		
5	$397	450226711	SCHOENHARD	KARI	900 E BROADWAY AVE		BISMARCK	ND	58501	1184760068	80	Clinical Social Worker	501001	ST ALEXIUS MEDICAL CENTE	1205868429		
4	$395	450226909	GROTH	BONNIE	1717 SOUTH UNIVERSITY DR		FARGO	ND	58103	1407151921	50	Nurse Practitioner	7742027	SANFORD 1717 MEDICAL BUI	1184917924		
60	$395	450260821	WHITE DRUG #66		109 W MAIN ST		ASHLEY	ND	58413	1053475020	54	Home Medical Equipment	6926001	WHITE DRUG #66	1053475020		
12	$395	454159294	LORENTZSEN	THOMAS	420 CENTER AVE STE 41		MOORHEAD	MN	56560	1083608228	41	Optometrist	7843001	MOORHEAD VISION ASSOCIAT	1164794780		
5	$395	450226558	SAFFARIAN	NASSER	1 BURDICK EXPY W		MINOT	ND	58701	1073684122	39	Nephrology	635032	TRINITY MEDICAL GROUP	1083653752		
7	$394	911770748	PRASAI	DIRGHA	1412 MAIN ST		HAWLEY	MN	56549	1366680829	11	Internal Medicine	513001	SANFORD HAWLEY CLINIC	1942241351		
30	$392	450317770	LAKOTA DRUG & GIFT		117 MAIN ST		LAKOTA	ND	58344	1417968074	54	Home Medical Equipment	2901001	LAKOTA DRUG	1417968074		
2	$391	410695598	FRANCOIS	SARA	2400 ST FRANCIS DRIVE		BRECKENRIDGE	MN	56520	1356616346	66	Speech Therapy	207001	ST FRANCIS MEDICAL CENTE	1891954574		
4	$390	450226558	STULL	BENJAMIN	1 BURDICK EXPY W		MINOT	ND	58701	1073718169	72	Emergency Medicine	635032	TRINITY MEDICAL GROUP	1083653752		
22	$390	450358986	KETTERLING	MARCIA	4 FIRST AVE SE		KULM	ND	58456	1396895942	50	Nurse Practitioner	571001	WISHEK RURAL HEALTH CLIN	1932300951		
10	$390	911770748	ASHEIM	JASON	2400 32ND AVE S		FARGO	ND	58103	1780693424	30	Radiology	3014	SANFORD SOUTHPOINTE CLIN	1942241351		
2	$389	450226700	SPAHIJA	BERISLAV	222 N 7TH ST		BISMARCK	ND	58501	1487606067	13	Neurology	4001	SANFORD CLINIC	1811941172		
7	$388	450227753	GOURNEAU	LINDA	1200 ROBERTS AVE NE		COOPERSTOWN	ND	58425	1902911639	8	Family Practice	121001	COOPERSTOWN MEDICAL CENT	1962548214		
14	$388	450226700	WEGH	AMANDA	1531 W VILLARD ST STE A		DICKINSON	ND	58601	1376783134	65	Physical Therapy	4041	SANFORD HEALTH OCCUPATIO	1669524351		
5	$388	450226429	VOLK	ROBERT	30 7TH ST W		DICKINSON	ND	58601	1932140050	50	Nurse Practitioner	95001	ST JOSEPHS HOSPITAL AND	1992947956		
1	$387	450226700	NELSON	JEFFREY	900 N BROADWAY AVE		BISMARCK	ND	58501	1649433608	4	Otology, Laryngology, Rhinology	4088	SANFORD BISMARCK AT ST A	1811941172		
1	$387	450311334	MARTIN	DONALD	401 N 9TH ST		BISMARCK	ND	58501	1043517295	43	Certified Registered Nurse Anesthetist	236001	MID DAKOTA CLINIC	1275587826		
11	$387	861123162	RUDNICK	ANDREA	310 N 10TH ST		BISMARCK	ND	58501	1538506696	50	Nurse Practitioner	6459001	ST ALEXIUS HEART & LUNG	1194823021		
21	$386	460604754	KEOGH	JESSE	201 UNIVERSITY AVE W		MINOT	ND	58703	1932477940	35	Chiropractor	7984001	701 CHIROPRACTIC PC	1346589264		

16	$386	450275169	MARTIAN	KEVIN	303 N 4TH ST		BISMARCK	ND	58501	1457646374	63	Pharmacy	2896001	MAYO PHARMACY, INC	1013018910		
7	$386	261175213	TSEN	DAVID	1702 UNIVERSITY DR S		FARGO	ND	58103	1982657128	4	Otology, Laryngology, Rhinology	6885031	INNOVIS HEALTH, LLC DBA	1255677084		
13	$386	911770748	AMUNDSON	BRUCE	332 2ND AVE N		WAHPETON	ND	58075	1679602999	65	Physical Therapy	3016	SANFORD HEALTH WAHPETON	1942241351		
26	$385	450226700	BOUTILIER	AMANDA	1531 W VILLARD ST STE B		DICKINSON	ND	58601	1164869277	64	Audiology	4070	SANFORD HEALTH DICKINSON	1811941172		
8	$384	911770748	ROESLER	SEAN	1720 UNIVERSITY DR S		FARGO	ND	58103	1750303392	8	Family Practice	3904	SANFORD SOUTH UNIVERSITY	1942241351		
11	$384	205225893	ARCHIBALD	STACEY	3902 13TH AVE S STE 256		FARGO	ND	58103	1306139266	41	Optometrist	7004001	ANGELA DARVEAUX OD PC	1477884930		
51	$384	450260821	WHITE DRUG #73		213 1ST AVE N		JAMESTOWN	ND	58401	1033460217	54	Home Medical Equipment	7998001	WHITE DRUG #73	1033460217		
18	$384	450437652	SLAVENS	RANDALL	151 S 4TH ST STE 401		GRAND FORKS	ND	58201	1225070865	80	Clinical Social Worker	242001	NORTHEAST HUMAN SERVICE	1366496341		
6	$384	450226711	DHAMIJA	SULAKSHNA	900 E BROADWAY AVE		BISMARCK	ND	58501	1629383153	8	Family Practice	501001	ST ALEXIUS MEDICAL CENTE	1205868429		
8	$383	731684053	DAHL	ROBERT	11 NORTH MAIN		GWINNER	ND	58040	1558308528	67	Occupational Therapy	6658002	MOBILITY PLUS REHABILITA	1881631299		
63	$383	450462069	KIRCHNER	TRACY	1200 HARWOOD DR S		FARGO	ND	58104	1326294513	65	Physical Therapy	5517004	PROREHAB CENTER AT TOUCH	1164753737		
4	$383	450306787	PATEL	SURESH	901 2ND ST		LANGDON	ND	58249	1235151705	8	Family Practice	54002	CCMH CLINIC	1336201433		
4	$381	450437653	NESS	TAMMY	1015 S BROADWAY STE 18		MINOT	ND	58701	1558458265	80	Clinical Social Worker	238001	NORTH CENTRAL HUMAN SERV	1477592533		
3	$381	450253272	KNECHT	JOHN	511 ELM AVE		LINTON	ND	58552	1386731065	1	General Practice	430001	LINTON MEDICAL CENTER	1568471563		
9	$381	450437652	NEWBERRY	DONALD	151 S 4TH ST STE 401		GRAND FORKS	ND	58201	1679512537	62	Psychology	242001	NORTHEAST HUMAN SERVICE	1366496341		
7	$381	205924808	NEW TOWN AMBULANCE		300 MAIN ST		NEW TOWN	ND	58763	1124060884	59	Ambulance Service	4598001	NEW TOWN AMBULANCE	1124060884		
28	$380	450410216	BELOHLAVEK	LANCE	835 S WASHINGTON STE 2		BISMARCK	ND	58504	1538343819	63	Pharmacy	5541001	GATEWAY PHARMACY SOUTH	1205927571		
24	$380	450260821	SAMUDRE	SANGEETA	300 W 11TH ST		WILLISTON	ND	58801	1841547510	63	Pharmacy	6925001	WHITE DRUG #67	1629182605		
1	$380	450226909	TONI	CONRAD	801 BROADWAY NORTH		FARGO	ND	58102	1023049129	34	Urology	7742001	SANFORD BROADWAY CLINIC	1184917924		
4	$380	204110532	MARTINSON	JAMES	1001 W INTERSTATE AVE	STE 132	BISMARCK	ND	58503	1912974213	42	Dentist	7408001	PINEHURST FAMILY DENTIST	1912974213		
4	$380	911770748	ULLAND	BRADLEY	2400 32ND AVE S		FARGO	ND	58103	1477518959	41	Optometrist	3014	SANFORD SOUTHPOINTE CLIN	1942241351		
4	$377	30512854	MCCLUSKY RURAL AMB	CE	311 S MAIN		MCCLUSKY	ND	58463	1225192958	59	Ambulance Service	1878001	MCCLUSKY RURAL AMBULANCE	1225192958		
8	$377	410695598	NELSON	SUSAN	2400 ST FRANCIS DRIVE		BRECKENRIDGE	MN	56520	1174617732	8	Family Practice	207001	ST FRANCIS MEDICAL CENTE	1891954574		
9	$376	311824372	WALSH	HEATHER	1425 S COLUMBIA RD		GRAND FORKS	ND	58201	1437158268	65	Physical Therapy	6037002	ACHIEVE THERAPY, LLC	1013009232		
14	$376	502465199	OATES	BARBARA	3031 N 19TH ST		BISMARCK	ND	58503	1164588406	88	#N/A	5375001	OATES BARBARA LPC DBA HO	1164588406		
62	$375	911770748	TESCH	YAN	2400 32ND AVE S		FARGO	ND	58103	1467722702	97	Physician Assistant	3014	SANFORD SOUTHPOINTE CLIN	1942241351		
4	$375	450308379	ZIMMERMAN	RODNEY	510 8TH AVE NE		HAZEN	ND	58545	1417149279	8	Family Practice	340006	SAKAKAWEA CLINIC	1356315220		
21	$374	450310462	BRETZKE	CARL	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1386622637	30	Radiology	9001	ALTRU HEALTH SYSTEM	1043309552		
3	$374	450226558	LEE	LANE	1321 W DAKOTA PARKWAY		WILLISTON	ND	58801	1073600979	2	General Surgery	635039	TRINITY COMMUNITY CLINIC	1083653752		
7	$373	450308379	JACKSON	ORLAN	510 8TH AVE NE		HAZEN	ND	58545	1184602666	8	Family Practice	340006	SAKAKAWEA CLINIC	1356315220		
5	$372	450227012	MOBERG	JEFFREY	1031 7TH ST NE		DEVILS LAKE	ND	58301	1235490269	97	Physician Assistant	76001	THE MERCY HOSPITAL OF DE	1790751170		
55	$372	611481142	GIESEKE	STEPHANIE	1420 9TH ST E STE 409		WEST FARGO	ND	58078	1225160153	65	Physical Therapy	6456002	AT HOME PHYSICAL THERAPY	1629326376		
40	$371	911770748	HINKLE	STEPHANIE	929 CENTRAL AVE NW		E GRAND FORKS	MN	56721	1871823021	97	Physician Assistant	3055	SANFORD HEALTH 929 CENTR	1942241351		
19	$371	450310462	PULAGAM	SRINIVAS	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1366516833	11	Internal Medicine	9001	ALTRU HEALTH SYSTEM	1043309552		
12	$370	450430628	SWINGEN	RANDY	301 NP AVE		FARGO	ND	58102	1861637852	50	Nurse Practitioner	576001	FAMILY HEALTHCARE CENTER	1710066352		
9	$370	450226419	COOPER	THOMAS	800 S MAIN AVE		RUGBY	ND	58368	1912172305	50	Nurse Practitioner	18001	GOOD SAMARITAN HOSPITAL	1588751325		
19	$370	261175213	QARNI	AHMER	275 11TH ST S		WAHPETON	ND	58075	1518997691	39	Nephrology	6885019	INNOVIS HEALTH, LLC DBA	1790965440		
37	$370	911770748	WYNNE	JOSHUA	929 CENTRAL AVE NW		E GRAND FORKS	MN	56721	1376565960	6	Cardivascular Disease	3055	SANFORD HEALTH 929 CENTR	1942241351		
7	$370	450430628	POLCHER	KELLY	301 NP AVE		FARGO	ND	58102	1104195031	50	Nurse Practitioner	576001	FAMILY HEALTHCARE CENTER	1710066352		
4	$370	450226558	MANN	AMIT	1 BURDICK EXPY W		MINOT	ND	58701	1063605129	11	Internal Medicine	635032	TRINITY MEDICAL GROUP	1083653752		
3	$369	450226553	CROWLEY	LANA	570 CHAUTAUQUA BLVD		VALLEY CITY	ND	58072	1386661387	8	Family Practice	75001	MERCY HOSPITAL	1972698975		
4	$369	911770748	THURLOW	BRENDA	2701 13TH AVE S		FARGO	ND	58103	1033130372	37	Pediatrics	3015	SANFORD CHILDRENS SOUTHW	1942241351		
6	$369	410724029	BOLAR	RANDALL	323 S MINNESOTA ST		CROOKSTON	MN	56716	1558323246	2	General Surgery	5548016	RIVERVIEW SPECIALTY CLIN	1487944898		
6	$369	450226700	BALF	DRAGOS	300 N 7TH ST		BISMARCK	ND	58501	1619178258	11	Internal Medicine	440001	SANFORD MEDICAL CENTER/B	1811941172		
3	$369	262417959	SINGH	USHA	1308 23RD ST S STE G		FARGO	ND	58103	1548338601	88	#N/A	7036001	BENSON PSYCHOLOGICAL SER	1477709574		
9	$368	450227012	WILTSE	RICHARD	1031 7TH ST NE		DEVILS LAKE	ND	58301	1265669352	72	Emergency Medicine	76001	THE MERCY HOSPITAL OF DE	1790751170		
2	$368	450226909	BROWN	CHAD	801 BROADWAY NORTH		FARGO	ND	58102	1710121116	80	Clinical Social Worker	7742001	SANFORD BROADWAY CLINIC	1184917924		
7	$368	450430824	SCOTT	DAVID	308 5TH ST S		GRAND FORKS	ND	58201	1033364013	83	Licenses Addiction Counselor-Chemical Dependency	1300004	NORTHLAND CHRISTIAN COUN	1215131016		
24	$368	650666550	KREIN	GEORGIA	600 S MAIN ST		MINOT	ND	58701	1114205978	50	Nurse Practitioner	7094001	HCR MANORCARE MEDICAL SE	1386750420		
27	$365	450226700	BEAR	BRANDI	222 N 7TH ST		BISMARCK	ND	58501	1538348529	43	Certified Registered Nurse Anesthetist	4001	SANFORD CLINIC	1811941172		
40	$365	450462069	NELSON	CRYSTAL	1711 GOLD DR STE 120		FARGO	ND	58103	1366766107	67	Occupational Therapy	5517001	PROFESSIONAL REHABILITAT	1215014105		
7	$365	450310462	MUSCHENHEIM	ALEXANDRA	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1184603607	30	Radiology	9001	ALTRU HEALTH SYSTEM	1043309552		
6	$364	450226700	NESS	BRADY	300 N 7TH ST		BISMARCK	ND	58501	1518079011	64	Audiology	440001	SANFORD MEDICAL CENTER/B	1811941172		
8	$364	450430628	MCMULLEN	JILL	301 NP AVE		FARGO	ND	58102	1174893879	50	Nurse Practitioner	576001	FAMILY HEALTHCARE CENTER	1710066352		
13	$363	450445938	MCCAMY	ROBERT	3402 13TH AVE S		FARGO	ND	58103	1497892335	41	Optometrist	715001	3-D OPTICAL DBA STERLING	1528175429		
2	$362	450311334	KUENNEN	TIMOTHY	401 N 9TH ST		BISMARCK	ND	58501	1639251143	43	Certified Registered Nurse Anesthetist	236001	MID DAKOTA CLINIC	1275587826		
39	$361	760746279	SMITH	ERIS	2700 8TH ST NW		MINOT	ND	58703	1215048079	65	Physical Therapy	5439001	FIRST CHOICE PHYSICAL TH	1013098797		
11	$361	460224598	FRITZ	DANIEL	305 S STATE ST		ABERDEEN	SD	57401	1942425277	30	Radiology	5518001	AVERA MEDICAL GROUP RADI	1437192721		
41	$361	450427938	CLINIC PHARMACY/DE	LAKE	1001 7TH ST		DEVILS LAKE	ND	58301	1184718876	63	Pharmacy	3007001	CLINIC PHARMACY/DEVILS L	1184718876		
4	$360	450339614	NEW ENGLAND AMBULA	SERVICE IN	5848 HWY 22 S		NEW ENGLAND	ND	58647	1073673414	59	Ambulance Service	1858001	NEW ENGLAND AMBULANCE SE	1073673414		
2	$360	450226553	BULIK	ROBERT	570 CHAUTAUQUA BLVD		VALLEY CITY	ND	58072	1144264714	43	Certified Registered Nurse Anesthetist	75001	MERCY HOSPITAL	1972698975		
4	$359	450226558	HOLLAND	MICHAEL	1 BURDICK EXPY W		MINOT	ND	58701	1104913045	37	Pediatrics	635032	TRINITY MEDICAL GROUP	1083653752		
20	$359	911770748	BAUGH	MIRANDA	801 BROADWAY NORTH		FARGO	ND	58102	1548246630	50	Nurse Practitioner	3001	SANFORD BROADWAY CLINIC	1942241351		
6	$359	450310462	LAPP	GREGORY	1001 7TH ST		DEVILS LAKE	ND	58301	1730270539	4	Otology, Laryngology, Rhinology	9027	ALTRU CLINIC LAKE REGION	1861581373		
38	$356	456004395	HEFTA	CHERYL	524 4TH AVE NE UNIT 9		DEVILS LAKE	ND	58301	1255448668	50	Nurse Practitioner	716001	LAKE REGION FAMILY PLANN	1407068778		
5	$356	450437652	FISHER	MARLYS	151 S 4TH ST STE 401		GRAND FORKS	ND	58201	1457672354	83	Licenses Addiction Counselor-Chemical Dependency	242001	NORTHEAST HUMAN SERVICE	1366496341		

2	$356	261175213	SOLLOM	DENNIS	275 11TH ST S		WAHPETON	ND	58075	1336170265	25	Physical Medicine and Rehab	6885019	INNOVIS HEALTH, LLC DBA	1790965440				
3	$354	450231183	GORDON	JEFFERY	1301 15TH AVE W		WILLISTON	ND	58801	1477531838	30	Radiology	711004	MERCY RADIOLOGY SERVICES	1629234257				
14	$354	450462069	BAUMGARTNER	JESSICA	1711 GOLD DR STE 120		FARGO	ND	58103	1992851695	67	Occupational Therapy	5517001	PROFESSIONAL REHABILITAT	1215014105				
8	$354	911770748	PERKEREWICZ	SARAH	1245 S WASHINGTON AVE		DETROIT LAKES	MN	56501	1437343548	65	Physical Therapy	3082	SANFORD HEALTH DETROIT L	1942241351				
17	$353	450310159	MAGUIRE	FRANK	164 WEST 13TH STREET		GRAFTON	ND	58237	1306825278	30	Radiology	282001	GRAFTON FAMILY CLINIC	1558423665				
21	$353	450310159	FRECENTESE	DOMINIC	164 WEST 13TH STREET		GRAFTON	ND	58237	1144209008	30	Radiology	282001	GRAFTON FAMILY CLINIC	1558423665				
62	$353	911770748	STABO	SUSAN	801 BROADWAY NORTH		FARGO	ND	58102	1881782258	50	Nurse Practitioner	3001	SANFORD BROADWAY CLINIC	1942241351				
7	$352	456013474	FRECENTESE	DOMINIC	301 MOUNTAIN ST E		CAVALIER	ND	58220	1144209008	30	Radiology	5633001	PEMBINA COUNTY HOSPITAL	1417093949				
16	$352	456002439	NORTH DAKOTA STATE	VERSITY	1707 CENTENNIAL BLVD		FARGO	ND	58102	1427152115	70	Clinic	3702001	NDSU STUDENT HEALTH SERV	1427152115				
21	$352	450426511	JORGENSEN	TIMOTHY	330 ELM ST		KINDRED	ND	58051	1578638334	35	Chiropractor	1072001	SPINAL HEALTH ASSOCIATES	1578638334				
16	$352	450226700	IWAMOTO	MATTHEW	715 E BROADWAY AVE		BISMARCK	ND	58501	1073547014	30	Radiology	4050	SANFORD SEVENTH AND BROA	1811941172				
12	$351	450430628	GOPI	SREEJITH	301 NP AVE		FARGO	ND	58102	1275762924	8	Family Practice	576001	FAMILY HEALTHCARE CENTER	1710066352				
10	$351	450226558	DODIN	EMAD	1 BURDICK EXPY W		MINOT	ND	58701	1295929255	6	Cardivascular Disease	635032	TRINITY MEDICAL GROUP	1083653752				
5	$350	261175213	GRAY	TODD	2430 20TH ST SW		JAMESTOWN	ND	58401	1679587422	34	Urology	6885018	INNOVIS HEALTH, LLC DBA	1073793725				
4	$350	450310462	HEISE	AMBER	1200 S COLUMBIA RD		GRAND FORKS	ND	58201	1013077478	37	Pediatrics	62001	ALTRU HOSPITAL	1154346161				
3	$350	450340688	NUDELL	LINDA	1000 HIGHWAY 12		HETTINGER	ND	58639	1255431490	68	Licensed Registered Dietitian	367001	WEST RIVER HEALTH SERVIC	1174606271				
3	$349	450425948	PETERSON	MARK	HWY 281 N		CANDO	ND	58324	1134182355	8	Family Practice	398001	TOWNER COUNTY MEDICAL CE	1124041389				
14	$347	450310159	BLOCK	NATHAN	164 WEST 13TH STREET		GRAFTON	ND	58237	1871571125	30	Radiology	282001	GRAFTON FAMILY CLINIC	1558423665				
3	$344	450226429	STAFFORD	DARCY	30 7TH ST W		DICKINSON	ND	58601	1427078831	68	Licensed Registered Dietitian	95001	ST JOSEPHS HOSPITAL AND	1992947956				
3	$343	450226429	MCCARTHY	JOHN	30 7TH ST W		DICKINSON	ND	58601	1780638064	72	Emergency Medicine	95001	ST JOSEPHS HOSPITAL AND	1992947956				
2	$343	450314527	VAN VALKENBURG	DAISY	300 13 AVE W STE 1		DICKINSON	ND	58601	1154468064	26	Psychiatry (MD)	235001	BADLANDS HUMAN SERVICE C	1124072525				
5	$343	450437648	DAILEY	STACIE	1237 W DIVIDE AVE STE 5		BISMARCK	ND	58501	1205017563	80	Clinical Social Worker	241001	WEST CENTRAL HUMAN SERVI	1649226713				
14	$343	453635621	SMITH	ANGELA	216 S MAIN ST		CROOKSTON	MN	56716	1457569378	41	Optometrist	7992001	CROOKSTON EYE CLINIC	1740567494				
19	$342	202542921	BIENEK	STACEY	205 W JOHNSON AVE	SUITE 1	WARREN	MN	56762	1699730036	41	Optometrist	6567001	WARREN EYE CARE PC	1699730036				
3	$342	450226909	MAHALE	ADIT	904 5TH AVE NE		JAMESTOWN	ND	58401	1144247750	39	Nephrology	7742018	SANFORD HEALTH JAMESTOWN	1184917924				
43	$340	450379474	HOLIDAY PROFESSION	HARMACY	1140 E BISMARCK EXPWY		BISMARCK	ND	58504	1922000108	63	Pharmacy	4338001	HOLIDAY PROFESSIONAL PHA	1922000108				
1	$340	820558836	KREMER	RANDALL	905 MAIN ST		LISBON	ND	58054	1538109335	43	Certified Registered Nurse Anesthetist	5840005	LISBON AREA HEALTH SERVI	1811168958				
3	$339	450226909	BECKER	ALISON	801 BROADWAY NORTH		FARGO	ND	58102	1952598856	97	Physician Assistant	7742001	SANFORD BROADWAY CLINIC	1184917924				
9	$339	450226909	HVIDSTON	ANDREW	520 CHAUTAUQUA BLVD		VALLEY CITY	ND	58072	1477505725	20	Orthopedic Surgery	7742016	SANFORD HEALTH VALLEY CI	1184917924				
1	$339	450311334	STAIGER	JOSHUA	401 N 9TH ST		BISMARCK	ND	58501	1548507197	43	Certified Registered Nurse Anesthetist	236001	MID DAKOTA CLINIC	1275587826				
24	$338	460224598	PETERS	STEPHEN	305 S STATE ST		ABERDEEN	SD	57401	1861438178	30	Radiology	5518001	AVERA MEDICAL GROUP RADI	1437192721				
18	$338	450433512	TSIBULSKY	MARK	1451 44TH AVE S UNIT A		GRAND FORKS	ND	58201	1518915511	26	Psychiatry (MD)	567001	CENTER FOR PSYCHIATRIC C	1043271885				
1	$338	411440444	CENTER FOR HAIR		420 CENTER AVE		MOORHEAD	MN	56560	0	54	Home Medical Equipment	7111001	CENTER FOR HAIR	0				
3	$337	450226711	ANDERSON	PETER	900 E BROADWAY AVE		BISMARCK	ND	58501	1982850863	11	Internal Medicine	501001	ST ALEXIUS MEDICAL CENTE	1205868429				
18	$337	450457154	HOFF	CAITLIN	4151 45TH STREET S		FARGO	ND	58104	1609138056	63	Pharmacy	7886001	MEDICAL PHARMACY SOUTH	1912954165				
5	$337	261175213	STOWERS	JOHN	3000 32ND AVE S		FARGO	ND	58103	1578500112	72	Emergency Medicine	6885016	ESSENTIA HEALTH HOSPITAL	1215125463				
29	$336	450260821	WHITE DRUG #68		4255 30TH AVE S		FARGO	ND	58104	1730369711	54	Home Medical Equipment	7061001	WHITE DRUG #68	1730369711				
2	$336	450226909	EICKMAN	KARA	700 1ST AVE S		FARGO	ND	58103	1710160379	13	Neurology	7742007	SANFORD NEUROSCIENCE CLI	1184917924				
4	$335	450437648	JOHNSON	CARMEN	1237 W DIVIDE AVE STE 5		BISMARCK	ND	58501	1417036922	83	Licenses Addiction Counselor-Chemical Dependency	241001	WEST CENTRAL HUMAN SERVI	1649226713				
20	$334	450342063	PACZKOWSKI INC		848 BURREL AVE		COOPERSTOWN	ND	58425	1558379248	54	Home Medical Equipment	5490001	PACZKOWSKI INC DBA ALMKL	1558379248				
2	$333	450226909	CHAVOUR	SUDHIR	1720 UNIVERSITY DR S		FARGO	ND	58103	1891710604	11	Internal Medicine	7742004	SANFORD SOUTH UNIVERSITY	1184917924				
2	$333	450226909	HESS	APRIL	1720 UNIVERSITY DR S		FARGO	ND	58103	1932408812	11	Internal Medicine	7742004	SANFORD SOUTH UNIVERSITY	1184917924				
19	$332	911770748	SANFORD	MATTHEW	2400 32ND AVE S		FARGO	ND	58103	1033167416	30	Radiology	3014	SANFORD SOUTHPOINTE CLIN	1942241351				
3	$332	450226909	DIEHL	MARGARET	1720 UNIVERSITY DR S		FARGO	ND	58103	1548288335	43	Certified Registered Nurse Anesthetist	7742004	SANFORD SOUTH UNIVERSITY	1184917924				
5	$332	450227012	KERR	BRENNA	1031 7TH ST NE		DEVILS LAKE	ND	58301	1497917397	97	Physician Assistant	76001	THE MERCY HOSPITAL OF DE	1790751170				
3	$332	450228899	LESTEBERG	KEITH	600 1ST STREET SE		MAYVILLE	ND	58257	1639196306	16	Obstet/Gynecology	3076	SANFORD MAYVILLE	1366478760				
3	$331	450437651	FOX	AMY	2624 9TH AVE S		FARGO	ND	58103	1407187982	51	Medical Supply Co with Orthotist	100001	SOUTHEAST HUMAN SERVICE	1932146941				
3	$331	450340688	KILWEIN	STEVEN	820 2ND AVE W		NEW ENGLAND	ND	58647	1437244043	48	Podiatry, Surgical chiropody	434004	WEST RIVER HEALTH SERVIC	1831286160				
5	$330	450226909	SMIGRODZKI	RAFAL	700 1ST AVE S		FARGO	ND	58103	1841350915	13	Neurology	7742007	SANFORD NEUROSCIENCE CLI	1184917924				
2	$329	262417959	PHILLIPPI	JAY	1308 23RD ST S STE G		FARGO	ND	58103	1053692020	62	Psychology	7036001	BENSON PSYCHOLOGICAL SER	1477709574				
5	$328	450310462	RAHMAN	MOHAMMED	1001 7TH ST		DEVILS LAKE	ND	58301	1528216926	39	Nephrology	9027	ALTRU CLINIC LAKE REGION	1861581373				
5	$328	450458797	PRICED RIGHT OPTIC		123 EAST MAIN		WEST FARGO	ND	58078	1841420395	58	Other Individual Supplier - Optometric Supplier	1967001	PRICED RIGHT OPTICAL	1841420395				
4	$327	450358986	THIRUMALA REDDY	JOSEPH	420 MAIN AVE		NAPOLEON	ND	58561	1356611941	11	Internal Medicine	173001	WISHEK RURAL HEALTH CLIN	1679774616				
7	$327	450310462	BLOCK	NATHAN	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1871571125	30	Radiology	9001	ALTRU HEALTH SYSTEM	1043309552				
19	$326	450363176	FUCHS	LISA	1707 GOLD DR S STE 101		FARGO	ND	58103	1659680361	68	Licensed Registered Dietitian	5595001	INTERNAL MEDICINE ASSOCI	1144313743				
10	$325	450369650	DULETSKI	DANIEL	446 18TH ST W STE 2		DICKINSON	ND	58601	1619263357	63	Pharmacy	3205001	ND PHARMACY INC	1386680767				
5	$324	410843966	DIZON	AMADOR	1010 32ND AVE S		MOORHEAD	MN	56560	1821175241	26	Psychiatry (MD)	288001	LAKELAND MENTAL HEALTH C	1366480287				
6	$323	261175213	NELLES	RACHEL	1702 UNIVERSITY DR S		FARGO	ND	58103	1073530515	50	Nurse Practitioner	6885031	INNOVIS HEALTH, LLC DBA	1255677084				
6	$323	450437652	JAGOW FRANCE	DESIREE	151 S 4TH ST STE 401		GRAND FORKS	ND	58201	1164797874	62	Psychology	242001	NORTHEAST HUMAN SERVICE	1366496341				
38	$322	911770748	SAND	MICHAEL	1301 8TH ST S		MOORHEAD	MN	56560	1154343705	11	Internal Medicine	3035	SANFORD MOORHEAD CLINIC	1942241351				
2	$322	410724029	BAIG	MIRZA	115 VIVAN ST		PARK RIVER	ND	58270	1265404073	11	Internal Medicine	5548012	RIVERVIEW SPECIALTY CLIN	1487944898				
3	$322	450226909	KLOCKE	JANET	2400 32ND AVE S		FARGO	ND	58103	1679710347	71	Certified Diabetic Educator	7742008	SANFORD SOUTHPOINTE CLIN	1184917924				
1	$322	450226909	TOMB	DAVID	700 1ST AVE S		FARGO	ND	58103	1639269269	26	Psychiatry (MD)	7742007	SANFORD NEUROSCIENCE CLI	1184917924				
7	$321	450226700	BECKER	ERICA	2603 E BROADWAY AVE		BISMARCK	ND	58501	1780818328	65	Physical Therapy	4032	SANFORD HEALTH OCCUPATIO	1669524351				
8	$321	450437648	GIENGER	TIM	1237 W DIVIDE AVE STE 5		BISMARCK	ND	58501	1245291525	80	Clinical Social Worker	241001	WEST CENTRAL HUMAN SERVI	1649226713				
8	$321	261175213	BRIGGS	MICHAEL	275 11TH ST S		WAHPETON	ND	58075	1710911185	29	Pulmonary Diseases	6885019	INNOVIS HEALTH, LLC DBA	1790965440				

16	$320	450231183	MATSON	THOMAS	1301 15TH AVE W		WILLISTON	ND	58801	1639117435	30	Radiology	711004	MERCY RADIOLOGY SERVICES	1629234257		
4	$320	410724034	SURDY	JAMES	1010 S BIRCH		HALLOCK	MN	56728	1083705206	11	Internal Medicine	2059001	KITTSON MEMORIAL CLINIC	1740359348		
22	$319	450226700	WALTER	DONALD	222 N 7TH ST		BISMARCK	ND	58501	1639264328	43	Certified Registered Nurse Anesthetist	4001	SANFORD CLINIC	1811941172		
3	$318	450226909	BELLAS	JENNIFER	801 BROADWAY NORTH		FARGO	ND	58102	1346262938	50	Nurse Practitioner	7742001	SANFORD BROADWAY CLINIC	1184917924		
2	$318	450310462	HARRISON	JENNIFER	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1033200837	43	Certified Registered Nurse Anesthetist	9001	ALTRU HEALTH SYSTEM	1043309552		
4	$318	450310159	MYERS	JANE	164 W 13TH ST		GRAFTON	ND	58237	1427103183	68	Licensed Registered Dietitian	40001	UNITY MEDICAL CENTER	1245216852		
1	$318	911770748	PREUSSLER	DONALD	1245 WASHINGTON AVE		DETROIT LAKES	MN	56501	1215955810	62	Psychology	3007	SANFORD HEALTH DETROIT L	1942241351		
33	$317	432016588	STEINERS PHARMACY		KINGS PLAZA		DICKINSON	ND	58601	1710091798	63	Pharmacy	3319001	STEINERS PHARMACY	1710091798		
7	$317	450226700	VEARRIER	TRACY	2603 E BROADWAY AVE		BISMARCK	ND	58501	1043255755	97	Physician Assistant	4032	SANFORD HEALTH OCCUPATIO	1669524351		
6	$317	261175213	GUPTA	MAHENDRA	275 11TH ST S		WAHPETON	ND	58075	1508899139	11	Internal Medicine	6885019	INNOVIS HEALTH, LLC DBA	1790965440		
8	$316	450226700	FISHER	KELLY	300 N 7TH ST		BISMARCK	ND	58501	1285722926	68	Licensed Registered Dietitian	440001	SANFORD MEDICAL CENTER/B	1811941172		
3	$316	450226909	NILLES	STEPHANIE	801 BROADWAY NORTH		FARGO	ND	58102	1598997199	50	Nurse Practitioner	7742001	SANFORD BROADWAY CLINIC	1184917924		
5	$315	450226909	VENKATARAMANA	ANITA	700 1ST AVE S		FARGO	ND	58103	1528003191	13	Neurology	7742007	SANFORD NEUROSCIENCE CLI	1184917924		
44	$314	410851371	MACK	BRENDA	603 BRUCE ST		CROOKSTON	MN	56716	1366401481	80	Clinical Social Worker	1269001	NORTHWESTERN MENTAL HEAL	1508835133		
8	$314	911770748	NORDMARK	STEPHEN	1245 WASHINGTON AVE		DETROIT LAKES	MN	56501	1427075985	11	Internal Medicine	3007	SANFORD HEALTH DETROIT L	1942241351		
19	$313	911770748	KENNEDY	GARY	2400 32ND AVE S		FARGO	ND	58103	1578585063	8	Family Practice	3014	SANFORD SOUTHPOINTE CLIN	1942241351		
3	$313	450226909	MCDONALD	SEAN	801 BROADWAY NORTH		FARGO	ND	58102	1942228523	97	Physician Assistant	7742001	SANFORD BROADWAY CLINIC	1184917924		
5	$313	261175213	WELK	NIKKI	1401 13TH AVE E		WEST FARGO	ND	58078	1427310614	97	Physician Assistant	6885033	INNOVIS HEALTH, LLC DBA	1487990339		
2	$312	450226909	ROUGLE	JAMES	1720 UNIVERSITY DR S		FARGO	ND	58103	1881778181	26	Psychiatry (MD)	7742004	SANFORD SOUTH UNIVERSITY	1184917924		
169	$312	452644295	BERRY	SPENCER	3175 SIENNA DR S #103		FARGO	ND	58104	1215954219	8	Family Practice	7846001	MEDICAL WEIGHT LOSS	1932453404		
26	$312	450309291	VALLEY VISION CLIN		2200 S WASHINGTON ST		GRAND FORKS	ND	58201	1619168267	58	Other Individual Supplier - Optometric Supplier	234001	VALLEY VISION CLINIC LTD	1619168267		
16	$311	450260821	MCKAY	SARA	1100 13TH AVE E		WEST FARGO	ND	58078	1437404290	63	Pharmacy	4672001	THRIFTY WHITE DRUG #46	1033208640		
13	$310	911770748	BUHR	JAMES	420 S 7TH ST		OAKES	ND	58474	1013935782	8	Family Practice	3068	SANFORD HEALTH OAKES CLI	1942241351		
3	$310	450310462	NUELLE	DAVID	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1376737536	43	Certified Registered Nurse Anesthetist	9001	ALTRU HEALTH SYSTEM	1043309552		
2	$310	911770748	ABRAHAM	DAVID	621 DEMERS AVE		E GRAND FORKS	MN	56721	1306874920	4	Otology, Laryngology, Rhinology	3080	SANFORD HEALTH 621 DEMER	1942241351		
9	$310	274386602	LAMP	STUART	4656 40TH AVE S STE 214		FARGO	ND	58104	1639444300	35	Chiropractor	7659001	FLUID MOTION CHIROPRACTI	1932405602		
1	$309	450311334	SAILER	JILL	401 N 9TH ST		BISMARCK	ND	58501	1265616395	43	Certified Registered Nurse Anesthetist	236001	MID DAKOTA CLINIC	1275587826		
12	$309	450226909	LABABIDI	HANI	801 BROADWAY NORTH		FARGO	ND	58102	1417286097	29	Pulmonary Diseases	7742001	SANFORD BROADWAY CLINIC	1184917924		
10	$309	450306592	VELVA DRUG CO		16 N MAIN ST		VELVA	ND	58790	1376646315	63	Pharmacy	3174001	VELVA DRUG CO	1376646315		
17	$308	450310462	TUMMALA	ANURADHA	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1972582732	30	Radiology	9001	ALTRU HEALTH SYSTEM	1043309552		
4	$308	450310462	ROLLER	MATTHEW	1001 7TH ST		DEVILS LAKE	ND	58301	1033283379	13	Neurology	9027	ALTRU CLINIC LAKE REGION	1861581373		
26	$308	450406080	SOUTHPOINTE PHARMA		2400 32ND AVE S		FARGO	ND	58103	1396723797	54	Home Medical Equipment	4310001	PRESCRIPTION CENTER PHAR	1396723797		
2	$307	411271856	STOLEE	RANDEL	1000 CONEY STREET W		PERHAM	MN	56573	1730100959	2	General Surgery	7771001	PERHAM HEALTH CLINIC	1457631814		
6	$307	450226419	SEILER	HUBERT	800 S MAIN AVE		RUGBY	ND	58368	1124128608	8	Family Practice	18001	GOOD SAMARITAN HOSPITAL	1588751325		
6	$305	450310462	CAOILI	HENRI ROMM	1200 S COLUMBIA RD		GRAND FORKS	ND	58201	1285729533	25	Physical Medicine and Rehab	62001	ALTRU HOSPITAL	1154346161		
3	$305	470757739	BROOKE	THERESA	683 STATE AVE STE B		DICKINSON	ND	58601	1841633583	67	Occupational Therapy	1985001	OMAHA THERAPY INC. DBA R	1730280371		
3	$304	203996292	LICHTSINN	JAMES	3210 18TH ST S STE A		FARGO	ND	58104	1457438673	42	Dentist	7301001	SOUTHPOINTE DENTAL	1073676722		
4	$303	410695598	ODOM	JOHN H	2400 ST FRANCIS DRIVE		BRECKENRIDGE	MN	56520	1215953732	8	Family Practice	207001	ST FRANCIS MEDICAL CENTE	1891954574		
12	$302	450226700	STRIEBEL	ROBERT	222 N 7TH ST		BISMARCK	ND	58501	1962593517	43	Certified Registered Nurse Anesthetist	4001	SANFORD CLINIC	1811941172		
52	$301	450260821	WHITE DRUG #67		300 W 11TH ST		WILLISTON	ND	58801	1629182605	54	Home Medical Equipment	6925001	WHITE DRUG #67	1629182605		
116	$300	911770748	LANG	DARIN	2400 32ND AVE S		FARGO	ND	58103	1780602342	11	Internal Medicine	3014	SANFORD SOUTHPOINTE CLIN	1942241351		
29	$300	450394783	WHITNEY	CHARLES	111 4TH ST NW		BOWMAN	ND	58623	1437110145	35	Chiropractor	1172001	TRI STATE CHIROPRACTIC C	1437110145		
6	$298	460887812	SAMPSON	JOHN	3280 20TH ST S		FARGO	ND	58104	1376626853	24	Plastic Surgery	7958001	FARGO PLASTIC SURGERY PC	1659620110		
4	$298	450226909	ZARLING	JEFFREY	1720 UNIVERSITY DR S		FARGO	ND	58103	1508965492	43	Certified Registered Nurse Anesthetist	7742004	SANFORD SOUTH UNIVERSITY	1184917924		
1	$298	261175213	GROSS	AMANDA	1702 UNIVERSITY DR S		FARGO	ND	58103	1609184043	43	Certified Registered Nurse Anesthetist	6885031	INNOVIS HEALTH, LLC DBA	1255677084		
16	$295	450226700	LINK	MATT	222 N 7TH ST		BISMARCK	ND	58501	1851464309	43	Certified Registered Nurse Anesthetist	4001	SANFORD CLINIC	1811941172		
5	$295	450226700	SMALL	RENEE	300 N 7TH ST		BISMARCK	ND	58501	1194821355	50	Nurse Practitioner	440001	SANFORD MEDICAL CENTER/B	1811941172		
3	$295	204110580	STEINER	JULIE	1121 WESTRAC DR STE 204		FARGO	ND	58103	1659460723	80	Clinical Social Worker	6753001	SHAWCHUCK, CARITA, PHD,	1871650267		
21	$295	450226700	TELLO-SKJERSETH	CHRISTINA	715 E BROADWAY AVE		BISMARCK	ND	58501	1144480971	30	Radiology	4050	SANFORD SEVENTH AND BROA	1811941172		
4	$295	450310462	MILLETTE	KEITH	1200 S COLUMBIA RD		GRAND FORKS	ND	58201	1144312570	8	Family Practice	62001	ALTRU HOSPITAL	1154346161		
2	$294	450450254	AHNEMAN	JON	600 N 9TH ST		BISMARCK	ND	58501	1982757449	43	Certified Registered Nurse Anesthetist	1261001	BISMARCK SURGICAL ASSOCI	1487814356		
16	$293	911770748	GESSNER	MAXWELL	801 BROADWAY NORTH		FARGO	ND	58102	1467543447	5	Anesthesiology (MD)	3001	SANFORD BROADWAY CLINIC	1942241351		
5	$293	450413089	SAMSON	THOMAS	3119 N 14TH ST		BISMARCK	ND	58503	1639117625	41	Optometrist	278002	DAKOTA EYE INSTITUTE	1962449835		
2	$293	450226909	MEYER	ELIZABETH	332 2ND AVE N		WAHPETON	ND	58075	1831473263	68	Licensed Registered Dietitian	7742019	SANFORD HEALTH WAHPETON	1184917924		
6	$292	450320710	ROLETTE AMBULANCE	IC	304 MAIN AVE E		ROLETTE	ND	58366	1932278892	59	Ambulance Service	2906001	ROLETTE AMBULANCE SERVIC	1932278892		
3	$292	450226700	QUAST	MICHAEL	300 N 7TH ST		BISMARCK	ND	58501	1548287634	5	Anesthesiology (MD)	440001	SANFORD MEDICAL CENTER/B	1811941172		
8	$292	450231183	SIDNEY	SCOTT	1301 15TH AVE W		WILLISTON	ND	58801	1366490062	30	Radiology	711004	MERCY RADIOLOGY SERVICES	1629234257		
20	$292	300609086	BLUE EYE INC DBA S	ER OPTICAL	100 S 4TH ST STE 108		FARGO	ND	58103	1528382900	58	Other Individual Supplier - Optometric Supplier	7543001	SINKLER OPTICAL	1528382900		
119	$292	911770748	CHRISTENSEN	MELISSA	2400 32ND AVE S		FARGO	ND	58103	1801079231	97	Physician Assistant	3014	SANFORD SOUTHPOINTE CLIN	1942241351		
33	$292	450336863	J J ENTERPRISES		505 MAIN ST		BOTTINEAU	ND	58318	1962411868	54	Home Medical Equipment	4574001	J J ENTERPRISES	1962411868		
193	$291	911770748	KOUBA	CRAIG	801 BROADWAY NORTH		FARGO	ND	58102	1871511436	6	Cardivascular Disease	3001	SANFORD BROADWAY CLINIC	1942241351		
3	$291	410843966	STIELOW	ASHLEY	1010 32ND AVE S		MOORHEAD	MN	56560	1306149323	88	#N/A	288001	LAKELAND MENTAL HEALTH C	1366480287		
17	$290	450231183	HASSELL	DOUGLASS	1301 15TH AVE W		WILLISTON	ND	58801	1760497150	30	Radiology	711004	MERCY RADIOLOGY SERVICES	1629234257		
8	$289	911770748	BAUER-OLSON	CHERYL	1301 8TH ST S		MOORHEAD	MN	56560	1871553313	8	Family Practice	3035	SANFORD MOORHEAD CLINIC	1942241351		
5	$289	10672165	CONTEH	PATRICIA	1316 23RD STREET S		FARGO	ND	58102	1316968654	50	Nurse Practitioner	6764001	D & L PC DBA QUALITY LIF	1871684530		
4	$289	450226700	BAYER	TOSHA	300 N 7TH ST		BISMARCK	ND	58501	1376702175	50	Nurse Practitioner	440001	SANFORD MEDICAL CENTER/B	1811941172		

5	$289	261175213	JOHNSON	JULIE	275 11TH ST S		WAHPETON	ND	58075	1861601809	20	Orthopedic Surgery	6885019	INNOVIS HEALTH, LLC DBA	1790965440		
2	$288	592427815	WEGNER	KRISLEA	3220 S 18TH STREET STE 6		FARGO	ND	58104	1306930417	62	Psychology	7057001	WEGNER PSYCHOLOGICAL AND	1306930417		
3	$287	450308379	DOLL	SHERRI	510 8TH AVE NE		HAZEN	ND	58545	1700930054	50	Nurse Practitioner	340001	SAKAKAWEA MEDICAL CENTER	1700965696		
3	$286	410843966	CURREY	ABBY	1010 32ND AVE S		MOORHEAD	MN	56560	1093014508	80	Clinical Social Worker	288001	LAKELAND MENTAL HEALTH C	1366480287		
11	$285	274664038	PT OT PARTNERS PC		2829 UNIVERSITY DR S	STE 2	FARGO	ND	58103	1194021873	54	Home Medical Equipment	7667001	PT OT PARTNERS PC	1194021873		
2	$285	450310462	WRIGHT	SHELLIE	1200 S COLUMBIA RD		GRAND FORKS	ND	58201	1801982160	97	Physician Assistant	62001	ALTRU HOSPITAL	1154346161		
7	$285	410695598	JOHNSON	JAMES	1200 7 ST N		OAKES	ND	58474	1518939974	20	Orthopedic Surgery	207003	ST FRANCIS MEDICAL CENTE	1891954574		
2	$285	450437654	CLINKENBEARD	TERRY	200 HIGHWAY 2 SW		DEVILS LAKE	ND	58301	1003850231	26	Psychiatry (MD)	159001	LAKE REGION HUMAN SERVIC	1669411930		
7	$285	261175213	GRAY	TODD	275 11TH ST S		WAHPETON	ND	58075	1679587422	34	Urology	6885019	INNOVIS HEALTH, LLC DBA	1790965440		
7	$285	455373728	HAAK	CASSIE	301 12TH ST SE		WATFORD CITY	ND	58854	1730465568	50	Nurse Practitioner	7907001	ANOVA FAMILY HEALTH CENT	1801145206		
2	$284	450352535	BOWBELLS AMBULANCE		101 2ND AVE NW		BOWBELLS	ND	58721	1861609935	59	Ambulance Service	1848001	BOWBELLS AMBULANCE SERVI	1861609935		
4	$284	911770748	HAUGO	AMIE	1301 8TH ST S		MOORHEAD	MN	56560	1609855873	8	Family Practice	3035	SANFORD MOORHEAD CLINIC	1942241351		
4	$283	450226909	EASON	PHYLLIS	100 4TH ST S		FARGO	ND	58103	1174596746	26	Psychiatry (MD)	7742006	SANFORD PROFESSIONAL BUI	1184917924		
5	$282	911770748	KANTAK	SUNITA	2701 13TH AVE S		FARGO	ND	58103	1578580247	37	Pediatrics	3015	SANFORD CHILDRENS SOUTHW	1942241351		
8	$282	261175213	WROBLEWSKI	ROBERT	801 BELSLY BLVD S		MOORHEAD	MN	56560	1891956215	2	General Surgery	6885034	INNOVIS HEALTH, LLC DBA	1659617504		
3	$282	273337645	HENSHEL	SHARON	3602 FILLMORE ST S		FARGO	ND	58104	1104032853	88	#N/A	7621001	SHARON HENSHEL COUNSELIN	1104032853		
2	$281	450226909	EDWARDS	ROBERT	1720 UNIVERSITY DR S		FARGO	ND	58103	1508903253	41	Optometrist	7742004	SANFORD SOUTH UNIVERSITY	1184917924		
3	$281	450226429	LELITO	NICHOLAS	30 7TH ST W		DICKINSON	ND	58601	1265704795	97	Physician Assistant	95001	ST JOSEPHS HOSPITAL AND	1992947956		
6	$281	450226419	PAGEL-TRANA- DUTTE	BOBBIE	800 S MAIN AVE		RUGBY	ND	58368	1629174701	50	Nurse Practitioner	18001	GOOD SAMARITAN HOSPITAL	1588751325		
13	$281	911770748	HOFFMANN-CARROLL	JOANNA	1301 8TH ST S		MOORHEAD	MN	56560	1629096268	97	Physician Assistant	3035	SANFORD MOORHEAD CLINIC	1942241351		
5	$281	911770748	HENDRICKS	LARRY	102 10TH AVE W		LISBON	ND	58054	1992723530	97	Physician Assistant	3074	SANFORD HEALTH LISBON CL	1942241351		
10	$281	450310462	SCHMELKA	DANIEL	1200 S COLUMBIA RD		GRAND FORKS	ND	58201	1992896732	30	Radiology	62001	ALTRU HOSPITAL	1154346161		
4	$280	911770748	BLEHM	JULIE	2960 SETER PARKWAY		FARGO	ND	58104	1760409767	11	Internal Medicine	3088	SANFORD CLINIC INTERNAL	1942241351		
6	$280	911770748	KENIEN	ALAN	801 BROADWAY NORTH		FARGO	ND	58102	1750309316	37	Pediatrics	3001	SANFORD BROADWAY CLINIC	1942241351		
9	$279	450226700	RENO	CLAUDETTE	222 N 7TH ST		BISMARCK	ND	58501	1396857686	62	Psychology	4001	SANFORD CLINIC	1811941172		
3	$279	450226700	ALLAN	NORA	300 N 7TH ST		BISMARCK	ND	58501	1033317854	50	Nurse Practitioner	440001	SANFORD MEDICAL CENTER/B	1811941172		
2	$279	450226700	CLAUSEN	RACHEL	300 N 7TH ST		BISMARCK	ND	58501	1679853246	68	Licensed Registered Dietitian	440001	SANFORD MEDICAL CENTER/B	1811941172		
4	$279	456013474	CASPERS	JOHN	301 MOUNTAIN ST E		CAVALIER	ND	58220	1750369989	30	Radiology	5633001	PEMBINA COUNTY HOSPITAL	1417093949		
2	$279	460426548	INGRAHAM	ROBERT	683 STATE AVE N		DICKINSON	ND	58601	1609856269	14	Neurological Surgery	5788001	NEUROSURGICAL & SPINAL S	1538128491		
14	$278	450226711	MAHR	NICHOLAS	2700 8TH ST NW		MINOT	ND	58703	1003923780	6	Cardivascular Disease	501016	ST ALEXIUS CLINIC	1205868429		
1	$278	203311866	RUSSON	TROY	401 N 9TH STREET		BISMARCK	ND	58501	1790977957	5	Anesthesiology (MD)	6669001	MISSOURI BASIN ANESTHESI	1952413585		
8	$278	450310462	HAASTRUP	ADETOLA	1001 7TH ST		DEVILS LAKE	ND	58301	1932174588	39	Nephrology	9027	ALTRU CLINIC LAKE REGION	1861581373		
5	$277	450437652	MOHAGEN	LORI	151 S 4TH ST STE 401		GRAND FORKS	ND	58201	1659528537	83	Licenses Addiction Counselor-Chemical Dependency	242001	NORTHEAST HUMAN SERVICE	1366496341		
13	$277	460366510	REDMOND	WARREN	201 S LLOYD ST STE E206		ABERDEEN	SD	57401	1083723340	7	Dermatology	386001	ABERDEEN DERMATOLOGY CLI	1083723340		
2	$277	911770748	ANDERSEN	JEFFREY	600 1ST ST SE		MAYVILLE	ND	58257	1184701856	8	Family Practice	3003	SANFORD MAYVILLE	1942241351		
3	$277	911770748	JOST	AARON	2701 13TH AVE S		FARGO	ND	58103	1598783151	37	Pediatrics	3015	SANFORD CHILDRENS SOUTHW	1942241351		
34	$276	203952553	HANSON	DENNIS	306 N MILL ST		FERTILE	MN	56540	1023045945	35	Chiropractor	2072001	HANSON CHIROPRACTIC CLIN	1477589141		
2	$275	450226909	MANNURU	DEVENDRANA	1720 UNIVERSITY DR S		FARGO	ND	58103	1023273273	11	Internal Medicine	7742004	SANFORD SOUTH UNIVERSITY	1184917924		
4	$275	450226472	STENGER	GEORGE	4 N PARK ST		NORTHWOOD	ND	58267	1932386588	8	Family Practice	64001	NORTHWOOD DEACONESS HEAL	1356449136		
5	$275	450310159	MAGNUSON	JEFFREY	164 WEST 13TH STREET		GRAFTON	ND	58237	1457330409	30	Radiology	282001	GRAFTON FAMILY CLINIC	1558423665		
6	$274	911770748	TWEDT	HEIDI	1301 8TH ST S		MOORHEAD	MN	56560	1861414435	11	Internal Medicine	3035	SANFORD MOORHEAD CLINIC	1942241351		
5	$274	911770748	TINGUELY	STEPHEN	801 BROADWAY NORTH		FARGO	ND	58102	1215969415	37	Pediatrics	3001	SANFORD BROADWAY CLINIC	1942241351		
1	$274	450226909	FOSSUM	TRICIA	801 BROADWAY NORTH		FARGO	ND	58102	1629099858	50	Nurse Practitioner	7742001	SANFORD BROADWAY CLINIC	1184917924		
6	$273	450226426	HAMILTON	ROBERT	316 OHMER ST		BOTTINEAU	ND	58318	1902013857	8	Family Practice	43001	ST ANDREWS HEALTH CENTER	1306903331		
4	$273	450226909	HAUGEN	ANDREA	2400 32ND AVE S		FARGO	ND	58103	1346268992	68	Licensed Registered Dietitian	7742008	SANFORD SOUTHPOINTE CLIN	1184917924		
12	$273	450422944	GRAY	JONATHAN	4344 20TH AVE S STE 2		FARGO	ND	58103	1508048521	19	Oral Surgery	455002	FACE & JAW SURGERY CENTE	1295804300		
15	$273	450226711	SULIEMAN DAOUD	AHMED	900 E BROADWAY AVE		BISMARCK	ND	58501	1104026731	29	Pulmonary Diseases	501001	ST ALEXIUS MEDICAL CENTE	1205868429		
4	$273	450226558	AROV	GREGORY	1 BURDICK EXPY W		MINOT	ND	58701	1699003764	30	Radiology	635032	TRINITY MEDICAL GROUP	1083653752		
2	$273	410724029	AIGBEDION	ERIC	323 S MINNESOTA ST		CROOKSTON	MN	56716	1669472072	72	Emergency Medicine	5548001	RIVERVIEW HEALTHCARE ASS	1477525566		
12	$273	450310462	RATHMANN	GREGORY	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1891990404	30	Radiology	9001	ALTRU HEALTH SYSTEM	1043309552		
5	$272	450340688	JOYCE	JOHN	401 6TH AVE W		LEMMON	SD	57638	1144315441	8	Family Practice	434007	WEST RIVER HEALTH SERVIC	1801987904		
21	$272	50546085	REMBOLDT	DAVID	738 KIRKWOOD MALL		BISMARCK	ND	58504	1275639668	41	Optometrist	2730001	MIDWEST VISION CENTERS -	1851463590		
47	$272	861123162	MEYHOFF	CAMILLE	310 N 10TH ST		BISMARCK	ND	58501	1720187669	50	Nurse Practitioner	6459001	ST ALEXIUS HEART & LUNG	1194823021		
72	$272	911770748	GABA	ANU	820 4TH ST N		FARGO	ND	58102	1922025907	75	Oncology	3030	SANFORD ROGER MARIS CANC	1942241351		
3	$272	820558836	WILTSE	RICHARD	905 MAIN ST		LISBON	ND	58054	1265669352	72	Emergency Medicine	5840005	LISBON AREA HEALTH SERVI	1811168958		
20	$271	450410216	THORTON	PAMELA	3101 N 11TH ST STE 2		BISMARCK	ND	58503	1962666404	63	Pharmacy	5541002	GATEWAY PHARMACY NORTH	1447356399		
2	$271	450226700	HERTZ	KRISTIN	300 N 7TH ST		BISMARCK	ND	58501	1760741482	50	Nurse Practitioner	440001	SANFORD MEDICAL CENTER/B	1811941172		
26	$271	450460223	WISHEK DRUG		9 S CENTENNIAL ST		WISHEK	ND	58495	1578588307	54	Home Medical Equipment	5497001	WISHEK DRUG	1578588307		
24	$271	911770748	TERSTRIEP	SHELBY	820 4TH ST N		FARGO	ND	58102	1578536728	75	Oncology	3030	SANFORD ROGER MARIS CANC	1942241351		
12	$271	911770748	TOMPKINS	REBEKAH	332 2ND AVE N		WAHPETON	ND	58075	1871783704	16	Obstet/Gynecology	3016	SANFORD HEALTH WAHPETON	1942241351		
4	$270	450226558	TURK	SAMIR	1321 W DAKOTA PARKWAY		WILLISTON	ND	58801	1770657157	6	Cardivascular Disease	635039	TRINITY COMMUNITY CLINIC	1083653752		
8	$270	410724029	SUNDBERG	DAVID	323 S MINNESOTA ST		CROOKSTON	MN	56716	1750693784	50	Nurse Practitioner	5548016	RIVERVIEW SPECIALTY CLIN	1487944898		
2	$270	911770748	NAGALA	VANI	141 MAIN ST		ELLENDALE	ND	58436	1851380125	11	Internal Medicine	3071	SANFORD HEALTH ELLENDALE	1942241351		
21	$269	450310159	CASPERS	JOHN	164 WEST 13TH STREET		GRAFTON	ND	58237	1750369989	30	Radiology	282001	GRAFTON FAMILY CLINIC	1558423665		
3	$269	911770748	THURLOW	BRENDA	801 BROADWAY NORTH		FARGO	ND	58102	1033130372	37	Pediatrics	3001	SANFORD BROADWAY CLINIC	1942241351		
44	$269	911770748	SEGAL	MICHAEL	332 2ND AVE N		WAHPETON	ND	58075	1578585121	34	Urology	3016	SANFORD HEALTH WAHPETON	1942241351		

2	$268	450226700	EBACH	CONNIE	300 N 7TH ST		BISMARCK	ND	58501	1053417493	50	Nurse Practitioner	440001	SANFORD MEDICAL CENTER/B	1811941172		
7	$268	271505326	BAKKUM	MATTHEW	1000 TACOMA AVE STE 500		BISMARCK	ND	58504	1740529403	65	Physical Therapy	7569001	ADVANCED PHYSICAL THERAP	1013238112		
3	$267	261175213	SUNDE	LIZETTE	3000 32ND AVE S		FARGO	ND	58103	1508173832	65	Physical Therapy	6885030	INNOVIS HEALTH, LLC DBA	1578907655		
2	$267	911770748	LESSMAN	JENNY	1245 WASHINGTON AVE		DETROIT LAKES	MN	56501	1205875598	97	Physician Assistant	3007	SANFORD HEALTH DETROIT L	1942241351		
3	$267	450226909	BHATTA	PUSPA	1720 UNIVERSITY DR S		FARGO	ND	58103	1922231216	11	Internal Medicine	7742004	SANFORD SOUTH UNIVERSITY	1184917924		
45	$267	450313085	FARGO VISION ASSOC	S	3232 13TH AVE S		FARGO	ND	58103	1659326205	58	Other Individual Supplier - Optometric Supplier	4671001	PEARLE VISION	1659326205		
15	$266	450226558	BOYKO	HEATHER	1 BURDICK EXPY W		MINOT	ND	58701	1588925531	50	Nurse Practitioner	635032	TRINITY MEDICAL GROUP	1083653752		
9	$266	300547222	PATZMAN	TAYA	1830 E CENTURY AVE STE 1		BISMARCK	ND	58503	1750345252	41	Optometrist	7370001	BISMARCK EYECARE, PC	1396988010		
5	$266	450226419	DANIELSON	GAIL	215 MAIN ST SE		DUNSEITH	ND	58329	1629178256	97	Physician Assistant	18068	HEART OF AMERICA JOHNSON	1568633865		
7	$266	911770748	BUHR	JAMES	201 4TH AVE STE 1		ENDERLIN	ND	58027	1013935782	8	Family Practice	3025	SANFORD HEALTH ENDERLIN	1942241351		
19	$265	450310159	MUSCHENHEIM	ALEXANDRA	164 WEST 13TH STREET		GRAFTON	ND	58237	1184603607	30	Radiology	282001	GRAFTON FAMILY CLINIC	1558423665		
1	$265	450310462	KRUEGER	CURTIS	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1952341026	43	Certified Registered Nurse Anesthetist	9001	ALTRU HEALTH SYSTEM	1043309552		
4	$265	450314494	SPIRIT LAKE EMS		1403 DAKOTAH AVE		FORT TOTTEN	ND	58335	1740387059	59	Ambulance Service	4596001	SPIRIT LAKE EMS	1740387059		
11	$265	450226558	TRULSON	JILL	604 1ST STREET NORTH		NEW TOWN	ND	58763	1457425845	50	Nurse Practitioner	635030	TRINITY COMMUNITY CLINIC	1083653752		
1	$264	450425948	MYERS	MICHAEL	HWY 281 N		CANDO	ND	58324	1457387391	43	Certified Registered Nurse Anesthetist	74001	TOWNER COUNTY MEDICAL CE	1154352169		
3	$264	450437654	WILSON	HEATHER	200 HIGHWAY 2 SW		DEVILS LAKE	ND	58301	1720187016	80	Clinical Social Worker	159001	LAKE REGION HUMAN SERVIC	1669411930		
3	$264	202896555	MELBY	KRISTIN	1500 INTERCHANGE AVE	STE 210	BISMARCK	ND	58501	1114974987	50	Nurse Practitioner	7855001	VALLEY WEIGHT LOSS CLINI	1841464286		
78	$264	911770748	OVERIENE	VIKTORIJA	2400 32ND AVE S		FARGO	ND	58103	1952500803	76	Heumatology	3014	SANFORD SOUTHPOINTE CLIN	1942241351		
45	$264	450226700	FISHER	CATHERINE	209 7 ST N		BISMARCK	ND	58501	1740326479	22	Pathology, Anatomy, Clinical Pathology	4048	SANFORD SEVENTH AND THAY	1811941172		
4	$264	450226711	MALZER	CHRISTINE	1177 BORDER LANE		WASHBURN	ND	58577	1891053799	97	Physician Assistant	1298001	WASHBURN FAMILY CLINIC	1831267236		
5	$263	263047434	HAMILTON	ANDREW	1517 32ND AVE S		FARGO	ND	58103	1093979882	50	Nurse Practitioner	7174002	7 DAY CLINIC SOUTH FARGO	1851547160		
2	$262	450226700	BELZER-CURL	GRETCHEN	300 N 7TH ST		BISMARCK	ND	58501	1699878405	26	Psychiatry (MD)	440001	SANFORD MEDICAL CENTER/B	1811941172		
4	$262	450226558	KIHLE	KENNETH	310 2ND AVE E		WESTHOPE	ND	58793	1477660082	1	General Practice	635041	TRINITY HEALTH DBA TCC-W	1083653752		
1	$261	450226558	JACOBS	DAVID	1 BURDICK EXPY W		MINOT	ND	58701	1184675100	18	Opthalmology	635032	TRINITY MEDICAL GROUP	1083653752		
2	$261	450437654	BERCIER	CYNTHIA	113 MAIN AVE E		ROLLA	ND	58367	1871537357	83	Licenses Addiction Counselor-Chemical Dependency	159002	LAKE REGION HSC/ROLLA OU	1669411930		
3	$260	450226700	LANGE	DARWIN	300 N 7TH ST		BISMARCK	ND	58501	1790855252	8	Family Practice	440001	SANFORD MEDICAL CENTER/B	1811941172		
20	$260	911770748	IHLE	LORNA	801 BROADWAY NORTH		FARGO	ND	58102	1205853975	97	Physician Assistant	3001	SANFORD BROADWAY CLINIC	1942241351		
14	$260	450260821	BUCK	SAMANTHA	544 HILL AVE		GRAFTON	ND	58237	1548545981	63	Pharmacy	4578001	WHITE DRUG #65	1932298544		
20	$259	450310462	FUNK	PETER	1003 N MAIN ST		DRAYTON	ND	58225	1386735397	8	Family Practice	9014	ALTRU DRAYTON	1043309552		
71	$258	456004474	ADDUCCI	JOSEPH	110 W BROADWAY STE 101		WILLISTON	ND	58801	1710042817	16	Obstet/Gynecology	1930001	UPPER MISSOURI DISTRICT	1689677585		
49	$258	450226700	FISHER	CATHERINE	910 18TH ST NW		MANDAN	ND	58554	1740326479	22	Pathology, Anatomy, Clinical Pathology	4060	SANFORD NORTH MANDAN CLI	1811941172		
16	$258	450260821	LOTHSPEICH	TAVIAH	1401 33RD ST S		FARGO	ND	58103	1164861621	63	Pharmacy	1934001	WHITE DRUG #39	1215026828		
7	$258	450445737	CENTRAL AVE PHARMA		323 N CENTRAL AVE		VALLEY CITY	ND	58072	1669546149	63	Pharmacy	4619001	CENTRAL AVE PHARMACY	1669546149		
3	$258	208976315	GLYNN	VALERIE	3001 11TH ST S		FARGO	ND	58103	1720426455	66	Speech Therapy	5881001	BEYOND BOUNDARIES SPEECH	1790999605		
10	$257	450260821	BEHM	CODY	404 MAIN ST		LISBON	ND	58054	1689920241	63	Pharmacy	7612001	WHITE DRUG #72	1184932063		
7	$257	450226909	KRUEGER	STACY	801 BROADWAY NORTH		FARGO	ND	58102	1285980565	50	Nurse Practitioner	7742001	SANFORD BROADWAY CLINIC	1184917924		
13	$255	50546085	SAFRATOWICH	SUSAN	2800 S COLUMBIA RD	STE 301	GRAND FORKS	ND	58201	1881825339	41	Optometrist	2730009	MIDWEST VISION CENTERS -	1801129705		
3	$254	450226909	GROSS	BRENDA	1720 UNIVERSITY DR S		FARGO	ND	58103	1467470013	43	Certified Registered Nurse Anesthetist	7742004	SANFORD SOUTH UNIVERSITY	1184917924		
4	$253	450440805	COMMUNITY AMBULANC		59 2ND AVE SE		BEACH	ND	58621	1780715532	59	Ambulance Service	2917001	COMMUNITY AMBULANCE SERV	1780715532		
7	$253	450437696	ERNSTER	DALE	2605 CIRCLE DR		JAMESTOWN	ND	58401	1053365122	8	Family Practice	85001	NORTH DAKOTA STATE HOSPI	1649227075		
18	$253	911770748	ALONTO	EILEEN	801 BROADWAY NORTH		FARGO	ND	58102	1326290677	11	Internal Medicine	3001	SANFORD BROADWAY CLINIC	1942241351		
4	$253	411384358	ALTAMIRANO	ALFREDO	109 S MINNESOTA ST		WARREN	MN	56762	1699876862	97	Physician Assistant	2067001	NORTH VALLEY HEALTH CENT	1073516357		
10	$252	450226700	MCINTEE	MICHAEL	801 21ST AVE SE		MINOT	ND	58701	1053423525	30	Radiology	4065	SANFORD HEALTH WALK-IN C	1811941172		
16	$252	141972855	DOUGS OPTICAL		1547 SOUTH UNIVERSITY DR		FARGO	ND	58103	1649343930	58	Other Individual Supplier - Optometric Supplier	6849001	DOUG'S OPTICAL INC.	1649343930		
13	$251	450231183	BEGGS	DANIEL	1301 15TH AVE W		WILLISTON	ND	58801	1376594465	30	Radiology	711004	MERCY RADIOLOGY SERVICES	1629234257		
4	$250	261175213	LYNCH SALAMON	DAVID	3000 32ND AVE S		FARGO	ND	58103	1407816994	16	Obstet/Gynecology	6885030	INNOVIS HEALTH, LLC DBA	1578907655		
24	$250	911770748	GROTH	BONNIE	1717 S UNIVERSITY DRIVE		FARGO	ND	58103	1407151921	50	Nurse Practitioner	3084	SANFORD 1717 MEDICAL BUI	1942241351		
1	$250	203311866	LOVEN	ROGER	401 N 9TH STREET		BISMARCK	ND	58501	1922107853	5	Anesthesiology (MD)	6669001	MISSOURI BASIN ANESTHESI	1952413585		
1	$250	203311866	WHITE	PETER	401 N 9TH STREET		BISMARCK	ND	58501	1508966524	5	Anesthesiology (MD)	6669001	MISSOURI BASIN ANESTHESI	1952413585		
1	$250	203311866	HOSKINS	NICHOLAS	401 N 9TH STREET		BISMARCK	ND	58501	1932369634	5	Anesthesiology (MD)	6669001	MISSOURI BASIN ANESTHESI	1952413585		
16	$250	450226419	FERNANDEZ	OSCAR	800 S MAIN AVE		RUGBY	ND	58368	1184613465	8	Family Practice	18001	GOOD SAMARITAN HOSPITAL	1588751325		
4	$249	411506440	MAYO CLINIC STORE	P APNEA SU	200 1ST ST SW STE 17121		ROCHESTER	MN	55905	1770559189	54	Home Medical Equipment	7983002	MAYO CLINIC STORE SLEEP	1770559189		
4	$248	450226909	KROETSCH	COREY	801 BROADWAY NORTH		FARGO	ND	58102	1194987669	2	General Surgery	7742001	SANFORD BROADWAY CLINIC	1184917924		
2	$248	450436806	MADDOCK AMBULANCE		206 LINCOLN		MADDOCK	ND	58348	1760539100	59	Ambulance Service	1965001	MADDOCK AMBULANCE	1760539100		
4	$248	450309291	SOLSENG	DAVID	2200 S WASHINGTON ST		GRAND FORKS	ND	58201	1104915990	41	Optometrist	234001	VALLEY VISION CLINIC LTD	1619168267		
13	$247	450260821	KLEINGARTNER	TABITHA	310 1ST AVE S		JAMESTOWN	ND	58401	1750638649	63	Pharmacy	4667001	WHITE DRUG #45	1588754428		
3	$247	450226909	WELCH	MOLLY	801 BROADWAY NORTH		FARGO	ND	58102	1942455258	50	Nurse Practitioner	7742001	SANFORD BROADWAY CLINIC	1184917924		
7	$247	411826054	KEMPFER	RANDALL	112 S FRONT ST		BARNESVILLE	MN	56514	1487660403	41	Optometrist	7225002	MINNESOTA EYECARE NETWOR	1760655740		
15	$247	261175213	JENNY	DONALD	2430 20TH ST SW		JAMESTOWN	ND	58401	1568402097	6	Cardivascular Disease	6885018	INNOVIS HEALTH, LLC DBA	1073793725		
3	$246	450227012	MOORE	JODI	1031 7TH ST NE		DEVILS LAKE	ND	58301	1366412843	97	Physician Assistant	76001	THE MERCY HOSPITAL OF DE	1790751170		
15	$246	911770748	FETNER	ERIK	801 BROADWAY NORTH		FARGO	ND	58102	1033302062	2	General Surgery	3001	SANFORD BROADWAY CLINIC	1942241351		
2	$245	261175213	KANE	JON	3000 32ND AVE S		FARGO	ND	58103	1528005535	30	Radiology	6885030	INNOVIS HEALTH, LLC DBA	1578907655		
16	$245	450321538	ZACHMEIER-BABB	AMANDA	1600 2ND AVE SW STE 19		MINOT	ND	58701	1437175577	97	Physician Assistant	188002	THE BONE & JOINT CENTER,	1750307872		
5	$245	450253272	SCHATZ	ALICE	343 MAIN ST		HAZELTON	ND	58544	1275551780	97	Physician Assistant	1050001	LINTON HOSPITAL DBA HAZE	1851317317		
70	$244	450226700	FISHER	CATHERINE	715 E BROADWAY AVE		BISMARCK	ND	58501	1740326479	22	Pathology, Anatomy, Clinical Pathology	4050	SANFORD SEVENTH AND BROA	1811941172		
2	$244	261175213	BEACHY	ARDEN	3000 32ND AVE S		FARGO	ND	58103	1164412151	72	Emergency Medicine	6885030	INNOVIS HEALTH, LLC DBA	1578907655		

5	$244	450226426	COSTNER	DAVID	316 OHMER ST		BOTTINEAU	ND	58318	1346542867	50	Nurse Practitioner	43001	ST ANDREWS HEALTH CENTER	1306903331		
1	$244	203311866	LASZEWSKI	LINDA	401 N 9TH STREET		BISMARCK	ND	58501	1336247253	5	Anesthesiology (MD)	6669001	MISSOURI BASIN ANESTHESI	1952413585		
2	$244	450226909	DAHL	KEVIN	420 S 7TH ST		OAKES	ND	58474	1356551089	20	Orthopedic Surgery	7742033	SANFORD HEALTH OAKES CLI	1184917924		
5	$243	450310462	JOHNSON	ROBERT	1001 7TH ST		DEVILS LAKE	ND	58301	1013008812	20	Orthopedic Surgery	9027	ALTRU CLINIC LAKE REGION	1861581373		
1	$243	450226909	ALBRECHT	WARREN	929 CENTRAL AVE NW		E GRAND FORKS	MN	56721	1134146129	2	General Surgery	7742021	SANFORD HEALTH 929 CENTR	1184917924		
18	$243	450260821	DEBUHR	DAVID	712 38 ST NW STE A		FARGO	ND	58102	1487773552	63	Pharmacy	7683001	WHITE DRUG #52	1114016722		
12	$243	450226700	MANN	KRYSTAL	1531 W VILLARD ST STE B		DICKINSON	ND	58601	1114277068	64	Audiology	4070	SANFORD HEALTH DICKINSON	1811941172		
11	$243	263047434	EASTMAN	NANCY	720 MAIN AVE		MOORHEAD	MN	56560	1487715405	97	Physician Assistant	7174003	7 DAY CLINIC MOORHEAD	1790931467		
23	$242	450462069	BAUMGARTNER	JESSICA	1200 HARWOOD DR S		FARGO	ND	58104	1992851695	67	Occupational Therapy	5517004	PROREHAB CENTER AT TOUCH	1164753737		
14	$242	450410216	RICHARDS	ALLISON	3101 N 11TH ST STE 2		BISMARCK	ND	58503	1487819371	63	Pharmacy	5541002	GATEWAY PHARMACY NORTH	1447356399		
31	$242	911841831	MELANIE OLTMANNS,	C DBA EYEW	2273 3RD AVE W		DICKINSON	ND	58601	1508865700	58	Other Individual Supplier - Optometric Supplier	1086001	OLTMANNS, MELANIE, OD,PC	1508865700		
8	$242	450226909	BLONSKY	JEFFERY	801 BROADWAY NORTH		FARGO	ND	58102	1609896596	10	Gastronenterology	7742001	SANFORD BROADWAY CLINIC	1184917924		
4	$241	450226909	ARMSTRONG	LACEY	1720 UNIVERSITY DR S		FARGO	ND	58103	1942520325	26	Psychiatry (MD)	7742004	SANFORD SOUTH UNIVERSITY	1184917924		
2	$241	450226909	EEG	KURT	801 BROADWAY NORTH		FARGO	ND	58102	1558542738	34	Urology	7742001	SANFORD BROADWAY CLINIC	1184917924		
60	$241	911770748	SHAHIDI	HOMAYOON	820 4TH ST N		FARGO	ND	58102	1295756419	75	Oncology	3030	SANFORD ROGER MARIS CANC	1942241351		
11	$239	450462585	SWANHOLM	SARAH	4344 20TH AVE S		FARGO	ND	58103	1750616835	41	Optometrist	7176001	EYE PHYSICIANS GROUP, LL	1346405891		
4	$237	861066095	WAHPETON DRUG		508 DAKOTA AVE		WAHPETON	ND	58075	1336237346	63	Pharmacy	4385001	WAHPETON DRUG	1336237346		
5	$237	450437654	LAMOTTE	WANDA	113 MAIN AVE E		ROLLA	ND	58367	1083881510	83	Licenses Addiction Counselor-Chemical Dependency	159002	LAKE REGION HSC/ROLLA OU	1669411930		
2	$237	450314527	RONSBERG	ELISE	300 13 AVE W STE 1		DICKINSON	ND	58601	1942233085	83	Licenses Addiction Counselor-Chemical Dependency	235001	BADLANDS HUMAN SERVICE C	1124072525		
13	$237	450433194	GIETZEN	LORI	811 1/2 MAIN ST		HEBRON	ND	58638	1245242072	35	Chiropractor	572008	HEBRON CHIROPRACTIC CLIN	1205848108		
6	$237	450220519	STANDING ROCK AMBU	E	9311 HIGHWAY 24		FORT YATES	ND	58538	1295824852	59	Ambulance Service	1969001	STANDING ROCK AMBULANCE	1295824852		
29	$237	911770748	LOUVAR	DANIEL	332 2ND AVE N		WAHPETON	ND	58075	1912984923	39	Nephrology	3016	SANFORD HEALTH WAHPETON	1942241351		
1	$236	203311866	WALTH	DORAN	401 N 9TH STREET		BISMARCK	ND	58501	1992858831	43	Certified Registered Nurse Anesthetist	6669001	MISSOURI BASIN ANESTHESI	1952413585		
8	$236	205332108	KOSTELECKY	EVE	210 W FRONT AVE		BISMARCK	ND	58504	1578755757	41	Optometrist	6900002	EYES ON PARKWAY	1679631477		
2	$236	450226700	MCINTEE	MICHAEL	414 N 7TH ST		BISMARCK	ND	58501	1053423525	30	Radiology	4046	SANFORD SEVENTH AND ROSS	1811941172		
22	$236	450418341	COUNTRY DRUG STORE		116 NORTH AVE E		RICHARDTON	ND	58652	1184669616	54	Home Medical Equipment	4317001	COUNTRY DRUG STORE	1184669616		
8	$235	450306787	SWANSON	BRENNA	909 2ND ST		LANGDON	ND	58249	1205991924	68	Licensed Registered Dietitian	54001	CAVALIER COUNTY MEMORIAL	1750328662		
9	$235	450226558	YOUNG	MARCEL	1 BURDICK EXPY W		MINOT	ND	58701	1659446730	8	Family Practice	635032	TRINITY MEDICAL GROUP	1083653752		
5	$234	450231183	BULLIS	BRENT	1301 15TH AVE W		WILLISTON	ND	58801	1831140441	30	Radiology	711004	MERCY RADIOLOGY SERVICES	1629234257		
5	$234	450226426	KOCH	BRENDA	316 OHMER ST		BOTTINEAU	ND	58318	1831196732	50	Nurse Practitioner	43001	ST ANDREWS HEALTH CENTER	1306903331		
13	$233	450226909	SANFORD WEST FARGO	NIC/DIABET	1220 SHEYENNE ST		WEST FARGO	ND	58078	1184917924	71	Certified Diabetic Educator	7742013	SANFORD WEST FARGO CLINI	1184917924		
3	$233	450226553	LABRIE	SONJA	570 CHAUTAUQUA BLVD		VALLEY CITY	ND	58072	1295789451	11	Internal Medicine	75001	MERCY HOSPITAL	1972698975		
2	$232	456013474	MAGNUSON	JEFFREY	301 MOUNTAIN ST E		CAVALIER	ND	58220	1457330409	30	Radiology	5633001	PEMBINA COUNTY HOSPITAL	1417093949		
10	$232	911770748	GOLDSTEIN	MITCHELL	1412 MAIN ST		HAWLEY	MN	56549	1497773030	2	General Surgery	513001	SANFORD HAWLEY CLINIC	1942241351		
1	$232	450226700	REDDY	KARTHIK	801 21ST AVE SE		MINOT	ND	58701	1881755429	6	Cardivascular Disease	4065	SANFORD HEALTH WALK-IN C	1811941172		
2	$232	450437653	EICK	THOMAS	1015 S BROADWAY STE 18		MINOT	ND	58701	1972544708	26	Psychiatry (MD)	238001	NORTH CENTRAL HUMAN SERV	1477592533		
19	$232	450310572	MOTACEK	ASHLEY	300 2ND AVE NE		JAMESTOWN	ND	58401	1780919340	41	Optometrist	349001	LIFETIME VISION SOURCE	1912052234		
1	$232	450226700	DUNNIGAN	RALPH	222 N 7TH ST		BISMARCK	ND	58501	1932151586	13	Neurology	4001	SANFORD CLINIC	1811941172		
32	$230	261175213	ALMER	MARIN	1702 UNIVERSITY DR S		FARGO	ND	58103	1790955599	64	Audiology	6885031	INNOVIS HEALTH, LLC DBA	1255677084		
28	$230	651298957	LARSON	PETER	220 FRONT STREET		BARNESVILLE	MN	56514	1487763314	65	Physical Therapy	7060002	REHAB PLUS BARNESVILLE	1679766802		
8	$229	911770748	GRANDHI	ANUPAMA	1717 S UNIVERSITY DRIVE		FARGO	ND	58103	1821185844	19	Oral Surgery	3084	SANFORD 1717 MEDICAL BUI	1942241351		
3	$229	450226419	MICKELSON	BARBARA	301 ROOSEVELT AVE		MADDOCK	ND	58348	1225292311	50	Nurse Practitioner	18209	HEART OF AMERICA JOHNSON	1740451038		
8	$228	450231183	GROEBNER	NATHAN	1301 15TH AVE W		WILLISTON	ND	58801	1043310188	30	Radiology	711004	MERCY RADIOLOGY SERVICES	1629234257		
2	$228	450226909	BHATTARAL	JAYA	1720 UNIVERSITY DR S		FARGO	ND	58103	1013172717	11	Internal Medicine	7742004	SANFORD SOUTH UNIVERSITY	1184917924		
8	$228	454758095	RISING	CHERYL	2817 WATERS EDGE LANE SE		MANDAN	ND	58554	1134225436	50	Nurse Practitioner	8008001	PRAIRIE ASSISTED LIVING	1033475868		
3	$226	460446760	LARSON	CHRISTOPHE	310 S PENN ST SUITE 201		ABERDEEN	SD	57401	1295990141	2	General Surgery	7271001	ABERDEEN SURGICAL ASSOCI	1629057989		
14	$226	261156722	TICKEL	TAMMY	819 30TH AVE S STE 100		MOORHEAD	MN	56560	1992972822	35	Chiropractor	7040001	TICKEL CHIROPRACTIC, PC	1811184120		
1	$226	450226909	BJORNSTAD	MARK	1720 UNIVERSITY DR S		FARGO	ND	58103	1376853945	43	Certified Registered Nurse Anesthetist	7742004	SANFORD SOUTH UNIVERSITY	1184917924		
4	$225	450226700	ANDERST	CYNTHIA	515 EAST BROADWAY AVE		BISMARCK	ND	58501	1336237056	68	Licensed Registered Dietitian	4066	SANFORD 5TH & BROADWAY C	1811941172		
35	$225	911770748	CHRISTENSEN	STEFFEN	929 CENTRAL AVE NW		E GRAND FORKS	MN	56721	1336167063	16	Obstet/Gynecology	3055	SANFORD HEALTH 929 CENTR	1942241351		
7	$225	911770748	NAGALA	VANI	336 MAIN ST		FORMAN	ND	58032	1851380125	11	Internal Medicine	3069	SANFORD HEALTH FORMAN CL	1942241351		
9	$224	450226419	FERNANDEZ	OSCAR	215 MAIN ST SE		DUNSEITH	ND	58329	1184613465	8	Family Practice	18068	HEART OF AMERICA JOHNSON	1568633865		
13	$224	331029318	BUSCH	CASSIE	416 KUNDERT ST		TURTLE LAKE	ND	58575	1679911622	50	Nurse Practitioner	5836001	NORTHLAND COMMUNITY HEAL	1457435802		
21	$224	450310159	RATHMANN	GREGORY	164 WEST 13TH STREET		GRAFTON	ND	58237	1891990404	30	Radiology	282001	GRAFTON FAMILY CLINIC	1558423665		
2	$224	261175213	MUSGRAVE	LARISSA	2430 20TH ST SW		JAMESTOWN	ND	58401	1528013307	68	Licensed Registered Dietitian	6885018	INNOVIS HEALTH, LLC DBA	1073793725		
5	$223	450226419	FERNANDEZ	OSCAR	301 ROOSEVELT AVE		MADDOCK	ND	58348	1184613465	8	Family Practice	18209	HEART OF AMERICA JOHNSON	1740451038		
7	$223	450226553	HOCHHALTER	DAVID	570 CHAUTAUQUA BLVD		VALLEY CITY	ND	58072	1669583183	8	Family Practice	75001	MERCY HOSPITAL	1972698975		
1	$222	261175213	LUGER	PATRICK	3000 32ND AVE S		FARGO	ND	58103	1275550949	11	Internal Medicine	6885030	INNOVIS HEALTH, LLC DBA	1578907655		
15	$222	911770748	ASLESON	JOHN	1720 UNIVERSITY DR S		FARGO	ND	58103	1114190493	30	Radiology	3904	SANFORD SOUTH UNIVERSITY	1942241351		
4	$222	450226558	ROCHMAN	STEPHEN	400 BURDICK EXPY E		MINOT	ND	58701	1427059724	34	Urology	635006	TRINITY MEDICAL GROUP	1083653752		
2	$222	450226909	CASAS-MELLEY	ADELA	801 BROADWAY NORTH		FARGO	ND	58102	1124093919	37	Pediatrics	7742001	SANFORD BROADWAY CLINIC	1184917924		
2	$222	264314533	MEANY	GAVIN	510 4TH ST S		FARGO	ND	58103	1962723825	26	Psychiatry (MD)	7444001	PSJ ACQUISITION LLC	1679709802		
2	$222	911770748	HINKLE	STEPHANIE	315 E CALEDONIA AVE		HILLSBORO	ND	58045	1871823021	97	Physician Assistant	3010	SANFORD HEALTH HILLSBORO	1942241351		
9	$222	450226909	BRIGGS	JILL	801 BROADWAY NORTH		FARGO	ND	58102	1730198946	11	Internal Medicine	7742001	SANFORD BROADWAY CLINIC	1184917924		
105	$221	911770748	HALDIS	THOMAS	801 BROADWAY NORTH		FARGO	ND	58102	1588681449	6	Cardivascular Disease	3001	SANFORD BROADWAY CLINIC	1942241351		
4	$221	450226558	LEE	KON HWEII	1 BURDICK EXPY W		MINOT	ND	58701	1437246337	13	Neurology	635032	TRINITY MEDICAL GROUP	1083653752		

2	$220	911770748	KARAZ	SAMY	2801 UNIVERSITY DR S		FARGO	ND	58103	1861556557	26	Psychiatry (MD)	3067	SANFORD 2801 MEDICAL BUI	1942241351		
4	$220	260709747	CHURCHILL	DANIEL	1190 W TURNPIKE AVE		BISMARCK	ND	58501	1740300110	63	Pharmacy	7033001	CHURCHILL PHARMACY INC	1639111230		
3	$220	450226700	MEEKER	CHRISTOPHE	300 N 7TH ST		BISMARCK	ND	58501	1922083583	72	Emergency Medicine	440001	SANFORD MEDICAL CENTER/B	1811941172		
2	$220	450227012	MORALEDA	ROBERTO	1031 7TH ST NE		DEVILS LAKE	ND	58301	1427057231	11	Internal Medicine	76001	THE MERCY HOSPITAL OF DE	1790751170		
2	$220	450227012	OVERVOLD	ANGEL	1031 7TH ST NE		DEVILS LAKE	ND	58301	1326057043	8	Family Practice	76001	THE MERCY HOSPITAL OF DE	1790751170		
2	$220	410724029	PANERU	RAM	323 S MINNESOTA ST		CROOKSTON	MN	56716	1740457902	8	Family Practice	5548001	RIVERVIEW HEALTHCARE ASS	1477525566		
5	$219	456013474	BARAGA	JOSEPH	301 MOUNTAIN ST E		CAVALIER	ND	58220	1730167073	30	Radiology	5633001	PEMBINA COUNTY HOSPITAL	1417093949		
13	$218	450260821	WHITE DRUG #58		208 MAIN STREET		ROLETTE	ND	58366	1568552404	54	Home Medical Equipment	7879001	WHITE DRUG #58	1568552404		
10	$218	911770748	MARSDEN	RICHARD	201 4TH AVE STE 1		ENDERLIN	ND	58027	1801814413	30	Radiology	3025	SANFORD HEALTH ENDERLIN	1942241351		
10	$217	450231183	WARMSBECKER	BRANDY	1213 15TH AVE W		WILLISTON	ND	58801	1306286448	50	Nurse Practitioner	711001	CRAVEN-HAGAN/MERCY MEDIC	1760549000		
9	$216	311824372	BOLEK	MEGAN	408 3RD ST NW		E GRAND FORKS	MN	56721	1205123957	65	Physical Therapy	6037005	ACHIEVE THERAPY EAST GRA	1003145376		
7	$216	263047434	ALLARD	AMY	4622 40TH AVE S		FARGO	ND	58104	1316171903	50	Nurse Practitioner	7174001	7 DAY CLINIC OSGOOD	1619123593		
22	$216	261484393	MALAZDREWICZ	EDWARD	1400 37TH AVE SW		MINOT	ND	58701	1467437673	64	Audiology	690001	PROFESSIONAL HEARING SER	1649216169		
1	$215	450226909	ADAMS	JULIE	1720 UNIVERSITY DR S		FARGO	ND	58103	1730107475	43	Certified Registered Nurse Anesthetist	7742004	SANFORD SOUTH UNIVERSITY	1184917924		
7	$214	262467056	THEEDE	CRAIG	116 N MAIN ST		CROOKSTON	MN	56716	1780975235	35	Chiropractor	7267001	ASPEN CHIROPRACTIC CLINI	1386801074		
5	$214	450310462	VERKUEHLEN	JENNIFER	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1255773867	50	Nurse Practitioner	9001	ALTRU HEALTH SYSTEM	1043309552		
37	$214	911770748	MUNOZ	JUAN	2400 32ND AVE S		FARGO	ND	58103	1194742635	73	Endocrinology	3014	SANFORD SOUTHPOINTE CLIN	1942241351		
3	$214	450282159	SCHWAN	BRUCE	101 E BROADWAY AVE		BISMARCK	ND	58501	1205990553	83	Licenses Addiction Counselor-Chemical Dependency	269001	HEARTVIEW FOUNDATION	1417000233		
2	$214	450253272	BIEL	ARDALIA	511 ELM AVE		LINTON	ND	58552	1811913379	97	Physician Assistant	430001	LINTON MEDICAL CENTER	1568471563		
1	$213	450413089	FORTNEY	AARON	204 W MAIN		BEULAH	ND	58523	1447297189	18	Opthalmology	6501001	DAKOTA EYE INSTITUTE	1962449835		
14	$213	450310462	TINKLER	JENNIFER	607 DEMERS AVE		E GRAND FORKS	MN	56721	1982790242	50	Nurse Practitioner	9040	ALTRU CLINIC EAST GRAND	1740621556		
1	$213	203311866	WALFORD	STEVEN	401 N 9TH STREET		BISMARCK	ND	58501	1477606317	43	Certified Registered Nurse Anesthetist	6669001	MISSOURI BASIN ANESTHESI	1952413585		
1	$213	203311866	KUENNEN	TIMOTHY	401 N 9TH STREET		BISMARCK	ND	58501	1639251143	43	Certified Registered Nurse Anesthetist	6669001	MISSOURI BASIN ANESTHESI	1952413585		
1	$213	203311866	KLEIN	KEVIN	401 N 9TH STREET		BISMARCK	ND	58501	1639222110	43	Certified Registered Nurse Anesthetist	6669001	MISSOURI BASIN ANESTHESI	1952413585		
14	$212	450448061	PROFESSIONAL PHARM		3124 COLORADO LANE #400		BISMARCK	ND	58503	1043243272	54	Home Medical Equipment	5489001	PROFESSIONAL PHARMACY	1043243272		
20	$212	911770748	FARKAS	SUSAN	929 CENTRAL AVE NW		E GRAND FORKS	MN	56721	1275568933	6	Cardivascular Disease	3055	SANFORD HEALTH 929 CENTR	1942241351		
2	$212	450226700	IWAMOTO	MATTHEW	414 N 7TH ST		BISMARCK	ND	58501	1073547014	30	Radiology	4046	SANFORD SEVENTH AND ROSS	1811941172		
15	$212	450310462	SUDA	AMY	1001 7TH ST		DEVILS LAKE	ND	58301	1942465851	50	Nurse Practitioner	9027	ALTRU CLINIC LAKE REGION	1861581373		
3	$211	450310462	CALIN	CRISTINA	4440 S WASHINGTON ST		GRAND FORKS	ND	58201	1811093255	8	Family Practice	9033	ALTRU PROFESSIONAL CENTE	1043309552		
16	$211	261175213	ESSENTIA HEALTH WA	ON/DME	275 11TH ST S		WAHPETON	ND	58075	1790965440	54	Home Medical Equipment	6885019	INNOVIS HEALTH, LLC DBA	1790965440		
22	$210	411856935	KUHN	DANIEL	209 6TH ST		HAWLEY	MN	56549	1053421859	35	Chiropractor	1428001	HAWLEY CHIROPRACTIC	1053421859		
2	$210	450226909	KALLENBACH	CHRISTOPHE	801 BROADWAY NORTH		FARGO	ND	58102	1649460551	30	Radiology	7742001	SANFORD BROADWAY CLINIC	1184917924		
8	$209	450310462	LONGLEY	DEBORAH	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1740269794	30	Radiology	9001	ALTRU HEALTH SYSTEM	1043309552		
4	$208	450310462	COLE	RONALD	1200 S COLUMBIA RD		GRAND FORKS	ND	58201	1558456806	43	Certified Registered Nurse Anesthetist	62001	ALTRU HOSPITAL	1154346161		
10	$208	450226700	GERVING	CARRIE	222 N 7TH ST		BISMARCK	ND	58501	1316259294	50	Nurse Practitioner	4001	SANFORD CLINIC	1811941172		
1	$208	450226909	SANDERS	JOHN	801 BROADWAY NORTH		FARGO	ND	58102	1164505608	37	Pediatrics	7742001	SANFORD BROADWAY CLINIC	1184917924		
3	$207	450310159	TRUMAN	SUSAN	164 WEST 13TH STREET		GRAFTON	ND	58237	1356320105	30	Radiology	282001	GRAFTON FAMILY CLINIC	1558423665		
1	$207	203311866	FILLER	LAURA	401 N 9TH STREET		BISMARCK	ND	58501	1679514194	43	Certified Registered Nurse Anesthetist	6669001	MISSOURI BASIN ANESTHESI	1952413585		
4	$205	450226419	WEICK	KERI	800 S MAIN AVE		RUGBY	ND	58368	1518288299	97	Physician Assistant	18001	GOOD SAMARITAN HOSPITAL	1588751325		
11	$204	410695598	KJAR	JASON	2400 ST FRANCIS DRIVE		BRECKENRIDGE	MN	56520	1902929557	67	Occupational Therapy	207001	ST FRANCIS MEDICAL CENTE	1891954574		
2	$203	450352912	SARGENT COUNTY AMB	CE	8TH AND MAIN ST N		MILNOR	ND	58060	1124118583	59	Ambulance Service	1881001	SARGENT COUNTY AMBULANCE	1124118583		
6	$202	270056777	SHANNON	HEIDI	607 TOWNER AVE		LARIMORE	ND	58251	1659635738	50	Nurse Practitioner	6163002	VALLEY COMMUNITY HEALTH	1255317905		
29	$202	452503969	WILLISTON BASIN EY	E ASSOCIAT	1213 15TH AVE W		WILLISTON	ND	58801	1225323504	58	Other Individual Supplier - Optometric Supplier	7751001	WILLISTON BASIN EYECARE	1225323504		
1	$202	450387077	DANNEWITZ	HOLLY	2808 17TH AVE S		GRAND FORKS	ND	58201	1598095697	62	Psychology	203001	LIPP CARLSON LOMMEN & WI	1043316961		
1	$202	450437653	LANGELLE	CHARYLE	1015 S BROADWAY STE 18		MINOT	ND	58701	1528093523	62	Psychology	238001	NORTH CENTRAL HUMAN SERV	1477592533		
8	$201	261175213	WESTON	PENNI	1702 UNIVERSITY DR S		FARGO	ND	58103	1134417140	50	Nurse Practitioner	6885031	INNOVIS HEALTH, LLC DBA	1255677084		
2	$201	450226558	LIEPKE	KAREN	1321 W DAKOTA PARKWAY		WILLISTON	ND	58801	1861534919	71	Certified Diabetic Educator	635039	TRINITY COMMUNITY CLINIC	1083653752		
17	$200	911770748	MARIANI	PAUL	801 BROADWAY NORTH		FARGO	ND	58102	1164597480	74	Infectious Diseases	3001	SANFORD BROADWAY CLINIC	1942241351		
2	$200	450351288	HALLIDAY RURAL FIR	OT	32 E MAIN ST		HALLIDAY	ND	58636	1003986092	59	Ambulance Service	2862001	HALLIDAY RURAL FIRE PROT	1003986092		
2	$200	350350397	TURTLE LAKE AMBULA	SV	220 5TH AVE NW		TURTLE LAKE	ND	58575	1730279720	59	Ambulance Service	1845001	TURTLE LAKE AMBULANCE SE	1730279720		
18	$200	460224598	LUNDELL	CAROLINE	305 S STATE ST		ABERDEEN	SD	57401	1457395345	30	Radiology	5518001	AVERA MEDICAL GROUP RADI	1437192721		
2	$199	450341800	HOPE AMBULANCE SER		502 STEELE AVE SE		HOPE	ND	58046	1952461949	59	Ambulance Service	2724001	HOPE FIRE PROTECTION DIS	1952461949		
13	$199	450226700	TELLO-SKJERSETH	CHRISTINA	801 21ST AVE SE		MINOT	ND	58701	1144480971	30	Radiology	4065	SANFORD HEALTH WALK-IN C	1811941172		
1	$199	450437651	WITTE-BAKKEN	JAN	2624 9TH AVE S		FARGO	ND	58103	1013001114	62	Psychology	100001	SOUTHEAST HUMAN SERVICE	1932146941		
2	$199	450226700	KLOP	KRISSONDRA	300 N 7TH ST		BISMARCK	ND	58501	1205088515	8	Family Practice	440001	SANFORD MEDICAL CENTER/B	1811941172		
2	$199	261175213	NAGEL	JOAN	1702 UNIVERSITY DR S		FARGO	ND	58103	1306123724	68	Licensed Registered Dietitian	6885031	INNOVIS HEALTH, LLC DBA	1255677084		
3	$198	410724029	FASHORO	OLATUBOSUN	323 S MINNESOTA ST		CROOKSTON	MN	56716	1700823598	11	Internal Medicine	5548006	RIVERVIEW FAMILY PRACTIC	1720009343		
4	$198	410724029	KANTEN	ERIK	323 S MINNESOTA ST		CROOKSTON	MN	56716	1679593206	8	Family Practice	5548016	RIVERVIEW SPECIALTY CLIN	1487944898		
2	$197	412139234	SORENSEN	ROBYN	116 2 AVE NW		MANDAN	ND	58554	1164755732	63	Pharmacy	6403001	LBG PHARMACY DBA THE MED	1265504054		
2	$197	450226423	BOREN	MARGARET	409 7TH ST S		FARGO	ND	58103	1821005471	83	Licenses Addiction Counselor-Chemical Dependency	283018	THE VILLAGE FAMILY SERVI	1952679318		
2	$197	237288053	PARSHALL AMBULANCE	VI	116 1ST AVE NE		PARSHALL	ND	58770	1447357793	59	Ambulance Service	2897001	PARSHALL AMBULANCE SERVI	1447357793		
7	$196	456013474	TUMMALA	ANURADHA	301 MOUNTAIN ST E		CAVALIER	ND	58220	1972582732	30	Radiology	5633001	PEMBINA COUNTY HOSPITAL	1417093949		
11	$196	450260821	JAHN	LEMONT	148 S CENTRAL AVE		VALLEY CITY	ND	58072	1447560164	63	Pharmacy	6211001	WHITE DRUG #60	1194815035		
13	$196	450260565	B & B DRUG DME		#20 BURDICK EXPY W		MINOT	ND	58701	1326059981	54	Home Medical Equipment	4291001	B & B DRUG INC DBA B&B N	1326059981		
3	$195	820558836	OVERVOLD	ANGEL	905 MAIN ST		LISBON	ND	58054	1326057043	8	Family Practice	5840005	LISBON AREA HEALTH SERVI	1811168958		
1	$195	911770748	WAHL	RONICA	1245 WASHINGTON AVE		DETROIT LAKES	MN	56501	1770760605	50	Nurse Practitioner	3007	SANFORD HEALTH DETROIT L	1942241351		

3	$195	911770748	JYSTAD	PHILIP	904 5TH AVE NE		JAMESTOWN	ND	58401	1447213202	8	Family Practice	3005	SANFORD HEALTH JAMESTOWN	1942241351		
1	$195	203311866	MATHIEU	MARYSE	401 N 9TH STREET		BISMARCK	ND	58501	1700971199	5	Anesthesiology (MD)	6669001	MISSOURI BASIN ANESTHESI	1952413585		
1	$194	461068850	HYLAND	GLEN	311 N MANDAN ST STE 1		BISMARCK	ND	58501	1578679130	32	Radiation Therapy	7988001	INTEGRATIVE MEDICAL SOLU	0		
16	$194	731645038	ERICKSON	ARTHUR	2400 SW 10TH ST		MINOT	ND	58701	1710948872	41	Optometrist	5608001	ARTHUR W ERICKSON OD	1710948872		
10	$194	450226700	FOGARTY	EDWARD	715 E BROADWAY AVE		BISMARCK	ND	58501	1902826340	30	Radiology	4050	SANFORD SEVENTH AND BROA	1811941172		
5	$193	450226711	STEWART	KATHLEEN	900 E BROADWAY AVE		BISMARCK	ND	58501	1316081946	68	Licensed Registered Dietitian	92001	ST ALEXIUS MEDICAL CENTE	1629121074		
18	$192	261990629	TARA'S THRIFTY WHI		610 MAIN AVENUE		OAKES	ND	58474	1184892523	54	Home Medical Equipment	7478001	TARA'S THRIFTY WHITE LLC	1184892523		
1	$192	450448386	SCHMIDT	CLORIS	430 E SWEET AVE		BISMARCK	ND	58504	1346493459	43	Certified Registered Nurse Anesthetist	1052001	DAKOTA SURGERY & LASER C	1952348013		
15	$192	461473718	BYRD	REX	320 BOOTH AVE		LARIMORE	ND	58251	1073659678	35	Chiropractor	7955001	LARIMORE CHIROPRACTIC CL	1376888354		
10	$191	911770748	GARCIA	LUIS	1717 S UNIVERSITY DRIVE		FARGO	ND	58103	1104844752	2	General Surgery	3084	SANFORD 1717 MEDICAL BUI	1942241351		
1	$191	450311650	DUCKWITZ	NICOLE	204 3RD AVE NW		MANDAN	ND	58554	1497981435	42	Dentist	7232001	DENTAL ASSOCIATES PC	1700921913		
19	$191	450333787	TURTLE LAKE REXALL	G	218 MAIN ST		TURTLE LAKE	ND	58575	1780699314	63	Pharmacy	4341001	TURTLE LAKE REXALL DRUG	1780699314		
4	$191	450226700	MILLER	STEPHANIE	300 N 7TH ST		BISMARCK	ND	58501	1104024488	13	Neurology	440001	SANFORD MEDICAL CENTER/B	1811941172		
8	$190	460543563	SCHLITTENHARDT	MELANIE	2315 JACKSON AVE		BISMARCK	ND	58501	1174561617	50	Nurse Practitioner	7919001	SCHLITTENHARDT, MELANIE	1699024588		
44	$190	260562958	JOHNSON EYECARE PC		1525 31 AVE SW SUITE E		MINOT	ND	58701	1073708533	58	Other Individual Supplier - Optometric Supplier	7019001	JOHNSON EYECARE AND EYEW	1073708533		
4	$190	911770748	KVISTAD	BONNIE	1720 UNIVERSITY DR S		FARGO	ND	58103	1659491090	37	Pediatrics	3904	SANFORD SOUTH UNIVERSITY	1942241351		
2	$190	410724029	UPDIKE	MEGHAN	323 S MINNESOTA ST		CROOKSTON	MN	56716	1124368154	50	Nurse Practitioner	5548016	RIVERVIEW SPECIALTY CLIN	1487944898		
3	$189	450226909	LUNDEEN	MARK	520 CHAUTAUQUA BLVD		VALLEY CITY	ND	58072	1730130493	20	Orthopedic Surgery	7742016	SANFORD HEALTH VALLEY CI	1184917924		
3	$189	261175213	JUN	HONG	3000 32ND AVE S		FARGO	ND	58103	1689713620	2	General Surgery	6885030	INNOVIS HEALTH, LLC DBA	1578907655		
1	$189	450226700	TELLO-SKJERSETH	CHRISTINA	2615 FAIRWAY ST		DICKINSON	ND	58601	1144480971	30	Radiology	4008	SANFORD HEALTH DICKINSON	1811941172		
26	$188	911770748	CLARDY	DAVID	904 5TH AVE NE		JAMESTOWN	ND	58401	1063430791	6	Cardivascular Disease	3005	SANFORD HEALTH JAMESTOWN	1942241351		
9	$188	450433194	NESS	ANGELA	416 KUNDERT ST		TURTLE LAKE	ND	58575	1295747996	35	Chiropractor	572005	SOUTHRIDGE CHIROPRACTIC	1205848108		
3	$188	261175213	BELIZARIO	FRANCISCO	2430 20TH ST SW		JAMESTOWN	ND	58401	1942398375	4	Otology, Laryngology, Rhinology	6885018	INNOVIS HEALTH, LLC DBA	1073793725		
14	$186	450280143	HAZEN DRUG		30 W MAIN ST		HAZEN	ND	58545	1710024807	54	Home Medical Equipment	4570001	HAZEN DRUG	1710024807		
7	$186	460446760	IWERKS	BRYCE	310 S PENN ST SUITE 201		ABERDEEN	SD	57401	1326024209	2	General Surgery	7271001	ABERDEEN SURGICAL ASSOCI	1629057989		
2	$185	911770748	GUNDERSON	AARON	2701 13TH AVE S		FARGO	ND	58103	1922026574	37	Pediatrics	3015	SANFORD CHILDRENS SOUTHW	1942241351		
2	$185	911770748	KARY	SHELBY	1720 UNIVERSITY DR S		FARGO	ND	58103	1730376633	50	Nurse Practitioner	3904	SANFORD SOUTH UNIVERSITY	1942241351		
4	$184	371485730	ELEFSON	RICHARD	905 E INTERSTATE AVE		BISMARCK	ND	58503	1598827958	83	Licenses Addiction Counselor-Chemical Dependency	247001	NEW FREEDOM CENTER	1437283587		
1	$184	203311866	CAVE	JEFFREY	401 N 9TH STREET		BISMARCK	ND	58501	1730109885	5	Anesthesiology (MD)	6669001	MISSOURI BASIN ANESTHESI	1952413585		
10	$184	450260821	MOCH	JACOB	320 10 ST SE		JAMESTOWN	ND	58401	1457634875	63	Pharmacy	4363001	WHITE DRUG #15	1497844005		
2	$184	450226423	ERICKSON	PAMLA	409 7TH ST S		FARGO	ND	58103	1528391679	83	Licenses Addiction Counselor-Chemical Dependency	283018	THE VILLAGE FAMILY SERVI	1952679318		
2	$184	270309152	SULLIVAN	DAREN	1231 27TH ST S STE C		FARGO	ND	58103	1063649671	42	Dentist	7502001	TRONSGARD & SULLIVAN, DD	1578791117		
3	$184	450231183	DONOVAN	CHARLES	1301 15TH AVE W		WILLISTON	ND	58801	1124077912	30	Radiology	711004	MERCY RADIOLOGY SERVICES	1629234257		
7	$184	911770748	MARSDEN	RICHARD	336 MAIN ST		FORMAN	ND	58032	1801814413	30	Radiology	3069	SANFORD HEALTH FORMAN CL	1942241351		
247	$183	911770748	GROSS	GERALD	820 4TH ST N		FARGO	ND	58102	1013935667	75	Oncology	3030	SANFORD ROGER MARIS CANC	1942241351		
1	$183	270056777	GETZ	JANEL	301 HWY 15		NORTHWOOD	ND	58267	1982782090	68	Licensed Registered Dietitian	6163001	VALLEY COMMUNITY HEALTH	1356327001		
12	$183	911770748	GRANLUND	TERRY	3838 12TH AVE N		FARGO	ND	58102	1447271671	50	Nurse Practitioner	587001	SANFORD HEALTH OCCUPATIO	1952323974		
8	$183	743105365	DESCHAMP	CAMERON	3900 S BROADWAY		MINOT	ND	58701	1962518779	41	Optometrist	6284001	DESCHAMP, CAMERON, OD, P	1962518779		
3	$183	450310462	MCBRIDE	ELIZABETH	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1992045835	43	Certified Registered Nurse Anesthetist	9001	ALTRU HEALTH SYSTEM	1043309552		
4	$183	261175213	KNUTSON	CRYSTAL	3000 32ND AVE S		FARGO	ND	58103	1679724041	97	Physician Assistant	6885030	INNOVIS HEALTH, LLC DBA	1578907655		
11	$183	450226558	VERHEY	JEFFREY	1 BURDICK EXPY W		MINOT	ND	58701	1962577486	11	Internal Medicine	635032	TRINITY MEDICAL GROUP	1083653752		
3	$183	450226558	RIME	HEDI	400 BURDICK EXPY E		MINOT	ND	58701	1144391608	50	Nurse Practitioner	635006	TRINITY MEDICAL GROUP	1083653752		
2	$183	450226700	HAALAND	ROBIN	300 N 7TH ST		BISMARCK	ND	58501	1861590507	26	Psychiatry (MD)	440001	SANFORD MEDICAL CENTER/B	1811941172		
28	$183	450410216	GATEWAY PHARMACY		500 BURLINGTON ST SE		MANDAN	ND	58554	1497847776	63	Pharmacy	4666001	GATEWAY PHARMACY	1497847776		
2	$182	450437648	HULTIN	DAWN	1237 W DIVIDE AVE STE 5		BISMARCK	ND	58501	1255369393	83	Licenses Addiction Counselor-Chemical Dependency	241001	WEST CENTRAL HUMAN SERVI	1649226713		
2	$182	501548216	BERDAHL	LINDA	1705 4TH AVE NW		MINOT	ND	58703	1306904073	83	Licenses Addiction Counselor-Chemical Dependency	1469001	BERDAHL, LINDA, MS, LAC,	1306904073		
2	$182	911770748	BLEHM	JULIE	801 BROADWAY NORTH		FARGO	ND	58102	1760409767	11	Internal Medicine	3001	SANFORD BROADWAY CLINIC	1942241351		
15	$181	870738986	DRS SCHINDLER & DE		204 W CENTURY AVE		BISMARCK	ND	58503	1609894054	58	Other Individual Supplier - Optometric Supplier	487001	DRS SCHINDLER & DEIS	1609894054		
14	$181	450433379	DRS KREIN AND MOEN		404 HIGHWAY 2 E		DEVILS LAKE	ND	58301	1265539639	58	Other Individual Supplier - Optometric Supplier	538001	DRS KREIN & MOEN, PC	1265539639		
4	$180	450419100	STIGEN	SARAH	509 25TH AVE N		FARGO	ND	58102	1982822276	51	Medical Supply Co with Orthotist	528001	VALLEY CHRISTIAN COUNSEL	1467559427		
1	$179	450226909	HUBRIG	JONI	100 4TH ST S		FARGO	ND	58103	1821372947	80	Clinical Social Worker	7742006	SANFORD PROFESSIONAL BUI	1184917924		
2	$179	466000010	ABERDEEN ADVANCED		123 S LINCOLN STREET		ABERDEEN	SD	57401	1588655179	59	Ambulance Service	6584001	ABERDEEN ADVANCED	1588655179		
3	$179	450437652	DAVIS	DEBORAH	151 S 4TH ST STE 401		GRAND FORKS	ND	58201	1083646988	83	Licenses Addiction Counselor-Chemical Dependency	242001	NORTHEAST HUMAN SERVICE	1366496341		
10	$179	861123162	BOCK	TANA	310 N 10TH ST		BISMARCK	ND	58501	1528409505	50	Nurse Practitioner	6459001	ST ALEXIUS HEART & LUNG	1194823021		
2	$179	870694180	ALBRECHT	ANN	701 3RD STREET NW		JAMESTOWN	ND	58401	1962536599	66	Speech Therapy	5919001	ANNE CARLSEN CENTER	1598930109		
8	$179	261175213	ALMANASEER	YASSAR	275 11TH ST S		WAHPETON	ND	58075	1467585349	6	Cardivascular Disease	6885019	INNOVIS HEALTH, LLC DBA	1790965440		
3	$179	450226558	KINDY	ALEXANDRE	1321 W DAKOTA PARKWAY		WILLISTON	ND	58801	1437246303	20	Orthopedic Surgery	635039	TRINITY COMMUNITY CLINIC	1083653752		
2	$179	450308484	SHELLMAN	LAURA	710 N WELO ST		TIOGA	ND	58852	1891040812	50	Nurse Practitioner	327001	TIOGA MEDICAL CENTER	1245296078		
2	$178	450306787	KHOKHA	INDER	909 2ND ST		LANGDON	ND	58249	1225089949	2	General Surgery	54001	CAVALIER COUNTY MEMORIAL	1750328662		
1	$178	271167415	STEWART	KATIE	210 WEST CENTURY AVENUE		BISMARCK	ND	58503	1790980340	42	Dentist	7299001	SCHINDLER & STEWART FAMI	1497950059		
12	$178	460363581	OLSON	JAMES	310 8TH AVE NW		ABERDEEN	SD	57401	1548283229	41	Optometrist	8108001	VISION CARE ASSOCIATES,	1265502264		
4	$178	450340688	JORGENSON	TARA	1000 HIGHWAY 12		HETTINGER	ND	58639	1841355039	88	#N/A	367001	WEST RIVER HEALTH SERVIC	1174606271		
1	$178	450314527	SIEGLER	ALLEN	300 13 AVE W STE 1		DICKINSON	ND	58601	1689600868	80	Clinical Social Worker	235001	BADLANDS HUMAN SERVICE C	1124072525		
1	$178	450314527	WALLER	LINDA	300 13 AVE W STE 1		DICKINSON	ND	58601	1407888621	80	Clinical Social Worker	235001	BADLANDS HUMAN SERVICE C	1124072525		
1	$178	410843966	TOUTGES	CHERYL	1010 32ND AVE S		MOORHEAD	MN	56560	1952358004	80	Clinical Social Worker	288001	LAKELAND MENTAL HEALTH C	1366480287		
1	$178	260558529	CLARK	GREGORY	118 BROADWAY STE 810		FARGO	ND	58102	1689608952	80	Clinical Social Worker	7056001	CLARK, GREGORY LICSW	1689608952		

12	$178	416011702	MAYO CLINIC		200 1ST STREET SW		ROCHESTER	MN	55905	1922074434	1	General Practice	3681001	MAYO CLINIC	1922074434		
24	$177	450310159	ARSENAULT	TODD	164 WEST 13TH STREET		GRAFTON	ND	58237	1902890726	30	Radiology	282001	GRAFTON FAMILY CLINIC	1558423665		
4	$177	820558836	MITZEL	FREDRICK	905 MAIN ST		LISBON	ND	58054	1295776714	8	Family Practice	5840005	LISBON AREA HEALTH SERVI	1811168958		
4	$177	460426548	WATT	TIM	3 4TH STREET EAST		WILLISTON	ND	58801	1477512762	14	Neurological Surgery	5788002	NEUROSURGICAL & SPINAL S	1538128491		
18	$176	911770748	HOCKETT	STEPHAINE	801 BROADWAY NORTH		FARGO	ND	58102	1982626479	50	Nurse Practitioner	3001	SANFORD BROADWAY CLINIC	1942241351		
14	$176	260381396	WINKLER	BARRY	803 S MAIN ST		ABERDEEN	SD	57401	1568551588	35	Chiropractor	7177001	WINKLER CHIROPRACTIC CLI	1992904213		
2	$176	260012477	FRONK	KENT	6712 HIGHWAY 200 E		CARRINGTON	ND	58421	1306937941	41	Optometrist	686008	PROFESSIONAL EYECARE CEN	1699866244		
54	$176	911770748	NEWMAN	DAVID	2400 32ND AVE S		FARGO	ND	58103	1770759227	73	Endocrinology	3014	SANFORD SOUTHPOINTE CLIN	1942241351		
2	$176	450308484	PANERU	RAM	710 N WELO ST		TIOGA	ND	58852	1740457902	8	Family Practice	327001	TIOGA MEDICAL CENTER	1245296078		
16	$175	911770748	DYKE	CORNELIUS	801 BROADWAY NORTH		FARGO	ND	58102	1245226083	2	General Surgery	3001	SANFORD BROADWAY CLINIC	1942241351		
3	$175	450226558	DREXLER	JEFFREY	407 3RD STREET SE		MINOT	ND	58701	1538145966	27	Psychiatry, Neurology	635005	TRINITY MEDICAL GROUP	1871532598		
3	$175	450226700	ALDERFER	JEREMY	715 E BROADWAY AVE		BISMARCK	ND	58501	1689823932	4	Otology, Laryngology, Rhinology	4050	SANFORD SEVENTH AND BROA	1811941172		
7	$174	462370417	SCOTT	CARLYLE	232 W FRONT AVE		BISMARCK	ND	58504	1265877492	35	Chiropractor	8056001	HEALTHSOURCE OF BISMARCK	1093150294		
30	$173	450226558	NAIDU	SRIDHAR	400 BURDICK EXPY E		MINOT	ND	58701	1629236690	30	Radiology	635006	TRINITY MEDICAL GROUP	1083653752		
10	$173	450310159	WEISENSEE	ANNE	164 WEST 13TH STREET		GRAFTON	ND	58237	1992784755	30	Radiology	282001	GRAFTON FAMILY CLINIC	1558423665		
1	$171	911770748	GROVE	DENAE	929 CENTRAL AVE NW		E GRAND FORKS	MN	56721	1942227806	68	Licensed Registered Dietitian	3055	SANFORD HEALTH 929 CENTR	1942241351		
1	$171	450226909	WILLIAMS	MICHELLE	4000 28TH AVE S		MOORHEAD	MN	56560	1851313449	68	Licensed Registered Dietitian	7742014	SANFORD MOORHEAD CLINIC	1184917924		
12	$171	450260821	ROEHRICH	LENEIKA	117 N 5TH ST		BISMARCK	ND	58501	1912160474	63	Pharmacy	4652001	WHITE DRUG #5	1760572606		
62	$170	911770748	PHADKE	GAUTAM	801 BROADWAY NORTH		FARGO	ND	58102	1396997649	39	Nephrology	3001	SANFORD BROADWAY CLINIC	1942241351		
17	$170	450310159	DRAKE	DAVID	164 WEST 13TH STREET		GRAFTON	ND	58237	1528046612	30	Radiology	282001	GRAFTON FAMILY CLINIC	1558423665		
7	$169	911770748	PHADKE	GAUTAM	929 CENTRAL AVE NW		E GRAND FORKS	MN	56721	1396997649	39	Nephrology	3055	SANFORD HEALTH 929 CENTR	1942241351		
41	$169	261175213	TIWARI	SUMIT	3000 32ND AVE S		FARGO	ND	58103	1215048574	11	Internal Medicine	6885030	INNOVIS HEALTH, LLC DBA	1578907655		
4	$169	450226419	SCHONEBERG	STEVEN	800 S MAIN AVE		RUGBY	ND	58368	1841398666	8	Family Practice	18001	GOOD SAMARITAN HOSPITAL	1588751325		
29	$169	450226711	HAHN	JASON	1177 BORDER LANE		WASHBURN	ND	58577	1376721704	65	Physical Therapy	1298001	WASHBURN FAMILY CLINIC	1831267236		
1	$168	450310462	LARSON	TARA	1200 S COLUMBIA RD		GRAND FORKS	ND	58201	1689893984	68	Licensed Registered Dietitian	62001	ALTRU HOSPITAL	1154346161		
10	$168	261175213	ALMER	MARIN	275 11TH ST S		WAHPETON	ND	58075	1790955599	64	Audiology	6885019	INNOVIS HEALTH, LLC DBA	1790965440		
1	$167	450310159	MYERS	JANE	164 WEST 13TH STREET		GRAFTON	ND	58237	1427103183	71	Certified Diabetic Educator	282001	GRAFTON FAMILY CLINIC	1558423665		
2	$167	450310462	KIRNUS	MIKHAIL	1001 7TH ST		DEVILS LAKE	ND	58301	1922272228	6	Cardivascular Disease	9027	ALTRU CLINIC LAKE REGION	1861581373		
11	$167	263628005	MEDICINE SHOPPE 16	BA SELZLER	722 LINCOLN AVE		HARVEY	ND	58341	1629222542	54	Home Medical Equipment	7366001	MEDICINE SHOPPE 1677 DBA	1629222542		
16	$166	450447382	ESLINGER	MARK	1301 E FRONT AVE		BISMARCK	ND	58504	1982767232	35	Chiropractor	730001	ESLINGER CHIROPRACTIC	1891853172		
15	$166	371616627	LVCTR, PC DBA LIFE	VISION CE	2900 S COLUMBIA RD		GRAND FORKS	ND	58201	1720385263	58	Other Individual Supplier - Optometric Supplier	7686001	LVCTR, PC DBA LIFETIME V	1720385263		
2	$166	450226558	CADWALADER	ANN	1 BURDICK EXPY W		MINOT	ND	58701	1922196351	37	Pediatrics	635032	TRINITY MEDICAL GROUP	1083653752		
1	$165	203311866	TOWN	JERRY	401 N 9TH STREET		BISMARCK	ND	58501	1841343191	43	Certified Registered Nurse Anesthetist	6669001	MISSOURI BASIN ANESTHESI	1952413585		
8	$165	200880846	CASSELTON DRUG INC	ARTHUR DR	340 MAIN ST		ARTHUR	ND	58006	1982655049	54	Home Medical Equipment	2975002	ARTHUR DRUG	1982655049		
23	$165	911770748	KALLAMADI	REKHA	2400 32ND AVE S		FARGO	ND	58103	1437483823	11	Internal Medicine	3014	SANFORD SOUTHPOINTE CLIN	1942241351		
3	$164	450310462	HENDERSON	CHRISTOPHE	1200 S COLUMBIA RD		GRAND FORKS	ND	58201	1669766283	1	General Practice	62001	ALTRU HOSPITAL	1154346161		
10	$164	450226700	BLANCHARD	JOEL	801 21ST AVENUE SE		MINOT	ND	58701	1356368021	8	Family Practice	4052	SANFORD HEALTH OCCUPATIO	1669524351		
2	$164	450437653	VAUDT	CHERYL	1015 S BROADWAY STE 18		MINOT	ND	58701	1720399454	80	Clinical Social Worker	238001	NORTH CENTRAL HUMAN SERV	1477592533		
12	$163	450410216	JOHNSON	HEATHER	500 BURLINGTON ST SE		MANDAN	ND	58554	1316179567	63	Pharmacy	4666001	GATEWAY PHARMACY	1497847776		
13	$163	450450745	VALLEY BONE & JOIN	INIC	3035 DEMERS AVE		GRAND FORKS	ND	58201	1033180153	54	Home Medical Equipment	112001	VALLEY BONE AND JOINT CL	1033180153		
1	$163	450226700	ENZMINGER	NICOLE	515 EAST BROADWAY AVE		BISMARCK	ND	58501	1063500791	68	Licensed Registered Dietitian	4066	SANFORD 5TH & BROADWAY C	1811941172		
18	$163	911770748	FISH	JONATHAN	1720 UNIVERSITY DR S		FARGO	ND	58103	1629117890	30	Radiology	3904	SANFORD SOUTH UNIVERSITY	1942241351		
8	$163	460224598	ERNST	VICKIE	240 MAIN ST		ELLENDALE	ND	58436	1134159791	97	Physician Assistant	1000001	AVERA ST LUKES DBA AVERA	1760423057		
4	$162	450255914	OLIVEIRA-FILHO	EDGAR	612 CENTER AVE N		ASHLEY	ND	58413	1376565903	8	Family Practice	343001	AMC CLINIC INC	1851335830		
17	$162	911770748	MCNELIS	JOSEPH	801 BROADWAY NORTH		FARGO	ND	58102	1538179734	10	Gastronenterology	3001	SANFORD BROADWAY CLINIC	1942241351		
3	$162	450450254	HILDEBRANDT-FOLSKE	CARLA	600 N 9TH ST		BISMARCK	ND	58501	1487741484	43	Certified Registered Nurse Anesthetist	1261001	BISMARCK SURGICAL ASSOCI	1487814356		
2	$161	450357807	BRIDGEFORD	CHARLES	117 N WASHINGTON		GRAND FORKS	ND	58203	1245318625	42	Dentist	7345001	BRIDGEFORD, CHARLES, DDS	1245318625		
8	$161	261175213	GARRAHY	SHAUNA	1702 UNIVERSITY DR S		FARGO	ND	58103	1447504006	65	Physical Therapy	6885031	INNOVIS HEALTH, LLC DBA	1255677084		
3	$160	456013474	KNUTZEN	ANDERS	301 MOUNTAIN ST E		CAVALIER	ND	58220	1912985037	30	Radiology	5633001	PEMBINA COUNTY HOSPITAL	1417093949		
10	$160	460224598	LENTER	LESLIE	305 S STATE ST		ABERDEEN	SD	57401	1245274109	30	Radiology	5518001	AVERA MEDICAL GROUP RADI	1437192721		
3	$158	450226419	HARDER	TAMMIE	215 MAIN ST SE		DUNSEITH	ND	58329	1477651628	50	Nurse Practitioner	18068	HEART OF AMERICA JOHNSON	1568633865		
10	$158	911770748	MEYER	SHANE	801 BROADWAY NORTH		FARGO	ND	58102	1154675577	97	Physician Assistant	3001	SANFORD BROADWAY CLINIC	1942241351		
6	$157	911770748	REIL	TODD	801 BROADWAY NORTH		FARGO	ND	58102	1154355311	23	Peripheral Vascular Diseases or Surgery	3001	SANFORD BROADWAY CLINIC	1942241351		
4	$156	450413089	SAMSON	THOMAS	200 S 5TH ST		BISMARCK	ND	58504	1639117625	41	Optometrist	278001	DAKOTA EYE INSTITUTE	1962449835		
4	$156	911770748	WOMELDORPH	CRAIG	801 BROADWAY NORTH		FARGO	ND	58102	1649274135	11	Internal Medicine	3001	SANFORD BROADWAY CLINIC	1942241351		
3	$156	263047434	ZINK	JAMIE	1517 32ND AVE S		FARGO	ND	58103	1235325549	97	Physician Assistant	7174002	7 DAY CLINIC SOUTH FARGO	1851547160		
1	$156	450226909	ADAMS	JULIE	801 BROADWAY NORTH		FARGO	ND	58102	1730107475	43	Certified Registered Nurse Anesthetist	7742001	SANFORD BROADWAY CLINIC	1184917924		
2	$156	450308484	OLIVEIRA-FILHO	EDGAR	710 N WELO ST		TIOGA	ND	58852	1376565903	8	Family Practice	327001	TIOGA MEDICAL CENTER	1245296078		
5	$156	870694180	TRAUTMAN	WHITNEY	701 3RD STREET NW		JAMESTOWN	ND	58401	1730435850	65	Physical Therapy	5919001	ANNE CARLSEN CENTER	1598930109		
74	$156	911770748	MCDOWELL	CHRISTINA	621 DEMERS AVE		E GRAND FORKS	MN	56721	1316153737	6	Cardivascular Disease	3080	SANFORD HEALTH 621 DEMER	1942241351		
8	$155	450260821	HULM	LEANNE	121 N BROADWAY		LINTON	ND	58552	1588801344	63	Pharmacy	7628001	WHITE DRUG	1548572076		
3	$155	450310462	STRAND	JAMES	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1699861955	43	Certified Registered Nurse Anesthetist	9001	ALTRU HEALTH SYSTEM	1043309552		
1	$155	450226700	PATHAK	PREM	414 N 7TH ST		BISMARCK	ND	58501	1417187907	26	Psychiatry (MD)	4046	SANFORD SEVENTH AND ROSS	1811941172		
1	$155	450226429	OLIN	BRUCE	30 7TH ST W		DICKINSON	ND	58601	1134116775	11	Internal Medicine	95001	ST JOSEPHS HOSPITAL AND	1992947956		
1	$155	450226558	CHAN	YIESHAN	1 BURDICK EXPRESSWAY W		MINOT	ND	58701	1467644773	5	Anesthesiology (MD)	635031	TRINITY MEDICAL GROUP AN	1083653752		
3	$155	450222079	KETTERLING	MARCIA	603 EAST ST N		ELGIN	ND	58533	1396895942	50	Nurse Practitioner	6043002	JACOBSON MEMORIAL ELGIN	1871691519		

3	$154	450226419	HICKS	ROBERT	800 S MAIN AVE		RUGBY	ND	58368	1700945474	72	Emergency Medicine	18001	GOOD SAMARITAN HOSPITAL	1588751325				
1	$154	450226909	BLANCHARD	JANET	801 BROADWAY NORTH		FARGO	ND	58102	1952369316	50	Nurse Practitioner	7742001	SANFORD BROADWAY CLINIC	1184917924				
1	$154	450310462	WRAY	GARTH	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1992891253	43	Certified Registered Nurse Anesthetist	9001	ALTRU HEALTH SYSTEM	1043309552				
3	$154	450310462	GREEK	GREGORY	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1376634386	8	Family Practice	9001	ALTRU HEALTH SYSTEM	1043309552				
3	$154	450227311	GETZ	JANEL	800 4TH ST N		CARRINGTON	ND	58421	1982782090	68	Licensed Registered Dietitian	60001	CARRINGTON HEALTH CENTER	1205807013				
2	$153	460492115	SKARI	HEATHER	4110 40 ST S SUITE 103		FARGO	ND	58104	1376665265	42	Dentist	7620001	SKARI, HEATHER L, DDS, P	1376665265				
19	$153	450422119	GREAT PLAINS CLINI		33 9TH ST W		DICKINSON	ND	58601	1720075377	54	Home Medical Equipment	231001	GREAT PLAINS CLINIC, PC	1720075377				
1	$153	450226729	MIDDLETON	DEBRA	325 E BREWSTER ST		HARVEY	ND	58341	1427073188	50	Nurse Practitioner	24001	ST ALOISIUS MEDICAL CENT	1457477218				
6	$152	261175213	NACHATILO	NICHOLE	3000 32ND AVE S		FARGO	ND	58103	1184988438	50	Nurse Practitioner	6885030	INNOVIS HEALTH, LLC DBA	1578907655				
2	$152	911770748	HAGER	WENDY	904 5TH AVE NE		JAMESTOWN	ND	58401	1962797902	71	Certified Diabetic Educator	3005	SANFORD HEALTH JAMESTOWN	1942241351				
4	$152	450231181	LARSON	RICHARD	2422 20TH ST SW		JAMESTOWN	ND	58401	1063512895	8	Family Practice	124001	JAMESTOWN REGIONAL MEDIC	1821044652				
1	$152	450226909	NOONAN	MELANIE	801 BROADWAY NORTH		FARGO	ND	58102	1619238078	50	Nurse Practitioner	7742001	SANFORD BROADWAY CLINIC	1184917924				
18	$151	911770748	BRANDT	CHRISTINE	2400 32ND AVE S		FARGO	ND	58103	1669728929	97	Physician Assistant	3014	SANFORD SOUTHPOINTE CLIN	1942241351				
2	$151	450231183	OSWOOD	MARK	1301 15TH AVE W		WILLISTON	ND	58801	1417904558	30	Radiology	711004	MERCY RADIOLOGY SERVICES	1629234257				
2	$151	450310462	BOWMAN SEITZ	TARA	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1215999222	30	Radiology	9001	ALTRU HEALTH SYSTEM	1043309552				
3	$151	450310462	FUNK	PETER	4440 S WASHINGTON ST		GRAND FORKS	ND	58201	1386735397	8	Family Practice	9033	ALTRU PROFESSIONAL CENTE	1043309552				
2	$151	450226700	AMUNDSON	DONNA	222 N 7TH ST		BISMARCK	ND	58501	1972691236	71	Certified Diabetic Educator	4001	SANFORD CLINIC	1811941172				
1	$151	410724029	KANTEN	ERIK	323 S MINNESOTA ST		CROOKSTON	MN	56716	1679593206	8	Family Practice	5548006	RIVERVIEW FAMILY PRACTIC	1720009343				
11	$151	450231183	MYHRA-BLOOM	KARLA	1301 15TH AVE W		WILLISTON	ND	58801	1700831690	30	Radiology	711004	MERCY RADIOLOGY SERVICES	1629234257				
12	$151	450226909	HOBAN	ALISSA	2400 32ND AVE S		FARGO	ND	58103	1861830275	50	Nurse Practitioner	7742008	SANFORD SOUTHPOINTE CLIN	1184917924				
3	$151	510183396	CAMERON	LISA	4227 9TH AVE SW		FARGO	ND	58103	1154670610	83	Licenses Addiction Counselor-Chemical Dependency	514001	SHAREHOUSE, INC	1205903481				
10	$150	450260821	FICEK	KENNETH	117 N 5TH ST		BISMARCK	ND	58501	1679823942	63	Pharmacy	4652001	WHITE DRUG #5	1760572606				
10	$150	450369650	ABRAHAMSON	EARL	446 18TH ST W STE 2		DICKINSON	ND	58601	1952522336	63	Pharmacy	3205001	ND PHARMACY INC	1386680767				
2	$150	450226429	QUAMMEN	ALEXIS	30 7TH ST W		DICKINSON	ND	58601	1629302146	68	Licensed Registered Dietitian	95001	ST JOSEPHS HOSPITAL AND	1992947956				
2	$150	450231183	PHILPOT	TAMARA	1301 15TH AVE W		WILLISTON	ND	58801	1629311766	68	Licensed Registered Dietitian	659001	MERCY NUTRITIONAL SERVIC	1144334483				
2	$150	410724029	VISCITO	MATTHEW	323 S MINNESOTA ST		CROOKSTON	MN	56716	1497969570	8	Family Practice	5548001	RIVERVIEW HEALTHCARE ASS	1477525566				
7	$150	450231183	YOST	ROBERT	1301 15TH AVE W		WILLISTON	ND	58801	1194849166	30	Radiology	711004	MERCY RADIOLOGY SERVICES	1629234257				
1	$148	450226909	KLAVA	WILLIAM	801 BROADWAY NORTH		FARGO	ND	58102	1174544308	25	Physical Medicine and Rehab	7742001	SANFORD BROADWAY CLINIC	1184917924				
2	$148	456029517	RYDER MAKOTI AMBUL		61 2ND AVE E		MAKOTI	ND	58756	1356422430	59	Ambulance Service	3230001	RYDER MAKOTI AMBULANCE	1356422430				
5	$148	260012477	FROHLICH	DOUGLAS	6712 HIGHWAY 200 E		CARRINGTON	ND	58421	1013008655	41	Optometrist	686008	PROFESSIONAL EYECARE CEN	1699866244				
2	$148	450226700	LARSSON	ERNST	300 N 7TH ST		BISMARCK	ND	58501	1710194352	11	Internal Medicine	440001	SANFORD MEDICAL CENTER/B	1811941172				
8	$148	450260821	JOHNSTON	MARY ANN	310 1ST AVE S		JAMESTOWN	ND	58401	1881940948	63	Pharmacy	4667001	WHITE DRUG #45	1588754428				
2	$147	450226429	OLHEISER	SHARON	30 7TH ST W		DICKINSON	ND	58601	1811913072	71	Certified Diabetic Educator	95001	ST JOSEPHS HOSPITAL AND	1992947956				
4	$147	450231181	WESTRATE	KENNETH	2422 20TH ST SW		JAMESTOWN	ND	58401	1568564326	37	Pediatrics	124001	JAMESTOWN REGIONAL MEDIC	1821044652				
2	$147	411590671	STEFFENS	CRYSTAL	302 GRASSY HILLS LANE		GRAND FORKS	ND	58201	1861573420	66	Speech Therapy	776001	HEALTH DIMENSIONS REHABI	1184733032				
5	$147	456013474	KNOEDLER	JOHN	301 MOUNTAIN ST E		CAVALIER	ND	58220	1023097078	30	Radiology	5633001	PEMBINA COUNTY HOSPITAL	1417093949				
11	$147	450226909	ABOUCHALA	NABIL	801 BROADWAY NORTH		FARGO	ND	58102	1265450233	11	Internal Medicine	7742001	SANFORD BROADWAY CLINIC	1184917924				
1	$147	450310462	JACKSON	WALTER	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1902982796	72	Emergency Medicine	9001	ALTRU HEALTH SYSTEM	1043309552				
3	$147	261175213	BALVITSCH	JASON	275 11TH ST S		WAHPETON	ND	58075	1629179106	97	Physician Assistant	6885019	INNOVIS HEALTH, LLC DBA	1790965440				
4	$147	450311334	HAMAR	MATTHEW	401 N 9TH ST		BISMARCK	ND	58501	1154618130	8	Family Practice	236001	MID DAKOTA CLINIC	1275587826				
1	$146	261175213	KANG	EUL	3000 32ND AVE S		FARGO	ND	58103	1184661944	30	Radiology	6885030	INNOVIS HEALTH, LLC DBA	1578907655				
9	$146	263192311	QUAL	NICOLE	116 4TH AVE N		CROOKSTON	MN	56716	1629225131	35	Chiropractor	7199002	ACTIVE HEALTH FAMILY CHI	1174770689				
6	$145	134211220	180 MEDICAL INC		5324 WEST RENO STE A		OKLAHOMA CITY	OK	73127	1639160708	54	Home Medical Equipment	7929001	180 MEDICAL, INC.	1639160708				
6	$145	911770748	JORDAN	ANDREW	1720 UNIVERSITY DR S		FARGO	ND	58103	1992723563	18	Opthalmology	3904	SANFORD SOUTH UNIVERSITY	1942241351				
2	$145	450226553	DUMBOLTON	JOHN	570 CHAUTAUQUA BLVD		VALLEY CITY	ND	58072	1336192657	8	Family Practice	75001	MERCY HOSPITAL	1972698975				
3	$145	450437651	ILLING	STEPHEN	2624 9TH AVE S		FARGO	ND	58103	1255348991	83	Licenses Addiction Counselor-Chemical Dependency	100001	SOUTHEAST HUMAN SERVICE	1932146941				
3	$145	450226909	KRUEGER	MAREN	1717 SOUTH UNIVERSITY DR		FARGO	ND	58103	1952581530	68	Licensed Registered Dietitian	7742027	SANFORD 1717 MEDICAL BUI	1184917924				
3	$144	450231183	KERR	BRENNA	1301 15TH AVE W		WILLISTON	ND	58801	1497917397	97	Physician Assistant	142001	MERCY MEDICAL/HOSPITAL E	1720194624				
1	$144	450226729	NYHUS	CHARLES	325 E BREWSTER ST		HARVEY	ND	58341	1700954633	8	Family Practice	24001	ST ALOISIUS MEDICAL CENT	1457477218				
3	$144	450321538	KITTLESON	SHANNON	1600 2ND AVE SW STE 19		MINOT	ND	58701	1326066275	50	Nurse Practitioner	188002	THE BONE & JOINT CENTER,	1750307872				
1	$144	450338331	VESTERSO	AMANDA	4000 17TH AVE S		GRAND FORKS	ND	58201	1629239637	42	Dentist	7124001	DAKOTA DENTAL ASSOCIATES	1417067919				
2	$144	450226700	TESCHER	STEELE	300 N 7TH ST		BISMARCK	ND	58501	1851642847	97	Physician Assistant	440001	SANFORD MEDICAL CENTER/B	1811941172				
1	$143	911770748	MILLER	RON	2701 13TH AVE S		FARGO	ND	58103	1760400345	37	Pediatrics	3015	SANFORD CHILDRENS SOUTHW	1942241351				
1	$143	450226700	CHINN	DOUGLAS	222 N 7TH ST		BISMARCK	ND	58501	1386605194	34	Urology	4001	SANFORD CLINIC	1811941172				
5	$143	800552870	JOHNSON	GARY	3902 13TH AVE S STE 406		FARGO	ND	58103	1275551848	41	Optometrist	7539004	GARY E JOHNSON OD PC	1275551848				
3	$143	450222079	KNECHT	JOHN	602 ASH AVE E		GLEN ULLIN	ND	58631	1386731065	1	General Practice	6043003	JACOBSON MEMORIAL HOSPIT	1003929944				
3	$143	450282159	MILLER	KAY	101 E BROADWAY AVE		BISMARCK	ND	58501	1952440877	83	Licenses Addiction Counselor-Chemical Dependency	269001	HEARTVIEW FOUNDATION	1417000233				
2	$143	450431679	WILLIAMS	SHEENA	1202 23RD ST S		FARGO	ND	58103	1225461452	83	Licenses Addiction Counselor-Chemical Dependency	423001	DRAKE COUNSELING SERVICE	1154378057				
1	$143	450414175	NEUMANN REXALL DRU		412 MAIN ST		CANDO	ND	58324	1891808523	54	Home Medical Equipment	4354001	NEUMANN REXALL DRUG	1891808523				
2	$142	261175213	KNOTT	CHRISTINA	1401 13TH AVE E		WEST FARGO	ND	58078	1033311139	67	Occupational Therapy	6885033	INNOVIS HEALTH, LLC DBA	1487990339				
3	$142	450437696	MURPHY	BERTHA	2605 CIRCLE DR		JAMESTOWN	ND	58401	1851319446	97	Physician Assistant	85001	NORTH DAKOTA STATE HOSPI	1649227075				
4	$142	450226419	PAGEL-TRANA- DUTTE	BOBBIE	800 3RD AVE SW		RUGBY	ND	58368	1629174701	50	Nurse Practitioner	18067	HEART OF AMERICA JOHNSON	1578734869				
2	$141	510183396	MAYNARD	JOSHUA	4227 9TH AVE SW		FARGO	ND	58103	1366674723	83	Licenses Addiction Counselor-Chemical Dependency	514001	SHAREHOUSE, INC	1205903481				
2	$141	450353431	FLASHER AMBULANCE	IC	3110 64TH ST		FLASHER	ND	58535	1386720795	59	Ambulance Service	2899001	FLASHER AMBULANCE SERVIC	1386720795				
3	$141	450310159	JOHNSON	ADAM	164 WEST 13TH STREET		GRAFTON	ND	58237	1467683987	30	Radiology	282001	GRAFTON FAMILY CLINIC	1558423665				
2	$141	450226419	TOWNSEND	CAMMY	800 S MAIN AVE		RUGBY	ND	58368	1619920345	50	Nurse Practitioner	18001	GOOD SAMARITAN HOSPITAL	1588751325				

4	$141	450310462	MEES	CHRISTOPHE	725 HAMLINE ST		GRAND FORKS	ND	58203	1750676342	8	Family Practice	9009	ALTRU FAMILY MEDICINE RE	1043309552				
1	$141	450232743	BATA	CHRISTINA	115 VIVIAN ST		PARK RIVER	ND	58270	1710296876	68	Licensed Registered Dietitian	99001	P.R HEALTH CORPORATION D	1679669741				
9	$140	261175213	OLSON-FITZGERALD	HEIDI	1401 13TH AVE E		WEST FARGO	ND	58078	1528094943	97	Physician Assistant	6885033	INNOVIS HEALTH, LLC DBA	1487990339				
1	$140	450226909	ZEITOUNI	MOHAMMED	801 BROADWAY NORTH		FARGO	ND	58102	1891974796	29	Pulmonary Diseases	7742001	SANFORD BROADWAY CLINIC	1184917924				
1	$140	450226909	ALBRECHT	WARREN	520 CHAUTAUQUA BLVD		VALLEY CITY	ND	58072	1134146129	2	General Surgery	7742016	SANFORD HEALTH VALLEY CI	1184917924				
2	$140	461650525	BOWDON AMBULANCE S	CE	211 WARRINGTON AVE		BOWDON	ND	58418	1366784126	59	Ambulance Service	8101001	BOWDON AMBULANCE SERVICE	1366784126				
3	$140	450226729	THORSON	KIM	325 E BREWSTER ST		HARVEY	ND	58341	1780817858	50	Nurse Practitioner	24001	ST ALOISIUS MEDICAL CENT	1457477218				
13	$140	861123162	GISVOLD	CHRISTINA	310 N 10TH ST		BISMARCK	ND	58501	1013270503	50	Nurse Practitioner	6459001	ST ALEXIUS HEART & LUNG	1194823021				
1	$140	261175213	HITE	STEPHEN	3000 32ND AVE S		FARGO	ND	58103	1619914645	30	Radiology	6885030	INNOVIS HEALTH, LLC DBA	1578907655				
1	$140	261175213	PETERSON	JEFFREY	3000 32ND AVE S		FARGO	ND	58103	1972552107	30	Radiology	6885030	INNOVIS HEALTH, LLC DBA	1578907655				
2	$139	450226909	PFENNIG	GREGORY	1720 UNIVERSITY DR S		FARGO	ND	58103	1932126414	50	Nurse Practitioner	7742004	SANFORD SOUTH UNIVERSITY	1184917924				
23	$138	911770748	KOZOJED	MIA	820 4TH ST N		FARGO	ND	58102	1124281043	50	Nurse Practitioner	3030	SANFORD ROGER MARIS CANC	1942241351				
2	$138	450363593	COMMUNITY AMBULANC	RVICE OF M	305 11TH AVE SW		MINOT	ND	58701	1558485946	59	Ambulance Service	1856001	COMMUNITY AMBULANCE SERV	1558485946				
12	$138	450360451	LARIMORE DRUG & GI		203 TOWNER AVE		LARIMORE	ND	58251	1164579249	54	Home Medical Equipment	4437001	LARIMORE DRUG & GIFT	1164579249				
1	$137	450226909	ROSSLAND	ALEXIS	801 BROADWAY NORTH		FARGO	ND	58102	1962836668	50	Nurse Practitioner	7742001	SANFORD BROADWAY CLINIC	1184917924				
1	$137	450226909	NYGAARD	LYNETTE	801 BROADWAY NORTH		FARGO	ND	58102	1144255787	43	Certified Registered Nurse Anesthetist	7742001	SANFORD BROADWAY CLINIC	1184917924				
2	$136	450358986	KOSIAK	DONALD	1015 4TH AVE S		WISHEK	ND	58495	1629162706	8	Family Practice	441001	WISHEK RURAL HEALTH CLIN	1376584623				
2	$136	450310159	PASSE	THEODORE	164 WEST 13TH STREET		GRAFTON	ND	58237	1881673218	30	Radiology	282001	GRAFTON FAMILY CLINIC	1558423665				
12	$135	450310462	DRAKE	DAVID	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1528046612	30	Radiology	9001	ALTRU HEALTH SYSTEM	1043309552				
6	$134	911770748	MATTSON	HEATHER	100 1ST AVE SW STE 2		LAMOURE	ND	58458	1346559523	65	Physical Therapy	3073	SANFORD HEALTH LAMOURE C	1942241351				
10	$134	450410216	BEYER	JENNIFER	835 S WASHINGTON STE 2		BISMARCK	ND	58504	1770721763	63	Pharmacy	5541001	GATEWAY PHARMACY SOUTH	1205927571				
13	$134	911770748	DANGERFIELD	JON	929 CENTRAL AVE NW		E GRAND FORKS	MN	56721	1245258896	16	Obstet/Gynecology	3055	SANFORD HEALTH 929 CENTR	1942241351				
2	$134	450226909	AL HALLAK	MOHAMMED	1720 UNIVERSITY DR S		FARGO	ND	58103	1205088556	11	Internal Medicine	7742004	SANFORD SOUTH UNIVERSITY	1184917924				
4	$134	450310159	PRESCOTT	TRISHA	164 WEST 13TH STREET		GRAFTON	ND	58237	1487895660	30	Radiology	282001	GRAFTON FAMILY CLINIC	1558423665				
8	$133	450260821	BROWN	KODI	1100 13TH AVE E		WEST FARGO	ND	58078	1164778999	63	Pharmacy	4672001	THRIFTY WHITE DRUG #46	1033208640				
3	$133	261175213	WOTHE	DONALD	3000 32ND AVE S		FARGO	ND	58103	1548220320	16	Obstet/Gynecology	6885030	INNOVIS HEALTH, LLC DBA	1578907655				
26	$133	450310159	BRETZKE	CARL	164 WEST 13TH STREET		GRAFTON	ND	58237	1386622637	30	Radiology	282001	GRAFTON FAMILY CLINIC	1558423665				
10	$133	450460341	NAPOLEON DRUG INC		214 MAIN AVE		NAPOLEON	ND	58561	1104927094	63	Pharmacy	3309001	NAPOLEON DRUG INC	1104927094				
5	$133	450310159	SAVCENKO	VLADIMIR	164 WEST 13TH STREET		GRAFTON	ND	58237	1861471658	30	Radiology	282001	GRAFTON FAMILY CLINIC	1558423665				
1	$133	450226700	BOSSORT	JAMES	222 N 7TH ST		BISMARCK	ND	58501	1003879545	8	Family Practice	4001	SANFORD CLINIC	1811941172				
2	$133	450308379	CZYWCZYNSKI	HEATHER	510 8TH AVE NE		HAZEN	ND	58545	1285920587	50	Nurse Practitioner	340006	SAKAKAWEA CLINIC	1356315220				
16	$133	450310462	WEISENSEE	ANNE	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1992784755	30	Radiology	9001	ALTRU HEALTH SYSTEM	1043309552				
3	$132	911770748	HOCHHALTER	DAVID	201 4TH AVE STE 1		ENDERLIN	ND	58027	1669583183	8	Family Practice	3025	SANFORD HEALTH ENDERLIN	1942241351				
4	$132	450226558	SOLBERG	JON	1 BURDICK EXPY W		MINOT	ND	58701	1588830418	72	Emergency Medicine	635032	TRINITY MEDICAL GROUP	1083653752				
4	$132	450222079	DENT	TYESHA	603 EAST ST N		ELGIN	ND	58533	1811036247	97	Physician Assistant	6043002	JACOBSON MEMORIAL ELGIN	1871691519				
20	$131	450410216	GATEWAY PHARMACY		500 BURLINGTON ST SE		MANDAN	ND	58554	1497847776	54	Home Medical Equipment	4666001	GATEWAY PHARMACY	1497847776				
32	$131	450260821	WHITE DRUG #60		148 S CENTRAL AVE		VALLEY CITY	ND	58072	1194815035	54	Home Medical Equipment	6211001	WHITE DRUG #60	1194815035				
2	$131	456002491	JENSEN	WARREN	MCCANNEL HALL ROOM 100	2891 2ND AVE I	GRAND FORKS	ND	58202	1770686628	8	Family Practice	180001	UND STUDENT HEALTH SERVI	1922067305				
1	$130	410843966	MOLSTRE	JOHN	1010 32ND AVE S		MOORHEAD	MN	56560	1710920905	62	Psychology	288001	LAKELAND MENTAL HEALTH C	1366480287				
3	$130	450308379	VOLK	ROBERT	517 8TH AVE NE		HAZEN	ND	58545	1932140050	50	Nurse Practitioner	340004	SAKAKAWEA HAZEN CLINIC	1174597173				
13	$129	450440650	OAKES DRUG		422 MAIN		OAKES	ND	58474	1528093259	63	Pharmacy	3022001	OAKES DRUG	1528093259				
2	$129	410695598	WADELL	LARRY	2400 ST FRANCIS DRIVE		BRECKENRIDGE	MN	56520	1629174503	8	Family Practice	207001	ST FRANCIS MEDICAL CENTE	1891954574				
8	$129	751336810	SEARS OPTICAL		2700 STATE ST		BISMARCK	ND	58503	1811901325	58	Other Individual Supplier - Optometric Supplier	4362001	SEARS OPTICAL	1811901325				
3	$129	450437648	RONSBERG	ELISE	1237 W DIVIDE AVE STE 5		BISMARCK	ND	58501	1942233085	83	Licenses Addiction Counselor-Chemical Dependency	241001	WEST CENTRAL HUMAN SERVI	1649226713				
3	$129	261841340	WAGNER	ANDREW	4357 13 AVE S STE 100		FARGO	ND	58103	1629255047	35	Chiropractor	7173001	ANDREW WAGNER CHIROPRACT	1457520124				
8	$128	50546085	MIDWEST VISION CEN	FARGO	3051 25TH ST S		FARGO	ND	58103	1699847293	58	Other Individual Supplier - Optometric Supplier	2730002	MIDWEST VISION CENTERS -	1699847293				
3	$128	261175213	BULIK	ROBERT	3000 32ND AVE S		FARGO	ND	58103	1144264714	43	Certified Registered Nurse Anesthetist	6885030	INNOVIS HEALTH, LLC DBA	1578907655				
3	$128	460919090	WAYMENT	NATHAN	521 E MAIN AVE STE 100		BISMARCK	ND	58501	1922248004	91	Endodontist	7922002	CUSTOM ENDODONTICS, PC	1124468590				
8	$127	450226700	SCHAUER	DOUGLAS	820 5TH ST N		CARRINGTON	ND	58421	1578661229	64	Audiology	4079	SANFORD BISMARCK AT CARR	1811941172				
1	$127	450437651	CROSS-HILLMAN	NICOLE	2624 9TH AVE S		FARGO	ND	58103	1003149790	62	Psychology	100001	SOUTHEAST HUMAN SERVICE	1932146941				
2	$126	450226909	KRUPICH	MARY	1720 UNIVERSITY DR S		FARGO	ND	58103	1730106402	43	Certified Registered Nurse Anesthetist	7742004	SANFORD SOUTH UNIVERSITY	1184917924				
29	$126	911770748	AAMOLD	ROBYN	1717 S UNIVERSITY DRIVE		FARGO	ND	58103	1205091824	97	Physician Assistant	3084	SANFORD 1717 MEDICAL BUI	1942241351				
2	$126	450358986	VEGIRAJU	THAMMI	420 MAIN AVE		NAPOLEON	ND	58561	1356611958	1	General Practice	173001	WISHEK RURAL HEALTH CLIN	1679774616				
3	$126	911770748	THORSGARD	KNUTE	1245 WASHINGTON AVE		DETROIT LAKES	MN	56501	1508813213	8	Family Practice	3007	SANFORD HEALTH DETROIT L	1942241351				
2	$125	450442284	FORT YATES/LRD		NORTH RIVER RD		FORT YATES	ND	58538	1609851039	68	Licensed Registered Dietitian	1347001	FORT YATES IHS	1609851039				
1	$124	450437696	COOMBS	LINCOLN	2605 CIRCLE DR		JAMESTOWN	ND	58401	1043356405	62	Psychology	85001	NORTH DAKOTA STATE HOSPI	1649227075				
1	$124	450437696	OWENS	SANDRA	2605 CIRCLE DR		JAMESTOWN	ND	58401	1083750541	62	Psychology	85001	NORTH DAKOTA STATE HOSPI	1649227075				
21	$124	651298957	HAUGRUD	CRAIG	220 FRONT STREET		BARNESVILLE	MN	56514	1508974262	65	Physical Therapy	7060002	REHAB PLUS BARNESVILLE	1679766802				
2	$124	450437696	PERKINS	RANDY	2605 CIRCLE DR		JAMESTOWN	ND	58401	1164568929	97	Physician Assistant	85001	NORTH DAKOTA STATE HOSPI	1649227075				
2	$123	450232743	BERENS	BRUCE	115 VIVAN ST		PARK RIVER	ND	58270	1811994858	30	Radiology	598001	P.R. HEALTH CORPORATION	1306850706				
1	$122	450226909	BARTNICK	JAMIE	801 BROADWAY NORTH		FARGO	ND	58102	1427386838	50	Nurse Practitioner	7742001	SANFORD BROADWAY CLINIC	1184917924				
5	$122	450226909	THOMAS	ANIL	801 BROADWAY NORTH		FARGO	ND	58102	1699947333	34	Urology	7742001	SANFORD BROADWAY CLINIC	1184917924				
2	$122	261175213	BRIGGS	MICHAEL	2430 20TH ST SW		JAMESTOWN	ND	58401	1710911185	29	Pulmonary Diseases	6885018	INNOVIS HEALTH, LLC DBA	1073793725				
5	$122	201260355	MURIE	CAROL	2650 32 AVE S STE F3		GRAND FORKS	ND	58201	1760580922	41	Optometrist	1790001	MURIE, CAROL, OD	1083910905				
3	$121	770637498	KOSTENKO	SUZANNE	525 N MAIN ST		WATFORD CITY	ND	58854	1952322380	50	Nurse Practitioner	6340001	MCKENZIE COUNTY HEALTHCA	1063420495				
2	$121	450310462	HANSON	BRENDA	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1497846299	97	Physician Assistant	9001	ALTRU HEALTH SYSTEM	1043309552				

6	$121	450226558	WRIGHT	SHARON	1 BURDICK EXPY W		MINOT	ND	58701	1407174279	50	Nurse Practitioner	635032	TRINITY MEDICAL GROUP	1083653752		
1	$120	450310462	BRANBY	MICHAEL	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1811237753	43	Certified Registered Nurse Anesthetist	9001	ALTRU HEALTH SYSTEM	1043309552		
1	$120	861123162	BRAUN	KRISTIN	310 N 10TH ST		BISMARCK	ND	58501	1134210214	50	Nurse Practitioner	6459001	ST ALEXIUS HEART & LUNG	1194823021		
2	$119	450310462	MCKINNON	WILLIAM	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1881786218	72	Emergency Medicine	9001	ALTRU HEALTH SYSTEM	1043309552		
16	$119	911770748	TRAYNOR	MICHAEL	801 BROADWAY NORTH		FARGO	ND	58102	1841212412	2	General Surgery	3001	SANFORD BROADWAY CLINIC	1942241351		
12	$119	450418143	HELGESON	MARK	121 BRIGGS AVE N		PARK RIVER	ND	58270	1932160132	41	Optometrist	339001	HEARTLAND EYE CARE, PC	1932277936		
291	$119	410843966	DAHL-MONROE	MICHELLE	1010 32ND AVE S		MOORHEAD	MN	56560	1164479242	51	Medical Supply Co with Orthotist	288001	LAKELAND MENTAL HEALTH C	1366480287		
2	$119	450226423	DYRUD	ALVA	1401 8 ST S		MOORHEAD	MN	56560	1871705186	51	Medical Supply Co with Orthotist	283003	THE VILLAGE FAMILY SERVI	1568492353		
1	$119	450437654	HELLERUD	ELIZABETH	200 HIGHWAY 2 SW		DEVILS LAKE	ND	58301	1568492221	83	Licenses Addiction Counselor-Chemical Dependency	159001	LAKE REGION HUMAN SERVIC	1669411930		
1	$119	450437653	LIDER	HEATHER	1015 S BROADWAY STE 18		MINOT	ND	58701	1497938161	83	Licenses Addiction Counselor-Chemical Dependency	238001	NORTH CENTRAL HUMAN SERV	1477592533		
1	$119	450232743	PHELAN	JEFFREY	115 VIVAN ST		PARK RIVER	ND	58270	1497734123	30	Radiology	598001	P.R. HEALTH CORPORATION	1306850706		
1	$118	450226700	MALZER	CHRISTINE	801 21ST AVENUE SE		MINOT	ND	58701	1891053799	97	Physician Assistant	4052	SANFORD HEALTH OCCUPATIO	1669524351		
4	$118	450226700	CANNON	BRYAN	222 N 7TH ST		BISMARCK	ND	58501	1942380373	37	Pediatrics	4001	SANFORD CLINIC	1811941172		
85	$118	911770748	LEVITSKI-HEIKKILA	TERESA	801 BROADWAY NORTH		FARGO	ND	58102	1366408536	11	Internal Medicine	3001	SANFORD BROADWAY CLINIC	1942241351		
4	$118	450310462	DALMI	ATTILA	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1932290046	11	Internal Medicine	9001	ALTRU HEALTH SYSTEM	1043309552		
11	$118	450226909	TESKE	VICTORIA	4000 28TH AVE S		MOORHEAD	MN	56560	1124049465	50	Nurse Practitioner	7742014	SANFORD MOORHEAD CLINIC	1184917924		
1	$118	263047434	EK	MARILYN	1100 19TH AVE N STE L-M		FARGO	ND	58102	1487745493	50	Nurse Practitioner	7174006	7 DAY CLINIC	1841547387		
7	$118	911770748	GEERAERTS	LOUIS	420 S 7TH ST		OAKES	ND	58474	1770500639	75	Oncology	3068	SANFORD HEALTH OAKES CLI	1942241351		
9	$117	911770748	ZIMNEY	STACY	1412 MAIN ST		HAWLEY	MN	56549	1952322299	97	Physician Assistant	513001	SANFORD HAWLEY CLINIC	1942241351		
8	$117	453635621	FORGIT	MATTHEW	216 S MAIN ST		CROOKSTON	MN	56716	1427114214	41	Optometrist	7992001	CROOKSTON EYE CLINIC	1740567494		
4	$117	450422944	GLOSENGER	JEREMIAH	2615 ELK DRIVE SUITE 3		MINOT	ND	58701	1750582300	19	Oral Surgery	455006	FACE & JAW SURGERY CENTE	1104863505		
1	$117	450437648	MOCK	SUE	1237 W DIVIDE AVE STE 5		BISMARCK	ND	58501	1023054210	83	Licenses Addiction Counselor-Chemical Dependency	241001	WEST CENTRAL HUMAN SERVI	1649226713		
3	$117	450226700	THURMANN	HILTRUD	300 N 7TH ST		BISMARCK	ND	58501	1881762730	11	Internal Medicine	440001	SANFORD MEDICAL CENTER/B	1811941172		
1	$117	261175213	HASSELL	DOUGLASS	3000 32ND AVE S		FARGO	ND	58103	1760497150	30	Radiology	6885030	INNOVIS HEALTH, LLC DBA	1578907655		
32	$117	450260821	WHITE DRUG #40		1600 2ND AVE SW		MINOT	ND	58701	1679663512	63	Pharmacy	4655001	WHITE DRUG #40	1679663512		
3	$116	201459597	IRAVANI	MANSUREH	3117 N 14TH ST		BISMARCK	ND	58503	1497750889	19	Oral Surgery	6324001	ORAL SURGERY CENTER OF B	1477723591		
9	$116	450226700	GERVING	CARRIE	300 N 7TH ST		BISMARCK	ND	58501	1316259294	50	Nurse Practitioner	440001	SANFORD MEDICAL CENTER/B	1811941172		
2	$116	450226423	SPOONER	KRISTIE	409 7TH ST S		FARGO	ND	58103	1902912272	83	Licenses Addiction Counselor-Chemical Dependency	283018	THE VILLAGE FAMILY SERVI	1952679318		
14	$116	450310462	HOOD	LARISSA	1380 S COLUMBIA RD		GRAND FORKS	ND	58201	1205927001	30	Radiology	9021	ALTRU FAMILY MEDICINE CE	1043309552		
1	$116	450310159	RHODES	NICHOLAS	164 WEST 13TH STREET		GRAFTON	ND	58237	1548466899	30	Radiology	282001	GRAFTON FAMILY CLINIC	1558423665		
9	$115	450418143	HEARTLAND EYE CARE		415 HILL AVE		GRAFTON	ND	58237	1518026046	58	Other Individual Supplier - Optometric Supplier	485001	HEARTLAND EYE CARE PC/GR	1518026046		
3	$115	826000995	IDAHO PCG RECOVERY	T		PO BOX 2894	BOISE	ID	83701	0	60	Public Health or Welfare Agency	5628001	IDAHO PCG RECOVERY UNIT	0		
5	$115	450226700	BLEES	KRISTEN	300 N 7TH ST		BISMARCK	ND	58501	1659469385	68	Licensed Registered Dietitian	440001	SANFORD MEDICAL CENTER/B	1811941172		
7	$115	460357744	JOHNSON	TAYLOR	221 6TH AVE SE STE 3		ABERDEEN	SD	57401	1457580797	35	Chiropractor	1369001	IVEY CHIROPRACTIC CLINIC	1992771828		
1	$114	450226909	PALADUGU	GOPIKRISHN	1720 UNIVERSITY DR S		FARGO	ND	58103	1710140843	11	Internal Medicine	7742004	SANFORD SOUTH UNIVERSITY	1184917924		
5	$114	261175213	FRISK (MOVCHAN)	CARI	2430 20TH ST SW		JAMESTOWN	ND	58401	1871520114	64	Audiology	6885018	INNOVIS HEALTH, LLC DBA	1073793725		
1	$114	911770748	OWENS	ANN	445 1ST ST E		HALSTAD	MN	56548	1013935600	97	Physician Assistant	503001	SANFORD HEALTH HALSTAD C	1942241351		
1	$114	450226909	SWENSON	LEAH	1720 UNIVERSITY DR S		FARGO	ND	58103	1891942405	50	Nurse Practitioner	7742004	SANFORD SOUTH UNIVERSITY	1184917924		
2	$114	820558836	GUSTAFSON	JEAN	905 MAIN ST		LISBON	ND	58054	1437445442	8	Family Practice	5840005	LISBON AREA HEALTH SERVI	1811168958		
1	$114	450226558	BANSODE	GAURAV	1 BURDICK EXPY W		MINOT	ND	58701	1134433857	8	Family Practice	635032	TRINITY MEDICAL GROUP	1083653752		
12	$114	911770748	DANGERFIELD	JON	621 DEMERS AVE		E GRAND FORKS	MN	56721	1245258896	16	Obstet/Gynecology	3080	SANFORD HEALTH 621 DEMER	1942241351		
16	$113	450226700	KOSIAK	DONALD	300 N 7TH ST		BISMARCK	ND	58501	1629162706	8	Family Practice	440001	SANFORD MEDICAL CENTER/B	1811941172		
3	$113	510183396	ECKART	CARLEE	505 40TH ST S STE B		FARGO	ND	58103	1134136799	83	Licenses Addiction Counselor-Chemical Dependency	514003	SHAREHOUSE - GENESIS	1356576979		
2	$113	510183396	WESTALL	WANDA	4227 9TH AVE SW		FARGO	ND	58103	1780836783	83	Licenses Addiction Counselor-Chemical Dependency	514001	SHAREHOUSE, INC	1205903481		
2	$113	510183396	TRAEN	JEREMY	505 40TH ST S STE B		FARGO	ND	58103	1811274038	83	Licenses Addiction Counselor-Chemical Dependency	514003	SHAREHOUSE - GENESIS	1356576979		
101	$113	452644295	CRAWFORD	MELISSA	3175 SIENNA DR S #103		FARGO	ND	58104	1437404795	50	Nurse Practitioner	7846001	MEDICAL WEIGHT LOSS	1932453404		
25	$112	450226700	FISHER	CATHERINE	2830 N WASHINGTON ST		BISMARCK	ND	58503	1740326479	22	Pathology, Anatomy, Clinical Pathology	4062	SANFORD NORTH CLINIC	1811941172		
1	$111	264314533	ERICKSON	CHAD	510 4TH ST S		FARGO	ND	58103	1386879617	26	Psychiatry (MD)	7444001	PSJ ACQUISITION LLC	1679709802		
5	$111	911770748	BIEGLER	PETER	801 BROADWAY NORTH		FARGO	ND	58102	1164683363	30	Radiology	3001	SANFORD BROADWAY CLINIC	1942241351		
6	$111	456013474	BARKMEIER	JEFFREY	301 MOUNTAIN ST E		CAVALIER	ND	58220	1871571083	30	Radiology	5633001	PEMBINA COUNTY HOSPITAL	1417093949		
7	$111	450226711	JAIN	SUNANDA	900 E BROADWAY AVE		BISMARCK	ND	58501	1164514519	39	Nephrology	501001	ST ALEXIUS MEDICAL CENTE	1205868429		
7	$111	911770748	DAHL	STEPHANIE	904 5TH AVE NE		JAMESTOWN	ND	58401	1265545784	16	Obstet/Gynecology	3005	SANFORD HEALTH JAMESTOWN	1942241351		
3	$110	450437696	MCDOWELL	TODD	2605 CIRCLE DR		JAMESTOWN	ND	58401	1023154879	50	Nurse Practitioner	85001	NORTH DAKOTA STATE HOSPI	1649227075		
1	$110	261175213	TILLOTSON	CHRISTOPHE	3000 32ND AVE S		FARGO	ND	58103	1295714954	30	Radiology	6885030	INNOVIS HEALTH, LLC DBA	1578907655		
5	$110	450226700	GATTEY	PHILIP	222 N 7TH ST		BISMARCK	ND	58501	1760402051	20	Orthopedic Surgery	4001	SANFORD CLINIC	1811941172		
14	$110	450310462	HAGEN	WILLIAM	725 HAMLINE ST		GRAND FORKS	ND	58203	1639260649	30	Radiology	9009	ALTRU FAMILY MEDICINE RE	1043309552		
6	$110	911770748	FABIAN	MATTHEW	1717 S UNIVERSITY DRIVE		FARGO	ND	58103	1497928972	2	General Surgery	3084	SANFORD 1717 MEDICAL BUI	1942241351		
8	$109	450410216	THOMAS	NICK	3101 N 11TH ST STE 2		BISMARCK	ND	58503	1316147127	63	Pharmacy	5541002	GATEWAY PHARMACY NORTH	1447356399		
3	$108	911770748	BREEN	CHARLES	445 1ST ST E		HALSTAD	MN	56548	1114944113	8	Family Practice	503001	SANFORD HEALTH HALSTAD C	1942241351		
20	$108	450230083	FELDMANN	LAURA	16351 I 94		SENTINEL BUTTE	ND	58654	1972623148	80	Clinical Social Worker	6887001	HOME ON THE RANGE	1114059805		
8	$108	911770748	GARCIA	LUIS	929 CENTRAL AVE NW		E GRAND FORKS	MN	56721	1104844752	2	General Surgery	3055	SANFORD HEALTH 929 CENTR	1942241351		
1	$108	456013474	ASIS	MARTIN	301 MOUNTAIN ST E		CAVALIER	ND	58220	1598743833	30	Radiology	5633001	PEMBINA COUNTY HOSPITAL	1417093949		
1	$108	450228899	MARSDEN	RICHARD	600 1ST STREET SE		MAYVILLE	ND	58257	1801814413	30	Radiology	3076	SANFORD MAYVILLE	1366478760		
2	$107	456013474	JACKSON	CHRISTOPHE	301 MOUNTAIN ST E		CAVALIER	ND	58220	1073591012	30	Radiology	5633001	PEMBINA COUNTY HOSPITAL	1417093949		
11	$107	450433379	DRS KREIN & MOEN P	A 20/20 EY	211 4TH ST NE SUITE 1		DEVILS LAKE	ND	58301	1598944373	58	Other Individual Supplier - Optometric Supplier	525001	DRS KREIN & MOEN, PC DBA	1598944373		
2	$107	450226553	MALZER	CHRISTINE	570 CHAUTAUQUA BLVD		VALLEY CITY	ND	58072	1891053799	97	Physician Assistant	75001	MERCY HOSPITAL	1972698975		

3	$107	450310462	HOOD	LARISSA	4500 S WASHINGTON ST		GRAND FORKS	ND	58201	1205927001	30	Radiology	9045	ALTRU SPECIALTY CENTER	1154346161		
2	$107	450310462	DALLUM	BERNIE	4500 S WASHINGTON ST		GRAND FORKS	ND	58201	1023109139	30	Radiology	9045	ALTRU SPECIALTY CENTER	1154346161		
45	$107	450226700	FISHER	CATHERINE	3318 N 14TH STREET		BISMARCK	ND	58503	1740326479	22	Pathology, Anatomy, Clinical Pathology	4064	SANFORD NORTH WALK-IN CL	1811941172		
26	$105	450226711	WIEDRICH	SARA	2700 8TH ST NW		MINOT	ND	58703	1346504016	50	Nurse Practitioner	501016	ST ALEXIUS CLINIC	1205868429		
2	$105	911770748	MAURER	JAMES	801 BROADWAY NORTH		FARGO	ND	58102	1619921152	30	Radiology	3001	SANFORD BROADWAY CLINIC	1942241351		
3	$104	510183396	WINTERS	PATRICIA	505 40TH ST S STE B		FARGO	ND	58103	1508115403	83	Licenses Addiction Counselor-Chemical Dependency	514003	SHAREHOUSE - GENESIS	1356576979		
2	$104	450222079	DUPPONG	LINDA	601 EAST ST N		ELGIN	ND	58533	1053399436	97	Physician Assistant	1929001	JACOBSON MEMORIAL HOSPIT	1336196039		
1	$104	450227391	PANERU	RAM	213 2ND AVE NE		ROLLA	ND	58367	1740457902	8	Family Practice	401001	PRESENTATION MEDICAL CEN	1265404958		
7	$104	450331767	CHASE PHARMACY INC		21 N MAIN ST		GARRISON	ND	58540	1114055324	54	Home Medical Equipment	3077001	CHASE PHARMACY INC	1114055324		
8	$103	456051712	RIME	RICHARD	104 20 AVE SW		MINOT	ND	58701	1841363884	35	Chiropractor	1594002	RIME CHIROPRACTIC	1841363884		
3	$103	450309099	MEDICAL PHARMACY		100 4TH ST S		FARGO	ND	58103	1528120870	63	Pharmacy	1808001	MEDICAL PHARMACY	1528120870		
4	$103	450311334	SEIFERT	SHELLY	401 N 9TH ST		BISMARCK	ND	58501	1245286764	8	Family Practice	236001	MID DAKOTA CLINIC	1275587826		
8	$103	450260821	BOYER	JULIE	213 1ST AVE N		JAMESTOWN	ND	58401	1538501739	63	Pharmacy	7998001	WHITE DRUG #73	1033460217		
3	$102	460357744	IVEY	THOMAS	221 6TH AVE SE STE 3		ABERDEEN	SD	57401	1992771828	35	Chiropractor	1369001	IVEY CHIROPRACTIC CLINIC	1992771828		
15	$102	911770748	SANFORD HEALTH VAL	CITY EYE C	253 CENTRAL AVE N		VALLEY CITY	ND	58072	1427077361	58	Other Individual Supplier - Optometric Supplier	3043	SANFORD HEALTH VALLEY CI	1427077361		
20	$102	911770748	SANFORD SOUTHPOINT	E CENTER &	2400 32ND AVE S		FARGO	ND	58103	1740346030	58	Other Individual Supplier - Optometric Supplier	3014	SANFORD SOUTHPOINTE CLIN	1942241351		
1	$102	470757739	CASCIATO	VALERIE	683 STATE AVE STE B		DICKINSON	ND	58601	1861629412	66	Speech Therapy	1985001	OMAHA THERAPY INC. DBA R	1730280371		
5	$101	410724034	WARNER	KAREN	1010 S BIRCH		HALLOCK	MN	56728	1619908993	97	Physician Assistant	2059001	KITTSON MEMORIAL CLINIC	1740359348		
4	$101	450231183	LEVEY	RICHARD	1301 15TH AVE W		WILLISTON	ND	58801	1396783155	30	Radiology	711004	MERCY RADIOLOGY SERVICES	1629234257		
8	$101	911770748	SAHA	JOYOTI	2400 32ND AVE S		FARGO	ND	58103	1851624944	16	Obstet/Gynecology	3014	SANFORD SOUTHPOINTE CLIN	1942241351		
17	$101	911770748	RONDEAU	JEFFREY	2400 32ND AVE S		FARGO	ND	58103	1033130257	16	Obstet/Gynecology	3014	SANFORD SOUTHPOINTE CLIN	1942241351		
2	$101	411271856	NYHUS	COREY	735 3RD ST		PERHAM	MN	56573	1386661858	8	Family Practice	7771004	PERHAM HEALTH 735 3RD ST	1457631814		
1	$101	450358986	PATEL	SURESH	420 MAIN AVE		NAPOLEON	ND	58561	1235151705	8	Family Practice	173001	WISHEK RURAL HEALTH CLIN	1679774616		
6	$101	450337952	YE OLDE MEDICINE C	R	102 DIVISION AVE S		CAVALIER	ND	58220	1407861040	54	Home Medical Equipment	4644001	YE OLDE MEDICINE CENTER	1407861040		
2	$100	450226909	DAHL	STEPHANIE	1720 UNIVERSITY DR S		FARGO	ND	58103	1265545784	16	Obstet/Gynecology	7742004	SANFORD SOUTH UNIVERSITY	1184917924		
4	$100	263653388	MIDSTOKKE	STEVEN	2940 N 19TH ST STE 2		BISMARCK	ND	58503	1003027517	42	Dentist	7278001	MIDSTOKKE FAMILY DENTIST	1558657437		
6	$100	450260821	SCHWINDT	ALVIN	1681 THIRD AVE WEST		DICKINSON	ND	58601	1710108576	63	Pharmacy	7880001	WHITE DRUG #34	1124117734		
3	$100	237086860	LAKOTA AMBULANCE S	CE	107 2ND ST E		LAKOTA	ND	58344	1720175060	59	Ambulance Service	1888001	LAKOTA AMBULANCE SERVICE	1720175060		
5	$100	461702374	GLESSING	MICHAEL	4101 13TH AVE S STE S		FARGO	ND	58103	1730419748	63	Pharmacy	8156001	M-D PHARMACY	1396184750		
11	$100	450260821	WHITE DRUG #45		310 1ST AVE S		JAMESTOWN	ND	58401	1588754428	63	Pharmacy	4658001	WHITE DRUG #45	1588754428		
2	$100	450226909	HAUG	KIMBERLY	801 BROADWAY NORTH		FARGO	ND	58102	1942391743	50	Nurse Practitioner	7742001	SANFORD BROADWAY CLINIC	1184917924		
8	$100	450231183	PARKER	ROBIN	1301 15TH AVE W		WILLISTON	ND	58801	1235109703	30	Radiology	711004	MERCY RADIOLOGY SERVICES	1629234257		
26	$99	911770748	HARDMEYER	GABRIEL	801 BROADWAY NORTH		FARGO	ND	58102	1235315938	97	Physician Assistant	3001	SANFORD BROADWAY CLINIC	1942241351		
2	$99	450231183	VELDMAN	SARA	1301 15TH AVE W		WILLISTON	ND	58801	1578755740	30	Radiology	711004	MERCY RADIOLOGY SERVICES	1629234257		
8	$98	450226909	SKARI	BRADLY	1720 UNIVERSITY DR S		FARGO	ND	58103	1376747030	8	Family Practice	7742004	SANFORD SOUTH UNIVERSITY	1184917924		
110	$98	911770748	MAHALE	ADIT	904 5TH AVE NE		JAMESTOWN	ND	58401	1144247750	39	Nephrology	3005	SANFORD HEALTH JAMESTOWN	1942241351		
4	$98	450310462	FREDSTROM	RENE'	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1326064817	11	Internal Medicine	9001	ALTRU HEALTH SYSTEM	1043309552		
3	$98	450226700	AUCK	TONYA	222 N 7TH ST		BISMARCK	ND	58501	1447514203	50	Nurse Practitioner	4001	SANFORD CLINIC	1811941172		
13	$98	911770748	ANIM	SAMUEL	820 4TH ST N		FARGO	ND	58102	1053514844	37	Pediatrics	3030	SANFORD ROGER MARIS CANC	1942241351		
2	$98	450226558	KEHOE	CULLEN	1 BURDICK EXPY W		MINOT	ND	58701	1013166925	72	Emergency Medicine	635032	TRINITY MEDICAL GROUP	1083653752		
2	$98	911770748	COAUETTE	JORDAN	2400 32ND AVE S		FARGO	ND	58103	1457471880	16	Obstet/Gynecology	3014	SANFORD SOUTHPOINTE CLIN	1942241351		
16	$97	450226700	FISHER	CATHERINE	102 MANDAN AVE		MANDAN	ND	58554	1740326479	22	Pathology, Anatomy, Clinical Pathology	4057	SANFORD EAST MANDAN CLIN	1811941172		
2	$97	460388597	SANFORD HOME MEDIC	QUIPMENT	585 2ND AVE N		WINDOM	MN	56101	1538269741	54	Home Medical Equipment	8130017	SANFORD HOME MEDICAL EQU	1538269741		
3	$97	450310159	ASIS	MARTIN	164 WEST 13TH STREET		GRAFTON	ND	58237	1598743833	30	Radiology	282001	GRAFTON FAMILY CLINIC	1558423665		
9	$97	450445938	STERLING OPTICAL		3402 13TH AVE S		FARGO	ND	58103	1528175429	58	Other Individual Supplier - Optometric Supplier	715001	3-D OPTICAL DBA STERLING	1528175429		
16	$97	911770748	SUDER	JANA	820 4TH ST N		FARGO	ND	58102	1639442411	50	Nurse Practitioner	3030	SANFORD ROGER MARIS CANC	1942241351		
33	$96	463112139	MACK	MICHAEL	1418 S BROADWAY STE C		MINOT	ND	58701	1851737589	35	Chiropractor	8127001	HEALTHSOURCE OF MINOT LL	1194166173		
13	$96	260830423	MASCIARELLI	LESLIE	4302 13TH AVE S		FARGO	ND	58103	1699876417	41	Optometrist	7027001	DR L. R. MASCIARELLI AND	1235326398		
1	$96	450226558	JONES	DURAND	1 BURDICK EXPY W		MINOT	ND	58701	1346501046	50	Nurse Practitioner	635032	TRINITY MEDICAL GROUP	1083653752		
6	$95	450260821	KEELER	NATHAN	300 W 11TH ST		WILLISTON	ND	58801	1316295660	63	Pharmacy	6925001	WHITE DRUG #67	1629182605		
1	$95	510183396	COLLINS	DAVID	505 40TH ST S STE B		FARGO	ND	58103	1952636706	83	Licenses Addiction Counselor-Chemical Dependency	514003	SHAREHOUSE - GENESIS	1356576979		
2	$95	450226700	FAIRBAIRN	THOMAS	222 N 7TH ST		BISMARCK	ND	58501	1982702619	72	Emergency Medicine	4001	SANFORD CLINIC	1811941172		
1	$95	450310462	CRISWELL	SAMUEL	1001 7TH ST		DEVILS LAKE	ND	58301	1114018223	48	Podiatry, Surgical chiropody	9027	ALTRU CLINIC LAKE REGION	1861581373		
1	$95	450310462	YOSHIDA	GLEN	400 S MINNESOTA ST		CROOKSTON	MN	56716	1710073077	4	Otology, Laryngology, Rhinology	406001	ALTRU CROOKSTON	1760494330		
15	$95	30477097	BERGAN	CHAD	214 4TH STREET NW		STEELE	ND	58482	1083675987	65	Physical Therapy	5470003	DAKOTA PHYSICAL THERAPY,	1326285842		
1	$95	450437653	BURKE	JEAN	1015 S BROADWAY STE 18		MINOT	ND	58701	1497787832	88	#N/A	238001	NORTH CENTRAL HUMAN SERV	1477592533		
1	$95	450437653	NYBERG	ROCHELLE	1015 S BROADWAY STE 18		MINOT	ND	58701	1609964238	80	Clinical Social Worker	238001	NORTH CENTRAL HUMAN SERV	1477592533		
1	$94	450450254	STAIGER	JOSHUA	600 N 9TH ST		BISMARCK	ND	58501	1548507197	43	Certified Registered Nurse Anesthetist	1261001	BISMARCK SURGICAL ASSOCI	1487814356		
4	$94	450310159	BERENS	BRUCE	164 WEST 13TH STREET		GRAFTON	ND	58237	1811994858	30	Radiology	282001	GRAFTON FAMILY CLINIC	1558423665		
12	$93	911770748	BOUTON	MICHAEL	801 BROADWAY NORTH		FARGO	ND	58102	1356336358	2	General Surgery	3001	SANFORD BROADWAY CLINIC	1942241351		
5	$93	450226553	LARSON	BRUCE	570 CHAUTAUQUA BLVD		VALLEY CITY	ND	58072	1265470371	97	Physician Assistant	75001	MERCY HOSPITAL	1972698975		
7	$93	450226558	SINGH	RASHPAL	1 BURDICK EXPY W		MINOT	ND	58701	1285629014	11	Internal Medicine	635032	TRINITY MEDICAL GROUP	1083653752		
1	$93	450226700	SCHEURER	ELIZABETH	300 N 7TH ST		BISMARCK	ND	58501	1912285578	50	Nurse Practitioner	440001	SANFORD MEDICAL CENTER/B	1811941172		
1	$93	450226909	HALL	KATHERINE	1412 MAIN ST		HAWLEY	MN	56549	1740208396	11	Internal Medicine	7742015	SANFORD HAWLEY CLINIC	1184917924		
7	$93	456013474	VELDMAN	MARK	301 MOUNTAIN ST E		CAVALIER	ND	58220	1538188511	30	Radiology	5633001	PEMBINA COUNTY HOSPITAL	1417093949		
5	$93	911770748	MARSDEN	RICHARD	69 HIGHWAY 13 W		GWINNER	ND	58040	1801814413	30	Radiology	3072	SANFORD HEALTH GWINNER C	1942241351		

3	$92	456013474	JOHNSON	ADAM	301 MOUNTAIN ST E		CAVALIER	ND	58220	1467683987	30	Radiology	5633001	PEMBINA COUNTY HOSPITAL	1417093949		
2	$92	456013474	WITTENBERG	KEITH	301 MOUNTAIN ST E		CAVALIER	ND	58220	1154300929	30	Radiology	5633001	PEMBINA COUNTY HOSPITAL	1417093949		
1	$92	450226429	LOWE	WILLIAM	30 W 7TH ST		DICKINSON	ND	58601	1912069337	16	Obstet/Gynecology	95008	ST JOSEPHS WOMENS CLINIC	1730464108		
17	$92	450310159	TUMMALA	ANURADHA	164 WEST 13TH STREET		GRAFTON	ND	58237	1972582732	30	Radiology	282001	GRAFTON FAMILY CLINIC	1558423665		
1	$92	203198828	GROMMESH	KELSEY	1220 MAIN AVE STE 120		FARGO	ND	58103	1699063461	66	Speech Therapy	6659001	KENNELLY SPEECH-LANGUAGE	1154370187		
4	$92	450226909	HARRY	ERIC	801 BROADWAY NORTH		FARGO	ND	58102	1861478745	97	Physician Assistant	7742001	SANFORD BROADWAY CLINIC	1184917924		
11	$92	460224598	KIMMEL	DOUGLAS	305 S STATE ST		ABERDEEN	SD	57401	1922044239	30	Radiology	5518001	AVERA MEDICAL GROUP RADI	1437192721		
5	$92	450226558	SULIMAN	FAROUG	1 BURDICK EXPY W		MINOT	ND	58701	1174616668	11	Internal Medicine	635032	TRINITY MEDICAL GROUP	1083653752		
2	$91	450310462	CHEBACLO	MOHAMED	1001 7TH ST		DEVILS LAKE	ND	58301	1386708931	6	Cardivascular Disease	9027	ALTRU CLINIC LAKE REGION	1861581373		
7	$91	450226700	FOGARTY	EDWARD	801 21ST AVE SE		MINOT	ND	58701	1902826340	30	Radiology	4065	SANFORD HEALTH WALK-IN C	1811941172		
17	$91	450260821	WHITE DRUG #46		1100 13TH AVE E		WEST FARGO	ND	58078	1033208640	54	Home Medical Equipment	4672001	THRIFTY WHITE DRUG #46	1033208640		
24	$91	911770748	RAUM	JENNIFER	2960 SETER PARKWAY		FARGO	ND	58104	1306821038	11	Internal Medicine	3088	SANFORD CLINIC INTERNAL	1942241351		
2	$91	450310159	BRYAN	ERICH	164 WEST 13TH STREET		GRAFTON	ND	58237	1740459551	30	Radiology	282001	GRAFTON FAMILY CLINIC	1558423665		
4	$91	274064376	LARSON	JONATHAN	4622 40TH AVE S		FARGO	ND	58104	1912061458	41	Optometrist	7816001	OSGOOD EYECARE	1184992364		
1	$90	861058655	DOTZENROD	ALISON	430 5TH ST N		BRECKENRIDGE	MN	56520	1679660377	67	Occupational Therapy	5909001	ORTHOPEDIC AND SPORTS PH	1811923535		
2	$90	410724029	ANDERSON	KARI	323 S MINNESOTA ST		CROOKSTON	MN	56716	1336242916	50	Nurse Practitioner	5548016	RIVERVIEW SPECIALTY CLIN	1487944898		
2	$89	450310462	AYUCK	GLORIA	711 DELMORE DR		ROSEAU	MN	56751	1124391461	50	Nurse Practitioner	409001	ALTRU ROSEAU	1770672289		
1	$89	450322073	MCCLURE	RONALD	520 MAIN AVE STE 705		FARGO	ND	58103	1215925276	42	Dentist	7326001	MCCLURE RONALD P DDS	1215925276		
1	$89	450413089	HILTS	GEORGE	210 10TH ST SE		JAMESTOWN	ND	58401	1235186040	18	Opthalmology	278007	DAKOTA EYE INSTITUTE DBA	1962449835		
1	$89	450413089	LITCHFIELD	DOUGLAS	341 1ST ST E		DICKINSON	ND	58601	1316994130	18	Opthalmology	278009	DAKOTA EYE INSTITUTE DBA	1962449835		
1	$89	320304357	KHOSLA	SEEMA	4152 30TH AVE S STE 103B		FARGO	ND	58104	1659462455	11	Internal Medicine	7238001	CENTER FOR SLEEP LLC	1740503358		
13	$89	611481142	GIESEKE	STEPHANIE	4622 40 AVE S STE B		FARGO	ND	58104	1225160153	65	Physical Therapy	6456001	AT HOME THERAPY SERVICES	1437173945		
23	$88	450226909	KETTERLING	RHONDA	801 BROADWAY NORTH		FARGO	ND	58102	1669490223	11	Internal Medicine	7742001	SANFORD BROADWAY CLINIC	1184917924		
1	$88	450226700	HASSAN	SYED	222 N 7TH ST		BISMARCK	ND	58501	1063638989	39	Nephrology	4001	SANFORD CLINIC	1811941172		
1	$88	450226700	ARAZI	RICHARD	1213 15TH AVE W		WILLISTON	ND	58801	1710915681	13	Neurology	4102	SANFORD AT CRAVEN HAGAN	1811941172		
6	$88	450310462	TROSKEY	PATRICIA	19120 200TH ST		GREENBUSH	MN	56726	1730115841	50	Nurse Practitioner	409003	ALTRU CLINIC GREENBUSH	1962591438		
1	$88	410695598	MAYO	WILLIAM	401 MAIN ST		MILNOR	ND	58060	1750313946	8	Family Practice	274001	ST FRANCIS HEALTHCARE CA	1235215252		
3	$88	450342671	SHOGREN	MARIDEE	360 DIVISION AVE STE 200		GRAND FORKS	ND	58201	1942400247	46	Nurse Midwives	189001	VALLEY HEALTH	1194922328		
5	$88	450226700	MILLER	JOHN	2615 FAIRWAY ST		DICKINSON	ND	58601	1346448925	30	Radiology	4008	SANFORD HEALTH DICKINSON	1811941172		
1	$87	410851371	DENISON	JANET	603 BRUCE ST		CROOKSTON	MN	56716	1568639169	80	Clinical Social Worker	1269001	NORTHWESTERN MENTAL HEAL	1508835133		
8	$87	911770748	PFENNIG	GREGORY	1720 UNIVERSITY DR S		FARGO	ND	58103	1932126414	50	Nurse Practitioner	3904	SANFORD SOUTH UNIVERSITY	1942241351		
1	$85	270056777	SOLBERG	ROBERTA	301 HWY 15		NORTHWOOD	ND	58267	1215186523	50	Nurse Practitioner	6163001	VALLEY COMMUNITY HEALTH	1356327001		
3	$85	450310462	CAOILI	HENRI ROMM	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1285729533	25	Physical Medicine and Rehab	9001	ALTRU HEALTH SYSTEM	1043309552		
8	$85	450226700	MILLER	JOHN	715 E BROADWAY AVE		BISMARCK	ND	58501	1346448925	30	Radiology	4050	SANFORD SEVENTH AND BROA	1811941172		
16	$84	911770748	TINGUELY	CHRISTINA	2400 32ND AVE S		FARGO	ND	58103	1740333079	16	Obstet/Gynecology	3014	SANFORD SOUTHPOINTE CLIN	1942241351		
22	$84	270030472	BAKKER	HILTON	5050 WOLF CREEK RD NE		BEMIDJI	MN	56601	1992745533	30	Radiology	6235001	RURAL RADIOLOGY CONSULTA	1043267768		
1	$83	410695598	EMERY	PATRICK	401 MAIN ST		MILNOR	ND	58060	1144247008	8	Family Practice	274001	ST FRANCIS HEALTHCARE CA	1235215252		
1	$83	450458242	SWISHER	PAUL	12 6TH AVE SW		BOWMAN	ND	58623	1629164371	1	General Practice	2086001	SOUTHWEST MEDICAL CLINIC	1023083714		
1	$83	770637498	MATHESON	THOMAS	525 N MAIN ST		WATFORD CITY	ND	58854	1558365106	8	Family Practice	6340001	MCKENZIE COUNTY HEALTHCA	1063420495		
1	$83	450226429	THOMAS	KARI	30 7TH ST W		DICKINSON	ND	58601	1073606505	97	Physician Assistant	95001	ST JOSEPHS HOSPITAL AND	1992947956		
7	$83	450231183	RUST	PAUL	1301 15TH AVE W		WILLISTON	ND	58801	1700833720	30	Radiology	711004	MERCY RADIOLOGY SERVICES	1629234257		
9	$83	911770748	CATALAN	RICHARD	2400 32ND AVE S		FARGO	ND	58103	1194771097	30	Radiology	3014	SANFORD SOUTHPOINTE CLIN	1942241351		
1	$82	450340688	WEST	BARBARA	1000 HIGHWAY 12		HETTINGER	ND	58639	1427149780	71	Certified Diabetic Educator	367001	WEST RIVER HEALTH SERVIC	1174606271		
1	$82	410695598	MYKLEBUST	KIMBERLEY	401 MAIN ST		MILNOR	ND	58060	1881980894	50	Nurse Practitioner	274001	ST FRANCIS HEALTHCARE CA	1235215252		
1	$82	450227752	GRAEBER	LUANNA	437 3RD AVE SE		GARRISON	ND	58540	1609846823	97	Physician Assistant	432001	GARRISON FAMILY CLINIC	1952381873		
1	$82	450226909	MATTHYS	GARY	1720 UNIVERSITY DR S		FARGO	ND	58103	1922025568	20	Orthopedic Surgery	7742004	SANFORD SOUTH UNIVERSITY	1184917924		
2	$81	450227012	COX	ROBIN	1031 7TH ST NE		DEVILS LAKE	ND	58301	1265413629	8	Family Practice	76001	THE MERCY HOSPITAL OF DE	1790751170		
1	$81	450226700	AMUNDSON	DONNA	300 N 7TH ST		BISMARCK	ND	58501	1972691236	71	Certified Diabetic Educator	440001	SANFORD MEDICAL CENTER/B	1811941172		
1	$81	450226558	SELL	SHANON	604 1ST STREET NORTH		NEW TOWN	ND	58763	1609895879	8	Family Practice	635030	TRINITY COMMUNITY CLINIC	1083653752		
6	$81	450226700	MILLER	JOHN	801 21ST AVE SE		MINOT	ND	58701	1346448925	30	Radiology	4065	SANFORD HEALTH WALK-IN C	1811941172		
4	$80	911770748	BARTNICK	JAMIE	801 BROADWAY NORTH		FARGO	ND	58102	1427386838	50	Nurse Practitioner	3001	SANFORD BROADWAY CLINIC	1942241351		
1	$80	450311516	MICKELSON	BARBARA	3 EAST 4TH ST #100		WILLISTON	ND	58801	1225292311	50	Nurse Practitioner	114001	WILLISTON RADIOLOGY CONS	1942375852		
5	$80	261175213	SEHGAL	BANTOO	2430 20TH ST SW		JAMESTOWN	ND	58401	1558677690	20	Orthopedic Surgery	6885018	INNOVIS HEALTH, LLC DBA	1073793725		
1	$80	450226909	REVLAND	PAUL	1720 UNIVERSITY DR S		FARGO	ND	58103	1629265814	62	Psychology	7742004	SANFORD SOUTH UNIVERSITY	1184917924		
1	$80	264757871	GARMANN	HEIDI	511 1/2 2ND ST W		WILLISTON	ND	58801	1669541488	88	#N/A	5728001	GARMANN CONSULTING, INC.	1669541488		
3	$79	470757739	WEGH	AMANDA	683 STATE AVE STE B		DICKINSON	ND	58601	1376783134	65	Physical Therapy	1985001	OMAHA THERAPY INC. DBA R	1730280371		
1	$79	261175213	BEACHY	ARDEN	3000 32ND AVE S		FARGO	ND	58103	1164412151	72	Emergency Medicine	6885016	ESSENTIA HEALTH HOSPITAL	1215125463		
7	$78	261175213	ERICKSON	RICK	1702 UNIVERSITY DR S		FARGO	ND	58103	1891710570	97	Physician Assistant	6885031	INNOVIS HEALTH, LLC DBA	1255677084		
1	$78	450226419	NELSON	JOHN	800 S MAIN AVE		RUGBY	ND	58368	1952481723	8	Family Practice	18001	GOOD SAMARITAN HOSPITAL	1588751325		
1	$78	410695598	WEINER	MICHAEL	2400 ST FRANCIS DRIVE		BRECKENRIDGE	MN	56520	1497718829	72	Emergency Medicine	207001	ST FRANCIS MEDICAL CENTE	1891954574		
11	$78	911770748	GABA	ANU	332 2ND AVE N		WAHPETON	ND	58075	1922025907	75	Oncology	3016	SANFORD HEALTH WAHPETON	1942241351		
5	$78	450310159	PHELAN	JEFFREY	164 WEST 13TH STREET		GRAFTON	ND	58237	1497734123	30	Radiology	282001	GRAFTON FAMILY CLINIC	1558423665		
5	$78	450340688	BERGQUIST	ROSE	1000 HIGHWAY 12		HETTINGER	ND	58639	1952401200	97	Physician Assistant	367001	WEST RIVER HEALTH SERVIC	1174606271		
4	$78	450260821	WALDOCH	ALEXIS	121 N BROADWAY		LINTON	ND	58552	1750729638	63	Pharmacy	7628001	WHITE DRUG	1548572076		
64	$77	911770748	LEITCH	JOHN	820 4TH ST N		FARGO	ND	58102	1811914583	75	Oncology	3030	SANFORD ROGER MARIS CANC	1942241351		
12	$77	911770748	SANFORD SOUTH UNIV	TY EYE CEN	1720 UNIVERSITY DR S		FARGO	ND	58103	1689694317	58	Other Individual Supplier - Optometric Supplier	3904	SANFORD SOUTH UNIVERSITY	1942241351		

4	$77	450231183	POLLOCK	ROBERT	1301 15TH AVE W		WILLISTON	ND	58801	1407849391	30	Radiology	711004	MERCY RADIOLOGY SERVICES	1629234257		
1	$77	450226711	MALUCKY	ANDREA	900 E BROADWAY AVE		BISMARCK	ND	58501	1265664726	50	Nurse Practitioner	501001	ST ALEXIUS MEDICAL CENTE	1205868429		
34	$77	911770748	CHAVOUR	SREEKANTH	2400 32ND AVE S		FARGO	ND	58103	1588998918	11	Internal Medicine	3014	SANFORD SOUTHPOINTE CLIN	1942241351		
1	$77	450226909	COX	CANDICE	801 BROADWAY NORTH		FARGO	ND	58102	1467417923	50	Nurse Practitioner	7742001	SANFORD BROADWAY CLINIC	1184917924		
3	$76	450395652	ALTRU SPECIALTY SE	ES INC CRO	400 S MINNESOTA ST		CROOKSTON	MN	56716	1538105929	54	Home Medical Equipment	406002	ALTRU SPECIALTY SERVICES	1538105929		
1	$75	450226429	BATHURST	ROBERT	30 7TH ST W		DICKINSON	ND	58601	1821001447	72	Emergency Medicine	95001	ST JOSEPHS HOSPITAL AND	1992947956		
15	$75	261175213	SAQUIB	AZIM	3000 32ND AVE S		FARGO	ND	58103	1023096096	11	Internal Medicine	6885030	INNOVIS HEALTH, LLC DBA	1578907655		
1	$75	911770748	HENDRICKS	LARRY	21 WILEY AVE S		LIDGERWOOD	ND	58053	1992723530	97	Physician Assistant	3070	SANFORD HEALTH LIDGERWOO	1942241351		
15	$75	450260821	WHITE DRUG #5		117 N 5TH ST		BISMARCK	ND	58501	1760572606	63	Pharmacy	4652001	WHITE DRUG #5	1760572606		
1	$75	450226700	MEIER	DAWN	300 N 7TH ST		BISMARCK	ND	58501	1720184112	50	Nurse Practitioner	440001	SANFORD MEDICAL CENTER/B	1811941172		
8	$75	911770748	HUTCHISON	JOHN	700 1ST AVE S		FARGO	ND	58103	1912937111	14	Neurological Surgery	3027	SANFORD NEUROSCIENCE CLI	1942241351		
8	$74	50546085	BENCKER	SHANON	738 KIRKWOOD MALL		BISMARCK	ND	58504	1972612075	41	Optometrist	2730001	MIDWEST VISION CENTERS -	1851463590		
1	$74	450226700	BROUSSEAU	MICHAEL	801 21ST AVENUE SE		MINOT	ND	58701	1477780526	65	Physical Therapy	4052	SANFORD HEALTH OCCUPATIO	1669524351		
5	$74	820558836	FERNANDEZ	OSCAR	905 MAIN ST		LISBON	ND	58054	1184613465	8	Family Practice	5840004	LISBON AREA HEALTH SERVI	1811168958		
2	$74	460454784	LUNZMAN	KARA	508 MOCCASIN DR		ABERDEEN	SD	57401	1225363302	41	Optometrist	6970001	BARNETT VISION CENTER, L	1861609075		
1	$74	450231181	ANDRUSKI	HEIDI	2422 20TH ST SW		JAMESTOWN	ND	58401	1881780146	43	Certified Registered Nurse Anesthetist	77001	JAMESTOWN REGIONAL MEDIC	1407957277		
1	$74	450226558	BREWSTER	LEAH	400 BURDICK EXPY E		MINOT	ND	58701	1598104119	50	Nurse Practitioner	635006	TRINITY MEDICAL GROUP	1083653752		
3	$74	460905062	SCHMITZ	JACOB	4342 15 AVE S STE 104		FARGO	ND	58103	1790065605	35	Chiropractor	7831001	FREEDOM CHIROPRACTIC HEA	1790065605		
4	$74	450260821	JOHNSON	GARRET	1401 33RD ST S		FARGO	ND	58103	1801178041	63	Pharmacy	1934001	WHITE DRUG #39	1215026828		
3	$74	450226909	SHANAAH	ALMOTHANA	801 BROADWAY NORTH		FARGO	ND	58102	1205889748	11	Internal Medicine	7742001	SANFORD BROADWAY CLINIC	1184917924		
2	$73	450226909	HAIDER	NAVEED	100 4TH ST S		FARGO	ND	58103	1831117480	26	Psychiatry (MD)	7742006	SANFORD PROFESSIONAL BUI	1184917924		
2	$73	261175213	SWENSON	TIFFANY	1702 UNIVERSITY DR S		FARGO	ND	58103	1619164654	97	Physician Assistant	6885031	INNOVIS HEALTH, LLC DBA	1255677084		
4	$73	450310462	HALVORSON	LARRY	725 HAMLINE ST		GRAND FORKS	ND	58203	1457442469	8	Family Practice	9009	ALTRU FAMILY MEDICINE RE	1043309552		
13	$73	450226909	BRAKKE	KAYLA	801 BROADWAY NORTH		FARGO	ND	58102	1447518147	68	Licensed Registered Dietitian	7742001	SANFORD BROADWAY CLINIC	1184917924		
1	$73	450413089	RANUM	MICHAEL	3119 N 14TH ST		BISMARCK	ND	58503	1437101888	41	Optometrist	278002	DAKOTA EYE INSTITUTE	1962449835		
2	$73	450226711	HOFFERBER	RICK	1177 BORDER LANE		WASHBURN	ND	58577	1811073174	50	Nurse Practitioner	1298001	WASHBURN FAMILY CLINIC	1831267236		
1	$72	261404354	MCCOY JR	FRANKLIN	216 14TH AVE SW		SIDNEY	MT	59270	1760572770	22	Pathology, Anatomy, Clinical Pathology	7276002	JOHN B ANDELIN MD PC DBA	1821248477		
10	$72	911770748	SANFORD HEALTH WAH	N EYE CENT	332 2ND AVE N		WAHPETON	ND	58075	1467519546	58	Other Individual Supplier - Optometric Supplier	3086	SANFORD HEALTH WAHPETON	1942241351		
2	$72	263047434	RATAJCZAK	AMY	1517 32ND AVE S		FARGO	ND	58103	1245444561	97	Physician Assistant	7174002	7 DAY CLINIC SOUTH FARGO	1851547160		
2	$72	263047434	WORREL	LESLIE	1100 19TH AVE N STE L-M		FARGO	ND	58102	1942426788	97	Physician Assistant	7174006	7 DAY CLINIC	1841547387		
1	$72	410724029	BRATVOLD	MARION	323 S MINNESOTA ST		CROOKSTON	MN	56716	1770586034	97	Physician Assistant	5548016	RIVERVIEW SPECIALTY CLIN	1487944898		
1	$72	410724029	REESE	PAUL	323 S MINNESOTA ST		CROOKSTON	MN	56716	1144269374	97	Physician Assistant	5548016	RIVERVIEW SPECIALTY CLIN	1487944898		
1	$72	263047434	EK	MARILYN	1517 32ND AVE S		FARGO	ND	58103	1487745493	50	Nurse Practitioner	7174002	7 DAY CLINIC SOUTH FARGO	1851547160		
1	$72	263047434	MONTPLAISIR	PAMELA	1517 32ND AVE S		FARGO	ND	58103	1437470200	50	Nurse Practitioner	7174002	7 DAY CLINIC SOUTH FARGO	1851547160		
1	$72	263047434	ALLARD	AMY	1100 19TH AVE N STE L-M		FARGO	ND	58102	1316171903	50	Nurse Practitioner	7174006	7 DAY CLINIC	1841547387		
4	$72	460743122	OPTICAL ILLUSIONS		1404 33RD ST S STE 1		FARGO	ND	58103	1770833675	58	Other Individual Supplier - Optometric Supplier	7931001	OPTICAL ILLUSIONS	1770833675		
45	$72	911770748	JALIL	SAJID	801 BROADWAY NORTH		FARGO	ND	58102	1699989939	11	Internal Medicine	3001	SANFORD BROADWAY CLINIC	1942241351		
2	$72	450119890	GETZ	JANEL	108 N MAIN ST		MCVILLE	ND	58254	1982782090	71	Certified Diabetic Educator	301001	NELSON COUNTY HEALTH SYS	1578624136		
1	$71	450282159	SCHWEHR	MARJEAN	101 E BROADWAY AVE		BISMARCK	ND	58501	1447598446	83	Licenses Addiction Counselor-Chemical Dependency	269001	HEARTVIEW FOUNDATION	1417000233		
1	$71	450226700	WORREL	LESLIE	2603 E BROADWAY AVE		BISMARCK	ND	58501	1942426788	97	Physician Assistant	4032	SANFORD HEALTH OCCUPATIO	1669524351		
1	$71	450310159	BRYSON	THOMAS	164 WEST 13TH STREET		GRAFTON	ND	58237	1811101116	30	Radiology	282001	GRAFTON FAMILY CLINIC	1558423665		
8	$71	460448160	THYNE	JASON	601 MAIN AVE		LEMMON	SD	57638	1861480725	65	Physical Therapy	7521001	HANDS ON HEALTH, INC.	1821061847		
3	$70	450232743	BARKMEIER	JEFFREY	115 VIVAN ST		PARK RIVER	ND	58270	1871571083	30	Radiology	598001	P.R. HEALTH CORPORATION	1306850706		
6	$70	911770748	THURGOOD	MICHAEL	801 BROADWAY NORTH		FARGO	ND	58102	1265571137	30	Radiology	3001	SANFORD BROADWAY CLINIC	1942241351		
11	$70	450437696	PRYATEL, JR.	WILLIAM	2605 CIRCLE DR		JAMESTOWN	ND	58401	1184760902	26	Psychiatry (MD)	85001	NORTH DAKOTA STATE HOSPI	1649227075		
3	$70	911770748	SINCLAIR	GARY	801 BROADWAY NORTH		FARGO	ND	58102	1891757613	74	Infectious Diseases	3001	SANFORD BROADWAY CLINIC	1942241351		
7	$69	202032920	PRAIRIE VISION CEN		315 11TH ST N STE A		WAHPETON	ND	58075	1952383713	58	Other Individual Supplier - Optometric Supplier	6508001	PRAIRIE VISION CENTER PC	1952383713		
3	$69	450310462	MADARAM	KONDAL	1001 7TH ST		DEVILS LAKE	ND	58301	1003952144	26	Psychiatry (MD)	9027	ALTRU CLINIC LAKE REGION	1861581373		
14	$69	911770748	MICKELSON	MARGARET	621 DEMERS AVE		E GRAND FORKS	MN	56721	1124045760	16	Obstet/Gynecology	3080	SANFORD HEALTH 621 DEMER	1942241351		
1	$68	450358986	PATEL	SURESH	321 MAIN ST		GACKLE	ND	58442	1235151705	8	Family Practice	610001	WISHEK RURAL HEALTH CLIN	1154522241		
1	$68	456013474	PAGE	GRAYDON	301 MOUNTAIN ST E		CAVALIER	ND	58220	1275512972	30	Radiology	5633001	PEMBINA COUNTY HOSPITAL	1417093949		
2	$68	450368322	SOMMERS	DENNIS	1015 S BROADWAY STE 17		MINOT	ND	58701	1013063544	42	Dentist	7429001	SOMMERS ORTHODONTICS	1013063544		
1	$67	261175213	KAUFFMAN	RUSSELL	3000 32ND AVE S		FARGO	ND	58103	1669629549	97	Physician Assistant	6885016	ESSENTIA HEALTH HOSPITAL	1215125463		
1	$67	331029318	ABRAHAMSON	PHYLLIS	114 3RD ST NE		ROLLA	ND	58367	1699704726	97	Physician Assistant	5836004	NORTHLAND HEALTH PARTNER	1225369523		
2	$67	261175213	DEES	BRIAN	132 4TH AVE NE		VALLEY CITY	ND	58072	1255363693	2	General Surgery	6885024	INNOVIS HEALTH, LLC DBA	1962682617		
2	$67	450226558	GAJANAYAKA	RANIL	1 BURDICK EXPY W		MINOT	ND	58701	1841452380	11	Internal Medicine	635032	TRINITY MEDICAL GROUP	1083653752		
1	$66	271982875	DAHL	JONATHAN	1324 23RD ST S		FARGO	ND	58103	1417288754	42	Dentist	1132001	DAHL, JONATHAN P, DDS, P	1730395435		
4	$66	460224598	SIEGMUND	SHERYL	305 S STATE ST		ABERDEEN	SD	57401	1124062096	30	Radiology	5518001	AVERA MEDICAL GROUP RADI	1437192721		
4	$66	450226909	HERT	KERRIE	801 BROADWAY NORTH		FARGO	ND	58102	1164702395	68	Licensed Registered Dietitian	7742001	SANFORD BROADWAY CLINIC	1184917924		
6	$66	450226711	TEPASTTE	MICHELLE	900 E BROADWAY AVE		BISMARCK	ND	58501	1346285541	8	Family Practice	501001	ST ALEXIUS MEDICAL CENTE	1205868429		
1	$66	261175213	SCHULTZ	JOAN	1702 UNIVERSITY DR S		FARGO	ND	58103	1750303301	50	Nurse Practitioner	6885031	INNOVIS HEALTH, LLC DBA	1255677084		
2	$65	456013474	WOLD	PETER	301 MOUNTAIN ST E		CAVALIER	ND	58220	1861471633	30	Radiology	5633001	PEMBINA COUNTY HOSPITAL	1417093949		
10	$65	911770748	NALLURI	MURALI	801 BROADWAY NORTH		FARGO	ND	58102	1669660379	10	Gastronenterology	3001	SANFORD BROADWAY CLINIC	1942241351		
4	$64	450406080	JACOBSON	JEFFREY	2400 32ND AVE S		FARGO	ND	58103	1245441492	63	Pharmacy	4310001	PRESCRIPTION CENTER PHAR	1396723797		
1	$64	450226553	PFENNIG	GREGORY	570 CHAUTAUQUA BLVD		VALLEY CITY	ND	58072	1932126414	50	Nurse Practitioner	75001	MERCY HOSPITAL	1972698975		
1	$64	450227012	MIDDLETON	DEBRA	1031 7TH ST NE		DEVILS LAKE	ND	58301	1427073188	50	Nurse Practitioner	76001	THE MERCY HOSPITAL OF DE	1790751170		

1	$64	450226429	PRESZLER	ROGER	30 7TH ST W		DICKINSON	ND	58601	1306864905	97	Physician Assistant	95001	ST JOSEPHS HOSPITAL AND	1992947956		
4	$64	450310462	WOOD	JAMES	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1073573044	10	Gastronenterology	9001	ALTRU HEALTH SYSTEM	1043309552		
1	$64	450226700	SCHNEIDER	CHELSEY	222 N 7TH ST		BISMARCK	ND	58501	1992068555	50	Nurse Practitioner	4001	SANFORD CLINIC	1811941172		
1	$64	510183396	NELSON	ROBERTA	4227 9TH AVE SW		FARGO	ND	58103	1285874537	83	Licenses Addiction Counselor-Chemical Dependency	514001	SHAREHOUSE, INC	1205903481		
2	$63	460224598	CIHAK	ROBERT	201 S LLOYD ST STE E106		ABERDEEN	SD	57401	1528039765	4	Otology, Laryngology, Rhinology	6487002	AVERA MEDICAL GROUP EAR	1376831933		
10	$63	450310462	BOGER	ESTELLA	1200 S COLUMBIA RD		GRAND FORKS	ND	58201	1003833435	50	Nurse Practitioner	62001	ALTRU HOSPITAL	1154346161		
4	$63	450260821	ASTVATSATUROVA	CASSANDRA	300 W 11TH ST		WILLISTON	ND	58801	1649522715	63	Pharmacy	6925001	WHITE DRUG #67	1629182605		
1	$63	450231181	MITZEL	FREDRICK	2422 20TH ST SW		JAMESTOWN	ND	58401	1295776714	8	Family Practice	124001	JAMESTOWN REGIONAL MEDIC	1821044652		
8	$63	911770748	NEWMAN	ROXANNE	801 BROADWAY NORTH		FARGO	ND	58102	1033146543	33	Thoracic Surgery	3001	SANFORD BROADWAY CLINIC	1942241351		
4	$61	911770748	PAUL	NAVIN	801 BROADWAY NORTH		FARGO	ND	58102	1164674644	10	Gastronenterology	3001	SANFORD BROADWAY CLINIC	1942241351		
2	$61	943295573	INFUSYSTEM INC		31700 RESEARCH PARK DR		MADISON HTS	MI	48071	1790730596	54	Home Medical Equipment	6601001	INFUSYSTEM INC	1790730596		
6	$61	450437696	YABUT	EDUARDO	2605 CIRCLE DR		JAMESTOWN	ND	58401	1457395691	26	Psychiatry (MD)	85001	NORTH DAKOTA STATE HOSPI	1649227075		
2	$61	261175213	LUND	KARLA	1702 UNIVERSITY DR S		FARGO	ND	58103	1659506186	68	Licensed Registered Dietitian	6885031	INNOVIS HEALTH, LLC DBA	1255677084		
3	$61	460426548	RICHARDS	JUANITA	683 STATE AVE N		DICKINSON	ND	58601	1932168325	97	Physician Assistant	5788001	NEUROSURGICAL & SPINAL S	1538128491		
8	$61	911770748	WILLIAMS	BRENT	929 CENTRAL AVE NW		E GRAND FORKS	MN	56721	1710125893	34	Urology	3055	SANFORD HEALTH 929 CENTR	1942241351		
2	$60	411266009	DWYER	MARK	1611 ANNE ST NW		BEMIDJI	MN	56601	1962420505	18	Opthalmology	7834010	SANFORD BEMIDJI 1611 EYE	1780628149		
2	$60	410724034	JOHNSON	JULIE	1010 S BIRCH		HALLOCK	MN	56728	1134203805	50	Nurse Practitioner	2059001	KITTSON MEMORIAL CLINIC	1740359348		
3	$60	460446760	WERTH	ROGER	310 S PENN ST SUITE 201		ABERDEEN	SD	57401	1245216118	2	General Surgery	7271001	ABERDEEN SURGICAL ASSOCI	1629057989		
24	$60	43603608	MAY	EDWARD	2585 23RD AVE S STE A		FARGO	ND	58103	1295739233	19	Oral Surgery	5686001	PRAIRIE ORAL SURGERY	1598763120		
1	$60	450226909	BREEDON	CATHERINE	801 BROADWAY NORTH		FARGO	ND	58102	1205853207	68	Licensed Registered Dietitian	7742001	SANFORD BROADWAY CLINIC	1184917924		
1	$60	450226909	MARTODAM	SUSAN	1412 MAIN ST		HAWLEY	MN	56549	1073531646	68	Licensed Registered Dietitian	7742015	SANFORD HAWLEY CLINIC	1184917924		
2	$60	450436680	THOMPSON	JOHN	1200 N 8TH ST		NEW SALEM	ND	58563	1548473598	35	Chiropractor	1146001	WASHBURN CHIROPRACTIC, I	1548475023		
5	$59	911770748	KUNKEL	MELISSA	2701 13TH AVE S		FARGO	ND	58103	1336334606	37	Pediatrics	3015	SANFORD CHILDRENS SOUTHW	1942241351		
7	$59	450310159	LONGLEY	DEBORAH	164 WEST 13TH STREET		GRAFTON	ND	58237	1740269794	30	Radiology	282001	GRAFTON FAMILY CLINIC	1558423665		
13	$59	911770748	WOJCIK	SUSAN	801 BROADWAY NORTH		FARGO	ND	58102	1144241480	50	Nurse Practitioner	3001	SANFORD BROADWAY CLINIC	1942241351		
3	$59	450310462	RUSTVANG	DANIEL	1001 7TH ST		DEVILS LAKE	ND	58301	1902992266	50	Nurse Practitioner	9027	ALTRU CLINIC LAKE REGION	1861581373		
21	$58	911770748	MONTPLAISIR	PAMELA	4420 37 AVE S		FARGO	ND	58104	1437470200	50	Nurse Practitioner	3081	SANFORD HEALTH EDGEWOOD	1942241351		
2	$58	450311334	MANDERS	LANDA	401 N 9TH ST		BISMARCK	ND	58501	1598833980	43	Certified Registered Nurse Anesthetist	236001	MID DAKOTA CLINIC	1275587826		
4	$58	410851371	ANDERSON	MICHAEL	603 BRUCE ST		CROOKSTON	MN	56716	1619936739	80	Clinical Social Worker	1269001	NORTHWESTERN MENTAL HEAL	1508835133		
3	$58	911770748	NAGALA	VANI	69 HIGHWAY 13 W		GWINNER	ND	58040	1851380125	11	Internal Medicine	3072	SANFORD HEALTH GWINNER C	1942241351		
2	$58	450311334	TESKE	ARLA	401 N 9TH ST		BISMARCK	ND	58501	1396898649	43	Certified Registered Nurse Anesthetist	236001	MID DAKOTA CLINIC	1275587826		
6	$57	450445938	KOSIR	KRISTEN	3402 13TH AVE S		FARGO	ND	58103	1205857943	41	Optometrist	715001	3-D OPTICAL DBA STERLING	1528175429		
2	$57	450310462	BYERS	NORMAN	1200 S COLUMBIA RD		GRAND FORKS	ND	58201	1205933082	18	Opthalmology	62001	ALTRU HOSPITAL	1154346161		
9	$57	456013474	MULCAHY	PAUL	301 MOUNTAIN ST E		CAVALIER	ND	58220	1467431262	30	Radiology	5633001	PEMBINA COUNTY HOSPITAL	1417093949		
4	$56	450226558	LENERTZ	MICHAEL	101 3RD AVE SW		MINOT	ND	58701	1205936481	48	Podiatry, Surgical chiropody	635027	TRINITY MEDICAL GROUP	1083653752		
6	$56	450273545	DAKOTA DRUG COMPAN	STANLEY	107 S MAIN ST		STANLEY	ND	58784	1770698714	54	Home Medical Equipment	2986001	DAKOTA DRUG COMPANY	1770698714		
1	$56	450231183	BODEAU	GEOFFREY	1301 15TH AVE W		WILLISTON	ND	58801	1770534372	30	Radiology	711004	MERCY RADIOLOGY SERVICES	1629234257		
1	$56	261175213	MUELLER	AMY	801 BELSLY BLVD S		MOORHEAD	MN	56560	1437445327	67	Occupational Therapy	6885034	INNOVIS HEALTH, LLC DBA	1659617504		
1	$55	410695598	PAULEY	SCOTT	2400 ST FRANCIS DRIVE		BRECKENRIDGE	MN	56520	1902884554	21	Pathology, Anatomy, Clinical Pathology	207001	ST FRANCIS MEDICAL CENTE	1891954574		
1	$55	450226558	MARTINSEN	WAYNE	1 BURDICK EXPY W		MINOT	ND	58701	1851352504	26	Psychiatry (MD)	635032	TRINITY MEDICAL GROUP	1083653752		
1	$54	450311818	LASZEWSKI	MICHAEL	900 E BROADWAY		BISMARCK	ND	58506	1801907118	22	Pathology, Anatomy, Clinical Pathology	55002	PATHOLOGY CONSULTANTS	1497736151		
4	$54	450440017	VOEGELE	TRAVIS	212 W MAIN ST		BEULAH	ND	58523	1245580703	35	Chiropractor	1681001	ERICKSON CHIROPRACTIC	1447581202		
9	$54	911770748	PERKEREWICZ	JEDIDIAH	801 BROADWAY NORTH		FARGO	ND	58102	1548469208	16	Obstet/Gynecology	3001	SANFORD BROADWAY CLINIC	1942241351		
1	$54	261175213	YOST	ROBERT	3000 32ND AVE S		FARGO	ND	58103	1194849166	30	Radiology	6885030	INNOVIS HEALTH, LLC DBA	1578907655		
6	$54	911770748	LI	HUNG-KEI	801 BROADWAY NORTH		FARGO	ND	58102	1992906689	11	Internal Medicine	3001	SANFORD BROADWAY CLINIC	1942241351		
2	$54	261175213	SOFORENKO	MARGARET	3000 32ND AVE S		FARGO	ND	58103	1912984402	50	Nurse Practitioner	6885030	INNOVIS HEALTH, LLC DBA	1578907655		
6	$54	450226558	HANJANI	FARZODD	400 BURDICK EXPY E		MINOT	ND	58701	1255530853	30	Radiology	635006	TRINITY MEDICAL GROUP	1083653752		
5	$53	450319218	ADVANCED VISION CE	S	446 3RD AVE W		DICKINSON	ND	58601	1710966049	58	Other Individual Supplier - Optometric Supplier	729001	ADVANCED VISION CENTERS	1710966049		
4	$53	870738986	DRS SCHINDLER & DE		151 N MAIN ST		GARRISON	ND	58540	1083791024	58	Other Individual Supplier - Optometric Supplier	533001	DRS SCHINDLER & DEIS	1083791024		
1	$53	870694180	LILLEJORD	CONNIE	701 3RD STREET NW		JAMESTOWN	ND	58401	1235263815	67	Occupational Therapy	5919001	ANNE CARLSEN CENTER	1598930109		
4	$53	911770748	LESTEBERG	KEITH	2400 32ND AVE S		FARGO	ND	58103	1639196306	16	Obstet/Gynecology	3014	SANFORD SOUTHPOINTE CLIN	1942241351		
3	$52	456013474	BRETZKE	CARL	301 MOUNTAIN ST E		CAVALIER	ND	58220	1386622637	30	Radiology	5633001	PEMBINA COUNTY HOSPITAL	1417093949		
4	$52	450437696	WEISENBURGER	ALLAN	2605 CIRCLE DR		JAMESTOWN	ND	58401	1750427589	50	Nurse Practitioner	85001	NORTH DAKOTA STATE HOSPI	1649227075		
1	$52	456013474	TRUMAN	SUSAN	301 MOUNTAIN ST E		CAVALIER	ND	58220	1356320105	30	Radiology	5633001	PEMBINA COUNTY HOSPITAL	1417093949		
3	$52	450311818	SCHMIDT	JARED	900 E BROADWAY		BISMARCK	ND	58506	1154475101	21	Pathology, Anatomy, Clinical Pathology	55002	PATHOLOGY CONSULTANTS	1497736151		
32	$51	911770748	MYRMOE	JASON	2601 N BROADWAY		FARGO	ND	58102	1003076894	8	Family Practice	3028	SANFORD NORTH FARGO CLIN	1942241351		
3	$51	450310462	SUDA	AMY	607 DEMERS AVE		E GRAND FORKS	MN	56721	1942465851	50	Nurse Practitioner	9040	ALTRU CLINIC EAST GRAND	1740621556		
1	$51	450226909	HOFFMANN	JENNIFER	4420 37 AVE S		FARGO	ND	58104	1295926145	50	Nurse Practitioner	7742029	SANFORD HEALTH EDGEWOOD	1184917924		
1	$51	911770748	LARSON	JON	1245 WASHINGTON AVE		DETROIT LAKES	MN	56501	1508884172	8	Family Practice	3007	SANFORD HEALTH DETROIT L	1942241351		
8	$51	450437696	WILLIAMS	SYLVIA	2605 CIRCLE DR		JAMESTOWN	ND	58401	1497891253	50	Nurse Practitioner	85001	NORTH DAKOTA STATE HOSPI	1649227075		
4	$51	261175213	OLSON-FITZGERALD	HEIDI	3902 13TH AVE S		FARGO	ND	58103	1528094943	97	Physician Assistant	6885032	INNOVIS HEALTH, LLC DBA	1437495264		
1	$51	450226553	MARTIN	RICHARD	570 CHAUTAUQUA BLVD		VALLEY CITY	ND	58072	1689662983	8	Family Practice	75001	MERCY HOSPITAL	1972698975		
1	$51	450227012	DUMBOLTON	JOHN	1031 7TH ST NE		DEVILS LAKE	ND	58301	1336192657	8	Family Practice	76001	THE MERCY HOSPITAL OF DE	1790751170		
2	$51	450226700	TELLO-SKJERSETH	CHRISTINA	2830 N WASHINGTON ST		BISMARCK	ND	58503	1144480971	30	Radiology	4062	SANFORD NORTH CLINIC	1811941172		
3	$51	410851371	JARMUSKEWICZ	JAMES	603 BRUCE ST		CROOKSTON	MN	56716	1225035850	26	Psychiatry (MD)	1269001	NORTHWESTERN MENTAL HEAL	1508835133		
2	$50	450226700	MCINTEE	MICHAEL	1040 TOCOMA AVE		BISMARCK	ND	58504	1053423525	30	Radiology	4059	SANFORD SOUTH CLINIC	1811941172		

4	$50	450226558	TURNEAU	KEVIN	400 BURDICK EXPY E		MINOT	ND	58701	1427032572	30	Radiology	635006	TRINITY MEDICAL GROUP	1083653752		
4	$50	450338325	CAVALIER OPTOMETRY	NIC	201 E 3RD AVE S		CAVALIER	ND	58220	1730173238	58	Other Individual Supplier - Optometric Supplier	197001	CAVALIER OPTOMETRY CLINI	1730173238		
4	$50	460363581	STRUBLE	MARK	310 8TH AVE NW		ABERDEEN	SD	57401	1477575827	41	Optometrist	8108001	VISION CARE ASSOCIATES,	1265502264		
3	$50	261175213	HIRT	ELIZABETH	212 ASPEN AVE NE		MENAHGA	MN	56464	1235274697	97	Physician Assistant	8057001	INNOVIS HEALTH, LLC DBA	1467798322		
5	$50	911770748	TOMPKINS	REBEKAH	2400 32ND AVE S		FARGO	ND	58103	1871783704	16	Obstet/Gynecology	3014	SANFORD SOUTHPOINTE CLIN	1942241351		
6	$49	911770748	CLARDY	DAVID	929 CENTRAL AVE NW		E GRAND FORKS	MN	56721	1063430791	6	Cardivascular Disease	3055	SANFORD HEALTH 929 CENTR	1942241351		
1	$49	410724029	REESE	PAUL	323 S MINNESOTA ST		CROOKSTON	MN	56716	1144269374	97	Physician Assistant	5548006	RIVERVIEW FAMILY PRACTIC	1720009343		
1	$48	450226909	SCHNEIDER	MONICA	700 1ST AVE S		FARGO	ND	58103	1609116037	80	Clinical Social Worker	7742007	SANFORD NEUROSCIENCE CLI	1184917924		
9	$48	911770748	MARSDEN	JENNY	1301 8TH ST S		MOORHEAD	MN	56560	1164678660	97	Physician Assistant	3035	SANFORD MOORHEAD CLINIC	1942241351		
6	$48	411617011	BRANDT	RON	725 CENTER AVE STE 2		MOORHEAD	MN	56560	1851514269	41	Optometrist	1408001	OPTICARE	1952371130		
10	$48	911770748	ULMER	TOSHA	1720 UNIVERSITY DR S		FARGO	ND	58103	1205857547	50	Nurse Practitioner	3904	SANFORD SOUTH UNIVERSITY	1942241351		
2	$47	50546085	MIDWEST VISION CEN		517 DAKOTA AVE		WAHPETON	ND	58075	1457677130	58	Other Individual Supplier - Optometric Supplier	2730005	MIDWEST VISION CENTERS -	1457677130		
1	$47	272042143	KUZMA	GEORGE	401 12 ST N		WHEATON	MN	56296	1457540783	8	Family Practice	7810001	SANFORD WHEATON	1245524669		
1	$47	456013474	MUSCHENHEIM	ALEXANDRA	301 MOUNTAIN ST E		CAVALIER	ND	58220	1184603607	30	Radiology	5633001	PEMBINA COUNTY HOSPITAL	1417093949		
3	$47	261175213	BOEDDEKER	SPRING	3902 13TH AVE S		FARGO	ND	58103	1700836673	50	Nurse Practitioner	6885032	INNOVIS HEALTH, LLC DBA	1437495264		
2	$47	911770748	SKARI	BRADLY	1720 UNIVERSITY DR S		FARGO	ND	58103	1376747030	8	Family Practice	3904	SANFORD SOUTH UNIVERSITY	1942241351		
21	$47	911770748	HOFLAND	SUSAN	820 4TH ST N		FARGO	ND	58102	1265453492	50	Nurse Practitioner	3030	SANFORD ROGER MARIS CANC	1942241351		
2	$47	432056751	RUMMEL	GREGORY	111 E MAIN ST		CENTER	ND	58530	1548306319	35	Chiropractor	6358002	RUMMEL CHIROPRACTIC PC	0		
5	$46	460448160	OLIVER	COLLEEN	601 MAIN AVE		LEMMON	SD	57638	1851364863	65	Physical Therapy	7521001	HANDS ON HEALTH, INC.	1821061847		
3	$46	460224598	WEEKLY	JAMES	201 S LLOYD ST STE E106		ABERDEEN	SD	57401	1467423616	4	Otology, Laryngology, Rhinology	6487002	AVERA MEDICAL GROUP EAR	1376831933		
5	$46	450310462	WALZ	JOEL	1003 N MAIN ST		DRAYTON	ND	58225	1639265994	8	Family Practice	9014	ALTRU DRAYTON	1043309552		
12	$46	911770748	MCLEOD	MATTHEW	1220 SHEYENNE ST		WEST FARGO	ND	58078	1477870681	8	Family Practice	3020	SANFORD WEST FARGO CLINI	1942241351		
5	$46	450226909	JORDAN	ANDREW	2400 32ND AVE S		FARGO	ND	58103	1992723563	18	Opthalmology	7742008	SANFORD SOUTHPOINTE CLIN	1184917924		
9	$44	450310462	JAMES	JOHN	1380 S COLUMBIA RD		GRAND FORKS	ND	58201	1770787830	30	Radiology	9021	ALTRU FAMILY MEDICINE CE	1043309552		
3	$44	411620386	HENKE	WILLIAM	1027 WASHINGTON AVENUE		DETROIT LAKES	MN	56501	1487694493	8	Family Practice	7282008	ST MARY'S ESSENTIA HEALT	1639513377		
3	$44	450369255	MOCH	DANELLE	611 CENTER AVE		ASHLEY	ND	58413	1255323796	41	Optometrist	1040002	EYE CENTER OF THE DAKOTA	1548360761		
1	$44	460440414	WISCHMEIER	CURT	409 MAIN ST		OAKES	ND	58474	1134123565	18	Opthalmology	1822001	OPHTHALMOLOGY ASSOCIATES	1306900634		
1	$44	410724029	AFONYA	IDATONYE	323 S MINNESOTA ST		CROOKSTON	MN	56716	1598710154	2	General Surgery	5548016	RIVERVIEW SPECIALTY CLIN	1487944898		
3	$44	450310159	BALDWIN	MATTHEW	164 WEST 13TH STREET		GRAFTON	ND	58237	1487632725	30	Radiology	282001	GRAFTON FAMILY CLINIC	1558423665		
11	$44	450447382	ESLINGER	NEAL	1301 E FRONT AVE		BISMARCK	ND	58504	1700949054	35	Chiropractor	730001	ESLINGER CHIROPRACTIC	1891853172		
2	$44	450227012	HAGER	DUSTIN	1031 7TH ST NE		DEVILS LAKE	ND	58301	1144531203	97	Physician Assistant	76001	THE MERCY HOSPITAL OF DE	1790751170		
2	$43	861123162	FETTIG	MEGAN	310 N 10TH ST		BISMARCK	ND	58501	1962842120	50	Nurse Practitioner	6459001	ST ALEXIUS HEART & LUNG	1194823021		
4	$43	460388597	SANFORD HOME MEDIC	QUIPMENT	1205 S GRANGE AV STE 101		SIOUX FALLS	SD	57105	1306946520	54	Home Medical Equipment	8130009	SANFORD HOME MEDICAL EQU	1306946520		
8	$43	450310462	TINKLER	JENNIFER	1001 7TH ST		DEVILS LAKE	ND	58301	1982790242	50	Nurse Practitioner	9027	ALTRU CLINIC LAKE REGION	1861581373		
1	$43	450437648	KARLIN	CORINNE	1237 W DIVIDE AVE STE 5		BISMARCK	ND	58501	1467489468	83	Licenses Addiction Counselor-Chemical Dependency	241001	WEST CENTRAL HUMAN SERVI	1649226713		
1	$43	911770748	CASAS	LUIS	801 BROADWAY NORTH		FARGO	ND	58102	1679541841	37	Pediatrics	3001	SANFORD BROADWAY CLINIC	1942241351		
1	$43	450374878	CENTRAL DAKOTA FAM	PHYSICIANS	922 LINCOLN AVE		HARVEY	ND	58341	1720156664	54	Home Medical Equipment	113001	CENTRAL DAKOTA FAMILY PH	1720156664		
1	$42	820558836	TANNER	KATIE	905 MAIN ST		LISBON	ND	58054	1225013634	97	Physician Assistant	5840004	LISBON AREA HEALTH SERVI	1811168958		
1	$42	870738986	SCHINDLER	KEITH	151 N MAIN ST		GARRISON	ND	58540	1386776052	41	Optometrist	533001	DRS SCHINDLER & DEIS	1083791024		
11	$42	450460288	FOOT CARE ASSOCIAT		310 S 5TH STREET		BISMARCK	ND	58504	1669591038	54	Home Medical Equipment	1832001	FOOT CARE ASSOCIATES, PC	1669591038		
1	$42	450310462	JONES	ROGER	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1790797504	20	Orthopedic Surgery	9001	ALTRU HEALTH SYSTEM	1043309552		
1	$42	450226558	KEARNEY	SEAN	101 3RD AVE SW		MINOT	ND	58701	1477748739	20	Orthopedic Surgery	635027	TRINITY MEDICAL GROUP	1083653752		
1	$42	450226558	ULLOA	JUAN	2224 1ST AVE WEST		WILLISTON	ND	58801	1811196504	19	Oral Surgery	635037	TRINITY ORAL & FACIAL SU	1245272277		
2	$42	205332108	KOSTELECKY	MICHAEL	210 W FRONT AVE		BISMARCK	ND	58504	1326102542	41	Optometrist	6900002	EYES ON PARKWAY	1679631477		
1	$41	450226558	CHAUDHARY	AYAZ	1 BURDICK EXPY W		MINOT	ND	58701	1639289382	10	Gastronenterology	635032	TRINITY MEDICAL GROUP	1083653752		
2	$41	450226700	BLANCHARD	JOEL	1531 W VILLARD ST STE A		DICKINSON	ND	58601	1356368021	8	Family Practice	4041	SANFORD HEALTH OCCUPATIO	1669524351		
4	$41	456013474	HOMMEYER	STEVEN	301 MOUNTAIN ST E		CAVALIER	ND	58220	1356329593	30	Radiology	5633001	PEMBINA COUNTY HOSPITAL	1417093949		
27	$41	911770748	MEARS	JULIE	2400 32ND AVE S		FARGO	ND	58103	1508136003	50	Nurse Practitioner	3014	SANFORD SOUTHPOINTE CLIN	1942241351		
1	$40	410724029	PALKERT	DIANE	323 S MINNESOTA ST		CROOKSTON	MN	56716	1093807786	20	Orthopedic Surgery	5548016	RIVERVIEW SPECIALTY CLIN	1487944898		
3	$40	450231183	NOBREGA	JOHN	1301 15TH AVE W		WILLISTON	ND	58801	1336188671	30	Radiology	711004	MERCY RADIOLOGY SERVICES	1629234257		
2	$40	450226700	RUD	BILLIE	300 N 7TH ST		BISMARCK	ND	58501	1639275944	50	Nurse Practitioner	440001	SANFORD MEDICAL CENTER/B	1811941172		
3	$40	450226909	HANISCH	STEFANIE	2701 13TH AVE S		FARGO	ND	58103	1447350400	26	Psychiatry (MD)	7742009	SANFORD CHILDRENS SOUTHW	1184917924		
7	$40	450310462	WIJETUNGA	MEVAN	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1457308645	6	Cardivascular Disease	9001	ALTRU HEALTH SYSTEM	1043309552		
1	$40	450255914	BICHLER	LORI	203 S MAIN		ZEELAND	ND	58581	1295840395	50	Nurse Practitioner	343003	AMC CLINIC INC DBA ZEELA	1295777951		
5	$40	911770748	ASLESON	JOHN	2400 32ND AVE S		FARGO	ND	58103	1114190493	30	Radiology	3014	SANFORD SOUTHPOINTE CLIN	1942241351		
2	$39	411342677	KOSLOFSKY	NONA	213 7TH ST S		MOORHEAD	MN	56560	1013065739	35	Chiropractor	1400001	MOORHEAD CHIROPRACTIC CL	1427106145		
2	$39	450226909	JASTI	ANIL	1720 UNIVERSITY DR S		FARGO	ND	58103	1669433009	11	Internal Medicine	7742004	SANFORD SOUTH UNIVERSITY	1184917924		
2	$39	911770748	RADKE	ARMAND	1245 WASHINGTON AVE		DETROIT LAKES	MN	56501	1447287677	41	Optometrist	3007	SANFORD HEALTH DETROIT L	1942241351		
7	$39	204890017	LISBON VISION CENT		17 11TH AVE W		LISBON	ND	58054	1407896673	58	Other Individual Supplier - Optometric Supplier	1149001	LISBON VISION CENTER, P.	1407896673		
2	$39	450339815	LARSEN, RAYMOND, M		916 5TH AVE NE		JAMESTOWN	ND	58401	1932193737	58	Other Individual Supplier - Optometric Supplier	1578001	LARSEN, RAYMOND, MD	1932193737		
5	$39	456013474	ARSENAULT	TODD	301 MOUNTAIN ST E		CAVALIER	ND	58220	1902890726	30	Radiology	5633001	PEMBINA COUNTY HOSPITAL	1417093949		
3	$37	810490456	COMMUNITY HOME OXY	INC.	114 W BENHAM ST		GLENDIVE	MT	59330	1427038298	54	Home Medical Equipment	7956001	COMMUNITY HOME OXYGEN IN	1427038298		
2	$37	450321020	EYECARE ASSOCIATES		3902 13TH AVE SW		FARGO	ND	58103	1811077100	58	Other Individual Supplier - Optometric Supplier	7916001	EYECARE ASSOCIATES PC	1811077100		
2	$36	200880846	BUSH	BETH	340 MAIN ST		ARTHUR	ND	58006	1073801239	63	Pharmacy	2975002	ARTHUR DRUG	1982655049		
5	$36	450310159	LAMBERT	DAVID	164 WEST 13TH STREET		GRAFTON	ND	58237	1154384527	30	Radiology	282001	GRAFTON FAMILY CLINIC	1558423665		
8	$36	911770748	ASKEW	R MARK	2301 25TH ST S STE A		FARGO	ND	58103	1114979655	20	Orthopedic Surgery	3075	SANFORD ORTHOPEDICS SPOR	1942241351		

1	$36	450226700	IWAMOTO	MATTHEW	2615 FAIRWAY ST		DICKINSON	ND	58601	1073547014	30	Radiology	4008	SANFORD HEALTH DICKINSON	1811941172			
1	$35	264581116	JOHNSON	AMBER	1451 44TH AVE S #A		GRAND FORKS	ND	58201	1619041860	43	Certified Registered Nurse Anesthetist	7392001	SWEET DREAMS ANESTHESIA	1770710659			
5	$35	203909937	WEIR EYE CLINIC, L		849 3RD AVE W		DICKINSON	ND	58601	1629076245	58	Other Individual Supplier - Optometric Supplier	256001	WEIR EYE CLINIC, LLC	1629076245			
12	$35	911770748	KRINGLIE	JENNIFER	1720 UNIVERSITY DR S		FARGO	ND	58103	1235151721	50	Nurse Practitioner	3904	SANFORD SOUTH UNIVERSITY	1942241351			
3	$35	450226909	HOCHSTEIN	LEAH	801 BROADWAY NORTH		FARGO	ND	58102	1457799652	50	Nurse Practitioner	7742001	SANFORD BROADWAY CLINIC	1184917924			
1	$35	450226711	MONASKY	MARK	900 E BROADWAY AVE		BISMARCK	ND	58501	1467537217	14	Neurological Surgery	501001	ST ALEXIUS MEDICAL CENTE	1205868429			
2	$35	450260821	ERICKSON	HOLLY	1100 13TH AVE E		WEST FARGO	ND	58078	1609121821	63	Pharmacy	4672001	THRIFTY WHITE DRUG #46	1033208640			
2	$34	410706143	DARGUS	CORINNE	900 HILLIGOSS BLVD SE		FOSSTON	MN	56542	1174559611	97	Physician Assistant	2065001	FIRST CARE MEDICAL SERVI	1073638565			
2	$34	450226909	SPINA	JULIE	4000 28TH AVE S		MOORHEAD	MN	56560	1194747758	8	Family Practice	7742014	SANFORD MOORHEAD CLINIC	1184917924			
5	$34	450226558	TRINITY REGIONAL E	RE	1321 W DAKOTA PARKWAY		WILLISTON	ND	58801	1245285816	58	Other Individual Supplier - Optometric Supplier	635038	TRINITY REGIONAL EYECARE	1083653752			
5	$34	450310462	PRESCOTT	TRISHA	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1487895660	30	Radiology	9001	ALTRU HEALTH SYSTEM	1043309552			
1	$34	205993777	JOHNSON	AARON	726 S 2ND ST		BISMARCK	ND	58504	1104989771	42	Dentist	6914001	THE SMILE CENTER	1104989771			
2	$34	911770748	LUKE	MADELINE	420 S 7TH ST		OAKES	ND	58474	1184641854	11	Internal Medicine	3068	SANFORD HEALTH OAKES CLI	1942241351			
2	$34	261175213	FARAH	NAZIH	3000 32ND AVE S		FARGO	ND	58103	1508816315	30	Radiology	6885030	INNOVIS HEALTH, LLC DBA	1578907655			
2	$33	450226558	HO	WARREN	1 BURDICK EXPY W		MINOT	ND	58701	1073721965	39	Nephrology	635032	TRINITY MEDICAL GROUP	1083653752			
2	$33	450260821	LABAY	JAY	1401 33RD ST S		FARGO	ND	58103	1053667774	63	Pharmacy	1934001	WHITE DRUG #39	1215026828			
12	$33	460224598	AGUILAR	MELCHOR	305 S STATE ST		ABERDEEN	SD	57401	1811931702	30	Radiology	5518001	AVERA MEDICAL GROUP RADI	1437192721			
2	$33	450226472	NESS	CONDETTA	4 N PARK ST		NORTHWOOD	ND	58267	1326048232	50	Nurse Practitioner	64001	NORTHWOOD DEACONESS HEAL	1356449136			
2	$32	911770748	PROCHASKA	VERN	2301 25TH ST S STE A		FARGO	ND	58103	1891845947	20	Orthopedic Surgery	3075	SANFORD ORTHOPEDICS SPOR	1942241351			
1	$32	456002481	ROTELIUK	LISA	500 UNIVERSITY AVE W		MINOT	ND	58707	1396808283	66	Speech Therapy	206001	MINOT STATE UNIVERSITY D	1528198975			
2	$32	450260821	HOFFNER	ERICA	2475 32 AVE S STE 1		GRAND FORKS	ND	58201	1396185286	63	Pharmacy	1932001	WHITE DRUG #9	1689763294			
2	$32	450260821	WHITE DRUG #71		121 N BROADWAY		LINTON	ND	58552	1548572076	54	Home Medical Equipment	7628001	WHITE DRUG	1548572076			
2	$32	911770748	MARSDEN	RICHARD	100 1ST AVE SW STE 2		LAMOURE	ND	58458	1801814413	30	Radiology	3073	SANFORD HEALTH LAMOURE C	1942241351			
1	$31	450226700	FOGARTY	EDWARD	1040 TOCOMA AVE		BISMARCK	ND	58504	1902826340	30	Radiology	4059	SANFORD SOUTH CLINIC	1811941172			
5	$31	911770748	DERANEY	JAIMIE	1412 MAIN ST		HAWLEY	MN	56549	1629096367	16	Obstet/Gynecology	513001	SANFORD HAWLEY CLINIC	1942241351			
3	$31	450310159	KNUTZEN	ANDERS	164 WEST 13TH STREET		GRAFTON	ND	58237	1912985037	30	Radiology	282001	GRAFTON FAMILY CLINIC	1558423665			
5	$31	911770748	WILKE	RUSSELL	1301 8TH ST S		MOORHEAD	MN	56560	1811007966	11	Internal Medicine	3035	SANFORD MOORHEAD CLINIC	1942241351			
1	$31	450310462	LEACH	KELLY	1200 S COLUMBIA RD		GRAND FORKS	ND	58201	1972836385	50	Nurse Practitioner	62001	ALTRU HOSPITAL	1154346161			
1	$31	450311334	SCHUMACHER-FEILER	PAULA	401 N 9TH ST		BISMARCK	ND	58501	1417000985	43	Certified Registered Nurse Anesthetist	236001	MID DAKOTA CLINIC	1275587826			
2	$30	261175213	FRENCH BAKER	KARLA	3000 32ND AVE S		FARGO	ND	58103	1881640522	50	Nurse Practitioner	6885030	INNOVIS HEALTH, LLC DBA	1578907655			
2	$30	450226700	BLANCHARD	JOEL	801 21ST AVE SE		MINOT	ND	58701	1356368021	8	Family Practice	4065	SANFORD HEALTH WALK-IN C	1811941172			
2	$30	450311334	SCHAAR	LAUNI	401 N 9TH ST		BISMARCK	ND	58501	1952352148	43	Certified Registered Nurse Anesthetist	236001	MID DAKOTA CLINIC	1275587826			
2	$30	450435389	WALHALLA PRESCRIPT	SHOP, INC	1102 CENTRAL AVE		WALHALLA	ND	58282	1053414565	54	Home Medical Equipment	4579001	WALHALLA PRESCRIPTION SH	1053414565			
2	$30	411266009	WILL	RODNEY	1300 ANNE STREET NW		BEMIDJI	MN	56601	1033131628	11	Internal Medicine	7834004	SANFORD BEMIDJI MAIN CLI	1780628149			
9	$30	911770748	MAGURA	CONNIE	1720 UNIVERSITY DR S		FARGO	ND	58103	1235156845	8	Family Practice	3904	SANFORD SOUTH UNIVERSITY	1942241351			
4	$30	450310159	MAY	BENJAMIN	164 WEST 13TH STREET		GRAFTON	ND	58237	1710172960	30	Radiology	282001	GRAFTON FAMILY CLINIC	1558423665			
4	$29	450232743	BERGER	MARK	115 VIVAN ST		PARK RIVER	ND	58270	1962481747	30	Radiology	598001	P.R. HEALTH CORPORATION	1306850706			
5	$29	456013474	DRAKE	DAVID	301 MOUNTAIN ST E		CAVALIER	ND	58220	1528046612	30	Radiology	5633001	PEMBINA COUNTY HOSPITAL	1417093949			
4	$29	261175213	MEYER	LANA	3902 13TH AVE S		FARGO	ND	58103	1851520647	50	Nurse Practitioner	6885032	INNOVIS HEALTH, LLC DBA	1437495264			
1	$29	410843966	MARTIN	BRIAN	1010 32ND AVE S		MOORHEAD	MN	56560	1043554207	80	Clinical Social Worker	288001	LAKELAND MENTAL HEALTH C	1366480287			
1	$29	450226711	JOHANSEN	JAMES	1177 BORDER LANE		WASHBURN	ND	58577	1538166673	8	Family Practice	1298001	WASHBURN FAMILY CLINIC	1831267236			
1	$29	450226909	MARSDEN	RICHARD	1412 MAIN ST		HAWLEY	MN	56549	1801814413	30	Radiology	7742015	SANFORD HAWLEY CLINIC	1184917924			
3	$29	450448690	EGGLESTON	KATHRYN	512 1ST AVE N		FARGO	ND	58102	1780689539	8	Family Practice	1823001	RED RIVER WOMEN'S CLINIC	1205971447			
4	$28	911770748	KNUTSON	CYNTHIA	700 1ST AVE S		FARGO	ND	58103	1841218419	13	Neurology	3027	SANFORD NEUROSCIENCE CLI	1942241351			
6	$28	450310159	TAI	ANGELA	164 WEST 13TH STREET		GRAFTON	ND	58237	1336212810	30	Radiology	282001	GRAFTON FAMILY CLINIC	1558423665			
1	$28	450310462	MACLEOD	MARY	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1972695302	43	Certified Registered Nurse Anesthetist	9001	ALTRU HEALTH SYSTEM	1043309552			
19	$28	911770748	NASEER	OSAMA	1720 UNIVERSITY DR S		FARGO	ND	58103	1346267887	8	Family Practice	3904	SANFORD SOUTH UNIVERSITY	1942241351			
12	$28	270941110	WALLS LTC PHARMACY		1020 S WASHINGTON ST		GRAND FORKS	ND	58201	1982927406	54	Home Medical Equipment	7776001	WALLS LTC PHARMACY	1982927406			
2	$28	450310159	LOE	MATTHEW	164 WEST 13TH STREET		GRAFTON	ND	58237	1861419293	30	Radiology	282001	GRAFTON FAMILY CLINIC	1558423665			
2	$28	450226558	KELLER	KENNETH	400 BURDICK EXPY E		MINOT	ND	58701	1891781886	30	Radiology	635006	TRINITY MEDICAL GROUP	1083653752			
2	$28	450226558	GUTIERREZ	FRANCISCO	1 BURDICK EXPY W		MINOT	ND	58701	1316020456	8	Family Practice	635032	TRINITY MEDICAL GROUP	1083653752			
2	$28	450226909	BANDE	DINESH	1720 UNIVERSITY DR S		FARGO	ND	58103	1083866339	11	Internal Medicine	7742004	SANFORD SOUTH UNIVERSITY	1184917924			
2	$27	911770748	GHAZI	MAJID	1720 UNIVERSITY DR S		FARGO	ND	58103	1689691545	5	Anesthesiology (MD)	3904	SANFORD SOUTH UNIVERSITY	1942241351			
1	$27	203311866	MCARTHUR	RYAN	401 N 9TH STREET		BISMARCK	ND	58501	1679626972	43	Certified Registered Nurse Anesthetist	6669001	MISSOURI BASIN ANESTHESI	1952413585			
1	$27	911770748	LONG	LILLIAN	100 1ST AVE SW STE 2		LAMOURE	ND	58458	1699086124	50	Nurse Practitioner	3073	SANFORD HEALTH LAMOURE C	1942241351			
2	$27	450410216	BURDETTE	BRITA	835 S WASHINGTON STE 2		BISMARCK	ND	58504	1982800165	63	Pharmacy	5541001	GATEWAY PHARMACY SOUTH	1205927571			
4	$27	460224598	STAPP	CHAD	1200 N 7TH ST		OAKES	ND	58474	1952438996	48	Podiatry, Surgical chiropody	1000003	AVERA MEDICAL GROUP PODI	1871771279			
2	$27	450440223	NYRE, ROBERT, OD		1100 N BROADWAY STE 110		MINOT	ND	58703	1528116969	58	Other Individual Supplier - Optometric Supplier	649001	NYRE, ROBERT, OD	1528116969			
2	$27	911770748	EICKMAN	JOHN	700 1ST AVE S		FARGO	ND	58103	1114106820	14	Neurological Surgery	3027	SANFORD NEUROSCIENCE CLI	1942241351			
2	$27	261175213	BONE	WILLIAM	3000 32ND AVE S		FARGO	ND	58103	1750335055	72	Emergency Medicine	6885030	INNOVIS HEALTH, LLC DBA	1578907655			
3	$27	412002769	LAUTT	HEATHER	307 1ST AVE NW		KENMARE	ND	58746	1285937938	50	Nurse Practitioner	6176001	KENMARE HEALTH CENTER	1649226671			
4	$26	911770748	ANDERSON	BRAD	520 CHAUTAUQUA BLVD		VALLEY CITY	ND	58072	1649298381	48	Podiatry, Surgical chiropody	3002	SANFORD HEALTH VALLEY CI	1942241351			
2	$26	450410216	SILVERNAGEL	JANEL	3101 N 11TH ST STE 2		BISMARCK	ND	58503	1407079346	63	Pharmacy	4298001	GATEWAY PHARMACY	1447356399			
2	$26	450410216	SUNDERLAND	H JAMES	500 BURLINGTON ST SE		MANDAN	ND	58554	1285858233	63	Pharmacy	4666001	GATEWAY PHARMACY	1497847776			
1	$26	456013474	LONGLEY	DEBORAH	301 MOUNTAIN ST E		CAVALIER	ND	58220	1740269794	30	Radiology	5633001	PEMBINA COUNTY HOSPITAL	1417093949			
2	$25	20677066	VISIONWORKS		3902 13TH AVE S STE 406		FARGO	ND	58103	1316224934	58	Other Individual Supplier - Optometric Supplier	7905002	VISIONWORKS	1316224934			

6	$25	911770748	BERGLUND	HOWARD	2301 25TH ST S STE A		FARGO	ND	58103	1831141175	20	Orthopedic Surgery	3075	SANFORD ORTHOPEDICS SPOR	1942241351		
1	$25	450226700	WETSCH	ASHLEY	1040 TOCOMA AVE		BISMARCK	ND	58504	1548600679	50	Nurse Practitioner	4059	SANFORD SOUTH CLINIC	1811941172		
1	$25	456013474	PHELAN	JEFFREY	301 MOUNTAIN ST E		CAVALIER	ND	58220	1497734123	30	Radiology	5633001	PEMBINA COUNTY HOSPITAL	1417093949		
3	$24	911770748	WATKINS	JEFFREY	801 BROADWAY NORTH		FARGO	ND	58102	1053349860	11	Internal Medicine	3001	SANFORD BROADWAY CLINIC	1942241351		
4	$24	911770748	KAPPENMAN	JAMES	2400 32ND AVE S		FARGO	ND	58103	1235369604	16	Obstet/Gynecology	3014	SANFORD SOUTHPOINTE CLIN	1942241351		
5	$24	450226909	ANDERSON	PAULA	801 BROADWAY NORTH		FARGO	ND	58102	1760400436	68	Licensed Registered Dietitian	7742001	SANFORD BROADWAY CLINIC	1184917924		
1	$24	450438397	IRSFELD PHARMACY P		33 9TH ST W		DICKINSON	ND	58601	1710024690	54	Home Medical Equipment	2958001	IRSFELD PHARMACY PC	1710024690		
3	$24	411620386	KULASINGHAM	SHIVAN	1027 WASHINGTON AVENUE		DETROIT LAKES	MN	56501	1558318428	11	Internal Medicine	7282008	ST MARY'S ESSENTIA HEALT	1639513377		
4	$24	450311818	LINZ	LAURIE	900 E BROADWAY		BISMARCK	ND	58506	1184735474	22	Pathology, Anatomy, Clinical Pathology	55002	PATHOLOGY CONSULTANTS	1497736151		
9	$23	911770748	OLSON	ROBERT	1720 UNIVERSITY DR S		FARGO	ND	58103	1518985118	26	Psychiatry (MD)	3904	SANFORD SOUTH UNIVERSITY	1942241351		
14	$23	450310462	JOHNSON	ROBERT	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1013008812	20	Orthopedic Surgery	9001	ALTRU HEALTH SYSTEM	1043309552		
2	$23	911770748	BREIDENBACH	TERRY	1720 UNIVERSITY DR S		FARGO	ND	58103	1902098031	50	Nurse Practitioner	3904	SANFORD SOUTH UNIVERSITY	1942241351		
1	$23	450310462	MADARAM	KONDAL	201 E 3RD AVE S		CAVALIER	ND	58220	1003952144	26	Psychiatry (MD)	37001	ALTRU CAVALIER	1053400523		
6	$23	450226700	JOHNSON	JONATHAN	222 N 7TH ST		BISMARCK	ND	58501	1285648899	37	Pediatrics	4001	SANFORD CLINIC	1811941172		
3	$23	911770748	FABIAN	MATTHEW	929 CENTRAL AVE NW		E GRAND FORKS	MN	56721	1497928972	2	General Surgery	3055	SANFORD HEALTH 929 CENTR	1942241351		
1	$22	450310462	GOERTZEN	TIMOTHY	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1821076068	30	Radiology	9001	ALTRU HEALTH SYSTEM	1043309552		
2	$22	450232743	LAMBERT	DAVID	115 VIVAN ST		PARK RIVER	ND	58270	1154384527	30	Radiology	598001	P.R. HEALTH CORPORATION	1306850706		
5	$22	30477097	LANG	MONICA	3124 COLORADO LANE		BISMARCK	ND	58503	1164709804	65	Physical Therapy	5470004	DAKOTA PHYSICAL THERAPY,	1225261274		
1	$21	450226909	FRANCIS	LORA	801 BROADWAY NORTH		FARGO	ND	58102	1598033094	97	Physician Assistant	7742001	SANFORD BROADWAY CLINIC	1184917924		
1	$21	450310462	BRITTEN	JOSHUA	201 E 3RD AVE S		CAVALIER	ND	58220	1023274230	48	Podiatry, Surgical chiropody	37001	ALTRU CAVALIER	1053400523		
1	$21	450310159	GILLOON	BENJAMIN	164 WEST 13TH STREET		GRAFTON	ND	58237	1902919376	30	Radiology	282001	GRAFTON FAMILY CLINIC	1558423665		
2	$21	261175213	JENNY	DONALD	132 4TH AVE NE		VALLEY CITY	ND	58072	1568402097	6	Cardivascular Disease	6885024	INNOVIS HEALTH, LLC DBA	1962682617		
1	$21	450310462	PANICO	KEVIN	201 E 3RD AVE S		CAVALIER	ND	58220	1225120652	11	Internal Medicine	37001	ALTRU CAVALIER	1053400523		
1	$21	450426511	JORGENSEN	TIMOTHY	1002 FRONT ST		CASSELTON	ND	58012	1578638334	35	Chiropractor	1072003	SPINAL HEALTH ASSOCIATES	1578638334		
1	$21	450437651	VARRIANO	DEONNE	2624 9TH AVE S		FARGO	ND	58103	1053348573	80	Clinical Social Worker	100001	SOUTHEAST HUMAN SERVICE	1932146941		
27	$21	466000364	DEPARTMENT OF SOCI	ERVICES	700 GOVERNORS DRIVE	OFFICE OF REC	PIERRE	SD	57501	1982616595	60	Public Health or Welfare Agency	5436001	DEPARTMENT OF SOCIAL SER	1982616595		
3	$20	450310462	BRUMMER	RONALD	711 DELMORE DR		ROSEAU	MN	56751	1396842175	8	Family Practice	409001	ALTRU ROSEAU	1770672289		
1	$20	261175213	HUNTINGTON	TRACY	1702 UNIVERSITY DR S		FARGO	ND	58103	1225297724	43	Certified Registered Nurse Anesthetist	6885031	INNOVIS HEALTH, LLC DBA	1255677084		
2	$20	911770748	SAUNDERS	MARY	2801 UNIVERSITY DR S		FARGO	ND	58103	1710909353	97	Physician Assistant	3067	SANFORD 2801 MEDICAL BUI	1942241351		
2	$20	911770748	SANFORD CLINIC BEM	PHARMACY	1233 34TH ST NW		BEMIDJI	MN	56601	1679677124	54	Home Medical Equipment	359005	SANFORD BEMIDJI MAIN CLI	1679677124		
2	$20	411266009	MARION	MITCHELL	1300 ANNE STREET NW		BEMIDJI	MN	56601	1255359824	17	Opthalmalogy, Otology, Laryngology, Rhinology	7834004	SANFORD BEMIDJI MAIN CLI	1780628149		
1	$20	450310462	SUDA	AMY	400 S MINNESOTA ST		CROOKSTON	MN	56716	1942465851	50	Nurse Practitioner	406001	ALTRU CROOKSTON	1760494330		
6	$19	911770748	MEIDINGER	ROSS	801 BROADWAY NORTH		FARGO	ND	58102	1043420722	10	Gastronenterology	3001	SANFORD BROADWAY CLINIC	1942241351		
1	$19	450226909	WEINER	MICHAEL	801 BROADWAY NORTH		FARGO	ND	58102	1568484145	30	Radiology	7742001	SANFORD BROADWAY CLINIC	1184917924		
1	$19	450310462	TADROS	NADER	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1932133543	33	Thoracic Surgery	9001	ALTRU HEALTH SYSTEM	1043309552		
2	$19	411620386	RING	ABIGAIL	1027 WASHINGTON AVENUE		DETROIT LAKES	MN	56501	1396786679	8	Family Practice	7282008	ST MARY'S ESSENTIA HEALT	1639513377		
2	$19	450226558	HENINGER	ROBERT	400 BURDICK EXPY E		MINOT	ND	58701	1821179847	8	Family Practice	635006	TRINITY MEDICAL GROUP	1083653752		
6	$19	911770748	MARTENS	KRISTINE	2400 32ND AVE S		FARGO	ND	58103	1477867943	8	Family Practice	3014	SANFORD SOUTHPOINTE CLIN	1942241351		
20	$19	911770748	BREKKE	BROOKE	2400 32ND AVE S		FARGO	ND	58103	1760759302	50	Nurse Practitioner	3014	SANFORD SOUTHPOINTE CLIN	1942241351		
7	$19	911770748	BABU	VARSHA	2400 32ND AVE S		FARGO	ND	58103	1972755452	73	Endocrinology	3014	SANFORD SOUTHPOINTE CLIN	1942241351		
1	$18	450232743	CASPERS	JOHN	115 VIVAN ST		PARK RIVER	ND	58270	1750369989	30	Radiology	598001	P.R. HEALTH CORPORATION	1306850706		
1	$18	450232743	ARSENAULT	TODD	115 VIVAN ST		PARK RIVER	ND	58270	1902890726	30	Radiology	598001	P.R. HEALTH CORPORATION	1306850706		
1	$18	450232743	WEINMANN	ROBERT	115 VIVAN ST		PARK RIVER	ND	58270	1780663450	30	Radiology	598001	P.R. HEALTH CORPORATION	1306850706		
40	$18	911770748	TINGUELY	MATTHEW	621 DEMERS AVE		E GRAND FORKS	MN	56721	1548348410	11	Internal Medicine	3080	SANFORD HEALTH 621 DEMER	1942241351		
13	$18	911770748	KNUTSON BUELING	ROBYN	2601 N BROADWAY		FARGO	ND	58102	1497921308	96	#N/A	3028	SANFORD NORTH FARGO CLIN	1942241351		
4	$18	911770748	SKATVOLD	LINDA	2400 32ND AVE S		FARGO	ND	58103	1740201961	50	Nurse Practitioner	3014	SANFORD SOUTHPOINTE CLIN	1942241351		
1	$17	450226558	VAUGHN	RITA	1 BURDICK EXPRESSWAY W		MINOT	ND	58701	1457426975	43	Certified Registered Nurse Anesthetist	635031	TRINITY MEDICAL GROUP AN	1083653752		
2	$17	261175213	BOEDDEKER	SPRING	275 11TH ST S		WAHPETON	ND	58075	1700836673	50	Nurse Practitioner	6885019	INNOVIS HEALTH, LLC DBA	1790965440		
2	$17	450310462	BALDWIN	MATTHEW	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1487632725	30	Radiology	9001	ALTRU HEALTH SYSTEM	1043309552		
3	$17	450310159	PAGE	GRAYDON	164 WEST 13TH STREET		GRAFTON	ND	58237	1275512972	30	Radiology	282001	GRAFTON FAMILY CLINIC	1558423665		
2	$17	261175213	GRAMITH	FREDERICK	3000 32ND AVE S		FARGO	ND	58103	1245283274	30	Radiology	6885030	INNOVIS HEALTH, LLC DBA	1578907655		
3	$17	911770748	LUCHT	KAMILLA	2701 13TH AVE S		FARGO	ND	58103	1326080656	37	Pediatrics	3015	SANFORD CHILDRENS SOUTHW	1942241351		
2	$17	450310159	CARLSON	BLAKE	164 WEST 13TH STREET		GRAFTON	ND	58237	1548249956	30	Radiology	282001	GRAFTON FAMILY CLINIC	1558423665		
7	$16	450226700	NOTTESTAD	STEPHANIE	222 N 7TH ST		BISMARCK	ND	58501	1285730689	97	Physician Assistant	4001	SANFORD CLINIC	1811941172		
6	$16	911770748	JESSEN	JAMEY	1720 UNIVERSITY DR S		FARGO	ND	58103	1982643219	8	Family Practice	3904	SANFORD SOUTH UNIVERSITY	1942241351		
5	$16	911770748	HEGGE	ERIN	4656 40TH AVE S		FARGO	ND	58104	1609894344	97	Physician Assistant	3064	SANFORD DERMATOLOGY & LA	1689836975		
1	$16	911770748	BELLANGER-DAHL	JUDY	1000 CONEY STREET W		PERHAM	MN	56573	1265470447	97	Physician Assistant	3008	PERHAM HEALTH	1942241351		
1	$16	411271856	BELLANGER-DAHL	JUDY	735 3RD ST		PERHAM	MN	56573	1265470447	97	Physician Assistant	7771004	PERHAM HEALTH 735 3RD ST	1457631814		
2	$16	450430628	DOCKTER	MEGHAN	301 NP AVE		FARGO	ND	58102	1972842698	46	Nurse Midwives	576001	FAMILY HEALTHCARE CENTER	1710066352		
1	$15	450310462	LEON	JORGE	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1013996065	30	Radiology	9001	ALTRU HEALTH SYSTEM	1043309552		
6	$15	911770748	KALLENBACH	CHRISTOPHE	2400 32ND AVE S		FARGO	ND	58103	1649460551	30	Radiology	3014	SANFORD SOUTHPOINTE CLIN	1942241351		
2	$15	450310159	CAROLAN	PAUL	164 WEST 13TH STREET		GRAFTON	ND	58237	1144427055	30	Radiology	282001	GRAFTON FAMILY CLINIC	1558423665		
4	$15	261175213	SHRAWNY	SHAWN	132 4TH AVE NE		VALLEY CITY	ND	58072	1376583013	30	Radiology	6885024	INNOVIS HEALTH, LLC DBA	1962682617		
2	$15	450310462	LIZAKOWSKI	LAURA	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1730387606	11	Internal Medicine	9001	ALTRU HEALTH SYSTEM	1043309552		
1	$15	261175213	CHAN	LESLIE	2430 20TH ST SW		JAMESTOWN	ND	58401	1912039850	5	Anesthesiology (MD)	6885018	INNOVIS HEALTH, LLC DBA	1073793725		
2	$15	411266009	STATTON	MARIA	1300 ANNE STREET NW		BEMIDJI	MN	56601	1194746313	8	Family Practice	7834004	SANFORD BEMIDJI MAIN CLI	1780628149		

1	$15	411620386	JONASON	NEIL	1027 WASHINGTON AVENUE		DETROIT LAKES	MN	56501	1558317644	8	Family Practice	7282008	ST MARY'S ESSENTIA HEALT	1639513377		
1	$15	411620386	PAZDERNIK	JULIE	1027 WASHINGTON AVENUE		DETROIT LAKES	MN	56501	1104866847	8	Family Practice	7282008	ST MARY'S ESSENTIA HEALT	1639513377		
1	$15	450226909	ELDRIDGE	ROSE MARY	4000 28TH AVE S		MOORHEAD	MN	56560	1184646671	50	Nurse Practitioner	7742014	SANFORD MOORHEAD CLINIC	1184917924		
2	$15	456013474	BALDWIN	MATTHEW	301 MOUNTAIN ST E		CAVALIER	ND	58220	1487632725	30	Radiology	5633001	PEMBINA COUNTY HOSPITAL	1417093949		
1	$15	456013474	PARRINO	SUZANNE	301 MOUNTAIN ST E		CAVALIER	ND	58220	1730113671	30	Radiology	5633001	PEMBINA COUNTY HOSPITAL	1417093949		
2	$15	450226909	MONSON	TIMOTHY	1717 SOUTH UNIVERSITY DR		FARGO	ND	58103	1740207281	2	General Surgery	7742027	SANFORD 1717 MEDICAL BUI	1184917924		
4	$15	450337952	YE OLDE MEDICINE S	E	104 E HWY 66		DRAYTON	ND	58225	1790004182	54	Home Medical Equipment	3149002	YE OLDE MEDICINE SHOPPE	1790004182		
3	$14	911770748	RAISEN	JAY	801 BROADWAY NORTH		FARGO	ND	58102	1740305473	4	Otology, Laryngology, Rhinology	3001	SANFORD BROADWAY CLINIC	1942241351		
1	$14	450310462	GARDNER	JEREMY	400 S MINNESOTA ST		CROOKSTON	MN	56716	1881886497	20	Orthopedic Surgery	406001	ALTRU CROOKSTON	1760494330		
3	$14	261175213	TORRANCE	JAMES	132 4TH AVE NE		VALLEY CITY	ND	58072	1316986649	8	Family Practice	6885024	INNOVIS HEALTH, LLC DBA	1962682617		
8	$14	261175213	DOBBS	KATHRYN	705 PLEASANT AVE		PARK RAPIDS	MN	56470	1073690418	8	Family Practice	6885022	INNOVIS HEALTH, LLC DBA	1699955344		
1	$14	411271856	SEAWORTH	THOMAS	20 CENTENNIAL 84 DR W		NEW YORK MILLS	MN	56567	1750302972	8	Family Practice	7771002	PERHAM HEALTH NEW YORK M	1457631814		
1	$14	911770748	DAHL	KEVIN	2301 25TH ST S STE A		FARGO	ND	58103	1356551089	20	Orthopedic Surgery	3075	SANFORD ORTHOPEDICS SPOR	1942241351		
1	$14	450226909	SHRESTHA	ALOK	1720 UNIVERSITY DR S		FARGO	ND	58103	1558509034	11	Internal Medicine	7742004	SANFORD SOUTH UNIVERSITY	1184917924		
1	$14	450226429	HINRICHS	MARK	30 7TH ST W		DICKINSON	ND	58601	1922095363	11	Internal Medicine	95001	ST JOSEPHS HOSPITAL AND	1992947956		
1	$14	261175213	JADAAN	ATEF	3000 32ND AVE S		FARGO	ND	58103	1770509382	11	Internal Medicine	6885030	INNOVIS HEALTH, LLC DBA	1578907655		
1	$14	450232743	KNOEDLER	JOHN	115 VIVAN ST		PARK RIVER	ND	58270	1023097078	30	Radiology	598001	P.R. HEALTH CORPORATION	1306850706		
2	$14	450260821	WHITE DRUG #57		108 CENTRAL AVE		MADDOCK	ND	58348	1205926144	54	Home Medical Equipment	7878001	WHITE DRUG #57	1205926144		
2	$14	450226558	LEWIS	SCOTT	400 BURDICK EXPY E		MINOT	ND	58701	1679663744	30	Radiology	635006	TRINITY MEDICAL GROUP	1083653752		
2	$14	450310462	HAGEN	WILLIAM	1200 S COLUMBIA RD		GRAND FORKS	ND	58201	1639260649	30	Radiology	62001	ALTRU HOSPITAL	1154346161		
14	$14	911770748	ALTAF	MISBAH	2400 32ND AVE S		FARGO	ND	58103	1790917052	8	Family Practice	3014	SANFORD SOUTHPOINTE CLIN	1942241351		
2	$14	911770748	KOENIG	CYNTHIA	1220 SHEYENNE ST		WEST FARGO	ND	58078	1710908942	50	Nurse Practitioner	3020	SANFORD WEST FARGO CLINI	1942241351		
2	$13	450228899	ARNESS	RICHARD	600 1ST STREET SE		MAYVILLE	ND	58257	1902824600	48	Podiatry, Surgical chiropody	3076	SANFORD MAYVILLE	1366478760		
2	$13	450231183	KURISKO	STANLEY	1301 15TH AVE W		WILLISTON	ND	58801	1992758833	30	Radiology	711004	MERCY RADIOLOGY SERVICES	1629234257		
1	$13	450226558	DURKIN	ROBERT	1 BURDICK EXPY W		MINOT	ND	58701	1114915535	11	Internal Medicine	635032	TRINITY MEDICAL GROUP	1083653752		
1	$13	450424398	DILLAVOU	NICHOL	2717 ROCK ISLAND PL		BISMARCK	ND	58504	1558470401	41	Optometrist	1646001	BIS-MAN EYECARE ASSOCIAT	1669401527		
1	$13	450424398	ERHARDT	JASON	1400 SKYLINE BLVD		BISMARCK	ND	58503	1093088122	41	Optometrist	1646002	BIS-MAN EYECARE ASSOCIAT	1063602050		
1	$13	450310462	GROGAN	MICHAEL	400 S MINNESOTA ST		CROOKSTON	MN	56716	1518015627	30	Radiology	406001	ALTRU CROOKSTON	1760494330		
3	$13	450437696	BIRGER	C JUDITH	2605 CIRCLE DR		JAMESTOWN	ND	58401	1861429870	44	Psychiatric Nurse	85001	NORTH DAKOTA STATE HOSPI	1649227075		
2	$13	450227012	NARDACCI	TARA	1031 7TH ST NE		DEVILS LAKE	ND	58301	1972734499	50	Nurse Practitioner	76001	THE MERCY HOSPITAL OF DE	1790751170		
1	$12	450310462	LALONDE	THERESA	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1912098716	50	Nurse Practitioner	9001	ALTRU HEALTH SYSTEM	1043309552		
3	$12	911770748	DAMODARAN NAIR	HARIKRISHN	801 BROADWAY NORTH		FARGO	ND	58102	1871608125	6	Cardivascular Disease	3001	SANFORD BROADWAY CLINIC	1942241351		
2	$12	911770748	ASCHE	JENNIFER	1527 BROADWAY STREET		ALEXANDRIA	MN	56308	1386907111	97	Physician Assistant	359007	SANFORD HEALTH BROADWAY	1548532468		
20	$12	911770748	SAWCHUK	THEODORE	600 1ST ST SE		MAYVILLE	ND	58257	1629090261	34	Urology	3003	SANFORD MAYVILLE	1942241351		
18	$12	911770748	JOYCE	REBECCA	1220 SHEYENNE ST		WEST FARGO	ND	58078	1912977133	50	Nurse Practitioner	3020	SANFORD WEST FARGO CLINI	1942241351		
13	$12	911770748	NYAYAPATI	NEELIMA	2400 32ND AVE S		FARGO	ND	58103	1417186586	8	Family Practice	3014	SANFORD SOUTHPOINTE CLIN	1942241351		
6	$12	911770748	CLARKE	PAULA	1720 UNIVERSITY DR S		FARGO	ND	58103	1538187265	97	Physician Assistant	3904	SANFORD SOUTH UNIVERSITY	1942241351		
5	$12	911770748	RONDEAU	DENISE	2400 32ND AVE S		FARGO	ND	58103	1124049341	16	Obstet/Gynecology	3014	SANFORD SOUTHPOINTE CLIN	1942241351		
3	$12	911770748	WELLER	MARIA	2701 13TH AVE S		FARGO	ND	58103	1285656868	37	Pediatrics	3015	SANFORD CHILDRENS SOUTHW	1942241351		
2	$12	411271856	BELLANGER-DAHL	JUDY	1000 CONEY STREET W		PERHAM	MN	56573	1265470447	97	Physician Assistant	7771001	PERHAM HEALTH CLINIC	1457631814		
1	$12	450310462	AAFEDT	BRADLEY	1200 S COLUMBIA RD		GRAND FORKS	ND	58201	1639272438	30	Radiology	62001	ALTRU HOSPITAL	1154346161		
5	$12	450310159	PARRINO	SUZANNE	164 WEST 13TH STREET		GRAFTON	ND	58237	1730113671	30	Radiology	282001	GRAFTON FAMILY CLINIC	1558423665		
3	$12	456013474	WEISENSEE	ANNE	301 MOUNTAIN ST E		CAVALIER	ND	58220	1992784755	30	Radiology	5633001	PEMBINA COUNTY HOSPITAL	1417093949		
1	$12	911770748	MEYER	MELISSA	1705 ANNE ST NW		BEMIDJI	MN	56601	1679594915	97	Physician Assistant	359004	SANFORD BEMIDJI 1705 ANN	1942241351		
1	$12	450226558	KENNEDY	ROGER	20 BURDICK EXPRESSWAY W		MINOT	ND	58701	1528174554	14	Neurological Surgery	635029	TRINITY MEDICAL GROUP	1083653752		
1	$12	261175213	MARTIN	RICHARD	3000 32ND AVE S		FARGO	ND	58103	1689662983	8	Family Practice	6885016	ESSENTIA HEALTH HOSPITAL	1215125463		
1	$12	450226909	AMIN	BEEJAL	700 1ST AVE S		FARGO	ND	58103	1275742983	14	Neurological Surgery	7742007	SANFORD NEUROSCIENCE CLI	1184917924		
2	$11	450231183	KANG	EUL	1301 15TH AVE W		WILLISTON	ND	58801	1184661944	30	Radiology	711004	MERCY RADIOLOGY SERVICES	1629234257		
1	$11	450310462	PARIKH	JITENDRA	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1699867028	5	Anesthesiology (MD)	9001	ALTRU HEALTH SYSTEM	1043309552		
9	$11	911770748	TINGUELY	MATTHEW	820 4TH ST N		FARGO	ND	58102	1548348410	11	Internal Medicine	3030	SANFORD ROGER MARIS CANC	1942241351		
5	$11	911770748	WEBSTER	MICHAEL	1720 UNIVERSITY DR S		FARGO	ND	58103	1659393239	8	Family Practice	3904	SANFORD SOUTH UNIVERSITY	1942241351		
1	$11	911770748	KOHLMAN-PETRICK	JOELLEN	801 BROADWAY NORTH		FARGO	ND	58102	1114985454	6	Cardivascular Disease	3001	SANFORD BROADWAY CLINIC	1942241351		
3	$10	450311334	JUELSON	AMY	828 KIRKWOOD MALL		BISMARCK	ND	58504	1912032970	37	Pediatrics	236002	MID DAKOTA CLINIC-KIRKWO	1275587826		
2	$10	411620386	LANDERS	A DOUGLAS	1027 WASHINGTON AVE		DETROIT LAKES	MN	56501	1366499550	30	Radiology	7282005	ST MARY'S ESSENTIA HEALT	1679561088		
1	$10	450226909	WAGNER	JAMES	801 BROADWAY NORTH		FARGO	ND	58102	1942234851	2	General Surgery	7742001	SANFORD BROADWAY CLINIC	1184917924		
1	$10	341650951	RGH ENTERPRISES IN	A EDGEPARK	1810 SUMMIT COMMERCE	PARK	TWINSBURG	OH	44087	1609858729	79	Home Infusion	6829001	RGH ENTERPRISES, INC DBA	1609858729		
2	$9	450310462	BUTLER	ROBERT	1000 S COLUMBIA RD		GRAND FORKS	ND	58201	1851379085	30	Radiology	9001	ALTRU HEALTH SYSTEM	1043309552		
1	$9	261175213	KEASHLY	RAE	705 PLEASANT AVE		PARK RAPIDS	MN	56470	1497792352	8	Family Practice	6885022	INNOVIS HEALTH, LLC DBA	1699955344		
1	$9	205900255	KIMBLER	CARL	820 1ST AVE SE STE 400		ABERDEEN	SD	57401	1104984483	19	Oral Surgery	6532001	NORTHERN PLAINS ORAL AND	1487718565		
1	$8	311824372	ACHIEVE THERAPY LL		1425 S COLUMBIA RD		GRAND FORKS	ND	58201	1013009232	54	Home Medical Equipment	6037002	ACHIEVE THERAPY, LLC	1013009232		
1	$8	911770748	SANFORD HAWLEY CLI	LAB	1412 MAIN ST		HAWLEY	MN	56549	1609144294	69	Independent Laboratory	513001	SANFORD HAWLEY CLINIC	1942241351		
1	$8	911770748	FALK	KARA	300 2ND AVE NE		JAMESTOWN	ND	58401	1548362502	50	Nurse Practitioner	3090	SANFORD HEALTH 2ND AVE C	1942241351		
2	$8	450310462	CASTANEDA	WILFRIDO	400 S MINNESOTA ST		CROOKSTON	MN	56716	1780720433	30	Radiology	406001	ALTRU CROOKSTON	1760494330		
1	$8	450311818	ELLISON	WESLEY	900 E BROADWAY		BISMARCK	ND	58506	1740391044	22	Pathology, Anatomy, Clinical Pathology	55002	PATHOLOGY CONSULTANTS	1497736151		
1	$8	911770748	HENDRICKS	LARRY	336 MAIN ST		FORMAN	ND	58032	1992723530	97	Physician Assistant	3069	SANFORD HEALTH FORMAN CL	1942241351		
1	$7	450226558	CADER	RUKSHANA	1 BURDICK EXPY W		MINOT	ND	58701	1295943660	10	Gastronenterology	635032	TRINITY MEDICAL GROUP	1083653752		

1	$7	200880846	CASSELTON DRUG INC		622 FRONT ST		CASSELTON	ND	58012	1730177510	54	Home Medical Equipment	2975001	CASSELTON DRUG INC	1730177510		
1	$7	911770748	GROSS	DEAN	108 VIKING AVE W		ULEN	MN	56585	1689697682	50	Nurse Practitioner	3019	SANFORD HEALTH ULEN CLIN	1942241351		
1	$7	263746083	MARI	JOHN	1300 GATEWAY DR		FARGO	ND	58103	1841210143	41	Optometrist	7308001	20/20 VISION EXPRESS	1841210143		
148	$7	911770748	OTERO-CAGIDE	MANUEL	801 BROADWAY NORTH		FARGO	ND	58102	1437176906	6	Cardivascular Disease	3001	SANFORD BROADWAY CLINIC	1942241351		
9	$7	911770748	MATTHYS	GARY	801 BROADWAY NORTH		FARGO	ND	58102	1922025568	20	Orthopedic Surgery	3001	SANFORD BROADWAY CLINIC	1942241351		
4	$7	911770748	LEVITT	RALPH	820 4TH ST N		FARGO	ND	58102	1548287212	75	Oncology	3030	SANFORD ROGER MARIS CANC	1942241351		
3	$7	911770748	KANTAK	ANAND	2400 32ND AVE S		FARGO	ND	58103	1669499331	3	Allergy	3014	SANFORD SOUTHPOINTE CLIN	1942241351		
2	$7	911770748	MACHANI	SATHYANARA	801 BROADWAY NORTH		FARGO	ND	58102	1912206020	11	Internal Medicine	3001	SANFORD BROADWAY CLINIC	1942241351		
2	$7	911770748	ORSON	GREGORY	2301 25TH ST S STE A		FARGO	ND	58103	1932130036	20	Orthopedic Surgery	3075	SANFORD ORTHOPEDICS SPOR	1942241351		
2	$7	911770748	HANISCH	STEFANIE	100 4TH ST S		FARGO	ND	58103	1447350400	26	Psychiatry (MD)	3903	SANFORD PROFESSIONAL BUI	1942241351		
1	$7	911770748	LAMMLE	WILLIAM	801 BROADWAY NORTH		FARGO	ND	58102	1285651950	97	Physician Assistant	3001	SANFORD BROADWAY CLINIC	1942241351		
1	$7	911770748	KESHAVARZ	TAHEREH	700 1ST AVE S		FARGO	ND	58103	1326287244	97	Physician Assistant	3027	SANFORD NEUROSCIENCE CLI	1942241351		
1	$7	911770748	SWENSEN	ERIC	1720 UNIVERSITY DR S		FARGO	ND	58103	1679669139	26	Psychiatry (MD)	3904	SANFORD SOUTH UNIVERSITY	1942241351		
10	$6	911770748	NYHUS	CURTIS	1720 UNIVERSITY DR S		FARGO	ND	58103	1639197213	8	Family Practice	3904	SANFORD SOUTH UNIVERSITY	1942241351		
3	$6	911770748	WYNNE	JOSHUA	621 DEMERS AVE		E GRAND FORKS	MN	56721	1376565960	6	Cardivascular Disease	3080	SANFORD HEALTH 621 DEMER	1942241351		
1	$5	411620386	JAMES	MARK	1027 WASHINGTON AVENUE		DETROIT LAKES	MN	56501	1861412595	30	Radiology	7282008	ST MARY'S ESSENTIA HEALT	1639513377		
55	$5	911770748	SNOW	DENISE	820 4TH ST N		FARGO	ND	58102	1669494209	75	Oncology	3030	SANFORD ROGER MARIS CANC	1942241351		
7	$5	911770748	LEWIS	DAVID	2701 13TH AVE S		FARGO	ND	58103	1386662955	37	Pediatrics	3015	SANFORD CHILDRENS SOUTHW	1942241351		
4	$5	911770748	GARRELS	KRISTINA	801 BROADWAY NORTH		FARGO	ND	58102	1447288261	34	Urology	3001	SANFORD BROADWAY CLINIC	1942241351		
2	$5	911770748	CROSS	CHERI	2400 32ND AVE S		FARGO	ND	58103	1215287495	50	Nurse Practitioner	3014	SANFORD SOUTHPOINTE CLIN	1942241351		
2	$5	911770748	HVIDSTON	ANDREW	2301 25TH ST S STE A		FARGO	ND	58103	1477505725	20	Orthopedic Surgery	3075	SANFORD ORTHOPEDICS SPOR	1942241351		
1	$5	911770748	FALCK	SUSAN	700 1ST AVE S		FARGO	ND	58103	1013008028	97	Physician Assistant	3027	SANFORD NEUROSCIENCE CLI	1942241351		
1	$5	911770748	LUNDEEN	MARK	2301 25TH ST S STE A		FARGO	ND	58103	1730130493	20	Orthopedic Surgery	3075	SANFORD ORTHOPEDICS SPOR	1942241351		
1	$5	911770748	STAVENGER	JEFFREY	2301 25TH ST S STE A		FARGO	ND	58103	1659322865	20	Orthopedic Surgery	3075	SANFORD ORTHOPEDICS SPOR	1942241351		
1	$5	911770748	BURD	RONALD	1720 UNIVERSITY DR S		FARGO	ND	58103	1750308755	26	Psychiatry (MD)	3904	SANFORD SOUTH UNIVERSITY	1942241351		
3	$5	450337633	ROLLA DRUG		117 MAIN ST E		ROLLA	ND	58367	1235140898	54	Home Medical Equipment	3182001	ROLLA DRUG	1235140898		
44	$5	456002481	HERZIG	MELISSA	500 UNIVERSITY AVE W		MINOT	ND	58707	1548477862	66	Speech Therapy	206001	MINOT STATE UNIVERSITY D	1528198975		
2	$5	450226909	SANFORD PHARMACY M	AVENUE	801 BROADWAY NORTH		FARGO	ND	58102	1356407910	54	Home Medical Equipment	33002	SANFORD PHARMACY MILLS A	1356407910		
1	$4	911770748	DAHL	BENJAMIN	2400 32ND AVE S		FARGO	ND	58103	1558565762	30	Radiology	3014	SANFORD SOUTHPOINTE CLIN	1942241351		
1	$4	911770748	REIL	TODD	300 2ND AVE NE		JAMESTOWN	ND	58401	1154355311	23	Peripheral Vascular Diseases or Surgery	3090	SANFORD HEALTH 2ND AVE C	1942241351		
9	$4	450260821	WHITE DRUG #17		1015 S BROADWAY		MINOT	ND	58701	1306935911	63	Pharmacy	4654001	WHITE DRUG #17	1306935911		
2	$4	261175213	LEADBETTER	LARRY	705 PLEASANT AVE		PARK RAPIDS	MN	56470	1255372900	11	Internal Medicine	6885022	INNOVIS HEALTH, LLC DBA	1699955344		
2	$4	450226700	IWAMOTO	MATTHEW	1040 TOCOMA AVE		BISMARCK	ND	58504	1073547014	30	Radiology	4059	SANFORD SOUTH CLINIC	1811941172		
2	$4	450226700	MCINTEE	MICHAEL	2830 N WASHINGTON ST		BISMARCK	ND	58503	1053423525	30	Radiology	4062	SANFORD NORTH CLINIC	1811941172		
14	$4	911770748	STALLMAN	DONALD	2400 32ND AVE S		FARGO	ND	58103	1386665503	30	Radiology	3014	SANFORD SOUTHPOINTE CLIN	1942241351		
2	$4	911770748	NG	SU-ANN	2400 32ND AVE S		FARGO	ND	58103	1336183482	30	Radiology	3014	SANFORD SOUTHPOINTE CLIN	1942241351		
1	$3	261175213	SCHULTZ	JOAN	3902 13TH AVE S		FARGO	ND	58103	1750303301	50	Nurse Practitioner	6885032	INNOVIS HEALTH, LLC DBA	1437495264		
2	$2	450226700	MILLER	JOHN	2830 N WASHINGTON ST		BISMARCK	ND	58503	1346448925	30	Radiology	4062	SANFORD NORTH CLINIC	1811941172		
1	$2	911770748	REYNOLDS	RYAN	2400 32ND AVE S		FARGO	ND	58103	1568662252	30	Radiology	3014	SANFORD SOUTHPOINTE CLIN	1942241351		
11	$2	911770748	BORGESON	DEBRA	801 BROADWAY NORTH		FARGO	ND	58102	1982626578	50	Nurse Practitioner	3001	SANFORD BROADWAY CLINIC	1942241351		
1	$2	450226558	KAMBA	THOMPSON	400 BURDICK EXPY E		MINOT	ND	58701	1548279003	32	Radiation Therapy	635006	TRINITY MEDICAL GROUP	1083653752		
1	$2	810402340	FAUL	GREGORY	214 14TH AVE SW		SIDNEY	MT	59270	1780764399	1	General Practice	1409001	FAUL, GREGORY, MD	1780764399		
1	$2	450310462	DALLUM	BERNIE	1200 S COLUMBIA RD		GRAND FORKS	ND	58201	1023109139	30	Radiology	62001	ALTRU HOSPITAL	1154346161		
1	$2	450310462	ANDERSON	ROBERT	711 DELMORE DR		ROSEAU	MN	56751	1639260425	8	Family Practice	409001	ALTRU ROSEAU	1770672289		
3	$2	450232743	BARAGA	JOSEPH	115 VIVAN ST		PARK RIVER	ND	58270	1730167073	30	Radiology	598001	P.R. HEALTH CORPORATION	1306850706		
1	$1	450310462	TREUER	JODY	1200 S COLUMBIA RD		GRAND FORKS	ND	58201	1790871051	30	Radiology	62001	ALTRU HOSPITAL	1154346161		
3	$1	450310462	BROWN	ANN	400 S MINNESOTA ST		CROOKSTON	MN	56716	1588761365	22	Pathology, Anatomy, Clinical Pathology	406001	ALTRU CROOKSTON	1760494330		
3	$1	411620386	LANDERS	A DOUGLAS	1027 WASHINGTON AVENUE		DETROIT LAKES	MN	56501	1366499550	30	Radiology	7282008	ST MARY'S ESSENTIA HEALT	1639513377		
12	$1	911770748	PHADKE	GAUTAM	621 DEMERS AVE		E GRAND FORKS	MN	56721	1396997649	39	Nephrology	3080	SANFORD HEALTH 621 DEMER	1942241351		
5	$1	450226558	SAME DAY SURGERY		400 E BURDICK EXPY	SUITE 400	MINOT	ND	58701	1730233677	70	Clinic	635022	SAME DAY SURGERY CENTER	1730233677		

									Owned Network	Other/Rented Network
Total Services	Total Paid	EIN	Name	A1	City	ST	Zip	NPI	Network Yes/No	Network Yes/No
27,039	$14,574,704	450310462	ALTRU HEALTH SYSTEM, DBA	1200 S COLUMBIA RD	GRAND FORKS	ND	58201	1154346161		
21,350	$17,984,974	450226909	SANFORD MEDICAL CENTER F	801 BROADWAY NORTH	FARGO	ND	58122	1528009412		
16,801	$12,007,262	450226700	SANFORD MEDICAL CENTER	300 N 7TH ST	BISMARCK	ND	58501	1538245634		
14,437	$5,463,355	412002771	TRINITY HOSPITALS	1 BURDICK EXPRESSWAY	MINOT	ND	58701	1427103910		
10,713	$12,014,383	450226711	ST ALEXIUS MEDICAL CTR	900 E BROADWAY	BISMARCK	ND	58501	1306832654		
9,147	$4,646,245	261175213	ESSENTIA HEALTH FARGO	3000 32ND AVENUE SOUTH	FARGO	ND	58103	1215125463		
5,573	$24,638,645	0	BLUE CARD/ITS CENTER	OTHER STATES	CHICAGO	IL	60601	0		
5,014	$927,899	111111111	PAY HOSPITAL	4510 13TH AVE S	FARGO	ND	58121	0		
3,410	$1,610,285	450226662	FARGO VAMC	2101 ELM ST	FARGO	ND	58102	1437100971		
2,868	$1,957,270	450231181	LUTHERAN CHARITY ASSOCIA	2422 20TH ST SW	JAMESTOWN	ND	58401	1548256753		
2,759	$1,626,581	450226429	ST JOSEPHS HOSPITAL	30 7TH ST W	DICKINSON	ND	58601	1992947956		
2,673	$1,467,018	450231183	MERCY HOSPITAL	1301 15TH AVE W	WILLISTON	ND	58801	1902824576		
2,536	$260,204	450442285	QN BURDICK COMP FACILITY	1300 HOSPITAL LOOP	BELCOURT	ND	58316	1952346934		
2,436	$414,567	450310159	UNITY HOSPITAL	164 W 13TH ST	GRAFTON	ND	58237	1245216852		
2,003	$730,038	450310462	ALTRU REHABILITATION CEN	1300 S COLUMBIA RD	GRAND FORKS	ND	58201	1437248945		
1,518	$204,808	450228899	SANFORD MEDICAL CENTER M	42 6TH AVE SE	MAYVILLE	ND	58257	1518061803		
1,223	$245,522	450232743	FIRST CARE HEALTH CENTER	115 VIVIAN ST	PARK RIVER	ND	58270	1679669741		
1,080	$657,972	450227012	THE MERCY HOSPITAL OF DE	1031 7TH ST NE	DEVILS LAKE	ND	58301	1659343093		
1,022	$302,587	450227311	CARRINGTON HEALTH CENTER	800 4TH ST N	CARRINGTON	ND	58421	1205807013		
973	$236,350	450226419	GOOD SAMARITAN HOSPITAL	800 S MAIN AVE	RUGBY	ND	58368	1437258969		
946	$231,939	450306787	CAVALIER COUNTY MEM HOS	909 2ND ST	LANGDON	ND	58249	1750328662		
879	$367,050	450226426	ST ANDREWS HOSPITAL	316 OHMER ST	BOTTINEAU	ND	58318	1801893706		
808	$306,814	450340688	WEST RIVER REGIONAL MED	1000 HWY 12	HETTINGER	ND	58639	1588763247		
791	$284,473	450226553	MERCY HOSPITAL	570 CHAUTAUQUA BLVD	VALLEY CITY	ND	58072	1477549111		
702	$318,517	820558836	LISBON AREA HEALTH SERVI	905 MAIN ST	LISBON	ND	58054	1609872431		
696	$126,306	450227391	PRESENTATION MED CENTER	213 3RD ST NE	ROLLA	ND	58367	1265404958		
633	$21,366	450310159	GRAFTON FAMILY CLC RHC	164 WEST 13TH STREET	GRAFTON	ND	58237	1558423665		
607	$525,024	410724029	RIVERVIEW HOSPITAL	323 S MINNESOTA ST	CROOKSTON	MN	56716	1477525566		
585	$119,574	450458242	SOUTHWEST HEALTHCARE SER	12 6TH AVE SW	BOWMAN	ND	58623	1477529030		
503	$79,696	450230400	SANFORD HILLSBORO	12 3RD ST SE	HILLSBORO	ND	58045	1184725194		
403	$164,942	456013474	PEMBINA COUNTY MEM HOSP	301 MOUNTAIN ST E	CAVALIER	ND	58220	1760542500		
396	$61,039	450358986	WISHEK COMMUNITY HOSP	1007 4TH AVE S	WISHEK	ND	58495	1295772804		
390	$117,713	450308379	SAKAKAWEA MEDICAL CENTER	510 8TH AVE NE	HAZEN	ND	58545	1700965696		
387	$70,414	450253272	LINTON HOSPITAL	518 N BROADWAY	LINTON	ND	58552	1609813625		
385	$82,895	450254692	ST LUKES HOSPITAL	702 1ST ST SW	CROSBY	ND	58730	1215942032		
375	$79,823	450425948	TOWNER COUNTY MEDICAL CT	HWY 281 N	CANDO	ND	58324	1154352169		
302	$52,453	450447670	MOUNTRAIL COUNTY MEDICAL	615 6TH STREET SE	STANLEY	ND	58784	1740378637		
298	$45,130	450226472	NORTHWOOD DEACONESS HOSP	4 N PARK ST	NORTHWOOD	ND	58267	1356449136		
297	$28,323	450227753	COOPERSTOWN MEDICAL CTR	1200 ROBERTS AVE NE	COOPERSTOWN	ND	58425	1235239229		
275	$57,872	450227752	GARRISON MEMORIAL HOSPIT	407 3RD AVE SE	GARRISON	ND	58540	1982674560		
275	$22,839	450226711	COMMUNITY MEMORIAL HOSP	220 5TH AVE	TURTLE LAKE	ND	58575	1013961820		
244	$111,146	410695598	ST FRANCIS HOSPITAL	2400 ST FRANCIS DRIVE	BRECKENRIDGE	MN	56520	1639162381		
242	$19,738	450119890	NELSON COUNTY HEALTH SYS	200 N MAIN ST	MCVILLE	ND	58254	1134280860		
221	$187,495	450231675	OAKES COMMUNITY HOSP	1200 N 7TH ST	OAKES	ND	58474	1598848517		
218	$9,189	450232743	FIRST CARE HLTH CTR RHC	115 VIVIAN ST	PARK RIVER	ND	58270	1306850706		
216	$13,460	450222079	JACOBSON MEMORIAL HOSP	601 EAST ST N	ELGIN	ND	58533	1336196039		
215	$25,197	450255914	ASHLEY MEDICAL CENTER	612 CENTER AVE N	ASHLEY	ND	58413	1740286616		
207	$19,971	411266009	SANFORD HEALTH OF NORTHE	1300 ANNE ST NW	BEMIDJI	MN	56601	1801870191		
203	$7,747	450227311	FOSTER COUNTY MEDICAL CL	820 N 5TH ST	CARRINGTON	ND	58421	1558389338		
203	$7,747	520883104	MEDICARE COMMERCIAL REPA	2400 ORANGE AVE	CLEVELAND	OH	44101	0		
202	$8,968	450451306	ST ANDREWS BOTTINEAU CLI	314 OHMER ST	BOTTINEAU	ND	58318	1902803802		
192	$40,560	450308484	TIOGA MEDICAL CENTER	810 N WELO ST	TIOGA	ND	58852	1043280696		
190	$5,605	113686120	COAL COUNTRY COMMUNITY C	1312 HIGHWAY 49 N	BEULAH	ND	58523	1942288329		
178	$54,586	450279210	MISSOURI SLOPE LUTHERAN	2425 HILLVIEW AVE	BISMARCK	ND	58501	1518911700		
173	$10,324	460224598	AVERA ST LUKES HOSPITAL	305 S STATE ST	ABERDEEN	SD	57401	1457309270		
172	$24,320	770637498	MCKENZIE COUNTY HEALTHCA	516 N MAIN ST	WATFORD CITY	ND	58854	1518988948		
168	$46,077	450349152	HOSPICE OF THE RED RIVER	1701 38TH ST S STE 101	FARGO	ND	58103	1538253646		
164	$5,624	450457949	FAMILY MEDICAL CLINIC LI	10 9 AVE E	LISBON	ND	58054	1952331159		
160	$15,837	410730602	LAKE REGION HOSPITAL	712 S CASCADE ST	FERGUS FALLS	MN	56537	1093713372		
157	$5,722	450227753	COOPERSTOWN MED CTR RHC	1200 ROBERTS AVE NE	COOPERSTOWN	ND	58425	1962548214		
154	$11,268	411620386	ST MARYS REGIONAL HEALTH	1027 WASHINGTON AVE	DETROIT LAKES	MN	56501	1679561088		
153	$587,345	410991680	FAIRVIEW COMMUNITY HOSP	2450 RIVER SIDE AVE	MINNEAPOLIS	MN	55454	1013994359		
148	$11,137	411271856	PERHAM HEALTH	1000 CONEY STREET WEST	PERHAM	MN	56573	1790799518		
145	$67,577	450255914	ASHLEY HOSPICE	612 CENTER AVE N	ASHLEY	ND	58413	1780784108		
145	$67,577	450226423	THE VILLAGE FAMILY SERVI	409 7TH ST S	FARGO	ND	58103	1952679318		
144	$49,959	450226729	ST ALOISIUS HOSPITAL	325 E BREWSTER ST	HARVEY	ND	58341	1457477218		
142	$62,105	450431679	DRAKE COUNSELING SERVICE	1202 23RD ST S	FARGO	ND	58103	1154378057		
139	$6,032	450254692	CROSBY CLINIC	702 1ST ST SW	CROSBY	ND	58730	1184737231		
135	$98,600	450310462	ALTRU HOSPITAL/AMBULANCE	1200 S COLUMBIA RD	GRAND FORKS	ND	58201	1154346161		
112	$6,403	450306787	CAVALIER COUNTY MEMORIAL	901 2ND ST	LANGDON	ND	58249	1730126640		
112	$26,153	450226909	SANFORD HOME CARE	1711 S UNIVERSITY DR	FARGO	ND	58103	1891861761		
112	$163,437	450282159	HEARTVIEW FOUNDATION	101 E BROADWAY AVE	BISMARCK	ND	58501	1417000233		
112	$610,248	264314533	PSJ ACQUISITION LLC	510 4TH ST S	FARGO	ND	58103	1679709802		
110	$5,893	412002769	KENMARE COMMUNITY HOSP	317 1ST AVE NW	KENMARE	ND	58746	1366597650		
104	$16,971	460224743	MCKENNAN HOSPITAL	800 E 21ST ST	SIOUX FALLS	SD	57105	1568460772		
103	$46,918	264376543	ST GABRIEL'S COMMUNITY	4580 COLEMAN ST	BISMARCK	ND	58503	1427371889		
103	$6,886	450226419	GOOD SAMARITAN HOSPITAL	800 3RD AVE SW	RUGBY	ND	58368	1578734869		
98	$3,159	450458242	SOUTHWEST MEDICAL CLINIC	14 6TH AVE SW	BOWMAN	ND	58623	1891893624		
95	$2,964	456013474	PEMBINA COUNTY MEMORIAL	301 MOUNTAIN ST E	CAVALIER	ND	58220	1417093949		
89	$90,014	450226700	SANFORD TOM AND FRANCES	209 N 7TH ST	BISMARCK	ND	58501	1700962818		
89	$2,405	270056777	VALLEY COMMUNITY HEALTH	301 HWY 15	NORTHWOOD	ND	58267	1356327001		
87	$4,303	450408291	RICHARDTON MEMORIAL HOSP	215 3RD AVE WEST	RICHARDTON	ND	58652	1043649486		
85	$3,783	911770748	SANFORD HEALTH HILLSBORO	315 E CALADONIA AVE	HILLSBORO	ND	58045	1265464259		
84	$172,373	450310462	ALTRU ESRD UNIT	1200 S COLUMBIA RD	GRAND FORKS	ND	58201	1033208509		
81	$65,713	450229071	VALLEY ELDERCARE CENTER	2900 14TH AVE SOUTH	GRAND FORKS	ND	58201	1881762565		
80	$127,112	260612718	MANORCARE HEALTH SERVICE	1315 S UNIVERSITY DRIVE	FARGO	ND	58103	1972545572		
77	$32,019	272608086	EVENTIDE JAMESTOWN LLC D	1300 2ND PLACE NE	JAMESTOWN	ND	58401	1215256078		
74	$2,488	450340688	WEST RIVER HEALTH BOWMAN	608 HIGHWAY 12 WEST	BOWMAN	ND	58623	1497856025		
73	$2,852	450119890	NELSON COUNTY HEALTH SYS	108 N MAIN STREET	MCVILLE	ND	58254	1578624136		
71	$2,637	450253272	LINTON MEDICAL CENTER	511 ELM STREET	LINTON	ND	58552	1568471563		
71	$2,853	450227311	COMMUNITY HEALTH CENTER	118 1ST ST S	NEW ROCKFORD	ND	58356	1801811666		
70	$8,508	450442284	FT YATES HOSPITAL	N10 NORTH RIVER RD	FORT YATES	ND	58538	1609851039		

69	$21,975	410695603	ST JOSEPHS HOSPITAL	600 PLEASANT AVE S	PARK RAPIDS	MN	56470	1023086055		
67	$42,196	412002771	TRINITY HOSPITALS/AMB	305 11TH AVE SW	MINOT	ND	58701	1134310857		
64	$1,783	460224598	AVERA UNITED CLINIC OF E	240 MAIN	ELLENDALE	ND	58436	1760423057		
64	$2,796	770637498	MCKENZIE CTY HEALTHCARE	525 N MAIN ST	WATFORD CITY	ND	58854	1457374217		
62	$3,117	470757739	REHABVISIONS	683 STATE AVE STE B	DICKINSON	ND	58601	1730280371		
62	$10,141	410709579	SANFORD THIEF RIVER FALL	120 LABREE AVE S	THIEF RIVER FAL	MN	56701	1043218753		
62	$3,236	450340688	WEST RIVER HEALTH MOTT	420 PACIFIC AVENUE	MOTT	ND	58646	1942398508		
60	$102,539	999999999	NON MEMBER	OR PAY SUBSCRIBER	FARGO	ND	58121	0		
60	$2,755	450308484	TIOGA MEDICAL CENTER	710 N WELO	TIOGA	ND	58852	1124092333		
60	$16,654	261087740	BETHANY ON 42ND	4255 30 AVE S	FARGO	ND	58104	1043451123		
56	$287,977	450310462	ALTRU HOSPITAL PSYCH	1200 S COLUMBIA RD	GRAND FORKS	ND	58201	1528157039		
56	$25,345	450226700	SANFORD HOME CARE (HOME	910 18TH ST NW	MANDAN	ND	58554	1669555744		
55	$27,236	410721640	EVENTIDE LUTHERAN HOME	1405 7TH ST S	MOORHEAD	MN	56560	1487705653		
55	$15,528	450274012	BETHANY ON UNIVERSITY	201 S UNIVERSITY DR	FARGO	ND	58103	1114925120		
55	$22,746	510183396	SHAREHOUSE GENESIS	505 40TH ST S STE B	FARGO	ND	58103	1356576979		
54	$2,031	911770748	SANFORD HEALTH ENDERLIN	201 4TH AVE STE 1	ENDERLIN	ND	58027	1285666271		
53	$308,304	450226711	ST ALEXIUS PSYCH	900 E BROADWAY AVE	BISMARCK	ND	58501	1538220611		
52	$14,942	752999939	AVE MARIA VILLAGE	501 19TH ST NE	JAMESTOWN	ND	58401	1295738193		
52	$24,639	410721640	SHEYENNE CROSSINGS CARE	125 13TH AVE W	WEST FARGO	ND	58078	1942538608		
51	$6,386	450310462	ALTRU HOME HEALTH	1380 S COLUMBIA RD	GRAND FORKS	ND	58201	1346339850		
51	$157,428	412002771	TRINITY HOSPITALS PSYCH	407 3RD ST SE	MINOT	ND	58701	1417079211		
51	$2,599	450227752	GARRISON FAMILY CLINIC	407 3RD AVENUE SE	GARRISON	ND	58540	1952381873		
50	$1,762	450226711	WASHBURN FAMILY CLINIC	1177 BORDER LANE	WASHBURN	ND	58577	1831267236		
50	$1,787	450222079	JACOBSEN MEMORIAL ELIGIN	603 EAST ST N	ELGIN	ND	58533	1871691519		
50	$1,587	270056777	VALLEY COMMUNITY HEALTH	321 TOWNER AVE	LARIMORE	ND	58251	1255317905		
49	$148,160	450226700	SANFORD MEDICAL CENTER P	300 N 7TH STREET	BISMARCK	ND	58501	1528144623		
49	$77,300	450282159	HEARTVIEW FOUNDATION RTC	101 EAST BROADWAY AVENUE	BISMARCK	ND	58501	1417000233		
48	$92,809	264314533	PSJ ACQUISITION LLC	510 4TH ST S	FARGO	ND	58103	1679709802		
47	$43,209	450416454	SANFORD HEALTH SUNSET DR	1011 BOUNDARY ST NW	MANDAN	ND	58554	1487759593		
47	$2,598	450340688	WEST RIVER HEALTH NEW EN	820 2ND AVENUE WEST	NEW ENGLAND	ND	58647	1831286160		
47	$1,768	450447670	MOUNTRAIL COUNTY MEDICAL	615 6TH STREET SE	STANLEY	ND	58784	1831289362		
45	$19,048	460319070	RAPID CITY REGIONAL	353 FAIRMONT BLVD	RAPID CITY	SD	57701	1437122009		
45	$1,964	450441817	FIFTH MEDICAL GROUP DBA	5TH MED SUPPORT SQUADRON	MINOT	ND	58701	1427031673		
44	$10,008	450277232	LUTHERAN SUNSET HOME	333 EASTERN AVENUE	GRAFTON	ND	58237	1164423463		
44	$674	450437633	319TH MEDICAL GROUP	1599 J ST	GRAND FORKS AFB	ND	58205	1578523924		
43	$1,912	911770748	SANFORD HEALTH LAMOURE C	107 2ND AVE NE	LAMOURE	ND	58458	1164439196		
43	$36,454	450226909	SANFORD DIALYSIS	2801 UNIVERSITY DR S	FARGO	ND	58103	1821154253		
42	$20,721	450431679	DRAKE COUNSELING CENTER	1451 44 AVE SOUTH UNIT A	GRAND FORKS	ND	58201	1427243948		
42	$75,888	264314533	PSJ ACQUISITION LLC	510 4TH ST S	FARGO	ND	58103	1679709802		
41	$13,874	752999939	SISTERS OF MARY OF THE P	3102 S UNIVERSITY DR	FARGO	ND	58103	1053316497		
41	$1,368	205782624	KIDDER COUNTY COMMUNITY	110 W BROADWAY	STEELE	ND	58482	1487731030		
41	$1,546	450358986	WISHEK CLINIC	1015 4TH AVE S	WISHEK	ND	58495	1376584623		
40	$184,235	450226909	SANFORD LIFEFLIGHT	801 BROADWAY NORTH	FARGO	ND	58122	1942415468		
39	$8,637	411539761	ELIM HOME	3534 S UNIVERSITY DR	FARGO	ND	58104	1720076482		
39	$1,746	331029318	NORTHLAND COMMUNITY HEAL	122 E 2ND ST	MCCLUSKY	ND	58463	1528142981		
39	$1,060	331029318	NORTHLAND HEALTH PARTNER	114 3 ST NE	ROLLA	ND	58367	1225369523		
38	$5,731	450232943	BAPTIST HOME	3400 NEBRASKA DRIVE	BISMARCK	ND	58503	1700855657		
38	$16,230	450416454	SANFORD HEALTH ST VINCEN	1021 N 26TH STREET	BISMARCK	ND	58501	1639274731		
37	$3,724	450231181	LUTHERAN CHARITY ASSOCIA	2422 20TH ST SW	JAMESTOWN	ND	58401	1528052511		
37	$132,700	450226711	ST ALEXIUS TRANSITIONAL	900 E BROADWAY AVE	BISMARCK	ND	58501	1649332602		
37	$1,626	450222079	GLEN ULLIN FAMILY MEDICA	602 ASH AVE E	GLEN ULLIN	ND	58631	1003929944		
37	$34,560	450228055	GOOD SAMARITAN SOCIETY B	301 LORRAIN DR	BISMARCK	ND	58503	1508197013		
36	$1,660	450308379	SAKAKAWEA HAZEN CLINIC	517 8TH AVE NE	HAZEN	ND	58545	1174597173		
36	$1,518	450227391	PRESENTATION CLINIC	213 2ND AVE NE	ROLLA	ND	58367	1992014518		
35	$29,717	450226711	ST ALEXIUS MEDICAL ESRD	900 E BROADWAY AVE	BISMARCK	ND	58501	1972667673		
35	$67,962	411639687	ST BENEDICTS HEALTH CENT	851 4TH AVENUE EAST	DICKINSON	ND	58601	1578554374		
34	$1,031	450255914	AMC CLINIC	612 CENTER AVENUE NORTH	ASHLEY	ND	58413	1851335830		
34	$56,509	260612693	MANORCARE HEALTH SERVICE	600 S MAIN	MINOT	ND	58701	1447292164		
33	$1,031	331029318	NORTHLAND COMMUNITY HEAL	416 KUNDERT ST	TURTLE LAKE	ND	58575	1457435802		
32	$56,885	450226711	ESRD SATELLITE DICKINSON	30 7TH ST W	DICKINSON	ND	58601	1861553844		
32	$1,092	450226429	BEACH MEDICAL/ST JOSEPHS	95 2ND NW	BEACH	ND	58621	1669491262		
32	$11,582	412002769	KENMARE HEALTH CENTER	307 1ST AVE NW	KENMARE	ND	58746	1649226671		
32	$11,582	260231202	DAVITA DAKOTA DIALYSIS C	4474 23RD AVE S STE M	FARGO	ND	58104	1356532550		
31	$146,720	450226909	SANFORD PSYCHOLOGY	1720 UNIVERSITY DRIVE S	FARGO	ND	58103	1144381328		
31	$1,540	911770748	SANFORD HEALTH ELLENDALE	141 MAIN ST	ELLENDALE	ND	58436	1346256682		
31	$8,820	510183396	SHAREHOUSE INC	4227 9TH AVE SW	FARGO	ND	58103	1205903481		
30	$58,279	450404412	TRINITY HOME	305 8TH AVE NE	MINOT	ND	58701	1003902396		
30	$52,048	752999939	ROSEWOOD ON BROADWAY	1351 BROADWAY	FARGO	ND	58102	1578567996		
30	$44,761	450226711	ST ALEXIUS HOME CARE & H	1212 E MAIN AVE	BISMARCK	ND	58501	1609938661		
29	$1,290	450425948	TOWNER COUNTY MEDICAL CT	HWY 281 N	CANDO	ND	58324	1124041389		
29	$1,467	450358986	NAPOLEON CLINIC	420 MAIN AVE	NAPOLEON	ND	58561	1679774616		
28	$9,824	450310462	ALTRU HOSPICE	1380 S COLUMBIA RD	GRAND FORKS	ND	58201	1013946292		
28	$3,105	271966847	MERCY HOME CARE SERVICES	367 2ND STREET NW	VALLEY CITY	ND	58072	1265747737		
27	$66,210	412002771	TRINITY HOSPITALS REHAB	407 3RD ST SE	MINOT	ND	58701	1083736888		
27	$0	450228055	GOOD SAMARITAN SOCIETY H	501 E FRONT ST	LARIMORE	ND	58251	1841272226		
26	$808	450226429	KILLDEER MED/ST JOSEPHS	150 CENTER AVE N	KILLDEER	ND	58640	1184641110		
25	$30,483	450231181	LUTHERAN CHARITY ASSOCIA	2422 20TH ST SW	JAMESTOWN	ND	58401	1386638179		
23	$24,929	412002771	TRINITY HOSPITALS CDU	407 3RD ST SE	MINOT	ND	58701	1487804092		
23	$21,396	450416454	SANFORD HEALTH CONTINUIN	201 14TH ST NW	MANDAN	ND	58554	1710082904		
22	$11,832	450228055	GOOD SAMARITAN SOCIETY -	301 COUNTY ROAD 12-B	PARK RIVER	ND	58270	1487635496		
22	$26,629	412002771	TRINITY HOSPITALS ESRD	1 BURDICK EXPRESSWAY W	MINOT	ND	58701	1669427555		
22	$706	450231675	OAKES COMMUNITY CLINIC	1200 N 7 ST	OAKES	ND	58474	1962780858		
21	$7,597	411639687	ST CATHERINE LIVING CNTR	1307 7TH ST N	WAHPETON	ND	58075	1952306656		
21	$8,459	752999939	SHEYENNE CARE CENTER	979 CENTRAL AVE N	VALLEY CITY	ND	58072	1598760803		
21	$4,138	272042143	SANFORD MEDICAL CENTER W	401 12TH ST N	WHEATON	MN	56296	1154615573		
20	$287,861	450226421	LUTHER HALL	1505 5TH AVE S	FARGO	ND	58103	1356558878		
20	$24,179	510183396	SHAREHOUSE RTC	4227 9TH AVE SW	FARGO	ND	58103	1205903481		
19	$6,412	410724034	KITTSON MEMORIAL HOSP	1010 S BIRCH AVE	HALLOCK	MN	56728	1669403846		
19	$5,731	271966847	MERCY HOME CARE	115 2ND AVE W STE 50	WILLISTON	ND	58801	1083928048		
18	$777	410695598	ST FRANCIS HEALTHCARE CA	401 MAIN ST	MILNOR	ND	58060	1235215252		
18	$173,636	450226700	SANFORD MEDICAL CENTER R	300 N 7TH ST	BISMARCK	ND	58501	1700962800		
17	$8,325	450226711	ST ALEXIUS HOME CARE & H	1212 E MAIN AVE	BISMARCK	ND	58501	1437210317		
17	$154,084	450333670	WESTERN PLAINS, RTC	1227 N 35 STREET	BISMARCK	ND	58501	1851476105		
17	$24,239	450226553	MERCY HOSPITAL SWING BED	570 CHAUTAUQUA BLVD	VALLEY CITY	ND	58072	1982712659		

17	$10,264	412002771	TRINITY HOSPITALS HHA	1015 S BROADWAY STE #306	MINOT	ND	58701	1194931881		
17	$10,918	450226700	SANFORD HOME CARE	910 18TH ST NW	MANDAN	ND	58554	1477631745		
16	$23,404	450230141	BETHEL LUTHERAN NURSING	1515 2ND AVE W	WILLISTON	ND	58801	1306830427		
16	$37,901	450448012	RICHARD P STADTER PSYCH	1451 44TH AVE S UNIT A	GRAND FORKS	ND	58208	1831137389		
16	$138,828	450226711	ST ALEXIUS REHAB	900 E BROADWAY	BISMARCK	ND	58501	1184701237		
16	$1,841	311558826	WOODSIDE VILLAGE	4004 24TH AVENUE SOUTH	GRAND FORKS	ND	58201	1275627184		
16	$3,036	271966847	ST JOSEPHS HOSPITAL AND	986 2ND AVENUE WEST	DICKINSON	ND	58601	1487969952		
15	$119,753	450226909	SANFORD REHABILITATION	1720 S UNIVERSITY DR	FARGO	ND	58103	1285795450		
15	$4,993	810232124	ST VINCENT HOSPITAL	1233 N 30TH ST	BILLINGS	MT	59101	1083655997		
15	$49,336	450333670	DAKOTA BOYS RANCH	6301 19TH AVE NW	MINOT	ND	58703	1578649711		
15	$3,967	412002771	TRINITY HOSPITALS HPC	1015 S BDWY STE 306	MINOT	ND	58701	1013124098		
15	$17	271966847	ST FRANCIS HOME CARE	1110 HIGHWAY 75 NO STE A	BRECKENRIDGE	MN	56520	1972817732		
14	$9,004	450391192	PRAIRIELAND HHA	1102 PAGE DRIVE	FARGO	ND	58103	1326127655		
14	$4,104	450226700	SANFORD JAMESTOWN DIALYS	300 2ND AVE NE	JAMESTOWN	ND	58401	1720161953		
13	$35,893	141978084	AURORA DIALYSIS, LLC	1451 44 AVE S SUITE 104D	GRAND FORKS	ND	58201	1417143710		
12	$49,034	450310159	UNITY HOSPITAL SB	164 W 13TH ST	GRAFTON	ND	58237	1073698262		
11	$13,791	450230400	SANFORD HILLSBORO AMBULA	12 3RD ST SE	HILLSBORO	ND	58045	1083706105		
11	$1,590	450232743	FIRST CARE HEALTH CENTER	115 VIVIAN ST	PARK RIVER	ND	58270	1669568747		
11	$1,342	200479568	BRIDGES MEDICAL CENTER D	201 9TH STREET W	ADA	MN	56510	1306836598		
10	$6,629	450226729	ST ALOISIUS NURSING HOME	317 E BREWSTER	HARVEY	ND	58341	1689791816		
10	$28,026	371485730	NEW FREEDOM CENTER	905 E INTERSTATE AVE	BISMARCK	ND	58503	1437283587		
10	$476	450226419	GOOD SAM HOSP ASSOC DBA	215 MAIN ST SE	DUNSEITH	ND	58329	1568633865		
10	$2,510	271966847	RIVEREDGE HOSPICE	1110 HIGHWAY 75 N STE A	BRECKENRIDGE	MN	56520	1821303397		
9	$0	450437696	NORTH DAKOTA STATE HOSP	2605 CIRCLE DR	JAMESTOWN	ND	58401	1649227075		
9	$4,703	450347147	ST LUKES HOME	242 10TH ST W	DICKINSON	ND	58601	1023062155		
9	$3,230	450226472	NORTHWOOD DEACONESS HOME	4 N PARK ST	NORTHWOOD	ND	58267	1184722969		
9	$367	331029318	NORTHLAND COMMUNITY HEAL	401 2ND AVE	ROLETTE	ND	58366	1689758039		
9	$990	410706143	FIRST CARE MEDICAL SERVI	900 SE HILLIGOSS BLVD	FOSSTON	MN	56542	1497850119		
9	$2,252	410729979	NORTH MEMORIAL MED CTR	3300 OAKDALE NORTH	ROBBINSDALE	MN	55422	1851344907		
9	$10,260	450228055	LAKOTA GOOD SAM CTR	608 4TH AVE SW	LAKOTA	ND	58344	1477544716		
9	$264	450358986	GACKLE COMMUNITY CLINIC	321 MAIN ST	GACKLE	ND	58442	1154522241		
9	$9,584	450408291	RICHARDTON HEALTH CENTER	212 3RD AVE WEST	RICHARDTON	ND	58652	1235295593		
8	$0	411639687	ST CATHERINE'S HOME CARE	1307 N 7TH ST	WAHPETON	ND	58075	1770552820		
8	$4,822	450275011	LAKE REGION LUTHERAN	620 14TH AVE E	DEVILS LAKE	ND	58301	1689667834		
8	$112,945	331035972	PRIDE MANCHESTER INC	2600 MANCHESTER ST	BISMARCK	ND	58504	1346351475		
8	$9,389	450228055	GOOD SAMARITAN SOCIETY O	213 NORTH 9TH STREET	OAKES	ND	58474	1912998386		
8	$247	450430628	FAMILY HEALTHCARE CENTER	306 4 ST N	FARGO	ND	58102	1710066352		
8	$522	204121367	GGNSC MOORHEAD 11 DBA GO	2810 N 2ND AVE	MOORHEAD	MN	56560	1316998727		
7	$191	450255914	AMC ZEELAND CLINIC	203 S MAIN	ZEELAND	ND	58581	1295777951		
7	$1,296	450310462	ALTRU RENAL DIALYSIS SAT	1001 7TH STREET	DEVILS LAKE	ND	58301	1124117692		
7	$1,513	450280227	TRI COUNTY NURSING HOME	950 DAKOTA AVE	HATTON	ND	58240	1811055197		
7	$28,665	450226419	GOOD SAMARITAN HOSPITAL	800 S MAIN AVE	RUGBY	ND	58368	1417044249		
7	$4,884	450254692	ST LUKES HOSPITAL	702 SW 1ST STREET	CROSBY	ND	58730	1083620199		
7	$11,132	412002771	TRINITY HOSPITALS	407 3RD ST SE	MINOT	ND	58701	1457539660		
7	$0	271966847	MERCY HOSPICE	115 2ND AVE W STE 50	WILLISTON	ND	58801	1639484140		
7	$647	450358986	KULM COMMUNITY CLINIC	4 FIRST AVE SE	KULM	ND	58456	1932300951		
6	$14,517	450333670	DAKOTA BOYS RANCH RTC	3314 33RD ST S	FARGO	ND	58104	1922184167		
6	$0	450425948	TOWNER COUNTY LIVING CTR	701 11TH ST	CANDO	ND	58324	1346274594		
6	$10,238	450226419	GOOD SAMARITAN HOSPITAL	800 S MAIN AVE	RUGBY	ND	58368	1154457646		
6	$7,991	450442285	QN BURDICK	1300 HOSPITAL LOOP	BELCOURT	ND	58316	1952346934		
6	$17,297	450458242	BOWMAN AMBULANCE SERVICE	14 6TH AVE SW	BOWMAN	ND	58623	1477529030		
6	$0	450226426	ST ANDREWS HOSPITAL	316 OHMER	BOTTINEAU	ND	58318	1912093725		
6	$10,750	450227311	CARRINGTON HEALTH CENTER	840 4TH ST N	CARRINGTON	ND	58421	1083775688		
6	$182	113686120	COAL COUNTRY COMMUNITY H	111 E MAIN STREET	CENTER	ND	58530	1003052952		
6	$12,366	461116401	PATHWAY TO FREEDOM	418 E ROSSER AVE STE A	BISMARCK	ND	58501	1922352194		
5	$1,226	450340688	WEST RIVER REG MED AMBUL	1000 HWY 12	HETTINGER	ND	58639	1518089499		
5	$17,320	450119890	NELSON COUNTY HEALTH SYS	200 N MAIN ST	MCVILLE	ND	58254	1689735235		
5	$39	450226419	GOOD SAM HOSP ASSOC DBA	301 ROOSEVELT AVE	MADDOCK	ND	58348	1740451038		
4	$0	456002236	RICHLAND COUNTY HHA	413 3RD AVE N	WAHPETON	ND	58075	1619064946		
4	$1,628	820558836	LISBON AREA HEALTH SERVI	905 MAIN ST	LISBON	ND	58054	1033292875		
4	$78	450308078	MARIAN MANOR HEALTH CARE	604 ASH AVE E	GLEN ULLIN	ND	58631	1316948631		
4	$296	450234473	ST GERARDS COMMUNITY NUR	613 1ST AVE SW	HANKINSON	ND	58041	1861458622		
4	$15	450261669	LUTHER MEMORIAL HOME	750 MAIN ST EAST	MAYVILLE	ND	58257	1497755185		
4	$2,978	411639687	PRINCE OF PEACE CARE CEN	201 8TH ST N	ELLENDALE	ND	58436	1558351874		
4	$1,846	450306627	STRASBURG CARE CENTER	409 S 3RD ST	STRASBURG	ND	58573	1437234911		
4	$0	450277390	KNIFE RIVER CARE CENTER	118 22 ST NE	BEULAH	ND	58523	1740283860		
4	$5,625	450306787	LANGDON AMBULANCE SER	909 2ND STREET	LANGDON	ND	58249	1609819127		
4	$888	450226426	ST ANDREWS HEALTH CENTER	316 OHMER ST	BOTTINEAU	ND	58318	1912093725		
4	$0	363166982	CITY COUNTY HEALTH DIST	230 4TH ST NW RM 102	VALLEY CITY	ND	58072	1538150834		
4	$262	456013474	WEDGEWOOD MANOR	804 MAIN ST W	CAVALIER	ND	58220	1356487565		
4	$0	450227753	COOPERSTOWN MEDICAL CTR	1200 ROBERTS AVE NE	COOPERSTOWN	ND	58425	1376635151		
4	$275	410713913	TRI COUNTY HOSPITAL	415 N JEFFERSON ST	WADENA	MN	56482	1477545333		
4	$46	460246437	EUREKA COMMUNITY HEALTH	410 9TH ST	EUREKA	SD	57437	1629152749		
4	$1,917	450226711	ESRD SATELLITE WILLISTON	1301 15TH AVENUE WEST	WILLISTON	ND	58801	1376605600		
4	$630	416008946	MAHNOMEN HEALTH CENTER	414 W JEFFERSON AVE	MAHNOMEN	MN	56557	1942233234		
4	$179	450228055	DEVILS LAKE GOOD SAMARIT	302 7TH AVE NE	DEVILS LAKE	ND	58301	1376524488		
4	$189	450343518	SOURIS VALLEY CARE CENTE	300 MAIN ST SOUTH	VELVA	ND	58790	1306821087		
4	$350	450307506	ELM CREST MANOR	100 ELM AVENUE	NEW SALEM	ND	58563	1144218769		
4	$0	840515919	POUDRE VALLEY HOSPITAL	1024 S LEMAY AVE	FORT COLLINS	CO	80524	1760492714		
4	$112	450308484	TIOGA MEDICAL CENTER	117 MAIN ST	POWERS LAKE	ND	58773	1740254523		
4	$6,756	371485730	NEW FREEDOM CENTER	905 EAST INTERSTATE AVE	BISMARCK	ND	58503	1437283587		
4	$0	271966847	MERCY HOSPICE	420 4TH AVENUE NE	DEVILS LAKE	ND	58301	1396050860		
3	$97	450226419	GOOD SAMARITAN HOSPITAL	800 S MAIN AVE	RUGBY	ND	58368	1710074554		
3	$7	260794602	WESTERN HORIZONS LIVING	1104 HWY 12	HETTINGER	ND	58639	1770778748		
3	$148	450310153	MAPLE MANOR NURSING HOME	1116 9TH AVENUE	LANGDON	ND	58249	1326049248		
3	$148	450458242	SOUTHWEST HEALTHCARE SER	802 2ND ST NW	BOWMAN	ND	58623	1114914140		
3	$0	450278093	PEMBILIER NURSING CENTER	500 DELANO AVE	WALHALLA	ND	58282	1770506032		
3	$2,664	450280611	WISHEK LIVING CENTER	400 S 4TH STREET	WISHEK	ND	58495	1417991647		
3	$2,600	450253272	LINTON HOSPITAL AMB SER	518 N BROADWAY	LINTON	ND	58552	1407033202		
3	$833	450226472	NORTHWOOD DEACONESS HOSP	#4 PARK STREET	NORTHWOOD	ND	58267	1356449136		
3	$140	411384358	NORTH VALLEY HEALTH CENT	109 S MINNESOTA ST	WARREN	MN	56762	1972642213		
3	$4,481	752999939	MARYHILL MANOR	110 HILLCREST DR	ENDERLIN	ND	58027	1295730653		
3	$1,156	450230400	SANFORD HILLSBORO	12 3RD ST SE	HILLSBORO	ND	58045	1720170939		
3	$2,072	450226472	NORTHWOOD DEACONESS HOSP	4 N PARK ST	NORTHWOOD	ND	58267	1003913518		

3	$0	450227311	CARRINGTON HOSPITAL	800 4TH ST N	CARRINGTON	ND	58421	1255445730		
3	$9,646	300146471	KIDNEY INSTITUTE OF NORT	1451 44TH AVE S STE 112D	GRAND FORKS	ND	58201	1003809948		
3	$144	810233499	SIDNEY HEALTH CENTER	216 14TH AVE SW	SIDNEY	MT	59270	1285719161		
3	$9,973	450231675	OAKES SWING BED	1200 N 7TH ST	OAKES	ND	58474	1225109762		
3	$4,654	450231181	LUTHERAN CHARITY ASSOCIA	2422 20TH ST SW	JAMESTOWN	ND	58401	1184610347		
3	$740	450458242	SOUTHWEST SWINGBED	14 6TH AVE SW	BOWMAN	ND	58623	1518068949		
3	$94	450228055	MOTT GOOD SAMARITAN NSG	401 MILLIONAIRE AVE	MOTT	ND	58646	1043291156		
3	$31	450437292	ANETA PARKVIEW HEALTH CE	113 5TH ST S	ANETA	ND	58212	1083794432		
3	$1,126	450231494	PARKSIDE LUTHERAN HOME	501 3RD AVENUE WEST	LISBON	ND	58054	1487658324		
3	$0	271966847	HEARTLAND HOSPICE	986 2ND AVE WEST	DICKINSON	ND	58601	1578878047		
2	$170	450119890	NELSON COUNTY CARE CENTE	108 E NYHUS	MCVILLE	ND	58254	1992869770		
2	$378	411639687	BENEDICTINE LIVING CENTE	609 4 AVE NE	GARRISON	ND	58540	1871586008		
2	$321	450226909	SANFORD DIALYSIS DETROIT	114 FRAZEE STREET E	DETROIT LAKES	MN	56501	1578508198		
2	$184	860181654	SCOTTSDALE HEALTHCARE -	9003 E SHEA BLVD	SCOTTSDALE	AZ	85260	1386608859		
2	$3,324	450227012	MERCY HOSPITAL SWING BED	1031 7TH ST NE	DEVILS LAKE	ND	58301	1609972884		
2	$0	770637498	MCKENZIE CTY HEALTHCARE	516 N MAIN ST	WATFORD CITY	ND	58854	1427079854		
2	$143	450228055	GOOD SAMARITAN SOCIETY-M	602 EAST MAIN	MOHALL	ND	58761	1861473852		
2	$4,440	450228055	GOOD SAMARITAN SOCIETY L	501 E FRONT STREET	LARIMORE	ND	58251	1992786008		
2	$152	450340688	WEST RIVER HEALTH SCRANT	MAIN STREET	SCRANTON	ND	58653	1760570394		
2	$94	450308484	TIOGA MEDICAL CENTER	24 RAILROAD AVE	RAY	ND	58849	1013981893		
2	$0	450448012	RICHARD P. STADTER PSYCH	1451 44 AVE S UNIT A	GRAND FORKS	ND	58201	1831137389		
2	$58	911770748	SANFORD HEALTH FORMAN CL	336 MAIN ST	FORMAN	ND	58032	1073520003		
2	$0	450308379	SAKAKAWEA MED CTR HHA	510 8TH AVE NE	HAZEN	ND	58545	1578781324		
2	$8,981	450340688	WEST RIVER REGIONAL MEDI	1000 HIGHWAY 12	HETTINGER	ND	58639	1700975604		
2	$0	450226700	SANFORD MEDICAL CENTER S	300 N 7TH ST	BISMARCK	ND	58501	1073699187		
1	$0	450230400	SANFORD HEALTH HILLSBORO	12 3RD ST SE	HILLSBORO	ND	58045	1528150067		
1	$0	770637498	GOOD SHEPHERD HOME	709 4 AVE NE	WATFORD CITY	ND	58854	1619998358		
1	$133	450254692	LIGNITE CLINIC	115 MAIN ST	LIGNITE	ND	58752	1578575502		
1	$289	450226729	ST ALOISIUS HOSPITAL	325 E BREWSTER ST	HARVEY	ND	58341	1639296007		
1	$0	450393369	TRI CARE HEALTH INC	1104 HWY 5 W	ROLLA	ND	58367	1609887397		
1	$80	742044647	NATIONAL JEWISH CENTER	1440 JACKSON ST	DENVER	CO	80206	1326015777		
1	$5,319	450447670	MOUNTRAIL COUNTY MEDICAL	615 6TH STREET SE	STANLEY	ND	58784	1770669921		
1	$116	742358522	NORTH CO MEDICAL CENTER	1801 16TH STREET	GREELEY	CO	80631	1720004450		
1	$5,013	450228055	GOOD SAMARITAN CENTER	725 E 10TH ST	BOTTINEAU	ND	58318	1407837263		
1	$317	412002771	TRINITY ESRD/BELCOURT	1310 HOSPITAL LOOP ROAD	BELCOURT	ND	58316	1023139359		
1	$28	450340688	WEST RIVER HEALTH LEMMON	401 6TH AVENUE WEST	LEMMON	SD	57638	1801987904		
1	$66	460345312	HURON REGIONAL MED CTR	4TH & IOWA ST	HURON	SD	57350	1154312429		
1	$206	830279242	WYOMING MEDICAL CENTER	1233 E 2ND ST	CASPER	WY	82601	1346332954		
1	$1,184	836000194	CHEYENNE REGIONAL MEDICA	214 E 23RD	CHEYENNE	WY	82001	1285621839		
1	$70	411639687	ST ROSE CARE CENTER	315 1ST ST SE	LAMOURE	ND	58458	1679563993		
1	$30	911770748	SANFORD HEALTH MAHNOMEN	414 W JEFFERSON	MAHNOMEN	MN	56557	1831131234		
1	$35	911770748	SANFORD HEALTH TWIN VALL	212 MAIN AVE W	TWIN VALLEY	MN	56584	1689602682		
1	$30	911770748	SANFORD HEALTH ULEN CLIN	108 VIKING AVE W	ULEN	MN	56585	1801818497		
1	$730	450437648	WEST CENTRAL HSC, YOUTH	1041 BASIN AVE	BISMARCK	ND	58504	1265660187		
1	$0	450448012	RICHARD P STADTER PSYCHI	1451 44 AVE S STE A	GRAND FORKS	ND	58201	1831137389		

North Dakota Public Employees Retirement System
Request for Proposals - Health Plan Administrator
FEE SCHEDULE DISCLOSURE

Proposers are required to complete the questions and claims repricing exhibits provided in this section. The exhibits must be submitted in the prescribed format. Vendors may provide supplemental information but may not deviate from utilizing the provided Excel worksheets. Instructions are in each of the required exhibits (tabs).

The fee schedule disclosure consists of the following components and related exhibits:

- Physician Reimbursement
- Inpatient Facility Reimbursement
- Outpatient Facility Reimbursement

North Dakota Public Employees Retirement System

Request for Proposals - Health Plan Administrator

PHYSICIAN REIMBURSEMENT

Proposing Vendor:

- **COMPLETE THE TABLE BELOW WITH YOUR AVERAGE NETWORK PHYSICIAN REIMBURSEMENT LEVELS ("ALLOWED AMOUNT").**
- **PROVIDE THE NON-FACILITY, NON-MODIFIER FEE SCHEDULE AMOUNT FOR EACH OF THE CARE SYSTEMS LISTED**
- **PROVIDE CONTRACTED RATES AS OF 1/1/2015**

Medical				CARE SYSTEM SPECIFIC				
CPT CODE	TYPE	DESCRIPTION	Sanford Health (Bismarck Region)	Sanford Health (Fargo Region)	Altru Health	Mid Dakota Clinics	Trinity Health	OVERALL BOOK OF BUSINESS
90471	Medical	Immunization Administration, 1 Vaccine	$	$	$	$	$	$
90686	Medical	Influenza Virus Vaccine, ages 3+, intramuscular	$	$	$	$	$	$
90791	Medical	Psychiatric Diagnostic Evaluation	$	$	$	$	$	$
90834	Medical	Psychotherapy, 45 minutes	$	$	$	$	$	$
90837	Medical	Psychotherapy, 60 minutes	$	$	$	$	$	$
90847	Medical	Family Psychotherapy	$	$	$	$	$	$
92507	Medical	Treatment of speech, language, voice	$	$	$	$	$	$
92928	Medical	Percutaneous Placement of Intracoronary Stent	$	$	$	$	$	$
93005	Medical	Electrocardiogram	$	$	$	$	$	$
93306	Medical	Transthor Echocardiography w/ Doppler, Complete	$	$	$	$	$	$
97110	Medical	Therapeutic Procedure, 1+ Areas	$	$	$	$	$	$
98941	Medical	Chiropractic, Spinal, 3-4 Regions	$	$	$	$	$	$
99203	Medical	Office/Outpatient Visit, E/M, New, 30 Mins	$	$	$	$	$	$
99212	Medical	Office/Outpatient Visit, E/M, Est., 10 Mins	$	$	$	$	$	$
99213	Medical	Office/Outpatient Visit, E/M, Est., 15 Mins	$	$	$	$	$	$
99214	Medical	Office/Outpatient Visit, E/M, Est., 25 Mins	$	$	$	$	$	$
99284	Medical	Emergency Department Visit	$	$	$	$	$	$
99386	Medical	Preventive Med Visit, New, Age 40-64	$	$	$	$	$	$
99396	Medical	Preventive Med Visit, Est, Age 40-64	$	$	$	$	$	$

Surgical				CARE SYSTEM SPECIFIC				
CPT CODE*	TYPE	DESCRIPTION	Sanford Health (Bismarck Region)	Sanford Health (Fargo Region)	Altru Health	Mid Dakota Clinics	Trinity Health	OVERALL BOOK OF BUSINESS
11100	Surgical	BIOPSY, SKIN LESION	$	$	$	$	$	$
11750	Surgical	REMOVAL OF NAIL BED	$	$	$	$	$	$
12001	Surgical	REPAIR SUPERFICIAL WOUND(S)	$	$	$	$	$	$
17000	Surgical	DESTRUCT PREMALG LESION	$	$	$	$	$	$
17110	Surgical	DESTRUCT BENIGN LESION	$	$	$	$	$	$
19318	Surgical	REDUCTION OF LARGE BREAST	$	$	$	$	$	$
20550	Surgical	INJ TENDON SHEATH/LIGAMENT	$	$	$	$	$	$
20610	Surgical	DRAIN/INJECT, JOINT/BURSA	$	$	$	$	$	$
22551	Surgical	NECK SPINE FUSION	$	$	$	$	$	$
22845	Surgical	INSERT SPINE FIXATION DEVICE	$	$	$	$	$	$
27130	Surgical	TOTAL HIP ARTHROPLASTY	$	$	$	$	$	$
27447	Surgical	TOTAL KNEE ARTHROPLASTY	$	$	$	$	$	$
28285	Surgical	REPAIR OF HAMMERTOE	$	$	$	$	$	$
28296	Surgical	CORRECTION OF BUNION	$	$	$	$	$	$
29826	Surgical	SHOULDER ARTHROSCOPY/SURGERY	$	$	$	$	$	$
29877	Surgical	KNEE ARTHROSCOPY/SURGERY	$	$	$	$	$	$
29881	Surgical	KNEE ARTHROSCOPY/SURGERY	$	$	$	$	$	$
30520	Surgical	REPAIR OF NASAL SEPTUM	$	$	$	$	$	$
33533	Surgical	CABG, ARTERIAL, SINGLE	$	$	$	$	$	$
36415	Surgical	ROUTINE VENIPUNCTURE	$	$	$	$	$	$
42820	Surgical	REMOVE TONSILS AND ADENOIDS	$	$	$	$	$	$
43235	Surgical	UPPR GI ENDOSCOPY, DIAGNOSIS	$	$	$	$	$	$
43239	Surgical	UPPER GI ENDOSCOPY, BIOPSY	$	$	$	$	$	$
45378	Surgical	DIAGNOSTIC COLONOSCOPY	$	$	$	$	$	$
45380	Surgical	COLONOSCOPY AND BIOPSY	$	$	$	$	$	$
45384	Surgical	LESION REMOVE COLONOSCOPY	$	$	$	$	$	$
45385	Surgical	LESION REMOVAL COLONOSCOPY	$	$	$	$	$	$
47562	Surgical	LAPAROSCOPIC CHOLECYSTECTOMY	$	$	$	$	$	$
47563	Surgical	LAPARO CHOLECYSTECTOMY/GRAPH	$	$	$	$	$	$
49505	Surgical	PRP I/HERN INIT REDUC >5 YR	$	$	$	$	$	$
50590	Surgical	FRAGMENTING OF KIDNEY STONE	$	$	$	$	$	$
52000	Surgical	CYSTOSCOPY	$	$	$	$	$	$
52332	Surgical	CYSTOSCOPY AND TREATMENT	$	$	$	$	$	$
54150	Surgical	CIRCUMCISION W/REGIONL BLOCK	$	$	$	$	$	$
55250	Surgical	REMOVAL OF SPERM DUCT(S)	$	$	$	$	$	$
58150	Surgical	TOTAL HYSTERECTOMY	$	$	$	$	$	$
58260	Surgical	VAGINAL HYSTERECTOMY	$	$	$	$	$	$
58558	Surgical	HYSTEROSCOPY, BIOPSY	$	$	$	$	$	$
58563	Surgical	HYSTEROSCOPY ABLATION	$	$	$	$	$	$
58662	Surgical	LAPAROSCOPY, EXCISE LESIONS	$	$	$	$	$	$
59025	Surgical	FETAL NON-STRESS TEST	$	$	$	$	$	$
59400	Surgical	OBSTETRICAL CARE	$	$	$	$	$	$
59409	Surgical	OBSTETRICAL CARE	$	$	$	$	$	$
59410	Surgical	OBSTETRICAL CARE	$	$	$	$	$	$
59426	Surgical	ANTEPARTUM CARE ONLY	$	$	$	$	$	$
59510	Surgical	CESAREAN DELIVERY	$	$	$	$	$	$
62311	Surgical	INJECT SPINE L/S (CD)	$	$	$	$	$	$
63030	Surgical	LOW BACK DISK SURGERY	$	$	$	$	$	$
63075	Surgical	NECK SPINE DISK SURGERY	$	$	$	$	$	$
64483	Surgical	INJ FORAMEN EPIDURAL L/S	$	$	$	$	$	$
64721	Surgical	CARPAL TUNNEL SURGERY	$	$	$	$	$	$
66984	Surgical	CATARACT SURG W/IOL, 1 STAGE	$	$	$	$	$	$
67228	Surgical	TREATMENT OF RETINAL LESION	$	$	$	$	$	$
69436	Surgical	CREATE EARDRUM OPENING	$	$	$	$	$	$
G0202	Surgical	MAMMOGRAPHY SCREEN, DIGITAL IMG	$	$	$	$	$	$

Radiology				CARE SYSTEM SPECIFIC				
CPT CODE	TYPE	DESCRIPTION	Sanford Health (Bismarck Region)	Sanford Health (Fargo Region)	Altru Health	Mid Dakota Clinics	Trinity Health	OVERALL BOOK OF BUSINESS
70450	Radiology	CT Head/BRain w/o Dye	$	$	$	$	$	$
70553	Radiology	MRI Brain w/o & w/ Dye	$	$	$	$	$	$
71020	Radiology	Chest X-Ray, 2 Views	$	$	$	$	$	$
72141	Radiology	MRI Neck Spine w/o Dye	$	$	$	$	$	$
72148	Radiology	MRI Lumbar Spine w/o Dye	$	$	$	$	$	$
73221	Radiology	MRI Joint Upper Extremity w/o Dye	$	$	$	$	$	$
73630	Radiology	X-Ray Examination of Foot, 3 Views	$	$	$	$	$	$

North Dakota Public Employees Retirement System
Request for Proposals - Health Plan Administrator
PHYSICIAN REIMBURSEMENT

Proposing Vendor:							
73721	Radiology	MRI Joint of Lower Extremity w/o Dye	$	$	$	$	$	$
74177	Radiology	CT Abdomen & Pelvis w/ Contrast	$	$	$	$	$	$
76805	Radiology	Ultrasound, Pregnancy, 14+ Weeks	$	$	$	$	$	$
76830	Radiology	Ultrasound, Transvaginal	$	$	$	$	$	$
76856	Radiology	Ultrasound, Pelvic, Complete	$	$	$	$	$	$
77052	Radiology	Screening Mammography, Add On	$	$	$	$	$	$
77418	Radiology	IM Radiation Treatment Delivery	$	$	$	$	$	$
77427	Radiology	Radiation Treatment Management	$	$	$	$	$	$

Lab/Path				CARE SYSTEM SPECIFIC				
CPT CODE	TYPE	DESCRIPTION	Sanford Health (Bismarck Region)	Sanford Health (Fargo Region)	Altru Health	Mid Dakota Clinics	Trinity Health	OVERALL BOOK OF BUSINESS
80050	Lab/Path	General Health Panel	$	$	$	$	$	$
80053	Lab/Path	Comprehen Metabolic Panel	$	$	$	$	$	$
80061	Lab/Path	Lipid Panel	$	$	$	$	$	$
84443	Lab/Path	Assay Thyroid Stim Hormone	$	$	$	$	$	$
85025	Lab/Path	Complete Cbc W/Auto Diff Wbc	$	$	$	$	$	$
87880	Lab/Path	Strep A Assay W/Optic	$	$	$	$	$	$
88142	Lab/Path	Cytopath, C/V, Thin Layer	$	$	$	$	$	$
88304	Lab/Path	Tissue Exam By Pathologist	$	$	$	$	$	$
88305	Lab/Path	Tissue Exam By Pathologist	$	$	$	$	$	$
88307	Lab/Path	Tissue Exam By Pathologist	$	$	$	$	$	$

* G0202 is a HCPCS Code

LIST ALL COMPONENTS OF REIMBURSEMENT INCLUDED IN THE ALLOWED AMOUNTS ABOVE (I.E. PROVIDER TAX, PAY FOR PERFORMANCE COSTS SUCH AS YEAR END SETTLEMENTS, ETC.)

North Dakota Public Employees Retirement System
Request for Proposals - Health Plan Administrator
INPATIENT FACILITY REIMBURSEMENT

Proposing Vendor:

- **COMPLETE THE TABLE BELOW WITH YOUR AVERAGE NETWORK FACILITY REIMBURSEMENT LEVELS ("ALLOWED AMOUNT").**
- **PROVIDE CONTRACTED RATES AS OF 1/1/2015**

			FACILITY SPECIFIC						
#	MS-DRG CODE	MS-DRG DESCRIPTION	Altru Hospital Grand Forks	Sanford Medical Center Bismarck	Sanford Medical Center Fargo	St Alexius Medical Center Bismarck	Essentia Health Fargo	Trinity Hospital Minot	OVERALL BOOK OF BUSINESS
1	470	Major Joint Replacement Or Reattachment Of Lower Extremity W/O Mcc	$	$	$	$	$	$	$
2	885	Psychoses	$	$	$	$	$	$	$
3	775	Vaginal Delivery W/O Complicating Diagnoses	$	$	$	$	$	$	$
4	945	Rehabilitation W Cc/Mcc	$	$	$	$	$	$	$
5	790	Extreme Immaturity Or Respiratory Distress Syndrome, Neonate	$	$	$	$	$	$	$
6	897	Alcohol/Drug Abuse Or Dependence W/O Rehabilitation Therapy W/O Mcc	$	$	$	$	$	$	$
7	247	Perc Cardiovasc Proc W Drug-Eluting Stent W/O Mcc	$	$	$	$	$	$	$
8	460	Spinal Fusion Except Cervical W/O Mcc	$	$	$	$	$	$	$
9	766	Cesarean Section W/O Cc/Mcc	$	$	$	$	$	$	$
10	765	Cesarean Section W Cc/Mcc	$	$	$	$	$	$	$
11	251	Perc Cardiovasc Proc W/O Coronary Artery Stent W/O Mcc	$	$	$	$	$	$	$
12	871	Septicemia Or Severe Sepsis W/O Mv 96+ Hours W Mcc	$	$	$	$	$	$	$
13	330	Major Small & Large Bowel Procedures W Cc	$	$	$	$	$	$	$
14	743	Uterine & Adnexa Proc For Non-Malignancy W/O Cc/Mcc	$	$	$	$	$	$	$
15	220	Cardiac Valve & Oth Maj Cardiothoracic Proc W/O Card Cath W Cc	$	$	$	$	$	$	$
16	795	Normal Newborn	$	$	$	$	$	$	$
17	981	Extensive O.R. Procedure Unrelated To Principal Diagnosis W Mcc	$	$	$	$	$	$	$
18	887	Other Mental Disorder Diagnoses	$	$	$	$	$	$	$
19	234	Coronary Bypass W Cardiac Cath W/O Mcc	$	$	$	$	$	$	$
20	163	Major Chest Procedures W Mcc	$	$	$	$	$	$	$
21	473	Cervical Spinal Fusion W/O Cc/Mcc	$	$	$	$	$	$	$
22	883	Disorders Of Personality & Impulse Control	$	$	$	$	$	$	$
23	392	Esophagitis, Gastroent & Misc Digest Disorders W/O Mcc	$	$	$	$	$	$	$
24	853	Infectious & Parasitic Diseases W O.R. Procedure W Mcc	$	$	$	$	$	$	$
25	236	Coronary Bypass W/O Cardiac Cath W/O Mcc	$	$	$	$	$	$	$
26	946	Rehabilitation W/O Cc/Mcc	$	$	$	$	$	$	$
27	919	Complications Of Treatment W Mcc	$	$	$	$	$	$	$
28	794	Neonate W Other Significant Problems	$	$	$	$	$	$	$
29	026	Craniotomy & Endovascular Intracranial Procedures W Cc	$	$	$	$	$	$	$
30	774	Vaginal Delivery W Complicating Diagnoses	$	$	$	$	$	$	$
31	885	Psychoses	$	$	$	$	$	$	$
32	698	Other Kidney & Urinary Tract Diagnoses W Mcc	$	$	$	$	$	$	$
33	847	Chemotherapy W/O Acute Leukemia As Secondary Diagnosis W Cc	$	$	$	$	$	$	$
34	791	Prematurity W Major Problems	$	$	$	$	$	$	$
35	470	Major Joint Replacement Or Reattachment Of Lower Extremity W/O Mcc	$	$	$	$	$	$	$
36	329	Major Small & Large Bowel Procedures W Mcc	$	$	$	$	$	$	$
37	881	Depressive Neuroses	$	$	$	$	$	$	$
38	343	Appendectomy W/O Complicated Principal Diag W/O Cc/Mcc	$	$	$	$	$	$	$
39	846	Chemotherapy W/O Acute Leukemia As Secondary Diagnosis W Mcc	$	$	$	$	$	$	$
40	641	Misc Disorders Of Nutrition,Metabolism,Fluids/Electrolytes W/O Mcc	$	$	$	$	$	$	$
41	494	Lower Extrem & Humer Proc Except Hip,Foot,Femur W/O Cc/Mcc	$	$	$	$	$	$	$
42	299	Peripheral Vascular Disorders W Mcc	$	$	$	$	$	$	$
43	246	Perc Cardiovasc Proc W Drug-Eluting Stent W Mcc Or 4+ Vessels/Stents	$	$	$	$	$	$	$
44	025	Craniotomy & Endovascular Intracranial Procedures W Mcc	$	$	$	$	$	$	$
45	792	Prematurity W/O Major Problems	$	$	$	$	$	$	$
46	872	Septicemia Or Severe Sepsis W/O Mv 96+ Hours W/O Mcc	$	$	$	$	$	$	$
47	862	Postoperative & Post-Traumatic Infections W Mcc	$	$	$	$	$	$	$
48	854	Infectious & Parasitic Diseases W O.R. Procedure W Cc	$	$	$	$	$	$	$
49	419	Laparoscopic Cholecystectomy W/O C.D.E. W/O Cc/Mcc	$	$	$	$	$	$	$
50	238	Major Cardiovasc Procedures W/O Mcc	$	$	$	$	$	$	$

LIST ALL COMPONENTS OF REIMBURSEMENT INCLUDED IN THE ALLOWED AMOUNTS ABOVE (I.E. PROVIDER TAX, PAY FOR PERFORMANCE COSTS SUCH AS YEAR END SETTLEMENTS, ETC.)

North Dakota Public Employees Retirement System
Request for Proposals - Health Plan Administrator
OUTPATIENT FACILITY REIMBURSEMENT

Proposing Vendor:

- **COMPLETE THE TABLE BELOW WITH YOUR AVERAGE NETWORK FACILITY REIMBURSEMENT DISCOUNT ("ALLOWED AMOUNT LEVEL").**
- **PROVIDE CONTRACTED DISCOUNT AS OF 1/1/2015**

	FACILITY SPECIFIC						
	Altru Hospital Grand Forks	Sanford Medical Center Bismarck	Sanford Medical Center Fargo	St Alexius Medical Center Bismarck	Essentia Health Fargo	Trinity Hospital Minot	OVERALL BOOK OF BUSINESS
OP Facility Avg Discount from Charges	%	%	%	%	%	%	%

Appendix K. Suggested Changes to Plan Design, Programs and Services

Vendors should match the current programs and services as closely as possible when providing proposals. This appendix is meant for vendors to offer suggested changes to plan design and identify the cost or cost savings associated with each suggestion. In addition, vendors can suggest or offer changes to the services along with identification of the benefits/cost or savings. This section is not meant to list deviations to required agreements or service offerings.

Appendix L – PBM Questionnaire

In order for your proposal to be considered and accepted, your organization must provide answers to the questions presented in this section. Each question must be answered specifically and in detail. Include both the question and the answer in your proposal response. An electronic copy of this questionnaire has been provided to facilitate your response.

Reference should not be made to a prior response unless the question involved specifically provides such an option. Proposers should refer to the earlier sections of this RFP before responding to any of the questions, to ensure that you have a complete understanding of the requirements with respect to your organization's proposal.

Vendors may include additional information that you consider relevant or useful to NDPERS. However, responses to all of the questions set forth below must be provided.

NDPERS is interested in evaluating financial arrangements based on the traditional approach to PBM pricing and pricing under a transparent arrangement. "Traditional" financial proposals should include guaranteed effective rate discounts, as well as specific fees and guaranteed rebate dollar amounts. "Transparency" for purposes of this Request for Proposal is defined as a full pass through to NDPERS of all monies paid to the PBM arising from all contracted arrangements. **When answering questions and completing exhibits related to your financial proposal, please indicate if your answer would differ under a transparent or a traditional pricing arrangement.** NDPERS will give greater preference to transparent proposals.

If this proposal results in your company being awarded a contract and if, in the preparation of that contract, there are inconsistencies between what was proposed and accepted versus the contract language that has been generated and executed, any controversy arising over such discrepancy will be resolved in favor of the language contained in the proposal or correspondence relating to your proposal. Vendors are reminded that **any and all deviations must be clearly identified and described in the RFP and the deviations worksheet provided in Appendix F.**

The questionnaire is broken down into the following 10 (ten) categories:

- Organizational Background, Strength, and Experience
- Implementation and Account Management
- Communications and Website
- Plan Administration
- Eligibility
- Customer/Member Service
- Claims Administration
- Reporting
- Case/Utilization Management
- Health Risk Management and Wellness Programs
- Provider Network
- Performance Standards and Guarantees
- Pharmacy Benefits Management Services
- Financials

1.1 Organizational Background, Strength, and Experience

1. Provide a brief description of your organization:
    a. Include your company history, organizational structure, services provided, location of headquarters, and length of time you have been in business.
    b. Include the number and type (governmental or private) of clients, the total number of eligible employees, and the total number of actual participants that your company currently serves.
    c. Describe any significant historical or future organizational developments (acquisitions, mergers, change in subcontracted vendors, etc.).
2. Vendors responding to this RFP must be able to substantiate their financial stability. Provide a copy of your audited financial statement or other financial information. Include, at a minimum, a Balance Sheet and a Profit and Loss Statement, together with the name and address of the bank(s) with which you conduct business and the public accounting firm(s) that audit your financial statements. Other sufficient information may include a written statement from a financial institution confirming the creditworthiness and financial stability of the vendor.
3. Provide a copy of any State or Federal regulatory audit performed within the last two years.
4. Confirm that your organization agrees to be accountable for everything stated in and submitted as part of your proposal, even if not specifically addressed in the Minimum Contract Provisions in Appendix 1
5. Indicate whether your company has ever been or is currently a party to litigation regarding a pharmacy benefit plan contract or agreement. If so, provide details of the litigation or action. Failure to disclose this may constitute grounds for rejection of any proposal or termination of any contract.
6. State whether the vendor, its officers, agents or employees, who are expected to perform services under the NDPERS contract, have been disciplined, admonished, warned, or had a license, registration, charter, certification, or any similar authorization to do business suspended or revoked for any reason.
7. Include a description of your organization's major short term strategic initiatives and your long term strategic business plan. Specifically address cost containment efforts.
8. Describe how your organization differentiates itself from your competitors. Specifically, what makes your organization the best partner for NDPERS?
9. Identify all services that are currently outsourced or subcontracted, the name of the vendor/partner, and length of the relationship. Describe how you ensure quality customer service and timely and effective issue resolution.

10. What ratings have you received from the following third party rating companies and organizations?

Rating Organization	Rating	Date of Last Accreditation / Rating
A.M. Best		
Standard & Poor's		
Moody's		
NCQA (by product)		
JCAHO		
URAC		
American HealthCare Commission		

11. Are any of the services you are proposing to provide to NDPERS contracted outside the U.S.A? Describe any business you do outside the U.S.A. and the financial impact, if any, of requiring those services to be provided within the U.S.A.
12. Confirm that your proposal includes any and all deviations to the Minimum Contract Provisions (via submission of Exhibit F) and to the other RFP requirements (via Exhibit F, worksheet 2).
13. Confirm that you will conform to the Patient Protection and Affordable Care Act and the Health Care and Education Reconciliation Act of 2010. Describe any provisions that NDPERS must be prepared to comply with beginning July 1, 2015.

1.1.2 References and Experience

1. Provide the following information on a maximum of three (3) of your largest pharmacy benefit plan clients for whom you provide pharmacy network, and administrative services on a self-insured basis. References of similar size and scope to NDPERS are preferred; one must be your largest public sector client and one must be your largest North Dakota-based client. Identify those clients who are large employers with multiple payroll processing centers and Medicare Part D program support.

    a. Name of employer sponsoring plan and location
    b. Type of services provided to plan sponsor
    c. Plan inception date
    d. Length of time as client
    e. Number of contracts and members participating in the plan
    f. Contact information (name, title, phone number, email address)

2. Provide the following information for two (2) of your largest pharmacy benefit plan clients that have terminated services during the preceding 3-year period. References of similar size and scope to NDPERS are preferred.

    a. Name of employer sponsoring plan and location
    b. Type of services provided to plan sponsor
    c. Plan inception date
    d. Length of time as client
    e. Number of contracts and members participating in the plan
    f. Reason for termination
    g. Contact information (name, title, phone number, email address)

1.2 Implementation and Account Management

3. Describe the timetable and specific tasks involved to have the NDPERS' program operative for the July 2015 Plan Year. Include a detailed implementation plan and business plan or timeline related to prescription drug coverage including Medicare Part D program support. At a minimum be specific with regard to the following:

    - Amount of total time needed to effectively implement the program
    - Activities/tasks and corresponding timing
    - Responsible parties and amount of time dedicated to implementation, broken out by vendor and NDPERS staff
    - Any transition activities required with incumbent carriers, including providing members adequate notice regarding current care or treatment plans at least 60 days prior to a change
    - Length of time implementation team lead and members will be available to NDPERS

4. Provide an overview of how the NDPERS relationship will be managed, both strategically and on a day-to-day basis. Include an organizational chart. NDPERS will give preference to vendors who are willing to assign a dedicated account management team and provide access to senior leadership. Designate the names, titles, location, telephone numbers, and email addresses for the representatives listed below. For the account service individuals listed (b, c, d, and e below), provide brief biographical information, such as years of service with your company, experience as it relates to this proposal, and the number of clients for which they perform similar services.

    a. The key individual representing your company during the proposal process;
    b. The key individuals on your proposed implementation team;
    c. The key individual assigned to overall contract management;
    d. The key dedicated individual or team members responsible for day-to-day account management and service;
    e. The key individual responsible for provider contracting; and
    f. The key individual responsible for provider relations if different than letter e. above.

5. Please provide the requested information for the functions that will be servicing NDPERS in the table below:

Area	**Geographical Location(s) and Organization Name (if out-sourced)**	**Hours of Operation (Specify PST/CST/EST)**	**Is this service Outsourced? Yes or No?** ***If Yes, provide name of company to which the function is outsourced***
Member Service			❑ Yes *Specify Company Name:* _____ ❑ No
Claims Processing			❑ Yes *Specify Company Name:* _____ ❑ No
Enrollment and Eligibility			❑ Yes *Specify Company Name:* _____ ❑ No
Management of Clinical Programs			❑ Yes *Specify Company Name:* _____ ❑ No
Specialty Drug Program			❑ Yes *Specify Company Name:* _____ ❑ No
Mail Order Program			❑ Yes *Specify Company Name:* _____ ❑ No
Other (Specify functional area)			❑ Yes *Specify Company Name:* _____ ❑ No

1.3 Communications and Website

6. Please complete the table below by providing a description of the pre-enrollment communication materials you will provide to support NDPERS during its open enrollment period:

Area	Description	Can it be customized for NDPERS?
Website		☐ Yes ☐ No
Employee Newsletter(s)		☐ Yes ☐ No
Brochures		☐ Yes ☐ No
Direct mail (internal or home distribution)		☐ Yes ☐ No
Enrollment guide		☐ Yes ☐ No
Employee open enrollment meeting support and attendance		☐ Yes ☐ No
Benefits/HR staff training support		☐ Yes ☐ No
Video		☐ Yes ☐ No
Other (please list)		☐ Yes ☐ No

7. Are you willing to provide communication and marketing resources to work with NDPERS in the development of NDPERS-specific member communication materials (educational, open enrollment, benefit plan related, ongoing communications)? Describe the resources, sample communications, and your proposed approach and strategy/plan.

8. How much lead time is necessary for you to guarantee that ID cards will be received by members prior to the plan year effective date of July 1, 2015?

1.4 Plan Administration

9. Confirm that you will communicate legislative changes related to the operations of the plan in a timely manner, and describe the support staff and process.

10. NDPERS recognizes that different settlement arrangements will be necessary to implement a self-insured program. Please describe your proposed settlement process.
11. What is your total commercial and Medicare pharmacy plan enrollment? Complete the table below.

Dates	Commercial	Medicare
As of January 2012		
As of January 2013		
As of January 2014		

1.5 Eligibility

12. Are ID cards the sole means of determining member eligibility? If not, please describe.
13. If desired, can NDPERS update and maintain eligibility and check employee claim status online? Are there any special charges for access to and use of these tools?

14. NDPERS will submit enrollments via a centralized electronic system. NDPERS will collect enrollment/eligibility information which will be provided to the successful contractor on a data file that follows the HIPAA 834 file specifications. Files will be transmitted using a secure file transmission process. The successful contractor must be able to receive this data in that format and media.

15. Please describe how you handle manual eligibility updates and the turn-around/timing of such updates.

16. Please describe your standard (or proposed) financial arrangements with NDPERS under a self-funded arrangement including but not limited to: account requirements and process for claim payment, frequency of reimbursement to the administrator for claims paid, methodology for funds transfers, required reserves in claim account, etc.

1.6 Customer/Member Service

17. Confirm if you will provide and maintain dedicated customer service staff acceptable to NDPERS. If yes, this unit will provide dedicated local and toll-free telephone numbers and shall respond directly to member inquiries regarding benefits, claim status, selecting participating providers, and provide general assistance with navigating on-line and other resources available through the health plan and NDPERS websites. If yes, describe the structure and organization and provide an organizational chart of the unit you are proposing. If no, please describe how these services will be provided.

1.7 Claims Administration

18. Provide the following information regarding the claims administration unit that will handle the NDPERS account. If there is more than one claims processing location, provide information for each.

	Claims Processing Unit
Address/Location	
Phone Numbers	
Days and Hours of Operation	
Number of Members Serviced	
Number of Employer Groups Serviced	
Ratio of Claims Unit Staff to Members Serviced	
Volume of Claims Processed Daily	

19. Confirm that you are able to administer the NDPERS designs (Dakota Plan and Dakota Retiree Plan, HDHP/HSA) and benefit levels without manual intervention. If you are unable to administer the plan, you must specify any plan design deviations proposed as specified in the RFP.

1.8 Reporting

20. Please provide samples of your monthly, quarterly, and annually standard reporting packages.
21. Describe your online reporting capabilities. Please describe the data/information and types of reports that can be accessed and downloaded from your online system.
22. Explain your ability to comply with the NDPERS current data warehouse arrangement by providing pharmacy claims and enrollment data to NDPERS in a format agreed upon between you and NDPERS no less than monthly.

1.9 Pharmacy Benefits Management Services

23. Describe your mail order pharmacy program and provide details on how you market this service.
24. Describe your PBM rebate process. NDPERS is requesting that you provide a rebate guarantee in appendix H.
25. Describe your methodology for pricing (AWP, AAC, WAC, etc.)? Please explain in detail.

1.9.1 Formulary

26. Provide details and the capabilities of your organization to provide a formulary that is at a minimum equivalent to and as comprehensive as the current formulary used by the NDPERS program. Provide sample formulary documents. At a minimum include the following:
    - Describe your policy regarding formulary changes and your procedures for educating and notifying members. Indicate how often the formulary is changed.
    - Describe how drugs are evaluated for possible inclusion on the formulary.
    - Describe the basis of your formulary development and maintenance.
    - Provide specific information where a higher cost option of therapeutic equivalent drug has been included in your formulary and provide rationale for doing so.
    - What is your definition of a Generic Drug?
    - What is your definition of a Brand Drug?
    - Describe the composition of your review board/committee and how often do they meet and how are they selected to be a member.

1.9.2 Management of Clinical Programs

27. Provide information that demonstrates your organization can effectively administer the programs listed below in order to partner the pharmacist, other health professionals and the member to ensure the optimum therapeutic outcomes for our members. Also provide information that demonstrates your organization's ability to promote the safe and effective use of medications, and help our members achieve targeted outcomes.
    a. Drug Utilization Reviews (DUR) - retrospective, concurrent and prospective.
    b. Disease Management
    c. Medication Therapy Management
28. Does your organization perform retrospective DUR for all claims of a given client? Please provide frequency of retrospective DUR.

29. What is the generic utilization and substitution rate for your overall book of business nationally and in North Dakota?

	2012	2013	2014 YTD
BOOK OF BUSINESS			
Generic utilization rate			
Generic substitution rate			
NORTH DAKOTA			
Generic utilization rate			
Generic substitution rate			

1.9.3 Trend Analysis

30. Your organization must be able to provide NDPERS with a comprehensive, annual trend analysis report as background for making pricing decisions. At a minimum the report must:
    a. Contain extensive utilization and drug spend data that presents future trend drivers, both industry wide and specific to our programs.
    b. Provide information on the generic pipeline, drug indication changes that may affect drug utilization, specialty drug utilization trends, new drug introductions and other similar trend drivers.
    c. Show the impacts of, and provide recommendations for addressing price inflation, rebate performance and other pricing related drivers, in addition to pharmacy network trends and opportunities.
31. Describe your organizations Trend Analysis reporting capabilities. Provide sample reports that reflect your organization's ability to provide thorough trend analysis for NDPERS.

1.9.4 Specialty Drug Program

32. Describe in detail how your organization will manage specialty and compound drugs based on NDPERS's current plan design. Provide detailed information about your organization's capabilities to administer a specialty drug program. Indicate specific results your specialty drug program has achieved for your current and past clients in terms of reduced program costs (quantitative and qualitative). Include details about the Specialty pharmacy you contract with. Provide your listing of "Specialty" drugs in Appendix D.

1.9.5 Network Accessibility and Disruption

33. How are pharmacies selected for inclusion in your network? Would your organization be willing to contract with additional pharmacies if there are geographic locations where participants live but which do not have access to one of your pharmacies?
34. Indicate which major chain stores are not included in your proposed network for NDPERS.

1.9.6 Medicare Part D

35. Describe the ability of your organization to provide Medicare Part D coverage for Medicare eligible retirees enrolled in the NDPERS group health insurance program. Identify any subcontractor that would be used to provide Medicare Part D coverage to the NDPERS Medicare eligible retirees and note that NDPERS reserves the right to approve the subcontractor. Also identify what type of plan would be used (e.g. 800-Series EGWP, Direct-Contract EGWP).
36. How many EGWP plans does your firm manage?
37. How many members participate in the EGWP plans that you service?
38. Describe how Out Of Pocket ("OOP") and True Out Of Pocket ("TrOOP") expenses are applicable to EGWP PDP Participants for 2014 and the differences, if any, that can be expected in 2015 and beyond.
39. Describe your understanding of the restrictions placed on EGWP + Wrap plans by CMS.
40. Please describe the Part D enrollment process under your PDP: Are you able to automatically group-enroll members into Medicare Part D?
41. Please describe your Part D disenrollment process for both voluntary and involuntary disenrollments.
42. Please describe the Part D enrollment process under your PDP: Are there differences for members who "aged in" to Medicare while enrolled in your plan, and members who are Medicare-eligible when they first enroll in your plan?
43. Describe the changes in the plan design described herein, if any, that would be required to maximize collection of all available subsidies, reinsurance, discounts or rebates.
44. Describe your systems capabilities that allow coordination of benefits between Medicare Part D and a "wrap-around" plan at the point of sale. How is this handled for members who are enrolled in another Medicare Plan with a different PDP?
45. How often do you review the formulary under your Medicare plans?
46. Describe your handling of members who are eligible for the low income subsidy available under Medicare Part D, specifically: How are the members identified, and how are they informed of their enhanced benefits?
47. Describe your handling of members who are eligible for the low income subsidy available under Medicare Part D, specifically: How are these members reported to the plan sponsor?

48. Describe your handling of members who are eligible for the low income subsidy available under Medicare Part D, specifically: How often are premium refunds issued to the plan sponsor?

49. Provide a copy of the proposed GWP formulary.

50. Describe the processes to collect funding from the following sources the EGWP PDP, including the timing and frequency with which such funds would be submitted to PERS.
    a. Direct Subsidy
    b. Coverage Gap Discount Program
    c. Catastrophic Reinsurance
    d. Low Income Cost Share Subsidies
    e. Low Income Premium Subsidies
    f. Manufacturer Rebates

1.10 PBM Financials

51. Bidder confirms the use of Medispan or another nationally available and nationally recognized reporting service of pharmaceutical drug information in determining the classification of drugs (e.g. legend vs. over the counter, generic vs. brand, single source vs. multisource) for the purposes of plan adjudication and the calculation of discount and rebate guarantees.
    a. Confirmed
    b. Not confirmed, see explanation

52. Bidder confirms that the discount guarantees proposed represent Medi Span/ First Databank post-settlement pricing.
    a. Confirmed
    b. Not confirmed, see explanation

53. Bidder confirms that for the purposes of reconciling guarantees, proposed AWP discount will be applied to each claim individually and shall not mean “Average AWP” nor “Effective AWP”
    a. Confirmed
    b. Not confirmed, see explanation

54. Bidder confirms Zero Balance Due claims will be reconciled at the guaranteed AWP component discount and shall not be counted as AWP-100%
    a. Confirmed
    b. Not confirmed, see explanation

55. Bidder confirms members will pay the lowest of the copay, “Usual and Customary” (U&C), or discounted ingredient cost plus dispensing fees at retail/mail.
    a. Confirmed
    b. Not confirmed, see explanation

56. Bidder confirms that specialty pricing will include ingredient cost discounts by drug with a minimum effective discount guarantee for all brand specialty drugs and a minimum effective discount guarantee for all specialty generic drugs.
    a. Confirmed
    b. Not confirmed, see explanation

57. Bidder confirms that pricing for Specialty Drugs added to the list on or after the date the proposal is submitted will not automatically default to a minimum discount in the therapeutic class.
    a. Confirmed

b. Not confirmed, see explanation

58. Bidder confirms that generic discount guarantees include the combined MAC and non-MAC pricing
    a. Confirmed
    b. Not confirmed, see explanation

59. Bidder confirms retail and mail discount guarantee calculations should exclude specialty/biotech drugs, compound drugs, and vaccines.
    a. Confirmed
    b. Not confirmed, see explanation

60. Bidder confirms that overages in any financial guarantee may not be used to offset any shortfalls in another financial guarantee. This includes guarantees within the same delivery channel (e.g.: surplus in retail brand discount will not be used to offset shortfall in retail generic discount)
    a. Confirmed
    b. Not confirmed, see explanation

61. Bidder confirms that dispensing fees proposed are per claim maximums and not averages.
    a. Confirmed
    b. Not confirmed, see explanation

62. Bidder confirms proposed financial guarantees are not tied to aggregate days' supply utilization at retail or mail (eg: rebates will not be impacted if the aggregate retail day supply at the end of the reconciliation period is 23 days instead of 30 days).
    a. Confirmed
    b. Not confirmed, see explanation

63. Bidder confirms that after two years of the contract, PERS will have the right to solicit pricing from the market. Should the results indicate a 2% improvement opportunity, PERS will have the opportunity to re-negotiate pricing.
    a. Confirmed
    b. Not confirmed, see explanation

64. Bidder confirms postage increases will not be passed on to PERS.
    a. Confirmed
    b. Not confirmed, see explanation

65. Bidder confirms that MAC pricing will be applied to generics dispensed at mail.
    a. Confirmed
    b. Not confirmed, see explanation

66. Bidder confirms proposed MAC list includes minimum of 95% of all generic drugs.
    a. Confirmed
    b. Not confirmed, see explanation

67. Bidder confirms that only one (1) MAC list will be used for PERS at retail and mail.
    a. Confirmed
    b. Not confirmed, see explanation

68. Bidder confirms that drug status as "Multi-Source Brand", "Single-Source Brand", "Brand Drug with Generics", and "Generic" will be used based on Medi-Span indicators.
    a. Confirmed
    b. Not confirmed, see explanation

69. Bidder confirms that all “Generic” drugs will be included in the “Generic Discount Guarantee” for purposes of guarantee reconciliation (this includes all “Single-Source Generics”, generics with limited availability, and generics that are subject to patent litigation).
    a. Confirmed
    b. Not confirmed, see explanation

70. Bidder confirms they are currently certified by CMS as an EGWP Administrator
    a. Confirmed
    b. Not confirmed, see explanation

1.11 Economy to be affected

71. Please indicate if you will have an office in North Dakota and where most of the work on this contract will be done?
72. Please identify the number of employees you will employ in North Dakota pursuant to this contract.
73. Of your total administrative fee please estimate the amount that will be spent in North Dakota and the amount that will spent outside the state.

1.12 Fiduciary Responsibility

74. Confirm your organization will assume full fiduciary responsibility for claim determination.

Appendix B: Response Template

1. Face sheet

Name of Proposer's Firm:	
Federal Tax I.D. Number:	
Principal Place of Business:	
Address:	
City:	
State and Zip:	
Contact Person:	
Title:	
Telephone:	
Fax:	
E-mail address:	

2. Minimum Requirements (please identify if you would be able to meet this existing service and if not what you would propose.

Minimum Requirements	Response
Electronic Data Collection and Reporting Requirements: Respondents must, at a minimum, meet the data collection and reporting requirements described in Section 1 under Reporting Requirements of the RFP.	
Vendor must be able to take current 834 electronic enrollment file (containing member eligibility) at no cost.	
Effective Date of Coverage: Respondents must be able to provide required coverages and services by July 1, 2015 and January 1 2016 for the PDP.	
Licensure: Respondents must have all applicable licenses required by North Dakota or agree to obtain necessary licensure prior to the effective dates of coverage.	
Term of Contract: NDPERS is required by state statute to solicit bids for medical benefit coverage for a specified term for a fully-insured arrangement and every other biennium for a self-funded arrangement. NDPERS has determined that the specified term for fully-insured arrangement shall be six years subject to two year renewals, however, NDPERS reserves the right to extend the agreement subject to negotiation with the successful vendor if the Board deems it necessary.	
Premium Rate Guarantees: For all insured proposals premium rates must be guaranteed for a period of two years, from July 1, 2015 to June 30, 2017. PDP rates will be developed each year based upon the federal subsidy.	
PDP rates: Must be submitted to PERS by September of each year.	
Non-Medicare Retirees: Rates are governed by state statue. Non-	

Minimum Requirements	Response
Medicare retiree single rate is 150% of the active member single rate; the rate for a non-Medicare retiree plus one is twice the non-Medicare single rate, and the rate for a non-Medicare retiree plus two or more dependents is two and one-half times the non-Medicare retiree single rate.	
Renewals: Renewals must be submitted to NDPERS in August of the year preceding the contract renewal date and in September of each year for the PDP.	
Contract Termination: Respondent's contract termination provision may not require more than 120-day notice and can occur only at renewal. NDPERS can terminate coverage at any time.	
Replicate Coverage: Respondent should replicate the existing coverage and financial terms for two years including an HSA arrangement. Variances and exceptions to existing coverage can be offered in appendix F item F2.	
Legislative Compliance: Respondents agree to comply with all provisions of the Health Insurance Portability Act of 1996 including, but not limited to providing certificates of creditable coverage. Respondents must also be in compliance with all HIPAA Privacy and HIPAA EDI requirements and be able to conduct all applicable employer/plan sponsor and provider transactions consistent with those requirements. Respondents will be expected to meet HIPAA security requirements when applicable to NDPERS. Respondents will also be expected to be in compliance with all ACA requirements	
Transition Management: Respondents agree, should they be selected, they will proactively manage the transition of coverage (e.g. claim accumulators, lifetime maximums, etc.) from the subsequent carrier.	
Administration: Respondents must agree to comply with existing administration of NDPERS. Any modifications needed to accommodate NDPERS data will be done at the vendor's own	

Minimum Requirements	Response
expense.	
Audit: NDCC 54-52-05 (10) relating to the audit authority of NDPERS.	
North Dakota Legislation Requirements: Respondent must meet all requirements in the North Dakota Century Code including 54-52.1 and all requirements in the North Dakota Administrative Code including 71-03. Specific recognition of 54-52.1-12 should be acknowledged.	
Ability to meet the specifications outlined in the RFP unless specifically noted	
Premium rates must be divisible by two.	
Subject matter experts and other appropriate personnel will be available to attend board meetings, legislative hearings, etc. as needed	

3. Affidavit of Non-collusion

I swear (or affirm) under the penalty of perjury:

1. That I am the Responder (if the Responder is an individual), a partner in the company (if the Responder is a partnership), or an officer or employee of the responding corporation having authority to sign on its behalf (if the Responder is a corporation);

2. That the attached proposal submitted in response to the Group Medical Coverage Request for Proposals has been arrived at by the Responder independently and has been submitted without collusion with and without any agreement, understanding or planned common course of action with, any other Responder of materials, supplies, equipment or services described in the Request for Proposal, designed to limit fair and open competition;

3. That the contents of the proposal have not been communicated by the Responder or its employees or agents to any person not an employee or agent of the Responder and will not be communicated to any such persons prior to the official opening of the proposals; and

4. That I am fully informed regarding the accuracy of the statements made in this affidavit.

Responder's Firm Name: _____

Authorized Signature: _____

Date: _____

Subscribed and sworn to me this _____ day of _____

Notary Public: _____

My commission expires: _____

4. Conflicts of interest list
Responders must provide a list of all entities with which it has relationships that create, or appear to create, a conflict of interest with the work that is contemplated in this request for proposals. The list should indicate the name of the entity, the relationship, and a discussion of the conflict.

5. Compliance with Federal and State Laws Form

NDPERS — Federal and State Law Compliance Certification

1. The company shown below is or will be in compliance with Federal and State laws and does not knowingly violate North Dakota or United States Laws. The company shown below will obtain this certification from all subcontractors who will participate in the performance of this contract; and

I certify that the company shown below is in compliance with items 1 above and that I am authorized to sign on its behalf.

Name of Company: _____Date: _____

Authorized Signature: _____Telephone Number: _____

Printed Name: _____Title: _____

6. Location of Service Disclosure and Certification

STATE OF NORTH DAKOTA

LOCATION OF SERVICE DISCLOSURE AND CERTIFICATION

LOCATION OF SERVICE DISCLOSURE

Check all that apply:

- ❑ The services to be performed under the anticipated contract as specified in our proposal will be performed ENTIRELY within the State of North Dakota.
- ❑ The services to be performed under the anticipated contract as specified in our proposal entail work ENTIRELY within another state within the United States.
- ❑ The services to be performed under the anticipated contract as specified in our proposal will be performed in part within North Dakota and in part within another state within the United States.
- ❑ The services to be performed under the anticipated contract as specified in our proposal DO involve work outside the United States. Below (or attached) is a description of

  (1) the identity of the company (identify if subcontractor) performing services outside the United States;

  (2) the location where services under the contract will be performed; and

  (3) the percentage of work (in dollars) as compared to the whole that will be conducted in each identified foreign location.

CERTIFICATION

By signing this statement, I certify that the information provided above is accurate and that the location where services have been indicated to be performed will not change during the course of the contract without prior, written approval from the State of North Dakota.

Name of Company: _____

Authorized Signature:_____

Printed Name: _____

Title: _____

Date:_____ Telephone Number:_____

VII. Exhibits

E1 Healthy Blue Overview
E2 Health Club Credit Overview
E3 Health Mandate Cost Fiscal Note
E4 Quarterly Executive Summary E5
Annual Executive Summary
E6 Monthly Financial Report
E7 Annual Claims Audit
E8 MSP Data Match Compliance
E9 2015 – 2017 NDPERS Plan Options
E10 Memorandum of Understanding for Value added programs
E11 Wellness Program Voucher
E12 Wellness Challenge
E13 Wellness Star
E14 Monthly Newsletter for Wellness Coordinators
E15 Wellness Coordinator Call
E16 Member Education Presentations
E17 Enrollment/disenrollment Medicare Part-D Exception Report
E18 Monthly Enrollment Report
E19 Wellness Coordinator Workshop Agenda

Time to take charge of your health?

Help is a click away
Want to start eating better? Run a marathon? Maybe you just want to get up off the couch. The HealthyBlue website gives you tools for success, no matter where you are on the fitness scale.

You begin with a plan
Your participation begins with a health assessment. Then based on your answers, HealthyBlue creates a personalized health plan, tailored to your lifestyle and wellness goals. You won't have to wonder where to begin or what to do next...it's all outlined in the plan.

Earn rewards for your efforts
Better health is not the only reward you can expect. When you take steps toward your health goals, you earn points that can be redeemed for things like fitness gear or gift cards to Target, Barnes & Noble and others—up to $250 each year.

You'll get the information that's relevant to you

This web-based wellness portal provides you with many useful tools to help you take control of your health, reduce your health risks and help you live a longer, happier life.

Health logs
- Help in tracking blood sugar, blood pressure, cholesterol, lipids, heart rate and weight

Progress report
- Tracks health and wellness progress

Incentives
- Earn points for completing tasks

Logs
- Progress tracked through logs for what you eat and records of exercise results, including sets, repetitions and weight

Wellness workshops
- Interactive tasks about weight and stress management, diabetes, nutrition, smoking cessation and high blood pressure

Health Assessment
- Answer questions to identify and understand health risks
- Tracks nutrition, exercise, stress and safety, health and preventive health, tobacco, drugs and alcohol use, biometrics and willingness to change

Wellness challenges
- Walking, exercise or weight competitions between individuals, groups or locations

Nutrition
- Recipe assistance
- Meal planning
- Assessing nutritional needs

Exercise
- Exercise planner
- Exercise examples

You'll want to visit HealthyBlue regularly to:

- Participate in online wellness workshops and customized challenges
- Discover inspirational articles on healthy living
- Track your progress
- Watch your rewards accumulate and redeem them for gift cards

HealthyBlue

Get registered today!

1. Go to www.ndpersHealthyBlue.com
2. Click on "Not registered? Sign Up Now."
3. Register and record your username and password on the enclosed card.
4. Complete your Health Assessment

*You may use the enclosed *Know Your Numbers* card to record optional health information from your doctor's office that will be helpful in completing your Health Assessment.

ND

An independent licensee of the Blue Cross & Blue Shield Association.
Noridian Mutual Insurance Company

www.ndpersHealthyBlue.com

HealthClub Credit

What can I earn?

You can earn up to a $20 credit per month for visiting a NIHCA-affiliated health club. To earn this credit, you must exercise 12 or more days per month. (You are responsible to make sure your visits to the health club are recorded.)

How do I start?

Bring your BCBSND ID number to a participating health club, where you will receive and complete an enrollment form. You will also need to complete the Health Assessment annually on HealthyBlue to receive credit. Click here to log into HealthyBlue.

Exercise and credit schedule

You may sign up for the program at any time. Credits will follow the below schedule:

Activity month	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
Verification and credit dispersed	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan

Note: If there are any changes to your BCBSND health plan, please let your health club staff know. You should also contact BCBSND at the number on the back of your ID card as it may affect your credit eligibility.

If you cancel your health club membership, or if the health club discontinues participation in the program, you will forfeit any unapplied credits.

How is the credit received?

There are different options, depending on your club's existing payment system. The credit can either be automatically deposited in your bank account or sent to the health club to be credited directly toward your membership.

I belong to a club with multiple locations. Can I work out at any location and still have it count toward my 12 days per month requirement?

Only workouts that take place at the location where you first enroll will count toward your monthly credit.

What do I do if I did not receive my credit?

Check with your health club first. Your health club receives a report that includes an error code number and description. Common reasons for not receiving credit include misspelled names, incorrect date of birth, failure to meet minimum visit criteria and no completed authorization and health assessment on file.

Which health clubs participate?

To view current health clubs that participate with NIHCA or to nominate a club go to www.nihca.org. A member, group, or BCBSND can nominate a club or identify a geographic region at which time NIHCA contacts the club to discuss NIHCA network membership.

Find A Club

FISCAL NOTE

Requested by Legislative Council

02/09/2009

REVISION

Amendment to: SB 2272

1A. **State fiscal effect:** *Identify the state fiscal effect and the fiscal effect on agency appropriations compared to funding levels and appropriations anticipated under current law.*

	2007-2009 Biennium		2009-2011 Biennium		2011-2013 Biennium	
	General Fund	Other Funds	General Fund	Other Funds	General Fund	Other Funds
Revenues						
Expenditures			$47,586	$30,263	$47,586	$30,263
Appropriations			$47,586	$30,263	$47,586	$30,263

1B. **County, city, and school district fiscal effect:** *Identify the fiscal effect on the appropriate political subdivision.*

2007-2009 Biennium			2009-2011 Biennium			2011-2013 Biennium		
Counties	Cities	School Districts	Counties	Cities	School Districts	Counties	Cities	School Districts
			$12,170	$6,693	$8,111	$12,170	$6,693	$8,111

2A. **Bill and fiscal impact summary:** *Provide a brief summary of the measure, including description of the provisions having fiscal impact (limited to 300 characters).*

The fiscal impact of this bill is the proposed enhancement of the prosthetics benefit in the PERS health plan.

B. **Fiscal impact sections:** *Identify and provide a brief description of the sections of the measure which have fiscal impact. Include any assumptions and comments relevant to the analysis.*

Section 1 of the bill is the proposed enhancement. The above fiscal impact is the additional premium and expense needed to support this improvement as determined by BCBS.

3. **State fiscal effect detail:** *For information shown under state fiscal effect in 1A, please:*

A. **Revenues:** *Explain the revenue amounts. Provide detail, when appropriate, for each revenue type and fund affected and any amounts included in the executive budget.*

B. **Expenditures:** *Explain the expenditure amounts. Provide detail, when appropriate, for each agency, line item, and fund affected and the number of FTE positions affected.*

As amended BCBS has determined that the estimated additional cost to add this benefit is $0.28 per contract per month.

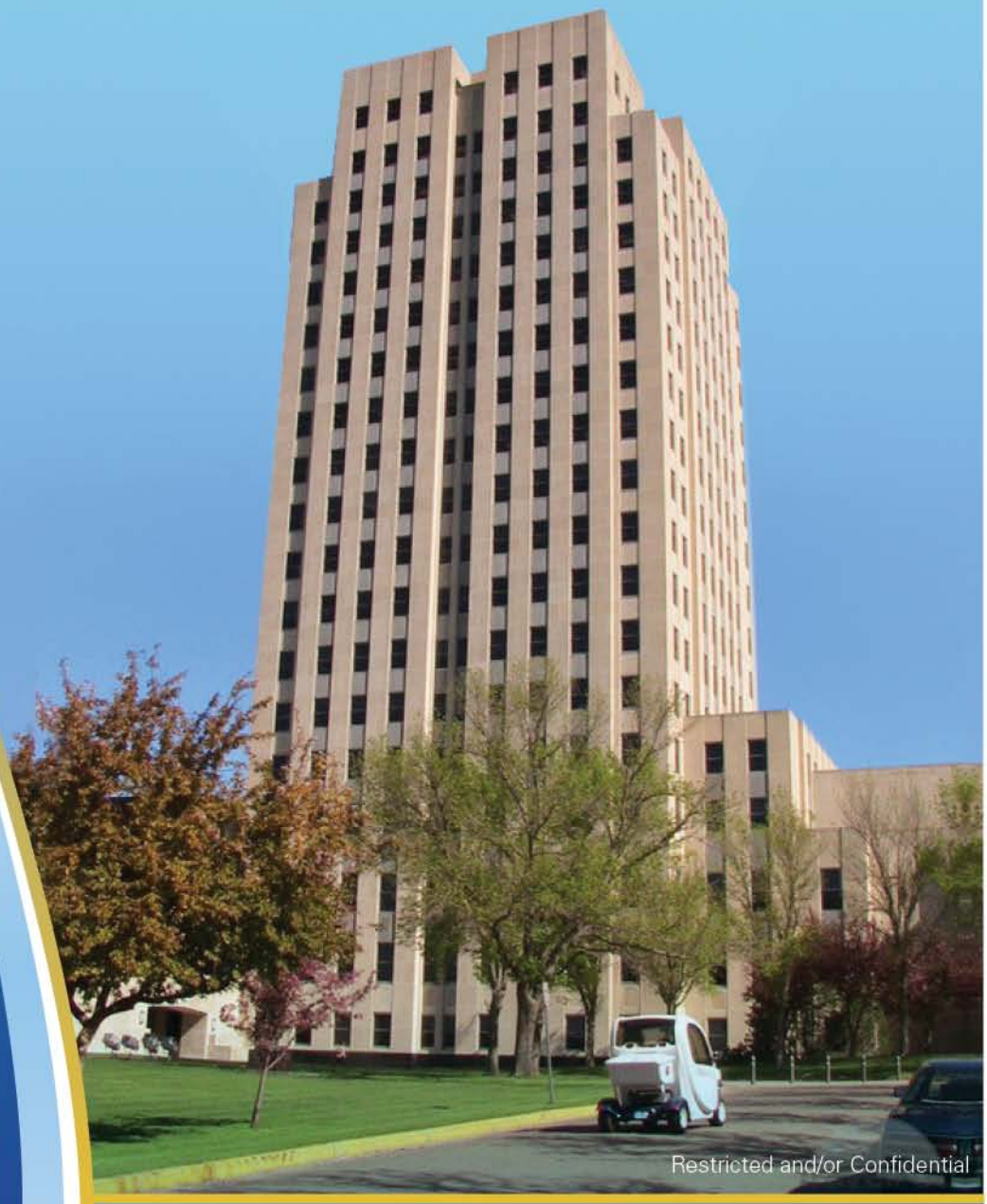
C. **Appropriations:** *Explain the appropriation amounts. Provide detail, when appropriate, for each agency and fund affected. Explain the relationship between the amounts shown for expenditures and appropriations. Indicate whether the appropriation is also included in the executive budget or relates to a continuing appropriation.*

The appropriations are to support the expenditures as noted in "B" above.

Name:	Sparb Collins	**Agency:**	PERS
Phone Number:	701-328-3901	**Date Prepared:**	02/08/2009

NDPERS
Executive Summary

Q1 | Presented May 2014



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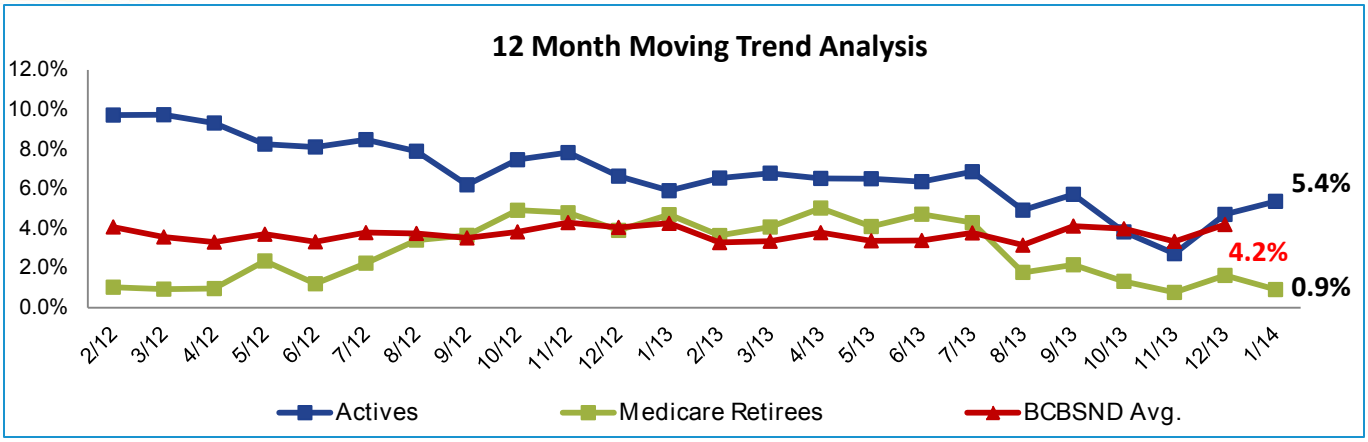
NORTH DAKOTA PUBLIC EMPLOYEES RETIREMENT SYSTEM

ND

Blue Cross Blue Shield of North Dakota is an independent licensee of the Blue Cross & Blue Shield Association

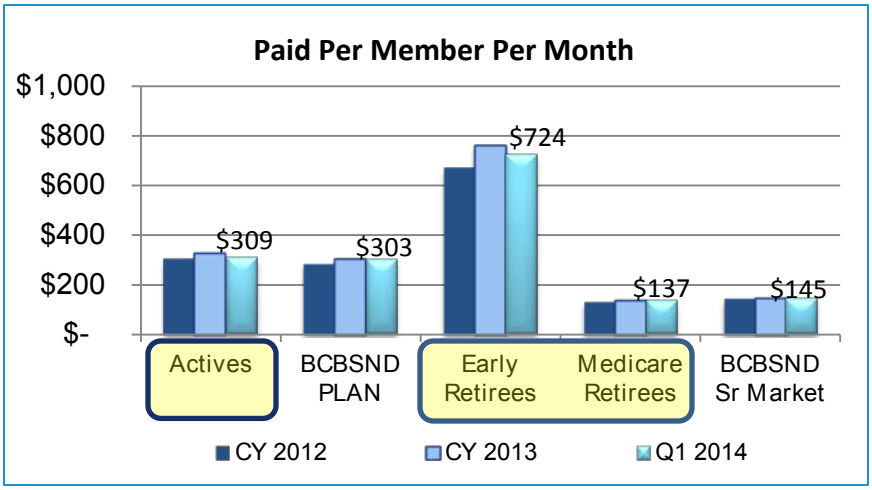
Noridian Mutual Insurance Company

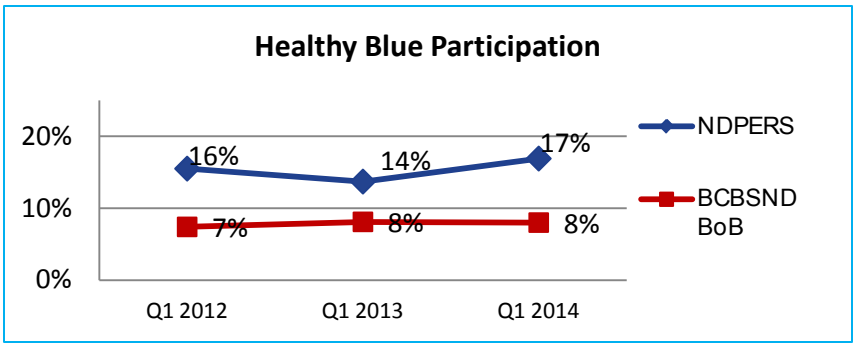
Dashboard

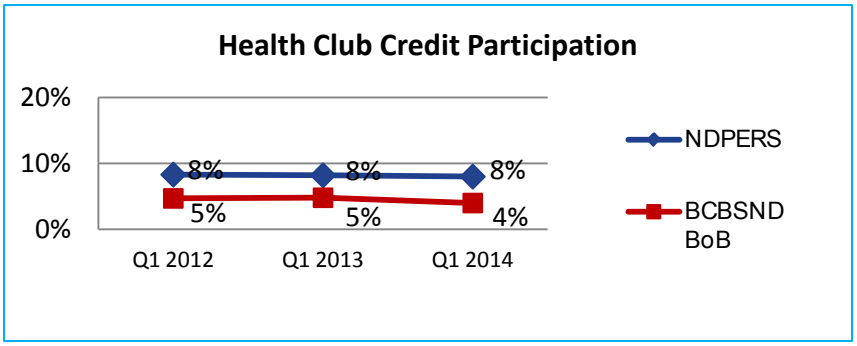


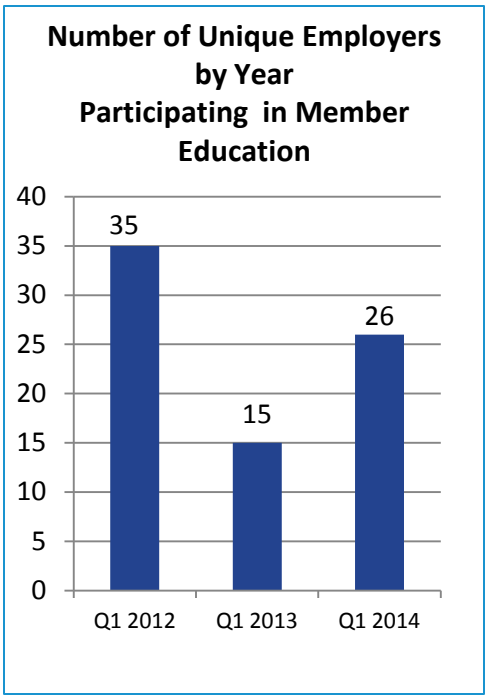
Membership Comparison

	CY 2013	Q1 2014
Actives	54,813	55,678
Early Retirees	1,242	1,202
Medicare Retirees	7,854	8,136









Actives include Political Subs and State Employees

NDPERS Biennium Comparison

Paid through March 31, 2014

Incurred	Premium	Admin Fee	Interest on Surplus	Estimated Incurred Claims	Gain (Loss)	Gain (Loss) as % of Premium	Biennium Gain (loss)	% of Premium
July 09 - Jan 10	122,061	6,450	73	100,430	15,253	12.5%	38,094	9.0%
July 11 - Jan 12	133,866	7,102	19	120,700	6,084	4.5%	10,516	2.2%
July 13 - Jan 14	157,864	12,002	27	142,465	3,424	2.2%	N/A	N/A

Note: Reported in thousands

The July 11 - June 13 biennium is reporting a gain of $10.5 million with nine months of claims run out. Biennium gain(losses) are prior to risk sharing. It is important to note that the bienniums beginning with July 13 includes estimated claim reserves. Actual claims run out may vary from original reserve estimates.

It is expected that premiums will exceed claims in the first few months of the biennium. This is due to stable premium levels throughout the entire biennium and increasing claims during the biennium. At the mid-point of the biennium claims would be expected to be equal to premiums less admin fees and during the last months of the biennium, claims would be expected to exceed premiums

NDPERS Quarterly Trend Analysis

Paid through March 31, 2014

Twelve Month Moving Average				
Incurred Month	Est. Incurred Claim/Contract		Annual Trend	
	Actives	Med Retirees	Actives	Med Retirees
3/12	$759.75	$171.89	9.7%	0.9%
4/12	763.45	172.25	9.3%	1.0%
5/12	767.26	174.18	8.3%	2.4%
6/12	770.34	173.51	8.1%	1.2%
7/12	774.57	175.08	8.5%	2.2%
8/12	783.52	177.39	7.9%	3.4%
9/12	782.27	177.81	6.2%	3.7%
10/12	795.13	179.85	7.5%	4.9%
11/12	802.63	179.72	7.8%	4.8%
12/12	800.64	178.99	6.6%	3.9%
1/13	801.43	179.81	5.9%	4.7%
2/13	807.86	178.57	6.5%	3.6%
3/13	811.34	178.89	6.8%	4.1%
4/13	813.28	180.92	6.5%	5.0%
5/13	817.21	181.31	6.5%	4.1%
6/13	819.36	181.70	6.4%	4.7%
7/13	827.74	182.60	6.9%	4.3%
8/13	822.10	180.56	4.9%	1.8%
9/13	827.04	181.67	5.7%	2.2%
10/13	825.55	182.24	3.8%	1.3%
11/13	824.53	181.11	2.7%	0.8%
12/13	838.34	181.91	4.7%	1.6%
1/14	844.46	181.46	5.4%	0.9%

The 4.7% twelve month rolling trend for NDPERS Actives through December 2013 is greater than the Blue Cross Blue Shield overall trend of 4.2%.

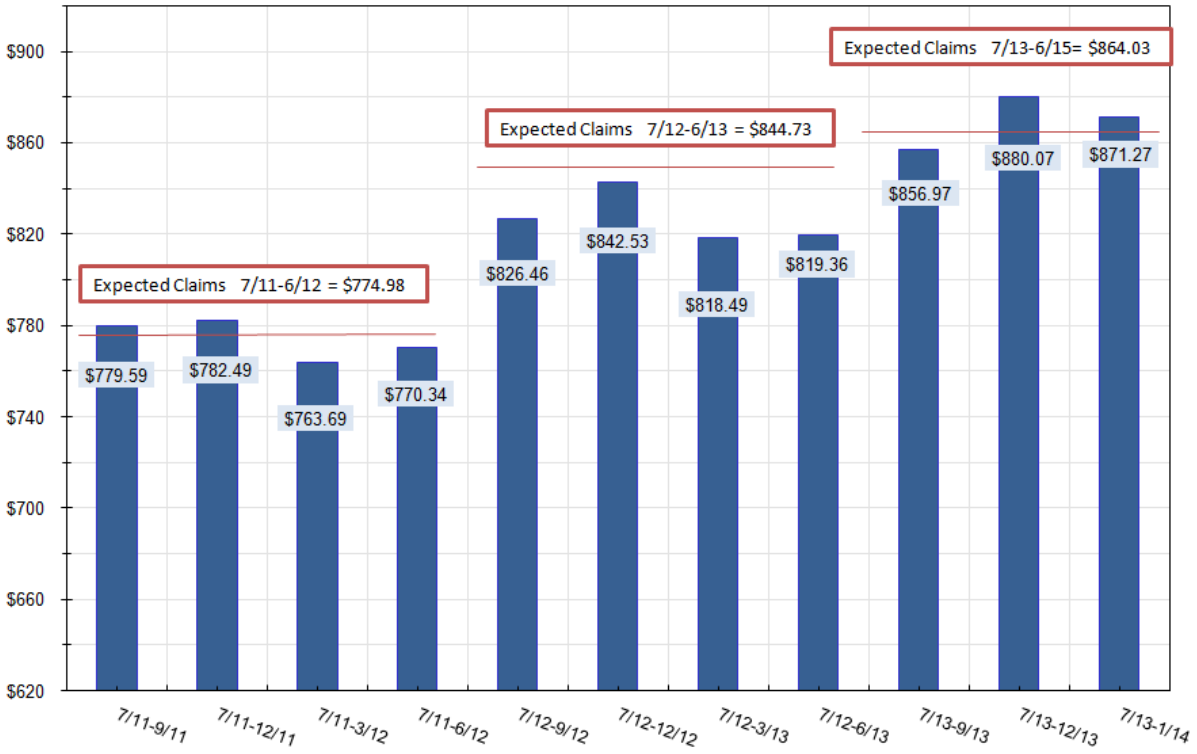
A 6.68% trend was used in rating the first year of the biennium beginning July 2013.

NDPERS Quarterly Trend Analysis

Paid through March 31, 2014

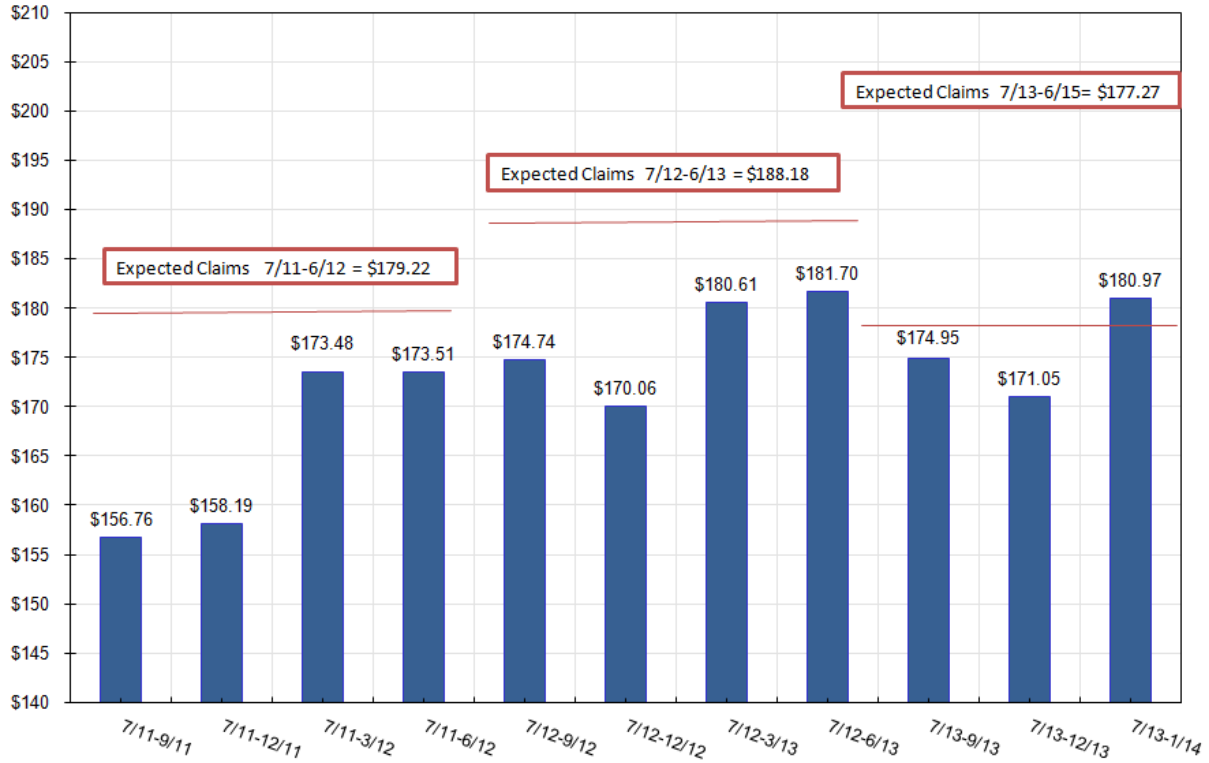
NDPERS - Actives

AVERAGE MONTHLY INCURRED CLAIMS PER CONTRACT



NDPERS - Medicare Retirees

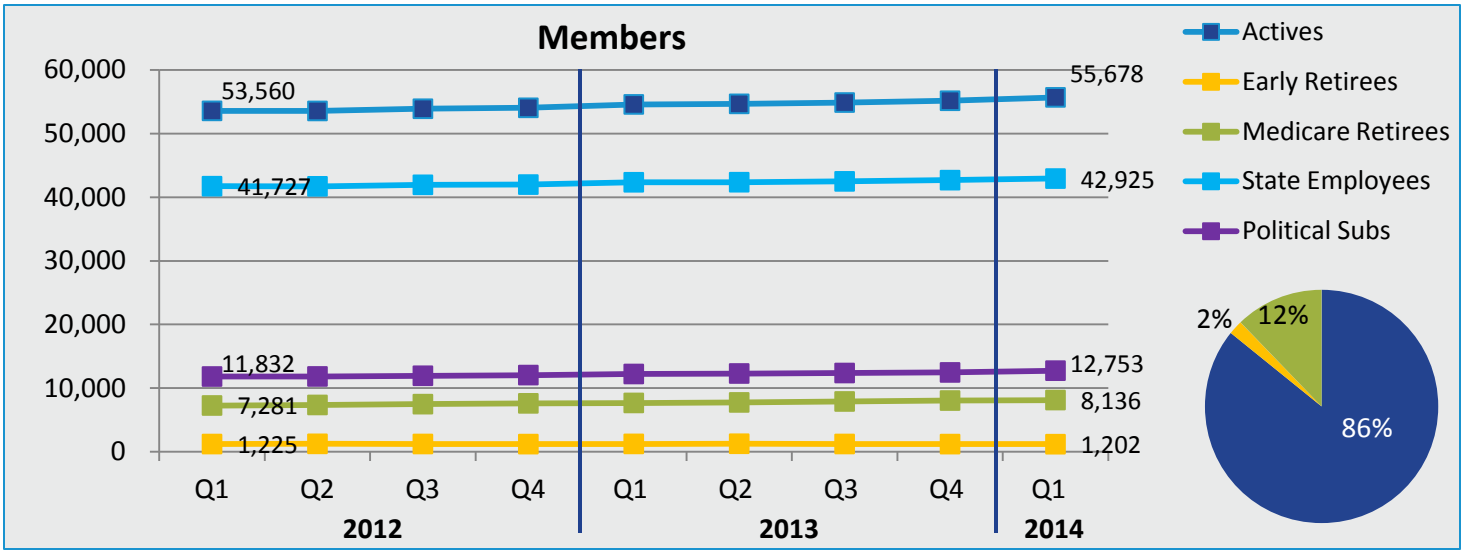
AVERAGE MONTHLY INCURRED CLAIMS PER CONTRACT



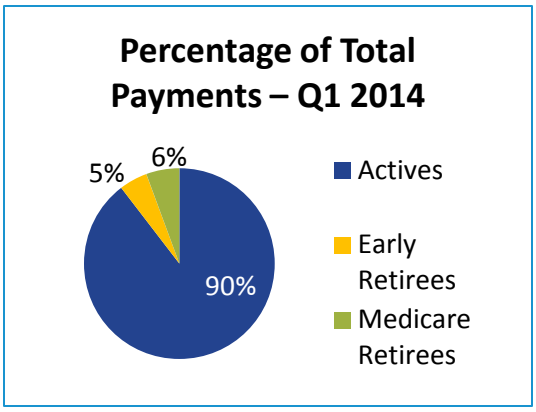
Membership & Health Utilization Summary

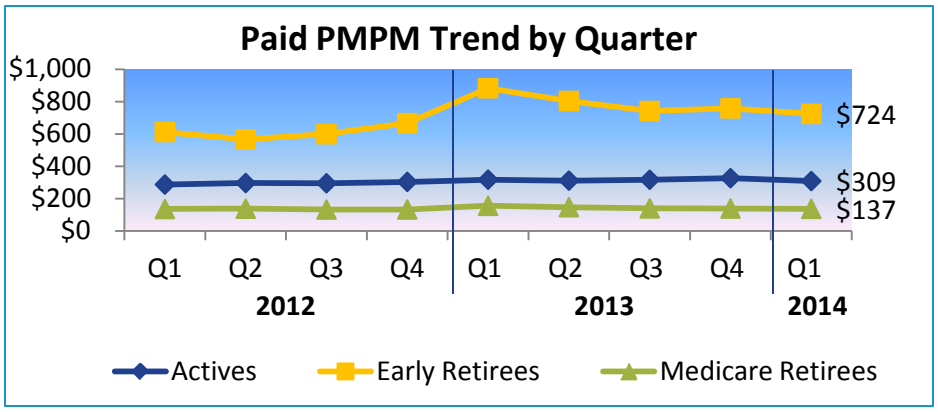
Paid each Calendar Year (Q1 through 3/31/2014)

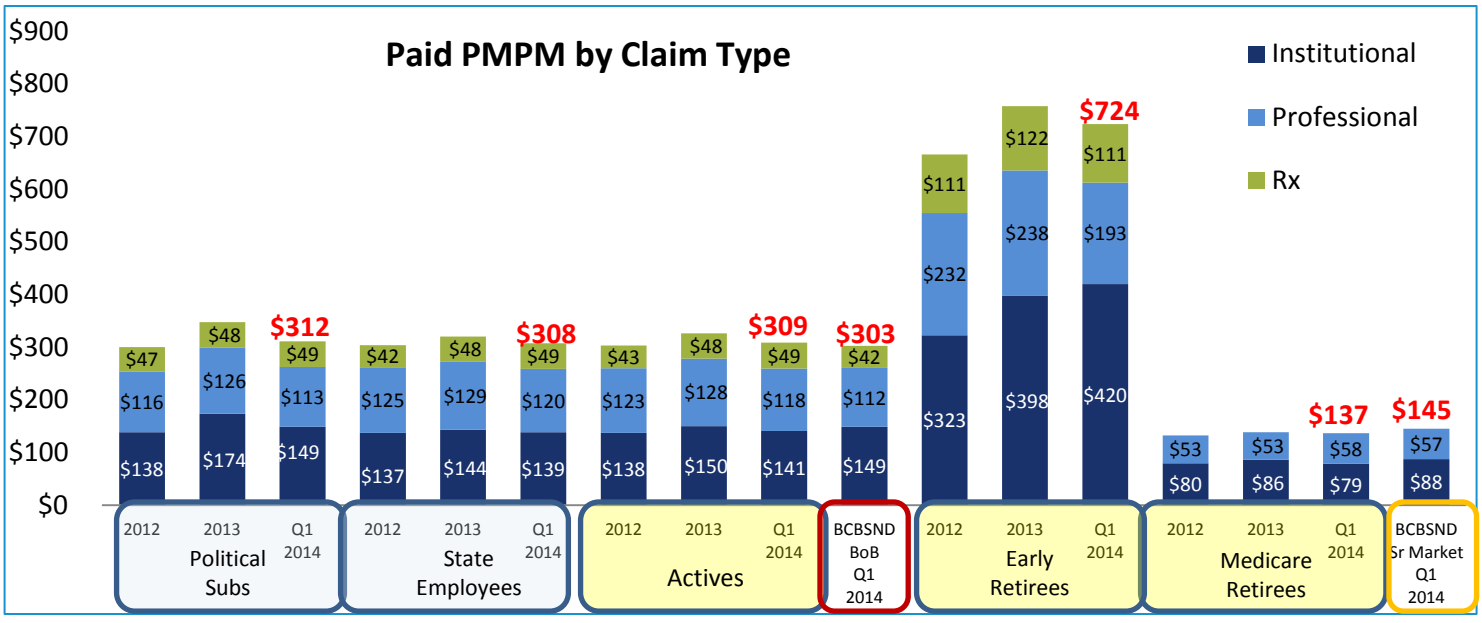
Membership



Claims Paid Per Member Per Month (PMPM)





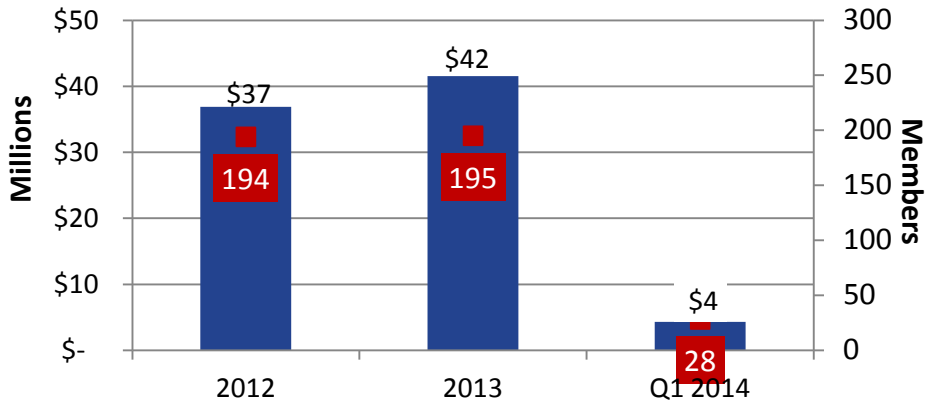


Actives include Political Subs and State Employees

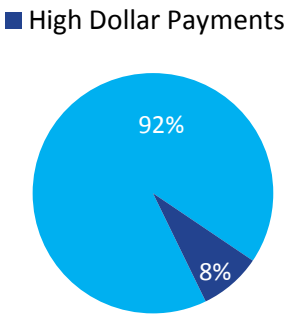
Quarters are cumulative to calendar year end

High Dollar Cases

Actives
High Dollar Cases over $100,000/member



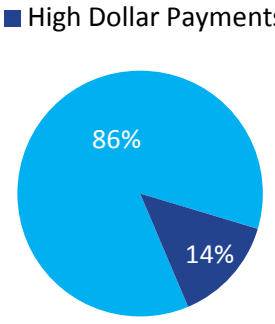
Q1 2014 as a % of Total Payments



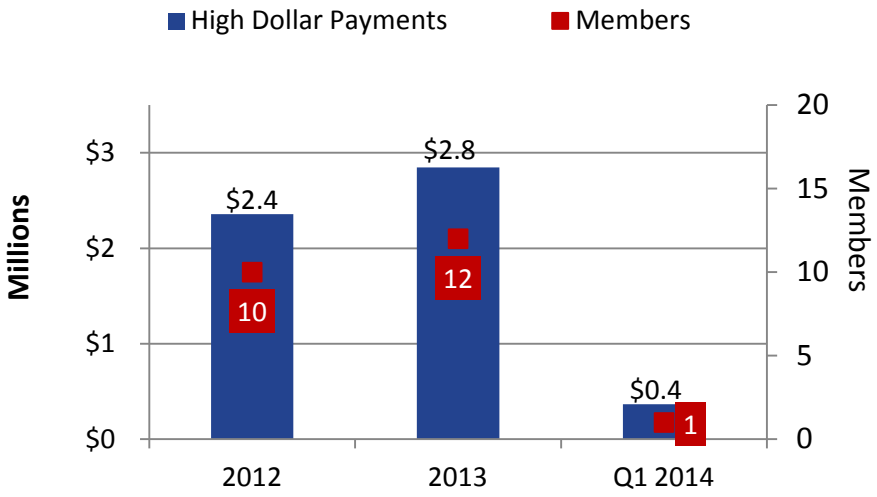
BCBSND Avg. 20%

Avg. Paid/Case	**$190,129**	**$213,099**	**$153,299**
% of Total Payments	**19%**	**19%**	**8%**
BCBSND % of Tot. Payments	17%	18%	20%

Q1 2014 as a % of Total Payments

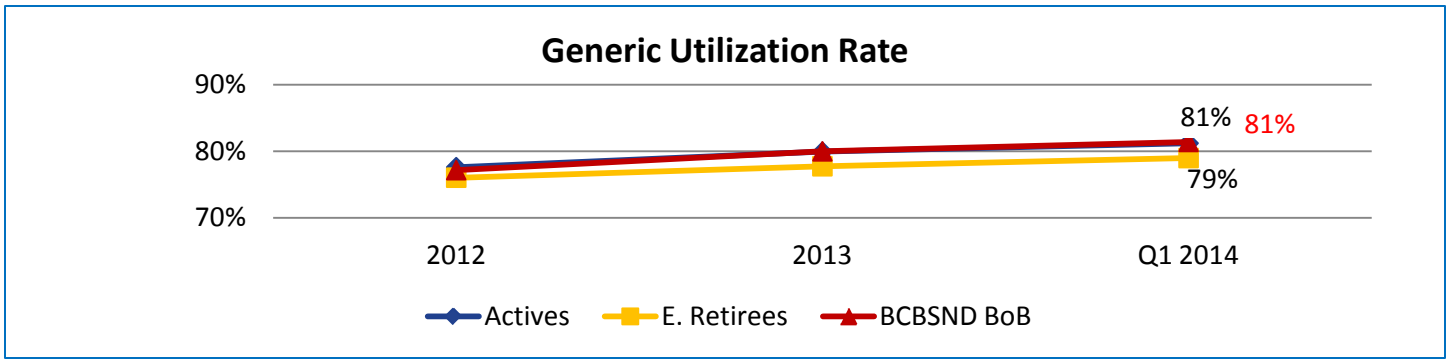


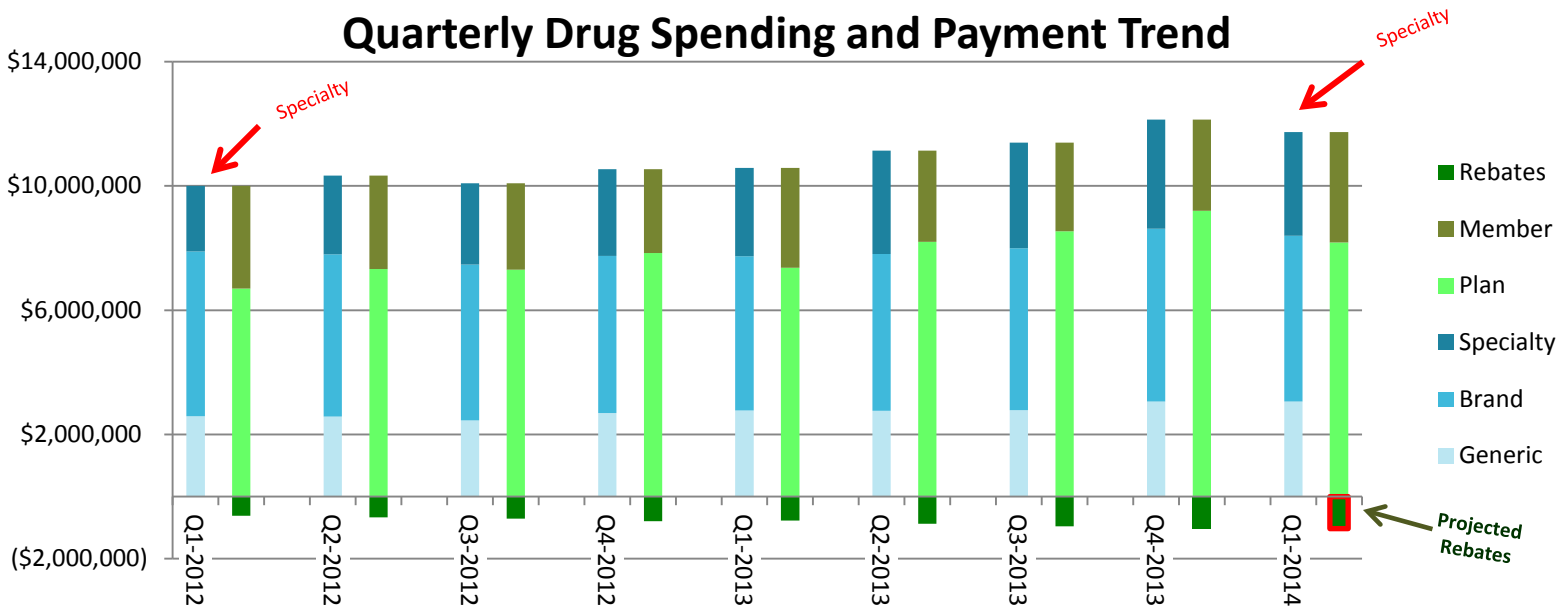
Early Retirees
High Dollar Cases over $100,000/member



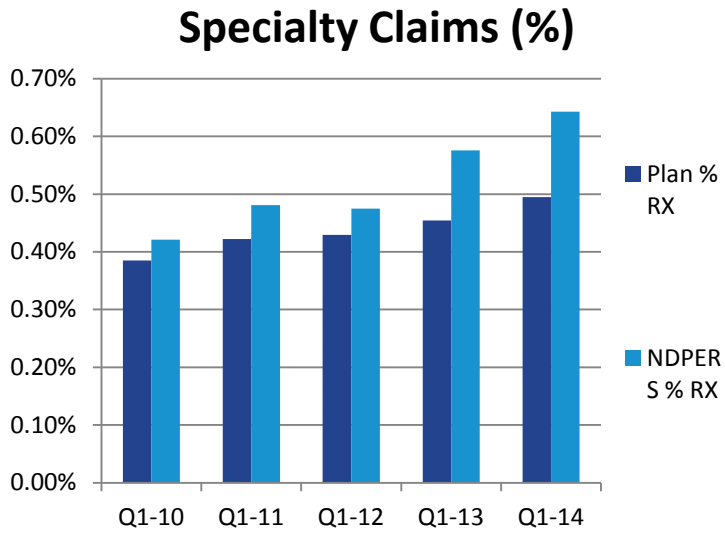
Avg. Paid/Case	**$235,754**	**$237,265**	**$364,986**
% of Total Payments	**24%**	**25%**	**14%**

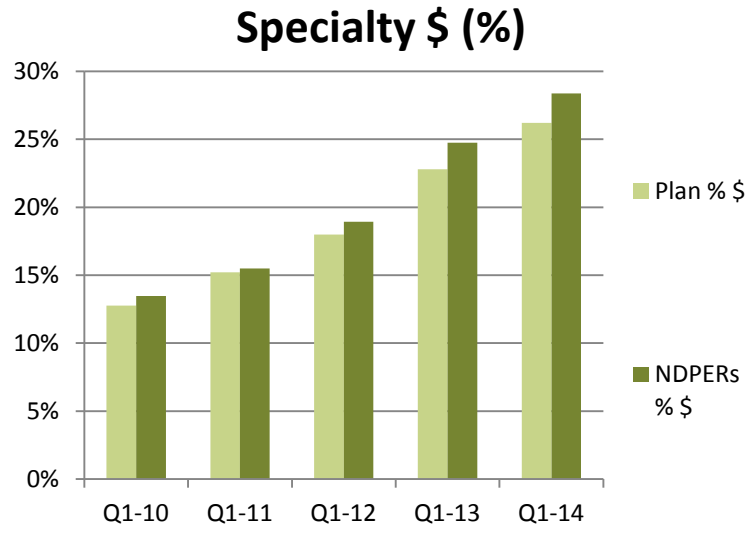
Prescription Drugs



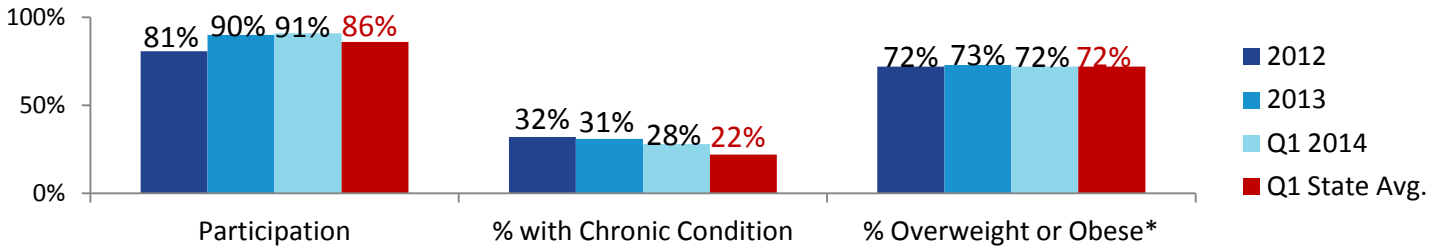


- Specialty spend continues to increase
- Plan (NDPERS) costs are increasing – benefit design may not be keeping up with inflation
- Rebates have also increased

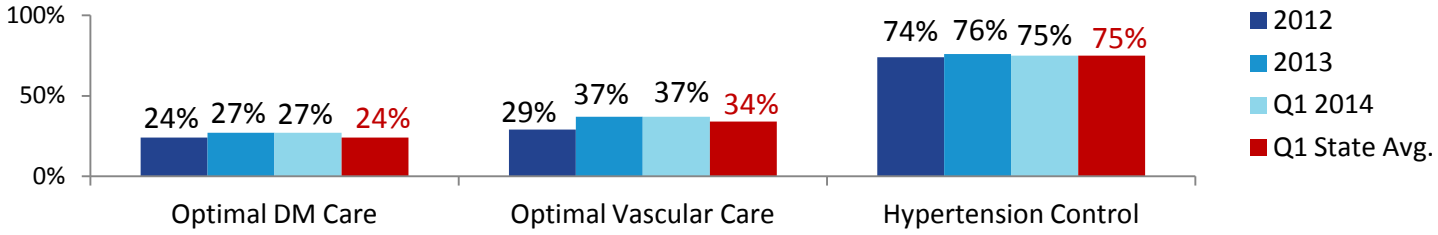




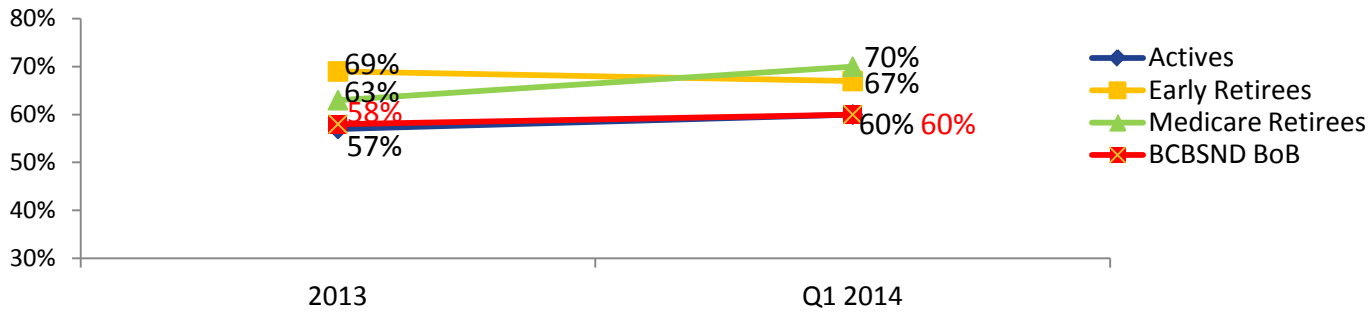
MediQHome Key Measures



MediQHome Outcome Measures



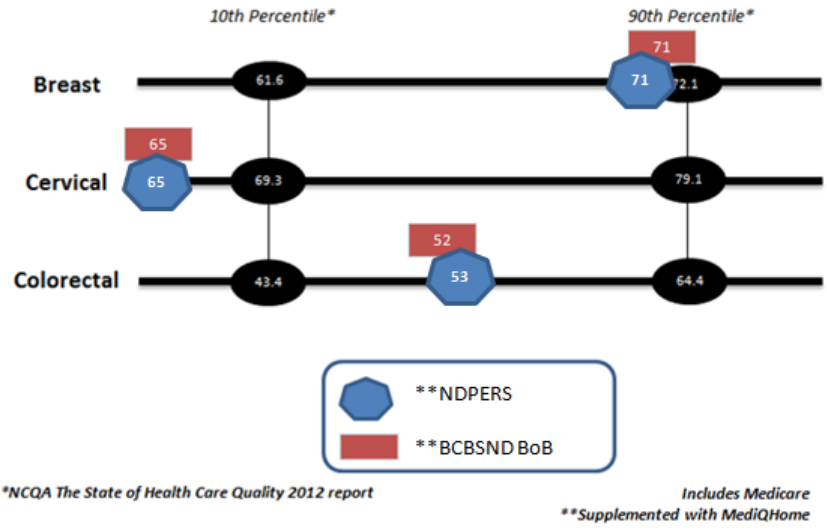
AccordantCare Participation – Rare and Complex Disease Management



- **533 eligible, 327 participating (overall participation 61%)**
- 2013 to Q1 2014 shows an overall increase in participation
  - Due to small population of the retirees, addition or decline of a few members could change participation percentage significantly

Preventive Cancer Screenings

Cancer screening compliance is at the BCBSND book of business but below the 2012 NCQA 90th percentile.

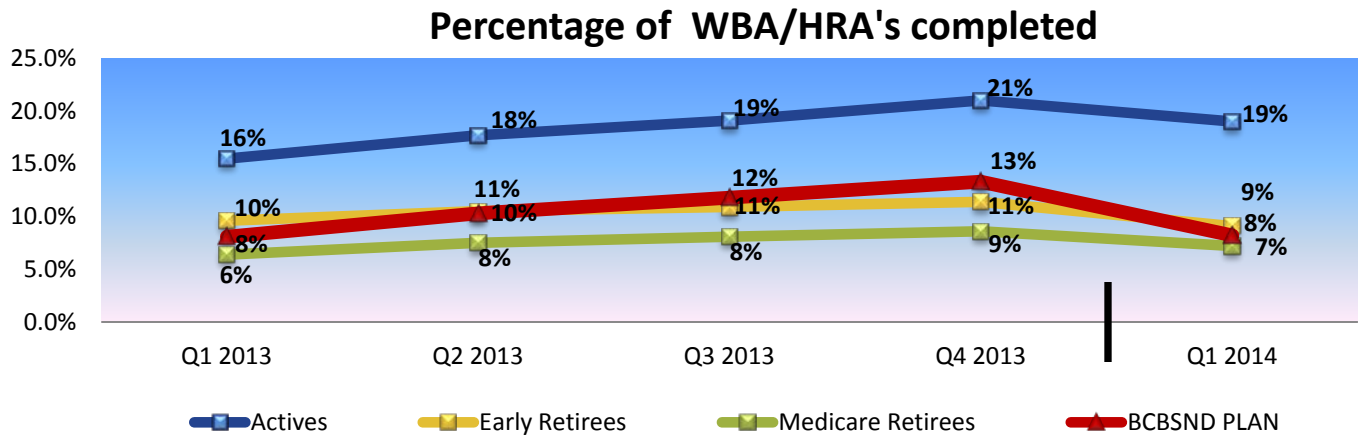


Wellness Programs

Through Q1 2014 (Jan-Mar), there was a total of 44,305 members eligible for the wellness programs, HealthyBlue and Health Club Credit. NDPERS member participation in both wellness programs is higher than the BCBSND Plan average.

HealthyBlue

- 17% (slightly down from 19% Q4) of <u>total</u> eligible members have completed a Health Risk Assessment (7,329 members).
  - BCBSND Plan HRA completion rate was 8% (also down from 13% in Q4)
- Point redemption through Q1 2014 - $48,086 in redeemed prizes

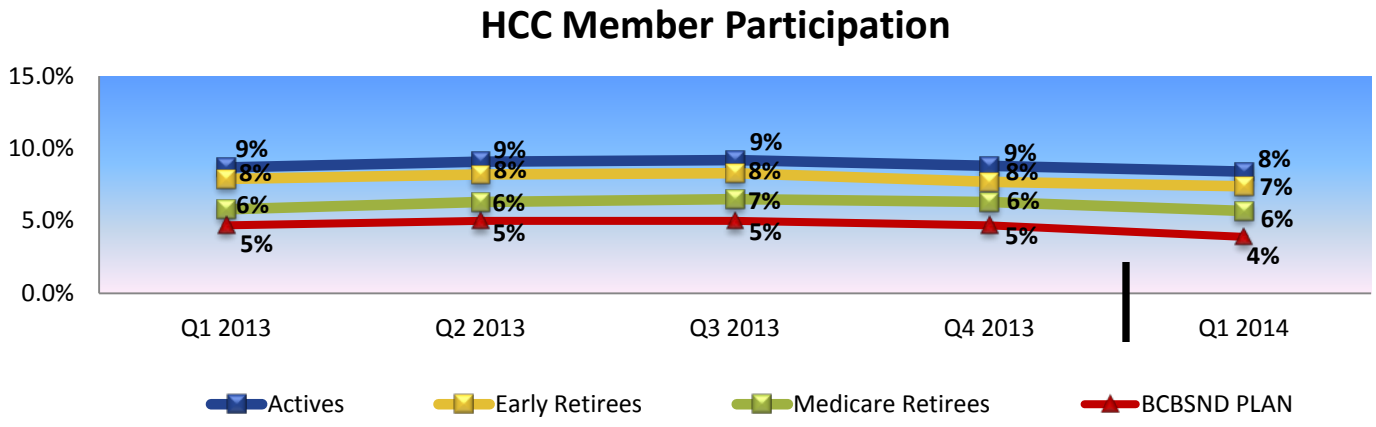


Q1 2014 begins over due to annual HRA completion requirement.

Quarters are cumulative to calendar year end

Health Club Credit

- 8% (same as Q4) participate in the Health Club Credit Program (3,478 members)
  - BCBSND Plan average is 4% (down from 5% Q4)
- Members receiving credit 61% (up from 55% Q4) - those participating in HCC exercise 12 or more days per month (2,137 members)
  - BCBSND Plan average is 63% (also up from 53% Q4)
- Health club credits paid through Q1 2014 - $114,661



Quarters are cumulative to calendar year end

Member Engagement

Member Education Representatives introduce programs that provide employees with valuable information and engages them in their health care. Along with making more informed health care decisions, these programs include valuable life skills.

Presentations are available for the following programs:

- Take Care of Yourself
- Walking Works
- Strength Training
- Beat The Bug
- Summer Safety
- Stress Management
- Medication Education
- Tobacco Cessation
- Wellness Programs (HealthyBlue/Health Club Credit)
- Nutrition Basics for a Healthier You
- **NEW!** "CPR and First Aid Basics"

2014 through Q1, 26 employer groups have held these educational programs and 10 employer groups have had a benefit overview meeting.

	Number of Employers	Member Education Programs & Benefit Overview	Member Attendance
Q1 2014	15	HealthyBlue /HCC	308
	15	Other	499
	15	Benefit Overview	

NDPERS Wellness Specialist

•Two week Walking Challenge in January/February – 1155 registered participants walked approximately 146 million steps.

• Cervical Cancer Screening & HealthyBlue HRA Reminder mailings

•Completed "Spring into Action" physical activity challenge May 1 – results will be released in the next quarterly review.

•NDPERS Wellness Coordinator monthly calls & newsletters

- **Call -** April featured a special guest from the NDSU Extension Service for a new nutrition program they are launching that is targeted at baby boomers.
- **Newsletter** - featuring the health topic of the month and additional resources for wellness activities.

•Conducted a Wellness Coordinator survey in February. 63% of coordinators have been in their role for three or more years. Nearly all of coordinators are satisfied with the resources provided to them through the monthly newsletters and conference calls.

•HealthyBlueHighlights, sent bimonthly through HealthyBlue, highlights monthly health topics and encourages members to participate in HealthyBlue workshops.

•Pebble promotion in HealthyBlue – electronic tracking device that automatically uploads into HealthyBlue

• Debut of Duncan's Digest – online health topic presentation in HealthyBlue

•Launched online video tutorial on HealthyBlue

•Gearing Up for Worksite Wellness trainings were offered in Fargo and Bismarck. Approximately 10 NDPERS Wellness Coordinators attended.

Performance Standards and Guarantees

Measure	Goal	3/31/2014
Cost Management (measurement period : by 12-31-14)		
HRA Completions	17%	**17%**
HRA Score	5% point increase in the 2013 NDPERS group aggregate HRA wellness score **Goal = 55**	**72**
HealthyBlue – incentives paid	10% increase over 2013 incentives paid **Goal = $581,798**	**$48,086**
Health Club Credit – members receiving credit	10% increase over 2013 members receiving credit **Goal = 2,177**	**2,137**
Health Outcomes:		
Members enrolled in a Medical Home	80%	**91%**
Breast Cancer Screening Rates*	80%	**76%**
Cervical Cancer Screening Rates*	85%	**68%**
Colorectal Cancer Screening Rates*	60%	**62%**
Operational Performance:		
Claims Financial Accuracy	99%	**99.8%**
Payment Incident Accuracy	97%	**99.6%**
Claim Timeliness	99%	**99%**
Average Speed of Answer (in seconds)	30 seconds or less	**21**
Call Abandonment Rate	5% or less	**1%**
Provider Network Management:		
NDPERS PPO network	92% (or more) participation	**99.6%**
Provider Discount (non-Medicare contracts)	30% or more	**53%**

Green – meeting goal
Red – below goal
Purple – data not complete

**Cancer screening rates were a culmination of MediQHome and Optum claims data*

Opportunities and Activities

Completed

- Gearing Up for Worksite Wellness trainings in Fargo and Bismarck.
- Two week Walking Challenge in January/February
- "Spring into Action" physical activity challenge
- Wellness Coordinator survey
- Cervical Cancer Screening mailing
- HealthyBlue HRA Reminder mailing
- National Walk at Lunch Day at Capitol with First Lady Dalrymple & Kathleen Wrigley
- New MyPrime.com website is now available

Ongoing Activities

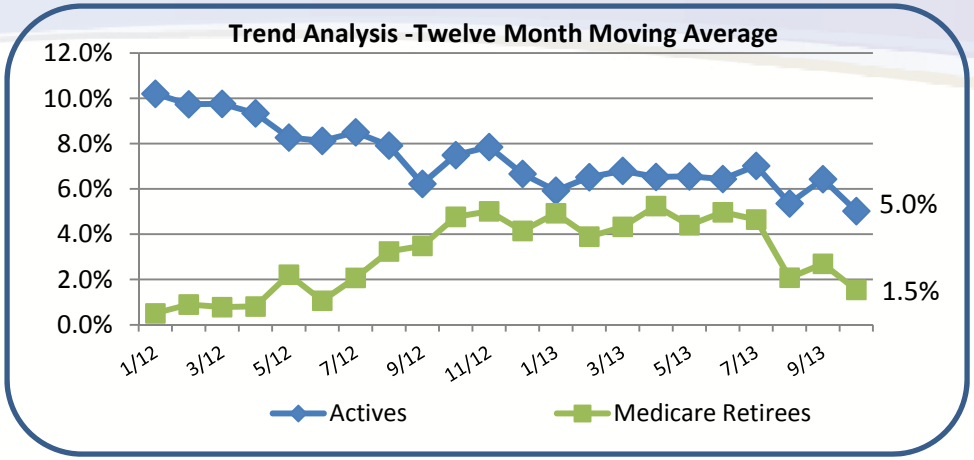
- **New BCBSND staff member to provide additional support for NDPERS program management**
- **Case Management – dedicated NDPERS Case Manager, works closely with Member Advocacy Program (MAP)**
    - **83 cases reviewed/followed in last 12 months**
        - **Projected savings (soft & hard) - $237,060**
- **There are currently 9 members in the Member Advocacy Program (MAP) – an increase from 3 last quarter. Two additional MAP advocates have been hired as the need for their services continue to increase.**
- **HealthyBlue upgrade to log community event participation**
- A fruit & veggie challenge is scheduled for summer.
- Monthly NDPERS Wellness Coordinator calls and newsletters
- Specialty Pharmacy
    - NDPERS enrollment in Prime Specialty Pharmacy Care Management
    - Targeted mailings continue to identify new specialty users
- Accordant Care – continue to identify newly eligibly members

North Dakota Public Employees Retirement System

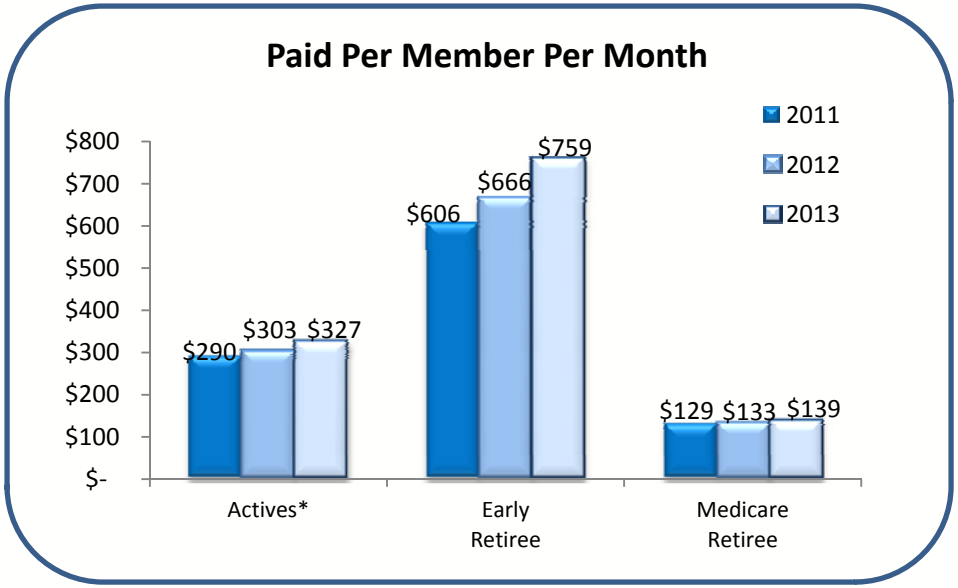
Presented by: Blue Cross Blue Shield of ND

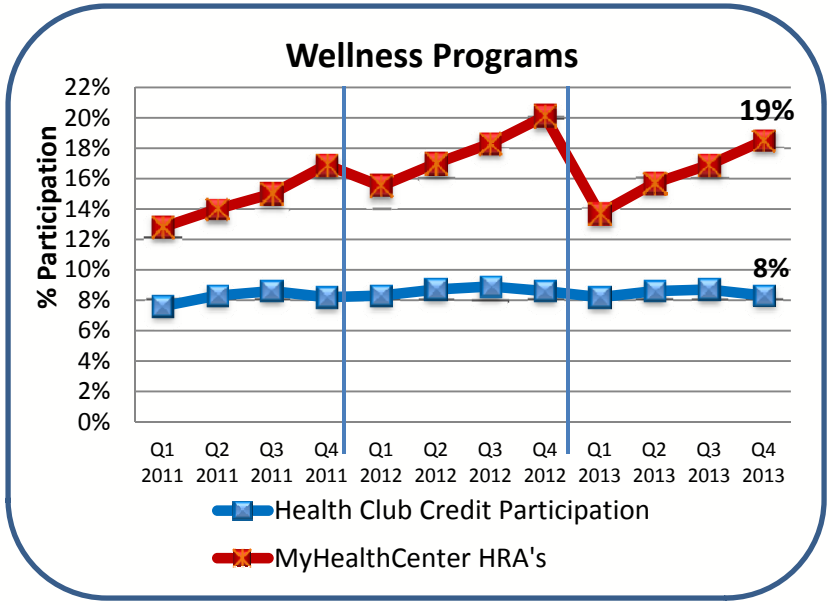
March 2014

Dashboard



Membership	2011	2012	2013
Actives	50,887	53,759	54,807
Early Retirees	1,220	1,233	1,241
Medicare Retirees	6,923	7,439	7,854





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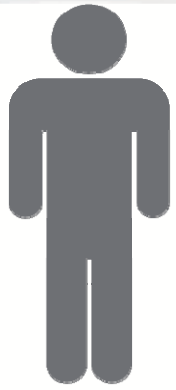
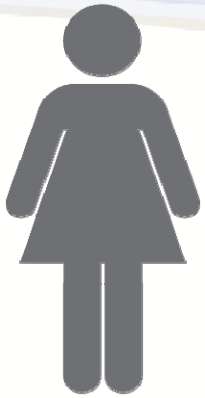
NDPERS Population



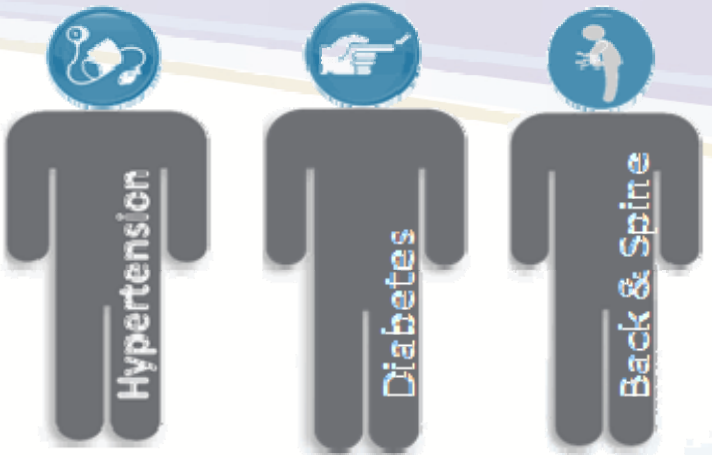
49% Male



51% Female

Average AGE 39

Average BMI 29.5



Wellness

18.5% Engaged in WELLNESS

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FINANCIAL

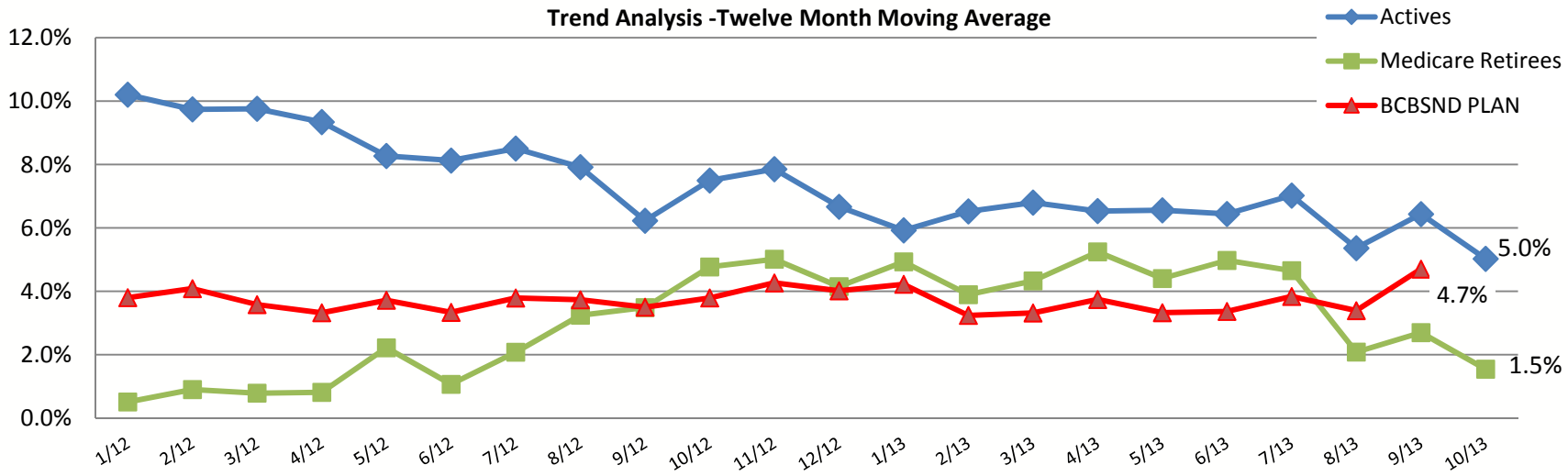
Annual Trend

PERS Biennium Comparison

Paid through December 31, 2013

	Premium	Admin Fee	Interest on Surplus	Estimated Incurred Claims	Gain(Loss)	Gain(Loss) as a % of Premium	Biennium Gain(loss)	% of Premium
July 09 - Oct 09	69,610	3,677	27	57,077	8,883	12.8%	38,094	9.0%
July 11 - Oct 11	75,914	4,023	6	67,956	3,941	5.2%	10,311	2.2%
July 13 - Oct 13	90,012	6,839	10	82,304	879	1.0%	N/A	N/A

Note: Reported in thousands



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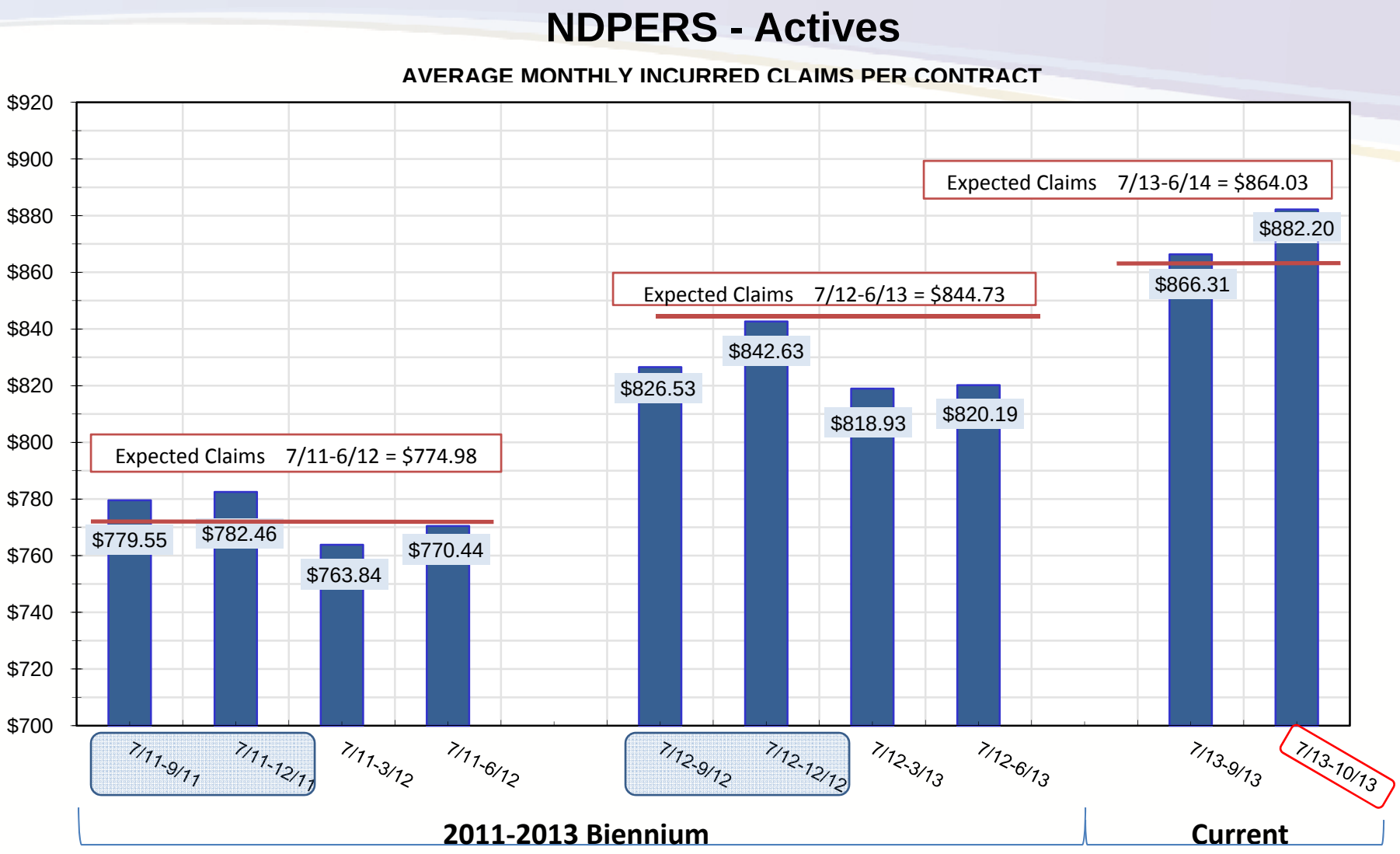
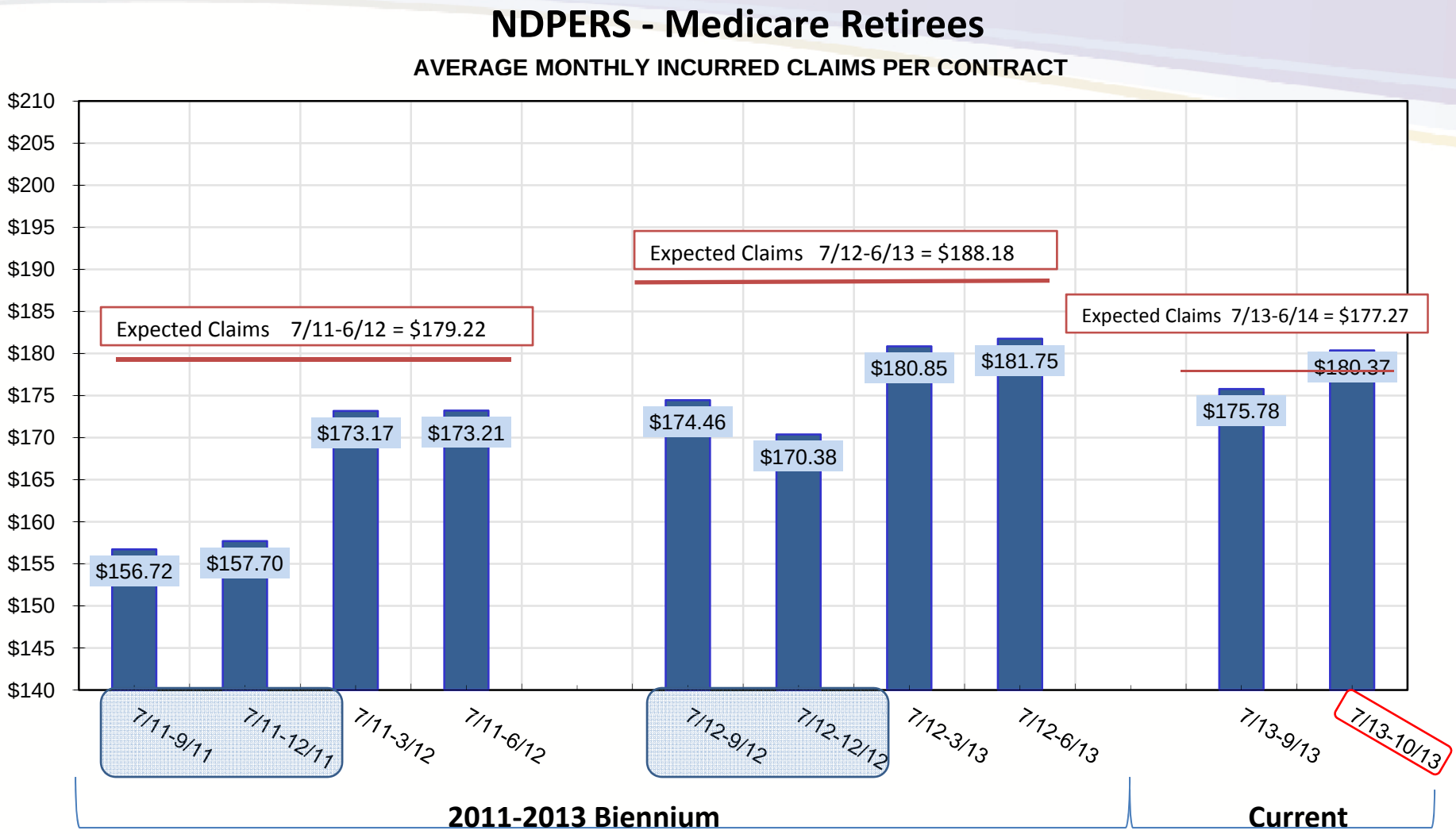
Year to Date
Incurred Claims Per Contract



Restricted and/or Confidential

Year to Date
Incurred Claims Per Contract



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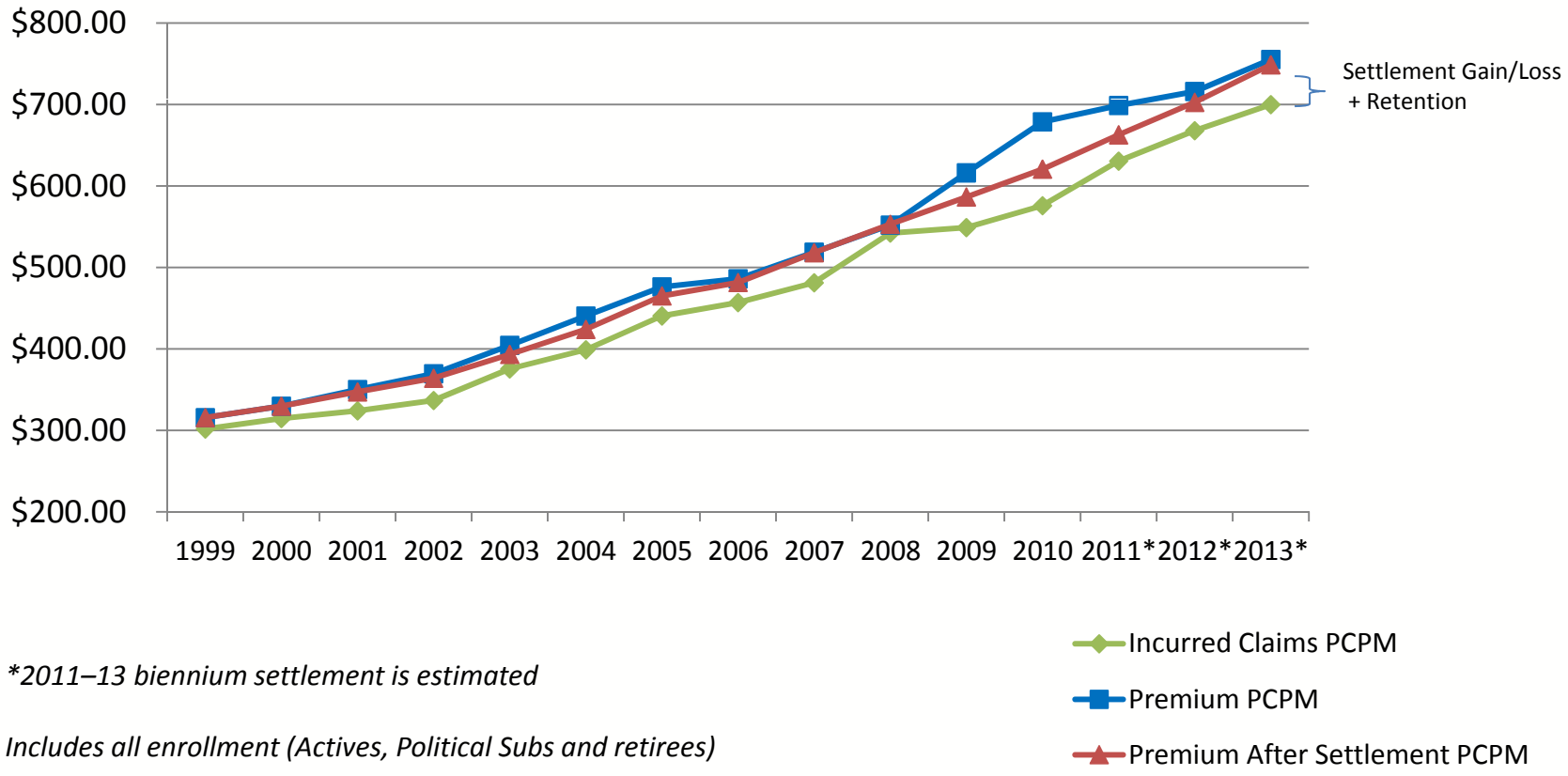
Claims Trend

- NDPERS average annual claims increase: 6.2%



**2011–13 biennium settlement is estimated*

Includes all enrollment (Actives, Political Subs and retirees)

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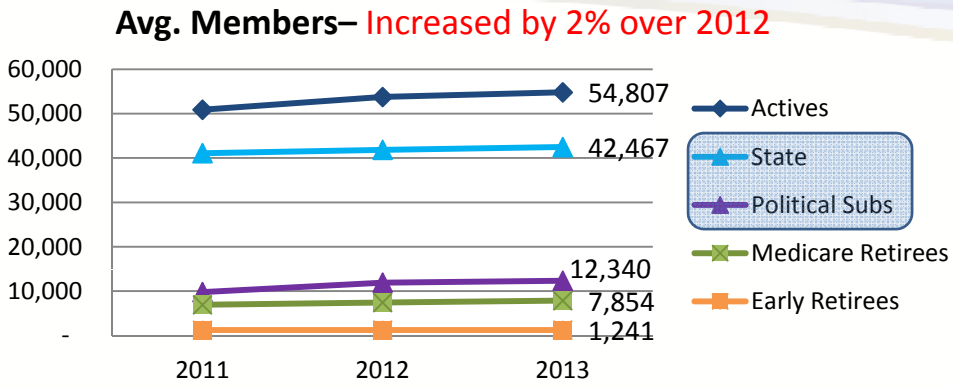
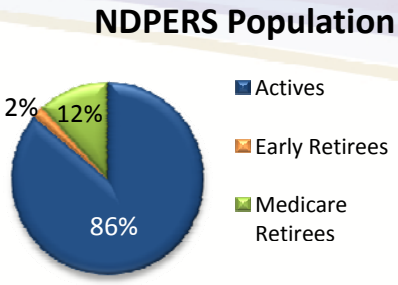
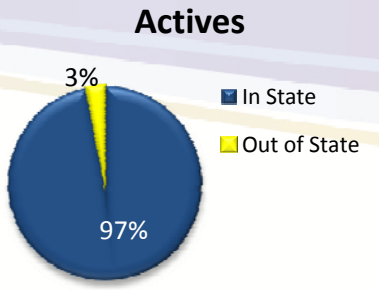
NDPERS SUMMARY

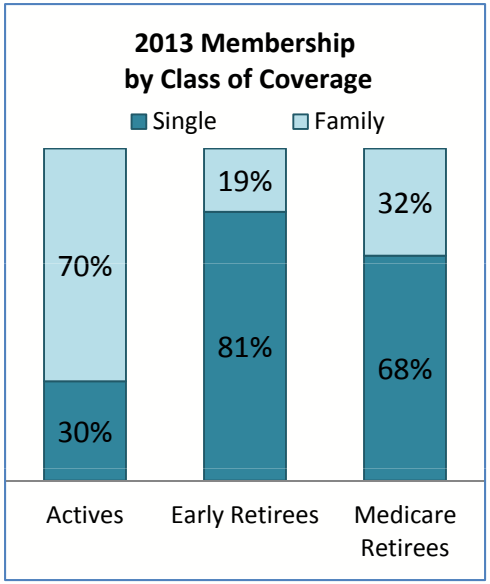
- Membership/Demographics
- Utilization
- High Dollar Cases
- Provider Discounts

Membership & Demographics

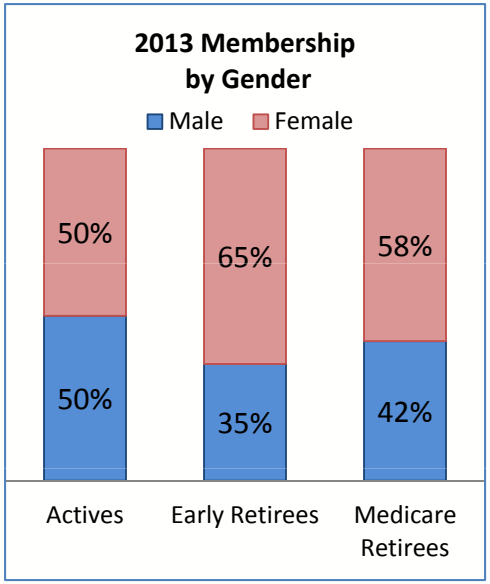








	Actives	E. Retirees	M. Retirees	BCBSND BoB
Average Age	34.4	59.7	74.2	32.7
Demographic Risk Score	1.12		3.26	1.05
Future Risk Score	1.21		4.11	1.05



Actives = includes State Employees & Political Subs

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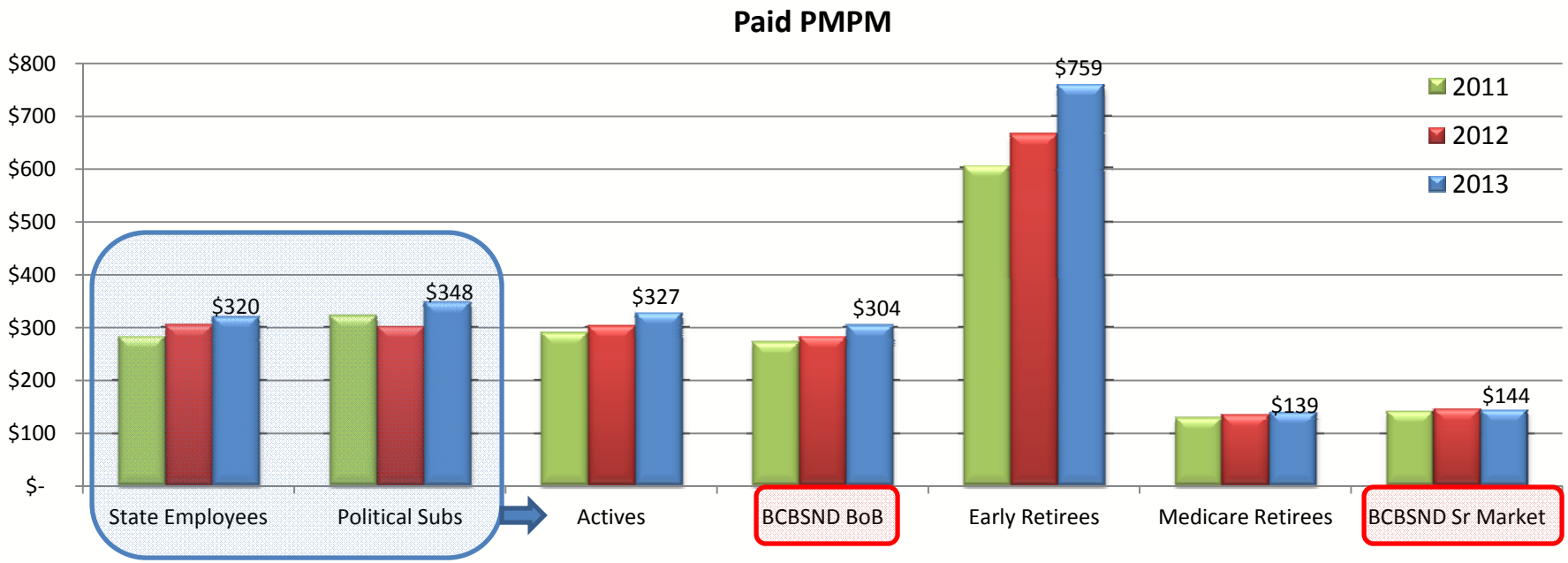
Total Payments

	2011	2012	2013	% Change 2012-2013
Actives	$177,027,226	$195,785,987	$214,835,134	10%
Early Retirees	8,870,187	$9,856,378	$11,300,089	15%
Medicare Retirees	10,747,502	$11,861,408	$13,079,475	10%
TOTAL PAID	**$196,644,915**	**$217,503,773**	**$239,214,698**	**10%**



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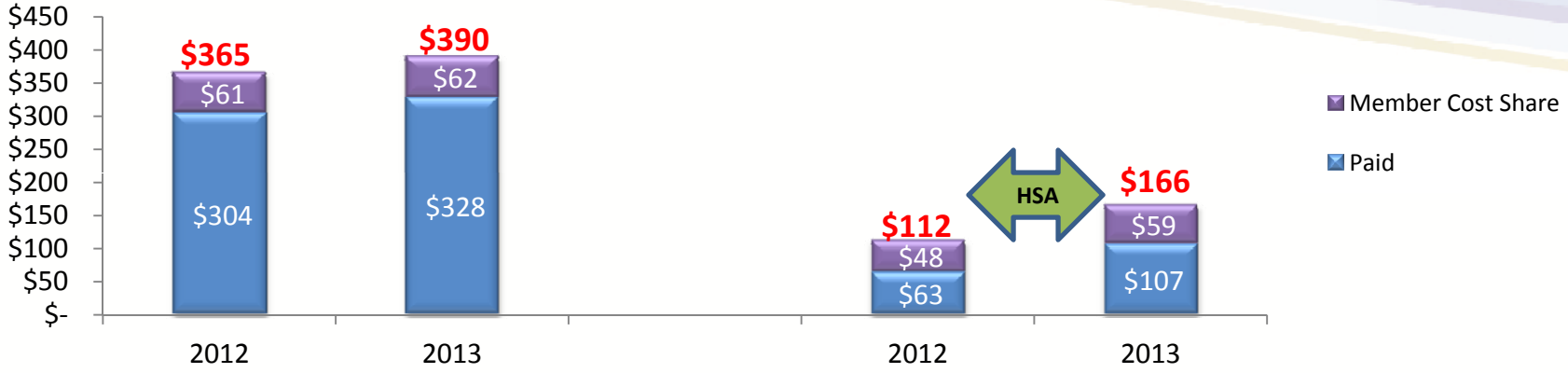
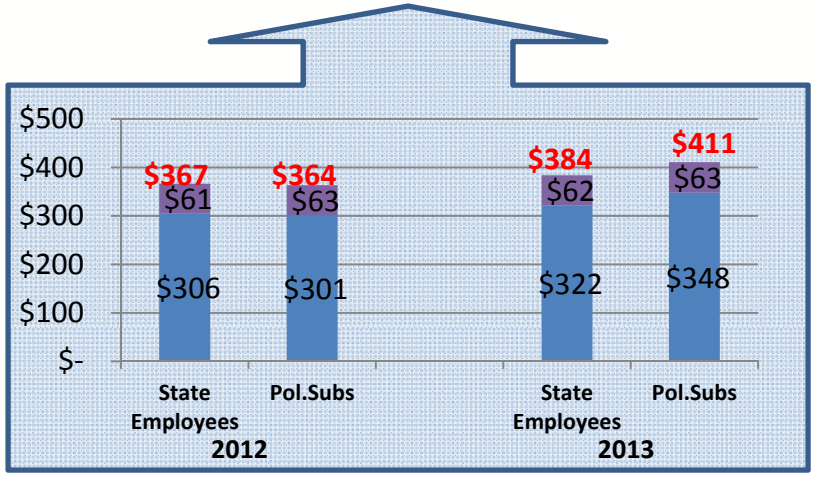
2012 Allowed Amount by Product

Members	53,545	54,539	218	274



PPO PLAN
State & Political Subs

HDHP Plan
State Employees only



- Both the PPO & HDHP Plans saw an increase to enrolled members
- HSA dollars contributed by NDPERS reduces the member's out of pocket but adds to the over-all costs for NDPERS

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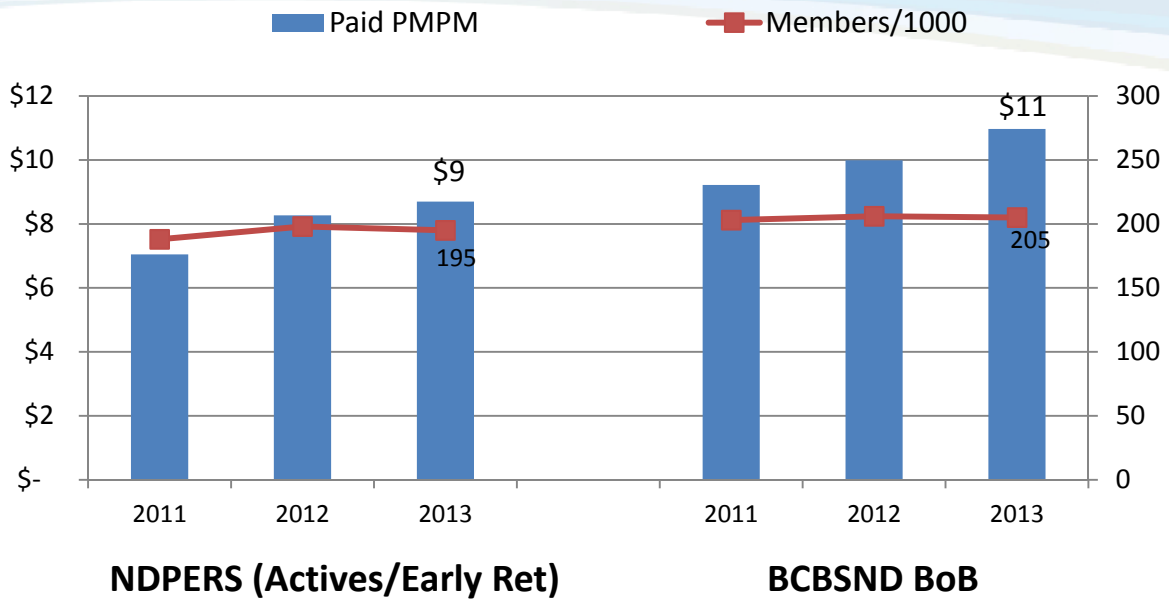
Outpatient ER Utilization

Consideration:

•Increase ER copay to $60

Current copay of $50 is lower than BCBSND standard copay - $75



• NDPERS PMPM is lower than BCBSND Plan average

• Small difference between ER copay ($50) and office visit copay ($25) may adversely affect utilization

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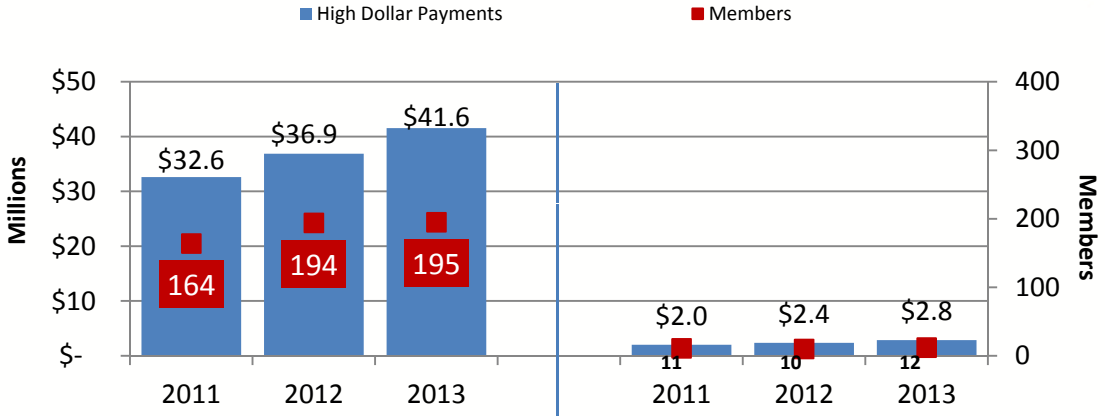
High Dollar Cases

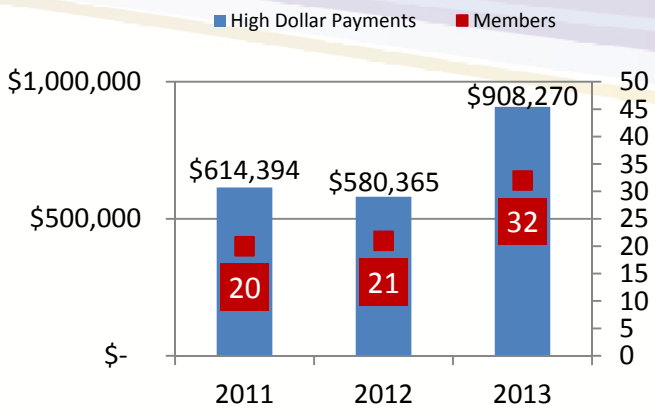
Actives & Early Retirees
High Dollar Cases over $100,000/member



	ACTIVES			EARLY RETIREES		
Avg. / Case	$198,813	$190,129	$213,099	$181,916	$235,754	$237,265

Paid Range	ACTIVES 2011	ACTIVES 2012	ACTIVES 2013	EARLY RETIREES 2011	EARLY RETIREES 2012	EARLY RETIREES 2013
$1,000,000+	1	2	1			
$300,000-999,999						
$300,000-999,999	18	16	30	1	2	3
$200,000-299,999	31	35	33	3	2	2
$100,000-$199,999	114	141	131	7	6	7
	164	194	195	11	10	12

Medicare Retirees
High Dollar Cases over $20,000/member



	MEDICARE RETIREES		
Avg. / Case	$30,720	$27,636	$28,383

Paid Range	MEDICARE RETIREES 2011	MEDICARE RETIREES 2012	MEDICARE RETIREES 2013
$50,000-$90,000	2	1	1
$40,000-$49,999	1	2	2
$30,000-$39,000	3	1	4
$20,000-$29000	14	17	25
	20	21	32

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2013 Provider Discounts

Performance Guarantees:

- BCBSND will maintain a PPO network: consisting of 92% or more of the in-state hospitals, MD's and DO's

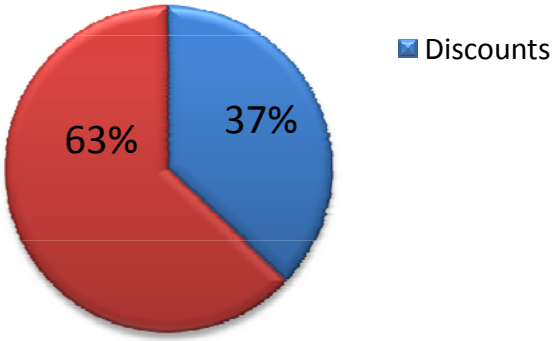
Currently above Goal - 99.7%

- **BCBSND guarantees NDPERS a minimum provider discount of 30% for Non-Medicare contracts.**

Currently above Goal – 52.5%

PPO Discounts	**$**	**4,725,857**
Other	**$**	**149,848,446**
Total In-State Discounts		**$154,574,303**
BlueCard Discounts	**$**	**18,281,877**
Total Discounts		**$172,856,180**

% Discounts off Total Charges*

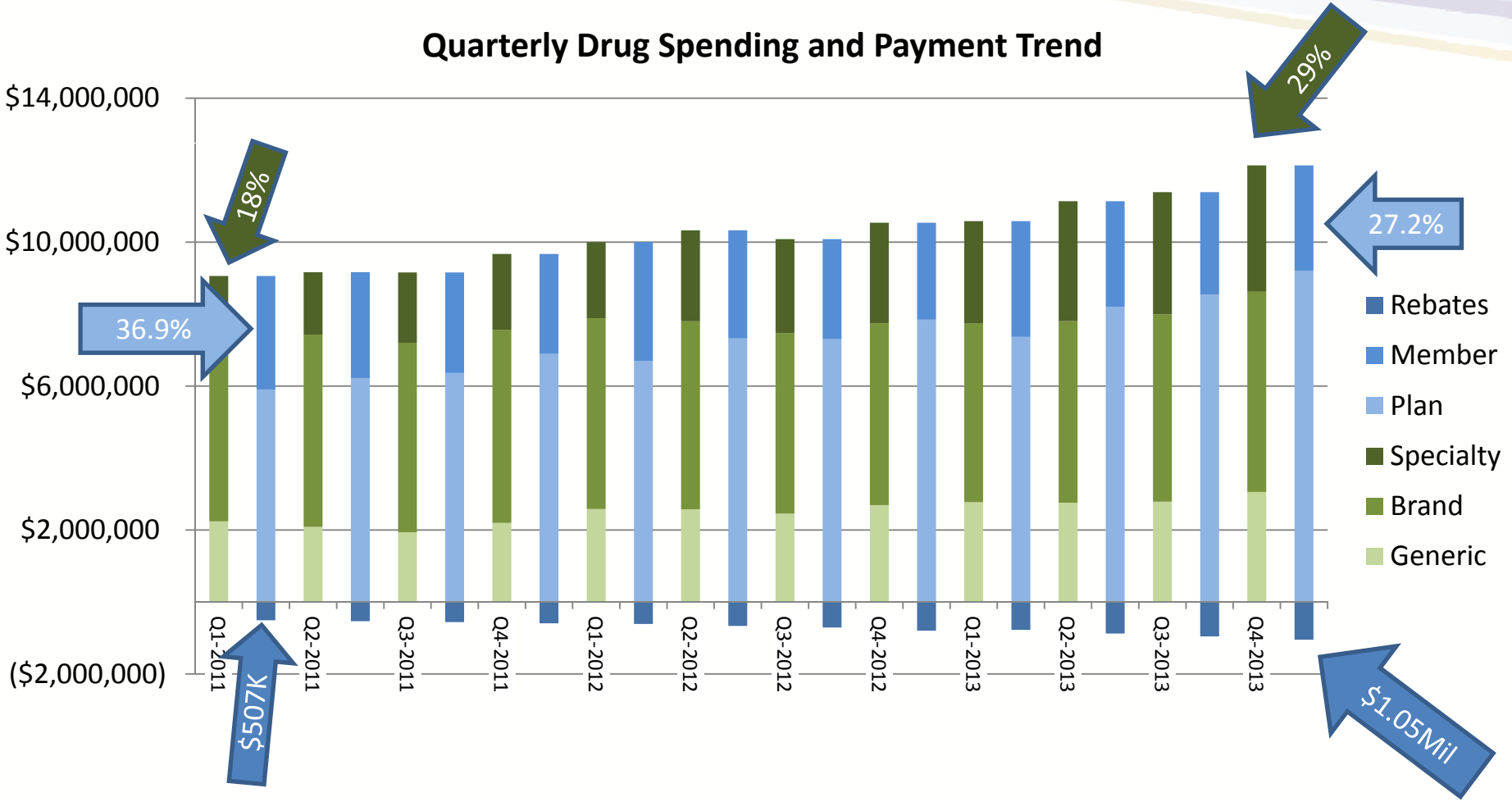


**Medicare Retirees excluded*

PHARMACY MANAGEMENT

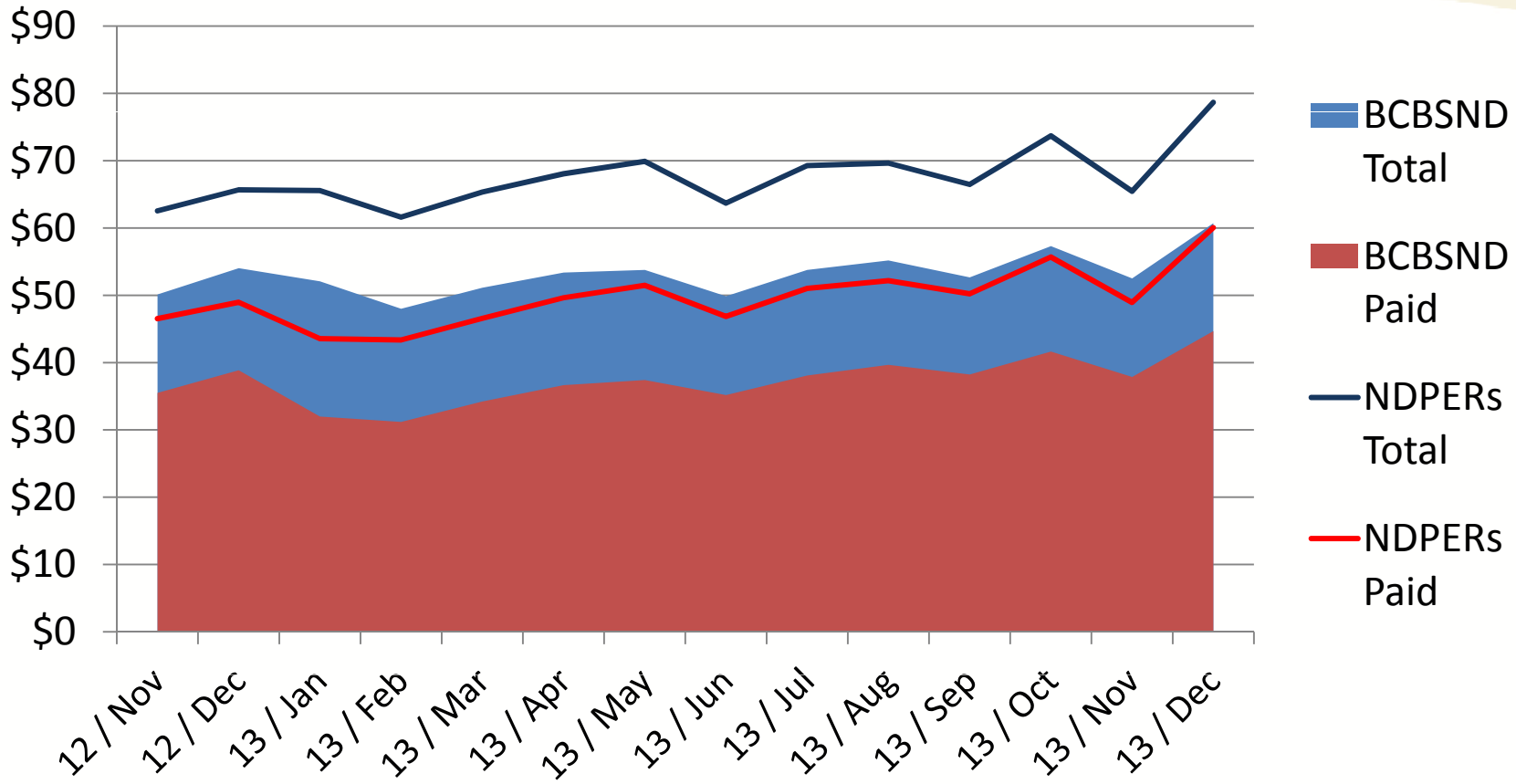
Quarterly RX Spending

- Annual RX Spending Trends have been 5-9% quarter to quarter since 2010.
- Overall trend is driven by separate trends in generic, brand and specialty.



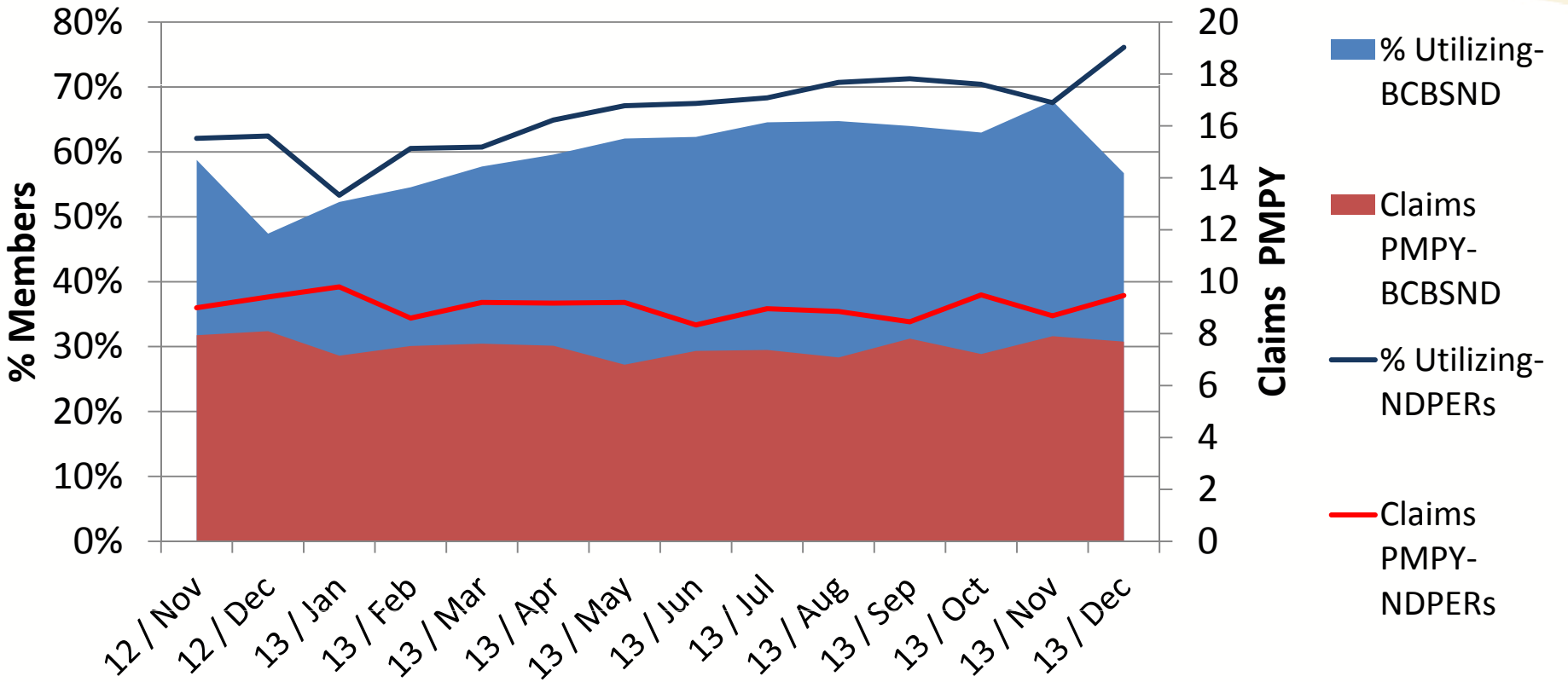
Monthly PMPM

PMPM Plan and total paid amounts average $10-15 higher than monthly plan values



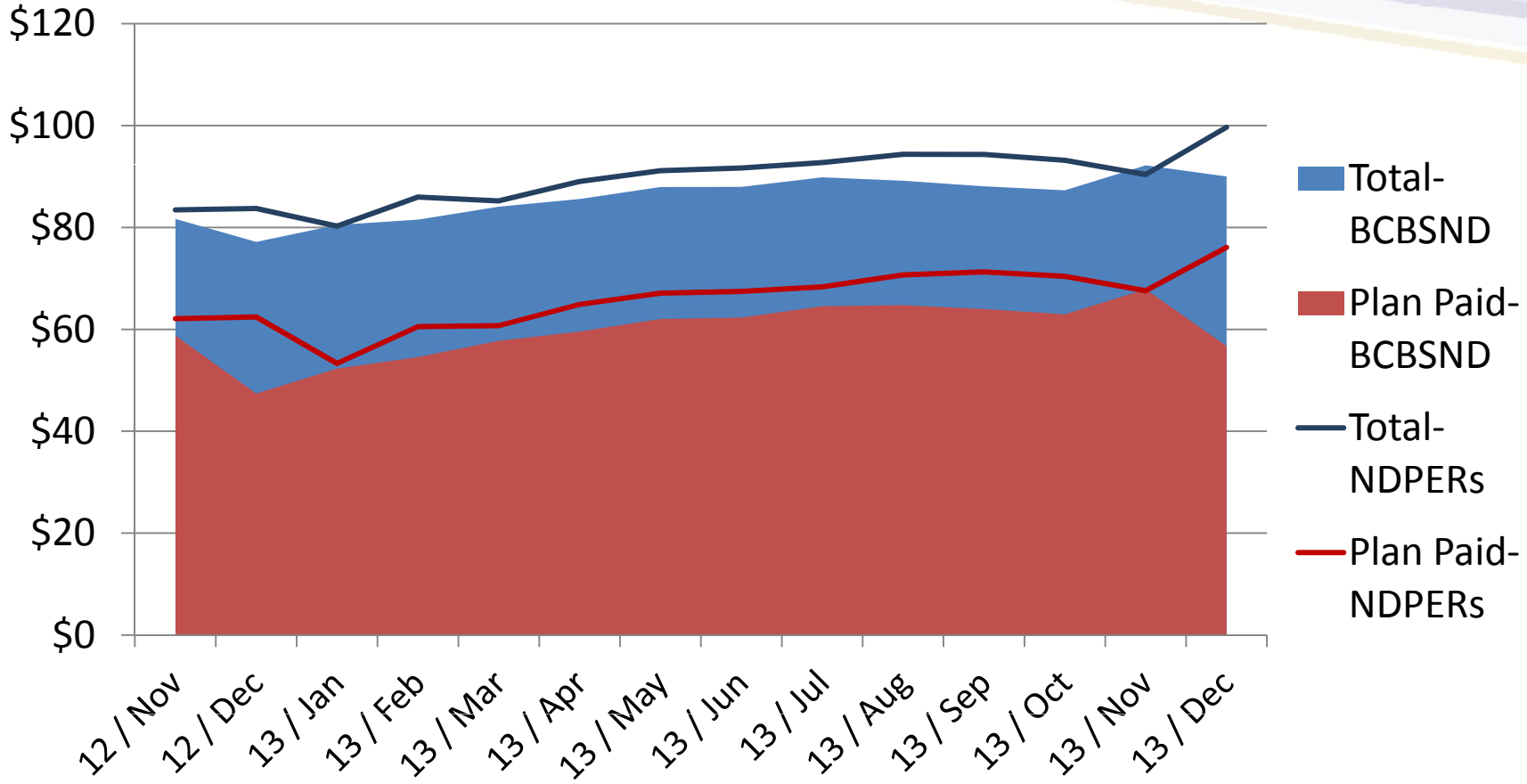
Monthly Utilization

Utilization outpaces BCBSND average in both % of members and claims per member measures



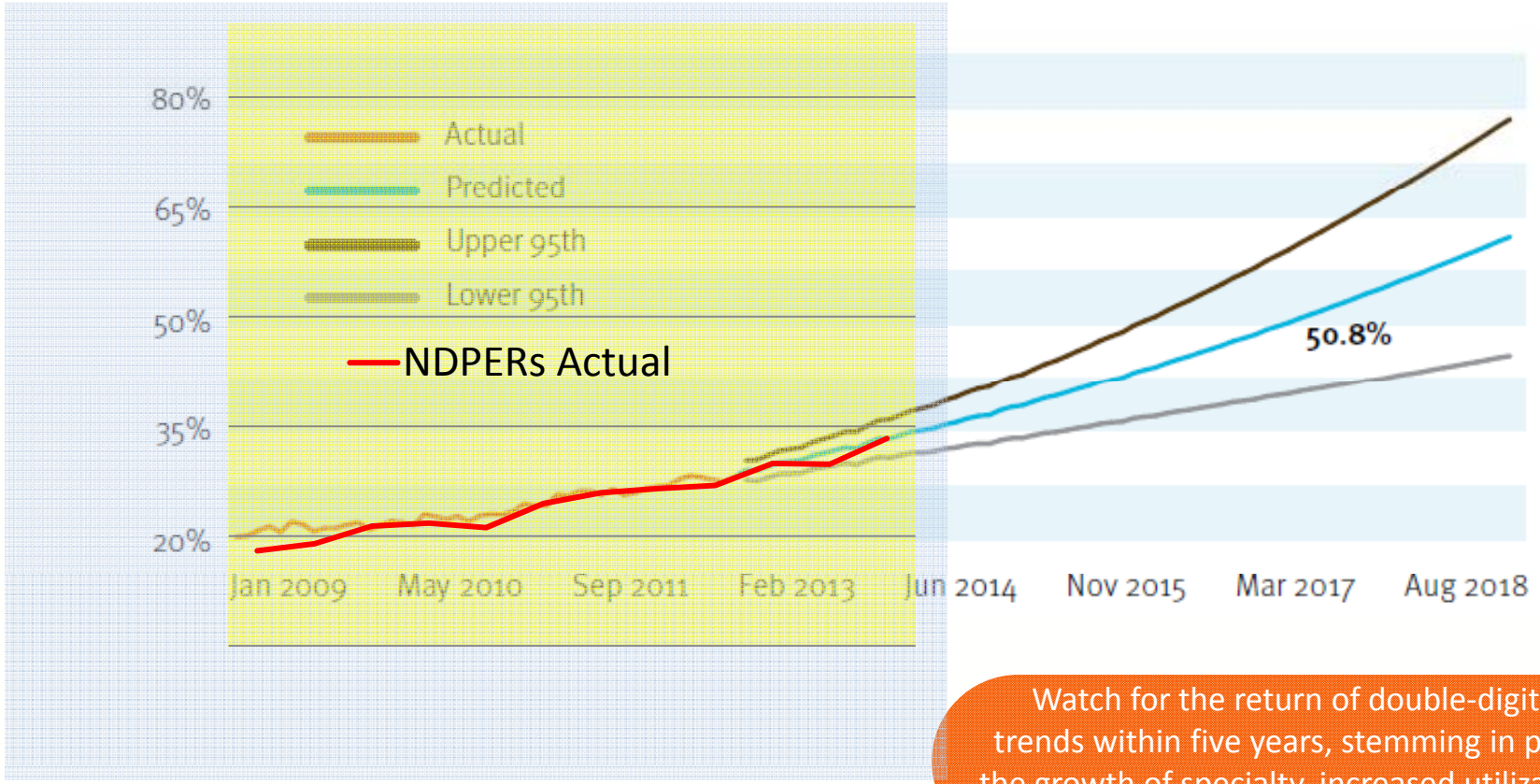
Monthly Claims Costs

Average claims costs are higher than plan average



By 2018, more than 50 percent of all drug spend will be specialty

Fig. 10 **Specialty drug costs as a percentage of total drug spend**



Watch for the return of double-digit drug trends within five years, stemming in part from the growth of specialty, increased utilization and aging baby boomers

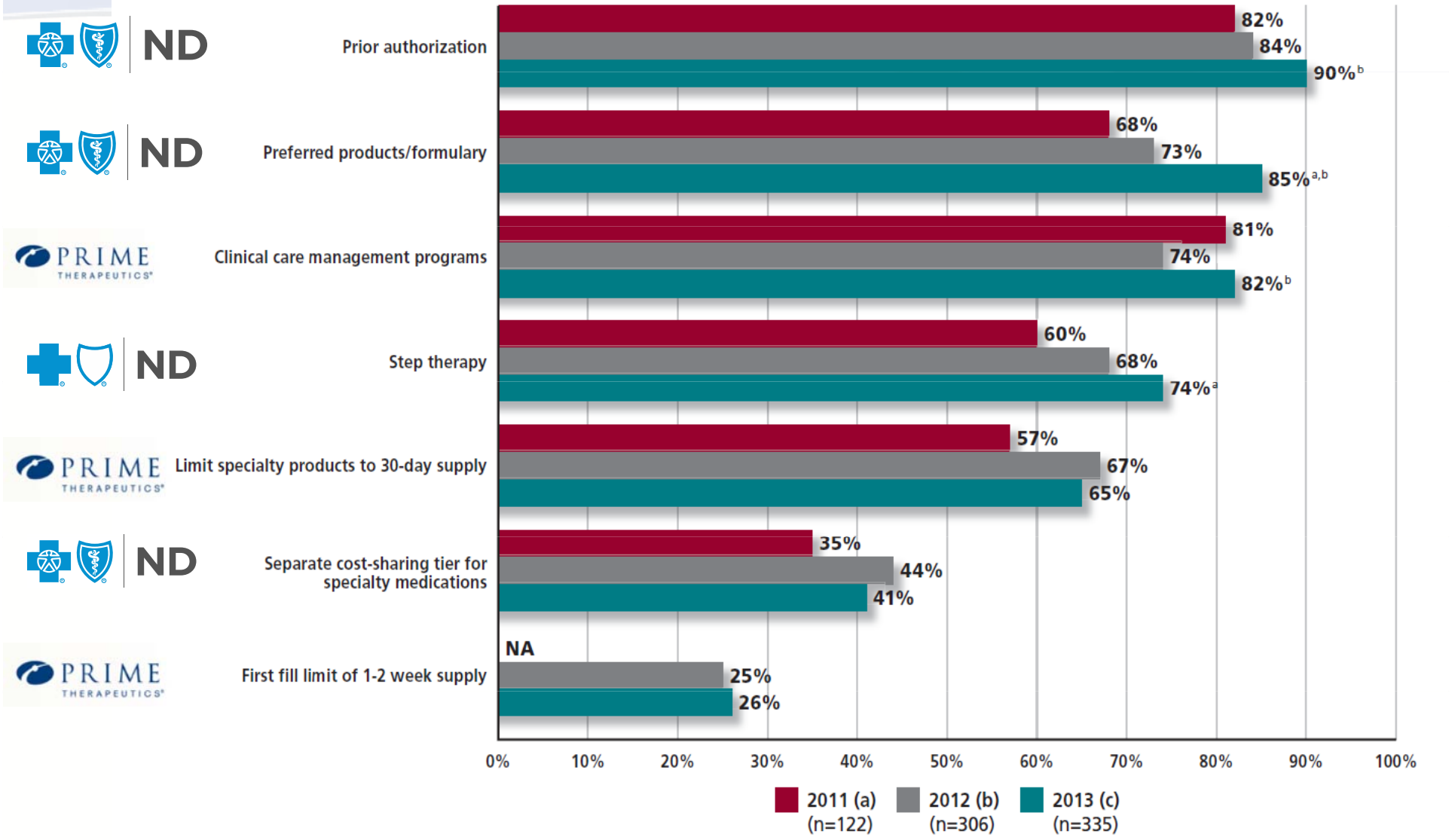
Research on National Trends

Web location available on request

Employer Surveys:

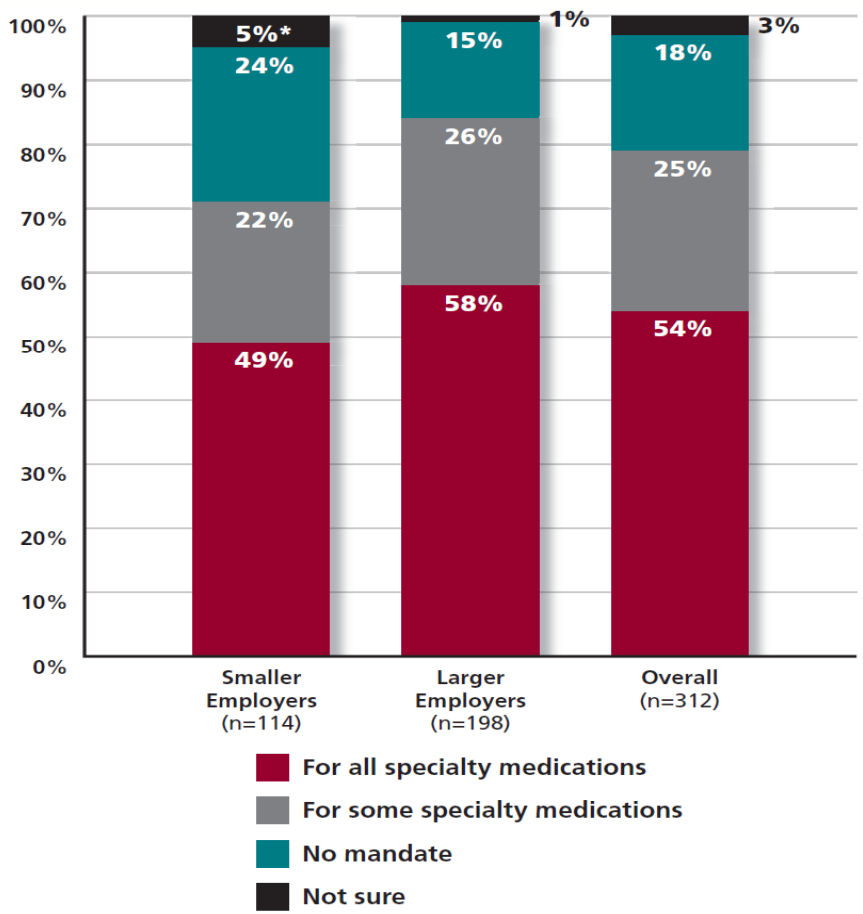
- EMD: 102 health Plans, 52% of commercial lives within geographical areas surveyed.
- Walgreens: 306 employers representing 17.6 million members, 62% in groups >5000.
- PBMI: 1st Published in 1995. 478 Plans, 22.5 million members.

Specialty Drug Management includes patient, acquisition, handling, delivery and monitoring considerations.

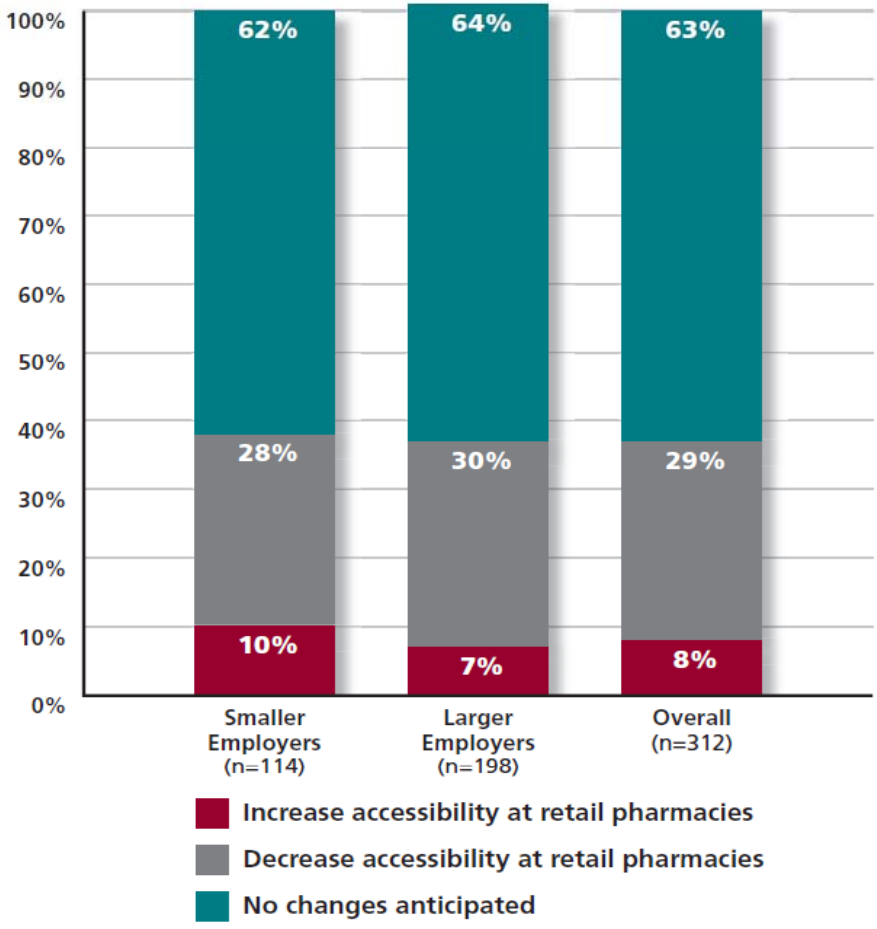


Managing Specialty (2014 specialty Drug Report)

Approximately 80% of employer groups use ***Channel Management***



Trends are to decrease access to retail channel



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7

Pick the right partner

Top-performing plans know

They can't do it alone. Top performers select a trusted advisor with comprehensive capabilities and deep connections to help them anticipate and address specialty drug challenges.

Partnership is essential

The facts are clear: specialty drugs will soon become the main drivers of increased drug spending and the focus of pharmacy benefit management. How well plan sponsors deal with this challenge depends in large part on the steps they take today.

The good news is that plan sponsors don't have to do it alone. A pharmacy benefit manager's role is to inform, advise, and—most importantly—manage drug-related cost and care challenges. That's why the most critical step in successful specialty pharmacy management is finding the right partner.

Characteristics of a good partner

The right kind of partner possesses a comprehensive set of capabilities and connections and demonstrates proven expertise in drug cost management; will engage and be responsive in interactions with members and clients; and can be expected to tell the unvarnished truth about what's going on.

Most importantly, the right kind of partner places a priority on people and their health, always considering what is best for them in every decision.

SPOTLIGHT

Coordinated care, aligned incentives

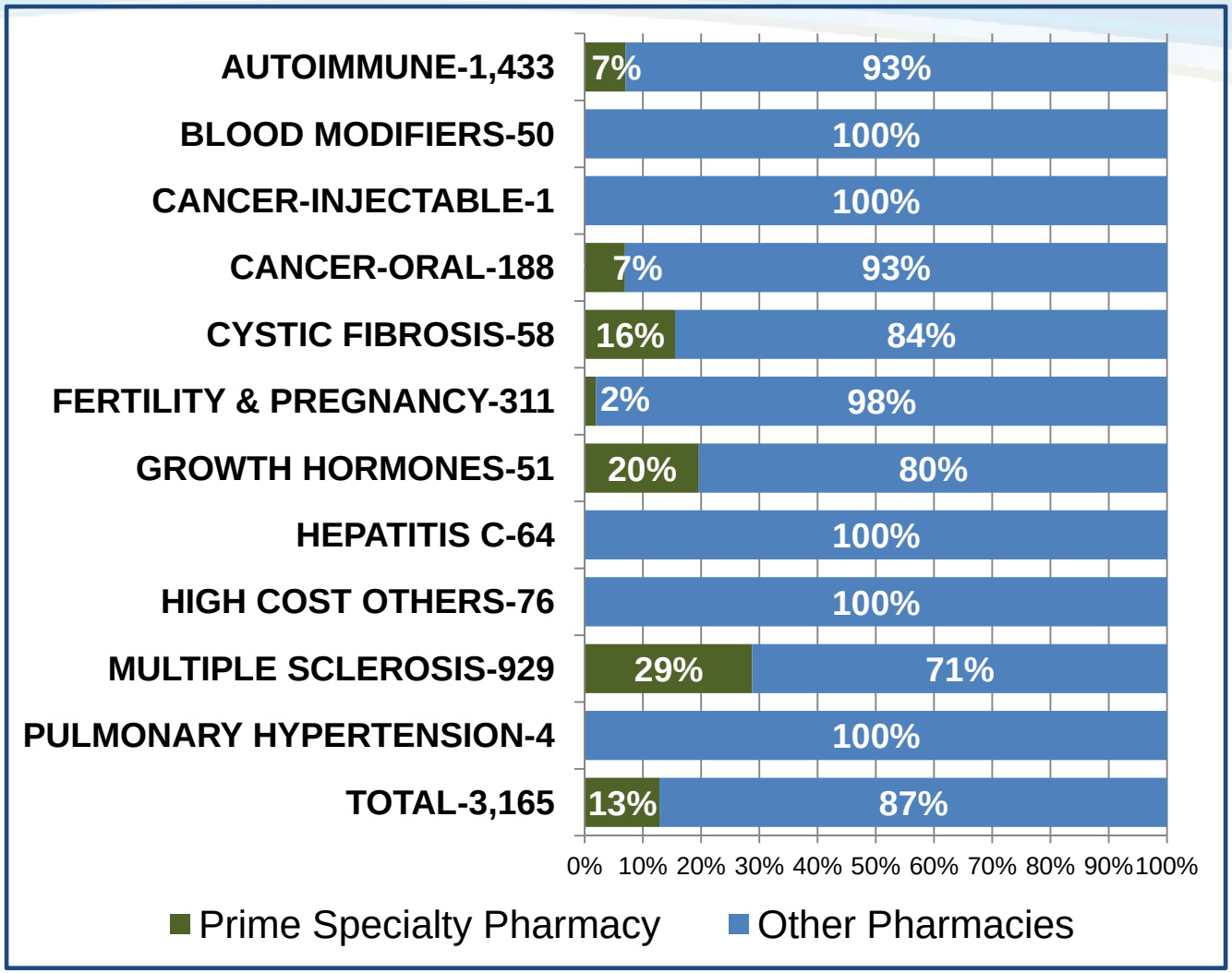
All sorts of problems can arise when companies put revenues before people. Without careful consideration of health outcomes and total costs, some of the tactics used to create drug pricing advantages can actually end up adding costs to the health care system.

Prime's relationship with Blue Cross and Blue Shield Plans allows us to be different. Not only does this unique connection set us free to do what's right for our members and clients, it also allows us to do what's right for the industry. Learn more.

Prime Specialty Campaign

PSP Campaign:

March 2013:
- 284 targeted NDPERs Specialty Utilizers.
- 33 new utilizers identified through close of 2013.
- PrimeSpecialty Pharmacy penetration remains low at 13% of claims.*



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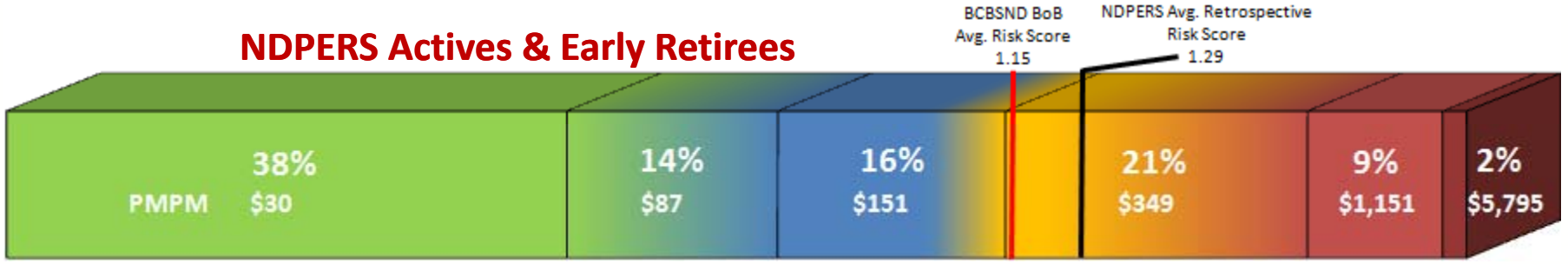
HEALTH MANAGEMENT

Well by Design

Healthy	At Risk	Chronic Conditions	High Cost Episodes
Stay Healthy	Reduce Lifestyle Risks	Manage Chronic Conditions	Manage High Cost Episodes
1. HealthyBlue 2. Health Club Credit	1. Member Education 2. Targeted Messaging	1. MediQHome 2. Guided Health 3. Specialty Rx 4. Accordant	1. Member Advocacy 2. Prenatal Plus 3. Case Management

NDPERS Actives & Early Retirees



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Health Improvement Programs

Member Advocacy Program

- Currently following 6 Cases

Tobacco Cessation Program

- 53 members enrolled with 53 start dates
- 35 members had claims totaling $9,295
- Biennium Program Expenditures through 12/31: $10,132

AIM Specialty Health

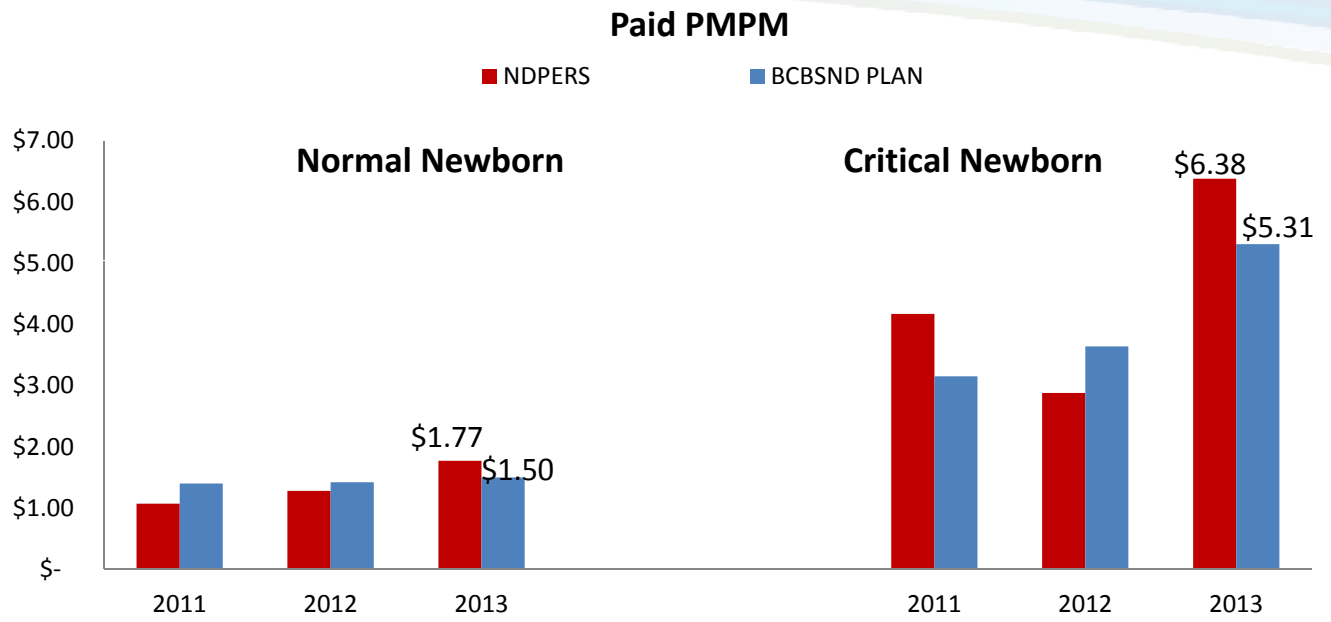
- April 1, 2014
- Educational
- BCBSND will require case review for selected outpatient non-emergency diagnostic imaging services. (CT, MRI, etc.)

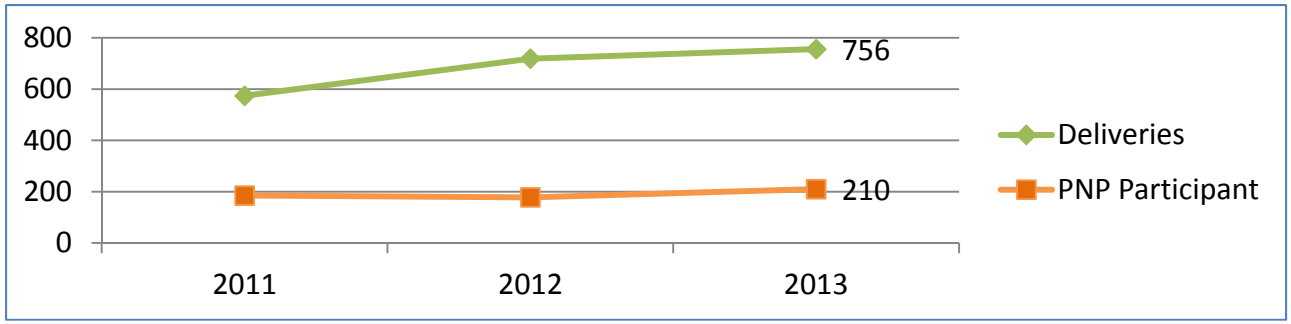
Restricted and/or Confidential

Newborns

Opportunity:

- Prenatal Plus Program
- Average of 28% participation over last 3 years





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Cancer Screening Measures

Performance Guarantees:

- Breast Cancer screening rates at 86%

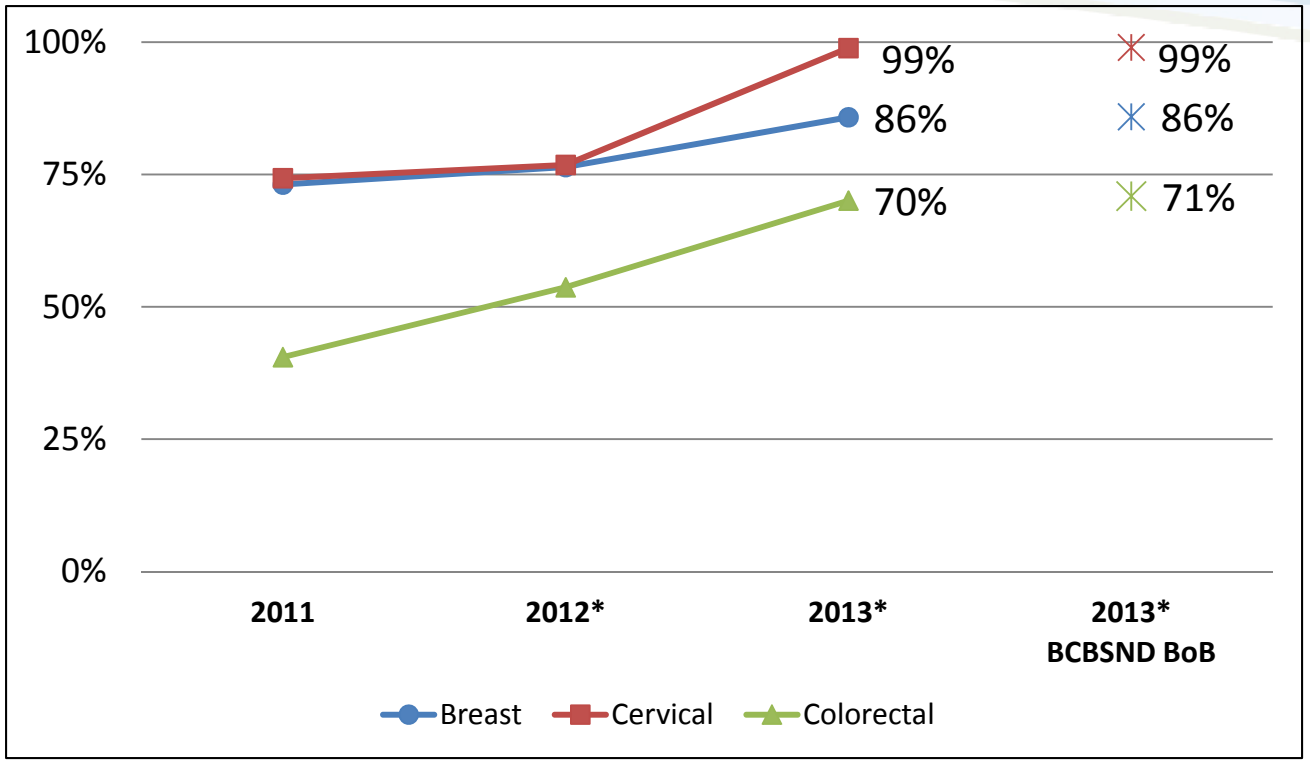
Goal = 80%

- Colorectal Cancer screening rates at 70%

Goal = 60%

- Cervical Cancer screening rates at 99%

Goal = 85%



**Supplemented with MediQHome*

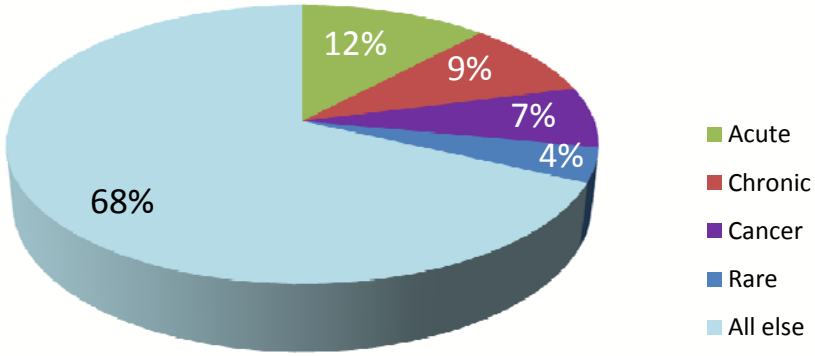
Includes all NDPERS members who were active on NDPERS plan as of January 2014

Restricted and/or Confidential

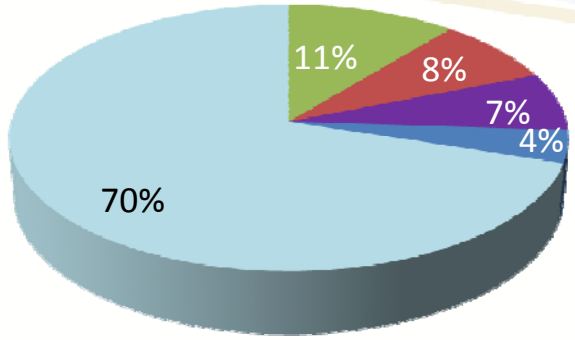
Top 10 Diseases

% of Total Spending by Disease Category

NDPERS – Actives/Early Retirees



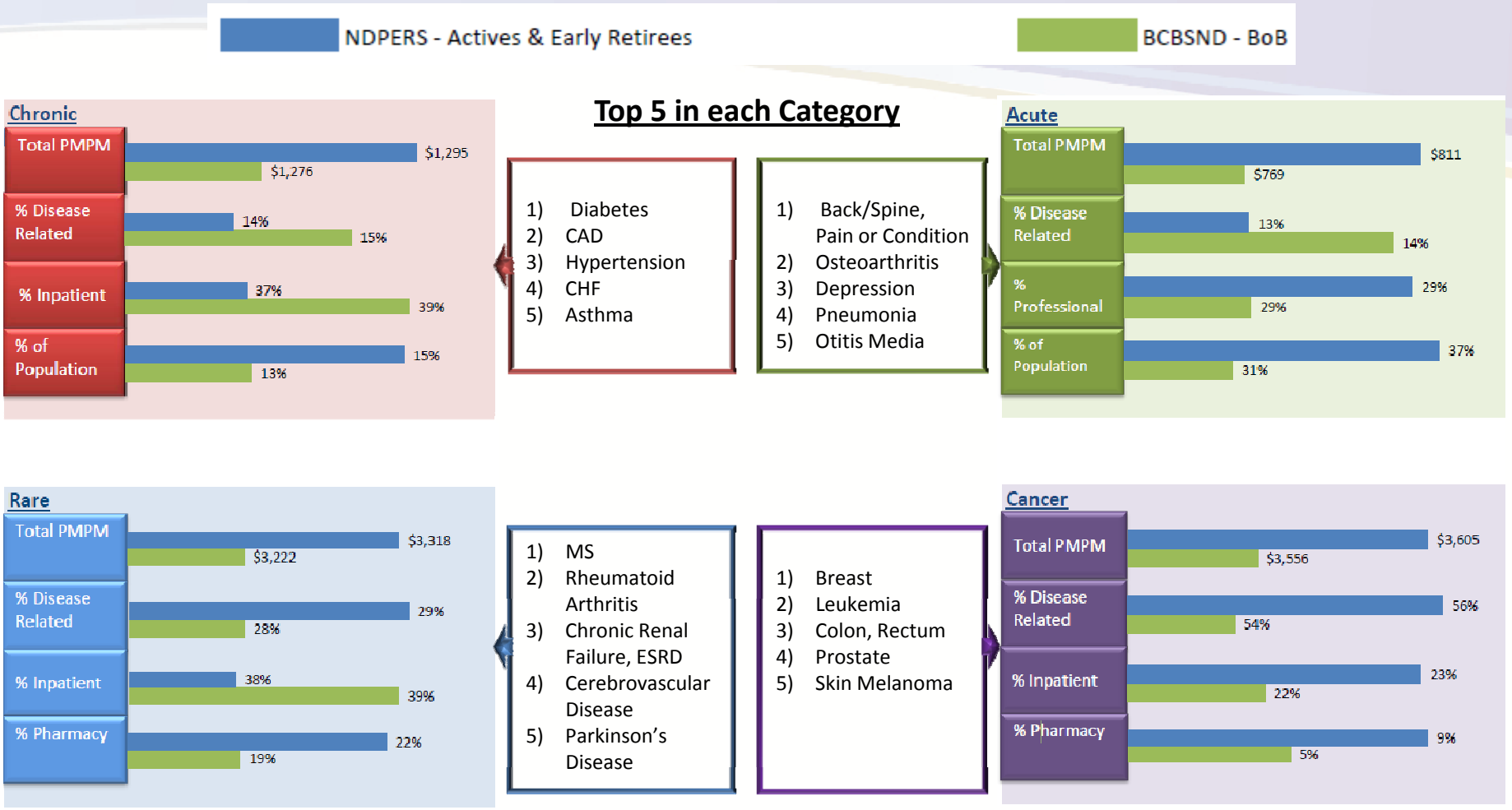
BCBSND BoB



Rank	Disease	Disease Payment	Total Payment
1	Back and Spine, Pain or Condition	$7,909,341	$47,987,526
2	Osteoarthritis	$6,752,286	$18,570,630
3	Diabetes	$6,547,363	$34,165,186
4	Depression	$5,828,776	$54,695,307
5	Cancer, Breast	$5,071,348	$7,231,762
6	Multiple Sclerosis	$3,026,423	$4,568,316
7	CHF	$2,666,840	$7,051,448
8	Cancer, Leukemia	$2,605,960	$3,241,904
9	Hypertension	$2,379,092	$57,445,966
10	Rheumatoid Arthritis	$2,318,455	$5,042,309

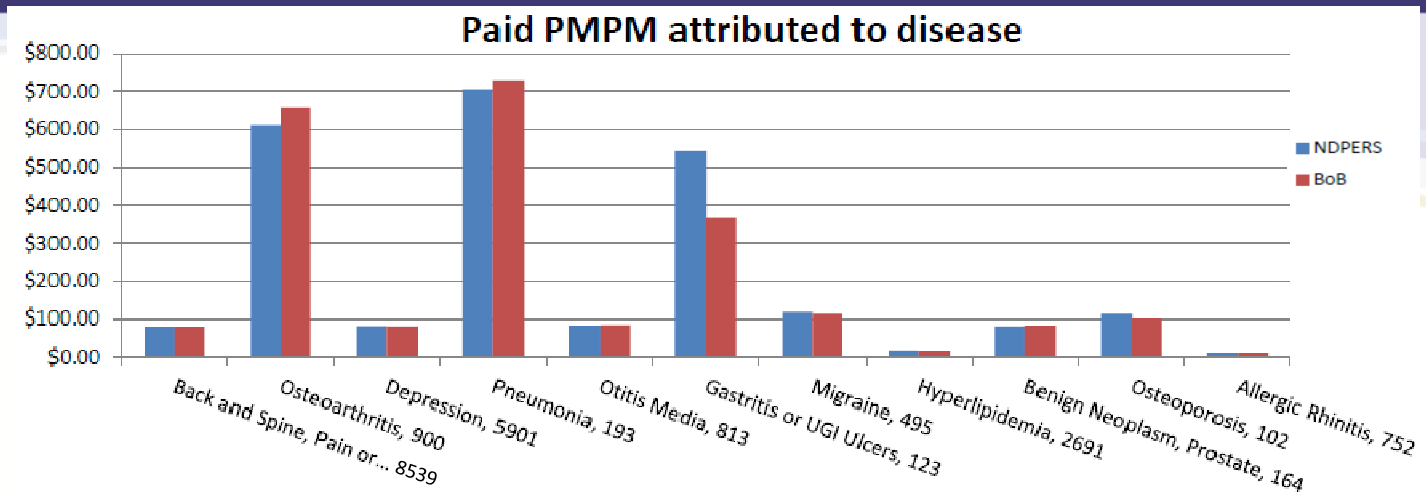
Restricted and/or Confidential

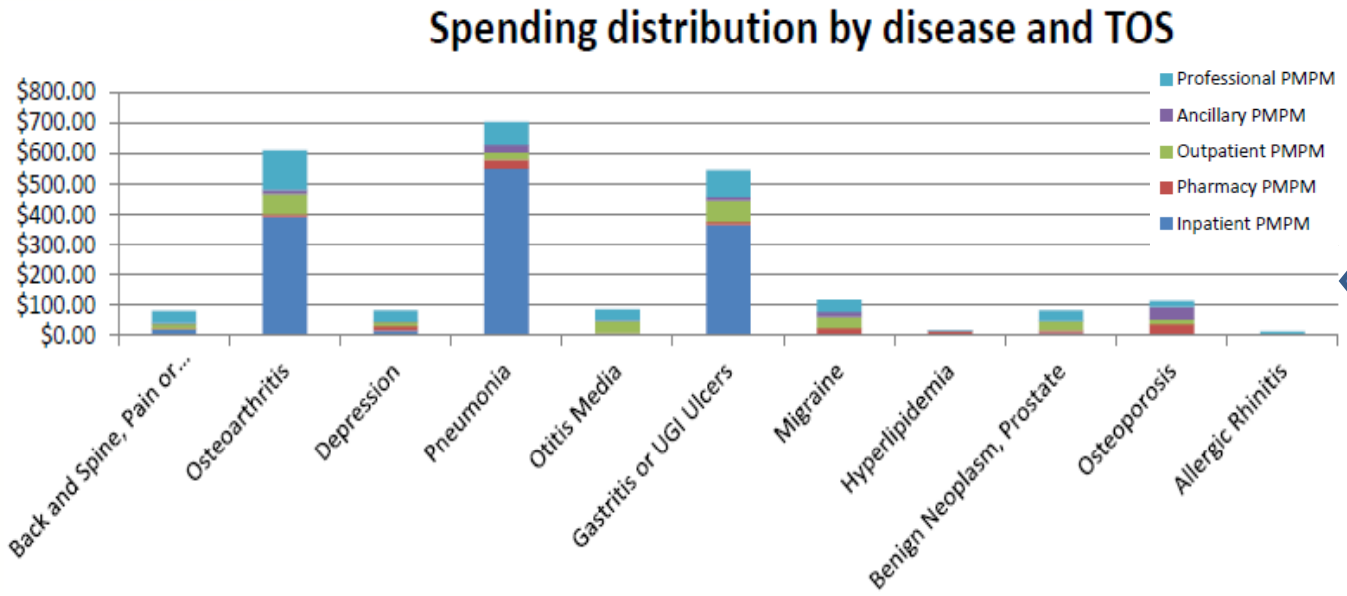
Cost Distribution



Restricted and/or Confidential

Top Acute Conditions





Inpatient & OP Spend
- ✓Pneumonia
- ✓Osteoarthritis
- ✓Gastritis/UGI Ulcers

Rx Spend
- ✓Osteoporosis
- ✓Pneumonia
- ✓Migraine

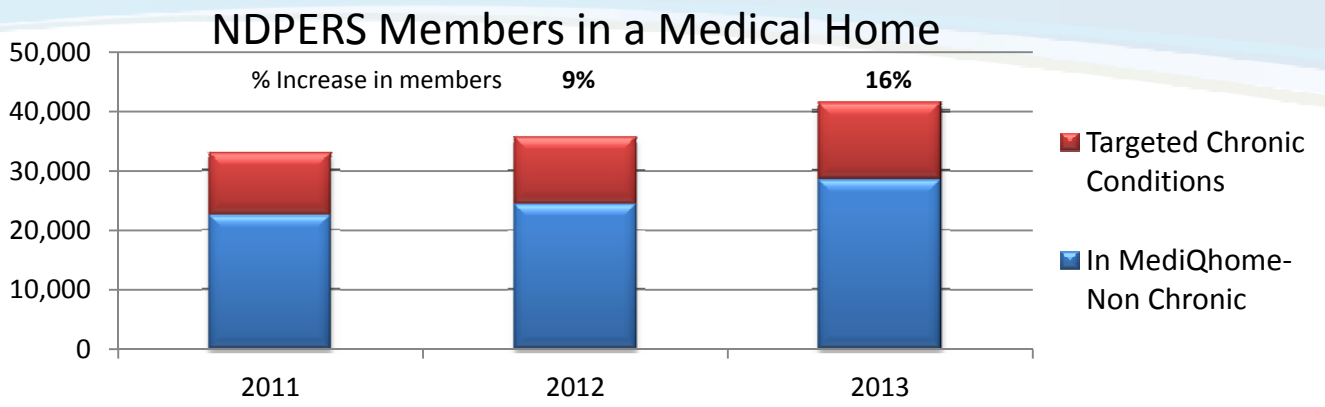
Restricted and/or Confidential

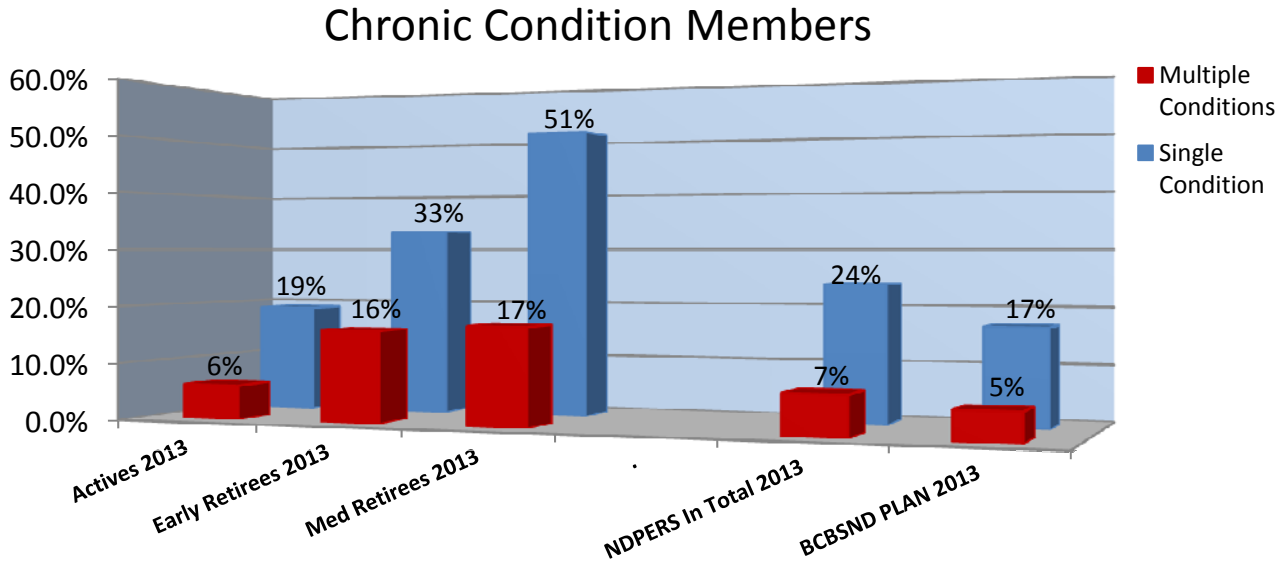
MediQHome

Performance Guarantee:

- 90% of NDPERS in state population identified in MQP

Goal = 80%





Restricted and/or Confidential

MediQHome Findings

MediQHome Metrics	NDPERS	State Avg.	Target	% of Change
	2013	2013		From 2012
Hypertension Prevalence	23%	16%	<16%	-1%
% Overweight/Obese	73%	72%	<72%	-1%
Average BMI	29.5	29.2	<29.2	-0.1%
Optimal Diabetes Compliance	27%	24%	>24%	3%
Optimal CAD Compliance	37%	34%	>34%	6%
Hypertension Control	76%	75%	>75%	2%

Green - Exceeding Target Goal

Yellow - Exceeding State Baseline

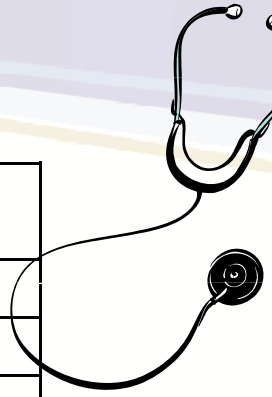
Red - Below State Baseline

Restricted and/or Confidential

AccordantCare

Rare and complex condition disease management

- 17 conditions



❖ Chronic Inflammatory Demyelinating Polyradiculoneuropathy (CIDP)	❖ Systemic Lupus Erythematosus
❖ Crohn's	❖ Multiple Sclerosis
❖ Dermatomyositis	❖ Myasthenia Gravis
❖ Gaucher Disease	❖ Parkinson's Disease
❖ Hemophilia	❖ Polymyositis
❖ ALS (Lou Gehrig's)	❖ Rheumatoid Arthritis
❖ Seizure Disorder	❖ Scleroderma
❖ Sickle Cell Disease	❖ Cystic Fibrosis
❖ Ulcerative Colitis	

	Active	Early Retiree	Medicare Retiree
Participation Rate	57% (266 members)	69% (20 members)	63% (27 members)

BCBSND BoB participation rate - 58%

Health Club Credit & HealthyBlue

Performance Guarantees:

Health Club Credit

- Members receiving credit will increase 10% - 2013 compared to 2014

Baseline: 1,979
Goal =2,177

HealthyBlue

- Incentives paid will increase by 10% over 2013 rate

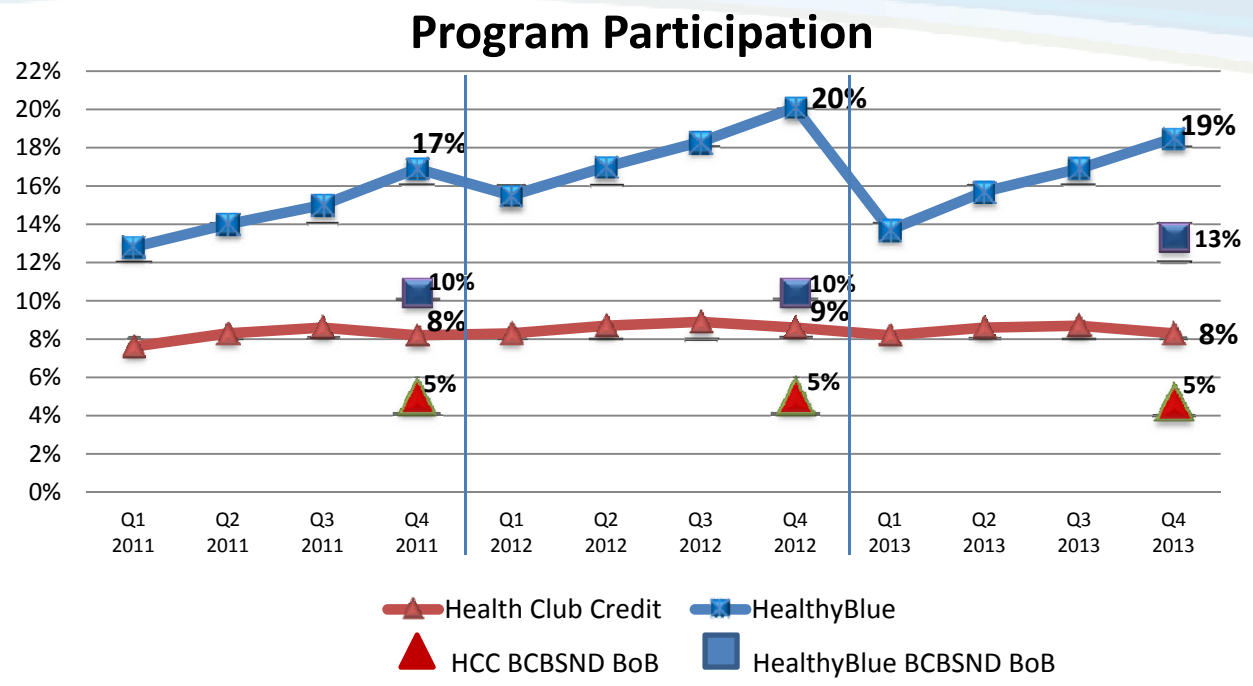
Baseline: $528,907
Goal = $581,798

- HRA Completions by 12/31/2014

Goal = 17%

- HRA score: 5% point increase by 12/31/2014

Baseline: 52
Goal = 55



Health Club Credit	2013
Credits Paid	$492,294
Members receiving credit	1,979

HealthyBlue	2013
Redemptions	$528,907
HRA Completions	8,087
HRA Score	52

Restricted and/or Confidential

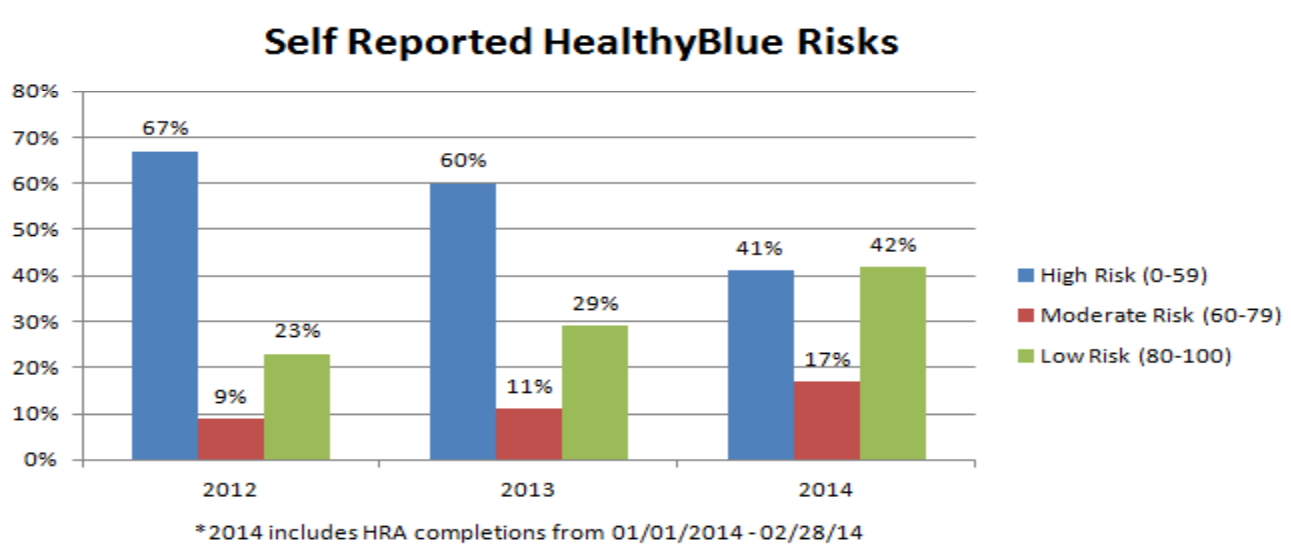
HealthyBlue Program Results

Key Points

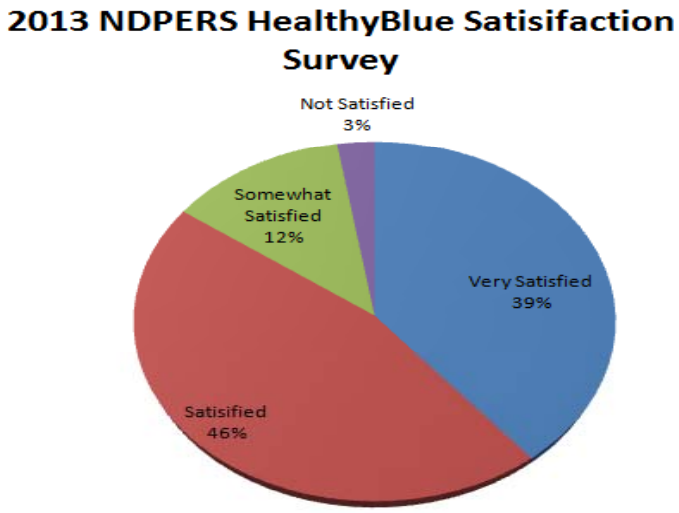
- 43,682 eligible members
- 97% of users are satisfied with HealthyBlue

"I joined HealthyBlue because of the benefits of improving my health." –NDPERS Member

"The HealthyBlue website has reinvigorated our wellness program." -NDPERS Wellness Coordinator

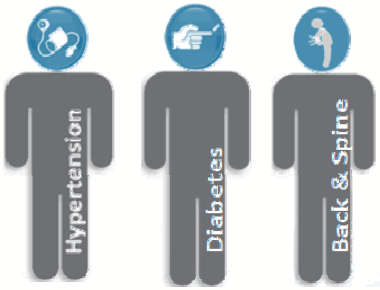


*2014 includes HRA completions from 01/01/2014 - 02/28/14



OPPORTUNITIES

2014 Focus Areas



- **Excite**
  - Promote mobile app functionality
  - Promote devices
  - Wellness Star of the Month
- **Engage**
  - Lt. Governor's Award
  - National Walk @ Lunch Day
- **Empower**
  - Targeted Messaging
  - Guided Tutorials

Restricted and/or Confidential

2014 Focus Areas

Restricted and/or Confidential

Performance Standards and Guarantees

Measure	Goal	12/31/2013
Cost Management (measurement period : by 12-31-14)		
HRA Completions	17%	19%
HRA Score	5% point increase in the 2013 NDPERS group aggregate HRA wellness score 55	52
HealthyBlue - incentives paid	10% increase over 2013 incentives paid $581,798	$528,907
Health Club Credit - members receiving credit	10% increase over 2013 members receiving credit 2,177	1,979
Health Outcomes:		
Members enrolled in a Medical Home	80%	90%
Breast Cancer Screening Rates*	80%	86%
Cervical Cancer Screening Rates*	85%	99%
Colorectal Cancer Screening Rates*	60%	70%
Operational Performance:		
Claims Financial Accuracy	99%	98%
Payment Incident Accuracy	97%	99%
Claim Timeliness	99%	99%
Average Speed of Answer (in seconds)	30 seconds or less	25
Call Abandonment Rate	5% or less	2%
Provider Network Management:		
NDPERS PPO network	92% (or more) participation	99.6%
Provider Discount for non-Medicare contracts	30% or more	53%

**Cancer screening rates are a culmination of MediQHome and Optum claims data*

Green – meeting goal
Red – below goal
Purple – neither above nor below

Restricted and/or Confidential

Future Considerations

- Telehealth
- Gamification
- Specialty Pharmacy
- Cost sharing adjustments allowed within a Grandfathered plan
  - Office Visit Copay
  - Emergency Room Copay
  - Rx Copay & Coinsurance Maximum

Restricted and/or Confidential

QUESTIONS?

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ND PERS

05/13/10
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Blue Cross Blue Shield of North Dakota
Analysis of State Group Experience
July 1, 2009 Thru April 30, 2010

Month	(1) Premium Collected	(2) Other Premium Adjustments	(3) Premium Buy Down	(4) Total Premium (1+2+3)	(5) Admin. Expense $35.94 Per Contract	(6) Net Premium (4 - 5)	(7) Interest On Surplus	(8) Incurred Claims Adj for settlements Net of RX rebates	(9) Claims Estimated IBNR	(10) Est. Gain (Loss) (6+7-8-9)
July-09	17,328,588	2,900	0	17,331,488	914,961	16,416,528	0	14,280,337	0	2,136,191
August-09	17,351,176	5,402	0	17,356,578	916,793	16,439,784	2,600	13,573,581	200,000	2,668,803
September-09	17,473,373	5,654	0	17,479,026	923,011	16,556,015	12,107	14,283,591	250,000	2,034,532
October-09	17,450,246	(7,559)	0	17,442,686	922,364	16,520,322	13,758	14,630,354	350,000	1,553,725
November-09	17,461,435	2,900	0	17,464,335	923,119	16,541,216	13,616	14,106,891	500,000	1,947,940
December-09	17,472,713	(2,465)	0	17,470,247	923,766	16,546,482	16,457	15,573,837	750,000	239,102
January-10	17,515,092	1,081	0	17,516,173	925,886	16,590,287	12,217	12,726,919	1,200,000	2,675,585
February-10	17,536,301	4,009	0	17,540,309	927,791	16,612,518	22,803	12,480,218	1,900,000	2,255,104
March-10	17,536,338	2,900	0	17,539,238	927,575	16,611,663	18,594	12,978,708	3,100,000	551,549
April-10	17,548,974	(8,173)	0	17,540,801	928,330	16,612,471	18,529	4,589,460	10,750,000	1,291,540
May-10	0	0	0	0	0	0	0	0	0	0
June-10	0	0	0	0	0	0	0	0	0	0
July-10	0	0	0	0	0	0	0	0	0	0
August-10	0	0	0	0	0	0	0	0	0	0
September-10	0	0	0	0	0	0	0	0	0	0
October-10	0	0	0	0	0	0	0	0	0	0
November-10	0	0	0	0	0	0	0	0	0	0
December-10	0	0	0	0	0	0	0	0	0	0
January-11	0	0	0	0	0	0	0	0	0	0
February-11	0	0	0	0	0	0	0	0	0	0
March-11	0	0	0	0	0	0	0	0	0	0
April-11	0	0	0	0	0	0	0	0	0	0
May-11	0	0	0	0	0	0	0	0	0	0
June-11	0	0	0	0	0	0	0	0	0	0
	174,674,235	6,648	0	174,680,882	9,233,597	165,447,285	130,681	129,223,896	19,000,000	17,354,070

Note: IBNR estimate includes a 10% margin.

05/13/10
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Blue Cross Blue Shield of North Dakota
Calculation of Interest on State Group
July 1, 2009 Thru April 30, 2010

Date	Premium Collected	Less: Additions to My Health & Wellness Accounts	Net Premium Collected	Other Premium Adjustments	(1 - 2.5) Total Premium	35.94 Per Contract	(3 - 4) Net Premium	Claims Paid	Claims Refunded	Perform Rebate	Additions to Cash Flow	(5-6+7+7.5+8.6+9) Total Cash Balance	Days	Interest Rate	Interest on Cash Flow	Additions to Biennium Deposit	TOTAL Biennium Deposit	Interest Biennium Deposit	Cash Reserv
	(1)			(2.5)	(3)	(4)	(5)	(6)	(7)	(7.5)	(8.6)	(9)	(10)						(14)
2009														1.10%	0.00	3,000,000.00	3,000,000.00	0.00	
Balance fwd.			0.00		0.00	0.00	0.00					0.00	0	1.10%	0.00		3,000,000.00	0.00	
7 1			0.00	0.00	0.00	0.00	0.00					0.00	1	1.10%	0.00		3,000,000.00	90.41	
7 7			0.00		0.00	0.00	0.00	212,306.13	0.00			(212,306.13)	6	1.10%	(38.39)		3,000,000.00	542.47	
7 14			0.00		0.00	0.00	0.00	612,192.19	3,842.62			(820,655.70)	7	1.10%	0.00		3,000,000.00	632.88	
7 21			0.00		0.00	0.00	0.00	1,625,037.31	7,504.15			(2,438,188.86)	7	1.10%	0.00		3,000,000.00	632.88	
7 24	17,733,649.32	(405,061.00)	17,328,588.32		17,328,588.32	0.00	17,328,588.32					14,890,399.46	3	1.10%	0.00		3,000,000.00	271.23	
7 28			0.00		0.00	0.00	0.00	2,002,408.15	9,482.97			12,897,474.28	4	1.10%	1,554.76		3,000,000.00	361.64	
7 31			0.00	2,900.00	2,900.00	914,960.52	(912,060.52)					11,985,413.76	3	1.10%	1,083.61		3,000,000.00	271.23	
7 31	17,733,649.32	(405,061.00)	17,328,588.32	2,900.00	17,331,488.32	914,960.52	16,416,527.80	4,451,943.78	20,829.74	0.00	0.00	11,985,413.76	31		2,599.98	3,000,000.00	3,000,000.00	2,802.74	
	Contract count for the month was 25,458.			$2,900 transferred to 09-11 Biennium for Premium buydown fropm cash reserve															
2009																			
Balance fwd.			0.00		0.00	0.00	0.00					11,985,413.76	0	1.17%	0.00	2,802.74	3,002,802.74	0.00	
8 1			0.00	2,502.02	2,502.02	0.00	2,502.02				2,599.98	11,990,515.76	1	1.17%	384.35		3,002,802.74	96.25	
8 4			0.00		0.00	0.00	0.00	2,398,529.12	39,464.93			9,631,451.57	3	1.17%	926.20		3,002,802.74	288.76	
8 11			0.00		0.00	0.00	0.00	2,469,506.38	21,250.58			7,183,195.77	7	1.17%	1,611.79		3,002,802.74	673.78	
8 18			0.00		0.00	0.00	0.00	2,860,642.34	13,166.16			4,315,719.59	7	1.17%	968.38		3,002,802.74	673.78	
8 24	17,759,304.42	(408,128.70)	17,351,175.72		17,351,175.72	0.00	17,351,175.72					21,666,895.31	6	1.17%	4,167.17		3,002,802.74	577.53	
8 25			0.00		0.00	0.00	0.00	2,860,285.51	22,510.63			18,829,120.43	1	1.17%	603.56		3,002,802.74	96.25	
8 31			0.00	2,900.00	2,900.00	916,793.46	(913,893.46)					17,915,226.97	6	1.17%	3,445.61		3,002,802.74	577.53	
8 31	17,759,304.42	(408,128.70)	17,351,175.72	5,402.02	17,356,577.74	916,793.46	16,439,784.28	10,608,963.35	96,392.30	0.00	2,599.98	17,915,226.97	31		12,107.06	2,802.74	3,002,802.74	2,983.88	
	Contract count for the month was 25,509.			$2,900 Refer to contract. Premium buy down.															
2009																			
Balance fwd.			0.00		0.00	0.00	0.00					17,927,334.03	0	0.96%	0.00	2,983.88	3,005,786.62	0.00	
9 1			0.00	2,753.64	2,753.64	0.00	2,753.64	3,328,392.05	31,023.13			14,632,718.75	1	0.96%	384.86		3,005,786.62	79.06	
9 8			0.00		0.00	0.00	0.00	2,580,390.49	42,055.79			12,094,384.05	7	0.96%	2,226.69		3,005,786.62	553.39	
9 15			0.00		0.00	0.00	0.00	2,421,708.47	36,004.36			9,708,679.94	7	0.96%	1,787.46		3,005,786.62	553.39	
9 22	17,882,610.48	(409,237.70)	17,473,372.78		17,473,372.78	0.00	17,473,372.78					27,182,052.72	7	0.96%	5,004.48		3,005,786.62	553.39	
9 22			0.00		0.00	0.00	0.00	3,252,778.06	23,125.61			23,952,400.27	0	0.96%	0.00		3,005,786.62	0.00	
9 29			0.00		0.00	0.00	0.00	3,182,317.57	39,522.14			20,809,604.84	7	0.96%	3,831.25		3,005,786.62	553.39	
9 30			0.00	2,900.00	2,900.00	923,011.08	(920,111.08)					19,889,493.76	1	0.96%	523.12		3,005,786.62	79.06	
9 30	17,882,610.48	(409,237.70)	17,473,372.78	5,653.64	17,479,026.42	923,011.08	16,556,015.34	14,765,586.64	171,731.03	0.00	12,107.06	19,889,493.76	30	0.96%	13,757.86	2,983.88	3,005,786.62	2,371.68	
	Contract count for the month was 25,682.			$2,900 Refer to contract. Premium buy down.															
2009																			
Balance fwd.			0.00		0.00	0.00	0.00					19,903,251.62	0	0.90%	0.00	2,371.68	3,008,158.30	0.00	
10 1			0.00	(10,459.38)	(10,459.38)	0.00	(10,459.38)					19,892,792.24	1	0.90%	490.51		3,008,158.30	74.17	
10 6			0.00		0.00	0.00	0.00	3,049,810.46	27,552.39			16,870,534.17	5	0.90%	2,079.93		3,008,158.30	370.87	
10 13			0.00		0.00	0.00	0.00	3,245,054.39	23,932.56			13,649,412.34	7	0.90%	2,355.93		3,008,158.30	519.22	
10 20			0.00		0.00	0.00	0.00	3,103,027.75	29,003.21			10,575,387.60	7	0.90%	1,825.34		3,008,158.30	519.22	
10 23	17,859,762.48	(409,516.96)	17,450,245.52		17,450,245.52	0.00	17,450,245.52					28,025,633.32	3	0.90%	2,073.13		3,008,158.30	222.52	
10 27			0.00		0.00	0.00	0.00	3,300,413.88	21,237.19			24,746,456.63	4	0.90%	2,440.75		3,008,158.30	296.70	
10 31			0.00	2,900.00	2,900.00	922,364.16	(919,464.16)					23,826,992.47	4	0.90%	2,350.06		3,008,158.30	296.70	
10 31	17,859,762.48	(409,516.96)	17,450,245.52	(7,559.38)	17,442,686.14	922,364.16	16,520,321.98	12,698,306.48	101,725.35	0.00	13,757.86	23,826,992.47	31		13,615.65	2,371.68	3,008,158.30	2,299.40	
	Contract count for the month was 25,664.			$2,900 Refer to contract. Premium buy down.															
2009																			
Balance fwd.			0.00		0.00	0.00	0.00					23,840,608.12	0	0.93%	0.00	2,299.40	3,010,457.70	0.00	
11 1			0.00		0.00	0.00	0.00					23,840,608.12	1	0.93%	607.45		3,010,457.70	76.70	
11 3			0.00		0.00	0.00	0.00	3,564,250.41	49,877.90			20,326,235.61	2	0.93%	1,035.80		3,010,457.70	153.41	
11 10			0.00		0.00	0.00	0.00	3,505,874.94	32,227.83			16,852,588.50	7	0.93%	3,005.76		3,010,457.70	536.93	
11 17			0.00		0.00	0.00	0.00	3,192,585.98	37,142.81			13,697,145.33	7	0.93%	2,442.97		3,010,457.70	536.93	
11 20	17,874,216.20	(412,781.70)	17,461,434.50		17,461,434.50	0.00	17,461,434.50					31,158,579.83	3	0.93%	2,361.71		3,010,457.70	230.11	
11 24			0.00		0.00	0.00	0.00	3,421,951.15	30,371.29			27,766,999.97	4	0.93%	2,829.95		3,010,457.70	306.82	
11 30			0.00	2,900.00	2,900.00	923,118.90	(920,218.90)			320,743.26		27,167,524.33	6	0.93%	4,153.28		3,010,457.70	460.23	
11 30	17,874,216.20	(412,781.70)	17,461,434.50	2,900.00	17,464,334.50	923,118.90	16,541,215.60	13,684,662.48	149,619.83	320,743.26	13,615.65	27,167,524.33	30		16,456.92	2,299.40	3,010,457.70	2,301.13	
	Contract count for the month was 25,685.			$2,900 Refer to contract. Premium buy down.						$320,743.26 3Q09 Estimate									
2009																			
Balance fwd.			0.00		0.00	0.00	0.00					27,183,981.25	0	0.70%	0.00	2,301.13	3,012,758.83	0.00	
12 1			0.00	(5,365.42)	(5,365.42)	0.00	(5,365.42)					27,178,615.83	1	0.70%	521.23		3,012,758.83	57.78	
12 2			0.00		0.00	0.00	0.00	2,689,179.97	26,708.80			24,516,144.66	1	0.70%	470.17		3,012,758.83	57.78	
12 8			0.00		0.00	0.00	0.00	4,109,046.27	36,306.31			20,443,404.70	6	0.70%	2,352.39		3,012,758.83	346.67	
12 15			0.00		0.00	0.00	0.00	3,499,812.60	16,498.16			16,960,090.26	7	0.70%	2,276.83		3,012,758.83	404.45	
12 22			0.00		0.00	0.00	0.00	3,769,539.42	20,723.83			13,211,274.67	7	0.70%	1,773.57		3,012,758.83	404.45	
12 23	17,885,488.78	(412,776.00)	17,472,712.78		17,472,712.78	0.00	17,472,712.78					30,683,987.45	1	0.70%	588.46		3,012,758.83	57.78	
12 29			0.00		0.00	0.00	0.00	2,875,950.28	19,312.24			27,827,349.41	6	0.70%	3,202.05		3,012,758.83	346.67	
12 31			0.00	2,900.00	2,900.00	923,765.82	(920,865.82)					26,906,483.59	2	0.70%	1,032.03		3,012,758.83	115.56	

05/13/10
09:11 AM

Blue Cross Blue Shield of North Dakota
Calculation of Interest on State Group
July 1, 2009 Thru April 30, 2010

Date		Premium Collected	Less: Additions to My Health & Wellness Accounts	Net Premium Collected	Other Premium Adjustments	(1 - 2.5) Total Premium	35.94 Per Contract	(3 - 4) Net Premium	Claims Paid	Claims Refunded	Perform Rebate	Additions to Cash Flow	(5-6+7.5+8.6+9) Total Cash Balance	Days	Interest Rate	Interest on Cash Flow	Additions to Biennium Deposit	TOTAL Biennium Deposit	Interest Biennium Deposit	Cash Reserv
		(1)			(2.5)	(3)	(4)	(5)	(6)	(7)	(7.5)	(8.6)	(9)	(10)						(14)
12	31	17,885,488.78	(412,776.00)	17,472,712.78	(2,465.42)	17,470,247.36	923,765.82	16,546,481.54	16,943,528.54	119,549.34	0.00	16,456.92	26,906,483.59	31		12,216.73	2,301.13	3,012,758.83	1,791.14	
		Contract count for the month was 25,703.			$2,900 Refer to contract. Premium buy down.															
2010																				
Balance fwd.				0.00		0.00	0.00	0.00				12,216.73	26,918,700.32	0	1.10%	0.00	1,791.14	3,014,549.97	0.00	
1	1			0.00	(1,818.78)	(1,818.78)	0.00	(1,818.78)					26,916,881.54	1	1.10%	811.19		3,014,549.97	90.85	
1	5			0.00		0.00	0.00	0.00	2,929,365.00	109,002.22			24,096,518.76	4	1.10%	2,904.79		3,014,549.97	363.40	
1	12			0.00		0.00	0.00	0.00	4,017,672.13	45,111.55			20,123,958.18	7	1.10%	4,245.33		3,014,549.97	635.95	
1	19			0.00		0.00	0.00	0.00	3,654,602.13	202,752.12			16,672,108.17	7	1.10%	3,517.13		3,014,549.97	635.95	
1	22	17,927,504.28	(412,412.10)	17,515,092.18		17,515,092.18	0.00	17,515,092.18					34,187,200.35	3	1.10%	3,090.90		3,014,549.97	272.55	
1	26			0.00		0.00	0.00	0.00	3,333,813.25	17,203.78			30,870,590.88	4	1.10%	3,721.39		3,014,549.97	363.40	
1	31			0.00	2,900.00	2,900.00	925,886.28	(922,986.28)					29,947,604.60	5	1.10%	4,512.65		3,014,549.97	454.25	
1	31	17,927,504.28	(412,412.10)	17,515,092.18	1,081.22	17,516,173.40	925,886.28	16,590,287.12	13,935,452.51	374,069.67	0.00	12,216.73	29,947,604.60	31		22,603.38	1,791.14	3,014,549.97	2,816.35	
		Contract count for the month was 25,762.			$2,900 Refer to contract. Premium buy down.															
2010																				
Balance fwd.				0.00		0.00	0.00	0.00				22,803.38	29,970,407.98	0	0.87%	0.00	2,816.35	3,017,366.32	0.00	
2	1			0.00	(6,526.70)	(6,526.70)	0.00	(6,526.70)					29,963,881.28	1	0.87%	714.21		3,017,366.32	71.92	
2	2			0.00		0.00	0.00	0.00	3,487,544.10	63,775.22			26,540,112.40	1	0.87%	632.60		3,017,366.32	71.92	
2	9			0.00		0.00	0.00	0.00	3,250,922.66	67,317.66			23,356,507.40	7	0.87%	3,897.02		3,017,366.32	503.45	
2	16			0.00		0.00	0.00	0.00	3,721,475.24	46,976.65			19,682,008.81	7	0.87%	3,283.93		3,017,366.32	503.45	
2	22	17,950,526.80	(414,226.30)	17,536,300.50		17,536,300.50	0.00	17,536,300.50					37,218,309.31	6	0.87%	5,322.73		3,017,366.32	431.52	
2	23			0.00	2,900.00	2,900.00	0.00	2,900.00	3,573,184.56	28,635.52			33,676,660.27	1	0.87%	802.70		3,017,366.32	71.92	
2	28			0.00	7635.45	7,635.45	927,791.10	(920,155.65)			308,289.30		33,064,793.92	5	0.87%	3,940.60		3,017,366.32	359.60	
2	28	17,950,526.80	(414,226.30)	17,536,300.50	4,008.75	17,540,309.25	927,791.10	16,612,518.15	14,033,126.56	206,705.05	308,289.30	22,803.38	33,064,793.92	28		18,593.79	2,816.35	3,017,366.32	2,013.78	
		Contract count for the month was 25,815.			$2,900 Refer to contract. Premium buy down.						$308,289.30 4Q09 Pharmacy Rebate Estimate									
2010																				
Balance fwd.				0.00		0.00	0.00	0.00				18,593.79	33,083,387.71	0	0.82%	0.00	2,013.78	3,019,380.10	0.00	
3	1			0.00		0.00	0.00	0.00					33,083,387.71	1	0.82%	743.24		3,019,380.10	67.83	
3	2			0.00		0.00	0.00	0.00	3,353,805.08	57,625.73			29,787,208.36	1	0.82%	669.19		3,019,380.10	67.83	
3	9			0.00		0.00	0.00	0.00	3,447,560.21	31,808.77			26,371,456.92	7	0.82%	4,147.16		3,019,380.10	474.83	
3	16			0.00		0.00	0.00	0.00	3,162,625.72	25,940.44			23,234,771.64	7	0.82%	3,653.91		3,019,380.10	474.83	
3	23			0.00		0.00	0.00	0.00	3,329,452.16	28,468.48			19,933,787.96	7	0.82%	3,134.79		3,019,380.10	474.83	
3	24	17,949,423.14	(413,084.70)	17,536,338.44		17,536,338.44	0.00	17,536,338.44					37,470,126.40	1	0.82%	841.79		3,019,380.10	67.83	
3	30			0.00		0.00	0.00	0.00	3,429,377.47	43,525.36			34,084,274.29	6	0.82%	4,594.37		3,019,380.10	407.00	
3	31			0.00	2,900.00	2,900.00	927,575.46	(924,675.46)					33,159,598.83	1	0.82%	744.96		3,019,380.10	67.83	
3	31	17,949,423.14	(413,084.70)	17,536,338.44	2,900.00	17,539,238.44	927,575.46	16,611,662.98	16,722,820.64	187,368.78	0.00	18,593.79	33,159,598.83	31		18,529.43	2,013.78	3,019,380.10	2,102.61	
		Contract count for the month was 25,809.			$2,900 Refer to contract. Premium buy down.															
2010																				
Balance fwd.				0.00		0.00	0.00	0.00				18,529.43	33,178,128.26	0	1.04%	0.00	2,102.61	3,021,482.91	0.00	
4	1			0.00	(11,073.32)	(11,073.32)	0.00	(11,073.32)					33,167,054.94	1	1.04%	945.03		3,021,482.91	86.09	
4	6			0.00		0.00	0.00	0.00	3,272,875.16	34,234.49			29,928,414.27	5	1.04%	4,263.77		3,021,482.91	430.46	
4	12			0.00		0.00	0.00	0.00					29,928,414.27	6	1.04%	5,116.53		3,021,482.91	516.55	
4	13			0.00		0.00	0.00	0.00	3,540,610.27	21,463.62			26,409,267.62	1	1.04%	752.48		3,021,482.91	86.09	
4	20			0.00		0.00	0.00	0.00	3,363,293.23	21,361.53			23,067,335.92	7	1.04%	4,600.83		3,021,482.91	602.64	
4	23	17,964,511.08	(415,536.90)	17,548,974.18		17,548,974.18	0.00	17,548,974.18					40,616,310.10	3	1.04%	3,471.86		3,021,482.91	258.27	
4	27			0.00		0.00	0.00	0.00	3,380,130.46	43,320.38			37,279,500.02	4	1.04%	4,248.84		3,021,482.91	344.37	
4	30			0.00	2,900.00	2,900.00	928,330.20	(925,430.20)					36,354,069.82	3	1.04%	3,107.53		3,021,482.91	258.27	
4	30	17,964,511.08	(415,536.90)	17,548,974.18	(8,173.32)	17,540,800.86	928,330.20	16,612,470.66	13,556,909.12	120,360.02	0.00	18,529.43	36,354,069.82	30		26,506.87	2,102.61	3,021,482.91	2,582.74	
		Contract count for the month was 25,830.			$2,900 Refer to contract. Premium buy down.															

NDPERS

Memo

To: NDPERS Board

From: Bryan T. Reinhardt

Date: 6/10/2013

Re: 2012 BCBS Claims Review

Each year we conduct an audit to check the accuracy of BCBS claims processing. On March 19-20th, I was at the BCBS corporate office in Fargo to review a sample of 100 NDPERS claims. A list of the claim specifications is attached. Note that this is not a random sample of all claims, but a select sample from specific areas that we felt needed to be looked at. I focused on claims incurred in the year 2012. BCBS did a good job of having everything ready for me and having staff available to answer my questions and explain the claims payment process. The 2012 BCBS audit resulted in a small number of errors, similar to other recent reviews. These findings are detailed below:

Review Error Findings:

1. A WSI claim was processed incorrectly resulting in a wrong amount applied to a member's deductible ($122.60 should have been $68.88, the claim has been adjusted).

2. A claim did not process correctly. Programming logic for rated surgical codes billed with non-rated surgical codes is not working correctly. BCBS is working on this issue and will adjust the claim when the system is fixed.

All five out of five mammograms, Flu vaccinations, PAP tests, fecal occult tests, and HPV vaccine claims for Gardasil were paid 100% under the screening benefits. Two of the five cholesterol tests, one of the five blood sugar tests, and none of the five PSA tests, and were paid at 100% under the screening benefits. Note that the PSA tests are processed differently. The new screening benefits effective 7/1/09 need the 'routine' or 'preventative' diagnosis, but after the $200 allowance diagnostic procedures will be covered subject to member cost sharing. Note that if an office visit is charged along with the screening benefits, the office visit is not included in the $200 allowance and the member is charged the $25 copayment.

The HDHP claims reviewed had all costs go to deductible except for immunizations.

If you have any questions, I will be available at the Board meeting.

NDPERS 2012 Audit of 1/2012 – present BCBS Claims Processing

1. Blue Shield Chiropractic (2 claims)
2. Blue Cross COB (1 claim)
3. Blue Cross COB (3 with Medicare Member age 65+)
4. Blue Cross COB (3 with Medicare Member age <65)
5. Blue Cross COB (5 with Workers Compensation)
6. Blue Shield COB (3 claims)
7. Blue Shield COB (2 with Medicare)
8. Blue Shield COB (5 with Workers Compensation)
9. Blue Cross Psych (2 claims)
10. Blue Shield Psych (2 claims)
11. Blue Cross CDU (2 claims)
12. Blue Shield CDU (2 claims)
13. Blue Shield PAP (5 claims)
14. Blue Shield Mammograms (5 claims)
15. Blue Shield Fecal Occult Test (5 claims)
16. Blue Shield Cholesterol Screening (5 claims)
17. Blue Shield Blood Sugar Testing (5 claims)
18. Blue Shield PSA Testing (10 claims)
19. Blue Shield Colonoscopy (5 claims)
20. Prescription Drug Formulary (2 claims)
21. Prescription Drug Non-Formulary (2 claims)
22. Prescription Drug for “Gardasil” (HPV drug) (5 claims)
23. Prescription Drug for Flu Vaccine (5 claims)
24. Prescription Drug Medicare Part-D claims (4 claims)
25. Blue Cross 'Denied Experimental' (1 claims)
26. Blue Shield Physical Therapy (2 claims)
27. Claims for Durable Medical Equipment (2 claims)
28. Blue Shield from HDHP member (5 claims)

Total 100 Claims

Medicare Secondary Payer (MSP) Demand Letter & Employer Group

DRAFT ONLY
01-30-06

Medicare sends the MSP Demand Ltr to the Group

Group receives the MSP Demand *(Attachment 1)*

Group verifies the Employee's group coverage for dates specified within the Demand Letter and/or whether it is their employee

NO

Employer group responds to Medicare on Group Letterhead with Coverage information (Medicare will not accept a response regarding Coverage information from BCBSND -this needs to come from the group) *(Attachment 2)*

Medicare receives letter and determines whether or not to accept or decline the response

*Medicare ACCEPTS response from employer group; Medicare then sends closure letter directly to the employer group *(Attachment 3)*

CASE CLOSED

Medicare does NOT ACCEPT response from group; Medicare then sends a letter advising the group on reasons for non-acceptance *(Attachment 4)*

Group then forwards copy of their response sent to Medicare along with the denial letter received and the group authorization letter to allow BCBSND to further research on behalf of the group

YES

Group completes Authorization Ltr and Coverage Ltr forms along with the Complete Demand Letter/ case which is then mailed to BCBSND to the attention of Claims Research OR fax to 1-866-280-0091 to the attention of Claims Research

BCBSND receives Authorization Ltr and Coverage Ltr and Researches the case further

Once research is complete, BCBSND may need to process claims (checks cut to Medicare and/or provider) to complete the case

BCBSND responds in writing to Medicare (indicating check enclosed;EOBs enclosed, coverage information, etc.) *(Attachment 5)*

BCBSND sends group a notification letter advising that the case was researched and responded back to Medicare. Marketing Representative is also carbon copied *(Attachment 6)*

Medicare receives BCBSND's response letter and determines whether to accept or decline the response

Medicare ACCEPTS our Rebuttal/ Defense/Response

Medicare sends closure letter directly to the employer group and BCBSND (authorization is in place to receive from Medicare) *(Attachment 7)*

CASE CLOSED

Medicare does NOT ACCEPT response from BCBSND; a letter will be sent from Medicare to the group and BCBSND advising on reasons for non-acceptance *(Attachment 8)*

Depending on reasons for denial; the group or BCBSND researches further and responds back to Medicare

***NOTE:**
If employer group does not complete the Authorization/ coverage letter and send to BCBSND, then Medicare does not include BCBSND in any communications when sending information back to the groups.

NOTE:
If cases are not resolved in a timely manner; Medicare will apply Interest Owed which will accrue monthly.
Employer Groups should review the MSP Summary Data Sheet included in the Original Demand packet.
(Attachment 9)

NOTE:
If Noridian Administrative Services is the Medicare Contractor, BCBSND is typically carbon copied on the Demand Letter

NOTE:
The case can be sent onto Collections at anytime during this process; which it is then the group's responsibility to work directly with the Collection Agency in resolving

NDPERS Plan Options for 2015-2017

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NORTH DAKOTA PUBLIC EMPLOYEES RETIREMENT SYSTEM

ND

Blue Cross Blue Shield of North Dakota is an independent licensee of the Blue Cross & Blue Shield Association

Noridian Mutual Insurance Company

Cost Impacts 7-1-2015

Estimated
Percentage Change

Total Cost Impact if NDPERS loses Grandfathered Status* (incl. Rewrite) XXX%

***Further discussion and analysis is needed on the impact of the loss of small non-grandfathered political subs.**

Preventive @ 100%

- Infants & Children
- Adult/Adolescent (includes colorectal cancer screenings)
- Pregnant Women
- Men's Preventive Services
- Women's Preventive Services (includes contraception)

Rewrite Items required to be added:

1) Out of Pocket Maximum Accumulation (Non-Grandfathered PPO plans only)

- All cost shares have to accumulate to the out of pocket maximum.
- Deductible, Coinsurance, Copayments, Rx Copayments & Rx Coinsurance
- New out of pocket maximum amount - to account for the summed up cost shares

2) Removal of waiting periods for late enrollees (Non-Grandfathered)

3) Language Changes (no cost impact)

Total Cost Impact to NDPERS to add Rewrite (Status Quo - Retain Grandfathered Status)

Out of Pocket Maximum Accumulation & Removal of waiting periods for late enrollees

Non Grandfathered PPO **XXX%**

Removal of waiting periods for late enrollees

Grandfathered PPO **XXX%**

Non Grandfathered Plans HDHP **XXX%**

Options - while retaining Grandfathered Status

Prescription Drugs

Estimated PPO Percentage Change

1.1) Annual Premium Reduction to change RX Formulary Generic Copay ***XXX%***

From $5 copay to $10 copay

Rationale:

- Increase cost-sharing to adjust for inflation within this all categories
- Effect is due to a small change on a large volume claims

Plan Year	Generic Formulary Benefit Design
2011	**$5 Copay** plus 15% Co-insurance
2012	**$5 Copay** plus 15% Co-insurance
2013	**$5 Copay** plus 15% Co-insurance
Proposed*	**$10 Copay** plus 15% Co-insurance

**reflects re-pricing of 2013 claims at proposed benefit design*

1.2) Annual Premium Reductions to change RX Formulary Brand copay ***XXX%***

From $20 to $25 copay

Rationale:

- Increase cost-sharing to adjust for inflation of 51% in the Brand Formulary category since 2011.
- Effect is limited due to lower volumes, adjustment allowed on higher average claim amounts

Plan Year	Brand Formulary Benefit Design
2011	**$20 Copay** plus 25% Co-insurance
2012	**$20 Copay** plus 25% Co-insurance
2013	**$20 Copay** plus 25% Co-insurance
Proposed*	**$25 Copay** plus 25% Co-insurance

*******reflects re-pricing of 2013 claims at proposed benefit design*

Options - while retaining Grandfathered Status

Estimated PPO
Percentage Change

1.3) Annual Premium Reduction to change RX Non-Formulary Copay ***XXX%***

From $25 copay to $30 copay

Rationale:

- Cost shares are intended to steer towards generic and formulary (preferred) brands
- Maximum shift has smaller effect on this high dollar but low volume category

Plan Year	Brand Non-Formulary Benefit Design
2011	**$25 Copay** plus 50% Sanction
2012	**$25 Copay** plus 50% Sanction
2013	**$25 Copay** plus 50% Sanction
Proposed*	**$30 Copay** plus 50% Sanction

**reflects re-pricing of 2013 claims at proposed benefit design*

1.4) Annual Premium Reductions to change RX Formulary coinsurance maximum ***XXX%***

From $1000 coinsurance to $1200 coinsurance

Rationale:

- Co-insurance maximum adjustment is from $1,000 to $1,200 is allowed
- Increasing maximum helps adjust for inflation and specialty drug trends and projections

Benefit Design Strategy
Current Benefit design
Proposed Copays @$1000 Co-Insurance Max
Current Copays @ $1,200 Co-Insurance Max
Proposed Copays @$1200 Co-Insurance Max

Options - while retaining Grandfathered Status

Copayments

Estimated PPO Percentage Change

2) Annual Premium Reduction to increase emergency room copay: ***XXX%***

From $50 copay to $60 copay

Rationale:

- Provides an opportunity for better consumerism.
- Increasing copay from $50 to $60 is still well below the BCBSND standard of $75.

3) Annual Premium Reduction to increase office visit copay ***XXX%***

From $25 copay to $30 copay

Rationale:

- NDPERS rate per service is considerably higher than BCBSND BoB
- Most BCBSND BoB plans have a coinsurance also tied to the office visit
- $5 increase is a minimal increase to the member but significant for the NDPERS plan

Options - while retaining Grandfathered Status

Additional Options

Estimated PPO Percentage Change

- ***Annual Premium Reductions to change deductible:***

From $400 single/$1200 family to $425 single/$1275 family	***XXX%***
From $400 single/$1200 family to $450 single/$1350 family	***XXX%***
From $400 single/$1200 family to $500 single/$1500 family	***XXX%***

Rationale for NOT making this change at this time:

- NDPERS plan could make partial increases during 2015-2017 biennium as needed financially or save for the 2017-2019 biennium
- We feel it would be better to let the deductible build based on ACA guidelines and retaining Grandfather status
- 2013 Medical CPI numbers are not readily available. Limits above may continue to expand as new numbers are made available.

- ***Annual Premium Reductions to change coinsurance maximum:***

From $750/$1500 to $825/$1650 IN and $1250/$2500 to $1375/$2750 OON	***XXX%***
From $750/$1500 to $900/$1800 IN and $1250/$2500 to $1500/$3000 OON	***XXX%***

Rationale for NOT making change at this time:

- We feel this is better to let build based on ACA guidelines and retaining Grandfather status
- 2013 Medical CPI numbers are not readily available. Limits above may continue to expand as new numbers are made available.

- ***Add 5% Employee Contribution to Premium***

This would not impact actual premium but would reduce NDPERS premium expense.

Options - while retaining Grandfathered Status

Additional Options

Estimated PPO Percentage Change

- **Add Colorectal Cancer Screenings @ 100% beginning at age 50** — ***XXX% (Grandfathered)***

Rationale:

- Studies have shown that health promotion and disease prevention programs improve employee health and productivity and reduce long-term health care costs
- Survey results showed that Cost was the number one factor in deterring members from having a colorectal cancer screening
- This is a benefit increase therefore does not impact Grandfathered status

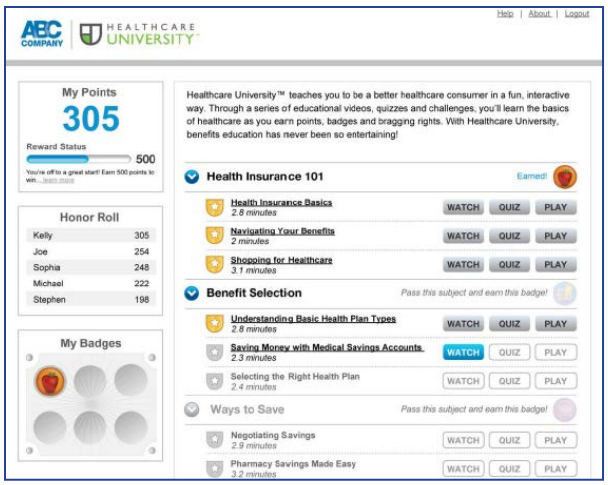
Estimated Percentage Change

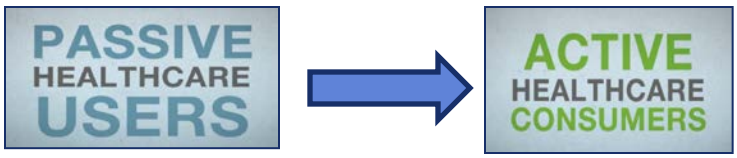
- ***Gamification System –Healthcare University*** — ***XXX% (GF, NGF, & Medicare)***

Targeted to Subscriber & Spouse

Functionality:

- Gamified Benefits Education platform that educates consumers on topics from healthcare basics to consumerism
- Makes healthcare benefits education fun, easy and impactful through the use of videos, quizzes, interactive games and game mechanics (points, badges, leaderboards, etc.)
- Integration into the HealthyBlue system
- Curriculum Includes:
  - Health Insurance 101
  - Benefits Selection
  - Ways to Save
- Multi-format Delivery
  - Videos, quizzes, games
  - Booklets for print
- Additional Benefits
  - Multilingual Support
  - Member Behavior Reporting





Summary

Options

	Estimated PPO Percentage Change
➢ ***Annual Premium Reduction to change RX Formulary Generic Copay*** From $5 copay to $10 copay	***XXX%***
➢ ***Annual Premium Reductions to change RX Formulary Brand copay*** From $20 to $25 copay	***XXX%***
➢ ***Annual Premium Reduction to increase RX Non-Formulary Copay*** From $25 copay to $30 copay	***XXX%***
➢ ***Annual Premium Reductions to increase RX Formulary coinsurance maximum*** From $1000 coinsurance to $1200 coinsurance	***XXX%***
➢ ***Annual Premium Reduction to increase emergency room copay:*** From $50 copay to $60 copay	***XXX%***
➢ ***Annual Premium Reduction to increase office visit copay*** From $25 copay to $30 copay	***XXX%***
➢ ***Annual Premium Reductions to change deductible:***	
From $400 single/$1200 family to $425 single/$1275 family	***XXX%***
From $400 single/$1200 family to $450 single/$1350 family	***XXX%***
From $400 single/$1200 family to $500 single/$1500 family	***XXX%***
➢ ***Annual Premium Reductions to change coinsurance maximum:***	
From $750/$1500 to $825/$1650 IN and $1250/$2500 t0 $1375/$2750 OON	***XXX%***
From $750/$1500 to $900/$1800 IN and $1250/$2500 to $1500/$3000 OON	***XXX%***
➢ ***Add 5% Employee Contribution to Premium***	
➢ ***Add Colorectal Cancer Screenings @ 100% beginning at age 50)***	***XXX% (Grandfathered)***

	Estimated Percentage Change
➢ ***Add Gamification System –Healthcare University***	***XXX%***

192-2013-17

MEMORANDUM OF UNDERSTANDING

TOBACCO CESSATION PROGRAM

THIS TOBACCO CESSATION PROGRAM AGREEMENT (TCP Agreement), is entered into this 1st day of July, 2013, by and between the North Dakota Public Employees Retirement System (NDPERS), a public agency created under North Dakota state law, and Blue Cross Blue Shield of North Dakota (BCBSND), a North Dakota nonprofit mutual insurance company, located at 4510 13th Avenue South, Fargo, North Dakota.

RECITATIONS:

WHEREAS, the state of North Dakota, acting through the Department of Health, has received an appropriation from the state legislature in the amount of $80,000 for the purpose of funding employee tobacco education and cessation programs for state employees; and

WHEREAS, as it relates to this appropriation, the Department of Health has determined that NDPERS is to sponsor this tobacco cessation program based on its responsibilities related to the management of the group health plan and the program objectives for monitoring and containing health care; and

WHEREAS, because BCBSND is contracted with NDPERS to provide health care benefits to NDPERS Members (as defined by the Administrative Services Agreement between NDPERS and BCBSND) (ASA Agreement), NDPERS has determined that BCBSND is to act as the administrator of the tobacco cessation program.

NOW, WHEREFORE, in recognition of the mutual promises herein contained and for other good and valuable consideration hereby acknowledged by the parties hereto, NDPERS and BCBSND agree to the following.

I. RECOGNIZING THE TOBACCO CESSATION PROGRAM.

BCBSND acknowledges and agrees that it has reviewed the tobacco cessation program grant documents and that the program as outlined in the grant documents provides services consistent with the wellness initiative reflected in the Administrative Services Agreement between BCBSND and NDPERS.

II. TERM.

This TCP Agreement shall begin on July 1, 2013, and shall extend to June 30, 2015.

III. SCOPE OF PROGRAM.

The tobacco cessation program as outlined in this TCP Agreement shall be made available to state employees and their eligible family members that are at least 18 years of age. An estimate of the total number of eligible employees and family members and those anticipated will participate are outlined in the grant documents.

IV. BENEFITS AVAILABLE. Tobacco Cessation Benefits

pursuant to this TCP Agreement are as follows:

- $200.00 per Member/per Benefit Period for Department of Health approved counseling services if the provider charges for these services.
- $500.00 per Member/per Benefit Period for office visit, prescription drugs and over-the-counter drugs prescribed for tobacco cessation.
- $700.00 is the total amount of expenses available per Member/per Benefit Period under the program.

Each participant is eligible to participate in the tobacco cessation program for a maximum benefit of $700.00 for each 6-month period under the term of this TCP Agreement.

All funds shall be billed by and paid directly to BCBSND. NDPERS will not charge any fees to the tobacco cessation program nor will it administer any funds for the program.

BCBSND shall reimburse providers monthly based on the paper billings submitted by those providers. BCBSND will then submit the total claims received for reimbursement to the Department of Health on a monthly basis. The final invoice for services shall be submitted to the Department of Health no later than July 15, 2015. Funds shall be allocated on a first come first serve basis until all available funds are exhausted. Reimbursement shall be made to BCBSND on a monthly basis based on actual costs accrued by local providers for services provided to eligible state employees and family members plus the administrative fee paid to BCBSND up to a total maximum amount of $80,000.00.

A Member is eligible to participate in the tobacco cessation program during each of four separate benefit periods as follows:

07/01/2013 through 12/31/2013
01/01/2014 through 06/30/2014
07/01/2014 through 12/31/2014
01/01/2015 through 06/30/2015

The tobacco cessation program shall provide a combination of counseling to include initial assessment, physician office visit, nicotine replacement therapy, and prescription medication, if indicated, and follow-up support counseling as necessary by individual, group or telephone.

Re-treatment shall be made available within 6 months and will be the responsibility of the counseling program with reimbursement available on the same basis as during any initial treatment phase.

V. FEES.

As a result of the responsibilities assigned to BCBSND under the terms of the grant documents and this TCP Agreement, BCBSND shall be paid an administrative fee for administering the tobacco cessation program that shall be equal to nine percent (9%) of claims paid to providers to pay costs incurred by BCBSND as program administrator and granting entity. For example, if total claims submitted by the providers are $60,000.00, BCBSND will add a 9% administration fee for a total of $5,400.00.

VI. REPORTING.

BCBSND agrees to provide the following reports:

- Track each patient receiving therapy and level of therapy based on claims data.
- Report every six months to the NDPERS and Department of Health program results and participation rates.
- Work with an independent outside evaluator to evaluate program. Any administrative costs associated with collaborating with the outside consultant in evaluating the program would be borne by the program.

VII. OTHER TERMS AND CONDITIONS.

The parties to this TCP Agreement acknowledge, understand and agree that the terms of the grant award and grant documents in place between the Department of Health, NDPERS and BCBSND, including but not limited to terms that specifically relate to the administration, cancellation, termination and payment terms are hereby incorporated into this TCP Agreement and applicable to this TCP Agreement related to the tobacco cessation program as if fully incorporated herein.

Moreover, the parties acknowledge, understand and agree that the fees and charges provisions of the Administrative Services Agreement currently existing between the parties, including fees set forth for various wellness programs as approved and funded, are subject to specific funding provisions as set forth between the parties and as available, and are not subject to the final accounting provisions contained in the Administrative Services Agreement.

VIII. GENERAL PROVISIONS.

The following general conditions, covenants and obligations apply equally to both NDPERS and BCBSND under the terms of this TCP Agreement.

Time is of the Essence. Time is of the essence of each provision of this entire TCP Agreement and all of its terms and conditions.

Notice. Any notice required or permitted under the terms of this TCP Agreement shall, in all cases, be construed under the notice provision in the ASA Agreement.

Assignment. No party may assign this TCP Agreement, or any of the obligations or duties mandated under the terms of this TCP Agreement, without the prior written consent of the other parties hereto.

Waiver. No delay or omission by any party to exercise any right or power under the terms of this TCP Agreement shall preclude the exercise of such right or power in subsequent instances or be construed to be a waiver thereof. A waiver by any party hereto of any of the covenants to be performed by any other party shall not be construed to be a waiver of any covenant herein contained, and the waiver of any breach of covenant shall not be construed to be a waiver of any succeeding breach thereof.

Modification. Any modification of this TCP Agreement or additional obligations assumed by any party in connection with this TCP Agreement shall be binding only if evidenced in writing and signed by each party or an authorized representative of each party hereto.

Counterparts. This TCP Agreement may be executed in any number of counterparts, each of which shall be deemed to be an original, but all of which together shall constitute but one and the same instrument.

Recitals and Paragraph Headings. The recitals to this TCP Agreement are deemed to be an expression of the intent of the parties hereto, and to the extent the recitals create any duties for or obligations on the parties to this TCP Agreement, such recitals are deemed to be a part of the TCP Agreement. The titles to the paragraphs of this TCP Agreement are solely for the convenience of the parties and shall not be used to explain, modify, simplify or aid in the interpretation of this TCP Agreement.

Binding Effect. This TCP Agreement is binding on the parties hereto, and to their successors and assigns, including any parent or subsidiary corporation.

IN WITNESS WHEREOF, the parties hereto by their duly authorized representatives have executed this TCP Agreement as of the date first written above.

NORTH DAKOTA PUBLIC EMPLOYEES RETIREMENT SYSTEM (NDPERS)
PO Box 1657
Bismarck, ND 55416

By _____

Title Chairman

BLUE CROSS BLUE SHIELD OF NORTH DAKOTA (BCBSND)
4510 13th Avenue South
Fargo, ND 58121-0001

By Paul von Eleu

Title President & CEO

PHARMACY DISEASE MANAGEMENT PROGRAM AGREEMENT

THIS PHARMACY DISEASE MANAGEMENT PROGRAM AGREEMENT (PDM Agreement), is entered into this 1st day of July, 2013, by and between the North Dakota Public Employees Retirement System (NDPERS), a public agency created under North Dakota state law, and Blue Cross Blue Shield of North Dakota (BCBSND), a North Dakota nonprofit mutual insurance company, located at 4510 13th Avenue South, Fargo, North Dakota.

RECITATIONS:

WHEREAS, during the 2007 North Dakota legislative session, House Bill 1433 was passed and enacted into law, creating N.D.C.C. § 54-52.1-17. N.D.C.C. § 54-52.1-17 allows pharmacists and other qualified North Dakota health care providers to provide "disease state management" (DSM) to North Dakota public employees that suffer from chronic diseases and specifically have diabetes; and

WHEREAS, The North Dakota Pharmacy Service Corporation wants to offer a disease state management program of diabetes through delivery of services and support to individual North Dakota public employees (NDPERS Members) that have a chronic disease identified as diabetes (Type 1 or Type 2). To this end, the North Dakota Pharmacy Service Corporation desires to implement a program to increase access to health care, redefine how services are delivered, increase the participants' knowledgebase regarding their disease, increase the quality of life for participants, improve overall health status and medication adherence for their participants, and reduce health care costs on multiple levels for numerous interest groups; and

WHEREAS, the North Dakota Pharmacy Service Corporation in collaboration with the North Dakota Pharmacists Association, the North Dakota Society of Health-System Pharmacists, and North Dakota State University College of Pharmacy, Nursing and Allied Sciences, proposed an acting model to extend such disease management program to NDPERS Members; and

WHEREAS, NDPERS is interested in offering the services proposed by the acting model to NDPERS Members and reimbursing the North Dakota Pharmacy Service Corporation for the costs of administering this program out of the NDPERS reserve fund currently held in trust by BCBSND; and

WHEREAS, as it relates to this acting model diabetes disease management program, NDPERS is desirous of entering into this PDM Agreement to sponsor and extend the disease management program with BCBSND to administer certain facets of the program on behalf of NDPERS, including certain reporting requirements, program promotion, and cost reconciliation for the administration of the program based on the responsibilities of BCBSND in relation to its management of the NDPERS group health plan and the program objectives for monitoring and containing health care; and

WHEREAS, because BCBSND is contracted with NDPERS to provide health care benefits to NDPERS Members (as defined by the Administrative Services Agreement between NDPERS and BCBSND) (ASA Agreement), NDPERS has determined that BCBSND is best positioned to act as its agent in the administration of the diabetes disease management program.

NOW, WHEREFORE, in recognition of the mutual promises herein contained and for other good and valuable consideration hereby acknowledged by the parties hereto, NDPERS and BCBSND agree to the following.

I RECOGNIZING THE PHARMACY DISEASE MANAGEMENT PROGRAM.

BCBSND acknowledges and agrees that it has reviewed the diabetes disease management program established through N.D.C.C. § 54-52.1-17 and that the program as outlined provides services consistent with the wellness initiative reflected in the Administrative Services Agreement between BCBSND and NDPERS. BCBSND and NDPERS agree to extend the program through the term of this PDM Agreement.

II TERM.

This PDM Agreement shall begin on July 1, 2013, and shall extend to June 30, 2015.

III. SCOPE OF PROGRAM.

The duties and responsibilities of BCBSND in furtherance of the diabetes disease management program as outlined in this PDM Agreement shall be limited in nature as specifically set forth herein.

IV. FEES.

As a result of the responsibilities assigned to BCBSND under the terms of this PDM Agreement, BCBSND shall be paid a program promotion fee equal to its actual costs for its development and implementation of a plan to promote the diabetes disease management program contemplated through this PDM Agreement.

V. REPORTING. BCBSND agrees to provide the following reports:

A. Covered Drug List. A covered drug list with established criteria related to drugs by class.

B. NDPERS Member Eligibility List. A database to identify those NDPERS Members who appear to be eligible for the diabetes disease management program based on criteria developed and provided by NDPERS and/or its vendor, and on a monthly basis track those NDPERS Members eligible for the diabetes disease management program during the term of this PDM Agreement.

C. Co-Pay Report. A quarterly co-pay report that NDPERS and/or its vendor can use to reconcile appropriate co-pays incurred by eligible NDPERS Members to facilitate incentive payments under the diabetes disease management program, including coinsurance for diabetic testing supplies. BCBSND agrees to work with NDPERS to develop a reporting format that can be used by NDPERS and/or its vendor in administering the diabetes disease management program.

VI. PROMOTION.

Upon request and subject to approval by the NDPERS Board of Directors, BCBSND will provide promotional support for the diabetes disease management program services which may include but not be limited to agency notes, paycheck stuffers, e-mail notices, posters, and notices to home addresses to be distributed at periodic intervals throughout the term of this PDM Agreement. BCBSND shall be reimbursed its costs for these promotional activities and materials.

VII. PAYMENT RECONCILIATION.

Program costs such as provider payments, copay/coinsurance reimbursements and promotional charges are funded through the NDPERS cash reserve account maintained by BCBSND after authorization from NDPERS.

VIII. OTHER TERMS AND CONDITIONS.

The parties to this PDM Agreement acknowledge, understand and agree that the terms of the Administrative Services Agreement in place between NDPERS and BCBSND, including but not limited to terms that specifically relate to the administration, cancellation, termination and payment terms, are hereby incorporated into this PDM Agreement and applicable to this PDM Agreement related to the diabetes disease management program as if fully incorporated herein. This agreement is subject to specific funding provisions as set forth between the parties and as available, and are not subject to the final accounting provisions contained in the Administrative Services Agreement.

IX. GENERAL PROVISIONS.

The following general conditions, covenants and obligations apply equally to both NDPERS and BCBSND under the terms of this PDM Agreement.

Time is of the Essence. Time is of the essence of each provision of this entire PDM Agreement and all of its terms and conditions.

Notice. Any notice required or permitted under the terms of this PDM Agreement shall, in all cases, be construed under the notice provision in the ASA Agreement.

Assignment. No party may assign this PDM Agreement, or any of the obligations or duties mandated under the terms of this PDM Agreement, without the prior written consent of the other parties hereto.

Waiver. No delay or omission by any party to exercise any right or power under the terms of this PDM Agreement shall preclude the exercise of such right or power in subsequent instances or be construed to be a waiver thereof. A waiver by any party hereto of any of the covenants to be performed by any other party shall not be construed to be a waiver of any covenant herein contained, and the waiver of any breach of covenant shall not be construed to be a waiver of any succeeding breach thereof.

Modification. Any modification of this PDM Agreement or additional obligations assumed by any party in connection with this PDM Agreement shall be binding only if evidenced in writing and signed by each party or an authorized representative of each party hereto.

Counterparts. This PDM Agreement may be executed in any number of counterparts, each of which shall be deemed to be an original, but all of which together shall constitute but one and the same

instrument.

Recitals and Paragraph Headings. The recitals to this PDM Agreement are deemed to be an expression of the intent of the parties hereto, and to the extent the recitals create any duties for or obligations on the parties to this PDM Agreement, such recitals are deemed to be a part of the PDM Agreement. The titles to the paragraphs of this PDM Agreement are solely for the convenience of the parties and shall not be used to explain, modify, simplify or aid in the interpretation of this PDM Agreement.

Binding Effect. This PDM Agreement is binding on the parties hereto, and to their successors and assigns, including any parent or subsidiary corporation.

IN WITNESS WHEREOF, the parties hereto by their duly authorized representatives have executed this PDM Agreement as of the date first written above.

NORTH DAKOTA PUBLIC EMPLOYEES RETIREMENT SYSTEM (NDPERS)
PO Box 1657
Bismarck, ND

By _____

Title Chairman

BLUE CROSS BLUE SHIELD OF NORTH DAKOTA (BCBSND)
4510 13th Avenue South
Fargo, ND 58121-0001

By Paul von Elm

Title President & CEO

NDPERS WELLNESS BENEFIT PROGRAM AGREEMENT

THIS NDPERS WELLNESS BENEFIT PROGRAM AGREEMENT (Wellness Agreement), is entered into this 1st day of July, 2013, by and between the North Dakota Public Employees Retirement System (NDPERS), a public agency created under North Dakota state law, and Blue Cross Blue Shield of North Dakota (BCBSND), a North Dakota nonprofit mutual insurance company, located at 4510 13th Avenue South, Fargo, North Dakota.

RECITATIONS:

WHEREAS, the state of North Dakota, acting through NDPERS, and BCBSND, in an effort to create healthier lifestyles for NDPERS Members (as defined by the Administrative Services Agreement between the parties) (ASA Agreement) and to help contain health care costs, desire to promote, support and sponsor health and wellness initiatives; and

WHEREAS, pursuant to this Wellness Agreement, NDPERS and BCBSND have agreed to establish a Wellness Benefit Program related to health and wellness promotion for NDPERS Members subject to this Wellness Agreement; and

WHEREAS, the Wellness Benefit Program created through this Wellness Agreement between BCBSND and NDPERS anticipates there will be costs and fees associated with supporting such health and wellness programs provided to NDPERS Members and to be administered through this agreement with BCBSND.

NOW, WHEREFORE, in recognition of the mutual promises herein contained and for other good and valuable consideration hereby acknowledged by the parties hereto, NDPERS and BCBSND agree to the following.

I TERM.

The Wellness Benefit Program shall be effective from July 1, 2013 through June 30, 2015.

II. FUNDING.

The parties acknowledge, understand and agree that funding for the benefits and services extended through this Wellness Agreement shall be taken from the NDPERS cash reserve account maintained by BCBSND.

NDPERS agrees to pay costs associated with the benefits and services extended under this Wellness Agreement to BCBSND.

Program-related activities will be reimbursed based on the following schedule:

Calculation 1: 100% of the first $500 or actual program expenses, whichever is less, plus 75% of actual expenses in excess of $500 to a maximum benefit of $1,000

OR

Calculation 2: $2.00 multiplied by the number of contracts

The Wellness Committee will use the calculation that provides the best benefit to the state agency or political subdivision based on actual program expenses. The state agency or political subdivision will be responsible for expenses that exceed the maximum benefit allowed under either calculation method.

The parties acknowledge, understand and agree that the terms of the Administrative Services Agreement in place between NDPERS and BCBSND, including but not limited to terms that specifically relate to the administration, cancellation, termination are hereby incorporated into this Wellness Agreement and applicable to this Wellness Agreement as if fully incorporated herein except that the fees and charges provisions of the ASA Agreement currently existing between the parties, including fees set forth for various wellness programs as approved and funded, are subject to specific funding provisions as set forth between the parties and as available, and are not subject to the final accounting provisions contained in the Administrative Services Agreement.

III. OTHER TERMS AND CONDITIONS.

Applications for approval of benefits and services under the Wellness Benefit Program shall be submitted to the Bismarck NDPERS office to the attention of the Wellness Benefit Program Manager by each agency interested in establishing such a program.

A Wellness Committee shall be established to review any such applications submitted. The Wellness Committee shall be comprised of: two (2) NDPERS staff members, and one (1) BCBSND staff member. Upon appointment, the Wellness Committee shall establish criteria to ensure a uniform basis upon which it may grant or deny each agency application. Wellness benefits or healthy lifestyle programs, such as smoking cessation, nutrition, exercise, stress management, weight control, wellness education and the number of people affected by each program will be taken into consideration and shall be part of the criteria established by the Wellness Committee.

The applying agency will be notified by the Wellness Committee within thirty (30) days of application of the approval or denial of the proposed program.

Funds may either be distributed directly to the applying agency or, preferably, paid directly to the vendor providing said service or facilitating said Wellness Benefit Program.

All funds distributed shall be for Wellness Benefit Programs completed within the current 2013-2015 biennium budget.

Funds are available for agency group activities only and will not be available to specific individuals or to fund specific individual memberships in diet programs or health, athletic or fitness clubs.

Applying agencies that receive funds for a Wellness Benefit Program are required to submit to the Wellness Committee an evaluation of the sponsored program after its completion. The Wellness Committee will communicate an outline of the program funded and an evaluation of said program to

all state agencies and encourage participation in those programs showing positive results in wellness and healthy lifestyle habits.

IV. GENERAL PROVISIONS.

The following general conditions, covenants and obligations apply equally to both NDPERS and BCBSND under the terms of this Wellness Agreement.

Time is of the Essence. Time is of the essence of each provision of this entire Wellness Agreement and all of its terms and conditions.

Notice. Any notice required or permitted under the terms of this Wellness Agreement shall, in all cases, be construed under the notice provision in the ASA Agreement.

Assignment. No party may assign this Wellness Agreement, or any of the obligations or duties mandated under the terms of this Wellness Agreement, without the prior written consent of the other parties hereto.

Waiver. No delay or omission by any party to exercise any right or power under the terms of this Wellness Agreement shall preclude the exercise of such right or power in subsequent instances or be construed to be a waiver thereof. A waiver by any party hereto of any of the covenants to be performed by any other party shall not be construed to be a waiver of any covenant herein contained, and the waiver of any breach of covenant shall not be construed to be a waiver of any succeeding breach thereof.

Modification. Any modification of this Wellness Agreement or additional obligations assumed by any party in connection with this Wellness Agreement shall be binding only if evidenced in writing and signed by each party or an authorized representative of each party hereto.

Counterparts. This Wellness Agreement may be executed in any number of counterparts, each of which shall be deemed to be an original, but all of which together shall constitute but one and the same instrument.

Recitals and Paragraph Headings. The recitals to this Wellness Agreement are deemed to be an expression of the intent of the parties hereto, and to the extent the recitals create any duties for or obligations on the parties to this Wellness Agreement, such recitals are deemed to be a part of the Wellness Agreement. The titles to the paragraphs of this Wellness Agreement are solely for the convenience of the parties and shall not be used to explain, modify, simplify or aid in the interpretation of this Wellness Agreement.

Binding Effect. This Wellness Agreement is binding on the parties hereto, and to their successors and assigns, including any parent or subsidiary corporation.

IN WITNESS WHEREOF, the parties hereto by their duly authorized representatives have executed this Wellness Agreement as of the date first written above.

BLUE CROSS BLUE SHIELD OF ND

By Paul von Ehlen

Title President & CEO

NORTH DAKOTA PUBLIC EMPLOYEES
RETIREMENT SYSTEM (NDPERS)
PO BOX 1657
BISMARCK, ND 55416

By

Title Chairman

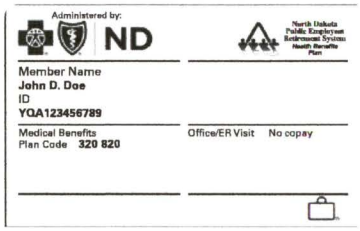
NDPERS Wellness Program Voucher

Last Name: | | | | | | | | | | | | | | |

First Name: | | | | | | | | | | | | | | |

Birth date: | | | - | | | - | | | | |
M M D D C C Y Y

Benefit Plan Number
(found on BCBSND ID Card) | Y | Q | A | | | | | | | | | |



Failure to complete form with information as it appears on your card may result in forfeited points.
Please note: points will be credited to your account on the HealthyBlue site.

Event Code & Point Value
(to be completed by Wellness Coordinator)

☐ Program 1 (1500 points) ☐ Program 2 (3000 points) ☐ Program 4 (6000 points)

Event date: | | | - | | | - | | | | |
M M D D C C Y Y

Print Coordinator Name: _____

Agency Name: _____ Group Number: | x | x | x | x | x | x | x |

NDPERS Members Complete Sochi Fitness Challenge

More than 1,000 NDPERS members participated in the Walk to Sochi fitness challenge through HealthyBlue. They logged approximately 71,400 miles, which is enough to walk to Sochi, Russia and back to North Dakota—six times!

The challenge ran from Jan. 20 through Feb. 10 and was open to NDPERS members registered in HealthyBlue. Participants who registered and logged steps earned 300 HealthyBlue points.

NDPERS Wellness
building healthy members

ND

NDPERS Wellness Star - Dimensions of Wellness

Occupational Wellness – the ability to feel self-satisfaction and/or personal fulfillment through our chosen career path or job.

Community Wellness – the ability to positively impact people, environment, and culture surrounding oneself.

Emotional/Intellectual – the ability to understand and cope with challenges and new ideas.

Physical Activity – the ability to implement healthy habits that increase prolonged physical or mental efforts.

Nutrition – the ability to maintain a healthy eating habit.

Proactive Prevention – the ability to actively pursue activities that contribute to the early detection and prevention of life threatening diseases.

NDPERS Wellness
building healthy members

Wellness Star Criteria

ND

Dimension of Health (Circle all that apply – 1 point each)

Occupational Community Emotional/Intellectual Physical Activity Nutritional Proactive Prevention
(See additional attachment for more details)

Comments: TOTAL = _____

Areas of rating:

Duration – length at which individual has committed to healthier lifestyle: (Circle point value)

0 – 6 mths	6mths – 1 year	1 year+	
(1 point)	(2 points)	(3 points)	TOTAL = _____

Comments:

Diversification – how well individual has committed to comprehensive wellness activities: (Circle point value)

1 – 2 activities	3 – 4 activities	5+ activities	
(1 point)	(2 points)	(3 points)	TOTAL = _____

Comments:

Inspiring others – how individual has inspired or encouraged others to a healthier lifestyle: (Circle point value)

Somewhat	Above Average	Excellent	
(1 point)	(2 points)	(3 points)	TOTAL = _____

Comments:

Other – use space to define areas of mention or consideration: (Circle point value)

(1 point) (2 points) (3 points) (4 points) (5 points) TOTAL = _____

Comments:

OVERALL TOTAL = _____

Initials of Grader= _____

NORTH DAKOTA
PUBLIC EMPLOYEES
RETIREMENT SYSTEM

Everyday choices make a big impact.

Blue Cross Blue Shield of North Dakota is an independent licensee of the Blue Cross Blue Shield Association

Noridian Mutual Insurance Company

NDPERS Wellness
building healthy members

Coordinator Newsletter

Volume 4, Issue 9
June 2014

Prevention, it's still the best medicine

Research shows that improving personal health habits can help prevent heart disease, cancer, stroke, injuries and other painful and costly conditions. Preventable diseases are taking a serious toll on our nation's health and health care system—robbing us of our quality of life and driving up costs.

Eating right, staying active, getting checkups, not smoking and using all the preventive benefits in your health plan are just a few examples of habits that can help you stay healthy and live longer.

- **Eat right and exercise.** Good nutrition and physical activity are essential to overall health, and can boost your brain as well as your brawn. Together, they give you energy, help you maintain a healthy weight, improve your mood and mental sharpness, and lower the risk of developing serious conditions like high blood pressure, high cholesterol, diabetes, heart disease and cancer.
  - Aim to fill half of your plate with fruits and vegetables. The rest of your plate should contain whole grains, lean meats and fish and calcium-rich foods. Avoid excessive amounts of salt, sugar and fats.
  - Try to exercise 30 minutes a day, five days a week.
- **Don't skimp on sleep.** Sleep makes you feel and function better and has many other physical and mental health benefits. Adults who get at least seven hours of quality sleep a night help protect themselves from the risk of heart disease, infections and obesity.
- **Kick bad habits.** Smoking and abusing alcohol or other drugs are high on the list of unhealthy habits that can cause serious medical problems.
- **Schedule annual exams.** Routine physicals and screenings help you stay on top of your health and catch problems early—before they lead to serious chronic health issues. And early detection often improves the chance for a successful recovery.
- **Keep up with immunizations.** Can't remember when you had your last tetanus shot? Adults need shots to prevent serious diseases. Find out what's recommended for your age group and protect yourself by keeping up to date.
- **Know your providers and help them know you.** Regular checkups and care are proven ways to prevent disease and help you stay healthy and live longer. If you don't already have a good relationship with a primary doctor, make an appointment to see one today. Ask about exams, tests and shots you may need. A primary care doctor who knows your health history and understands all your health care needs can help you catch health issues before they become serious.

Use your plan benefits to stay well

Depending on which health plan you have, it will include some, or all, of these benefits you can use to maintain your health:

- Blood pressure, diabetes and cholesterol tests
- Mammograms, colonoscopies and other cancer screenings
- Flu and pneumonia shots
- Online health and wellness tools
- Healthy pregnancy tips
- Disease management programs

Find more information at BCBSND.com/manage-my-benefits.

June is Men's Health Month

You can help all employees become more aware of preventable health problems that affect men and boys. Men die at higher rates from nine of the top 10 causes of death. What's more, men are far more likely to die in the workplace than women. Men make up 92 percent of workplace deaths.

- Visit http://www.menshealthmonth.org/ for great resources and tips on how to celebrate Men's Health Month.
- You can plan a Wear Blue Day at your workplace.

Choose your cover

Mother Nature is bringing us sunnier days and we are starting to spend more time outdoors. As we clean the yard, go for walks and attend sporting events, it's important we remember to "choose our cover."

We can pack up the stocking hats, gloves and winter coats—our skin needs new cover this spring and summer. Skin cancer is the most common form of cancer in the United States.

Skin cancer can be prevented. The best way to lower your skin cancer risk is to choose your cover:

- See shade from UVC rays, especially during midday.
- Cover up to protect exposed skin—wear lightweight, long-sleeved shirts
- Wear a hat with a wide brim
- Grab sunglasses that block both UVA and UVB rays.
- Apply sunscreen of at least SPF 30 and both UVA and UVB protection 15-30 minutes before sun exposure. Reapply every two hours.
- Wear UVA/UVB lip balm with SPF 30 or greater.

Make sure your family members choose their cover as well, especially our littlest ones. Make sure they are covered at daycare, while at recess and attending sporting events.

For more information, visit the North Dakota Cancer Coalition website. To learn more information about skin self-exams, visit the American Cancer Society website.

Protect your skin from sun damage.

Stacy Duncan
NDPERS Wellness Consultant
Phone: 701-277-2884
Fax: 701-277-2292
Email: stacy.duncan@bcbsnd.com

Healthy Activities Spotlight:

The EPA has fun, free sun safety resources that you can download. Check out the EPA website for videos, a free toolkit, fact sheets and other handouts.

Earn a Pebble with HealthyBlue points

The Pebble is an exciting tool that can help your employees take wellness to the next level. The all-day activity tracker will motivate employees to be active anytime, anywhere. The Pebble tracks your steps, distance, calories and time for multiple activity types and then automatically sends it to your HealthyBlue physical activity and steps trackers!

Let your employees know that they can redeem their HealthyBlue points to purchase a Pebble.

Lt. Governor's Award applications due Aug. 1

The Lt. Governor's Award is a worksite wellness award that recognizes NDPERS agencies for their accomplishments in wellness. Healthy North Dakota provides the award.

Applications are due Aug. 1. Look for more information in the July NDPERS newsletter.

Healthy Recipes

Baked vegetable chips with yogurt Ranch dip

Try this fun, nutritious snack from the American Diabetes Association: Baked vegetable chips with yogurt Ranch dip.

These homemade veggie chips make a tasty snack. You can also experiment with other vegetables in this recipe like squash, beets or golden potatoes.

Prep Time: 20 minutes

This recipe serves 4

Ingredients

1 medium zucchini
1 medium parsnip
1 medium sweet potato, peeled
1 teaspoon salt (optional)
1/2 cup non-fat plain Greek yogurt
1/3 cup skim milk
2 tablespoons ranch dressing powder mix

Instructions

Preheat the oven to 200 degrees F. Coat three baking sheets with cooking spray. Set aside.

Slice the zucchini, parsnip, and sweet potato into 1/8 inch thick round slices. Use a mandolin for easy and consistent slicing.

Line one baking sheet with the sweet potato slices in a single layer. Line a second baking sheet with the zucchini in a single layer, and the third sheet with parsnips in a single layer. Spray the vegetables with cooking spray and season them with salt (optional).

Bake for 1 hour and then rotate the baking sheets. Bake until the vegetables are crisp and dry, about 30 to 60 minutes more.

Baking your own vegetable chips is easy and fun.

Stacy Duncan
NDPERS Wellness Consultant
Phone: 701-277-2884
Fax: 701-277-2292
Email: stacy.duncan@bcbsnd.com

While the vegetables are baking, whisk together the yogurt, milk, and ranch powder. Refrigerate the ranch dip until needed.

Let the vegetable chips cool before serving. Once the chips have cooled completely, store them in an airtight container.

Nutritional Facts

Serving Size: 1/2 cup chips + 1/4 cup dip

Calories	Carbohydrate	Protein	Fat	Saturated Fat
90	17 g	5 g	0.0 g	0.1 g
Sugar	**Dietary Fiber**	**Cholesterol**	**Sodium**	**Potassium**
6 g	2 g	0 mg	440 mg	415 mg

Monthly Wellness Consultant call/webinar schedule

Mark your calendar for these WC calls and webinars:

- **Wednesday, June 4, at noon CST**
  To join the June call/webinar: Go to (#793 238 989)
  https://meetingcenter33.webex.com/meetingcenter33/j.php?ED=195469002&UID=494098687&RT=MiM3
- **Wednesday, July 9, at 1 p.m. CST**
  To join the July call/webinar: Go to (#797 344 965)
  https://meetingcenter33.webex.com/meetingcenter33/j.php?ED=195469032&UID=494098687&RT=MiM3
- **Wednesday, August 6, at 11 a.m. CST**
  To join the August call/webinar: Go to (#790 940 275)
  https://meetingcenter33.webex.com/meetingcenter33/j.php?ED=195469087&UID=494098687&RT=MiM3

For audio: Dial 1-888-330-1716 Code: 704446

Friendly reminder: Please mute your phones during the calls as a courtesy to other listeners. If your phone does not have a mute button, dial #0 and then select option 1. To comment or ask a question, you can un-mute by again dialing #0-1. We would also like to ask that you avoid putting your line on hold, as the background music can be heard by all other participants. Thank you.

Coming up in July

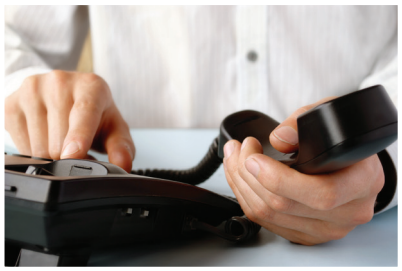
Consider promoting these events next month!

- UV Safety Month
- Fireworks Safety Month
- Juvenile Arthritis Awareness Month

A Partnership for Worksite Wellness

NDPERS and BCBSND are working together to support and provide you and your fellow employees the opportunity to have a healthier and more engaged worksite through Worksite Wellness tools. We appreciate feedback on all our wellness tools to serve your worksite better and welcome your suggestions.

Please take time to fill out surveys we may submit to you from time to time to evaluate these programs.



Don't forget to mark your calendar for the WC calls and webinars.

Stacy Duncan
NDPERS Wellness Consultant
Phone: 701-277-2884
Fax: 701-277-2292
Email: stacy.duncan@bcbsnd.com

NDPERS and BCBSND are working together to support and provide you and your fellow employees the opportunity to have a healthier and more engaged worksite through Worksite Wellness tools.

Stacy Duncan
NDPERS Wellness Consultant
Phone: 701-277-2884
Fax: 701-277-2292
Email: stacy.duncan@bcbsnd.com

Here is a list of contacts that will be useful to you as a Wellness Coordinator:

Stacy Duncan
NDPERS Wellness Consultant
701-277-2884
stacy.duncan@bcbsnd.com
Stacy is your main resource contact. She can help you with general wellness program questions and assist you with enhancing your worksite wellness programs.

Rebecca Fricke
NDPERS
rfricke@nd.gov
Rebecca can help you with 1% premium questions, points on programs, updating coordinator information and the status or questions about the application process or forms.

Kathy Allen
NDPERS
kallen@nd.gov
Direct funding program questions to Kathy.

Onalee Sellheim
BCBSND
onalee.sellheim@bcbsnd.com
Direct questions about benefit plans or schedule Member Education programs through Onalee.

Jodi Crouse
BCBSND
jodi.crouse@bcbsnd.com
To collect aggregate data on your employer from the Health Reimbursement Arrangements, HealthyBlue and Health Club Credit, contact Jodi.

Milissa Van Eps
BCBSND
milissa.van.eps@bcbsnd.com
701-795-5360
Contact Milissa to set up a Member Education program if you are located in eastern North Dakota.

Heather Horner
BCBSND
heather.horner@bcbsnd.com
701-200-3905 (cell)
Contact Heather to set up a Member Education program if you are located in western North Dakota.

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Monthly NDPERS Wellness Coordinator Updates

June 4, 2014 Summary

- **Slide 4** Plan ahead for upcoming July promotions:
  - ✓ **Sun Safety Month**
  - ✓ **Fireworks Safety Month**
  - ✓ **World Hepatitis Day – July 28**
  - ✓ HealthyBlue **Fruits & Veggie Challenge coming SOON**

- **Ideas Sharing:**
  - **PREVIOUS CALLS:**
    - Nancy with SW District Health: **Nutrition Trivia**

Nutrition Trivia Questions.pdf

National Nutrition Month PPT.pptx

    - Chris with Traill Co District Health: **Nutrition Newsletter & Arthritis Brain Teaser**

Arthritis puzzle.pdf

WW March 2014 #2.doc

  - **JUNE CALL:**
    - Connie with Job Service: **Wellness Triathlon**
      - Started "Spring into Fitness" in May and will go through end of June
        - Consists of Fruit & Veggie Challenge, Physical Activity Challenge – 30 mins a day 4x/week, and presentations (Nutrition Basics through Member Ed)
        - Presentations also included stretches to do at desk, walking, etc
      - Conducted survey before and will have another after event
      - Employees who participate will receive voucher points

    - Wayde with Commerce: **Walk during the work week**
      - In April, Wellness committed started encouraging employees to walk 2x per week for at least 20 mins during the work day
      - Scheels presented on proper footwear and Human Performance Center presented on tips to walk with back or spine pain
      - Wellness Committee picks a "theme" quarterly – walks will continue into next quarter with the addition of "Buy Local Fruits & Veggies"

- **Slide 5-** Wellness Coordinator Summer Workshops **MINOT DATES CONFIRMED**

Location	Date of Training	Times
Bismarck, Bismarck State College	June 17 & July 16	8:30 – 11:30 & 1 – 4
Fargo, BCBSND Building	June 24	9am – noon
Dickinson, City Hall	July 15	1pm – 4pm
Williston, Upper Missouri Valley Dist Health	June 18	1pm – 4pm
Grand Forks, County Office Building	July 31	8:30am – 11:30am
Minot, MSU	June 18	8:30am – 11:30am

To pre-register for the Wellness Coordinator Summer Workshops, please contact Stacy Duncan at 701.277.2884 or stacy.duncan@bcbsnd.com. Pre-registration is not required but strongly recommended.

- **Slide 6-** Healthy North Dakota Worksite Wellness Summit
  - ✓ **October 6th at Fargo Holiday Inn**
  - ✓ **Presenters TBA – visit ndworksitewellness.org for more information**

- **Slide 7 -** Voucher Refresher
  - ✓ **Helpful tips in completing the vouchers**
  - ✓ ***Remember to send vouchers through a SECURE email system as vouchers do include PHI (personal health information) -- mailing, fax and email on presentation***

- **Slide 8 -** Reminder of the Wellness Plan Year ending June 30

- **Slide 9 –** The Pebble **now available in the redemption center**
  - ✓ **Electronic personal activity tracking device that is synced with HealthyBlue**
  - ✓ **All employees need 6500 points to purchase Pebble –stock of the Pebble is controlled by the HealthyBlue point redemption center.**
  - ✓ **PERS employees are asked to NOT install the syncing port in your work computers. Due to security guidelines.**

- **Slide 10 –** Lt Governor's Award **application link now LIVE!**

https://www.surveygizmo.com/s3/1657652/Wellness-Coordinator-NWL-Survey-2014

- Bonus Member Education WebEx:

June 9 at 10:00 a.m. & 2:00 p.m.
June 11 at 10:00 a.m.
June 12 at 10:00 a.m. & 2:00 p.m.
June 16 at 10:00 a.m. & 2:00 p.m.
June 30 at 10:00 a.m. & 2:00 p.m.

Dial 1-888-330-1716 Passcode 9947219

Bonus Member Education WebEx Links located below….

June 9th @ 10am
https://meetingcenter33.webex.com/meetingcenter33/j.php?ED=200100572&UID=483198342&RT=MiM3
June 9th @ 2pm
https://meetingcenter33.webex.com/meetingcenter33/j.php?ED=200100702&UID=483198342&RT=MiM3
June 11th @ 10am
https://meetingcenter33.webex.com/meetingcenter33/j.php?ED=200100737&UID=483198342&RT=MiM3
June 12th @ 10am
https://meetingcenter33.webex.com/meetingcenter33/j.php?ED=200100792&UID=483198342&RT=MiM3
June 12th @ 2pm
https://meetingcenter33.webex.com/meetingcenter33/j.php?ED=200100817&UID=483198342&RT=MiM3
June 16th @ 10am
https://meetingcenter33.webex.com/meetingcenter33/j.php?ED=200100827&UID=483198342&RT=MiM3
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June 30th @ 2pm
https://meetingcenter33.webex.com/meetingcenter33/j.php?ED=200100882&UID=483198342&RT=MiM3

- Upcoming monthly calls/webinars are scheduled **(slide 13-14):**
  - ✓ **Wednesday, July 9 at 1:00pm CST**
  - ✓ **Wednesday, August 6 at 11:00am CST**
  - ✓ **Wednesday, September 10 at 12:00pm CST**

    - ❖ **Wednesday, July 9 at 1:00 pm CST**
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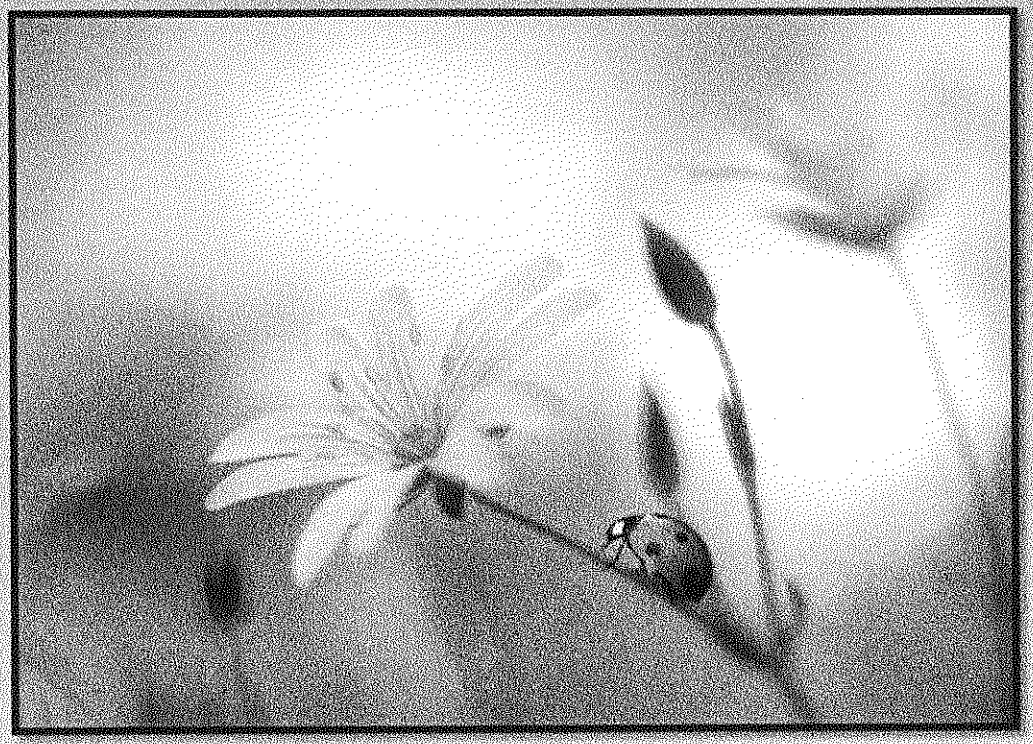
      To join the August call/webinar: Go to (#790 940 275)
      https://meetingcenter33.webex.com/meetingcenter33/j.php?ED=195469087&UID=494098687&RT=MiM3
    - ❖ **Wednesday, September 10 at 12:00 pm CST**
      To join the September call/webinar: Go to (#798 423 633)
      https://meetingcenter33.webex.com/meetingcenter33/j.php?ED=195469212&UID=494098687&RT=MiM3

  Dial in number is: **1.888.330.1716 code 704446.**

- THANK YOU!!! **(slide 15)**

Monthly NDPERS Wellness Coordinator Updates

Presented by Stacy Duncan, NDPERS Wellness Consultant
June 4 at 12:00 pm CST



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Noridian Mutual Insurance Company

FRIENDLY REMINDER TO MUTE

Please remember to MUTE your phones as a courtesy to other listeners today.

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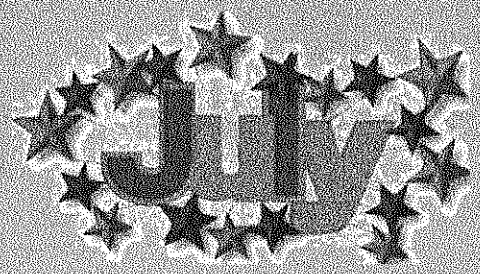
Also, please **AVOID** putting your line on **HOLD** as the background music can then be heard by all other participants on the call.

Monthly NDPERS Wellness Coordinator Updates Agenda

1) July Promotions
2) Upcoming Events
3) Pebble
4) Lt. Governor's Award
5) Bonus Member Ed WebEx's
6) Next Wellness Coordinator Calls
7) Questions

Plan ahead for  promotions!

- Sun Safety Month
- Fireworks Safety Month
- World Hepatitis Day – July 28
- HealthyBlue Fruits & Veggie Challenge coming

Wellness Coordinator Summer Workshops

Location	Date of Training	Times
Bismarck, Bismarck State College	June 17 & July 16	8:30 – 11:30 & 1 – 4
Fargo, BCBSND Building	June 24	9am – noon
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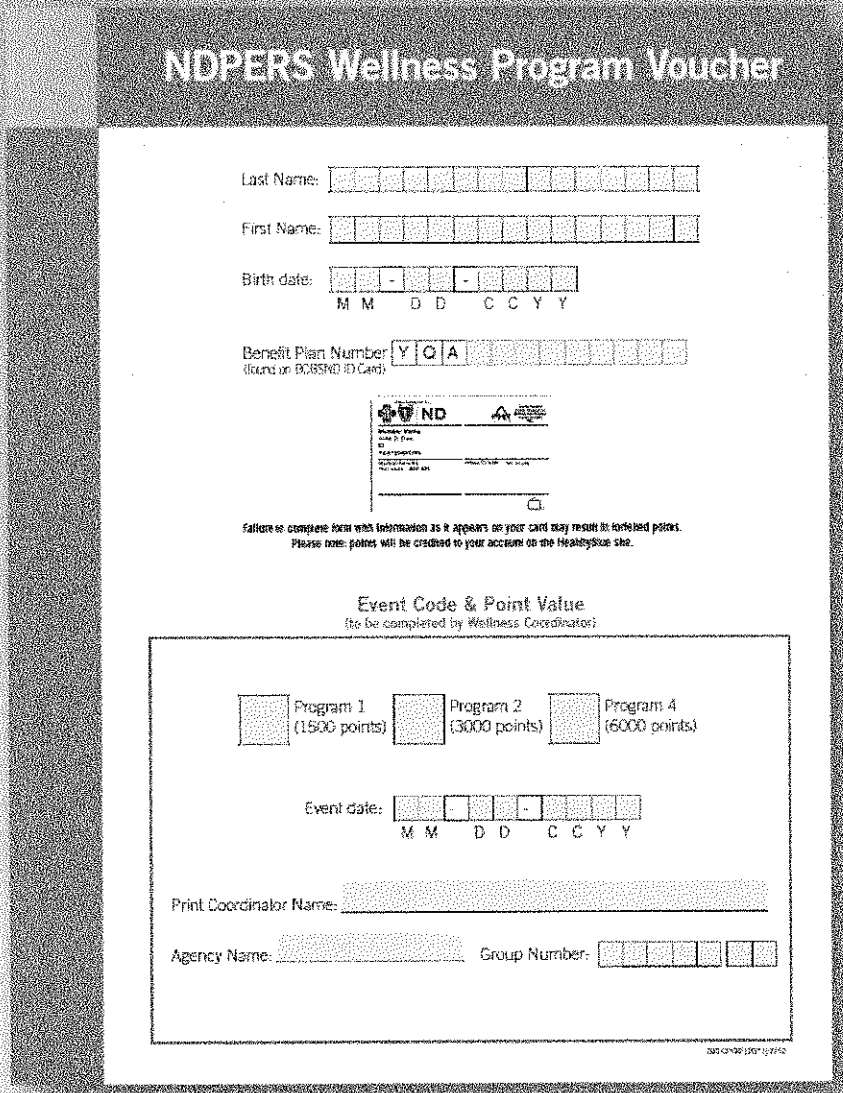
Grand Forks, County Office Building	July 31	8:30am – 11:30am
Minot, MSU	June 18	8:30am – 11:30am

To pre-register for the Wellness Coordinator Summer Workshops, please contact Stacy Duncan at 701.277.2884 or stacy.duncan@bcbsnd.com. Pre-registration is not required but strongly recommended.

Healthy North Dakota Worksite Wellness Summit

October 6th Holiday Inn - Fargo

www.ndworksitewellness.org



Voucher Helpful Tips

- ✓ Complete entire form
- ✓ Use correct form
- ✓ Due August 1st
- ✓ Points added by November
- ✓ Employees must sign into HealthyBlue to redeem points

Send to: BCBSND Attn: Stacy Duncan - 4510 13th Ave S – Fargo, ND 58121
Fax: 701.277.2292 or Email: stacy.duncan@bcbsnd.com

NDPERS Employer Wellness Program

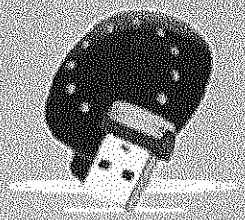
Application Timeline

February 28	Submit your Wellness Program Discount Application SFN 58436 and Wellness Benefit Funding Program Application SFN 58361 to PERS for upcoming plan year
March	PERS will review and evaluate the Wellness Program Discount Applications submitted
April	PERS will notify those employers that are approved for the discount and will provide all Wellness Programs that have not been approved a second opportunity to submit a revised copy
May	PERS will review and evaluate the revised Wellness Program Discount Applications submitted
May 31	Submit previous year's Employer Based Wellness Program Year-end Activity/Program Confirmation SFN 58437 to PERS to confirm completed activities for plan year ending June 30
June	PERS will notify employers requesting funding assistance of approval or denial
June-July	Attend or view information from a Wellness Coordinator Workshop put on by the BCBSND/NDPERS Wellness Specialist Note: May attend a ND Worksite Wellness "Gearing Up" training in place of the WC Workshop.
July	New Plan Year begins and runs through following year June 30. Rates will be updated to indicate participation or non-participation in wellness effective July 1

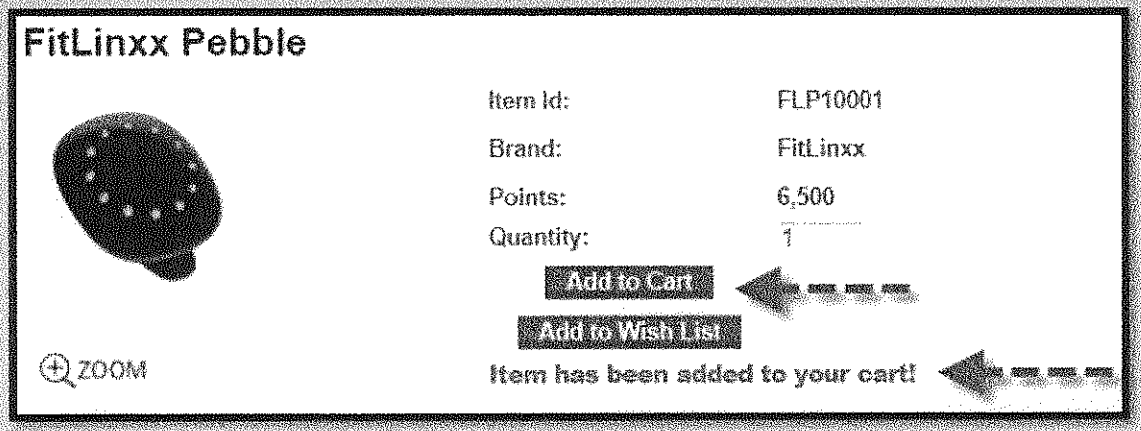
NDPERS Employer Wellness Program Application Timeline

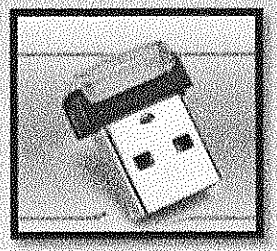
JUNE 30: WELLNESS YEAR END

Pebble



- Points to redeem

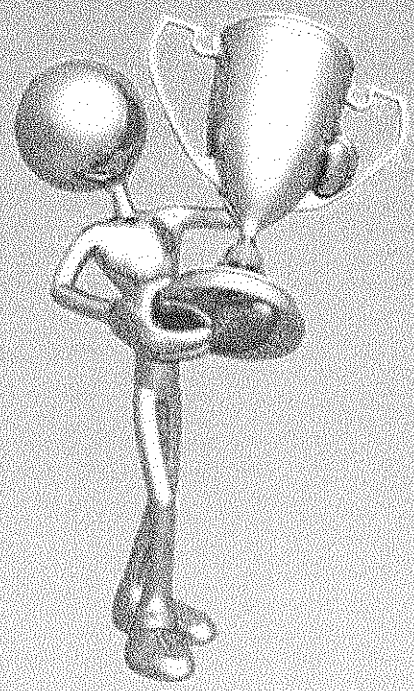




- Installation of the Personal Access Point

Lt Governor's Award

https://www.surveygizmo.com/s3/1657652/Wellness-Coordinator-NWL-Survey-2014



Bonus Member Education WebEx's

Milissa Van Eps
Member Education Consultant
BCBSND

June 9	10:00 a.m. & 2:00 p.m.
June 11	10:00 a.m.
June 12	10:00 a.m. & 2:00 p.m.
June 16	10:00 a.m. & 2:00 p.m.
June 30	10:00 a.m. & 2:00 p.m.

Onalee Sellheim
Benefits Service Representative
BCBSND

Dial 1-888-330-1716 Passcode 9947219

**These sessions are open to anyone who wants to learn more about the Health Club Credit program and the HealthyBlue online wellness tool!

Wellness Coordinator Host Options:

1. Provide employees with the WebEx invites so that they can view privately on their own computers.
2. Reserve conference rooms and view in groups.

***Note**: The link to view the WEbEx's as well as the call-in number to hear Milissa speak will be provided in the monthly call-webinar summary.*

Bonus Member Education WebEx's

June 9th @
10am https://meetingcenter33.webex.com/meetingcenter33/j.php?ED=200100572&UID=483198342&RT=MiM3

June 9th @ 2pm
https://meetingcenter33.webex.com/meetingcenter33/j.php?ED=200100702&UID=483198342&RT=MiM3

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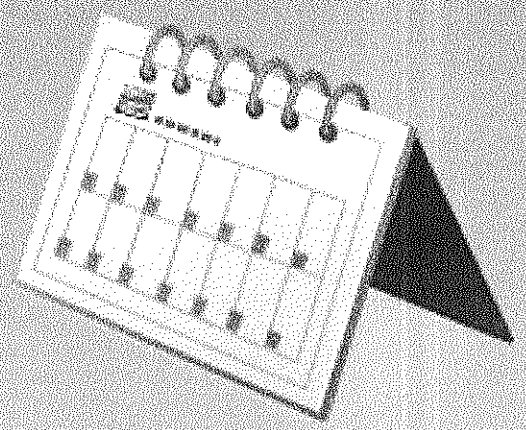
1-888-330-1716 Passcode: 9947219

Monthly Wellness Coordinator Call/Webinar Schedule

- **Wednesday, July 9 at 1:00pm CST**
- **Wednesday, August 6 at 11:00am CST**
- **Wednesday, September 10 at 12:00pm CST**



To join the July call/webinar: Go to https://meetingcenter33.webex.com/meetingcenter33/j.php?ED=195469032&UID=494098687&RT=MiM3

Meeting number: 797 344 965

For audio: Dial 1-888-330-1716 Code: 704446

Monthly Wellness Coordinator Webinar Links

- **Wednesday, July 9 at 1:00 pm CST**

To join the June call/webinar: Go to (#797 344 965)
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- **Wednesday, August 6 at 11:00 am CST**

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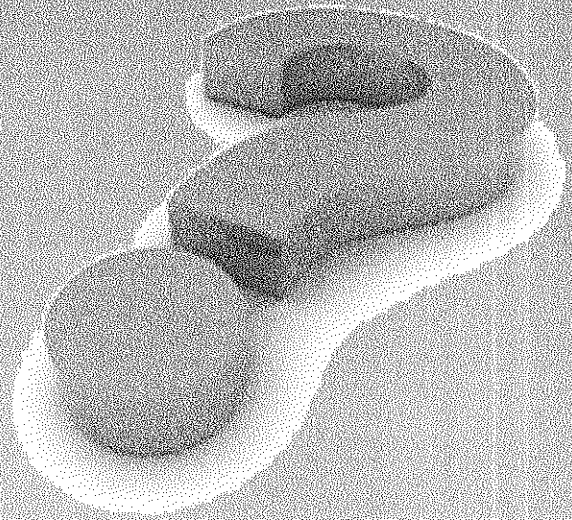
https://meetingcenter33.webex.com/meetingcenter33/j.php?ED=195469087&UID=494098687&RT=MiM3

- **Wednesday, September 10 at 12:00 pm CST**

To join the September call/webinar: Go to (#798 423 633)
https://meetingcenter33.webex.com/meetingcenter33/j.php?ED=195469212&UID=494098687&RT=MiM3

For audio: Dial 1-888-330-1716 Code: 704446

QUESTIONS



THANK YOU!

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building healthy members

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An independent licensee of the Blue Cross & Blue Shield Association

Noridian Mutual Insurance Company

Member Engagement

Member Education Representatives introduce programs that provide employees with valuable information and engages them in their health care. Along with making more informed health care decisions, these programs include valuable life skills.

Presentations are available for the following programs:

- Take Care of Yourself
- Walking Works
- Strength Training
- Beat The Bug
- Summer Safety
- Stress Management
- Medication Education
- Tobacco Cessation
- Wellness Programs (HealthyBlue/Health Club Credit)
- Nutrition Basics for a Healthier You
- **NEW!** "CPR and First Aid Basics"

MS6000A
CD-19891

NDPERS PDP MEMBER CHANGE REPORT

DATE 03/31/14 PAGE 1
21:30:08

HICN	NAME	CHANGE	NEW VALUE	EFF DATE
		Middle Initial		01/01/2006
		HICN		03/01/2014
		Home Phone Number		01/01/2006
		Perm Address Line1		01/01/2006
		Perm Address Line2		01/01/2006
		Perm City-State-Zip		01/01/2006
		Mailing Address Line1		01/01/2006
		Mailing Address Line2		01/01/2006
		Mailing City-State-Zip		01/01/2006
		Perm Address Line1		09/01/2006
		Perm Address Line2		09/01/2006
		Perm City-State-Zip		09/01/2006
		Perm Address Line1		10/01/2009
		Perm City-State-Zip		10/01/2009
		Mailing Address Line1		10/01/2009
		Mailing City-State-Zip		10/01/2009
		Mailing Address Line1		05/01/2014
		Mailing City-State-Zip		05/01/2014
		Mailing Address Line1		01/01/2006
		Mailing City-State-Zip		01/01/2006
		Mailing Address Line1		09/01/2006
		Mailing Address Line2		09/01/2006
		Mailing City-State-Zip		09/01/2006
		~~Term Date~~	~~12/31/2013~~	~~07/01/2010~~
		Term Date	03/31/2014	03/01/2014
		Term Date	03/31/2014	11/01/2010
		Term Date	03/31/2014	01/01/2006
		~~Term Date~~	~~03/31/2014~~	~~01/01/2006~~
		Term Date	03/31/2014	01/01/2006

RECORD COUNT IN MEMBER CHANGE FILE = 15

* * * END OF REPORT * * *

(RCRSND)

State Employees Group
May 31, 2014

Basic Code	Class	Description	Contracts	Members
1756,1757	1	Single Active Employee & Political Sub	5,896	5,896
1756,1757	3	Family Active Employee & Political Sub	14,686	48,151
1761,1762	1	Single Political Sub, Non-Grandfathered	163	163
1761,1762	3	Family Political Sub, Non-Grandfathered	213	713
1759,1760	1	Single Active Employee & Political Sub, Non-Grandfathered HDHP	79	79
1759,1760	3	Family Active Employee & Political Sub, Non-Grandfathered HDHP	69	230
1757	1	Single Active Employee Leave of Absence, Temporary, Part-Time	0	0
1757	3	Family Active Employee Leave of Absence, Temporary, Part-Time	0	0
1757	1	Single Active Employee, COBRA	245	245
1757	3	Family Active Employee, COBRA	48	140
1760	1	Single Active Employee, Non-Grandfathered HDHP, COBRA	1	1
1760	3	Family Active Employee, Non-Grandfathered HDHP, COBRA	1	4
1756,1757	1	Single Political Sub, COBRA	72	72
1756,1757	3	Family Political Sub, COBRA	27	91
1761,1762	1	Single Political Sub, Non-Grandfathered, COBRA	6	6
1761,1762	3	Family Political Sub, Non-Grandfathered, COBRA	0	0
1759,1760	1	Single Political Sub, Non-Grandfathered HDHP, COBRA	0	0
1759,1760	3	Family Political Sub, Non-Grandfathered HDHP, COBRA	0	0
1756	1	Single Non-Medicare Retiree	384	384
1756	3	Family Non-Medicare Retiree	140	280
1757	3	Family 3+ Non Medicare Retirees	14	44
1326,1330,1328	1	Medicare Retiree (A+B) (1 medicare only)	4,192	4,192
1326,1330,1328	7	Medicare Retiree (A+B) (2 medicare only)	2,008	4,016
1326,1330,1328	3	Medicare Retiree (A+B) (3 medicare only)	6	18
1327,1331,1329	3	Medicare Retiree (A+B) (4 medicare only)	1	4
1755	1	Medicare Retiree (A only) (1 medicare only)	2	2
1753,1754,1758	1	Medicare Retiree (A+B) (non-Medicare members only)	429	429
1753,1754,1758	3	Medicare Retiree (A+B) (non-Medicare members only)	23	53
1756	1	Single Non-Medicare Retiree COBRA	1	1
1756	3	Family Non-Medicare Retiree COBRA	0	0
1757	3	Family 3+ Non Medicare Retiree COBRAs	0	0
1326,1330,1328	1	Medicare Retiree COBRA (A+B) (1 medicare only)	0	0
1326,1330,1328	7	Medicare Retiree COBRA (A+B) (2 medicare only)	0	0
1326,1330,1328	3	Medicare Retiree COBRA (A+B) (3 medicare only)	0	0
1327,1331,1329	3	Medicare Retiree COBRA (A+B) (4 medicare only)	0	0
1753,1754,1758	1	Medicare Retiree (A+B) (non-Medicare members only)	10	10
1753,1754,1758	3	Medicare Retiree (A+B) (non-Medicare members only)	0	0
		Total	**28,716**	**65,224**

NDPERS Wellness Coordinator Workshop Agenda

Summer 2014

1. **New Wellness Coordinator Orientation (30 mins)**
   (*For Coordinators in role for 12 mths or less)*
2. **Workshop Intro/Housekeeping**
   - **Successes**
3. **Pulse Points (10 mins)**
4. **Break (5 mins)**
5. **Leadership Training (30 mins)**
6. **Stress Management/Member Education (30 mins)**
7. **Break (5 mins)**
8. **Event Planning (20 mins)**
9. **BCBSND Benefits Overview (30 mins)**
10. **Misc. (10 mins)**
11. **Networking/Trivia (20 mins)**
12. **Final Comments**

"The greatest wealth is health." ~ Virgil

NDPERS Wellness
building healthy members

ND

An independent licensee of the Blue Cross & Blue Shield Association

Noridian Mutual Insurance Company

Carlson, Al H.

From: Clark, Jennifer S.
Sent: Tuesday, March 21, 2017 8:46 PM
To: Carlson, Al H.
Subject: Amendments - HB 1436

Representative Carlson-

The following is a summary of the amendments to HB 1436 which will be sent to you and Representative Keiser tonight.

EMPLOYEE BENEFITS PROGRAMS COMMITTEE:

- Maintains the current membership of the EBPC;
- Limits activities of the EBPC to the interim between regular legislative sessions;
- Limits EBPC bill draft review so no longer reviewing bill drafts of individual legislators, but instead limit review to Executive and Judicial branch bill proposals and proposals of Legislative Management committees;
- Directs legislative standing committees to do reports on bills and amendments during legislative sessions;
- Expands duties of EBPC to include:
    - Quarterly meetings during interim;
    - Receipt of quarterly reports from PERS;
    - Receipt of executive budget proposals from PERS before each regular legislative session; and
    - Investigate possible changes to PERS plans.

PERS UNIFORM GROUP PLANS:

- Codifies in the PERS law that all PERS uniform group plan contracts and contract terms are subject to legislative appropriation and legislative changes;
- Clarifies under a self-funded health plan, the plan the Retirement Board is required to establish in transitioning to self-funded, may include consideration of funds extended to the Board by the Bank of North Dakota (per PERS testimony); and
- Clarifies the January 1, 2018, legislative directive to transition to a self-funded plan does not include the PERS retiree plan or the Medicare Part D plan (per PERS testimony).

I printed off a copy of the current PERS contract, and will spend some time reading through it to identify how the contract addresses legislative changes.

Let me know if you have any additional questions or concerns-

Jenn

Jennifer Clark
Counsel
ND Legislative Council
(701) 328-2916
jclark@nd.gov

#1a
3/22/17

17.1008.03001
Title.

Prepared by the Legislative Council staff for
Representative Carlson
March 21, 2017

PROPOSED AMENDMENTS TO HOUSE BILL NO. 1436

Page 1, line 12, overstrike "consider" and insert immediately thereafter ":

a. Meet at least quarterly at the discretion of the chairman.

b. Receive quarterly reports from the public employees retirement system on the activities of the public employees retirement system, including the status of and any proposed changes to its retirement system plans and uniform group insurance plans. Before each regular legislative session, the pubic employees retirement system shall present to the committee the executive budget proposals, including any anticipated changes, relating to retirement plans and uniform group insurance plans administered by the public employees retirement system. The committee shall consider and report on these activities and executive budget proposals.

c. Investigate the feasibility and desirability of making changes to the retirement plans and uniform group insurance plans administered by the public employees retirement system. The committee may request actuarial reports on the actuarial impact of possible changes and of plan design options.

d. Consider"

Page 1, overstrike "measures and"

Page 1, line 17, remove "a"

Page 1, line 18, overstrike "measure or" and insert immediately thereafter "a legislative"

Page 1, line 19, overstrike "The committee shall take" and insert immediately thereafter:

"e. Take"

Page 1, line 19, remove "such"

Page 1, line 19, overstrike "measure or" and insert immediately thereafter "such legislative"

Page 1, line 23, overstrike "The committee shall report its" and insert immediately thereafter:

"f. Report the committee's"

Page 2, line 16, overstrike "measures and" and insert immediately thereafter "legislative"

Page 2, line 20, remove "If a"

Page 2, line 21, remove "legislative"

Page 2, line 21, overstrike "measure"

Page 2, line 21, replace "or" with "If a legislative"

Page 3, line 1, after "committee" insert "takes action on a legislative measure sponsored by a legislator or"

Page 4, after line 14, insert:

"4. A contract and the terms of a contract entered by the board under this chapter are subject to legislative appropriation and legislative changes."

Page 6, line 11, after the period insert "Such plan may include consideration of funds extended to the board from the Bank of North Dakota."

Page 6, line 27, after "54-52.1-04.2" insert ", except for benefits for retirees and for Medicare part D"

Page 7, line 3, after "plan" insert "under subsection 1"

Renumber accordingly

16
3/22/17

17.1008.03001

Sixty-fifth
Legislative Assembly
of North Dakota

HOUSE BILL NO. 1436

Introduced by

Representatives Carlson, Bellew, Kasper, Keiser, Streyle, Vigesaa

Senators Bekkedahl, Casper, Laffen, Schaible

(Approved by the Delayed Bills Committee)

A BILL for an Act to amend and reenact sections 54-35-02.4, 54-52.1-04, 54-52.1-04.2, and 54-52.1-04.3 of the North Dakota Century Code, relating to the employee benefits program committee, public employee uniform group insurance health benefits coverage, and to provide for a retirement board line of credit; to provide a continuing appropriation; to provide for application; and to provide statements of legislative intent.

BE IT ENACTED BY THE LEGISLATIVE ASSEMBLY OF NORTH DAKOTA:

SECTION 1. AMENDMENT. Section 54-35-02.4 of the North Dakota Century Code is amended and reenacted as follows:

54-35-02.4. Employee benefits programs committee - Standing committees - Powers and duties.

1. ~~The~~During the interim between regular legislative sessions, the employee benefits programs committee shall ~~consider~~:

   a. Meet at least quarterly at the discretion of the chairman.

   b. Receive quarterly reports from the public employees retirement system on the activities of the public employees retirement system, including the status of and any proposed changes to its retirement system plans and uniform group insurance plans. Before each regular legislative session, the pubic employees retirement system shall present to the committee the executive budget proposals, including any anticipated changes, relating to retirement plans and uniform group insurance plans administered by the public employees retirement system. The committee shall consider and report on these activities and executive budget proposals.

   c. Investigate the feasibility and desirability of making changes to the retirement plans and uniform group insurance plans administered by the public employees

retirement system. The committee may request actuarial reports on the actuarial impact of possible changes and of plan design options.

d. Consider and report on ~~those~~ legislative ~~measures and~~ proposals sponsored by the executive branch, judicial branch, and legislative management over which ~~it~~the committee takes jurisdiction and which affect, actuarially or otherwise, the retirement programs of state employees or employees of any political subdivision, and health and retiree health plans of state employees or employees of any political subdivision. The committee shall make a thorough review of ~~any~~a ~~measure or~~a legislative proposal over which ~~it~~the committee takes ~~under its~~ jurisdiction, including an actuarial review. ~~The committee shall take~~

e. Take jurisdiction over any ~~such measure or~~such legislative proposal that authorizes an automatic increase or other change in benefits beyond the ensuing biennium which would not require legislative approval. The committee ~~must~~shall include in the report of the committee a statement ~~that~~ the proposal would allow future changes without legislative involvement. ~~The committee shall report its~~

f. Report the committee's findings and recommendations, along with any necessary legislation, to the legislative management and to the legislative assembly.

2. To carry out its responsibilities, the committee, or its designee, may:

a. Enter contracts, including retainer agreements, with an actuary or actuarial firm for expert assistance and consultation. Each retirement, insurance, or retiree insurance program shall pay, from its retirement, insurance, or retiree health benefits fund, as appropriate, and without the need for a prior appropriation, the cost of any actuarial report required by the committee or a standing committee as provided under subsection 6 which relates to that program.

b. Call on personnel from state agencies or political subdivisions to furnish such information and render such assistance as the committee may from time to time request.

c. Establish rules for ~~its~~ operation of the committee, including the submission and review of proposals and the establishing of standards for actuarial review.

3. ~~The~~During the interim between regular legislative sessions, the committee may solicit draft ~~measures and~~legislative proposals from ~~interested persons during the interim~~

~~between legislative sessions~~the executive branch, judicial branch, and legislative management, and may also study measures and proposals referred to ~~it~~the committee by the legislative assembly or the legislative management.

4. ~~A copy of the committee's report concerning any legislative measure shall, if that~~~~If a legislative measure or~~If a legislative proposal over which the committee took jurisdiction under subsection 1 is introduced for consideration by a legislative assembly, a copy of the related committee report must be appended to the copy of that measure ~~which is~~ referred to a standing committee.

5. A legislative measure affecting a public employees retirement program, public employees health insurance program, or public employee retiree health insurance program may not be ~~introduced~~submitted by the executive branch, judicial branch, or legislative management for introduction in either house unless ~~it~~the measure is accompanied by a report from the committee. A majority of the members of the committee, acting through the chairman, has sole authority to determine whether ~~any~~a legislative measure affects a program.

6. ~~Any~~During a legislative session, if a standing committee takes action on a legislative measure sponsored by a legislator or recommends an amendment ~~made during a legislative session~~ to a legislative measure ~~affecting~~which would affect a public employees retirement program, public employees health insurance program, or public employee retiree health insurance program ~~may not be considered by a standing committee unless it is accompanied by a report from the employee benefits programs committee~~, the standing committee shall consider the impact, actuarily or otherwise, of the amendment and may request the affected program provide an analysis of the impact of the amendments. If an affected program provides an analysis under this subsection, the program may pay for the analysis in the same manner as provided under subdivision a of subsection 2.

~~7. Any legislation enacted in contravention of this section is invalid and of no force and effect, and any benefits provided under such legislation must be reduced to the level current prior to enactment.~~

SECTION 2. AMENDMENT. Section 54-52.1-04 of the North Dakota Century Code is amended and reenacted as follows:

54-52.1-04. Board to contract for insurance.

1. The board shall receive bids for the providing of hospital benefits coverage, medical benefits coverage, life insurance benefits coverage for a specified term, and employee assistance program services; may receive bids separately for prescription drug coverage; and shall accept one or more bids of and contract with the carriers ~~that in the judgment of~~ the board determines best ~~serves~~serve the interests of the state and ~~its~~the state's eligible employees. Solicitations must be made not later than ninety days before the expiration of an existing uniform group insurance contract. Bids must be solicited by advertisement in a manner selected by the board ~~that~~which will provide reasonable notice to prospective bidders. In preparing bid proposals and evaluating bids, the board may utilize the services of consultants on a contract basis ~~in order that~~to provide the bids received may be uniformly compared and properly evaluated. In determining which bid, if any, will best serve the interests of eligible employees and the state, the board shall give adequate consideration to the following factors:
   ~~1.~~ a. The economy to be effected.
   ~~2.~~ b. The ease of administration.
   ~~3.~~ c. The adequacy of the coverages.
   ~~4.~~ d. The financial position of the carrier, with special emphasis ~~as to its~~on the solvency of the carrier.
   ~~5.~~ e. The reputation of the carrier and any other information ~~that is~~ available tending to show past experience with the carrier in matters of claim settlement, underwriting, and services.
2. The board may reject any or all bids ~~and, in the event it does so,~~received under this section. If the board rejects all bids received, the board shall again solicit bids as provided in this section. ~~The~~
3. Under section 54-52.1-04.1 or 54-52.1-04.2, the board may contract with a health maintenance organization or establish a plan of self-insurance ~~for providing health insurance~~to provide hospital, medical, or prescription drug benefits coverage ~~only under an administrative services only (ASO) contract or a third-party administrator (TPA) contract~~.

4. A contract and the terms of a contract entered by the board under this chapter are subject to legislative appropriation and legislative changes.

SECTION 3. AMENDMENT. Section 54-52.1-04.2 of the North Dakota Century Code is amended and reenacted as follows:

54-52.1-04.2. Self-insurance plan for hospital ~~and~~, medical, and prescription drug benefits coverage.

1. ~~The board may establish~~This section applies to a self-insurance plan for ~~providing:~~
   ~~a.~~ ~~Health insurance~~hospital, medical, and prescription drug benefits coverage;
   ~~b.~~ ~~Health insurance~~hospital and medical benefits coverage, excluding all or part of prescription drug benefits coverage; or
   ~~c.~~ ~~All~~all or part of prescription drug benefits coverage. The board shall establish a self-insurance plan under this section if so directed by the legislative assembly. The board may establish a self-insurance plan under this section if the board determines a self-insurance plan is less costly than the lowest bid submitted by a carrier for underwriting the plan with equivalent contract benefits.
2. ~~Any~~A self-insurance plan established by the board under this section must be provided under an administrative services only (ASO) contract or a third-party administrator (TPA) contract under the uniform group insurance program~~, and may be established only if it is determined by the board that an administrative services only or third-party administrator plan is less costly than the lowest bid submitted by a carrier for underwriting the plan with equivalent contract benefits. Upon establishing~~.
3. If the board establishes a self-insurance plan, the ~~board shall solicit bids for an~~term of the contract for administrative services only or a third-party administrator ~~contract only every other biennium, and the board is authorized to~~must be for two years and the board may renegotiate ~~an existing administrative services only or third-party administrator contract during the interim. In addition,~~the contract for one additional two-year term. The board shall solicit bids for the contract for administrative services only or a third-party administrator at least once every four years. If the board establishes a self-insurance plan, the board shall make individual stop-loss coverage insured by a carrier authorized to do business in this state ~~must be made~~ part of ~~any self-insured~~the plan. ~~All bids under this section are due no later than January first, and~~

~~must be awarded no later than March first, preceding the end of each biennium.~~ If the board solicits bids under this section, the board shall solicit bids for a contract for insurance or a health maintenance organization, or both. The board may transition from a self-insurance plan to a contract for insurance or a health maintenance organization if the board determines the self-insurance plan costs more than the lowest bid submitted for a contract or health maintenance organization plan with comparable benefits. All bids received by the board under this section must be opened at a public meeting of the board.

SECTION 4. AMENDMENT. Section 54-52.1-04.3 of the North Dakota Century Code is amended and reenacted as follows:

54-52.1-04.3. Self-insurance - Contingency reserve fund - Continuing appropriation - Bank of North Dakota line of credit.

~~The~~

1. If the board establishes a self-insurance plan under section 54-52.1-04.2, the board shall establish ~~under a self-insurance plan~~ a contingency reserve fund to provide for adverse fluctuations in future charges, claims, costs, or expenses of the uniform group insurance program. ~~The~~Annually, the board shall determine the amount necessary to provide a balance in the contingency reserve fund between one and one-half months and three months of claims paid based on the average monthly claims paid during the preceding twelve-month period ~~immediately preceding March first of each year~~. ~~The~~Annually, the board ~~also~~ shall determine the amount necessary to provide an additional balance in the contingency reserve fund between one month and one and one-half months for claims incurred but not yet reported. The board may arrange for the services of an actuarial consultant to assist the board in making these determinations.
2. Upon the initial changeover from a contract for insurance ~~pursuant to~~under section 54-52.1-04 or a health maintenance organization under section 54-52.1-04.1, to a self-insurance plan ~~pursuant to~~under section 54-52.1-04.2, the board ~~must have~~shall adopt a plan ~~in place which is~~ reasonably calculated to meet the funding requirements of this chapter within sixty months. Such plan may include consideration of funds extended to the board from the Bank of North Dakota. All moneys in the contingency

reserve fund, not otherwise appropriated, are appropriated for the payment of claims and other costs of the uniform group insurance program during periods of adverse claims or cost fluctuations. If the board transitions from a self-insurance plan to a contract for insurance or a health maintenance organization, the board shall adopt a plan reasonably calculated to meet the remaining liabilities of the self-insurance plan.

3. The Bank of North Dakota shall extend to the board a line of credit not to exceed fifty million dollars at an annual rate not to exceed one and three-quarters percent. The board shall repay the line of credit from health insurance premium revenue or from other funds, as appropriated by the legislative assembly. The board may access the line of credit, as necessary, to provide adequate reserve funds, to purchase stop-loss coverage, and to defray other expenditures of administration of the self-insurance plan.

SECTION 5. SELF-INSURANCE HEALTH PLANS - APPLICATION - STATEMENT OF LEGISLATIVE INTENT.

1. The retirement board shall establish a self-insurance plan for hospital, medical, and prescription drug benefits coverage under section 54-52.1-04.2, except for benefits for retirees and for Medicare part D. The self-insurance plan becomes effective January 1, 2018, is effective for a term of eighteen months, is subject to renewal and rebidding as provided under section 54-52.1-04.2, and must be based on the same plan design and benefits as the coverage in effect on July 1, 2017.
2. A uniform group insurance program contract for hospital, medical, and prescription drug benefits coverage in effect on the effective date of this Act terminates on December 31, 2017, after which the self-insurance plan under subsection 1 becomes effective.
3. Notwithstanding any law to the contrary, it is the intent of the sixty-fifth legislative assembly that the uniform group insurance program contract for hospital, medical, and prescription drug benefits coverage signed by the retirement board which becomes effective July 1, 2017, be limited in duration to a six-month term.

SECTION 6. HEALTH INSURANCE RESERVE FUND. The retirement board shall use available moneys in the fund created under section 54-52.1-06 for the purpose of financing the self-insurance plan established under section 5 of this Act.

SECTION 7. EXEMPTION. This Act is not subject to review by the employee benefits programs committee under section 54-35-02.4.

EMPLOYEE BENEFITS PROGRAMS COMMITTEE
REPORT TO THE 65TH LEGISLATIVE ASSEMBLY
REGARDING HOUSE BILL NO. 1436 AND
PROPOSED AMENDMENTS TO HOUSE BILL NO. 1436

Date: March 23, 2017

Original LC#: 17.1008.03000

Sponsor: Representative Carlson

Proposal: Requires the uniform group insurance program to become self-insured for an 18-month period beginning January 1, 2018, and ending June 30, 2019. The bill would change the duration of the coverage period beginning July 1, 2017, to 6 months. The bill also establishes a $50 million line of credit through the Bank of North Dakota that the Public Employees Retirement System (PERS) Board can use to fund reserves, purchase stop-loss coverage, or pay for other self-insurance expenses.

Proposed amendments to House Bill No. 1436 [17.1008.03001] limit activities of the Employee Benefits Programs Committee to the interim between regular legislative sessions and expand the duties of the committee to include quarterly meetings during the interim, receipt of quarterly reports from PERS, receipt of executive budget proposals from PERS before each regular legislative session, and investigation of possible changes to PERS plans.

Actuarial Analysis: The consulting actuary reported PERS would take on additional risk by becoming self-insured. The actuary reported PERS contingency reserves currently hold approximately $35 million and would require an additional $5 million to $6 million to meet the minimum reserve requirement. The actuary reported aggregate stop loss coverage at 120 percent could be purchased for $0.50 to $1.00 per contract per month. However, in the event that a 120 percent aggregate stop loss claim is made, PERS will have lost its entire contingency reserve as well as an additional 7.5 percent, or approximately $25 million.

The consulting actuary also reported if PERS becomes self-insured, the number of vendor contracts will increase the agency's administrative burden and would allow 2 additional staff positions to assist with the administration of self-insurance.

Committee Report: Unfavorable recommendation

NORTH DAKOTA
PUBLIC EMPLOYEES
RETIREMENT SYSTEM

September 4, 2014

Qualitative Narrative Response with Attachments

Electronic Copy

ND

BOLDER SHADE OF BLUE

e Cross Blue Shield of North Dakota is an independent licensee of the Blue Cross & Blue Shield Association

TIM HUCKLE
President and CEO
P: (701) 282-1539
tim.huckle@bcbsnd.com

August 29, 2014

Cheryl Stockert
Manager, Administrative Services
North Dakota PERS
400 East Broadway
Suite 505
Bismarck, ND 58502

Dear Ms. Stockert:

I am pleased to submit the enclosed proposal on behalf of Blue Cross Blue Shield of North Dakota (BCBSND) for the North Dakota Public Employees Retirement System (NDPERS). Our collaborative relationship is reflected in this proposal, as we work together to address both the cost of providing quality health care coverage and ways to encourage a healthier population among what is our largest group in North Dakota.

Our organization is committed to providing you with the best value, including:

- Unrivaled provider access with a network of over 99% of North Dakota providers supplemented with BlueCard, Blue Cross Blue Shield's broad national network.
- Dedicated service team while maintaining low administrative costs.
- Over 800 North Dakota based employees providing local service and expertise.

This proposal offers an enhanced innovative alternate profit sharing financial settlement option with NDPERS, as well as options representing solutions to holding down costs while encouraging maintaining good health:

- Focus on wellness; in depth detail is included on the wellness programs we have created specifically for NDPERS and are facilitating to encourage a culture of prevention rather than treatment such as the dedicated HealthyBlue portal for NDPERS.
- Pharmacy benefits management and options; with pharmacy costs constantly rising, additional options and guarantees around pharmacy coverage are included such as discounts, fees and rebates. The cost proposal is also priced with and without the pharmacy coverage.
- Quality and outcome based collaboration with providers; successful collaboration with providers continues to move North Dakota's health system toward compensation based on outcomes and quality rather than just paying a fee for service. Total Cost of Care contracts with the integrated health care systems and our innovative medical home program MediQHome are ongoing initiatives based on collaboration.

BCBSND has the staffing, infrastructure and contracts in place to ease the administration of the NDPERS Health plans and Wellness programs, without member disruption.

On behalf of BCBSND, I acknowledge receipt of the group health request for proposal (RFP) specifications and addenda, and confirm that the BCBSND proposal enclosed conforms to the RFP minimum requirements.

Finally, I want to sincerely and personally thank you and everyone at NDPERS for the long relationship our organizations enjoy, and look forward to further discussions regarding our proposal.

Sincerely,

Tim Huckle
President and CEO

Attachment: Certification of compliance to provisions of the RFP.

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29318852 (2051) 8-14

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Summary of Proprietary, Confidential and/or Trade Secret Information

Summary of Proprietary, Confidential and/or Trade Secret Information

The responses provided to the following questions include trade secret, proprietary, commercial or financial information that is of a privileged nature and has not been previously publicly disclosed. This information is confidential and is prohibited from being opened to the public.

Question 36	Question 49B	Question 58	Question 59

Attachment 9

Appendix I	Appendix J	Appendix K

The information contained in these responses is proprietary information and also includes trade secrets and commercial information as defined under North Dakota law. This information is proprietary in that the information contained within this response involves financial and marketing information, owned and controlled by BCBSND, that is intended to be and is treated by BCBSND as private, the disclosure of which would cause harm to BCBSND's business. The information contained in these responses includes trade secrets in that they set forth information describing patterns, compilations, methods or processes that BCBSND derives independent economic value from because this information is not generally known to (or readily ascertainable by) other entities that could obtain economic value from its disclosure and this information is subject to efforts, reasonable under the circumstances, to maintain the secrecy. These responses also include commercial information involving the purchase of services that has not been previously publicly disclosed and, if the information were to be disclosed, would impair the ability of BCBSND to obtain necessary information or cause substantial competitive injury. As such, this information is confidential and is not subject to disclosure under the North Dakota open records laws. Improper disclosure of this confidential information by a public entity, its agents or assigns is a punishable offense subject to criminal and civil penalties.

Appendix A:
Sample ASA

Appendix A:

Sample Contract/Administrative Services Agreement (ASA)

Blue Cross Blue Shield of North Dakota acknowledges receipt of the Sample Contract/ASA. Please refer to Appendix F, Exhibit F1 for the deviations, as well as proposed alternate language.

Appendix B:
Response Template

Appendix B:

Response Template

1. Face sheet

Name of Proposer's Firm:	Noridian Mutual Insurance Company
Federal Tax I.D. Number:	450173185
Principal Place of Business:	Blue Cross Blue Shield of North Dakota
Address:	4510 13th Avenue S.
City:	Fargo
State and Zip:	North Dakota 58121
Contact Person:	Kevin Schoenborn
Title:	Manager, Consulting Services
Telephone:	(701) 282-1172
Fax:	(701) 282-1172
E-mail address:	Kevin.Schoenborn@bcbsnd.com

2. Minimum Requirements (please identify if you would be able to meet this existing service and if not what you would propose).

Minimum Requirements	Response
Electronic Data Collection and Reporting Requirements: Respondents must, at a minimum, meet the data collection and reporting requirements described in Section 1 under Reporting Requirements of the RFP.	As the incumbent, BCBSND will continue to meet all NDPERS data collection and reporting requirements described in Section 1 under Reporting Requirements.
Vendor must be able to take current 834 electronic enrollment file (containing member eligibility) at no cost.	As the incumbent, BCBSND will continue to take current electronic enrollment at no cost.
Effective Date of Coverage: Respondents must be able to provide required coverages and services by July 1, 2015 and January 1 2016 for the PDP.	Acknowledged and Agreed.
Licensure: Respondents must have all applicable licenses required by North Dakota or agree to obtain necessary licensure prior to the effective dates of coverage.	BCBSND currently meets all necessary license requirements.
Term of Contract: NDPERS is required by state statute to solicit bids for medical benefit coverage for a specified term for a fully-insured arrangement and every other biennium for a self-funded arrangement. NDPERS has determined that the specified term for fully-insured arrangement shall be six years subject to two year renewals; however, NDPERS reserves the right to extend the agreement subject to negotiation with the successful vendor for another two years if the Board deems it necessary.	Acknowledged and Agreed.
Premium Rate Guarantees: For all insured proposals premium rates must be guaranteed for a period of two years, from July 1, 2015 to June 30, 2017 PDP rates will be developed each year based upon the federal subsidy.	Acknowledged and Agreed. BCBSND reserves the right to adjust premium rates and applicable benefits with 90 days notice based on any significant benefit changes or new taxes applied due to federal or state regulations.
PDP rates: Must be submitted to NDPERS by September of each year.	BCBSND typically submits the renewal rates in August for NDPERS Board review with Board approval no later than their September meeting. We will continue to submit no later than September of each year.
Non-Medicare Retirees: Rates are governed by state statue. Non-Medicare retiree single rate is 150% of the active member single rate; the rate for a non-Medicare retiree plus one is twice the non-Medicare single rate, and the rate for a non-Medicare retiree plus two or more dependents is two and one-half times the non-Medicare retiree single rate.	Acknowledged and Agreed.

Minimum Requirements	Response
Renewals: Renewals must be submitted to NDPERS in August of the year preceding the contract renewal date and in September of each year for the PDP.	Acknowledged and Agreed.
Contract Termination: Respondent's contract termination provision may not require more than 120-day notice and can occur only at renewal. NDPERS can terminate coverage at any time.	Acknowledged and Agreed.
Replicate Coverage: Respondent should replicate the existing coverage and financial terms for two years including an HSA arrangement. Variances and exceptions to existing coverage can be offered in appendix F item F2.	Acknowledged and Agreed. BCBSND has the ability to replicate all aspects of the current program. The only variations are based on state and federal law to comply with regulatory updates. These variations are noted in Appendix F – Deviations.
Legislative Compliance: Respondents agree to comply with all provisions of the Health Insurance Portability Act of 1996 including, but not limited to providing certificates of creditable coverage. Respondents must also be in compliance with all HIPAA Privacy and HIPAA EDI requirements and be able to conduct all applicable employer/plan sponsor and provider transactions consistent with those requirements. Respondents will be expected to meet HIPAA security requirements when applicable to NDPERS. Respondents will also be expected to be in compliance with all ACA requirements.	BCBSND currently meets all applicable provisions of Part I of the Health Insurance Portability and Accountability Act of 1996 that apply to health insurance carriers as required and that pertain to the NDPERS uniform group insurance program including, but not limited to, providing certificates of creditable coverage, and agrees to comply with any provisions that may be changed or amended in the future, including any requirements imposed through the ACA. BCBSND also currently complies with all HIPAA Part II Privacy and HIPAA Part II EDI requirements and conducts all applicable employer/plan sponsor and provider transactions consistent with these requirements. BCBSND currently meets insurance carrier HIPAA security requirements when applicable to NDPERS. BCBSND implemented the requirements of the HIPAA privacy rule as of April 13, 2003, as required under federal law, and the Electronic Transactions and Code Set Standards were implemented by the October 16, 2003, extended compliance date. The NPI standard was implemented on May 23, 2008. Requirements of the HIPAA security rule were implemented by April 20, 2005, and BCBSND is compliant with the provisions recently enacted under HITECH. BCBSND currently meets all applicable provisions of the ACA that have become effective and apply to health insurance carriers as required and that pertain to the NDPERS uniform group insurance program including, but not limited to, early implementation requirements and other provisions as these become required, and agrees to comply with any provisions that may be changed or amended in the future.

Minimum Requirements	Response
Transition Management: Respondents agree, should they be selected, they will proactively manage the transition of coverage (e.g. claim accumulators, lifetime maximums, etc.) from the subsequent carrier.	As the incumbent, this is not applicable.
Administration: Respondents must agree to comply with existing administration of NDPERS. Any modifications needed to accommodate NDPERS data will be done at the vendor's own expense.	Acknowledged and Agreed.
Audit: NDCC 54-52-04 (10) relating to the audit authority of NDPERS.	BCBSND acknowledges the authority of the board contained in Section 54-52-04(4), N.D.C.C., and is prepared to comply with these requirements subject to any limitations or restrictions imposed under federal law and to agreements in place between BCBSND and any third-party vendor performing administrative services on behalf of BCBSND. BCBSND agrees to submit to the audit authority of NDPERS set forth in Section 54-52-04(4), N.D.C.C., subject to any contract limitations existing at the time of the submission of BCBSND responses to this RFP contained in agreements existing between BCBSND and its vendors or providers during the terms of the health insurance included in this proposal. For the purposes of this provision, the term "providers" shall mean any vendors under contract with BCBSND to provide benefits and/or services utilized in the administration of the NDPERS uniform group insurance program. This term shall not be interpreted to permit any direct audit of health care providers under contract with BCBSND. Subject to the provisions set forth above, BCBSND will work with NDPERS to audit within reason (i.e. time, expense and frequency). In 2010, BCBSND allowed an audit of Prime Therapeutics for NDPERS pharmacy claims. The purpose of the audit completed by Tricast was to insure claims adjudication accuracy, proper rebate administration and pharmacy network performance. The audit results reported to the NDPERS Board were very favorable.

Minimum Requirements	Response
North Dakota Legislation Requirements: Respondent must meet all requirements in the North Dakota Century Code including 54-52; 54-52.1, 54-52.4 and all requirements in the North Dakota Administrative Code including 71-03 and other applicable State Laws. Specific recognition of 54-52.1-12 should be acknowledged	BCBSND agrees to meet all requirements of the North Dakota Century Code included in chapter 54-52.1, N.D.C.C., and all corresponding requirements in the North Dakota Administrative Code, including chapter 71-03, N.D.A.C., and other applicable state Laws pertaining to the administration of the NDPERS uniform group insurance program, subject to any limitations or restrictions imposed under federal law and those contained in the agreements in place between BCBSND and any third-party vendor performing administrative services or extending covered services on behalf of BCBSND to NDPERS. BCBSND extends specific recognition of and acknowledges Section 54-52.1-12, N.D.C.C., related to the ownership of medical records and related data of NDPERS employees, retirees and dependents, again subject to any limitations or restrictions imposed under federal law or contained in the agreements in place between BCBSND and any third-party vendor performing administrative services or extending covered services on behalf of BCBSND to NDPERS, particularly the directives included in the HIPAA privacy requirements as these relate to covered entities and the ownership, use and control of such data.
Ability to meet the specifications outlined in the RFP unless specifically noted	Acknowledged and Agreed.
Premium rates must be divisible by two.	Acknowledged and Agreed.
Subject matter experts and other appropriate personnel will be available to attend board meetings, legislative hearings, etc. as needed.	BCBSND teams of subject matter experts are available to NDPERS to attend board meetings, legislative hearings, etc. Our team of local professionals includes clinical, legal, compliance, actuarial, IT, and marketing. Your dedicated Account Manager will facilitate any requested attendance on behalf of NDPERS.

3. Affidavit of Non-collusion

I swear (or affirm) under the penalty of perjury:

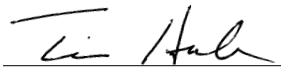
1. That I am the Responder (if the Responder is an individual), a partner in the company (if the Responder is a partnership), or an officer or employee of the responding corporation having authority to sign on its behalf (if the Responder is a corporation);

2. That the attached proposal submitted in response to the Group Medical Coverage Request for Proposals has been arrived at by the Responder independently and has been submitted without collusion with and without any agreement, understanding or planned common course of action with, any other Responder of materials, supplies, equipment or services described in the Request for Proposal, designed to limit fair and open competition;

3. That the contents of the proposal have not been communicated by the Responder or its employees or agents to any person not an employee or agent of the Responder and will not be communicated to any such persons prior to the official opening of the proposals; and

4. That I am fully informed regarding the accuracy of the statements made in this affidavit.

Responder's Firm Name: Noridian Mutual Insurance Company

Authorized Signature: 

Date: 8/29/2014

Subscribed and sworn to me this _____ day of _____

Notary Public: _____

My commission expires: _____

4. Conflicts of Interest List

Responders must provide a list of all entities with which it has relationships that create, or appear to create, a conflict of interest with the work that is contemplated in this request for proposals. The list should indicate the name of the entity, the relationship, and a discussion of the conflict.	To the best of our knowledge, BCBSND is not aware of any entities with which we have a relationship that creates, or appears to create, a conflict of interest with the work contemplated in this proposal.

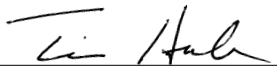
5. Compliance with Federal and State Laws Form

NDPERS — Federal and State Law Compliance Certification

1. The company shown below is or will be in compliance with Federal and State laws and does not knowingly violate North Dakota or United States Laws. The company shown below will obtain this certification from all subcontractors who will participate in the performance of this contract; and

I certify that the company shown below is in compliance with items 1 above and that I am authorized to sign on its behalf.

Name of Company: Noridian Mutual Insurance Company Date: 8/29/14

Authorized Signature:  Telephone Number: (701) 282-1539

Printed Name: Tim Huckle Title: President and CEO

6. Location of Service Disclosure and Certification

STATE OF NORTH DAKOTA

LOCATION OF SERVICE DISCLOSURE AND CERTIFICATION

LOCATION OF SERVICE DISCLOSURE

Check all that apply:

❑ The services to be performed under the anticipated contract as specified in our proposal will be performed ENTIRELY within the State of North Dakota.

❑ The services to be performed under the anticipated contract as specified in our proposal entail work ENTIRELY within another state within the United States.

✔ The services to be performed under the anticipated contract as specified in our proposal will be performed in part within North Dakota and in part within another state within the United States.

❑ The services to be performed under the anticipated contract as specified in our proposal DO involve work outside the United States. Below (or attached) is a description of

(1) the identity of the company (identify if subcontractor) performing services outside the United States;

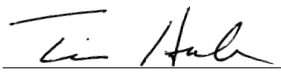
(2) the location where services under the contract will be performed; and

(3) the percentage of work (in dollars) as compared to the whole that will be conducted in each identified foreign location.

CERTIFICATION

By signing this statement, I certify that the information provided above is accurate and that the location where services have been indicated to be performed will not change during the course of the contract without prior, written approval from the State of North Dakota.

Name of Company: Noridian Mutual Insurance Company

Authorized Signature: 

Printed Name: Tim Huckle

Title: President and CEO

Date: 8/29/14

Telephone Number: (701) 282-1539

Appendix C:
Questionnaire

Appendix C:

Questionnaire

In order for your proposal to be considered and accepted, your organization must provide answers to the questions presented in this section. Each question must be answered specifically and in detail. Include both the question and the answer in your proposal response. An electronic copy of this questionnaire has been provided to facilitate your response.

Reference should not be made to a prior response unless the question involved specifically provides such an option. Proposers should refer to the earlier sections of this RFP before responding to any of the questions, to ensure that you have a complete understanding of the requirements with respect to your organization's proposal.

Vendors may include additional information that you consider relevant or useful to NDPERS. However, responses to all of the questions set forth below must be provided.

NDPERS is interested in evaluating financial agreements based on the traditional approach to PBM pricing and pricing under a transparent arrangement. "Traditional" financial proposals should include guaranteed effective rate discounts, as well as specific fees and guaranteed rebate dollar amounts. "Transparency" for purposes of the Request for Proposal is defined as a full pass through to NDPERS of all monies paid to the PBM arising from all contracted arrangements. **When answering questions and completing exhibits related to your financial proposal please indicate if you're answer would differ under a transparent or a traditional pricing arrangement.** NDPERS will give preference to transparent proposals.

If this proposal results in your company being awarded a contract and if, in the preparation of that contract, there are inconsistencies between what was proposed and accepted versus the contract language that has been generated and executed, any controversy arising over such discrepancy will be resolved in favor of the language contained in the proposal or correspondence relating to your proposal. Vendors are reminded that **any and all deviations must be clearly identified and described in the RFP and the deviations worksheet provided in Appendix F.**

The questionnaire is broken down into the following 13 (thirteen) categories:

- Organizational Background, Strength, and Experience
- Implementation and Account Management
- Communications and Website
- Plan Administration
- Eligibility and Billing
- Customer/Member Service
- Claims Administration
- Reporting
- Case/Utilization Management
- Health Risk Management and Wellness Programs
- Provider Network
- Performance Standards and Guarantees
- Pharmacy Benefits Management Services

BCBSND has provided comprehensive responses to all questions presented. BCBSND has provided additional detail to certain questions that we believe would be pertinent to NDPERS in the evaluation process.

Transparent (Pass-Through) Pricing Summary

Two standard types of Pharmacy offers are most common in the Pharmacy Benefit Manager (PBM) industry: Traditional and Pass-through.

Traditional pharmacy bids are typically characterized by "Spread" pricing where by the PBM will offer flat discount and dispensing fee guarantees accompanied by a $0 or very low fixed cost. The "Spread" represents the difference in discount quoted to the employer group versus the actual reimbursement by the PBM to the pharmacy. This Spread can be applied to both Brand and Generic drugs and dispensing fees and is a source of revenue generation for the PBM. This "Spread" revenue is typically utilized by the PBM to subsidize a higher Brand discount and to offer a low pharmacy fixed admin cost. By design, a Traditional deal is structured to generate a revenue stream for the PBM off variable claims costs that exceeds any subsidization to Brand discount and fixed pharmacy administrative costs. This excess revenue stream generation is not passed through or completely disclosed to the employer group.

Traditional pricing may be particularly appealing to employer groups that are focused on fixed costs and those that desire a very low pharmacy admin but are willing to experience higher variable claims spending. Since variable pharmacy claim spending is greater than 90% of the total spending associated with most employer groups pharmacy benefits, BCBSND groups typically elect for a Pass-Through (PT) pricing arrangement rather than a Traditional approach because of savings associated with variable claims spending .

In addition to Traditional "Spread" pricing, PBMs have the ability to manipulate their Brand and Generic definitions when they reconcile to discount guarantees. This strategy is utilized to quote a higher perceived Brand and Generic discount on a spread-sheet but does not translate into lower net drug spending. Most commonly, a PBM may re-bucket or exclude single source (generics from a single manufacturer), dual source (generics from 2 manufacturers), or tertiary source (generics from 3 manufacturers) generics from discount guarantee reconciliations to achieve artificially inflated discounts. This strategy is often used with Traditional "Spread" pricing arrangements to demonstrate perceived discount value and to mask the revenue streams associated with "Spread".

In contrast to Traditional pricing, BCBSND offers NDPERS a Pass-through (PT) pricing arrangement. A PT pricing arrangement is characterized by minimum effective discounts and dispensing fee guarantees and does not include Spread pricing. Since these are minimum effective guarantees, NDPERS would receive the full value of all BCBSND contracted pharmacy network rates and dispensing fees based upon the pharmacies that your members elect to utilize. Additionally, as Prime Therapeutics renegotiates the BCBSND pharmacy network, NDPERS would benefit from the full pass-through of any network enhancements we achieve for BCBSND throughout the year rather than upon anniversary date. This extra value is not typically passed through to an employer group in a Traditional bid. BCBSND's PT offer does not include any manipulation of Brand and Generic for discount reconciliation. This strategy is often used by other PBMs to artificially inflate their perceived discounts as documented above.

BCBSND currently offers what we define as a "transparent" approach to NDPERS based on our fully integrated Pharmacy Benefit Manager (PBM), Prime Therapeutics. The current model varies compared to the "transparent" model described in the RFP. Currently, BCBSND offsets Prime's administrative fee with a combination of funding levers in order to be revenue neutral while simplifying the administrative burden for NDPERS. BCBSND will provide pricing to illustrate both the current arrangement as well as the requested approach.

The true value of transparent vs. traditional pricing can be found in the Ingredient Cost Fact Sheet, found in Attachment 1 – Ingredient Cost Fact Sheet.

BCBSND understands that should an inconsistency be found, that favor would be given to the terms in this proposal. We are comfortable with this approach. As the incumbent, BCBSND administers all aspects of the current program with the only deviations noted based on regulatory changes.

6.1 Organizational Background, Strength and Experience

1. Provide a brief description of your organization, including your company history, organizational structure, services provided, location of headquarters, and length of time you have been in business. Describe any significant historical or future organizational developments (acquisitions, mergers, change in subcontracted vendors, etc.).

Company History
More than 70 years ago, Blue Cross Blue Shield of North Dakota (BCBSND) began as two separate pre-paid health care plans for hospital and physician services. The two companies merged in 1986 and, in 1998, converted to a not-for-profit mutual insurance company.

Organizational Structure
In 1998, BCBSND changed its corporate structure to a nonprofit, mutual insurance company and its name to Noridian Mutual Insurance Company (NMIC). The new structure gave members more ownership, plus allowed the company to pursue business in neighboring states as NMIC, while continuing to do business within North Dakota as BCBSND.

Throughout the history of Noridian Mutual Insurance Company, the corporation has established subsidiary and affiliated companies.

In 2002, NMIC established the wholly owned subsidiary Noridian Administrative Services, LLC (NAS) in order to pursue additional Medicare business and other government contracts. In 2013, Noridian Administrative Services, LLC was rebranded as Noridian Healthcare Solutions (NHS). Today, NHS processes over 119 million claims annually. They serve over 13.1 million beneficiaries in all 50 states and work with over 290,000 healthcare providers. NHS has 1808 employees, of which 1306 reside in North Dakota.

In 2008, NMIC bought a 51 percent controlling interest in Discovery Benefits, Inc. (DBI). DBI provides reimbursement accounts including flexible benefits, health savings accounts, health reimbursement arrangements, transportation/parking accounts and COBRA administrative services.

In early 2009, BCBSND together with Blue Cross Blue Shield of Nebraska, launched a health care technology company named CoreLink Administrative Solutions. The joint venture processes claims for the North Dakota, Nebraska and Wyoming Blue plans, and results in significant administrative efficiencies by delivering core systems solutions at lower costs and greater performance capability.

In 2011, NMIC acquired MDdatacor, Inc., a Georgia-based technology company that provides data-driven solutions for health care insurers and providers. MDdatacor has the ability to collect, store, manage and analyze patient medical information from the most comprehensive data sets available in the industry. The acquisition was part of NMIC's ongoing strategy to collaborate and innovate to find local solutions that will sustain accessible, high-quality health care for all North Dakotans for years to come. MDdatacor owns MDinsight, the primary technology platform that facilitates highly secure HIPAA-compliant information sharing among care providers participating in MediQHome, BCBSND's quality program based on patient-centered medical home concepts.

In 2014, NMIC sold MDdatacor to Symphony Technology Group, a technology and services-focused private equity firm. Symphony will integrate the MDinsight tool with other population health management and data analytics technology to offer new high value analytical software. NMIC will continue to utilize the MDinsight platform to power MediQHome and will evaluate other Symphony tools to determine their value in the North Dakota market.

Services Provided
BCBSND has expanded to a full-service benefits administrator and offers dental and vision insurance, group life insurance, disability benefits and flex benefit administration. Operations currently include actuarial, communications, claims processing, finance, information technologies, legal, marketing, medical management, member services, provider relations, provider services and even more sub-specialty services under each category, such as quality control and cost containment efforts.

Location of Headquarters
BCBSND began with a small office located in downtown Fargo in 1940. The corporate office is now located at 4510 13th Ave. S., Fargo, with additional service offices located across the state in Bismarck, Devils Lake, Dickinson, Grand Forks, Jamestown, Minot, Valley City, Wahpeton and Williston.

Future Organizational Developments
The Company continues to make investments to streamline administrative and operational expenses.

2. Vendors responding to this RFP must be able to substantiate their financial stability. Provide a copy of your audited financial statement or other financial information. Include, at a minimum, a Balance Sheet and a Profit and Loss Statement, together with the name and address of the bank(s) with which you conduct business and the public accounting firm(s) that audit your financial statements. Other sufficient information may include a written statement from a financial institution confirming the creditworthiness and financial stability of the vendor.

   Please see Attachment 2 – Audited Financials for a copy of our 2013 Audited Financials. The name and address of our public accounting firm is listed on the fourth page of the attachment. Our primary banking relationship is with Wells Fargo. The address is 406 Main Avenue, Fargo, N.D., 58103

3. Provide a copy of any State or Federal regulatory audit performed within the last two years.

   A Targeted Market Conduct Examination was conducted October 2013 through May 2014. As of August 4, 2014, NMIC has not yet received a draft report from the North Dakota Department of Insurance with the final audit results. BCBSND will provide NDPERS copies of the audits upon completion and request by NDPERS.

   In addition, over the past two years NMIC has been subject to review of its administration of the North Dakota Children's Health Insurance Program (CHIP), also known as the Healthy Steps program, to confirm that program administration is being done in compliance with federal regulation set forth in 42 CFR 438.358 and Section 402 of the CHIPRA 2009 Legislation. These reviews are conducted annually by a third party at the direction of the North Dakota Department of Human Services. NMIC has consistently improved its compliance scores during these reviews.

4. Confirm that your organization agrees to be accountable for everything stated in and submitted as part of your proposal, even if not specifically addressed in the proposed sample contract/ASA.

   BCBSND is accountable for everything stated in and submitted as part of our proposal, even if not specifically addressed in the proposed sample contract/ASA.

5. Indicate whether your company has ever been or is currently a party to litigation regarding a medical benefit plan contract or agreement. If so, provide details of the litigation or action. Failure to disclose this may constitute grounds for rejection of any proposal or termination of any contract.

   BCBSND participates through its subrogation/reimbursement processes as a plaintiff in numerous class actions. NDPERS should already be in possession of most of the details

requested in regard to this litigation. Aside from these subrogation/reimbursement cases, in the late 1990s, BCBSND was involved in some litigation resulting in a settlement that required certain language changes in its service agreement. Otherwise, to its best information and belief, BCBSND has not been and is not currently a party to litigation regarding a medical benefit plan contract or agreement.

As covered in local media, BCBSND is currently in litigation with a former Medical Director over wrongful termination. While the lawsuit is employment based litigation, it does make accusations about the administration of BCBSND medical benefit contracts. BCBSND did inform NDPERS directly about this suit and our position that the claims have no merit. BCBSND is heavily regulated by both state and federal agencies that perform frequent audits to insure controls are in place. We are confident in our position on this lawsuit.

6. State whether the vendor, its officers, agents or employees, who are expected to perform services under the NDPERS contract, have been disciplined, admonished, warned, or had a license, registration, charter, certification, or any similar authorization to do business suspended or revoked for any reason.

No, BCBSND is not aware of any disciplinary action against our officers, agents or employees that would impact any license, registration, charters or certifications necessary to provide the services outlined in this proposal.

7. Include a description of your organization's major short term strategic initiatives and your long term strategic business plan. Specifically address cost containment efforts.

Blue Cross Blue Shield of North Dakota's mission is to deliver affordable solutions to improve the care and health of those we serve.

We have a multifaceted strategy designed to help us meet this mission:

- Offer products that have the best overall value in the market;
- Curb cost of healthcare on behalf of our members;
- Keep administrative costs to a minimum while maintaining the highest level of service;
- Offer products and services that comply with all state and federal regulations.

Each of these aspects of the overall strategy has both short term initiatives and long term goals.

Offer products that have the best overall value in the market

Short term initiatives
BCBSND takes pride in offering the most comprehensive products and services at the best prices in the market. We continue to enhance the services we offer including additional local expertise in health and wellness, new analytics packages, and additional self service capabilities.

Long term strategy
As a strong local company, BCBSND understands what North Dakotans value and incorporate these values into everything we do. We offer comprehensive access to both local and national providers at the most competitive rates in the state. We offer products that both comply with state and federal laws and align with the needs of North Dakotans. As the health insurance market and the health care delivery system evolve, BCBSND is committed to evolving with North Dakota to continue to offer the best value to our members and customers.

Curb cost of healthcare

Short term initiatives
BCBSND has several initiatives we are working on to ensure our members are getting the most for their health care dollar. We are moving from MS-DRG to APR-DRGs to further

align our reimbursement with our population. We continue to work on the transition from ICD-9 to ICD-10 which will allow for more accurate coding to track outcomes. We are also working on an enhanced version of our outcome-based reimbursement model.

Long term strategy
BCBSND will continue to support primary care practices in their transformation towards a patient centered care model, as well as incent health systems in their efforts to streamline all health care services.

Keep administrative costs to a minimum while maintaining the highest level of service

Short term initiatives
BCBSND is completing an analysis of overall functional administrative expense levels to identify areas where expenses may be reduced. The evaluation has identified multiple claims and customer service projects that will increase efficiency.

BCBSND also will be evaluating print, mail and distribution costs.

Long term strategy
BCBSND will continually look for efficient utilization of administrative expenses to offset the continued pressure exerted on administrative costs from a variety of sources, including regulatory changes, IT investments to ensure an ongoing functional infrastructure, and investments to be able to respond to member and market demands in an increasingly competitive market.

Offer products and services that comply with all state and federal regulations

Short term initiatives
BCBSND is working directly with the North Dakota Insurance Department (NDID) to increase and improve communication as we navigate the multiple changes in federal regulations. This communication will ensure compliance, while enhancing audit performance, and allows for input to the NDID on policy, compliance and regulatory changes.

Long term strategy
Together with our Governement Relations team, BCBSND will continue to strengthen its relationship with the NDID to ensure, timely and well-supported products, rate and financial filings, and enhanced audit performance.

8. Describe how your organization differentiates itself from your competitors. Specifically, what makes your organization the best partner for NDPERS?

North Dakotans serving North Dakotans
NDPERS is the largest group we serve in North Dakota, and because of this relationship we have been able to devote a dedicated service team to serve you, backed by the additional support of our entire staff of almost 800 North Dakota-based employees.

As a North Dakota company, we understand what it takes to serve our members well, because they are our neighbors and friends. We're active and engaged in all communities we serve, contributing not just as employees, but as parents, neighbors, leaders, friends and volunteers. We know the local employer and provider markets; we routinely meet with the thought leaders and decision makers. When customers or providers call, we show up.

Leading North Dakota Health Care into a New Era
BCBSND is leading the state's health care industry into a new era by focusing on five strategic pillars.

1. **Affordability**
   Affordable health care remains a major concern as we implement the Patient Protection and Affordable Care Act (PPACA) of 2010. We are working with health care providers and other stakeholders to find innovative solutions so health care in the

future is more accessible, more affordable and more efficient, while maintaining the quality we have all come to expect. We understand this is a monumental task, but we believe North Dakota can become a model for the rest of the country because of our shared commitment to a sustainable health care delivery system.

2. **Stewardship**
   As North Dakota's largest health insurer, we understand the major role we play in the success of the state's health care system. We pledge to our members and to the entire state that we will be good stewards of the resources with which we have been entrusted. We will work toward greater access, greater affordability and even higher levels of quality in the health care system. We will continue to be good citizens of the state by promoting wellness and lending our expertise to improve the quality of life and health in North Dakota. At BCBSND, we understand that every dollar that goes toward operating expenses is a dollar that could be going toward health care costs. While the average operating expense for other health insurance companies is close to 14 percent, at BCBSND, the operating expense is only 8.2 percent. These savings are passed on directly to our members through lower premiums.

   We continue to work to reduce administrative costs without impacting service or quality by leveraging technologies and processes.

3. **Excellence**
   For decades, BCBSND has been the standard of excellence in the state's health insurance industry. We extend that same intensity of purpose and expectation of excellence to everything we do, from working to make health care more affordable to being a good corporate citizen. We have high expectations for ourselves and we intend to meet them.

4. **Collaboration**
   Health care accounts for approximately 17 percent of the nation's gross domestic product and is projected to double in the next 30 years unless we are able to bend the cost curve in a substantive way. For BCBSND members, approximately 8 percent of all premium dollars are spent on administrative costs. That means we need to work with all stakeholders—health care providers, government officials and our members, just to name three—if we are going to stem the unsustainable rate of health care inflation. We are working with a multitude of partners to help us accomplish this goal.

5. **Engagement**
   Communication is the key to engaging all the necessary stakeholders in the monumental tasks we face to curb health cost increases. BCBSND is working to spread

the message that the current system is unsustainable and that there are solutions we can implement to ensure we have the access, affordability and quality that everyone expects of our health care system.

High Customer Satisfaction
BCBSND has been a health insurance leader in North Dakota for over 70 years. One reason is when our members call, they reach a person, not a menu of options. That commitment to service allowed us to achieve a 95 percent customer satisfaction score from our members in 2013.

Our performance is well above accepted industry standards:

- 99 percent of claims were paid in 30 calendar days in 2013.
- 99 percent of all claims were paid correctly in 2013

NDPERS members benefit from an extensive statewide provider network, as well as the national BlueCard network
Because BCBSND holds the largest share of market across North Dakota, we are able to offer NDPERS an unrivaled provider network and the largest discounts available from any carrier that can serve NDPERS as well as special discounts that go beyond normal provider discounts in North Dakota.

NDPERS members also have access to the BlueCard national network which allows for discounts negotiated by other Blue Cross Blue Shield plans nationwide to be passed through to the member, as well as the knowledge that their insurance card will be accepted almost anywhere they travel.

Our successful collaboration is working to impact cost and encourage a healthier population
Our collaborative relationship of more than 37 years has also allowed us to continually develop initiatives, business practices and programming that are advantageous to NDPERS.

Alternate profit sharing financial settlement option
Our offer of an innovative alternate profit sharing financial settlement option is an example of the benefits of this collaboration. BCBSND is once again providing NDPERS with two profit sharing options:

1. Continuation of current profit sharing arrangement.
2. An alternative arrangement which offers NDPERS greater participation in product experience. Implementing this arrangement will result in your full participation in collaborative efforts to bend the cost curve, and ultimately lower medical costs.

Please refer to Appendix K for details on the alternate arrangement.

There will be no gap in service — or quality — to NDPERS members
Our 37+ years together have given us an important advantage, which we do not take for granted. We have been fortunate to share in NDPERS's history, and know the system, leadership, people, legislative processes, expectations and members.

We have welcomed your frank suggestions to refine and change our deliverables and all communications, as well as continue to look for ways to deliver greater value and service to NDPERS members.

HealthyBlue – dedicated NDPERS portal
The dedicated HealthyBlue portal created for NDPERS will encourage a culture of prevention rather than treatment. This online health tool features health logs, workshops,

educational information, health assessment and other tools to help NDPERS members take control of their health. Wellness and worksite wellness programs are continually being refined and expanded.

Statewide collaboration is focused on improving North Dakota's health care system

Because we believe that North Dakota solutions are the key to addressing the issue of health care costs, we're continually collaborating with doctors, hospitals and clinics to improve our health care system, including:

- MediQHome Quality Program, our innovative and award-winning medical home program, improves quality and reduces cost by providing incentives for quality outcomes, a departure from traditional fee-for-service billing. This program rewards doctors for closely monitoring their patients with chronic health conditions that account for much of the nation's rising health care costs.
- MediQHome was evaluated and received the Blue Cross Blue Shield Association's Blue Distinction Total Care designation ensuring our network of medical home providers meet nationally recognized standards for quality.
- Hypertension Quality Improvement Program, a collaboration with the American Health Association, the American Stroke Association and the North Dakota Department of Health, has reached more than 10,000 BCBSND members with hypertension in the partners' first collaborative outreach. This program is part of BCBSND's MediQHome program.
- Consumer Transparency Initiatives provide our members the ability to compare — and comment — on treatment and cost of care received across the state.
- Paperless Explanations of Benefits (EOBs) and Authorizations, which will reduce both time and costs in the communication and administration of your members' claims.
- The Member Advocacy Program, created by BCBSND for members facing life-changing medical events, begins with a dedicated Member Advocate proactively reaching out to members and offering them assistance. Knowing that these families are often unprepared for the flurry of bills and insurance statements that result from a major medical event, the Member Advocate helps resolve billing issues with medical staff and facilities, and monitors claims to make sure they are processed correctly.

Strength in Numbers

BCBSND is proud to be the state's largest health insurer, as demonstrated by these statistics from the North Dakota Department of Insurance:

- Individual Market: 78.3 percent BCBSND market share*
- Small Group: Fully Insured (2-50 employees): 86.0 percent BCBSND market share*
- Large Group: Fully Insured (50+ employees): 96.4 percent BCBSND market share*
- BCBSND group retention rate: 95.4 percent of all available renewal groups and 98.0 percent when considering those lost to competitor (May 2014 data).
- BCBSND covers 60.3 percent of all North Dakota residents**
- Medicare Supplement: 71.3 percent BCBSND market share***

* Based on total covered lives reported in the Supplemental Health Care Exhibit for 2013 (as reported to the National Association of Insurance Commissioners) for all companies selling health coverage in ND.

** Based on Mark Farrah Associates, Health Coverage Portal for fourth quarter 2013

*** National Association of Insurance Commissioners – Medicare Supplement Insurance Experience Exhibit, 2013.

This type of market position allows BCBSND to do things that other insurance companies can't—like work to transform health care in North Dakota by improving quality and driving down the rising cost trend.

Awards
Federal Employee Program (FEP) Awards:

The FEP Awards are presented annually by the Blue Cross and Blue Shield Association (BCBSA) to Blue Cross and Blue Shield plans that provide excellent service to federal employees.

Plan Excellence Award

The BCBSA's Plan Excellence Award is the highest form of recognition for overall plan performance presented to BCBS plans participating in the FEP program. Plan Excellence Award scores are determined by combining the scores plans receive in the Excellent Service Profile Award and the Excellent Strategic Profile Award.

BCBSND has won the Plan Excellence Award in eight of the last nine years and 15 times since the award was introduced in 1991.

Excellent Service Profile Award

The Excellent Service Profile Award measures member satisfaction, accessibility, timeliness and accuracy of claims processing and responses to member inquiries, reconsiderations and appeals.

BCBSND has received the Excellent Service Profile Award in each of the last 21 years.

Excellent Strategic Profile Award

The Excellent Strategic Profile Award measures benefit costs, administrative costs and market growth.

BCBSND has received the Excellent Strategic Profile Award for 20 straight years.

Brand Excellence Award

The Blue Cross and Blue Shield Association (BCBSA) Brand Excellence Award was created in 1995 to recognize Blue Cross and Blue Shield plans nationwide in categories promoting the Blue brands. These categories include attracting new customers, fostering loyalty to existing customers, expanding the Blue brands into additional lines of products or services, and provider satisfaction.

BCBSND has received the Brand Excellence Award nine times:

- 1995 – Overall Score
- 1996 – Overall Score
- 1997 – Overall Score
- 1998 – Overall Score
- 1999 – Overall Score
- 2001 – Overall Score
- 2006 – Member Retention and Provider Satisfaction Categories
- 2008 – Provider Satisfaction Category
- 2011 – Member Retention Category

Best of Blue Award

Since 1998, the BCBSA has received more than 630 entries for the Best of Blue Award from BCBS plans nationwide. Of these entries, only 54 programs were recognized as meeting the criteria outlined in the Best of Blue program. The winning entries showcased BCBS plans' continued innovation and dedication to improving our nation's health care delivery system. BCBSND received Best of Blue awards for FEP program administration/ winning the award ten times: 2000, 2001, 2005, 2006, 2007, 2009, 2010, 2011, 2012 and 2013.

9. Identify all services that are currently outsourced or subcontracted, the name of the vendor/partner, and length of the relationship. Describe how you ensure quality customer service and timely and effective issue resolution.

BCBSND routinely contracts with third-party vendors for additional services. As such, it has business associate agreements and other types of contracts in place. These detail the terms of the agreement, including scope of services and conflict resolution provisions. If quality or performance issues develop, the group notifies BCBSND, and it is BCBSND's responsibility to resolve the situation according to the terms of these agreements.

Claims Processing:
CoreLink Administrative Solutions is a health care technology company that processes claims for BCBSND as well as the Nebraska and Wyoming Blue plans. BCBSND and Blue Cross Blue Shield of Nebraska launched the company in 2009. CoreLink is headquartered in Fargo, ND with over 200 employees located in North Dakota. CoreLink is managed by a board of directors that includes representation from the participating Blue plans, who are also the only customers. As part of their regular agenda, the board reviews any productivity or process issues, and recommends resolution options.

Disease Management:
Accordant provides rare and complex disease management. BCBSND began a relationship with Accordant in 2010. Quarterly reports are available for utilization monitoring and quality assurance, as well as annual return-on-investment analysis. In addition, there is a grievance process defined for both member and provider complaints.

Healthways is the vendor for our Disease Management program for out-of-state members. The goal of our disease management program is to motivate members and providers to engage in healthy behaviors. Quality customer service and timely and effective issue resolution are ensured through weekly communications between BCBSND and the vendor including a regularly scheduled conference call and prompt access to Healthways personnel as needed. Member satisfaction, quarterly reports, quality assurance monitoring and return-on-investment analysis are provided by Healthways.

The MediQHome Quality Program contracts with MDdatacor (MDD) to provide a decision support platform called MDinsight. BCBSND has had a relationship with MDD since 2008. In October 2011, MDD was acquired by the parent company of BCBSND, Noridian Mutual Insurance Company (NMIC). In April 2014, NMIC sold MDdatacor to Symphony Technology Group. MDdatacor is SOC 2 compliant and the platform and data exchange is HIPAA compliant. Quality assurance checks are performed weekly and there is continuous communications between the providers, MDD and BCBSND. BCBSND is involved with testing upgrades and intermittent product development.

Pharmacy:
Prime Therapeutics, LLC, has been the Pharmacy Benefit Management vendor for BCBSND for more than 17 years.

ClearStone Solutions, Inc. provides consulting services, program management, medical mangagement, compliance and regulatory services to health insurance plans in the

government business sector builiding including Medicare Part D, Advantage and Medicaid products.

Wellness:
BCBSND has partnered with the following vendors to assist with providing the current wellness programs:

Cerner provides online wellness tool HealthyBlue. Contractual partner since December 19, 2012. Quality of customer service and timely and effective issue resolution are contractual obligations regarding telephonic support, site uptime, portal performance and issue remedying.

New programs are also available from Cerner. Services such as onsite basic medical screens and health coaching may provide an increased level of customization that integrates based upon the specific needs of the NDPERS population.

National Independent Health Club Association (NIHCA) provides administration of the BCBSND Health Club Credit program. Contractual partner since January 1, 2008. Quality of customer service and timely and effective issue resolution are contractual obligations regarding standards and support metrics and reporting.

10. What ratings have you received from the following third party rating companies and organizations?

Rating Organization	Rating	Date of Last Accreditation / Rating
A.M. Best	N/A	
Standard & Poor's	BBB+	May 2014
Moody's	N/A	
NCQA (by product)	N/A	
	N/A	
JCAHO	N/A	
URAC	Full Accreditation for Health Utilization Management Full Accreditation for Health Plan and Health Plan for Health Insurance Exchange	Through 9-1-2015 Through 6-1-2017
American HealthCare Commission	N/A	

11. What fidelity and surety insurance or bond coverage do you carry to protect your clients? Specifically describe the type and amount of the fidelity bond insuring your employees that would protect this plan in the event of a loss. Do you agree to furnish a copy of all such policies for review by legal counsel if requested?

BCBSND has a crime insurance policy in the amount of $5 million. Upon request, we agree to provide a copy of the policy.

12. Are any of the services you are proposing to provide to NDPERS contracted outside the U.S.A? Describe any business you do outside the U.S.A. and the financial impact, if any, of requiring those services to be provided within the U.S.A.

All services proposed are provided domestically.

13. Confirm that your proposal includes any and all deviations to the sample ASA (via submission of Exhibit F) and to the other RFP requirements (via Exhibit F, worksheet 2).

    Confirmed.

14. Confirm that you will to the best of your ability conform to the Patient Protection and Affordable Care Act and the Health Care and Education Reconciliation Act of 2010. Describe any provisions that NDPERS must be prepared to comply with beginning July 1, 2015.

    BCBSND is committed to serving as NDPERS's primary resource for information about Patient Protection and Affordable Care Act (PPACA) and the Health Care and Education Reconciliation Act of 2010 and will revise NDPERS's benefit plan, programs and systems to ensure compliance.

    Since the inception of ACA, BCBSND has provided NDPERS access to our subject matter experts to work through the ACA key provisions including the employer mandate, eligibility, look back periods, affordability and reporting requirements. A pilot workgroup was formed including representatives from NDPERS, the Office of Management and Budget, agency staff and BCBSND to discuss implementation requirements. In addition, other state agency and political subdivision representatives were invited to a special ACA forum in July, where BCBSND staff presented on ACA provisions along with other state staff.

    BCBSND has worked with NDPERS to successfully implement the initial provisions of PPACA, including:

    - Expanded eligibility for adult children up to age 26
    - Elimination of pre-existing condition waiting periods for members younger than age 19
    - Elimination of lifetime and annual limits for essential benefits
    - Elimination of cost-sharing for preventive services, screenings and care as well as routine immunizations recommended by various government agencies
    - Expanded coverage for women's preventive benefits for non-grandfathered plans
    - Compliance with the PPACA Summary of Benefits and Coverage and Uniform
    - Glossary provision
    - Transitional Reinsurance Assessments
    - Patient Centered Outcomes Research Tax
    - PPACA Insurer Fee

    BCBSND will continue to work with NDPERS to implement additional provisions as required under PPACA. The following provisions will impact NDPERS during the next biennium, including:

Provisions	Non Grandfathered Plans	Grandfathered Plan
USPSTF – Alcohol Misuse	Impacted	Not Impacted
USPSTF – Hepatitus C Virus Screening	Impacted	Not Impacted
USPSTF – Preventive High Risk Breast Cancer Drugs	Impacted	Not Impacted
USPSTF – Lung Cancer Screening	Impacted	Not Impacted
Out of Pocket Maximum Definition Update	Impacted	Not Impacted
Removal of Waiting Periods	Impacted	Impacted

Conversion Language Updates	Impacted	Impacted
BlueCard Language Updates	Impacted	Impacted
20% Non Par Sanction Removal	Impacted	Not Impacted
Medical Qualification Language Removal	Impacted	Impacted
Member Rights and Responsibilities Language Added	Impacted	Impacted

*Provisions do not apply to retiree plans

In addition, effective the next biennium, 7-1-2015 – 6-30-2017, due to the **Mental Health Parity and Addiction Act (MHPAEA)** final rule, we will be removing the age limits from Psychiatric Residential Treatment Services. Previously, this benefit was limited to members under age 21. This restriction was removed to comply with the MHPAEA final rule.

6.1.2 References and Experience

15. Provide the following information on a maximum of three (3) of your largest medical plan clients for whom you provide medical network, insurance, and administrative services. References of similar size and scope to NDPERS are preferred; one must be your largest public sector client and one must be your largest North Dakota-based client.

Name of employer sponsoring plan and location:	Titan Machinery Inc. Fargo, ND
Type of services provided to plan sponsor:	Health
Plan inception date:	1998
Length of time as client:	16+ Years
Number of contracts and members participating in the plan:	1,882 contracts; 3,745 members
Contact Information (name, title, phone number, e-mail address):	Randy Johnson, VP of Human Resources (701) 356-0130 Randy.johnson@titanmachinery.com

Name of employer sponsoring plan and location:	Fargo Public Schools Self-Funded Insurance Program, Fargo, N.D.
Type of services provided to plan sponsor:	Health
Plan inception date:	mid-1970s
Length of time as client:	37+ years
Number of contracts and members participating in the plan:	1,405 contracts; 3,744 members
Contact Information (name, title, phone number, e-mail address):	Sheryl Lehman 701-446-1038 lehmans@fargo.k12.nd.us

Name of employer sponsoring plan and location:	Border States Industries, Inc.
Type of services provided to plan sponsor:	Health and Dental
Plan inception date:	1985

Length of time as client:	28 years
Number of contracts and members participating in the plan:	1,292 contracts; 3,122 members
Contact Information (name, title, phone number, e-mail address):	Sherri Sandvig, VP Human Resources (701) 239-7467 ssandvig@border-states.com

16. Provide the following information for two (2) of your largest medical plan clients that have terminated services during the preceding 3-year period. References of similar size and scope to NDPERS are preferred.

Name of employer sponsoring plan and location:	Coventry Health Care
Type of services provided to plan sponsor:	Health
Plan inception date:	2002
Length of time as client:	12 Years
Number of contracts and members participating in the plan:	352 contracts, 829 members
Reason for termination:	Acquired by Aetna
Contact Information (name, title, phone number, e-mail address):	Francis Babin, Manager, Benefits (301) 581-5449

Name of employer sponsoring plan and location:	Essentia Health
Type of services provided to plan sponsor:	Health
Plan inception date:	Mid-1990s
Length of time as client:	15+ years
Number of contracts and members participating in the plan:	Approx 1,700 Contracts, 3,400 members
Reason for termination:	Moved to Corporate Health Plan
Contact Information (name, title, phone number, e-mail address):	Dr. Greg Glasner, President and CMO (218) 435-1212 Greg.Glasner@EssentiaHealth.org

6.2 Implementation and Account Management

17. Proposers must outline in detail the specific activities and tasks necessary to implement the NDPERS program. Be specific with regard to the following:

- Amount of total time needed to effectively implement the program

  30 days prior to the open enrollment session launch.
- Activities/tasks and corresponding timing

  As the incumbent carrier, no transition will be needed and system changes will follow BCBSND group renewal processes already in place.
- Responsible parties and amount of time dedicated to implementation, broken out by vendor and NDPERS staff

  As the incumbent carrier, all processes are in place to support the renewal of the NDPERS plan.
- Any transition activities required with incumbent carriers, including providing members adequate notice regarding current care or treatment plans at least 60 days prior to a change

  Not applicable to BCBSND as incumbent.

- Length of time implementation team lead and members will be available to NDPERS.

  BCBSND currently has a team of employees dedicated to NDPERS. Our NDPERS team will ensure a smooth implementation every step of the way.

18. Provide an overview of how the NDPERS relationship will be managed, both strategically and on a day-to-day basis. Include an organizational chart. NDPERS will give preference to vendors who are willing to assign a dedicated account management team and provide access to senior leadership. Designate the names, titles, location, telephone numbers, and email addresses for the representatives listed below. For the account service individuals listed (b, c, d, and e below), provide brief biographical information, such as years of service with your company, experience as it relates to this proposal, and the number of clients for which they perform similar services.

    Strategically, the NDPERS relationship will be managed to engage the boards and executives in direct communication on organizational needs and direction. We will continue to work with NDPERS to address cost trends, legislative items, new product concepts and other issues impacting the cost and quality of care and coverage. On a day-to-day basis, we will continue to provide a dedicated account executive, an account manager, group consultant, wellness consultant and access to all levels of management and the BCBSND Board. NDPERS members will continue to receive the high quality they've come to expect from our dedicated member services team. Please see "Attachment 3 – BCBSND Organizational Chart" for the BCBSND organizational chart.

    a. The key individual representing your company during the proposal process;

       Tim Huckle, President and CEO

       A team of executives play a supporting role. Please refer to "Attachment 4 – Biographies" for biographical information.

       <u>Executive Support Team:</u>
       - Denise Kolpack, Senior Vice President of Corporate Communications and Public Affairs
       - Chief Marketing Officer
       - Brad Bartle, Vice President of Actuarial & Membership
       - Mark Tschider, Vice President of Customer Support & Claims Administration
       - Sharon Fletcher, Senior Vice President of Health Network Innovation and Human Resources and Development
       - Renay Rutter, Executive Vice President of Enterprise Planning and Technology
       - Daniel Conrad, Chief Legal Officer
       - Brian Fellner, Executive Vice President and Chief Financial Officer

    b. The key individuals on your proposed implementation team;

       BCBSND has an established cross functional implementation team with leadership representation from all business units. This team will be led by a dedicated Project Manager, Lacey Hogness.

    c. The key individual assigned to overall contract management;

       Kevin Schoenborn, Manager, Consulting Services - Account Executive

    d. The key dedicated individual or team members responsible for day-to-day account management and service;

       Your dedicated Account Management Team will coordinate with the BCBSND implementation to ensure all aspects of the NDPERS benefit plan are implemented timely and accurately. They will be supported by a team of Subject Matter Experts.

Please refer to “Attachment 4 – Biographies” for biographical information.

Account Management Team:

- Kevin Schoenborn, Manager, Consulting Services – Account Executive
- Dorinda Card, Director of Key Accounts
- Onalee Sellheim, State and Public Program Manager – Account Manager
- Sonja Nyhof, State and Public Program Manager
- Jodi Crouse, NDPERS Large Group Consultant
- Michael Carlson, Manager of Health and Wellness
- Stacy Duncan, NDPERS dedicated Wellness Consultant
- Sheri Srnsky, Team Leader, Special Accounts, Claims

Subject Matter Experts:

- Michelle Bishoff, Director of Claims Administration
- Tom Christensen, Manager of Pharmacy Management
- Zach Keeling, Director of Marketing Operations & Product Management
- Linda Merck, Senior Actuarial Analyst
- Lacey Hogness, Business Implementation Lead
- Mike Potts, Director of Employer Consulting & Wellness Services
- Carman Bercier, Vice President Health Innovation and Practice Innovation
- Jackie Walsh, Vice President Clinical Excellence and Quality
- Pam Gulleson, Vice President of Public Affairs
- Megan Houn, Director of Government Relations
- Brent Solseng, Pharmacy Manager Marketing
- Shelly Stalpes, Manager Claims Administration
- Jim Wynstra, Director of Actuarial
- Heather Horner, Member Education Consultant
- Miriam Griffin, Member Advocate Specialist

Please refer to “Attachment 4 – Biographies” for biographical information.

e. The key individual responsible for provider contracting; and

Sharon Fletcher, Senior Vice President Health Network Innovation and Human Resources and Development

Please refer to “Attachment 4 – Biographies” for biographical information.

f. The key individual responsible for provider relations if different than letter e. above.

Please refer to question 18 e.

19. Please provide the requested information for the functions that will be servicing NDPERS in the table below:

Area	Geographical Location(s) and Organizaiton Name (if out-sourced)	Hours of Operation (Specify PST/ CST/EST)	*Is this service Outsourced? Yes or No? If Yes, provide name of company to which the function is outsourced*
Member Service	4510 13th Ave S. Fargo, N.D. 58121	Monday – Friday 8 a.m.-5 p.m.	No
Claims Processing	4510 13th Ave S. Fargo, N.D. 58121	Monday – Friday 8 a.m.-5 p.m.	No
Enrollment, Eligibility, and Billing	Enrollment, eligibility and billing currently administered by NDPERS	Enrollment, eligibility and billing currently administered by NDPERS	Not Applicable
Disease Management	BCBSND MediQHome program for in-state members Fargo, N.D.	Admin support: 8 a.m.-4:30 p.m. (CST) Online access: Available 24 hours a day, 7 days a week	No
	Accordant (effective 8/1/2010) North Carolina	Admin support: Monday – Thursday: 8 a.m.-9 p.m. (EST), Friday: 8 a.m.-5 p.m. (EST) Online nursing: 24 hours a day, 7 days a week	Yes - Accordant
	Healthways Disease Management (Out of state members) Nashville, Tenn.	9 a.m.-5 p.m. (CST)	Yes - Healthways
Case and Utilization Management	4510 13th Ave S, Fargo, N.D.	8 a.m.-4:30 p.m. (CST)	No
Health, Education and Wellness Programs/ Services (including dedicated wellness support staff)	HealthyBlue online portal, South Burlington, VT	24 hours a day, 7 days a week	Yes - Cerner
	Health Club Credit Program, Granite Falls, MN	9 a.m.-5 p.m. CST Monday through Friday	Yes – National Independent Health Club Association (NIHCA)

Area	Geographical Location(s) and Organizaiton Name (if out-sourced)	Hours of Operation (Specify PST/ CST/EST)	*Is this service Outsourced? Yes or No? If Yes, provide name of company to which the function is outsourced*
	BCBSND (NDPERS Wellness Consultant), Fargo, ND	8 a.m.-5 p.m. CST, Monday through Friday	No
Pharmacy Benefit Management	Prime Therapeutics, LLC, Headquarters: Eagan, Minn. Other locations: Albuquerque, N.M.; Chicago, Ill.; Irving, Texas; Jacksonville, Fla.; Omaha, Neb.; Pittsburgh, Pa.; Washington, D.C.; Bloomington, Minn.; Birmingham, Ala.; Orlando, Fla.; Raleigh, N.C.	Pharmacy Contact Center: 24 hours a day, 7 days a week PrimeMail Contact: 24 hours a day, 7 days a week Member Services: 8 a.m.-4:30 p.m. (CST)	Yes – Prime Therapeutics
HSA	Discovery Benefits, Fargo, N.D.	Monday-Friday, 7 a.m.-7 p.m. CST	Yes - Discovery Benefits
Other (Specify functional area)			
Member Education & Engagement	Fargo, N.D., and Bismarck N.D.	Monday – Friday 8 a.m.-4:30 p.m. (CST)	No
Dedicated NDPERS Account Manager	Based in Fargo, N.D.	Monday – Friday 8 a.m.-4:30 p.m. (CST)	No
Northern Plains Alliance / ClearStone Solutions	Eagan, MN	8 a.m.-8 p.m. 7 days a week CST and MST	Yes - Northern Plains Alliance / ClearStone Solutions

Communications and Website

20. Please complete the table below by providing a description of the pre-enrollment communication materials you will provide to support NDPERS during its open enrollment period:

Area	Description	Can it be customized for NDPERS?
Website	BCBSND will provide a dedicated page on its primary website (www.BCBSND.com) to provide enrollment information, FAQs, contact information, and additional items deemed necessary by NDPERS.	Yes

Employee Newsletter(s)	BCBSND will provide original content addressing relevant insurance issues for the NDPERS employee newsletter. The content will support NDPERS's pre-enrollment and enrollment efforts.	Yes
Brochures	BCBSND supplies a PDF of the NDPERS PPO/ Basic and the HDHP benefits grid on the NDPERS website.	Yes
Direct mail (internal or home distribution)	BCBSND will develop HTML-based flyers and information messaging for email distribution. BCBSND developers will provide these to NDPERS Information Technology personnel for distribution, to ensure complete coverage of the membership.	Yes
Enrollment guide	As the current carrier, BCBSND supplies NDPERS with underwriting criteria to administer its enrollment.	Yes
Employee open enrollment meeting support and attendance	As the current carrier for NDPERS, BCBSND has a dedicated NDPERS account manager who can attend all open enrollment meetings upon request.	Yes
Benefits/HR staff training support	BCBSND's dedicated NDPERS account manager provides a benefit overview to all NDPERS agencies and NDPERS HR/Payroll areas upon request.	Yes
Video	BCBSND can deliver audio-visual presentations, Brainshark, tutorials, and educational materials in multiple ways. Distribution can be by physical media (DVD, CD-ROM), web pages, personal media player downloads, or a combination. Online distribution can be through BCBSND or by delivery to NDPERS Information Technology personnel.	Yes
Employee healthcare cost calculator worksheets (cost estimates)	BCBSND will assist NDPERS in complying with the Summary of Benefits and Coverage and Uniform Glossary provision of PPACA. The Summary of Benefits and Coverage provides employees with health care costs and estimates for certain episodes of care.	Yes
Other (please list)		

21. Are you willing to provide communication and marketing resources to work with NDPERS in the development of NDPERS-specific member communication materials (educational, open enrollment, benefit plan related, ongoing communications)? Describe the resources, sample communications, and your proposed approach and strategy/plan.

BCBSND is willing to provide these resources to NDPERS. As the current carrier, BCBSND currently provides a variety of communication and promotional materials to NDPERS members. Several worksite wellness materials are available on topics including smoking cessation, healthy diet, exercise and other health and wellness topics. Materials include a monthly wellness article with related poster, brochure and table tent.

In addition, member education and engagement materials are offered at the workplace through BCBSND's member education programs. Presentation topics include:

- Take Care of Yourself
- Walking Works
- HealthyBlue
- Health Club Credit
- Strength Training
- Beat the Bug
- Summer Safety
- Stress Management
- Medication Education
- Nutrition Basics for a Healthier You
- CPR and First Aid Basics

Various programs include a giveaway item to support the message, such as a pedometer for the Walking Works program or strength stretch bands for Strength Training.

BCBSND provides all benefit plan materials, including Summary Plan Description booklets, information grids summarizing member benefits and ID Cards. Worksite enrollment meetings are available and delivered by the NDPERS Account Representative on request.

BCBSND will continue to provide ad hoc marketing and communication strategies and proposals for specific needs outside the scope of the RFP. These strategies are developed by Corporate Communications and Marketing staff in collaboration with NDPERS staff; for example, the Wellness Engagement with the Lieutenant Governor.

22. How much lead time is necessary for you to guarantee that ID cards will be received by members prior to the plan year effective date of July 1, 2015?

BCBSND guarantees delivery of ID cards to members before July 1, 2015, as long as all required enrollment information is received by June 14, 2015.

23. Describe your plan for the post-65 programs that you will offer to NDPERS retirees.

With nearly 6,200 Medicare retiree contracts in the NDPERS group, BCBSND is committed to working with NDPERS staff to enhance benefits for this important segment of its membership.

Over a period of years a “look-alike” group Medicare Supplement Plan F benefit plan was developed for those retirees ages 65 and older. BCBSND also collaborated with NDPERS staff to mirror the prescription drug benefits for retirees and implement a NDPERS customized Part D prescription drug group product. BCBSND was able to offer this prescription drug product through its participation in the Northern Plains Alliance. Doing so allowed NDPERS to receive Part D subsidies from the Centers for Medicare & Medicaid Services (CMS), which reduced the overall cost for the program.

In addition, post-65 members currently have access to the MediQHome disease management program in-state, the Accordant disease management program and an out-of-state (OOS) disease management program. Wellness programming such as HealthyBlue and Health Club Credit are available to retirees and spouses. These programs and events provide information to educate and engage NDPERS retirees in their personal health and wellness.

BCBSND will continue its collaboration with NDPERS staff on innovative product and program ideas to address the unique needs of this segment of NDPERS enrollment.

Plan Administration

24. Confirm that you will communicate legislative changes related to the operations of the plan in a timely manner, and describe the support staff and process.

    BCBSND will communicate federal and state legislative changes in a timely manner. BCBSND maintains close relationships with state and federal elected officials and their respective staffs. Our Government Relations team, Pam Gulleson and Megan Houn, monitor federal and state bills and promptly notify internal staff of potential changes that could impact the NDPERS health plan. Megan Houn works out of the Bismarck office and Pam Gulleson is based in Fargo. The Account Management Team notifies NDPERS staff of potential changes. BCBSND Legal staff will provide guidance on these issues, but recommends NDPERS communicate with its legal counsel to confirm. BCBSND's Actuarial Team will provide pricing on legislative changes. BCBSND Contract Administration staff also works closely with the North Dakota Department of Insurance on notification of these changes. The Account Management Team works closely with NDPERS staff throughout the process.

25. Describe your proposed transition of care plan. At a minimum, the transition plan must address:

    a. Conditions or type of care that is typically transitioned;

       As the incumbent carrier, this is not applicable.

    b. Individuals who are in a course of treatment;

       As the incumbent carrier, this is not applicable.

    c. Transition process of current medical treatment;

       As the incumbent carrier, this is not applicable.

    d. Communication of transition issues to all plan members.

       As the incumbent carrier, this is not applicable.

26. What is your total commercial and Medicare health plan enrollment? Complete the table below.

Dates	Commercial	Medicare
As of January 2012	429,425	35,824
As of January 2013	456,590	36,690
As of January 2014	467,297	37,485

Please note: we are assuming "Medicare" to mean Medicare Supplement business and "Commercial" to mean all other business excluding Medicare Supplement. *Also, these enrollment totals are as of the end of January for each year (i.e., January 31).*

6.3 Eligibility and Billing

27. Are ID cards the sole means of determining member eligibility? If not, please describe.

    No, ID cards are issued to employees when their applications are processed. Eligibility is determined using the information from the last application received from the employee plus any additions (e.g. newborns automatically added from claims information) and deletions (e.g. dependents removed when no longer eligible). Members will receive a letter of termination upon request or automatically when a member is terminated. Members can also call the BCBSND service unit to verify eligibility status or visit BCBSND's website.

28. If desired, can NDPERS update and maintain eligibility and check employee claim status online? Are there any special charges for access to and use of these tools?

    NDPERS can check employee status through The Healthcare Online Resource (THOR). NDPERS updates and maintains their eligibility through the 834 file which is sent weekly. There are no charges for these services.

29. NDPERS will submit enrollment, billing and premium remittance via a centralized electronic system. NDPERS will collect enrollment/eligibility information which will be provided to the successful contractor on a data file that follows the HIPAA 834 file specifications. Premium payment information will be provided on a data file that follows the HIPAA 820 file specifications. Files will be transmitted using a secure file transmission process. Please confirm that you can receive this data in that format and media. Please confirm your ability to conform to this process and identify any potential issues.

    Yes, BCBSND can receive this format. As the incumbent, this process is currently in place for NDPERS.

30. Please describe how you handle manual eligibility updates and the turn-around/timing of such updates.

    BCBSND can accept faxes, phone calls and secured email attachments. Eligibility updates can be processed immediately, if necessary; otherwise, they can be processed within 14 days.

Customer/Member Service

31. Confirm if you will provide and maintain dedicated customer service staff acceptable to NDPERS. This unit will provide dedicated local and toll-free telephone numbers and shall respond directly to member inquiries regarding benefits, claim status, selecting participating providers, and provide general assistance with navigating on-line and other resources available through the health plan and NDPERS websites. Describe the structure and organization and provide an organizational chart of the unit you are proposing.

    BCBSND will continue to provide and maintain dedicated NDPERS customer service/ claims processing staff and provide dedicated local and toll-free telephone numbers for members. The dedicated staff will also continue to respond directly to members regarding benefits, claims status, selecting participating providers, and provide general assistance with navigating online and other resources available through the health plan and NDPERS websites. The dedicated customer service unit consists of nine customer service representatives who handle the daily customer service inquiries and claims processing functions, one coordinator who handles day-to-day functions/training of the service unit and one team leader.

    Please refer to “Attachment 5 - NDPERS Service Unit - Organization Chart” for the organizational chart for the NDPERS Service Unit.

    Member Advocacy Program (MAP)
    The Member Advocacy Program (MAP) is designed to be proactive in helping members facing life-changing medical events, such as newborns with congenital defects, pediatric cancers, transplants and traumatic injuries. The program identifies and serves families in these circumstances by proactively reaching out to these members and offering assistance through a Member Advocate. These individuals help those families understand their medical bills and insurance benefits, contacts providers to resolve billing problems, and monitors claims to ensure they are being processed correctly. Because these families have complex claims, the program allows them to contact the member advocates directly by phone or email when they have questions. These member advocates works with Medical Management and Case Management staff to facilitate effective, compassionate and cost-effective outcomes.

The program not only guides members with high-dollar complex cases, but it also promotes high efficiency in claims processing, reduces member confusion and stress and saves members money. The Member Advocate manages customer expectations during an extremely difficult time in the member's life, strengthening brand loyalty and customer satisfaction.

Annual Member Satisfaction Survey

BCBSND conducts a member satisfaction survey of calls to the NDPERS Member Services Department. Member overall satisfaction with service has consistently been above 90 percent with 2013 performance reaching 95% satisfaction.

6.4 Claims Administration

32. Provide the following information regarding the claims administration unit that will handle the NDPERS account. If there is more than one claims processing location, provide information for each.

	Claims Processing Unit
Address/Location	4510 13th Ave S. Fargo, ND 58121
Phone Numbers	Toll-free: 800-223-1704 Local: 701-282-1400
Days and Hours of Operation	Monday-Friday 8 a.m.-5 p.m. Central Standard Time (CST)
Number of Members Serviced	The dedicated NDPERS Service Unit provides service to all 65,000 NDPERS members covered under the NDPERS Plan. During July 1, 2013, through June 30, 2014, the NDPERS Service Unit handled 33,246 calls.
Number of Employer Groups Serviced	NDPERS has a dedicated service unit that exclusively handles NDPERS claims and customer service.
Ratio of Claims Unit Staff to Members Serviced	The NDPERS Service Unit is comprised of nine Claims and Customer Service Unit Staff to provide service to all 65,000 covered NDPERS Members; a ratio of 1:7,222.
Volume of Claims Processed Daily	During July 1, 2013, through June 30, 2014, an average of 3,052 claims were processed per day; this includes systematic and manually processed claims.

33. Will your organization identify a dedicated team of claims processors for the NDPERS account? If processors are shared with other clients, on average, how many clients does one team service? What is the average length of service of the claim processors?

Yes, BCBSND currently has a dedicated NDPERS Claims and Customer Service Unit that does not handle any other clients. The service unit consists of nine representatives who handle the customer service and claims processing functions for the NDPERS group, a coordinator that handles the day-to-day activities of the service unit and one team leader. The average length of service for the claims processors is five years, ranging from one year to 17 years.

34. Confirm that you are able to administer the NDPERS designs (Dakota Plan and Dakota Retiree Plan) and benefit levels without manual intervention. If you are unable to administer the plan, you must specify any plan design deviations proposed as specified in the RFP.

Yes, BCBSND is able to administer the NDPERS plan designs for the Dakota Plan and the Dakota Retiree Plan as requested by the NDPERS group. Claims are processed with minimal intervention. During the time of June 1, 2013 through May 31, 2014, BCBSND's first pass rate was 80.76 percent, claims received that were automatically processed by our claims processing system. Claims that hold for manual intervention require additional research such as medical records, workers compensation investigation or other insurance information.

35. Describe your claims processing system/platform and claims administration process.

BCBSND utilizes a mainframe-based, claims processing system designed and operated by CoreLink Administrative Solutions, a jointly owned company of BCBSND and Blue Cross Blue Shield of Nebraska. CoreLink claims processing systems have been developed with the primary objective of providing optimal services to all business. The claims system is, in reality, several systems, designed around classes of providers and their unique billing forms. These systems share a common membership database, which contains extensive contract/member eligibility information. These systems also share a common cost share file where deductible and coinsurance amounts, benefits maximums and other accumulators are tracked. The system is an integrated system that handles all claim and contract types.

Most claims received electronically process automatically through our claims processing system, but some may require manual intervention. If information regarding claims data, eligibility, other party liability or benefit coverage requires intervention, the claim is suspended in the system for manual review and resolved by a claims adjudicator.

Online claims maintenance allows the resolution to be posted to the claim on the system to reinitiate the automated processing of the claim for payment. The claims systems are real-time capable and prepared for the immediate adjudication of claims if the customer has those needs.

6.5 Reporting

37. Confirm your ability to provide the reports described in the RFP and provide samples.

    Confirmed.

    Please refer to Attachment 6 for samples of the standard reporting package. In addition, BCBSND's Consulting Services will provide ad hoc reporting to NDPERS as needed.

    BCBSND also publishes a quarterly NDPERS Executive Summary report, for the NDPERS Board, recapping financial and trend analysis, health utilization, claims and inquiry timeliness, wellness programs, account management and member engagement activities. Annually BCBSND presents a comprehensive analysis to the NDPERS Board. This analysis includes information about the demographics and health of the NDPERS population, utilization, health management, program evaluation, and member engagement. Opportunities and recommendations are also offered for review. Please see Attachment 7 for a sample of these Executive Summaries.

    Understanding the impact of PPACA is the first step to developing a benefits strategy that aligns with the emerging landscape. BCBSND understands this and offers NDPERS a modeling tool to determine the financial incentives to retain or remove coverage. This tool considers employer and employee subsidies and penalties in combination with specific demographic and income data to determine the level of incentive. BCBSND Consulting Unit will be able to provide NDPERS with the results of this tool, as well as in-depth analysis of the outcomes and will work with you to determine a strategy that best fits the needs of NDPERS.

    In addition, if a sample report has not been included in this RFP due to the nature of the information (e.g. Annual Accounting Statement, Monthly Experience report of premium), BCBSND confirms that all current reports provided to NDPERS will continue to be provided.

38. Describe your online reporting capabilities. Please describe the data/information and types of reports that can be accessed and downloaded from your online system.

    BCBSND's full suite of standard reports and data feeds are available on a secure website (The Healthcare Online Resource) for staff to access.

    BCBSND also offers access to Health Intelligence, an online reporting tool that allows for benchmarking and has drill down functionality to examine outliers and unique trends. The comprehensive Employer Group module features demographics, cost, utilization and risk analysis in print-ready Employer Profile Reports that can be set up on a periodic basis. Please see Attachment 8 for a sample of the Health Intelligence Employer Profile report.

39. Explain your ability to comply with the NDPERS current data warehouse arrangement by providing medical claims and enrollment data to NDPERS in a format agreed upon between you and NDPERS no less than monthly.

    As the incumbent, BCBSND will continue to send monthly data files through THOR to NDPERS in an agreed upon format that includes claims and enrollment data.

6.6 Case/Utilization Management

40. Provide a brief overview of your utilization management programs, including pre-certification, concurrent review, discharge planning, and large case management.

Preauthorizations: Registered Nurses complete reviews for the services that require pre-authorizations in accordance with established clinical criteria. Examples include:

- Home health care
- Skilled nursing facility/swing bed/transitional care unit
- Hospice
- Medical/surgical inpatient admissions to facilities non-participating with BCBSND
- Inpatient rehabilitation
- Long-term acute care
- Psychiatric/substance abuse inpatient admission, residential treatment centers, partial hospitalization, intensive outpatient programs

Concurrent Review/Discharge Planning: Concurrent review may be conducted to ensure that ongoing treatment is appropriate and includes discharge planning. Members with lengthy hospitalizations, high-risk diagnoses, readmissions, psychiatric and substance abuse admissions are most often in this category. Working in conjunction with the member and their providers, our staff supports discharge planning by providing information on benefits available for those services determined to be medically appropriate and necessary for the member's continued care and treatment.

Prior Approvals: In addition to preauthorizations for admissions, the following services or procedures require pre-notification to assess for medical necessity and appropriateness:

- Assisted reproductive technology (in vitro fertilization)
- Chronic pain management programs
- Cosmetic surgeries
- Dental anesthesia and hospitalization for members age 9 and older
- Electric wheelchairs
- Growth hormone therapy/treatment
- Human organ transplants
- Insulin infusion pump
- Obstructive sleep apnea treatment, except for continuous positive airway pressure (CPAP)
- Osseo integrated implants
- Prosthetic limbs controlled by microprocessors and any prosthetic limb replacement within five years
- Prosthetic limbs replacement within five years
- Restricted use drugs
- Rhinoplasty

Because services in these areas can be misused or overused without effective outcomes, specific medical necessity criteria have been established for these services. The member's health care provider will substantiate the medical need for the procedure and provide documentation of this in a written request. The provider and member are notified of the prior approval determination in writing.

Benefit Inquiries: The Medical Management staff provides assistance to members and health care providers with benefit medical appropriateness and necessity determinations. Benefit inquiries are questions about services that do not require prior approval.

Registered nurses provide assistance to members and health care providers with benefits determinations for medical appropriateness and necessity. Benefit inquiries are questions about services that do not require prior approval.

Chiropractic Review: BCBSND employs a part-time chiropractor who is responsible for the oversight of chiropractic utilization and management, including determinations of medical necessity and chiropractic medical policies.

Utilization Management Oversight: Medical policies, federal and state mandates, and departmental policies and procedures are in place to assist with medical necessity reviews to ensure consistency is applied to all requests. Federal and state mandates have been instituted around security, privacy and timeliness. All policies and procedures are reviewed on an annual basis, and employees are required to become familiar with any changes to updated policies.

BCBSND holds URAC (formerly Utilization Review Accreditation Commission) Health Plan accreditation. This accreditation requires compliance with numerous standards, security and quality measures, and ensures that processes surrounding reviewing for medical necessity are followed closely and according to set guidelines. The Health Plan accreditation standards focus on provider network management, credentialing, member relations, utilization management, and quality management. Accreditation requires the ability to demonstrate services offered to members, establish goals, showcase performances related to access of care, and availability of providers.

Large Case Management: During the course of any year, only a small percentage of the population experiences catastrophic accidents or illnesses, yet this small group accounts for a large portion of all health care costs. BCBSND's Case Management program recognizes the high cost of admissions and the emotional impact on members who have long-term, serious illnesses. Case managers help members obtain effective alternative health care solutions that are medically appropriate and necessary.

BCBSND's Case Management Team, consisting of registered nurses and licensed social workers, help to advise, educate and assist members and their families as they coordinate their medical care and treatment plans. Case Management coordinators facilitate communication between members and providers and work together to ensure collaborative decision making that takes the member's wishes and provider's recommendations into consideration. Case managers also help reinforce the importance to members of following their physician's treatment plan, while educating members and allowing them to be actively involved in their medical care. The Case Management Team conducts assessments of a member's needs through on-site visits, telephone interviews and analysis of reports to determine if a member could benefit from case management. The type of services provided varies, depending on each member's need and situation. For example, the Case Management Team may provide assistance with discharge planning from an acute setting, provide a member with educational material regarding an illness, discuss alternatives to current treatment plans with physicians or provide benefits for a service that might not normally be offered by their regular benefit plan. All options for potential intervention are explored in collaboration with the member/family, providers, community resources and BCBSND team members as a means of improving the member's health status while potentially reducing costs. Participation with case management is voluntary and does not alter other health benefits offered by the member's basic health care plan. It is a collaborative effort between the member, the member's health care provider and BCBSND.

For NDPERS, in the time period, April 1, 2013 to March 31, 2014, 83 members were screened for case management needs. This included both active employees and retirees. Of these members, 28 were intensely followed by a case management nurse. Data is used to identify members with potential risk of high costs and hospital admissions and to prevent frequent ER usage. Calculating the difference between the anticipated expenditures if case management services had not been provided (the original course of action) and the actual expenditures incurred as a result of case management intervention, the program's estimated cost savings for this time period were $237,060. Cost savings for case management generally varies due to the differing severity of cases managed.

Now that there is a dedicated Case Manager, a variety of reports have been developed (and they continue to develop as needed) and we are providing proactive outreach to NDPERS members and their providers. Some of the new reports that have been developed include:

- ER visits – if a member has had more than 3 in the last month
- Top 10 highest at risk for inpatient – based on risk scores
- High dollar members – review those over $400K

These are some additional reports that the Case Manager currently receives:

- Prenatal Plus-monthly to those who are high risk
- Individuals identified for MAP program
- Inpatient if over 7 days – screen these to determine if outreach is needed

41. What is the source of the criteria used for the following:

    a. Determining surgical necessity and whether a second opinion is required.

    To determine surgical necessity for any procedure, the procedure is reviewed to determine if it is a nationally recognized standard of care—e.g. diagnosis of breast cancer with request for mastectomy. The standard of care is identified with input from local providers or specialty organizations. In addition, opinions and evaluations by national and state medical associations or consensus panels are researched.

    To determine surgical necessity for specific procedures, the procedure is reviewed to determine if it is a nationally recognized standard of care. The standard of care is identified with input from local providers or specialty organizations. In addition, opinions and evaluations by national and state medical associations or consensus panels are researched.

    If a request is made for a procedure where a medical policy is in place, the clinical information is reviewed against the policy criteria. If documentation supports medical policy criteria for that procedure, approval is given for that request. If criteria are not met for that procedure, all information is sent to the Medical Director for review of medical appropriateness and necessity.

    BCBSND's Internal Medical Policy Committee reviews medical technologies according to the following technology assessment criteria that have been established by the national Blue Cross and Blue Shield Association (BCBSA) and endorsed by BCBSND:

    1. The technology must have final approval from the appropriate government regulatory bodies.

    2. The scientific evidence must permit conclusions concerning the effect of the technology on health outcomes.

    3. The technology must improve the net health outcome.

4. The technology must be as beneficial as any established alternatives.

5. The improvement must be attainable outside the investigational settings.

The Blue Cross and Blue Shield Association's Technology Evaluation Center (TEC) provides scientific analysis and opinions of complex medical technology issues. This information allows plan medical personnel to make decisions about which treatments best improve a patient's health outcomes, resulting in efficient use of health care resources.

Peer Reviewed Journals
Part of the research includes published reports and articles in the authoritative medical and scientific literature. The quality of the body of studies and the consistency of the results are considered in evaluating the evidence. The evidence should consist of well designed and well conducted investigations.

If the procedure does not have a medical policy in place and there is a question regarding medical appropriateness and necessity, it is sent to a Medical Director for review.

In cases where medical necessity is uncertain and the member requests a second opinion, the second opinion is covered by the plan. Should BCBSND have uncertainty if the procedure is medically necessary, we may request that a member obtain a second opinion to assist in our determination.

b. Determining approved length of stay.

BCBSND does not assign length of stay for the medical or surgical preauthorizations. BCBSND uses InterQual criteria to determine medical necessity of the admission. InterQual products are a gold standard in evidence-based clinical decision support. Criteria cover the medical and behavioral health continuums of care, so they can be applied in a range of clinical situations. Pre-payment DRG audits are conducted and include Level of Care, Transfers and Readmissions. Claims are held in the system for the Nurse Reviewer to determine if the appropriate level of care was utilized, if the correct discharge disposition code was assigned and if it was a premature discharge or planned readmission.

BCBSND uses Behavioral Health Medical Necessity Criteria for psychiatric and American Society of Addiction Medicine (ASAM) Patient Placement Criteria-2R for Substance Abuse preauthorization and continued stay/treatment for all levels of care, including inpatient, residential treatment, partial hospitalization and intensive outpatient treatment. The Behavioral Health Medical Necessity Criteria have been developed based on current psychiatric literature, including the criteria of the American Psychiatric Association, the American Academy of Child and Adolescent Psychiatry and the American Society for Addiction Medicine or other relevant evidence-based literature or information. On an annual basis, or more frequently as needed, the Behavioral Health Medical Necessity Criteria and ASAM Patient Placement Criteria-2R are reviewed and approved by the Internal Medical Policy Committee of BCBSND and with input from the provider community consistent with BCBSND policies and procedures.

c. What percentile of the data is used?

National length of stay percentiles are not used. BCBSND does not assign length of stay for the medical or surgical preauthorizations as reimbursement is based on DRG methodology. For behavioral health, length of stay determinations are based on clinical information provided for each preauthorization. BCBSND will review the clinical information received based on all relevant and necessary resources received. If the clinical information supports the medical necessity of the service, authorization will be provided for an initial period, with review for continued stay, as needed.

d. Approximately what percentages of review cases are referred to a physician because the initial review and attending physician cannot reach agreement on the proposed level of care?

There were 1,768 cases referred to the Medical Director out of 16,212 preauthorization/ prior approvals, for a 10.9 percent for the time period, July 1, 2013, through June 30, 2014. Cases are referred to the Medical Director when the information submitted does not meet the established and published criteria for the requested procedure or admission.

e. Does this percentage vary between medical/surgical and psychiatric/substance abuse cases? If so, provide variances.

Out of the 16,212 preauthorizations and prior approvals, 6.7 percent (832) were referred to a Medical Director. For Behavioral Health, 25 percent (936) were referred to a Medical Director.

6.7 Health Risk Management Programs

42. Indicate in the table below if you currently provide the care or disease management program listed, the number of members from ND-based employers currently enrolled, the cost per participant, and its accreditation status.

The request for program cost per participant is answered in one of two ways in the table below, either with the term "Included" or the phrase "Built into claims experience."

The term "Included" signifies that the particular program is included in the administrative costs as indicated in BCBSND proposed rates in the rate section.

"Built into claims experience" applies to those programs that are part of BCBSND's MediQHome initiative. In these programs, the providers doing the care management work MediQHome requires are paid for this work through the BCBSND claims processes.

Program	Number of Members Enrolled (ND)	Cost per Participant	Accredited? If so, indicate accrediting organization.
Arthritis	Accordant 73 NDPERS members for Q4 2013 HealthyBlue - Online Coaching 24 members in 2013	Included HealthyBlue Included	National Committee for Quality Assurance (NCQA) Cerner Yes: URAC
Asthma	MediQHome (In-state): 6,185 members Healthways DM (OOS) 89 members in 2013 HealthyBlue - Online Coaching 306 members in 2013	MediQHome Built into claims experience Healthways Included HealthyBlue Included	MediQHome No Healthways Yes: NCQA Cerner Yes: URAC
Cancer	HealthyBlue – Online Coaching 875 members in 2013	HealthyBlue Included	Cerner Yes: URAC

Program	Number of Members Enrolled (ND)	Cost per Participant	Accredited? If so, indicate accrediting organization.
Congestive Heart Failure	MediQHome (In-state): 357 NDPERS Members Healthways DM (OOS) 56 members in 2013 HealthyBlue – Online Coaching 402 members in 2013	MediQHome Built into claims experience Healthways Included HealthyBlue Included	MediQHome No Healthways Yes: NCQA Cerner Yes: URAC
COPD	Healthways DM (OOS) 52 members in 2013 HealthyBlue – Online Coaching 14 members in 2013	Healthways Included HealthyBlue Included	Healthways Yes: NCQA Cerner Yes: URAC
Depression	MediQHome (In-state): (in development) HealthyBlue – Online Coaching 4 members in 2013	MediQHome Built into claims experience HealthyBlue Included	MediQHome No Cerner Yes: URAC
Diabetes	MediQHome (In-state): 2,653 (Adult, Adolescent, and Child) Healthways DM (OOS) 366 members in 2013 HealthyBlue – Online Coaching 567 members in 2013	MediQHome Built into claims experience Healthways Included HealthyBlue Included	MediQHome No Healthways Yes: NCQA Cerner Yes: URAC
Low Back Pain	Healthways DM (OOS) 302 members in 2013 HealthyBlue – Online Coaching 7 members in 2013	Healthways Included HealthyBlue Included	Healthways Yes: NCQA Cerner Yes: URAC
High Risk Pregnancy/ Prenatal Support	Prenatal Plus Program 202 NDPERS members in 2013 HealthyBlue – Online Coaching 89 members in 2013	Included HealthyBlue Included	No Cerner Yes: URAC
Hypercholest-erolemia	HealthyBlue – Online Coaching 12 members in 2013	HealthyBlue Included	Cerner Yes: URAC
Pain Management	N/A	N/A	N/A

Program	Number of Members Enrolled (ND)	Cost per Participant	Accredited? If so, indicate accrediting organization.
Renal Failure	N/A	N/A	N/A
Smoking/ Tobacco Cessation	NDPERS Smoking Cessation Program July 2013-June 2014: 101 members enrolled. HealthyBlue – Online Coaching 121 members in 2013	Program Expenditures include administrative costs and claims July 2013-June 2014: Payments Per Member: $278 Paid through N.D. Department of Health grant (Tobacco cessation program is under separate Memorandum of Understanding) HealthyBlue Included	Endorsed by the N.D. Dept. of Health URAC Cerner Yes: URAC
Weight Management	HealthyBlue – Online Coaching 128 members in 2013	HealthyBlue Included	Cerner Yes: URAC
Hypertension	MediQHome (In-state): 9,844 NDPERS Members HealthyBlue – Online Coaching 273 members in 2013	MediQHome Built into claims experience HealthyBlue Included	MediQHome No Cerner Yes: URAC
Attention Deficit Hyperactivity Disorder	MediQHome (In-state): 590 NDPERS Members	MediQHome Built into claims experience	MediQHome No
Coronary Artery Disease	MediQHome (In-state): 1,370 NDPERS Members Healthways DM (OOS) 180 members in 2013 HealthyBlue – Online Coaching 601 members in 2013	MediQHome Built into claims experience Healthways Included HealthyBlue Included	MediQHome No Healthways Yes: NCQA Cerner Yes: URAC
Rare & Complex disease	Accordant Q4 2013, 313 active NDPERS members were included in the Accordant program	Accordant Included in Admin	Yes: URAC (Case Management) NCQA (Disease Management)

43. Briefly describe each of the programs currently offered and the cost of each program. Do you currently track and report specific clinical outcome measurements for each of the conditions for which care/disease management is offered? Please list them.

Accordant

BCBSND has contracted with Accordant to provide disease management services for complex and rare conditions. Accordant manages 17 diseases: amyotrophic lateral sclerosis (ALS), chronic inflammatory demyelinating polyradiculoneuropathy (CIDP), Crohn's disease, cystic fibrosis, dermatomyositis, gaucher disease, hemophilia, lupus, multiple sclerosis, myasthenia gravis, Parkinson's disease, polymyositis, rheumatoid arthritis, scleroderma, seizure disorders, sickle cell anemia, and ulcerative colitis.

Accordant offers personalized counseling and health evaluation to identify potential complications, a 24/7 nurse line, member education and self management techniques, and guidance finding resources. The company focuses on proactive care to avoid hospital admissions and crisis. Accordant nurses and social workers encourage member self-monitoring and management of disease-related symptoms and monitor compliance with current standards of care for the condition. Quarterly/monthly reports for clinical outcomes and participation are reviewed internally.

The cost of this program is included in the base administrative fee.

Prenatal Plus Program

Prenatal Plus is a voluntary educational support program for expectant mothers. Participants receive valuable information and support during their pregnancy supported by registered nurses. Participants screened as high-risk receive telephone calls on a monthly basis, whereas low-risk pregnancies receive outreach initially at 12-weeks gestation or at enrollment if a woman is beyond 12-weeks gestation, and again at 28-weeks gestation. There are multiple goals associated with the program, such as relaying as much education as possible to aid in a healthy pregnancy, encouraging collaboration with medical practitioners and early intervention for high-risk pregnancies. The expectant mother will receive a mailing, including a pregnancy calendar/journal, prenatal visit chart, pregnancy education, newborn care education, and a Taking Care of Your Child book.

BCBSND collects claim-based results (i.e. live births, caesarean section vs. vaginal delivery rates).

The cost of this program is included in the base administrative fee.

MediQHome Quality Program

MediQHome Quality Program (MQP) is a collaboration between BCBSND and providers to deliver the benefits of a patient-centered medical home.

A "medical home" is not a house, hospital or other building. Rather, it is a term used to describe a health care model in which individuals use primary care practices as the basis for accessible, continuous, comprehensive and integrated care. The goal of the medical home is to provide a patient with a broad spectrum of care, both preventive and curative, over a period of time and to coordinate all of the care the patient receives.

Providers who participate in MQP have access to MDinsight (MDI), an interactive decision support tool that organizes all available patient clinical data to create clinical summaries and quality reports specific to each patient. This interactive decision support tool stores information about care opportunities in one place and is easily accessible to the provider at the point of care.

MediQHome tracks the following clinical suites:

- Asthma
- Attention Deficit Hyperactivity Disorder
- Breast Cancer
- Cervical Cancer
- Chronic Heart Failure
- Colorectal Cancer
- Coronary Artery Disease
- Diabetes Adult, Adolescent, Child
- Hypertension Adult
- Hypertension Child/Adolescent
- Immunizations Adult & Adolescent
- Immunizations Childhood

BCBSND currently tracks and reports all clinical process, outcome measures and compliance rates for each clinical metric. They are available through the MediQHome MDinsight portal internally. In addition, providers currently have the ability to do their own organizational reporting for each of the clinical metrics through the MediQHome MDinsight physician portal. These reports are real-time based on clinical data submitted directly by the provider with minimal augmentation by claims data. Reports include patient specific care opportunities, goal progress reports and comparison information for all participants in the program.

BCBSND is focused on growing the program based on the overall vision which includes enhanced analytics, engaged providers, engaged members and quality outcomes.

The BCBSND plan for growth is a staged approach.

- Stage I
  - Collect baseline performance data.
  - Introduce risk adjusted care management fee for primary care providers with increased frequency.
  - Initial practice readiness assessment.

- Stage II
  - Practices must meet minimum requirements to enter stage II as determined from their readiness assessment and action plans to address gaps.
  - Introduction of total reimbursement targets.
  - Increasing care management fee amounts to offset fee schedule adjustments.
- Stage III
  - Practices must demonstrate medical home maturity through obtaining all components of advanced PCMH certification.
  - Maximum total reimbursement target maintained.

The cost for this program is included in the claims experience.

Out of State Member Disease Management

The goal of our disease management program is to create and maintain key desired behaviors of a population and of the providers who care for them. Our programs improve participant health status and participant provider satisfaction, thereby reducing health care costs and providing a positive return on investment. Specific clinical indicators for each program include improvement in the use of pharmaceutical therapies, improvement in testing values and improved participant satisfaction. Our programs incorporate all interventions necessary to optimize patient care and are based on the most up-to-date, evidence-based clinical guidelines.

Clinical outcomes for the following core conditions will be tracked and reported:

- Asthma
- Comprehensive Back Pain
- Coronary Artery Disease
- Chronic Kidney Disease
- Back/End Stage Renal Disease
- Chronic Obstructive Pulmonary Disease
- Diabetes
- Heart Failure

The cost for this program is included in the administrative fee.

Blue Distinction Total Care

In addition to this specific program, BCBSND is working with the Blue Cross Blue Shield Association to offer access to all Blue Cross Blue Shield value based outcome driven programs. Blue Distinction Total Care will provide national access to Blue value-based programs that are designed to demonstrate results in improving patients' health while managing costs. To earn the designation, each program must meet nationally consistent criteria for value-based reimbursement, accountability across the care continuum, patient-centered quality care and provider empowerment. Designated programs encourage a more collaborative, coordinated approach across the care spectrum – helping to ensure that employees and their families are receiving the right care at the right time. Access to these programs will be available to BCBSND members in 2015.

The cost for this program will be included in claims experience.

HealthyBlue

HealthyBlue includes all the functionality NDPERS expects from an online wellness experience:

- Exercise, food and weight trackers
- Enter and track their basic medical information like blood pressure, cholesterol and blood sugar
- Mobile application for smart phones
- "Community" function where they can find a diet buddy or talk to a dietitian or fitness trainer
- Online wellness workshops
- Customized challenges
- Articles to help members live a healthier life
- Meal planner for busy lifestyles

HealthyBlue includes specific online coaching programs including:

- Congestive Heart Failure
- Depression
- Diabetes
- Low Back Pain
- Hypercholesterolemia
- Weight Management
- Hypertension
- Coronary Artery Disease

BCBSND identifies and reports member participation subjective health scores, group aggregate health scores and member risk categories.

The cost for this program is included in the administrative fee.

Health Club Credit Program

BCBSND has contracted with the National Independent Health Club Association (NIHCA), a nonprofit organization that represents independently owned health centers across the nation, to administer this program. Each eligible member can earn up to a $20 health club credit per month when each member exercises at an NIHCA-affiliated health club 12 or more days in the month. Members are responsible to ensure their credits are recorded by the health club. Members are eligible for one credit a month and the credit amount cannot exceed the total monthly health club fee.

The cost for this program and the incentives are included in the administrative fee.

44. Are you willing to customize your care management/DM programs and services for NDPERS? If so, please explain and provide an example.

Yes, NDPERS has the ability to customize care management/DM programs. Healthways Disease Management is an example of customization being provided due to lack of geographical access to a MediQHome participating provider.

45. Describe the programs offered to patients with rare and chronic diseases. Is this program outsourced? Who is the current vendor?

BCBSND has contracted with Accordant to provide disease management services for complex and rare conditions. Accordant manages 17 diseases: amyotrophic lateral sclerosis

(ALS), chronic inflammatory demyelinating polyradiculoneuropathy (CIDP), Crohn's disease, cystic fibrosis, dermatomyositis, gaucher disease, hemophilia, lupus, multiple sclerosis, myasthenia gravis, Parkinson's disease, polymyositis, rheumatoid arthritis, scleroderma, seizure disorders and sickle cell anemia, and ulcerative colitis

Accordant offers personalized counseling and health evaluation to identify potential complications, a 24/7 nurse line, member education and self management techniques, and guidance finding resources. The company focuses on proactive care to avoid hospital admissions and crisis. Accordant nurses and social workers encourage member self-monitoring and management of disease-related symptoms and monitor compliance with current standards of care for the condition.

46. Describe in detail your ability to provide on line wellness programs. Compare it to the existing program presently in the NDPERS program (see our website). Specifically identify any deviations from the existing program.

BCBSND has contracted with Cerner to offer an industry leading health and wellness portal and mobile platform to NDPERS that has been branded HealthyBlue. NDPERS was transitioned to this enhanced platform in February 2012. BCBSND will continue to support this functionality throughout the next contract period. The HealthyBlue portal is customized with content and messaging specific to the NDPERS population. Enhancements in 2014 include the ability for members to report their physical activity using smart tracking devices such as FitLinxx and FitBit products. Enhancements also occurred within the HealthyNow mobile application that improves member experience and convenience.

47. Describe Wellness incentives you offer. Compare and contrast that with the existing incentives.

Through interaction on the HealthyBlue website and the BCBSND Health Club Credit Program (existing Wellness incentive design for NDPERS), members have the ability to earn up to $250 per year by participating in health and wellness activities. Members can receive up to $20 per month when exercising 12 days per month at an NIHCA-participating health club.

BCBNSD's online tools provide the ability to utilize a variety of points-based or utilization-based incentive models that reward participants for logging in, establishing action plans and completing assessments and sustained health management.

As a customization to earning points via online activity, NDPERS members also have the opportunity to earn points by engaging in wellness programs at their workplace.

This program is included in the base administrative fee.

Additionally, if appropriate and requested BCBSND has the capability to administer outcome-based wellness programs and incentives and has done so historically for multiple employer groups. Currently, multiple sources of data (clinical, claims and subjectively reported) are utilized to administer the participation and outcomes-based programs and incentives. BCBSND provides a comprehensive environment that administers the member experience, group level reporting and differing channels for application of incentives (online catalog, premium differential and HSA/HRA contribution).

48. Describe your ability to support NDPERS Wellness initiatives by providing the administrative services for:

a. Tobacco Cessation program (This program is coordinated with the ND Department of Health): BCBSND collects enrollment data and administers ID cards to the enrollees. BCBSND summarizes the subsequent claims information for counseling, physician visits and medication claims. A quantitative report is provided throughout the biennium,

presenting demographics of participants, biennium categories, expenditures and the overall program expenditures by biennium period. This is a separate Memorandum of Understanding (Tobacco Cessation Program agreement) and BCBSND will continue to work with NDPERS to administer this program.

b. NDPERS Diabetes Program: BCBSND has supported the About the Patient diabetes management program since its inception. BCBSND provided the initial project management expertise in all phases of program implementation, including initial identification of disease-eligible members, promotional materials and mailing lists. BCBSND continues to support the program by providing continuing enrollment eligibility, calculating member cost share reimbursement, disbursing funds for member cost share reimbursement and disbursing funds for provider reimbursement. In addition, BCBSND provides claim data for program assessment. This is a separate Memorandum of Understanding (Pharmacy Disease Management Program agreement) and BCBSND will continue to work with NDPERS to administer this program.

c. Dedicated Wellness Program Staff: BCBSND will continue to provide a dedicated Wellness Consultant to NDPERS to support and provide direction to the NDPERS wellness coordinators, develop and implement communications strategies and evaluate programs.

   New in 2014 was the creation and launch of the Lieutenant Governor's Worksite Wellness Award that is awarded to qualifying NDPERS Worksite Wellness agencies and or political subs for meeting tiered pre-determined criteria for programs that follow established best practices.

   Promotional/Educational Campaigns: Group Communication Materials - monthly health promotion campaign that follows recognized monthly health observances based on evidence-based medical guidelines. The materials are delivered directly to an organization for distribution to employees on a monthly basis. Targeted Outreach Campaigns – are provided directly to members who are identified as an opportunity for such things as cancer screening compliance and Did You Know campaigns.

d. Prenatal program

   Prenatal Plus is a voluntary educational support program for expectant mothers. Participants receive valuable information and support during their pregnancy supported by registered nurses. Participants screened as high-risk receive telephone calls on a monthly basis, whereas low-risk pregnancies receive outreach initially at 12-weeks gestation or at enrollment if a woman is beyond 12-weeks gestation, and again at 28-weeks gestation. There are multiple goals associated with the program, such as relaying as much education as possible to aid in a healthy pregnancy, encouraging collaboration with medical practitioners and early intervention for high-risk pregnancies. The expectant mother will receive a mailing, including a pregnancy calendar/journal, prenatal visit chart, pregnancy education, newborn care education, and a Taking Care of Your Child book.

   BCBSND collects claim-based results (i.e. live births, caesarean section vs. vaginal delivery rates).

   The cost of this program is included in the base administrative fee.

49 (A). Describe you're ability to support the employer based wellness program and the wellness benefit funding program (see our website).

BCBSND has a history of supporting NDPERS staff and Wellness Coordinators with the Employer Based Wellness Program and the Wellness Funding Program. The NDPERS Wellness Consultant at BCBSND assists employees and employers with their wellness initiatives. This consultant conducts monthly coordinator calls and annual workshops across the state, prepares monthly newsletters, assists with online wellness tools, develops various challenges for participants, coordinates monthly wellness stars and

other group communication items. The dedicated NDPERS Wellness Consultant also represents BCBSND on the Wellness Committee that reviews submitted applications. Recent examples of customized activities include:

1. Created additional functionality in HealthyBlue specifically for NDPERS members. (i.e. the Community Event Participation tracker)
2. Added in 2014 an online tutorial for HealthyBlue and quarterly BrainShark presentations on latest trends in Wellness.
3. Offer a discounted registration fee for NDPERS Wellness Coordinators attending Gearing Up.
4. Lt. Governor's Award was created specifically for NDPERS Agencies and Political Subsdivisions. Award winners receive FREE registration to ND Worksite Wellness Summit. We received 31 applications and will be presenting 24 awards.
5. Annually coordinate the National Walk at Lunch Day at the capitol in the spring and a Retiree Health Fair in the fall.
6. Created specific programs for NDPERS Wellness Coordinators such as, "Sit for 60, Move for 3", "Vaccination Awareness" and "Take the Stairs."

BCBSND has two Member Education consultants strategically located across the state to conduct worksite presentations for employees on various wellness related topic, in support of the Employer Based Wellness Programs. The NDPERS Wellness Consultant coordinates the awarding of employee participant voucher points to the BCBSND HealthyBlue Online Wellness Tool.

Once the funding application is evaluated and approved by the Wellness Committee, NDPERS staff provide notification to BCBSND to make payment out of the NDPERS Cash Reserve account held at BCBSND.

This program has a separate Memorandum of Understanding (NDPERS Wellness Benefit Program Agreement) and BCBSND will continue to work with NDPERS to administer this program.

6.8 Network Accessibility and Disruption

49 (B). We are requesting that vendors provide a GeoAccess network accessibility and disruption analysis outlining network access based on the access standards listed below separately by North Dakota County. If you are proposing a combination of owned and leased networks, please provide your results separately by network. This GeoAccess analysis must be provided for your proposed NDPERS network(s). A census file has been provided in Appendix E for your use.

Provider Type	Access
Primary Care Providers (family/general practice, pediatrics, internal medicine and OB/GYN)	2 providers within 30 miles
Specialists	2 providers within 30 miles
Hospitals	1 hospital within 50 miles

Please provide the GeoAccess summaries in the table below as well as back-up detail (back-up detail on CD submission only) for employees who fall both within and outside the following access standards. Your match should include all valid zip codes in each of the counties in North Dakota that your network serves and in which participants reside. In addition, you should include only open practices in your analysis.

The response provided to this question includes trade secret, proprietary, commercial, or financial information that is of a privileged nature and has not been previously publicly disclosed. This information is confidential and is prohibited from being

opened to the public. Please refer to the "Summary of Proprietary, Confidential and/or Trade Secret Information" for a summary/checklist of all specific items identified as trade secret as required under the "Unique Content Requirements – Requirement #5".

Please see "Attachment 9 - GeoAccess" for the electronic version on the CD submission for the back-up detail to the GeoAccess summaries in the table below.

Counties	State	Member Count	Family Practice	Peds	Internal Medicine	OB/ GYNs	Specialists	Hospitals
			2 in 30 miles	2 in 30 miles	2 in 30 miles	2 in 30 miles	2 in 30 miles	1 in 50 miles
ADAMS	ND	72	100.0%	100.0%	100.0%	0.0%	100.0%	100.0%
BARNES	ND	505	99.6%	7.5%	99.2%	7.7%	99.6%	100.0%
BENSON	ND	107	100.0%	67.3%	45.8%	0.0%	72.9%	100.0%
BILLINGS	ND	28	3.6%	3.6%	3.6%	3.6%	3.6%	100.0%
BOTTINEAU	ND	272	93.8%	2.9%	4.0%	4.0%	9.6%	100.0%
BOWMAN	ND	89	100.0%	100.0%	100.0%	0.0%	2.2%	100.0%
BURKE	ND	53	94.3%	0.0%	0.0%	0.0%	7.5%	100.0%
BURLEIGH	ND	5,475	99.7%	99.6%	99.6%	99.5%	99.7%	100.0%
CASS	ND	3,937	100.0%	98.7%	99.6%	99.2%	100.0%	100.0%
CAVALIER	ND	177	99.4%	0.0%	4.0%	0.0%	98.9%	100.0%
DICKEY	ND	125	100.0%	0.0%	100.0%	0.0%	100.0%	100.0%
DIVIDE	ND	86	97.7%	1.2%	1.2%	1.2%	1.2%	100.0%
DUNN	ND	136	41.2%	27.9%	27.9%	27.9%	39.7%	100.0%
EDDY	ND	77	100.0%	5.2%	3.9%	0.0%	89.6%	100.0%
EMMONS	ND	87	100.0%	3.4%	4.6%	3.4%	97.7%	100.0%
FOSTER	ND	111	100.0%	0.0%	0.0%	0.0%	100.0%	100.0%
GOLDEN VALLEY	ND	26	84.6%	0.0%	0.0%	0.0%	0.0%	100.0%
GRAND FORKS	ND	3,664	100.0%	98.6%	98.7%	99.2%	99.6%	100.0%
GRANT	ND	59	93.2%	47.5%	61.0%	0.0%	0.0%	100.0%
GRIGGS	ND	80	100.0%	0.0%	1.3%	0.0%	1.3%	100.0%
HETTINGER	ND	49	100.0%	100.0%	100.0%	36.7%	42.9%	100.0%
KIDDER	ND	68	58.8%	0.0%	7.4%	0.0%	0.0%	97.1%
LAMOURE	ND	129	90.7%	14.7%	90.7%	14.7%	82.9%	100.0%
LOGAN	ND	65	100.0%	0.0%	92.3%	0.0%	6.2%	100.0%
MCHENRY	ND	131	86.3%	45.0%	42.0%	42.0%	80.2%	100.0%
MCINTOSH	ND	83	100.0%	0.0%	100.0%	0.0%	69.9%	100.0%
MCKENZIE	ND	66	92.4%	19.7%	21.2%	21.2%	21.2%	100.0%
MCLEAN	ND	254	99.6%	7.1%	6.7%	6.7%	12.6%	100.0%
MERCER	ND	125	100.0%	0.0%	0.0%	0.0%	100.0%	100.0%
MORTON	ND	1,401	98.6%	89.7%	92.4%	87.3%	93.2%	100.0%
MOUNTRAIL	ND	169	99.4%	0.0%	0.0%	0.0%	0.0%	100.0%
NELSON	ND	135	100.0%	35.6%	35.6%	0.0%	43.7%	100.0%
OLIVER	ND	46	100.0%	32.6%	32.6%	21.7%	67.4%	100.0%

Counties	State	Member Count	Family Practice	Peds	Internal Medicine	OB/ GYNs	Specialists	Hospitals
			2 in 30 miles	2 in 30 miles	2 in 30 miles	2 in 30 miles	2 in 30 miles	1 in 50 miles
PEMBINA	ND	238	100.0%	0.0%	100.0%	0.0%	100.0%	100.0%
PIERCE	ND	88	100.0%	9.1%	0.0%	0.0%	100.0%	100.0%
RAMSEY	ND	775	99.7%	99.0%	99.0%	0.0%	99.6%	100.0%
RANSOM	ND	287	100.0%	0.0%	95.5%	0.0%	100.0%	100.0%
RENVILLE	ND	38	44.7%	28.9%	28.9%	28.9%	57.9%	100.0%
RICHLAND	ND	499	100.0%	70.1%	100.0%	96.0%	100.0%	100.0%
ROLETTE	ND	345	100.0%	0.0%	0.0%	0.0%	13.3%	100.0%
SARGENT	ND	73	100.0%	0.0%	100.0%	0.0%	100.0%	100.0%
SHERIDAN	ND	40	100.0%	12.5%	0.0%	0.0%	0.0%	100.0%
SIOUX	ND	17	70.6%	41.2%	52.9%	35.3%	58.8%	100.0%
SLOPE	ND	5	100.0%	100.0%	100.0%	0.0%	0.0%	100.0%
STARK	ND	1,029	100.0%	99.6%	99.6%	99.1%	99.1%	100.0%
STEELE	ND	44	100.0%	0.0%	18.2%	70.5%	88.6%	100.0%
STUTSMAN	ND	1,215	99.8%	97.7%	98.9%	98.0%	98.5%	100.0%
TOWNER	ND	57	96.5%	0.0%	0.0%	0.0%	0.0%	100.0%
TRAILL	ND	406	100.0%	9.6%	9.6%	100.0%	100.0%	100.0%
WALSH	ND	665	100.0%	2.1%	95.9%	2.1%	100.0%	100.0%
WARD	ND	1,463	99.5%	96.2%	96.3%	96.4%	97.6%	100.0%
WELLS	ND	64	100.0%	85.9%	0.0%	0.0%	28.1%	100.0%
WILLIAMS	ND	893	100.0%	94.8%	95.0%	94.8%	95.0%	100.0%
Total		26,128	98.9%	78.5%	87.0%	76.0%	91.4%	100.0%

50. Provide a listing or provider directory and link to the web for the provider networks you are proposing for NDPERS.

BCBSND has strong provider relationships through a variety of payer strategies. Our contracted network for NDPERS PPO currently includes 99.6 percent of all providers in North Dakota. BCBSND's business relationship is fostered by industry leading payment schedules and consistent claims payment accuracy and timeliness. The Provider Relations staff maintains strong relationships with providers by adhering to high standards for provider service, collaboration and responsiveness. The complete list of NDPERS PPO participating providers can be found under "Attachment 10 - NDPERS PPO Providers".

The link to the website for the provider networks is:
https://www.BCBSND.com/cgi-bin/ntwksearch.cgi — Under Health Plan select NDPERS PPO

51. Identify and describe your national preferred provider organization.

BCBSND contracts directly with providers within the state of North Dakota and one contiguous county into Minnesota, South Dakota and Montana.

Additional providers are available through a BlueCard Network arrangement with Blue Cross Blue Shield plans in other states. If a member travels out-of-state and has to receive medical treatment, the out-of-state provider can submit the claim to the Blue Cross Blue Shield plan in that state, which is known as the host plan. Through the Interplan Teleprocessing System, Blue plans from across the country can communicate to get the

claim paid just like a regular in-state claim. As long as the provider is a Blue participating provider, members receive the normal provider discounts negotiated by the host plan. Those BlueCard discounts saved BCBSND members over $228 million in 2013, In 2013, BCBSND processed more than 1.8 million BlueCard claims.

BlueCard also benefits members who travel out of the country and need to have services, through BlueCard Worldwide. The Blue Cross and Blue Shield Association contracts with a medical assistance vendor to negotiate rates with out-of-country providers.

52. Confirm your willingness to negotiate and maintain NDPERS-specific provider contracts to allow for cost control mechanisms and alignment of contract and plan years. Describe your process and approach for accomplishing this.

BCBSND has had relationships with North Dakota providers throughout its history. BCBSND contracted networks for NDPERS PPO currently includes 99.6 percent of all providers in North Dakota. These business relationships with providers are fostered by competitive payment schedules and consistent claims payment accuracy and timeliness. BCBSND maintains relationships with providers by adhering to high standards for provider service, collaboration and responsiveness.

Provider relationships have evolved to the point where BCBSND has contracts with providers that renew automatically. These contracts deliver what are believed to be the best provider discounts available in North Dakota as evidenced by BCBSND's strong market share in the state. These provider relationships also give NDPERS its own exclusive 5 percent discount in addition to standard BCBSND provider reimbursement.

53. Do you anticipate any significant provider contract changes for 2015? Describe.

BCBSND is leading a collaborative effort that will focus on strategies to influence cost, promote efficiency, improve quality of care and maintain member access to health care services. BCBSND launched Blue Value Partnership (BVP), a program designed to encompass our strategic objectives moving forward. Phase I of BVP starts in 2014 and includes advanced imaging performance measures to ensure appropriate utilization of high tech diagnostic imaging services (MRI, CT, PET scans, etc).

BCBSND wants to empower our providers and members to make changes that support lower cost and appropriately delivered care. BCBSND has identified several opportunities for future initiatives that would fit well into the BVP program. Future BVP phases and performances measures will be developed with the assistance of a clinician-lead quality committee.

6.8.1 Cost, Quality and Pay for Performance

54. Describe the programs and methodologies currently in place to gather and measure meaningful provider quality and efficiency data that can be shared with members.

The Blue Cross and Blue Shield system believes that engaging and empowering consumers to make more knowledgeable health care decisions is a fundamental priority. BCBSND is joining all Blue Plans across the country in participating in a collection of programs sponsored by the Blue Cross and Blue Shield Association, collectively known as the Consumer Transparency Initiatives. Each initiative is designed to give consumers a transparent view of the health care systems in their community. This will enable consumers to choose a facility and/or provider that best meets their needs.

Physician Quality Measurement (PQM) – This program displays physician performance measures to assist members in selecting a provider. The program is based on select HEDIS® physician performance measures selected by the Blue Cross and Blue Shield companies' clinical measurement experts. BCBSND has chosen to use measurement criteria available through the MediQHome Quality Program.

Please refer to Attachment 11 – Physician Quality Measurement for more details on this program.

Blue Physician Recognition (BPR) – complementary to PQM initiative – The BPR program is designed to reinforce Blue plans' commitment to quality by providing more meaningful and consistent information on physician quality improvement and recognition. Blue plans will identify groups and practices that have "demonstrated their commitment to delivering high quality and patient-centered care." In North Dakota, all participating MediQHome Quality Program participating providers will receive the BPR designation.

Please refer to Attachment 12 – Blue Physician Recognition for more details on this program.

Patient Review of Physicians (PRP) – PRP is an online tool for reading and writing reviews of physicians and professional providers nationwide. BCBSND members will need to log into our member portal to leave a review.

Please refer to Attachment 13 – Patient Review of Physicians for more details on this program.

National Consumer Cost Tool (NCCT) – The purpose of NCCT is to enable members to obtain information on estimated costs for common health care services. The categories or conditions will be based on the member's specific benefit plan, including total cost for service and out-of-pocket balance.

We all recognize the value of this transparency and our intention is to provide quality information to our members. BCBSND looks forward to progress on providing increased transparency and sharing useful quality data with our members.

55. Describe in detail the performance standards you currently have in place with your contracted physicians, provider groups, hospitals, and other providers. Outline the types of measures utilized, how you monitor and track these measures, how providers are held accountable, and how frequently the data is compiled and shared with the physicians and provider groups.

With more than 350 value-based programs in market or in development, Blue Plans are the undisputed market leaders in developing and executing groundbreaking forms of value-based care delivery that reward providers for improved outcomes. By encouraging more than 215,000 providers to shift from fee-for-service to incentive programs that drive improvements in both quality and costs, the Blues are improving the value of healthcare.

With the 2015 launch of Blue Distinction Total Care, these innovative programs developed by Blue Plans across the country will be integrated into a single nationwide solution for employers which BCBSND will be a part of.

Blue Distinction Total Care will provide national access to Blue value-based programs that are designed to demonstrate results in improving patients' health while managing costs. To earn the designation, each program must meet nationally consistent criteria for value-based reimbursement, accountability across the care continuum, patient-centered quality care and provider empowerment. Designated programs encourage a more collaborative, coordinated approach across the care spectrum – helping to ensure that employees and their families are receiving the right care at the right time.

BCBSND's local patient centered medical home program, MediQHome, was evaluated and received the BDTC designation ensuring our network of medical home providers meet nationally recognized standards for quality.

BCBSND has been a leader in encouraging the patient-centered care model through the MediQHome program over the last five years. The positive results have been remarkable.

For example, MediQHome contributed to a reduction in admissions from 2009 to 2010 of approximately 200 inpatient admissions. This accounts for about seven million dollars in savings.

MediQHome is a program aimed at improving the quality of care for patients with chronic conditions (such as asthma, ADHD, coronary artery disease, congestive heart failure, diabetes, and hypertension), as well as to increase compliance in preventive screenings (breast, cervical and colorectal cancer screenings and immunizations). Please refer to Attachment 14 – MediQHome Clinical Suites for more details on the MediQHome clinical suites.

Quality is measured through disease-specific metrics derived from evidence-based care guidelines. Reporting is provided to each provider group, with drill-down capabilities to individual providers, that details their quality performance, gaps in care by condition, and trending of performance over time. In addition, provider groups' quality scores are compiled in aggregate, ranked based on score, and then placed into tiers depending on their rank. Reporting is produced quarterly for metric trending and quality tiers.

Over 75% of North Dakota primary care physicians participate in MediQHome and are eligible to receive incentive payments twice per year. The incentive payments help compensate providers for the time and money spent on care management outside the traditional face-to-face visit. Providers who achieve improved clinical outcomes for their total patient population have the opportunity to earn additional revenue.

56. Describe your participation in pay-for-performance initiatives. To what extent do these activities impact the health care costs of NDPERS or claims incurred by its covered population?

BCBSND is developing a sustainable health care system which includes a pay-for-performance model. The intent of this initiative is to reduce the overall health care cost trend each year. The future system will include operational and payment strategies to influence overall cost, support reasonable provider profit, improve quality and maintain member access. Payment mechanisms will reward providers for quality and efficiency.

The MediQHome program will be expanded to all eligible providers and patients (including NDPERS members) in North Dakota and will provide the mechanism for physicians and care management teams to manage all aspects of a patient's health.

The current care management fee in MediQHome will evolve into other forms of payment including risk-adjusted care management fees, bundled payments and global payments. Providers will increasingly move from the current fee-for-service payment system to at-risk bundled and global payments such as capitation. Base payment levels for provider systems will be adjusted based on patient health risk levels and providers' clinical performance in relation to predetermined performance standards.

6.8.2 Credentialing and Contracting

57. Briefly describe the initial credentialing process. How often are physician, hospital and other contracts (labs, imaging facilities, DME, home health care) reviewed?

BCBSND reviews the credentials of all health care providers requesting participation according to BCBSND's internal credentialing policy. Providers are re-credentialed every three years. The credentialing/re-credentialing policy ensures the systematic review of health care providers requesting participation with BCBSND. The policy includes requirements and procedures for verifying a practitioner or provider by reviewing their qualifications to practice. The policy also includes procedures for verifying that practitioners have met eligibility standards and requirements such as education, licensure, professional standing, services, accessibility, utilization and quality.

The policy serves as guidelines for all BCBSND credentialing/re-credentialing decisions. The guidelines eliminate unfair business practices, such as prejudice in favor of or against individual circumstances or actions and promote consistency of interpretation and application of policy requirements. Issues of race, color, creed, religion, sex, national origin, marital status, disability, age, or sexual orientation are not considered during the credentialing/re-credentialing process. The policy is reviewed and submitted annually to the Quality Committee of the Board.

Provider contracts are updated as needed to meet regulatory requirements. Reimbursement notices are issued annually.

6.8.3 Reimbursement and Discounts

62. Provide details on how prescription rebates are reimbursed to the plan.

Prime negotiates rebates on behalf of BCBSND. Prime invoices manufacturers for rebates at the end of each quarter. Manufacturer payment timelines vary by contract, but they range from 30 to 105 days from the date of invoice. A single and final account reconciliation is made within twelve months following the end of the respective quarter. BCBSND remits to NDPERS rebates received from Prime less amounts credited to Member Rebate Accounts. The portion of rebates credited to a member's Member Rebate Account is a representative percentage of the cost share paid by the member on rebate eligible prescription medications. Money accumulated in a Member Rebate Account automatically reduces a member's out-of-pocket expense the next time a covered prescription drug is purchased.

6.9 Performance Standards and Guarantees

As described in Section I. Overview, of this RFP, health plan vendors are required to comply with performance standards and guarantees that include a financial incentive/forfeiture which is negotiated as part of the renewal process. See appendix H for a copy of these performance standards and guarantees. You are required to offer your performance standards and guarantees for the board's consideration using appendix H. It is a priority for the board to have a comprehensive set of standards and guarantees relating to this plan.

63. Please confirm you have completed appendix H and confirm your willingness to comply with the performance standards and guarantees or provide suitable alternatives. Identify any additional standards and metrics your organization would be willing to include.

BCBSND confirms we have completed and are willing to comply with the performance guarantees as outlined in Appendix H.

6.10 Pharmacy Benefits Management Services

64. Describe your company's experience with administering pharmacy benefits. Provide a summary that includes the number of years that your company has provided such services, number and type (governmental or private) of clients, the total number of eligible employees, and the total number of actual participants that your company currently serves. Identify those clients who are large employers with multiple payroll processing centers and Medicare Part D program support.

Prime has provided PBM services for BCBSND since 1998, when it began operation. In partnership with BCBSND, Prime's mission is to provide the highest quality care and service for NDPERS' members and empower NDPERS to make informed, cost-efficient decisions in health care management.

Currently, Prime serves 23 Blue Cross Blue Shield plans, 24 direct employers, 12 Medicare Part D sponsors, and 3 managed Medicaid clients, covering approximately 25 million lives. In North Dakota, Prime currently serves 211,927 eligible card holders and 404,840 lives.

Prime's comprehensive pharmacy programs cover the areas of claims processing, pharmacy network development and management, mail service, formulary management, manufacturer contracting, Medicare Part D and Medicaid services, specialty drug management, reporting, clinical programs, consumer-directed benefits, as well as many other customized services. BCBSND offers similar services to IBEW, Doosan, USW and Noridian.

65. Describe your company's expertise and experience in implementing PBM services for a program that is comparable in size to the NDPERS program, based on the number of covered lives.

Blue + Prime: A Better Way
The need for truly integrated care that enables medical and pharmacy benefits to work together has never been greater. Blue Cross and Blue Shield of North Dakota's (BCBSND)

in-house, connected pharmacy benefit manager (PBM), Prime Therapeutics LLC (Prime), is a national PBM providing optimal service to 25 million members. Prime is privately held by 13 Blue Cross and Blue Shield (Blue) plans including BCBSND.

Together, our PBM offering is based on stakeholder, not stockholder value. This means members and clients are our priority—not stockholders. We have and will continue to work closely with NDPERS to administer a pharmacy benefit strategy that meets the needs of your employees while reducing costs and managing overall health through our focus on the following:

- Unique Connections – We leverage our direct connection to deliver programs that coordinate across medical and pharmacy benefits to achieve better health outcomes
- Affordability – We keep pharmacy costs low so that medicines are more affordable for the members we serve
- Service – We deliver a superior experience making it easier for members to get the medicine they need

Unique Connections
At BCBSND and Prime, integration means a medical and pharmacy partnership that manages costs across benefits. There are several ways in which we demonstrate how our unique connection translates into cost savings, superior clinical results, and a best-in-class member experience:

Our Unique, Connected Approach
BCBSND and Prime make decisions together and provide our clients with one cohesive point of view instead of conflicting priorities. Our deep connection allows us to assess how pharmacy utilization and management programs impact overall medical experience and costs. Advanced integration capabilities provide additional value through a:

- Superior ability to identify and help members who are under/over-utilizing a medication or are at risk for an adverse outcome based on medical diagnosis (gaps in care)
- Seamless interface between programs for timely and accurate data exchange
- Trend reporting and management from a total combined medical and pharmacy care management perspective

GuidedHealth®
A prime example of integration and innovation is our GuidedHealth program. Using both medical and pharmacy data, GuidedHealth is a platform that delivers a suite of member-focused clinical programs to provide actionable clinical intelligence to physicians and members to improve outcomes and lower overall cost of care.

Integrated Product System (IPS)
Together, BCBSND and Prime offer collaboration and flexibility in integrating medical and pharmacy accumulators through our industry-leading IPS system. We are able to integrate deductibles, out-of-pocket (OOP) benefits, and lifetime maximums in real time and online at the point of sale to ensure compliance with 2015 Affordable Care Act (ACA) provisions. Our unique connection allows us to promote a seamless point-of-sale member experience that carve out PBMs struggle to accomplish.

Lower Pharmacy Costs

Industry-leading Drug Trend[1]
Prime's partnership and unique connection with Blue plans has driven stronger drug trend results than competitors every year since 2007; Prime's 2013 drug trend was only 3.3 percent.

A connected approach achieves better results[2]:

Drug costs are better controlled using a connected model. Simply stated, we are keeping medicine more affordable by leveraging our unique connection to secure deep discounts. We help our members take advantage of opportunities for lower cost, generic alternatives and the best preferred brand drug.

In July 2013, Prime conducted a study commissioned by The Blue Cross Blue Shield Association. The study compared the medical costs of members with carve-in pharmacy benefits with those of members with carve-out pharmacy benefits, as well as the rate of hospitalization and emergency department visits for members in both types of plans. Across the 1.8 million Blue members evaluated in self-funded plans administered by 25 Blue Plans, members with carved-in vs carved-out pharmacy benefits experienced:

- A statistically significant 11% lower per member per year total medical costs[2]
- 9% lower rate of hospitalizations[2]
- 4% lower rate of emergency department visits[2]

Please see Attachment 15 – Pharmacy Carve-in for a study that shows advantages of carve-in pharmacy benefits.

Benchmark Studies Prove Lower Cost through Blue + Prime

BCBSND and Prime's focus on a low net cost formulary and benefit designs that encourage the use of low cost generic medications, continue to drive BCBSND to the lowest ingredient cost per prescription. A recent benchmark study showed that both Prime and BCBSND lead the industry with lowest ingredient cost as shown in the graph below:

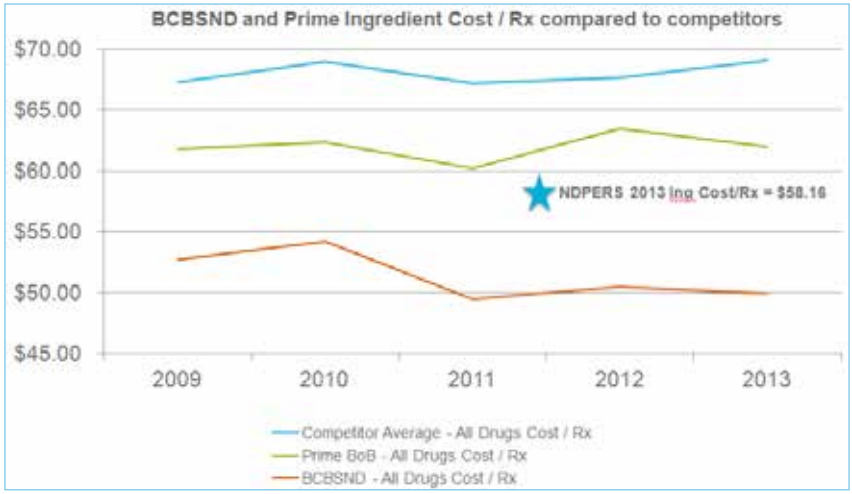


Figure 1. Lowest Ingredient Cost. We aim to have the industry's lowest ingredient cost for drugs[3]

Service Excellence

Highest Rated PBM by PBMI[4]

The Pharmacy Benefit Management Institute (PBMI) 2013 Pharmacy Benefit Manager Customer Service Research Report identified that employers rated Prime Therapeutics as the highest of all large pharmacy benefit managers (over 20 million members) in key satisfaction measures as shown by the following:

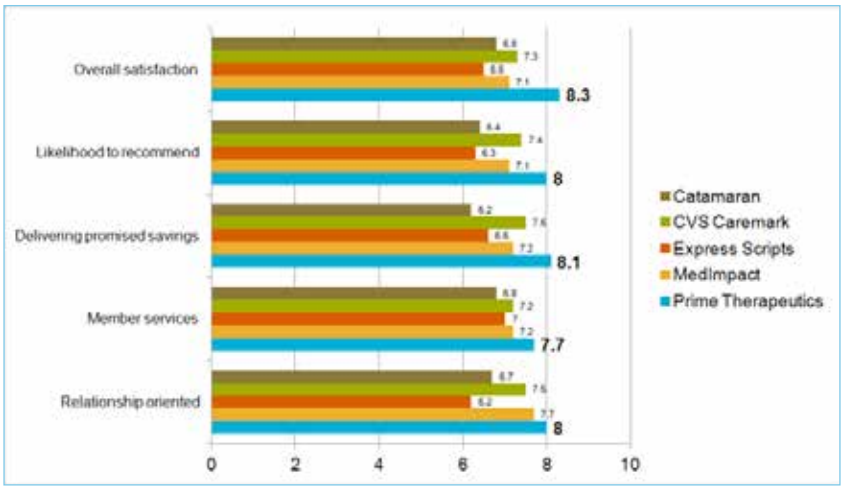


Figure 2. High Employer Satisfaction. Prime leads the industry in employer satisfaction.[4]

Prime also received the highest ratings in the following categories:

- Delivering promised services
- Flexibility
- No conflict of interest issues
- Account management
- Management reporting

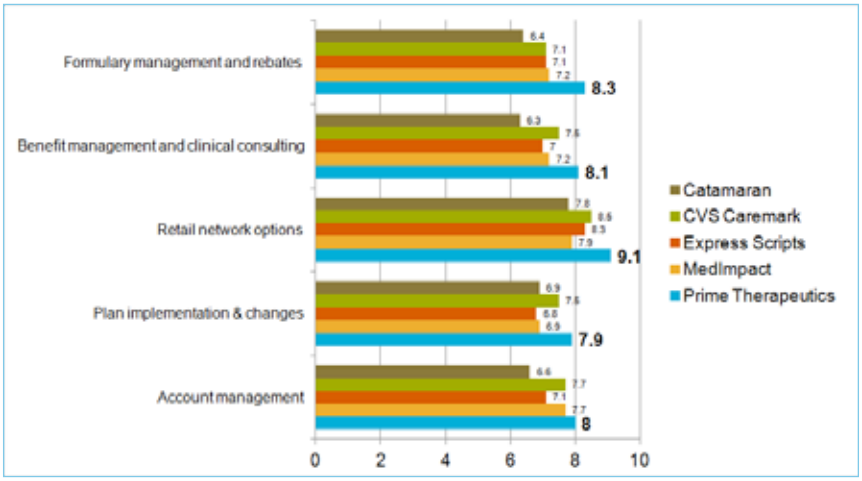


Figure 3. Core Service Satisfaction. Employer satisfaction with Prime core services surpasses competitors[4]

Likewise, additional core services areas where Prime scored highest:

- Web site for members
- Consumer education tools
- ID card production and distribution
- Drug utilization management programs
- Management reports
- Eligibility data management
- Trend management programs (tied for highest score)

In 2014, Prime is proud to have again received this distinction for the 2nd year in a row from PBMI.[4]

A Better Way
The Blue + Prime model is built on connections between medical, pharmacy, and health initiatives, instead of managing drugs as a disconnected component that is merely "tacked on at the end."

We focus on keeping pharmacy costs low, providing excellent client and member service, and leveraging our unique connection to deliver programs that lead to the best health outcomes. Simply stated, we offer NDPERS the means to manage drug costs within the overall context of your health plan. No carve-out, disconnected vendor can make that promise.

[1]Industry average based on drug trends publicly reported by PBMs. Sources: CVS Caremark Insights 2013; www.drugtrendreport.com; Catamaran 2012 Annual Report

[2]Blue Cross Blue Shield Association, Pharmacy Benefit Integration Study, 2013

[3]Blue and Prime data from internal data sources. 2009 – 2010 competitor data from 2011 Ingredient Cost Benchmark study. 2011 – 2013 competitor data from 2013 Ingredient Cost Benchmark study.

[4]Source: Pharmacy Benefit Management Institute "2013 Pharmacy Benefit Manager Customer Service Report" and "2014 Pharmacy Benefit Manager Customer Service Report

Prime's proven implementation success is driven by these key factors: minimal member disruption, managed organizational impact, and high client satisfaction. We are consultative and collaborative in our approach based on implementation success. Our proven implementation methodology is based on project management, implementation best practices, and PBM industry experience. Additionally, we provide documentation and reference materials throughout the implementation, and actively communicate with each client in an organized and consistent approach. These elements provide an assurance to our clients that we will provide a seamless implementation through strategic planning and detailed design. In addition to successfully implementing NDPERS, Prime has helped implement multiple clients of comparable size to NDPERS or larger, with a high degree of satisfaction as outlined below.

Client	Membership	Effective Date	Service Offering
Blue Cross and Blue Shield of South Carolina	1.1 million lives	1/1/2014	Medicare Part D Services
Horizon Blue Cross and Blue Shield of New Jersey	1.1 million lives	1/1/2014	Full PBM Services
Capital Health Plan	68,000 lives	1/1/2014	Full PBM Services
Johnson Controls	92,000 lives	1/1/2013	Full PBM Services
General Dynamics	104,000 lives	1/1/2013	Full PBM Services
Hormel Foods	20,000 lives	1/1/2012	Full PBM Services
Blue Cross and Blue Shield of North Carolina	1.1 million lives	4/1/2012	Full PBM Services
University of Minnesota	40,000 lives	1/1/2011	Full PBM Services
Blue Cross and Blue Shield of Alabama	73,631 lives	1/1/2011	Medicare Part D Services

Client	Membership	Effective Date	Service Offering
Blue Cross and Blue Shield of Tennessee	16,665 lives	1/1/2011	Medicare Part D Services
Blue Cross and Blue Shield of Alabama	1.8 million lives	7/1/2010	Full PBM Services
Blue Cross and Blue Shield of Montana	186,000 lives	1/1/2009	Full PBM Services
HCSC (Oklahoma)	200,000 lives	1/1/2009	Full PBM Services

Quality is Key
Both BCBSND and Prime provide a high level of quality assurance throughout the integration process. We do so by leveraging experienced resources to guide activities for the duration of the project. Our thorough testing methodology embeds detailed business validation activities into each workstream. As part of operational readiness planning, we leverage go-live verification checklists for each workstream and monitor key system statistics for historical data loads. We also actively apply lessons learned from historical experience to instill proactive risk mitigations and ensure smooth member transitions.

A successful business integration followed by an ongoing PBM program is dependent on getting a client's program set up correctly the first time. Before business integration activities occur, we meet with clients to understand their business objectives, benefit structure, system capabilities and challenges.

Other elements of a successful implementation include:

- **Regular communication** between BCBSND and our clients
- **Effective project management** to ensure all aspects of the transition are occurring smoothly and meeting timelines
- **Rigorous testing** of all systems, platforms, and data connections to ensure members will experience little to no disruption

66. Describe your mail order pharmacy program and provide details on how you market this service.

Through BCBSND's mail pharmacy, PrimeMail, we will continue to offer NDPERS the features and advantages you have come to expect from Prime, including cost savings, enhanced customer service, convenience, consultation, and timely and accurate dispensing.

PrimeMail's program philosophy is simple: provide the highest quality care and service for members. As your members have already experienced, PrimeMail's member-friendly, customer-centric solution includes a new member welcome (on-boarding) program, automated calls upon receipt and shipment of an order, refill reminders, and physician/prescriber outreach programs for new and existing members.

Cost Savings
As your home delivery pharmacy provider, PrimeMail continues to provide efficient, convenient, and low-cost approaches to filling your drug prescriptions. Our competitive discounts on brand-name and generic drugs are provided with no dispensing fees. Prime is committed to helping NDPERS add specific mail benefits should you choose to use this channel for savings purposes, including consulting on various plan design modeling options for this benefit. The cost savings, combined with a quality process superior to retail pharmacies and the convenience of internet, mail, or automated phone ordering create a highly valuable pharmacy solution for your members.

PrimeMail also offers a therapeutic substitution program for NDPERS members that targets long-term maintenance medication users for several drug classes. The Generics at Mail program promotes the use of generic and low-cost brand drugs that provide the same therapeutic outcome as more expensive brand drugs and saves your members money. The program typically has two components: letter-based member education followed by phone-based intervention.

Enhanced Customer Service
Enhanced customer service is a key component of PrimeMail's core values for mail order. NDPERS members will continue to receive the best in mail order customer service. PrimeMail customer service representatives (CSRs) are highly qualified, dedicated professionals available 24 hours a day, 7 days a week. NDPERS members have come to rely on knowledgeable CSRs and registered pharmacists who can address any mail service inquiries, including order status and drug-specific information.

PrimeMail recognizes that the growth of mail service as a pharmacy delivery channel creates a parallel need for PrimeMail to enhance value to clients and members. In the face of this pressing reality, Prime continues to invest in new technology and research, and ever-improving methods for putting mail service to the best possible use. NDPERS and your members will continue to benefit from the wide variety of features and benefits offered by PrimeMail.

Convenience
PrimeMail provides safe, convenient, cost-effective home or workplace prescription delivery. Members who require long-term or maintenance medications find the mail service program particularly effective in serving their needs. To this end, PrimeMail offers:

- Secure and HIPAA-compliant ordering, operations, packaging, and shipping that provides members with confidence and peace of mind
- Clear member-friendly communications that ensure ease of use and increase prescription mail service benefit awareness
- Member web sites that provide convenient access to refill ordering, order status, and other health and drug information
- PrimeMail's acceptance of prescriptions through e-prescribing serves as an administrative efficiency for physicians/prescribers as well as helping reduce cost and improve health care delivery of pharmacy benefits; BCBSND and Prime recognize that with mail service pharmacies growing faster than any other delivery channel, the need to enhance value for all audiences is also growing; as such, Prime continues to invest in new technology, research, and ways to best use mail service
- The ability for members to order larger quantities of their medication at one time, depending on benefit design (e.g., 90-day supply through mail vs. 30-day supply at retail)

Consultation
Your BCBSND Account team will continue to ensure all aspects for your mail program is meeting your overall goals and member needs. By utilizing PrimeMail, you receive the following advantages:

- Consultation on your mail service benefit and UM programs in the context of your overall pharmacy management goals
- Member communication that eliminates confusion and disruption to members and supports your mail utilization goals throughout the life of your program

Accurate and Timely Dispensing
PrimeMail's workflow management system provides enterprise-wide access to all mail service prescription documents throughout the dispensing process. All documents are

scanned with the order, including the check and any notes. This ensures no information is separated from the order, allowing PrimeMail pharmacists to ensure the accuracy of each order. This unique feature of the PrimeMail facility also allows CSRs to verify the status of a member's prescription and to answer questions regarding his or her order throughout the dispensing process. PrimeMail delivers new prescriptions more than one day faster than the competition and delivers refills nearly one-half day faster. Ongoing quality measurement of our mail service operational setup and configuration functions reveals consistent dispensing accuracy rates of 99.99%.

67. Describe your PBM rebate process. NDPERS is requesting that you provide a rebate guarantee in appendix H?

On behalf of BCBSND, Prime has arrangements with pharmaceutical manufacturer companies for rebate dollars. Prime receives a rebate management fee from manufacturers for services rendered in connection with rebate contracts, such as performing market share analysis required to calculate rebates and consolidating billing for clients. Prime does not accept any other (direct or indirect) manufacturer funding for clinical programs or research, nor do we maximize rebates at the expense of overall low net cost.

Rebate Calculation: Currently, Prime calculates and remits an initial estimate of rebate, less a $0.39 per paid claim rebate program management fee, within 60 days following the end of the respective calendar year quarter. Total rebate dollars available are comprised of group retained and member rebate amounts. NDPERs retained rebates are deposited into NDPERs cash accounts.

Prime negotiates rebates on behalf of BCBSND. Prime invoices manufacturers for rebates at the end of each quarter. Manufacturer payment timelines vary by contract, but they range from 30 to 105 days from the date of invoice. A single and final account reconciliation is made within twelve months following the end of the respective quarter. BCBSND remits to NDPERS rebates received from Prime less amounts credited to Member Rebate Accounts. The portion of rebates credited to a member's Member Rebate Account is a representative percentage of the cost share paid by the member on rebate eligible prescription medications. Money accumulated in a Member Rebate Account automatically reduces a member's out-of-pocket expense the next time a covered prescription drug is purchased.

Processing Schedule and Reporting: Rebate deposits are reported in the rebate column of the Calculation of Interest on State Group report and in NDPERs quarterly executive summaries.

Prime negotiates rebates on behalf of BCBSND. Prime invoices manufacturers for rebates at the end of each quarter. Manufacturer payment timelines vary by contract, but they range from 30 to 105 days from the date of invoice. A single and final account reconciliation is made within twelve months following the end of the respective quarter. BCBSND remits to NDPERS rebates received from Prime less amounts credited to Member Rebate Accounts. The portion of rebates credited to a member's Member Rebate Account is a representative percentage of the cost share paid by the member on rebate eligible prescription medications. Money accumulated in a Member Rebate Account automatically reduces a member's out-of-pocket expense the next time a covered prescription drug is purchased.

6.10.1 Services Provided to NDPERS

68. Describe the timetable and specific tasks involved to have the NDPERS' program operative for the July 2015 Plan Year. Include a detailed implementation plan and business plan or timeline related to prescription drug coverage including Medicare Part D program support. At a minimum be specific with regard to the following:

    a. Amount of time needed for implementing the new program

    b. Recommended activities/tasks and timing

c. Responsibilities of the vendor and the NDPERS staff

d. Transition with incumbent, including providing members 90 day notice regarding formulary changes, and the communication of transition issues to all plan members.

e. Length of time implementation team will be available and accountable to NDPERS.

f. Identify the staff members, by area of expertise, who will be assigned to the implementation team.

As the incumbent, BCBSND has the staffing, infrastructure and contracts in place to continue the NDPERS health plan for 2015 - 2017 biennium and beyond. BCBSND and Prime will be able to continue the program without disruption.

For NDPERS members, BCBSND and Prime offer a seamless experience—providing exceptional service, helpful information and pharmacy drug benefits—with a single member ID for both medical and pharmacy benefits. Integration of pharmacy and medical benefits reduces duplication of several enrollment and eligibility functions and simplifies coordination of benefit limits. Integrated plans are able to implement consistent medical policy regardless of where services are delivered. Finally, integrated pharmacy and medical benefits have been shown to decrease costs, emergency room visits and hospitalizations compared to members with "carve-out" pharmacy benefits.

As the incumbent, BCBSND also has staffing, infrasture and contracts in place to continue the Medicare Part D program without disruption.

6.10.2 Formulary

69. Provide details and the capabilities of your organization to provide a formulary that is at a minimum equivalent to and as comprehensive as the current formulary used by the NDPERS program. Provide sample formulary documents.

NDPERS currently utilizes the standard BCBSND Formulary, which provides members with broad access to safe, medically necessary products. This formulary is a list of medications which represent the current clinical judgment of physicians and other experts in the health care arena. See "Attachment 16 – Drug Formulary."

At a minimum include the following:

i. Describe your policy regarding formulary changes and your procedures for educating and notifying members. Indicate how often the formulary is changed.

New drugs slated to be added to the formulary are typically reviewed as soon as possible after market launch, with all new agents reviewed within 180 days of availability on the marketplace. Some drugs may be held for a quarter to be reviewed on-cycle with drugs in the related therapeutic class according to the Prime National P&T Committee.

The Prime P&T Committee meets quarterly to review and update the Clinical Threshold List and the Medicare Part D formularies. P&T bylaws also permit ad hoc meetings as necessary. The P&T Committee reviews all therapeutic classes annually, with the reviews distributed equally between the four meetings.

Communicating Changes
The best method of formulary communication for all audiences (members, physicians, and pharmacists) is the actual formulary. Members, physicians, and pharmacists can find our formulary at MyPrime.com integrated with BCBSND's web site, www.BCBSND.com. Our web site contains the most current formulary and any changes made to the formulary.

Communicating to Members
BCBSND provides formulary information, including updates about deletions and additions, through www.BCBSND.com. Our web site is linked to MyPrime.com, the member pharmacy web site. With the member-directed web site, members have the advantage of using the online formulary search feature to search from the group-level formulary (specific to your benefit design). Benefit-specific information provides members the most accurate formulary status possible.

Communicating to Physicians
BCBSND posts the formulary and any updates on our web site. Physicians can also go to Prime's corporate web site, www.primetherapeutics.com, directed at physicians/providers, for updates. In addition, BCBSND provides formulary publications for inclusion in mailings developed for physicians.

Communicating to Pharmacies
Prime Perspective, a quarterly newsletter, is distributed to all network pharmacies. Prime Perspective includes formulary updates, plan announcements, benefit updates, and other information to support claims processing. The newsletter and formulary can also be found on the Prime corporate web site and by going to www.BCBSND.com.

ii. Describe how drugs are evaluated for possible inclusion on the formulary.

Clinical guidelines are one of several information sources incorporated into Prime's chapter reviews and Clinical Threshold List (CTL) when evaluating drugs for possible inclusion in the formulary. Prime's Clinical department conducts full chapter reviews, then distills the information down to key points for notation in the CTL placement. New drug monographs are also completed for any new to market drugs and incorporated into the chapter review and CTL.

The methods used to gather data and consider the evidence for the drugs in each chapter review and CTL are the same for all drug classes; Prime's Senior Clinical Pharmacist is responsible for a chapter review and conducts a literature search for new information since the last annual review. This literature is considered based on the following hierarchy:

- Randomized Clinical Trials (RCTs)
- Guidelines
- Systematic reviews and meta analysis
- Other information including observational studies/case control studies/retrospective analysis, tertiary references, and expert opinion

Other review considerations include:

- Guidelines providing direction for drug therapy in a disease state treated with drugs across more than one class are considered for all applicable classes
- Evidence-based practiced guidelines are favored over consensus practice guidelines as they detail a comprehensive search of the literature, an evaluation of the quality of individual studies, and recommendations supported by the evidence
- Consensus practice guidelines contain recommendations based on practice or expert opinions that typically do not include the rigor of evidence-based guidelines
- The most current clinical practice guidelines are given the most consideration
- Guidelines reflecting current clinical practice in the United States are favored over guidelines written in foreign countries; where no United States guidelines exist, foreign guidelines may be referenced

- Guidelines written by nationally recognized organizations, government agencies, and specialty groups are favored over guidelines produced by journals, small unrecognized groups, or pharmaceutical manufacturers

iii. Describe the basis of your formulary development and maintenance?

Formulary decisions are made using an integrated process involving both the BCBSND Pharmacy and Therapeutics (P&T) Committee and Prime's National P&T Committee. Prime's Clinical Department, Pharmacy Trade Relations Department and Product Review Committee thoroughly research formulary considerations (content and composition) before recommendations are made to Prime's P&T Committee. The decisions of the Prime National P&T Committee become recommendations to the BCBSND P&T Committee, which makes final formulary decisions.

BCBSND P&T Committee
There are nine members of the BCBSND formulary committee, comprised of three representatives from BCBSND, three practicing physicians, and three practicing pharmacists. The practicing physician and pharmacist members are selected based on credentialing and reputation in the community. A BCBSND Medical Director serves as chairperson. The BCBSND representatives are salaried employees of BCBSND. The practicing physicians and pharmacists receive an honorarium for meeting attendance.

Prime P&T Committee
Prime's National P&T Committee is composed of an independent panel of physicians and pharmacists representing diverse geographic locations. Prime's Blues clients select their own representative while Prime selects practitioners from highly credentialed specialists representing high-prescribing clinical disciplines. The P&T Committee voting membership must consist of at least 50 percent practicing physicians/pharmacists. Practitioners must spend at least 50 percent of their time in direct care, or be academicians with a clinical focus.

Each voting Prime P&T Committee member not affiliated with Prime's Blues clients is eligible to receive an honorarium. Each voting Prime P&T Committee member is eligible to receive expenses to cover travel and lodging. When the voting P&T Committee member is employed by a client, the client will determine whether to accept expense reimbursement.

iv. Provide specific information where a higher cost option of therapeutic equivalent drug has been included in your formulary and provide rationale for doing so.

We have a very structured process for formulary development, which ensures decisions are first based on safety, efficacy, uniqueness, and then cost – all clinically superior and comparable drugs are evaluated financially for formulary consideration; drugs considered unsafe or clinically inferior are not considered for formulary inclusion. For those decisions in which cost becomes a consideration, Prime utilizes a net cost modeling tool which helps determine the true cost of a drug product or class of products by taking into account network discounts, utilization, market share projections, and any available manufacturer discounts. Therefore, there may be drugs on the formulary that have a higher AWP than other alternatives when the net cost modeling has demonstrated an overall lower net cost.

v. What is your definition of a Generic Drug?

Generic drugs are defined as having a "Y" code in the Multisource Code Indicator on Medispan. Unlike some alternative PBMs, with BCBSND/Prime this definition applies to **not** just claims adjudication but also to discount reconciliation.

vi. What is your definition of a Brand Drug? Describe the composition of your review board/committeee and how often do they meet and how are they selected to be a member.

Brand drugs are defined as having an "M, N, or O" code in the Multisource Code Indicator on Medispan. Any modifications to the process are renewed by Prime's executive committee.

6.10.3 Management of Clinical Programs

70. Provide information that demonstrates your organization can effectively administer the programs listed below in order to partner the pharmacist, other health professionals and the member to ensure the optimum therapeutic outcomes for our members. Also provide information that demonstrates your organization's ability to promote the safe and effective use of medications, and help our members achieve targeted outcomes.

Our integrated medical and pharmacy offering delivers programs that coordinate across medical, pharmacy, and health care benefits to achieve better outcomes and lower total cost of care. We are able to work collaboratively (due to aligned incentives, and ability to share data) to understand member needs, and engage the member and physician with information in ways that can lead to improved health outcomes. Our robust suite of clinical programs is described below:

GuidedHealth® Clinical Programs
GuidedHealth is a series of clinical programs and reporting tool that delivers a suite of innovative, member-focused clinical programs to provide actionable clinical intelligence to physicians and members to improve outcomes and lower overall cost of care. Based on program selection, an inclusive Health Guide is generated that aggregates all drug therapy opportunities at the member level, resulting in fewer, more meaningful contacts for physicians and members. We also have the unique ability to integrate data generated from GuidedHealth to enhance our member and physician engagement strategies.

GuidedHealth directly links our engagements to the achievement of specific health outcomes and total cost of care measures and reports the value of those specific engagements, including pharmacy cost, outcomes, adherence and medical cost avoidance setting a standard for integrated reporting not yet seen in the industry today.

How It Works
GuidedHealth's program modules for BCBSND (described below) help physicians, members and NDPERS identify opportunities for better management of pharmacy utilization, resulting in improved member outcomes and overall reduction in health care costs.

Program features include:

- A robust intake process for the import of medical, lab and pharmacy claims data in an efficient manner
- A rich workflow application that can manage all of the activities (i.e., develop and send action plans) as well as monitor the results of any interaction
- The ability to send results (e.g., gaps in care) electronically or by letter to physician (program specific) or other host system
- Ability to deliver activity reports and show results including savings, outcomes, adherence and medical cost avoidance setting a standard for integrated reporting

Modules and Program Overview
The clinical programs within GuidedHealth include traditional retrospective drug utilization review (DUR) programs as well as adherence and cost management programs. All programs are developed using evidence-based medicine and nationally recognized

drug compendia and guidelines. They have been organized into modules that focus on overutilization, underutilization, drug safety, and cost management opportunities.

Below are some of the clinical programs that are available through GuidedHealth. Additional program detail is provided for select programs as well.

- *Overutilization Module*
  - Controlled Substance Alerts
  - Triple Therapy Alert
  - Psychotropic Polypharmacy
- *Underutilization Module*
  - Asthma Inhaled Corticosteriod Use
- *Drug Safety Module*
  - FDA MedWatch
- *Drug Cost Management Module*
  - Generic Opportunity
  - Preferred Brand Opportunity

Targeted Adherence program
Provided through GuidedHealth is our Targeted Adherence program, which supports drug adherence and improves the quality of care for members. This program incorporates medical claims data that allows identification of members with a chronic disease state (cholesterol, depression, diabetes, hypertension, and respiratory) who are at the highest risk of suffering a future adverse medical event. It is these high risk members that will gain the largest benefit from being adherent to their medications, as supported by the medical literature. These high risk members are assessed for adherence to their current prescription medications for those specific disease states.

Analysis of pharmacy claims data reveals a proportion of days covered (PDC), which provides an accepted measure of whether a member is taking his or her medication on a regular basis based on a number of factors (e.g., prescription fill rates, days supply).

If an adherence issue is identified (i.e. less than 80% adherence with medication therapy), the member and/or physician can be sent a targeted letter designed to improve adherence. The goal of this program is to increase appropriate utilization of prescription medications and may result in increased pharmacy spend. However, reporting for this program will also evaluate medical cost avoidance, in addition to adherence rates.

Targeted Gaps in Care Program
Also provided through GuidedHealth is the Targeted Gaps in Care program, which encourages appropriate drug utilization in chronic disease states and improves the quality of care for members. Similar to the Adherence program, the Gaps in Care program incorporates medical claims data that allows identification of members with a chronic disease state (cholesterol, depression, diabetes, hypertension, respiratory, and epilepsy) who are at the highest risk of suffering a future adverse medical event. These high risk members gain the greatest benefit from using medications to treat their condition, as supported by the medical literature. The pharmacy claims of these high risk members are then evaluated to identify members who have a gap in care (i.e., are not currently receiving a recommended medication for their chronic disease state). If a gap in care is identified for a member, their physician can be sent a letter to encourage appropriate medication use. The goal of this program is to increase appropriate utilization of prescription medications and may result in increased pharmacy spend. However, reporting for this program will also evaluate medical cost avoidance, in addition to closure of gaps in care.

Continuity of Care
The Continuity of Care program is designed to supplement existing step therapy programs. The objective of the program is to identify members who have not filled a pharmacy claim for a chronic disease medication subsequent to having a prescription claim reject for failure to meet step therapy requirements. For those members who have failed to fill a prescription for the targeted drug or a suitable alternative, we can provide follow-up outreach to the physician. The goal of the program is to ensure that members are not walking away from therapy due to a step therapy program and to increase the utilization of chronic disease medications as appropriate.

a. **Drug Utilization Reviews - retrospective, concurrent and prospective.**

BCBSND and Prime offer drug utilization review (DUR) services including retrospective, concurrent, and prospective as described below.

Retrospective Drug Utilization Review
Retrospective drug utilization review (DUR) programs are designed to manage drug utilization and identify potential misuse and abuse. Potential intervention opportunities are identified by reviewing medical and pharmacy claims history for specific aberrant prescribing patterns in targeted diseases such as asthma, depression, and hypertension. Physicians and/or members are then targeted for an intervention to encourage more appropriate utilization.

The retrospective DUR program, rooted in evidence-based medicine and national guidelines, provides enhanced value to clients and members; we offer numerous retrospective DUR programs through our GuidedHealth platform. Multiple programs can be run at the same time and the actionable clinical intelligence can be summarized to the prescribing physician in one "Health Guide" aggregated at the member level. Quarterly reports are provided showing not only the number of drug therapy problems identified, but also the number of engagements and outcomes/savings.

Concurrent Drug Utilization Review
The concurrent DUR program screens prescriptions at the point of sale for potential drug problems. If a DUR edit flags a claim in the claims system, a message is displayed online for the pharmacist to identify the potential conflict before the member receives the medication. Concurrent DUR edits categorize potential interactions by severity, onset, documentation, and if the drugs were dispensed from the same pharmacy and same prescriber. Each of these categories has multiple layers and each combination can be attached to a unique response. This is particularly effective for member interventions.

The pharmacist then explains the message to the member and, if applicable to the benefit design, the prescription is denied for coverage. Most concurrent DUR edits, however, are set as informational only in which pharmacists use their professional judgment in dispensing medication.

Prime complies with NCPDP specifications for online DUR and supports all available Medi-Span concurrent DUR edit modules. Medi-Span classifies drug interaction severity based on drugs. The claims system can store multiple messages for handling edits (i.e., override allowed). Receipt of the messages is based on capabilities of the pharmacy software.

Concurrent DUR Screening Categories
Concurrent DUR edits fall into standard screening categories, under which there are multiple edits based on individual drugs. Edits include:

- **Drug-to-drug interaction** - Checks for interaction between drugs based on the sensitivity level of the interaction

- **Drug –to-gender caution** - Identifies contraindications based on a member's gender
- **Duplicate therapy** - Checks for use of multiple drugs from the same therapeutic category
- **Duplicate prescription** - Checks for ingredient duplications (based on exact Generic Product Indicator)
- **Drug-to-age caution** - Identifies contraindications for specified age groups. A priority level may also be specified based on contraindication
- **Dosage/duration** - Compares the dosage on the claim to the recommended dosage for the member's age group and then determines whether to send a response*
- **Drug regimen compliance** - Checks to make sure the member is not underutilizing a drug. Reviews member claims history to determine if he or she has received the same drug and if he or she is receiving the new refill within a certain number of days since it was last filled
- **Drug-inferred health state** - Determines if the submitted drug or a profile drug conflicts with inferred health state (e.g., pregnancy)
- **Additive Toxicity** – Calculates the daily dose of acetaminophen across all active prescriptions and identifies claims above the FDA maximum dose.

** If a claim exceeds the established threshold of a category, it will be rejected and return a message instructing the pharmacist to verify the quantity or days supply.*

All participating network pharmacies, including PrimeMail, access the same claims system, online and in real time, for concurrent DUR. Whichever pharmacy a member uses that transaction becomes a part of his or her complete profile. Claims are checked against the current and comprehensive profile for each member.

Prospective Drug Utilization Review
We view prospective DUR as a combination of clinical programs for member education and appropriate use of medications. We have many prospective and proactive programs in place to ensure members are on appropriate drug therapy with varying levels of engagement. These include the following programs:

- **Prior authorization** - designed to effectively manage high-cost medications that have an actual or significant potential for misuse, overuse, or inappropriate use and that could be of clinical, economic, or safety concerns (or a combination of these).
- **Step therapy** - takes a "step" approach to providing members a drug to help treat their condition. This means that members may first need to try a first-line drug before coverage is provided for a second-line drug. A first-line drug is usually a generic drug (or preferred brand if generics are not available) and represents a more cost-effective alternative for the member and NDPERs.
- **Quantity limits** - promotes safe and effective drug use and reduce waste by limiting certain prescriptions to a pre-determined quantity limit or duration
- **Concurrent DUR** - provides point-of-sale messaging to the member and pharmacists regarding potential drug problems (e.g. drug disease interaction, high dose, drug-age interactions)

Other strategies focused on ensuring members are taking appropriate medications include:

- **Member education collateral** – online resources and webinars are available for specific drug categories via our web site

- **Formulary management** - our Clinical teams and P&T committee evaluates every drug for our formulary including assessing safety and efficacy

Additionally, our clinical staff continually monitors industry intelligence regarding the most likely scenarios for patent expirations and generic launches; we can help NDPERS anticipate changes to generic utilization rates and identify new program opportunities. Further, we track industry intelligence regarding the most likely scenarios for anticipated new drug releases and OTC switches. We use all of this information to forecast trend and to look for opportunities to change or implement clinical programs.

b. **Disease Management**

Prime partners with BCBSND to provide pharmacy support to Health Risk Management programs. In addition, BCBSND and Prime's Retrospective DUR program, Adherence Program and Efficiency Program provide components of disease management in order to help increase the quality of life for members. These can be used as stand-alone pharmacy programs or in conjunction with other BCBSND disease management programs.

Retrospective DUR
BCBSND and Prime's retrospective DUR programs identify potential intervention opportunities through medical and pharmacy claims history for specific aberrant prescribing patterns in targeted diseases, including asthma, high cholesterol, depression, diabetes and hypertension. This information is used to target physicians and/or members for an intervention to encourage more appropriate utilization.

Each retrospective DUR is unique and the method used to identify opportunities for intervention depends on the specific goal of the program. Typically, the intervention method is a prescriber mailing. DUR programs are generally conducted on a quarterly basis.

Adherence Program
BCBSND and Prime offer an Adherence Program to support drug adherence and improve the quality of care for members. This program provides standard adherence reporting in the following five drug categories:

- High blood pressure
- High cholesterol
- Depression
- Diabetes
- Respiratory disorders

The program can be expanded to include additional information from medical claims data that allows detection of diagnosed members not receiving therapy.

An analysis of pharmacy claims data reveals a medication possession ratio (MPR), which provides an accepted measure of whether a member is taking his or her medication on a regular basis based on several factors (e.g., prescription fill dates, number of days supply). The Adherence Report then charts client-specific data on the MPR rates of an entire member population taking a particular medication.

The Adherence Report may reveal good adherence, defined as 80 percent compliance or better, among NDPERS members, whereby intervention may not be required. If an adherence issue is identified, the member and/or physician can be sent a targeted letter designed to improve adherence. Adherence reporting and information are sent on a quarterly basis.

Efficiency Program
BCBSND and Prime offer a pharmacy solution to contain costs while preserving quality through the Efficiency Assessment, which uses total health care costs to guide pharmacy benefit management decisions. Using an integrated medical and pharmacy risk stratification tool, an Efficiency Report is produced that stratifies member utilization by risk within each core drug category. This report provides an efficiency ratio with a marker for NDPERS to see the proportion of pharmacy dollars spent to treat high-risk members.

The efficiency assessment provides a single metric demonstrating how efficiently NDPERS is spending pharmacy dollars within the targeted core drug category. Goal number and desired outcomes are tailored specifically to NDPERS. The Efficiency Report and the efficiency ratio metric assist NDPERS in deciding which pharmacy management programs and benefit designs are most appropriate.

GuidedHealth Medication Therapy Management Program
BCBSND provides NDPERS with the unique advantage of medical and pharmacy benefit managers working together in ways that a typical pharmacy "carve-out" program does not provide. BCBSND and Prime focus on pharmacy management in the context of total health spend, which means pharmacy is leveraged to positively impact medical outcomes. Understanding total health spend—the inter-relationship between pharmacy costs and medical costs—helps BCBSND better manage NDPERS' benefits.

BCBSND and Prime provide additional data integration for prescription and medical claims through our GuidedHealth Medication Therapy Management program (MTM). MTM is defined as taking an active role in supporting members and working with pharmacy providers and prescribers. The proposed program has five major components:

- A clinical rules engine that can apply clinical rules and define gaps in care
- The gaps in care can be stratified into low/medium/high-risk levels
- A rich workflow application that can manage all of the activities (i.e., develop and send action plans), as well as monitor the results of any interaction
- The ability to send results (e.g., gaps in care) electronically or by letter to a provider or other host system
- Ability to deliver activity reports and show return on investment results

71. Does your organization perform retrospective DUR for all claims of a given client? Please provide frequency of retrospective DUR.

Yes, BCBSND's and Prime's retrospective DUR programs work by identifying potential intervention opportunities using all claims. Medical and pharmacy claims history are reviewed for specific aberrant prescribing patterns in targeted diseases. Physicians and/or members are then targeted for an intervention to encourage more appropriate utilization.

Through GuidedHealth, we can perform retrospective DUR on any level of claims as defined by NDPERs. For instance, 85% of Prime's book of business utilizes the retrospective DUR program.

Retrospective DUR programs are reviewed as needed, but at least quarterly, by Prime's Clinical department on BCBSND's behalf, for possible changes or enhancements. In addition, the program portfolio is reviewed annually and new programs are added (generally 2-4 per year) and some may be deleted if no longer relevant or if there is lack of use.

72. What is the generic utilization and substitution rate for your overall book of business nationally and in North Dakota?

BCBSND's and Prime's comprehensive generic programs and built-in collaboration with clients help increase utilization rates and build awareness of cost savings for generic products. The chart below details the generic utilization and substitution rates for Prime's overall book of business nationally and in North Dakota.

	2012	2013	2014 YTD
Book of Business			
Generic Utilization Rate	78.3%	80.9%	**82.7%**
Generic Substitution Rate	97.8%	98.1%	**98.2%**
North Dakota			
Generic Utilization Rate	77.7%	80.4%	**82.2%**
Generic Substitution Rate	98.1%	98.5%	**98.5%**

73. How many MAC lists do you have for pharmacies and clients? If more than one, which list will you use for NDPERS?

	Number of MAC lists
Pharmacies	1
Clients	1

Prime offers one MAC list unlike our competition that may use different lists to obtain a pricing spread. For pass through pricing bids, Prime passes through the full value of our MAC pricing to our clients, therefore, only one comprehensive MAC list is necessary. Within this list, we offer the highest discounts possible on thousands of generic drugs, of which we actively monitor and update regularly to ensure the latest clinically safe medications are made available to our members.

As a current client, NDPERS benefits from Prime's aggressive and comprehensive MAC program. The MAC list, used at both mail and retail, includes nearly 2,150 drugs by GPI, representing more than 128,000 active drugs by NDC, which covers 239 generic classes.

74. Describe your methology for pricing (AWP, AAC, WAC, etc.)? Please explain in detail.

AWP is defined as the price calculated by national reporting services for each drug in the market; Prime uses Medi-Span as the drug pricing source for AWP pricing information.

6.10.4 Trend Analysis

75. Your organization must be able to provide NDPERS with a comprehensive, annual trend analysis report as background for making pricing decisions. At a minimum the report must:

    a. Contain extensive utilization and drug spend data that presents future trend drivers, both industry wide and specific to our programs;

    b. Provide information on the generic pipeline, drug indication changes that may affect drug utilization, specialty drug utilization trends, new drug introductions and other similar trend drivers;

    c. Show the impacts of, and provide recommendations for addressing price inflation, rebate performance and other pricing related drivers, in addition to pharmacy network trends and opportunities.

Confirmed. BCBSND and Prime have new reporting that will be available to NDPERS in 4Q 2014. These reports include an executive summary, information on specialty utilization and drug spend, non-specialty utilization, generic utilization, distribution channel information, a ranking report, and a series of summaries. A sample of this Employer Group Report (EGR) package is included as Attachment 17 – Pharmacy Reporting.

All reporting will continue to provide a variety of quarterly and annual reports that outline NDPERS member utilization at both PrimeMail and Prime Specialty Pharmacy for mail order and specialty drug usage, highlighting performance, statistics, and key trends. Your specific goals will be assessed against the metrics contained in these reports, to ensure that all objectives are met.

Group Summary Reports
Group summary reports illustrate NDPERS' plan performance related to cost, ingredient cost, utilization, clinical, and payment trend. Group summary reports include the following information:

- Brand and generic utilization
- Cost, utilization and PMPM amounts
- Basic statistics
- Prescription costs
- Total trend by period cost and utilization components
- Total paid trend
- Top 20 therapeutic classes by drug spend

Additional Report Options
We can also provide you with the following reports depending on your specific needs:

- Member Prescription History
- Top Drugs by Brand Name
- Drug Market Share
- Top Drugs by Label Name
- Top Therapeutic Classes

Benchmark Reports
As we have previously done with other Benchmark Reports provided to NDPERS, we assess the three components that drive trend (inflation, utilization, and drug mix). Our clinical programs are positioned to impact utilization and drug mix while inflation is impacted by programs for retail networks, 90-day utilization, and formulary adherence. Benchmark data is analyzed to assist you in the selection of clinical programs to positively impact trend for all drug spend or by therapeutic category.

Generic Opportunity Reports
With our Generic Opportunity Reports, we can help you analyze current generic utilization, target a specific growth strategy, and map out the benefit plan changes to help to continue to meet your goals. Using a unique predictive modeling tool to identify and prioritize generic potential with each therapeutic category, a Generic Opportunity Report is generated, providing the following:

- Generic drug spend overall
- Generic drug spend by the core therapeutic categories
- Average costs for generic and brand-name prescriptions by category
- Generic target ranges (low, medium and high, by category)
- Estimated potential cost savings by generic threshold (by category and in total)

As you know, generic utilization opportunities can differ significantly by therapeutic category. Ranges for each category are set based on the availability of effective generics combined with the benchmark assessment of many plan sponsors. For many diseases and conditions, several effective generic options exist while few or no generics are yet available for other conditions. The availability of multiple generics in the same category can lower costs even further. NDPERS can continue to select a category or categories for Prime to focus on, of which we will design a strategy to help you move from point A to point B.

Specialty Program Reporting
As you have experienced as a Prime Specialty Pharmacy client, our comprehensive specialty program has a broad array of specialty reports including specialty spend and utilization reports, which provide the critical ability to analyze overall performance and individual components of specialty services.

Examples of specialty reports include the following:

- Demographics for specialty members
- Quarterly spend by benefit
- Total pharmacy and medical spend
- Spend by disease category
- Specialty category trends
- Specialty utilization
- Top 10 prescribers
- Medication adherence

76. Describe your organization's Trend Analysis reporting capabilities. Provide sample reports that reflect your organization's ability to provide thorough trend analysis for NDPERS.

Prime's consulting analytics staff works closely with pharmacists in Prime's Clinical department to produce benchmark statistics and savings reports that are meaningful to NDPERS. By using your claims data, we provide trend reports that include the following information:

- Drug and financial trends against Prime's book of business
- Trends by specific employer groups
- Line of business for cost drivers (e.g., top drugs, top therapeutic classes, most prescribing physicians, highest cost members, etc.)
- Annualized and quarterly trends
- Quarterly ranking by cost, volume, and PMPM line of business
- Open, closed, and tiered formulary/copay design comparison

Pharmacy benchmark data is included in year-end performance reports where it is important to measure key performance statistics at a high level. Prime's trend assessments are clinically informed and include both Traditional and Specialty Trend assessments, focusing on the top therapeutic categories in terms of drug spend and opportunity for change. In addition, any specific drugs of interest can be analyzed.

Prime also publishes an annual report on pharmaceutical industry trends and topics that specifically reports drug trend analyses for Prime's commercial book of business and relevant industry information that is used directly to diagnose your specific trend. Examples of topics provided include key drivers of trend, drug development pipeline, new drugs, patent expirations, affects on high cost therapeutic categories, and modeling of select therapeutic class trends.

The following table identifies examples of year-end performance reports that are available to you as clients of BCBSND and Prime:

Name of Report	Frequency Provided	Purpose of Report
Financial Summary	Quarterly/Year-end	This section includes information for the previous six months on drug ingredient charges, drug ingredient allowances, dispensing fees, subscriber liability, plan paid amount, and plan savings.
PMPM Utilization	Quarterly/Year-end	This graph illustrates the number of prescriptions paid and the dollar amount paid for the previous six months.
Plan Paid PMPM	Quarterly/Year-end	The graph depicts how much the plan paid on a PMPM basis.
Brand / Generic Drug Utilization	Quarterly/Year-end	This analysis shows you the percentage of multi-source medications being dispensed and breaks them out by generics, physician DAW, and member DAW. We will provide recommendations based on the utilization.
Formulary Compliance Rates	Quarterly/Year-end	This report illustrates your formulary compliance rate over the past six months and provides a clinical summary of high-cost and high-volume prescriptions.
Member Demographic Profile	Quarterly/Year-end	This graph compares the age and gender composition of your plans to the Prime average and shows how your composition affects utilization.
Top 20	Quarterly/Year-end	This graph shows top 20 lists by: • Therapeutic class by volume • Therapeutic class by cost • Brands • Generics

6.10.5 Specialty Drug Program

77. Describe in detail how your organization will manage specialty and compound drugs based on NDPERS' current plan design. Provide detailed information about your organization's capabilities to administer a specialty drug program. Indicate specific results your specialty drug program has achieved for your current and past clients in terms of reduced program costs (quantitative and qualitative). Include details about the Specialty pharmacy you contract with. Provide your listing of "Specialty" drugs.

As your specialty drug pharmacy vendor, all components of the Prime Specialty Pharmacy are integrated, providing NDPERS with a convenient specialty pharmacy solution that supports a goal of keeping specialty medicines affordable, delivering a superior member experience, and leveraging unique connections while balancing the real-world financial and logistical considerations affecting you and your members.

Together, BCBSND and Prime have been providing NDPERS with a connected specialty drug management program that focuses on total cost management, clinically-powered decisions, and superior specialty pharmacy and member care. We are proud to continue to provide you with a comprehensive approach to specialty drug management that spans both medical and pharmacy benefits.

Three core capabilities have helped NDPERS receive a solid foundation for your specialty drug management program:

- **Total cost management** — We work across the medical and pharmacy benefit divide with the goal of lowering the total cost of care, not just pharmacy costs. Our integrated model also gives us greater buying power. And we use it every day — along with direct manufacturer contracts — to secure better discounts, and lower ingredient and program costs.
- **Clinically powered decisions** — Our decisions are driven by clinical facts. Our focus is on NDPERS members and we encourage them to take their medicines safely, the way they were prescribed — which leads to better outcomes and greater peace of mind.
- **Superior specialty pharmacy and member care** — Prime Specialty Pharmacy provides NDPERS with a simpler way to get the medicine you need affordably, as well as coordinated care, specialized education and access to experts any time, day or night.

In addition, BCBSND and Prime continue to focus on specialty drug costs across the medical and pharmacy benefit, providing the following value:

- Improved member safety, adherence; better health outcomes
- Coordination of care across member, doctor, pharmacist and care teams
- Education and support to manage condition that promotes better health, reduced absences and improved employee productivity
- Affordable medicine and lower out-of-pocket costs
- Reduced prescription-related doctor burden, making it easier for doctors to provide care
- Eco-friendly packaging that costs less to mail, ship and store, and regulates temperature better than foam packaging
- Decisions that are grounded in clinical research
- Consultation from reputable clinical experts
- Improved safety and adherence and better health outcomes
- Better discounts, lower ingredient cost and program costs
- Direct contracts with rebate manufacturers
- Access to limited distribution drugs

We have included a Specialty Drug Fee Schedule as Attachment 18 – Specialty Drug Listing

Specialty Pharmacy Achievements — Savings
In 2013, Prime realized nearly $400 million in savings related to Specialty Drug classes via programs and services, when looking across our commercial book of business. On behalf of our Blue plan clients like BCBSND, Prime is able to recognize and quantify savings from utilization management programs, manufacture revenue and specialty pharmacy discounts for each specialty category, including the following: Autoimmune, Multiple Sclerosis, Growth Hormones, HIV, Cancer-Oral, Hepatitis C, Pulmonary Hypertension, Fertility & Pregnancy, Hemophilia, Immune Globulins, Anticoagulants, Blood Modifiers, Nausea & Vomiting, Lung Disorders, Cystic Fibrosis, Enzyme Deficiencies, Visco Supplements, Cancer-Injectables, and other high cost drugs.

Prime tracks and reports savings from utilization management programs (prior authorization, step therapy, quantity limits) by assessing the ongoing (post-implementation) differences between plan-paid costs, PMPM costs, and utilizing members, and comparing these with baseline (pre-implementation) and benchmark data for the specific drugs involved in the UM program.

In addition, Prime Specialty Pharmacy can assess the savings impact from moving specialty claims from the medical benefit to the pharmacy benefit.

Specialty Pharmacy Achievements — Positive Clinical Outcomes
Another example of a successful return on investment for NDPERs is the joint effort of BCBSND and Prime Specialty Pharmacy's Oral Oncology Management Program. This has provided a higher level of member care for NDPERS members than other programs on the market through a split fill program focused on high-cost therapies that are poorly tolerated. When therapy begins, the member will receive a partial fill, (typically 16 days of a 28 day cycle) with a pro-rated cost share amount. Before completion of the partial fill, the clinical team engages with the member to assess tolerance and continued course of treatment. If there are serious side effects, an alternative plan of action is coordinated along with the physician, improving outcomes, preventing waste and avoiding unnecessary costs for the member and the plan.

Additionally, care management services identify members at risk for depression. Depression is recognized as a predictor of overall outcomes and our nurse assessments identify members at risk. Once identified, the care managers notify the health plan for further assessment. Program benefits include:

- **Optimized member and clinical management** – Through clinical protocols that are executed at pre-determined intervals during the member's medication therapy, adverse events are recognized early, and NDPERS members are provided access to valuable clinical support between physician visits to address therapy adherence issues including regimen compliance and persistency.
- **Enhanced physician support** – It is not uncommon for physicians to have concerns about a member's ability to take oral oncology medications as prescribed, recognize a medication side effect, or seek medical attention when experiencing an adverse reaction. This program offers supplemental clinical expertise and enhanced communication with physicians throughout the member's medication regimen. Physicians are contacted when required by protocol focusing on member adherence, adverse reactions, or side effects experienced. Details including the Medication Possession Ratio (MPR) while the member was on therapy, interventions performed, and the date that therapy was started (and discontinued) can also be provided.

Compound Drug Management
Prime has been at the forefront of compound drug management, including presentations at different industry fraud groups over the past couple of years. Since February 2013, pharmacy credentialing practices have been enhanced and, throughout 2013, clients have been closely advised on benefit design options that have led to a significant reduction in compound costs.

Compound Drug Pricing Process
Compound drugs are priced online at the point of sale and in compliance with HIPAA transaction standards known as D.0 from CMS and NCPDP. With D.0, each ingredient has to be submitted in the claim, allowing up to 25 ingredients per compound claim.

By using multiple ingredients, the claims system considers all submitted ingredients and associated costs when processing and pricing the claim. Processing compound drugs as multiple ingredients also allows greater precision in determining what is covered. For example, a compound drug that contains ingredients in which the FDA has evaluated as less than effective, the claims system can deny a compound drug that contains such an ingredient. The compound claim is then reimbursed at the negotiated contract rate for compound medications.

In addition, to ensure costs are not inappropriately inflated, we offer NDPERS members a compound management strategy with the following additional levers:

- **Strong network credentialing:** we contract with and hold retail network pharmacies to high standards, including credentialing criteria and NCPDP national claims processing standards as well as compliance with state and federal laws.
- **Compound pricing compliance:** this is measured through the comprehensive pharmacy audit program, which includes a daily (pre-payment) claims review, quarterly audit profile, on-site audits, and desktop audits. In addition, pricing of compound drugs is reviewed during quarterly claims profile audits.
- **Benefit strategies:** We will continue to work with NDPERS on specific benefit strategies to best meet your needs; for example, a "reject" list.
- **Claims system edits:** Several claim system edits are in place to ensure each compound claim is priced correctly and does not exceed cost limitations. In addition to basic benefit exclusions (e.g., cosmetic drugs, etc), there are also certain classes of drugs that will not be covered as part of a compound including but not limited to opioid pain medications, erectile dysfunction medications, antibiotics, weight loss agents, and anticoagulants. We also have back-end audit processes in place to review compound claims. All compounds may be subject to review and approval.

6.10.6 Network Accessibility and Disruption

78. Submit a current listing of the participating pharmacies in North Dakota.

    Please see "Attachment 19 – Pharmacy Network" for a current listing of participating pharmacies in North Dakota.

79. How are pharmacies selected for inclusion in your network? Would your organization be willing to contract with additional pharmacies if there are geographic locations where participants live but which do not have access to one of your pharmacies?

    Pharmacies are considered for inclusion in our network in several ways. For instance, NDPERS and your members can request network pharmacy additions by contacting your BCBSND Account team or by sending an email through MyPrime.com.

    Prime also receives requests for pharmacy additions from various other sources including:

    - Non-participating pharmacies
    - Prime's analysts who identify a non-participating pharmacy that has significant utilization for NDPERS. We identify these particular pharmacies for solicitation into the network by matching Quest Analytics Suite (Geo) graphical locations of NDPERS members with available pharmacies that are not yet participating
    - Prime utilizes the NCPDP pharmacy database to identify any newly opened pharmacies nationally.

    Once identified for possible addition to the network, Prime sends the pharmacy an application within two business days. The application requests the pharmacy to complete the following steps:

    1. Complete the credentialing application
    2. Provide copies of current DEA license, state pharmacy license, location information, insurance coverage, and pharmacist's license(s)

    The completed credentialing application is verified by the Credentialing staff and if the pharmacy meets the credentialing criteria, a Pharmacy Participation Agreement is sent to the pharmacy.

    Once an agreement is in place, the pharmacy is typically added within five to seven business days of receiving an executed contract. Once a pharmacy is contracted, the pharmacy is provided with a Pharmacy Provider Manual (also available on Prime's corporate web site for pharmacies). The manual contains policies, procedures, and expectations of network pharmacies.

80. Indicate which major chain stores are not included in your proposed network for NDPERS.

Not applicable. All major pharmacy chains are included in our broad, national network, utilized by NDPERS.

6.10.7 Medicare Part D

Describe the ability of your organization to provide Medicare Part D coverage for Medicare eligible retirees enrolled in the NDPERS group health insurance program. Identify any subcontractor that would be used to provide Medicare Part D coverage to the NDPERS Medicare eligible retirees and note that NDPERS reserves the right to approve the subcontractor. Also identify what type of plan would be used (e.g. fully-insured PDP, 800-Series EGWP, Direct-Contract EGWP)

BCBSND's Medicare Part D program is managed by Northern Plains Alliance (NPA), which includes Blue Cross Blue Shield of Minnesota, Blue Cross and Blue Shield of Montana, Blue Cross and Blue Shield of Nebraska, Blue Cross Blue Shield of North Dakota, Blue Cross Blue Shield of Wyoming, Wellmark Blue Cross Blue Shield of Iowa and Wellmark Blue Cross and Blue Shield of South Dakota. The program meets the Centers for Medicare & Medicaid Services' (CMS) requirements. NPA continually monitors CMS guidelines for any changes and develops additional services that enhance the Medicare Part D member experience.

NDPERS will continue to benefit from a wide range of Medicare Part D products and services provided by BCBSND and NPA, including:

- A national network with more than 60,000 contracted, credentialed pharmacies. The pharmacy network includes retail, home infusion, long-term care and Indian/Tribal/Urban pharmacies. Included in the retail network are many independents and large, national chains. The network also includes a centralized mail order pharmacy process that has several distribution points around the country for quick fulfillment of member orders.
- Formulary management
- Claims payment using lower-of logic
- Maximum Allowable Cost (MAC) Program
- Clinical management
    - Utilization management
    - Drug utilization review
- Member services
    - Toll-free telephone access to member service
    - Appeals
    - 24-hour access to a pharmacist via toll-free telephone service
    - Pharmacy benefit materials, including direct claim forms, explanation of benefits, and coordination of benefit forms
    - Individualized one-page pharmacy disruption summaries
    - Abridged formulary and associated member materials
    - Provision of CMS-required enrollment and disenrollment notices
    - Member-directed, secure website
    - Coordination of benefits at the point of sale
- An 800-Series EGWP plan is currently administered for NDPERS.

6.10.8 HDHP/HSA

81. Describe how your organization will do the administration of the HSA option. What details are provided to individuals that select this option, the name of the service vendor and any other applicable information?

    As the incumbent carrier, BCBSND will continue work with Discovery Benefits to administer the HDHP/HSA option for NDPERS members.

    Standard enrollment materials include an HSA Employee Guide that explains the plan in simple to understand language. The Guide includes a list of eligible items, information about how to contact Discovery Benefits, how to request a distribution of funds and contribution limits per IRA guidelines. Additional materials are also available on Discovery Benefits' website. Employers may download materials to post on their intranet site.

    Participant demographic and contribution information is provided to Discovery Benefits electronically by NDPERS staff. Files are uploaded through the employer portal file import feature. Participant elections and changes uploaded electronically can be viewed by the participant online via the employee web portal once the update has occurred.

    In addition to requesting withdrawals online, each HSA account holder receives two debit cards for making eligible medical expense purchases directly from the HSA. The debit card is multi-purpose, meaning the card can also be used for a limited flexible spending account (FSA), limited HRA and dependent care FSA if the participant is also enrolled in one of those accounts with Discovery Benefits. Expenses would then be automatically paid from the appropriate account with only one submission.

    A separate invoice is created for HSA account fees and submitted to NDPERS for payment on a monthly basis.

6.10.0 Economy to be effected

82. Please indicate if you will have an office in North Dakota and where most of the work on this contract will be done?

    BCBSND is headquartered in Fargo, ND. Most of the work for this contract will be done in our home office. In addition, we have 8 regional sales and service offices throughout the state that are available to NDPERS members as needed.

83. Please identify the number of employees you will employee in North Dakota pursuant to this contract.

    BCBSND employs over 800 employees in the state of North Dakota to service our 500,000 members. NDPERS represents over 62,000 of our members or about 12% of our book of business.

84. Of your total administrative fee please estimate the amount that will be spent in North Dakota and the amount that will be spent outside the state.

    Nearly all aspects of the administration of the NDPERS account are done within the state of North Dakota. All business functions and system support are handled by our local team. We do partner with a limited number of vendors to ensure NDPERS has a complete solution for your health benefit plan. We work with Cerner, MDdatacor, and Accordant to power certain aspects of our population health management tools. From a cost perspective, these partners make up less than 3% of the total spend. This would equate to approximately 97% of administration of the medical plan done within the state of North Dakota.

Appendix E:
NDPERS Program Information

Appendix E:

Member Statistics

Blue Cross Blue Shield of North Dakota acknowledges receipt of the Sample Contract/ASA.

Appendix G:
Existing Contract Benefits

Appendix G:

Contract Benefit Match

Existing contract benefits (plan design, wellness, services, standards, etc.) this section identifies the existing PERS plans contract benefits. Please indicate if you can match these benefits/services and if so with what resources and if not what specifically you would not be able to provide.

Current Contract Benefits	Reference Resources	Discuss and Identify Comparable Service Offering.
NDPERS Specific Plan Designs		
• Actives and Pre Medicare Retirees Medical Plans • PPO/Basic Plan – Grandfathered • PPO/Basic Plan – Non Grandfathered • Active and Pre Medicare Retiree Rx plan	http://www.nd.gov/ndpers/insurnace-plans/group-health-ppo-basic-grandfathered.html http://www.nd.gov/ndpers/insurance-plans/group-health-ppo-basic-non-grandfathered.html	As the incumbent, BCBSND will continue to administer these Benefit Designs.
Wellness Program Dedicated Wellness Website and program similar to existing program with incentives, health club membership and employer efforts Employer Based Wellness Program	http://www.nd.gov/ndpers/insurance-plans/employer-based-wellness.html Exhibit 1 Exhibit 2	As the incumbent, BCBSND will continue to administer these wellness programs.
HDHP/HSA Option for State agencies	http/www.nd.gov/ndpers/insurance-plans/group-health-hdhp.html	As the incumbent, BCBSND will continue to administer the HDHP as well as work with DBI (Discovery Benefits Incorporated) to administer the HAS. Monthly HSA administration fees are approved by NDPERS staff and paid out of the NDPERS Cash Reserve Account.

Current Contract Benefits	Reference Resources	Discuss and Identify Comparable Service Offering.
NDPERS Specific Plan Designs		
Medicare Retiree Plan Plan F look alike	http://www.nd.gov/ndpers/insurance-plans/medicare-rx.html	As the incumbent, BCBSND will continue to administer this plan.
Separate Medicare Part D RX plan	http://www.nd.gov/ndpers/forms-and-publications/publications/grp-hlth-spd-retirees.pdf http://www.nd.gov/ndpers/forms-and-publications/publications/medicare-benefits-summary-current.pdf	As the incumbent, BCBSND will continue to administer the PDP (Prescription Drug Plan) with NPA (Northern Plains Alliance.
Actuarial Services • Mandate cost estimates & reporting • During Legislative session within 24 to 48 hours • Trending • Financial reporting • Plan Design Options	Mandate Estimates – Exhibit 3 See Quarterly Report and Annual Report – (Exhibit 4 & 5 (Exhibit 6) See Exhibit 9	As the incumbent, BCBSND will continue to provide these services.

Current Contract Benefits	Reference Resources	Discuss and Identify Comparable Service Offering.
NDPERS Specific Plan Designs		
<u>Underwriting Services</u> • Dedicated NDPERS underwriter • Enrollment processes –verify enrollments entered by NDPERS staff and sent through 834 file. Rush enrollments with immediate PTI updates, generate ID cards, mail benefit books, notify NDPERS when 834 file is bad, 834 file is mapped to correct group, roll, class of coverage using their rate structure code and coverage codes (other 834 files are required to send carrier our basic codes and class codes) and staff available always to answer questions by NDPERS office. • Eligibility (removal of dependents (EOM age 26), grandchildren when parent marries, divorce (removal for spouse and step children with or without rescission letters) • ID cards • Benefit books • Summary of Benefits & Coverage • 834 Enrollment Discrepancy Reports		As the incumbent, BCBSND will continue to offer and administer these services.
<u>Communications Services</u> • NDPERS newsletter items • Healthy focused Newsletter generated by Carrier • Letters, posters, brochures and grids • Directories	http://www.nd.gov/ndpers/forms-and-publications/index.html	As the incumbent, BCBSND will continue to provide these services.

Current Contract Benefits	Reference Resources	Discuss and Identify Comparable Service Offering.
NDPERS Specific Plan Designs		
Claims Administration & Member Services • Dedicated NDPERS Pod for claims and customer calls • Subrogation, Medicare secondary payer, coordination of benefits processes • Member advocacy program • Annual satisfaction survey • Annual NDPERS claims audit • Facilitate PBM Audit • MSP Data Match Compliance • Prenatal Program enrollment/claims processing for NDPERS specific benefit • Enrollment for Tobacco Cessation Program • Subscriber Appeals • Telephone support for dedicated wellness website –dedicated PERS service unit handles calls from members	https://www.bcbsnd.com/health-and-wellness-programs/member-advocate (Exhibit 7) (Exhibit 8) http://www.nd.gov/ndpers/forms-and-publications/publications/grp-hlth-spd-actives.pdf#page+35 http://www.bcbsnd.com/search-preview/-/ndpers=tobacco-cessation	As the incumbent, BCBSND will continue to offer and administer these services. For PBM Audit program specifications please refer to Appendix B; Minimum Requirements under the Audit Section.

Current Contract Benefits	Reference Resources	Discuss and Identify Comparable Service Offering.
NDPERS Specific Plan Designs		
Finance • Manage & Report NDPERS risk sharing arrangement • Manage & Report NDPERS Cash Reserve Account • Process payments for NDPERS value added programs • Tobacco Cessation Program • RX Disease management Program • Employer Based Wellness Program • Billing (create monthly premium billings and group accounts receivables that report and track the total amount of premium due for all NDPERS members covered through carrier. These accounts are reconciled monthly with the payments and enrollment files submitted by NDPERS to ensure enrollment and billing accuracy) • 820 Premium Payment Discrepancy Reports		As the incumbent, BCBSND will continue to provide these services. The Tobacco Cessation , RX Disease Management and Employer Based Wellness programs have separate Memorandums of Understanding. BCBSND will continue providing administrative support for these programs under the current terms. Payments for the Tobacco Cessation program come from the grant with the Department of Health, while payments for the RX Disease Management and Employer Based Wellness Programs come from the NDPERS Cash Reserve Account.
All funds in the NDPERS account at BCBS get interest paid each month based upon the yield to maturity of US Treasury Notes maturing 24 months hence. Contractor shall identify the rate they propose to use in their proposal.	Contract provision 6.5	As the incumbent, BCBSND will provide this.
Risk Sharing arrangement and return of funds if claims are less than premium	Sample Contract provisions 6 & 7	As the incumbent, BCBSND will work with NDPERS Staff to continue to provide this service. For Risk Sharing specifications please see Appendix K for alternative Risk Sharing options.

Current Contract Benefits	Reference Resources	Discuss and Identify Comparable Service Offering.
NDPERS Specific Plan Designs		
Information Technologies • NDPERS specific 820 payment file • NDPERS specific 834 enrollment file • NDPERS specific benefit matrix and claims processing logic • System for processing claims for Tobacco Cessation Program • Secure file transfer system • Monthly Process improvement Team meetings		As the incumbent, BCBSND will continue to provide these services.
Legislative and Legal Services • Monitor State and Federal legislation for changes affecting NDPERS Mandate cost estimates during Legislative session • Contract reviews • Develop Memorandum ofUnderstandings for value added programs Compliance • Pharmacy class action settlements • Internal audit functions • System for monitoring provider trends	Exhibit 3 Exhibit 10	As the incumbent, BCBSND will continue to provide these services.
ACA Reporting & Compliance • Reporting of Minimum Essential Coverage (6055) • ACA required notices upon loss of coverage for exchanges • Monitor employer lapse in coverage for change to NGF and loss of participation if small group		As the incumbent, BCBSND will continue to provide these services.

Current Contract Benefits	Reference Resources	Discuss and Identify Comparable Service Offering.
NDPERS Specific Plan Designs		
Marketing and Adm Staff • Dedicated NDPERS Account Executive • Dedicated NDPERS Account Manager • Dedicated NDPERS Wellness Consultant • Dedicated NDPERS Group Consultant • Pharmacy Consulting • Provide a stable Grandfathered benefit design by monitoring activities and regulations to limit risks • Benefit overviews for agencies and political subdivisions • Complete an annual minimum participation and contribution survey • Monitor and address Legislative items • Member education programs for agencies and political subdivisions • Conduct routine meetings with NDPERS staff to ensure adequate communication on items such as wellness, process improvement, benefit design changes, and new programs.	In 2013, there were 37 employers who held benefit overview presentations https://www.bcbsnd.com/web/employers/wellness-programs/member-education in 2013, 87 employer groups held member education presentations (3,423 members).	As the incumbent, BCBSND will continue to offer these services.
Reporting • Quarterly Executive Summary and Annual Assessment • Monthly data files through secure file transfer system • Adhoc reporting including cost, utilization and risk analysis • Provide flexible spending account files to NDPERS ADP	See Quarterly Report and Annual Report – Exhibit 4 & 5	As the incumbent, BCBSND will continue to provide this service.

Current Contract Benefits	Reference Resources	Discuss and Identify Comparable Service Offering.
NDPERS Specific Plan Designs		
Dedicated Wellness Website • Dedicated Wellness Program • Dedicated NDPERS Portal • NDPERS specific voucher points • Developed wellness website challenges • Health Club Credit program • Support Wellness Star of the Month award designation • Promote community based wellness activities and award points for participation. • Develop and promote targeted messaging on Blood Pressure. • Monthly WebEx's provided by member education on dedicated wellness website and health club credit. Employer Based Wellness Program • Dedicated wellness specialist to assist coordinators with wellness activities, planning and implementing ideas. • Planned and coordinated summer Wellness Coordinator Workshops. • Support the Lt Governor's Award for Worksite Wellness with Healthy ND. • Monthly Newsletter for Wellness Coordinators • Monthly conference call with Wellness Coordinators • Provide monthly wellness articles for distribution to coordinators/employees. • Provide monthly posters for distribution to wellness worksites.	Exhibit 1 Exhibit 11 Exhibit 12 Exhibit 2 Exhibit 13 http://www.nd.gov/ndpers/insurance-plans/employer-based-wellness.html Exhibit 14 Exhibit 15	As the incumbent, BCBSND will continue to provide these services. BCBSND will continue to work with NDPERS on the Employer Based Wellness program and disperse any payments for invoices from the NDPERS Cash Reserve Account.

Current Contract Benefits	Reference Resources	Discuss and Identify Comparable Service Offering.
NDPERS Specific Plan Designs		
Employer Based Wellness Funding Program • Wellness consultant on evaluation team • Review and score applications • Administer payment of invoices from NDPERS Wellness Education • On site wellness • Presentations at employer worksites • Benefit presentations at employer worksites • Support Vaccination Awareness program with Department of Health • Create flyers for NDPERS web targeting specific disease/medical conditions • Organize the NDPERS Retiree Health Fairs • Coordinate national Walk @ Lunch Day • Participate in COSE wellness fair at capitol each September	http://www.nd.gov/ndpers/insurance-plans/employer-based-wellness.html Exhibit 16 http://www.nd.gov/ndpers/forms-and-publications/publications/additional-bcbs-wellness-programs.pdf	

Current Contract Benefits	Reference Resources	Discuss and Identify Comparable Service Offering.
NDPERS Specific Plan Designs		

Pharmacy Benefit Manager Programs
• Integrated medical and pharmacy services
• Clinical programs
• Generic incentive programs
• Specialty pharmacy program
• RX mail order services
• Formulary program
• Drug utilization reviews
  • Retrospective DUR
  • Concurrent DUR
  • Prospective DUR
  • Guided Health Medication
  • Therapy Management Program
  • Member Rebate accounts
  • Rebates passed to NDPERS Carrier has set up a member Rebate Account (MRA) in the member's name. Accounts are set up at the member Level. For every eligible brand Prescription medication a member Purchases at the point-of-sale (electronic claim), they will receive An appropriate portion of the Manufacturer rebate associated with Their particular medication into their MRA. Please note this program does Not apply to COB or paper claims.
• Establish a nationwide Select Pharmacy Network
• Claims processing for Part D program
	http://www.myprime.com	As the incumbent, BCBSND will continue to work with our RX vendors to provide these services.

Current Contract Benefits	Reference Resources	Discuss and Identify Comparable Service Offering.
NDPERS Specific Plan Designs		
Medical Management • Patient medical home • Rare and complex disease management • Disease management program for out of state members • Member advocacy programs • Preauthorizations • Concurrent review/discharge planning • Prior Approvals • Benefit inquiries • Therapy review process • Chiropractic review • Large case management • Prenatal Program with NDPERS specific benefits • Prenatal test messaging program • Provider news letters	https://www.bcbsnd.com/health-and-wellness-programs/mediqhome https://www.bcbsnd.com/health-and-wellness-programs/disease-management https://www.bcbsnd.com/health-and-wellness-programs/member-advocate http://www.nd.gov.ndpers/forms-and-publications/publications/grp-hlth-spd-actives.pdf#page+35 https://www.bcbsnd.com/health-and-wellness-programs/test4baby	As the incumbent, BCBSND will continue to provide these services.
Provider Relations • Carrier owned provider network 7 • Total cost of care contracts • National network (total out of state discounts = Provider credentialing and contracting • Physician Quality Measurement Program • Physician Recognition Program • Patient Review of Physicians Program	http://provider.bcbsnd.com 97.7% of providers in Network 35% discount off in state changes. An NDPERS specific PPO network in addition to vendors network	As the incumbent, BCBSND will continue to provide these services.

Current Contract Benefits	Reference Resources	Discuss and Identify Comparable Service Offering.
NDPERS Specific Plan Designs		

• Special contract for administration of Part D product
• NDPERS specific benefit plan design
• NDPERS specific Part D online enrollments –NDPERS does handle enrollment, however carrier receives reports each week with any enrollment discrepancies and then works with the PDP vendor and NDPERS to rectify those. NDPERS and carrier both share in working with specific part D enrollments
• NDPERS specific Part D billing-carrier handles the billing that come directly from Medicare Rx each month in a paper format. Carrier pays directly to Medicare Rx the premium amount requested on the bill. A dedicated membership person that manually goes over the bill for discrepancies each month and will find any issues we may have with the bill.
• Research member
• Enrollment/disenrollment exception report
• Monthly meetings with Part D vendors
• Notification and tracking of late enrollment penalty (LEP)
• Notifications and tracking of Income-related monthly adjustment amount (IRMAA)
• Annual Adjustment to Part D rates based on the Federal subsidy and Low Income Subsidy (LIS)
• Part D Reporting
  • Request for Information reports
  • NDPERS PDP Member Change
  • Reports
  • NDPERS PDP Response Error report
  • HICN reports
  • GAP/Cat
  • Process other internal and adhoc reporting
	http://www.nd.gov/ndpers/insurance-plans/medicare-rx.html	As the incumbent, BCBSND and NPA (Northern Plains Alliance) will continue to provide these services.

Current Contract Benefits	Reference Resources	Discuss and Identify Comparable Service Offering.
NDPERS Specific Plan Designs		
Health Savings Account • Administration of HSA's • Administer payment of monthly invoice from NDPERS Cash Reserve Account	http://www.nd.gov/ndpers/insurance-plans/group-health-hdhp.html	As the incumbent, BCBSND and DBI (Discovery Benefits Incorporated) will continue to provide these services. BCBSND and DBI will continue to work with NDPERS on invoice payments through the NDPERS Cash Reserve Account.
• Tobacco Cessation Program • Grant application and contract • Enrollment • Claims processing • Reporting requirements • Invoices for grant reimbursement	https://www.bcbsnd.com/search-preview/-/ndpers-tobacco-cessation	As the incumbent, BCBSND will continue to work with the Department of Health and NDPERS to provide these services. BCBSND will continue submission of invoices from grant reimbursement.
RX Disease Management Program (About the Patient) • Eligibilty reporting • Cost share incentive reporting • Administer payment of invoices from NDPERS Cash Reserve Account	http://www.aboutthepatient.net/NDPERS-program.html	As the incumbent, BCBSND will continue providing administrative support for the RX Disease Management program under the current terms of the Memorandums of Understanding. Payments for the RX Disease Management Program come from the NDPERS Cash Reserve Account
• Provide access to all subject matter experts and other appropriate personnel and make them available for attending board meetings, legislative, hearings, etc. as needed • Provide access to video or teleconference for Board meetings		As the incumbent, BCBSND will continue to provide these services.

Appendix H:
Performance Standards and Guarantees

Appendix K:
Suggested Changes to Plan Design, Programs and Services

Appendix K:

Suggested Changes to Plan Design, Programs and Services

Vendors should match the current programs and services as closely as possible when providing proposals. This appendix is meant for vendors to offer suggested changes to plan design and identify the cost or cost savings associated with each suggestion. In addition, vendors can suggest or offer changes to the services along with identification of the benefits/cost or savings. This section is not meant to list deviations to required agreements or service offerings.

Alternate Settlement Arrangement

As outlined in Appendix D of this proposal response, BCBSND is proposing an alternate settlement arrangement, which will increase NDPERS participation in the pharmacy program and reduce the service charge required to administer the 2015-2017 program. Under this proposed arrangement, the range will be increased to plus or minus $10 million and will be symmetrical. Details are outlined below:

- Gain – BCBSND and NDPERS share 50%/50% in the first $10 million; NDPERS retains 100% of all gains over $10 million.
- Loss – BCBSND and NDPERS share 50%/50% in the first $10 million; BCBSND assumes 100% of all losses over $10 million.

Transparent Pharmacy Benefit Management Program

BCBSND's base proposal, outlined in Appendix D1.4, is based on the current, pass-through PBM funding arrangement between BCBSND and NDPERS. Partial rebate withhold, retention of Manufacturer Admin fees and pharmacy transaction fees are utilized to offset the the majority of the PBM administrative fees assessed to BCBSND by Prime Therapeutics LLC. BCBSND continues to offer NDPERS the pass-through of the BCBSND negotiated rates with Prime Therapeutics LLC as it relates to mail service operations and specialty pharmacy. As an alternative arrangement, a pass-through program that aligns with the RFP request for 100% pass-through of rebates, retail network pharmacy transaction fees, and manufacturer admin fees is outlined below.

	2015-2017 Estimates, Proposed Pricing Arrangement (Appendix D1.4)	Alternative Transparent Program	Adjustments to RX Admin and Financial Guarantees based on Alternative Program Election
RX Administrative Fee	$0.00	Increase Admin Fee by $3.40 PCPM. Decrease Claim Projections by $3.40 PCPM to Reflect Increase in Rebates, MAF and Pharmacy Transaction Fees. Nets No Change to Overall Rate	
Rebates	"Partial Rebate withhold by BCBSND"	"100% Pass-through of Rebates."	Appendix D1.4 Total Rebate+MAF/Branded Rx Y1: $64.81 Y2: $73.49
Manufacturer Administrative Fees (MAF)	"Retained by PBM"	"Pass-through of the value of Manufacturer Admin Fees"	
Pharmacy Transaction Fee	"Retained by PBM"	"Pass-through of the value of Pharmacy Transaction Fees"	No impact to RX financial guarantees

Benefit and Cost Sharing Changes

Modification	Rate Change
Annual premium change to increase Deductible (GF & NGF PPO):	-0.6%
from $400 single/$1200 family to $450 single/$1350 family	-1.1%
from $400 single/$1200 family to $500 single/$1500 family	
Annual premium change to increase Coinsurance Maximum (GF PPO only):	-0.5%
from $750/1500 to $900/1800 IN and $1250/2500 to $1500/3000 OON	-1.0%
from $750/1500 to $1050/2100 IN and $1250/2500 to $1750/3500 OON	
Annual premium change to increase Out-of-Pocket Maximum (NGF PPO only):	-0.5%
from $2150/4700 to $2300/5000 IN and $2650/5700 to $2900/6200 OON	-1.0%
from $2150/4700 to $2450/5300 IN and $2650/5700 to $3150/6700 OON	
Annual premium change to increase Office Visit copay (GF & NGF PPO):	-0.4%
increase by $5.00	-0.8%
increase by $10.00	
Annual premium change to increase Emergency Room copay (GF & NGF PPO):	-0.03%
increase by $10.00	-0.09%
increase by $25.00	
Annual premium change to increase RX Formulary Generic copay (GF & NGF PPO):	-0.4%
from $5 copay to $7.50 copay	-0.7%
from $5 copay to $10 copay	
Annual premium change to increase RX Formulary Brand copay (GF & NGF PPO):	-0.05%
from $20 copay to $22.50 copay	-0.1%
from $20 copay to $25 copay	
Annual premium change to increase RX Non-Formulary copay (GF & NGF PPO):	-0.03%
from $25 copay to $27.50 copay	-0.05%
from $25 copay to $30 copay	
Annual premium change to increase RX Formulary coinsurance maximum (GF PPO only):	-0.05%
from $1000 to $1200	-0.1%
from $1000 to $1500	
Annual premium change to cover Colonoscopy Screening 100%, once every 10 years:	$2.50
beginning at age 50 (cost per GF contract per month)	$3.00
beginning at age 45 (cost per GF contract per month)	
Loss of Grandfathered Status (GF PPO only):	3.7%
(no cost-share on Prev. Svcs & Women's Preventive mandate & ACA mandates)	

Note: When combining changes, the resulting rate effect may be less than the sum of the factors listed.

Prescription Drug Benefit Modifications – Decrease Range (From 0.5% to 6.5% of Rx Claims)

BCBSND and Prime are continually partnering on behalf of our clients to seek improved pharmacy access while saving our clients money. Described below are several options that can offer meaningful savings for NDPERS.

- **Prime Select Network**
  Prime currently maintains the BCBSND Select Network for BCBSND employer groups. This broad BCBSND pharmacy network includes a subset of rural pharmacies that are reimbursed at a higher rate to ensure pharmacy solvency. These generous rates are beneficial to North Dakota pharmacies and do not create spread margin retained by Prime or BCBSND; by doing this, both BCBSND and NDPERS show support for instate, North Dakota pharmacies. However, BCBSND is willing to remove these higher rates provided to North Dakota pharmacies at the request of NDPERS in lieu of applying improved pharmacy financial performance guarantees to demonstrate our commitment to enhanced savings.

  Should NDPERS transition to Prime's Select Network, there will be no disruption in retail pharmacy availability, as both the BCBSND Select and Prime Select Networks contract with the same pharmacies.

- **Minimum Reimbursement Level**
  BCBSND provides a minimum reimbursement level to ensure that retail pharmacies remain solvent and to ensure continued member access in rural areas. The impact of this minimum reimbursement results in dispensing fees paid to the pharmacy as listed in the base proposal. At the request of NDPERS, BCBSND is willing to remove this deeper reimbursement to network pharmacies. Impacts to the removal of the minimum reimbursement level will result in overall lower aggregate dispensing fees.

- **Extended Supply Network**
  As an alternative to traditional mail service, an extended supply network (ESN) involves the creation of a subset of the BCBSND Select Network whose goal is to retain the sole ability to dispense drugs for greater than a one month supply (e.g., 90-day retail network). With the implementation of an ESN network, all pharmacy claims for greater than a one month supply are limited to fulfillment through an ESN provider. In addition, in exchange for slightly reduced pharmacy availability, an ESN network provides enhanced discounted savings on medications. Furthermore, ESN networks have been shown to improve adherence by 7% to 10% when compared to 30 day supplies. Unlike other PBMs that offer enhanced rates for only claims >84 days supply, BCBSND extends this opportunity to all claims greater than a 1 month supply. *If any of the above options are selected BCBSND will provided modified RX financial guarantees.

- **Prime Specialty Pharmacy – Exclusive Specialty Arrangement**
  When it comes to specialty drug benefits, BCBSND and Prime recommend an integrated, consultative approach to managing specialty pharmacy that only a carve-in relationship provides. We believe that with our exclusive carve-in offering, NDPERS will have a more complete picture of each member's health enabling better decision making for the management of specialty drugs, while keeping costs as low as possible.

  Our comprehensive approach to managing specialty addresses both medical and pharmacy benefit coverage with recommendations as to which benefit is most appropriate for a particular specialty drug. We have a complete package of care management programs designed to promote appropriate use, while managing the costs, of these expensive therapies.

  Should NDPERS choose Prime's Exclusive Specialty Pharmacy, BCBSND can increase the aggregate specialty discount guarantee to 17.0%. The Aggregate Specialty Discount is a Composite Brand /Generic Discount for both (Select & Rural Networks). We are defining the Aggregate Specialty Guarantee to be ((Specialty Discount Guarantee – Actual Specialty Discount (including all drug categories)) * Specialty AWP. Guarantees only apply to drugs dispensed through Prime Specialty Pharmacy under an exclusive relationship and as defined

by the Prime Exclusive Specialty Fee Schedule. Dispensing fee will be $0.00 for those drugs dispensed through Prime Specialty Pharmacy. Guarantees will be reconciled annually and applied in aggregate. Specialty drugs dispensed through the medical benefit will not be included in this guarantee reconciliation. Employer demographics and geography will remain actuarially consistent. Overall Specialty Discount guarantee will not include any new specialty drugs brought to market and added to the specialty list during the term of the contract. Overall Specialty Discount guarantees will not include any limited distribution drugs. Specialty volume changes must be less than 10% as compared to the data and claims experience provided by the client.

- **Mandatory Mail Benefit**
  Modify the pharmacy benefit to require mail order for maintenance medications filled for 90 days supply and change retail copays to 1 per 34 day supply.

Removal of Member Rebate Accounts

Historically, a portion of rebates have been returned to NDPER members in the form of a Member Rebate Account or MRA. If requested, BCBSND is can stop passing the rebates on to the members. By doing so, rebates currently applied to MRA accounts would be redirected to NDPERS cash account.

Opportunity	Estimated Financial Performance (Appendix D1.4)	Estimated Projected Total Savings
Remove member rebate accounts (MRA)	We anticipate no impact as rebates listed within our baseline proposal are currently representative of both member (MRA) and NDPERs group allocations	Increase to NDPERS cash account of up to $600,000.

Wellness Modifications – Increase or Decrease Cost Based on Design

As noted in Question 47 of Appendix C – Questionnaire, BCBSND has the capability to administer outcome-based wellness programs and incentives, and has done so historically for multiple employer groups. Currently, multiple sources of data (clinical, claims and subjectively reported) are utilized to administer the participation and outcomes-based programs and incentives. BCBSND provides a comprehensive environment that administers the member experience, group level reporting and differing channels for application of incentives (online catalog, premium differential and HSA/HRA contribution).

Attachments

Attachment 1

Attachment 1

Ingredient Cost Fact Sheet

PRIME THERAPEUTICS®

Fact Sheet Study finds Prime has lowest ingredient cost per prescription

Pharmacy benefit arrangements are notoriously complicated. It can be tricky to distinguish drug costs from program expenses. Rebates and "spread" pricing arrangements can obscure actual costs and the accuracy of reported savings. And while drug trend can show how much and how quickly costs are growing, it can't reveal how those actual costs compare.

Ingredient cost measure offers a clearer view into pharmacy spending
By stripping away administrative and other program-related fees, ingredient cost offers a clearer view into pharmacy spending. With rebates included, the "net" ingredient cost per prescription provides a precise picture of the cost of drugs used by plan members.

Because it is based on actual drug costs, ingredient cost is useful in monitoring plan performance. It is also the best way to compare the performance of different pharmacy benefit managers (PBMs).

Independent study finds Prime and its clients outperform the industry in ingredient cost
Prime commissioned a study of the prescription drug costs of leading PBMs. Generic rates, network discounts and ingredient costs were compared against those of Prime's commercial book of business.

Key Results

The study found Prime had a ***$6.74 lower net ingredient cost*** *per prescription than the competitor average.*

Over the past three years, Prime has ***consistently*** *achieved lower net ingredient costs.*

The study found that Prime's net ingredient cost was the lowest – beating the competitor average by more than $6 per prescription. Analysis over three years showed that Prime's net ingredient costs were consistently the lowest (Figure 1).

Fig. 1 Net ingredient cost per prescription (Rx)

	Competitor avg.	Prime	Savings per Rx
2011	$61.77	$55.86	$5.91
2012	$62.13	$58.50	$3.63
2013	$63.58	$56.84	$6.74

Low net ingredient costs a result of Blue + Prime collaboration
Prime works with several leading Blue Cross and Blue Shield Plans across the nation. These plans hold strong positions within their regional health care markets. Prime focuses this market dominance and uses it to negotiate extremely competitive discounts with pharmacies and manufacturers. Blue Plans also influence key formulary, utilization management and benefit decisions that help control drug costs.

Trust, alignment and cooperation between Blue Plans and Prime help make medicine more affordable. On average, Blue + Prime members and clients collectively saved $6.74 (over what they might have paid using a competing benefit manager) on every prescription in 2013.

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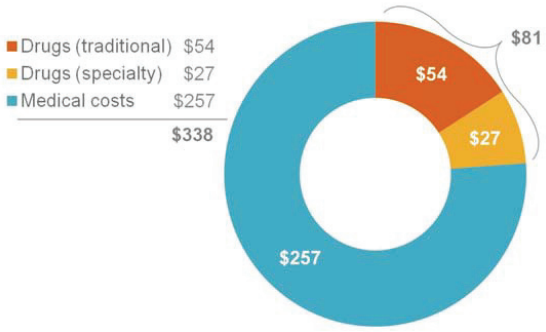
Generics help generate low ingredient costs
High generic dispensing rates and strong generic discounts contribute to Prime's low ingredient costs. Competitors were found to have higher discounts on traditional brand-name drugs. But with ever-smaller numbers of brand-name drugs being dispensed, brand discounts did not alter the results.

Drug costs a growing factor in health care spending
Prescription drugs are a key part of total health care costs. Drugs account for nearly one-quarter of all health care spending (Figure 2).[1]

Health spending in the United States has risen quickly over the past several years, and is expected to continue to grow. Drug spending is increasing as more high-cost specialty drugs are being used to treat a wide range of chronic illnesses.

Plan sponsors are looking to effective pharmacy benefit management as a way to tame growing health care expenses. And one of the easiest ways to cut spending is to *start with the lowest costs possible.*

Fig. 2 Average health care costs per member per month



Affordable medicine is part of Prime's purpose
Keeping costs down is just one of the ways Prime helps people get the medicine they need to feel better and live well. Prime follows a straightforward approach to deliver lower costs in a high-quality environment. We use our unique connections with Blue Plans to manage pharmacy in the context of total health. These efforts make a big difference in our members' and clients' health care costs.

To learn more about how Prime fulfills its commitment to make medicine more affordable, talk to your Prime representative or visit PrimeTherapeutics.com today.

About the study

Prime commissioned an independent third-party consultant to study the prescription drug costs of three national stand-alone PBMs and one captive PBM. Using data from the consultant's proprietary data warehouse, the study compared blinded data against Prime's full-service commercial book of business.

The study looked at the first quarters of 2011 through 2013. To ensure consistency, all prescriptions were classified as brand-name or generic based on Medi-Span definitions. Claim counts were adjusted to reflect consistent days' supply.

[1] Average for Prime's full-service commercial book of business, FY 2012; derived using combined medical and pharmacy data.

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Attachment 2

Attachment 2

Statutory Financial Statements

Statutory Financial Statements
December 31, 2013 and 2012

NORIDIAN®
Mutual Insurance Company

d/b/a BLUE CROSS BLUE SHIELD OF NORTH DAKOTA

Noridian Mutual Insurance Company
d/b/a Blue Cross Blue Shield of North Dakota

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CPAs & BUSINESS ADVISORS

Independent Auditor's Report

To the Board of Directors
Noridian Mutual Insurance Company d/b/a Blue Cross Blue Shield of North Dakota
Fargo, North Dakota

Report on the Financial Statements
We have audited the accompanying statutory statements of Noridian Mutual Insurance Company d/b/a Blue Cross Blue Shield of North Dakota (the Company), which comprise the statutory statements of admitted assets, liabilities, and policyholder surplus as of December 31, 2013 and 2012, and the related statutory statements of operations and changes in policyholder surplus, and cash flows for the years then ended, and the related notes to the financial statements.

Management's Responsibility for the Financial Statements
Management is responsible for the preparation and fair presentation of these financial statements in accordance with the accounting practices prescribed or permitted by the North Dakota Insurance Department. Management is also responsible for the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error.

Auditor's Responsibility
Our responsibility is to express an opinion on these financial statements based on our audit. We conducted our audit in accordance with auditing standards generally accepted in the United States of America. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on the auditor's judgment, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the Company's preparation and fair presentation of the financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the Company's internal control. Accordingly, we express no such opinion. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluating the overall presentation of the financial statements.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

Basis for Adverse Opinion on U.S. Generally Accepted Accounting Principles
As described in Note 1 to the financial statements, the financial statements are prepared using accounting practices prescribed or permitted by the North Dakota Insurance Department, which is a basis of accounting other than accounting principles generally accepted in the United States of America. The effects on the financial statements of the variances between the statutory basis of accounting described in Note 1 and accounting principles generally accepted in the United States of America, although not reasonably determinable, are presumed to be material.

Adverse Opinion on U.S. Generally Accepted Accounting Principles
In our opinion, because of the significance of the matter described in the Basis for Adverse Opinion on U.S. Generally Accepted Accounting Principles paragraph, the financial statements referred to above do not present fairly, in accordance with accounting principles generally accepted in the United States of America, the financial position of Noridian Mutual Insurance Company d/b/a Blue Cross Blue Shield of North Dakota as of December 31, 2013 and 2012, or the results of its operations or its cash flows for the years then ended.

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Opinion on Regulatory Basis of Accounting
In our opinion, the financial statements referred to above present fairly, in all material respects, the admitted assets, liabilities, and policyholder surplus of Noridian Mutual Insurance Company d/b/a Blue Cross Blue Shield of North Dakota as of December 31, 2013 and 2012, and the results of its operations and its cash flows for the years then ended, on the basis of accounting described in Note 1.

Change in Accounting Principle
As discussed in Note 1 to the financial statements, during 2013 the Company changed its method of accounting for its pension and postretirement benefits as required by Statements of Statutory Accounting Principles (SSAP) No. 92 and 102. Our opinion is not modified with respect to this matter.

Emphasis of Matter
As further discussed in Note 16 to the financial statements, the Company's wholly owned subsidiary, Noridian Healthcare Solutions, LLC, entered into an agreement for consensual exit from a significant contract with the State of Maryland, through the state's health insurance web-based marketplace. The Company is a party to this exit agreement with the State of Maryland. Management's assessment of the likelihood that claims will be made in conjunction with this exit and the probability of loss is discussed in Note 16 to the financial statements. Our opinion is not modified with respect to this matter.

Minneapolis, Minnesota
June 26, 2014

Noridian Mutual Insurance Company
d/b/a Blue Cross Blue Shield of North Dakota
Statutory Statements of Admitted Assets, Liabilities, and Policyholder Surplus
December 31, 2013 and 2012

	2013	2012
ASSETS		
CASH AND INVESTED ASSETS		
Bonds	**$ 170,647,000**	$ 177,588,000
Equity interests		
Preferred stocks	**139,000**	386,000
Common stocks	**72,203,000**	147,334,000
Real estate - occupied by the Company	**24,503,000**	25,818,000
Cash	**7,617,000**	46,763,000
Short-term investments	**70,580,000**	7,067,000
Other long-term invested assets	**47,000**	77,000
Total cash and invested assets	**345,736,000**	405,033,000
RECEIVABLES		
Premiums due and unpaid	**4,709,000**	3,248,000
Health care and other	**22,075,000**	20,725,000
Funds held by Federal Employee Program (FEP)	**28,696,000**	26,498,000
Investment income accrued	**1,959,000**	2,241,000
Amounts due from subsidiaries and affiliates	**24,048,000**	29,211,000
Amounts relating to self insured health plans	**10,589,000**	2,433,000
Total receivables	**92,076,000**	84,356,000
FEDERAL INCOME TAX RECOVERABLE	**1,967,000**	1,352,000
NET DEFERRED TAX ASSET	**6,900,000**	4,600,000
INTANGIBLE PENSION BENEFIT	**-**	3,215,000
ELECTRONIC DATA PROCESSING EQUIPMENT AND SOFTWARE	**11,510,000**	7,334,000
	$ 458,189,000	$ 505,890,000

See Notes to Financial Statements

Noridian Mutual Insurance Company
d/b/a Blue Cross Blue Shield of North Dakota
Statutory Statements of Admitted Assets, Liabilities, and Policyholder Surplus
December 31, 2013 and 2012

	2013	2012
LIABILITIES AND POLICYHOLDER SURPLUS		
AGGREGATE RESERVES FOR POLICY CONTRACTS		
Claims expense	**$ 144,378,000**	$ 137,060,000
Premium deficiency reserve	**10,900,000**	-
Unpaid claims adjustment expenses	**3,904,000**	3,012,000
Aggregate claim reserves	**1,500,000**	1,300,000
Total reserves for policy contracts	**160,682,000**	141,372,000
ACCRUED GENERAL EXPENSES	**25,702,000**	30,402,000
PROVISION FOR EXPERIENCE RATED REFUNDS	**14,713,000**	12,115,000
PREMIUMS RECEIVED IN ADVANCE	**20,708,000**	16,797,000
FEDERAL EMPLOYEE PROGRAM (FEP) PREMIUMS	**15,896,000**	14,198,000
AMOUNTS RETAINED FOR OTHERS	**6,205,000**	6,730,000
AMOUNTS DUE TO SUBSIDIARIES AND AFFILIATES	**3,043,000**	4,836,000
AMOUNTS HELD UNDER UNINSURED PLANS	**4,765,000**	4,993,000
ACCRUED PENSION	**1,943,000**	2,277,000
UNCLAIMED PROPERTY PAYABLE	**444,000**	203,000
GUARANTEE ACCRUAL	**5,000,000**	-
Total liabilities	**259,101,000**	233,923,000
POLICYHOLDER SURPLUS	**199,088,000**	271,967,000
Total liabilities and policy holder surplus	**$ 458,189,000**	$ 505,890,000

See Notes to Financial Statements

Noridian Mutual Insurance Company
d/b/a Blue Cross Blue Shield of North Dakota
Statutory Statements of Operations and Changes in Policyholder Surplus
Years Ended December 31, 2013 and 2012

	2013	2012
OPERATIONS		
PREMIUM INCOME	**$ 1,195,644,000**	$ 1,106,309,000
BENEFITS UNDER HEALTH POLICIES		
Hospital and medical benefits	**953,022,000**	867,708,000
Prescription drugs	**144,446,000**	129,368,000
Total benefits under health policies	**1,097,468,000**	997,076,000
Claims adjustment expenses	**43,090,000**	40,436,000
General and administrative expenses	**69,404,000**	54,691,000
Increase in reserves for health contracts	**10,900,000**	-
Total underwriting expenses	**1,220,862,000**	1,092,203,000
UNDERWRITING GAIN (LOSS)	**(25,218,000)**	14,106,000
OTHER INCOME		
Investment income	**12,376,000**	12,403,000
Realized capital gain (loss)	**(61,998,000)**	2,857,000
Other loss	**(2,926,000)**	(2,719,000)
	(52,548,000)	12,541,000
INCOME (LOSS) BEFORE INCOME TAXES	**(77,766,000)**	26,647,000
INCOME TAX PROVISION	**(3,022,000)**	(4,554,000)
NET INCOME (LOSS)	**$ (80,788,000)**	$ 22,093,000
CHANGES IN POLICYHOLDER SURPLUS		
BALANCE, BEGINNING OF YEAR	**$ 271,967,000**	$ 270,296,000
Net income (loss)	**(80,788,000)**	22,093,000
Change in unrealized appreciation on investments	**15,716,000**	(13,232,000)
Change in net deferred income taxes	**5,529,000**	(1,915,000)
Change in nonadmitted assets	**11,561,000**	(5,275,000)
Cumulative effect of change in accounting principles	**(24,897,000)**	-
BALANCE, END OF YEAR	**$ 199,088,000**	$ 271,967,000

See Notes to Financial Statements

Noridian Mutual Insurance Company
d/b/a Blue Cross Blue Shield of North Dakota
Statutory Statements of Cash Flows
Years Ended December 31, 2013 and 2012

	2013	2012
OPERATING ACTIVITIES		
Premiums collected	**$ 1,196,079,000**	$1,105,844,000
Investment income received	**13,867,000**	13,412,000
Other cash applied	**-**	(2,171,000)
Total income	**1,209,946,000**	1,117,085,000
Benefit and loss related payments	**(1,089,950,000)**	(978,694,000)
Expenses paid and aggregate write-ins for deductions	**(125,313,000)**	(86,693,000)
Income taxes paid	**(3,637,000)**	(2,141,000)
NET CASH FROM (USED FOR) OPERATING ACTIVITIES	**(8,954,000)**	49,557,000
INVESTING ACTIVITIES		
Proceeds from investments sold, matured or repaid		
Bonds	**48,792,000**	49,211,000
Stocks	**117,481,000**	55,644,000
Mortgage loans	**-**	300,000
Other invested assets	**1,114,000**	943,000
Miscellaneous proceeds	**1,244,000**	-
Total investment proceeds	**168,631,000**	106,098,000
Cost of investments acquired		
Bonds	**(41,973,000)**	(45,255,000)
Stocks	**(89,441,000)**	(79,180,000)
Real estate	**(1,107,000)**	(2,851,000)
Other invested assets	**(100,000)**	-
Total investments acquired	**(132,621,000)**	(127,286,000)
NET CASH FROM (USED FOR) INVESTING ACTIVITIES	**36,010,000**	(21,188,000)
FINANCING AND MISCELLANEOUS ACTIVITY		
Other cash applied	**(2,689,000)**	(59,057,000)
NET CHANGE IN CASH AND SHORT-TERM INVESTMENTS	**24,367,000**	(30,688,000)
CASH AND SHORT-TERM INVESTMENTS, BEGINNING OF YEAR	**53,830,000**	84,518,000
CASH AND SHORT-TERM INVESTMENTS, END OF YEAR	**$ 78,197,000**	$53,830,000

See Notes to Financial Statements

Note 1 - Summary of Significant Accounting Policies

Nature of Operations

Noridian Mutual Insurance Company d/b/a Blue Cross Blue Shield of North Dakota (Company or NMIC), a member of the Blue Cross and Blue Shield Association, an association of independent Blue Cross and Blue Shield plans, is incorporated as a mutual insurance company under the North Dakota Nonprofit Corporation Act and is subject to regulation by the North Dakota Insurance Department (Department).

The Company is organized to carry any lines of insurance now or hereafter authorized by the laws of the State of North Dakota and has the ability to market products in states other than North Dakota. The Company provides individual, group and association health insurance and pharmaceutical benefits under traditional and preferred provider organization contracts. The Company contracts with hospitals, physicians and other providers of health care in order to obtain discounts for subscriber members.

The Company also performs administrative services such as billing, collection and claim processing for other Blue Cross and Blue Shield plans, various governmental agencies and various fully and modified self-insured groups within the State of North Dakota. This administrative services business represents a significant portion of their business.

Basis of Financial Reporting

The Company prepares its statutory financial statements in conformity with accounting practices prescribed or permitted by the North Dakota Insurance Department.

The North Dakota Insurance Department recognizes only statutory accounting practices prescribed or permitted for determining and reporting the financial condition and results of operations of an insurance company and for determining its solvency under the North Dakota Insurance Law. The National Association of Insurance Commissionsers (NAIC) Accounting Practices and Procedures Manual and statutory accounting principles (NAIC SAP) has been adopted as a component of prescribed or permitted practices by the state of North Dakota. The following are some of the significant differences between NAIC SAP and accounting principles generally accepted in the United States of America (GAAP).

a) Investments in bonds are generally carried at amortized cost, while under GAAP, they are carried at either amortized cost or estimated fair value based on their classification according to the Company's ability and intent to hold or trade the securities;

b) Acquisition costs, such as commissions and other costs related to acquiring new business, are expensed as incurred, while under GAAP, they are deferred and amortized to income as premiums are earned;

c) NAIC SAP requires an amount be recorded for deferred taxes, however, there are limitations as to the amount of deferred tax assets that may be reported as "admitted assets"; and a federal income tax provision is required on a current basis for the statutory statements of operations;

d) Assets are reported under NAIC SAP at the "admitted asset" value and "non-admitted" assets are excluded through a charge against unassigned surplus, while under GAAP, "non-admitted assets" are reinstated to the balance sheet, net of any valuation allowance;

e) Comprehensive income and its components are not presented in the statutory financial statements;

f) Wholy-owned subsidiaries are reported under NAIC SAP as an investment, while under GAAP, wholly-owned subsidiaries are required to be consolidated;

g) The Defined Benefit Plan is currently accounted for under the guidelines of Statement of Statutory Accounting (SSAP) 102 and 92 for NAIC with certain limitations as to whether assets are admitted, as opposed to Accounting Standards Codificaton (ASC) 715 for GAAP accounting.

The State of North Dakota has adopted certain prescribed accounting practices, which differ from those found in NAIC SAP. Specifically:

1. Electronic data processing systems are allowed to be depreciated over a period not to exceed five years whereas under NAIC SAP the period cannot exceed three years (see Note 6),
2. North Dakota Century Code 26.1-05-19(33), commonly referred to as the "basket clause," provides for "Loans, securities, or investments in addition to those permitted in this section, whether or not the loans, securities, or investments qualify or are permitted as legal investments under its charter or under other provisions of the laws of this state. The aggregate admitted value of the Company's investments under this section may not at any one time exceed seven percent of the Company's admitted assets, or the amount equal to the Company's policyholder surplus in excess of the minimum policyholder surplus required by law, whichever is less,"; and
3. North Dakota single state domestic insurers are permitted to account for long-term certificates of deposit (CD's) as cash under certain conditions described in the North Dakota Department of Insurance Bulletin 2003-3 and will exempt CD's generally from the NAIC Securities Valuation Office (SVO) filing requirement. In compliance with this permitted practice, $3,000,000 in certificates of deposit have been reclassified from Schedule D – Investments to Schedule E – Cash as of December 31, 2013 and 2012. The Commissioner of Insurance has the right to permit other specific practices, which deviate from prescribed practices.

A reconciliation of the Company's net income and policyholder surplus between NAIC SAP and practices prescribed by the North Dakota Insurance Department is shown below:

	2013	2012
Net income (loss), North Dakota Insurance Department prescribed practices	**$ (80,788,000)**	$ 22,093,000
Depreciation of EDP equipment	**(1,187,000)**	(173,000)
Net income (loss), NAIC SAP	**$ (81,975,000)**	$ 21,920,000
Policyholder surplus, North Dakota Insurance Department prescribed practices	**$ 199,088,000**	$ 271,967,000
Depreciation of EDP equipment	**(4,210,000)**	(3,023,000)
Invested assets-basket clause	**(9,442,000)**	(4,681,000)
Policyholder surplus, NAIC SAP	**$ 185,436,000**	$ 264,263,000

Revenue and Expenses

Premiums are recognized as revenue over the premium-paying period of the policies. Claims are recognized as expenses as incurred. Expenses, including acquisition costs related to acquiring new business, are charged to operations as incurred. Investment income is recognized as earned, net of related investment expenses.

Cash and Invested Assets

Investments in bonds not backed by other loans are carried at amortized book value using the scientific method with the exception of bonds with a NAIC rating of 3 through 6, which are carried at the lower of amortized book value or market. Loan-backed bonds are carried at amortized cost using the retrospective method.

Unaffiliated common stocks are carried at market value as determined using market prices published by the NAIC SVO.

For investments carried at market value, the related unrealized appreciation or depreciation is reflected in policyholder surplus. For investments carried at amortized book value, cost is adjusted for amortization of premiums and accretion of discounts, which are recognized as adjustments to interest income. Realized investment gains and losses determined on the specific identification basis are included in other income in the statement of operations.

The Company's investments in unconsolidated subsidiaries are carried at their underlying audited generally accepted accounting principles equity value in accordance with SSAP No. 97 – *Investments in Subsidiary, Controlled, and Affiliated Entities* and SSAP No. 48 – *Joint Ventures, Partnerships and Limited Liability Companies*. The Company's investment in Noridian Healthcare Solution, LLC (NHS) is then reduced for the effect of remaining non-admitted assets that had been transferred to NHS upon original formation of the entity per agreement with the North Dakota Insurance Department. As of December 31, 2013 and 2012, remaining non-admitted assets relating to the investment were $0 and $110,000, respectively. The Company's investment in its wholly owned subsidiary Twenty First Century Information Solutions (Twenty First) is carried based on the statutory equity of CoreLink Administrative Solutions, LLC of which Twenty First owns 50% and MDdatacor, Inc. (MDD) of which Twenty First owns 100%. The Company's share of unconsolidated undistributed earnings is reflected in policyholder surplus. Earnings from the subsidiaries are only recognized as income by the Company when received in the form of dividends or distributions.

Cash equivalents are highly liquid investments with a maturity of three months or less when purchased. Accounts at each institution are insured by the FDIC up to $250,000. At times during the year, the Company's balance exceeded this limit. The Company does not consider this a material risk.

Certificates of deposit are considered to be cash, provided 1) the issuer of the certificate of deposit is a solvent bank, trust company, savings and loan association, or credit union that is insured by the Federal Deposit Insurance Corporation, the Federal Savings and Loan Insurance Corporation, or the National Credit Union Administration; 2) the aggregate amount of funds deposited by the domestic insurance company, as certificate of deposits or in any other form, with any single issuer does not exceed $250,000; and 3) the certificate of deposit is payable only to the named depositor which is the domestic insurance company. If these conditions do not exist the certificates of deposit are classified as bond investments.

Short-term investments, which mature in one year or less, are carried at book value, which approximates market value.

Real estate investments are carried at cost, less accumulated depreciation and encumbrances. Depreciation of investment properties is calculated, on a straight-line method, over an estimated useful life of 20 to 50 years for buildings, 15 to 50 years for building improvements and 20 years for land improvements.

Fair Value of Financial Instruments

The Company recognizes and measures assets and liabilities required to be recorded at fair value using the framework prescribed by SSAP No. 100, *Fair Value Measurements*.

Fair value is defined as the exchange price that would be received for an asset or paid to transfer a liability (an exit price) in the principal or most advantageous market for the asset or liability in an orderly transaction between market participants on the measurement date. Valuation techniques should maximize the use of observable inputs and minimize the use of unobservable inputs.

A fair value hierarchy has been established, which prioritizes the valuation inputs into three broad levels. Level 1 inputs consist of quoted prices in active markets for identical assets or liabilities that the reporting entity has the ability to access at the measurement date. Level 2 inputs are inputs other than quoted prices included within Level 1 that are observable for the related asset or liability. Level 3 inputs are unobservable inputs related to the asset or liability.

Investment Income

Investment income consists primarily of interest and dividends. Interest is recognized on an accrual basis and dividends are recorded as earned at the ex-dividend date. Accrual of income is suspended for bonds that are in default or when the receipt of interest payments is in doubt. Realized capital gains and losses are determined on a specific identification basis and recorded in operations.

Premium Income

Subscriber fees are billed in advance of their respective coverage periods and recorded as uncollected premiums until collected. Income from such fees is recorded as earned during the coverage period. Premiums received in advance represent the portion of fees, which will be earned in future periods, which varies from one month to one year depending upon the due date and the number of months of coverage provided by these fees.

Policy and Contract Claims

Aggregate reserves for policy contracts have been adjusted to reflect claims incurred but unpaid at year-end, which includes claims in process, unreported claims, claims of currently hospitalized patients and premium deficiency reserve. The amount of this liability has been estimated by the use of accepted actuarial methods utilizing statistics developed from prior claim payment experience. Estimated claim processing expenses relating to incomplete and unreported claims are being accrued currently as an expense. Differences between actual and estimated claims are charged to operations in the year that the differences, if any, become known.

Premium Deficiency Reserves

When the expected claim payments and administrative expenses exceed the premiums to be collected for the remainder of the contract period, a premium deficiency reserve is recorded for the deficiency, with a corresponding charge to operations. The Company does not utilize anticipated investment income as a factor in the premium deficiency calculation.

Income Taxes

The Company's federal income tax return is filed on a consolidated basis with NHS, Noridian Insurance Services, Inc. (NISI), Twenty First and MDD. The consolidated group's liability is apportioned among the members in accordance with the ratio which that portion of the consolidated taxable income bears to the consolidated taxable income based upon separate return calculations with current credit for net losses. Intercompany tax balances are typically settled annually in the third quarter. The Company includes 50% of the taxable income/loss of CoreLink Administrative Solutions, LLC in the calculation of income tax due.

The Company will recognize future accrued interest and penalties related to unrecognized tax benefits in income tax expense if incurred. Under normal circumstances, the Company is no longer subject to Federal tax examinations by tax authorities for years before 2010.

The Company undergoes an annual analysis of various tax positions, assessing the likelihood of those positions being upheld upon examination with relevant tax authorities.

Income taxes are provided for the tax effects of transactions reported in the financial statements and consist of taxes currently due plus deferred taxes related primarily to differences between the basis of assets and liabilities for statutory and income tax reporting. The deferred tax assets and liabilities represent the future tax return consequences of those differences, which will either be taxable or deductible when the assets and liabilities are recovered or settled. The tax effect of deferred tax assets and liabilities and the changes between years is reflected in policyholder surplus.

SSAP No. 101 – *Income taxes – A Replacement of SSAP No. 10R and SSAP No. 10,* is effective for 2012 interim and annual financial statements and beyond. The new standard included revised guidance for tax contingencies, and the non-elective deferred tax asset admissibility test along with significant modifications to the deferred tax assets admissibility test and disclosure modifications. A change resulting from this adoption was accounted for prospectively and reflected as a change in accounting principle in accordance with SSAP No. 3 – *Accounting for Changes and Corrections of Errors*. The adoption of this pronouncement in 2012 did not have a material impact on the financial statements.

Data Processing Equipment

Data processing equipment and operating and nonoperating software are carried at cost less accumulated depreciation. Depreciation expense is computed using the straight-line method over the lesser of the estimated useful life of the related asset or five years for EDP equipment and operating system software. Depreciation expense for nonoperating system software is computed using the straight-line method over the lesser of its estimated useful life or five years as permitted by the North Dakota Insurance Department.

Non-Admitted Assets

Certain assets, primarily prepaid pension assets, furniture and equipment and nonoperating software are designated as "non-admitted" under statutory reporting requirements. These assets are excluded from the statutory statements of admitted assets, liabilities and surplus by adjustments to unassigned surplus.

Expense Reimbursements

The Company allocates its operating expenses by various lines of business to determine the expense reimbursements due from affiliates where the Company provides services or acts as a fiscal intermediary, from other federal health programs, and other cost based reimbursable lines of business.

Advertising Costs

All advertising and promotion costs are expensed when incurred. Advertising expense amounted to $2,623,000 and $2,875,000 for the years ended December 31, 2013 and 2012, respectively.

Use of Estimates in the Preparation of the Financial Statements

The preparation of financial statements in conformity with statutory accounting principles requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities. It also requires disclosure of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenue and expenses during the reporting period. Actual results could differ from those estimates. Material estimates susceptible to significant change include:

- Aggregate reserves for policy contracts;
- Deferred tax assets and liabilities;
- Pension and postretirement benefits;
- Fair market value of investments;
- Cost allocation and;
- Property, plant, and equipment depreciation.

Current Vulnerability Due to Certain Concentration

The Company operates in a business environment, which is subject to various risks and uncertainties. Such risk and uncertainties include, but are not limited to, interest rate risk, market risk, credit risk and legal and regulatory changes.

The Patient Protection and Affordable Care Act (PPACA) signed into law on March 23, 2010 and largely upheld by the U.S. Supreme Court on June 28, 2012, continues to transform the North Dakota health insurance marketplace as well as the Company's operations in several key ways. A large percentage of the uninsured will be eligible for coverage and subsidies will support the purchase of insurance for many. Medicaid eligibility can be expanded at the discretion of each state. New regulations are reducing carrier margins and the flexibility of health insurance products. The market for insurance will be an increasingly retail market with sales directly to consumers through government-regulated exchanges. The Company continues to analyze, implement and comply with PPACA requirements.

The Company mainly markets to the large group and individual segments of its market. Many of the large groups have chosen a self-insured coverage option. This self-insured coverage results in a diminished medical risk exposure.

Provider Advances

In accordance with SSAP No. 84 – *Certain Health Care Receivables and Receivables Under Government Insured Plans*, the Company considers provider advances admitted assets if the amount of the advance is supported by a contract, as well as claims incurred and payable to the hospital. Provider Advances in the amounts of $5,150,000 and $7,250,000 were recorded as of December 31, 2013 and 2012, respectively.

Change in Accounting Principle

The NAIC has adopted SSAP No. 102 - *Accounting for Pensions, a Replacement of SSAP No. 89* and *SSAP No. 92 Accounting for Postretirement Benefits Other Than Pensions, a Replacement of SSAP No. 14* effective for reporting years beginning in 2013. This revised guidance requires reporting entities to recognize the funded status (excess of the projected benefit obligation over the fair value of plan assets) of the Company's pension, supplemental retirement program and postretirement health plans (the plans) on the balance sheet as a liability. The Company adopted these new standards effective January 1, 2013 which increased the liability recorded for the plans. The Company estimates the total transition liability associated with the funded status of the pension plan to be approximately $8,656,000 as of December 31, 2013. The new requirements allow the recognition of the liability over a period not to exceed 10 years with provisions for minimum required recognition amounts. The impact of adopting this standard is recognized as a change in accounting principle with a decrease to surplus of $1,943,000 related to the pension plan and $3,070,000 related to the supplemental retirement program during the year ended December 31, 2013. A remaining transition obligation of $6,713,000 related to the pension plan remains unrecognized at December 31, 2013. In addition, $19,884,000 is recognized as a reduction to surplus as a result of eliminating previous non-admitted assets and establishing contra-assets for the overfunded portion of the plans.

Note 2 - Cash and Invested Assets

Investments

The classification of bonds and equity securities shown in the balance sheet at December 31, 2013 was as follows:

	Book/Adjusted Carrying Value	Gross Unrealized Gains	Gross Unrealized Losses	Fair Value
December 31, 2013				
US Government Bonds & Notes	$ 20,744,000	$ 858,000	$ 79,000	$ 21,523,000
Industrial & Miscellaneous Bonds	139,576,000	5,515,000	1,523,000	143,568,000
Mortgage & Other Asset Backed	10,327,000	727,000	138,000	10,916,000
Total Bonds	$ 170,647,000	$ 7,100,000	$ 1,740,000	$ 176,007,000

	Cost	Gross Unrealized Gains	Gross Unrealized Losses	Fair Value
Preferred Stock	$ 135,000	$ 4,000	$ -	$ 139,000
Common Stock Unaffiliated*	46,545,000	23,203,000	200,000	69,548,000
Common Stock Affiliated	20,425,000	8,000	17,778,000	2,655,000
Total Stock	$ 67,105,000	$ 23,215,000	$ 17,978,000	$ 72,342,000

* Amounts include prescribed or permitted practices that depart from the NAIC Accounting Practices and Procedures Manual, see Note 1.

The classification of bonds and equity securities shown in the balance sheet at December 31, 2012 was as follows:

	Book/Adjusted Carrying Value	Gross Unrealized Gains	Gross Unrealized Losses	Fair Value
December 31, 2012				
US Government Bonds & Notes	$ 18,382,000	$ 773,000	$ -	$ 19,155,000
Industrial & Miscellaneous Bonds	144,562,000	9,383,000	68,000	153,877,000
Mortgage & Other Asset Backed	14,644,000	1,605,000	166,000	16,083,000
Total Bonds	$ 177,588,000	$ 11,761,000	$ 234,000	$ 189,115,000

	Cost	Gross Unrealized Gains	Gross Unrealized Losses	Fair Value
Preferred Stock	$ 375,000	$ 11,000	$ -	$ 386,000
Common Stock Unaffiliated*	102,492,000	28,757,000	1,266,000	129,983,000
Common Stock Affiliated*	56,434,000	1,227,000	40,310,000	17,351,000
Total Stock	$ 159,301,000	$ 29,995,000	$ 41,576,000	$ 147,720,000

* Amounts include prescribed or permitted practices that depart from the NAIC Accounting Practices and Procedures Manual, see Note 1.

The following table shows the investments' gross unrealized losses and estimated fair values, aggregated by investment category and length of time bonds and common stock have been in an unrealized loss position at December 31, 2013.

	December 31, 2013					
	Less Than 12 Months		Greater Than 12 Months		Total	
	Value	Losses	Value	Losses	Value	Losses
US Government Bonds & Notes	$ 4,839,000	$ 79,000	$ -	$ -	$ 4,839,000	$ 79,000
Industrial & Miscellaneous Bonds	30,586,000	1,268,000	4,471,000	255,000	35,057,000	1,523,000
Mortgage & Other Asset Backed	3,800,000	26,000	1,435,000	112,000	5,235,000	138,000
	$ 39,225,000	$ 1,373,000	$ 5,906,000	$ 367,000	$ 45,131,000	$ 1,740,000
Common Stock Unaffiliated	$ 1,062,000	$ 125,000	$ 725,000	$ 75,000	$ 1,787,000	$ 200,000
Common Stock Affiliated*	-	-	(2,027,000)	17,778,000	(2,027,000)	17,778,000
	$ 1,062,000	$ 125,000	$ (1,302,000)	$ 17,853,000	$ (240,000)	$ 17,978,000

* Negative carrying value for common stock affiliated as a result of GAAP to STATUTORY adjustments for non-admitted assets of 1 subsidiary as required under SSAP No. 97.

The following table shows the investments' gross unrealized losses and estimated fair values, aggregated by investment category and length of time bonds and common stock have been in an unrealized loss position at December 31, 2012.

	December 31, 2012					
	Less Than 12 Months		Greater Than 12 Months		Total	
	Value	Losses	Value	Losses	Value	Losses
Industrial & Miscellaneous Bonds	$ 5,806,000	$ 68,000	$ -	$ -	$ 5,806,000	$ 68,000
Mortgage & Other Asset Backed	761,000	17,000	568,000	149,000	1,329,000	166,000
	$ 6,567,000	$ 85,000	$ 568,000	$ 149,000	$ 7,135,000	$ 234,000
Common Stock Unaffiliated	$ 26,502,000	$ 1,013,000	$ 1,904,000	$ 253,000	$ 28,406,000	$ 1,266,000
Common Stock Affiliated	-	-	13,372,000	40,310,000	13,372,000	40,310,000
	$ 26,502,000	$ 1,013,000	$ 15,276,000	$ 40,563,000	$ 41,778,000	$ 41,576,000

Proceeds from the sale of investments were $167,388,000 and $106,098,000 in 2013 and 2012, respectively. Gross realized gains of $17,551,000 and $5,984,000 and gross realized losses of $1,542,000 and $3,127,000 were realized on the sale of investments during the years ended December 31, 2013 and 2012, respectively.

The Company regularly reviews its investment portfolio for factors that may indicate that a decline in fair value of a bond investment below its cost basis is other than temporary. Based on an evaluation of the prospects of the issuer, including, but not limited to, the Company's intentions to sell or ability to hold the investments; the length of time and magnitude of the unrealized loss; financial condition and near term prospects of the issuer and the credit ratings of the issuer of the investment. During 2013 and 2012, the Company incurred $0 and $390,000 of other-than-temporary losses on its investment in bonds, respectively.

The Company considers various factors when considering if a decline in the fair value of a common stock security is other than temporary, including but not limited to, the length of time and magnitude of the unrealized loss; the volatility of the investment; analyst recommendations and price targets; opinions of the Company's investment managers; market liquidity; and the Company's intentions to sell or ability to hold the investments. To the extent the Company determines that a security is deemed other-than-temporarily impaired, the difference between amortized cost and fair value is charged to earnings. Based on an evaluation of these factors, the Company has concluded there are no investments in non-affiliated common stocks at December 31, 2013 that need be impaired.

Based on management's analysis, in 2013, the Company concluded that its investment in NHS was other than temporarily impaired (OTTI) in accordance with SSAP No.97 - *Investments in Subsidiary, Controlled and Affiliated Entities*. The facts and circumstances leading to impairment include the length of time the investment was in an unrealized loss position as well as recent operationg losses, as NHS recognized approximately $51,000,000 of contract losses during 2013 based on ASC 605-35, percentage-of-completion method of accounting. In particular, as discussed in Note 16, uncertainties exist associated with contracts that impact the evaluation of NHS fair value. In accordance with SSAP No. 97, the investment in NHS was written down to its fair value at December 31, 2013. The amount of the OTTI recognized as a realized loss was $78,007,000 representing $63,625,000 of previously recognized unrealized losses and $14,382,000 of equity investment in subsidiary resulting in a $0 carrying value of NHS as of December 31, 2013. The fair value of the investment was determined in accordance with SSAP No. 100 - *Fair Value Measurements*.

Mortgage and Other Asset-Backed Securities

The Company has $10,327,000 and $14,644,000 of mortgage and other asset-backed securities in its portfolio at December 31, 2013 and 2012, respectively.

The scheduled maturities of bonds at December 31, 2013 were as follows:

	Amortized Cost	Fair Market
Due less than one year	$ 15,697,000	$ 15,908,000
Due over one year through five years	72,400,000	75,486,000
Due over five years through 10 years	64,294,000	65,204,000
Due over ten years	7,929,000	8,494,000
	160,320,000	165,092,000
Mortgage and other asset-backed securities	10,327,000	10,915,000
	$ 170,647,000	$ 176,007,000

Securities may be disposed of before contractual maturities due to sales by the Company or because borrowers might have the right to call or prepay the obligation with or without prepayment penalties. Maturities of mortgage-backed securities depend on the repayment characteristics and experience of the underlying mortgage loans.

Real Estate

	2013	2012
Occupied by the Company	$ 49,964,000	$ 49,387,000
Leasehold improvements	1,540,000	1,011,000
	51,504,000	50,398,000
Accumulated depreciation	(26,334,000)	(24,285,000)
	$ 25,170,000	$ 26,113,000

The total real estate above includes admitted and non-admitted assets. Admitted assets consist of $49,964,000 and $49,387,000 and related accumulated depreciation of $25,461,000 and $23,569,000 for 2013 and 2012, respectively. Net admitted assets total $24,503,000 and $25,818,000 for 2013 and 2012, respectively. The remaining assets of $1,540,000 and $1,011,000 and related accumulated depreciation of $873,000 and $716,000 for 2013 and 2012, respectively, are non-admitted.

Depreciation expense relating to real estate for the years ended December 31, 2013 and 2012 was $2,058,000 and $1,996,000 respectively, of which $1,326,000 and $1,435,000, respectively, has been allocated to and reimbursed by other users.

Investments in Affiliates

On April 4, 2013, Noridian Administrative Services, LLC changed its name to Noridian Healthcare Solutions, LLC (NHS). NHS is organized as a limited liability company and is wholly owned by NMIC. NAS is a multi-state processor and fiscal intermediary/carrier for the Medicare and Medicaid Programs, which are administered and monitored by the Centers for Medicare and Medicaid Services (CMS).

At December 31, 2013, the Company owned 100 percent of the outstanding common stock of Noridian Insurance Services, Inc. (NISI), an insurance agency.

At December 31, 2013, the Company owned 100 percent of Twenty First Century Information Solutions. Twenty First Century owns 50 percent of CoreLink Administrative Solutions, LLC and 100 percent of MDdatacor, Inc.

At December 31, 2013, the Company owned 51 percent of the outstanding common stock of Discovery Benefits, Inc., an employee benefits administration company.

Note 3 - Fair Value Measurements

There are three general valuation techniques that may be used to measure fair value, as described below:

1. Market approach – Uses prices and other relevant information generated by market transactions involving identical or comparable assets or liabilities. Prices may be indicated by pricing guides, sale transactions, market trades, or other sources;

2. Cost approach – Based on the amount that currently would be required to replace the service capacity of an asset (replacement cost); and

3. Income approach – Uses valuation techniques to convert future amount to a single present amount based on current market expectation about the future amounts (includes present value techniques and option pricing models). Net present value is an income approach where a stream of expected cash flows is discounted at an appropriate market interest rate.

Following is a description of the valuation methodologies used for assets measured at fair value.

Industrial & Miscellaneous Bonds: Valued based on NAIC market values. For those securities not actively traded, quoted market prices of comparable instruments or discounted cash flow analysis are used based upon inputs that are observable in the markets for similar securities. Inputs include benchmark yields, credit spreads, default rates, prepayments and non-bonding broker quotes.

Mortgage & Other Assets Backed Bonds: Valued based on Residential Mortgage Backed Securities modeling file provided by the NAIC. The prepayment assumptions used for single class and multi-class mortgage backed/asset backed securities were obtained from broker/dealer survey values. These assumptions are consistent with the current interest rate and economic environment.

Preferred Stock: Valued based on NAIC market values.

Common Stock Unaffiliated & Mutual Funds: Valued based on NAIC quoted market values. If NAIC market values are unavailable then value is determined based on the underlying equity.

Common Stock Affiliated: Value is based on the underlying equity of the affiliate.

Other Invested Assets: Value is based on the underlying equity of the related entity.

The preceding methods described may produce a fair value calculation that may not be indicative of net realizable value or reflective of the future fair values. Furthermore, although the Company believes its valuation methods are appropriate and consistent with other market participants, the use of different methodologies or assumptions to determine the fair value of certain financial instruments could result in a different fair value measurement at the reporting date. There have been no changes to valuation methods used during 2013 or 2012.

The table below reflects the fair values and admitted asset values of all admitted assets and liabilities as of December 31, 2013 and 2012 that are financial instruments.

	2013				
	Aggregate Fair Value	Admitted Asset Value	Level 1	Level 2	Level 3
Bonds	$ 176,007,000	$ 170,647,000	$ -	$ 176,007,000	$ -
Equity Interests					
Preferred Stock	139,000	139,000	139,000	-	-
Common Stock	72,203,000	72,203,000	45,191,000	-	27,012,000
Cash	7,617,000	7,617,000	7,617,000	-	-
Short-Term Investments	70,580,000	70,580,000	70,580,000	-	-
Other Long-Term Invested Assets	47,000	47,000	-	-	47,000
	$ 326,593,000	$ 321,233,000	$ 123,527,000	$ 176,007,000	$ 27,059,000

	2012				
	Aggregate Fair Value	Admitted Asset Value	Level 1	Level 2	Level 3
Bonds	$ 189,115,000	$ 177,588,000	$ -	$ 189,115,000	$ -
Equity Interests					
Preferred Stock	401,000	386,000	401,000	-	-
Common Stock	147,334,000	147,334,000	103,775,000	-	43,559,000
Cash	46,763,000	46,763,000	46,763,000	-	-
Short-Term Investments	7,067,000	7,067,000	7,067,000	-	-
Other Long-Term Invested Assets	77,000	77,000	-	-	77,000
	$ 390,757,000	$ 379,215,000	$ 158,006,000	$ 189,115,000	$ 43,636,000

The following table presents the financial instruments related to the Company's assets carried at fair value as of December 31, 2013 by the SSAP 100 valuation hierarchy.

	Investment Assets at Fair Value as of December 31, 2013			
	Level 1	Level 2	Level 3	Total
Bonds				
Industrial & Miscellaneous Bonds	$ -	$ 1,695,000	$ -	$ 1,695,000
Mortgage & Other Asset Backed	-	203,000	-	203,000
Total Bonds	-	1,898,000	-	1,898,000
Preferred Stock	139,000	-	-	139,000
Stocks				
Industrial & Miscellaneous	10,020,000	-	24,357,000	34,377,000
Parent, Subsidiaries & Affiliates	-	-	2,655,000	2,655,000
Mutual Funds	35,171,000	-	-	35,171,000
Total Stocks	45,191,000	-	27,012,000	72,203,000
Other Invested Assets	-	-	47,000	47,000
Total Assets at Fair Value	$ 45,330,000	$ 1,898,000	$ 27,059,000	$ 74,287,000

The following table presents the financial instruments related to the Company's assets carried at fair value as of December 31, 2012 by the SSAP 100 valuation hierarchy.

	Investment Assets at Fair Value as of December 31, 2012			
	Level 1	Level 2	Level 3	Total
Bonds				
Industrial & Miscellaneous Bonds	$ -	$ 1,784,000	$ -	$ 1,784,000
Mortgage & Other Asset Backed	-	1,065,000	-	1,065,000
Total Bonds	-	2,849,000	-	2,849,000
Preferred Stock	386,000	-	-	386,000
Stocks				
Industrial & Miscellaneous	57,909,000	-	26,209,000	84,118,000
Parent, Subsidiaries & Affiliates	-	-	17,350,000	17,350,000
Mutual Funds	45,866,000	-	-	45,866,000
Total Stocks	103,775,000	-	43,559,000	147,334,000
Other Invested Assets	-	-	72,000	72,000
Total Assets at Fair Value	$ 104,161,000	$ 2,849,000	$ 43,631,000	$ 150,641,000

The following table presents a reconciliation of the beginning and ending balances of all level 3 assets for the year ended December 31, 2013.

	Assets Measured at Fair Value Using Significant Unobservable Inputs as of December 31, 2013						
	Balance January 1, 2013	Transfers in (Level 3)	Transfers out (Level 3)	Total gains and losses included in Net Income	Total gains and losses included in Surplus	Purchases, issuances, sales and settlements	Balance December 31, 2013
Common Stock Unaffiliated	$ 26,209,000	$ -	$ -	$ -	$ (1,852,000)	$ -	$ 24,357,000
Common Stock Affiliated	17,350,000	-	-	(78,007,000)	20,357,000	42,955,000	2,655,000
Total Stocks	43,559,000	-	-	(78,007,000)	18,505,000	42,955,000	27,012,000
Other Invested Assets	72,000	-	-	-	(25,000)	-	47,000
Total Assets at Fair Value	$43,631,000	$ -	$ -	$ (78,007,000)	$ 18,480,000	$ 42,955,000	$27,059,000

The following table presents a reconciliation of the beginning and ending balances of all level 3 assets for the year ended December 31, 2012.

	Assets Measured at Fair Value Using Significant Unobservable Inputs as of December 31, 2012						
	Balance January 1, 2012	Transfers in (Level 3)	Transfers out (Level 3)	Total gains and losses included in Net Income	Total gains and losses included in Surplus	Purchases, issuances, sales and settlements	Balance December 31, 2012
Common Stock Unaffiliated	$ 28,633,000	$ -	$ -	$ -	$ (2,424,000)	$ -	$ 26,209,000
Common Stock Affiliated	33,520,000	-	-	-	(16,170,000)	-	17,350,000
Total Stocks	62,153,000	-	-	-	(18,594,000)	-	43,559,000
Other Invested Assets	60,000	-	-	-	12,000	-	72,000
Total Assets at Fair Value	$62,213,000	$ -	$ -	$ -	$ (18,582,000)	$ -	$43,631,000

Note 4 - Receivables

Pharmaceutical Rebate

The Company has contracted with a pharmaceutical benefits manager to provide pharmaceutical services and obtain pharmacy rebates from drug manufacturers. The estimate for the fourth quarter of each year is based on the previous quarter's actual prescriptions, which are confirmed/invoiced by the Company's pharmaceutical benefit manager. At December 31, 2013 and 2012, the Company had total pharmacy rebates receivable of $8,100,000 and $5,947,000, respectively, of which $7,141,000 and $5,303,000, respectively, is an admitted asset. The pharmaceutical rebate receivables, by quarter, are as follows:

Quarter Ending	Estimated Pharmacy Rebates	Pharmacy Rebates Invoiced/Confirmed as an admitted asset	Actual Rebates Collected Within 90 days of Invoicing/Confirmation	Actual Rebates Collected Within 91 to 180 days of Invoicing/Confirmation	Actual Rebates Collected More Than 180 Days of Invoicing/Confirmation
12/31/13	$ 3,300,000	$ -	$ -	-	$ -
9/30/13	3,100,000	3,841,000	-	-	-
6/30/13	2,900,000	3,352,000	2,292,000	636,000	-
3/31/13	2,800,000	2,984,000	2,328,000	232,000	-
12/31/12	$ 2,700,000	$ 3,187,000	$ 2,689,000	$ 334,000	$ 87,000
9/30/12	2,600,000	2,875,000	2,603,000	181,000	57,000
6/30/12	2,500,000	2,777,000	2,306,000	173,000	299,000
3/31/12	2,500,000	2,581,000	2,282,000	121,000	178,000
12/31/11	$ 2,200,000	$ 2,760,000	$ 2,188,000	$ 214,000	$ 358,000
9/30/11	2,200,000	2,455,000	2,276,000	87,000	92,000
6/30/11	2,000,000	2,410,000	2,281,000	100,000	30,000
3/31/11	2,000,000	2,275,000	2,039,000	147,000	89,000

The Company has contracted with a pharmaceutical benefits manager to provide pharmaceutical services and obtain pharmacy rebates from drug manufacturers for the Medicare Prescription Drug Program. The estimate for the fourth quarter of each year is based on the previous quarter's actual prescriptions, which are confirmed/invoiced by the Company's pharmaceutical benefit manager. At December 31, 2013 and 2012, the Company had total pharmacy rebates receivable of $2,793,000 and $2,247,000, respectively, of which $2,746,000 and $2,172,000, respectively, is an admitted asset. The pharmaceutical rebate receivables for the Medicare Prescription Drug Program, by quarter, are as follows:

Quarter Ending	Estimated Pharmacy Rebates	Pharmacy Rebates Invoiced/Confirmed as an admitted asset	Actual Rebates Collected Within 90 days of Invoicing/Confirmation	Actual Rebates Collected Within 91 to 180 days of Invoicing/Confirmation	Actual Rebates Collected More Than 180 Days of Invoicing/Confirmation
12/31/13	$ 1,386,000	$ 1,386,000	$ -	$ -	$ -
9/30/13	1,497,000	1,359,000	-	-	-
6/30/13	1,151,000	1,219,000	-	1,204,000	-
3/31/13	1,291,000	1,086,000	-	1,053,000	-
12/31/12	$ 1,086,000	$ 1,160,000	$ -	$ 1,160,000	$ -
9/30/12	1,039,000	1,081,000	-	1,016,000	65,000
6/30/12	982,000	1,039,000	-	1,005,000	33,000
3/31/12	817,000	980,000	-	940,000	40,000
12/31/11	$ 1,014,000	$ 1,091,000	$ -	$ 1,086,000	$ 5,000
9/30/11	1,045,000	1,072,000	-	1,066,000	6,000
6/30/11	956,000	1,040,000	-	1,044,000	(3,000)
3/31/11	849,000	988,000	-	989,000	(200)

Note 5 - Federal Employees Program

The Blue Cross and Blue Shield Federal Employees Program (FEP) is an insurance contract between the federal government and local Blue Cross and Blue Shield plans. The Blue Cross and Blue Shield Association acts as an agent for the local plans in the capacity of contracting with the government and providing other resources necessary to fulfill the agency relationship. The Company includes its share of the full amount of assets, liabilities, revenues, and expenses resulting from this contract in the financial statements. A liability and an offsetting asset (Federal Employees Program) have been recorded in the statements of admitted assets, liabilities, and policyholder surplus related to claims liabilities and related assets held. Premium income, investment income, and administrative expenses have been included in the statements of income to reflect the Company's portion of the FEP results. As of December 31, 2013 and 2012, the Company held assets in connection with the program of $28,696,000 and $26,498,000, respectively. The related liabilities are included in contract claim reserves for accident and health policies and aggregate reserve for accident and health policies. Additionally, the Company had recorded receivables of $1,301,000 and $1,178,000 as of December 31, 2013 and 2012, respectively, related to reimbursable claims for the program.

Note 6 - Equipment and Software

	2013	2012
Electronic data processing equipment and software	**$ 47,461,000**	$ 39,831,000
Furniture, fixtures, and equipment	**19,120,000**	17,175,000
Automobiles	**192,000**	137,000
Telephone	**3,629,000**	3,157,000
Depreciable software	**40,688,000**	32,050,000
	111,090,000	92,350,000
Accumulated depreciation	**(82,805,000)**	(75,880,000)
	$ 28,285,000	$ 16,470,000

The total amount of equipment and software above includes admitted and non-admitted assets. Admitted assets consist of electronic data processing equipment and software of $47,461,000 and $39,831,000 and related accumulated depreciation of $35,951,000 and $32,497,000 for 2013 and 2012, respectively. Net admitted assets total $11,510,000 and $7,334,000 for 2013 and 2012, respectively. The remaining assets of $63,629,000 and $52,519,000 and accumulated depreciation of $46,854,000 and $43,383,000 for 2013 and 2012, respectively, are non-admitted.

Equipment and software depreciation is calculated, on a straight-line method, over an estimated useful life of 3 to 15 years. Depreciation expense for the years ended December 31, 2013 and 2012 was $6,998,000 and $7,537,000 respectively, of which $4,769,000 and $6,327,000 has been allocated to and reimbursed by other users.

Electronic data processing equipment and depreciation reflect amounts prescribed or permitted practices that depart from NAIC Accounting Practices and Procedures Manual, see Note 1.

Note 7 - Lessee Operating Leases

The Company leases office space under various non-cancelable operating lease agreements that expire through March 31, 2018. Office space rental expense for 2013 and 2012 was approximately $772,000 and $389,000, respectively, of which $107,000 and $0 has been allocated to and reimbursed by other users in 2013. The Company leases computer and office equipment under various non-cancelable operating lease agreements that expire through June 30, 2016. Computer and office equipment rental expense for 2013 and 2012 was approximately $5,574,000 and $5,561,000, respectively, of which $4,388,000 and $4,688,000 has been allocated to and reimbursed by other users.

At December 31, 2013, the minimum aggregate rental commitments net of amounts allocated to others are as follows:

Years ending December 31,	Real Estate Leases	Equipment Leases
2014	694,000	967,000
2015	627,000	900,000
2016	355,000	212,000
2017	345,000	199,000
2018	86,000	132,000
	$ 2,107,000	$ 2,410,000

Certain rental commitments have renewal options extending through the year 2018. Some of these renewals are subject to adjustments in future periods.

Note 8 - Lessor Leases

The Company owns one site that is leased to affiliated companies. Prorated operating costs are charged to affiliated companies through administrative service agreements and subsequently reimbursed to the Company.

The cost and carrying amount of these properties is approximately $14,078,000 and $6,217,000 as of December 31, 2013 and $13,615,000 and $6,764,000 as of December 31, 2012 as listed in the investment summary at Note 2.

There are no future minimum lease payment receivable arrangements.

Note 9 - Employee Benefit Plans

Pension Plan

The Company has a defined benefit pension plan covering a significant number of its employees. The plan was amended to exclude NHS employees hired on or after September 1, 2006. The plan was amended to exclude all Noridian employees hired on or after January 1, 2010.

The benefits are based on years of service and the employee's final average compensation. The Company's funding and accounting policies are to contribute annually the minimum amount required by applicable regulations plus such additional amounts as the employer may determine to be appropriate from time to time and to charge such contributions to expense as allowed under statutory accounting principles.

Prior to 2001, the Company was allowed under statutory accounting principles to recognize pension costs equal to the amount of the contributions paid to the plan. Beginning in 2001, the Company was required to adopt statutory accounting principles which recognize the funded status of the Plan as allowed under SSAP No. 89 – *Accounting for Pensions*. The Company elected to amortize the incremental liability resulting from the change in accounting principle as a component of net periodic pension cost over a period of 20 years. Effective January 1, 2013, the Company adopted SSAP No. 102 – *Accounting for Pensions*. SSAP 102 replaces SSAP 89, with the change in accounting principle requiring recognition of the projected benefit obligation and underfunded status to surplus.

A summary of pension plan disclosures is as follows:

	2013	2012
Change in projected benefit obligation		
Projected benefit obligation at beginning of year	$ 164,716,000	$ 145,977,000
Service cost	7,522,000	7,692,000
Interest cost	6,328,000	6,592,000
Benefit payments	(852,000)	(8,878,000)
Settlements	(14,600,000)	-
Actuarial losses (gains)	(12,182,000)	13,333,000
Projected benefit obligation at end of year	$ 150,932,000	$ 164,716,000
The actuarial gains (losses) are a result of changes in actuarial assumptions, primarily changes in the discount rate, and the impact of differences between actual and anticipated experience.		
Accumulated benefit obligation	$ 121,688,528	$ 132,757,000
Change in plan assets		
Fair value of plan assets at beginning of year	$ 130,480,000	$ 107,701,000
Actual return on assets (net of expenses)	15,249,000	16,457,000
Employer contributions	12,000,000	15,200,000
Settlements	(14,600,000)	-
Benefit payments	(852,000)	(8,878,000)
Fair value of plan assets at end of year	$ 142,277,000	$ 130,480,000
Funded Status		
Overfunded		
Assets		
Prepaid benefit cost	$ 36,123,000	N/A
Overfunded program contra-asset	(36,123,000)	N/A
Total Assets	$ -	N/A

	2013	2012
Underfunded		
Liabilities Recognized		
Accrued benefit liability	$ 1,943,000	N/A
Unrecognized liabilities	$ 6,713,000	N/A
Components of net periodic benefit cost		
Service cost	$ 7,522,000	$ 7,692,000
Interest cost	6,328,000	6,592,000
Expected return on assets	(9,245,000)	(8,518,000)
Amortization of transition obligation	630,000	630,000
Amortization of prior service cost	403,000	403,000
Amortization of actuarial loss	4,585,000	4,304,000
Loss recognized due to settlement or curtailment	3,720,000	-
Total net periodic benefit cost	$ 13,943,000	$ 11,103,000
Items not recognized as a component of net periodic cost		
Beginning of the year	$ 72,302,000	N/A
Net transition asset or obligation recognized	(630,000)	N/A
Net prior service cost or credit recognized	(403,000)	N/A
Net gain and loss arising during the period	(18,186,000)	N/A
Net gain and loss recognized	(8,304,000)	N/A
Items not yet recognized as a component of net periodic cost		
End of the year	$ 44,779,000	N/A
Amounts in unassigned funds (surplus) expected to be recognized in the next fiscal year as components of net periodic benefit cost		
Net transition obligation	$ 630,000	N/A
Prior Service Cost	403,000	N/A
Net actuarial loss	2,315,000	N/A
Amounts in unassigned funds (surplus) that have not yet been recognized as components of net periodic benefit cost		
Net transition obligation	$ 4,409,000	$ 5,039,000
Prior Service Cost	1,920,000	2,323,000
Net actuarial loss	38,450,000	64,940,000
Items not yet recognized as a component of net periodic cost	$ 44,779,000	$ 72,302,000

	2013	2012
Weighted average assumptions used to determine net periodic cost during the year		
Discount rate	4.00%	4.75%
Expected return on assets	7.00%	7.50%
Rate of compensation increase	Graded; 4% - 9%	Graded; 4% - 9%
Weighted average assumptions used to determine projected benefit obligations at December 31		
Discount rate	4.75%	4.00%
Expected return on assets	7.00%	7.00%
Rate of compensation increase	Graded; 4% - 9%	Graded; 4% - 9%

At December 31, 2013, the basis of the overall expected long-term rate of return on assets assumption is a forward-looking approach based on the current long-term capital market outlook assumptions of the asset categories the trust invests in and the trust's target asset allocation. This rate is net of both investment related expenses and a 0.10% reduction for other administrative expenses charged to the Trust.

At December 31, 2013, the assumed target asset allocation for the program is: 44 - 56% equity securities, 34 - 46% debt securities and 6 - 14% other securities. Using a mean-variance model to project returns over a 30 year horizon under the target asset allocation, the 35th to 65th percentile range of annual rates of return is 6.2% - 7.8%.

At December 31, 2012, the basis of the overall expected long-term rate of return on assets assumption is a forward-looking approach based on the current long-term capital market outlook assumptions of the asset categories the trust invests in and the trust's target asset allocation. This rate is net of both investment related expenses and a 0.10% reduction for other administrative expenses charged to the Trust.

At December 31, 2012, the assumed target asset allocation for the program is: 44 – 56% equity securities, 35 – 45% debt securities and 6 – 14% other securities. Using a mean-variance model to project returns over a 30 year horizon under the target asset allocation, the 35th to 65th percentile range of annual rates of return is 6.2% - 7.8%.

The Company's pension plan assets are invested in the Blue Cross Blue Shield National Retirement Trust. The Company's pension plan weighted-average asset allocations at December 31, 2013 and 2012 by asset category are as follows:

	2013	2012
Equity securities	53%	46%
Debt securities	37%	40%
Real estate	7%	6%
Other	3%	8%
Total	100%	100%

The investment program for the Blue Cross Blue Shield National Retirement Trust is based on the precepts of capital market theory that are generally accepted and followed by institutional investors, who by definition are long-term oriented investors. The philosophy holds that:

1. Increasing risk is rewarded with compensating returns over time and therefore, prudent risk taking is justifiable for long-term investors.

2. Risk can be controlled through diversification of asset classes and investment approaches as well as diversification of individual securities.

3. Risk is reduced by time, and over time the relative performance of different asset classes is reasonably consistent. Over the long term, equity investments have provided and should continue to provide superior returns over other security types. Fixed-income securities can dampen volatility and provide liquidity in periods of depressed economic activity.

4. The strategic or long-term allocation of assets among various asset classes is an important driver of long-term returns.

5. Relative performance of various asset classes is unpredictable in the short-term and attempts to shift tactically between asset classes are unlikely to be rewarded.

Investments will be made for the sole interest of the participants and beneficiaries of the programs participating in the Blue Cross Blue Shield National Retirement Trust. Accordingly, the assets of the Blue Cross Blue Shield National Retirement Trust shall be invested in accordance with these objectives:

1. To ensure assets are available to meet current and future obligations of the participating programs when due.

2. To earn the maximum return that can be realistically achieved in the markets over the long term at a specified and controlled level of risk in order to minimize future contributions.

3. To invest assets with consideration of the liability characteristics in order to better align asset and liabilities.

4. To invest the assets with the care, skill, and diligence that a prudent person acting in a like capacity would undertake. The Blue Cross Blue Shield National Retirement Trust Committee acknowledges that, in the process, it has the objective of controlling the costs involved with administering and managing the investments of the Blue Cross Blue Shield National Retirement Trust.

The Company expects to contribute $0 to its pension program in 2014.

The following benefit payments, which reflect expected future service, as appropriate, are expected to be paid:

Estimated Future Benefits Payments	2013
2014 Payouts	$ 9,959,000
2015 Payouts	9,517,000
2016 Payouts	9,725,000
2017 Payouts	10,428,000
2018 Payouts	10,709,000
2019 Payouts to 2023	58,445,000

The fair value measurements of the plan assets at December 31, 2013 are as follows:

Asset Category	Quoted Prices In Active Markets for Identical Assets Level 1	Significant Observable Inputs Level 2	Significant Observable Inputs Level 3	Total
Government Obligations	$ 2,615,000	$ 6,478,000	$ 81,000	$ 9,174,000
Corporate Obligations	-	6,430,000	2,000	6,432,000
Partnership/Joint Venture	-	-	1,983,000	1,983,000
Limited Liability Corporations	-	7,780,000	-	7,780,000
Real Estate	-	-	5,498,000	5,498,000
Registered Investments	11,445,000	27,421,000	-	38,866,000
Common/Collective Trusts	-	51,771,000	-	51,771,000
Hedge Funds	-	9,439,000	-	9,439,000
Common Stocks	10,322,000	-	-	10,322,000
Preferred Stocks	245,000	-	-	245,000
Forward Foreign Currency Contracts	4,000	-	-	4,000
Interest-Bearing Cash	754,000	-	-	754,000
Derivatives	-	9,000	-	9,000
Total Assets Measured At Fair Value	$ 25,385,000	$ 109,328,000	$ 7,564,000	$ 142,277,000

The fair value measurements in Level 3 of the fair value hierarchy are as follows:

	Beginning Balance 1/1/2013	Transfers into Level 3	Transfers out of Level 3	Return on Assets Still Held	Return on Assets Sold	Purchases	Issuances	Sales	Settlements	Ending Balance 12/31/2013
Government Obligations	$ 88,000	$ -	$ -	$ (8,000)	$ -	$ 16,000	$ -	$ -	$ (15,000)	$ 81,000
Corporate Obligations	-	-	-	(23,000)	-	25,000	-	-	-	2,000
Partnership/Joint Venture	1,834,000	-	-	112,000	-	327,000	-	-	(290,000)	1,983,000
Real Estate	5,070,000	-	-	699,000	52,000	1,122,000	-	-	(1,445,000)	5,498,000
Hedge Funds	2,402,000	-	(1,805,000)	288,000	438,000	413,000	-	-	(1,736,000)	-
Total Plan Assets	$ 9,394,000	$ -	$ (1,805,000)	$ 1,068,000	$ 490,000	$ 1,903,000	$ -	$ -	$ (3,486,000)	$ 7,564,000

The following is a description of the valuation techniques used for the signifant qualified pension assets measured at fair value utilizing, and classified as, Level 1, 2 or 3:

Cash and Short-Term Investments – Cash and short-term investments include interest-bearing investments with initial maturities of three months or less. Such amounts are recorded at cost, plus accrued interest.

Investments Traded in Active Markets – Common stock, preferred stock, fixed income securities including government and corporate obligations, options and futures traded in active markets on national and international securities exchanges are valued at closing prices on the last business day of each period presented. Securities traded in markets that are not considered active are valued based on quoted market prices, broker or dealer quotations, or alternative pricing sources with reasonable levels of price transparency. Securities that trade infrequently and therefore have little or no price transparency are valued using the Trust's investment managers' best estimates. In general, corporate obligations are valued based on yields currently available on comparable securities of issuers with similar credit ratings. Investments in government obligations are estimated using best available trade data. Investments in certain restricted common stocks are valued at the quoted market price of the issuer's unrestricted common stock less an appropriate discount. Investments in other equities are based on quoted market prices.

Real Estate Investments – Fair values of real estate investments are based on the quoted redemption values of the participation units in real estate funds owned by the Trust. Redemption values principally represent the appraised values of real estate investments held in the real estate funds.

Hedge Funds – Hedge fund investments represent investment in hedge fund of funds and investments in portfolios investing in a range of stocks, bonds, distressed corporate debt, government debt, emerging market equities, currencies, commodities, commodity and financial futures, options, forwards, swaps and derivative instruments. Hedge fund of funds investments are valued using the NAV provided by the administrator of the fund. The NAV is based on the value of the underlying assets owned by the fund (including investments in a master fund that is primarily comprised of hedge funds) minus its liabilities and then divided by the number of shares outstanding. In general, portfolio securities for which market quotations are readily available are valued at market value. If market quotations are not readily available, the fair value is determined based on other relevant factors, including deal price quotations, price activity for equivalent investments and valuation pricing models.

Registered Investment Companies – These are investments valued using the NAV provided by the administrator of the fund. The NAV is based on the value of the underlying assets owned by the fund minus its liabilities, and then divided by the number of shares outstanding.

Limited Liability Corporations – These investments are valued at estimated fair value which, based on the appraised values, approximates market price and other market information pertaining to their underlying investments at December 31. Because of inherent uncertainty of valuing these investments and certain of the underlying investments, the Trust's estimate of fair value may differ from the values that would have been used had a ready market for the investment existed. The financial statements of these investments are audited annually by an independent public accounting firm.

Partnership /Limited Liability Company Interests – These investments are valued at estimated fair value which, based on the appraised values, approximates market price and other market information pertaining to its underlying investments at December 31.

Common/Collective Trust Funds – Common/collective trust funds represent investments with various investment managers. Units held in common/collective trusts, including stable value funds, are valued at the unit value as reported by the investment managers as of December 31.

Futures and Forward Contracts – The Trust may, from time to time, enter into equity futures contracts, forward foreign currency contracts, and forward contracts to purchase government agency obligations for trading purposes. Equity futures contracts are used as a means to replicate the performance of the broad stock market and to reduce transaction costs associated with rebalancing an indexed portfolio when there are cash inflows or outflows. Forward foreign currency contracts are used to manage the risk of foreign currency fluctuations and to ensure that adequate funds, denominated in the local currency, are available to settle purchases of foreign securities. Forward contracts to purchase government agency obligations are used to take advantage of market yield premiums available for delayed settlement contracts.

Equity futures contracts, forward foreign currency contracts, and forward contracts to purchase government agency obligations are stated at market value as determined by prices quoted on national security exchanges. Equity futures contracts are marked to market, and fluctuations in the value are recognized as realized gains or losses that are settled daily with cash through a margin account. Forward foreign currency contracts are valued at fair value, as determined by the Trust's investment managers (or independent third parties on behalf of the investment managers), using quoted forward foreign currency exchange rates. At the end of each period presented, open contracts are valued at the current forward foreign currency exchange rates, and the change in market value is recorded as an unrealized gain or loss. When the contract is closed or delivery taken, the Trust records a realized gain or loss equal to the difference between the value of the contract at the time it was opened and the value at the time it was closed.

Foreign Investments – Investments denominated in currencies other than the U.S. dollar are converted using exchange rates prevailing at the end of the periods presented. Purchases and sales of such investments are translated at the rate of exchange on the respective dates of such transactions.

Supplemental Retirement Program

The Company has an unfunded Supplemental Retirement Program (SERP) intended for certain employees that meet the required provisions set forth in the program.

Beginning in 2001, the Company was required to adopt statutory accounting principles which recognize the funded status of the Plan as allowed under SSAP No. 89 – *Accounting for Pensions*. The Company elected to amortize the incremental liability resulting from the change in accounting principle as a component of net periodic pension cost over a period of 20 years. Effective January 1, 2013, the Company adopted SSAP No. 102 – *Accounting for Pensions*. SSAP 102 replaces SSAP 89, with the change in accounting principle requiring recognition of the projected benefit obligation and underfunded status to surplus.

Information related to the SERP is as follows:

	2013	2012
Change in projected benefit obligation		
Projected benefit obligation at beginning of year	$ 4,987,000	$ 3,952,000
Service cost	294,000	338,000
Interest cost	211,000	222,000
Program Amendments	224,000	2,276,000
Benefit payments	(328,000)	(1,043,000)
Actuarial losses (gains)	93,000	(758,000)
Projected benefit obligation at end of year	$ 5,481,000	$ 4,987,000
Accumulated benefit obligation	$ 2,984,000	$ 2,666,000
Change in plan assets		
Fair value of plan assets at beginning of year	$ -	$ -
Employer contributions	328,000	1,043,000
Benefit payments	(328,000)	(1,043,000)
Settlements	-	-
Fair value of plan assets at end of year	$ -	$ -

	2013	2012
Overfunded		
Assets (nonadmitted)		
Prepaid benefit cost	$ -	N/A
Overfunded Program Asset	-	N/A
Total Assets	$ -	N/A
Underfunded		
Liabilities Recognized in Accrued General Expenses		
Accrued benefit liability	$ 2,411,000	N/A
Liability for benefits	3,070,000	N/A
	$ 5,481,000	N/A
Unrecognized liabilities	$ -	N/A
Components of net periodic benefit cost		
Service cost	$ 294,000	$ 339,000
Interest cost	211,000	222,000
Expected return on assets	-	-
Amortization of transition obligation	149,000	149,000
Amortization of prior service cost	357,000	352,000
Amortization of actuarial loss	-	20,000
Loss Recognized due to Settlement	-	94,000
Total net periodic benefit cost	$ 1,011,000	$ 1,176,000
Items not recognized as a component of net periodic cost		
Beginning of the year	$ 3,259,000	N/A
Net transition asset or obligation recognized	(149,000)	N/A
Net prior service cost or credit arising during the period	224,000	N/A
Net prior service cost or credit recognized	(357,000)	N/A
Net gain and loss arising during the period	93,000	N/A
Net gain and loss recognized	-	N/A
Items not recognized as a component of net periodic cost		
End of the year	$ 3,070,000	N/A
Amounts in unassigned funds (surplus) expected to be recognized in the next fiscal year as components of net periodic benefit cost		
Net transition obligation	$ 149,000	N/A
Prior Service Cost	357,000	N/A
Net actuarial loss	-	N/A

	2013	2012
Amounts in unassigned funds (surplus) that have not yet been recognized as components of net periodic benefit cost		
Net transition obligation	$ 1,045,000	$ 1,195,000
Prior Service Cost	1,664,000	1,797,000
Net actuarial loss	361,000	268,000
Items not yet recognized as a component of net periodic cost	$ 3,070,000	$ 3,260,000

Weighted average assumptions used to determine net periodic cost during the year	2013	2012
Discount rate	4.00%	4.75%
Rate of compensation increase	Flat; 5.00%	Flat; 5.00%

Weighted average assumptions used to determine projected benefit obligations at December 31	2013	2012
Discount rate	4.75%	4.00%
Rate of compensation increase	Flat; 5.00%	Flat; 5.00%

The SERP is funded on a pay-as-you-go basis. Therefore, no assets are accumulated to pay benefits under the program and no assumption regarding the expected return on assets is relevant.

The following benefit payments, which reflect expected future service and employer contributions, as appropriate, are expected to be paid:

	2013
Estimated Future Benefits Payments	
2014 Payouts	$ 9,000
2015 Payouts	186,000
2016 Payouts	760,000
2017 Payouts	25,000
2018 Payouts	4,602,000
2019 Payouts to 2023	655,000

Retiree Health Benefits and Life Insurance Plans

The Company provides certain health care and life insurance benefits (postretirement benefits) for retired employees. Substantially all employees may become eligible for these benefits if they reach retirement age while working for the Company. Life insurance benefits are generally set at a fixed amount. In 2003, the Company established a Noridian Mutual Insurance Company Retiree Voluntary Employee Beneficiary Association Trust (VEBA Trust) to fund this Plan. The Plan was amended to exclude any new employees hired after January 1, 2006. In January, 2010 the Plan was amended to phase-out the Company contribution for health care insurance for retirees over a ten year period, beginning in 2012 with a ten percent reduction each year. The health plan was remeasured on October 1, 2012 to reflect a 10% decrease in retiree premiums in 2013 and a change in prescription drug coverage.

Beginning in 2001, the Company was required to adopt statutory accounting principles which recognize the funded status of the Plan as allowed under SSAP No. 89 – *Accounting for Pensions*. The Company has elected to amortize the incremental liability resulting from the change in accounting principle as a component of net periodic pension cost over a period of 20 years. Effective January 1, 2013, the Company adopted SSAP No. 102 – *Accounting for Pensions*. SSAP 102 replaces SSAP 89, with the change in accounting principle requiring recognition of the projected benefit obligation and underfunded status to surplus.

Information related to the postretirement benefit plan is as follows:

	2013	2012
Change in projected benefit obligation		
Projected benefit obligation at beginning of year	$ 16,928,000	$ 19,835,000
Service cost	799,000	1,143,000
Interest cost	833,000	713,000
Benefit payments	(1,452,000)	(1,488,000)
Medicare Part D subsidy received	124,000	118,000
Adoption of new SSAP -nonvested benefit obligation	10,714,000	-
Plan amendments	-	3,473,000
Actuarial losses (gains)	(9,318,000)	(6,866,000)
Projected benefit obligation at end of year	$ 18,628,000	$ 16,928,000
Change in plan assets		
Fair value of plan assets at beginning of year	$ 43,390,000	$ 40,393,000
Actual return on program assets	3,888,000	4,615,000
Benefit payments	(1,346,000)	(1,618,000)
Fair value of plan assets at end of year	$ 45,932,000	$ 43,390,000

	2013	2012
Overfunded		
Assets (nonadmitted)		
Prepaid benefit cost	$ 11,898,000	N/A
Overfunded Program Asset	15,993,000	N/A
Total assets	$ 27,891,000	N/A
Underfunded		
Liabilities Recognized in Accrued General Expenses		
Accrued benefit liability	$ 823,000	N/A
Liability for benefits/(contra liability)	(236,000)	N/A
Total liabilities recognized	$ 587,000	N/A
Unrecognized liabilities	$ -	$ -
Components of net periodic benefit cost		
Service cost	$ 799,000	$ 1,143,000
Interest cost	833,000	713,000
Expected return on assets	(1,952,000)	(2,068,000)
Amortization of transition obligation	-	7,000
Amortization of prior service cost	72,000	(962,000)
Amortization of actuarial loss (gain)	(370,000)	(95,000)
Total net periodic benefit cost	$ (618,000)	$ (1,262,000)
Items not recognized as a component of net periodic cost,		
Beginning of the year	$ (15,987,000)	N/A
Net transition asset or obligation recognized	-	N/A
Net prior service cost or credit arising during the period	10,714,000	
Net prior service cost or credit recognized	(72,000)	N/A
Net gain and loss arising during the period	(11,254,000)	N/A
Net gain and loss recognized	370,000	N/A
Items not yet recognized as a component of net periodic cost,		
End of the year	$ (16,229,000)	N/A

	2013	2012
Amounts in unassigned funds (surplus) expected to recognized in the next fiscal year as components of net periodic benefit cost		
Net transition obligation	$ -	N/A
Prior service cost	72,000	N/A
Net actuarial loss (gain)	(582,000)	N/A
Amounts in unassigned funds (surplus) that have not yet been recognized as components of net periodic benefit cost		
Net transition obligation	$ -	$ -
Prior service cost (credit)	(2,186,000)	(12,827,000)
Net actuarial loss (gain)	(14,043,000)	(3,160,000)
Items not yet recognized as a component of net periodic cost	$ (16,229,000)	$ (15,987,000)

Weighted average assumptions used during the year to determine net periodic cost

	2013	2012
Discount rate	4.25%	4.75/4.25%*
Expected long-term rate of return	4.50%	5.00%
Health care trend rated-medical		
Trend for next year (pre-65/post-65)	8.00%/7.00%	8.00%/7.00%
Ultimate trend	5.00%	5.00%
Year ultimate trend reached (pre-65/post-65)	2021	2021/2022
Rate of compensation increase	Graded; 4%-9%	Graded; 4%-9%

	2013	2012
Weighted average assumptions used to determine projected benefit obligations at December 31		
Discount rate	5.00%	4.25%
Health care trend rated-medical		
Trend for next year (pre-65/post-65)	7.75%/6.75%	8.00%/7.00%
Ultimate trend	5.00%	5.00%
Year ultimate trend reached (pre-65/post-65)	2021	2021

*Effective October 1, 2012, the health benefits portion of the plans were remeasured due to plan changes as previously discussed, utilizing a 4.25% discount rate at that date. The life benefits portion of the plan is continuing to be remeasured at December 31, using a 4.75% discount rate.

The Company selected an overall expected long-term rate of return on assets assumption of 4.5% using a forward-looking approach based on the current long-term capital market outlook assumptions of the asset categories the Plan invests in. This rate is net of both investment related expenses and taxes.

Assumed health care cost trend rates have a significant effect on the amounts recognized for the health care plan. A one-percentage point change in assumed health care trend rates would have the following effect on the Retiree Health Benefits and Life Insurance Plans as of December 31, 2013:

	1% Increase	1% Decrease
Effect on total of service cost and interest cost components	$ 263,000	$ (201,000)
Effect on postretirement benefit obligation	2,052,000	(1,627,000)

The investment for the VEBA Trust shall be invested in such securities or in such property, real or personal, tangible or intangible, as the Trustee shall deem advisable, provided, however, that investments shall be so diversified as to minimize the risk of large losses unless under the circumstances it is clearly prudent not to do so in the sole judgment of the Trustee.

The 2014 target asset allocation for the VEBA Trust is as follows:

Equity securities	40% - 60%
Debt securities	40% - 60%
Cash	0% - 5%

The VEBA Trust is administered by Bank of the West and has asset allocations of 53% equity securities, 42% debt securities, and 5% other, as of December 31, 2013.

The Company expects to contribute $0 to the VEBA Trust in 2014.

The following benefit payments, which reflect expected future service, as appropriate, are expected to be paid:

Estimated Future Benefits Payments	
2014 Payouts	$ 1,554,000
2015 Payouts	1,486,000
2016 Payouts	1,419,000
2017 Payouts	1,319,000
2018 Payouts	1,238,000
2019 Payouts to 2023	5,758,000

The fair value measurements of the plan assets are as follows:

Asset Category	Quoted Prices In Active Markets for Identical Assets Level 1	Significant Observable Inputs Level 2	Significant Observable Inputs Level 3	Total
Government Obligations	$ -	$ 7,974,000	$ -	$ 7,974,000
Corporate Obligations	-	3,323,000	-	3,323,000
State & Municipal Obligations	-	1,943,000	-	1,943,000
Registered Investments	21,345,000	-	-	21,345,000
Common Stocks	11,150,000	-	-	11,150,000
Interest-Bearing Cash	197,000	-	-	197,000
Total Assets Measured At Fair Value	$ 32,692,000	$ 13,240,000	$ -	$ 45,932,000

The following is a descprtion of the valuation techniques used for the signifant qualified retiree health benefits and life insurance plan assets measured at fair value utilizing, and classified as, Level 1, 2 or 3:

Fixed Income Obligations - These are bonds whose value is derived from similar bonds that are publicly traded, collateralized debt obligations, as well as certain structured liabilities where the inputs to the valuation are primarily based on readily observable pricing information.

Registered Investments and Common Stocks - This includes SEC registered mutual funds, exchange traded funds tracking domestic or international equity indices, and individual equities held in the form of common stock of companies on any of the nationally/internationally recognized stock exchanges and/or the over-the-counter markets. The fair values are based on a review of unadjusted quoted prices for identical assets in active markets.

Cash and equivalents - This category includes cash and money market fund holdings. The fair values are based on a review of unadjusted quoted prices for identical assets in active markets.

Defined Contribution Plans

The Company has a qualified defined contribution pension plan covering substantially all of its employees. The Company will match up to 4% of an employee's eligible compensation. The Company's contribution to the Plan was $4,300,000 and $3,600,000 for 2013 and 2012, respectively. At December 31, 2013 and 2012, the fair value of plan assets was $145,287,000 and $121,452,000, respectively.

The Company established a qualified defined contribution pension plan on September 1, 2006. The Plan was established to cover NHS employees hired after September 1, 2006 who are not eligible for the defined benefit pension plan. The company contribution is a discretionary amount as determined by the Company from year to year. The Company's contribution to the Plan was $482,000 and $510,000 for the years 2013 and 2012 respectively. At December 31, 2013 and 2012, the fair value of plan assets was $3,650,000 and $2,689,000, respectively.

Note 10 - Administrative Services Contracts

Administrative Service Only Contracts

	2013	2012
Gross reimbursement for medical cost incurred	$ -	$ 1,648,000
Gross administrative fees accrued	-	2,113,000
Total net loss from operations	$ -	$ (465,000)

Self Insured Plans

	2013	2012
Gross reimbursement for medical cost incurred	$ 493,591,000	$ 405,853,000
Gross administrative fees accrued	28,304,000	23,448,000
Gross expenses (claims and administrative)	(523,879,000)	(432,222,000)
Total net loss from operations	$ (1,984,000)	$ (2,921,000)

As of December 31, 2013 and 2012, unpaid claim liabilities of $61,270,000 and $52,100,000, respectively, and corresponding receivables from self-insured groups for the same amount have been established but are not recorded in the financial statements.

As of December 31, 2013 and 2012, the Company reported a net gain of $5,688,000 and $14,787,000, respectively, on Stop Loss coverage associated with the Insured Portion of Partially Insured Plans.

Cost Reimbursement Contracts

Revenues from the Company's Civilian Health and Medical Program for the Uniformed Services administrative contracts for 2013 and 2012 were $201,000 and $472,000, respectively.

In addition, the Company is a member of the BlueCard Program and by agreement processes subscribers' claims for other Blue Cross and Blue Shield Plans. The claims, of $186,667,000 and $152,811,000 in 2013 and 2012, respectively, were processed for others and the related reimbursements have been excluded from the statutory statements of income. The Company's operating expense reimbursement for BlueCard was $7,497,000 and $7,284,000 in 2013 and 2012, respectively.

The Company also has administrative agreements with affiliated and related companies that are disclosed as related parties.

Note 11 - Reinsurance

Unsecured Reinsurance Recoverable

The Company does not have an unsecured aggregate recoverable for losses, paid and unpaid including incurred but not reported (IBNR), loss adjustment expenses and unearned premium with any individual reinsurers, authorized or unauthorized, that exceeds 3% of the Company's policyholder surplus.

Medicare Advantage/Medicare Part D

In 2006, the Company joined with Blue Cross Blue Shield of Minnesota, Blue Cross Blue Shield of Montana, Blue Cross Blue Shield of Nebraska, Wellmark, Inc., Wellmark of South Dakota, and Blue Cross Blue Shield of Wyoming to create a joint enterprise, Regional Advantage Services, LLC for the purposes of administering the Blue Cross Blue Shield Northern Plains Alliance Medicare Advantage and Medicare Part D Program.

There are multiple agreements in place among these entities that may involve transfers of revenue. These agreements fall into three main categories:

1) The allocation of CMS risk-sharing payments involves the distribution of payments to/from CMS that are calculated based on variances in financial experience from amounts bid for Medicare Advantage and Medicare Part D products. The Company currently has no risk-sharing payable to CMS. As of December 31, 2013 and 2012 the Company has risk sharing receivables recorded of $1,218,000 and $542,000, respectively.

2) The pooling of catastrophic claims involves the pooling of claims with amounts paid in excess of $100,000. The Company currently has no receivable recorded relating to the pooling of large claims.

3) The limited gain-sharing portion involves the potential transfer of portions of financial gains arising from Medicare Advantage and Medicare Part D products to other entities that incurred losses on the same. The Company currently has an $84,000 risk-sharing payable to the other plans in the region.

Reinsurance Assumed and Ceded

The Company entered into an agreement with MedAmerica Insurance Company in 1999 to offer long-term care insurance that would be 100% ceded to MedAmerica. Reinsurance ceded could become a liability to the Company in the event the reinsurer is unable to meet the obligations they have assumed. Claims paid by MedAmerica in 2013 and 2012 were $429,000 and $451,000, respectively. MedAmerica established claim reserves of $1,290,000 and $1,008,000 for 2013 and 2012, respectively.

Note 12 - Aggregate Reserves for Policy Contracts

Activity in the liability for aggregate reserves for policy contracts (excluding unpaid claims adjustment expenses and premium deficiency reserves) is summarized as follows:

	2013	2012
Balance at beginning of the year	$ 138,360,000	$ 119,978,000
Incurred related to		
Current year	1,105,643,000	1,009,239,000
Prior year	(8,175,000)	(12,163,000)
Total incurred	1,097,468,000	997,076,000
Paid related to		
Current year	959,563,000	870,890,000
Prior year	130,387,000	107,804,000
Total paid	1,089,950,000	978,694,000
Balance at end of the year	$ 145,878,000	$ 138,360,000

The decrease in the provision of insured events of prior years of $8,175,000 as of December 31, 2013 and $12,163,000 as of December 31, 2012 is a result of ongoing analysis of recent loss development trends and re-estimation of unpaid claims on fully insured and risk sharing agreements and resulting from loss development trends better than estimated.

Note 13 - Income Taxes

The components of the net deferred tax asset/(liability) at December 31, 2013 and 2012 are as follows:

	2013			2012		
	Ordinary	Capital	Total	Ordinary	Capital	Total
Gross Deferred Tax Assets	$ 33,900,000	$ -	$ 33,900,000	$ 23,600,000	$ 2,100,000	$ 25,700,000
Adjusted Gross Deferred tax Assets	33,900,000	-	33,900,000	23,600,000	2,100,000	25,700,000
Deferred Tax Assets Nonadmitted	20,400,000	-	20,400,000	19,000,000	2,100,000	21,100,000
Subtotal Net Admitted Deferred Tax Asset	13,500,000	-	13,500,000	4,600,000	-	4,600,000
Deferred Tax Liabilities	-	6,600,000	6,600,000	-	-	-
Net Admitted Deferred Tax Asset	$ 13,500,000	$ (6,600,000)	$ 6,900,000	$ 4,600,000	$ -	$ 4,600,000

The change in the components of the net deferred tax asset/liability between December 31, 2013 and 2012 is as follows:

	Change		
	Ordinary	Capital	Total
Gross Deferred Tax Assets	$ 10,300,000	$ (2,100,000)	$ 8,200,000
Adjusted Gross Deferred tax Assets	10,300,000	(2,100,000)	8,200,000
Deferred Tax Assets Nonadmitted	1,400,000	(2,100,000)	(700,000)
Subtotal Net Admitted Deferred Tax Asset	8,900,000	-	8,900,000
Deferred Tax Liabilities	-	6,600,000	6,600,000
Change in Net Admitted Deferred Tax Asset/(Net Deferred Tax Liability)	$ 8,900,000	$ (6,600,000)	$ 2,300,000

The admission calculation components under SSAP No. 101 as of December 31, 2013 and 2012 is as follows:

	2013			2012		
	Ordinary	Capital	Total	Ordinary	Capital	Total
Federal Income Taxes Paid In Prior Years Recoverable Through Loss Carrybacks	$ 3,700,000	$ -	$ 3,700,000	$ 4,600,000	$ -	$ 4,600,000
Adjusted Gross Deferred Tax Assets Expected To Be Realized (Excluding The Amount Of Deferred Tax Assets From above) After Application of the Threshold Limitation (The Lesser of 1 and 2 below)	3,200,000	-	3,200,000	-	-	-
Adjusted Gross Deferred Tax Assets Expected to be Realized Following the Balance Sheet Date	3,200,000	-	3,200,000	-	-	-
Adjusted Gross Deferred Tax Assets Allowed per Limitation Threshold	-	-	-	-	-	-
Adjusted Gross Deferred Tax Assets (Excluding The Amount of Deferred Tax Assets From above) Offset by Gross Deferred Tax Liabilities	-	6,600,000	6,600,000	-	-	-
Deferred Tax Assets Admitted as the result of application of SSAP No. 101	$ 6,900,000	$ 6,600,000	$ 13,500,000	$ 4,600,000	$ -	$ 4,600,000

The change in the admission calculation components is as follows:

	Change		
	Ordinary	Capital	Total
Federal Income Taxes Paid In Prior Years	$ (900,000)	$ -	$ (900,000)
Adjusted Gross Deferred Tax Assets Expected To Be Realized (Excluding The Amount Of Deferred Tax Assets From above) After Application of the Threshold Limitation (The Lesser of 1 and 2 below)	3,200,000	-	3,200,000
Adjusted Gross Deferred Tax Assets Expected to be Realized Following the Balance Sheet Date	3,200,000	-	3,200,000
Adjusted Gross Deferred Tax Assets Allowed per Limitation Threshold	-	-	-
Adjusted Gross Deferred Tax Assets (Excluding The Amount of Deferred Tax Assets From above) Offset by Gross Deferred Tax Liabilities	-	6,600,000	6,600,000
Change in Deferred Tax Assets Admitted as the result of application of SSAP No. 101	$ 2,300,000	$ 6,600,000	$ 8,900,000

	2013	2012
Ratio Percentage Used To Determine Recovery Period and Threshold Limitation Amount	343%	505%
Amount Of Adjusted Capital and Surplus Used To Determine Recovery Period and Threshold Limitation Above	$ 192,188,000	$ 267,400,000

The provision (benefit) for income taxes consist of the following major components for the years ended December 31, 2013 and 2012:

	2013	2012
Federal	$ 622,000	$ 3,484,000
Federal income tax on net capital gains	3,202,000	571,000
Other	(802,000)	499,000
Federal and foreign income taxes incurred	$ 3,022,000	$ 4,554,000

The effects of temporary differences that give rise to significant portions of the deferred tax assets and deferred tax liabilities are as follows:

	2013	2012	Change
Ordinary			
Discounting of unpaid losses	$ 600,000	$ 450,000	$ 150,000
Fixed assets	5,700,000	2,600,000	3,100,000
Compensation and benefits accual	3,800,000	4,100,000	(300,000)
Net operating loss carry forward	9,600,000	6,900,000	2,700,000
Other (including items <5% of total ordinary tax assets)	600,000	350,000	250,000
Intangible Assets - Subscriber and provider contracts	5,700,000	5,800,000	(100,000)
Prepaid Expenses	4,100,000	3,400,000	700,000
Premium Deficiency Reserve	3,800,000	-	3,800,000
Subtotal	33,900,000	23,600,000	10,300,000
Nonadmitted	(20,400,000)	(19,000,000)	(1,400,000)
Admitted ordinary deferred tax assets	13,500,000	4,600,000	8,900,000
Capital:			
Investments	$ -	$ 2,100,000	$ (2,100,000)
Nonadmitted capital deferred tax assets	-	2,100,000	(2,100,000)
Admitted capital deferred tax assets	-	-	-
Admitted deferred tax assets	13,500,000	4,600,000	8,900,000
Deferred Tax Liabilities			
Capital			
Investments	6,600,000	-	6,600,000
Net deferred tax assets	$ 6,900,000	$ 4,600,000	$ 2,300,000

The change in the net deferred income taxes is comprised of the following:

	2013	2012	Change
Gross deferred tax assets	$ 33,900,000	$ 25,700,000	$ 8,200,000
Total deferred tax liabilities	(6,600,000)	-	(6,600,000)
Net deferred tax assets	$ 27,300,000	$ 25,700,000	1,600,000
Tax effect of unrealized gains			3,900,000
Change in net deferred income taxes			$ 5,500,000

The provision for federal and foreign income taxes incurred is different from that which would be obtained by applying the statutory Federal income tax rate to income before income taxes. The significant items causing this difference are as follows:

	2013	2012
Provision computed at the statutory rate	$ (27,218,000)	$ 9,327,000
Benefit of the 833(b) deduction	(2,900,000)	(3,577,000)
Effect of permanent differences including impact of disregarded entity	33,942,000	(980,000)
Other provision	(802,000)	(216,000)
Total Statutory income tax provision	$ 3,022,000	$ 4,554,000

The Company has an alternative minimum tax (AMT) credit carryforward of $50,353,000 that may be carried forward indefinitely to reduce future regular federal income taxes payable. The Company also has $27,500,000 of operating loss carryforward that expires between 2018 and 2030 that may be used to offset future regular taxable income.

The Company has income taxes incurred of $200,000 in 2013 and $3,500,000 in 2012 that will be available for recoupment in the event of future net losses.

The Company's federal income tax return is filed on a consolidated basis with NHS, Twenty First, MDD, and NISI. The Company includes 50% of the taxable income/loss of CoreLink Administrative Solutions, LLC in the calculation of income tax due.

The method of allocation is described as the Taxable Income Method, under which the group's tax liability is apportioned among the members in accordance with the ratio which that portion of the consolidated taxable income attributable to each member having taxable income bears to the consolidated taxable income based upon separate return calculations with current credit for net losses. Intercompany tax balances are settled annually in the third quarter of the subsequent year. Under the tax sharing arrangement, the subsidiaries have the ability to recoup taxes if losses are incurred or use carryforward losses to offset future taxable income.

Note 14 - Related Party Transactions

The Company provides marketing and administrative services, building facilities, equipment, and data processing to the following companies. In accordance with administrative agreements, expenses are determined by a cost accounting system, which allocates operating expenses to the companies based on estimates of actual utilization.

The net amount due from (to) the Company are as follows:

	Admitted Amounts Due From (to) at December 31 2013	Admitted Amounts Due From (to) at December 31 2012
Noridian Healthcare Solutions, LLC	**$ 18,489,000**	$ 28,658,000
CoreLink Administrative Solutions, LLC	**3,635,000**	-
Dental Service Corporation of ND	**935,000**	-
MDdatacor, LLC	**465,000**	-
Comprehensive Health Association of ND	**287,000**	57,000
Noridian Insurance Services, Inc.	**108,000**	298,000
ND Vision Services, Inc.	**60,000**	114,000
North Dakota Caring Foundation	**59,000**	14,000
Lincoln Mutual Life and Casualty Insurance Co.	**8,000**	68,000
Discovery Benefits, Inc	**2,000**	2,000
Total due from	**$ 24,048,000**	$ 29,211,000
Noridian Insurance Services, Inc	**$ (2,170,000)**	$ -
Noridian Healthcare Solutions, LLC	**(691,000)**	-
CoreLink Administrative Solutions, LLC	**(182,000)**	(277,000)
Dental Service Corporation of ND	**-**	(2,413,000)
MDdatacor, LLC	**-**	(2,146,000)
Total due to	**$ (3,043,000)**	$ (4,836,000)

The total expenses allocated by the Company to the following related organizations are as follows:

	Total Expenses Allocated 2013	Total Expenses Allocated 2012
Noridian Healthcare Solutions, LLC	**$ 49,161,000**	$ 91,091,000
CoreLink Administrative Solutions, LLC	**9,755,000**	14,574,000
Dental Service Corporation of ND	**5,344,000**	5,297,000
Noridian Insurance Services, Inc.	**2,775,000**	3,037,000
ND Vision Services, Inc.	**1,920,000**	1,623,000
Lincoln Mutual Life and Casualty Insurance Co.	**1,313,000**	1,841,000
MDdatacor, Inc.	**1,093,000**	893,000
Comprehensive Health Association of ND	**600,000**	550,000
North Dakota Caring Foundation	**164,000**	168,000
Discovery Benefits, Inc	**29,000**	150,000
	$ 72,154,000	$ 119,224,000

The Company donated administrative services to The North Dakota Caring Foundation. The services donated were $236,000 and $216,000 for 2013 and 2012, respectively.

Certain board members are also management personnel for entities in which the Company conducts certain business.

Note 15 - Retrospectively Rating Contracts

The Company estimates accrued retrospective premium adjustments for its group health insurance business through a mathematical approach using an algorithm of the Company's underwriting rules and experience rating practices. The Company records accrued retrospective premium as an adjustment to earned premium. The amount of net premium written by the Company at December 31, 2013 and 2012 that are subject to retrospective rating features was $256,648,000 and $237,058,000 which represented 21% and 24%, respecitively, of the total net premium written.

Note 16 - Commitments and Contingencies

On June 28, 2012, the Company entered into an agreement to guarantee a letter of credit taken out by NHS. The letter of credit is a requirement for a contract NHS has with the State of Iowa. The amount of the letter of credit is $1,739,000. The letter expires on June 30, 2014. NHS is currently meeting all contractual obligations related to this contract.

On October 17, 2011, the Company entered into an agreement to guarantee up to a $6,000,000 line of credit taken out by MDD. In 2013, the line of credit limit and guarantee by the Company was raised to $8,000,000. As of December 31, 2013 the amount of the line of credit balance outstanding was $8,000,000. The line of credit matures on December 16, 2015. See Note 17 for subsequent events related to sale of membership units of MDD.

The Company's wholly owned subsidiary, NHS, was the prime contractor in building the State of Maryland's health insurance web-based marketplace (MDHIX). On December 31, 2013, the State issued a cure notice to NHS regarding alleged performance issues. NHS disputed and continues to dispute the State's claims. NHS successfully negotiated a consensual exit from the MDHIX contract as of February 24, 2014. The Transition Agreement associated with this negotiated exit provides that NHS and the State agreed to a standstill until August 22, 2014 (the "Standstill Period"), with regard to the assertion of any legal claims by any party against any other in connection with the Contract. The Company is a party to that exit agreement with respect to its efforts to support transitional data hosting services required by the State's new prime contractor, QSSI. NHS believes that it is probable that one or more material claims will be asserted by the State against NHS, and NHS will assert one or more material claims against the State. The Company believes that it is also possible that the State may assert material claims directly against NMIC for damages. However, the facts do not indicate that an unfavorable outcome for the Company is probable based on any such claims, nor is it reasonably possible to estimate a range of outcomes that may occur as a result of such claims. Counsel for both companies are of the view that, assuming that such claims will be asserted, it is not possible to determine either the probability of a favorable or unfavorable outcome or to estimate any gain or loss associated therewith.

On February 24, 2012, the Company entered into an agreement to guarantee a performance bond taken out by NHS. The performance bond was a requirement for a contract NHS has with the State of Maryland (the state) to build the State's Health Insurance Exchange. The amount of the performance bond is $10,000,000. The bond was originally set to mature on February 22, 2014 but was extended to October 22, 2014. In February 2014, NHS and the state came to an agreement for NHS to exit the contract as of February 24, 2014. Under terms of the agreement, both parties agreed to stay any legal proceedings in regard to the contract until August 22, 2014. No reasonable estimate can be made at this time regarding the potential liability, if any, or the amount or range of any loss that may result from the negotiated exit of the contract. In accordance with SSAP No. 5R – *Liabilities, Contingencies and Impairments of Assets*, an accrual of $5,000,000 was recorded based on management's assessment of the uncertainty surrounding implementation of call provisions of the bond, and the guarantee agreement between the Company and the surety company. The amount recorded represents the midpoint of the range of the bond in accordance with treatment prescribed in SSAP No. 5R. Subsequent to year end, the bond issuer has requested and the Company has placed $10,000,000 as funds on deposit with a financial institution.

The Company has committed no reserves to cover contingent liabilities that may arise from guarantee fund assessment amounts as amounts would not be material to the Company.

The Company is involved in various claims, lawsuits and proceedings that arose in the ordinary course of business. While these actions are being contested, the outcome of individual matters is not predictable with assurance. The Company does not believe that any liability resulting from any of the actions will have a material adverse effect on its financial position, operating results, policyholder surplus, cash flows or liquidity.

Note 17 - Subsequent Events

Subsequent events have been considered through June 26, 2014, which represents the date the statutory basis financial statements were available to be issued.

On January 1, 2014, the Company will be subject to an annual fee under section 9010 of the PPACA. This annual fee will be allocated to individual health insurers based on the ratio of the amount of the entity's net premiums written during the preceding calendar year to the amount of health insurance for any U.S. health risk that is written during the preceding calendar year. A health insurance entity's portion of the annual fee becomes payable once the entity provides health insurance for any U.S. health risk for each calendar year beginning on or after January 1, 2014. As of December 31, 2013, the Company has written health insurance subject to the PPACAassessment and expects to conduct health insurance business in 2014. The Company estimates their portion of the annual health insurance industry fee to be payable on September 30, 2014 to be $13,500,000. This assessment is expected to decrease risk based capital by approximately 24 points.

Twenty First entered into a membership interest purchase agreement on March 31, 2014 to sell all membership units of MDD to Symphony Performance Health Inc. (Symphony). The sales price was $10,000,000 payable in cash at closing, a $5,000,000 senior secured promissory note payable on the third anniversary year from closing date, and a $1,500,000 secured promissory note payable on the fifth anniversary year from closing date. The Company also has the potential to receive an additional $12,500,000 from the sale based on customer and revenue earn-out provisions. The transaction is expected to increase the Company's surplus by approximately $13,600,000 in 2014.

During March of 2014, the Company signed an agreement to sell its ownership share in TriWest Alliance, Inc.(TriWest). The Company will record a realized gain of $16,389,000, however, the impact on surplus will be a decrease of $128,000 after reversing the unrealized gain of $16,518,000 that was previously recognized. Under the agreement, the Company received $12,265,000 in March 2014 and a note for the remaining sale amount of $5,256,000. The Company expects the note to be settled before year end 2014.

Note 18 - Annual Statement Variance

There were classification differences between the accompanying statutory financial statements and the Company's statutory filing as of December 31, 2013 and 2012. These differences related to classifications represented on the statement of cash flows. These variances had no effect on the statutory statements of admitted assets, liabilities, and policyholder surplus or the statutory statements of operations and changes in policyholder surplus.

Note 19 - Statutory Surplus

The North Dakota Insurance Department imposes minimum risk-based capital requirements that were developed by the NAIC. The formulas for determining the amount of risk-based capital specify various weighting factors that are applied to financial balances or various levels of activity based on the perceived degree of risk. At December 31, 2013 and 2012, the Company is in compliance with all capital requirements.

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CPAs & BUSINESS ADVISORS

Independent Auditor's Report on Supplementary Information

The Board of Directors
Noridian Mutual Insurance Company
d/b/a Blue Cross Blue Shield of North Dakota
Fargo, North Dakota

We have audited the statutory financial statements of Noridian Mutual Insurance Company as of and for the years ending December 31, 2013 and 2012, and our report thereon dated June 26, 2014, which expressed an unmodified opinion on those financial statements appears on page 1. Our audits were conducted for the purpose of forming an opinion on the basic statutory-basis financial statements taken as a whole. The accompanying supplementary information included in the *Supplemental Schedule of Investment Risks Interrogatories* and the *Summary Investment Schedule* including the notes to supplementary information on pages 56 through 60 are required to be presented to comply with the National Association of Insurance Commissioners' Annual Statement Instructions and the National Association of Insurance Commissioners' Accounting Practices and Procedures Manual and are not a required part of the basic statutory-basis financial statements. Such information included in the schedules referred to above is the responsibility of management, is presented for purposes of additional analysis and was derived from and relates directly to the underlying accounting and other records used to prepare the statutory financial statements. The information has been subjected to the auditing procedures applied in the audit of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other procedures in accordance with the auditing standards generally accepted in the United States of America. In our opinion, the information is fairly stated in all material respects in relation to the basic statutory financial statements taken as a whole.

Eide Bailly LLP

Minneapolis, Minnesota
June 26, 2014

1. The Company's total admitted assets as reported on the accompanying statutory balance sheet are $458,189,000 at December 31, 2013.

2. Following are the ten largest exposures to a single issuer/borrower/investment, by investment category, excluding U.S. government, U.S. government agency securities and those U.S. government money market funds listed in the Appendix to the *SVO Practices and Procedures Manual* as exempt property occupied by the Company:

	Amount	Percentage of Total Admitted Assets
TriWest Healthcare Alliance	$ 17,650,000	3.85
Prime Therapeutics	5,729,000	1.25
Pimco All Asset-1	5,207,000	1.14
Discovery Benefits Inc	4,683,000	1.02
ABERDEEN EMER MKTS-INST	4,526,000	0.99
Noridian Insurance Services Inc	3,187,000	0.70
Freddie Mac	2,350,000	0.51
Federal Home Loan Banks	1,839,000	0.40
KFW	1,629,000	0.36
LOEWS CORP	1,533,000	0.33

3. The Company's total admitted assets held in bonds and preferred stocks by NAIC rating:

	Amount	Percentage of Total Admitted Assets
Bonds and short-term investments		
NAIC-1	$ 166,490,000	36.34
NAIC-2	63,278,000	13.81
NAIC-3	2,927,000	0.64
NAIC-4	7,216,000	1.57
NAIC-5	1,316,000	0.29
	$ 241,227,000	
Preferred Stock		
P/RP - 1	$ 139,000	0.03
	$ 139,000	

4. Assets held in foreign investments are less than 2.5% of the Company's admitted assets.

5. through 6. The Company has no foreign investment exposure.

7. through 9. The Company has no unhedged foreign currency exposure.

10. The Company has no non-soverign foreign issues.

11. Assets held in Canadian investments are less than 2.5% of the Company's total assets.

12. The Company has no assets held in investments with contractual sales restrictions at December 31, 2013.

13. Following are the ten largest exposures to a single issuer/borrower/investment in equity interests, by investment category, including mutual funds, preferred stocks, publicly traded equity securities and other equity securities and excluding money market and bond mutual funds listed in the Appendix to the *SVO Practices and Procedures Manual* as exempt or Class 1.

		Amount	Percentage of Total Admitted Assets
13.02	TriWest Healthcare Alliance	$ 17,650,000	3.85
13.03	VANGUARD S&P 500 ETF	13,844,000	3.02
13.04	Prime Therapeutics	5,729,000	1.25
13.05	BLACKROCK GLOBAL ALLOCATIO-I	5,230,000	1.14
13.06	PIMCO ALL ASSET FUND-INSTITU	5,207,000	1.14
13.07	THORNBURG INTL VAL-I	4,685,000	1.02
13.08	Discovery Benefits, Inc.	4,683,000	1.02
13.09	ABERDEEN EMER MKTS-INST	4,526,000	0.99
13.10	Noridian Insurance Services, Inc.	3,187,000	0.70
13.11	Plans' Liability Insurance Company	597,000	0.13

14. Assets held in nonaffiliated, privately placed equities are greater than 2.5% of the Company's admitted assets at December 31, 2013.

		Amount	Percentage of Total Admitted Assets
14.02	Aggregate statement value of investments held in non affiliated privately placed equities	$ 23,981,000	5.23
	Largest three investments held in non affilliated, privately placed equities		
14.03	TriWest Healthcare Alliance	17,650,000	3.85
14.04	Prime Therapeutics	5,729,000	1.25
14.05	Plans' Liability Insurance Company	597,000	0.13

15. Assets held in general partnership interests are less than 2.5% of the Company's admitted assets at December 31, 2013.

16. through 17. The Company has no admitted assets held in mortgage loans at December 31, 2013.

18. The Company has no admitted assets held as investment real estate at December 31, 2013.

19. The Company has no admitted assets held as investments in mezzanine real estate loans at December 31, 2013.

20. The Company has no admitted assets subject to security lending or repurchase agreements at December 31, 2013.

21. The Company has no warrants at December 31, 2013.

22. The Company has no potential exposure for collars, swaps, and forwards at December 31, 2013.

23. The Company has no potential exposure for future contracts at December 31, 2013.

Noridian Mutual Insurance Company
d/b/a Blue Cross Blue Shield of North Dakota
Summary Investment Schedule
December 31, 2013

The Company held cash and invested assets as of December 31, 2013 consisting of the following:

	Gross Investment Holdings		Admitted Assets as Reported in the Annual Statement	
	Amount	Percentage	Amount	Percentage
Bonds				
US Treasury Securities	$ 24,141,000	6.96	$ 24,141,000	6.98
Certificates of Deposits	7,000,000	2.02	-	-
Securities issued by states, territories, possessions, and political subdivisions in the U.S.				
Revenue and assessment obligations	5,969,000	1.72	5,969,000	1.73
Mortgage-backed securities (includes residential and commercial MBS)				
Pass-through securities				
Issued by FNMA and FHLMC	4,776,000	1.38	4,776,000	1.38
All Other	1,107,000	0.32	1,107,000	0.32
CMO's and REMICs				
Issued or guaranteed by GNMA, FNMA, FHLMC or VA	4,736,000	1.37	4,736,000	1.37
Issued by non-U.S. Government issuers and collateralized by mortgage-backed securities issued or guaranteed by agencies	-	-	-	-
All Other	3,286,000	0.95	3,285,000	0.95
Other debt and other fixed income securities				
Unaffiliated domestic securities (includes credit tenant loans rated by the SVO)	106,691,000	30.75	106,691,000	30.86
Unaffiliated non-US securities	19,941,000	5.75	19,941,000	5.77
Equity interests				
Investments in mutual funds	35,171,000	10.14	35,171,000	10.17
Preferred Stocks				
Unaffiliated	139,000	0.04	139,000	0.04
Publicly traded equity securities				
Unaffiliated	34,378,000	9.91	34,378,000	9.94
Other equity securities				
Affiliated	2,655,000	0.77	2,655,000	0.77
Unaffiliated	-	-	-	-
Real estate investments				
Property occupied by company	25,171,000	7.26	24,503,000	7.09
Cash and short term investments	71,196,000	20.52	78,197,000	22.62
Other long-term invested assets	589,000	0.17	47,000	0.01
Total cash and invested assets	$ 346,946,000	100.00	$ 345,736,000	100.00

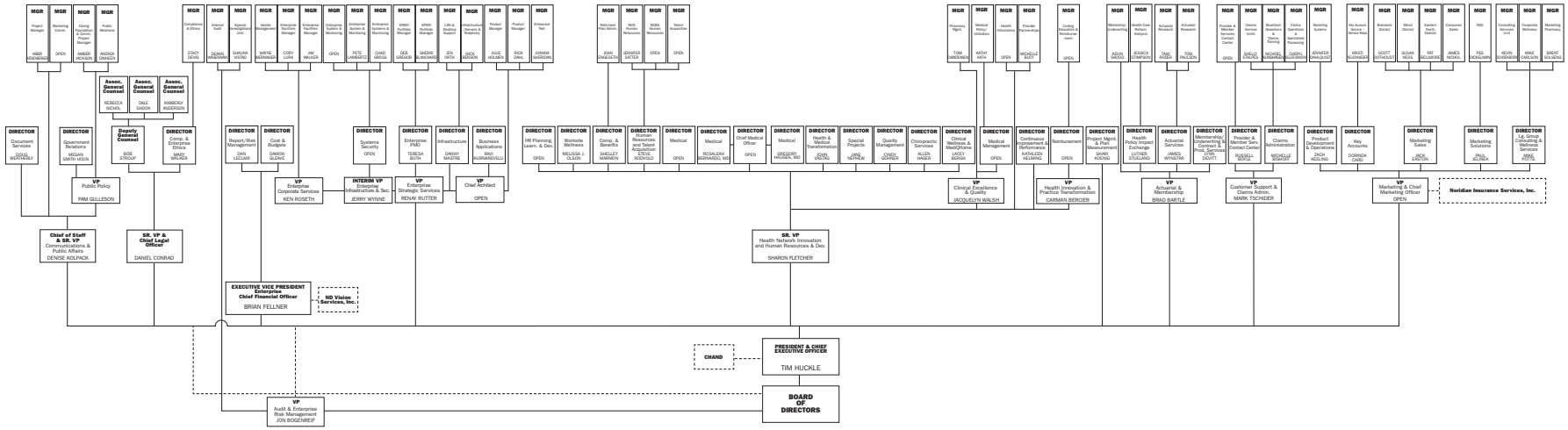
Note – Basis of Presentation

The accompanying schedules and interrogatories present selected statutory-basis financial data as of December 31, 2013 and for the year then ended for the purpose of complying with paragraph 9 of the Annual Audited Financial Reports in the Annual Audited Report section of the National Association of Insurance Commissioners' *Annual Statement Instructions* and the National Association of Insurance Commissioners' *Accounting Practices and Procedures Manual* and agree to or are included in the amounts reported in the Company's 2013 Statutory Annual Statement, as filed with the North Dakota Insurance Department.

Attachment 3

Attachment 3

Blue Cross Blue Shield of North Dakota Organizational Chart



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Noridian Mutual Insurance Company

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Direct Reporting Relationships
August 2014

Attachment 4

Attachment 4

Attachment 4

Biographies – Alphabetical Order

Brad Bartle
Vice President of Actuarial & Membership
Fargo, N.D.
Phone Number: 701-282-1941 (office)
Brad.Bartle@bcbsnd.com

Brad Bartle is VP of Actuarial and Membership Services at BCBSND. He oversees Actuarial Services, Management Information Services, Health Policy Impact and Exchange, and Membership and Underwriting departments. Bartle has more than 20 years of experience working as an actuary on health insurance. He joined BCBSND in 2004 as AVP of Actuarial Services. He previously worked for the Blue Cross and Blue Shield Association in Chicago as an actuarial associate in the Federal Employee Program prior to working as a health actuary at Country Insurance and Financial Services in Bloomington, Illinois. A graduate of the University of Wisconsin Madison, Bartle holds a bachelor degree in actuarial mathematics. His is a fellow of the Society of Actuaries and a member of the American Academy of Actuaries. Bartle will earn his MBA from Kellogg School of Management in December 2014.

Carman Bercier
Vice President Health Innovations and Practice
Fargo, N.D.
Phone Number: 701- 282-1886 (office)
Carman.Bercier@bcbsnd.com

Carman Bercier joined the Health Network Innovation (HNI) Division of Blue Cross Blue Shield of North Dakota (BCBSND) in October 2013 as Vice President of Health Innovation and Practice Transformation. In her role, Carman provides leadership, innovation and motivation to management in developing and implementing strategies for the network and reimbursement teams within HNI. Carman has been with BCBSND for 24 years holding various positions within the Claims Division. In her previous position, Carman served as Manager of BlueCard Operations, overseeing the daily activities of the Inter-Plan Program functions. She also served as the BlueCard Executive.

Michelle Bishoff
Director of Claims Administration
Fargo, N.D.
Phone Number: 701-282-1953 (office)
Michelle.Bishoff@bcbsnd.com

Michelle Bishoff has been employed by BCBSND since 1990. She has served in a number of capacities in the Claims Department including 16 years as claims manager. She has served in her current capacity as Director of Claim Administration since January 2008. In her current position Bishoff oversees 14 management and supervisory employees and 140 employees in the Claims Department including the NDPERS Service Unit. She has a bachelor degree in business management from the University of Mary, Bismarck.

Dorinda Card
Director of Key and National Accounts
Fargo, N.D.
Phone Number; 701-277-2798 (office)
Dorinda.card@bcbsnd.com

Dorinda Card leads the team responsible for the retention and sales of our large and national accounts.

She joined BCBSND in June of 2013 and has been involved in developing a Key Account Sales and Account Management Division. Prior to BCBSND, Dorinda spent 27 years in the Health Insurance/ Managed Care Industry of which 16 years have been in leadership roles in sales and account management. She spent 22 years at UnitedHealthcare both in Minnetonka MN and Omaha NE. She was with Coventry Health Plan (Now an Aetna Company) for 3 years and a year at Cypress Benefit Administrators before moving to Fargo. She is experienced with strategic vision; goal setting; performance management; coaching; negotiating; hiring; restructuring; forecasting; process improvement; product development; compensation programs and development; product, strategy and execution of group health and ancillary business including dental, life, vision, and disability of all sizes. Dorinda has a bachelor's degree from UMD in communication and has been through multiple post graduate leadership and industry programs.

Michael Carlson
Manager of Health Management
Fargo, N.D.
Phone Number: 701-282-1140 (office)
Michael.Carlson@bcbsnd.com

Michael Carlson is the Manager of Health Management services for Blue Cross Blue Shield of North Dakota (BCBSND). Main responsibilities include the development, administration and performance review of programs that engage the membership of BCBSND in proactive prevention and healthy behaviors. Prior to coming to BCBSND, Mike spent time in the clinical and professional athletics environment. He has a Master's Degree in Exercise Science from St. Cloud State University and his Bachelor's degree in Athletic Training/Sports Medicine from North Dakota State University.

Tom Christensen
Manager of Pharmacy Management
Fargo, N.D.
Phone Number: 701-277-2588 (office)
Tom.Christensen@bcbsnd.com

Tom Christensen has been with BCBSND for 19 years. Since January 2004, he has been Manager of Pharmacy Management. Prior to his management role, he was pharmacy consultant at BCBSND. He has more than 30 years of pharmacy experience in a wide variety of settings, including pharmacy practice, association management, academia, and the pharmacy benefit management industry. He received his bachelor and Doctor of Philosophy degrees from the University of Michigan, Ann Arbor. He also holds a Juris Doctor degree from Michigan State University, East Lansing.

Dan Conrad
Chief Legal Officer & Corporate Secretary
Fargo, N.D.
Phone Number: 701-277-2279 (office)
Dan.Conrad@bcbsnd.com

Dan Conrad is chief legal officer at Blue Cross Blue Shield of North Dakota. As chief legal officer, he provides strategic and legal expertise to manage legal risks and opportunities across the enterprise. In addition to leading the Legal department, he represents the company with outside agencies and partners and oversees the BCBSND's Compliance and Ethics program. Before joining BCBSND in 2013, Conrad was in-house counsel at FedEx Corporation in Memphis, Tennessee. He began his legal career as a trial attorney for the United States Department of Justice in Washington, DC. Conrad received his undergraduate degree from Minnesota State University Moorhead and his Juris Doctor from the University of North Dakota.

Jodi Crouse
NDPERS Sr. Large Group Consultant
Fargo, N.D.
Phone Number: 701-277-2059 (office)
Jodi.Crouse@bcbsnd.com

Jodi Crouse has been employed by BCBSND 23 years. Since 2005, she has been a large group consultant in the Consulting Services Unit. She is the dedicated consultant for the NDPERS account. Her duties include preparing the quarterly NDPERS Executive Summary and Annual Report, and supporting the value-added programs for the NDPERS account. Crouse previously worked as a worksite marketing representative and National Accounts marketing service representative. She also worked in the NDPERS Service Unit for several years.

Stacy Duncan
NDPERS Wellness Consultant
Fargo, N.D.
Phone Number: 701-277-2884 (office)
Stacy.Duncan@bcbsnd.com

Stacy Duncan is the NDPERS Wellness Consultant for Blue Cross Blue Shield of North Dakota (BCBSND). Her duties include acting as a resource for the NDPERS Wellness Coordinators, preparing the monthly Wellness Coordinator Newsletter, conducting monthly conference calls/webinars for wellness updates, and supporting BCBSND wellness programs to NDPERS members. Prior to coming to BCBSND, Stacy spent time in the non-profit health industry and the public sector. She has a Master's Degree in Business Administration from University of Mary and a Bachelor's degree in Public Administration from University of North Dakota.

Brian Fellner
Executive Vice President and Chief Financial Officer
Fargo, N.D.
Phone Number: 701-282-1103 (office)
Brian.Fellner@bcbsnd.com

Brian Fellner is executive vice president and chief financial officer at Blue Cross Blue Shield of North Dakota. His responsibilities include the oversight of the Company‘s financial statements, budgeting, treasury, and investment functions. Before joining BCBSND in 2013, Fellner was senior vice president of Enterprise Services at American Enterprise Group in Des Moines, where he was Chief Financial Officer and was responsible for the oversight of all corporate services functions. His background includes over 20 years of leadership and management experience within the Financial, Insurance and Health Care industries, including executive roles at Great West Life & Annuity Insurance Company, Pinon Management (a recognized leader and innovator in the long term care), and Pinon Health Network (where Fellner was a co-owner). Fellner commenced his career with Myers & Stauffer, a public accounting firm that specializes in healthcare auditing and consulting for State and Federal governments. Fellner also served as an adjunct faculty member at the University of Colorado Graduate School of Health Administration. Fellner is a certified public accountant, with additional professional certifications in managerial accounting and internal auditing. A graduate of the University of Colorado, Fellner holds a bachelor's degree in business administration and a master's degree in accounting.

Sharon Fletcher
Senior Vice President of Provider Relations & Reimbursement
Fargo, N.D.
Phone Number: 701-277-2698 (office)
Sharon.Fletcher@bcbsnd.com

Sharon Fletcher joined BCBSND in May 2012. As the SVP of Medical Management and Provider Reimbursement her role is to provide strategic oversight of and leadership for the division. Since 2011 Sharon worked as senior project director for Stanley Black and Decker Healthcare Solutions in New Britain, Conn., where she provided strategic consulting for health care organizations to help them implement long-term process capabilities that create efficiencies. Fletcher spent the previous four years working at Altru Health Systems in Grand Forks as manager of Learning and Organizational Development, Excellence and Effectiveness.

She has 23 years of experience in the human resources development, organizational development, strategic leadership and communications fields. Fletcher has held various senior level positions in the airline and technology industry.

Fletcher earned a doctorate in organizational leadership and behavior from Northcentral University in Prescott. Arizona. She earned a master of science degree in Human Resource Management and Labor Relations from La Roche College and an undergraduate degree in business management from Point Park College, both in Pittsburgh.

Miriam Griffin
Member Advocate Specialist
Fargo, N.D.
Phone Number: 701-277-2362 (office)
Miriam.Griffin@bcbsnd.com

Miriam Griffin is accountable for the development of, and responsibilities in relation to, the Member Advocacy Program (MAP). She also maintains her own case load of members experiencing unique medical circumstances. Griffin joined BCBSND in February of 2009 as a member services telephone representative. In January of 2011, Griffin moved into her current role, where she created and developed the procedures and standards currently being used today in MAP. Griffin holds a bachelor's degree from NDSU, and has completed company offered courses in the Lean Six Sigma management strategy.

Pam Gulleson
Vice President, Public Affairs and Government Relations
Fargo, N.D.
Phone Number: 701-277-2990 (office)
Pam.Gulleson@bcbsnd.com

Pam Gulleson is vice president of Public Affairs at Blue Cross Blue Shield of North Dakota. She is responsible for public affairs at the enterprise level, including corporate advocacy strategy, managing external business and government relations at the local, state and federal level, and public relations efforts for the organization. Before joining BCBSND in 2012, she served in the North Dakota State House of Representatives for 16 years and as chief of staff for North Dakota Senator Byron Dorgan for nine years. Other positions held by Gulleson include director for allied health programs for the North Dakota State College of Science, licensed nutritionist and director for nutrition programming at the Sargent and Ransom County Public Health offices in North Dakota. A graduate of North Dakota State University, Fargo, Gulleson holds a bachelor's degree in nutrition and education. She also completed master's coursework in Public Policy Administration from the North Dakota University System and the Minnesota State Colleges and Universities system. Since 1980, Gulleson has been a partner in a North Dakota ranching and farming business with her husband and their three sons.

Lacey Hogness
Project Manager
Fargo, N.D.
Phone Number: 701-282-1325 (office)
Lacey.Hogness@bcbsnd.com

Lacey Hogness has been with BCBSND since 2008. She has been a project manager for 2 years. In this role, she manages assigned corporate projects and activities that must be addressed in order to complete project deliverables within established timeframes. In addition, she is the one of the primary employees responsible for the coordination and implementation of the state and public accounts. Prior to this position, she worked in claims and quality assurance. She has a bachelor degree in business administration from Minnesota State University of Moorhead.

Heather Horner
Member Education Consultant
Bismarck-Dickinson-Williston-Minot, N.D.
Phone Number: 701-255-5575 (office)
Heather.Horner@bcbsnd.com

Heather Horner has been the Member Education Consultant for the western half of the state since March of 2011. As a Member Education Consultant, Heather meets with employees and provides concise, easy-to-understand information about how insurance works, what drives costs and what they can do to reduce their health care costs. She can tailor a presentation by including the group's utilization statistics and information about how the group compares to statewide averages and peer groups. Before working at BCBSND she worked as the Wellness Director for Anytime Fitness.

Megan Smith Houn
Director of Government Relations
Bismarck, N.D.
Phone Number: 701-255-5548 (office)
Megan.Houn@bcbsnd.com

Megan Smith Houn is the director of Government Relations. She develops and maintains cooperative relationships with local, state, and federal officials, agencies and other health care related entities in both the private and public sectors on behalf of BCBSND. She communicates BCBSND's position on issues which impact the health care and reimbursement system and advocates on issues on behalf of BCBSND's members. A native of Bismarck, N.D., Smith Houn is a graduate of Baylor University in Waco, Texas, with a Bachelor of Arts degree in international relations. She has nearly fifteen years of experience in health promotion programs and working with policymakers. Before joining BCBSND, she served as the executive director of Tobacco Free North Dakota in Bismarck, where she led a successful campaign to pass the statewide initiated measure for smoke-free workplaces. Prior to that, she was the grassroots relationship manager for the American Cancer Society Cancer Action Network in Bismarck from 2005 to 2010.

Tim Huckle
President and CEO
Fargo, N.D.
Phone Number: 701-282-1539 (office)
Tim.Huckle@bcbsnd.com

Tim Huckle is President and Chief Executive Officer of Blue Cross Blue Shield of North Dakota (BCBSND). He directs and oversees all operations of the company, subsidiary and affiliated companies. He is also responsible to set corporate goals with the Board of Directors and develop corporate strategy. Huckle has more than 28 years of experience in the health care industry. Beginning as a work management specialist in 1986, he steadily moved up through the ranks at BCBSND, holding a number of key leadership positions within the company, including vice president, executive vice president and chief operating officer. His extensive management experience in a variety of departments, strong people skills, and ability to adapt to and embrace change, have served—and continue to serve—the company well. A graduate of the University of North Dakota, Grand Forks, Huckle holds a bachelor degree in business administration.

Zach Keeling
Director of Marketing Operations & Product Management
Fargo, N.D.
Phone Number: 701-282-1138 (office)
Zach.Keeling@bcbsnd.com

Zach Keeling is responsible for the development and implementation of BCBSND's full product portfolio. He and his team are also accountable for all operational activities within Sales and Marketing including marketing systems, market research, reporting and compensation. Keeling joined BCBSND in 2011. Prior to BCBSND, Keeling worked at Coventry Healthcare in Omaha, NE and MVP Healthcare in Schenectady, NY. Over the past 12 years, Keeling has held multiple leadership roles in Actuarial, Product Management, Sales and Marketing. A graduate of Doane College, Crete, NE, Keeling holds a bachelor degree in Mathematics and Economics.

Denise Kolpack
Chief of Staff and Senior Vice President of Communications and Public Affairs
Fargo, N.D.
Phone Number: 701-282-1485 (office)
Denise.Kolpack@noridian.com

Denise Kolpack is chief of staff and senior vice president of Communications and Public Affairs at Blue Cross Blue Shield of North Dakota. As chief of staff, she serves as liaison to executive staff across the enterprise, works with governing boards across the enterprise and serves as a strategic partner on all significant issues and programs. She also oversees the company's Creative Services and Document Services departments, which are responsible for advertising, public relations, internal communications, websites, video and audio, writing and editing, graphic design, and corporate print and mail services. Kolpack joined BCBSND in 2006 as assistant vice president of Corporate Communications and was promoted to vice president in 2007. Before joining BCBSND, she was donor recruitment director with United Blood Services, N.D., campaign manager for the Heidi Heitkamp for Governor campaign in North Dakota in 2000, and worked with the North Dakota Newspaper Association, the North Dakota Water Coalition and Kranzler-Kingsley, all in Bismarck. A graduate of the University of North Dakota, Grand Forks, Kolpack holds a bachelor of arts degree in marketing and a minor in political science.

Linda Merck
Senior Actuarial Analyst
Fargo, N.D.
Phone Number: 701-282-1137 (office)
Linda.Merck@bcbsnd.com

Linda Merck has worked in the Actuarial Department since she joined BCBSND 26 years ago. She assists with the NDPERS rate analysis, prepares the rate exhibit for the Administrative Service Agreement and assists in the implementation of the rate changes each July and January.

Mike Potts
Director, Employer Consulting and Wellness Services
Blue Cross Blue Shield of North Dakota
Fargo, N.D.
Phone Numbers: (701) 277-2065 (office)
Mike.Potts@bcbsnd.com

Mike Potts oversees Employer Consulting and Wellness Services at Blue Cross Blue Shield of North Dakota. He provides direction to a dedicated Consulting Team that includes a Pharmacist, Wellness Professionals, Large Group Consultants and Education Consultants. The team supports employer benefit plan goals by providing value-added analysis of various group data to identify improvement opportunities and recommendations. The recommendations include services and programs designed to optimize plan design, increase member engagement, improve health status and reduce long-term cost trends. Most recently, he has been educating group leaders on the impact of the Affordable Care Act. Mike has been with BCBSND for over 23 years. He brings a diversity of experiences to his current role. Prior to his current position, he spent 14 years overseeing the Provider Relations department at BCBSND. He has also held a number of positions in internal operations, marketing and with local provider organizations. Mike holds a Bachelor of Arts in Communications from the University of North Dakota and an MBA from the University of Mary.

Renay Rutter
Vice President of Enterprise Administration
Interim Vice President of Enterprise Strategic Services
Fargo, N.D.
Phone Number 701-297-1634 (office)
Renay.Rutter@bcbsnd.com

Renay Rutter was hired in May 2013 as VP of Enterprise Administration and presently also serves as Interim VP of Enterprise Strategic Services where she leads Enterprise Information Technology teams (350 employees) including IT strategy and solution delivery; security; helpdesk services; enterprise project management, budgeting and governance; and corporate facility services. Prior to joining Noridian, Renay's entrepreneurial background included 25 years of senior and C-leadership roles in high tech industries such as software, legal business process outsourcing and customer service. Renay holds a bachelor degree in Business Administration.

Kevin Schoenborn
NDPERS Account Executive
Fargo, N.D.
Phone Number: 701-282-1172 (office)
Kevin.Schoenborn@bcbsnd.com

Kevin Schoenborn has been employed by BCBSND since August 1986, gaining over 28 years of experience in the health care industry. Since August 2008, he has served as the account executive for the NDPERS account, coordinating activities internally at BCBSND and with NDPERS staff. Prior to his account management role, Schoenborn was the dedicated large group consultant for NDPERS for eight years. In addition, he spent several years as a research analyst assigned to the NDPERS account for reporting purposes.

Onalee Sellheim
State and Public Programs Manager
Fargo, N.D.
Phone Number: 701-282-1154 (office)
Onalee.Sellheim@bcbsnd.com

Onalee Sellheim has been employed by BCBSND for 28 years. During that time, she has served in a number of capacities in the Claims Department, including eight years in the NDPERS Service Unit as a customer service representative and senior coordinator. She has also spent nine years servicing the NDPERS account in the Marketing division's Consulting Service Unit. In addition Onalee has now taken on the FEP Account as well.

Brent Solseng
Pharmacy Manager-Marketing
Fargo, N.D.
Phone Number: 701-282-1911 (office)
Brent.Solseng@bcbsnd.com

Brent Solseng, Pharm. D. has over 20 years combined experience in retail, hospital and managed care pharmacy. He is the Pharmacy Manager in Marketing for Blue Cross Blue Shield North Dakota where he is responsible for key account reporting and employer group consulting. Brent joined the BCBSND Medical Management division in June 2004. His primary responsibilities were delivery of education and performance reporting to prescribers and pharmacists. Brent worked on design and delivery of evidence-based presentations, prescribing reports and programs promoting judicious use of cost-effective therapies to North Dakota health care providers in the role of Academic Detailer. Brent transitioned to his current position in Marketing in March of 2011. As the Manager of Pharmacy Consulting, his work is centered on employer group reporting, program implementation and support. Currently Brent describes utilization and program performance in light of drug industry trends to BCBSND’s largest employer clients.

Sheri Srnsky
Team Leader, NDPERS/FEP Service Unit
Fargo, N.D.
Phone Number: 701-277-2423 (office)
Sheri.Srnsky@bcbsnd.com

Sheri Srnsky has been employed with BCBSND since May of 2000. During that time, she has served in a number of capacities within the company. Sheri has served in the Claims Service Unit for nine years, including four years as a customer service representative, four years as a service unit coordinator, six months in Operation Support, and the last 7 months as a Team Leader (NDPERS/FEP).

Shelly Stalpes
Manager Claims Administration
Fargo, N.D.
Phone Number: 701-282-1476 (office)
Shelly.Stalpes@bcbsnd.com

Shelly Stalpes has been employed by BCBSND since 1985. During that time, she has served in a number of capacities in the Claims Department, including 17 years as team leader of Special Accounts (NDPERS and FEP). She became manager of the Claims Service Units in March 2008. As manager, Stalpes oversees six dedicated claims and customer service units, including the NDPERS Service Unit. She holds a bachelor degree in Business Administration from Minnesota State University Moorhead.

Mark Tschider
VP Customer Support & Claims Administration
Fargo, N.D.
Phone Number: 701-282-1980 (office)
Mark.Tschider@bcbsnd.com

Mark Tschider has been with BCBSND since 1989 and he has been the VP of Customer Support and Claims Administration for 4 years. Tschider spent his early years at BCBSND working with process and efficiency improvement projects in Claims Operations. From 1994 to 2010, he worked in BCBSND's Development and Business Strategies Division and was involved in implementing large corporate initiatives, including NDPERS project implementations. During 2009, he spent a year working with CoreLink during the startup of the company, he became heavily involved with BCBSND's Claims, Membership and Member Services systems and processes. In his current position, Tschider's responsibilities include providing oversight to the NDPERS Claims and Member Services department. He is responsible for continue improving the productivity, efficiency and quality of work BCBSND does in the high-performing areas of Claims and Customer Support.

Jacquelyn Walsh
Vice President of Clinical Excellence and Quality
Fargo, N.D.
Phone Number: 701-277-2786 (office)
Jacquelyn.Walsh@bcbsnd.com

Jacquelyn Walsh has been employed by BCBSND since December 2012. Prior to coming to the Plan, she worked in various nursing executive roles on the provider side for 36 years. Ms. Walsh provides leadership to management and clinical staff related to network provider relations, care management and quality to ensure the division’s efficient operation and to achieve desired outcomes in the work processes of medical and network policy development and implementation. She is also responsible for Plan accreditation and regulatory management with regard to the Plan’s commitment to a validated standard of excellence in the industry.

Jim Wynstra
Director of Actuarial
Fargo, N.D.
Phone Number: 701-277-2213 (office)
Jim.Wynstra@bcbsnd.com

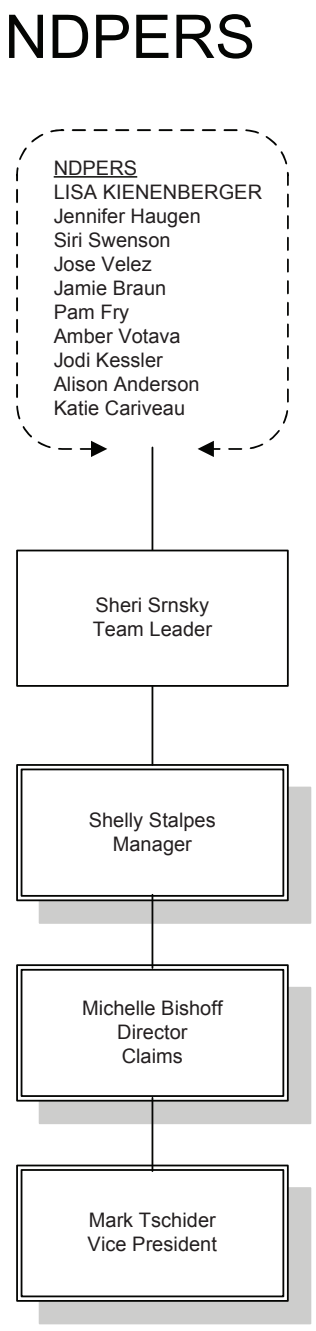
Jim Wynstra joined BCBSND in August 2009. He has worked in the actuarial field since 1991. Prior to working at BCBSND, he worked at HealthMarkets located near Fort Worth, Texas. Before that, he spent 15 years working at Trustmark Insurance Company in Lake Forest, III. He has experience with pricing, reserving, financial forecasting and loss ratio experience analysis. Both Trustmark and HealthMarkets do business in multiple states, so he has experience with various insurance regulation environments as they relate to small-group and individual health insurance. Wynstra reports to the VP of Actuarial & Membership and manages an actuarial staff of eight with responsibilities including reserving, pricing and renewal increases.

Attachment 5

Attachment 5

Attachment 5

NDPERS Service Unit



Internal Use Only

Attachment 6

Attachment 6

Samples of Standard Reporting

Sample Reports

Health Care Utilization Study

Claims Paid 01/01/2011 - 12/31/2013

Prepared By:

Management Information Services and Marketing Consulting Services Unit

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Blue Cross Blue Shield of North Dakota is an independent licensee of the Blue Cross & Blue Shield Association

Noridian Mutual Insurance Company

Substantial legislation (Health Insurance Portability and Accountability Act and Graham Leach Bliley) has taken effect regarding the protection of personal health information. Blue Cross Blue Shield of North Dakota has worked diligently in the past to protect the privacy of personal information, and we are continuing to do so. We have reviewed the different reports and studies that we make available to our groups with respect to this legislation, and have made changes where necessary.

To ensure we are providing the “minimum necessary” information, as outlined by this legislation, we are asking you to review the reports you receive from us. If there are specific reports you have not used, or possibly will not be using in the future, we can discontinue those specific reports. We understand that you need information to make informed decisions regarding the benefits and funding of your employer group health plan. We will continue to provide that information to the best of our ability.

Effective 7/1/2013, dental and vision products from The Dental Service Corporation of North Dakota (DSC) and North Dakota Vision Services, Incorporated (VSI) began transitioning to Blue Cross Blue Shield of North Dakota (BCBSND) on the group's anniversary. Dental and Vision reports may contain a blend of data from any combination of DSC, VSI and/or BCBSND dental and vision products.

Please contact one of the Marketing Consultants if you have any questions or concerns.

Kevin Schoenborn
Marketing Consulting Services
BlueCross BlueShield of North Dakota
Kevin.Schoenborn@bcbsnd.com
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Jodi Crouse
Marketing Consulting Services
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Cheryl Muir
Marketing Consulting Services
BlueCross BlueShield of North Dakota
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Gary Dauenhauer
Marketing Consulting Services
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Michelle Peterson
Marketing Consulting Services
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Michelle.Peterson@bcbsnd.com
Office/Fax: (701) 297-1589

Emily Mjolsness
Marketing Consulting Services
BlueCross BlueShield of North Dakota
Emily.Mjolsness@bcbsnd.com
Office/Fax: (701) 282-1518

Sample Reports

Period Summary

Claims Paid 01/01/2011 - 12/31/2013

	01/01/2011 - 12/31/2011	01/01/2012 - 12/31/2012	01/01/2013 - 12/31/2013	Percent of Change 2011 - 2012	2012 - 2013	2011 - 2013
Membership						
Average Number of Contracts	1,074.2	1,100.1	1,122.9	2%	2%	5%
Average Number of Members	2,026.2	2,037.0	2,085.4	1%	2%	3%
Institutional						
Claims	2,881	3,377	3,581			
Days	408	720	569			
Charges	$5,281,057	$8,071,870	$8,015,442			
Payments	$2,857,179	$3,993,019	$4,339,518			
Average Paid Per Contract Per Month	$221.65	$302.47	$322.05	36%	6%	45%
Average Paid Per Member Per Month	$117.51	$163.35	$173.41	39%	6%	48%
Unique Members*	1,018	1,087	1,151	7%	6%	13%
Professional (excluding prescriptions)						
Services	30,289	32,049	33,788			
Charges	$4,615,343	$5,450,923	$5,728,862			
Payments	$2,322,974	$2,799,273	$2,947,657			
Average Paid Per Contract Per Month	$180.21	$212.05	$218.75	18%	3%	21%
Average Paid Per Member Per Month	$95.54	$114.52	$117.79	20%	3%	23%
Unique Members*	1,990	1,967	2,095	-1%	7%	5%
Prescription Drug						
Non-Drug Card Prescriptions						
Prescriptions	714	661	738			
Charges	$98,041	$87,390	$86,129			
Payments	$38,286	$33,727	$27,482			
Average Paid Per Contract Per Month	$2.97	$2.55	$2.04	-14%	-20%	-31%
Average Paid Per Member Per Month	$1.57	$1.38	$1.10	-12%	-20%	-30%
Unique Members*	264	234	275	-11%	18%	4%
Drug Card Prescriptions						
Prescriptions	18,950	19,025	20,103			
Charges	$2,265,644	$3,082,085	$3,438,433			
Payments	$945,290	$1,120,886	$1,449,236			
Average Paid Per Contract Per Month	$78.44	$85.22	$107.65	9%	26%	37%
Average Paid Per Member Per Month	$41.37	$45.95	$57.94	11%	26%	40%
Unique Members*	1,592	1,608	1,668	1%	4%	5%
Totals						
Average Paid Per Contract Per Month	$483.28	$602.29	$650.49	25%	8%	35%
Average Paid Per Member Per Month	$256.00	$325.20	$350.24	27%	8%	37%
Unique Members*	2,092	2,070	2,198	-1%	6%	5%

** Unique number of members incurring claims/services.*

Sample Reports

Plan/Peer Comparison

Claims Paid 01/01/2013 - 12/31/2013

		Group	Plan*	Percent Over/Under Plan*	Peer**	Percent Over/Under Peer**
Institutional						
Inpatient	- Claims per 1000 Members	72.9	74.8	-3%	72.6	0%
	- Days per 1000 Members	269.0	286.9	-6%	257.1	5%
	- Avg Charge per Member per Month	$140.98	$146.94	-4%	$129.76	9%
	- Avg Paid per Member per Month	$90.40	$77.92	16%	$70.08	29%
Outpatient	- Claims per 1000 Members	1,639.5	1,359.8	21%	1,146.9	43%
	- Avg Charge per Member per Month	$178.46	$174.78	2%	$158.51	13%
	- Avg Paid per Member per Month	$82.33	$69.56	18%	$64.73	27%
Other***	- Claims per 1000 Members	4.8	17.5	-73%	14.4	-67%
	- Avg Charge per Member per Month	$0.86	$10.19	-92%	$6.87	-87%
	- Avg Paid per Member per Month	$0.68	$1.96	-65%	$2.04	-67%
Professional (excluding prescriptions)						
	- Services per 1000 Members	16,202.2	17,171.5	-6%	17,177.9	-6%
	- Avg Charge per Member per Month	$228.93	$235.77	-3%	$227.92	0%
	- Avg Paid per Member per Month	$117.79	$109.08	8%	$107.28	10%
Prescription Drug						
	Non-Drug Card Prescriptions					
	- Prescriptions per 1000 Members	353.9	490.0	-28%	400.8	-12%
	- Avg Charge per Member per Month	$3.44	$11.16	-69%	$10.18	-66%
	- Avg Paid per Member per Month	$1.10	$4.14	-74%	$3.55	-69%
	Drug Card Prescriptions					
	- Prescriptions per 1000 Members	9,644.5	8,436.2	14%	8,151.9	18%
	- Avg Charge per Member per Month	$137.47	$109.78	25%	$108.36	27%
	- Avg Paid per Member per Month	$57.94	$41.13	41%	$43.61	33%
Total Payments per Capita						
	- Institutional, Professional, and Prescription Drug	$350.24	$303.79	15%	$291.28	20%

** Includes all BCBSND members (in state and out of state).*

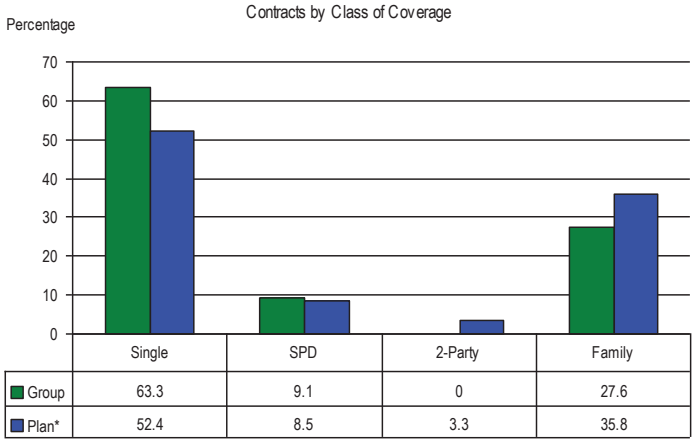
*** Service (Banks, Insurance Companies, etc.) peer group*

**** Contains SNF, HHA,Swing Beds, etc.*

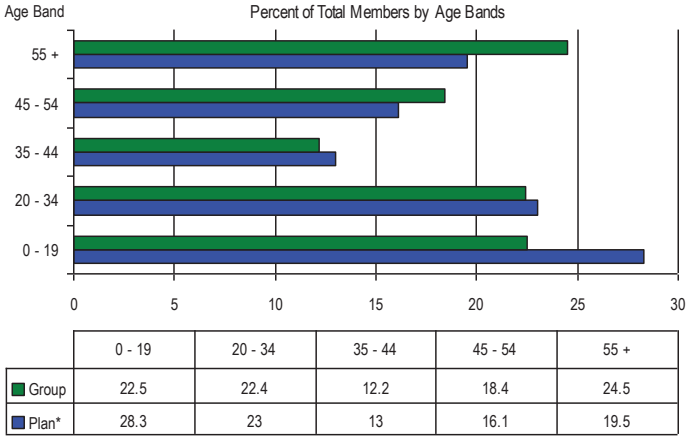
Sample Reports

Health PMPM Membership Demographics Graph

Claims Paid 01/01/2013 - 12/31/2013



	Single	SPD	2-Party	Family
Group	63.3	9.1	0	27.6
Plan*	52.4	8.5	3.3	35.8



	0 - 19	20 - 34	35 - 44	45 - 54	55 +
Group	22.5	22.4	12.2	18.4	24.5
Plan*	28.3	23	13	16.1	19.5

	Single		SPD		2-Party		Family		Total	
Average Contracts	711.2	63.3%	102.1	9.1%	0.0	0.0%	309.5	27.6%	1,122.9	100.0%
Average Members	711.2	34.1%	293.5	14.1%	0.0	0.0%	1,080.7	51.8%	2,085.4	100.0%

	Members	% of Total
Male	949.7	45.5%
Female	1,135.7	54.5%

	Members	% of Total
Subscriber	1,122.9	53.8%
Spouse	309.5	14.8%
Dependent	652.9	31.3%

	Group Paid Per Member Per Month	Plan* Paid Per Member Per Month
Age 0 to 19	$288.88	$191.29
Age 20 to 34	$190.28	$200.44
Age 35 to 44	$214.48	$273.99
Age 45 to 54	$413.68	$385.70
Age 55 & Over	$572.57	$546.79

** Includes all BCBSND members (in state and out of state).*

Sample Reports

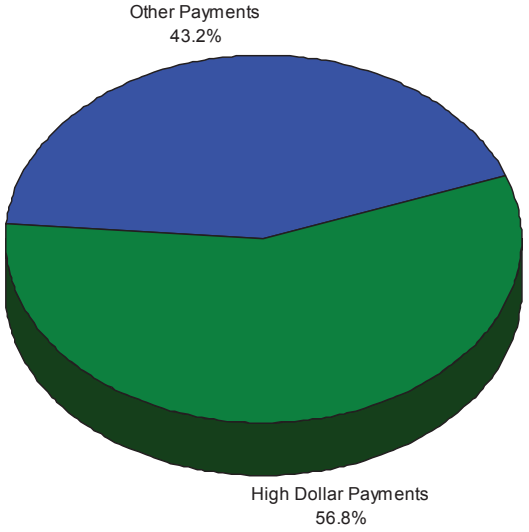
High Dollar Claims Summary

Claims Paid 01/01/2011 - 12/31/2013

	High Dollar Members	High Dollar Payments	Percent of Total Members	Percent of Total Payments	Plan* Average
01/01/2011 - 12/31/2011	70	$2,596,233	3.5%	42.1%	47.0%
01/01/2012 - 12/31/2012	79	$4,247,160	3.9%	53.4%	48.7%
01/01/2013 - 12/31/2013	88	$4,978,748	4.2%	56.8%	49.6%

Current Year

Total Payments



Accumulated IN, PR, and RX paid amounts which meet or exceed $20,000

** Includes all BCBSND members (in state and out of state).*

Sample Reports

BlueCard® Activity

Claims Paid 01/01/2013 - 12/31/2013

State	Institutional				Professional			
	Claims	Charges	Payments*	Discounts	Services	Charges	Payments	Discounts
ALABAMA	1	$678	$0	$540	2	$647	$498	$0
ARIZONA	9	$22,788	$11,098	$10,431	145	$38,839	$23,464	$13,076
CALIFORNIA	1	$2,552	$2,230	$0	58	$5,556	$1,403	$1,411
COLORADO	0	$0	$0	$0	23	$2,699	$806	$1,419
DISTRICT OF COLUMBIA	0	$0	$0	$0	5	$1,434	$263	$1,120
FLORIDA	2	$56,581	$43,792	$11,541	68	$17,312	$5,690	$10,163
GEORGIA	0	$0	$0	$0	1	$0	$0	$0
IDAHO	12	$59,820	$35,471	$21,577	106	$22,024	$9,326	$7,107
ILLINOIS	11	$9,013	$5,557	$2,070	129	$18,370	$10,528	$3,943
IOWA	0	$0	$0	$0	18	$968	$263	$371
KENTUCKY	0	$0	$0	$0	8	$928	$202	$185
MICHIGAN	2	$1,911	$1,248	$536	8	$1,334	$647	$458
MINNESOTA	85	$706,430	$506,134	$185,896	1,200	$493,997	$321,205	$140,462
MISSOURI	1	$391	$260	$20	4	$799	$237	$411
MONTANA	89	$86,266	$63,230	$9,488	294	$64,904	$24,254	$14,641
NEW JERSEY	0	$0	$0	$0	1	$500	$222	$253
NORTH CAROLINA	0	$0	$0	$0	2	$72	$19	$33
OHIO	0	$0	$0	$0	1	$149	$65	$43
OKLAHOMA	0	$0	$0	$0	2	$0	$0	$0
OREGON	4	$16,809	$14,747	$1,658	31	$8,184	$4,887	$2,206
PENNSYLVANIA	1	$1,074	$0	$105	9	$2,009	$180	$1,292
SOUTH CAROLINA	1	$202	$160	$0	0	$0	$0	$0
SOUTH DAKOTA	75	$285,232	$94,404	$175,628	951	$161,547	$54,231	$79,868
TEXAS	0	$0	$0	$0	6	$1,165	$1,071	$0
UTAH	2	$46,500	$29,419	$0	9	$675	$358	$84
VIRGINIA	1	$5,203	$5,203	$0	24	$2,197	$518	$1,577
WASHINGTON	20	$60,276	$29,481	$24,348	254	$38,809	$14,564	$15,240
WISCONSIN	24	$498,142	$439,334	$56,381	252	$163,602	$137,290	$24,114
WYOMING	0	$0	$0	$0	8	$1,299	$114	$865
Totals	**341**	**$1,859,869**	**$1,281,768**	**$500,219**	**3,619**	**$1,050,019**	**$612,304**	**$320,342**
Discounts as a percent of BlueCard charges				**27%**				**31%**
Grand Totals						**$2,909,889**	**$1,894,072**	**$820,560**
Discounts as a percent of BlueCard charges								**28%**

**Access fees are not included in the payments field*

Sample Reports

Institutional Type of Service

Claims Paid 01/01/2011 - 12/31/2013

Type of Service	Claims			Days			Charges			Payments		
	12/2011	12/2012	12/2013	12/2011	12/2012	12/2013	12/2011	12/2012	12/2013	12/2011	12/2012	12/2013
Inpatient												
Normal Newborns	14	25	22	27	39	40	$26,385	$67,527	$46,390	$17,067	$33,974	$28,747
Critical Newborns	1	2	4	30	11	88	$68,668	$25,657	$457,823	$63,472	$29,176	$428,720
Medical	39	37	34	121	220	160	$494,327	$825,363	$666,722	$368,481	$463,753	$373,446
Maternity	29	38	36	67	74	80	$236,272	$287,891	$265,875	$129,875	$170,558	$142,598
Surgical	50	61	53	122	208	179	$1,427,066	$2,500,103	$2,057,353	$841,231	$1,205,986	$1,273,667
Psychiatric	6	4	1	37	58	10	$51,763	$91,471	$26,906	$16,526	$72,145	$12,420
Chemical Dependency	0	4	2	0	9	4	$0	$26,351	$6,938	$0	$14,325	$2,601
Totals	**139**	**171**	**152**	**404**	**619**	**561**	**$2,304,481**	**$3,824,363**	**$3,528,006**	**$1,436,652**	**$1,989,916**	**$2,262,200**
Outpatient												
Maternity	86	173	135				$45,826	$56,213	$75,922	$24,515	$28,081	$39,788
Surgical	263	303	324				$1,251,530	$1,593,266	$1,672,491	$615,581	$695,101	$734,931
Psychiatric	27	17	16				$37,551	$43,631	$14,092	$26,552	$18,963	$4,601
Chemical Dependency	8	16	18				$30,098	$45,558	$95,918	$26,252	$36,923	$62,456
Medical	2,355	2,687	2,926				$1,609,659	$2,426,462	$2,607,397	$724,691	$1,150,995	$1,218,625
Totals	**2,739**	**3,196**	**3,419**				**$2,974,664**	**$4,165,129**	**$4,465,819**	**$1,417,592**	**$1,930,063**	**$2,060,400**
Other												
SNF & Swing Bed	2	3	2	4	101	8	$1,362	$71,459	$8,111	$2,425	$63,963	$8,152
Home Health Agency	1	7	5	0	0	0	$550	$10,919	$2,952	$510	$9,078	$2,390
Other *	0	0	3	0	0	0	$0	$0	$10,554	$0	$0	$6,377
Refunds	0	0	0	0	0	0	$0	$0	$0	$0	$0	$0
Totals	**3**	**10**	**10**	**4**	**101**	**8**	**$1,912**	**$82,378**	**$21,617**	**$2,935**	**$73,040**	**$16,919**
Grand Totals	**2,881**	**3,377**	**3,581**	**408**	**720**	**569**	**$5,281,057**	**$8,071,870**	**$8,015,442**	**$2,857,179**	**$3,993,019**	**$4,339,518**

** Includes dialysis, labs, diagnostic services, chemotherapy,etc*

Sample Reports

Institutional Type of Service - Membership Adjusted

Claims Paid 01/01/2011 - 12/31/2013

Type of Service	Per 1000 Members: Claims			Per 1000 Members: Days			Per Member Per Month: Charges			Per Member Per Month: Payments		
	12/2011	12/2012	12/2013	12/2011	12/2012	12/2013	12/2011	12/2012	12/2013	12/2011	12/2012	12/2013
Inpatient												
Normal Newborns	6.9	12.3	10.5	13.3	19.1	19.2	$1.09	$2.76	$1.85	$0.70	$1.39	$1.15
Critical Newborns	0.5	1.0	1.9	14.8	5.4	42.2	$2.82	$1.05	$18.29	$2.61	$1.19	$17.13
Medical	19.2	18.2	16.3	59.7	108.0	76.7	$20.33	$33.77	$26.64	$15.15	$18.97	$14.92
Maternity	14.3	18.7	17.3	33.1	36.3	38.4	$9.72	$11.78	$10.62	$5.34	$6.98	$5.70
Surgical	24.7	29.9	25.4	60.2	102.1	85.8	$58.69	$102.28	$82.21	$34.60	$49.34	$50.90
Psychiatric	3.0	2.0	0.5	18.3	28.5	4.8	$2.13	$3.74	$1.08	$0.68	$2.95	$0.50
Chemical Dependency	0.0	2.0	1.0	0.0	4.4	1.9	$0.00	$1.08	$0.28	$0.00	$0.59	$0.10
Totals	**68.6**	**83.9**	**72.9**	**199.4**	**303.9**	**269.0**	**$94.78**	**$156.45**	**$140.98**	**$59.09**	**$81.41**	**$90.40**
Outpatient												
Maternity	42.4	84.9	64.7				$1.88	$2.30	$3.03	$1.01	$1.15	$1.59
Surgical	129.8	148.7	155.4				$51.47	$65.18	$66.83	$25.32	$28.44	$29.37
Psychiatric	13.3	8.3	7.7				$1.54	$1.78	$0.56	$1.09	$0.78	$0.18
Chemical Dependency	3.9	7.9	8.6				$1.24	$1.86	$3.83	$1.08	$1.51	$2.50
Medical	1,162.3	1,319.1	1,403.1				$66.20	$99.27	$104.19	$29.81	$47.09	$48.70
Totals	**1,351.8**	**1,569.0**	**1,639.5**				**$122.34**	**$170.39**	**$178.46**	**$58.30**	**$78.96**	**$82.33**
Other												
SNF & Swing Bed	1.0	1.5	1.0	2.0	49.6	3.8	$0.06	$2.92	$0.32	$0.10	$2.62	$0.33
Home Health Agency	0.5	3.4	2.4	0.0	0.0	0.0	$0.02	$0.45	$0.12	$0.02	$0.37	$0.10
Other *	0.0	0.0	1.4	0.0	0.0	0.0	$0.00	$0.00	$0.42	$0.00	$0.00	$0.25
Refunds	0.0	0.0	0.0	0.0	0.0	0.0	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00
Totals	**1.5**	**4.9**	**4.8**	**2.0**	**49.6**	**3.8**	**$0.08**	**$3.37**	**$0.86**	**$0.12**	**$2.99**	**$0.68**
Grand Totals	**1,421.9**	**1,657.8**	**1,717.2**	**201.4**	**353.5**	**272.8**	**$217.20**	**$330.22**	**$320.30**	**$117.51**	**$163.35**	**$173.41**

** Includes dialysis, labs, diagnostic services, chemotherapy,etc*

Sample Reports

Institutional Type of Service - Plan/Peer Comparison

Claims Paid 01/01/2013 - 12/31/2013

	Per 1000 Members						Per Member Per Month					
	Claims			Days			Charges			Payments		
Type of Service	**Group**	**Plan***	**Peer****	**Group**	**Plan***	**Peer****	**Group**	**Plan***	**Peer****	**Group**	**Plan***	**Peer****
Inpatient												
Normal Newborns	10.5	11.0	12.9	19.2	24.0	27.5	$1.85	$2.90	$3.43	$1.15	$1.50	$1.72
Critical Newborns	1.9	1.4	1.2	42.2	22.9	19.5	$18.29	$7.22	$5.75	$17.13	$5.31	$4.53
Medical	16.3	22.2	18.0	76.7	93.6	75.9	$26.64	$38.91	$30.42	$14.92	$20.31	$15.97
Maternity	17.3	14.1	16.4	38.4	33.4	39.7	$10.62	$9.56	$11.77	$5.70	$4.87	$6.05
Surgical	25.4	21.3	19.4	85.8	82.0	69.8	$82.21	$83.54	$74.01	$50.90	$43.36	$39.49
Psychiatric	0.5	3.5	3.3	4.8	24.9	19.2	$1.08	$3.69	$3.12	$0.50	$1.97	$1.65
Chemical Dependency	1.0	1.4	1.4	1.9	6.2	5.5	$0.28	$1.12	$1.24	$0.10	$0.58	$0.67
Totals	**72.9**	**74.8**	**72.6**	**269.0**	**286.9**	**257.1**	**$140.98**	**$146.94**	**$129.76**	**$90.40**	**$77.92**	**$70.08**
Outpatient												
Maternity	64.7	49.3	53.6	0.0	0.0	0.0	$3.03	$2.54	$2.90	$1.59	$1.18	$1.25
Surgical	155.4	158.4	142.7	0.0	0.0	0.0	$66.83	$68.51	$65.74	$29.37	$28.33	$28.22
Psychiatric	7.7	19.0	16.4	0.0	0.0	0.0	$0.56	$2.99	$2.47	$0.18	$1.45	$1.10
Chemical Dependency	8.6	19.9	27.3	0.0	0.0	0.0	$3.83	$3.30	$3.81	$2.50	$1.80	$2.08
Medical	1,403.1	1,113.2	907.0	0.0	0.0	0.0	$104.19	$97.44	$83.59	$48.70	$36.80	$32.08
Totals	**1,639.5**	**1,359.8**	**1,146.9**				**$178.46**	**$174.78**	**$158.51**	**$82.33**	**$69.56**	**$64.73**
Other												
SNF & Swing Bed	1.0	5.3	3.1	3.8	69.0	31.6	$0.32	$3.91	$1.80	$0.33	$1.01	$0.68
Home Health Agency	2.4	4.7	4.9	0.0	0.0	0.0	$0.12	$0.63	$0.68	$0.10	$0.21	$0.38
Other ***	1.4	7.4	6.5	0.0	0.2	0.0	$0.42	$6.01	$4.81	$0.25	$1.00	$1.36
Refunds	0.0	0.0	0.0	0.0	0.0	0.0	$0.00	($0.36)	($0.41)	$0.00	($0.26)	($0.38)
Totals	**4.8**	**17.5**	**14.4**	**3.8**	**69.2**	**31.6**	**$0.86**	**$10.19**	**$6.87**	**$0.68**	**$1.96**	**$2.04**
Grand Totals	**1,717.2**	**1,452.0**	**1,233.9**	**272.8**	**356.0**	**288.7**	**$320.30**	**$331.90**	**$295.14**	**$173.41**	**$149.43**	**$136.85**

** Includes all BCBSND members (in state and out of state).*

*** Service Groups peer group*

**** Includes dialysis, labs, diagnostic services, chemotherapy,etc*

Sample Reports

Institutional Cost Savings - Summary

Claims Paid 01/01/2011 - 12/31/2013

Month	Total Charges	Total Payments	Total Savings	Deductible	Coinsurance	Copay	Medicare/ COB*	Med.Policy/ Sanctions	DRG Differential	Discounts	Non-Cov Services	Adjustment Differential
1st year	**$5,281,057**	**$2,857,179**	**$2,423,878**	**$185,534**	**$215,300**	**$33,233**	**$46,200**	**$24**	**$583,453**	**$1,439,220**	**$17,177**	**($96,264)**
Savings as a Percent of Total Charges			45.9%	3.5%	4.1%	0.6%	0.9%	0.0%	11.0%	27.3%	0.3%	-1.8%
2nd year	**$8,071,870**	**$3,993,019**	**$4,078,850**	**$176,011**	**$207,913**	**$46,777**	**$122,055**	**$396**	**$971,271**	**$2,604,734**	**$11,992**	**($62,299)**
Savings as a Percent of Total Charges			50.5%	2.2%	2.6%	0.6%	1.5%	0.0%	12.0%	32.3%	0.1%	-0.8%
Jan-2013	$791,417	$366,037	$425,380	$31,923	$19,078	$3,016	$73,219	$0	$33,136	$260,929	$6,138	($2,058)
Feb-2013	$520,826	$225,151	$295,676	$34,600	$23,035	$4,555	$1,180	$0	$95,900	$137,302	$702	($1,599)
Mar-2013	$596,502	$306,420	$290,082	$22,738	$17,172	$4,882	$1,821	$0	$85,662	$149,417	$9,825	($1,436)
Apr-2013	$818,134	$423,168	$394,966	$20,043	$23,526	$7,429	$12,295	$0	$128,969	$197,308	$9,981	($4,584)
May-2013	$459,394	$224,115	$235,280	$16,000	$11,207	$3,769	$15,773	$0	$11,064	$178,935	$593	($2,061)
Jun-2013	$353,275	$178,444	$174,830	$16,507	$12,536	$3,885	$4,083	$0	$18,013	$120,742	$1,672	($2,609)
Jul-2013	$669,253	$319,808	$349,445	$13,399	$17,537	$5,056	$11,680	$3,068	$34,836	$266,500	$3,100	($5,732)
Aug-2013	$793,262	$463,613	$329,649	$13,109	$21,612	$3,005	$838	$0	$116,754	$173,717	$2,043	($1,429)
Sep-2013	$799,884	$560,526	$239,357	$8,928	$6,185	$4,716	$6,085	$1,480	$33,785	$180,449	$1,335	($3,604)
Oct-2013	$678,447	$354,981	$323,466	$13,276	$18,117	$6,065	$1,808	$673	$48,854	$236,064	($816)	($574)
Nov-2013	$680,244	$414,963	$265,281	$10,623	$12,383	$2,754	$3,821	$35	$81,852	$154,123	$706	($1,016)
Dec-2013	$854,804	$502,291	$352,513	$8,457	$11,919	$3,395	$94,489	$0	$79,876	$156,207	$250	($2,080)
3rd year	**$8,015,442**	**$4,339,518**	**$3,675,924**	**$209,604**	**$194,306**	**$52,527**	**$227,091**	**$5,256**	**$768,700**	**$2,211,691**	**$35,530**	**($28,781)**
Savings as a Percent of Total Charges			45.9%	2.6%	2.4%	0.7%	2.8%	0.1%	9.6%	27.6%	0.4%	-0.4%

** Includes Workers' Comp., coordination of benefits with second and third parties, and No-Fault Auto.*
Negative amounts in the "Non-Covered" column denote refund and supplemental activity during the month.

Sample Reports

Professional Type of Service

Claims Paid 01/01/2011 - 12/31/2013

Type of Service	Services			Charges			Payments		
	12/2011	12/2012	12/2013	12/2011	12/2012	12/2013	12/2011	12/2012	12/2013
Surgery Inpatient	130	197	162	$264,455	$389,086	$405,456	$160,719	$199,860	$193,520
Surgery Outpatient	319	370	369	$314,430	$347,327	$415,899	$136,064	$156,314	$174,188
Surgery Office	886	765	821	$350,326	$301,404	$339,812	$154,737	$141,304	$156,483
Anesthesia	443	544	503	$293,631	$375,173	$375,693	$146,150	$179,894	$180,914
Assistant Fee	89	97	92	$66,289	$116,617	$62,369	$23,289	$22,262	$27,542
Ancillary Rooms	114	97	102	$240,223	$223,569	$186,644	$124,529	$120,179	$91,614
Inpatient Visits	386	596	572	$82,361	$117,822	$200,035	$61,111	$80,508	$170,325
Hosp Outpat/ER Visit	451	542	577	$84,043	$108,959	$124,389	$37,824	$50,791	$59,378
Office Calls	5,794	5,853	6,280	$792,869	$868,252	$978,263	$403,981	$455,266	$519,901
Maternity Care	214	376	380	$109,429	$177,173	$147,406	$69,025	$105,010	$96,502
Optical Exam/Supply	586	510	538	$60,852	$57,081	$59,593	$26,800	$26,708	$24,418
Chem/Psych Inpat	37	84	11	$6,142	$15,318	$2,166	$2,680	$9,306	$1,236
Chem/Psych Outpat	36	23	13	$6,385	$4,321	$3,592	$3,174	$2,616	$1,838
Chem/Psych Office	911	900	829	$132,610	$143,463	$131,892	$73,257	$81,332	$77,117
Therapies	4,416	4,694	5,149	$274,571	$243,793	$279,385	$97,007	$116,062	$137,875
EKG, EEG, Etc.	704	825	1,085	$118,876	$148,442	$212,132	$42,705	$67,366	$93,779
Diagnostic Lab	6,377	6,594	5,959	$446,723	$507,301	$500,665	$210,769	$241,316	$225,572
Diagnostic X-Ray	3,239	3,364	3,625	$462,009	$459,539	$529,716	$231,266	$228,282	$258,249
Therapeutic Rad	99	165	53	$86,790	$160,134	$42,146	$55,083	$89,325	$24,598
Chemotherapy	66	127	202	$112,675	$185,777	$213,211	$67,262	$108,717	$104,773
Prescription Drugs	714	661	738	$98,041	$87,390	$86,129	$38,286	$33,727	$27,482
Injectables	2,562	2,471	3,271	$98,390	$120,138	$162,975	$72,434	$78,103	$112,579
Home Infusion	15	8	33	$7,066	$13,821	$26,877	$2,350	$5,126	$13,575
Supplies	147	175	308	$17,187	$15,908	$31,417	$11,187	$10,471	$19,561
HME	515	723	764	$101,171	$163,627	$136,165	$59,474	$100,756	$76,503
Special Svcs/Tests*	1,753	1,949	2,090	$85,841	$186,876	$160,966	$50,098	$122,400	$105,618
Totals	**31,003**	**32,710**	**34,526**	**$4,713,384**	**$5,538,313**	**$5,814,991**	**$2,361,260**	**$2,833,000**	**$2,975,139**

** Includes embedded dental, ambulance, blood components, venipuncture, specimen handling, allergy testing, the MediQHome program, etc.*

Sample Reports

Professional Type of Service - Membership Adjusted

Claims Paid 01/01/2011 - 12/31/2013

Type of Service	Per 1000 Members — Services			Per Member Per Month — Charges			Per Member Per Month — Payments		
	12/2011	12/2012	12/2013	12/2011	12/2012	12/2013	12/2011	12/2012	12/2013
Surgery Inpatient	64.2	96.7	77.7	$10.88	$15.92	$16.20	$6.61	$8.18	$7.73
Surgery Outpatient	157.4	181.6	176.9	$12.93	$14.21	$16.62	$5.60	$6.39	$6.96
Surgery Office	437.3	375.6	393.7	$14.41	$12.33	$13.58	$6.36	$5.78	$6.25
Anesthesia	218.6	267.1	241.2	$12.08	$15.35	$15.01	$6.01	$7.36	$7.23
Assistant Fee	43.9	47.6	44.1	$2.73	$4.77	$2.49	$0.96	$0.91	$1.10
Ancillary Rooms	56.3	47.6	48.9	$9.88	$9.15	$7.46	$5.12	$4.92	$3.66
Inpatient Visits	190.5	292.6	274.3	$3.39	$4.82	$7.99	$2.51	$3.29	$6.81
Hosp Outpat/ER Visit	222.6	266.1	276.7	$3.46	$4.46	$4.97	$1.56	$2.08	$2.37
Office Calls	2,859.5	2,873.3	3,011.4	$32.61	$35.52	$39.09	$16.61	$18.62	$20.78
Maternity Care	105.6	184.6	182.2	$4.50	$7.25	$5.89	$2.84	$4.30	$3.86
Optical Exam/Supply	289.2	250.4	258.0	$2.50	$2.34	$2.38	$1.10	$1.09	$0.98
Chem/Psych Inpat	18.3	41.2	5.3	$0.25	$0.63	$0.09	$0.11	$0.38	$0.05
Chem/Psych Outpat	17.8	11.3	6.2	$0.26	$0.18	$0.14	$0.13	$0.11	$0.07
Chem/Psych Office	449.6	441.8	397.5	$5.45	$5.87	$5.27	$3.01	$3.33	$3.08
Therapies	2,179.4	2,304.4	2,469.1	$11.29	$9.97	$11.16	$3.99	$4.75	$5.51
EKG, EEG, Etc.	347.4	405.0	520.3	$4.89	$6.07	$8.48	$1.76	$2.76	$3.75
Diagnostic Lab	3,147.3	3,237.1	2,857.5	$18.37	$20.75	$20.01	$8.67	$9.87	$9.01
Diagnostic X-Ray	1,598.6	1,651.4	1,738.3	$19.00	$18.80	$21.17	$9.51	$9.34	$10.32
Therapeutic Rad	48.9	81.0	25.4	$3.57	$6.55	$1.68	$2.27	$3.65	$0.98
Chemotherapy	32.6	62.3	96.9	$4.63	$7.60	$8.52	$2.77	$4.45	$4.19
Prescription Drugs	352.4	324.5	353.9	$4.03	$3.58	$3.44	$1.57	$1.38	$1.10
Injectables	1,264.4	1,213.1	1,568.5	$4.05	$4.91	$6.51	$2.98	$3.20	$4.50
Home Infusion	7.4	3.9	15.8	$0.29	$0.57	$1.07	$0.10	$0.21	$0.54
Supplies	72.5	85.9	147.7	$0.71	$0.65	$1.26	$0.46	$0.43	$0.78
HME	254.2	354.9	366.4	$4.16	$6.69	$5.44	$2.45	$4.12	$3.06
Special Svcs/Tests*	865.2	956.8	1,002.2	$3.53	$7.65	$6.43	$2.06	$5.01	$4.22
Totals	**15,301.1**	**16,057.9**	**16,556.1**	**$193.85**	**$226.57**	**$232.37**	**$97.11**	**$115.90**	**$118.89**

** Includes embedded dental, ambulance, blood components, venipuncture, specimen handling, allergy testing, the MediQHome program, etc.*

Sample Reports

Professional Type of Service - Plan/Peer Comparison

Claims Paid 01/01/2013 - 12/31/2013

	Per 1000 Members			Per Member Per Month					
	Services			Charges			Payments		
Type of Service	**Group**	**Plan****	**Peer*****	**Group**	**Plan****	**Peer*****	**Group**	**Plan****	**Peer*****
Surgery Inpatient	77.7	66.9	61.8	$16.20	$10.98	$10.21	$7.73	$5.35	$5.08
Surgery Outpatient	176.9	183.3	167.4	$16.62	$15.89	$15.58	$6.96	$5.93	$5.91
Surgery Office	393.7	381.6	361.8	$13.58	$13.82	$12.57	$6.25	$5.00	$4.67
Anesthesia	241.2	223.4	208.9	$15.01	$13.15	$12.72	$7.23	$5.76	$5.72
Assistant Fee	44.1	32.2	29.2	$2.49	$3.06	$2.74	$1.10	$0.68	$0.64
Ancillary Rooms	48.9	39.5	32.0	$7.46	$6.76	$5.44	$3.66	$3.09	$2.64
Inpatient Visits	274.3	296.2	257.7	$7.99	$5.97	$5.20	$6.81	$3.64	$3.24
Hosp Outpat/ER Visit	276.7	369.9	296.3	$4.97	$6.37	$5.46	$2.37	$2.44	$2.14
Office Calls	3,011.4	2,991.3	2,988.0	$39.09	$40.99	$41.45	$20.78	$22.66	$23.00
Maternity Care	182.2	131.2	158.7	$5.89	$4.81	$5.63	$3.86	$3.05	$3.56
Optical Exam/Supply	258.0	278.6	277.9	$2.38	$2.51	$2.39	$0.98	$0.99	$1.00
Chem/Psych Inpat	5.3	33.7	32.0	$0.09	$0.52	$0.51	$0.05	$0.29	$0.28
Chem/Psych Outpat	6.2	27.1	26.2	$0.14	$0.48	$0.47	$0.07	$0.21	$0.20
Chem/Psych Office	397.5	574.2	577.3	$5.27	$7.87	$7.94	$3.08	$4.38	$4.35
Therapies	2,469.1	2,621.8	2,795.2	$11.16	$12.14	$13.24	$5.51	$5.86	$6.23
EKG, EEG, Etc.	520.3	539.1	560.9	$8.48	$7.07	$6.86	$3.75	$2.52	$2.54
Diagnostic Lab	2,857.5	3,532.4	3,623.9	$20.01	$23.65	$24.63	$9.01	$8.33	$8.63
Diagnostic X-Ray	1,738.3	1,496.3	1,455.6	$21.17	$19.61	$19.16	$10.32	$8.19	$8.22
Therapeutic Rad	25.4	49.3	45.8	$1.68	$3.61	$3.18	$0.98	$2.01	$2.16
Chemotherapy	96.9	73.4	68.9	$8.52	$8.68	$7.24	$4.19	$4.14	$3.62
Prescription Drugs	353.9	490.0	400.8	$3.44	$11.16	$10.18	$1.10	$4.14	$3.55
Injectables	1,568.5	1,531.4	1,606.1	$6.51	$7.66	$8.48	$4.50	$4.87	$5.45
Home Infusion	15.8	32.5	25.2	$1.07	$4.29	$2.29	$0.54	$1.40	$0.83
Supplies	147.7	122.7	98.8	$1.26	$1.21	$1.10	$0.78	$0.53	$0.55
HME	366.4	332.3	302.7	$5.44	$5.66	$5.10	$3.06	$2.82	$2.53
Special Svcs/Tests*	1,002.2	1,211.1	1,119.4	$6.43	$9.02	$8.35	$4.22	$4.95	$4.07
Totals	**16,556.1**	**17,661.4**	**17,578.7**	**$232.37**	**$246.93**	**$238.11**	**$118.89**	**$113.23**	**$110.82**

** Includes embedded dental, ambulance, blood components, venipuncture, specimen handling, allergy testing, the MediQHome program, etc.*

*** Includes all BCBSND members (in state and out of state).*

**** Service Groups peer group*

Sample Reports

Professional Cost Savings Summary

Claims Paid 01/01/2011 - 12/31/2013

Month	Total Charges	Total Payments	Total Savings	Deductible	Coinsurance	Copay	Medicare/ COB*	Med. Policy/ Sanctions	Discounts	Non-Cov Services	Adjustment Differential
1st year	**$4,713,384**	**$2,361,260**	**$2,352,124**	**$331,086**	**$241,771**	**$163,402**	**$45,306**	**$2,446**	**$1,492,444**	**$80,946**	**($5,276)**
Savings as a Percent of Total Charges			49.9%	7.0%	5.1%	3.5%	1.0%	0.1%	31.7%	1.7%	-0.1%
2nd year	**$5,538,313**	**$2,833,000**	**$2,705,313**	**$326,657**	**$240,656**	**$173,372**	**$69,406**	**$3,823**	**$1,778,617**	**$116,690**	**($3,909)**
Savings as a Percent of Total Charges			48.8%	5.9%	4.3%	3.1%	1.3%	0.1%	32.1%	2.1%	-0.1%
Jan-2013	$519,095	$260,085	$259,010	$38,429	$25,292	$16,625	$4,291	$1,209	$161,310	$12,152	($299)
Feb-2013	$440,343	$191,498	$248,846	$46,224	$20,360	$13,412	$14,984	$0	$149,656	$7,164	($2,954)
Mar-2013	$410,346	$212,670	$197,676	$34,553	$21,177	$13,608	$1,803	$174	$123,642	$2,910	($190)
Apr-2013	$578,949	$264,680	$314,269	$40,095	$26,105	$18,449	$2,083	$213	$220,608	$7,271	($555)
May-2013	$460,918	$257,962	$202,956	$29,263	$19,951	$14,261	$2,896	$0	$128,737	$8,468	($620)
Jun-2013	$390,387	$193,237	$197,150	$28,429	$14,250	$14,119	$3,486	$436	$129,291	$7,282	($143)
Jul-2013	$484,573	$228,580	$255,993	$34,873	$22,425	$17,033	$5,528	$1,409	$161,474	$13,409	($157)
Aug-2013	$455,178	$227,551	$227,627	$24,899	$20,129	$16,222	$2,638	$3,033	$145,246	$15,584	($124)
Sep-2013	$435,740	$251,206	$184,534	$17,760	$17,776	$13,411	$3,597	($2,222)	$124,939	$9,833	($560)
Oct-2013	$545,730	$278,283	$267,447	$24,315	$26,627	$17,654	$14,293	($109)	$177,891	$7,604	($828)
Nov-2013	$468,131	$260,836	$207,295	$23,311	$14,998	$15,619	$10,132	$294	$140,542	$2,721	($322)
Dec-2013	$625,599	$348,551	$277,048	$22,439	$19,775	$17,808	$13,716	$936	$198,297	$4,662	($586)
3rd year	**$5,814,991**	**$2,975,139**	**$2,839,852**	**$364,590**	**$248,865**	**$188,220**	**$79,446**	**$5,373**	**$1,861,634**	**$99,061**	**($7,337)**
Savings as a Percent of Total Charges			48.8%	6.3%	4.3%	3.2%	1.4%	0.1%	32.0%	1.7%	-0.1%

** Includes Workers' Comp., coordination of benefits with second and third parties, and No-Fault Auto.*
Negative amounts in the "Non-Covered" column denote refund and supplemental activity during the month.

Sample Reports

Prescription Drug Type of Drug

Claims Paid 01/01/2011 - 12/31/2013

Type of Drug	Prescriptions			Charges			Payments		
	12/2011	12/2012	12/2013	12/2011	12/2012	12/2013	12/2011	12/2012	12/2013
Antihistamine Drugs	108	66	63	$4,731	$2,031	$2,550	$326	$234	$261
Anti-Infective Agents	2,481	2,248	2,303	$146,329	$128,624	$162,049	$37,921	$24,883	$35,337
Antineoplastic Agents	77	114	141	$82,814	$231,978	$286,952	$62,390	$106,151	$167,386
Autonomic Drugs	790	851	866	$101,018	$125,269	$129,946	$48,150	$54,280	$55,897
Blood Formation & Coag	202	198	254	$45,549	$43,827	$43,022	$26,729	$19,046	$11,359
Cardiovascular Drugs	4,220	4,302	4,415	$461,111	$505,778	$552,270	$141,237	$123,618	$117,579
Centrl Nerv Sys Agents	4,488	4,349	4,735	$458,028	$524,516	$556,014	$131,518	$130,014	$123,892
Diagnostic Agents	178	218	175	$31,448	$40,846	$36,534	$21,079	$27,027	$24,714
Electrolytic, Caloric	704	798	802	$21,467	$26,908	$26,517	$3,689	$5,301	$5,435
Respiratory Agents	380	340	370	$41,285	$427,753	$396,828	$21,789	$173,156	$314,022
Eye & ENT Preparations	809	794	767	$75,510	$71,066	$74,670	$27,369	$24,918	$25,250
Gastrointestinal Drugs	695	739	872	$137,508	$156,568	$215,698	$45,358	$50,752	$79,488
Hormones, Synth Subst	2,624	2,797	3,046	$300,767	$480,419	$430,930	$140,087	$182,831	$199,472
Skin/Mucous Mem Prep	515	555	607	$55,893	$57,791	$72,969	$24,978	$22,502	$28,290
Smooth Muscle Relaxant	63	63	69	$14,461	$18,288	$14,686	$8,017	$10,108	$8,047
Vitamins	113	113	135	$3,699	$5,973	$5,702	$524	$1,313	$976
Unclass Therapeutic	294	266	288	$274,248	$219,568	$420,534	$201,177	$161,920	$248,778
Devices	110	156	128	$3,641	$9,129	$4,482	$2,305	$2,306	$2,686
Other*	99	58	67	$6,137	$5,754	$6,078	$647	$524	$365
Totals	**18,950**	**19,025**	**20,103**	**$2,265,644**	**$3,082,085**	**$3,438,433**	**$945,290**	**$1,120,886**	**$1,449,236**

** Includes blood derivatives, contraceptives, local anesthetics, and serums, etc.*

Sample Reports

Prescription Drug Generic/Brand Name Comparison

Claims Paid 01/01/2011 - 12/31/2013

	01/01/2011 - 12/31/2011	01/01/2012 - 12/31/2012	01/01/2013 - 12/31/2013	Percent of Change 2011 - 2012	2012 - 2013	2011 - 2013
Brand Name						
Prescriptions	5,094	4,377	3,868	-14%	-12%	-24%
Charges	$1,348,269	$1,933,315	$1,986,987	43%	3%	47%
Payments	$827,895	$981,724	$1,249,274	19%	27%	51%
Average Paid Per Prescription	$162.52	$224.29	$322.98	38%	44%	99%
Average Paid Per Contract Per Month	$68.70	$74.64	$92.79	9%	24%	35%
Average Paid Per Member Per Month	$36.23	$40.24	$49.95	11%	24%	38%
Generic						
Prescriptions	13,856	14,648	16,235	6%	11%	17%
Charges	$917,375	$1,148,770	$1,451,447	25%	26%	58%
Payments	$117,395	$139,163	$199,962	19%	44%	70%
Average Paid Per Prescription	$8.47	$9.50	$12.32	12%	30%	45%
Average Paid Per Contract Per Month	$9.74	$10.58	$14.85	9%	40%	52%
Average Paid Per Member Per Month	$5.14	$5.70	$7.99	11%	40%	56%
Generic Utilization Rate	73%	77%	81%	5%	5%	10%
Plan* Generic Utilization Rate	73%	77%	80%	5%	4%	10%

** Includes all BCBSND members (in state and out of state).*

Sample Reports

Prescription Drug Formulary Comparison

Claims Paid 01/01/2013 - 12/31/2013

Formulary Drugs	Brand Name	Generic	Total
Prescriptions	2,625	15,530	18,155
Charges	$1,591,700	$1,399,427	$2,991,126
Allowed Amount	$1,339,570	$436,704	$1,776,274
Payments	$1,172,534	$194,948	$1,367,482
Average Paid Per Prescription	$446.68	$12.55	$75.32
Non-Formulary Drugs			
Prescriptions	1,151	588	1,739
Charges	$237,640	$49,080	$286,720
Allowed Amount	$186,355	$15,914	$202,270
Payments	$76,739	$5,015	$81,754
Average Paid Per Prescription	$66.67	$8.53	$47.01
Non-Payable Drugs			
Prescriptions	92	117	209
Charges	$157,647	$2,940	$160,587
Allowed Amount	$0	$0	$0
Payments	$0	$0	$0
Average Paid Per Prescription	$0.00	$0.00	$0.00
Total			
Prescriptions	3,868	16,235	20,103
Charges	$1,986,987	$1,451,447	$3,438,433
Allowed Amount	$1,525,925	$452,619	$1,978,543
Payments	$1,249,274	$199,962	$1,449,236
Average Paid Per Prescription	$322.98	$12.32	$72.09
Formulary Usage Rate			90%
Generic Utilization Rate			81%
Plan* Generic Utilization Rate			80%

** Includes all BCBSND members (in state and out of state).*

Sample Reports

Prescription Drug Breakdown by Drug - Top 30 Sorted by Payments

Claims Paid 01/01/2013 - 12/31/2013

Drug Description	Type	Prescriptions	Percent of Total	Payments	Percent of Total	Average Paid Per Prescription
KALYDECO	BRAND	12	0.1%	$311,194	21.5%	$25,932.84
REBIF	BRAND	24	0.1%	$102,257	7.1%	$4,260.72
HUMIRA PEN	BRAND	30	0.1%	$95,672	6.6%	$3,189.07
GLEEVEC	BRAND	12	0.1%	$79,751	5.5%	$6,645.92
TYKERB	BRAND	12	0.1%	$45,942	3.2%	$3,828.49
CRESTOR	BRAND	221	1.1%	$39,429	2.7%	$178.41
COPAXONE	BRAND	16	0.1%	$25,211	1.7%	$1,575.71
ADVAIR DISKUS	BRAND	115	0.6%	$22,041	1.5%	$191.66
LIALDA	BRAND	33	0.2%	$20,853	1.4%	$631.90
NOVOLOG FLEXPEN	BRAND	54	0.3%	$20,243	1.4%	$374.87
LANTUS SOLOSTAR	BRAND	74	0.4%	$19,630	1.4%	$265.27
LEVEMIR FLEXPEN	BRAND	79	0.4%	$19,553	1.3%	$247.51
AMPHETAMINE/DEXTROAMPHETA	GENERIC	164	0.8%	$18,633	1.3%	$113.62
REVLIMID	BRAND	9	0.0%	$17,160	1.2%	$1,906.61
TEMODAR	BRAND	5	0.0%	$15,944	1.1%	$3,188.77
CREON	BRAND	17	0.1%	$15,927	1.1%	$936.90
CELEBREX	BRAND	72	0.4%	$14,869	1.0%	$206.52
HUMALOG KWIKPEN	BRAND	37	0.2%	$12,368	0.9%	$334.28
BUDESONIDE	GENERIC	30	0.1%	$11,716	0.8%	$390.54
DIOVAN	BRAND	72	0.4%	$11,477	0.8%	$159.40
JANUVIA	BRAND	39	0.2%	$11,429	0.8%	$293.04
VANCOMYCIN HCL	GENERIC	6	0.0%	$11,399	0.8%	$1,899.80
BYDUREON	BRAND	37	0.2%	$11,201	0.8%	$302.73
PENTASA	BRAND	12	0.1%	$10,815	0.7%	$901.21
ZENPEP	BRAND	7	0.0%	$10,606	0.7%	$1,515.19
VYVANSE	BRAND	62	0.3%	$10,269	0.7%	$165.64
LANTUS	BRAND	42	0.2%	$9,939	0.7%	$236.65
CYMBALTA	BRAND	88	0.4%	$9,592	0.7%	$109.00
PREMARIN	BRAND	73	0.4%	$9,434	0.7%	$129.23
NEXIUM	BRAND	42	0.2%	$9,264	0.6%	$220.58
OTHER		18,607	92.6%	$425,416	29.4%	$22.86
Totals		**20,103**	**100.0%**	**$1,449,236**	**100.0%**	**$72.09**

Unlisted Drugs/Supplies can be new drugs or supplies most commonly used for diabetes and allergies.

Sample Reports

Prescription Drug Cost Savings - Summary

Claims Paid 01/01/2011 - 12/31/2013

Month	Total Charges	Total Payments	Total Savings	Deductible	Coinsurance	Copay	Medicare/ COB*	Med. Policy/ Sanctions	Discounts	Non-Cov Services	Adjustment Differential
1st year	**$2,265,644**	**$945,290**	**$1,320,353**	**$81,538**	**$141,958**	**$226,463**	**$0**	**$74,382**	**$755,383**	**$40,267**	**$361**
Savings as a Percent of Total Charges			58.3%	3.6%	6.3%	10.0%	0.0%	3.3%	33.3%	1.8%	0.0%
2nd year	**$3,082,085**	**$1,120,886**	**$1,961,198**	**$86,519**	**$138,068**	**$226,564**	**$0**	**$86,935**	**$965,521**	**$457,579**	**$12**
Savings as a Percent of Total Charges			63.6%	2.8%	4.5%	7.4%	0.0%	2.8%	31.3%	14.8%	0.0%
Jan-2013	$241,220	$96,377	$144,844	$9,626	$15,857	$18,812	$0	$5,089	$93,651	$1,808	$0
Feb-2013	$238,999	$89,860	$149,139	$11,187	$9,852	$17,717	$0	$4,742	$88,622	$17,020	$0
Mar-2013	$306,815	$127,780	$179,034	$12,126	$14,063	$23,506	$0	$7,999	$118,388	$2,953	$0
Apr-2013	$242,126	$104,635	$137,491	$6,344	$10,231	$17,873	$0	$6,307	$92,840	$3,895	$0
May-2013	$243,078	$106,001	$137,076	$7,733	$9,123	$16,882	$0	$5,705	$94,893	$2,741	$0
Jun-2013	$325,483	$126,987	$198,496	$9,677	$13,205	$20,618	$0	$7,221	$112,333	$35,441	$0
Jul-2013	$303,199	$119,037	$184,162	$6,542	$10,158	$18,599	$0	$6,373	$90,737	$51,753	$0
Aug-2013	$381,256	$147,572	$233,683	$5,431	$13,691	$20,897	$0	$4,772	$121,144	$67,748	$0
Sep-2013	$267,217	$117,108	$150,109	$3,005	$9,396	$17,654	$0	$5,765	$101,700	$12,582	$7
Oct-2013	$285,214	$127,551	$157,663	$5,941	$10,728	$18,405	$0	$6,370	$110,236	$5,983	$0
Nov-2013	$306,827	$148,539	$158,287	$4,875	$11,643	$20,403	$0	$6,272	$111,684	$3,411	$0
Dec-2013	$297,000	$137,788	$159,213	$3,799	$9,889	$19,873	$0	$7,331	$115,852	$2,470	$0
3rd year	**$3,438,433**	**$1,449,236**	**$1,989,197**	**$86,286**	**$137,838**	**$231,238**	**$0**	**$73,945**	**$1,252,079**	**$207,804**	**$7**
Savings as a Percent of Total Charges			57.9%	2.5%	4.0%	6.7%	0.0%	2.2%	36.4%	6.0%	0.0%

** Includes Workers' Comp., coordination of benefits with second and third parties, and No-Fault Auto.*
Negative amounts in the "Non-Covered" column denote refund and supplemental activity during the month.

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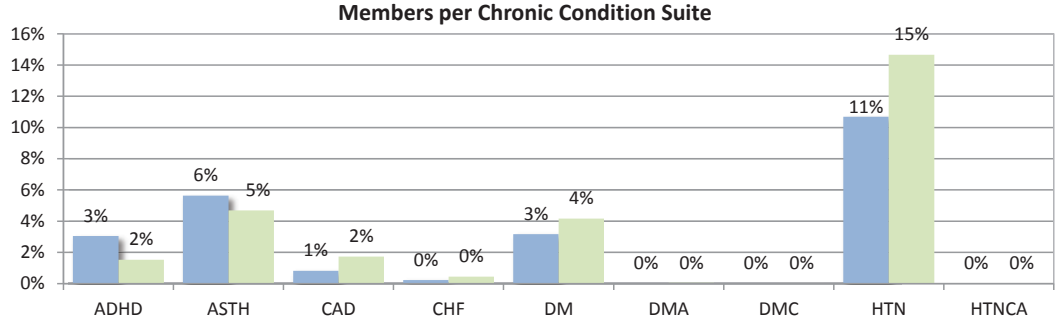
Group: Sample Group
Data Refresh Date: 4/16/2014

Total Membership:	3,786	**Members in a Medical Home:**	851
ND Membership:	1,098	**Members in a Medical Home with a Targeted Chronic Condition:**	170

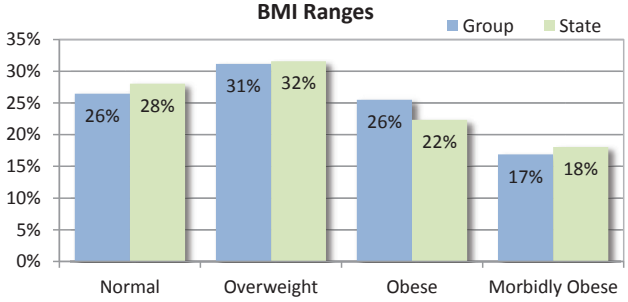
Note: Members may belong to more than one suite in the graphs below.

Members per Chronic Condition Suite

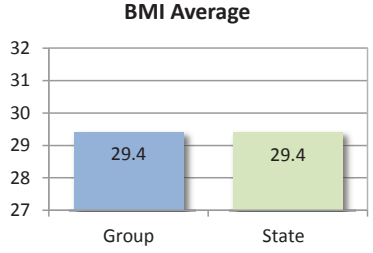


	ADHD	ASTH	CAD	CHF	DM	DMA	DMC	HTN	HTNCA
Sample Group Member Count	26	48	7	2	27	0	0	91	0

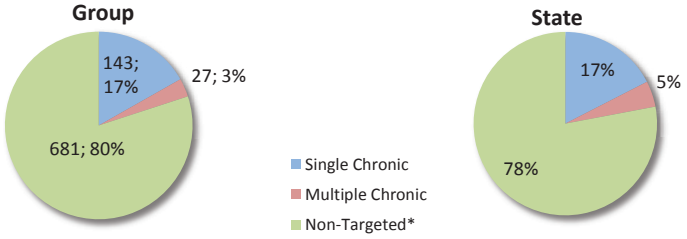
BMI Ranges



BMI Average



Members by Number of Conditions



** The "Non-Targeted" category designates members who do not have one or more of the six MediQHome targeted conditions.*

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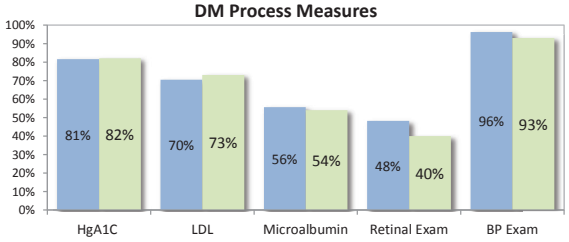
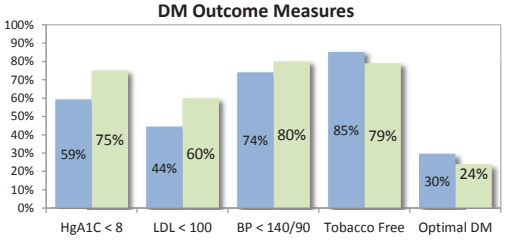
Group: Sample Group
Data Refresh Date: 4/16/2014

Clinical Performance Measures

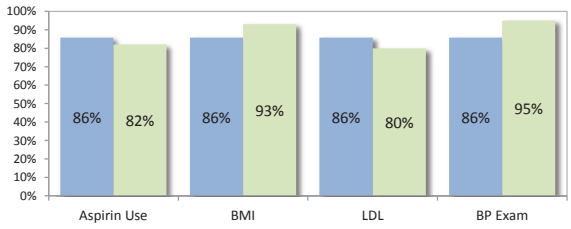
DM Process Measures



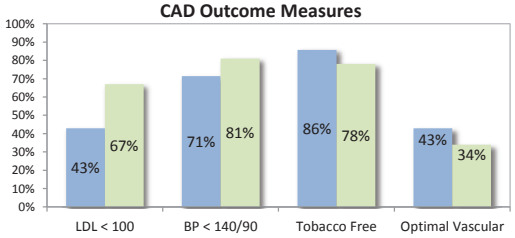
DM Outcome Measures



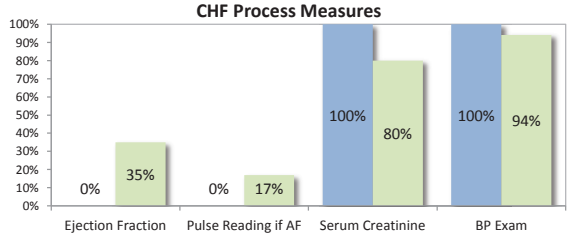
CAD Process Measures



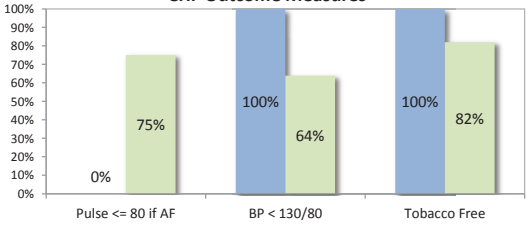
CAD Outcome Measures



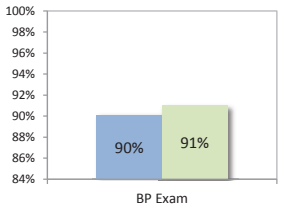
CHF Process Measures



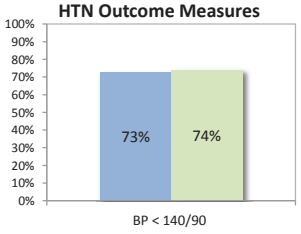
CHF Outcome Measures



HTN Process Measures



HTN Outcome Measures



Legend:
Group State*

Abbreviations:

BP = Blood Pressure
HgA1C = Hemoglobin A1C
LDL = Low Density Lipoprotein
GFR = Glomerular Filtration Rate
ACEi/ARB = Angiotensin converting enzyme inhibitor/angiotensin receptor blocker

* State data consists of most current quarter. For definition of State, please see attached glossary.

Definitions of Terms

Membership: Defined as total active contracts as of the most recent full month.
ND Membership: Defined as the number of members who reside in North Dakota.

Members in a Medical Home: The number of group members who are in the MediQHome program and attributed to a physician.
Members in a Medical Home with a Targeted Chronic Condition: The number of members in a Medical Home who have one or more of the six targeted chronic conditions.

Six Targeted Chronic Conditions: Asthma, Attention Deficit Hyperactivity Disorder, Coronary Artery Disease, Congestive Heart Failure, Diabetes, and Hypertension. These conditions are further stratified by age to create clinical suites.

ADHD: Attention Deficit Hyperactivity Disorder
ASTH: Asthma
CAD: Coronary Artery Disease
CHF: Congestive Heart Failure
DM: Adult Diabetes
DMA: Adolescent Diabetes
DMC: Childhood Diabetes

HTN: Adult Hypertension
HTNCA: Child or Adolescent Hypertension

Single Chronic: Members who are only in one of the targeted chronic condition suites.
Multiple Chronic: Members who are in more than one of the targeted chronic condition suites.

Non-Targeted: Members who are not in any of the targeted chronic condition suites, though these members may have conditions outside of those targeted by the MediQHome program.

BMI Ranges:

- **Normal:** less than or equal to 25
- **Overweight:** between 25.01 and 29.99
- **Obese:** between 30 and 34.99
- **Morbidly Obese:** greater than or equal to 35

State Comparison: Includes all commerical BCBSND book of business plus FEP, for members under age 65 residing within the state of North Dakota (zip code beginning with 58). Medicare members are excluded.

State Employees Group
July 31, 2014

Basic Code	Class	Description	Contracts	Members
1756,1757	1	Single Active Employee & Political Sub	5,899	5,899
1756,1757	3	Family Active Employee & Political Sub	14,650	48,081
1761,1762	1	Single Political Sub, Non-Grandfathered	143	143
1761,1762	3	Family Political Sub, Non-Grandfathered	201	675
1759,1760	1	Single Active Employee & Political Sub, Non-Grandfathered HDHP	80	80
1759,1760	3	Family Active Employee & Political Sub, Non-Grandfathered HDHP	69	230
1757	1	Single Active Employee Leave of Absence, Temporary, Part-Time	0	0
1757	3	Family Active Employee Leave of Absence, Temporary, Part-Time	0	0
1757	1	Single Active Employee, COBRA	254	254
1757	3	Family Active Employee, COBRA	47	133
1760	1	Single Active Employee, Non-Grandfathered HDHP, COBRA	1	1
1760	3	Family Active Employee, Non-Grandfathered HDHP, COBRA	0	0
1756,1757	1	Single Political Sub, COBRA	82	82
1756,1757	3	Family Political Sub, COBRA	29	95
1761,1762	1	Single Political Sub, Non-Grandfathered, COBRA	4	4
1761,1762	3	Family Political Sub, Non-Grandfathered, COBRA	0	0
1759,1760	1	Single Political Sub, Non-Grandfathered HDHP, COBRA	0	0
1759,1760	3	Family Political Sub, Non-Grandfathered HDHP, COBRA	0	0
1756	1	Single Non-Medicare Retiree	366	366
1756	3	Family Non-Medicare Retiree	133	266
1757	3	Family 3+ Non Medicare Retirees	13	42
1326,1330,1328	1	Medicare Retiree (A+B) (1 medicare only)	4,223	4,223
1326,1330,1328	7	Medicare Retiree (A+B) (2 medicare only)	2,034	4,068
1326,1330,1328	3	Medicare Retiree (A+B) (3 medicare only)	6	18
1327,1331,1329	3	Medicare Retiree (A+B) (4 medicare only)	1	4
1755	1	Medicare Retiree (A only) (1 medicare only)	2	2
1753,1754,1758	1	Medicare Retiree (A+B) (non-Medicare members only)	437	437
1753,1754,1758	3	Medicare Retiree (A+B) (non-Medicare members only)	24	55
1756	1	Single Non-Medicare Retiree COBRA	1	1
1756	3	Family Non-Medicare Retiree COBRA	0	0
1757	3	Family 3+ Non Medicare Retiree COBRAs	0	0
1326,1330,1328	1	Medicare Retiree COBRA (A+B) (1 medicare only)	0	0
1326,1330,1328	7	Medicare Retiree COBRA (A+B) (2 medicare only)	0	0
1326,1330,1328	3	Medicare Retiree COBRA (A+B) (3 medicare only)	0	0
1327,1331,1329	3	Medicare Retiree COBRA (A+B) (4 medicare only)	0	0
1753,1754,1758	1	Medicare Retiree (A+B) (non-Medicare members only)	9	9
1753,1754,1758	3	Medicare Retiree (A+B) (non-Medicare members only)	0	0
		Total	**28,708**	**65,168**

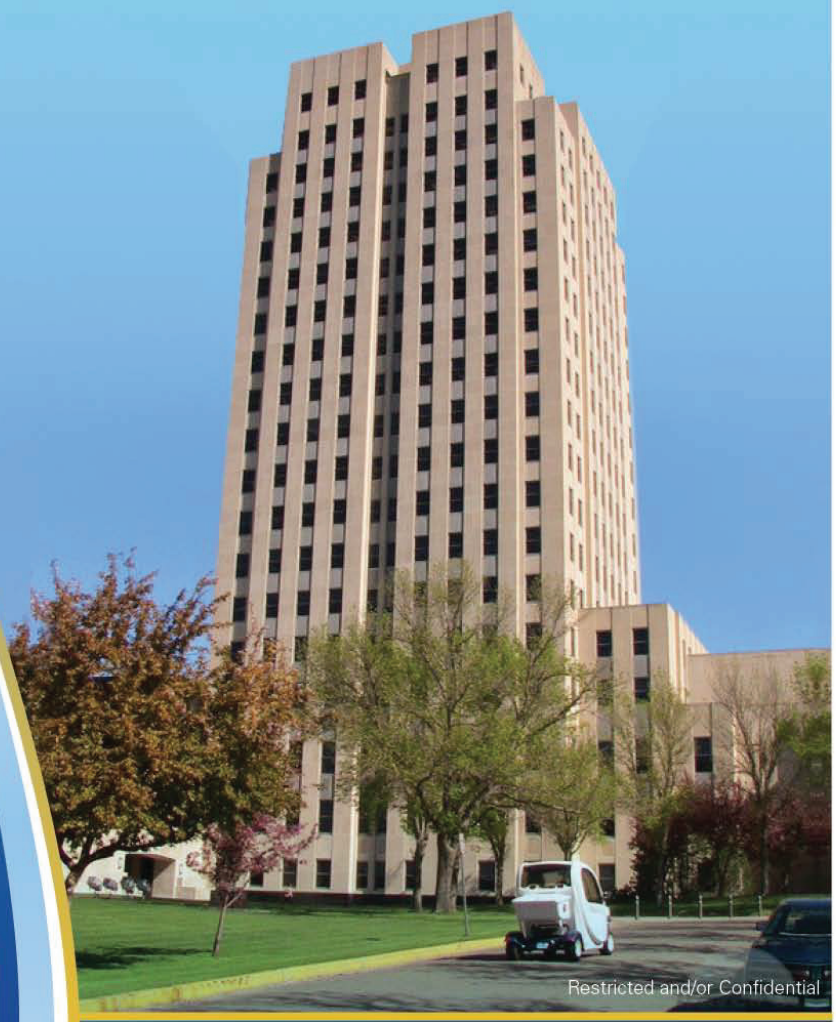
Attachment 7

Attachment 7

Samples of Executive Summaries

NDPERS
Executive Summary

Q1 | Presented May 2014



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Health Management	8
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Opportunities and Activities	12

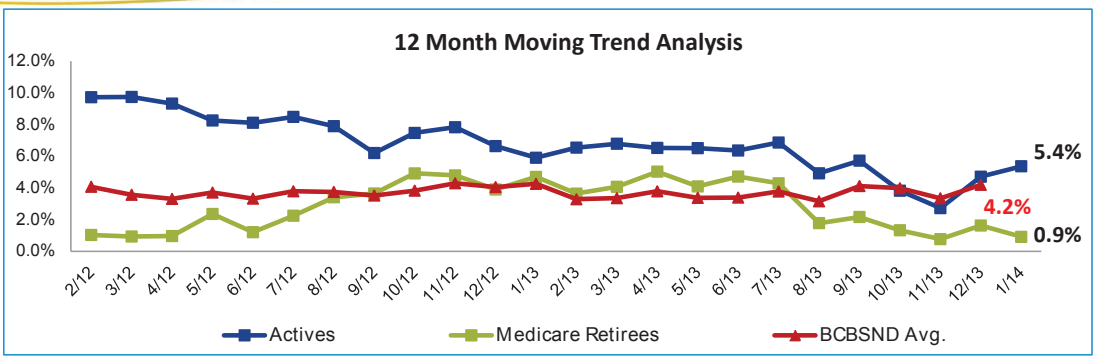
NORTH DAKOTA PUBLIC EMPLOYEES RETIREMENT SYSTEM

ND

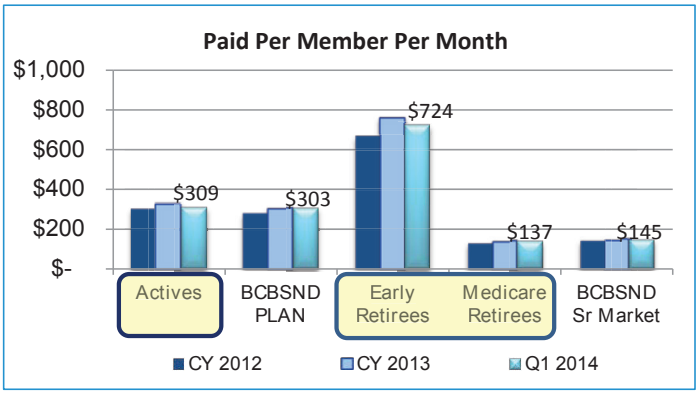
Blue Cross Blue Shield of North Dakota is an independent licensee of the Blue Cross & Blue Shield Association

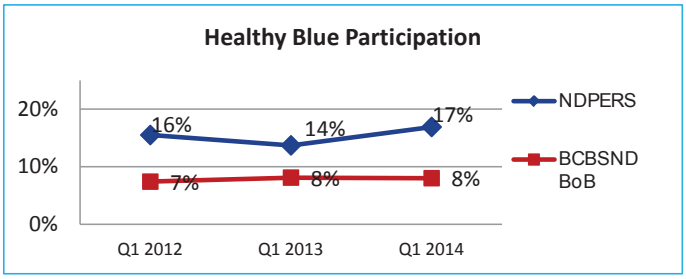
Noridian Mutual Insurance Company

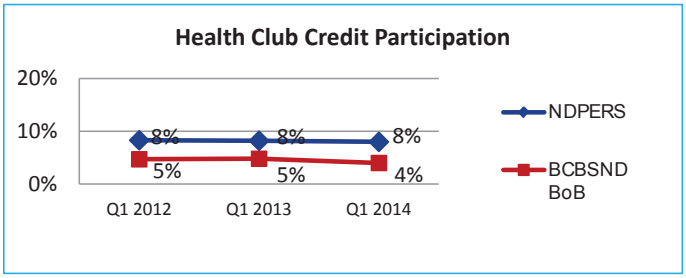
Dashboard

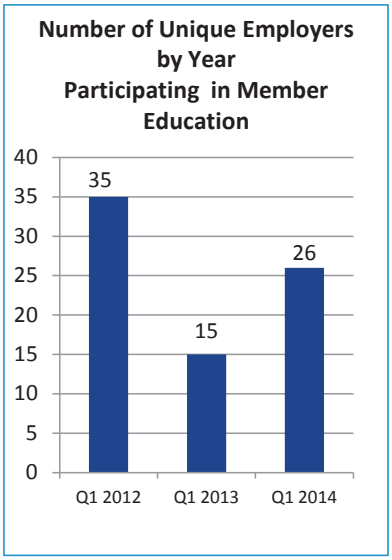


Membership Comparison	CY 2013	Q1 2014
Actives	54,813	55,678
Early Retirees	1,242	1,202
Medicare Retirees	7,854	8,136









Actives include Political Subs and State Employees

NDPERS Biennium Comparison

Paid through March 31, 2014

Incurred	Premium	Admin Fee	Interest on Surplus	Estimated Incurred Claims	Gain (Loss)	Gain (Loss) as % of Premium	Biennium Gain (loss)	% of Premium
July 09 - Jan 10	122,061	6,450	73	100,430	15,253	12.5%	38,094	9.0%
July 11 - Jan 12	133,866	7,102	19	120,700	6,084	4.5%	10,516	2.2%
July 13 - Jan 14	157,864	12,002	27	142,465	3,424	2.2%	N/A	N/A

Note: Reported in thousands

The July 11 - June 13 biennium is reporting a gain of $10.5 million with nine months of claims run out. Biennium gain(losses) are prior to risk sharing. It is important to note that the bienniums beginning with July 13 includes estimated claim reserves. Actual claims run out may vary from original reserve estimates.

It is expected that premiums will exceed claims in the first few months of the biennium. This is due to stable premium levels throughout the entire biennium and increasing claims during the biennium. At the mid-point of the biennium claims would be expected to be equal to premiums less admin fees and during the last months of the biennium, claims would be expected to exceed premiums

NDPERS Quarterly Trend Analysis

Paid through March 31, 2014

Twelve Month Moving Average				
Incurred Month	Est. Incurred Claim/Contract		Annual Trend	
	Actives	Med Retirees	Actives	Med Retirees
3/12	$759.75	$171.89	9.7%	0.9%
4/12	763.45	172.25	9.3%	1.0%
5/12	767.26	174.18	8.3%	2.4%
6/12	770.34	173.51	8.1%	1.2%
7/12	774.57	175.08	8.5%	2.2%
8/12	783.52	177.39	7.9%	3.4%
9/12	782.27	177.81	6.2%	3.7%
10/12	795.13	179.85	7.5%	4.9%
11/12	802.63	179.72	7.8%	4.8%
12/12	800.64	178.99	6.6%	3.9%
1/13	801.43	179.81	5.9%	4.7%
2/13	807.86	178.57	6.5%	3.6%
3/13	811.34	178.89	6.8%	4.1%
4/13	813.28	180.92	6.5%	5.0%
5/13	817.21	181.31	6.5%	4.1%
6/13	819.36	181.70	6.4%	4.7%
7/13	827.74	182.60	6.9%	4.3%
8/13	822.10	180.56	4.9%	1.8%
9/13	827.04	181.67	5.7%	2.2%
10/13	825.55	182.24	3.8%	1.3%
11/13	824.53	181.11	2.7%	0.8%
12/13	838.34	181.91	4.7%	1.6%
1/14	844.46	181.46	5.4%	0.9%

The 4.7% twelve month rolling trend for NDPERS Actives through December 2013 is greater than the Blue Cross Blue Shield overall trend of 4.2%.

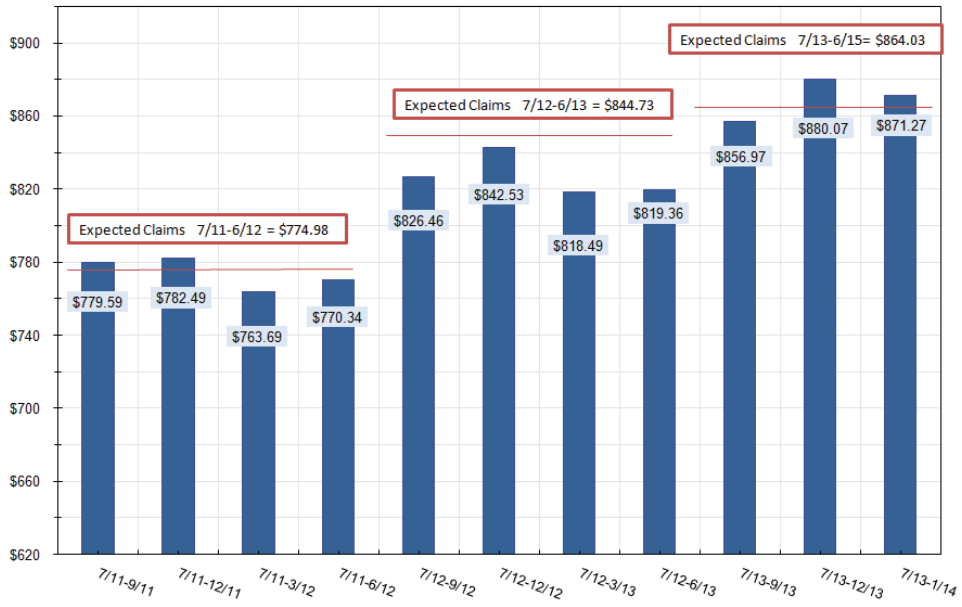
A 6.68% trend was used in rating the first year of the biennium beginning July 2013.

NDPERS Quarterly Trend Analysis

Paid through March 31, 2014

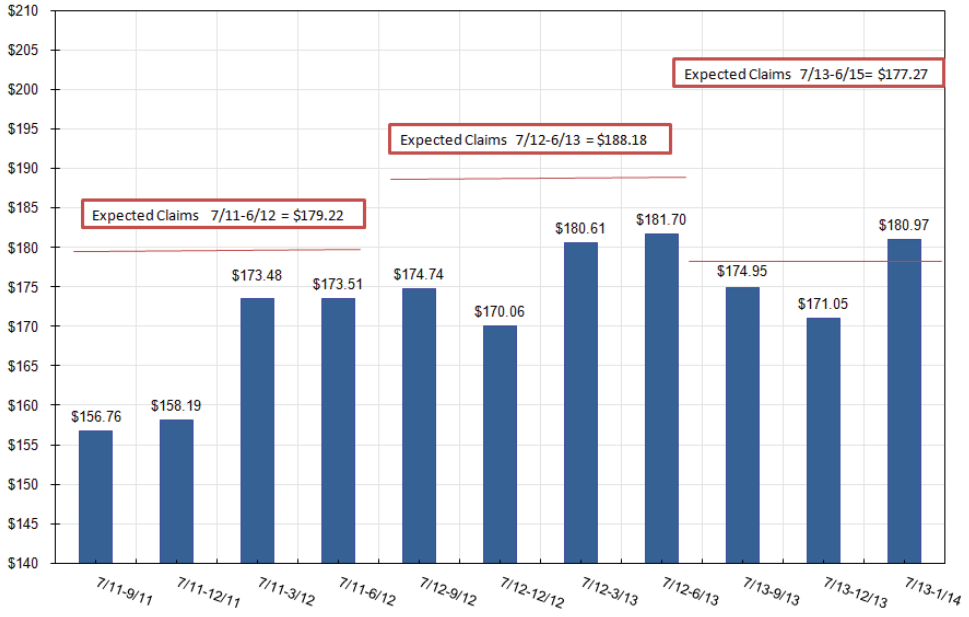
NDPERS - Actives

AVERAGE MONTHLY INCURRED CLAIMS PER CONTRACT



NDPERS - Medicare Retirees

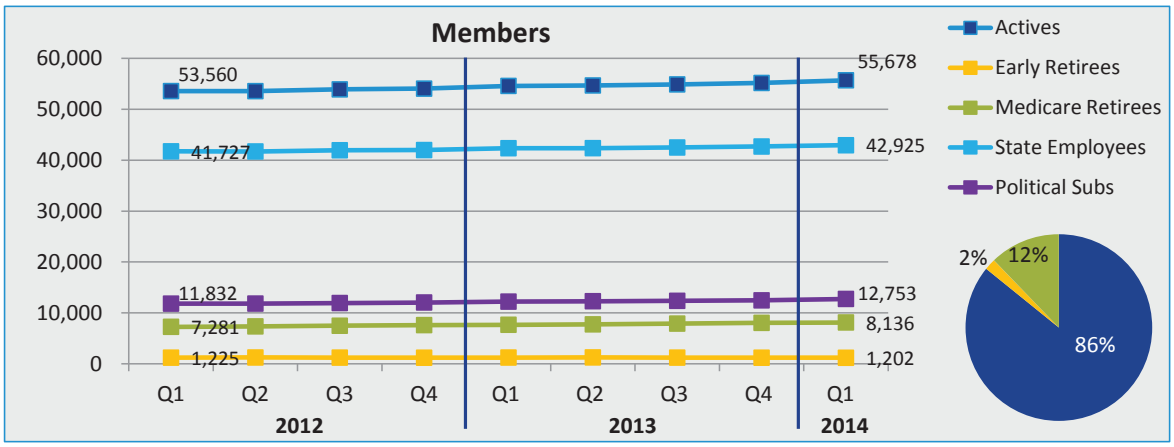
AVERAGE MONTHLY INCURRED CLAIMS PER CONTRACT



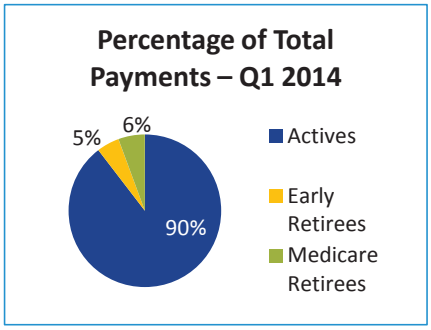
Membership & Health Utilization Summary

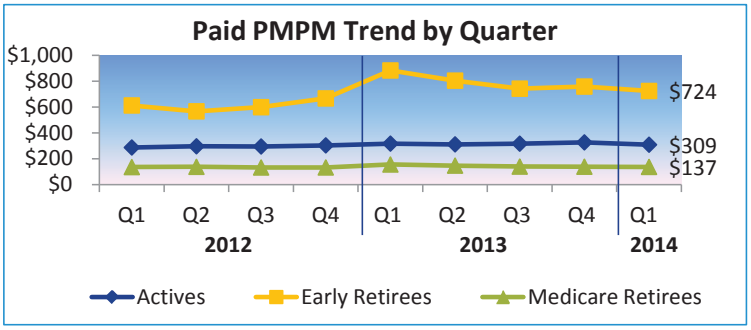
Paid each Calendar Year (Q1 through 3/31/2014)

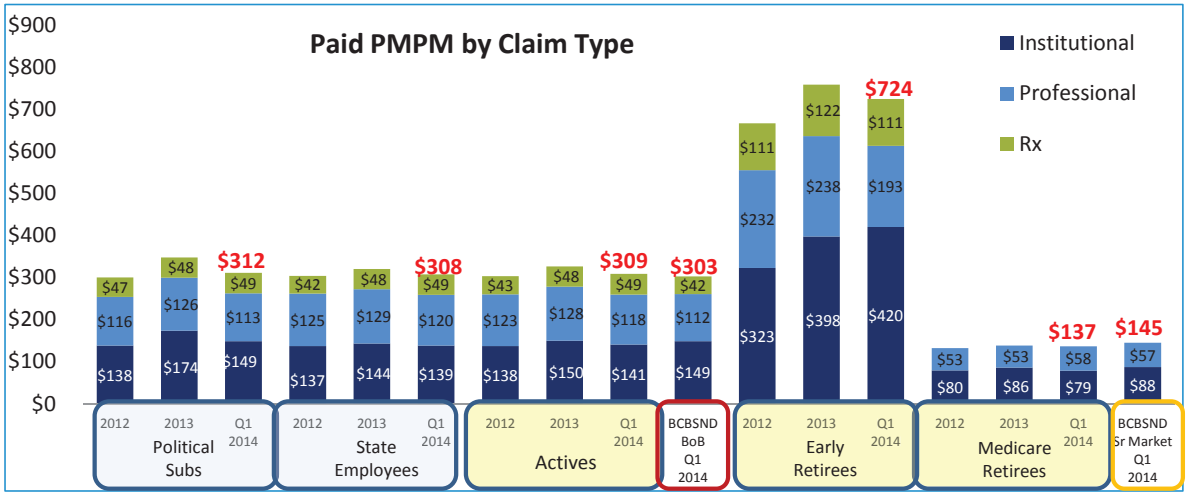
Membership



Claims Paid Per Member Per Month (PMPM)





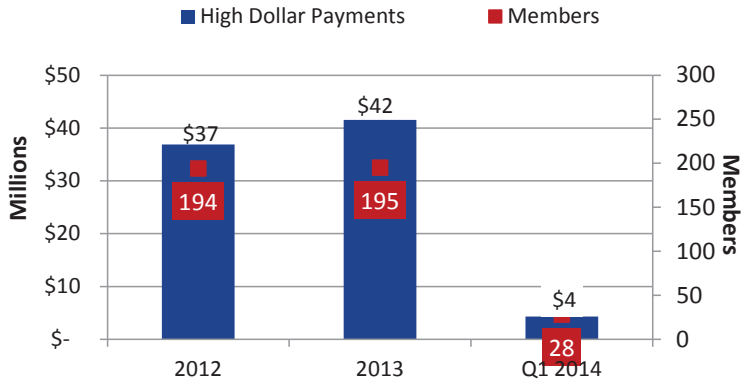


Actives include Political Subs and State Employees

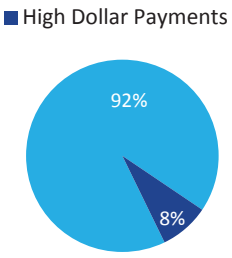
Quarters are cumulative to calendar year end

High Dollar Cases

Actives
High Dollar Cases over $100,000/member



Q1 2014 as a % of Total Payments

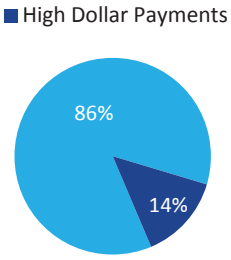


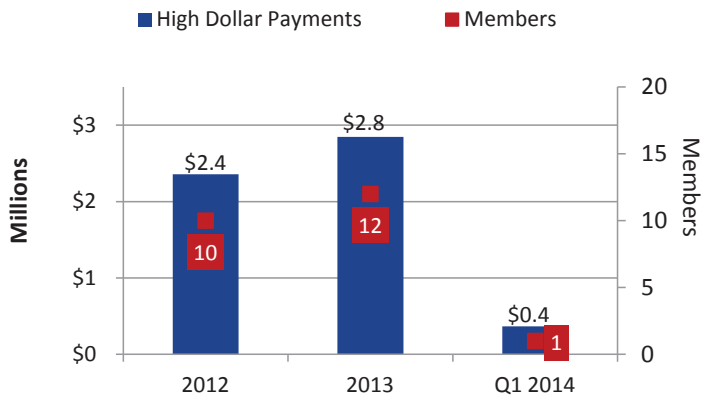
BCBSND Avg. 20%

Avg. Paid/Case	**$190,129**	**$213,099**	**$153,299**
% of Total Payments	**19%**	**19%**	**8%**
BCBSND % of Tot. Payments	17%	18%	20%

Early Retirees
High Dollar Cases over $100,000/member

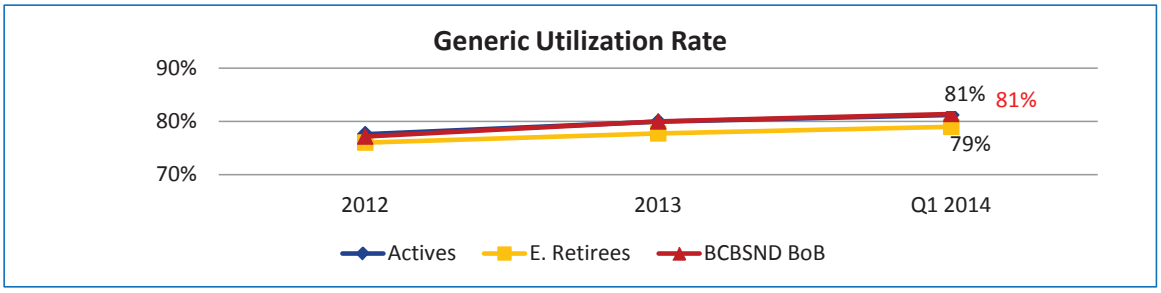
Q1 2014 as a % of Total Payments

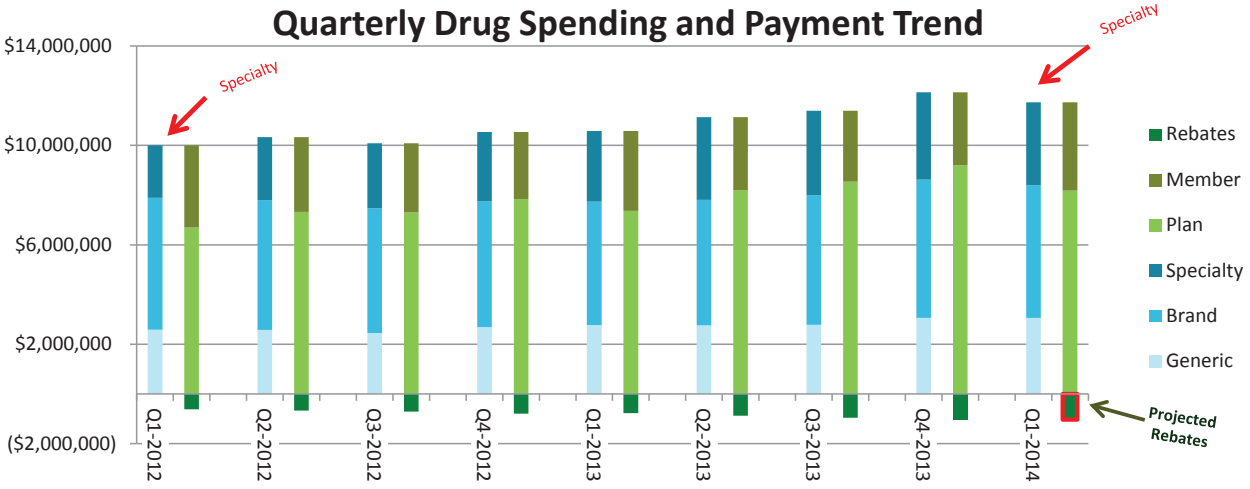




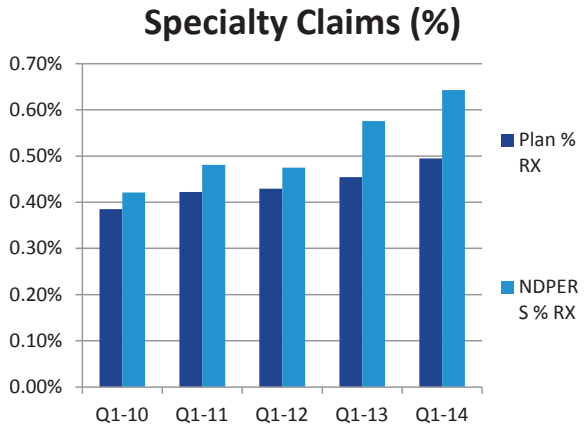
Avg. Paid/Case	**$235,754**	**$237,265**	**$364,986**
% of Total Payments	**24%**	**25%**	**14%**

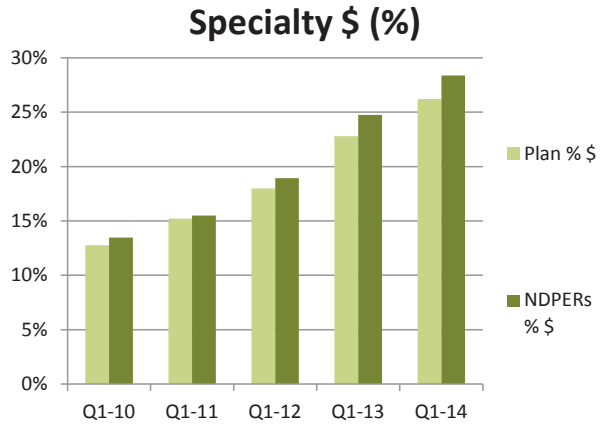
Prescription Drugs





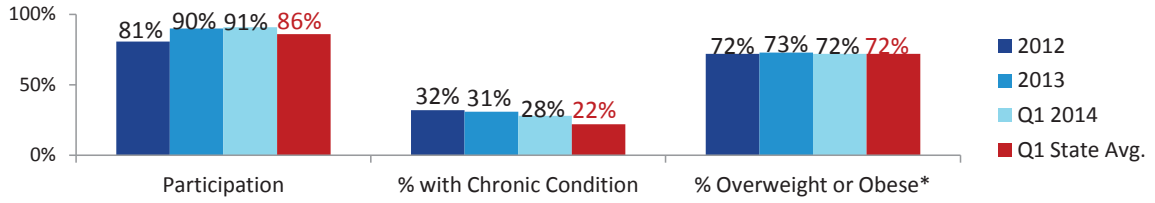
- Specialty spend continues to increase
- Plan (NDPERS) costs are increasing – benefit design may not be keeping up with inflation
- Rebates have also increased



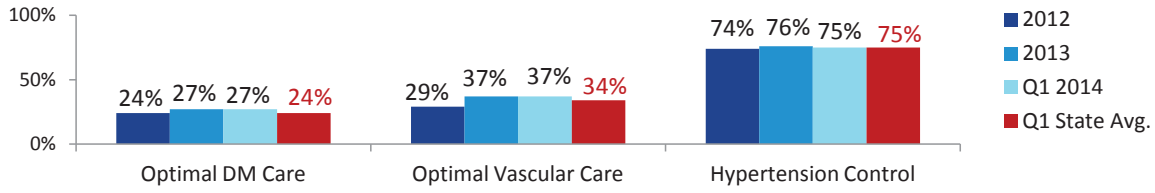


Health Management

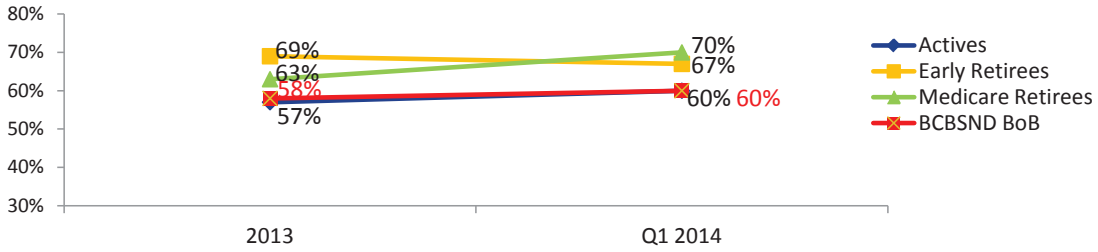
MediQHome Key Measures



MediQHome Outcome Measures



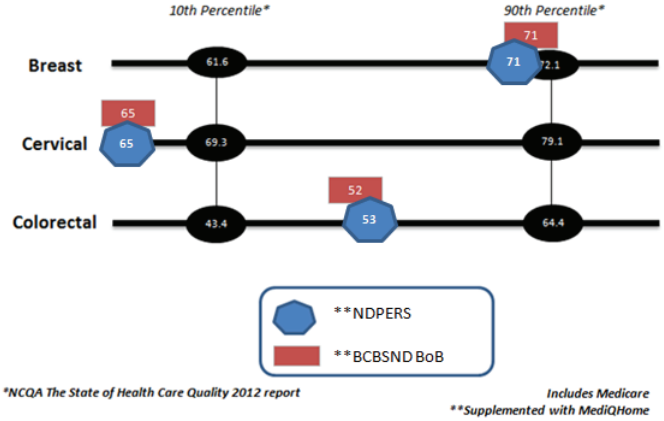
AccordantCare Participation – Rare and Complex Disease Management



- **533 eligible, 327 participating (overall participation 61%)**
- 2013 to Q1 2014 shows an overall increase in participation
  - Due to small population of the retirees, addition or decline of a few members could change participation percentage significantly

Preventive Cancer Screenings

Cancer screening compliance is at the BCBSND book of business but below the 2012 NCQA 90th percentile.

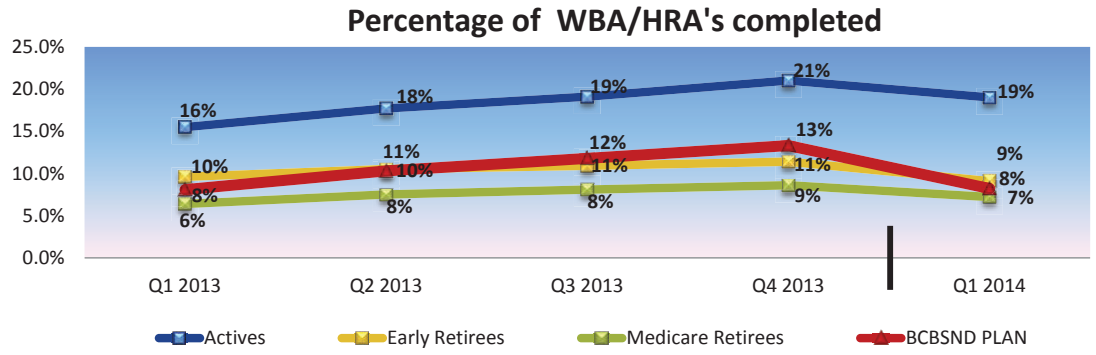


Wellness Programs

Through Q1 2014 (Jan-Mar), there was a total of 44,305 members eligible for the wellness programs, HealthyBlue and Health Club Credit. NDPERS member participation in both wellness programs is higher than the BCBSND Plan average.

HealthyBlue

- 17% (slightly down from 19% Q4) of <u>total</u> eligible members have completed a Health Risk Assessment (7,329 members).
  - BCBSND Plan HRA completion rate was 8% (also down from 13% in Q4)
- Point redemption through Q1 2014 - $48,086 in redeemed prizes

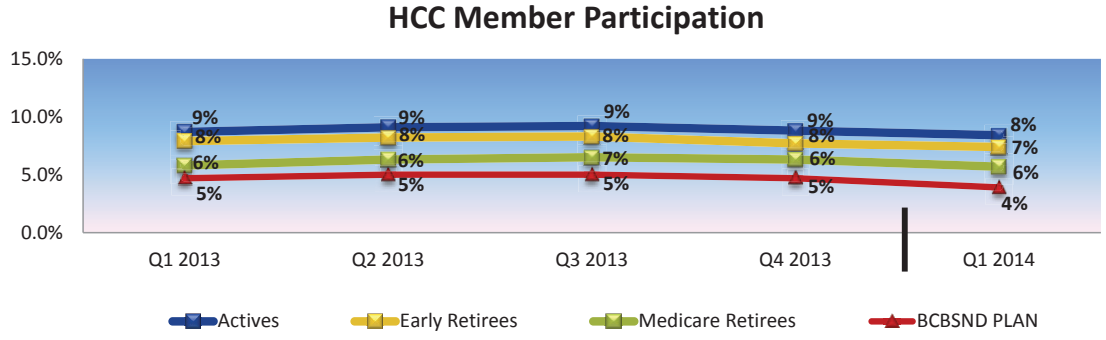


Q1 2014 begins over due to annual HRA completion requirement.

Quarters are cumulative to calendar year end

Health Club Credit

- 8% (same as Q4) participate in the Health Club Credit Program (3,478 members)
  - BCBSND Plan average is 4% (down from 5% Q4)
- Members receiving credit 61% (up from 55% Q4) - those participating in HCC exercise 12 or more days per month (2,137 members)
  - BCBSND Plan average is 63% (also up from 53% Q4)
- Health club credits paid through Q1 2014 - $114,661



Quarters are cumulative to calendar year end

Wellness Programs Cont'd

Member Engagement

Member Education Representatives introduce programs that provide employees with valuable information and engages them in their health care. Along with making more informed health care decisions, these programs include valuable life skills.

Presentations are available for the following programs:

- Take Care of Yourself
- Walking Works
- Strength Training
- Beat The Bug
- Summer Safety
- Stress Management
- Medication Education
- Tobacco Cessation
- Wellness Programs (HealthyBlue/Health Club Credit)
- Nutrition Basics for a Healthier You
- **NEW!** "CPR and First Aid Basics"

2014 through Q1, 26 employer groups have held these educational programs and 10 employer groups have had a benefit overview meeting.

	Number of Employers	Member Education Programs & Benefit Overview	Member Attendance
Q1 2014	15	HealthyBlue /HCC	308
	15	Other	499
	15	Benefit Overview	

NDPERS Wellness Specialist

•Two week Walking Challenge in January/February – 1155 registered participants walked approximately 146 million steps.

• Cervical Cancer Screening & HealthyBlue HRA Reminder mailings

•Completed "Spring into Action" physical activity challenge May 1 – results will be released in the next quarterly review.

•NDPERS Wellness Coordinator monthly calls & newsletters

- **Call -** April featured a special guest from the NDSU Extension Service for a new nutrition program they are launching that is targeted at baby boomers.
- **Newsletter** - featuring the health topic of the month and additional resources for wellness activities.

•Conducted a Wellness Coordinator survey in February. 63% of coordinators have been in their role for three or more years. Nearly all of coordinators are satisfied with the resources provided to them through the monthly newsletters and conference calls.

•HealthyBlueHighlights, sent bimonthly through HealthyBlue, highlights monthly health topics and encourages members to participate in HealthyBlue workshops.

•Pebble promotion in HealthyBlue – electronic tracking device that automatically uploads into HealthyBlue

• Debut of Duncan's Digest – online health topic presentation in HealthyBlue

•Launched online video tutorial on HealthyBlue

•Gearing Up for Worksite Wellness trainings were offered in Fargo and Bismarck. Approximately 10 NDPERS Wellness Coordinators attended.

Performance Standards and Guarantees

Measure	Goal	3/31/2014
Cost Management (measurement period : by 12-31-14)		
HRA Completions	17%	17%
HRA Score	5% point increase in the 2013 NDPERS group aggregate HRA wellness score Goal = 55	72
HealthyBlue – incentives paid	10% increase over 2013 incentives paid Goal = $581,798	$48,086
Health Club Credit – members receiving credit	10% increase over 2013 members receiving credit Goal = 2,177	2,137
Health Outcomes:		
Members enrolled in a Medical Home	80%	91%
Breast Cancer Screening Rates*	80%	76%
Cervical Cancer Screening Rates*	85%	68%
Colorectal Cancer Screening Rates*	60%	62%
Operational Performance:		
Claims Financial Accuracy	99%	99.8%
Payment Incident Accuracy	97%	99.6%
Claim Timeliness	99%	99%
Average Speed of Answer (in seconds)	30 seconds or less	21
Call Abandonment Rate	5% or less	1%
Provider Network Management:		
NDPERS PPO network	92% (or more) participation	99.6%
Provider Discount (non-Medicare contracts)	30% or more	53%

Green – meeting goal
Red – below goal
Purple – data not complete

**Cancer screening rates were a culmination of MediQHome and Optum claims data*

Opportunities and Activities

Completed

- Gearing Up for Worksite Wellness trainings in Fargo and Bismarck.
- Two week Walking Challenge in January/February
- "Spring into Action" physical activity challenge
- Wellness Coordinator survey
- Cervical Cancer Screening mailing
- HealthyBlue HRA Reminder mailing
- National Walk at Lunch Day at Capitol with First Lady Dalrymple & Kathleen Wrigley
- New MyPrime.com website is now available

Ongoing Activities

- **New BCBSND staff member to provide additional support for NDPERS program management**
- **Case Management – dedicated NDPERS Case Manager, works closely with Member Advocacy Program (MAP)**
    - **83 cases reviewed/followed in last 12 months**
        - **Projected savings (soft & hard) - $237,060**
- **There are currently 9 members in the Member Advocacy Program (MAP) – an increase from 3 last quarter. Two additional MAP advocates have been hired as the need for their services continue to increase.**
- **HealthyBlue upgrade to log community event participation**
- A fruit & veggie challenge is scheduled for summer.
- Monthly NDPERS Wellness Coordinator calls and newsletters
- Specialty Pharmacy
    - NDPERS enrollment in Prime Specialty Pharmacy Care Management
    - Targeted mailings continue to identify new specialty users
- Accordant Care – continue to identify newly eligibly members

North Dakota Public Employees Retirement System

Presented by: Blue Cross Blue Shield of ND

March 2014

Dashboard

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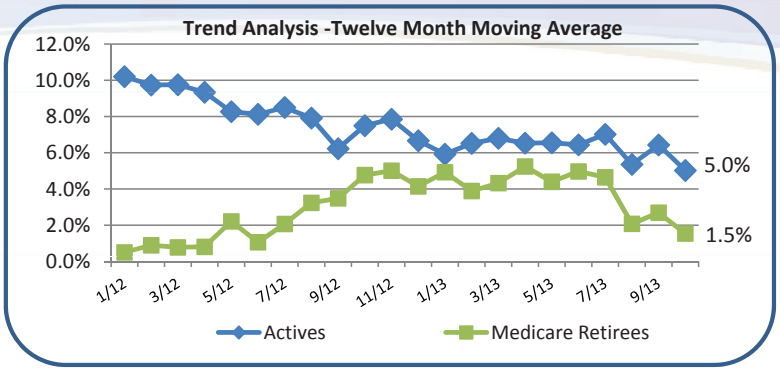
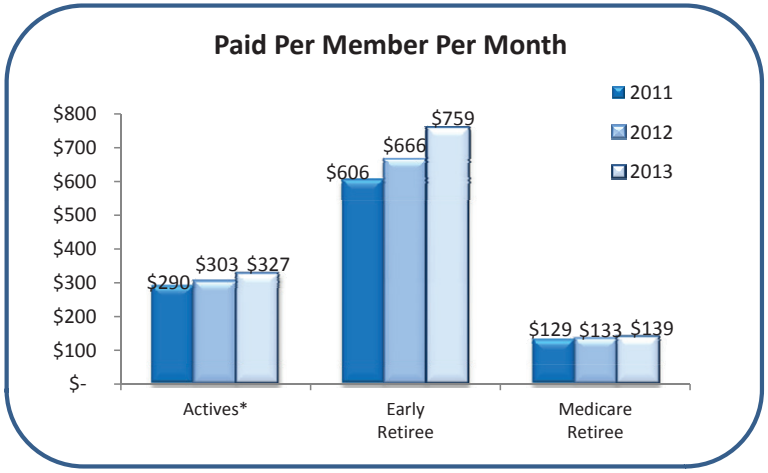
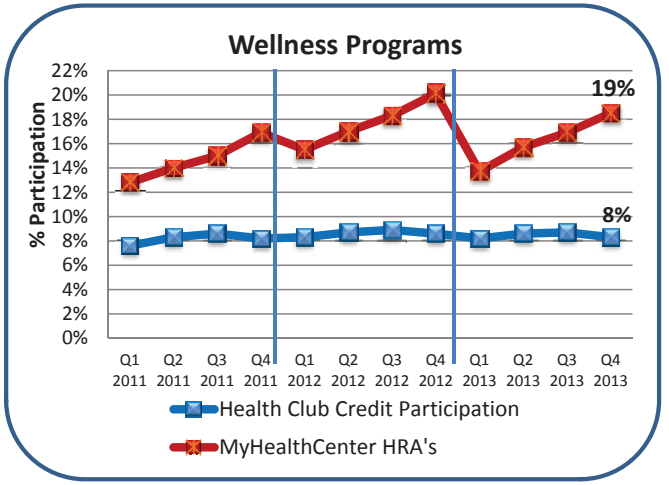


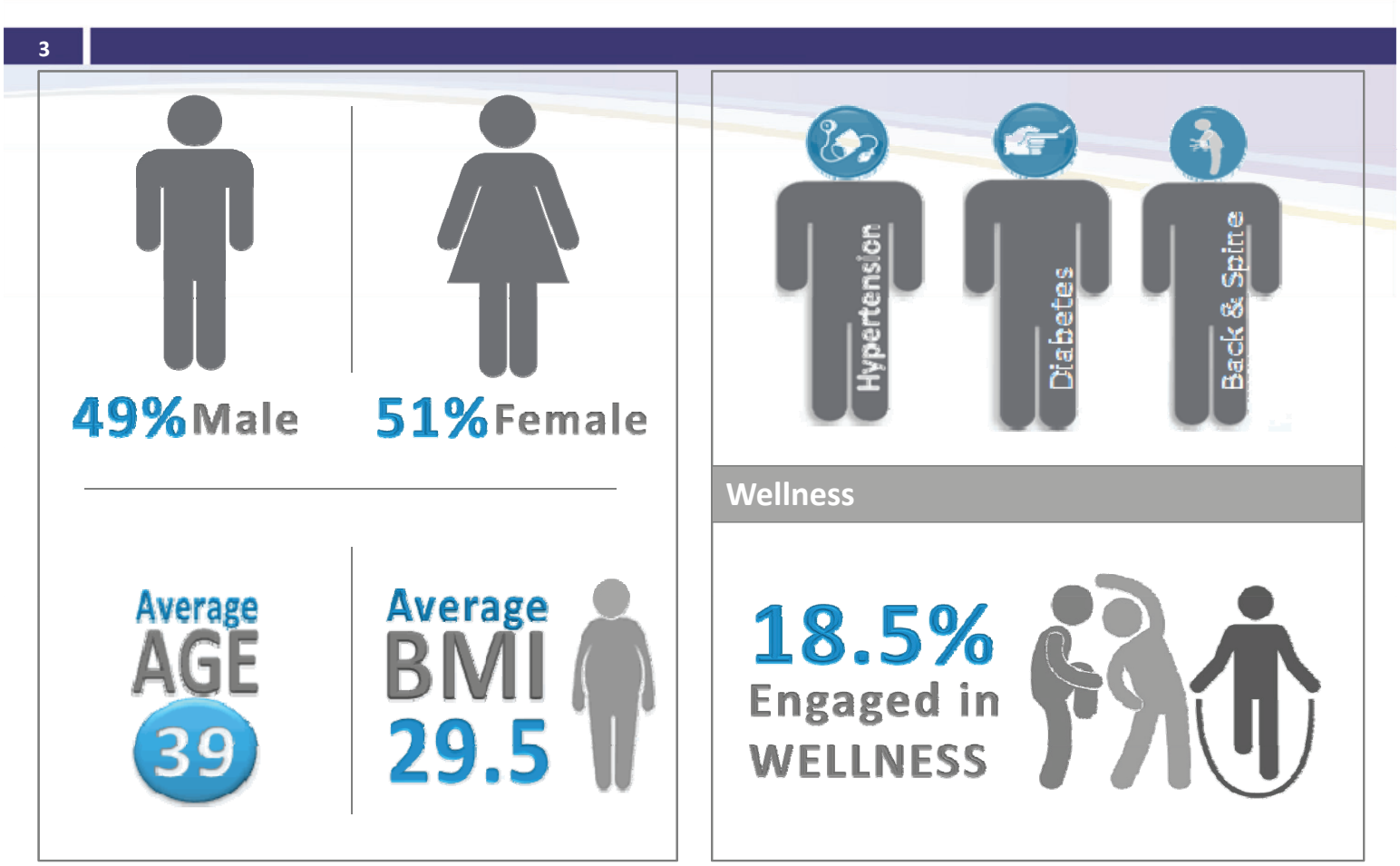
Membership	2011	2012	2013
Actives	50,887	53,759	54,807
Early Retirees	1,220	1,233	1,241
Medicare Retirees	6,923	7,439	7,854





Restricted and/or Confidential

NDPERS Population



Restricted and/or Confidential

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FINANCIAL

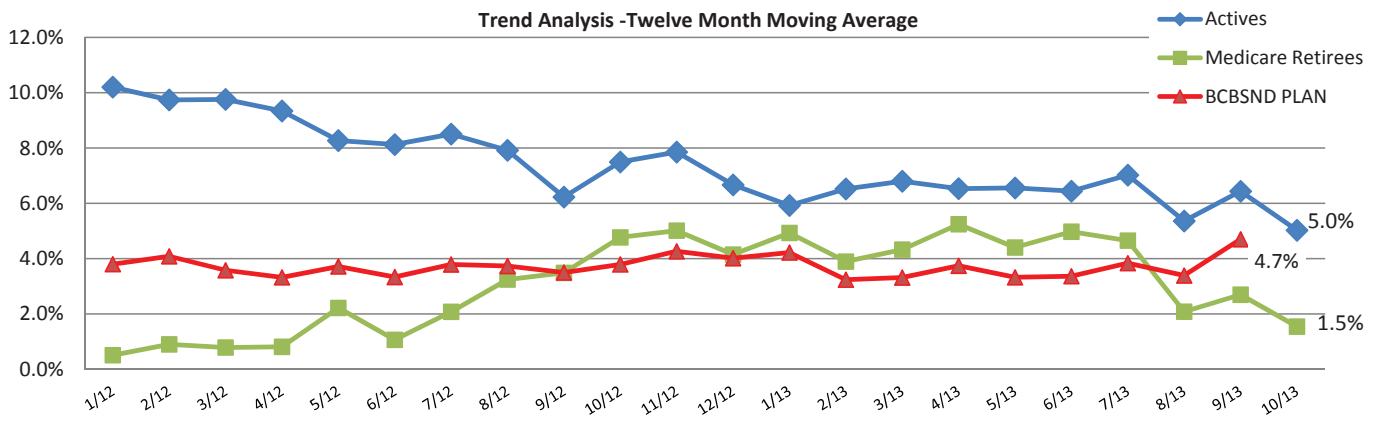
Annual Trend

PERS Biennium Comparison

Paid through December 31, 2013

	Premium	Admin Fee	Interest on Surplus	Estimated Incurred Claims	Gain(Loss)	Gain(Loss) as a % of Premium	Biennium Gain(loss)	% of Premium
July 09 - Oct 09	69,610	3,677	27	57,077	8,883	12.8%	38,094	9.0%
July 11 - Oct 11	75,914	4,023	6	67,956	3,941	5.2%	10,311	2.2%
July 13 - Oct 13	90,012	6,839	10	82,304	879	1.0%	N/A	N/A

Note: Reported in thousands



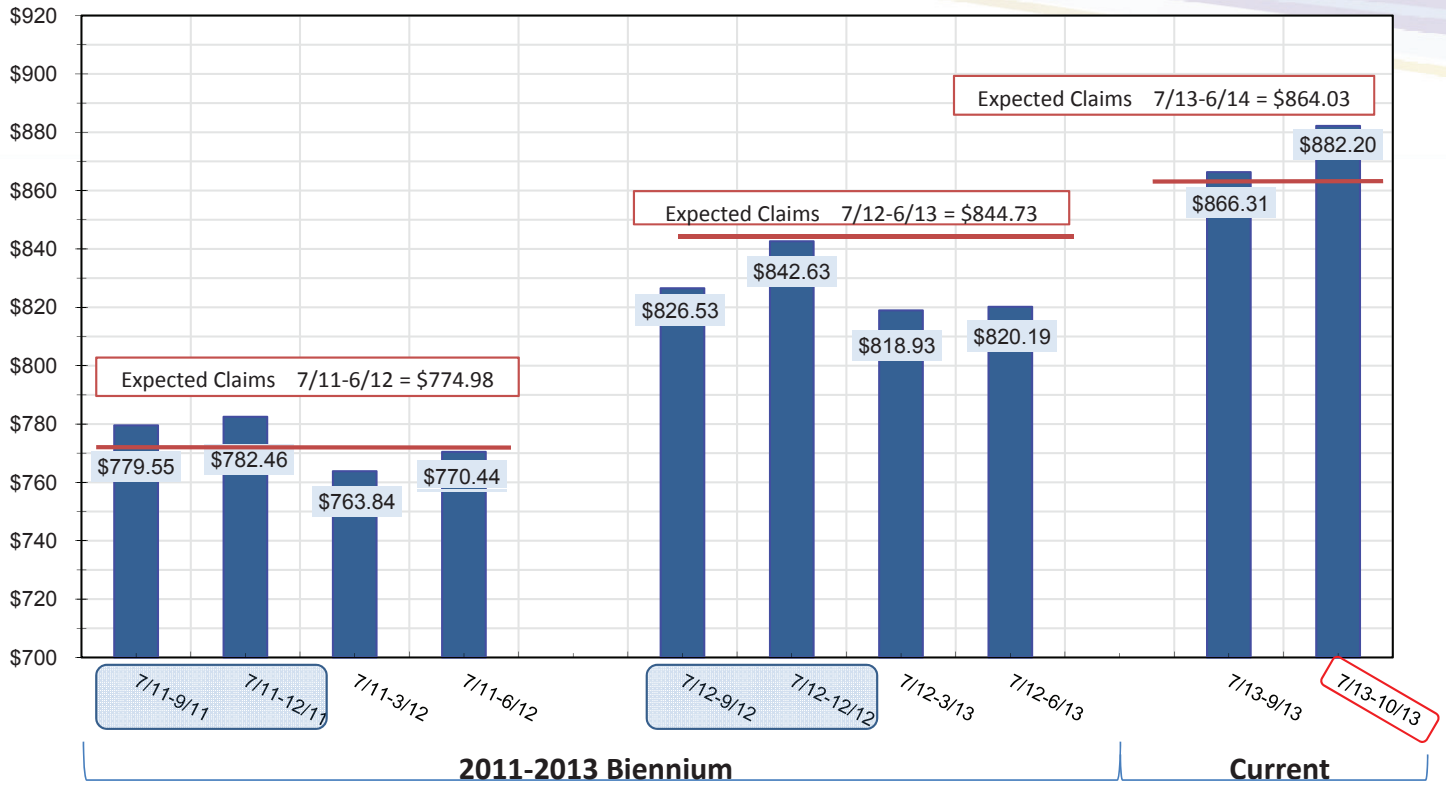
Restricted and/or Confidential

Year to Date
Incurred Claims Per Contract

7

NDPERS - Actives

AVERAGE MONTHLY INCURRED CLAIMS PER CONTRACT



Restricted and/or Confidential

Year to Date
Incurred Claims Per Contract

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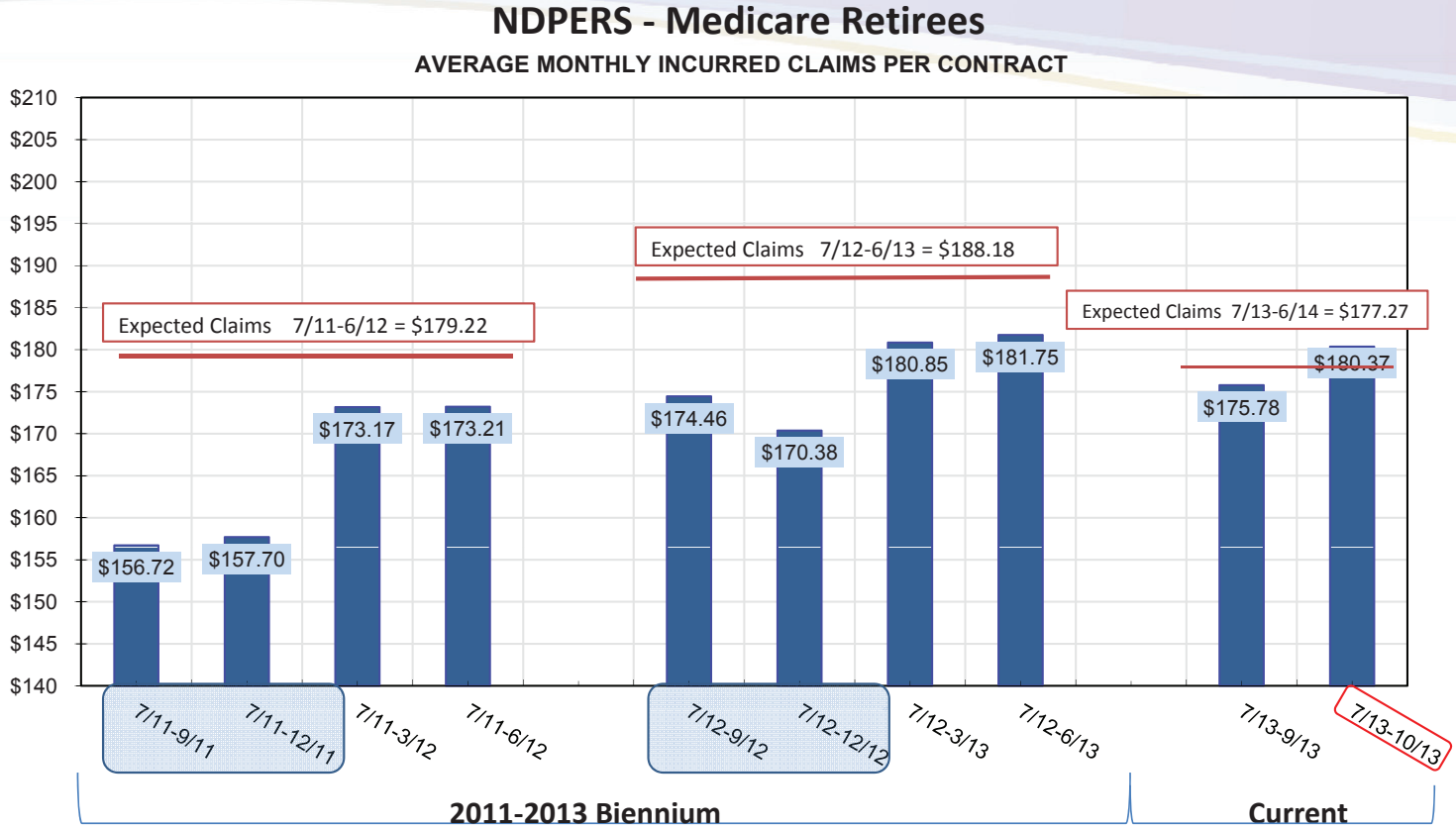
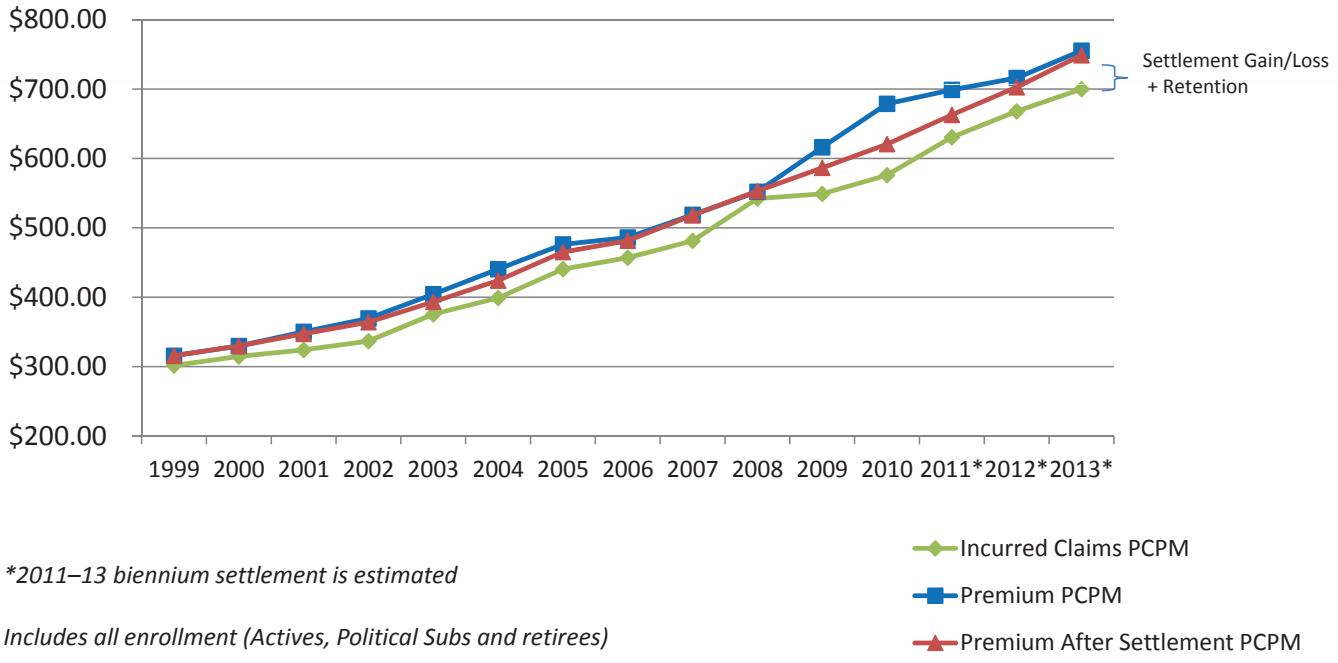


Restricted and/or Confidential

Claims Trend

9

- NDPERS average annual claims increase: 6.2%



**2011–13 biennium settlement is estimated*

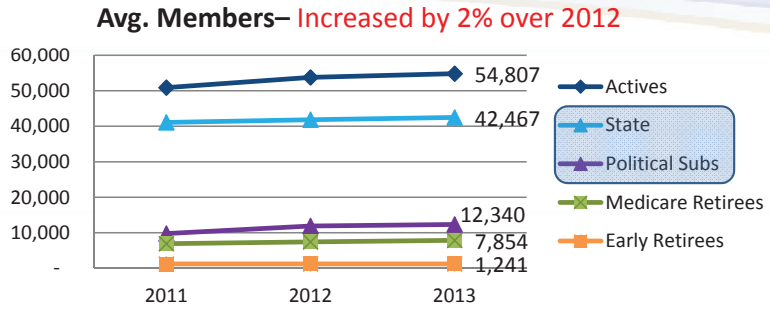
Includes all enrollment (Actives, Political Subs and retirees)

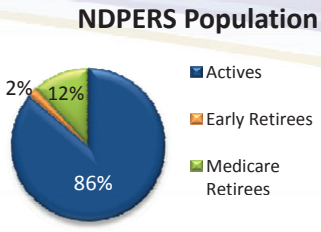
Restricted and/or Confidential

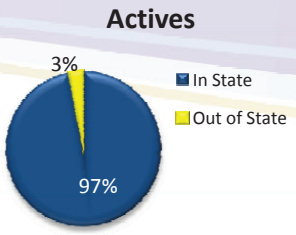
NDPERS SUMMARY

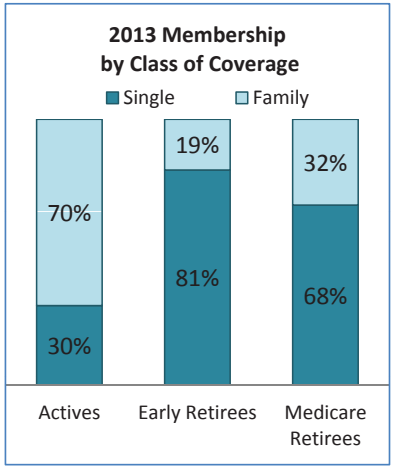
- Membership/Demographics
- Utilization
- High Dollar Cases
- Provider Discounts

Membership & Demographics

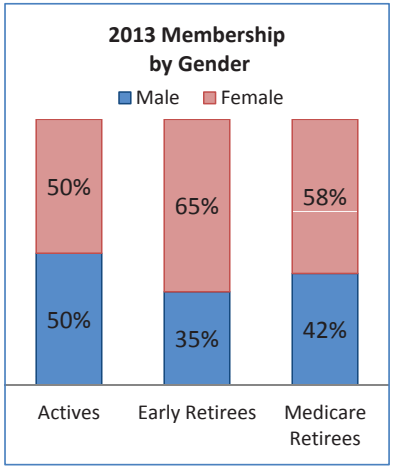








	Actives	E. Retirees	M. Retirees	BCBSND BoB
Average Age	34.4	59.7	74.2	32.7
Demographic Risk Score	1.12		3.26	1.05
Future Risk Score	1.21		4.11	1.05

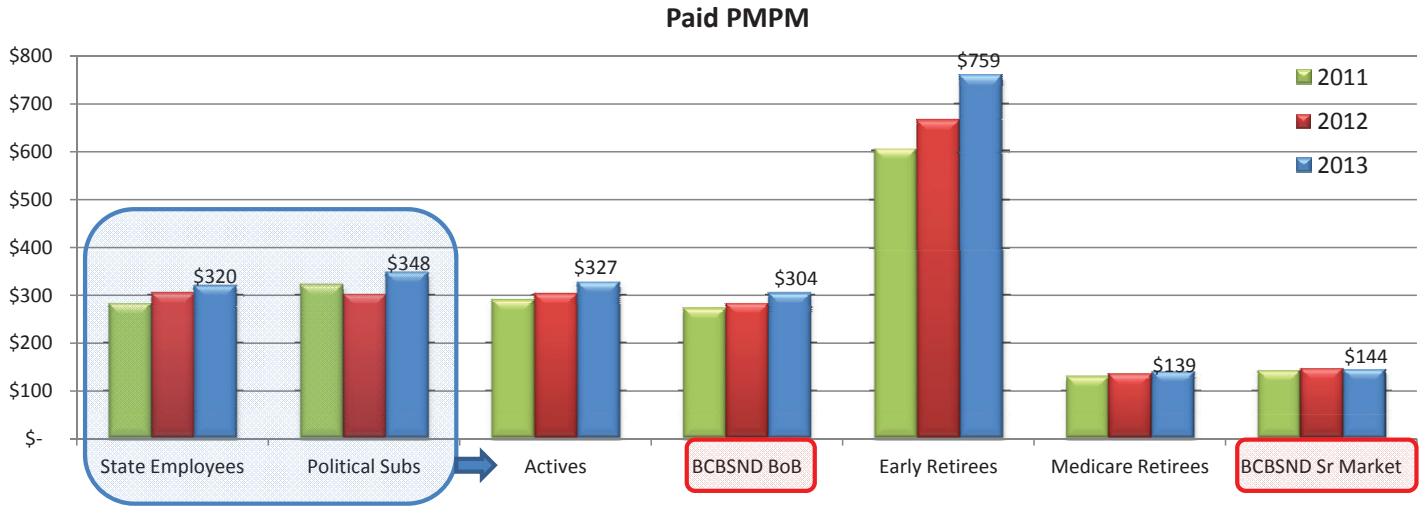


Actives = includes State Employees & Political Subs

Restricted and/or Confidential

Total Payments

	2011	2012	2013	% Change 2012-2013
Actives	$177,027,226	$195,785,987	$214,835,134	10%
Early Retirees	8,870,187	$9,856,378	$11,300,089	15%
Medicare Retirees	10,747,502	$11,861,408	$13,079,475	10%
TOTAL PAID	**$196,644,915**	**$217,503,773**	**$239,214,698**	**10%**



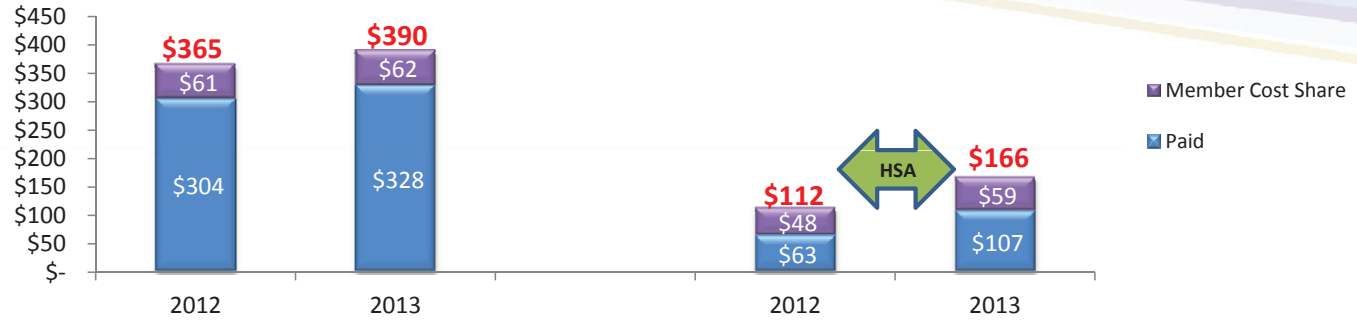
Restricted and/or Confidential

Actives/ Early Retirees

2012 Allowed Amount by Product

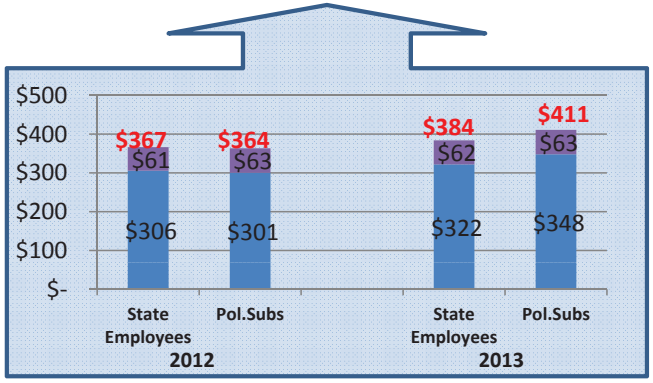
13

Members	53,545	54,539	218	274



PPO PLAN
State & Political Subs

HDHP Plan
State Employees only



- Both the PPO & HDHP Plans saw an increase to enrolled members
- HSA dollars contributed by NDPERS reduces the member's out of pocket but adds to the over-all costs for NDPERS

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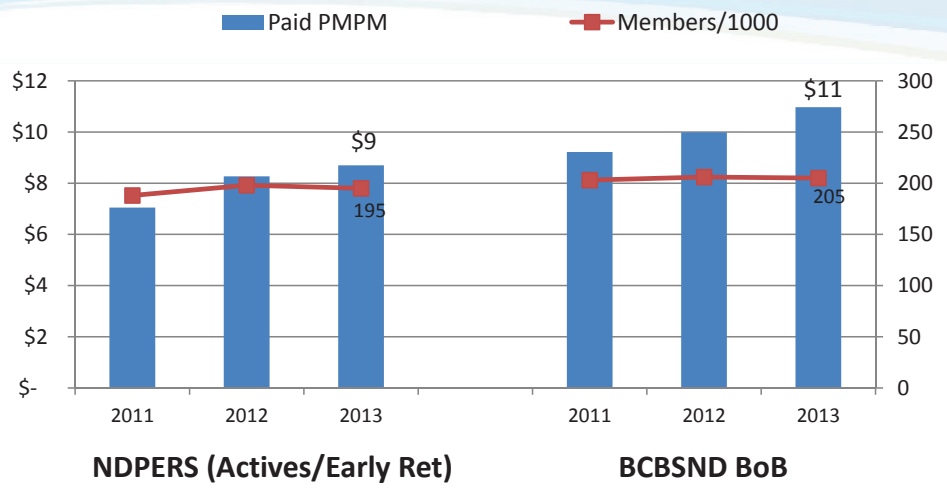
Outpatient ER Utilization

Consideration:

•Increase ER copay to $60

Current copay of $50 is lower than BCBSND standard copay - $75



• NDPERS PMPM is lower than BCBSND Plan average

• Small difference between ER copay ($50) and office visit copay ($25) may adversely affect utilization

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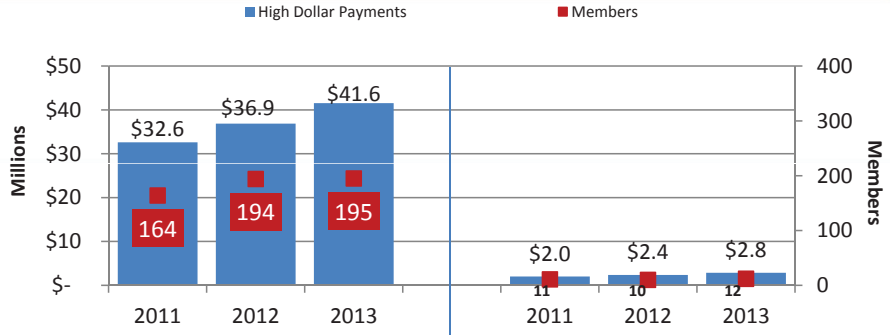
High Dollar Cases

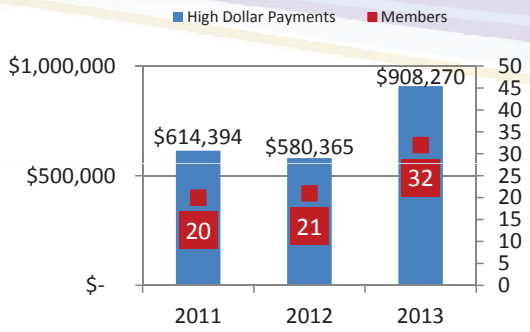
Actives & Early Retirees
High Dollar Cases over $100,000/member



	ACTIVES			EARLY RETIREES		
Avg. / Case	$198,813	$190,129	$213,099	$181,916	$235,754	$237,265

Paid Range	ACTIVES 2011	ACTIVES 2012	ACTIVES 2013	EARLY RETIREES 2011	EARLY RETIREES 2012	EARLY RETIREES 2013
$1,000,000+	1	2	1			
$300,000-999,999						
$300,000-999,999	18	16	30	1	2	3
$200,000-299,999	31	35	33	3	2	2
$100,000-$199,999	114	141	131	7	6	7
	164	194	195	11	10	12

Medicare Retirees
High Dollar Cases over $20,000/member



	MEDICARE RETIREES		
Avg. / Case	$30,720	$27,636	$28,383

Paid Range	MEDICARE RETIREES 2011	MEDICARE RETIREES 2012	MEDICARE RETIREES 2013
$50,000-$90,000	2	1	1
$40,000-$49,999	1	2	2
$30,000-$39,000	3	1	4
$20,000-$29000	14	17	25
	20	21	32

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2013 Provider Discounts

Performance Guarantees:

- BCBSND will maintain a PPO network: consisting of 92% or more of the in-state hospitals, MD's and DO's

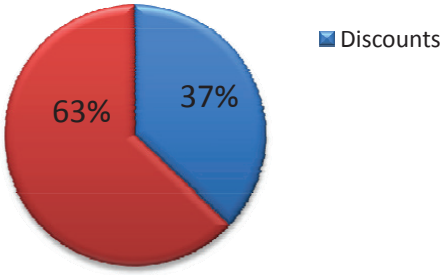
Currently above Goal - 99.7%

- **BCBSND guarantees NDPERS a minimum provider discount of 30% for Non-Medicare contracts.**

Currently above Goal – 52.5%

PPO Discounts	**$**	**4,725,857**
Other	**$**	**149,848,446**
Total In-State Discounts		**$154,574,303**
BlueCard Discounts	**$**	**18,281,877**
Total Discounts		**$172,856,180**

% Discounts off Total Charges*



**Medicare Retirees excluded*

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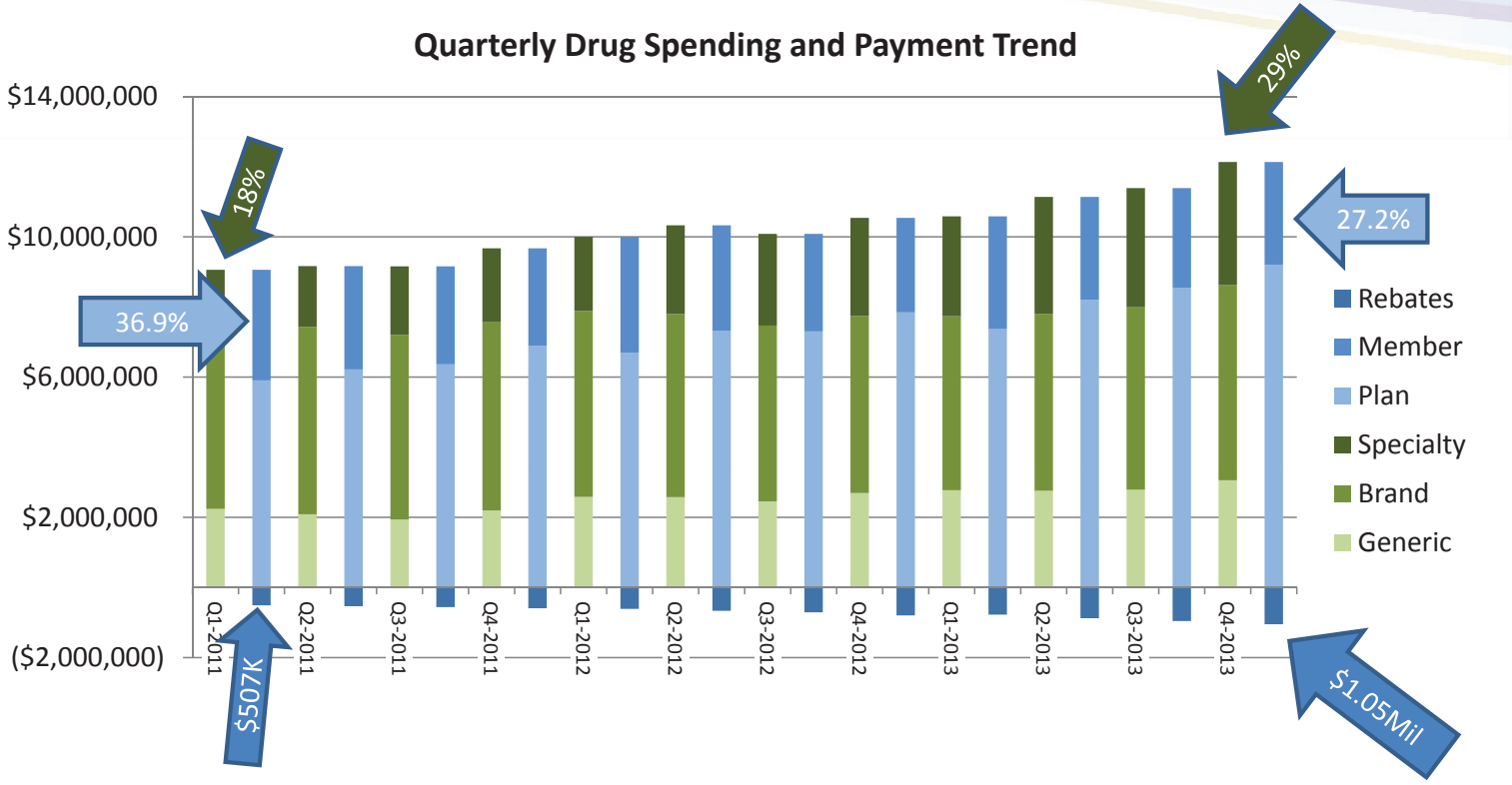
PHARMACY MANAGEMENT

Quarterly RX Spending

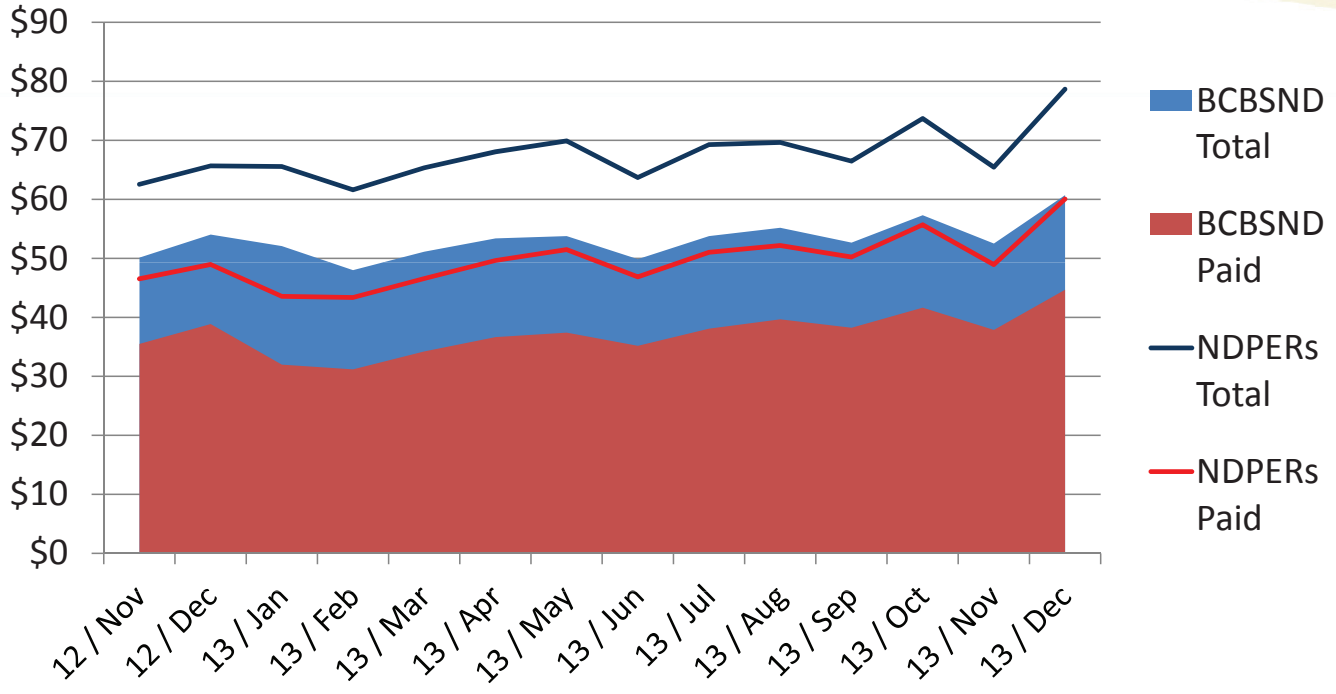
- Annual RX Spending Trends have been 5-9% quarter to quarter since 2010.
- Overall trend is driven by separate trends in generic, brand and specialty.



Monthly PMPM

19

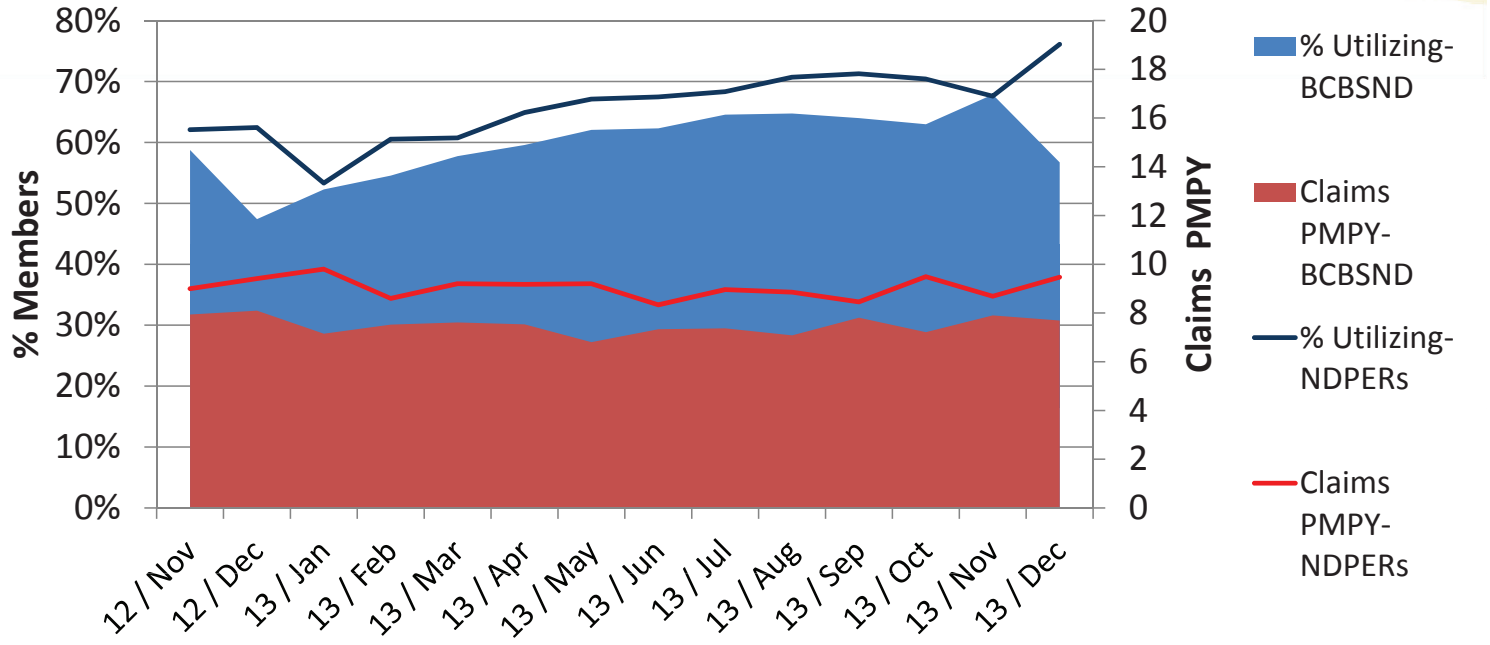
PMPM Plan and total paid amounts average $10-15 higher than monthly plan values



Monthly Utilization

20

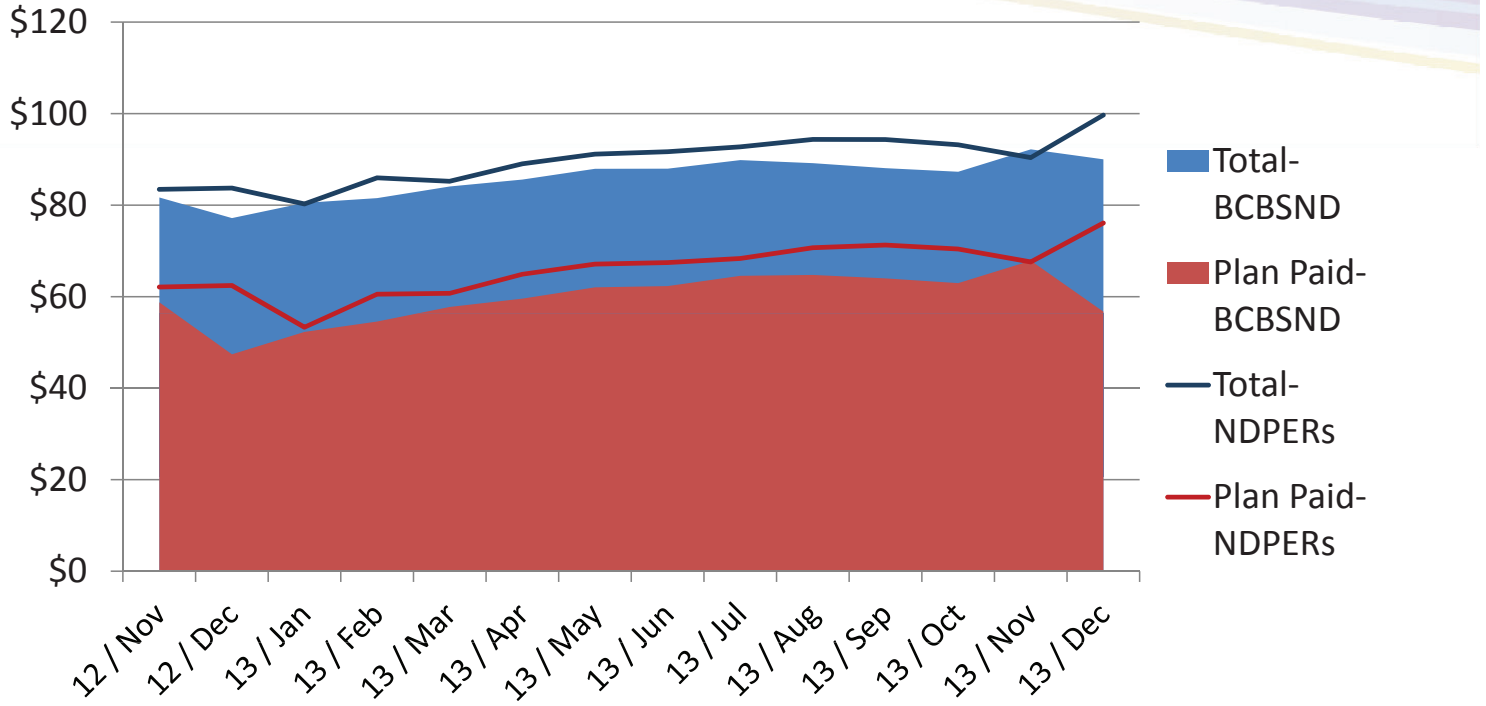
Utilization outpaces BCBSND average in both % of members and claims per member measures



Monthly Claims Costs

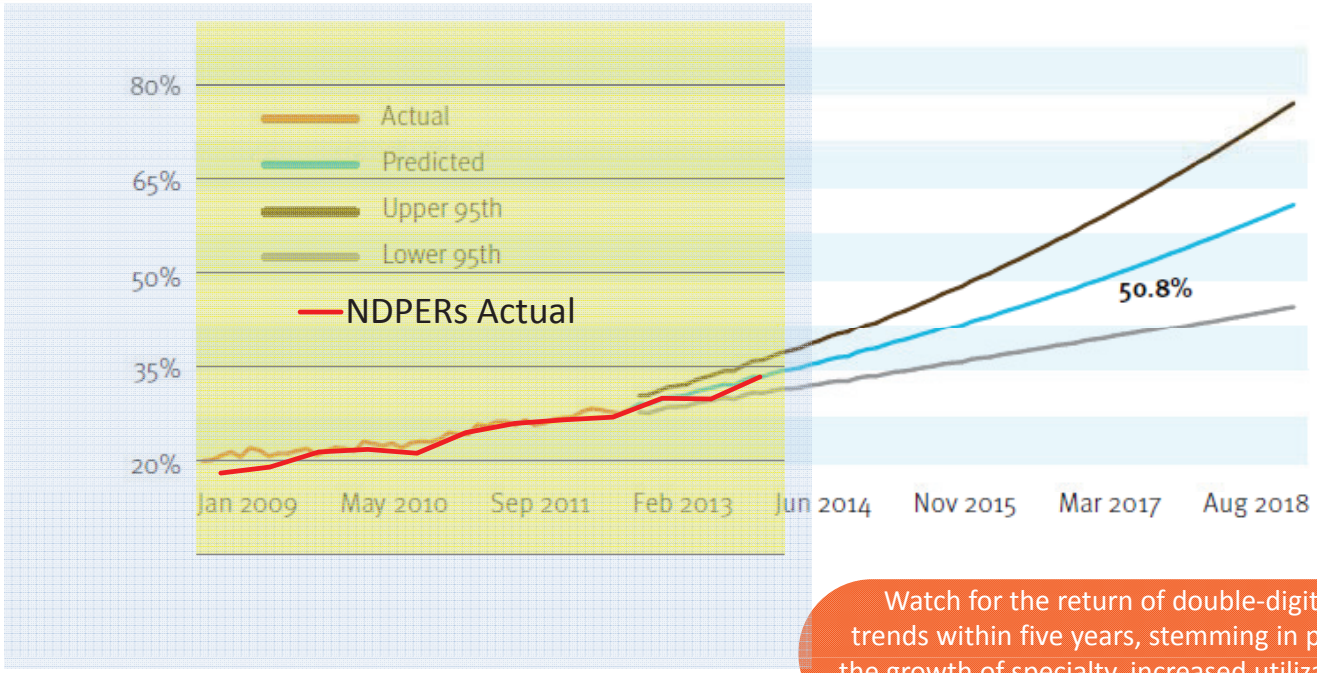
21

Average claims costs are higher than plan average



By 2018, more than 50 percent of all drug spend will be specialty

Fig. 10 **Specialty drug costs as a percentage of total drug spend**



Watch for the return of double-digit drug trends within five years, stemming in part from the growth of specialty, increased utilization and aging baby boomers

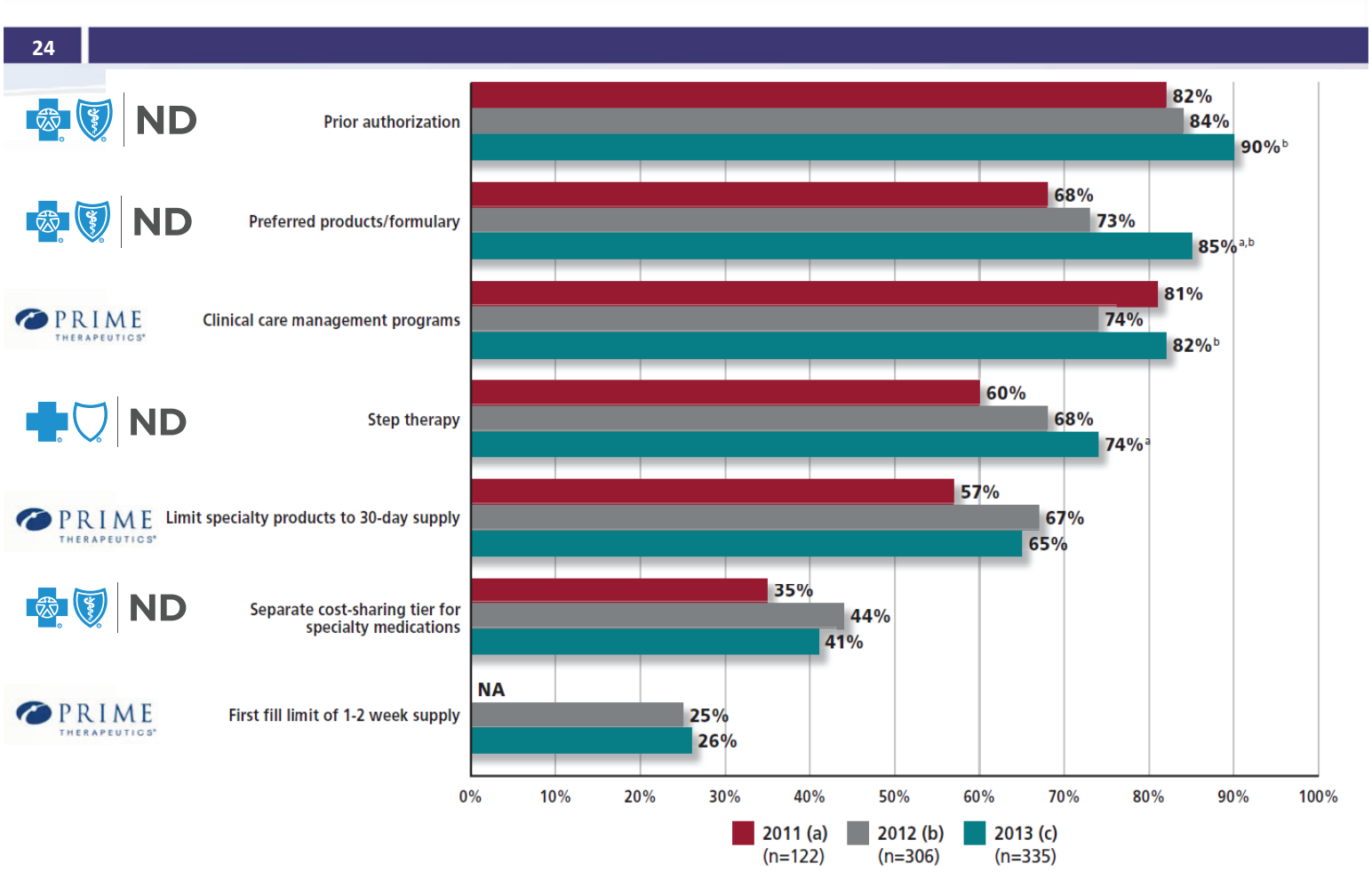
Research on National Trends

Web location available on request

Employer Surveys:

- EMD: 102 health Plans, 52% of commercial lives within geographical areas surveyed.
- Walgreens: 306 employers representing 17.6 million members, 62% in groups >5000.
- PBMI: 1st Published in 1995. 478 Plans, 22.5 million members.

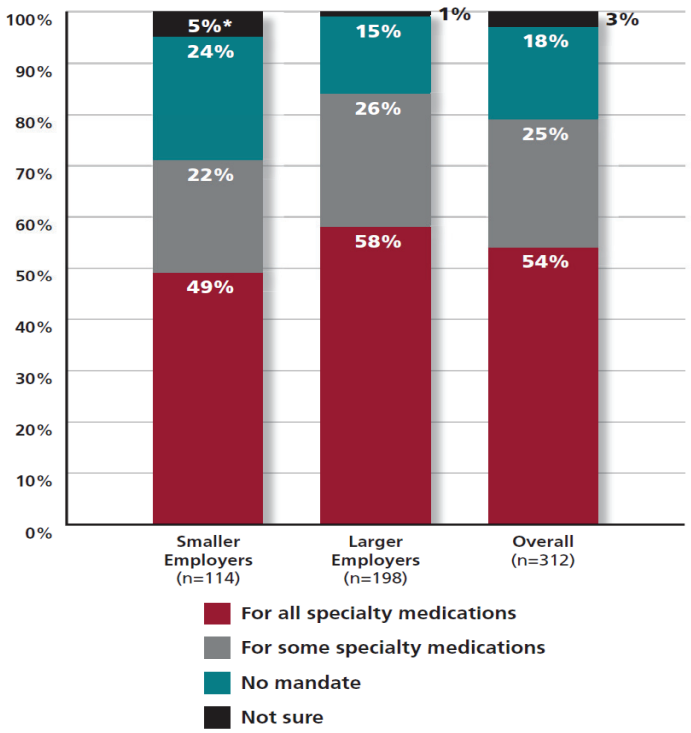
Specialty Drug Management includes patient, acquisition, handling, delivery and monitoring considerations.



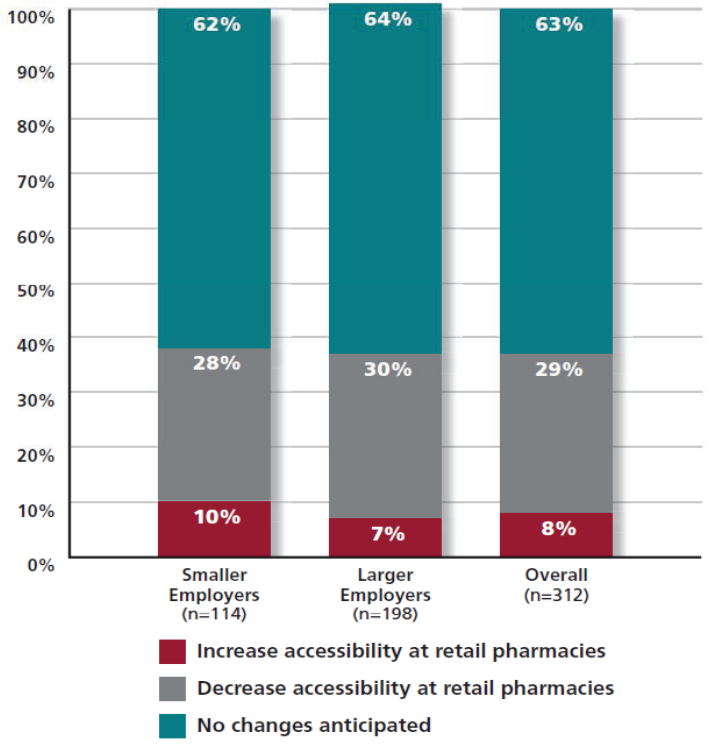
Managing Specialty (2014 specialty Drug Report)

25

Approximately 80% of employer groups use ***Channel Management***



Trends are to decrease access to retail channel



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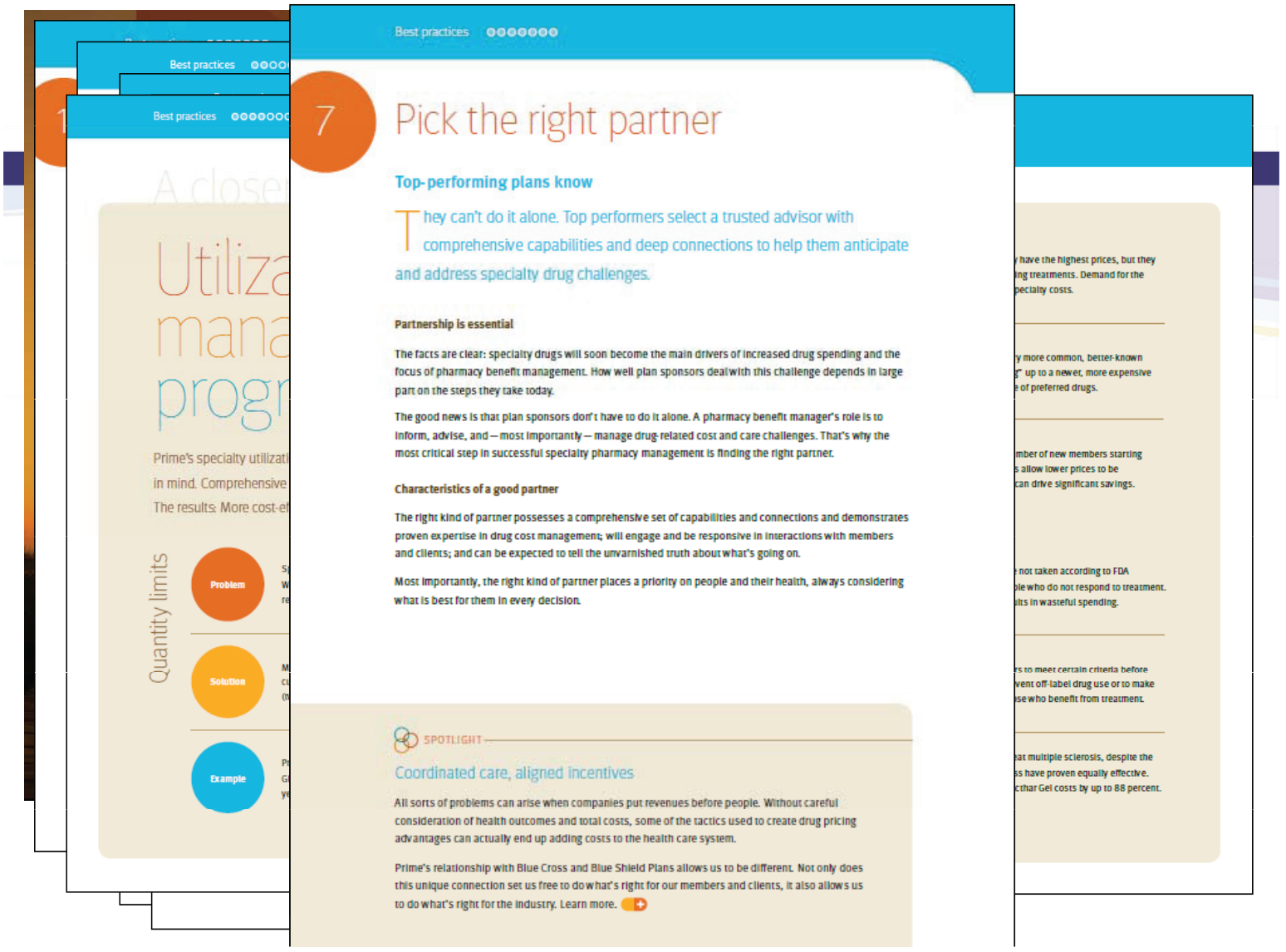
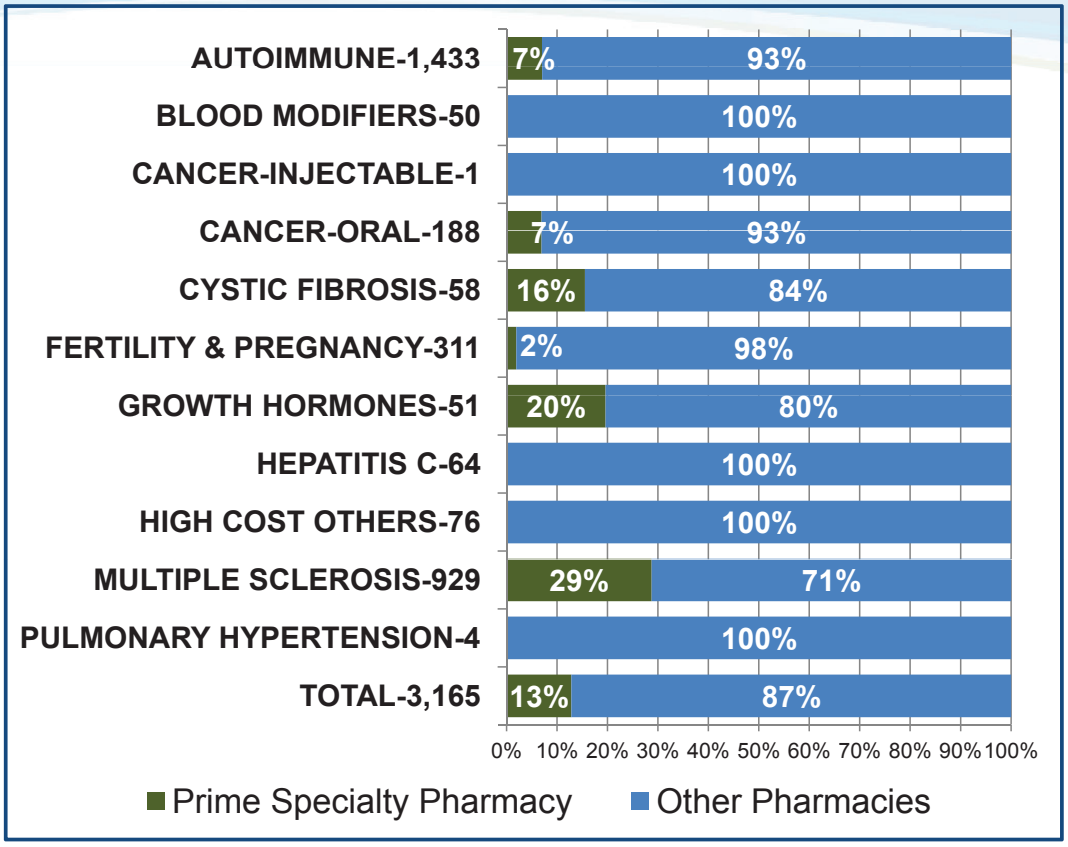

Best practices
7
Pick the right partner
Top-performing plans know
They can't do it alone. Top performers select a trusted advisor with comprehensive capabilities and deep connections to help them anticipate and address specialty drug challenges.
Partnership is essential
The facts are clear: specialty drugs will soon become the main drivers of increased drug spending and the focus of pharmacy benefit management. How well plan sponsors deal with this challenge depends in large part on the steps they take today.
The good news is that plan sponsors don't have to do it alone. A pharmacy benefit manager's role is to inform, advise, and — most importantly — manage drug-related cost and care challenges. That's why the most critical step in successful specialty pharmacy management is finding the right partner.
Characteristics of a good partner
The right kind of partner possesses a comprehensive set of capabilities and connections and demonstrates proven expertise in drug cost management; will engage and be responsive in interactions with members and clients; and can be expected to tell the unvarnished truth about what's going on.
Most importantly, the right kind of partner places a priority on people and their health, always considering what is best for them in every decision.
SPOTLIGHT
Coordinated care, aligned incentives
All sorts of problems can arise when companies put revenues before people. Without careful consideration of health outcomes and total costs, some of the tactics used to create drug pricing advantages can actually end up adding costs to the health care system.
Prime's relationship with Blue Cross and Blue Shield Plans allows us to be different. Not only does this unique connection set us free to do what's right for our members and clients, it also allows us to do what's right for the industry. Learn more.
Quantity limits
Problem
Solution
Example

Prime Specialty Campaign

27

PSP Campaign:

March 2013:
•284 targeted NDPERs Specialty Utilizers.
•33 new utilizers identified through close of 2013.
•PrimeSpecialty Pharmacy penetration remains low at 13% of claims.*



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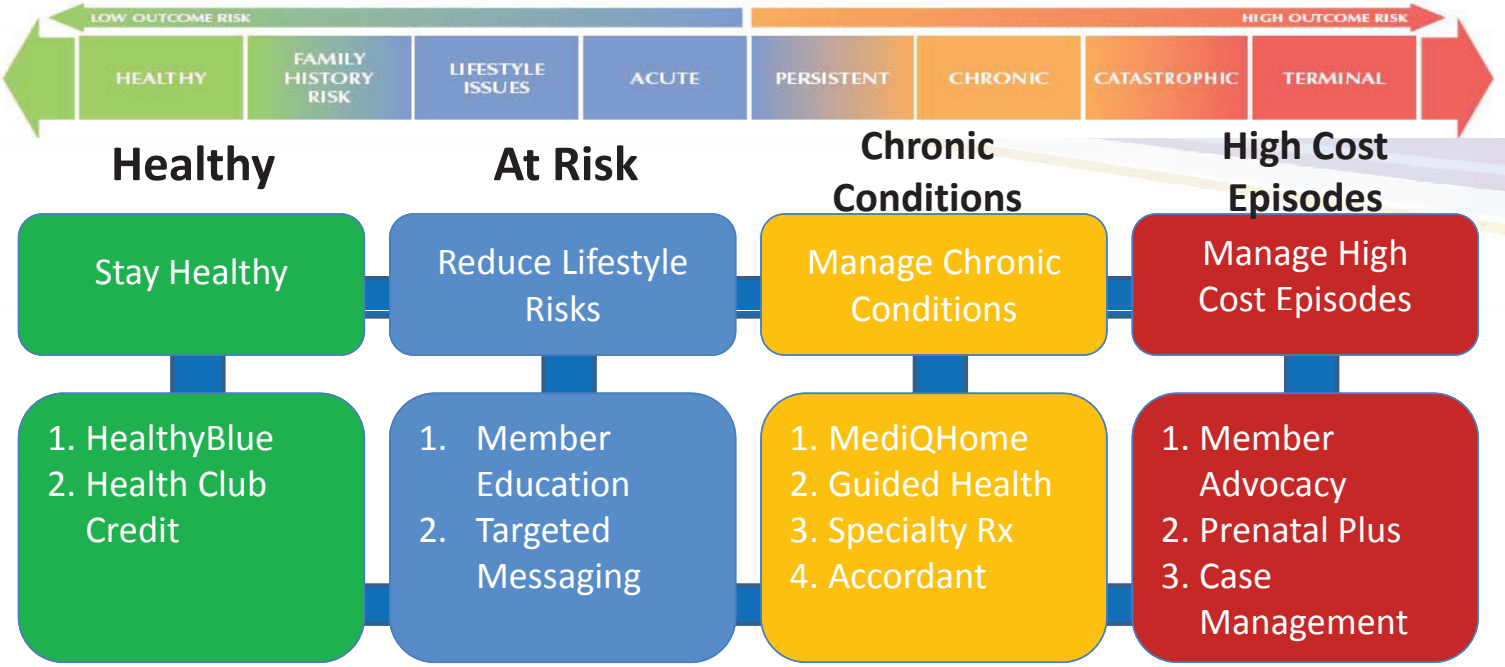
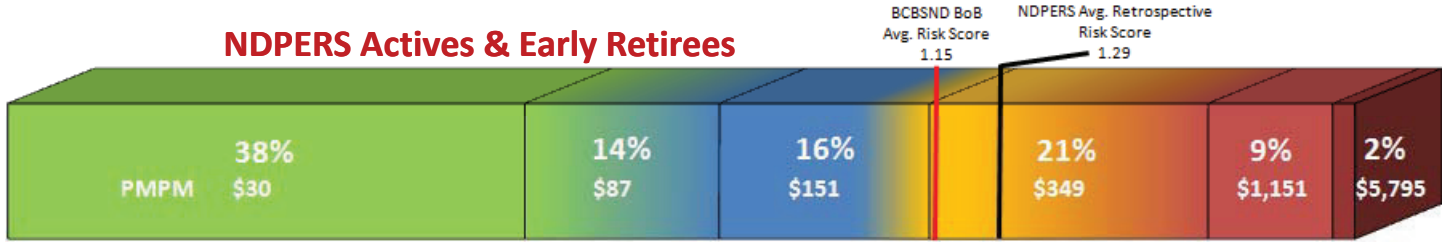
HEALTH MANAGEMENT

Well by Design





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Health Improvement Programs

30

Member Advocacy Program

- Currently following 6 Cases

Tobacco Cessation Program

- 53 members enrolled with 53 start dates
- 35 members had claims totaling $9,295
- Biennium Program Expenditures through 12/31: $10,132

AIM Specialty Health

- April 1, 2014
- Educational
- BCBSND will require case review for selected outpatient non-emergency diagnostic imaging services. (CT, MRI, etc.)

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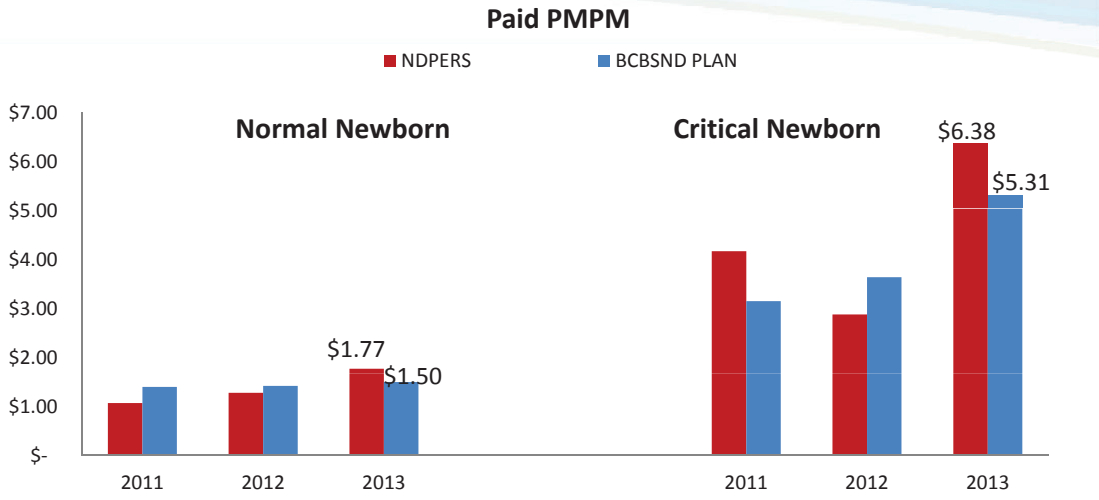
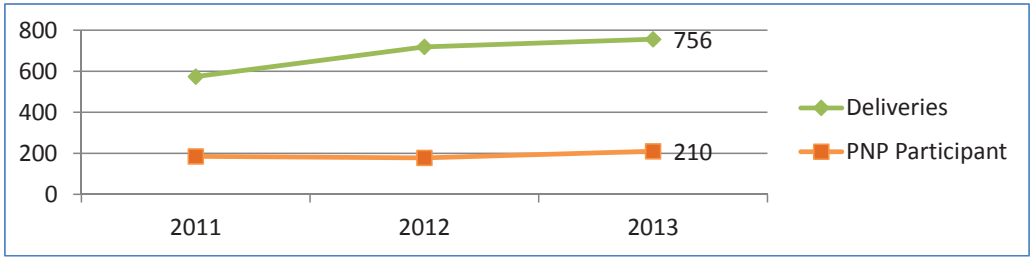
Newborns

Opportunity:

- Prenatal Plus Program
- Average of 28% participation over last 3 years





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Cancer Screening Measures

32

Performance Guarantees:

- Breast Cancer screening rates at 86%

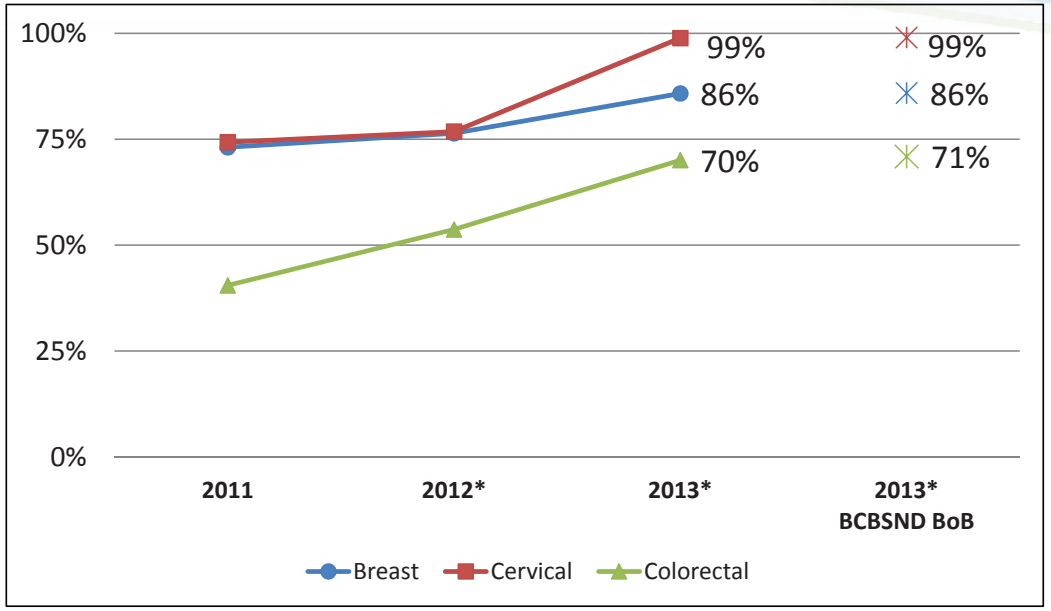
Goal = 80%

- Colorectal Cancer screening rates at 70%

Goal = 60%

- Cervical Cancer screening rates at 99%

Goal = 85%



**Supplemented with MediQHome*

Includes all NDPERS members who were active on NDPERS plan as of January 2014

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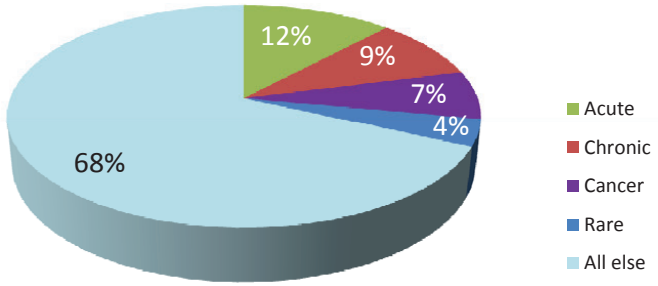
Top 10 Diseases

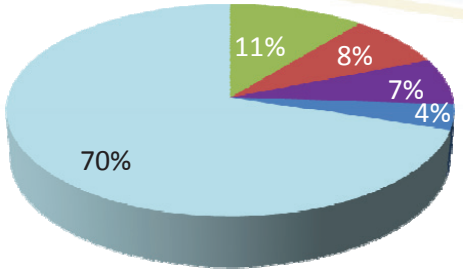
33

% of Total Spending by Disease Category

NDPERS – Actives/Early Retirees



BCBSND BoB



Rank	Disease	Disease Payment	Total Payment
1	Back and Spine, Pain or Condition	$7,909,341	$47,987,526
2	Osteoarthritis	$6,752,286	$18,570,630
3	Diabetes	$6,547,363	$34,165,186
4	Depression	$5,828,776	$54,695,307
5	Cancer, Breast	$5,071,348	$7,231,762
6	Multiple Sclerosis	$3,026,423	$4,568,316
7	CHF	$2,666,840	$7,051,448
8	Cancer, Leukemia	$2,605,960	$3,241,904
9	Hypertension	$2,379,092	$57,445,966
10	Rheumatoid Arthritis	$2,318,455	$5,042,309

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Cost Distribution

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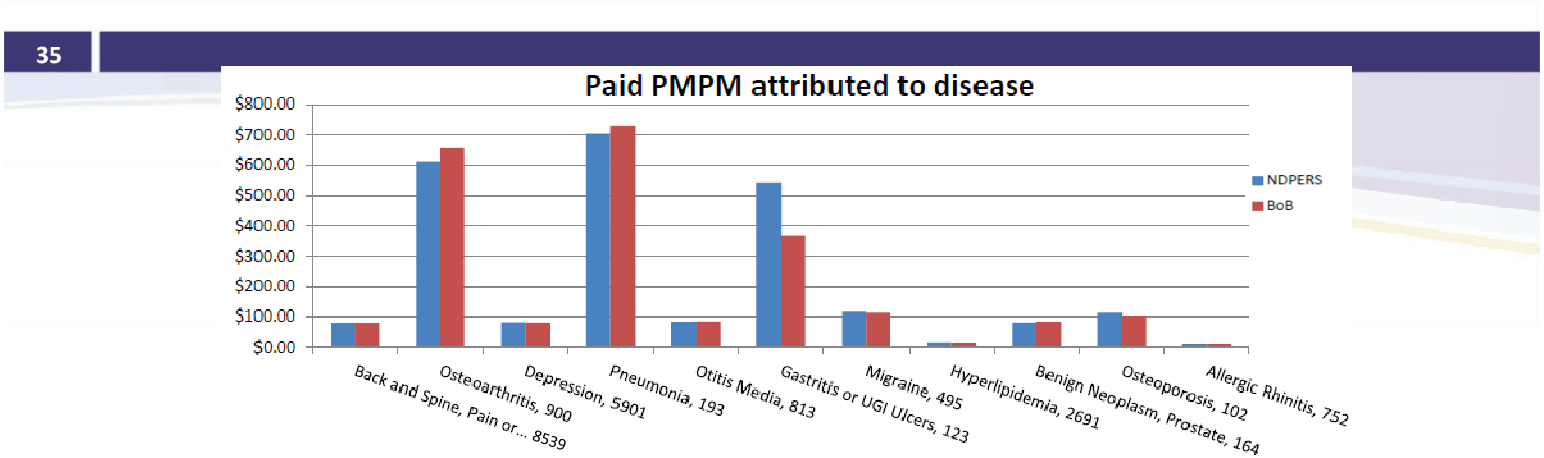
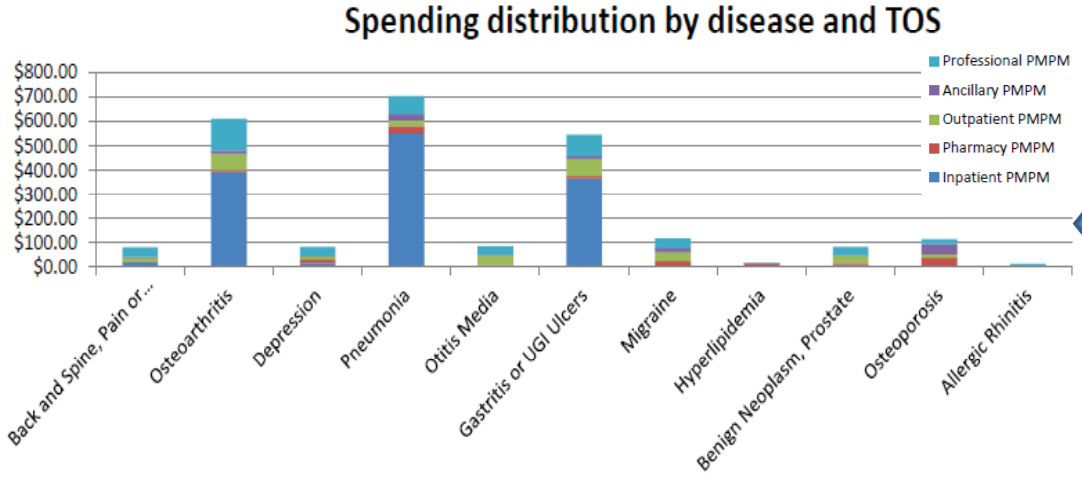
Top Acute Conditions





Inpatient & OP Spend
- ✓Pneumonia
- ✓Osteoarthritis
- ✓Gastritis/UGI Ulcers

Rx Spend
- ✓Osteoporosis
- ✓Pneumonia
- ✓Migraine

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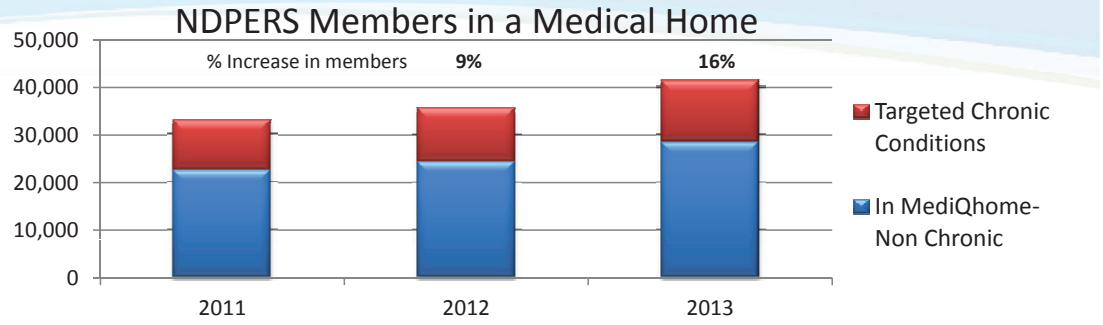
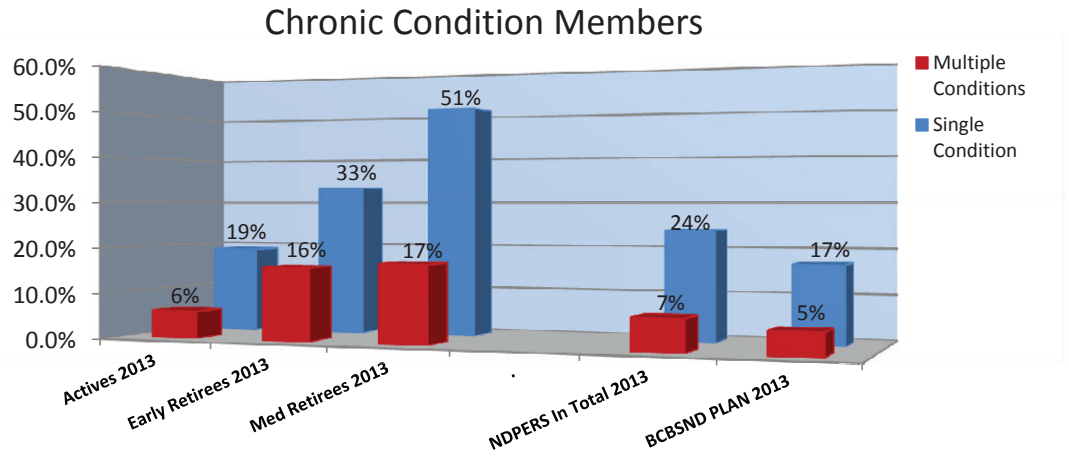
MediQHome

Performance Guarantee:

- 90% of NDPERS in state population identified in MQP

Goal = 80%





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MediQHome Findings

MediQHome Metrics	NDPERS	State Avg.	Target	% of Change
	2013	2013		From 2012
Hypertension Prevalence	23%	16%	<16%	-1%
% Overweight/Obese	73%	72%	<72%	-1%
Average BMI	29.5	29.2	<29.2	-0.1%
Optimal Diabetes Compliance	27%	24%	>24%	3%
Optimal CAD Compliance	37%	34%	>34%	6%
Hypertension Control	76%	75%	>75%	2%

Green - Exceeding Target Goal
Yellow - Exceeding State Baseline
Red - Below State Baseline

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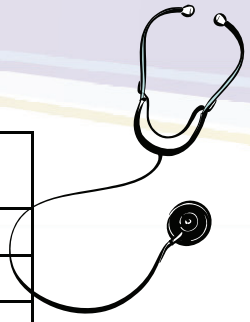
AccordantCare

38

Rare and complex condition disease management

- 17 conditions



❖ Chronic Inflammatory Demyelinating Polyradiculoneuropathy (CIDP)	❖ Systemic Lupus Erythematosus
❖ Crohn's	❖ Multiple Sclerosis
❖ Dermatomyositis	❖ Myasthenia Gravis
❖ Gaucher Disease	❖ Parkinson's Disease
❖ Hemophilia	❖ Polymyositis
❖ ALS (Lou Gehrig's)	❖ Rheumatoid Arthritis
❖ Seizure Disorder	❖ Scleroderma
❖ Sickle Cell Disease	❖ Cystic Fibrosis
❖ Ulcerative Colitis	

	Active	Early Retiree	Medicare Retiree
Participation Rate	57% (266 members)	69% (20 members)	63% (27 members)

BCBSND BoB participation rate - 58%

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Health Club Credit & HealthyBlue

39

Performance Guarantees:

Health Club Credit
- Members receiving credit will increase 10% - 2013 compared to 2014

Baseline: 1,979
Goal =2,177

HealthyBlue
- Incentives paid will increase by 10% over 2013 rate

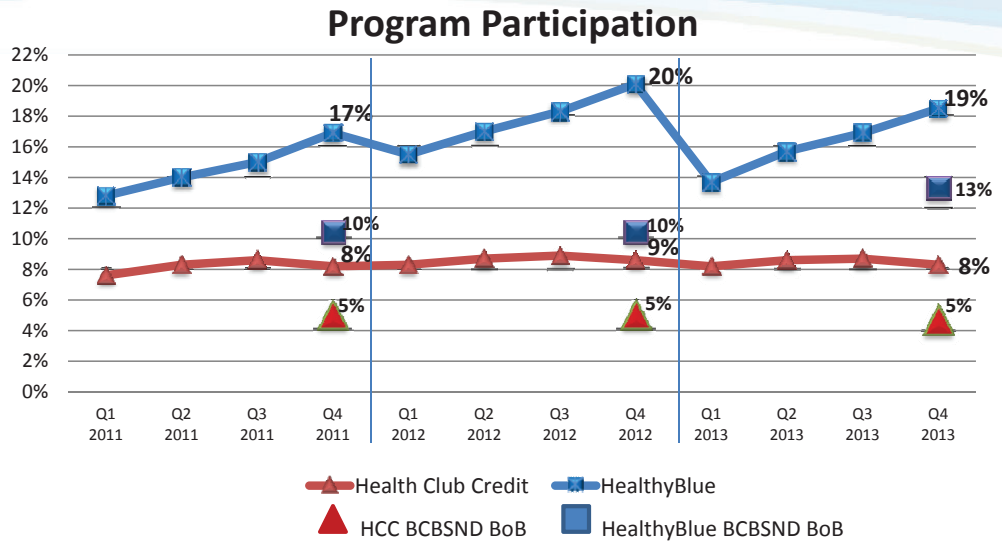
Baseline: $528,907
Goal = $581,798

- HRA Completions by 12/31/2014

Goal = 17%

- HRA score: 5% point increase by 12/31/2014

Baseline: 52
Goal = 55



Health Club Credit	2013
Credits Paid	$492,294
Members receiving credit	1,979

HealthyBlue	2013
Redemptions	$528,907
HRA Completions	8,087
HRA Score	52

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HealthyBlue Program Results

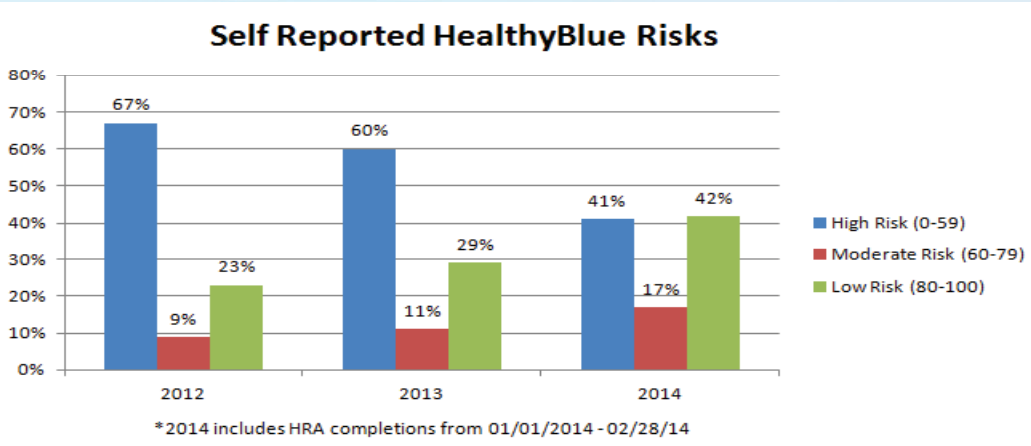
40

Key Points

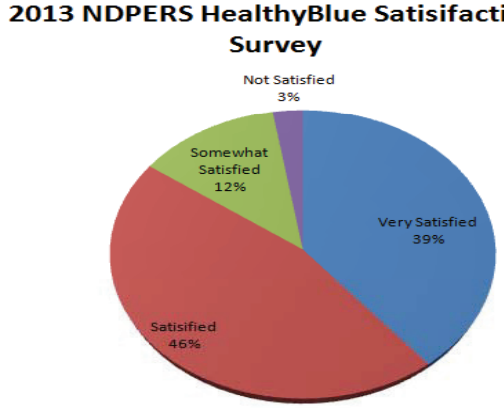
- 43,682 eligible members
- 97% of users are satisfied with HealthyBlue

"I joined HealthyBlue because of the benefits of improving my health." –NDPERS Member

"The HealthyBlue website has reinvigorated our wellness program." -NDPERS Wellness Coordinator

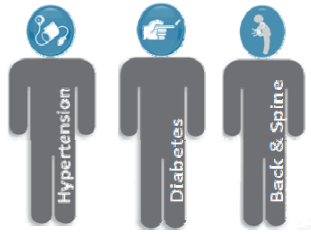


*2014 includes HRA completions from 01/01/2014 - 02/28/14



OPPORTUNITIES

2014 Focus Areas



- **Excite**
  - Promote mobile app functionality
  - Promote devices
  - Wellness Star of the Month
- **Engage**
  - Lt. Governor's Award
  - National Walk @ Lunch Day
- **Empower**
  - Targeted Messaging
  - Guided Tutorials

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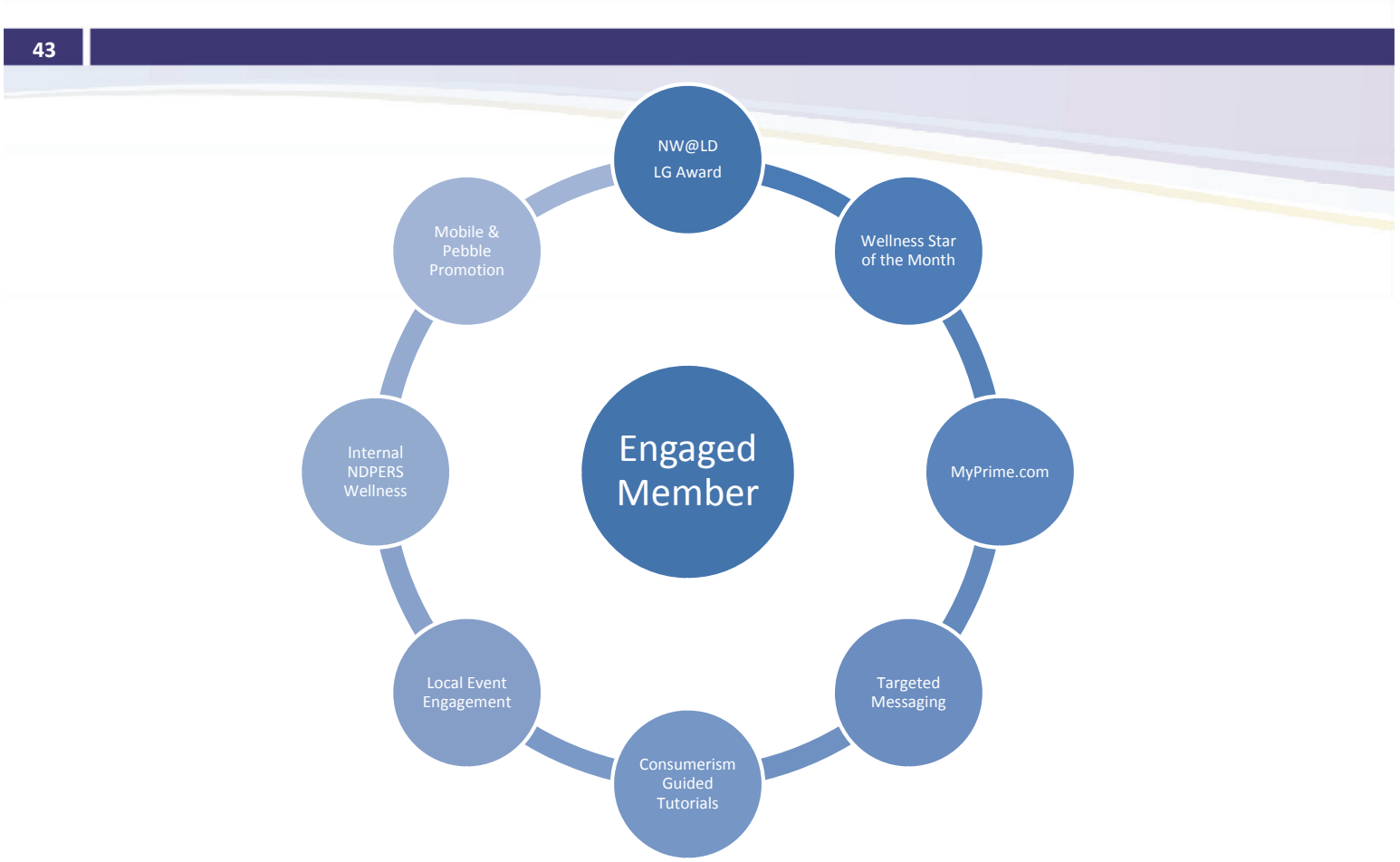
2014 Focus Areas



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Performance Standards and Guarantees

44

Measure	Goal	12/31/2013
Cost Management (measurement period : by 12-31-14)		
HRA Completions	17%	19%
HRA Score	5% point increase in the 2013 NDPERS group aggregate HRA wellness score 55	52
HealthyBlue - incentives paid	10% increase over 2013 incentives paid $581,798	$528,907
Health Club Credit - members receiving credit	10% increase over 2013 members receiving credit 2,177	1,979
Health Outcomes:		
Members enrolled in a Medical Home	80%	90%
Breast Cancer Screening Rates*	80%	86%
Cervical Cancer Screening Rates*	85%	99%
Colorectal Cancer Screening Rates*	60%	70%
Operational Performance:		
Claims Financial Accuracy	99%	98%
Payment Incident Accuracy	97%	99%
Claim Timeliness	99%	99%
Average Speed of Answer (in seconds)	30 seconds or less	25
Call Abandonment Rate	5% or less	2%
Provider Network Management:		
NDPERS PPO network	92% (or more) participation	99.6%
Provider Discount for non-Medicare contracts	30% or more	53%

**Cancer screening rates are a culmination of MediQHome and Optum claims data*

Green – meeting goal
Red – below goal
Purple – neither above nor below

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Future Considerations

- Telehealth
- Gamification
- Specialty Pharmacy
- Cost sharing adjustments allowed within a Grandfathered plan
  - Office Visit Copay
  - Emergency Room Copay
  - Rx Copay & Coinsurance Maximum

Restricted and/or Confidential

QUESTIONS?

Attachment 8

Attachment 8

Sample of Health Intelligenc Employer Profile Report

Employer Profile

Report Timeframe: 01/01/2012 - 03/31/2014

Employer Name: SAMPLE GROUP

Employer ID: 019301

Product: PREFERRED BLUE PPO

Member Category 1: ALL

Member Category 2: ALL

Average Number of Members: 3,943.3

Average Age: 29.2

Relative Health Risk: 0.99

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Employer Name: SAMPLE GROUP

Product: PREFERRED BLUE PPO

Current Incurred Period: 01/01/2013 - 12/31/2013, Paid Through 03/31/2014

Prior Incurred Period: 01/01/2012 - 12/31/2012, Paid Through 03/31/2014

Executive Summary

Key performance metrics

		Employer Group			Benchmark		
		Current Period	Prior Period	% Change	Current Period	Prior Period	% Change
Demographics	Average Number of Members	3,943.3	3,540.5	11.4%	-	-	0.0%
	Average Members per Contract	2.4	2.4	-0.4%	-	-	0.0%
	Average Age	29.2	29.7	-1.7%	-	-	0.0%
	Relative Health Risk	0.99	1.02	-3.1%	0.96	0.99	-2.2%
	In-Network Utilization (% cost)	100.0%	100.0%	0.0%	100.0%	100.0%	0.0%
Encounters per 1,000 Members	Inpatient Admits	68.98	75.97	-9.2%	64.13	65.90	-2.7%
	Days per 1,000	255.36	357.00	-28.5%	272.92	274.40	-0.5%
	Average LOS	3.70	4.70	-21.2%	4.26	4.16	2.2%
	Outpatient Services/Visits	1,406	1,417	-0.8%	1,570	1,626	-3.5%
	Professional Services/Visits	9,955	10,249	-2.9%	9,865	9,877	-0.1%
	Ancillary Services	1,714	1,748	-1.9%	1,528	1,570	-2.6%
	Pharmacy Prescriptions	7,092	7,415	-4.4%	7,003	7,224	-3.1%
Cost per Encounter	Inpatient	$11,280	$12,185	-7.4%	$13,081	$12,693	3.1%
	Outpatient	$526	$536	-2.0%	$418	$402	4.0%
	Professional	$98	$96	1.6%	$103	$99	4.5%
	Ancillary	$140	$156	-9.9%	$148	$137	7.7%
	Pharmacy	$48	$45	6.9%	$54	$49	10.7%
Employee Cost Sharing PMPM	Total Medical	$40.53	$40.53	0.0%	$42.87	$42.68	0.4%
	Deductible	$11.64	$11.90	-2.2%	$18.70	$18.04	3.7%
	Coinsurance	$19.23	$18.72	2.7%	$16.09	$16.43	-2.0%
	Copayment	$9.67	$9.91	-2.4%	$8.08	$8.22	-1.7%
	Total Pharmacy	$10.44	$11.06	-5.6%	$11.47	$12.10	-5.2%
High Cost Cases (>$25,000 in Claim Costs)	Prevalence - % of All Members	1.9%	2.1%	-12.1%	-	-	0.0%
	Cost PMPM	$5,672.59	$6,104.77	-7.1%	-	-	0.0%
Pharmacy Use Patterns	Generic Utilization	80.4%	77.8%	3.4%	81.0%	77.9%	4.0%
	Formulary Utilization	88.5%	88.6%	-0.1%	88.0%	88.1%	-0.1%
	Mail Order Utilization	0.1%	0.0%	306.8%	0.0%	0.0%	0.0%

Employer Name: SAMPLE GROUP

Product: PREFERRED BLUE PPO

Current Incurred Period: 01/01/2013 - 12/31/2013, Paid Through 03/31/2014

Prior Incurred Period: 01/01/2012 - 12/31/2012, Paid Through 03/31/2014

Account Summary

Distribution of cost by service category

	Employer Group					Benchmark				
	Cost Distribution		Cost PMPM			Cost Distribution		Cost PMPM		
Service Category	Current Period	Prior Period	Current Period	Prior Period	% Change	Current Period	Prior Period	Current Period	Prior Period	% Change
Ancillary (excluding Home Health/Hospice Visits)	7.6%	8.1%	$19.51	$22.25	-12.3%	7.0%	6.9%	$18.30	$17.46	4.8%
Home Health/Hospice Visits	0.2%	0.2%	$0.53	$0.42	25.0%	0.2%	0.2%	$0.49	$0.46	6.1%
Facility Inpatient	25.3%	28.2%	$64.84	$77.15	-16.0%	26.9%	27.6%	$69.91	$69.71	0.3%
Emergency Room	1.8%	1.5%	$4.54	$4.18	8.7%	1.3%	1.3%	$3.45	$3.35	3.1%
Facility Outpatient (excluding ER)	22.3%	21.6%	$57.02	$59.14	-3.6%	19.7%	20.2%	$51.24	$51.14	0.2%
Pharmacy	11.2%	10.2%	$28.65	$28.02	2.3%	12.2%	11.6%	$31.57	$29.43	7.3%
Laboratory	1.6%	1.5%	$4.18	$4.08	2.4%	1.7%	1.7%	$4.30	$4.33	-0.9%
Mental Health	0.2%	0.9%	$0.57	$2.56	-77.9%	0.2%	1.4%	$0.65	$3.45	-81.2%
Office Visits	6.6%	6.1%	$17.02	$16.77	1.5%	6.9%	6.7%	$17.91	$16.94	5.7%
Professional Services (excluding Laboratory, Mental Health, Office Visits & Radiology)	20.5%	18.2%	$52.49	$49.82	5.4%	20.9%	19.3%	$54.31	$48.73	11.4%
Radiology	2.7%	3.3%	$6.92	$9.05	-23.5%	2.9%	3.1%	$7.54	$7.71	-2.3%
Total	**100.0%**	**100.0%**	**$256.28**	**$273.44**	**-6.3%**	**100.0%**	**100.0%**	**$259.67**	**$252.72**	**2.7%**
Member Months	**47,320**	**42,486**								
Total Costs	**$12,126,954**	**$11,617,296**								

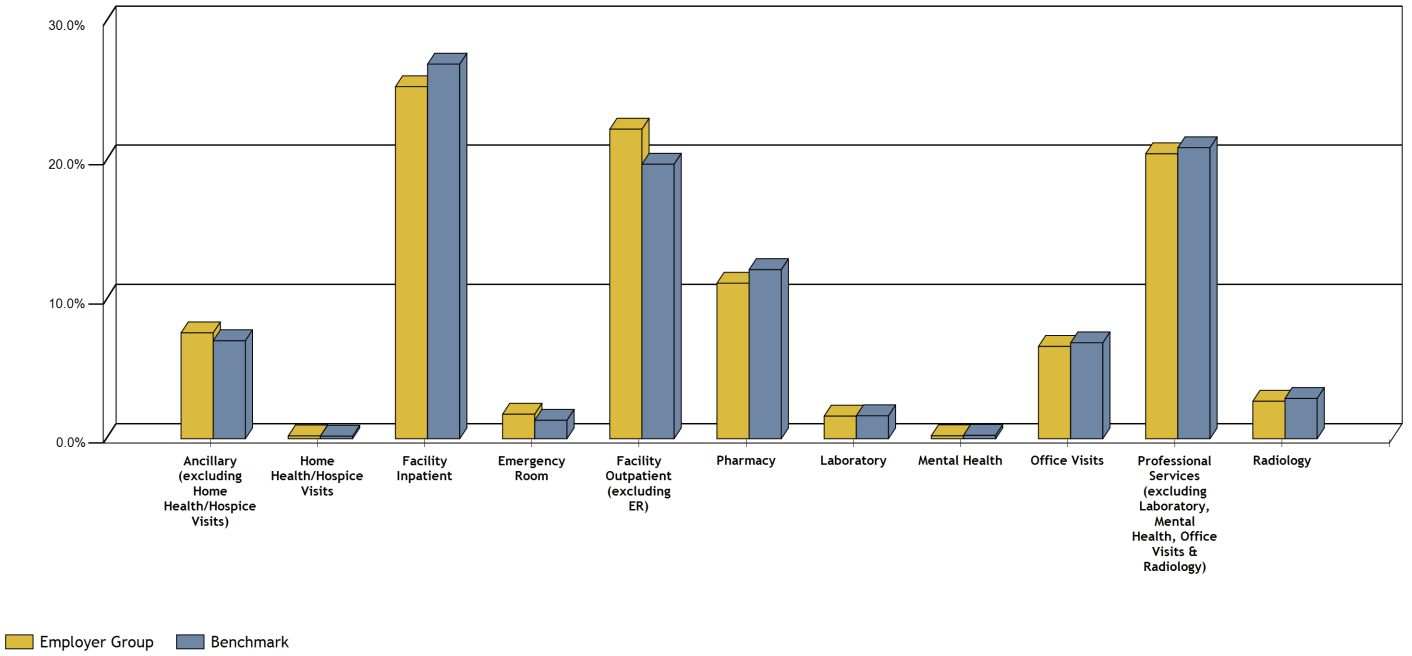
Employer Name: SAMPLE GROUP

Product: PREFERRED BLUE PPO

Current Incurred Period: 01/01/2013 - 12/31/2013, Paid Through 03/31/2014

Prior Incurred Period: 01/01/2012 - 12/31/2012, Paid Through 03/31/2014

Cost Distribution - Current Period
Employer Group versus Benchmark

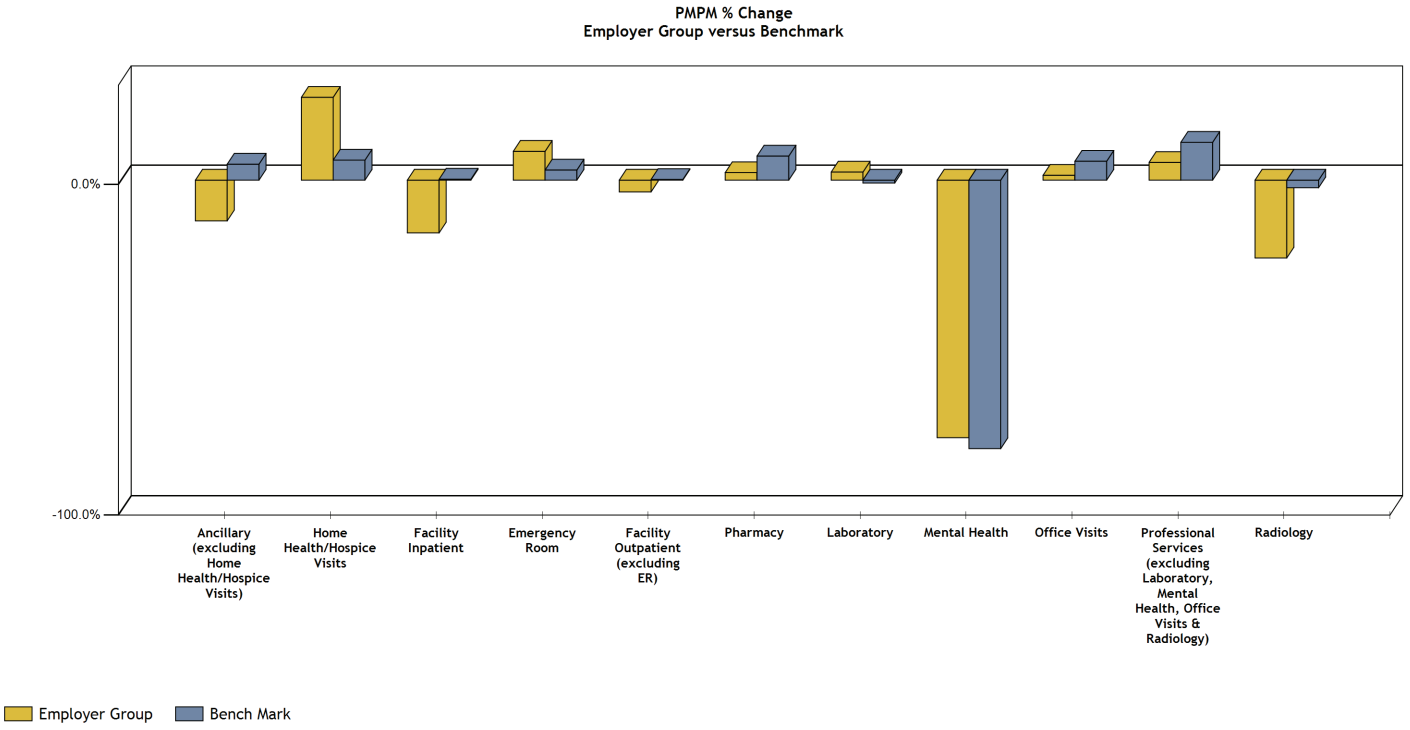


Employer Name: SAMPLE GROUP

Product: PREFERRED BLUE PPO

Current Incurred Period: 01/01/2013 - 12/31/2013, Paid Through 03/31/2014

Prior Incurred Period: 01/01/2012 - 12/31/2012, Paid Through 03/31/2014



Employer Name: SAMPLE GROUP

Product: PREFERRED BLUE PPO

Current Incurred Period: 01/01/2013 - 12/31/2013, Paid Through 03/31/2014

Prior Incurred Period: 01/01/2012 - 12/31/2012, Paid Through 03/31/2014

Membership Trend by Contract Type

Average number of contracts by quarter by contract type

Contract Type	Q1	Q2	Q3	Q4	Q5	Q6	Q7	Q8	Average Current Period	Average Prior Period	% Change
FAMILY	647.7	660.7	684.3	691.7	710.3	726.7	739.3	747.0	730.8	671.1	8.9%
SINGLE	580.3	591.7	617.7	638.3	664.7	685.7	718.7	754.7	705.9	607.0	16.3%
SPD	166.7	176.7	173.3	177.7	176.3	180.3	187.0	204.3	187.0	173.6	7.7%
Total Contracts	1,394.7	1,429.0	1,475.3	1,507.7	1,551.3	1,592.7	1,645.0	1,706.0	1,623.8	1,451.7	11.9%
Average Members	3,400.0	3,490.0	3,593.7	3,678.3	3,802.3	3,891.7	3,990.3	4,089.0	3,943.3	3,540.5	11.4%
Average Members per Contract	2.44	2.44	2.44	2.44	2.45	2.44	2.43	2.40	2.43	2.44	-0.4%

Employer Name: SAMPLE GROUP

Product: PREFERRED BLUE PPO

Current Incurred Period: 01/01/2013 - 12/31/2013, Paid Through 03/31/2014

Prior Incurred Period: 01/01/2012 - 12/31/2012, Paid Through 03/31/2014

Summary Trend by Major Type of Service

Quarterly costs by major type of service

	Employer Group							
	Prior Period				Current Period			
Service Category	**Q1**	**Q2**	**Q3**	**Q4**	**Q5**	**Q6**	**Q7**	**Q8**
Facility Inpatient Cost	$641,080	$755,287	$990,815	$890,521	$932,746	$487,403	$983,026	$665,081
Cost PMPM	$62.85	$72.14	$91.90	$80.70	$81.77	$41.75	$82.12	$54.22
Facility Outpatient Cost	$750,174	$643,138	$702,967	$593,830	$558,722	$711,442	$782,897	$860,195
Cost PMPM	$73.55	$61.43	$65.20	$53.81	$48.98	$60.94	$65.40	$70.12
Professional Services Cost	$773,239	$813,166	$945,688	$963,733	$845,292	$854,516	$1,027,055	$1,114,312
Cost PMPM	$75.81	$77.67	$87.72	$87.33	$74.10	$73.19	$85.80	$90.84
Ancillary Cost	$254,182	$282,678	$194,710	$231,799	$216,728	$186,550	$192,789	$352,271
Cost PMPM	$24.92	$27.00	$18.06	$21.01	$19.00	$15.98	$16.10	$28.72
Total Medical Cost	$2,418,674	$2,494,270	$2,834,181	$2,679,883	$2,553,488	$2,239,910	$2,985,766	$2,991,859
Cost PMPM	$237.12	$238.23	$262.89	$242.85	$223.85	$191.86	$249.42	$243.89
Total Pharmacy Cost	$284,958	$288,870	$306,295	$310,165	$290,156	$340,705	$349,179	$375,891
Cost PMPM	$27.94	$27.59	$28.41	$28.11	$25.44	$29.18	$29.17	$30.64
Total Costs	**$2,703,632**	**$2,783,139**	**$3,140,476**	**$2,990,048**	**$2,843,644**	**$2,580,615**	**$3,334,946**	**$3,367,750**
Total Costs PMPM	**$265.06**	**$265.82**	**$291.30**	**$270.96**	**$249.29**	**$221.04**	**$278.59**	**$274.54**
% In-Network	**100.0%**	**100.0%**	**100.0%**	**100.0%**	**100.0%**	**100.0%**	**100.0%**	**100.0%**

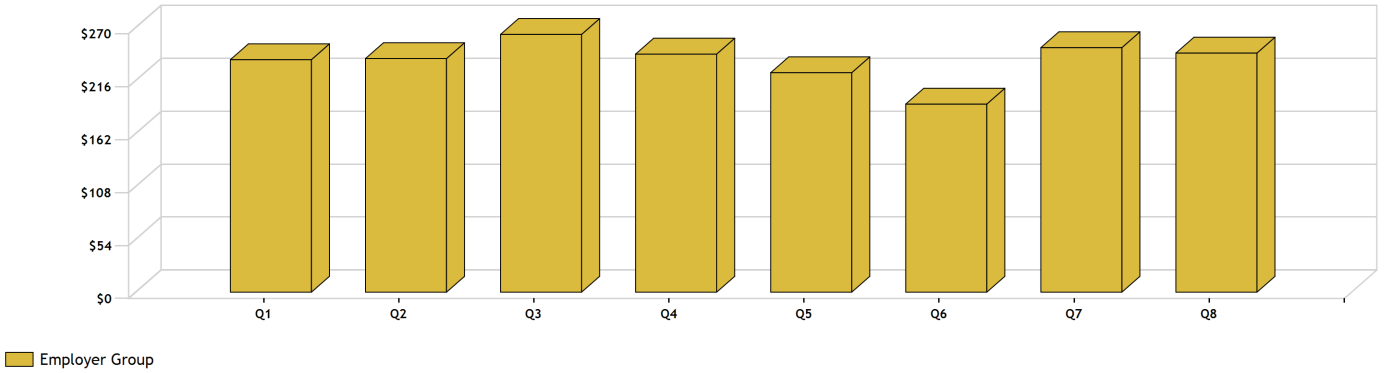
Employer Name: SAMPLE GROUP

Product: PREFERRED BLUE PPO

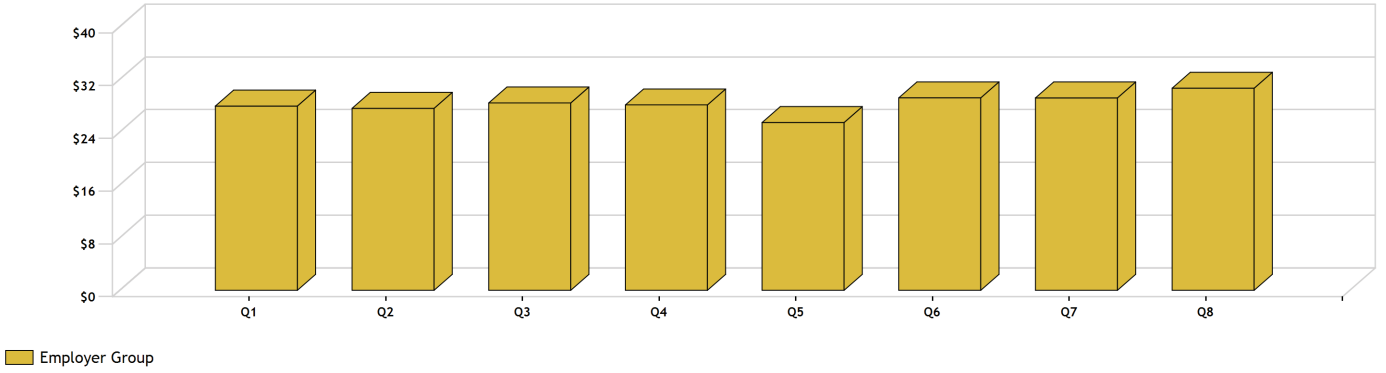
Current Incurred Period: 01/01/2013 - 12/31/2013, Paid Through 03/31/2014

Prior Incurred Period: 01/01/2012 - 12/31/2012, Paid Through 03/31/2014

Total Medical PMPM



Total Pharmacy PMPM



Employer Name: SAMPLE GROUP

Product: PREFERRED BLUE PPO

Current Incurred Period: 01/01/2013 - 12/31/2013, Paid Through 03/31/2014

Prior Incurred Period: 01/01/2012 - 12/31/2012, Paid Through 03/31/2014

Membership Distribution by Age and Gender

	Employer Group											
	Current Period						Prior Period					
	Males		Females		Total		Males		Females		Total	
Age Range	Average Members	% of Total	Average Members	% of Total	Average Members	% of Total	Average Members	% of Total	Average Members	% of Total	Average Members	% of Total
00-17	650.8	28.3%	596.8	36.4%	1,247.7	31.6%	569.3	27.5%	516.3	35.1%	1,085.5	30.7%
18-30	526.7	22.9%	338.3	20.6%	865.0	21.9%	467.7	22.6%	300.1	20.4%	767.8	21.7%
31-44	565.9	24.6%	347.8	21.2%	913.7	23.2%	497.7	24.0%	309.6	21.0%	807.3	22.8%
45-64	527.0	22.9%	340.3	20.8%	867.3	22.0%	505.6	24.4%	332.3	22.6%	837.9	23.7%
65-74	32.0	1.4%	16.6	1.0%	48.6	1.2%	28.3	1.4%	12.8	0.9%	41.1	1.2%
75+	1.2	0.1%	0.0	0.0%	1.2	0.0%	1.0	0.0%	0.0	0.0%	1.0	0.0%
Total	2,303.6	100.0%	1,639.7	100.0%	3,943.3	100.0%	2,069.5	100.0%	1,471.0	100.0%	3,540.5	100.0%

Employer Name: SAMPLE GROUP

Product: PREFERRED BLUE PPO

Current Incurred Period: 01/01/2013 - 12/31/2013, Paid Through 03/31/2014

Prior Incurred Period: 01/01/2012 - 12/31/2012, Paid Through 03/31/2014

Membership Health Risk Distribution

Cost and membership distribution by member health risk (based on member attributes as of their last active date within the time period)

	Employer Group				
		Current Period		Prior Period	
Relative Health Risk Range	Total Cost	Member Month Distribution	Cost Distribution	Member Month Distribution	Cost Distribution
0.00 - 0.3063	$601,479	48.6%	4.9%	47.4%	4.9%
0.3063 - 0.6152	$535,396	13.4%	4.4%	14.7%	5.0%
0.6152 - 1.1350	$1,046,885	13.8%	8.6%	13.6%	7.1%
1.1350 - 2.9306	$3,302,544	16.1%	27.0%	16.0%	22.2%
2.9306 - 8.8022	$3,508,357	7.0%	28.7%	7.0%	31.1%
> 8.8022	$3,243,581	1.1%	26.5%	1.3%	29.8%
No Med Elig	$0	0.0%	0.0%	0.0%	0.0%
Total	**$12,238,243**	**100.0%**	**100.0%**	**100.0%**	**100.0%**

	Employer Group
Relative Health Risk - Current Period	**0.99**
Relative Health Risk - Prior Period	**1.02**
Average Number of Members - Current Period	**3,943.3**
Average Number of Members - Prior Period	**3,540.5**

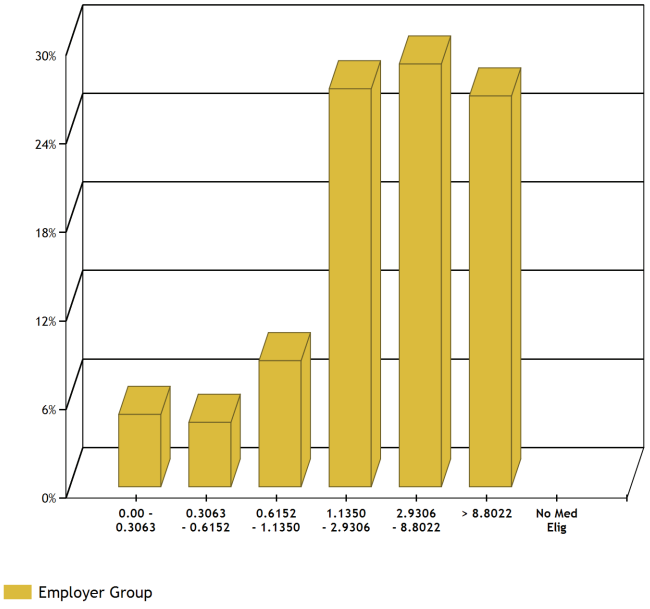
Employer Name: SAMPLE GROUP

Product: PREFERRED BLUE PPO

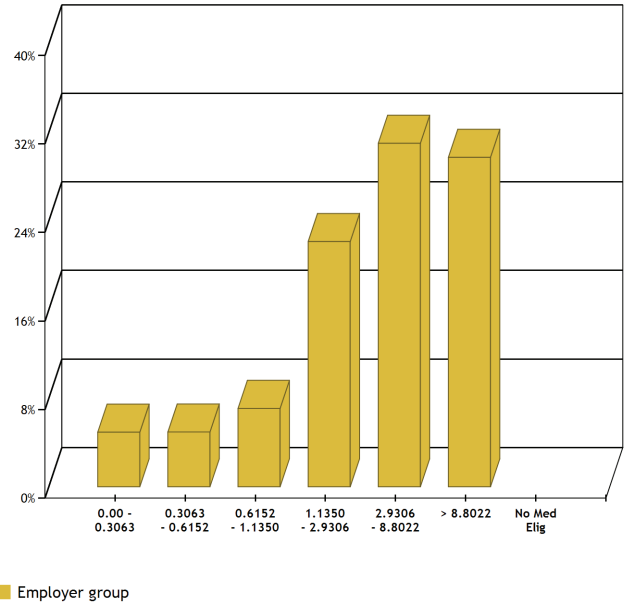
Current Incurred Period: 01/01/2013 - 12/31/2013, Paid Through 03/31/2014

Prior Incurred Period: 01/01/2012 - 12/31/2012, Paid Through 03/31/2014

Cost Distribution By Risk Range
Current Period



Cost Distribution By Risk Range
Prior Period



Employer Name: SAMPLE GROUP

Current Incurred Period: 01/01/2013 - 12/31/2013, Paid Through 03/31/2014

Product: PREFERRED BLUE PPO

Medical Claims Distribution

Distribution of member months and claim cost

	Employer Group				
Cost Range	Member Months	Member Month Distribution	Total Cost	Cost Distribution	Cost PMPM
Less than $50	10,523	22.2%	$4,454	0.0%	$0.42
$50 - $99	3,064	6.5%	$20,171	0.2%	$6.58
$100 - $249	6,059	12.8%	$86,401	0.8%	$14.26
$250 - $499	6,184	13.1%	$170,738	1.6%	$27.61
$500 - $999	6,119	12.9%	$321,500	3.0%	$52.54
$1,000 - $2,499	6,498	13.7%	$744,933	6.9%	$114.64
$2,500 - $4,999	3,666	7.7%	$997,004	9.3%	$271.96
$5,000 - $9,999	2,231	4.7%	$1,188,972	11.0%	$532.93
$10,000 - $14,999	1,052	2.2%	$970,213	9.0%	$922.26
$15,000 - $24,999	1,034	2.2%	$1,571,214	14.6%	$1,519.55
$25,000 - $49,999	541	1.1%	$1,511,378	14.0%	$2,793.67
$50,000 - $99,999	204	0.4%	$1,003,655	9.3%	$4,919.88
$100,000 - $199,999	97	0.2%	$977,241	9.1%	$10,074.65
$200,000 or Over	48	0.1%	$1,203,151	11.2%	$25,065.64
All Members	**47,320**	**100.0%**	**$10,771,024**	**100.0%**	**$227.62**

Quality

Compliance with evidence based medicine guidelines for members in-force during the current period

Rule Type	Case	Quality Opportunities	With Compliance	Compliance Rate	Benchmark
Clinical Outcomes	Smoking Cessation	1,940	1,839	0.95	0.94
	Migraine	46	45	0.98	0.97
	Obesity and Overweight	11	11	1.00	0.97
	Breast CA - I	8	7	0.88	0.93
	Diabetes	1	1	1.00	1.00
	Hepatitis C	0	0	0	0
Patient Drug Adherence and Safety	HTN	448	376	0.84	0.88
	Diabetes	146	118	0.81	0.86
	Hyperlipidemia	136	98	0.72	0.84
	Pregnancy Management	102	101	0.99	1.00
	Depression	90	72	0.80	0.79
	CAD	82	75	0.91	0.90
	Asthma	46	25	0.54	0.52
	Global Rules	43	40	0.93	0.93
	Migraine	32	25	0.78	0.79
	CHF	16	13	0.81	0.85
	RA	14	13	0.93	0.78
	Epilepsy	12	10	0.83	0.84
	Chronic Kidney Disease	10	7	0.70	0.91
	Obesity and Overweight	9	8	0.89	0.99
	Atrial Fib	9	7	0.78	0.82
	COPD	4	4	1.00	0.78
	Breast CA - I	4	3	0.75	0.85
	Inflam Bowel Disease	3	1	0.33	0.86
	CVA/TIA - Part 1	2	2	1.00	0.81
	Osteoporosis	1	1	1.00	0.67
	Sickle Cell Anemia	0	0	0	0
	Multiple Sclerosis	0	0	0	0

Employer Name: SAMPLE GROUP

Product: PREFERRED BLUE PPO

Current Period: 01/01/2013 - 12/31/2013

Prior Period: 01/01/2012 - 12/31/2012

Quality

Compliance with evidence based medicine guidelines for members in-force during the current period

Rule Type	Case	Quality Opportunities	With Compliance	Compliance Rate	Benchmark
	Hepatitis C	0	0	0	0
	HIV/AIDS	0	0	0	0
Preventive	Adult Access Prev (NS)	4,492	3,394	0.76	0.76
	Weight Assessment (NS)	1,542	2	0.00	0.00
	Adult BMI Assessment (NS)	1,518	41	0.03	0.03
	Child-Adol Access PCP(NS)	606	200	0.33	0.63
	Adolescent Well-Care (NS)	535	91	0.17	0.22
	Cervical CA Scrn (NS)	514	364	0.71	0.67
	Colorectal CA Scrn (NS)	500	259	0.52	0.48
	Diabetes Care (NS)	481	172	0.36	0.35
	Child Access to PCP (NS)	399	128	0.32	0.60
	Well-Child 15 Mo (NS)	360	26	0.07	0.12
	Breast CA Scrn (NS)	355	236	0.66	0.67
	Global Rules	288	228	0.79	0.77
	Well-Child 3-6 Yr (NS)	260	44	0.17	0.32
	Immunizations for Adol (NS)	189	93	0.49	0.63
	LBP Imaging (NS)	111	97	0.87	0.88
	IVD (NS)	104	30	0.29	0.25
	Care for Older Adults(NS)	93	0	0.00	0.00
	Bronchitis, Acute (NS)	62	13	0.21	0.22
	Depression Med Mgmt (NS)	52	31	0.60	0.61
	Cholesterol Mgmt (NS)	50	24	0.48	0.44
	Alcohol Treatment (NS)	46	12	0.26	0.35
	Asthma (NS)	42	38	0.90	0.89
	HPV Vaccine (NS)	31	4	0.13	0.14
	ADHD (NS)	18	1	0.06	0.23
	Glaucoma Screening (NS)	17	7	0.41	0.38
	DMARD Therapy in RA (NS)	7	7	1.00	0.90

Quality

Compliance with evidence based medicine guidelines for members in-force during the current period

Rule Type	Case	Quality Opportunities	With Compliance	Compliance Rate	Benchmark
	Beta-Blocker Tx (NS)	2	0	0.00	0.52
	Osteoporosis (NS)	0	0	0	0
	URI (NS)	0	0	0	0
	Pharyngitis (NS)	0	0	0	0
Process Outcomes, Care Patterns	Influenza Immunization (NS)	5,337	618	0.12	0.15
	Annual Dental Visit (NS)	2,368	6	0.00	0.01
	Childhood Imms (NS)	912	328	0.36	0.39
	Hyperlipidemia	822	709	0.86	0.83
	Obesity and Overweight	816	578	0.71	0.70
	HTN	775	591	0.76	0.78
	Diabetes	649	503	0.78	0.76
	Sinusitis, Acute	583	543	0.93	0.92
	Diabetes Care-ECC	419	277	0.66	0.69
	Diabetes Care (NS)	399	104	0.26	0.29
	Asthma	338	229	0.68	0.67
	LBP Imaging (NS)	333	317	0.95	0.96
	Pregnancy Management	210	159	0.76	0.72
	Chlamydia Scrn (NS)	172	62	0.36	0.31
	Chronic Kidney Disease	170	89	0.52	0.57
	CAD	122	93	0.76	0.78
	Weight Screening	114	8	0.07	0.16
	Smoking Cessation	101	25	0.25	0.20
	CAD (NS)	99	47	0.47	0.56
	Global Rules	97	87	0.90	0.89
	Depression	96	76	0.79	0.85
	Migraine	85	73	0.86	0.90
	Optimal Diabetes Care	74	1	0.01	0.04
	Pneumonia	64	20	0.31	0.30

Employer Name: SAMPLE GROUP

Product: PREFERRED BLUE PPO

Current Period: 01/01/2013 - 12/31/2013

Prior Period: 01/01/2012 - 12/31/2012

Quality

Compliance with evidence based medicine guidelines for members in-force during the current period

Rule Type	Case	Quality Opportunities	With Compliance	Compliance Rate	Benchmark
	Well-Child 15 Mo (NS)	60	26	0.43	0.70
	Postpartum Care (NS)	56	45	0.80	0.86
	Lead Screening (NS)	48	13	0.27	0.31
	Prenatal Care (NS)	43	10	0.23	0.54
	Prenatal Visits	40	10	0.25	0.25
	CAD - ACE and ARB	36	17	0.47	0.59
	Care for Older Adults(NS)	31	0	0.00	0.00
	Emergency Medicine	24	22	0.92	0.92
	RA	24	13	0.54	0.67
	CHF	23	18	0.78	0.77
	Post-Fracture Care (NS)	23	0	0.00	0.00
	COPD	21	18	0.86	0.73
	Pneumococcal Imm (NS)	19	2	0.11	0.13
	Otitis Externa, Acute	18	13	0.72	0.83
	Tonsillectomy	16	15	0.94	0.91
	Breast CA - I	16	14	0.88	0.90
	CVA/TIA - Part 1	15	12	0.80	0.74
	Otitis Media, Acute	15	8	0.53	0.56
	Osteoporosis Testing	14	8	0.57	0.43
	Tympanostomy	13	13	1.00	0.95
	Mental Illness - FU (NS)	12	4	0.33	0.41
	Cholesterol Mgmt-ECC	11	9	0.82	0.79
	Osteoporosis	9	2	0.22	0.49
	Epilepsy	9	9	1.00	0.97
	Prostate CA - I	8	6	0.75	0.90
	Inflam Bowel Disease	8	4	0.50	0.54
	Heart Failure - ACE	7	5	0.71	0.67
	Multiple Sclerosis	6	4	0.67	0.79

Quality

Compliance with evidence based medicine guidelines for members in-force during the current period

Rule Type	Case	Quality Opportunities	With Compliance	Compliance Rate	Benchmark
	Diabetic Retinopathy (NS)	4	0	0.00	0.05
	Atrial Fib	4	2	0.50	0.63
	Adenoidectomy	4	4	1.00	0.93
	Knee Replacement	4	3	0.75	0.84
	COPD Exacerbation (NS)	4	3	0.75	0.71
	Bacterial Pneumonia: Hosp	4	0	0.00	0.00
	COPD/Asthma: Hosp	3	0	0.00	0.00
	CVA/TIA - Part 2	3	2	0.67	0.67
	COPD (NS)	2	1	0.50	0.44
	CVA/TIA - Part 4	2	1	0.50	0.53
	CHF: Hospitalization	2	1	0.50	0.25
	CHF (NS)	2	2	1.00	0.73
	Drug-Disease Interactions (NS)	2	2	1.00	0.95
	Dehydration: Hosp	1	0	0.00	0.00
	CVA/TIA - Part 3	1	0	0.00	0.56
	Cervical Dysplasia	1	1	1.00	0.82
	Cardiac Surgery	0	0	0	0
	IVD (NS)	0	0	0	0
	Breast CA - II	0	0	0	0
	Prostate CA - II	0	0	0	0
	Colon CA - II	0	0	0	0
	UTI: Hospitalization	0	0	0	0
	Asthma: Hospitalization	0	0	0	0
	Diabetes: Hosp	0	0	0	0
	Diabetes, LE Amputation	0	0	0	0
	Angina: Hospitalization	0	0	0	0
	Cholesterol Mgmt (NS)	0	0	0	0
	Sickle Cell Anemia	0	0	0	0

Quality

Compliance with evidence based medicine guidelines for members in-force during the current period

Rule Type	Case	Quality Opportunities	With Compliance	Compliance Rate	Benchmark
	Colon CA - I	0	0	0	0
	HIV/AIDS	0	0	0	0
	Hepatitis C	0	0	0	0
Process Outcomes, Safety Monitoring	HTN	226	184	0.81	0.82
	Global Rules	174	142	0.82	0.79
	Diabetes	155	142	0.92	0.89
	Hyperlipidemia	141	122	0.87	0.83
	CAD	49	43	0.88	0.86
	RA	24	18	0.75	0.66
	CHF	6	4	0.67	0.93
	Inflam Bowel Disease	4	2	0.50	0.70
	Chronic Kidney Disease	3	1	0.33	0.33
	Atrial Fib	3	3	1.00	0.86
	HIV/AIDS	0	0	0	0
	Asthma	0	0	0	0
	Hepatitis C	0	0	0	0
	Depression	0	0	0	0
	Breast CA - I	0	0	0	0
	Sickle Cell Anemia	0	0	0	0
	Multiple Sclerosis	0	0	0	0
	CVA/TIA - Part 1	0	0	0	0

Employer Name: SAMPLE GROUP

Product: PREFERRED BLUE PPO

Current Paid Period: 04/01/2013 - 03/31/2014, Incurred After: 12/31/2011

Prior Paid Period: 04/01/2012 - 03/31/2013, Incurred After 12/31/2011

Financial Overview

Overview of financial performance (claim costs vs. premiums) by network status

	Current Period			Prior Period				
Claim Costs	In-Network	Out-of-Network	Total	In-Network	Out-of-Network	Total	Net Change	% Change
Facility Inpatient	**$3,441,541**	**$0**	**$3,441,541**	**$2,908,100**	**$0**	**$2,908,100**	**$533,442**	**18.3%**
Average per Contract	$2,054.65	$0.00	$2,054.65	$1,950.65	$0.00	$1,950.65	$104.00	5.3%
Average per Member	$848.65	$0.00	$848.65	$798.69	$0.00	$798.69	$49.95	6.3%
Facility Outpatient	**$3,194,563**	**$0**	**$3,194,563**	**$2,502,598**	**$0**	**$2,502,598**	**$691,965**	**27.6%**
Average per Contract	$1,907.20	$0.00	$1,907.20	$1,678.66	$0.00	$1,678.66	$228.54	13.6%
Average per Member	$787.74	$0.00	$787.74	$687.32	$0.00	$687.32	$100.42	14.6%
Total Facility	**$6,636,104**	**$0**	**$6,636,104**	**$5,410,698**	**$0**	**$5,410,698**	**$1,225,406**	**22.6%**
Average per Contract	$3,961.85	$0.00	$3,961.85	$3,629.31	$0.00	$3,629.31	$332.54	9.2%
Average per Member	$1,636.39	$0.00	$1,636.39	$1,486.01	$0.00	$1,486.01	$150.38	10.1%
Professional Services	**$4,132,417**	**$0**	**$4,132,417**	**$3,416,169**	**$0**	**$3,416,169**	**$716,248**	**21.0%**
Average per Contract	$2,467.11	$0.00	$2,467.11	$2,291.45	$0.00	$2,291.45	$175.67	7.7%
Average per Member	$1,019.01	$0.00	$1,019.01	$938.23	$0.00	$938.23	$80.78	8.6%
Ancillary	**$1,058,074**	**$0**	**$1,058,074**	**$889,401**	**$0**	**$889,401**	**$168,673**	**19.0%**
Average per Contract	$631.69	$0.00	$631.69	$596.58	$0.00	$596.58	$35.11	5.9%
Average per Member	$260.91	$0.00	$260.91	$244.27	$0.00	$244.27	$16.64	6.8%
Pharmacy	**$1,441,679**	**$0**	**$1,441,679**	**$1,194,314**	**$0**	**$1,194,314**	**$247,366**	**20.7%**
Average per Contract	$860.70	$0.00	$860.70	$801.10	$0.00	$801.10	$59.60	7.4%
Average per Member	$355.50	$0.00	$355.50	$328.01	$0.00	$328.01	$27.49	8.4%
Total Cost	**$13,268,274**	**$0**	**$13,268,274**	**$10,910,581**	**$0**	**$10,910,581**	**$2,357,693**	**21.6%**
Average per Contract	$7,921.36	$0.00	$7,921.36	$7,318.44	$0.00	$7,318.44	$602.91	8.2%
Average per Member	$3,271.81	$0.00	$3,271.81	$2,996.52	$0.00	$2,996.52	$275.29	9.2%
Total Premiums			**$15,010,020**			**$13,392,900**	**$1,617,121**	**12.1%**
Average per Contract			$8,961.21			$8,983.50	-$22.29	-0.2%
Average per Member			$3,701.30			$3,678.27	$23.03	0.6%

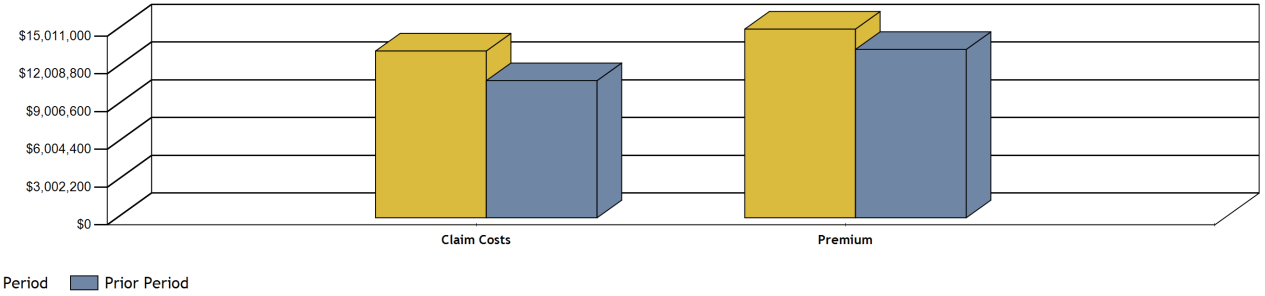
Employer Name: SAMPLE GROUP

Product: PREFERRED BLUE PPO

Current Paid Period: 04/01/2013 - 03/31/2014, Incurred After: 12/31/2011

Prior Paid Period: 04/01/2012 - 03/31/2013, Incurred After 12/31/2011

Claim Costs vs. Premiums



Employer Name: SAMPLE GROUP

Product: PREFERRED BLUE PPO

Current Paid Period: 04/01/2013 - 03/31/2014, Incurred After: 12/31/2011

Prior Paid Period: 04/01/2012 - 03/31/2013, Incurred After 12/31/2011

Claim Cost by Age, Gender and Relationship to Contract Holder

		Current Period						Prior Period						
Age Range	Gender	Contract Holder	Spouse	Dependent	Total	% of Age Range	% of Total	Contract Holder	Spouse	Dependent	Total	% of Age Range	% of Total	% Change
00-17	Male	$151	$0	$1,523,566	$1,523,717	49.8%	11.5%	$0	$0	$1,013,547	$1,013,547	56.9%	9.3%	50.3%
	Female	$39	$0	$1,534,498	$1,534,537	50.2%	11.6%	$0	$0	$768,545	$768,545	43.1%	7.0%	99.7%
	Subtotal	$190	$0	$3,058,064	$3,058,255	100.0%	23.0%	$0	$0	$1,782,092	$1,782,092	100.0%	16.3%	71.6%
18-30	Male	$292,652	$611	$218,590	$511,854	30.2%	3.9%	$416,772	$583	$244,258	$661,613	36.0%	6.1%	-22.6%
	Female	$155,691	$685,459	$340,720	$1,181,870	69.8%	8.9%	$124,945	$686,247	$363,903	$1,175,095	64.0%	10.8%	0.6%
	Subtotal	$448,343	$686,071	$559,310	$1,693,724	100.0%	12.8%	$541,717	$686,830	$608,162	$1,836,708	100.0%	16.8%	-7.8%
31-44	Male	$1,049,157	$11,819	$0	$1,060,976	37.3%	8.0%	$798,923	$8,693	$0	$807,616	31.0%	7.4%	31.4%
	Female	$222,936	$1,557,961	$0	$1,780,897	62.7%	13.4%	$215,998	$1,579,560	$0	$1,795,558	69.0%	16.5%	-0.8%
	Subtotal	$1,272,093	$1,569,781	$0	$2,841,873	100.0%	21.4%	$1,014,921	$1,588,252	$0	$2,603,174	100.0%	23.9%	9.2%
45-64	Male	$3,187,078	$138,761	$0	$3,325,839	65.0%	25.1%	$2,352,982	$214,461	$0	$2,567,443	59.8%	23.5%	29.5%
	Female	$573,283	$1,220,207	$0	$1,793,490	35.0%	13.5%	$630,926	$1,097,581	$0	$1,728,508	40.2%	15.8%	3.8%
	Subtotal	$3,760,361	$1,358,968	$0	$5,119,329	100.0%	38.6%	$2,983,909	$1,312,042	$0	$4,295,950	100.0%	39.4%	19.2%
65-74	Male	$243,431	$223,595	$0	$467,026	85.6%	3.5%	$81,991	$231,445	$0	$313,436	82.6%	2.9%	49.0%
	Female	$58,723	$20,003	$0	$78,726	14.4%	0.6%	$16,871	$49,161	$0	$66,032	17.4%	0.6%	19.2%
	Subtotal	$302,154	$243,598	$0	$545,752	100.0%	4.1%	$98,862	$280,605	$0	$379,468	100.0%	3.5%	43.8%
75+	Male	$9,342	$0	$0	$9,342	100.0%	0.1%	$13,189	$0	$0	$13,189	100.0%	0.1%	-29.2%
	Female	$0	$0	$0	$0	0.0%	0.0%	$0	$0	$0	$0	0.0%	0.0%	0.0%
	Subtotal	$9,342	$0	$0	$9,342	100.0%	0.1%	$13,189	$0	$0	$13,189	100.0%	0.1%	-29.2%
Total	**Male**	**$4,781,811**	**$374,787**	**$1,742,157**	**$6,898,755**	**52.0%**	**52.0%**	**$3,663,858**	**$455,181**	**$1,257,806**	**$5,376,844**	**49.3%**	**49.3%**	**28.3%**
	Female	**$1,010,672**	**$3,483,630**	**$1,875,218**	**$6,369,520**	**48.0%**	**48.0%**	**$988,740**	**$3,412,548**	**$1,132,448**	**$5,533,737**	**50.7%**	**50.7%**	**15.1%**
	Total	**$5,792,483**	**$3,858,417**	**$3,617,375**	**$13,268,274**	**100.0%**	**100.0%**	**$4,652,598**	**$3,867,729**	**$2,390,254**	**$10,910,581**	**100.0%**	**100.0%**	**21.6%**

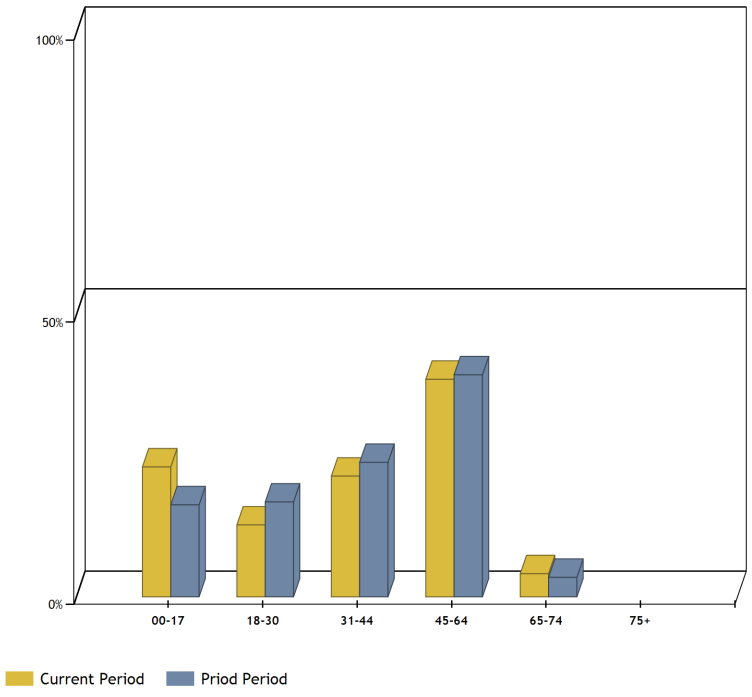
Employer Name: SAMPLE GROUP

Product: PREFERRED BLUE PPO

Current Paid Period: 04/01/2013 - 03/31/2014, Incurred After: 12/31/2011

Prior Paid Period: 04/01/2012 - 03/31/2013, Incurred After 12/31/2011

Claim Cost by Age Group



Employer Name: SAMPLE GROUP

Product: PREFERRED BLUE PPO

Current Paid Period: 04/01/2013 - 03/31/2014, Incurred After 12/31/2011

Claim Lag

Medical and Pharmacy Claims

	Month Paid												
Month Incurred	Apr-13	May-13	Jun-13	Jul-13	Aug-13	Sep-13	Oct-13	Nov-13	Dec-13	Jan-14	Feb-14	Mar-14	Total
Prior Incurred	$784,031	$500,917	$215,102	$64,496	$110,187	$122,175	$15,980	$7,957	$30,286	$19,287	$3,548	$14,273	$1,888,239
Apr-13	$278,763	$314,011	$106,929	$13,938	$5,809	$4,651	$1,328	$1,912	$1,307	$1,121	$327	$2,368	$732,465
May-13		$245,857	$428,275	$147,661	$37,767	$14,043	$7,497	$7,124	$2,263	$1,091	$7,116	$28	$898,721
Jun-13			$216,577	$455,605	$123,109	$83,668	$51,888	$8,226	$4,030	$439	$919	$4,969	$949,429
Jul-13				$235,326	$488,168	$86,192	$27,937	$5,911	$8,267	$1,188	$3,042	$1,204	$857,234
Aug-13					$348,739	$535,916	$578,168	$79,619	$28,167	$39,942	$2,746	$9,715	$1,623,010
Sep-13						$230,320	$472,634	$112,761	$15,413	$7,049	$12,314	$4,211	$854,701
Oct-13							$361,679	$620,986	$154,817	$89,257	$25,419	$14,817	$1,266,976
Nov-13								$285,257	$519,372	$46,469	$82,307	$45,417	$978,821
Dec-13									$406,219	$568,201	$115,158	$32,375	$1,121,953
Jan-14										$83,718	$641,267	$171,244	$896,229
Feb-14											$229,428	$545,944	$775,372
Mar-14												$425,123	$425,123
Total Claims	$1,062,794	$1,060,785	$966,883	$917,027	$1,113,777	$1,076,964	$1,517,110	$1,129,755	$1,170,141	$857,762	$1,123,589	$1,271,688	$13,268,274

Employer Name: SAMPLE GROUP

Current Paid Period: 04/01/2013 - 03/31/2014, Incurred After: 12/31/2011

Product: PREFERRED BLUE PPO

Premium and Claim Cost Analysis

Month - Year	Average Number of Contracts	Member Months	Premium	Capitation	Medical Claim Cost	Pharmacy Claim Cost	Total Claim Cost	Loss Ratio
Apr-13	1,579.0	3,863	$1,178,504	$0	$964,676	$98,118	$1,062,794	90.2%
May-13	1,591.0	3,889	$1,188,171	$0	$946,756	$114,029	$1,060,785	89.3%
Jun-13	1,608.0	3,923	$1,198,016	$0	$840,544	$126,339	$966,883	80.7%
Jul-13	1,639.0	3,984	$1,217,898	$0	$829,089	$87,938	$917,027	75.3%
Aug-13	1,645.0	3,990	$1,220,026	$0	$959,757	$154,019	$1,113,776	91.3%
Sep-13	1,651.0	3,997	$1,223,871	$0	$972,742	$104,222	$1,076,964	88.0%
Oct-13	1,656.0	3,998	$1,227,358	$0	$1,425,909	$91,201	$1,517,110	123.6%
Nov-13	1,726.0	4,117	$1,265,804	$0	$981,439	$148,316	$1,129,755	89.3%
Dec-13	1,736.0	4,152	$1,275,056	$0	$1,038,693	$131,448	$1,170,141	91.8%
Jan-14	1,757.0	4,258	$1,341,913	$0	$769,772	$87,990	$857,762	63.9%
Feb-14	1,755.0	4,246	$1,337,229	$0	$981,784	$141,805	$1,123,589	84.0%
Mar-14	1,757.0	4,247	$1,336,174	$0	$1,115,434	$156,254	$1,271,688	95.2%
Total	**20,100.0**	**48,664**	**$15,010,020**	**$0**	**$11,826,595**	**$1,441,679**	**$13,268,274**	**88.4%**

Top 20 Episode Families Ranked by Cost

Average cost per episode by major type of service, complete non-outlier episodes

Episode Families		Episodes	Total Cost	Average Cost Per Episode					
				Inpatient Facility	Outpatient Facility	Professional Services	Ancillary	Pharmacy	Total
Joint degeneration, localized	Employer Group	332.5	$674,406	$605.96	$526.81	$765.75	$82.97	$46.99	$2,028.47
	Benchmark			$731.13	$582.25	$732.21	$51.71	$51.86	$2,149.15
Cerebral vascular disease	Employer Group	16.0	$388,638	$19,869.33	$1,458.61	$2,009.87	$946.01	$6.08	$24,289.89
	Benchmark			$10,238.25	$1,135.29	$1,696.07	$605.49	$121.10	$13,796.22
Pregnancy, with delivery	Employer Group	29.0	$380,174	$6,616.72	$1,273.86	$4,766.86	$408.43	$43.57	$13,109.44
	Benchmark			$4,430.40	$791.01	$4,436.69	$179.57	$41.16	$9,878.83
Malignant neoplasm of rectum or anus	Employer Group	3.0	$365,371	$2,264.43	$26,116.57	$7,909.86	$85,114.69	$384.93	$121,790.48
	Benchmark			$13,937.46	$13,289.49	$29,509.70	$38,193.01	$6,337.29	$101,266.95
Diabetes	Employer Group	101.0	$179,431	$59.36	$149.54	$368.72	$107.29	$1,091.28	$1,776.19
	Benchmark			$83.06	$80.91	$403.44	$102.59	$1,215.58	$1,885.57
Malignant neoplasm of central nervous system	Employer Group	1.0	$155,194	$78,022.94	$2,196.48	$51,704.80	$4,156.75	$19,113.26	$155,194.23
	Benchmark			$50,516.96	$1,704.78	$51,111.78	$6,432.23	$15,933.80	$125,699.55
Hypertension	Employer Group	377.6	$145,788	$0.00	$95.52	$135.93	$8.57	$146.12	$386.13
	Benchmark			$2.56	$88.66	$154.69	$8.04	$109.38	$363.35
Routine exam	Employer Group	797.0	$139,122	$0.00	$6.25	$168.30	$0.00	$0.00	$174.56
	Benchmark			$0.00	$9.52	$167.40	$0.10	$0.05	$177.07
Malignant neoplasm of ear/nose/throat	Employer Group	5.0	$129,932	$0.00	$14,834.18	$6,756.79	$4,350.51	$44.92	$25,986.40
	Benchmark			$0.00	$14,583.38	$6,381.10	$2,944.67	$44.54	$23,953.68
Ischemic heart disease	Employer Group	46.3	$129,682	$1,541.71	$474.75	$510.73	$74.11	$202.62	$2,803.93
	Benchmark			$1,719.90	$660.45	$697.59	$268.40	$191.43	$3,537.77
Kidney transplant	Employer Group	1.0	$125,783	$93,658.32	$7,801.36	$14,307.86	$161.40	$9,853.98	$125,782.92
	Benchmark			$90,896.72	$5,118.33	$15,051.80	$293.07	$12,297.46	$123,657.38
Mood disorder, depressed	Employer Group	199.0	$108,616	$0.00	$97.96	$294.58	$12.48	$140.87	$545.89
	Benchmark			$27.73	$65.85	$335.79	$8.62	$117.01	$554.99
Malignant neoplasm of pancreatic gland	Employer Group	1.6	$96,811	$32,143.61	$12,139.57	$11,159.79	$5,440.98	$3.21	$60,887.15
	Benchmark			$16,599.47	$9,653.61	$8,744.72	$8,372.79	$719.09	$44,089.67

Top 20 Episode Families Ranked by Cost

Average cost per episode by major type of service, complete non-outlier episodes

Episode Families		Episodes	Total Cost	Average Cost Per Episode					
				Inpatient Facility	Outpatient Facility	Professional Services	Ancillary	Pharmacy	Total
Chronic sinusitis	Employer Group	219.5	$96,753	$0.00	$92.56	$307.40	$2.36	$38.56	$440.89
	Benchmark			$0.00	$132.82	$220.06	$4.54	$32.16	$389.59
Tonsillitis, adenoiditis or pharyngitis	Employer Group	468.0	$90,914	$0.00	$80.24	$106.07	$6.15	$1.80	$194.26
	Benchmark			$0.00	$77.70	$109.88	$4.57	$2.55	$194.69
Hernias, except hiatal	Employer Group	24.0	$90,123	$0.00	$2,560.59	$1,111.70	$82.84	$0.00	$3,755.13
	Benchmark			$146.26	$2,134.37	$1,013.83	$120.16	$0.10	$3,414.72
Otitis media	Employer Group	312.0	$85,324	$0.00	$116.32	$136.47	$3.39	$17.30	$273.48
	Benchmark			$0.00	$115.65	$130.60	$2.10	$15.40	$263.74
Asthma	Employer Group	187.8	$83,457	$0.00	$72.38	$128.77	$16.77	$226.54	$444.46
	Benchmark			$21.19	$68.56	$150.18	$21.01	$317.54	$578.48
Malignant central nervous system metastases	Employer Group	1.0	$80,897	$0.00	$79,955.37	$777.36	$162.38	$1.86	$80,896.97
	Benchmark			$0.00	$46,140.48	$2,178.05	$81.19	$16.93	$48,416.65
Adult rheumatoid arthritis	Employer Group	12.5	$80,863	$0.00	$86.85	$1,273.38	$938.90	$4,169.93	$6,469.06
	Benchmark			$130.58	$423.75	$475.99	$729.10	$4,058.64	$5,818.06
Subtotal - Top 20	**Employer Group**	**3,134.6**	**$3,627,280**	**$324.81**	**$244.08**	**$350.42**	**$123.18**	**$114.69**	**$1,157.18**
	Benchmark			**$270.70**	**$216.82**	**$361.30**	**$73.01**	**$124.00**	**$1,045.83**
All Other Families	Employer Group	6,044.5	$3,144,724	$71.77	$154.50	$196.37	$33.59	$64.03	$520.26
	Benchmark			$70.33	$141.59	$217.66	$45.14	$66.47	$541.19
Total	**Employer Group**	**9,179.1**	**$6,772,004**	**$158.18**	**$185.09**	**$248.98**	**$64.18**	**$81.33**	**$737.76**
	Benchmark			**$138.75**	**$167.28**	**$266.71**	**$54.66**	**$86.11**	**$713.52**

Employer Name: SAMPLE GROUP

Current Incurred Period: 01/01/2013 - 12/31/2013, Paid Through 03/31/2014

Product: PREFERRED BLUE PPO

Total Costs by Disease

Top 20 diseases, ranked by total patient costs (including non-disease related), based on members attributes as of their last active date within the time period.

Disease	Member Months	Relative Health Risk	Inpatient Facility PMPM	Outpatient Facility PMPM	Professional Services PMPM	Ancillary PMPM	Pharmacy PMPM	Total PMPM	Total Cost	% Disease Related	Disease Costs
Back and Spine, Pain or Condition	5,254	2.01	$172.62	$150.84	$197.36	$75.43	$44.52	$640.77	$3,366,617	19.3%	$648,530
Depression	3,228	2.72	$205.11	$163.08	$224.61	$41.23	$76.67	$710.70	$2,294,132	13.1%	$300,858
Hypertension	2,123	3.46	$335.31	$279.52	$236.84	$91.03	$117.36	$1,060.06	$2,250,512	5.3%	$119,873
Hyperlipidemia	1,697	2.95	$161.80	$267.97	$194.05	$36.44	$143.71	$803.96	$1,364,325	2.2%	$30,109
Cancer, All	317	10.92	$577.51	$968.58	$655.26	$1,027.20	$96.86	$3,325.41	$1,054,156	51.5%	$543,047
Diabetes	1,430	2.52	$101.56	$113.48	$136.10	$63.75	$180.81	$595.69	$851,837	34.5%	$294,205
Cancer, Other	92	18.85	$1,578.83	$2,288.43	$1,350.20	$2,280.50	$78.24	$7,576.20	$697,010	0.0%	$0
Pneumonia	120	14.30	$1,405.10	$1,600.71	$880.78	$1,594.40	$230.96	$5,711.95	$685,434	7.7%	$52,537
Osteoarthritis	418	3.86	$661.63	$286.63	$401.51	$134.42	$139.82	$1,624.01	$678,836	28.1%	$190,591
Migraine	419	4.32	$434.80	$359.62	$324.61	$70.42	$80.90	$1,270.34	$532,273	6.8%	$36,340
Cancer, Metastatic and Secondary	33	31.85	$969.93	$3,157.43	$2,036.24	$8,353.71	$452.41	$14,969.73	$494,001	0.0%	$0
COPD, incl Emphysema	156	6.95	$1,474.23	$585.45	$547.51	$115.64	$398.39	$3,121.22	$486,911	18.9%	$92,255
CAD, All	283	4.66	$331.36	$720.77	$275.42	$64.80	$227.14	$1,619.50	$458,318	60.5%	$277,094
Cancer, Colon, Rectum	42	21.63	$762.09	$2,145.07	$1,189.72	$6,413.15	$289.37	$10,799.40	$453,575	93.1%	$422,497
Asthma	772	1.82	$142.50	$126.77	$156.09	$18.60	$75.54	$519.50	$401,053	14.9%	$59,802
Allergic Rhinitis	940	1.47	$50.63	$102.52	$167.56	$15.49	$63.98	$400.19	$376,175	4.2%	$15,636
Otitis Media	774	1.20	$35.64	$147.93	$182.88	$28.41	$79.14	$474.00	$366,876	20.1%	$73,691
CAD, Other	241	4.09	$170.42	$704.39	$301.85	$73.27	$250.71	$1,500.63	$361,653	50.7%	$183,343
High Cost Chronic Condition	199	5.33	$312.08	$275.63	$369.17	$175.71	$646.82	$1,779.40	$354,100	47.4%	$167,743
Rheumatoid Arthritis	139	5.51	$381.83	$358.43	$482.94	$251.55	$763.36	$2,238.11	$311,098	47.3%	$147,131
Subtotal - Top 20	-	-	-	-	-	-	-	-	-	-	**$3,655,282**
All Other Diseases	-	-	-	-	-	-	-	-	-	-	$831,210
Total	-	-	-	-	-	-	-	-	-	-	**$4,486,492**

Disease Related Costs

Top 20 diseases, ranked by disease related costs, based on member attributes as of their last active date within the time period.

Disease	Member Months	Inpatient Facility PMPM	Outpatient Facility PMPM	Professional Services PMPM	Ancillary PMPM	Pharmacy PMPM	Total PMPM	Total Costs
Back and Spine, Pain or Condition	5,254	$35.66	$28.62	$50.38	$2.43	$6.34	$123.44	$648,530
Cancer, All	317	$122.13	$417.59	$273.78	$862.84	$36.74	$1,713.08	$543,047
Cancer, Colon, Rectum	42	$652.57	$1,919.11	$873.15	$6,351.53	$263.09	$10,059.45	$422,497
Depression	3,228	$22.76	$18.10	$41.21	$1.00	$10.13	$93.20	$300,858
Diabetes	1,430	$10.39	$10.32	$34.97	$27.49	$122.56	$205.74	$294,205
CAD, All	283	$244.50	$571.54	$85.12	$57.19	$20.79	$979.13	$277,094
Cerebrovascular Disease, including Stroke	64	$2,977.24	$264.53	$352.89	$220.58	$1.52	$3,816.76	$244,273
Osteoarthritis	418	$154.48	$99.77	$154.00	$44.91	$2.80	$455.96	$190,591
CAD, Other	241	$68.41	$530.70	$81.08	$64.35	$16.22	$760.76	$183,343
High Cost Chronic Condition	199	$122.78	$12.32	$117.49	$126.52	$463.83	$842.93	$167,743
Rheumatoid Arthritis	139	$175.77	$8.96	$156.35	$181.13	$536.28	$1,058.50	$147,131
Transplant, All	36	$2,601.62	$216.70	$397.44	$4.48	$273.72	$3,493.97	$125,783
Transplants, Kidney	36	$2,601.62	$216.70	$397.44	$4.48	$273.72	$3,493.97	$125,783
Hypertension	2,123	$0.00	$22.39	$16.44	$4.05	$13.58	$56.46	$119,873
COPD, incl Emphysema	156	$273.33	$51.39	$75.43	$21.95	$169.28	$591.38	$92,255
Otitis Media	774	$0.00	$47.51	$41.74	$1.41	$4.55	$95.21	$73,691
Cancer, Breast	75	$0.00	$491.79	$382.92	$86.70	$5.40	$966.81	$72,511
Asthma	772	$0.00	$13.75	$19.88	$1.17	$42.67	$77.46	$59,802
CAD, MI	36	$1,464.05	$38.73	$124.49	$0.00	$33.50	$1,660.77	$59,788
Pneumonia	120	$243.30	$71.68	$95.81	$24.34	$2.68	$437.81	$52,537
Subtotal - Top 20	**-**	**$66.27**	**$60.59**	**$58.09**	**$46.64**	**$35.27**	**$266.87**	**$4,201,334**
All Other Diseases	-	$10.33	$26.98	$17.80	$3.67	$15.22	$74.01	$285,158
Total	**-**	**$55.27**	**$53.98**	**$50.17**	**$38.19**	**$31.33**	**$228.95**	**$4,486,492**

Employer Name: SAMPLE GROUP

Product: PREFERRED BLUE PPO

Current Incurred Period: 01/01/2013 - 12/31/2013, Paid Through 03/31/2014

Prior Incurred Period: 01/01/2012 - 12/31/2012, Paid Through 03/31/2014

Top 20 Facilities

Hospitals ranked by Total Cost (Inpatient and Outpatient Services)

Facility	State	Inpatient / Outpatient	Prior Period	Current Period				
			Total Cost	Total Cost	Encounters	Encounter Distribution	Average Length of Stay	Average Cost per Encounter
ST ST ST FRANCIS MEDICAL	IL	Inpatient	$23,094	$11,506	4.0	0.1%	1.50	$2,877
		Outpatient	$55,682	$67,631	103.0	1.8%	-	$657
ROHCESTER METHODIST HOSP	MN	Inpatient	$46,815	$24,432	1.0	0.0%	1.00	$24,432
		Outpatient	$17,810	$71,729	23.5	0.4%	-	$3,048
ST MARYS HOSPITAL GENERO	MN	Inpatient	$97,509	$275,500	4.0	0.1%	10.25	$68,875
		Outpatient	$46,577	$42,377	24.0	0.4%	-	$1,767
REGIONS SLEEP CENT	MN	Inpatient	$0	$180,510	1.0	0.0%	20.00	$180,510
		Outpatient	$0	$0	0.0	0.0%	-	$0
UNIVERSITY OF MN MEDICAL	MN	Inpatient	$39,413	$103,854	3.0	0.1%	2.00	$34,618
		Outpatient	$48,318	$25,019	101.6	1.8%	-	$246
AVERA ST LUKES RENAL	SD	Inpatient	$162,818	$74,047	9.0	0.2%	2.11	$8,227
		Outpatient	$217,363	$177,299	314.3	5.5%	-	$564
WAUBAY CLINIC AVERA HEAL	SD	Inpatient	$42,080	$78,472	8.0	0.1%	3.50	$9,809
		Outpatient	$47,600	$24,396	38.0	0.7%	-	$642
SANFORD USD MEDICAL CENT	SD	Inpatient	$28,532	$41,123	3.0	0.1%	4.33	$13,708
		Outpatient	$27,478	$43,096	54.0	0.9%	-	$798
SANSANFORD HEALTH NETWOR	SD	Inpatient	$2,867	$53,271	11.0	0.2%	2.27	$4,843
		Outpatient	$38,910	$82,332	232.1	4.0%	-	$355
COMMUNITY MEMORIAL HOSP	SD	Inpatient	$2,831	$11,393	3.0	0.1%	2.00	$3,798
		Outpatient	$28,071	$79,992	326.7	5.7%	-	$245
DOMINICAN SANTA CRUZ HOS	CA	Inpatient	$0	$152,493	3.0	0.1%	4.67	$50,831
		Outpatient	$0	$7,564	13.0	0.2%	-	$582
BAYLOR MEDICAL CENTER AT	TX	Inpatient	$0	$89,962	2.0	0.0%	4.00	$44,981
		Outpatient	$0	$28,423	36.5	0.6%	-	$780
YUMA REGIONAL MEDICAL CE	AZ	Inpatient	$47,194	$1,023	1.0	0.0%	1.00	$1,023
		Outpatient	$71,490	$88,911	80.5	1.4%	-	$1,105

Top 20 Facilities

Hospitals ranked by Total Cost (Inpatient and Outpatient Services)

Facility	State	Inpatient / Outpatient	Prior Period Total Cost	Current Period Total Cost	Encounters	Encounter Distribution	Average Length of Stay	Average Cost per Encounter
OREGON HEALTH AND SCIENC	OR	Inpatient	$0	$186,342	2.0	0.0%	30.00	$93,171
		Outpatient	$215	$2,712	5.5	0.1%	-	$491
LOS ROBLES REGIONAL MEDI	CA	Inpatient	$2,940	$3,925	1.0	0.0%	1.00	$3,925
		Outpatient	$0	$109,607	21.0	0.4%	-	$5,222
SANFORD MEDICAL CENTER FARGO	ND	Inpatient	$308,718	$169,219	23.0	0.4%	4.30	$7,357
		Outpatient	$212,885	$192,446	382.3	6.6%	-	$503
ST ALEXIUS MEDICAL CTR	ND	Inpatient	$154,291	$95,765	14.0	0.2%	5.07	$6,840
		Outpatient	$29,541	$38,640	183.3	3.2%	-	$211
TRINITY HOSPITALS	ND	Inpatient	$3,182	$53,799	11.0	0.2%	2.64	$4,891
		Outpatient	$29,502	$29,330	206.4	3.6%	-	$142
SANFORD MEDICAL CENTER	ND	Inpatient	$85,594	$124,962	5.0	0.1%	17.60	$24,992
		Outpatient	$58,761	$47,951	152.5	2.7%	-	$314
ESSENTIA HEALTH FARGO	ND	Inpatient	$130,221	$62,423	12.0	0.2%	2.00	$5,202
		Outpatient	$51,881	$84,573	282.6	4.9%	-	$299
Subtotal - Top 20		**Inpatient**	**$1,178,098**	**$1,794,023**	**121.0**	**2.1%**	**4.63**	**$14,827**
		Outpatient	**$982,083**	**$1,244,029**	**2,580.7**	**44.8%**	**-**	**$482**
All Other Facilities		Inpatient	**$2,099,604**	$1,274,233	151.0	2.6%	2.96	$8,439
		Outpatient	**$1,668,993**	$1,642,666	2,901.9	50.4%	-	$566
Total		**Inpatient**	**$3,277,702**	**$3,068,256**	**272.0**	**4.7%**	**3.70**	**$11,280**
		Outpatient	**$2,651,075**	**$2,886,695**	**5,482.5**	**95.3%**	**-**	**$527**

Top 20 Providers

Medical, Surgical, Primary Care, Ancillary, Laboratory, Facility-Based, & Home-Based Specialty Providers ranked by Total Cost

Provider	State	Specialty	Total Cost	Encounters	Encounter Distribution	Average Cost per Encounter
Y EAST FGO LAB SANFORD CLINIC BROADWA	ND	Laboratory	$21,199	342.7	2.3%	$62
RICHARD J MARSDEN MD	MN	Radiology	$16,081	92.3	0.6%	$174
RAFAEL OCEJO MD	ND	Pediatrics	$14,265	107.0	0.7%	$133
CATHERINE P FISHER MD	ND	Pathology	$11,556	306.6	2.1%	$38
JAN M BURY MD	ND	Obstetrics	$10,912	30.0	0.2%	$364
JAMES E HALVORSON MD	MN	Family Medicine	$10,078	73.5	0.5%	$137
MELISSA KUNKEL MD	ND	Pediatrics	$8,786	62.6	0.4%	$140
RHONDA R SCHAFER MCLEAN MD	ND	Obstetrics	$8,183	43.0	0.3%	$190
LUCY B MALKASIAN MD	ND	Pediatrics	$7,553	78.0	0.5%	$97
WILLIAM HUTCHISON MD	ND	Pediatrics	$7,486	55.0	0.4%	$136
LISA BRAUN PA	MN	Physicians Assistant	$7,121	96.5	0.7%	$74
TY CAMPUS LAB SANFORD SOUTH UNIVERSI	ND	Laboratory	$7,067	140.7	1.0%	$50
PATRICK E EMERY MD	MN	Family Medicine	$5,961	48.8	0.3%	$122
MAHESH PATEL MD	ND	Pediatrics	$5,961	16.0	0.1%	$373
SARA L DELANEY ST	ND	Speech Therapy	$5,939	71.0	0.5%	$84
MICHELLE R TINCHER MD	ND	Family Medicine	$5,760	50.0	0.3%	$115
PARAG KUMAR MD	ND	Pediatrics	$5,539	39.5	0.3%	$140
MICHELLE L MART ST	ND	Speech Therapy	$5,424	60.0	0.4%	$90
AARON M GARMAN MD	ND	Family Medicine	$5,418	112.7	0.8%	$48
KAREN R BROWN MD	ND	Pediatrics	$5,177	27.0	0.2%	$192
Subtotal - Top 20			**$175,466**	**1,852.8**	**12.6%**	**$95**
All Other Providers			$1,082,424	12,867.1	87.4%	$84
Total			**$1,257,890**	**14,719.9**	**100.0%**	**$85**

Employer Name: SAMPLE GROUP

Product: PREFERRED BLUE PPO

Current Incurred Period: 01/01/2013 - 12/31/2013, Paid Through 03/31/2014

Prior Incurred Period: 01/01/2012 - 12/31/2012, Paid Through 03/31/2014

Top 15 Specialties

Medical, Surgical, Primary Care, Ancillary, Laboratory, Facility-Based, & Home-Based Specialties ranked by Total Cost

	Encounters per 1,000 Members		Cost per Encounter		Cost per Member per Month			
Specialty	Current Period	Prior Period	Current Period	Prior Period	Current Period	Prior Period	$ Change	% Change
Family Medicine	642	634	$84.41	$86.82	$4.51	$4.58	-$0.07	-1.6%
Pediatrics	327	315	$126.00	$123.25	$3.43	$3.24	$0.19	6.0%
Hematology/Oncology	35	22	$675.74	$916.59	$1.95	$1.67	$0.27	16.2%
Obstetrics and Gynecology	111	130	$184.82	$196.56	$1.71	$2.13	-$0.41	-19.4%
Chiropractor	768	814	$24.98	$22.97	$1.60	$1.56	$0.04	2.5%
Radiology	163	193	$113.36	$159.59	$1.54	$2.57	-$1.02	-39.8%
Nursing Service Providers	250	275	$68.10	$75.17	$1.42	$1.72	-$0.30	-17.4%
Physicians Assistant	200	219	$74.95	$74.58	$1.25	$1.36	-$0.11	-8.3%
Internal Medicine	137	184	$108.48	$91.63	$1.24	$1.40	-$0.17	-11.9%
Behavioral Health	111	94	$103.01	$113.73	$0.96	$0.89	$0.06	7.2%
Rehabilitative Services	154	78	$73.47	$64.01	$0.94	$0.41	$0.53	127.3%
Pathology	150	156	$60.57	$67.20	$0.76	$0.87	-$0.12	-13.3%
CRNA	18	22	$394.53	$434.99	$0.58	$0.81	-$0.23	-28.8%
Anesthesiology	20	29	$330.56	$370.28	$0.56	$0.90	-$0.34	-38.0%
General Surgery	21	26	$297.47	$323.95	$0.51	$0.71	-$0.20	-27.8%
Subtotal - Top 15	**3,106**	**3,191**	**$88.68**	**$93.39**	**$22.95**	**$24.84**	**-$1.88**	**-7.6%**
All Other Specialties	414	419	$133.46	$154.64	$4.60	$5.40	-$0.80	-14.8%
Total	**3,520**	**3,610**	**$93.95**	**$100.51**	**$27.56**	**$30.24**	**-$2.68**	**-8.9%**

Employer Name: SAMPLE GROUP

Current Incurred Period: 01/01/2013 - 12/31/2013, Paid Through 03/31/2014

Product: PREFERRED BLUE PPO

Network Utilization

Utilization of medical services by network status

Employer Group

	In-Network			Out-of-Network			Total			
Service Category	**Encounters**	**Cost PMPM**	**Total Cost**	**Encounters**	**Cost PMPM**	**Total Cost**	**Encounters**	**Cost PMPM**	**Total Cost**	**% Total Cost In-Network**
Facility Inpatient	272	$64.84	$3,068,256	0	$0.00	$0	272	$64.84	$3,068,256	100.0%
Facility Outpatient	5,544	$61.57	$2,913,257	0	$0.00	$0	5,544	$61.57	$2,913,257	100.0%
Professional Services	39,256	$81.17	$3,841,174	0	$0.00	$0	39,256	$81.17	$3,841,174	100.0%
Ancillary	6,759	$20.04	$948,337	0	$0.00	$0	6,759	$20.04	$948,337	100.0%
Total	**51,831**	**$227.62**	**$10,771,024**	**0**	**$0.00**	**$0**	**51,831**	**$227.62**	**$10,771,024**	**100.0%**

Benchmark

	In-Network	Out-of-Network	Total	
Service Category	**Cost PMPM**	**Cost PMPM**	**Cost PMPM**	**% Total Cost In-Network**
Facility Inpatient	$69.91	$0.00	$69.91	100.0%
Facility Outpatient	$54.69	$0.00	$54.69	100.0%
Professional Services	$84.70	$0.00	$84.70	100.0%
Ancillary	$18.79	$0.00	$18.79	100.0%
Total	**$228.09**	**$0.00**	**$228.09**	**100.0%**

Employer Name: SAMPLE GROUP

Product: PREFERRED BLUE PPO

Current Incurred Period: 01/01/2013-12/31/2013, Paid Through 03/31/2014

Prior Incurred Period: 01/01/2012-12/31/2012, Paid Through 03/31/2014

Provider Cost Savings and Employee Cost Sharing Analysis

Provider cost and employee contribution as a percent of total billed medical charges

		Employer Group				Benchmark	
		Total		Total PMPM		Total PMPM	
	Category	Current Period	Prior Period	Current Period	Prior Period	Current Period	Prior Period
Savings as a % of Total Billed Charges	Billed Charges	$23,941,096	$22,954,120	$505.94	$540.27	$450	$445
	Provider Cost	$10,771,024	$10,427,008	$227.62	$245.42	$228	$223
	Provider Savings Percentage	47.0%	47.1%	47.0%	47.1%	39.8%	40.3%
	Employee Cost Sharing Percentage	8.0%	7.5%	8.0%	7.5%	9.5%	9.6%
Provider Savings (Billed Less Allowed)	Facility Inpatient	$2,421,023	$2,692,377	$51.16	$63.37	$41.80	$45.92
	Facility Outpatient	$3,620,525	$3,323,456	$76.51	$78.22	$59.00	$56.90
	Professional Services	$3,748,837	$3,484,611	$79.22	$82.02	$61.66	$60.84
	Ancillary	$1,461,597	$1,304,820	$30.89	$30.71	$16.91	$15.55
	Subtotal	**$11,251,981**	**$10,805,264**	**$237.78**	**$254.33**	**$179.37**	**$179.22**
Employee Cost Sharing	Deductible	$550,703	$505,493	$11.64	$11.90	$18.70	$18.04
	Coinsurance	$909,804	$795,303	$19.23	$18.72	$16.09	$16.43
	Copayment	$457,584	$421,053	$9.67	$9.91	$8.07	$8.22
	Other	$0	$0	$0.00	$0.00	$0.00	$0.00
	Subtotal	**$1,918,090**	**$1,721,848**	**$40.53**	**$40.53**	**$42.87**	**$42.69**
	Total Savings	**$13,170,072**	**$12,527,112**	**$278.32**	**$294.85**	**$222.23**	**$221.90**

Employer Name: SAMPLE GROUP

Product: PREFERRED BLUE PPO

Current Incurred Period: 01/01/2013 - 12/31/2013, Paid Through 03/31/2014

Prior Incurred Period: 01/01/2012 - 12/31/2012, Paid Through 03/31/2014

Medical Cost and Utilization by Detailed Service Category

	Employer Group						Benchmark					
	Encounters per 1,000 Members		Cost PMPM				Encounters per 1,000 Members		Cost PMPM			
Service Category	Current Period	Prior Period	Current Period	Prior Period	PMPM Change	% Change	Current Period	Prior Period	Current Period	Prior Period	PMPM Change	% Change
Facility Inpatient												
Acute	68	74	$64.77	$74.52	-$9.75	-13.1%	63	65	$69.61	$68.99	$0.62	0.9%
Rehab/Skilled Nursing Facility	1	2	$0.07	$2.62	-$2.56	-97.4%	1	1	$0.30	$0.72	-$0.42	-58.4%
Total Facility Inpatient	**69**	**76**	**$64.84**	**$77.15**	**-$12.31**	**-16.0%**	**64**	**66**	**$69.91**	**$69.71**	**$0.20**	**0.3%**
Facility Outpatient												
Emergency Room	84	94	$4.54	$4.18	$0.36	8.7%	94	103	$3.45	$3.35	$0.10	3.1%
OP Facility Diagnostic	88	93	$4.24	$2.42	$1.82	75.3%	92	94	$2.88	$2.46	$0.42	17.2%
OP Facility Laboratory	292	292	$5.09	$4.50	$0.58	13.0%	375	384	$4.17	$3.96	$0.21	5.3%
OP Facility Other	531	503	$16.05	$14.57	$1.47	10.1%	514	525	$15.52	$15.50	$0.01	0.1%
OP Facility Radiology	146	152	$12.88	$16.96	-$4.08	-24.1%	169	185	$11.98	$12.74	-$0.77	-6.0%
OP Facility Surgery	265	282	$18.77	$20.68	-$1.91	-9.2%	326	336	$16.69	$16.47	$0.22	1.3%
Total Facility Outpatient	**1,406**	**1,417**	**$61.57**	**$63.32**	**-$1.75**	**-2.8%**	**1,570**	**1,626**	**$54.69**	**$54.49**	**$0.20**	**0.4%**
Professional Services												
Allergy Tests and Injections	115	128	$0.51	$0.60	-$0.08	-13.9%	85	86	$0.43	$0.43	$0.00	0.3%
Anesthesia	117	117	$5.50	$5.38	$0.12	2.2%	118	118	$5.09	$4.96	$0.13	2.7%
Consultations	57	69	$0.89	$0.90	$0.00	-0.5%	28	30	$0.52	$0.54	-$0.03	-4.6%
Diagnostic Testing	263	288	$1.70	$2.29	-$0.59	-25.8%	217	233	$1.61	$2.04	-$0.42	-20.8%
Emergency Room	92	96	$1.93	$1.90	$0.03	1.6%	94	101	$1.58	$1.66	-$0.08	-4.5%
Immunizations and Injections	696	680	$5.30	$5.17	$0.13	2.6%	745	684	$5.52	$4.84	$0.68	14.0%
Inpatient Visits	216	176	$3.66	$2.83	$0.83	29.3%	198	189	$4.63	$3.17	$1.46	46.1%
Laboratory	1,043	1,092	$4.18	$4.08	$0.10	2.4%	893	906	$4.30	$4.33	-$0.04	-0.9%
Mental Health	52	338	$0.57	$2.56	-$2.00	-77.9%	95	440	$0.65	$3.45	-$2.80	-81.2%
Obstetrics	65	57	$3.78	$3.34	$0.44	13.2%	52	49	$2.58	$2.53	$0.05	2.1%
Office Visits	2,659	2,769	$17.02	$16.77	$0.25	1.5%	2,590	2,592	$17.91	$16.94	$0.97	5.7%
Pathology	176	211	$2.26	$2.07	$0.19	9.1%	162	184	$1.98	$2.21	-$0.23	-10.6%

Employer Name: SAMPLE GROUP

Product: PREFERRED BLUE PPO

Current Incurred Period: 01/01/2013 - 12/31/2013, Paid Through 03/31/2014

Prior Incurred Period: 01/01/2012 - 12/31/2012, Paid Through 03/31/2014

Medical Cost and Utilization by Detailed Service Category

	Employer Group						Benchmark					
	Encounters per 1,000 Members		Cost PMPM				Encounters per 1,000 Members		Cost PMPM			
Service Category	Current Period	Prior Period	Current Period	Prior Period	PMPM Change	% Change	Current Period	Prior Period	Current Period	Prior Period	PMPM Change	% Change
Professional Services												
Physical Medicine/Rehab	1,812	1,831	$4.16	$3.66	$0.51	13.9%	2,016	2,038	$4.89	$4.41	$0.48	10.8%
Preventive Medicine	405	386	$4.11	$3.82	$0.29	7.6%	371	354	$4.31	$3.80	$0.51	13.4%
Professional Other	435	195	$3.84	$1.70	$2.14	126.1%	557	201	$4.99	$1.76	$3.23	183.3%
Radiology	580	599	$6.92	$9.05	-$2.13	-23.5%	554	571	$7.54	$7.71	-$0.18	-2.3%
Surgery	971	1,040	$13.68	$15.28	-$1.60	-10.5%	910	942	$15.19	$15.58	-$0.39	-2.5%
Vision, Hearing and Speech	200	174	$1.15	$0.88	$0.27	30.3%	180	159	$0.99	$0.80	$0.19	24.0%
Total Professional Services	**9,955**	**10,249**	**$81.17**	**$82.28**	**-$1.11**	**-1.3%**	**9,865**	**9,877**	**$84.70**	**$81.17**	**$3.53**	**4.3%**
Ancillary												
Drugs Administered	1,359	1,377	$12.87	$17.62	-$4.75	-27.0%	1,215	1,242	$12.79	$11.94	$0.85	7.2%
Durable Medical Equipment	75	88	$1.31	$1.29	$0.03	2.0%	72	78	$1.48	$1.60	-$0.11	-7.2%
Home Health/Hospice Visits	14	34	$0.53	$0.42	$0.11	25.0%	13	12	$0.49	$0.46	$0.03	6.1%
Services and Supplies	250	233	$1.86	$1.36	$0.50	36.3%	214	222	$1.72	$1.71	$0.01	0.7%
Transportation Services	16	16	$3.47	$1.98	$1.49	75.1%	15	16	$2.30	$2.21	$0.09	4.1%
Total Ancillary	**1,714**	**1,748**	**$20.04**	**$22.67**	**-$2.63**	**-11.6%**	**1,528**	**1,570**	**$18.79**	**$17.92**	**$0.87**	**4.9%**
Total			**$227.62**	**$245.42**	**-$17.80**	**-7.3%**			**$228.09**	**$223.29**	**$4.80**	**2.2%**

Employer Name: SAMPLE GROUP

Product: PREFERRED BLUE PPO

Current Incurred Period: 01/01/2013-12/31/2013, Paid Through 03/31/2014

High Cost Cases

Members with greater than $25,000 in claim amounts ranked by total cost

			Inpatient Facility		Outpatient Facility		Professional Services		Pharmacy		Ancillary
Coverage Status	Member Status	Total Cost	Cost	Admits	Cost	Encounters	Cost	Encounters	Cost	Scripts	Cost
DEPENDENT	ACTIVE	$498,594	$345,358	4	$21,349	38	$85,093	219	$339	25	$46,456
DEPENDENT	ACTIVE	$204,877	$177,650	2	$487	1	$19,275	82	$0	2	$7,464
DEPENDENT	ACTIVE	$182,080	$52,053	4	$70,634	41	$42,091	133	$4,397	86	$12,906
DEPENDENT	ACTIVE	$112,949	$17,926	1	$24,795	28	$12,784	92	$11,272	86	$46,172
DEPENDENT	ACTIVE	$101,266	$49,069	1	$15,797	24	$20,030	63	$96	8	$16,274
DEPENDENT	ACTIVE	$83,830	$24,268	1	$17,677	14	$41,739	123	$142	43	$4
DEPENDENT	ACTIVE	$82,806	$26,377	6	$34,559	39	$12,877	111	$790	76	$8,203
DEPENDENT	ACTIVE	$80,822	$20,534	4	$29,300	125	$15,766	102	$2,297	142	$12,925
DEPENDENT	ACTIVE	$73,011	$0	0	$43,874	18	$25,575	82	$2,432	13	$1,129
DEPENDENT	ACTIVE	$65,186	$25,681	2	$25,595	30	$11,546	49	$331	71	$2,033
DEPENDENT	ACTIVE	$60,922	$58,826	1	$0	0	$2,096	21	$0	0	$0
DEPENDENT	ACTIVE	$60,896	$58,734	1	$0	0	$2,155	16	$7	2	$0
DEPENDENT	ACTIVE	$60,207	$34,933	1	$17,319	20	$7,721	35	$0	5	$234
DEPENDENT	ACTIVE	$59,839	$35,107	3	$1,570	4	$9,596	67	$13,565	11	$0
DEPENDENT	ACTIVE	$56,494	$40,022	3	$1,677	9	$13,915	49	$116	10	$763
DEPENDENT	ACTIVE	$54,079	$0	0	$2,062	2	$4,042	24	$47,497	21	$478
DEPENDENT	ACTIVE	$49,930	$31,046	2	$3,180	4	$15,643	57	$39	5	$23
DEPENDENT	ACTIVE	$49,242	$0	0	$19,717	18	$18,035	71	$174	14	$11,317
DEPENDENT	ACTIVE	$48,595	$38,911	2	$4,494	19	$5,148	26	$42	13	$0
DEPENDENT	ACTIVE	$46,902	$10,875	1	$14,232	7	$8,952	27	$82	7	$12,760
DEPENDENT	ACTIVE	$46,512	$27,910	2	$0	0	$6,708	24	$0	0	$11,894
DEPENDENT	TERMED	$44,795	$0	0	$14,102	9	$21,293	24	$2,898	12	$6,503
DEPENDENT	ACTIVE	$43,344	$25,803	1	$7,862	24	$6,233	44	$2,313	60	$1,133
DEPENDENT	ACTIVE	$40,921	$0	0	$21,018	77	$15,282	30	$444	13	$4,177
DEPENDENT	ACTIVE	$40,777	$0	0	$31,229	10	$8,597	15	$0	3	$952
DEPENDENT	ACTIVE	$38,918	$0	0	$35,853	4	$2,350	12	$140	9	$574

Employer Name: SAMPLE GROUP

Product: PREFERRED BLUE PPO

Current Incurred Period: 01/01/2013-12/31/2013, Paid Through 03/31/2014

High Cost Cases

Members with greater than $25,000 in claim amounts ranked by total cost

			Inpatient Facility		Outpatient Facility		Professional Services		Pharmacy		Ancillary
Coverage Status	Member Status	Total Cost	Cost	Admits	Cost	Encounters	Cost	Encounters	Cost	Scripts	Cost
DEPENDENT	ACTIVE	$38,221	$31,174	1	$0	0	$7,047	32	$0	0	$0
DEPENDENT	ACTIVE	$36,312	$19,650	1	$1,020	2	$1,284	8	$0	0	$14,358
DEPENDENT	ACTIVE	$31,231	$27,141	1	$1,018	3	$2,741	17	$32	10	$299
DEPENDENT	ACTIVE	$30,304	$8,238	1	$10,805	12	$10,186	33	$715	19	$360
DEPENDENT	ACTIVE	$30,231	$0	0	$18,688	19	$8,853	68	$95	51	$2,595
DEPENDENT	ACTIVE	$30,215	$22,719	2	$3,131	2	$4,365	76	$0	4	$0
DEPENDENT	TERMED	$29,971	$22,575	2	$488	9	$4,664	32	$2,243	36	$0
DEPENDENT	TERMED	$29,463	$19,503	2	$0	0	$9,838	52	$122	16	$0
DEPENDENT	ACTIVE	$28,829	$26,973	1	$0	0	$1,122	11	$735	10	$0
DEPENDENT	ACTIVE	$28,547	$20,789	1	$0	0	$7,420	62	$252	6	$87
DEPENDENT	ACTIVE	$26,861	$0	0	$23,131	17	$1,645	12	$515	19	$1,570
DEPENDENT	ACTIVE	$26,464	$0	0	$512	4	$834	9	$25,118	47	$0
DEPENDENT	ACTIVE	$26,126	$11,863	1	$7,274	8	$6,206	16	$0	2	$783
DEPENDENT	ACTIVE	$25,967	$0	0	$19,111	18	$6,103	27	$338	15	$414
DEPENDENT	ACTIVE	$25,050	$17,982	1	$249	7	$4,999	35	$1,193	26	$628
SUBSCRIBER	ACTIVE	$282,719	$11,393	3	$72,576	197	$26,894	114	$1,397	53	$170,459
SUBSCRIBER	ACTIVE	$219,329	$180,510	1	$4,421	10	$20,306	60	$632	16	$13,459
SUBSCRIBER	ACTIVE	$136,530	$3,925	1	$109,607	21	$8,566	36	$1,021	6	$13,411
SUBSCRIBER	ACTIVE	$128,682	$93,658	2	$7,936	13	$16,587	89	$10,340	119	$161
SUBSCRIBER	ACTIVE	$126,402	$81,806	4	$15,967	47	$21,519	66	$344	15	$6,765
SUBSCRIBER	ACTIVE	$125,617	$84,179	2	$928	3	$36,181	85	$39	44	$4,290
SUBSCRIBER	ACTIVE	$105,411	$64,220	2	$25,800	26	$13,630	65	$46	18	$1,715
SUBSCRIBER	ACTIVE	$104,775	$0	0	$13,899	27	$4,840	32	$723	18	$85,313
SUBSCRIBER	ACTIVE	$73,401	$0	0	$3,026	12	$2,245	21	$28,843	24	$39,287
SUBSCRIBER	ACTIVE	$62,020	$51,663	1	$1,133	1	$4,070	18	$1,260	26	$3,894
SUBSCRIBER	TERMED	$61,712	$20,615	1	$3,618	4	$14,170	55	$9,912	27	$13,398

Employer Name: SAMPLE GROUP

Product: PREFERRED BLUE PPO

Current Incurred Period: 01/01/2013-12/31/2013, Paid Through 03/31/2014

High Cost Cases

Members with greater than $25,000 in claim amounts ranked by total cost

			Inpatient Facility		Outpatient Facility		Professional Services		Pharmacy		Ancillary
Coverage Status	Member Status	Total Cost	Cost	Admits	Cost	Encounters	Cost	Encounters	Cost	Scripts	Cost
SUBSCRIBER	ACTIVE	$59,839	$36,512	3	$6,636	29	$8,086	55	$4,576	57	$4,029
SUBSCRIBER	ACTIVE	$59,009	$45,760	2	$240	1	$12,941	43	$69	2	$0
SUBSCRIBER	ACTIVE	$57,769	$24,432	1	$0	0	$19,032	21	$195	13	$14,110
SUBSCRIBER	ACTIVE	$56,069	$0	0	$0	0	$0	0	$56,069	9	$0
SUBSCRIBER	ACTIVE	$46,083	$0	0	$20,427	21	$23,667	46	$471	18	$1,488
SUBSCRIBER	ACTIVE	$44,118	$0	0	$8,255	10	$2,753	29	$32,330	73	$780
SUBSCRIBER	ACTIVE	$43,155	$38,834	1	$0	0	$3,686	21	$96	13	$179
SUBSCRIBER	ACTIVE	$41,636	$0	0	$28,063	23	$7,804	48	$2,233	36	$3,535
SUBSCRIBER	ACTIVE	$38,698	$35,723	1	$0	0	$2,975	11	$0	5	$0
SUBSCRIBER	ACTIVE	$37,898	$19,794	1	$8,821	5	$6,936	58	$81	27	$2,265
SUBSCRIBER	TERMED	$35,259	$0	0	$32,825	5	$65	1	$1,692	13	$676
SUBSCRIBER	ACTIVE	$34,770	$0	0	$21,400	11	$10,057	62	$3,071	72	$241
SUBSCRIBER	ACTIVE	$34,636	$0	0	$25,481	18	$5,362	11	$160	22	$3,633
SUBSCRIBER	ACTIVE	$33,882	$29,357	1	$0	0	$4,436	34	$88	67	$0
SUBSCRIBER	ACTIVE	$33,851	$0	0	$2,065	5	$3,412	23	$0	1	$28,374
SUBSCRIBER	ACTIVE	$32,317	$0	0	$0	0	$3,158	22	$6,236	38	$22,923
SUBSCRIBER	ACTIVE	$30,656	$0	0	$5,419	5	$5,585	135	$19,257	88	$394
SUBSCRIBER	TERMED	$30,437	$0	0	$26,489	6	$1,962	7	$0	1	$1,985
SUBSCRIBER	ACTIVE	$28,783	$0	0	$15,623	20	$9,083	31	$414	29	$3,663
SUBSCRIBER	ACTIVE	$27,233	$0	0	$527	2	$10,571	46	$15,505	64	$629
SUBSCRIBER	ACTIVE	$26,966	$19,332	1	$3,976	14	$3,155	36	$126	30	$377
SUBSCRIBER	ACTIVE	$26,941	$0	0	$4,676	4	$6,785	51	$15,329	46	$151
SUBSCRIBER	ACTIVE	$26,534	$0	0	$15,714	20	$10,057	18	$358	7	$405
SUBSCRIBER	ACTIVE	$25,904	$7,982	1	$0	0	$1,422	19	$15,669	79	$831
SUBSCRIBER	ACTIVE	$25,819	$0	0	$2,472	7	$23,345	16	$2	4	$0
SUBSCRIBER	ACTIVE	$25,813	$0	0	$0	0	$1,527	24	$13,486	31	$10,800

Employer Name: SAMPLE GROUP

Current Incurred Period: 01/01/2013-12/31/2013, Paid Through 03/31/2014

Product: PREFERRED BLUE PPO

High Cost Cases

Members with greater than $25,000 in claim amounts ranked by total cost

			Inpatient Facility		Outpatient Facility		Professional Services		Pharmacy		Ancillary
Coverage Status	Member Status	Total Cost	Cost	Admits	Cost	Encounters	Cost	Encounters	Cost	Scripts	Cost
SUBSCRIBER	ACTIVE	$25,476	$0	0	$20,695	6	$4,339	8	$1	5	$442
SUBSCRIBER	ACTIVE	$25,186	$0	0	$695	5	$13,331	10	$305	7	$10,855
High Cost		**$5,172,919**	**$2,179,388**	**85**	**$1,053,220**	**1,242**	**$886,388**	**3,611**	**$363,146**	**2,221**	**$690,387**
% of Total		**42.0%**	**69.0%**	**31.1%**	**36.0%**	**22.0%**	**23.0%**	**9.0%**	**27.0%**	**8.0%**	**74.0%**
Total Costs		**$12,238,243**	**$3,150,803**	**273**	**$2,924,070**	**5,579**	**$3,852,377**	**39,356**	**$1,364,135**	**28,013**	**$930,237**

Employer Name: SAMPLE GROUP

Product: PREFERRED BLUE PPO

Current Incurred Period: 01/01/2013 - 12/31/2013, Paid Through 03/31/2014

Prior Incurred Period: 01/01/2012 - 12/31/2012, Paid Through 03/31/2014

Pharmacy Overview

Key pharmacy performance metrics

		Employer Group			Benchmark		
		Current Period	Prior Period	% Change	Current Period	Prior Period	% Change
Demographics	Member Months	47,320	0	0.0%	-	-	-
	Average Number of Members	3,943.3	0.0	0.0%	-	-	-
	Average Number of Contracts	1,623.8	0.0	0.0%	-	-	-
	Average Number of Members per Contract	10.9	0.0	0.0%	-	-	-
Utilization	Prescriptions	27,968	0	0.0%	-	-	-
	Percent Generic	80.4%	0.0%	0.0%	80.5%	0.0%	0.0%
	Percent Formulary	88.5%	0.0%	0.0%	89.0%	0.0%	0.0%
	Percent Mail Order	0.1%	0.0%	0.0%	0.1%	0.0%	0.0%
	Prescriptions per 1,000 Members	7,092	0	0.0%	7,003	0	0.0%
	Prescriptions per 1,000 Contracts	17,224	0	0.0%	17,008	0	0.0%
	Average Day Supply per Prescription	33	0	0.0%	35	0	0.0%
Cost	Billed Charges	$4,101,723	$0	0.0%	-	-	-
	Provider Cost	$1,355,930	$0	0.0%	-	-	-
	Employee Cost Sharing	$494,194	$0	0.0%	-	-	-
	Provider Cost per Contract	$835	$0	0.0%	$920	$0	0.0%
Cost per Prescription	Billed Charges per Prescription	$146.66	$0.00	0.0%	$150.97	$0.00	0.0%
	Provider Cost per Prescription	$48.48	$0.00	0.0%	$54.10	$0.00	0.0%
	Employee Cost Sharing per Prescription	$17.67	$0.00	0.0%	$19.66	$0.00	0.0%
By Source:	Generic	$13.19	$0.00	0.0%	$13.97	$0.00	0.0%
	Brand	$193.54	$0.00	0.0%	$220.25	$0.00	0.0%
By Formulary:	Formulary	$48.53	$0.00	0.0%	$54.56	$0.00	0.0%
	Non-Formulary	$48.14	$0.00	0.0%	$50.41	$0.00	0.0%
By Channel:	Mail Order	$2308.25	$0.00	0.0%	$344.98	$0.00	0.0%
	Retail	$46.38	$0.00	0.0%	$53.85	$0.00	0.0%
Cost per Member per Month (PMPM)	Billed Charges PMPM	$86.68	$0.00	0.0%	$88.11	$0.00	0.0%
	Provider Cost PMPM	$28.65	$0.00	0.0%	$31.57	$0.00	0.0%
	Employee Cost Sharing PMPM	$10.44	$0.00	0.0%	$11.47	$0.00	0.0%

Employer Name: SAMPLE GROUP

Product: PREFERRED BLUE PPO

Current Incurred Period: 01/01/2013 - 12/31/2013,Paid Through 03/31/2014

Prior Incurred Period: 01/01/2012 - 12/31/2012,Paid Through 03/31/2014

Pharmacy Cost and Utilization by Formulary and Tier

	Employer Group				Benchmark			
	Cost PMPM		Scripts per 1,000 Members		Cost PMPM		Scripts per 1,000 Members	
	Current Period	Prior Period	Current Period	Prior Period	Current Period	Prior Period	Current Period	Prior Period
Formulary	**$25.39**	**$25.05**	**6,278**	**6,570**	**$28.33**	**$26.23**	**6,232**	**6,311**
Tier Unknown	$25.39	$25.05	6,278	6,570	$28.33	$26.23	6,232	6,311
Non Formulary	**$3.27**	**$2.96**	**814**	**845**	**$3.24**	**$3.20**	**771**	**913**
Unknown	**$0.00**	**$0.00**	**0**	**0**	**$0.00**	**$0.00**	**0**	**1**
Total	**$28.65**	**$28.02**	**7,092**	**7,415**	**$31.57**	**$29.43**	**7,004**	**7,225**

Employer Name: SAMPLE GROUP

Current Incurred Period: 01/01/2013 - 12/31/2013, Paid Through 03/31/2014

Product: PREFERRED BLUE PPO

Top 20 Prescriptions Ranked by Cost

	Employer Group					
Drug Name	Number of Scripts	Average Days Supply	Cost	Employee Cost Sharing	Scripts per 1,000 Members	Cost PMPM
ENBREL	68	42.0	$147,227	$3,115	17.2	$3.11
HUMIRA	50	32.7	$73,481	$1,998	12.7	$1.55
OMNITROPE	20	38.5	$70,392	$2,097	5.1	$1.49
CRESTOR	203	48.8	$42,429	$11,370	51.5	$0.90
ADVAIR DISKUS	157	30.8	$33,892	$8,114	39.8	$0.72
LANTUS SOLOSTAR	95	49.5	$26,959	$4,965	24.1	$0.57
NOVOLOG	69	41.5	$26,545	$3,505	17.5	$0.56
HUMALOG	65	51.2	$26,119	$3,306	16.5	$0.55
OXYCONTIN	45	28.3	$24,559	$2,060	11.4	$0.52
NEXIUM	108	38.7	$24,514	$6,366	27.4	$0.52
DEXTROAMPHETAMINE-AMPHETAMINE	176	32.4	$22,064	$7,911	44.6	$0.47
ENOXAPARIN SODIUM	20	17.5	$20,146	$2,135	5.1	$0.43
DIOVAN	98	53.3	$17,910	$5,608	24.9	$0.38
ONE TOUCH ULTRA TEST STRIPS	99	35.2	$17,759	$2,579	25.1	$0.38
METHYLPHENIDATE ER	126	32.0	$15,438	$5,691	32.0	$0.33
VYVANSE	97	30.7	$14,762	$4,755	24.6	$0.31
NUTROPIN AQ NUSPIN	14	26.4	$14,170	$631	3.6	$0.30
CELEBREX	59	36.3	$13,368	$3,111	15.0	$0.28
CYMBALTA	95	35.1	$13,254	$1,833	24.1	$0.28
ANDROGEL	25	31.4	$11,194	$1,590	6.3	$0.24
Subtotal - Top 20	**1689**	**38.3**	**$656,181**	**$82,739**	**428.3**	**$13.87**
All Other Drugs	**26279**	**33.1**	**$699,749**	**$411,455**	**6,664.2**	**$14.79**
Total	**27968**	**33.4**	**$1,355,930**	**$494,194**	**7,092.5**	**$28.65**

Employer Name: SAMPLE GROUP

Current Incurred Period: 01/01/2013 - 12/31/2013, Paid Through 03/31/2014

Product: PREFERRED BLUE PPO

Pharmacy Cost by Therapeutic Class

Top 20 pharmaceutical therapeutic classes ranked by cost

	Employer Group								Benchmark	
Therapeutic Class	Number of Scripts	Average Days Supply	% Generic Scripts	% Formulary Scripts	Cost	Cost per Script	Scripts per 1,000 Members	Cost PMPM	Scripts per 1,000 Members	Cost PMPM
Hormones, synthetic substitutes, & metabolic agents	3,708	43.5	74.4%	93.1%	$305,473	$82	940	$6.46	941	$5.43
Biologic & immunologic agents	226	28.6	27.9%	50.4%	$224,745	$994	57	$4.75	58	$5.16
Central nervous system agents	8,338	30.0	90.9%	91.6%	$218,134	$26	2,114	$4.61	2,028	$6.80
Cardiovascular agents	4,294	52.3	83.1%	93.4%	$138,067	$32	1,089	$2.92	1,127	$2.35
Respiratory agents	2,364	26.6	61.3%	76.4%	$106,874	$45	599	$2.26	543	$2.40
Gastrointestinal agents	1,089	38.2	81.0%	77.6%	$54,381	$50	276	$1.15	264	$1.21
Anti-infective agents	3,538	11.8	95.0%	98.0%	$51,727	$15	897	$1.09	898	$1.62
Medical supplies	503	42.6	0.2%	88.7%	$47,832	$95	128	$1.01	116	$0.86
Skin & mucus membrane condition agents	844	21.6	78.3%	78.4%	$46,508	$55	214	$0.98	226	$1.21
Undefined NDC	863	31.6	86.9%	81.7%	$43,704	$51	219	$0.92	187	$1.42
Miscellaneous agents	414	23.4	13.0%	25.8%	$32,796	$79	105	$0.69	105	$0.80
Blood formation & coagulation agents	293	42.6	77.8%	82.9%	$31,137	$106	74	$0.66	90	$0.45
Antineoplastic agents	113	49.8	85.0%	85.8%	$14,244	$126	29	$0.30	29	$1.15
Ophthalmic preparations	393	18.9	69.2%	86.5%	$12,451	$32	100	$0.26	107	$0.29
Nutritional agents	225	53.2	75.6%	79.1%	$8,494	$38	57	$0.18	53	$0.15
Compounding products	73	26.7	0.0%	0.0%	$7,054	$97	19	$0.15	16	$0.10
Electrolyte, caloric, water balance agents	501	52.8	91.8%	94.4%	$6,211	$12	127	$0.13	163	$0.07
Otic preparations	129	11.1	65.1%	96.9%	$5,530	$43	33	$0.12	32	$0.09
Mouth & throat preparations	60	15.8	96.7%	90.0%	$568	$9	15	$0.01	19	$0.01
Diagnostic agents	0	0.0	0.0%	0.0%	$0	$0	0	$0.00	1	$0.00
Total	**27,968**	**33.4**	**80.4%**	**88.5%**	**$1,355,930**	**$48**	**7,092**	**$28.65**	**7,003**	**$31.57**

Report Descriptions

Section 1: Summary Reports

Executive Summary
Account Summary
Membership Trend by Contract Type
Summary Trend by Major Type of Service
Membership Distribution by Age and Gender
Membership Health Risk Distribution
Medical Claims Distribution
Quality

Section 2: Financial Reports (Paid Period Based)

Financial Overview
Claim Cost by Age, Gender and Relationship to Contract Holder
Claim Lag
Premium and Claim Cost Analysis

Section 3: Cost and Utilization Detail Reports

Top 20 Episode Families Ranked by Cost
Total Costs by Disease
Disease Related Costs
Top 20 Facilities
Top 20 Providers
Top 15 Specialties
Network Utilization
Provider Cost Savings and Employee Cost Sharing Analysis
Medical Cost and Utilization by Detailed Service Category
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Report Descriptions

Section 4: Pharmacy Reports

Pharmacy Overview
Pharmacy Cost and Utilization by Formulary and Tier
Top 20 Prescriptions Ranked by Cost
Pharmacy Cost by Therapeutic Class

Glossary

Term	Definition
Allowed Amount	Total amount allowed under the medical plan including the employee paid portion of deductibles, co-pays, coinsurance, the employer paid portion (paid amount) and COB. Allowed amount does not include plan and administrative exclusions such as duplicate claims, ineligible claims, network discount savings and R&C savings.
Average Age	The average age of the members covered under the plan for the reporting period.
Average Cost per Contract	The total cost divided by the average number of contract holders for the reporting period
Average Cost per Episode	The total cost divided by the number of episodes.
Average Cost per Member	The total cost divided by the average number of members for the reporting period
Average Days Supply per Prescription	The number of days supplied per prescription.
Average Length of Stay (ALOS)	The number of days, counted from the day of admission to the day of discharge, that a plan member is confined to a hospital or other facility for each admission. Number of inpatient days divided by the number of inpatient admissions.
Average Members per Contract	Number of members associated with a contract holder. The number of months each member was enrolled during the reporting period is used in the calculation therefore fractional or partial members will be associated with a contract holder.
Average Members per Family	Number of members enrolled under family coverage for a contract holder. The number of months each member was enrolled during the reporting period is used in the calculation therefore fractional or partial members will be associated with a contract holder.
Average Number of Contracts	Number of members defined as a contract holder. The number of months each member was enrolled during the reporting period is used in the calculation therefore a fractional number of contracts will be reported.
Average Number of Members	Number of members enrolled during the reporting period. The number of months each member was enrolled during the reporting period is used in the calculation therefore a fractional number of members will be reported.
Benchmark	Comparative cost and utilization statistics based on the experience of similar member populations. Benchmarks are adjusted for the plan sponsor age and gender mix and mix of episodes as appropriate for comparative purposes.
Billed Charges	Total amount of charges requested or billed by the provider for services.
Brand	A prescription drug that has been patented and is only available through one manufacturer.
Capitation	A method of paying for healthcare services on the basis of the number of patients who are covered for specific services over a specified period of time rather than the cost or number of services that are actually provided.
Coinsurance	A specified percent of costs that a member must pay out-of-pocket for services once a deductible is met.
Completed Episode	An episode of care is termed “complete” based on the absence of treatment for a medical condition for a specified period of time.
Compliance Rate (Quality)	Percent of recommended treatments received by the member population. Ratio of the Quality Opportunities-With Compliance to Total Quality Opportunities.
Contract Holder	The individual in whose name a contract is issued. The employee covered under an employer's group health contract. The contract holder (or subscriber) can enroll dependents under family coverage.
Co-payment	A specified dollar amount that a member must pay out-of-pocket for a specified service at the time the service is rendered.
Cost per Encounter	Total cost divided by the total number of encounters.
Cost per Episode	Total Cost divided by the number of episodes.

Cost per Member per Month (PMPM)	Cost divided by the number of enrolled member months during the reporting period.
Cost per Prescription	See Cost per Encounter
Deductible	A specified dollar amount that a member must pay out-of-pocket each year for covered services before the health plan assumes any liability for the cost of covered services.
Disease Related Costs	Cost of services related to a specific disease.
Employee Cost Sharing	When an employee pays out of pocket for a portion of the covered medical expense. Deductible, coinsurance, and co-pay are all forms of employee cost sharing.
Encounters	A contact between a patient and the health care system for a related set of service(s) for one or more medical conditions that occur in a given day for a member. For Outpatient Facility, Professional, and Ancillary Type of Services, each related set of visits and services per day is a single encounter. For Inpatient Facility, each confinement is a single encounter where confinements can span multiple days. For Pharmacy Type of Services, each service or prescription is a single encounter.
Encounters per 1,000 members	The encounter rate per 1,000 members. The number of encounters divided by the average number of members in the reporting period multiplied by 1,000.
Episode Families	An Episode Family is a group of related episodes of care.
Episode Treatment Group (ETG)	A clinical classification methodology combining medical and pharmacy services into mutually exclusive and exhaustive categories called episodes of care.
Episode(s) of Care	The unique occurrences of a medical condition or disease for a patient and the services involved (e.g. provider visits, labs, hospitalization, medications) in diagnosing and managing their treatment.
Formulary	Preferred Drug List of brand-name and generic medications that have been rigorously reviewed and selected by a committee of practicing doctors and clinical pharmacists for their quality, cost savings, and effectiveness.
Formulary Utilization	The percentage of total prescriptions that were dispensed on the Formulary list.
Generic	A drug which is the pharmaceutical equivalent to one or more brand name drugs. Such drugs have been approved by the Food and drug Administration as meeting the same standards for safety, purity, strength and effectiveness as the brand name drug.
Generic Utilization	The ratio of prescriptions that were dispensed as generic to the total prescriptions available as generic.
Health Risk	See Relative Health Risk
In-Network Utilization	Percent of costs performed by participating providers at the time the claim was incurred.
Loss ratio	Total claim cost divided by total premium
Mail Order Utilization	The percentage of total prescriptions that were ordered and dispensed through the mail
Member Months	A cumulative total of monthly membership for the reporting period.
Non Formulary	All other medications not included on the Formulary or a Preferred Drug List.
Out-of-Network	Services performed by non-participating providers at the time the claim was incurred.
Percent Formulary (Scripts)	See Formulary Utilization
Percent Generic (Scripts)	See Generic Utilization
Percent In-Network Costs	See In-Network Utilization
Percent Mail Order (Scripts)	See Mail Order Utilization
Prescriptions per 1,000 Contracts	The prescription rate per 1,000 members. The number of prescriptions divided by the average number of contracts in the reporting period multiplied by 1,000.
Prescriptions per 1,000 Members	See Encounters per 1,000 Members
Provider Cost	Amount reimbursed to the provider by the plan

Provider Cost Savings	The total savings to the plan sponsor due to the application of negotiated discount arrangements with contracted providers and R&C savings. Billed Charges less Allowed Amount.
Quality Opportunities	Number of treatments recommended by evidence based medicine guidelines and national standards of care for each member based on their clinical condition (case).
Relative Health Risk	Average member's relative health risk during a period of time using information about their mix of diseases and conditions for that same year.
Service Category	See Type of Service
Therapeutic Class	A method of classifying a drug according to its therapeutic action in the body.
Tier (Pharmacy)	Payment Tier Drug was assigned to at the time of purchase.
Total Medical Cost	Total medical claims costs including Facility Inpatient, Facility Outpatient, Professional Services and Ancillary Services.
Total Pharmacy Cost	Total retail pharmacy costs. Drugs administered in an office setting (e.g. allergy shots, immunizations) are included in medical costs.
Type of Service (TOS)	Type of Service categories are assigned for medical claims based on Major type of services and the procedure codes used in describing the service. The four major types of service used in categorizing medical claims are 1. Facility Inpatient; 2. Facility Outpatient; 3. Professional Services; and 4. Ancillary Services. After assigning a service to these categories, CPT, HCPCs and Revenue Codes are used to further differentiate services at four separate levels.
With Compliance (Quality)	The number of recommended treatments actually received by the member population.

Attachment 9

Attachment 9

Attachment 9

GeoAccess

Please refer to Attachment 9 in the electronic submission for full details referring to the GeoAccess summary provided.

Attachment 10

Attachment 10

Attachment 10

NDPERS PPO Providers

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING FREESTANDING AMBULATORY FACILITIES

North Dakota

Bismarck

Advanced Surgical Arts Center
3913 Lockport St
(701) 530-8450

Becker Plastic Surgery Center
1500 Interchange Ave
Ste 100
(701) 530-3333

Bismarck Surgical Associates, LLC
600 N 9th St
(701) 221-2299

Dakota Surgery & Laser Center
430 E Sweet Ave
(701) 222-4900

Face & Jaw Surgery Center
1140 W Capitol Ave
(701) 258-7220

Institute of Facial Surgery
2331 Tyler Pkwy Ste 4
(701) 255-4000

IPA, LLC dba Independent Practitioners of American, LLC
115 W Century Ave Ste B
(701) 255-2252

Mid Dakota Clinic
401 N 9th St
(701) 530-6000

Dickinson

Great Plains Clinic, PC
33 9th St W
(701) 483-6017

Fargo

Abdullah Surgery Center
3280 20 St S
(701) 293-7408

Face & Jaw Surgery Center
4344 20th Ave S Ste 2
(701) 239-5969

FM Endoscopy Center LLC
300 Main Ave Ste 205
(701) 200-4150

North Dakota (cont.)

Fargo (cont.)

Institute For Low Back Care LLC
300 Main Ave Suite 212
(701) 297-0817

Lamb Plastic Surgery Center, PC
1507 University Dr S
(701) 237-9592

Northern Plains Surgery Center, LLC
44 4th St S
(701) 232-9200

Grand Forks

Face & Jaw Surgery Center
2845 36th Ave S
(701) 775-4444

North Dakota Surgery Center
3035 Demers Ave
(701) 738-4240

Minot

Same Day Surgery Center
400 E Burdick Expy
Suite 400
(701) 857-7951

Wahpeton

Essentia Health Wahpeton Clinic
275 11th St S
(701) 642-2000

Williston

Trinity Community Clinic/Western Dakota
1321 W Dakota Parkway
(701) 572-7711

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING PHYSICIANS

Minnesota
Ada

Bridges Medical Center dba Essentia Health Ada Clinic
201 9th Street W
(218) 784-2727

- Anesthesiology (MD)
  Erie, John K., MD
  Vinych, John V., MD
- Family Practice
  Martsching, Sandra L., MD
  Sikkink, Kari Rae, MD
  Winjum, Charles S., MD
- General Surgery
  Wasemiller, Paul S., MD
- Orthopedic Surgery
  Sehgal, Bantoo, MD
- Urology
  Strinden, Steven P., MD

Valley Vision Clinic, Ltd.
402 3rd St E #1
(218) 784-4091

- Optometrist
  Solseng, David C., OD

Barnesville

Barnesville Area Clinic
209 2nd St SE
(218) 354-2111

- Family Practice
  Thompson, Owen R., MD

Minnesota Eyecare Network Inc dba Barnesville Eye Clinic
112 S Front St
(218) 354-2510

- Optometrist
  Van Den Einde, Kathryn R., OD

Breckenridge

St Francis Medical Center
2400 St Francis Drive
(218) 643-3000

- Emergency Medicine
  Weiner, Michael D., MD
- Family Practice
  Carrera, Rafael, MD
  Emery, Patrick E., MD
  Halvorson, James E., MD
  Kuzma, George, MD
  Mayo, William M., MD
  Munnell, Dean T., MD

Minnesota (cont.)
Breckenridge (cont.)

St Francis Medical Center (cont.)

- Family Practice (continued)
  Nelson, Susan K., MD
  Nyarandi, Timothy, MD
  Odom, John H L., MD
  Ostmo, Robert P., MD
  Overvold, Angel D., DO
  Rath, Michael B., MD
  Salazar-Tier, Mary Ruth G., MD
  Turner, Stephen M., DO
  Veland, Robert R., DO
  Wadell, Larry D., MD
- General Practice
  Houserman, Leighanne H., MD
- General Surgery
  Chukwuani, Okwudili F., MD
  Collins, Jay D., MD
  Hossain, Azhar, MD
  Moza, Joseph S., MD
- Internal Medicine
  Hasnain, Mohsin, MD
  Strand, Duane D., MD
  Torseth, John W., MD
- Orthopedic Surgery
  Johnson, James F., MD
- Pathology
  Smith, Gregory M., MD
- Pathology, Anatomy, Clinical Pathology
  Pauley, Scott D., MD
- Plastic Surgery
  Weiner, Michael D., MD
- Psychiatry (MD/DO)
  Torson, Nancy E., MD
- Radiology
  Licht, Lawrence H., MD

Crookston

Altru Crookston
400 S Minnesota St
(218) 281-9100

- Allergy
  Jacobsen, John J., MD
- Cardiovascular Disease
  Aboufakher, Rabeea, MD
- Dermatology
  Hoverson-Schott, Alyssa R., MD
- Family Practice
  Ajayi, Olumide A., MD
  Brandt, Rose B., MD

Minnesota (cont.)
Crookston (cont.)

Altru Crookston (cont.)

- Family Practice (continued)
  Dorman, Ronald C., MD
  Hanson, Rolf C., MD
- Gastroenterology
  Ojuro, Peter O., DO
- General Surgery
  Charette, Scott D., MD
  Usatii, Anatolie A., MD
- Geriatrics
  Aboufakher, Rabeea, MD
  Frugone Larrea, David F., MD
  Ring, Bruce L., MD
- Internal Medicine
  Aboufakher, Rabeea, MD
  Breitwieser, Wayne R., MD
  Frugone Larrea, David F., MD
  Makarem, Andres O., MD
  Olson, Theodore S., MD
  Paulson, Rolf R., MD
  Ring, Bruce L., MD
- Nephrology
  Haastrup, Adetola T., MD
- Neurology
  Roller, Matthew J., MD
- Oncology
  Walsh, Daniel J., MD
- Ophthalmology
  Brockman, Ronald J., MD
- Orthopedic Surgery
  Gardner, Jeremy J., MD
- Otology, Laryngology, Rhinology
  Yoshida, Glen Y., MD
- Pathology
  Brown, Ann K., MD
- Psychiatry (MD/DO)
  Madaram, Kondal R., MD
- Radiology
  Aafedt, Bradley C., MD
  Aizpuru, Richard D., MD
  Ali, Azhar T., MD
  Arsenault, Todd M., MD
  Asis, Martin J., MD
  Baldwin, Matthew T., MD
  Baraga, Joseph J., MD
  Barkmeier, Jeffrey, MD
  Berens, Bruce M., MD
  Berger, Mark W., MD
  Block, Nathan D., MD
  Bowman Seitz, Tara S., MD

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING PHYSICIANS

Altru Crookston (cont.)

- Radiology (continued)
  Bretzman, Peter A., MD
  Bryan, Erich N., MD
  Bryson, Thomas C., MD
  Butler, Robert R., MD
  Carlson, Blake A., MD
  Carolan, Paul R., MD
  Caspers, John M., MD
  Castaneda, Wilfrido R., MD
  Dallum, Bernie J., MD
  Drake, David G., MD
  Edmonson, George R., MD
  Frecentese, Dominic F., MD
  Gilloon, Benjamin A., MD
  Goertzen, Timothy C., MD
  Grogan, Michael J., MD
  Hagen, William N., DO
  Hartigan, Andrew S., MD
  Hedlund, Laura J., MD
  Hommeyer, Steven C., MD
  Hood, Larissa L., MD
  Jackson, Christopher A., MD
  Johnson, Adam C., MD
  Kang, Edith H., MD
  Knoedler, John P., MD
  Knutzen, Anders M., MD
  Lambert, David P., MD
  Leon, Jorge A., MD
  Loe, Matthew J., MD
  Longley, Deborah G., MD
  Ludeman, Lucas B., MD
  Magnuson, Jeffrey E., MD
  Maguire, Frank P., MD
  May, Benjamin J., MD
  Muschenheim, Alexandra L., MD
  Omdahl, Bonnie B., MD
  Page, Graydon T., MD
  Parrino, Suzanne S., MD
  Passe, Theodore J., MD
  Phelan, Jeffrey S., MD
  Prescott, Trisha R., MD
  Rathmann, Gregory A., MD
  Rhodes, Nicholas G., MD
  Rosenberg, Michael S., MD
  Ruzek, Kimberly A., MD
  Savcenko, Vladimir, MD
  Tai, Angela W., MD
  Tashjian, Joseph H., MD
  Treuer, Jody B., MD

Minnesota (cont.)
Crookston (cont.)

Altru Crookston (cont.)

- Radiology (continued)
  Truman, Susan M., MD
  Tummala, Anuradha K., MD
  Veldman, Mark W., MD
  Weinmann, Robert H., MD
  Weisensee, Anne M., MD
  Wiese, Don E., MD
  Wittenberg, Keith H., MD
  Wold, Peter B., MD

Crookston Eye Clinic
216 S Main St
(218) 281-2020

- Optometrist
  Forgit, Matthew C., OD
  Miller, Kari J., OD
  Smith, Angela S., OD

Northwestern Mental Health Center, Inc.
603 Bruce St
(218) 281-3940

- Psychiatry (MD/DO)
  Jarmuskewicz, James R., MD
  Michels, Paul O., MD

Riverview Family Practice
323 S Minnesota St
(218) 281-9519

- Family Practice
  Bell, Debra, MD
  Kanten, Erik J., MD
- Internal Medicine
  Fashoro, Olatubosun B., MD

Riverview Healthcare Association
323 S Minnesota St
(218) 281-9200

- Emergency Medicine
  Aigbedion, Eric, MD
  Eelkema, William H., MD
  Lasala, Frank, MD
  May, Sara B., MD
  Trites, Paul N., MD
- Family Practice
  Bell, Debra, MD
  Brown, James B., MD
  Dorman, Ronald C., MD
  Eriksson, Peter A., MD
  Hanson, Rolf C., MD
  Kanten, Erik J., MD

Minnesota (cont.)
Crookston (cont.)

Riverview Healthcare Association (cont.)

- Family Practice (continued)
  Paneru, Ram P., MD
  Viscito, Matthew S., MD
- General Surgery
  Afonya, Idatonye I., MD
  Moza, Joseph S., MD
- Internal Medicine
  Aigbedion, Eric, MD
  Baig, Mirza B., MD
  Chapin, Clifford A., MD
  Fashoro, Olatubosun B., MD
  Olson, Theodore S., MD
- Orthopedic Surgery
  Fennell, Collin W., MD
  Kim, Sunny S., MD
  Palkert, Diane M., MD
- Pediatrics
  Lazzara, Joseph V., MD
- Podiatry, Surgical Chiropody
  Peterson, David C., DPM

Riverview Specialty Clinic
323 S Minnesota St
(218) 281-9595

- Family Practice
  Balaraman, Saravana K., MD
  Bell, Debra, MD
  Kanten, Erik J., MD
- General Surgery
  Afonya, Idatonye I., MD
  Bolar, Randall J., MD
- Internal Medicine
  Baig, Mirza B., MD
  Fashoro, Olatubosun B., MD
- Obstetrics/Gynecology
  Wessman, Kari J., MD
- Orthopedic Surgery
  Fennell, Collin W., MD
  Palkert, Diane M., MD
- Pediatrics
  Brito, Paula, MD
- Podiatry, Surgical Chiropody
  Peterson, David C., DPM
- Urology
  Schultz, Steven E., MD

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING PHYSICIANS

Minnesota (cont.)

Dilworth

Becker Optometry, PC
415 34th St N
(218) 233-9839

- Optometrist
  Becker, Corey L., OD

E Grand Forks

Altru Clinic East Grand Forks
607 Demers Ave
(218) 773-0357

- Cardiovascular Disease
  Bekdash, Ismail L., MD
  Kirnus, Mikhail, MD
- Family Practice
  Gasparini, Andrew, MD
- Gastroenterology
  Ojuro, Peter O., DO
- Internal Medicine
  Bekdash, Ismail L., MD
  Go, Jason S., MD
  Kirnus, Mikhail, MD
  Makarem, Andres O., MD
  Ojuro, Peter O., DO
- Obstetrics/Gynecology
  Andreson, Laura K., DO
- Oncology
  Dentchev, Todor N., MD
- Podiatry, Surgical Chiropody
  Britten, Joshua W., DPM
  Lo, Shoua, DPM

Opticare
421 Demers Ave NW
(218) 773-2400

- Optometrist
  Coles, Destin R., OD
  Gander, Steven P., OD
  Storhaug, Bruce A., OD

Riverview Health dba Glenmore Recovery Center
1424 Central Ave NE
(218) 773-4994

- Pediatrics
  Conley, Justin T., MD

Minnesota (cont.)

E Grand Forks (cont.)

Riverview Specialty Clinic-E. Grand Forks
1428 Central Ave NE
(866) 773-1390

- Family Practice
  Balaraman, Saravana K., MD
- Obstetrics/Gynecology
  Wessman, Kari J., MD
- Orthopedic Surgery
  Fennell, Collin W., MD
  Palkert, Diane M., MD
- Pediatrics
  Brito, Paula, MD
- Podiatry, Surgical Chiropody
  Peterson, David C., DPM
- Urology
  Schultz, Steven E., MD

Sanford Health 621 Demers Ave Clinic
621 Demers Ave
(218) 773-5858

- Cardiovascular Disease
  Clardy, David J., MD
  Farkas, Susan I., MD
  Kohlman-Petrick, Joellen, MD
  McDowell, Christina, MD
  Wynne, Joshua, MD
- Family Practice
  Alam, Mohammad, MD
  Berntson, Mark E., MD
  Bradbury, Jon E., MD
  Lokensgard Pierce, Karin A., MD
  Pearson, Eric C., MD
  Stayman, Mathew L., MD
- General Surgery
  Albrecht, Warren E., DO
  Fabian, Matthew W., DO
  Garcia, Luis A., MD
  Mistry, Bhargav M., MD
- Internal Medicine
  Geeraerts, Louis H., MD
- Obstetrics/Gynecology
  Mickelson, Margaret T., MD
- Oncology
  Geeraerts, Louis H., MD
- Otology, Laryngology, Rhinology
  Abraham, David A., MD
- Podiatry, Surgical Chiropody
  Arness, Richard E., DPM

Minnesota (cont.)

E Grand Forks (cont.)

Sanford Health 621 Demers Ave Clinic (cont.)

- Podiatry, Surgical Chiropody (continued)
  Cullen, Nicole, DPM
- Urology
  Williams, Brent, MD

Sanford Health 621 Demers Ave Clinic
621 Demers Ave
(218) 773-5858

- Cardiovascular Disease
  Kohlman-Petrick, Joellen, MD
  McDowell, Christina, MD
- Internal Medicine
  Tinguely, Matthew, MD
- Nephrology
  Phadke, Gautam, MD
- Obstetrics/Gynecology
  Christensen, Steffen P., MD
  Dangerfield, Jon D., MD
- Podiatry, Surgical Chiropody
  Cullen, Nicole, DPM

Sanford Health 929 Central Ave Clinic
929 Central Ave NW
(218) 773-6800

- Cardiovascular Disease
  Clardy, David J., MD
  Farkas, Susan I., MD
  Wynne, Joshua, MD
- Family Practice
  Alam, Mohammad, MD
  Beattie, Robert W., MD
  Berntson, Mark E., MD
  Bradbury, Jon E., MD
  Breen, Charles J., MD
  Lokensgard Pierce, Karin A., MD
  Pearson, Eric C., MD
  Stayman, Mathew L., MD
- General Surgery
  Albrecht, Warren E., DO
  Fabian, Matthew W., DO
  Garcia, Luis A., MD
  Mistry, Bhargav M., MD
- Obstetrics/Gynecology
  Christensen, Steffen P., MD
  Dangerfield, Jon D., MD
  Mickelson, Margaret T., MD

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING PHYSICIANS

Minnesota (cont.)
E Grand Forks (cont.)

Sanford Health 929 Central Ave Clinic (cont.)
- Otology, Laryngology, Rhinology
  Abraham, David A., MD
- Urology
  Williams, Brent, MD

Sanford Health 929 Central Ave Clinic
929 Central Ave NW
(218) 733-6800
- Cardiovascular Disease
  Kohlman-Petrick, Joellen, MD
- Nephrology
  Phadke, Gautam, MD
- Obstetrics/Gynecology
  Christensen, Steffen P., MD
  Dangerfield, Jon D., MD
- Orthopedic Surgery
  Robertson, Christopher, MD
- Podiatry, Surgical Chiropody
  Cullen, Nicole, DPM
- Radiology
  Asheim, Jason, MD
  Marsden, Richard J., MD

Erskine

Altru Clinic Erskine
23076 347th St SE
(218) 687-5317
- Family Practice
  Ajayi, Olumide A., MD
  Brandt, Rose B., MD
- Geriatrics
  Frugone Larrea, David F., MD
- Internal Medicine
  Frugone Larrea, David F., MD
  Makarem, Andres O., MD
  Olson, Theodore S., MD
  Paulson, Rolf R., MD
- Pathology
  Weiland, Timothy L., MD

Fertile

Altru Clinic Fertile
101 N Mill St
(218) 945-6064
- Family Practice
  Ajayi, Olumide A., MD
  Hanson, Rolf C., MD

Minnesota (cont.)
Fertile (cont.)

Altru Clinic Fertile (cont.)
- Geriatrics
  Frugone Larrea, David F., MD
  Ring, Bruce L., MD
- Internal Medicine
  Breitwieser, Wayne R., MD
  Frugone Larrea, David F., MD
  Makarem, Andres O., MD
  Olson, Theodore S., MD
  Paulson, Rolf R., MD
  Ring, Bruce L., MD
- Pulmonary Diseases
  Breitwieser, Wayne R., MD

Riverview Family Practice Fertile
306 North Mill Street
(218) 945-6695
- Family Practice
  Balaraman, Saravana K., MD
  Kanten, Erik J., MD
- Pediatrics
  Brito, Paula, MD
  Conley, Justin T., MD

Fosston

First Care Medical Services dba Essentia Health - Fosston
900 Hilligoss Blvd SE
(218) 435-1500
- Anesthesiology (MD)
  Erie, John K., MD
  Vinych, John V., MD
- Cardiovascular Disease
  Almanaseer, Yassar, MD
- Family Practice
  Swanson, Darren D., MD
  Winjum, Charles S., MD
- General Surgery
  Brattlof, Brian D., MD
  Vinych, John V., MD
  Wroblewski, Robert L., MD
- Internal Medicine
  Almanaseer, Yassar, MD
  Mohammed Rafiyath, Shamudheen, MD
  Tiwari, Sumit, MD
- Oncology
  Mohammed Rafiyath, Shamudheen, MD

Minnesota (cont.)
Fosston (cont.)

First Care Medical Services dba Essentia Health - Fosston (cont.)
- Orthopedic Surgery
  Sawardeker, Prasad J., MD
- Otology, Laryngology, Rhinology
  Belizario, Francisco Y., MD
- Podiatry, Surgical Chiropody
  Moen, Andrew, DPM
- Radiology
  Bullis, Brent R., MD
  Carlson, Annelisa M., MD
  Farah, Nazih N., MD
  Gramith, Frederick C., MD
  Groebner, Nathan J., MD
  Hite, Stephen H., MD
  Inampudi, Subbarao, MD
  Kane, Jon P., MD
  Kang, Eul S., MD
  Keszler, Jason L., DO
  Lee, Peter U., MD
  Mills, David J., MD
  Myhra-Bloom, Karla G., MD
  Parker, Robin, MD
  Peterson, Jeffrey J., MD
  Quinones, Eduardo, MD
  Sidney, Scott D., MD
  Tran, Huy, MD
  Yost, Robert A., MD
- Urology
  Strinden, Steven P., MD

Hallock

Kittson Memorial Clinic
1010 S Birch
(218) 843-2165
- Emergency Medicine
  Lohstreter, Thomas A., MD
- Family Practice
  Lester, Gordon J., MD
  Lohstreter, Thomas A., MD
- Internal Medicine
  Surdy, James E., MD

Valley Vision Clinic Ltd
204 S Atlantic
(701) 775-3135
- Optometrist
  Rutz, Duane P., OD

Providers are subject to be added or terminated without notice.

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PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING PHYSICIANS

Minnesota (cont.)
Halstad

Sanford Health Halstad Clinic
445 1st St E
(218) 456-2158

- Family Practice
  Breen, Charles J., MD
  Luithle, Timothy J., MD
- Radiology
  Asheim, Jason, MD

Hawley

Sanford Hawley Clinic
1412 Main St
(218) 483-3564

- Family Practice
  Smith, Stacey A., MD
  Vogt, David, DO
- Internal Medicine
  Hall, Katherine S., MD
  Prasai, Dirgha, MD
- Radiology
  Asheim, Jason, MD
  Marsden, Richard J., MD

Sanford Hawley Clinic
1412 Main St
(218) 483-3564

- Family Practice
  Andersen, Jeffrey B., MD
  Smith, Stacey A., MD
  Vogt, David, DO
- General Surgery
  Goldstein, Mitchell B., MD
- Internal Medicine
  Hall, Katherine S., MD
  Prasai, Dirgha, MD
- Obstetrics/Gynecology
  Deraney, Jaimie J., MD
- Radiology
  Marsden, Richard J., MD

Karlstad

Kittson Memorial Clinic of Karlstad
205 Roosevelt Ave
(218) 436-2251

- Emergency Medicine
  Lohstreter, Thomas A., MD
- Family Practice
  Lohstreter, Thomas A., MD

Minnesota (cont.)
Karlstad (cont.)

Kittson Memorial Clinic of Karlstad (cont.)

- Internal Medicine
  Surdy, James E., MD

Moorhead

7 Day Clinic
720 Main Ave
(701) 232-6211

- Family Practice
  Bjellum, Hans E., MD
  Page, Michael J., MD

Essentia Health Moorhead Clinic
801 Belsly Blvd S
(701) 364-8900

- Family Practice
  Kuhlmann, Craig F., MD
  Lunde, Lara N., MD
  Nelson, Kinsey B., MD
  Nelson, Susan K., MD
  Rogers, Jerry P., MD
  Sakariya, Geetabahen A., MD
  Sikkink, Kari Rae, MD
  Steinke, Emil B., MD
  Vetter, Richard T., MD
- General Surgery
  Portilla, George A., MD
  Wroblewski, Robert L., MD
  Zreik, Khaled S., MD
- Internal Medicine
  Kooyer, Kurt W., MD
- Obstetrics/Gynecology
  Christensen, James M., MD
  Conmy, Bruce, MD
- Pediatrics
  Kooyer, Kurt W., MD

Family Healthcare Center At Concordia Health Services
901 S 8th St
(218) 299-3662

- Family Practice
  Espejo, Napoleon R., MD

Hendrix Health Center
1104 7th Ave S
(218) 477-2623

- Family Practice
  Luistro, Allan J., MD

Minnesota (cont.)
Moorhead (cont.)

Hendrix Health Center (cont.)

- Internal Medicine
  Kooyer, Kurt W., MD

Lakeland Mental Health Center Inc
1010 32nd Ave S
(218) 233-7524

- Psychiatry (MD/DO)
  Dizon, Amador M., MD
  Erickson, Chad C., MD
  Michels, Paul O., MD
  Staton, R D., MD

Midwest Vision Centers
3206 Easten Shopping Ce
(218) 233-1867

- Optometrist
  Connelly, James B., OD

Opticare
725 Center Ave Ste 2
(218) 233-2650

- Optometrist
  Brandt, Ron, OD

Renew Medical Clinic, LLC
119 4th St S
(218) 227-5374

- Anesthesiology (MD)
  Hanson, David J., MD

Sanford Moorhead Clinic
4000 28th Ave S
(701) 234-3200

- Family Practice
  Bauer-Olson, Cheryl, DO
  Campbell, Robert D., MD
  Glunberg, Steven K., MD
  Haugo, Amie, MD
  Kringlie, Ross A., MD
  Martindale, Donald J., MD
- Internal Medicine
  Ladwig, John W., MD
  Sand, Michael L., DO
  Twedt, Heidi L., MD
- Radiology
  Kallenbach, Christopher, MD

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PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING PHYSICIANS

Minnesota (cont.)
Moorhead (cont.)

Sanford Moorhead Clinic
4000 28th Ave S
(701) 234-3200

- Family Practice
  Bauer-Olson, Cheryl, DO
  Campbell, Robert D., MD
  Glunberg, Steven K., MD
  Haugo, Amie, MD
  Kringlie, Ross A., MD
  Martindale, Donald J., MD
  Spina, Julie A., MD
  Wiisanen, Ronald E., MD
- Internal Medicine
  Ladwig, John W., MD
  Levitski-Heikkila, Teresa V., MD
  Sand, Michael L., DO
  Twedt, Heidi L., MD
  Wilke, Russell, MD
- Nephrology
  Levitski-Heikkila, Teresa V., MD
- Pediatrics
  Hanson, Stephanie, MD
  Kunkel, Melissa, MD
- Radiology
  Asheim, Jason, MD

Sanford Moorhead Clinic
4000 28th Ave S
(701) 234-3200

- Family Practice
  Bauer-Olson, Cheryl, DO
  Campbell, Robert D., MD
  Glunberg, Steven K., MD
  Haugo, Amie, MD
  Kringlie, Ross A., MD
  Spina, Julie A., MD
  Wiisanen, Ronald E., MD
- Internal Medicine
  Ladwig, John W., MD
  Levitski-Heikkila, Teresa V., MD
  Sand, Michael L., DO
  Twedt, Heidi L., MD
  Wilke, Russell, MD
- Nephrology
  Levitski-Heikkila, Teresa V., MD
- Obstetrics/Gynecology
  Kappenman, James, MD
- Pediatrics
  Kunkel, Melissa, MD

Minnesota (cont.)
Moorhead (cont.)

Sanford Moorhead Clinic (cont.)

- Psychiatry (MD/DO)
  Fleissner, Rachel M., MD
- Radiology
  Asheim, Jason, MD
  Kallenbach, Christopher, MD

Solutions Behavioral Healthcare Professionals, Inc.
891 Belsly Blvd
(218) 287-4338

- Psychiatry (MD/DO)
  Carlson, David L., MD
  Hanisch, Stefanie U., MD

Pelican Rapids

Pelican Rapids Eye Clinic
20 South Broadway
(218) 863-7061

- Optometrist
  Van Den Einde, Kathryn R., OD

Twin Valley

Sanford Health Twin Valley Clinic
501 2nd St NW
(218) 584-5142

- Family Practice
  Andersen, Jeffrey B., MD
  Breen, Charles J., MD
- Internal Medicine
  Gurung, Anju, MD
  Prasai, Dirgha, MD
- Radiology
  Asheim, Jason, MD

Ulen

Sanford Health Ulen Clinic
108 Viking Ave W
(218) 596-8867

- Family Practice
  Breen, Charles J., MD
  Lawrence, Scott A., MD
- Psychiatry (MD/DO)
  Lawrence, Scott A., MD
- Radiology
  Asheim, Jason, MD

Minnesota (cont.)
Warren

Warren Eye Care PC
205 W Johnson Ave
Suite 1
(218) 745-5151

- Optometrist
  Bienek, Stacey J., OD

Wheaton

Sanford Wheaton
401 12th St N
(320) 563-8971

- Family Practice
  Andersen, Jeffrey B., MD
  Emery, Patrick E., MD
  Mislan, Garry A., MD
- Internal Medicine
  Gitau, Mark, MD
- Oncology
  Gitau, Mark, MD

Sanford Wheaton
401 12th St N
(320) 563-8971

- Family Practice
  Andersen, Jeffrey B., MD
  Emery, Patrick E., MD
  Mislan, Garry A., MD
- Internal Medicine
  Gitau, Mark, MD
- Oncology
  Gitau, Mark, MD

Sanford Wheaton
401 12 St N
(320) 563-8971

- Family Practice
  Andersen, Jeffrey B., MD
  Emery, Patrick E., MD
  Kuzma, George, MD
  Mislan, Garry A., MD

Montana
Sidney

John B Andelin MD PC dba Pathology Services
216 14th Ave SW
(701) 770-3927

- Pathology
  Andelin, John B., MD
  McCoy Jr, Franklin E., MD

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PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING PHYSICIANS

Montana (cont.)
Sidney (cont.)

Sidney Eye Care
112 2nd St SE
(406) 482-2609

- Optometrist
  Cavanaugh, Gregory E., OD
  Hjelden, Melissa P., OD
  O'Brien, Kristin, OD

North Dakota
Ashley

Ashley Clinic PC Tinsatul
612 Center Ave N
(701) 288-3431

- General Practice
  Tinsatul, Udom, MD
- General Surgery
  Tinsatul, Udom, MD

Ashley Medical Center
612 Center Ave N
(701) 288-3448

- Emergency Medicine
  Oliveira-Filho, Edgar K., MD
- Family Practice
  Geier, David C., MD
  Oliveira-Filho, Edgar K., MD
- General Practice
  Vegiraju, Thammi R., MD
- Psychiatry (MD/DO)
  Oliveira-Filho, Edgar K., MD

Eye Center of The Dakotas PC
611 Center Ave
(701) 288-3071

- Optometrist
  Moch, Danelle F., OD
  Pathroff, Kellen E., OD
  Tello, Timothy L., OD

Beach

Beach Medical Clinic
95 2nd St NW
(701) 872-3777

- Emergency Medicine
  Cassidy, Michael L., MD
- Pediatrics
  Ahmed, Ibrahim M., MD

North Dakota (cont.)
Beulah

Beulah Vision, PC
204 W Main St
(701) 873-5251

- Optometrist
  Hammerschmidt, Michael J., OD

Coal Country Community Health Center
1312 Highway 49 N
(701) 873-4445

- Family Practice
  Garman, Aaron M., MD
  Jackson, Orlan D., DO
  Jon-Klindworth, Jacinta, MD
  Kaspari, Thomas D., MD

Dakota Eye Institute
204 W Main
(701) 222-3937

- Ophthalmology
  Fortney, Aaron C., MD

Bismarck

A Balanced Mind Psychiatric Wellness Center
4023 State St Ste 100
(701) 751-3737

- Psychiatry (MD/DO)
  Delap, Susan E., MD

Addo, Fek MD
300 W Century Ave
(701) 323-9900

- Internal Medicine
  Addo, Ferdinand E., MD

Advanced Surgical Arts Center
3913 Lockport St
(701) 530-8450

- Plastic Surgery
  Honeycutt, D'Arcy A., MD

Aesthetic Center of Plastic Surgery, PC
115 W Century Ave Ste B
(701) 255-3311

- Plastic Surgery
  Paulson, Rick L., MD

North Dakota (cont.)
Bismarck (cont.)

Baker Family Medicine PC
300 West Century Ave
(701) 751-4340

- Family Practice
  Baker, Biron D., MD

Becker Plastic Surgery Center
1500 Interchange Ave
Ste 100
(701) 530-3333

- Plastic Surgery
  Becker, Ricky C., MD

Becker Plastic Surgery, LLC
1500 Interchange Ave
Ste 100
(701) 530-3333

- Plastic Surgery
  Becker, Ricky C., MD

Bis-Man Eyecare Associates
2717 Rock Island Pl
(701) 258-3402

- Optometrist
  Borstad, Josh E., OD
  Dillavou, Nichol K., OD
  Erhardt, Jason D., OD
  Neumiller, Joel D., OD

Bis-Man Eyecare Associates
1400 Skyline Blvd
(701) 255-4117

- Optometrist
  Borstad, Josh E., OD
  Erhardt, Jason D., OD
  Neumiller, Joel D., OD

Bismarck Cancer Center
500 N 8th St
(701) 222-6100

- Oncology
  Dufan, Tarek A., MD
  Russo, James K., MD
  Watkins, John M., MD
- Radiology
  Dufan, Tarek A., MD

Bismarck Eyecare, PC
1830 E Century Ave Ste 1
(701) 222-1140

- Optometrist
  Patzman, Taya M., OD

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING PHYSICIANS

North Dakota (cont.)
Bismarck (cont.)

Bismarck Radiology Associates
1310 E Main Ave Ste 219
(701) 530-8575

- Radiology
  Fortney, Michael S., MD
  Holmen, John H., MD
  Peterson, Douglas R., MD
  Schirado, Mike A., MD

Bismarck Surgical Associates, LLC
600 N 9th St
(701) 221-2299

- Orthopedic Surgery
  Ackerman, Duncan B., MD
  Carlson, Chad B., MD

Bismarck Surgical Associates, LLC
600 N 9th St
(701) 221-2299

- Orthopedic Surgery
  Juelson, Timothy J., MD

Bridging The Dental Gap
1223 S 12th St Ste 1
(701) 221-0518

- Oral Surgery
  Keaveny, John T., DDS

Center For Family Medicine
701 E Rosser
(701) 751-9500

- Dermatology
  Luger, Joseph A., MD
- Family Practice
  Betting, Susan S., MD
  Dhamija, Sulakshna, MD
  Garman, Aaron M., MD
  Hostetter, Jeffrey E., MD
  Jon-Klindworth, Jacinta, MD
  Luger, Joseph A., MD
  Nybakken, Mary M., MD
  Penn, Jeremiah J., MD
  Quisno, Jacqueline E., MD
  Sherman, Kamille S., MD
  Taha, Taleb N., MD
  Tangedahl, Guy P., MD
  Wells, Robert C., MD
- General Practice
  Willis, Karin K., MD
- Obstetrics/Gynecology
  Woodrow, Peter A., MD

North Dakota (cont.)
Bismarck (cont.)

Center For Family Medicine (cont.)

- Pediatrics
  Connell, Joan M., MD
  Johnson, George M., MD

Cornatzer Jr, William, MD
225 N 7th St Ste B
(701) 224-1273

- Dermatology
  Cornatzer, William Jr E., MD

Custer Family Planning
549 Airport Rd
(701) 255-3535

- Family Practice
  Nybakken, Mary M., MD
  Quisno, Jacqueline E., MD

Dakota Eye Institute
200 S 5th St
(701) 222-3937

- Ophthalmology
  Fortney, Aaron C., MD
  Hilts, George H., MD
  Litchfield, Douglas W., MD
  Raducu, Elena R., MD
  Volk, Charles R., MD
- Optometrist
  Beattie, Sharon C., OD
  Hellebush, Leslie R., OD
  Otteson, Guy G., OD
  Otteson, Kyle M., OD
  Ranum, Michael R., OD
  Samson, Thomas J., OD

Dakota Eye Institute
3119 N 14th St
(701) 222-3937

- Ophthalmology
  Fortney, Aaron C., MD
  Hilts, George H., MD
  Litchfield, Douglas W., MD
  Raducu, Elena R., MD
  Volk, Charles R., MD
- Optometrist
  Balliet, Paul, OD
  Hellebush, Leslie R., OD
  Ranum, Michael R., OD
  Samson, Thomas J., OD
  Springan, Joel H., OD

North Dakota (cont.)
Bismarck (cont.)

Dakota Foot & Ankle Clinic
1733 E Capital Ave
(701) 255-3338

- Podiatry, Surgical Chiropody
  Gale, Brian D., DPM

Dakota Pain Management Center
705 E Main Ave Ste 300
(701) 255-2453

- Physical Medicine and Rehabilitation
  Krause, Carol L., MD

Dillavou, Nichol, OD
2700 State St
(701) 255-9349

- Optometrist
  Dillavou, Nichol K., OD

Drs Schindler & Deis
204 W Century Ave
(701) 255-0186

- Optometrist
  Deis, Thomas L., OD
  Schindler, Keith L., OD

Eye Center of The Dakotas PC
1221 W Divide Ave
(701) 224-0661

- Optometrist
  Moch, Danelle F., OD
  Pathroff, Kellen E., OD
  Tello, Timothy L., OD

Eye Clinic of North Dakota
620 N 9th St
(701) 255-4673

- Ophthalmology
  Leidenix, Monte J., MD
- Optometrist
  Hansted, Thomas S., OD
  Towle, Steven J., OD

Eyes On Parkway
210 W Front Ave
(701) 222-2461

- Optometrist
  Beattie, Brian C., OD
  Houle, Michael G., OD
  Kostelecky, Eve, OD
  Kostelecky, Michael G., OD

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PARTICIPATING PHYSICIANS

North Dakota (cont.)
Bismarck (cont.)

Eyes On Parkway, Inc
2331 Tyler Parkway Ste 2
(701) 258-4384

- Optometrist
  Beattie, Brian C., OD
  Houle, Michael G., OD
  Kostelecky, Eve, OD
  Kostelecky, Michael G., OD

Face & Jaw Surgery Center
1140 W Capitol Ave
(701) 258-7220

- Oral Surgery
  Afshar, Andrew A., DDS
  Crago, Charles A., DMD
  Deatherage, Joseph R., DMD
  Preisler, Scott A., DDS

Family Vision Clinic
111 E Century Ave
(701) 222-1420

- Optometrist
  Fleck, Amy M., OD
  Gero, George, OD
  Heil, Krista R., OD

Foot Care Associates, PC
310 S 5th Street
(701) 250-8637

- Podiatry, Surgical Chiropody
  Rinehart, Karen M., DPM

Forte Pathroff, Denise, MD PC
225 N 7th St Suite B
(701) 224-9643

- Allergy
  Forte-Pathroff, Denise, MD
- Dermatology
  Forte-Pathroff, Denise, MD

Heartview Foundation
101 E Broadway Ave
(701) 222-0386

- Internal Medicine
  Henke, Melissa J., MD
- Psychiatry (MD/DO)
  Henke, Melissa J., MD

North Dakota (cont.)
Bismarck (cont.)

Institute of Facial Surgery
2331 Tyler Pkwy Ste 4
(701) 255-4000

- Oral Surgery
  Stanley, John G., DMD

Marty J Mrachek OD dba Sears Optical
2700 State St
(701) 255-8490

- Optometrist
  Mrachek, Marty J., OD

Mid Dakota Clinic
401 N 9th St
(701) 530-6000

- Emergency Medicine
  Magill, Thomas R., MD
- Endocrinology
  Ahmed, Bilal, MD
- Family Practice
  Botsford, John D., MD
  Erickstad, John A., MD
  Gustafson, Jean, MD
  Hamar, Matthew, MD
  Jondahl, Paul E., MD
  Longie, Kelly B., MD
  Longie, Kevin B., MD
  Magill, Thomas R., MD
  Moe, Jason T., MD
  Penn, Jeremiah J., MD
  Scherr, Steven J., MD
  Seifert, Shelly A., MD
  Traxinger, Stephanie A., DO
  Wells, Robert C., MD
  Wilder, Andrew J., MD
- Gastroenterology
  Ezzeddine, Dina Z., MD
  Karls, Kevin A., MD
  Kathawala, Mustafa, MD
- General Surgery
  Altringer, William E., MD
  Chalmers, Aaron J., MD
  Hamar, Steven K., MD
  Helbling, Brandon M., MD
  Johnson, Steven R., MD
  Kane, Derek D., MD
  Kavlie, Gaylord J., MD
  Narayana, Avinash, DO

North Dakota (cont.)
Bismarck (cont.)

Mid Dakota Clinic (cont.)

- Geriatrics
  Hetland, Bruce M., MD
- Internal Medicine
  Bertram, Juergen H., MD
  Bharadwaj, Jayaram S., MD
  Bharadwaj, Savitha J., MD
  Erickstad, Mark A., MD
  Ezzeddine, Dina Z., MD
  Grenz, Don H., MD
  Happel, Keith R., MD
  Hebert, Brian J., MD
  Hetland, Bruce M., MD
  Karls, Kevin A., MD
  Luebke, Aaron, MD
  Naseer, Khalid, MD
  Rauta, Radu L., MD
  Schwartz, Julie M., MD
  Starr, Daniel C., MD
  Tanous, Robert, DO
- Neurology
  Dunnigan, Ralph T., MD
- Obstetrics/Gynecology
  Bradley, Shannon, MD
  Delvo, Stephanie, MD
  Hutchens, Thomas P., MD
  Schafer Mclean, Rhonda R., MD
  Steinle, Jill, MD
  Wisdom, Marissa A., MD
- Oncology
  Bharadwaj, Jayaram S., MD
  Rao, Vijay P., MD
- Otology, Laryngology, Rhinology
  Hetland, Andrew R., MD
- Pediatrics
  Anderson, Kathy M., MD
  Dramko, Joseph G., MD
  Juelson, Amy M., MD
  Kozel, Lisa L., MD
  Toman, Kristie A., DO
- Plastic Surgery
  Yearsley, Steven G., MD
- Podiatry, Surgical Chiropody
  Iwaasa, Gregory B., DPM
- Radiology
  Ruhland, Jessica, MD
- Thoracic Surgery
  Altringer, William E., MD
  Johnson, Steven R., MD
  Kavlie, Gaylord J., MD

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NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING PHYSICIANS

North Dakota (cont.)
Bismarck (cont.)

Mid Dakota Clinic
525 N 9 St
(701) 530-6000

- Podiatry, Surgical Chiropody
  Olson, Aaron C., DPM

Mid Dakota Clinic - 727 Kirkwood
727 Kirkwood Mall
(701) 530-6000

- Family Practice
  Seifert, Shelly A., MD
- Internal Medicine
  Bharadwaj, Savitha J., MD

Mid Dakota Clinic - Gateway
2700 State St
(701) 530-6000

- Dermatology
  Appert, David L., MD
  Borrowman, Theresa, MD
  Strand, Megan, MD
- Family Practice
  Botsford, John D., MD
  Hamar, Matthew, MD
  Moen, Douglas L., MD
  Murphy, Louise A., MD
  Orchard, Jeffrey L., MD
  Roswick, Robert J., MD
- Internal Medicine
  Grenz, Don H., MD
  Hebert, Brian J., MD

Mid Dakota Clinic-Center For Women
1000 E Rosser Ave
(701) 530-6000

- Obstetrics/Gynecology
  Bury, Jan M., MD
  Corfman, Randle S., MD
  Delvo, Stephanie, MD
  Obritsch, Jerry M., MD
  Schafer Mclean, Rhonda R., MD
  Witt, John M., MD

Mid Dakota Clinic-Gateway Dermatology
2700 State St
(701) 530-6000

- Dermatology
  Ebertz, J Mark, MD

North Dakota (cont.)
Bismarck (cont.)

Mid Dakota Clinic-Kirkwood
828 Kirkwood Mall
(701) 530-6000

- Family Practice
  Gustafson, Jean, MD
  Jondahl, Paul E., MD
  Longie, Kelly B., MD
- Pediatrics
  Dramko, Joseph G., MD
  Juelson, Amy M., MD
  Kozel, Lisa L., MD
  Toman, Kristie A., DO
  Zacher, Carla J., MD

Midwest Vision Centers
738 Kirkwood Mall
(701) 258-8810

- Optometrist
  Bencker, Shanon S., OD
  Remboldt, David M., OD

Missouri Basin Anesthesia PLLC
401 N 9th Street
(701) 530-5550

- Anesthesiology (MD)
  Cave, Jeffrey R., MD
  Cleary, William F., MD
  Hoskins, Nicholas A., MD
  Jankoviak, Michael D., MD
  Klein, Scott A., MD
  Laszewski, Linda J., MD
  Lo, Lim-Che, MD
  Loven, Roger R., MD
  Markewich, Stephen, MD
  Mathieu, Maryse, MD
  Preszler, Todd M., MD
  Russon, Troy S., MD
  Voigt, Matthew L., MD
  White, Peter, MD
- Internal Medicine
  Benson, Jeffre J., MD

Northern Plains Family Medicine and Behavioral Health PC
1720 Burnt Boat Drive
Ste 108
(701) 673-3575

- Family Practice
  Gray, Scharazard, MD

North Dakota (cont.)
Bismarck (cont.)

Ophthalmology Associates
111 E Century Ave
(701) 222-1420

- Ophthalmology
  Wischmeier, Curt A., MD

Oral Surgery Center of Bismarck
3117 N 14th St
(701) 221-2719

- Oral Surgery
  Iravani, Mansureh, DMD

Pain Treatment Center Anesthesiologists PC
600 N 9th St Suite 2
(701) 223-7822

- Anesthesiology (MD)
  Boutrous, Attas, MD
  Carlson, Hugh S., MD
  Knutson, Ronald M., MD

Pathology Consultants
900 E Broadway
(701) 222-2480

- Pathology
  Ellison, Wesley A., MD
  Fredrickson, Ward D., MD
  Hipp, John A., MD
  Laszewski, Michael J., MD
  Linz, Laurie J., MD
- Pathology, Anatomy, Clinical Pathology
  Schmidt, Jared L., MD

Pathology Consultants, PC
3502 Franklin Ave
(701) 222-2480

- Pathology
  Ellison, Wesley A., MD
  Fredrickson, Ward D., MD
  Hipp, John A., MD
  Laszewski, Michael J., MD
  Linz, Laurie J., MD
- Pathology, Anatomy, Clinical Pathology
  Schmidt, Jared L., MD

Pneumos Clinic
300 W Century Ave
(701) 323-9900

- Pulmonary Diseases
  Mendoza, Pedro G., MD

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PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING PHYSICIANS

Precision Eyez, PC
2304 Clydesdale Dr
(701) 255-2865

- Optometrist
  Aberle, Wayne D., OD

Regional Neurological Center
1033 Basin Ave Ste A
(701) 222-1300

- Neurology
  Ragland, James B., MD

Sanford Children's North Clinic
765 W Interstate Ave
(701) 323-3700

- Pediatrics
  Klein, Katherine A., MD
  Kumar, Parag, MD
  Reinke, Sara L., MD
  Seibel, Melissa M., MD

Sanford Clinic
222 N 7th St
(701) 323-6000

- Anesthesiology (MD)
  Jaramillo, Diosdado T., MD
  Quast, Michael L., MD
- Cardiovascular Disease
  Balf, Dragos V., MD
  Frank, Walter E., MD
  Howard, Richard A., MD
  Kraft, Diane C., MD
  Pansegrau, Timothy L., MD
  Reddy, Karthik, MD
- Emergency Medicine
  Reisenauer, Justin J., MD
  Schmidt, Steven D., MD
  Tello, Anthony M., MD
  Zimny, Matthew, MD
- Endocrinology
  Faulk, Kellie, MD
- Family Practice
  Ashley, Lynn E., MD
  Bossort, James B., MD
  Gade, Ashwini P., MD
  Martin, Heather M., DO
  Rauta, Olimpia, MD
  Sharma, Deepti, MD
  Wyman, Allen E., MD

Sanford Clinic (cont.)

- Gastroenterology
  Anees, Mukhtar, MD
  Blonsky, Jeffery, MD
  Donovan, Jeremiah P., MD
  Firozi, M Tarik A., MD
  Monticello, Anthony, MD
  Nammour, Fadel E., MD
  Renton, Douglas J., MD
  Starley, Brad Q., MD
  Zagnoon, Abbas, MD
- General Surgery
  Akins, Chris W., MD
  Berglund, Douglas D., MD
  Bock, Steven N., MD
  Boyko, Kimber M., MD
  Dewing, Bree D., MD
  Dibbell, David G., MD
  Fabian, Matthew W., DO
  Garcia, Luis A., MD
  Knudson, Joshua J., MD
  McNeil, Jeffrey, MD
  Stam, Marc, MD
  Viney, Jeanette M., MD
- Infectious Diseases
  Martin, C Kent, MD
  Mateo, Noe, MD
- Internal Medicine
  Al Bitar, Sado, MD
  Artham, Surya M., MD
  Chaudhary, Vijay, MD
  Dendy, Khalin F., MD
  Donovan, Jeremiah P., MD
  Frank, Walter E., MD
  Gravning, Stephanie L., MD
  Gray, Thandiwe, MD
  Gupta, Vikesh, MD
  Kodjoe, Gladys, MD
  Layawen, Aselo, MD
  Lebeau, Michael E., MD
  Luckenbill, Michael R., MD
  Lunn, Gerry M., MD
  Martin, C Kent, MD
  Monticello, Anthony, MD
  Nammour, Fadel E., MD
  Reddy, Karthik, MD
  Sarrigiannidis, Andreas, MD
  Shrestha, Bhaja O., MD
  Tello, Anthony M., MD
  Tello, Ronald D., MD

Sanford Clinic (cont.)

- Internal Medicine (continued)
  Zagnoon, Abbas, MD
- Nephrology
  Hassan, Syed F., MD
- Neurological Surgery
  Lwu, Shelly H., MD
  Owen, Michael P., MD
- Neurology
  Arazi, Richard, MD
  Dunnigan, Ralph T., MD
  Kiok, Maximo C., MD
  Miller, Stephanie A., MD
  Spahija, Berislav, MD
- Obstetrics/Gynecology
  Klemin, Peter L., MD
  Woodrow, Peter A., MD
- Oncology
  Chaudhary, Vijay, MD
  Serabe, Baruti M., MD
- Orthopedic Surgery
  Kovacs, Gregg R., DO
- Otology, Laryngology, Rhinology
  Nelson, Jeffrey J., MD
- Pathology
  Jia, Hongchen, MD
  Johnson, Craig A., MD
  Meyer, Jason L., MD
  Osmond, Gregory W., MD
- Pediatrics
  Cabalka, Allison L., MD
  Cannon, Bryan, MD
  Casas, Luis, MD
  Cleveland, Chris, MD
  Dasival, Christina M., DO
  Decock, Christopher, MD
  Horner, Justin, MD
  Johnson, Jonathan N., MD
  Klein, Katherine A., MD
  Kumar, Parag, MD
  McDonough, Stephen M., MD
  Ocejo, Rafael, MD
  Reinke, Sara L., MD
  Seibel, Melissa M., MD
  Serabe, Baruti M., MD
  Twogood, Todd A., MD
- Peripheral Vascular Diseases Or Surgery
  Boyko, Kimber M., MD

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PARTICIPATING PHYSICIANS

Sanford Clinic (cont.)

- Physical Medicine and Rehabilitation
  Eggert, Douglas K., MD
  Murphy, Kevin P., MD
- Plastic Surgery
  Dibbell, David G., MD
- Podiatry, Surgical Chiropody
  Hart, Eric M., DPM
  Tello, Francisco A., DPM
- Psychiatry (MD/DO)
  Shrestha, Sacheen, MD
- Pulmonary Diseases
  Gupta, Vikesh, MD
  Sarrigiannidis, Andreas, MD
  Shrestha, Bhaja O., MD
- Radiology
  Fogarty, Edward F., MD
  Hasson, Richard M., MD
  Herrera, Marcos A., MD
  Iwamoto, Matthew M., MD
  McIntee, Michael J., MD
  Miller, John A., MD
  Tello-Skjerseth, Christina, MD
- Thoracic Surgery
  Akins, Chris W., MD
  Boyko, Kimber M., MD
  McNeil, Jeffrey, MD
  Pansegrau, Timothy L., MD
  Russell, Sean S., MD
  Viney, Jeanette M., MD
- Urology
  Fondahn, Dean J., MD
  Horowitz, Andrew I., MD
  Koleilat, Nadim, MD
  Taylor, Joseph C., MD

Sanford Health Occupational Medicine Clinic
2603 E Broadway Ave
(701) 323-5222

- Emergency Medicine
  Blanchard, Joel H., MD
- Family Practice
  Blanchard, Joel H., MD
- Pathology
  Fisher, Catherine P., MD
- Radiology
  Fogarty, Edward F., MD
  Iwamoto, Matthew M., MD

North Dakota (cont.)
Bismarck (cont.)

Sanford Health Occupational Medicine Clinic (cont.)

- Radiology (continued)
  McIntee, Michael J., MD
  Miller, John A., MD
  Tello-Skjerseth, Christina, MD

Sanford Medical Center
300 N 7th St
(701) 323-6000

- Allergy
  Larson, James B., MD
- Anesthesiology (MD)
  Bro, Nathan A., MD
  Cave, Jeffrey R., MD
  Hoskins, Nicholas A., MD
  Jaramillo, Diosdado T., MD
  Jones, Marshall S., MD
  Ngatia, Josephat, MD
  Quast, Michael L., MD
  Smith, Craig D., MD
- Cardiovascular Disease
  Balf, Dragos V., MD
  Frank, Walter E., MD
  Howard, Richard A., MD
  Korte, Stephen A., MD
  Pansegrau, Timothy L., MD
  Reddy, Karthik, MD
- Dermatology
  Knudson, Richelle M., MD
- Emergency Medicine
  Blanchard, Joel H., MD
  Fairbairn, Thomas D., MD
  Hintz, Kadon K., MD
  Jackson, Walter O., MD
  Puetz, Catherine, MD
  Reisenauer, Justin J., MD
  Schmidt, Steven D., MD
  Tello, Anthony M., MD
  Zimny, Matthew, MD
- Endocrinology
  Faulk, Kellie, MD
  Tincher, Michelle R., MD
- Family Practice
  Beckwith, Jennifer A., MD
  Belzer-Curl, Gretchen G., MD
  Betting, Susan S., MD
  Blanchard, Joel H., MD
  Bossort, James B., MD
  Carlson, Jessica A., MD

North Dakota (cont.)
Bismarck (cont.)

Sanford Medical Center (cont.)

- Family Practice (continued)
  Dornacker, Angela S., MD
  Emery, Russell J., MD
  Fyfe, Alistair G., MD
  Garman, Aaron M., MD
  Hoggarth, Tonia L., MD
  Jackson, Walter O., MD
  Johansen, James R., MD
  Johnson, Anthony T., MD
  Klein, Dale A., MD
  Klemin, Jill M., MD
  Klop, Krissondra L., DO
  Kosiak, Donald J., MD
  Lange, Darwin K., MD
  Miller, Brenda L., MD
  Pengilly, David J., MD
  Penn, Jeremiah J., MD
  Rauta, Olimpia, MD
  Sell, Shanon M., DO
  Sharma, Deepti, MD
  Shultz Piatz, Kinsey A., MD
  Smith, Stuart T., MD
  Stein, Sherry L., MD
  Thomas, Jack G., MD
  Thompson, Eric M., MD
  Thorson, Thomas A., MD
  Tincher, Michelle R., MD
  Wolf, Terry L., DO
- Gastroenterology
  Anees, Mukhtar, MD
  Donovan, Jeremiah P., MD
  Firozi, M Tarik A., MD
  Hughes, John J., MD
  Monticello, Anthony, MD
  Renton, Douglas J., MD
  Starley, Brad Q., MD
  Zagnoon, Abbas, MD
- General Surgery
  Akins, Chris W., MD
  Berglund, Douglas D., MD
  Boyko, Kimber M., MD
  Dewing, Bree D., MD
  Dibbell, David G., MD
  Fabian, Matthew W., DO
  Garcia, Luis A., MD
  Knudson, Joshua J., MD
  McNeil, Jeffrey, MD
  Nelson, Brook V., MD
  Pansegrau, Timothy L., MD

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PARTICIPATING PHYSICIANS

Sanford Medical Center (cont.)

- General Surgery (continued)
  Stam, Marc, MD
  Viney, Jeanette M., MD
- Infectious Diseases
  Martin, C Kent, MD
  Mateo, Noe, MD
- Internal Medicine
  Al Bitar, Sado, MD
  Artham, Surya M., MD
  Badar, Mubashir K., MD
  Chaudhary, Vijay, MD
  Dasilva, Lawrence J., MD
  Dendy, Khalin F., MD
  Donovan, Jeremiah P., MD
  Frank, Walter E., MD
  Gajanayaka, Ranil, MD
  Gravning, Stephanie L., MD
  Gray, Thandiwe, MD
  Gupta, Vikesh, MD
  Hinrichs, Mark, MD
  Howard, Richard A., MD
  Hughes, John J., MD
  James, Lindsey B., MD
  Javaid, Mian M., MD
  Kodjoe, Gladys, MD
  Korte, Stephen A., MD
  Larson, James B., MD
  Larsson, Ernst O., MD
  Layawen, Aselo, MD
  Lebeau, Michael E., MD
  Luckenbill, Michael R., MD
  Mahale, Adit, MD
  Martin, C Kent, MD
  Reddy, Karthik, MD
  Reynolds, John T., MD
  Tello, Ronald D., MD
  Wos, Edward J., DO
  Zagnoon, Abbas, MD
- Nephrology
  Hassan, Syed F., MD
  Mahale, Adit, MD
- Neurological Surgery
  Lwu, Shelly H., MD
  Van Norman, Alan, MD
- Neurology
  Arazi, Richard, MD
  Dunnigan, Ralph T., MD
  Miller, Stephanie A., MD
  Spahija, Berislav, MD

North Dakota (cont.)
Bismarck (cont.)

Sanford Medical Center (cont.)

- Obstetrics/Gynecology
  Danielson, Christopher J., MD
  Hofland, Erica C., MD
  Iverson, Christie A., MD
  Klemin, Peter L., MD
  Orser, Shari L., MD
  Perkerewicz, Kathleen M., MD
  Williams, Alisha V., MD
  Woodrow, Peter A., MD
- Oncology
  Chaudhary, Vijay, MD
  Reynolds, John T., MD
  Serabe, Baruti M., MD
  Wos, Edward J., DO
- Ophthalmology
  Litchfield, Douglas W., MD
- Orthopedic Surgery
  Canham, William D., MD
  Carpenter, Matthew R., MD
  Fyfe, Ian C., MD
  Gattey, Philip H., MD
  Gehrig, Laura M., MD
  Norberg, Jon D., MD
  O'Regan, David J., MD
- Otology, Laryngology, Rhinology
  Coombe, Walter T., MD
  Fiechtner, Marcus M., MD
  Nelson, Jeffrey J., MD
  Wink, Sue K., MD
  Yorgason, Joshua G., MD
- Pathology
  Colby, Karna, MD
  Fisher, Catherine P., MD
  Jia, Hongchen, MD
  Johnson, Craig A., MD
  Osmond, Gregory W., MD
- Pathology, Anatomy, Clinical Pathology
  Meyer, Jason L., MD
- Pediatrics
  Bautista-Azores, Richelle P., MD
  Cabalka, Allison L., MD
  Cannon, Bryan, MD
  Cleveland, Chris, MD
  Decock, Christopher, MD
  Eidem, Benjamin W., MD
  Horner, Justin, MD
  Johnson, Jonathan N., MD
  Klein, Katherine A., MD

North Dakota (cont.)
Bismarck (cont.)

Sanford Medical Center (cont.)

- Pediatrics (continued)
  Kumar, Parag, MD
  McDonough, Stephen M., MD
  Ocejo, Rafael, MD
  Oksa, Amy E., MD
  Peterson, Gary D., MD
  Reinke, Sara L., MD
  Seibel, Melissa M., MD
  Serabe, Baruti M., MD
  Twogood, Todd A., MD
- Peripheral Vascular Diseases Or Surgery
  Boyko, Kimber M., MD
  Pansegrau, Timothy L., MD
- Physical Medicine and Rehabilitation
  Eggert, Douglas K., MD
  Murphy, Kevin P., MD
  Peterson, Gregory S., MD
- Plastic Surgery
  Bronson, Davis L., MD
  Dibbell, David G., MD
- Podiatry, Surgical Chiropody
  Hart, Eric M., DPM
  Koester, Kevin J., DPM
  Tello, Francisco A., DPM
- Psychiatry (MD/DO)
  Balf, Gabriela, MD
  Belzer-Curl, Gretchen G., MD
  Collier, Jeanine S., MD
  Gibson, David K., MD
  Haaland, Robin M., MD
  Henke, Melissa J., MD
  Huber, Cheryl, MD
  Pathak, Prem N., MD
  Shrestha, Sacheen, MD
- Psychiatry, Neurology
  Judice, Ross D., MD
- Pulmonary Diseases
  Gupta, Vikesh, MD
  Sarrigiannidis, Andreas, MD
- Radiology
  Fogarty, Edward F., MD
  Gardner, Bruce A., MD
  Iwamoto, Matthew M., MD
  McIntee, Michael J., MD
  Miller, John A., MD
  Tello-Skjerseth, Christina, MD

Providers are subject to be added or terminated without notice.

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PARTICIPATING PHYSICIANS

Sanford Medical Center (cont.)

- Rheumatology
  Peterson, Lynne S., MD
- Thoracic Surgery
  Akins, Chris W., MD
  Boyko, Kimber M., MD
  Hieb, Robert E., MD
  McNeil, Jeffrey, MD
  Pansegrau, Timothy L., MD
  Russell, Sean S., MD
  Viney, Jeanette M., MD
- Urology
  Chinn, Douglas O., MD
  Koleilat, Nadim, MD
  Taylor, Joseph C., MD

Sanford North Clinic
2830 N Washington St
(701) 323-6400

- Dermatology
  Knudson, Richelle M., MD
- Family Practice
  Carlson, Jessica A., MD
  Emery, Russell J., MD
  Klemin, Jill M., MD
  Yalamanchili, Prashanthi, MD
- Pathology
  Fisher, Catherine P., MD
- Radiology
  Fogarty, Edward F., MD
  Iwamoto, Matthew M., MD
  McIntee, Michael J., MD
  Miller, John A., MD
  Tello-Skjerseth, Christina, MD

Sanford North Walk-In Clinic
3318 N 14th Street
(701) 323-8300

- Emergency Medicine
  Blanchard, Joel H., MD
  Cusic, Robert L., MD
  Fairbairn, Thomas D., MD
- Family Practice
  Ashley, Lynn E., MD
  Betting, Susan S., MD
  Blanchard, Joel H., MD
  Dornacker, Angela S., MD
  Kosiak, Donald J., MD
  Patel, Niral R., MD
  Rauta, Olimpia, MD

North Dakota (cont.)
Bismarck (cont.)

Sanford North Walk-In Clinic (cont.)

- Infectious Diseases
  Martin, C Kent, MD
- Internal Medicine
  Martin, C Kent, MD
- Pathology
  Fisher, Catherine P., MD
- Radiology
  Fogarty, Edward F., MD
  Iwamoto, Matthew M., MD
  McIntee, Michael J., MD
  Miller, John A., MD
  Tello-Skjerseth, Christina, MD

Sanford Seventh and Broadway
715 E Broadway Ave
(701) 323-8922

- Allergy
  Larson, James B., MD
- Emergency Medicine
  Fairbairn, Thomas D., MD
  Grooms, Paul G., DO
  Moen, R J., MD
- Family Practice
  Bossort, James B., MD
  Carlson, Jessica A., MD
  Fairbairn, Thomas D., MD
  Fyfe, Alistair G., MD
  Hoggarth, Tonia L., MD
  Klop, Krissondra L., DO
  Moen, R J., MD
  Thompson, Eric M., MD
- General Practice
  Bossort, James B., MD
  Fyfe, Alistair G., MD
- Otology, Laryngology, Rhinology
  Coombe, Walter T., MD
  Fiechtner, Marcus M., MD
  Nelson, Jeffrey J., MD
  Wink, Sue K., MD
  Yorgason, Joshua G., MD
- Pathology
  Fisher, Catherine P., MD
- Radiology
  Fogarty, Edward F., MD
  Iwamoto, Matthew M., MD
  McIntee, Michael J., MD
  Miller, John A., MD
  Tello-Skjerseth, Christina, MD

North Dakota (cont.)
Bismarck (cont.)

Sanford Seventh and Rosser Clinic
414 N 7th St
(701) 323-6815

- Anesthesiology (MD)
  Quast, Michael L., MD
- Endocrinology
  Christensen, Steffen P., MD
  Dahl, Stephanie K., MD
- Family Practice
  Field, David R., MD
  Sell, Shanon M., DO
- Internal Medicine
  Henke, Melissa J., MD
- Obstetrics/Gynecology
  Christensen, Steffen P., MD
  Dahl, Stephanie K., MD
  Danielson, Christopher J., MD
  Iverson, Christie A., MD
  Klemin, Peter L., MD
  Orser, Shari L., MD
  Perkerewicz, Kathleen M., MD
  Woodrow, Peter A., MD
- Psychiatry (MD/DO)
  Balf, Gabriela, MD
  Gibson, David K., MD
  Haaland, Robin M., MD
  Henke, Melissa J., MD
  Huber, Cheryl, MD
  Pathak, Prem N., MD
  Shrestha, Sacheen, MD
- Radiology
  Fogarty, Edward F., MD
  Iwamoto, Matthew M., MD
  McIntee, Michael J., MD
  Miller, John A., MD
  Tello-Skjerseth, Christina, MD

Sanford Seventh and Thayer
209 7 St N
(701) 323-5590

- Family Practice
  Field, David R., MD
- Internal Medicine
  Keys, Daniel O., MD
  Lebeau, Michael E., MD
  Lunn, Gerry M., MD
- Pathology
  Fisher, Catherine P., MD

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North Dakota (cont.)
Bismarck (cont.)

Sanford Seventh and Thayer
225 N 7th St
(701) 323-8920

- Family Practice
  Penn, Jeremiah J., MD
- Orthopedic Surgery
  Canham, William D., MD
  Carpenter, Matthew R., MD
  Fyfe, Ian C., MD
  Gattey, Philip H., MD
  Gehrig, Laura M., MD
  Norberg, Jon D., MD
  O'Regan, David J., MD
- Plastic Surgery
  Bronson, Davis L., MD
- Podiatry, Surgical Chiropody
  Koester, Kevin J., DPM
  Tello, Francisco A., DPM

Sanford South Clinic
1040 Tocoma Ave
(701) 323-6400

- Family Practice
  Klop, Krissondra L., DO
  Miller, Brenda L., MD
  Pengilly, David J., MD
  Smith, Stuart T., MD
  Stein, Sherry L., MD
  Tincher, Michelle R., MD
- Pathology
  Fisher, Catherine P., MD
- Radiology
  Fogarty, Edward F., MD
  Iwamoto, Matthew M., MD
  McIntee, Michael J., MD
  Miller, John A., MD
  Tello-Skjerseth, Christina, MD

Smith, Jeff, MD PC
1033 Basin Ave
(701) 223-6613

- Family Practice
  Smith, Jeffrey A., MD

Spine Orthopedic and Pain Center PC
121 W Century Ave
(701) 530-8500

- Physical Medicine and Rehabilitation
  Martire, Michael P., MD

North Dakota (cont.)
Bismarck (cont.)

St Alexius Heart & Lung Clinic LLC
310 N 10th St
(701) 530-7500

- Allergy
  Piyamahunt, Arkapol, MD
- Anesthesiology (MD)
  Cave, Jeffrey R., MD
  Cleary, William F., MD
  Harvey, William S., DO
  Hoskins, Nicholas A., MD
  Jankoviak, Michael D., MD
  Klein, Scott A., MD
  Laszewski, Linda J., MD
  Lo, Lim-Che, MD
  Loven, Roger R., MD
  Mathieu, Maryse, MD
  Preszler, Todd M., MD
  Russon, Troy S., MD
  Voigt, Matthew L., MD
  White, Peter, MD
- Cardiovascular Disease
  Brown, Michael R., MD
  Diede, Stanley T., MD
  Eshoo, Norman S., MD
  Mahr, Nicholas C., MD
  Mathew, Boban, MD
  Murthy, Mylapanahalli G., MD
  Nelson, Matthew R., MD
  Oatfield, Robert G., MD
- General Surgery
  Booth, A Michael, MD
  Marts, Boyd C., MD
- Geriatrics
  Kriengkrairut, Somsak, MD
- Internal Medicine
  Benson, Jeffre J., MD
  Diede, Stanley T., MD
  Eshoo, Norman S., MD
  Hughes, James A., MD
  Ilie, Camelia C., MD
  Kriengkrairut, Somsak, MD
  Mathew, Boban, MD
  Murthy, Mylapanahalli G., MD
  Oatfield, Robert G., MD
  Paulo, Monica T., MD
  Piyamahunt, Arkapol, MD
  Sulieman Daoud, Ahmed, MD
- Pediatrics
  Fernandez-Martorell, Patricio, MD

North Dakota (cont.)
Bismarck (cont.)

St Alexius Heart & Lung Clinic LLC (cont.)

- Pediatrics (continued)
  Zacher, Carla J., MD
- Pulmonary Diseases
  Hughes, James A., MD
  Kriengkrairut, Somsak, MD
  Paulo, Monica T., MD
  Sulieman Daoud, Ahmed, MD
- Radiology
  Herbel, Brent D., MD
  Jahn, Paul, MD
  Kalagher, Sean D., MD
- Thoracic Surgery
  Booth, A Michael, MD
  Brown, Michael R., MD

St Alexius Medical Center
900 E Broadway Ave
(701) 530-3105

- Anesthesiology (MD)
  Johnson, Gary N., MD
  Markewich, Stephen, MD
  White, Peter, MD
- Emergency Medicine
  Bradley, Amanda J., MD
  Magill, Thomas R., MD
- Family Practice
  Abramovith Feijo, Paula A., MD
  Dhamija, Sulakshna, MD
  Fahn, J Patrick C., DO
  Guanzon, Ricardo A., MD
  Guntakandla, Jaswanth R., MD
  Hostetter, Jeffrey E., MD
  Kim, In-Ah, MD
  Magill, Thomas R., MD
  Seifert, Shelly A., MD
  Taha, Taleb N., MD
  Tepastte, Michelle L., MD
  Walker, Laura L., MD
- General Practice
  Chow, Ling Sing, MD
  Hoovestol, Ryan A., MD
  Price, Tyler C., MD
  Willis, Karin K., MD
- General Surgery
  Booth, A Michael, MD
  Narayana, Avinash, DO
- Infectious Diseases
  Arthurs, Supha K., MD

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North Dakota (cont.)
Bismarck (cont.)

St Alexius Medical Center (cont.)

- Internal Medicine
  Acharya, Pranab S., MD
  Anderson, Peter W., MD
  Arthurs, Supha K., MD
  Astorne Figari, Walter J., MD
  Datz, Kurt G., DO
  Dunnigan, Earl J., MD
  Eklof, Jonathan R., MD
  Finkielman, Javier D., MD
  Francis, Lisa, MD
  Grenz, Don H., MD
  Hebert, Brian J., MD
  Hetland, Bruce M., MD
  Hsu, Chia Chun, MD
  Jain, Sunanda, MD
  Kichloo, Amir A., MD
  Levora, Jan, MD
  Pandeya, Sameer R., MD
  Raducu, Radu R., MD
  Ramdeen, Khris R., MD
  Reyman, Jake E., DO
  Reyman, Lindsey R., DO
  Sandhu, Ankur, MD
  Schwartz, Julie M., MD
  Songsiridej, Nowarat, MD
  Sulieman Daoud, Ahmed, MD
  Tanous, Robert, DO
  Vasa, Aaron A., MD
  White, Peter, MD
- Nephrology
  Dunnigan, Earl J., MD
  Jain, Sunanda, MD
  Levora, Jan, MD
- Neurological Surgery
  Belanger, Eric, MD
  Kraljic, Steven G., MD
  Monasky, Mark S., MD
- Neurology
  Hyder, Syed S., MD
  Kriengkrairut, Siriwan, MD
  Tariq, Farhan A., MD
  Wongjirad, Chatree, MD
- Obstetrics/Gynecology
  Obritsch, Jerry M., MD
- Pediatrics
  Brown, Karen R., MD
  Fernandez-Martorell, Patricio, MD
  Kriengkrairut, Siriwan, MD

North Dakota (cont.)
Bismarck (cont.)

St Alexius Medical Center (cont.)

- Pediatrics (continued)
  Patel, Mahesh, MD
- Physical Medicine and Rehabilitation
  Killen, Shelley A., MD
- Psychiatry (MD/DO)
  Capan, Michael P., MD
  Dahmen, Kevin R., MD
  Johnson, Terry M., MD
  Mirzai, Michael, MD
  Nelson, Diane L., MD
  Row, Jeffrey H., MD
  Sanches, Marsal, MD
  Van Valkenburg, Daisy R., MD
- Pulmonary Diseases
  Sulieman Daoud, Ahmed, MD
- Radiology
  Fortney, Michael S., MD
  Holmen, John H., MD
  Peterson, Douglas R., MD
  Schirado, Mike A., MD
- Rheumatology
  Francis, Lisa, MD
  Songsiridej, Nowarat, MD
- Thoracic Surgery
  Booth, A Michael, MD
- Urology
  Fukuda, Christopher S., MD
  Gray, Todd A., MD
  Pathroff, Robert A., MD
  Rainwater, Leslie M., MD

St Alexius Medical Center/Emergency Physician Services
900 E Broadway Ave
(701) 530-7001

- Emergency Medicine
  Allen, Charles O., DO
  Bathurst, Robert M., MD
  Bradley, Amanda J., MD
  Gayton, David J., MD
  Leingang, Gordon D., DO
  Magill, Thomas R., MD
  McCullough, Sarah J., MD
  Mickelson, Kevin S., MD
  Price, Tyler C., MD
- Family Practice
  Magill, Thomas R., MD

North Dakota (cont.)
Bismarck (cont.)

St Sophies, LLC
3000 N 14th St #2a
(701) 252-2001

- Psychiatry (MD/DO)
  Kenney, Emmet M., MD

The Bone & Joint Center, PC
310 N 9th St
(701) 530-8650

- Family Practice
  Cote, Derrick O., MD
- Hand Surgery
  Larsen, David H., DO
  Pierce, Troy D., MD
- Orthopedic Surgery
  Ackerman, Duncan B., MD
  Bopp, Timothy J., MD
  Carlson, Chad B., MD
  Carlson, Joseph W., MD
  Dahl, Charles P., MD
  Hart, Mark B., MD
  Juelson, Timothy J., MD
  Larsen, David H., DO
  Moore, Michael R., MD
  Pierce, Troy D., MD

Valley Weight Loss Clinic
1500 Interchange Ave
Ste 210
(701) 365-8446

- Internal Medicine
  Hella, Brent M., MD

West Central Human Service Center
1237 W Divide Ave Ste 5
(701) 328-8888

- Psychiatry (MD/DO)
  Capan, Michael P., MD
  Eick, Thomas J., DO
  McLean, Andrew J., MD

Bottineau

Family Vision Center
522 Main St
(701) 228-2219

- Optometrist
  Dunderland, Paul D., OD

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North Dakota (cont.)

Bottineau (cont.)

St Andrews Bottineau Clinic, LLC
314 Ohmer St
(701) 228-9400

- Family Practice
  Hamilton, Robert A., MD
  Skjolden, Jessica A., MD
- General Practice
  Kihle, Kenneth W., MD

St Andrews Health Center
316 Ohmer St
(701) 228-9400

- Family Practice
  Hamilton, Robert A., MD
  Kihle, Kenneth W., MD
  Skjolden, Jessica A., MD
- General Practice
  Kihle, Kenneth W., MD
- Ophthalmology
  Bouchard Kindy, Evelyne B., MD

St Andrews Hospital/MAMC
314 Ohmer St
(701) 228-9400

- Family Practice
  Hamilton, Robert A., MD

Bowbells

Northland Community Health Center
18 Main St SW
(701) 377-4758

- Family Practice
  Vaagen, Jeffrey L., MD
- Internal Medicine
  Vaagen, Jeffrey L., MD

Bowman

Southwest Medical Clinic
12 6th Ave SW
(701) 523-3226

- Family Practice
  Meadows, David T., MD
  Tomboulian, Sherryl, MD
- General Practice
  Lanchbury, Forrest, MD
  Swisher, Paul L., MD
- Pediatrics
  Oksa, Amy E., MD

North Dakota (cont.)

Bowman (cont.)

West River Health Service
608 Highway 12 W
(701) 523-3271

- Family Practice
  Boschee, Tracy B., DO
  Houle, Catherine E., MD
  Jacobsen, Thomas E., MD
  Joyce, John P., MD
  Thorngren, Frank A., MD
  Wellman, Stacie M., MD
- General Practice
  Sheffield, Jennifer L., MD
- Geriatrics
  Hoerauf, Kent R., MD
  Willoughby, Brian G., MD
- Internal Medicine
  Hoerauf, Kent R., MD
  Ranum, Joshua C., MD
  Willoughby, Brian G., MD
- Obstetrics/Gynecology
  Jacobsen, Thomas E., MD
- Pediatrics
  Ketterling, Ellen L., MD
  Ranum, Carrie Ann K., MD
- Podiatry, Surgical Chiropody
  Kilwein, Steven C., DPM

Cando

Towner County Medical Center
Hwy 281 N
(701) 968-2541

- Family Practice
  Peterson, Mark G., MD
  Petty, Russell W., MD
  Viscito, Matthew S., MD
- Podiatry, Surgical Chiropody
  Fanous, Basem Z., DPM

Carrington

Carrington Health Center
800 4th St N
(701) 652-3141

- Family Practice
  Page, Michael J., MD
  Schaffer, Todd W., MD
- General Practice
  Geier, Rick J., MD

North Dakota (cont.)

Carrington (cont.)

Family Vision Center
110 9th Ave S
(701) 652-2020

- Optometrist
  Hendrickson, Kathy M., OD

Foster County Medical Center
820 5th St N
(701) 652-2515

- Family Practice
  Page, Michael J., MD
  Schaffer, Todd W., MD
- General Practice
  Geier, Rick J., MD
- General Surgery
  Khokha, Inder V., MD

Frisk, James L. MD Ltd
800 North 4th St
(701) 235-1924

- Otology, Laryngology, Rhinology
  Frisk, James L., MD

Plains Ear Nose Throat & Facial Plastic Surgery,PC
800 North 4th St
(701) 235-1924

- Otology, Laryngology, Rhinology
  Frisk, James L., MD

Professional Eyecare Center
6712 Highway 200 E
(701) 652-2222

- Optometrist
  Frohlich, Douglas L., OD
  Fronk, Kent, OD

Casselton

Essentia Health Casselton Clinic
5 9th Ave N
(701) 347-4445

- Family Practice
  Domm, Bruce L., MD
- Geriatrics
  Domm, Bruce L., MD
- Obstetrics/Gynecology
  Domm, Bruce L., MD

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PARTICIPATING PHYSICIANS

North Dakota (cont.)

Cavalier

Altru Cavalier
201 E 3rd Ave S
(701) 265-8338

- Allergy
  Jacobsen, John J., MD
- Cardiovascular Disease
  Aboufakher, Rabeea, MD
  Bekdash, Ismail L., MD
- Dermatology
  Hoverson-Schott, Alyssa R., MD
  Muus, John H., MD
- Endocrinology
  Brosseau, James D., MD
- Family Practice
  Gaul, Joanne N., MD
  Thompson, Susan J., MD
- General Surgery
  Hape, Robin T., MD
  Usatii, Anatolie A., MD
- Geriatrics
  Aboufakher, Rabeea, MD
  Brosseau, James D., MD
  Okundaye, Ebima C., MD
- Internal Medicine
  Bekdash, Ismail L., MD
  Breitwieser, Wayne R., MD
  Brosseau, James D., MD
  Mudireddy, Uma M., MD
  Okundaye, Ebima C., MD
  Panico, Kevin, MD
  Paulson, Rolf R., MD
  Thompson, Susan J., MD
- Nephrology
  Okundaye, Ebima C., MD
- Neurology
  Novacek, Rebecca K., MD
  Roller, Matthew J., MD
- Obstetrics/Gynecology
  Lessard, Collette R., MD
- Oncology
  Walsh, Daniel J., MD
- Ophthalmology
  Brockman, Ronald J., MD
- Otology, Laryngology, Rhinology
  Johnson, Alan W., MD
- Podiatry, Surgical Chiropody
  Britten, Joshua W., DPM
- Psychiatry (MD/DO)
  Feldman, Ellen K., MD
  Madaram, Kondal R., MD

North Dakota (cont.)

Cavalier (cont.)

Altru Cavalier (cont.)

- Pulmonary Diseases
  Breitwieser, Wayne R., MD
  Mudireddy, Uma M., MD
- Radiology
  James, John, MD
  Stevens, Kerry A., MD

Cavalier Optometry Clinic
201 E 3rd Ave S
(701) 265-8315

- Optometrist
  Clark, Selmer M., OD

Pembina County Hospital/Clinic
301 Mountain St E
(701) 265-6307

- Family Practice
  Sumra, Kulvinder S., MD
- General Surgery
  Khokha, Inder V., MD
- Radiology
  Aizpuru, Richard D., MD
  Ali, Azhar T., MD
  Arsenault, Todd M., MD
  Asis, Martin J., MD
  Baldwin, Matthew T., MD
  Baraga, Joseph J., MD
  Barkmeier, Jeffrey, MD
  Berens, Bruce M., MD
  Berger, Mark W., MD
  Block, Nathan D., MD
  Bowman Seitz, Tara S., MD
  Bretzke, Carl A., MD
  Bretzman, Peter A., MD
  Bryan, Erich N., MD
  Butler, Robert R., MD
  Carlson, Blake A., MD
  Caspers, John M., MD
  Castaneda, Wilfrido R., MD
  Ditmanson, Phil M., MD
  Drake, David G., MD
  Edmonson, George R., MD
  Frecentese, Dominic F., MD
  Gilloon, Benjamin A., MD
  Goertzen, Timothy C., MD
  Hartigan, Andrew S., MD
  Hommeyer, Steven C., MD
  Jackson, Christopher A., MD
  Johnson, Adam C., MD
  Kang, Edith H., MD

North Dakota (cont.)

Cavalier (cont.)

Pembina County Hospital/Clinic (cont.)

- Radiology (continued)
  Knoedler, John P., MD
  Knutzen, Anders M., MD
  Lambert, David P., MD
  Leon, Jorge A., MD
  Loe, Matthew J., MD
  Longley, Deborah G., MD
  Magnuson, Jeffrey E., MD
  Maguire, Frank P., MD
  May, Benjamin J., MD
  Mulcahy, Paul F., MD
  Muschenheim, Alexandra L., MD
  Page, Graydon T., MD
  Parrino, Suzanne S., MD
  Passe, Theodore J., MD
  Phelan, Jeffrey S., MD
  Prescott, Trisha R., MD
  Rathmann, Gregory A., MD
  Rhodes, Nicholas G., MD
  Ruzek, Kimberly A., MD
  Savcenko, Vladimir, MD
  Sullivan, Patrick P., MD
  Tai, Angela W., MD
  Tashjian, Joseph H., MD
  Truman, Susan M., MD
  Tummala, Anuradha K., MD
  Veldman, Mark W., MD
  Weinmann, Robert H., MD
  Weisensee, Anne M., MD
  Wiese, Don E., MD
  Wittenberg, Keith H., MD
  Wold, Peter B., MD

Pembina County Memorial Hospital (MAMC)
301 Mountain St E
(701) 265-8461

- Family Practice
  Lindemann, Alan R., MD

Center

Coal Country Community Health Center
111 E Main St
(701) 794-8798

- Family Practice
  Garman, Aaron M., MD
  Jackson, Orlan D., DO
  Jon-Klindworth, Jacinta, MD

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PARTICIPATING PHYSICIANS

North Dakota (cont.)

Cooperstown

Cooperstown Medical Center
1200 Roberts Ave NE
(701) 797-2128

- Family Practice
  Gourneau, Linda F., MD
  Karki, Mohan R., MD

Family Vision Center
1200 Roberts Ave NE
(701) 797-2699

- Optometrist
  Hendrickson, Kathy M., OD

Crosby

Crosby Clinic
702 1st St SW
(701) 965-6349

- Family Practice
  Hutchison, Rose E., MD
  Peterson, Mark G., MD
  Sedo, Philip S., MD
  Selland, Brian L., MD
  Sullivan, Brian M., MD

Devils Lake

20/20 Eyecare
211 4th St NE Suite 1
(701) 662-2040

- Optometrist
  Burdick, Blaine L., OD

Altru At 20/20 Eye Care
211 4th St NE Ste 1
(701) 662-2817

- Ophthalmology
  Khairallah, Christian G., MD

Altru Clinic Lake Region
1001 7th St
(701) 662-2157

- Allergy
  Jacobsen, John J., MD
- Cardiovascular Disease
  Chebaclo, Mohamed, MD
  Kirnus, Mikhail, MD
- Dermatology
  Hoverson-Schott, Alyssa R., MD
  Muus, John H., MD
- Endocrinology
  Brosseau, James D., MD

Altru Clinic Lake Region (cont.)

- Family Practice
  Bittner, Heidi M., MD
  Fetterly, Paul J., MD
  Fleissner, Paul, MD
  Lim, Elson T., MD
  Martin, Candelaria C., MD
  Nalubega, Rita, MD
  Rostad, Christina T., MD
  Wayman, Derek, MD
- Gastroenterology
  Bharath, Somasundaram, MD
- General Surgery
  Belluk, Bradley P., MD
  Charette, Scott D., MD
  Debeltz, Donald J., MD
  Guttormson, Robert D., MD
  Usatii, Anatolie A., MD
- Geriatrics
  Brosseau, James D., MD
  Okundaye, Ebima C., MD
- Hand Surgery
  Leetun, Darin T., MD
- Infectious Diseases
  Hargreaves, James E., DO
- Internal Medicine
  Bharath, Somasundaram, MD
  Breitwieser, Wayne R., MD
  Brosseau, James D., MD
  Corbett, Thomas C., MD
  Downs, Jacqueline L., MD
  Go, Jason S., MD
  Haastrup, Adetola T., MD
  Kirnus, Mikhail, MD
  Logrono, Al-Marie Grace T., MD
  Moraleda, Roberto H., MD
  Mudireddy, Uma M., MD
  Okundaye, Ebima C., MD
  Paulson, Rolf R., MD
  Rahman, Mohammed H., MD
- Nephrology
  Haastrup, Adetola T., MD
  Okundaye, Ebima C., MD
  Rahman, Mohammed H., MD
- Neurology
  Roller, Matthew J., MD
- Obstetrics/Gynecology
  Eickenbrock, Andrea M., MD

Altru Clinic Lake Region (cont.)

- Oncology
  Bustillo Chams, Ivan J., MD
  Dentchev, Todor N., MD
- Orthopedic Surgery
  Clayburgh, Robert H., MD
  Johnson, Robert A., MD
  Leetun, Darin T., MD
- Otology, Laryngology, Rhinology
  Lapp, Gregory C., MD
- Pathology
  Cooley, A. Marvin, MD
- Pediatrics
  Panda, Durga P., MD
  Sondrol, Lori A., MD
- Physical Medicine and Rehabilitation
  Fleissner, Paul, MD
- Podiatry, Surgical Chiropody
  Criswell, Samuel W., DPM
  Johnston, Alisha L., DPM
- Psychiatry (MD/DO)
  Feldman, Ellen K., MD
  Madaram, Kondal R., MD
- Pulmonary Diseases
  Bansal, Arvind K., MD
  Breitwieser, Wayne R., MD
  Mudireddy, Uma M., MD
- Radiology
  Aafedt, Bradley C., MD
  Chou, David, MD
  Dallum, Bernie J., MD
  Hagen, William N., DO
  Hood, Larissa L., MD
  James, John, MD
  Johnson, Richard E., MD
  Omdahl, Bonnie B., MD
  Schroeder, James G., MD
  Treuer, Jody B., MD

Devils Lake Community Clinic
425 S College Dr Ste 14
(701) 968-2541

- Family Practice
  Petty, Russell W., MD
- Podiatry, Surgical Chiropody
  Fanous, Basem Z., DPM

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PARTICIPATING PHYSICIANS

North Dakota (cont.)
Devils Lake (cont.)

Drs Krein & Moen, PC
404 Highway 2 E
(701) 662-4085

- Optometrist
  Enderle, Carey L., OD
  Krein, Kyle D., OD
  Moen, Mark, OD

Lake Region Human Service Center
200 Highway 2 SW
(701) 665-2200

- Psychiatry (MD/DO)
  Clinkenbeard, James, MD
  McLean, Andrew J., MD

Medical Imaging Associates
1031 7th St
(701) 662-5247

- Radiology
  Johnson, Richard E., MD

The Mercy Hospital of Devils Lake
1031 7th St NE
(701) 662-2131

- Emergency Medicine
  Bales, Jordan L., MD
  Beaty, James R., MD
  Wiltse, Richard J., MD
- Family Practice
  Andersen, Jeffrey B., MD
  Baruti, Timur A., MD
  Cheng, Stephen, MD
  Doser, Craig M., MD
  Dueber, George B., DO
  Dumbolton, John H., DO
  Fetterly, Paul J., MD
  Jonas, Roxanne L., MD
  Larson, Richard L., MD
  Martin, Richard E., MD
  Matheson, Thomas B., MD
  Overvold, Angel D., DO
  Raymond, Arthur J., MD
  Wilson Hall, Nicole, DO
- Gastroenterology
  Bharath, Somasundaram, MD
- General Practice
  Bermudez, Christopher J., MD
  Mercy Hospital Devils Lk Cln
- Internal Medicine
  Bharath, Somasundaram, MD

North Dakota (cont.)
Devils Lake (cont.)

The Mercy Hospital of Devils Lake (cont.)

- Internal Medicine (continued)
  Corbett, Thomas C., MD
  Jahed, Abdul Z., MD
  Moraleda, Roberto H., MD
- Plastic Surgery
  Martello, Jeannette Y., MD

Trinity Regional Eyecare - Devils Lake
404 Hwy 2 East
(701) 662-4085

- Family Practice
  Dicken, Robert A., MD
- Ophthalmology
  Dannenberg, Lee L., MD
  Dicken, Robert A., MD
  Wolsky, Chad J., MD

Dickinson

Addo, Fek MD
227 16th St W
(866) 503-9900

- Internal Medicine
  Addo, Ferdinand E., MD

Advanced Vision Centers
446 3rd Ave W
(701) 225-2020

- Optometrist
  Nelson, Jay C., OD
  Przymus, David C., OD

Badlands ENT Clinic
227 16th St W
(701) 456-4700

- Otology, Laryngology, Rhinology
  Rosenberg, Zachary, MD

Badlands Human Service Center
300 13 Ave W Ste 1
(701) 227-7500

- Psychiatry (MD/DO)
  McLean, Andrew J., MD
  Van Valkenburg, Daisy R., MD

Better Vision PC
2456 3rd Ave W
(701) 456-8035

North Dakota (cont.)
Dickinson (cont.)

Better Vision PC (cont.)

- Optometrist
  Biesiot, Vincent, OD

Community Action Partnership
202 E Villard St
(701) 227-0131

- General Practice
  Sheffield, Jennifer L., MD

Dakota Bone and Joint
109 W 7th St
(701) 483-2973

- Orthopedic Surgery
  Isackson, Ronald D., MD

Emmerich Eye Clinic
34 1st St E
(701) 225-9601

- Optometrist
  Emmerich, Mark A., OD

Eyewear Concepts
2273 3rd Ave W
(701) 225-7886

- Optometrist
  Keller, Jessica, OD
  Oltmanns, Melanie K., OD
  Shilman, Nathaniel D., OD

Great Plains Clinic, PC
33 9th St W
(701) 483-6017

- Family Practice
  Komorowska, Danuta, MD
  Rathgeber, Cory E., MD
  Wolf, Dennis E., MD
- General Surgery
  Brooke, James M., MD
- Geriatrics
  Wolf, Dennis E., MD
- Internal Medicine
  Ohara, Brian E., MD
  Olin, Bruce W., MD
- Pediatrics
  Ohara, Brian E., MD

Grube Retina Clinic, PC
2273 3rd Ave W
(701) 751-2131

- Ophthalmology
  Grube, Thomas J., MD

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING PHYSICIANS

Keaveny, John, DDS
669 12th St W
(701) 225-5163

- Oral Surgery
  Keaveny, John T., DDS

King Family Eye Clinic, PC
341 1st St E
(701) 483-9141

- Optometrist
  Hoff, Candace P., OD
  King, Alan J., OD

Matthys, Gary A., MD, Plc
33 9th St W
(701) 241-9300

- Orthopedic Surgery
  Matthys, Gary, MD

Neurosurgical & Spinal Surgery Associates, PC
683 State Ave N
(605) 341-2424

- Neurological Surgery
  Ingraham, Robert Q., MD
- Neurology
  Maclachlan, Robert D., MD

Sanford Health Dickinson Clinic
2615 Fairway St
(701) 456-6000

- Cardiovascular Disease
  Korte, Stephen A., MD
  Reddy, Karthik, MD
- Family Practice
  Garman, Aaron M., MD
  Hochhalter, David, MD
  Johansen, James R., MD
  Martin, Heather M., DO
  Nordeng Zimmermann, Rena M., MD
  Sherman, Kamille S., MD
  Skager, Tanya L., MD
  Thomas, Jack G., MD
  Thompson, Eric M., MD
  Wilson Hall, Nicole, DO
  Wolf, Terry L., DO
  Zimmerman, Ryan M., MD
- General Surgery
  Nelson, Brook V., MD

Sanford Health Dickinson Clinic (cont.)

- Internal Medicine
  Anderson, Patricia W., MD
  Hinrichs, Mark, MD
  Korte, Stephen A., MD
  Reddy, Karthik, MD
  Wos, Edward J., DO
- Obstetrics/Gynecology
  Hofland, Erica C., MD
  McMacken, Audrey, MD
  Vandall, Michael, MD
  Williams, Alisha V., MD
- Oncology
  Wos, Edward J., DO
- Orthopedic Surgery
  Gattey, Philip H., MD
  Kovacs, Gregg R., DO
- Pathology
  Fisher, Catherine P., MD
- Pediatrics
  Oksa, Amy E., MD
  Peterson, Gary D., MD
  Ricks, Marc D., MD
- Radiology
  Fogarty, Edward F., MD
  Iwamoto, Matthew M., MD
  McIntee, Michael J., MD
  Miller, John A., MD
  Tello-Skjerseth, Christina, MD
- Urology
  Koleilat, Nadim, MD

Sanford Health Occupational Medicine Clinic
1531 W Villard St Ste A
(701) 225-7575

- Emergency Medicine
  Blanchard, Joel H., MD
- Family Practice
  Blanchard, Joel H., MD
- Pathology
  Fisher, Catherine P., MD

St Josephs Hospital & Health Center
30 7th St W
(701) 456-4000

- Anesthesiology (MD)
  Boutrous, Attas, MD
  Carlson, Hugh S., MD

St Josephs Hospital & Health Center (cont.)

- Anesthesiology (MD) (continued)
  Johnson, Gary N., MD
  Knutson, Ronald M., MD
  Volesky, Patrick J., MD
- Emergency Medicine
  Adams, Kelly, DO
  Bathurst, Robert M., MD
  Cassidy, Michael L., MD
  Kuylen, David A., MD
  Lotstein, Robert J., MD
  Magill, Thomas R., MD
  McCarthy, John P., MD
  McCullough, Sarah J., MD
  Swenson, Kjirsten, MD
  Swenson, Sheldon L., MD
  Wilkie, Penny M., MD
- Family Practice
  McCarthy, John P., MD
  Paneru, Ram P., MD
- General Practice
  Riddick, Robert S., MD
- Internal Medicine
  Hinrichs, Mark, MD
  Jamil, Muhammad O., MD
  Labrie, Sonja, MD
  Olin, Bruce W., MD
  Sheps, Daniel J., DO
  Swami, Sharad S., MD
  Zehra, Nida, MD
- Obstetrics/Gynecology
  Arnold, Thomas, MD
  Pierce, Stephanie R., MD
  Stewart, Jeanne M., MD
- Orthopedic Surgery
  Kilzer, Ralph L., MD
- Otology, Laryngology, Rhinology
  Lennard-Love, Colleen M., MD
  Rosenberg, Zachary, MD
- Pathology
  Kovacs, Simin, DO
- Psychiatry (MD/DO)
  Fornal, Robert E., MD
  Lopez, David J., MD
- Psychiatry, Neurology
  Helgason, Chanel M., MD
- Radiology
  Bakker, Hilton J., MD

Providers are subject to be added or terminated without notice.

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PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING PHYSICIANS

North Dakota (cont.)
Dickinson (cont.)

St Josephs Surgical Care
45 8 St W
(701) 456-4740

- General Practice
  Riddick, Robert S., MD

St Josephs Walk In Clinic
227 16th St W
(701) 227-7900

- Internal Medicine
  Jamil, Muhammad O., MD
- Obstetrics/Gynecology
  Hendrzak, Ann Marie, MD
- Pediatrics
  Ahmed, Ibrahim M., MD
  Bautista-Azores, Richelle P., MD
  Khelghati, Amrullah, MD

St Josephs Womens Clinic
30 W 7th St
(701) 456-4200

- Obstetrics/Gynecology
  Arnold, Thomas, MD
  Barrett, Mary T., MD
  Clayton, Yocunda D., MD
  Hoffman, Cara L., MD
  Lowe, William M., MD
  Stewart, Jeanne M., MD

Weir Eye Clinic, LLC
849 3rd Ave W
(701) 483-2200

- Optometrist
  Weir, John C., OD

West River Foot and Ankle Center
683 State Ave Ste E
(701) 483-4561

- Podiatry, Surgical Chiropody
  Kilwein, Steven C., DPM

Drayton

Altru Drayton
1003 N Main St
(701) 454-3311

- Family Practice
  Funk, Peter A., MD
  Walz, Joel D., MD
- Psychiatry (MD/DO)
  Madaram, Kondal R., MD

North Dakota (cont.)
Drayton (cont.)

Dunham, Thomas, OD
104 E Hiway 66 Ste 102
(701) 454-3340

- Optometrist
  Dunham, Thomas, OD

Dunseith

Heart of America Johnson Clinic Dunseith
215 Main St SE
(701) 244-5694

- Emergency Medicine
  Fernandez, Oscar O., MD
- Family Practice
  Fernandez, Oscar O., MD
  Kremer, Ashely J., MD
  Schoneberg, Steven B., MD

Turtle Mountain Family Medicine LLC
115 Main St NE
(701) 244-5800

- Family Practice
  Selland, Brian L., MD

Edgeley

Sanford Health Edgeley Clinic
506 2nd St
(701) 493-2245

- Family Practice
  Schatz, Sarah, MD

Elgin

Jacobson Memorial Elgin Community Clinic
603 East St N
(701) 584-7231

- General Practice
  Knecht, John F., MD
- Internal Medicine
  Goyal, Deepak M., MD

Jacobson Memorial Hospital Care Center
601 East St N
(701) 584-3338

- General Practice
  Knecht, John F., MD

North Dakota (cont.)
Ellendale

Avera Clinic of Ellendale
240 Main St
(701) 349-3666

- Family Practice
  Holkesvik, Reid E., MD
- Orthopedic Surgery
  Macdougall, James B., MD
  Mantone, James K., MD

Avera Medical Group Cadiovascular Specialists Aberdeen
240 Main St
(605) 622-2573

- Cardiovascular Disease
  Sidaway, Larry S., DO
- Internal Medicine
  Sidaway, Larry S., DO

Avera Medical Group Orthopedic Surgery Specialists
141 Main St
(605) 226-2663

- Orthopedic Surgery
  Macdougall, James B., MD

Ophthalmology Associates
111 Main St
(605) 226-2108

- Ophthalmology
  Bormes, John M., MD

Sanford Health Ellendale Clinic
141 Main St
(701) 349-3331

- Internal Medicine
  Nagala, Vani, MD

Enderlin

Sanford Health Enderlin Clinic
201 4th Ave Ste 1
(701) 437-3320

- Family Practice
  Braunagel, Bradley A., MD
  Buhr, James B., MD
  Hochhalter, David, MD

Providers are subject to be added or terminated without notice.

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PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING PHYSICIANS

North Dakota (cont.)
Fargo

20/20 Vision Express
1300 Gateway Dr
(701) 235-0280

- Optometrist
  Mari, John L., OD

3-D Optical dba Sterling Optical
3402 13th Ave S
(701) 234-0939

- Optometrist
  Crissler, Darrel L., OD
  Kosir, Kristen N., OD
  McCamy, Robert T., OD
  Prasad, Niropa M., OD

3-D Optical dba Sterling Optical
3120 25th St S Ste X
(701) 234-9768

- Optometrist
  Crissler, Darrel L., OD
  Kosir, Kristen N., OD
  Prasad, Niropa M., OD

7 Day Clinic
1517 32nd Ave S
(701) 232-6211

- Family Practice
  Bjellum, Hans E., MD
  Page, Michael J., MD

7 Day Clinic
1100 19th Ave N Ste L-M
(701) 364-2909

- Family Practice
  Bjellum, Hans E., MD

7 Day Clinic -Osgood
4622 40th Ave S
(701) 364-2909

- Family Practice
  Bjellum, Hans E., MD
  Page, Michael J., MD

Angela Darveaux OD PC
3902 13th Ave S Ste 256
(701) 277-3636

- Optometrist
  Archibald, Stacey K., OD
  Darveaux, Angela K., OD
  Hillmer, Jed, OD

North Dakota (cont.)
Fargo (cont.)

Bagan Strinden Vision
4344 20th Ave S
(701) 293-8242

- Ophthalmology
  Bagan, Steven M., MD
  Strinden, Thomas I., MD
- Optometrist
  Swanholm, Sarah M., OD

Bergstrom Eye and Laser Clinic
2601 S University
(701) 235-5200

- Ophthalmology
  Bergstrom, Lance K., MD
- Optometrist
  Collins, Nicole M., OD
  Malsom, Tracie L., OD

Catalyst Medical Center, PC
1800 21 Ave S
(701) 365-8700

- Otology, Laryngology, Rhinology
  Bellis, Morris E., MD
  Mathison, Susan M., MD

Center For Pain Medicine Inc
2829 S University Dr
Ste 201
(701) 551-6980

- Anesthesiology (MD)
  Ghazi, Majid, MD

Center For Psychiatric Care
1202 23rd St S
(701) 478-7887

- Psychiatry (MD/DO)
  Lind, Jackson W., MD

Center For Sleep LLC
4152 30th Ave S Ste 103b
(701) 356-3000

- Internal Medicine
  Khosla, Seema, MD
- Pulmonary Diseases
  Khosla, Seema, MD

Dakota Boys Ranch
1641 31st Ave S
(701) 237-3123

- Psychiatry (MD/DO)
  Martinsen, Wayne L., MD

North Dakota (cont.)
Fargo (cont.)

Dakota Family Services
7151 15th St S
(701) 364-2950

- Psychiatry (MD/DO)
  Martinsen, Wayne L., MD

Dakota Gastroenterology, Ltd
1711 Gold Dr Ste 150
(701) 866-9000

- Gastroenterology
  Nammour, Fadel E., MD
- Internal Medicine
  Nammour, Fadel E., MD

Dakota Gastroenterology, Ltd
1707 Gold Dr Ste 101
(701) 866-9000

- Gastroenterology
  Nammour, Fadel E., MD
- Internal Medicine
  Nammour, Fadel E., MD

Dermatology Associates PC
4141 31st Ave S Ste 103
(701) 478-7747

- Dermatology
  Honl, Beth A., MD

Dr L. R. Masciarelli and Associates Optometry PC
4302 13th Ave S
(701) 281-9393

- Optometrist
  Erickson, Michele M., OD
  Kisch, Joseph J., OD
  Masciarelli, Leslie R., OD

Engstrom, Kristin F., OD PC
4731 13th Ave SW Ste 1
(701) 281-2746

- Optometrist
  Engstrom, James W., OD
  Engstrom, Kristin F., OD
  Perzinski, Branden L., OD

Essentia Health 32nd Avenue Clinic
3000 32nd Ave S
(701) 364-8000

- Anesthesiology (MD)
  Bhide, Suwarna A., MD
  Brumwell, Melanie, MD
  Chan, Leslie, MD

Providers are subject to be added or terminated without notice.

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PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING PHYSICIANS

Essentia Health 32nd Avenue Clinic (cont.)

- Anesthesiology (MD) (continued)
  Dosch, Helen, DO
  Erie, John K., MD
  Perencevic, Boris, MD
  Sivanna, Panjini M., MD
  Sornson, Michael D., MD
  Vinych, John V., MD
- Cardiovascular Disease
  Almanaseer, Yassar, MD
  Jenny, Donald B., MD
  Karimian, Siamak, MD
  Nadig, Vishwanatha S., MD
  Rothberg, Martin L., MD
  Saquib, Azim, MD
- Dermatology
  Ziegler, Rebecca, MD
- Emergency Medicine
  Anderson, Christopher E., MD
  Beachy, Arden M., MD
  Belk, John W., DO
  Bone, William M., MD
  Burns, Joseph T., MD
  Deppe, Scott A., MD
  Hamilton, Tony J., DO
  Hunt, Daniel S., MD
  Kitagawa, Benji K., DO
  Poulose, Jaise T., MD
  Sauter, Brian A., MD
  Schenck, Jason, MD
  Stowers, John C., MD
- Family Practice
  Akkerman, Dave S., MD
  Baugh, John R., MD
  Kuhlmann, Craig F., MD
  Rogers, Jerry P., MD
  Sondreal, Philip S., MD
- Gastroenterology
  Anees, Mukhtar, MD
  Brooks, Jeffrey, MD
  Proano, Maritza, MD
  Rajender, Settihalli L., MD
- General Surgery
  Dees, Brian K., MD
  Gebur, Joshua J., MD
  Harris, Scott S., MD
  Jun, Hong J., MD
  Mahoney, Timothy J., MD
  Shahzad, Farooq, MD

North Dakota (cont.)
Fargo (cont.)

Essentia Health 32nd Avenue Clinic (cont.)

- General Surgery (continued)
  Siyanbade, Oyetunde O., MD
  Wroblewski, Robert L., MD
  Zreik, Khaled S., MD
- Infectious Diseases
  Alonto, Augusto M., MD
- Internal Medicine
  Almanaseer, Yassar, MD
  Anees, Mukhtar, MD
  Balsam, Peter, MD
  Briggs, Michael S., MD
  Gupta, Parul, MD
  Jadaan, Atef A., MD
  Jenny, Donald B., MD
  Jerome, Peter S., MD
  Kafle, Prakash, MD
  Kapphahn, Samantha, DO
  Karimian, Siamak, MD
  Kooyer, Kurt W., MD
  Kremens, Karol, MD
  Kunecka, Paulina, MD
  Larsson, Ernst O., MD
  Luger, Patrick A., MD
  Manickavasagam, Saraswathy, MD
  Mateuszczyk, Jaroslaw, MD
  Matthees, Donald J., MD
  Mehta, Dharmesh, MD
  Nammour, Fadel E., MD
  Neumann, James L., MD
  Parajuli, Anjali, MD
  Poulose, Jaise T., MD
  Proano, Maritza, MD
  Rajender, Settihalli L., MD
  Raval, Mihir, MD
  Saquib, Azim, MD
  Skogen, Jeffrey W., MD
  Tananusont, Weerawat, MD
  Tiwari, Priyanka, MD
  Tiwari, Sumit, MD
  Toumeh, Mohamed, MD
  Whitbeck, Matthew G., MD
- Nephrology
  Qarni, Ahmer H., MD
  Skogen, Jeffrey W., MD
- Neurological Surgery
  Baker, Adbul A., MD
  Hill, Michael, DO

North Dakota (cont.)
Fargo (cont.)

Essentia Health 32nd Avenue Clinic (cont.)

- Neurological Surgery (continued)
  Selland, Bradford A., MD
  Syrquin, Mickey G., DO
- Neurology
  Christenson, Shaun K., MD
  Darkhabani, Ziad, MD
  Donovan, Charles B., MD
  Duffy, Kristina, MD
  Penney, Curtis W., DO
- Obstetrics/Gynecology
  Bexell-Gierke, Jan M., MD
  Danilenko, Diana R., MD
  Fiebiger, Siri J., MD
  Gefroh Ellison, Stefanie S., MD
  Glasner, Gregory C., MD
  Holm, Mary K., MD
  Homan, Zena K., MD
  Ladella, Subhashini J., MD
  Linn, Stephen T., MD
  Lynch Salamon, David I., MD
  Wothe, Donald D., MD
- Oncology
  Adolfson, Troy E., MD
- Oral Surgery
  Iverson, Paul H., DDS
- Orthopedic Surgery
  Beard, David M., MD
  Johnson, Julie M., MD
  Lantz, Steven W., MD
  Sawardeker, Prasad J., MD
  Sehgal, Bantoo, MD
- Pathology
  Ortmeier, Thomas C., MD
  Roise, Douglas A., MD
- Pathology, Anatomy, Clinical Pathology
  Adloff, Vladimir, MD
  Rodgers-Rieger, Elena, MD
- Pediatrics
  Deoskar, Dhananjay S., MD
  Exo, Jennifer, DO
  Kooyer, Kurt W., MD
  Mutchler, Scott B., MD
  Nicklay-Catalan, Janice M., MD
- Physical Medicine and Rehabilitation
  Sollom, Dennis G., MD

Providers are subject to be added or terminated without notice.

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PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING PHYSICIANS

Essentia Health 32nd Avenue Clinic (cont.)

- Psychiatry, Neurology
  Christenson, Shaun K., MD
- Pulmonary Diseases
  Briggs, Michael S., MD
  Jerome, Peter S., MD
- Radiology
  Althoen, Morgan C., MD
  Arslanlar, Norman, DO
  Axmacher, Jessica A., MD
  Bullis, Brent R., MD
  Carlson, Annelisa M., MD
  Coursey, Richard L., MD
  Crandall, Benjamin, DO
  Crider, Mitchell H., MD
  Crowe, Christopher H., MD
  Delgado Almandoz, Josser, MD
  Donovan, Charles B., MD
  Doyscher, Mark W., MD
  Ehrenwald, Eduardo, MD
  Engstrom, Bjorn I., MD
  Farah, Nazih N., MD
  Fry, Stephen M., MD
  Gordon, Jeffery D., MD
  Gramith, Frederick C., MD
  Groebner, Nathan J., MD
  Hassell, Douglass S., MD
  Hite, Stephen H., MD
  Ibach, Thomas J., MD
  Inampudi, Subbarao, MD
  Kadkhodayan, Yasha, MD
  Kane, Jon P., MD
  Kang, Eul S., MD
  Kayfes, Mareve, MD
  Keszler, Jason L., DO
  Kurisko, Stanley D., MD
  Lee, Peter U., MD
  Matson, Thomas C., MD
  Mehling, Jason A., MD
  Mills, David J., MD
  Myhra-Bloom, Karla G., MD
  Mylrea, James M., MD
  Nobrega, John M., MD
  Oswood, Mark C., MD
  Parker, Robin, MD
  Parker, Trudi K., MD
  Peterson, Jeffrey J., MD
  Plunkett, Michael, MD
  Pollock, Robert A., MD

North Dakota (cont.)
Fargo (cont.)

Essentia Health 32nd Avenue Clinic (cont.)

- Radiology (continued)
  Quinones, Eduardo, MD
  Reardon, Scott T., MD
  Rust, Paul R., MD
  Sampson, Jerome M., MD
  Schumacher, Clark W., MD
  Shearer, Damon D., DO
  Sidney, Scott D., MD
  Steely, John W., MD
  Tillotson, Christopher L., MD
  Veldman, Sara B., MD
  Wright, Aaron D., MD
  Yost, Robert A., MD
- Sports Medicine
  Ostlie, Daniel K., MD
- Thoracic Surgery
  Ally, Saeed A., MD
  Heck, Christopher, MD
  Murphy, William, MD
  Stam, Marc, MD
- Urology
  Khan Galzie, Sardar Mohammad Farhan, MD
  Strinden, Steven P., MD

Essentia Health Hospital
3000 32nd Ave S
(701) 364-8000

- Emergency Medicine
  Beachy, Arden M., MD
  Burns, Joseph T., MD
  Hamilton, Tony J., DO
  Hunt, Daniel S., MD
  Sauter, Brian A., MD
  Schenck, Jason, MD
  Stowers, John C., MD
- Family Practice
  Baugh, John R., MD
  Howden, Richard L., MD
  Martin, Richard E., MD
- General Surgery
  Wasemiller, Paul S., MD
- Internal Medicine
  Hager, Jake R., MD
  Khanal, Binaya, MD

North Dakota (cont.)
Fargo (cont.)

Essentia Health South University Clinic
1702 University Dr S
(701) 364-3300

- Allergy
  Mante, Saakwa, MD
- Anesthesiology (MD)
  Sornson, Michael D., MD
- Dermatology
  Beehler, Amanda, MD
  Belknap, Burton S., MD
  Blankinship, Michael J., MD
  Kelly, Kimberly R., MD
  Ziegler, Rebecca, MD
- Family Practice
  Domm, Bruce L., MD
  Kuhlmann, Craig F., MD
  Lunde, Lara N., MD
  Rogers, Jerry P., MD
  Rohla, Richard A., MD
- Geriatrics
  Domm, Bruce L., MD
  Johnson, Walter S., MD
  Kempf, Thomas W., MD
  Rau, Keith D., MD
- Internal Medicine
  Briggs, Michael S., MD
  Gupta, Mahendra K., MD
  Gupta, Parul, MD
  Johnson, Walter S., MD
  Kempf, Thomas W., MD
  Kooyer, Kurt W., MD
  Link, David B., MD
  Matthees, Donald J., MD
  Rau, Keith D., MD
  Sheldon, Michael S., MD
  Sleckman, Joseph B., MD
- Obstetrics/Gynecology
  Domm, Bruce L., MD
  Kuhlmann, Craig F., MD
- Oncology
  Keating, John J., MD
  Mohammed Rafiyath, Shamudheen, MD
- Ophthalmology
  Danylkova, Nataliya, MD
  Keating, Anne M., MD
  Yongsmith, Hope R., MD
- Optometrist
  Metzger, Todd L., OD

Providers are subject to be added or terminated without notice.

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PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING PHYSICIANS

Essentia Health South University Clinic (cont.)

- Optometrist (continued)
  Scheel, Lori Y., OD
- Oral Surgery
  Iverson, Paul H., DDS
- Otology, Laryngology, Rhinology
  Acevedo, Jason L., MD
  Belizario, Francisco Y., MD
  Bruns, Alan D., MD
  Buell, Brad R., MD
  Tsen, David W., MD
- Pathology
  Ortmeier, Thomas C., MD
  Roise, Douglas A., MD
- Pathology, Anatomy, Clinical Pathology
  Adloff, Vladimir, MD
  Rodgers-Rieger, Elena, MD
- Pediatrics
  Clutter, David J., MD
  Exo, Jennifer, DO
  Houston, Sara, MD
  Jones, Jenifer E., MD
  Kleiman, Theodore W., MD
  Mullally, Jennifer L., MD
  Mutchler, Scott B., MD
  Praveen Kumar, Valiparambil B., MD
  Sukumaran, Anju P., MD
- Physical Medicine and Rehabilitation
  Sollom, Dennis G., MD
  Vijayalakshmi, Bangalore S., MD
- Podiatry, Surgical Chiropody
  Hofsommer, Lee A., DPM
  Olson, Bradley R., DPM
- Pulmonary Diseases
  Briggs, Michael S., MD
- Radiation Therapy
  Cooper, Mark C., MD
- Radiology
  Althoen, Morgan C., MD
  Axmacher, Jessica A., MD
  Buechler-Price, Joni, MD
  Carlson, Annelisa M., MD
  Keszler, Jason L., DO
  McNaney, David, MD
  Moore, Randy L., DO

Essentia Health South University Clinic (cont.)

- Rheumatology
  Azimian, Morteza, MD
  Sleckman, Joseph B., MD
- Sports Medicine
  Kuhlmann, Craig F., MD

Essentia Health West Acres Clinic
3902 13th Ave S
(701) 364-6600

- Dermatology
  Blankinship, Michael J., MD
- Emergency Medicine
  Regmi, Suman R., MD
  Sauter, Brian A., MD
- Family Practice
  Akkerman, Dave S., MD
  Aryal, Suima, MD
  Domm, Bruce L., MD
  Haugen, Joel R., MD
  Howden, Richard L., MD
  Jamsa Tollefson, Lisa J., MD
  Kuhlmann, Craig F., MD
  Laqua, Patricia L., MD
  Nelson, Kinsey B., MD
  Nelson, Susan K., MD
  Refsland, Bradley A., MD
  Regmi, Suman R., MD
  Rogers, Jerry P., MD
  Rohla, Richard A., MD
  Sakariya, Geetabahen A., MD
  Sikkink, Kari Rae, MD
  Sondreal, Philip S., MD
  Steinke, Emil B., MD
  Topley, Stuart R., MD
  Vetter, Richard T., MD
- General Surgery
  Harris, Scott S., MD
- Geriatrics
  Domm, Bruce L., MD
- Internal Medicine
  Kooyer, Kurt W., MD
  Luger, Patrick A., MD
- Neurology
  Christenson, Shaun K., MD
- Obstetrics/Gynecology
  Domm, Bruce L., MD
  Haugen, Joel R., MD
  Holm, Mary K., MD

Essentia Health West Acres Clinic (cont.)

- Orthopedic Surgery
  Haugen, Joel R., MD
- Pediatrics
  Houston, Sara, MD
  Jones, Jenifer E., MD
  Kleiman, Theodore W., MD
  Kooyer, Kurt W., MD
  Mullally, Jennifer L., MD

Eyecare Associates PC
3902 13th Ave SW
(701) 282-5880

- Optometrist
  Brookshire, Barbra B., OD
  Jangula, Jordan J., OD
  Melicher, Kevin, OD
  Wilner, Mason R., OD

Eyesite Family Eyecare
1695 43rd St S
(701) 235-3937

- Optometrist
  Levin, Daniel J., OD
  Malsom, Tracie L., OD
  Miller, Anna J., OD

Face & Jaw Surgery Center
4344 20th Ave S Ste 2
(701) 239-5969

- Oral Surgery
  Crago, Charles A., DMD
  Gray, Jonathan R., DDS
  Preisler, Scott A., DDS

Family Healthcare Center
301 NP Ave
(701) 271-3344

- Family Practice
  Espejo, Napoleon R., MD
  Gopi, Sreejith, MD
  Lenzmeier, Richard D., MD
- Optometrist
  Levin, Daniel J., OD
  Miller, Anna J., OD
  Ross, Eric M., OD

Providers are subject to be added or terminated without notice.

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PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING PHYSICIANS

North Dakota (cont.)
Fargo (cont.)

Fargo Cass Public Health
401 3rd Ave N
(701) 241-1383

- Obstetrics/Gynecology
  Christensen, Steffen P., MD

Fargo Gastroenterology & Hepatology Clinic, PC
1665 43 St S Ste 100
(701) 235-3050

- Gastroenterology
  Taheri, Arezoo, MD
- Internal Medicine
  Taheri, Arezoo, MD

Fargo Plastic Surgery PC
3280 20th St S
(701) 293-7408

- Plastic Surgery
  Sampson, John A., MD

Fercho Cataract & Eye Clinic
100 4th St S Ste 612
(701) 235-0561

- Ophthalmology
  Grosz, David E., MD
  Rodenbiker, Harold T., MD
- Optometrist
  Melicher, Paul R., OD

FM Endoscopy Center LLC
300 Main Ave Ste 205
(701) 200-4150

- Gastroenterology
  Nammour, Fadel E., MD
- Internal Medicine
  Ludwig, Rodney A., MD

Frisk, James, MD Ltd
2700 12th Ave SW Ste D
(701) 235-1924

- Otology, Laryngology, Rhinology
  Frisk, James L., MD

Gary E Johnson OD PC
3902 13th Ave S Ste 406
(701) 277-9555

- Optometrist
  Johnson, Gary E., OD

North Dakota (cont.)
Fargo (cont.)

Independent Family Doctors
1711 Gold Drive S #160
(701) 234-9400

- Family Practice
  Johnson, Steven R., MD
  Johnson, Therese A., MD
  Martin, Tracy J., MD
  Radke, Michelle M., MD

Independent Radiology Services
2829 University Dr S
Ste 104
(701) 271-1423

- Radiology
  Wosick, William F., MD

Institute For Low Back Care LLC
300 Main Ave Suite 212
(701) 297-0817

- Anesthesiology (MD)
  Sivanna, Panjini M., MD

Internal Medicine Associates
1707 Gold Dr S Ste 101
(701) 280-2033

- Internal Medicine
  Baumgardner, David P., MD
  Clemenson, Steven G., MD
  Hella, Brent M., MD
  Lillestol, Michael J., MD
  Ludwig, Rodney A., MD
  Odedra-Mistry, Bhanu, MD
  Yohe, Mark G., MD

Jed D Hillmer, OD, PLLC
101 10th St N Ste 120
(701) 239-9771

- Optometrist
  Hillmer, Jed, OD

Lamb Plastic Surgery Center, PC
1507 University Dr S
(701) 237-9592

- General Surgery
  Lamb, Donald R., MD
- Plastic Surgery
  Lamb, Donald R., MD

North Dakota (cont.)
Fargo (cont.)

Lighthouse Vision Clinic
3757 55th Ave S
(701) 630-5255

- Optometrist
  Ross, Eric M., OD

Lind, Jackson W, MD
1202 23 St S Ste 3
(701) 478-7887

- Psychiatry (MD/DO)
  Lind, Jackson W., MD

Mark Tufte OD PC dba Eyes On Broadway
311 Broadway N
(701) 356-3937

- Optometrist
  Tufte, Mark G., OD

Matthys, Gary, MD
2301 25th St S Suite I
(701) 241-9300

- Orthopedic Surgery
  Matthys, Gary, MD

McCulley, Melissa OD, PC
2553 Kirsten Lane
Ste 202
(701) 373-2020

- Optometrist
  McCulley, Melissa J., OD

Midwest Vision Centers
3051 25th St S
(701) 234-0766

- Optometrist
  Connelly, James B., OD
  Kensok, Shari L., OD

OMS Associates
300 Main Ave Ste 201
(701) 232-9565

- General Surgery
  Noffze, Michael J., MD
- Oral Surgery
  Noffze, Michael J., DDS

Opgrande, J. Donald, MD, PC
2829 S Univ Dr Ste 2
(701) 232-2848

- Hand Surgery
  Opgrande, J. Donald, MD

Providers are subject to be added or terminated without notice.

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PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING PHYSICIANS

Opgrande, J. Donald, MD, PC (cont.)
- Orthopedic Surgery
  Opgrande, J. Donald, MD

Orthopedic and Sport Medicine Specialists of Fargo, Ltd.
2829 S University Dr
Ste 202
(701) 478-0307
- Orthopedic Surgery
  Johnson, Philip Q., MD

Osgood Eyecare
4622 40th Ave S
(701) 356-5355
- Optometrist
  Larson, Jonathan D., OD

Pearle Vision
3232 13th Ave S
(701) 280-3000
- Optometrist
  Gunhus, Don W., OD
  Koeppe, Michael A., OD
  Mitzel-Dubois, Amy M., OD

Pediatric Arts Clinic, PC
2829 S Univ Dr Ste 101
(701) 478-4722
- Pediatrics
  Raghib, Ender G., MD

Plains Ear Nose Throat & Facial Plastic Surgery Inc
2700 12th Ave S
(701) 235-1924
- Otology, Laryngology, Rhinology
  Frisk, James L., MD
  Soine, Lesley A., MD

Plains Medical Clinic LLC
3290 20th St S
(701) 499-4800
- Family Practice
  Harris, Hoadley H., MD
  Schock, Joel F., MD

Plastic Surgery Institute, PC
3270 20th St S
(701) 293-7408
- General Surgery
  Abdullah, Ahmed, MD

Plastic Surgery Institute, PC (cont.)
- Plastic Surgery
  Abdullah, Ahmed, MD

Porter, William, MD
100 S 4th St Ste 608
(701) 235-0161
- Otology, Laryngology, Rhinology
  Porter, William C., MD

Prairie Oral Surgery
2585 23rd Ave S Ste A
(701) 478-4404
- Oral Surgery
  May, Edward F., DDS

Prairie St Johns
510 4th St S
(701) 476-7200
- Psychiatry (MD/DO)
  Akgul, Fetih, MD
  Anunobi, Echezona, MD
  Armstrong, Lacey L., MD
  Bronson, Natalya, MD
  Burtnett, Lawana M., MD
  Haliburton, James R., MD
  Hess, Douglas J., DO
  Jarvis, Julie O., DO
  Jordan, Natalie D., MD
  Kelly, Edward L., MD
  Mach, David J., DO
  Meany, Gavin P., MD
  Meek, Steven J., MD
  Meza, Eduardo E., MD
  Miller, Halbert B., MD
  Nadkarni, Nivedita S., MD
  Rauch, Harry B., MD
  Siemens, Charlotte A., MD
  Smith, Timothy A., MD
  Underwood, Amy K., MD
  Wichmann, Gerry-Lynn, MD
- Psychiatry, Neurology
  Vaca, Anthony M., MD

Precision Diagnostic Services Inc
4152 30th Ave S Ste 103
(701) 234-9667
- Internal Medicine
  Khosla, Seema, MD
- Pulmonary Diseases
  Khosla, Seema, MD

Psychiatry Networks
300 NP Ave Suite 101
(701) 478-6700
- Family Practice
  Fornal, Robert E., MD
- Psychiatry (MD/DO)
  Fornal, Robert E., MD
  Lopez, David J., MD

Rachel Ness MD PLLC
4141 31st Ave S Ste 103
(701) 478-7747
- Dermatology
  Ness, Rachel C., MD

Red River Women's Clinic
512 1st Ave N
(701) 298-9999
- Family Practice
  Eggleston, Kathryn L., MD
  Thorndike, Lori Lynn, DO

Retina Associates, PC
4642 Amber Valley Pkwy S
(701) 277-4699
- Internal Medicine
  Haynie, Gary D., MD
- Ophthalmology
  Haynie, Gary D., MD

Retina Consultants
2829 S Univ Dr Ste 204
(701) 293-9829
- Ophthalmology
  Johnson, Max R., MD
  Mason, Craig M., MD

Roger S Hogue MD PA dba Hogue Vein Institute
4133 30th Ave S Ste 101
(701) 232-8346
- Internal Medicine
  Dando, Carl F., MD

Sanford 1717 Medical Building
1717 S University Drive
(701) 234-2000
- Family Practice
  Wiisanen, Ronald E., MD
- General Surgery
  Fabian, Matthew W., DO
  Garcia, Luis A., MD

Providers are subject to be added or terminated without notice.

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PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING PHYSICIANS

Sanford 1717 Medical Building (cont.)

- General Surgery (continued)
  Monson, Timothy P., MD
- Ophthalmology
  Anderson, Steven, MD
  Atchison, Michelle, MD
  Jordan, Andrew A., MD
- Optometrist
  Gilbertson, Kimberly A., OD
  Kelly, Brendan, OD
- Psychiatry (MD/DO)
  Burd, Ronald M., MD

Sanford 1717 Medical Building
1717 South University Dr
(701) 234-2000

Grandhi, Anupama, DDS

- Family Practice
  Wiisanen, Ronald E., MD
- General Surgery
  Fabian, Matthew W., DO
  Garcia, Luis A., MD
  Monson, Timothy P., MD
- Ophthalmology
  Anderson, Steven, MD
  Atchison, Michelle, MD
  Jordan, Andrew A., MD
- Optometrist
  Gilbertson, Kimberly A., OD
  Kelly, Brendan, OD
- Oral Surgery
  Rubin, David, DDS
- Psychiatry (MD/DO)
  Burd, Ronald M., MD
  Mayfield Jorgensen, Michelle L., MD

Sanford 2801 Medical Building
2801 University Dr S
(701) 234-5673

- Neurology
  Faber, Kevin M., MD
- Plastic Surgery
  Antoniuk, Pamela, MD
  Keim, Jeffrey R., MD
  Schmidt Krings, Diane R., MD
- Psychiatry (MD/DO)
  Karaz, Samy, MD

Sanford 2801 Medical Building
2801 University Dr S
(701) 234-5673

- Internal Medicine
  Mashaqi, Saif, MD
- Neurology
  Faber, Kevin M., MD
- Pediatrics
  Setty, Arveity, MD
- Plastic Surgery
  Antoniuk, Pamela, MD
  Keim, Jeffrey R., MD
  Schmidt Krings, Diane R., MD
- Psychiatry (MD/DO)
  Karaz, Samy, MD

Sanford Broadway Clinic
801 Broadway North
(701) 234-2000

- Anesthesiology (MD)
  Berndt, Steven D., MD
  Daniels, Steven, MD
  Fisher, Cristina, MD
  Gaba, Vijay, MD
  Gessner, Maxwell W., MD
  Goswami, Arundhati, MD
  Harris, Brian, MD
  Hass, Brian, MD
  Indergaard, Patrick J., MD
  Raad, Robert, MD
  Vandrovec, Chad, MD
  Williams, Elisa, DO
- Cardiovascular Disease
  Desai, Monali, MD
  Farkas, Susan I., MD
  Haldis, Thomas A., DO
  Kohlman-Petrick, Joellen, MD
  Kouba, Craig R., MD
  Manjunath, Heeraimangalore S., MD
  McDowell, Christina, MD
  Otero-Cagide, Manuel R., MD
  Sarji, Rawa, DO
- Dermatology
  Ausmus, Gregory, MD
- Emergency Medicine
  Bakke, Andrew, MD
  Bilstad, Paul R., MD
  Bjerke, Gregory J., MD
  Drage, David C., MD

Sanford Broadway Clinic (cont.)

- Emergency Medicine (continued)
  Griffin, David M., MD
  Grosz, Kenneth, MD
  Hintz, Warren J., MD
  Hushka, Douglas J., MD
  Klosterman, Bruce J., MD
  Lako-Adamson, Heidi, MD
  Madsen, Shane, MD
  Parks, J Scott, MD
  Schaff, Troy C., MD
  Sepe, Frank J., MD
  Teske, Owen Garth, MD
  Tiongson, Jeffrey, MD
  Vigesaa, Gregory, DO
  Zeitouni, Mohammed O., MD
- Endocrinology
  Kenien, Alan G., MD
- Family Practice
  Hushka, Douglas J., MD
  Klosterman, Bruce J., MD
- Gastroenterology
  Blaufuss, Mark C., MD
  Blonsky, Jeffery, MD
  McNelis, Joseph, MD
  Meidinger, Ross, MD
  Monticello, Anthony, MD
  Nalluri, Murali, MD
  Okoh, Emuejevoke, MD
  Starley, Brad Q., MD
  Womeldorph, Craig, DO
  Zagnoon, Abbas, MD
- General Practice
  Grimm, Carol J., MD
  Vilenski, Leonid, MD
- General Surgery
  Aaland, Mary, MD
  Bouton, Michael, MD
  Briggs, Steven E., MD
  Dyke, Cornelius, MD
  Fabian, Matthew W., DO
  Fetner, Erik, MD
  Garcia, Luis A., MD
  Gasevic, Enej, MD
  Kroetsch, Corey, MD
  Kubalak, Gary M., MD
  McNeil, Jeffrey, MD
  Mistry, Bhargav M., MD
  Monson, Timothy P., MD
  Stam, Marc, MD

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING PHYSICIANS

Sanford Broadway Clinic (cont.)

- General Surgery (continued)
  Sticca, Robert P., MD
  Stover, David A., MD
  Thambi-Pillai, Thavam, MD
  Traynor, Michael D., MD
  Wagner, James S., MD
- Genetics
  McGrann, Pamela, MD
- Geriatrics
  Blehm, Julie A., MD
  Ketterling, Rhonda L., MD
- Infectious Diseases
  Brito, Maximo, MD
  Carson, Paul J., MD
  Guerrero, Dubert, MD
  Lo, Tze Shien S., MD
  Mariani, Paul G., MD
  Tight, Robert R., MD
- Internal Medicine
  Abouchala, Nabil, MD
  Alberto, Neville M., MD
  Alkhalaf, Abdulhamid, MD
  Alonto, Augusto M., MD
  Alonto, Eileen A., MD
  Aravapalli, Aruna, MD
  Arora, Kanwardeep, MD
  Barun, Bipin, MD
  Beard, Debra A., MD
  Bhora, Milapchand A., MD
  Bhunia, Kaushik, MD
  Bjerke, Gregory J., MD
  Blehm, Julie A., MD
  Carson, Paul J., MD
  Chavour, Sudhir K., MD
  Farkas, Susan I., MD
  Hall, Katherine S., MD
  Hao, Weimin, MD
  Jalil, Sajid, MD
  Jasti, Anil, MD
  Ketterling, Rhonda L., MD
  Khan, Hasrat, MD
  Kherallah, Mazen, MD
  Kouba, Craig R., MD
  Lagler, Regis, MD
  Levitski-Heikkila, Teresa V., MD
  Mahale, Adit, MD
  Manjunath, Heeraimangalore S., MD
  Newman, William P., MD

North Dakota (cont.)
Fargo (cont.)

Sanford Broadway Clinic (cont.)

- Internal Medicine (continued)
  Potluri, Rajendra C., MD
  Pyae, Nyan, MD
  Sanaullah, Mohamed, MD
  Shahira, Eram, MD
  Shanaah, Almothana M., MD
  Starley, Brad Q., MD
  Talha, Muhammad, MD
  Talluri, Krishna, MD
  Theige, David J., MD
  Thompson, Jody, MD
  Tieszen, Mark J., MD
  Tight, Robert R., MD
  Toumeh, Mohamed, MD
  Vilenski, Leonid, MD
  Volk, James A., MD
  Watkins, Jeffrey, MD
  Womeldorph, Craig, DO
  Zeitouni, Mohammed O., MD
- Nephrology
  Chemiti, Gopal K., MD
  Levitski-Heikkila, Teresa V., MD
  Louvar, Daniel, MD
  Mahale, Adit, MD
- Nuclear Medicine
  Fisher, Mark F., MD
  Schneider, Mark R., MD
  Stallman, Donald J., MD
- Obstetrics/Gynecology
  Bell, Maria, MD
  Boyle, Jeffrey G., MD
  Bro, Walter C., MD
  Keup, Christine, MD
  McCann, Michelle, MD
  McNamara, Michael F., DO
  Mickelson, Margaret T., MD
  Siegel, Eric, MD
  Tompkins, Rebekah, MD
  Van Eerden, Peter, MD
- Orthopedic Surgery
  Matthys, Gary, MD
- Otology, Laryngology, Rhinology
  Elliott, Clark, MD
  Larson, Daniel, MD
  Nagle, James W., MD
  Raisen, Jay, MD
- Pathology
  Baldwin, Jerry J., MD
  Grimm, Terrence E., MD

North Dakota (cont.)
Fargo (cont.)

Sanford Broadway Clinic (cont.)

- Pathology (continued)
  Lessard, Julie L., MD
  Marsh, Julie A., MD
- Pathology, Anatomy, Clinical Pathology
  Adloff, Vladimir, MD
  Azam, Arif, MD
  Lappinga, Paul, MD
  Peng, Hong Qi, MD
  Wood, Angela, MD
- Pediatrics
  Altaf, Waseem, MD
  Bass, John, MD
  Bellas, William, DO
  Blaufuss, Mark C., MD
  Casas-Melley, Adela, MD
  Dorostkar, Parvin, MD
  Gheen, Kenneth, MD
  Horner, Justin, MD
  Kenien, Alan G., MD
  Kochilas, Lazaros, MD
  Miller, Ron H., MD
  Mohamed, Mohamed, MD
  Nelson, Stephen N., MD
  Nicklay-Catalan, Janice M., MD
  Paschall, John, MD
  Sapiega, Vytautas, MD
  Sapiegiene, Lina, MD
  Smith, Jo-Ann, MD
  Stephens, Scott, DO
  Storm, Waldemar G., MD
  Thurlow, Brenda K., MD
  Tinguely, Stephen J., MD
  Trefz, Matthew, MD
  Yoe, Norbert, MD
- Peripheral Vascular Diseases Or Surgery
  Bakken, Andrew, MD
  Kubalak, Gary M., MD
  Reil, Todd, MD
- Physical Medicine and Rehabilitation
  Fillmore, Scott, MD
  Goldstein, Heidi J., MD
  Klava, William N., MD
  Lindquist, Paul J., MD
- Plastic Surgery
  Antoniuk, Pamela, MD
  Schmidt Krings, Diane R., MD

Providers are subject to be added or terminated without notice.

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PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING PHYSICIANS

Sanford Broadway Clinic (cont.)

- Psychiatry (MD/DO)
  Haider, Naveed, MD
  Olson, Robert J., MD
- Pulmonary Diseases
  Adhami, Naeem, MD
  Hung, Robert, MD
  Jamil, Mouhamad G., MD
  Lababidi, Hani, MD
  Schilero, Gregory, MD
  Zeitouni, Mohammed O., MD
- Radiology
  Asheim, Jason, MD
  Asleson, Bruce A., MD
  Asleson, John, MD
  Austin, William R., MD
  Carson, Janine L., MD
  Catalan, Richard, MD
  Dahl, Benjamin, MD
  Fish, Jonathan, MD
  Fisher, Mark F., MD
  Garrity, Stephen P., MD
  Goldenberg, Jacob A., MD
  Kallenbach, Christopher, MD
  Karlins, Nathaniel L., MD
  Kearns, Martha, MD
  Khaghany, Kamran, MD
  Licht, Lawrence H., MD
  Machayya, Jon, MD
  Marsden, Richard J., MD
  Maurer, James W., MD
  Mickelson, Daniel G., MD
  Mitchell, Steven L., MD
  Ng, Su-Ann, MD
  Promersberger, Eric R., MD
  Reynolds, Ryan, MD
  Schneider, Mark R., MD
  Shook, Robert J., MD
  Stallman, Donald J., MD
  Teigen, Corey L., MD
  Thurgood, Michael, MD
  Weilke, Florian A., MD
  Weiner, Michael J., MD
- Thoracic Surgery
  Jolly, Shashank, MD
  McNeil, Jeffrey, MD
  Newman, Roxanne V., MD
- Urology
  Garrels, Kristina, MD
  Nguyen, Carvell T., MD

Sanford Broadway Clinic (cont.)

- Urology (continued)
  Noah, Thomas A., MD
  Sawchuk, Theodore J., MD
  Segal, Michael D., MD
  Thomas, Anil, MD
  Toni, Conrad, MD
  Williams, Brent, MD

Sanford Broadway Clinic
801 Broadway North
(701) 234-2000

- Anesthesiology (MD)
  Berndt, Steven D., MD
  Brunsvold, Robert A., MD
  Calone, John, MD
  Colon-Dejesus, Manuel, MD
  Daniels, Steven, MD
  Fisher, Cristina, MD
  Gaba, Vijay, MD
  Gessner, Maxwell W., MD
  Goswami, Arundhati, MD
  Habli, Nader, MD
  Harris, Brian, MD
  Hass, Brian, MD
  Hong, Back, MD
  Indergaard, Patrick J., MD
  Moussa, Adib, MD
  Onuora, Tochukwu, MD
  Parves, Shah, MD
  Pezhman, Eric, MD
  Raad, Robert, MD
  Rashid, Karim, MD
  Vandrovec, Chad, MD
  Williams, Elisa, DO
- Cardiovascular Disease
  Boatman, James, MD
  Clardy, David J., MD
  Desai, Monali, MD
  Dowsley, Taylor, MD
  Farkas, Susan I., MD
  Haldis, Thomas A., DO
  Kohlman-Petrick, Joellen, MD
  Kouba, Craig R., MD
  Manjunath, Heeraimangalore S., MD
  McDowell, Christina, MD
  Otero-Cagide, Manuel R., MD
  Pierce, Christopher L., MD
  Sarji, Rawa, DO
  Shamshad, Faisal, MD

Sanford Broadway Clinic (cont.)

- Cardiovascular Disease (continued)
  Wynne, Joshua, MD
- Emergency Medicine
  Agema, Ryan, MD
  Bakke, Andrew, MD
  Bilstad, Paul R., MD
  Bjerke, Gregory J., MD
  Brudevold, Jeremy, DO
  Drage, David C., MD
  Glynn, Alicia, MD
  Griffin, David M., MD
  Grosz, Kenneth, MD
  Hintz, Warren J., MD
  Hushka, Douglas J., MD
  Jarandeh, Eric, MD
  Klosterman, Bruce J., MD
  Lako-Adamson, Heidi, MD
  Madsen, Shane, MD
  Parks, J Scott, MD
  Schaff, Troy C., MD
  Sepe, Frank J., MD
  Teske, Owen Garth, MD
  Tiongson, Jeffrey, MD
  Vigesaa, Gregory, DO
  Wiest, Eric, MD
  Zeitouni, Mohammed O., MD
- Endocrinology
  Kenien, Alan G., MD
- Family Practice
  Beauclair, John G., MD
  Hushka, Douglas J., MD
  Kaster, Andrea L., MD
  Klosterman, Bruce J., MD
  Martino, Robert M., MD
- Gastroenterology
  Anand, Oksana, MD
  Blaufuss, Mark C., MD
  Blonsky, Jeffery, MD
  Lamb, Paul, MD
  McNelis, Joseph, MD
  Meidinger, Ross, MD
  Monticello, Anthony, MD
  Nalluri, Murali, MD
  Nammour, Fadel E., MD
  Nelson, Austin, MD
  Okoh, Emuejevoke, MD
  Paul, Navin, MD
  Starley, Brad Q., MD

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Sanford Broadway Clinic (cont.)

- Gastroenterology (continued)
  Womeldorph, Craig, DO
  Zagnoon, Abbas, MD
- General Practice
  Grimm, Carol J., MD
  Vilenski, Leonid, MD
- General Surgery
  Aaland, Mary, MD
  Ahmeti, Mentor, MD
  Albrecht, Warren E., DO
  Bouton, Michael, MD
  Briggs, Steven E., MD
  Dyke, Cornelius, MD
  Fabian, Matthew W., DO
  Fetner, Erik, MD
  Garcia, Luis A., MD
  Gasevic, Enej, MD
  Kroetsch, Corey, MD
  Kubalak, Gary M., MD
  Macgregor, Jay, MD
  McNeil, Jeffrey, MD
  Mistry, Bhargav M., MD
  Monson, Timothy P., MD
  Stam, Marc, MD
  Sticca, Robert P., MD
  Stover, David A., MD
  Thambi-Pillai, Thavam, MD
  Traynor, Michael D., MD
  Wagner, James S., MD
  Winton, Barry, MD
  Zreik, Khaled S., MD
- Genetics
  Casas, Kari, MD
  McGrann, Pamela, MD
- Geriatrics
  Blehm, Julie A., MD
  Ketterling, Rhonda L., MD
- Infectious Diseases
  Brito, Maximo, MD
  Carson, Paul J., MD
  Guerrero, Dubert, MD
  Lo, Tze Shien S., MD
  Mariani, Paul G., MD
  Nagpal, Avish, MD
  Sinclair, Gary, MD
  Tight, Robert R., MD
- Internal Medicine
  Abouchala, Nabil, MD
  Al Hallak, Mohammed, MD

Sanford Broadway Clinic (cont.)

- Internal Medicine (continued)
  Alberto, Neville M., MD
  Alkhalaf, Abdulhamid, MD
  Alonto, Augusto M., MD
  Alonto, Eileen A., MD
  Aravapalli, Aruna, MD
  Arora, Kanwardeep, MD
  Bande, Dinesh, MD
  Barun, Bipin, MD
  Beard, Debra A., MD
  Bhatta, Puspa, MD
  Bhattaral, Jaya, MD
  Bhora, Milapchand A., MD
  Bhunia, Kaushik, MD
  Bjerke, Gregory J., MD
  Blehm, Julie A., MD
  Briggs, Jill, MD
  Carey, Jantey, MD
  Carson, Paul J., MD
  Chavour, Sudhir K., MD
  Clardy, David J., MD
  Farkas, Susan I., MD
  Hall, Katherine S., MD
  Hall, Nathaniel, MD
  Hao, Weimin, MD
  Hess, April, MD
  Jalil, Sajid, MD
  Jasti, Anil, MD
  Ketterling, Rhonda L., MD
  Khan, Hasrat, MD
  Kherallah, Mazen, MD
  Kouba, Craig R., MD
  Ladwig, John W., MD
  Lagler, Regis, MD
  Lamb, Paul, MD
  Levitski-Heikkila, Teresa V., MD
  Li, Hung-Kei, MD
  Machani, Sathyanarayana, MD
  Mahale, Adit, MD
  Manjunath, Heeraimangalore S., MD
  Mannuru, Devendranath, MD
  Nammour, Fadel E., MD
  Nelson, Austin, MD
  Newman, William P., MD
  Paladugu, Gopikrishna, MD
  Pitts, Bruce P., MD
  Potluri, Rajendra C., MD
  Pyae, Nyan, MD

Sanford Broadway Clinic (cont.)

- Internal Medicine (continued)
  Sanaullah, Mohamed, MD
  Sanda, Janelle C., MD
  See, Jay K., MD
  Shahira, Eram, MD
  Shamshad, Faisal, MD
  Shanaah, Almothana M., MD
  Sheldon, Peggy A., MD
  Shrestha, Alok, MD
  Sinclair, Gary, MD
  Starley, Brad Q., MD
  Starosta, Vitaliy, MD
  Talha, Muhammad, MD
  Talluri, Krishna, MD
  Theige, David J., MD
  Thompson, Jody, MD
  Tieszen, Mark J., MD
  Tight, Robert R., MD
  Toumeh, Mohamed, MD
  Twedt, Heidi L., MD
  Vilenski, Leonid, MD
  Volk, James A., MD
  Watkins, Jeffrey, MD
  Wiisanen, Matthew, MD
  Wilke, Russell, MD
  Womeldorph, Craig, DO
  Zeitouni, Mohammed O., MD
- Nephrology
  Chemiti, Gopal K., MD
  Levitski-Heikkila, Teresa V., MD
  Louvar, Daniel, MD
  Mahale, Adit, MD
  Phadke, Gautam, MD
- Nuclear Medicine
  Fisher, Mark F., MD
  Stallman, Donald J., MD
- Obstetrics/Gynecology
  Bell, Maria, MD
  Boyle, Jeffrey G., MD
  Bro, Walter C., MD
  Keup, Christine, MD
  Lesteberg, Keith G., MD
  McCann, Michelle, MD
  McNamara, Michael F., DO
  Mickelson, Margaret T., MD
  Perkerewicz, Jedidiah, MD
  Siegel, Eric, MD
  Tompkins, Rebekah, MD
  Van Eerden, Peter, MD

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Sanford Broadway Clinic (cont.)

- Orthopedic Surgery
  Matthys, Gary, MD
- Otology, Laryngology, Rhinology
  Driskill, Brent, MD
  Elliott, Clark, MD
  Gasser, Charles R., MD
  Larson, Daniel, MD
  Lee, John, MD
  Nagle, James W., MD
  Raisen, Jay, MD
  Ryan, Jesse, MD
  Shami, Halla, MD
  Sirotnak, John J., MD
  Westbrook, Benjamin, MD
- Pathology
  Baldwin, Jerry J., MD
  Grimm, Terrence E., MD
  Lessard, Julie L., MD
  Marsh, Julie A., MD
- Pathology, Anatomy, Clinical Pathology
  Bing, Zhanyong, MD
  Lappinga, Paul, MD
  Wood, Angela, MD
- Pediatrics
  Altaf, Waseem, MD
  Bass, John, MD
  Bellas, William, DO
  Blaufuss, Mark C., MD
  Casas, Luis, MD
  Casas-Melley, Adela, MD
  Davis Keppen, Laura, MD
  Decock, Christopher, MD
  Dorostkar, Parvin, MD
  Gheen, Kenneth, MD
  Horner, Justin, MD
  Jarandeh, Eric, MD
  Kenien, Alan G., MD
  Kochilas, Lazaros, MD
  Mannheimer, Alan, MD
  Mauriello, Clifford, MD
  Miller, Ron H., MD
  Mohamed, Mohamed, MD
  Nelson, Stephen N., MD
  Nicklay-Catalan, Janice M., MD
  Paschall, John, MD
  Sanders, John, MD
  Sapiega, Vytautas, MD
  Sapiegiene, Lina, MD

North Dakota (cont.)
Fargo (cont.)

Sanford Broadway Clinic (cont.)

- Pediatrics (continued)
  Smith, Jo-Ann, MD
  Stephens, Scott, DO
  Storm, Waldemar G., MD
  Thurlow, Brenda K., MD
  Tinguely, Stephen J., MD
  Trefz, Matthew, MD
  Wang, Jenny, MD
  Yoe, Norbert, MD
- Peripheral Vascular Diseases Or Surgery
  Bakken, Andrew, MD
  Kubalak, Gary M., MD
  Reil, Todd, MD
- Physical Medicine and Rehabilitation
  Fillmore, Scott, MD
  Goldstein, Heidi J., MD
  Klava, William N., MD
  Lindquist, Paul J., MD
- Plastic Surgery
  Antoniuk, Pamela, MD
  Schmidt Krings, Diane R., MD
- Podiatry, Surgical Chiropody
  Arness, Richard E., DPM
  Cullen, Nicole, DPM
- Psychiatry (MD/DO)
  Haider, Naveed, MD
  Kohoutek, Bradley W., MD
  Olson, Robert J., MD
  Tavakoli, Sirpa, MD
- Pulmonary Diseases
  Adhami, Naeem, MD
  Hung, Robert, MD
  Jamil, Mouhamad G., MD
  Johnson, Kara, MD
  Lababidi, Hani, MD
  Schilero, Gregory, MD
  Zeitouni, Mohammed O., MD
- Radiology
  Anderson, Seth, DO
  Asheim, Jason, MD
  Biegler, Peter, MD
  Carson, Janine L., MD
  Catalan, Richard, MD
  Dahl, Benjamin, MD
  Fisher, Mark F., MD
  Garrity, Stephen P., MD
  Goldenberg, Jacob A., MD

North Dakota (cont.)
Fargo (cont.)

Sanford Broadway Clinic (cont.)

- Radiology (continued)
  Kallenbach, Christopher, MD
  Karlins, Nathaniel L., MD
  Kearns, Martha, MD
  Licht, Lawrence H., MD
  Machayya, Jon, MD
  Marsden, Richard J., MD
  Maurer, James W., MD
  Mickelson, Daniel G., MD
  Mitchell, Steven L., MD
  Ng, Su-Ann, MD
  Promersberger, Eric R., MD
  Reynolds, Ryan, MD
  Shook, Robert J., MD
  Stallman, Donald J., MD
  Teigen, Corey L., MD
  Weilke, Florian A., MD
  Weiner, Michael J., MD
- Thoracic Surgery
  Jolly, Shashank, MD
  McNeil, Jeffrey, MD
  Newman, Roxanne V., MD
  Winton, Barry, MD
- Urology
  Eeg, Kurt, MD
  Garrels, Kristina, MD
  Heshmat, Samy, MD
  McAdams, Paul, MD
  Nguyen, Carvell T., MD
  Noah, Thomas A., MD
  Sawchuk, Theodore J., MD
  Segal, Michael D., MD
  Thomas, Anil, MD
  Toni, Conrad, MD
  Williams, Brent, MD

Sanford Broadway Medical Building
736 Broadway
(701) 234-2000

- Infectious Diseases
  Mariani, Paul G., MD
- Internal Medicine
  Mariani, Paul G., MD
- Physical Medicine and Rehabilitation
  Fillmore, Scott, MD

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Sanford Broadway Medical Building
736 Broadway N
(701) 234-2000

- General Surgery
  Mistry, Bhargav M., MD
- Infectious Diseases
  Carson, Paul J., MD
  Guerrero, Dubert, MD
  Mariani, Paul G., MD
- Internal Medicine
  Alonto, Augusto M., MD
  Carson, Paul J., MD
  Levitski-Heikkila, Teresa V., MD
  Mahale, Adit, MD
- Nephrology
  Chemiti, Gopal K., MD
  Levitski-Heikkila, Teresa V., MD
  Louvar, Daniel, MD
  Mahale, Adit, MD
- Physical Medicine and Rehabilitation
  Fillmore, Scott, MD
  Goldstein, Heidi J., MD
  Klava, William N., MD

Sanford Childrens Southwest Clinic
2701 13th Ave S
(701) 234-3600

- Pediatrics
  Bakke, Rebecca, MD
  Bentz, Barbara A., MD
  Gunderson, Aaron C., MD
  Hanson, Stephanie, MD
  Horner, Melissa, MD
  Hutchison, William, MD
  Jost, Aaron, MD
  Kantak, Sunita A., MD
  Krasniewska, Lidia D., MD
  Kunkel, Melissa, MD
  Kvistad, Bonnie, MD
  Lewis, David S., MD
  Lien, Sarah J., MD
  Lucht, Kamilla L., MD
  Mausbach, Thomas W., MD
  Miller, Ron H., MD
  Newman, Tracie, MD
  Sanders, John, MD
  Tiongson, Christopher, MD
  Welle, Patrick J., MD
  Weller, Maria L., MD

Sanford Childrens Southwest Clinic (cont.)

- Psychiatry (MD/DO)
  Hanisch, Stefanie U., MD
  Kjelstrup, Diane, MD
  Roembach, Jeanine L., MD
- Radiology
  Asheim, Jason, MD

Sanford Childrens Southwest Clinic
2701 13th Ave S
(701) 234-3600

- Pediatrics
  Bakke, Rebecca, MD
  Bentz, Barbara A., MD
  Gunderson, Aaron C., MD
  Hanson, Stephanie, MD
  Horner, Melissa, MD
  Hutchison, William, MD
  Jost, Aaron, MD
  Kantak, Sunita A., MD
  Kenien Erpelding, Julie, MD
  Krasniewska, Lidia D., MD
  Kunkel, Melissa, MD
  Kvistad, Bonnie, MD
  Lewis, David S., MD
  Lien, Sarah J., MD
  Lucht, Kamilla L., MD
  Mausbach, Thomas W., MD
  Miller, Ron H., MD
  Newman, Tracie, MD
  Sanders, John, MD
  Setty, Arveity, MD
  Thurlow, Brenda K., MD
  Tiongson, Christopher, MD
  Welle, Patrick J., MD
  Weller, Maria L., MD
- Psychiatry (MD/DO)
  Hanisch, Stefanie U., MD
  Kjelstrup, Diane, MD
  Roembach, Jeanine L., MD

Sanford Clinic Internal Medicine At Family Wellness
2960 Seter Parkway
(701) 234-8800

- Geriatrics
  Blehm, Julie A., MD
- Internal Medicine
  Blehm, Julie A., MD
  Raum, Jennifer, MD

Sanford Dermatology & Laser Clinic
4656 40th Ave S
(701) 234-8860

- Dermatology
  Flach, David B., MD
  Holzwarth, Ryan L., MD
  Khan, Yulia, MD
  Maingi, Chetan, MD
  Matzke, Thomas, MD

Sanford Dermatology & Laser Clinic
4656 40th Ave S
(701) 234-8860

- Dermatology
  Flach, David B., MD
  Holzwarth, Ryan L., MD
  Khan, Yulia, MD
  Maingi, Chetan, MD
  Matzke, Thomas, MD

Sanford Dialysis Fargo
2801 University Drive S
(701) 234-8400

- Nephrology
  Chemiti, Gopal K., MD
  Mahale, Adit, MD

Sanford Health Occupational Medicine Clinic
3838 12th Ave N
(701) 839-5902

- Emergency Medicine
  Blanchard, Joel H., MD
- Family Practice
  Blanchard, Joel H., MD

Sanford Health Occupational Medicine Clinic
3838 12th Ave N
(701) 234-4700

- Emergency Medicine
  Mickelson, John G., DO
- Family Practice
  Beauclair, John G., MD
  Martino, Robert M., MD
  Mickelson, John G., DO
- General Practice
  Koski, Charles G., MD
- Orthopedic Surgery
  Robertson, Christopher, MD

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PARTICIPATING PHYSICIANS

Sanford Health Occupational Medicine Clinic
3838 12th Ave N
(701) 234-4700

- Orthopedic Surgery
  Piatt, Bruce E., MD

Sanford Neuroscience Clinic
700 1st Ave S
(701) 234-4036

- Neurological Surgery
  Amin, Beejal, MD
  Eickman, John, MD
  Hutchison, John W., MD
  Jones, Moses, MD
  Lindley, Timothy, MD
  Mattingly, Thomas, MD
  Middleton, Troy, MD
  Rahhal, Ryan, MD
- Neurology
  Bailly, Richard C., MD
  Caillier, Rebecca, MD
  Diamond, Amanda, MD
  Eickman, Kara, MD
  Faber, Kevin M., MD
  Harlow, Tanya, MD
  Knutson, Cynthia M., MD
  Meyerson, Rebecca, MD
  Scarberry, Susan L., MD
  Venkataramana, Anita, MD
- Radiology
  Asheim, Jason, MD

Sanford Neuroscience Clinic
700 1st Ave S
(701) 234-4036

- Neurological Surgery
  Amin, Beejal, MD
  Eickman, John, MD
  Hutchison, John W., MD
  Jackson, Adam, MD
  Jones, Moses, MD
  Li, Maria S., MD
  Lindley, Timothy, MD
  Mattingly, Thomas, MD
  Middleton, Troy, MD
  Rahhal, Ryan, MD
  Zellem, Ronald T., MD
- Neurology
  Bailly, Richard C., MD
  Caillier, Rebecca, MD

Sanford Neuroscience Clinic (cont.)

- Neurology (continued)
  Diamond, Amanda, MD
  Duffy, Kristina, MD
  Eickman, Kara, MD
  Faber, Kevin M., MD
  Harlow, Tanya, MD
  Kim, Duk H., MD
  Knutson, Cynthia M., MD
  Lou, Jau-Shin, MD
  Meyerson, Rebecca, MD
  Muntean, Eugeniu, MD
  Samaraweera, Ravinda, MD
  Scarberry, Susan L., MD
  Smigrodzki, Rafal M., MD
  Venkataramana, Anita, MD
- Psychiatry (MD/DO)
  Tomb, David, MD

Sanford North Fargo Clinic
2601 N Broadway
(701) 234-2900

- Family Practice
  Card, Charlene C., MD
  Knutson Bueling, Robyn, MD
- Radiology
  Asheim, Jason, MD
- Sports Medicine
  Knutson Bueling, Robyn, MD

Sanford North Fargo Clinic
2601 Broadway N
(701) 234-2900

- Family Practice
  Bauer-Olson, Cheryl, DO
  Card, Charlene C., MD
  Gibbs, Karyssa, MD
  Knutson Bueling, Robyn, MD
  Myrmoe, Jason, MD
- Sports Medicine
  Knutson Bueling, Robyn, MD

Sanford Open MRI
2829 South University Dr
(701) 234-7100

- Radiology
  Asheim, Jason, MD
  Asleson, John, MD
  Austin, William R., MD
  Biegler, Peter, MD
  Catalan, Richard, MD

Sanford Open MRI (cont.)

- Radiology (continued)
  Dahl, Benjamin, MD
  Fish, Jonathan, MD
  Fisher, Mark F., MD
  Garrity, Stephen P., MD
  Kallenbach, Christopher, MD
  Karlins, Nathaniel L., MD
  Kearns, Martha, MD
  Khaghany, Kamran, MD
  Licht, Lawrence H., MD
  Machayya, Jon, MD
  Mickelson, Daniel G., MD
  Mitchell, Steven L., MD
  Ng, Su-Ann, MD
  Promersberger, Eric R., MD
  Reynolds, Ryan, MD
  Shook, Robert J., MD
  Stallman, Donald J., MD
  Weilke, Florian A., MD
  Weiner, Michael J., MD

Sanford Orthopedics Sports Medicine
2301 25th St S Ste A
(701) 237-9712

- General Surgery
  Bailey, David A., MD
- Hand Surgery
  Bailey, David A., MD
  Erpelding, Jason, MD
- Orthopedic Surgery
  Askew, R Mark, MD
  Berglund, Howard T., MD
  Dahl, Kevin, MD
  Friederichs, Matthew G., MD
  Haft, Geoffrey, MD
  Hvidston, Andrew J., MD
  Lundeen, Mark A., MD
  Nelsen, Matthew J., MD
  Noonan, Benjamin, MD
  Norberg, Jon D., MD
  Orson, Gregory G., MD
  Prochaska, Vern, MD
  Robertson, Christopher, MD
  Stavenger, Jeffrey P., MD
  Wiest, David L., MD
- Radiology
  Marsden, Richard J., MD

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Sanford Orthopedics Sports Medicine (cont.)
- Sports Medicine
  Lystad, Jeffrey K., MD

Sanford Orthopedics Sports Medicine
2301 S 25th St Ste A
(701) 237-9712

- General Surgery
  Bailey, David A., MD
- Hand Surgery
  Bailey, David A., MD
  Erpelding, Jason, MD
  Gibbs, Randolph, MD
- Orthopedic Surgery
  Askew, R Mark, MD
  Berglund, Howard T., MD
  Brown, Anthony, MD
  Dahl, Kevin, MD
  Friederichs, Matthew G., MD
  Haft, Geoffrey, MD
  Hvidston, Andrew J., MD
  Lundeen, Mark A., MD
  Nelsen, Matthew J., MD
  Noonan, Benjamin, MD
  Norberg, Jon D., MD
  Orson, Gregory G., MD
  Piatt, Bruce E., MD
  Prochaska, Vern, MD
  Robertson, Christopher, MD
  Stavenger, Jeffrey P., MD
  Wiest, David L., MD
- Radiology
  Asheim, Jason, MD
- Sports Medicine
  Lystad, Jeffrey K., MD

Sanford Professional Building
100 4th St S
(701) 234-3100

- Family Practice
  Glunberg, Steven K., MD
  Graff, Arne, MD
- Psychiatry (MD/DO)
  Burd, Ronald M., MD
  Fleissner, Rachel M., MD
  Gaffrey, Jane, DO
  Goyal, Harish, MD
  Haider, Naveed, MD
  Hanisch, Stefanie U., MD

Sanford Professional Building (cont.)
- Psychiatry (MD/DO) (continued)
  Hund, Morris A., MD
  Kjelstrup, Diane, MD
  Leon, Zelko, MD
  Mitchell, James E., MD
  Roembach, Jeanine L., MD
  Seicarescu, Cristina, MD
  Swensen, Eric C., MD

Sanford Professional Building
100 4th St S
(701) 234-3100

- Family Practice
  Glunberg, Steven K., MD
  Graff, Arne, MD
- Internal Medicine
  Mashaqi, Saif, MD
- Pediatrics
  Decock, Christopher, MD
- Psychiatry (MD/DO)
  Allick, Albert, MD
  Burd, Ronald M., MD
  Dennison, Evelyn, MD
  Eason, Phyllis, MD
  Fleissner, Rachel M., MD
  Gaffrey, Jane, DO
  Goyal, Harish, MD
  Haider, Naveed, MD
  Hanisch, Stefanie U., MD
  Hund, Morris A., MD
  Kjelstrup, Diane, MD
  Kohoutek, Bradley W., MD
  Leon, Zelko, MD
  Mitchell, James E., MD
  Olson, Robert J., MD
  Roembach, Jeanine L., MD
  Seicarescu, Cristina, MD
  Swensen, Eric C., MD

Sanford Reproductive Medicine Clinic
1111 Harwood Dr
(701) 234-2700

- Endocrinology
  Cain, Kristen, MD
  Christensen, Steffen P., MD
- Obstetrics/Gynecology
  Christensen, Steffen P., MD
  Dahl, Stephanie K., MD

Sanford Reproductive Medicine Clinic
1111 Harwood Dr
(701) 234-2700

- Endocrinology
  Cain, Kristen, MD
- Obstetrics/Gynecology
  Christensen, Steffen P., MD
  Dahl, Stephanie K., MD

Sanford Roger Maris Cancer Center
820 4th St N
(701) 234-6161

- Anesthesiology (MD)
  Indergaard, Patrick J., MD
- Internal Medicine
  Alzoubi, Ammar, MD
  Geeraerts, Louis H., MD
  Leitch, John M., MD
  Levitt, Ralph, MD
  Steen, Preston D., MD
  Terstriep, Shelby, MD
- Oncology
  Alzoubi, Ammar, MD
  Foster, Ethan, MD
  Gaba, Anu G., MD
  Geeraerts, Louis H., MD
  Gross, Gerald G., MD
  Jensen, Ashley, MD
  Kobrinsky, Nathan L., MD
  Leitch, John M., MD
  Levitt, Ralph, MD
  Panwalkar, Amit, MD
  Parmley, Richard T., MD
  Russell, Howard L., MD
  Shahidi, Homayoon, MD
  Snow, Denise, MD
  Steen, Preston D., MD
  Terstriep, Shelby, MD
- Pediatrics
  Anim, Samuel, MD
  Kobrinsky, Nathan L., MD
  Parmley, Richard T., MD
- Radiation Therapy
  Arusell, Robert M., MD
  Bier, Dennis E., MD
  Nordstrom, Kathleen A., MD

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PARTICIPATING PHYSICIANS

Sanford Roger Maris Cancer Center
820 4th St N
(701) 234-6161

- Anesthesiology (MD)
  Indergaard, Patrick J., MD
- Internal Medicine
  Alzoubi, Ammar, MD
  Geeraerts, Louis H., MD
  Leitch, John M., MD
  Levitt, Ralph, MD
  Russell, Howard L., MD
  Steen, Preston D., MD
  Terstriep, Shelby, MD
  Tinguely, Matthew, MD
- Oncology
  Alzoubi, Ammar, MD
  Foster, Ethan, MD
  Gaba, Anu G., MD
  Geeraerts, Louis H., MD
  Gitau, Mark, MD
  Gross, Gerald G., MD
  Jensen, Ashley, MD
  Kobrinsky, Nathan L., MD
  Leitch, John M., MD
  Levitt, Ralph, MD
  Nordstrom, Kathleen A., MD
  Panwalkar, Amit, MD
  Parmley, Richard T., MD
  Russell, Howard L., MD
  Shahidi, Homayoon, MD
  Snow, Denise, MD
  Steen, Preston D., MD
  Terstriep, Shelby, MD
- Pediatrics
  Anim, Samuel, MD
  Kobrinsky, Nathan L., MD
  Parmley, Richard T., MD
- Radiation Therapy
  Arusell, Robert M., MD
  Bier, Dennis E., MD

Sanford South University
1720 University Dr S
(701) 234-2000

- Anesthesiology (MD)
  Berndt, Steven D., MD
  Brunsvold, Robert A., MD
  Daniels, Steven, MD
  Fisher, Cristina, MD
  Gaba, Vijay, MD

Sanford South University (cont.)

- Anesthesiology (MD) (continued)
  Ghazi, Majid, MD
  Goswami, Arundhati, MD
  Harris, Brian, MD
  Hass, Brian, MD
  Indergaard, Patrick J., MD
  Onuora, Tochukwu, MD
  Raad, Robert, MD
  Swami, Swati, MD
  Vandrovec, Chad, MD
  Vandrovec, Sara, MD
  Williams, Elisa, DO
- Family Practice
  Braunagel, Bradley A., MD
  Glatt, David J., MD
  Jessen, Jamey, MD
  Kenninger, Randall A., MD
  Kringlie, Ross A., MD
  Lien, David J., MD
  Magura, Connie A., MD
  Mickelson, John G., DO
  Naseer, Osama B., MD
  Nyhus, Curtis C., MD
  Roesler, Sean E., MD
  Sampson, Steven M., MD
  Schatz, Sarah, MD
  Skari, Bradly, MD
  Sorlie, Mandy, MD
  Webster, Michael G., MD
  Wiisanen, Ronald E., MD
- General Surgery
  Bailey, David A., MD
- Hand Surgery
  Bailey, David A., MD
- Internal Medicine
  Anderson, Misty, DO
  Arora, Kanwardeep, MD
  Barun, Bipin, MD
  Chavour, Sudhir K., MD
  Jasti, Anil, MD
  Paladugu, Gopikrishna, MD
  Potluri, Rajendra C., MD
  Pyae, Nyan, MD
  Sanaullah, Mohamed, MD
  Shahira, Eram, MD
  Talluri, Krishna, MD
- Ophthalmology
  Anderson, Steven, MD
  Jordan, Andrew A., MD

Sanford South University (cont.)

- Optometrist
  Edwards, Robert A., OD
  Gilbertson, Kimberly A., OD
  Kelly, Brendan, OD
  Zieman, Blaine G., OD
- Orthopedic Surgery
  Friederichs, Matthew G., MD
- Pathology
  Ren, Yongshen, MD
- Pathology, Anatomy, Clinical Pathology
  Bianco, Michelle K., MD
- Pediatrics
  Kvistad, Bonnie, MD
- Psychiatry (MD/DO)
  Burd, Ronald M., MD
  Haider, Naveed, MD
  Hund, Morris A., MD
  Leon, Zelko, MD
  Olson, Robert J., MD
  Rougle, James, DO
  Swensen, Eric C., MD
- Radiology
  Asleson, John, MD
  Catalan, Richard, MD
  Dahl, Benjamin, MD
  Fish, Jonathan, MD
  Kallenbach, Christopher, MD
  Khaghany, Kamran, MD
  Machayya, Jon, MD
  Marsden, Richard J., MD
  Reynolds, Ryan, MD
  Shook, Robert J., MD

Sanford South University
1720 University Dr S
(701) 234-2000

- Anesthesiology (MD)
  Berndt, Steven D., MD
  Brunsvold, Robert A., MD
  Colon-Dejesus, Manuel, MD
  Daniels, Steven, MD
  Fisher, Cristina, MD
  Gaba, Vijay, MD
  Ghazi, Majid, MD
  Goswami, Arundhati, MD
  Habli, Nader, MD
  Harris, Brian, MD
  Hass, Brian, MD

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Sanford South University (cont.)

- Anesthesiology (MD) (continued)
  Indergaard, Patrick J., MD
  Moussa, Adib, MD
  Onuora, Tochukwu, MD
  Parves, Shah, MD
  Pezhman, Eric, MD
  Raad, Robert, MD
  Rashid, Karim, MD
  Swami, Swati, MD
  Vandrovec, Chad, MD
  Vandrovec, Sara, MD
  Williams, Elisa, DO
- Emergency Medicine
  Agema, Ryan, MD
- Family Practice
  Braunagel, Bradley A., MD
  Haugo, Amie, MD
  Hochhalter, David, MD
  Jessen, Jamey, MD
  Kringlie, Ross A., MD
  Kruger, Michael S., MD
  Lien, David J., MD
  Magura, Connie A., MD
  Martino, Robert M., MD
  Mickelson, John G., DO
  Naseer, Osama B., MD
  Nyhus, Curtis C., MD
  Roesler, Sean E., MD
  Sampson, Steven M., MD
  Schatz, Sarah, MD
  Skari, Bradly, MD
  Sorlie, Mandy, MD
  Webster, Michael G., MD
  Wiisanen, Ronald E., MD
- General Surgery
  Bailey, David A., MD
- Hand Surgery
  Bailey, David A., MD
- Internal Medicine
  Al Hallak, Mohammed, MD
  Anderson, Misty, DO
  Arora, Kanwardeep, MD
  Bande, Dinesh, MD
  Barun, Bipin, MD
  Bhatta, Puspa, MD
  Bhattaral, Jaya, MD
  Briggs, Jill, MD
  Carey, Jantey, MD
  Chavour, Sudhir K., MD

Sanford South University (cont.)

- Internal Medicine (continued)
  Hess, April, MD
  Jasti, Anil, MD
  Mannuru, Devendranath, MD
  Paladugu, Gopikrishna, MD
  Potluri, Rajendra C., MD
  Pyae, Nyan, MD
  Sanaullah, Mohamed, MD
  See, Jay K., MD
  Shahira, Eram, MD
  Shrestha, Alok, MD
  Starosta, Vitaliy, MD
  Talluri, Krishna, MD
- Obstetrics/Gynecology
  Christensen, Steffen P., MD
  Dahl, Stephanie K., MD
- Ophthalmology
  Atchison, Michelle, MD
- Optometrist
  Edwards, Robert A., OD
  Kelly, Maggie, OD
- Orthopedic Surgery
  Friederichs, Matthew G., MD
  Matthys, Gary, MD
- Pathology
  Ren, Yongshen, MD
- Pathology, Anatomy, Clinical Pathology
  Bianco, Michelle K., MD
  Bing, Zhanyong, MD
- Pediatrics
  Kvistad, Bonnie, MD
- Plastic Surgery
  Keim, Jeffrey R., MD
- Psychiatry (MD/DO)
  Armstrong, Lacey L., MD
  Burd, Ronald M., MD
  Hund, Morris A., MD
  Leon, Zelko, MD
  Olson, Robert J., MD
  Rougle, James, DO
  Swensen, Eric C., MD
  Yarosh, Scott, MD
- Radiology
  Anderson, Seth, DO
  Asheim, Jason, MD
  Biegler, Peter, MD
  Ng, Su-Ann, MD
  Reynolds, Ryan, MD

Sanford South University Eye Center & Optical
1717 South University Dr
(701) 234-2305

- Ophthalmology
  Anderson, Steven, MD
  Jordan, Andrew A., MD
  Tufty, Geoffrey, MD
- Optometrist
  Edwards, Robert A., OD
  Gilbertson, Kimberly A., OD
  Kelly, Brendan, OD

Sanford Southpointe Clinic
2400 32nd Ave S
(701) 234-8800

- Allergy
  Eng, Woei Yeang, MD
  Kantak, Anand A., MD
- Emergency Medicine
  Lystad, Jeffrey K., MD
- Endocrinology
  Chaithongdi, Niyutchai, MD
  Hallanger-Johnson, Julie E., MD
  Munoz, Juan M., MD
  Newman, David, MD
- Family Practice
  Glatt, David J., MD
  Gullickson, Nicole, MD
  Kennedy, Gary J., MD
  Kenninger, Randall A., MD
  Lien, David J., MD
  Nyayapati, Neelima, MD
  Wiisanen, Ronald E., MD
- Geriatrics
  Nakasato, Yuri, MD
- Hand Surgery
  Bailey, David A., MD
- Internal Medicine
  Chaithongdi, Niyutchai, MD
  Chavour, Sreekanth, MD
  Dahl, Lindsey, MD
  Kallamadi, Rekha, MD
  Lang, Darin W., MD
  Munoz, Juan M., MD
  Nakasato, Yuri, MD
  Parvathareddy, Vishnupriyadevi, MD
  Raum, Jennifer, MD

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Sanford Southpointe Clinic (cont.)

- Nuclear Medicine
  Stallman, Donald J., MD
- Obstetrics/Gynecology
  Coauette, Jordan, MD
  Lesteberg, Keith G., MD
  Rondeau, Denise M., MD
  Rondeau, Jeffrey A., MD
- Ophthalmology
  Jordan, Andrew A., MD
- Optometrist
  Kelly, Maggie, OD
  Ulland, Bradley J., OD
- Orthopedic Surgery
  Dahl, Kevin, MD
  Friederichs, Matthew G., MD
  Nagle, Thomas D., MD
  Orson, Gregory G., MD
  Prochaska, Vern, MD
  Robertson, Christopher, MD
- Pediatrics
  Kantak, Anand A., MD
- Podiatry, Surgical Chiropody
  Anderson, Brad C., DPM
  Arness, Richard E., DPM
  Cullen, Nicole, DPM
  Uglem, Timothy P., DPM
- Psychiatry (MD/DO)
  Swensen, Eric C., MD
- Radiology
  Asheim, Jason, MD
  Asleson, Bruce A., MD
  Asleson, John, MD
  Catalan, Richard, MD
  Dahl, Benjamin, MD
  Kallenbach, Christopher, MD
  Khaghany, Kamran, MD
  Marsden, Richard J., MD
  Mickelson, Daniel G., MD
  Reynolds, Ryan, MD
  Stallman, Donald J., MD
- Rheumatology
  Nakasato, Yuri, MD
  Overiene, Viktorija, MD

Sanford Southpointe Clinic
2400 32nd Ave S
(701) 234-8800

- Allergy
  Eng, Woei Yeang, MD

North Dakota (cont.)
Fargo (cont.)

Sanford Southpointe Clinic (cont.)

- Allergy (continued)
  Kantak, Anand A., MD
- Emergency Medicine
  Lystad, Jeffrey K., MD
- Endocrinology
  Babu, Varsha, MD
  Chaithongdi, Niyutchai, MD
  Hallanger-Johnson, Julie E., MD
  Munoz, Juan M., MD
  Newman, David, MD
- Family Practice
  Altaf, Misbah, MD
  Glatt, David J., MD
  Gullickson, Nicole, MD
  Kennedy, Gary J., MD
  Kenninger, Randall A., MD
  Lien, David J., MD
  Martens, Kristine, DO
  Nyayapati, Neelima, MD
  Roesler, Sean E., MD
  Walker, Debra, MD
  Wiisanen, Ronald E., MD
- Hand Surgery
  Bailey, David A., MD
- Internal Medicine
  Chavour, Sreekanth, MD
  Dahl, Lindsey, MD
  Juhl, Kirsten, MD
  Kallamadi, Rekha, MD
  Lang, Darin W., MD
  Parvathareddy, Vishnupriyadevi, MD
  Raum, Jennifer, MD
  Trout, Malachia, MD
  Twedt, Heidi L., MD
- Nuclear Medicine
  Stallman, Donald J., MD
- Obstetrics/Gynecology
  Coauette, Jordan, MD
  Kappenman, James, MD
  Lesteberg, Keith G., MD
  Rondeau, Denise M., MD
  Rondeau, Jeffrey A., MD
  Saha, Joyoti, MD
  Tinguely, Christina, MD
  Tompkins, Rebekah, MD
- Ophthalmology
  Jordan, Andrew A., MD

North Dakota (cont.)
Fargo (cont.)

Sanford Southpointe Clinic (cont.)

- Optometrist
  Kelly, Maggie, OD
- Orthopedic Surgery
  Dahl, Kevin, MD
  Friederichs, Matthew G., MD
  Nagle, Thomas D., MD
  Orson, Gregory G., MD
  Piatt, Bruce E., MD
  Prochaska, Vern, MD
  Robertson, Christopher, MD
- Pediatrics
  Casas, Luis, MD
  Cleveland, Chris, MD
  Kantak, Anand A., MD
  Trout, Malachia, MD
- Podiatry, Surgical Chiropody
  Anderson, Brad C., DPM
  Arness, Richard E., DPM
  Cullen, Nicole, DPM
  Uglem, Timothy P., DPM
- Psychiatry (MD/DO)
  Kohoutek, Bradley W., MD
  Swensen, Eric C., MD
- Radiology
  Anderson, Seth, DO
  Asheim, Jason, MD
  Biegler, Peter, MD
  Dahl, Benjamin, MD
  Kallenbach, Christopher, MD
  Marsden, Richard J., MD
  Mickelson, Daniel G., MD
  Ng, Su-Ann, MD
  Reynolds, Ryan, MD
  Stallman, Donald J., MD
- Rheumatology
  Nakasato, Yuri, MD
  Overiene, Viktorija, MD

Sanford Southpointe Eye Center & Optical
2400 32nd Ave S
(701) 234-3640

- Optometrist
  Kelly, Maggie, OD
  Quitberg, Joy, OD
  Ulland, Bradley J., OD
  Zieman, Blaine G., OD

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North Dakota (cont.)
Fargo (cont.)

Southeast Human Service Center
2624 9th Ave S
(701) 298-4500

- Family Practice
  Stoe, Anne, MD
- Psychiatry (MD/DO)
  Hajek, Philip T., MD
  Kroetsch, Laura A., MD
  McLean, Andrew J., MD
  Vo, Timothy T., MD

St Sophies LLC
3201 33rd St S
(701) 365-4488

- Psychiatry (MD/DO)
  Kenney, Emmet M., MD

Staton, R. Dennis, MD
509 25th Ave N
(701) 451-9145

- Psychiatry (MD/DO)
  Staton, R D., MD

Steven Thom, MD PC
2601 S University Dr
(701) 235-5200

- Ophthalmology
  Thom, Steven B., MD

The Cortino Group Ltd,LLC
1555 43rd St S Ste102
(701) 364-4107

- General Surgery
  Corpus Jr, Eduardo T., MD

Tracie Teig Malstrom, O.D.
3902 13th Ave S
(701) 282-0129

- Optometrist
  Malsom, Tracie L., OD

Urgent Medicine Associates, LLC
2829 S Univ Dr Ste 101
(701) 232-9000

- Family Practice
  Sondreal, Philip S., MD
- Internal Medicine
  Kooyer, Kurt W., MD
- Pediatrics
  Kooyer, Kurt W., MD

North Dakota (cont.)
Fargo (cont.)

Valley Anesthesia Associates, PC
2301 S 25th St Ste K
(701) 234-1728

- Anesthesiology (MD)
  Chalasani, Nageswararao V., MD

Valley Medical Clinic, PC
300 Main Ave Suite 200
(701) 297-0817

- Anesthesiology (MD)
  Sivanna, Panjini M., MD
- Orthopedic Surgery
  Kim, Sunny S., MD

Valley Oral & Facial Surgery, PC
2701 9th Ave S Ste F
(701) 235-7379

- Oral Surgery
  Petersen, Troy R., DMD

Wessman, Kari, MD, PC
1665 43 St S
(701) 282-0051

- Obstetrics/Gynecology
  Wessman, Kari J., MD

Forman

Sanford Health Forman Clinic
336 Main St
(701) 724-3221

- Internal Medicine
  Nagala, Vani, MD
- Podiatry, Surgical Chiropody
  Arness, Richard E., DPM
- Radiology
  Asheim, Jason, MD
  Marsden, Richard J., MD

Fort Totten

Early Childhood Tracking
416 2nd Ave N
(701) 766-1248

- Family Practice
  Devlin, Kwanza N., MD
  Hostetter, Jeffrey E., MD
  Krohn, Kimberly T., MD
- General Practice
  Willis, Karin K., MD
- Internal Medicine
  Neumann, Nicholas H., MD

North Dakota (cont.)
Fort Totten (cont.)

Early Childhood Tracking (cont.)

- Pediatrics
  Dwelle, Terry L., MD
- Pulmonary Diseases
  Neumann, Nicholas H., MD

Fort Yates

Fort Yates IHS
North River Rd
(701) 854-3831

- Clinic
  Fort Yates

Gackle

Wishek Rural Health Clinic/Gackle
321 Main St
(701) 452-2364

- Family Practice
  Kosiak, Donald J., MD
  Oliveira-Filho, Edgar K., MD
  Patel, Suresh K., MD
- General Practice
  Vegiraju, Thammi R., MD
- Internal Medicine
  Thirumala Reddy, Joseph R., MD

Garrison

Drs Schindler & Deis
151 N Main St
(701) 463-2224

- Optometrist
  Deis, Thomas L., OD
  Schindler, Keith L., OD

Garrison Family Clinic
437 3rd Ave SE
(701) 463-2245

- Family Practice
  Dornacker, Jon E., MD
  Harchenko, Vern A., MD

Glen Ullin

Glen Ullin Family Medical Center
602 Ash Ave E
(701) 348-9175

- General Practice
  Knecht, John F., MD
- Internal Medicine
  Goyal, Deepak M., MD

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PARTICIPATING PHYSICIANS

Christian Unity Hospital, Corp. dba Grafton Family Clinic
164 West 13th Street
(701) 352-2000

- Family Practice
  Fillipi, Linda R., MD
  Kotnik, Anthony J., MD
  Omotunde, Joshua O., MD
- General Surgery
  Khokha, Inder V., MD
- Internal Medicine
  Sundberg, Elizabeth E., MD
- Nephrology
  Sundberg, Elizabeth E., MD
- Radiology
  Ali, Azhar T., MD
  Asis, Martin J., MD
  Baraga, Joseph J., MD
  Barkmeier, Jeffrey, MD
  Block, Nathan D., MD
  Bowman Seitz, Tara S., MD
  Bretzke, Carl A., MD
  Bretzman, Peter A., MD
  Bryan, Erich N., MD
  Butler, Robert R., MD
  Carlson, Blake A., MD
  Carolan, Paul R., MD
  Caspers, John M., MD
  Castaneda, Wilfrido R., MD
  Ditmanson, Phil M., MD
  Grogan, Michael J., MD
  Hedlund, Laura J., MD
  Jackson, Christopher A., MD
  Johnson, Adam C., MD
  Kang, Edith H., MD
  Lambert, David P., MD
  Loe, Matthew J., MD
  Longley, Deborah G., MD
  Ludeman, Lucas B., MD
  Magnuson, Jeffrey E., MD
  Maguire, Frank P., MD
  May, Benjamin J., MD
  Muschenheim, Alexandra L., MD
  Parrino, Suzanne S., MD
  Passe, Theodore J., MD
  Phelan, Jeffrey S., MD
  Prescott, Trisha R., MD
  Rhodes, Nicholas G., MD
  Rosenberg, Michael S., MD
  Ruzek, Kimberly A., MD

Christian Unity Hospital, Corp. dba Grafton Family Clinic (cont.)

- Radiology (continued)
  Savcenko, Vladimir, MD
  Sullivan, Patrick P., MD
  Tai, Angela W., MD
  Truman, Susan M., MD
  Weisensee, Anne M., MD
  Wiese, Don E., MD
  Wittenberg, Keith H., MD

Heartland Eye Care
415 Hill Ave
(701) 352-1370

- Optometrist
  Carlson, Dori M., OD
  Carter, Michelle K., OD
  Helgeson, Mark K., OD
  Hoenke, Jaime A., OD

Unity Medical Center
164 W 13th St
(701) 352-1620

- Family Practice
  Fillipi, Linda R., MD
  Kotnik, Anthony J., MD
  Omotunde, Joshua O., MD
- Internal Medicine
  Go, Jason S., MD
  Jahed, Abdul Z., MD
  Sundberg, Elizabeth E., MD
- Nephrology
  Sundberg, Elizabeth E., MD
- Obstetrics/Gynecology
  Lessard, Collette R., MD
- Podiatry, Surgical Chiropody
  Fanous, Basem Z., DPM
- Radiology
  Ali, Azhar T., MD
  Arsenault, Todd M., MD
  Asis, Martin J., MD
  Baldwin, Matthew T., MD
  Baraga, Joseph J., MD
  Barkmeier, Jeffrey, MD
  Berens, Bruce M., MD
  Berger, Mark W., MD
  Block, Nathan D., MD
  Bretzke, Carl A., MD
  Bretzman, Peter A., MD
  Bryan, Erich N., MD
  Butler, Robert R., MD

Unity Medical Center (cont.)

- Radiology (continued)
  Carlson, Blake A., MD
  Carolan, Paul R., MD
  Caspers, John M., MD
  Castaneda, Wilfrido R., MD
  Ditmanson, Phil M., MD
  Drake, David G., MD
  Edmonson, George R., MD
  Frecentese, Dominic F., MD
  Grogan, Michael J., MD
  Hartigan, Andrew S., MD
  Hedlund, Laura J., MD
  Hommeyer, Steven C., MD
  Jackson, Christopher A., MD
  Johnson, Adam C., MD
  Kang, Edith H., MD
  Knoedler, John P., MD
  Knutzen, Anders M., MD
  Lambert, David P., MD
  Leon, Jorge A., MD
  Longley, Deborah G., MD
  Ludeman, Lucas B., MD
  Magnuson, Jeffrey E., MD
  Maguire, Frank P., MD
  May, Benjamin J., MD
  Mulcahy, Paul F., MD
  Muschenheim, Alexandra L., MD
  Page, Graydon T., MD
  Parrino, Suzanne S., MD
  Phelan, Jeffrey S., MD
  Rathmann, Gregory A., MD
  Rhodes, Nicholas G., MD
  Rosenberg, Michael S., MD
  Ruzek, Kimberly A., MD
  Savcenko, Vladimir, MD
  Sullivan, Patrick P., MD
  Tashjian, Joseph H., MD
  Truman, Susan M., MD
  Tummala, Anuradha K., MD
  Veldman, Mark W., MD
  Weinmann, Robert H., MD
  Weisensee, Anne M., MD
  Wiese, Don E., MD
  Wittenberg, Keith H., MD
  Wold, Peter B., MD

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PARTICIPATING PHYSICIANS

Advanced Eyecare
2860 10th Ave N Ste 350
(701) 757-2121

- Optometrist
  Lagodinski-Christian, Julie A., OD

Altru Cancer Center
960 S Columbia Rd
(701) 780-5400

- Internal Medicine
  Lizakowski, Laura A., MD
  Panico, Kevin, MD
- Oncology
  Bustillo Chams, Ivan J., MD
  Dentchev, Todor N., MD
  Panico, Kevin, MD
  Seeger, Grant R., MD
  Siddiqui, Tariq, MD
  Walsh, Daniel J., MD
  Winchester, Marshall B., MD

Altru Family Medicine Center
1380 S Columbia Rd
(701) 795-2000

- Family Practice
  Calin, Cristina, MD
  Chan, Paul J., MD
  Chaudhry, Aisha B., MD
  Deere, Joshua R., MD
  Funk, Peter A., MD
  Gomez, Yvonne L., MD
  Johnson, Eric L., MD
  Lantoria, Gerardo P., MD
  Lyste, Derek J., MD
  Millette, Keith W., MD
  Nazir, Asad, MD
  Riaz, Freaha, MD
  Roxas, Rodrigo C., MD
  Roxas, Sharon K., MD
  Stevens, Kirk D., MD
  Walz, Joel D., MD
- Pathology
  Cooley, A. Marvin, MD
- Radiology
  Hood, Larissa L., MD
  James, John, MD

Altru Family Medicine Residency
725 Hamline St
(701) 780-6800

- Family Practice
  Gasparini, Andrew, MD
  Ghimire, Roshan, MD
  Greek, Gregory D., MD
  Grissom, Douglas W., MD
  Halvorson, Larry O., MD
  Konzak-Jones, M. Kim, MD
  Laqua, Patricia L., MD
  Luciano, Andrew S., MD
  Mann, William S., MD
  Mees, Christopher J., MD
  Mees, Sara L., MD
  Nielsen, A Marc, MD
  Philpot, Heidi, MD
  Roed, James R., MD
  Roers Irmen, Stacy L., MD
- General Practice
  Henderson, Christopher P., MD
- General Surgery
  Khromachou, Tamim R., MD
- Radiology
  Hagen, William N., DO

Altru Hospital
1200 S Columbia Rd
(701) 780-5000

- Anesthesiology (MD)
  Beauchamp, Bruce, DO
  Carcoana, Olivia V., MD
  Childs, Robert S., MD
  Eagleton, Kvame D., MD
  Haug, Jonathan S., MD
  Koltes-Edwards, Renee M., MD
  Mork, Kevin J., MD
  Parikh, Jitendra R., MD
  Parikh, Vinita J., MD
  Porot, Marc J., MD
  Pylman, Michael L., MD
  Schuster, Michael R., MD
  Severud, Robin, MD
  Staggs, Karen M., MD
- Cardiovascular Disease
  Aboufakher, Rabeea, MD
  Ahmed, Abdel M., MD
  Bekdash, Ismail L., MD
  Chebaclo, Mohamed, MD
  Kirnus, Mikhail, MD

Altru Hospital (cont.)

- Cardiovascular Disease (continued)
  Wynne, Joshua, MD
- Emergency Medicine
  Baba, Taketo, MD
  Boe, Christopher T., MD
  Fasbender, James R., MD
  Jackson, Walter O., MD
  Johnson, Joel L., MD
  Kaushik, Shivu, MD
  Knecht, Tony A., MD
  Lizardi, Pablo L., MD
  McKinnon, William G., MD
  Raymond, Jon F., MD
  Richardson, Shoshone A., MD
  Schanzenbach, Stewart H., MD
  Stull, Benjamin W., MD
  Temple, Kevin, MD
  Weiser, Steven J., MD
- Family Practice
  Bacolod, Ramesis J., MD
  Fasbender, James R., MD
  Foughty, Stephanie A., MD
  Gasparini, Andrew, MD
  Grewal, Surinder P., MD
  Hoverson, Fallon R., MD
  Knecht, Tony A., MD
  Kolberg, Jon B., MD
  Lantoria, Gerardo P., MD
  McKinnon, William G., MD
  Mees, Christopher J., MD
  Mees, Sara L., MD
  Metzger, Dana L., DO
  Millette, Keith W., MD
  Moore, Patrick F., MD
  Patel, Neel A., MD
  Raymond, Jon F., MD
  Roers Irmen, Stacy L., MD
  Weiser, Steven J., MD
- General Practice
  Henderson, Christopher P., MD
- General Surgery
  Charette, Scott D., MD
  Hape, Robin T., MD
  Khromachou, Tamim R., MD
- Geriatrics
  Aboufakher, Rabeea, MD
- Hand Surgery
  Leetun, Darin T., MD

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PARTICIPATING PHYSICIANS

Altru Hospital (cont.)

- Hand Surgery (continued)
  Meland, N. Bradly, MD
- Infectious Diseases
  Hargreaves, James E., DO
- Internal Medicine
  Aboufakher, Rabeea, MD
  Bekdash, Ismail L., MD
  Chebaclo, Mohamed, MD
  Consing, Raul P., MD
  Dalmi, Attila, MD
  Fredstrom, Rene' D., MD
  Go, Jason S., MD
  Hargreaves, James E., DO
  Jones, Janelle D., MD
  Kartham, Sunil, MD
  Kaushik, Shivu, MD
  Khan, Zaki H., MD
  Kirnus, Mikhail, MD
  Lizakowski, Laura A., MD
  Onyeka, Ikechukwu C., MD
  Pulagam, Srinivas R., MD
  Rusten, Heather W., DO
  Samimian Tehrani, Pezhman, MD
  Willardson, James D., MD
- Neurology
  Woodward, George, MD
- Obstetrics/Gynecology
  Brewster, Earl M., MD
  Brost, Brian C., MD
  Brown, Michael R., MD
  Rose, Carl H., MD
  Setness Hoefs, Tana, MD
  Wildey, Brian M., MD
- Ophthalmology
  Brockman, Ronald J., MD
  Byers, Norman T., MD
- Orthopedic Surgery
  Gardner, Jeremy J., MD
  Jones, Roger A., MD
  Leetun, Darin T., MD
  Martin, Jeffrey A., MD
  Robinson, Ben, MD
- Otology, Laryngology, Rhinology
  Beck, Gwendolyn J., MD
- Pathology
  Brown, Ann K., MD
  Cooley, A. Marvin, MD
  Koponen, Mark A., MD

Altru Hospital (cont.)

- Pathology (continued)
  Raymond, Laura A., MD
  Weiland, Timothy L., MD
- Pathology, Anatomy, Clinical Pathology
  Koponen, Mark A., MD
  Lockhart, Christopher, MD
- Pediatrics
  Adjekum, Gloria A., MD
  Dwarakanath, Kiran, MD
  Heise, Amber S., MD
  Mallipaddi, Pramod, MD
  Panda, Durga P., MD
  Zelewski, Susan K., MD
- Physical Medicine and Rehabilitation
  Caoili, Henri Rommel A., MD
- Plastic Surgery
  Meland, N. Bradly, MD
- Pulmonary Diseases
  Kaushik, Shivu, MD
- Radiology
  Aafedt, Bradley C., MD
  Dallum, Bernie J., MD
  Hagen, William N., DO
  Jahn, Paul, MD
  Owens, Charles A., MD
  Schmelka, Daniel R., MD
  Schreiner, Shawn A., MD
  Smith, Randall J., MD
  Treuer, Jody B., MD
- Thoracic Surgery
  Ali, Syed O., MD

Altru Main Clinic
1000 S Columbia Rd
(701) 780-5000

- Allergy
  Jacobsen, John J., MD
- Anesthesiology (MD)
  Beauchamp, Bruce, DO
- Cardiovascular Disease
  Aboufakher, Rabeea, MD
  Ahmed, Abdel M., MD
  Bekdash, Ismail L., MD
  Chebaclo, Mohamed, MD
  Kirnus, Mikhail, MD
  Rios, Rodrigo, MD
  Wijetunga, Mevan N., MD
  Wynne, Joshua, MD

Altru Main Clinic (cont.)

- Emergency Medicine
  Jackson, Walter O., MD
  Kaushik, Shivu, MD
- Endocrinology
  Brosseau, James D., MD
  Ryan, Casey J., MD
  Zaks, William J., MD
- Family Practice
  Berg, Jonathon H., MD
  Grewal, Surinder P., MD
  Metzger, Dana L., DO
- Gastroenterology
  Chu, Anthony G., MD
  Ojuro, Peter O., DO
  Wood, James R., MD
- General Surgery
  Belluk, Bradley P., MD
  Charette, Scott D., MD
  Debeltz, Donald J., MD
  Grieve, Billie J., MD
  Guttormson, Robert D., MD
  Hape, Robin T., MD
  Szlabick, Randolph E., MD
  Usatii, Anatolie A., MD
  Van Dyken, Irminne G., MD
- Geriatrics
  Brosseau, James D., MD
  Okundaye, Ebima C., MD
  Ryan, Casey J., MD
- Infectious Diseases
  Hargreaves, James E., DO
- Internal Medicine
  Aboufakher, Rabeea, MD
  Allen, Jon W., MD
  Bekdash, Ismail L., MD
  Breitwieser, Wayne R., MD
  Brosseau, James D., MD
  Chebaclo, Mohamed, MD
  Chu, Anthony G., MD
  Durrani, Qasim K., MD
  Fredstrom, Rene' D., MD
  Gautham, Shanta, MD
  Go, Jason S., MD
  Haastrup, Adetola T., MD
  Hargreaves, James E., DO
  Jerome, Peter S., MD
  Kaushik, Shivu, MD
  Khan, Fatima S., MD
  Khan, Zaki H., MD

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Altru Main Clinic (cont.)

- Internal Medicine (continued)
  Kirnus, Mikhail, MD
  Lizakowski, Laura A., MD
  Mudireddy, Uma M., MD
  Nausheen, Sara, MD
  Okundaye, Ebima C., MD
  Paulson, Rolf R., MD
  Peterson, Kirsten D., MD
  Rahman, Mohammed H., MD
  Ryan, Casey J., MD
  Samimian Tehrani, Pezhman, MD
  Wijetunga, Mevan N., MD
  Zaks, William J., MD
- Nephrology
  Haastrup, Adetola T., MD
  Okundaye, Ebima C., MD
  Rahman, Mohammed H., MD
- Neurological Surgery
  Larkins, Mark V., MD
  Lee, Janet, MD
  Oxenhandler, Donald C., MD
  Wood, Charles O., MD
- Neurology
  Hyder, Syed S., MD
  Novacek, Rebecca K., MD
  Patterson-Marshall, Bridget, MD
  Roller, Matthew J., MD
  Woodward, George, MD
- Obstetrics/Gynecology
  Andreson, Laura K., DO
  Barbot, Pierre A., MD
  Brewster, Earl M., MD
  Brost, Brian C., MD
  Brown, Michael R., MD
  Eickenbrock, Andrea M., MD
  Lays, Andrea R., MD
  Lessard, Collette R., MD
  Rose, Carl H., MD
  Setness Hoefs, Tana, MD
  Wildey, Brian M., MD
- Oncology
  Winchester, Marshall B., MD
- Ophthalmology
  Brockman, Ronald J., MD
  Byers, Norman T., MD
  Khairallah, Christian G., MD

North Dakota (cont.)
Grand Forks (cont.)

Altru Main Clinic (cont.)

- Optometrist
  Boettcher, Terra L., OD
  Schumacher, Jennifer E., OD
- Orthopedic Surgery
  Johnson, Robert A., MD
  Jones, Roger A., MD
  Lebrun, Christopher T., MD
  Peterson, Steven H., MD
  Robinson, Ben, MD
- Otology, Laryngology, Rhinology
  Beck, Gwendolyn J., MD
  Johnson, Alan W., MD
  Lapp, Gregory C., MD
  Yoshida, Glen Y., MD
- Pediatrics
  Adjekum, Gloria A., MD
  Ayoob, Abdur R., MD
  Cetta, Frank, MD
  Douvoyiannis, Miltiadis, MD
  Dwarakanath, Kiran, MD
  Heise, Amber S., MD
  Horner, Justin, MD
  Jacobsen, John J., MD
  Khan, Fatima S., MD
  Lunn, Eric R., MD
  Mack, Kenneth J., MD
  Mallipaddi, Pramod, MD
  Mishra, Ramesh, MD
  Panda, Durga P., MD
  Peterson, Jennifer M., MD
  Rios, Rodrigo, MD
  Shelton, Frank J., MD
  Sondrol, Lori A., MD
  Swank, Colleen M., MD
  Taggart, Nathaniel W., MD
  Zelewski, Susan K., MD
- Podiatry, Surgical Chiropody
  Britten, Joshua W., DPM
  Criswell, Samuel W., DPM
  Lo, Shoua, DPM
- Pulmonary Diseases
  Bansal, Arvind K., MD
  Breitwieser, Wayne R., MD
  Jerome, Peter S., MD
  Kaushik, Shivu, MD
  Mudireddy, Uma M., MD
- Radiology
  Aafedt, Bradley C., MD
  Aizpuru, Richard D., MD

North Dakota (cont.)
Grand Forks (cont.)

Altru Main Clinic (cont.)

- Radiology (continued)
  Ali, Azhar T., MD
  Arsenault, Todd M., MD
  Asis, Martin J., MD
  Baldwin, Matthew T., MD
  Baraga, Joseph J., MD
  Barkmeier, Jeffrey, MD
  Berens, Bruce M., MD
  Berger, Mark W., MD
  Block, Nathan D., MD
  Bowman Seitz, Tara S., MD
  Bretzman, Peter A., MD
  Bryan, Erich N., MD
  Bryson, Thomas C., MD
  Butler, Robert R., MD
  Carlson, Blake A., MD
  Carolan, Paul R., MD
  Caspers, John M., MD
  Castaneda, Wilfrido R., MD
  Chou, David, MD
  Dallum, Bernie J., MD
  Drake, David G., MD
  Edmonson, George R., MD
  Frecentese, Dominic F., MD
  Gilloon, Benjamin A., MD
  Goertzen, Timothy C., MD
  Grogan, Michael J., MD
  Hagen, William N., DO
  Hartigan, Andrew S., MD
  Hedlund, Laura J., MD
  Hommeyer, Steven C., MD
  Hood, Larissa L., MD
  Jackson, Christopher A., MD
  James, John, MD
  Johnson, Adam C., MD
  Kang, Edith H., MD
  Knoedler, John P., MD
  Knutzen, Anders M., MD
  Lambert, David P., MD
  Leon, Jorge A., MD
  Loe, Matthew J., MD
  Longley, Deborah G., MD
  Ludeman, Lucas B., MD
  Magnuson, Jeffrey E., MD
  Maguire, Frank P., MD
  May, Benjamin J., MD
  Muschenheim, Alexandra L., MD
  Omdahl, Bonnie B., MD
  Owens, Charles A., MD

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Altru Main Clinic (cont.)

- Radiology (continued)
  Page, Graydon T., MD
  Parrino, Suzanne S., MD
  Passe, Theodore J., MD
  Phelan, Jeffrey S., MD
  Prescott, Trisha R., MD
  Rathmann, Gregory A., MD
  Rhodes, Nicholas G., MD
  Rosenberg, Michael S., MD
  Ruzek, Kimberly A., MD
  Savcenko, Vladimir, MD
  Schmelka, Daniel R., MD
  Stevens, Kerry A., MD
  Sullivan, Patrick P., MD
  Tai, Angela W., MD
  Tashjian, Joseph H., MD
  Treuer, Jody B., MD
  Truman, Susan M., MD
  Tummala, Anuradha K., MD
  Veldman, Mark W., MD
  Weinmann, Robert H., MD
  Weisensee, Anne M., MD
  Wiese, Don E., MD
  Wittenberg, Keith H., MD
  Wold, Peter B., MD
- Thoracic Surgery
  Ali, Syed O., MD
  Bjorgaard, Barry A., MD
  Murphy, William, MD
  Rothberg, Martin L., MD
  Tadros, Nader B., MD
- Urology
  Highshaw, Ralph, MD
  Kiser, George C., MD
  Leichter, Eric S., MD
  Nicholson, Adam F., MD

Altru Professional Center
4440 S Washington St
(701) 780-5000

- Anesthesiology (MD)
  Eagleton, Kvame D., MD
  Haug, Jonathan S., MD
  Parikh, Vinita J., MD
  Porot, Marc J., MD
  Pylman, Michael L., MD
- Family Practice
  Bakke, Eric L., MD
  Calin, Cristina, MD

Altru Professional Center (cont.)

- Family Practice (continued)
  Chan, Paul J., MD
  Chaudhry, Aisha B., MD
  Deere, Joshua R., MD
  Eickman, Jeffrey J., MD
  Funk, Peter A., MD
  Gasparini, Andrew, MD
  Gaul, Joanne N., MD
  Gomez, Yvonne L., MD
  Greek, Gregory D., MD
  Grissom, Douglas W., MD
  Johnson, Eric L., MD
  Konzak-Jones, M. Kim, MD
  Lantoria, Gerardo P., MD
  Lyste, Derek J., MD
  Mees, Sara L., MD
  Millette, Keith W., MD
  Nazir, Asad, MD
  Nygard, Shane D., MD
  Philpot, Heidi, MD
  Riaz, Freaha, MD
  Roed, James R., MD
  Roers Irmen, Stacy L., MD
  Roxas, Rodrigo C., MD
  Roxas, Sharon K., MD
  Stevens, Kirk D., MD
  Svedjan-Walz, Hayley J., MD
  Walz, Joel D., MD
- Gastroenterology
  Chu, Anthony G., MD
  Ojuro, Peter O., DO
  Wood, James R., MD
- General Surgery
  Belluk, Bradley P., MD
  Guttormson, Robert D., MD
  Hape, Robin T., MD
  Van Dyken, Irminne G., MD
- Podiatry, Surgical Chiropody
  Britten, Joshua W., DPM
  Criswell, Samuel W., DPM
  Lo, Shoua, DPM

Altru Psychiatric Center
860 S Columbia Rd
(701) 780-6697

- Psychiatry (MD/DO)
  Bansal, Ashok K., MD
  Esprit, Lori J., MD
  Feldman, Ellen K., MD

Altru Psychiatric Center (cont.)

- Psychiatry (MD/DO) (continued)
  Madaram, Kondal R., MD

Altru Rehabilitation Center
1300 S Columbia Rd
(701) 780-2311

- Family Practice
  Fleissner, Paul, MD
  Kolberg, Jon B., MD
- Hand Surgery
  Leetun, Darin T., MD
  Meland, N. Bradly, MD
- Orthopedic Surgery
  Ansari, Aftab, MD
  Gardner, Jeremy J., MD
  Johnson, Robert A., MD
  Jones, Roger A., MD
  Kaltenbaugh, Orie E., MD
  Lebrun, Christopher T., MD
  Leetun, Darin T., MD
  Martin, Jeffrey A., MD
  Peterson, Steven H., MD
  Robinson, Ben, MD
  Stuart, Joseph J., MD
  Swope, Ryan W., DO
  Whitney, Frank E., MD
- Physical Medicine and Rehabilitation
  Belville, Kaylan L., DO
  Caoili, Henri Rommel A., MD
  Fleissner, Paul, MD
  Klava, William N., MD
  Podduturu, Vikram R., MD
  Vanness, William C., MD
- Plastic Surgery
  Meland, N. Bradly, MD
- Sports Medicine
  Haug, William O., MD

Altru Specialty Center
4500 S Washington St
(701) 732-7000

- Anesthesiology (MD)
  Carcoana, Olivia V., MD
  Childs, Robert S., MD
  Eagleton, Kvame D., MD
  Haug, Jonathan S., MD
  Koltes-Edwards, Renee M., MD
  Mork, Kevin J., MD
  Parikh, Jitendra R., MD

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Altru Specialty Center (cont.)

- Anesthesiology (MD) (continued)
  Schuster, Michael R., MD
  Severud, Robin, MD
  Staggs, Karen M., MD
- General Surgery
  Hape, Robin T., MD
- Internal Medicine
  Dalmi, Attila, MD
  Fredstrom, Rene' D., MD
  Kartham, Sunil, MD
  Khan, Zaki H., MD
  Onyeka, Ikechukwu C., MD
  Pulagam, Srinivas R., MD
  Rusten, Heather W., DO
  Samimian Tehrani, Pezhman, MD
  Willardson, James D., MD
- Orthopedic Surgery
  Gardner, Jeremy J., MD
  Johnson, Robert A., MD
  Leetun, Darin T., MD
- Physical Medicine and Rehabilitation
  Belville, Kaylan L., DO
  Caoili, Henri Rommel A., MD
  Podduturu, Vikram R., MD
- Podiatry, Surgical Chiropody
  Britten, Joshua W., DPM
  Criswell, Samuel W., DPM
  Lo, Shoua, DPM
- Radiology
  Chou, David, MD
  Dallum, Bernie J., MD
  Hood, Larissa L., MD
  James, John, MD

Aurora Urgent Care
2650 32nd Ave S
Ste D
(701) 732-2710

- Family Practice
  Magidow, Michael, MD
  Masa, Cedric B., MD
  Peterson, Mark G., MD
  Sullivan, Brian M., MD

Cancer Center of North Dakota
1451 44 Ave S Unit E
(701) 787-5800

- Internal Medicine
  Potti, Anil, MD
- Oncology
  Noyes, William R., MD
  Potti, Anil, MD
- Radiology
  Noyes, William R., MD

Center For Psychiatric Care
1451 44th Ave S Unit A
(701) 732-2500

- Family Practice
  Peterson, Timothy A., MD
- Psychiatry (MD/DO)
  Azhar, Muhammad N., MD
  Frank, Bradford L., MD
  Peterson, Thomas M., MD
  Pitera, Matthew J., MD
  Thomas, Janice M., MD
  Tsibulsky, Mark, MD

Center For Sleep LLC
3301 30 Ave S Ste 102
(701) 757-4800

- Internal Medicine
  Khosla, Seema, MD
- Pulmonary Diseases
  Khosla, Seema, MD

Face & Jaw Surgery Center
2845 36th Ave S
(701) 775-4444

- Oral Surgery
  Chahal, Omar C., DDS
  Crago, Charles A., DMD
  Gray, Jonathan R., DDS

Fercho Cataract & Eye Clinic
2100 S Columbia Rd
(701) 235-0561

- Ophthalmology
  Rodenbiker, Harold T., MD

Lamb Plastic Surgery
2100 S Columbia Rd
(701) 237-9592

- Plastic Surgery
  Lamb, Donald R., MD

Lemaster, Zachary OD
3601 32nd Ave S
(701) 787-8627

- Optometrist
  Lemaster, Zachary C., OD

Lifetime Vision Center
2900 S Columbia Rd
(701) 746-6745

- Optometrist
  Lappegaard, Cassandra J., OD
  Torkelson, Kari E., OD
  Yunker, Jeffery B., OD

Medical School Practice Support
501 N Columbia Rd
Stop 9037
(701) 777-4277

- Pediatrics
  Martsolf, John T., MD

Midwest Vision Centers
2800 S Columbia Rd
Ste 301
(701) 757-4100

- Optometrist
  Safratowich, Susan M., OD

Murie, Carol, OD
2650 32 Ave S Ste F3
(701) 757-3937

- Optometrist
  Murie, Carol A., OD

North Dakota Eye Clinic
3035 Demers Ave
(701) 775-3151

- Ophthalmology
  Gaul, Gerald N., MD
  Sczepanski, Mark L., MD
- Optometrist
  Dunham, Thomas, OD
  Lagodinski-Christian, Julie A., OD

North Dakota Surgery Center
3035 Demers Ave
(701) 738-4240

- Ophthalmology
  Gaul, Gerald N., MD
  Sczepanski, Mark L., MD

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PARTICIPATING PHYSICIANS

Northeast Human Service Center
151 S 4th St Ste 401
(701) 795-3000

- Psychiatry (MD/DO)
  Feldman, Ellen K., MD
  Goodman, Patrick B., MD
  Hill, Steven M., MD
  McLean, Andrew J., MD
  Tevington, Kathryn, MD

Northern Valley Obstetrics & Gynecology
2810 17th Ave S
(701) 738-2004

- Obstetrics/Gynecology
  Sirany, Trudy D., MD
  Trottier, Rory D., MD
- Radiology
  Bakker, Hilton J., MD

Northland Christian Counseling Center
2315 Library Circle
(701) 795-8550

- Family Practice
  Lange, Marsha M., MD

Northland Family Physicians, LLC dba Aurora Clinic
1451 44th Ave S Unit F
(701) 732-2700

- Dermatology
  Treen, Ben M., MD
- Family Practice
  Magidow, Michael, MD
  Masa, Cedric B., MD
  Peterson, Mark G., MD
  Selland, Brian L., MD
  Sullivan, Brian M., MD

Plains Ear Nose Throat & Facial Plastic Surgery Inc
4350 S Washington
Ste 112
(701) 235-1924

- Otology, Laryngology, Rhinology
  Soine, Lesley A., MD

Retina Associates, PC
2534 17th Ave S
(701) 277-4699

Retina Associates, PC (cont.)

- Internal Medicine
  Haynie, Gary D., MD
- Ophthalmology
  Haynie, Gary D., MD

Retina Consultants Ltd
4350 S Washington
Ste 112
(701) 775-7175

- Ophthalmology
  Johnson, Max R., MD

The Heart Institute of ND, Ltd
1191 S Columbia Rd
(701) 780-2000

- Cardiovascular Disease
  Chelliah, Noah N., MD
- Internal Medicine
  Chelliah, Noah N., MD

The Kidney and Hypertension Center
1451 44th Ave S Ste 112d
(701) 775-5800

- Family Practice
  Lange, Marsha M., MD
- Internal Medicine
  Velander, Byron A., MD
- Nephrology
  Rabadi, Khaled M., MD

Truyu Aesthetic Center
3165 Demers Ave
(701) 780-6219

- Dermatology
  Alhashim, Minhal H., MD
  Hoverson-Schott, Alyssa R., MD
  Muus, John H., MD
- Hand Surgery
  Meland, N. Bradly, MD
- Plastic Surgery
  Meland, N. Bradly, MD
  Muiderman, Anthony K., MD

UND Student Health Service
Mccannel Hall Room 100
2891 2nd Ave N Stop 9038
(701) 777-4791

- Family Practice
  Christenson, Mark J., MD
  Heinley, Timothy, MD

UND Student Health Service (cont.)

- Family Practice (continued)
  Jensen, Warren C., MD

Valley Bone and Joint Clinic
3035 Demers Ave
(701) 746-7521

- Family Practice
  Kruger, Michael S., MD
- Orthopedic Surgery
  Adams, Edward L., MD
  Clayburgh, Robert H., MD
  Schall, David M., MD
  Thompson, Joffrey G., MD
- Podiatry, Surgical Chiropody
  Miller, John C., DPM
- Rheumatology
  Cleland, Esperanza S., MD

Valley Health
360 Division Ave Ste 200
(701) 775-4251

- Family Practice
  Konzak-Jones, M. Kim, MD

Valley Oral & Facial Surgery, PC
1165 S Columbia Rd Ste C
(701) 772-7379

- Oral Surgery
  Petersen, Troy R., DMD
  Schneider, Rudy J., DMD
  Tanabe, Marcus B., DDS

Valley Vision Clinic, Ltd
2200 S Washington St
(701) 775-3135

- Optometrist
  Biberdorf, David H., OD
  Emmerich, Michael W., OD
  Hall, Lyle A., OD
  Jones, Avery T., OD
  Otto, Gregory C., OD
  Schaff, Jason M., OD
  Solseng, David C., OD

Viscito Family Medicine, PLLC
2750 26th St S Ste C
(701) 757-1999

- Family Practice
  Viscito, Matthew S., MD

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North Dakota (cont.)

Grand Forks (cont.)

Woodmansee, James, OD dba Family Eye Care
3750 32nd Ave S Ste 109
(701) 780-8726

- Optometrist
  Woodmansee, James A., OD
  Zollinger, Rikson, OD

Guelph

Amg Cardiovascular Specialists Aberdeen
1200 N 7th St
(605) 622-2573

- Cardiovascular Disease
  Sidaway, Larry S., DO
- Internal Medicine
  Sidaway, Larry S., DO

Gwinner

Sanford Health Gwinner Clinic
69 Highway 13 W
(701) 678-2263

- Internal Medicine
  Nagala, Vani, MD
- Radiology
  Marsden, Richard J., MD

Sanford Health Gwinner Clinic
69 Hwy 13 W
(701) 678-2263

- Radiology
  Asheim, Jason, MD

Hankinson

Essentia Health Hankinson Clinic
501 Main Avenue South
(701) 242-7118

- Family Practice
  Jamsa Tollefson, Lisa J., MD
  Nelson, Susan K., MD
  Regmi, Suman R., MD
- Geriatrics
  Strand, Duane D., MD
- Internal Medicine
  Strand, Duane D., MD

North Dakota (cont.)

Harvey

Central Dakota Family Physicians
922 Lincoln Ave
(701) 324-4856

- Family Practice
  Nyhus, Charles D., MD
- Pediatrics
  Martine, Cynthia, MD

Harvey Clinic PC
110 9th St E
(701) 324-2396

- Obstetrics/Gynecology
  Lindemann, Alan R., MD

Kourajian, Steven, OD
901 Lincoln Ave
(701) 324-2154

- Optometrist
  Kourajian, Steven C., OD

St Aloisius Medical Center
325 E Brewster St
(701) 324-4651

- Family Practice
  Nyhus, Charles D., MD
- Internal Medicine
  Cowan, Hugh B., MD
- Pediatrics
  Martine, Cynthia, MD

Hazelton

Hazelton Clinic
343 Main St
(701) 782-4338

- General Practice
  Knecht, John F., MD

Hazen

Dakota Eye Institute
34 West Main
(701) 222-3937

- Ophthalmology
  Fortney, Aaron C., MD

Hazen Family Eyecare PC
34 W Main St
(701) 748-6533

- Optometrist
  Czywczynski, Derek D., OD

North Dakota (cont.)

Hazen (cont.)

Sakakawea Clinic
510 8th Ave NE
(701) 748-7266

- Family Practice
  Blacksmith, Michael R., DO
  Jackson, Orlan D., DO
  Kaspari, Thomas D., MD
  Zimmerman, Rodney L., MD

Sakakawea Hazen Clinic
517 8th Ave NE
(701) 748-2256

- Family Practice
  Blacksmith, Michael R., DO
  Zimmerman, Rodney L., MD

Sakakawea Medical Center
510 8th Ave NE
(701) 748-2256

- Family Practice
  Blacksmith, Michael R., DO
  Garman, Aaron M., MD
  Jackson, Orlan D., DO
  Jon-Klindworth, Jacinta, MD

Hettinger

West River Eye Center
1000 Highway 12
(701) 567-6133

- Optometrist
  Kludt, John F., OD

West River Health Services
1000 Highway 12
(701) 567-4561

- Family Practice
  Boschee, Tracy B., DO
  Houle, Catherine E., MD
  Jacobsen, Thomas E., MD
  Joyce, John P., MD
  Thorngren, Frank A., MD
  Wellman, Stacie M., MD
- General Practice
  Sheffield, Jennifer L., MD
- General Surgery
  Elder, William C., MD
- Geriatrics
  Hoerauf, Kent R., MD
  Willoughby, Brian G., MD

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PARTICIPATING PHYSICIANS

North Dakota (cont.)
Hettinger (cont.)

West River Health Services (cont.)
- Internal Medicine
  Hoerauf, Kent R., MD
  Ranum, Joshua C., MD
  Willoughby, Brian G., MD
- Obstetrics/Gynecology
  Jacobsen, Thomas E., MD
- Pediatrics
  Ketterling, Ellen L., MD
  Ranum, Carrie Ann K., MD
- Podiatry, Surgical Chiropody
  Kilwein, Steven C., DPM
- Radiology
  Kristy, Mark S., MD

Hillsboro

Sanford Health Hillsboro Clinic
315 E Caledonia Ave
(701) 636-5311
- Family Practice
  Breen, Charles J., MD
  Luithle, Timothy J., MD
- Radiology
  Asheim, Jason, MD

Jamestown

Catalyst Medical Center, PC
2422 20th Street SW
(701) 365-8700
- Otology, Laryngology, Rhinology
  Mathison, Susan M., MD

Central Valley Health District
122 2nd Street NW
(701) 252-8130
- Emergency Medicine
  Jystad, Philip N., MD

Essentia Health Jamestown Clinic
2430 20th St SW
(701) 253-5300
- Anesthesiology (MD)
  Chan, Leslie, MD
- Cardiovascular Disease
  Jenny, Donald B., MD
- Family Practice
  Howden, Richard L., MD
  Torrance, James R., MD

North Dakota (cont.)
Jamestown (cont.)

Essentia Health Jamestown Clinic (cont.)
- General Surgery
  Cunningham, Crystal M., MD
  Meier, Mark A., MD
  Stone, James R., MD
  Wasemiller, Paul S., MD
- Internal Medicine
  Briggs, Michael S., MD
  Jenny, Donald B., MD
  Kapphahn, Samantha, DO
  Khanal, Binaya, MD
  Skogen, Jeffrey W., MD
  Tiwari, Sumit, MD
  Whitbeck, Matthew G., MD
- Nephrology
  Qarni, Ahmer H., MD
  Skogen, Jeffrey W., MD
- Oncology
  Mohammed Rafiyath, Shamudheen, MD
- Orthopedic Surgery
  Lantz, Steven W., MD
  Sehgal, Bantoo, MD
- Otology, Laryngology, Rhinology
  Belizario, Francisco Y., MD
  Buell, Brad R., MD
  Tsen, David W., MD
- Pediatrics
  Quanrud, Myra J., MD
- Podiatry, Surgical Chiropody
  Hofsommer, Lee A., DPM
  Kang, Jill, DPM
- Pulmonary Diseases
  Briggs, Michael S., MD
- Radiology
  Crider, Mitchell H., MD
- Sports Medicine
  Ostlie, Daniel K., MD
- Urology
  Khan Galzie, Sardar Mohammad Farhan, MD

Jamestown Eyecare
921 25 St SW
(701) 252-4415
- Optometrist
  Patzman, Taya M., OD

North Dakota (cont.)
Jamestown (cont.)

Jamestown Regional Medical Center
2422 20th St SW
(701) 252-1050
- General Surgery
  Mohs, Thomas J., MD
  Saunders, David S., MD
  Stone, James R., MD
- Obstetrics/Gynecology
  Barrett, Mary T., MD
  Hutchens, Thomas P., MD
  Stewart, Jeanne M., MD
- Orthopedic Surgery
  Dean, Michael T., MD
- Podiatry, Surgical Chiropody
  Harris, Manuel C., DPM

Jamestown Regional Medical Center /ER Physicians
2422 20th St SW
(701) 252-1050
- Family Practice
  Jonas, Roxanne L., MD
  Larson, Richard L., MD
  Martin, Richard E., MD
  McCarthy, John P., MD
  Mitzel, Fredrick, MD
  Omotunde, Joshua O., MD
- Geriatrics
  Mitzel, Fredrick, MD
- Internal Medicine
  Hasnain, Mohsin, MD
- Ophthalmology
  Larsen, Raymond L., MD
- Pediatrics
  Westrate, Kenneth J., MD
- Sports Medicine
  Mitzel, Fredrick, MD

Jamestown Regional Medical Center/Radiology
2422 20th St SW
(701) 252-1050
- Radiology
  Reddy, Madhusudhan P., MD
  Wade, Gary L., MD
  Walklett, William D., MD

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING PHYSICIANS

North Dakota (cont.)
Jamestown (cont.)

Larsen, Raymond, MD
916 5th Ave NE
(701) 252-9020

- Ophthalmology
  Larsen, Raymond L., MD

Lifetime Vision Source
300 2nd Ave NE
(701) 252-2020

- Optometrist
  Mathison, Tamara K., OD
  Motacek, Adam J., OD
  Motacek, Ashley M., OD
  Motacek, Lawrence J., OD
  Rene, Thomas J., OD

Matthys, Gary A., MD, Plc
904 5th Ave NE
(701) 241-9300

- Orthopedic Surgery
  Matthys, Gary, MD

Precision Diagnostic Services, Inc
2422 20 St SW
(701) 234-9667

- Internal Medicine
  Khosla, Seema, MD
- Pulmonary Diseases
  Khosla, Seema, MD

Professional Eyecare Center
210 10th St SE
(701) 252-5000

- Optometrist
  Frohlich, Douglas L., OD
  Fronk, Kent, OD

Sanford Health 2nd Ave Clinic
300 2nd Ave NE
(701) 251-6000

- Family Practice
  Brickner, Derek M., MD
  Johnson, Larry E., MD
  Jystad, Philip N., MD
  Mathison, David, MD
  McMillan, William K., MD
  Skari, Bradly, MD
- Obstetrics/Gynecology
  Klemin, Peter L., MD

North Dakota (cont.)
Jamestown (cont.)

Sanford Health 2nd Ave Clinic
300 2 Ave NE
(701) 251-6000

- Orthopedic Surgery
  Norberg, Jon D., MD
- Peripheral Vascular Diseases Or Surgery
  Reil, Todd, MD
- Radiology
  Asheim, Jason, MD

Sanford Health Hearing Center
300 2nd Ave NE
(701) 252-4100

- Internal Medicine
  Mahale, Adit, MD
- Nephrology
  Mahale, Adit, MD

Sanford Health Jamestown Clinic
904 5th Ave NE
(701) 253-4000

- Cardiovascular Disease
  Clardy, David J., MD
  Manjunath, Heeraimangalore S., MD
- Dermatology
  Holzwarth, Ryan L., MD
- Family Practice
  Andersen, Jeffrey B., MD
  Brickner, Derek M., MD
  Johnson, Larry E., MD
  Jystad, Philip N., MD
  Mathison, David, MD
  McMillan, William K., MD
  Muhs, David M., MD
  Schatz, Sarah, MD
  Skari, Bradly, MD
  Sorlie, Mandy, MD
- General Surgery
  Maier, Steven C., MD
- Internal Medicine
  Geier, Debra A., MD
  Mahale, Adit, MD
  Manjunath, Heeraimangalore S., MD
- Nephrology
  Mahale, Adit, MD
- Neurology
  Faber, Kevin M., MD

North Dakota (cont.)
Jamestown (cont.)

Sanford Health Jamestown Clinic (cont.)

- Obstetrics/Gynecology
  Dahl, Stephanie K., MD
- Oncology
  Gross, Gerald G., MD
- Ophthalmology
  Jordan, Andrew A., MD
- Physical Medicine and Rehabilitation
  Klava, William N., MD
- Podiatry, Surgical Chiropody
  Anderson, Brad C., DPM
  Arness, Richard E., DPM
- Psychiatry (MD/DO)
  Karaz, Samy, MD
- Radiology
  Marsden, Richard J., MD
- Urology
  Toni, Conrad, MD

Sanford Health Jamestown Clinic
904 5th Ave NE
(701) 253-4000

- Endocrinology
  Dahl, Stephanie K., MD
- Internal Medicine
  Mahale, Adit, MD
  Terstriep, Shelby, MD
- Nephrology
  Mahale, Adit, MD
- Obstetrics/Gynecology
  Dahl, Stephanie K., MD
- Oncology
  Terstriep, Shelby, MD
- Orthopedic Surgery
  Norberg, Jon D., MD
- Peripheral Vascular Diseases Or Surgery
  Reil, Todd, MD
- Physical Medicine and Rehabilitation
  Klava, William N., MD
- Psychiatry (MD/DO)
  Karaz, Samy, MD
- Radiology
  Asheim, Jason, MD
  Marsden, Richard J., MD

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING PHYSICIANS

North Dakota (cont.)
Jamestown (cont.)

South Central Human Service Center
520 3rd St NW
(701) 253-6300

- Psychiatry (MD/DO)
  McLean, Andrew J., MD
  Robles, Maria Diana E., MD

Kenmare

Colby, David, OD
28 2nd St NW
(701) 385-4004

- Optometrist
  Colby, David P., OD

Kenmare Health Center
307 1st Ave NW
(701) 385-4283

- Emergency Medicine
  Nelson, John G., MD
- Family Practice
  Oni, Olubukola O., MD
- Podiatry, Surgical Chiropody
  Racz, Roger S., DPM

Killdeer

St Josephs Hospital/Killdeer Clinic
150 Central Ave N
(701) 764-5822

- Emergency Medicine
  Cassidy, Michael L., MD
- Pediatrics
  Ahmed, Ibrahim M., MD

Kulm

Wishek Rural Health Clinic/Kulm
4 First Ave SE
(701) 647-2345

- Family Practice
  Kosiak, Donald J., MD
  Oliveira-Filho, Edgar K., MD
  Patel, Suresh K., MD
- General Practice
  Vegiraju, Thammi R., MD
- Internal Medicine
  Thirumala Reddy, Joseph R., MD

North Dakota (cont.)
Lamoure

Sanford Health Lamoure Clinic
100 1st Ave SW Ste 2
(701) 883-5048

- Internal Medicine
  Nagala, Vani, MD
- Radiology
  Asheim, Jason, MD
  Marsden, Richard J., MD

Langdon

Cavalier County Memorial Hospital
909 2nd St
(701) 256-6120

- Family Practice
  Hutchison, Rose E., MD
  Khromachou, Tamim R., MD
  Magidow, Michael, MD
  Noyes, Randal H., DO
  Patel, Suresh K., MD
  Peterson, Mark G., MD
  Selland, Brian L., MD
- General Surgery
  Khokha, Inder V., MD
- Orthopedic Surgery
  Schall, David M., MD
- Psychiatry (MD/DO)
  Peterson, Thomas M., MD

CCMH Clinic
901 2nd St
(701) 256-6120

- Family Practice
  Hutchison, Rose E., MD
  Khromachou, Tamim R., MD
  Magidow, Michael, MD
  Noyes, Randal H., DO
  Patel, Suresh K., MD
  Peterson, Mark G., MD
  Selland, Brian L., MD
- Infectious Diseases
  Hargreaves, James E., DO
- Internal Medicine
  Hargreaves, James E., DO

Eklof, Richard, OD
324 9th Ave
(701) 256-2269

- Optometrist
  Eklof, Richard H., OD

North Dakota (cont.)
Lidgerwood

Sanford Health Lidgerwood Clinic
21 Wiley Ave S
(701) 538-4189

- Internal Medicine
  Nagala, Vani, MD
- Radiology
  Marsden, Richard J., MD

Sanford Health Lidgerwood Clinic
21 Wiley Ave S
(701) 538-4189

- Radiology
  Asheim, Jason, MD

Linton

Dakota Eye Institute
100 Broadway N
(701) 222-3937

- Optometrist
  Balliet, Paul, OD
  Otteson, Guy G., OD
  Otteson, Kyle M., OD

Linton Hospital
518 N Broadway
(701) 254-4511

- General Practice
  Knecht, John F., MD

Linton Medical Center
511 Elm Ave
(701) 254-4531

- General Practice
  Knecht, John F., MD
- General Surgery
  Khokha, Inder V., MD

Lisbon

Essentia Health Lisbon Clinic
819 Main St
(701) 683-4134

- Family Practice
  Diegel, Tanya L., DO
- General Surgery
  Mohs, Thomas J., MD
  Wasemiller, Paul S., MD
- Podiatry, Surgical Chiropody
  Hofsommer, Lee A., DPM
- Radiology
  Crider, Mitchell H., MD
  Crowe, Christopher H., MD

Providers are subject to be added or terminated without notice.

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PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING PHYSICIANS

North Dakota (cont.)
Lisbon (cont.)

Essentia Health Lisbon Clinic (cont.)
- Urology
  Strinden, Steven P., MD

Family Medical Clinic, PC
10 9th Ave E
(701) 683-4711
- Family Practice
  Sheets-Olson, Barbara A., MD

Fercho Cataract & Eye Clinic
17 11 Ave W
(701) 235-0561
- Ophthalmology
  Rodenbiker, Harold T., MD

Lisbon Area Health Service-ER
905 Main St
(701) 683-6400
- Emergency Medicine
  Topouzian, Keri B., DO
- Family Practice
  Fernandez, Oscar O., MD
  Loperena, Rudolf, MD
- General Practice
  Bermudez, Christopher J., MD
- General Surgery
  Fernandez, Oscar O., MD

Lisbon Area Health Services
905 Main St
(701) 683-6400
- Emergency Medicine
  Topouzian, Keri B., DO
  Wiltse, Richard J., MD
- Family Practice
  Crowley, Lana R., MD
  Gustafson, Jean, MD
  Martin, Richard E., MD
  Michaud, Brian S., DO
  Mitzel, Fredrick, MD
  Overvold, Angel D., DO

Lisbon Vision Center, P.C.
17 11th Ave W
(701) 683-5815
- Optometrist
  Mairs, Corey R., OD

North Dakota (cont.)
Lisbon (cont.)

Sanford Health Lisbon Clinic
102 10th Ave W
(701) 683-2214
- Internal Medicine
  Nagala, Vani, MD
- Podiatry, Surgical Chiropody
  Arness, Richard E., DPM

Sanford Health Lisbon Clinic
102 10th Ave W
(701) 683-2241
- Radiology
  Mickelson, Daniel G., MD

Maddock

Heart of America Johnson Clinic Maddock
301 Roosevelt Ave
(701) 438-2555
- Family Practice
  Fernandez, Oscar O., MD
  Kremer, Ashely J., MD
  Schoneberg, Steven B., MD
  Seiler, Hubert L., MD
- General Surgery
  Fernandez, Oscar O., MD
- Geriatrics
  Seiler, Hubert L., MD

Mandan

Bis-Man Eyecare Associates
1000 Old Red Trail
(701) 663-0012
- Optometrist
  Borstad, Josh E., OD
  Erhardt, Jason D., OD
  Neumiller, Joel D., OD

Dakota Physical Therapy, PC
2004 Twin City Dr
(701) 667-0745
- Ambulatory Surgical Center
  Dakota Physical Therapy, PC

Eyecare Professionals
113 3rd Ave NW
(701) 663-2020
- Optometrist
  Helmers, James A., OD
  Helmers, John N., OD
  Long, Daniel J., OD

North Dakota (cont.)
Mandan (cont.)

Grube Retina Clinic, PC
107 3rd Ave NW
(701) 751-2131
- Ophthalmology
  Grube, Thomas J., MD

Regional Medical Center
2008 Twin City Dr
(701) 667-1000
- Family Practice
  Addy, Boyd F., MD

Sanford East Mandan Clinic
102 Mandan Ave
(701) 667-5000
- Family Practice
  Johnson, Anthony T., MD
  Thorson, Thomas A., MD
  Wolf, Terry L., DO
- Pathology
  Fisher, Catherine P., MD
- Radiology
  Fogarty, Edward F., MD
  Iwamoto, Matthew M., MD

Sanford North Mandan Clinic
910 18th St NW
(701) 667-5100
- Family Practice
  Beckwith, Jennifer A., MD
  Belzer-Curl, Gretchen G., MD
  Klein, Dale A., MD
  Lange, Darwin K., MD
  Shultz Piatz, Kinsey A., MD
- General Surgery
  Boyko, Kimber M., MD
- Pathology
  Fisher, Catherine P., MD
- Peripheral Vascular Diseases Or Surgery
  Boyko, Kimber M., MD
- Psychiatry (MD/DO)
  Belzer-Curl, Gretchen G., MD
- Thoracic Surgery
  Boyko, Kimber M., MD

St Alexius Mandan Clinic North
2500 Sunset Drive NW
(701) 667-4600
- Family Practice
  Archuleta, Laura J., MD

Providers are subject to be added or terminated without notice.

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PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING PHYSICIANS

North Dakota (cont.)

Mandan (cont.)

St Alexius Mandan Clinic North (cont.)
- Family Practice (continued)
  Bramati, Patricia, MD
  Froelich, Joy A., MD
  McDonough, Denise M., MD
  Price, Brandon J., DO

Vision Source Mandan
107 6th Ave NW
(701) 663-0313
- Optometrist
  Little, Daniel C., OD
  Schauer, Brittany G., OD
  Schmidt, Terry D., OD

Mayville

Bagan Strinden Vision
42 6 Ave SE
(701) 293-8242
- Ophthalmology
  Strinden, Thomas I., MD

Bagan Strinden Vision
34 Center Ave Suite B
(701) 293-8242
- Ophthalmology
  Strinden, Thomas I., MD

Rexine, Michael OD PC
34 Center Ave S
(701) 786-2666
- Optometrist
  Rexine, Michael K., OD

Sanford Mayville
600 1st St SE
(701) 786-4500
- Family Practice
  Andersen, Jeffrey B., MD
  Ostlie, Jane, MD
  Skari, Bradly, MD
- General Surgery
  Garcia, Luis A., MD
- Internal Medicine
  Mehus, James, MD
- Neurology
  Faber, Kevin M., MD
- Obstetrics/Gynecology
  Lesteberg, Keith G., MD

North Dakota (cont.)

Mayville (cont.)

Sanford Mayville (cont.)
- Pediatrics
  Mehus, James, MD
- Podiatry, Surgical Chiropody
  Arness, Richard E., DPM
- Urology
  Sawchuk, Theodore J., MD

Sanford Mayville
600 1st Street SE
(701) 786-4500
- Family Practice
  Andersen, Jeffrey B., MD
  Berntson, Mark E., MD
  Lokensgard Pierce, Karin A., MD
  Ostlie, Jane, MD
  Stayman, Mathew L., MD
- General Surgery
  Fabian, Matthew W., DO
  Garcia, Luis A., MD
  Stover, David A., MD
- Internal Medicine
  Mehus, James, MD
- Neurology
  Faber, Kevin M., MD
- Obstetrics/Gynecology
  Lesteberg, Keith G., MD
  McCann, Michelle, MD
- Orthopedic Surgery
  Prochaska, Vern, MD
- Pediatrics
  Mehus, James, MD
- Podiatry, Surgical Chiropody
  Arness, Richard E., DPM
  Cullen, Nicole, DPM
- Radiology
  Asheim, Jason, MD
  Marsden, Richard J., MD
- Urology
  Sawchuk, Theodore J., MD

McClusky

Northland Community Health Center- McClusky
122 2nd St E
(701) 363-2296
- Family Practice
  Vaagen, Jeffrey L., MD

North Dakota (cont.)

McVille

Dunham, Thomas, OD
116 Main St
(701) 322-5111
- Optometrist
  Dunham, Thomas, OD

Nelson County Health System Clinic
108 N Main St
(701) 322-4347
- Family Practice
  Czarnik, Tamarack R., MD
  Martinson, Erling D., MD

Michigan

Hagen, Boyd, MD dba Michigan Community Medical Clinic
115 South Street
(701) 259-2119
- General Practice
  Hagen, N Boyd, MD

Milnor

St Francis Healthcare Campus dba Milnor Clinic
401 Main St
(701) 427-5317
- Family Practice
  Emery, Patrick E., MD
  Mayo, William M., MD
- Orthopedic Surgery
  Johnson, James F., MD

Minot

Bradley, Jason L, OD
207 S Main St
(701) 852-5626
- Optometrist
  Bradley, Jason L., OD

Center For Family Medicine/Minot
1201 11th Ave SW
(701) 858-6700
- Emergency Medicine
  Olson, Paul D., MD
- Family Practice
  Best, Lyle G., MD
  Devlin, Kwanza N., MD
  Krohn, Kimberly T., MD
  Olson, Paul D., MD
  Schlecht, Kristina A., MD

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING PHYSICIANS

Center For Family Medicine/Minot (cont.)
- Family Practice (continued)
  Stripe, Stephen C., MD
  Talley, Wade, MD
  Thomas-Eapen, Neena E., MD

Dakota Boys Ranch
6301 19th Ave NW
(701) 857-4224
- Psychiatry (MD/DO)
  Martinsen, Wayne L., MD

Dakota Family Services
6301 19th Ave NW
(701) 837-6508
- Internal Medicine
  Mattson, Steven R., MD
- Pediatrics
  Mattson, Steven R., MD
- Psychiatry (MD/DO)
  Martinsen, Wayne L., MD

Deschamp, Cameron, OD, PC
3900 S Broadway
(701) 839-8726
- Optometrist
  Deschamp, Cameron T., OD
  Hjelden, Melissa P., OD

Dr Jaime L Haaland OD PC
10 1st St SW
(701) 839-5000
- Optometrist
  Haaland, Jaime L., OD

Erickson, Arthur W, OD
2400 SW 10th St
(701) 858-0849
- Optometrist
  Erickson, Arthur W., OD

Face & Jaw Surgery Center
2615 Elk Drive Suite 3
(701) 852-3421
- Oral Surgery
  Afshar, Andrew A., DDS
  Deatherage, Joseph R., DMD
  Glosenger, Jeremiah J., DDS

Farah, Samir, MD
20 Burdick Expy W
Ste 500
(701) 852-5236
- Endocrinology
  Farah, Samir I., MD
- Internal Medicine
  Farah, Samir I., MD

First District Health Unit Family Planning
801 11th Ave SW
(701) 852-1376
- Emergency Medicine
  Jethwa, Ratilal N., MD
- Family Practice
  Jethwa, Ratilal N., MD

Great Planes Reproductive Centers, PA
400 Burdick Expy E
(800) 508-9763
- Endocrinology
  Corfman, Randle S., MD

Jethwa, Ratilal, MD
20 W Burdick Expwy #302
(701) 852-4720
- Emergency Medicine
  Jethwa, Ratilal N., MD
- Family Practice
  Jethwa, Ratilal N., MD

Johnson Eyecare and Eyewear
1525 31 Ave SW Suite E
(701) 857-6050
- Optometrist
  Ahmann, Jessica, OD
  Johnson, Darin L., OD

Mattson, Steven, MD
831 S Broadway #102
(701) 857-4224
- Internal Medicine
  Mattson, Steven R., MD
- Pediatrics
  Mattson, Steven R., MD

Midwest Vision Centers
2400 SW 10th St
(701) 852-6836

Midwest Vision Centers (cont.)
- Optometrist
  Lawson-Kopp, Wendy K., OD

Neck & Back Pain Clinic
315 Main St S Ste 102
(701) 839-6664
- Physical Medicine and Rehabilitation
  Mehta, Rajnikant L., MD

North Central Human Service Center
1015 S Broadway Ste 18
(701) 857-8500
- Psychiatry (MD/DO)
  Eick, Thomas J., DO
  McLean, Andrew J., MD
  Schield, Laura B., MD

Northland Community Health Center
1600 2nd Ave SW Ste 19
(701) 377-4758
- Family Practice
  Vaagen, Jeffrey L., MD
- Internal Medicine
  Vaagen, Jeffrey L., MD

Nyre, Robert, OD
1100 N Broadway Ste 110
(701) 852-2020
- Optometrist
  Linster, Carolyn A., OD
  Nyre, Robert P., OD

Optical Outlook
1100 31st Ave SW Ste 2
(701) 837-0022
- Optometrist
  Moen, Bruce A., OD

Psychiatric Services, PC
601 18th Ave SE Ste 101
(701) 852-8798
- General Practice
  Bell, Lloyd M., DO
- Psychiatry (MD/DO)
  Bell, Lloyd M., DO

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING PHYSICIANS

North Dakota (cont.)
Minot (cont.)

Sanford Health Occupational Medicine Clinic
801 21st Avenue SE
(701) 839-5902

- Emergency Medicine
  Blanchard, Joel H., MD
- Family Practice
  Blanchard, Joel H., MD

Sanford Health Walk-In Clinic
801 21st Ave SE
(701) 838-3150

- Cardiovascular Disease
  Reddy, Karthik, MD
- Emergency Medicine
  Grooms, Paul G., DO
- Family Practice
  Blanchard, Joel H., MD
  Bossort, James B., MD
  Evans, Patrick J., MD
  Hoggarth, Tonia L., MD
  Klop, Krissondra L., DO
  Moen, R J., MD
  Patel, Niral R., MD
  Rauta, Olimpia, MD
  Wilson Hall, Nicole, DO
  Wyman, Allen E., MD
- Internal Medicine
  Reddy, Karthik, MD
- Pathology
  Fisher, Catherine P., MD
- Pediatrics
  Cleveland, Chris, MD
- Radiology
  Fogarty, Edward F., MD
  Iwamoto, Matthew M., MD
  McIntee, Michael J., MD
  Miller, John A., MD
  Tello-Skjerseth, Christina, MD

St Alexius Clinic
2700 8th St NW
(701) 857-8000

- Cardiovascular Disease
  Mahr, Nicholas C., MD
  Mathew, Boban, MD
- Internal Medicine
  Monteau, Lance M., MD
  Paulo, Monica T., MD

North Dakota (cont.)
Minot (cont.)

St Alexius Clinic (cont.)

- Obstetrics/Gynecology
  Hutchens, Thomas P., MD
  Witt, John M., MD
- Pulmonary Diseases
  Paulo, Monica T., MD

The Bone & Joint Center, PC
1600 2nd Ave SW Ste 19
(701) 857-8000

- Hand Surgery
  Pierce, Troy D., MD
- Neurological Surgery
  Moore, Michael R., MD
- Orthopedic Surgery
  Ackerman, Duncan B., MD
  Hart, Mark B., MD
  Moore, Michael R., MD
  Pierce, Troy D., MD

The Cortino Group Ltd , LLC
2400 10 St SW Ste 418
(701) 852-7588

- Family Practice
  Corpus, Ian Manuel G., MD
- General Surgery
  Corpus Jr, Eduardo T., MD

Total Transformation Clinic
317 16th St NW
(701) 837-9900

- Internal Medicine
  Madziwa, Felistas H., MD

Trinity Health dba Oral & Facial Surgery Center
307 5th Ave SE
(701) 857-2600

- Oral Surgery
  McMahon, Michael G., DDS

Trinity Health dba Trinity Riverside Campus
1900 8th Ave SE
(701) 857-5998

- Psychiatry (MD/DO)
  Colletti, Richard A., MD
  Dallolio, Michael J., MD
  Evans, Booker T., MD
  Martinsen, Wayne L., MD
  Meunier, Ronny P., MD
  Richards, Deidre L., MD

North Dakota (cont.)
Minot (cont.)

Trinity Health dba Trinity Riverside Campus (cont.)

- Psychiatry, Neurology
  Johnson, Robin, MD
  Sheth, Pravina B., MD
  Warhol, Peter J., MD

Trinity Hospitals
1 Burdick Expressway W
(701) 857-5252

- Psychiatry (MD/DO)
  Macey, Helen L., MD

Trinity Medical Group
831 S Broadway
(701) 857-5650

- Endocrinology
  Sethi, Muhammad, MD
- Family Practice
  Fife, Todd, MD
  Mullin, Sarah L., MD
- Internal Medicine
  Kim, Kwanghee, MD
  Makoni, Stephen, MD
  Sheehan, John E., MD
- Obstetrics/Gynecology
  Billings, David A., MD
  Madland, William T., MD
  Nordell, Margaret C., MD
  Schaffner, Carol M., MD
- Oncology
  Makoni, Stephen, MD
  Watanaboonyakhet, Patanit, DO
- Radiation Therapy
  Collins, Kevin B., MD
- Radiology
  Grant, Michael, MD

Trinity Medical Group
407 3rd Street SE
(701) 857-5871

- Anesthesiology (MD)
  Gauthier, Robert L., MD
  He, Chaoying, MD
  Lagrone, Robert A., MD
  Lewis, Aaron D., MD
  Lin, Steven C., MD
  Shidyak, Gus E., MD
  Smith, Lakesha S., MD
  Smolik, Martin J., MD
  Tin-Maung, Brian, MD

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PARTICIPATING PHYSICIANS

Trinity Medical Group (cont.)

- Anesthesiology (MD) (continued)
  Torpy, Janet M., MD
- Cardiovascular Disease
  Rothberg, Martin L., MD
- Family Practice
  Young, Marcel P., MD
- Gastroenterology
  Cader, Rukshana N., MD
  Chaudhary, Ayaz J., MD
- General Surgery
  Brandt, Jerel J., DO
  Jun, Hong J., MD
  Shipley, Frank E., MD
  Wease, Gary, MD
- Nephrology
  Ho, Warren R., MD
- Neurological Surgery
  Eichler, Marc E., MD
  Kennedy, Roger F., MD
- Obstetrics/Gynecology
  Amsbury, John D., DO
  Bedell, Timothy H., MD
- Ophthalmology
  Bouchard Kindy, Evelyne B., MD
  Jacobs, David J., MD
  Sanke, Robert F., MD
  Williams, Darrell P., MD
  Wolsky, Chad J., MD
- Orthopedic Surgery
  Joshi, Ravindra, MD
  Kearney, Sean P., MD
  Macleod, Paul R., MD
  Muawwad, Rafik, MD
  Scott, Earl D., MD
  Uthus, David M., MD
- Otology, Laryngology, Rhinology
  Noel, Mark D., DO
  Schmitt Jr, John E., MD
  Sule, Sandeep D., MD
  Thomas, Robert G., MD
- Plastic Surgery
  Kochevar, Andrew, MD
- Psychiatry (MD/DO)
  Colletti, Richard A., MD
  Macey, Helen L., MD
  Meunier, Ronny P., MD
- Psychiatry, Neurology
  Drexler, Jeffrey A., MD
  Gee, Dennis H., MD

Trinity Medical Group (cont.)

- Psychiatry, Neurology (continued)
  Johnson, Robin, MD
  Sheth, Pravina B., MD
- Thoracic Surgery
  Phillips, Christopher C., MD
- Urology
  Akhter, Saeed, MD
  Carmack, Adrienne J., MD
  Chiang, George J., MD
  Chinn, Douglas O., MD
  Jang, Thomas L., MD
  Kader, Andrew K., MD
  Nelson, Dayne M., MD
  Neto, Manuel V., MD
  Van Bibber, Michael, MD
  Yeung, Chi Kong, MD
  Zorn, Kevin C., MD

Trinity Medical Group
400 Burdick Expy E
(701) 857-7387

- Allergy
  Reder, Michael W., MD
- Cardiovascular Disease
  Chikwendu, Valentine C., MD
  Dodin, Emad M., MD
  Percell, Robert L., MD
  Turk, Samir M., MD
- Family Practice
  Albertson, Marisa A., MD
  Bansode, Gaurav A., MD
  Crowley, Lana R., MD
  Heninger, Robert D., MD
  Hurly, Mary T., MD
  Kihle, Kenneth W., MD
  Ree, Cheryl R., MD
  Reeve, Howard E., MD
  Roach, Bruce L., MD
  Smothers, Joe L., DO
- Gastroenterology
  Cader, Rukshana N., MD
  Chaudhary, Ayaz J., MD
- General Practice
  Kihle, Kenneth W., MD
- Geriatrics
  Reeve, Howard E., MD
- Hand Surgery
  Cumani, Blendi C., MD

Trinity Medical Group (cont.)

- Hand Surgery (continued)
  Williams, Daniel C., MD
- Infectious Diseases
  Alkhalaf, Abdulhamid, MD
  Nwaigwe, Casmiar I., MD
- Internal Medicine
  Chaudhary, Ayaz J., MD
  Chikwendu, Valentine C., MD
  Justino, Edmundo S., MD
  Lowe, Douglas L., MD
  Percell, Robert L., MD
  Pugatch, Bruce S., MD
  Suliman, Faroug Y., MD
  Turk, Samir M., MD
- Nuclear Medicine
  Keller, Kenneth J., MD
- Obstetrics/Gynecology
  Amsbury, John D., DO
  Bedell, Heather L., MD
  Bedell, Timothy H., MD
  Bozeman, James D., DO
- Pediatrics
  Cadwalader, Ann M., MD
  Holland, Michael J., MD
  Jones, Frederick W., MD
  Messerly, Melissa M., MD
  Montanez Concepcion, Ana M., MD
  Osuala, Friday, MD
  Peterson, Diana L., MD
  Stanga, Sean D., MD
  Tvedt-Davis, Heather J., MD
  Udekwe, Anthony A., MD
- Podiatry, Surgical Chiropody
  Albers, Aaron J., DPM
  Racz, Roger S., DPM
  Williams, Tyson D., DPM
- Radiation Therapy
  Kamba, Thompson T., MD
- Radiology
  Haddon, Margaret J., MD
  Hanjani, Farzodd E., MD
  Keller, Kenneth J., MD
  Lewis, Scott B., MD
  Miller, James A., MD
  Naidu, Sridhar, DO
  Serebrennik, Mikhail, MD
  Turneau, Kevin J., MD

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Trinity Medical Group (cont.)

- Rheumatology
  Diri, Erdal, MD
- Urology
  Akhter, Saeed, MD
  Chiang, George J., MD
  Chinn, Douglas O., MD
  Jang, Thomas L., MD
  Kader, Andrew K., MD
  Neto, Manuel V., MD
  Van Bibber, Michael, MD

Trinity Medical Group
101 3rd Ave SW
(701) 857-5500

- Family Practice
  Mattern, Dawn D., MD
- General Surgery
  Brandt, Jerel J., DO
  Casey, Gregory D., MD
  Cassidy, Scott A., MD
  Jun, Hong J., MD
  Lee, Lane M., DO
  Shipley, Frank E., MD
  Wease, Gary, MD
- Oral Pathology
  Lee, Lane M., DO
- Orthopedic Surgery
  Benaissa, Rafik, MD
  Joshi, Ravindra, MD
  Kindy, Alexandre S., MD
  Macleod, Paul R., MD
  Muawwad, Rafik, MD
  Scott, Earl D., MD
  Uthus, David M., MD
- Otology, Laryngology, Rhinology
  Gasser, Charles R., MD
  Noel, Mark D., DO
  Schmitt Jr, John E., MD
  Sule, Sandeep D., MD
  Thomas, Robert G., MD
- Pediatrics
  Carver, Thomas D., DO
  Moss, John E., MD
  Zak, Linda K., MD
- Thoracic Surgery
  Phillips, Christopher C., MD
  Shipley, Frank E., MD
- Urology
  Lee, Lane M., DO

Trinity Medical Group
20 Burdick Expressway W
(701) 857-5741

- Internal Medicine
  Durkin, Robert J., DO
  Verhey, Jeffrey T., MD
- Nephrology
  Ho, Warren R., MD
  Rohloff, Walter, MD
  Saffarian, Nasser, MD
- Neurological Surgery
  Corbett, Joseph E., MD
  Eichler, Marc E., MD
  Kennedy, Roger F., MD
- Neurology
  Kellenberger, Edward F., MD
  Kordlar, Bahram A., MD
  Lee, Kon Hweii, MD
  Robbie, Ahmed T., MD
  Said, Areen T., MD
- Psychiatry, Neurology
  Mosley, Anthony D., MD
  Wuthrich, Catherine H., MD
- Pulmonary Diseases
  Verhey, Jeffrey T., MD
- Urology
  Yeung, Chi Kong, MD

Trinity Medical Group
1 Burdick Expy W
(701) 857-5000

- Anesthesiology (MD)
  Charity, Lynette D., MD
  Sedlacek, Michael A., MD
  Smith, Lakesha S., MD
  Torpy, Janet M., MD
  Wu, Joanne, MD
- Cardiovascular Disease
  Chikwendu, Valentine C., MD
  Dodin, Emad M., MD
  Percell, Robert L., MD
  Turk, Samir M., MD
- Emergency Medicine
  Franks, Kevin T., DO
  Herington, Aaron C., MD
  Hoff, Ann M., MD
  Jackson, Walter O., MD
  Jethwa, Ratilal N., MD
  Kehoe, Cullen T., DO
  Kitagawa, Benji K., DO

Trinity Medical Group (cont.)

- Emergency Medicine (continued)
  Knutson, Scott E., MD
  Nelson, John G., MD
  Novey, Walter L., MD
  Olson, Paul D., MD
  Puetz, Catherine, MD
  Salaman, Erica, DO
  Sather, Jeffrey A., MD
  Stull, Benjamin W., MD
  Walters, Justin A., MD
  Zipin, Kevan M., MD
- Endocrinology
  Sethi, Muhammad, MD
- Family Practice
  Alkilani, Suhail, MD
  Bansode, Gaurav A., MD
  El Hoyek, Georges M., MD
  Gutierrez, Francisco, MD
  Kitagawa, Benji K., DO
  Knutson, Scott E., MD
  Padgett, Danial R., MD
  Pannu, Birpal R., MD
  Schmidt, James A., MD
  Talebdoost, Alex F., MD
  Young, Marcel P., MD
- Gastroenterology
  Cader, Rukshana N., MD
  Chaudhary, Ayaz J., MD
- General Practice
  Nasur, Ali M., MD
- General Surgery
  Brandt, Jerel J., DO
  Casey, Gregory D., MD
  Cassidy, Scott A., MD
  Jun, Hong J., MD
  Shipley, Frank E., MD
  Wease, Gary, MD
- Hand Surgery
  Cumani, Blendi C., MD
  Williams, Daniel C., MD
- Internal Medicine
  Abdalrhim, Ahmed D., MD
  Bartaula, Rajiv, MD
  Chikwendu, Valentine C., MD
  Durkin, Robert J., DO
  Gajanayaka, Ranil, MD
  Gharbi, Nael, MD
  Gharbi, Shazel, MD
  Khan, Amer Y., MD

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Trinity Medical Group (cont.)

- Internal Medicine (continued)
  Lamichhane, Diman R., MD
  Madziwa, Felistas H., MD
  Mann, Amit, MD
  Mattson, Steven R., MD
  Norby, Alicia M., MD
  Pandove, Sandeep, MD
  Percell, Robert L., MD
  Singh, Rashpal, MD
  Turk, Samir M., MD
  Turneau, Kelly J., MD
  Verhey, Jeffrey T., MD
- Nephrology
  Ho, Warren R., MD
  Saffarian, Nasser, MD
- Neurological Surgery
  Corbett, Joseph E., MD
  Eichler, Marc E., MD
  Kennedy, Roger F., MD
- Neurology
  Kordlar, Bahram A., MD
  Lee, Kon Hweii, MD
  Robbie, Ahmed T., MD
  Said, Areen T., MD
- Nuclear Medicine
  Keller, Kenneth J., MD
- Obstetrics/Gynecology
  Amsbury, John D., DO
  Bedell, Timothy H., MD
  Billings, David A., MD
- Ophthalmology
  Bouchard Kindy, Evelyne B., MD
  Dicken, Robert A., MD
  Jacobs, David J., MD
  Sanke, Robert F., MD
  Williams, Darrell P., MD
  Wolsky, Chad J., MD
- Orthopedic Surgery
  Joshi, Ravindra, MD
  Kearney, Sean P., MD
  Kindy, Alexandre S., MD
  Macleod, Paul R., MD
  Muawwad, Rafik, MD
  Scott, Earl D., MD
  Uthus, David M., MD
- Otology, Laryngology, Rhinology
  Noel, Mark D., DO
  Schmitt Jr, John E., MD
  Sule, Sandeep D., MD

North Dakota (cont.)
Minot (cont.)

Trinity Medical Group (cont.)

- Otology, Laryngology, Rhinology (continued)
  Thomas, Robert G., MD
- Pathology
  Alakech, Badie, MD
  Jansen, Wayne L., MD
  Repp, Mark, MD
  Sigauke, Ellen, MD
- Pediatrics
  Cadwalader, Ann M., MD
  Holland, Michael J., MD
  Udekwe, Anthony A., MD
- Plastic Surgery
  Kochevar, Andrew, MD
- Psychiatry (MD/DO)
  Colletti, Richard A., MD
  Martinsen, Wayne L., MD
  Meunier, Ronny P., MD
  Richards, Deidre L., MD
- Psychiatry, Neurology
  Gee, Dennis H., MD
  Johnson, Robin, MD
  Mosley, Anthony D., MD
  Sheth, Pravina B., MD
  Warhol, Peter J., MD
  Wuthrich, Catherine H., MD
- Pulmonary Diseases
  Verhey, Jeffrey T., MD
- Radiation Therapy
  Kamba, Thompson T., MD
- Radiology
  Arov, Gregory, DO
  Chilcote, Wayne S., MD
  Grant, Michael, MD
  Haddon, Margaret J., MD
  Hanjani, Farzodd E., MD
  Keller, Kenneth J., MD
  Kramer, Michael K., MD
  Lewis, Scott B., MD
  Miller, James A., MD
  Naidu, Sridhar, DO
  Powell, Douglas, DO
  Serebrennik, Mikhail, MD
  Turneau, Kevin J., MD
  Vidovich, Danko V., MD
- Thoracic Surgery
  Phillips, Christopher C., MD
  Rothberg, Martin L., MD

North Dakota (cont.)
Minot (cont.)

Trinity Medical Group (cont.)

- Urology
  Akhter, Saeed, MD
  Carmack, Adrienne J., MD
  Chiang, George J., MD
  Chinn, Douglas O., MD
  Jang, Thomas L., MD
  Kader, Andrew K., MD
  Nelson, Dayne M., MD
  Neto, Manuel V., MD
  Van Bibber, Michael, MD
  Yeung, Chi Kong, MD
  Zorn, Kevin C., MD

Trinity Medical Group Anesthesiology
1 Burdick Expressway W
(701) 857-5124

- Anesthesiology (MD)
  Beauchamp, Bruce, DO
  Chan, Yieshan M., MD
  Gauthier, Robert L., MD
  He, Chaoying, MD
  Hill, Kenneth J., MD
  Kinyungu, Erick N., MD
  Lagrone, Robert A., MD
  Lewis, Aaron D., MD
  Lin, Steven C., MD
  Shidyak, Gus E., MD
  Smolik, Martin J., MD
  Tin-Maung, Brian, MD
  Wu, Joanne, MD

Trinity Medical Group South Ridge
1500 24th Ave SW
(701) 857-5343

- Anesthesiology (MD)
  Kinyungu, Erick N., MD
  Templer, Michael J., MD
- Dermatology
  Hunter, Jennifer L., MD
- Family Practice
  Young, Marcel P., MD
- Internal Medicine
  Mattson, Steven R., MD
- Plastic Surgery
  Kochevar, Andrew, MD

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PARTICIPATING PHYSICIANS

North Dakota (cont.)
Minot (cont.)

Trinity Oral and Maxillofacial Reconstruction Center
2815 16th St SW Ste 100
(701) 857-2900

- Oral Surgery
  Ulloa, Juan J., DDS

Trinity Regional Eyecare/Minot Center
2815 16th St SW Ste 102
(701) 852-3500

- Ophthalmology
  Bouchard Kindy, Evelyne B., MD
  Jacobs, David J., MD
  Sanke, Robert F., MD
  Williams, Darrell P., MD
  Wolsky, Chad J., MD
- Optometrist
  Martinson-Redekopp, Jill R., OD
  Nelson, Shawn P., OD
  Schimke, Bradley J., OD
- Plastic Surgery
  Sanke, Robert F., MD

Mott

West River Health Services
420 Pacific Ave
(701) 824-2391

- Family Practice
  Boschee, Tracy B., DO
  Houle, Catherine E., MD
  Joyce, John P., MD
  Thorngren, Frank A., MD
  Wellman, Stacie M., MD
- General Practice
  Sheffield, Jennifer L., MD
- Geriatrics
  Hoerauf, Kent R., MD
  Willoughby, Brian G., MD
- Internal Medicine
  Hoerauf, Kent R., MD
  Ranum, Joshua C., MD
  Willoughby, Brian G., MD
- Pediatrics
  Ketterling, Ellen L., MD
  Ranum, Carrie Ann K., MD
- Podiatry, Surgical Chiropody
  Kilwein, Steven C., DPM

North Dakota (cont.)
Napoleon

Wishek Rural Health Clinic/Napoleon
420 Main Ave
(701) 754-2322

- Family Practice
  Kosiak, Donald J., MD
  Oliveira-Filho, Edgar K., MD
  Patel, Suresh K., MD
- General Practice
  Vegiraju, Thammi R., MD
- Internal Medicine
  Thirumala Reddy, Joseph R., MD

New England

West River Health Services
820 2nd Ave W
(701) 579-4507

- Family Practice
  Boschee, Tracy B., DO
  Houle, Catherine E., MD
  Joyce, John P., MD
  Thorngren, Frank A., MD
  Wellman, Stacie M., MD
- General Practice
  Sheffield, Jennifer L., MD
- Geriatrics
  Hoerauf, Kent R., MD
  Willoughby, Brian G., MD
- Internal Medicine
  Hoerauf, Kent R., MD
  Ranum, Joshua C., MD
  Willoughby, Brian G., MD
- Pediatrics
  Ketterling, Ellen L., MD
  Ranum, Carrie Ann K., MD
- Podiatry, Surgical Chiropody
  Kilwein, Steven C., DPM

New Rockford

Community Health Clinic
118 1st St S
(701) 652-2515

- Family Practice
  Page, Michael J., MD
  Schaffer, Todd W., MD
- General Practice
  Geier, Rick J., MD
- General Surgery
  Khokha, Inder V., MD

North Dakota (cont.)
New Town

Elbowoods Memorial Healthcare Center
1058 College Drive
(701) 627-4701

- Clinic
  Three Affiliated Tribes - Minne Tohe Health

Nordby Vision Center
603 1st St N Rm 301-Al1
(701) 627-3036

- Optometrist
  Hjelden, Melissa P., OD
  Nordby, Douglas M., OD

Trinity Community Clinic New Town
604 1st Street North
(701) 627-2990

- Family Practice
  Naranja, Imelda T., MD
  Sell, Shanon M., DO
- General Practice
  Naranja, Imelda T., MD
- Pediatrics
  Naranja, Imelda T., MD

Northwood

Northwood Deaconess Health Center
4 N Park St
(701) 587-6060

- Family Practice
  Berg, Jonathon H., MD
  Stenger, George S., DO

Valley Community Health Centers
301 Hwy 15
(701) 587-6000

- Family Practice
  Christianson, Charles E., MD

Oakes

Avera Medical Group Podiatry Aberdeen-Oakes Clinic
1200 N 7th St
(701) 742-3600

- Podiatry, Surgical Chiropody
  Stapp, Chad M., DPM

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PARTICIPATING PHYSICIANS

North Dakota (cont.)
Oakes (cont.)

Avera St Lukes
420 7th St S
(701) 742-3267

- Orthopedic Surgery
  Macdougall, James B., MD
  Mantone, James K., MD
- Radiology
  Aguilar, Melchor J., MD
  Fritz, Daniel R., MD
  Kimmel, Douglas J., MD
  Lenter, Leslie H., MD
  Lundell, Caroline J., MD
  Peters, Stephen R., MD
  Siegmund, Sheryl A., MD

Oakes Community Hospital
1200 N 7th St
(701) 742-3291

- Emergency Medicine
  Bolton, Mark J., MD
  Hicks, Robert C., MD
- Family Practice
  Bolton, Mark J., MD
- Internal Medicine
  Obrien Paradis, Katie A., MD

Ophthalmology Associates
409 Main St
(701) 742-3291

- Ophthalmology
  Wischmeier, Curt A., MD

Rath, Geoffrey, OD
409 Main Ave
(701) 742-3111

- Optometrist
  Rath, Geoffrey A., OD

Sanford Health Oakes Clinic
420 S 7th St
(701) 742-3267

- Family Practice
  Buhr, James B., MD
  Nagala, Rupkumar K., MD
  Small, Donna M., MD
- Geriatrics
  Luke, Madeline Z., MD
- Internal Medicine
  Luke, Madeline Z., MD
  Nagala, Vani, MD

North Dakota (cont.)
Oakes (cont.)

Sanford Health Oakes Clinic (cont.)

- Nephrology
  Chemiti, Gopal K., MD
- Oncology
  Geeraerts, Louis H., MD
- Podiatry, Surgical Chiropody
  Anderson, Brad C., DPM
- Radiology
  Marsden, Richard J., MD

Sanford Health Oakes Clinic
420 S 7th St
(701) 742-3267

- Orthopedic Surgery
  Dahl, Kevin, MD
- Radiology
  Asheim, Jason, MD

St Francis Medical Center
1200 7 St N
(701) 742-3600

- Orthopedic Surgery
  Johnson, James F., MD

Park River

First Care Health Center
115 Vivian St
(701) 284-7500

- Family Practice
  Mees, Sara L., MD
- General Surgery
  Khokha, Inder V., MD
- Radiology
  Ali, Azhar T., MD
  Asis, Martin J., MD
  Baraga, Joseph J., MD
  Barkmeier, Jeffrey, MD
  Block, Nathan D., MD
  Bowman Seitz, Tara S., MD
  Bretzke, Carl A., MD
  Bretzman, Peter A., MD
  Butler, Robert R., MD
  Carlson, Blake A., MD
  Ditmanson, Phil M., MD
  Drake, David G., MD
  Edmonson, George R., MD
  Frecentese, Dominic F., MD
  Goertzen, Timothy C., MD
  Hartigan, Andrew S., MD
  Hedlund, Laura J., MD

North Dakota (cont.)
Park River (cont.)

First Care Health Center (cont.)

- Radiology (continued)
  Hommeyer, Steven C., MD
  Knoedler, John P., MD
  Knutzen, Anders M., MD
  Lambert, David P., MD
  Leon, Jorge A., MD
  Longley, Deborah G., MD
  Magnuson, Jeffrey E., MD
  Maguire, Frank P., MD
  Mulcahy, Paul F., MD
  Muschenheim, Alexandra L., MD
  Page, Graydon T., MD
  Passe, Theodore J., MD
  Rosenberg, Michael S., MD
  Tashjian, Joseph H., MD
  Tummala, Anuradha K., MD
  Veldman, Mark W., MD
  Wiese, Don E., MD

First Care Health Center
115 Vivan St
(701) 284-7555

- Family Practice
  Johnson, Joel J., MD
  Johnson, Mandi L., MD
  Omotunde, Joshua O., MD
- General Surgery
  Khokha, Inder V., MD
- Internal Medicine
  Baig, Mirza B., MD
- Ophthalmology
  Brockman, Ronald J., MD
- Optometrist
  Carlson, Dori M., OD
  Helgeson, Mark K., OD
- Radiology
  Aizpuru, Richard D., MD
  Arsenault, Todd M., MD
  Baldwin, Matthew T., MD
  Baraga, Joseph J., MD
  Berens, Bruce M., MD
  Berger, Mark W., MD
  Bowman Seitz, Tara S., MD
  Bretzke, Carl A., MD
  Bretzman, Peter A., MD
  Bryan, Erich N., MD
  Bryson, Thomas C., MD
  Butler, Robert R., MD
  Carlson, Blake A., MD

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PARTICIPATING PHYSICIANS

North Dakota (cont.)
Park River (cont.)

First Care Health Center (cont.)
- Radiology (continued)
  Carolan, Paul R., MD
  Caspers, John M., MD
  Castaneda, Wilfrido R., MD
  Gilloon, Benjamin A., MD
  Grogan, Michael J., MD
  Jackson, Christopher A., MD
  Johnson, Adam C., MD
  Loe, Matthew J., MD
  Ludeman, Lucas B., MD
  May, Benjamin J., MD
  Page, Graydon T., MD
  Parrino, Suzanne S., MD
  Passe, Theodore J., MD
  Phelan, Jeffrey S., MD
  Prescott, Trisha R., MD
  Rathmann, Gregory A., MD
  Rhodes, Nicholas G., MD
  Rosenberg, Michael S., MD
  Ruzek, Kimberly A., MD
  Savcenko, Vladimir, MD
  Sullivan, Patrick P., MD
  Tai, Angela W., MD
  Weinmann, Robert H., MD
  Wittenberg, Keith H., MD
  Wold, Peter B., MD
  Wosick, William F., MD

Heartland Eye Care, PC
121 Briggs Ave N
(701) 284-7330
- Optometrist
  Carlson, Dori M., OD
  Helgeson, Mark K., OD
  Hoenke, Jaime A., OD

Midgarden Family Clinic, PC
503 Park St W Suite B
(701) 284-6663
- Family Practice
  Midgarden, Kristi J., MD

Riverview Specialty Clinic - Park River
115 Vivan St
(701) 284-7887
- Internal Medicine
  Baig, Mirza B., MD

North Dakota (cont.)
Richardton

Richardton Health Center
215 3rd Ave W
(701) 974-3372
- General Practice
  Gehring, A William, MD

Rolette

Northland Community Health Center
401 2nd Ave
(701) 246-3391
- Family Practice
  Vaagen, Jeffrey L., MD

Rolla

Northland Community Health Center-Rolla
114 3rd St NE
(701) 477-3111
- Family Practice
  Vaagen, Jeffrey L., MD

Presentation Medical Center
213 2nd Ave NE
(701) 477-3161
- Emergency Medicine
  Cordy, Roy A., MD
- Family Practice
  Cordy, Roy A., MD
  Paneru, Ram P., MD
- Podiatry, Surgical Chiropody
  Williams, Tyson D., DPM

Thorman Joseph A OD
118 3rd St NE
(701) 477-5656
- Optometrist
  Thorman, Joseph A., OD

Rugby

Dakota Eye Institute
201 SW 7th St Ste 2
(701) 222-3937
- Ophthalmology
  Fortney, Aaron C., MD
  Raducu, Elena R., MD
- Optometrist
  Hellebush, Leslie R., OD
  Ranum, Michael R., OD

North Dakota (cont.)
Rugby (cont.)

Heart of America Johnson Clinic
800 3rd Ave SW
(701) 776-5235
- Emergency Medicine
  Fernandez, Oscar O., MD
- Family Practice
  Fernandez, Oscar O., MD
  Kremer, Ashely J., MD
  Schoneberg, Steven B., MD
  Seiler, Hubert L., MD
- Geriatrics
  Seiler, Hubert L., MD

Heart of America Medical Center
800 S Main Ave
(701) 776-5261
- Emergency Medicine
  Hicks, Robert C., MD
  Nelson, John G., MD
  Sather, Jeffrey A., MD
- Family Practice
  Fernandez, Oscar O., MD
  Kremer, Ashely J., MD
  Schoneberg, Steven B., MD
  Seiler, Hubert L., MD
- General Surgery
  Fernandez, Oscar O., MD
  Skipper, Ronald P., MD
- Geriatrics
  Seiler, Hubert L., MD
- Urology
  Lim, Alan Fh, MD

Scranton

West River Health Services
211 Main Street S
(701) 275-6336
- Family Practice
  Boschee, Tracy B., DO
  Houle, Catherine E., MD
  Joyce, John P., MD
  Thorngren, Frank A., MD
  Wellman, Stacie M., MD
- General Practice
  Sheffield, Jennifer L., MD
- Geriatrics
  Hoerauf, Kent R., MD
  Willoughby, Brian G., MD

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING PHYSICIANS

North Dakota (cont.)
Scranton (cont.)

West River Health Services (cont.)
- Internal Medicine
  Hoerauf, Kent R., MD
  Ranum, Joshua C., MD
  Willoughby, Brian G., MD
- Pediatrics
  Ketterling, Ellen L., MD
  Ranum, Carrie Ann K., MD
- Podiatry, Surgical Chiropody
  Kilwein, Steven C., DPM

Stanley

Mountrail County Medical Clinic
615 6th St SE
(701) 628-2505
- Family Practice
  Langager, Tyrone O., MD
  Longmuir, Mark, MD

Tioga

Tioga Medical Center
710 N Welo St
(701) 664-3368
- Family Practice
  Gade, Swami P., MD
  Neelamegam Premnath, Vijay, MD
  Paneru, Ram P., MD
  Peterson, Mark G., MD
  Selland, Brian L., MD
  Sullivan, Brian M., MD

Trenton

Trenton Community Clinic
331 4th Ave E
(701) 774-0461
- General Practice
  Trenton Community Clinic/MD
- Podiatry, Surgical Chiropody
  Trenton Community Clinic/DPM

Turtle Lake

Northland Community Health Center- Turtle Lake
416 Kundert St
(701) 448-9225
- Family Practice
  Vaagen, Jeffrey L., MD

North Dakota (cont.)
Valley City

Essentia Health Valley City Clinic
132 4th Ave NE
(701) 845-8060
- Cardiovascular Disease
  Jenny, Donald B., MD
- Family Practice
  Diegel, Tanya L., DO
  Ostlie, Daniel K., MD
  Torrance, James R., MD
- General Surgery
  Dees, Brian K., MD
- Internal Medicine
  Jenny, Donald B., MD
  Whitbeck, Matthew G., MD
- Pediatrics
  Quanrud, Myra J., MD
- Podiatry, Surgical Chiropody
  Kang, Jill, DPM
- Radiology
  Crider, Mitchell H., MD
  Crowe, Christopher H., MD
- Sports Medicine
  Ostlie, Daniel K., MD

Fercho Cataract & Eye Clinic
200 Central Ave N Ste F
(701) 235-0561
- Ophthalmology
  Grosz, David E., MD

Fercho Cataract & Eye Clinic
1230 W Main
(701) 235-0561
- Ophthalmology
  Grosz, David E., MD

Fercho Cataract & Eye Clinic
570 Chautauqua Blvd
(701) 235-0561
- Ophthalmology
  Grosz, David E., MD

Mercy Hospital
570 Chautauqua Blvd
(701) 845-6400
- Anesthesiology (MD)
  Bathurst, Robert M., MD
- Emergency Medicine
  Bathurst, Robert M., MD
  Bone, William M., MD
  Garcia, Julia V., MD

North Dakota (cont.)
Valley City (cont.)

Mercy Hospital (cont.)
- Emergency Medicine (continued)
  Stull, Benjamin W., MD
  Wiltse, Richard J., MD
  Wukie, John J., DO
- Family Practice
  Andersen, Jeffrey B., MD
  Baruti, Timur A., MD
  Dumbolton, John H., DO
  Garcia, Julia V., MD
  Larson, Richard L., MD
  Martin, Richard E., MD
  Matheson, Thomas B., MD
  Michaud, Brian S., DO
  Mitzel, Fredrick, MD
  Omotunde, Joshua O., MD
  Overvold, Angel D., DO
  Raymond, Arthur J., MD
  Svec, Linda P., MD
- General Surgery
  Khokha, Inder V., MD
- Internal Medicine
  Anderson, Misty, DO
  Hasnain, Mohsin, MD
  Labrie, Sonja, MD
  Layawen, Aselo, MD
- Pediatrics
  Labrie, Sonja, MD

Professional Eyecare Center
200 Central Ave N Ste F
(701) 845-5000
- Optometrist
  Frohlich, Douglas L., OD
  Fronk, Kent, OD
  Sayler, Larry H., OD

Sanford Health Valley City Clinic
520 Chautauqua Blvd
(701) 845-6000
- Dermatology
  Holzwarth, Ryan L., MD
- Family Practice
  Andersen, Jeffrey B., MD
  Braunagel, Bradley A., MD
  Buhr, James B., MD
  Goven, Genevieve M., MD
  Hochhalter, David, MD
- General Surgery
  Albrecht, Warren E., DO
  Kroetsch, Corey, MD

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING PHYSICIANS

North Dakota (cont.)
Valley City (cont.)

Sanford Health Valley City Clinic (cont.)
- General Surgery (continued)
  Stasko, Andrew, MD
- Internal Medicine
  Anderson, Misty, DO
  Leitch, John M., MD
  Luke, Madeline Z., MD
  Mahale, Adit, MD
- Nephrology
  Mahale, Adit, MD
- Neurology
  Faber, Kevin M., MD
- Oncology
  Leitch, John M., MD
- Orthopedic Surgery
  Hvidston, Andrew J., MD
  Nagle, Thomas D., MD
- Podiatry, Surgical Chiropody
  Anderson, Brad C., DPM
  Arness, Richard E., DPM
- Radiology
  Kallenbach, Christopher, MD
  Khaghany, Kamran, MD
- Urology
  Noah, Thomas A., MD

Sanford Health Valley City Clinic
520 Chautauqua Blvd
(701) 845-6000
- General Surgery
  Kroetsch, Corey, MD
- Internal Medicine
  Mahale, Adit, MD
- Nephrology
  Mahale, Adit, MD
- Orthopedic Surgery
  Hvidston, Andrew J., MD
  Lundeen, Mark A., MD
  Stavenger, Jeffrey P., MD
- Radiology
  Asheim, Jason, MD

Sanford Health Valley City Eye Center & Optical
253 Central Ave N
(701) 845-1511
- Optometrist
  Quitberg, Joy, OD
  Rexine, Michael K., OD

North Dakota (cont.)
Wahpeton

Essentia Health Wahpeton Clinic
275 11th St S
(701) 642-2000
- Cardiovascular Disease
  Almanaseer, Yassar, MD
- Family Practice
  Aryal, Suima, MD
  Jamsa Tollefson, Lisa J., MD
  Nelson, Susan K., MD
  Pankow, Dawn K., MD
  Refsland, Bradley A., MD
  Regmi, Suman R., MD
  Vetter, Richard T., MD
- General Surgery
  Harris, Scott S., MD
  Mohs, Thomas J., MD
  Wasemiller, Paul S., MD
- Geriatrics
  Strand, Duane D., MD
- Internal Medicine
  Briggs, Michael S., MD
  Gupta, Mahendra K., MD
  Kapphahn, Samantha, DO
  Link, David B., MD
  Qarni, Ahmer H., MD
  Strand, Duane D., MD
  Tiwari, Sumit, MD
- Nephrology
  Qarni, Ahmer H., MD
- Obstetrics/Gynecology
  Gefroh Ellison, Stefanie S., MD
  Pankow, Dawn K., MD
- Ophthalmology
  Keating, Anne M., MD
- Optometrist
  Lampl, Shila K., OD
- Orthopedic Surgery
  Johnson, Julie M., MD
  Lantz, Steven W., MD
- Otology, Laryngology, Rhinology
  Belizario, Francisco Y., MD
  Bruns, Alan D., MD
- Pediatrics
  Malkasian, Lucy B., MD
- Physical Medicine and Rehabilitation
  Sollom, Dennis G., MD
- Podiatry, Surgical Chiropody
  Olson, Bradley R., DPM

North Dakota (cont.)
Wahpeton (cont.)

Essentia Health Wahpeton Clinic (cont.)
- Pulmonary Diseases
  Briggs, Michael S., MD
- Urology
  Khan Galzie, Sardar Mohammad Farhan, MD

Fercho Cataract & Eye Clinic
315 11 St N Ste A8
(701) 235-0561
- Ophthalmology
  Grosz, David E., MD

Midwest Vision Centers
517 Dakota Ave
(701) 642-9302
- Optometrist
  Connelly, James B., OD
  Ross, Eric M., OD

Prairie Vision Center PC
315 11th St N Ste A
(701) 642-4090
- Optometrist
  Picken, Jace H., OD
  Welder, William J., OD

Sanford Health Wahpeton Clinic
332 2nd Ave N
(701) 642-7000
- Dermatology
  Holzwarth, Ryan L., MD
- Family Practice
  Ackerman, Winter M., MD
  Emery, Patrick E., MD
  Halvorson, James E., MD
  Mayo, William M., MD
  Mislan, Garry A., MD
  Nyarandi, Timothy, MD
  Ostmo, Robert P., MD
- General Surgery
  Stasko, Andrew, MD
- Nephrology
  Louvar, Daniel, MD
- Obstetrics/Gynecology
  Tompkins, Rebekah, MD
- Oncology
  Gaba, Anu G., MD
- Orthopedic Surgery
  Hvidston, Andrew J., MD

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING PHYSICIANS

North Dakota (cont.)

Wahpeton (cont.)

Sanford Health Wahpeton Clinic (cont.)

- Radiology
  Catalan, Richard, MD
  Garrity, Stephen P., MD
  Kallenbach, Christopher, MD
  Shook, Robert J., MD
  Stallman, Donald J., MD
- Urology
  Segal, Michael D., MD
  Toni, Conrad, MD

Sanford Health Wahpeton Clinic
332 2nd Ave N
(701) 642-7000

- Nuclear Medicine
  Stallman, Donald J., MD
- Obstetrics/Gynecology
  Tompkins, Rebekah, MD
- Orthopedic Surgery
  Friederichs, Matthew G., MD
  Hvidston, Andrew J., MD
- Radiology
  Asheim, Jason, MD
  Catalan, Richard, MD
  Garrity, Stephen P., MD
  Stallman, Donald J., MD

Sanford Health Wahpeton Eye Center & Optical
332 2nd Ave N
(701) 642-7000

- Optometrist
  Myron, Sarah, OD

Walhalla

Walhalla Clinic
301 5th St
(701) 549-2710

- Family Practice
  Khromachou, Tamim R., MD
  Noyes, Randal H., DO

Washburn

Washburn Family Clinic
1177 Border Lane
(701) 462-3396

- Family Practice
  Hamilton, Robert A., MD
  Harchenko, Vern A., MD
  Johansen, James R., MD

North Dakota (cont.)

Watford City

Addo, Fek MD Inc
525 N Main St
(701) 842-3771

- Internal Medicine
  Addo, Ferdinand E., MD
- Oncology
  Addo, Ferdinand E., MD

McKenzie County Healthcare Systems Clinic
525 N Main St
(701) 842-3771

- Family Practice
  Matheson, Thomas B., MD
  Rivas, David, DO
- General Practice
  Ramage, Gary W., MD

McKenzie County Healthcare Systems/Hospital
516 N Main St
(701) 842-3000

- Family Practice
  Diamond, Donita K., DO
  Rivas, David, DO
- General Practice
  Ramage, Gary W., MD

Nordby Vision Center, Ltd
109 5th St SW
(701) 444-3221

- Optometrist
  Hjelden, Melissa P., OD
  Nordby, Douglas M., OD

West Fargo

Dye, J G., OD
1207 Prairie Parkway
(701) 282-2020

- Optometrist
  Dye, J G., OD

Essentia Health West Fargo Clinic
1401 13th Ave E
(701) 364-5751

- Family Practice
  Howden, Richard L., MD
  Kuhlmann, Craig F., MD
  Nelson, Kinsey B., MD
  Refsland, Bradley A., MD
  Sondreal, Philip S., MD
  Vetter, Richard T., MD

North Dakota (cont.)

West Fargo (cont.)

Essentia Health West Fargo Clinic (cont.)

- General Surgery
  Harris, Scott S., MD
- Internal Medicine
  Kooyer, Kurt W., MD
- Obstetrics/Gynecology
  Holm, Mary K., MD
  Kuhlmann, Craig F., MD
- Pediatrics
  Kooyer, Kurt W., MD
- Sports Medicine
  Kuhlmann, Craig F., MD

Knowlton Oneill & Associates PC
1401 13th Ave E
(701) 364-0060

- Psychiatry (MD/DO)
  Block, Terry N., MD

Sanford West Fargo Clinic
1220 Sheyenne St
(701) 234-4445

- Family Practice
  Borowicz, Ronald J., MD
  Dahl, Bruce L., MD
  Dahl, Daniel, MD
- Obstetrics/Gynecology
  Dangerfield, Jon D., MD

Sanford West Fargo Clinic
1220 Sheyenne St
(701) 234-4455

- Family Practice
  Borowicz, Ronald J., MD
  Dahl, Bruce L., MD
  Dahl, Daniel, MD
  Goyal, Shaveta, MD
  McLeod, Matthew, MD
  Walker, Debra, MD
- Obstetrics/Gynecology
  Dangerfield, Jon D., MD

Valley Oral & Facial Surgery
3187 Bluestem Dr Ste 4
(701) 235-7379

- Oral Surgery
  Schneider, Rudy J., DMD

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PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING PHYSICIANS

North Dakota (cont.)

Westhope

Trinity Health dba Tcc-Westhope
310 2nd Ave E
(701) 245-6638

- Family Practice
  Kihle, Kenneth W., MD
- General Practice
  Kihle, Kenneth W., MD

Williston

Accessible Podiatry LLC dba Williston Foot & Ankle Clinic
3 4th St E Ste 102
(701) 572-4094

- Podiatry, Surgical Chiropody
  Slann, Guy K., DPM

Adducci, Joseph, MD
1213 15th Ave W
(701) 572-0316

- Obstetrics/Gynecology
  Adducci, Joseph E., MD

Billings Clinic
1301 15th Ave W
(701) 774-7464

- Internal Medicine
  Whittenberger, Brock P., MD
- Oncology
  Santala, Roger S., MD
  Whittenberger, Brock P., MD
- Pediatrics
  Gunville, Fred E., MD

Great Plains Womens Health Clinic
1700 11th St W
(701) 774-7687

- Obstetrics/Gynecology
  Adum, Vivian L., MD
  Loo, Li ER, MD
  Newton, Yolanda M., MD
  Solberg, Sara R., MD
  Tong, Beverly J., MD

John B Andelin MD PC dba Pathology Services
201 2nd Ave W
(701) 770-3927

- Pathology
  Andelin, John B., MD
  McCoy Jr, Franklin E., MD

North Dakota (cont.)

Williston (cont.)

Lapan, Michael, DPM
1213 15th Ave W
(800) 331-7575

- Podiatry, Surgical Chiropody
  Lapan, Michael D., DPM

Mercy Medical Center
1219 Knoll St
(701) 572-0127

- Urology
  Shahin, Salem S., MD

Mercy Medical Center dba Craven Hagan Clinic
1213 15th Ave W
(701) 774-7400

- Anesthesiology (MD)
  Hoglund, Christine J., DO
- Family Practice
  Andelin, Paul, MD
  Kemp, Robert G., MD
  Mulu, Menelik, MD
  Small, William C., MD
  Wiens, Glenn A., MD
- General Practice
  Caplan, Gary, MD
- General Surgery
  Anderson, Wayne L., MD
  Li, Anson S., MD
  Vibeto, Brett K., MD
- Internal Medicine
  McCoy, Austin J., MD
  Miller, Cory R., MD
- Obstetrics/Gynecology
  Adducci, Joseph E., MD
- Orthopedic Surgery
  Keene, Roxanne R., MD
  Mai, Matthew C., MD
  McNulty, John M., MD
- Pediatrics
  Grorud, Jane A., MD
  Keene, David E., MD
  Mulu, Menelik, MD
  Ponzio, Sheila K., MD
- Plastic Surgery
  Hegge, Theresa A., MD
- Psychiatry (MD/DO)
  Eick, Thomas J., DO
- Radiation Therapy
  Collins, Kevin B., MD

North Dakota (cont.)

Williston (cont.)

Mercy Medical Center dba Craven Hagan Clinic (cont.)

- Radiology
  Grant, Michael, MD

Mercy Medical Center dba Radiology Services
1301 15th Ave W
(701) 774-7435

- Nuclear Medicine
  Bodeau, Geoffrey R., MD
- Radiology
  Arslanlar, Norman, DO
  Austin, Mark J., MD
  Austin, Susan J., MD
  Bodeau, Geoffrey R., MD
  Bullis, Brent R., MD
  Carlson, Annelisa M., MD
  Donovan, Charles B., MD
  Doyscher, Mark W., MD
  Edelman, Kevin, MD
  Engstrom, Bjorn I., MD
  Farah, Nazih N., MD
  Fry, Stephen M., MD
  Gordon, Jeffery D., MD
  Gramith, Frederick C., MD
  Groebner, Nathan J., MD
  Hassell, Douglass S., MD
  Hegge, Ryan K., MD
  Hite, Stephen H., MD
  Ibach, Thomas J., MD
  Inampudi, Subbarao, MD
  Jaszczak, Leszek J., MD
  Kane, Jon P., MD
  Kang, Eul S., MD
  Kayfes, Mareve, MD
  Keszler, Jason L., DO
  Kurisko, Stanley D., MD
  Lee, Peter U., MD
  Matson, Thomas C., MD
  Mills, David J., MD
  Myhra-Bloom, Karla G., MD
  Mylrea, James M., MD
  Nobrega, John M., MD
  Oswood, Mark C., MD
  Parker, Robin, MD
  Parker, Trudi K., MD
  Peterson, Jeffrey J., MD
  Plunkett, Michael, MD
  Pollock, Robert A., MD
  Quinones, Eduardo, MD

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PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING PHYSICIANS

North Dakota (cont.)
Williston (cont.)

Mercy Medical Center dba Radiology Services (cont.)
- Radiology (continued)
  Reddy, Madhusudhan P., MD
  Rust, Paul R., MD
  Schneider, Lisa, MD
  Shearer, Damon D., DO
  Sidney, Scott D., MD
  Steely, John W., MD
  Tillotson, Christopher L., MD
  Tran, Huy, MD
  Tyson, Scott E., MD
  Veldman, Sara B., MD
  Yost, Robert A., MD

Neurosurgical & Spinal Surgery Associates, PC
3 4th Street East
(800) 253-5876
- Neurological Surgery
  Ingraham, Robert Q., MD
  Watt, Tim J., MD
- Neurology
  Maclachlan, Robert D., MD

Northwest Human Service Center
316 2nd Ave W
(701) 774-4600
- Psychiatry (MD/DO)
  Eick, Thomas J., DO
  McLean, Andrew J., MD
  Schield, Laura B., MD

Professional Anesthesia Services
1301 15th Ave W
(701) 774-7406
- Anesthesiology (MD)
  Radic, Zeljko, MD
  Skurdal, David N., MD

Sanford At Craven Hagan Clinic
1213 15th Ave W
(701) 572-7651
- Neurology
  Arazi, Richard, MD

Shahin, Salem, MD
1219 Knoll St
(701) 572-0127
- Urology
  Shahin, Salem S., MD

North Dakota (cont.)
Williston (cont.)

St Alexius Heart & Lung Clinic LLC
1301 15th Ave W
(701) 530-7502
- Allergy
  Piyamahunt, Arkapol, MD
- Internal Medicine
  Piyamahunt, Arkapol, MD

Svpn Mfm Great Plains
1700 11th St W
(701) 774-7487
- Obstetrics/Gynecology
  Wallace, Roger L., DO

Svpn Neuro Williston
1213 15th Ave W
(800) 544-3579
- Neurological Surgery
  Spire, William J., MD
- Psychiatry (MD/DO)
  Mosser, Jeffrey F., MD

Trinity Community Clinic/Western Dakota
1321 W Dakota Parkway
(701) 857-7388
- Cardiovascular Disease
  Percell, Robert L., MD
  Turk, Samir M., MD
- Family Practice
  Nardozzi, Kristen L., DO
  Olson, Mark A., MD
- General Practice
  Kennedy, James A., MD
- General Surgery
  Lee, Lane M., DO
- Internal Medicine
  Percell, Robert L., MD
  Rhule, Garett A., MD
  Wilson, George M., MD
- Ophthalmology
  Knapp, Stefanie, MD
- Orthopedic Surgery
  Joshi, Ravindra, MD
  Kindy, Alexandre S., MD
- Podiatry, Surgical Chiropody
  Albers, Aaron J., DPM
- Rheumatology
  Diri, Erdal, MD

North Dakota (cont.)
Williston (cont.)

Trinity Regional Eyecare/Western Dakota
1321 W Dakota Parkway
(701) 572-7641
- Ophthalmology
  Raymond, Mark C., MD
  Reeves, Juliana E., MD
- Optometrist
  Roles, Cynthia J., OD

Williston Basin Eyecare Associates, PC
1213 15th Ave W
(701) 577-3937
- Optometrist
  Anderson, Allison R., OD
  Brenno-Watterud, Danielle J., OD
  Fearing, Mitchell R., OD
  Sime, Laurali M., OD
  Tofte, Michael D., OD

Williston Radiology Consultants
3 East 4th St #100
(701) 577-6337
- Family Practice
  Shafer, Justin A., MD
- Radiology
  Jaszczak, Leszek J., MD

Wishek

Eye Center of The Dakotas PC
400 Beaver Ave
(701) 452-2620
- Optometrist
  Moch, Danelle F., OD
  Pathroff, Kellen E., OD
  Tello, Timothy L., OD

Wishek Hospital Clinic Assn
1007 4th Ave S
(701) 452-2326
- Family Practice
  Kosiak, Donald J., MD
  Nelson, Susan K., MD
  Oliveira-Filho, Edgar K., MD
  Patel, Suresh K., MD
- General Practice
  Vegiraju, Thammi R., MD
- Internal Medicine
  Thirumala Reddy, Joseph R., MD

Providers are subject to be added or terminated without notice.

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PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING PHYSICIANS

North Dakota (cont.)
Wishek (cont.)

Wishek Rural Health Clinic
1015 4th Ave S
(701) 452-2364

- Family Practice
  Kosiak, Donald J., MD
  Oliveira-Filho, Edgar K., MD
  Patel, Suresh K., MD
- General Practice
  Vegiraju, Thammi R., MD
- Internal Medicine
  Thirumala Reddy, Joseph R., MD

South Dakota
Aberdeen

Avera Medical Group Ear Nose & Throat
201 S Lloyd St Ste E106
(605) 225-1420

- Otology, Laryngology, Rhinology
  Cihak, Robert, MD
  Weekly, James M., MD

Avera Medical Group Orthopedic Surgery Specialists
701 8th Ave NW Ste A
(605) 226-2663

- Family Practice
  Wolfgram, Danny A., MD
- Orthopedic Surgery
  Fites, Brandon S., MD
  Macdougall, James B., MD
  Mantone, James K., MD
  Miller, Patrick J., MD
  Reynen, Matthew C., MD
- Physical Medicine and Rehabilitation
  Frisco, Donald J., MD
- Podiatry, Surgical Chiropody
  Johnston, James S., DPM
  Wobst, Garrett, DPM
- Psychiatry (MD/DO)
  Frisco, Donald J., MD

Avera Medical Group Radiology
305 S State St
(605) 622-5540

- Radiology
  Aguilar, Melchor J., MD
  Fritz, Daniel R., MD
  Kimmel, Douglas J., MD
  Lenter, Leslie H., MD

South Dakota (cont.)
Aberdeen (cont.)

Avera Medical Group Radiology (cont.)

- Radiology (continued)
  Lundell, Caroline J., MD
  Peters, Stephen R., MD
  Siegmund, Sheryl A., MD

Barnett Vision Center, LLP
508 Moccasin Dr
(605) 225-4046

- Optometrist
  Barnett, Francis L., OD
  Hase, Angela J., OD
  Lunzman, Kara M., OD

Ophthalmology Associates
310 8th Ave NW Ste 507
(605) 226-2108

- Ophthalmology
  Wischmeier, Curt A., MD

Thomas G Harbert, MD
201 S Lloyd Ste W110
(605) 229-0205

- General Practice
  Harbert, Thomas G., MD
- Orthopedic Surgery
  Harbert, Thomas G., MD

Vision Care Associates, LLP
310 8th Ave NW
(605) 225-2020

- Optometrist
  Dohman, Darren, OD
  Dorsett, Marshall, OD
  Olson, James, OD
  Quam, Stuart, OD
  Struble, Mark, OD

Britton

Ophthalmology Associates
701 Main St
(605) 448-5151

- Ophthalmology
  Wischmeier, Curt A., MD

Vision Care Associates, LLP
701 Main St
(605) 448-5151

- Optometrist
  Dohman, Darren, OD
  Siegling, Bruce, OD

South Dakota (cont.)
Eureka

Vision Care Associates, LLP
808 C Ave
(605) 284-2391

- Optometrist
  Dockter, Craig, OD
  Dohman, Darren, OD
  Olson, John C., OD

Herreid

Campbell County Clinic
208 N Main St
(605) 437-2304

- General Practice
  Knecht, John F., MD

Lemmon

Lemmon Eye Clinic
16 4th St W
(605) 374-5781

- Optometrist
  Nash, Heidi J., OD
  Trimble, James E., OD

West River Health Services
401 6th Ave W
(605) 374-3773

- Family Practice
  Boschee, Tracy B., DO
  Jacobsen, Thomas E., MD
  Joyce, John P., MD
  Thorngren, Frank A., MD
  Wellman, Stacie M., MD
- Geriatrics
  Hoerauf, Kent R., MD
  Willoughby, Brian G., MD
- Internal Medicine
  Hoerauf, Kent R., MD
  Ranum, Joshua C., MD
  Willoughby, Brian G., MD
- Obstetrics/Gynecology
  Jacobsen, Thomas E., MD
- Pediatrics
  Ketterling, Ellen L., MD
  Ranum, Carrie Ann K., MD
- Podiatry, Surgical Chiropody
  Kilwein, Steven C., DPM

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING PHYSICIANS

South Dakota (cont.)

Mobridge

Ophthalmology Associates
1315 10th Ave W
(605) 845-2932

- Ophthalmology
  Bormes, John M., MD

Sisseton

St Francis Medical Center
205 Orchard Drive
(605) 698-7681

- Orthopedic Surgery
  Johnson, James F., MD

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING DENTISTS

Minnesota

Barnesville

Dahl, Jonathan P, DDS, PC
102 Front St
(218) 354-2289

Dahl, Jonathan P., DDS
Mack, Robert D., DDS
Seaborn, Stacy L., DDS

Dilworth

Edeen Family Dentistry
806 Center Ave W
(218) 287-2938

Edeen, Darin L., DDS

E Grand Forks

Irvin M Galstad, DDS Ltd
1416 Central Ave NE
(218) 773-3004

Galstad, Irvin M., DDS
Johnson, Craig A., DDS

McDonald-Galstad, Ltd
1421 Central Ave NW
(218) 773-3010

McDonald, Christopher J., DDS
McDonald, Peter J., DDS

Fosston

Sjulson Family Dentistry
109 Johnson Ave
(218) 435-1599

Gupta, Ravi N., DDS
Sjulson, Roger W., DDS

Halstad

Dr Joy's Dental Clinic
132 3rd St West
(218) 456-2182

Hollinshead, Joyce C., DDS

Hawley

Appletree Dental
520 Main St
(218) 483-1038

Arneson, Peder T., DDS
Boedigheimer, Daniel, DDS
Christianson, Wayne E., DDS
Dobmeier, David D., DDS
Hieb, Matthew W., DDS
Nease, Jesse M., DDS
Peterka, Ruth C., DDS

Minnesota (cont.)

Hawley (cont.)

Appletree Dental (cont.)

- Dentist (continued)
  Reardon, Nicole J., DDS
  Terveen, Amanda M., DDS
- Oral Surgery
  Lindemoen, Gary L., DDS

Bentley, Geoffrey, DDS, PA
500 6th St
(218) 483-3311

Bentley, Geoffrey D., DDS

Karlstad

Gracza and Gracza dba Karlstad Dental Clinic
223 S Main St
(218) 436-2944

Gracza, Edward R., DDS

McIntosh

Lesmeister Dental, LLC
105 2nd St SW
(218) 563-3001

Lesmeister, Steven G., DDS

Moorhead

Donabauer Family Dentistry, PC
211 S 5th St
(218) 233-1754

Donabauer, Bradly J., DDS

Family Healthcare Center
715 11th St N Ste 106b
(218) 299-7830

Breding, Joshua T., DDS
Bultema, Jonathan, DDS
Rud, Courtney M., DDS

Harvey, Jeffrey, DDS
1550 30th Ave S
(218) 236-1322

Harvey, Jeffrey C., DDS

Skatvold Family Dentistry
841 Belsly Blvd
(218) 236-5466

Skatvold, Erik P., DDS

Minnesota (cont.)

Moorhead (cont.)

Southview Dental Corp
2704 12th St S
(218) 233-0570

Tranby, David K., DDS

Steidl Family Dentistry PC
523 8th St S
(218) 236-9319

Steidl, Jamie W., DDS

Toutges, Robert, DDS PA
3505 S 8th St Ste 3
(218) 287-2324

Toutges, Robert V., DDS

Wentz, David C., DDS
320 2nd Ave S Ste 106
(218) 236-1666

Wentz, David C., DDS

Warren

Lone Oak Family Dentistry
205 W Johnson Ave Ste 3
(218) 745-4601

Hanel, Travis, DDS

Montana

Sidney

Martineau, Paul R DDS
401 North Central Ave
(406) 482-2423

Martineau, Paul R., DDS

North Dakota

Beulah

Beulah Dental, PC.
200 W Main St
(701) 873-2259

Just, Alison L., DDS
Lee, Kevin B., DDS

Bismarck

A Lifetime of Smiles
1004 7th St S
(701) 258-5220

Frank, Anthony, DDS
Hoerner, Derik P., DDS

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING DENTISTS

North Dakota (cont.)
Bismarck (cont.)

Bjork, Kevin, DDS
1929 N Washington
(701) 222-1286
Bjork, Kevin S., DDS

Brend, Arliss, DDS
207 E Front Ave Ste C
(701) 222-4111
Brend, Arliss L., DDS

Brend, Leroy, DDS
1143 W Turnpike Ave
(701) 255-2467
Brend, Leroy O., DDS
Brend, Megan L., DMD

Bridging The Dental Gap
1223 S 12th St Ste 1
(701) 221-0518
Luger, Joanne, DDS
Mertz, Sarah K., DDS
Nichols-Johnson, Heidi M., DDS

Clausnitzer Dentistry PC
1110 College Dr Ste 108
(701) 255-0586
Clausnitzer, Blaine T., DDS
Schuetzle, Bethany A., DDS

Dakota Family Dental
1929 N Washington
(701) 258-7900
Nichols-Johnson, Heidi M., DDS
Oukrop, Brock A., DDS

Dental Makeover Center
311 N Mandan St
(701) 255-3130
Gonzales, John P., DDS

Dohm, Otto, DDS
1142 W Capitol Ave
(701) 222-8760
Dohm, Otto W., DDS
- Periodontist
  Dohm, Otto W., DDS

Gilchrist, Kevin, DDS
1929 N Washington
(701) 222-1213
Gilchrist, Kevin E., DDS

North Dakota (cont.)
Bismarck (cont.)

Heringer, Everett, DDS
1839 E Capitol Ave
(701) 255-4850
Heringer, Everett E., DDS
Renz, Brielle M., DMD

Jesperson Orthodontics
531 S 7th St
(701) 224-1558
- Orthodontist
  Jesperson, Brian R., DDS
  Keith, Daniel J., DDS

Kapla, Thomas, DDS
1110 College Dr Ste 110
(701) 258-8100
Kapla, Thomas P., DDS

Knudsen, Dean, DDS
714 S 2nd St
(701) 258-3308
Knudsen, Dean D., DDS

Michael Goebel, DDS
407 East Ave C
(701) 258-8509
Goebel, Bryce M., DDS
Goebel, D Michael, DDS
Goebel, Drew A., DDS

Midstokke Family Dentistry
2940 N 19th St Ste 2
(701) 255-0475
Midstokke, Steven J., DDS

Missouri River Dental, PC
1401 Skyline Blvd
Ste 210
(701) 751-7177
Anderson, Timothy A., DDS

Nelson Family Dentistry General Partnership
1700 E Interstate Ave
(701) 222-4746
Nelson, James A., DDS
Overby, Crystal, DDS
Schoch, Kristin R., DDS

Parker Dental Clinic
4501 Coleman St Ste 107
(701) 204-7232
Parker, Riley, DMD

North Dakota (cont.)
Bismarck (cont.)

Pinehurst Family Dentistry
1001 W Interstate Ave
Ste 132
(701) 223-1476
Martinson, James W., DDS

Prairie Rose Family Dental
121 E Front Ave
(701) 223-1194
Carlson, Casey B., DDS
Giese, Travis T., DDS
Hieb, Richard J., DDS
King, Bradley E., DDS
Munns, Kevin J., DDS
Quinn, William J., DDS
Schmidt, Sidney J., DDS
Spies, Christopher J., DDS

Prairie Rose Family Dental North
900 East Calgary Ave
(701) 223-8262
Carlson, Casey B., DDS
Giese, Travis T., DDS
Hollevoet, Leslie A., DDS
King, Bradley E., DDS
Munns, Kevin J., DDS
Quinn, William J., DDS
Schmidt, Sidney J., DDS
Spies, Christopher J., DDS

Smile By Design, PC
301 E Front Ave Ste 105
(701) 223-5500
Axvig, Daniel D., DDS
Dwyer, Maria, DDS

Warford Orthodontics
1145 W Turnpike
(701) 255-1311
- Orthodontist
  Warford, John H., DDS

Bottineau

Witteman, Lori, DDS, PC
109 5th St E
(701) 228-3153
Witteman, Lori J., DDS

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING DENTISTS

North Dakota (cont.)

Bowman

Anderson, Bonnie J
20 First Ave SW
(701) 523-5651
Anderson, Bonnie J., DDS

Prairie Dental Inc
608 Hwy 12 W
(701) 523-3255
Kelly, Patrick D., DDS
Sarsland, Jennifer, DDS

Carrington

Carrington Dental Care, PC
923 1st St S
(701) 652-2801
Bauer, Jay A., DDS

Garr Dental Center
318 Highway 281 NE
(701) 652-2300
Garr, Benjamin L., DMD

Casselton

Hagen Dental PC
102 Langer Ave N
(701) 347-5345
Hagen, Jesse P., DDS

Center

Dj Trzpuc, DDS, PC
111 E Main St
(701) 794-8796
Trzpuc, Darrell J., DDS

Devils Lake

Kenner, Kristin, DDS
501 5th Ave SE
(701) 662-4141
Kenner, Kristin H., DDS

Remmick, Robert, DDS, PC
310 4th St NW
(701) 662-8980
Remmick, Robert, DDS

Smilequest
206 5th Ave SE
(701) 662-8191
Herman, Rollin D., DDS
Mack, Benjamin F., DDS

North Dakota (cont.)

Dickinson

Apollonia Dental, PC
1019 W Villard
(701) 483-0857
Forster, Kristen L., DDS

Dahl & Associates
1119 Sims St
(701) 227-1193
Dahl, Jason O., DDS

Dickinson Dental Center
2 W 1st St Ste 215
(701) 483-6999
Galster, Shannon D., DDS

High Plains Dental PC
669 12th St West
(701) 483-4746
Eberts, Melissa M., DDS
Meyer, Maria D., DDS

Neuberger Dental Clinic PC
239 14th St W
(701) 483-3462
Neuberger, Lonnie S., DDS

Selle Family Dental, P.C.
1560 Western Dr
(701) 483-9801
Selle, Brent J., DDS

Drayton

Drayton Family Dentistry
110 Main
(701) 454-6218
Duncklee, Andrew D., DDS

Edmore

Legacie Dental Clinic
323a Main St
(701) 644-2254
Legacie, Larry D., DDS

Elgin

Sanderson, John, DDS
306 N Main St
(701) 584-2580
Sanderson, John F., DDS

North Dakota (cont.)

Ellendale

Dakota Dental Care, PC
210 Main St
(701) 349-3636
Schlecht, Lana R., DDS

Enderlin

Krivarchka, Duane, DDS
213 4th Ave
(701) 437-2676
Krivarchka, Duane V., DDS

Fargo

About Smiles Dental
4575 23 Ave S Ste 1200
(701) 356-4077
Sampson, Svetlana K., DDS

Advanced Dental Technologies Center
827 S 28th St
(701) 280-1020
Brant, David G., DDS

Anderson Dental
4521 38 Ave S
(701) 232-1368
Anderson, Bradley J., DDS
Anderson, Jon D., DDS

Baker, Brooke M. DDS
1790 32nd Ave S
(701) 232-0774
Baker, Brooke M., DDS

Bond, Robert A., DDS
2851 S University Dr
(701) 235-3205
Bond, Robert A., DDS

Coffey, Roger, DDS
1790 32 Ave S
(701) 232-0774
Coffey, Roger K., DDS

Cornforth, Gary, DDS
2534 S University Dr
Suite 6
(701) 232-1500
Cornforth, Gary P., DDS
- Orthodontist
  Gill, Jared B., DMD

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING DENTISTS

North Dakota (cont.)
Fargo (cont.)

Dahl, Jonathan P, DDS, PC
1324 23rd St S
(701) 237-5616

Dahl, Jonathan P., DDS
Mack, Robert D., DDS
Seaborn, Stacy L., DDS

Dakota Pediatric Dentistry PC
4265 45th St S Ste 202
(701) 478-5439

Hoge, Beth, DDS
Hoge, Chad J., DDS
Hoge, Mikala A., DDS

Dental Care Fargo
3226 13th Ave S
(701) 232-3379

Peterson, Carrie N., DDS
Zaffke, Nathan A., DDS

Designer Smiles
3525 25th St S
(701) 298-9400

Hetland, Dennis L., DDS

Dorsher, Nicholas, DDS
118 Broadway Ste 711
(701) 237-4331

Dorsher, Nicholas C., DDS

Dr. B. Dentistry
1701 38 St S
(701) 282-4044

Bonicelli, Tanya K., DDS

Edwin Shirley DDS
1231 27th St SW Ste B
(701) 235-8402

Shirley, Edwin K., DDS

Essentia Health 32nd Avenue Clinic
3000 32nd Ave S
(701) 364-8000

- Oral Surgery
  Hicks, John L., DDS

Essentia Health South University Clinic
1702 University Dr S
(701) 364-3300

- Oral Surgery
  Hicks, John L., DDS

North Dakota (cont.)
Fargo (cont.)

Family Healthcare Center
301 NP Ave
(701) 271-3344

Breding, Joshua T., DDS
Bultema, Jonathan, DDS
Podrebarac, James T., DDS
Rud, Courtney M., DDS
Sticka, Samuel J., DMD

Fargo Family Dentistry
3210 18th St S Ste B
(701) 237-6008

Colbert, James J., DDS

Friendly Smiles Family Dentistry PC
2701 9th Ave SW
(701) 364-9990

Barfield, Brenda, DDS
Johnson, Michael S., DDS
Mahale, Naina A., DDS
Slama, Ann E., DDS

George, Steven, DDS
1701 38th St SW
(701) 282-4111

George, Steven C., DDS

Heartland Dental Limited dba Evergreen Dental
1220 Main Ave Ste 220
(701) 237-6307

Fines, Casey D., DDS
Patel, Neha S., DDS
Schmaltz, Christopher J., DDS
Wells, David D., DDS

Hegge Jr, David N., DDS
1411 32nd St S
(701) 235-8978

Hegge Jr, David N., DDS

Jay P Erickson, DDS
1331 32nd Ave S #3
(701) 235-7322

Erickson, Jay P., DDS

Joel T. Kangas, DDS dba Kangas Hardy Dental, P.C.
1701 38 St SW
(701) 282-4905

Hardy, Stefanie K., DMD
Kangas, Joel T., DDS

North Dakota (cont.)
Fargo (cont.)

Johnson, James F, DDS
825 28 St SW Ste F
(701) 237-4297

Johnson, James F., DDS

Keim, Michael, DDS
2585 23 Ave S Ste B
(701) 293-0006

Keim, Michael L., DDS

- Orthodontist
  Keim, Michael L., DDS

Lysne, Daniel, DDS
1322 S 23rd St
(701) 232-3323

Lysne, Daniel G., DDS

- Periodontist
  Lysne, Daniel G., DDS

Mathison, Brian, DDS, PC
4742 Amber Valley Pkwy
(701) 356-3999

Mathison, Brian C., DDS

Mathison, Peter T. DDS PC
1351 Page Dr S Ste 102
(701) 478-4500

Mathison, Peter T., DDS

McClure Ronald P DDS
520 Main Ave Ste 705
(701) 237-4341

McClure, Ronald P., DDS

McDonald & Gruchalla, D.D.S., P.C
1231 27th St SW
(701) 235-1261

Gruchalla, Stephanie G., DDS
McDonald, James L., DDS

Moe, Terry, DDS
118 Broadway Ste 708
(701) 232-8314

Moe, Terry L., DDS

Olson-Rommesmo, Lynne, DDS
1115 19th Ave N
(701) 293-8625

Olson-Rommesmo, Lynne M., DDS

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING DENTISTS

North Dakota (cont.)
Fargo (cont.)

Pediatric Dentistry. Ltd
3142 49th St S
(701) 293-6999
Olson, Travis, DDS

Pollard, John, DDS, PC
1221 Harwood Drive S
(701) 235-6622
Pollard, John J., DDS

Riverview Family Dental
100 4th St S Ste 304
(701) 235-6075
Harnish, Derek W., DDS

Sandman Family Dentistry, Ltd
1383 21st Ave N Ste B
(701) 237-3517
Joyce, Michael P., DDS
Klemz, Charles B., DDS
Sandman, Lucas A., DDS

Saunders Robert A., DDS dba Saunders Dental
2834 S University Dr
(701) 293-9886
Krog, Brittany C., DDS
Saunders, Robert A., DDS

Serenity Valley Family Dentistry, PC
4141 31st Ave S Ste 104
(701) 373-0681
Rosenfeldt, Shandra D., DDS

South University Dental Associates, PC
3115 University Dr S
(701) 232-8884
Bergan, Chad R., DDS
Debates, Todd E., DDS
Fellman, Thomas G., DDS
Samuel, Walter V., DDS

Southpointe Dental
3210 18th St S Ste A
(701) 280-1941
Lichtsinn, James B., DDS

Spriggs Kent, DDS
2910 University Dr S
(701) 235-1113

North Dakota (cont.)
Fargo (cont.)

Spriggs Kent, DDS (cont.)
- Endodontist
  Spriggs, Kent A., DDS

Trout, Carl A DDS, PC
2538 S University Dr
Ste A
(701) 232-1148
Holman, Brent L., DDS
Trout, Carl A., DDS

Valley Dental Center, PC
1338 Gateway Dr
(701) 232-1664
Tofteland, Bruce C., DDS

Valley Oral & Facial Surgery, PC
2701 9th Ave S Ste F
(701) 235-7379
Tanabe, Marcus B., DDS

Vogelsang, David R. DDS
3003 32nd Ave S
(701) 478-3513
Vogelsang, David R., DDS

Forman

Day Family Dentistry
317 Antelope Ave W
(701) 724-3671
Day, Joshua B., DDS

Grafton

Brewer, Boone, DDS PLLC
17 E 7th St
(701) 352-2450
Brewer, Boone T., DDS

Daby, Neil, DDS
15 E 7th St
(701) 352-0730
Daby, Neil W., DDS

Kern Family Dentistry PC
21 W 5th St
(701) 352-2013
Kern, Joseph C., DDS

North Dakota (cont.)
Grand Forks

1101 Dental PLLC
1101 S Columbia Rd
Unit B
(701) 795-1101
Johnson, Heather N., DDS

Anderson, John, DDS
3425 S Washington
(701) 775-3989
Anderson, John A., DDS

Baden, John, DDS
2512-A S Washington
(701) 775-7441
Baden, John J., DDS

Bridgeford, Charles, DDS
117 N Washington
(701) 746-0485
Bridgeford, Charles L., DDS

Center For Smile Design, Ltd
117 N Washington St
(701) 746-1481
Oconnell, James R., DDS

Dakota Pediatric Dentistry PC
2812 17 Ave S Ste F
(701) 746-1400
Hoge, Beth, DDS
Hoge, Chad J., DDS
Hoge, Mikala A., DDS

Danel Jeremiah, DDS PC
2650 32nd Ave S Ste G
(701) 775-0684
Danel, Jeremiah K., DDS
- Orthodontist
  Danel, Jeremiah K., DDS

Great Northern Dental Care
667 Demers Ave
(701) 772-8488
Clayburgh, John E., DDS

Labine, Glenn, DDS
2401 S Washington St
(701) 775-0682
Labine, Glenn W., DDS

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING DENTISTS

North Dakota (cont.)

Grand Forks (cont.)

Lysne, Daniel, DDS
3325 S Washington
(701) 775-7525

Lysne, Daniel G., DDS

- Periodontist
  Lysne, Daniel G., DDS

Manke Family Dentistry, PC
2401 S Washington St
Ste B
(701) 772-8158

Manke, Rory B., DDS

Nancy C Parr, DDS, PLLC
1321 S Washington St
(701) 772-6901

Parr, Nancy C., DDS

Nuveen, Michiel J., DDS
1165 Columbia Rd S Ste A
(701) 772-4835

Nuveen, Michiel J., DMD

Parr, Brian C., DDS dba Brian C, Parr, Dds
1165 B S Columbia Rd
(701) 772-3544

Parr, Brian C., DDS

Schefter, Dan, DDS
3001 B 32nd Ave S
(701) 775-7005

Schefter, Dan J., DDS

Swanson, Steven, DDS
1323 2nd Ave N
(701) 775-4289

Swanson, Steven B., DDS

Tran, Duc, DDS
600 Demers Ave Ste 304
(701) 775-7611

Tran, Duc V., DDS

Valley Community Health Center
212 S 4th St Suite 101
(701) 757-2100

Korsmo, Grant S., DDS
Manke, Lauren R., DDS
Nord, Jackie, DDS

North Dakota (cont.)

Harvey

Meharry, Marlin, DDS PC
317 Brewster St E
(701) 324-4861

Meharry, Marlin, DDS

Hebron

Hebron Dental Clinic
811 1/2 Main St
(701) 878-4700

Leutz, Roger F., DDS

Hettinger

Nelson, Mark W, DDS
204 E Hwy 12
(701) 567-4302

Nelson, Mark W., DDS

Hillsboro

Rothfusz, Craig, DDS, PC
7 W Caledonia Ave
(701) 636-4244

Rothfusz, Craig E., DDS

Jamestown

Anderson, Edward, DDS
302 2nd Ave SW
(701) 252-1661

Anderson, Edward A., DDS

Braun, Jason, DDS
116 2nd St NW
(701) 252-0690

Braun, Jason J., DDS

Cornforth, Gary, DDS
406 1st Ave N
(701) 252-7050

Cornforth, Gary P., DDS

- Orthodontist
  Cornforth, Gary P., DDS
  Gill, Jared B., DMD

Michel, Vicki, DDS
1209 5th Ave SE
(701) 252-0251

Michel, Vicki R., DDS

North Dakota (cont.)

Jamestown (cont.)

Sinner, Timothy H, DDS PC
1209 5th Ave SE Ste 6
(701) 252-6005

Sinner, Timothy H., DDS

The Dental Specialists of Jamestown, PC
920 10th St SE Ste A
(701) 252-1212

Fallgatter, Alison M., DDS

Ukestad, James, DDS
1209 5th Ave SE
(701) 252-0141

Ukestad, James, DDS

Kenmare

Kenmare Dental Clinic
318 1st Ave NE
(701) 385-4041

Ganes, Eric M., DDS

Lidgerwood

Marotzke, James, DDS
19 Wiley Ave S
(701) 538-4583

Marotzke, James D., DDS

Linton

Turman, Cristopher, DDS
117 S Broadway
(701) 254-4521

Turman, Cristopher, DDS

Lisbon

Krivarchka, Duane, DDS
11 11th Ave W
(701) 683-4455

Krivarchka, Duane V., DDS

Lisbon Smiles
420 Main Sreet
(701) 683-7695

Nelson, Ryan M., DDS

Zeck, Francis, DDS
513 Main St
(701) 683-5821

Zeck, Francis H., DDS

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING DENTISTS

North Dakota (cont.)

Mandan

Dental Associates PC
204 3rd Ave NW
(701) 663-7545
Duckwitz, Nicole M., DDS
Grunseth, John M., DDS
Maier, Michael D., DDS
Malaktaris, Anthony G., DDS

Ideal Image Dentistry & Spa
600 E Main St Ste 2
(701) 667-1933
Brady, Leah N., DDS

Mayville

Goose River Dental Association
37 1/2 E Main St
(701) 788-4064
Lauf, Robert C., DDS

Minot

Broadway Family Dentistry
1839 S Broadway
(701) 839-1299
Hirst, Stanley B., DDS
Jensen, Bethany J., DDS

Central Valley Dentistry & Oral Health
10 1st St SW
(701) 852-3939
Krasniqi, Fatbardhe, DMD
Monson, Andrea L., DMD

Dakota Dental Health Center PLLC
515 20th Ave SE Ste 8
(701) 852-4755
Bengson, Douglas T., DDS
Dibble, Amanda, DDS
Dibble, Patricio R., DMD

Dakota Kids Dentistry, PC
2615 Elk Drive Ste 1
(701) 839-4440
Behm, Lance R., DMD

Evanoff, Gregory, DDS PC
1000 31st Ave SW
(701) 852-3222
Evanoff, Gregory A., DDS
Evanoff, Michael A., DMD

North Dakota (cont.)

Minot (cont.)

Greer Dental
1015 S Broadway #20
(701) 838-1123
Greer, Murray E., DDS

Kemmet Dental Design
1015 S Broadway #42
(701) 852-4789
Kemmet, Lindell C., DDS

Landsiedel, Patrick, DDS PC
1000 31 Ave SW
(701) 852-3222
Landsiedel, Patrick B., DDS

Maercklein, Mark DDS
720 Western Ave
(701) 839-1484
Maercklein, Mark W., DDS

Northland Community Health Center
315 Main St S Ste 314
(701) 838-3051
Krasniqi, Fatbardhe, DMD
Stemm, Wilson S., DMD
Wood, R L., DMD

Olson, David, DDS
15 2nd Ave SW
(701) 852-4933
Olson, David C., DDS
Olson, Megan M., DDS

Ricks, Stephen, DDS
900 20th Ave SW
(701) 852-2455
Ashworth, Glenn T., DDS
Ricks, Stephen L., DDS

Scouton, Larry D., DDS
315 S Main St Ste 314
(701) 838-3051
Scouton, Larry D., DDS

Trinity Medical Group
407 3rd Street SE
(701) 857-5871
- Oral Surgery
  McMahon, Michael G., DDS
  Ulloa, Juan J., DDS

North Dakota (cont.)

Minot (cont.)

Trinity Medical Group
1 Burdick Expy W
(701) 857-5000
- Oral Surgery
  McMahon, Michael G., DDS
  Ulloa, Juan J., DDS

Mohall

Brown, Theodore A., DDS
106 3rd Ave SE
(701) 756-6655
Brown, Theodore A., DDS

Mott

Apollonia Dental, PC
223 Brown Ave
(701) 824-2991
Forster, Kristen L., DDS
Gjerstad, Lawrence E., DDS

New Rockford

James River Dentistry
120 S 1st St
(701) 947-2354
Belquist, Robert L., DDS
Cudworth, Robert F., DDS
Ellingson, Amy, DDS

Oakes

Malmberg Mark DDS
19 N 6th
(701) 742-3401
Malmberg, Mark M., DDS

Park River

First Care Health Center
115 Vivan St
(701) 284-7555
Beneda, Nicholas D., DDS
Larson, Brian J., DDS

Lifetime Dental, LLC
321 Briggs Ave S Ste 3
(701) 284-7777
Ekman, Roberta L., DDS

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING DENTISTS

North Dakota (cont.)

Park River (cont.)

Park River Dental, PC
418 Briggs Ave S
(701) 284-6131
Beneda, Nicholas D., DDS
Larson, Brian J., DDS
Larson, Gerald D., DDS

Parshall

Parshall Dental Clinic
#20 S Main
(701) 862-3121
Ganes, Eric M., DDS

Richardton

Richardton Dental Clinic
200 3rd Ave W
(701) 974-2118
Johnson, Gregory J., DDS

Rolla

Turner Dental Office PC
4 3rd Ave NE
(701) 477-3821
Turner, Kenard A., DDS
Turner, William W., DDS

Rugby

Rugby Dental Office DDS PC
201 7th St SW Ste 1
(701) 776-5884
Niemi, Paul W., DDS
Santjer, Kathy L., DDS

Stanley

Anderson, Douglas, DDS, PLLC
514 4th St SE
(701) 628-2138
Anderson, Douglas B., DDS

Tioga

Carlson, David, DDS
111 Main St
(701) 664-2582
Carlson, David C., DDS

North Dakota (cont.)

Turtle Lake

Northland Community Health Center- Turtle Lake
416 Kundert St
(701) 448-9225
Stemm, Wilson S., DMD
Wood, R L., DMD

Valley City

Concept Dentistry PC
117 3rd St NW
(701) 845-2180
Bulik, Brian E., DDS
Hagen, Louis T., DDS
Slama, Ann E., DDS

Wahpeton

Ndscs Allied Dental Education Dept
800 N 6th St
(701) 671-2333
Swanson, Susan L., DDS

Three Rivers Dental, PC
1999 4th St N #B
(701) 642-2656
Pope, Joan E., DDS

Wasemiller, Mark, DDS
276 11th St S
(701) 642-4866
Wasemiller, Mark A., DDS

Withuski, Jeffrey, DDS & Sabbe, Paula S. Dds
103 9th St N Suite 2
(701) 642-8566
Sabbe, Paula S., DDS
Withuski, Jeffrey S., DDS

Watford City

Maisey Dental Clinic
109 5th St SW
(701) 842-4474
Allen, Lucas M., DDS

West Fargo

Capp, Patrick, DDS
105 13th Ave E
(701) 282-7772
Capp, Patrick J., DDS

North Dakota (cont.)

West Fargo (cont.)

Elmwood Family Dentistry, PLLP
1213 Prairie Parkway
(701) 282-5250
Bakkum, Nicholas R., DDS
Dobmeier, David D., DDS
Seeley, Bryan J., DDS

Hieb, J Christopher, DDS, PC
309 Sheyenne St
(701) 282-5035
Hieb, James C., DDS

Williston

Burke, L N, DDS
10 1/2 E 1st
(701) 774-3002
Burke, Lawrence N., DDS

Fisher, Tony, DDS
215 W Highland Dr Ste D
(701) 572-3414
Fisher, Anthony E., DDS
- Orthodontist
  Fisher, Anthony E., DDS

Hamilton, John, DDS, PC
2204 2nd Ave W Ste 101
(701) 774-8822
Hamilton, John W., DDS

Maisey Dental Clinic
708 Main St
(701) 774-1879
Allen, Lucas M., DDS
Maisey, Edward D., DDS
Maisey, William H., DDS

Messer Dental PC
2224 1st Ave W
(701) 774-0404
Messer, Jeremy J., DMD
Seeley, Ron J., DDS

Ulloa, Juan J, DDS dba Implant and Maxillofacial Surgical Ce
2224 1st Ave W Ste 3
(701) 572-2046
- Oral Surgery
  Ulloa, Juan J., DDS

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING DENTISTS

North Dakota (cont.)

Wishek

Turman, Cristopher, DDS
521 Beaver Ave
(701) 452-2115

Turman, Cristopher, DDS

South Dakota

Aberdeen

Carrels & Bain Family Dental Care
805 South State St
(605) 225-1192

Bain, Mark, DDS

Northeastern Dental Center
3015 6th Ave SE
(605) 226-3939

Van Beek, Gregg, DDS

Opp, Darold D, DDS, PC
1409 6th Ave SE Ste 8
(605) 225-2236

Opp, Darold D., DDS

Smile Solutions
105 6th Ave SE
(605) 725-1500

Scepaniak, Amy M., DDS

Britton

Day Family Dentistry
701 Main St
(605) 448-5977

Day, Joshua B., DDS

Eureka

Eureka Family Dental Care
708 G Avenue
(605) 284-2461

Bain, Mark, DDS

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING ANCILLARY PROVIDERS

California

S San Fran

Counsyl Inc
180 Kimball Way
(888) 268-6795

- Independent Laboratory
  Counsyl, Inc

Colorado

Lone Tree

Zynex Medical, Inc.
9990 Park Meadows Drive
(800) 495-6670

- Home Medical Equipment
  Zynex Medical, Inc.

Florida

Stuart

Liberator Medical Supply, Inc.
2979 SE Gran Park Way
(800) 536-2390

- Home Medical Equipment
  Liberator Medical Supply, Inc

Minnesota

Ada

Bridges Medical Center dba Essentia Health Ada Clinic
201 9th Street W
(218) 784-2727

- Certified Registered Nurse Anesthetist
  Bulik, Robert E., CRNA
  Honeyman, Ron L., CRNA
  Kremer, Randall L., CRNA
  Spicer, Nathan M., CRNA
  Strasburg, Ryan G., CRNA
- Physician Assistant
  Dangerud, Chentel, PA
  Skyberg, Angela M., PA

Red River Counseling PLLC
110 3rd Ave E
(218) 227-0338

- Psychology
  Hamann, Linda R., MS

Minnesota (cont.)

Alexandria

Rice Home Medical, LLC
115 18th Ave W
(320) 235-8434

- Home Medical Equipment
  Rice Home Medical LLC

Rice Home Medical, LLC
1804 S Bdwy Ste 160
(320) 235-8434

- Home Medical Equipment
  Rice Home Medical LLC

Barnesville

Barnesville Area Clinic
209 2nd St SE
(218) 354-2111

- Nurse Practitioner
  Hohman, Adam G., FNP
- Physician Assistant
  Johnson, Ronald M., PA

Rehab Plus Barnesville
220 Front Street
(218) 354-7080

- Physical Therapy
  Larson, Peter N., PT

Breckenridge

Orthopedic and Sports Physical Therapy Inc
430 5th St N
(218) 641-7725

- Occupational Therapy
  Dotzenrod, Alison R., OT
  Holubok, Gregory D., OT
- Physical Therapy
  Dockter, Rebecca S., PT
  Eggiman, Anthony C., PT
  Kraemer, Jennifer N., PT
  Krause-Roberts, Shawn M., PT
  Paulson, Tera D., PT
- Speech Therapy
  Hoffert, April, ST

R P Ascano & Associates Inc.
614 Nebraska Ave
(218) 643-3867

- Psychology
  Ascano, R P., PHD

Minnesota (cont.)

Breckenridge (cont.)

Red River Anesthesia PC
2400 St Francis Dr
(800) 922-5852

- Certified Registered Nurse Anesthetist
  Genereux, Heidi E., CRNA
  Splichal, Robert J., CRNA
  Vaughn, Rita K., CRNA

St Francis Medical Center
2400 St Francis Drive
(218) 643-3000

- Licensed Addiction Counselor-Chemical Dependency
  Clark, Sherri E., LAC
- Nurse Practitioner
  Rick, Brenda M., FNP
- Occupational Therapy
  Kjar, Jason C., OT
- Physical Therapy
  Gregerson, Kyle A., PT
  Hansen, Casey J., PT
  Jelinek, Denise R., PT
  Lynch, Brian J., PT
- Physical/Occupational Therapist
  Kjar, Jason C., OT
- Psychology
  Ketterling, Jan E., PSYD
  Molstre, John A., PHD
- Speech Therapy
  Francois, Sara, ST

Thrifty White Drug #781
126 N 5th St
(218) 643-3871

- Home Medical Equipment
  Thrifty White Drug #781

Crookston

Altru Crookston
400 S Minnesota St
(218) 281-9100

- Audiology
  Brandt, Mackensie M., AUD
- Licensed Registered Dietitian
  Love, Marla R., LRD
- Nurse Practitioner
  Devine Roberts, Jacqueline R., CNP
  Dorman, Seth T., FNP

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING ANCILLARY PROVIDERS

Minnesota (cont.)
Crookston (cont.)

Altru Crookston (cont.)

- Nurse Practitioner (continued)
  Laframboise, Jennifer L., FNP
  Olson, Wade A., FNP
  Rustvang, Daniel R., FNP
  Sperle, Roni L., FNP
  Suda, Amy L., FNP
  Tinkler, Jennifer A., FNP
- Occupational Therapy
  Knott, Christina M., OT
- Physical Therapy
  Knott, Kristin R., PT
  Kunz, Carter K., PT
- Physical/Occupational Therapist
  Knott, Christina M., OT
- Physician Assistant
  Clauson, Carrie B., PA
  Linnen, Katherine M., PA
  Myrfield, Deborah L., PA
  Ring, Karin E., PA
  Staveteig, Mindy S., PA
  Wright, Shellie D., PA

Altru Specialty Services Inc Crookston dba Yorhom Medical Es
400 S Minnesota St
(218) 281-9176

- Home Medical Equipment
  Altru Specialty Services Inc Crookston dba Y

Northwestern Mental Health Center, Inc.
603 Bruce St
(218) 281-3940

- Licensed Professional Clinical Counselor
  Amundson, Janet L., LPCC
  Serna, Carrie L., LPCC
  Solheim, Sheri L., LPCC
  Taylor, Heather, LPCC
- Licensed Professional Counselor/Therapist
  Williams, Gail E., LPCC
- Nurse Practitioner
  Holler-Bibel, Mary P., CNP
- Psychology
  Campbell, Karen L., PHD
  Gudvangen, Denise R., PSYD
  Jorgens, Michal C., PHD
  Pedersen, Heather A., PHD

Minnesota (cont.)
Crookston (cont.)

Riverview Family Practice
323 S Minnesota St
(218) 281-9519

- Nurse Practitioner
  Nupdal, Jason B., CNP
- Physician Assistant
  Reese, Paul L., PA

Riverview Health dba Glenmore Recovery Center
23616 Us Hwy 2 SW
(218) 281-9511

- Licensed Addiction Counselor-Chemical Dependency
  Buseth, Oliver, LAC
  Johnson, Ashley A., LAC
  Niffenegger, Angela, LAC
  Reff, Thomas M., LAC

Riverview Healthcare Association
323 S Minnesota St
(218) 281-9200

- Certified Registered Nurse Anesthetist
  Buettner, Kevin C., CRNA
  Channel, Eileen M., CRNA
  Eversvik, Jeremy J., CRNA
  Kaiser, Brent A., CRNA
  Krueger, Curtis C., CRNA
  Macleod, Mary C., CRNA
  Nuelle, David B., CRNA
  Osowski, Lynn, CRNA
  Reese, Gregory H., CRNA
  Roed, Eric B., CRNA
  Siemers, Trent E., CRNA
  Wolfgram, Alicia M., CRNA
- Home Medical Equipment
  Riverview Healthcare
- Nurse Practitioner
  Anderson, Kari L., FNP
  Nupdal, Jason B., CNP
- Occupational Therapy
  Maruska, Crystal A., OT
- Physician Assistant
  Bratvold, Marion J., PA
  Reese, Paul L., PA
- Speech Therapy
  Cameron, Ashley D., ST

Minnesota (cont.)
Crookston (cont.)

Riverview Specialty Clinic
323 S Minnesota St
(218) 281-9595

- Nurse Midwives
  Hemler, Elizabeth A., CNM
- Nurse Practitioner
  Anderson, Kari L., FNP
  Nupdal, Jason B., CNP
  Royal, Natalie R., FNP
  Sundberg, David P., FNP
  Updike, Meghan T., CNP
- Physician Assistant
  Bratvold, Marion J., PA
  Haas, Carly M., PA
  Massmann, Matthew S., PA
  Reese, Paul L., PA
- Psychology
  King, Brenda J., PHD

Thrifty White Drug # 729
206 N Main St
(218) 281-2540

- Home Medical Equipment
  Thrifty White Drug # 729

Tri County Community Corrections
816 Marin Ave Ste 110
(218) 470-8134

- Licensed Addiction Counselor-Chemical Dependency
  Thibert, Mary, LAC

Duluth

Midwest Medical Equipment & Supplies, Inc.
530 E 2nd St
(218) 786-4368

- Home Medical Equipment
  Midwest Medical Equipment & Supplies, Inc

Midwest Medical Equipment & Supplies, Inc.
4418 Haines Rd #1200
(218) 722-3420

- Home Medical Equipment
  Midwest Medical Equipment & Supplies, Inc

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING ANCILLARY PROVIDERS

Minnesota (cont.)
E Grand Forks

Achieve Therapy
408 3rd St NW
(218) 773-3388

- Physical Therapy
  Bolek, Megan E., PT
  Carson, Thomas L., PT
  Lafreniere, Clifford W., PT
  Walsh, Heather A., PT
  Wilcox, Lacey J., PT

Altru Clinic East Grand Forks
607 Demers Ave
(218) 773-0357

- Nurse Practitioner
  Meyer, Lana J., FNP
  Suda, Amy L., FNP
  Tinkler, Jennifer A., FNP

Patrick Hart, LPCC
1125 18th Ave SE
(218) 289-6177

- Licensed Professional Clinical Counselor
  Hart, Patrick E., LPCC

Riverview Health dba Glenmore Recovery Center
1424 Central Ave NE
(218) 773-4994

- Licensed Addiction Counselor-Chemical Dependency
  Buseth, Oliver, LAC

Riverview Specialty Clinic-E. Grand Forks
1428 Central Ave NE
(866) 773-1390

- Nurse Practitioner
  Anderson, Kari L., FNP
  Gullicks, Jean N., CNP
  Royal, Natalie R., FNP
  Updike, Meghan T., CNP
- Physician Assistant
  Haas, Carly M., PA

Sanford Health 621 Demers Ave Clinic
621 Demers Ave
(218) 773-5858

- Audiology
  Kjersten, Wendy L., AUD

Minnesota (cont.)
E Grand Forks (cont.)

Sanford Health 621 Demers Ave Clinic (cont.)

- Nurse Practitioner
  Spiekermeier, Michele A., CNP
- Physical Therapy
  Jung, Laurie T., PT
  Klabunde, Joshua P., PT
  Ness, Richard J., PT
  Parvey, Christel, PT
- Physician Assistant
  Hinkle, Stephanie, PA

Sanford Health 929 Central Ave Clinic
929 Central Ave NW
(218) 773-6800

- Licensed Registered Dietitian
  Grove, Denae D., LRD
- Nurse Practitioner
  Berge, Cheri J., CNP
  Spiekermeier, Michele A., CNP
- Physician Assistant
  Braun, Lisa, PA
  Hinkle, Stephanie, PA

Sanford Healthcare Accessories East Grand Forks
621 Demers Ave
(218) 773-5840

- Home Infusion
  Sanford Healthcare Accessories East Grand Fo
- Home Medical Equipment
  Sanford Healthcare Accessories East Grand Fo

Erskine

Altru Clinic Erskine
23076 347th St SE
(218) 687-5317

- Nurse Practitioner
  Dorman, Seth T., FNP
  Rustvang, Daniel R., FNP
- Physician Assistant
  Myrfield, Deborah L., PA
  Staveteig, Mindy S., PA

Minnesota (cont.)
Fertile

Altru Clinic Fertile
101 N Mill St
(218) 945-6064

- Nurse Practitioner
  Dorman, Seth T., FNP
  Rustvang, Daniel R., FNP
- Physician Assistant
  Clauson, Carrie B., PA
  Ring, Karin E., PA
  Staveteig, Mindy S., PA

Poissant Therapy and Fitness
208 N Mill St
(218) 945-3409

- Physical Therapy
  Poissant, Steven L., PT

Riverview Family Practice Fertile
306 North Mill Street
(218) 945-6695

- Nurse Practitioner
  Nupdal, Jason B., CNP
  Royal, Natalie R., FNP
  Updike, Meghan T., CNP
- Physician Assistant
  Bratvold, Marion J., PA
  Haas, Carly M., PA
  Reese, Paul L., PA

Fosston

First Care Medical Services dba Essentia Health - Fosston
900 Hilligoss Blvd SE
(218) 435-1500

- Certified Registered Nurse Anesthetist
  Lane, Mary K., CRNA
  Spicer, Nathan M., CRNA
  Strasburg, Ryan G., CRNA
- Nurse Practitioner
  Duppong, Maija L., CNP
  Vobr, Nan C., FNP
- Physician Assistant
  Dargus, Corinne A., PA
  Kiesow, Nicole M., PA
  Melgard, Margaret A., PA
  Wahlin-Quinlan, Shelley, PA

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING ANCILLARY PROVIDERS

Minnesota (cont.)

Hallock

Kittson Memorial Clinic
1010 S Birch
(218) 843-2165

- Nurse Practitioner
  Johnson, Julie A., FNP
  Pinnock, Amanda J., FNP
- Physician Assistant
  Warner, Karen J., PA

Halstad

Sanford Health Halstad Clinic
445 1st St E
(218) 456-2158

- Physician Assistant
  Herbst, Harold J., PA
  Hinkle, Stephanie, PA
  Owens, Ann, PA

Hawley

Mobility Plus Rehabilitation
520 Main Street
(218) 483-1500

- Occupational Therapy
  Dahl, Robert L., OT
- Physical Therapy
  Johnson, Loriann M., PT

Sanford Hawley Clinic
1412 Main St
(218) 483-3564

- Licensed Registered Dietitian
  Martodam, Susan M., LRD
- Nurse Practitioner
  Gross, Dean A., CNP
  Tobkin, Julie, FNP
- Physician Assistant
  Affield, Carrie A., PA
  Hass, Tabitha, PA
  Herbst, Harold J., PA
  Hinkle, Stephanie, PA
  Zimney, Stacy J., PA
- Psychology
  Gatheridge, Brian, PHD

Sanford Hawley Clinic
1412 Main St
(218) 483-3564

- Licensed Registered Dietitian
  Martodam, Susan M., LRD

Minnesota (cont.)

Hawley (cont.)

Sanford Hawley Clinic (cont.)

- Nurse Practitioner
  Gross, Dean A., CNP
  Tobkin, Julie, FNP
- Physician Assistant
  Affield, Carrie A., PA
  Hass, Tabitha, PA
  Herbst, Harold J., PA
  Hinkle, Stephanie, PA
  Waage, Kagen, PA
  Zimney, Stacy J., PA
- Psychology
  Gatheridge, Brian, PHD

Karlstad

Kittson Memorial Clinic of Karlstad
205 Roosevelt Ave
(218) 436-2251

- Nurse Practitioner
  Pinnock, Amanda J., FNP
- Physician Assistant
  Anderson, Paul R., PA

Madison

Rice Home Medical LLC
105 Sixth Ave
(320) 235-8434

- Home Medical Equipment
  Rice Home Medical LLC

Minneapolis

Tactile Systems Technology Inc
1331 Tyler St NE Ste 200
(612) 355-5100

- Home Medical Equipment
  Tactile Systems Technology Inc

Moorhead

7 Day Clinic
720 Main Ave
(701) 232-6211

- Nurse Practitioner
  Allard, Amy M., FNP
  Dolalie-Kelsch, Angela A., CNP
  Ek, Marilyn S., FNP
  Forsythe, Suzanne K., CNP
  Hamilton, Andrew P., FNP

Minnesota (cont.)

Moorhead (cont.)

7 Day Clinic (cont.)

- Physician Assistant
  Davidson, Gabriel L., PA
  Eastman, Nancy M., PA
  Nycklemoe-Connell, Joan L., PA

Coram Alternate Site Services Inc
2901 Frontage Road S
Hwy 10 E Ste 7
(218) 233-2210

- Home Infusion
  Coram Healthcare Inc

Drake Counseling Services, Inc
715 11 St North
Suite 204
(218) 477-1092

- Licensed Addiction Counselor-Chemical Dependency
  Flann, Kayla J., LAC
  Hersrud, Jacqueline M., LAC
  Johnson, Janna M., LAC

Duke, Bill, PhD
420 Center Ave Ste 7
(701) 241-9281

- Psychology
  Duke, Bill J., PHD

Duke, Denise, EDD
420 Center Ave Ste 7
(701) 241-9281

- Psychology
  Duke, Denise M., EDD

Essentia Health Moorhead Clinic
801 Belsly Blvd S
(701) 364-8900

- Certified Diabetic Educator
  Kocka, Tia M., CDE
  Walters, Leah M., CDE
- Licensed Registered Dietitian
  Andvik, Vicki, LRD
  Walters, Leah M., LRD
- Nurse Practitioner
  Garberg, Tamra A., FNP
  Safranski, Mary B., CNP
  Weston, Penni M., FNP
- Occupational Therapy
  Enockson, Michelle I., OT
  McKibbin, Randon N., OT
  Mueller, Amy L., OT

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING ANCILLARY PROVIDERS

Essentia Health Moorhead Clinic (cont.)
- Physical Therapy
  Bitz, Heidi S., PT
  Brekke, Teri J., PT
  Gauer, Chelsey N., PT
  Gunkelman, Ashley L., PT
  Halls, Ruth Ann, PT
  Isaak, Christine M., PT
  Kowalski, Darrin P., PT
  Sauvageau, Katie M., PT
  Sunde, Lizette, PT
- Physical/Occupational Therapist
  Enockson, Michelle I., OT
  Mueller, Amy L., OT
- Physician Assistant
  Norby, Brenda J., PA
  Olson-Fitzgerald, Heidi M., PA
- Speech Therapy
  Sullivan, Patricia C., ST

Family Healthcare Center At Concordia Health Services
901 S 8th St
(218) 299-3662
- Nurse Practitioner
  Ross, Cheryl, FNP

Hendrix Health Center
1104 7th Ave S
(218) 477-2623
- Psychology
  Bertelsen, Lora, PHD
  Lall, Rita, MS

Integrated Counseling Services Inc
1132 28th Ave S Ste 102
(218) 204-1183
- Psychology
  Follingstad, Carol C., PSYD

Karen Knutson, PhD
1506 Main Ave Ste 101
(218) 287-2872
- Psychology
  Knutson, Karen, PHD

Kolotkin, Richard, PhD
403 Center Ave Ste 601
(701) 280-2484
- Psychology
  Kolotkin, Richard A., PHD

Kuznia Colette C. LPCC
403 Center Ave Ste 405
(218) 233-9426
- Licensed Professional Clinical Counselor
  Kuznia, Colette C., LPCC

Lakeland Mental Health Center Inc
1010 32nd Ave S
(218) 233-7524
- Licensed Professional Clinical Counselor
  Stielow, Ashley L., LPCC
- Nurse Practitioner
  Graham Steinhauer, Jessica K., CNP
- Psychology
  Molstre, John A., PHD

Med-Plus Therapy Ltd
312 Hwy 75 N
(218) 233-8544
- Physical Therapy
  Crockett, Jodi, PT

Medical Pharmacy Moorhead
101 11th St S
(218) 233-7365
- Home Medical Equipment
  Medical Pharmacy

Migrant Health Services Inc-Moorhead
810 4th Ave S Ste 101
(218) 236-6502
- Nurse Practitioner
  Checco De Souza, Jocelyn, FNP
  Gibson, Beverly A., FNP

Minnesota Hearing Aid Center of Moorhead
725 Center Ave
(218) 233-1116
- Home Medical Equipment
  Minnesota Hearing Aid Ctr. of Moorhead,Ltd

MSUM Speech, Language & Hearing Clinic
1104 7th Ave S
(218) 477-5953
- Audiology
  Drake, Mary K., AUD

MSUM Speech, Language & Hearing Clinic (cont.)
- Speech Therapy
  Adler, Richard K., ST
  Hanson, Bruce R., ST
  Mehrhoff, Joni K., ST
  Paul, Nancy A., ST
  Plankers, Maribeth K., ST
  Pyle, Elaine K., ST
  Riedinger, Vicki L., ST
  Stotts, Rachel L., ST
  Vossler, Kristi A., ST
  Walseth, Wanda C., ST

Prairie St Johns
2925 20th St S
(218) 284-0300
- Nurse Practitioner
  Conteh, Patricia E., CNP

Red River Counseling PLLC
403 Center Ave Ste 410
(218) 227-0338
- Psychology
  Hamann, Linda R., MS

Sanford Moorhead Clinic
4000 28th Ave S
(701) 234-3200
- Independent Laboratory
  Sanford Moorhead Clinic Lab
- Licensed Registered Dietitian
  Williams, Michelle D., LRD
- Nurse Practitioner
  Eldridge, Rose Mary, CNP
  Kary, Shelby, FNP
  Teske, Victoria R., CNP
- Physician Assistant
  Fisher, Jennifer, PA
  Hoffmann-Carroll, Joanna E., PA
  Kringlie, Cassandra, PA
  Marsden, Jenny K., PA
- Psychiatric Nurse
  Cameron, Kathryn M., CNS

Sanford Moorhead Clinic
4000 28th Ave S
(701) 234-3200
- Licensed Registered Dietitian
  Williams, Michelle D., LRD

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING ANCILLARY PROVIDERS

Minnesota (cont.)
Moorhead (cont.)

Sanford Moorhead Clinic (cont.)
- Nurse Practitioner
  Eldridge, Rose Mary, CNP
  Hoban, Alissa, CNP
  Hoffmann, Jennifer, FNP
  Kary, Shelby, FNP
  Teske, Victoria R., CNP
- Physician Assistant
  Fisher, Jennifer, PA
  Hoffmann-Carroll, Joanna E., PA
  Kringlie, Cassandra, PA
  Marsden, Jenny K., PA
- Psychiatric Nurse
  Cameron, Kathryn M., CNS
- Psychology
  Maley, Robyn, PSYD
  Preussler, Rebecca S., PSYD

Sanford Moorhead Clinic
4000 28th Ave S
(701) 234-3200
- Licensed Registered Dietitian
  Williams, Michelle D., LRD
- Nurse Practitioner
  Carlson, Kari, CNP
  Eldridge, Rose Mary, CNP
  Hoban, Alissa, CNP
  Teske, Victoria R., CNP
- Physician Assistant
  Fisher, Jennifer, PA
  Hoffmann-Carroll, Joanna E., PA
  Kringlie, Cassandra, PA
  Marsden, Jenny K., PA
- Psychiatric Nurse
  Cameron, Kathryn M., CNS
- Psychology
  Maley, Robyn, PSYD

Solutions Behavioral Healthcare Professionals, Inc.
891 Belsly Blvd
(218) 287-4338
- Psychology
  Cox, Joseph M., PSYD
  Ochsendorf, Amy L., PSYD
  Paulson, Michael D., PHD
  Witte-Bakken, Jan K., PHD

Minnesota (cont.)
Redwood Falls

Rice Home Medical, LLC
252 Second St E
(320) 235-8434
- Home Medical Equipment
  Rice Home Medical LLC

Thief River Fls

Rehab Authority LLC
1511 Highway 59 South
(218) 681-0449
- Physical Therapy
  Kraemer, Jennifer N., PT

Twin Valley

Sanford Health Twin Valley Clinic
501 2nd St NW
(218) 584-5142
- Licensed Registered Dietitian
  Rockstad, Gretchen B., LRD
- Nurse Practitioner
  Larson, Joeanna, FNP
- Physician Assistant
  Affield, Carrie A., PA
  Herbst, Harold J., PA
  Hinkle, Stephanie, PA
  Waage, Kagen, PA
  Zimney, Stacy J., PA

Ulen

Sanford Health Ulen Clinic
108 Viking Ave W
(218) 596-8867
- Nurse Practitioner
  Gross, Dean A., CNP
- Physician Assistant
  Affield, Carrie A., PA
  Hass, Tabitha, PA
  Herbst, Harold J., PA
  Hinkle, Stephanie, PA
  Waage, Kagen, PA
  Zimney, Stacy J., PA

Wheaton

Sanford Wheaton
401 12th St N
(320) 563-8971
- Physician Assistant
  Braun, Lisa, PA

Minnesota (cont.)
Wheaton (cont.)

Sanford Wheaton
401 12th St N
(320) 563-8971
- Physician Assistant
  Braun, Lisa, PA

Sanford Wheaton
401 12 St N
(320) 563-8971
- Nurse Practitioner
  Colon, Deborah, CNP
  Kremer, Kathi, FNP
  Rinke, Michelle, FNP
- Physician Assistant
  Braun, Lisa, PA
  Waage, Kagen, PA

Willmar

Rice Home Medical, LLC
1033 19th Ave SW
(320) 235-8434
- Home Medical Equipment
  Rice Home Medical LLC

Montana
Sidney

District II Alcohol & Drug
209 2 St SE
(406) 433-4097
- Licensed Addiction Counselor-Chemical Dependency
  Anderson, Tim G., LAC

Thrifty White Pharmacy #25
402 E Main St
(406) 482-1420
- Home Medical Equipment
  White Drug #25

New Jersey
Hamilton

Medical Diagnostic Laboratories LLC
2439 Kuser Road
(877) 333-9233
- Independent Laboratory
  Medical Diagnostic Laboratories, LLC

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING ANCILLARY PROVIDERS

New York
Hauppauge

Better Living Now Inc
185 Oser Ave
(800) 854-5729

- Home Medical Equipment
  Better Living Now Inc

New York

Yummy Mummy LLC
1201 Lexington Ave
(516) 931-6300

- Home Medical Equipment
  Yummy Mummy

North Dakota
Arthur

Arthur Drug
340 Main St
(701) 967-8900

- Home Medical Equipment
  Casselton Drug Inc dba Arthur Drug

Ashley

Ashley Medical Center
612 Center Ave N
(701) 288-3448

- Licensed Registered Dietitian
  Imdieke, Catherine B., LRD
- Nurse Practitioner
  Bichler, Lori M., CNP
  Klein, Nina J., FNP

Ashley Medical Center
612 Center Ave N
(701) 288-3433

- Certified Registered Nurse Anesthetist
  Mettler, Daniel W., CRNA
- Licensed Registered Dietitian
  Imdieke, Catherine B., LRD

Sanford Bismarck At Ashley Medical Center
612 Center Ave N
(701) 288-3438

- Audiology
  Arneson-Thilmony, Debra J., AUD
  Boutilier, Amanda D., AUD
  Mann, Krystal L., AUD

North Dakota (cont.)
Ashley (cont.)

Sanford Bismarck At Ashley Medical Center (cont.)

- Audiology (continued)
  Mattheis Anderson, Amy M., AUD
  Ness, Brady J., AUD
  Schauer, Douglas D., AUD

White Drug #66
109 W Main St
(701) 288-3355

- Home Medical Equipment
  White Drug #66

Beach

Advanced Physical Therapy and Fitness, LLC
61 South Central Ave #6
(701) 751-3001

- Occupational Therapy
  Brown, Melissa, OT
- Physical Therapy
  Hollar, Anthony C., PT
  Jurgens-Dinius, Nicholl, PT

Beach Medical Clinic
95 2nd St NW
(701) 872-3777

- Nurse Practitioner
  Hardy, Michelle M., CNP
  Jepson, Lori A., CNP
  Medford, Jessica L., FNP
- Physician Assistant
  Olstad, Kristina M., PA

Telepharmacy Concepts Inc dba Beach Pharmacy
180 Central Ave N
(701) 872-2800

- Home Medical Equipment
  Telepharmacy Concepts dba Beach Pharmacy

Beulah

Beulah Drug Co
147 W Main
(701) 873-5215

- Home Medical Equipment
  Beulah Drug Co

North Dakota (cont.)
Beulah (cont.)

Coal Country Community Health Center
1312 Highway 49 N
(701) 873-4445

- Licensed Addiction Counselor-Chemical Dependency
  Herman, Melissa M., LAC
  Oster, Sharold E., LAC
  White, Darlene S., LAC
- Licensed Registered Dietitian
  Langeliers, Jean D., LRD
- Nurse Practitioner
  Olson, Sharon J., CNP
  Rogness, Corrie L., CNP
  Sailer, Debra L., CNP
- Physical Therapy
  Klindworth, Eric H., PT
- Physician Assistant
  Mollman, Burton J., PA
  Olson, Kayla L., PA
  Zimmerman, Beth, PA

Sakakawea Medical Center
118 22nd St NE
(701) 873-3271

- Physical Therapy
  Huber, Dannette R., PT
  Miller, Nicholas J., PT

Sanford Bismarck At Coal Country Community Health
1312 Hwy 49 N
(701) 323-6000

- Audiology
  Arneson-Thilmony, Debra J., AUD
  Boutilier, Amanda D., AUD
  Mann, Krystal L., AUD
  Mattheis Anderson, Amy M., AUD
  Schauer, Douglas D., AUD

Bismarck

Advanced Physical Therapy and Fitness LLC At Healthways
1033 Basin Ave
(701) 751-3001

- Physical Therapy
  Bakkum, Matthew P., PT

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING ANCILLARY PROVIDERS

Advanced Physical Therapy and Fitness, LLC
1000 Tacoma Ave Ste 500
(701) 751-3001

- Physical Therapy
  Bakkum, Matthew P., PT
  Hieb, Marcus A., PT
  Hieb, Nada D., PT
  Hollar, Anthony C., PT

Advanced Surgical Arts Center
3913 Lockport St
(701) 530-8450

- Certified Registered Nurse Anesthetist
  Christ, Renee, CRNA
  Filler, Laura K., CRNA
  Freitag, Heather, CRNA
  Oshea, Carol W., CRNA
  Schaar, Launi M., CRNA

Anchor Christian Counseling Inc
1501 N 12th St
(701) 255-3325

- Licensed Professional Clinical Counselor
  Holden, Harley A., LPCC

Baker Family Medicine PC
300 West Century Ave
(701) 751-4340

- Nurse Practitioner
  Todd-Reisnour, Kristie L., CNP

Basaraba Counseling Service
433 E Bismarck Expwy #3
(701) 224-1615

- Licensed Addiction Counselor-Chemical Dependency
  Basaraba, Rose, LAC

Becker Plastic Surgery Center
1500 Interchange Ave
Ste 100
(701) 530-3333

- Certified Registered Nurse Anesthetist
  Ahneman, Jon, CRNA
  Klein, Kevin L., CRNA
  Kuennen, Timothy S., CRNA
  McArthur, Ryan, CRNA
  Walford, Steven M., CRNA

Becker Plastic Surgery, LLC
1500 Interchange Ave
Ste 100
(701) 530-3333

- Nurse Practitioner
  Sondrol, Cynthia, FNP

Bismarck Surgical Associates, LLC
600 N 9th St
(701) 221-2299

- Certified Registered Nurse Anesthetist
  Albert, Kory M., CRNA
  Dollinger, Jay, CRNA
  Geiger, Kim E., CRNA
  Goeddertz, John P., CRNA
  Hildebrandt-Folske, Carla J., CRNA
  Kuennen, Timothy S., CRNA
  Manders, Landa, CRNA
  Maund, Michelle, CRNA
  Oshea, Carol W., CRNA
  Roloff, Diana J., CRNA
  Schaar, Launi M., CRNA
  Staiger, Joshua J., CRNA
  Town, Jerry R., CRNA
  Walth, Doran D., CRNA

Cc's Physical Therapy, LLC
215 E Broadway Ave
Ste 130
(701) 751-0994

- Physical Therapy
  Mettler, April J., PT
  Rambur, Jenny M., PT

Center For Family Medicine
701 E Rosser
(701) 751-9500

- Licensed Professional Clinical Counselor
  Luger, Brynn, LPCC
- Nurse Practitioner
  Melby, Kristin L., FNP

Chambers & Blohm Psychological Services, PC
309 N Mandan St Ste 1
(701) 323-0924

- Licensed Addiction Counselor-Chemical Dependency
  Weisz, Shannon P., LAC

Chambers & Blohm Psychological Services, PC (cont.)

- Psychiatric Nurse
  Fike, Michelle M., PNU
  Hellman, Lauree L., PNU
- Psychology
  Blohm, Kathy, PHD
  Johnson, Robert A., PHD
  Weisz, Shannon P., PSYD

Choices Counseling & Educational Center
1655 N Grandview Ln 204
(701) 751-2020

- Licensed Professional Clinical Counselor
  Herner, Diana L., LPCC

Chuppe Chiropractic Clinic
1936 N 11th St
(701) 258-0029

- Physical Therapy
  Romsaas, Jodi E., PT

Crosspoint Counseling
1655 N Grandview Lane
#204
(701) 751-2020

- Licensed Professional Clinical Counselor
  Mitzel, Julie M., LPCC

Dakota Eye Institute
200 S 5th St
(701) 222-3937

- Nurse Practitioner
  Pfenning, Stacey R., CNP
  Rising, Cheryl D., FNP
  Sandness, Amber, FNP

Dakota Eye Institute
3119 N 14th St
(701) 222-3937

- Nurse Practitioner
  Pfenning, Stacey R., CNP
  Rising, Cheryl D., FNP
  Sandness, Amber, FNP

Dakota Foot & Ankle Clinic
1733 E Capital Ave
(701) 255-3338

- Home Medical Equipment
  Dakota Foot & Ankle Clinic

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING ANCILLARY PROVIDERS

Dakota Institute of Trauma Therapy PC
4023 State St Ste 120
(701) 751-4447

- Licensed Addiction Counselor-Chemical Dependency
  Klein-Buffington, Shelley K., LAC

Dakota Pharmacy
705 E Main Ave
(701) 255-1881

- Pharmacy
  Dakota Pharmacy

Dakota Physical Therapy PC
1000 W Century Ave
(701) 355-1295

- Physical Therapy
  Bergan, April, PT
  Bergan, Chad M., PT
  Gietzen, Chris, PT
  Lang, Monica L., PT

Dakota Physical Therapy,PC
3124 Colorado Lane
(701) 751-5325

- Physical Therapy
  Bergan, April, PT
  Bergan, Chad M., PT
  Gietzen, Chris, PT

Dakota Surgery & Laser Center
430 E Sweet Ave
(701) 222-4900

- Certified Registered Nurse Anesthetist
  Kovar, Kathryn M., CRNA
  Martin, Donald C., CRNA
  Nelson, Denise, CRNA
  Schmidt, Cloris L., CRNA
  Schwindt, Brian E., CRNA

Decoteau Trauma-Informed Care & Practice, PLLC Td
515 1/2 E Broadway Ave
Ste 106
(701) 751-0443

- Nurse Practitioner
  Clark, Bonnie L., FNP
- Psychology
  Decoteau, Tami J., PHD
  Gustafson, Lisa A., PHD

Dsj Enterprises, LLC dba Aim Physical Therapy Clinic
2945 N 11 St
(701) 258-7730

- Physical Therapy
  Churchill, Stephen P., PT
  Fischer, Jonathan J., PT

Face & Jaw Surgery Center
1140 W Capitol Ave
(701) 258-7220

- Certified Registered Nurse Anesthetist
  Schwindt, Brian E., CRNA

Focus Chiropractic
1122 Divide Ave W
(701) 258-5058

- Physical Therapy
  Bossert, Amber D., PT

Foot Care Associates, PC
310 S 5th Street
(701) 250-8637

- Home Medical Equipment
  Foot Care Associates

Forte Pathroff, Denise, MD PC
225 N 7th St Suite B
(701) 224-9643

- Nurse Practitioner
  Martin, Shih Ru, CNP

Four Directions Clinic
300 West Century Ave
(701) 323-9900

- Nurse Practitioner
  Greybull, Ian L., FNP

Gateway Pharmacy
3101 N 11th St Ste 2
(701) 224-9521

- Home Medical Equipment
  Gateway Pharmacy North

Great Plains Rehab Service
1212 E Main Ave
(701) 530-4000

- Home Medical Equipment
  Great Plains Rehab Service

Hanger Prosthetics & Orthotics
721 E Rosser Ave
(701) 221-3000

- Home Medical Equipment
  Hanger Prosthetics & Orthotics

Haugen, Stacey, CNS
6221 University Dr
(701) 258-4483

- Psychiatric Nurse
  Haugen, Stacey S., CNS

Heartview Foundation
101 E Broadway Ave
(701) 222-0386

- Licensed Addiction Counselor-Chemical Dependency
  Carlson, Bruce L., LAC
  Ell, Candace J., LAC
  Fetting, Brenda M., LAC
  Gerhardt, Ronald J., LAC
  Meier, Shawn M., LAC
  Miller, Kay A., LAC
  Olson, Darcy C., LAC
  Peet, Roger M., LAC
  Schwan, Bruce, LAC
  Schwehr, Marjean L., LAC
  Snyder, Kurt A., LAC
  Stroup-Menge, Elizabeth A., LAC
- Psychology
  Peterson, Peter, PHD

Heritage Pharmacy Gateway Mall
2700 State St Ste F13
(701) 530-5800

- Home Medical Equipment
  Heritage Pharmacy Gateway Mall

Hope Therapy Center, PLLC
1929 N Washington St
Ste W
(701) 426-5804

- Occupational Therapy
  Fiechtner, Nicole M., OT
  Tosseth, Geri M., OT

Inspired Life Wellness Clinic, PLLC
200 E Main St Ste 204
(701) 989-4351

- Nurse Practitioner
  Aman, Christine M., CNP

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING ANCILLARY PROVIDERS

Inspired Life Wellness Clinic, PLLC (cont.)
- Nurse Practitioner (continued)
  Horner, Melissa M., CNP

Institute of Facial Surgery
2331 Tyler Pkwy Ste 4
(701) 255-4000
- Certified Registered Nurse Anesthetist
  Ahneman, Jon, CRNA
  Silbernagel, Paul J., CRNA
- Nurse Practitioner
  Stanley, Miranda D., FNP

IPA, LLC dba Independent Practitioners of American, LLC
115 W Century Ave Ste B
(701) 255-2252
- Certified Registered Nurse Anesthetist
  Ahneman, Jon, CRNA
  Huber-Manstrom, Charlotte, CRNA
  Klein, Kevin L., CRNA
  Silbernagel, Paul J., CRNA

Jones Physical Therapy, PC
1655 N Grandview Ln #204
(701) 751-2020
- Physical Therapy
  Dinius, Joshua W., PT
  Hager, Caitlyn N., PT
  Hochhalter, Mindy A., PT
  Jones, Elizabeth A., PT
  Mees, Melissa J., PT

Kehrwald, Edward, PhD
721 Memorial Hwy
(701) 224-1897
- Psychology
  Kehrwald, Edward, PHD

Kuchler, Christine, PhD
721 Memorial Highway
(701) 224-1897
- Psychology
  Kuchler, Christine, PHD

Ldw, Inc
1850 Billings Drive
(701) 471-7066
- Nurse Practitioner
  Watkins, Lisa K., PNU

Lifeways Partners In Health
1001 Gateway Ave
(701) 751-3271
- Nurse Practitioner
  Allmaras, Amanda E., CNP
  Jolliffe, Rhonda D., CNP
- Physical Therapy
  Pierce, Jena M., PT
  Wetzel, Denise A., PT

Link Counseling Service, PC
1655 N Grandview Lande
#204
(701) 751-2020
- Licensed Professional Clinical Counselor
  Link, Annette, LPCC

Link Psychological Services, PC
1424 W Century Ave
Suite 207
(701) 223-3571
- Psychology
  Link, James P., PSYD

Mid Dakota Clinic
401 N 9th St
(701) 530-6000
- Audiology
  Jacobus, Karen L., AUD
  Ness, Joe A., MS
- Certified Diabetic Educator
  Wanner, Kay A., CDE
- Certified Registered Nurse Anesthetist
  Ahneman, Jon, CRNA
  Christ, Renee, CRNA
  Ficek, Jenna L., CRNA
  Filler, Laura K., CRNA
  Freitag, Heather, CRNA
  Gabel, Kelli J., CRNA
  Geiger, Kim E., CRNA
  Klein, Kevin L., CRNA
  Kleser, Chris, CRNA
  Knowlen, Kim M., CRNA
  Kuennen, Timothy S., CRNA

Mid Dakota Clinic (cont.)
- Certified Registered Nurse Anesthetist (continued)
  Maddock, Jerome P., CRNA
  Manders, Landa, CRNA
  Martin, Donald C., CRNA
  McArthur, Ryan, CRNA
  Oshea, Carol W., CRNA
  Reems, Brenda, CRNA
  Roloff, Diana J., CRNA
  Sailer, Jill, CRNA
  Schaar, Launi M., CRNA
  Schumacher-Feiler, Paula J., CRNA
  Spears, Lura, CRNA
  Staiger, Joshua J., CRNA
  Teske, Arla R., CRNA
  Town, Jerry R., CRNA
  Turman, Richard T., CRNA
  Walford, Steven M., CRNA
  Walth, Doran D., CRNA
- Licensed Registered Dietitian
  Wanner, Kay A., LRD
- Nurse Practitioner
  Brodeur, Amanda, CNP
  Chaussee, Kevin P., CNP
  Dietz, Traci L., FNP
  Koivula, Mark E., FNP
  Lutzwick, Lindsey A., CNP
  Roloff, Kendra L., CNP
  Schlittenhardt, Melanie A., CNP
  Townsend, Cammy K., FNP
- Physical Therapy
  Bossert, Amber D., PT
  Olson, Nicole A., PT
  Steckler, Jay R., PT
- Physician Assistant
  Anderson, Danielle R., PA
  Earsley, Anne M., PA
  Nolz-Leingang, Jacqueline K., PA
  Schaff, Kristen L., PA
  Vander Linden, Jaclyn A., PA

Mid Dakota Clinic - Gateway
2700 State St
(701) 530-6000
- Nurse Practitioner
  Chaussee, Kevin P., CNP
  Fuerstenberg, Laura M., FNP

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING ANCILLARY PROVIDERS

Mid Dakota Clinic - Gateway (cont.)
- Occupational Therapy
  Schempp, Carmen, OT
  Smith, Megan E., OT
- Physical Therapy
  Lervick, Jessica A., PT
- Physical/Occupational Therapist
  Smith, Megan E., OT

Mid Dakota Clinic - U of Mary Student Health Center
7500 University Dr
(701) 355-8288
- Nurse Practitioner
  Darras, Kyle M., FNP

Mid Dakota Clinic-Center For Women
1000 E Rosser Ave
(701) 530-6000
- Nurse Practitioner
  Loraas, Dawn R., FNP
  Ritter, Rebecca L., FNP
- Physician Assistant
  Earsley, Anne M., PA
  Graf, Stacie L., PA

Miracle Ear
2331 Tyler Pkwy Ste 1
(701) 222-2484
- Home Medical Equipment
  Miracle Ear

Missouri Basin Anesthesia PLLC
401 N 9th Street
(701) 530-5550
- Certified Registered Nurse Anesthetist
  Ahneman, Jon, CRNA
  Christ, Renee, CRNA
  Ficek, Jenna L., CRNA
  Filler, Laura K., CRNA
  Freitag, Heather, CRNA
  Gabel, Kelli J., CRNA
  Geiger, Kim E., CRNA
  Grenz, Melodee J., CRNA
  Heyerman, James, CRNA
  Klein, Kevin L., CRNA
  Kleser, Chris, CRNA
  Knowlen, Kim M., CRNA
  Kuennen, Timothy S., CRNA
  Maddock, Jerome P., CRNA

Missouri Basin Anesthesia PLLC (cont.)
- Certified Registered Nurse Anesthetist (continued)
  Manders, Landa, CRNA
  Martin, Donald C., CRNA
  McArthur, Ryan, CRNA
  Miller, Carl B., CRNA
  Oshea, Carol W., CRNA
  Reems, Brenda, CRNA
  Roller, Brandon J., CRNA
  Roloff, Diana J., CRNA
  Sailer, Jill, CRNA
  Schaar, Launi M., CRNA
  Schumacher-Feiler, Paula J., CRNA
  Silbernagel, Paul J., CRNA
  Spears, Lura, CRNA
  Staiger, Joshua J., CRNA
  Teske, Arla R., CRNA
  Town, Jerry R., CRNA
  Turman, Richard T., CRNA
  Walford, Steven M., CRNA
  Walth, Doran D., CRNA

New Freedom Center
905 E Interstate Ave
(701) 222-4673
- Licensed Addiction Counselor-Chemical Dependency
  Elefson, Richard D., LAC
  Knopik, James A., LAC

Northbrook Drug
1929 N Washington St
Suite C
(701) 258-1412
- Pharmacy
  Northbrook Drug

Northern Lights Physical Therapy Limited Partnership
911 W Interstate Ave
Ste 12 Bldg 3
(701) 223-8717
- Physical Therapy
  Iverson Harstad, Charity A., PT
  Olheiser, Rachel L., PT

Northern Plains Laboratory LLC
401 N 9th St
(701) 222-2480
- Independent Laboratory
  Northern Plains Laboratory LLC

Pathway To Freedom
418 E Rosser Ave Ste A
(701) 426-6308
- Licensed Addiction Counselor-Chemical Dependency
  Olson, Jeff R., LAC

Pediatric Therapy Partners Inc
4501 Coleman St Ste 103
(701) 751-6336
- Occupational Therapy
  Deweese, Kelly E., OT
  Flemmer, Mary Kay, OT
  Glasser, Jodi L., OT
  Krapp, Emily S., OT
  Neznik, Jennifer A., OT
- Physical Therapy
  Dosland, Kiley A., PT
- Speech Therapy
  Feist, Amy A., ST
  Murray, Krista M., ST

Professional Hearing Services
4900 Ottawa Suite 300
(701) 751-6232
- Audiology
  Tongen, John L., AUD

Professional Pharmacy
3124 Colorado Lane #400
(701) 223-6854
- Home Medical Equipment
  Professional Pharmacy

Red Door Pediatric Therapy
1303 E Central Ave
(701) 222-3175
- Occupational Therapy
  Breitbach, Brandi L., OT
  Oswald, Jessica B., OT
  Rossman, Elyse R., OT
  Strand, Casey B., OT
- Speech Therapy
  Arnt, Heather S., ST
  Berg, Dana B., ST

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING ANCILLARY PROVIDERS

Red Door Pediatric Therapy (cont.)

- Speech Therapy (continued)
  Ellenbaum, Kelli K., ST
  Hay, Chelsea C., ST
  Sehn, Stephanie K., ST

Regional Neurological Center
1033 Basin Ave Ste A
(701) 222-1300

- Physical Therapy
  Zastoupil-Hartze, Donna J., PT

Sanford 5th & Broadway Clinic
515 East Broadway Ave
(701) 323-5631

- Certified Diabetic Educator
  Amundson, Donna M., CDE
  Malard, Maysil M., CDE
  Schumacher, Margaret L., CDE
  Timm, Lyla J., CDE
  Walter, Julieanne M., CDE
- Licensed Registered Dietitian
  Anderst, Cynthia J., LRD
  Blees, Kristen M., LRD
  Davis, Amy M., LRD
  Enzminger, Nicole A., LRD
  Fisher, Kelly R., LRD
  Hirst, Mikaela L., LRD
- Nurse Practitioner
  Meier, Dawn M., CNP
  Schwinkendorf, Erin M., CNP
  Small, Renee, CNP
- Physician Assistant
  Bertsche, Shannon A., PA
  Knudson, Wanda L., PA

Sanford Children's North Clinic
765 W Interstate Ave
(701) 323-3700

- Nurse Practitioner
  Caster, Amber J., CNP
- Psychology
  Doerner, Mark, PHD

Sanford Clinic
222 N 7th St
(701) 323-6000

- Audiology
  Boutilier, Amanda D., AUD
  Mann, Krystal L., AUD

Sanford Clinic (cont.)

- Certified Diabetic Educator
  Amundson, Donna M., CDE
  Anderst, Cynthia J., CDE
  Blees, Kristen M., CDE
  Fisher, Kelly R., CDE
  Schumacher, Margaret L., CDE
  Timm, Lyla J., CDE
  Walter, Julieanne M., CDE
- Certified Registered Nurse Anesthetist
  Frigstad, Samantha, CRNA
  Goeddertz, John P., CRNA
- Licensed Registered Dietitian
  Anderst, Cynthia J., LRD
  Blees, Kristen M., LRD
  Clausen, Rachel I., LRD
  Fisher, Kelly R., LRD
  Hirst, Mikaela L., LRD
- Nurse Practitioner
  Ahmann, Jessica L., FNP
  Allan, Nora L., FNP
  Anderson, Tamala M., CNP
  Andes, Rebecca J., FNP
  Auck, Tonya L., CNP
  Balvitsch, Jessica A., CNP
  Bayer, Tosha L., FNP
  Carlson, Denise R., CNP
  Caster, Amber J., CNP
  Clairmont, Lisa, FNP
  Collins, Susan G., FNP
  Cornell, Carissa R., FNP
  Eggers, Mary M., FNP
  Fischer, Bridgit M., FNP
  Glass, Fae M., FNP
  Hermanson, Patricia C., FNP
  Hertz, Kristin L., FNP
  Knaup, Keeta J., CNP
  Lein, Kathryn A., CNP
  Lindberg, Jade A., CNP
  Macdonald, Karen R., CNP
  Murdoff, Lisa A., FNP
  Olson, Janel, FNP
  Scheurer, Elizabeth M., FNP
  Schneider, Chelsey J., FNP
  Stensgard, Kathryn M., CNP
  Weigum, Cindy, FNP
- Physician Assistant
  Amsbaugh, Nicole L., PA
  Bertsche, Shannon A., PA

Sanford Clinic (cont.)

- Physician Assistant (continued)
  Curtis-Haberlock, Tara M., PA
  Hauff, Hannah M., PA
  Held, Debra E., PA
  Knudson, Wanda L., PA
  Nicholson, Jaclyn C., PA
  Preszler, Roger R., PA
  Tescher, Steele B., PA
  Vearrier, Tracy L., PA
  Wiseman, Amber J., PA
- Psychiatric Nurse
  Melberg, Tiffany A., PNU
  Schirado, Kevin G., CNS
- Psychology
  Brown, Marland C., PSYD
  Doppler, Matthew J., PHD

Sanford Health Dakota Childrens Advocacy Center
200 E Main St #301
(701) 323-5626

- Licensed Professional Clinical Counselor
  Condol, Paula J., LPCC
  Hilfer, Shannon L., LPCC

Sanford Health Occupational Medicine Clinic
2603 E Broadway Ave
(701) 323-5222

- Physical Therapy
  Becker, Erica M., PT
  Brousseau, Michael A., PT
  Hahn, Sondra M., PT
  Heaton, Mariah D., PT
  Hunt, Heather L., PT
  Judah, Grant E., PT
  Jurgens-Dinius, Nicholl, PT
  Skluzacek, Amanda R., PT
  Wetzel, Jeff, PT
- Physician Assistant
  Champa, Whitney L., PA
  Fridrich, Elizabeth F., PA
  Malzer, Christine M., PA
  Schillo, Sherry K., PA
  Vearrier, Tracy L., PA
  Worrel, Leslie A., PA

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING ANCILLARY PROVIDERS

Sanford Healthcare Accessories Bismarck
121 E Century Ave
(701) 530-0200

- Home Infusion
  Sanford Healthcare Accessories Bismarck
- Home Medical Equipment
  Sanford Healthcare Accessories Bismarck

Sanford Medical Center
300 N 7th St
(701) 323-6000

- Audiology
  Arneson-Thilmony, Debra J., AUD
  Mann, Krystal L., AUD
  Mattheis Anderson, Amy M., AUD
  Ness, Brady J., AUD
  Schauer, Douglas D., AUD
- Certified Diabetic Educator
  Amundson, Donna M., CDE
  Anderst, Cynthia J., CDE
  Blees, Kristen M., CDE
  Fisher, Kelly R., CDE
  Malard, Maysil M., CDE
  Schumacher, Margaret L., CDE
  Timm, Lyla J., CDE
  Walter, Julieanne M., CDE
- Certified Registered Nurse Anesthetist
  Bohlman, Lorrissa, CRNA
  Frigstad, Samantha, CRNA
  Goeddertz, John P., CRNA
  Hawk, Jamie L., CRNA
  Hoggarth, Jennifer A., CRNA
  Huber-Manstrom, Charlotte, CRNA
  Kienzle, Mike N., CRNA
  Matthews, Christian M., CRNA
  Myers, Michael R., CRNA
  Nelson, Denise, CRNA
  Schwab, Jessica M., CRNA
- Licensed Professional Clinical Counselor
  Condol, Paula J., LPCC
  Hilfer, Shannon L., LPCC
- Licensed Registered Dietitian
  Anderst, Cynthia J., LRD
  Blees, Kristen M., LRD

Sanford Medical Center (cont.)

- Licensed Registered Dietitian (continued)
  Clausen, Rachel I., LRD
  Davis, Amy M., LRD
  Enzminger, Nicole A., LRD
  Fisher, Kelly R., LRD
  Ihmels, Amanda K., LRD
- Nurse Practitioner
  Ahmann, Jessica L., FNP
  Allan, Nora L., FNP
  Auck, Tonya L., CNP
  Balvitsch, Jessica A., CNP
  Bartz, Darleen, CNP
  Bayer, Tosha L., FNP
  Carlson, Denise R., CNP
  Caster, Amber J., CNP
  Ceynar-Moen, Jennifer D., FNP
  Clairmont, Lisa, FNP
  Collins, Susan G., FNP
  Cristy, Donna M., CNP
  Dockter, Debra K., CNP
  Doll, Sara M., FNP
  Ebach, Connie M., CNP
  Eggers, Mary M., FNP
  Fischer, Bridgit M., FNP
  Frank, Sally, FNP
  Glass, Fae M., FNP
  Hermanson, Patricia C., FNP
  Hertz, Kristin L., FNP
  Horner, Melissa M., CNP
  Huston, Laurie J., CNP
  Knaup, Keeta J., CNP
  Lein, Kathryn A., CNP
  Lindberg, Jade A., CNP
  Macdonald, Karen R., CNP
  McPherson, Danielle, FNP
  Meier, Dawn M., CNP
  Murdoff, Lisa A., FNP
  Olson, Janel, FNP
  Rakowski, Jana, FNP
  Rodriguez, Carmen E., FNP
  Rud, Billie, CNP
  Scheurer, Elizabeth M., FNP
  Schmit, Julie, CNP
  Schneider, Chelsey J., FNP
  Schwinkendorf, Erin M., CNP
  Small, Renee, CNP
  Thompson, Ashley L., FNP
  Weigum, Cindy, FNP

Sanford Medical Center (cont.)

- Nurse Practitioner (continued)
  Wetsch, Ashley L., CNP
- Occupational Therapy
  Volk, Aimee L., OT
- Physical Therapy
  Guthmiller, Bryan, PT
- Physician Assistant
  Arndorfer, Brooke, PA
  Bertsche, Shannon A., PA
  Champa, Whitney L., PA
  Ciavarella, Tana J., PA
  Curtis-Haberlock, Tara M., PA
  Fried, Denise E., PA
  Gibson, Allen, PA
  Hauff, Hannah M., PA
  Held, Debra E., PA
  Hennessy, Jill M., PA
  Knudson, Wanda L., PA
  Nicholson, Jaclyn C., PA
  Nottestad, Stephanie J., PA
  Preszler, Roger R., PA
  Tescher, Steele B., PA
- Psychiatric Nurse
  Melberg, Tiffany A., PNU
- Psychology
  Arndorfer, Richard E., PHD
  Brown, Marland C., PSYD
  Doerner, Mark, PHD
  Doppler, Matthew J., PHD
  Ghering, Karli, PHD
  Reno, Claudette M., PHD
  Schaaf Gallagher, Marie A., PHD

Sanford Pharmacy
300 N 7th St
(701) 323-6186

- Home Infusion
  Sanford Pharmacy/Hif

Sanford Seventh and Broadway
715 E Broadway Ave
(701) 323-8922

- Audiology
  Arneson-Thilmony, Debra J., AUD
  Boutilier, Amanda D., AUD
  Grossman, Shelly M., MS
  Mann, Krystal L., AUD
  Mattheis Anderson, Amy M., AUD

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING ANCILLARY PROVIDERS

Sanford Seventh and Broadway (cont.)

- Audiology (continued)
  Ness, Brady J., AUD
  Schauer, Douglas D., AUD
- Nurse Practitioner
  Ceynar-Moen, Jennifer D., FNP
- Physician Assistant
  Arndorfer, Brooke, PA

Sanford Seventh and Rosser Clinic
414 N 7th St
(701) 323-6815

- Nurse Practitioner
  Allan, Nora L., FNP
  Auck, Tonya L., CNP
  Balvitsch, Jessica A., CNP
  Cristy, Donna M., CNP
  Dockter, Debra K., CNP
- Physician Assistant
  Fried, Denise E., PA
  Nottestad, Stephanie J., PA
- Psychiatric Nurse
  Melberg, Tiffany A., PNU
  Schirado, Kevin G., CNS
- Psychology
  Arndorfer, Richard E., PHD
  Doerner, Mark, PHD
  Doppler, Matthew J., PHD
  Ghering, Karli, PHD
  Herrick, Christen, PHD
  Reno, Claudette M., PHD
  Schaaf Gallagher, Marie A., PHD

Sanford Seventh and Thayer
209 7 St N
(701) 323-5590

- Nurse Practitioner
  Frank, Sally, FNP
  Hermanson, Patricia C., FNP
  Horner, Melissa M., CNP
  Leier, Jennifer M., CNP
  McPherson, Danielle, FNP
  Schmit, Julie, CNP
  Weigum, Cindy, FNP
- Physician Assistant
  Tescher, Steele B., PA

North Dakota (cont.)
Bismarck (cont.)

Sanford Seventh and Thayer
225 N 7th St
(701) 323-8920

- Nurse Practitioner
  Ahmann, Jessica L., FNP
  Rodriguez, Carmen E., FNP
  Rud, Billie, CNP
  Schneider, Chelsey J., FNP
- Physical Therapy
  Guthmiller, Bryan, PT
- Physician Assistant
  Ciavarella, Tana J., PA
  Gibson, Allen, PA

Sanford South Clinic
1040 Tocoma Ave
(701) 323-6400

- Nurse Practitioner
  Rakowski, Jana, FNP
  Thompson, Ashley L., FNP
  Wetsch, Ashley L., CNP
- Physician Assistant
  Kristensen, Karlee J., PA

Schlittenhardt, Melanie dba Bladder Care, Inc.
2315 Jackson Ave
(701) 527-4959

- Nurse Practitioner
  Schlittenhardt, Melanie A., FNP

Smith, Jeff, MD PC
1033 Basin Ave
(701) 223-6613

- Nurse Practitioner
  Middleton, Debra L., FNP

Soul Survivor Counseling Services, PC
1120 College Dr Ste 201
(701) 258-2008

- Licensed Professional Clinical Counselor
  Martin, Andrea J., LPCC

Spine Orthopedic and Pain Center PC
121 W Century Ave
(701) 530-8500

- Physical Therapy
  Folk, Heidi M., PT
  Neameyer, Tony E., PT

North Dakota (cont.)
Bismarck (cont.)

St Alexius Heart & Lung Clinic LLC
310 N 10th St
(701) 530-7500

- Nurse Practitioner
  Bock, Tana L., FNP
  Braun, Kristin, CNP
  Fettig, Megan C., FNP
  Folk, Cynthia A., FNP
  Fueller, Debra L., FNP
  Gisvold, Christina R., FNP
  Koivula, Mark E., FNP
  Meyhoff, Camille M., FNP
  Pengilly, Danette, CNP
  Rudnick, Andrea J., FNP
  Stone, Jennifer N., FNP
  Torske, Brian J., FNP
  Vanklootwyk, Michelle, CNP
  Wagner, Sheila R., CNP
  Wiedrich, Sara L., CNP
- Physician Assistant
  Brackin, Ilene A., PA
  Braun, Mandi L., PA
  Kessler, Kenneth S., PA
  Renner, Cindy M., PA
  Sveen, Jane E., PA

St Alexius Medical Center
900 E Broadway Ave
(701) 530-7000

- Certified Registered Nurse Anesthetist
  Filler, Laura K., CRNA
  Freitag, Heather, CRNA
  Kuennen, Timothy S., CRNA
  McArthur, Ryan, CRNA
  Schaar, Launi M., CRNA
  Walford, Steven M., CRNA

St Alexius Medical Center
900 E Broadway Ave
(701) 530-6500

- Emergency Medicine
  Pierre-Louis, Nika M., PA
- Licensed Addiction Counselor-Chemical Dependency
  Motis, Charles R., LAC
  Werre, Richard, LAC
- Licensed Professional Clinical Counselor
  Millner, Paul D., LPCC
  Motis, Charles R., LPCC

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING ANCILLARY PROVIDERS

St Alexius Medical Center (cont.)

- Licensed Professional Clinical Counselor (continued)
  Olson, Thomas A., LPCC
- Nurse Practitioner
  Allmaras, Amanda E., CNP
  Bitz, Cheryle K., CNP
  Braun, Kristin, CNP
  Bryan, Jennifer L., FNP
  Eckroth, Janel M., FNP
  Engelhart, Jolene, FNP
  Erickstad, Faith, CNP
  Folk, Cynthia A., FNP
  Guthmiller, Tanya R., CNP
  Herman, Jenna M., CNP
  Hofferber, Rick W., CNP
  Jacobson-Bauer, Heather A., FNP
  Kaiser, Trina R., CNP
  Koivula, Mark E., FNP
  Landsiedel, Julie, FNP
  Lardy, Susan A., FNP
  Leier, Heather M., FNP
  Maier, Michelle D., CNP
  Malucky, Andrea A., CNP
  Toman, Jean A., CNP
  Welder, Sheila, FNP
  Wolf, Gloria, FNP
- Physician Assistant
  Anderson, Danielle R., PA
  Klabunde, Lori A., PA
  Kunrath, Scott H., PA
  Lelito, Nicholas, PA
  Schaffner, Preston A., PA
- Psychology
  Berentson, Lea J., PHD
  Brooks, David A., PHD
  Degree, Craig E., PHD
  Horner, Sara M., PSYD
  Lang, Marny, PSYD

St Alexius Medical Center/Emergency Physician Services
900 E Broadway Ave
(701) 530-7000

- Nurse Practitioner
  Landsiedel, Julie, FNP
  Lardy, Susan A., FNP
  Madler, Billie J., FNP
  Malucky, Andrea A., CNP

St Alexius Medical Center/Emergency Physician Services (cont.)

- Nurse Practitioner (continued)
  Pfenning, Stacey R., CNP
  Wolf, Gloria, FNP
- Occupational Therapy
  Fettig, Renae A., OT
- Physician Assistant
  Reiman, Jennifer M., PA
  Thomas, Kari A., PA

St Alexius Medical Center/Human Performance Center
310 N 9th St
(701) 530-8100

- Occupational Therapy
  Ottmar, Lynly J., OT
  Stewart, Kimberly A., OT
- Physical Therapy
  Beachey, Ruth B., PT
  Brossart, Allan J., PT
  Dekrey, Jeanne M., PT
  Herr, Tana J., PT
  Jahnke, Joel B., PT
  Keller, Sarah C., PT
  Kleinjan, Connie J., PT
  Schuler, Erica H., PT

St Gabriel's Community
4580 Coleman St
(701) 751-4224

- Occupational Therapy
  Fiechtner, Nicole M., OT

St Sophies, LLC
3000 N 14th St #2a
(701) 252-2001

- Licensed Professional Clinical Counselor
  Hjelle, Catherine A., LPCC
- Nurse Practitioner
  Hollevoet, Jacqualine J., FNP
- Psychology
  Schumacher, Kevin, PHD

The Bone & Joint Center, PC
310 N 9th St
(701) 530-8650

- Nurse Practitioner
  Hollenbeck, Kellee, FNP
  Kittleson, Shannon L., CNP

The Bone & Joint Center, PC (cont.)

- Nurse Practitioner (continued)
  Melander, Jeremy, FNP
  Staloch, Coleen, CNP
  Stork, Bradley R., CNP
- Occupational Therapy
  Clarke, Renee, OT
  Gerrity, Joshua D., OT
  Sullivan, Terri A., OT
- Physical Therapy
  Axtman, Kevin C., PT
  Dschaak, Brent O., PT
  Westin, Lesley L., PT
- Physical/Occupational Therapist
  Gerrity, Joshua D., OT
  Sullivan, Terri A., OT
- Physician Assistant
  Hilzendeger, Jeff, PA
  Laumb, Kellie J., PA
  Mittleider, Erica F., PA
  Moore, Jodi L., PA
  Schillo, Jamelle, PA
  Staloch, Coleen, PA
  Szymanski, Kila J., PA
  Zachmeier-Babb, Amanda L., PA

The Enrichment Garden
1911 North 11th Street
(701) 258-1569

- Occupational Therapy
  Hansen, Alicia D., OT
  Hillestad, Brianna K., OT
  Johnson, Ashley M., OT
  Krapp, Emily S., OT
  Leblanc, Matthew G., OT
- Physical Therapy
  Zastoupil-Hartze, Donna J., PT
- Speech Therapy
  Bry, Anne C., ST
  Fawcett, Donna B., ST
  Johnson, Brooke D., ST
  Martire, Sandra, ST
  Towle, Jessica M., ST

The Kids Therapy Center
600 S 2nd St Ste 201
(701) 751-0384

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING ANCILLARY PROVIDERS

North Dakota (cont.)
Bismarck (cont.)

The Kids Therapy Center (cont.)
- Licensed Professional Clinical Counselor
  Meyers, Valerie, LPCC

The Medicine Shoppe
1304 East Boulevard Ave
(701) 224-0175
- Pharmacy
  The Medicine Shoppe

The Village Family Service Center
107 West Main Suite 350
(701) 451-4900
- Licensed Professional Clinical Counselor
  Thompson, Anna, LPCC

True North Solutions
418 N 2nd Street
(701) 224-8783
- Psychiatric Nurse
  Engel, Bonnie, PNU

Valley View Pharmacy
2425 Hillview Ave
(701) 223-5750
- Home Infusion
  Valley View Pharmacy

Valley Weight Loss Clinic
1500 Interchange Ave
Ste 210
(701) 365-8446
- Licensed Registered Dietitian
  Deics, Cathy A., LRD
- Physician Assistant
  Hanson, Susan J., PA

West Central Human Service Center
1237 W Divide Ave Ste 5
(701) 328-8888
- Licensed Addiction Counselor-Chemical Dependency
  Combs, Miranda, LAC
  Goldade, Jennifer L., LAC
  Hultin, Dawn L., LAC
  Ibach, Heather R., LAC
  Janzer, Mandi L., LAC
  Johnson, Carmen C., LAC
  Karlin, Corinne J., LAC

North Dakota (cont.)
Bismarck (cont.)

West Central Human Service Center (cont.)
- Licensed Addiction Counselor-Chemical Dependency (continued)
  Kitzan, Justun J., LAC
  Mickelson, David H., LAC
  Mock, Sue A., LAC
  Mohl, Brenda E., LAC
  Rennich, Jennifer L., LAC
  Ridl, Jeffrey G., LAC
  Ronsberg, Elise A., LAC
  Sather, Katherine, LAC
  Schatz, Kiki J., LAC
  Selk, Jennifer H., LAC
  Thompson, Sandy K., LAC
- Licensed Professional Clinical Counselor
  Hellman, Lory, LPCC
  McConnachie, Rebecca, LPCC
- Psychiatric Nurse
  Schirado, Kevin G., CNS
- Psychology
  Aasen, Paulette, PHD
  Hay, Lisa D., PHD
  Kehrwald, Edward, PHD
  Larson, Roger A., PHD

White Drug #5
117 N 5th St
(701) 223-0936
- Home Medical Equipment
  White Drug #5

Bottineau

Bottineau Clinic Pharmacy Inc
314 Ohmer St
(701) 228-2220
- Pharmacy
  Bottineau Cl Pharm Inc

Bottineau Good Samaritan Center
725 E 10th St
(701) 228-3796
- Physical Therapy
  Pritchard, Keith A., PT

North Dakota (cont.)
Bottineau (cont.)

Corey J Gorder
104 11th St W
(701) 201-0076
- Licensed Professional Clinical Counselor
  Gorder, Corey J., LPCC

Rural Mental Health Consortium
316 Ohmer St
(701) 228-9300
- Nurse Practitioner
  Weathers, Vickie K., CNP
- Psychiatric Nurse
  Sartain, Cheryl A., PNU

St Andrews Bottineau Clinic, LLC
314 Ohmer St
(701) 228-9400
- Nurse Practitioner
  Koch, Brenda L., CNP
  Larson, Tracy L., FNP
  Stabo, Susan L., FNP

St Andrews Health Center
316 Ohmer St
(701) 228-9400
- Certified Registered Nurse Anesthetist
  Berentson, Kari, CRNA
  Cederstrom, Luann, CRNA
  Rist, Kari L., CRNA
  Simon, Jeffrey J., CRNA
  Stock, Terry L., CRNA
  Vibeto, Mark C., CRNA
  Zahn, Denise M., CRNA
- Nurse Practitioner
  Costner, David S., CNP
  Koch, Brenda L., CNP
  Larson, Tracy L., FNP
  Stabo, Susan L., FNP

St Andrews Hospital/MAMC
314 Ohmer St
(701) 228-9400
- Certified Registered Nurse Anesthetist
  Brandt, Kraig W., CRNA
- Nurse Practitioner
  Stabo, Susan L., FNP

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING ANCILLARY PROVIDERS

North Dakota (cont.)

Bowbells

Northland Community Health Center
18 Main St SW
(701) 377-4758

- Nurse Practitioner
  Green, Alain M., FNP
- Physician Assistant
  Bartow, Shelley M., PA
  Malzer, Christine M., PA

Bowman

Southwest Healthcare Services
802 2nd St NW
(701) 523-3214

- Licensed Registered Dietitian
  Narum, Barbi J., LRD

Southwest Healthcare Services DME
14 6th Ave SW
(701) 523-3226

- Home Medical Equipment
  Southwest Healthcare Services

Southwest Medical Clinic
12 6th Ave SW
(701) 523-3226

- Certified Registered Nurse Anesthetist
  Hildebrandt-Folske, Carla J., CRNA
- Nurse Practitioner
  Peterson, Christine R., FNP
- Physician Assistant
  Gilbert, Patricia, PA

The Bowman Drug Co
12 N Main
(701) 523-3232

- Pharmacy
  Bowman Drug Co

West River Health Service
608 Highway 12 W
(701) 523-3271

- Licensed Professional Clinical Counselor
  Jorgenson, Tara L., LPCC
- Licensed Registered Dietitian
  Narum, Barbi J., LRD
- Nurse Practitioner
  Hill, Lori A., CNP

North Dakota (cont.)

Bowman (cont.)

West River Health Service (cont.)

- Nurse Practitioner (continued)
  Oase, Megan M., FNP
  Reiten, Elizabeth, FNP
- Physician Assistant
  Bergquist, Rose B., PA
  Bondell, Sheila, PA
  Cooper, Brian K., PA
  Mattis, Billie J., PA

Cando

Towner County Medical Center
Hwy 281 N
(701) 968-4411

- Certified Registered Nurse Anesthetist
  Andruski, Heidi L., CRNA
  Berentson, Kari, CRNA
  Brandt, Kraig W., CRNA
  Brown, Terri R., CRNA
  Kelly, Karen J., CRNA
  Keniston, Dierdre V., CRNA
  Myers, Michael R., CRNA
  Stock, Terry L., CRNA
  Trontvet, Kent A., CRNA
  Underdahl, Nicole A., CRNA
  Vibeto, Mark C., CRNA

Towner County Medical Center
Hwy 281 N
(701) 968-2541

- Nurse Practitioner
  Almen, Joann S., FNP
  Cox, Amy S., CNP
  Held, Samuel, FNP
- Physical Therapy
  Pederson, Jennifer A., PT
- Physician Assistant
  Jorde, Jeana A., PA

Carrington

Carrington Drug
415 Main St
(701) 652-2521

- Home Medical Equipment
  Carrington Drug Co

North Dakota (cont.)

Carrington (cont.)

Carrington Health Center
800 4th St N
(701) 652-3141

- Certified Diabetic Educator
  Carrington Health Center
- Certified Registered Nurse Anesthetist
  Krueger, Curtis C., CRNA
  Myers, Michael R., CRNA
  Shefland, Raymond C., CRNA
  Siemers, Trent E., CRNA
  Trontvet, Kent A., CRNA
- Licensed Registered Dietitian
  Fredrickson, Brooke, LRD
  Getz, Janel A., LRD
- Physician Assistant
  Hoff, Bradley D., PA
  Hoff, Mary L., PA
  Nelson, Jacqueline D., PA
- Speech Therapy
  Stockert, Misty J., ST

Central Dakota Physical Therapy PC
800 N 4th St
(701) 652-7179

- Physical Therapy
  Irmen, Kadee A., PT
  Pate, Julie L., PT
  Smith, Kyle E., PT

Foster County Medical Center
820 5th St N
(701) 652-2515

- Physician Assistant
  Hoff, Bradley D., PA
  Hoff, Mary L., PA
  Nelson, Jacqueline D., PA

Fuher, Jessie, LPCC
800 N 4th St
(701) 252-9838

- Licensed Professional Clinical Counselor
  Fuher, Jessie K., LPCC

Sanford Bismarck At Carrington Foster Co Clinic
820 5th St N
(701) 323-6000

- Audiology

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING ANCILLARY PROVIDERS

North Dakota (cont.)
Carrington (cont.)

Sanford Bismarck At Carrington Foster Co Clinic (cont.)
- Audiology (continued)
  Arneson-Thilmony, Debra J., AUD
  Boutilier, Amanda D., AUD
  Mann, Krystal L., AUD
  Mattheis Anderson, Amy M., AUD
  Ness, Brady J., AUD

Casselton

Casselton Drug Inc
622 Front St
(701) 347-4281
- Home Medical Equipment
  Casselton Drug Inc

Essentia Health Casselton Clinic
5 9th Ave N
(701) 347-4445
- Speech Therapy
  Rongstad, Sarah L., ST

Cavalier

Altru Cavalier
201 E 3rd Ave S
(701) 265-8338
- Certified Diabetic Educator
  Metelmann, Stacie L., CDE
- Nurse Practitioner
  Dorman, Seth T., FNP
  Laframboise, Jennifer L., FNP
  Rustvang, Daniel R., CNP
  Sperle, Roni L., FNP
  Suda, Amy L., FNP
  Tinkler, Jennifer A., FNP
  Vivatson, Debra K., CNP
- Physician Assistant
  Kosmatka, Erika J., PA
  Linnen, Katherine M., PA
  Pegg, Judy A., PA
  Wright, Shellie D., PA

Pembina County Hospital/Clinic
301 Mountain St E
(701) 265-8461
- Certified Diabetic Educator
  Myers, Jane M., CDE

North Dakota (cont.)
Cavalier (cont.)

Pembina County Hospital/Clinic (cont.)
- Certified Registered Nurse Anesthetist
  Myers, Michael R., CRNA
  Trontvet, Kent A., CRNA
- Licensed Registered Dietitian
  Myers, Jane M., LRD
- Nurse Practitioner
  Lee, Renee, CNP

White Drug #53
201 E 3rd Ave S
(763) 513-4301
- Pharmacy
  White Drug #53

Center

Coal Country Community Health Center
111 E Main St
(701) 794-8798
- Licensed Registered Dietitian
  Langeliers, Jean D., LRD
- Nurse Practitioner
  Olson, Sharon J., CNP
  Rogness, Corrie L., CNP
  Sailer, Debra L., CNP
- Physician Assistant
  Mollman, Burton J., PA

Cooperstown

Cooperstown Medical Center
1200 Roberts Ave NE
(701) 797-2221
- Certified Diabetic Educator
  Getz, Janel A., CDE
- Home Medical Equipment
  Cooperstown Medical Center DME
- Licensed Registered Dietitian
  Fredrickson, Brooke, LRD
  Getz, Janel A., LRD
- Nurse Practitioner
  Bitz, Trent W., FNP
  Middleton, Debra L., FNP

North Dakota (cont.)
Cooperstown (cont.)

Paczkowski Inc dba Almklov's Pharmacy
848 Burrel Ave
(701) 797-2414
- Home Medical Equipment
  Paczkowski Inc

Crosby

Crosby Clinic
702 1st St SW
(701) 965-6349
- Nurse Practitioner
  Barlow, Steven L., FNP
  Lindsey, Jacquelyn, FNP
  Warren, Ginger P., FNP

Rural Mental Health Consortium
705 4th St SE
(701) 857-2199
- Nurse Practitioner
  Weathers, Vickie K., CNP
- Psychiatric Nurse
  Sartain, Cheryl A., PNU

Devils Lake

Altru Clinic Lake Region
1001 7th St
(701) 662-2157
- Certified Diabetic Educator
  Warner-Noreen, Danika A., CDE
- Licensed Registered Dietitian
  Holum, Lynn M., LRD
  Warner-Noreen, Danika A., LRD
- Nurse Practitioner
  Dorman, Seth T., FNP
  Ferry, Rhea J., CNP
  Gerhardt, Annie M., CNP
  Krogstad, Mary Beth, CNP
  Laframboise, Jennifer L., FNP
  Leiphon, Kelly L., FNP
  Rustvang, Daniel R., CNP
  Schall, Tobey D., FNP
  Sperle, Roni L., FNP
  Suda, Amy L., FNP
  Tinkler, Jennifer A., FNP
  Zwilling, Jana G., FNP
- Physician Assistant
  Kosmatka, Erika J., PA
  Wright, Shellie D., PA

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING ANCILLARY PROVIDERS

North Dakota (cont.)
Devils Lake (cont.)

Altru Specialty Services, Inc dba Yorhom Medical Essentials
223 4th Ave NE Ste B
(701) 544-2100

- Home Medical Equipment
  Altru Specialty Services Devils Lake

Beltone Hearing Aid Center
219 4th Ave NE
(701) 662-7347

- Home Medical Equipment
  Beltone Hearing Aid Center

Blooming Prairie Assessment & Therapy Center, PC
211 4th St NE Ste 4
(701) 662-8255

- Psychology
  Kenney, Sara K., PSYD
  Normandin, Sherman, PHD

Clinic Pharmacy/Devils Lake
1001 7th St
(701) 662-4427

- Pharmacy
  Clinic Pharmacy/Devils Lake

Devils Lake Community Clinic
425 S College Dr Ste 14
(701) 968-2541

- Nurse Practitioner
  Almen, Joann S., FNP
  Cox, Amy S., CNP
- Physician Assistant
  Jorde, Jeana A., PA

Hearing Aid & Optical Company
425 S College Drive
Ste 16
(701) 662-2765

- Home Medical Equipment
  Hearing Aid & Optical Company

Lake Region Family Planning
524 4th Ave NE Unit 9
(701) 662-7046

- Nurse Practitioner
  Hefta, Cheryl A., CNP

North Dakota (cont.)
Devils Lake (cont.)

Lake Region Human Service Center
200 Highway 2 SW
(701) 665-2200

- Licensed Addiction Counselor-Chemical Dependency
  Fisher, Troy A., LAC
  Hellerud, Elizabeth J., LAC
  Juntunen, Kevin R., LAC
  McCrea, Adalia M., LAC
  McEwen, Billy, LAC
  Reichenberg, Kathleen E., LAC
  Schmidt-Boknecht, Ava V., LAC
- Physician Assistant
  Lindgren, Sheila M., PA
- Psychology
  Bradley, Patricia J., PSYD
  Kuna, David P., PHD
  Newberry, Donald E., PHD

Mary Lundy Progressive Physical Therapy of Devils Lake
204 N College Dr
(701) 662-5874

- Physical Therapy
  Lundy, Mary E., PT

Ramsey Drug Co
401 College Dr S
(701) 662-3117

- Home Medical Equipment
  Ramsey Drug Co000

The Mercy Hospital of Devils Lake
1031 7th St NE
(701) 662-2131

- Certified Registered Nurse Anesthetist
  Overend, Timothy, CRNA
  Reiner, Timothy W., CRNA
- Licensed Registered Dietitian
  Lee, Lenae A., LRD
- Nurse Practitioner
  Middleton, Debra L., FNP
  Nardacci, Tara M., FNP
  Thorson, Kim A., FNP
- Physical Therapy
  Brekhus, Jennifer L., PT
  Pederson, Steven L., PT
  Thompson, Scott J., PT

North Dakota (cont.)
Devils Lake (cont.)

The Mercy Hospital of Devils Lake (cont.)

- Physician Assistant
  Altamirano, Alfredo, PA
  Chapel, Dean A., PA
  Hager, Dustin T., PA
  Johnson, Brian W., PA
  Kerr, Brenna L., PA
  Konzak, Stacey L., PA
  Moberg, Jeffrey A., PA
  Moore, Jodi L., PA
  Rasmusson, Mark A., PA
  Schmitt, David M., PA
  Strand, Ginger M., PA
  Vearrier, Tracy L., PA

Volk Human Services, PC
501 3rd St NE Ste 1
(701) 662-1911

- Psychology
  Volk, Gregory S., PSYD

White Drug #63
425 College Dr S #10
(763) 513-4301

- Home Medical Equipment
  White Drug #63

Dickinson

Badlands ENT Clinic
227 16th St W
(701) 456-4700

- Audiology
  Ness, David A., AUD

Badlands Human Service Center
300 13 Ave W Ste 1
(701) 227-7500

- Licensed Addiction Counselor-Chemical Dependency
  Combs, Miranda, LAC
  Karlin, Corinne J., LAC
  Ronsberg, Elise A., LAC
  Schatz, Kiki J., LAC
  Thompson, Sandy K., LAC
  Waller, Linda K., LAC
- Licensed Professional Clinical Counselor
  Lefor, Katie L., LPCC
  Mack, Kimberly M., LPCC

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING ANCILLARY PROVIDERS

Badlands Human Service Center (cont.)
- Psychology
  Aasen, Paulette, PHD
  Boomgaarden, Renee L., PHD
  Demolen, Richard N., PSYD
  Gabbert, Nancy A., PHD
  Hertler, Chris A., PHD
  Wu, Zongjian, PSYD

Clinic Pharmacy Dickinson
2615 Fariway St
(701) 483-4401
- Pharmacy
  Clinic Pharmacy Dickinso

Community Action Partnership
202 E Villard St
(701) 227-0131
- Physician Assistant
  Nielsen, Teresa H., PA

Connect Hearing Inc
925 West Villard
(701) 227-4403
- Home Medical Equipment
  Connect Hearing Inc

Dickinson Family Counseling Center, PLLC
11 2nd Ave E Ste B
(701) 483-9720
- Licensed Professional Clinical Counselor
  Anderson, Lacey R., LPCC
- Psychology
  Baer, Robert, PSYD

Great Plains Clinic, PC
33 9th St W
(701) 483-6017
- Certified Diabetic Educator
  Rathgeber, Heather D., CDE
- Certified Registered Nurse Anesthetist
  Hildebrandt-Folske, Carla J., CRNA
  Tooz, Laura J., CRNA
- Nurse Practitioner
  Floberg, Lea M., CNP
  Gold, Maryann, FNP

Great Plains Clinic, PC (cont.)
- Physician Assistant
  Nies, Troy S., PA
  Pirkl, Erin M., PA
  Samples, Amy L., PA

Greene Drug
16 W Villard
(701) 225-5171
- Home Medical Equipment
  M & S Inc dba Greene Drug

Heart River Alcohol Drug Inc.
7 1st Ave W Ste 101
(701) 483-0795
- Licensed Addiction Counselor-Chemical Dependency
  Waller, Linda K., LAC
  Wieglenda, John H., LAC
  Wieglenda, Marsha, LAC

Heart River Hearing Aid Practice
1051 3rd Ave W
(701) 227-0728
- Audiology
  Callahan, Kim B., AUD

Medquest/St Josephs Hospital
584 12th St W
(701) 456-4364
- Home Medical Equipment
  Medquest/ST Josephs Hospital

Medquest/St Josephs Hospital
584 12th St W
(701) 456-4364
- Home Infusion
  Medquest/ST Josephs Hospital

Miracle Ear
1173 3rd Ave W Ste 14
(701) 483-3588
- Home Medical Equipment
  Miracle Ear

ND Pharmacy Inc
446 18th St W Ste 2
(701) 225-4434
- Pharmacy
  ND Pharmacy Inc

Neurosurgical & Spinal Surgery Associates, PC
683 State Ave N
(605) 341-2424
- Physician Assistant
  Davis Faith, Kara L., PA
  Richards, James W., PA
  Richards, Juanita M., PA

Ollerman Inc dba Medicine Shoppe
1571 W Villard #1
(701) 227-8265
- Home Medical Equipment
  Ollerman Inc dba Medicine Shoppe

Omaha Therapy Inc. dba Rehabvisions
683 State Ave Ste B
(701) 483-9400
- Occupational Therapy
  Huffman, Katie, OT
  McPeters, Rayel, OT
  Meier, Miranda J., OT
- Physical Therapy
  Ash, Cory, PT
  Gerving, Sara, PT
  Metz, Daniel G., PT
  Olson, Savannah, PT
  Schlosser, Katie, PT
  Zastoupil-Hartze, Donna J., PT
- Speech Therapy
  Abel, Amber, ST
  Casciato, Valerie M., ST
  Doerr, Shayna R., ST
  Fuchs, Haley, ST
  Herauf, Jean L., ST
  Meyer, Cassandra, ST
  Pensak, Melanie, ST
  Schatz, Candace, ST
  Wiggins, Angelica, ST

Sacajawea Substance Abuse Counseling and Drug Testing Center
112 3 St W Ste 301
(701) 483-9150
- Licensed Addiction Counselor-Chemical Dependency
  Kuhn, Janet L., LAC
  Wanner, Victor, LAC

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING ANCILLARY PROVIDERS

Sanford Health Dickinson Clinic
2615 Fairway St
(701) 456-6000

- Certified Registered Nurse Anesthetist
  Myers, Michael R., CRNA
- Nurse Practitioner
  Anderson, Tamala M., CNP
  Olson, Janel, FNP
- Physician Assistant
  Champa, Whitney L., PA
  Laumb, Kellie J., PA
- Psychology
  Doerner, Mark, PHD

Sanford Health Dickinson Hearing Center
1531 W Villard St Ste B
(701) 225-7188

- Audiology
  Arneson-Thilmony, Debra J., AUD
  Boutilier, Amanda D., AUD
  Mann, Krystal L., AUD
  Mattheis Anderson, Amy M., AUD
  Ness, Brady J., AUD
  Schauer, Douglas D., AUD

Sanford Health Family Connection Safe Visitation Center
128 1st St W #2
(701) 483-7233

- Licensed Professional Clinical Counselor
  Condol, Paula J., LPCC
  Hilfer, Shannon L., LPCC

Sanford Health Occupational Medicine Clinic
1531 W Villard St Ste A
(701) 225-7575

- Physical Therapy
  Becker, Erica M., PT
  Brousseau, Michael A., PT
  Hahn, Sondra M., PT
  Heaton, Mariah D., PT
  Hunt, Heather L., PT
  Judah, Grant E., PT
  Jurgens-Dinius, Nicholl, PT
  Skluzacek, Amanda R., PT
  Wetzel, Jeff, PT

Sanford Health Occupational Medicine Clinic (cont.)

- Physician Assistant
  Champa, Whitney L., PA
  Fridrich, Elizabeth F., PA
  Malzer, Christine M., PA
  Schillo, Sherry K., PA
  Vearrier, Tracy L., PA
  Worrel, Leslie A., PA

St Josephs Hospice and Home Care
986 2nd Ave W
(701) 456-4378

- Speech Therapy
  Stockert, Misty J., ST

St Josephs Hospital & Health Center
30 7th St W
(701) 456-4000

- Audiology
  Ness, David A., AUD
- Certified Diabetic Educator
  Olheiser, Sharon M., CDE
- Certified Registered Nurse Anesthetist
  Bakke, Amy J., CRNA
  Grosulak, Tammy J., CRNA
  Jorda, Arlys M., CRNA
  Lefor, Glenn R., CRNA
  Milner, Misty, CRNA
  Rau, Sasha, CRNA
  Stengel, Susan K., CRNA
- Licensed Registered Dietitian
  Bruels, Suzanne, LRD
  Quammen, Alexis H., LRD
  Stafford, Darcy A., LRD
- Nurse Practitioner
  Hardy, Michelle M., CNP
  Jepson, Lori A., CNP
  Kiecker, Rebecca A., CNP
  Swanson, Karen I., FNP
  Volk, Robert, FNP
- Occupational Therapy
  Belland, Adrienne N., OT
  Metz, Nancy L., OT
- Physical/Occupational Therapist
  Belland, Adrienne N., OT
- Physician Assistant
  Brophy, Shad W., PA

St Josephs Hospital & Health Center (cont.)

- Physician Assistant (continued)
  Holland, Randy R., PA
  Lelito, Nicholas, PA
  Preszler, Roger R., PA
  Reiman, Jennifer M., PA
  Vearrier, Tracy L., PA

St Josephs Walk In Clinic
227 16th St W
(701) 227-7900

- Nurse Practitioner
  Medford, Jessica L., FNP
- Physical Therapy
  Weber, Shane M., PT
- Physician Assistant
  Champa, Whitney L., PA
  Holland, Randy R., PA
  Lamping, Tiffany R., PA

St Josephs Womens Clinic
30 W 7th St
(701) 456-4200

- Nurse Practitioner
  Wicks, Mary Jo, CNP
- Physician Assistant
  Schillinger, Amie M., PA

Therapy Solutions
448 21 St W Ste D-1
(701) 483-1000

- Occupational Therapy
  Belland, Adrienne N., OT
  Crespo, Erica K., OT
  Erie, Jared D., OT
  Halverson, Eric, OT
- Physical Therapy
  Binstock, Jessie, PT
  Henke, Thomas D., PT
  Laumb, Brian T., PT
  Tsibur-Mayer, Alexandra (Sasha) S., PT
  Wock, Roberta J., PT
  Zastoupil-Hartze, Donna J., PT
- Physical/Occupational Therapist
  Erie, Jared D., OT

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING ANCILLARY PROVIDERS

North Dakota (cont.)

Dickinson (cont.)

Westwind Consulting Center
135 W Villard St
(701) 225-1050

- Psychology
  Fehr, Alan J., PHD
  Hall, Shelly, PSYD

Drayton

Altru Drayton
1003 N Main St
(701) 454-3311

- Licensed Registered Dietitian
  Larson, Tara K., LRD
- Nurse Practitioner
  Anderson, Marie K., CNP

Dunseith

Cornerstone Addiction
101 Peace Garden Ave
(701) 244-2299

- Licensed Addiction Counselor-Chemical Dependency
  Berdahl, Linda A., LAC

Heart of America Johnson Clinic Dunseith
215 Main St SE
(701) 244-5694

- Nurse Practitioner
  Costner, David S., CNP
  Harder, Tammie J., CNP
  Mickelson, Barbara J., CNP
  Pagel-Trana- Duttenhef, Bobbie M., CNP
  Stahl, Andrea L., FNP
  Townsend, Cammy K., FNP
- Physician Assistant
  Danielson, Gail L., PA
  Hager, Dustin T., PA
  Harder, Tammie J., PA

Turtle Mountain Family Medicine LLC
115 Main St NE
(701) 244-5800

- Nurse Practitioner
  Gottbreht, Rosann, CNP

North Dakota (cont.)

Edgeley

Sanford Health Edgeley Clinic
506 2nd St
(701) 493-2245

- Nurse Practitioner
  Falk, Kara A., FNP
  Levee, Linda C., CNP
- Physician Assistant
  Hack, Vicki L., PA

Elgin

Hands On Health, Inc
302 N Main St
(605) 374-5844

- Physical Therapy
  Keller, Niomi M., PT

Jacobson Memorial Elgin Community Clinic
603 East St N
(701) 584-7231

- Nurse Practitioner
  Rivinius, Carey E., CNP
- Physician Assistant
  Dent, Tyesha, PA
  Duppong, Linda E., PA

Jacobson Memorial Hospital Care Center
601 East St N
(701) 584-3338

- Nurse Practitioner
  Rivinius, Carey E., CNP
- Physician Assistant
  Dent, Tyesha, PA
  Duppong, Linda E., PA

Ellendale

Avera Clinic of Ellendale
240 Main St
(701) 349-3666

- Physician Assistant
  Ermer, Brian, PA
  Martin, Valerie B., PA
  Snyder, Michelle K., PA

Life Seasons Counseling, PLLC
240 Main St
(701) 678-4800

- Licensed Professional Clinical Counselor
  Elhard, Deborah J., LPCC

North Dakota (cont.)

Ellendale (cont.)

Life Seasons Counseling, PLLC
240 Main St
(701) 678-4800

- Licensed Professional Clinical Counselor
  Elhard, Deborah J., LPCC

Sanford Health Ellendale Clinic
141 Main St
(701) 349-3331

- Licensed Registered Dietitian
  Erlandson, Barbara H., LRD
- Nurse Practitioner
  Gabriel, James, FNP
  Kaiser, Karen A., CNP
  Long, Lillian, FNP
- Physician Assistant
  Hack, Vicki L., PA
  Hendricks, Larry A., PA

Enderlin

Maryhill Manor
110 Hillcrest Dr
(701) 437-3544

- Occupational Therapy
  Aberle, Carmen, OT
  Shearer, Treena, OT
- Physical Therapy
  Long, Charles A., PT
- Physical/Occupational Therapist
  Aberle, Carmen, OT
  Shearer, Treena, OT

Mobility Plus Rehabilitation
110 Hillcrest Dr
(701) 437-3782

- Occupational Therapy
  Aberle, Carmen, OT
- Physical Therapy
  Long, Charles A., PT
  Lorenz, Ryan R., PT
  Shanenko, Paul, PT
  White, Brittany L., PT
- Physical/Occupational Therapist
  Aberle, Carmen, OT

Sanford Health Enderlin Clinic
201 4th Ave Ste 1
(701) 437-3320

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING ANCILLARY PROVIDERS

North Dakota (cont.)
Enderlin (cont.)

Sanford Health Enderlin Clinic (cont.)
- Nurse Practitioner
  Pfennig, Gregory, FNP
- Physician Assistant
  Buchholz, Brent M., PA
  Lueck, Michelle A., PA
  Stoltz, Joan L., PA

Fargo

7 Day Clinic
1517 32nd Ave S
(701) 232-6211
- Licensed Registered Dietitian
  White, Natalie J., LRD
- Nurse Practitioner
  Allard, Amy M., FNP
  Dolalie-Kelsch, Angela A., CNP
  Ek, Marilyn S., FNP
  Hamilton, Andrew P., FNP
  Montplaisir, Pamela J., FNP
  Nuelle, Bethann M., FNP
  Stanger, Carole, FNP
- Physician Assistant
  Davidson, Gabriel L., PA
  Hoff, Bradley D., PA
  Ratajczak, Amy, PA
  Worrel, Leslie A., PA
  Zink, Jamie, PA
- Psychology
  Hartson, David, PHD

7 Day Clinic
1100 19th Ave N Ste L-M
(701) 364-2909
- Nurse Practitioner
  Allard, Amy M., FNP
  Dolalie-Kelsch, Angela A., CNP
  Ek, Marilyn S., FNP
  Hamilton, Andrew P., FNP
  Montplaisir, Pamela J., FNP
  Nuelle, Bethann M., FNP
  Rick, Brenda M., FNP
  Stanger, Carole, FNP
- Physician Assistant
  Davidson, Gabriel L., PA
  Hoff, Bradley D., PA
  Ratajczak, Amy, PA
  Worrel, Leslie A., PA

North Dakota (cont.)
Fargo (cont.)

7 Day Clinic -Osgood
4622 40th Ave S
(701) 364-2909
- Licensed Registered Dietitian
  White, Natalie J., LRD
- Nurse Practitioner
  Allard, Amy M., FNP
  Dolalie-Kelsch, Angela A., CNP
  Ek, Marilyn S., FNP
  Hamilton, Andrew P., FNP
  Stanger, Carole, FNP
- Physician Assistant
  Davidson, Gabriel L., PA
  Ratajczak, Amy, PA
  Zink, Jamie, PA
- Psychology
  Hartson, David, PHD

Altendorf Counseling & Associates
1351 Page Dr SW Ste 100
(701) 478-4044
- Licensed Professional Clinical Counselor
  Altendorf, John, LPCC

Andersen Counseling
624 Main Ave Suite 4b
(701) 793-7822
- Licensed Professional Clinical Counselor
  Andersen, Mary Jo, LPCC

Anesthesia Resources
3280 20th St S
(701) 361-6957
- Certified Registered Nurse Anesthetist
  Schmalz, Paula K., CRNA

Anesthesia Resources
1507 University Dr S
(701) 361-6957
- Certified Registered Nurse Anesthetist
  Schmalz, Paula K., CRNA

At Home Therapy Services dba Rehab4life Physical Therapy
4622 40 Ave S Ste B
(701) 293-7294
- Physical Therapy
  Gieseke, Stephanie, PT
  Gunkel, Amanda M., PT

North Dakota (cont.)
Fargo (cont.)

At Home Therapy Services dba Rehab4life Physical Therapy (cont.)
- Physical Therapy (continued)
  Hunt, Lindsey, PT
  Keller, Tracy L., PT
  St Clair, Keli N., PT
  Stroh, Roger J., PT
  Torgerson, Kari A., PT
  Wold, Jeffrey L., PT

Avail Psychological and Addiction Services, PLLC
112 Univ Dr N Ste 200
(701) 566-5272
- Licensed Addiction Counselor-Chemical Dependency
  Busch, Megan M., LAC
  Karjalainen, Jessica R., LAC
- Psychology
  Sternhagen, Scott V., PHD

Barbara Stanton, LPCC
3309 Fiechtner Drive
Suite C
(701) 356-2273
- Licensed Professional Clinical Counselor
  Stanton, Barbara K., LPCC

Beltone Hearing Aid Service
825 25 St S
(701) 237-9977
- Home Medical Equipment
  Beltone Hearing Aid Service

Benson Psychological Services
1308 23rd St S Ste G
(701) 297-7540
- Licensed Professional Clinical Counselor
  Forde, June M., LPCC
  Singh, Usha, LPCC
- Psychology
  Benson, Stacey L., PSYD
  Darveaux, Dion X., PHD
  Phillippi, Jay R., PHD
  Quam, Sara D., PSYD
  Smith, Kelly C., PSYD
  Stone, Eileen M., PSYD

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING ANCILLARY PROVIDERS

Bethany On University
201 S University Dr
(701) 239-3000

- Occupational Therapy
  Edwards, Chelsey L., OT
- Physical Therapy
  Joyce, Jonah D., PT
- Speech Therapy
  Kapitan, Kari J., ST

Bethany Retirement Living
4255 30th Ave S
(701) 478-8950

- Physical Therapy
  Riley, Lindsay A., PT

Beyond Boundaries Occupational Therapy Inc
3001 S 11th St
(701) 356-0062

- Occupational Therapy
  Bannach, Ladonna R., OT
  Hensrud, Andrea M., OT
  Lund, Kelsey, OT
  Olson, Janet R., OT
  Stevenson, Valerie J., OT
- Physical Therapy
  Anderson, Brittany, PT
  Askvig, Janelle E., PT

Beyond Boundaries Speech Language Therapy, Inc
3001 11th St S
(701) 356-0062

- Speech Therapy
  Anderson, Carol A., ST
  Dewald, Jessica, ST
  Doty, Megan, ST
  Fiskness, Heidi A., ST
  Glynn, Valerie, ST
  Grommesh, Kelsey A., ST
  Jore, Erin K., ST
  Perman, Nicole M., ST
  Radermacher, Katharine R., ST
  Severson, Krysta M., ST
  Suppes, Jill, ST

Bodyworks Physical Therapy, Ltd
3242 20th St S
(701) 893-2639

Bodyworks Physical Therapy, Ltd (cont.)

- Physical Therapy
  Grunewald, Claire F., PT
  Helgoe, Amanda R., PT
  Zimmerman, Andrew K., PT

Bogenreif, Marian, LPCC, LAC
118 Broadway Ste 601
(218) 736-5009

- Licensed Addiction Counselor-Chemical Dependency
  Bogenreif, Marian F., LAC
- Licensed Professional Clinical Counselor
  Bogenreif, Marian F., LPCC

Cariveau, Geraldine V, LPCC
3107 Westgate Dr
(701) 232-7374

- Licensed Professional Clinical Counselor
  Cariveau, Geraldine V., LPCC

Catalyst Medical Center, PC
1800 21 Ave S
(701) 365-8700

- Audiology
  Brakke, Rose I., AUD
- Nurse Practitioner
  Quinn, Angela Y., CNP
  Sedlaczek, Katarzyna N., CNP
- Physician Assistant
  Regan, Linda K., PA

Catholic Charities North Dakota
5201 Bishops Blvd Ste B
(701) 235-4457

- Licensed Professional Clinical Counselor
  Johnson, Catherine A., LPCC

Child Family Therapy Associates
1121 Westrac Dr Ste 204
(701) 893-3419

- Psychology
  Shawchuck, Carita R., PHD

Christeen A McLain dba Consultation & Movement
1402 Broadway N
(701) 388-1813

- Licensed Addiction Counselor-Chemical Dependency
  McLain, Christeen A., LAC
- Psychiatric Nurse
  McLain, Christeen A., PNU

Clarity Counseling
808 3 Ave S Suite 303
(701) 356-5545

- Licensed Professional Clinical Counselor
  Tallakson, Martin E., LPCC

Claudia McGrath Counseling HHN
417 38th St SW Ste B
(701) 277-0654

- Licensed Addiction Counselor-Chemical Dependency
  McGrath, Claudia M., LAC
- Licensed Professional Clinical Counselor
  McGrath, Claudia M., LPCC

Conscious Living Counseling and Education Center
26 Roberts St Ste 114
(701) 371-6211

- Licensed Professional Clinical Counselor
  Jensen, Kama B., LPCC

Counseling Etc
5731 18th St S
(701) 205-1743

- Licensed Professional Clinical Counselor
  Hundley, Steven F., LPCC

D & L PC dba Quality Life
1316 23rd Street S
(701) 478-0333

- Licensed Professional Clinical Counselor
  Emmel, Jenny E., LPCC
  Holt Johnson, Georgia M., LPCC
  Naslund, Angell M., LPCC

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING ANCILLARY PROVIDERS

D & L PC dba Quality Life (cont.)
- Nurse Practitioner
  Conteh, Patricia E., CNP
  Graham Steinhauer, Jessica K., CNP
- Psychiatric Nurse
  Volness, Linda J., CNS

Daigle Professional Counseling Services PLLC
1323 23rd St S Ste H
(701) 232-2886
- Licensed Addiction Counselor-Chemical Dependency
  Daigle, Rachel, LAC
- Licensed Professional Clinical Counselor
  Daigle, Rachel, LPCC

Dakota Boys Ranch
1641 31st Ave S
(701) 237-3123
- Licensed Addiction Counselor-Chemical Dependency
  Waind, Melissa, LAC
  Wendt, Jamie L., LAC
- Licensed Professional Clinical Counselor
  Simonson, Boni M., LPCC
  Vetter, Sara J., LPCC

Dakota Family Services
7151 15th St S
(701) 364-2950
- Occupational Therapy
  Willert, Shea, OT
- Psychology
  Willert Jr, Meryl G., PHD

Deer Oaks Mental Health Associates PC At Bethany On 42nd
4255 30th Ave S
(701) 478-8900
- Psychology
  Rosenheim, Harold D., PHD

Denton-Graber, Ruth LPCC
3309 Fiechtner Drive
Ste C
(701) 356-2273

Denton-Graber, Ruth LPCC (cont.)
- Licensed Professional Clinical Counselor
  Denton-Graber, Ruth M., LPCC

Discovery Counseling Center
115 N University Dr
(701) 237-4542
- Psychology
  Barrett, Terence W., PHD

Drake Counseling Services, Inc
1202 23rd St S
(701) 293-5429
- Licensed Addiction Counselor-Chemical Dependency
  Bartsch, Jennifer A., LAC
  Drake, Charles, LAC
  Flann, Kayla J., LAC
  Hersrud, Jacqueline M., LAC
  Johnson, Janna M., LAC
  Walen, Charlyne, LAC
  Williams, Sheena M., LAC
- Licensed Professional Clinical Counselor
  Drake, Charles, LPCC

Eslinger, Kristi J. Otr
2933 37th Ave S
(701) 239-0439
- Occupational Therapy
  Eslinger, Kristi J., OT

Essentia Health 32nd Avenue Clinic
3000 32nd Ave S
(701) 364-8000
- Certified Registered Nurse Anesthetist
  Borgen, Melissa J., CRNA
  Bulik, Robert E., CRNA
  Callahan, Joseph R., CRNA
  Callahan, Kevin C., CRNA
  Deutsch, Sarah R., CRNA
  Eckman, Nikki, CRNA
  Gross, Amanda J., CRNA
  Harvey, Lynda R., CRNA
  Hayes, Angela W., CRNA
  Honeyman, Ron L., CRNA
  Horner, Bradley, CRNA
  Huntington, Tracy A., CRNA
  Kremer, Randall L., CRNA
  Lambert, Matthew, CRNA

Essentia Health 32nd Avenue Clinic (cont.)
- Certified Registered Nurse Anesthetist (continued)
  Lantz, Leo J., CRNA
  Larson, Tara R., CRNA
  Mikkelsen, John M., CRNA
  Olson, Jeffrey E., CRNA
  Skatvold, Sara J., CRNA
  Spicer, Nathan M., CRNA
  Strasburg, Ryan G., CRNA
  Zarling, Anne C., CRNA
  Zuel, Melissa M., CRNA
- Licensed Registered Dietitian
  Andvik, Vicki, LRD
  Dubord, Tara, LRD
  Hieb, Amy, LRD
  Lund, Karla M., LRD
- Nurse Midwives
  Burrell, Terry J., CNM
  Carver, Linda D., CNM
  Howell, Christa L., CNM
  Janke, Jennifer L., CNM
  Powell, Denise C., CNM
- Nurse Practitioner
  Beecher, Tracy L., FNP
  Beiseker, Andrea M., FNP
  Bergs, Laura M., CNP
  Boeddeker, Spring A., FNP
  Brown, Camille A., CNP
  Eriksson, Kelli L., CNP
  Forbes Crowe, Feneta, FNP
  French Baker, Karla, FNP
  Holtz, Pamela P., FNP
  Kjos, Janell K., FNP
  Middlestead, Andrea, CNP
  Naslund, Leslee S., CNP
  Roth, Shannon, FNP
  Sims, Jessica, CNP
  Soforenko, Margaret R., CNP
  Wojcik, Susan E., CNP
- Occupational Therapy
  Boerboom, Sarah A., OT
  Crowe, Cheryl B., OT
  Enockson, Michelle I., OT
  Hager, Megan, OT
  Husar, Abby E., OT
  Kiefer, Megan M., OT
  Knott, Christina M., OT
  McKibbin, Randon N., OT

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING ANCILLARY PROVIDERS

Essentia Health 32nd Avenue Clinic (cont.)

- Occupational Therapy (continued)
  Mueller, Amy L., OT
  Thiel, Barbara E., OT
  Wasemiller, Peggy J., OT
- Physical Therapy
  Ali, Sana, PT
  Barnhardt, Scott D., PT
  Bitz, Heidi S., PT
  Bitz, James P., PT
  Brekke, Teri J., PT
  Garrahy, Shauna, PT
  Gauer, Chelsey N., PT
  Gunkelman, Ashley L., PT
  Halls, Ruth Ann, PT
  Isaak, Christine M., PT
  Kohler, Brittany, PT
  Meuwissen, Marissa N., PT
  Sauvageau, Katie M., PT
  Schmidt, Nicole J., PT
  Sunde, Lizette, PT
- Physical/Occupational Therapist
  Boerboom, Sarah A., OT
  Crowe, Cheryl B., OT
  Enockson, Michelle I., OT
  Husar, Abby E., OT
  Mueller, Amy L., OT
  Wasemiller, Peggy J., OT
- Physician Assistant
  Balvitsch, Jason, PA
  Dewey, Phillip A., PA
  Fewless, Theresa R., PA
  Francis, Lora, PA
  Kauffman, Russell A., PA
  Kessel, Ryan T., PA
  Knutson, Crystal Y., PA
  Mitzel, Wyatt L., PA
  Olson-Fitzgerald, Heidi M., PA
  Purnama, Paulina, PA
  Skove, Marcie S., PA
  Skyberg, Angela M., PA
  Swenson, Tiffany, PA
  Urlaub, Cathy R., PA
  Welk, Nikki L., PA
- Psychology
  Hauge, Gregory A., PHD
  Kirchner, Joel T., PSYD

Essentia Health 32nd Avenue Clinic (cont.)

- Speech Therapy
  Booth, Jill M., ST
  Boucher, Nicole R., ST
  Haen Sawrey, Amy C., ST
  James, Laura, ST
  Leadbetter, Jennifer, ST
  McAllister, Meghan L., ST
  McNutt, Melanie J., ST
  Rongstad, Sarah L., ST
  Stich, Sherrey L., ST
  Sullivan, Patricia C., ST

Essentia Health Hospital
3000 32nd Ave S
(701) 364-8000

- Nurse Practitioner
  Forbes Crowe, Feneta, FNP
  Holtz, Pamela P., FNP
- Physician Assistant
  Fewless, Theresa R., PA
  Kauffman, Russell A., PA

Essentia Health South University Clinic
1702 University Dr S
(701) 364-3300

- Audiology
  Almer, Marin A., AUD
  Frisk (Movchan), Cari L., AUD
- Certified Diabetic Educator
  Bednar, Jennifer, CDE
  Skoog, Jennifer M., CDE
  Viger, Karen M., CDE
- Certified Registered Nurse Anesthetist
  Borgen, Melissa J., CRNA
  Bulik, Robert E., CRNA
  Callahan, Joseph R., CRNA
  Callahan, Kevin C., CRNA
  Deutsch, Sarah R., CRNA
  Eckman, Nikki, CRNA
  Gross, Amanda J., CRNA
  Harvey, Lynda R., CRNA
  Hayes, Angela W., CRNA
  Honeyman, Ron L., CRNA
  Horner, Bradley, CRNA
  Huntington, Tracy A., CRNA
  Kremer, Randall L., CRNA
  Lambert, Matthew, CRNA

Essentia Health South University Clinic (cont.)

- Certified Registered Nurse Anesthetist (continued)
  Lantz, Leo J., CRNA
  Larson, Tara R., CRNA
  Mikkelsen, John M., CRNA
  Skatvold, Sara J., CRNA
  Spicer, Nathan M., CRNA
  Strasburg, Ryan G., CRNA
  Zarling, Anne C., CRNA
  Zuel, Melissa M., CRNA
- Licensed Registered Dietitian
  Andvik, Vicki, LRD
  Bednar, Jennifer, LRD
  Dubord, Tara, LRD
  Hieb, Amy, LRD
  Lund, Karla M., LRD
  Nagel, Joan L., LRD
  Skoog, Jennifer M., LRD
  Walters, Leah M., LRD
- Nurse Practitioner
  Garberg, Tamra A., FNP
  Kuhn, Jessica R., CNP
  McKinnon, Dawn R., CNP
  Moen, Lisa R., CNP
  Nelles, Rachel K., CNP
  Schultz, Joan M., CNP
  Weston, Penni M., FNP
- Occupational Therapy
  Boerboom, Sarah A., OT
  Crowe, Cheryl B., OT
  Enockson, Michelle I., OT
  Hager, Megan, OT
  Husar, Abby E., OT
  Kiefer, Megan M., OT
  Knott, Christina M., OT
  McKibbin, Randon N., OT
  Mueller, Amy L., OT
  Thiel, Barbara E., OT
  Wasemiller, Peggy J., OT
- Physical Therapy
  Ali, Sana, PT
  Barnhardt, Scott D., PT
  Bitz, Heidi S., PT
  Bitz, James P., PT
  Brekke, Teri J., PT
  Garrahy, Shauna, PT
  Gauer, Chelsey N., PT
  Gunkelman, Ashley L., PT

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING ANCILLARY PROVIDERS

Essentia Health South University Clinic (cont.)

- Physical Therapy (continued)
  Halls, Ruth Ann, PT
  Isaak, Christine M., PT
  Kohler, Brittany, PT
  Meuwissen, Marissa N., PT
  Sauvageau, Katie M., PT
  Schmidt, Nicole J., PT
  Schwengler, Jason J., PT
  Sunde, Lizette, PT
- Physical/Occupational Therapist
  Boerboom, Sarah A., OT
  Crowe, Cheryl B., OT
  Enockson, Michelle I., OT
  Husar, Abby E., OT
  Mueller, Amy L., OT
  Wasemiller, Peggy J., OT
- Physician Assistant
  Erickson, Rick D., PA
  Norby, Brenda J., PA
  Olson-Fitzgerald, Heidi M., PA
  Swenson, Tiffany, PA
- Psychology
  Hauge, Gregory A., PHD
- Speech Therapy
  Booth, Jill M., ST
  Boucher, Nicole R., ST
  Haen Sawrey, Amy C., ST
  James, Laura, ST
  Leadbetter, Jennifer, ST
  Lindquist, Elise, ST
  McAllister, Meghan L., ST
  McNutt, Melanie J., ST
  Rongstad, Sarah L., ST
  Stich, Sherrey L., ST
  Sullivan, Patricia C., ST

Essentia Health West Acres Clinic
3902 13th Ave S
(701) 364-6600

- Nurse Practitioner
  Anderson, Elisha D., FNP
  Boeddeker, Spring A., FNP
  Garberg, Tamra A., FNP
  Hansen, Sara, CNP
  Kempton, Marcia E., FNP
  Kjos, Janell K., FNP
  McKinnon, Dawn R., CNP
  Meyer, Lana J., FNP
  Nelles, Rachel K., CNP

Essentia Health West Acres Clinic (cont.)

- Nurse Practitioner (continued)
  Safranski, Mary B., CNP
  Schultz, Joan M., CNP
  Weston, Penni M., FNP
- Occupational Therapy
  Boerboom, Sarah A., OT
  Crowe, Cheryl B., OT
  Enockson, Michelle I., OT
  Husar, Abby E., OT
  Kiefer, Megan M., OT
  McKibbin, Randon N., OT
  Mueller, Amy L., OT
- Physical Therapy
  Ali, Sana, PT
  Barnhardt, Scott D., PT
  Bitz, Heidi S., PT
  Bitz, James P., PT
  Brekke, Teri J., PT
  Garrahy, Shauna, PT
  Gauer, Chelsey N., PT
  Gunkelman, Ashley L., PT
  Halls, Ruth Ann, PT
  Isaak, Christine M., PT
  Kohler, Brittany, PT
  Sauvageau, Katie M., PT
  Schmidt, Nicole J., PT
  Schwengler, Jason J., PT
  Sunde, Lizette, PT
- Physical/Occupational Therapist
  Boerboom, Sarah A., OT
  Crowe, Cheryl B., OT
  Enockson, Michelle I., OT
  Husar, Abby E., OT
  Mueller, Amy L., OT
- Physician Assistant
  Hoffman, Leah, PA
  Larson, Bruce D., PA
  Motschenbacher, Kurtis K., PA
  Olson-Fitzgerald, Heidi M., PA
  Shilling, John R., PA
  Skyberg, Angela M., PA
  Soper, Constance F., PA
  Swenson, Tiffany, PA
  Welk, Nikki L., PA

Family Healthcare Center
301 NP Ave
(701) 271-3344

- Clinical Nurse Specialist
  Dobmeier, Terry, CNS
- Licensed Registered Dietitian
  Berg, Vanessa, LRD
  Leino-Mills, Pamela, LRD
- Nurse Midwives
  Dockter, Meghan, CNM
- Nurse Practitioner
  Grothem, Avis L., CNP
  Hauff, Alicia, FNP
  McMullen, Jill M., FNP
  Polcher, Kelly, FNP
  Sprague, Mary L., FNP
  Swingen, Randy C., FNP
- Physician Assistant
  Gray, Kathryn, PA

Family Institute PC
4955 17th Ave S Ste 122
(701) 282-8510

- Psychology
  Adams Larsen, Margo A., PHD
  Moe, Brian K., PHD
  Paulson, Michael D., PHD

Fargo Cass Public Health
401 3rd Ave N
(701) 241-1383

- Nurse Practitioner
  Eckes, Audrey A., CNP
  Ellingson, Lori L., FNP

Gail Reierson Consulting
2524 18th St S
(701) 730-6279

- Licensed Professional Clinical Counselor
  Reierson, Gail N., LPCC

Gjerde, Elizabeth LPCC dba Accent On Care
3309 Fiechtner Dr Ste C
(701) 866-3969

- Licensed Professional Clinical Counselor
  Gjerde, Elizabeth A., LPCC

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING ANCILLARY PROVIDERS

Great Kids Therapy Ltd
3507 Evergreen Rd NE
(701) 261-4643

- Occupational Therapy
  Meinhardt, Sarah D., OT
- Physical/Occupational Therapist
  Meinhardt, Sarah D., OT

Hanger Prosthetics and Orthotics Inc
3003 32nd Ave S Ste 102
(701) 298-7926

- Home Medical Equipment
  Hanger Prosthetics and Orthotics Inc

Hcr Manorcare Medical Services of Florida, LLC dba Hcp
1315 S University Drive
(800) 375-5495

- Nurse Practitioner
  Buegel, Huyen, CNP
  Moore, Wendy M., FNP

Healthsource of Fargo-Moorhead
3175 Sienna Dr Ste 105
(701) 451-9098

- Home Medical Equipment
  Healthsource of Fargo-Moorhead

Hearing Solutions, Inc.
2700 12th Ave SW Ste D
(701) 232-2438

- Audiology
  Frisk, Matthew T., MS
- Home Medical Equipment
  Hearing Solutions, Inc.

Heartland Diagnostic Services LLC
3280 20th St S
(701) 499-4800

- Independent Laboratory
  Heartland Diagnostic Services LLC

Horizon Therapy, Inc
4420 37th Ave S
(701) 365-4771

- Occupational Therapy
  Nelson, Crystal L., OT
- Physical Therapy
  Huber, Matthew T., PT

North Dakota (cont.)
Fargo (cont.)

Hospice of The Red River
1701 38th St S Ste 101
(701) 356-1500

- Nurse Practitioner
  Johnson, Jennifer L., FNP

Independent Anesthesia
1507 S University Dr
(701) 237-9592

- Certified Registered Nurse Anesthetist
  Mosey, Karen M., CRNA

Independent Family Doctors
1711 Gold Drive S #160
(701) 234-9400

- Nurse Practitioner
  Dunkel, Sharon K., FNP
  Schmidt, Lori B., FNP

Inner Light Counseling Services
1323 23 St S Suite H
(701) 478-0906

- Licensed Professional Clinical Counselor
  Axtman, Mystal R., LPCC

Internal Medicine Associates
1707 Gold Dr S Ste 101
(701) 280-2033

- Licensed Registered Dietitian
  Fuchs, Lisa M., LRD
  Vettleson, Lindsay R., LRD
- Nurse Practitioner
  Holtz, Pamela P., FNP
- Physician Assistant
  Engberg, Dacia, PA
  Hanson, Susan J., PA

Jeffrey C Gregory, PhD PC dba Gregory Psychology Solutions
1323 23rd St S Ste B
(701) 293-7477

- Psychology
  Gregory, Jeffrey C., PHD

Johnson Counseling & Consulting
3309 Fiechtner Drive
Suite C
(701) 356-2273

- Licensed Professional Clinical Counselor
  Johnson, Cynthia S., LPCC

North Dakota (cont.)
Fargo (cont.)

Joy Belzer Counseling
1330 Page Dr S Ste 202b
(701) 367-5985

- Licensed Professional Clinical Counselor
  Belzer, Joy A., LPCC

Lamb Plastic Surgery Center, PC
1507 University Dr S
(701) 237-9592

- Certified Registered Nurse Anesthetist
  Mosey, Karen M., CRNA

Lincare Inc
1609 32 Ave S Ste C
(701) 235-0175

- Home Medical Equipment
  Lincare Inc

Linson Pharmacy
3175 25th St S
(701) 293-6022

- Pharmacy
  Linson Pharmacy

Magelky, Phyllis Ltd
3509 Interstate Blvd
Ste B
(701) 364-9070

- Speech Therapy
  Henrich, Stacy R., ST
  Magelky, Phyllis J., ST
  Nostrum, Cari Ann, ST
  Staehnke, Emilee K., ST
  Walker, Amanda C., ST

Matthys, Gary, MD
2301 25th St S Suite I
(701) 241-9300

- Home Medical Equipment
  Gary A. Matthys, MD Plc
- Physician Assistant
  McDonald, Sean D., PA

Neuropsychology Associates PA
1220 Main Ave #100
(701) 297-7588

- Psychology
  Meidinger, Amy L., PHD
  Swenson, Rodney, PHD

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING ANCILLARY PROVIDERS

Nielsen Counseling
1919 N Univ Dr Sgc C119
(701) 231-7676

- Licensed Professional Clinical Counselor
  Nielsen, Robert C., LPCC

Onword Therapy
1220 Main Ave Ste 120
(701) 364-5433

- Speech Therapy
  Doerfler, Elaine, ST
  Glynn, Valerie, ST
  Grommesh, Kelsey A., ST
  Hoepfner, Sarah, ST
  Kennelly, Nanette S., ST
  Kraling, Michelle, ST
  Wiedenman, Katyana M., ST

Partner Medical ND LLC
5256 50th Ave S
(866) 590-2138

- Home Medical Equipment
  Partner Medical ND LLC

Pediatric Therapy Partners Inc
3060 Frontier Way S
(701) 232-2340

- Occupational Therapy
  Bluhm, Erica, OT
  Borlaug, Cassandra, OT
  Dingmann, Rochelle A., OT
  Drewlo, Sharon R., OT
  Gottenborg, Kaitlynn, OT
  Hauck, Megan, OT
  Larson, Tessa, OT
  Mitteness, Lisa, OT
  Olson, Stephen P., OT
  Pladson, Leslie, OT
  Sauvageau, Alyssa L., OT
  Sayler, Kathleen S., OT
  Wildeman, Desiree M., OT
  Zimmerman, Hannah M., OT
- Physical Therapy
  Borchardt, Brian A., PT
  Buckmier, Shannon M., PT
  Daily, Alishia M., PT
  Dosland, Kiley A., PT
  Hendrickson, Jodi D., PT
- Physical/Occupational Therapist
  Olson, Stephen P., OT

Pediatric Therapy Partners Inc (cont.)

- Speech Therapy
  Belk, Tessa L., ST
  Delaney, Sara L., ST
  Donahue, Elizabeth A., ST
  Feist, Amy A., ST
  Flach, Arica C., ST
  Graham, Heather L., ST
  Lawson, Chelsey J., ST
  Mart, Michelle L., ST
  Miller, Linaya K., ST
  Murray, Krista M., ST
  Olson, Rachel A., ST
  Quam, Brittany, ST
  Rodke, Stephanie, ST
  Rogness, Lora M., ST
  Thrash, Rebecca, ST
  Vanden Hoek, Amanda M., ST
  Venaas-Gilbraith, Janette, ST
  Voigt, Tiffany P., ST

Plains Medical Clinic LLC
3290 20th St S
(701) 499-4800

- Physician Assistant
  Andvik, Debra E., PA
  Brosowske, Cristy M., PA
  Skyberg, Angela M., PA

Prairie St Johns
510 4th St S
(701) 476-7200

- Licensed Addiction Counselor-Chemical Dependency
  Brink, William D., LAC
  Curran, Patrick C., LAC
  Grahn, Erin M., LAC
  Luzier, Marikay, LAC
  Makonnen, Kimberly R., LAC
  Onungwe, Mary O., LAC
  Phillips, Brenda R., LAC
  Readel, Kelly D., LAC
  Shiaro, Chris M., LAC
  Sorenson, Tonya S., LAC
  Wendt, Jamie L., LAC
- Licensed Professional Clinical Counselor
  Denton-Graber, Ruth M., LPCC
  Pfeifer, James, LPCC
  Stanton, Barbara K., LPCC

Prairie St Johns (cont.)

- Nurse Practitioner
  Bleess Toppen, Jacqueline K., CNP
- Psychology
  Frissell, Jenny, PHD
  Juanto-Laver, Nils-Erik J., PHD

Primary Care At Lillestol Research
1711 Gold Dr S #170
(701) 232-7705

- Physician Assistant
  Brown, Jamie, PA

Professional Rehabilitation Center, Inc
1711 Gold Dr Ste 120
(701) 451-9417

- Occupational Therapy
  Baumgartner, Jessica M., OT
  Wilson, Sarah J., OT
- Physical Therapy
  Baumgartner, Tom L., PT
  England, Heather A., PT
  Kirchner, Tracy L., PT
  Kurtz, Lynden H., PT
  Rugg, Jennifer M., PT
  Schram, Denise V., PT
  Studsrud, Heather, PT
  Tonn, Krista J., PT
  Wolden, Mitchell J., PT
- Physical/Occupational Therapist
  Baumgartner, Jessica M., OT

Prorehab Center At Edgewood Vista
4420 37 Ave S
(701) 451-9417

- Occupational Therapy
  Baumgartner, Jessica M., OT
- Physical Therapy
  Kirchner, Tracy L., PT
  Rugg, Jennifer M., PT
  Schram, Denise V., PT
  Tonn, Krista J., PT
  Wolden, Mitchell J., PT
- Physical/Occupational Therapist
  Baumgartner, Jessica M., OT

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING ANCILLARY PROVIDERS

Prorehab Center At Touchmark
1200 Harwood Dr S
(701) 451-9417

- Occupational Therapy
  Baumgartner, Jessica M., OT
- Physical Therapy
  Kirchner, Tracy L., PT
  Schram, Denise V., PT
  Tonn, Krista J., PT
  Wolden, Mitchell J., PT
- Physical/Occupational Therapist
  Baumgartner, Jessica M., OT

Prorehab Center At Trollwood Village
3105 N Bdwy Ste 7
(701) 235-4456

- Physical Therapy
  Rugg, Jennifer M., PT
  Schram, Denise V., PT
  Tonn, Krista J., PT
  Wolden, Mitchell J., PT

PT OT Partners PC
2829 University Dr S
Ste 2
(701) 478-7868

- Home Medical Equipment
  PT OT Partners PC
- Occupational Therapy
  Redinger, Deron L., OT
- Physical Therapy
  Crockett, Jodi, PT
  Kroke, Mike C., PT
- Physical/Occupational Therapist
  Redinger, Deron L., OT

Red River Pediatric Therapy
6681 56th Ave S
(701) 361-9622

- Occupational Therapy
  Meissner, Anna L., OT

Red River Women's Clinic
512 1st Ave N
(701) 298-9999

- Nurse Practitioner
  Alberty, Sandra K., CNP

Rehab Authority
3170 43rd St South
Ste 101
(701) 277-8448

- Physical Therapy
  Burcham, Tyler, PT
  Hayes, Kirk J., PT
  Johnson, Eldon A., PT
  Kraemer, Christopher C., PT
  Kraemer, Jennifer N., PT
  Peterson, Kristopher W., PT

Rehab Authority
1100 19th Ave N Ste K
(701) 235-1400

- Physical Therapy
  Burcham, Tyler, PT
  Kraemer, Jennifer N., PT
  Peterson, Kristopher W., PT

Rosewood On Broadway
1351 Broadway
(701) 277-7999

- Occupational Therapy
  Kessel, Tracy R., OT

Sanford 1717 Medical Building
1717 S University Drive
(701) 234-2000

- Certified Diabetic Educator
  Haugen, Andrea J., CDE
- Licensed Professional Clinical Counselor
  Woodbury, Kara B., LPCC
- Licensed Registered Dietitian
  Goetz, Jennifer S., LRD
  Haugen, Andrea J., LRD
  Herrick, Kelsey R., LRD
  Krueger, Maren A., LRD
  Moe, Barbara J., LRD
  Olson, Katherine S., LRD
  Tehven, Kathy J., LRD
  Williams, Michelle D., LRD
- Nurse Practitioner
  Groth, Bonnie L., FNP
- Physician Assistant
  Aamold, Robyn, PA
  Welle, Erin, PA
- Psychiatric Nurse
  Roerig, Deborah B., CNS

Sanford 1717 Medical Building (cont.)

- Psychology
  Kadlec, Kelly E., EDD
  Lahaise, Kim T., PHD
  Myers, Tricia C., PHD
  Swan-Kremeier, Lorraine, PHD

Sanford 1717 Medical Building
1717 South University Dr
(701) 234-2000

- Certified Diabetic Educator
  Haugen, Andrea J., CDE
- Licensed Professional Clinical Counselor
  Woodbury, Kara B., LPCC
- Licensed Registered Dietitian
  Goetz, Jennifer S., LRD
  Hass, Naomi, LRD
  Haugen, Andrea J., LRD
  Herrick, Kelsey R., LRD
  Krueger, Maren A., LRD
  Moe, Barbara J., LRD
  Nagel, Joan L., LRD
  Olson, Katherine S., LRD
  Srnsky, Brianna, LRD
  Tehven, Kathy J., LRD
  Williams, Michelle D., LRD
- Nurse Practitioner
  Groth, Bonnie L., FNP
- Physician Assistant
  Aamold, Robyn, PA
  Welle, Erin, PA
- Psychiatric Nurse
  Roerig, Deborah B., CNS
- Psychology
  Kadlec, Kelly E., EDD
  Lahaise, Kim T., PHD
  Myers, Tricia C., PHD
  Swan-Kremeier, Lorraine, PHD

Sanford 2801 Medical Building
2801 University Dr S
(701) 234-5673

- Clinical Nurse Specialist
  Wages, Leann A., CNS
- Nurse Practitioner
  Saarinen, Heidi, FNP
- Physician Assistant
  Garvey, Catherine M., PA
  Pratt, Amanda, PA

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING ANCILLARY PROVIDERS

Sanford 2801 Medical Building (cont.)

- Physician Assistant (continued)
  Saunders, Mary C., PA

Sanford 2801 Medical Building
2801 University Dr S
(701) 234-5673

- Clinical Nurse Specialist
  Wages, Leann A., CNS
- Nurse Practitioner
  Saarinen, Heidi, FNP
- Physician Assistant
  Garvey, Catherine M., PA
  Pratt, Amanda, PA
  Saunders, Mary C., PA

Sanford Broadway Clinic
801 Broadway North
(701) 234-2000

- Audiology
  Berg, Michael A., MS
  Olson, Ardell E., MS
  Qvammen, Brian D., MS
- Certified Diabetic Educator
  Bosch, Ryan T., CDE
  Haugen, Andrea J., CDE
  Homuth, Angela B., CDE
- Certified Registered Nurse Anesthetist
  Abrahamson, Nicole, CRNA
  Adams, Julie A., CRNA
  Balvitsch, Deanna M., CRNA
  Baumeister, Ann M., CRNA
  Bjornstad, Mark, CRNA
  Blaze, Jodee, CRNA
  Boe, Julie, CRNA
  Busker, Katie, CRNA
  Carr, Michael, CRNA
  Coulter, Casie, CRNA
  Currie, Michael, CRNA
  Dallman, Megan, CRNA
  Diederick, Lee, CRNA
  Diehl, Margaret, CRNA
  Errett, Bruce I., CRNA
  Fines, Michelle L., CRNA
  Flom, Adrianne, CRNA
  Greene, Susan G., CRNA
  Gross, Brenda M., CRNA
  Hilscher Decker, Tara, CRNA
  Hoganson, Tammy, CRNA

Sanford Broadway Clinic (cont.)

- Certified Registered Nurse Anesthetist (continued)
  Holman, Amy, CRNA
  Holte, Ralph, CRNA
  Holzer, Tonya, CRNA
  Huber, Jason P., CRNA
  Kleven, Lori K., CRNA
  Kostecki, Karen, CRNA
  Kreklau, Joseph, CRNA
  Krupich, Mary E., CRNA
  Lee, Carol M., CRNA
  Lemnus-Elias, Dana, CRNA
  Marsh, Todd M., CRNA
  Mathiason, Kurt, CRNA
  Mattern, Travis J., CRNA
  McNeally, Shawn L., CRNA
  Meier, Raymond S., CRNA
  Moser, Kent, CRNA
  Mund, Steven, CRNA
  Nygaard, Lynette, CRNA
  Rasmussen, Tami O., CRNA
  Reuter, Patric, CRNA
  Schauer, Summer, CRNA
  Schreiber, Charlene, CRNA
  Selch, Lenae, CRNA
  Senn, Laurie, CRNA
  Smogard, Wayne, CRNA
  Stahl, Heidi, CRNA
  Stenehjem, Jenny A., CRNA
  Stevenson, James, CRNA
  Tapia-Zegarra, Janet, CRNA
  Torpen, S Michelle, CRNA
  Triepke, Sheri, CRNA
  Underdahl, Todd, CRNA
  Vaagen, Roger, CRNA
  Vanmatre, Melissa, CRNA
  Vincent, Matthew, CRNA
  Watson, Erik, CRNA
  Wentz, Nina, CRNA
  Wick, Twyla, CRNA
  Zarling, Anne C., CRNA
  Zarling, Jeffrey W., CRNA
- Clinical Nurse Specialist
  Waagen, Gail L., CNS
- Licensed Registered Dietitian
  Anderson, Paula A., LRD
  Brakke, Kayla, LRD
  Breedon, Catherine H., LRD
  Goetz, Jennifer S., LRD

Sanford Broadway Clinic (cont.)

- Licensed Registered Dietitian (continued)
  Haugen, Andrea J., LRD
  Helleen, Jennifer L., LRD
  Hoff, Nancy L., LRD
  Kadrmas, Lisa M., LRD
  Kruger, Darlene, LRD
  Liebl, Kristen M., LRD
  Moe, Barbara J., LRD
  Noreen, Laura J., LRD
  Olson, Katherine S., LRD
  Sickels, Robin J., LRD
  Srnsky, Brianna, LRD
  Welsch, Nicole M., LRD
  Williams, Michelle D., LRD
- Nurse Practitioner
  Baugh, Miranda L., FNP
  Bellas, Jennifer D., CNP
  Borgeson, Debra S., CNP
  Cox, Candice, CNP
  Fossum, Tricia M., CNP
  Groth, Bonnie L., FNP
  Haug, Kimberly, CNP
  Hockett, Stephaine L., FNP
  Hoover, Casey M., FNP
  Johnson, Julie, CNP
  Krueger, Stacy, FNP
  Nilles, Stephanie, CNP
  Peterson, Andrea, FNP
  Seung, Chantee, FNP
  Smith, Jennifer, CNP
  Ulmer, Tosha F., CNP
  Welch, Molly, FNP
  Wojcik, Susan E., CNP
- Physical Therapy
  Peterson, Kristopher W., PT
- Physician Assistant
  Aamold, Robyn, PA
  Becker, Alison, PA
  Evanson, Candyce K., PA
  Flom, Beau S., PA
  Gigstad-Stave, Doreen J., PA
  Hardmeyer, Gabriel, PA
  Harry, Eric, PA
  Hennessy, Jill M., PA
  Ihle, Lorna J., PA
  Lammle, William G., PA
  Lien, Morgan, PA
  Lizakowski, Jason, PA

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING ANCILLARY PROVIDERS

Sanford Broadway Clinic (cont.)

- Physician Assistant (continued)
  McDonald, Sean D., PA
  Murphy, Matthew C., PA
  Smith, Cynthia A., PA
  Welle, Erin, PA
- Psychology
  Christianson, Kenneth E., PHD

Sanford Broadway Clinic
801 Broadway North
(701) 234-2000

- Audiology
  Berg, Michael A., MS
  Bolda, Megan E., AUD
  Olson, Ardell E., MS
  Qvammen, Brian D., MS
- Certified Diabetic Educator
  Bosch, Ryan T., CDE
  Cavalier, Susan K., CDE
  Haugen, Andrea J., CDE
  Homuth, Angela B., CDE
  Klocke, Janet D., CDE
  Skolness, Vanessa, CDE
- Certified Registered Nurse Anesthetist
  Abrahamson, Nicole, CRNA
  Adams, Julie A., CRNA
  Balvitsch, Deanna M., CRNA
  Baumeister, Ann M., CRNA
  Bialas, Jedd, CRNA
  Bjornstad, Mark, CRNA
  Blaze, Jodee, CRNA
  Boe, Julie, CRNA
  Busker, Katie, CRNA
  Carr, Michael, CRNA
  Chathams, Cody, CRNA
  Coulter, Casie, CRNA
  Cross, Jennifer, CRNA
  Currie, Michael, CRNA
  Dallman, Megan, CRNA
  Devaney, Stephen, CRNA
  Diederick, Lee, CRNA
  Diehl, Margaret, CRNA
  Errett, Bruce I., CRNA
  Fines, Michelle L., CRNA
  Flom, Adrianne, CRNA
  Greene, Susan G., CRNA
  Gross, Brenda M., CRNA
  Herbrandson, Jeremy, CRNA
  Hilscher Decker, Tara, CRNA

Sanford Broadway Clinic (cont.)

- Certified Registered Nurse Anesthetist (continued)
  Hoganson, Tammy, CRNA
  Holman, Amy, CRNA
  Holte, Ralph, CRNA
  Holzer, Tonya, CRNA
  Huber, Jason P., CRNA
  Johnson, Leif, CRNA
  Kleven, Lori K., CRNA
  Kostecki, Karen, CRNA
  Kreklau, Joseph, CRNA
  Krupich, Mary E., CRNA
  Lauer, Leanna, CRNA
  Lee, Carol M., CRNA
  Lemnus-Elias, Dana, CRNA
  Marsh, Todd M., CRNA
  Mathiason, Kurt, CRNA
  Mattern, Travis J., CRNA
  McNeally, Shawn L., CRNA
  Meier, Raymond S., CRNA
  Moser, Kent, CRNA
  Mund, Steven, CRNA
  Nygaard, Lynette, CRNA
  Rasmussen, Tami O., CRNA
  Reuter, Patric, CRNA
  Schauer, Summer, CRNA
  Schreiber, Charlene, CRNA
  Selch, Lenae, CRNA
  Senn, Laurie, CRNA
  Smogard, Wayne, CRNA
  Son, Irina, CRNA
  Stahl, Heidi, CRNA
  Stenehjem, Jenny A., CRNA
  Stevenson, James, CRNA
  Szczepanski, Amber L., CRNA
  Tapia-Zegarra, Janet, CRNA
  Torpen, S Michelle, CRNA
  Triepke, Sheri, CRNA
  Underdahl, Todd, CRNA
  Vaagen, Roger, CRNA
  Vanmatre, Melissa, CRNA
  Vincent, Matthew, CRNA
  Watson, Erik, CRNA
  Wentz, Nina, CRNA
  Wick, Twyla, CRNA
  Woitzel, Ashley, CRNA
  Zarling, Anne C., CRNA
  Zarling, Jeffrey W., CRNA

Sanford Broadway Clinic (cont.)

- Clinical Nurse Specialist
  Ashmore, Beth R., CNS
  Waagen, Gail L., CNS
- Licensed Registered Dietitian
  Anderson, Paula A., LRD
  Brakke, Kayla, LRD
  Breedon, Catherine H., LRD
  Goetz, Jennifer S., LRD
  Hass, Naomi, LRD
  Haugen, Andrea J., LRD
  Helleen, Jennifer L., LRD
  Hoff, Nancy L., LRD
  Kadrmas, Lisa M., LRD
  Krueger, Maren A., LRD
  Kruger, Darlene, LRD
  Liebl, Kristen M., LRD
  Meyer, Elizabeth Ann G., LRD
  Moe, Barbara J., LRD
  Nagel, Joan L., LRD
  Noreen, Laura J., LRD
  Olson, Katherine S., LRD
  Sickels, Robin J., LRD
  Srnsky, Brianna, LRD
  Welsch, Nicole M., LRD
  Williams, Michelle D., LRD
- Nurse Practitioner
  Bartnick, Jamie, CNP
  Baugh, Miranda L., FNP
  Beiseker, Andrea M., FNP
  Bellas, Jennifer D., CNP
  Blanchard, Janet A., CNP
  Borgeson, Debra S., CNP
  Cooley, Michelle, CNP
  Cox, Candice, CNP
  Dowsley, Kari, CNP
  Feragen, Shantelle, CNP
  Fossum, Tricia M., CNP
  Groth, Bonnie L., FNP
  Haug, Kimberly, CNP
  Hochstein, Leah, CNP
  Hockett, Stephaine L., FNP
  Hoover, Casey M., FNP
  Johnson, Julie, CNP
  Krueger, Stacy, FNP
  Loiland, Julie, CNP
  Nilles, Stephanie, CNP
  Noonan, Melanie, CNP
  Ouradnik, Heather, CNP
  Peterson, Andrea, FNP

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING ANCILLARY PROVIDERS

Sanford Broadway Clinic (cont.)
- Nurse Practitioner (continued)
  Rossland, Alexis, CNP
  Seung, Chantee, FNP
  Sjoquist, Nina C., CNP
  Smith, Jennifer, CNP
  Ulmer, Tosha F., CNP
  Welch, Molly, FNP
  Wojcik, Susan E., CNP
- Physician Assistant
  Aamold, Robyn, PA
  Becker, Alison, PA
  Evanson, Candyce K., PA
  Flom, Beau S., PA
  Francis, Lora, PA
  Gigstad-Stave, Doreen J., PA
  Hardmeyer, Gabriel, PA
  Harry, Eric, PA
  Hennessy, Jill M., PA
  Ihle, Lorna J., PA
  Lammle, William G., PA
  Lien, Morgan, PA
  Lizakowski, Jason, PA
  McDonald, Sean D., PA
  Meyer, Shane, PA
  Murphy, Matthew C., PA
  Smith, Cynthia A., PA
  Welle, Erin, PA
- Psychology
  Biebl, Sara, PHD
  Brower Breitwieser, Carrie, PHD
  Christianson, Kenneth E., PHD
  Hines, Lindsay, PHD

Sanford Broadway Medical Building
736 Broadway N
(701) 234-2000
- Physician Assistant
  Evanson, Candyce K., PA
  Hennessy, Jill M., PA
  Lizakowski, Jason, PA

Sanford Childrens Southwest Clinic
2701 13th Ave S
(701) 234-3600
- Independent Laboratory
  Sanford Children's Southwest Clinic Lab
- Nurse Practitioner
  Osowski, Elizabeth, CNP

North Dakota (cont.)
Fargo (cont.)

Sanford Childrens Southwest Clinic
2701 13th Ave S
(701) 234-3600
- Nurse Practitioner
  Osowski, Elizabeth, CNP
- Psychology
  Biebl, Sara, PHD

Sanford Dermatology & Laser Clinic
4656 40th Ave S
(701) 234-8860
- Nurse Practitioner
  Schue, Richard M., CNP
- Physician Assistant
  Hegge, Erin C., PA
  Reese, Judith, PA

Sanford Dermatology & Laser Clinic
4656 40th Ave S
(701) 234-8860
- Nurse Practitioner
  Schue, Richard M., CNP
- Physician Assistant
  Hegge, Erin C., PA
  Reese, Judith, PA

Sanford Health Edgewood Vista Clinic
4420 37 Ave S
(701) 365-4746
- Nurse Practitioner
  Montplaisir, Pamela J., FNP
- Physician Assistant
  Carr, Kristen, PA

Sanford Health Edgewood Vista Clinic
4420 37 Ave S
(701) 365-4746
- Nurse Practitioner
  Hoffmann, Jennifer, FNP

Sanford Health Occupational Medicine Clinic
3838 12th Ave N
(701) 234-4700
- Nurse Practitioner
  Granlund, Terry, CNP
- Physical Therapy
  Burd, Ann, PT
  Frappier, Chantel M., PT
  Layfield, Katie M., PT

North Dakota (cont.)
Fargo (cont.)

Sanford Health Occupational Medicine Clinic (cont.)
- Physical Therapy (continued)
  Sandsmark, Suzanne R., PT
- Physician Assistant
  McGregor, Michael J., PA

Sanford Health Occupational Medicine Clinic
3838 12th Ave N
(701) 234-4700
- Nurse Practitioner
  Granlund, Terry, CNP
- Physical Therapy
  Bennington, Heather R., PT

Sanford Healthcare Accessories Fargo
3223 32nd Ave S
(701) 293-8211
- Home Infusion
  Sanford Healthcare Accessories Fargo
- Home Medical Equipment
  Sanford Healthcare Accessories Fargo

Sanford Healthcare Accessories LLC
2801 S University
(701) 234-8411
- Home Medical Equipment
  Sanford Healthcare Accessories LLC

Sanford Medical Center Fargo
801 Broadway North
(701) 234-2000
- Home Medical Equipment
  Sanford Medical Center Fargo/DME

Sanford Neuroscience Clinic
700 1st Ave S
(701) 234-4036
- Neurological Surgery
  Potter, Matthew, PA
- Nurse Practitioner
  Hager, Molissa, FNP
  Koltes, Leslie, FNP
  Matcha, Sarah, FNP
- Physician Assistant
  Bjorklund, Gregory T., PA

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING ANCILLARY PROVIDERS

Sanford Neuroscience Clinic (cont.)

- Physician Assistant (continued)
  Falck, Susan K., PA
  Keshavarz, Tahereh, PA
  Sieg, Daryl A., PA
  Spaeth, James B., PA
  Wagner, Angela, PA
- Psychology
  Bergloff, Paula J., PHD
  Hines, Lindsay, PHD
  Wood, Susan M., PHD

Sanford Neuroscience Clinic
700 1st Ave S
(701) 234-4036

- Licensed Professional Clinical Counselor
  Dokken, Julie, LPCC
- Neurological Surgery
  Potter, Matthew, PA
- Nurse Practitioner
  Hager, Molissa, FNP
  Heinle, Sarah, CNP
  Koltes, Leslie, FNP
  Matcha, Sarah, FNP
- Physician Assistant
  Baldwin, Gretchen, PA
  Bjorklund, Gregory T., PA
  Breding, Joanna, PA
  Falck, Susan K., PA
  Keshavarz, Tahereh, PA
  Sieg, Daryl A., PA
  Spaeth, James B., PA
  Wagner, Angela, PA
- Psychology
  Bergloff, Paula J., PHD
  Hines, Lindsay, PHD
  Porter, Scott, PHD
  Wood, Susan M., PHD

Sanford North Fargo Clinic
2601 N Broadway
(701) 234-2900

- Independent Laboratory
  Sanford North Fargo Clinic Lab
- Nurse Practitioner
  Kringlie, Jennifer L., CNP
- Physician Assistant
  Branca, Autumn, PA
  Peterson, Terry A., PA

North Dakota (cont.)
Fargo (cont.)

Sanford North Fargo Clinic
2601 Broadway N
(701) 234-2900

- Nurse Practitioner
  Fossum, Tricia M., CNP
  Kringlie, Jennifer L., CNP
- Physician Assistant
  Branca, Autumn, PA
  Peterson, Terry A., PA
- Psychology
  Hysjulien, Cheryl, PSYD

Sanford Orthopedics Sports Medicine
2301 25th St S Ste A
(701) 237-9712

- Physician Assistant
  Brown, Amanda, PA
  Crabill, James R., PA
  Diers, Shara J., PA
  Hellman, Jason, PA
  McGregor, Michael J., PA
  Meier, Nicole, PA
  Stavenger, Christopher, PA
  Stompro, Gregory P., PA
  Voth, Joshua, PA

Sanford Orthopedics Sports Medicine
2301 S 25th St Ste A
(701) 237-9712

- Physician Assistant
  Brown, Amanda, PA
  Crabill, James R., PA
  Diers, Shara J., PA
  Harry, Eric, PA
  Hellman, Jason, PA
  Johnson, Kami, PA
  McGregor, Michael J., PA
  Meier, Nicole, PA
  Noteboom, Kurt, PA
  Reinholz, Teresa, PA
  Stavenger, Christopher, PA
  Stompro, Gregory P., PA
  Voth, Joshua, PA

Sanford Pharmacy Broadway
737 Broadway N
(701) 234-2416

- Home Infusion
  Sanford Pharmacy Broadway

North Dakota (cont.)
Fargo (cont.)

Sanford Pharmacy Broadway (cont.)

- Home Medical Equipment
  Sanford Pharmacy Broadway

Sanford Pharmacy Mills Avenue
801 Broadway North
(701) 234-2398

- Home Medical Equipment
  Sanford Pharmacy Mills Avenue

Sanford Professional Building
100 4th St S
(701) 234-3100

- Licensed Professional Clinical Counselor
  Christianson, Alice, LPCC
  Heim, Kathy J., LPCC
  Woodbury, Kara B., LPCC
- Licensed Registered Dietitian
  Meyer, Elizabeth Ann G., LRD
- Nurse Practitioner
  Cushing, Anne G., CNP
- Psychiatric Nurse
  Cameron, Kathryn M., CNS
  Johnson, Lucy M., CNS
  Roerig, Deborah B., CNS
- Psychology
  Anady, Kara, PSYD
  Corneliussen, Stephanie, PSYD
  Kadlec, Kelly E., EDD
  Lahaise, Kim T., PHD
  Moser, Richard J., PHD
  Myers, Tricia C., PHD
  Preussler, Rebecca S., PSYD
  Revland, Paul, PHD
  Stone, Kenneth J., PSYD
  Sturgill, Danial, PHD
  Swan-Kremeier, Lorraine, PHD
  Tupa, David J., PHD
  Ulven, Jon, PHD
  Wenstrom, Timothy A., PSYD
  Wonderlich, Stephen A., PHD

Sanford Professional Building
100 4th St S
(701) 234-3100

- Licensed Professional Clinical Counselor
  Christianson, Alice, LPCC
  Heim, Kathy J., LPCC
  Woodbury, Kara B., LPCC

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING ANCILLARY PROVIDERS

Sanford Professional Building (cont.)

- Licensed Registered Dietitian
  Meyer, Elizabeth Ann G., LRD
- Nurse Practitioner
  Cushing, Anne G., CNP
  Peterson, Lindsey, CNP
- Psychiatric Nurse
  Cameron, Kathryn M., CNS
  Johnson, Lucy M., CNS
  Roerig, Deborah B., CNS
- Psychology
  Anady, Kara, PSYD
  Biebl, Sara, PHD
  Brower Breitwieser, Carrie, PHD
  Corneliussen, Stephanie, PSYD
  Hysjulien, Cheryl, PSYD
  Kadlec, Kelly E., EDD
  Lahaise, Kim T., PHD
  Maley, Robyn, PSYD
  Moser, Richard J., PHD
  Myers, Tricia C., PHD
  Preussler, Rebecca S., PSYD
  Revland, Paul, PHD
  Stone, Kenneth J., PSYD
  Sturgill, Danial, PHD
  Swan-Kremeier, Lorraine, PHD
  Tupa, David J., PHD
  Ulven, Jon, PHD
  Wenstrom, Timothy A., PSYD
  Wonderlich, Stephen A., PHD

Sanford Reproductive Medicine Clinic
1111 Harwood Dr
(701) 234-2700

- Certified Registered Nurse Anesthetist
  Gross, Brenda M., CRNA
- Nurse Practitioner
  Lee, Erin, FNP

Sanford Reproductive Medicine Clinic
1111 Harwood Dr
(701) 234-2700

- Certified Registered Nurse Anesthetist
  Gross, Brenda M., CRNA
- Nurse Practitioner
  Lee, Erin, FNP

Sanford Roger Maris Cancer Center
820 4th St N
(701) 234-6161

- Licensed Registered Dietitian
  Barts, Sarah, LRD
  Helleen, Jennifer L., LRD
- Nurse Practitioner
  Hofland, Susan K., CNP
  Kozojed, Mia, FNP
  Suder, Jana, CNP
  Swenson, Leah K., CNP
  Wolf, Lorelei A., CNP
- Physician Assistant
  Kirkeby, Kathy A., PA
  Welle, Erin, PA

Sanford Roger Maris Cancer Center
820 4th St N
(701) 234-6161

- Licensed Registered Dietitian
  Barts, Sarah, LRD
  Helleen, Jennifer L., LRD
- Nurse Practitioner
  Hofland, Susan K., CNP
  Kozojed, Mia, FNP
  Kreis, Rebecca, CNP
  Suder, Jana, CNP
  Swenson, Leah K., CNP
  Wolf, Lorelei A., CNP
- Physician Assistant
  Kirkeby, Kathy A., PA
  Welle, Erin, PA

Sanford South University
1720 University Dr S
(701) 234-2000

- Certified Diabetic Educator
  Bosch, Ryan T., CDE
- Certified Registered Nurse Anesthetist
  Abrahamson, Nicole, CRNA
  Adams, Julie A., CRNA
  Balvitsch, Deanna M., CRNA
  Baumeister, Ann M., CRNA
  Bjornstad, Mark, CRNA
  Blaze, Jodee, CRNA
  Boe, Julie, CRNA
  Cannon, Sharon R., CRNA
  Carr, Michael, CRNA

Sanford South University (cont.)

- Certified Registered Nurse Anesthetist (continued)
  Coulter, Casie, CRNA
  Currie, Michael, CRNA
  Dallman, Megan, CRNA
  Diederick, Lee, CRNA
  Diehl, Margaret, CRNA
  Errett, Bruce I., CRNA
  Fines, Michelle L., CRNA
  Flom, Adrianne, CRNA
  Greene, Susan G., CRNA
  Gross, Brenda M., CRNA
  Hilscher Decker, Tara, CRNA
  Hoganson, Tammy, CRNA
  Holman, Amy, CRNA
  Holte, Ralph, CRNA
  Holzer, Tonya, CRNA
  Huber, Jason P., CRNA
  Kleven, Lori K., CRNA
  Kostecki, Karen, CRNA
  Krupich, Mary E., CRNA
  Lee, Carol M., CRNA
  Marsh, Todd M., CRNA
  Mathiason, Kurt, CRNA
  Mattern, Travis J., CRNA
  McNeally, Shawn L., CRNA
  Meier, Raymond S., CRNA
  Moser, Kent, CRNA
  Mund, Steven, CRNA
  Nygaard, Lynette, CRNA
  Rasmussen, Tami O., CRNA
  Reuter, Patric, CRNA
  Schauer, Summer, CRNA
  Schreiber, Charlene, CRNA
  Selch, Lenae, CRNA
  Senn, Laurie, CRNA
  Smogard, Wayne, CRNA
  Stahl, Heidi, CRNA
  Stenehjem, Jenny A., CRNA
  Stevenson, James, CRNA
  Tapia-Zegarra, Janet, CRNA
  Torpen, S Michelle, CRNA
  Triepke, Sheri, CRNA
  Underdahl, Todd, CRNA
  Vaagen, Roger, CRNA
  Vanmatre, Melissa, CRNA
  Vincent, Matthew, CRNA
  Watson, Erik, CRNA
  Zarling, Jeffrey W., CRNA

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING ANCILLARY PROVIDERS

Sanford South University (cont.)

- Independent Laboratory
  Sanford South University Campus/Lab
- Licensed Addiction Counselor-Chemical Dependency
  Christianson, Alice, LAC
- Licensed Professional Clinical Counselor
  Dokken, Julie, LPCC
  Groslie, Dawn L., LPCC
- Licensed Registered Dietitian
  Wichman, Robin A., LRD
- Nurse Practitioner
  Breidenbach, Terry, FNP
  Hestbeck, Amy, CNP
  Kary, Shelby, FNP
  Kringlie, Jennifer L., CNP
  Swenson, Leah K., CNP
  Ulmer, Tosha F., CNP
- Physician Assistant
  Branca, Autumn, PA
  Brekken, Marie L., PA
  Reinholz, Teresa, PA
- Psychiatric Nurse
  Cameron, Kathryn M., CNS
  Johnson, Lucy M., CNS
- Psychology
  Bauste, Larry G., PHD
  Revland, Paul, PHD

Sanford South University
1720 University Dr S
(701) 234-2000

- Certified Diabetic Educator
  Bosch, Ryan T., CDE
- Certified Registered Nurse Anesthetist
  Abrahamson, Nicole, CRNA
  Adams, Julie A., CRNA
  Balvitsch, Deanna M., CRNA
  Baumeister, Ann M., CRNA
  Bialas, Jedd, CRNA
  Bjornstad, Mark, CRNA
  Blaze, Jodee, CRNA
  Boe, Julie, CRNA
  Cannon, Sharon R., CRNA
  Carr, Michael, CRNA
  Chathams, Cody, CRNA
  Coulter, Casie, CRNA

North Dakota (cont.)
Fargo (cont.)

Sanford South University (cont.)

- Certified Registered Nurse Anesthetist (continued)
  Cross, Jennifer, CRNA
  Currie, Michael, CRNA
  Dallman, Megan, CRNA
  Devaney, Stephen, CRNA
  Diederick, Lee, CRNA
  Diehl, Margaret, CRNA
  Errett, Bruce I., CRNA
  Fines, Michelle L., CRNA
  Flom, Adrianne, CRNA
  Greene, Susan G., CRNA
  Gross, Brenda M., CRNA
  Herbrandson, Jeremy, CRNA
  Hilscher Decker, Tara, CRNA
  Hoganson, Tammy, CRNA
  Holman, Amy, CRNA
  Holte, Ralph, CRNA
  Holzer, Tonya, CRNA
  Huber, Jason P., CRNA
  Johnson, Leif, CRNA
  Kleven, Lori K., CRNA
  Kostecki, Karen, CRNA
  Krupich, Mary E., CRNA
  Lauer, Leanna, CRNA
  Lee, Carol M., CRNA
  Lemnus-Elias, Dana, CRNA
  Marsh, Todd M., CRNA
  Mathiason, Kurt, CRNA
  Mattern, Travis J., CRNA
  McNeally, Shawn L., CRNA
  Meier, Raymond S., CRNA
  Moser, Kent, CRNA
  Mund, Steven, CRNA
  Nygaard, Lynette, CRNA
  Rasmussen, Tami O., CRNA
  Reuter, Patric, CRNA
  Schauer, Summer, CRNA
  Schreiber, Charlene, CRNA
  Selch, Lenae, CRNA
  Senn, Laurie, CRNA
  Smogard, Wayne, CRNA
  Son, Irina, CRNA
  Stahl, Heidi, CRNA
  Stenehjem, Jenny A., CRNA
  Stevenson, James, CRNA
  Szczepanski, Amber L., CRNA
  Tapia-Zegarra, Janet, CRNA
  Torpen, S Michelle, CRNA

North Dakota (cont.)
Fargo (cont.)

Sanford South University (cont.)

- Certified Registered Nurse Anesthetist (continued)
  Triepke, Sheri, CRNA
  Underdahl, Todd, CRNA
  Vaagen, Roger, CRNA
  Vanmatre, Melissa, CRNA
  Vincent, Matthew, CRNA
  Watson, Erik, CRNA
  Wick, Twyla, CRNA
  Woitzel, Ashley, CRNA
  Zarling, Jeffrey W., CRNA
- Licensed Addiction Counselor-Chemical Dependency
  Christianson, Alice, LAC
- Licensed Professional Clinical Counselor
  Dokken, Julie, LPCC
  Groslie, Dawn L., LPCC
  Heim, Kathy J., LPCC
  Woodbury, Kara B., LPCC
- Licensed Registered Dietitian
  Hass, Naomi, LRD
  Kittelson, Brad W., LRD
  Wichman, Robin A., LRD
- Nurse Practitioner
  Blickensderfer, Rhonda K., CNP
  Breidenbach, Terry, FNP
  Crawford, Melissa A., FNP
  Hestbeck, Amy, CNP
  Kary, Shelby, FNP
  Kringlie, Jennifer L., CNP
  Pfennig, Gregory, FNP
  Swenson, Leah K., CNP
  Ulmer, Tosha F., CNP
- Physician Assistant
  Branca, Autumn, PA
  Brekken, Marie L., PA
  Clarke, Paula K., PA
  Jones, Corwin A., PA
  Kauffman, Russell A., PA
  Reinholz, Teresa, PA
- Psychiatric Nurse
  Cameron, Kathryn M., CNS
  Johnson, Lucy M., CNS
  Moraghan, Kathleen, CNS
- Psychology
  Bauste, Larry G., PHD
  Revland, Paul, PHD

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING ANCILLARY PROVIDERS

Sanford Southpointe Clinic
2400 32nd Ave S
(701) 234-8800

- Certified Diabetic Educator
  Bosch, Ryan T., CDE
  Klocke, Janet D., CDE
  Levitt, Helen S., CDE
- Independent Laboratory
  Sanford Southpointe Clinic Lab
- Licensed Professional Clinical Counselor
  Christianson, Alice, LPCC
  Woodbury, Kara B., LPCC
- Licensed Registered Dietitian
  Herrick, Kelsey R., LRD
  Kadrmas, Lisa M., LRD
  Krueger, Maren A., LRD
  Olson, Katherine S., LRD
  Tehven, Kathy J., LRD
- Nurse Practitioner
  Brekke, Brooke, CNP
  Hoffmann, Jennifer, FNP
  Kringlie, Jennifer L., CNP
  Lundeen, Tina M., CNP
  Mears, Julie, CNP
  Montplaisir, Pamela J., FNP
  Skatvold, Linda K., CNP
  Teske, Victoria R., CNP
  Turman, Ranelle I., CNP
- Physician Assistant
  Brandt, Christine, PA
  Brown, Amanda, PA
  Carr, Kristen, PA
  Christensen, Melissa, PA
  Fisher, Jennifer, PA
  Hellman, Jason, PA
  Jones, Corwin A., PA
  Kringlie, Cassandra, PA
  Meier, Nicole, PA
  Stegmiller, Dana L., PA
  Stompro, Gregory P., PA
  Tesch, Yan, PA
- Psychology
  Christianson, Kenneth E., PHD
  Ulven, Jon, PHD

North Dakota (cont.)
Fargo (cont.)

Sanford Southpointe Clinic
2400 32nd Ave S
(701) 234-8800

- Certified Diabetic Educator
  Bosch, Ryan T., CDE
  Cavalier, Susan K., CDE
  Essary, Shirley A., CDE
  Klocke, Janet D., CDE
  Levitt, Helen S., CDE
  Schaan, Peggy, CDE
- Licensed Professional Clinical Counselor
  Christianson, Alice, LPCC
  Woodbury, Kara B., LPCC
- Licensed Registered Dietitian
  Bartholomay, Linda, LRD
  Goetz, Jennifer S., LRD
  Hass, Naomi, LRD
  Haugen, Andrea J., LRD
  Herrick, Kelsey R., LRD
  Kadrmas, Lisa M., LRD
  Krueger, Maren A., LRD
  Meyer, Elizabeth Ann G., LRD
  Moe, Barbara J., LRD
  Nagel, Joan L., LRD
  Olson, Katherine S., LRD
  Tehven, Kathy J., LRD
  Williams, Michelle D., LRD
- Nurse Practitioner
  Brekke, Brooke, CNP
  Carlson, Kari, CNP
  Cross, Cheri, CNP
  Hoban, Alissa, CNP
  Hoffmann, Jennifer, FNP
  Koenig, Cynthia J., CNP
  Kringlie, Jennifer L., CNP
  Lundeen, Tina M., CNP
  Mears, Julie, CNP
  Montplaisir, Pamela J., FNP
  Skatvold, Linda K., CNP
  Teske, Victoria R., CNP
  Turman, Ranelle I., CNP
- Physician Assistant
  Branca, Autumn, PA
  Brandt, Christine, PA
  Brown, Amanda, PA
  Carr, Kristen, PA
  Christensen, Melissa, PA
  Fisher, Jennifer, PA
  Hellman, Jason, PA

North Dakota (cont.)
Fargo (cont.)

Sanford Southpointe Clinic (cont.)

- Physician Assistant (continued)
  Jones, Corwin A., PA
  Kringlie, Cassandra, PA
  McGregor, Michael J., PA
  Meier, Nicole, PA
  Stegmiller, Dana L., PA
  Stompro, Gregory P., PA
  Tesch, Yan, PA
- Psychology
  Christianson, Kenneth E., PHD
  Ulven, Jon, PHD
  Zielke, Desiree, PHD

Sharehouse - Genesis
505 40th St S Ste B
(701) 478-8440

- Licensed Addiction Counselor-Chemical Dependency
  Cameron, Lisa, LAC
  Collins, David C., LAC
  Hoff, Miracle R., LAC
  Maynard, Joshua J., LAC
  Shirkey, Amie M., LAC
  Stinson, Roberta J., LAC
  Symons, James E., LAC
  Traen, Jeremy M., LAC
  Westall, Wanda L., LAC
  Winters, Patricia L., LAC
  Witteman, Anne K., LAC

Sharehouse Sisters Path
4219 9th Avenue SW
(701) 478-6562

- Nurse Practitioner
  Beare, Jeanne C., CNP

Sharehouse Transitions
505 40th St S Suite B
(701) 478-8440

- Licensed Addiction Counselor-Chemical Dependency
  Nelson, Roberta R., LAC
- Licensed Professional Clinical Counselor
  Belzer, Joy A., LPCC
- Licensed Professional Counselor/Therapist
  Nelson, Roberta R., LPCC

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING ANCILLARY PROVIDERS

Sharehouse Transitions (cont.)
- Psychology
  Hoff, Erica R., PHD

Sharehouse, Inc
4227 9th Ave SW
(701) 282-6561
- Licensed Addiction Counselor-Chemical Dependency
  Cameron, Lisa, LAC
  Collins, David C., LAC
  Hoff, Miracle R., LAC
  Maynard, Joshua J., LAC
  Nelson, Roberta R., LAC
  Shirkey, Amie M., LAC
  Stevens, Connie K., LAC
  Stinson, Roberta J., LAC
  Symons, James E., LAC
  Traen, Jeremy M., LAC
  Westall, Wanda L., LAC
  Winters, Patricia L., LAC
  Witteman, Anne K., LAC
- Licensed Professional Counselor/Therapist
  Nelson, Roberta R., LPCC
- Nurse Practitioner
  Beare, Jeanne C., CNP
- Psychology
  Hoff, Erica R., PHD

Sleep Easy Therapeutics, Inc
3003 32nd Ave S Ste 7c
(866) 921-2727
- Home Medical Equipment
  Sleepeasy Therapeutics, Inc

Southeast Human Service Center
2624 9th Ave S
(701) 298-4500
- Licensed Addiction Counselor-Chemical Dependency
  Berglund, Randi A., LAC
  Brown, Bradley T., LAC
  Christensen, James R., LAC
  Decker, Amanda R., LAC
  Erickson, Kylee R., LAC
  Fay, Julie M., LAC
  Holt, John W., LAC
  Illing, Stephen, LAC
  Kilen, Kristi, LAC

Southeast Human Service Center (cont.)
- Licensed Addiction Counselor-Chemical Dependency (continued)
  Mastel, Lisa A., LAC
  Nicoli, Sara L., LAC
  Peterson, Melody B., LAC
  Phillips, Sandra L., LAC
  Pytlik, Roberta J., LAC
  Richter, Daniel A., LAC
  Trautman, Tatum R., LAC
- Licensed Professional Clinical Counselor
  Cavett, Tarah E., LPCC
  Gjerde, Elizabeth A., LPCC
  Richter, Daniel A., LPCC
  Singh, Usha, LPCC
- Psychology
  Cross-Hillman, Nicole, PSYD
  Hein-Kolo, Nancy, PHD
  Moe, Brian K., PHD
  Quam, Sara D., PSYD
  Wegner, Krislea E., PHD
  Witte-Bakken, Jan K., PHD

Southeast Human Service Center Off Main
1122 1st Ave N
(701) 298-4650
- Licensed Addiction Counselor-Chemical Dependency
  Worner, Bruce, LAC
- Licensed Professional Clinical Counselor
  Singh, Usha, LPCC

Southpointe Pharmacy
2400 32nd Ave S
(701) 234-9912
- Home Medical Equipment
  Southpointe Pharmacy

St Sophies LLC
3201 33rd St S
(701) 365-4488
- Licensed Professional Clinical Counselor
  Hjelle, Catherine A., LPCC
- Psychology
  Schumacher, Kevin, PHD

Stellar Healthcare Ltd
827 28 St S Unit B
(701) 364-3660
- Nurse Practitioner
  Erdmann, Melissa, FNP
  Gibson, Beverly A., FNP

The Village Family Service Center
1201 25th St S
(701) 451-4900
- Licensed Professional Clinical Counselor
  Aasness, Mary K., LPCC
  Blumhardt, Rachel A., LPCC
  Fetting, Debberlee, LPCC
  Hillesheim, Nadine A., LPCC
  Jandro, Joanne M., LPCC
  Olson, Patricia J., LPCC
- Psychiatric Nurse
  Elbert, Rebecca E., CNS
- Psychology
  Juntunen, Cindy L., PHD

The Village Family Service Center
1200 Harwood Drive
(701) 451-4900
- Licensed Professional Clinical Counselor
  Blumhardt, Rachel A., LPCC

The Village Family Service Center dba First Step Recovery
409 7th St S
(701) 293-3384
- Licensed Addiction Counselor-Chemical Dependency
  Boren, Margaret E., LAC
  Erickson, Pamla J., LAC
  Knipfer, Jodee L., LAC
  Senn, Patti L., LAC
  Spooner, Kristie L., LAC
  Stenehjem-Titus, Peggy L., LAC

The Village Family Service Center dba First Step Recovery
3201 Fiechtner Drive
(701) 293-3384
- Licensed Addiction Counselor-Chemical Dependency
  Boren, Margaret E., LAC
  Clairmont Hansen, Mary, LAC

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING ANCILLARY PROVIDERS

North Dakota (cont.)
Fargo (cont.)

The Village Family Service Center dba First Step Recovery (cont.)
- Licensed Addiction Counselor-Chemical Dependency (continued)
  Erickson, Pamla J., LAC
  Knipfer, Jodee L., LAC
  Priebnow, Adam T., LAC
  Senn, Patti L., LAC
  Spooner, Kristie L., LAC
  Stenehjem-Titus, Peggy L., LAC

Thielges Therapy At Rosewood On Broadway
1351 N Broadway
(701) 277-7950
- Physical Therapy
  Joyce, Jonah D., PT
- Speech Therapy
  Kapitan, Kari J., ST

Urgent Medicine Associates, LLC
2829 S Univ Dr Ste 101
(701) 232-9000
- Nurse Practitioner
  Kjos, Janell K., FNP
  Ross, Cheryl, FNP
- Physician Assistant
  Brown, Wendy, PA
  Metzger, Jay, PA
  Swenson, Tiffany, PA

Valley Anesthesia Associates, PC
2301 S 25th St Ste K
(701) 234-1728
- Certified Registered Nurse Anesthetist
  Christensen, Tracie, CRNA
  Currier, Michelle E., CRNA
  Joachim, Kari L., CRNA
  Kurtz, Julie A., CRNA
  Pantzke, Traci L., CRNA
  Pender, Janel V., CRNA

Valley Christian Counseling Center
509 25th Ave N
(701) 232-6224
- Licensed Professional Clinical Counselor
  Watnemo, Larry J., LPCC
- Psychiatric Nurse
  Zaeske, Ellen L., CNS

North Dakota (cont.)
Fargo (cont.)

Valley Christian Counseling Center (cont.)
- Psychology
  Rottman, Lori S., PHD

Valley Medical Clinic, PC
300 Main Ave Suite 200
(701) 297-0817
- Physical Therapy
  Hall, Jeanne M., PT

Vosburg Counseling
2913 12th St S
(701) 235-2092
- Licensed Professional Clinical Counselor
  Vosburg, Doreen M., LPCC

Wegner Psychological and Therapeutic Services
3220 S 18th Street Ste 6
(701) 361-0433
- Psychology
  Quam, Sara D., PSYD
  Wegner, Krislea E., PHD

White Drug #39
1401 33rd St S
(701) 235-5511
- Pharmacy
  White Drug #39

White Drug #52
712 38 St NW Ste A
(701) 893-9217
- Home Medical Equipment
  White Drug #52

White Drug #68
4255 30th Ave S
(701) 478-8953
- Home Medical Equipment
  White Drug #68

Wilhelm, Vickie A., MS, LPCC Counseling
1111 Westrac Dr Ste 201
(701) 235-2003
- Licensed Professional Clinical Counselor
  Wilhelm, Vickie A., LPCC

North Dakota (cont.)
Fargo (cont.)

Winmar Diagnostics North Central Inc
2700 12th Ave S Ste B
(701) 235-7424
- Home Medical Equipment
  Winmar Diagnostics

Wolf, Beth, MS, CCC/SLP
3532 19th St S
(701) 293-3345
- Speech Therapy
  Wolf, Beth A., ST

Youth Works
317 S Univ Dr
(701) 232-8558
- Licensed Addiction Counselor-Chemical Dependency
  Erhardt, Timothy T., LAC

Finley

Integrated Therapy
652 130th Ave NE
(701) 789-1026
- Occupational Therapy
  Loen-Bakke, Sherry L., OT
- Physical/Occupational Therapist
  Loen-Bakke, Sherry L., OT

Sanford Health Finley Clinic
Hwy 200 E
(701) 524-1005
- Licensed Registered Dietitian
  Willyard, Susan R., LRD
- Nurse Practitioner
  Gustafson, Sarah, FNP
  Unterseher, Jeanne A., CNP
- Occupational Therapy
  Becker, Joan M., OT
- Physical Therapy
  Parker, Tami K., PT
- Physical/Occupational Therapist
  Becker, Joan M., OT
- Physician Assistant
  Bjore, Zachery, PA

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING ANCILLARY PROVIDERS

North Dakota (cont.)

Forman

Forman Drug
330 Main St S
(701) 724-6222

- Pharmacy
  Forman Drug

Sanford Health Forman Clinic
336 Main St
(701) 724-3221

- Licensed Registered Dietitian
  Erlandson, Barbara H., LRD
- Nurse Practitioner
  Gabriel, James, FNP
- Physical Therapy
  Lorenz, Ryan R., PT
  Mattson, Heather, PT
- Physician Assistant
  Hendricks, Larry A., PA
  Pfeifer, Loretta V., PA
  Reich, Brenda R., PA

Fort Totten

Early Childhood Tracking
416 2nd Ave N
(701) 766-1251

- Nurse Practitioner
  Hefta, Cheryl A., CNP

Spirit Lake Nation Recovery & Wellness Program
7102 Crow Hill Rd
(701) 766-4285

- Licensed Addiction Counselor-Chemical Dependency
  Spirit Lake Nation Recovery & Wellness Progr

Youth Healing & Wellness Center
816 3rd Ave N
(701) 766-4236

- Licensed Addiction Counselor-Chemical Dependency
  Duckwitz, Linda, LAC

Fort Yates

Fort Yates IHS
North River Rd
(701) 854-3831

North Dakota (cont.)

Fort Yates (cont.)

Fort Yates IHS (cont.)

- Certified Diabetic Educator
  Fort Yates/CDE
- Licensed Registered Dietitian
  Fort Yates/LRD
- Nurse Practitioner
  Fort Yates/CNP
- Psychology
  Fort Yates/PhD

Prairie Hearing Aid Center dba Grey Wolf Hearing Aid Service
9299 Hwy 24
(701) 471-1271

- Home Medical Equipment
  Prairie Hearing Aid Center dba Grey Wolf Hea

Gackle

Wishek Rural Health Clinic/Gackle
321 Main St
(701) 452-2364

- Nurse Practitioner
  Benson, Paulette, FNP
  Ketterling, Marcia R., FNP
- Physician Assistant
  Hauff, Rosemary, PA
  Kosiak, Maureen A., PA
  Rau, Kay M., PA

Garrison

Chase Pharmacy Inc
21 N Main St
(701) 463-2242

- Home Medical Equipment
  Chase Pharmacy Inc

Garrison Family Clinic
437 3rd Ave SE
(701) 463-2245

- Nurse Practitioner
  Schroeder, Dara, FNP
- Physician Assistant
  Larson, Kathleen A., PA

Garrison Mem Hospital
407 3rd Ave SE
(701) 463-6514

- Physical Therapy
  Gradin, Denise M., PT
  Olson, Kurt D., PT

North Dakota (cont.)

Garrison (cont.)

Garrison Mem Hospital (cont.)

- Physical Therapy (continued)
  Reinholt, Ann E., PT

Trinity Community Clinic Garrison
131 N Main St
(701) 463-2626

- Nurse Practitioner
  Rime, Hedi J., FNP

Glen Ullin

Bogerosa Inc
602 Ash Ave
(701) 426-7095

- Physical Therapy
  Bogert, Mark, PT

Glen Ullin Drug
113 S Main St
(701) 348-3303

- Home Medical Equipment
  Glen Ullin Drug

Glen Ullin Family Medical Center
602 Ash Ave E
(701) 348-9175

- Nurse Practitioner
  Duppong, Linda E., CNP
  Rivinius, Carey E., CNP
- Physician Assistant
  Dent, Tyesha, PA
  Duppong, Linda E., PA

Grafton

Christian Unity Hospital, Corp. dba Grafton Family Clinic
164 West 13th Street
(701) 352-2000

- Certified Diabetic Educator
  Myers, Jane M., CDE
- Licensed Registered Dietitian
  Myers, Jane M., LRD
- Nurse Practitioner
  Anderson, Miriam, CNP
  Trontvet, Sheila, CNP

Grafton Drug
38 E 12th St
(701) 352-0831

- Home Medical Equipment

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING ANCILLARY PROVIDERS

North Dakota (cont.)
Grafton (cont.)

Grafton Drug (cont.)
- Home Medical Equipment (continued)
  Kb Pharmacy Pllc dba Grafton Drug

Life Skills and Transition Center
701 W 6th St
(701) 352-4200
- Home Medical Equipment
  Developmental Center
- Licensed Registered Dietitian
  Schroeder, Brenda K., LRD
- Occupational Therapy
  Dusek, Mary K., OT
  Gemmill, Julie, OT
- Physical Therapy
  Holm, Karena (Karey) L., PT
  Olson, Donald N., PT
  Olson, Kimberly D., PT
- Speech Therapy
  Callahan, Julie A., ST

Mab Counseling Services
47 West 6th Street
(701) 352-1667
- Licensed Addiction Counselor-Chemical Dependency
  Bryan, Michael A., LAC

Migrant Health Services Inc
701 West 6th St
(701) 352-4048
- Nurse Practitioner
  Stabo, Kristin M., FNP
  Vigen, Rebecca A., CNP

Quinn Dui/Mip Counseling
47 W 6 St
(701) 352-9622
- Licensed Addiction Counselor-Chemical Dependency
  Quinn, Pamela J., LAC

Quotable Kids Speech & Language Clinic PLLC
819 Hill Ave
(701) 739-5437
- Speech Therapy
  Ziegelmann, Kristin M., ST

North Dakota (cont.)
Grafton (cont.)

Unity Medical Center
164 W 13th St
(701) 352-1620
- Certified Diabetic Educator
  Myers, Jane M., CDE
- Certified Registered Nurse Anesthetist
  Shefland, Raymond C., CRNA
  Trontvet, Kent A., CRNA
- Licensed Registered Dietitian
  Myers, Jane M., LRD
- Nurse Practitioner
  Anderson, Miriam, CNP
  Ketterling, Marcia R., FNP
  Mattson, Jaime R., FNP
  Trontvet, Sheila, CNP

White Drug #65
544 Hill Ave
(701) 352-1760
- Home Medical Equipment
  White Drug #65

Grand Forks

Achieve Therapy, LLC
3035 Demers Ave
(701) 746-6694
- Home Medical Equipment
  Achieve Therapy LLC
- Physical Therapy
  Bolek, Megan E., PT
  Chine, Nicole J., PT
  Holte, Laurie M., PT
  Schindler, Gary D., PT
  Walsh, Heather A., PT

Achieve Therapy, LLC
1425 S Columbia Rd
(701) 746-8374
- Home Medical Equipment
  Achieve Therapy LLC
- Physical Therapy
  Bolek, Megan E., PT
  Carson, Thomas L., PT
  Chine, Nicole J., PT
  Lafreniere, Clifford W., PT
  Palmgren, Annette L., PT
  Schindler, Gary D., PT
  Walsh, Heather A., PT
  Wilcox, Lacey J., PT

North Dakota (cont.)
Grand Forks (cont.)

Agassiz Associates, PLLC
1407 24th Ave S Ste 520
(701) 746-6336
- Licensed Addiction Counselor-Chemical Dependency
  Grimsley, Tanner E., LAC
  Walton, Karin L., LAC
- Licensed Professional Clinical Counselor
  Walton, Karin L., LPCC
- Physician Assistant
  Anvinson, Nicole C., PA
  Osowski, Paula M., PA
- Psychology
  Achilleoudes, Helen, PHD
  Green, Rebecca M., PHD
  Jensen, Heidi K., PHD
  McBride, Rosanne B., PHD

Altru At Choice
4401 S 11th St
(701) 732-7620
- Nurse Practitioner
  Mason, Ann L., FNP
- Physical Therapy
  Wehe, Bradley C., PT

Altru Cancer Center
960 S Columbia Rd
(701) 780-5400
- Nurse Practitioner
  Devine Roberts, Jacqueline R., CNP
  Dudgeon, Amanda J., FNP
  Nygaard, Anne M., CNP

Altru Clinic Pharmacy
1000 S Columbia Rd
(701) 772-4875
- Home Medical Equipment
  Altru Clinic Pharmacy

Altru Family Medicine Center
1380 S Columbia Rd
(701) 795-2000
- Nurse Practitioner
  Engel, Pamela L., CNP
  Shimek, Heather M., FNP

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING ANCILLARY PROVIDERS

Altru Family Medicine Residency
725 Hamline St
(701) 780-6800

- Certified Diabetic Educator
  Westereng, Rebecca, CDE
- Home Medical Equipment
  Grand Forks Family Medicine Residency Pharma
- Licensed Registered Dietitian
  Westereng, Rebecca, LRD
- Psychology
  Haugen, Erin N., PHD

Altru Hospital
1200 S Columbia Rd
(701) 780-5000

- Certified Registered Nurse Anesthetist
  Adams, Darla J., CRNA
  Boen, Chad E., CRNA
  Bolduc, Julie A., CRNA
  Branby, Michael D., CRNA
  Bratrud, Jessica A., CRNA
  Buettner, Kevin C., CRNA
  Carter, Scott B., CRNA
  Cole, Ronald J., CRNA
  Fontaine, Scott A., CRNA
  Hagert, Karen L., CRNA
  Hanson, Dane C., CRNA
  Harms, Bethany A., CRNA
  Harms, Kendall J., CRNA
  Harrison, Jennifer A., CRNA
  Hill, Deborah E., CRNA
  Hoverson, Lynne M., CRNA
  Koland, Nathan, CRNA
  Krueger, Curtis C., CRNA
  Macleod, Mary C., CRNA
  McBride, Elizabeth A., CRNA
  Nuelle, David B., CRNA
  Osowski, Lynn, CRNA
  Reynolds-Cooley, Lynn, CRNA
  Schmiedeberg, Timothy R., CRNA
  Secord, Melissa D., CRNA
  Siemers, Trent E., CRNA
  Slominski, Vera J., CRNA
  Sperle, James K., CRNA
  Spivey, Matthew J., CRNA
  Strand, James E., CRNA
  Wolfgram, Alicia M., CRNA
  Wray, Garth E., CRNA

Altru Hospital (cont.)

- Clinical Nurse Specialist
  Senti, Jeanine L., CNS
- Licensed Registered Dietitian
  Larson, Tara K., LRD
  Mankie, Wendy A., LRD
- Nurse Practitioner
  Anderson, Kari L., FNP
  Boger, Estella A., CNP
  Cook, Gina M., FNP
  Kropp, Michael C., FNP
  Lalonde, Theresa, CNP
  Leach, Kelly, FNP
  Salberg, Rachel M., CNP
  Shimek, Heather M., FNP
  Zwilling, Jana G., FNP
- Physical Therapy
  Grams-Dennis, Vivian, PT
- Physician Assistant
  Drown, Paul G., PA
  Hanson, Brenda K., PA
  Oliver, Sarah A., PA
  Wright, Shellie D., PA
- Psychology
  Haugen, Erin N., PHD
  Muse, Shyla L., PHD

Altru Main Clinic
1000 S Columbia Rd
(701) 780-5000

- Audiology
  Brandt, Mackensie M., AUD
  Green, Mandi R., AUD
  Thorson, Megan J., AUD
- Certified Diabetic Educator
  Hampton, Arlene, CDE
  Mutzenberger, Sara B., CDE
- Certified Registered Nurse Anesthetist
  Adams, Darla J., CRNA
  Boen, Chad E., CRNA
  Bolduc, Julie A., CRNA
  Branby, Michael D., CRNA
  Buettner, Kevin C., CRNA
  Carter, Scott B., CRNA
  Cole, Ronald J., CRNA
  Fontaine, Scott A., CRNA
  Hagert, Karen L., CRNA
  Hanson, Dane C., CRNA
  Harms, Bethany A., CRNA

Altru Main Clinic (cont.)

- Certified Registered Nurse Anesthetist (continued)
  Harms, Kendall J., CRNA
  Harrison, Jennifer A., CRNA
  Hill, Deborah E., CRNA
  Hoverson, Lynne M., CRNA
  Koland, Nathan, CRNA
  Krueger, Curtis C., CRNA
  Macleod, Mary C., CRNA
  McBride, Elizabeth A., CRNA
  Nuelle, David B., CRNA
  Osowski, Lynn, CRNA
  Reynolds-Cooley, Lynn, CRNA
  Schmiedeberg, Timothy R., CRNA
  Secord, Melissa D., CRNA
  Siemers, Trent E., CRNA
  Slominski, Vera J., CRNA
  Sperle, James K., CRNA
  Spivey, Matthew J., CRNA
  Strand, James E., CRNA
  Wray, Garth E., CRNA
- Clinical Nurse Specialist
  Senti, Jeanine L., CNS
- Licensed Registered Dietitian
  Dahl, Jean Marie C., LRD
  Doebler, Ellen A., LRD
  Haugen, Jennifer M., LRD
  Holum, Lynn M., LRD
  Streitz, Susan M., LRD
  Warner-Noreen, Danika A., LRD
- Nurse Practitioner
  Boger, Estella A., CNP
  Cook, Gina M., FNP
  Cooley, Michelle A., FNP
  Dorman, Seth T., FNP
  Ferry, Rhea J., CNP
  Hanson, Erica R., CNP
  Huso, Joan, FNP
  Hutton, Cora Len M., CNP
  Kaiser, Stephanie A., FNP
  Kotrba, Jessica M., FNP
  Krogstad, Mary Beth, CNP
  Krogstad, Sheri L., FNP
  Kropp, Michael C., FNP
  Lauzon, Christine S., CNP
  Leach, Kelly, FNP
  Macki, Kamrin L., CNP
  Mason, Ann L., FNP

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING ANCILLARY PROVIDERS

Altru Main Clinic (cont.)

- Nurse Practitioner (continued)
  Meyer, Lana J., FNP
  Olson, Wade A., FNP
  Riendeau, Andrea M., FNP
  Rustvang, Daniel R., CNP
  Rustvang, Pamela A., CNP
  Salberg, Rachel M., CNP
  Schmaltz, Debra F., CNP
  Shimek, Heather M., FNP
  Sperle, Roni L., FNP
  Spicer, Laura J., CNP
  Stauss Carlson, Kelly J., CNP
  Verkuehlen, Jennifer A., FNP
  Zwilling, Jana G., FNP
- Occupational Therapy
  Adams, Jill E., OT
  Brown-Mikkelson, Jolene, OT
  Cherney, Alison, OT
  Cooley, Monica N., OT
  Estad, Jennifer L., OT
  Fabian, Kristina M., OT
  Hellman, Janaye M., OT
  Jensen, Stacy J., OT
  Kliner, Ashley L., OT
  Lauer, Wanda K., OT
  Lehr, Emilee J., OT
  Nordstrom, Brandon K., OT
  Rosenquist, Jenna R., OT
  Schmaltz, Randi D., OT
  Schuster, Kristina M., OT
  Schwenzfeier, Margo J., OT
  Thiele, Paige E., OT
  Thompson, Lori M., OT
  Voth, Stacie L., OT
  Warren, Jacob B., OT
  Willis, Nicole R., OT
  Wirth, Jessica M., OT
- Physical Therapy
  Auch, Andrea M., PT
  Aymond, Peggi J., PT
  Barstad, Stephanie J., PT
  Beck, Jonathan, PT
  Breitbach, Rhonda L., PT
  Bucher, Kayla J., PT
  Burris, Amanda J., PT
  Capp, Kirby J., PT
  Elbert, Amy J., PT
  Elke, Kayla M., PT
  Failing, Rachel A., PT

Altru Main Clinic (cont.)

- Physical Therapy (continued)
  Gorder, Allison, PT
  Gulka, Amanda, PT
  Haarstad, Sarah K., PT
  Halcrow, Steven K., PT
  Halstenson, Jill K., PT
  Haney, Jeffrey S., PT
  Hanson, Erica H., PT
  Johnson, Brittany R., PT
  Knudson, Sandra L., PT
  Kuchan, Anthony J., PT
  Kuchar, Marleigh M., PT
  Letvin, Hayley J., PT
  Lommen, Amy B., PT
  Malott, Kathryn E., PT
  Marti, Leah M., PT
  Miller, Brandi J., PT
  O'Brien, Kevin L., PT
  Olson, Elizabeth J., PT
  Panos, Heidi L., PT
  Panos, Steven I., PT
  Pederson, Jennifer A., PT
  Roemmich, Suzanne R., PT
  Slocum, William I., PT
  Stromme, Ryan C., PT
  Suedel, Adam J., PT
  Voigt, Jacquelyn M., PT
  Voth, Wayne P., PT
  Wehe, Marcia A., PT
  Wessman, Erin L., PT
  Wise, Weston P., PT
- Physical/Occupational Therapist
  Estad, Jennifer L., OT
  Jensen, Stacy J., OT
  Wirth, Jessica M., OT
- Physician Assistant
  Adams, Allison, PA
  Bauduin, Tamra S., PA
  Gorder, Vicki L., PA
  Hankey, Jill R., PA
  Kosmatka, Erika J., PA
  Linnen, Katherine M., PA
  Wright, Shellie D., PA
- Psychology
  Muse, Shyla L., PHD
  Yeager, Catherine, PHD
- Speech Therapy
  Anderson, Cassie N., ST
  Anderson, Heidi, ST

Altru Main Clinic (cont.)

- Speech Therapy (continued)
  Anhorn, Jennifer J., ST
  Brown, Heidi M., ST
  Kjono, Chelsey, ST
  McEntee, Samantha, ST
  Miesbauer, Hannah K., ST
  Miskavige, Lindsey G., ST
  Newhouse, Jennifer L., ST
  Smith, Jenna S., ST
  Spicer, Michelle R., ST

Altru Professional Center
4440 S Washington St
(701) 780-5000

- Nurse Practitioner
  Engel, Pamela L., CNP
  Macki, Kamrin L., CNP
  Shimek, Heather M., FNP
- Physician Assistant
  Hanson, Brenda K., PA
  Pearson, Roberta J., PA

Altru Rehabilitation Center
1300 S Columbia Rd
(701) 780-2311

- Nurse Practitioner
  Olson, Wade A., FNP
  Stabo, Kristin M., FNP
  Zwilling, Jana G., FNP
- Occupational Therapy
  Brown-Mikkelson, Jolene, OT
  Davis, Rachel A., OT
  Hagen-Johnson, Heidi J., OT
  Hoff, Bonita, OT
  Jensen, Stacy J., OT
  Loscheider, Jane A., OT
  Mackenzie, Travis E., OT
  Ophaug, Lynn R., OT
  Pauley-Colter, Brenda H., OT
  Purcell, Kristin M., OT
  Roed, Rhonda M., OT
  Storhaug, Jodie L., OT
  Suedel, Stephanie A., OT
  Thibert, Heather A., OT
  Waind, Marsha A., OT
  Wavra, Jinell S., OT
  Welke, Kara, OT
- Physical Therapy
  Boese, Kari E., PT
  Boettner, Jodi R., PT

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING ANCILLARY PROVIDERS

Altru Rehabilitation Center (cont.)

- Physical Therapy (continued)
  Bommersbach, Holly M., PT
  Carter, Patricia R., PT
  Decker, Schawnn M., PT
  Delacruz, Angela D., PT
  Due, Joan K., PT
  Elbert, Amy J., PT
  Grams-Dennis, Vivian, PT
  Grant-Gooden, Suzanne, PT
  Hoffarth, Jennifer A., PT
  Jurgens, Theresa A., PT
  Koerber, Shelley M., PT
  McDonald, Heidi K., PT
  McMillan, Becky S., PT
  Putbrese, Anne G., PT
  Riley, Maureen L., PT
  Rood, Stephen M., PT
  Strand, Jessica M., PT
  Ternes, Tamara M., PT
  Wehe, Bradley C., PT
- Physical/Occupational Therapist
  Brown-Mikkelson, Jolene, OT
  Davis, Rachel A., OT
  Hagen-Johnson, Heidi J., OT
  Hoff, Bonita, OT
  Jensen, Stacy J., OT
  Loscheider, Jane A., OT
  Mackenzie, Travis E., OT
  Pauley-Colter, Brenda H., OT
  Purcell, Kristin M., OT
  Storhaug, Jodie L., OT
  Suedel, Stephanie A., OT
  Thibert, Heather A., OT
  Waind, Marsha A., OT
  Wavra, Jinell S., OT
  Welke, Kara, OT
- Physician Assistant
  Elkins, William E., PA
  Salveson, Angela K., PA
  Silvernail, Rio D., PA

Altru Specialty Center
4500 S Washington St
(701) 732-7000

- Certified Registered Nurse Anesthetist
  Adams, Darla J., CRNA
  Boen, Chad E., CRNA
  Bolduc, Julie A., CRNA
  Branby, Michael D., CRNA

Altru Specialty Center (cont.)

- Certified Registered Nurse Anesthetist (continued)
  Bratrud, Jessica A., CRNA
  Buettner, Kevin C., CRNA
  Carter, Scott B., CRNA
  Cole, Ronald J., CRNA
  Fontaine, Scott A., CRNA
  Hagert, Karen L., CRNA
  Hanson, Dane C., CRNA
  Harms, Bethany A., CRNA
  Harms, Kendall J., CRNA
  Harrison, Jennifer A., CRNA
  Hill, Deborah E., CRNA
  Hoverson, Lynne M., CRNA
  Koland, Nathan, CRNA
  Krueger, Curtis C., CRNA
  Macleod, Mary C., CRNA
  McBride, Elizabeth A., CRNA
  Nuelle, David B., CRNA
  Osowski, Lynn, CRNA
  Reynolds-Cooley, Lynn, CRNA
  Schmiedeberg, Timothy R., CRNA
  Secord, Melissa D., CRNA
  Siemers, Trent E., CRNA
  Slominski, Vera J., CRNA
  Sperle, James K., CRNA
  Spivey, Matthew J., CRNA
  Strand, James E., CRNA
  Wolfgram, Alicia M., CRNA
  Wray, Garth E., CRNA
- Nurse Practitioner
  Olson, Wade A., FNP
  Stabo, Kristin M., FNP
- Physician Assistant
  Elkins, William E., PA
  Salveson, Angela K., PA
  Silvernail, Rio D., PA

Altru Specialty Services dba Yorhom Medical Essentials
4350 S Washington St
(701) 780-2436

- Home Medical Equipment
  Altru Specialty Services dba Yorhom Medical

Altru Specialty Services Inc dba Yorhom Medical Essentials
1200 S Columbia Rd
(701) 780-5827

- Home Medical Equipment
  Altru Specialty Services dba Yorhom Medical

Altru Specialty Services Inc dba Yorhom Medical Essentials
1200 S Columbia Rd
(701) 780-5827

- Home Infusion
  Altru Specialty Services dba Yorhom Medical

Assessment and Therapy Associates of Grand Forks
725 Hamline St
(701) 780-6821

- Licensed Professional Clinical Counselor
  Enblom, Kristen E., LPCC
  Gamliel, Tiram, LPCC
- Psychology
  Ertelt, Troy W., PHD
  Haugen, Erin N., PHD
  Jackson, David, PHD
  Muse, Shyla L., PHD
  Petros, Thomas V., PHD
  Schmutzer, Peter A., PHD
  Welke, Charles K., PHD
  Yeager, Catherine, PHD

Assessment and Therapy Associates of Grand Forks
2755 10th Ave N
(701) 780-6821

- Psychology
  Boulton-Olson, Christine, PHD
  Schmutzer, Peter A., PHD

Audiocare Hearing Center
2812 17 Ave S Ste E
(701) 746-8421

- Home Medical Equipment
  Audiocare Hearing Center

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING ANCILLARY PROVIDERS

Aurora Medical Park Laboratory, LLC
1451 44th Ave S
Unit A
(701) 732-2200

- Independent Laboratory
  Aurora Medical Park Laboratory, LLC

Aurora Urgent Care
2650 32nd Ave S
Ste D
(701) 732-2710

- Nurse Practitioner
  Graves, Mark A., FNP
  McKinney, Bain L., FNP
  Royal, Natalie R., FNP
- Physician Assistant
  Adams, Jeffrey S., PA
  Bergs, Kara R., PA
  Hager, Dustin T., PA
  Solberg, Julie S., PA

Center For Psychiatric Care
1451 44th Ave S Unit A
(701) 732-2500

- Certified Registered Nurse Anesthetist
  Andruski, Heidi L., CRNA

Center For Psychological and Educational Assessment
210 Montgomery Hall
(701) 777-3260

- Psychology
  Petros, Thomas V., PHD

Center For Self Growth & Renewal, PC
1551 28 Ave S Ste C
(701) 746-4400

- Licensed Professional Clinical Counselor
  Reiten Eylands, Mary, LPCC
  Serna, Carrie L., LPCC
- Psychology
  Brustad, Laurie A., PHD

Dakota Therapy Center, LLC
600 Demers Ave Ste 301
(701) 746-9341

- Psychology
  Cheney, Angela R., PHD

Drake Counseling Services, Inc
311 4 St S Ste 106
(701) 746-8414

- Licensed Addiction Counselor-Chemical Dependency
  Bostyan, Eva L., LAC
  Loyland, Vicki J., LAC

Family Institute PC
2100 S Columbia Rd
Ste 202
(701) 772-1588

- Psychology
  Adams Larsen, Margo A., PHD
  Bradley, April, PHD
  Deyoung, Kyle, PHD
  Kotschwar, Jeanine E., PHD
  Legerski, John P., PHD
  Looby, Alison, PHD
  Miller, Joseph C., PHD
  Moe, Brian K., PHD
  Navarro, Rachel L., PHD
  Paulson, Michael D., PHD
  Rowan, Leslie A., PHD
  Wettersten, Kara, PHD
  Whitcomb, David H., PHD

Fire Audiological Services PC
121 N Washington St
(701) 787-5862

- Audiology
  Fire, Kevin M., MS
  Gowan, Jennifer L., AUD

Grand Forks Anesthesia Service Inc
3035 Demers Ave
(701) 738-4240

- Certified Registered Nurse Anesthetist
  Andruski, Heidi L., CRNA
  Bazey, Lori, CRNA
  Channel, Eileen M., CRNA
  Hanson, Dane C., CRNA
  Hoverson, Lynne M., CRNA
  Johnson, Amber, CRNA
  Krueger, Curtis C., CRNA
  Siemers, Trent E., CRNA

Independent Communication Therapy
901 S 11th St
(701) 740-5740

- Speech Therapy
  Woolsey, Diane K., ST

Jeffrey C Gregory, PhD PC dba Gregory Psychology Solutions
1407 24th Ave S
(701) 293-7477

- Psychology
  Gregory, Jeffrey C., PHD

Laidlaw Psychological Services, PC
3301 30th Ave S #101
(701) 780-9700

- Psychology
  Laidlaw, Robert A., PHD

Lincare Inc
2100 S Columbia Rd
Ste 110
(701) 775-3965

- Home Medical Equipment
  Lincare Inc

Lipp Carlson Lommen & Witucki
2808 17th Ave S
(701) 746-8376

- Psychology
  Dannewitz, Holly J., PHD
  King, Brenda J., PHD
  Lipp, Leland H., PHD
  Lommen, David P., PHD
  Tait, Alison N., PHD
  Whalen, Jonathan E., PHD
  Witucki, Marty P., PHD

Lipp, Carlson, Lommen & Witucki
1380 S Columbia Rd
(701) 746-8376

- Psychology
  Lommen, David P., PHD
  Tait, Alison N., PHD
  Whalen, Jonathan E., PHD

Little Miracles, Inc
2951 34th St S
(701) 772-3851

- Occupational Therapy
  Hennes, Laura L., OT
  Kieffer, Nicole M., OT

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING ANCILLARY PROVIDERS

Little Miracles, Inc (cont.)
- Occupational Therapy (continued)
  Rios, Maile, OT
- Physical Therapy
  Cole, Karen L., PT
  Holm, Karena (Karey) L., PT
  Sayler, Tammy L., PT
- Speech Therapy
  Kocourek, Erin R., ST
  Sporbert, Jessica A., ST
  Thompson, Heidi J., ST
  Woolsey, Diane K., ST

Little Miracles, Inc
2200 Library Circle
(701) 757-2155
- Occupational Therapy
  Hennes, Laura L., OT
  Kieffer, Nicole M., OT
- Physical Therapy
  Cole, Karen L., PT
  Holm, Karena (Karey) L., PT
  Sayler, Tammy L., PT
- Speech Therapy
  Kocourek, Erin R., ST
  Sporbert, Jessica A., ST
  Thompson, Heidi J., ST
  Woolsey, Diane K., ST

Midwest Neuropsychology, PLLC
3301 30th Ave S #101
(701) 780-9700
- Psychology
  Thompson, Susan J., PHD

Mindfulness Based Therapies, Pain and Chronic Illness
1133b S Columbia Rd
Ste 3
(218) 779-3513
- Psychology
  Sloan, Lora L., PHD

Miracle Ear
2650 32nd Ave S Ste M
(701) 772-5313
- Home Medical Equipment
  Miracle Ear

Northeast Human Service Center
151 S 4th St Ste 401
(701) 795-3000
- Licensed Addiction Counselor-Chemical Dependency
  Davis, Deborah L., LAC
  Fisher, Marlys F., LAC
  Grimsley, Tanner E., LAC
  Jones, Angela M., LAC
  Juarez, Guadalupe, LAC
  Kuntz, Kristi L., LAC
  McMillan, Cynthia R., LAC
  Miller, Kim M., LAC
  Mohagen, Lori C., LAC
  Olson, Neil I., LAC
  Quinn, Pamela J., LAC
  Scott, David L., LAC
  Theisen, Jana, LAC
  White, Kelly, LAC
- Licensed Professional Clinical Counselor
  Scott, David L., LPCC
  Shulind, Joan, LPCC
- Occupational Therapy
  Demars, Julie S., OT
  Littlejohn, Diane L., OT
- Psychiatric Nurse
  Gagner-Tjellesen, Desiree J., CNS
- Psychology
  Decker, Greg, PHD
  Jagow France, Desiree A., PHD
  Newberry, Donald E., PHD

Northern Valley Obstetrics & Gynecology
2810 17th Ave S
(701) 738-2004
- Nurse Midwives
  Hemler, Elizabeth A., CNM
- Nurse Practitioner
  Detke, Kathryn R., CNP

Northland Christian Counseling Center
2315 Library Circle
(701) 795-8550
- Licensed Addiction Counselor-Chemical Dependency
  Scott, David L., LAC

Northland Christian Counseling Center (cont.)
- Licensed Addiction Counselor-Chemical Dependency (continued)
  Torgerson, Carol A., LAC
- Licensed Professional Clinical Counselor
  Klug, Marna J., LPCC
  Scott, David L., LPCC
  Seay, Stephen H., LPCC

Northland Christian Counseling Center
308 5th St S
(701) 795-8550
- Licensed Addiction Counselor-Chemical Dependency
  Scott, David L., LAC
- Licensed Professional Clinical Counselor
  Scott, David L., LPCC

Northland Family Physicians, LLC dba Aurora Clinic
1451 44th Ave S Unit F
(701) 732-2700
- Nurse Practitioner
  Barlow, Steven L., FNP
  Graves, Mark A., FNP
  McKinney, Bain L., FNP
  Royal, Natalie R., FNP
- Physician Assistant
  Adams, Jeffrey S., PA
  Bergs, Kara R., PA
  Solberg, Julie S., PA

Quotable Kids Speech Language Clinic
121 N Washington St
(701) 739-5437
- Speech Therapy
  Fitzgerald, Kristy A., ST
  Volk, Andrea, ST

Rasmussen, Maxine, LPCC
1407 24th Ave S Ste 315
(701) 772-8013
- Licensed Professional Clinical Counselor
  Rasmussen, Maxine K., LPCC

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING ANCILLARY PROVIDERS

North Dakota (cont.)
Grand Forks (cont.)

Rehab Authority
701 Demers Ave
(701) 772-2200

- Occupational Therapy
  Berntson, Mary Lynn, OT
- Physical Therapy
  Burcham, Tyler, PT
  Hayes, Kirk J., PT
  Rustebakke, Kathryn G., PT

Russell, Sue A, PhD P.C.
628 7th Ave S Ste B
(701) 746-8737

- Psychology
  Russell, Sue A., PHD

Sleep Easy Therapeutics Ltd dba Grand Forks Cpap Store
3301 30th Ave S Ste 103
(701) 757-4801

- Home Medical Equipment
  Sleep Easy Therapeutics Ltd dba Grand Forks

Sweet Dreams Anesthesia PLLC
1451 44th Ave S #A
(701) 746-7441

- Certified Registered Nurse Anesthetist
  Andruski, Heidi L., CRNA
  Bazey, Lori, CRNA
  Johnson, Amber, CRNA

The Village Family Service Center
1726 S Washington Street
Ste 33a
(701) 746-4584

- Psychology
  Edwards, Sarah R., PHD
  Juntunen, Cindy L., PHD

Truyu Aesthetic Center
3165 Demers Ave
(701) 780-6219

- Nurse Practitioner
  Laframboise, Jennifer L., FNP
  Stauss Carlson, Kelly J., CNP
  Suda, Amy L., FNP
  Tinkler, Jennifer A., FNP

North Dakota (cont.)
Grand Forks (cont.)

UND Center For Sports Medicine
2751 2nd Ave N Stop 9013
(701) 777-4845

- Physical Therapy
  Tracy, Robin C., PT
  Ziegler, Cathy J., PT

UND Speech Language & Hearing Clinic
Montgomery Hall Room 101
290 Centennial Dr Stop 8040
(701) 777-3728

- Audiology
  Madden, John D., MS
- Speech Therapy
  Biberdorf, Peggy D., ST
  Detienne, Shauna L., ST
  Robinson, Sarah A., ST
  Weisz, Shari M., ST

UND Student Health Service
Mccannel Hall Room 100
2891 2nd Ave N Stop 9038
(701) 777-4500

- Licensed Registered Dietitian
  Wittmann, Karina L., LRD
- Nurse Practitioner
  Freeland, Bonnie L., CNP
  Hjeldness, Marlene K., CNP
  Kary, Shelby, FNP
- Physician Assistant
  Larson, Annette C., PA
  McGee, Megan F., PA
- Psychiatric Nurse
  Olson, Stacie L., PNU

Valley Bone and Joint Clinic
3035 Demers Ave
(701) 746-7521

- Home Medical Equipment
  Valley Bone & Joint Clinic
- Nurse Practitioner
  Carson, Katherine M., FNP

Valley Health
360 Division Ave Ste 200
(701) 775-4251

- Nurse Midwives
  Shogren, Maridee D., CNM
- Nurse Practitioner
  Cicha, Nannette L., CNP
  Detke, Kathryn R., CNP

North Dakota (cont.)
Grand Forks (cont.)

Valley Health (cont.)

- Nurse Practitioner (continued)
  Halverson, Gail R., CNP
  Spicer, Laura J., CNP

Viscito Family Medicine, PLLC
2750 26th St S Ste C
(701) 757-1999

- Physician Assistant
  Solberg, Julie S., PA

Wakefield Hearing Center
2514 S Washington St
(701) 746-7000

- Home Medical Equipment
  Wakefield Hearing Center

Walls Medicine Center
708 S Washington St
(701) 746-0498

- Home Medical Equipment
  Walls Medicine Center

White Drug #9
2475 32 Ave S Ste 1
(701) 775-9937

- Home Medical Equipment
  Thrifty White Drug #9

Gwinner

Mobility Plus Rehabilitation
11 North Main
(701) 678-2244

- Occupational Therapy
  Aberle, Carmen, OT
  Dahl, Robert L., OT
  Shearer, Treena, OT
- Physical Therapy
  Long, Charles A., PT
  Lorenz, Ryan R., PT
  Shanenko, Paul, PT
  White, Brittany L., PT
- Physical/Occupational Therapist
  Aberle, Carmen, OT
  Shearer, Treena, OT

Sanford Health Gwinner Clinic
69 Highway 13 W
(701) 678-2263

- Nurse Practitioner
  Gabriel, James, FNP

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING ANCILLARY PROVIDERS

North Dakota (cont.)
Gwinner (cont.)

Sanford Health Gwinner Clinic (cont.)
- Physician Assistant
  Hendricks, Larry A., PA
  Pfeifer, Loretta V., PA
  Reich, Brenda R., PA
  Siedschlag, Kathleen L., PA

Hankinson

Hankinson Drug
323 Main Ave South
(701) 242-7414
- Home Medical Equipment
  Hankinson Drug

Orthopedic & Sports Physical Therapy Inc
112 5th St SW
(701) 242-7323
- Occupational Therapy
  Holubok, Gregory D., OT
- Physical Therapy
  Eggiman, Anthony C., PT
  Krause-Roberts, Shawn M., PT
  Paulson, Tera D., PT
- Speech Therapy
  Hoffert, April, ST

Harvey

Blooming Prairie Assessment & Therapy Center PC
1008 Adams Ave
(701) 662-8255
- Psychology
  Kenney, Sara K., PSYD
  Normandin, Sherman, PHD

Central Dakota Family Physicians
922 Lincoln Ave
(701) 324-4856
- Home Medical Equipment
  Central Dakota Family Physicians
- Nurse Practitioner
  Hagemeister, Erin K., FNP
- Physician Assistant
  Keller, Julie A., PA

North Dakota (cont.)
Harvey (cont.)

Harvey Clinic PC
110 9th St E
(701) 324-2396
- Nurse Practitioner
  Mertz, Deborah, FNP
  Neumiller, Lisa M., FNP

Rural Mental Health Consortium
325 E Brewster St
(701) 324-4651
- Psychiatric Nurse
  Sartain, Cheryl A., PNU

St Aloisius Medical Center
325 E Brewster St
(701) 324-4651
- Certified Registered Nurse Anesthetist
  Berentson, Kari, CRNA
  Bossert, Melanie A., CRNA
  Bouma, Kelly M., CRNA
  Braaflat, Tyler D., CRNA
  Brandt, Kraig W., CRNA
  Brown, Terri R., CRNA
  Cederstrom, Luann, CRNA
  Daigle Bjerke, Adelle A., CRNA
  Foisy, Shannon R., CRNA
  Henjum, Jennifer K., CRNA
  Howe, Melinda A., CRNA
  Kelly, Karen J., CRNA
  Keniston, Dierdre V., CRNA
  Peterson, Renee P., CRNA
  Rist, Kari L., CRNA
  Simon, Jeffrey J., CRNA
  Stock, Terry L., CRNA
  Underdahl, Nicole A., CRNA
  Vibeto, Mark C., CRNA
  Wilson, Roni M., CRNA
  Woodland, Michael J., CRNA
  Zahn, Denise M., CRNA
- Licensed Registered Dietitian
  Mertz, Lanette A., LRD
- Nurse Practitioner
  Middleton, Debra L., FNP
  Thorson, Kim A., FNP

North Dakota (cont.)
Hazelton

Hazelton Clinic
343 Main St
(701) 782-4338
- Nurse Practitioner
  Grunefelder, Jacqueline M., FNP
  Moch, Paula M., FNP
- Physician Assistant
  Schatz, Alice, PA

Hazen

Sakakawea Clinic
510 8th Ave NE
(701) 748-7266
- Nurse Practitioner
  Czywczynski, Heather, FNP
  Doll, Sherri K., CNP
  Volk, Robert, FNP

Sakakawea Hazen Clinic
517 8th Ave NE
(701) 748-2256
- Nurse Practitioner
  Czywczynski, Heather, FNP
  Volk, Robert, FNP
- Physician Assistant
  Olson, Kayla L., PA

Sakakawea Medical Center
510 8th Ave NE
(701) 748-2225
- Certified Registered Nurse Anesthetist
  Ahneman, Jon, CRNA
  Miller, Carl B., CRNA
  Reems, Brenda, CRNA
  Sailer, Jill, CRNA
  Schwindt, Brian E., CRNA
- Nurse Practitioner
  Czywczynski, Heather, FNP
  Doll, Sherri K., CNP
  Volk, Robert, FNP
- Occupational Therapy
  Allmendinger, Kayla L., OT
- Physical Therapy
  Hetzler, Jennifer C., PT
  Huber, Dannette R., PT
  Knell, Bonnie L., PT
  Larson, Mary J., PT
  Miller, Nicholas J., PT

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING ANCILLARY PROVIDERS

North Dakota (cont.)
Hazen (cont.)

Sakakawea Medical Center (cont.)
- Physical/Occupational Therapist
  Allmendinger, Kayla L., OT

Hettinger

West River Health Services
1000 Highway 12
(701) 567-4561

- Certified Diabetic Educator
  Nudell, Linda M., CDE
  West, Barbara J., CDE
- Certified Registered Nurse Anesthetist
  Christensen, Randy L., CRNA
  Olson, David O., CRNA
  Schwindt, Brian E., CRNA
- Licensed Professional Clinical Counselor
  Jorgenson, Tara L., LPCC
- Licensed Registered Dietitian
  Nudell, Linda M., LRD
- Nurse Practitioner
  Harper, Darci J., CNP
  Hildebrandt-Folske, Carla J., CNP
  Hill, Lori A., CNP
  Jackson, Linette M., FNP
  Oase, Megan M., FNP
  Reiten, Elizabeth, FNP
  Wilson, Jodi L., FNP
- Physician Assistant
  Bergquist, Rose B., PA
  Bondell, Sheila, PA
  Cooper, Brian K., PA
  Mattis, Billie J., PA
  Moore, Jodi L., PA
  Vearrier, Tracy L., PA

West River Home Medical Services
1000 Highway 12
(701) 567-6086

- Home Medical Equipment
  West River Home Medical Services

White Drug #55
112 S Main St
(763) 513-4301

- Pharmacy
  White Drug #55

North Dakota (cont.)
Hillsboro

Hillsboro Rexall Drug
13 N Main
(701) 636-5231

- Pharmacy
  Hillsboro Rexall Drug

Sanford Health Hillsboro Clinic
315 E Caledonia Ave
(701) 636-5311

- Physician Assistant
  Hinkle, Stephanie, PA
  Owens, Ann, PA
- Psychiatric Nurse
  Cameron, Kathryn M., CNS

Jamestown

Addiction & Counseling Services
300 2nd Ave NE
(701) 252-5398

- Licensed Addiction Counselor-Chemical Dependency
  Cudmore Kramer, Shawn, LAC
  Monek, Martin D., LAC
  Peterson, Debra I., LAC
  Randall, Timothy L., LAC
- Psychology
  Shaleen, Lori A., PHD

Anne Carlsen Center
701 3rd Street NW
(701) 952-5142

- Nurse Practitioner
  Nygaard, Jessica R., FNP
- Occupational Therapy
  Colburn, Jeannine K., OT
  Eckstein, Andrea E., OT
  Eggl, Katie M., OT
  Fugleberg, M Beth, OT
  Lillejord, Connie J., OT
- Physical Therapy
  Lonnberg, Natalie E., PT
  Reis, Tammy V., PT
  Roaldson, Tara J., PT
  Rosencrans, Amanda R., PT
  Trautman, Whitney A., PT
- Speech Therapy
  Albrecht, Ann S., ST
  Coppin, Rachel I., ST
  Fisher, Lisa, ST
  Hanson, Joni E., ST

North Dakota (cont.)
Jamestown (cont.)

Anne Carlsen Center (cont.)
- Speech Therapy (continued)
  Lilleberg, Stephanie K., ST
  Murillo, Flora, ST
  Nelson, Stephanie J., ST
  Roecker, Amanda M., ST
  Schauer, Laurie, ST
  Schmidt, Lonna J., ST

Central Valley Health District dba Central Valley Family Pla
122 2nd Street NW
(701) 252-8130

- Nurse Practitioner
  Dardis, Patricia J., FNP
  Mello, Bethany J., CNP

Essentia Health Jamestown Clinic
2430 20th St SW
(701) 253-5300

- Audiology
  Almer, Marin A., AUD
  Frisk (Movchan), Cari L., AUD
- Certified Diabetic Educator
  Viger, Karen M., CDE
- Home Medical Equipment
  Essentia Health Jamestown/DME
- Licensed Registered Dietitian
  Musgrave, Larissa A., LRD
- Nurse Midwives
  Howell, Christa L., CNM
- Nurse Practitioner
  Bergs, Laura M., CNP
  Boeddeker, Spring A., FNP
  Busch, Tania, CNP
  French Baker, Karla, FNP
  Strobel, Amber D., FNP
  Wojcik, Susan E., CNP
- Physician Assistant
  Hoffman, Leah, PA
  Huber, Amanda, PA
  Larson, Bruce D., PA
- Psychology
  Hauge, Gregory A., PHD

Fuher, Jessie, LPCC
619 8th Ave SE
(701) 252-9838

- Licensed Professional Clinical Counselor
  Fuher, Jessie K., LPCC

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING ANCILLARY PROVIDERS

North Dakota (cont.)
Jamestown (cont.)

Jamestown Counseling Center
300 2nd Ave NE Ste 215
(701) 952-7400

- Licensed Professional Clinical Counselor
  Lipetzky, Jennifer L., LPCC

Jamestown Regional Medical Center
2422 20th St SW
(701) 252-1050

- Physician Assistant
  Dugan, Angela, PA
  Gross, Vantreia M., PA

Jamestown Regional Medical Center /ER Physicians
2422 20th St SW
(701) 252-1050

- Audiology
  Matthiesen, Susan, MS
- Licensed Registered Dietitian
  Johnston, Brittany A., LRD

Jamestown Regional Medical Center Jamestown Hospital
2422 20th St SW
(701) 252-1050

- Certified Registered Nurse Anesthetist
  Andruski, Heidi L., CRNA
  Block, Teresa, CRNA
  Ellingson, Lee A., CRNA
  Errett, Bruce I., CRNA
  Metzger, James M., CRNA
  Moser, Marco, CRNA
  Peterson, Renee P., CRNA
  Schott, Andrew L., CRNA

Life Seasons Counseling, PLLC
302 Second Ave SE
(701) 678-4800

- Licensed Professional Clinical Counselor
  Elhard, Deborah J., LPCC

Matthys, Gary A., MD, Plc
904 5th Ave NE
(701) 241-9300

- Physician Assistant
  McDonald, Sean D., PA

North Dakota (cont.)
Jamestown (cont.)

Prairie Counseling
3952 Hwy 281 SE
(701) 252-8939

- Licensed Addiction Counselor-Chemical Dependency
  Wicks, Kerry W., LAC
- Licensed Professional Clinical Counselor
  Wicks, Kerry W., LPCC

Precision Diagnostic Services, Inc
2422 20 St SW
(701) 234-9667

- Independent Laboratory
  Precision Diagonstic Services Inc

Sanford Health 2nd Ave Clinic
300 2nd Ave NE
(701) 251-6000

- Audiology
  Schauer, Douglas D., AUD
- Nurse Practitioner
  Beach, Sueellen T., FNP
  Falk, Kara A., FNP
  Kreiter, Candace R., FNP
  Nygaard, Jessica R., FNP
  Schneider, Chelsey J., FNP
  Wiles, Amanda, CNP
- Physical Therapy
  Sorenson, Becky J., PT
- Physician Assistant
  Murphy, Bertha, PA
- Psychology
  Collins, John, PHD

Sanford Health Hearing Center
300 2nd Ave NE
(701) 252-4100

- Audiology
  Arneson-Thilmony, Debra J., AUD
  Boutilier, Amanda D., AUD
  Mann, Krystal L., AUD
  Mattheis Anderson, Amy M., AUD
  Ness, Brady J., AUD
- Home Medical Equipment
  Sanford Health Hearing Center
- Physician Assistant
  Hennessy, Jill M., PA

North Dakota (cont.)
Jamestown (cont.)

Sanford Health Jamestown Clinic
904 5th Ave NE
(701) 253-4000

- Certified Diabetic Educator
  Getz, Janel A., CDE
  Hager, Wendy L., CDE
- Licensed Registered Dietitian
  Erickson, Gracia, LRD
  Krueger, Maren A., LRD
- Nurse Practitioner
  Beach, Sueellen T., FNP
  Falk, Kara A., FNP
  Levee, Linda C., CNP
  Nygaard, Jessica R., FNP
  Schneider, Chelsey J., FNP
  Wiles, Amanda, CNP
- Physical Therapy
  Burgess, Jacy L., PT
  Burgess, Michel T., PT
- Physician Assistant
  Murphy, Bertha, PA
  Walter, Patrick, PA
- Psychology
  Collins, John, PHD
  Wilson, Joel R., PHD

Sanford Health Jamestown Clinic
904 5th Ave NE
(701) 253-4000

- Licensed Registered Dietitian
  Krueger, Maren A., LRD

Sanford Healthcare Accessories Jamestown
1023 10th St SE
(701) 251-1331

- Home Infusion
  Sanford Healthcare Accessories Jamestown
- Home Medical Equipment
  Sanford Healthcare Accessories Jamestown

South Central Human Service Center
520 3rd St NW
(701) 253-6300

- Clinical Nurse Specialist
  Moos, Patricia J., CNS

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING ANCILLARY PROVIDERS

North Dakota (cont.)
Jamestown (cont.)

South Central Human Service Center (cont.)
- Licensed Addiction Counselor-Chemical Dependency
  Brown, Bradley T., LAC
  Cudmore Kramer, Shawn, LAC
  Hallsten, Lindsey A., LAC
  Hunt, Geoffrey A., LAC
  Marsh, Billy J., LAC
  Motter, Elsie A., LAC
  Selle, Brooke J., LAC
  Woodard, Eric T., LAC
- Licensed Professional Clinical Counselor
  Listul, David, LPCC
  Morton, Jennifer, LPCC
  Schagunn Lere, Cara L., LPCC
- Nurse Practitioner
  Dardis, Patricia J., FNP
  Laxdal, Sharon A., CNP
- Psychology
  Coombs, Lincoln D., PHD
  Cramer, Daniel P., PHD
  Hunt, Stacey L., PSYD
  Lepeltier, Marie, PHD
  Nitschke, Jennifer D., PSYD

T and K Speech Language Services
300 2nd Ave NE
Ste 215a
(701) 252-6066
- Speech Therapy
  Carroll, Tristy L., ST
  Lorenz, Kristy L., ST

The Medicine Shoppe
703 1st Ave S
(701) 252-3002
- Home Medical Equipment
  The Medicine Shoppe

White Drug #15
320 10 St SE
(701) 252-5980
- Home Medical Equipment
  White Drug #15

North Dakota (cont.)
Jamestown (cont.)

White Drug #45
310 1st Ave S
(701) 251-1432
- Home Medical Equipment
  White Drug #45

White Drug #73
213 1st Ave N
(701) 252-3181
- Home Medical Equipment
  White Drug #73

Kenmare

Kenmare Health Center
307 1st Ave NW
(701) 385-4283
- Nurse Practitioner
  Hochhausen, Heidi, FNP
  Lautt, Heather J., FNP
  Olson, Jody G., FNP
  Simmons, Sheila, CNP
  Stanley, Ruth A., FNP
- Physical Therapy
  Pabian, Jackie L., PT

Kenmare Rural Mental Health Consortium
317 1st Ave NW
(701) 385-4344
- Nurse Practitioner
  Weathers, Vickie K., CNP

Killdeer

Killdeer Pharmacy
400 Central Ave S
(701) 764-5093
- Home Medical Equipment
  Killdeer Pharmacy

St Josephs Hospital/Killdeer Clinic
150 Central Ave N
(701) 764-5822
- Nurse Practitioner
  Jepson, Lori A., CNP
  Medford, Jessica L., FNP

North Dakota (cont.)
Kulm

Wishek Rural Health Clinic/Kulm
4 First Ave SE
(701) 647-2345
- Nurse Practitioner
  Benson, Paulette, FNP
  Ketterling, Marcia R., FNP
- Physician Assistant
  Hauff, Rosemary, PA
  Kosiak, Maureen A., PA
  Rau, Kay M., PA

Lakota

Lakota Drug
117 Main St
(701) 247-2781
- Home Medical Equipment
  Lakota Drug & Gift

Lamoure

Apex Physical Therapy and Wellness Center, PC
203 7th St SE Ste 2
(701) 883-5611
- Physical Therapy
  Ihry Hodem, Kameron J., PT

Lamoure Drug Store
100 1st Ave SW
(701) 883-5339
- Home Medical Equipment
  Lamoure Drug Store, Inc

Sanford Health Lamoure Clinic
100 1st Ave SW Ste 2
(701) 883-5048
- Licensed Registered Dietitian
  Erlandson, Barbara H., LRD
- Nurse Practitioner
  Gabriel, James, FNP
  Kaiser, Karen A., CNP
  Long, Lillian, FNP
- Physical Therapy
  Lorenz, Ryan R., PT
  Mattson, Heather, PT
- Physician Assistant
  Hack, Vicki L., PA
  Hendricks, Larry A., PA
  Reich, Brenda R., PA
  Siedschlag, Kathleen L., PA

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING ANCILLARY PROVIDERS

North Dakota (cont.)
Lamoure (cont.)

Thielges Therapy, Inc
119 Main St SE Ste A
(701) 277-7950

- Occupational Therapy
  Young, Shannon, OT
- Physical Therapy
  Anderson, Jason, PT
  Joyce, Jonah D., PT
  Thielges, Toby L., PT
- Physical/Occupational Therapist
  Young, Shannon, OT

Langdon

Blooming Prairie Assessment & Therapy Center PC
721 11 Ave
(701) 662-8255

- Psychology
  Kenney, Sara K., PSYD
  Normandin, Sherman, PHD

Cavalier County Memorial Hospital
909 2nd St
(701) 256-6120

- Certified Diabetic Educator
  Swanson, Brenna J., CDE
- Certified Registered Nurse Anesthetist
  Myers, Michael R., CRNA
  Shefland, Raymond C., CRNA
  Trontvet, Kent A., CRNA
- Licensed Registered Dietitian
  Swanson, Brenna J., LRD
- Nurse Practitioner
  Barlow, Steven L., FNP
  Sillers, Elizabeth M., CNP
  Skaar, Danielle, FNP
  Witzel, Gwen L., CNP
- Physical Therapy
  Badding, Sarah J., PT
  Kartes, Joan M., PT
- Physician Assistant
  Adams, Jeffrey S., PA

CCMH Clinic
901 2nd St
(701) 256-6120

- Nurse Practitioner
  Barlow, Steven L., FNP
  Sillers, Elizabeth M., CNP
  Skaar, Danielle, FNP

North Dakota (cont.)
Langdon (cont.)

CCMH Clinic (cont.)

- Nurse Practitioner (continued)
  Witzel, Gwen L., CNP
- Physician Assistant
  Adams, Jeffrey S., PA

Langdon Community Drug
805 3rd St
(701) 256-3330

- Home Medical Equipment
  Langdon Community Drug

Larimore

Larimore Drug & Gift
203 Towner Ave
(701) 343-2461

- Home Medical Equipment
  Larimore Drug & Gift

Valley Community Health Center Larimore
607 Towner Ave
(701) 343-6418

- Nurse Midwives
  Shogren, Maridee D., CNM
- Nurse Practitioner
  Harsell, Christine, CNP
  Nuelle, Bethann M., FNP
  Solberg, Roberta, FNP
  Vigen, Rebecca A., CNP

Lidgerwood

Sanford Health Lidgerwood Clinic
21 Wiley Ave S
(701) 538-4189

- Nurse Practitioner
  Gabriel, James, FNP
- Physical Therapy
  Lorenz, Ryan R., PT
  Mattson, Heather, PT
- Physician Assistant
  Buchholz, Brent M., PA
  Hendricks, Larry A., PA
  Pfeifer, Loretta V., PA
  Reich, Brenda R., PA

North Dakota (cont.)
Lignite

Lignite Clinic
115 Main St
(701) 933-2220

- Nurse Practitioner
  Warren, Ginger P., FNP

Linton

Linton Hospital
518 N Broadway
(701) 254-4511

- Certified Registered Nurse Anesthetist
  Mettler, Daniel W., CRNA

Linton Medical Center
511 Elm Ave
(701) 254-4531

- Licensed Registered Dietitian
  Imdieke, Catherine B., LRD
- Nurse Practitioner
  Grunefelder, Jacqueline M., FNP
  Moch, Paula M., FNP
- Physician Assistant
  Biel, Ardalia, PA
  Schatz, Alice, PA

Linton Medical Center
511 Elm Ave
(701) 254-4531

- Nurse Practitioner
  Grunefelder, Jacqueline M., FNP
- Physician Assistant
  Biel, Ardalia, PA
  Schatz, Alice, PA

Linton Medical Center
511 Elm Ave
(701) 254-4531

- Nurse Practitioner
  Grunefelder, Jacqueline M., FNP
- Physician Assistant
  Biel, Ardalia, PA
  Schatz, Alice, PA

White Drug
121 N Broadway
(701) 254-5432

- Home Medical Equipment
  White Drug #71

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING ANCILLARY PROVIDERS

North Dakota (cont.)
Lisbon

Essentia Health Lisbon Clinic
819 Main St
(701) 683-4134

- Certified Diabetic Educator
  Viger, Karen M., CDE
- Licensed Registered Dietitian
  Musgrave, Larissa A., LRD
  Rather, Sandra J., LRD
- Nurse Midwives
  Howell, Christa L., CNM
- Nurse Practitioner
  Anderson, Elisha D., FNP
- Physician Assistant
  Larson, Bruce D., PA

Family Medical Clinic, PC
10 9th Ave E
(701) 683-4711

- Nurse Practitioner
  Kelsen, Meredith K., CNP
  Pfaff, Kelli, CNP
- Physician Assistant
  Tanner, Katie L., PA
  Walton, Stacey M., PA

Lisbon Area Health Service-ER
905 Main St
(701) 683-6400

- Nurse Practitioner
  Kelsen, Meredith K., CNP
- Physician Assistant
  Larson, Bruce D., PA
  Tanner, Katie L., PA
  Walton, Stacey M., PA

Lisbon Area Health Services
905 Main St
(701) 683-6400

- Certified Registered Nurse Anesthetist
  Bakke, Amy J., CRNA
  Genereux, Heidi E., CRNA
  Kremer, Randall L., CRNA
  Splichal, Robert J., CRNA
- Licensed Registered Dietitian
  Erlandson, Barbara H., LRD
- Occupational Therapy
  Aberle, Carmen, OT
  Shearer, Treena, OT

North Dakota (cont.)
Lisbon (cont.)

Lisbon Area Health Services (cont.)

- Physical/Occupational Therapist
  Aberle, Carmen, OT
  Shearer, Treena, OT

Lisbon Area Health Services
905 Main St
(701) 683-6400

- Nurse Practitioner
  Jacobson, Kevin S., FNP

Sanford Health Lisbon Clinic
102 10th Ave W
(701) 683-2214

- Nurse Practitioner
  Gabriel, James, FNP
  Long, Lillian, FNP
- Physician Assistant
  Hendricks, Larry A., PA
  Reich, Brenda R., PA
  Siedschlag, Kathleen L., PA

Southeast Dakota Pharmacies, Inc. dba Sheyenne Valley Pharma
407 Main St
(701) 683-5282

- Home Medical Equipment
  Southeast Dakota Pharmacies, Inc.

White Drug
404 Main St
(701) 683-4691

- Home Medical Equipment
  White Drug #72

Maddock

Heart of America Johnson Clinic Maddock
301 Roosevelt Ave
(701) 438-2555

- Nurse Practitioner
  Mickelson, Barbara J., CNP
  Pagel-Trana- Duttenhef, Bobbie M., CNP
  Stahl, Andrea L., FNP
  Townsend, Cammy K., FNP
- Physician Assistant
  Hager, Dustin T., PA
  Weick, Keri L., PA

North Dakota (cont.)
Maddock (cont.)

White Drug #57
108 Central Ave
(701) 438-2567

- Home Medical Equipment
  White Drug #57

Mandan

Dakota Physical Therapy, PC
2004 Twin City Dr
(701) 667-0745

- Physical Therapy
  Bergan, April, PT
  Bergan, Chad M., PT
  Gietzen, Chris, PT

Dsj Enterprises LLC dba Aim Physical Therapy Clinic
101 Collins Ave Ste A
(701) 667-8778

- Physical Therapy
  Churchill, Stephen P., PT
  Fischer, Jonathan J., PT

Landsiedel, PLLC
1302 1st St NE
(701) 220-0479

- Nurse Practitioner
  Landsiedel, Julie, FNP

Prairie Assisted Living Services, LLC
2817 Waters Edge Lane SE
(701) 751-1307

- Nurse Practitioner
  Hogue-Kinahan, Janice K., FNP
  Rising, Cheryl D., FNP

Sanford East Mandan Clinic
102 Mandan Ave
(701) 667-5000

- Nurse Practitioner
  Nordmeyer, Courtney L., CNP

St Alexius Mandan Clinic North
2500 Sunset Drive NW
(701) 667-4600

- Nurse Practitioner
  Toman, Jean A., FNP
- Physician Assistant
  Renner, Cindy M., PA

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING ANCILLARY PROVIDERS

North Dakota (cont.)

Mandan (cont.)

The Medicine Shoppe
116 2 Ave NW
(701) 663-1151

- Home Medical Equipment
  Lbg Pharmacy dba The Medicine Shoppe

Thrifty White Drug #43
2600 Overlook Lane NW
(763) 513-4300

- Home Medical Equipment
  Thrifty White Drug #43

University Associates Sports & Orthopedic Specialists
101 Collins Ave Ste B
(701) 667-8700

- Physical Therapy
  Schulte, Robert A., PT

Zenker Physical Therapy
101 Collins Ave Ste B
(701) 667-8778

- Physical Therapy
  Zenker, Teejay, PT

Mayville

Sanford Mayville
600 1st St SE
(701) 786-4500

- Nurse Practitioner
  Unterseher, Jeanne A., CNP
- Physician Assistant
  Bjore, Zachery, PA
  Hinkle, Stephanie, PA

Sanford Mayville
600 1st Street SE
(701) 786-4500

- Nurse Practitioner
  Boeddeker, Spring A., FNP
  Gustafson, Sarah, FNP
  Kozojed, Mia, FNP
  Unterseher, Jeanne A., CNP
- Physician Assistant
  Bjore, Zachery, PA
  Braun, Lisa, PA
  Hinkle, Stephanie, PA
  Owens, Ann, PA
- Psychiatric Nurse
  Cameron, Kathryn M., CNS

North Dakota (cont.)

Mayville (cont.)

Sanford Medical Center Mayville
42 6th Ave SE
(701) 788-4437

- Licensed Registered Dietitian
  Willyard, Susan R., LRD

McClusky

Northland Community Health Center- McClusky
122 2nd St E
(701) 363-2296

- Nurse Practitioner
  Busch, Cassie F., CNP
  Goven, Jill R., CNP
  Green, Alain M., FNP
  Volk, Robert, FNP
- Physician Assistant
  Bartow, Shelley M., PA
  Jensen, Brian, PA
  Malzer, Christine M., PA

Washburn Family Clinic - McClusky
122 2 St E
(701) 363-2296

- Physical Therapy
  Hahn, Jason R., PT

McVille

Nelson County Health System Clinic
108 N Main St
(701) 322-4347

- Certified Diabetic Educator
  Getz, Janel A., CDE
- Licensed Registered Dietitian
  Getz, Janel A., LRD
- Nurse Practitioner
  Kelly, Darlene C., CNP
  Middleton, Debra L., FNP

Milnor

St Francis Healthcare Campus dba Milnor Clinic
401 Main St
(701) 427-5317

- Nurse Practitioner
  Myklebust, Kimberley D., FNP
  Rick, Brenda M., FNP

North Dakota (cont.)

Minot

April Wilson-Warren Npc,PLLC
315 Main St S Ste 301
(701) 838-1558

- Nurse Practitioner
  Wilson, April E., FNP

Berdahl, Linda, MS, LAC, Sap dba Cornerstone Addiction Servi
1705 4th Ave NW
(701) 839-0474

- Licensed Addiction Counselor-Chemical Dependency
  Berdahl, Linda A., LAC

Bob Hayes Addiction Services
1809 S Broadway Ste G
(701) 838-1422

- Licensed Addiction Counselor-Chemical Dependency
  Hayes, Bob M., LAC

Center For Family Medicine/Minot
1201 11th Ave SW
(701) 858-6700

- Licensed Registered Dietitian
  Schmidt, Megan C., LRD
- Nurse Practitioner
  Braasch, Terrilyn M., FNP
- Physician Assistant
  Kitzman, Marilyn A., PA
- Psychology
  Rickert, Julie A., PHD

Center For Mind & Body Wellness
1015 S Broadway Ste 37
(701) 852-3550

- Psychiatric Nurse
  Johnson, Deborah K., CNS

Clark, Thomas, PhD
2116 4th Ave NW
(701) 838-2442

- Psychology
  Clark, Thomas R., PHD

Communication Disorders Clinic
500 University Ave W
(701) 858-3030

- Audiology
  Froelich, Thomas M., MS

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING ANCILLARY PROVIDERS

Communication Disorders Clinic (cont.)
- Speech Therapy
  Beste Guldborg, Ann M., ST
  Gilson, Cheryl B., ST
  Hagen, Nadine, ST
  Harmon, Leisa H., ST
  Herzig, Melissa G., ST
  Holt, Erin M., ST
  Magnus, Lesley C., ST
  Roteliuk, Lisa M., ST
  Schroeder, Orlene L., ST
  Sorenson, Tricia L., ST

Dakota Boys Ranch
6301 19th Ave NW
(701) 839-7888
- Licensed Addiction Counselor-Chemical Dependency
  Waind, Melissa, LAC
  Wendt, Jamie L., LAC
- Licensed Professional Clinical Counselor
  Simonson, Boni M., LPCC
  Vetter, Sara J., LPCC
- Psychology
  Willert Jr, Meryl G., PHD

Dakota Family Services
6301 19th Ave NW
(701) 837-6508
- Licensed Professional Clinical Counselor
  Simonson, Boni M., LPCC
- Nurse Practitioner
  Uleberg, Tammy L., FNP
- Occupational Therapy
  Willert, Shea, OT
- Psychology
  Willert Jr, Meryl G., PHD

Eaton, Timothy, PhD
1705 4th Ave NW
(701) 839-0474
- Psychology
  Eaton, Timothy T., PHD

Edwards, Robert B LPCC
304 Burdick Expy W
(701) 833-8907
- Licensed Professional Clinical Counselor
  Edwards, Robert B., LPCC

First Choice Physical Therapy
2700 8th St NW
(701) 839-4102
- Home Medical Equipment
  First Choice Physical Therapy
- Physical Therapy
  Argent, Reed J., PT
  Becker, Krista H., PT
  Glessing-Laskowski, Katie B., PT
  Kihle, Cynthia, PT
  Kjelshus, Meghan K., PT
  Lambrecht, Kayla R., PT
  Proia, Lindsey N., PT
  Rasmusson, Karen M., PT
  Smith, Eris W., PT

Hcr Manorcare Medical Services of Florida, LLC dba Hcp
600 S Main St
(800) 375-5495
- Nurse Practitioner
  Krein, Georgia R., FNP

Holt Speech and Language Services
711 36th St SW
(701) 838-0419
- Speech Therapy
  Holt, Erin M., ST

Keycare Medical
530 20th Ave SW
(701) 857-7370
- Home Medical Equipment
  Keycare Medical

Keycare Medical
400 Burdick Expy E
Ste E117
(701) 857-7425
- Home Medical Equipment
  Keycare Medical

Keycare Pharmacy
400 Burdick Expy E
Ste 201
(701) 857-7900
- Home Medical Equipment
  Keycare Pharmacy

Landsiedel, Andrea St
1712 13th Street NW
(701) 721-0468
- Speech Therapy
  Landsiedel, Andrea K., ST

Mayer, Allyson
1308 17th Ave NW
(701) 340-5414
- Speech Therapy
  Mayer, Allyson D., ST

Minot Center For Pediatric Therapy
315 Main St S Suite 104
(701) 837-9801
- Occupational Therapy
  Miller, Krisann M., OT
- Speech Therapy
  Geer, Kylee B., ST
  Hieb, Emily, ST

Minot Health Clinic
1418 S Broadway
Ste B
(701) 320-8293
- Nurse Practitioner
  Fennern, Trisha J., FNP

Miracle Ear
1425 24th Ave SW
(701) 852-1897
- Home Medical Equipment
  Miracle Ear

North Central Human Service Center
1015 S Broadway Ste 18
(701) 857-8500
- Licensed Addiction Counselor-Chemical Dependency
  Andersen, Jason L., LAC
  Berger, Stacey A., LAC
  Browne, Racia J., LAC
  Duchscherer, Dana L., LAC
  Faa, Nathan, LAC

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING ANCILLARY PROVIDERS

North Central Human Service Center (cont.)

- Licensed Addiction Counselor-Chemical Dependency (continued)
  Kidney, Brietta M., LAC
  Lider, Heather L., LAC
  Mock, Candis, LAC
  Nelson, Amy L., LAC
  Twogood, Amber A., LAC
- Licensed Professional Clinical Counselor
  Burke, Jean M., LPCC
  Gartner, Melissa M., LPCC
- Psychiatric Nurse
  Hanson, Leah A., PNU
  Walls, Pamela S., PNU
- Psychology
  Langelle, Charyle, PHD
  Shaleen, Lori A., PHD
  Slaughter, Stacy L., PSYD

Northland Community Health Center
1600 2nd Ave SW Ste 19
(701) 377-4758

- Nurse Practitioner
  Green, Alain M., FNP
- Physician Assistant
  Bartow, Shelley M., PA
  Malzer, Christine M., PA

Prairie Therapy
700 Harmony St NW
(701) 720-5355

- Occupational Therapy
  Drevecky, Kelly L., OT

Professional Hearing Services
1400 37th Ave SW
(701) 852-6565

- Audiology
  Larson, Andrea B., AUD
  Malazdrewicz, Edward J., AUD
  Tongen, John L., AUD
  Wells, Jessica C., AUD

Psychiatric Services, PC
601 18th Ave SE Ste 101
(701) 852-8798

- Psychiatric Nurse
  Zuleger, Zane N., CNS

North Dakota (cont.)
Minot (cont.)

Psychological Services, PC
600 22nd Ave NW
(701) 852-9113

- Psychology
  Podrygula, Stephan, PHD

Sanford Health Occupational Medicine Clinic
801 21st Avenue SE
(701) 839-5902

- Physical Therapy
  Becker, Erica M., PT
  Brousseau, Michael A., PT
  Hahn, Sondra M., PT
  Heaton, Mariah D., PT
  Hunt, Heather L., PT
  Judah, Grant E., PT
  Jurgens-Dinius, Nicholl, PT
  Skluzacek, Amanda R., PT
  Wetzel, Jeff, PT
- Physician Assistant
  Champa, Whitney L., PA
  Fridrich, Elizabeth F., PA
  Malzer, Christine M., PA
  Manglitz, Brianne, PA
  Schillo, Sherry K., PA
  Vearrier, Tracy L., PA
  Worrel, Leslie A., PA

Sanford Health Walk-In Clinic
801 21st Ave SE
(701) 838-3150

- Nurse Practitioner
  Ahmann, Jessica L., FNP
  Collins, Susan G., FNP
  Ebach, Connie M., CNP
  Rakowski, Jana, FNP
- Physician Assistant
  Amsbaugh, Nicole L., PA
  Bennett, Rebekah, PA
  Held, Debra E., PA
  Kosiak, Maureen A., PA
  Kristensen, Karlee J., PA
  Nicholson, Jaclyn C., PA
  Vearrier, Tracy L., PA

North Dakota (cont.)
Minot (cont.)

Sanford Healthcare Accessories Minot
116 1st St SW
(701) 852-4110

- Home Infusion
  Sanford Healthcare Accessories Minot
- Home Medical Equipment
  Sanford Healthcare Accessories Minot

St Alexius Clinic
2700 8th St NW
(701) 857-8000

- Nurse Practitioner
  Baker, Sarah M., FNP
  Harju, Renee K., CNP
  Kitzman, Annie J., FNP
  Wiedrich, Sara L., CNP
- Physician Assistant
  Renner, Cindy M., PA
  Wolff, Lori A., PA

The Bone & Joint Center, PC
1600 2nd Ave SW Ste 19
(701) 857-8000

- Nurse Practitioner
  Kittleson, Shannon L., CNP
- Physician Assistant
  Zachmeier-Babb, Amanda L., PA

The Village Family Service Center
20 1st St SW Ste 250
(701) 852-3328

- Licensed Professional Clinical Counselor
  Jandro, Joanne M., LPCC

Total Transformation Clinic
317 16th St NW
(701) 837-9900

- Nurse Midwives
  Raghib, Kerry J., CNM

Trinity Health dba Oral & Facial Surgery Center
307 5th Ave SE
(701) 857-5124

- Certified Registered Nurse Anesthetist
  Rist, Kari L., CRNA

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING ANCILLARY PROVIDERS

Trinity Health dba Trinity Riverside Campus
1900 8th Ave SE
(701) 857-5998

- Clinical Nurse Specialist
  Andreas, Kiley R., CNS
- Licensed Professional Clinical Counselor
  Frueh, Keri J., LPCC
  Gertz, Linda M., LPCC
- Nurse Practitioner
  Anderson, Tonya M., FNP
  Volk, Sheryl L., FNP
- Physician Assistant
  Amsbaugh, Nicole L., PA
- Psychology
  Anderson, Thora R., PHD
  Boseck, Justin J., PHD
  Guilbert, Shana D., PSYD
  McAllister, Della A., PHD
  Michels, Vicki J., PHD
  Mugge, Jessica R., PHD
  Townsend, Richard B., EDD
  Vanlith, Clinten D., PHD

Trinity Hospitals
1 Burdick Expressway W
(701) 857-5252

- Licensed Registered Dietitian
  Cole, Kayla, LRD
  Doucet, Cory L., LRD
  Fundingsland, Michelle J., LRD
  Horob, Sandra J., LRD
- Physical Therapy
  Proia, Lindsey N., PT

Trinity Hospitals
101 3rd Ave SW Ste 102
(701) 857-5286

- Occupational Therapy
  Burke, Lisa M., OT
  Butgereit, Krystal R., OT
  Hunt, Chelsey L., OT
  Kruse, Arnold (Gus) W., OT
  Sandstrom, Danielle N., OT
- Physical Therapy
  Bohan, Katelyn M., PT
  Gasmann, Nancy, PT
  Lambrecht, Kayla R., PT
  Pankratz, Amber M., PT
  Peterson, Katrina L., PT

Trinity Hospitals (cont.)

- Physical Therapy (continued)
  Riehl, Aundrea, PT
  Ruckheim, Beth J., PT
  Templer, Lucia T., PT
  Wedar, Lynwood N., PT
- Physical/Occupational Therapist
  Kruse, Arnold (Gus) W., OT
  Sandstrom, Danielle N., OT

Trinity Hospitals Pharmacy
1 Burdick Expressway W
(701) 857-5550

- Home Infusion
  Trinity Hospital Pharmacy

Trinity Medical Group
831 S Broadway
(701) 857-5703

- Nurse Midwives
  Berg, Gloria J., CNM
- Nurse Practitioner
  Maxson, Janet L., CNP
  Pearson, Pamela K., FNP
- Physician Assistant
  Strand, Ginger M., PA

Trinity Medical Group
407 3rd Street SE
(701) 857-2360

- Nurse Practitioner
  Brown, Roxann M., FNP
- Physician Assistant
  Noya, Joseph V., PA
- Psychology
  Boseck, Justin J., PHD

Trinity Medical Group
400 Burdick Expy E
(701) 857-7385

- Nurse Midwives
  Brooking, Shawn E., CNM
  Crowe, Kerena M., CNM
  Riordan, Erica R., CNM
- Nurse Practitioner
  Bender, Heidi A., FNP
  Brewster, Leah M., FNP
  Brown, Roxann M., FNP
  Burgardt, Katharyn A., FNP
  Eberle, Sally M., FNP
  Fennern, Trisha J., FNP

Trinity Medical Group (cont.)

- Nurse Practitioner (continued)
  Ler, Bonnie S., CNP
  Lesmann, Allison D., FNP
  Maxson, Janet L., CNP
  Pease, Carla M., CNP
  Rime, Hedi J., FNP
  Schiele, Hailey R., FNP
  Welch, Ann M., FNP
  Wright, Sharon A., FNP
- Physician Assistant
  Dockter, Lori A., PA
  Fitzpatrick, Demaris A., PA

Trinity Medical Group
101 3rd Ave SW
(701) 857-5986

- Audiology
  Maxson, Jerrica L., AUD
  Nechodom, Tricia M., AUD
- Nurse Practitioner
  Lesmann, Allison D., FNP
  Striha, Desiree A., FNP
- Physician Assistant
  Evert, Seth G., PA
  Noya, Joseph V., PA
  Verhasselt, Donna E., PA

Trinity Medical Group
20 Burdick Expressway W
(701) 857-5877

- Nurse Practitioner
  Auch, Allison R., FNP
  Bender, Heidi A., FNP
  Jones, Durand S., FNP
  Wallner, Ashley N., FNP

Trinity Medical Group
1 Burdick Expy W
(701) 857-5000

- Certified Registered Nurse Anesthetist
  Hankel, Natalie F., CRNA
  Klabunde, Jenna B., CRNA
  Kruta, Clark J., CRNA
  Morey, Steven K., CRNA
- Nurse Midwives
  Crowe, Kerena M., CNM
- Nurse Practitioner
  Boyko, Heather L., FNP
  Dobrzelecki, Shawna L., FNP

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING ANCILLARY PROVIDERS

North Dakota (cont.)
Minot (cont.)

Trinity Medical Group (cont.)
- Nurse Practitioner (continued)
  Fricke, Jessica M., FNP
  Hillestad, Chantel K., FNP
  Jones, Durand S., FNP
  Leier, Kristy J., FNP
  Sadler, Mary A., FNP
  Storey, Sandra J., CNP
  Vondal, Lynette, FNP
  Wilson, April E., FNP
  Wright, Sharon A., FNP
- Physician Assistant
  Amsbaugh, Nicole L., PA
  Noya, Joseph V., PA
  Paige, Dick, PA
- Psychology
  Boseck, Justin J., PHD
  McAllister, Della A., PHD
  Townsend, Richard B., EDD
  Vanlith, Clinten D., PHD

Trinity Medical Group Anesthesiology
1 Burdick Expressway W
(701) 857-5124
- Certified Registered Nurse Anesthetist
  Berentson, Kari, CRNA
  Bossert, Melanie A., CRNA
  Bouma, Kelly M., CRNA
  Braaflat, Tyler D., CRNA
  Brandt, Kraig W., CRNA
  Brown, Terri R., CRNA
  Cederstrom, Luann, CRNA
  Daigle Bjerke, Adelle A., CRNA
  Desautel, David A., CRNA
  Heilman, Rebecca A., CRNA
  Henjum, Jennifer K., CRNA
  Howe, Melinda A., CRNA
  Huber-Manstrom, Charlotte, CRNA
  Kelly, Karen J., CRNA
  Keniston, Dierdre V., CRNA
  Kleespie, Myca L., CRNA
  Maund, Michelle, CRNA
  Nelson, Christine M., CRNA
  Peterson, Renee P., CRNA
  Potter, Lonna M., CRNA
  Rist, Kari L., CRNA
  Simon, Jeffrey J., CRNA
  Stock, Terry L., CRNA

North Dakota (cont.)
Minot (cont.)

Trinity Medical Group Anesthesiology (cont.)
- Certified Registered Nurse Anesthetist (continued)
  Underdahl, Nicole A., CRNA
  Vaughn, Rita K., CRNA
  Vibeto, Mark C., CRNA
  Wetsch, Tyler, CRNA
  Wilson, Roni M., CRNA
  Woodland, Michael J., CRNA
  Zahn, Denise M., CRNA

Trinity Medical Group South Ridge
1500 24th Ave SW
(701) 857-5343
- Nurse Practitioner
  Rasmussen, Nora L., CNP
- Physician Assistant
  Forsberg, Jerane A., PA

Walls,Pamela,APRN,BC
24 N Main St Ste J
(701) 721-5143
- Psychiatric Nurse
  Walls, Pamela S., PNU

Weiss, Faye, RN, CNS, PC
234 14th Ave SE
Ste 317
(701) 833-8158
- Psychiatric Nurse
  Weiss, Faye M., CNS

White Drug #17
1015 S Broadway
(701) 852-4181
- Home Medical Equipment
  White Drug #17

White Drug #40
2211 16th St NW Ste B
(701) 852-0388
- Home Medical Equipment
  White Drug #40

Mohall

Good Samaritan Society - Mohall
602 Main St E
(701) 756-6831
- Occupational Therapy
  Drevecky, Kelly L., OT

North Dakota (cont.)
Mohall (cont.)

Good Samaritan Society - Mohall (cont.)
- Physical/Occupational Therapist
  Drevecky, Kelly L., OT
- Speech Therapy
  Duerre, Rachelle B., ST

Rural Mental Health Consortium
602 Main St E
(701) 857-2199
- Nurse Practitioner
  Weathers, Vickie K., CNP
- Psychiatric Nurse
  Sartain, Cheryl A., PNU

Trinity Community Clinic Mohall Rbm
504 1st St SE
(701) 756-6841
- Nurse Practitioner
  Stanley, Ruth A., FNP
- Physician Assistant
  Paige, Dick, PA

White Drug #62
115 Main St
(763) 513-4301
- Home Medical Equipment
  White Drug #62

Mott

Mott Good Samaritan Nursing Home
401 Millionaire Ave
(701) 824-3222
- Physical Therapy
  Pagel, Erika, PT
  Thompson, Alex, PT

West River Health Services
420 Pacific Ave
(701) 824-2391
- Licensed Professional Clinical Counselor
  Jorgenson, Tara L., LPCC
- Nurse Practitioner
  Hill, Lori A., CNP
  Reiten, Elizabeth, FNP
- Physician Assistant
  Bergquist, Rose B., PA
  Bondell, Sheila, PA
  Cooper, Brian K., PA

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING ANCILLARY PROVIDERS

North Dakota (cont.)
Mott (cont.)

West River Health Services (cont.)
- Physician Assistant (continued)
  Mattis, Billie J., PA

Napoleon

Napoleon Drug Inc
214 Main Ave
(701) 754-2203

- Pharmacy
  Napoleon Drug Inc

Wishek Rural Health Clinic/Napoleon
420 Main Ave
(701) 754-2322

- Nurse Practitioner
  Benson, Paulette, FNP
  Ketterling, Marcia R., FNP
- Physician Assistant
  Hauff, Rosemary, PA
  Kosiak, Maureen A., PA
  Rau, Kay M., PA

New England

New England Drug
713 E Main
(701) 579-4276

- Pharmacy
  New England Drug

West River Health Services
820 2nd Ave W
(701) 579-4507

- Licensed Professional Clinical Counselor
  Jorgenson, Tara L., LPCC
- Nurse Practitioner
  Hill, Lori A., CNP
- Physician Assistant
  Bergquist, Rose B., PA
  Cooper, Brian K., PA
  Mattis, Billie J., PA
  Nielsen, Teresa H., PA

North Dakota (cont.)
New Rockford

Blooming Prairie Assessment & Therapy Center
24 8th St N
(701) 662-8255

- Psychology
  Kenney, Sara K., PSYD
  Normandin, Sherman, PHD

Community Health Clinic
118 1st St S
(701) 652-2515

- Physician Assistant
  Hoff, Bradley D., PA
  Hoff, Mary L., PA
  Nelson, Jacqueline D., PA

New Salem

Elm Crest Manor
100 Elm Avenue
(701) 843-8494

- Occupational Therapy
  Fettig, Lindsey R., OT
- Physical Therapy
  Schanandore, Amy, PT
- Speech Therapy
  Stockert, Misty J., ST

New Town

Trinity Community Clinic New Town
604 1st Street North
(701) 627-2990

- Nurse Practitioner
  Trulson, Jill M., CNP
- Physician Assistant
  Ulven, Cheryl D., PA

Northwood

Northwood Deaconess Health Center
4 N Park St
(701) 587-6060

- Licensed Registered Dietitian
  Becker, Lisa M., LRD
- Nurse Practitioner
  Ness, Condetta H., CNP
  Shannon, Heidi J., FNP
  Twete, Brian C., CNP
- Physical Therapy
  Snyder, Catherine L., PT

North Dakota (cont.)
Northwood (cont.)

Valley Community Health Centers
301 Hwy 15
(701) 587-6000

- Licensed Registered Dietitian
  Getz, Janel A., LRD
- Nurse Midwives
  Shogren, Maridee D., CNM
- Nurse Practitioner
  Nuelle, Bethann M., FNP
  Solberg, Roberta, FNP
  Vigen, Rebecca A., CNP

Oakes

James River Counseling Services PC
412 Main Ave
(701) 742-1513

- Licensed Professional Clinical Counselor
  Meehl, Stacey B., LPCC

Oakes Community Hospital
1200 N 7th St
(701) 742-3291

- Certified Diabetic Educator
  Erlandson, Barbara H., CDE
- Certified Registered Nurse Anesthetist
  Bakke, Amy J., CRNA
- Licensed Registered Dietitian
  Erlandson, Barbara H., LRD
- Nurse Practitioner
  Myklebust, Kimberley D., FNP
- Physical Therapy
  Lagodinski, Ryan J., PT
  Patzlaff, Amber M., PT
- Physician Assistant
  Chapel, Dean A., PA
  Hedlund, Jeffrey S., PA

Sanford Health Oakes Clinic
420 S 7th St
(701) 742-3267

- Licensed Registered Dietitian
  Erlandson, Barbara H., LRD
- Nurse Practitioner
  Gabriel, James, FNP
  Kaiser, Karen A., CNP
  Long, Lillian, FNP

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING ANCILLARY PROVIDERS

North Dakota (cont.)
Oakes (cont.)

Sanford Health Oakes Clinic (cont.)
- Physical Therapy
  Lorenz, Ryan R., PT
  Mattson, Heather, PT
- Physician Assistant
  Buchholz, Brent M., PA
  Gulsvig, Nancy J., PA
  Hack, Vicki L., PA
  Hendricks, Larry A., PA
  Reich, Brenda R., PA
  Siedschlag, Kathleen L., PA

Tara's Thrifty White LLC
610 Main Avenue
(701) 742-3824
- Home Medical Equipment
  Tara's Thrifty White

Park River

Achieve Therapy, LLC
424 Briggs Ave
(701) 284-6707
- Physical Therapy
  Bolek, Megan E., PT
  Chine, Nicole J., PT
  Walsh, Heather A., PT
  Wilcox, Lacey J., PT

First Care Health Center
115 Vivian St
(701) 284-7500
- Certified Registered Nurse Anesthetist
  Myers, Michael R., CRNA
  Trontvet, Kent A., CRNA
- Licensed Registered Dietitian
  Bata, Christina, LRD

First Care Health Center
115 Vivan St
(701) 284-7555
- Certified Registered Nurse Anesthetist
  Krueger, Curtis C., CRNA
  Shefland, Raymond C., CRNA
- Nurse Practitioner
  Pengilly, Paula L., FNP
- Physician Assistant
  Clemetson, Tamara J., PA
- Psychology
  Juntunen, Cindy L., PHD

North Dakota (cont.)
Park River (cont.)

Midgarden Family Clinic, PC
503 Park St W Suite B
(701) 284-6663
- Nurse Practitioner
  Pengilly, Paula L., FNP

Parshall

Parshall Health Center IHS
107 3rd Street SE
(701) 862-8220
- Nurse Practitioner
  Three Affiliated Tribes/Np

Raleigh

Prairie Learning Center
7785 St Gertrude Ave
(701) 597-3419
- Licensed Addiction Counselor-Chemical Dependency
  Anderson, Christy K., LAC

Richardton

Country Drug Store
116 North Ave E
(701) 974-3558
- Home Medical Equipment
  Country Drug Store

Richardton Health Center
215 3rd Ave W
(701) 974-3372
- Nurse Practitioner
  Hoerauf, Lynda B., FNP
  Schmidt, Rhonda, FNP
- Physician Assistant
  Emond, Sister Michael, PA

Rolette

Northland Community Health Center
401 2nd Ave
(701) 246-3391
- Nurse Practitioner
  Busch, Cassie F., CNP
  Goven, Jill R., FNP
  Green, Alain M., FNP
- Physician Assistant
  Bartow, Shelley M., PA
  Jensen, Brian, PA

North Dakota (cont.)
Rolette (cont.)

Northland Community Health Center (cont.)
- Physician Assistant (continued)
  Malzer, Christine M., PA

White Drug #58
208 Main Street
(701) 246-3600
- Home Medical Equipment
  White Drug #58

Rolla

Lake Region Hsc/Rolla Outreach
113 Main Ave E
(701) 665-2200
- Licensed Addiction Counselor-Chemical Dependency
  Bercier, Cynthia R., LAC
  Lamotte, Wanda J., LAC
  Longie, Glenn B., LAC
- Licensed Professional Clinical Counselor
  Allen-Halvorson, Natascha V., LPCC
  Baumgarn, Julie K., LPCC

Northland Community Health Center-Rolla
114 3rd St NE
(701) 477-3111
- Nurse Practitioner
  Busch, Cassie F., CNP
  Goven, Jill R., FNP
  Green, Alain M., FNP
- Physician Assistant
  Bartow, Shelley M., PA
  Jensen, Brian, PA
  Malzer, Christine M., PA
  McQueeney, Michael T., PA

Presentation Medical Center
213 2nd Ave NE
(701) 477-3161
- Certified Registered Nurse Anesthetist
  Cederstrom, Luann, CRNA
- Nurse Practitioner
  Benning, Kimberly, FNP
  Bucher, Benjamin, FNP
  Sharp, Jody R., FNP

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING ANCILLARY PROVIDERS

North Dakota (cont.)
Rolla (cont.)

Rolla Drug
117 Main St E
(701) 477-3174

- Home Medical Equipment
  Rolla Drug

Rural Mental Health Consortium
213 2nd Ave NE
(701) 857-2199

- Nurse Practitioner
  Weathers, Vickie K., CNP
- Psychiatric Nurse
  Sartain, Cheryl A., PNU

Rugby

Heart of America Clinic Pharmacy
800 S Main Ave
(701) 776-2531

- Home Medical Equipment
  Heart of America Clinic Pharmacy

Heart of America Johnson Clinic
800 3rd Ave SW
(701) 776-5235

- Nurse Practitioner
  Costner, David S., CNP
  Harder, Tammie J., CNP
  Herman, Jenna M., CNP
  Mickelson, Barbara J., CNP
  Pagel-Trana- Duttenhef, Bobbie M., CNP
  Stahl, Andrea L., FNP
  Townsend, Cammy K., FNP
- Physician Assistant
  Danielson, Gail L., PA
  Hager, Dustin T., PA
  Harder, Tammie J., PA
  Weick, Keri L., PA

Heart of America Medical Center
800 S Main Ave
(701) 776-5261

- Certified Registered Nurse Anesthetist
  Beare, Ronald J., CRNA
  Cannon, Sharon R., CRNA
  Cederstrom, Luann, CRNA
  Johnson, Amber, CRNA
- Home Medical Equipment
  Heart of America Medical Center

North Dakota (cont.)
Rugby (cont.)

Heart of America Medical Center (cont.)

- Licensed Registered Dietitian
  Brandt, Kathy J., LRD
- Nurse Practitioner
  Cooper, Thomas E., FNP
  Costner, David S., CNP
  Harder, Tammie J., CNP
  Herman, Jenna M., CNP
  Mickelson, Barbara J., CNP
  Pagel-Trana- Duttenhef, Bobbie M., CNP
  Pfenning, Stacey R., CNP
  Stahl, Andrea L., FNP
  Townsend, Cammy K., FNP
- Occupational Therapy
  Becker, Rachel L., OT
- Physical Therapy
  Backstrom, Jordan, PT
  Fragodt, Marie E., PT
- Physician Assistant
  Danielson, Gail L., PA
  Hager, Dustin T., PA
  Harder, Tammie J., PA
  Weick, Keri L., PA

Scranton

West River Health Services
211 Main Street S
(701) 275-6336

- Licensed Professional Clinical Counselor
  Jorgenson, Tara L., LPCC
- Nurse Practitioner
  Hill, Lori A., CNP
  Reiten, Elizabeth, FNP
- Physician Assistant
  Bergquist, Rose B., PA
  Bondell, Sheila, PA
  Cooper, Brian K., PA
  Mattis, Billie J., PA

Sentinel Butte

Home On The Range
16351 I 94
(701) 872-3745

- Licensed Addiction Counselor-Chemical Dependency
  Ebel, Jodine M., LAC

North Dakota (cont.)
Stanley

Dakota Drug Company
107 S Main St
(701) 628-2255

- Home Medical Equipment
  Dakota Drug Company of Stanley

Mountrail Bethel Home
615 6th St SE
(701) 628-2442

- Occupational Therapy
  Aufforth, Miranda M., OT
- Physical/Occupational Therapist
  Aufforth, Miranda M., OT

Mountrail County Medical Center
615 6th St SE
(701) 628-2505

- Certified Registered Nurse Anesthetist
  Oxner, William D., CRNA

Mountrail County Medical Clinic
615 6th St SE
(701) 628-2505

- Nurse Practitioner
  Nardacci, Tara M., FNP
  Wacker, Donna M., FNP
- Physician Assistant
  Effertz, Abbey, PA

Rural Mental Health Consortium
615 6th St SE
(701) 857-2199

- Nurse Practitioner
  Weathers, Vickie K., CNP
- Psychiatric Nurse
  Sartain, Cheryl A., PNU

Steele

Advanced Physical Therapy and Fitness, LLC
112 West Broadway
(701) 475-2911

- Physical Therapy
  Hieb, Marcus A., PT
  Hollar, Anthony C., PT

Dakota Physical Therapy, PC
214 4th Street NW
(701) 202-3280

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING ANCILLARY PROVIDERS

North Dakota (cont.)

Steele (cont.)

Dakota Physical Therapy, PC (cont.)
- Physical Therapy
  Bergan, April, PT
  Bergan, Chad M., PT
  Gietzen, Chris, PT

Kidder County Primary Health Corporation
110 West Broadway
(701) 475-2910
- Nurse Practitioner
  Rath, Mandy K., FNP

Steele Drug
101 W Broadway
(701) 475-2521
- Pharmacy
  Steele Drug

Tioga

Tioga Drug Inc
106 N Main
(701) 664-2116
- Home Medical Equipment
  Tioga Drug Inc

Tioga Medical Center
710 N Welo St
(701) 664-3368
- Nurse Practitioner
  Barlow, Steven L., FNP
  Carlson, Nancy R., FNP
  Royal, Natalie R., FNP
  Shellman, Laura M., FNP
- Occupational Therapy
  Keever, Andrea, OT
- Physician Assistant
  Adams, Jeffrey S., PA
  Coughlin, Corinne E., PA
  Joyce, Gail R., PA
  Moberg, Jeffrey A., PA

Tioga Medical Center Hospital
810 N Welo St
(701) 664-3305
- Certified Registered Nurse Anesthetist
  Oxner, William D., CRNA
- Licensed Registered Dietitian
  Bearce, Tammy R., LRD

North Dakota (cont.)

Tioga (cont.)

Tioga Medical Center Hospital
810 N Welo St
(701) 664-3305
- Home Medical Equipment
  Tioga Medical Center

Trenton

Trenton Community Clinic
331 4th Ave E
(701) 774-0461
- Licensed Addiction Counselor-Chemical Dependency
  Trenton Community Clinic/LAC
- Nurse Practitioner
  Trenton Community Clinic/Nup
- Physician Assistant
  Trenton Community Clinic/PA

Trenton Community Clinic HME
331 4th Ave E
(701) 774-0461
- Home Medical Equipment
  Trenton Community Clinic HME

Turtle Lake

Northland Community Health Center- Turtle Lake
416 Kundert St
(701) 448-9225
- Nurse Practitioner
  Busch, Cassie F., CNP
  Goven, Jill R., CNP
  Green, Alain M., FNP
  Pfenning, Stacey R., CNP
  Volk, Robert, FNP
- Physician Assistant
  Bartow, Shelley M., PA
  Jensen, Brian, PA
  Malzer, Christine M., PA

Turtle Lake Rexall Drug
218 Main St
(701) 448-2542
- Pharmacy
  Turtle Lake Rexall Drug

North Dakota (cont.)

Underwood

Underwood Clinic
87 Lincoln Ave
(701) 442-3148
- Nurse Practitioner
  Leidholm, Michele D., CNP
  Weisenburger, Kellie C., CNP

Valley City

Concept Dentistry PC
117 3rd St NW
(701) 845-2180
- Certified Registered Nurse Anesthetist
  Bulik, Robert E., CRNA

Essentia Health Valley City Clinic
132 4th Ave NE
(701) 845-8060
- Certified Diabetic Educator
  Viger, Karen M., CDE
- Licensed Registered Dietitian
  Musgrave, Larissa A., LRD
- Nurse Practitioner
  Anderson, Elisha D., FNP
  Johnson, Roxanne M., CNP
  Meyer, Lana J., FNP
- Physician Assistant
  Hoffman, Leah, PA
  Klabo, Mark, PA
  Larson, Bruce D., PA
- Psychology
  Hauge, Gregory A., PHD

Fuher Jessie, LPCC
570 Chautauqua Blvd
(701) 252-9838
- Licensed Professional Clinical Counselor
  Fuher, Jessie K., LPCC

Life Seasons Counseling, PLLC
570 Chautauqua Blvd
(701) 678-4800
- Licensed Professional Clinical Counselor
  Elhard, Deborah J., LPCC

Mercy Home Care Services
367 2nd St NW
(701) 845-6550

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING ANCILLARY PROVIDERS

North Dakota (cont.)
Valley City (cont.)

Mercy Home Care Services (cont.)
- Physical Therapy
  Ystaas, Matthew A., PT
- Speech Therapy
  Stockert, Misty J., ST

Mercy Hospital
570 Chautauqua Blvd
(701) 845-6400

- Certified Registered Nurse Anesthetist
  Bakke, Amy J., CRNA
  Honeyman, Ron L., CRNA
  Kruta, Clark J., CRNA
  Strasburg, Ryan G., CRNA
- Nurse Practitioner
  Ballard, Kevin D., CNP
  Bitz, Trent W., FNP
- Occupational Therapy
  Smith, Donna M., OT
- Physician Assistant
  Klabo, Mark, PA
  Konzak, Stacey L., PA
  Malzer, Christine M., PA
  Moberg, Jeffrey A., PA

Nucara Pharmacy #31
234 Central Ave N
(701) 845-2652

- Home Medical Equipment
  Nucara Pharmacy # 31

Pain Relief Center
136 2 Ave NE
(701) 840-0079

- Occupational Therapy
  Gabriel-Johnson, Janice K., OT

Sanford Health Valley City Clinic
520 Chautauqua Blvd
(701) 845-6000

- Licensed Registered Dietitian
  Buhr, Sharon E., LRD
- Nurse Practitioner
  Pfennig, Gregory, FNP
- Physician Assistant
  Anderson, Judy L., PA
  Bjore, Nicholas, PA
  Hendricks, Larry A., PA
  Lueck, Michelle A., PA
  Owens, Ann, PA

North Dakota (cont.)
Valley City (cont.)

Sanford Health Valley City Clinic (cont.)
- Psychology
  Wilson, Joel R., PHD

Sanford Health Valley City Hearing Center
1140 W Main St
(701) 845-4955

- Audiology
  Arneson-Thilmony, Debra J., AUD
  Boutilier, Amanda D., AUD
  Mann, Krystal L., AUD
  Mattheis Anderson, Amy M., AUD
  Ness, Brady J., AUD
  Schauer, Douglas D., AUD

White Drug #60
148 S Central Ave
(763) 513-4301

- Home Medical Equipment
  White Drug #60

Velva

Souris Valley Care Center
300 Main St S
(701) 338-2072

- Physical Therapy
  Rath, Jennifer, PT

Trinity Community Clinic
111 W 1st St
(701) 338-2066

- Nurse Practitioner
  Larsen, Kendra L., CNP
- Physician Assistant
  Fitzpatrick, Demaris A., PA

Velva Drug Co
16 N Main St
(701) 338-2911

- Pharmacy
  Velva Drug Co

Wahpeton

Corner Drug Store, Inc
619 Dakota Ave
(701) 642-6223

North Dakota (cont.)
Wahpeton (cont.)

Corner Drug Store, Inc (cont.)
- Home Medical Equipment
  Corner Drug Wahpeton

Essentia Health Wahpeton Clinic
275 11th St S
(701) 642-2000

- Audiology
  Almer, Marin A., AUD
- Certified Diabetic Educator
  Viger, Karen M., CDE
- Certified Registered Nurse Anesthetist
  Genereux, Heidi E., CRNA
  Honeyman, Ron L., CRNA
  Splichal, Robert J., CRNA
  Vaughn, Rita K., CRNA
- Home Medical Equipment
  Essentia Health Wahpeton/DME
- Licensed Registered Dietitian
  Rather, Sandra J., LRD
- Nurse Midwives
  Howell, Christa L., CNM
- Nurse Practitioner
  Anderson, Elisha D., FNP
  Boeddeker, Spring A., FNP
  Lies, Patricia A., CNP
  Wojcik, Susan E., CNP
- Occupational Therapy
  Crowe, Cheryl B., OT
  Enockson, Michelle I., OT
  Kiefer, Megan M., OT
  Wasemiller, Peggy J., OT
- Physical Therapy
  Brekke, Teri J., PT
  Schmidt, Nicole J., PT
- Physical/Occupational Therapist
  Crowe, Cheryl B., OT
  Wasemiller, Peggy J., OT
- Physician Assistant
  Balvitsch, Jason, PA
  Larson, Bruce D., PA
- Psychology
  Hauge, Gregory A., PHD

Lincare Inc
507 Dakota Ave
(701) 642-5375

- Home Medical Equipment
  Lincare Inc

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING ANCILLARY PROVIDERS

North Dakota (cont.)
Wahpeton (cont.)

Red River Anesthesia, PC
824 Richland St
(800) 922-5852

- Certified Registered Nurse Anesthetist
  Genereux, Heidi E., CRNA
  Splichal, Robert J., CRNA
  Vaughn, Rita K., CRNA

Richland County Family Planning
413 3rd Ave N
(701) 642-7735

- Nurse Practitioner
  Eckes, Audrey A., CNP
  Ellingson, Lori L., FNP

Sanford Health Wahpeton Clinic
332 2nd Ave N
(701) 642-7000

- Nurse Practitioner
  Berge, Cheri J., CNP
- Physical Therapy
  Amundson, Bruce T., PT
- Physician Assistant
  Braun, Lisa, PA
  Hegge, Erin C., PA
  Lueck, Michelle A., PA
- Psychology
  Geiselhart, Richard L., PHD
  Getz, Ariane M., PSYD

Sanford Health Wahpeton Clinic
332 2nd Ave N
(701) 642-7000

- Certified Diabetic Educator
  Klocke, Janet D., CDE
  Schaan, Peggy, CDE
- Licensed Registered Dietitian
  Meyer, Elizabeth Ann G., LRD
  Tehven, Kathy J., LRD

St Catherines Living Center
1307 7th St N
(701) 642-6667

- Physical Therapy
  Engen, Mary D., PT
  Heilman, Kristi R., PT
- Speech Therapy
  Peyton, Mary J., ST

North Dakota (cont.)
Wahpeton (cont.)

Swanson Counseling
315 11 St N Suite E
(701) 591-2003

- Licensed Professional Clinical Counselor
  Swanson, Cynthia, LPCC

Thrifty White Pharmacy #75
387 11th St S Ofc 2
(701) 642-2336

- Home Medical Equipment
  Thrifty White Pharmacy 75

Walhalla

Pembilier Nursing Center
500 Delano Ave
(701) 549-3310

- Occupational Therapy
  Schill, Megan, OT
- Physical Therapy
  McMillan, Becky S., PT

Speech Wellness Services, LLC
9715 129 Ave NE
(701) 549-3283

- Speech Therapy
  Heidler, Sharon L., ST

Walhalla Clinic
301 5th St
(701) 549-2710

- Nurse Practitioner
  Sillers, Elizabeth M., CNP
  Skaar, Danielle, FNP
  Witzel, Gwen L., CNP

Walhalla Prescription Shop, Inc
1102 Central Ave
(701) 549-2661

- Home Medical Equipment
  Walhalla Prescription Shop, Inc

Washburn

Jones Physical Therapy
1167 Border Lane Road
(701) 462-3389

- Physical Therapy
  Hager, Caitlyn N., PT
  Hochhalter, Mindy A., PT
  Jones, Elizabeth A., PT

North Dakota (cont.)
Washburn (cont.)

Washburn Clinic
1167 Border Lane Rd
(701) 462-3389

- Nurse Practitioner
  Leidholm, Michele D., CNP
  Weisenburger, Kellie C., CNP

Washburn Family Clinic
1177 Border Lane
(701) 462-3396

- Nurse Practitioner
  Busch, Cassie F., CNP
  Christianson, Jane, FNP
  Goven, Jill R., FNP
  Hofferber, Rick W., CNP
  Pfenning, Stacey R., CNP
  Schroeder, Dara, FNP
  Townsend, Cammy K., FNP
  Wacker, Donna M., FNP
  Wardner, Susan G., FNP
- Physical Therapy
  Hahn, Jason R., PT
- Physician Assistant
  Graeber, Luanna J., PA
  Malzer, Christine M., PA
  Vearrier, Tracy L., PA

Watford City

Anova Family Health Center Inc
301 12th St SE
(701) 842-6400

- Nurse Practitioner
  Haak, Cassie J., FNP
  Johnson, Vonnie J., FNP
  Pedersen, Anita A., FNP

McKenzie County Healthcare Systems Clinic
525 N Main St
(701) 842-3771

- Nurse Practitioner
  Hunter, Bart T., FNP
  Kostenko, Suzanne V., CNP
  Vetterkind, Kirsten, FNP

McKenzie County Healthcare Systems/Hospital
516 N Main St
(701) 842-3000

- Licensed Registered Dietitian
  Bearce, Tammy R., LRD

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING ANCILLARY PROVIDERS

North Dakota (cont.)
Watford City (cont.)

McKenzie County Healthcare Systems/Hospital (cont.)
- Nurse Practitioner
  Hunter, Bart T., FNP
  Kostenko, Suzanne V., CNP
  Vetterkind, Kirsten, FNP
- Physical Therapy
  Samuelson, Corey J., PT

West Fargo

Apex Physical Therapy and Wellness Center, PC
550 13 Ave E
(701) 364-2739
- Physical Therapy
  Buske, Allison K., PT
  Erstad, Brooke E., PT
  Ihry Hodem, Kameron J., PT
  Zachmann, Marley C., PT

At Home Physical Therapy PC dba Rehab 4 Life
1420 9th St E Ste 409
(701) 293-7294
- Occupational Therapy
  Costello, Kelly N., OT
- Physical Therapy
  Gieseke, Stephanie, PT

Beacon Behavioral Health Services & Training Center
102 West Beaton Dr #103
(701) 356-1276
- Psychology
  Cavett, Angela M., PHD
  Garaas, Jennifer M., PHD

Essentia Health West Fargo Clinic
1401 13th Ave E
(701) 364-5751
- Nurse Midwives
  Janke, Jennifer L., CNM
- Nurse Practitioner
  McKinnon, Dawn R., CNP
  Nelles, Rachel K., CNP
  Schultz, Joan M., CNP
- Occupational Therapy
  Boerboom, Sarah A., OT
  Crowe, Cheryl B., OT
  Enockson, Michelle I., OT
  Hager, Megan, OT
  Husar, Abby E., OT

North Dakota (cont.)
West Fargo (cont.)

Essentia Health West Fargo Clinic (cont.)
- Occupational Therapy (continued)
  Kiefer, Megan M., OT
  Knott, Christina M., OT
  McKibbin, Randon N., OT
  Mueller, Amy L., OT
  Wasemiller, Peggy J., OT
- Physical Therapy
  Ali, Sana, PT
  Barnhardt, Scott D., PT
  Bitz, James P., PT
  Brekke, Teri J., PT
  Garrahy, Shauna, PT
  Gauer, Chelsey N., PT
  Gunkelman, Ashley L., PT
  Halls, Ruth Ann, PT
  Isaak, Christine M., PT
  Meuwissen, Marissa N., PT
  Sauvageau, Katie M., PT
  Schmidt, Nicole J., PT
  Schwengler, Jason J., PT
  Sunde, Lizette, PT
- Physical/Occupational Therapist
  Boerboom, Sarah A., OT
  Crowe, Cheryl B., OT
  Enockson, Michelle I., OT
  Husar, Abby E., OT
  Mueller, Amy L., OT
  Wasemiller, Peggy J., OT
- Physician Assistant
  Larson, Bruce D., PA
  Olson-Fitzgerald, Heidi M., PA
  Soper, Constance F., PA
  Welk, Nikki L., PA

Knowlton Oneill & Associates PC
1401 13th Ave E
(701) 364-0060
- Nurse Practitioner
  Cushing, Anne G., CNP
- Psychology
  Bratton, Brenda L., PHD
  Dvorak, Robert D., PHD
  Hegstad, Holly J., PHD
  Knowlton, Glenn E., PHD
  Schjeldahl, Katherine M., PHD

North Dakota (cont.)
West Fargo (cont.)

Leaps and Bounds Speech Services, Inc
1121 9th Ave W
(701) 356-0062
- Speech Therapy
  Helgeson, Danielle M., ST
  Lucht, Stacey L., ST

Miracle Ear
745 13th Ave E #6
(701) 277-1478
- Home Medical Equipment
  Miracle Ear

Northwest Respiratory Services, LLC
500 10th St NE Ste 230
(800) 232-0706
- Home Medical Equipment
  Northwest Respiratory Services, LLC

Progressive Therapy Associates
1150 Prairie Pkwy
Ste 105
(701) 356-7766
- Speech Therapy
  Christiansen, Amber L., ST
  Grove, Janet, ST
  Hedstrom, Jodi L., ST
  Simon, Tessa M., ST

Sanford West Fargo Clinic
1220 Sheyenne St
(701) 234-4445
- Certified Diabetic Educator
  Klocke, Janet D., CDE
- Nurse Practitioner
  Joyce, Rebecca, FNP
  Koenig, Cynthia J., CNP
- Physician Assistant
  Jones, Corwin A., PA

Sanford West Fargo Clinic
1220 Sheyenne St
(701) 234-4455
- Certified Diabetic Educator
  Klocke, Janet D., CDE
- Licensed Registered Dietitian
  Krueger, Maren A., LRD
- Nurse Practitioner
  Joyce, Rebecca, FNP
  Koenig, Cynthia J., CNP

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING ANCILLARY PROVIDERS

North Dakota (cont.)
West Fargo (cont.)

Sanford West Fargo Clinic (cont.)
- Physician Assistant
  Branca, Autumn, PA
  Jones, Corwin A., PA

Sheyenne Hearing Service
205 Sheyenne St #2
(701) 281-8137
- Home Medical Equipment
  Sheyenne Hearing Service

Terry Braun, LPCC
1042 14 Ave E Ste 210
(701) 799-6258
- Licensed Professional Clinical Counselor
  Braun, Terry N., LPCC

The Prescription Shop Wf
1210 Sheyenne St
(701) 282-4665
- Home Medical Equipment
  The Prescription Shop Wf

Thrifty White Drug #46
1100 13th Ave E
(701) 281-5695
- Home Medical Equipment
  White Drug #46

Williston

Billings Clinic
1301 15th Ave W
(701) 774-7464
- Physician Assistant
  Allen, Travis G., PA

Clinical Consulting, PC
322 Main St Ste 104
(701) 651-6951
- Psychiatric Nurse
  Ferrell, Charlotte A., PNU

Elite Health & Fitness
512 Main St
(701) 774-0320
- Physical Therapy
  Baltz, Haley K., PT
  Boston, Kari E., PT
  Fortney, Rachel J., PT
  Haug, Martin J., PT
  Huravitch, Chris E., PT

North Dakota (cont.)
Williston (cont.)

Elite Health & Fitness
512 Main St
(701) 774-0320
- Nurse Practitioner
  Falcon, Misty K., FNP
  Paulson, Breanna L., FNP

Fairlight Medical Center
3 E 4th St Ste 201
(701) 577-6337
- Nurse Practitioner
  Ebach, Connie M., CNP
- Physician Assistant
  Blomquist, Patricia A., PA

G & G Rx, Inc dba Service Drug Pharmacy
317 Main
(701) 572-6721
- Home Medical Equipment
  Service Drug Pharmacy

Medquest Inc
1602 W 11th St
(701) 774-7438
- Home Infusion
  Medquest Inc.
- Home Medical Equipment
  Medquest Inc

Mercy Medical Center dba Craven Hagan Clinic
1213 15th Ave W
(701) 774-7400
- Nurse Practitioner
  Grondahl, Heidi L., CNP
  Lukenbill, Debra J., FNP
  Norby, Cherise A., FNP
  Warmsbecker, Brandy, FNP
- Physical Therapy
  Skluzacek, Amanda R., PT
- Physician Assistant
  Peterson, Lisa M., PA
  Wiedrich, Leah R., PA

Mercy Medical Center dba CRNA
1301 15th Ave W
(701) 774-7400
- Certified Registered Nurse Anesthetist
  Cederstrom, Luann, CRNA
  Johnson, Karen L., CRNA

North Dakota (cont.)
Williston (cont.)

Mercy Medical Center dba CRNA (cont.)
- Certified Registered Nurse Anesthetist (continued)
  Johnson, Kristi, CRNA
  Lewis, James E., CRNA
  Lewis, Melissa M., CRNA
  Olson, Jeffrey K., CRNA

Mercy Nutritional Service
1301 15th Ave W
(701) 774-7441
- Licensed Registered Dietitian
  Bearce, Tammy R., LRD
  Brannan, Emilee R., LRD
  Philpot, Tamara, LRD

Neurosurgical & Spinal Surgery Associates, PC
3 4th Street East
(800) 253-5876
- Physician Assistant
  Davis Faith, Kara L., PA
  Richards, James W., PA
  Richards, Juanita M., PA

Northwest Human Service Center
316 2nd Ave W
(701) 774-4600
- Clinical Nurse Specialist
  Lukenbill, Debra J., CNS
- Licensed Addiction Counselor-Chemical Dependency
  Conmy, Stephen W., LAC
  Montgomery, Christine R., LAC
- Nurse Practitioner
  Ferrell, Charlotte A., FNP
- Psychology
  Semchenko, Alana, PSYD

Oxner, William, CRNA
1102 Main St
(952) 442-9770
- Certified Registered Nurse Anesthetist
  Oxner, William D., CRNA

Svpn Neuro Williston
1213 15th Ave W
(800) 544-3579

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING ANCILLARY PROVIDERS

North Dakota (cont.)
Williston (cont.)

Svpn Neuro Williston (cont.)
- Physician Assistant
  Crowell, Kristine M., PA

Trinity Community Clinic/Western Dakota
1321 W Dakota Parkway
(701) 572-7711
- Certified Diabetic Educator
  Liepke, Karen M., CDE
- Certified Registered Nurse Anesthetist
  Oxner, William D., CRNA
  Zahn, Keith, CRNA
- Independent Laboratory
  Trinity Community Cln/We
- Nurse Practitioner
  Hickok, Evonne A., FNP
  Knapkewicz, Cami S., FNP
- Psychology
  Mugge, Jessica R., PHD

Upper Missouri District Health
110 W Broadway Ste 101
(701) 774-6400
- Nurse Practitioner
  Grondahl, Heidi L., CNP

White Drug #67
300 W 11th St
(701) 774-3923
- Home Medical Equipment
  White Drug #67

Williston Center Pediatric Therapy
1106 2nd St W
(701) 572-5974
- Speech Therapy
  Vickers, Brittany K., ST

Williston Radiology Consultants
3 East 4th St #100
(701) 577-6337
- Nurse Practitioner
  Mickelson, Barbara J., CNP
- Physician Assistant
  Blomquist, Patricia A., PA

North Dakota (cont.)
Wishek

Wishek Drug
9 S Centennial St
(701) 452-2368
- Home Medical Equipment
  Wishek Drug

Wishek Hospital Clinic Assn
1007 4th Ave S
(701) 452-2326
- Certified Registered Nurse Anesthetist
  Silbernagel, Paul J., CRNA
- Nurse Practitioner
  Benson, Paulette, FNP
  Ketterling, Marcia R., FNP
- Physician Assistant
  Hauff, Rosemary, PA
  Kosiak, Maureen A., PA
  Rau, Kay M., PA

Wishek Rural Health Clinic
1015 4th Ave S
(701) 452-2364
- Certified Registered Nurse Anesthetist
  Silbernagel, Paul J., CRNA
- Licensed Registered Dietitian
  Imdieke, Catherine B., LRD
- Nurse Practitioner
  Benson, Paulette, FNP
  Ketterling, Marcia R., FNP
- Physician Assistant
  Hauff, Rosemary, PA
  Kosiak, Maureen A., PA
  Rau, Kay M., PA

Zeeland

Zeeland Clinic
203 S Main
(701) 423-5403
- Nurse Practitioner
  Bichler, Lori M., CNP

Ohio

Ohio (cont.)
Twinsburg

Edgepark Medical Supplies - Mail Order
1810 Summit Commerce Park
(800) 321-0591
- Home Medical Equipment
  Edgepark Medical Supplies

Oklahoma
Oklahoma City

180 Medical, Inc.
5324 West Reno Ste A
(877) 688-2729
- Home Medical Equipment
  180 Medical Inc

Rhode Island
North Kingstown

Dominion Diagnostics, LLC
211 Circuit Drive
(401) 667-0855
- Independent Laboratory
  Dominion Diagnostics LLC

South Dakota
Aberdeen

Avera Medical Group Orthopedic Surgery Specialists
701 8th Ave NW Ste B
(605) 225-0430
- Physical Therapy
  Bain, Jenna, PT
  Brennan, Kelly, PT
  Clayton, Erica M., PT
  Cox, Doug, PT
  Orr, Brad, PT

Avera Medical Group Orthopedic Surgery Specialists
701 8th Ave NW Ste A
(605) 226-2663
- Physical Therapy
  Cox, Doug, PT
  Orr, Brad, PT
- Physician Assistant
  Ermer, Brian, PA
  Snyder, Sharon L., PA
  Solum, Philip, PA
  Vilhauer, Loren T., PA

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING ANCILLARY PROVIDERS

South Dakota (cont.)

Aberdeen (cont.)

Orthopedic Physical Therapy Center, Ltd
6 N Roosevelt St
(605) 725-9900

- Physical Therapy
  Goetz, Lee V., PT
  Iverson, Jaclyn N., PT
  Smid, Patricia M., PT

Orthotic & Prosthetic Specialties Inc
2211 8th Ave NE Ste 3102
(605) 725-2311

- Home Medical Equipment
  Orthotic & Prosthetic Specialties Inc

PSI Health Care, Inc.
1108 6th Ave SE
(605) 229-3462

- Home Medical Equipment
  PSI Health Care, Inc.

Sanford Home Medical Equipment
3001 6th Ave SE Ste 5
(605) 226-5690

- Home Medical Equipment
  Sanford Home Medical Equipment

State Street Pharmacy
105 S State St Ste 111
(605) 225-1945

- Home Medical Equipment
  State Street Pharmacy

Herreid

Campbell County Clinic
208 N Main St
(605) 437-2304

- Physician Assistant
  Biel, Ardalia, PA
  Schatz, Alice, PA

Lemmon

Hands On Health, Inc.
601 Main Ave
(605) 374-5844

- Occupational Therapy
  Dreiske, Lisa M., OT
- Physical Therapy
  Keller, Niomi M., PT
  Oliver, Colleen M., PT

South Dakota (cont.)

Lemmon (cont.)

Hands On Health, Inc. (cont.)

- Physical Therapy (continued)
  Thyne, Jason G., PT

West River Health Services
401 6th Ave W
(605) 374-3773

- Licensed Professional Clinical Counselor
  Jorgenson, Tara L., LPCC
- Nurse Practitioner
  Hill, Lori A., CNP

Mc Intosh

McIntosh Clinic
208 Main St
(605) 273-4335

- Nurse Practitioner
  Harper, Darci J., CNP
- Physician Assistant
  Hahne, Geralyn C., PA

Sioux Falls

Sanford Health Pathology Clinic
1305 W 18th St
(605) 333-1720

- Independent Laboratory
  Sanford Health Pathology Clinic

Texas

Lewisville

Orthofix Inc
3451 Plano Parkway
(800) 527-0404

- Home Medical Equipment
  Orthofix Inc

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING CHIROPRACTORS

Minnesota

Ada

Ada Chiropractic Clinic
406 E Main St
(218) 784-2330
Thomas, Kennedy H., DC

Barnesville

Barnesville Chiropractic
423 Front Street North
(218) 354-2148
Wahl, Sean K., DC

Breckenridge

Burud Chiropractic
1325 N Hwy 75
(218) 643-1668
Burud, Chad J., DC

Crookston

Active Health Family Chiropractic
116 4th Ave N
(218) 470-2020
Qual, Nicole K., DC

Aspen Chiropractic Clinic
116 N Main St
(218) 281-3811
Theede, Craig J., DC

Biermaier Chiropractic Clinic PA
1226 University Ave
(218) 281-6311
Biermaier, Steven J., DC

Dilworth

Kreps, David, DC
1675 Center Ave W Ste B
(218) 236-1187
Kreps, David J., DC

E Grand Forks

Ray Chiropractic, PA
418 Demers Ave
(218) 773-8403
Ray, Shanon R., DC

Minnesota (cont.)

Fertile

Hanson Chiropractic Clinic, P.A.
306 N Mill St
(218) 945-3220
Hanson, Dennis D., DC

Hawley

Hawley Chiropractic
209 6th St
(218) 483-4297
Kuhn, Daniel F., DC

Karlstad

Karlstad Family Chiropractic
205 Roosevelt
(218) 436-4264
Riley, Jana D., DC

Moorhead

Life Chiropratic Center
1032 Center Ave
(218) 233-3600
Moser, Melinda M., DC
Mosey, Michael C., DC

Marz Chiropractic PC dba Riverview Chiropractic Clinic
3505 8th St S Suite 6
(218) 236-1516
Marz, Aimee M., DC
Marz, Lucas J., DC

Med-Plus Healthcare, P.L.L.C.
2921 S Frontage Rd Ste
(218) 233-8544
Shogren, Paul, DC

Moorhead Chiropractic Clinic
213 7th St S
(218) 233-5141
Koslofsky, Nona M., DC
Lotzer, David S., DC

Moorhead Chiropractic Clinic
213 7th St S
(218) 233-5141
Lotzer, Jeffrey C., DC

Morlock Chiropractic Center Ltd
1602 30th Ave S
(218) 233-4402
Morlock, Gregg P., DC

Minnesota (cont.)

Moorhead (cont.)

Nokken Chiropractic Clinic
1220 2nd Ave S
(218) 233-1188
Downs, Jodee M., DC
Nokken, Beth A., DC
Sabourin, Jennifer L., DC

Pladson Chiropractic Clinic, PA
420 Center Ave Suite 48
(218) 236-5151
Lau, Matthew D., DC
Pladson, Jeff S., DC

Roth Family Chiropractic Inc
1906 30th Ave S
(218) 233-2517
Roth, Jason D., DC
Roth, Stacey A., DC

Storlie Family Chiropractic PC
40 4th St N
(218) 477-1120
Storlie, Troy E., DC

Thomas Chiropractic
2223 Highway 10 E
(218) 477-1145
Thomas, Kennedy H., DC

Tickel Chiropractic, PC
819 30th Ave S Ste 100
(218) 284-3030
Tickel, Tammy M., DC
Tickel, William D., DC

Stephen

Anderson Myren DC dba Stephen Chiropractic Center
121 3rd St
(218) 478-2415
Anderson, Myren D., DC

Twin Valley

Nelson Chiropractic Clinic
605 4th St NW
(218) 584-5515
Nelson, G Thomas, DC

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING CHIROPRACTORS

Minnesota (cont.)

Warren

Family Chiropractic
603 N Main St
(218) 745-6655

Pederson, Mark A., DC

Myren D Anderson, DC
105 S Division St
(218) 745-4330

Anderson, Myren D., DC

North Dakota

Beach

Holkup Chiropractic Clinic PC
110 Central Ave S
(701) 872-7520

Holkup, Jacob P., DC

Beulah

Erickson Chiropractic
212 W Main St
(701) 873-7677

Erickson, Donlyn J., DC
Voegele, Travis J., DC

Bismarck

A L Wagner Family Chiropractic
1655 N Grandview Lane
Suite 204
(701) 751-2020

Wagner, Ashley L., DC

Accelerate Health Chiropractic PLLC
120 N 3rd Street Ste 25
(701) 425-0700

Kraft, Christina L., DC

Active Life Chiropractic
535 S 7th St
(701) 255-4241

Ness, Douglas M., DC
Weigel, Charles A., DC
Weigel, Sara J., DC

Adjust Life
2000 N 19th St
(701) 255-5000

Roloff, Joel W., DC

North Dakota (cont.)

Bismarck (cont.)

Align-Mindt Chiropractic
1211 Memorial Hwy Ste 7
(701) 255-3950

Mindt III, John H., DC

Berger Chiropractic & Acupuncture
3123 N 14th St
(701) 751-3070

- Acupuncturist

Berger, Cody O., DC
Berger, Cody O., DC
Heid, Dane M., DC

Bis-Man Chiropractic Acupuncture, P. A.
207 E Front Ave Ste A
(701) 425-0797

Wiegel, Lance A., DC
Wiegel, Rachael N., DC

Capital Chiropractic & Spinal Rehab Center
2911 N 14th St Ste 102
(701) 221-2636

Anderson, Daniel E., DC
Dockter, Tonya L., DC
Miller, Shane D., DC

Chiropractic Carecentre, PC
1921 N 13th St
(701) 222-2252

Olsen, Blaine R., DC

Chuppe Chiropractic Clinic
1936 N 11th St
(701) 258-0029

Chuppe, Gregory P., DC
Chuppe, Steven V., DC
Moritz, Laci, DC

Dakota Life Chiropractic PC
1929 N Washington St
Ste Oa
(701) 255-7800

Seil, Charles M., DC
Seil, Elizabeth A., DC

Derosier, Matthew, R
1921 N 13th St
(701) 222-2252

Derosier, Matthew R., DC

North Dakota (cont.)

Bismarck (cont.)

Discover Health Chiropractic
1136 W Divide Ave
(701) 223-8237

Livesay, Travis W., DC

Family Health Chiropractic
117 E Century Ave
(701) 258-7047

Badinger, John W., DC

Focus Chiropractic
1122 Divide Ave W
(701) 258-5058

Remillard, Kelly D., DC

German, PC
1033 Basin Ave
(701) 223-6613

German, David L., DC

Gossett Chiropractic Arts, PC
1421 Mapleton Ave
(701) 250-2182

Gossett, Michael J., DC

Healthsource of Bismarck South
232 W Front Ave
(701) 751-1660

Scott, Carlyle W., DC

Innate, PC
1033 Basin Ave
(701) 223-6613

Wollmann, Troy A., DC

Jorde Chiropractic Clinic
2921 Homestead Dr
(701) 224-9008

Jorde, Dennis A., DC

Life Enhancement Clinic, PC
1023 East Capitol Ave
(701) 323-0266

Sefcik, Charles M., DC

Maximized Chiropractic
2000 N 12th St #101
(701) 751-6000

Coleman, Alex B., DC

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING CHIROPRACTORS

North Dakota (cont.)

Bismarck (cont.)

Messer Chiropractic, P.C.
1050 E Interstate Ave
#21
(701) 255-6377

Bentz, Ashleigh R., DC
Messer, Amanda L., DC

Nagel Family Chiropractic and Wellness LLC
4501 Coleman St Ste 106
(701) 214-6818

Nagel, Steven A., DC

Nelson, William, DC, PC dba Healthsource
1051 E Interstate Ave
(701) 222-8322

Chase, William M., DC
Nelson, William J., DC

Nemecek Chiropractic, PC
1431 Interstate Loop
(701) 223-5001

Nemecek, Cameron J., DC

Paape Chiropractic Clinic
433 Bismarck Expy E
(701) 258-0300

Nagel, Timothy, DC
Paape, William G., DC

Patchen, Dr Aaron, PC
2600 Gateway Ave Ste 2
(701) 751-1161

Patchen, Aaron B., DC

Pathways Chiropractic & Wellness
2600 Gateway Ave Ste 2
(701) 751-1161

Erickson, Bethany A., DC

Rummel Chiropractic PC
705 E Main Ave
(701) 258-9418

Rummel, Gregory D., DC

Ryan Koch, DC
2600 Gateway Ave Ste 2
(701) 751-1161

Koch, Ryan P., DC

North Dakota (cont.)

Bismarck (cont.)

Sanford Clinic
222 N 7th St
(701) 323-6000

Seamands, Eric D., DC

Sanford Health Chiropractic
1833 E Bismarck Expressw
(701) 323-5222

Askew, Jeffrey J., DC
Seamands, Eric D., DC

Sanford Health Chiropractic
2603 E Broadway Ave
(701) 323-5222

Askew, Jeffrey J., DC
Seamands, Eric D., DC

Shaw Chiropractic Health Institute PC
1003 E Interstate Ave
Ste 5
(701) 221-2788

Shaw, Robert D., DC

Sicble Coty, DC
1921 N 13th St
(701) 222-2252

Sicble, Coty R., DC

Southridge Chiropractic Clinic
425 S 7th St
(701) 258-8388

Gietzen, Lori J., DC
Kahl, Chad, DC
Kahl, Jamie, DC
Kjos, Rusty A., DC
Nagel, Timothy, DC
Ness, Angela K., DC
Tenbroek, Sheri L., DC

Swanson, Thomas, DC
1102 S Washington St
(701) 223-2907

Swanson, Thomas J., DC

Total Wellness Chiropractic Clinic PC
1401 Skyline Blvd
Ste 240
(701) 224-9500

Vollmers, Alicia, DC

North Dakota (cont.)

Bismarck (cont.)

Walth Robert Jr DC
1655 N Grandview Ln
Ste 204
(701) 751-2020

Walth, Robert H., DC

Winkler Chiropractic, PC
1431 Interstate Loop
(701) 223-5001

Winkler, Carol J., DC

Bottineau

Chiropractic Arts
909 11th St E
(701) 228-2275

Jorde, Erica L., DC
Pewe, Mark W., DC

Bowman

Bachmeier Chiropractic
108 N Main St
(701) 523-7454

Bachmeier, Dixie J., DC

Stafford James, DC
15 N Main St
(701) 523-4830

Stafford, James O., DC

Tri State Chiropractic Center
111 4th St NW
(701) 523-3239

Whitney, Charles F., DC

Cando

Towner County Medical Center
Hwy 281 N
(701) 968-2541

Ellenbecker, Paul D., DC
Nicholas, Lana M., DC

Carrington

Galt Chiropractic Clinic
615 Main St
(701) 652-2631

Galt, Jeffrey R., DC

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING CHIROPRACTORS

North Dakota (cont.)

Casselton

Davis Chiropractic Clinic
722 Front St
(701) 347-4006

Davis, Keith G., DC

Cavalier

Blanchard's Chiropractic Clinic
100 Division Ave N
(701) 265-8150

Blanchard, Darren E., DC

Center

Rummel Chiropractic PC
111 E Main St
(701) 794-8798

Rummel, Gregory D., DC

Cooperstown

Essential Chiropractic PLLC
402 4th St SW
(701) 797-2385

Ham, Lori J., DC

Crosby

Wehrman, Kami DC dba Crosby Chiropractic Clinic, PC
206 N Main St
(701) 965-3222

Wehrman, Kami V., DC

Devils Lake

Freije Chiropractic Center
204 College Dr N
(701) 662-3443

Freije, Bonnie K., DC

Remmick, Michael A, DC
201 6th Ave NE
(701) 662-7538

Remmick, Michael A., DC

Sad Carl, DC
204 College Dr N
(701) 662-3443

Sad, Carl F., DC

North Dakota (cont.)

Dickinson

Bell Chiropractic and Fitness PC
1462 I-94 Bus Loop E #1
(701) 483-8806

Bell, Brian, DC
Dukart, Jessica, DC

Berger Family Chiropractic, LLC
745 State Ave Ste A
(701) 483-0800

Berger, Shawn M., DC

Ficek Chiropractic, PC
562 1/2 12th St W
(701) 483-8824

Biel-Ficek, Maripat, DC
Ficek, Dion S., DC

Health and Wellness Chiropractic Center
448 21st St W Unit D2
(701) 483-6325

Dorval, Todd A., DC
Leintz, Tyler J., DC

Healthsource Chiropractic & Progressive Rehab
383 15th St W
(701) 225-3536

Eberts, Marvin M., DC

Hutzenbiler Chiropractic PC
1428 W Villard St
(701) 483-6917

Hutzenbiler, Matthias H., DC

Meyer Family Chiropractic PC
1428 West Villard St
(701) 483-6917

Meyer, Jennifer D., DC

Ouellette Chiropractic PC
745 State Ave Ste A
(701) 483-1106

Ouellette, Michelle L., DC

Peters, Timothy, DC
562 12th St W
(701) 483-1104

- Acupuncturist

Steffes, Cassandra L., DC
Peters, Timothy J., DC
Steffes, Cassandra L., DC

North Dakota (cont.)

Dickinson (cont.)

Pokorny Chiropractic Clinic, PC
1035 3rd Ave W
(701) 225-9696

Pokorny, Jeffrey D., DC

Prairie Hills Chiropractic PC
2125 Sims St Ste 3
(701) 264-7351

Knutson, Bryon E., DC

Sanford Health Occupational Medicine Clinic
1531 W Villard St Ste A
(701) 225-7575

Seamands, Eric D., DC

Simnioniw Family Chiropractic, PLLC
352 1st St E Ste D
(701) 483-1802

Simnioniw, Kylie, DC

Western Skies Chiropractic, PC
1428 W Villard St
(701) 483-8855

Kostelecky, Christina M., DC

Work Partners of ND
653 19th St W
(701) 483-1808

Kovash, Jesse L., DC

Drayton

Catherine J. H. Borud dba Drayton Chiropractic
104 E Hwy 66 Ste 4
(701) 454-3555

Borud, Catherine J., DC

Edgeley

Sundby Family Chiropractic PC
509 Main Street
(701) 883-4353

Sundby, Jessica R., DC

Edmore

Freije Chiropractic Center, PC
6895 99th Ave NE
(701) 662-3443

Freije, Bonnie K., DC

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING CHIROPRACTORS

North Dakota (cont.)

Ellendale

Ellendale Chiropractic Clinic
305 1st Ave S
(701) 349-4727

Kendall, Craig L., DC

Fairmount

Moon Chiropractic Clinic
110 Main Ave
(701) 474-5948

Moon, Derryl E., DC

Moon Chiropractic Health
110 Main Ave
(701) 474-5748

Moon, Barry L., DC

Fargo

Above & Beyond Chiropractic
2506 35th Ave SW
(701) 293-1133

St Louis, Elizabeth, DC

Active Family Chiropractic
2808 N Broadway
(701) 364-9362

Salwey, Todd A., DC

All Seasons Full Body Chiropractic Center, LLC
4325 13th Ave S Ste 5
(701) 356-0016

Bekkum, Paul M., DC

Anderson Family Chiropractic
4132 30th Ave S #102
(701) 241-7737

Anderson, Brandan A., DC

Anderson, Alisha, PC dba Anderson Family Chiropractic
4132 30th Ave S Ste 102
(701) 241-7737

Anderson, Alisha L., DC

Anderson, Jadean, PC dba Anderson Family Chiropractic
4132 30th Ave S #102
(701) 241-7737

Anderson, Jadean J., DC

North Dakota (cont.)

Fargo (cont.)

Andrew Wagner Chiropractic
4357 13 Ave S Ste 100
(701) 356-2225

Wagner, Andrew M., DC

Askland Yohe Chiropractor, Ltd
2800 S University Dr
(701) 237-0614

Yohe, Kent G., DC

Badinger Chiropractic Clinic
1617 32nd Ave S
(701) 239-4749

Badinger, Cory J., DC

Balance Chiropractic & Rehab PC
300 45th St S # 315
(701) 893-7878

Pozarnsky, Daniel I., DC

Bjorlie Chiropractic Clinic PC
1383 21st Ave N Ste A
(701) 235-8050

Bjorlie, Kevin N., DC

Body In Balance Chiropractic, LLC
4040 42 St S Ste K
(701) 893-9100

Dusek, Amy L., DC

Bossart Chiropractic
1815 South University Dr
(701) 239-4710

Bossart, Thomas D., DC

Chiropractic First, PC
1450 25th St S Ste B
(701) 298-7778

Petermeier, Jane M., DC

Chiropractic Rehabilitation Center PLLC
2280 S 45th St Ste B
(701) 364-3760

Haroldson, Erik T., DC

Clark, Raymond, DC
1306 23rd St S
(701) 235-1360

Clark, Raymond G., DC

North Dakota (cont.)

Fargo (cont.)

Core Health Chiro, PA
4955 17th Ave S Ste 108
(701) 364-2673

Barton, Dustin J., DC

Dakota Health Solutions, PC
1383 21st Ave N
(701) 365-0999

Danduran, Christopher A., DC

Dr. Robert J. Schulte, Jr., PA
2800 S University Dr
(701) 237-0710

Schulte, Robert J., DC

Drake Jason M DC PC
3301 13th Ave SW
(701) 234-0057

Drake, Jason M., DC

Dynamics Chiropractic and Rehab PLLC
3222 28th St S
(701) 232-4770

Halvorson, Shawn, DC

Essentia Health 32nd Avenue Clinic
3000 32nd Ave S
(701) 364-8000

Hager, Allen L., DC

Essentia Health South University Clinic
1702 University Dr S
(701) 364-3300

Hager, Allen L., DC

Fargo Chiropractic
1515 S University Dr
(701) 232-4922

Davis, Debra F., DC

Fargo Spine and Rehabilitation
3222 28th St SW
(701) 232-4770

Vein, Marc P., DC

Fetzer Christy, DC
1555 43 St S Suite 107
(701) 356-6700

Fetzer, Christy M., DC

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING CHIROPRACTORS

North Dakota (cont.)
Fargo (cont.)

Gillette Family Chiropractic
825 25th St S Ste C
(701) 237-4010
Gillette, Darrin S., DC

Grant, Gregory, DC
1515 S University Dr
(701) 232-4922
Grant, Gregory L., DC

Great Plains Chiropractic
3301 13th Ave SW
(701) 234-0057
Haug, Christian M., DC

Healing Arts Chiropractic, PC
3240 15th St S Ste C
(701) 451-9070
Gunderson, Mark T., DC
Paape, Kevin G., DC

Health Source of North Fargo
2802 N Broadway
(701) 451-9098
Carpenter, Courtney R., DC
Farrell, Mindy A., DC

Healthsource of Fargo-Moorhead
3175 Sienna Dr Ste 105
(701) 451-9098
Bakken-Paschke, Jessica A., DC
McManus, Matthew, DC
Orth, Mason J., DC
Wurgler, Matthew R., DC
Zimmerman, Chad R., DC

Ihry, Kevin, DC
1411 32nd St S
(701) 232-1232
Ihry, Kevin, DC

Inline Chiropractic, PLLC
300 45th St S Ste 315
(701) 205-1825
Opp, Ramey J., DC

Judisch Chiropractic
1411 32nd St S
(701) 235-0313
Judisch, Rick L., DC

North Dakota (cont.)
Fargo (cont.)

Moon Chiropractic Health
3431 4th Ave S
(701) 640-3530
Moon, Barry L., DC

Natural Health and Chiropractic, PC
1450 25 St S
(701) 241-9355
Kemper, Thomas L., DC

Optimal Health
3369 39th St S Suite 3
(701) 367-6980
Anda, Geoffrey L., DC

Origin Chiropractic Physicians
2701 9th Ave SW Ste 800
(701) 280-2955
Townley, Brook A., DC

Pausch Chiropractic
1665 43rd St S Ste 102
(701) 356-3990
Pausch, Dana J., DC

Peterson, Rodney, DC
2800 S University Dr
(701) 237-0614
Peterson, Rodney W., DC

Pure Chiropractic & Rehab, PC
300 45th St S Ste 315
(701) 893-7873
Feldner, Brad S., DC

Red River Wellness
3411 Fiechtner Dr
(701) 235-2700
Jorgensen, Michael W., DC

Renelt Family Chiropractic
1383 21st Ave N Ste A
(701) 277-5930
Renelt, Aaron M., DC

Rokke Chiropractic
1411 32nd St SW
(701) 241-4393
Rokke, Vincent O., DC

North Dakota (cont.)
Fargo (cont.)

Sanford Southpointe Clinic
2400 32nd Ave S
(701) 234-8800
Solien, Thomas P., DC

South Pointe Chiropractic
3220 18th St S Ste 2
(701) 234-0028
Olson, Timothy M., DC
Tabberson, Mary P., DC

Strive Chiropractic PC
3120 25th St S Ste V
(701) 893-4200
Grinaker, Jacob F., DC
Kerber, Joseph R., DC

Summit Chiropractic, PLLC
300 45 St S #315
(701) 356-7660
Roers, Stephanie A., DC

Syvrud Chiropractic Clinic
825 25th St S Ste C
(701) 237-5150
Syvrud, Ryan S., DC

United Health Chiropractic, PLLC
3212 14th Ave SW #2
(701) 232-2662
Schroeder, Ryan J., DC

Van Dam Chiropractic PC
2701 9th Ave SW Ste 800
(701) 280-2599
Van Dam, Scott A., DC

Venture Chiropractic
2553 Kirsten Lane South
Suite 207
(701) 730-3867
Dockter, Christopher D., DC
Dockter, Melanie A., DC
Hanson, Heidi L., DC

Vertical Health Chiropractic
4040 42nd St S Ste K
(701) 356-0080
Finley, Mathew, DC

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING CHIROPRACTORS

North Dakota (cont.)

Fargo (cont.)

Waale Chiropractic Clinic, PLLC
417 Main Ave Ste 301
(701) 365-0401

Waale, David H., DC

Walker Chiropractic PC
250 25th St S
(701) 293-8882

Walker, Charles T., DC

Walton Chiropractic Clinic
120 Broadway
(701) 237-0770

Walton, Stephen C., DC

Weiss Chiropractic Clinic
1360 10th St N
(701) 237-5517

Weiss, Carol, DC
Weiss, Joel C., DC

Flasher

Southridge Chiropractic Clinic
105 Main St N
(701) 597-3931

Tenbroek, Sheri L., DC

Garrison

Complete Chiropractic
101 N Main St
(701) 463-7808

Turck, Nathan P., DC

Kelly Chiropractic, PC
141 N Main St
(701) 463-2988

Kelly, Krista C., DC

Glen Ullin

Glen Ullin Chiropractic Clinic
602 Ash Ave E
(701) 348-3143

Gietzen, Lori J., DC

Hometown Wellness, PC
115 B St S
(701) 878-4300

Coleman, Sandee, DC

North Dakota (cont.)

Grafton

Blanchard Chiropractic
Highway 17 W
(701) 352-1690

Blanchard, Darren E., DC
Blanchard, Jerry D., DC

- Licensed Manipulative Therapist
  Blanchard, Jerry D., DC

Grafton Chiropractic Clinic, P.C.
728 Hill Ave
(701) 352-0400

Jelinek, Jonathan E., DC

Grand Forks

A Schlager Chiropractic Clinic
2303 S Washington Ste I
(701) 775-8462

Schlager, Todd A., DC

Advance Chiropractic Clinic
2840 19th Ave S
(701) 772-2670

Fulp, John T., DC
Gruhot, Kevin K., DC

Altru At Choice
4401 S 11th St
(701) 732-7620

Howson, Christopher J., DC

Benson Chiropractic
824 University Ave Ste A
(218) 230-1700

Benson, Rachel J., DC

Chiro Rx Ltd
2625 24 Ave S Ste B
(701) 746-7979

Berg, Phillip W., DC

Chirocenter One
2812 17th Ave S Ste C
(701) 775-0223

Jongeward, Brian V., DC

Dallman Chiropractic PC
1395 S Columbia Rd #B
(701) 775-3215

Dallman, John E., DC

North Dakota (cont.)

Grand Forks (cont.)

Grand Forks Chiropractic
3001 S Columbia Rd Ste C
(701) 795-8818

Walker, Jody A., DC

Heartland Clinic of Chiropractic
2525 Demers Ave Suite B
(701) 746-5977

Kiefat, Daniel G., DC

McIntyre Chiropractic, PLLC
2600 Demers Ave #110
(701) 772-3505

McIntyre, Jordan J., DC

Midwest Chiropractic
2600 Demers Ave #110
(218) 773-9245

Galstad, Richard A., DC

New Horizon Chiropractic & Wellness Center, PLLC
2100 S Columbia Rd
Ste 114
(701) 757-2225

Weiss, Nathan A., DC

Performance Chiropractic
4350 S Washington St
Ste 100
(701) 732-2888

Anderson, Kristian R., DC
Hallgren, Stacy L., DC

Plains Chiropractic & Acupuncture PC
3750 32nd Ave S Ste 103
(701) 775-1034

Muth, Carson C., DC
Muth, Natalie N., DC

Red River Family Chiropractic, PC
1425 S Columbia Rd Ste 3
(701) 746-8636

Thomsen, Bradley R., DC

Renewed Hope Chiropractic & Wellnes PLLC
1726 S Washington St
Ste 79
(701) 738-0990

Swenson, Garret C., DC
Swenson, Sheila L., DC

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING CHIROPRACTORS

North Dakota (cont.)
Grand Forks (cont.)

Waind Chiropractic and Acupuncture
2506 S Washington St
(701) 746-5477

Waind, Michael J., DC

Granville

McCabe Family Chiropractic, PC
121 Main St S
(701) 776-7676

- Acupuncturist
  McCabe, Tobias T., DC
  McCabe, Tobias T., DC

Gwinner

Waswick Chiropractic
10 N Main St
(701) 678-2431

Waswick, Gerald M., DC

Hankinson

Hankinson Family Chiropractic
101 1st Street NE
(701) 242-7200

Salwey, Todd A., DC

Harvey

Dakota Plains Chiropractic
817 Lincoln Ave
(701) 324-2262

Gottenborg, Robb J., DC

Weber Chiropractic Clinic
1008 Adams Ave
(701) 324-2335

Weber, Genevieve E., DC

Hazen

Isaak Chiropractic of Hazen
301 4th Ave NE
(701) 748-4400

Isaak, Chad, DC

Pfliger Chiropractic Clinic PC
706 8th Ave NE
(701) 748-3303

Pfliger, Duane J., DC

North Dakota (cont.)
Hazen (cont.)

Swanson Chiropractic, PC
612 7th St NE
(701) 748-2136

Swanson, William C., DC
Winkler, Kyle K., DC

Hebron

Hebron Chiropractic Clinic
811 1/2 Main St
(701) 878-4131

Gietzen, Lori J., DC

Hometown Wellness, PC
725 Main St
(701) 878-4300

Coleman, Sandee, DC

Hillsboro

Hillsboro Chiropractic Clinic
322 4th Ave SE
(701) 636-4606

Bishop, Michael E., DC
Smith, Aimee L., DC

Trail County Chiropractic
102 1st St SW
(701) 636-2251

Leeseberg, Thomas J., DC

Horace

Horace Family Chiropractic, PC
534 N Main St Unit A
(701) 532-3100

Schultz, Jeremy J., DC
Sundby, Haley K., DC

Jamestown

Absolute Chiropractic
623 10th St SE
(701) 252-6509

Purcell, Robert J., DC

Essentia Health Jamestown Clinic
2430 20th St SW
(701) 253-5300

Brown, Jeffrey D., DC

North Dakota (cont.)
Jamestown (cont.)

Iverson, Kenn, DC, PC
312 2nd Ave SW Ste 101
(701) 252-2424

Iverson, Kenn E., DC

Qual Chiropractic
805 10th St SE
(701) 252-4700

Goehner, Matthew, DC
Qual, Richard W., DC

Schmidt Chiropractic Clinic
102 2nd Ave SW
(701) 251-1550

Hann, Jerrod, DC
Heim, Heidi H., DC
Schmidt, Dwight B., DC
Schmidt, Nicholas D., DC

Siefken Chiropractic
701 1st Ave S
(701) 252-0569

Siefken, Arnold G., DC

Thorlakson Chiropractic Services
1015 5th Ave NE
(701) 952-9400

Thorlakson, Mika S., DC

Lamoure

Black Chiropractic
107 2nd Ave NE
(701) 883-4276

Black, Carl R., DC

Sundby Family Chiropractic
100 1st Ave SW
(701) 883-4353

Sundby, Dana P., DC
Sundby, Jessica R., DC

Larimore

Larimore Chiropractic Clinic PLLC
320 Booth Ave
(701) 343-6496

Byrd, Nancy M., DC
Byrd, Rex J., DC

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING CHIROPRACTORS

North Dakota (cont.)

Lidgerwood

Valley Spine Center Inc
39 Wiley Ave S
(701) 538-4002
Dohman, Robb Q., DC

Linton

Nagel Family Chiropractic and Wellness LLC
116 S Broadway
(701) 214-6818
Nagel, Steven A., DC

Wangler, Leo, DC
118 Broadway St S
(701) 254-4319
Wangler, Leo J., DC

Lisbon

Herring Chiropractic Clinic
12 10th Ave W
(701) 683-5272
Herring, Richard G., DC

Lisbon Chiropractic Clinic
906 Main St
(701) 683-4582
Olson, Chad A., DC
Williams, Corey C., DC

Sheyenne Valley Chiropractic
15 11th Ave W
(701) 683-5337
Bartosh-Heacox, Annette I., DC
Sandness-Rieger, Jodi K., DC

Mandan

Carter Chiropractic PC dba Spine Care Chiropractic
408 1st St NW #A
(701) 663-2992
Carter, Joshua S., DC

Kersten Chiropractic PC
1800 E Main St Ste B
(701) 663-2700
Kersten, Brad R., DC

Leingang Chiropractic & Wellness
307 1st St NE
(701) 663-0488
Leingang, Andrea R., DC

North Dakota (cont.)

Mandan (cont.)

Mandan Chiropractic Clinic / Advanced Spine & Rehab
1302 1st St NE
(701) 663-0480
Isaacson, Erik R., DC

Newgard Chiropractic Clinic
104 W Main St
(701) 663-5855
Newgard, Joel A., DC

Newgard, Scott, DC
104 W Main St
(701) 663-5855
Newgard, Scott L., DC

Schoepp Family Chiropractic PC
405 Burlington Street SE
(701) 667-6290
Schoepp-Erhardt, Debra E., DC

Schwartz Family Chiropractic Center PC
503 E Main St Plaza 2
(701) 663-3380
Motta, Rachel E., DC
Schwartz, Kent H., DC

Mayville

Omdalen Chiropractic
45 1st Ave SE
(701) 786-4024
Omdalen, Scott E., DC

Mc Clusky

Southridge Chiropractic Clinic
122 2nd St E
(800) 458-8388
Ness, Angela K., DC

Minot

Active Body Chiropractic PC
2010 4th Ave NW Ste 106
(701) 852-1665
Dammen, Jason S., DC

Back To Back Chiropractic
1050 31st Ave SW Ste D
(701) 838-0223
Schuler, Jerome R., DC

North Dakota (cont.)

Minot (cont.)

Brintnell Chiropractic PC
720 20th Ave SW
(701) 838-8000
Brintnell, Jason R., DC

Chirocare Family Center, PC
309 27th St NW
(701) 852-0596
Borgen, Amy L., DC

Chiropractic Arts Clinic
1001 20th Ave SW
(701) 852-0158
Falcon, Christopher W., DC
Howe, Brenden J., DC
Redington, Dean, DC
Roedocker, Travis, DC

Chiropractic Health & Wellness
1825 16th St SW
(701) 838-5000
Lipp, Steven J., DC

Chiropractic Health and Welless
1825 16th St SW
(701) 838-5000
Burckhard-Teets, Tifany A., DC

Ellenbecker Chiropractic, PC
1050 31 Ave SW Ste B
(701) 838-1987
Ellenbecker, Paul D., DC

Horizon Family Chiropractic
1400 37th Ave SW Ste C
(701) 837-9355
Samson, Matthew J., DC

Infinite Health Chiropractic
1020 N Broadway Ste B
(701) 837-1020
Larson, Annika, DC

Kelly Chiropractic, PC
1415 2nd Ave SW
(701) 837-5733
Kelly, Krista C., DC
Kelly, Michael A., DC

Kessler Chiropractic
1809 S Broadway Ste Y
(701) 852-5416
Kessler, David S., DC

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING CHIROPRACTORS

North Dakota (cont.)

Minot (cont.)

Klein Chiropractic & Wellness PC
309 27th Ave SW
(701) 852-3223
Klein, Sara J., DC

Lifetime Chiropractic
1050 31 Ave SW Ste C
(701) 839-2010
Ellenbecker, Amy L., DC

Mid Town Chiropractic
212 S Broadway #4
(701) 838-7676
Kraft, Bradley D., DC

Mosser Chiropractic PC
1825 16th St SW
(701) 838-5000
Mosser, Mark, DC

Pearson Chiropractic, PLLC
1310 E Burdick Expy
Ste A
(701) 852-5230
Pearson, Devanni L., DC
Pearson, Paul S., DC

Pederson Chiropractic Clinic PC
720 20th Ave SW
(701) 838-8000
Jones, Mackenzie J., DC
Pederson, Steven S., DC

Rime Chiropractic
104 20 Ave SW
(701) 852-5736
Rime, Richard A., DC

Saunders Chiropractic Health
1015 S Broadway Suite 16
(701) 838-2752
Saunders, William S., DC

Staci Borkhuis Chiropractic, PC dba Cornerstone Chiropractic
1350 20th Ave SW
(701) 852-2800
Borkhuis, Staci J., DC
Hanson, Matthew C., DC
Myers, Travis J., DC

North Dakota (cont.)

Napoleon

Focus Chiropractic
420 Main Ave
(701) 754-2323
Remillard, Kelly D., DC

Total Life Chiropractic
123 Lake Ave W
(701) 754-2345
Weigel, Charles A., DC

New England

Ficek Chiropractic, PC
820 2nd Ave W
(701) 579-4507
Ficek, Dion S., DC

New Rockford

Nicolai Chiropractic Center, PC
207 1st Ave S
(701) 947-2121
Nicolai, Michael K., DC
Smith, Zachary T., DC

New Salem

Washburn Chiropractic, Inc dba New Salem Chiropractic Clinic
1200 N 8th St
(701) 843-8888
Thompson, John A., DC

Northwood

Northwood Chiropractic, PC
12 N Park St
(701) 587-6300
Thorsgard, Erik J., DC

Oakes

Back To Health Chiropractic Clinic
9 5th St N
(701) 742-3386
Cline, Nicole R., DC

Dethlefsen Chiropractic
14 N 5th St
(701) 742-2750
Dethlefsen, Brian L., DC

North Dakota (cont.)

Ray

Fischer Family Chiropractic
Ray Mini Mall - Main St
(701) 568-6824
Fischer, Christine A., DC
Fischer, Derek D., DC

Rugby

Heart of America Johnson Clinic
800 3rd Ave SW
(701) 776-5235
Pederson, Steven S., DC

McCabe Family Chiropractic, PC
218 S Main Ave
(701) 776-7676
McCabe, Tobias T., DC

Stanley

Johnson, Kurtis, DC
112 S Main St
(701) 628-2136
Johnson, Kurtis T., DC

Mortensen Chiropractic
108 Main St
(701) 628-7246
Mortensen, Gregory L., DC

Steele

Kidder County Chiropractic
214 4th St NW
(701) 475-5555
Ruff, Dannielle L., DC

Steele Chiropractic Clinic
105 Broadway East
(701) 475-2802
Kahl, Jamie, DC
Tenbroek, Sheri L., DC

Tioga

Chiropractic Care Clinic
23 N Main St
(701) 664-2042
Krieger, Sharon L., DC

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING CHIROPRACTORS

North Dakota (cont.)

Towner

Align Chiropractic PC
2 3rd Ave SW
(701) 537-2080

Jorde, Erica L., DC

Turtle Lake

Anderson Health & Wellness, PC
416 Kundert St
(701) 221-2636

Anderson, Daniel E., DC

Southridge Chiropractic Clinic
416 Kundert St
(701) 448-9225

Ness, Angela K., DC

Valley City

Central Ave Chiropractic PC
323 Central Ave N
Ste 202
(701) 845-0709

Sayler, Larry E., DC
Sayler, Nathan T., DC

Essentia Health Valley City Clinic
132 4th Ave NE
(701) 845-8060

Brown, Jeffrey D., DC

Foell Chiropractic Clinic
150 9th Ave NW
(701) 845-3132

Foell, Kim B., DC

Thomsen Chiropractic PC dba Thomsen Chiropractic
1530 W Main Street
(701) 845-2481

Thomsen, Brent L., DC

Wahpeton

Cook Chiropractic Clinic
103 9th St N Ste 1
(701) 642-1913

Cook, David M., DC
Cook, James R., DC

Dakota Chiropractic Clinic
320 Dakota Ave
(701) 642-5600

Jacklitch, Michael D., DC

North Dakota (cont.)

Wahpeton (cont.)

Hornstein Family Chiropractic
715 Dakota Ave Ste 2
(701) 672-1300

- Acupuncturist
  Hornstein, Andrea L., DC
  Hornstein, Andrea L., DC

Valley Spine Center Inc
319 11th St N
(701) 642-6480

Dohman, Robb Q., DC
Mitskog, Alisa T., DC

Washburn

A L Wagner Family Chiropractic PC
1167 Border Lane
(701) 462-3389

Wagner, Ashley L., DC

Washburn Chiropractic, PC
Hwy 83 County Rd 22
(701) 462-3531

Thompson, John A., DC

Watford City

Trauger Chiropractic Center
105 2nd Ave NE
(701) 842-2917

Trauger, Gary L., DC

Watford City Chiropractic
105 9th Ave SE Suite 3
(701) 842-3100

Darr, Wade A., DC

West Fargo

Aker Chiropractic Ltd
1150 Prairie Pkwy
Ste 102
(701) 356-4900

Aker, Janyne F., DC
Western, Heidi J., DC

Nitschke Chiropractic
726 13th Ave E
(701) 282-4948

Nitschke, Harvey L., DC

North Dakota (cont.)

West Fargo (cont.)

The Clinic: Fhsc, PC
1207 Prairie Pkwy
(701) 492-0696

Jenkins, Ryan T., DC
Jones, Aaron B., DC
Kiecker, Samantha R., DC

West Fargo Chiropractic Center PC
205 Sheyenne Street
(701) 282-2919

Hasse, Robert L., DC
Redington, Bruce L., DC
Redington, Jonathan H., DC
Salwey, Todd A., DC

Williston

Basin Health and Spine Center PLLC Chase Lee Theige
1319 2nd Ave W
(701) 577-2472

Theige, Chase L., DC

Ceynar Chiropractic
2315 2 Ave W
(701) 572-8796

Ceynar, Kyle R., DC
Ceynar, Robert G., DC

Fischer Family Chiropractic
226 14 St W
(701) 774-8277

Fischer, Christine A., DC
Fischer, Derek D., DC

Full Circle Chiropractic PLLC
2204 2nd Ave W
(701) 774-5036

Carr, Lacee N., DC

Health Source of Williston, PC
20 West Broadway
(701) 774-3635

Nelson, Eric R., DC

Kovacs Chiropractic and Nutrition Center
2304 11th Ave W Ste 104
(701) 774-3832

Kovacs, Thomas J., DC

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING CHIROPRACTORS

North Dakota (cont.)

Williston (cont.)

Wright Chiropractic Office
2204 2nd Ave W
(701) 572-2951

Wright, Ronald A., DC

Wishek

Wishek Chiropractic Clinic
20 N 5th St
(701) 452-2593

Froehling, Eric J., DC
Volk, Clarissa K., DC

South Dakota

Aberdeen

Ivey Chiropractic Clinic
221 6th Ave SE Ste 3
(605) 225-7414

Ivey, Thomas L., DC
Johnson, Taylor J., DC

Northeast Chiropractic
416 S Dakota St Ste 1
(605) 262-4059

Anderson, Taylor R., DC

Winkler Chiropractic Clinic
803 S Main St
(605) 225-8288

Winkler, Barry J., DC

Eden

Northeast Chiropractic
319 Taft Ave
(605) 262-4060

Anderson, Taylor R., DC

Herreid

Wishek Chiropractic Clinic
121 Main St N
(605) 437-2252

Volk, Clarissa K., DC

Lemmon

Deutscher Clinics PC
11 E 4th St
(605) 374-5654

Deutscher, Joel A., DC

South Dakota (cont.)

Lemmon (cont.)

Fuerst, James, DC
1003 5th Ave W
(605) 374-5761

Fuerst, James R., DC

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING BEHAVIORAL HEALTH PROVIDERS

Minnesota

Ada

Red River Counseling PLLC
110 3rd Ave E
(218) 227-0338

- Psychology
  Hamann, Linda R., MS

Breckenridge

R P Ascano & Associates Inc.
614 Nebraska Ave
(218) 643-3867

- Psychology
  Ascano, R P., PHD

Solutions Counseling Services Inc
415 1/2 Nebraska Ave
(218) 643-9330

- Clinical Social Worker
  Thompson, Pamela J., LICSW

St Francis Medical Center
2400 St Francis Drive
(218) 643-3000

- Licensed Addiction Counselor-Chemical Dependency
  Clark, Sherri E., LAC
- Psychiatry (MD/DO)
  Torson, Nancy E., MD
- Psychology
  Ketterling, Jan E., PSYD
  Molstre, John A., PHD

Crookston

Altru Crookston
400 S Minnesota St
(218) 281-9100

- Clinical Social Worker
  Tescher, Jodi L., LICSW
- Psychiatry (MD/DO)
  Madaram, Kondal R., MD

Northwestern Mental Health Center, Inc.
603 Bruce St
(218) 281-3940

- Clinical Social Worker
  Anderson, Michael R., LICSW
  Berg, Carolyn K., LICSW
  Christie, Don, LICSW
  Denison, Janet, LICSW
  Green, Christopher J., LICSW

Minnesota (cont.)

Crookston (cont.)

Northwestern Mental Health Center, Inc. (cont.)

- Clinical Social Worker (continued)
  Hammer, Denise E., LICSW
  Hellerud, Tricia J., LICSW
  Kronlund, Shannon L., LICSW
  Mack, Brenda M., LICSW
  Miller, Tara E., LICSW
  Rustad, Erika M., LICSW
  Skavlem, Cheri L., LICSW
- Licensed Professional Clinical Counselor
  Amundson, Janet L., LPCC
  Serna, Carrie L., LPCC
  Solheim, Sheri L., LPCC
  Taylor, Heather, LPCC
- Licensed Professional Counselor/Therapist
  Williams, Gail E., LPCC
- Psychiatry (MD/DO)
  Jarmuskewicz, James R., MD
  Michels, Paul O., MD
- Psychology
  Campbell, Karen L., PHD
  Gudvangen, Denise R., PSYD
  Jorgens, Michal C., PHD
  Pedersen, Heather A., PHD

Playworks Therapy
203 W Fletcher
(218) 281-1510

- Clinical Social Worker
  Colley, Kathleen P., LICSW

Riverview Health dba Glenmore Recovery Center
23616 Us Hwy 2 SW
(218) 281-9511

- Licensed Addiction Counselor-Chemical Dependency
  Buseth, Oliver, LAC
  Johnson, Ashley A., LAC
  Niffenegger, Angela, LAC
  Reff, Thomas M., LAC

Riverview Specialty Clinic
323 S Minnesota St
(218) 281-9595

- Psychology
  King, Brenda J., PHD

Minnesota (cont.)

Crookston (cont.)

Tri County Community Corrections
816 Marin Ave Ste 110
(218) 470-8134

- Licensed Addiction Counselor-Chemical Dependency
  Thibert, Mary, LAC

E Grand Forks

Patrick Hart, LPCC
1125 18th Ave SE
(218) 289-6177

- Licensed Professional Clinical Counselor
  Hart, Patrick E., LPCC

Riverview Health dba Glenmore Recovery Center
1424 Central Ave NE
(218) 773-4994

- Licensed Addiction Counselor-Chemical Dependency
  Buseth, Oliver, LAC

Fosston

Northwestern Mental Health Center, Inc - Fosston
102 Sather Dr
(218) 281-3940

- Clinical Social Worker
  Anderson, Michael R., LICSW

Hawley

Sanford Hawley Clinic
1412 Main St
(218) 483-3564

- Psychology
  Gatheridge, Brian, PHD

Sanford Hawley Clinic
1412 Main St
(218) 483-3564

- Psychology
  Gatheridge, Brian, PHD

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING BEHAVIORAL HEALTH PROVIDERS

Drake Counseling Services, Inc
715 11 St North
Suite 204
(218) 477-1092

- Licensed Addiction Counselor-Chemical Dependency
  Flann, Kayla J., LAC
  Hersrud, Jacqueline M., LAC
  Johnson, Janna M., LAC

Duke, Bill, PhD
420 Center Ave Ste 7
(701) 241-9281

- Psychology
  Duke, Bill J., PHD

Duke, Denise, EDD
420 Center Ave Ste 7
(701) 241-9281

- Psychology
  Duke, Denise M., EDD

Hendrix Health Center
1104 7th Ave S
(218) 477-2623

- Psychology
  Bertelsen, Lora, PHD
  Lall, Rita, MS

Integrated Counseling Services Inc
1132 28th Ave S Ste 102
(218) 204-1183

- Psychology
  Follingstad, Carol C., PSYD

Karen Knutson, PhD
1506 Main Ave Ste 101
(218) 287-2872

- Psychology
  Knutson, Karen, PHD

Kolotkin, Richard, PhD
403 Center Ave Ste 601
(701) 280-2484

- Psychology
  Kolotkin, Richard A., PHD

Kuznia Colette C. LPCC
403 Center Ave Ste 405
(218) 233-9426

Kuznia Colette C. LPCC (cont.)

- Licensed Professional Clinical Counselor
  Kuznia, Colette C., LPCC

Lakeland Mental Health Center Inc
1010 32nd Ave S
(218) 233-7524

- Clinical Social Worker
  Kuntz, Dawn M., LICSW
  Larson, Julie D., LICSW
  Martin, Brian J., LICSW
  May, Coleen R., LICSW
  Ross, Katherine M., LICSW
  Steer, Abby L., LICSW
  Toutges, Cheryl, LICSW
  Weickert, Craig L., LICSW
  Wieser, Allison M., LICSW
- Licensed Professional Clinical Counselor
  Stielow, Ashley L., LPCC
- Psychiatry (MD/DO)
  Dizon, Amador M., MD
  Erickson, Chad C., MD
  Michels, Paul O., MD
  Staton, R D., MD
- Psychology
  Molstre, John A., PHD

Lee-Eckes, Melissa, LICSW
1506 Main Ave Ste 102
(218) 443-0642

- Clinical Social Worker
  Lee-Eckes, Melissa A., LICSW

Prairie St Johns
2925 20th St S
(218) 284-0300

- Clinical Social Worker
  Leverence, Melissa, LICSW
  Madler, Tamara, LICSW

Red River Counseling PLLC
403 Center Ave Ste 410
(218) 227-0338

- Psychology
  Hamann, Linda R., MS

Sanford Moorhead Clinic
4000 28th Ave S
(701) 234-3200

- Clinical Social Worker
  Foldesi-Penas, Tracy M., LICSW
  Hubrig, Joni, LICSW
- Psychiatric Nurse
  Cameron, Kathryn M., CNS

Sanford Moorhead Clinic
4000 28th Ave S
(701) 234-3200

- Clinical Social Worker
  Brown, Chad J., LICSW
  Foldesi-Penas, Tracy M., LICSW
  Hubrig, Joni, LICSW
- Psychiatric Nurse
  Cameron, Kathryn M., CNS
- Psychology
  Maley, Robyn, PSYD
  Preussler, Rebecca S., PSYD

Sanford Moorhead Clinic
4000 28th Ave S
(701) 234-3200

- Psychiatric Nurse
  Cameron, Kathryn M., CNS
- Psychiatry (MD/DO)
  Fleissner, Rachel M., MD
- Psychology
  Maley, Robyn, PSYD

Solutions Behavioral Healthcare Professionals, Inc.
891 Belsly Blvd
(218) 287-4338

- Clinical Social Worker
  Gast, Kelli A., LICSW
  Grandpre, Brian M., LICSW
  Joyce, Charles M., LICSW
  Lovehaug, Michele L., LICSW
  Moen, Kristin M., LICSW
  Moynihan, Peter J., LICSW
  Narum, Denette M., LICSW
  Stallman, Sara A., LICSW
- Psychiatry (MD/DO)
  Carlson, David L., MD
  Hanisch, Stefanie U., MD
- Psychology
  Cox, Joseph M., PSYD
  Ochsendorf, Amy L., PSYD

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING BEHAVIORAL HEALTH PROVIDERS

Minnesota (cont.)

Moorhead (cont.)

Solutions Behavioral Healthcare Professionals, Inc. (cont.)
- Psychology (continued)
  Paulson, Michael D., PHD
  Witte-Bakken, Jan K., PHD

The Village Family Service Center
1401 8 St S
(701) 451-4811
- Clinical Social Worker
  Bernardy, Amanda N., LICSW
  Medenwald, Joni L., LICSW

Ulen

Sanford Health Ulen Clinic
108 Viking Ave W
(218) 596-8867
- Psychiatry (MD/DO)
  Lawrence, Scott A., MD

Montana

Sidney

District II Alcohol & Drug
209 2 St SE
(406) 433-4097
- Licensed Addiction Counselor-Chemical Dependency
  Anderson, Tim G., LAC

North Dakota

Ashley

Ashley Medical Center
612 Center Ave N
(701) 288-3448
- Psychiatry (MD/DO)
  Oliveira-Filho, Edgar K., MD

Beulah

Coal Country Community Health Center
1312 Highway 49 N
(701) 873-4445
- Clinical Social Worker
  Herman, Melissa M., LICSW
- Licensed Addiction Counselor-Chemical Dependency
  Herman, Melissa M., LAC
  Oster, Sharold E., LAC

North Dakota (cont.)

Beulah (cont.)

Coal Country Community Health Center (cont.)
- Licensed Addiction Counselor-Chemical Dependency (continued)
  White, Darlene S., LAC

Bismarck

A Balanced Mind Psychiatric Wellness Center
4023 State St Ste 100
(701) 751-3737
- Psychiatry (MD/DO)
  Delap, Susan E., MD

A Change of Heart
1424 W Century Ave
Ste 207
(701) 471-9820
- Clinical Social Worker
  Colton, Deborah D., LICSW

Alliance Mediation & Therapy, PC
418 E Broadway Ave
Ste 216
(701) 751-1549
- Clinical Social Worker
  Huebschwerlen, Stephen, LICSW

Anchor Christian Counseling Inc
1501 N 12th St
(701) 255-3325
- Licensed Professional Clinical Counselor
  Holden, Harley A., LPCC

Basaraba Counseling Service
433 E Bismarck Expwy #3
(701) 224-1615
- Licensed Addiction Counselor-Chemical Dependency
  Basaraba, Rose, LAC

Center For Family Medicine
701 E Rosser
(701) 751-9500
- Licensed Professional Clinical Counselor
  Luger, Brynn, LPCC

North Dakota (cont.)

Bismarck (cont.)

Chambers & Blohm Psychological Services, PC
309 N Mandan St Ste 1
(701) 323-0924
- Clinical Social Worker
  Bosch, Debra M., LICSW
- Licensed Addiction Counselor-Chemical Dependency
  Weisz, Shannon P., LAC
- Psychiatric Nurse
  Fike, Michelle M., PNU
  Hellman, Lauree L., PNU
- Psychology
  Blohm, Kathy, PHD
  Johnson, Robert A., PHD
  Weisz, Shannon P., PSYD

Charley Joyce, LICSW, Counseling & Consultation, LLC
200 E Main Ave Ste 102a
(701) 471-6487
- Clinical Social Worker
  Joyce, Charles M., LICSW

Choices Counseling & Educational Center
1655 N Grandview Ln 204
(701) 751-2020
- Licensed Professional Clinical Counselor
  Herner, Diana L., LPCC

Crosspoint Counseling
1655 N Grandview Lane
#204
(701) 751-2020
- Licensed Professional Clinical Counselor
  Mitzel, Julie M., LPCC

Dakota Institute of Trauma Therapy PC
4023 State St Ste 120
(701) 751-4447
- Clinical Social Worker
  Ritz, Lynnea J., LICSW
- Licensed Addiction Counselor-Chemical Dependency
  Klein-Buffington, Shelley K., LAC

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING BEHAVIORAL HEALTH PROVIDERS

Decoteau Trauma-Informed Care & Practice, PLLC Td
515 1/2 E Broadway Ave
Ste 106
(701) 751-0443

- Clinical Social Worker
  Chaussee, Jerome, LICSW
  Herzog, Susan K., LICSW
- Psychology
  Decoteau, Tami J., PHD
  Gustafson, Lisa A., PHD

Haugen, Stacey, CNS
6221 University Dr
(701) 258-4483

- Psychiatric Nurse
  Haugen, Stacey S., CNS

Heartview Foundation
101 E Broadway Ave
(701) 222-0386

- Licensed Addiction Counselor-Chemical Dependency
  Carlson, Bruce L., LAC
  Ell, Candace J., LAC
  Fetting, Brenda M., LAC
  Gerhardt, Ronald J., LAC
  Meier, Shawn M., LAC
  Miller, Kay A., LAC
  Olson, Darcy C., LAC
  Peet, Roger M., LAC
  Schwan, Bruce, LAC
  Schwehr, Marjean L., LAC
  Snyder, Kurt A., LAC
  Stroup-Menge, Elizabeth A., LAC
- Psychiatry (MD/DO)
  Henke, Melissa J., MD
- Psychology
  Peterson, Peter, PHD

Kehrwald, Edward, PhD
721 Memorial Hwy
(701) 224-1897

- Psychology
  Kehrwald, Edward, PHD

Kuchler, Christine, PhD
721 Memorial Highway
(701) 224-1897

- Psychology
  Kuchler, Christine, PHD

Link Counseling Service, PC
1655 N Grandview Lande
#204
(701) 751-2020

- Licensed Professional Clinical Counselor
  Link, Annette, LPCC

Link Psychological Services, PC
1424 W Century Ave
Suite 207
(701) 223-3571

- Psychology
  Link, James P., PSYD

Mueller, Karen, LICSW
400 E Broadway Ste 611
(701) 223-7540

- Clinical Social Worker
  Mueller, Karen L., LICSW

New Freedom Center
905 E Interstate Ave
(701) 222-4673

- Licensed Addiction Counselor-Chemical Dependency
  Elefson, Richard D., LAC
  Knopik, James A., LAC

Nu Vation Health Services
600 2 St S Ste 201
(701) 258-3780

- Clinical Social Worker
  Beck, Dean M., LICSW
  Porter, Theresa A., LICSW

Pathway To Freedom
418 E Rosser Ave Ste A
(701) 426-6308

- Licensed Addiction Counselor-Chemical Dependency
  Olson, Jeff R., LAC

Resiliency Clinical Services
515 1/2 E Broadway Ave
#106
(701) 751-2777

- Clinical Social Worker
  Herzog, Susan K., LICSW

Sanford Children's North Clinic
765 W Interstate Ave
(701) 323-3700

- Psychology
  Doerner, Mark, PHD

Sanford Clinic
222 N 7th St
(701) 323-6000

- Clinical Social Worker
  Brown, Sharon E., LICSW
  Stafford, Darla J., LICSW
- Psychiatric Nurse
  Melberg, Tiffany A., PNU
  Schirado, Kevin G., CNS
- Psychiatry (MD/DO)
  Shrestha, Sacheen, MD
- Psychology
  Brown, Marland C., PSYD
  Doppler, Matthew J., PHD

Sanford Health Dakota Childrens Advocacy Center
200 E Main St #301
(701) 323-5626

- Licensed Professional Clinical Counselor
  Condol, Paula J., LPCC
  Hilfer, Shannon L., LPCC

Sanford Medical Center
300 N 7th St
(701) 323-6000

- Clinical Social Worker
  Brown, Sharon E., LICSW
  Charbonneau, Lori, LICSW
  Stafford, Darla J., LICSW
- Licensed Professional Clinical Counselor
  Condol, Paula J., LPCC
  Hilfer, Shannon L., LPCC
- Psychiatric Nurse
  Melberg, Tiffany A., PNU
- Psychiatry (MD/DO)
  Balf, Gabriela, MD
  Belzer-Curl, Gretchen G., MD
  Collier, Jeanine S., MD
  Gibson, David K., MD
  Haaland, Robin M., MD
  Henke, Melissa J., MD
  Huber, Cheryl, MD
  Pathak, Prem N., MD

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING BEHAVIORAL HEALTH PROVIDERS

Sanford Medical Center (cont.)
- Psychiatry (MD/DO) (continued)
  Shrestha, Sacheen, MD
- Psychology
  Arndorfer, Richard E., PHD
  Brown, Marland C., PSYD
  Doerner, Mark, PHD
  Doppler, Matthew J., PHD
  Ghering, Karli, PHD
  Reno, Claudette M., PHD
  Schaaf Gallagher, Marie A., PHD

Sanford Seventh and Rosser Clinic
414 N 7th St
(701) 323-6815
- Clinical Social Worker
  Bashus, Sara R., LICSW
  Charbonneau, Lori, LICSW
  Stafford, Darla J., LICSW
- Psychiatric Nurse
  Melberg, Tiffany A., PNU
  Schirado, Kevin G., CNS
- Psychiatry (MD/DO)
  Balf, Gabriela, MD
  Gibson, David K., MD
  Haaland, Robin M., MD
  Henke, Melissa J., MD
  Huber, Cheryl, MD
  Pathak, Prem N., MD
  Shrestha, Sacheen, MD
- Psychology
  Arndorfer, Richard E., PHD
  Doerner, Mark, PHD
  Doppler, Matthew J., PHD
  Ghering, Karli, PHD
  Herrick, Christen, PHD
  Reno, Claudette M., PHD
  Schaaf Gallagher, Marie A., PHD

Soul Survivor Counseling Services, PC
1120 College Dr Ste 201
(701) 258-2008
- Licensed Professional Clinical Counselor
  Martin, Andrea J., LPCC

St Alexius Medical Center
900 E Broadway Ave
(701) 530-7194
- Clinical Social Worker
  Schoenhard, Kari J., LICSW
  Wangler, Valentine, LICSW
- Licensed Addiction Counselor-Chemical Dependency
  Motis, Charles R., LAC
  Werre, Richard, LAC
- Licensed Professional Clinical Counselor
  Millner, Paul D., LPCC
  Motis, Charles R., LPCC
  Olson, Thomas A., LPCC
- Psychiatry (MD/DO)
  Capan, Michael P., MD
  Dahmen, Kevin R., MD
  Johnson, Terry M., MD
  Mirzai, Michael, MD
  Nelson, Diane L., MD
  Row, Jeffrey H., MD
  Sanches, Marsal, MD
  Van Valkenburg, Daisy R., MD
- Psychology
  Berentson, Lea J., PHD
  Brooks, David A., PHD
  Degree, Craig E., PHD
  Horner, Sara M., PSYD
  Lang, Marny, PSYD

St Sophies, LLC
3000 N 14th St #2a
(701) 252-2001
- Clinical Social Worker
  Madeen, Rebecca L., LICSW
- Licensed Professional Clinical Counselor
  Hjelle, Catherine A., LPCC
- Psychiatry (MD/DO)
  Kenney, Emmet M., MD
- Psychology
  Schumacher, Kevin, PHD

The Kids Therapy Center
600 S 2nd St Ste 201
(701) 751-0384
- Licensed Professional Clinical Counselor
  Meyers, Valerie, LPCC

The Village Family Service Center
107 West Main Suite 350
(701) 451-4900
- Licensed Professional Clinical Counselor
  Thompson, Anna, LPCC

True North Solutions
418 N 2nd Street
(701) 224-8783
- Psychiatric Nurse
  Engel, Bonnie, PNU

West Central Human Service Center
1237 W Divide Ave Ste 5
(701) 328-8888
- Clinical Social Worker
  Best, Ariana J., LICSW
  Chaussee, Jerome, LICSW
  Dailey, Stacie R., LICSW
  Eckroth, Gordon, LICSW
  Gienger, Tim J., LICSW
  Lelm, Jacqueline M., LICSW
  Nieuwsma, Heidi, LICSW
  Sauer, Jerrica L., LICSW
  Schon, Deborah K., LICSW
  Tellmann, Janna, LICSW
- Licensed Addiction Counselor-Chemical Dependency
  Combs, Miranda, LAC
  Goldade, Jennifer L., LAC
  Hultin, Dawn L., LAC
  Ibach, Heather R., LAC
  Janzer, Mandi L., LAC
  Johnson, Carmen C., LAC
  Karlin, Corinne J., LAC
  Kitzan, Justun J., LAC
  Mickelson, David H., LAC
  Mock, Sue A., LAC
  Mohl, Brenda E., LAC
  Rennich, Jennifer L., LAC
  Ridl, Jeffrey G., LAC
  Ronsberg, Elise A., LAC
  Sather, Katherine, LAC
  Schatz, Kiki J., LAC
  Selk, Jennifer H., LAC
  Thompson, Sandy K., LAC

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING BEHAVIORAL HEALTH PROVIDERS

North Dakota (cont.)

Bismarck (cont.)

West Central Human Service Center (cont.)
- Licensed Professional Clinical Counselor
  Hellman, Lory, LPCC
  McConnachie, Rebecca, LPCC
- Psychiatric Nurse
  Schirado, Kevin G., CNS
- Psychiatry (MD/DO)
  Capan, Michael P., MD
  Eick, Thomas J., DO
  McLean, Andrew J., MD
- Psychology
  Aasen, Paulette, PHD
  Hay, Lisa D., PHD
  Kehrwald, Edward, PHD
  Larson, Roger A., PHD

Youth Works
221 W Rosser Ave
(701) 255-6909
- Clinical Social Worker
  Heitkamp, Melanie L., LICSW

Bottineau

Corey J Gorder
104 11th St W
(701) 201-0076
- Licensed Professional Clinical Counselor
  Gorder, Corey J., LPCC

Rural Mental Health Consortium
316 Ohmer St
(701) 228-9300
- Psychiatric Nurse
  Sartain, Cheryl A., PNU

Ryan Henry Consulting, LLC
609 Jay St
(701) 263-1088
- Clinical Social Worker
  Henry, Ryan M., LICSW

Bowman

West River Health Service
608 Highway 12 W
(701) 523-3271
- Licensed Professional Clinical Counselor
  Jorgenson, Tara L., LPCC

North Dakota (cont.)

Carrington

Fuher, Jessie, LPCC
800 N 4th St
(701) 252-9838
- Licensed Professional Clinical Counselor
  Fuher, Jessie K., LPCC

Cavalier

Altru Cavalier
201 E 3rd Ave S
(701) 265-8338
- Clinical Social Worker
  Conrad, Danielle M., LICSW
- Psychiatry (MD/DO)
  Feldman, Ellen K., MD
  Madaram, Kondal R., MD

Crosby

Rural Mental Health Consortium
705 4th St SE
(701) 857-2199
- Psychiatric Nurse
  Sartain, Cheryl A., PNU

Devils Lake

Advanced Counseling For Change, PLLC
424 3 St SE
(701) 351-1182
- Clinical Social Worker
  Hawley, Lisa, LICSW

Altru Clinic Lake Region
1001 7th St
(701) 662-2157
- Clinical Social Worker
  Conrad, Danielle M., LICSW
- Psychiatry (MD/DO)
  Feldman, Ellen K., MD
  Madaram, Kondal R., MD

Blooming Prairie Assessment & Therapy Center, PC
211 4th St NE Ste 4
(701) 662-8255
- Psychology
  Kenney, Sara K., PSYD
  Normandin, Sherman, PHD

North Dakota (cont.)

Devils Lake (cont.)

Christofferson Consulting
11 N College Drive Ste C
(701) 665-3030
- Clinical Social Worker
  Christofferson, Sandi C., LICSW

Country Counseling and Consulting
400 12 Ave NE Ste D
(701) 665-5433
- Clinical Social Worker
  Hanson, Deborah L., LICSW

Hope Unlimited Inc
400 12th Ave NE Ste D
(701) 351-1934
- Clinical Social Worker
  Dobler, Janet F., LICSW

Lake Region Human Service Center
200 Highway 2 SW
(701) 665-2200
- Clinical Social Worker
  Boe, Jamie J., LICSW
  Boknecht, Douglas, LICSW
  Borchardt, Abby, LICSW
  Cariveau, Jacqueline M., LICSW
  Hultgren, Amy M., LICSW
  Kligmann, Marci L., LICSW
  Shock, Michael A., LICSW
  Wilson, Heather D., LICSW
- Licensed Addiction Counselor-Chemical Dependency
  Fisher, Troy A., LAC
  Hellerud, Elizabeth J., LAC
  Juntunen, Kevin R., LAC
  McCrea, Adalia M., LAC
  McEwen, Billy, LAC
  Reichenberg, Kathleen E., LAC
  Schmidt-Boknecht, Ava V., LAC
- Psychiatry (MD/DO)
  Clinkenbeard, James, MD
  McLean, Andrew J., MD
- Psychology
  Bradley, Patricia J., PSYD
  Kuna, David P., PHD
  Newberry, Donald E., PHD

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING BEHAVIORAL HEALTH PROVIDERS

North Dakota (cont.)
Devils Lake (cont.)

Lifewise Christian Counseling
1820 Walnut St E Ste 7
(701) 662-1046

- Clinical Social Worker
  Cox, Darrin L., LICSW

New Horizons Counseling Services
217 Grand View Ave
(701) 662-5590

- Clinical Social Worker
  Rose, Roxanne M., LICSW

The Village Family Service Center
224 4th Street NW Ste 5
(701) 662-6776

- Clinical Social Worker
  Andersen, Jaclyn, LICSW
  Owen, Brenda L., LICSW

Volk Human Services, PC
501 3rd St NE Ste 1
(701) 662-1911

- Psychology
  Volk, Gregory S., PSYD

Dickinson

Badlands Human Service Center
300 13 Ave W Ste 1
(701) 227-7541

- Clinical Social Worker
  Fast, Russell, LICSW
  Gullickson, Candice M., LICSW
  Siegler, Allen L., LICSW
  Waller, Linda K., LICSW
- Licensed Addiction Counselor-Chemical Dependency
  Combs, Miranda, LAC
  Karlin, Corinne J., LAC
  Ronsberg, Elise A., LAC
  Schatz, Kiki J., LAC
  Thompson, Sandy K., LAC
  Waller, Linda K., LAC
- Licensed Professional Clinical Counselor
  Lefor, Katie L., LPCC
  Mack, Kimberly M., LPCC
- Psychiatry (MD/DO)
  McLean, Andrew J., MD
  Van Valkenburg, Daisy R., MD

North Dakota (cont.)
Dickinson (cont.)

Badlands Human Service Center (cont.)

- Psychology
  Aasen, Paulette, PHD
  Boomgaarden, Renee L., PHD
  Demolen, Richard N., PSYD
  Gabbert, Nancy A., PHD
  Hertler, Chris A., PHD
  Wu, Zongjian, PSYD

Dickinson Family Counseling Center, PLLC
11 2nd Ave E Ste B
(701) 483-9720

- Licensed Professional Clinical Counselor
  Anderson, Lacey R., LPCC
- Psychology
  Baer, Robert, PSYD

Heart River Alcohol Drug Inc.
7 1st Ave W Ste 101
(701) 483-0795

- Clinical Social Worker
  Waller, Linda K., LICSW
- Licensed Addiction Counselor-Chemical Dependency
  Waller, Linda K., LAC
  Wieglenda, John H., LAC
  Wieglenda, Marsha, LAC

Prairie Horizons
25 1st Ave W Ste 140
(701) 483-0058

- Clinical Social Worker
  Dassinger, Gerald M., LICSW

Sacajawea Substance Abuse Counseling and Drug Testing Center
112 3 St W Ste 301
(701) 483-9150

- Licensed Addiction Counselor-Chemical Dependency
  Kuhn, Janet L., LAC
  Wanner, Victor, LAC

North Dakota (cont.)
Dickinson (cont.)

Sanford Health Dickinson Clinic
2615 Fairway St
(701) 456-6000

- Psychology
  Doerner, Mark, PHD

Sanford Health Family Connection Safe Visitation Center
128 1st St W #2
(701) 483-7233

- Licensed Professional Clinical Counselor
  Condol, Paula J., LPCC
  Hilfer, Shannon L., LPCC

St Josephs Hospital & Health Center
30 7th St W
(701) 456-4000

- Psychiatry (MD/DO)
  Fornal, Robert E., MD
  Lopez, David J., MD

Therapy Solutions
448 21 St W Ste D-1
(701) 483-1000

- Clinical Social Worker
  Erie, Brenda J., LICSW

Westwind Consulting Center
135 W Villard St
(701) 225-1050

- Psychology
  Fehr, Alan J., PHD
  Hall, Shelly, PSYD

Drayton

Altru Drayton
1003 N Main St
(701) 454-3311

- Psychiatry (MD/DO)
  Madaram, Kondal R., MD

Dunseith

Cornerstone Addiction
101 Peace Garden Ave
(701) 244-2299

- Licensed Addiction Counselor-Chemical Dependency
  Berdahl, Linda A., LAC

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING BEHAVIORAL HEALTH PROVIDERS

North Dakota (cont.)

Edgeley

Healing Hearts Counseling
305 5th Ave
(701) 535-0616

- Clinical Social Worker
  Simle, Susan A., LICSW

Ellendale

Healing Hearts Counseling
240 Main
(701) 535-0616

- Clinical Social Worker
  Simle, Susan A., LICSW

Life Seasons Counseling, PLLC
240 Main St
(701) 678-4800

- Licensed Professional Clinical Counselor
  Elhard, Deborah J., LPCC

Life Seasons Counseling, PLLC
240 Main St
(701) 678-4800

- Licensed Professional Clinical Counselor
  Elhard, Deborah J., LPCC

Fargo

7 Day Clinic
1517 32nd Ave S
(701) 232-6211

- Psychology
  Hartson, David, PHD

7 Day Clinic -Osgood
4622 40th Ave S
(701) 364-2909

- Psychology
  Hartson, David, PHD

Altendorf Counseling & Associates
1351 Page Dr SW Ste 100
(701) 478-4044

- Licensed Professional Clinical Counselor
  Altendorf, John, LPCC

Andersen Counseling
624 Main Ave Suite 4b
(701) 793-7822

North Dakota (cont.)

Fargo (cont.)

Andersen Counseling (cont.)

- Licensed Professional Clinical Counselor
  Andersen, Mary Jo, LPCC

Avail Psychological and Addiction Services, PLLC
112 Univ Dr N Ste 200
(701) 566-5272

- Licensed Addiction Counselor-Chemical Dependency
  Busch, Megan M., LAC
  Karjalainen, Jessica R., LAC
- Psychology
  Sternhagen, Scott V., PHD

Barbara Stanton, LPCC
3309 Fiechtner Drive
Suite C
(701) 356-2273

- Licensed Professional Clinical Counselor
  Stanton, Barbara K., LPCC

Benson Psychological Services
1308 23rd St S Ste G
(701) 297-7540

- Clinical Social Worker
  Flanders, Lynne, LICSW
  Rorvig, Lisa K., LICSW
- Licensed Professional Clinical Counselor
  Forde, June M., LPCC
  Singh, Usha, LPCC
- Psychology
  Benson, Stacey L., PSYD
  Darveaux, Dion X., PHD
  Phillippi, Jay R., PHD
  Quam, Sara D., PSYD
  Smith, Kelly C., PSYD
  Stone, Eileen M., PSYD

Bogenreif, Marian, LPCC, LAC
118 Broadway Ste 601
(218) 736-5009

- Licensed Addiction Counselor-Chemical Dependency
  Bogenreif, Marian F., LAC
- Licensed Professional Clinical Counselor
  Bogenreif, Marian F., LPCC

North Dakota (cont.)

Fargo (cont.)

Cariveau, Geraldine V, LPCC
3107 Westgate Dr
(701) 232-7374

- Licensed Professional Clinical Counselor
  Cariveau, Geraldine V., LPCC

Catholic Charities North Dakota
5201 Bishops Blvd Ste B
(701) 235-4457

- Clinical Social Worker
  Anderson, Jennifer L., LICSW
- Licensed Professional Clinical Counselor
  Johnson, Catherine A., LPCC

Center For Psychiatric Care
1202 23rd St S
(701) 478-7887

- Psychiatry (MD/DO)
  Lind, Jackson W., MD

Child Family Therapy Associates
1121 Westrac Dr Ste 204
(701) 893-3419

- Clinical Social Worker
  Fry, Lisa M., LICSW
  Steiner, Julie A., LICSW
- Psychology
  Shawchuck, Carita R., PHD

Christeen A McLain dba Consultation & Movement
1402 Broadway N
(701) 388-1813

- Licensed Addiction Counselor-Chemical Dependency
  McLain, Christeen A., LAC
- Psychiatric Nurse
  McLain, Christeen A., PNU

Clarity Counseling
808 3 Ave S Suite 303
(701) 356-5545

- Licensed Professional Clinical Counselor
  Tallakson, Martin E., LPCC

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING BEHAVIORAL HEALTH PROVIDERS

Clark, Gregory LICSW
118 Broadway Ste 810
(701) 799-8785

- Clinical Social Worker
  Clark, Gregory D., LICSW

Claudia McGrath Counseling HHN
417 38th St SW Ste B
(701) 277-0654

- Licensed Addiction Counselor-Chemical Dependency
  McGrath, Claudia M., LAC
- Licensed Professional Clinical Counselor
  McGrath, Claudia M., LPCC

Conscious Living Counseling and Education Center
26 Roberts St Ste 114
(701) 371-6211

- Licensed Professional Clinical Counselor
  Jensen, Kama B., LPCC

Counseling Etc
5731 18th St S
(701) 205-1743

- Licensed Professional Clinical Counselor
  Hundley, Steven F., LPCC

D & L PC dba Quality Life
1316 23rd Street S
(701) 478-0333

- Clinical Social Worker
  Madler, Tamara, LICSW
- Licensed Professional Clinical Counselor
  Emmel, Jenny E., LPCC
  Holt Johnson, Georgia M., LPCC
  Naslund, Angell M., LPCC
- Psychiatric Nurse
  Volness, Linda J., CNS

Daigle Professional Counseling Services PLLC
1323 23rd St S Ste H
(701) 232-2886

- Licensed Addiction Counselor-Chemical Dependency
  Daigle, Rachel, LAC

Daigle Professional Counseling Services PLLC (cont.)

- Licensed Professional Clinical Counselor
  Daigle, Rachel, LPCC

Dakota Boys Ranch
1641 31st Ave S
(701) 237-3123

- Clinical Social Worker
  Wilkie, Christy, LICSW
- Licensed Addiction Counselor-Chemical Dependency
  Waind, Melissa, LAC
  Wendt, Jamie L., LAC
- Licensed Professional Clinical Counselor
  Simonson, Boni M., LPCC
  Vetter, Sara J., LPCC
- Psychiatry (MD/DO)
  Martinsen, Wayne L., MD

Dakota Boys Ranch
7151 15th St S
(701) 857-4232

- Clinical Social Worker
  Eissinger, Rebecca D., LICSW

Dakota Family Services
7151 15th St S
(701) 364-2950

- Clinical Social Worker
  Wilkie, Christy, LICSW
- Psychiatry (MD/DO)
  Martinsen, Wayne L., MD
- Psychology
  Willert Jr, Meryl G., PHD

Deer Oaks Mental Health Associates PC At Bethany On 42nd
4255 30th Ave S
(701) 478-8900

- Psychology
  Rosenheim, Harold D., PHD

Denton-Graber, Ruth LPCC
3309 Fiechtner Drive
Ste C
(701) 356-2273

- Licensed Professional Clinical Counselor
  Denton-Graber, Ruth M., LPCC

Destiny & Purpose, LLC
3220 S 18th St Ste 8f
(734) 262-4115

- Clinical Social Worker
  Walker, Paulette, LICSW

Discovery Counseling Center
115 N University Dr
(701) 237-4542

- Psychology
  Barrett, Terence W., PHD

Drake Counseling Services, Inc
1202 23rd St S
(701) 293-5429

- Licensed Addiction Counselor-Chemical Dependency
  Bartsch, Jennifer A., LAC
  Drake, Charles, LAC
  Flann, Kayla J., LAC
  Hersrud, Jacqueline M., LAC
  Johnson, Janna M., LAC
  Walen, Charlyne, LAC
  Williams, Sheena M., LAC
- Licensed Professional Clinical Counselor
  Drake, Charles, LPCC

Edwards, Peter dba Journeying Together Counseling Service
2631 12th Ave So
(701) 630-9214

- Clinical Social Worker
  Edwards, Peter A., LICSW

Essentia Health 32nd Avenue Clinic
3000 32nd Ave S
(701) 364-8000

- Psychology
  Hauge, Gregory A., PHD
  Kirchner, Joel T., PSYD

Essentia Health South University Clinic
1702 University Dr S
(701) 364-3300

- Psychology
  Hauge, Gregory A., PHD

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING BEHAVIORAL HEALTH PROVIDERS

North Dakota (cont.)
Fargo (cont.)

Family Institute PC
4955 17th Ave S Ste 122
(701) 282-8510

- Psychology
  Adams Larsen, Margo A., PHD
  Moe, Brian K., PHD
  Paulson, Michael D., PHD

Fraser, Ltd
2902 University Dr S
(701) 232-3301

- Clinical Social Worker
  Starkey-Labat, Julie K., LICSW

Gail Reierson Consulting
2524 18th St S
(701) 730-6279

- Licensed Professional Clinical Counselor
  Reierson, Gail N., LPCC

Gjerde, Elizabeth LPCC dba Accent On Care
3309 Fiechtner Dr Ste C
(701) 866-3969

- Licensed Professional Clinical Counselor
  Gjerde, Elizabeth A., LPCC

Inner Light Counseling Services
1323 23 St S Suite H
(701) 478-0906

- Licensed Professional Clinical Counselor
  Axtman, Mystal R., LPCC

Jeffrey C Gregory, PhD PC dba Gregory Psychology Solutions
1323 23rd St S Ste B
(701) 293-7477

- Psychology
  Gregory, Jeffrey C., PHD

Johnson Counseling & Consulting
3309 Fiechtner Drive
Suite C
(701) 356-2273

- Licensed Professional Clinical Counselor
  Johnson, Cynthia S., LPCC

North Dakota (cont.)
Fargo (cont.)

Johnson, Tina M, LICSW
1321 23rd St S Ste H
(701) 261-9685

- Clinical Social Worker
  Johnson, Tina M., LICSW

Joy Belzer Counseling
1330 Page Dr S Ste 202b
(701) 367-5985

- Licensed Professional Clinical Counselor
  Belzer, Joy A., LPCC

Life Choices Counseling
1790 32nd Ave S Ste 3
(701) 205-2592

- Clinical Social Worker
  Pagenkopf, Linda L., LICSW

Lind, Jackson W, MD
1202 23 St S Ste 3
(701) 478-7887

- Psychiatry (MD/DO)
  Lind, Jackson W., MD

Medenwald, Joni L., LICSW dba Accent On Care
3309 Fiechtner Dr Ste C
(701) 388-3045

- Clinical Social Worker
  Medenwald, Joni L., LICSW

Neuropsychology Associates PA
1220 Main Ave #100
(701) 297-7588

- Psychology
  Meidinger, Amy L., PHD
  Swenson, Rodney, PHD

Nielsen Counseling
1919 N Univ Dr Sgc C119
(701) 231-7676

- Licensed Professional Clinical Counselor
  Nielsen, Robert C., LPCC

Prairie St Johns
510 4th St S
(701) 476-7200

- Clinical Social Worker
  Clark, Gregory D., LICSW
  Faul, Jennifer J., LICSW
  Halone, Carole, LICSW

North Dakota (cont.)
Fargo (cont.)

Prairie St Johns (cont.)

- Clinical Social Worker (continued)
  Kottenbrock, Gerard, LICSW
  Marberry, Mario, LICSW
  Metcalfe, William A., LICSW
  Walker, Paulette, LICSW
- Licensed Addiction Counselor-Chemical Dependency
  Brink, William D., LAC
  Curran, Patrick C., LAC
  Grahn, Erin M., LAC
  Luzier, Marikay, LAC
  Makonnen, Kimberly R., LAC
  Onungwe, Mary O., LAC
  Phillips, Brenda R., LAC
  Readel, Kelly D., LAC
  Shiaro, Chris M., LAC
  Sorenson, Tonya S., LAC
  Wendt, Jamie L., LAC
- Licensed Professional Clinical Counselor
  Denton-Graber, Ruth M., LPCC
  Pfeifer, James, LPCC
  Stanton, Barbara K., LPCC
- Psychiatry (MD/DO)
  Akgul, Fetih, MD
  Anunobi, Echezona, MD
  Armstrong, Lacey L., MD
  Bronson, Natalya, MD
  Burtnett, Lawana M., MD
  Haliburton, James R., MD
  Hess, Douglas J., DO
  Jarvis, Julie O., DO
  Jordan, Natalie D., MD
  Kelly, Edward L., MD
  Mach, David J., DO
  Meany, Gavin P., MD
  Meek, Steven J., MD
  Meza, Eduardo E., MD
  Miller, Halbert B., MD
  Nadkarni, Nivedita S., MD
  Rauch, Harry B., MD
  Siemens, Charlotte A., MD
  Smith, Timothy A., MD
  Underwood, Amy K., MD
  Wichmann, Gerry-Lynn, MD
- Psychology
  Frissell, Jenny, PHD
  Juanto-Laver, Nils-Erik J., PHD

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING BEHAVIORAL HEALTH PROVIDERS

North Dakota (cont.)
Fargo (cont.)

Psychiatry Networks
300 NP Ave Suite 101
(701) 478-6700

- Psychiatry (MD/DO)
  Fornal, Robert E., MD
  Lopez, David J., MD

Rohrer, Mark, LICSW
1321 23 St S Suite H
(701) 720-9093

- Clinical Social Worker
  Rohrer, Mark A., LICSW

Sanford 1717 Medical Building
1717 S University Drive
(701) 234-2000

- Licensed Professional Clinical Counselor
  Woodbury, Kara B., LPCC
- Psychiatric Nurse
  Roerig, Deborah B., CNS
- Psychiatry (MD/DO)
  Burd, Ronald M., MD
- Psychology
  Kadlec, Kelly E., EDD
  Lahaise, Kim T., PHD
  Myers, Tricia C., PHD
  Swan-Kremeier, Lorraine, PHD

Sanford 1717 Medical Building
1717 South University Dr
(701) 234-2000

- Licensed Professional Clinical Counselor
  Woodbury, Kara B., LPCC
- Psychiatric Nurse
  Roerig, Deborah B., CNS
- Psychiatry (MD/DO)
  Burd, Ronald M., MD
  Mayfield Jorgensen, Michelle L., MD
- Psychology
  Kadlec, Kelly E., EDD
  Lahaise, Kim T., PHD
  Myers, Tricia C., PHD
  Swan-Kremeier, Lorraine, PHD

Sanford 2801 Medical Building
2801 University Dr S
(701) 234-5673

North Dakota (cont.)
Fargo (cont.)

Sanford 2801 Medical Building (cont.)

- Psychiatry (MD/DO)
  Karaz, Samy, MD

Sanford 2801 Medical Building
2801 University Dr S
(701) 234-5673

- Psychiatry (MD/DO)
  Karaz, Samy, MD

Sanford Broadway Clinic
801 Broadway North
(701) 234-2000

- Clinical Social Worker
  Hubrig, Joni, LICSW
- Psychiatry (MD/DO)
  Haider, Naveed, MD
  Olson, Robert J., MD
- Psychology
  Christianson, Kenneth E., PHD

Sanford Broadway Clinic
801 Broadway North
(701) 234-2000

- Clinical Social Worker
  Brown, Chad J., LICSW
  Hubrig, Joni, LICSW
  Syverson, Kate, LICSW
- Psychiatry (MD/DO)
  Haider, Naveed, MD
  Kohoutek, Bradley W., MD
  Olson, Robert J., MD
  Tavakoli, Sirpa, MD
- Psychology
  Biebl, Sara, PHD
  Brower Breitwieser, Carrie, PHD
  Christianson, Kenneth E., PHD
  Hines, Lindsay, PHD

Sanford Childrens Southwest Clinic
2701 13th Ave S
(701) 234-3600

- Clinical Social Worker
  Hubrig, Joni, LICSW
  Peterson, Bethany, LICSW
- Psychiatry (MD/DO)
  Hanisch, Stefanie U., MD
  Kjelstrup, Diane, MD
  Roembach, Jeanine L., MD

North Dakota (cont.)
Fargo (cont.)

Sanford Childrens Southwest Clinic
2701 13th Ave S
(701) 234-3600

- Clinical Social Worker
  Hubrig, Joni, LICSW
  Peterson, Bethany, LICSW
- Psychiatry (MD/DO)
  Hanisch, Stefanie U., MD
  Kjelstrup, Diane, MD
  Roembach, Jeanine L., MD
- Psychology
  Biebl, Sara, PHD

Sanford Neuroscience Clinic
700 1st Ave S
(701) 234-4036

- Psychology
  Bergloff, Paula J., PHD
  Hines, Lindsay, PHD
  Wood, Susan M., PHD

Sanford Neuroscience Clinic
700 1st Ave S
(701) 234-4036

- Clinical Social Worker
  Schneider, Monica, LICSW
- Licensed Professional Clinical Counselor
  Dokken, Julie, LPCC
- Psychiatry (MD/DO)
  Tomb, David, MD
- Psychology
  Bergloff, Paula J., PHD
  Hines, Lindsay, PHD
  Porter, Scott, PHD
  Wood, Susan M., PHD

Sanford North Fargo Clinic
2601 Broadway N
(701) 234-2900

- Clinical Social Worker
  Syverson, Kate, LICSW
- Psychology
  Hysjulien, Cheryl, PSYD

Sanford Professional Building
100 4th St S
(701) 234-3100

- Clinical Social Worker
  Donaldson, Mary Ann, LICSW
  Fidler, Nancy, LICSW
  Foldesi-Penas, Tracy M., LICSW

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING BEHAVIORAL HEALTH PROVIDERS

Sanford Professional Building (cont.)

- Clinical Social Worker (continued)
  Hubrig, Joni, LICSW
  Peterson, Bethany, LICSW
- Licensed Professional Clinical Counselor
  Christianson, Alice, LPCC
  Heim, Kathy J., LPCC
  Woodbury, Kara B., LPCC
- Psychiatric Nurse
  Cameron, Kathryn M., CNS
  Johnson, Lucy M., CNS
  Roerig, Deborah B., CNS
- Psychiatry (MD/DO)
  Burd, Ronald M., MD
  Fleissner, Rachel M., MD
  Gaffrey, Jane, DO
  Goyal, Harish, MD
  Haider, Naveed, MD
  Hanisch, Stefanie U., MD
  Hund, Morris A., MD
  Kjelstrup, Diane, MD
  Leon, Zelko, MD
  Mitchell, James E., MD
  Roembach, Jeanine L., MD
  Seicarescu, Cristina, MD
  Swensen, Eric C., MD
- Psychology
  Anady, Kara, PSYD
  Corneliussen, Stephanie, PSYD
  Kadlec, Kelly E., EDD
  Lahaise, Kim T., PHD
  Moser, Richard J., PHD
  Myers, Tricia C., PHD
  Preussler, Rebecca S., PSYD
  Revland, Paul, PHD
  Stone, Kenneth J., PSYD
  Sturgill, Danial, PHD
  Swan-Kremeier, Lorraine, PHD
  Tupa, David J., PHD
  Ulven, Jon, PHD
  Wenstrom, Timothy A., PSYD
  Wonderlich, Stephen A., PHD

Sanford Professional Building
100 4th St S
(701) 234-3100

North Dakota (cont.)
Fargo (cont.)

Sanford Professional Building (cont.)

- Clinical Social Worker
  Brown, Chad J., LICSW
  Donaldson, Mary Ann, LICSW
  Fidler, Nancy, LICSW
  Foldesi-Penas, Tracy M., LICSW
  Hubrig, Joni, LICSW
  Leyden, James, LICSW
  Peterson, Bethany, LICSW
- Licensed Professional Clinical Counselor
  Christianson, Alice, LPCC
  Heim, Kathy J., LPCC
  Woodbury, Kara B., LPCC
- Psychiatric Nurse
  Cameron, Kathryn M., CNS
  Johnson, Lucy M., CNS
  Roerig, Deborah B., CNS
- Psychiatry (MD/DO)
  Allick, Albert, MD
  Burd, Ronald M., MD
  Dennison, Evelyn, MD
  Eason, Phyllis, MD
  Fleissner, Rachel M., MD
  Gaffrey, Jane, DO
  Goyal, Harish, MD
  Haider, Naveed, MD
  Hanisch, Stefanie U., MD
  Hund, Morris A., MD
  Kjelstrup, Diane, MD
  Kohoutek, Bradley W., MD
  Leon, Zelko, MD
  Mitchell, James E., MD
  Olson, Robert J., MD
  Roembach, Jeanine L., MD
  Seicarescu, Cristina, MD
  Swensen, Eric C., MD
- Psychology
  Anady, Kara, PSYD
  Biebl, Sara, PHD
  Brower Breitwieser, Carrie, PHD
  Corneliussen, Stephanie, PSYD
  Hysjulien, Cheryl, PSYD
  Kadlec, Kelly E., EDD
  Lahaise, Kim T., PHD
  Maley, Robyn, PSYD
  Moser, Richard J., PHD
  Myers, Tricia C., PHD
  Preussler, Rebecca S., PSYD

North Dakota (cont.)
Fargo (cont.)

Sanford Professional Building (cont.)

- Psychology (continued)
  Revland, Paul, PHD
  Stone, Kenneth J., PSYD
  Sturgill, Danial, PHD
  Swan-Kremeier, Lorraine, PHD
  Tupa, David J., PHD
  Ulven, Jon, PHD
  Wenstrom, Timothy A., PSYD
  Wonderlich, Stephen A., PHD

Sanford South University
1720 University Dr S
(701) 234-2000

- Licensed Addiction Counselor-Chemical Dependency
  Christianson, Alice, LAC
- Licensed Professional Clinical Counselor
  Dokken, Julie, LPCC
  Groslie, Dawn L., LPCC
- Psychiatric Nurse
  Cameron, Kathryn M., CNS
  Johnson, Lucy M., CNS
- Psychiatry (MD/DO)
  Burd, Ronald M., MD
  Haider, Naveed, MD
  Hund, Morris A., MD
  Leon, Zelko, MD
  Olson, Robert J., MD
  Rougle, James, DO
  Swensen, Eric C., MD
- Psychology
  Bauste, Larry G., PHD
  Revland, Paul, PHD

Sanford South University
1720 University Dr S
(701) 234-2000

- Clinical Social Worker
  Brown, Chad J., LICSW
- Licensed Addiction Counselor-Chemical Dependency
  Christianson, Alice, LAC
- Licensed Professional Clinical Counselor
  Dokken, Julie, LPCC
  Groslie, Dawn L., LPCC
  Heim, Kathy J., LPCC

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING BEHAVIORAL HEALTH PROVIDERS

Sanford South University (cont.)
- Licensed Professional Clinical Counselor (continued)
  Woodbury, Kara B., LPCC
- Psychiatric Nurse
  Cameron, Kathryn M., CNS
  Johnson, Lucy M., CNS
  Moraghan, Kathleen, CNS
- Psychiatry (MD/DO)
  Armstrong, Lacey L., MD
  Burd, Ronald M., MD
  Hund, Morris A., MD
  Leon, Zelko, MD
  Olson, Robert J., MD
  Rougle, James, DO
  Swensen, Eric C., MD
  Yarosh, Scott, MD
- Psychology
  Bauste, Larry G., PHD
  Revland, Paul, PHD

Sanford Southpointe Clinic
2400 32nd Ave S
(701) 234-8800
- Licensed Professional Clinical Counselor
  Christianson, Alice, LPCC
  Woodbury, Kara B., LPCC
- Psychiatry (MD/DO)
  Swensen, Eric C., MD
- Psychology
  Christianson, Kenneth E., PHD
  Ulven, Jon, PHD

Sanford Southpointe Clinic
2400 32nd Ave S
(701) 234-8800
- Clinical Social Worker
  Brown, Chad J., LICSW
  Powell, Trishia K., LICSW
  Schneider, Monica, LICSW
- Licensed Professional Clinical Counselor
  Christianson, Alice, LPCC
  Woodbury, Kara B., LPCC
- Psychiatry (MD/DO)
  Kohoutek, Bradley W., MD
  Swensen, Eric C., MD
- Psychology
  Christianson, Kenneth E., PHD
  Ulven, Jon, PHD

Sanford Southpointe Clinic (cont.)
- Psychology (continued)
  Zielke, Desiree, PHD

Sharehouse - Genesis
505 40th St S Ste B
(701) 478-8440
- Licensed Addiction Counselor-Chemical Dependency
  Cameron, Lisa, LAC
  Collins, David C., LAC
  Hoff, Miracle R., LAC
  Maynard, Joshua J., LAC
  Shirkey, Amie M., LAC
  Stinson, Roberta J., LAC
  Symons, James E., LAC
  Traen, Jeremy M., LAC
  Westall, Wanda L., LAC
  Winters, Patricia L., LAC
  Witteman, Anne K., LAC

Sharehouse Transitions
505 40th St S Suite B
(701) 478-8440
- Clinical Social Worker
  Sparke, William P., LICSW
- Licensed Addiction Counselor-Chemical Dependency
  Nelson, Roberta R., LAC
- Licensed Professional Clinical Counselor
  Belzer, Joy A., LPCC
- Licensed Professional Counselor/Therapist
  Nelson, Roberta R., LPCC
- Psychology
  Hoff, Erica R., PHD

Sharehouse, Inc
4227 9th Ave SW
(701) 282-6561
- Clinical Social Worker
  Sparke, William P., LICSW
- Licensed Addiction Counselor-Chemical Dependency
  Cameron, Lisa, LAC
  Collins, David C., LAC
  Hoff, Miracle R., LAC
  Maynard, Joshua J., LAC
  Nelson, Roberta R., LAC

Sharehouse, Inc (cont.)
- Licensed Addiction Counselor-Chemical Dependency (continued)
  Shirkey, Amie M., LAC
  Stevens, Connie K., LAC
  Stinson, Roberta J., LAC
  Symons, James E., LAC
  Traen, Jeremy M., LAC
  Westall, Wanda L., LAC
  Winters, Patricia L., LAC
  Witteman, Anne K., LAC
- Licensed Professional Counselor/Therapist
  Nelson, Roberta R., LPCC
- Psychology
  Hoff, Erica R., PHD

Southeast Human Service Center
2624 9th Ave S
(701) 298-4500
- Clinical Social Worker
  Gierszewski, Angelique S., LICSW
  Rorvig, Lisa K., LICSW
  Varriano, Deonne J., LICSW
- Licensed Addiction Counselor-Chemical Dependency
  Berglund, Randi A., LAC
  Brown, Bradley T., LAC
  Christensen, James R., LAC
  Decker, Amanda R., LAC
  Erickson, Kylee R., LAC
  Fay, Julie M., LAC
  Holt, John W., LAC
  Illing, Stephen, LAC
  Kilen, Kristi, LAC
  Mastel, Lisa A., LAC
  Nicoli, Sara L., LAC
  Peterson, Melody B., LAC
  Phillips, Sandra L., LAC
  Pytlik, Roberta J., LAC
  Richter, Daniel A., LAC
  Trautman, Tatum R., LAC
- Licensed Professional Clinical Counselor
  Cavett, Tarah E., LPCC
  Gjerde, Elizabeth A., LPCC
  Richter, Daniel A., LPCC
  Singh, Usha, LPCC

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING BEHAVIORAL HEALTH PROVIDERS

Southeast Human Service Center (cont.)
- Psychiatry (MD/DO)
  Hajek, Philip T., MD
  Kroetsch, Laura A., MD
  McLean, Andrew J., MD
  Vo, Timothy T., MD
- Psychology
  Cross-Hillman, Nicole, PSYD
  Hein-Kolo, Nancy, PHD
  Moe, Brian K., PHD
  Quam, Sara D., PSYD
  Wegner, Krislea E., PHD
  Witte-Bakken, Jan K., PHD

Southeast Human Service Center Off Main
1122 1st Ave N
(701) 298-4650
- Licensed Addiction Counselor-Chemical Dependency
  Worner, Bruce, LAC
- Licensed Professional Clinical Counselor
  Singh, Usha, LPCC

St Sophies LLC
3201 33rd St S
(701) 365-4488
- Licensed Professional Clinical Counselor
  Hjelle, Catherine A., LPCC
- Psychiatry (MD/DO)
  Kenney, Emmet M., MD
- Psychology
  Schumacher, Kevin, PHD

Staton, R. Dennis, MD
509 25th Ave N
(701) 451-9145
- Psychiatry (MD/DO)
  Staton, R D., MD

The Village Family Service Center
1201 25th St S
(701) 451-4900
- Clinical Social Worker
  Eissinger, Rebecca D., LICSW
  Heding, Charity C., LICSW
  Lyon, John A., LICSW
  Medenwald, Joni L., LICSW

The Village Family Service Center (cont.)
- Licensed Professional Clinical Counselor
  Aasness, Mary K., LPCC
  Blumhardt, Rachel A., LPCC
  Fetting, Debberlee, LPCC
  Hillesheim, Nadine A., LPCC
  Jandro, Joanne M., LPCC
  Olson, Patricia J., LPCC
- Psychiatric Nurse
  Elbert, Rebecca E., CNS
- Psychology
  Juntunen, Cindy L., PHD

The Village Family Service Center
1620 16 Ave S
(701) 451-4900
- Clinical Social Worker
  Lyon, John A., LICSW

The Village Family Service Center
1200 Harwood Drive
(701) 451-4900
- Licensed Professional Clinical Counselor
  Blumhardt, Rachel A., LPCC

The Village Family Service Center dba First Step Recovery
409 7th St S
(701) 293-3384
- Licensed Addiction Counselor-Chemical Dependency
  Boren, Margaret E., LAC
  Erickson, Pamla J., LAC
  Knipfer, Jodee L., LAC
  Senn, Patti L., LAC
  Spooner, Kristie L., LAC
  Stenehjem-Titus, Peggy L., LAC

The Village Family Service Center dba First Step Recovery
3201 Fiechtner Drive
(701) 293-3384
- Licensed Addiction Counselor-Chemical Dependency
  Boren, Margaret E., LAC
  Clairmont Hansen, Mary, LAC
  Erickson, Pamla J., LAC
  Knipfer, Jodee L., LAC

The Village Family Service Center dba First Step Recovery (cont.)
- Licensed Addiction Counselor-Chemical Dependency (continued)
  Priebnow, Adam T., LAC
  Senn, Patti L., LAC
  Spooner, Kristie L., LAC
  Stenehjem-Titus, Peggy L., LAC

Valley Christian Counseling Center
509 25th Ave N
(701) 232-6224
- Clinical Social Worker
  Conkins, Elizabeth A., LICSW
  Erkenbrack, Naomi, LICSW
- Licensed Professional Clinical Counselor
  Watnemo, Larry J., LPCC
- Psychiatric Nurse
  Zaeske, Ellen L., CNS
- Psychology
  Rottman, Lori S., PHD

Vosburg Counseling
2913 12th St S
(701) 235-2092
- Licensed Professional Clinical Counselor
  Vosburg, Doreen M., LPCC

Wegner Psychological and Therapeutic Services
3220 S 18th Street Ste 6
(701) 361-0433
- Psychology
  Quam, Sara D., PSYD
  Wegner, Krislea E., PHD

Wilhelm, Vickie A., MS, LPCC Counseling
1111 Westrac Dr Ste 201
(701) 235-2003
- Licensed Professional Clinical Counselor
  Wilhelm, Vickie A., LPCC

Youth Works
317 S Univ Dr
(701) 232-8558

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING BEHAVIORAL HEALTH PROVIDERS

North Dakota (cont.)

Fargo (cont.)

Youth Works (cont.)
- Licensed Addiction Counselor-Chemical Dependency
  Erhardt, Timothy T., LAC

Fort Totten

Youth Healing & Wellness Center
816 3rd Ave N
(701) 766-4236
- Clinical Social Worker
  Duckwitz, Linda, LICSW
- Licensed Addiction Counselor-Chemical Dependency
  Duckwitz, Linda, LAC

Grafton

Mab Counseling Services
47 West 6th Street
(701) 352-1667
- Licensed Addiction Counselor-Chemical Dependency
  Bryan, Michael A., LAC

Quinn Dui/Mip Counseling
47 W 6 St
(701) 352-9622
- Licensed Addiction Counselor-Chemical Dependency
  Quinn, Pamela J., LAC

Grand Forks

Agassiz Associates, PLLC
1407 24th Ave S Ste 520
(701) 746-6336
- Clinical Social Worker
  Aberle Riddle, Julie A., LICSW
  Muhs, Angela, LICSW
- Licensed Addiction Counselor-Chemical Dependency
  Grimsley, Tanner E., LAC
  Walton, Karin L., LAC
- Licensed Professional Clinical Counselor
  Walton, Karin L., LPCC
- Psychology
  Achilleoudes, Helen, PHD
  Green, Rebecca M., PHD

North Dakota (cont.)

Grand Forks (cont.)

Agassiz Associates, PLLC (cont.)
- Psychology (continued)
  Jensen, Heidi K., PHD
  McBride, Rosanne B., PHD

Altru Family Medicine Residency
725 Hamline St
(701) 780-6800
- Psychology
  Haugen, Erin N., PHD

Altru Hospital
1200 S Columbia Rd
(701) 780-5000
- Psychology
  Haugen, Erin N., PHD
  Muse, Shyla L., PHD

Altru Main Clinic
1000 S Columbia Rd
(701) 780-5000
- Psychology
  Muse, Shyla L., PHD
  Yeager, Catherine, PHD

Altru Psychiatric Center
860 S Columbia Rd
(701) 780-6697
- Clinical Social Worker
  Conrad, Danielle M., LICSW
  Olson, Joann J., LICSW
  Tescher, Jodi L., LICSW
  Thomas, Mary E., LICSW
  Werkley, Christopher J., LICSW
- Psychiatry (MD/DO)
  Bansal, Ashok K., MD
  Esprit, Lori J., MD
  Feldman, Ellen K., MD
  Madaram, Kondal R., MD

Assessment and Therapy Associates of Grand Forks
725 Hamline St
(701) 780-6821
- Licensed Professional Clinical Counselor
  Enblom, Kristen E., LPCC
  Gamliel, Tiram, LPCC
- Psychology
  Ertelt, Troy W., PHD
  Haugen, Erin N., PHD
  Jackson, David, PHD

North Dakota (cont.)

Grand Forks (cont.)

Assessment and Therapy Associates of Grand Forks (cont.)
- Psychology (continued)
  Muse, Shyla L., PHD
  Petros, Thomas V., PHD
  Schmutzer, Peter A., PHD
  Welke, Charles K., PHD
  Yeager, Catherine, PHD

Assessment and Therapy Associates of Grand Forks
2755 10th Ave N
(701) 780-6821
- Psychology
  Boulton-Olson, Christine, PHD
  Schmutzer, Peter A., PHD

Baumbach, Diane, LICSW
1407 24 Ave S Ste 530
(218) 791-5669
- Clinical Social Worker
  Baumbach, Diane K., LICSW

Carol Schneweis, LICSW
1407 24th Ave S Ste 530
(701) 739-5480
- Clinical Social Worker
  Schneweis, Carol J., LICSW

Center For Psychiatric Care
1451 44th Ave S Unit A
(701) 732-2500
- Clinical Social Worker
  Peterson, Bonnie J., LICSW
- Psychiatry (MD/DO)
  Azhar, Muhammad N., MD
  Frank, Bradford L., MD
  Peterson, Thomas M., MD
  Pitera, Matthew J., MD
  Thomas, Janice M., MD
  Tsibulsky, Mark, MD

Center For Psychological and Educational Assessment
210 Montgomery Hall
(701) 777-3260
- Psychology
  Petros, Thomas V., PHD

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING BEHAVIORAL HEALTH PROVIDERS

Center For Self Growth & Renewal, PC
1551 28 Ave S Ste C
(701) 746-4400

- Licensed Professional Clinical Counselor
  Reiten Eylands, Mary, LPCC
  Serna, Carrie L., LPCC
- Psychology
  Brustad, Laurie A., PHD

Dakota Therapy Center, LLC
600 Demers Ave Ste 301
(701) 746-9341

- Clinical Social Worker
  Badran-Wakefield, Aida B., LICSW

Dakota Therapy Center, LLC
600 Demers Ave Ste 301
(701) 746-9341

- Psychology
  Cheney, Angela R., PHD

Drake Counseling Services, Inc
311 4 St S Ste 106
(701) 746-8414

- Licensed Addiction Counselor-Chemical Dependency
  Bostyan, Eva L., LAC
  Loyland, Vicki J., LAC

Family Institute PC
2100 S Columbia Rd
Ste 202
(701) 772-1588

- Psychology
  Adams Larsen, Margo A., PHD
  Bradley, April, PHD
  Deyoung, Kyle, PHD
  Kotschwar, Jeanine E., PHD
  Legerski, John P., PHD
  Looby, Alison, PHD
  Miller, Joseph C., PHD
  Moe, Brian K., PHD
  Navarro, Rachel L., PHD
  Paulson, Michael D., PHD
  Rowan, Leslie A., PHD
  Wettersten, Kara, PHD
  Whitcomb, David H., PHD

Jeffrey C Gregory, PhD PC dba Gregory Psychology Solutions
1407 24th Ave S
(701) 293-7477

- Psychology
  Gregory, Jeffrey C., PHD

Kvasager Marlys, LICSW
1133a S Columbia Rd
(701) 757-2010

- Clinical Social Worker
  Kvasager, Marlys M., LICSW

Laidlaw Psychological Services, PC
3301 30th Ave S #101
(701) 780-9700

- Psychology
  Laidlaw, Robert A., PHD

Lipp Carlson Lommen & Witucki
2808 17th Ave S
(701) 746-8376

- Psychology
  Dannewitz, Holly J., PHD
  King, Brenda J., PHD
  Lipp, Leland H., PHD
  Lommen, David P., PHD
  Tait, Alison N., PHD
  Whalen, Jonathan E., PHD
  Witucki, Marty P., PHD

Lipp, Carlson, Lommen & Witucki
1380 S Columbia Rd
(701) 746-8376

- Psychology
  Lommen, David P., PHD
  Tait, Alison N., PHD
  Whalen, Jonathan E., PHD

Midwest Neuropsychology, PLLC
3301 30th Ave S #101
(701) 780-9700

- Psychology
  Thompson, Susan J., PHD

Mindfulness Based Therapies, Pain and Chronic Illness
1133b S Columbia Rd
Ste 3
(218) 779-3513

- Psychology
  Sloan, Lora L., PHD

Northeast Human Service Center
151 S 4th St Ste 401
(701) 795-3000

- Clinical Social Worker
  Carson, Roberta J., LICSW
  Dauksavage, Larry, LICSW
  Dusenbury, Katherine B., LICSW
  Hemming, Beth M., LICSW
  Oberg, Debbie A., LICSW
  Slavens, Randall L., LICSW
  Stein Fugazzi, Alissa J., LICSW
  Walker, Andrea I., LICSW
- Licensed Addiction Counselor-Chemical Dependency
  Davis, Deborah L., LAC
  Fisher, Marlys F., LAC
  Grimsley, Tanner E., LAC
  Jones, Angela M., LAC
  Juarez, Guadalupe, LAC
  Kuntz, Kristi L., LAC
  McMillan, Cynthia R., LAC
  Miller, Kim M., LAC
  Mohagen, Lori C., LAC
  Olson, Neil I., LAC
  Quinn, Pamela J., LAC
  Scott, David L., LAC
  Theisen, Jana, LAC
  White, Kelly, LAC
- Licensed Professional Clinical Counselor
  Scott, David L., LPCC
  Shulind, Joan, LPCC
- Psychiatric Nurse
  Gagner-Tjellesen, Desiree J., CNS
- Psychiatry (MD/DO)
  Feldman, Ellen K., MD
  Goodman, Patrick B., MD
  Hill, Steven M., MD
  McLean, Andrew J., MD
  Tevington, Kathryn, MD
- Psychology
  Decker, Greg, PHD
  Jagow France, Desiree A., PHD
  Newberry, Donald E., PHD

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING BEHAVIORAL HEALTH PROVIDERS

North Dakota (cont.)
Grand Forks (cont.)

Northland Christian Counseling Center
2315 Library Circle
(701) 795-8550

- Clinical Social Worker
  Broden, Renae A., LICSW
  Slavens, Randall L., LICSW
- Licensed Addiction Counselor-Chemical Dependency
  Scott, David L., LAC
  Torgerson, Carol A., LAC
- Licensed Professional Clinical Counselor
  Klug, Marna J., LPCC
  Scott, David L., LPCC
  Seay, Stephen H., LPCC

Northland Christian Counseling Center
308 5th St S
(701) 795-8550

- Licensed Addiction Counselor-Chemical Dependency
  Scott, David L., LAC
- Licensed Professional Clinical Counselor
  Scott, David L., LPCC

Rasmussen, Maxine, LPCC
1407 24th Ave S Ste 315
(701) 772-8013

- Licensed Professional Clinical Counselor
  Rasmussen, Maxine K., LPCC

Russell, Sue A, PhD P.C.
628 7th Ave S Ste B
(701) 746-8737

- Psychology
  Russell, Sue A., PHD

The Village Family Service Center
1726 S Washington Street
Ste 33a
(701) 746-4584

- Psychology
  Edwards, Sarah R., PHD
  Juntunen, Cindy L., PHD

North Dakota (cont.)
Grand Forks (cont.)

UND Student Health Service
Mccannel Hall Room 100
2891 2nd Ave N Stop 9038
(701) 777-4500

- Psychiatric Nurse
  Olson, Stacie L., PNU

Harvey

Blooming Prairie Assessment & Therapy Center PC
1008 Adams Ave
(701) 662-8255

- Psychology
  Kenney, Sara K., PSYD
  Normandin, Sherman, PHD

Rural Mental Health Consortium
325 E Brewster St
(701) 324-4651

- Psychiatric Nurse
  Sartain, Cheryl A., PNU

Hettinger

West River Health Services
1000 Highway 12
(701) 567-4561

- Licensed Professional Clinical Counselor
  Jorgenson, Tara L., LPCC

Hillsboro

Sanford Health Hillsboro Clinic
315 E Caledonia Ave
(701) 636-5311

- Psychiatric Nurse
  Cameron, Kathryn M., CNS

Jamestown

Addiction & Counseling Services
300 2nd Ave NE
(701) 252-5398

- Licensed Addiction Counselor-Chemical Dependency
  Cudmore Kramer, Shawn, LAC
  Monek, Martin D., LAC
  Peterson, Debra I., LAC
  Randall, Timothy L., LAC

North Dakota (cont.)
Jamestown (cont.)

Essentia Health Jamestown Clinic
2430 20th St SW
(701) 253-5300

- Psychology
  Hauge, Gregory A., PHD

Fuher, Jessie, LPCC
619 8th Ave SE
(701) 252-9838

- Licensed Professional Clinical Counselor
  Fuher, Jessie K., LPCC

Jamestown Counseling Center
300 2nd Ave NE Ste 215
(701) 952-7400

- Licensed Professional Clinical Counselor
  Lipetzky, Jennifer L., LPCC

Life Seasons Counseling, PLLC
302 Second Ave SE
(701) 678-4800

- Licensed Professional Clinical Counselor
  Elhard, Deborah J., LPCC

Prairie Counseling
3952 Hwy 281 SE
(701) 252-8939

- Licensed Addiction Counselor-Chemical Dependency
  Wicks, Kerry W., LAC
- Licensed Professional Clinical Counselor
  Wicks, Kerry W., LPCC

Sanford Health 2nd Ave Clinic
300 2nd Ave NE
(701) 251-6000

- Psychology
  Collins, John, PHD

Sanford Health Jamestown Clinic
904 5th Ave NE
(701) 253-4000

- Psychiatry (MD/DO)
  Karaz, Samy, MD
- Psychology
  Collins, John, PHD
  Wilson, Joel R., PHD

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING BEHAVIORAL HEALTH PROVIDERS

North Dakota (cont.)

Jamestown (cont.)

Sanford Health Jamestown Clinic
904 5th Ave NE
(701) 253-4000

- Psychiatry (MD/DO)
  Karaz, Samy, MD

South Central Human Service Center
520 3rd St NW
(701) 253-6318

- Clinical Social Worker
  Hart, Tim E., LICSW
  Reinarts, Courtney M., LICSW
  Weber, John J., LICSW
- Licensed Addiction Counselor-Chemical Dependency
  Brown, Bradley T., LAC
  Cudmore Kramer, Shawn, LAC
  Hallsten, Lindsey A., LAC
  Hunt, Geoffrey A., LAC
  Marsh, Billy J., LAC
  Motter, Elsie A., LAC
  Selle, Brooke J., LAC
  Woodard, Eric T., LAC
- Licensed Professional Clinical Counselor
  Listul, David, LPCC
  Morton, Jennifer, LPCC
  Schagunn Lere, Cara L., LPCC
- Psychiatry (MD/DO)
  McLean, Andrew J., MD
  Robles, Maria Diana E., MD
- Psychology
  Coombs, Lincoln D., PHD
  Cramer, Daniel P., PHD
  Hunt, Stacey L., PSYD
  Lepeltier, Marie, PHD
  Nitschke, Jennifer D., PSYD

Lamoure

Healing Hearts Counseling
421 3rd St SE
(701) 535-0616

- Clinical Social Worker
  Simle, Susan A., LICSW

North Dakota (cont.)

Langdon

Blooming Prairie Assessment & Therapy Center PC
721 11 Ave
(701) 662-8255

- Psychology
  Kenney, Sara K., PSYD
  Normandin, Sherman, PHD

Cavalier County Memorial Hospital
909 2nd St
(701) 256-6120

- Clinical Social Worker
  Osowski, Kimber Lee, LICSW
- Psychiatry (MD/DO)
  Peterson, Thomas M., MD

Mandan

Sanford North Mandan Clinic
910 18th St NW
(701) 667-5100

- Psychiatry (MD/DO)
  Belzer-Curl, Gretchen G., MD

Mayville

Sanford Mayville
600 1st Street SE
(701) 786-4500

- Psychiatric Nurse
  Cameron, Kathryn M., CNS

Minot

Berdahl, Linda, MS, LAC, Sap dba Cornerstone Addiction Servi
1705 4th Ave NW
(701) 839-0474

- Licensed Addiction Counselor-Chemical Dependency
  Berdahl, Linda A., LAC

Bob Hayes Addiction Services
1809 S Broadway Ste G
(701) 838-1422

- Licensed Addiction Counselor-Chemical Dependency
  Hayes, Bob M., LAC

North Dakota (cont.)

Minot (cont.)

Bruley, Charlene, LICSW
308 2nd Ave SW
(701) 838-4632

- Clinical Social Worker
  Bruley, Charlene P., LICSW

Center For Family Medicine/Minot
1201 11th Ave SW
(701) 858-6700

- Psychology
  Rickert, Julie A., PHD

Center For Mind & Body Wellness
1015 S Broadway Ste 37
(701) 852-3550

- Psychiatric Nurse
  Johnson, Deborah K., CNS

Clark, Thomas, PhD
2116 4th Ave NW
(701) 838-2442

- Psychology
  Clark, Thomas R., PHD

Corneliusen Lacey LICSW LLC
315 Main St Ste 301
(701) 858-1558

- Clinical Social Worker
  Corneliusen, Lacey D., LICSW

Dakota Boys Ranch
6301 19th Ave NW
(701) 839-7888

- Clinical Social Worker
  Eissinger, Rebecca D., LICSW
  Wilkie, Christy, LICSW
- Licensed Addiction Counselor-Chemical Dependency
  Waind, Melissa, LAC
  Wendt, Jamie L., LAC
- Licensed Professional Clinical Counselor
  Simonson, Boni M., LPCC
  Vetter, Sara J., LPCC
- Psychiatry (MD/DO)
  Martinsen, Wayne L., MD
- Psychology
  Willert Jr, Meryl G., PHD

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING BEHAVIORAL HEALTH PROVIDERS

North Dakota (cont.)
Minot (cont.)

Dakota Family Services
6301 19th Ave NW
(701) 837-6508

- Licensed Professional Clinical Counselor
  Simonson, Boni M., LPCC
- Psychiatry (MD/DO)
  Martinsen, Wayne L., MD
- Psychology
  Willert Jr, Meryl G., PHD

Eaton, Timothy, PhD
1705 4th Ave NW
(701) 839-0474

- Psychology
  Eaton, Timothy T., PHD

Edwards, Robert B LPCC
304 Burdick Expy W
(701) 833-8907

- Licensed Professional Clinical Counselor
  Edwards, Robert B., LPCC

Flood, Melissa K, LICSW
1705 4 Ave NW
(701) 839-0474

- Clinical Social Worker
  Flood, Melissa K., LICSW

Mary Solberg LICSW
1705 4th Ave NW
(701) 839-0474

- Clinical Social Worker
  Solberg, Mary J., LICSW

North Central Human Service Center
1015 S Broadway Ste 18
(701) 857-8500

- Clinical Social Worker
  Ness, Tammy D., LICSW
  Nyberg, Rochelle R., LICSW
  Vaudt, Cheryl A., LICSW
- Licensed Addiction Counselor-Chemical Dependency
  Andersen, Jason L., LAC
  Berger, Stacey A., LAC
  Browne, Racia J., LAC
  Duchscherer, Dana L., LAC
  Faa, Nathan, LAC
  Kidney, Brietta M., LAC

North Dakota (cont.)
Minot (cont.)

North Central Human Service Center (cont.)

- Licensed Addiction Counselor-Chemical Dependency (continued)
  Lider, Heather L., LAC
  Mock, Candis, LAC
  Nelson, Amy L., LAC
  Twogood, Amber A., LAC
- Licensed Professional Clinical Counselor
  Burke, Jean M., LPCC
  Gartner, Melissa M., LPCC
- Psychiatric Nurse
  Hanson, Leah A., PNU
  Walls, Pamela S., PNU
- Psychiatry (MD/DO)
  Eick, Thomas J., DO
  McLean, Andrew J., MD
  Schield, Laura B., MD
- Psychology
  Langelle, Charyle, PHD
  Shaleen, Lori A., PHD
  Slaughter, Stacy L., PSYD

Northern Plains Childrens Advocacy Center dba Npcac
20 First St SW Ste 202
(701) 852-0836

- Clinical Social Worker
  Baldwin, Tricia, LICSW
  Lemay, Jeanne J., LICSW

Pospishil & Associates, PLLC
1425 21st Ave NW
(701) 858-0888

- Clinical Social Worker
  Pospishil, Charles, LICSW

Psychiatric Services, PC
601 18th Ave SE Ste 101
(701) 852-8798

- Clinical Social Worker
  Lein, James, LICSW
- Psychiatric Nurse
  Zuleger, Zane N., CNS
- Psychiatry (MD/DO)
  Bell, Lloyd M., DO

North Dakota (cont.)
Minot (cont.)

Psychological Services, PC
600 22nd Ave NW
(701) 852-9113

- Psychology
  Podrygula, Stephan, PHD

Stein's Specialized Counseling Center
1809 S Broadway Plaza
Ste A
(701) 833-2085

- Clinical Social Worker
  Grossman-Chinburg, Jennifer N., LICSW
  Spooner, Dionne L., LICSW
  Stein, Suzi E., LICSW

Tammy Ness, LICSW
1809 S Broadway Suite Q2
(701) 720-8876

- Clinical Social Worker
  Ness, Tammy D., LICSW

The Burckhard Clinic, PC
315 S Main St Ste 315
(701) 852-5876

- Clinical Social Worker
  Burckhard, Mike V., LICSW

The Village Family Service Center
20 1st St SW Ste 250
(701) 852-3328

- Licensed Professional Clinical Counselor
  Jandro, Joanne M., LPCC

Trinity Health dba Trinity Riverside Campus
1900 8th Ave SE
(701) 857-5998

- Clinical Social Worker
  Andersen, Bruce F., LICSW
  Johnson, Lea J., LICSW
  Larsen, Elizabeth A., LICSW
  Roerick, Denise R., LICSW
  Wanner, Denice L., LICSW
- Licensed Professional Clinical Counselor
  Frueh, Keri J., LPCC
  Gertz, Linda M., LPCC
- Psychiatry (MD/DO)
  Colletti, Richard A., MD
  Dallolio, Michael J., MD

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING BEHAVIORAL HEALTH PROVIDERS

North Dakota (cont.)
Minot (cont.)

Trinity Health dba Trinity Riverside Campus (cont.)
- Psychiatry (MD/DO) (continued)
  Evans, Booker T., MD
  Martinsen, Wayne L., MD
  Meunier, Ronny P., MD
  Richards, Deidre L., MD
- Psychology
  Anderson, Thora R., PHD
  Boseck, Justin J., PHD
  Guilbert, Shana D., PSYD
  McAllister, Della A., PHD
  Michels, Vicki J., PHD
  Mugge, Jessica R., PHD
  Townsend, Richard B., EDD
  Vanlith, Clinten D., PHD

Trinity Hospitals
1 Burdick Expressway W
(701) 857-5252
- Psychiatry (MD/DO)
  Macey, Helen L., MD

Trinity Medical Group
407 3rd Street SE
(701) 857-5871
- Psychiatry (MD/DO)
  Colletti, Richard A., MD
  Macey, Helen L., MD
  Meunier, Ronny P., MD
- Psychology
  Boseck, Justin J., PHD

Trinity Medical Group
1 Burdick Expy W
(701) 857-5000
- Psychiatry (MD/DO)
  Colletti, Richard A., MD
  Martinsen, Wayne L., MD
  Meunier, Ronny P., MD
  Richards, Deidre L., MD
- Psychology
  Boseck, Justin J., PHD
  McAllister, Della A., PHD
  Townsend, Richard B., EDD
  Vanlith, Clinten D., PHD

North Dakota (cont.)
Minot (cont.)

Vaudt, Cheryl, LICSW
24 Main St N Ste H
(701) 833-8070
- Clinical Social Worker
  Vaudt, Cheryl A., LICSW

Walls,Pamela,APRN,BC
24 N Main St Ste J
(701) 721-5143
- Psychiatric Nurse
  Walls, Pamela S., PNU

Weiss, Faye, RN, CNS, PC
234 14th Ave SE
Ste 317
(701) 833-8158
- Psychiatric Nurse
  Weiss, Faye M., CNS

Mohall

Rural Mental Health Consortium
602 Main St E
(701) 857-2199
- Psychiatric Nurse
  Sartain, Cheryl A., PNU

Mott

West River Health Services
420 Pacific Ave
(701) 824-2391
- Licensed Professional Clinical Counselor
  Jorgenson, Tara L., LPCC

New England

West River Health Services
820 2nd Ave W
(701) 579-4507
- Licensed Professional Clinical Counselor
  Jorgenson, Tara L., LPCC

New Rockford

Blooming Prairie Assessment & Therapy Center
24 8th St N
(701) 662-8255
- Psychology
  Kenney, Sara K., PSYD
  Normandin, Sherman, PHD

North Dakota (cont.)
Oakes

Healing Hearts Counseling
115 S 5th St
(701) 535-0616
- Clinical Social Worker
  Simle, Susan A., LICSW

James River Counseling Services PC
412 Main Ave
(701) 742-1513
- Licensed Professional Clinical Counselor
  Meehl, Stacey B., LPCC

Park River

First Care Health Center
115 Vivan St
(701) 284-7555
- Psychology
  Juntunen, Cindy L., PHD

Raleigh

Prairie Learning Center
7785 St Gertrude Ave
(701) 597-3419
- Licensed Addiction Counselor-Chemical Dependency
  Anderson, Christy K., LAC

Rolla

Lake Region Hsc/Rolla Outreach
113 Main Ave E
(701) 665-2200
- Licensed Addiction Counselor-Chemical Dependency
  Bercier, Cynthia R., LAC
  Lamotte, Wanda J., LAC
  Longie, Glenn B., LAC
- Licensed Professional Clinical Counselor
  Allen-Halvorson, Natascha V., LPCC
  Baumgarn, Julie K., LPCC

Rural Mental Health Consortium
213 2nd Ave NE
(701) 857-2199
- Psychiatric Nurse
  Sartain, Cheryl A., PNU

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING BEHAVIORAL HEALTH PROVIDERS

North Dakota (cont.)

Scranton

West River Health Services
211 Main Street S
(701) 275-6336

- Licensed Professional Clinical Counselor
  Jorgenson, Tara L., LPCC

Sentinel Butte

Home On The Range
16351 I 94
(701) 872-3745

- Clinical Social Worker
  Feldmann, Laura M., LICSW
  Gooch, Michael N., LICSW
  Johnson, Jay R., LICSW
  Maness, Jessica B., LICSW
- Licensed Addiction Counselor-Chemical Dependency
  Ebel, Jodine M., LAC

Souris

Family Mental Health Clinic
701 100th St NW
(701) 263-1298

- Clinical Social Worker
  Howery-Siercks, Laura, LICSW

Stanley

Rural Mental Health Consortium
615 6th St SE
(701) 857-2199

- Psychiatric Nurse
  Sartain, Cheryl A., PNU

Valley City

Essentia Health Valley City Clinic
132 4th Ave NE
(701) 845-8060

- Psychology
  Hauge, Gregory A., PHD

Fuher Jessie, LPCC
570 Chautauqua Blvd
(701) 252-9838

- Licensed Professional Clinical Counselor
  Fuher, Jessie K., LPCC

North Dakota (cont.)

Valley City (cont.)

Life Seasons Counseling, PLLC
570 Chautauqua Blvd
(701) 678-4800

- Licensed Professional Clinical Counselor
  Elhard, Deborah J., LPCC

Sanford Health Valley City Clinic
520 Chautauqua Blvd
(701) 845-6000

- Psychology
  Wilson, Joel R., PHD

Wahpeton

Essentia Health Wahpeton Clinic
275 11th St S
(701) 642-2000

- Psychology
  Hauge, Gregory A., PHD

Sanford Health Wahpeton Clinic
332 2nd Ave N
(701) 642-7000

- Psychology
  Geiselhart, Richard L., PHD
  Getz, Ariane M., PSYD

Swanson Counseling
315 11 St N Suite E
(701) 591-2003

- Licensed Professional Clinical Counselor
  Swanson, Cynthia, LPCC

West Fargo

Beacon Behavioral Health Services & Training Center
102 West Beaton Dr #103
(701) 356-1276

- Psychology
  Cavett, Angela M., PHD
  Garaas, Jennifer M., PHD

Knowlton Oneill & Associates PC
1401 13th Ave E
(701) 364-0060

- Psychiatry (MD/DO)
  Block, Terry N., MD
- Psychology
  Bratton, Brenda L., PHD
  Dvorak, Robert D., PHD
  Hegstad, Holly J., PHD

North Dakota (cont.)

West Fargo (cont.)

Knowlton Oneill & Associates PC (cont.)

- Psychology (continued)
  Knowlton, Glenn E., PHD
  Schjeldahl, Katherine M., PHD

Terry Braun, LPCC
1042 14 Ave E Ste 210
(701) 799-6258

- Licensed Professional Clinical Counselor
  Braun, Terry N., LPCC

Williston

Clinical Consulting, PC
322 Main St Ste 104
(701) 651-6951

- Psychiatric Nurse
  Ferrell, Charlotte A., PNU

Dakota Family Solutions
612 4 St E
(701) 570-4647

- Clinical Social Worker
  Goldade, Terry L., LICSW

Mercy Medical Center dba Craven Hagan Clinic
1213 15th Ave W
(701) 774-7400

- Psychiatry (MD/DO)
  Eick, Thomas J., DO

Northwest Human Service Center
316 2nd Ave W
(701) 774-4600

- Clinical Social Worker
  Goldade, Terry L., LICSW
  Iverson, Sandra M., LICSW
  Shannon, Katie, LICSW
  Stenehjem, Gerald A., LICSW
- Licensed Addiction Counselor-Chemical Dependency
  Conmy, Stephen W., LAC
  Montgomery, Christine R., LAC
- Psychiatry (MD/DO)
  Eick, Thomas J., DO
  McLean, Andrew J., MD
  Schield, Laura B., MD
- Psychology
  Semchenko, Alana, PSYD

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING BEHAVIORAL HEALTH PROVIDERS

North Dakota (cont.)

Williston (cont.)

Playworks
501 Main St
(701) 774-1122

- Clinical Social Worker
  Nordaune, Tina M., LICSW

Svpn Neuro Williston
1213 15th Ave W
(800) 544-3579

- Psychiatry (MD/DO)
  Mosser, Jeffrey F., MD

Trinity Community Clinic/Western Dakota
1321 W Dakota Parkway
(701) 572-7711

- Psychology
  Mugge, Jessica R., PHD

Yockim, James, LICSW
1705 3rd Ave W Ste 101
(701) 570-9591

- Clinical Social Worker
  Yockim, James C., LICSW

South Dakota

Aberdeen

Avera Medical Group Orthopedic Surgery Specialists
701 8th Ave NW Ste A
(605) 226-2663

- Psychiatry (MD/DO)
  Frisco, Donald J., MD

Lemmon

West River Health Services
401 6th Ave W
(605) 374-3773

- Licensed Professional Clinical Counselor
  Jorgenson, Tara L., LPCC

Providers are subject to be added or terminated without notice.

Attachment 11

Attachment 11

Physician Quality Measurement

Physician Quality Measurement (PQM)

PQM is the program Blue Plans across the nation will be using to support making measured performance information available to consumers, based on national research showing consumers value access to the kind of information and tools that can help them assume a more active role in managing care for themselves and their families. This program will launch July 1, 2012, and consumers will be able to access this information on the redesigned Blue National Doctor and Hospital Finder website.

The PQM program complements your practice improvement efforts and highlights your commitment to providing safe, evidence-based and patient-centered care in your community. The program aligns with our belief that care improvement comes from a combination of measuring what can be measured, promoting ongoing practice improvement and recognizing the champions of care delivery.

- The vertical integration of local measurement into a national display considers the local patient population and physician demographics, access to care, resources and other local factors.
- PQM is based on select physician performance measures that are displayed to assist patients in choosing a doctor.
- The PQM program will display these nationally endorsed and evidence-based physician quality performance measures along with supporting data, local comparison norms and educational consumer information.
- PQM is based on a core set of HEDIS® physician measures selected by Blue Cross and Blue Shield companies' clinical measurement experts. BCBSND has selected the following nationally endorsed and evidence-based measurements which align with industry and federal health care improvement and reporting initiatives. These measures are:

Category	Measure
Cancer Screening	• Breast cancer screening • Cervical cancer screening • Colorectal cancer screening
Diabetes	• HgA1C testing • LDL-C screening
Heart Disease	• Cholesterol screening for patients with cardiovascular conditions
Women's Health	• Breast cancer screening • Cervical cancer screening

- Using a three-star display, BCBSND can communicate if a group practice is below (1 star), meets (2 stars) or exceeds (3 stars) the performance level score for each measure as compared to the local average for the same measure and comparable peer group.
- Additional information is also available to help Blue members determine how this information can be useful in their health care decision making.

The Local Comparison Score provides a benchmark for performance in North Dakota and is compared to the group's performance score to determine the PQM rating. The local comparison score can vary by measure and is determined by BCBSND. The group practice's score will be based on data taken from the MediQHomeSM Quality Program.

ND

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Noridian Mutual Insurance Company

Attachment 12

Attachment 12

Blue Physician Recognition

Blue Physician Recognition (BPR)

BPR is designed to provide more meaningful and consistent information to consumers, and is complementary to the Physician Quality Measurement initiative. This program will launch July 1, 2012, and consumers will be able to access this information on the redesigned Blue National Doctor and Hospital Finder website.

- Group practices who participate in the MediQHome℠ Quality Program will be submitted for display on the Blue National Doctor and Hospital Finder with the BPR icon.
- The BPR program recognizes participation in quality improvement efforts across multiple disciplines and care settings and also highlights group practices as champions of quality care in the community.
- North Dakota providers not participating in the MediQHome Quality Program will be designated as "not eligible" for BPR in the Blue National Doctor & Hospital Finder.

BCBSND believes that care is improved through a combination of measuring what can be measured, promoting ongoing practice improvement and recognizing the champions of care delivery. BPR supports this philosophy by providing a national display for group practices committed to delivering quality and patient-centered care based on BPR program guidelines.

ND

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Noridian Mutual Insurance Company

Attachment 13

Attachment 13

Attachment 13

Patient Review of Physicians

Patient Review of Physicians (PRP)

PRP allows Blue Cross Blue Shield of North Dakota (BCBSND) members to view and post reviews of doctors and other professional providers based on their patient experiences. After the program launches, July 1, 2012, members will initiate physician reviews through our member portal. Once complete, reviews will be published on the redesigned Blue National Doctor and Hospital Finder website.

While patient reviews are just one of many factors to consider when choosing a health care provider, research shows that online patient review capabilities are in high demand. User-generated patient reviews are one of the most sought after pieces of information for consumers looking for a new doctor, and approximately 85-90 percent of patient reviews are positive. To assure that your overall score accurately reflects the quality of your patient experiences, encourage your patients to contribute to your reviews.

- To ensure accountability and validity, BCBSND has implemented a rigorous process that authenticates, verifies and moderates reviews prior to posting online.
- Members respond to a core set of questions covering their overall experience, and reviews are checked for appropriateness prior to display.
- This process helps ensure that only authenticated BCBSND members who verify they have seen the doctor can contribute reviews.

BCBSND will distribute additional information about this program as it becomes available, including screen shots and more information about how a patient will be able to write physician reviews.

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Attachment 14

Attachment 14

Attachment 14

MediQHome Clinical Suites

Clinical Suites

Asthma

5 – 50 years

Process Measures:

Severity classified using the NAEPP guidelines

Inhaled corticosteriod (or alternative steroid sparing control medication) for patients with persistent asthma (moderate to severe).

Inhaled short-acting beta-agonist for patients with persistent (all grades) asthma.

Attention Deficit Hyperactivity Disorder (ADHD)

< 18 years

Process Measures:

2 BMI documented in the medical record.

Breast Cancer Screening

50 – 74 years (female)

Process Measures (every 2 years):

Breast MRI -OR-

BSGI -OR-

Mammogram

Cervical Cancer Screening

21 – 65 years (female)

Process Measures:

Pap test (once every 3 years)

Chronic Heart Failure

18 – 75 years

Process Measures:

BP exam

Ejection fraction (once within 24 months)

Pulse exam

Serum Creatinine

Outcome Measures:

ACEi/ARB therapy if LVF ≤ 40

Beta-blocker therapy if LVF ≤ 40

BP ≤ 130/80

If Afib, heart rate ≤ 80

If Afib, presence of an anticoagulant

Tobacco free

Child Diabetes

0 – < 13 years

Process Measures:

BP exam

HgA1C exam

Outcome Measures:

BP < 130/80

HgA1C ≤ 8.5

Colorectal Cancer Screening

50 – 75 years

Process Measures:

Colonoscopy (every 10 years) -OR-

CT Colonography (every 5 years) -OR-

Double Contrast Barium Enema (every 5 years) -OR-

Fecal Immunochemical-based testing (FIT) -OR-

Flexible Sigmoidoscopy (every 5 years) -OR-

FOBT

Coronary Artery Disease

18 – 75 years

Process Measures:

Beta-blocker therapy in patients with history of MI

BMI

BP exam

LDL exam (every 15 months)

Outcome Measures:

BP < 140/90

Daily ASA

LDL < 100

Tobacco free

"Optimal Vascular Care"

Adult Diabetes

18 – 75 years

Process Measures:

BP exam

Diabetic foot exam

HgA1C exam

LDL exam

Microalbumin exam

Retinal exam

Outcome Measures:

BP< 140/90

HgA1C < 8

LDL < 100

Tobacco free

"Optimal Diabetes Care"

Daily ASA if presence of IVD

Adolescent Diabetes

13 – <18 years

Process Measures:

BP exam

HgA1C exam

Microalbumin exam

Outcome Measures:

BP < 130/80

HgA1C ≤ 8

Adult Hypertension

18 years and older

Process Measures:

ACEi/ARB therapy if GFR < 60

BP exam

Outcome Measures:

BP < 140/90

Child & Adolescent Hypertension

< 18 years

Process Measures:

BMI

BP exam

Fasting blood glucose

Serum Creatinine

Total cholesterol exam

Urine analysis/microalbumin

Outcome Measures:

BP ≤ 120/80

Fasting blood glucose ≤ 100

Total Cholesterol ≤ 200

Adult & Adolescent Immunizations

> 11 years

Process Measures:

Herpes Zoster if > 60, (once)

Human Papilloma Vaccine (HPV) if female ages 18-26 (3 doses, ever)

Influenza-A (Flu Vaccine)

Pneumococcal if > 65, (once every 10 years)

Tetanus, diphtheria and acellular pertussis (Td/Tdap) (once every 10 years)

Varicella (VZV) (2 doses, ever)

Child Immunizations

0 – 2 years

Process Measures (by the 2nd birthday):

4 Diphtheria, tetanus and pertussis (DTaP)

3 Haemophilus influenza type B (HIB)

2 Hepatitis A (Hep-A)

3 Hepatitis B (Hep-B)

2 Influenza A (Flu Vaccine) (annually)

1 Measles, mumps, rubella (MMR)

4 Pneumococcal vaccine

3 Polio vaccine (IPV)

1 Varicella/chicken pox (VZV)

Vitals

All Ages

Process Measures:

Total Blood Pressure

Height

Weight

BMI

HDL

LDL

GFR

Serum creatinine

Triglycerides

Fasting Blood Glucose

Tobacco use indicated

Tobacco free

Total cholesterol

Tobacco

< 13 years

Process Measures:

Tobacco Assessment

Advised to quit

Willing to quit

Counseling/assistance given

Follow-up scheduled

Clinical Suites

Chronic diseases, such as diabetes, hypertension and coronary artery disease, are the dominant drivers of morbidity in today's health care environment. Blue Cross Blue Shield of North Dakota (BCBSND) believes that cost-effective chronic disease management will have the greatest effect on the long-term health of North Dakotans and the cost of health care for the entire state. That's why all patients will be a part of the MediQHome quality program, regardless of the patient's health insurance coverage.

The program measures are clinically relevant and endorsed by the National Quality Forum and the National Committee for Quality Assurance. The Care Center will initially track asthma, attention deficit hyperactivity disorder (ADHD), breast cancer screening, cervical cancer screening, chronic heart failure, colon cancer screening, coronary artery disease, adult and pediatric diabetes, adult and pediatric hypertension and adult and pediatric immunizations.

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Asthma

The American Medical Association (AMA) describes asthma as a chronic respiratory disease that places a considerable burden on those affected and results in substantial morbidity and use of health care services. The AMA estimates more than 30 million people in the United States have been diagnosed with asthma, with 12 million experiencing an asthma attack in the previous year.

Purpose of the Clinical Suite

The purpose of the Asthma Clinical Suite is to aid in the management of patients with asthma by identifying and tracking the severity of asthma and ensuring the provision of appropriate evidence-based pharmacological interventions. These interventions have been clinically proven to reduce the risk of worsening or acute exacerbation of asthma.

Clinical Suite Measures

The Asthma Clinical Suite is designed to capture the process and outcome measures that are relevant for successful treatment of patients with asthma.

This suite will be reported for patients ages 5 to 50 as follows:

Process measures (once per 12-month program period)

- Asthma severity classified using the National Asthma Education & Prevention Program guidelines:
  - Intermittent
  - Mild persistent
  - Moderate persistent
  - Severe persistent
- Inhaled corticosteroid – patients with persistent asthma (moderate to severe) are prescribed a long-term control medication (inhaled corticosteroid) or alternative steroid sparing control medication
- Inhaled short-acting beta-agonist – patients with persistent (all grades) asthma are prescribed a short-acting beta-agonist

The following exclusions have been defined for the suite:

Asthma

- Allergic disease without lower airway involvement
- COPD or emphysema
- Allergy to inhaled steroid or beta-agonist
- Patient refusal for economic, religious or social reasons

References

National Heart Lung and Blood Institute:
www.nhlbi.nih.gov/guidelines/asthma
Center for Disease Control:
www.cdc.gov
Minnesota Community Measurement Program:
www.mnhealthcare.org
National Committee of Quality Assurance (NCQA):
www.ncqa.org
Healthcare Effectiveness Data and Information Set (HEDIS®):
www.ncqa.org
American Medical Association:
www.ama-assn.org
UpToDate:
www.uptodate.com

Attention Deficit Hyperactivity Disorder (ADHD)

The American Medical Association emphasizes that people with ADHD experience substantial impairment in peer, family and academic functioning and that a diagnosis of ADHD is associated with significant educational and social impairment, an increased risk of accident and injury, and increased use of health care resources. Research continues to show that ADHD should be managed in a manner similar to other childhood chronic conditions.

Purpose of the Clinical Suite

The purpose of the ADHD Clinical Suite is to monitor the appropriate diagnosis and treatment of these patients. Follow-up care is considered as important as the initiation of the care and should be equally monitored.

Clinical Suite Measures

The ADHD Clinical Suite is designed to capture the process measures associated with the appropriate diagnosis, treatment and follow-up of these patients. The guidelines have been adopted from the National Quality Forum and the Institute for Clinical Systems Improvement.

This suite will be reported for patients younger than 18 as follows:

Process Measures

- 2 Body Mass Index (BMI) documented in the medical record within the reporting period

No exclusions have been defined for this suite.

References

Minnesota Community Measurement Program:
www.mnhealthcare.org

Institute for Clinical Systems Improvement:
www.icsi.org

National Committee of Quality Assurance (NCQA):
www.ncqa.org

Healthcare Effectiveness Data and Information Set (HEDIS®):
www.ncqa.org

American Medical Association:
www.ama-assn.org

UpToDate:
www.uptodate.com

Breast Cancer Screening

Breast cancer is the most common female cancer in the United States and the second most common cause of cancer death in women. Several risk factors have been identified, the most important of which are family history and endogenous as well as exogenous hormonal factors.

Purpose of the Clinical Suite

The purpose of the Breast Cancer Screening Clinical Suite is to increase screening compliance of female patients ages 50 to 74 to allow for early detection and treatment of breast cancer.

Clinical Suite Measures

The Breast Cancer Screening Clinical Suite is designed to capture the process measures that are relevant for successful breast cancer screening of female patients.

This suite will be reported on female patients ages 50 to 74 as follows:

- Mammogram: checked and reported once in a 12-month program period or one year prior OR
- Breast MRI: checked and reported once in a 12-month program period or one year prior OR
- Breast-specific gamma imaging (Scintamammogram): checked and reported once in a 12-month program period or one year prior.

NOTE: The screening measures for this clinical suite are considered minimum recommendations. With some disease processes or with higher risk factors, some patients may require more intensive surveillance.

The following exclusions have been defined for the suite:

- Absence of both breasts
- Patient refusal for economic, religious or social reasons

References

U.S. Preventive Services Task Force:
www.ahrq.gov
American Cancer Society:
www.cancer.org
Center for Disease Control:
www.cdc.gov
Minnesota Community Measurement Program:
www.mnhealthcare.org
National Committee of Quality Assurance (NCQA):
www.ncqa.org
Healthcare Effectiveness Data and Information Set (HEDIS®):
www.ncqa.org
American Medical Association:
www.ama-assn.org
UpToDate:
www.uptodate.com

Cervical Cancer Screening

The National Cancer Institute estimated that in 2008 more than 11,000 U.S. women would be diagnosed with cervical cancer and 3,800 of these women would die of the disease. Efforts to increase the number of women who get Pap tests has led to a 70 percent decrease in the number of cervical cancer cases since the test was introduced in the 1950s.

Purpose of the Clinical Suite

The purpose of the Cervical Cancer Screening Clinical Suite is to increase the cervical cancer screening rates in female patients ages 21 to 65 to allow for early detection and treatment of cervical cancers.

Clinical Suite Measures

The Cervical Cancer Screening Clinical Suite is designed to capture the process measure of Pap test exams in female patients.

This suite will report on female patients ages 21 to 65 as follows:

- Pap Test: checked and reported once in a 12-month program period or two years prior.

NOTE: The screening measures for this clinical suite are considered minimum recommendations. With some disease processes or with higher risk factors, some patients may require more intensive surveillance.

The following exclusions have been defined for the suite:

- Hysterectomy
- Patient refusal for economic, religious or social reasons

References

U.S. Preventive Services Task Force
www.ahrq.gov
American Cancer Society:
www.cancer.org
Center for Disease Control:
www.cdc.gov
Minnesota Community Measurement Program:
www.mnhealthcare.org
National Committee of Quality Assurance (NCQA):
www.ncqa.org
Healthcare Effectiveness Data and Information Set (HEDIS®):
www.ncqa.org
American Medical Association:
www.ama-assn.org
National Cancer Institute:
www.cancer.gov
UpToDate:
www.uptodate.com

Chronic Heart Failure

An aging population and modern therapeutic innovations that prolong the lives of cardiac patients have made chronic heart failure (CHF) more common. Despite improvements in therapy, the mortality rate in patients with CHF is high.

Purpose of the Clinical Suite

The purpose of the Chronic Heart Failure Clinical Suite is to identify and comprehensively manage patients with chronic heart failure by pinpointing and tracking interventions that have been clinically proven to reduce the risk of developing complications.

Clinical Suite Measures

The Chronic Heart Failure Clinical Suite is designed to capture the process and outcome measures that are relevant to the successful treatment of patients with CHF.

This suite will be reported on patients ages 18-75 as follows:

Process Measures

- Ejection fraction (checked and reported once within 24-month reporting period)
- Serum Creatinine (checked and reported once within 12-month reporting period)
- Blood pressure exam
- Pulse exam

Outcome Measures

- Blood pressure (BP) ≤ 130/80 (most recent)
- If presence of Atrial Fibrillation, heart rate ≤ 80 (most recent)
- Tobacco free
- Presence of ACEi/ARB therapy when Left Ventricular Function (LVF) ≤ 40%
- Presence of Beta-blocker therapy when LVF is ≤ 40%
- If presence of Atrial Fibrillation, patient is on an anticoagulant*.

The following exclusions have been defined for the suite:

Anticoagulant

- Allergy to medication
- Contraindication to anticoagulation
- Patient refusal for economic, religious or social reasons

ACEi/ARB

- Allergy to ACEi *and* ARB
- Moderate to severe aortic stenosis
- Patient refusal for economic, religious or social reasons**Beta Blocker**

- Allergy to beta blocker
- Contraindication to use
- Patient refusal due to economic, religious or social reasons

References

American Heart Association:
www.americanheart.org
Center for Disease Control:
www.cdc.gov
Minnesota Community Measurement Program:
www.mnhealthcare.org
National Committee of Quality Assurance (NCQA):
www.ncqa.org
Healthcare Effectiveness Data and Information Set (HEDIS®):
www.ncqa.org
American Medical Association:
www.ama-assn.org
UpToDate:
www.uptodate.com

* Clopidogrel (Plavix), Prasugrel (Effient), Ticagrelor (Brilinta), Dabagatrin (Pradaxa), Warfarin, Coumadin

Colorectal Cancer Screening

Colorectal cancer is a common and lethal disease, with the risk of development being influenced by both environmental and genetic factors. According to the American Medical Association, screening exams can reduce the mortality rate from this disease by at least 30 percent.

Purpose of the Clinical Suite

The purpose of the Colorectal Cancer Screening Clinical Suite is to increase screening rates for colorectal cancer in patients to reduce the morbidity and mortality associated with this condition.

Clinical Suite Measures

The Colorectal Cancer Screening Clinical Suite is designed to capture the process measures that are relevant to successful colorectal cancer screening of patients.

This suite will be reported on patients ages 50 to 75 as follows:

- Fecal Occult Blood Test (FOBT): checked and reported once in a 12-month program period OR
- Fecal Immunochemical-based testing (FIT): checked and reported once in a 12-month program period OR
- Flexible Sigmoidoscopy: checked and reported once in a 12-month program period or four years prior OR
- Double Contrast Barium Enema (DCBE): checked and reported once in a 12-month program period or four years prior OR
- Colonoscopy: checked and reported once in a 12-month program period or nine years prior OR
- CT Colonography: checked and reported once in a 12-month program period or four years prior.

NOTE: The screening measures for this clinical suite are considered minimum recommendations. With some disease processes or with higher risk factors, some patients may require more intensive surveillance.

Claims data for BCBSND members will be available in patient care summary reports and identified as data from claims.

The following exclusions have been defined for the suite:

- History of a total colectomy
- Patient refusal for economic, religious or social reasons

References

American Cancer Society:
www.cancer.org
Center for Disease Control:
www.cdc.gov
Minnesota Community Measurement Program:
www.mnhealthcare.org
National Committee of Quality Assurance (NCQA):
www.ncqa.org
Healthcare Effectiveness Data and Information Set (HEDIS®):
www.ncqa.org
American Medical Association:
www.ama-assn.org
UpToDate:
www.uptodate.com

Coronary Artery Disease

Coronary artery disease (CAD), which includes coronary heart disease (CHD), stroke and peripheral vascular disease, is the leading cause of death in the United States and accounts for more than 900,000 deaths annually. The American Heart Association identifies the following major modifiable risk factors for coronary heart disease: smoking, hypertension, dyslipidemia, physical inactivity, obesity and diabetes.

Purpose of the Clinical Suite

The purpose of the Adult Stable Coronary Artery Disease Clinical Suite is to aid in the identification of patients with known CAD and provide a platform for the identification and management of the major risk factors associated with progression of CAD. The suite also identifies and tracts interventions that have been clinically proven to reduce the risk of complications associated with CAD.

Clinical Suite Measures

The Adult Stable Coronary Artery Disease Clinical Suite is designed to capture the process and intermediate outcome measures that are relevant to the successful management of patients age 18-75 with a diagnosis of CAD, including obstructive and non-obstructive CAD. The intermediate outcome measures are risk-adjusted to reflect underlying co-existing clinical conditions that affect treatment. The measures adopted, with the exception of optimal vascular care combined intermediate measure, are congruent with the AHA endorsed Chronic Stable Coronary Artery Disease Clinical Performance Measures.

This suite will be reported on patients ages 18-75 as follows:

Process Measures *(checked and reported once per reporting period)*

- Body Mass Index (BMI)
- LDL exam
- Beta-blocker therapy in patients with history of myocardial infarction (MI)
- Blood pressure exam

Outcome Measures

- BP < 140/90
- Most recent LDL < 100
- Patient is tobacco free
- Daily aspirin therapy *
- Optimal vascular care**

The following exclusions have been defined for the measure:

Aspirin

- Asthma
- Active bleeding/history of ASA - induced bleeding
- Allergy/anaphylaxis to medication
- Medical contraindication to use
- Patient refusal for economic, religious or social reasons

Beta-blocker therapy

- Allergy/anaphylaxis to medication
- Medical contraindication to use
- Patient refusal for economic, religious or social reasons

NOTE: No exclusions for tobacco status should exist in terms of reporting purposes.

References

American Heart Association: www.americanheart.org

Minnesota Community Measurement Program: www.mnhealthcare.org

National Committee of Quality Assurance (NCQA): www.ncqa.org

American Medical Association: www.ama-assn.org

*Plavix, Ticlid and Aggrenox will be considered equivalent to aspirin and an exclusion for aspirin will be considered legitimate exclusion for other antiplatelet agents.

**Optimal vascular care is defined as BP < 140/90 for patients with IVD *and* LDL < 100 *and* tobacco free *and* daily aspirin use if appropriate. This combined intermediate outcome measure is being adopted unchanged from the Minnesota Community Measure Project.

Diabetes, Adult

Diabetes is considered the fifth deadliest disease in the United States, according to the American Medical Association. It is associated with microvascular and macrovascular disease and accounts for almost 14 percent of U.S. health care expenditures, at least half of which are related to complications, such as myocardial infarction, stroke, end-stage renal disease, retinopathy and foot ulcers.

Purpose of the Clinical Suite

The purpose of the Adult Diabetes Clinical Suite is to aid in the management of patients with diabetes by identifying and tracking the major clinical factors associated with outcomes in diabetes. The suite also identifies and tracks additional clinical data that have been shown to reduce the risk of complications associated with poor management in this high-risk group of patients.

Clinical Suite Measures

The Adult Diabetes Clinical Suite is designed to capture the process and outcome measures that are relevant to the successful, comprehensive management of these patients.

This suite will be reported on patients ages 18-75 as follows:

Process Measures *(within the 12-month reporting period)*

- Blood pressure exam
- Diabetic foot exam
- Hemoglobin A1C (HgA1C) exam
- Low-density lipoprotein (LDL) exam
- Microalbumin exam
- Retinal exam

Outcome Measures

- Blood pressure (BP) < 140/90 (most recent)
- HgA1C < 8% (most recent)
- LDL < 100mg/dL (most recent)
- Patient is tobacco free
- "Optimal Diabetes Care"*

The following exclusions have been defined for the measure:

Microalbumin Exam

- Renal replacement therapy
- Diagnosis of nephropathy
- Macroscopic proteinuria
- Renal insufficiency
- Patient refusal for economic, religious or social reasons

Retinal Exam

- Blindness
- Diagnosis of retinopathy
- No retinopathy-exam deferred to next year
- Patient refusal for economic, religious or social reasons

References

American Diabetes Association:
www.diabetes.org
Minnesota Community Measurement Program:
www.mnhealthcare.org
National Committee of Quality Assurance (NCQA):
www.ncqa.org
Healthcare Effectiveness Data and Information Set (HEDIS®):
www.ncqa.org
American Medical Association:
www.ama-assn.org
UpToDate:
www.uptodate.com

* "Optimal Diabetes Care" is defined as HgA1C < 8 *and* LDL <100 *and* BP < 140/90 *and* tobacco free.

Diabetes, adolescent

Recent Blue Cross Blue Shield of North Dakota (BCBSND) research shows the incidence and prevalence of childhood diabetes continue to rise. Most significant is the rise in Type 2 diabetes. This data emphasizes the need for early detection and prevention of diabetes and its co-morbid conditions.

Purpose of the Clinical Suite

The purpose of the Adolescent Diabetes Clinical Suite is to aid in the management of patients age less than 18 who have diabetes by identifying and tracking the major clinical factors associated.

This clinical suite is designed to improve the detection, evaluation and management of diabetes complications in children and adolescents by tracking clinical and non-clinical factors, based on age stratification, that have an effect on the successful management of this condition.

Clinical Suite Measures

The Adolescent Diabetes Clinical Suite is designed to capture the process and outcome measures that are relevant to the successful, comprehensive management of these patients.

This suite will be reported on the American Diabetes Association (ADA) 2008 recommendations:

Age 13 – <18 years:

Process Measures *(within the 12-month reporting period)*

- Blood pressure exam
- HgA1C exam
- Microalbumin exam

Outcome Measures

- BP ≤ 130/80 (most recent)
- HgA1C ≤ 8% (most recent)

The following exclusions have been defined for the suite:

Microalbumin Exam

- Renal replacement therapy
- Diagnosis of nephropathy
- Macroscopic proteinuria
- Renal insufficiency
- Patient refusal for economic, religious or social reasons

References

American Diabetes Association:
www.diabetes.org
Minnesota Community Measurement Program:
www.mnhealthcare.org
National Committee of Quality Assurance (NCQA):
www.ncqa.org
Healthcare Effectiveness Data and Information Set (HEDIS®):
www.ncqa.org
American Medical Association:
www.ama-assn.org
UpToDate:
www.uptodate.com

Diabetes, child

Recent Blue Cross Blue Shield of North Dakota (BCBSND) research shows the incidence and prevalence of childhood diabetes continue to rise. Most significant is the rise in Type 2 diabetes. This data emphasizes the need for early detection and prevention of diabetes and its co-morbid conditions.

Purpose of the Clinical Suite

The purpose of the Child Diabetes Clinical Suite is to aid in the management of patients younger than 13 who have diabetes by identifying and tracking the major clinical factors associated.

This clinical suite is designed to improve the detection, evaluation and management of diabetes complications in children and adolescents by tracking clinical and non-clinical factors, based on age stratification, that have an effect on the successful management of this condition.

Clinical Suite Measures

The Child Diabetes Clinical Suite is designed to capture the process and outcome measures that are relevant to the successful, comprehensive management of these patients.

This suite will be reported on the American Diabetes Association (ADA) 2008 recommendations:

Age 0 – < 13 years:

Process Measures *(within the 12-month reporting period)*

- Hemoglobin A1C (HgA1C) exam
- Blood pressure exam

Outcome Measures

- HgA1C ≤ 8.5% (most recent)
- Blood pressure (BP) < 130/80 (most recent)

No exclusions have been defined for this suite.

References

American Diabetes Association:
www.diabetes.org
Minnesota Community Measurement Program:
www.mnhealthcare.org
National Committee of Quality Assurance (NCQA):
www.ncqa.org
Healthcare Effectiveness Data and Information Set (HEDIS®):
www.ncqa.org
American Medical Association:
www.ama-assn.org
UpToDate:
www.uptodate.com

Hypertension, adult

Hypertension is a major independent, modifiable risk factor for the development of CAD, stroke and renal failure. At least 65 million adult Americans, or nearly one-fourth of the adult population of the United States, have hypertension. The risk of cardiovascular disease in the patient with hypertension can be greatly reduced with effective hypertension management.

Purpose of the Clinical Suite

The Adult Hypertension Suite is designed to improve the detection, evaluation and management of hypertension in patients 18 and older. The suite also identifies and tracks interventions that have been clinically proven to reduce the risk of developing complications associated with poor hypertension control.

Clinical Suite Measures

The Adult Hypertension Clinical Suite is designed to capture the process and intermediate clinical outcome measures that are relevant to the successful management of patients 18 and older with known hypertension (Stage I or II). The intermediate outcomes measures being tracked are risk-adjusted based on the presence or absence of chronic kidney disease (CKD), defined as an estimated glomerular filtration rate (eGFR) of less than 60 mL/min, the presence thereof, significantly impacting patient management. In addition, the suite will track patient demographics, associated laboratory values, medications and laboratory values associated with the management of these patients.

The Adult Hypertension Suite will be activated only within the Care Center in instances where blood pressure control is not being tracked as an intermediate outcomes measure in another suite, such as diabetes or chronic heart failure. In the event where blood pressure control is being tracked as an intermediate outcomes measure in another suite, that suite's measures will reflect the patient's hypertension control.

The suite will report patients 18 and older who have been diagnosed with hypertension (Stage I & II) as follows:

Process Measures

- Annual blood pressure (BP) measurement
- ACEi/ARB therapy if GFR < 60
- Blood pressure exam

Outcome Measures

- BP < 140/90 or BP < 130/80 if GFR < 60 or microalbumin exclusion

The following exclusions have been defined for the suite:

Microalbumin

- Renal replacement therapy
- Macroscopic proteinuria
- Chronic renal failure

ACEi

- ACEi Allergy
- Hypotension
- Cough
- Patient intolerance
- Aortic Stenosis
- Patient refusal for economic, religious or social reasons

ARB

- ARB Allergy
- Hypotension
- Patient intolerance
- Aortic Stenosis
- Patient refusal for economic, religious or social reasons

The measures above will allow treating physicians the ability to identify additional co-morbidities, as well as clinical factors that may impact treatment decisions, thus allowing for a more comprehensive management plan for individual patients.

References

American Heart Association:
www.americanheart.org
Minnesota Community Measurement Program:
www.mnhealthcare.org
National Committee of Quality Assurance (NCQA):
www.ncqa.org
The Seventh Report of the Joint National Committee on the Prevention, Detection, Evaluation, and Treatment of High Blood Pressure (JNC VII):
www.nhlbi.nih.gov/guidelines/hypertension/express.pdf
National Kidney Disease Education Program:
www.nkdep.nih.gov

Hypertension, child and adolescent

The American Heart Association reports that high blood pressure in childhood can be a major predictor of chronic high blood pressure in adulthood. The AHA goes on to state that elevated blood pressure (prehypertension and hypertension) can lead to a number of more serious health problems and affects about 60 percent of American children and adolescents.

Purpose of the Clinical Suite

The Child and Adolescent Hypertension Suite is designed to improve the early detection of hypertension in patients who are 18 years and younger. The suite also tracks risk factors for associated co-morbidities such as hyperglycemia, obesity and hyperlipidemia.

Clinical Suite Measures

The Child and Adolescent Hypertension Clinical Suite is designed to capture the process and intermediate clinical outcome measures that are relevant to the successful management of patients younger than 18 with known hypertension (Stage I or II, as established by the National High Blood Pressure Education Program).

The Child and Adolescent Hypertension Suite will only be activated within the Care Center in instances where blood pressure control is not being tracked as an intermediate outcomes measure in another suite. In the event where blood pressure control is being tracked as an intermediate outcomes measure in another suite, that suite's measures will reflect the patient's hypertension control.

The suite will report patients with a diagnosis of hypertension (Stage I & II) who are younger than 18 as follows:

Process Measures

- Annual blood pressure (BP) measurement
- Annual body mass index (BMI) calculation
- Annual urine analysis/microalbumin
- Annual serum creatinine
- Annual fasting blood glucose
- Annual total cholesterol exam

Outcome Measures

- BP ≤ 120/80*
- Total cholesterol ≤ 200
- Fasting blood glucose ≤ 100

The following exclusions have been defined for the measure:

Microalbumin

- Renal replacement therapy
- Macroscopic proteinuria
- Chronic renal failure
- Patient refusal for economic, religious or social reasons

References

National Heart Lung and Blood Institute:
www.nhlbi.nih.gov/guidelines/asthma

American Heart Association:
www.americanheart.org

Minnesota Community Measurement Program:
www.mnhealthcare.org

National Committee of Quality Assurance (NCQA):
www.ncqa.org

The Seventh Report of the Joint National Committee on the Prevention, Detection, Evaluation, and Treatment of High Blood Pressure (JNC VII):
www.nhlbi.nih.gov/guidelines/hypertension/express.pdf

National Kidney Disease Education Program:
www.nkdep.nih.gov

* The complexity of defining hypertension in children necessitates an elective decision to define hypertension in this age group to a chronic elevation in blood pressure above 120 systolic and/or 80 diastolic.

Immunizations, adult and adolescent

Technology has allowed an array of vaccines to be developed. Disease prevention provides both health benefits and helps control the rising cost of medical care. Adult immunizations are heavily related to the co-morbid conditions of the patient.

Purpose of the Clinical Suite

The purpose of the Adult Immunizations Clinical Suite is to encourage all adults to have immunizations recommended by the Centers for Disease Control and Prevention (CDC).

Clinical Suite Measures

The Adult Immunizations Clinical Suite is designed to show care opportunities for adult immunizations recommended by the CDC.

This suite will be reported for patients older than 11 on the CDC guidelines as follows:

Process Measures

- Influenza-A (Flu Vaccine): 1 in the past 12-month reporting period
- Tetanus, diphtheria and acellular pertussis (Td/Tdap): 1 booster every 10 years
- Varicella (VZV): 2 doses, ever
- Human Papilloma Vaccine (HPV): female patients 18 to 26 with 3 HPV before 26th birthday
- Herpes Zoster Vaccination: 1 for patients 60 and older, ever
- Pneumococcal Vaccine: 1 for patients older than 65, 1 every 10 years

NOTE: These standards are recommended for the average healthy adult patient. Certain disease states may require modifications to these recommendations.

The following exclusions have been defined for the suite:

All immunizations

- Anaphylactic reaction to the vaccine or its components
- Medical contraindication to use
- Patient refusal for economic, religious or social reasons

References

Center for Disease Control:
www.cdc.gov
Minnesota Community Measurement Program:
www.mnhealthcare.org
National Committee of Quality Assurance (NCQA):
www.ncqa.org
Healthcare Effectiveness Data and Information Set (HEDIS®):
www.ncqa.org
American Medical Association:
www.ama-assn.org
UpToDate:
www.uptodate.com

Immunizations, child

Technology has allowed an array of vaccines to be developed. Disease prevention provides health benefits and helps control the rising cost of medical care.

Purpose of the Clinical Suite

The purpose of the Childhood Immunizations Clinical Suite is to encourage all children and adolescents to receive immunizations recommended by the Centers for Disease Control and Prevention (CDC), while taking into consideration the social, economic and religious preferences of each child's parents.

Clinical Suite Measures

The Childhood Immunizations Clinical Suite is designed to show the care opportunities for immunizations for the child and adolescent population as recommended by the CDC. The complexity of clinical risk-adjustment and application of the CDC immunization recommendations necessitates that only general guidelines be applicable to the average healthy child.

This suite will be reported on the CDC guidelines as follows:

Children birth to 2

Process Measures *(to be completed on or before the second birthday)*

- 4 Diphtheria, tetanus and pertussis (DTaP)
- 3 Polio vaccine (IPV)
- 1 Measles, mumps, rubella (MMR)
- 3 Haemophilus influenza type B (HIB)
- 3 Hepatitis B (Hep-B)
- 1 Varicella/chicken pox (VZV)
- 4 Pneumococcal vaccine
- 2 Hepatitis A (Hep-A)
- 2 Influenza-A, annually

The following exclusions have been defined for the suite:

All immunizations

- Anaphylactic reaction to the vaccine or its components
- Medical contraindication to use
- Parent refusal for economic, religious or social reasons

References

Center for Disease Control:
www.cdc.gov

Minnesota Community Measurement Program:
www.mnhealthcare.org

National Committee of Quality Assurance (NCQA):
www.ncqa.org

Healthcare Effectiveness Data and Information Set (HEDIS®):
www.ncqa.org

American Medical Association:
www.ama-assn.org

UpToDate:
www.uptodate.com

Attachment 15

Attachment 15

Attachment 20

Attachment 20

Attachment 15

Pharmacy Carve-In

Study Shows Advantages of Carve-in Pharmacy Benefits

FACT SHEET

BlueCross BlueShield Association

Accounts purchasing health insurance products can choose between packages with integrated medical and pharmacy benefits or those with separate medical and pharmacy benefits. Health insurance products with integrated medical and pharmacy benefits are defined as having carve-in pharmacy benefits, while health insurance products with separate medical and pharmacy benefits are defined as having carve-out pharmacy benefits. Both carve-in and carve-out pharmacy benefit programs may include clinical and cost-saving components such as mail order pharmacy services, specialty pharmacy services, formulary management, prescription drug utilization review and disease management programs.

Carve-In Program	Carve-Out Program
May include services such as mail-order and specialty pharmacy services, formulary management, drug utilization review and care management. Plan may use a pharmacy benefit manager (PBM), but PBM is integrated with health plan.	May include services such as mail-order and specialty pharmacy services, formulary management, drug utilization review and care management. Pharmacy benefits manager contracts separately with account to provide services.
Health plan **HAS DIRECT ACCESS** to pharmacy data.	Health plan **DOES NOT HAVE DIRECT ACCESS** to pharmacy data.
Health plan **CONTROLS** copayments, drug benefit tiers and formulary.	Health plan **DOES NOT CONTROL** copayments, drug benefit tiers and formulary.

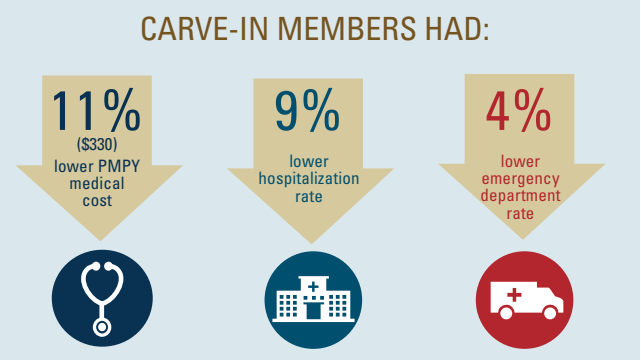
Study Overview

The Blue Cross Blue Shield Association commissioned a study comparing the medical costs of members with carve-in pharmacy benefits with those of members with carve-out pharmacy benefits, as well as the rate of hospitalization and emergency department visits for members in both types of plans. In July 2013, Prime Therapeutics, a pharmacy benefits management company owned by a consortium of Blue Plans, conducted the study. The Prime Therapeutics health outcomes team compared the medical costs, hospital admissions and emergency department visits in 2010 and 2011 for **1.8 million Blue members in self-funded plans** administered by **25 Blue Plans**. Members were **roughly evenly divided between carve-in and carve-out plans** and were **matched by age, gender and geographic region**.

KEY RESULTS

The study indicated that members with carve-in pharmacy benefits had lower per member per year (PMPY) medical costs, fewer hospitalizations and fewer emergency department visits.

Results were consistent with those of three regional Blue studies comparing medical costs for carve-in and carve-out members.[1-3]



Blue Cross Blue Shield Association is an association of independent Blue Cross and Blue Shield companies.

ANALYSIS

The lower medical costs for members with carve-in pharmacy benefits may be due to one or more factors, including:

- Integration of medical and pharmacy data in carve-in arrangements enables health plans to take a **holistic approach to controlling medical costs**, in which prescription drug costs are considered in the context of effective overall management of the patient's condition.[4]
- Plans can design the prescription drug formulary to include medications that result in the **best overall clinical outcomes,** instead of designing the formulary based solely on cost or rebates.
- Pharmacy data available through carve-in pharmacy benefits **improves healthcare coordination and data integration**, thus enabling providers to offer quicker and more targeted health interventions to patients.[5-6]
- Carve-in health plans can design the prescription drug benefit to encourage appropriate utilization by therapeutic class, instead of designing the benefit to drive use of the most profitable drugs. Lowering copayments have been shown to increase medication adherence but raising copayments too high may increase medication abandonment and effectively combining these strategies may contribute to lower medical costs.[7] **Lower copayments have been shown to increase member compliance with drug therapy**.[8-10]

For more detailed study information, please contact your Blue Cross Blue Shield Plan.

STUDY DESIGN

- Used de-identified Blue Health Intelligence®[11] data on 1.8 million members under age 65 in 25 Blue Plans for 2011 and 2012. Members who had changes in benefit design or who had lapses in coverage were excluded from the study.
- Compared medical costs, hospitalization rates, and emergency department visit rates for 818,054 carve-in and 1,042,029 carve-out members.
- Used a general linear model with gamma distribution to measure the difference in average PMPY total medical costs between carve-in and carve-out patients and a multivariate logistic regression model to compare the percentage of carve-in and carve-out members who were hospitalized or visited the emergency department.
- These methods were used to adjust for baseline differences in member age, gender, diagnostic cost group scores, presence of one or more of six chronic diseases, insurance product type, urban or rural geographic region, and group size.

1. Culley EJ, Williams LC, Thomas L. Pharmacy Benefits Carve-In: The Right Prescription for Cost Savings. Benefits & Compensation Digest 2010; 47(11):22-26. http://web.ebscohost.com/ehost/pdfviewer/pdfviewer?sid=da7c8ed3-fd61-4d61-983c-54690231d77a%40sessionmgr11&vid=2&hid=23. Accessed June 28, 2013.
2. Smith-McLallen A. Effects of Pharmacy Benefit Carve-In on Utilization and Medical Costs: A Three-Year Study. Benefits Magazine 2012;49(2):1-6 http://www.ifebp.org/pdf/webexclusive/12feb.pdf. Accessed June 28, 2013.

3-4. Wells P, Ness D. Pharmacy Carve-In: The Value of Integrated Benefits. Premera Blue Cross. 2011. Washington Healthcare News. http://www/wahcnews.com/newsletters/wa-premera-0412.pdf. Accessed June 28, 2013.

5. BlueCross Blue Shield of North Carolina – Corporate Medical Policy – Infertility Diagnosis and Treatment. http://www.bcbsnc.com/assets/services/public/pdfs/medicalpolicy/infertility_diagnosis_and_treatment.pdf. Accessed June 28, 2013.
6. Carefirst BluePreferred (PPO) member services. https://member.carefirst.com/wps/portal/!ut/p/c4/04_SB8K8xLLM9MSSzPy8xBz9CP0os3hLbzN_Q09LYwN_Fw9DA09fiBHj6AgQwNHM_2CbEdFANmphzQ!/?WCM_GLOBAL_CONTEXT=/wcmwps/wcm/connect/content-member/carefirst/memberportal/plansummaries/popup/bluepreferred Accessed June 28, 2013.
7. Gleason P. Lessons from the Real World: Designing Specialty Pharmacy Benefits to Maximize Value. Benefits Magazine 2012;10:38-41
8. Solomon MD, Goldman DP, Joyce GF, Escarce JJ. Cost Sharing and the Initiation of Drug Therapy for the Chronically Ill. Arch Intern Med 2009; 169(8): 740-748.
9. Shrank WH, Hoang T, Ettner SL, et al. The Implications of Choice: Prescribing Generic or Preferred Pharmaceuticals Improves Adherence for Chronic Conditions. Arch Intern Med 2006; 166: 332-337.
10. Karac-Mandic P, Jena AB, Joyce GF, Goldman DP. Out-of-Pocket Medication Costs and Use of Medications and Health Care Services among Children with Asthma. JAMA 2012; 307(12): 1284-1291.

11. Blue Health Intelligence (BHI) is a trade name of Health Intelligence Company, LLC, an independent licensee of the Blue Cross and Blue Shield Association.

Y10-13-391

Attachment 16

Attachment 16

Drug Formulary

July 2014

Blue Cross Blue Shield of North Dakota Drug Formulary

Click to search for a **drug name** in this document

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Please consider talking to your doctor about prescribing formulary medications, which may help reduce your out-of-pocket costs. This list may help guide you and your doctor in selecting an appropriate medication for you.

The drug formulary is regularly updated. Please visit **bcbsnd.com** for the most up-to-date information.

To search for a drug name within this PDF document, use the **Control** and **F** keys on your keyboard, or go to **Edit** in the drop-down menu and select **Find/Search**. Type in the word or phrase you are looking for and click on **Search**.

2626 ND © Prime Therapeutics LLC 07/14

Introduction

Formulary

The goal of the Blue Cross Blue Shield of North Dakota (BCBSND) formulary is to provide our members broad access to drugs and supplies at a reasonable overall cost. The BCBSND Drug Formulary is the list of products (drugs and supplies) that reflect the current recommendations of the BCBSND Pharmacy & Therapeutics (P&T) Committee. The formulary is intended for use in the ambulatory setting. Drugs are selected for addition to the formulary after considering safety, efficacy, uniqueness, and market considerations. **Providers are encouraged to prescribe formulary drugs.**

Benefits are not limited to the drugs on this formulary list. Products not listed in this formulary are non-formulary (NF). Exception: most diabetic supplies are covered at the highest benefit for plans that cover them. The P&T committee may choose to not add a drug or remove a drug from formulary for reasons including safety or efficacy concerns, or because a clinically similar, more cost-effective drug is already on formulary. Newly marketed drugs are non-formulary until reviewed by the P&T Committee. The entire formulary is reviewed annually by the P&T Committee. This formulary list is subject to change. **Drug coverage is dependent on individual plan benefits**.

Members

To save the most money on prescription drugs, take this Formulary with you each time you visit your physician. Consider asking your physician to prescribe drugs listed in this Formulary, if appropriate. Any and all decisions that require or pertain to independent professional medical judgment or training, or the need for, and dosage of, a prescription drug, must be made solely by you and your physician in accordance with the patient/physician relationship.

The current version and recent changes to this Formulary is available at the BCBSND website at **www.bcbsnd.com** or by calling the customer service number listed on your identification card. **Online pharmacy tools** are available through the Prime Therapeutics® website at **www.MyPrime.com**. BCBSND members can find drug cost estimates or check if a particular drug is on the BCBSND formulary.

Under some circumstances, formulary drugs may be excluded from coverage under the drug benefit (e.g., oral contraceptives, nicotine replacement therapy, Retin-A, various injectables, etc.). In all cases, plan inclusions/exclusions determine specific coverage regardless of formulary status. Drugs not listed are non-formulary. Exception: most diabetic supplies are covered at the highest benefit level for plans that cover them. However, only the preferred products are included on this list.

Providers

Generic Utilization

The BCBSND Committee encourages generic utilization as a way to provide high-quality drugs at a reduced cost. By prescribing drugs listed in this formulary that are available generically, you are providing a product that can be expected to have the same effectiveness and safety profile as the brand product while lowering overall medical insurance costs for your patients. In addition, your patient will likely have a lower cost share for generic drugs because most benefit plans are based on a tiered or brand/generic copayment and coinsurance structure.

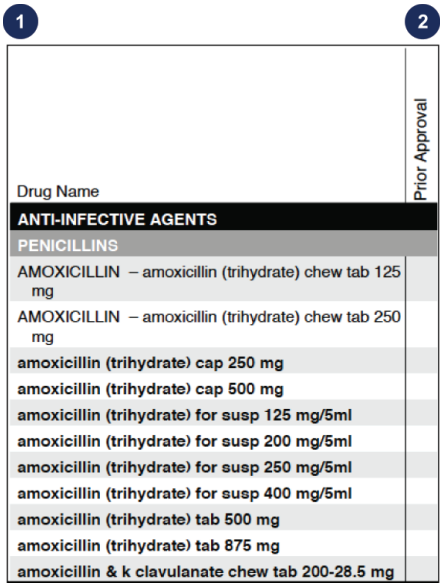
Prior Approval

Use of some products identified by **PA** may be approved only after certain criteria are met. If prior approval is not obtained, benefits may be denied. A physician (or clinic personnel) should submit a written request to the address shown below for prior approval consideration. The Prior Approval Request form is available at https://www.thorconnect.org/docs/wcmd_014232.pdf. A list of the products requiring prior approval may be found at **www.bcbsnd.com** under pharmacy.

Fax to: (701) 277-2253
Mail to:
BCBSND
Attn: Medical Management
4510 13th Ave S
Fargo, ND 58121

How to use this list

The Formulary is organized into broad categories (e.g. Anti-Infective drugs). Within most categories, drugs are sub-grouped by drug class (e.g. Penicillins) or by use for a specific medical condition (e.g. Diabetes). These categories can help determine which specific product is on formulary.



1. The first column of the chart lists the drug name. Generic drugs are shown in lower-case **boldface** type. Most generic drugs are followed by a reference brand drug in (parentheses). Some generic products have no reference brand.

   Brand prescription drugs are shown in capital letters followed by the generic name.

2. The second column indicates the Utilization Management (UM) program(s) that apply to the prescription drug (e.g., Prior Approval). If an indicator is present in the column(s), then the UM program noted is possibly applied to your benefit. Some plans may have UM on additional medications beyond those noted in this document.

Abbreviation/acronym key

caps.....capsules
chew.....chewable
conc.....concentrate
cr.....controlled release
dr.....delayed release
ec.....enteric coated
effe.....effervescent
equiv.....equivalent
er.....extended release
inhal.....inhalation
inj.....injection
liq.....liquid
lotn.....lotion
nebu.....nebulizer
odt.....orally disintegrating tablets
oint.....ointment
ophth.....ophthalmic
osm.....osmotic release
powd.....powder
sa.....sustained action
sl.....sublingual
soln.....solution
sr.....sustained release
suppos.....suppositories
susp.....suspension
tab.....tablets
td.....transdermal

Drug Name	Prior Approval
ANTI-INFECTIVE AGENTS	
PENICILLINS	
AMOXICILLIN – amoxicillin (trihydrate) chew tab 125 mg	
AMOXICILLIN – amoxicillin (trihydrate) chew tab 250 mg	
amoxicillin (trihydrate) cap 250 mg	
amoxicillin (trihydrate) cap 500 mg	
amoxicillin (trihydrate) for susp 125 mg/5ml	
amoxicillin (trihydrate) for susp 200 mg/5ml	
amoxicillin (trihydrate) for susp 250 mg/5ml	
amoxicillin (trihydrate) for susp 400 mg/5ml	
amoxicillin (trihydrate) tab 500 mg	
amoxicillin (trihydrate) tab 875 mg	
amoxicillin & k clavulanate chew tab 200-28.5 mg	
amoxicillin & k clavulanate chew tab 400-57 mg	
amoxicillin & k clavulanate for susp 200-28.5 mg/5ml	
amoxicillin & k clavulanate for susp 250-62.5 mg/5ml (Augmentin)	
amoxicillin & k clavulanate for susp 400-57 mg/5ml	
amoxicillin & k clavulanate for susp 600-42.9 mg/5ml (Augmentin es-600)	
amoxicillin & k clavulanate tab sr 12hr 1000-62.5 mg (Augmentin xr)	
amoxicillin & k clavulanate tab 250-125 mg	
amoxicillin & k clavulanate tab 500-125 mg (Augmentin)	
amoxicillin & k clavulanate tab 875-125 mg (Augmentin)	
AMPICILLIN – ampicillin for susp 125 mg/5ml	
AMPICILLIN – ampicillin for susp 250 mg/5ml	
ampicillin cap 250 mg	
ampicillin cap 500 mg	
AUGMENTIN – amoxicillin & k clavulanate for susp 125-31.25 mg/5ml	

Drug Name	Prior Approval
dicloxacillin sodium cap 250 mg	
dicloxacillin sodium cap 500 mg	
penicillin v potassium for soln 125 mg/5ml	
penicillin v potassium for soln 250 mg/5ml	
penicillin v potassium tab 250 mg	
penicillin v potassium tab 500 mg	
CEPHALOSPORINS	
cefaclor cap 250 mg	
cefaclor cap 500 mg	
cefadroxil cap 500 mg	
cefadroxil for susp 250 mg/5ml	
cefadroxil for susp 500 mg/5ml	
cefadroxil tab 1 gm	
cefdinir cap 300 mg	
cefdinir for susp 125 mg/5ml	
cefdinir for susp 250 mg/5ml	
cefpodoxime proxetil for susp 100 mg/5ml	
cefpodoxime proxetil for susp 50 mg/5ml	
cefpodoxime proxetil tab 100 mg	
cefpodoxime proxetil tab 200 mg	
cefprozil for susp 125 mg/5ml	
cefprozil for susp 250 mg/5ml	
cefprozil tab 250 mg	
cefprozil tab 500 mg	
cefuroxime axetil for susp 125 mg/5ml (Ceftin)	
cefuroxime axetil tab 250 mg (Ceftin)	
cefuroxime axetil tab 500 mg (Ceftin)	
cephalexin cap 250 mg (Keflex)	
cephalexin cap 500 mg (Keflex)	
cephalexin for susp 125 mg/5ml	
cephalexin for susp 250 mg/5ml	
SUPRAX – cefixime tab 400 mg	
SUPRAX – cefixime for susp 100 mg/5ml	
SUPRAX – cefixime for susp 200 mg/5ml	
SUPRAX – cefixime for susp 500 mg/5ml	

Drug Name	Prior Approval
MACROLIDES	
AZITHROMYCIN – azithromycin powd pack for susp 1 gm	
azithromycin for susp 100 mg/5ml (Zithromax)	
azithromycin for susp 200 mg/5ml (Zithromax)	
azithromycin tab 250 mg (Zithromax)	
azithromycin tab 500 mg (Zithromax)	
azithromycin tab 600 mg (Zithromax)	
clarithromycin for susp 125 mg/5ml	
clarithromycin for susp 250 mg/5ml (Biaxin)	
clarithromycin tab sr 24hr 500 mg (Biaxin xl pac)	
clarithromycin tab 250 mg (Biaxin)	
clarithromycin tab 500 mg (Biaxin)	
E.E.S. 400 – erythromycin ethylsuccinate tab 400 mg	
ERY-TAB – erythromycin tab delayed release 250 mg	
ERY-TAB – erythromycin tab delayed release 333 mg	
ERY-TAB – erythromycin tab delayed release 500 mg	
ERYTHROCIN STEARATE – erythromycin stearate tab 250 mg	
ERYTHROMYCIN BASE – erythromycin tab 250 mg	
ERYTHROMYCIN BASE – erythromycin tab 500 mg	
ERYTHROMYCIN ETHYLSUCCINA – erythromycin ethylsuccinate tab 400 mg	
erythromycin w/ delayed release particles cap 250 mg	
ZITHROMAX – azithromycin powd pack for susp 1 gm	
TETRACYCLINES	
demeclocycline hcl tab 150 mg	
demeclocycline hcl tab 300 mg	
doxycycline hyclate cap 100 mg (Vibramycin)	
doxycycline hyclate cap 50 mg	
doxycycline hyclate tab 100 mg	
doxycycline hyclate tab 20 mg	

Drug Name	Prior Approval
doxycycline monohydrate cap 100 mg (Monodox)	
doxycycline monohydrate cap 150 mg (Adoxa)	
doxycycline monohydrate cap 50 mg	
doxycycline monohydrate cap 75 mg (Monodox)	
doxycycline monohydrate tab 100 mg (Adoxa pak 1/100)	
doxycycline monohydrate tab 150 mg (Adoxa pak 1/150)	
doxycycline monohydrate tab 50 mg (Adoxa)	
doxycycline monohydrate tab 75 mg (Adoxa)	
minocycline hcl cap 100 mg (Minocin)	
minocycline hcl cap 50 mg (Minocin)	
minocycline hcl cap 75 mg (Minocin)	
minocycline hcl tab 100 mg	
minocycline hcl tab 50 mg	
minocycline hcl tab 75 mg	
TETRACYCLINE HCL – tetracycline hcl cap 250 mg	
TETRACYCLINE HCL – tetracycline hcl cap 500 mg	
FLUOROQUINOLONES	
CIPRO – ciprofloxacin for oral susp 250 mg/5ml (5%) (5 gm/100ml)	
CIPRO – ciprofloxacin for oral susp 500 mg/5ml (10%) (10 gm/100ml)	
ciprofloxacin hcl tab 100 mg (base equiv)	
ciprofloxacin hcl tab 250 mg (base equiv) (Cipro)	
ciprofloxacin hcl tab 500 mg (base equiv) (Cipro)	
ciprofloxacin hcl tab 750 mg (base equiv)	
ciprofloxacin-ciprofloxacin hcl tab sr 24hr 1000 mg(base eq) (Cipro xr)	
ciprofloxacin-ciprofloxacin hcl tab sr 24hr 500 mg (base eq) (Cipro xr)	
levofloxacin oral soln 25 mg/ml (Levaquin)	
levofloxacin tab 250 mg (Levaquin)	
levofloxacin tab 500 mg (Levaquin)	
levofloxacin tab 750 mg (Levaquin)	
ofloxacin tab 200 mg	

Drug Name	Prior Approval
ofloxacin tab 300 mg	
ofloxacin tab 400 mg	
AMINOGLYCOSIDES	
neomycin sulfate tab 500 mg	
paromomycin sulfate cap 250 mg	
tobramycin nebu soln 300 mg/5ml (Tobi)	
TUBERCULOSIS	
ethambutol hcl tab 100 mg (Myambutol)	
ethambutol hcl tab 400 mg (Myambutol)	
ISONIAZID – isoniazid syrup 50 mg/5ml	
isoniazid & rifampin cap 150-300 mg	
isoniazid tab 100 mg	
isoniazid tab 300 mg	
PRIFTIN – rifapentine tab 150 mg	
pyrazinamide tab 500 mg	
rifabutin cap 150 mg (Mycobutin)	
RIFAMATE – isoniazid & rifampin cap 150-300 mg	
rifampin cap 150 mg (Rifadin)	
rifampin cap 300 mg (Rifadin)	
FUNGAL INFECTIONS	
fluconazole for susp 10 mg/ml (Diflucan)	
fluconazole for susp 40 mg/ml (Diflucan)	
fluconazole tab 100 mg (Diflucan)	
fluconazole tab 150 mg (Diflucan)	
fluconazole tab 200 mg (Diflucan)	
fluconazole tab 50 mg (Diflucan)	
flucytosine cap 250 mg (Ancobon)	
flucytosine cap 500 mg (Ancobon)	
griseofulvin microsize susp 125 mg/5ml	
griseofulvin microsize tab 500 mg (Grifulvin v)	
itraconazole cap 100 mg (Sporanox)	
LAMISIL – terbinafine hcl oral granules packet 125 mg	
LAMISIL – terbinafine hcl oral granules packet 187.5 mg	

Drug Name	Prior Approval
NOXAFIL – posaconazole susp 40 mg/ml	•
nystatin tab 500000 unit	
terbinafine hcl tab 250 mg (Lamisil)	
voriconazole for susp 40 mg/ml (Vfend)	•
voriconazole tab 200 mg (Vfend)	•
voriconazole tab 50 mg (Vfend)	•
VIRAL INFECTIONS	
Cytomegalovirus	
VALCYTE – valganciclovir hcl tab 450 mg	
VALCYTE – valganciclovir hcl for soln 50 mg/ml (base equiv)	
Hepatitis	
adefovir dipivoxil tab 10 mg (Hepsera)	
BARACLUDE – entecavir tab 0.5 mg	
BARACLUDE – entecavir tab 1 mg	
BARACLUDE – entecavir oral soln 0.05 mg/ml	
EPIVIR HBV – lamivudine oral soln 5 mg/ml	
lamivudine tab 100 mg (Epivir hbv)	
OLYSIO – simeprevir sodium cap 150 mg (base equivalent)	•
PEGASYS – peginterferon alfa-2a inj 180 mcg/ml	
PEGASYS – peginterferon alfa-2a inj 180 mcg/0.5ml	
PEGASYS – peginterferon alfa-2a inj kit 180 mcg/0.5ml	
PEGASYS PROCLICK – peginterferon alfa-2a inj 135 mcg/0.5ml	
PEGASYS PROCLICK – peginterferon alfa-2a inj 180 mcg/0.5ml	
ribavirin cap 200 mg (Rebetol)	
ribavirin tab 200 mg (Copegus)	
SOVALDI – sofosbuvir tab 400 mg	•
Herpes	
acyclovir cap 200 mg (Zovirax)	
acyclovir susp 200 mg/5ml (Zovirax)	
acyclovir tab 400 mg (Zovirax)	
acyclovir tab 800 mg (Zovirax)	

Drug Name	Prior Approval
famciclovir tab 125 mg (Famvir)	
famciclovir tab 250 mg (Famvir)	
famciclovir tab 500 mg (Famvir)	
valacyclovir hcl tab 1 gm (Valtrex)	
valacyclovir hcl tab 500 mg (Valtrex)	
HIV/AIDS	
abacavir sulfate tab 300 mg (base equiv) (Ziagen)	
abacavir sulfate-lamivudine-zidovudine tab 300-150-300 mg (Trizivir)	
APTIVUS – tipranavir cap 250 mg	
APTIVUS – tipranavir oral soln 100 mg/ml	
ATRIPLA – efavirenz-emtricitabine-tenofovir df tab 600-200-300 mg	
COMPLERA – emtricitabine-rilpivirine-tenofovir df tab 200-25-300 mg	
CRIXIVAN – indinavir sulfate cap 200 mg	
CRIXIVAN – indinavir sulfate cap 400 mg	
didanosine delayed release capsule 125 mg (Videx ec)	
didanosine delayed release capsule 200 mg (Videx ec)	
didanosine delayed release capsule 250 mg (Videx ec)	
didanosine delayed release capsule 400 mg (Videx ec)	
EDURANT – rilpivirine hcl tab 25 mg (base equivalent)	
EMTRIVA – emtricitabine caps 200 mg	
EMTRIVA – emtricitabine soln 10 mg/ml	
EPIVIR – lamivudine oral soln 10 mg/ml	
EPZICOM – abacavir sulfate-lamivudine tab 600-300 mg	
FUZEON – enfuvirtide for inj 90 mg	
INTELENCE – etravirine tab 25 mg	
INTELENCE – etravirine tab 100 mg	
INTELENCE – etravirine tab 200 mg	
INVIRASE – saquinavir mesylate cap 200 mg	

Drug Name	Prior Approval
INVIRASE – saquinavir mesylate tab 500 mg	
ISENTRESS – raltegravir potassium tab 400 mg (base equiv)	
ISENTRESS – raltegravir potassium chew tab 25 mg (base equiv)	
ISENTRESS – raltegravir potassium chew tab 100 mg (base equiv)	
KALETRA – lopinavir-ritonavir tab 100-25 mg	
KALETRA – lopinavir-ritonavir tab 200-50 mg	
KALETRA – lopinavir-ritonavir soln 400-100 mg/5ml (80-20 mg/ml)	
lamivudine tab 150 mg (Epivir)	
lamivudine tab 300 mg (Epivir)	
lamivudine-zidovudine tab 150-300 mg (Combivir)	
LEXIVA – fosamprenavir calcium tab 700 mg (base equiv)	
LEXIVA – fosamprenavir calcium susp 50 mg/ml (base equiv)	
nevirapine tab sr 24hr 400 mg (Viramune xr)	
nevirapine tab 200 mg (Viramune)	
NORVIR – ritonavir cap 100 mg	
NORVIR – ritonavir tab 100 mg	
NORVIR – ritonavir oral soln 80 mg/ml	
PREZISTA – darunavir ethanolate tab 75 mg (base equiv)	
PREZISTA – darunavir ethanolate tab 150 mg (base equiv)	
PREZISTA – darunavir ethanolate tab 400 mg (base equiv)	
PREZISTA – darunavir ethanolate tab 600 mg (base equiv)	
PREZISTA – darunavir ethanolate tab 800 mg (base equiv)	
PREZISTA – darunavir ethanolate susp 100 mg/ml (base equiv)	
RESCRIPTOR – delavirdine mesylate tab 100 mg	
RESCRIPTOR – delavirdine mesylate tab 200 mg	

Drug Name	Prior Approval
REYATAZ – atazanavir sulfate cap 100 mg (base equiv)	
REYATAZ – atazanavir sulfate cap 150 mg (base equiv)	
REYATAZ – atazanavir sulfate cap 200 mg (base equiv)	
REYATAZ – atazanavir sulfate cap 300 mg (base equiv)	
SELZENTRY – maraviroc tab 150 mg	
SELZENTRY – maraviroc tab 300 mg	
stavudine cap 15 mg (Zerit)	
stavudine cap 20 mg (Zerit)	
stavudine cap 30 mg (Zerit)	
stavudine cap 40 mg (Zerit)	
stavudine for oral soln 1 mg/ml (Zerit)	
STRIBILD – elvitegrav-cobicis-emtricitab-tenofov tab 150-150-200-300 mg	
SUSTIVA – efavirenz cap 50 mg	
SUSTIVA – efavirenz cap 200 mg	
SUSTIVA – efavirenz tab 600 mg	
TIVICAY – dolutegravir sodium tab 50 mg (base equiv)	
TRUVADA – emtricitabine-tenofovir disoproxil fumarate tab 200-300 mg	
VIDEX – didanosine for soln 2 gm	
VIDEX – didanosine for soln 4 gm	
VIRACEPT – nelfinavir mesylate tab 250 mg	
VIRACEPT – nelfinavir mesylate tab 625 mg	
VIRAMUNE – nevirapine susp 50 mg/5ml	
VIRAMUNE XR – nevirapine tab sr 24hr 100 mg	
VIRAMUNE XR – nevirapine tab sr 24hr 400 mg	
VIREAD – tenofovir disoproxil fumarate tab 150 mg	
VIREAD – tenofovir disoproxil fumarate tab 200 mg	
VIREAD – tenofovir disoproxil fumarate tab 250 mg	
VIREAD – tenofovir disoproxil fumarate tab 300 mg	
VIREAD – tenofovir disoproxil fumarate oral powder 40 mg/gm	
ZIAGEN – abacavir sulfate soln 20 mg/ml (base equiv)	
zidovudine cap 100 mg (Retrovir)	
zidovudine syrup 10 mg/ml (Retrovir)	
zidovudine tab 300 mg	
Influenza	
RELENZA DISKHALER – zanamivir aero powder breath activated 5 mg/blister	
TAMIFLU – oseltamivir phosphate cap 30 mg (base equiv)	
TAMIFLU – oseltamivir phosphate cap 45 mg (base equiv)	
TAMIFLU – oseltamivir phosphate cap 75 mg (base equiv)	
TAMIFLU – oseltamivir phosphate for susp 6 mg/ml (base equiv)	
MALARIA	
atovaquone-proguanil hcl tab 250-100 mg (Malarone)	
ATOVAQUONE/PROGUANIL HCL – atovaquone-proguanil hcl tab 62.5-25 mg	
chloroquine phosphate tab 250 mg	
chloroquine phosphate tab 500 mg (Aralen)	
COARTEM – artemether-lumefantrine tab 20-120 mg	
DARAPRIM – pyrimethamine tab 25 mg	
hydroxychloroquine sulfate tab 200 mg (Plaquenil)	
MALARONE – atovaquone-proguanil hcl tab 62.5-25 mg	
mefloquine hcl tab 250 mg	
PRIMAQUINE PHOSPHATE – primaquine phosphate tab 26.3 mg	
WORM INFECTIONS	
ALBENZA – albendazole tab 200 mg	
BILTRICIDE – praziquantel tab 600 mg	
STROMECTOL – ivermectin tab 3 mg	
SULFONAMIDES	

Drug Name	Prior Approval
sulfamethoxazole-trimethoprim susp 200-40 mg/5ml	
sulfamethoxazole-trimethoprim tab 400-80 mg (Bactrim)	
sulfamethoxazole-trimethoprim tab 800-160 mg (Bactrim ds)	
OTHER ANTI-INFECTIVES	
ALINIA – nitazoxanide tab 500 mg	
ALINIA – nitazoxanide for susp 100 mg/5ml	
clindamycin hcl cap 150 mg (Cleocin)	
clindamycin hcl cap 300 mg (Cleocin)	
clindamycin hcl cap 75 mg (Cleocin)	
clindamycin palmitate hcl for soln 75 mg/5ml (base equiv) (Cleocin pediatric gr)	
DAPSONE – dapsone tab 25 mg	
DAPSONE – dapsone tab 100 mg	
erythromycin-sulfisoxazole for susp 200-600 mg/5ml	
metronidazole tab 250 mg (Flagyl)	
metronidazole tab 500 mg (Flagyl)	
NEBUPENT – pentamidine isethionate for nebulization soln 300 mg	
trimethoprim tab 100 mg	
vancomycin hcl cap 125 mg (Vancocin hcl)	
vancomycin hcl cap 250 mg (Vancocin hcl)	
XIFAXAN – rifaximin tab 550 mg	
ZYVOX – linezolid tab 600 mg	•
ZYVOX – linezolid for susp 100 mg/5ml	•
IMMUNIZING AGENTS	
BCG VACCINE – bcg vaccine inj	
CANCER DRUGS	
ACTIMMUNE – interferon gamma-1b inj 100 mcg/0.5ml (2000000 unit/0.5ml)	•
AFINITOR – everolimus tab 2.5 mg	•
AFINITOR – everolimus tab 5 mg	•
AFINITOR – everolimus tab 7.5 mg	•
AFINITOR – everolimus tab 10 mg	•

Drug Name	Prior Approval
AFINITOR DISPERZ – everolimus tab for oral susp 2 mg	•
AFINITOR DISPERZ – everolimus tab for oral susp 3 mg	•
AFINITOR DISPERZ – everolimus tab for oral susp 5 mg	•
ALKERAN – melphalan tab 2 mg	
anastrozole tab 1 mg (Arimidex)	
bicalutamide tab 50 mg (Casodex)	
BOSULIF – bosutinib tab 100 mg	•
BOSULIF – bosutinib tab 500 mg	•
capecitabine tab 150 mg (Xeloda)	•
capecitabine tab 500 mg (Xeloda)	•
CAPRELSA – vandetanib tab 100 mg	•
CAPRELSA – vandetanib tab 300 mg	•
CEENU – lomustine cap 10 mg	
CEENU – lomustine cap 40 mg	
CEENU – lomustine cap 100 mg	
COMETRIQ – cabozantinib s-malate cap 3 x 20 mg (60 mg dose) kit	•
COMETRIQ – cabozantinib s-mal cap 1 x 80 mg & 1 x 20 mg (100 dose) kit	•
COMETRIQ – cabozantinib s-mal cap 1 x 80 mg & 3 x 20 mg (140 dose) kit	•
CYCLOPHOSPHAMIDE – cyclophosphamide tab 25 mg	
CYCLOPHOSPHAMIDE – cyclophosphamide tab 50 mg	
EMCYT – estramustine phosphate sodium cap 140 mg	
ERIVEDGE – vismodegib cap 150 mg	•
ETOPOSIDE – etoposide cap 50 mg	
exemestane tab 25 mg (Aromasin)	
FARESTON – toremifene citrate tab 60 mg (base equivalent)	
flutamide cap 125 mg	
GILOTRIF – afatinib dimaleate tab 20 mg (base equivalent)	•

Drug Name	Prior Approval
GILOTRIF – afatinib dimaleate tab 30 mg (base equivalent)	•
GILOTRIF – afatinib dimaleate tab 40 mg (base equivalent)	•
GLEEVEC – imatinib mesylate tab 100 mg (base equivalent)	•
GLEEVEC – imatinib mesylate tab 400 mg (base equivalent)	•
HEXALEN – altretamine cap 50 mg	
HYCAMTIN – topotecan hcl cap 0.25 mg (base equiv)	•
HYCAMTIN – topotecan hcl cap 1 mg (base equiv)	•
hydroxyurea cap 500 mg (Hydrea)	
ICLUSIG – ponatinib hcl tab 15 mg (base equiv)	•
ICLUSIG – ponatinib hcl tab 45 mg (base equiv)	•
IMBRUVICA – ibrutinib cap 140 mg	•
INLYTA – axitinib tab 1 mg	•
INLYTA – axitinib tab 5 mg	•
JAKAFI – ruxolitinib phosphate tab 5 mg (base equivalent)	•
JAKAFI – ruxolitinib phosphate tab 10 mg (base equivalent)	•
JAKAFI – ruxolitinib phosphate tab 15 mg (base equivalent)	•
JAKAFI – ruxolitinib phosphate tab 20 mg (base equivalent)	•
JAKAFI – ruxolitinib phosphate tab 25 mg (base equivalent)	•
letrozole tab 2.5 mg (Femara)	
LEUCOVORIN CALCIUM – leucovorin calcium tab 10 mg	
LEUCOVORIN CALCIUM – leucovorin calcium tab 15 mg	
leucovorin calcium tab 25 mg	
leucovorin calcium tab 5 mg	
LEUKERAN – chlorambucil tab 2 mg	
LOMUSTINE – lomustine cap 10 mg	
LOMUSTINE – lomustine cap 40 mg	
LOMUSTINE – lomustine cap 100 mg	
LYSODREN – mitotane tab 500 mg	
MATULANE – procarbazine hcl cap 50 mg	
megestrol acetate susp 40 mg/ml (Megace oral)	
megestrol acetate tab 20 mg	
megestrol acetate tab 40 mg	
MEKINIST – trametinib dimethyl sulfoxide tab 0.5 mg (base equivalent)	•
MEKINIST – trametinib dimethyl sulfoxide tab 2 mg (base equivalent)	•
mercaptopurine tab 50 mg (Purinethol)	
MESNEX – mesna tab 400 mg	
methotrexate sodium tab 2.5 mg (base equiv)	
MYLERAN – busulfan tab 2 mg	
NEXAVAR – sorafenib tosylate tab 200 mg (base equivalent)	•
NILANDRON – nilutamide tab 150 mg	
POMALYST – pomalidomide cap 1 mg	
POMALYST – pomalidomide cap 2 mg	
POMALYST – pomalidomide cap 3 mg	
POMALYST – pomalidomide cap 4 mg	
SOLTAMOX – tamoxifen citrate oral soln 10 mg/5ml (base equivalent)	
SPRYCEL – dasatinib tab 20 mg	•
SPRYCEL – dasatinib tab 50 mg	•
SPRYCEL – dasatinib tab 70 mg	•
SPRYCEL – dasatinib tab 80 mg	•
SPRYCEL – dasatinib tab 100 mg	•
SPRYCEL – dasatinib tab 140 mg	•
STIVARGA – regorafenib tab 40 mg	•
SUTENT – sunitinib malate cap 12.5 mg (base equivalent)	•
SUTENT – sunitinib malate cap 25 mg (base equivalent)	•
SUTENT – sunitinib malate cap 50 mg (base equivalent)	•

Drug Name	Prior Approval
SYLATRON – peginterferon alfa-2b for inj kit 296 mcg	
SYLATRON – peginterferon alfa-2b for inj kit 444 mcg	
SYLATRON – peginterferon alfa-2b for inj kit 888 mcg	
SYLATRON – peginterferon alfa-2b for inj kit 4 x 296 mcg	
SYLATRON – peginterferon alfa-2b for inj kit 4 x 444 mcg	
SYLATRON – peginterferon alfa-2b for inj kit 4 x 888 mcg	
TABLOID – thioguanine tab 40 mg	
TAFINLAR – dabrafenib mesylate cap 50 mg (base equivalent)	•
TAFINLAR – dabrafenib mesylate cap 75 mg (base equivalent)	•
tamoxifen citrate tab 10 mg (base equivalent)	
tamoxifen citrate tab 20 mg (base equivalent)	
TARCEVA – erlotinib tab 25 mg	•
TARCEVA – erlotinib tab 100 mg	•
TARCEVA – erlotinib tab 150 mg	•
TARGRETIN – bexarotene cap 75 mg	
TASIGNA – nilotinib cap 150 mg	•
TASIGNA – nilotinib cap 200 mg	•
temozolomide cap 100 mg (Temodar)	
temozolomide cap 140 mg (Temodar)	
temozolomide cap 180 mg (Temodar)	
temozolomide cap 20 mg (Temodar)	
temozolomide cap 250 mg (Temodar)	
temozolomide cap 5 mg (Temodar)	
tretinoin cap 10 mg	
TYKERB – lapatinib ditosylate tab 250 mg (base equiv)	•
VANDETANIB – vandetanib tab 100 mg	•
VANDETANIB – vandetanib tab 300 mg	•
VOTRIENT – pazopanib hcl tab 200 mg (base equiv)	•
XALKORI – crizotinib cap 200 mg	•
XALKORI – crizotinib cap 250 mg	•
XTANDI – enzalutamide cap 40 mg	•
ZELBORAF – vemurafenib tab 240 mg (base equivalent)	•
ZOLINZA – vorinostat cap 100 mg	•
ZYKADIA – ceritinib cap 150 mg	
ZYTIGA – abiraterone acetate tab 250 mg	•
HORMONES, DIABETES AND RELATED DRUGS	
CORTICOSTEROIDS	
budesonide cap sr 24hr 3 mg (Entocort ec)	
CORTISONE ACETATE – cortisone acetate tab 25 mg	
DEXAMETHASONE – dexamethasone tab 1 mg	
DEXAMETHASONE – dexamethasone tab 2 mg	
DEXAMETHASONE – dexamethasone soln 0.5 mg/5ml	
dexamethasone elixir 0.5 mg/5ml	
DEXAMETHASONE INTENSOL – dexamethasone conc 1 mg/ml	
dexamethasone tab 0.5 mg	
dexamethasone tab 0.75 mg	
dexamethasone tab 1.5 mg	
dexamethasone tab 4 mg	
dexamethasone tab 6 mg	
fludrocortisone acetate tab 0.1 mg	
hydrocortisone tab 10 mg (Cortef)	
hydrocortisone tab 20 mg (Cortef)	
hydrocortisone tab 5 mg (Cortef)	
methylprednisolone tab 16 mg (Medrol)	
methylprednisolone tab 32 mg (Medrol)	
methylprednisolone tab 4 mg (Medrol)	
methylprednisolone tab 4 mg dose pack (Medrol dosepak)	
methylprednisolone tab 8 mg (Medrol)	

Drug Name	Prior Approval
prednisolone sod phosph oral soln 6.7 mg/5ml (5 mg/5ml base) (Pediapred)	
prednisolone sod phosphate oral soln 15 mg/5ml (base equiv)	
prednisolone syrup 15 mg/5ml (usp solution equivalent) (Prelone)	
PREDNISONE – prednisone tab 50 mg	
PREDNISONE – prednisone oral soln 5 mg/5ml	
PREDNISONE – prednisone tab 5 mg dose pack	
PREDNISONE – prednisone tab 10 mg dose pack	
prednisone tab 1 mg	
prednisone tab 10 mg	
prednisone tab 10 mg dose pack	
prednisone tab 2.5 mg	
prednisone tab 20 mg	
prednisone tab 5 mg	
prednisone tab 5 mg dose pack	
MALE HORMONES	
ANDRODERM – testosterone td patch 24hr 2 mg/24hr	
ANDRODERM – testosterone td patch 24hr 4 mg/24hr	
ANDROGEL – testosterone td gel 25 mg/2.5gm (1%)	
ANDROGEL – testosterone td gel 50 mg/5gm (1%)	
ANDROGEL – testosterone td gel 20.25 mg/1.25gm (1.62%)	
ANDROGEL – testosterone td gel 40.5 mg/2.5gm (1.62%)	
ANDROGEL PUMP – testosterone td gel 12.5 mg/act (1%)	
ANDROGEL PUMP – testosterone td gel 20.25 mg/act (1.62%)	
ANDROXY – fluoxymesterone tab 10 mg	
danazol cap 100 mg	
danazol cap 200 mg	
danazol cap 50 mg	

Drug Name	Prior Approval
DEPO-TESTOSTERONE – testosterone cypionate im in oil 100 mg/ml	
DEPO-TESTOSTERONE – testosterone cypionate im in oil 200 mg/ml	
testosterone cypionate im in oil 100 mg/ml (Depo-testosterone)	
testosterone cypionate im in oil 200 mg/ml (Depo-testosterone)	
testosterone enanthate im in oil 200 mg/ml	
ESTROGENS	
CLIMARA PRO – estradiol-levonorgestrel td patch weekly 0.045-0.015 mg/day	
DIVIGEL – estradiol td gel 0.25 mg/0.25gm (0.1%)	
DIVIGEL – estradiol td gel 0.5 mg/0.5gm (0.1%)	
DIVIGEL – estradiol td gel 1 mg/gm (0.1%)	
estradiol & norethindrone acetate tab 0.5-0.1 mg (Activella)	
estradiol & norethindrone acetate tab 1-0.5 mg (Activella)	
estradiol tab 0.5 mg (Estrace)	
estradiol tab 1 mg (Estrace)	
estradiol tab 2 mg (Estrace)	
estradiol td patch weekly 0.025 mg/24hr (Climara)	
estradiol td patch weekly 0.0375 mg/24hr (37.5 mcg/24hr) (Climara)	
estradiol td patch weekly 0.05 mg/24hr (Climara)	
estradiol td patch weekly 0.06 mg/24hr (Climara)	
estradiol td patch weekly 0.075 mg/24hr (Climara)	
estradiol td patch weekly 0.1 mg/24hr (Climara)	
ESTROPIPATE – estropipate tab 3 mg	
estropipate tab 0.75 mg	
estropipate tab 1.5 mg	
PREFEST – estradiol tab 1 mg(15)/estrad-norgestimate tab 1-0.09mg(15)	
PREMARIN – estrogens, conjugated tab 0.3 mg	
PREMARIN – estrogens, conjugated tab 0.45 mg	
PREMARIN – estrogens, conjugated tab 0.625 mg	

Drug Name	Prior Approval
PREMARIN – estrogens, conjugated tab 0.9 mg	
PREMARIN – estrogens, conjugated tab 1.25 mg	
PREMPHASE – conj est 0.625(14)/conj est-medroxypro ac tab 0.625-5mg(14)	
PREMPRO – conjugated estrogen-medroxyprogest acetate tab 0.3-1.5 mg	
PREMPRO – conjugated estrogen-medroxyprogest acetate tab 0.45-1.5 mg	
PREMPRO – conjugated estrogen-medroxyprogest acetate tab 0.625-2.5 mg	
PREMPRO – conjugated estrogen-medroxyprogest acetate tab 0.625-5 mg	
VIVELLE-DOT – estradiol td patch biweekly 0.025 mg/24hr	
VIVELLE-DOT – estradiol td patch biweekly 0.0375 mg/24hr	
VIVELLE-DOT – estradiol td patch biweekly 0.05 mg/24hr	
VIVELLE-DOT – estradiol td patch biweekly 0.075 mg/24hr	
VIVELLE-DOT – estradiol td patch biweekly 0.1 mg/24hr	
PROGESTINS	
medroxyprogesterone acetate tab 10 mg (Provera)	
medroxyprogesterone acetate tab 2.5 mg (Provera)	
medroxyprogesterone acetate tab 5 mg (Provera)	
norethindrone acetate tab 5 mg (Aygestin)	
progesterone micronized cap 100 mg (Prometrium)	
progesterone micronized cap 200 mg (Prometrium)	
BIRTH CONTROL Most generic oral contraceptives are formulary products; exceptions are noted. Selected brands that are not available generically are also on the formulary and appear as: TRADE NAME followed by the generic name, e.g., OGESTREL – norgestrel/ethinyl estradiol.	

Drug Name	Prior Approval
DEPO-PROVERA CONTRACEPTIV – medroxyprogesterone acetate im susp 150 mg/ml	
desogest-eth estrad & eth estrad tab 0.15-0.02/0.01 mg(21/5) (Mircette)	
desogest-ethin est tab 0.1-0.025/0.125-0.025/0.15-0.025mg-mg (Cyclessa)	
desogestrel & ethinyl estradiol tab 0.15 mg-30 mcg (Desogen)	
drospirenone-ethinyl estradiol tab 3-0.02 mg (Yaz)	
drospirenone-ethinyl estradiol tab 3-0.03 mg (Yasmin 28)	
ELLA – ulipristal acetate tab 30 mg	
ethynodiol diacetate & ethinyl estradiol tab 1 mg-35 mcg	
levonorg-eth est tab 0.1-0.02mg(84) & eth est tab 0.01mg(7) (Loseasonique)	
levonorgestrel & ethinyl estradiol (91-day) tab 0.15-0.03 mg	
levonorgestrel & ethinyl estradiol tab 0.1 mg-20 mcg	
levonorgestrel & ethinyl estradiol tab 0.15 mg-30 mcg	
levonorgestrel tab 0.75 mg (Plan b)	
levonorgestrel tab 1.5 mg (Plan b one-step)	
levonorgestrel-eth estra tab 0.05-30/0.075-40/0.125-30mg-mcg	
medroxyprogesterone acetate im susp 150 mg/ml (Depo-provera contrac)	
MIRENA – levonorgestrel releasing iud 20 mcg/24hr (52 mg total)	
NECON 1/50-28 – norethindrone & mestranol tab 1 mg-50 mcg	
NECON 10/11-28 – norethindrone-eth estradiol tab 0.5-35/1-35 mg-mcg (10/11)	
norelgestromin-ethinyl estradiol td ptwk 150-35 mcg/24hr (Ortho evra)	
norethindrone & ethinyl estradiol tab 0.4 mg-35 mcg (Ovcon-35)	

Drug Name	Prior Approval
norethindrone & ethinyl estradiol tab 0.5 mg-35 mcg (Brevicon-28)	
norethindrone & ethinyl estradiol tab 1 mg-35 mcg (Norinyl 1+35)	
norethindrone ac-ethinyl estrad-fe tab 1-20/1-30/1-35 mg-mcg (Estrostep fe)	
norethindrone ace & ethinyl estradiol tab 1 mg-20 mcg (Loestrin 1/20-21)	
norethindrone ace & ethinyl estradiol tab 1.5 mg-30 mcg (Loestrin 1.5/30-21)	
norethindrone ace & ethinyl estradiol-fe tab 1 mg-20 mcg (Loestrin fe 1/20)	
norethindrone ace & ethinyl estradiol-fe tab 1.5 mg-30 mcg (Loestrin fe 1.5/30)	
norethindrone tab 0.35 mg (Nor-qd)	
norethindrone-eth estradiol tab 0.5-35/0.75-35/1-35 mg-mcg (Ortho-novum 7/7/7)	
norethindrone-eth estradiol tab 0.5-35/1-35/0.5-35 mg-mcg (Tri-norinyl 28)	
norgestimate & ethinyl estradiol tab 0.25 mg-35 mcg (Ortho-cyclen)	
norgestimate-eth estrad tab 0.18-35/0.215-35/0.25-35 mg-mcg (Ortho tri-cyclen)	
norgestrel & ethinyl estradiol tab 0.3 mg-30 mcg	
NUVARING – etonogestrel-ethinyl estradiol va ring 0.120-0.015 mg/24hr	
OGESTREL – norgestrel & ethinyl estradiol tab 0.5 mg-50 mcg	
ORTHO EVRA – norelgestromin-ethinyl estradiol td ptwk 150-35 mcg/24hr	
ORTHO TRI-CYCLEN LO – norgestimate-eth estrad tab 0.18-25/0.215-25/0.25-25 mg-mcg	
SKYLA – levonorgestrel releasing iud 13.5 mg	
ZOVIA 1/50E – ethynodiol diacetate & ethinyl estradiol tab 1 mg-50 mcg	
INFERTILITY	
BRAVELLE – urofollitropin purified for inj 75 unit	
CETROTIDE – cetrorelix acetate for inj kit 0.25 mg	

Drug Name	Prior Approval
CETROTIDE – cetrorelix acetate for inj kit 3 mg	
chorionic gonadotropin for inj 10000 unit	
clomiphene citrate tab 50 mg (Clomid)	
FOLLISTIM AQ – follitropin beta inj 75 unit/0.5ml	
FOLLISTIM AQ – follitropin beta inj 150 unit/0.5ml	
FOLLISTIM AQ – follitropin beta inj 300 unit/0.36ml	
FOLLISTIM AQ – follitropin beta inj 600 unit/0.72ml	
FOLLISTIM AQ – follitropin beta inj 900 unit/1.08ml	
GANIRELIX ACETATE – ganirelix acetate inj 250 mcg/0.5ml	
GONAL-F – follitropin alfa for inj 450 unit	
GONAL-F – follitropin alfa for inj 1050 unit	
GONAL-F RFF – follitropin alfa for inj 75 unit	
GONAL-F RFF PEN – follitropin alfa inj 300 unit/0.5ml	
GONAL-F RFF PEN – follitropin alfa inj 450 unit/0.75ml	
GONAL-F RFF PEN – follitropin alfa inj 900 unit/1.5ml	
GONAL-F RFF REDIJECT – follitropin alfa inj 300 unit/0.5ml	
GONAL-F RFF REDIJECT – follitropin alfa inj 450 unit/0.75ml	
GONAL-F RFF REDIJECT – follitropin alfa inj 900 unit/1.5ml	
LUVERIS – lutropin alfa for subcutaneous inj 75 unit	
MENOPUR – menotropins for subcutaneous inj 75 unit	
OVIDREL – choriogonadotropin alfa inj 250 mcg/0.5ml	
REPRONEX – menotropins for inj 75 unit	
DIABETES	
acarbose tab 100 mg (Precose)	
acarbose tab 25 mg (Precose)	
acarbose tab 50 mg (Precose)	
BYDUREON – exenatide extended release for inj susp 2 mg	

Drug Name	Prior Approval
BYETTA – exenatide soln pen-injector 5 mcg/0.02ml	
BYETTA – exenatide soln pen-injector 10 mcg/0.04ml	
glimepiride tab 1 mg (Amaryl)	
glimepiride tab 2 mg (Amaryl)	
glimepiride tab 4 mg (Amaryl)	
glipizide tab sr 24hr 10 mg (Glucotrol xl)	
glipizide tab sr 24hr 2.5 mg (Glucotrol xl)	
glipizide tab sr 24hr 5 mg (Glucotrol xl)	
glipizide tab 10 mg (Glucotrol)	
glipizide tab 5 mg (Glucotrol)	
glipizide-metformin hcl tab 2.5-250 mg	
glipizide-metformin hcl tab 2.5-500 mg	
glipizide-metformin hcl tab 5-500 mg	
GLUCAGON EMERGENCY KIT – glucagon (rdna) for inj kit 1 mg	
GLYBURIDE – glyburide tab 1.25 mg	
GLYBURIDE – glyburide tab 2.5 mg	
GLYBURIDE – glyburide tab 5 mg	
glyburide micronized tab 1.5 mg (Glynase)	
glyburide micronized tab 3 mg (Glynase)	
glyburide micronized tab 6 mg (Glynase)	
glyburide tab 1.25 mg	
glyburide tab 2.5 mg	
glyburide tab 5 mg	
glyburide-metformin tab 1.25-250 mg (Glucovance)	
glyburide-metformin tab 2.5-500 mg (Glucovance)	
glyburide-metformin tab 5-500 mg (Glucovance)	
JANUMET – sitagliptin-metformin hcl tab 50-500 mg	
JANUMET – sitagliptin-metformin hcl tab 50-1000 mg	
JANUMET XR – sitagliptin-metformin hcl tab sr 24hr 50-500 mg	
JANUMET XR – sitagliptin-metformin hcl tab sr 24hr 50-1000 mg	
JANUMET XR – sitagliptin-metformin hcl tab sr 24hr 100-1000 mg	
JANUVIA – sitagliptin phosphate tab 25 mg (base equiv)	
JANUVIA – sitagliptin phosphate tab 50 mg (base equiv)	
JANUVIA – sitagliptin phosphate tab 100 mg (base equiv)	
JUVISYNC – sitagliptin-simvastatin tab 50-10 mg	
JUVISYNC – sitagliptin-simvastatin tab 50-20 mg	
JUVISYNC – sitagliptin-simvastatin tab 50-40 mg	
JUVISYNC – sitagliptin-simvastatin tab 100-10 mg	
JUVISYNC – sitagliptin-simvastatin tab 100-20 mg	
JUVISYNC – sitagliptin-simvastatin tab 100-40 mg	
KOMBIGLYZE XR – saxagliptin-metformin hcl tab sr 24hr 2.5-1000 mg	
KOMBIGLYZE XR – saxagliptin-metformin hcl tab sr 24hr 5-500 mg	
KOMBIGLYZE XR – saxagliptin-metformin hcl tab sr 24hr 5-1000 mg	
metformin hcl tab sr 24hr 500 mg (Glucophage xr)	
metformin hcl tab sr 24hr 750 mg (Glucophage xr)	
metformin hcl tab 1000 mg (Glucophage)	
metformin hcl tab 500 mg (Glucophage)	
metformin hcl tab 850 mg (Glucophage)	
nateglinide tab 120 mg (Starlix)	
nateglinide tab 60 mg (Starlix)	
ONGLYZA – saxagliptin hcl tab 2.5 mg (base equiv)	
ONGLYZA – saxagliptin hcl tab 5 mg (base equiv)	
pioglitazone hcl tab 15 mg (base equiv) (Actos)	
pioglitazone hcl tab 30 mg (base equiv) (Actos)	
pioglitazone hcl tab 45 mg (base equiv) (Actos)	
pioglitazone hcl-metformin hcl tab 15-500 mg (Actoplus met)	
pioglitazone hcl-metformin hcl tab 15-850 mg (Actoplus met)	

Drug Name	Prior Approval
SYMLINPEN 120 – pramlintide acetate pen-inj 2700 mcg/2.7ml (1000 mcg/ml)	
SYMLINPEN 60 – pramlintide acetate pen-inj 1500 mcg/1.5ml (1000 mcg/ml)	
VICTOZA – liraglutide soln pen-injector 18 mg/3ml (6 mg/ml)	
DIABETES - INSULINS	
Rapid-Acting Insulins	
HUMALOG – insulin lispro (human) soln cartridge 100 unit/ml	
HUMALOG – insulin lispro (human) inj 100 unit/ml	
HUMALOG KWIKPEN – insulin lispro (human) soln pen-injector 100 unit/ml	
NOVOLOG – insulin aspart inj 100 unit/ml	
NOVOLOG FLEXPEN – insulin aspart soln pen-injector 100 unit/ml	
NOVOLOG PENFILL – insulin aspart soln cartridge 100 unit/ml	
Short-Acting Insulins	
HUMULIN R – insulin regular (human) inj 100 unit/ml	
HUMULIN R U-500 (CONCENTR – insulin regular (human) inj 500 unit/ml	
NOVOLIN R – insulin regular (human) inj 100 unit/ml	
NOVOLIN R RELION – insulin regular (human) inj 100 unit/ml	
Intermediate-Acting Insulins	
HUMALOG MIX 50/50 – insulin lispro prot & lispro (human) inj 100 unit/ml (50-50)	
HUMALOG MIX 50/50 KWIKPEN – insulin lispro prot & lispro sus pen-inj 100 unit/ml (50-50)	
HUMALOG MIX 75/25 – insulin lispro prot & lispro (human) inj 100 unit/ml (75-25)	
HUMALOG MIX 75/25 KWIKPEN – insulin lispro prot & lispro sus pen-inj 100 unit/ml (75-25)	
HUMULIN N – insulin isophane (human) inj 100 unit/ml	
HUMULIN N KWIKPEN – insulin isophane (human) susp pen-injector 100 unit/ml	
HUMULIN N U-100 PEN – insulin isophane (human) susp pen-injector 100 unit/ml	
HUMULIN 70/30 – insulin isophane & regular (human) inj 100 unit/ml (70-30)	
HUMULIN 70/30 KWIKPEN – insulin isophane & regular susp pen-inj 100 unit/ml (70-30)	
HUMULIN 70/30 PEN – insulin isophane & regular susp pen-inj 100 unit/ml (70-30)	
NOVOLIN N – insulin isophane (human) inj 100 unit/ml	
NOVOLIN N RELION – insulin isophane (human) inj 100 unit/ml	
NOVOLIN 70/30 – insulin isophane & regular (human) inj 100 unit/ml (70-30)	
NOVOLIN 70/30 RELION – insulin isophane & regular (human) inj 100 unit/ml (70-30)	
NOVOLOG MIX 70/30 – insulin aspart prot & aspart (human) inj 100 unit/ml (70-30)	
NOVOLOG MIX 70/30 PREFILL – insulin aspart prot & aspart sus pen-inj 100 unit/ml (70-30)	
Basal Insulins	
LANTUS – insulin glargine inj 100 unit/ml	
LANTUS SOLOSTAR – insulin glargine soln pen-injector 100 unit/ml	
LEVEMIR – insulin detemir inj 100 unit/ml	
LEVEMIR FLEXPEN – insulin detemir soln pen-injector 100 unit/ml	
LEVEMIR FLEXTOUCH – insulin detemir soln pen-injector 100 unit/ml	
THYROID REGULATION	
levothyroxine sodium tab 100 mcg (Synthroid)	
levothyroxine sodium tab 112 mcg (Synthroid)	
levothyroxine sodium tab 125 mcg (Synthroid)	
levothyroxine sodium tab 137 mcg (Synthroid)	
levothyroxine sodium tab 150 mcg (Synthroid)	
levothyroxine sodium tab 175 mcg (Synthroid)	
levothyroxine sodium tab 200 mcg (Synthroid)	
levothyroxine sodium tab 25 mcg (Synthroid)	

Drug Name	Prior Approval
levothyroxine sodium tab 300 mcg (Synthroid)	
levothyroxine sodium tab 50 mcg (Synthroid)	
levothyroxine sodium tab 75 mcg (Synthroid)	
levothyroxine sodium tab 88 mcg (Synthroid)	
liothyronine sodium tab 25 mcg (Cytomel)	
liothyronine sodium tab 5 mcg (Cytomel)	
liothyronine sodium tab 50 mcg (Cytomel)	
methimazole tab 10 mg (Tapazole)	
methimazole tab 5 mg (Tapazole)	
propylthiouracil tab 50 mg	
GROWTH HORMONE	
INCRELEX – mecasermin inj 40 mg/4ml (10 mg/ml)	•
OMNITROPE – somatropin inj 5 mg/1.5ml	•
OMNITROPE – somatropin inj 10 mg/1.5ml	•
OMNITROPE – somatropin for inj 5.8 mg	•
OTHER HORMONES AND RELATED DRUGS	
ALENDRONATE SODIUM – alendronate sodium tab 40 mg	
alendronate sodium tab 10 mg	
alendronate sodium tab 35 mg	
alendronate sodium tab 5 mg	
alendronate sodium tab 70 mg (Fosamax)	
cabergoline tab 0.5 mg	
calcitriol cap 0.25 mcg (Rocaltrol)	
calcitriol cap 0.5 mcg (Rocaltrol)	
calcitriol oral soln 1 mcg/ml (Rocaltrol)	
desmopressin acetate inj 4 mcg/ml (Ddavp)	
desmopressin acetate nasal soln 0.01% (refrigerated) (Ddavp)	
desmopressin acetate nasal spray soln 0.01% (Ddavp)	
desmopressin acetate nasal spray soln 0.01% (refrigerated)	
desmopressin acetate tab 0.1 mg (Ddavp)	
desmopressin acetate tab 0.2 mg (Ddavp)	

Drug Name	Prior Approval
ETIDRONATE DISODIUM – etidronate disodium tab 200 mg	
ETIDRONATE DISODIUM – etidronate disodium tab 400 mg	
FORTEO – teriparatide (recombinant) inj 600 mcg/2.4ml	•
ibandronate sodium tab 150 mg (base equivalent) (Boniva)	
KUVAN – sapropterin dihydrochloride soluble tab 100 mg	•
levocarnitine oral soln 1 gm/10ml (10%) (Carnitor)	
levocarnitine tab 330 mg (Carnitor)	
LUPANETA PACK – LEUPROLIDE (1 MON) INJ 3.75 MG & NORETHINDRONE TAB 5 MG KIT	
LUPANETA PACK – LEUPROLIDE (3 MON) INJ 11.25 MG & NORETHINDRONE TAB 5 MG KIT	
methylergonovine maleate tab 0.2 mg	
octreotide acetate inj 100 mcg/ml (0.1 mg/ml) (Sandostatin)	
octreotide acetate inj 1000 mcg/ml (1 mg/ml) (Sandostatin)	
octreotide acetate inj 200 mcg/ml (0.2 mg/ml) (Sandostatin)	
octreotide acetate inj 50 mcg/ml (0.05 mg/ml) (Sandostatin)	
octreotide acetate inj 500 mcg/ml (0.5 mg/ml) (Sandostatin)	
paricalcitol cap 1 mcg (Zemplar)	
paricalcitol cap 2 mcg (Zemplar)	
paricalcitol cap 4 mcg (Zemplar)	
raloxifene hcl tab 60 mg (Evista)	
SANDOSTATIN – octreotide acetate inj 50 mcg/ml (0.05 mg/ml)	
SANDOSTATIN – octreotide acetate inj 100 mcg/ml (0.1 mg/ml)	
SANDOSTATIN – octreotide acetate inj 200 mcg/ml (0.2 mg/ml)	
SANDOSTATIN – octreotide acetate inj 500 mcg/ml (0.5 mg/ml)	

Drug Name	Prior Approval
SANDOSTATIN – octreotide acetate inj 1000 mcg/ml (1 mg/ml)	
SANDOSTATIN LAR DEPOT – octreotide acetate for im inj kit 10 mg	
SANDOSTATIN LAR DEPOT – octreotide acetate for im inj kit 20 mg	
SANDOSTATIN LAR DEPOT – octreotide acetate for im inj kit 30 mg	
SENSIPAR – cinacalcet hcl tab 30 mg (base equiv)	•
SENSIPAR – cinacalcet hcl tab 60 mg (base equiv)	•
SENSIPAR – cinacalcet hcl tab 90 mg (base equiv)	•
STIMATE – desmopressin acetate nasal soln 1.5 mg/ml	
SYNAREL – NAFARELIN ACETATE NASAL SOLN 2 MG/ML	
HEART AND CIRCULATORY DRUGS	
ANGIOTENSIN CONVERTING ENZYME (ACE) INHIBITORS AND COMBINATIONS	
benazepril & hydrochlorothiazide tab 10-12.5 mg (Lotensin hct)	
benazepril & hydrochlorothiazide tab 20-12.5 mg (Lotensin hct)	
benazepril & hydrochlorothiazide tab 20-25 mg (Lotensin hct)	
benazepril & hydrochlorothiazide tab 5-6.25 mg	
benazepril hcl tab 10 mg (Lotensin)	
benazepril hcl tab 20 mg (Lotensin)	
benazepril hcl tab 40 mg (Lotensin)	
benazepril hcl tab 5 mg	
captopril tab 100 mg	
captopril tab 12.5 mg	
captopril tab 25 mg	
captopril tab 50 mg	
CAPTOPRIL/HYDROCHLOROTHIA – captopril & hydrochlorothiazide tab 25-15 mg	
CAPTOPRIL/HYDROCHLOROTHIA – captopril & hydrochlorothiazide tab 25-25 mg	
CAPTOPRIL/HYDROCHLOROTHIA – captopril & hydrochlorothiazide tab 50-15 mg	
CAPTOPRIL/HYDROCHLOROTHIA – captopril & hydrochlorothiazide tab 50-25 mg	
enalapril maleate & hydrochlorothiazide tab 10-25 mg (Vaseretic)	
enalapril maleate & hydrochlorothiazide tab 5-12.5 mg	
enalapril maleate tab 10 mg (Vasotec)	
enalapril maleate tab 2.5 mg (Vasotec)	
enalapril maleate tab 20 mg (Vasotec)	
enalapril maleate tab 5 mg (Vasotec)	
fosinopril sodium & hydrochlorothiazide tab 10-12.5 mg	
fosinopril sodium & hydrochlorothiazide tab 20-12.5 mg	
fosinopril sodium tab 10 mg	
fosinopril sodium tab 20 mg	
fosinopril sodium tab 40 mg	
lisinopril & hydrochlorothiazide tab 10-12.5 mg (Zestoretic)	
lisinopril & hydrochlorothiazide tab 20-12.5 mg (Zestoretic)	
lisinopril & hydrochlorothiazide tab 20-25 mg (Zestoretic)	
lisinopril tab 10 mg (Prinivil)	
lisinopril tab 2.5 mg (Zestril)	
lisinopril tab 20 mg (Prinivil)	
lisinopril tab 30 mg (Zestril)	
lisinopril tab 40 mg (Zestril)	
lisinopril tab 5 mg (Prinivil)	
moexipril hcl tab 15 mg (Univasc)	
moexipril hcl tab 7.5 mg (Univasc)	
moexipril-hydrochlorothiazide tab 15-12.5 mg (Uniretic)	
moexipril-hydrochlorothiazide tab 15-25 mg	
moexipril-hydrochlorothiazide tab 7.5-12.5 mg	

Drug Name	Prior Approval
perindopril erbumine tab 2 mg	
perindopril erbumine tab 4 mg (Aceon)	
perindopril erbumine tab 8 mg (Aceon)	
quinapril hcl tab 10 mg (Accupril)	
quinapril hcl tab 20 mg (Accupril)	
quinapril hcl tab 40 mg (Accupril)	
quinapril hcl tab 5 mg (Accupril)	
quinapril-hydrochlorothiazide tab 10-12.5 mg (Accuretic)	
quinapril-hydrochlorothiazide tab 20-12.5 mg (Accuretic)	
quinapril-hydrochlorothiazide tab 20-25 mg (Accuretic)	
ramipril cap 1.25 mg (Altace)	
ramipril cap 10 mg (Altace)	
ramipril cap 2.5 mg (Altace)	
ramipril cap 5 mg (Altace)	
trandolapril tab 1 mg (Mavik)	
trandolapril tab 2 mg (Mavik)	
trandolapril tab 4 mg (Mavik)	
ANGIOTENSIN II RECEPTOR ANTAGONISTS (ARBS) AND COMBINATIONS	
candesartan cilexetil tab 16 mg (Atacand)	
candesartan cilexetil tab 32 mg (Atacand)	
candesartan cilexetil tab 4 mg (Atacand)	
candesartan cilexetil tab 8 mg (Atacand)	
candesartan cilexetil-hydrochlorothiazide tab 16-12.5 mg (Atacand hct)	
candesartan cilexetil-hydrochlorothiazide tab 32-12.5 mg (Atacand hct)	
candesartan cilexetil-hydrochlorothiazide tab 32-25 mg (Atacand hct)	
DIOVAN – valsartan tab 40 mg	
DIOVAN – valsartan tab 80 mg	
DIOVAN – valsartan tab 160 mg	
DIOVAN – valsartan tab 320 mg	
EXFORGE HCT – amlodipine-valsartan-hydrochlorothiazide tab 5-160-12.5 mg	
EXFORGE HCT – amlodipine-valsartan-hydrochlorothiazide tab 5-160-25 mg	
EXFORGE HCT – amlodipine-valsartan-hydrochlorothiazide tab 10-160-12.5 mg	
EXFORGE HCT – amlodipine-valsartan-hydrochlorothiazide tab 10-160-25 mg	
EXFORGE HCT – amlodipine-valsartan-hydrochlorothiazide tab 10-320-25 mg	
irbesartan tab 150 mg (Avapro)	
irbesartan tab 300 mg (Avapro)	
irbesartan tab 75 mg (Avapro)	
irbesartan-hydrochlorothiazide tab 150-12.5 mg (Avalide)	
irbesartan-hydrochlorothiazide tab 300-12.5 mg (Avalide)	
losartan potassium & hydrochlorothiazide tab 100-12.5 mg (Hyzaar)	
losartan potassium & hydrochlorothiazide tab 100-25 mg (Hyzaar)	
losartan potassium & hydrochlorothiazide tab 50-12.5 mg (Hyzaar)	
losartan potassium tab 100 mg (Cozaar)	
losartan potassium tab 25 mg (Cozaar)	
losartan potassium tab 50 mg (Cozaar)	
valsartan-hydrochlorothiazide tab 160-12.5 mg (Diovan hct)	
valsartan-hydrochlorothiazide tab 160-25 mg (Diovan hct)	
valsartan-hydrochlorothiazide tab 320-12.5 mg (Diovan hct)	
valsartan-hydrochlorothiazide tab 320-25 mg (Diovan hct)	
valsartan-hydrochlorothiazide tab 80-12.5 mg (Diovan hct)	
BETA BLOCKERS AND COMBINATIONS	
acebutolol hcl cap 200 mg (Sectral)	
acebutolol hcl cap 400 mg (Sectral)	

Drug Name	Prior Approval
atenolol & chlorthalidone tab 100-25 mg (Tenoretic 100)	
atenolol & chlorthalidone tab 50-25 mg (Tenoretic 50)	
atenolol tab 100 mg (Tenormin)	
atenolol tab 25 mg (Tenormin)	
atenolol tab 50 mg (Tenormin)	
bisoprolol & hydrochlorothiazide tab 10-6.25 mg (Ziac)	
bisoprolol & hydrochlorothiazide tab 2.5-6.25 mg (Ziac)	
bisoprolol & hydrochlorothiazide tab 5-6.25 mg (Ziac)	
bisoprolol fumarate tab 10 mg (Zebeta)	
bisoprolol fumarate tab 5 mg (Zebeta)	
carvedilol tab 12.5 mg (Coreg)	
carvedilol tab 25 mg (Coreg)	
carvedilol tab 3.125 mg (Coreg)	
carvedilol tab 6.25 mg (Coreg)	
DUTOPROL – metoprolol & hydrochlorothiazide tab sr 24hr 25-12.5 mg	
DUTOPROL – metoprolol & hydrochlorothiazide tab sr 24hr 50-12.5 mg	
DUTOPROL – metoprolol & hydrochlorothiazide tab sr 24hr 100-12.5 mg	
labetalol hcl tab 100 mg (Trandate)	
labetalol hcl tab 200 mg (Trandate)	
labetalol hcl tab 300 mg (Trandate)	
metoprolol & hydrochlorothiazide tab 100-25 mg (Lopressor hct)	
metoprolol & hydrochlorothiazide tab 100-50 mg	
metoprolol & hydrochlorothiazide tab 50-25 mg (Lopressor hct)	
metoprolol succinate tab sr 24hr 100 mg (Toprol xl)	
metoprolol succinate tab sr 24hr 200 mg (Toprol xl)	
metoprolol succinate tab sr 24hr 25 mg (Toprol xl)	
metoprolol succinate tab sr 24hr 50 mg (Toprol xl)	
metoprolol tartrate tab 100 mg (Lopressor)	
metoprolol tartrate tab 25 mg	
metoprolol tartrate tab 50 mg (Lopressor)	
nadolol & bendroflumethiazide tab 40-5 mg (Corzide)	
nadolol & bendroflumethiazide tab 80-5 mg (Corzide)	
nadolol tab 20 mg (Corgard)	
nadolol tab 40 mg (Corgard)	
nadolol tab 80 mg (Corgard)	
pindolol tab 10 mg	
pindolol tab 5 mg	
PROPRANOLOL HCL – propranolol hcl oral soln 20 mg/5ml	
PROPRANOLOL HCL – propranolol hcl oral soln 40 mg/5ml	
propranolol hcl cap sr 24hr 120 mg (Inderal la)	
propranolol hcl cap sr 24hr 160 mg (Inderal la)	
propranolol hcl cap sr 24hr 60 mg (Inderal la)	
propranolol hcl cap sr 24hr 80 mg (Inderal la)	
propranolol hcl tab 10 mg	
propranolol hcl tab 20 mg	
propranolol hcl tab 40 mg	
propranolol hcl tab 60 mg	
propranolol hcl tab 80 mg	
PROPRANOLOL/HYDROCHLOROTH – propranolol & hydrochlorothiazide tab 40-25 mg	
PROPRANOLOL/HYDROCHLOROTH – propranolol & hydrochlorothiazide tab 80-25 mg	
TIMOLOL MALEATE – timolol maleate tab 5 mg	
TIMOLOL MALEATE – timolol maleate tab 10 mg	
TIMOLOL MALEATE – timolol maleate tab 20 mg	
CALCIUM CHANNEL BLOCKERS AND COMBINATIONS	
amlodipine besylate tab 10 mg (Norvasc)	
amlodipine besylate tab 2.5 mg (Norvasc)	

Drug Name	Prior Approval
amlodipine besylate tab 5 mg (Norvasc)	
amlodipine besylate-atorvastatin calcium tab 10-10 mg (Caduet)	
amlodipine besylate-atorvastatin calcium tab 10-20 mg (Caduet)	
amlodipine besylate-atorvastatin calcium tab 10-40 mg (Caduet)	
amlodipine besylate-atorvastatin calcium tab 10-80 mg (Caduet)	
amlodipine besylate-atorvastatin calcium tab 2.5-10 mg (Caduet)	
amlodipine besylate-atorvastatin calcium tab 2.5-20 mg (Caduet)	
amlodipine besylate-atorvastatin calcium tab 2.5-40 mg (Caduet)	
amlodipine besylate-atorvastatin calcium tab 5-10 mg (Caduet)	
amlodipine besylate-atorvastatin calcium tab 5-20 mg (Caduet)	
amlodipine besylate-atorvastatin calcium tab 5-40 mg (Caduet)	
amlodipine besylate-atorvastatin calcium tab 5-80 mg (Caduet)	
amlodipine besylate-benazepril hcl cap 10-20 mg (Lotrel)	
amlodipine besylate-benazepril hcl cap 10-40 mg (Lotrel)	
amlodipine besylate-benazepril hcl cap 2.5-10 mg (Lotrel)	
amlodipine besylate-benazepril hcl cap 5-10 mg (Lotrel)	
amlodipine besylate-benazepril hcl cap 5-20 mg (Lotrel)	
amlodipine besylate-benazepril hcl cap 5-40 mg (Lotrel)	
diltiazem hcl cap sr 24hr 120 mg	
diltiazem hcl cap sr 24hr 180 mg	
diltiazem hcl cap sr 24hr 240 mg	
diltiazem hcl coated beads cap sr 24hr 120 mg (Cardizem cd)	
diltiazem hcl coated beads cap sr 24hr 180 mg (Cardizem cd)	
diltiazem hcl coated beads cap sr 24hr 240 mg (Cardizem cd)	
diltiazem hcl coated beads cap sr 24hr 300 mg (Cardizem cd)	
diltiazem hcl coated beads cap sr 24hr 360 mg (Cardizem cd)	
diltiazem hcl extended release beads cap sr 24hr 120 mg (Tiazac)	
diltiazem hcl extended release beads cap sr 24hr 180 mg (Tiazac)	
diltiazem hcl extended release beads cap sr 24hr 240 mg (Tiazac)	
diltiazem hcl extended release beads cap sr 24hr 300 mg (Tiazac)	
diltiazem hcl extended release beads cap sr 24hr 360 mg (Tiazac)	
diltiazem hcl extended release beads cap sr 24hr 420 mg (Tiazac)	
diltiazem hcl tab 120 mg (Cardizem)	
diltiazem hcl tab 30 mg (Cardizem)	
diltiazem hcl tab 60 mg (Cardizem)	
diltiazem hcl tab 90 mg	
EXFORGE – amlodipine besylate-valsartan tab 5-160 mg	
EXFORGE – amlodipine besylate-valsartan tab 5-320 mg	
EXFORGE – amlodipine besylate-valsartan tab 10-160 mg	
EXFORGE – amlodipine besylate-valsartan tab 10-320 mg	
felodipine tab sr 24hr 10 mg	
felodipine tab sr 24hr 2.5 mg	
felodipine tab sr 24hr 5 mg	
nifedipine tab sr 24hr osmotic 30 mg (Procardia xl)	
nifedipine tab sr 24hr osmotic 60 mg (Procardia xl)	

Drug Name	Prior Approval
nifedipine tab sr 24hr osmotic 90 mg (Procardia xl)	
nifedipine tab sr 24hr 30 mg (Adalat cc)	
nifedipine tab sr 24hr 60 mg (Adalat cc)	
nifedipine tab sr 24hr 90 mg (Adalat cc)	
VERAPAMIL HCL – verapamil hcl tab 40 mg	
verapamil hcl cap sr 24hr 100 mg (Verelan pm)	
verapamil hcl cap sr 24hr 120 mg (Verelan)	
verapamil hcl cap sr 24hr 180 mg (Verelan)	
verapamil hcl cap sr 24hr 200 mg (Verelan pm)	
verapamil hcl cap sr 24hr 240 mg (Verelan)	
verapamil hcl cap sr 24hr 300 mg (Verelan pm)	
verapamil hcl cap sr 24hr 360 mg (Verelan)	
verapamil hcl tab cr 120 mg (Calan sr)	
verapamil hcl tab cr 180 mg (Calan sr)	
verapamil hcl tab cr 240 mg (Calan sr)	
verapamil hcl tab 120 mg (Calan)	
verapamil hcl tab 80 mg (Calan)	
CHEST PAIN (ANGINA)	
ISOSORBIDE DINITRATE – isosorbide dinitrate tab 30 mg	
isosorbide dinitrate tab 10 mg	
isosorbide dinitrate tab 20 mg	
isosorbide dinitrate tab 30 mg	
isosorbide dinitrate tab 5 mg (Isordil titradose)	
isosorbide mononitrate tab sr 24hr 120 mg (Imdur)	
isosorbide mononitrate tab sr 24hr 30 mg (Imdur)	
isosorbide mononitrate tab sr 24hr 60 mg (Imdur)	
isosorbide mononitrate tab 10 mg	
isosorbide mononitrate tab 20 mg	
NITRO-BID – nitroglycerin oint 2%	
nitroglycerin cap cr 2.5 mg	
nitroglycerin cap cr 6.5 mg	
nitroglycerin cap cr 9 mg	
nitroglycerin td patch 24hr 0.1 mg/hr (Nitro-dur)	

Drug Name	Prior Approval
nitroglycerin td patch 24hr 0.2 mg/hr (Nitro-dur)	
nitroglycerin td patch 24hr 0.4 mg/hr (Nitro-dur)	
nitroglycerin td patch 24hr 0.6 mg/hr (Nitro-dur)	
NITROSTAT – nitroglycerin sl tab 0.3 mg	
NITROSTAT – nitroglycerin sl tab 0.4 mg	
NITROSTAT – nitroglycerin sl tab 0.6 mg	
CHOLESTEROL LOWERING	
atorvastatin calcium tab 10 mg (base equivalent) (Lipitor)	
atorvastatin calcium tab 20 mg (base equivalent) (Lipitor)	
atorvastatin calcium tab 40 mg (base equivalent) (Lipitor)	
atorvastatin calcium tab 80 mg (base equivalent) (Lipitor)	
cholestyramine light powder packets 4 gm	
cholestyramine light powder 4 gm/dose (Questran light)	
cholestyramine powder packets 4 gm (Questran)	
cholestyramine powder 4 gm/dose (Questran)	
choline fenofibrate cap dr 135 mg (fenofibric acid equiv) (Trilipix)	
choline fenofibrate cap dr 45 mg (fenofibric acid equiv) (Trilipix)	
colestipol hcl granule packets 5 gm (Colestid flavored)	
colestipol hcl granules 5 gm (Colestid flavored)	
colestipol hcl tab 1 gm (Colestid)	
CRESTOR – rosuvastatin calcium tab 5 mg	
CRESTOR – rosuvastatin calcium tab 10 mg	
CRESTOR – rosuvastatin calcium tab 20 mg	
CRESTOR – rosuvastatin calcium tab 40 mg	
fenofibrate micronized cap 130 mg (Antara)	
fenofibrate micronized cap 134 mg (Lofibra)	
fenofibrate micronized cap 200 mg (Lofibra)	
fenofibrate micronized cap 43 mg (Antara)	
fenofibrate micronized cap 67 mg (Lofibra)	

Drug Name	Prior Approval
fenofibrate tab 145 mg (Tricor)	
fenofibrate tab 160 mg (Lofibra)	
fenofibrate tab 48 mg (Tricor)	
fenofibrate tab 54 mg (Lofibra)	
gemfibrozil tab 600 mg (Lopid)	
JUXTAPID – lomitapide mesylate cap 5 mg (base equiv)	•
JUXTAPID – lomitapide mesylate cap 10 mg (base equiv)	•
JUXTAPID – lomitapide mesylate cap 20 mg (base equiv)	•
lovastatin tab 10 mg	
lovastatin tab 20 mg (Mevacor)	
lovastatin tab 40 mg (Mevacor)	
LOVAZA – omega-3-acid ethyl esters cap 1 gm	
niacin tab cr 1000 mg (antihyperlipidemic) (Niaspan)	
niacin tab cr 500 mg (antihyperlipidemic) (Niaspan)	
niacin tab cr 750 mg (antihyperlipidemic) (Niaspan)	
omega-3-acid ethyl esters cap 1 gm (Lovaza)	
pravastatin sodium tab 10 mg	
pravastatin sodium tab 20 mg (Pravachol)	
pravastatin sodium tab 40 mg (Pravachol)	
pravastatin sodium tab 80 mg (Pravachol)	
simvastatin tab 10 mg (Zocor)	
simvastatin tab 20 mg (Zocor)	
simvastatin tab 40 mg (Zocor)	
simvastatin tab 5 mg (Zocor)	
simvastatin tab 80 mg (Zocor)	
WELCHOL – colesevelam hcl tab 625 mg	
WELCHOL – colesevelam hcl packet for susp 3.75 gm	
FLUID REDUCTION	
ACETAZOLAMIDE – acetazolamide tab 125 mg	
acetazolamide cap sr 12hr 500 mg (Diamox)	
acetazolamide tab 250 mg	
amiloride & hydrochlorothiazide tab 5-50 mg	
amiloride hcl tab 5 mg	
bumetanide tab 0.5 mg	
bumetanide tab 1 mg	
bumetanide tab 2 mg	
CHLOROTHIAZIDE – chlorothiazide tab 250 mg	
chlorothiazide tab 250 mg	
chlorothiazide tab 500 mg	
CHLORTHALIDONE – chlorthalidone tab 25 mg	
CHLORTHALIDONE – chlorthalidone tab 50 mg	
furosemide oral soln 10 mg/ml	
furosemide tab 20 mg (Lasix)	
furosemide tab 40 mg (Lasix)	
furosemide tab 80 mg (Lasix)	
hydrochlorothiazide cap 12.5 mg (Microzide)	
hydrochlorothiazide tab 25 mg	
hydrochlorothiazide tab 50 mg	
indapamide tab 1.25 mg	
indapamide tab 2.5 mg	
metolazone tab 10 mg	
metolazone tab 2.5 mg (Zaroxolyn)	
metolazone tab 5 mg (Zaroxolyn)	
spironolactone & hydrochlorothiazide tab 25-25 mg (Aldactazide)	
spironolactone tab 100 mg (Aldactone)	
spironolactone tab 25 mg (Aldactone)	
spironolactone tab 50 mg (Aldactone)	
torsemide tab 10 mg (Demadex)	
torsemide tab 100 mg (Demadex)	
torsemide tab 20 mg (Demadex)	
torsemide tab 5 mg (Demadex)	
triamterene & hydrochlorothiazide cap 37.5-25 mg (Dyazide)	
triamterene & hydrochlorothiazide tab 37.5-25 mg (Maxzide-25)	

Drug Name	Prior Approval
triamterene & hydrochlorothiazide tab 75-50 mg (Maxzide)	
TRIAMTERENE/HYDROCHLOROTH – triamterene & hydrochlorothiazide cap 50-25 mg	
HEART RHYTHM	
amiodarone hcl tab 100 mg	
amiodarone hcl tab 200 mg (Cordarone)	
amiodarone hcl tab 400 mg	
disopyramide phosphate cap 100 mg (Norpace)	
disopyramide phosphate cap 150 mg (Norpace)	
flecainide acetate tab 100 mg	
flecainide acetate tab 150 mg	
flecainide acetate tab 50 mg	
mexiletine hcl cap 150 mg	
mexiletine hcl cap 200 mg	
mexiletine hcl cap 250 mg	
MULTAQ – dronedarone hcl tab 400 mg (base equivalent)	
NORPACE CR – disopyramide phosphate cap sr 12hr 100 mg	
propafenone hcl cap sr 12hr 225 mg (Rythmol sr)	
propafenone hcl cap sr 12hr 325 mg (Rythmol sr)	
propafenone hcl cap sr 12hr 425 mg (Rythmol sr)	
propafenone hcl tab 150 mg (Rythmol)	
propafenone hcl tab 225 mg (Rythmol)	
propafenone hcl tab 300 mg	
quinidine gluconate tab cr 324 mg	
QUINIDINE SULFATE – quinidine sulfate tab 200 mg	
QUINIDINE SULFATE ER – quinidine sulfate tab cr 300 mg	
quinidine sulfate tab 200 mg	
quinidine sulfate tab 300 mg	
sotalol hcl (afib/afl) tab 120 mg (Betapace af)	
sotalol hcl (afib/afl) tab 160 mg (Betapace af)	
sotalol hcl (afib/afl) tab 80 mg (Betapace af)	

Drug Name	Prior Approval
sotalol hcl tab 120 mg (Betapace)	
sotalol hcl tab 160 mg (Betapace)	
sotalol hcl tab 240 mg	
sotalol hcl tab 80 mg (Betapace)	
OTHER HEART RELATED DRUGS	
ADCIRCA – tadalafil tab 20 mg (pah)	•
clonidine hcl tab 0.1 mg (Catapres)	
clonidine hcl tab 0.2 mg (Catapres)	
clonidine hcl tab 0.3 mg (Catapres)	
clonidine hcl td patch weekly 0.1 mg/24hr (Catapres-tts-1)	
clonidine hcl td patch weekly 0.2 mg/24hr (Catapres-tts-2)	
clonidine hcl td patch weekly 0.3 mg/24hr (Catapres-tts-3)	
DIBENZYLINE – phenoxybenzamine hcl cap 10 mg	
DIGOXIN – digoxin oral soln 0.05 mg/ml	
digoxin tab 125 mcg (0.125 mg) (Lanoxin)	
digoxin tab 250 mcg (0.25 mg) (Lanoxin)	
doxazosin mesylate tab 1 mg (Cardura)	
doxazosin mesylate tab 2 mg (Cardura)	
doxazosin mesylate tab 4 mg (Cardura)	
doxazosin mesylate tab 8 mg (Cardura)	
eplerenone tab 25 mg (Inspra)	
eplerenone tab 50 mg (Inspra)	
guanfacine hcl tab 1 mg (Tenex)	
guanfacine hcl tab 2 mg (Tenex)	
hydralazine hcl tab 10 mg	
hydralazine hcl tab 100 mg	
hydralazine hcl tab 25 mg	
hydralazine hcl tab 50 mg	
LETAIRIS – ambrisentan tab 5 mg	•
LETAIRIS – ambrisentan tab 10 mg	•
methyldopa tab 250 mg	
methyldopa tab 500 mg	
midodrine hcl tab 10 mg	

Drug Name	Prior Approval
midodrine hcl tab 2.5 mg	
midodrine hcl tab 5 mg	
minoxidil tab 10 mg	
minoxidil tab 2.5 mg	
OPSUMIT – macitentan tab 10 mg	•
prazosin hcl cap 1 mg (Minipress)	
prazosin hcl cap 2 mg (Minipress)	
prazosin hcl cap 5 mg (Minipress)	
REMODULIN – treprostinil sodium inj 1 mg/ml (base equiv)	•
REMODULIN – treprostinil sodium inj 2.5 mg/ml (base equiv)	•
REMODULIN – treprostinil sodium inj 5 mg/ml (base equiv)	•
REMODULIN – treprostinil sodium inj 10 mg/ml (base equiv)	•
sildenafil citrate tab 20 mg (Revatio)	•
terazosin hcl cap 1 mg	
terazosin hcl cap 10 mg	
terazosin hcl cap 2 mg	
terazosin hcl cap 5 mg	
TRACLEER – bosentan tab 62.5 mg	•
TRACLEER – bosentan tab 125 mg	•
VENTAVIS – iloprost inhalation solution 10 mcg/ml	•
VENTAVIS – iloprost inhalation solution 20 mcg/ml	•
BEE STING KITS	
EPIPEN 2-PAK – epinephrine solution auto-injector 0.3 mg/0.3ml (1:1000)	
EPIPEN-JR 2-PAK – epinephrine solution auto-injector 0.15 mg/0.3ml (1:2000)	
RESPIRATORY AGENTS	
ANTIHISTAMINES	
cyproheptadine hcl syrup 2 mg/5ml	
cyproheptadine hcl tab 4 mg	
promethazine hcl suppos 12.5 mg	
promethazine hcl suppos 25 mg	

Drug Name	Prior Approval
promethazine hcl syrup 6.25 mg/5ml	
promethazine hcl tab 12.5 mg	
promethazine hcl tab 25 mg	
promethazine hcl tab 50 mg	
PROMETHEGAN – promethazine hcl suppos 50 mg	
NASAL PRODUCTS	
ASTEPRO – azelastine hcl nasal spray 0.15% (205.5 mcg/spray)	
azelastine hcl nasal spray 0.15% (205.5 mcg/spray) (Astepro)	
azelastine hcl nasal spray 137 mcg/spray (1 mg/ml)	
BACTROBAN NASAL – mupirocin calcium nasal oint 2%	
FLUNISOLIDE – flunisolide nasal soln 29 mcg/act (0.025%)	
flunisolide nasal soln 0.025% (Flunisolide)	
fluticasone propionate nasal susp 50 mcg/act (Flonase)	
ipratropium bromide nasal soln 0.03% (21 mcg/spray) (Atrovent)	
ipratropium bromide nasal soln 0.06% (42 mcg/spray) (Atrovent)	
triamcinolone acetonide nasal inhal 55 mcg/act (Nasacort aq)	
COUGH/COLD/ALLERGY	
acetylcysteine inhal soln 10%	
acetylcysteine inhal soln 20%	
promethazine w/ codeine syrup 6.25-10 mg/5ml	
SSKI – potassium iodide soln 1 gm/ml	
ASTHMA/COPD	
ADVAIR DISKUS – fluticasone-salmeterol aer powder ba 100-50 mcg/dose	
ADVAIR DISKUS – fluticasone-salmeterol aer powder ba 250-50 mcg/dose	
ADVAIR DISKUS – fluticasone-salmeterol aer powder ba 500-50 mcg/dose	

Drug Name	Prior Approval
ADVAIR HFA – fluticasone-salmeterol inhal aerosol 45-21 mcg/act	
ADVAIR HFA – fluticasone-salmeterol inhal aerosol 115-21 mcg/act	
ADVAIR HFA – fluticasone-salmeterol inhal aerosol 230-21 mcg/act	
albuterol sulfate soln nebu 0.083% (2.5 mg/3ml)	
albuterol sulfate soln nebu 0.5% (5 mg/ml)	
albuterol sulfate soln nebu 0.63 mg/3ml (base equiv)	
albuterol sulfate soln nebu 1.25 mg/3ml (base equiv)	
albuterol sulfate syrup 2 mg/5ml	
albuterol sulfate tab sr 12hr 4 mg (Vospire er)	
albuterol sulfate tab sr 12hr 8 mg (Vospire er)	
albuterol sulfate tab 2 mg	
albuterol sulfate tab 4 mg	
ANORO ELLIPTA – umeclidinium-vilanterol aero powd ba 62.5-25 mcg/inh	
ASMANEX 120 METERED DOSES – mometasone furoate inhal powd 220 mcg/inh (breath activated)	
ASMANEX 14 METERED DOSES – mometasone furoate inhal powd 220 mcg/inh (breath activated)	
ASMANEX 30 METERED DOSES – mometasone furoate inhal powd 110 mcg/inh (breath activated)	
ASMANEX 30 METERED DOSES – mometasone furoate inhal powd 220 mcg/inh (breath activated)	
ASMANEX 60 METERED DOSES – mometasone furoate inhal powd 220 mcg/inh (breath activated)	
ATROVENT HFA – ipratropium bromide hfa inhal aerosol 17 mcg/act	
BREO ELLIPTA – fluticasone furoate-vilanterol aero powd ba 100-25 mcg/inh	
budesonide inhalation susp 0.25 mg/2ml (Pulmicort)	
budesonide inhalation susp 0.5 mg/2ml (Pulmicort)	
COMBIVENT – ipratropium-albuterol aerosol 18-103 mcg/act (20-120mcg/act)	

Drug Name	Prior Approval
COMBIVENT RESPIMAT – ipratropium-albuterol inhal aerosol soln 20-100 mcg/act	
cromolyn sodium soln nebu 20 mg/2ml	
DULERA – mometasone furoate-formoterol fumarate aerosol 100-5 mcg/act	
DULERA – mometasone furoate-formoterol fumarate aerosol 200-5 mcg/act	
FLOVENT DISKUS – fluticasone propionate aer pow ba 50 mcg/blister	
FLOVENT DISKUS – fluticasone propionate aer pow ba 100 mcg/blister	
FLOVENT DISKUS – fluticasone propionate aer pow ba 250 mcg/blister	
FLOVENT HFA – fluticasone propionate hfa inhal aero 44 mcg/act (50/valve)	
FLOVENT HFA – fluticasone propionate hfa inhal aer 110 mcg/act (125/valve)	
FLOVENT HFA – fluticasone propionate hfa inhal aer 220 mcg/act (250/valve)	
FORADIL AEROLIZER – formoterol fumarate inhal cap 12 mcg	
ipratropium bromide inhal soln 0.02%	
ipratropium-albuterol nebu soln 0.5-2.5(3) mg/3ml (Duoneb)	
levalbuterol hcl soln nebu conc 1.25 mg/0.5ml (base equiv) (Xopenex concentrate)	
levalbuterol hcl soln nebu 0.31 mg/3ml (base equiv) (Xopenex)	
levalbuterol hcl soln nebu 0.63 mg/3ml (base equiv) (Xopenex)	
levalbuterol hcl soln nebu 1.25 mg/3ml (base equiv) (Xopenex)	
MAXAIR AUTOHALER – pirbuterol acetate breath activated inhal aerosol 200mcg/inh	
montelukast sodium chew tab 4 mg (base equiv) (Singulair)	
montelukast sodium chew tab 5 mg (base equiv) (Singulair)	
montelukast sodium oral granules packet 4 mg (base equiv) (Singulair)	

Drug Name	Prior Approval
montelukast sodium tab 10 mg (base equiv) (Singulair)	
PROAIR HFA – albuterol sulfate inhal aero 108 mcg/act (90mcg base equiv)	
PULMICORT – budesonide inhalation susp 1 mg/2ml	
QVAR – beclomethasone dipropionate inhal aero soln 40 mcg/act	
QVAR – beclomethasone dipropionate inhal aero soln 80 mcg/act	
SEREVENT DISKUS – salmeterol xinafoate aer pow ba 50 mcg/dose (base equiv)	
SPIRIVA HANDIHALER – tiotropium bromide monohydrate inhal cap 18 mcg (base equiv)	
SYMBICORT – budesonide-formoterol fumarate dihyd aerosol 80-4.5 mcg/act	
SYMBICORT – budesonide-formoterol fumarate dihyd aerosol 160-4.5 mcg/act	
terbutaline sulfate tab 2.5 mg	
terbutaline sulfate tab 5 mg	
theophylline tab sr 12hr 100 mg	
theophylline tab sr 12hr 200 mg	
theophylline tab sr 12hr 300 mg	
theophylline tab sr 12hr 450 mg	
theophylline tab sr 24hr 400 mg	
theophylline tab sr 24hr 600 mg	
VENTOLIN HFA – albuterol sulfate inhal aero 108 mcg/act (90mcg base equiv)	
XOLAIR – omalizumab for inj 150 mg	•
zafirlukast tab 10 mg (Accolate)	
zafirlukast tab 20 mg (Accolate)	
OTHER RESPIRATORY DRUGS	
KALYDECO – ivacaftor tab 150 mg	•
PULMOZYME – dornase alfa inhal soln 1 mg/ml	
GASTROINTESTINAL DRUGS	
LAXATIVES	
lactulose solution 10 gm/15ml	

Drug Name	Prior Approval
peg 3350-kcl-na bicarb-nacl-na sulfate for soln 236 gm (Golytely)	
peg 3350-kcl-na bicarb-nacl-na sulfate for soln 240 gm (Colyte-flavor packs)	
peg 3350-kcl-sod bicarb-nacl for soln 420 gm (Nulytely/flavor pack)	
ULCER/GERD	
amoxicillin cap-clarithro tab-lansopraz cap dr therapy pack (Prevpac)	
CARAFATE – sucralfate susp 1 gm/10ml	
cimetidine hcl soln 300 mg/5ml	
cimetidine tab 300 mg	
cimetidine tab 400 mg	
cimetidine tab 800 mg	
DICYCLOMINE HCL – dicyclomine hcl oral soln 10 mg/5ml	
dicyclomine hcl cap 10 mg (Bentyl)	
dicyclomine hcl tab 20 mg (Bentyl)	
famotidine tab 40 mg (Pepcid)	
glycopyrrolate tab 1 mg (Robinul)	
glycopyrrolate tab 2 mg (Robinul forte)	
hyoscyamine sulfate elixir 0.125 mg/5ml	
hyoscyamine sulfate soln 0.125 mg/ml	
hyoscyamine sulfate tab sl 0.125 mg (Levsin/sl)	
hyoscyamine sulfate tab sr 12hr 0.375 mg (Levbid)	
hyoscyamine sulfate tab 0.125 mg (Levsin)	
lansoprazole cap delayed release 15 mg (Prevacid)	
lansoprazole cap delayed release 30 mg (Prevacid)	
misoprostol tab 100 mcg (Cytotec)	
misoprostol tab 200 mcg (Cytotec)	
NEXIUM – esomeprazole magnesium for delayed release susp pack 2.5 mg	
NEXIUM – esomeprazole magnesium for delayed release susp packet 5 mg	

Drug Name	Prior Approval
NEXIUM – esomeprazole magnesium for delayed release susp packet 10 mg	
NEXIUM – esomeprazole magnesium for delayed release susp packet 20 mg	
NEXIUM – esomeprazole magnesium for delayed release susp packet 40 mg	
NEXIUM – esomeprazole magnesium cap delayed release 20 mg	
NEXIUM – esomeprazole magnesium cap delayed release 40 mg	
omeprazole cap delayed release 10 mg (Prilosec)	
omeprazole cap delayed release 20 mg (Prilosec)	
omeprazole cap delayed release 40 mg (Prilosec)	
pantoprazole sodium ec tab 20 mg (base equiv) (Protonix)	
pantoprazole sodium ec tab 40 mg (base equiv) (Protonix)	
ranitidine hcl cap 300 mg	
ranitidine hcl syrup 15 mg/ml (75 mg/5ml)	
ranitidine hcl tab 300 mg (Zantac)	
sucralfate tab 1 gm (Carafate)	
NAUSEA AND VOMITING	
EMEND – aprepitant capsule 40 mg	
EMEND – aprepitant capsule 80 mg	
EMEND – aprepitant capsule 125 mg	
EMEND – aprepitant capsule therapy pack 80 & 125 mg	
ondansetron hcl oral soln 4 mg/5ml (Zofran)	
ondansetron hcl tab 24 mg	
ondansetron hcl tab 4 mg (Zofran)	
ondansetron hcl tab 8 mg (Zofran)	
ondansetron orally disintegrating tab 4 mg (Zofran odt)	
ondansetron orally disintegrating tab 8 mg (Zofran odt)	
trimethobenzamide hcl cap 300 mg (Tigan)	
DIGESTIVE ENZYMES	
CREON – pancrelipase (lip-prot-amyl) dr cap 3000-9500-15000 unit	
CREON – pancrelipase (lip-prot-amyl) dr cap 6000-19000-30000 unit	
CREON – pancrelipase (lip-prot-amyl) dr cap 12000-38000-60000 unit	
CREON – pancrelipase (lip-prot-amyl) dr cap 24000-76000-120000 unit	
CREON – pancrelipase (lip-prot-amyl) dr cap 36000-114000-180000 unit	
ZENPEP – pancrelipase (lip-prot-amyl) dr cap 3000-10000-16000 unit	
ZENPEP – pancrelipase (lip-prot-amyl) dr cap 5000-17000-27000 unit	
ZENPEP – pancrelipase (lip-prot-amyl) dr cap 10000-34000-55000 unit	
ZENPEP – pancrelipase (lip-prot-amyl) dr cap 15000-51000-82000 unit	
ZENPEP – pancrelipase (lip-prot-amyl) dr cap 20000-68000-109000 unit	
ZENPEP – pancrelipase (lip-prot-amyl) dr cap 25000-85000-136000 unit	
OTHER GASTROINTESTINAL DRUGS	
ASACOL – mesalamine tab delayed release 400 mg	
ASACOL HD – mesalamine tab delayed release 800 mg	
balsalazide disodium cap 750 mg (Colazal)	
calcium acetate (phosphate binder) cap 667 mg (169 mg ca) (Phoslo)	
CANASA – mesalamine suppos 1000 mg	
CHENODAL – chenodiol tab 250 mg	•
DELZICOL – mesalamine cap dr 400 mg	
lactulose (encephalopathy) solution 10 gm/15ml	
LIALDA – mesalamine tab delayed release 1.2 gm	
mesalamine enema 4 gm	
metoclopramide hcl soln 5 mg/5ml (10 mg/10ml)	
metoclopramide hcl tab 10 mg (Reglan)	
metoclopramide hcl tab 5 mg (Reglan)	

Drug Name	Prior Approval
PENTASA – mesalamine cap cr 250 mg	
PENTASA – mesalamine cap cr 500 mg	
RELISTOR – methylnaltrexone bromide inj 8 mg/0.4ml (20 mg/ml)	•
RELISTOR – methylnaltrexone bromide inj 12 mg/0.6ml (20 mg/ml)	•
RELISTOR – methylnaltrexone bromide inj kit 12 mg/0.6ml	•
RENVELA – sevelamer carbonate tab 800 mg	
RENVELA – sevelamer carbonate packet 0.8 gm	
RENVELA – sevelamer carbonate packet 2.4 gm	
sulfasalazine tab delayed release 500 mg (Azulfidine en-tabs)	
sulfasalazine tab 500 mg (Azulfidine)	
ursodiol cap 300 mg (Actigall)	
GENITOURINARY DRUGS	
URINARY TRACT INFECTIONS	
nitrofurantoin macrocrystalline cap 100 mg (Macrodantin)	
nitrofurantoin macrocrystalline cap 50 mg (Macrodantin)	
nitrofurantoin monohydrate macrocrystalline cap 100 mg (Macrobid)	
nitrofurantoin susp 25 mg/5ml (Furadantin)	
URINARY TRACT SPASMS	
oxybutynin chloride syrup 5 mg/5ml	
oxybutynin chloride tab sr 24hr 10 mg (Ditropan xl)	
oxybutynin chloride tab sr 24hr 15 mg (Ditropan xl)	
oxybutynin chloride tab sr 24hr 5 mg (Ditropan xl)	
oxybutynin chloride tab 5 mg	
tolterodine tartrate cap sr 24hr 2 mg (Detrol la)	
tolterodine tartrate cap sr 24hr 4 mg (Detrol la)	
tolterodine tartrate tab 1 mg (Detrol)	
tolterodine tartrate tab 2 mg (Detrol)	
VESICARE – solifenacin succinate tab 5 mg	

Drug Name	Prior Approval
VESICARE – solifenacin succinate tab 10 mg	
VAGINAL PRODUCTS	
CLEOCIN – clindamycin phosphate vaginal suppos 100 mg	
clindamycin phosphate vaginal cream 2% (Cleocin)	
metronidazole vaginal gel 0.75% (Metrogel-vaginal)	
PREMARIN – estrogens, conjugated vaginal cream 0.625 mg/gm	
terconazole vaginal cream 0.4% (Terazol 7)	
terconazole vaginal cream 0.8% (Terazol 3)	
terconazole vaginal suppos 80 mg	
VAGIFEM – estradiol vaginal tab 10 mcg	
OTHER GENITOURINARY DRUGS	
alfuzosin hcl tab sr 24hr 10 mg (Uroxatral)	
CYTRA-K – potassium citrate & citric acid soln 1100-334 mg/5ml	
CYTRA-3 – pot & sod citrates w/ cit ac syrup 550-500-334 mg/5ml	
ELMIRON – pentosan polysulfate sodium caps 100 mg	
finasteride tab 5 mg (Proscar)	•
K-PHOS NO 2 – potassium & sodium acid phosphates tab 305-700 mg	
POTASSIUM CITRATE – potassium citrate tab cr 5 meq (540 mg)	
POTASSIUM CITRATE – potassium citrate tab cr 10 meq (1080 mg)	
potassium citrate & citric acid powder pack 3300-1002 mg	
potassium citrate & citric acid soln 1100-334 mg/5ml	
sodium citrate & citric acid soln 500-334 mg/5ml (Shohls solution modi)	
tamsulosin hcl cap 0.4 mg (Flomax)	
TRICITRATES – pot & sod citrates w/ cit ac soln 550-500-334 mg/5ml	

Drug Name	Prior Approval
CENTRAL NERVOUS SYSTEM DRUGS	
ANXIETY	
ALPRAZOLAM INTENSOL – alprazolam conc 1 mg/ml	
alprazolam tab sr 24hr 0.5 mg (Xanax xr)	
alprazolam tab sr 24hr 1 mg (Xanax xr)	
alprazolam tab sr 24hr 2 mg (Xanax xr)	
alprazolam tab sr 24hr 3 mg (Xanax xr)	
alprazolam tab 0.25 mg (Xanax)	
alprazolam tab 0.5 mg (Xanax)	
alprazolam tab 1 mg (Xanax)	
alprazolam tab 2 mg (Xanax)	
buspirone hcl tab 10 mg	
buspirone hcl tab 15 mg	
buspirone hcl tab 30 mg	
buspirone hcl tab 5 mg	
buspirone hcl tab 7.5 mg	
clorazepate dipotassium tab 15 mg (Tranxene t)	
clorazepate dipotassium tab 3.75 mg (Tranxene t)	
clorazepate dipotassium tab 7.5 mg (Tranxene t)	
DIAZEPAM – diazepam soln 1 mg/ml	
DIAZEPAM – diazepam inj 5 mg/ml	
DIAZEPAM – diazepam im inj device 10 mg/2ml	
DIAZEPAM INTENSOL – diazepam conc 5 mg/ml	
diazepam tab 10 mg (Valium)	
diazepam tab 2 mg (Valium)	
diazepam tab 5 mg (Valium)	
hydroxyzine hcl syrup 10 mg/5ml	
hydroxyzine hcl tab 10 mg	
hydroxyzine hcl tab 25 mg	
hydroxyzine hcl tab 50 mg	
HYDROXYZINE PAMOATE – hydroxyzine pamoate cap 100 mg	
hydroxyzine pamoate cap 25 mg (Vistaril)	
hydroxyzine pamoate cap 50 mg (Vistaril)	

Drug Name	Prior Approval
lorazepam conc 2 mg/ml (Lorazepam intensol)	
lorazepam tab 0.5 mg (Ativan)	
lorazepam tab 1 mg (Ativan)	
lorazepam tab 2 mg (Ativan)	
DEPRESSION	
amitriptyline hcl tab 10 mg	
amitriptyline hcl tab 100 mg	
amitriptyline hcl tab 150 mg	
amitriptyline hcl tab 25 mg	
amitriptyline hcl tab 50 mg	
amitriptyline hcl tab 75 mg	
bupropion hcl tab sr 12hr 100 mg (Wellbutrin sr)	
bupropion hcl tab sr 12hr 150 mg (Wellbutrin sr)	
bupropion hcl tab sr 12hr 200 mg (Wellbutrin sr)	
bupropion hcl tab sr 24hr 150 mg (Wellbutrin xl)	
bupropion hcl tab sr 24hr 300 mg (Wellbutrin xl)	
bupropion hcl tab 100 mg (Wellbutrin)	
bupropion hcl tab 75 mg (Wellbutrin)	
citalopram hydrobromide oral soln 10 mg/5ml	
citalopram hydrobromide tab 10 mg (base equiv) (Celexa)	
citalopram hydrobromide tab 20 mg (base equiv) (Celexa)	
citalopram hydrobromide tab 40 mg (base equiv) (Celexa)	
clomipramine hcl cap 25 mg (Anafranil)	
clomipramine hcl cap 50 mg (Anafranil)	
clomipramine hcl cap 75 mg (Anafranil)	
desipramine hcl tab 10 mg (Norpramin)	
desipramine hcl tab 100 mg (Norpramin)	
desipramine hcl tab 150 mg (Norpramin)	
desipramine hcl tab 25 mg (Norpramin)	
desipramine hcl tab 50 mg (Norpramin)	
desipramine hcl tab 75 mg (Norpramin)	
DOXEPIN HCL – doxepin hcl cap 75 mg	
doxepin hcl cap 10 mg	

Drug Name	Prior Approval
doxepin hcl cap 100 mg	
doxepin hcl cap 150 mg	
doxepin hcl cap 25 mg	
doxepin hcl cap 50 mg	
doxepin hcl conc 10 mg/ml	
duloxetine hcl enteric coated pellets cap 20 mg (Cymbalta)	
duloxetine hcl enteric coated pellets cap 30 mg (Cymbalta)	
duloxetine hcl enteric coated pellets cap 60 mg (Cymbalta)	
escitalopram oxalate soln 5 mg/5ml (base equiv) (Lexapro)	
escitalopram oxalate tab 10 mg (base equiv) (Lexapro)	
escitalopram oxalate tab 20 mg (base equiv) (Lexapro)	
escitalopram oxalate tab 5 mg (base equiv) (Lexapro)	
fluoxetine hcl cap 10 mg (Prozac)	
fluoxetine hcl cap 20 mg (Prozac)	
fluoxetine hcl cap 40 mg (Prozac)	
fluoxetine hcl solution 20 mg/5ml	
fluoxetine hcl tab 10 mg	
fluoxetine hcl tab 20 mg	
fluvoxamine maleate tab 100 mg	
fluvoxamine maleate tab 25 mg	
fluvoxamine maleate tab 50 mg	
imipramine hcl tab 10 mg (Tofranil)	
imipramine hcl tab 25 mg (Tofranil)	
imipramine hcl tab 50 mg (Tofranil)	
imipramine pamoate cap 100 mg (Tofranil-pm)	
imipramine pamoate cap 125 mg (Tofranil-pm)	
imipramine pamoate cap 150 mg (Tofranil-pm)	
imipramine pamoate cap 75 mg (Tofranil-pm)	
mirtazapine orally disintegrating tab 15 mg (Remeron soltab)	
mirtazapine orally disintegrating tab 30 mg (Remeron soltab)	
mirtazapine orally disintegrating tab 45 mg (Remeron soltab)	
mirtazapine tab 15 mg (Remeron)	
mirtazapine tab 30 mg (Remeron)	
mirtazapine tab 45 mg (Remeron)	
mirtazapine tab 7.5 mg	
NORTRIPTYLINE HCL – nortriptyline hcl soln 10 mg/5ml	
nortriptyline hcl cap 10 mg (Pamelor)	
nortriptyline hcl cap 25 mg (Pamelor)	
nortriptyline hcl cap 50 mg (Pamelor)	
nortriptyline hcl cap 75 mg (Pamelor)	
paroxetine hcl tab sr 24hr 12.5 mg (Paxil cr)	
paroxetine hcl tab sr 24hr 25 mg (Paxil cr)	
paroxetine hcl tab sr 24hr 37.5 mg (Paxil cr)	
paroxetine hcl tab 10 mg (Paxil)	
paroxetine hcl tab 20 mg (Paxil)	
paroxetine hcl tab 30 mg (Paxil)	
paroxetine hcl tab 40 mg (Paxil)	
phenelzine sulfate tab 15 mg (Nardil)	
sertraline hcl oral conc 20 mg/ml (Zoloft)	
sertraline hcl tab 100 mg (Zoloft)	
sertraline hcl tab 25 mg (Zoloft)	
sertraline hcl tab 50 mg (Zoloft)	
tranylcypromine sulfate tab 10 mg (Parnate)	
trazodone hcl tab 100 mg	
trazodone hcl tab 150 mg	
trazodone hcl tab 300 mg	
trazodone hcl tab 50 mg	
venlafaxine hcl cap sr 24hr 150 mg (base equivalent) (Effexor xr)	
venlafaxine hcl cap sr 24hr 37.5 mg (base equivalent) (Effexor xr)	

Drug Name	Prior Approval
venlafaxine hcl cap sr 24hr 75 mg (base equivalent) (Effexor xr)	
VENLAFAXINE HCL ER – venlafaxine hcl tab sr 24hr 225 mg (base equivalent)	
venlafaxine hcl tab sr 24hr 150 mg (base equivalent) (Venlafaxine hcl er)	
venlafaxine hcl tab sr 24hr 37.5 mg (base equivalent) (Venlafaxine hcl er)	
venlafaxine hcl tab sr 24hr 75 mg (base equivalent) (Venlafaxine hcl er)	
venlafaxine hcl tab 100 mg	
venlafaxine hcl tab 25 mg	
venlafaxine hcl tab 37.5 mg	
venlafaxine hcl tab 50 mg	
venlafaxine hcl tab 75 mg	
PSYCHOTIC AND BIPOLAR DISORDERS	
chlorpromazine hcl tab 10 mg	
chlorpromazine hcl tab 100 mg	
chlorpromazine hcl tab 200 mg	
chlorpromazine hcl tab 25 mg	
chlorpromazine hcl tab 50 mg	
clozapine tab 100 mg (Clozaril)	
clozapine tab 200 mg	
clozapine tab 25 mg (Clozaril)	
clozapine tab 50 mg	
FLUPHENAZINE HCL – fluphenazine hcl elixir 2.5 mg/5ml	
FLUPHENAZINE HCL – fluphenazine hcl oral conc 5 mg/ml	
fluphenazine hcl tab 1 mg	
fluphenazine hcl tab 10 mg	
fluphenazine hcl tab 2.5 mg	
fluphenazine hcl tab 5 mg	
haloperidol lactate oral conc 2 mg/ml	
haloperidol tab 0.5 mg	
haloperidol tab 1 mg	
haloperidol tab 10 mg	

Drug Name	Prior Approval
haloperidol tab 2 mg	
haloperidol tab 20 mg	
haloperidol tab 5 mg	
LITHIUM CARBONATE – lithium carbonate cap 150 mg	
lithium carbonate cap 150 mg (Lithium carbonate)	
lithium carbonate cap 300 mg	
lithium carbonate cap 600 mg (Lithium carbonate)	
lithium carbonate tab cr 300 mg (Lithobid)	
lithium carbonate tab cr 450 mg	
lithium carbonate tab 300 mg	
LITHIUM CITRATE – lithium citrate oral soln 8 meq/5ml	
loxapine succinate cap 10 mg	
loxapine succinate cap 25 mg	
loxapine succinate cap 5 mg (Loxitane)	
loxapine succinate cap 50 mg	
olanzapine orally disintegrating tab 10 mg (Zyprexa zydis)	
olanzapine orally disintegrating tab 15 mg (Zyprexa zydis)	
olanzapine orally disintegrating tab 20 mg (Zyprexa zydis)	
olanzapine orally disintegrating tab 5 mg (Zyprexa zydis)	
olanzapine tab 10 mg (Zyprexa)	
olanzapine tab 15 mg (Zyprexa)	
olanzapine tab 2.5 mg (Zyprexa)	
olanzapine tab 20 mg (Zyprexa)	
olanzapine tab 5 mg (Zyprexa)	
olanzapine tab 7.5 mg (Zyprexa)	
perphenazine tab 16 mg	
perphenazine tab 2 mg	
perphenazine tab 4 mg	
perphenazine tab 8 mg	
prochlorperazine maleate tab 10 mg (Compazine)	

Drug Name	Prior Approval
prochlorperazine maleate tab 5 mg (Compazine)	
prochlorperazine suppos 25 mg	
quetiapine fumarate tab 100 mg (Seroquel)	
quetiapine fumarate tab 200 mg (Seroquel)	
quetiapine fumarate tab 25 mg (Seroquel)	
quetiapine fumarate tab 300 mg (Seroquel)	
quetiapine fumarate tab 400 mg (Seroquel)	
quetiapine fumarate tab 50 mg (Seroquel)	
risperidone orally disintegrating tab 0.25 mg	
risperidone orally disintegrating tab 0.5 mg (Risperdal m-tab)	
risperidone orally disintegrating tab 1 mg (Risperdal m-tab)	
risperidone orally disintegrating tab 2 mg (Risperdal m-tab)	
risperidone orally disintegrating tab 3 mg (Risperdal m-tab)	
risperidone orally disintegrating tab 4 mg (Risperdal m-tab)	
risperidone soln 1 mg/ml (Risperdal)	
risperidone tab 0.25 mg (Risperdal)	
risperidone tab 0.5 mg (Risperdal)	
risperidone tab 1 mg (Risperdal)	
risperidone tab 2 mg (Risperdal)	
risperidone tab 3 mg (Risperdal)	
risperidone tab 4 mg (Risperdal)	
SEROQUEL XR – quetiapine fumarate tab sr 24hr 50 mg	
SEROQUEL XR – quetiapine fumarate tab sr 24hr 150 mg	
SEROQUEL XR – quetiapine fumarate tab sr 24hr 200 mg	
SEROQUEL XR – quetiapine fumarate tab sr 24hr 300 mg	
SEROQUEL XR – quetiapine fumarate tab sr 24hr 400 mg	
thiothixene cap 1 mg	
thiothixene cap 10 mg	
thiothixene cap 2 mg	
thiothixene cap 5 mg	
trifluoperazine hcl tab 1 mg	
trifluoperazine hcl tab 10 mg	
trifluoperazine hcl tab 2 mg	
trifluoperazine hcl tab 5 mg	
ziprasidone hcl cap 20 mg (Geodon)	
ziprasidone hcl cap 40 mg (Geodon)	
ziprasidone hcl cap 60 mg (Geodon)	
ziprasidone hcl cap 80 mg (Geodon)	
SLEEP AIDS	
estazolam tab 1 mg	
estazolam tab 2 mg	
PHENOBARBITAL – phenobarbital tab 15 mg	
PHENOBARBITAL – phenobarbital tab 30 mg	
PHENOBARBITAL – phenobarbital tab 60 mg	
PHENOBARBITAL – phenobarbital tab 64.8 mg	
PHENOBARBITAL – phenobarbital tab 97.2 mg	
PHENOBARBITAL – phenobarbital tab 100 mg	
phenobarbital elixir 20 mg/5ml	
phenobarbital tab 16.2 mg	
phenobarbital tab 30 mg	
phenobarbital tab 32.4 mg	
temazepam cap 15 mg (Restoril)	
temazepam cap 22.5 mg (Restoril)	
temazepam cap 30 mg (Restoril)	
temazepam cap 7.5 mg (Restoril)	
zaleplon cap 10 mg (Sonata)	
zaleplon cap 5 mg (Sonata)	
zolpidem tartrate tab cr 12.5 mg (Ambien cr)	
zolpidem tartrate tab cr 6.25 mg (Ambien cr)	
zolpidem tartrate tab 10 mg (Ambien)	
zolpidem tartrate tab 5 mg (Ambien)	
HYPERACTIVITY/NARCOLEPSY	

Drug Name	Prior Approval
amphetamine-dextroamphetamine cap sr 24hr 10 mg (Adderall xr)	
amphetamine-dextroamphetamine cap sr 24hr 15 mg (Adderall xr)	
amphetamine-dextroamphetamine cap sr 24hr 20 mg (Adderall xr)	
amphetamine-dextroamphetamine cap sr 24hr 25 mg (Adderall xr)	
amphetamine-dextroamphetamine cap sr 24hr 30 mg (Adderall xr)	
amphetamine-dextroamphetamine cap sr 24hr 5 mg (Adderall xr)	
amphetamine-dextroamphetamine tab 10 mg (Adderall)	
amphetamine-dextroamphetamine tab 12.5 mg (Adderall)	
amphetamine-dextroamphetamine tab 15 mg (Adderall)	
amphetamine-dextroamphetamine tab 20 mg (Adderall)	
amphetamine-dextroamphetamine tab 30 mg (Adderall)	
amphetamine-dextroamphetamine tab 5 mg (Adderall)	
amphetamine-dextroamphetamine tab 7.5 mg (Adderall)	
caffeine citrate oral soln 60 mg/3ml (10 mg/ml base equiv) (Cafcit)	
dexmethylphenidate hcl tab 10 mg (Focalin)	
dexmethylphenidate hcl tab 2.5 mg (Focalin)	
dexmethylphenidate hcl tab 5 mg (Focalin)	
dextroamphetamine sulfate cap sr 24hr 10 mg (Dexedrine)	
dextroamphetamine sulfate cap sr 24hr 15 mg (Dexedrine)	
dextroamphetamine sulfate cap sr 24hr 5 mg (Dexedrine)	
dextroamphetamine sulfate tab 10 mg	
dextroamphetamine sulfate tab 5 mg	

Drug Name	Prior Approval
methylphenidate hcl cap cr 10 mg (Metadate cd)	
methylphenidate hcl cap cr 20 mg (Metadate cd)	
methylphenidate hcl cap cr 30 mg (Metadate cd)	
methylphenidate hcl cap cr 40 mg (Metadate cd)	
methylphenidate hcl cap cr 50 mg (Metadate cd)	
methylphenidate hcl cap cr 60 mg (Metadate cd)	
methylphenidate hcl cap sr 24hr 20 mg (Ritalin la)	
methylphenidate hcl cap sr 24hr 30 mg (Ritalin la)	
methylphenidate hcl cap sr 24hr 40 mg (Ritalin la)	
METHYLPHENIDATE HCL ER – methylphenidate hcl tab cr 10 mg	
methylphenidate hcl tab cr 20 mg (Ritalin sr)	
methylphenidate hcl tab sa osm 18 mg (Concerta)	
methylphenidate hcl tab sa osm 27 mg (Concerta)	
methylphenidate hcl tab sa osm 36 mg (Concerta)	
methylphenidate hcl tab sa osm 54 mg (Concerta)	
methylphenidate hcl tab 10 mg (Ritalin)	
methylphenidate hcl tab 20 mg (Ritalin)	
methylphenidate hcl tab 5 mg (Ritalin)	
modafinil tab 100 mg (Provigil)	
modafinil tab 200 mg (Provigil)	
STRATTERA – atomoxetine hcl cap 10 mg (base equiv)	
STRATTERA – atomoxetine hcl cap 18 mg (base equiv)	
STRATTERA – atomoxetine hcl cap 25 mg (base equiv)	
STRATTERA – atomoxetine hcl cap 40 mg (base equiv)	
STRATTERA – atomoxetine hcl cap 60 mg (base equiv)	
STRATTERA – atomoxetine hcl cap 80 mg (base equiv)	
STRATTERA – atomoxetine hcl cap 100 mg (base equiv)	
VYVANSE – lisdexamfetamine dimesylate cap 20 mg	

Drug Name	Prior Approval
VYVANSE – lisdexamfetamine dimesylate cap 30 mg	
VYVANSE – lisdexamfetamine dimesylate cap 40 mg	
VYVANSE – lisdexamfetamine dimesylate cap 50 mg	
VYVANSE – lisdexamfetamine dimesylate cap 60 mg	
VYVANSE – lisdexamfetamine dimesylate cap 70 mg	
MULTIPLE SCLEROSIS	
BETASERON – interferon beta-1b for inj kit 0.3 mg	•
COPAXONE – glatiramer acetate soln prefilled syringe 40 mg/ml	•
COPAXONE – glatiramer acetate inj kit 20 mg/ml	•
REBIF – interferon beta-1a inj 22 mcg/0.5ml (12mu/ml) (44 mcg/ml)	•
REBIF – interferon beta-1a inj 44 mcg/0.5ml (24mu/ml) (88 mcg/ml)	•
REBIF REBIDOSE – interferon beta-1a inj 22 mcg/0.5ml (12mu/ml) (44 mcg/ml)	•
REBIF REBIDOSE – interferon beta-1a inj 44 mcg/0.5ml (24mu/ml) (88 mcg/ml)	•
REBIF REBIDOSE TITRATION – interferon beta-1a inj 6 x 8.8 mcg/0.2ml & 6 x 22 mcg/0.5ml	•
REBIF TITRATION PACK – interferon beta-1a inj 6 x 8.8 mcg/0.2ml & 6 x 22 mcg/0.5ml	•
TECFIDERA – dimethyl fumarate capsule delayed release 120 mg	•
TECFIDERA – dimethyl fumarate capsule delayed release 240 mg	•
TECFIDERA STARTER PACK – dimethyl fumarate capsule dr starter pack 120 mg & 240 mg	•
TOBACCO CESSATION	
bupropion hcl (smoking deterrent) tab sr 12hr 150 mg (Zyban)	
CHANTIX – varenicline tartrate tab 0.5 mg (base equiv)	
CHANTIX – varenicline tartrate tab 1 mg (base equiv)	
CHANTIX CONTINUING MONTH – varenicline tartrate tab 1 mg (base equiv)	
CHANTIX STARTING MONTH PA – varenicline tartrate tab 0.5 mg x 11 & tab 1 mg x 42 pack	
COMMIT – nicotine polacrilex lozenge 4 mg	
NICODERM CQ – nicotine td patch 24hr 7 mg/24hr	
NICODERM CQ – nicotine td patch 24hr 14 mg/24hr	
NICODERM CQ – nicotine td patch 24hr 21 mg/24hr	
NICORETTE – nicotine polacrilex gum 2 mg	
NICORETTE – nicotine polacrilex gum 4 mg	
NICORETTE – nicotine polacrilex lozenge 2 mg	
NICORETTE – nicotine polacrilex lozenge 4 mg	
NICORETTE MINI – nicotine polacrilex lozenge 2 mg	
NICORETTE MINI – nicotine polacrilex lozenge 4 mg	
NICORETTE REFILL – nicotine polacrilex gum 2 mg	
NICORETTE REFILL – nicotine polacrilex gum 4 mg	
NICORETTE STARTER KIT – nicotine polacrilex gum 2 mg	
NICORETTE STARTER KIT – nicotine polacrilex gum 4 mg	
nicotine polacrilex gum 2 mg	
nicotine polacrilex gum 4 mg	
nicotine polacrilex lozenge 2 mg	
nicotine polacrilex lozenge 4 mg	
nicotine td patch 24hr 14 mg/24hr	
nicotine td patch 24hr 21 mg/24hr	
nicotine td patch 24hr 7 mg/24hr	
NICOTINE TRANSDERMAL SYST – nicotine td patch 24 hr kit 21-14-7 mg/24hr	
NICOTROL INHALER – nicotine inhaler system 10 mg (4 mg delivered)	
NICOTROL NS – nicotine nasal spray 10 mg/ml (0.5 mg/spray)	
OTHER CENTRAL NERVOUS SYSTEM DRUGS	
acamprosate calcium tab delayed release 333 mg (Campral)	
disulfiram tab 250 mg (Antabuse)	

Drug Name	Prior Approval
disulfiram tab 500 mg (Antabuse)	
donepezil hydrochloride orally disintegrating tab 10 mg (Aricept odt)	
donepezil hydrochloride orally disintegrating tab 5 mg (Aricept odt)	
donepezil hydrochloride tab 10 mg (Aricept)	
donepezil hydrochloride tab 5 mg (Aricept)	
galantamine hydrobromide cap sr 24hr 16 mg (Razadyne er)	
galantamine hydrobromide cap sr 24hr 24 mg (Razadyne er)	
galantamine hydrobromide cap sr 24hr 8 mg (Razadyne er)	
galantamine hydrobromide tab 12 mg (Razadyne)	
galantamine hydrobromide tab 4 mg (Razadyne)	
galantamine hydrobromide tab 8 mg (Razadyne)	
NAMENDA – memantine hcl tab 5 mg	
NAMENDA – memantine hcl tab 10 mg	
NAMENDA – memantine hcl oral solution 2 mg/ml	
NAMENDA TITRATION PAK – memantine hcl tab 5 mg (28) & 10 mg (21) titration pak	
NAMENDA XR – memantine hcl cap sr 24hr 7 mg	
NAMENDA XR – memantine hcl cap sr 24hr 14 mg	
NAMENDA XR – memantine hcl cap sr 24hr 21 mg	
NAMENDA XR – memantine hcl cap sr 24hr 28 mg	
NAMENDA XR TITRATION PACK – memantine hcl cap sr 24hr 7 mg & 14 mg & 21 mg & 28 mg pack	
olanzapine-fluoxetine hcl cap 12-25 mg (Symbyax)	
olanzapine-fluoxetine hcl cap 12-50 mg (Symbyax)	
olanzapine-fluoxetine hcl cap 3-25 mg (Symbyax)	
olanzapine-fluoxetine hcl cap 6-25 mg (Symbyax)	
olanzapine-fluoxetine hcl cap 6-50 mg (Symbyax)	
ORAP – pimozide tab 1 mg	
ORAP – pimozide tab 2 mg	
rivastigmine tartrate cap 1.5 mg (Exelon)	
rivastigmine tartrate cap 3 mg (Exelon)	
rivastigmine tartrate cap 4.5 mg (Exelon)	
rivastigmine tartrate cap 6 mg (Exelon)	
XENAZINE – tetrabenazine tab 12.5 mg	•
XENAZINE – tetrabenazine tab 25 mg	•
PAIN RELIEF DRUGS	
NON-NARCOTIC DRUGS	
butalbital-acetaminophen-caffeine cap 50-325-40 mg	
butalbital-acetaminophen-caffeine tab 50-325-40 mg	
butalbital-aspirin-caffeine cap 50-325-40 mg (Fiorinal)	
butalbital-aspirin-caffeine tab 50-325-40 mg	
BUTALBITAL/ASPIRIN/CAFFEI – butalbital-aspirin-caffeine tab 50-325-40 mg	
salsalate tab 500 mg	
salsalate tab 750 mg	
NARCOTIC DRUGS	
acetaminophen w/ codeine soln 120-12 mg/5ml	
acetaminophen w/ codeine tab 300-15 mg (Tylenol/codeine)	
acetaminophen w/ codeine tab 300-30 mg (Tylenol/codeine #3)	
acetaminophen w/ codeine tab 300-60 mg (Tylenol/codeine #4)	
buprenorphine hcl sl tab 2 mg (base equiv)	
buprenorphine hcl sl tab 8 mg (base equiv)	
buprenorphine hcl-naloxone hcl sl tab 2-0.5 mg (base equiv)	
buprenorphine hcl-naloxone hcl sl tab 8-2 mg (base equiv)	
butalbital-aspirin-caff w/ codeine cap 50-325-40-30 mg (Fiorinal/codeine #3)	
CODEINE SULFATE – codeine sulfate tab 15 mg	
CODEINE SULFATE – codeine sulfate tab 30 mg	
CODEINE SULFATE – codeine sulfate tab 60 mg	

Drug Name	Prior Approval
fentanyl citrate lollipop 1200 mcg (Actiq)	
fentanyl citrate lollipop 1600 mcg (Actiq)	
fentanyl citrate lollipop 200 mcg (Actiq)	
fentanyl citrate lollipop 400 mcg (Actiq)	
fentanyl citrate lollipop 600 mcg (Actiq)	
fentanyl citrate lollipop 800 mcg (Actiq)	
fentanyl td patch 72hr 100 mcg/hr (Duragesic)	
fentanyl td patch 72hr 12 mcg/hr (Duragesic)	
fentanyl td patch 72hr 25 mcg/hr (Duragesic)	
fentanyl td patch 72hr 50 mcg/hr (Duragesic)	
fentanyl td patch 72hr 75 mcg/hr (Duragesic)	
hydrocodone-acetaminophen soln 7.5-325 mg/15ml (Hycet)	
hydrocodone-acetaminophen tab 10-325 mg (Norco)	
hydrocodone-acetaminophen tab 5-300 mg (Xodol)	
hydrocodone-acetaminophen tab 5-325 mg (Norco)	
hydrocodone-acetaminophen tab 7.5-325 mg (Norco)	
hydrocodone-ibuprofen tab 10-200 mg (Ibudone)	
hydrocodone-ibuprofen tab 5-200 mg (Reprexain)	
hydrocodone-ibuprofen tab 7.5-200 mg (Vicoprofen)	
HYDROMORPHONE HCL – hydromorphone hcl suppos 3 mg	
hydromorphone hcl liqd 1 mg/ml (Dilaudid)	
hydromorphone hcl tab 2 mg (Dilaudid)	
hydromorphone hcl tab 4 mg (Dilaudid)	
hydromorphone hcl tab 8 mg (Dilaudid)	
methadone hcl conc 10 mg/ml (Methadose)	
methadone hcl soln 10 mg/5ml (Methadone hcl)	
methadone hcl soln 5 mg/5ml (Methadone hcl)	
methadone hcl tab for oral susp 40 mg	
methadone hcl tab 10 mg (Dolophine)	
methadone hcl tab 5 mg (Dolophine hcl)	

Drug Name	Prior Approval
MORPHINE SULFATE – morphine sulfate tab 15 mg	
MORPHINE SULFATE – morphine sulfate tab 30 mg	
MORPHINE SULFATE – morphine sulfate suppos 5 mg	
MORPHINE SULFATE – morphine sulfate suppos 10 mg	
MORPHINE SULFATE – morphine sulfate suppos 20 mg	
MORPHINE SULFATE – morphine sulfate suppos 30 mg	
morphine sulfate (concentrate) oral soln 20 mg/ml	
morphine sulfate oral soln 10 mg/5ml	
morphine sulfate oral soln 20 mg/5ml	
morphine sulfate tab cr 100 mg (Ms contin)	
morphine sulfate tab cr 15 mg (Ms contin)	
morphine sulfate tab cr 200 mg (Ms contin)	
morphine sulfate tab cr 30 mg (Ms contin)	
morphine sulfate tab cr 60 mg (Ms contin)	
OXYCODONE HCL – oxycodone hcl conc 100 mg/5ml (20 mg/ml)	
oxycodone hcl cap 5 mg	
oxycodone hcl conc 100 mg/5ml (20 mg/ml) (Oxycodone hcl)	
oxycodone hcl soln 5 mg/5ml (Oxycodone hcl)	
oxycodone hcl tab 10 mg	
oxycodone hcl tab 15 mg (Roxicodone)	
oxycodone hcl tab 20 mg	
oxycodone hcl tab 30 mg (Roxicodone)	
oxycodone hcl tab 5 mg (Roxicodone)	
oxycodone w/ acetaminophen tab 10-325 mg (Percocet)	
oxycodone w/ acetaminophen tab 5-325 mg (Percocet)	
oxycodone w/ acetaminophen tab 7.5-325 mg (Percocet)	
oxycodone-aspirin tab 4.8355-325 mg (Percodan)	

Drug Name	Prior Approval
OXYCONTIN – oxycodone hcl tab er 12hr deter 10 mg	
OXYCONTIN – oxycodone hcl tab er 12hr deter 15 mg	
OXYCONTIN – oxycodone hcl tab er 12hr deter 20 mg	
OXYCONTIN – oxycodone hcl tab er 12hr deter 30 mg	
OXYCONTIN – oxycodone hcl tab er 12hr deter 40 mg	
OXYCONTIN – oxycodone hcl tab er 12hr deter 60 mg	
OXYCONTIN – oxycodone hcl tab er 12hr deter 80 mg	
ROXICET – oxycodone w/ acetaminophen soln 5-325 mg/5ml	
SUBOXONE – buprenorphine hcl-naloxone hcl sl film 2-0.5 mg (base equiv)	
SUBOXONE – buprenorphine hcl-naloxone hcl sl film 4-1 mg (base equiv)	
SUBOXONE – buprenorphine hcl-naloxone hcl sl film 8-2 mg (base equiv)	
SUBOXONE – buprenorphine hcl-naloxone hcl sl film 12-3 mg (base equiv)	
tramadol hcl tab sr 24hr 100 mg (Ultram er)	
tramadol hcl tab sr 24hr 200 mg (Ultram er)	
tramadol hcl tab sr 24hr 300 mg (Ultram er)	
tramadol hcl tab 50 mg (Ultram)	
tramadol-acetaminophen tab 37.5-325 mg (Ultracet)	
RHEUMATOID AND OSTEOARTHRITIS	
CELEBREX – celecoxib cap 50 mg	
CELEBREX – celecoxib cap 100 mg	
CELEBREX – celecoxib cap 200 mg	
CELEBREX – celecoxib cap 400 mg	
diclofenac potassium tab 50 mg (Cataflam)	
diclofenac sodium tab delayed release 25 mg	
diclofenac sodium tab delayed release 50 mg	

Drug Name	Prior Approval
diclofenac sodium tab delayed release 75 mg	
diclofenac sodium tab sr 24hr 100 mg (Voltaren-xr)	
ENBREL – etanercept subcutaneous inj 50 mg/ml	•
ENBREL – etanercept subcutaneous inj 25 mg/0.5ml	•
ENBREL – etanercept for subcutaneous inj kit 25 mg	•
ENBREL SURECLICK – etanercept subcutaneous inj 50 mg/ml	•
etodolac cap 200 mg	
etodolac cap 300 mg	
etodolac tab sr 24hr 400 mg	
etodolac tab sr 24hr 500 mg	
etodolac tab sr 24hr 600 mg	
etodolac tab 400 mg	
etodolac tab 500 mg	
flurbiprofen tab 100 mg	
flurbiprofen tab 50 mg	
HUMIRA – adalimumab inj kit 20 mg/0.4ml	•
HUMIRA – adalimumab inj kit 40 mg/0.8ml (50 mg/ml)	•
HUMIRA PEN – adalimumab inj kit 40 mg/0.8ml (50 mg/ml)	•
HUMIRA PEN-CROHNS DISEASE – adalimumab inj kit 40 mg/0.8ml (50 mg/ml)	•
HUMIRA PEN-PSORIASIS STAR – adalimumab inj kit 40 mg/0.8ml (50 mg/ml)	•
ibuprofen susp 100 mg/5ml	
ibuprofen tab 400 mg	
ibuprofen tab 600 mg	
ibuprofen tab 800 mg	
ILARIS – canakinumab for inj 180 mg	•
indomethacin cap 25 mg	
indomethacin cap 50 mg	
ketoprofen cap 50 mg	
ketoprofen cap 75 mg	
ketorolac tromethamine tab 10 mg	

Drug Name	Prior Approval
leflunomide tab 10 mg (Arava)	
leflunomide tab 20 mg (Arava)	
meloxicam tab 15 mg (Mobic)	
meloxicam tab 7.5 mg (Mobic)	
nabumetone tab 500 mg	
nabumetone tab 750 mg	
naproxen sodium tab 275 mg (Anaprox)	
naproxen sodium tab 550 mg (Anaprox ds)	
naproxen susp 125 mg/5ml (Naprosyn)	
naproxen tab ec 375 mg (Ec-naprosyn)	
naproxen tab ec 500 mg (Ec-naprosyn)	
naproxen tab 250 mg (Naprosyn)	
naproxen tab 375 mg (Naprosyn)	
naproxen tab 500 mg (Naprosyn)	
oxaprozin tab 600 mg (Daypro)	
piroxicam cap 10 mg (Feldene)	
piroxicam cap 20 mg (Feldene)	
RIDAURA – auranofin cap 3 mg	
sulindac tab 150 mg	
sulindac tab 200 mg	
MIGRAINE HEADACHES	
acetaminophen-isometheptene-dichloral cap 325-65-100 mg	
dihydroergotamine mesylate inj 1 mg/ml (D.h.e. 45)	
IMITREX – sumatriptan nasal spray 5 mg/act	
IMITREX – sumatriptan nasal spray 20 mg/act	
MIGRANAL – dihydroergotamine mesylate nasal spray 4 mg/ml	
naratriptan hcl tab 1 mg (base equiv) (Amerge)	
naratriptan hcl tab 2.5 mg (base equiv) (Amerge)	
rizatriptan benzoate orally disintegrating tab 10 mg (Maxalt-mlt)	
rizatriptan benzoate orally disintegrating tab 5 mg (Maxalt-mlt)	
rizatriptan benzoate tab 10 mg (Maxalt)	

Drug Name	Prior Approval
rizatriptan benzoate tab 5 mg (Maxalt)	
SUMATRIPTAN – sumatriptan nasal spray 5 mg/act	
SUMATRIPTAN – sumatriptan nasal spray 20 mg/act	
SUMATRIPTAN SUCCINATE – sumatriptan succinate solution prefilled syringe 6 mg/0.5ml	
SUMATRIPTAN SUCCINATE – sumatriptan succinate inj 4 mg/0.5ml	
sumatriptan succinate inj 4 mg/0.5ml	
sumatriptan succinate inj 6 mg/0.5ml (Imitrex)	
sumatriptan succinate solution auto-injector 4 mg/0.5ml (Imitrex statdose sys)	
sumatriptan succinate solution auto-injector 6 mg/0.5ml (Imitrex statdose sys)	
sumatriptan succinate solution cartridge 4 mg/0.5ml (Imitrex statdose ref)	
sumatriptan succinate solution cartridge 6 mg/0.5ml (Imitrex statdose ref)	
sumatriptan succinate solution prefilled syringe 6 mg/0.5ml	
sumatriptan succinate tab 100 mg (Imitrex)	
sumatriptan succinate tab 25 mg (Imitrex)	
sumatriptan succinate tab 50 mg (Imitrex)	
zolmitriptan orally disintegrating tab 2.5 mg (Zomig zmt)	
zolmitriptan orally disintegrating tab 5 mg (Zomig zmt)	
zolmitriptan tab 2.5 mg (Zomig)	
zolmitriptan tab 5 mg (Zomig)	
GOUT	
allopurinol tab 100 mg (Zyloprim)	
allopurinol tab 300 mg (Zyloprim)	
colchicine w/ probenecid tab 0.5-500 mg	
COLCRYS – colchicine tab 0.6 mg	
probenecid tab 500 mg	
NEUROMUSCULAR DRUGS	
SEIZURES	

Drug Name	Prior Approval
BANZEL – rufinamide tab 200 mg	•
BANZEL – rufinamide tab 400 mg	•
BANZEL – rufinamide susp 40 mg/ml	•
carbamazepine cap sr 12hr 100 mg (Carbatrol)	
carbamazepine cap sr 12hr 200 mg (Carbatrol)	
carbamazepine cap sr 12hr 300 mg (Carbatrol)	
carbamazepine chew tab 100 mg	
carbamazepine susp 100 mg/5ml (Tegretol)	
carbamazepine tab sr 12hr 200 mg (Tegretol-xr)	
carbamazepine tab sr 12hr 400 mg (Tegretol-xr)	
carbamazepine tab 200 mg (Tegretol)	
clonazepam orally disintegrating tab 0.125 mg	
clonazepam orally disintegrating tab 0.25 mg	
clonazepam orally disintegrating tab 0.5 mg	
clonazepam orally disintegrating tab 1 mg	
clonazepam orally disintegrating tab 2 mg	
clonazepam tab 0.5 mg (Klonopin)	
clonazepam tab 1 mg (Klonopin)	
clonazepam tab 2 mg (Klonopin)	
DIASTAT ACUDIAL – diazepam rectal gel delivery system 10 mg	
DIASTAT ACUDIAL – diazepam rectal gel delivery system 20 mg	
DIASTAT PEDIATRIC – diazepam rectal gel delivery system 2.5 mg	
DILANTIN – phenytoin susp 125 mg/5ml	
DILANTIN – phenytoin sodium extended cap 30 mg	
DILANTIN – phenytoin sodium extended cap 100 mg	
divalproex sodium cap sprinkle 125 mg (Depakote sprinkles)	
divalproex sodium tab delayed release 125 mg (Depakote)	
divalproex sodium tab delayed release 250 mg (Depakote)	
divalproex sodium tab delayed release 500 mg (Depakote)	
divalproex sodium tab sr 24 hr 250 mg (Depakote er)	
divalproex sodium tab sr 24 hr 500 mg (Depakote er)	
ethosuximide cap 250 mg (Zarontin)	
ethosuximide soln 250 mg/5ml (Zarontin)	
felbamate susp 600 mg/5ml (Felbatol)	
felbamate tab 400 mg (Felbatol)	
felbamate tab 600 mg (Felbatol)	
gabapentin cap 100 mg (Neurontin)	
gabapentin cap 300 mg (Neurontin)	
gabapentin cap 400 mg (Neurontin)	
gabapentin oral soln 250 mg/5ml (Neurontin)	
gabapentin tab 600 mg (Neurontin)	
gabapentin tab 800 mg (Neurontin)	
lamotrigine tab chewable dispersible 25 mg (Lamictal chewable di)	
lamotrigine tab chewable dispersible 5 mg (Lamictal chewable di)	
lamotrigine tab 100 mg (Lamictal)	
lamotrigine tab 150 mg (Lamictal)	
lamotrigine tab 200 mg (Lamictal)	
lamotrigine tab 25 mg (Lamictal)	
levetiracetam oral soln 100 mg/ml (Keppra)	
levetiracetam tab sr 24hr 500 mg (Keppra xr)	
levetiracetam tab sr 24hr 750 mg (Keppra xr)	
levetiracetam tab 1000 mg (Keppra)	
levetiracetam tab 250 mg (Keppra)	
levetiracetam tab 500 mg (Keppra)	
levetiracetam tab 750 mg (Keppra)	
oxcarbazepine susp 300 mg/5ml (60 mg/ml) (Trileptal)	
oxcarbazepine tab 150 mg (Trileptal)	
oxcarbazepine tab 300 mg (Trileptal)	
oxcarbazepine tab 600 mg (Trileptal)	
phenytoin chew tab 50 mg (Dilantin infatabs)	

Drug Name	Prior Approval
phenytoin sodium extended cap 100 mg (Dilantin)	
phenytoin sodium extended cap 200 mg (Phenytek)	
phenytoin sodium extended cap 300 mg (Phenytek)	
phenytoin susp 125 mg/5ml (Dilantin)	
primidone tab 250 mg (Mysoline)	
primidone tab 50 mg (Mysoline)	
SABRIL – vigabatrin tab 500 mg	
SABRIL – vigabatrin powd pack 500 mg	
TEGRETOL-XR – carbamazepine tab sr 12hr 100 mg	
topiramate sprinkle cap 15 mg (Topamax sprinkle)	
topiramate sprinkle cap 25 mg (Topamax sprinkle)	
topiramate tab 100 mg (Topamax)	
topiramate tab 200 mg (Topamax)	
topiramate tab 25 mg (Topamax)	
topiramate tab 50 mg (Topamax)	
valproate sodium syrup 250 mg/5ml (base equiv) (Depakene)	
valproic acid cap 250 mg (Depakene)	
zonisamide cap 100 mg (Zonegran)	
zonisamide cap 25 mg (Zonegran)	
zonisamide cap 50 mg	
PARKINSON'S DISEASE	
benztropine mesylate tab 0.5 mg	
benztropine mesylate tab 1 mg	
benztropine mesylate tab 2 mg	
bromocriptine mesylate cap 5 mg (Parlodel)	
bromocriptine mesylate tab 2.5 mg (Parlodel)	
carbidopa & levodopa orally disintegrating tab 10-100 mg	
carbidopa & levodopa orally disintegrating tab 25-100 mg	
carbidopa & levodopa orally disintegrating tab 25-250 mg	

Drug Name	Prior Approval
carbidopa & levodopa tab cr 25-100 mg (Sinemet cr)	
carbidopa & levodopa tab cr 50-200 mg (Sinemet cr)	
carbidopa & levodopa tab 10-100 mg (Sinemet)	
carbidopa & levodopa tab 25-100 mg (Sinemet)	
carbidopa & levodopa tab 25-250 mg (Sinemet)	
CARBIDOPA/LEVODOPA/ENTACA – carbidopa-levodopa-entacapone tabs 12.5-50-200 mg	
CARBIDOPA/LEVODOPA/ENTACA – carbidopa-levodopa-entacapone tabs 18.75-75-200 mg	
CARBIDOPA/LEVODOPA/ENTACA – carbidopa-levodopa-entacapone tabs 25-100-200 mg	
CARBIDOPA/LEVODOPA/ENTACA – carbidopa-levodopa-entacapone tabs 31.25-125-200 mg	
CARBIDOPA/LEVODOPA/ENTACA – carbidopa-levodopa-entacapone tabs 37.5-150-200 mg	
CARBIDOPA/LEVODOPA/ENTACA – carbidopa-levodopa-entacapone tabs 50-200-200 mg	
entacapone tab 200 mg (Comtan)	
pramipexole dihydrochloride tab 0.125 mg (Mirapex)	
pramipexole dihydrochloride tab 0.25 mg (Mirapex)	
pramipexole dihydrochloride tab 0.5 mg (Mirapex)	
pramipexole dihydrochloride tab 0.75 mg (Mirapex)	
pramipexole dihydrochloride tab 1 mg (Mirapex)	
pramipexole dihydrochloride tab 1.5 mg (Mirapex)	
ropinirole hydrochloride tab 0.25 mg (Requip)	
ropinirole hydrochloride tab 0.5 mg (Requip)	
ropinirole hydrochloride tab 1 mg (Requip)	
ropinirole hydrochloride tab 2 mg (Requip)	
ropinirole hydrochloride tab 3 mg (Requip)	
ropinirole hydrochloride tab 4 mg (Requip)	
ropinirole hydrochloride tab 5 mg (Requip)	
selegiline hcl cap 5 mg (Eldepryl)	
selegiline hcl tab 5 mg	

Drug Name	Prior Approval
trihexyphenidyl hcl elixir 0.4 mg/ml	
trihexyphenidyl hcl tab 2 mg	
trihexyphenidyl hcl tab 5 mg	
MUSCLE RELAXANTS	
baclofen tab 10 mg	
baclofen tab 20 mg	
chlorzoxazone tab 500 mg (Parafon forte dsc)	
cyclobenzaprine hcl tab 10 mg	
cyclobenzaprine hcl tab 5 mg	
dantrolene sodium cap 100 mg (Dantrium)	
dantrolene sodium cap 25 mg (Dantrium)	
dantrolene sodium cap 50 mg (Dantrium)	
methocarbamol tab 500 mg (Robaxin)	
methocarbamol tab 750 mg (Robaxin-750)	
orphenadrine citrate tab sr 12hr 100 mg	
ORPHENADRINE COMPOUND DS – orphenadrine w/ aspirin & caffeine tab 50-770-60 mg	
orphenadrine w/ aspirin & caffeine tab 25-385-30 mg	
OTHER NEUROMUSCULAR DRUGS	
MESTINON – pyridostigmine bromide syrup 60 mg/5ml	
MESTINON TIMESPAN – pyridostigmine bromide tab cr 180 mg	
pyridostigmine bromide tab 60 mg (Mestinon)	
riluzole tab 50 mg (Rilutek)	
VITAMINS	
ergocalciferol cap 50000 unit (Drisdol)	
MEPHYTON – phytonadione tab 5 mg	
phytonadione inj 1 mg/0.5ml (2 mg/ml)	
VITAMIN K1 – phytonadione inj 10 mg/ml	
MULTIVITAMINS	
pediatric multivitamins	
pediatric vitamins ADC	
PRENAFIRST – prenatal vit w/ fe fumarate-fa tab 17-1 mg	

Drug Name	Prior Approval
PRENAPLUS – prenatal vit w/ fe fumarate-fa tab 27-1 mg	
PRENATABS FA – prenatal vit w/ fe fumarate-fa tab 29-1 mg	
PRENATABS OBN – prenatal w/o a vit w/ fe carbonyl-fa tab 29-1 mg	
PRENATABS RX – prenatal vit w/ iron carbonyl-fa tab 29-1 mg	
PRENATAL AD – prenatal vit w/ dss-iron carbonyl-fa tab 90-1 mg	
PRENATAL PLUS – prenatal vit w/ fe fumarate-fa tab 27-1 mg	
PRENATAL VITAMINS PLUS – prenatal vit w/ fe fumarate-fa tab 27-1 mg	
PRENATAL 19 – prenatal vit w/ fe fumarate-fa chew tab 29-1 mg	
PRENATAL 19 – prenatal vit w/ dss-fe fumarate-fa tab 29-1 mg	
PRENATAL-U – prenatal w/o a vit w/ fe fumarate-fa cap 106.5-1 mg	
QUFLORA PEDIATRIC – pediatric multiple vitamins w/ fluoride chew tab 0.25 mg	
TRI-VIT/FLUORIDE/IRON – pediatric vitamins acd fluoride & fe drops 0.25-10 mg/ml	
TRINATE – prenatal vit w/ fe fumarate-fa tab 28-1 mg	
VINACAL – prenatal w/o a w/ fe carbonyl-fe gluc-dss-fa tab 27-1mg	
VINACAL B – prenat w/o a w/fecbn-feglu-fa tab 20-1 mg & vit b6 tab pak	
VINATE AZ – prenatal vit w/ fe bisglycinate chelate-fa tab 27-1 mg	
VINATE AZ EXTRA – prenatal vit w/ fe bisglycinate chelate-fa tab 29-1 mg	
VINATE C – prenatal w/o a vit w/ fe fumarate-fa tab 30-1 mg	
VINATE CALCIUM – prenatal vit w/ iron carbonyl-fe gluc-fa tab 27-1 mg	
VINATE CARE – prenatal w/o a vit w/ fe fum-fa tab chew 40-1 mg	

Drug Name	Prior Approval
VINATE DHA – prenat w/o a w/fefum-methylfol-fa-omegas cap 27-1.53 mg	
VINATE DHA RF – prenat w/o a w/fefum-methylfol-omegas cap 27-1.13 mg	
VINATE GT – prenatal vit w/ dss-iron carbonyl-fa tab 90-1 mg	
VINATE IC – prenatal w/o a w/fe fum-fe poly-fa cap 162.115.2-1 mg	
VINATE II – prenatal vit w/ fe bisglycinate chelate-fa tab 29-1 mg	
VINATE M – prenatal vit w/ sel-fe fumarate-fa tab 27-1 mg	
VINATE ONE – prenatal vit w/ fe fumarate-fa tab 60-1 mg	
VINATE PN CARE – prenatal without a w/ fe asparto gly-doc-fa tab 30-1mg	
VINATE ULTRA – prenatal vit w/ dss-iron carbonyl-fa tab 90-1 mg	
MINERALS AND ELECTROLYTES	
FLUOR-A-DAY – sodium fluoride-xylitol chew tab 0.55 (0.25 mg f)-236.79 mg	
FLUOR-A-DAY – sodium fluoride-xylitol chew tab 1.1 (0.5 mg f)-236.79 mg	
FLUOR-A-DAY – sodium fluoride-xylitol chew tab 2.2 (1 mg f)-236.79 mg	
FLURA-DROPS – sodium fluoride soln 0.25 mg/drop f (from 0.55 mg/drop naf)	
K-PHOS – potassium phosphate monobasic tab 500 mg	
pot phos monobasic w/sod phos di & monobas tab 155-852-130mg (K-phos neutral)	
potassium bicarbonate effer tab 25 meq	
potassium chloride cap cr 10 meq (Micro-k)	
potassium chloride cap cr 8 meq (Micro-k)	
potassium chloride microencapsulated crys cr tab 10 meq	
potassium chloride microencapsulated crys cr tab 20 meq	
potassium chloride oral liq 10% (20 meq/15ml)	

Drug Name	Prior Approval
potassium chloride oral liq 20% (40 meq/15ml)	
potassium chloride powder packet 20 meq	
potassium chloride tab cr 10 meq (K-tab)	
potassium chloride tab cr 8 meq (600 mg)	
SODIUM FLUORIDE – sodium fluoride tab 0.5 mg f (from 1.1 mg naf)	
SODIUM FLUORIDE – sodium fluoride tab 1 mg f (from 2.2 mg naf)	
sodium fluoride chew tab 0.25 mg f (from 0.55 mg naf) (Luride)	
sodium fluoride chew tab 0.5 mg f (from 1.1 mg naf) (Luride)	
sodium fluoride chew tab 1 mg f (from 2.2 mg naf) (Luride)	
sodium fluoride soln 0.125 mg/drop f (0.275 mg/drop naf)	
sodium fluoride soln 0.5 mg/ml f (from 1.1 mg/ml naf) (Luride)	
BLOOD MODIFYING DRUGS	
AGGRENOX – aspirin-dipyridamole cap sr 12hr 25-200 mg	
aminocaproic acid syrup 25% (Amicar)	
aminocaproic acid tab 500 mg (Amicar)	
anagrelide hcl cap 0.5 mg (Agrylin)	
anagrelide hcl cap 1 mg	
ARANESP ALBUMIN FREE – darbepoetin alfa-polysorbate 80 soln inj 25 mcg/ml	
ARANESP ALBUMIN FREE – darbepoetin alfa-polysorbate 80 soln inj 25 mcg/0.42ml	
ARANESP ALBUMIN FREE – darbepoetin alfa-polysorbate 80 soln inj 40 mcg/ml	
ARANESP ALBUMIN FREE – darbepoetin alfa-polysorbate 80 soln inj 40 mcg/0.4ml	
ARANESP ALBUMIN FREE – darbepoetin alfa-polysorbate 80 soln inj 60 mcg/ml	
ARANESP ALBUMIN FREE – darbepoetin alfa-polysorbate 80 soln inj 60 mcg/0.3ml	
ARANESP ALBUMIN FREE – darbepoetin alfa-polysorbate 80 soln inj 100 mcg/ml	

Drug Name	Prior Approval
ARANESP ALBUMIN FREE – darbepoetin alfa-polysorbate 80 soln inj 100 mcg/0.5ml	
ARANESP ALBUMIN FREE – darbepoetin alfa-polysorbate 80 soln inj 150 mcg/0.75ml	
ARANESP ALBUMIN FREE – darbepoetin alfa-polysorbate 80 soln inj 150 mcg/0.3ml	
ARANESP ALBUMIN FREE – darbepoetin alfa-polysorbate 80 soln inj 200 mcg/ml	
ARANESP ALBUMIN FREE – darbepoetin alfa-polysorbate 80 soln inj 200 mcg/0.4ml	
ARANESP ALBUMIN FREE – darbepoetin alfa-polysorbate 80 soln inj 300 mcg/ml	
ARANESP ALBUMIN FREE – darbepoetin alfa-polysorbate 80 soln inj 300 mcg/0.6ml	
ARANESP ALBUMIN FREE – darbepoetin alfa-polysorbate 80 soln inj 500 mcg/ml	
cilostazol tab 100 mg (Pletal)	
cilostazol tab 50 mg (Pletal)	
clopidogrel bisulfate tab 300 mg (base equiv) (Plavix)	
clopidogrel bisulfate tab 75 mg (base equiv) (Plavix)	
cyanocobalamin inj 1000 mcg/ml	
dipyridamole tab 25 mg (Persantine)	
dipyridamole tab 50 mg (Persantine)	
dipyridamole tab 75 mg (Persantine)	
EFFIENT – prasugrel hcl tab 5 mg (base equiv)	
EFFIENT – prasugrel hcl tab 10 mg (base equiv)	
enoxaparin sodium inj 100 mg/ml (Lovenox)	
enoxaparin sodium inj 120 mg/0.8ml (Lovenox)	
enoxaparin sodium inj 150 mg/ml (Lovenox)	
enoxaparin sodium inj 30 mg/0.3ml (Lovenox)	
enoxaparin sodium inj 300 mg/3ml (Lovenox)	
enoxaparin sodium inj 40 mg/0.4ml (Lovenox)	
enoxaparin sodium inj 60 mg/0.6ml (Lovenox)	
enoxaparin sodium inj 80 mg/0.8ml (Lovenox)	
FIRAZYR – icatibant acetate inj 30 mg/3ml (base equivalent)	

Drug Name	Prior Approval
folic acid tab 1 mg	
fondaparinux sodium inj 10 mg/0.8ml (Arixtra)	
fondaparinux sodium inj 2.5 mg/0.5ml (Arixtra)	
fondaparinux sodium inj 5 mg/0.4ml (Arixtra)	
fondaparinux sodium inj 7.5 mg/0.6ml (Arixtra)	
GRANIX – tbo-filgrastim soln prefilled syringe 300 mcg/0.5ml	
GRANIX – tbo-filgrastim soln prefilled syringe 480 mcg/0.8ml	
LEUKINE – sargramostim inj 500 mcg/ml	
NEULASTA – pegfilgrastim inj 6 mg/0.6ml	
NEUMEGA – oprelvekin for inj 5 mg	
NEUPOGEN – filgrastim inj 300 mcg/ml	
NEUPOGEN – filgrastim inj 480 mcg/1.6ml (300 mcg/ml)	
NEUPOGEN – filgrastim inj 300 mcg/0.5ml (600 mcg/ml)	
NEUPOGEN – filgrastim inj 480 mcg/0.8ml (600 mcg/ml)	
NPLATE – romiplostim for inj 250 mcg	•
NPLATE – romiplostim for inj 500 mcg	•
pentoxifylline tab cr 400 mg	
PROCRIT – epoetin alfa inj 2000 unit/ml	
PROCRIT – epoetin alfa inj 3000 unit/ml	
PROCRIT – epoetin alfa inj 4000 unit/ml	
PROCRIT – epoetin alfa inj 10000 unit/ml	
PROCRIT – epoetin alfa inj 20000 unit/ml	
PROCRIT – epoetin alfa inj 40000 unit/ml	
PROMACTA – eltrombopag olamine tab 12.5 mg (base equiv)	•
PROMACTA – eltrombopag olamine tab 25 mg (base equiv)	•
PROMACTA – eltrombopag olamine tab 50 mg (base equiv)	•
PROMACTA – eltrombopag olamine tab 75 mg (base equiv)	•
warfarin sodium tab 1 mg (Coumadin)	

Drug Name	Prior Approval
warfarin sodium tab 10 mg (Coumadin)	
warfarin sodium tab 2 mg (Coumadin)	
warfarin sodium tab 2.5 mg (Coumadin)	
warfarin sodium tab 3 mg (Coumadin)	
warfarin sodium tab 4 mg (Coumadin)	
warfarin sodium tab 5 mg (Coumadin)	
warfarin sodium tab 6 mg (Coumadin)	
warfarin sodium tab 7.5 mg (Coumadin)	
XARELTO – rivaroxaban tab 10 mg	
XARELTO – rivaroxaban tab 15 mg	
XARELTO – rivaroxaban tab 20 mg	
TOPICAL PRODUCTS	
EYE	
Anti-infectives	
BACITRACIN – bacitracin ophth oint 500 unit/gm	
bacitracin-polymyxin b ophth oint	
CILOXAN – ciprofloxacin hcl ophth oint 0.3%	
ciprofloxacin hcl ophth soln 0.3% (Ciloxan)	
erythromycin ophth oint 5 mg/gm	
gentamicin sulfate ophth oint 0.3%	
gentamicin sulfate ophth soln 0.3% (Garamycin)	
NATACYN – natamycin ophth susp 5%	
neomycin-bacitrac zn-polymyx 5(3.5)mg-400unt-10000unt op oin	
neomycin-polymy-gramicid op sol 1.75-10000-0.025mg-unt-mg/ml (Neosporin)	
ofloxacin ophth soln 0.3% (Ocuflox)	
polymyxin b-trimethoprim ophth soln 10000 unit/ml-0.1% (Polytrim)	
sulfacetamide sodium ophth soln 10% (Bleph-10)	
tobramycin ophth soln 0.3% (Tobrex)	
trifluridine ophth soln 1% (Viroptic)	
VIGAMOX – moxifloxacin hcl ophth soln 0.5% (base equiv)	
Steroids and Combination Products	
ALREX – loteprednol etabonate ophth susp 0.2%	

Drug Name	Prior Approval
bacitracin-polymyxin-neomycin-hc ophth oint 1%	
BLEPHAMIDE – sulfacetamide sodium-prednisolone ophth susp 10-0.2%	
BLEPHAMIDE S.O.P. – sulfacetamide sodium-prednisolone ophth oint 10-0.2%	
fluorometholone ophth susp 0.1% (Fml liquifilm)	
FML – fluorometholone ophth oint 0.1%	
LOTEMAX – loteprednol etabonate ophth susp 0.5%	
LOTEMAX – loteprednol etabonate ophth gel 0.5%	
LOTEMAX – loteprednol etabonate ophth oint 0.5%	
neomycin-polymyxin-dexamethasone ophth oint 0.1% (Maxitrol)	
neomycin-polymyxin-dexamethasone ophth susp 0.1% (Maxitrol)	
prednisolone acetate ophth susp 1% (Pred forte)	
PREDNISOLONE SODIUM PHOSP – prednisolone sodium phosphate ophth soln 1%	
sulfacetamide sodium-prednisolone ophth soln 10-0.23(0.25)%	
TOBRADEX – tobramycin-dexamethasone ophth oint 0.3-0.1%	
tobramycin-dexamethasone ophth susp 0.3-0.1% (Tobradex)	
ZYLET – loteprednol etabonate-tobramycin ophth susp 0.5-0.3%	
Glaucoma	
ALPHAGAN P – brimonidine tartrate ophth soln 0.1%	
AZOPT – brinzolamide ophth susp 1%	
BETOPTIC-S – betaxolol hcl ophth susp 0.25%	
brimonidine tartrate ophth soln 0.15% (Alphagan p)	
brimonidine tartrate ophth soln 0.2%	
carteolol hcl ophth soln 1%	
dorzolamide hcl ophth soln 2% (Trusopt)	
dorzolamide hcl-timolol maleate ophth soln 22.3-6.8 mg/ml (Cosopt)	
latanoprost ophth soln 0.005% (Xalatan)	

Drug Name	Prior Approval
LEVOBUNOLOL HCL – levobunolol hcl ophth soln 0.25%	
levobunolol hcl ophth soln 0.5% (Betagan)	
LUMIGAN – bimatoprost ophth soln 0.01%	
LUMIGAN – bimatoprost ophth soln 0.03%	
METIPRANOLOL – metipranolol ophth soln 0.3%	
pilocarpine hcl ophth soln 1% (Isopto carpine)	
pilocarpine hcl ophth soln 2% (Isopto carpine)	
pilocarpine hcl ophth soln 4% (Isopto carpine)	
SIMBRINZA – brinzolamide-brimonidine tartrate ophth susp 1-0.2%	
timolol maleate ophth gel forming soln 0.25% (Timoptic-xe)	
timolol maleate ophth gel forming soln 0.5% (Timoptic-xe)	
timolol maleate ophth soln 0.25% (Timoptic)	
timolol maleate ophth soln 0.5% (Timoptic)	
TRAVATAN Z – travoprost ophth soln 0.004% (benzalkonium free) (bak free)	
Other Eye Products	
ATROPINE SULFATE – atropine sulfate ophth oint 1%	
atropine sulfate ophth soln 1% (Isopto atropine)	
azelastine hcl ophth soln 0.05% (Optivar)	
cromolyn sodium ophth soln 4%	
cyclopentolate hcl ophth soln 1% (Cyclogyl)	
diclofenac sodium ophth soln 0.1%	
flurbiprofen sodium ophth soln 0.03% (Ocufen)	
homatropine hbr ophth soln 5% (Isopto homatropine)	
ketorolac tromethamine ophth soln 0.4% (Acular ls)	
ketorolac tromethamine ophth soln 0.5% (Acular)	
PATADAY – olopatadine hcl ophth soln 0.2%	
EAR	
acetic acid otic soln 2%	
antipyrine-benzocaine otic soln 54-14 mg/ml (5.4-1.4%)	
CIPRO HC – ciprofloxacin-hydrocortisone otic susp 0.2-1%	
CIPRODEX – ciprofloxacin-dexamethasone otic susp 0.3-0.1%	
neomycin-polymyxin-hc otic soln 1% (Cortisporin)	
neomycin-polymyxin-hc otic susp 3.5 mg/ml-10000 unit/ml-1%	
ofloxacin otic soln 0.3%	
MOUTH AND THROAT (LOCAL)	
chlorhexidine gluconate soln 0.12% (Peridex)	
lidocaine hcl viscous soln 2%	
nystatin susp 100000 unit/ml	
pilocarpine hcl tab 5 mg (Salagen)	
pilocarpine hcl tab 7.5 mg (Salagen)	
sodium fluoride cream 1.1% (Prevident 5000 plus)	
sodium fluoride gel 1.1% (0.5% f) (Prevident fluoride)	
triamcinolone acetonide dental paste 0.1%	
ANORECTAL	
hydrocortisone acetate suppos 25 mg (Anusol-hc)	
hydrocortisone enema 100 mg/60ml (Cortenema)	
hydrocortisone rectal cream 2.5% (Anusol-hc)	
SKIN CONDITIONS/PRODUCTS	
Acne	
adapalene cream 0.1% (Differin)	•
adapalene gel 0.1% (Differin)	•
benzoyl peroxide-erythromycin gel 5-3% (Benzamycin)	
CLARAVIS – isotretinoin cap 30 mg	
clindamycin phosphate gel 1% (Cleocin-t)	
clindamycin phosphate lotion 1% (Cleocin-t)	
clindamycin phosphate soln 1% (Cleocin-t)	
clindamycin phosphate swab 1% (Cleocin-t)	
clindamycin phosphate-benzoyl peroxide gel 1-5% (Benzaclin)	

Drug Name	Prior Approval
erythromycin gel 2% (Erygel)	
erythromycin pads 2%	
erythromycin soln 2%	
FINACEA – azelaic acid gel 15%	
isotretinoin cap 10 mg	
isotretinoin cap 20 mg	
isotretinoin cap 40 mg	
metronidazole cream 0.75% (Metrocream)	
metronidazole gel 0.75%	
metronidazole gel 1% (Metrogel)	
metronidazole lotion 0.75% (Metrolotion)	
SODIUM SULFACETAMIDE/SULF – sulfacetamide sodium w/ sulfur susp 10-5%	
sulfacetamide sodium lotion 10% (acne) (Klaron)	
sulfacetamide sodium w/ sulfur cream 10-5%	
sulfacetamide sodium w/ sulfur emulsion 10-5%	
sulfacetamide sodium w/ sulfur lotion 10-5%	
TAZORAC – tazarotene cream 0.05%	•
TAZORAC – tazarotene cream 0.1%	•
TAZORAC – tazarotene gel 0.05%	•
TAZORAC – tazarotene gel 0.1%	•
tretinoin cream 0.025% (Retin-a)	•
tretinoin cream 0.05% (Retin-a)	•
tretinoin cream 0.1% (Retin-a)	•
tretinoin gel 0.01% (Retin-a)	•
tretinoin gel 0.025% (Retin-a)	•
tretinoin microsphere gel 0.04% (Retin-a micro)	•
tretinoin microsphere gel 0.1% (Retin-a micro)	•
Anti-infectives	
ciclopirox gel 0.77% (Loprox)	
ciclopirox olamine cream 0.77% (base equiv)	
ciclopirox olamine susp 0.77% (base equiv)	
ciclopirox shampoo 1% (Loprox shampoo)	
clotrimazole w/ betamethasone cream 1-0.05% (Lotrisone)	
clotrimazole w/ betamethasone lotion 1-0.05%	
econazole nitrate cream 1%	
GENTAMICIN SULFATE – gentamicin sulfate cream 0.1%	
GENTAMICIN SULFATE – gentamicin sulfate oint 0.1%	
ketoconazole cream 2%	
ketoconazole shampoo 2% (Nizoral)	
mupirocin calcium cream 2% (Bactroban)	
mupirocin oint 2% (Bactroban)	
nystatin cream 100000 unit/gm	
nystatin oint 100000 unit/gm	
nystatin topical powder	
silver sulfadiazine cream 1% (Silvadene)	
VOLTAREN – diclofenac sodium gel 1%	
Corticosteroids	
alclometasone dipropionate cream 0.05% (Aclovate)	
alclometasone dipropionate oint 0.05%	
amcinonide cream 0.1%	
betamethasone dipropionate augmented cream 0.05% (Diprolene af)	
betamethasone dipropionate augmented gel 0.05%	
betamethasone dipropionate augmented lotion 0.05% (Diprolene)	
betamethasone dipropionate augmented oint 0.05% (Diprolene)	
betamethasone dipropionate cream 0.05%	
betamethasone dipropionate lotion 0.05%	
betamethasone dipropionate oint 0.05%	
betamethasone valerate cream 0.1%	
betamethasone valerate lotion 0.1%	
betamethasone valerate oint 0.1%	
clobetasol propionate cream 0.05% (Temovate)	
clobetasol propionate emollient base cream 0.05% (Temovate e)	

Drug Name	Prior Approval
clobetasol propionate foam 0.05% (Olux)	
clobetasol propionate gel 0.05% (Temovate)	
clobetasol propionate oint 0.05% (Temovate)	
clobetasol propionate soln 0.05% (Temovate)	
desonide cream 0.05% (Desowen)	
desonide lotion 0.05% (Desowen)	
desonide oint 0.05% (Desowen)	
DESOXIMETASONE – desoximetasone cream 0.05%	
desoximetasone cream 0.25% (Topicort)	
desoximetasone gel 0.05% (Topicort)	
desoximetasone oint 0.25% (Topicort)	
DIFLORASONE DIACETATE – diflorasone diacetate cream 0.05%	
diflorasone diacetate oint 0.05%	
fluocinolone acetonide cream 0.01%	
fluocinolone acetonide cream 0.025% (Synalar)	
fluocinolone acetonide oint 0.025% (Synalar)	
fluocinolone acetonide soln 0.01% (Synalar)	
fluocinonide cream 0.05%	
fluocinonide emulsified base cream 0.05%	
fluocinonide gel 0.05%	
fluocinonide oint 0.05%	
fluocinonide soln 0.05%	
fluticasone propionate cream 0.05% (Cutivate)	
fluticasone propionate oint 0.005% (Cutivate)	
halobetasol propionate cream 0.05% (Ultravate)	
halobetasol propionate oint 0.05% (Ultravate)	
hydrocortisone cream 2.5%	
hydrocortisone lotion 2.5%	
hydrocortisone oint 2.5%	
hydrocortisone valerate cream 0.2%	
hydrocortisone valerate oint 0.2% (Westcort)	
mometasone furoate cream 0.1% (Elocon)	
mometasone furoate oint 0.1% (Elocon)	

Drug Name	Prior Approval
mometasone furoate solution 0.1% (lotion) (Elocon)	
nystatin-triamcinolone cream 100000-0.1 unit/gm-%	
nystatin-triamcinolone oint 100000-0.1 unit/gm-%	
TRIAMCINOLONE ACETONIDE – triamcinolone acetonide oint 0.5%	
triamcinolone acetonide cream 0.025%	
triamcinolone acetonide cream 0.1%	
triamcinolone acetonide cream 0.5%	
triamcinolone acetonide lotion 0.025%	
triamcinolone acetonide lotion 0.1%	
triamcinolone acetonide oint 0.025%	
triamcinolone acetonide oint 0.1%	
Other Products	
acitretin cap 10 mg (Soriatane)	
acitretin cap 17.5 mg (Soriatane)	
acitretin cap 25 mg (Soriatane)	
aluminum chloride soln 20% (Drysol)	
calcipotriene cream 0.005% (Dovonex)	
calcipotriene soln 0.005% (50 mcg/ml)	
CARAC – fluorouracil cream 0.5%	
diclofenac sodium (actinic keratoses) gel 3% (Solaraze)	
ELIDEL – pimecrolimus cream 1%	
FLUOROPLEX – fluorouracil cream 1%	
fluorouracil cream 5% (Efudex)	
fluorouracil soln 2%	
fluorouracil soln 5%	
imiquimod cream 5% (Aldara)	
lidocaine-prilocaine cream 2.5-2.5% (Emla)	
LIDOCAINE/PRILOCAINE – lidocaine-prilocaine kit 2.5-2.5%	
lindane lotion 1%	
lindane shampoo 1%	
malathion lotion 0.5% (Ovide)	

Drug Name	Prior Approval
OXSORALEN ULTRA – methoxsalen rapid cap 10 mg	
permethrin cream 5% (Elimite)	
PICATO – ingenol mebutate gel 0.015%	
PICATO – ingenol mebutate gel 0.05%	
podofilox soln 0.5% (Condylox)	
PROTOPIC – tacrolimus oint 0.03%	
PROTOPIC – tacrolimus oint 0.1%	
selenium sulfide lotion 2.5%	
SYNERA – lidocaine-tetracaine topical patch 70-70 mg	
ULESFIA – benzyl alcohol lotion 5%	
VALCHLOR – mechlorethamine hcl gel 0.016% (base equivalent)	
XERAC AC – aluminum chloride in alcohol solution 6.25%	
ZYCLARA – imiquimod cream 3.75%	
ZYCLARA PUMP – imiquimod cream 2.5%	
ZYCLARA PUMP – imiquimod cream 3.75%	
MISCELLANEOUS CATEGORIES	
DIABETIC SUPPLIES	
CALIBRATION LIQUID – various	
INSULIN PEN NEEDLES – NOVOFINE, NOVOTWIST; various	
INSULIN SYRINGES – various	
LANCETS – various	
TEST STRIPS – LIFESCAN ONETOUCH BASIC/ PROFILE, BASIC/PROFILE/ONETOUCH II, FASTTAKE, SURESTEP, ULTRA BLUE, VERIO, VERIO IQ	
TEST STRIPS – ROCHE ACCU-CHEK ACTIVE, AVIVA, AVIVA PLUS, COMFORT CURVE, COMPACT, COMPACT PLUS, SMARTVIEW	
TEST STRIPS – various	
MEDICAL DEVICES	
INHALER ASSIST DEVICES – spacers	
MISCELLANEOUS DRUGS	

Drug Name	Prior Approval
azathioprine tab 50 mg (Imuran)	
CELLCEPT – mycophenolate mofetil for oral susp 200 mg/ml	
CHEMET – succimer cap 100 mg	
CUPRIMINE – penicillamine cap 250 mg	
cyclosporine cap 100 mg (Sandimmune)	
cyclosporine cap 25 mg (Sandimmune)	
cyclosporine modified cap 100 mg (Neoral)	
cyclosporine modified cap 25 mg (Neoral)	
cyclosporine modified oral soln 100 mg/ml (Neoral)	
EXJADE – deferasirox tab for oral susp 125 mg	
EXJADE – deferasirox tab for oral susp 250 mg	
EXJADE – deferasirox tab for oral susp 500 mg	
mycophenolate mofetil cap 250 mg (Cellcept)	
mycophenolate mofetil tab 500 mg (Cellcept)	
mycophenolate sodium tab dr 180 mg (mycophenolic acid equiv) (Myfortic)	
mycophenolate sodium tab dr 360 mg (mycophenolic acid equiv) (Myfortic)	
naltrexone hcl tab 50 mg (Revia)	
RAPAMUNE – sirolimus tab 1 mg	
RAPAMUNE – sirolimus tab 2 mg	
RAPAMUNE – sirolimus oral soln 1 mg/ml	
REVLIMID – lenalidomide caps 2.5 mg	•
REVLIMID – lenalidomide cap 5 mg	•
REVLIMID – lenalidomide cap 10 mg	•
REVLIMID – lenalidomide cap 15 mg	•
REVLIMID – lenalidomide cap 20 mg	•
REVLIMID – lenalidomide cap 25 mg	•
sirolimus tab 0.5 mg (Rapamune)	
sodium polystyrene sulfonate oral susp 15 gm/60ml (Sps)	
sodium polystyrene sulfonate powder (Kayexalate)	
sodium polystyrene sulfonate rectal susp 30 gm/120ml	

Drug Name	Prior Approval
tacrolimus cap 0.5 mg (Prograf)	
tacrolimus cap 1 mg (Prograf)	
tacrolimus cap 5 mg (Prograf)	
THALOMID – thalidomide cap 50 mg	•
THALOMID – thalidomide cap 100 mg	•
THALOMID – thalidomide cap 150 mg	•
THALOMID – thalidomide cap 200 mg	•
ZORTRESS – everolimus tab 0.25 mg	
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amitriptyline hcl tab 10 mg....27
amitriptyline hcl tab 150 mg....27
amitriptyline hcl tab 25 mg....27
amitriptyline hcl tab 50 mg....27
amitriptyline hcl tab 75 mg....27
amlodipine besylate-atorvastatin calcium tab 10-10 mg (Caduet)....18
amlodipine besylate-atorvastatin calcium tab 10-20 mg (Caduet)....18
amlodipine besylate-atorvastatin calcium tab 10-40 mg (Caduet)....18
amlodipine besylate-atorvastatin calcium tab 10-80 mg (Caduet)....18
amlodipine besylate-atorvastatin calcium tab 2.5-10 mg (Caduet)....18
amlodipine besylate-atorvastatin calcium tab 2.5-20 mg (Caduet)....18
amlodipine besylate-atorvastatin calcium tab 2.5-40 mg (Caduet)....18
amlodipine besylate-atorvastatin calcium tab 5-10 mg (Caduet)....18
amlodipine besylate-atorvastatin calcium tab 5-20 mg (Caduet)....18
amlodipine besylate-atorvastatin calcium tab 5-40 mg (Caduet)....18
amlodipine besylate-atorvastatin calcium tab 5-80 mg (Caduet)....18
amlodipine besylate-benazepril hcl cap 10-20 mg (Lotrel)....18
amlodipine besylate-benazepril hcl cap 10-40 mg (Lotrel)....18
amlodipine besylate-benazepril hcl cap 2.5-10 mg (Lotrel)....18
amlodipine besylate-benazepril hcl cap 5-10 mg (Lotrel)....18
amlodipine besylate-benazepril hcl cap 5-20 mg (Lotrel)....18
amlodipine besylate-benazepril hcl cap 5-40 mg (Lotrel)....18
amlodipine besylate tab 10 mg (Norvasc)....17
amlodipine besylate tab 2.5 mg (Norvasc)....17
amlodipine besylate tab 5 mg (Norvasc)....18
amoxicillin (trihydrate) cap 250 mg....1
amoxicillin (trihydrate) cap 500 mg....1
amoxicillin (trihydrate) for susp 125 mg/5ml....1
amoxicillin (trihydrate) for susp 200 mg/5ml....1
amoxicillin (trihydrate) for susp 250 mg/5ml....1
amoxicillin (trihydrate) for susp 400 mg/5ml....1
amoxicillin (trihydrate) tab 500 mg....1
amoxicillin (trihydrate) tab 875 mg....1
amoxicillin & k clavulanate chew tab 200-28.5 mg....1
amoxicillin & k clavulanate chew tab 400-57 mg....1
amoxicillin & k clavulanate for susp 200-28.5 mg/5ml 1
amoxicillin & k clavulanate for susp 250-62.5 mg/5ml (Augmentin)....1
amoxicillin & k clavulanate for susp 400-57 mg/5ml... 1
amoxicillin & k clavulanate for susp 600-42.9 mg/5ml (Augmentin es-600)....1
amoxicillin & k clavulanate tab 250-125 mg....1
amoxicillin & k clavulanate tab 500-125 mg (Augmentin)....1
amoxicillin & k clavulanate tab 875-125 mg (Augmentin)....1
amoxicillin & k clavulanate tab sr 12hr 1000-62.5 mg (Augmentin xr)....1
AMOXICILLIN – amoxicillin (trihydrate) chew tab 125 mg 1
AMOXICILLIN – amoxicillin (trihydrate) chew tab 250 mg 1
amoxicillin cap-clarithro tab-lansopraz cap dr therapy pack (Prevpac)....24
amphetamine-dextroamphetamine cap sr 24hr 10 mg (Adderall xr)....31
amphetamine-dextroamphetamine cap sr 24hr 15 mg (Adderall xr)....31
amphetamine-dextroamphetamine cap sr 24hr 20 mg (Adderall xr)....31
amphetamine-dextroamphetamine cap sr 24hr 25 mg (Adderall xr)....31
amphetamine-dextroamphetamine cap sr 24hr 30 mg (Adderall xr)....31
amphetamine-dextroamphetamine cap sr 24hr 5 mg (Adderall xr)....31
amphetamine-dextroamphetamine tab 10 mg (Adderall)....31
amphetamine-dextroamphetamine tab 12.5 mg (Adderall)....31
amphetamine-dextroamphetamine tab 15 mg (Adderall)....31
amphetamine-dextroamphetamine tab 20 mg (Adderall)....31
amphetamine-dextroamphetamine tab 30 mg (Adderall)....31
amphetamine-dextroamphetamine tab 5 mg (Adderall)....31
amphetamine-dextroamphetamine tab 7.5 mg (Adderall)....31
AMPICILLIN – ampicillin for susp 125 mg/5ml....1
AMPICILLIN – ampicillin for susp 250 mg/5ml....1
ampicillin cap 250 mg....1
ampicillin cap 500 mg....1
anagrelide hcl cap 0.5 mg (Agrylin)....40
anagrelide hcl cap 1 mg....40
anastrozole tab 1 mg (Arimidex)....6
ANDRODERM – testosterone td patch 24hr 2 mg/24hr... 9
ANDRODERM – testosterone td patch 24hr 4 mg/24hr... 9
ANDROGEL PUMP – testosterone td gel 12.5 mg/act (1%)....9
ANDROGEL PUMP – testosterone td gel 20.25 mg/act (1.62%)....9

ANDROGEL – testosterone td gel 20.25 mg/1.25gm (1.62%)....9
ANDROGEL – testosterone td gel 25 mg/2.5gm (1%)....9
ANDROGEL – testosterone td gel 40.5 mg/2.5gm (1.62%)....9
ANDROGEL – testosterone td gel 50 mg/5gm (1%)....9
ANDROXY – fluoxymesterone tab 10 mg....9
ANORO ELLIPTA – umeclidinium-vilanterol aero powd ba 62.5-25 mcg/inh....23
antipyrine-benzocaine otic soln 54-14 mg/ml (5.4-1.4%)....43
APTIVUS – tipranavir cap 250 mg....4
APTIVUS – tipranavir oral soln 100 mg/ml....4
ARANESP ALBUMIN FREE – darbepoetin alfa-polysorbate 80 soln inj 100 mcg/0.5ml....41
ARANESP ALBUMIN FREE – darbepoetin alfa-polysorbate 80 soln inj 100 mcg/ml....40
ARANESP ALBUMIN FREE – darbepoetin alfa-polysorbate 80 soln inj 150 mcg/0.3ml....41
ARANESP ALBUMIN FREE – darbepoetin alfa-polysorbate 80 soln inj 150 mcg/0.75ml....41
ARANESP ALBUMIN FREE – darbepoetin alfa-polysorbate 80 soln inj 200 mcg/0.4ml....41
ARANESP ALBUMIN FREE – darbepoetin alfa-polysorbate 80 soln inj 200 mcg/ml....41
ARANESP ALBUMIN FREE – darbepoetin alfa-polysorbate 80 soln inj 25 mcg/0.42ml....40
ARANESP ALBUMIN FREE – darbepoetin alfa-polysorbate 80 soln inj 25 mcg/ml....40
ARANESP ALBUMIN FREE – darbepoetin alfa-polysorbate 80 soln inj 300 mcg/0.6ml....41
ARANESP ALBUMIN FREE – darbepoetin alfa-polysorbate 80 soln inj 300 mcg/ml....41
ARANESP ALBUMIN FREE – darbepoetin alfa-polysorbate 80 soln inj 40 mcg/0.4ml....40
ARANESP ALBUMIN FREE – darbepoetin alfa-polysorbate 80 soln inj 40 mcg/ml....40
ARANESP ALBUMIN FREE – darbepoetin alfa-polysorbate 80 soln inj 500 mcg/ml....41
ARANESP ALBUMIN FREE – darbepoetin alfa-polysorbate 80 soln inj 60 mcg/0.3ml....40
ARANESP ALBUMIN FREE – darbepoetin alfa-polysorbate 80 soln inj 60 mcg/ml....40
ASACOL HD – mesalamine tab delayed release 800 mg....25
ASACOL – mesalamine tab delayed release 400 mg....25
ASMANEX 120 METERED DOSES – mometasone furoate inhal powd 220 mcg/inh (breath activated)....23
ASMANEX 14 METERED DOSES – mometasone furoate inhal powd 220 mcg/inh (breath activated)....23
ASMANEX 30 METERED DOSES – mometasone furoate inhal powd 110 mcg/inh (breath activated)....23
ASMANEX 30 METERED DOSES – mometasone furoate inhal powd 220 mcg/inh (breath activated)....23
ASMANEX 60 METERED DOSES – mometasone furoate inhal powd 220 mcg/inh (breath activated)....23
ASTEPRO – azelastine hcl nasal spray 0.15% (205.5 mcg/spray)....22
atenolol & chlorthalidone tab 100-25 mg (Tenoretic 100)....17
atenolol & chlorthalidone tab 50-25 mg (Tenoretic 50)....17
atenolol tab 100 mg (Tenormin)....17
atenolol tab 25 mg (Tenormin)....17
atenolol tab 50 mg (Tenormin)....17
atorvastatin calcium tab 10 mg (base equivalent) (Lipitor)....19
atorvastatin calcium tab 20 mg (base equivalent) (Lipitor)....19
atorvastatin calcium tab 40 mg (base equivalent) (Lipitor)....19
atorvastatin calcium tab 80 mg (base equivalent) (Lipitor)....19
ATOVAQUONE/PROGUANIL HCL – atovaquone-proguanil hcl tab 62.5-25 mg....5
atovaquone-proguanil hcl tab 250-100 mg (Malarone)5
ATRIPLA – efavirenz-emtricitabine-tenofovir df tab 600-200-300 mg....4
ATROPINE SULFATE – atropine sulfate ophth oint 1%.43
atropine sulfate ophth soln 1% (Isopto atropine)....43
ATROVENT HFA – ipratropium bromide hfa inhal aerosol 17 mcg/act....23
AUGMENTIN – amoxicillin & k clavulanate for susp 125-31.25 mg/5ml....1
azathioprine tab 50 mg (Imuran)....46
azelastine hcl nasal spray 0.15% (205.5 mcg/spray) (Astepro)....22
azelastine hcl nasal spray 137 mcg/spray (1 mg/ml).22
azelastine hcl ophth soln 0.05% (Optivar)....43
AZITHROMYCIN – azithromycin powd pack for susp 1 gm....2
azithromycin for susp 100 mg/5ml (Zithromax)....2
azithromycin for susp 200 mg/5ml (Zithromax)....2
azithromycin tab 250 mg (Zithromax)....2
azithromycin tab 500 mg (Zithromax)....2
azithromycin tab 600 mg (Zithromax)....2
AZOPT – brinzolamide ophth susp 1%....42

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BACITRACIN – bacitracin ophth oint 500 unit/gm....42
bacitracin-polymyxin b ophth oint....42
bacitracin-polymyxin-neomycin-hc ophth oint 1%....42
baclofen tab 10 mg....39
baclofen tab 20 mg....39
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BANZEL – rufinamide susp 40 mg/ml....37
BANZEL – rufinamide tab 200 mg....37
BANZEL – rufinamide tab 400 mg....37
BARACLUDE – entecavir oral soln 0.05 mg/ml....3
BARACLUDE – entecavir tab 0.5 mg....3

BARACLUDE – entecavir tab 1 mg....3
BCG VACCINE – bcg vaccine inj....6
benazepril & hydrochlorothiazide tab 10-12.5 mg (Lotensin hct)....15
benazepril & hydrochlorothiazide tab 20-12.5 mg (Lotensin hct)....15
benazepril & hydrochlorothiazide tab 20-25 mg (Lotensin hct)....15
benazepril & hydrochlorothiazide tab 5-6.25 mg....15
benazepril hcl tab 10 mg (Lotensin)....15
benazepril hcl tab 20 mg (Lotensin)....15
benazepril hcl tab 40 mg (Lotensin)....15
benazepril hcl tab 5 mg....15
benzoyl peroxide-erythromycin gel 5-3% (Benzamycin)....43
benztropine mesylate tab 0.5 mg....38
benztropine mesylate tab 1 mg....38
benztropine mesylate tab 2 mg....38
betamethasone dipropionate augmented cream 0.05% (Diprolene af)....44
betamethasone dipropionate augmented gel 0.05%. 44
betamethasone dipropionate augmented lotion 0.05% (Diprolene)....44
betamethasone dipropionate augmented oint 0.05% (Diprolene)....44
betamethasone dipropionate cream 0.05%....44
betamethasone dipropionate lotion 0.05%....44
betamethasone dipropionate oint 0.05%....44
betamethasone valerate cream 0.1%....44
betamethasone valerate lotion 0.1%....44
betamethasone valerate oint 0.1%....44
BETASERON – interferon beta-1b for inj kit 0.3 mg....32
BETOPTIC-S – betaxolol hcl ophth susp 0.25%....42
bicalutamide tab 50 mg (Casodex)....6
BILTRICIDE – praziquantel tab 600 mg....5
bisoprolol & hydrochlorothiazide tab 10-6.25 mg (Ziac)....17
bisoprolol & hydrochlorothiazide tab 2.5-6.25 mg (Ziac)....17
bisoprolol & hydrochlorothiazide tab 5-6.25 mg (Ziac)....17
bisoprolol fumarate tab 10 mg (Zebeta)....17
bisoprolol fumarate tab 5 mg (Zebeta)....17
BLEPHAMIDE S.O.P. – sulfacetamide sodium-prednisolone ophth oint 10-0.2%....42
BLEPHAMIDE – sulfacetamide sodium-prednisolone ophth susp 10-0.2%....42
BOSULIF – bosutinib tab 100 mg....6
BOSULIF – bosutinib tab 500 mg....6
BRAVELLE – urofollitropin purified for inj 75 unit....11
BREO ELLIPTA – fluticasone furoate-vilanterol aero powd ba 100-25 mcg/inh....23
brimonidine tartrate ophth soln 0.15% (Alphagan p) 42
brimonidine tartrate ophth soln 0.2%....42
bromocriptine mesylate cap 5 mg (Parlodel)....38
bromocriptine mesylate tab 2.5 mg (Parlodel)....38
budesonide cap sr 24hr 3 mg (Entocort ec).... 8
budesonide inhalation susp 0.25 mg/2ml (Pulmicort)....23
budesonide inhalation susp 0.5 mg/2ml (Pulmicort).23
bumetanide tab 0.5 mg....20
bumetanide tab 1 mg....20
bumetanide tab 2 mg....20
buprenorphine hcl-naloxone hcl sl tab 2-0.5 mg (base equiv)....33
buprenorphine hcl-naloxone hcl sl tab 8-2 mg (base equiv)....33
buprenorphine hcl sl tab 2 mg (base equiv)....33
buprenorphine hcl sl tab 8 mg (base equiv)....33
bupropion hcl (smoking deterrent) tab sr 12hr 150 mg (Zyban)....32
bupropion hcl tab 100 mg (Wellbutrin)....27
bupropion hcl tab 75 mg (Wellbutrin)....27
bupropion hcl tab sr 12hr 100 mg (Wellbutrin sr)....27
bupropion hcl tab sr 12hr 150 mg (Wellbutrin sr)....27
bupropion hcl tab sr 12hr 200 mg (Wellbutrin sr)....27
bupropion hcl tab sr 24hr 150 mg (Wellbutrin xl)....27
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buspirone hcl tab 15 mg....27
buspirone hcl tab 30 mg....27
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butalbital-acetaminophen-caffeine cap 50-325-40 mg....33
butalbital-acetaminophen-caffeine tab 50-325-40 mg....33
butalbital-aspirin-caffeine cap 50-325-40 mg (Fiorinal)....33
butalbital-aspirin-caffeine tab 50-325-40 mg....33
butalbital-aspirin-caff w/ codeine cap 50-325-40-30 mg (Fiorinal/codeine #3)....33
BYDUREON – exenatide extended release for inj susp 2 mg....11
BYETTA – exenatide soln pen-injector 10 mcg/0.04ml.. 12
BYETTA – exenatide soln pen-injector 5 mcg/0.02ml.... 12

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cabergoline tab 0.5 mg....14
caffeine citrate oral soln 60 mg/3ml (10 mg/ml base equiv) (Cafcit)....31
calcipotriene cream 0.005% (Dovonex)....45
calcipotriene soln 0.005% (50 mcg/ml)....45
calcitriol cap 0.25 mcg (Rocaltrol)....14
calcitriol cap 0.5 mcg (Rocaltrol)....14
calcitriol oral soln 1 mcg/ml (Rocaltrol)....14
calcium acetate (phosphate binder) cap 667 mg (169 mg ca) (Phoslo)....25
CALIBRATION LIQUID – various....46
CANASA – mesalamine suppos 1000 mg....25

candesartan cilexetil-hydrochlorothiazide tab 16-12.5 mg (Atacand hct).....16
candesartan cilexetil-hydrochlorothiazide tab 32-12.5 mg (Atacand hct).....16
candesartan cilexetil-hydrochlorothiazide tab 32-25 mg (Atacand hct).....16
candesartan cilexetil tab 16 mg (Atacand).....16
candesartan cilexetil tab 32 mg (Atacand).....16
candesartan cilexetil tab 4 mg (Atacand).....16
candesartan cilexetil tab 8 mg (Atacand).....16
capecitabine tab 150 mg (Xeloda).....6
capecitabine tab 500 mg (Xeloda).....6
CAPRELSA – vandetanib tab 100 mg.....6
CAPRELSA – vandetanib tab 300 mg.....6
CAPTOPRIL/HYDROCHLOROTHIA – captopril & hydrochlorothiazide tab 25-15 mg.....15
CAPTOPRIL/HYDROCHLOROTHIA – captopril & hydrochlorothiazide tab 25-25 mg.....15
CAPTOPRIL/HYDROCHLOROTHIA – captopril & hydrochlorothiazide tab 50-15 mg.....15
CAPTOPRIL/HYDROCHLOROTHIA – captopril & hydrochlorothiazide tab 50-25 mg.....15
captopril tab 100 mg.....15
captopril tab 12.5 mg.....15
captopril tab 25 mg.....15
captopril tab 50 mg.....15
CARAC – fluorouracil cream 0.5%.....45
CARAFATE – sucralfate susp 1 gm/10ml.....24
carbamazepine cap sr 12hr 100 mg (Carbatrol).....37
carbamazepine cap sr 12hr 200 mg (Carbatrol).....37
carbamazepine cap sr 12hr 300 mg (Carbatrol).....37
carbamazepine chew tab 100 mg.....37
carbamazepine susp 100 mg/5ml (Tegretol).....37
carbamazepine tab 200 mg (Tegretol).....37
carbamazepine tab sr 12hr 200 mg (Tegretol-xr).....37
carbamazepine tab sr 12hr 400 mg (Tegretol-xr).....37
CARBIDOPA/LEVODOPA/ENTACA – carbidopa-levodopa-entacapone tabs 12.5-50-200 mg.....38
CARBIDOPA/LEVODOPA/ENTACA – carbidopa-levodopa-entacapone tabs 18.75-75-200 mg.....38
CARBIDOPA/LEVODOPA/ENTACA – carbidopa-levodopa-entacapone tabs 25-100-200 mg.....38
CARBIDOPA/LEVODOPA/ENTACA – carbidopa-levodopa-entacapone tabs 31.25-125-200 mg.....38
CARBIDOPA/LEVODOPA/ENTACA – carbidopa-levodopa-entacapone tabs 37.5-150-200 mg.....38
CARBIDOPA/LEVODOPA/ENTACA – carbidopa-levodopa-entacapone tabs 50-200-200 mg.....38
carbidopa & levodopa orally disintegrating tab 10-100 mg.....38
carbidopa & levodopa orally disintegrating tab 25-100 mg.....38
carbidopa & levodopa orally disintegrating tab 25-250 mg.....38
carbidopa & levodopa tab 10-100 mg (Sinemet).....38
carbidopa & levodopa tab 25-100 mg (Sinemet).....38
carbidopa & levodopa tab 25-250 mg (Sinemet).....38
carbidopa & levodopa tab cr 25-100 mg (Sinemet cr).....38
carbidopa & levodopa tab cr 50-200 mg (Sinemet cr).....38
carteolol hcl ophth soln 1%.....42
carvedilol tab 12.5 mg (Coreg).....17
carvedilol tab 25 mg (Coreg).....17
carvedilol tab 3.125 mg (Coreg).....17
carvedilol tab 6.25 mg (Coreg).....17
CEENU – lomustine cap 100 mg.....6
CEENU – lomustine cap 10 mg.....6
CEENU – lomustine cap 40 mg.....6
cefaclor cap 250 mg.....1
cefaclor cap 500 mg.....1
cefadroxil cap 500 mg.....1
cefadroxil for susp 250 mg/5ml.....1
cefadroxil for susp 500 mg/5ml.....1
cefadroxil tab 1 gm.....1
cefdinir cap 300 mg.....1
cefdinir for susp 125 mg/5ml.....1
cefdinir for susp 250 mg/5ml.....1
cefpodoxime proxetil for susp 100 mg/5ml.....1
cefpodoxime proxetil for susp 50 mg/5ml.....1
cefpodoxime proxetil tab 100 mg.....1
cefpodoxime proxetil tab 200 mg.....1
cefprozil for susp 125 mg/5ml.....1
cefprozil for susp 250 mg/5ml.....1
cefprozil tab 250 mg.....1
cefprozil tab 500 mg.....1
cefuroxime axetil for susp 125 mg/5ml (Ceftin).....1
cefuroxime axetil tab 250 mg (Ceftin).....1
cefuroxime axetil tab 500 mg (Ceftin).....1
CELEBREX – celecoxib cap 100 mg.....35
CELEBREX – celecoxib cap 200 mg.....35
CELEBREX – celecoxib cap 400 mg.....35
CELEBREX – celecoxib cap 50 mg.....35
CELLCEPT – mycophenolate mofetil for oral susp 200 mg/ml.....46
cephalexin cap 250 mg (Keflex).....1
cephalexin cap 500 mg (Keflex).....1
cephalexin for susp 125 mg/5ml.....1
cephalexin for susp 250 mg/5ml.....1
CETROTIDE – cetrorelix acetate for inj kit 0.25 mg.....11
CETROTIDE – cetrorelix acetate for inj kit 3 mg.....11
CHANTIX CONTINUING MONTH – varenicline tartrate tab 1 mg (base equiv).....32
CHANTIX STARTING MONTH PA – varenicline tartrate tab 0.5 mg x 11 & tab 1 mg x 42 pack.....32
CHANTIX – varenicline tartrate tab 0.5 mg (base equiv)32
CHANTIX – varenicline tartrate tab 1 mg (base equiv)...32
CHEMET – succimer cap 100 mg.....46
CHENODAL – chenodiol tab 250 mg.....25
chlorhexidine gluconate soln 0.12% (Peridex).....43
chloroquine phosphate tab 250 mg.....5
chloroquine phosphate tab 500 mg (Aralen).....5

CHLOROTHIAZIDE – chlorothiazide tab 250 mg.....20
chlorothiazide tab 250 mg.....20
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chlorpromazine hcl tab 25 mg.....29
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CHLORTHALIDONE – chlorthalidone tab 25 mg.....20
CHLORTHALIDONE – chlorthalidone tab 50 mg.....20
chlorzoxazone tab 500 mg (Parafon forte dsc).....39
cholestyramine light powder 4 gm/dose (Questran light).....19
cholestyramine light powder packets 4 gm.....19
cholestyramine powder 4 gm/dose (Questran).....19
cholestyramine powder packets 4 gm (Questran).....19
choline fenofibrate cap dr 135 mg (fenofibric acid equiv) (Trilipix).....19
choline fenofibrate cap dr 45 mg (fenofibric acid equiv) (Trilipix).....19
chorionic gonadotropin for inj 10000 unit.....11
ciclopirox gel 0.77% (Loprox).....44
ciclopirox olamine cream 0.77% (base equiv).....44
ciclopirox olamine susp 0.77% (base equiv).....44
ciclopirox shampoo 1% (Loprox shampoo).....44
cilostazol tab 100 mg (Pletal).....41
cilostazol tab 50 mg (Pletal).....41
CILOXAN – ciprofloxacin hcl ophth oint 0.3%.....42
cimetidine hcl soln 300 mg/5ml.....24
cimetidine tab 300 mg.....24
cimetidine tab 400 mg.....24
cimetidine tab 800 mg.....24
CIPRO – ciprofloxacin for oral susp 250 mg/5ml (5%) (5 gm/100ml).....2
CIPRO – ciprofloxacin for oral susp 500 mg/5ml (10%) (10 gm/100ml).....2
CIPRODEX – ciprofloxacin-dexamethasone otic susp 0.3-0.1%.....43
ciprofloxacin-ciprofloxacin hcl tab sr 24hr 1000 mg(base eq) (Cipro xr).....2
ciprofloxacin-ciprofloxacin hcl tab sr 24hr 500 mg (base eq) (Cipro xr).....2
ciprofloxacin hcl ophth soln 0.3% (Ciloxan).....42
ciprofloxacin hcl tab 100 mg (base equiv).....2
ciprofloxacin hcl tab 250 mg (base equiv) (Cipro).....2
ciprofloxacin hcl tab 500 mg (base equiv) (Cipro).....2
ciprofloxacin hcl tab 750 mg (base equiv).....2
CIPRO HC – ciprofloxacin-hydrocortisone otic susp 0.2-1%.....43
citalopram hydrobromide oral soln 10 mg/5ml.....27
citalopram hydrobromide tab 10 mg (base equiv) (Celexa).....27
citalopram hydrobromide tab 20 mg (base equiv) (Celexa).....27
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CLARAVIS – isotretinoin cap 30 mg.....43
clarithromycin for susp 125 mg/5ml.....2
clarithromycin for susp 250 mg/5ml (Biaxin).....2
clarithromycin tab 250 mg (Biaxin).....2
clarithromycin tab 500 mg (Biaxin).....2
clarithromycin tab sr 24hr 500 mg (Biaxin xl pac).....2
CLEOCIN – clindamycin phosphate vaginal suppos 100 mg.....26
CLIMARA PRO – estradiol-levonorgestrel td patch weekly 0.045-0.015 mg/day.....9
clindamycin hcl cap 150 mg (Cleocin).....6
clindamycin hcl cap 300 mg (Cleocin).....6
clindamycin hcl cap 75 mg (Cleocin).....6
clindamycin palmitate hcl for soln 75 mg/5ml (base equiv) (Cleocin pediatric gr).....6
clindamycin phosphate-benzoyl peroxide gel 1-5% (Benzaclin).....43
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clindamycin phosphate lotion 1% (Cleocin-t).....43
clindamycin phosphate soln 1% (Cleocin-t).....43
clindamycin phosphate swab 1% (Cleocin-t).....43
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clobetasol propionate cream 0.05% (Temovate).....44
clobetasol propionate emollient base cream 0.05% (Temovate e).....44
clobetasol propionate foam 0.05% (Olux).....45
clobetasol propionate gel 0.05% (Temovate).....45
clobetasol propionate oint 0.05% (Temovate).....45
clobetasol propionate soln 0.05% (Temovate).....45
clomiphene citrate tab 50 mg (Clomid).....11
clomipramine hcl cap 25 mg (Anafranil).....27
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FLUPHENAZINE HCL – fluphenazine hcl elixir 2.5 mg/5ml.....29
FLUPHENAZINE HCL – fluphenazine hcl oral conc 5 mg/ml.....29
fluphenazine hcl tab 10 mg.....29
fluphenazine hcl tab 1 mg.....29
fluphenazine hcl tab 2.5 mg.....29
fluphenazine hcl tab 5 mg.....29
FLURA-DROPS – sodium fluoride soln 0.25 mg/drop f (from 0.55 mg/drop naf).....40
flurbiprofen sodium ophth soln 0.03% (Ocufen).....43
flurbiprofen tab 100 mg.....35
flurbiprofen tab 50 mg.....35
flutamide cap 125 mg.....6
fluticasone propionate cream 0.05% (Cutivate).....45
fluticasone propionate nasal susp 50 mcg/act (Flonase).....22
fluticasone propionate oint 0.005% (Cutivate).....45
fluvoxamine maleate tab 100 mg.....28
fluvoxamine maleate tab 25 mg.....28
fluvoxamine maleate tab 50 mg.....28
FML – fluorometholone ophth oint 0.1%.....42
folic acid tab 1 mg.....41
FOLLISTIM AQ – follitropin beta inj 150 unit/0.5ml.....11
FOLLISTIM AQ – follitropin beta inj 300 unit/0.36ml.....11
FOLLISTIM AQ – follitropin beta inj 600 unit/0.72ml.....11
FOLLISTIM AQ – follitropin beta inj 75 unit/0.5ml.....11
FOLLISTIM AQ – follitropin beta inj 900 unit/1.08ml.....11
fondaparinux sodium inj 10 mg/0.8ml (Arixtra).....41
fondaparinux sodium inj 2.5 mg/0.5ml (Arixtra).....41
fondaparinux sodium inj 5 mg/0.4ml (Arixtra).....41
fondaparinux sodium inj 7.5 mg/0.6ml (Arixtra).....41
FORADIL AEROLIZER – formoterol fumarate inhal cap 12 mcg.....23
FORTEO – teriparatide (recombinant) inj 600 mcg/2.4ml.....14
fosinopril sodium & hydrochlorothiazide tab 10-12.5 mg.....15

fosinopril sodium & hydrochlorothiazide tab 20-12.5 mg....15
fosinopril sodium tab 10 mg....15
fosinopril sodium tab 20 mg....15
fosinopril sodium tab 40 mg....15
furosemide oral soln 10 mg/ml....20
furosemide tab 20 mg (Lasix)....20
furosemide tab 40 mg (Lasix)....20
furosemide tab 80 mg (Lasix)....20
FUZEON – enfuvirtide for inj 90 mg....4

G

gabapentin cap 100 mg (Neurontin)....37
gabapentin cap 300 mg (Neurontin)....37
gabapentin cap 400 mg (Neurontin)....37
gabapentin oral soln 250 mg/5ml (Neurontin)....37
gabapentin tab 600 mg (Neurontin)....37
gabapentin tab 800 mg (Neurontin)....37
galantamine hydrobromide cap sr 24hr 16 mg (Razadyne er)....33
galantamine hydrobromide cap sr 24hr 24 mg (Razadyne er)....33
galantamine hydrobromide cap sr 24hr 8 mg (Razadyne er)....33
galantamine hydrobromide tab 12 mg (Razadyne)....33
galantamine hydrobromide tab 4 mg (Razadyne)....33
galantamine hydrobromide tab 8 mg (Razadyne)....33
GANIRELIX ACETATE – ganirelix acetate inj 250 mcg/0.5ml....11
gemfibrozil tab 600 mg (Lopid)....20
GENTAMICIN SULFATE – gentamicin sulfate cream 0.1%....44
GENTAMICIN SULFATE – gentamicin sulfate oint 0.1%....44
gentamicin sulfate ophth oint 0.3%....42
gentamicin sulfate ophth soln 0.3% (Garamycin)....42
GILOTRIF – afatinib dimaleate tab 20 mg (base equivalent)....6
GILOTRIF – afatinib dimaleate tab 30 mg (base equivalent)....7
GILOTRIF – afatinib dimaleate tab 40 mg (base equivalent)....7
GLEEVEC – imatinib mesylate tab 100 mg (base equivalent)....7
GLEEVEC – imatinib mesylate tab 400 mg (base equivalent)....7
glimepiride tab 1 mg (Amaryl)....12
glimepiride tab 2 mg (Amaryl)....12
glimepiride tab 4 mg (Amaryl)....12
glipizide-metformin hcl tab 2.5-250 mg....12
glipizide-metformin hcl tab 2.5-500 mg....12
glipizide-metformin hcl tab 5-500 mg....12
glipizide tab 10 mg (Glucotrol)....12
glipizide tab 5 mg (Glucotrol)....12
glipizide tab sr 24hr 10 mg (Glucotrol xl)....12
glipizide tab sr 24hr 2.5 mg (Glucotrol xl)....12
glipizide tab sr 24hr 5 mg (Glucotrol xl)....12
GLUCAGON EMERGENCY KIT – glucagon (rdna) for inj kit 1 mg....12
GLYBURIDE – glyburide tab 1.25 mg....12
GLYBURIDE – glyburide tab 2.5 mg....12
GLYBURIDE – glyburide tab 5 mg....12
glyburide-metformin tab 1.25-250 mg (Glucovance)....12
glyburide-metformin tab 2.5-500 mg (Glucovance)....12
glyburide-metformin tab 5-500 mg (Glucovance)....12
glyburide micronized tab 1.5 mg (Glynase)....12
glyburide micronized tab 3 mg (Glynase)....12
glyburide micronized tab 6 mg (Glynase)....12
glyburide tab 1.25 mg....12
glyburide tab 2.5 mg....12
glyburide tab 5 mg....12
glycopyrrolate tab 1 mg (Robinul)....24
glycopyrrolate tab 2 mg (Robinul forte)....24
GONAL-F – follitropin alfa for inj 1050 unit....11
GONAL-F – follitropin alfa for inj 450 unit....11
GONAL-F RFF – follitropin alfa for inj 75 unit....11
GONAL-F RFF PEN – follitropin alfa inj 300 unit/0.5ml....11
GONAL-F RFF PEN – follitropin alfa inj 450 unit/0.75ml 11
GONAL-F RFF PEN – follitropin alfa inj 900 unit/1.5ml....11
GONAL-F RFF REDIJECT – follitropin alfa inj 300 unit/0.5ml....11
GONAL-F RFF REDIJECT – follitropin alfa inj 450 unit/0.75ml....11
GONAL-F RFF REDIJECT – follitropin alfa inj 900 unit/1.5ml....11
GRANIX – tbo-filgrastim soln prefilled syringe 300 mcg/0.5ml....41
GRANIX – tbo-filgrastim soln prefilled syringe 480 mcg/0.8ml....41
griseofulvin microsize susp 125 mg/5ml....3
griseofulvin microsize tab 500 mg (Grifulvin v)....3
guanfacine hcl tab 1 mg (Tenex)....21
guanfacine hcl tab 2 mg (Tenex)....21

H

halobetasol propionate cream 0.05% (Ultravate)....45
halobetasol propionate oint 0.05% (Ultravate)....45
haloperidol lactate oral conc 2 mg/ml....29
haloperidol tab 0.5 mg....29
haloperidol tab 10 mg....29
haloperidol tab 1 mg....29
haloperidol tab 20 mg....29
haloperidol tab 2 mg....29
haloperidol tab 5 mg....29
HEXALEN – altretamine cap 50 mg....7
homatropine hbr ophth soln 5% (Isopto homatropine)....43
HUMALOG – insulin lispro (human) inj 100 unit/ml....13
HUMALOG – insulin lispro (human) soln cartridge 100 unit/ml....13
HUMALOG KWIKPEN – insulin lispro (human) soln pen-injector 100 unit/ml....13

HUMALOG MIX 50/50 – insulin lispro prot & lispro (human) inj 100 unit/ml (50-50)..... 13
HUMALOG MIX 50/50 KWIKPEN – insulin lispro prot & lispro sus pen-inj 100 unit/ml (50-50)..... 13
HUMALOG MIX 75/25 – insulin lispro prot & lispro (human) inj 100 unit/ml (75-25)..... 13
HUMALOG MIX 75/25 KWIKPEN – insulin lispro prot & lispro sus pen-inj 100 unit/ml (75-25)..... 13
HUMIRA – adalimumab inj kit 20 mg/0.4ml.....35
HUMIRA – adalimumab inj kit 40 mg/0.8ml (50 mg/ml).. 35
HUMIRA PEN – adalimumab inj kit 40 mg/0.8ml (50 mg/ml)..... 35
HUMIRA PEN-CROHNS DISEASE – adalimumab inj kit 40 mg/0.8ml (50 mg/ml)..... 35
HUMIRA PEN-PSORIASIS STAR – adalimumab inj kit 40 mg/0.8ml (50 mg/ml)..... 35
HUMULIN 70/30 – insulin isophane & regular (human) inj 100 unit/ml (70-30).....13
HUMULIN 70/30 KWIKPEN – insulin isophane & regular susp pen-inj 100 unit/ml (70-30).....13
HUMULIN 70/30 PEN – insulin isophane & regular susp pen-inj 100 unit/ml (70-30).....13
HUMULIN N – insulin isophane (human) inj 100 unit/ml.13
HUMULIN N KWIKPEN – insulin isophane (human) susp pen-injector 100 unit/ml..... 13
HUMULIN N U-100 PEN – insulin isophane (human) susp pen-injector 100 unit/ml.....13
HUMULIN R – insulin regular (human) inj 100 unit/ml.... 13
HUMULIN R U-500 (CONCENTR – insulin regular (human) inj 500 unit/ml.....13
HYCAMTIN – topotecan hcl cap 0.25 mg (base equiv).... 7
HYCAMTIN – topotecan hcl cap 1 mg (base equiv)..... 7
hydralazine hcl tab 100 mg..... 21
hydralazine hcl tab 10 mg..... 21
hydralazine hcl tab 25 mg..... 21
hydralazine hcl tab 50 mg..... 21
hydrochlorothiazide cap 12.5 mg (Microzide).....20
hydrochlorothiazide tab 25 mg..... 20
hydrochlorothiazide tab 50 mg..... 20
hydrocodone-acetaminophen soln 7.5-325 mg/15ml (Hycet).....34
hydrocodone-acetaminophen tab 10-325 mg (Norco)..... 34
hydrocodone-acetaminophen tab 5-300 mg (Xodol). 34
hydrocodone-acetaminophen tab 5-325 mg (Norco).34
hydrocodone-acetaminophen tab 7.5-325 mg (Norco)..... 34
hydrocodone-ibuprofen tab 10-200 mg (Ibudone)..... 34
hydrocodone-ibuprofen tab 5-200 mg (Reprexain)....34
hydrocodone-ibuprofen tab 7.5-200 mg (Vicoprofen).....34
hydrocortisone acetate suppos 25 mg (Anusol-hc).. 43
hydrocortisone cream 2.5%.....45
hydrocortisone enema 100 mg/60ml (Cortenema).....43
hydrocortisone lotion 2.5%..... 45
hydrocortisone oint 2.5%.....45
hydrocortisone rectal cream 2.5% (Anusol-hc)..... 43
hydrocortisone tab 10 mg (Cortef)..... 8
hydrocortisone tab 20 mg (Cortef)..... 8
hydrocortisone tab 5 mg (Cortef)..... 8
hydrocortisone valerate cream 0.2%.....45
hydrocortisone valerate oint 0.2% (Westcort)..... 45
HYDROMORPHONE HCL – hydromorphone hcl suppos 3 mg.....34
hydromorphone hcl liqd 1 mg/ml (Dilaudid)..... 34
hydromorphone hcl tab 2 mg (Dilaudid)..... 34
hydromorphone hcl tab 4 mg (Dilaudid)..... 34
hydromorphone hcl tab 8 mg (Dilaudid)..... 34
hydroxychloroquine sulfate tab 200 mg (Plaquenil)....5
hydroxyurea cap 500 mg (Hydrea).....7
hydroxyzine hcl syrup 10 mg/5ml.....27
hydroxyzine hcl tab 10 mg.....27
hydroxyzine hcl tab 25 mg.....27
hydroxyzine hcl tab 50 mg.....27
hydroxyzine pamoate cap 25 mg (Vistaril).....27
hydroxyzine pamoate cap 50 mg (Vistaril).....27
HYDROXYZINE PAMOATE – hydroxyzine pamoate cap 100 mg.....27
hyoscyamine sulfate elixir 0.125 mg/5ml..... 24
hyoscyamine sulfate soln 0.125 mg/ml..... 24
hyoscyamine sulfate tab 0.125 mg (Levsin).....24
hyoscyamine sulfate tab sl 0.125 mg (Levsin/sl).....24
hyoscyamine sulfate tab sr 12hr 0.375 mg (Levbid).. 24

I

ibandronate sodium tab 150 mg (base equivalent) (Boniva).....14
ibuprofen susp 100 mg/5ml.....35
ibuprofen tab 400 mg.....35
ibuprofen tab 600 mg.....35
ibuprofen tab 800 mg.....35
ICLUSIG – ponatinib hcl tab 15 mg (base equiv)..... 7
ICLUSIG – ponatinib hcl tab 45 mg (base equiv)..... 7
ILARIS – canakinumab for inj 180 mg.....35
IMBRUVICA – ibrutinib cap 140 mg.....7
imipramine hcl tab 10 mg (Tofranil)..... 28
imipramine hcl tab 25 mg (Tofranil)..... 28
imipramine hcl tab 50 mg (Tofranil)..... 28
imipramine pamoate cap 100 mg (Tofranil-pm)..... 28
imipramine pamoate cap 125 mg (Tofranil-pm)..... 28
imipramine pamoate cap 150 mg (Tofranil-pm)..... 28
imipramine pamoate cap 75 mg (Tofranil-pm)..... 28
imiquimod cream 5% (Aldara).....45
IMITREX – sumatriptan nasal spray 20 mg/act..... 36
IMITREX – sumatriptan nasal spray 5 mg/act..... 36
INCRELEX – mecasermin inj 40 mg/4ml (10 mg/ml)..... 14
indapamide tab 1.25 mg..... 20
indapamide tab 2.5 mg..... 20
indomethacin cap 25 mg..... 35
indomethacin cap 50 mg..... 35
INHALER ASSIST DEVICES – spacers.....46
INLYTA – axitinib tab 1 mg.....7

INLYTA – axitinib tab 5 mg....7
INSULIN PEN NEEDLES – NOVOFINE, NOVOTWIST; various....46
INSULIN SYRINGES – various....46
INTELENCE – etravirine tab 100 mg....4
INTELENCE – etravirine tab 200 mg....4
INTELENCE – etravirine tab 25 mg....4
INVIRASE – saquinavir mesylate cap 200 mg....4
INVIRASE – saquinavir mesylate tab 500 mg....4
ipratropium-albuterol nebu soln 0.5-2.5(3) mg/3ml (Duoneb)....23
ipratropium bromide inhal soln 0.02%....23
ipratropium bromide nasal soln 0.03% (21 mcg/ spray) (Atrovent)....22
ipratropium bromide nasal soln 0.06% (42 mcg/ spray) (Atrovent)....22
irbesartan-hydrochlorothiazide tab 150-12.5 mg (Avalide)....16
irbesartan-hydrochlorothiazide tab 300-12.5 mg (Avalide)....16
irbesartan tab 150 mg (Avapro)....16
irbesartan tab 300 mg (Avapro)....16
irbesartan tab 75 mg (Avapro)....16
ISENTRESS – raltegravir potassium chew tab 100 mg (base equiv)....4
ISENTRESS – raltegravir potassium chew tab 25 mg (base equiv)....4
ISENTRESS – raltegravir potassium tab 400 mg (base equiv)....4
isoniazid & rifampin cap 150-300 mg....3
ISONIAZID – isoniazid syrup 50 mg/5ml....3
isoniazid tab 100 mg....3
isoniazid tab 300 mg....3
ISOSORBIDE DINITRATE – isosorbide dinitrate tab 30 mg....19
isosorbide dinitrate tab 10 mg....19
isosorbide dinitrate tab 20 mg....19
isosorbide dinitrate tab 30 mg....19
isosorbide dinitrate tab 5 mg (Isordil titradose)....19
isosorbide mononitrate tab 10 mg....19
isosorbide mononitrate tab 20 mg....19
isosorbide mononitrate tab sr 24hr 120 mg (Imdur)....19
isosorbide mononitrate tab sr 24hr 30 mg (Imdur)....19
isosorbide mononitrate tab sr 24hr 60 mg (Imdur)....19
isotretinoin cap 10 mg....44
isotretinoin cap 20 mg....44
isotretinoin cap 40 mg....44
itraconazole cap 100 mg (Sporanox)....3

J

JAKAFI – ruxolitinib phosphate tab 10 mg (base equivalent)....7
JAKAFI – ruxolitinib phosphate tab 15 mg (base equivalent)....7
JAKAFI – ruxolitinib phosphate tab 20 mg (base equivalent)....7
JAKAFI – ruxolitinib phosphate tab 25 mg (base equivalent)....7
JAKAFI – ruxolitinib phosphate tab 5 mg (base equivalent)....7
JANUMET – sitagliptin-metformin hcl tab 50-1000 mg....12
JANUMET – sitagliptin-metformin hcl tab 50-500 mg....12
JANUMET XR – sitagliptin-metformin hcl tab sr 24hr 100-1000 mg....12
JANUMET XR – sitagliptin-metformin hcl tab sr 24hr 50-1000 mg....12
JANUMET XR – sitagliptin-metformin hcl tab sr 24hr 50-500 mg....12
JANUVIA – sitagliptin phosphate tab 100 mg (base equiv)....12
JANUVIA – sitagliptin phosphate tab 25 mg (base equiv)....12
JANUVIA – sitagliptin phosphate tab 50 mg (base equiv)....12
JUVISYNC – sitagliptin-simvastatin tab 100-10 mg....12
JUVISYNC – sitagliptin-simvastatin tab 100-20 mg....12
JUVISYNC – sitagliptin-simvastatin tab 100-40 mg....12
JUVISYNC – sitagliptin-simvastatin tab 50-10 mg....12
JUVISYNC – sitagliptin-simvastatin tab 50-20 mg....12
JUVISYNC – sitagliptin-simvastatin tab 50-40 mg....12
JUXTAPID – lomitapide mesylate cap 10 mg (base equiv)....20
JUXTAPID – lomitapide mesylate cap 20 mg (base equiv)....20
JUXTAPID – lomitapide mesylate cap 5 mg (base equiv)....20

K

KALETRA – lopinavir-ritonavir soln 400-100 mg/5ml (80-20 mg/ml)....4
KALETRA – lopinavir-ritonavir tab 100-25 mg....4
KALETRA – lopinavir-ritonavir tab 200-50 mg....4
KALYDECO – ivacaftor tab 150 mg....24
ketoconazole cream 2%....44
ketoconazole shampoo 2% (Nizoral)....44
ketoprofen cap 50 mg....35
ketoprofen cap 75 mg....35
ketorolac tromethamine ophth soln 0.4% (Acular ls)....43
ketorolac tromethamine ophth soln 0.5% (Acular)....43
ketorolac tromethamine tab 10 mg....35
KOMBIGLYZE XR – saxagliptin-metformin hcl tab sr 24hr 2.5-1000 mg....12
KOMBIGLYZE XR – saxagliptin-metformin hcl tab sr 24hr 5-1000 mg....12
KOMBIGLYZE XR – saxagliptin-metformin hcl tab sr 24hr 5-500 mg....12
K-PHOS NO 2 – potassium & sodium acid phosphates tab 305-700 mg....26
K-PHOS – potassium phosphate monobasic tab 500 mg....40
KUVAN – sapropterin dihydrochloride soluble tab 100 mg....14

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labetalol hcl tab 100 mg (Trandate).....17
labetalol hcl tab 200 mg (Trandate).....17
labetalol hcl tab 300 mg (Trandate).....17
lactulose (encephalopathy) solution 10 gm/15ml.....25
lactulose solution 10 gm/15ml.....24
LAMISIL – terbinafine hcl oral granules packet 125 mg... 3
LAMISIL – terbinafine hcl oral granules packet 187.5 mg 3
lamivudine tab 100 mg (Epivir hbv).....3
lamivudine tab 150 mg (Epivir).....4
lamivudine tab 300 mg (Epivir).....4
lamivudine-zidovudine tab 150-300 mg (Combivir).....4
lamotrigine tab 100 mg (Lamictal).....37
lamotrigine tab 150 mg (Lamictal).....37
lamotrigine tab 200 mg (Lamictal).....37
lamotrigine tab 25 mg (Lamictal).....37
lamotrigine tab chewable dispersible 25 mg (Lamictal chewable di).....37
lamotrigine tab chewable dispersible 5 mg (Lamictal chewable di).....37
LANCETS – various.....46
lansoprazole cap delayed release 15 mg (Prevacid). 24
lansoprazole cap delayed release 30 mg (Prevacid). 24
LANTUS – insulin glargine inj 100 unit/ml.....13
LANTUS SOLOSTAR – insulin glargine soln pen-injector 100 unit/ml.....13
latanoprost ophth soln 0.005% (Xalatan).....42
leflunomide tab 10 mg (Arava).....36
leflunomide tab 20 mg (Arava).....36
LETAIRIS – ambrisentan tab 10 mg.....21
LETAIRIS – ambrisentan tab 5 mg.....21
letrozole tab 2.5 mg (Femara).....7
LEUCOVORIN CALCIUM – leucovorin calcium tab 10 mg.....7
LEUCOVORIN CALCIUM – leucovorin calcium tab 15 mg.....7
leucovorin calcium tab 25 mg.....7
leucovorin calcium tab 5 mg.....7
LEUKERAN – chlorambucil tab 2 mg.....7
LEUKINE – sargramostim inj 500 mcg/ml.....41
– LEUPROLIDE (1 MON) INJ 3.75 MG & NORETHINDRONE TAB 5 MG KIT.....14
– LEUPROLIDE (3 MON) INJ 11.25 MG & NORETHINDRONE TAB 5 MG KIT.....14
levalbuterol hcl soln nebu 0.31 mg/3ml (base equiv) (Xopenex).....23
levalbuterol hcl soln nebu 0.63 mg/3ml (base equiv) (Xopenex).....23
levalbuterol hcl soln nebu 1.25 mg/3ml (base equiv) (Xopenex).....23
levalbuterol hcl soln nebu conc 1.25 mg/0.5ml (base equiv) (Xopenex concentrate).....23
LEVEMIR FLEXPEN – insulin detemir soln pen-injector 100 unit/ml.....13
LEVEMIR FLEXTOUCH – insulin detemir soln pen-injector 100 unit/ml.....13
LEVEMIR – insulin detemir inj 100 unit/ml.....13
levetiracetam oral soln 100 mg/ml (Keppra).....37
levetiracetam tab 1000 mg (Keppra).....37
levetiracetam tab 250 mg (Keppra).....37
levetiracetam tab 500 mg (Keppra).....37
levetiracetam tab 750 mg (Keppra).....37
levetiracetam tab sr 24hr 500 mg (Keppra xr).....37
levetiracetam tab sr 24hr 750 mg (Keppra xr).....37
LEVOBUNOLOL HCL – levobunolol hcl ophth soln 0.25%.....43
levobunolol hcl ophth soln 0.5% (Betagan).....43
levocarnitine oral soln 1 gm/10ml (10%) (Carnitor)... 14
levocarnitine tab 330 mg (Carnitor).....14
levofloxacin oral soln 25 mg/ml (Levaquin).....2
levofloxacin tab 250 mg (Levaquin).....2
levofloxacin tab 500 mg (Levaquin).....2
levofloxacin tab 750 mg (Levaquin).....2
levonorgestrel & ethinyl estradiol (91-day) tab 0.15-0.03 mg.....10
levonorgestrel & ethinyl estradiol tab 0.15 mg-30 mcg.....10
levonorgestrel & ethinyl estradiol tab 0.1 mg-20 mcg.....10
levonorgestrel-eth estra tab 0.05-30/0.075-40/0.125-30mg-mcg.....10
levonorgestrel tab 0.75 mg (Plan b).....10
levonorgestrel tab 1.5 mg (Plan b one-step).....10
levonorg-eth est tab 0.1-0.02mg(84) & eth est tab 0.01mg(7) (Loseasonique).....10
levothyroxine sodium tab 100 mcg (Synthroid).....13
levothyroxine sodium tab 112 mcg (Synthroid).....13
levothyroxine sodium tab 125 mcg (Synthroid).....13
levothyroxine sodium tab 137 mcg (Synthroid).....13
levothyroxine sodium tab 150 mcg (Synthroid).....13
levothyroxine sodium tab 175 mcg (Synthroid).....13
levothyroxine sodium tab 200 mcg (Synthroid).....13
levothyroxine sodium tab 25 mcg (Synthroid).....13
levothyroxine sodium tab 300 mcg (Synthroid).....14
levothyroxine sodium tab 50 mcg (Synthroid).....14
levothyroxine sodium tab 75 mcg (Synthroid).....14
levothyroxine sodium tab 88 mcg (Synthroid).....14
LEXIVA – fosamprenavir calcium susp 50 mg/ml (base equiv).....4
LEXIVA – fosamprenavir calcium tab 700 mg (base equiv).....4
LIALDA – mesalamine tab delayed release 1.2 gm.....25
LIDOCAINE/PRILOCAINE – lidocaine-prilocaine kit 2.5-2.5%.....45
lidocaine hcl viscous soln 2%.....43
lidocaine-prilocaine cream 2.5-2.5% (Emla).....45
lindane lotion 1%.....45
lindane shampoo 1%.....45
liothyronine sodium tab 25 mcg (Cytomel).....14
liothyronine sodium tab 50 mcg (Cytomel).....14

liothyronine sodium tab 5 mcg (Cytomel)....14
lisinopril & hydrochlorothiazide tab 10-12.5 mg (Zestoretic)....15
lisinopril & hydrochlorothiazide tab 20-12.5 mg (Zestoretic)....15
lisinopril & hydrochlorothiazide tab 20-25 mg (Zestoretic)....15
lisinopril tab 10 mg (Prinivil)....15
lisinopril tab 2.5 mg (Zestril)....15
lisinopril tab 20 mg (Prinivil)....15
lisinopril tab 30 mg (Zestril)....15
lisinopril tab 40 mg (Zestril)....15
lisinopril tab 5 mg (Prinivil)....15
lithium carbonate cap 150 mg (Lithium carbonate)...29
lithium carbonate cap 300 mg....29
lithium carbonate cap 600 mg (Lithium carbonate)...29
LITHIUM CARBONATE – lithium carbonate cap 150 mg....29
lithium carbonate tab 300 mg....29
lithium carbonate tab cr 300 mg (Lithobid)....29
lithium carbonate tab cr 450 mg....29
LITHIUM CITRATE – lithium citrate oral soln 8 meq/5ml29
LOMUSTINE – lomustine cap 100 mg....7
LOMUSTINE – lomustine cap 10 mg....7
LOMUSTINE – lomustine cap 40 mg....7
lorazepam conc 2 mg/ml (Lorazepam intensol)....27
lorazepam tab 0.5 mg (Ativan)....27
lorazepam tab 1 mg (Ativan)....27
lorazepam tab 2 mg (Ativan)....27
losartan potassium & hydrochlorothiazide tab 100-12.5 mg (Hyzaar)....16
losartan potassium & hydrochlorothiazide tab 100-25 mg (Hyzaar)....16
losartan potassium & hydrochlorothiazide tab 50-12.5 mg (Hyzaar)....16
losartan potassium tab 100 mg (Cozaar)....16
losartan potassium tab 25 mg (Cozaar)....16
losartan potassium tab 50 mg (Cozaar)....16
LOTEMAX – loteprednol etabonate ophth gel 0.5%....42
LOTEMAX – loteprednol etabonate ophth oint 0.5%....42
LOTEMAX – loteprednol etabonate ophth susp 0.5%....42
lovastatin tab 10 mg....20
lovastatin tab 20 mg (Mevacor)....20
lovastatin tab 40 mg (Mevacor)....20
LOVAZA – omega-3-acid ethyl esters cap 1 gm....20
loxapine succinate cap 10 mg....29
loxapine succinate cap 25 mg....29
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SUMATRIPTAN SUCCINATE – sumatriptan succinate solution prefilled syringe 6 mg/0.5ml..... 36
sumatriptan succinate tab 100 mg (Imitrex)..... 36
sumatriptan succinate tab 25 mg (Imitrex)..... 36
sumatriptan succinate tab 50 mg (Imitrex)..... 36
SUMATRIPTAN – sumatriptan nasal spray 20 mg/act... 36
SUMATRIPTAN – sumatriptan nasal spray 5 mg/act..... 36
SUPRAX – cefixime for susp 100 mg/5ml.....1
SUPRAX – cefixime for susp 200 mg/5ml.....1
SUPRAX – cefixime for susp 500 mg/5ml.....1
SUPRAX – cefixime tab 400 mg.....1
SUSTIVA – efavirenz cap 200 mg..... 5
SUSTIVA – efavirenz cap 50 mg..... 5
SUSTIVA – efavirenz tab 600 mg..... 5
SUTENT – sunitinib malate cap 12.5 mg (base equivalent).....7
SUTENT – sunitinib malate cap 25 mg (base equivalent) 7
SUTENT – sunitinib malate cap 50 mg (base equivalent) 7
SYLATRON – peginterferon alfa-2b for inj kit 296 mcg.... 8
SYLATRON – peginterferon alfa-2b for inj kit 444 mcg.... 8
SYLATRON – peginterferon alfa-2b for inj kit 4 x 296 mcg..... 8
SYLATRON – peginterferon alfa-2b for inj kit 4 x 444 mcg..... 8
SYLATRON – peginterferon alfa-2b for inj kit 4 x 888 mcg..... 8
SYLATRON – peginterferon alfa-2b for inj kit 888 mcg.... 8
SYMBICORT – budesonide-formoterol fumarate dihyd aerosol 160-4.5 mcg/act..... 24
SYMBICORT – budesonide-formoterol fumarate dihyd aerosol 80-4.5 mcg/act..... 24
SYMLINPEN 120 – pramlintide acetate pen-inj 2700 mcg/2.7ml (1000 mcg/ml)..... 13
SYMLINPEN 60 – pramlintide acetate pen-inj 1500 mcg/1.5ml (1000 mcg/ml)..... 13
SYNERA – lidocaine-tetracaine topical patch 70-70 mg.46

T

TABLOID – thioguanine tab 40 mg..... 8
tacrolimus cap 0.5 mg (Prograf)..... 47
tacrolimus cap 1 mg (Prograf)..... 47
tacrolimus cap 5 mg (Prograf)..... 47
TAFINLAR – dabrafenib mesylate cap 50 mg (base equivalent).....8
TAFINLAR – dabrafenib mesylate cap 75 mg (base equivalent).....8
TAMIFLU – oseltamivir phosphate cap 30 mg (base equiv)..... 5
TAMIFLU – oseltamivir phosphate cap 45 mg (base equiv)..... 5
TAMIFLU – oseltamivir phosphate cap 75 mg (base equiv)..... 5
TAMIFLU – oseltamivir phosphate for susp 6 mg/ml (base equiv).....5
tamoxifen citrate tab 10 mg (base equivalent).....8
tamoxifen citrate tab 20 mg (base equivalent).....8
tamsulosin hcl cap 0.4 mg (Flomax).....26
TARCEVA – erlotinib tab 100 mg..... 8
TARCEVA – erlotinib tab 150 mg..... 8
TARCEVA – erlotinib tab 25 mg..... 8
TARGRETIN – bexarotene cap 75 mg.....8
TASIGNA – nilotinib cap 150 mg..... 8
TASIGNA – nilotinib cap 200 mg..... 8
TAZORAC – tazarotene cream 0.05%.....44
TAZORAC – tazarotene cream 0.1%.....44
TAZORAC – tazarotene gel 0.05%.....44
TAZORAC – tazarotene gel 0.1%.....44
TECFIDERA – dimethyl fumarate capsule delayed release 120 mg.....32
TECFIDERA – dimethyl fumarate capsule delayed release 240 mg.....32
TECFIDERA STARTER PACK – dimethyl fumarate capsule dr starter pack 120 mg & 240 mg.....32
TEGRETOL-XR – carbamazepine tab sr 12hr 100 mg...38
temazepam cap 15 mg (Restoril)..... 30
temazepam cap 22.5 mg (Restoril)..... 30
temazepam cap 30 mg (Restoril)..... 30
temazepam cap 7.5 mg (Restoril)..... 30
temozolomide cap 100 mg (Temodar)..... 8
temozolomide cap 140 mg (Temodar)..... 8
temozolomide cap 180 mg (Temodar)..... 8
temozolomide cap 20 mg (Temodar)..... 8
temozolomide cap 250 mg (Temodar)..... 8
temozolomide cap 5 mg (Temodar)..... 8
terazosin hcl cap 10 mg..... 22
terazosin hcl cap 1 mg..... 22
terazosin hcl cap 2 mg..... 22
terazosin hcl cap 5 mg..... 22
terbinafine hcl tab 250 mg (Lamisil)..... 3
terbutaline sulfate tab 2.5 mg..... 24
terbutaline sulfate tab 5 mg..... 24
terconazole vaginal cream 0.4% (Terazol 7)..... 26
terconazole vaginal cream 0.8% (Terazol 3)..... 26
terconazole vaginal suppos 80 mg.....26
testosterone cypionate im in oil 100 mg/ml (Depo-testosterone)..... 9
testosterone cypionate im in oil 200 mg/ml (Depo-testosterone)..... 9
testosterone enanthate im in oil 200 mg/ml.....9
TEST STRIPS – LIFESCAN ONETOUCH BASIC/PROFILE, BASIC/PROFILE/ONETOUCH II, FASTTAKE, SURESTEP, ULTRA BLUE, VERIO, VERIO IQ.....46
TEST STRIPS – ROCHE ACCU-CHEK ACTIVE, AVIVA, AVIVA PLUS, COMFORT CURVE, COMPACT, COMPACT PLUS, SMARTVIEW.....46
TEST STRIPS – various..... 46
TETRACYCLINE HCL – tetracycline hcl cap 250 mg.....2
TETRACYCLINE HCL – tetracycline hcl cap 500 mg.....2
THALOMID – thalidomide cap 100 mg.....47
THALOMID – thalidomide cap 150 mg.....47
THALOMID – thalidomide cap 200 mg.....47

THALOMID – thalidomide cap 50 mg..... 47
theophylline tab sr 12hr 100 mg..... 24
theophylline tab sr 12hr 200 mg..... 24
theophylline tab sr 12hr 300 mg..... 24
theophylline tab sr 12hr 450 mg..... 24
theophylline tab sr 24hr 400 mg..... 24
theophylline tab sr 24hr 600 mg..... 24
thiothixene cap 10 mg..... 30
thiothixene cap 1 mg..... 30
thiothixene cap 2 mg..... 30
thiothixene cap 5 mg..... 30
timolol maleate ophth gel forming soln 0.25% (Timoptic-xe).....43
timolol maleate ophth gel forming soln 0.5% (Timoptic-xe).....43
timolol maleate ophth soln 0.25% (Timoptic).....43
timolol maleate ophth soln 0.5% (Timoptic)..... 43
TIMOLOL MALEATE – timolol maleate tab 10 mg..... 17
TIMOLOL MALEATE – timolol maleate tab 20 mg..... 17
TIMOLOL MALEATE – timolol maleate tab 5 mg..... 17
TIVICAY – dolutegravir sodium tab 50 mg (base equiv)...5
TOBRADEX – tobramycin-dexamethasone ophth oint 0.3-0.1%.....42
tobramycin-dexamethasone ophth susp 0.3-0.1% (Tobradex).....42
tobramycin nebu soln 300 mg/5ml (Tobi).....3
tobramycin ophth soln 0.3% (Tobrex)..... 42
tolterodine tartrate cap sr 24hr 2 mg (Detrol la)..... 26
tolterodine tartrate cap sr 24hr 4 mg (Detrol la)..... 26
tolterodine tartrate tab 1 mg (Detrol).....26
tolterodine tartrate tab 2 mg (Detrol).....26
topiramate sprinkle cap 15 mg (Topamax sprinkle).. 38
topiramate sprinkle cap 25 mg (Topamax sprinkle).. 38
topiramate tab 100 mg (Topamax)..... 38
topiramate tab 200 mg (Topamax)..... 38
topiramate tab 25 mg (Topamax)..... 38
topiramate tab 50 mg (Topamax)..... 38
torsemide tab 100 mg (Demadex)..... 20
torsemide tab 10 mg (Demadex)..... 20
torsemide tab 20 mg (Demadex)..... 20
torsemide tab 5 mg (Demadex)..... 20
TRACLEER – bosentan tab 125 mg..... 22
TRACLEER – bosentan tab 62.5 mg..... 22
tramadol-acetaminophen tab 37.5-325 mg (Ultracet) 35
tramadol hcl tab 50 mg (Ultram)..... 35
tramadol hcl tab sr 24hr 100 mg (Ultram er)..... 35
tramadol hcl tab sr 24hr 200 mg (Ultram er)..... 35
tramadol hcl tab sr 24hr 300 mg (Ultram er)..... 35
trandolapril tab 1 mg (Mavik)..... 16
trandolapril tab 2 mg (Mavik)..... 16
trandolapril tab 4 mg (Mavik)..... 16
tranylcypromine sulfate tab 10 mg (Parnate).....28
TRAVATAN Z – travoprost ophth soln 0.004% (benzalkonium free) (bak free)..... 43
trazodone hcl tab 100 mg.....28
trazodone hcl tab 150 mg.....28
trazodone hcl tab 300 mg.....28
trazodone hcl tab 50 mg.....28
tretinoin cap 10 mg..... 8
tretinoin cream 0.025% (Retin-a).....44
tretinoin cream 0.05% (Retin-a).....44
tretinoin cream 0.1% (Retin-a).....44
tretinoin gel 0.01% (Retin-a).....44
tretinoin gel 0.025% (Retin-a).....44
tretinoin microsphere gel 0.04% (Retin-a micro)..... 44
tretinoin microsphere gel 0.1% (Retin-a micro)..... 44
triamcinolone acetonide cream 0.025%..... 45
triamcinolone acetonide cream 0.1%..... 45
triamcinolone acetonide cream 0.5%..... 45
triamcinolone acetonide dental paste 0.1%..... 43
triamcinolone acetonide lotion 0.025%..... 45
triamcinolone acetonide lotion 0.1%..... 45
triamcinolone acetonide nasal inhal 55 mcg/act (Nasacort aq).....22
triamcinolone acetonide oint 0.025%..... 45
triamcinolone acetonide oint 0.1%..... 45
TRIAMCINOLONE ACETONIDE – triamcinolone acetonide oint 0.5%.....45
TRIAMTERENE/HYDROCHLOROTH – triamterene & hydrochlorothiazide cap 50-25 mg.....21
triamterene & hydrochlorothiazide cap 37.5-25 mg (Dyazide)..... 20
triamterene & hydrochlorothiazide tab 37.5-25 mg (Maxzide-25).....20
triamterene & hydrochlorothiazide tab 75-50 mg (Maxzide).....21
TRICITRATES – pot & sod citrates w/ cit ac soln 550-500-334 mg/5ml.....26
trifluoperazine hcl tab 10 mg..... 30
trifluoperazine hcl tab 1 mg..... 30
trifluoperazine hcl tab 2 mg..... 30
trifluoperazine hcl tab 5 mg..... 30
trifluridine ophth soln 1% (Viroptic)..... 42
trihexyphenidyl hcl elixir 0.4 mg/ml.....39
trihexyphenidyl hcl tab 2 mg.....39
trihexyphenidyl hcl tab 5 mg.....39
trimethobenzamide hcl cap 300 mg (Tigan).....25
trimethoprim tab 100 mg..... 6
TRINATE – prenatal vit w/ fe fumarate-fa tab 28-1 mg...39
TRI-VIT/FLUORIDE/IRON – pediatric vitamins acd fluoride & fe drops 0.25-10 mg/ml..... 39
TRUVADA – emtricitabine-tenofovir disoproxil fumarate tab 200-300 mg..... 5
TYKERB – lapatinib ditosylate tab 250 mg (base equiv).. 8

U

ULESFIA – benzyl alcohol lotion 5%.....46
ursodiol cap 300 mg (Actigall).....26

V

VAGIFEM – estradiol vaginal tab 10 mcg..... 26
valacyclovir hcl tab 1 gm (Valtrex)..... 4

valacyclovir hcl tab 500 mg (Valtrex)..... 4
VALCHLOR – mechlorethamine hcl gel 0.016% (base equivalent).....46
VALCYTE – valganciclovir hcl for soln 50 mg/ml (base equiv)..... 3
VALCYTE – valganciclovir hcl tab 450 mg.....3
valproate sodium syrup 250 mg/5ml (base equiv) (Depakene).....38
valproic acid cap 250 mg (Depakene)..... 38
valsartan-hydrochlorothiazide tab 160-12.5 mg (Diovan hct)..... 16
valsartan-hydrochlorothiazide tab 160-25 mg (Diovan hct).....16
valsartan-hydrochlorothiazide tab 320-12.5 mg (Diovan hct)..... 16
valsartan-hydrochlorothiazide tab 320-25 mg (Diovan hct).....16
valsartan-hydrochlorothiazide tab 80-12.5 mg (Diovan hct)..... 16
vancomycin hcl cap 125 mg (Vancocin hcl)..... 6
vancomycin hcl cap 250 mg (Vancocin hcl)..... 6
VANDETANIB – vandetanib tab 100 mg.....8
VANDETANIB – vandetanib tab 300 mg.....8
venlafaxine hcl cap sr 24hr 150 mg (base equivalent) (Effexor xr).....28
venlafaxine hcl cap sr 24hr 37.5 mg (base equivalent) (Effexor xr).....28
venlafaxine hcl cap sr 24hr 75 mg (base equivalent) (Effexor xr).....29
VENLAFAXINE HCL ER – venlafaxine hcl tab sr 24hr 225 mg (base equivalent).....29
venlafaxine hcl tab 100 mg..... 29
venlafaxine hcl tab 25 mg..... 29
venlafaxine hcl tab 37.5 mg.....29
venlafaxine hcl tab 50 mg..... 29
venlafaxine hcl tab 75 mg..... 29
venlafaxine hcl tab sr 24hr 150 mg (base equivalent) (Venlafaxine hcl er).....29
venlafaxine hcl tab sr 24hr 37.5 mg (base equivalent) (Venlafaxine hcl er).....29
venlafaxine hcl tab sr 24hr 75 mg (base equivalent) (Venlafaxine hcl er).....29
VENTAVIS – iloprost inhalation solution 10 mcg/ml..... 22
VENTAVIS – iloprost inhalation solution 20 mcg/ml..... 22
VENTOLIN HFA – albuterol sulfate inhal aero 108 mcg/act (90mcg base equiv).....24
verapamil hcl cap sr 24hr 100 mg (Verelan pm)..... 19
verapamil hcl cap sr 24hr 120 mg (Verelan).....19
verapamil hcl cap sr 24hr 180 mg (Verelan).....19
verapamil hcl cap sr 24hr 200 mg (Verelan pm)..... 19
verapamil hcl cap sr 24hr 240 mg (Verelan).....19
verapamil hcl cap sr 24hr 300 mg (Verelan pm)..... 19
verapamil hcl cap sr 24hr 360 mg (Verelan).....19
verapamil hcl tab 120 mg (Calan)..... 19
verapamil hcl tab 80 mg (Calan)..... 19
verapamil hcl tab cr 120 mg (Calan sr)..... 19
verapamil hcl tab cr 180 mg (Calan sr)..... 19
verapamil hcl tab cr 240 mg (Calan sr)..... 19
VERAPAMIL HCL – verapamil hcl tab 40 mg..... 19
VESICARE – solifenacin succinate tab 10 mg..... 26
VESICARE – solifenacin succinate tab 5 mg..... 26
VICTOZA – liraglutide soln pen-injector 18 mg/3ml (6 mg/ml)..... 13
VIDEX – didanosine for soln 2 gm.....5
VIDEX – didanosine for soln 4 gm.....5
VIGAMOX – moxifloxacin hcl ophth soln 0.5% (base equiv)..... 42
VINACAL B – prenat w/o a w/fecbn-feglu-fa tab 20-1 mg & vit b6 tab pak..... 39
VINACAL – prenatal w/o a w/ fe carbonyl-fe gluc-dss-fa tab 27-1mg.....39
VINATE AZ EXTRA – prenatal vit w/ fe bisglycinate chelate-fa tab 29-1 mg..... 39
VINATE AZ – prenatal vit w/ fe bisglycinate chelate-fa tab 27-1 mg..... 39
VINATE CALCIUM – prenatal vit w/ iron carbonyl-fe gluc-fa tab 27-1 mg..... 39
VINATE CARE – prenatal w/o a vit w/ fe fum-fa tab chew 40-1 mg.....39
VINATE C – prenatal w/o a vit w/ fe fumarate-fa tab 30-1 mg..... 39
VINATE DHA – prenat w/o a w/fefum-methylfol-fa-omegas cap 27-1.53 mg.....40
VINATE DHA RF – prenat w/o a w/fefum-methylfol-omegas cap 27-1.13 mg.....40
VINATE GT – prenatal vit w/ dss-iron carbonyl-fa tab 90-1 mg.....40
VINATE IC – prenatal w/o a w/fe fum-fe poly-fa cap 162.115.2-1 mg.....40
VINATE II – prenatal vit w/ fe bisglycinate chelate-fa tab 29-1 mg.....40
VINATE M – prenatal vit w/ sel-fe fumarate-fa tab 27-1 mg..... 40
VINATE ONE – prenatal vit w/ fe fumarate-fa tab 60-1 mg..... 40
VINATE PN CARE – prenatal without a w/ fe asparto gly-doc-fa tab 30-1mg.....40
VINATE ULTRA – prenatal vit w/ dss-iron carbonyl-fa tab 90-1 mg.....40
VIRACEPT – nelfinavir mesylate tab 250 mg.....5
VIRACEPT – nelfinavir mesylate tab 625 mg.....5
VIRAMUNE – nevirapine susp 50 mg/5ml..... 5
VIRAMUNE XR – nevirapine tab sr 24hr 100 mg.....5
VIRAMUNE XR – nevirapine tab sr 24hr 400 mg.....5
VIREAD – tenofovir disoproxil fumarate oral powder 40 mg/gm..... 5
VIREAD – tenofovir disoproxil fumarate tab 150 mg..... 5
VIREAD – tenofovir disoproxil fumarate tab 200 mg..... 5
VIREAD – tenofovir disoproxil fumarate tab 250 mg..... 5
VIREAD – tenofovir disoproxil fumarate tab 300 mg..... 5
VITAMIN K1 – phytonadione inj 10 mg/ml..... 39

VIVELLE-DOT – estradiol td patch biweekly 0.025 mg/24hr....10
VIVELLE-DOT – estradiol td patch biweekly 0.0375 mg/24hr....10
VIVELLE-DOT – estradiol td patch biweekly 0.05 mg/24hr....10
VIVELLE-DOT – estradiol td patch biweekly 0.075 mg/24hr....10
VIVELLE-DOT – estradiol td patch biweekly 0.1 mg/24hr....10
VOLTAREN – diclofenac sodium gel 1%....44
voriconazole for susp 40 mg/ml (Vfend)....3
voriconazole tab 200 mg (Vfend)....3
voriconazole tab 50 mg (Vfend)....3
VOTRIENT – pazopanib hcl tab 200 mg (base equiv)....8
VYVANSE – lisdexamfetamine dimesylate cap 20 mg....31
VYVANSE – lisdexamfetamine dimesylate cap 30 mg....32
VYVANSE – lisdexamfetamine dimesylate cap 40 mg....32
VYVANSE – lisdexamfetamine dimesylate cap 50 mg....32
VYVANSE – lisdexamfetamine dimesylate cap 60 mg....32
VYVANSE – lisdexamfetamine dimesylate cap 70 mg....32

W

warfarin sodium tab 10 mg (Coumadin)....42
warfarin sodium tab 1 mg (Coumadin)....41
warfarin sodium tab 2.5 mg (Coumadin)....42
warfarin sodium tab 2 mg (Coumadin)....42
warfarin sodium tab 3 mg (Coumadin)....42
warfarin sodium tab 4 mg (Coumadin)....42
warfarin sodium tab 5 mg (Coumadin)....42
warfarin sodium tab 6 mg (Coumadin)....42
warfarin sodium tab 7.5 mg (Coumadin)....42
WELCHOL – colesevelam hcl packet for susp 3.75 gm. 20
WELCHOL – colesevelam hcl tab 625 mg....20

X

XALKORI – crizotinib cap 200 mg....8
XALKORI – crizotinib cap 250 mg....8
XARELTO – rivaroxaban tab 10 mg....42
XARELTO – rivaroxaban tab 15 mg....42
XARELTO – rivaroxaban tab 20 mg....42
XENAZINE – tetrabenazine tab 12.5 mg....33
XENAZINE – tetrabenazine tab 25 mg....33
XERAC AC – aluminum chloride in alcohol solution 6.25%....46
XIFAXAN – rifaximin tab 550 mg....6
XOLAIR – omalizumab for inj 150 mg....24
XTANDI – enzalutamide cap 40 mg....8

Y

Z

zafirlukast tab 10 mg (Accolate)....24
zafirlukast tab 20 mg (Accolate)....24
zaleplon cap 10 mg (Sonata)....30
zaleplon cap 5 mg (Sonata)....30
ZELBORAF – vemurafenib tab 240 mg (base equivalent)8
ZENPEP – pancrelipase (lip-prot-amyl) dr cap 10000-34000-55000 unit....25
ZENPEP – pancrelipase (lip-prot-amyl) dr cap 15000-51000-82000 unit....25
ZENPEP – pancrelipase (lip-prot-amyl) dr cap 20000-68000-109000 unit....25
ZENPEP – pancrelipase (lip-prot-amyl) dr cap 25000-85000-136000 unit....25
ZENPEP – pancrelipase (lip-prot-amyl) dr cap 3000-10000-16000 unit....25
ZENPEP – pancrelipase (lip-prot-amyl) dr cap 5000-17000-27000 unit....25
ZIAGEN – abacavir sulfate soln 20 mg/ml (base equiv)... 5
zidovudine cap 100 mg (Retrovir)....5
zidovudine syrup 10 mg/ml (Retrovir)....5
zidovudine tab 300 mg....5
ziprasidone hcl cap 20 mg (Geodon)....30
ziprasidone hcl cap 40 mg (Geodon)....30
ziprasidone hcl cap 60 mg (Geodon)....30
ziprasidone hcl cap 80 mg (Geodon)....30
ZITHROMAX – azithromycin powd pack for susp 1 gm....2
ZOLINZA – vorinostat cap 100 mg....8
zolmitriptan orally disintegrating tab 2.5 mg (Zomig zmt)....36
zolmitriptan orally disintegrating tab 5 mg (Zomig zmt)....36
zolmitriptan tab 2.5 mg (Zomig)....36
zolmitriptan tab 5 mg (Zomig)....36
zolpidem tartrate tab 10 mg (Ambien)....30
zolpidem tartrate tab 5 mg (Ambien)....30
zolpidem tartrate tab cr 12.5 mg (Ambien cr)....30
zolpidem tartrate tab cr 6.25 mg (Ambien cr)....30
zonisamide cap 100 mg (Zonegran)....38
zonisamide cap 25 mg (Zonegran)....38
zonisamide cap 50 mg....38
ZORTRESS – everolimus tab 0.25 mg....47
ZORTRESS – everolimus tab 0.5 mg....47
ZORTRESS – everolimus tab 0.75 mg....47
ZOVIA 1/50E – ethynodiol diacetate & ethinyl estradiol tab 1 mg-50 mcg....11
ZYCLARA – imiquimod cream 3.75%....46
ZYCLARA PUMP – imiquimod cream 2.5%....46
ZYCLARA PUMP – imiquimod cream 3.75%....46
ZYKADIA – ceritinib cap 150 mg....8
ZYLET – loteprednol etabonate-tobramycin ophth susp 0.5-0.3%....42
ZYTIGA – abiraterone acetate tab 250 mg....8
ZYVOX – linezolid for susp 100 mg/5ml....6
ZYVOX – linezolid tab 600 mg....6

Attachment 17

Attachment 17

Pharmacy Reporting

PRIME THERAPEUTICS®

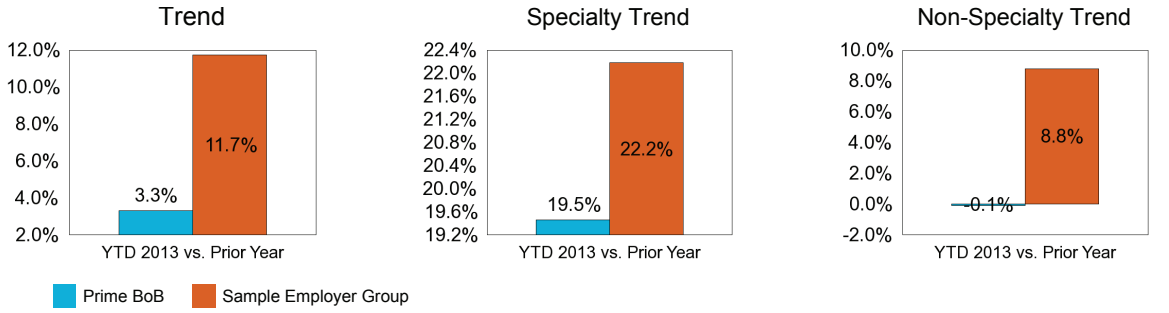
Sample Employer Group,
Group Review Trend Performance Suite

Year to Date through Quarter 4, 2013

Helping people get the medicine they need to feel better
and live well through smart pharmacy benefit management

Executive Summary

4.2%	5.8%	1.5%	11.7%
utilization	**inflation**	**mix**	**drug trend**
change in number of drugs used	change in unit cost of drugs	change in high cost verses low cost drugs	change in total cost per member, per month



At Prime, people are at the center of everything we do. We help keep medicine more affordable. We deliver superior experiences. And we leverage our unique connections to drive better outcomes and lower costs for everyone.

Key Performance Indicators

	YTD Q4, 13	YTD Q4, 12	Chg	Prime BoB	Prime % Chg
Average Members Per Month	7,072	7,277	-2.8%	--	--
Total Cost	$6,913,831	$6,366,520	8.6%	--	--
Plan Paid	$5,820,066	$5,256,428	10.7%	--	--
Member Paid	$1,093,766	$1,110,092	-1.5%	--	--
Total Cost PMPM	$81.47	$72.91	11.7%		
Plan Paid PMPM	$68.58	$60.20	13.9%		
Member Paid PMPM	$12.89	$12.71	1.4%		
Member Contribution	15.8%	17.4%	-1.6 pts		
Specialty Total Cost*	$1,660,164	$1,398,070	18.7%	--	--
Specialty Total Cost PMPM*	$19.56	$16.01	22.2%		
Avg Ing Cost/Rx	$76.98	$71.68	7.4%		
PMPY - Rxs	12.5	11.99	4.2%		
Generic Utilization	80.0%	78.2%	1.8 pts		
90 Day Rx Utilization (Mail)	1.4%	0.7%	0.6 pts		
90 Day Rx Utilization (ESN)	-0.1%	-0.1%	-0.1 pts		

*Specialty metrics are derived from Prime's standard specialty drug management list

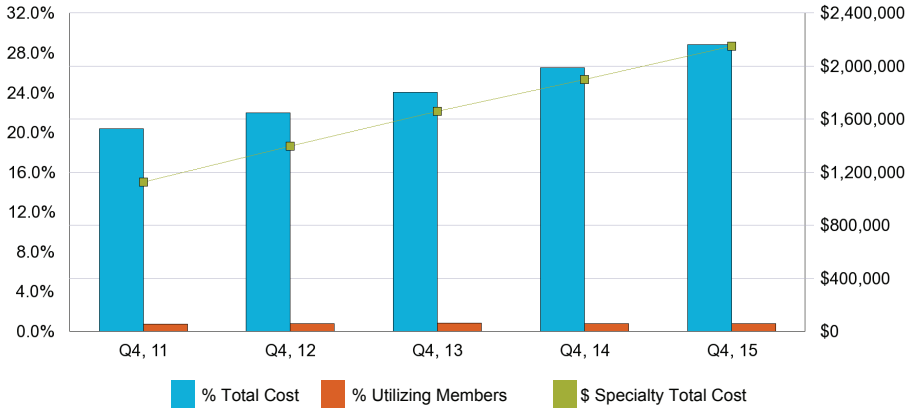
2.2%	11.9%	6.8%	22.2%
utilization	**inflation**	**mix**	**drug trend**
change in number of drugs used	change in unit cost of drugs	change in high cost verses low cost drugs	change in total cost per member, per month

Despite the small number of specialty drugs used, they will have a huge impact on total costs. Specialty drugs represent 0.61% of all prescriptions, but still account for 24.0% of total drug cost.

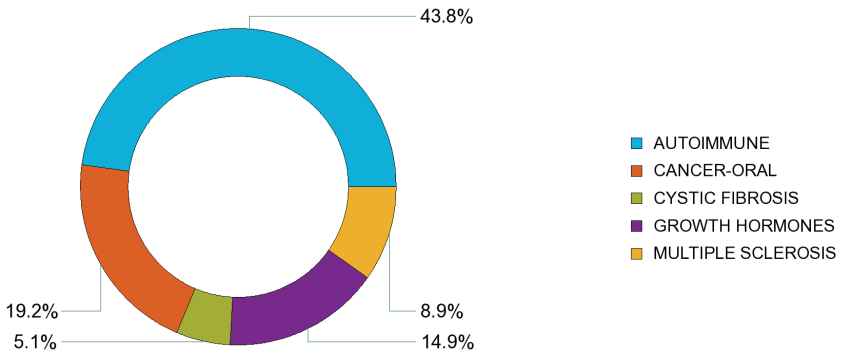
Key Performance Indicators

	YTD Q4, 13	YTD Q4, 12	Chg	Prime BoB
# Rxs	452	454	-0.4%	--
PMPY - RXs	0.07	0.07	2.3%	0.05
% Rxs	0.61%	0.61%	0.00 pts	0.38%
Specialty Total Cost	$1,660,164	$1,398,070	18.7%	--
Specialty Total Cost PMPM	$19.56	$16.01	22.2%	
% Total Cost	24.0%	22.0%	2.1 pts	20.2%
Avg Ing Cost/Rx	$3,495.89	$2,924.15	19.6%	

Specialty Trend



Top Therapeutic Classes account for 91.8% of all Specialty Cost



Specialty costs are expected to push overall drug trend into double digits soon. As costly new drugs continue to emerge, we can help keep medicine affordable — for you and your members. Our national scale, experience and big-picture view will work for you to deliver superior service and lower costs.

Specialty Drug Utilization by Volume*

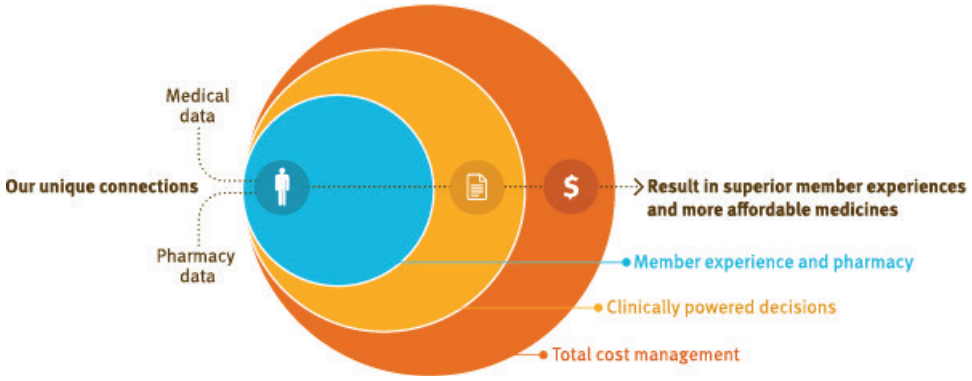
Q4, 13 Rank	Q4, 12 Rank	Drug Name	Therapeutic Class	Utilizing Members	# Rxs	Avg Ing Cost/Rx Current Paid	Avg Ing Cost/Rx Previous Paid
1	1	HUMIRA PEN	AUTOIMMUNE	14	124	$3,060	$2,722
2	2	ENBREL	AUTOIMMUNE	6	59	$2,331	$2,030
3	5	OMNITROPE	GROWTH HORMONES	5	46	$4,859	$4,335
4	3	ENBREL SURECLICK	AUTOIMMUNE	6	45	$2,324	$2,105
5	6	REBIF	MULTIPLE SCLEROSIS	3	25	$4,362	$3,693
6	12	AMPYRA	MULTIPLE SCLEROSIS	2	21	$1,484	$1,351
6	18	ORENCIA	AUTOIMMUNE	3	21	$2,433	$2,239
8	4	GLEEVEC	CANCER-ORAL	2	17	$6,776	$5,973
8	7	PULMOZYME	CYSTIC FIBROSIS	4	17	$3,692	$2,968
10	8	HUMIRA	AUTOIMMUNE	2	15	$2,366	$2,795

*Specialty metrics are derived from Prime's standard specialty drug management list

Prime Therapeutics Specialty Pharmacy™ (Prime Specialty Pharmacy) is a state-of-the-art, full-service pharmacy backed by major accreditation and more than 100 experts.

Prime Specialty Pharmacy

- Benefit design consultation
- Formulary options
- Utilization management options
- Member-centered support services
- Specialty drug pipeline analysis



Our in-house specialty pharmacy has everything you need to drive better outcomes, experiences and savings. People using Prime Specialty Pharmacy are shown to have higher adherence, which can lead to improved outcomes and fewer costly hospital stays. And they're supported 24/7/365 by nurses and pharmacists, so when questions arise, answers are always just a call away.

Specialty Claim Distribution*

Channel	# Util Mbrs	# of Rxs	% Total Cost	Ingredient Cost	Dispensing Fee	Mandatory PSP Est. Ing Cost	Mandatory PSP Est. Savings
Prime Specialty Pharmacy (PSP)	13	85	18.6%	$331,108	$0	$329,736	$1,372
Retail Pharmacy	51	424	63.8%	$1,130,856	$20	$1,130,856	$0
Specialty Vendors	13	80	17.6%	$313,514	$6	$312,311	$1,208
TOTAL	**N/A**	**589**	**100.0%**	**$1,775,478**	**$26**	**$1,773,310**	**$2,580**

*Claims based on the specialty drug management list of the specific employer group

utilization

change in number of drugs used

inflation

change in unit cost of drugs

mix

change in high cost verses low cost drugs

drug trend

change in total cost per member, per month

Top 15 Drugs (Non-Specialty) by Plan Paid*

Q4, 13 Rank	Q4, 12 Rank	Drug Name	Therapeutic Class	Plan Paid PMPM	Avg Ing Cost/Rx	Mbr Paid PMPM	# Rxs
1	1	ATRIPLA	HIV	$1.35	$1,923.85	$0.02	61
2	6	ANDROGEL PUMP	NOT IN CORE AREAS	$1.30	$450.99	$0.12	267
3	2	NEXIUM	PPIs	$1.20	$228.22	$0.24	536
4	7	AMPHETAMINE/DEXTROAMPH	ADHD	$1.13	$117.18	$0.15	924
5	9	ABILIFY	OTHER - ANTIPSYCHOTIC	$1.06	$742.14	$0.09	132
6	5	CYMBALTA	DEPRESSION	$1.03	$248.64	$0.18	415
7	3	CRESTOR	ANTIHYPERLIPIDEMIC	$1.02	$169.01	$0.20	613
8	4	ADVAIR DISKUS	ASTHMA/COPD	$0.81	$270.24	$0.12	296
9	13	VYVANSE	ADHD	$0.68	$181.49	$0.20	414
10	14	NOVOLOG	DIABETES	$0.65	$448.44	$0.04	132
11	10	VALACYCLOVIR HCL	NOT IN CORE AREAS	$0.52	$79.18	$0.05	612
12	361	METHYLPHENIDATE HCL ER	ADHD	$0.50	$157.49	$0.02	280
13	23	LANTUS SOLOSTAR	DIABETES	$0.49	$240.59	$0.06	196
14	19	NOVOLOG FLEXPEN	DIABETES	$0.46	$342.97	$0.03	125
15	37	VICTOZA	DIABETES	$0.45	$457.72	$0.03	90

*Specialty claims are exclueded based on Prime's standard specialty drug management list

Prime leads the market in managing traditional drug costs. Our drug trend is consistently lower than the industry standard.That means we're doing our job — making the medicine members need to feel better and live well more affordable.

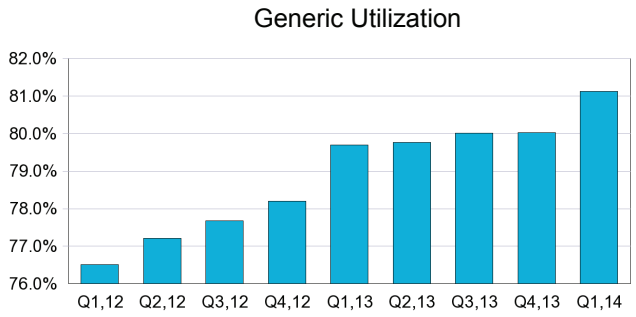
Therapeutic Class Summary

	Utilizing Members		PMPY - Rxs		Total Cost PMPM		Generic Utilization	
Category	YTD Q4, 13	YTD Q4, 12	YTD Q4, 13	YTD Q4, 12	YTD Q4, 13	YTD Q4, 12	YTD Q4, 13	YTD Q4, 12
High Cholesterol	739	762	0.92	0.87	$3.57	$3.95	80.7%	75.0%
Diabetes	318	311	0.62	0.57	$6.37	$5.04	45.4%	46.2%
Hypertension	1,118	1,167	1.90	1.83	$3.05	$3.17	93.3%	92.0%
Depression	850	923	0.93	0.92	$2.96	$3.47	88.8%	86.0%
Asthma/COPD	744	778	0.42	0.38	$3.56	$4.01	39.3%	20.3%

A 4.98 pt increase in generic utilization leads to $516,463 in savings*

Prime Products & Services can increase Generic Utilization Rate

- Utilization Management
- Formulary
- Benefit Design



Generic Trend

	YTD Q4, 13			YTD Q4, 12			Chg			Prime BoB	
	# Rxs	% Rxs	Avg Ing Cost/Rx	# Rxs	% Rxs	Avg Ing. Cost/Rx	# Rxs	Pts	Avg Ing Cost/Rx	% Rxs	Avg Ing Cost/Rx
Generic Utilization	58,044	80.0%	$21.81	57,373	78.2%	$21.07	8.6%	1.8	3.5%	80.2%	$19.72

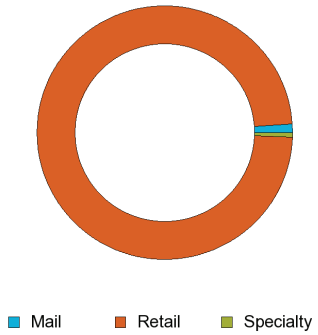
Generic Opportunity

				$ Avg Total Cost		% Generic Target Rates**			$ Target Savings		
Therapeutic Class	**$ Cost**	**% Cost**	**% Generic**	**Generic**	**Brand**	**Low**	**Med**	**High**	**Low**	**Med**	**High**
ADHD	390,290	5.6%	59.7%	$126.53	$215.38	40.0%	50.0%	65.0%	Already Met	Already Met	$27,274
ANTIHYPERLIPIDEMIC	302,650	4.4%	80.7%	$16.00	$175.29	75.0%	85.0%	95.0%	Already Met	$134,379	$201,568
ASTHMA/COPD	302,343	4.4%	39.3%	$40.31	$142.82	45.0%	55.0%	65.0%	$47,467	$74,488	$101,510
DIABETES	540,287	7.8%	45.4%	$16.64	$212.30	45.0%	50.0%	60.0%	Already Met	$180,966	$242,384
PAIN	299,156	4.3%	91.2%	$21.27	$263.82	85.0%	93.0%	97.0%	Already Met	$38,798	$104,840
TOTAL	**1,834,726**	**26.5%**	**69.8%**	**29.68**	**192.95**				**$47,467**	**$428,632**	**$677,576**
% Savings									**2.6%**	**23.4%**	**36.9%**

**Generic Target Savings rates are determined by Prime's Clinical Team

*This information is only an estimate and should not be considered binding

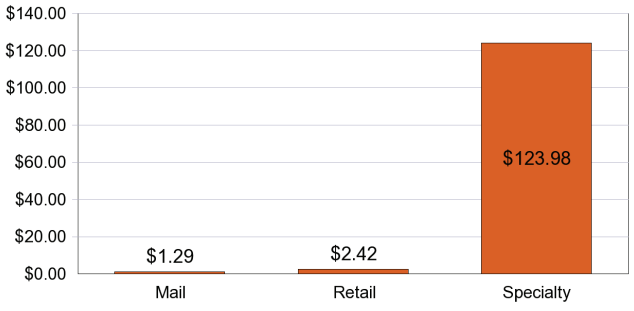
Rxs by Channel



Cost by Channel

	Retail	Mail	ESN	Specialty
# Rxs	72,150	907	--	452
% Rxs	98.2%	1.2%	--	0.6%
% Total Cost	74.6%	1.4%	--	24.0%
Avg Total Cost/Rx	$59.16	$38.54	--	$3,495.89
Avg Plan Paid/Rx	$48.04	$32.25	--	$3,450.27
Avg Total Cost/Day	$2.42	$1.29	--	$123.98
Generic Utilization	80.2%	86.9%	--	2.1%
Member Contribution	20.4%	16.3%	--	1.5%

Avg Cost per Day by Channel



Prime serves 25 million members nationwide, and we handle over 200 million claims each year. Our size, market share and expertise result in market-leading generic rates, net-ingredient costs and drug trend. And that means sizable savings for you. Because of our unique ownership structure, we pass savings on to clients — not shareholders.

Thank you for choosing Prime. This report is part of our efforts to help you gauge the financial performance of your pharmacy benefit. We're dedicated to helping you clearly see the whole picture and drive down your total cost of care — so your employees can get the medicine they need to feel better and live well.

Pharmacy Management Continuum

	Company A Not Managed	Company B Lightly Managed	Company C Managed	Company D Highly Managed	Company E Aggressively Managed
Specialty	Open specialty benefit	Open specialty network	Exclusive specialty network	Exclusive specialty program	Exclusive specialty program
Formulary	Commercial	Commercial	Commercial	Commercial	GenPlus
Quantity Limit/ Prior Authorization	None	All applicable classes	All applicable classes	All applicable classes	All applicable classes
Mail Service and % 90 day Rx	0	< 5%	Incented 5-10%	Mandatory 10-20%	Mandatory > 20%
Employee Cost Share	< 15%	15-20%	20-25%	25-30%	> 30%
Generic Utilization	68%	71%	74%	80%	87%
Retail Network	Open retail network	Open retail network	Open retail network	Open retail network	Narrower retail network
Step Therapy	None	Basic	Preferred	Preferred or enhanced	Preferred

Connected specialty drug management

With specialty costs projected to double in the next five years, proactively managing these expenses now is crucial. Our end-to-end specialty pharmacy, high-touch care management and suite of clinical solutions can help you lower the total cost of care while delivering superior member experiences.

Mail-delivery pharmacy services

Are you taking full advantage of mail-order pharmacy services savings? PrimeMail® offers sizable savings through bulk purchasing, elimination of dispensing fees and improved adherence. Plus, it provides added convenience and privacy for members.

Traditional drug management

They don't garner as much attention as specialty medicines, but traditional drugs account for 99 percent of claims. With a leading generic rate, a big-picture perspective and the expertise that comes along with serving more than 25 million members, we can help you streamline and save in this arena.

Utilization management (UM) programs

Our programs are built on the fact that members who adhere to their drug therapy are more likely to have better health outcomes and lower overall care costs. Through UM, we can help you manage your members' drug use patterns to help you achieve both of these goals.

Pipeline Watch

Generic Name	Brand Name	Manufacturer Name	Indication(s)	Route of Administration	Approval Date*
apremilast	N/A	Celgene	Psoriatic arthritis	Oral	Anytime
recombinant factor IX	Alprolix™	Biogen	Hemophilia B	Intravenous infusion	April 2014
recombinant human C1 esterase inhibitor	Ruconest™	Santarus/Pharming	Hereditary angioedema	Intravenous infusion	April 2014
siltuximab	N/A	J&J	Castleman disease	Intravenous infusion	May 2014
vedolizumab	Entyvio™	Takeda	Ulcerative colitis	Intravenous infusion	May 2014
peginterferon beta 1a	Plegridy™	Biogen	Multiple sclerosis	Subcutaneous injection	May 2014
dexamethasone, intravitreal implant	Ozurdex Eloctate®	Allergan	Diabetic macular edema	Intravitreal implant	June 2014
recombinant factor VIII Fc fusion protein	Eloctate™	Biogen	Hemophilia A	Intravenous infusion	June 2014
corifollitropin alfa	N/A	Merck	Fertility	Subcutaneous injection	July 2014

* Expected approval dates are predictions made by Prime Therapeutics based on industry information

Attachment 18

Attachment 18

Specialty Drug Listing

Blue Cross Blue Shield of North Dakota
Specialty Drug List

Specialty Drug – medications or drugs that are generally high cost and may have other considerations such as special drug administration, limited availability, unique delivery and dispensing or unique and/or required patient support or monitoring.

Use of some products identified by **[PA]** may be approved only after certain criteria are met. If prior approval is not obtained, benefits may be denied if criteria are not met. A physician (or clinic personnel) should submit a written request to the address shown below for prior approval consideration. **Both brand name drugs and generic equivalents require Prior Approval.**

Mail to:
BCBSND
Attn: Medical Management
4510 13th Ave S
Fargo, ND 58121

Fax to: (701) 277-2253

CATEGORY	BRAND NAME(S)	GENERIC NAME	PA required
AUTOIMMUNE INFLAMMATORY DISORDERS	ACTEMRA	TOCILIZUMAB	[PA]
	AMEVIVE	ALEFACEPT	[PA]
	ARCALYST	RILONACEPT	[PA]
	ENBREL	ETANERCEPT	[PA]
	HUMIRA	ADALIMUMAB	[PA]
	ILARIS	CANAKINUMAB	[PA]
	KINERET	ANAKINRA	[PA]
	ORENCIA	ABATACEPT	[PA]
	OTEZLA	APREMILAST	
	SIMPONI/SIMPONI ARIA	GOLIMUMAB	[PA]
	XELJANZ	TOFACITINIB	[PA]
BLOOD MODIFIERS	ARANESP	DARBEPOETIN ALFA	
	EPOGEN	EPOETIN ALFA	
	LEUKINE	SARGRAMOSTIM	
	NEULASTA	PEGFILGRASTIM	
	NEUMEGA	OPRELVEKIN	
	NEUPOGEN	FILGRASTIM	
	NPLATE	ROMIPLOSTIM	[PA]
	PROCRIT	EPOETIN ALFA	
	PROMACTA	ELTROMBOPAG	[PA]
CANCER-ORAL	AFINITOR/AFINITOR DISPERZ	EVEROLIMUS	[PA]
	BOSULIF	BOSUTINIB	[PA]
	CAPRELSA	VANDETANIB	[PA]
	COMETRIQ	CABOZANTINIB S-MAL	[PA]
	ERIVEDGE	VISMODEGIB	[PA]
	GILOTRIF	AFATINIB	
	GLEEVEC	IMATINIB	[PA]
	HEXALEN	ALTRETAMINE	
	HYCAMTIN	TOPOTECAN	[PA]
	ICLUSIG	PONATINIB	[PA]
	IMBRUVICA	IBRUTINIB	[PA]
	INLYTA	AXITINIB	[PA]

CATEGORY	BRAND NAME(S)	GENERIC NAME	PA required
CANCER-ORAL (con't)	JAKAFI	RUXOLITINIB	[PA]
	LYSODREN	MITOTANE	
	MATULANE	PROCARBAZINE	
	MEKINIST	TRAMETINIB	[PA]
	NEXAVAR	SORAFENIB	[PA]
	POMALYST	POMALIDOMIDE	
	REVLIMID	LENALIDOMIDE	[PA]
	SPRYCEL	DASATINIB	[PA]
	STIVARGA	REGORAFENIB	[PA]
	SUTENT	SUNITINIB	[PA]
	TAFINLAR	DABRAFENIB	[PA]
	TARCEVA	ERLOTINIB	[PA]
	TARGRETIN	BEXAROTENE	
	TASIGNA	NILOTINIB	[PA]
	TEMODAR	TEMOZOLOMIDE	
	THALOMID	THALIDOMIDE	[PA]
	TRETINOIN	TRETINOIN	
	TYKERB	LAPATINIB	[PA]
	VANDETANIB	VANDETANIB	[PA]
	VOTRIENT	PAZOPANIB	[PA]
	XALKORI	CRIZOTINIB	[PA]
	XELODA	CAPECITABINE	[PA]
	XTANDI	ENZALUTAMIDE	[PA]
	ZELBORAF	VEMURAFENIB	[PA]
	ZOLINZA	VORINOSTAT	[PA]
	ZYKADIA	CERITINIB	
	ZYTIGA	ABIRATERONE	[PA]
CANCER- INJECTABLE	SYLATRON	PEGINTERFERON ALFA-2B	
CYSTIC FIBROSIS	CAYSTON	AZTREONAM	[PA]
	KALYDECO	IVACAFTOR	[PA]
	PULMOZYME	DORNASE ALFA	
	TOBI/TOBI PODHALR	TOBRAMYCIN NEBU SOLN	
	BETHKIS	TOBRAMYCIN NEBU SOLN	
ENZYME DEFICIENCIES	BUPHENYL	SODIUM PHENYLBUTYRATE	
	CARBAGLU	CARGLUMIC ACID	[PA]
	CYSTAGON	CYSTEAMINE BITARTRATE	
	CYSTARAN	CYSTEAMINE HCL	
	KUVAN	SAPROPTERIN	[PA]
	PROCYSBI	CYSTEAMINE BITARTRATE	
	RAVICTI	GLYCEROL PHENYLBUTYRATE	
	SUCRAID	SACROSIDASE	[PA]
	ZAVESCA	MIGLUSTAT	[PA]
GROWTH HORMONES	GENOTROPIN, HUMATROPE, NORDITROPIN, NUTROPIN/ NUTROPIN AQ, OMNITROPE, SAIZEN, SEROSTIM, TEV-TROPIN, ZORBTIVE	SOMATROPIN	[PA]
	INCRELEX	MECASERMIN	[PA]

CATEGORY	BRAND NAME(S)	GENERIC NAME	PA required
HEPATITIS	COPEGUS	RIBAVIRIN	
	INCIVEK	TELAPREVIR	[PA]
	INFERGEN	INTERFERON ALFACON	
	INTRON A	INTERFERON ALFA-2B	
	MODERIBA	RIBAVIRIN	
	OLYSIO	SIMEPRIVIR	[PA]
	PEGASYS	PEGINTERFERON ALFA-2A	
	PEG-INTRON	PEGINTERFERON ALFA-2B	
	REBETOL	RIBAVIRIN	
	RIBAPAK, RIBASPHERE, RIBATAB	RIBAVIRIN	
	SOVALDI	SOFOSBUVIR	[PA]
	VICTRELIS	BOCEPREVIR	[PA]
HIV	EGRIFTA	TESAMORELIN ACETATE	
	FUZEON	ENFUVIRTIDE	
INFERTILITY	BRAVELLE	UROFOLLITROPIN	
	CETROTIDE	CETRORELIX ACETATE	
	FOLLISTIM AQ	FOLLITROPIN BETA	
	GANIRELIX ACETATE	GANIRELIX ACETATE	
	GONAL-F	FOLLITROPIN ALFA	
	LUVERIS	LUTROPIN ALFA	
	MENOPUR	MENOTROPINS	
	NOVAREL	CHORIONIC GONADOTROPIN	
	OVIDREL	CHORIONIC GONADOTROPIN	
	PREGNYL	CHORIONIC GONADOTROPIN	
	REPRONEX	MENOTROPINS	
LUNG DISORDERS	ACTIMMUNE	INTERFERON GAMMA-1B	[PA]
MULTIPLE SCLEROSIS	AMPYRA	DALFAMPRIDINE	
	AUBAGIO	TERIFLUNOMIDE	[PA]
	AVONEX	INTERFERON BETA-1A	[PA]
	BETASERON	INTERFERON BETA-1B	[PA]
	COPAXONE	GLATIRAMER ACETATE	[PA]
	EXTAVIA	INTERFERON BETA-1B	[PA]
	GILENYA	FINGOLIMOD	[PA]
	REBIF	INTERFERON BETA-1A	[PA]
	TECFIDERA	DIMETHYL FUMARATE	[PA]
PULMONARY HYPERTENSION	ADCIRCA	TADALAFIL	[PA]
	ADEMPAS	RIOCIGUAT	[PA]
	LETAIRIS	AMBRISENTAN	[PA]
	OPSUMIT	MACITENTAN	[PA]
	ORENITRAM	TREPROSTINIL	[PA]
	REVATIO	SILDENAFIL CITRATE	[PA]
	TRACLEER	BOSENTAN	[PA]
	TYVASO	TREPROSTINIL	[PA]
	VENTAVIS	ILOPROST	[PA]
OTHERS	ALFERON N	INTERFERON ALFA-N3	
	APOKYN	APOMORPHINE	[PA]

CATEGORY	BRAND NAME(S)	GENERIC NAME	PA required
OTHERS (con't)	BERINERT	C1 ESTERASE INHIBITOR	
	CHENODAL	CHENODIOL	**[PA]**
	CUPRIMINE, DEPEN	PENICILLAMINE	
	EXJADE	DEFERASIROX	
	FERRIPROX	DEFERIPRONE	
	FIRAZYR	ICATIBANT ACETATE	
	FORTEO	TERIPARATIDE	**[PA]**
	GATTEX	TEDUGLUTIDE	
	JUXTAPID	LOMITAPIDE	**[PA]**
	KALBITOR	ECALLANTIDE	
	KORLYM	MIFEPRISTONE	
	KYNAMRO	MIPOMERSEN SODIUM	
	LUPRON	LEUPROLIDE ACETATE	
	LUPRON DEPOT	LEUPROLIDE ACETATE	
	LUPRON DEPOT-PED	LEUPROLIDE ACETATE	
	MYALEPT	METRELEPTIN	
	SAMSCA	TOLVAPTAN	**[PA]**
	SIGNIFOR	PASIREOTIDE	
	SYPRINE	TRIENTINE HCL	
	VALCHLOR	MECHLORETHAMINE	
	XENAZINE	TETRABENAZINE	**[PA]**
	XYREM	SODIUM OXYBATE	

Attachment 19

Attachment 19

Attachment 19

Pharmacy Network

NCPDP	NPI	Pharmacy Name	Address Line 1	Address Line 2	City	State	Zip
3500736	1811939416	NDSU STUDENT HEALTH SERVICE PHARMAC	1707 CENTENNIAL BLVD		FARGO	ND	58102
3504683	1790004182	DRAYTON DRUG	104 E HIGHWAY 66		DRAYTON	ND	58225
3502451	1194805796	FAMILY HEALTHCARE PHARMACY, NDSU	301 NP AVENUE		FARGO	ND	58102
3501170	1164579249	LARIMORE DRUG AND GIFT INC	203 TOWNER AVE		LARIMORE	ND	58251
3501853	1568408581	LARSEN SERVICE DRUG INC	244 N MAIN ST		WATFORD CITY	ND	58854
3504099	1093891095	LARSEN SERVICE DRUG INC	334 MAIN STREET		NEW TOWN	ND	58763
3503934	1689895427	TRENTON COMM CLN TRENTON INDIAN SVC	331 4TH AVE E		TRENTON	ND	58853
3500394	1730177510	CASSELTON HEALTH MART DRUG	622 FRONT STREET		CASSELTON	ND	58012
3504277	1982655049	ARTHUR DRUG	340 MAIN ST		ARTHUR	ND	58006
3504380	1740228774	GRAFTON DRUG	501 HILL AVE		GRAFTON	ND	58237
3500229	1295778082	BEULAH DRUG COMPANY	147 W MAIN		BEULAH	ND	58523
3500344	1023193554	BOWMAN DRUG	12 NORTH MAIN		BOWMAN	ND	58623
3500469	1881705499	J CO DRUG INC	120 N MAIN		CROSBY	ND	58730
3500635	1023036050	ECONOMY DRUG INC	201 N MAIN ST	PO BOX 308	ELGIN	ND	58533
3500659	1811031511	ELLENDALE PHARMACY	117 MAIN ST		ELLENDALE	ND	58436
3500801	1417945080	FORMAN DRUG INC	330 MAIN ST S		FORMAN	ND	58032
3500851	1619151206	GLEN ULLIN DRUG	113 S MAIN ST		GLEN ULLIN	ND	58631
3501144	1417968074	LAKOTA DRUG	117 MAIN ST		LAKOTA	ND	58344
3501485	1104927094	NAPOLEON DRUG	214 MAIN AVE		NAPOLEON	ND	58561
3501497	1588770440	NEW ENGLAND DRUG	713 E MAIN		NEW ENGLAND	ND	58647
3501536	1063690774	PAUL BILDEN PHARMACY	10 N MAIN ST		NORTHWOOD	ND	58267
3501601	1184669616	THE COUNTRY DRUG STORE	116 NORTH AVE EAST		RICHARDTON	ND	58652
3501714	1689725434	TIOGA DRUG INC	106 N MAIN ST		TIOGA	ND	58852
3502033	1144231705	NORTHBROOK DRUG	1929 N WASHINGTON ST	STE C	BISMARCK	ND	58501
3502766	1578588307	WISHEK DRUG INC	9 S CENTENNIAL		WISHEK	ND	58495
3503263	1770639130	ARROWHEAD PLAZA DRUG INC	1116 N 3RD ST		BISMARCK	ND	58501
3503504	1932241676	NILLES DRUG INC	58 MAIN AVE S		FESSENDEN	ND	58438
3503542	1386664829	LINSON PHARMACY	3175 25TH ST S		FARGO	ND	58103
3503744	1508972936	KILLDEER PHARMACY INC	14 CENTRAL AVE S		KILLDEER	ND	58640
3504025	1245347368	BEACH PHARMACY INC	95 CENTRAL AVE		BEACH	ND	58621
3504190	1982734042	CENTER FOR FAMILY MEDICINE PHARMACY	1201 11TH AVE SW		MINOT	ND	58701
3502982	1922000108	HOLIDAY PROFESSIONAL PHARMACY	1140 E. BISMARCK EXPRESSWAY		BISMARCK	ND	58504
3502944	1639254113	PRESCRIPTION CENTER PHARMACY	2701 13TH AVE S		FARGO	ND	58103
3503388	1396723797	SOUTHPOINTE PHARMACY	2400 32ND AVE S		FARGO	ND	58103
3501118	1396871216	KENMARE DRUG	109 NW 1ST AVE		KENMARE	ND	58746
3501790	1376646315	VELVA DRUG COMPANY	16 N MAIN ST		VELVA	ND	58790
3502312	1114055324	CHASE PHARMACY INC	21 N MAIN		GARRISON	ND	58540
3500445	1558379248	ALMKLOVS PHARMACY	848 BURREL AVE		COOPERSTOWN	ND	58425
3501473	1255486908	MOTT DRUG STORE	216 BROWN AVE		MOTT	ND	58646
3501625	1235140898	ROLLA DRUG INC	117 MAIN AVE E		ROLLA	ND	58367
3501738	1780699314	TURTLE LAKE REXALL DRUG	218 MAIN		TURTLE LAKE	ND	58575
3501841	1265548101	CHASE DRUG STORE	703 MAIN AVE		WASHBURN	ND	58577
3503617	1053414565	WALHALLA PRESCRIPTION SHOP	1102 CENTRAL AVE		WALHALLA	ND	58282

3504607	1982859617	NEUMANN DRUG	412 MAIN STREET		CANDO	ND	58324
3504859	1508120205	ROCKVIEW PHARMACY	307 3RD ST NE		PARSHALL	ND	58770
3502273	1720020324	YE OLDE MEDICINE CENTER	503 PARK ST WEST		PARK RIVER	ND	58270
3503794	1407861040	YE OLDE MEDICINE CENTER	102 DIVISION AVE S		CAVALIER	ND	58220
3500990	1710024807	HAZEN DRUG	30 MAIN ST W		HAZEN	ND	58545
3501310	1609908631	AASEN DRUG INC	15 MAIN ST E		MAYVILLE	ND	58257
3504532	1811153505	TAT TWIN BUTTES TELEPHARMACY	726 80 AVE NW		HALLIDAY	ND	58636
3504544	1801052592	TAT PARSHALL PHARMACY	107 3RD ST SE		PARSHALL	ND	58770
3504556	1124284914	TAT WHITE TELE PHARMACY	2 MAIN STREET B		ROSEGLEN	ND	58775
3504568	1063678779	TAT MANADREE TELEPHARMACY	305 MAIN STREET		MANDAREE	ND	58757
3504594	1467611970	ELBOWOODS PHARMACY	1058 COLLEGE DRIVE		NEW TOWN	ND	58763
3504342	1043260722	NORTH DAKOTA STATE HOSPITAL PHARMAC	2605 CIRCLE DR		JAMESTOWN	ND	58401
3504671	1982927406	WALLSLTC PHARMACY	1020 S WASHINGTON		GRAND FORKS	ND	58201
3501702	1437179371	STEELE DRUG	101 W BROADWAY		STEELE	ND	58482
3500899	1649363144	DEVELOPMENTAL CENTER PHARMACY	701 W 6TH ST		GRAFTON	ND	58237
3501079	1508924622	JAMESTOWN HOSPITAL PHARMACY	2422 20TH ST SW		JAMESTOWN	ND	58401
3504835	1730453366	SEIP DRUG #13	550 13TH AVE E STE B		WEST FARGO	ND	58078
3504847	1538428610	CENTER FOR FAMILY MEDICINE PHARMACY	701 E ROSSER		BISMARCK	ND	58501
3504900	1194922328	VALLEY HEALTH	360 DIVISION AVE STE 200		GRAND FORKS	ND	58201
3504998	1902853120	CENTRAL VALLEY FAMILY PLANNING	122 2ND ST NW		JAMESTOWN	ND	58401
3503958	1205925815	WHITE DRUG #50	107 SECOND STREET SE		RUGBY	ND	58368
3503984	1730242728	WHITE DRUG #53	201 EAST 3RD AVENUE SOUTH		CAVALIER	ND	58220
3503996	1396835237	WHITE DRUG #55	112 SOUTH MAIN STREET		HETTINGER	ND	58639
3504049	1205926144	WHITE DRUG #57	108 CENTRAL AVENUE		MADDOCK	ND	58348
3504051	1568552404	WHITE DRUG #58	208 MAIN STREET		ROLETTE	ND	58366
3504102	1477643310	WHITE DRUG #62	115 MAIN STREET WEST		MOHALL	ND	58761
3504431	1053475020	WHITE DRUG #66	109 W MAIN ST		ASHLEY	ND	58413
3504695	1548572076	WHITE DRUG #71	121 N BROADWAY ST		LINTON	ND	58552
3504289	1700828993	CVS PHARMACY #	1520 20TH AVE SW		MINOT	ND	58701
3504291	1619919800	CVS PHARMACY	1950 32ND AVE S		GRAND FORKS	ND	58201
3504304	1528000718	CVS PHARMACY	525 S 3RD ST		BISMARCK	ND	58504
3504316	1821039793	CVS PHARMACY #	2425 13TH AVE S		FARGO	ND	58103
3504328	1730120601	CVS PHARMACY	1225 E CALGARY AVENUE		BISMARCK	ND	58503
3504330	1649211517	CVS PHARMACY	1321 19TH AVE NORTH		FARGO	ND	58102
3503720	1093841496	MEDICAP PHARMACY	1395 SOUTH COLUMBIA ROAD	SUITE C	GRAND FORKS	ND	58201
3500142	1689763294	WHITE DRUG #9	2475 32ND AVE S	STE 1	GRAND FORKS	ND	58201
3501106	1497844005	WHITE DRUG #15	320 10TH ST SE		JAMESTOWN	ND	58401
3502362	1306935911	WHITE DRUG #17	1015 SOUTH BROADWAY	SUITE 3	MINOT	ND	58701
3502499	1215026828	WHITE DRUG #39	1401 33RD STREET SW		FARGO	ND	58103
3502502	1760572606	WHITE DRUG #5	117 NORTH FIFTH STREET		BISMARCK	ND	58501
3502677	1679663512	WHITE DRUG #40	2211 16TH STREET NW SUITE B		MINOT	ND	58703
3503009	1124117734	WHITE DRUG #34	1681 THIRD AVENUE WEST		DICKINSON	ND	58601
3503338	1588753198	THRIFTY WHITE PHARMACY #043	2600 OVERLOOK LN NW		MANDAN	ND	58554
3503807	1588754428	WHITE DRUG #45	310 FIRST AVENUE SOUTH		JAMESTOWN	ND	58401

3503857	1396834909	WHITE DRUG #47 DBA BELL DRUG	323 FIFTH STREET		DEVILS LAKE	ND	58301
3503869	1033208640	WHITE DRUG #46	1100 13TH AVENUE EAST		WEST FARGO	ND	58078
3503972	1114016722	WHITE DRUG #52	706 38TH STREET NW	UNIT B	FARGO	ND	58102
3504075	1023107638	WHITE DRUG #59 DBA VALLEY DRUG	239 2ND AVENUE NW		VALLEY CITY	ND	58072
3504114	1386734226	WHITE DRUG #63	425 COLLEGE DRIVE SOUTH	SUITE 10	DEVILS LAKE	ND	58301
3504126	1194815035	WHITE DRUG #60	148 SOUTH CENTRAL AVENUE		VALLEY CITY	ND	58072
3504138	1003906942	WHITE DRUG #61	706 38TH STREET NW	UNIT A	FARGO	ND	58102
3504164	1932298544	WHITE DRUG #65	544 HILL AVENUE		GRAFTON	ND	58237
3504417	1629182605	WHITE DRUG #67	300 11TH STREET W		WILLISTON	ND	58801
3504455	1730369711	WHITE DRUG #68	4255 30TH AVE S		FARGO	ND	58104
3504708	1184932063	WHITE DRUG #72	404 MAIN ST		LISBON	ND	58054
3504746	1124317490	WHITE DRUG #061T-MN	706 38TH ST NW	UNIT A	FARGO	ND	58102
3504861	1033460217	WHITE DRUG #73	213 1ST AVE N		JAMESTOWN	ND	58401
3504912	1477997005	THRIFTY WHITE PHARMACY #75	387 11TH ST S		WAHPETON	ND	58075
3504962	1760808299	WHITE DRUG #078	352 1ST ST E STE C		DICKINSON	ND	58601
3502730	1851485262	THE MEDICINE SHOPPE	1304 E BOULEVARD AVE		BISMARCK	ND	58501
3502867	1356413140	MEDICINE SHOPPE	209 11TH AVE SW		MINOT	ND	58701
3502968	1134110463	MEDICINE SHOPPE PHARMACY	703 1ST AVENUE S		JAMESTOWN	ND	58401
3503225	1265504054	MEDICINE SHOPPE	116 2ND AVE NW		MANDAN	ND	58554
3503326	1538271549	MEDICINE SHOPPE	1605 SOUTH UNIVERSITY DRIVE		FARGO	ND	58103
3503489	1447362454	MEDICINE SHOPPE	2800 N BROADWAY		FARGO	ND	58102
3504570	1629222542	MEDICINE SHOPPE	722 LINCOLN AVENUE		HARVEY	ND	58341
3504758	1043504574	MEDICINE SHOPPE	1571 W VILLARD ST # 1		DICKINSON	ND	58601
3502475	1790762318	UNIV OF ND STUDENT HLTH PHCY	2891 2ND AVE N STOP 9038	MCCANNEL HALL RM	GRAND FORKS	ND	58202
3500231	1790889715	SANFORD RETAIL PHARMACY	300 N 7TH ST		BISMARCK	ND	58501
3500697	1558458844	SANFORD PHARMACY SOUTH UNIVERSITY	1720 S UNIVERSITY DR		FARGO	ND	58103
3500712	1235173519	SANFORD PHARMACY BROADWAY	737 BROADWAY		FARGO	ND	58102
3500774	1356407910	SANFORD PHARMACY MILLS AVENUE	801 BROADWAY NORTH		FARGO	ND	58102
3501372	1326059981	B & B NORTHWEST PHARMACY	20 BURDICK EXPY W		MINOT	ND	58701
3501384	1093764599	KEYCARE PHARMACY	400 BURDICK EXPY E STE 201	SUITE 201	MINOT	ND	58701
3502083	1235277179	ALTRU RETAIL PHARMACY	1200 S COLUMBIA RD		GRAND FORKS	ND	58201
3502401	1013029024	CLINIC PHARMACY	2615 FAIRWAY STREET		DICKINSON	ND	58601
3503441	1144368085	FAMILY MEDICINE RESIDENCY PHARMACY	725 HAMLINE ST		GRAND FORKS	ND	58203
3502449	1407946338	WALLS MEDICINE CENTER	708 S WASHINGTON ST		GRAND FORKS	ND	58201
3504354	1912954165	MEDICAL PHARMACY SOUTH	4151 45TH ST SO		FARGO	ND	58104
3504405	1376632067	WALLS HEALTH MART PHARMACY	4440 S. WASHINGTON ST.	STE 101D	GRAND FORKS	ND	58201
3504986	1093134017	ST. ALEXIUS MANDAN PHARMACY	2501 SUNSET DRIVE NW, SUITE 2		MANDAN	ND	58554
3500130	1891891149	THE PRESCRIPTION SHOP INC	1210 SHEYENNE ST		WEST FARGO	ND	58078
3500281	1013018910	MAYO PHARMACY	303 N 4TH ST		BISMARCK	ND	58501
3500560	1245322437	GREENE DRUG AND GIFT COMPANY	16 W VILLARD ST		DICKINSON	ND	58601
3501803	1134345457	CORNER DRUG STORE	619 DAKOTA AVE		WAHPETON	ND	58075
3502172	1336283928	ST ALEXIUS COMMUNITY PHARMACY	900 E BROADWAY AVE		BISMARCK	ND	58506
3502689	1457419962	NORTHPORT DRUG	2522 N BROADWAY		FARGO	ND	58102
3502843	1558376152	N D PHARMACY INC	20 E 26TH ST		WILLISTON	ND	58801

3502879	1386680767	N D PHARMACY INC	446 18TH STREET WEST	STE 2	DICKINSON	ND	58601
3503213	1447356399	GATEWAY HEALTHMART PHARMACY NORTH	3101 N 11TH ST	SUITE 2	BISMARCK	ND	58503
3503237	1639111230	CHURCHILL PHARMACY INC	1190 W TURNPIKE AVE		BISMARCK	ND	58501
3503251	1669546149	CENTRAL AVENUE PHARMACY	323 CENTRAL AVE N	SUITE 101	VALLEY CITY	ND	58072
3503302	1184718876	CLINIC PHARMACY	1001 7TH ST NE		DEVILS LAKE	ND	58301
3503403	1710056452	NEW SALEM PHARMACY	509 ASH AVE		NEW SALEM	ND	58563
3503516	1790795987	BARRETT PHARMACY	145 N MAIN ST		WATFORD CITY	ND	58854
3503679	1205927571	GATEWAY HEALTHMART PHARMACY SOUTH	835 S WASHINGTON ST	SUITE 2	BISMARCK	ND	58504
3503821	1497847776	GATEWAY HEALTH MART PHARMACY MANDAN	500 BURLINGTON ST SE		MANDAN	ND	58554
3504215	1881791721	PRAIRIE PHARMACY FA1	4731 13TH AVE SW		FARGO	ND	58103
3504950	1275963308	GATEWAY HEALTHMART PHARMACY SUNRISE	4007 STATE ST STE L30		BISMARCK	ND	58503
3504760	1780962126	HEART OF AMERICA CLINIC PHARMACY	800 S MAIN AVE		RUGBY	ND	58368
3503883	1477652790	MINOT PHCY	10 MISSILE AVE	BLDG 194	MINOT AFB	ND	58705
3503895	1487716403	MINOT REFILL PHCY	10 MISSILE AVE	BLDG 194	MINOT AFB	ND	58705
3503908	1316001084	MINOT MAIN HCP PHCY	10 MISSILE AVE	BLDG 194	MINOT AFB	ND	58705
3503922	1366541682	GRAND FORKS PHCY 319TH MDG	1599 J ST BLDG 109	C/O 3RD PARTY COLL	GRAND FORKS AFB	ND	58205
3505003	1104231091	DOD GRAND FORKS EPHCY	1599 J ST		GRAND FORKS AFB	ND	58205
3505015	1801201793	DOD MINOT EPHCY	194 MISSILE AVE		MINOT AFB	ND	58705
3504633	1326279548	ALTRU CLINIC PHARMACY INC	1000 S COLUMBIA RD		GRAND FORKS	ND	58201
3504645	1871829028	ALTRU CLINIC PHARMACY - FAMILY MEDI	1380 S COLUMBIA RD		GRAND FORKS	ND	58201
3500091	1528120870	MEDICAL PHARMACY INC	100 SO 4TH ST		FARGO	ND	58103
3500952	1801900881	HANKINSON DRUG	309 S MAIN AVE		HANKINSON	ND	58041
3502487	1952407892	THRIFTY DRUG LTD	1521 S UNIVERSITY DR		FARGO	ND	58103
3502665	1588724728	METRO DRUG	123 N BROADWAY		FARGO	ND	58102
3503629	1881785053	THRIFTY DRUG LTD	1532 32ND AVE S		FARGO	ND	58103
3504936	1396184750	M-D PHARMACY	4101 13TH AVE S		FARGO	ND	58103
3500243	1548202369	DAKOTA PHARMACY OF BISMARCK INC	705 E MAIN AVE		BISMARCK	ND	58501
3500522	1588686539	RAMSEY DRUG COMPANY	401 COLLEGE DR S		DEVILS LAKE	ND	58301
3501132	1740249929	LA MOURE DRUG STORE	100 1ST AVE SW		LAMOURE	ND	58458
3501548	1528093259	OAKES DRUG	422 MAIN AVE		OAKES	ND	58474
3501699	1770698714	DAKOTA DRUG CO STANLEY	107 S MAIN ST		STANLEY	ND	58784
3501752	1548282403	NUCARA PHARMACY #31	234 CENTRAL AVE N		VALLEY CITY	ND	58072
3502829	1265535389	SHEYENNE VALLEY DRUG	407 MAIN ST		LISBON	ND	58054
3503061	1548281736	HERITAGE PHARMACY	401 9TH ST		BISMARCK	ND	58501
3503100	1962411868	THOMPSON DRUG	505 MAIN ST		BOTTINEAU	ND	58318
3503427	1306931977	SKIPS BUDGET DRUG	2015 LIBRARY CIRCLE	STE 102	GRAND FORKS	ND	58201
3503453	1235264862	MARKET PHARMACY	1930 S BROADWAY		MINOT	ND	58701
3503477	1336237346	WAHPETON DRUG COMPANY INC	508 DAKOTA AVE		WAHPETON	ND	58075
3504087	1548276371	HERITAGE PHARMACY EAST	1000 E ROSSER AVE		BISMARCK	ND	58501
3504152	1356453369	ENDERLIN PHARMACY	308 RAILWAY ST		ENDERLIN	ND	58027
3504443	1982826756	SEIP PRESCRIPTION SHOPPE #12	550 13TH AVE EAST		WEST FARGO	ND	58078
3504506	1184892523	TARAS THRIFTY WHITE LLC	610 MAIN AVE		OAKES	ND	58474
3504520	1790941342	BELCOURT DRUG INC	1110 HOSPITAL RD	1	BELCOURT	ND	58316
3504582	1326291238	HERITAGE PHARMACY GATEWAY MALL INC	2700 STATE ST	STE F13	BISMARCK	ND	58503

3504657	1336477223	SERVICE DRUG AND GIFT	815 LINCOLN AVE		HARVEY	ND	58341
3504722	1548566698	EDGELEY PHARM STORE	509 MAIN ST		EDGELEY	ND	58433
3504734	1669771523	DUNSEITH DRUG,INC.	10 MAIN ST SW		DUNSEITH	ND	58329
3504948	1508299272	SERVICE DRUG PHARMACY	317 MAIN		WILLISTON	ND	58801
3504974	1063839496	G & G PHARMACY	1500 14TH ST W STE 150		WILLISTON	ND	58801
3504063	1700844636	FARGO VAMC PHARMACY	2101 ELM ST		FARGO	ND	58102
3504493	1336318567	INNOVIS HEALTH	3000 32ND AVE SW		FARGO	ND	58104
3504710	1851691596	TRINITY HOSPITAL PHARMACY	BURDICK EXPRESSWAY AT MAIN ST		MINOT	ND	58701
3504772	1104112127	7 DAY CLINIC	1517 32ND AVE S		FARGO	ND	58103
3504784	1679869697	7 DAY CLINIC	4622 40TH AVE S		FARGO	ND	58104
3504796	1790060937	MERCY HOSPITAL	1301 15TH AVE W		WILLISTON	ND	58801
3504811	1457629834	ALTRU HEALTH SYSTEM	1200 S COLUMBIA RD		GRAND FORKS	ND	58206
3504885	1073867263	7 DAY CLINIC-NORTH FARGO LOCATION	1100 19TH AVE N		FARGO	ND	58102
3503693	1568592137	SPIRIT LAKE HEALTH CENTER PHARMACY	3883 74TH AVE NE		FORT TOTTEN	ND	58335
3503833	1770613325	FORT YATES INDIAN HOSPITAL PHARMACY	1010 N RIVER RD		FORT YATES	ND	58538
3503871	1790811503	QUENTIN N BURDICK IHS PHARMACY	1ST MAIN ST HIGHWAY 5		BELCOURT	ND	58316
3500318	1285651984	BOTTINEAU CLINIC PHARMACY	314 OHMER ST		BOTTINEAU	ND	58318
3500368	1275569790	CARRINGTON DRUG INC	415 MAIN ST		CARRINGTON	ND	58421
3501055	1740380542	HILLSBORO DRUG	13 N MAIN ST		HILLSBORO	ND	58045
3502146	1497767990	CENTRAL PHARMACY INC	990 MAIN ST		CARRINGTON	ND	58421
3503415	1154333730	CENTRAL PHARMACY INC	4 8TH ST NORTH		NEW ROCKFORD	ND	58356
3503756	1235177221	LANGDON COMMUNITY DRUG	805 3RD ST		LANGDON	ND	58249
3500685	1154332716	DAKOTA CLINIC PHARMACY	1702 S UNIVERSITY DR		FARGO	ND	58103
3502994	1487783262	WEST ACRES PHARMACY	3902 13TH AVENUE S	STE 3706	FARGO	ND	58103
3503770	1770626004	HEALTH CENTER PHARMACY	1401 13TH AVE E		WEST FARGO	ND	58078
3504897	1730421256	SKRIPTS PHARMACY	750 23RD AVE E		WEST FARGO	ND	58078
3503554	1043243272	PROFESSIONAL PHARMACY	3124 COLORADO LANE	#400	BISMARCK	ND	58503
3504619	1356570766	UNIT PAK	4153 12TH AVE. N.		FARGO	ND	58102

NORTH DAKOTA
PUBLIC EMPLOYEES
RETIREMENT SYSTEM

October 10, 2014

Self-Funded: Qualitative Narrative Response with Attachments

Electronic Copy

ND

BOLDER SHADE OF BLUE

e Cross Blue Shield of North Dakota is an independent licensee of the Blue Cross & Blue Shield Association

29319331

Noridian Mutual Insurance Company

(2071)10-14

TIM HUCKLE
President and CEO
P: (701) 282-1539
tim.huckle@bcbsnd.com

October 7, 2014

Cheryl Stockert
Manager, Administrative Services
North Dakota Public Employees Retirement System
400 East Broadway
Suite 505
Bismarck, ND 58502

Dear Ms. Stockert:

We value our partnership with the North Dakota Public Employees Retirement System (NDPERS). Our organizations have had a long and mutually beneficial relationship that has served NDPERS members well throughout the years.

Blue Cross Blue Shield of North Dakota (BCBSND) recently sent you our Fully Insured group proposal for the NDPERS Request For Proposal (RFP). We are pleased to provide you with BCBSND's enclosed Self Funded group proposal for the NDPERS RFP.

Some of the advantages of choosing the Self Funded option with BCBSND include:

- Less regulatory uncertainty in regards to Affordable Care Act (ACA) impacts.
- Predictable risk through creditable experience and performance guarantees.
- Exemption from many of the taxes imposed on Fully Insured plans.
- The best health insurance value for state employees with a BCBSND Self Insured plan.

We have enjoyed working collaboratively with NDPERS and continue to address the costs associated with providing you with the quality health care coverage your employees have come to expect from BCBSND. We also continue to work together with you to encourage wellness and improving the health of NDPERS employees. Our continued collaborative relationship and deep respect for NDPERS is reflected in this proposal.

NDPERS is the largest group of employees in the state of North Dakota, with members spread throughout the state. As North Dakota's oldest, most respected and largest health insurance company with the state's largest network of participating health care providers, BCBSND is best positioned to meet your member's health insurance needs. As a not-for-profit mutual company, our top priority is serving members and member groups like yours. We provide your group with the best value, including:

- A provider network of more than 99 percent of North Dakota providers (supplemented with BlueCard, Blue Cross Blue Shield's broad national network).
- A dedicated service team, while still maintaining low administrative costs.
- More than 800 North Dakota based employees providing local service and expertise.

This proposal also includes solutions to help hold down costs, while encouraging employees to live healthy lifestyles:

- **A focus on wellness** — We have included in-depth details on wellness programs we created specifically for NDPERS and are facilitating to encourage a culture of prevention rather than treatment, such as the dedicated HealthyBlue portal for NDPERS.
- **Pharmacy benefits management and options** — Because of rising pharmacy costs we included additional pharmacy coverage options and guarantees, such as discounts, fees and rebates. The cost proposal is priced with an integrated medical/pharmacy benefit.

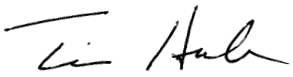
- **Quality and outcome-based collaboration with providers** — BCBSND continues to successfully collaborate with providers and help move North Dakota's health care system toward a model that reimburses facilities more based on the quality of health outcomes and less on the quantity of services provided. BCBSND's Total Cost of Care contracts with North Dakota's integrated health care systems and our MediQHome innovative medical home program are ongoing initiatives that demonstrate our commitment to providing quality care to NDPERS members.

BCBSND has the staffing, infrastructure and contracts in place to continue the successful administration of the NDPERS Health plans and Wellness programs, without member disruption.

On behalf of BCBSND, I acknowledge receipt of the group health RFP specifications and addenda, and confirm that the BCBSND proposal enclosed conforms to the RFP's minimum requirements.

Finally, I would like to sincerely and personally thank you and everyone at NDPERS for the long relationship our organizations have enjoyed. I look forward to further discussions regarding our proposal and continued collaboration in the future.

Sincerely,



Tim Huckle
President and CEO

Attachment: Certification of compliance to provisions of the RFP.

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Summary of Proprietary, Confidential and/or Trade Secret Information

Summary of Proprietary, Confidential and/or Trade Secret Information

The responses provided to the following questions include trade secret, proprietary, commercial or financial information that is of a privileged nature and has not been previously publicly disclosed. This information is confidential and is prohibited from being opened to the public.

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Attachment 9 – Geo Access

Appendix H (Partial as noted in Appendix H)	Appendix I	Appendix K

The information contained in these responses is proprietary information and also includes trade secrets and commercial information as defined under North Dakota law. This information is proprietary in that the information contained within this response involves financial and marketing information, owned and controlled by BCBSND, that is intended to be and is treated by BCBSND as private, the disclosure of which would cause harm to BCBSND's business. The information contained in these responses includes trade secrets in that they set forth information describing patterns, compilations, methods or processes that BCBSND derives independent economic value from because this information is not generally known to (or readily ascertainable by) other entities that could obtain economic value from its disclosure and this information is subject to efforts, reasonable under the circumstances, to maintain the secrecy. These responses also include commercial information involving the purchase of services that has not been previously publicly disclosed and, if the information were to be disclosed, would impair the ability of BCBSND to obtain necessary information or cause substantial competitive injury. As such, this information is confidential and is not subject to disclosure under the North Dakota open records laws. Improper disclosure of this confidential information by a public entity, its agents or assigns is a punishable offense subject to criminal and civil penalties.

Appendix A:
Minimum Contract Provisions

Appendix A:

Sample Contract/Minimum Contract Provisions

BCBSND has received the Minimum Contract Provisions. BCBSND is including a redlined version of this document in Appendix F, Exhibit F3. BCBSND currently includes Privacy Use and Disclosure Responsibility in our standard Business Associate Agreement (BAA). We are including a redlined version of the BAA with the Minimum Contract Provisions for the NDPERS consideration.

Appendix B:
Response Template

Appendix B:

Response Template

1. Face sheet

Name of Proposer's Firm:	Noridian Mutual Insurance Company
Federal Tax I.D. Number:	450173185
Principal Place of Business:	Blue Cross Blue Shield of North Dakota
Address:	4510 13th Avenue S.
City:	Fargo
State and Zip:	North Dakota 58121
Contact Person:	Kevin Schoenborn
Title:	Manager, Consulting Services
Telephone:	(701) 282-1172
Fax:	(701) 282-1172
E-mail address:	Kevin.Schoenborn@bcbsnd.com

2. Minimum Requirements (please identify if you would be able to meet this existing service and if not what you would propose.

Minimum Requirements	Response
Electronic Data Collection and Reporting Requirements: Respondents must, at a minimum, meet the data collection and reporting requirements described in Section 1 under Reporting Requirements of the RFP.	As the incumbent, BCBSND will continue to meet all NDPERS data collection and reporting requirements described in Section 1 under Reporting Requirements
Vendor must be able to take current 834 electronic enrollment file (containing member eligibility) at no cost.	As the incumbent, BCBSND will continue to take current electronic enrollment at no cost.
Effective Date of Coverage: Respondents must be able to provide required coverages and services by July 1, 2015 and January 1, 2016 for the PDP.	Acknowledged and Agreed.
Licensure: Respondents must have all applicable licenses required by North Dakota or agree to obtain necessary licensure prior to the effective dates of coverage.	BCBSND currently meets all necessary license requirements.
Term of Contract: NDPERS is required by state statute to solicit bids for medical benefit coverage for a specified term for a fully-insured arrangement and every other biennium for a self-funded arrangement (i.e., 4-year contract with a renewal after 2 years). NDPERS reserves the right to extend the agreement subject to negotiation with the successful vendor if the board deems it necessary.	Acknowledged and Agreed.
Administrative and Premium Rate Guarantees: For all proposals stop loss premium rates and administrative fees must be guaranteed for a period of two years, from July 1, 2015 to June 30, 2017. Recommended PDP rates will be developed each year based upon the federal subsidy.	Acknowledged and Agreed. BCBSND reserves the right to adjust stop-loss, administrative fees premium and applicable benefits with 90 days notice based on any significant benefit changes or new taxes applied due to federal or state regulations
Recommended PDP rates: Must be submitted to NDPERS by end of September of each year.	BCBSND typically submits the renewal rates in August for NDPERS Board review with Board approval no later than their September meeting. We will continue to submit no later than September of each year.
Renewals: Renewals must be submitted to NDPERS in August of the year preceding the contract renewal date and in September of each year for the PDP.	Acknowledged and Agreed.
Contract Termination: Respondent's contract termination provision may not require more than 120-day notice and can occur only at renewal. NDPERS can terminate coverage at any time.	Acknowledged and Agreed.

Minimum Requirements	Response
Contract Termination: Respondent's contract termination provision may not require more than 120-day notice and can occur only at renewal. NDPERS can terminate coverage at any time.	Acknowledged and Agreed.
Replicate Coverage: Respondent should replicate the existing coverage and financial terms (if applicable under a self-insured arrangement) for two years including an HSA arrangement. NDPERS recognizes that different financial arrangements will be necessary to implement a self-insured program. Variances and exceptions to existing coverage can be offered in appendix F item F2.	Acknowledged and Agreed. BCBSND has the ability to replicate all aspects of the current program. Variations are based on state and federal law to comply with regulatory updates. In addition BCBSND will modify Financial arrangements as necessary to implement a self-insured program. These variations are noted in Appendix F – Deviations.
Legislative Compliance: Respondents agree to comply with all provisions of the Health Insurance Portability Act of 1996 including, but not limited to providing certificates of creditable coverage. Respondents must also be in compliance with all HIPAA Privacy and HIPAA EDI requirements and be able to conduct all applicable employer/plan sponsor and provider transactions consistent with those requirements. Respondents will be expected to meet HIPAA security requirements when applicable to NDPERS. Respondents will also be expected to be in compliance with all ACA requirements	BCBSND currently meets all applicable provisions of Part I of the Health Insurance Portability and Accountability Act of 1996 that apply to health insurance carriers as required and that pertain to the NDPERS uniform group insurance program including, but not limited to, providing certificates of creditable coverage, and agrees to comply with any provisions that may be changed or amended in the future, including any requirements imposed through the ACA. BCBSND also currently complies with all HIPAA Part II Privacy and HIPAA Part II EDI requirements and conducts all applicable employer/plan sponsor and provider transactions consistent with these requirements. BCBSND currently meets insurance carrier HIPAA security requirements when applicable to NDPERS. BCBSND implemented the requirements of the HIPAA privacy rule as of April 13, 2003, as required under federal law, and the Electronic Transactions and Code Set Standards were implemented by the October 16, 2003, extended compliance date. The NPI standard was implemented on May 23, 2008. Requirements of the HIPAA security rule were implemented by April 20, 2005, and BCBSND is compliant with the provisions recently enacted under HITECH. BCBSND currently meets all applicable provisions of the ACA that have become effective and apply to health insurance carriers as required and that pertain to the NDPERS uniform group insurance program including, but not limited to, early implementation requirements and other provisions as these become required, and agrees to comply with any provisions that may be changed or amended in the future.

Minimum Requirements	Response
Transition Management: Respondents agree, should they be selected, they will proactively manage the transition of coverage (e.g. claim accumulators, lifetime maximums, etc.) from the current carrier.	As the incumbent, this is not applicable.
Administration: Respondents must agree to comply with existing administration of NDPERS. Any modifications needed to accommodate NDPERS data will be done at the vendor's own expense.	Acknowledged and Agreed.
Audit: NDCC 54-52-04 (10) relating to the audit authority of NDPERS.	BCBSND acknowledges the authority of the board contained in Section 54-52-04(10), N.D.C.C., and is prepared to comply with these requirements subject to any limitations or restrictions imposed under federal law and to agreements in place between BCBSND and any third-party vendor performing administrative services on behalf of BCBSND. BCBSND agrees to submit to the audit authority of NDPERS set forth in Section 54-52-04(10), N.D.C.C., subject to any contract limitations existing at the time of the submission of BCBSND responses to this RFP contained in agreements existing between BCBSND and its vendors or providers during the terms of the health insurance included in this proposal. For the purposes of this provision, the term "providers" shall mean any vendors under contract with BCBSND to provide benefits and/or services utilized in the administration of the NDPERS uniform group insurance program. This term shall not be interpreted to permit any direct audit of health care providers under contract with BCBSND. Subject to the provisions set forth above, BCBSND will work with NDPERS to audit within reason (i.e. time, expense and frequency). In 2010, BCBSND allowed an audit of Prime Therapeutics for NDPERS pharmacy claims. The purpose of the audit completed by Tricast was to insure claims adjudication accuracy, proper rebate administration and pharmacy network performance. The audit results reported to the NDPERS Board were very favorable.

Minimum Requirements	Response
North Dakota Legislation Requirements: Respondent must meet all requirements in the North Dakota Century Code including 54-52; 54-52.1; 54-52.4 and all requirements in the North Dakota Administrative Code including 71-03 and other applicable State Laws. Specific recognition of 54-52.1-12 should be acknowledged.	BCBSND agrees to meet all requirements of the North Dakota Century Code included in chapter 54-52.1, N.D.C.C., and all corresponding requirements in the North Dakota Administrative Code, including chapter 71-03, N.D.A.C., and other applicable state Laws pertaining to the administration of the NDPERS uniform group insurance program, subject to any limitations or restrictions imposed under federal law and those contained in the agreements in place between BCBSND and any third-party vendor performing administrative services or extending covered services on behalf of BCBSND to NDPERS. BCBSND extends specific recognition of and acknowledges Section 54-52.1-12, N.D.C.C., related to the ownership of medical records and related data of NDPERS employees, retirees and dependents, again subject to any limitations or restrictions imposed under federal law or contained in the agreements in place between BCBSND and any third-party vendor performing administrative services or extending covered services on behalf of BCBSND to NDPERS, particularly the directives included in the HIPAA privacy requirements as these relate to covered entities and the ownership, use and control of such data.
Ability to meet the specifications outlined in the RFP unless specifically noted	Acknowledged and Agreed.
Subject matter experts and other appropriate personnel will be available to attend board meetings, legislative hearings, etc. as needed	BCBSND teams of subject matter experts are available to NDPERS to attend board meetings, legislative hearings, etc. Our team of local professionals includes clinical, legal, compliance, actuarial, IT, and marketing. Your dedicated Account Manager will facilitate any requested attendance on behalf of NDPERS.

3. Affidavit of Non-collusion

I swear (or affirm) under the penalty of perjury:

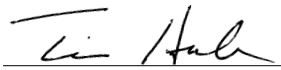
1. That I am the Responder (if the Responder is an individual), a partner in the company (if the Responder is a partnership), or an officer or employee of the responding corporation having authority to sign on its behalf (if the Responder is a corporation);

2. That the attached proposal submitted in response to the Group Medical Coverage Request for Proposals has been arrived at by the Responder independently and has been submitted without collusion with and without any agreement, understanding or planned common course of action with, any other Responder of materials, supplies, equipment or services described in the Request for Proposal, designed to limit fair and open competition;

3. That the contents of the proposal have not been communicated by the Responder or its employees or agents to any person not an employee or agent of the Responder and will not be communicated to any such persons prior to the official opening of the proposals; and

4. That I am fully informed regarding the accuracy of the statements made in this affidavit.

Responder's Firm Name: Noridian Mutual Insurance Company

Authorized Signature: 

Date: 10/7/2014

Subscribed and sworn to me this _____ day of _____

Notary Public: _____

My commission expires: _____

4. Conflicts of interest list

Responders must provide a list of all entities with which it has relationships that create, or appear to create, a conflict of interest with the work that is contemplated in this request for proposals. The list should indicate the name of the entity, the relationship, and a discussion of the conflict.	To the best of our knowledge, BCBSND is not aware of any entities with which we have a relationship that creates, or appears to create, a conflict of interest with the work contemplated in this proposal.

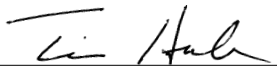
5. Compliance with Federal and State Laws Form

NDPERS — Federal and State Law Compliance Certification

1. The company shown below is or will be in compliance with Federal and State laws and does not knowingly violate North Dakota or United States Laws. The company shown below will obtain this certification from all subcontractors who will participate in the performance of this contract; and

I certify that the company shown below is in compliance with items 1 above and that I am authorized to sign on its behalf.

Name of Company: Noridian Mutual Insurance Company Date: 10/7/14

Authorized Signature:  Telephone Number: (701) 282-1539

Printed Name: Tim Huckle Title: President and CEO

6. Location of Service Disclosure and Certification

STATE OF NORTH DAKOTA

LOCATION OF SERVICE DISCLOSURE AND CERTIFICATION

LOCATION OF SERVICE DISCLOSURE

Check all that apply:

❑ The services to be performed under the anticipated contract as specified in our proposal will be performed ENTIRELY within the State of North Dakota.

❑ The services to be performed under the anticipated contract as specified in our proposal entail work ENTIRELY within another state within the United States.

✔ The services to be performed under the anticipated contract as specified in our proposal will be performed in part within North Dakota and in part within another state within the United States.

❑ The services to be performed under the anticipated contract as specified in our proposal DO involve work outside the United States. Below (or attached) is a description of

(1) the identity of the company (identify if subcontractor) performing services outside the United States;

(2) the location where services under the contract will be performed; and

(3) the percentage of work (in dollars) as compared to the whole that will be conducted in each identified foreign location.

CERTIFICATION

By signing this statement, I certify that the information provided above is accurate and that the location where services have been indicated to be performed will not change during the course of the contract without prior, written approval from the State of North Dakota.

Name of Company: Noridian Mutual Insurance Company

Authorized Signature: Tim Huckle

Printed Name: Tim Huckle

Title: President and CEO

Date: 10/7/14

Telephone Number: (701) 282-1539

Appendix C:
Questionnaire

Appendix C:

Questionnaire

In order for your proposal to be considered and accepted, your organization must provide answers to the questions presented in this section. Each question must be answered specifically and in detail. Include both the question and the answer in your proposal response. An electronic copy of this questionnaire has been provided to facilitate your response.

Reference should not be made to a prior response unless the question involved specifically provides such an option. Proposers should refer to the earlier sections of this RFP before responding to any of the questions, to ensure that you have a complete understanding of the requirements with respect to your organization's proposal.

Vendors may include additional information that you consider relevant or useful to NDPERS. However, responses to all of the questions set forth below must be provided.

NDPERS is interested in evaluating financial arrangements based on the traditional approach to PBM pricing and pricing under a transparent arrangement. "Traditional" financial proposals should include guaranteed effective rate discounts, as well as specific fees and guaranteed rebate dollar amounts. "Transparency" for purposes of this Request for Proposal is defined as a full pass through to NDPERS of all monies paid to the PBM arising from all contracted arrangements. **When answering questions and completing exhibits related to your financial proposal, please indicate if your answer would differ under a transparent or a traditional pricing arrangement.** NDPERS will give greater preference to transparent proposals. Please also note that the separate pharmacy questionnaire posted as Appendix L must be completed.

If this proposal results in your company being awarded a contract and if, in the preparation of that contract, there are inconsistencies between what was proposed and accepted versus the contract language that has been generated and executed, any controversy arising over such discrepancy will be resolved in favor of the language contained in the proposal or correspondence relating to your proposal. Vendors are reminded that **any and all deviations must be clearly identified and described in the RFP and the deviations worksheet provided in Appendix F.**

The questionnaire is broken down into the following 12 (twelve) categories:

- Organizational Background, Strength, and Experience
- Implementation and Account Management
- Communications and Website
- Plan Administration
- Eligibility
- Customer/Member Service
- Claims Administration
- Reporting
- Case/Utilization Management
- Health Risk Management and Wellness Programs
- Provider Network
- Performance Standards and Guarantees

BCBSND has provided comprehensive responses to all questions presented. BCBSND has provided additional detail to certain questions that we believe would be pertinent to NDPERS in the evaluation process.

Transparent (Pass-Through) Pricing Summary

Two standard types of Pharmacy offers are most common in the Pharmacy Benefit Manager (PBM) industry: Traditional and Pass-through.

Traditional pharmacy bids are typically characterized by "Spread" pricing where by the PBM will offer flat discount and dispensing fee guarantees accompanied by a $0 or very low fixed cost. The "Spread" represents the difference in discount quoted to the employer group versus the actual reimbursement by the PBM to the pharmacy. This Spread can be applied to both Brand and Generic drugs and dispensing fees and is a source of revenue generation for the PBM. This "Spread" revenue is typically utilized by the PBM to subsidize a higher Brand discount and to offer a low pharmacy fixed admin cost. By design, a Traditional deal is structured to generate a revenue stream for the PBM off variable claims costs that exceeds any subsidization to Brand discount and fixed pharmacy administrative costs. This excess revenue stream generation is not passed through or completely disclosed to the employer group.

Traditional pricing may be particularly appealing to employer groups that are focused on fixed costs and those that desire a very low pharmacy admin but are willing to experience higher variable claims spending. Since variable pharmacy claim spending is greater than 90% of the total spending associated with most employer groups pharmacy benefits, BCBSND groups typically elect for a Pass-Through (PT) pricing arrangement rather than a Traditional approach because of savings associated with variable claims spending .

In addition to Traditional "Spread" pricing, PBMs have the ability to manipulate their Brand and Generic definitions when they reconcile to discount guarantees. This strategy is utilized to quote a higher perceived Brand and Generic discount on a spread-sheet but does not translate into lower net drug spending. Most commonly, a PBM may re-bucket or exclude single source (generics from a single manufacturer), dual source (generics from 2 manufacturers), or tertiary source (generics from 3 manufacturers) generics from discount guarantee reconciliations to achieve artificially inflated discounts. This strategy is often used with Traditional "Spread" pricing arrangements to demonstrate perceived discount value and to mask the revenue streams associated with "Spread".

In contrast to Traditional pricing, BCBSND offers NDPERS a Pass-through (PT) pricing arrangement. A PT pricing arrangement is characterized by minimum effective discounts and dispensing fee guarantees and does not include Spread pricing. Since these are minimum effective guarantees, NDPERS would receive the full value of all BCBSND contracted pharmacy network rates and dispensing fees based upon the pharmacies that your members elect to utilize. Additionally, as Prime Therapeutics renegotiates the BCBSND pharmacy network, NDPERS would benefit from the full pass-through of any network enhancements we achieve for BCBSND throughout the year rather than upon anniversary date. This extra value is not typically passed through to an employer group in a Traditional bid. BCBSND's PT offer does not include any manipulation of Brand and Generic for discount reconciliation. This strategy is often used by other PBMs to artificially inflate their perceived discounts as documented above.

BCBSND currently offers what we define as a "transparent" approach to NDPERS based on our fully integrated Pharmacy Benefit Manager (PBM), Prime Therapeutics. The current model varies compared to the "transparent" model described in the RFP. Currently, BCBSND offsets Prime's administrative fee with a combination of funding levers in order to be revenue neutral while simplifying the administrative burden for NDPERS. BCBSND will provide pricing to illustrate both the current arrangement as well as the requested approach.

The true value of transparent vs. traditional pricing can be found in the Ingredient Cost Fact Sheet, found in Attachment 1 – Ingredient Cost Fact Sheet.

BCBSND understands that should an inconsistency be found, that favor would be given to the terms in this proposal. We are comfortable with this approach. As the incumbent, BCBSND administers all aspects of the current program with the only deviations noted based on regulatory changes.

1.1 Organizational Background, Strength and Experience

1. Provide a brief description of your organization, including your company history, organizational structure, services provided, location of headquarters, and length of time you have been in business. Describe any significant historical or future organizational developments (acquisitions, mergers, change in subcontracted vendors, etc.).

Company History
More than 70 years ago, Blue Cross Blue Shield of North Dakota (BCBSND) began as two separate pre-paid health care plans for hospital and physician services. The two companies merged in 1986 and, in 1998, converted to a not-for-profit mutual insurance company.

Organizational Structure
In 1998, BCBSND changed its corporate structure to a nonprofit, mutual insurance company and its name to Noridian Mutual Insurance Company (NMIC). The new structure gave members more ownership, plus allowed the company to pursue business in neighboring states as NMIC, while continuing to do business within North Dakota as BCBSND.

Throughout the history of Noridian Mutual Insurance Company, the corporation has established subsidiary and affiliated companies.

In 2002, NMIC established the wholly owned subsidiary Noridian Administrative Services, LLC (NAS) in order to pursue additional Medicare business and other government contracts. In 2013, Noridian Administrative Services, LLC was rebranded as Noridian Healthcare Solutions (NHS). Today, NHS processes over 119 million claims annually. They serve over 13.1 million beneficiaries in all 50 states and work with over 290,000 healthcare providers. NHS has 1808 employees, of which 1306 reside in North Dakota.

In 2008, NMIC bought a 51 percent controlling interest in Discovery Benefits, Inc. (DBI). DBI provides reimbursement accounts including flexible benefits, health savings accounts, health reimbursement arrangements, transportation/parking accounts and COBRA administrative services.

In early 2009, BCBSND together with Blue Cross Blue Shield of Nebraska, launched a health care technology company named CoreLink Administrative Solutions. The joint venture processes claims for the North Dakota, Nebraska and Wyoming Blue plans, and results in significant administrative efficiencies by delivering core systems solutions at lower costs and greater performance capability.

In 2011, NMIC acquired MDdatacor, Inc., a Georgia-based technology company that provides data-driven solutions for health care insurers and providers. MDdatacor has the ability to collect, store, manage and analyze patient medical information from the most comprehensive data sets available in the industry. The acquisition was part of NMIC's ongoing strategy to collaborate and innovate to find local solutions that will sustain accessible, high-quality health care for all North Dakotans for years to come. MDdatacor owns MDinsight, the primary technology platform that facilitates highly secure HIPAA-compliant information sharing among care providers participating in MediQHome, BCBSND's quality program based on patient-centered medical home concepts.

In 2014, NMIC sold MDdatacor to Symphony Technology Group, a technology and services-focused private equity firm. Symphony will integrate the MDinsight tool with other population health management and data analytics technology to offer new high value analytical software. NMIC will continue to utilize the MDinsight platform to power MediQHome and will evaluate other Symphony tools to determine their value in the North Dakota market.

Services Provided
BCBSND has expanded to a full-service benefits administrator and offers dental and vision insurance, group life insurance, disability benefits and flex benefit administration. Operations currently include actuarial, communications, claims processing, finance, information technologies, legal, marketing, medical management, member services, provider relations, provider services and even more sub-specialty services under each category, such as quality control and cost containment efforts.

Location of Headquarters
BCBSND began with a small office located in downtown Fargo in 1940. The corporate office is now located at 4510 13th Ave. S., Fargo, with additional service offices located across the state in Bismarck, Devils Lake, Dickinson, Grand Forks, Jamestown, Minot, Valley City, Wahpeton and Williston.

Future Organizational Developments
The Company continues to make investments to streamline administrative and operational expenses.

2. Vendors responding to this RFP must be able to substantiate their financial stability. Provide a copy of your audited financial statement or other financial information. Include, at a minimum, a Balance Sheet and a Profit and Loss Statement, together with the name and address of the bank(s) with which you conduct business and the public accounting firm(s) that audit your financial statements. Other sufficient information may include a written statement from a financial institution confirming the creditworthiness and financial stability of the vendor.

   Please see Attachment 2 – Audited Financials for a copy of our 2013 Audited Financials. The name and address of our public accounting firm is listed on the fourth page of the attachment. Our primary banking relationship is with Wells Fargo. The address is 406 Main Avenue, Fargo, N.D., 58103

3. Provide a copy of any State or Federal regulatory audit performed within the last two years.

   A Targeted Market Conduct Examination was conducted October 2013 through May 2014. As of September 16, 2014, NMIC has not yet received a draft report from the North Dakota Department of Insurance with the final audit results. BCBSND will provide NDPERS copies of the audits upon completion and request by NDPERS.

   In addition, over the past two years NMIC has been subject to review of its administration of the North Dakota Children's Health Insurance Program (CHIP), also known as the Healthy Steps program, to confirm that program administration is being done in compliance with federal regulation set forth in 42 CFR 438.358 and Section 402 of the CHIPRA 2009 Legislation. These reviews are conducted annually by a third party at the direction of the North Dakota Department of Human Services. NMIC has consistently improved its compliance scores during these reviews.

4. Confirm that your organization agrees to be accountable for everything stated in and submitted as part of your proposal, even if not specifically addressed in the Minimum Contract Provisions in Appendix A.

   BCBSND is accountable for everything stated in and submitted as part of our proposal, even if not specifically addressed in the proposed sample minimum contract provisions.

5. Indicate whether your company has ever been or is currently a party to litigation regarding a medical benefit plan contract or agreement. If so, provide details of the litigation or action. Failure to disclose this may constitute grounds for rejection of any proposal or termination of any contract.

   BCBSND participates through its subrogation/reimbursement processes as a plaintiff in numerous class actions. NDPERS should already be in possession of most of the details

requested in regard to this litigation. Aside from these subrogation/reimbursement cases, in the late 1990s, BCBSND was involved in some litigation resulting in a settlement that required certain language changes in its service agreement. Otherwise, to its best information and belief, BCBSND has not been and is not currently a party to litigation regarding a medical benefit plan contract or agreement.

As covered in local media, BCBSND is currently in litigation with a former Medical Director over wrongful termination. While the lawsuit is employment based litigation, it does make accusations about the administration of BCBSND medical benefit contracts. BCBSND did inform NDPERS directly about this suit and our position that the claims have no merit. BCBSND is heavily regulated by both state and federal agencies that perform frequent audits to insure controls are in place. We are confident in our position on this lawsuit.

6. State whether the vendor, its officers, agents or employees, who are expected to perform services under the NDPERS contract, have been disciplined, admonished, warned, or had a license, registration, charter, certification, or any similar authorization to do business suspended or revoked for any reason.

No, BCBSND is not aware of any disciplinary action against our officers, agents or employees that would impact any license, registration, charters or certifications necessary to provide the services outlined in this proposal.

7. Include a description of your organization's major short term strategic initiatives and your long term strategic business plan. Specifically address cost containment efforts.

Blue Cross Blue Shield of North Dakota's mission is to deliver affordable solutions to improve the care and health of those we serve.

We have a multifaceted strategy designed to help us meet this mission:

- Offer products that have the best overall value in the market;
- Curb cost of healthcare on behalf of our members;
- Keep administrative costs to a minimum while maintaining the highest level of service;
- Offer products and services that comply with all state and federal regulations.

Each of these aspects of the overall strategy has both short term initiatives and long term goals.

Offer products that have the best overall value in the market

Short term initiatives
BCBSND takes pride in offering the most comprehensive products and services at the best prices in the market. We continue to enhance the services we offer including additional local expertise in health and wellness, new analytics packages, and additional self service capabilities.

Long term strategy
As a strong local company, BCBSND understands what North Dakotans value and incorporate these values into everything we do. We offer comprehensive access to both local and national providers at the most competitive rates in the state. We offer products that both comply with state and federal laws and align with the needs of North Dakotans. As the health insurance market and the health care delivery system evolve, BCBSND is committed to evolving with North Dakota to continue to offer the best value to our members and customers.

Curb cost of healthcare

Short term initiatives
BCBSND has several initiatives we are working on to ensure our members are getting the most for their health care dollar. We are moving from MS-DRG to APR-DRGs to further

align our reimbursement with our population. We continue to work on the transition from ICD-9 to ICD-10 which will allow for more accurate coding to track outcomes. We are also working on an enhanced version of our outcome-based reimbursement model.

Long term strategy
BCBSND will continue to support primary care practices in their transformation towards a patient centered care model, as well as incent health systems in their efforts to streamline all health care services.

Keep administrative costs to a minimum while maintaining the highest level of service

Short term initiatives
BCBSND is completing an analysis of overall functional administrative expense levels to identify areas where expenses may be reduced. The evaluation has identified multiple claims and customer service projects that will increase efficiency.

BCBSND also will be evaluating print, mail and distribution costs.

Long term strategy
BCBSND will continually look for efficient utilization of administrative expenses to offset the continued pressure exerted on administrative costs from a variety of sources, including regulatory changes, IT investments to ensure an ongoing functional infrastructure, and investments to be able to respond to member and market demands in an increasingly competitive market.

Offer products and services that comply with all state and federal regulations

Short term initiatives
BCBSND is working directly with the North Dakota Insurance Department (NDID) to increase and improve communication as we navigate the multiple changes in federal regulations. This communication will ensure compliance, while enhancing audit performance, and allows for input to the NDID on policy, compliance and regulatory changes.

Long term strategy
Together with our Governement Relations team, BCBSND will continue to strengthen its relationship with the NDID to ensure, timely and well-supported products, rate and financial filings, and enhanced audit performance.

8. Describe how your organization differentiates itself from your competitors. Specifically, what makes your organization the best partner for NDPERS?

North Dakotans serving North Dakotans
NDPERS is the largest group we serve in North Dakota, and because of this relationship we have been able to devote a dedicated service team to serve you, backed by the additional support of our entire staff of almost 800 North Dakota-based employees.

As a North Dakota company, we understand what it takes to serve our members well, because they are our neighbors and friends. We're active and engaged in all communities we serve, contributing not just as employees, but as parents, neighbors, leaders, friends and volunteers. We know the local employer and provider markets; we routinely meet with the thought leaders and decision makers. When customers or providers call, we show up.

Leading North Dakota Health Care into a New Era
BCBSND is leading the state's health care industry into a new era by focusing on five strategic pillars.

1. **Affordability**
   Affordable health care remains a major concern as we implement the Patient Protection and Affordable Care Act (PPACA) of 2010. We are working with health care providers and other stakeholders to find innovative solutions so health care in the

future is more accessible, more affordable and more efficient, while maintaining the quality we have all come to expect. We understand this is a monumental task, but we believe North Dakota can become a model for the rest of the country because of our shared commitment to a sustainable health care delivery system.

2. **Stewardship**
As North Dakota's largest health insurer, we understand the major role we play in the success of the state's health care system. We pledge to our members and to the entire state that we will be good stewards of the resources with which we have been entrusted. We will work toward greater access, greater affordability and even higher levels of quality in the health care system. We will continue to be good citizens of the state by promoting wellness and lending our expertise to improve the quality of life and health in North Dakota. At BCBSND, we understand that every dollar that goes toward operating expenses is a dollar that could be going toward health care costs. While the average operating expense for other health insurance companies is close to 14 percent, at BCBSND, the operating expense is only 8.2 percent. These savings are passed on directly to our members through lower premiums.

We continue to work to reduce administrative costs without impacting service or quality by leveraging technologies and processes.

3. **Excellence**
For decades, BCBSND has been the standard of excellence in the state's health insurance industry. We extend that same intensity of purpose and expectation of excellence to everything we do, from working to make health care more affordable to being a good corporate citizen. We have high expectations for ourselves and we intend to meet them.

4. **Collaboration**
Health care accounts for approximately 17 percent of the nation's gross domestic product and is projected to double in the next 30 years unless we are able to bend the cost curve in a substantive way. For BCBSND members, approximately 8 percent of all premium dollars are spent on administrative costs. That means we need to work with all stakeholders—health care providers, government officials and our members, just to name three—if we are going to stem the unsustainable rate of health care inflation. We are working with a multitude of partners to help us accomplish this goal.

5. **Engagement**
   Communication is the key to engaging all the necessary stakeholders in the monumental tasks we face to curb health cost increases. BCBSND is working to spread the message that the current system is unsustainable and that there are solutions we can implement to ensure we have the access, affordability and quality that everyone expects of our health care system.

High Customer Satisfaction
BCBSND has been a health insurance leader in North Dakota for over 70 years. One reason is when our members call, they reach a person, not a menu of options. That commitment to service allowed us to achieve a 95 percent customer satisfaction score from our members in 2013.

Our performance is well above accepted industry standards:

- 99 percent of claims were paid in 30 calendar days in 2013.
- 99 percent of all claims were paid correctly in 2013

NDPERS members benefit from an extensive statewide provider network, as well as the national BlueCard network
Because BCBSND holds the largest share of market across North Dakota, we are able to offer NDPERS an unrivaled provider network and the largest discounts available from any carrier that can serve NDPERS as well as special discounts that go beyond normal provider discounts in North Dakota.

NDPERS members also have access to the BlueCard national network which allows for discounts negotiated by other Blue Cross Blue Shield plans nationwide to be passed through to the member, as well as the knowledge that their insurance card will be accepted almost anywhere they travel.

Our successful collaboration is working to impact cost and encourage a healthier population
Our collaborative relationship of more than 37 years has also allowed us to continually develop initiatives, business practices and programming that are advantageous to NDPERS.

There will be no gap in service — or quality — to NDPERS members
Our 37+ years together have given us an important advantage, which we do not take for granted. We have been fortunate to share in NDPERS's history, and know the system, leadership, people, legislative processes, expectations and members.

We have welcomed your frank suggestions to refine and change our deliverables and all communications, as well as continue to look for ways to deliver greater value and service to NDPERS members.

HealthyBlue – dedicated NDPERS portal
The dedicated HealthyBlue portal created for NDPERS will encourage a culture of prevention rather than treatment. This online health tool features health logs, workshops, educational information, health assessment and other tools to help NDPERS members take control of their health. Wellness and worksite wellness programs are continually being refined and expanded.

Statewide collaboration is focused on improving North Dakota's health care system
Because we believe that North Dakota solutions are the key to addressing the issue of health care costs, we're continually collaborating with doctors, hospitals and clinics to improve our health care system, including:

- MediQHome Quality Program, our innovative and award-winning medical home program, improves quality and reduces cost by providing incentives for quality

outcomes, a departure from traditional fee-for-service billing. This program rewards doctors for closely monitoring their patients with chronic health conditions that account for much of the nation's rising health care costs.

- MediQHome was evaluated and received the Blue Cross Blue Shield Association's Blue Distinction Total Care designation ensuring our network of medical home providers meet nationally recognized standards for quality.
- Hypertension Quality Improvement Program, a collaboration with the American Health Association, the American Stroke Association and the North Dakota Department of Health, has reached more than 10,000 BCBSND members with hypertension in the partners' first collaborative outreach. This program is part of BCBSND's MediQHome program.
- Consumer Transparency Initiatives provide our members the ability to compare — and comment — on treatment and cost of care received across the state.
- Paperless Explanations of Benefits (EOBs) and Authorizations, which will reduce both time and costs in the communication and administration of your members' claims.
- The Member Advocacy Program, created by BCBSND for members facing life-changing medical events, begins with a dedicated Member Advocate proactively reaching out to members and offering them assistance. Knowing that these families are often unprepared for the flurry of bills and insurance statements that result from a major medical event, the Member Advocate helps resolve billing issues with medical staff and facilities, and monitors claims to make sure they are processed correctly.

Strength in Numbers
BCBSND is proud to be the state's largest health insurer, as demonstrated by these statistics from the North Dakota Department of Insurance:

- Individual Market: 78.3 percent BCBSND market share*
- Small Group: Fully Insured (2-50 employees): 86.0 percent BCBSND market share*
- Large Group: Fully Insured (50+ employees): 96.4 percent BCBSND market share*
- BCBSND group retention rate: 95.4 percent of all available renewal groups and 98.0 percent when considering those lost to competitor (May 2014 data).
- BCBSND covers 60.3 percent of all North Dakota residents**
- Medicare Supplement: 71.3 percent BCBSND market share***

* Based on total covered lives reported in the Supplemental Health Care Exhibit for 2013 (as reported to the National Association of Insurance Commissioners) for all companies selling health coverage in ND.

** Based on Mark Farrah Associates, Health Coverage Portal for fourth quarter 2013

*** National Association of Insurance Commissioners – Medicare Supplement Insurance Experience Exhibit, 2013.

This type of market position allows BCBSND to do things that other insurance companies can't—like work to transform health care in North Dakota by improving quality and driving down the rising cost trend.

Awards

Federal Employee Program (FEP) Awards:

The FEP Awards are presented annually by the Blue Cross and Blue Shield Association (BCBSA) to Blue Cross and Blue Shield plans that provide excellent service to federal employees.

Plan Excellence Award

The BCBSA's Plan Excellence Award is the highest form of recognition for overall plan performance presented to BCBS plans participating in the FEP program. Plan Excellence Award scores are determined by combining the scores plans receive in the Excellent Service Profile Award and the Excellent Strategic Profile Award.

BCBSND has won the Plan Excellence Award in eight of the last nine years and 15 times since the award was introduced in 1991.

Excellent Service Profile Award

The Excellent Service Profile Award measures member satisfaction, accessibility, timeliness and accuracy of claims processing and responses to member inquiries, reconsiderations and appeals.

BCBSND has received the Excellent Service Profile Award in each of the last 21 years.

Excellent Strategic Profile Award

The Excellent Strategic Profile Award measures benefit costs, administrative costs and market growth.

BCBSND has received the Excellent Strategic Profile Award for 20 straight years.

Brand Excellence Award

The Blue Cross and Blue Shield Association (BCBSA) Brand Excellence Award was created in 1995 to recognize Blue Cross and Blue Shield plans nationwide in categories promoting the Blue brands. These categories include attracting new customers, fostering loyalty to existing customers, expanding the Blue brands into additional lines of products or services, and provider satisfaction.

BCBSND has received the Brand Excellence Award nine times:

- 1995 – Overall Score
- 1996 – Overall Score
- 1997 – Overall Score
- 1998 – Overall Score
- 1999 – Overall Score
- 2001 – Overall Score
- 2006 – Member Retention and Provider Satisfaction Categories
- 2008 – Provider Satisfaction Category
- 2011 – Member Retention Category

Best of Blue Award

Since 1998, the BCBSA has received more than 630 entries for the Best of Blue Award from BCBS plans nationwide. Of these entries, only 54 programs were recognized as meeting the criteria outlined in the Best of Blue program. The winning entries showcased BCBS plans' continued innovation and dedication to improving our nation's health care delivery system. BCBSND received Best of Blue awards for FEP program administration/ winning the award ten times: 2000, 2001, 2005, 2006, 2007, 2009, 2010, 2011, 2012 and 2013.

9. Identify all services that are currently outsourced or subcontracted, the name of the vendor/partner, and length of the relationship. Describe how you ensure quality customer service and timely and effective issue resolution.

BCBSND routinely contracts with third-party vendors for additional services. As such, it has business associate agreements and other types of contracts in place. These detail the terms of the agreement, including scope of services and conflict resolution provisions. If quality or performance issues develop, the group notifies BCBSND, and it is BCBSND's responsibility to resolve the situation according to the terms of these agreements.

Claims Processing:
CoreLink Administrative Solutions is a health care technology company that processes claims for BCBSND as well as the Nebraska and Wyoming Blue plans. BCBSND and Blue Cross Blue Shield of Nebraska launched the company in 2009. CoreLink is headquartered in Fargo, ND with over 200 employees located in North Dakota. CoreLink is managed by a board of directors that includes representation from the participating Blue plans, who are also the only customers. As part of their regular agenda, the board reviews any productivity or process issues, and recommends resolution options.

Disease Management:
Accordant provides rare and complex disease management. BCBSND began a relationship with Accordant in 2010. Quarterly reports are available for utilization monitoring and quality assurance, as well as annual return-on-investment analysis. In addition, there is a grievance process defined for both member and provider complaints.

Healthways is the vendor for our Disease Management program for out-of-state members. The goal of our disease management program is to motivate members and providers to engage in healthy behaviors. Quality customer service and timely and effective issue resolution are ensured through weekly communications between BCBSND and the vendor including a regularly scheduled conference call and prompt access to Healthways personnel as needed. Member satisfaction, quarterly reports, quality assurance monitoring and return-on-investment analysis are provided by Healthways.

The MediQHome Quality Program contracts with MDdatacor (MDD) to provide a decision support platform called MDinsight. BCBSND has had a relationship with MDD since 2008. In October 2011, MDD was acquired by the parent company of BCBSND, Noridian Mutual Insurance Company (NMIC). In April 2014, NMIC sold MDdatacor to Symphony Technology Group. MDdatacor is SOC 2 compliant and the platform and data exchange is HIPAA compliant. Quality assurance checks are performed weekly and there is continuous communications between the providers, MDD and BCBSND. BCBSND is involved with testing upgrades and intermittent product development.

Pharmacy:
Prime Therapeutics, LLC, has been the Pharmacy Benefit Management vendor for BCBSND for more than 17 years.

ClearStone Solutions, Inc. provides consulting services, program management, medical mangagement, compliance and regulatory services to health insurance plans in the government business sector builiding including Medicare Part D, Advantage and Medicaid products.

Wellness:
BCBSND has partnered with the following vendors to assist with providing the current wellness programs:

Cerner provides online wellness tool HealthyBlue. Contractual partner since December 19, 2012. Quality of customer service and timely and effective issue resolution are contractual obligations regarding telephonic support, site uptime, portal performance and issue remedying.

New programs are also available from Cerner. Services such as onsite basic medical screens and health coaching may provide an increased level of customization that integrates based upon the specific needs of the NDPERS population.

National Independent Health Club Association (NIHCA) provides administration of the BCBSND Health Club Credit program. Contractual partner since January 1, 2008. Quality of customer service and timely and effective issue resolution are contractual obligations regarding standards and support metrics and reporting.

10. What ratings have you received from the following third party rating companies and organizations?

Rating Organization	Rating	Date of Last Accreditation / Rating
A.M. Best	N/A	
Standard & Poor's	BBB+	May 2014
Moody's	N/A	
NCQA (by product)	N/A	
	N/A	
JCAHO	N/A	
URAC	Full Accreditation for Health Utilization Management Full Accreditation for Health Plan and Health Plan for Health Insurance Exchange	Through 9-1-2015 Through 6-1-2017
American HealthCare Commission	N/A	

11. Are any of the services you are proposing to provide to NDPERS contracted outside the U.S.A? Describe any business you do outside the U.S.A. and the financial impact, if any, of requiring those services to be provided within the U.S.A.

All services proposed are provided domestically.

12. Confirm that your proposal includes any and all deviations to the Minimum Contract Provisions (via submission of Exhibit F) and to the other RFP requirements (via Exhibit F, worksheet 2).

Confirmed.

13. Confirm that you will conform to the Patient Protection and Affordable Care Act and the Health Care and Education Reconciliation Act of 2010. Describe any provisions that NDPERS must be prepared to comply with beginning July 1, 2015.

BCBSND is committed to serving as NDPERS's primary resource for information about Patient Protection and Affordable Care Act (PPACA) and the Health Care and Education Reconciliation Act of 2010 and will revise NDPERS's benefit plan, programs and systems to ensure compliance.

Since the inception of ACA, BCBSND has provided NDPERS access to our subject matter experts to work through the ACA key provisions including the employer mandate, eligibility, look back periods, affordability and reporting requirements. A pilot workgroup was formed including representatives from NDPERS, the Office of Management and Budget, agency

staff and BCBSND to discuss implementation requirements. In addition, other state agency and political subdivision representatives were invited to two special ACA forums in July and September, where BCBSND staff presented on ACA provisions along with other state staff.

BCBSND has worked with NDPERS to successfully implement the initial provisions of PPACA, including:

- Expanded eligibility for adult children up to age 26
- Elimination of pre-existing condition waiting periods for members younger than age 19
- Elimination of lifetime and annual limits for essential benefits
- Elimination of cost-sharing for preventive services, screenings and care as well as routine immunizations recommended by various government agencies
- Expanded coverage for women's preventive benefits for non-grandfathered plans
- Compliance with the PPACA Summary of Benefits and Coverage and Uniform
- Glossary provision
- Transitional Reinsurance Assessments
- Patient Centered Outcomes Research Tax
- PPACA Insurer Fee

With a move to self funding, many of these taxes and fees are no longer applicable. BCBSND will work with NDPERS on these changes.

BCBSND will continue to work with NDPERS to implement additional provisions as required under PPACA. The following provisions will impact NDPERS during the next biennium, including:

Provisions	Non Grandfathered Plans	Grandfathered Plan
USPSTF – Alcohol Misuse	Impacted	Not Impacted
USPSTF – Hepatitus C Virus Screening	Impacted	Not Impacted
USPSTF – Preventive High Risk Breast Cancer Drugs	Impacted	Not Impacted
USPSTF – Lung Cancer Screening	Impacted	Not Impacted
Out of Pocket Maximum Definition Update	Impacted	Not Impacted
Removal of Waiting Periods	Impacted	Impacted
Conversion Language Updates	Impacted	Impacted
BlueCard Language Updates	Impacted	Impacted
20% Non Par Sanction Removal	Impacted	Not Impacted
Medical Qualification Language Removal	Impacted	Impacted
Member Rights and Responsibilities Language Added	Impacted	Impacted

*Provisions do not apply to retiree plans

In addition, effective the next biennium, 7-1-2015 – 6-30-2017, due to the **Mental Health Parity and Addiction Act (MHPAEA)** final rule, we will be removing the age limits from Psychiatric Residential Treatment Services. Previously, this benefit was limited to members under age 21. This restriction was removed to comply with the MHPAEA final rule.

1.1.2 References and Experience

14. Provide the following information on a maximum of three (3) of your largest medical plan clients for whom you provide medical network, and administrative services on a self-insured basis. References of similar size and scope to NDPERS are preferred; one must be your largest public sector client and one must be your largest North Dakota-based client.

Name of employer sponsoring plan and location:	Titan Machinery Inc. Fargo, ND
Type of services provided to plan sponsor:	Health
Plan inception date:	1998
Length of time as client:	16+ Years
Number of contracts and members participating in the plan:	1,882 contracts; 3,745 members
Contact Information (name, title, phone number, e-mail address):	Randy Johnson, VP of Human Resources (701) 356-0130 Randy.johnson@titanmachinery.com

Name of employer sponsoring plan and location:	Fargo Public Schools Self-Funded Insurance Program, Fargo, N.D.
Type of services provided to plan sponsor:	Health
Plan inception date:	mid-1970s
Length of time as client:	37+ years
Number of contracts and members participating in the plan:	1,405 contracts; 3,744 members
Contact Information (name, title, phone number, e-mail address):	Sheryl Lehman 701-446-1038 lehmans@fargo.k12.nd.us

Name of employer sponsoring plan and location:	Border States Industries, Inc.
Type of services provided to plan sponsor:	Health and Dental
Plan inception date:	1985
Length of time as client:	28 years
Number of contracts and members participating in the plan:	1,292 contracts; 3,122 members
Contact Information (name, title, phone number, e-mail address):	Sherri Sandvig, VP Human Resources (701) 239-7467 ssandvig@border-states.com

15. Provide the following information for two (2) of your largest medical plan clients that have terminated services during the preceding 3-year period. References of similar size and scope to NDPERS are preferred.

Name of employer sponsoring plan and location:	Coventry Health Care
Type of services provided to plan sponsor:	Health
Plan inception date:	2002
Length of time as client:	12 Years
Number of contracts and members participating in the plan:	352 contracts, 829 members
Reason for termination:	Acquired by Aetna
Contact Information (name, title, phone number, e-mail address):	Francis Babin, Manager, Benefits (301) 581-5449

Name of employer sponsoring plan and location:	Essentia Health
Type of services provided to plan sponsor:	Health
Plan inception date:	Mid-1990s
Length of time as client:	15+ years
Number of contracts and members participating in the plan:	Approx 1,700 Contracts, 3,400 members
Reason for termination:	Moved to Corporate Health Plan
Contact Information (name, title, phone number, e-mail address):	Dr. Greg Glasner, President and CMO (218) 435-1212 Greg.Glasner@EssentiaHealth.org

1.2 Implementation and Account Management

16. Proposers must outline in detail the specific activities and tasks necessary to implement the NDPERS program. Be specific with regard to the following:

- Amount of total time needed to effectively implement the program

  30 days prior to the open enrollment session launch.
- Activities/tasks and corresponding timing

  As the incumbent carrier, no transition will be needed and system changes will follow BCBSND group renewal processes already in place.
- Responsible parties and amount of time dedicated to implementation, broken out by vendor and NDPERS staff

  As the incumbent carrier, all processes are in place to support the renewal of the NDPERS plan.
- Any transition activities required with incumbent carriers, including providing members adequate notice regarding current care or treatment plans at least 60 days prior to a change

  Not applicable to BCBSND as incumbent.
- Length of time implementation team lead and members will be available to NDPERS.

  BCBSND currently has a team of employees dedicated to NDPERS. Our NDPERS team will ensure a smooth implementation every step of the way.

17. Provide an overview of how the NDPERS relationship will be managed, both strategically and on a day-to-day basis. Include an organizational chart. NDPERS will give preference to vendors who are willing to assign a dedicated account management team and provide access to senior leadership. Designate the names, titles, location, telephone numbers, and email addresses for the representatives listed below. For the account service individuals listed (b, c, d, and e below), provide brief biographical information, such as years of service with your company, experience as it relates to this proposal, and the number of clients for which they perform similar services.

    Strategically, the NDPERS relationship will be managed to engage the boards and executives in direct communication on organizational needs and direction. We will continue to work with NDPERS to address cost trends, legislative items, new product concepts and other issues impacting the cost and quality of care and coverage. On a day-to-day basis, we will continue to provide a dedicated account executive, an account manager, group consultant, wellness consultant and access to all levels of management and the BCBSND Board. NDPERS members will continue to receive the high quality they've come to expect from our dedicated member services team. Please see "Attachment 3 – BCBSND Organizational Chart" for the BCBSND organizational chart.

    a. The key individual representing your company during the proposal process;

        Tim Huckle, President and CEO

        A team of executives play a supporting role. Please refer to "Attachment 4 – Biographies" for biographical information.

        Executive Support Team:

        - Denise Kolpack, Senior Vice President of Corporate Communications and Public Affairs
        - Pat Bellmore, Chief Marketing Officer
        - Brad Bartle, Vice President of Actuarial & Membership
        - Mark Tschider, Vice President of Customer Support & Claims Administration
        - Sharon Fletcher, Senior Vice President of Health Network Innovation and Human Resources and Development
        - Renay Rutter, Executive Vice President of Enterprise Planning and Technology
        - Daniel Conrad, Chief Legal Officer
        - Brian Fellner, Executive Vice President and Chief Financial Officer

    b. The key individuals on your proposed implementation team;

        BCBSND has an established cross functional implementation team with leadership representation from all business units. This team will be led by a dedicated Project Manager, Lacey Hogness.

    c. The key individual assigned to overall contract management;

        Kevin Schoenborn, Manager, Consulting Services - Account Executive

    d. The key dedicated individual or team members responsible for day-to-day account management and service;

        Your dedicated Account Management Team will coordinate with the BCBSND implementation to ensure all aspects of the NDPERS benefit plan are implemented timely and accurately. They will be supported by a team of Subject Matter Experts. Please refer to "Attachment 4 – Biographies" for biographical information.

Account Management Team:

- Kevin Schoenborn, Manager, Consulting Services – Account Executive
- Dorinda Card, Director of Key Accounts
- Onalee Sellheim, State and Public Program Manager – Account Manager
- Sonja Nyhof, State and Public Program Manager
- Jodi Crouse, NDPERS Large Group Consultant
- Michael Carlson, Manager of Health and Wellness
- Stacy Duncan, NDPERS dedicated Wellness Consultant
- Sheri Srnsky, Team Leader, Special Accounts, Claims

Subject Matter Experts:

- Michelle Bishoff, Director of Claims Administration
- Tom Christensen, Manager of Pharmacy Management
- Zach Keeling, Director of Marketing Operations & Product Management
- Linda Merck, Senior Actuarial Analyst
- Lacey Hogness, Business Implementation Lead
- Mike Potts, Director of Employer Consulting & Wellness Services
- Carman Bercier, Vice President Health Innovation and Practice Innovation
- Jackie Walsh, Vice President Clinical Excellence and Quality
- Pam Gulleson, Vice President of Public Affairs
- Megan Houn, Director of Government Relations
- Brent Solseng, Pharmacy Manager Marketing
- Shelly Stalpes, Manager Claims Administration
- Jim Wynstra, Director of Actuarial
- Heather Horner, Member Education Consultant
- Miriam Griffin, Member Advocate Specialist

Please refer to "Attachment 4 – Biographies" for biographical information.

e. The key individual responsible for provider contracting; and

Sharon Fletcher, Senior Vice President Health Network Innovation and Human Resources and Development

Please refer to "Attachment 4 – Biographies" for biographical information.

f. The key individual responsible for provider relations if different than letter e. above.

Please refer to question 17 e.

18. Please provide the requested information for the functions that will be servicing NDPERS in the table below:

Area	Geographical Location(s) and Organizaiton Name (if out-sourced)	Hours of Operation (Specify PST/ CST/EST)	*Is this service Outsourced? Yes or No? If Yes, provide name of company to which the function is outsourced*
Member Service	4510 13th Ave S. Fargo, N.D. 58121	Monday – Friday 8 a.m.-5 p.m.	No

Area	Geographical Location(s) and Organizaiton Name (if out-sourced)	Hours of Operation (Specify PST/ CST/EST)	*Is this service Outsourced? Yes or No? If Yes, provide name of company to which the function is outsourced*
Claims Processing	4510 13th Ave S. Fargo, N.D. 58121	Monday – Friday 8 a.m.-5 p.m.	No
Enrollment and Eligibility	Enrollment and eligibility currently administered by NDPERS	Enrollment and eligibility currently administered by NDPERS	Not Applicable
Disease Management	BCBSND MediQHome program for in-state members Fargo, N.D.	Admin support: 8 a.m.-4:30 p.m. (CST) Online access: Available 24 hours a day, 7 days a week	No
	Accordant (effective 8/1/2010) North Carolina	Admin support: Monday – Thursday: 8 a.m.-9 p.m. (EST), Friday: 8 a.m.-5 p.m. (EST) Online nursing: 24 hours a day, 7 days a week	Yes - Accordant
	Healthways Disease Management (Out of state members) Nashville, Tenn.	9 a.m.-5 p.m. (CST)	Yes - Healthways
Case and Utilization Management	4510 13th Ave S, Fargo, N.D.	8 a.m.-4:30 p.m. (CST)	No
Health, Education and Wellness Programs/ Services (including dedicated wellness support staff)	HealthyBlue online portal, South Burlington, VT	24 hours a day, 7 days a week	Yes - Cerner
	Health Club Credit Program, Granite Falls, MN	9 a.m.-5 p.m. CST Monday through Friday	Yes – National Independent Health Club Association (NIHCA)
	BCBSND (NDPERS Wellness Consultant), Fargo, ND	8 a.m.-5 p.m. CST, Monday through Friday	No
HSA	Discovery Benefits, Fargo, N.D.	Monday-Friday, 7 a.m.-7 p.m. CST	Yes - Discovery Benefits

Area	Geographical Location(s) and Organizaiton Name (if out-sourced)	Hours of Operation (Specify PST/ CST/EST)	*Is this service Outsourced? Yes or No? If Yes, provide name of company to which the function is outsourced*
Other (Specify functional area)			
Member Education & Engagement	Fargo, N.D., and Bismarck N.D.	Monday – Friday 8 a.m.-4:30 p.m. (CST)	No
Dedicated NDPERS Account Manager	Based in Fargo, N.D.	Monday – Friday 8 a.m.-4:30 p.m. (CST)	No
Pharmacy Benefit Management	Prime Therapeutics, LLC, Headquarters: Eagan, Minn. Other locations: Albuquerque, N.M.; Chicago, Ill.; Irving, Texas; Jacksonville, Fla.; Omaha, Neb.; Pittsburgh, Pa.; Washington, D.C.; Bloomington, Minn.; Birmingham, Ala.; Orlando, Fla.; Raleigh, N.C.	Pharmacy Contact Center: 24 hours a day, 7 days a week PrimeMail Contact: 24 hours a day, 7 days a week Member Services: 8 a.m.-4:30 p.m. (CST)	Yes – Prime Therapeutics
Northern Plains Alliance / ClearStone Solutions	Eagan, MN	8 a.m.-8 p.m. 7 days a week CST and MST	Yes - Northern Plains Alliance / ClearStone Solutions

1.3 Communications and Website

19. Please complete the table below by providing a description of the pre-enrollment communication materials you will provide to support NDPERS during its open enrollment period:

Area	Description	Can it be customized for NDPERS?
Website	BCBSND will provide a dedicated page on its primary website (www.BCBSND.com) to provide enrollment information, FAQs, contact information, and additional items deemed necessary by NDPERS.	Yes
Employee Newsletter(s)	BCBSND will provide original content addressing relevant insurance issues for the NDPERS employee newsletter. The content will support NDPERS's pre-enrollment and enrollment efforts.	Yes

Brochures	BCBSND supplies a PDF of the NDPERS PPO/ Basic and the HDHP benefits grid on the NDPERS website.	Yes
Direct mail (internal or home distribution)	BCBSND will develop HTML-based flyers and information messaging for email distribution. BCBSND developers will provide these to NDPERS Information Technology personnel for distribution, to ensure complete coverage of the membership.	Yes
Enrollment guide	As the current carrier, BCBSND supplies NDPERS with underwriting criteria to administer its enrollment.	Yes
Employee open enrollment meeting support and attendance	As the current carrier for NDPERS, BCBSND has a dedicated NDPERS account manager who can attend all open enrollment meetings upon request.	Yes
Benefits/HR staff training support	BCBSND's dedicated NDPERS account manager provides a benefit overview to all NDPERS agencies and NDPERS HR/Payroll areas upon request.	Yes
Video	BCBSND can deliver audio-visual presentations, Brainshark, tutorials, and educational materials in multiple ways. Distribution can be by physical media (DVD, CD-ROM), web pages, personal media player downloads, or a combination. Online distribution can be through BCBSND or by delivery to NDPERS Information Technology personnel.	Yes
Employee healthcare cost calculator worksheets (cost estimates)	BCBSND will assist NDPERS in complying with the Summary of Benefits and Coverage and Uniform Glossary provision of PPACA. The Summary of Benefits and Coverage provides employees with health care costs and estimates for certain episodes of care.	Yes
Other (please list)		

20. Are you willing to provide communication and marketing resources to work with NDPERS in the development of NDPERS-specific member communication materials (educational, open enrollment, benefit plan related, ongoing communications)? Describe the resources, sample communications, and your proposed approach and strategy/plan.

    BCBSND is willing to provide these resources to NDPERS. As the current carrier, BCBSND currently provides a variety of communication and promotional materials to NDPERS members. Several worksite wellness materials are available on topics including smoking cessation, healthy diet, exercise and other health and wellness topics. Materials include a monthly wellness article with related poster, brochure and table tent.

    In addition, member education and engagement materials are offered at the workplace through BCBSND's member education programs. Presentation topics include:

    - Take Care of Yourself
    - Walking Works
    - HealthyBlue
    - Health Club Credit

- Strength Training
- Beat the Bug
- Summer Safety
- Stress Management
- Medication Education
- Nutrition Basics for a Healthier You
- CPR and First Aid Basics

Various programs include a giveaway item to support the message, such as a pedometer for the Walking Works program or strength stretch bands for Strength Training.

BCBSND provides all benefit plan materials, including Summary Plan Description booklets, information grids summarizing member benefits and ID Cards. Worksite enrollment meetings are available and delivered by the NDPERS Account Representative on request.

BCBSND will continue to provide ad hoc marketing and communication strategies and proposals for specific needs outside the scope of the RFP. These strategies are developed by Corporate Communications and Marketing staff in collaboration with NDPERS staff; for example, the Wellness Engagement with the Lieutenant Governor.

21. How much lead time is necessary for you to guarantee that ID cards will be received by members prior to the plan year effective date of July 1, 2015?

BCBSND guarantees delivery of ID cards to members before July 1, 2015, as long as all required enrollment information is received by June 14, 2015.

22. Describe your plan for the post-65 programs that you will offer to NDPERS retirees.

With nearly 6,200 Medicare retiree contracts in the NDPERS group, BCBSND is committed to working with NDPERS staff to enhance benefits for this important segment of its membership.

Over a period of years a "look-alike" group Medicare Supplement Plan F benefit plan was developed for those retirees ages 65 and older. BCBSND also collaborated with NDPERS staff to mirror the prescription drug benefits for retirees and implement a NDPERS customized Part D prescription drug group product. BCBSND was able to offer this prescription drug product through its participation in the Northern Plains Alliance. Doing so allowed NDPERS to receive Part D subsidies from the Centers for Medicare & Medicaid Services (CMS), which reduced the overall cost for the program.

In addition, post-65 members currently have access to the MediQHome disease management program in-state, the Accordant disease management program and an out-of-state (OOS) disease management program. Wellness programming such as HealthyBlue and Health Club Credit are available to retirees and spouses. These programs and events provide information to educate and engage NDPERS retirees in their personal health and wellness.

BCBSND will continue its collaboration with NDPERS staff on innovative product and program ideas to address the unique needs of this segment of NDPERS enrollment.

1.4 Plan Administration

23. Confirm that you will communicate legislative changes related to the operations of the plan in a timely manner, and describe the support staff and process.

BCBSND will communicate federal and state legislative changes in a timely manner. BCBSND maintains close relationships with state and federal elected officials and their respective

staffs. Our Government Relations team, Pam Gulleson and Megan Houn, monitor federal and state bills and promptly notify internal staff of potential changes that could impact the NDPERS health plan. Megan Houn works out of the Bismarck office and Pam Gulleson is based in Fargo. The Account Management Team notifies NDPERS staff of potential changes. BCBSND Legal staff will provide guidance on these issues, but recommends NDPERS communicate with its legal counsel to confirm. BCBSND's Actuarial Team will provide pricing on legislative changes. BCBSND Contract Administration staff also works closely with the North Dakota Department of Insurance on notification of these changes. The Account Management Team works closely with NDPERS staff throughout the process.

24. Describe your proposed transition of care plan. At a minimum, the transition plan must address:

    a. Conditions or type of care that is typically transitioned;

       As the incumbent carrier, this is not applicable.

    b. Individuals who are in a course of treatment;

       As the incumbent carrier, this is not applicable.

    c. Transition process of current medical treatment;

       As the incumbent carrier, this is not applicable.

    d. Communication of transition issues to all plan members.

       As the incumbent carrier, this is not applicable.

25. NDPERS recognizes that different settlement arrangements will be necessary to implement a self-insured program. Please describe your proposed settlement process.

    BCBSND can offer NDPERS two options for settlement arrangements. These options are dependent on NDPERS handling of specific billing for each group.

    a. If NDPERS prefers BCBSND bill the member groups, BCBSND would require an 820 file each month to cover the month's premium notices. This would update the billing so there would not be a balance forward in the next month's bill. BCBSND would wire the funds back to the group after the 820 has been processed.

    b. If NDPERS prefers to bill the member groups directly, BCBSND would not require an 820 for premium. Claims would draw against NDPERS claims account and administrative fees and stop-loss premium would draw against NDPERS cash account.

26. What is your total commercial and Medicare health plan enrollment? Complete the table below.

Dates	Commercial	Medicare
As of January 2012	429,425	35,824
As of January 2013	456,590	36,690
As of January 2014	467,297	37,485

1.5 Eligibility

27. Are ID cards the sole means of determining member eligibility? If not, please describe.

    No, ID cards are issued to employees when their applications are processed. Eligibility is determined using the information from the last application received from the employee

plus any additions (e.g. newborns automatically added from claims information) and deletions (e.g. dependents removed when no longer eligible). Members will receive a letter of termination upon request or automatically when a member is terminated. Members can also call the BCBSND service unit to verify eligibility status or visit BCBSND's website.

28. If desired, can NDPERS update and maintain eligibility and check employee claim status online? Are there any special charges for access to and use of these tools?

    NDPERS can check employee status through The Healthcare Online Resource (THOR). NDPERS updates and maintains their eligibility through the 834 file which is sent weekly. There are no charges for these services.

29. NDPERS will submit enrollments via a centralized electronic system. NDPERS will collect enrollment/eligibility information which will be provided to the successful contractor on a data file that follows the HIPAA 834 file specifications. Files will be transmitted using a secure file transmission process. The successful contractor must be able to receive this data in that format and media.

    Yes, BCBSND can receive this format. As the incumbent, this process is currently in place for NDPERS.

30. Please describe how you handle manual eligibility updates and the turn-around/timing of such updates.

    BCBSND can accept faxes, phone calls and secured email attachments. Eligibility updates can be processed immediately, if necessary; otherwise, they can be processed within 14 days.

31. Please describe your standard (or proposed) financial arrangements with NDPERS under a self-funded arrangement including but not limited to: account requirements and process for claim payment, frequency of reimbursement to the administrator for claims paid, methodology for funds transfers, required reserves in claim account, etc.

    NDPERS claims are already set up for reporting in BCBSND self-funded software. The transition should take minimal programming work to convert the fully insured process to self-funded. Self-funded claims are updated weekly by Wednesday morning. BCBSND will set up an automatic ACH withdrawal every Friday to pull funds from the group's bank account to reimburse BCBSND for their claims from the previous week. The group will be able to view their weekly claims amount each Wednesday online and must have enough funds in their account to cover the claims for that week.

1.6 Customer/Member Service

32. Confirm if you will provide and maintain dedicated customer service staff acceptable to NDPERS. This unit will provide dedicated local and toll-free telephone numbers and shall respond directly to member inquiries regarding benefits, claim status, selecting participating providers, and provide general assistance with navigating on-line and other resources available through the health plan and NDPERS websites. Describe the structure and organization and provide an organizational chart of the unit you are proposing.

    BCBSND will continue to provide and maintain dedicated NDPERS customer service/ claims processing staff and provide dedicated local and toll-free telephone numbers for members. The dedicated staff will also continue to respond directly to members regarding benefits, claims status, selecting participating providers, and provide general assistance with navigating online and other resources available through the health plan and NDPERS websites. The dedicated customer service unit consists of nine customer service representatives who handle the daily customer service inquiries and claims processing functions, one coordinator who handles day-to-day functions/training of the service unit and one team leader.

Please refer to "Attachment 5 - NDPERS Service Unit - Organization Chart" for the organizational chart for the NDPERS Service Unit.

Member Advocacy Program (MAP)
The Member Advocacy Program (MAP) is designed to be proactive in helping members facing life-changing medical events, such as newborns with congenital defects, pediatric cancers, transplants and traumatic injuries. The program identifies and serves families in these circumstances by proactively reaching out to these members and offering assistance through a Member Advocate. These individuals help those families understand their medical bills and insurance benefits, contacts providers to resolve billing problems, and monitors claims to ensure they are being processed correctly. Because these families have complex claims, the program allows them to contact the member advocates directly by phone or email when they have questions. These member advocates works with Medical Management and Case Management staff to facilitate effective, compassionate and cost-effective outcomes.

The program not only guides members with high-dollar complex cases, but it also promotes high efficiency in claims processing, reduces member confusion and stress and saves members money. The Member Advocate manages customer expectations during an extremely difficult time in the member's life, strengthening brand loyalty and customer satisfaction.

Annual Member Satisfaction Survey
BCBSND conducts a member satisfaction survey of calls to the NDPERS Member Services Department. Member overall satisfaction with service has consistently been above 90 percent with 2013 performance reaching 95% satisfaction.

1.7 Claims Administration

33. Provide the following information regarding the claims administration unit that will handle the NDPERS account. If there is more than one claims processing location, provide information for each.

	Claims Processing Unit
Address/Location	4510 13th Ave S. Fargo, ND 58121
Phone Numbers	Toll-free: 800-223-1704 Local: 701-282-1400
Days and Hours of Operation	Monday-Friday 8 a.m.-5 p.m. Central Standard Time (CST)
Number of Members Serviced	The dedicated NDPERS Service Unit provides service to all 65,000 NDPERS members covered under the NDPERS Plan. During July 1, 2013, through June 30, 2014, the NDPERS Service Unit handled 33,246 calls.
Number of Employer Groups Serviced	NDPERS has a dedicated service unit that exclusively handles NDPERS claims and customer service.
Ratio of Claims Unit Staff to Members Serviced	The NDPERS Service Unit is comprised of nine Claims and Customer Service Unit Staff to provide service to all 65,000 covered NDPERS Members; a ratio of 1:7,222.
Volume of Claims Processed Daily	During July 1, 2013, through June 30, 2014, an average of 3,052 claims were processed per day; this includes systematic and manually processed claims.

34. Will your organization identify a dedicated team of claims processors for the NDPERS account? If processors are shared with other clients, on average, how many clients does one team service? What is the average length of service of the claim processors?

    Yes, BCBSND currently has a dedicated NDPERS Claims and Customer Service Unit that does not handle any other clients. The service unit consists of nine representatives who handle the customer service and claims processing functions for the NDPERS group, a coordinator that handles the day-to-day activities of the service unit and one team leader. The average length of service for the claims processors is five years, ranging from one year to 17 years. The service unit provides both medical and RX support when integrated with Prime Therapeutics.

35. Confirm that you are able to administer the NDPERS designs (Dakota Plan and Dakota Retiree Plan, HDHP/HSA) and benefit levels without manual intervention. If you are unable to administer the plan, you must specify any plan design deviations proposed as specified in the RFP.

    Yes, BCBSND is able to administer the NDPERS plan designs for the Dakota Plan, the Dakota Retiree Plan and the HDHP/HSA Plan as requested by the NDPERS group. Claims are processed with minimal intervention. During the time of June 1, 2013 through May 31, 2014, BCBSND's first pass rate was 80.76 percent, claims received that were automatically processed by our claims processing system. Claims that hold for manual intervention require additional research such as medical records, workers compensation investigation or other insurance information.

36. Describe your claims processing system/platform and claims administration process.

    BCBSND utilizes a mainframe-based, claims processing system designed and operated by CoreLink Administrative Solutions, a jointly owned company of BCBSND and Blue Cross Blue Shield of Nebraska. CoreLink claims processing systems have been developed with the primary objective of providing optimal services to all business. The claims system is, in reality, several systems, designed around classes of providers and their unique billing forms. These systems share a common membership database, which contains extensive contract/member eligibility information. These systems also share a common cost share file where deductible and coinsurance amounts, benefits maximums and other accumulators are tracked. The system is an integrated system that handles all claim and contract types.

    Most claims received electronically process automatically through our claims processing system, but some may require manual intervention. If information regarding claims data, eligibility, other party liability or benefit coverage requires intervention, the claim is suspended in the system for manual review and resolved by a claims adjudicator.

    Online claims maintenance allows the resolution to be posted to the claim on the system to reinitiate the automated processing of the claim for payment. The claims systems are real-time capable and prepared for the immediate adjudication of claims if the customer has those needs.

1.8 Reporting

38. Confirm your ability to provide the reports described in the RFP and provide samples.

Confirmed.

Please refer to Attachment 6 for samples of the standard reporting package. In addition, BCBSND's Consulting Services will provide ad hoc reporting to NDPERS as needed.

BCBSND also publishes a quarterly NDPERS Executive Summary report, for the NDPERS Board, recapping financial and trend analysis, health utilization, claims and inquiry timeliness, wellness programs, account management and member engagement activities. Annually BCBSND presents a comprehensive analysis to the NDPERS Board. This analysis includes information about the demographics and health of the NDPERS population, utilization, health management, program evaluation, and member engagement. Opportunities and recommendations are also offered for review. Please see Attachment 7 for a sample of these Executive Summaries.

Understanding the impact of PPACA is the first step to developing a benefits strategy that aligns with the emerging landscape. BCBSND understands this and offers NDPERS a modeling tool to determine the financial incentives to retain or remove coverage. This tool considers employer and employee subsidies and penalties in combination with specific demographic and income data to determine the level of incentive. BCBSND Consulting Unit will be able to provide NDPERS with the results of this tool, as well as in-depth analysis of the outcomes and will work with you to determine a strategy that best fits the needs of NDPERS.

39. Describe your online reporting capabilities. Please describe the data/information and types of reports that can be accessed and downloaded from your online system.

BCBSND's full suite of standard reports and data feeds are available on a secure website (The Healthcare Online Resource) for staff to access.

BCBSND also offers access to Health Intelligence, an online reporting tool that allows for benchmarking and has drill down functionality to examine outliers and unique trends. The comprehensive Employer Group module features demographics, cost, utilization and risk analysis in print-ready Employer Profile Reports that can be set up on a periodic basis. Please see Attachment 8 for a sample of the Health Intelligence Employer Profile report.

40. Explain your ability to comply with the NDPERS current data warehouse arrangement by providing medical claims and enrollment data to NDPERS in a format agreed upon between you and NDPERS no less than monthly.

As the incumbent, BCBSND will continue to send monthly data files through THOR to NDPERS in an agreed upon format that includes claims and enrollment data.

1.9 Case/Utilization Management

41. Provide a brief overview of your utilization management programs, including pre-certification, concurrent review, discharge planning, and large case management.

Preauthorizations: Registered Nurses complete reviews for the services that require pre-authorizations in accordance with established clinical criteria. Examples include:

- Home health care
- Skilled nursing facility/swing bed/transitional care unit
- Hospice
- Medical/surgical inpatient admissions to facilities non-participating with BCBSND
- Inpatient rehabilitation
- Long-term acute care
- Psychiatric/substance abuse inpatient admission, residential treatment centers, partial hospitalization, intensive outpatient programs

Concurrent Review/Discharge Planning: Concurrent review may be conducted to ensure that ongoing treatment is appropriate and includes discharge planning. Members with lengthy hospitalizations, high-risk diagnoses, readmissions, psychiatric and substance abuse admissions are most often in this category. Working in conjunction with the member and their providers, our staff supports discharge planning by providing information on benefits available for those services determined to be medically appropriate and necessary for the member's continued care and treatment.

Prior Approvals: In addition to preauthorizations for admissions, the following services or procedures require pre-notification to assess for medical necessity and appropriateness:

- Assisted reproductive technology (in vitro fertilization)
- Chronic pain management programs
- Cosmetic surgeries
- Dental anesthesia and hospitalization for members age 9 and older
- Electric wheelchairs
- Growth hormone therapy/treatment
- Human organ transplants
- Insulin infusion pump
- Obstructive sleep apnea treatment, except for continuous positive airway pressure (CPAP)
- Osseo integrated implants
- Prosthetic limbs controlled by microprocessors and any prosthetic limb replacement within five years
- Prosthetic limbs replacement within five years
- Restricted use drugs
- Rhinoplasty

Because services in these areas can be misused or overused without effective outcomes, specific medical necessity criteria have been established for these services. The member's health care provider will substantiate the medical need for the procedure and provide documentation of this in a written request. The provider and member are notified of the prior approval determination in writing.

Benefit Inquiries: The Medical Management staff provides assistance to members and health care providers with benefit medical appropriateness and necessity determinations. Benefit inquiries are questions about services that do not require prior approval.

Registered nurses provide assistance to members and health care providers with benefits determinations for medical appropriateness and necessity. Benefit inquiries are questions about services that do not require prior approval.

Chiropractic Review: BCBSND employs a part-time chiropractor who is responsible for the oversight of chiropractic utilization and management, including determinations of medical necessity and chiropractic medical policies.

Utilization Management Oversight: Medical policies, federal and state mandates, and departmental policies and procedures are in place to assist with medical necessity reviews to ensure consistency is applied to all requests. Federal and state mandates have been instituted around security, privacy and timeliness. All policies and procedures are reviewed on an annual basis, and employees are required to become familiar with any changes to updated policies.

BCBSND holds URAC (formerly Utilization Review Accreditation Commission) Health Plan accreditation. This accreditation requires compliance with numerous standards, security and quality measures, and ensures that processes surrounding reviewing for medical necessity are followed closely and according to set guidelines. The Health Plan accreditation standards focus on provider network management, credentialing, member relations, utilization management, and quality management. Accreditation requires the ability to demonstrate services offered to members, establish goals, showcase performances related to access of care, and availability of providers.

Large Case Management: During the course of any year, only a small percentage of the population experiences catastrophic accidents or illnesses, yet this small group accounts for a large portion of all health care costs. BCBSND's Case Management program recognizes the high cost of admissions and the emotional impact on members who have long-term, serious illnesses. Case managers help members obtain effective alternative health care solutions that are medically appropriate and necessary.

BCBSND's Case Management Team, consisting of registered nurses and licensed social workers, help to advise, educate and assist members and their families as they coordinate their medical care and treatment plans. Case Management coordinators facilitate communication between members and providers and work together to ensure collaborative decision making that takes the member's wishes and provider's recommendations into consideration. Case managers also help reinforce the importance to members of following their physician's treatment plan, while educating members and allowing them to be actively involved in their medical care. The Case Management Team conducts assessments of a member's needs through on-site visits, telephone interviews and analysis of reports to determine if a member could benefit from case management. The type of services provided varies, depending on each member's need and situation. For example, the Case Management Team may provide assistance with discharge planning from an acute setting, provide a member with educational material regarding an illness, discuss alternatives to current treatment plans with physicians or provide benefits for a service that might not normally be offered by their regular benefit plan. All options for potential intervention are explored in collaboration with the member/family, providers,

community resources and BCBSND team members as a means of improving the member's health status while potentially reducing costs. Participation with case management is voluntary and does not alter other health benefits offered by the member's basic health care plan. It is a collaborative effort between the member, the member's health care provider and BCBSND.

For NDPERS, in the time period, April 1, 2013 to March 31, 2014, 83 members were screened for case management needs. This included both active employees and retirees. Of these members, 28 were intensely followed by a case management nurse. Data is used to identify members with potential risk of high costs and hospital admissions and to prevent frequent ER usage. Calculating the difference between the anticipated expenditures if case management services had not been provided (the original course of action) and the actual expenditures incurred as a result of case management intervention, the program's estimated cost savings for this time period were $237,060. Cost savings for case management generally varies due to the differing severity of cases managed.

Now that there is a dedicated Case Manager, a variety of reports have been developed (and they continue to develop as needed) and we are providing proactive outreach to NDPERS members and their providers. Some of the new reports that have been developed include:

- ER visits – if a member has had more than 3 in the last month
- Top 10 highest at risk for inpatient – based on risk scores
- High dollar members – review those over $400K

These are some additional reports that the Case Manager currently receives:

- Prenatal Plus-monthly to those who are high risk
- Individuals identified for MAP program
- Inpatient if over 7 days – screen these to determine if outreach is needed

42. What is the source of the criteria used for the following:

a. Determining surgical necessity and whether a second opinion is required.

To determine surgical necessity for any procedure, the procedure is reviewed to determine if it is a nationally recognized standard of care—e.g. diagnosis of breast cancer with request for mastectomy. The standard of care is identified with input from local providers or specialty organizations. In addition, opinions and evaluations by national and state medical associations or consensus panels are researched.

To determine surgical necessity for specific procedures, the procedure is reviewed to determine if it is a nationally recognized standard of care. The standard of care is identified with input from local providers or specialty organizations. In addition, opinions and evaluations by national and state medical associations or consensus panels are researched.

If a request is made for a procedure where a medical policy is in place, the clinical information is reviewed against the policy criteria. If documentation supports medical policy criteria for that procedure, approval is given for that request. If criteria are not met for that procedure, all information is sent to the Medical Director for review of medical appropriateness and necessity.

BCBSND's Internal Medical Policy Committee reviews medical technologies according to the following technology assessment criteria that have been established by the national Blue Cross and Blue Shield Association (BCBSA) and endorsed by BCBSND:

1. The technology must have final approval from the appropriate government regulatory bodies.
2. The scientific evidence must permit conclusions concerning the effect of the technology on health outcomes.
3. The technology must improve the net health outcome.
4. The technology must be as beneficial as any established alternatives.
5. The improvement must be attainable outside the investigational settings.

The Blue Cross and Blue Shield Association's Technology Evaluation Center (TEC) provides scientific analysis and opinions of complex medical technology issues. This information allows plan medical personnel to make decisions about which treatments best improve a patient's health outcomes, resulting in efficient use of health care resources.

Peer Reviewed Journals
Part of the research includes published reports and articles in the authoritative medical and scientific literature. The quality of the body of studies and the consistency of the results are considered in evaluating the evidence. The evidence should consist of well designed and well conducted investigations.

If the procedure does not have a medical policy in place and there is a question regarding medical appropriateness and necessity, it is sent to a Medical Director for review.

In cases where medical necessity is uncertain and the member requests a second opinion, the second opinion is covered by the plan. Should BCBSND have uncertainty if the procedure is medically necessary, we may request that a member obtain a second opinion to assist in our determination.

b. Determining approved length of stay.

BCBSND does not assign length of stay for the medical or surgical preauthorizations. BCBSND uses InterQual criteria to determine medical necessity of the admission. InterQual products are a gold standard in evidence-based clinical decision support. Criteria cover the medical and behavioral health continuums of care, so they can be applied in a range of clinical situations. Pre-payment DRG audits are conducted and include Level of Care, Transfers and Readmissions. Claims are held in the system for the Nurse Reviewer to determine if the appropriate level of care was utilized, if the correct discharge disposition code was assigned and if it was a premature discharge or planned readmission.

BCBSND uses Behavioral Health Medical Necessity Criteria for psychiatric and American Society of Addiction Medicine (ASAM) Patient Placement Criteria-2R for Substance Abuse preauthorization and continued stay/treatment for all levels of care, including inpatient, residential treatment, partial hospitalization and intensive outpatient treatment. The Behavioral Health Medical Necessity Criteria have been developed based on current psychiatric literature, including the criteria of the American Psychiatric Association, the American Academy of Child and Adolescent Psychiatry and the American Society for Addiction Medicine or other relevant evidence-based literature or information. On an annual basis, or more frequently as needed, the Behavioral Health Medical Necessity Criteria and ASAM Patient Placement Criteria-2R are reviewed and approved by the Internal Medical Policy Committee of BCBSND and with input from the provider community consistent with BCBSND policies and procedures.

c. What percentile of the data is used?

National length of stay percentiles are not used. BCBSND does not assign length of stay for the medical or surgical preauthorizations as reimbursement is based on DRG methodology. For behavioral health, length of stay determinations are based on clinical information provided for each preauthorization. BCBSND will review the clinical information received based on all relevant and necessary resources received. If the clinical information supports the medical necessity of the service, authorization will be provided for an initial period, with review for continued stay, as needed.

d. Approximately what percentages of review cases are referred to a physician because the initial review and attending physician cannot reach agreement on the proposed level of care?

There were 1,768 cases referred to the Medical Director out of 16,212 preauthorization/ prior approvals, for a 10.9 percent for the time period, July 1, 2013, through June 30, 2014. Cases are referred to the Medical Director when the information submitted does not meet the established and published criteria for the requested procedure or admission.

e. Does this percentage vary between medical/surgical and psychiatric/substance abuse cases? If so, provide variances.

Out of the 16,212 preauthorizations and prior approvals, 6.7 percent (832) were referred to a Medical Director. For Behavioral Health, 25 percent (936) were referred to a Medical Director.

1.10 Health Risk Management Programs

43. Indicate in the table below if you currently provide the care or disease management program listed, the number of members from ND-based employers currently enrolled, the cost per participant, and its accreditation status.

Program	Number of Members Enrolled (ND)	Cost per Participant	Accredited? If so, indicate accrediting organization.
Arthritis	Accordant 73 NDPERS members for Q4 2013 HealthyBlue - Online Coaching 24 members in 2013	Included HealthyBlue Included	National Committee for Quality Assurance (NCQA) Cerner Yes: URAC
Asthma	MediQHome (In-state): 6,185 members Healthways DM (OOS) 89 members in 2013 HealthyBlue - Online Coaching 306 members in 2013	MediQHome Built into claims experience Healthways Included HealthyBlue Included	MediQHome No Healthways Yes: NCQA Cerner Yes: URAC
Cancer	HealthyBlue – Online Coaching 875 members in 2013	HealthyBlue Included	Cerner Yes: URAC

Program	Number of Members Enrolled (ND)	Cost per Participant	Accredited? If so, indicate accrediting organization.
Congestive Heart Failure	MediQHome (In-state): 357 NDPERS Members Healthways DM (OOS) 56 members in 2013 HealthyBlue – Online Coaching 402 members in 2013	MediQHome Built into claims experience Healthways Included HealthyBlue Included	MediQHome No Healthways Yes: NCQA Cerner Yes: URAC
COPD	Healthways DM (OOS) 52 members in 2013 HealthyBlue – Online Coaching 14 members in 2013	Healthways Included HealthyBlue Included	Healthways Yes: NCQA Cerner Yes: URAC
Depression	MediQHome (In-state): (in development) HealthyBlue – Online Coaching 4 members in 2013	MediQHome Built into claims experience HealthyBlue Included	MediQHome No Cerner Yes: URAC
Diabetes	MediQHome (In-state): 2,653 (Adult, Adolescent, and Child) Healthways DM (OOS) 366 members in 2013 HealthyBlue – Online Coaching 567 members in 2013	MediQHome Built into claims experience Healthways Included HealthyBlue Included	MediQHome No Healthways Yes: NCQA Cerner Yes: URAC
Low Back Pain	Healthways DM (OOS) 302 members in 2013 HealthyBlue – Online Coaching 7 members in 2013	Healthways Included HealthyBlue Included	Healthways Yes: NCQA Cerner Yes: URAC
High Risk Pregnancy/ Prenatal Support	Prenatal Plus Program 202 NDPERS members in 2013 HealthyBlue – Online Coaching 89 members in 2013	Included HealthyBlue Included	No Cerner Yes: URAC
Hypercholest-erolemia	HealthyBlue – Online Coaching 12 members in 2013	HealthyBlue Included	Cerner Yes: URAC
Pain Management	N/A	N/A	N/A
Renal Failure	N/A	N/A	N/A

Program	Number of Members Enrolled (ND)	Cost per Participant	Accredited? If so, indicate accrediting organization.
Smoking/ Tobacco Cessation	NDPERS Smoking Cessation Program July 2013-June 2014: 101 members enrolled. HealthyBlue – Online Coaching 121 members in 2013	Program Expenditures include administrative costs and claims July 2013-June 2014: Payments Per Member: $278 Paid through N.D. Department of Health grant (Tobacco cessation program is under separate Memorandum of Understanding) HealthyBlue Included	Endorsed by the N.D. Dept. of Health URAC Cerner Yes: URAC
Weight Management	HealthyBlue – Online Coaching 128 members in 2013	HealthyBlue Included	Cerner Yes: URAC
Hypertension	MediQHome (In-state): 9,844 NDPERS Members HealthyBlue – Online Coaching 273 members in 2013	MediQHome Built into claims experience HealthyBlue Included	MediQHome No Cerner Yes: URAC
Attention Deficit Hyperactivity Disorder	MediQHome (In-state): 590 NDPERS Members	MediQHome Built into claims experience	MediQHome No
Coronary Artery Disease	MediQHome (In-state): 1,370 NDPERS Members Healthways DM (OOS) 180 members in 2013 HealthyBlue – Online Coaching 601 members in 2013	MediQHome Built into claims experience Healthways Included HealthyBlue Included	MediQHome No Healthways Yes: NCQA Cerner Yes: URAC
Rare & Complex disease	Accordant Q4 2013, 313 active NDPERS members were included in the Accordant program	Accordant Included in Admin	Yes: URAC (Case Management) NCQA (Disease Management)

44. Briefly describe each of the programs currently offered and the cost of each program. Do you currently track and report specific clinical outcome measurements for each of the conditions for which care/disease management is offered? Please list them.

Accordant

BCBSND has contracted with Accordant to provide disease management services for complex and rare conditions. Accordant manages 17 diseases: amyotrophic lateral sclerosis (ALS), chronic inflammatory demyelinating polyradiculoneuropathy (CIDP), Crohn's disease, cystic fibrosis, dermatomyositis, gaucher disease, hemophilia, lupus, multiple sclerosis, myasthenia gravis, Parkinson's disease, polymyositis, rheumatoid arthritis, scleroderma, seizure disorders, sickle cell anemia, and ulcerative colitis.

Accordant offers personalized counseling and health evaluation to identify potential complications, a 24/7 nurse line, member education and self management techniques, and guidance finding resources. The company focuses on proactive care to avoid hospital admissions and crisis. Accordant nurses and social workers encourage member self-monitoring and management of disease-related symptoms and monitor compliance with current standards of care for the condition. Quarterly/monthly reports for clinical outcomes and participation are reviewed internally.

The cost of this program is included in the administrative fee for the stop loss program.

Prenatal Plus Program

Prenatal Plus is a voluntary educational support program for expectant mothers. Participants receive valuable information and support during their pregnancy supported by registered nurses. Participants screened as high-risk receive telephone calls on a monthly basis, whereas low-risk pregnancies receive outreach initially at 12-weeks gestation or at enrollment if a woman is beyond 12-weeks gestation, and again at 28-weeks gestation. There are multiple goals associated with the program, such as relaying as much education as possible to aid in a healthy pregnancy, encouraging collaboration with medical practitioners and early intervention for high-risk pregnancies. The expectant mother will receive a mailing, including a pregnancy calendar/journal, prenatal visit chart, pregnancy education, newborn care education, and a Taking Care of Your Child book.

BCBSND collects claim-based results (i.e. live births, caesarean section vs. vaginal delivery rates).

Under the current integrated plan we waive the copayment for the Prenatal Vitamins. This process would need to be modified should NDPERS elect not to go with an integrated Medical and Pharmacy Program.

The cost of this program is included in the base administrative fee.

MediQHome Quality Program

MediQHome Quality Program (MQP) is a collaboration between BCBSND and providers to deliver the benefits of a patient-centered medical home.

A "medical home" is not a house, hospital or other building. Rather, it is a term used to describe a health care model in which individuals use primary care practices as the basis for accessible, continuous, comprehensive and integrated care. The goal of the medical home is to provide a patient with a broad spectrum of care, both preventive and curative, over a period of time and to coordinate all of the care the patient receives.

Providers who participate in MQP have access to MDinsight (MDI), an interactive decision support tool that organizes all available patient clinical data to create clinical summaries and quality reports specific to each patient. This interactive decision support tool stores information about care opportunities in one place and is easily accessible to the provider at the point of care.

MediQHome tracks the following clinical suites:

- Asthma
- Attention Deficit Hyperactivity Disorder
- Breast Cancer
- Cervical Cancer
- Chronic Heart Failure
- Colorectal Cancer
- Coronary Artery Disease
- Diabetes Adult, Adolescent, Child
- Hypertension Adult
- Hypertension Child/Adolescent
- Immunizations Adult & Adolescent
- Immunizations Childhood

BCBSND currently tracks and reports all clinical process, outcome measures and compliance rates for each clinical metric. They are available through the MediQHome MDinsight portal internally. In addition, providers currently have the ability to do their own organizational reporting for each of the clinical metrics through the MediQHome MDinsight physician portal. These reports are real-time based on clinical data submitted directly by the provider with minimal augmentation by claims data. Reports include patient specific care opportunities, goal progress reports and comparison information for all participants in the program.

BCBSND is focused on growing the program based on the overall vision which includes enhanced analytics, engaged providers, engaged members and quality outcomes.

The BCBSND plan for growth is a staged approach.

- Stage I
  - Collect baseline performance data.
  - Introduce risk adjusted care management fee for primary care providers with increased frequency.
  - Initial practice readiness assessment.

- Stage II
  - Practices must meet minimum requirements to enter stage II as determined from their readiness assessment and action plans to address gaps.
  - Introduction of total reimbursement targets.
  - Increasing care management fee amounts to offset fee schedule adjustments.
- Stage III
  - Practices must demonstrate medical home maturity through obtaining all components of advanced PCMH certification.
  - Maximum total reimbursement target maintained.

The cost for this program is included in the claims experience.

Out of State Member Disease Management

The goal of our disease management program is to create and maintain key desired behaviors of a population and of the providers who care for them. Our programs improve participant health status and participant provider satisfaction, thereby reducing health care costs and providing a positive return on investment. Specific clinical indicators for each program include improvement in the use of pharmaceutical therapies, improvement in testing values and improved participant satisfaction. Our programs incorporate all interventions necessary to optimize patient care and are based on the most up-to-date, evidence-based clinical guidelines.

Clinical outcomes for the following core conditions will be tracked and reported:

- Asthma
- Comprehensive Back Pain
- Coronary Artery Disease
- Chronic Kidney Disease
- Back/End Stage Renal Disease
- Chronic Obstructive Pulmonary Disease
- Diabetes
- Heart Failure

The cost for this program is included in the administrative fee.

Blue Distinction Total Care

In addition to this specific program, BCBSND is working with the Blue Cross Blue Shield Association to offer access to all Blue Cross Blue Shield value based outcome driven programs. Blue Distinction Total Care will provide national access to Blue value-based programs that are designed to demonstrate results in improving patients' health while managing costs. To earn the designation, each program must meet nationally consistent criteria for value-based reimbursement, accountability across the care continuum, patient-centered quality care and provider empowerment. Designated programs encourage a more collaborative, coordinated approach across the care spectrum – helping to ensure that employees and their families are receiving the right care at the right time. Access to these programs will be available to BCBSND members in 2015.

The cost for this program will be included in claims experience.

HealthyBlue

HealthyBlue includes all the functionality NDPERS expects from an online wellness experience:

- Exercise, food and weight trackers
- Enter and track their basic medical information like blood pressure, cholesterol and blood sugar
- Mobile application for smart phones
- "Community" function where they can find a diet buddy or talk to a dietitian or fitness trainer
- Online wellness workshops
- Customized challenges
- Articles to help members live a healthier life
- Meal planner for busy lifestyles

HealthyBlue includes specific online coaching programs including:

- Congestive Heart Failure
- Depression
- Diabetes
- Low Back Pain
- Hypercholesterolemia
- Weight Management
- Hypertension
- Coronary Artery Disease

BCBSND identifies and reports member participation subjective health scores, group aggregate health scores and member risk categories.

The cost for this program is included in the administrative fee.

Health Club Credit Program

BCBSND has contracted with the National Independent Health Club Association (NIHCA), a nonprofit organization that represents independently owned health centers across the nation, to administer this program. Each eligible member can earn up to a $20 health club credit per month when each member exercises at an NIHCA-affiliated health club 12 or more days in the month. Members are responsible to ensure their credits are recorded by the health club. Members are eligible for one credit a month and the credit amount cannot exceed the total monthly health club fee.

The cost for this program and the incentives are included in the administrative fee.

45. Are you willing to customize your care management/DM programs and services for NDPERS? If so, please explain and provide an example.

Yes, NDPERS has the ability to customize care management/DM programs. Healthways Disease Management is an example of customization being provided due to lack of geographical access to a MediQHome participating provider.

46. Describe the programs offered to patients with rare and chronic diseases. Is this program outsourced? Who is the current vendor?

BCBSND has contracted with Accordant to provide disease management services for complex and rare conditions. Accordant manages 17 diseases: amyotrophic lateral sclerosis (ALS), chronic inflammatory demyelinating polyradiculoneuropathy (CIDP), Crohn's

disease, cystic fibrosis, dermatomyositis, gaucher disease, hemophilia, lupus, multiple sclerosis, myasthenia gravis, Parkinson's disease, polymyositis, rheumatoid arthritis, scleroderma, seizure disorders and sickle cell anemia, and ulcerative colitis

Accordant offers personalized counseling and health evaluation to identify potential complications, a 24/7 nurse line, member education and self management techniques, and guidance finding resources. The company focuses on proactive care to avoid hospital admissions and crisis. Accordant nurses and social workers encourage member self-monitoring and management of disease-related symptoms and monitor compliance with current standards of care for the condition.

47. Describe in detail your ability to provide online wellness programs. Compare it to the existing program presently in the NDPERS program (see Exhibit 1). Specifically identify any deviations from the existing program.

BCBSND has contracted with Cerner to offer an industry leading health and wellness portal and mobile platform to NDPERS that has been branded HealthyBlue. NDPERS was transitioned to this enhanced platform in February 2012. BCBSND will continue to support this functionality throughout the next contract period. The HealthyBlue portal is customized with content and messaging specific to the NDPERS population. Enhancements in 2014 include the ability for members to report their physical activity using smart tracking devices such as FitLinxx and FitBit products. Enhancements also occurred within the HealthyNow mobile application that improves member experience and convenience.

48. Describe Wellness incentives you offer. Compare and contrast that with the existing incentives. (see Exhibits 1 & 2).

Through interaction on the HealthyBlue website and the BCBSND Health Club Credit Program (existing Wellness incentive design for NDPERS), members have the ability to earn up to $250 per year by participating in health and wellness activities. Members can receive up to $20 per month when exercising 12 days per month at an NIHCA-participating health club.

BCBNSD's online tools provide the ability to utilize a variety of points-based or utilization-based incentive models that reward participants for logging in, establishing action plans and completing assessments and sustained health management.

As a customization to earning points via online activity, NDPERS members also have the opportunity to earn points by engaging in wellness programs at their workplace.

This program is included in the base administrative fee.

Additionally, if appropriate and requested BCBSND has the capability to administer outcome-based wellness programs and incentives and has done so historically for multiple employer groups. Currently, multiple sources of data (clinical, claims and subjectively reported) are utilized to administer the participation and outcomes-based programs and incentives. BCBSND provides a comprehensive environment that administers the member experience, group level reporting and differing channels for application of incentives (online catalog, premium differential and HSA/HRA contribution).

49. Describe your ability to support NDPERS Wellness initiatives by providing the administrative services for:

a. Tobacco Cessation program (This program is coordinated with the ND Department of Health): BCBSND collects enrollment data and administers ID cards to the enrollees. BCBSND summarizes the subsequent claims information for counseling, physician visits and medication claims. A quantitative report is provided throughout the biennium, presenting demographics of participants, biennium categories, expenditures and the

overall program expenditures by biennium period. This is a separate Memorandum of Understanding (Tobacco Cessation Program agreement) and BCBSND will continue to work with NDPERS to administer this program.

b. NDPERS Diabetes Program: BCBSND has supported the About the Patient diabetes management program since its inception. BCBSND provided the initial project management expertise in all phases of program implementation, including initial identification of disease-eligible members, promotional materials and mailing lists. BCBSND continues to support the program by providing continuing enrollment eligibility, calculating member cost share reimbursement, disbursing funds for member cost share reimbursement and disbursing funds for provider reimbursement. In addition, BCBSND provides claim data for program assessment. This is a separate Memorandum of Understanding (Pharmacy Disease Management Program agreement) and BCBSND will continue to work with NDPERS to administer this program.

c. Dedicated Wellness Program Staff: BCBSND will continue to provide a dedicated Wellness Consultant to NDPERS to support and provide direction to the NDPERS wellness coordinators, develop and implement communications strategies and evaluate programs.

   New in 2014 was the creation and launch of the Lieutenant Governor's Worksite Wellness Award that is awarded to qualifying NDPERS Worksite Wellness agencies and or political subs for meeting tiered pre-determined criteria for programs that follow established best practices.

   Promotional/Educational Campaigns: Group Communication Materials - monthly health promotion campaign that follows recognized monthly health observances based on evidence-based medical guidelines. The materials are delivered directly to an organization for distribution to employees on a monthly basis. Targeted Outreach Campaigns – are provided directly to members who are identified as an opportunity for such things as cancer screening compliance and Did You Know campaigns.

d. Prenatal program: Prenatal Plus is a voluntary educational support program for expectant mothers. Participants receive valuable information and support during their pregnancy supported by registered nurses. Participants screened as high-risk receive telephone calls on a monthly basis, whereas low-risk pregnancies receive outreach initially at 12-weeks gestation or at enrollment if a woman is beyond 12-weeks gestation, and again at 28-weeks gestation. There are multiple goals associated with the program, such as relaying as much education as possible to aid in a healthy pregnancy, encouraging collaboration with medical practitioners and early intervention for high-risk pregnancies. The expectant mother will receive a mailing, including a pregnancy calendar/journal, prenatal visit chart, pregnancy education, newborn care education, and a Taking Care of Your Child book.

   BCBSND collects claim-based results (i.e. live births, caesarean section vs. vaginal delivery rates).

   Under the current integrated plan we waive the copay for Prenatal Vitamins. This process would need to be modified should NDPERS elect not to go with an integrated Medical and Pharmacy Program.

   The cost of this program is included in the base administrative fee.

50. Describe your ability to support the employer based wellness program and the wellness benefit funding program (see http://www.nd.gov/ndpers/insurance-plans/docs/wellness-forum/employer-based-wellness-overview.pdf)

BCBSND has a history of supporting NDPERS staff and Wellness Coordinators with the Employer Based Wellness Program and the Wellness Funding Program. The NDPERS Wellness Consultant at BCBSND assists employees and employers with their wellness initiatives. This consultant conducts monthly coordinator calls and annual workshops across the state, prepares monthly newsletters, assists with online wellness tools, develops

various challenges for participants, coordinates monthly wellness stars and other group communication items. The dedicated NDPERS Wellness Consultant also represents BCBSND on the Wellness Committee that reviews submitted applications. Recent examples of customized activities include:

1. Created additional functionality in HealthyBlue specifically for NDPERS members. (i.e. the Community Event Participation tracker)
2. Added in 2014 an online tutorial for HealthyBlue and quarterly BrainShark presentations on latest trends in Wellness.
3. Offer a discounted registration fee for NDPERS Wellness Coordinators attending Gearing Up.
4. Lt. Governor's Award was created specifically for NDPERS Agencies and Political Subsdivisions. Award winners receive FREE registration to ND Worksite Wellness Summit. We received 31 applications and will be presenting 24 awards.
5. Annually coordinate the National Walk at Lunch Day at the capitol in the spring and a Retiree Health Fair in the fall.
6. Created specific programs for NDPERS Wellness Coordinators such as, "Sit for 60, Move for 3", "Vaccination Awareness" and "Take the Stairs."

BCBSND has two Member Education consultants strategically located across the state to conduct worksite presentations for employees on various wellness related topic, in support of the Employer Based Wellness Programs. The NDPERS Wellness Consultant coordinates the awarding of employee participant voucher points to the BCBSND HealthyBlue Online Wellness Tool.

Once the funding application is evaluated and approved by the Wellness Committee, NDPERS staff provide notification to BCBSND to make payment out of the NDPERS Cash Reserve account held at BCBSND.

This program has a separate Memorandum of Understanding (NDPERS Wellness Benefit Program Agreement) and BCBSND will continue to work with NDPERS to administer this program.

1.11 Network Accessibility and Disruption

51. We are requesting that vendors provide a GeoAccess network accessibility and disruption analysis outlining network access based on the access standards listed below separately by North Dakota County. If you are proposing a combination of owned and leased networks, please provide your results separately by network. This GeoAccess analysis must be provided for your proposed NDPERS network(s). A census file has been provided in Appendix E for your use.

Provider Type	Access
Primary Care Providers (family/general practice, pediatrics, internal medicine and OB/GYN)	2 providers within 30 miles
Specialists	2 providers within 30 miles
Hospitals	1 hospital within 50 miles

Please provide the GeoAccess summaries in the table below as well as back-up detail (back-up detail on CD submission only) for employees who fall both within and outside the following access standards. Your match should include all valid zip codes in each of the counties in North Dakota that your network serves and in which participants reside. In addition, you should include only open practices in your analysis.

The response provided to this question includes trade secret, proprietary, commercial, or financial information that is of a privileged nature and has not been previously publicly disclosed. This information is confidential and is prohibited from being opened to the public. Please refer to the "Summary of Proprietary, Confidential and/or Trade Secret Information" for a summary/checklist of all specific items identified as trade secret as required under the "Unique Content Requirements – Requirement #5".

Please see "Attachment 9 - GeoAccess" for the electronic version on the CD submission for the back-up detail to the GeoAccess summaries in the table below.

Counties	State	Member Count	Family Practice	Peds	Internal Medicine	OB/ GYNs	Specialists	Hospitals
			2 in 30 miles	2 in 30 miles	2 in 30 miles	2 in 30 miles	2 in 30 miles	1 in 50 miles
ADAMS	ND	72	100.0%	100.0%	100.0%	0.0%	100.0%	100.0%
BARNES	ND	505	99.6%	7.5%	99.2%	7.7%	99.6%	100.0%
BENSON	ND	107	100.0%	67.3%	45.8%	0.0%	72.9%	100.0%
BILLINGS	ND	28	3.6%	3.6%	3.6%	3.6%	3.6%	100.0%
BOTTINEAU	ND	272	93.8%	2.9%	4.0%	4.0%	9.6%	100.0%
BOWMAN	ND	89	100.0%	100.0%	100.0%	0.0%	2.2%	100.0%
BURKE	ND	53	94.3%	0.0%	0.0%	0.0%	7.5%	100.0%
BURLEIGH	ND	5,475	99.7%	99.6%	99.6%	99.5%	99.7%	100.0%
CASS	ND	3,937	100.0%	98.7%	99.6%	99.2%	100.0%	100.0%
CAVALIER	ND	177	99.4%	0.0%	4.0%	0.0%	98.9%	100.0%
DICKEY	ND	125	100.0%	0.0%	100.0%	0.0%	100.0%	100.0%
DIVIDE	ND	86	97.7%	1.2%	1.2%	1.2%	1.2%	100.0%
DUNN	ND	136	41.2%	27.9%	27.9%	27.9%	39.7%	100.0%
EDDY	ND	77	100.0%	5.2%	3.9%	0.0%	89.6%	100.0%
EMMONS	ND	87	100.0%	3.4%	4.6%	3.4%	97.7%	100.0%
FOSTER	ND	111	100.0%	0.0%	0.0%	0.0%	100.0%	100.0%
GOLDEN VALLEY	ND	26	84.6%	0.0%	0.0%	0.0%	0.0%	100.0%
GRAND FORKS	ND	3,664	100.0%	98.6%	98.7%	99.2%	99.6%	100.0%
GRANT	ND	59	93.2%	47.5%	61.0%	0.0%	0.0%	100.0%
GRIGGS	ND	80	100.0%	0.0%	1.3%	0.0%	1.3%	100.0%
HETTINGER	ND	49	100.0%	100.0%	100.0%	36.7%	42.9%	100.0%
KIDDER	ND	68	58.8%	0.0%	7.4%	0.0%	0.0%	97.1%
LAMOURE	ND	129	90.7%	14.7%	90.7%	14.7%	82.9%	100.0%
LOGAN	ND	65	100.0%	0.0%	92.3%	0.0%	6.2%	100.0%
MCHENRY	ND	131	86.3%	45.0%	42.0%	42.0%	80.2%	100.0%
MCINTOSH	ND	83	100.0%	0.0%	100.0%	0.0%	69.9%	100.0%
MCKENZIE	ND	66	92.4%	19.7%	21.2%	21.2%	21.2%	100.0%
MCLEAN	ND	254	99.6%	7.1%	6.7%	6.7%	12.6%	100.0%
MERCER	ND	125	100.0%	0.0%	0.0%	0.0%	100.0%	100.0%
MORTON	ND	1,401	98.6%	89.7%	92.4%	87.3%	93.2%	100.0%

Counties	State	Member Count	Family Practice	Peds	Internal Medicine	OB/ GYNs	Specialists	Hospitals
			2 in 30 miles	2 in 30 miles	2 in 30 miles	2 in 30 miles	2 in 30 miles	1 in 50 miles
MOUNTRAIL	ND	169	99.4%	0.0%	0.0%	0.0%	0.0%	100.0%
NELSON	ND	135	100.0%	35.6%	35.6%	0.0%	43.7%	100.0%
OLIVER	ND	46	100.0%	32.6%	32.6%	21.7%	67.4%	100.0%
PEMBINA	ND	238	100.0%	0.0%	100.0%	0.0%	100.0%	100.0%
PIERCE	ND	88	100.0%	9.1%	0.0%	0.0%	100.0%	100.0%
RAMSEY	ND	775	99.7%	99.0%	99.0%	0.0%	99.6%	100.0%
RANSOM	ND	287	100.0%	0.0%	95.5%	0.0%	100.0%	100.0%
RENVILLE	ND	38	44.7%	28.9%	28.9%	28.9%	57.9%	100.0%
RICHLAND	ND	499	100.0%	70.1%	100.0%	96.0%	100.0%	100.0%
ROLETTE	ND	345	100.0%	0.0%	0.0%	0.0%	13.3%	100.0%
SARGENT	ND	73	100.0%	0.0%	100.0%	0.0%	100.0%	100.0%
SHERIDAN	ND	40	100.0%	12.5%	0.0%	0.0%	0.0%	100.0%
SIOUX	ND	17	70.6%	41.2%	52.9%	35.3%	58.8%	100.0%
SLOPE	ND	5	100.0%	100.0%	100.0%	0.0%	0.0%	100.0%
STARK	ND	1,029	100.0%	99.6%	99.6%	99.1%	99.1%	100.0%
STEELE	ND	44	100.0%	0.0%	18.2%	70.5%	88.6%	100.0%
STUTSMAN	ND	1,215	99.8%	97.7%	98.9%	98.0%	98.5%	100.0%
TOWNER	ND	57	96.5%	0.0%	0.0%	0.0%	0.0%	100.0%
TRAILL	ND	406	100.0%	9.6%	9.6%	100.0%	100.0%	100.0%
WALSH	ND	665	100.0%	2.1%	95.9%	2.1%	100.0%	100.0%
WARD	ND	1,463	99.5%	96.2%	96.3%	96.4%	97.6%	100.0%
WELLS	ND	64	100.0%	85.9%	0.0%	0.0%	28.1%	100.0%
WILLIAMS	ND	893	100.0%	94.8%	95.0%	94.8%	95.0%	100.0%
Total		26,128	98.9%	78.5%	87.0%	76.0%	91.4%	100.0%

52. Provide a listing or provider directory and link to the web for the provider networks you are proposing for NDPERS.

BCBSND has strong provider relationships through a variety of payer strategies. Our contracted network for NDPERS PPO currently includes 99.6 percent of all providers in North Dakota. BCBSND's business relationship is fostered by industry leading payment schedules and consistent claims payment accuracy and timeliness. The Provider Relations staff maintains strong relationships with providers by adhering to high standards for provider service, collaboration and responsiveness. The complete list of NDPERS PPO participating providers can be found under "Attachment 10 – NDPERS PPO Providers".

The link to the website for the provider networks is:
https://www.BCBSND.com/cgi-bin/ntwksearch.cgi — Under Health Plan select NDPERS PPO

53. Identify and describe your national preferred provider organization.

BCBSND contracts directly with providers within the state of North Dakota and one contiguous county into Minnesota, South Dakota and Montana.

Additional providers are available through a BlueCard Network arrangement with Blue Cross Blue Shield plans in other states. If a member travels out-of-state and has to receive medical treatment, the out-of-state provider can submit the claim to the Blue Cross Blue Shield plan in that state, which is known as the host plan. Through the Interplan Teleprocessing System, Blue plans from across the country can communicate to get the claim paid just like a regular in-state claim. As long as the provider is a Blue participating provider, members receive the normal provider discounts negotiated by the host plan. Those BlueCard discounts saved BCBSND members over $228 million in 2013, In 2013, BCBSND processed more than 1.8 million BlueCard claims.

BlueCard also benefits members who travel out of the country and need to have services, through BlueCard Worldwide. The Blue Cross and Blue Shield Association contracts with a medical assistance vendor to negotiate rates with out-of-country providers.

54. Confirm your willingness to negotiate and maintain NDPERS-specific provider contracts to allow for cost control mechanisms and alignment of contract and plan years. Describe your process and approach for accomplishing this.

BCBSND has had relationships with North Dakota providers throughout its history. BCBSND contracted networks for NDPERS PPO currently includes 99.6 percent of all providers in North Dakota. These business relationships with providers are fostered by competitive payment schedules and consistent claims payment accuracy and timeliness. BCBSND maintains relationships with providers by adhering to high standards for provider service, collaboration and responsiveness.

Provider relationships have evolved to the point where BCBSND has contracts with providers that renew automatically. These contracts deliver what are believed to be the best provider discounts available in North Dakota as evidenced by BCBSND's strong market share in the state. These provider relationships also give NDPERS its own exclusive 5 percent discount in addition to standard BCBSND provider reimbursement.

55. Do you anticipate any significant provider contract changes for 2015? Describe.

BCBSND is leading a collaborative effort that will focus on strategies to influence cost, promote efficiency, improve quality of care and maintain member access to health care services. BCBSND launched Blue Value Partnership (BVP), a program designed to encompass our strategic objectives moving forward. Phase I of BVP starts in 2014 and includes advanced imaging performance measures to ensure appropriate utilization of high tech diagnostic imaging services (MRI, CT, PET scans, etc).

BCBSND wants to empower our providers and members to make changes that support lower cost and appropriately delivered care. BCBSND has identified several opportunities for future initiatives that would fit well into the BVP program. Future BVP phases and performances measures will be developed with the assistance of a clinician-lead quality committee.

1.11.1 Cost, Quality and Pay for Performance

56. Describe the programs and methodologies currently in place to gather and measure meaningful provider quality and efficiency data that can be shared with members.

The Blue Cross and Blue Shield system believes that engaging and empowering consumers to make more knowledgeable health care decisions is a fundamental priority. BCBSND is joining all Blue Plans across the country in participating in a collection of programs sponsored by the Blue Cross and Blue Shield Association, collectively known as the Consumer Transparency Initiatives. Each initiative is designed to give consumers a transparent view of the health care systems in their community. This will enable consumers to choose a facility and/or provider that best meets their needs.

Physician Quality Measurement (PQM) – This program displays physician performance measures to assist members in selecting a provider. The program is based on select HEDIS® physician performance measures selected by the Blue Cross and Blue Shield companies' clinical measurement experts. BCBSND has chosen to use measurement criteria available through the MediQHome Quality Program.

Please refer to Attachment 11 – Physician Quality Measurement for more details on this program.

Blue Physician Recognition (BPR) – complementary to PQM initiative – The BPR program is designed to reinforce Blue plans' commitment to quality by providing more meaningful and consistent information on physician quality improvement and recognition. Blue plans will identify groups and practices that have "demonstrated their commitment to delivering high quality and patient-centered care." In North Dakota, all participating MediQHome Quality Program participating providers will receive the BPR designation.

Please refer to Attachment 12 – Blue Physician Recognition for more details on this program.

Patient Review of Physicians (PRP) – PRP is an online tool for reading and writing reviews of physicians and professional providers nationwide. BCBSND members will need to log into our member portal to leave a review.

Please refer to Attachment 13 – Patient Review of Physicians for more details on this program.

National Consumer Cost Tool (NCCT) – The purpose of NCCT is to enable members to obtain information on estimated costs for common health care services. The categories or conditions will be based on the member's specific benefit plan, including total cost for service and out-of-pocket balance.

We all recognize the value of this transparency and our intention is to provide quality information to our members. BCBSND looks forward to progress on providing increased transparency and sharing useful quality data with our members.

57. Describe in detail the performance standards you currently have in place with your contracted physicians, provider groups, hospitals, and other providers. Outline the types of measures utilized, how you monitor and track these measures, how providers are held accountable, and how frequently the data is compiled and shared with the physicians and provider groups.

With more than 350 value-based programs in market or in development, Blue Plans are the undisputed market leaders in developing and executing groundbreaking forms of value-based care delivery that reward providers for improved outcomes. By encouraging more than 215,000 providers to shift from fee-for-service to incentive programs that drive improvements in both quality and costs, the Blues are improving the value of healthcare.

With the 2015 launch of Blue Distinction Total Care, these innovative programs developed by Blue Plans across the country will be integrated into a single nationwide solution for employers which BCBSND will be a part of.

Blue Distinction Total Care will provide national access to Blue value-based programs that are designed to demonstrate results in improving patients' health while managing costs. To earn the designation, each program must meet nationally consistent criteria for value-based reimbursement, accountability across the care continuum, patient-centered quality care and provider empowerment. Designated programs encourage a more collaborative, coordinated approach across the care spectrum – helping to ensure that employees and their families are receiving the right care at the right time.

BCBSND's local patient centered medical home program, MediQHome, was evaluated and received the BDTC designation ensuring our network of medical home providers meet nationally recognized standards for quality.

BCBSND has been a leader in encouraging the patient-centered care model through the MediQHome program over the last five years. The positive results have been remarkable. For example, MediQHome contributed to a reduction in admissions from 2009 to 2010 of approximately 200 inpatient admissions. This accounts for about seven million dollars in savings.

MediQHome is a program aimed at improving the quality of care for patients with chronic conditions (such as asthma, ADHD, coronary artery disease, congestive heart failure, diabetes, and hypertension), as well as to increase compliance in preventive screenings (breast, cervical and colorectal cancer screenings and immunizations). Please refer to Attachment 14 – MediQHome Clinical Suites for more details on the MediQHome clinical suites.

Quality is measured through disease-specific metrics derived from evidence-based care guidelines. Reporting is provided to each provider group, with drill-down capabilities to individual providers, that details their quality performance, gaps in care by condition, and trending of performance over time. In addition, provider groups' quality scores are compiled in aggregate, ranked based on score, and then placed into tiers depending on their rank. Reporting is produced quarterly for metric trending and quality tiers.

Over 75% of North Dakota primary care physicians participate in MediQHome and are eligible to receive incentive payments twice per year. The incentive payments help compensate providers for the time and money spent on care management outside the traditional face-to-face visit. Providers who achieve improved clinical outcomes for their total patient population have the opportunity to earn additional revenue.

58. Describe your participation in pay-for-performance initiatives. To what extent do these activities impact the health care costs of NDPERS or claims incurred by its covered population?

BCBSND is developing a sustainable health care system which includes a pay-for-performance model. The intent of this initiative is to reduce the overall health care cost trend each year. The future system will include operational and payment strategies to influence overall cost, support reasonable provider profit, improve quality and maintain member access. Payment mechanisms will reward providers for quality and efficiency.

The MediQHome program will be expanded to all eligible providers and patients (including NDPERS members) in North Dakota and will provide the mechanism for physicians and care management teams to manage all aspects of a patient's health.

The current care management fee in MediQHome will evolve into other forms of payment including risk-adjusted care management fees, bundled payments and global payments. Providers will increasingly move from the current fee-for-service payment system to at-risk bundled and global payments such as capitation. Base payment levels for provider systems will be adjusted based on patient health risk levels and providers' clinical performance in relation to predetermined performance standards.

1.11.2 Credentialing and Contracting

59. Briefly describe the initial credentialing process. How often are physician, hospital and other contracts (labs, imaging facilities, DME, home health care) reviewed?

BCBSND reviews the credentials of all health care providers requesting participation according to BCBSND's internal credentialing policy. Providers are re-credentialed every three years. The credentialing/re-credentialing policy ensures the systematic review of health care providers requesting participation with BCBSND. The policy includes requirements

and procedures for verifying a practitioner or provider by reviewing their qualifications to practice. The policy also includes procedures for verifying that practitioners have met eligibility standards and requirements such as education, licensure, professional standing, services, accessibility, utilization and quality.

The policy serves as guidelines for all BCBSND credentialing/re-credentialing decisions. The guidelines eliminate unfair business practices, such as prejudice in favor of or against individual circumstances or actions and promote consistency of interpretation and application of policy requirements. Issues of race, color, creed, religion, sex, national origin, marital status, disability, age, or sexual orientation are not considered during the credentialing/re-credentialing process. The policy is reviewed and submitted annually to the Quality Committee of the Board.

Provider contracts are updated as needed to meet regulatory requirements. Reimbursement notices are issued annually.

1.11.3 Reimbursement and Discounts

62. Provide your estimate of discounts from paid charges in North Dakota.

Based on paid charges, BCBSND is currently calculating a 40% discount on NDPERS in state claims. This would include institutional, professional and prescription drugs claims.

63. Provide your estimate of percent of charges that will be processed in North Dakota under your fees schedule

    Currently 83% of NDPERS charges are being processed in North Dakota under BCBSND's fee schedule. The remaining 17% is being processed under our national BlueCard or pharmacy programs. This compares to 72% and 28% in state and out of state, respectively, for our Book of Business.

64. Provide details on how prescription rebates are reimbursed to the plan.

    The response provided to this question includes trade secret, proprietary, commercial, or financial information that is of a privileged nature and has not been previously publicly disclosed. This information is confidential and is prohibited from being opened to the public. Please refer to the "Summary of Proprietary, Confidential and/or Trade Secret Information" for a summary/checklist of all specific items identified as trade secret as required under the "Unique Content Requirements – Requirement #5".

    Under our current integrated program, Prime negotiates rebates on behalf of BCBSND. Prime invoices manufacturers for rebates at the end of each quarter. Manufacturer payment timelines vary by contract, but they range from 30 to 105 days from the date of invoice. A single and final account reconciliation is made within twelve months following the end of the respective quarter. BCBSND remits to NDPERS rebates received from Prime less amounts credited to Member Rebate Accounts.

    The portion of rebates credited to a member's Member Rebate Account is a representative percentage of the cost share paid by the member on rebate eligible prescription medications. Money accumulated in a Member Rebate Account automatically reduces a member's out-of-pocket expense the next time a covered prescription drug is purchased.

1.12 Performance Standards and Guarantees

As described in Section I. Overview, of this RFP, health plan vendors are required to comply with performance standards and guarantees that include a financial incentive/forfeiture which is negotiated as part of the renewal process. See Appendix H for a copy of these performance standards and guarantees. You are required to offer your performance standards and guarantees for the board's consideration using Appendix H. It is a priority for the board to have a comprehensive set of standards and guarantees relating to this plan.

65. Please confirm you have completed Appendix H and confirm your willingness to comply with the performance standards and guarantees or provide suitable alternatives. Identify your process for measurement and audit availability. Identify any additional standards and metrics your organization would be willing to include.

    BCBSND confirms we have completed and are willing to comply with the performance guarantees as outlined in Appendix H. BCBSND will provide reporting and will work with NDPERS to schedule any required audits on measures that are not included in standard reporting.

1.13 HDHP/HSA

66. Describe how your organization will do the administration of the HSA option. What details are provided to individuals that select this option, the name of the service vendor and any other applicable information.

    As the incumbent carrier, BCBSND will continue work with Discovery Benefits to administer the HDHP/HSA option for NDPERS members.

    Standard enrollment materials include an HSA Employee Guide that explains the plan in simple to understand language. The Guide includes a list of eligible items, information about how to contact Discovery Benefits, how to request a distribution of funds and contribution

limits per IRA guidelines. Additional materials are also available on Discovery Benefits' website. Employers may download materials to post on their intranet site.

Participant demographic and contribution information is provided to Discovery Benefits electronically by NDPERS staff. Files are uploaded through the employer portal file import feature. Participant elections and changes uploaded electronically can be viewed by the participant online via the employee web portal once the update has occurred.

In addition to requesting withdrawals online, each HSA account holder receives two debit cards for making eligible medical expense purchases directly from the HSA. The debit card is multi-purpose, meaning the card can also be used for a limited flexible spending account (FSA), limited HRA and dependent care FSA if the participant is also enrolled in one of those accounts with Discovery Benefits. Expenses would then be automatically paid from the appropriate account with only one submission.

A separate invoice is created for HSA account fees and submitted to NDPERS for payment on a monthly basis.

1.14 Economy to be affected

67. Please indicate if you will have an office in North Dakota and where most of the work on this contract will be done?

    BCBSND is headquartered in Fargo, ND. Most of the work for this contract will be done in our home office. In addition, we have 8 regional sales and service offices throughout the state that are available to NDPERS members as needed.

68. Please identify the number of employees you will employ in North Dakota pursuant to this contract.

    BCBSND employs over 800 employees in the state of North Dakota to service our 500,000 members. NDPERS represents over 62,000 of our members or about 12% of our book of business.

69. Of your total administrative fee please estimate the amount that will be spent in North Dakota and the amount that will spent outside the state.

    Nearly all aspects of the administration of the NDPERS account are done within the state of North Dakota. All business functions and system support are handled by our local team. We do partner with a limited number of vendors to ensure NDPERS has a complete solution for your health benefit plan. We work with Cerner, MDdatacor, and Accordant to power certain aspects of our population health management tools. From a cost perspective, these partners make up less than 3% of the total spend. This would equate to approximately 97% of administration of the medical plan done within the state of North Dakota.

1.15 Fiduciary Responsibility

70. Confirm your organization will assume full fiduciary responsibility for claim determination.

    Confirmed

    BCBSND will serve as the claim fiduciary for this Self Funded Agreement.

1.16 Appeals Process

71. Please describe your internal and external appeals process.

    As the incumbent, BCBSND has established processes for Member Pre-Service and Post-Service Inquiry and appeals. Please see the attachments below for copies of the member Pre-Service and Post-Service Inquiry and appeal processes.

    Attachment 20 – Member PreService Inquiry & Appeal Policy

    Attachment 21 – Member PostService Review Inquiry and Appeal Policy

Appendix E:
Program Information/Data

Appendix E:

Member Statistics

Blue Cross Blue Shield of North Dakota acknowledges receipt of the Member Statistics.

Appendix G:
Existing Contract Benefits

Appendix G:

Existing contract benefits (plan design, wellness, services, standards, etc.) this section identifies the existing NDPERS plans contract benefits. Please indicate if you can match these benefits/services and if so with what resources and if not what specifically you would not be able to provide.

Current Contract Benefits	Reference Resources	Discuss and Identify Comparable Service Offering.
NDPERS Specific Plan Designs		

• Actives and Pre Medicare Retirees Medical plans
  • PPO/Basic Plan – Grandfathered
  • PPO/Basic Plan – Non Grandfathered
• Active and Pre Medicare Retirees Rx plan
	http://www.nd.gov/ndpers/insurance-plans/group-health-ppo-basic-grandfathered.html
	
	http://www.nd.gov/ndpers/insurance-plans/group-health-ppo-basic-non-grandfathered.html
		As the incumbent, BCBSND will continue to administer these Benefit Designs.

• Wellness Program
  • Dedicated Wellness Website and program similar to existing program with incentives, health club membership and employer efforts
  • Employer Based Wellness Program
	http://www.nd.gov/ndpers/insurance-plans/employer-based-wellness.html
	
	Exhibit 1
	Exhibit 2
		As the incumbent, BCBSND will continue to administer these wellness programs.

HDHP/HSA Option for State agencies	http://www.nd.gov/ndpers/insurance-plans/group-health-hdhp.html	As the incumbent, BCBSND will continue to administer the HDHP as well as work with DBI (Discovery Benefits Incorporated) to administer the HSA. Monthly HSA administration fees are approved by NDPERS staff and paid out of the NDPERS Cash Reserve Account.
• Medicare Retiree Plan • Plan F look alike	http://www.nd.gov/ndpers/insurance-plans/medicare-rx.html	As the incumbent, BCBSND will continue to administer this plan.
Separate Medicare Part D RX plan	http://www.nd.gov/ndpers/forms-and-publications/publications/grp-hlth-spd-retirees.pdf http://www.nd.gov/ndpers/forms-and-publications/publications/medicare-benefits-summary-current.pdf	As the incumbent, BCBSND will continue to administer the PDP (Prescription Drug Plan) with NPA (Northern Plains Alliance).

Current Contract Benefits	Reference Resources	Discuss and Identify Comparable Service Offering.
General Services		
Actuarial Services • Mandate cost estimates & reporting during Legislative session within 24 to 48 hours. • Trending • Financial reporting • Plan Design Options	Mandate Estimates – Exhibit 3 See Quarterly Report and Annual Report – (Exhibit 4 & 5) (Exhibit 6) See Exhibit 9	As the incumbent, BCBSND will continue to provide these services.
Underwriting Services • Dedicated NDPERS underwriter • Enrollment processes – verify enrollments entered by NDPERS staff and sent through 834 file. Rush enrollments with immediate PTI updates, generate ID cards, mail benefit books, notify NDPERS when 834 file is bad, 834 file is mapped to correct group, roll, class of coverage using their rate structure code and coverage codes (other 834 files are required to send carrier our basic codes and class codes) and staff available always to answer questions by NDPERS office. • Eligibility (removal of dependents (EOM age 26), grandchildren when parent marries, divorce (removal for spouse and step children with or without rescission letters) • ID cards • Benefit books • Summary of Benefits & Coverage • 834 Enrollment Discrepancy Reports		As the incumbent, BCBSND will continue to offer and administer these services.

Current Contract Benefits	Reference Resources	Discuss and Identify Comparable Service Offering.
General Services		
Communications Services • NDPERS newsletter items • Healthy focused Newsletter generated by Carrier • Letters, posters, brochures and grids • Directories	http://www.nd.gov/ndpers/forms-and-publications/index.html	As the incumbent, BCBSND will continue to provide these services.
Claims Administration & Member Services • Dedicated NDPERS Pod for claims and customer calls • Subrogation, Medicare secondary payer, coordination of benefits processes • Member advocacy program • Annual satisfaction survey • Annual NDPERS claims audit • Facilitate PBM Audit • MSP Data Match Compliance • Prenatal Program enrollment/claims processing for NDPERS specific benefit • Enrollment for Tobacco Cessation Program • Subscriber Appeals • Telephone support for dedicated wellness website – dedicated NDPERS service unit handles calls from members	https://www.bcbsnd.com/health-and-wellness-programs/member-advocate (Exhibit 7) (Exhibit 8) http://www.nd.gov/ndpers/forms-and-publications/publications/grp-hlth-spd-actives.pdf#page=35 https://www.bcbsnd.com/search-preview/-/ndpers-tobacco-cessation	As the incumbent, for the integrated program BCBSND will continue to offer and administer these services. For PBM Audit program specifications please refer to Appendix B; Minimum Requirements under the Audit Section. Should NDPERS select a non integrated approach, process and procedures will be modified to accommodate.

Current Contract Benefits	Reference Resources	Discuss and Identify Comparable Service Offering.
General Services		
<u>Finance</u> NDPERS recognizes that different funding arrangements will be necessary to implement a self-insured program. • Process payments for NDPERS value added programs • Tobacco Cessation Program • RX Disease Management Program • Employer Based Wellness Program • Billing (create monthly premium billings and group accounts receivables that report and track the total amount of premium due for all NDPERS members covered through carrier. These accounts are reconciled monthly with the payments and enrollment files submitted by NDPERS to ensure enrollment and billing accuracy) • 820 Premium Payment Discrepancy Reports		As the incumbent, BCBSND will continue to provide these services. The Tobacco Cessation , RX Disease Management and Employer Based Wellness programs have separate Memorandums of Understanding. BCBSND will continue providing administrative support for these programs under the current terms. Payments for the Tobacco Cessation program come from the grant with the Department of Health, while payments for the RX Disease Management and Employer Based Wellness Programs come from the NDPERS Cash Reserve Account. BCBSND can offer NDPERS two options for settlement arrangements. These options are dependent on NDPERS handling of specific billing for each group. a. If NDPERS prefers BCBSND bill the member groups, BCBSND would require an 820 file each month to cover the month's premium notices. This would update the billing so there would not be a balance forward in the next month's bill. BCBSND would wire the funds back to the group after the 820 has been processed. b. If NDPERS prefers to bill the member groups directly, BCBSND would not require an 820 for premium. Claims would draw against NDPERS claims account and administrative fees and stop-loss premium would draw against NDPERS cash account.

Current Contract Benefits	Reference Resources	Discuss and Identify Comparable Service Offering.
General Services		
Information Technologies • NDPERS specific 820 payment file • NDPERS specific 834 enrollment file • NDPERS specific benefit matrix and claims processing logic • System for processing claims for Tobacco Cessation Program • Secure file transfer system • Monthly Process Improvement team meetings		As the incumbent, BCBSND can continue to provide these services.
Legislative and Legal Services • Monitor State and Federal legislation for changes affecting NDPERS. • Mandate cost estimates during Legislative session Contract reviews • Develop Memorandum of Understandings for value added programs. • Compliance • Pharmacy class action settlements • Internal audit functions • System for monitoring provider trends	Exhibit 3 Exhibit 10	As the incumbent, BCBSND will continue to provide these services.
ACA Reporting & Compliance • Reporting of Minimum Essential Coverage (6055) • ACA required notices upon loss of coverage for exchanges • Monitor employer lapse in coverage for change to NGF and loss of participation if small group		Reporting requirements change under a self funded arrangement. BCBSND will continue with NDPERS to work through the ACA reporting responsibility requirements.

Current Contract Benefits	Reference Resources	Discuss and Identify Comparable Service Offering.
General Services		
Marketing and Adm Staff • Dedicated NDPERS Account Executive • Dedicated NDPERS Account Manager • Dedicated NDPERS Wellness Consultant • Dedicated NDPERS Group Consultant • Pharmacy Consulting		As the incumbent, BCBSND will continue to provide these services.
• Provide a stable Grandfathered benefit design by monitoring activities and regulations to limit risks • Benefit overviews for agencies and political subdivisions • Complete an annual minimum participation and contribution survey • Monitor performance guarantees • Monitor and address Legislative items • Member education programs for agencies and political subdivisions • Conduct routine meetings with NDPERS staff to ensure adequate communication on items such as wellness, process improvement, benefit designs changes, and new programs.	In 2013, there were 37 employers who held benefit overview presentations. https://www.bcbsnd.com/web/employers/wellness-programs/member-education In 2013, 87 employer groups held member education presentations (3,423 members).	
Reporting • Quarterly Executive Summary and Annual Assessment • Monthly data files through secure file transfer system • Adhoc reporting including cost, utilization and risk analysis • Provide flexible spending account files to NDPERS ADP	See Quarterly Report and Annual Report – Exhibit 4 & 5	As the incumbent, BCBSND will continue to provide these services.

Current Contract Benefits	Reference Resources	Discuss and Identify Comparable Service Offering.
Wellness Programs		
Dedicated Wellness Website • Dedicated Wellness Program • Dedicated NDPERS portal • NDPERS specific voucher points • Developed wellness website challenges • Health Club Credit program • Support Wellness Star of the Month award designation. • Promote community based wellness activities and award points for participation. • Develop and promote targeted messaging on Blood Pressure. • Monthly WebEx's provided by member education on dedicated wellness website and health club credit. Employer Based Wellness Program • Dedicated wellness specialist to assist coordinators with wellness activities, planning and implementing ideas. • Planned and coordinated summer Wellness Coordinator workshops. • Support the Lt Governor's Award for Worksite Wellness with HealthyND. • Monthly Newsletter for Wellness Coordinators • Monthly conference call with Wellness Coordinators • Provide monthly wellness articles for distribution to coordinators/employees. • Provide monthly posters for distribution to wellness worksites Employer Based Wellness Funding Program • Wellness consultant on evaluation team • Review and score applications • Administer payment of invoices from NDPERS	Exhibit 1 Exhibit 11 Exhibit 12 Exhibit 2 Exhibit 13 http://www.nd.gov/ndpers/insurance-plans/employer-based-wellness.html Exhibit 14 Exhibit 15 http://www.nd.gov/ndpers/insurance-plans/employer-based-wellness.html Exhibit 16 http://www.nd.gov/ndpers/forms-and-publications/publications/additional-bcbs-wellness-programs.pdf	As the incumbent, BCBSND will continue to provide these services. BCBSND will continue to work with NDPERS on the Employer Based Wellness program and disperse any payments for invoices from the NDPERS Cash Reserve Account.

Current Contract Benefits	Reference Resources	Discuss and Identify Comparable Service Offering.
Wellness Programs		
Wellness Education On site wellness presentations at employer worksites • Benefit presentations at employer worksites • Support Vaccination Awareness program with Department of Health • Create flyers for NDPERS web targeting specific disease/medical conditions • Organize the NDPERS Retiree Health Fairs • Coordinate National Walk @ Lunch Day • Participate in COSE wellness fair at capitol each September		
Rx Services		

Pharmacy Benefit Manager Programs
• Integrated medical and pharmacy services
• Clinical programs
• Generic incentive programs
• Specialty pharmacy program
• RX mail order services
• Formulary program
• Drug utilization reviews
  • Retrospective DUR
  • Concurrent DUR
  • Prospective DUR
  • Guided Health Medication Therapy Management Program
  • Member rebate accounts
	http://www.myprime.com	As the incumbent, BCBSND will continue to work with our RX vendor to provide these services under the current integrated medical and pharmacy program.

Current Contract Benefits	Reference Resources	Discuss and Identify Comparable Service Offering.
Rx Services		
• Rebates passed to NDPERS Carrier has set up a Member Rebate Account (MRA) in the member's name. Accounts are set up at the member level. For every eligible brand prescription medication a member purchases at the point-of-sale (electronic claim), they will receive an appropriate portion of the manufacturer rebate associated with that particular medication into their MRA. Please note this program does Not apply to COB or paper claims. • Establish a nationwide Select Pharmacy Network • Claims processing for Part D program		
Medical Management and Provider Services		
<u>Medical Management</u> • Patient medical home • Rare and complex disease management • Disease management program for out of state members • Member advocacy programs • Preauthorization's • Concurrent review/discharge planning • Prior approvals • Benefit inquiries • Therapy review process • Chiropractic review • Large case management • Prenatal Program with NDPERS specific benefits • Prenatal text messaging program • Provider news letters	https://www.bcbsnd.com/health-and-wellness-programs/mediqhome https://www.bcbsnd.com/health-and-wellness-programs/disease-management https://www.bcbsnd.com/health-and-wellness-programs/member-advocate http://www.nd.gov/ndpers/forms-and-publications/publications/grp-hlth-spd-actives.pdf#page=35 https://www.bcbsnd.com/health-and-wellness-programs/text4baby	As the incumbent, BCBSND will continue to provide these services.

Current Contract Benefits	Reference Resources	Discuss and Identify Comparable Service Offering.
Medical Management and Provider Services		
Provider Relations • Carrier owned provider network • Total cost of care contracts • National network (total out of state discounts • Provider credentialing and contracting • Physician Quality Measurement Program • Physician Recognition Program • Patient Review of Physicians Program	http://provider.bcbsnd.com 97.7% of providers in Network 35% discount off in state changes. An NDPERS specific PPO network in addition to vendors network	As the incumbent, BCBSND will continue to provide these services.
Medicare Part D		
• Special contract for administration of Part D product • NDPERS specific benefit plan design • NDPERS specific Part D online enrollments – NDPERS does handle enrollment, however carrier receives reports each week with any enrollment discrepancies and then works with the PDP vendor and NDPERS to rectify those. NDPERS and carrier both share in working with specific Part D enrollments. • NDPERS specific Part D billing – carrier handles the billing that come directly from Medicare Rx each month in a paper format. Carrier pays directly to Medicare Rx the premium amount requested on the bill. A dedicated Membership person that manually goes over the bill for discrepancies each month and will find any issues we may have with the bill. • Research member enrollment/disenrollment exception report • Monthly meetings with Part D vendors • Notification and tracking of late enrollment penalty (LEP)	http://www.nd.gov/ndpers/insurance-plans/medicare-rx.html http://www.nd.gov/ndpers/insurance-plans/medicare-rx.html	As the incumbent, BCBSND and NPA (Northern Plains Alliance) will continue to provide these services.

Current Contract Benefits	Reference Resources	Discuss and Identify Comparable Service Offering.
Medicare Part D		

• Notifications and tracking of Income-related monthly adjustment amount (IRMAA)
• Annual Adjustment to Part D rates based on the Federal subsidy and the Low Income Subsidy (LIS)
• Part D Reporting
  • Request for Information reports
  • NDPERS PDP Member Change reports
  • NDPERS PDP Response Error report
  • HICN reports
  • Gap/Cat
  • Process other internal and ad hoc reporting		

Health Savings Account		
Health Savings Account • Administration of HSA's • Administer payment of monthly invoice from NDPERS Cash Reserve Account	http://www.nd.gov/ndpers/insurance-plans/group-health-hdhp.html	As the incumbent, BCBSND and DBI (Discovery Benefits Incorporated) will continue to provide these services. BCBSND and DBI will continue to work with NDPERS on invoice payments through the NDPERS Cash Reserve Account.
Additional Administrative Programs		

• Tobacco Cessation Program
  • Grant application and contract
  • Enrollment
  • Claims processing
  • Reporting requirements
  • Invoices for grant reimbursement
• RX Disease Management Program (About the Patient)
  • Eligibility reporting
  • Cost share incentive reporting
  • Administer payment of invoices from NDPERS Cash Reserve Account
	https://www.bcbsnd.com/search-preview/-/ndpers-tobacco-cessation
	
	http://www.aboutthepatient.net/NDPERS-Program.html
		As the incumbent, BCBSND will continue to work with the Department of Health and NDPERS to provide these services. BCBSND will continue submission of invoices from grant reimbursement.

Current Contract Benefits	Reference Resources	Discuss and Identify Comparable Service Offering.
Miscellaneous		
• Provide access to all subject matter experts and other appropriate personnel and make them available for attending board meetings, legislative, hearings, etc. as needed • Provide access to video or teleconference for Board meetings		As the incumbent, BCBSND will continue to provide these services.

Appendix H:
Performance Standards and Guarantees

Appendix I:
Disruption Analysis

Appendix K:
Suggested Changes to Plan Design, Programs and Services

Appendix K:

Suggested Changes to Plan Design, Programs and Services

Vendors should match the current programs and services as closely as possible when providing proposals. This appendix is meant for vendors to offer suggested changes to plan design and identify the cost or cost savings associated with each suggestion. In addition, vendors can suggest or offer changes to the services along with identification of the benefits/cost or savings. This section is not meant to list deviations to required agreements or service offerings. It should be noted that this section will be reviewed only after the vendor is successful based upon the other provisions of this RFP.

The response provided to this question includes trade secret, proprietary, commercial, or financial information that is of a privileged nature and has not been previously publicly disclosed. This information is confidential and is prohibited from being opened to the public. Please refer to the "Summary of Proprietary, Confidential and/or Trade Secret Information" for a summary/checklist of all specific items identified as trade secret as required under the "Unique Content Requirements – Requirement #5".

BCBSND is submitting mulitple plan options for NDPERS consideration. In addition BCBSND is proposing alternate pharmacy proposals that incorporate numerous changes to the current pharmacy programs.

Benefit and Cost Sharing Changes – Under a Self-Funded program, benefit changes would impact suggested funding levels as opposed to premium.

Modification	Suggested Funding Change
Annual premium change to increase Deductible (GF & NGF PPO): from $400 single/$1200 family to $450 single/$1350 family from $400 single/$1200 family to $500 single/$1500 family	-0.6% -1.1%
Annual premium change to increase Coinsurance Maximum (GF PPO only): from $750/1500 to $900/1800 IN and $1250/2500 to $1500/3000 OON from $750/1500 to $1050/2100 IN and $1250/2500 to $1750/3500 OON	-0.5% -1.0%
Annual premium change to increase Out-of-Pocket Maximum (NGF PPO only): from $2150/4700 to $2300/5000 IN and $2650/5700 to $2900/6200 OON from $2150/4700 to $2450/5300 IN and $2650/5700 to $3150/6700 OON	-0.5% -1.0%
Annual premium change to increase Office Visit copay (GF & NGF PPO): increase by $5.00 increase by $10.00	-0.4% -0.8%
Annual premium change to increase Emergency Room copay (GF & NGF PPO): increase by $10.00 increase by $25.00	-0.03% -0.09%
Annual premium change to increase RX Formulary Generic copay (GF & NGF PPO): from $5 copay to $7.50 copay from $5 copay to $10 copay	-0.4% -0.7%
Annual premium change to increase RX Formulary Brand copay (GF & NGF PPO): from $20 copay to $22.50 copay from $20 copay to $25 copay	-0.05% -0.1%

Annual premium change to increase RX Non-Formulary copay (GF & NGF PPO): from $25 copay to $27.50 copay from $25 copay to $30 copay	-0.03% -0.05%
Annual premium change to increase RX Formulary coinsurance maximum (GF PPO only): from $1000 to $1200 from $1000 to $1500	-0.05% -0.1%
Annual premium change to cover Colonoscopy Screening 100%, once every 10 years: beginning at age 50 (cost per GF contract per month) beginning at age 45 (cost per GF contract per month)	$2.50 $3.00
Loss of Grandfathered Status (GF PPO only): (no cost-share on Prev. Svcs & Women's Preventive mandate & ACA mandates)	3.7%

Note: When combining changes, the resulting rate effect may be less than the sum of the factors listed.

Wellness Modifications – Increase or Decrease Cost Based on Design

As noted in Question 47 of Appendix C – Questionnaire, BCBSND has the capability to administer outcome-based wellness programs and incentives, and has done so historically for multiple employer groups. Currently, multiple sources of data (clinical, claims and subjectively reported) are utilized to administer the participation and outcomes-based programs and incentives. BCBSND provides a comprehensive environment that administers the member experience, group level reporting and differing channels for application of incentives (online catalog, premium differential and HSA/HRA contribution).

Prescription Drug Benefit Modifications

Below are several drug benefit design modifications we are presenting for NDPERS' consideration. Benefit design changes are always loaded and tested for accuracy and consistency well in advance of the renewal date. Furthermore, Prime will work with BCBSND to notify members of any changes and transition them appropriately.

Option 1: Mandatory Mail Benefit

Opportunity
Add a Mandatory Mail benefit for maintenance medications filled for 90 days supply and change retail copays to 1 per 34 day supply.

Option 2: Removal of Member Rebate Accounts

Historically, a portion of rebates have been returned to NDPER members in the form of a Member Rebate Account or MRA. If requested, BCBSND is willing to stop the use of MRAs. By doing so, rebates currently applied to MRA accounts would be redirected to NDPERS.

Opportunity	Estimated Financial Performance	Estimated Projected Total Savings
Remove member rebate accounts (MRA)	We anticipate no impact as rebates listed within our baseline proposal are currently representative of both member (MRA) and NDPERs group allocations	Member allocations would be returned to NDPERS

Option 3: Formulary Exclusion Expansion*

Prime Therapeutics LLC maintains formulary exclusion opportunities that may be elected by NDPERs to enhance rebates.

Opportunity	Estimated Financial Performance	Estimated Projected Total Savings
Multiple Classes Available	Impact to Rebate+Manufacturer Admins	Rebates/MAFs per branded rx could increase by an estimated $8 in year one and $11 in year two

**BCBSND reserves the right to adjust ASO RX admin should NDPERS elect formulary exclusion expansion.*

Alternate Pharmacy Proposal

Proposal 1: Transparent Pharmacy Benefit Management Program

BCBSND's baseline ASO proposal, outlined in Appendix D2.2, is based on the current, pass-through PBM funding arrangement between BCBSND and NDPERs with the addition of 100% pass-through of rebates, pass-through of the value of Manufacturer admin fees, and pass-through of the value of pharmacy transaction fees. BCBSND continues to offer NDPERs the pass-through of the BCBSND negotiated rates with Prime Therapeutics LLC as it relates to mail service operations and specialty pharmacy.

As an alternative arrangement, BCBSND can provide flexibility and continue with a partial rebate withhold, retention of Manufacturer Admin fees, and retention of pharmacy transaction fees to offset the majority of the PBM administrative fees assessed to BCBSND by Prime Therapeutics LLC. The table below outlines the impact these modifications would have on NDPERS' pharmacy administrative fees as presented in Appendix D2.2.

	2015-2017 Estimates, Proposed Pricing Arrangement (Appendix D2.2)	Alternative Transparent Program	Adjustments to RX Admin and Financial Guarantees based on Alternative Program Election
RX Administrative Fee	$3.40 PCPM	$0.00 PCPM	No impact to RX financial guarantees
Rebates	"100% Pass-through of Rebates."	"Partial Rebate withhold by BCBSND"	Appendix D2.2 Total Rebate/Branded Rx Y1: $54.26 Y2: $61.65
Manufacturer Administrative Fees (MAF)	"Pass-through of the value of Manufacturer Admin Fees"	"Retained by PBM"	
Pharmacy Transaction Fee	"Pass-through of the value of Pharmacy Transaction Fees"	"Retained by PBM"	No impact to RX financial guarantees

Proposal 2: Transparent Pharmacy Benefit Management Program With Modifications

Alternative Pass-Through Pharmacy Option

BCBSND can offer significant savings to NDPERS by incorporating the following modifications to your pharmacy program. These modifications may result in total drug spend savings of 1-3% in year one.

- **Prime Select Network**
  Prime currently maintains the BCBSND Select Network for BCBSND employer groups. This broad BCBSND pharmacy network includes a subset of rural pharmacies that are reimbursed at a higher rate to ensure pharmacy solvency. These generous rates are beneficial to North

Dakota pharmacies and do not create spread margin retained by Prime or BCBSND; by doing this, both BCBSND and NDPERS show support for instate, North Dakota pharmacies. However, BCBSND is willing to remove these higher rates provided to North Dakota pharmacies at the request of NDPERS in lieu of applying improved pharmacy financial performance guarantees to demonstrate our commitment to enhanced savings.

Should NDPERS transition to Prime's Select Network, there will be no disruption in retail pharmacy availability, as both the BCBSND Select and Prime Select Networks contract with the same pharmacies.

- **Minimum Reimbursement Level**
  BCBSND provides a minimum reimbursement level to ensure that retail pharmacies remain solvent and to ensure continued member access in rural areas. The impact of this minimum reimbursement results in dispensing fees paid to the pharmacy as listed in the base proposal. At the request of NDPERS, BCBSND is willing to remove this deeper reimbursement to network pharmacies. Impacts to the removal of the minimum reimbursement level will result in overall lower aggregate dispensing fees.

- **Extended Supply Network**
  As an alternative to traditional mail service, an extended supply network (ESN) involves the creation of a subset of the Select Network whose goal is to retain the sole ability to dispense drugs for greater than a one month supply (e.g., 90-day retail network). With the implementation of an ESN network, all pharmacy claims for greater than a one month supply are limited to fulfillment through an ESN provider. In addition, in exchange for slightly reduced pharmacy availability, an ESN network provides enhanced discounted savings on medications. Furthermore, ESN networks have been shown to improve adherence by 7% to 10% when compared to 30 day supplies. Unlike other PBMs that offer enhanced rates for only claims >84 days supply, BCBSND extends this opportunity to all claims greater than a 1 month supply.

  BCBSND and Prime understand the importance of member choice and pharmacy access. Unlike other PBMs that offer enhanced rates only at a their own pharmacy chain, Prime extends the ability to be part of the ESN network to any pharmacy provider within our network.

- **Prime Specialty Pharmacy – Exclusive Specialty Arrangement**
  When it comes to specialty drug benefits, BCBSND and Prime recommend an integrated, consultative approach to managing specialty pharmacy that only a carve-in relationship provides. We believe that with our exclusive carve-in offering, NDPERS will have a more complete picture of each member's health enabling better decision making for the management of specialty drugs, while keeping costs as low as possible.

  Our comprehensive approach to managing specialty addresses both medical and pharmacy benefit coverage with recommendations as to which benefit is most appropriate for a particular specialty drug. We have a complete package of care management programs designed to promote appropriate use, while managing the costs, of these expensive therapies.

Aggregate Specialty Guarantee

With the addition of an Exclusive Specialty arrangement, NDPERs may elect for either the Aggregate Specialty guarantee below or elect for pricing through Prime Specialty Pharmacy as outlined in attached specialty fee schedule.

- BCBSND is pleased to offer NDPERS an Aggregate Specialty Guarantee. The Aggregate Specialty Discount is a Composite Brand /Generic Discount.
- We are defining the Aggregate Specialty Guarantee to be ((Specialty Discount Guarantee – Actual Specialty Discount (including all drug categories)) * Specialty AWP.

NDPERS (Select & Rural Networks) – Aggregate Specialty Discount		
Year 1	**Year 2**	**Year 3**
17.00%	17.00%	17.00%

- Guarantees only apply to drugs dispensed through Prime Specialty Pharmacy under an exclusive relationship and as defined by the Prime Exclusive Specialty Fee Schedule.
- Dispensing fee will be $0.00 for those drugs dispensed through Prime Specialty Pharmacy.
- Guarantees will be reconciled annually and applied in aggregate.
- Specialty drugs dispensed through the medical benefit will not be included in this guarantee reconciliation.
- Employer demographics and geography will remain actuarially consistent.
- Overall Specialty Discount guarantee will not include any new specialty drugs brought to market and added to the specialty list during the term of the contract.
- Overall Specialty Discount guarantees will not include any limited distribution drugs.
- Specialty volume changes must be less than 10% as compared to the data and claims experience provided by the client.

If NDPERs elected to transition to the Prime Select Network, remove the minimum reimbursement level to pharmacies, implement the extended supply network (ESN), and add an exclusive specialty arrangement through Prime Specialty Pharmacy (PSP), an alternative pass-through RX financial option could be represented as listed below.

NDPERS (Select Network with ESN)	**Members:** 56,874
Effective Date: 7/1/2015	**Employees**: 22,470
Pass-Through Pricing	
Retail	
Brand	**Generic**
AWP minus	**AWP minus**
Y1: 15.45%	Y1: 80.05%
Y2: 15.60%	Y2: 80.30%
Dispensing Fee	
Brand	**Generic**
Y1: $1.10	Y1: $1.20
Y2: $1.05	Y2: $1.15
Mail	
Brand	**Generic**
AWP minus	**AWP minus**
Y1: 25.00%	Y1: 78.65%
Y2: 25.00%	Y2: 78.70%
Dispensing Fee: $0.00	

Rebates to Client
Total Per Brand Rx
Y1: $64.81
Y2: $73.49

Administration Fees PCPM	Y1: $3.40
	Y2: $3.40

Notes:

- Discounts are based on the actual NDC-11 dispensed.
- Guarantees will be reconciled annually and applied in aggregate.
- Pricing excludes the value of U&C.
- Retail discounts include 90-day at retail claims and are contingent on implementation of the ESN network and at least 18% of retail claims being filled through our Extended Supply Network.
- Pricing assumes transition to the Prime Select Network from the standard ND Select network
- Pricing assumes removal of the current minimum reimbursement level paid to pharmacies
- Discounts provided do not include savings from DUR or other clinical programs.
- Guarantees may be amended in the event there are client formulary changes, implementation of new clinical programs, changes to the pharmacy benefit plan design, lock-out of drug classes, or unexpected generic launches.
- If an incomplete data submission is received, Prime will reserve the opportunity to refresh pricing.
- Assumes client does not have 340B pricing.
- Rebates will be paid on all eligible claims incurred during the life of the contract.
- Rebates are earned on all eligible claims, regardless of days supply and member contribution percentages.
- Compound claims are excluded from rebates.
- Discount rates exclude compounds and specialty claims as defined by Prime Specialty Fee Schedule.
- Pricing assumes no material change in membership or changes to the pharmacy benefit design.
- We reserve the right to recalculate our quoted fees if the number of covered members increases or decreases by 10% or more during the course of the contract.
- In the event the number of covered members or pharmacy claims volume varies by greater than 10% as compared to the data and claims experience provided by the client, Prime reserves the right to revise the pricing terms and financials accordingly.
- If changes occur within the PBM marketplace which lead to a significant deviation from the current economic environment, both parties agree to proactively amend the contract to make all parties commercially reasonably economically neutral.
- These guarantees are subject to change in the event that any law, regulation, interpretation of a law or regulation, or any change within the PBM marketplace would lead to a deviation from the current economic environment upon which these guarantees are based.
- Unexpected generic launches, products launched at risk or under patent litigation are excluded from our guarantees.
- Any drug determined to be in short supply based on published sources (including the FDA and ASHP websites) will be excluded from our guarantee.
- A drug that has more than a 100% increase in cost will be excluded from the guarantee.
- Rebates are based on the assumption that NDPERS will adopt the UM or NDC Block to support Insulin and Test Strip strategies.
- Rebates guarantees are reflective of both group and member (MRA) allocations.
- Pricing offer is valid for the NDPERs combined Medical+RX ASO RFP and for the ASO stand-alone RFP. ASO RX stand-alone RFP is contingent upon NDPERs election of BCBSND for Medical.
- Our financial guarantees are only applicable to commercial lives.
- Members will pay the lower of the contracted rate, U&C, or their applicable copayment. Zero balance logic is not employed.
- Generic discounts apply to all generic drugs, including single source generic drugs, as defined by Medispan.

Appendix L:
PBM Questionnaire – Prime Therapeutics, LLC

Appendix L:

PBM Questionnaire – Prime Therapeutics, LLC

In order for your proposal to be considered and accepted, your organization must provide answers to the questions presented in this section. Each question must be answered specifically and in detail. Include both the question and the answer in your proposal response. An electronic copy of this questionnaire has been provided to facilitate your response.

Reference should not be made to a prior response unless the question involved specifically provides such an option. Proposers should refer to the earlier sections of this RFP before responding to any of the questions, to ensure that you have a complete understanding of the requirements with respect to your organization's proposal.

Vendors may include additional information that you consider relevant or useful to NDPERS. However, responses to all of the questions set forth below must be provided.

NDPERS is interested in evaluating financial arrangements based on the traditional approach to PBM pricing and pricing under a transparent arrangement. "Traditional" financial proposals should include guaranteed effective rate discounts, as well as specific fees and guaranteed rebate dollar amounts. "Transparency" for purposes of this Request for Proposal is defined as a full pass through to NDPERS of all monies paid to the PBM arising from all contracted arrangements. **When answering questions and completing exhibits related to your financial proposal, please indicate if your answer would differ under a transparent or a traditional pricing arrangement.** NDPERS will give greater preference to transparent proposals.

If this proposal results in your company being awarded a contract and if, in the preparation of that contract, there are inconsistencies between what was proposed and accepted versus the contract language that has been generated and executed, any controversy arising over such discrepancy will be resolved in favor of the language contained in the proposal or correspondence relating to your proposal. Vendors are reminded that **any and all deviations must be clearly identified and described in the RFP and the deviations worksheet provided in Appendix F.**

The questionnaire is broken down into the following 10 (ten) categories:

- Organizational Background, Strength, and Experience
- Implementation and Account Management
- Communications and Website
- Plan Administration
- Eligibility
- Customer/Member Service
- Claims Administration
- Reporting
- Case/Utilization Management
- Health Risk Management and Wellness Programs
- Provider Network
- Performance Standards and Guarantees
- Pharmacy Benefits Management Services
- Financials

1.1 Organizational Background, Strength, and Experience

1. **Provide a brief description of your organization:**

   a. **Include your company history, organizational structure, services provided, location of headquarters, and length of time you have been in business.**

   More than 70 years ago, Blue Cross Blue Shield of North Dakota (BCBSND) began as two separate pre-paid health care plans for hospital and physician services. The two companies merged in 1986 and, in 1998, converted to a not-for-profit mutual insurance company.

   Included as part of our organizational structure, is our pharmacy benefit management (PBM) partner, Prime Therapeutics (Prime). Prime is a privately held LLC owned by 13 non-profit Blue Cross and Blue Shield (Blue) plans or their affiliates, including Blue Cross and Blue Shield of North Dakota (BCBSND). As a privately held company, Prime's ownership structure enables them to work in the best interests of clients without regard to Wall Street expectations.

   Prime's products and services date back to 1987, when one of their predecessors, Pharmacy Gold, began offering high-quality drug formulary services that would later evolve into Prime as the comprehensive PBM they are today. Prime has provided PBM services for BCBSND since 1998, when it began operation. In partnership with BCBSND, Prime's mission is to provide the highest quality care and service for NDPERS' members and empower NDPERS to make informed, cost-efficient decisions in health care management.

   Pharmacy Services Provided
   Pharmacy services and operations provided to NDPERS include communications, claims processing, financial analysis, information technologies, legal support, marketing, integrated pharmacy/medical management, member services, and even more sub-specialty services including:

   - Account management
   - Trend forecasting
   - Clinical programs
   - DUR and management
   - Drug utilization programs
   - Mail service
   - Predictive benefit modeling
   - Reporting and analysis
   - Benefit plan design
   - Web-based services
   - CDHP administration
   - E-prescribing
   - Formulary management
   - Specialty drug management
   - Pharmacy network contracting and management
   - Rebate administration

   Location of Headquarters
   BCBSND began with a small office located in downtown Fargo in 1940. The corporate office is now located at 4510 13th Ave. S., Fargo, with additional service offices located across the state in Bismarck, Devils Lake, Dickinson, Grand Forks, Jamestown, Minot, Valley City, Wahpeton and Williston.

   Prime's corporate headquarters is located at 1305 Corporate Center Drive, Eagan Minnesota, with additional service offices located in Bloomington, Minnesota along with three Contact Centers in Albuquerque, New Mexico, Irving, Texas, and Omaha, Nebraska; and two PrimeMail facilities in Irving, Texas and Albuquerque, New Mexico. Prime specialty pharmacy is located in Orlando, Florida.

b. **Include the number and type (governmental or private) of clients, the total number of eligible employees, and the total number of actual participants that your company currently serves.**

Currently, Prime serves 23 Blue Cross Blue Shield plans, 24 direct employers, 12 Medicare Part D sponsors, and 3 managed Medicaid clients, covering approximately 25 million lives. In North Dakota, Prime currently serves 211,927 eligible card holders and 404,840 lives.

c. **Describe any significant historical or future organizational developments (acquisitions, mergers, change in subcontracted vendors, etc.).**

Both BCBSND and Prime continue to make investments to streamline administrative and operational expenses, but at this time do not foresee engaging in any acquisition or merger activity.

2. **Vendors responding to this RFP must be able to substantiate their financial stability. Provide a copy of your audited financial statement or other financial information. Include, at a minimum, a Balance Sheet and a Profit and Loss Statement, together with the name and address of the bank(s) with which you conduct business and the public accounting firm(s) that audit your financial statements. Other sufficient information may include a written statement from a financial institution confirming the creditworthiness and financial stability of the vendor.**

Prime is a privately held company that is financially stable with adequate working capital and no debt. Prime undergoes an annual financial statement audit completed by RSM McGladrey, Inc. The results of the annual financial audit are presented to executive leadership for review and approval. In addition, the audited financial statements are presented to the Finance Committee and the Compliance and Audit Committee of the Board. Prime's audited financial statement is available upon execution of a signed NDA.

3. **Provide a copy of any State or Federal regulatory audit performed within the last two years.**

Periodically, Prime responds to inquiries from state Boards of Pharmacies and Departments of Insurance, CMS and the Federal Office for Civil Rights. Prime does not expect any of these matters to have a material effect on its business.

For instance, Prime has participated in the Centers for Medicare and Medicaid Services (CMS) audits of our plan sponsors. Prime has been responsible for the components of the CMS Program Audits related to Coverage Determinations and Formulary Administration. Prime has participated in one state audit for one of its Medicaid clients. Medicare Part D/ CMS audits were performed in 2012 and 2013.

4. **Confirm that your organization agrees to be accountable for everything stated in and submitted as part of your proposal, even if not specifically addressed in the Minimum Contract Provisions in Appendix 1.**

BCBSND and Prime are accountable for everything stated in and submitted as part of our proposal, even if not specifically addressed in the proposed sample Minimum Contract Provisions.

5. **Indicate whether your company has ever been or is currently a party to litigation regarding a pharmacy benefit plan contract or agreement. If so, provide details of the litigation or action. Failure to disclose this may constitute grounds for rejection of any proposal or termination of any contract.**

Prime has been a party to various legal actions within the last four years. Prime does not foresee any of the legal actions having a material impact on our ability to conduct business and none of the matters impact Prime's financial stability and reputation.

6. **State whether the vendor, its officers, agents or employees, who are expected to perform services under the NDPERS contract, have been disciplined, admonished, warned, or had a license, registration, charter, certification, or any similar authorization to do business suspended or revoked for any reason.**

   No, BCBSND and Prime are not aware of any disciplinary action against our officers, agents or employees that would impact any license, registration, charters or certifications necessary to provide the services outlined in this proposal.

7. **Include a description of your organization's major short term strategic initiatives and your long term strategic business plan. Specifically address cost containment efforts.**

   We know complex forces will continue to shape the pharmacy benefit and health care industry in new, unexpected ways. We work collaboratively with clients to provide insight to navigate change and new program initiatives with confidence. That said, Prime's commitment to maintaining innovative state-of-the-art products, focusing on infrastructure, technology, and clinical management differentiates us from other PBMs.

   Some of the key new strategy investments Prime is making over the next two years include:

   - ***Leveraging a business process management platform*** to drive automation and optimization of Prime's business processes
   - ***Improving Prime's web sites*** by uplifting the underlying web content management and portal platform
   - ***Utilizing a master data management platform*** to improve the quality and completeness of Prime's enterprise data. Initial targeted areas include member and provider information
   - ***Continuously add and manage our core web service*** application program interfaces to support real time data access by our internal applications and external partners
   - ***Continuing to meet to the growing specialty drug cost*** challenge by offering holistic member support and tools to drive specialty drug prices to the lowest net cost.
   - ***Taking advantage of new generic/biosimilar opportunities*** by creating benefit designs that include four or sometimes five tiers to allow for formulary management of specialty drugs; as biosimilar drugs reach the market, this will become an increasingly important way to drive down drug costs.
   - ***Facing health care cost challenges in smarter ways*** by targeting individuals who will benefit from better pharmacy care through such things like adherence programs and other utilization management methods, rather than adding costs across the board.
   - ***Embracing the power of big data*** through effectively harnessing and analyzing this information, will lead to better, more informed decisions being made for members and the plans. Clinical programs like GuidedHealth (Prime's clinical program and reporting tool that offers member-focused programs based on shared medical and pharmacy data) will offer significant opportunities for predictive modeling to proactively engage members and doctors to avoid future costs.

8. **Describe how your organization differentiates itself from your competitors. Specifically, what makes your organization the best partner for NDPERS?**

   At BCBSND, we understand the need for *truly* integrated care that enables medical and pharmacy benefits to work together has never been greater. Prime is a national PBM providing optimal service to 25 million members. We have and will continue to work closely with NDPERS to administer a pharmacy benefit strategy that meets the needs of your employees while *reducing costs and managing overall health* through our focus to:

   - Leverage our direct connection to deliver programs that coordinate across medical and pharmacy benefits to achieve better health outcomes

- Keep pharmacy costs low so that medicines are more affordable for the members we serve
- Deliver a superior experience making it easier for members to get the medicine they need

Innovation at its Best

Prime's commitment to maintaining innovative state-of-the-art products, focusing on infrastructure, technology, and clinical management differentiates us from other PBMs. This is best illustrated through our industry leading drug trend, claims adjudication capabilities, customer service technology, member web sites, and medical and pharmacy data integration; all of which are described below.

Keeping Medicines Affordable

Together, Prime keeps pharmacy costs low so that medicines are more affordable for the people we serve, like NDPERS. We do so using a straightforward business model that includes full disclosure and no hidden revenue streams. Here are just a few of the ways we provide value:

- **No conflict of interest** – Neither Prime nor BCBSND is owned or aligned with any drug manufacturer, wholesaler, distributor, or retail pharmacy chain, which *allows us to act independently and in your best interests.*
- **No managing to profit margins** – Prime's business model and private ownership status means *we put people first*. We do this while driving down drug costs rather than increasing profits for stockholders.
- **Channel neutrality** – Rather than trying to drive prescriptions through one delivery channel over another (e.g., mail vs. retail), or through a certain benefit channel (i.e., pharmacy vs. medical), we support what is most sound for our clients, leads to the best outcomes, and keeps your costs as low as possible.
- **Clinical programs** – Our comprehensive programs are designed to manage drug adherence and safety, promote appropriate utilization and therapy management.

Industry-leading Drug Trend

Prime's partnership and unique connection with Blue plans like BCBSND has driven stronger drug trend results than competitors every year since 2007; Prime's 2013 drug trend was *only 3.3 percent.* Through our connected model, we are better able to control drug costs and keep medicine more affordable by securing deeper discounts, which helps members take full advantage of opportunities for lower cost, generic alternatives and the best preferred brand drug.

Claims Adjudication Capability

The claims system is available 24 hours a day, 7 days a week, excluding scheduled upgrades. Our average claims processing time is 0.43 seconds per claim; the industry average is 2.0 seconds. Prime's transactions are immediately replicated on a secondary system. Automated rollover from our primary to secondary system is tested monthly.

Contact Center Technology

Prime's Contact Center features a virtual call center environment with state-of-the-art call routing technology. Prime uses the alternate destination routing (ADR) from AT&T with intelligent call routing. ADR is designed to automatically reroute calls to the next available CSR in the event of "any network busy" or "ring no answer" regardless of location. Prime has dual access providers and multiple network gateways at each of our data centers; however, ADR protects the caller should one of these two events occur at either location.

Member Web Sites

NDPERS members can take advantage of our member web sites, based on leading-edge J2EE technology. J2EE technology is based on clustered server technology to support availability 24 hours a day, 7 days a week. We continue to enhance the underlying architecture to allow for more client branding and customization.

Medical and Pharmacy Data Integration

A prime example of integration and innovation is our GuidedHealth clinical program and reporting tool. Using both medical and pharmacy data, GuidedHealth delivers a suite of member-focused clinical programs to provide actionable clinical intelligence to physicians and members to improve outcomes and lower overall cost of care.

The functionality of medical and pharmacy data integration supports integrated combined deductibles, out-of-pocket limits, and stacked savings accounts at the point of sale. Integrated medical and pharmacy data is also used to develop clinical programs to increase safety for your members and reduce overall plan costs.

9. **Identify all services that are currently outsourced or subcontracted, the name of the vendor/partner, and length of the relationship. Describe how you ensure quality customer service and timely and effective issue resolution.**

   Prime subcontracts with vendors as needed and defined by the scope of services we provide our clients. We ensure that any subcontractor processes seamlessly integrate with ours to deliver optimal service to clients and members. Below is a list of subcontracts Prime does business with in relation to services provided to NDPERS.

Vendor Name	Services Provided
APAC Customer Service, Inc. Bannockburn, IL 60015	Front-end data entry for member mail order prescriptions. Also provide contact center services for member services and pharmacy help desk. URAC accredited.
CoverMyMeds Columbus, OH 43215	ePrescribe Network – transaction processing, reporting
Eliza Corporation Danvers, MA 01923	Automated outbound call notifications program for PrimeMail members to advise of prescription renewals, order acknowledgement and order shipment acknowledgement.
KBMG (Knowledge Based Marketing Group) Richardson, TX 75082	Assists Prime in developing and executing campaign management strategies and operations.
NOVO1 Ft. Worth, TX 76155	Contact Center functions supporting Commercial members.
ORC International Maumee, OH 43537	Market research/member satisfaction survey for commercial and Medicare D members.
RR Donnelley & Sons Chicago, IL 60606	Print and mail member EOBs and member and pharmacy remittances and checks.
kgb USA, Inc. (Conduit Global) Bethlehem, PA 18017	Contact Center functions supporting Pharmacy Help Desk and members calls for Commercial and Medicare Part D.
Surescripts LLC Minneapolis, MN 55402	ePrescribe Network – transaction processing, reporting
SavvySherpa Minneapolis, MN 55430	Consulting and analytic services that are R&D focused. May also perform some product tests communicating directly with clients or members.

Ensuring Vendor Quality

Prime works closely with subcontractors to ensure their processes seamlessly integrate with ours to deliver optimal service to clients and members. To work effectively with subcontractors, we share information and processes, build communications and accountabilities, and establish system links.

Prime defines key performance metrics and deliverables with each subcontractor in the development of process flows and routine communications. Our contracts with subcontractors contain specific service obligations with which all subcontractors must comply. In addition to contractual obligations, we look for organizations that maintain strict quality control standards and possess the flexibility to handle client requests.

10. **What ratings have you received from the following third party rating companies and organizations?**

    Being a privately held company, Prime is not rated by the included rating organizations.

11. **Are any of the services you are proposing to provide to NDPERS contracted outside the U.S.A? Describe any business you do outside the U.S.A. and the financial impact, if any, of requiring those services to be provided within the U.S.A.**

    All services proposed are provided domestically.

12. **Confirm that your proposal includes any and all deviations to the Minimum Contract Provisions (via submission of Exhibit F) and to the other RFP requirements (via Exhibit F, worksheet 2).**

    Confirmed.

13. **Confirm that you will conform to the Patient Protection and Affordable Care Act and the Health Care and Education Reconciliation Act of 2010. Describe any provisions that NDPERS must be prepared to comply with beginning July 1, 2015.**

    BCBSND and Prime are committed to serving as NDPERS's primary resource for information about Patient Protection and Affordable Care Act (PPACA) and the Health Care and Education Reconciliation Act of 2010 and will revise NDPERS's benefit plan, programs and systems to ensure compliance.

    Since the inception of ACA, BCBSND has provided NDPERS access to our subject matter experts to work through the ACA key provisions including the employer mandate, eligibility, look back periods, affordability and reporting requirements. A pilot workgroup was formed including representatives from NDPERS, the Office of Management and Budget, agency staff and BCBSND to discuss implementation requirements. In addition, other state agency and political subdivision representatives were invited to a special ACA forum in July, where BCBSND staff presented on ACA provisions along with other state staff.

    BCBSND and Prime have worked with NDPERS to successfully implement the initial provisions of PPACA, including:

    - Expanded eligibility for adult children up to age 26
    - Elimination of pre-existing condition waiting periods for members younger than age 19
    - Elimination of lifetime and annual limits for essential benefits
    - Elimination of cost-sharing for preventive services, screenings and care as well as routine immunizations recommended by various government agencies
    - Expanded coverage for women's preventive benefits for non-grandfathered plans
    - Compliance with the PPACA Summary of Benefits and Coverage and Uniform
    - Glossary provision

- Transitional Reinsurance Assessments
- Patient Centered Outcomes Research Tax
- PPACA Insurer Fee

BCBSND and Prime will continue to work with NDPERS to implement additional provisions as required under PPACA. The following provisions will impact NDPERS during the next biennium, including:

Provisions	Non Grandfathered Plans	Grandfathered Plan
USPSTF – Alcohol Misuse	Impacted	Not Impacted
USPSTF – Hepatitus C Virus Screening	Impacted	Not Impacted
USPSTF – Preventive High Risk Breast Cancer Drugs	Impacted	Not Impacted
USPSTF – Lung Cancer Screening	Impacted	Not Impacted
Out of Pocket Maximum Definition Update	Impacted	Not Impacted
Removal of Waiting Periods	Impacted	Impacted
Conversion Language Updates	Impacted	Impacted
BlueCard Language Updates	Impacted	Impacted
20% Non Par Sanction Removal	Impacted	Not Impacted
Medical Qualification Language Removal	Impacted	Impacted
Member Rights and Responsibilities Language Added	Impacted	Impacted

**Provisions do not apply to retiree plans*

In addition, effective the next biennium, 7-1-2015 – 6-30-2017, due to the **Mental Health Parity and Addiction Act (MHPAEA)** final rule, we will be removing the age limits from Psychiatric Residential Treatment Services. Previously, this benefit was limited to members under age 21. This restriction was removed to comply with the MHPAEA final rule.

1.1.2 References and Experience

1. **Provide the following information on a maximum of three (3) of your largest pharmacy benefit plan clients for whom you provide pharmacy network, and administrative services on a self-insured basis. References of similar size and scope to NDPERS are preferred; one must be your largest public sector client and one must be your largest North Dakota-based client. Identify those clients who are large employers with multiple payroll processing centers and Medicare Part D program support.**
   a. **Name of employer sponsoring plan and location**
   b. **Type of services provided to plan sponsor**
   c. **Plan inception date**
   d. **Length of time as client**
   e. **Number of contracts and members participating in the plan**
   f. **Contact information (name, title, phone number, email address)**

Name of employer sponsoring plan and location:	University of Minnesota Minneapolis, Minnesota
Type of services provided to plan sponsor:	PBM Services
Plan inception date:	2011
Length of time as client:	3 Years
Number of contracts and members participating in the plan:	39,765 members
Contact Information (name, title, phone number, e-mail address):	Karen Chapin, Health Programs Manager (612) 625-1115 Chapi011@umn.edu

Name of employer sponsoring plan and location:	Presence Health Chicago, Illinois
Type of services provided to plan sponsor:	PBM services
Plan inception date:	2012
Length of time as client:	2 Years
Number of contracts and members participating in the plan:	26,000 members
Contact Information (name, title, phone number, e-mail address):	Katie Hinz, Systems Manager, Benefits (312) 308-3259 Katie.Hinz@presencehealth.org

Name of employer sponsoring plan and location:	Hormel Foods Corporate Services, LLC Austin, Minnesota
Type of services provided to plan sponsor:	PBM services
Plan inception date:	2012
Length of time as client:	2 Years
Number of contracts and members participating in the plan:	25,000 members
Contact Information (name, title, phone number, e-mail address):	Mike Kadrie, Corporate Manager, Health and Welfare (507) 437-5481 mekadrie@hormel.com

**North Dakota-specific client references are noted in Appendix C of the proposal response.*

2. **Provide the following information for two (2) of your largest pharmacy benefit plan clients that have terminated services during the preceding 3-year period. References of similar size and scope to NDPERS are preferred.**
   a. **Name of employer sponsoring plan and location**
   b. **Type of services provided to plan sponsor**
   c. **Plan inception date**
   d. **Length of time as client**
   e. **Number of contracts and members participating in the plan**
   f. **Reason for termination**
   g. **Contact information (name, title, phone number, email address)**

Name of employer sponsoring plan and location:	Lifetouch Eden Prairie, Minnesota
Type of services provided to plan sponsor:	PBM services
Plan inception date:	1997
Length of time as client:	17 Years
Number of contracts and members participating in the plan:	11,330 members
Reason for Leaving	Moved with Mercer coalition to another PBM.
Contact Information (name, title, phone number, e-mail address):	Bradley Fagerstrom, Senior Director, Total Rewards (952) 826-5596 bfagerstrom@lifetouch.com

Name of employer sponsoring plan and location:	Shands Hospital Gainesville, Florida
Type of services provided to plan sponsor:	PBM services
Plan inception date:	2013
Length of time as client:	1 Year
Number of contracts and members participating in the plan:	12,500 members
Reason for Leaving	GatorCare chose to bring rebate administration services in-house.
Contact Information (name, title, phone number, e-mail address):	Raymond Hoskavich, Senior Director of Human Resources (352) 265-0111 ext. 8.5363 hoskat@shands.ufl.edu

1.2 Implementation and Account Management

3. **Describe the timetable and specific tasks involved to have the NDPERS' program operative for the July 2015 Plan Year. Include a detailed implementation plan and business plan or timeline related to prescription drug coverage including Medicare Part D program support. At a minimum be specific with regard to the following:**

- **Amount of total time needed to effectively implement the program**
  30 days prior to the open enrollment session launch.
- **Activities/tasks and corresponding timing**
  As the incumbent carrier, no transition will be needed and system changes will follow BCBSND and Prime group renewal processes already in place.
- **Responsible parties and amount of time dedicated to implementation, broken out by vendor and NDPERS staff**
  As the incumbent carrier, all processes are in place to support the renewal of the NDPERS plan.
- **Any transition activities required with incumbent carriers, including providing members adequate notice regarding current care or treatment plans at least 60 days prior to a change**
  Not applicable to BCBSND and Prime as the incumbent.
- **Length of time implementation team lead and members will be available to NDPERS**
  BCBSND and Prime currently have a team of employees dedicated to NDPERS. Our NDPERS team will ensure a smooth implementation every step of the way.

4. **Provide an overview of how the NDPERS relationship will be managed, both strategically and on a day-to-day basis. Include an organizational chart. NDPERS will give preference to vendors who are willing to assign a dedicated account management team and provide access to senior leadership. Designate the names, titles, location, telephone numbers, and email addresses for the representatives listed below. For the account service individuals listed (b, c, d, and e below), provide brief biographical information, such as years of service with your company, experience as it relates to this proposal, and the number of clients for which they perform similar services.**

While Prime Therapeutics will serve as the PBM, BCBSND will manage all aspects of the NDPERS account.

Strategically, the NDPERS relationship will be managed to engage the boards and executives in direct communication on organizational needs and direction. We will continue to work with NDPERS to address cost trends, legislative items, new product concepts and other issues impacting the cost and quality of care and coverage. On a day-to-day basis, we will continue to provide a dedicated account executive, an account manager, group consultant, wellness consultant and access to all levels of management and the BCBSND Board. NDPERS members will continue to receive the high quality they've come to expect from our dedicated member services team. Please see "Attachment 3 – BCBSND Organizational Chart" for the BCBSND organizational chart.

a. **The key individual representing your company during the proposal process;**

Tim Huckle, President and CEO

A team of executives play a supporting role. Please refer to "Attachment 4 – Biographies" for biographical information.

Executive Support Team:

- Denise Kolpack, Senior Vice President of Corporate Communications and Public Affairs
- Pat Bellmore, Chief Marketing Officer
- Brad Bartle, Vice President of Actuarial & Membership
- Mark Tschider, Vice President of Customer Support & Claims Administration
- Sharon Fletcher, Senior Vice President of Health Network Innovation and Human Resources and Development
- Renay Rutter, Executive Vice President of Enterprise Planning and Technology
- Daniel Conrad, Chief Legal Officer
- Brian Fellner, Executive Vice President and Chief Financial Officer
- Cameron Olig, Senior Vice President, Client Services and Sales (Prime)
- Kent Wangsness, Regional Vice President of Client Engagement (Prime)

b. **The key individuals on your proposed implementation team;**

BCBSND has an established cross functional implementation team with leadership representation from all business units. This team will be led by a dedicated Project Manager, Lacey Hogness.

c. **The key individual assigned to overall contract management;**

Kevin Schoenborn, Manager, Consulting Services - Account Executive

d. The key dedicated individual or team members responsible for day-to-day account management and service;

Your dedicated Account Management Team will coordinate with the BCBSND implementation to ensure all aspects of the NDPERS benefit plan are implemented timely and accurately. They will be supported by a team of Subject Matter Experts. Please refer to "Attachment 4 – Biographies" for biographical information.

Account Management Team:

- Kevin Schoenborn, Manager, Consulting Services – Account Executive
- Rebecca Balk, Director of Client Engagement (Prime)
- Heather Belland, Account Consultant (Prime)
- Dorinda Card, Director of Key Accounts
- Onalee Sellheim, State and Public Program Manager – Account Manager
- Sonja Nyhof, State and Public Program Manager
- Jodi Crouse, NDPERS Large Group Consultant
- Michael Carlson, Manager of Health and Wellness
- Stacy Duncan, NDPERS dedicated Wellness Consultant
- Sheri Srnsky, Team Leader, Special Accounts, Claims

Subject Matter Experts:

- Michelle Bishoff, Director of Claims Administration
- Tom Christensen, Manager of Pharmacy Management
- Zach Keeling, Director of Marketing Operations & Product Management
- Linda Merck, Senior Actuarial Analyst
- Lacey Hogness, Business Implementation Lead
- Mike Potts, Director of Employer Consulting & Wellness Services
- Carman Bercier, Vice President Health Innovation and Practice Innovation
- Jackie Walsh, Vice President Clinical Excellence and Quality
- Pam Gulleson, Vice President of Public Affairs
- Megan Houn, Director of Government Relations
- Brent Solseng, Pharmacy Manager Marketing
- Shelly Stalpes, Manager Claims Administration
- Jim Wynstra, Director of Actuarial
- Heather Horner, Member Education Consultant
- Miriam Griffin, Member Advocate Specialist
- Megan Besser, Senior Consulting Analyst (Prime)

Please refer to "Attachment 4 – Biographies" for biographical information.

e. The key individual responsible for provider contracting; and

Sharon Fletcher, Senior Vice President Health Network Innovation and Human Resources and Development

Please refer to "Attachment 4 – Biographies" for biographical information.

f. The key individual responsible for provider relations if different than letter e. above.

Please refer to question 18 e.

5. Please provide the requested information for the functions that will be servicing NDPERS in the table below:

Area	Geographical Location(s) and Organization Name (if out-sourced)	Hours of Operation (Specify PST/ CST/EST)	Is this service Outsourced? Yes or No? If Yes, provide name of company to which the function is outsourced
Member Service	4510 13th Ave S. Fargo, ND 58121	Monday – Friday 8 a.m. – 5 p.m.	No
PrimeMail Services	Albuquerque, NM and Irving, TX	PrimeMail Contact: 24 hours a day, 7 days a week PrimeMail's dispensing hours of operation vary by site but both are operational Monday through Saturday for anywhere from 8 to16 hours per day. During these hours, pharmacists are on-site for the purposes of filling prescriptions and providing member counseling as needed.	No
Claims Processing	4510 13th Ave S. Fargo, ND 58121 (paper claims) Redundant claims systems located in Eagan, MN and Minnetonka, MN (online claims)	Monday – Friday 8 a.m. – 5 p.m. The online claims processing system is available 24 hours a day, 365 days per year.	No
Enrollment, Eligibility, and Billing	Enrollment, eligibility and billing currently administered by NDPERS	Enrollment, eligibility and billing currently administered by NDPERS	Not Applicable
Disease Management	BCBSND MediQHome program for in-state members Fargo, ND	Admin support: 8 a.m. – 4:30 p.m. (CST) Online access: Available 24 hours a day, 7 days a week	No

Area	Geographical Location(s) and Organization Name (if out-sourced)	Hours of Operation (Specify PST/ CST/EST)	Is this service Outsourced? Yes or No? If Yes, provide name of company to which the function is outsourced
	Accordant (effective 8/1/2010) North Carolina	Admin support: Monday – Thursday: 8 a.m. – 9 p.m. (EST), Friday: 8 a.m. – 5 p.m. (EST) Online nursing: 24 hours a day, 7 days a week	Yes – Accordant
Case and Utilization Management	4510 13th Ave S, Fargo, ND	8 a.m.-4:30 p.m. (CST)	No
Pharmacy Benefit Management	Prime headquarters: Eagan, MN Other locations: Albuquerque, NM; Chicago, IL.; Irving, TX; Jacksonville, FL.; Omaha, NE.; Pittsburgh, PA.; Washington, D.C.; Bloomington, MN.; Birmingham, AL.; Orlando, FL.; Raleigh, NC	Pharmacy Contact Center: 24 hours a day, 7 days a week PrimeMail Contact: 24 hours a day, 7 days a week Member Services: 8 a.m. – 4:30 p.m. (CST)	No
Member Education & Engagement	Fargo, ND, and Bismarck ND	Monday – Friday 8 a.m. – 4:30 p.m. (CST)	No
Dedicated NDPERS Account Manager	Based in Fargo, ND	Monday – Friday 8 a.m. – 4:30 p.m. (CST)	No

1.3 Communications and Website

6. Please complete the table below by providing a description of the pre-enrollment communication materials you will provide to support NDPERS during its open enrollment period:

Area	Description	Can it be customized for NDPERS?
Website	We will provide dedicated pages on our websites (www.BCBSND.com and MyPrime.com) to provide enrollment information, FAQs, contact information, and additional items deemed necessary by NDPERS. Furthermore, MyPrime.com houses important information such as: • finding a pharmacy • Information on your benefit plan / drug benefit • drug pricing that allows members to calculate the cost at both retail and mail for generic and brand products • price shopping by location • view equivalent drug choices • formulary searches • claims history look up • mail service • ordering refill prescriptions/checking on orders • education materials	Yes
Employee Newsletter(s)	BCBSND will provide original content addressing relevant insurance issues for the NDPERS employee newsletter. The content will support NDPERS's pre-enrollment and enrollment efforts.	Yes
Brochures	BCBSND supplies a PDF of the NDPERS PPO/Basic and the HDHP benefits grid on the NDPERS website.	Yes
Direct mail (internal or home distribution)	BCBSND will develop HTML-based flyers and information messaging for email distribution related to your medical and pharmacy benefits. BCBSND developers will provide these to NDPERS Information Technology personnel for distribution, to ensure complete coverage of the membership.	Yes
Enrollment guide	As the current carrier, BCBSND and Prime supplies NDPERS with joint underwriting criteria to administer its enrollment.	Yes
Employee open enrollment meeting support and attendance	As the current carrier for NDPERS, BCBSND and Prime offer dedicated NDPERS account management who can attend all open enrollment meetings upon request.	Yes

Area	Description	Can it be customized for NDPERS?
Benefits/HR staff training support	BCBSND and Prime's dedicated NDPERS account management team provides a benefit overview to all NDPERS agencies and NDPERS HR/Payroll areas upon request.	Yes
Video	BCBSND and Prime can deliver audio-visual presentations, Brainsharks, tutorials, and educational materials in multiple ways. Distribution can be by physical media (DVD, CD-ROM), web pages, personal media player downloads, or a combination. Online distribution can be through BCBSND or by delivery to NDPERS Information Technology personnel.	Yes
Employee healthcare cost calculator worksheets (cost estimates)	BCBSND will assist NDPERS in complying with the Summary of Benefits and Coverage and Uniform Glossary provision of PPACA. The Summary of Benefits and Coverage provides employees with health care costs and estimates for certain episodes of care.	Yes

7. Are you willing to provide communication and marketing resources to work with NDPERS in the development of NDPERS-specific member communication materials (educational, open enrollment, benefit plan related, ongoing communications)? Describe the resources, sample communications, and your proposed approach and strategy/plan.

BCBSND and Prime are willing to provide these resources to NDPERS. As the current carrier, we currently provide a variety of communication and promotional materials to NDPERS members. Several worksite wellness materials are available on topics including smoking cessation, healthy diet, exercise and other health and wellness topics.

Materials include a monthly wellness article with related poster, brochure and table tent. In addition, member education and engagement materials are offered at the workplace through BCBSND and Prime's member education programs. Presentation topics include:

- Take Care of Yourself
- HealthyBlue
- Stress Management
- Medication Education
- Prime Specialty Pharmacy enrollment materials and education pieces
- Beat the Bug
- Summer Safety
- Nutrition Basics for a Healthier You
- PrimeMail Welcome Kit materials
- MyPrime pharmacy member website benefit training
- Walking Works
- Strength Training
- Health Club Credit
- CPR and First Aid Basics

Various programs include a giveaway item to support the message, such as a pedometer for the Walking Works program or strength stretch bands for Strength Training.

BCBSND and Prime provides all benefit plan materials, including Summary Plan Description booklets, information grids summarizing member benefits and ID Cards. Worksite enrollment meetings are available and delivered by the NDPERS Account Representative on request.

Furthermore, we will continue to provide ad hoc marketing and communication strategies and proposals for specific needs outside the scope of the RFP. These strategies are developed by Corporate Communications and Marketing staff in collaboration with NDPERS staff.

8. **How much lead time is necessary for you to guarantee that ID cards will be received by members prior to the plan year effective date of July 1, 2015?**

   BCBSND guarantees delivery of ID cards to members before July 1, 2015, as long as all required enrollment information is received by June 14, 2015.

1.4 Plan Administration

9. **Confirm that you will communicate legislative changes related to the operations of the plan in a timely manner, and describe the support staff and process.**

   BCBSND will communicate federal and state legislative changes in a timely manner. BCBSND maintains close relationships with state and federal elected officials and their respective staffs. Our Government Relations team, Pam Gulleson and Megan Houn, monitor federal and state bills and promptly notify internal staff of potential changes that could impact the NDPERS health plan. Megan Houn works out of the Bismarck office and Pam Gulleson is based in Fargo. The Account Management team notifies NDPERS staff of potential changes and our legal staff will provide guidance on these issues, but recommends NDPERS communicate with its legal counsel to confirm. BCBSND's Actuarial team will provide pricing on legislative changes. BCBSND Contract Administration staff also works closely with the North Dakota Department of Insurance on notification of these changes. The Account Management team works closely with NDPERS staff throughout the process. In addition, Prime will work with BCBSND on any legislative issues regarding pharmacy in the state of North Dakota.

10. **NDPERS recognizes that different settlement arrangements will be necessary to implement a self-insured program. Please describe your proposed settlement process.**

    As it relates to the PBM, all pricing guarantees will apply, in aggregate, for the term of the pricing in Appendix D and will be measured annually. Within 180 days after the end of each servicing year during the initial and renewal terms of this agreement, BCBSND and Prime will provide a report of the actual overall effective discounts off of the average wholesale price (AWP) and dispensing fees for both brand and generic drugs.

11. **What is your total commercial and Medicare pharmacy plan enrollment? Complete the table below.**

Dates	BCBSND Commercial	Prime Commercial	BCBSND Medicare
As of January 2012	429,425	20 million	35,824
As of January 2013	456,590	22 million	36,690
As of January 2014	467,297	25 million	37,485

Note: we are assuming "Medicare" to mean Medicare Supplement business and "Commercial" to mean all other business excluding Medicare Supplement. These enrollment totals are as of the end of January for each year (i.e., January 31).

1.5 Eligibility

12. **Are ID cards the sole means of determining member eligibility? If not, please describe.**

    No, ID cards are issued to employees when their applications are processed. Eligibility is determined using the information from the last application received from the employee plus any additions (e.g. newborns automatically added from claims information) and deletions (e.g. dependents removed when no longer eligible). Members will receive a letter of termination upon request or automatically when a member is terminated. Members can also call the BCBSND service unit to verify eligibility status or visit BCBSND's website.

13. **If desired, can NDPERS update and maintain eligibility and check employee claim status online? Are there any special charges for access to and use of these tools?**

    NDPERS can check employee status through The Healthcare Online Resource. We update and maintain eligibility through the 834 file which is sent weekly. There are no charges for these services.

14. **NDPERS will submit enrollments via a centralized electronic system. NDPERS will collect enrollment/eligibility information which will be provided to the successful contractor on a data file that follows the HIPAA 834 file specifications. Files will be transmitted using a secure file transmission process. The successful contractor must be able to receive this data in that format and media.**

    Yes, BCBSND can receive this format. As the incumbent, this process is currently in place for NDPERS.

15. **Please describe how you handle manual eligibility updates and the turn-around/timing of such updates.**

    BCBSND can accept faxes, phone calls and secured email attachments. Eligibility updates can be processed immediately, if necessary; otherwise, they can be processed within 14 days.

16. **Please describe your standard (or proposed) financial arrangements with NDPERS under a self-funded arrangement including but not limited to: account requirements and process for claim payment, frequency of reimbursement to the administrator for claims paid, methodology for funds transfers, required reserves in claim account, etc.**

    NDPERS claims are already set up for reporting in BCBSND self-funded software. The transition should take minimal programming work to convert the fully insured process to self-funded. Self-funded claims are updated weekly by Wednesday morning. BCBSND will set up an automatic ACH withdrawal every Friday to pull funds from the group's bank account to reimburse BCBSND for their claims from the previous week. The group will be able to view their weekly claims amount each Wednesday online and must have enough funds in their account to cover the claims for that week.

1.6 Customer/Member Service

17. **Confirm if you will provide and maintain dedicated customer service staff acceptable to NDPERS. If yes, this unit will provide dedicated local and toll-free telephone numbers and shall respond directly to member inquiries regarding benefits, claim status, selecting participating providers, and provide general assistance with navigating on-line and other resources available through the health plan and NDPERS websites. If yes, describe the structure and organization and provide an organizational chart of the unit you are proposing. If no, please describe how these services will be provided.**

    BCBSND will continue to provide and maintain dedicated NDPERS customer service/ claims processing staff and provide dedicated local and toll-free telephone numbers for members. The dedicated staff will also continue to respond directly to members regarding benefits, claims status, selecting participating providers, and provide general assistance

with navigating online and other resources available through the health plan and NDPERS websites. The dedicated customer service unit consists of nine customer service representatives who handle the daily customer service inquiries and claims processing functions, one coordinator who handles day-to-day functions/training of the service unit and one team leader.

Please refer to "Attachment 5 - NDPERS Service Unit - Organization Chart" for the organizational chart for the NDPERS Service Unit.

1.7 Claims Administration

18. Provide the following information regarding the claims administration unit that will handle the NDPERS account. If there is more than one claims processing location, provide information for each.

Claims Processing Unit	
Address/Location	4510 13th Ave S. Fargo, ND 58121 Prime's address: 1305 Corporate Center Drive, Eagan MN 55121
Phone Numbers	Toll-free: 800-223-1704 Local: 701-282-1400 Toll-free (Prime): 800.858.0723
Days and Hours of Operation	Monday – Friday 8 a.m. – 5 p.m. Central Standard Time (CST) Prime's claims member service is available 24 hours a day, 7 days a week, including holidays. On-call pharmacists are available to assist members after hours.
Number of Members Serviced	The dedicated NDPERS Service Unit provides service to all 65,000 NDPERS members covered under the NDPERS Plan. During July 1, 2013, through June 30, 2014, the NDPERS Service Unit handled 33,246 calls.
Number of Employer Groups Serviced	NDPERS has a dedicated service unit that exclusively handles NDPERS claims and customer service.
Ratio of Claims Unit Staff to Members Serviced	The NDPERS Service Unit is comprised of nine Claims and Customer Service Unit Staff to provide service to all 65,000 covered NDPERS Members; a ratio of 1:7,222.
Volume of Claims Processed Daily	During July 1, 2013, through June 30, 2014, an average of 3,052 medical claims was processed per day; this includes systematic and manually processed claims. During this same period, Prime processed an average of 1,378 pharmacy claims per day.

19. Confirm that you are able to administer the NDPERS designs (Dakota Plan and Dakota Retiree Plan, HDHP/HSA) and benefit levels without manual intervention. If you are unable to administer the plan, you must specify any plan design deviations proposed as specified in the RFP.

Yes, BCBSND and Prime are able to administer the NDPERS commercial plan designs as requested by the NDPERS group, with minimal claims processing intervention.

1.8 Reporting

20. Please provide samples of your monthly, quarterly, and annually standard reporting packages.

Please refer to Attachment 17 for samples of the standard reporting package. In addition, BCBSND and Prime's Consulting Services will provide ad hoc reporting to NDPERS as needed.

21. Describe your online reporting capabilities. Please describe the data/information and types of reports that can be accessed and downloaded from your online system.

In conjunction with Prime, BCBSND offers a full suite of standard reports and data feeds available on a secure website (The Healthcare Online Resource) for staff to access.

BCBSND also offers access to Health Intelligence, an online reporting tool that allows for benchmarking and has drill down functionality to examine outliers and unique trends. The comprehensive Employer Group module features demographics, cost, utilization and risk analysis in print-ready Employer Profile Reports that can be set up on a periodic basis.

Please see Attachment 8 for a sample of the Health Intelligence Employer Profile report.

22. Explain your ability to comply with the NDPERS current data warehouse arrangement by providing pharmacy claims and enrollment data to NDPERS in a format agreed upon between you and NDPERS no less than monthly.

As the incumbent, BCBSND will continue to send monthly data files through The Healthcare Online Resource to NDPERS in an agreed upon format that includes claims and enrollment data.

1.9 Pharmacy Benefits Management Services

23. Describe your mail order pharmacy program and provide details on how you market this service.

Through Prime's mail pharmacy, PrimeMail, we will continue to offer NDPERS the features and advantages you have come to expect from Prime, including cost savings, enhanced customer service, convenience, consultation, and timely and accurate dispensing.

PrimeMail's program philosophy is simple: provide the highest quality care and service for members. As your members have already experienced, PrimeMail's member-friendly, customer-centric solution includes a new member welcome (on-boarding) program, automated calls upon receipt and shipment of an order, refill reminders, and physician/prescriber outreach programs for new and existing members.

Cost Savings
As your home delivery pharmacy provider, PrimeMail continues to provide efficient, convenient, and low-cost approaches to filling your drug prescriptions. Our competitive discounts on brand-name and generic drugs are provided with no dispensing fees. Prime is committed to helping NDPERS add specific mail benefits should you choose to use this channel for savings purposes, including consulting on various plan design modeling options for this benefit. The cost savings, combined with a quality process superior to retail pharmacies and the convenience of internet, mail, or automated phone ordering create a highly valuable pharmacy solution for your members.

PrimeMail also offers a therapeutic substitution program for NDPERS members that targets long-term maintenance medication users for several drug classes. The Generics at Mail program promotes the use of generic and low-cost brand drugs that provide the same therapeutic outcome as more expensive brand drugs and saves your members money. The program typically has two components: letter-based member education followed by phone-based intervention.

Enhanced Customer Service
Enhanced customer service is a key component of PrimeMail's core values for mail order. NDPERS members will continue to receive the best in mail order customer service. PrimeMail customer service representatives (CSRs) are highly qualified, dedicated professionals available 24 hours a day, 7 days a week. NDPERS members have come to rely on knowledgeable CSRs and registered pharmacists who can address any mail service inquiries, including order status and drug-specific information.

PrimeMail recognizes that the growth of mail service as a pharmacy delivery channel creates a parallel need for PrimeMail to enhance value to clients and members. In the face of this pressing reality, Prime continues to invest in new technology and research, and ever-improving methods for putting mail service to the best possible use. NDPERS and your members will continue to benefit from the wide variety of features and benefits offered by PrimeMail.

Convenience
PrimeMail provides safe, convenient, cost-effective home or workplace prescription delivery. Members who require long-term or maintenance medications find the mail service program particularly effective in serving their needs. To this end, PrimeMail offers:

- Secure and HIPAA-compliant ordering, operations, packaging, and shipping that provides members with confidence and peace of mind
- Clear member-friendly communications that ensure ease of use and increase prescription mail service benefit awareness
- Member web sites that provide convenient access to refill ordering, order status, and other health and drug information
- PrimeMail's acceptance of prescriptions through e-prescribing serves as an administrative efficiency for physicians/prescribers as well as helping reduce cost and improve health care delivery of pharmacy benefits; BCBSND and Prime recognize that with mail service pharmacies growing faster than any other delivery channel, the need to enhance value for all audiences is also growing; as such, Prime continues to invest in new technology, research, and ways to best use mail service
- The ability for members to order larger quantities of their medication at one time, depending on benefit design (e.g., 90-day supply through mail vs. 30-day supply at retail)

Consultation
Your BCBSND/Prime Account team will continue to ensure all aspects for your mail program is meeting your overall goals and member needs. By utilizing PrimeMail, you receive the following advantages:

- Consultation on your mail service benefit and UM programs in the context of your overall pharmacy management goals
- Member communication that eliminates confusion and disruption to members and supports your mail utilization goals throughout the life of your program

Accurate and Timely Dispensing
PrimeMail's workflow management system provides enterprise-wide access to all mail service prescription documents throughout the dispensing process. All documents are scanned with the order, including the check and any notes. This ensures no information is separated from the order, allowing PrimeMail pharmacists to ensure the accuracy of each order. This unique feature of the PrimeMail facility also allows CSRs to verify the status of a member's prescription and to answer questions regarding his or her order throughout the dispensing process. PrimeMail delivers new prescriptions more than one day faster than the competition and delivers refills nearly one-half day faster. Ongoing quality measurement of our mail service operational setup and configuration functions reveals consistent dispensing accuracy rates of 99.99 percent.

24. Describe your PBM rebate process. NDPERS is requesting that you provide a rebate guarantee in appendix H.

Prime has arrangements with pharmaceutical manufacturer companies for rebate dollars. Prime receives a rebate management fee from manufacturers for services rendered in connection with rebate contracts, such as performing market share analysis required to calculate rebates and consolidating billing for clients. Prime does not accept any other (direct or indirect) manufacturer funding for clinical programs or research, nor do we maximize rebates at the expense of overall low net cost.

Rebate Calculation: As part of our ASO pass-through proposal, all rebates and the value of manufacturer admin fees will be passed through to NDPERS at 100 percent. Total rebate dollars are comprised of group-retained and member rebate accounts. NDPERS retained rebates are deposited into NDPERs cash accounts.

Prime negotiates rebates on behalf of BCBSND. Prime invoices manufacturers for rebates at the end of each quarter. Manufacturer payment timelines vary by contract, but they range from 30 to 105 days from the date of invoice. A single and final account reconciliation is made within twelve months following the end of the respective quarter. BCBSND remits to NDPERS rebates received from Prime less amounts credited to Member Rebate Accounts. The portion of rebates credited to a member's Member Rebate Account is a representative percentage of the cost share paid by the member on rebate eligible prescription medications. Money accumulated in a Member Rebate Account automatically reduces a member's out-of-pocket expense the next time a covered prescription drug is purchased.

Processing Schedule and Reporting: Rebate deposits are reported in the rebate column of the Calculation of Interest on State Group report and in NDPERs quarterly executive summaries.

25. Describe your methodology for pricing (AWP, AAC, WAC, etc.)? Please explain in detail.

AWP is defined as the price calculated by national reporting services for each drug in the market; Prime uses Medi-Span as the drug pricing source for AWP pricing information.

1.9.1 Formulary

26. Provide details and the capabilities of your organization to provide a formulary that is at a minimum equivalent to and as comprehensive as the current formulary used by the NDPERS program. Provide sample formulary documents.

NDPERS currently utilizes the standard BCBSND/Prime Formulary, which provides members with broad access to safe, medically necessary products. This formulary is a list of medications which represent the current clinical judgment of physicians and other experts in the health care arena. See "Attachment 16 – Drug Formulary."

At a minimum include the following:

- **Describe your policy regarding formulary changes and your procedures for educating and notifying members. Indicate how often the formulary is changed.**

  New drugs slated to be added to the formulary are typically reviewed as soon as possible after market launch, with all new agents reviewed within 180 days of availability on the marketplace. Some drugs may be held for a quarter to be reviewed on-cycle with drugs in the related therapeutic class according to the Prime National P&T Committee.

  The Prime P&T Committee meets quarterly to review and update the Clinical Threshold List. P&T bylaws also permit ad hoc meetings as necessary. The P&T Committee reviews all therapeutic classes annually, with the reviews distributed equally between the four meetings.

Communicating Changes
The best method of formulary communication for all audiences (members, physicians, and pharmacists) is the actual formulary. Members, physicians, and pharmacists can find our formulary at MyPrime.com integrated with BCBSND's web site, www.BCBSND.com. Our web site contains the most current formulary and any changes made to the formulary.

Communicating to Members
BCBSND provides formulary information, including updates about deletions and additions, through www.BCBSND.com. This web site is linked to MyPrime.com, the member pharmacy web site. With the member-directed web site, members have the advantage of using the online formulary search feature to search from the group-level formulary (specific to your benefit design). Benefit-specific information provides members the most accurate formulary status possible.

Communicating to Physicians
BCBSND posts the formulary, and any updates, on our web site. Physicians can also go to Prime's corporate web site, www.PrimeTherapeutics.com, directed at physicians/providers, for updates. In addition, BCBSND provides formulary publications for inclusion in mailings developed for physicians.

Communicating to Pharmacies
Prime Perspective, a quarterly newsletter, is distributed to all network pharmacies. Prime Perspective includes formulary updates, plan announcements, benefit updates, and other information to support claims processing. The newsletter and formulary can also be found on the Prime corporate web site and by going to www.BCBSND.com.

- **Describe how drugs are evaluated for possible inclusion on the formulary.**

  Clinical guidelines are one of several information sources incorporated into Prime's chapter reviews and Clinical Threshold List (CTL) when evaluating drugs for possible inclusion in the formulary. Prime's Clinical department conducts full chapter reviews, then distills the information down to key points for notation in the CTL placement. New drug monographs are also completed for any new to market drugs and incorporated into the chapter review and CTL.

  The methods used to gather data and consider the evidence for the drugs in each chapter review and CTL are the same for all drug classes; Prime's Senior Clinical Pharmacist is responsible for a chapter review and conducts a literature search for new information since the last annual review. This literature is considered based on the following hierarchy:

  - Randomized Clinical Trials (RCTs)
  - Guidelines
  - Systematic reviews and meta analysis
  - Other information including observational studies/case control studies/retrospective analysis, tertiary references, and expert opinion

  Other review considerations include:

  - Guidelines providing direction for drug therapy in a disease state treated with drugs across more than one class are considered for all applicable classes
  - Evidence-based practiced guidelines are favored over consensus practice guidelines as they detail a comprehensive search of the literature, an evaluation of the quality of individual studies, and recommendations supported by the evidence
  - Consensus practice guidelines contain recommendations based on practice or expert opinions that typically do not include the rigor of evidence-based guidelines

- The most current clinical practice guidelines are given the most consideration
- Guidelines reflecting current clinical practice in the United States are favored over guidelines written in foreign countries; where no United States guidelines exist, foreign guidelines may be referenced
- Guidelines written by nationally recognized organizations, government agencies, and specialty groups are favored over guidelines produced by journals, small unrecognized groups, or pharmaceutical manufacturers

- **Describe the basis of your formulary development and maintenance.**

  Formulary decisions are made using an integrated process involving both the BCBSND Pharmacy and Therapeutics (P&T) Committee and Prime's National P&T Committee. Prime's Clinical Department, Pharmacy Trade Relations Department and Product Review Committee thoroughly research formulary considerations (content and composition) before recommendations are made to Prime's P&T Committee. The decisions of the Prime National P&T Committee become recommendations to the BCBSND P&T Committee, which makes final formulary decisions.

- **Provide specific information where a higher cost option of therapeutic equivalent drug has been included in your formulary and provide rationale for doing so.**

  We have a very structured process for formulary development, which ensures decisions are first based on safety, efficacy, uniqueness, and then cost – all clinically superior and comparable drugs are evaluated financially for formulary consideration; drugs considered unsafe or clinically inferior are not considered for formulary inclusion. For those decisions in which cost becomes a consideration, Prime utilizes a net cost modeling tool which helps determine the true cost of a drug product or class of products by taking into account network discounts, utilization, market share projections, and any available manufacturer discounts. Therefore, there may be drugs on the formulary that have a higher AWP than other alternatives when the net cost modeling has demonstrated an overall lower net cost.

- **What is your definition of a Generic Drug?**

  As it relates to our ASO Transparent (Pass-through) proposal, Generic drugs are defined as having a "Y" code in the Multisource Code Indicator on Medispan. Unlike some alternative PBMs, with BCBSND/Prime this definition applies to **not** just claims adjudication but also to discount reconciliation.

  For "illustrative" Traditional pricing, a generic drug is defined as a drug with more than 3 generic manufacturers, and not in an exclusivity period.

- **What is your definition of a Brand Drug?**

  As it relates to our ASO Transparent (Pass-through) proposal, Brand drugs are defined as having an "M, N, or O" code in the Multisource Code Indicator on Medispan.

  For "illustrative" Traditional pricing a brand drug is defined as any drug not considered a generic drug under Traditional pricing.

- **Describe the composition of your review board/committee and how often do they meet and how are they selected to be a member.**

  BCBSND P&T Committee
  There are 9 members of the BCBSND formulary committee, comprised of 3 representatives from BCBSND, 3 practicing physicians, and 3 practicing pharmacists. The practicing physician and pharmacist members are selected based on credentialing and reputation in the community. A BCBSND Medical Director serves as chairperson. The BCBSND representatives are salaried employees of BCBSND. The practicing physicians and pharmacists receive an honorarium for meeting attendance.

Prime P&T Committee
Prime's National P&T Committee is composed of an independent panel of physicians and pharmacists representing diverse geographic locations. Prime's Blues clients, including BCBSND, select their own representative while Prime selects practitioners from highly credentialed specialists representing high-prescribing clinical disciplines. The P&T Committee voting membership must consist of at least 50 percent practicing physicians/pharmacists. Practitioners must spend at least 50 percent of their time in direct care, or be academicians with a clinical focus.

Meetings are held quarterly and annually.

1.9.2 Management of Clinical Programs

27. **Provide information that demonstrates your organization can effectively administer the programs listed below in order to partner the pharmacist, other health professionals and the member to ensure the optimum therapeutic outcomes for our members. Also provide information that demonstrates your organization's ability to promote the safe and effective use of medications, and help our members achieve targeted outcomes.**

    a. **Drug Utilization Reviews (DUR) - retrospective, concurrent and prospective.**

    b. **Disease Management**

    c. **Medication Therapy Management**

Our integrated medical and pharmacy offering delivers programs that coordinate across medical, pharmacy, and health care benefits to achieve better outcomes and lower total cost of care. We are able to work collaboratively (due to aligned incentives, and ability to share data) to understand member needs, and engage the member and physician with information in ways that can lead to improved health outcomes. Our robust suite of clinical programs is described below:

GuidedHealth® Clinical Programs
GuidedHealth is a clinical programs and reporting tool that delivers a suite of innovative, member-focused clinical programs to provide actionable clinical intelligence to physicians and members to improve outcomes and lower overall cost of care. Based on program selection, an inclusive Health Guide is generated that aggregates all drug therapy opportunities at the member level, resulting in fewer, more meaningful contacts for physicians and members. We also have the unique ability to integrate data generated from GuidedHealth to enhance our member and physician engagement strategies.

GuidedHealth directly links our engagements to the achievement of specific health outcomes and total cost of care measures and reports the value of those specific engagements, including pharmacy cost, outcomes, adherence and medical cost avoidance setting a standard for integrated reporting not yet seen in the industry today.

The GuidedHealth clinical programs are available to ASO clients for an additional charge.

How It Works
GuidedHealth's program modules for BCBSND (described below) help physicians, members and NDPERS identify opportunities for better management of pharmacy utilization, resulting in improved member outcomes and overall reduction in health care costs. Program features include:

- A robust intake process for the import of medical, lab and pharmacy claims data in an efficient manner

- A rich workflow application that can manage all of the activities (i.e., develop and send action plans) as well as monitor the results of any interaction

- The ability to send results (e.g., gaps in care) electronically or by letter to physician (program specific) or other host system
- Ability to deliver activity reports and show results including savings, outcomes, adherence and medical cost avoidance setting a standard for integrated reporting

Modules and Program Overview
The clinical programs within GuidedHealth include traditional retrospective drug utilization review (DUR) programs as well as adherence and cost management programs. All programs are developed using evidence-based medicine and nationally recognized drug compendia and guidelines. They have been organized into modules that focus on overutilization, underutilization, drug safety, and cost management opportunities.

Below are some of the clinical programs that are available through GuidedHealth. Additional program detail is provided for select programs as well.

- *Overutilization Module*
  - Controlled Substance Alerts
  - Triple Therapy Alert
  - Psychotropic Polypharmacy
- *Underutilization Module*
  - Asthma Inhaled Corticosteriod Use
- *Drug Safety Module*
  - FDA MedWatch
- *Drug Cost Management Module*
  - Generic Opportunity
  - Preferred Brand Opportunity

Targeted Adherence program
Provided through GuidedHealth is our Targeted Adherence program, which supports drug adherence and improves the quality of care for members. This program incorporates medical claims data that allows identification of members with a chronic disease state (cholesterol, depression, diabetes, hypertension, and respiratory) who are at the highest risk of suffering a future adverse medical event. It is these high risk members that will gain the largest benefit from being adherent to their medications, as supported by the medical literature. These high risk members are assessed for adherence to their current prescription medications for those specific disease states.

Analysis of pharmacy claims data reveals a proportion of days covered (PDC), which provides an accepted measure of whether a member is taking his or her medication on a regular basis based on a number of factors (e.g., prescription fill rates, days supply).

If an adherence issue is identified (i.e. less than 80 percent adherence with medication therapy), the member and/or physician can be sent a targeted letter designed to improve adherence. The goal of this program is to increase appropriate utilization of prescription medications and may result in increased pharmacy spend. However, reporting for this program will also evaluate medical cost avoidance, in addition to adherence rates.

Targeted Gaps in Care Program
Also provided through the GuidedHealth program is the Targeted Gaps in Care program, which encourages appropriate drug utilization in chronic disease states and improves the quality of care for members. Similar to the Adherence program, the Gaps in Care program incorporates medical claims data that allows identification of members with

a chronic disease state (cholesterol, depression, diabetes, hypertension, respiratory, and epilepsy) who are at the highest risk of suffering a future adverse medical event. These high risk members gain the greatest benefit from using medications to treat their condition, as supported by the medical literature. The pharmacy claims of these high risk members are then evaluated to identify members who have a gap in care (i.e., are not currently receiving a recommended medication for their chronic disease state). If a gap in care is identified for a member, their physician can be sent a letter to encourage appropriate medication use. The goal of this program is to increase appropriate utilization of prescription medications and may result in increased pharmacy spend. However, reporting for this program will also evaluate medical cost avoidance, in addition to closure of gaps in care.

Continuity of Care
The Continuity of Care program is designed to supplement existing step therapy programs. The objective of the program is to identify members who have not filled a pharmacy claim for a chronic disease medication subsequent to having a prescription claim reject for failure to meet step therapy requirements. For those members who have failed to fill a prescription for the targeted drug or a suitable alternative, we can provide follow-up outreach to the physician. The goal of the program is to ensure that members are not walking away from therapy due to a step therapy program and to increase the utilization of chronic disease medications as appropriate.

a. Drug Utilization Reviews - retrospective, concurrent and prospective.

BCBSND and Prime offer drug utilization review (DUR) services including retrospective, concurrent, and prospective as described below.

Retrospective Drug Utilization Review
Retrospective drug utilization review (DUR) programs are designed to manage drug utilization and identify potential misuse and abuse. Potential intervention opportunities are identified by reviewing medical and pharmacy claims history for specific aberrant prescribing patterns in targeted diseases such as asthma, depression, and hypertension. Physicians and/or members are then targeted for an intervention to encourage more appropriate utilization.

The retrospective DUR program, rooted in evidence-based medicine and national guidelines, provides enhanced value to clients and members; we offer numerous retrospective DUR programs through our GuidedHealth platform. Multiple programs can be run at the same time and the actionable clinical intelligence can be summarized to the prescribing physician in one “Health Guide” aggregated at the member level. Quarterly reports are provided showing not only the number of drug therapy problems identified, but also the number of engagements and outcomes/savings.

Concurrent Drug Utilization Review
The concurrent DUR program screens prescriptions at the point of sale for potential drug problems. If a DUR edit flags a claim in the claims system, a message is displayed online for the pharmacist to identify the potential conflict before the member receives the medication. Concurrent DUR edits categorize potential interactions by severity, onset, documentation, and if the drugs were dispensed from the same pharmacy and same prescriber. Each of these categories has multiple layers and each combination can be attached to a unique response. This is particularly effective for member interventions.

The pharmacist then explains the message to the member and, if applicable to the benefit design, the prescription is denied for coverage. Most concurrent DUR edits, however, are set as informational only in which pharmacists use their professional judgment in dispensing medication.

Prime complies with NCPDP specifications for online DUR and supports all available Medi-Span concurrent DUR edit modules. Medi-Span classifies drug interaction severity based on drugs. The claims system can store multiple messages for handling edits (i.e., override allowed). Receipt of the messages is based on capabilities of the pharmacy software.

Concurrent DUR Screening Categories
Concurrent DUR edits fall into standard screening categories, under which there are multiple edits based on individual drugs. Edits include:

- **Drug-to-drug interaction** – Checks for interaction between drugs based on the sensitivity level of the interaction
- **Drug –to-gender caution** – Identifies contraindications based on a member's gender
- **Duplicate therapy** – Checks for use of multiple drugs from the same therapeutic category
- **Duplicate prescription** – Checks for ingredient duplications (based on exact Generic Product Indicator)
- **Drug-to-age caution** – Identifies contraindications for specified age groups. A priority level may also be specified based on contraindication
- **Dosage/duration** – Compares the dosage on the claim to the recommended dosage for the member's age group and then determines whether to send a response*
- **Drug regimen compliance** – Checks to make sure the member is not underutilizing a drug. Reviews member claims history to determine if he or she has received the same drug and if he or she is receiving the new refill within a certain number of days since it was last filled
- **Drug-inferred health state** – Determines if the submitted drug or a profile drug conflicts with inferred health state (e.g., pregnancy)
- **Additive Toxicity** – Calculates the daily dose of acetaminophen across all active prescriptions and identifies claims above the FDA maximum dose.

** If a claim exceeds the established threshold of a category, it will be rejected and return a message instructing the pharmacist to verify the quantity or days supply.*

All participating network pharmacies, including PrimeMail, access the same claims system, online and in real time, for concurrent DUR. Whichever pharmacy a member uses that transaction becomes a part of his or her complete profile. Claims are checked against the current and comprehensive profile for each member.

Prospective Drug Utilization Review
We view prospective DUR as a combination of clinical programs for member education and appropriate use of medications. We have many prospective and proactive programs in place to ensure members are on appropriate drug therapy with varying levels of engagement. These include the following programs:

- **Prior authorization** – designed to effectively manage high-cost medications that have an actual or significant potential for misuse, overuse, or inappropriate use and that could be of clinical, economic, or safety concerns (or a combination of these).
- **Step therapy** – takes a "step" approach to providing members a drug to help treat their condition. This means that members may first need to try a first-line drug before coverage is provided for a second-line drug. A first-line drug is usually a generic drug (or preferred brand if generics are not available) and represents a more cost-effective alternative for the member and NDPERs.

- **Quantity limits** – promotes safe and effective drug use and reduce waste by limiting certain prescriptions to a pre-determined quantity limit or duration
- **Concurrent DUR** – provides point-of-sale messaging to the member and pharmacists regarding potential drug problems (e.g. drug disease interaction, high dose, drug-age interactions)

Other strategies focused on ensuring members are taking appropriate medications include:

- **Member education collateral** – online resources and webinars are available for specific drug categories via our web site
- **Formulary management** - our Clinical teams and P&T committee evaluates every drug for our formulary including assessing safety and efficacy

Additionally, our clinical staff continually monitors industry intelligence regarding the most likely scenarios for patent expirations and generic launches; we can help NDPERS anticipate changes to generic utilization rates and identify new program opportunities. Further, we track industry intelligence regarding the most likely scenarios for anticipated new drug releases and OTC switches. We use all of this information to forecast trend and to look for opportunities to change or implement clinical programs.

b. Disease Management

Prime partners with BCBSND to provide pharmacy support to Health Risk Management programs. In addition, BCBSND and Prime's Retrospective DUR program, Adherence Program and Efficiency Program provide components of disease management in order to help increase the quality of life for members. These can be used as stand-alone pharmacy programs or in conjunction with other BCBSND disease management programs.

Retrospective DUR
BCBSND and Prime's retrospective DUR programs identify potential intervention opportunities through medical and pharmacy claims history for specific aberrant prescribing patterns in targeted diseases, including asthma, high cholesterol, depression, diabetes and hypertension. This information is used to target physicians and/or members for an intervention to encourage more appropriate utilization.

Each retrospective DUR is unique and the method used to identify opportunities for intervention depends on the specific goal of the program. Typically, the intervention method is a prescriber mailing. DUR programs are generally conducted on a quarterly basis.

Adherence Program
BCBSND and Prime offer an Adherence Program to support drug adherence and improve the quality of care for members. This program provides standard adherence reporting in the following five drug categories:

- High blood pressure
- High cholesterol
- Depression
- Diabetes
- Respiratory disorders

The program can be expanded to include additional information from medical claims data that allows detection of diagnosed members not receiving therapy.

An analysis of pharmacy claims data reveals a medication possession ratio (MPR), which provides an accepted measure of whether a member is taking his or her medication on a regular basis based on several factors (e.g., prescription fill dates, number of days supply). The Adherence Report then charts client-specific data on the MPR rates of an entire member population taking a particular medication.

The Adherence Report may reveal good adherence, defined as 80 percent compliance or better, among NDPERS members, whereby intervention may not be required. If an adherence issue is identified, the member and/or physician can be sent a targeted letter designed to improve adherence. Adherence reporting and information are sent on a quarterly basis.

Efficiency Program
BCBSND and Prime offer a pharmacy solution to contain costs while preserving quality through the Efficiency Assessment, which uses total health care costs to guide pharmacy benefit management decisions. Using an integrated medical and pharmacy risk stratification tool, an Efficiency Report is produced that stratifies member utilization by risk within each core drug category. This report provides an efficiency ratio with a marker for NDPERS to see the proportion of pharmacy dollars spent to treat high-risk members.

The efficiency assessment provides a single metric demonstrating how efficiently NDPERS is spending pharmacy dollars within the targeted core drug category. Goal number and desired outcomes are tailored specifically to NDPERS. The Efficiency Report and the efficiency ratio metric assist NDPERS in deciding which pharmacy management programs and benefit designs are most appropriate.

Medication Therapy Management Program
BCBSND provides NDPERS with the unique advantage of medical and pharmacy benefit managers working together in ways that a typical pharmacy "carve-out" program does not provide. BCBSND and Prime focus on pharmacy management in the context of total health spend, which means pharmacy is leveraged to positively impact medical outcomes. Understanding total health spend — the inter-relationship between pharmacy costs and medical costs — helps BCBSND better manage NDPERS' benefits.

BCBSND and Prime provide additional data integration for prescription and medical claims through our Medication Therapy Management program (MTM). MTM is defined as taking an active role in supporting members and working with pharmacy providers and prescribers. The proposed program has five major components:

- A clinical rules engine that can apply clinical rules and define gaps in care
- The gaps in care can be stratified into low/medium/high-risk levels
- A rich workflow application that can manage all of the activities (i.e., develop and send action plans), as well as monitor the results of any interaction
- The ability to send results (e.g., gaps in care) electronically or by letter to a provider or other host system
- Ability to deliver activity reports and show return on investment results

28. Does your organization perform retrospective DUR for all claims of a given client? Please provide frequency of retrospective DUR.

Yes, BCBSND's and Prime's retrospective DUR programs work by identifying potential intervention opportunities using all claims. Medical and pharmacy claims history are reviewed for specific aberrant prescribing patterns in targeted diseases. Physicians and/or members are then targeted for an intervention to encourage more appropriate utilization.

Through GuidedHealth, we can perform retrospective DUR on any level of claims as defined by NDPERs. For instance, 85 percent of Prime's book of business utilizes the retrospective DUR program.

Retrospective DUR programs are reviewed as needed, but at least quarterly, by Prime's Clinical department on BCBSND's behalf, for possible changes or enhancements. In addition, the program portfolio is reviewed annually and new programs are added (generally 2-4 per year) and some may be deleted if no longer relevant or if there is lack of use.

29. What is the generic utilization and substitution rate for your overall book of business nationally and in North Dakota?

	2012	2013	2014 YTD
Book of Business			
Generic Utilization Rate	78.3%	80.9%	**82.7%**
Generic Substitution Rate	97.8%	98.1%	**98.2%**
North Dakota			
Generic Utilization Rate	77.7%	80.4%	**82.2%**
Generic Substitution Rate	98.1%	98.5%	**98.5%**

1.9.3 Trend Analysis

30. Your organization must be able to provide NDPERS with a comprehensive, annual trend analysis report as background for making pricing decisions. At a minimum the report must:

a. Contain extensive utilization and drug spend data that presents future trend drivers, both industry wide and specific to our programs.

b. Provide information on the generic pipeline, drug indication changes that may affect drug utilization, specialty drug utilization trends, new drug introductions and other similar trend drivers.

c. Show the impacts of, and provide recommendations for addressing price inflation, rebate performance and other pricing related drivers, in addition to pharmacy network trends and opportunities.

Confirmed. BCBSND and Prime have new reporting that will be available to NDPERS in 4Q 2014. These reports include an executive summary, information on specialty utilization and drug spend, non-specialty utilization, generic utilization, distribution channel information, a ranking report, and a series of summaries. A sample of this Employer Group Report (EGR) package is included as Attachment 17 – Pharmacy Reporting.

All reporting will continue to provide a variety of quarterly and annual reports that outline NDPERS member utilization at both PrimeMail and Prime Specialty Pharmacy for mail order and specialty drug usage, highlighting performance, statistics, and key trends. Your specific goals will be assessed against the metrics contained in these reports, to ensure that all objectives are met.

Group Summary Reports
Group summary reports illustrate NDPERS' plan performance related to cost, ingredient cost, utilization, clinical, and payment trend. Group summary reports include the following information:

- Brand and generic utilization
- Cost, utilization and PMPM amounts
- Basic statistics

- Prescription costs
- Total trend by period cost and utilization components
- Total paid trend
- Top 20 therapeutic classes by drug spend

Additional Report Options
We can also provide you with the following reports depending on your specific needs:

- Member Prescription History
- Top Drugs by Brand Name
- Drug Market Share
- Top Drugs by Label Name
- Top Therapeutic Classes

Benchmark Reports
As we have previously done with other Benchmark Reports provided to NDPERS, we assess the three components that drive trend (inflation, utilization, and drug mix). Our clinical programs are positioned to impact utilization and drug mix while inflation is impacted by programs for retail networks, 90-day utilization, and formulary adherence. Benchmark data is analyzed to assist you in the selection of clinical programs to positively impact trend for all drug spend or by therapeutic category.

Generic Opportunity Reports
With our Generic Opportunity Reports, we can help you analyze current generic utilization, target a specific growth strategy, and map out the benefit plan changes to help to continue to meet your goals. Using a unique predictive modeling tool to identify and prioritize generic potential with each therapeutic category, a Generic Opportunity Report is generated, providing the following:

- Generic drug spend overall
- Generic drug spend by the core therapeutic categories
- Average costs for generic and brand-name prescriptions by category
- Generic target ranges (low, medium and high, by category)
- Estimated potential cost savings by generic threshold (by category and in total)

As you know, generic utilization opportunities can differ significantly by therapeutic category. Ranges for each category are set based on the availability of effective generics combined with the benchmark assessment of many plan sponsors. For many diseases and conditions, several effective generic options exist while few or no generics are yet available for other conditions. The availability of multiple generics in the same category can lower costs even further. NDPERS can continue to select a category or categories for Prime to focus on, of which we will design a strategy to help you move from point A to point B.

Specialty Program Reporting
As you have experienced as a Prime Specialty Pharmacy client, our comprehensive specialty program has a broad array of specialty reports including specialty spend and utilization reports, which provide the critical ability to analyze overall performance and individual components of specialty services.

Examples of specialty reports include the following:

- Demographics for specialty members
- Quarterly spend by benefit
- Total pharmacy and medical spend

- Spend by disease category
- Specialty category trends
- Specialty utilization
- Top 10 prescribers
- Medication adherence

31. Describe your organizations Trend Analysis reporting capabilities. Provide sample reports that reflect your organization's ability to provide thorough trend analysis for NDPERS.

Prime's consulting analytics staff works closely with pharmacists in Prime's Clinical department to produce benchmark statistics and savings reports that are meaningful to NDPERS. By using your claims data, we provide trend reports that include the following information:

- Drug and financial trends against Prime's book of business
- Trends by specific employer groups
- Line of business for cost drivers (e.g., top drugs, top therapeutic classes, most prescribing physicians, highest cost members, etc.)
- Annualized and quarterly trends
- Quarterly ranking by cost, volume, and PMPM line of business
- Open, closed, and tiered formulary/copay design comparison

See Attachment 17 for Pharmacy Reporting.

Pharmacy benchmark data is included in year-end performance reports where it is important to measure key performance statistics at a high level. Prime's trend assessments are clinically informed and include both Traditional and Specialty Trend assessments, focusing on the top therapeutic categories in terms of drug spend and opportunity for change. In addition, any specific drugs of interest can be analyzed.

Prime also publishes an annual report on pharmaceutical industry trends and topics that specifically reports drug trend analyses for Prime's commercial book of business and relevant industry information that is used directly to diagnose your specific trend. Examples of topics provided include key drivers of trend, drug development pipeline, new drugs, patent expirations, affects on high cost therapeutic categories, and modeling of select therapeutic class trends.

The following table identifies examples of year-end performance reports that are available to you as clients of BCBSND and Prime:

Name of Report	Frequency Provided	Purpose of Report
Financial Summary	Quarterly/Year-end	This section includes information for the previous six months on drug ingredient charges, drug ingredient allowances, dispensing fees, subscriber liability, plan paid amount, and plan savings.
PMPM Utilization	Quarterly/Year-end	This graph illustrates the number of prescriptions paid and the dollar amount paid for the previous six months.
Plan Paid PMPM	Quarterly/Year-end	The graph depicts how much the plan paid on a PMPM basis.

Name of Report	Frequency Provided	Purpose of Report
Brand/Generic Drug Utilization	Quarterly/Year-end	This analysis shows you the percentage of multi-source medications being dispensed and breaks them out by generics, physician DAW, and member DAW. We will provide recommendations based on the utilization.
Formulary Compliance Rates	Quarterly/Year-end	This report illustrates your formulary compliance rate over the past six months and provides a clinical summary of high-cost and high-volume prescriptions.
Member Demographic Profile	Quarterly/Year-end	This graph compares the age and gender composition of your plans to the Prime average and shows how your composition affects utilization.
Top 20	Quarterly/Year-end	This graph shows top 20 lists by: ▯ Therapeutic class by volume ▯ Therapeutic class by cost ▯ Brands ▯ Generics

1.9.4 Specialty Drug Program

32. **Describe in detail how your organization will manage specialty and compound drugs based on NDPERS's current plan design. Provide detailed information about your organization's capabilities to administer a specialty drug program. Indicate specific results your specialty drug program has achieved for your current and past clients in terms of reduced program costs (quantitative and qualitative). Include details about the Specialty pharmacy you contract with. Provide your listing of "Specialty" drugs in Appendix D.**

As your specialty drug pharmacy vendor, all components of the Prime Specialty Pharmacy are integrated, providing NDPERS with a convenient specialty pharmacy solution that supports a goal of keeping specialty medicines affordable, delivering a superior member experience, and leveraging unique connections while balancing the real-world financial and logistical considerations affecting you and your members.

Together, BCBSND and Prime have been providing NDPERS with a connected specialty drug management program that focuses on total cost management, clinically-powered decisions, and superior specialty pharmacy and member care. We are proud to continue to provide you with a comprehensive approach to specialty drug management that spans both medical and pharmacy benefits.

Three core capabilities have helped NDPERS receive a solid foundation for your specialty drug management program:

- **Total cost management** – We work across the medical and pharmacy benefit divide with the goal of lowering the total cost of care, not just pharmacy costs. Our integrated model also gives us greater buying power. And we use it every day — along with direct manufacturer contracts — to secure better discounts, and lower ingredient and program costs.
- **Clinically powered decisions** – Our decisions are driven by clinical facts. Our focus is on NDPERS members and we encourage them to take their medicines safely, the way they were prescribed — which leads to better outcomes and greater peace of mind.

- **Superior specialty pharmacy and member care** – Prime Specialty Pharmacy provides NDPERS with a simpler way to get the medicine you need affordably, as well as coordinated care, specialized education and access to experts any time, day or night.

In addition, BCBSND and Prime continue to focus on specialty drug costs across the medical and pharmacy benefit, providing the following value:

- Improved member safety, adherence; better health outcomes
- Coordination of care across member, doctor, pharmacist and care teams
- Education and support to manage condition that promotes better health, reduced absences and improved employee productivity
- Affordable medicine and lower out-of-pocket costs
- Reduced prescription-related doctor burden, making it easier for doctors to provide care
- Eco-friendly packaging that costs less to mail, ship and store, and regulates temperature better than foam packaging
- Decisions that are grounded in clinical research
- Consultation from reputable clinical experts
- Improved safety and adherence and better health outcomes
- Better discounts, lower ingredient cost and program costs
- Direct contracts with rebate manufacturers
- Access to limited distribution drugs

We have included a Specialty Drug Fee Schedule in Appendix D2.5

Specialty Pharmacy Achievements – Savings
In 2013, Prime realized nearly $400 million in savings related to Specialty Drug classes via programs and services, when looking across our commercial book of business. On behalf of their Blue plan clients like BCBSND, Prime is able to recognize and quantify savings from utilization management programs, manufacture revenue and specialty pharmacy discounts for each specialty category, including the following: Autoimmune, Multiple Sclerosis, Growth Hormones, HIV, Cancer-Oral, Hepatitis C, Pulmonary Hypertension, Fertility & Pregnancy, Hemophilia, Immune Globulins, Anticoagulants, Blood Modifiers, Nausea & Vomiting, Lung Disorders, Cystic Fibrosis, Enzyme Deficiencies, Visco Supplements, Cancer-Injectables, and other high cost drugs.

Prime tracks and reports savings from utilization management programs (prior authorization, step therapy, quantity limits) by assessing the ongoing (post-implementation) differences between plan-paid costs, PMPM costs, and utilizing members, and comparing these with baseline (pre-implementation) and benchmark data for the specific drugs involved in the UM program.

In addition, Prime Specialty Pharmacy was recently given an honorable mention by Specialty Pharmacy Solutions for its coupon/patient assistance program (PAP) optimization program which saved $21.2 million in member costs in 2013. For the benefit of both the member and the client, we believe that including coupon/PAP optimization is an important part of our specialty drug management services.

Specialty Pharmacy Achievements – Positive Clinical Outcomes
An example of a successful return on investment for NDPERs is the joint effort of BCBSND and Prime Specialty Pharmacy's Oral Oncology Management Program. This has provided a higher level of member care for NDPERS members than other programs on the market through a split fill program focused on high-cost therapies that are poorly tolerated. When therapy begins, the member will receive a partial fill, (typically 16 days of a 28 day

cycle) with a pro-rated cost share amount. Before completion of the partial fill, the clinical team engages with the member to assess tolerance and continued course of treatment. If there are serious side effects, an alternative plan of action is coordinated along with the physician, improving outcomes, preventing waste and avoiding unnecessary costs for the member and the plan.

Additionally, care management services identify members at risk for depression. Depression is recognized as a predictor of overall outcomes and our nurse assessments identify members at risk. Once identified, the care managers notify the health plan for further assessment. Program benefits include:

- **Optimized member and clinical management** – Through clinical protocols that are executed at pre-determined intervals during the member's medication therapy, adverse events are recognized early, and NDPERS members are provided access to valuable clinical support between physician visits to address therapy adherence issues including regimen compliance and persistency.
- **Enhanced physician support** – It is not uncommon for physicians to have concerns about a member's ability to take oral oncology medications as prescribed, recognize a medication side effect, or seek medical attention when experiencing an adverse reaction. This program offers supplemental clinical expertise and enhanced communication with physicians throughout the member's medication regimen. Physicians are contacted when required by protocol focusing on member adherence, adverse reactions, or side effects experienced. Details including the Medication Possession Ratio (MPR) while the member was on therapy, interventions performed, and the date that therapy was started (and discontinued) can also be provided.

Compound Drug Management
Prime has been at the forefront of compound drug management, including presentations at different industry fraud groups over the past couple of years. Since February 2013, pharmacy credentialing practices have been enhanced and, throughout 2014, clients have been closely advised on benefit design options that have led to a significant reduction in compound costs.

Compound Drug Pricing Process
Compound drugs are priced online at the point of sale and in compliance with HIPAA transaction standards known as D.0 from CMS and NCPDP. With D.0, each ingredient has to be submitted in the claim, allowing up to 25 ingredients per compound claim.

By using multiple ingredients, the claims system considers all submitted ingredients and associated costs when processing and pricing the claim. Processing compound drugs as multiple ingredients also allows greater precision in determining what is covered. For example, a compound drug that contains ingredients in which the FDA has evaluated as less than effective, the claims system can deny a compound drug that contains such an ingredient. The compound claim is then reimbursed at the negotiated contract rate for compound medications.

In addition, to ensure costs are not inappropriately inflated, we offer NDPERS members a compound management strategy with the following additional levers:

- **Strong network credentialing:** we contract with and hold retail network pharmacies to high standards, including credentialing criteria and NCPDP national claims processing standards as well as compliance with state and federal laws.
- **Compound pricing compliance:** this is measured through the comprehensive pharmacy audit program, which includes a daily (pre-payment) claims review, quarterly audit profile, on-site audits, and desktop audits. In addition, pricing of compound drugs is reviewed during quarterly claims profile audits.

- **Benefit strategies:** We will continue to work with NDPERS on specific benefit strategies to best meet your needs; for example, a "reject" list.
- **Claims system edits:** Several claim system edits are in place to ensure each compound claim is priced correctly and does not exceed cost limitations. In addition to basic benefit exclusions (e.g., cosmetic drugs, etc), there are also certain classes of drugs that will not be covered as part of a compound including but not limited to opioid pain medications, erectile dysfunction medications, antibiotics, weight loss agents, and anticoagulants. We also have back-end audit processes in place to review compound claims. All compounds may be subject to review and approval.

1.9.5 Network Accessibility and Disruption

33. How are pharmacies selected for inclusion in your network? Would your organization be willing to contract with additional pharmacies if there are geographic locations where participants live but which do not have access to one of your pharmacies?

Pharmacies are considered for inclusion in our network in several ways. For instance, NDPERS and your members can request network pharmacy additions by contacting your BCBSND Account team or by sending an email through MyPrime.com.

Prime also receives requests for pharmacy additions from various other sources including:

- Non-participating pharmacies
- Prime's analysts who identify a non-participating pharmacy that has significant utilization for NDPERS. We identify these particular pharmacies for solicitation into the network by matching Quest Analytics Suite (Geo) graphical locations of NDPERS members with available pharmacies that are not yet participating
- Prime utilizes the NCPDP pharmacy database to identify any newly opened pharmacies nationally.

Once identified for possible addition to the network, Prime sends the pharmacy an application within two business days. The application requests the pharmacy to complete the following steps:

1. Complete the credentialing application
2. Provide copies of current DEA license, state pharmacy license, location information, insurance coverage, and pharmacist's license(s)

The completed credentialing application is verified by the Credentialing staff and if the pharmacy meets the credentialing criteria, a Pharmacy Participation Agreement is sent to the pharmacy.

Once an agreement is in place, the pharmacy is typically added within five to seven business days of receiving an executed contract. Once a pharmacy is contracted, the pharmacy is provided with a Pharmacy Provider Manual (also available on Prime's corporate web site for pharmacies). The manual contains policies, procedures, and expectations of network pharmacies.

34. Indicate which major chain stores are not included in your proposed network for NDPERS.

Not applicable. All major pharmacy chains are included in our broad, national network, utilized by NDPERS.

1.9.6 Medicare Part D

Prime is able to provide Medicare Part D services; however, this bid is specifically geared toward commercial members, therefore the questions below in section 1.9.6 are not applicable.

35. **Describe the ability of your organization to provide Medicare Part D coverage for Medicare eligible retirees enrolled in the NDPERS group health insurance program. Identify any subcontractor that would be used to provide Medicare Part D coverage to the NDPERS Medicare eligible retirees and note that NDPERS reserves the right to approve the subcontractor. Also identify what type of plan would be used (e.g. 800-Series EGWP, Direct-Contract EGWP).**

    Not applicable. Prime is submitting a proposal response for the NDPERS commercial population only.

36. **How many EGWP plans does your firm manage?**

    Not applicable. Prime is submitting a proposal response for the NDPERS commercial population only.

37. **How many members participate in the EGWP plans that you service?**

    Not applicable. Prime is submitting a proposal response for the NDPERS commercial population only.

38. **Describe how Out Of Pocket ("OOP") and True Out Of Pocket ("TrOOP") expenses are applicable to EGWP PDP Participants for 2014 and the differences, if any, that can be expected in 2015 and beyond.**

    Not applicable. Prime is submitting a proposal response for the NDPERS commercial population only.

39. **Describe your understanding of the restrictions placed on EGWP + Wrap plans by CMS.**

    Not applicable. Prime is submitting a proposal response for the NDPERS commercial population only.

40. **Please describe the Part D enrollment process under your PDP: Are you able to automatically group-enroll members into Medicare Part D?**

    Not applicable. Prime is submitting a proposal response for the NDPERS commercial population only.

41. **Please describe your Part D disenrollment process for both voluntary and involuntary disenrollments.**

    Not applicable. Prime is submitting a proposal response for the NDPERS commercial population only.

42. **Please describe the Part D enrollment process under your PDP: Are there differences for members who "aged in" to Medicare while enrolled in your plan, and members who are Medicare-eligible when they first enroll in your plan?**

    Not applicable. Prime is submitting a proposal response for the NDPERS commercial population only.

43. Describe the changes in the plan design described herein, if any, that would be required to maximize collection of all available subsidies, reinsurance, discounts or rebates.

Not applicable. Prime is submitting a proposal response for the NDPERS commercial population only.

44. Describe your systems capabilities that allow coordination of benefits between Medicare Part D and a "wrap-around" plan at the point of sale. How is this handled for members who are enrolled in another Medicare Plan with a different PDP?

Not applicable. Prime is submitting a proposal response for the NDPERS commercial population only.

45. How often do you review the formulary under your Medicare plans?

Not applicable. Prime is submitting a proposal response for the NDPERS commercial population only.

46. Describe your handling of members who are eligible for the low income subsidy available under Medicare Part D, specifically: How are the members identified, and how are they informed of their enhanced benefits?

Not applicable. Prime is submitting a proposal response for the NDPERS commercial population only.

47. Describe your handling of members who are eligible for the low income subsidy available under Medicare Part D, specifically: How are these members reported to the plan sponsor?

Not applicable. Prime is submitting a proposal response for the NDPERS commercial population only.

48. Describe your handling of members who are eligible for the low income subsidy available under Medicare Part D, specifically: How often are premium refunds issued to the plan sponsor?

Not applicable. Prime is submitting a proposal response for the NDPERS commercial population only.

49. Provide a copy of the proposed GWP formulary.

Not applicable. Prime is submitting a proposal response for the NDPERS commercial population only.

50. Describe the processes to collect funding from the following sources the EGWP PDP, including the timing and frequency with which such funds would be submitted to PERS.

- **a. Direct Subsidy**
- **b. Coverage Gap Discount Program**
- **c. Catastrophic Reinsurance**
- **d. Low Income Cost Share Subsidies**
- **e. Low Income Premium Subsidies**
- **f. Manufacturer Rebates**

Not applicable. Prime is submitting a proposal response for the NDPERS commercial population only.

1.10 PBM Financials

51. **Bidder confirms the use of Medispan or another nationally available and nationally recognized reporting service of pharmaceutical drug information in determining the classification of drugs (e.g. legend vs. over the counter, generic vs. brand, single source vs. multisource) for the purposes of plan adjudication and the calculation of discount and rebate guarantees.**
    a. **Confirmed**
    b. **Not confirmed, see explanation**

    Confirmed.

52. **Bidder confirms that the discount guarantees proposed represent Medi Span/ First Databank post-settlement pricing.**
    a. **Confirmed**
    b. **Not confirmed, see explanation**

    Confirmed.

53. **Bidder confirms that for the purposes of reconciling guarantees, proposed AWP discount will be applied to each claim individually and shall not mean "Average AWP" nor "Effective AWP"**
    a. **Confirmed**
    b. **Not confirmed, see explanation**

    Confirmed. All pharmacy guarantees are reconciled annually and applied in aggregate rather than at the individual claim level.

54. **Bidder confirms Zero Balance Due claims will be reconciled at the guaranteed AWP component discount and shall not be counted as AWP-100%**
    a. **Confirmed**
    b. **Not confirmed, see explanation**

    Confirmed.

55. **Bidder confirms members will pay the lowest of the copay, "Usual and Customary" (U&C), or discounted ingredient cost plus dispensing fees at retail/mail.**
    a. **Confirmed**
    b. **Not confirmed, see explanation**

    Confirmed.

56. **Bidder confirms that specialty pricing will include ingredient cost discounts by drug with a minimum effective discount guarantee for all brand specialty drugs and a minimum effective discount guarantee for all specialty generic drugs.**
    a. **Confirmed**
    b. **Not confirmed, see explanation**

    Not Confirmed. Specialty pricing for claims fulfilled through Prime Specialty Pharmacy will be guaranteed at an NDC 11 level, based on the attached fee schedule and NDPER election of exclusive or non-exclusive Specialty fulfillment through Prime Specialty Pharmacy. Specialty claims fulfilled within the retail network will be processed based on the contracted rate with the member selected pharmacy provider.

As an alternative Specialty pricing arrangement, BCBSND has provided the flexibility of offering an aggregate specialty guarantee with NDPER election of an exclusive specialty pharmacy arrangement through Prime Specialty Pharmacy. Details of this alternative specialty pricing guarantee are detailed in Appendix K.

57. Bidder confirms that pricing for Specialty Drugs added to the list on or after the date the proposal is submitted will not automatically default to a minimum discount in the therapeutic class.

a. Confirmed

b. Not confirmed, see explanation

Not confirmed. BCBSND and Prime do not typically provide guarantees for new specialty drugs that enter the market as these are dependent on pharmacy negotiations. Any new specialty drug that comes to market and is dispensed from Prime Specialty Pharmacy will be priced at a standard default rate until Prime has negotiated a different rate (which happens when the drug is added to the specialty list).

58. Bidder confirms that generic discount guarantees include the combined MAC and non-MAC pricing

a. Confirmed

b. Not confirmed, see explanation

Confirmed.

59. Bidder confirms retail and mail discount guarantee calculations should exclude specialty/biotech drugs, compound drugs, and vaccines.

a. Confirmed

b. Not confirmed, see explanation

Confirmed.

60. 60. Bidder confirms that overages in any financial guarantee may not be used to offset any shortfalls in another financial guarantee. This includes guarantees within the same delivery channel (e.g.: surplus in retail brand discount will not be used to offset shortfall in retail generic discount)

a. Confirmed

b. Not confirmed, see explanation

Not confirmed. Guarantees will be reconciled annually and applied in aggregate.

61. Bidder confirms that dispensing fees proposed are per claim maximums and not averages.

a. Confirmed

b. Not confirmed, see explanation

Confirmed. For illustrative Traditional (Spread) pricing arrangements, dispensing fees proposed are per claim maximums and not averages. Alternatively, pass through offers are characterized by dispensing fees that can vary from pharmacy to pharmacy and between claims. Pass-through dispensing fee guarantees are representative of effective averages.

62. Bidder confirms proposed financial guarantees are not tied to aggregate days' supply utilization at retail or mail (e.g., rebates will not be impacted if the aggregate retail day supply at the end of the reconciliation period is 23 days instead of 30 days).

a. Confirmed

b. Not confirmed, see explanation

Confirmed.

63. Bidder confirms that after two years of the contract, PERS will have the right to solicit pricing from the market. Should the results indicate a 2% improvement opportunity; PERS will have the opportunity to re-negotiate pricing.

a. Confirmed

b. Not confirmed, see explanation

Confirmed.

64. Bidder confirms postage increases will not be passed on to PERS.

a. Confirmed

b. Not confirmed, see explanation

Confirmed.

65. Bidder confirms that MAC pricing will be applied to generics dispensed at mail.

a. Confirmed

b. Not confirmed, see explanation

Confirmed.

66. Bidder confirms proposed MAC list includes minimum of 95% of all generic drugs.

a. Confirmed

b. Not confirmed, see explanation

Not confirmed. The MAC list is not maintained to ensure a threshold of drugs. BCBSND and Prime have criteria that a drug must qualify before it will be added to the MAC list. Nearly 93 percent of generic claims processed on the pharmacy claims system will be subject to MAC pricing.

67. Bidder confirms that only one (1) MAC list will be used for PERS at retail and mail.

a. Confirmed

b. Not confirmed, see explanation

Confirmed.

68. Bidder confirms that drug status as "Multi-Source Brand", "Single-Source Brand", "Brand Drug with Generics", and "Generic" will be used based on Medi-Span indicators.

a. Confirmed

b. Not confirmed, see explanation

Confirmed.

69. **Bidder confirms that all "Generic" drugs will be included in the "Generic Discount Guarantee" for purposes of guarantee reconciliation (this includes all "Single-Source Generics", generics with limited availability, and generics that are subject to patent litigation).**

    a. **Confirmed**

    b. **Not confirmed, see explanation**

    Confirmed. As it relates to our ASO Transparent (Pass-through) proposal, BCBSND and Prime confirm that all "Generic" drugs (Single source, dual source, tertiary source, etc) will be included in the "Generic Discount Guarantee" for purposes of guarantee reconciliation. Any drug determined to be in short supply based on published sources (including the FDA and ASHP websites) will be excluded from our guarantee. Also, unexpected generic launches, and products launched at risk or under patent litigation are excluded from our guarantees.

    For "illustrative" Traditional pricing a generic drug is defined as a drug with more than 3 generic manufacturers, and not in an exclusivity period.

70. **Bidder confirms they are currently certified by CMS as an EGWP Administrator**

    a. **Confirmed**

    b. **Not confirmed, see explanation**

    Not applicable. Prime is submitting a proposal response for the NDPERS commercial population only.

1.11 Economy to be affected

71. **Please indicate if you will have an office in North Dakota and where most of the work on this contract will be done?**

    BCBSND is headquartered in Fargo, ND. Most of the work for this contract will be done in our home office. In addition, we have eight regional sales and service offices throughout the state that are available to NDPERS members as needed.

72. **Please identify the number of employees you will employ in North Dakota pursuant to this contract.**

    BCBSND employs over 800 employees in the state of North Dakota to service our 500,000 members. NDPERS represents over 62,000 of our members or about 12 percent of our book of business.

73. **Of your total administrative fee please estimate the amount that will be spent in North Dakota and the amount that will spent outside the state.**

    BCBSND does provide account management and limited customer service through our North Dakota based employees, 60% remains in ND. With 40% of the work specific to the Part D program being done outside of the state of North Dakota. .

1.12 Fiduciary Responsibility

74. **Confirm your organization will assume full fiduciary responsibility for claim determination.**

    Confirmed

    BCBSND will serve as the claim fiduciary for this Self Funded Agreement.

Appendix L:
PBM Questionnaire – CVS Caremark

Appendix L:

PBM Questionnaire – CVS Caremark

Please refer to Attachment 22.

Due to size please refer to Electronic CD for:

- CVS/Caremark's SSAE 16 under file name – SSAE16 Report (04-01-2013 to 03-31-2014).pdf
- CVS/Caremark's Annual Report under file name – CVS+Caremark=2013+10-K=Report.pdf
- CVS/Caremark's Formulary Drug List under file name – Formulary+drug+List+01012015.pdf

In order for your proposal to be considered and accepted, your organization must provide answers to the questions presented in this section. Each question must be answered specifically and in detail. Include both the question and the answer in your proposal response. An electronic copy of this questionnaire has been provided to facilitate your response.

Reference should not be made to a prior response unless the question involved specifically provides such an option. Proposers should refer to the earlier sections of this RFP before responding to any of the questions, to ensure that you have a complete understanding of the requirements with respect to your organization's proposal.

Vendors may include additional information that you consider relevant or useful to NDPERS. However, responses to all of the questions set forth below must be provided.

NDPERS is interested in evaluating financial arrangements based on the traditional approach to PBM pricing and pricing under a transparent arrangement. "Traditional" financial proposals should include guaranteed effective rate discounts, as well as specific fees and guaranteed rebate dollar amounts. "Transparency" for purposes of this Request for Proposal is defined as a full pass through to NDPERS of all monies paid to the PBM arising from all contracted arrangements. **When answering questions and completing exhibits related to your financial proposal, please indicate if your answer would differ under a transparent or a traditional pricing arrangement.** NDPERS will give greater preference to transparent proposals.

If this proposal results in your company being awarded a contract and if, in the preparation of that contract, there are inconsistencies between what was proposed and accepted versus the contract language that has been generated and executed, any controversy arising over such discrepancy will be resolved in favor of the language contained in the proposal or correspondence relating to your proposal. Vendors are reminded that **any and all deviations must be clearly identified and described in the RFP and the deviations worksheet provided in Appendix F.**

The questionnaire is broken down into the following 10 (ten) categories:

- Organizational Background, Strength, and Experience
- Implementation and Account Management
- Communications and Website
- Plan Administration
- Eligibility
- Customer/Member Service
- Claims Administration
- Reporting
- Case/Utilization Management
- Health Risk Management and Wellness Programs
- Provider Network
- Performance Standards and Guarantees
- Pharmacy Benefits Management Services
- Financials

1.1 Organizational Background, Strength, and Experience

1. **Provide a brief description of your organization:**

   a. Include your company history, organizational structure, services provided, location of headquarters, and length of time you have been in business.

   CVS Health is a pharmacy innovation company that has grown into a Fortune 12 corporation and become the largest integrated provider of prescriptions and pharmacy care in the United States. We have been providing pharmacy benefit management (PBM) services since 1969 via our CVS/Caremark division. Today we serve more than 2,000 clients and their members across all 50 states, Puerto Rico, and the Virgin Islands. Through mail, retail, and specialty distribution channels, we administer programs for a diverse client base, including corporations, managed care organizations, insurance companies, government entities, unions, third-party administrators, and other organizations.

   The following table details key highlights in our history.

CVS HEALTH PBM MILESTONES				
1969-1970s-1980s	1969: Pharmaceutical Card System (PCS) is founded in Scottsdale, Arizona, effectively launching the pharmacy benefit management industry	1978: Baxter Healthcare Corp. pioneers the concept of home infusion for hemophilia patients	1986: A division of Baxter, Caremark opens its first mail service pharmacy in Lincolnshire, Illinois	1987: PCS launches the first online, real-time prescription claims adjudication system
1990s	1992: Caremark spins off from Baxter, develops its own formulary, and introduces Clinical Intervention Programs	1993: PCS distributes the first annual "Clinical Formulary and Prescribing Guidelines" to 385,000 physicians	1995: Caremark launches disease management program	1999: Caremark initiates online prescription refills
2000-2009	2000: Advance Paradigm purchases PCS Health Systems, and the two companies combine to become AdvancePCS	2004: AdvancePCS merges with Caremark Rx, Inc. becoming the second largest PBM in the nation	2007: CVS Corporation and Caremark Rx, Inc. merge, creating the nation's premier integrated pharmacy services provider, CVS/caremark	2008: CVS Caremark Corporation acquires Longs Drug Stores Corporation ("Longs"), which includes Longs' retail drugstores and its Rx America subsidiary

CVS HEALTH PBM MILESTONES				
2010-Present	2011: CVS Caremark purchases the Medicare Part D business of Universal American	2012: CVS Caremark acquires the standalone PDP business of Health Net	2014: CVS/caremark acquires Coram, a specialty home infusion company	2014: CVS Caremark Corporation changes its name to CVS Health and implements nationwide smoking cessation programs.

Retail Network Offering

Our retail network offering provides added convenience to members, by giving them the option to obtain their prescriptions at pharmacies nationwide that currently participate in the CVS/caremark National Network. Additionally, we provide unique services via CVS/pharmacy locations via our Maintenance Choice offering. Our network options provide online, real-time drug utilization review and are managed by CVS/caremark and our networks are designed to balance pharmacy access and client savings.

Mail Service Offering

Our mail service pharmacies and support facilities operate in unison to process and deliver your members' prescription medications as seamlessly and quickly as possible. Our technologically advanced mail pharmacies run in an automated, paperless environment with efficiencies that allow dispensing and shipping from the facility most appropriate for NDPERS members based on several factors, including most efficient prescription order processing time and proximity to a member's desired shipping destination (allowing for a reduced total transit time).

Governed by comprehensive quality assurance standards and Total Quality Management practices, each CVS/caremark mail service processing pharmacy screens every order to identify possible drug interactions or allergies and to promote clinical drug safety and appropriate use. Computerized edits verify member eligibility and plan design compliance. Members will benefit from reduced out-of-pocket expenses; timely prescription delivery; simplified order and refill procedures, with toll-free assistance available from CVS/caremark Customer Care Representatives Registered Pharmacists are available 24 hours a day to answer any questions members may have regarding their prescribed medications.

CVS CAREMARK SPECIALTY PHARMACY

In 1978, CVS Caremark Specialty Pharmacy pioneered the concept of home infusion for hemophilia patients and then we expanded these services to encompass specialized management for more than 70 specialty disease states. We take a high-touch, personalized approach to help improve health and reduce total costs for our clients. We focus on the specific needs of each member and emphasize early intervention, prevention of complications, and management of drug utilization and compliance. These activities are supported by 7,300 staff specialized to support these complex therapies, and our CareTeam model which includes pharmacists, nurses, and dieticians.

Members nationwide receive services provided by our network of specialty pharmacies, access to 7,600 CVS/pharmacy stores nationwide, and availability of our ambulatory infusion suites. We have worked hard to create high-quality, innovative specialty pharmacy services to help maximize control over cost drivers now and into the future. We take into account the entire picture of specialty spend, regardless

of the benefit, site of service, or distribution channel to help each client manage their specialty spend across pharmacy and medical benefits. This includes PBM-like capabilities and management for drugs under the medical benefit, support for all infusion needs via Coram CVS/specialty infusion services, and enhanced nursing services to support comorbidities.

Location

CVS Health's headquarters are located at:

- One CVS Drive
  Woonsocket, Rhode Island 02895.

b. Include the number and type (governmental or private) of clients, the total number of eligible employees, and the total number of actual participants that your company currently serves.

In 2014, we cover more than 2,000 clients and provide prescription benefit services to nearly 65,000,000 lives.

Segment	Clients	Lives
Self-insured employers (Non-TPA Coalitions)	880	11,170,000
Federal Government	10	6,370,000
State and Local Government	25	2,990,000
Union Trusts	185	1,720,000
Coalitions & TPAs	700	7,680,000
Employer Subtotal	**1,800**	**29,930,000**
Managed Care Non-Medicaid (health plan)	145	15,650,000
Medicare Advantage and/or PDP	42	6,800,000
Medicaid	90	12,450,000
TOTAL	**More than 2,000 clients**	**Nearly 65,000,000**

c. Describe any significant historical or future organizational developments (acquisitions, mergers, change in subcontracted vendors, etc.).

CVS Health does not anticipate any changes in our organization's basic ownership structure. As a publicly traded company, CVS Health is required to disclose in its filings with the Securities and Exchange Commission ("SEC") any planned changes in the ownership. CVS Health's SEC filings can be found at http://investors.cvshealth.com/financial-information/sec-filings.aspx.

2. **Vendors responding to this RFP must be able to substantiate their financial stability. Provide a copy of your audited financial statement or other financial information. Include, at a minimum, a Balance Sheet and a Profit and Loss Statement, together with the name and address of the bank(s) with which you conduct business and the public accounting firm(s) that audit your financial statements. Other sufficient information may include a written statement from a financial institution confirming the creditworthiness and financial stability of the vendor.**

Please refer to CVS Health's 10-K, which details our financial stability in Attachment 22.

CVS/caremark's bank reference is:

Bank of America Merrill Lynch

Darryl B. Heath AVP, Dedicated Service Director

100 West 33rd Street

New York, NY 10001

Email: darryl.b.heath@bankofamerica.com

Office: (888)-715-1000, Ext. 3-5813

Fax: (404)-532-3151

CVS Health's 2013 10-K was audited by the Independent Registered Public Accounting Firm Ernst & Young.

Please refer to CVS Health's 10-K, which details our financial stability in Attachment 22 – Annual Statement.

3. **Provide a copy of any State or Federal regulatory audit performed within the last two years.**

   CVS/caremark's SSAE 16 (formerly SAS 70) review takes place twice per year, the first covers the 12 months ending on March 31, and the second covers the 12 months ending September 30.

   A copy of the report has been provided in Attachment 22. This report includes a confidentiality agreement, which must be accepted in order to view.

4. **Confirm that your organization agrees to be accountable for everything stated in and submitted as part of your proposal, even if not specifically addressed in the Minimum Contract Provisions in Appendix 1**

   BCBSND is accountable for everything stated in and submitted as part of our proposal, even if not specifically addressed in the proposed sample minimum contract provisions.

5. **Indicate whether your company has ever been or is currently a party to litigation regarding a pharmacy benefit plan contract or agreement. If so, provide details of the litigation or action. Failure to disclose this may constitute grounds for rejection of any proposal or termination of any contract.**

   Legal actions involving CVS Caremark include, without limitation, business disputes, contract disputes, employment disputes, and professional liability claims. We have included our 2013 10-K in Attachment 22 – Annual Statement which details any material litigation matters or investigation(s) of CVS Caremark.

6. **State whether the vendor, its officers, agents or employees, who are expected to perform services under the NDPERS contract, have been disciplined, admonished, warned, or had a license, registration, charter, certification, or any similar authorization to do business suspended or revoked for any reason.**

   Legal actions involving CVS Caremark include, without limitation, business disputes, contract disputes, employment disputes, and professional liability claims. We have included our 2013 10-K in Attachment 22 – Annual Statement which details any material litigation matters or investigation(s) of CVS Caremark.

7. **Include a description of your organization's major short term strategic initiatives and your long term strategic business plan. Specifically address cost containment efforts.**

   The health care landscape is changing rapidly, and we recognize the need to continually invest in an advanced operating environment to be ready for the demands of this dynamic environment. This is why CVS Health invests approximately $2.0 billion per year across

the enterprise in new retail stores, company operations, technology and programs. Recent examples of investments in the PBM include: our new state of the art mail service facility, technology enhancements, and other innovative programs.

As a company that is ranked 12th on the 2013 Fortune 500 List, our corporate investment strategy also contemplates the health care evolution, which is why we continue to make significant investments in the following areas:

- **Unlock the value of adherence.** Our investments in clinical capabilities, including our Pharmacy Advisor Counseling program, have enabled us to improve member health and lower total costs for our customers. While this value is an integral part of our proposal to NDPERS, we believe we have only begun to unlock adherence-related value for our clients, and continue to invest accordingly.
- **Extend our specialty capabilities into the medical benefit.** Our specialty capabilities have been highly effective in helping our clients manage specialty drug spend while promoting medication persistency for members.
- **Connect and engage physicians.** In conjunction with our clinical programs, we are making complementary investments to support physician engagement and to encourage industry-wide connectivity that makes the right member-specific information available to the health care provider for evaluation and action.
- **Engage members through digital strategies.** We continue to invest in digital capabilities to better engage members, utilizing our enterprise-wide member touch points.
- **Establish a seamless experience for clients and members.** Our aim is to create a seamless experience, helping to ensure that clients and members receive exceptional service from implementation through benefit access and reporting.

B. Unlocking the Full Value of Adherence

Our prior investments in clinical capabilities, including our Pharmacy Advisor solution, have enabled us to improve member health and lower total costs for our customers. This value is an integral part of our proposal to NDPERS. However, we believe we have only begun to fully unlock adherence-related value for our customers, and we continue to invest in the following ways:

1. Develop advanced analytic and predictive modeling capabilities to better target members with the most impactful outreaches for adherence improvement
2. Expand the channels through which we deliver adherence messages to members (e.g., MinuteClinic, non-CVS pharmacies) and broaden the types of messages we can deliver to the member on your behalf (e.g., pharmacist counsel to a member with diabetes who is missing HbA1c test)
3. Utilize devices to support member compliance to their regimes
4. Integrate communications to physicians and their offices as an additional influence point on the member
    a. Connect insights and real-time pharmacy data back to physicians for more informed decisions

- Investigate new methods to overcome adherence barriers (e.g., script synchronization, simplified medication packaging; technologies for 24/7 monitoring); several options are being piloted with expected deployment in the next two years.

We expect that these and other adherence initiatives will enable us to dramatically increase the savings we can deliver to NDPERS.

D. Expanding Our Specialty Capabilities

Managing specialty drug spend is one of the biggest challenges for our clients today and this challenge will increase over the next 3-5 years. **Our specialty capabilities have been highly effective in helping our customers manage specialty drug spend** while promoting medication persistency for members.

We recognize that specialty drugs remains one of the fastest growing segments of spend for our clients. CVS Caremark Specialty Pharmacy has the specialty experience and integrated assets to continually build and deploy solutions that help contain costs, improve access, and utilize technology across the pharmacy benefits for our clients and their members.

E. Utilizing Channel Access for Specialty Medications

We are utilizing the assets of both CVS/pharmacy and CVS Caremark Specialty Pharmacy to offer our clients a coordinated specialty delivery model that is unique in the industry. This model will enable specialty prescriptions to be accepted at CVS/pharmacy, offering convenience for both members and physicians. In addition, members **will have the choice** of picking up their prescription at a CVS/pharmacy or having the prescription delivered to their home. Physicians also are able to utilize existing relationships with a local CVS/pharmacy making it easier for them to prescribe the appropriate medication without the hassle of dealing with multiple pharmacies.

F. Connecting and Fully Engaging Physicians

As we look to reinvent pharmacy in order to influence member behavior change and to encourage evidence-based, cost-effective pharmacy care, we are acutely aware of the critical role that physicians, nurse practitioners, pharmacy professionals and supporting staff play in ensuring good member care. In conjunction with our clinical programs, we are making complementary investments to support physician engagement and to encourage industry-wide connectivity that makes the right member-specific information available to the physician for evaluation and action. Examples include:

1. Connecting CVS/caremark and payors to allow members and physician outreach through our outreach channels, including EHR and at the pharmacy counter
2. Delivering member-specific interventions, including adherence and savings, into the provider electronic health record (EHR)
3. Industry-leading electronic prior authorization to allow real-time prior authorization submission and approval.

G. Engaging Members Through Digital Strategies

More than 9 million members actively utilize Caremark.com to access benefit information, fill/refill prescriptions, and answer questions about their medications. We have made significant investments in digital capabilities over the past two years and we continue to invest in digital capabilities to better engage members, utilizing our enterprise-wide member touch points.

Our digital strategy and roadmap is revisited and enhanced regularly to ensure our offering reflects, and caters to, the ever-changing industry and the needs of our members and clients. Current and future initiatives include:

4. Integration flexibility to provide members a seamless experience: robust Web services, enhanced customization and branding options, single sign on
5. Channel expansion to reach members where they are and allow them more choices and access points including: continued mobile investment; personalized, targeted and relevant communications (email, text, etc.); and chat expansion (online pharmacist chat, video)

6. Member experience improvements informed by member goals and behaviors including: site performance improvements; member navigation insights; robust analytics; member testing; adherence drivers; and member-specific behavior insights
7. Enhanced tools to assist with price shopping: offer robust tools that allow members to compare medications, plans, prices and pharmacies to ensure they are accessing the most cost-effective choices their benefit offers
8. Mobile application expansion, including a mobile welcome kit for members

8. Describe how your organization differentiates itself from your competitors. Specifically, what makes your organization the best partner for NDPERS?

As a company that is ranked 12th on the 2014 Fortune 500 List, CVS Health invests approximately $2.0 billion per year across our organization in new retail stores, company operations, technology and programs. Recent examples of investments in the PBM include: our new state of the art mail service facility, technology enhancements, and other innovative programs. We believe this is what enables us to provide our clients with unique products and clinical programs to help manage their pharmacy trend. As a pharmacy innovation company, our enterprise-wide assets help to differentiate our offerings and enhance the outcomes for our clients in the following ways:

- Utilizing our depth of clinical expertise
- Expanding member choice and access for maintenance prescriptions
- Focusing on Adherence with Pharmacy Advisor Counseling
- Expanding specialty access to give members more choice
- Simplifying member savings with the ExtraCare Health Card
- Enhancing the member experience.

Utilizing Our Depth of Clinical Expertise

Our insights build on our experience with consumer behavior through our retail CVS/pharmacy locations along with research collaborations with top-tier medical organizations, such as Harvard Medical School and Brigham and Women's Hospital. This knowledge enables us to deliver best-in-class interventions and adherence solutions in mail, retail, and specialty. Our intervention methods utilize one of the most influential advisors at the point of care—the pharmacist.

Expanding Member Choice and Access for Maintenance Prescriptions

The Maintenance Choice® program is one of the most popular programs among our clients, benefitting 1,200 clients and more than 17 million members, to date. This program offers members the choice of receiving their 90-day medication supplies through CVS/pharmacy or CVS/Caremark mail service, all at the mail pricing and copay, enabling clients to save up to 4% of gross pharmacy costs and achieve a mail dispensing rate that is 2-3% higher than clients with a standard mandatory mail program. Launched in 2013, our voluntary program is designed to be compatible with more plan designs and is also available to EGWP members.

Focusing on Adherence With Pharmacy Advisor® Counseling

In 2013, we expanded our Pharmacy Advisor Counseling program to include 10 highly prevalent chronic conditions: diabetes, hypertension, dyslipidemia, coronary artery disease, congestive heart failure, asthma, COPD, depression, osteoporosis, and breast cancer. With the success of this program in the commercial marketplace, we continue to evolve our products to help many clients and lines of business across diverse markets. As such, we also developed a new Pharmacy Advisor Counseling offering for Medicare clients and have begun providing one-on-one counseling for Medicare members with diabetes

and cardiovascular conditions to help plans improve clinical Star measures. We also developed a Pharmacy Advisor Counseling program, further expanding our capabilities to help Medicaid plans improve HEDIS measures in 2014.

Starting in April 2015, Pharmacy Advisor Counseling will expand to include a network of over 48,000 other retail pharmacies. At these other retail pharmacies, we will provide our targeted adherence interventions so they can be provided by the local pharmacy in place of our call center. For any member using a pharmacy not included in this expansion, they will receive an outreach
and be supported by our dedicated call center.

Pharmacy Advisor Counseling monitors prescription claims data for opportunities to help members stay adherent or close potential gaps in their therapy. We proactively provide:

- New-to-therapy counseling to help members stay on their prescribed therapy.
- Counseling to members who have dropped off therapy.
- Counseling to members on the potential benefits of adding a medication to their existing treatment regimen in addition to contacting the physician.

All clinical discussions are performed by a pharmacist. We offer members access to face-to-face counseling at CVS/pharmacy locations. For members who use any other retail pharmacy or CVS/Caremark mail service, we have a dedicated team of phone-based pharmacists who provide proactive, outbound counseling and inbound access six days a week for members in this program. This means that the program benefits all members regardless of the channel or retail pharmacy the member chooses to fill their prescriptions.

Additionally, our Pharmacy Advisor® Counseling program maintains Health Call Center (HCC) accreditation from URAC, which demonstrates our commitment to quality health care. This accreditation ensures that registered nurses, physicians, or other validly licensed individuals perform the clinical aspects of triage and other health information services in a manner that is timely, confidential, and includes medically appropriate care and treatment advice.

Expanding Specialty Access to Give Members More Choice

By 2015, we will be expanding access to our specialty pharmacy services to include our CVS/pharmacy locations. This unique offering provides your specialty members convenient access to their medications through any of our CVS/pharmacy locations and the same consistent industry-leading clinical service and expertise they need to better understand and manage their condition through our specialized CareTeams. By more tightly coordinating these member touch points we can help members on their path to better health and support our clients' goal of controlling total health care costs. Availability at CVS/pharmacy locations is dependent upon applicable State laws and regulations.

Simplyfying Member Savings With the Extracare Health Card

This program provides members with a 20% discount on thousands of CVS/pharmacy brand health-related items at CVS/pharmacy locations, as well as online. Through CVS.com, members can access extensive health information and resources in addition to customized deals and savings information, including any ExtraSavings™& ExtraBucks Rewards. Members also can turn their smartphone into a digital ExtraCare card with the CVS/pharmacy® application, which enables them to refill prescriptions by scanning the prescription bottle with their phone.

Enhancing the Member Experience

Our proprietary Personal Connection Model directly engages with members, and is proven to be effective because it is based on our depth of consumer insights and behavioral research; investments in technology; and the application of behavioral economics to reinforce appropriate clinical or cost-savings member actions. A few recent results include a 138% improvement in response rate with communications campaign to personalize member savings, a 50% increase in members moving to generics, and an 18% increase in persistency through targeting of diabetes members.

9. **Identify all services that are currently outsourced or subcontracted, the name of the vendor/partner, and length of the relationship. Describe how you ensure quality customer service and timely and effective issue resolution.**

   CVS services are contracted through ClearStone Solutions, Inc. (ClearStone). Under the operating model, ClearStone (and TMG Health, also through ClearStone) provide the following services to BCBSND, in addition to those provided by CVS as described below.

   ClearStone Solutions, Inc.

   Services: First Tier Organization responsible for all program operations, monitoring and performance.

   Length of relationship: 8 years.

   ClearStone, in conjunction with its vendors, provides best-in-class integrated administrative services for government programs, including consulting and program design, program management, cost management and quality solutions. A significant factor in ClearStone's ability to generate measurably superior results on behalf of its clients is the ability to hold all downstream contractual arrangements. This enables direct oversight, contractually enforceable performance standards, and, ultimately, the ability to have a real impact on the compliance and efficiency of the operations of its downstream vendor entities for the programs it supports.

   As program administrators, ClearStone works with clients to implement custom solutions that support the health plan sponsors' directives, while reducing the day-to-day functional oversight burden. ClearStone believes that the key to successful programs operations is in allowing the health plan sponsor to concentrate on the factors important to program development and overall management. ClearStone client reporting packages and emphasis on client communications and transparency allow its clients to remain aware of the details and status of plan operations while free of the burden that day-to-day monitoring and oversight requires. Simply put, ClearStone provides the information necessary for its clients to retain overarching insight and control, while removing the worry and work associated with maintaining operational compliance.

   As discussed earlier, two key vendors working with ClearStone are TMG Health, Inc. and CVS Caremark.

   TMG Health

   Services: Enrollment, disenrollment, billing, customer service, fulfillment, membership reconciliation.

   Length of relationship: 8 years

   Management by ClearStone: To ensure quality customer service, daily communication and monthly monitoring activities are conducted to confirm adherence to contractual obligations and CMS guidelines for average speed of answer, disconnect rate, and hold time. TMG is provided with the tools to continuously monitor performance, and direction to assist in timely and effective issue resolution. Additional tools provided include, but are not limited to, CMS approved scripts, talking points, member related materials, etc.

CVS Caremark – contract effective 1/1/2015.

Services: Pharmacy Benefit Manager related services, including Pharmacy network contracting and management, pharmacy claims payment, formulary and utilization management program development assistance, operations, website formulary tools, and website claims data as well as Medicare required program attributes, e.g. Medication Therapy Management Program, Prescription Drug Event (PDE) submission, etc.

Length of relationship: Contract effective 1/1/2015, however, ClearStone has managed and overseen Pharmacy Benefit Manager services with the prior PBM for eight years.

Management by ClearStone: ClearStone will employ the same monitoring and vendor management techniques in its relationship with CVS that were successfully used in its relationship with its previous PBM services provider for the past eight years in order to ensure the same quality member and plan sponsor experience that it has historically provided. ClearStone's pharmacy team will maintain daily communications with CVS staff and conduct weekly operations update meetings, weekly and daily monitoring during the initial performance period, followed by weekly and monthly monitoring once confidence has been established that all performance requirements are being successfully attained. Areas which will be included in the monitoring programs include: Coverage Determinations, Redeterminations, IRE Auto-Forwards, Transition, Rejected Claims, Formulary and other more targeted monitoring as the need develops.

10. What ratings have you received from the following third party rating companies and organizations?

Rating Organization	Rating	Date of Last Accreditation/Rating
A.M. Best	Not applicable.	
Standard & Poor's	BBB+	5/9/2011
Moody's	Baa1	9/23/2013
NCQA (by product)	Disease Management Accreditation	8/4/2008
	Utilization Management Certification	4/24/2014
JCAHO	The Joint Commission – CVS Caremark Specialty Pharmacies are accredited under the Home Care standards of the Joint Commission for demonstrating compliance with Joint Commission standards in all performance areas.	9/19/2009
URAC	CVS/Caremark is URAC accredited in the following areas: • Pharmacy Benefit Management • Drug Therapy Management • Mail Service Pharmacy • Specialty Pharmacy • Health Call Center • CVS/pharmacy Community Pharmacy.	 11/1/2007 11/1/2007 4/1/2010 4/1/2010 11/1/2013 7/31/2014
American HealthCare Commission	Not applicable.	

11. **Are any of the services you are proposing to provide to NDPERS contracted outside the U.S.A? Describe any business you do outside the U.S.A. and the financial impact, if any, of requiring those services to be provided within the U.S.A.**

    No, services are not contracted to any vendors outside the United States.

12. **Confirm that your proposal includes any and all deviations to the Minimum Contract Provisions (via submission of Exhibit F) and to the other RFP requirements (via Exhibit F, worksheet 2).**

    Confirmed.

13. **Confirm that you will conform to the Patient Protection and Affordable Care Act and the Health Care and Education Reconciliation Act of 2010. Describe any provisions that NDPERS must be prepared to comply with beginning July 1, 2015.**

    CVS Health confirms. We offer all levels of claim appeal required by both ERISA and PPACA, including external review services that comply with the requirements of the Federal Affordable Care Act (ACA). We coordinate PPACA-required external reviews with external Independent Review Organizations (IROs) and require all contracted IROs to comply with all requirements imposed by the ACA. This option is offered only to clients that use our internal claims and appeal services (including first and second-level clinical appeals). The fee structure for appeals services includes charges for only those levels used by a member and covers all administrative and external services, including urgent service as needed.

    We have adopted and implemented appropriate policies and procedures for our PBM operations to comply with all requirements of the ACA's claims, appeals, and external review provisions. We will assist the client with option assessment and will implement according to client direction.

1.1.2 References and Experience

1. **Provide the following information on a maximum of three (3) of your largest pharmacy benefit plan clients for whom you provide pharmacy network, and administrative services on a self-insured basis. References of similar size and scope to NDPERS are preferred; one must be your largest public sector client and one must be your largest North Dakota-based client. Identify those clients who are large employers with multiple payroll processing centers and Medicare Part D program support.**

    CVS/caremark considers our current clients as proprietary. CVS will work with NDPERS to facilitate any required reference checks.

2. **Provide the following information for two (2) of your largest pharmacy benefit plan clients that have terminated services during the preceding 3-year period. References of similar size and scope to NDPERS are preferred.**

    CVS/caremark considers our current clients as proprietary. CVS will work with NDPERS to facilitate any required reference checks.

1.2 Implementation and Account Management

3. **Describe the timetable and specific tasks involved to have the NDPERS' program operative for the July 2015 Plan Year. Include a detailed implementation plan and business plan or timeline related to prescription drug coverage including Medicare Part D program support. At a minimum be specific with regard to the following:**

    Group MedicareBlue Rx is already implemented for NDPERS as a fully-insured Part D EGWP. Reporting and billing modifications will need to be modified in order to support a self-insured process. Group MedicareBlue Rx utilizes a separate Plan Benefit Package (PBP) for fully-insured EGWPs vs self-insured EGWPs, so there would be a 60-day implementation timeframe for both TMG and CVS.

- Amount of total time needed to effectively implement the program

  CVS (as well as TMG Health) would need 60 calendar days to implement the existing NDPERS benefit, which is currently fully insured, as a self-insured benefit.

- Activities/tasks and corresponding timing
  - Termination of fully insured billing activities – 60 days prior to effective date of self-insured group implementation
  - Submission of EGWP under new PBP – 60 days prior to effective date of self-insured group implementation
  - Update internal reporting and tracking processes to account for the change in status of NDPERS – 30 days prior to effective date of self-insured group implementation.
  - Development, testing, and implementation of reporting necessary for support the self insured billing function (with LIS, LEP, etc… info included) managed by BCBSND – 60 days prior to effective date of self-insured group implementation.
- Responsible parties and amount of time dedicated to implementation, broken out by vendor and NDPERS staff

  The main responsibility for NDPERS staff would be to determine project business requirements (such as data feeds and reporting), along with establishing internal processes for receipt of that information. CVS would work with ClearStone, BCBSND, and TMG Health to implement operational requirements. ClearStone provides staff dedicated to EGWP implementation and vendor oversight and coordination who would lead the project. Time dedicated to implementation will depend on group implementation needs, benefit customization, testing requirements, etc. TMG Health and CVS project management staff would also be resourced as necessary to support the/transition from fully-insured to self-insured.

- Any transition activities required with incumbent carriers, including providing members adequate notice regarding current care or treatment plans at least 60 days prior to a change

  Not Applicable as we are the incumbent carrier.

- Length of time implementation team lead and members will be available to NDPERS

  CVS and TMG Health staff would be available to NDPERS on an as needed basis. ClearStone staff would be available to BCBSND staff daily. Ongoing biweekly meetings are held with BCBSND to address EGWP needs as they arise.

4. **Provide an overview of how the NDPERS relationship will be managed, both strategically and on a day-to-day basis. Include an organizational chart. NDPERS will give preference to vendors who are willing to assign a dedicated account management team and provide access to senior leadership. Designate the names, titles, location, telephone numbers, and email addresses for the representatives listed below. For the account service individuals listed (b, c, d, and e below), provide brief biographical information, such as years of service with your company, experience as it relates to this proposal, and the number of clients for which they perform similar services.**

   Strategically, the NDPERS relationship will be managed to engage the boards and executives in direct communication on organizational needs and direction. We will continue to work with NDPERS to address cost trends, legislative items, new product concepts and other issues impacting the cost and quality of care and coverage. On a day-to-day basis, we will continue to provide a dedicated account executive, an account manager, group consultant, wellness consultant and access to all levels of management and the BCBSND Board. NDPERS members will continue to receive the high quality they've come to expect from our dedicated member services team. Please "Attachment 3 – BCBSND Organizational Chart" for the BCBSND organizational chart.

a. The key individual representing your company during the proposal process;

Tim Huckle, President and CEO

A team of executives play a supporting role. Please refer to "Attachment 4 – Biographies" for biographical information.

Executive Support Team:

- Denise Kolpack, Senior Vice President of Corporate Communications and Public Affairs
- Pat Bellmore, Chief Marketing Officer
- Brad Bartle, Vice President of Actuarial & Membership
- Mark Tschider, Vice President of Customer Support & Claims Administration
- Sharon Fletcher, Senior Vice President of Health Network Innovation and Human Resources and Development
- Renay Rutter, Executive Vice President of Enterprise Planning and Technology
- Daniel Conrad, Chief Legal Officer
- Brian Fellner, Executive Vice President and Chief Financial Officer

b. The key individuals on your proposed implementation team;

BCBSND has an established cross functional implementation team with leadership representation from all business units. This team will be led by a dedicated Project Manager, Lacey Hogness.

c. The key individual assigned to overall contract management;

Kevin Schoenborn, Manager, Consulting Services – Account Executive

d. The key dedicated individual or team members responsible for day-to-day account management and service;

Your dedicated Account Management Team will coordinate with the BCBSND implementation to ensure all aspects of the NDPERS benefit plan are implemented timely and accurately. They will be supported by a team of Subject Matter Experts. Please refer to "Attachment 4 – Biographies" for biographical information.

Account Management Team:

- Kevin Schoenborn, Manager, Consulting Services – Account Executive
- Dorinda Card, Director of Key Accounts
- Onalee Sellheim, State and Public Program Manager – Account Manager
- Sonja Nyhof, State and Public Program Manager
- Jodi Crouse, NDPERS Large Group Consultant
- Michael Carlson, Manager of Health and Wellness
- Stacy Duncan, NDPERS dedicated Wellness Consultant
- Sheri Srnsky, Team Leader, Special Accounts, Claims

Subject Matter Experts:

- Michelle Bishoff, Director of Claims Administration
- Tom Christensen, Manager of Pharmacy Management
- Zach Keeling, Director of Marketing Operations & Product Management
- Linda Merck, Senior Actuarial Analyst

- Lacey Hogness, Business Implementation Lead
- Mike Potts, Director of Employer Consulting & Wellness Services
- Carman Bercier, Vice President Health Innovation and Practice Innovation
- Jackie Walsh, Vice President Clinical Excellence and Quality
- Pam Gulleson, Vice President of Public Affairs
- Megan Houn, Director of Government Relations
- Brent Solseng, Pharmacy Manager Marketing
- Shelly Stalpes, Manager Claims Administration
- Jim Wynstra, Director of Actuarial
- Heather Horner, Member Education Consultant
- Miriam Griffin, Member Advocate Specialist

Please refer to "Attachment 4 – Biographies" for biographical information.

e. The key individual responsible for provider contracting; and

Sharon Fletcher, Senior Vice President Health Network Innovation and Human Resources and Development

Please refer to "Attachment 4 – Biographies" for biographical information.

f. The key individual responsible for provider relations if different than letter e. above.

Please refer to question 4 e.

5. Please provide the requested information for the functions that will be servicing NDPERS in the table below:

Area	Geographical Location(s) and Organization Name (if out-sourced)	Hours of Operation (Specify PST/CST/EST)	Is this service Outsourced? Yes or No? If Yes, provide name of company to which the function is outsourced
Member Service for Coverage Determinations and Appeals	CVS Caremark • Nashville, Tennessee • Pittsburgh, Pennsylvania	24 hours a day, 7 days a week, 365 days a year	☐ Yes *Specify Company Name:* CVS Caremark ☐ No
Member Service	TMG Health • Jessup, PA • Amarillo, TX	8 am – 8 pm in member's location	☐ Yes *Specify Company Name:* _TMG Health ☐ No

Area	Geographical Location(s) and Organization Name (if out-sourced)	Hours of Operation (Specify PST/CST/EST)	Is this service Outsourced? Yes or No? If Yes, provide name of company to which the function is outsourced
Claims Processing	CVS Caremark Claims are processed online in real time at the point of service. The address of the CVS/Caremark paper Claims Processors is: 8801 E. Raintree Drive Scottsdale, AZ 85260.	CVS Caremark's online system is available 24 hours a day, 365 days per year. The CVS/Caremark Claims Processing Centers operate Monday through Friday, from 8:00 a.m. to 7:00 p.m. EST. The centers do not typically operate on weekends or holidays. Additionally, our Customer Care team is available 24 hours per day, seven days per week for claims inquiries.	☐ Yes *Specify Company Name:* CVS Caremark ☐ No
Enrollment and Eligibility	TMG Health • Jessup, PA	8 am – 8 pm EST	☐ Yes *Specify Company Name:* _TMG Health ☐ No
Management of Clinical Programs	CVS Caremark 8300 Norman Center Drive, Suite 800 Bloomington, Minnesota 5543	We believe in flexible work schedules to support the time zone needs of our customers. This process helps ensure that we are readily available to support the needs of all of your locations.	☐ Yes *Specify Company Name:* CVS Caremark ☐ No

Area	Geographical Location(s) and Organization Name (if out-sourced)	Hours of Operation (Specify PST/CST/EST)	Is this service Outsourced? Yes or No? If Yes, provide name of company to which the function is outsourced
Specialty Drug Program	CVS Caremark The specific addresses of our locations include: • 280 Avenue Jesus T Piñero, Suite A Rio Piedras, Puerto Rico 00927 • 1307 Allen Dr., Suite H Troy, Michigan 48083 • 8370 Wolf Lake Drive, Suite 107 Bartlett, Tennessee 38133-7108 • 7930 Woodland Center Boulevard, Suite 500 Tampa, Florida 33614 • 25 Birch St, Building B, Suite 100 Milford, Massachusetts 01757-9901 • 180 Passaic Avenue Fairfield, New Jersey 07004 • 10700 World Trade Blvd, Suite 110 Raleigh, North Carolina 27617 • 105 Mall Boulevard Monroeville, Pennsylvania 15146 • 800 Biermann Court, Suite B Mount Prospect, Illinois 60056 • 11162 Renner Boulevard Lenexa, Kansas 66219-9621 • 1127 Bryn Mawr Avenue, Suite A Redlands, California 92374.	Normal business hours for our pharmacies are 7:30 a.m. to 7:30 p.m. local time, Monday through Friday. Additionally, we have a designated pharmacy with extended operational hours from 8:00 a.m. to 3:00 p.m. CST on Saturdays to accommodate convenient hours of service for members. Pharmacists are available 24 hours a day, seven days a week, during non-business hours and through our after-hours service numbers for emergencies and other service-related needs.	☐ Yes *Specify Company Name:* CVS Caremark ☐ No

Area	Geographical Location(s) and Organization Name (if out-sourced)	Hours of Operation (Specify PST/CST/EST)	Is this service Outsourced? Yes or No? If Yes, provide name of company to which the function is outsourced
Mail Order Program	CVS Caremark All mail facilities are owned and operated by CVS/Caremark. Our mail dispensing pharmacies are located at the following addresses: • 1780 Wall Street Mount Prospect, Illinois 60056 • Number 1 Great Valley Boulevard Wilkes-Barre, Pennsylvania 18702.	**Dispensing Pharmacies:** **Chicago/Mt. Prospect, Illinois** **Monday – Thursday** 6:30 A.M. – 1:45 A.M. **Friday** 6:30 A.M. – 11:30 P.M. **Saturday** 8:00 A.M. – 4:30 P.M. **Sunday** 3:00 P.M. – 1:45 A.M. **Time Zone** Central **Dispensing Pharmacies:** **Wilkes-Barre, Pennsylvania** **Monday – Thursday** 6:30 A.M. - 1:45 A.M. **Friday** 6:30 A.M. - 11:30 P.M. **Saturday** 8:00 A.M. - 4:30 P.M. **Sunday** 3:00 P.M. - 1:45 A.M. **Time Zone** Eastern	☐ Yes *Specify Company Name:* CVS Caremark ☐ No
Program administration for Medicare Part D (including vendor management)	ClearStone Solutions Eagan, MN	7:00 am – 5:00 pm CST Monday through Friday.	☐ Yes *Specify Company Name:* ClearStone Solutions ☐ No

1.3 Communications and Website

6. Please complete the table below by providing a description of the pre-enrollment communication materials you will provide to support NDPERS during its open enrollment period:

Area	Description	Can it be customized for NDPERS?
Website	There are online tools available through the caremark.com member portal that allows users to see claim and drug information.	☐ Yes X No
Employee Newsletter(s)	We do not currently support an employee newsletter.	☐ Yes ☐ No
Brochures	We do not currently support pre-enrollment brochures for NDPERS.	☐ Yes ☐ No
Direct mail (internal or home distribution)	We will directly mail to NDPERS members information about the CVS discount card for use at CVS Pharmacies for CVS branded health products and the mail order program.	☐ Yes ☐ No
Enrollment guide	We do not currently support an enrollment guide for group enrollment but do create the Group Summary of Benefits for NDPERS which is required for enrollment, along with the Group enrollment form and plan ratings document.	X Yes ☐ No
Employee open enrollment meeting support and attendance	We currently develop slide presentations for Employer Groups to use with NDPERS benefit administrators.	X Yes ☐ No
Benefits/HR staff training support	We communicate important benefit information for NDPERS members by creating and mailing the member ID card, Annual Notice of Changes (ANOC) document, Group Evidence of Coverage and Schedule of Coverage and Limitations (SCAL), Low Income Subsidy (LIS) Rider when applicable, Group Formulary and Supplemental Drug list, Pharmacy Directory, and prescription Mail Order forms.	X Yes ☐ No
Video	We do not currently support video communications on behalf of NDPERS.	☐ Yes ☐ No
Other (please list)		X Yes ☐ No

7. **Are you willing to provide communication and marketing resources to work with NDPERS in the development of NDPERS-specific member communication materials (educational, open enrollment, benefit plan related, ongoing communications)? Describe the resources, sample communications, and your proposed approach and strategy/plan.**

   The table under section 1.3 Communications and Website above outlines the list of current communication and marketing services provided. Additional services may be provided at additional cost.

8. **How much lead time is necessary for you to guarantee that ID cards will be received by members prior to the plan year effective date of July 1, 2015?**

   Member ID cards are issued per CMS timeframes for Medicare Part D program, based on receipt of complete enrollment request for each member.

1.4 Plan Administration

9. **Confirm that you will communicate legislative changes related to the operations of the plan in a timely manner, and describe the support staff and process.**

   Communication with NDPERS is managed by BCBSND. BCBSND will communicate federal and state legislative changes in a timely manner. BCBSND maintains close relationships with state and federal elected officials and their respective staffs. Our Government Relations team, Pam Gulleson and Megan Houn, monitor federal and state bills and promptly notify internal staff of potential changes that could impact the NDPERS health plan. Megan Houn works out of the Bismarck office and Pam Gulleson is based in Fargo. The Account Management Team notifies NDPERS staff of potential changes. BCBSND Legal staff will provide guidance on these issues, but recommends NDPERS communicate with its legal counsel to confirm. BCBSND's Actuarial Team will provide pricing on legislative changes. BCBSND Contract Administration staff also works closely with the North Dakota Department of Insurance on notification of these changes. The Account Management Team works closely with NDPERS staff throughout the process.

10. **NDPERS recognizes that different settlement arrangements will be necessary to implement a self-insured program. Please describe your proposed settlement process.**

    BCBSND and NDPERS do not currently require a settlement process for the Part D program.

    BCBSND can offer NDPERS two options for settlement arrangements. These options are dependent on NDPERS handling of specific billing for each group.

    a. If NDPERS prefers BCBSND bill the member groups, BCBSND would require an 820 file each month to cover the month's premium notices. This would update the billing so there would not be a balance forward in the next month's bill. BCBSND would wire the funds back to the group after the 820 has been processed.

    b. If NDPERS prefers to bill the member groups directly, BCBSND would not require an 820 for premium. Claims would draw against NDPERS claims account and administrative fees and stop-loss premium would draw against NDPERS cash account.

11. **What is your total commercial and Medicare pharmacy plan enrollment? Complete the table below.**

Dates	Commercial	Medicare
As of January 2012	More than 49,000,000	5,200,000
As of January 2013	More than 47,000,000	6,900,000
As of January 2014	More than 44,000,000	6,800,000

1.5 Eligibility

12. Are ID cards the sole means of determining member eligibility? If not, please describe.

Members may provide documentation of Group MedicareBlue Rx enrollment, for the purpose of obtaining access to pharmacy benefits, via Group MedicareBlue Rx member ID card, Group MedicareBlue Rx Acknowledgment letter, or Group MedicareBlue Rx Confirmation letter. All three items contain the information required by a pharmacy to accurately submit claims.

13. If desired, can NDPERS update and maintain eligibility and check employee claim status online? Are there any special charges for access to and use of these tools?

No.

14. NDPERS will submit enrollments via a centralized electronic system. NDPERS will collect enrollment/eligibility information which will be provided to the successful contractor on a data file that follows the HIPAA 834 file specifications. Files will be transmitted using a secure file transmission process. The successful contractor must be able to receive this data in that format and media.

NDPERS currently utilizes an electronic enrollment file process that does not mirror the 834 file specifications, but instead, reflects CMS guidance to capture those required elements for a complete Part D enrollment. Group MedicareBlue Rx will continue to support the existing enrollment file method used by NDPERS.

15. Please describe how you handle manual eligibility updates and the turn-around/timing of such updates.

Eligibility updates to Group MedicareBlue Rx will follow CMS guidance regarding processing and timeframes, submitted by the group in agreed-upon formats.

16. Please describe your standard (or proposed) financial arrangements with NDPERS under a self-funded arrangement including but not limited to: account requirements and process for claim payment, frequency of reimbursement to the administrator for claims paid, methodology for funds transfers, required reserves in claim account, etc.

All CVS generated information would be transmitted to ClearStone, who would, in turn, forward the information to BCBSND for transmittal to NDPERS

BCBSND can offer NDPERS two options for settlement arrangements. These options are dependent on NDPERS handling of specific billing for each group.

a. If NDPERS prefers BCBSND bill the member groups, BCBSND would require an 820 file each month to cover the month's premium notices. This would update the billing so there would not be a balance forward in the next month's bill. BCBSND would wire the funds back to the group after the 820 has been processed.

b. If NDPERS prefers to bill the member groups directly, BCBSND would not require an 820 for premium. Claims would draw against NDPERS claims account and administrative fees and stop-loss premium would draw against NDPERS cash account.

1.6 Customer/Member Service

17. **Confirm if you will provide and maintain dedicated customer service staff acceptable to NDPERS. If yes, this unit will provide dedicated local and toll-free telephone numbers and shall respond directly to member inquiries regarding benefits, claim status, selecting participating providers, and provide general assistance with navigating on-line and other resources available through the health plan and NDPERS websites. If yes, describe the structure and organization and provide an organizational chart of the unit you are proposing. If no, please describe how these services will be provided.**

    Although Group MedicareBlue Rx does not provide NDPERS dedicated customer service staff, all Group MedicareBlue Rx customer service staff are trained to explain NDPERS benefits, enrollee claim status, and selection of participating pharmacies. Additionally, Group MedicareBlue Rx customer service staff provide general assistance with navigating Group MedicareBlue Rx online tools.

1.7 Claims Administration

18. **Provide the following information regarding the claims administration unit that will handle the NDPERS account. If there is more than one claims processing location, provide information for each.**

	Claims Processing Unit
Address/Location	Claims are processed online in real time at the point of service. The address of the CVS/Caremark paper Claims Processors is: 8801 E. Raintree Drive Scottsdale, AZ 85260.
Phone Numbers	TMG Customer Service 1-877-838-3827
Days and Hours of Operation	CVS Caremark's online system is available 24 hours a day, 365 days per year. Pharmacy technical help desk assistance for claim processing issues is available 24 hours a day, 365 days per year
Number of Members Serviced	CVS Caremark provides services to 29,930,000 employer members.
Number of Employer Groups Serviced	CVS Caremark provides services to 1,800 employer groups.
Ratio of Claims Unit Staff to Members Serviced	Our ratio of examiners per 1,000 covered lives varies, and is currently .001.
Volume of Claims Processed Daily	In 2013, we processed 902,100,000 claims. This is an average of 2.47 million claims daily.

19. **Confirm that you are able to administer the NDPERS designs (Dakota Plan and Dakota Retiree Plan, HDHP/HSA) and benefit levels without manual intervention. If you are unable to administer the plan, you must specify any plan design deviations proposed as specified in the RFP.**

    Group MedicareBlue Rx currently administers the NDPERS EGWP benefit design requested, and can continue to do so in the future.

1.8 Reporting

20. Please provide samples of your monthly, quarterly, and annually standard reporting packages.

Please refer to attached sample reports in Attachment 6.

21. Describe your online reporting capabilities. Please describe the data/information and types of reports that can be accessed and downloaded from your online system.

Online reporting capabilities are not available. CVS, ClearStone, and BCBSND will continue to work together to address NDPERS reporting needs as requested.

22. Explain your ability to comply with the NDPERS current data warehouse arrangement by providing pharmacy claims and enrollment data to NDPERS in a format agreed upon between you and NDPERS no less than monthly.

CVS provides weekly claims files to ClearStone, who sends this information to BCBSND and ClearStone also provides a weekly member file (from TMG Health) which is also provided to BCBSND for transmittal, as required.

1.9 Pharmacy Benefits Management Services

23. Describe your mail order pharmacy program and provide details on how you market this service.

CVS/Caremark Mail Service Pharmacy operational efficiencies include:

- Integration with real-time, claims processing system used by retail network
- Drug utilization review edits applied across all claims
- Formulary control that provides enhanced management and cost control
- Member claims history profiles for more effective drug utilization review
- Comprehensive data management
- Stringent claims auditing procedures to support quality service levels.

To help ensure quality and consistency while filling prescriptions, our mail service has its own Quality Assurance department. The department tracks, corrects, and reports all errors. Ongoing adjustments and enhancements to systems, processes, and equipment facilitate the management of higher volumes.

Our mail service program is an added efficiency for those who require maintenance medications, prefer the convenience of home delivery, and may have limited mobility. More than 90% of all of our orders are filled using automation, contributing to our efficiency. Mail service offers:

- Convenient, responsive service with a two-day processing turnaround time (for non-exception orders)
- Telephone or Internet refill ordering
- A refill reminder program
- Overnight delivery or other special shipping arrangements
- Supportive services for special populations, such as the elderly and hearing impaired
- Toll-free pharmacist consultation 24 hours a day, 7 days a week
- Educational member advisory letter with all prescriptions
- Full disclosure for all therapeutic interventions to preserve the integrity of member choice and physician control over which drugs dispense

- Member ability to opt into automatic refills
- Caremark messaging platform, automated alerts regarding order status, refill reminders, health updates, etc. via the member's preferred method of contact (phone, e-mail, text messaging, etc.).

The following examples show how we can encourage members to use the mail service option (additional costs may apply):

- Member-specific Savings Report: These personalized, proactive summaries of members' prescription histories can help your members save money on future purchases by including special messaging to assist in making more cost-effective health care decisions.
- FastStart®: This proactive multi-channel outreach (e.g., outbound calls, targeted mailings) promotes the use of CVS/Caremark Mail Service and provides several options for starting a mail prescription or moving one to mail.
- Automatic Prescription Refill and Renewal: This mail service program – known as ReadyFill at Mail™ – allows members to receive automatic refills and automatic renewals of their maintenance medications. Members can choose their preferred method of communication: automated phone call, e-mail, text message, or secure inbox message on Caremark.com.
- Caremark.com: Our Check Drug Options feature allows members to look up pricing and coverage before ordering prescriptions and view in-class and cross-class therapeutic alternatives. Also, our website's saving and opportunities area uses member-specific prescription history and plan information to present lower cost options.
- Personalized messaging via CVS/Caremark Messaging Platform (CMP): Through the CMP, we can deliver important health and prescription information to NDPERS's members via their preferred method of communication be it e-mail, voicemail (automated voice message) or text message.

24. Describe your PBM rebate process. NDPERS is requesting that you provide a rebate guarantee in appendix H.

Rebates for eligible claims are coordinated and administered by CVS/caremark's Industry Analysis team through our proprietary vendor rebate system. This system enables us to track each contract independently, generate rebate invoices, and compile reporting. We invoice for rebates from most manufacturers on a quarterly basis, based on current terms and conditions as well as market performance.

We have an aggressive collection and reconciliation process related to rebate payments. All payments are fully reconciled to the original invoiced amount, and any differences are documented and escalated appropriately to ensure that payment is made on all valid claims submitted to the drug manufacturers. The average turnaround time for manufacturers to pay their rebates is 60 to 120 days after the end of the quarter; however, payment timing of the rebates depends upon the manufacturer's contract.

We will determine the rebates due to NDPERS by matching the payment information detailed in the manufacturer reconciliation data against the invoiced claims. The CVS/caremark proprietary reconciliation system then applies the rebate payment to the individual claims. The aggregate dollar amount is determined and monies distributed per the terms of the client contract.

25. Describe your methodology for pricing (AWP, AAC, WAC, etc.)? Please explain in detail.

Our products are priced according to a variety of factors, including client size, market, networks, demographics, preferred drug list selection, and plan designs. Our price quote to NDPERS is intended to maximize cost savings, control trend, and minimize member disruption. CVS/Caremark's pricing is a discount off AWP.

1.9.1 Formulary

26. Provide details and the capabilities of your organization to provide a formulary that is at a minimum equivalent to and as comprehensive as the current formulary used by the NDPERS program. Provide sample formulary documents. At a minimum include the following:

- **Describe your policy regarding formulary changes and your procedures for educating and notifying members. Indicate how often the formulary is changed.**

  CVS/Caremark maintains the 2015 NDPERS Medicare Part D formulary on a weekly basis, reviewing all new drugs that launch. Line extensions of existing formulary drugs are added promptly and all new entities are referred to our P&T Committee process. Once approved by our National P&T Committee, these new products are added to the adjudication system and to the HPMS files upon receipt of a proxy NDC/RxNorm CUI number on a formulary reference file update. Formulary PDF files are updated with upcoming changes, to post online.

  Multiple check points in our process ensure that each month's formulary changes are correctly captured and coded into the adjudication platform. In addition, our formulary management tool has audit reports that are always reviewed by a pharmacist before the files are exported to CMS.

  Negative change notices are included in all member EOBs at least 60 days before the effective date of the change. We include CMS-approved negative formulary changes in the upcoming formulary change section of the Explanation Of Benefits. In accordance with CMS guidance, members that receive EOBs 60 days before the change effective date and who have the target drug in claim history within the last 120 days (or from start of calendar year, whichever is greater) are considered notified. Members who do not receive EOBs 60 days before the change is effective but have history of a negatively impacted drug during the same time periods as above, are mailed a stand-alone notice of change. Additional mailings are sent to new starts to therapy identified prior to the effective date of the change and an additional 60 day grace period is provided. A secure Web site is also available to obtain copies of member EOBs. Reprints of EOBs are available upon member request.

- **Describe how drugs are evaluated for possible inclusion on the formulary.**

  To address the various needs and goals of our wide range of plan sponsor types, CVS Caremark develops multiple Medicare Part D formulary template solutions, ranging from restrictive to more expanded coverage options. We offer a variety of tiering strategies (i.e. two-tier, four-tier, five-tier) for each of the drug list options. Clients may choose to remove utilization management edits if not mandated by our P&T Committee. Other modification requests will be reviewed individually and you will be provided information as to the potential financial impact of those requests.

- **Describe the basis of your formulary development and maintenance.**

  We have more than 20 years of experience providing unique formulary management strategies to meet client goals. With the extensive number of clients and lives we support, we have a critical role to play in helping to control rising health care costs and improve member health. As a pharmacy innovation company, we work collaboratively to develop new solutions to better serve our clients and meet continuously evolving market challenges.

- **Provide specific information where a higher cost option of therapeutic equivalent drug has been included in your formulary and provide rationale for doing so.**

  While CVS Caremark strives to include the most cost-effective drugs on our drug list, some drugs within the same therapeutic category may have unique pharmacological

properties, indications, dosage forms, side-effect properties, compliance factors, and P&T Committee requirements, which may override any cost difference. Our formulary strategies are designed to meet CMS requirements while optimizing plan goals and helping to manage trend.

- **What is your definition of a Generic Drug?**

  "Generic Drugs" means any single source generic and/or multi-source generic drug (non-Brand Drug) as set forth in Medi-Span's National Drug Data File. Brand Drugs dispensed as Generic Drugs (i.e., Dispense as Written code = 3, 4, 5, 6 or 9) are considered Generic Drugs under this Agreement.

- **What is your definition of a Brand Drug?**

  "Brand Drugs" means all single source brand and/or multi-source brand drugs, as identified by PBM for its book of business implemented on the same platform as CLEARSTONE, using Medi-Span's National Drug Data File that adjudicate at the Cost Share logic of a Brand Drug, consistent with the Benefit Plan.

- **Describe the composition of your review board/committee and how often do they meet and how are they selected to be a member.**

  The CVS/Caremark P&T Committee, who meets face-to-face on a quarterly basis and, as needed, on an ad-hoc basis, is an independent body of 19 independent health care professionals and academicians recognized as national experts and leaders in their fields of specialty. A unique feature of the P&T Committee is the inclusion of a pharmacoeconomist whose input includes quality-of-life considerations, and a medical ethicist who provides unbiased feedback regarding the logic and appropriateness of P&T Committee decisions. The CVS/Caremark P&T Committee is composed of 19 independent health care professionals, including 16 physicians of which one (1) is a medical ethicist, one (1) is a pharmacoeconomist, and two (2) are specialists in the care of the elderly or disabled. There are also three (3) pharmacists, including a specialist in the care of the elderly or disabled. The 16 physicians represent the following specialties:

  - Allergy
  - Cardiology
  - Clinical Pharmacology
  - Endocrinology
  - Family Practice
  - Gastroenterology
  - Gerontology
  - Hematology/Oncology
  - Internal Medicine
  - Infectious Disease
  - Pediatrics
  - Pediatric/Adolescent Psychiatry
  - Pharmacoeconomics
  - Psychiatry.

A candidate for membership on the Pharmacy and Therapeutics (P&T) Committee is selected based on a referral (from another member) and the candidate's qualifications, including: educational background, training, experience, geographical distribution, and exposure to members. The candidate is then invited to attend a meeting where the P&T Committee votes on whether he or she will serve on the committee, based on both qualifications and interactions at the meeting.

1.9.2 Management of Clinical Programs

27. Provide information that demonstrates your organization can effectively administer the programs listed below in order to partner the pharmacist, other health professionals and the member to ensure the optimum therapeutic outcomes for our members. Also provide information that demonstrates your organization's ability to promote the safe and effective use of medications, and help our members achieve targeted outcomes.

a. Drug Utilization Reviews (DUR) – retrospective, concurrent and prospective.

CVS/Caremark designed our clinical strategy to fulfill two of our main objectives: Helping clients manage bad trend and promote good trend. We accomplish this through a variety of unique drug utilization review (DUR) strategies and our award-winning Pharmacy Advisor® approach. The CVS/Caremark concurrent, retrospective, and prospective DUR programs are described below.

Concurrent DUR Programs

Managing Bad Trend
The CVS/Caremark **Concurrent (POS) DUR program** is an automatic, system-driven drug utilization review program performed for all clients on all prescriptions, at both mail and retail. No extra charge is made for this standard service.

Our concurrent DUR program is implemented through our single-platform information systems, which power our online national retail pharmacy network, our National Network of point-of-sale pharmacies as well as our mail service pharmacy facilities. The system can perform up to 500 edits on every prescription to ensure that prescriptions meet administrative, plan-design, and member safety criteria.

Retrospective DUR Programs

Managing Bad Trend
The CVS/Caremark **Safety and Monitoring Solutions (SMS**) help identify potential fraud, waste and abuse by reviewing claims through an automated series of edits that identify members with high-cost drug use patterns suggesting potential abuse or misuse. A clinical pharmacist then conducts an analysis of the generated profiles, which are stratified by risk score. Based on that analysis, if a potential case of fraud or misuse is identified, we will send a letter to the appropriate prescriber(s) alerting them to the issue, and will conduct follow-up activities on the targeted participants for up to six months. The SMS reviews the following criteria to help identify problem cases:

- Total number of controlled substance claims-Identifies total number of continuous and concurrent (two or more at the same time) targeted drugs
- Total number of prescribers-Identifies unusually high number of concurrent controlled substance prescribers
- Total number of pharmacies-Identifies total number of distinct pharmacies that have filled targeted drugs
- Excessive utilization-Identifies members who exceed the recommended utilization for targeted drug classes
- High cumulative daily dosage-evaluates acetaminophen (APAP) and morphine equivalent
- Geographic distribution of prescribers and pharmacies-Identifies patterns that indicate a member may be doctor or pharmacy shopping to avoid detection
- High total claim cost-Identifies potential misuse or abuse based on targeted drug costs.

In addition, we can work collaboratively with a client to refer a member case to:

- Medical case management for further monitoring or additional intervention
- The client's fraud investigation unit for additional investigation and intervention.

Our Safety and Monitoring interventions include regular profile monitoring and data sharing to help you meet CMS requirements for tighter drug utilization review (DUR) controls. Interventions can include implementation of member-specific utilization management edits (MSUME), and assisting CMS in anti-fraud reviews and reporting of individual cases to Medicare Drug Integrity contractors (MEDICS).

Promoting Good Trend
Closing gaps in medication therapy: We can provide a powerful "early-warning system" for your members' medical care and identifies high-risk members before they may experience significant medical events. Drug profiles are assessed daily, within 72 hours after claims adjudication, by a clinical pharmacist for any potential issues or complications associated with the disease or therapy. Identified issues are communicated to the prescriber along with suggested solutions to the issues.

Prospective DUR Programs

Managing Bad Trend
The CVS/Caremark prospective DUR programs include Prior Authorization, Step Therapy, and Quantity Limits.

Our **Prior Authorization** program offers several benefits, including:

- Promotes appropriate prescribing of drugs by ensuring adherence to approved treatment protocols
- Decreases expenses by shifting utilization to less expensive, clinically appropriate drugs
- Promotes member safety.

Our **Step Therapy** program ensures that members utilize the most therapeutically appropriate and cost-effective drugs first. Step therapy protocols optimize appropriate drug therapy while controlling costs by defining how and when a particular drug or drug class should be used, based on a member's drug history. Post-step prior authorization is also available to allow coverage for clinically appropriate situations that do not meet the initial step therapy protocol.

Quantity Limits are available as an alternative or a supplement to our Prior Authorization program. Clients that wish to maintain control over drugs with the potential for abuse, misuse, or safety concerns – without eliminating coverage – can do so by means of the Quantity Limits program.

b. Disease Management

Not Applicable for Prescription Drug Plan product

c. Medication Therapy Management

Our Medication Therapy Management Program is designed to identify Medicare Part D members at risk for adverse medical events and enrich their understanding of medication use, improve therapeutic outcomes by enhancing medication adherence, and reduce adverse drug events. The CVS Caremark Part D Services MTM program includes the following components per CMS requirement: interventions, for both beneficiaries and prescribers; an annual comprehensive medication review, which includes an interactive, person-to-person or telephonic consultation and an individualized, written summary in CMS' standardized format; and quarterly targeted medication reviews with follow-up interventions when necessary.

Per CMS guidelines, all members who meet the program criteria are automatically opted into the program. The MTM Program works collaboratively with members, pharmacists, and physicians to reduce risk by resolving identified medication related issues. Reducing the risk of adverse medical events should lead to decreased overall medical costs for the member over time. The program encourages compliance with national, evidenced-based clinical guidelines.

The MTMP consists of 2 components: the Comprehensive Medication Review (CMR) and Targeted Medication Reviews (TMRs). The CMR is an interactive, person-to-person medication review provided to the member by a pharmacist or other qualified provider and is offered at least annually. The CMR is a review of the beneficiary's medications, including prescription, over-the-counter (OTC) medications, herbal therapies, and dietary supplements, which aids in assessing medication therapy and optimize patient outcomes. Newly eligible members who meet minimum program eligibility requirements will be offered a CMR within 60 days of qualifying, and within one (1) year of qualifying for previous CMR for members who continue to qualify for the program in the new Plan Year per CMS guidelines. Targeting will be run monthly, with program eligibility determined by prescription claims and drug spend. Members who have a drug spend in the previous 90 days of at least $784.50 will meet the drug spend criterion as it will be assumed that their drug costs will reach the $3,138 annual drug cost threshold required in order to be eligible to participate in the MTMP in 2015. Members are notified that they may opt-out of the MTM program or decline certain components of the MTM program while still allowing for TMRs to be performed. Once the CMR service is accepted, the interactive comprehensive medication reviews will be conducted via telephone or in person. A CMR may occur face-to-face if the pharmacy used by the targeted beneficiary participates in the MTM network and the beneficiary is able to meet with pharmacist in person. Alternatively, a telephonic comprehensive medication review will be available if the beneficiary is unable to meet with the pharmacist in person or if the beneficiary uses a pharmacy that is not in the MTM network. Beneficiaries using pharmacies not in the MTM network will be contacted by a call center pharmacist to conduct the CMR. In the event that the beneficiary is unable to participate in the CMR, pharmacists are instructed to conduct the CMR with a caregiver or the beneficiary's prescriber.

Beneficiaries will be asked for their medical history, all medications (prescription and non-prescription) that they may be taking, as well as any lab data they may have. A pharmacist will review all of the information and conduct the comprehensive medication review session with the beneficiary, or other approved recipient. During the CMR the provider considers general assessment points, including but not limited to potential drug interactions, duplicate therapy, and appropriate medication use. After the consultation is completed, the beneficiary will be provided with a personal medication list using the CMS standard CMR template including all of their current prescriptions, non-prescription medications, including OTCs and/or herbal products, and a written summary of the consultation, including any discussion points and recommended action items.

Targeted Medication Reviews (TMRs) occur on a quarterly basis, starting during the month in which a beneficiary is targeted to participate in the MTM program. As previously mentioned, all beneficiaries who meet the MTM program targeting criteria will receive TMRs, whether or not the beneficiary, caregiver, or prescriber, is able to receive or accept the CMR service. TMRs will occur quarterly through the end of the program year once the beneficiary has met the MTM targeting criteria. The beneficiary's prevalent prescriber is determined through claims analysis, and the TMR communication is sent to that prescriber via fax. If the prescriber cannot be reached via fax, the communication will be mailed to the prescriber.

TMR interventions are indentified via a claims analysis. Updated prescription claims data is used to identify potential medication-related problems, including safety issues, omissions in care, and beneficiary non-adherence for all targeted beneficiaries. If a beneficiary is found to have multiple drug therapy problems identified through the analysis, all of the drug therapy problem alerts will be compiled into a single

communication and sent to the primary prescriber for resolution via fax, or if the prescriber cannot be reached via fax, the communication will be mailed to the prescriber. In a manner similar to which updated prescription claims data is analyzed to identify potential medication-related problems, ongoing analysis of prescription claims data occurs to determine the resolution of previously identified drug therapy problems or identification of new drug therapy problems to be communicated during the next quarterly TMR.

PROVIDER INTERVENTIONS

During the CMR, the pharmacist may identify a drug therapy problem that requires immediate prescriber outreach. If this occurs, the pharmacist is instructed to telephone or fax the appropriate prescriber to resolve the drug therapy problem. Prescriber interventions that occur during the CMR are required to be documented by the pharmacist.

For ongoing monitoring, Targeted Medication Reviews for all enrolled beneficiaries in the MTMP are performed, based on prescription claims, to identify potential medication related problems in addition to the CMR. Case finding algorithms are run against prescription claims history on a quarterly basis to identify opportunities to reduce the risk of adverse events, improve compliance with national treatment guidelines, and impact potentially inappropriate prescription therapy.

This review includes medication interventions based on identified medication safety issues and Medicare plan quality metric issues, including but not limited to Drug/Drug Interactions; Drug/Age Interactions; High Risk Medications in Beneficiaries aged 65 years and older; Drug/Condition Interactions; Drug/Allergy Interactions; Drug/Gender Interactions; Duplicate Therapy; Diabetic with hypertension not taking an ACEI, ARB, or DRI; Diabetic not taking a Statin; Diabetic not taking antiplatelet therapy; Asthmatic taking long-acting beta-agonist but not taking an inhaled corticosteroid; Asthmatic overusing short-acting beta-agonist with no controller medication; non-adherence for diabetes-related medications; non-adherence for hypertensive-related medications; and non-adherence for cholesterol-related medications. These assessments are system generated and sent quarterly to prescribers per CMS guidelines. Interventions are sent to prescribers via fax, or mailed if a fax number is not available, to the physician with actionable suggestions to consider. The physician will review and determine what action, if any, is appropriate for the member.

The MTM Program meets all 2015 CMS program guidelines.

28. Does your organization perform retrospective DUR for all claims of a given client? Please provide frequency of retrospective DUR.

Our retrospective clinical management programs include a flexible suite of solutions that can be tailored to best meet NDPERS's specific goals. Our specific programs feature the Retrospective Safety Review and Safety and Monitoring Solution, which are focused on key safety issues, specific to members and their prescription regimens.

Core Components

- **Safety Review**

This program acts as a "safety net" for serious drug interactions that may have a negative clinical impact on a member and were not addressed at the point of sale. It allows for a change in the prescription if such an interaction is detected after the member obtains the original prescription. Our clinical staff review both mail and retail prescriptions within 72 hours after the claim adjudicates for potential safety issues that were not addressed when the drug was dispensed. Then, if needed, they message the physician with actionable member-specific communication that identifies the clinical issue and provides suggestions for improving medication therapy.

- **Safety and Monitoring Solution**

Our Safety and Monitoring Solution (SMS) helps identify potential fraud, waste and abuse by reviewing claims through an automated series of edits that identify individuals with high-cost drug use patterns suggesting potential abuse or misuse. A clinical pharmacist then conducts an analysis of the generated profiles, which are stratified by risk score. Based on that analysis, if a potential case of fraud or misuse is identified, we will send a letter to the appropriate prescriber(s) alerting them to the issue, and will conduct follow-up activities on the targeted participants for up to six months. The SMS reviews the following criteria to help identify problem cases:

- Total number of controlled substance claims – Identifies total number of continuous and concurrent (two or more at the same time) targeted drugs
- Total number of prescribers – Identifies unusually high number of concurrent controlled substance prescribers
- Total number of pharmacies – Identifies total number of distinct pharmacies that have filled targeted drugs
- Excessive utilization – Identifies plan participants who exceed the recommended utilization for targeted drug classes
- High cumulative daily dosage-evaluates acetaminophen (APAP) and morphine equivalent
- Geographic distribution of prescribers and pharmacies – Identifies patterns that indicate a member may be doctor or pharmacy shopping to avoid detection
- High total claim cost – Identifies potential misuse or abuse based on targeted drug costs.

In addition, we can work collaboratively with a client to refer a member case to:

- Medical case management for further monitoring or additional intervention
- The client's fraud investigation unit for additional investigation and intervention.

Our Safety and Monitoring interventions include regular profile monitoring and data sharing to meet CMS requirements for tighter drug utilization review (DUR) controls. Interventions can include implementation of member-specific utilization management edits (MSUME), and assisting CMS in anti-fraud reviews and reporting of individual cases to Medicare Drug Integrity contractors (MEDICS).

29. What is the generic utilization and substitution rate for your overall book of business nationally and in North Dakota?

	2012	2013	2014 YTD
Book of Business			
Generic utilization rate	78.3%	80.9%	82.8%
Generic substitution rate	97.9%	98.5%	98.6%
North Dakota			
Generic utilization rate	82.40%	83.50%	84.20%
Generic substitution rate	98.20%	98.60%	98.60%

Source: CVS/caremark funded book of business, Maintenance Choice included in Mail. YTD 2014 represents Jan-Jun. North Dakota represents GDR and GSR of members with an address in North Dakota.

1.9.3 Trend Analysis

30. Your organization must be able to provide NDPERS with a comprehensive, annual trend analysis report as background for making pricing decisions. At a minimum the report must:

a. Contain extensive utilization and drug spend data that presents future trend drivers, both industry wide and specific to our programs.

Confirmed

b. Provide information on the generic pipeline, drug indication changes that may affect drug utilization, specialty drug utilization trends, new drug introductions and other similar trend drivers.

Confirmed

c. Show the impacts of, and provide recommendations for addressing price inflation, rebate performance and other pricing related drivers, in addition to pharmacy network trends and opportunities.

Confirmed

31. Describe your organizations Trend Analysis reporting capabilities. Provide sample reports that reflect your organization's ability to provide thorough trend analysis for NDPERS.

CVS offers comprehensive trend analysis reporting including breakdowns of price inflation, utilization and drug mix. Recording is based on a rolling twelve month basis. Please see Attachment 6.

1.9.4 Specialty Drug Program

32. Describe in detail how your organization will manage specialty and compound drugs based on NDPERS's current plan design. Provide detailed information about your organization's capabilities to administer a specialty drug program. Indicate specific results your specialty drug program has achieved for your current and past clients in terms of reduced program costs (quantitative and qualitative). Include details about the Specialty pharmacy you contract with. Provide your listing of "Specialty" drugs in Appendix D.

CVS Caremark Specialty Pharmacy provides a comprehensive prescription dispensing and clinical monitoring process for specialty pharmaceuticals. We provide individual support for your members throughout their course of therapy in order to help them better manage their conditions. The following details the process for each of your members.

- **Member Enrollment and Referral Receipt**

  Member and prescription information ("referral") is received by Specialty Customer Care, via fax, Internet, or phone. The information is sent by referral sources such as physicians, nurses, case managers, as well as members to be enrolled into our systems. The referral source then receives communication confirming that the referral was received (either by mail, fax, e-mail, phone, or online).

  Our staff works with the physician and member to collect any missing information necessary to proceed with prescription fulfillment. This information includes demographic and clinical information required to process a possible prior authorization, as well as to ensure the appropriateness and safety of the therapy.

- **Benefits Investigation and Plan Design Verification**

  Our staff will consult with NDPERS to complete the benefits investigation, which involves verifying the member's plan eligibility, facilitating collection of any necessary

information to process prior authorization, and determining the member's estimated financial responsibility.

Information gathered during the benefits investigation process allows us to communicate financial obligations to the member, as well as the outcome of a prior authorization, financial obligations, and next steps in prescription processing to both the member and physician.

- **Initial Member Assessment and Therapy-Specific CareTeam Support**

  The member is then assigned to a dedicated CareTeam, comprised of both clinicians and non-clinicians that will be responsible for the care and management of the member and the prescribed treatment. Upon receiving the completed member and prescription information, the CareTeam conducts an initial member assessment that includes a review of the member information against the prescription to ensure accuracy, efficacy, and safety (e.g. dosing, drug interactions, etc). Any issues identified are discussed and clarified with the physician.

  After the prescription is entered into the pharmacy fulfillment system, the member is then contacted to complete the initial assessment and arrange for delivery. At this time, our staff conducts an assessment of the member's ability to self-administer the medication or the need for coordination of nursing or other medication administration services. Our staff also provides an overview of the condition being treated, counseling on the prescribed therapy, its appropriate use, potential adverse reactions, signs, and symptoms of disease progression, appropriate medication storage, and the importance of adherence to treatment in optimizing therapeutic outcomes. Additionally, we review items to be included in the delivery such as the medication, supplies, and educational information including the New Member Packet to familiarize the member with our services, the drug therapy, disease state, support organizations, etc. The member is also provided information on how to contact us in case of emergency.

- **Quality Controlled Dispensing Process**

  With the creation of the referral's prescription label and other written material, the back end process of dispensing begins with the selection of the product and ancillary supplies. Our staff scans the appropriate product for dispensing in order to track lot numbers and manage inventory. In the event of product recall, our pharmacies can identify which members have received the recalled product quickly and work with the manufacturer, physician, and member to enact the appropriate corrective action and prevent any negative consequences to the member. Before moving into our shipping area, pharmacists verify that the **prescription is correctly labeled and selected.**

- **Confidential, Temperature-Sensitive Shipping**

  Our delivery procedures include maintaining the medication at an appropriate temperature until received by the member as well as utilizing shipping packages which are unmarked (e.g., as to contents or other confidential information). We can also offer specialty pharmacy clients a delivery choice. Members can have their medication shipped to their home, work, doctor's office, or the location of their choice, including select CVS/pharmacy locations. Because of the stability requirements and high-cost for the dispensed specialty medications, the primary method of product delivery is by UPS or Federal Express because of their high reliability and consistent results. Each morning an "Exception Report" is generated to determine the status of deliveries and to identify situations in which delays are expected. Members are contacted in the event of delays or lost packages.

- **Follow Up Assessment and Refill Coordination**

  Every member will have a follow up assessment and their refill coordinated prior to the exhaust date of their last fill. Our pharmacy system calculates all future refill dates, based on the quantity dispensed and prescription information. Approximately 5 to 7 days prior to the next shipment date, our pharmacy staff proactively contacts the member to conduct a follow-up assessment, including a discussion of the member's progress on therapy, identify any instances of non-compliance, discuss any potential issues or adverse effects that may be affecting treatment, review any changes to the member's medication regimen or dosing schedule, and arrange for the next delivery. Any identified therapy-related issue is communicated to the physician. Our pharmacy staff works with the member and/or physician to develop a plan to help the member overcome any treatment obstacles and maintain adherence to therapy.

Cost containment Programs

CVS Caremark specialty pharmacy programs are designed to help improve trend for NDPERS while improving the health of your members by maximizing the cost-effective use of specialty medications among your member population. With that in mind, we have developed several programs to help reduce the costs related to inappropriate use or overuse of specialty therapies.

- **Assay, Dose and Waste Management**

  We have established proven processes for proper assay, dose, and waste management. Our solutions help better control the quantity and quality of medication on hand to ensure the most efficient use and quality of high-cost specialty medications. Our key processes include:

  - Prescription review to ensure appropriate dose
  - Routine CareTeam outreach calls before each shipment:
  - Calls to educate members on proper drug storage, preparation and self-administration, safety concerns and drug interactions, inventory rotation, and expiration date verification
  - Calls to monitor drug supply, preventing drug wastage, or stockpiling
  - Lot-tracking to facilitate response to product recalls
  - Cold chain management, including temperature control from manufacturer to member to help ensure medication stability
  - Maintaining medication pedigree to ensure that all products are stored and shipped according to manufacturer guidelines.

  For certain therapies (e.g., hemophilia, respiratory syncytial virus, fertility) we use processes to help identify the most appropriate dosage to send at each dispense. We have a proprietary Synagis Dosing Management Tool to predict future dose requirements with 98.9% accuracy prior to injections and with 99.2% dose accuracy for the entire course of therapy. The CVS Caremark Specialty estimated dosing accuracy is superior to the "best guess" or CDC growth chart methods used by other distributors and allows our clients to realize significant savings per Synagis member. In the 2011-2012 RSV season, cost avoidance associated with our dose management program for Synagis was 7% of total Synagis spend.

  Additionally, our broad inventory of clotting factor and precise hemophilia therapy management helps our clients realize significant savings. We ensure a tight standard variance on an aggregated basis between the prescribed and dispensed dose. The industry standard is +/-10% for all dispenses aggregated while the CVS Caremark Specialty standard is < 2%. In 2012, we achieved an aggregated variance of 0.43%.

Compound Drugs

After the industry-changing mandatory NCPDP D.0 multi-ingredient compound claims processing rules in January 2012, we have noted the increase in compound claims processing trend for some clients. As such, we are taking a proactive, flexible approach to compound management and provide several plan design options for clients to address compound claim management. Based on recent industry dynamics and heightened concerns about the cost of multi-ingredient compounds, we are working closely with our clients to understand key drivers, address the root cause, and provide innovative solutions.

Our proactive and holistic approach provides clients with options that allow a tailored solution to ensure members get the most appropriate medication therapy based on clinical evidence rules while avoiding unnecessary expense to the plan. This approach encompasses the following ways to control high-cost compounds:

- Management of plan coverage of certain compound components, including questionably effective topical pain agents
- Application of smart edits for expensive bulk compounding ingredients;
- A robust and comprehensive audit approach to manage the retail pharmacy network
- Client-specific reporting on pharmacies and physicians, including reporting that demonstrates the provider's impact to the plan's cost
- Pharmacy provider agreement enforcement; and
- An option to implement a variety of utilization management parameters, applied either to all compounds, or compounds above a specified cost threshold.

All of these tools are ways that CVS Caremark is working with our clients to more effectively address the new trends in multi-ingredient compound claims processing.

1.9.5 Network Accessibility and Disruption

33. How are pharmacies selected for inclusion in your network? Would your organization be willing to contract with additional pharmacies if there are geographic locations where participants live but which do not have access to one of your pharmacies?

Annually, CVS Caremark downloads all Medicare Part D member data from the CMS Website (it is updated and placed on the CMS Website in early January each year) and we use this data to run against our network using CMS pharmacy access standards. This reporting is completed to demonstrate our retail Medicare Part D pharmacy network meets required access standards.

Access Standards

Access standards can be required by the plan, required by state or federal regulations, or the plan can inquire as to what is the best access standard for its demographics. Typically, CVS Caremark complies with CMS access standards for Medicare Part D plans, which are:

- 90% of the member population should have access to at least one pharmacy within two (2) miles in urban areas
- 90% of the member population should have access to at least one pharmacy within five (5) miles in suburban areas
- 70% of the member population should have access to at least one pharmacy within 15 miles in rural areas.

Medicare Part D pharmacy access is measured in the aggregate to determine if the pharmacy network meets/exceeds access standards.

Frequency of Running an Analysis

Pharmacy access analysis can be performed on a quarterly or annual basis and also can be performed as requested by plans on a specific basis using the standard request process through your CVS Caremark Account Team.

For Part D plans, per CMS guidance and regulations provided in section 50.10 of Chapter 5 of the Prescription Drug Benefit Manual, a retail 90-day program must be provided to all Medicare Part D members, allowing them the ability to receive Part D drugs through a retail pharmacy rather than a mail service pharmacy. CVS Caremark offers a 90-day Medicare Part D Extended Days' Supply Network, which is a subset of the CVS Caremark Medicare Part D Network. Extended Days Supply pricing is applicable for non-specialty claims equal to or greater than 84 days' supply filled by a participating Extended Days' Supply Network Pharmacy. Claims greater than 83 days' supply can only be filled by an Extended Days' Supply network pharmacy.

34. Indicate which major chain stores are not included in your proposed network for NDPERS.

The CVS Caremark Medicare Part D National Network and Extended Days Supply (EDS-90) Network currently has nearly 68,000 pharmacies, including all major drug store chains and other large retail merchandisers, grocery chains, and independent pharmacies, providing broad national coverage and excellent access.

The network proposed is based on the approximate number of network pharmacies as of the date of this proposal. Pharmacy network participation will vary over time and CVS Caremark does not guarantee the approximate number of network pharmacies.

1.9.6 Medicare Part D

35. Describe the ability of your organization to provide Medicare Part D coverage for Medicare eligible retirees enrolled in the NDPERS group health insurance program. Identify any subcontractor that would be used to provide Medicare Part D coverage to the NDPERS Medicare eligible retirees and note that NDPERS reserves the right to approve the subcontractor. Also identify what type of plan would be used (e.g. 800-Series EGWP, Direct-Contract EGWP).

Through our existing relationship with ClearStone Solutions, BCBSND is confident that it will continue to provide compliant, quality Medicare Part D coverage to the Medicare eligible retiree members of NDPERS.

ClearStone Solutions
ClearStone, in conjunction with its vendors, provides best-in-class integrated administrative services for government programs, including consulting and program design, program management, cost management and quality solutions. ClearStone has achieved a CMS Star Rating of 5 Stars for 3 of the past 4 years, including a recently announced 5 Star rating for the current plan year.

Two key vendors working with ClearStone are TMG Health, Inc. and CVS Caremark.

TMG Health
TMG Health is a leader in Medicare Advantage and Part D Business Process Services, administering more than 30 plans with 2 million-plus Medicare and Medicaid members, 20 million health claims, hundreds of thousands of enrollments and 3.5 million service calls annually throughout all 50 states. Clients working with TMG receive access to best-practices based on its experience in serving large populations, ongoing information technology maintenance and upgrades to assure best-available technologies. TMG also has a deep commitment to meeting CMS requirements for transaction services. TMG is a subsidiary of Health Care Service Corporation (HCSC), made up of four Blue Cross and Blue Shield plans.

CVS Caremark
CVS Caremark has been providing pharmacy benefit management and related services in support of its clients in the Medicare Part D program since the inception of the Part D program in 2006. CVS's continual growth impact its clients positively; its size and experience have resulted in decreased pharmacy spend, increased cost savings, and the highest levels of service, care and performance.

CVS supports both PDP and MAPD clients and provide a comprehensive array of services in the Medicare marketplace, ranging from Medicare Part D enabling core adjudication and PBM processing to a complete set of specialized Medicare Part D administrative services.

Leadership and support of Medicare Part D programs is a corporate priority for CVS Caremark, and they have invested heavily in the infrastructure, knowledge, and personnel required to effectively meet the needs of plans in the complex and evolving Medicare arena. Their service offerings combine the operational excellence of CVS Caremark with unmatched innovation and thought leadership to provide best-in-class Medicare services to their clients. A total investment of over $50 million has been made by CVS in its Medicare program operations, and they have committed to continuing to invest in Medicare Part D and RDS program support services to ensure compliance with ongoing regulatory changes and to further enhance the services that they provide.

36. How many EGWP plans does your firm manage?

Group MedicareBlue Rx is offered to 170 employer groups. As of 1/1/2015, Group MedicareBlue Rx will also be able to leverage the wealth of EGWP knowledge that CVS/Caremark brings in their experience with 270 EGWP clients.

37. How many members participate in the EGWP plans that you service?

Group MedicareBlue Rx membership as of 9/1/14 – 45,696 enrollees. As of 1/1/2015, Group MedicareBlue Rx will also be able to leverage the wealth of EGWP knowledge that CVS/Caremark brings in their experience with approximately 4,000,000 EGWP members.

38. Describe how Out Of Pocket ("OOP") and True Out Of Pocket ("TrOOP") expenses are applicable to EGWP PDP Participants for 2014 and the differences, if any, that can be expected in 2015 and beyond.

We comply with CMS requirements for calculating claims and TrOOP amounts, including the requirement that assistance provided to members by AIDS Drug Assistance Programs and I/T/U facilities will now count towards TrOOP. CVS Caremark maintains an indicator on the drug file for Medicare Part D drug status. If the drug is considered to be a Part D drug, meaning that it is considered to always be covered under Part D or is a potential Part B or Part D drug that is determined to be Part D, the member pay amount is assumed to be paid by the member, and is applied towards the TrOOP. The covered drug cost – meaning the sum of the applicable ingredient cost, dispensing fee, sales tax, and/or vaccine administration fee on the claim – is applied toward the member's total covered drug spend.

39. Describe your understanding of the restrictions placed on EGWP + Wrap plans by CMS.

CVS follows all CMS guidance regarding EGWP administration, including but not limited to Chapters 3 and 12 of the Medicare Prescription Drug Plan Manual, CMS Medicare Marketing Guidelines, as well all other CMS guidance chapters which apply to Part D plans overall. As an EGWP plan, Group MedicareBlue Rx leverages many waivers/exceptions outlined in CMS Part D guidance which allow for greater flexibility and ease of administration for an employer group, including but not limited to:

- Expanded processing windows for valid EGWP enrollment/disenrollment requests
- Use of Special Election Period available to all enrollments into and disenrollment from, Part D EGWP plans such as Group MedicareBlue Rx

- Support of employer group Part D enrollment and disenrollment mechanisms
- Suppression of unnecessary member outreach regarding Retiree Drug Subsidy benefit no longer being offered by employer group
- Flexibility in member material development, material exclusions, CMS approval requirements and timing of issuance

40. Please describe the Part D enrollment process under your PDP: Are you able to automatically group-enroll members into Medicare Part D?

NDPERS current Part D program is bundled with the health product. BCBSND will continue to support this automatic enroll option. BCBSND can support elective enrollment processes, including paper/online enrollments.

41. Please describe your Part D disenrollment process for both voluntary and involuntary disenrollments.

Group MedicareBlue Rx follows CMS guidance regarding required components of a written voluntary disenrollment request from an enrollee, allowable disenrollment effective dates for disenrollment from a Part D EGWP, and processing timeframes for those complete voluntary disenrollment effective dates. Involuntary disenrollments, such as disenrollment due to death, non-payment of premium, and loss of Medicare eligibility, are processed per CMS guidance, as well. Group disenrollments, in which the group determines that a retiree no longer meets group eligibility criteria, are processed by Group MedicareBlue Rx following CMS required group notification to impacted members of the prospective disenrollment by the group.

42. Please describe the Part D enrollment process under your PDP: Are there differences for members who "aged in" to Medicare while enrolled in your plan, and members who are Medicare-eligible when they first enroll in your plan?

The current program is an automated enrollment process determined by NDPERS. BCBSND will continue to support this model. For BCBSND, there are no variations for members that "age in" and members that are Medicare-eligible when they first enroll.

43. Describe the changes in the plan design described herein, if any, that would be required to maximize collection of all available subsidies, reinsurance, discounts or rebates.

Group MedicareBlue Rx administers the current NDPERS Part D EGWP design requested and can continue to provide support in the future.

44. Describe your systems capabilities that allow coordination of benefits between Medicare Part D and a "wrap-around" plan at the point of sale. How is this handled for members who are enrolled in another Medicare Plan with a different PDP?

- CVS Caremark PDS supports and follows all CMS guidelines and regulations along with NCPDPs defined COB process. This process has several key components:
- The beneficiary enrolls into a Medicare Part D Plan. Upon enrollment, and annually thereafter, the member is surveyed by the Medicare Part D sponsor for information about any additional payers they may have.
- Information about other payers is sent to CMS, which compiles all available insurance information on the beneficiary. CMS returns information about other payers to the Medicare Part D plan in the form of a COBC file.
- The Medicare Part D plan provides the COBC file to CVS Caremark PDS (for plans who manage their own enrollment process). CVS Caremark PDS loads the COBC data information for use in claims processing: as a pharmacy submits a claim, information from the COBC file is returned in the claim response, indicating if other coverage is available. This is commonly referred to as "ADDINS" messaging. Based upon this messaging, the pharmacist submits additional claims to other payers. The beneficiary is then asked to pay his/her final cost share.

- Any supplemental payments are routed through the TrOOP facilitator, who formats and transmits an N1 transaction back to CVS Caremark PDS. The N1 indicates how much the supplemental payer paid on behalf of the beneficiary.
- An N1, when received, is matched back to its Medicare Part D claim. At the time the N1 is posted, the COBC data is read to determine if the supplemental payment is qualified or unqualified. Qualified payer's payments on behalf of a beneficiary are applied toward the beneficiary's TrOOP balance; unqualified payer's payments are not. If no COBC data is found, the supplemental payer is assumed to be unqualified and the N1 is marked as "Unmatched."
- CVS Caremark PDS runs a monthly update process that attempts to compare unmatched N1 records to recently loaded COBC files; as matches are made, claim adjustments are also created. Once that process is complete, a separate job runs that provides files of any remaining unmatched N1 transactions to Medicare Part D plans. The Part D plans then use this information to survey members about other health insurance they may have.

CVS/Caremark provides our clients flexible solutions for coordination of benefits (COB) to support multiple payor transactions.

This COB process requires that the client identify those members who have a secondary benefit, and the client must provide a flag on the eligibility files indicating those members who have secondary coverage. This secondary coverage flag indicates effective dates, so the COB rules apply only as applicable to the date of service on the claim.

In addition, our COB calculation methods adhere to NCPDP standards for requirements and capabilities.

Single Transaction COB Option (STCOB)

With our single transaction COB processing option, a member may enroll in multiple prescription benefit plans within the same client. The pharmacy submits a single claim transaction and CVS/Caremark adjudicates the prescription against both the primary and secondary plans in the proper order. A single response is returned to the pharmacist, who collects the appropriate member cost share. This type of COB processing requires that a client identify a member's primary and secondary coverage and provide a link via the eligibility file to accommodate the single transaction. Claims will always be adjudicated in accordance with plan design parameters defined by NDPERS.

Paper Claims

As part of the paper claim process, we will verify that required documentation is provided with the claim form by the member (i.e., primary and secondary coverage details) and enter the appropriate information into our system. The claims processing system will then adjudicate the claim according to the client's plan design. All back-end client reporting and billing relative to claims submitted would detail actual claims experience.

Program fees

We do not charge additional fees for the processing of a point-of-sale coordination of benefits claim.

45. How often do you review the formulary under your Medicare plans?

CVS/Caremark maintains the 2015 NDPERS Medicare Part D formulary on a weekly basis, reviewing all new drugs that launch. Line extensions of existing formulary drugs are added promptly and all new entities are referred to our P&T Committee process. Once approved by our National P&T Committee, these new products are added to the adjudication system and to the HPMS files upon receipt of a proxy NDC/RxNorm CUI number on a formulary reference file update. Formulary PDF files are updated with upcoming changes, to post online.

Multiple check points in our process ensure that each month's formulary changes are correctly captured and coded into the adjudication platform. In addition, our formulary management tool has audit reports that are always reviewed by a pharmacist before the files are exported to CMS.

Negative change notices are included in all member EOBs at least 60 days before the effective date of the change. We include CMS-approved negative formulary changes in the upcoming formulary change section of the Explanation Of Benefits. In accordance with CMS guidance, members that receive EOBs 60 days before the change effective date and who have the target drug in claim history within the last 120 days (or from start of calendar year, whichever is greater) are considered notified. Members who do not receive EOBs 60 days before the change is effective but have history of a negatively impacted drug during the same time periods as above, are mailed a stand-alone notice of change. Additional mailings are sent to new starts to therapy identified prior to the effective date of the change and an additional 60 day grace period is provided. A secure Web site is also available to obtain copies of member EOBs. Reprints of EOBs are available upon member request.

46. Describe your handling of members who are eligible for the low income subsidy available under Medicare Part D, specifically: How are the members identified, and how are they informed of their enhanced benefits?

Group MedicareBlue Rx receives daily CMS notification of member LIS status via TRR, and member is notified by Group MedicareBlue Rx in writing within CMS required timeframes.

47. Describe your handling of members who are eligible for the low income subsidy available under Medicare Part D, specifically: How are these members reported to the plan sponsor?

Direct subsidy and Low income premium subsidies are paid by CMS monthly and these amounts would be distributed to BCBSND monthly along with sufficient detail to incorporate the NDPERS portion into their self-insured billing process.

48. Describe your handling of members who are eligible for the low income subsidy available under Medicare Part D, specifically: How often are premium refunds issued to the plan sponsor?

Low income premium subsidy dollars for this group would be distributed to BCBSND on a monthly basis along with the other fully insured business. Group MedicareBlue Rx would separately provide them with the portion of those dollars related to NDPERS on a monthly basis to incorporate into the self-insured billing for which BCBSND would be responsible.

49. Provide a copy of the proposed GWP formulary.

Please refer to Attachment 22 for a copy of the CVS Formulary for the Part D program.

50. Describe the processes to collect funding from the following sources the EGWP PDP, including the timing and frequency with which such funds would be submitted to PERS.

a. Direct Subsidy

b. Coverage Gap Discount Program

c. Catastrophic Reinsurance

d. Low Income Cost Share Subsidies

e. Low Income Premium Subsidies

f. Manufacturer Rebates

Direct subsidy and Low income premium subsidies are paid by CMS monthly and these amounts would be distributed to BCBS ND monthly along with sufficient detail to incorporate the NDPERS portion into their self-insured billing process.

Reinsurance, and Low Income Cost Share subsidies are paid by CMS annually and these amount would be distributed to BCBS ND annually along with sufficient detail to incorporate the NDPERS portion into their self-insured billing process. Note that the reinsurance and Low Income Cost Share payment from CMS is generally received approximately eleven months after the end of each plan year.

Coverage Gap settlements are received from manufacturers throughout the year and would be distributed to BCBS ND four times each year along with sufficient detail to incorporate the NDPERS portion into their self-insured billing process.

Rebates will be distributed quarterly by our Pharmacy Benefit Manager and the ND portion of these amounts would be distributed to BCBS ND quarterly along with sufficient detail to incorporate the NDPERS portion into their self-insured billing process.

1.10 PBM Financials

51. **Bidder confirms the use of Medispan or another nationally available and nationally recognized reporting service of pharmaceutical drug information in determining the classification of drugs (e.g. legend vs. over the counter, generic vs. brand, single source vs. multisource) for the purposes of plan adjudication and the calculation of discount and rebate guarantees.**
    a. **Confirmed**
    b. **Not confirmed, see explanation**

    Confirmed.

52. **Bidder confirms that the discount guarantees proposed represent Medi Span/First Databank post-settlement pricing.**
    a. **Confirmed**
    b. **Not confirmed, see explanation**

    Confirmed.

53. **Bidder confirms that for the purposes of reconciling guarantees, proposed AWP discount will be applied to each claim individually and shall not mean "Average AWP" nor "Effective AWP"**
    a. **Confirmed**
    b. **Not confirmed, see explanation**

    Confirmed.

54. **Bidder confirms Zero Balance Due claims will be reconciled at the guaranteed AWP component discount and shall not be counted as AWP-100%**
    a. **Confirmed**
    b. **Not confirmed, see explanation**

    Confirmed.

55. **Bidder confirms members will pay the lowest of the copay, "Usual and Customary" (U&C), or discounted ingredient cost plus dispensing fees at retail/mail.**
    a. **Confirmed**
    b. **Not confirmed, see explanation** – See below

    Not confirmed. Members will pay the lesser of the copay or discounted ingredient cost plus dispensing fee.

56. **Bidder confirms that specialty pricing will include ingredient cost discounts by drug with a minimum effective discount guarantee for all brand specialty drugs and a minimum effective discount guarantee for all specialty generic drugs.**

    a. **Confirmed**

    b. **Not confirmed, see explanation** – See below

    Not confirmed. Specialty drugs will be priced on a product level basis

57. **Bidder confirms that pricing for Specialty Drugs added to the list on or after the date the proposal is submitted will not automatically default to a minimum discount in the therapeutic class.**

    a. **Confirmed**

    b. **Not confirmed, see explanation**

    Confirmed. CVS/Caremark and ClearStone, on behalf of NDPERS, will collaborate on the pricing and addition of new drugs to the Specialty Drug list. Should the Parties be unable to reach agreement as to an alternate price, ClearStone shall pay, or effectuate payment to, PBM for new Specialty Drugs at the lesser of MAC or AWP- 16% + $0.00 Dispensing Fee.

58. **Bidder confirms that generic discount guarantees include the combined MAC and non-MAC pricing**

    a. **Confirmed**

    b. **Not confirmed, see explanation**

    Confirmed.

59. **Bidder confirms retail and mail discount guarantee calculations should exclude specialty/biotech drugs, compound drugs, and vaccines.**

    a. **Confirmed**

    b. **Not confirmed, see explanation**

    Confirmed.

60. **Bidder confirms that overages in any financial guarantee may not be used to offset any shortfalls in another financial guarantee. This includes guarantees within the same delivery channel (e.g.: surplus in retail brand discount will not be used to offset shortfall in retail generic discount)**

    a. **Confirmed**

    b. **Not confirmed, see explanation**

    Confirmed.

61. **Bidder confirms that dispensing fees proposed are per claim maximums and not averages.**

    a. **Confirmed**

    b. **Not confirmed, see explanation**

    Confirmed.

62. **Bidder confirms proposed financial guarantees are not tied to aggregate days' supply utilization at retail or mail (eg: rebates will not be impacted if the aggregate retail day supply at the end of the reconciliation period is 23 days instead of 30 days).**
    a. **Confirmed**
    b. **Not confirmed, see explanation**

    Confirmed.

63. **Bidder confirms that after two years of the contract, PERS will have the right to solicit pricing from the market. Should the results indicate a 2% improvement opportunity, PERS will have the opportunity to re-negotiate pricing.**
    a. **Confirmed**
    b. **Not confirmed, see explanation** – See below

    Not confirmed. Market Check rights are held by ClearStone on behalf of participating groups, including NDPERS.

64. **Bidder confirms postage increases will not be passed on to PERS.**
    a. **Confirmed**
    b. **Not confirmed, see explanation**

    Confirmed.

65. **Bidder confirms that MAC pricing will be applied to generics dispensed at mail.**
    a. **Confirmed**
    b. **Not confirmed, see explanation**

    Confirmed.

66. **Bidder confirms proposed MAC list includes minimum of 95% of all generic drugs.**
    a. **Confirmed**
    b. **Not confirmed, see explanation** – See below

    Not confirmed. The CVS/Caremark MAC list applicable to NDPERS represents approximately 88-90% of generic claims.

67. **Bidder confirms that only one (1) MAC list will be used for PERS at retail and mail.**
    a. **Confirmed**
    b. **Not confirmed, see explanation**

    Confirmed. We confirm that the MAC list of products for NDPERS is identical for all programs and delivery channels.

68. **Bidder confirms that drug status as "Multi-Source Brand", "Single-Source Brand", "Brand Drug with Generics", and "Generic" will be used based on Medi-Span indicators.**
    a. **Confirmed**
    b. **Not confirmed, see explanation**

    Confirmed. We use multiple indicators from Medi-Span Master Drug Database (Medi-Span), and their associated files, as updated regularly by Medi-Span, or another nationally available reporting service of pharmaceutical drug information in determining the classification of drugs (e.g., legend vs. over the counter, brand vs. generic, single-source vs. multisource).

69. **Bidder confirms that all "Generic" drugs will be included in the "Generic Discount Guarantee" for purposes of guarantee reconciliation (this includes all "Single-Source Generics", generics with limited availability, and generics that are subject to patent litigation).**

    a. **Confirmed**

    b. **Not confirmed, see explanation**

    Confirmed.

70. **Bidder confirms they are currently certified by CMS as an EGWP Administrator**

    a. **Confirmed**

    b. **Not confirmed, see explanation**

    Confirmed.

1.11 Economy to be Affected

71. **Please indicate if you will have an office in North Dakota and where most of the work on this contract will be done?**

    BCBSND has offices in North Dakota that will manage the overall account. The administration of the program will be done by TMG in Pennsylvania, Clearstone in Minnesota and CVS/caremark in Rhode Island.

72. **Please identify the number of employees you will employ in North Dakota pursuant to this contract.**

    BCBSND employs over 800 employees in the state of North Dakota to service our 500,000 members. NDPERS represents over 62,000 of our members or about 12% of our book of business. BCBSND will not require the addition of employees in the state based on being the incumbent carrier for the Part D product.

73. **Of your total administrative fee please estimate the amount that will be spent in North Dakota and the amount that will spent outside the state.**

    Over 80% of the work specific to the Part D program is being done outside of the state of North Dakota. BCBSND does provide account management and limited customer service through our North Dakota based employees.

1.12 Fiduciary Responsibility

74. **Confirm your organization will assume full fiduciary responsibility for claim determination.**

    Confirmed.

    BCBSND will serve as the claim fiduciary for this Self Funded Agreement.

Appendix M:
Sample Business Associate Agreement

Appendix M:

Sample Business Associate Agreement (BAA)

BCBSND has received the Sample Business Associate Agreement. BCBSND is including a redlined version of this document in Appendix F. We are including a redlined BAA with the Minimum Contract Provisions for NDPERS consideration.

Appendix N:
Pharmacy Experience

Appendix N:

Pharmacy Experience

Blue Cross Blue Shield of North Dakota acknowledges receipt of the Pharmacy Expereince.

Attachments

Attachment 1

Attachment 1

Ingredient Cost Fact Sheet

PRIME THERAPEUTICS®

Fact Sheet | Study finds Prime has lowest ingredient cost per prescription

Pharmacy benefit arrangements are notoriously complicated. It can be tricky to distinguish drug costs from program expenses. Rebates and "spread" pricing arrangements can obscure actual costs and the accuracy of reported savings. And while drug trend can show how much and how quickly costs are growing, it can't reveal how those actual costs compare.

Ingredient cost measure offers a clearer view into pharmacy spending
By stripping away administrative and other program-related fees, ingredient cost offers a clearer view into pharmacy spending. With rebates included, the "net" ingredient cost per prescription provides a precise picture of the cost of drugs used by plan members.

Because it is based on actual drug costs, ingredient cost is useful in monitoring plan performance. It is also the best way to compare the performance of different pharmacy benefit managers (PBMs).

Independent study finds Prime and its clients outperform the industry in ingredient cost
Prime commissioned a study of the prescription drug costs of leading PBMs. Generic rates, network discounts and ingredient costs were compared against those of Prime's commercial book of business.

Key Results

The study found Prime had a ***$6.74 lower net ingredient cost*** *per prescription than the competitor average.*

Over the past three years, Prime has ***consistently*** *achieved lower net ingredient costs.*

The study found that Prime's net ingredient cost was the lowest – beating the competitor average by more than $6 per prescription. Analysis over three years showed that Prime's net ingredient costs were consistently the lowest (Figure 1).

Fig. 1 Net ingredient cost per prescription (Rx)

	Competitor avg.	Prime	Savings per Rx
2011	$61.77	$55.86	$5.91
2012	$62.13	$58.50	$3.63
2013	$63.58	$56.84	$6.74

Low net ingredient costs a result of Blue + Prime collaboration
Prime works with several leading Blue Cross and Blue Shield Plans across the nation. These plans hold strong positions within their regional health care markets. Prime focuses this market dominance and uses it to negotiate extremely competitive discounts with pharmacies and manufacturers. Blue Plans also influence key formulary, utilization management and benefit decisions that help control drug costs.

Trust, alignment and cooperation between Blue Plans and Prime help make medicine more affordable. On average, Blue + Prime members and clients collectively saved $6.74 (over what they might have paid using a competing benefit manager) on every prescription in 2013.

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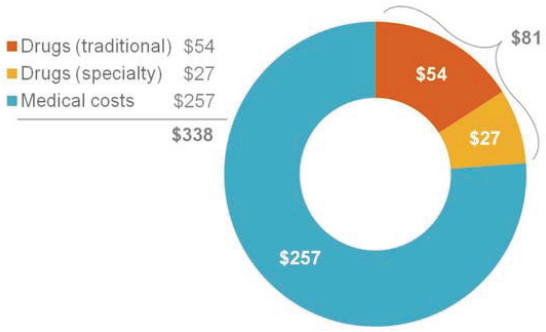
Generics help generate low ingredient costs
High generic dispensing rates and strong generic discounts contribute to Prime's low ingredient costs. Competitors were found to have higher discounts on traditional brand-name drugs. But with ever-smaller numbers of brand-name drugs being dispensed, brand discounts did not alter the results.

Drug costs a growing factor in health care spending
Prescription drugs are a key part of total health care costs. Drugs account for nearly one-quarter of all health care spending (Figure 2).[1]

Health spending in the United States has risen quickly over the past several years, and is expected to continue to grow. Drug spending is increasing as more high-cost specialty drugs are being used to treat a wide range of chronic illnesses.

Plan sponsors are looking to effective pharmacy benefit management as a way to tame growing health care expenses. And one of the easiest ways to cut spending is to *start with the lowest costs possible.*

Fig. 2 Average health care costs per member per month



Affordable medicine is part of Prime's purpose
Keeping costs down is just one of the ways Prime helps people get the medicine they need to feel better and live well. Prime follows a straightforward approach to deliver lower costs in a high-quality environment. We use our unique connections with Blue Plans to manage pharmacy in the context of total health. These efforts make a big difference in our members' and clients' health care costs.

To learn more about how Prime fulfills its commitment to make medicine more affordable, talk to your Prime representative or visit PrimeTherapeutics.com today.

About the study

Prime commissioned an independent third-party consultant to study the prescription drug costs of three national stand-alone PBMs and one captive PBM. Using data from the consultant's proprietary data warehouse, the study compared blinded data against Prime's full-service commercial book of business.

The study looked at the first quarters of 2011 through 2013. To ensure consistency, all prescriptions were classified as brand-name or generic based on Medi-Span definitions. Claim counts were adjusted to reflect consistent days' supply.

[1] Average for Prime's full-service commercial book of business, FY 2012; derived using combined medical and pharmacy data.

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Attachment 2

Attachment 2

Statutory Financial Statements

Statutory Financial Statements
December 31, 2013 and 2012

NORIDIAN®
Mutual Insurance Company

d/b/a BLUE CROSS BLUE SHIELD OF NORTH DAKOTA

Noridian Mutual Insurance Company
d/b/a Blue Cross Blue Shield of North Dakota

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December 31, 2013 and 2012

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CPAs & BUSINESS ADVISORS

Independent Auditor's Report

To the Board of Directors
Noridian Mutual Insurance Company d/b/a Blue Cross Blue Shield of North Dakota
Fargo, North Dakota

Report on the Financial Statements
We have audited the accompanying statutory statements of Noridian Mutual Insurance Company d/b/a Blue Cross Blue Shield of North Dakota (the Company), which comprise the statutory statements of admitted assets, liabilities, and policyholder surplus as of December 31, 2013 and 2012, and the related statutory statements of operations and changes in policyholder surplus, and cash flows for the years then ended, and the related notes to the financial statements.

Management's Responsibility for the Financial Statements
Management is responsible for the preparation and fair presentation of these financial statements in accordance with the accounting practices prescribed or permitted by the North Dakota Insurance Department. Management is also responsible for the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error.

Auditor's Responsibility
Our responsibility is to express an opinion on these financial statements based on our audit. We conducted our audit in accordance with auditing standards generally accepted in the United States of America. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on the auditor's judgment, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the Company's preparation and fair presentation of the financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the Company's internal control. Accordingly, we express no such opinion. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluating the overall presentation of the financial statements.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

Basis for Adverse Opinion on U.S. Generally Accepted Accounting Principles
As described in Note 1 to the financial statements, the financial statements are prepared using accounting practices prescribed or permitted by the North Dakota Insurance Department, which is a basis of accounting other than accounting principles generally accepted in the United States of America. The effects on the financial statements of the variances between the statutory basis of accounting described in Note 1 and accounting principles generally accepted in the United States of America, although not reasonably determinable, are presumed to be material.

Adverse Opinion on U.S. Generally Accepted Accounting Principles
In our opinion, because of the significance of the matter described in the Basis for Adverse Opinion on U.S. Generally Accepted Accounting Principles paragraph, the financial statements referred to above do not present fairly, in accordance with accounting principles generally accepted in the United States of America, the financial position of Noridian Mutual Insurance Company d/b/a Blue Cross Blue Shield of North Dakota as of December 31, 2013 and 2012, or the results of its operations or its cash flows for the years then ended.

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Opinion on Regulatory Basis of Accounting
In our opinion, the financial statements referred to above present fairly, in all material respects, the admitted assets, liabilities, and policyholder surplus of Noridian Mutual Insurance Company d/b/a Blue Cross Blue Shield of North Dakota as of December 31, 2013 and 2012, and the results of its operations and its cash flows for the years then ended, on the basis of accounting described in Note 1.

Change in Accounting Principle
As discussed in Note 1 to the financial statements, during 2013 the Company changed its method of accounting for its pension and postretirement benefits as required by Statements of Statutory Accounting Principles (SSAP) No. 92 and 102. Our opinion is not modified with respect to this matter.

Emphasis of Matter
As further discussed in Note 16 to the financial statements, the Company's wholly owned subsidiary, Noridian Healthcare Solutions, LLC, entered into an agreement for consensual exit from a significant contract with the State of Maryland, through the state's health insurance web-based marketplace. The Company is a party to this exit agreement with the State of Maryland. Management's assessment of the likelihood that claims will be made in conjunction with this exit and the probability of loss is discussed in Note 16 to the financial statements. Our opinion is not modified with respect to this matter.

Eide Bailly LLP

Minneapolis, Minnesota
June 26, 2014

Noridian Mutual Insurance Company
d/b/a Blue Cross Blue Shield of North Dakota
Statutory Statements of Admitted Assets, Liabilities, and Policyholder Surplus
December 31, 2013 and 2012

	2013	2012
ASSETS		
CASH AND INVESTED ASSETS		
Bonds	**$ 170,647,000**	$ 177,588,000
Equity interests		
Preferred stocks	**139,000**	386,000
Common stocks	**72,203,000**	147,334,000
Real estate - occupied by the Company	**24,503,000**	25,818,000
Cash	**7,617,000**	46,763,000
Short-term investments	**70,580,000**	7,067,000
Other long-term invested assets	**47,000**	77,000
Total cash and invested assets	**345,736,000**	405,033,000
RECEIVABLES		
Premiums due and unpaid	**4,709,000**	3,248,000
Health care and other	**22,075,000**	20,725,000
Funds held by Federal Employee Program (FEP)	**28,696,000**	26,498,000
Investment income accrued	**1,959,000**	2,241,000
Amounts due from subsidiaries and affiliates	**24,048,000**	29,211,000
Amounts relating to self insured health plans	**10,589,000**	2,433,000
Total receivables	**92,076,000**	84,356,000
FEDERAL INCOME TAX RECOVERABLE	**1,967,000**	1,352,000
NET DEFERRED TAX ASSET	**6,900,000**	4,600,000
INTANGIBLE PENSION BENEFIT	**-**	3,215,000
ELECTRONIC DATA PROCESSING EQUIPMENT AND SOFTWARE	**11,510,000**	7,334,000
	$ 458,189,000	$ 505,890,000

See Notes to Financial Statements

Noridian Mutual Insurance Company
d/b/a Blue Cross Blue Shield of North Dakota
Statutory Statements of Admitted Assets, Liabilities, and Policyholder Surplus
December 31, 2013 and 2012

	2013	2012
LIABILITIES AND POLICYHOLDER SURPLUS		
AGGREGATE RESERVES FOR POLICY CONTRACTS		
Claims expense	**$ 144,378,000**	$ 137,060,000
Premium deficiency reserve	**10,900,000**	-
Unpaid claims adjustment expenses	**3,904,000**	3,012,000
Aggregate claim reserves	**1,500,000**	1,300,000
Total reserves for policy contracts	**160,682,000**	141,372,000
ACCRUED GENERAL EXPENSES	**25,702,000**	30,402,000
PROVISION FOR EXPERIENCE RATED REFUNDS	**14,713,000**	12,115,000
PREMIUMS RECEIVED IN ADVANCE	**20,708,000**	16,797,000
FEDERAL EMPLOYEE PROGRAM (FEP) PREMIUMS	**15,896,000**	14,198,000
AMOUNTS RETAINED FOR OTHERS	**6,205,000**	6,730,000
AMOUNTS DUE TO SUBSIDIARIES AND AFFILIATES	**3,043,000**	4,836,000
AMOUNTS HELD UNDER UNINSURED PLANS	**4,765,000**	4,993,000
ACCRUED PENSION	**1,943,000**	2,277,000
UNCLAIMED PROPERTY PAYABLE	**444,000**	203,000
GUARANTEE ACCRUAL	**5,000,000**	-
Total liabilities	**259,101,000**	233,923,000
POLICYHOLDER SURPLUS	**199,088,000**	271,967,000
Total liabilities and policy holder surplus	**$ 458,189,000**	$ 505,890,000

See Notes to Financial Statements

Noridian Mutual Insurance Company
d/b/a Blue Cross Blue Shield of North Dakota
Statutory Statements of Operations and Changes in Policyholder Surplus
Years Ended December 31, 2013 and 2012

	2013	2012
OPERATIONS		
PREMIUM INCOME	**$ 1,195,644,000**	$ 1,106,309,000
BENEFITS UNDER HEALTH POLICIES		
Hospital and medical benefits	**953,022,000**	867,708,000
Prescription drugs	**144,446,000**	129,368,000
Total benefits under health policies	**1,097,468,000**	997,076,000
Claims adjustment expenses	**43,090,000**	40,436,000
General and administrative expenses	**69,404,000**	54,691,000
Increase in reserves for health contracts	**10,900,000**	-
Total underwriting expenses	**1,220,862,000**	1,092,203,000
UNDERWRITING GAIN (LOSS)	**(25,218,000)**	14,106,000
OTHER INCOME		
Investment income	**12,376,000**	12,403,000
Realized capital gain (loss)	**(61,998,000)**	2,857,000
Other loss	**(2,926,000)**	(2,719,000)
	(52,548,000)	12,541,000
INCOME (LOSS) BEFORE INCOME TAXES	**(77,766,000)**	26,647,000
INCOME TAX PROVISION	**(3,022,000)**	(4,554,000)
NET INCOME (LOSS)	**$ (80,788,000)**	$ 22,093,000
CHANGES IN POLICYHOLDER SURPLUS		
BALANCE, BEGINNING OF YEAR	**$ 271,967,000**	$ 270,296,000
Net income (loss)	**(80,788,000)**	22,093,000
Change in unrealized appreciation on investments	**15,716,000**	(13,232,000)
Change in net deferred income taxes	**5,529,000**	(1,915,000)
Change in nonadmitted assets	**11,561,000**	(5,275,000)
Cumulative effect of change in accounting principles	**(24,897,000)**	-
BALANCE, END OF YEAR	**$ 199,088,000**	$ 271,967,000

See Notes to Financial Statements

Noridian Mutual Insurance Company
d/b/a Blue Cross Blue Shield of North Dakota
Statutory Statements of Cash Flows
Years Ended December 31, 2013 and 2012

	2013	2012
OPERATING ACTIVITIES		
Premiums collected	**$ 1,196,079,000**	$1,105,844,000
Investment income received	**13,867,000**	13,412,000
Other cash applied	**-**	(2,171,000)
Total income	**1,209,946,000**	1,117,085,000
Benefit and loss related payments	**(1,089,950,000)**	(978,694,000)
Expenses paid and aggregate write-ins for deductions	**(125,313,000)**	(86,693,000)
Income taxes paid	**(3,637,000)**	(2,141,000)
NET CASH FROM (USED FOR) OPERATING ACTIVITIES	**(8,954,000)**	49,557,000
INVESTING ACTIVITIES		
Proceeds from investments sold, matured or repaid		
Bonds	**48,792,000**	49,211,000
Stocks	**117,481,000**	55,644,000
Mortgage loans	**-**	300,000
Other invested assets	**1,114,000**	943,000
Miscellaneous proceeds	**1,244,000**	-
Total investment proceeds	**168,631,000**	106,098,000
Cost of investments acquired		
Bonds	**(41,973,000)**	(45,255,000)
Stocks	**(89,441,000)**	(79,180,000)
Real estate	**(1,107,000)**	(2,851,000)
Other invested assets	**(100,000)**	-
Total investments acquired	**(132,621,000)**	(127,286,000)
NET CASH FROM (USED FOR) INVESTING ACTIVITIES	**36,010,000**	(21,188,000)
FINANCING AND MISCELLANEOUS ACTIVITY		
Other cash applied	**(2,689,000)**	(59,057,000)
NET CHANGE IN CASH AND SHORT-TERM INVESTMENTS	**24,367,000**	(30,688,000)
CASH AND SHORT-TERM INVESTMENTS, BEGINNING OF YEAR	**53,830,000**	84,518,000
CASH AND SHORT-TERM INVESTMENTS, END OF YEAR	**$ 78,197,000**	$53,830,000

See Notes to Financial Statements

Note 1 - Summary of Significant Accounting Policies

Nature of Operations

Noridian Mutual Insurance Company d/b/a Blue Cross Blue Shield of North Dakota (Company or NMIC), a member of the Blue Cross and Blue Shield Association, an association of independent Blue Cross and Blue Shield plans, is incorporated as a mutual insurance company under the North Dakota Nonprofit Corporation Act and is subject to regulation by the North Dakota Insurance Department (Department).

The Company is organized to carry any lines of insurance now or hereafter authorized by the laws of the State of North Dakota and has the ability to market products in states other than North Dakota. The Company provides individual, group and association health insurance and pharmaceutical benefits under traditional and preferred provider organization contracts. The Company contracts with hospitals, physicians and other providers of health care in order to obtain discounts for subscriber members.

The Company also performs administrative services such as billing, collection and claim processing for other Blue Cross and Blue Shield plans, various governmental agencies and various fully and modified self-insured groups within the State of North Dakota. This administrative services business represents a significant portion of their business.

Basis of Financial Reporting

The Company prepares its statutory financial statements in conformity with accounting practices prescribed or permitted by the North Dakota Insurance Department.

The North Dakota Insurance Department recognizes only statutory accounting practices prescribed or permitted for determining and reporting the financial condition and results of operations of an insurance company and for determining its solvency under the North Dakota Insurance Law. The National Association of Insurance Commissionsers (NAIC) Accounting Practices and Procedures Manual and statutory accounting principles (NAIC SAP) has been adopted as a component of prescribed or permitted practices by the state of North Dakota. The following are some of the significant differences between NAIC SAP and accounting principles generally accepted in the United States of America (GAAP).

a) Investments in bonds are generally carried at amortized cost, while under GAAP, they are carried at either amortized cost or estimated fair value based on their classification according to the Company's ability and intent to hold or trade the securities;

b) Acquisition costs, such as commissions and other costs related to acquiring new business, are expensed as incurred, while under GAAP, they are deferred and amortized to income as premiums are earned;

c) NAIC SAP requires an amount be recorded for deferred taxes, however, there are limitations as to the amount of deferred tax assets that may be reported as "admitted assets"; and a federal income tax provision is required on a current basis for the statutory statements of operations;

d) Assets are reported under NAIC SAP at the "admitted asset" value and "non-admitted" assets are excluded through a charge against unassigned surplus, while under GAAP, "non-admitted assets" are reinstated to the balance sheet, net of any valuation allowance;

e) Comprehensive income and its components are not presented in the statutory financial statements;

f) Wholy-owned subsidiaries are reported under NAIC SAP as an investment, while under GAAP, wholly-owned subsidiaries are required to be consolidated;

g) The Defined Benefit Plan is currently accounted for under the guidelines of Statement of Statutory Accounting (SSAP) 102 and 92 for NAIC with certain limitations as to whether assets are admitted, as opposed to Accounting Standards Codificaton (ASC) 715 for GAAP accounting.

The State of North Dakota has adopted certain prescribed accounting practices, which differ from those found in NAIC SAP. Specifically:

1. Electronic data processing systems are allowed to be depreciated over a period not to exceed five years whereas under NAIC SAP the period cannot exceed three years (see Note 6),
2. North Dakota Century Code 26.1-05-19(33), commonly referred to as the "basket clause," provides for "Loans, securities, or investments in addition to those permitted in this section, whether or not the loans, securities, or investments qualify or are permitted as legal investments under its charter or under other provisions of the laws of this state. The aggregate admitted value of the Company's investments under this section may not at any one time exceed seven percent of the Company's admitted assets, or the amount equal to the Company's policyholder surplus in excess of the minimum policyholder surplus required by law, whichever is less,"; and
3. North Dakota single state domestic insurers are permitted to account for long-term certificates of deposit (CD's) as cash under certain conditions described in the North Dakota Department of Insurance Bulletin 2003-3 and will exempt CD's generally from the NAIC Securities Valuation Office (SVO) filing requirement. In compliance with this permitted practice, $3,000,000 in certificates of deposit have been reclassified from Schedule D – Investments to Schedule E – Cash as of December 31, 2013 and 2012. The Commissioner of Insurance has the right to permit other specific practices, which deviate from prescribed practices.

A reconciliation of the Company's net income and policyholder surplus between NAIC SAP and practices prescribed by the North Dakota Insurance Department is shown below:

	2013	2012
Net income (loss), North Dakota Insurance Department prescribed practices	**$ (80,788,000)**	$ 22,093,000
Depreciation of EDP equipment	**(1,187,000)**	(173,000)
Net income (loss), NAIC SAP	**$ (81,975,000)**	$ 21,920,000
Policyholder surplus, North Dakota Insurance Department prescribed practices	**$ 199,088,000**	$ 271,967,000
Depreciation of EDP equipment	**(4,210,000)**	(3,023,000)
Invested assets-basket clause	**(9,442,000)**	(4,681,000)
Policyholder surplus, NAIC SAP	**$ 185,436,000**	$ 264,263,000

Revenue and Expenses

Premiums are recognized as revenue over the premium-paying period of the policies. Claims are recognized as expenses as incurred. Expenses, including acquisition costs related to acquiring new business, are charged to operations as incurred. Investment income is recognized as earned, net of related investment expenses.

Cash and Invested Assets

Investments in bonds not backed by other loans are carried at amortized book value using the scientific method with the exception of bonds with a NAIC rating of 3 through 6, which are carried at the lower of amortized book value or market. Loan-backed bonds are carried at amortized cost using the retrospective method.

Unaffiliated common stocks are carried at market value as determined using market prices published by the NAIC SVO.

For investments carried at market value, the related unrealized appreciation or depreciation is reflected in policyholder surplus. For investments carried at amortized book value, cost is adjusted for amortization of premiums and accretion of discounts, which are recognized as adjustments to interest income. Realized investment gains and losses determined on the specific identification basis are included in other income in the statement of operations.

The Company's investments in unconsolidated subsidiaries are carried at their underlying audited generally accepted accounting principles equity value in accordance with SSAP No. 97 – *Investments in Subsidiary, Controlled, and Affiliated Entities* and SSAP No. 48 – *Joint Ventures, Partnerships and Limited Liability Companies*. The Company's investment in Noridian Healthcare Solution, LLC (NHS) is then reduced for the effect of remaining non-admitted assets that had been transferred to NHS upon original formation of the entity per agreement with the North Dakota Insurance Department. As of December 31, 2013 and 2012, remaining non-admitted assets relating to the investment were $0 and $110,000, respectively. The Company's investment in its wholly owned subsidiary Twenty First Century Information Solutions (Twenty First) is carried based on the statutory equity of CoreLink Administrative Solutions, LLC of which Twenty First owns 50% and MDdatacor, Inc. (MDD) of which Twenty First owns 100%. The Company's share of unconsolidated undistributed earnings is reflected in policyholder surplus. Earnings from the subsidiaries are only recognized as income by the Company when received in the form of dividends or distributions.

Cash equivalents are highly liquid investments with a maturity of three months or less when purchased. Accounts at each institution are insured by the FDIC up to $250,000. At times during the year, the Company's balance exceeded this limit. The Company does not consider this a material risk.

Certificates of deposit are considered to be cash, provided 1) the issuer of the certificate of deposit is a solvent bank, trust company, savings and loan association, or credit union that is insured by the Federal Deposit Insurance Corporation, the Federal Savings and Loan Insurance Corporation, or the National Credit Union Administration; 2) the aggregate amount of funds deposited by the domestic insurance company, as certificate of deposits or in any other form, with any single issuer does not exceed $250,000; and 3) the certificate of deposit is payable only to the named depositor which is the domestic insurance company. If these conditions do not exist the certificates of deposit are classified as bond investments.

Short-term investments, which mature in one year or less, are carried at book value, which approximates market value.

Real estate investments are carried at cost, less accumulated depreciation and encumbrances. Depreciation of investment properties is calculated, on a straight-line method, over an estimated useful life of 20 to 50 years for buildings, 15 to 50 years for building improvements and 20 years for land improvements.

Fair Value of Financial Instruments

The Company recognizes and measures assets and liabilities required to be recorded at fair value using the framework prescribed by SSAP No. 100, *Fair Value Measurements*.

Fair value is defined as the exchange price that would be received for an asset or paid to transfer a liability (an exit price) in the principal or most advantageous market for the asset or liability in an orderly transaction between market participants on the measurement date. Valuation techniques should maximize the use of observable inputs and minimize the use of unobservable inputs.

A fair value hierarchy has been established, which prioritizes the valuation inputs into three broad levels. Level 1 inputs consist of quoted prices in active markets for identical assets or liabilities that the reporting entity has the ability to access at the measurement date. Level 2 inputs are inputs other than quoted prices included within Level 1 that are observable for the related asset or liability. Level 3 inputs are unobservable inputs related to the asset or liability.

Investment Income

Investment income consists primarily of interest and dividends. Interest is recognized on an accrual basis and dividends are recorded as earned at the ex-dividend date. Accrual of income is suspended for bonds that are in default or when the receipt of interest payments is in doubt. Realized capital gains and losses are determined on a specific identification basis and recorded in operations.

Premium Income

Subscriber fees are billed in advance of their respective coverage periods and recorded as uncollected premiums until collected. Income from such fees is recorded as earned during the coverage period. Premiums received in advance represent the portion of fees, which will be earned in future periods, which varies from one month to one year depending upon the due date and the number of months of coverage provided by these fees.

Policy and Contract Claims

Aggregate reserves for policy contracts have been adjusted to reflect claims incurred but unpaid at year-end, which includes claims in process, unreported claims, claims of currently hospitalized patients and premium deficiency reserve. The amount of this liability has been estimated by the use of accepted actuarial methods utilizing statistics developed from prior claim payment experience. Estimated claim processing expenses relating to incomplete and unreported claims are being accrued currently as an expense. Differences between actual and estimated claims are charged to operations in the year that the differences, if any, become known.

Premium Deficiency Reserves

When the expected claim payments and administrative expenses exceed the premiums to be collected for the remainder of the contract period, a premium deficiency reserve is recorded for the deficiency, with a corresponding charge to operations. The Company does not utilize anticipated investment income as a factor in the premium deficiency calculation.

Income Taxes

The Company's federal income tax return is filed on a consolidated basis with NHS, Noridian Insurance Services, Inc. (NISI), Twenty First and MDD. The consolidated group's liability is apportioned among the members in accordance with the ratio which that portion of the consolidated taxable income bears to the consolidated taxable income based upon separate return calculations with current credit for net losses. Intercompany tax balances are typically settled annually in the third quarter. The Company includes 50% of the taxable income/loss of CoreLink Administrative Solutions, LLC in the calculation of income tax due.

The Company will recognize future accrued interest and penalties related to unrecognized tax benefits in income tax expense if incurred. Under normal circumstances, the Company is no longer subject to Federal tax examinations by tax authorities for years before 2010.

The Company undergoes an annual analysis of various tax positions, assessing the likelihood of those positions being upheld upon examination with relevant tax authorities.

Income taxes are provided for the tax effects of transactions reported in the financial statements and consist of taxes currently due plus deferred taxes related primarily to differences between the basis of assets and liabilities for statutory and income tax reporting. The deferred tax assets and liabilities represent the future tax return consequences of those differences, which will either be taxable or deductible when the assets and liabilities are recovered or settled. The tax effect of deferred tax assets and liabilities and the changes between years is reflected in policyholder surplus.

SSAP No. 101 – *Income taxes – A Replacement of SSAP No. 10R and SSAP No. 10,* is effective for 2012 interim and annual financial statements and beyond. The new standard included revised guidance for tax contingencies, and the non-elective deferred tax asset admissibility test along with significant modifications to the deferred tax assets admissibility test and disclosure modifications. A change resulting from this adoption was accounted for prospectively and reflected as a change in accounting principle in accordance with SSAP No. 3 – *Accounting for Changes and Corrections of Errors*. The adoption of this pronouncement in 2012 did not have a material impact on the financial statements.

Data Processing Equipment

Data processing equipment and operating and nonoperating software are carried at cost less accumulated depreciation. Depreciation expense is computed using the straight-line method over the lesser of the estimated useful life of the related asset or five years for EDP equipment and operating system software. Depreciation expense for nonoperating system software is computed using the straight-line method over the lesser of its estimated useful life or five years as permitted by the North Dakota Insurance Department.

Non-Admitted Assets

Certain assets, primarily prepaid pension assets, furniture and equipment and nonoperating software are designated as "non-admitted" under statutory reporting requirements. These assets are excluded from the statutory statements of admitted assets, liabilities and surplus by adjustments to unassigned surplus.

Expense Reimbursements

The Company allocates its operating expenses by various lines of business to determine the expense reimbursements due from affiliates where the Company provides services or acts as a fiscal intermediary, from other federal health programs, and other cost based reimbursable lines of business.

Advertising Costs

All advertising and promotion costs are expensed when incurred. Advertising expense amounted to $2,623,000 and $2,875,000 for the years ended December 31, 2013 and 2012, respectively.

Use of Estimates in the Preparation of the Financial Statements

The preparation of financial statements in conformity with statutory accounting principles requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities. It also requires disclosure of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenue and expenses during the reporting period. Actual results could differ from those estimates. Material estimates susceptible to significant change include:

- Aggregate reserves for policy contracts;
- Deferred tax assets and liabilities;
- Pension and postretirement benefits;
- Fair market value of investments;
- Cost allocation and;
- Property, plant, and equipment depreciation.

Current Vulnerability Due to Certain Concentration

The Company operates in a business environment, which is subject to various risks and uncertainties. Such risk and uncertainties include, but are not limited to, interest rate risk, market risk, credit risk and legal and regulatory changes.

The Patient Protection and Affordable Care Act (PPACA) signed into law on March 23, 2010 and largely upheld by the U.S. Supreme Court on June 28, 2012, continues to transform the North Dakota health insurance marketplace as well as the Company's operations in several key ways. A large percentage of the uninsured will be eligible for coverage and subsidies will support the purchase of insurance for many. Medicaid eligibility can be expanded at the discretion of each state. New regulations are reducing carrier margins and the flexibility of health insurance products. The market for insurance will be an increasingly retail market with sales directly to consumers through government-regulated exchanges. The Company continues to analyze, implement and comply with PPACA requirements.

The Company mainly markets to the large group and individual segments of its market. Many of the large groups have chosen a self-insured coverage option. This self-insured coverage results in a diminished medical risk exposure.

Provider Advances

In accordance with SSAP No. 84 – *Certain Health Care Receivables and Receivables Under Government Insured Plans*, the Company considers provider advances admitted assets if the amount of the advance is supported by a contract, as well as claims incurred and payable to the hospital. Provider Advances in the amounts of $5,150,000 and $7,250,000 were recorded as of December 31, 2013 and 2012, respectively.

Change in Accounting Principle

The NAIC has adopted SSAP No. 102 - *Accounting for Pensions, a Replacement of SSAP No. 89* and *SSAP No. 92 Accounting for Postretirement Benefits Other Than Pensions, a Replacement of SSAP No. 14* effective for reporting years beginning in 2013. This revised guidance requires reporting entities to recognize the funded status (excess of the projected benefit obligation over the fair value of plan assets) of the Company's pension, supplemental retirement program and postretirement health plans (the plans) on the balance sheet as a liability. The Company adopted these new standards effective January 1, 2013 which increased the liability recorded for the plans. The Company estimates the total transition liability associated with the funded status of the pension plan to be approximately $8,656,000 as of December 31, 2013. The new requirements allow the recognition of the liability over a period not to exceed 10 years with provisions for minimum required recognition amounts. The impact of adopting this standard is recognized as a change in accounting principle with a decrease to surplus of $1,943,000 related to the pension plan and $3,070,000 related to the supplemental retirement program during the year ended December 31, 2013. A remaining transition obligation of $6,713,000 related to the pension plan remains unrecognized at December 31, 2013. In addition, $19,884,000 is recognized as a reduction to surplus as a result of eliminating previous non-admitted assets and establishing contra-assets for the overfunded portion of the plans.

Note 2 - Cash and Invested Assets

Investments

The classification of bonds and equity securities shown in the balance sheet at December 31, 2013 was as follows:

	Book/Adjusted Carrying Value	Gross Unrealized Gains	Gross Unrealized Losses	Fair Value
December 31, 2013				
US Government Bonds & Notes	$ 20,744,000	$ 858,000	$ 79,000	$ 21,523,000
Industrial & Miscellaneous Bonds	139,576,000	5,515,000	1,523,000	143,568,000
Mortgage & Other Asset Backed	10,327,000	727,000	138,000	10,916,000
Total Bonds	$ 170,647,000	$ 7,100,000	$ 1,740,000	$ 176,007,000

	Cost	Gross Unrealized Gains	Gross Unrealized Losses	Fair Value
Preferred Stock	$ 135,000	$ 4,000	$ -	$ 139,000
Common Stock Unaffiliated*	46,545,000	23,203,000	200,000	69,548,000
Common Stock Affiliated	20,425,000	8,000	17,778,000	2,655,000
Total Stock	$ 67,105,000	$ 23,215,000	$ 17,978,000	$ 72,342,000

* Amounts include prescribed or permitted practices that depart from the NAIC Accounting Practices and Procedures Manual, see Note 1.

The classification of bonds and equity securities shown in the balance sheet at December 31, 2012 was as follows:

	Book/Adjusted Carrying Value	Gross Unrealized Gains	Gross Unrealized Losses	Fair Value
December 31, 2012				
US Government Bonds & Notes	$ 18,382,000	$ 773,000	$ -	$ 19,155,000
Industrial & Miscellaneous Bonds	144,562,000	9,383,000	68,000	153,877,000
Mortgage & Other Asset Backed	14,644,000	1,605,000	166,000	16,083,000
Total Bonds	$ 177,588,000	$ 11,761,000	$ 234,000	$ 189,115,000

	Cost	Gross Unrealized Gains	Gross Unrealized Losses	Fair Value
Preferred Stock	$ 375,000	$ 11,000	$ -	$ 386,000
Common Stock Unaffiliated*	102,492,000	28,757,000	1,266,000	129,983,000
Common Stock Affiliated*	56,434,000	1,227,000	40,310,000	17,351,000
Total Stock	$ 159,301,000	$ 29,995,000	$ 41,576,000	$ 147,720,000

* Amounts include prescribed or permitted practices that depart from the NAIC Accounting Practices and Procedures Manual, see Note 1.

The following table shows the investments' gross unrealized losses and estimated fair values, aggregated by investment category and length of time bonds and common stock have been in an unrealized loss position at December 31, 2013.

	December 31, 2013					
	Less Than 12 Months		Greater Than 12 Months		Total	
	Value	Losses	Value	Losses	Value	Losses
US Government Bonds & Notes	$ 4,839,000	$ 79,000	$ -	$ -	$ 4,839,000	$ 79,000
Industrial & Miscellaneous Bonds	30,586,000	1,268,000	4,471,000	255,000	35,057,000	1,523,000
Mortgage & Other Asset Backed	3,800,000	26,000	1,435,000	112,000	5,235,000	138,000
	$ 39,225,000	$ 1,373,000	$ 5,906,000	$ 367,000	$ 45,131,000	$ 1,740,000
Common Stock Unaffiliated	$ 1,062,000	$ 125,000	$ 725,000	$ 75,000	$ 1,787,000	$ 200,000
Common Stock Affiliated*	-	-	(2,027,000)	17,778,000	(2,027,000)	17,778,000
	$ 1,062,000	$ 125,000	$ (1,302,000)	$ 17,853,000	$ (240,000)	$ 17,978,000

* Negative carrying value for common stock affiliated as a result of GAAP to STATUTORY adjustments for non-admitted assets of 1 subsidiary as required under SSAP No. 97.

The following table shows the investments' gross unrealized losses and estimated fair values, aggregated by investment category and length of time bonds and common stock have been in an unrealized loss position at December 31, 2012.

	December 31, 2012					
	Less Than 12 Months		Greater Than 12 Months		Total	
	Value	Losses	Value	Losses	Value	Losses
Industrial & Miscellaneous Bonds	$ 5,806,000	$ 68,000	$ -	$ -	$ 5,806,000	$ 68,000
Mortgage & Other Asset Backed	761,000	17,000	568,000	149,000	1,329,000	166,000
	$ 6,567,000	$ 85,000	$ 568,000	$ 149,000	$ 7,135,000	$ 234,000
Common Stock Unaffiliated	$ 26,502,000	$ 1,013,000	$ 1,904,000	$ 253,000	$ 28,406,000	$ 1,266,000
Common Stock Affiliated	-	-	13,372,000	40,310,000	13,372,000	40,310,000
	$ 26,502,000	$ 1,013,000	$ 15,276,000	$ 40,563,000	$ 41,778,000	$ 41,576,000

Proceeds from the sale of investments were $167,388,000 and $106,098,000 in 2013 and 2012, respectively. Gross realized gains of $17,551,000 and $5,984,000 and gross realized losses of $1,542,000 and $3,127,000 were realized on the sale of investments during the years ended December 31, 2013 and 2012, respectively.

The Company regularly reviews its investment portfolio for factors that may indicate that a decline in fair value of a bond investment below its cost basis is other than temporary. Based on an evaluation of the prospects of the issuer, including, but not limited to, the Company's intentions to sell or ability to hold the investments; the length of time and magnitude of the unrealized loss; financial condition and near term prospects of the issuer and the credit ratings of the issuer of the investment. During 2013 and 2012, the Company incurred $0 and $390,000 of other-than-temporary losses on its investment in bonds, respectively.

The Company considers various factors when considering if a decline in the fair value of a common stock security is other than temporary, including but not limited to, the length of time and magnitude of the unrealized loss; the volatility of the investment; analyst recommendations and price targets; opinions of the Company's investment managers; market liquidity; and the Company's intentions to sell or ability to hold the investments. To the extent the Company determines that a security is deemed other-than-temporarily impaired, the difference between amortized cost and fair value is charged to earnings. Based on an evaluation of these factors, the Company has concluded there are no investments in non-affiliated common stocks at December 31, 2013 that need be impaired.

Based on management's analysis, in 2013, the Company concluded that its investment in NHS was other than temporarily impaired (OTTI) in accordance with SSAP No.97 - *Investments in Subsidiary, Controlled and Affiliated Entities*. The facts and circumstances leading to impairment include the length of time the investment was in an unrealized loss position as well as recent operationg losses, as NHS recognized approximately $51,000,000 of contract losses during 2013 based on ASC 605-35, percentage-of-completion method of accounting. In particular, as discussed in Note 16, uncertainties exist associated with contracts that impact the evaluation of NHS fair value. In accordance with SSAP No. 97, the investment in NHS was written down to its fair value at December 31, 2013. The amount of the OTTI recognized as a realized loss was $78,007,000 representing $63,625,000 of previously recognized unrealized losses and $14,382,000 of equity investment in subsidiary resulting in a $0 carrying value of NHS as of December 31, 2013. The fair value of the investment was determined in accordance with SSAP No. 100 - *Fair Value Measurements*.

Mortgage and Other Asset-Backed Securities

The Company has $10,327,000 and $14,644,000 of mortgage and other asset-backed securities in its portfolio at December 31, 2013 and 2012, respectively.

The scheduled maturities of bonds at December 31, 2013 were as follows:

	Amortized Cost	Fair Market
Due less than one year	$ 15,697,000	$ 15,908,000
Due over one year through five years	72,400,000	75,486,000
Due over five years through 10 years	64,294,000	65,204,000
Due over ten years	7,929,000	8,494,000
	160,320,000	165,092,000
Mortgage and other asset-backed securities	10,327,000	10,915,000
	$ 170,647,000	$ 176,007,000

Securities may be disposed of before contractual maturities due to sales by the Company or because borrowers might have the right to call or prepay the obligation with or without prepayment penalties. Maturities of mortgage-backed securities depend on the repayment characteristics and experience of the underlying mortgage loans.

Real Estate

	2013	2012
Occupied by the Company	$ 49,964,000	$ 49,387,000
Leasehold improvements	1,540,000	1,011,000
	51,504,000	50,398,000
Accumulated depreciation	(26,334,000)	(24,285,000)
	$ 25,170,000	$ 26,113,000

The total real estate above includes admitted and non-admitted assets. Admitted assets consist of $49,964,000 and $49,387,000 and related accumulated depreciation of $25,461,000 and $23,569,000 for 2013 and 2012, respectively. Net admitted assets total $24,503,000 and $25,818,000 for 2013 and 2012, respectively. The remaining assets of $1,540,000 and $1,011,000 and related accumulated depreciation of $873,000 and $716,000 for 2013 and 2012, respectively, are non-admitted.

Depreciation expense relating to real estate for the years ended December 31, 2013 and 2012 was $2,058,000 and $1,996,000 respectively, of which $1,326,000 and $1,435,000, respectively, has been allocated to and reimbursed by other users.

Investments in Affiliates

On April 4, 2013, Noridian Administrative Services, LLC changed its name to Noridian Healthcare Solutions, LLC (NHS). NHS is organized as a limited liability company and is wholly owned by NMIC. NAS is a multi-state processor and fiscal intermediary/carrier for the Medicare and Medicaid Programs, which are administered and monitored by the Centers for Medicare and Medicaid Services (CMS).

At December 31, 2013, the Company owned 100 percent of the outstanding common stock of Noridian Insurance Services, Inc. (NISI), an insurance agency.

At December 31, 2013, the Company owned 100 percent of Twenty First Century Information Solutions. Twenty First Century owns 50 percent of CoreLink Administrative Solutions, LLC and 100 percent of MDdatacor, Inc.

At December 31, 2013, the Company owned 51 percent of the outstanding common stock of Discovery Benefits, Inc., an employee benefits administration company.

Note 3 - Fair Value Measurements

There are three general valuation techniques that may be used to measure fair value, as described below:

1. Market approach – Uses prices and other relevant information generated by market transactions involving identical or comparable assets or liabilities. Prices may be indicated by pricing guides, sale transactions, market trades, or other sources;

2. Cost approach – Based on the amount that currently would be required to replace the service capacity of an asset (replacement cost); and

3. Income approach – Uses valuation techniques to convert future amount to a single present amount based on current market expectation about the future amounts (includes present value techniques and option pricing models). Net present value is an income approach where a stream of expected cash flows is discounted at an appropriate market interest rate.

Following is a description of the valuation methodologies used for assets measured at fair value.

Industrial & Miscellaneous Bonds: Valued based on NAIC market values. For those securities not actively traded, quoted market prices of comparable instruments or discounted cash flow analysis are used based upon inputs that are observable in the markets for similar securities. Inputs include benchmark yields, credit spreads, default rates, prepayments and non-bonding broker quotes.

Mortgage & Other Assets Backed Bonds: Valued based on Residential Mortgage Backed Securities modeling file provided by the NAIC. The prepayment assumptions used for single class and multi-class mortgage backed/asset backed securities were obtained from broker/dealer survey values. These assumptions are consistent with the current interest rate and economic environment.

Preferred Stock: Valued based on NAIC market values.

Common Stock Unaffiliated & Mutual Funds: Valued based on NAIC quoted market values. If NAIC market values are unavailable then value is determined based on the underlying equity.

Common Stock Affiliated: Value is based on the underlying equity of the affiliate.

Other Invested Assets: Value is based on the underlying equity of the related entity.

The preceding methods described may produce a fair value calculation that may not be indicative of net realizable value or reflective of the future fair values. Furthermore, although the Company believes its valuation methods are appropriate and consistent with other market participants, the use of different methodologies or assumptions to determine the fair value of certain financial instruments could result in a different fair value measurement at the reporting date. There have been no changes to valuation methods used during 2013 or 2012.

The table below reflects the fair values and admitted asset values of all admitted assets and liabilities as of December 31, 2013 and 2012 that are financial instruments.

	2013				
	Aggregate Fair Value	Admitted Asset Value	Level 1	Level 2	Level 3
Bonds	$ 176,007,000	$ 170,647,000	$ -	$ 176,007,000	$ -
Equity Interests					
Preferred Stock	139,000	139,000	139,000	-	-
Common Stock	72,203,000	72,203,000	45,191,000	-	27,012,000
Cash	7,617,000	7,617,000	7,617,000	-	-
Short-Term Investments	70,580,000	70,580,000	70,580,000	-	-
Other Long-Term Invested Assets	47,000	47,000	-	-	47,000
	$ 326,593,000	$ 321,233,000	$ 123,527,000	$ 176,007,000	$ 27,059,000

	2012				
	Aggregate Fair Value	Admitted Asset Value	Level 1	Level 2	Level 3
Bonds	$ 189,115,000	$ 177,588,000	$ -	$ 189,115,000	$ -
Equity Interests					
Preferred Stock	401,000	386,000	401,000	-	-
Common Stock	147,334,000	147,334,000	103,775,000	-	43,559,000
Cash	46,763,000	46,763,000	46,763,000	-	-
Short-Term Investments	7,067,000	7,067,000	7,067,000	-	-
Other Long-Term Invested Assets	77,000	77,000	-	-	77,000
	$ 390,757,000	$ 379,215,000	$ 158,006,000	$ 189,115,000	$ 43,636,000

The following table presents the financial instruments related to the Company's assets carried at fair value as of December 31, 2013 by the SSAP 100 valuation hierarchy.

	Investment Assets at Fair Value as of December 31, 2013			
	Level 1	Level 2	Level 3	Total
Bonds				
Industrial & Miscellaneous Bonds	$ -	$ 1,695,000	$ -	$ 1,695,000
Mortgage & Other Asset Backed	-	203,000	-	203,000
Total Bonds	-	1,898,000	-	1,898,000
Preferred Stock	139,000	-	-	139,000
Stocks				
Industrial & Miscellaneous	10,020,000	-	24,357,000	34,377,000
Parent, Subsidiaries & Affiliates	-	-	2,655,000	2,655,000
Mutual Funds	35,171,000	-	-	35,171,000
Total Stocks	45,191,000	-	27,012,000	72,203,000
Other Invested Assets	-	-	47,000	47,000
Total Assets at Fair Value	$ 45,330,000	$ 1,898,000	$ 27,059,000	$ 74,287,000

The following table presents the financial instruments related to the Company's assets carried at fair value as of December 31, 2012 by the SSAP 100 valuation hierarchy.

	Investment Assets at Fair Value as of December 31, 2012			
	Level 1	Level 2	Level 3	Total
Bonds				
Industrial & Miscellaneous Bonds	$ -	$ 1,784,000	$ -	$ 1,784,000
Mortgage & Other Asset Backed	-	1,065,000	-	1,065,000
Total Bonds	-	2,849,000	-	2,849,000
Preferred Stock	386,000	-	-	386,000
Stocks				
Industrial & Miscellaneous	57,909,000	-	26,209,000	84,118,000
Parent, Subsidiaries & Affiliates	-	-	17,350,000	17,350,000
Mutual Funds	45,866,000	-	-	45,866,000
Total Stocks	103,775,000	-	43,559,000	147,334,000
Other Invested Assets	-	-	72,000	72,000
Total Assets at Fair Value	$ 104,161,000	$ 2,849,000	$ 43,631,000	$ 150,641,000

The following table presents a reconciliation of the beginning and ending balances of all level 3 assets for the year ended December 31, 2013.

	Assets Measured at Fair Value Using Significant Unobservable Inputs as of December 31, 2013						
	Balance January 1, 2013	Transfers in (Level 3)	Transfers out (Level 3)	Total gains and losses included in Net Income	Total gains and losses included in Surplus	Purchases, issuances, sales and settlements	Balance December 31, 2013
Common Stock Unaffiliated	$ 26,209,000	$ -	$ -	$ -	$ (1,852,000)	$ -	$ 24,357,000
Common Stock Affiliated	17,350,000	-	-	(78,007,000)	20,357,000	42,955,000	2,655,000
Total Stocks	43,559,000	-	-	(78,007,000)	18,505,000	42,955,000	27,012,000
Other Invested Assets	72,000	-	-	-	(25,000)	-	47,000
Total Assets at Fair Value	$43,631,000	$ -	$ -	$ (78,007,000)	$ 18,480,000	$ 42,955,000	$27,059,000

The following table presents a reconciliation of the beginning and ending balances of all level 3 assets for the year ended December 31, 2012.

	Assets Measured at Fair Value Using Significant Unobservable Inputs as of December 31, 2012						
	Balance January 1, 2012	Transfers in (Level 3)	Transfers out (Level 3)	Total gains and losses included in Net Income	Total gains and losses included in Surplus	Purchases, issuances, sales and settlements	Balance December 31, 2012
Common Stock Unaffiliated	$ 28,633,000	$ -	$ -	$ -	$ (2,424,000)	$ -	$ 26,209,000
Common Stock Affiliated	33,520,000	-	-	-	(16,170,000)	-	17,350,000
Total Stocks	62,153,000	-	-	-	(18,594,000)	-	43,559,000
Other Invested Assets	60,000	-	-	-	12,000	-	72,000
Total Assets at Fair Value	$62,213,000	$ -	$ -	$ -	$ (18,582,000)	$ -	$43,631,000

Note 4 - Receivables

Pharmaceutical Rebate

The Company has contracted with a pharmaceutical benefits manager to provide pharmaceutical services and obtain pharmacy rebates from drug manufacturers. The estimate for the fourth quarter of each year is based on the previous quarter's actual prescriptions, which are confirmed/invoiced by the Company's pharmaceutical benefit manager. At December 31, 2013 and 2012, the Company had total pharmacy rebates receivable of $8,100,000 and $5,947,000, respectively, of which $7,141,000 and $5,303,000, respectively, is an admitted asset. The pharmaceutical rebate receivables, by quarter, are as follows:

Quarter Ending	Estimated Pharmacy Rebates	Pharmacy Rebates Invoiced/Confirmed as an admitted asset	Actual Rebates Collected Within 90 days of Invoicing/Confirmation	Actual Rebates Collected Within 91 to 180 days of Invoicing/Confirmation	Actual Rebates Collected More Than 180 Days of Invoicing/Confirmation
12/31/13	$ 3,300,000	$ -	$ -	-	$ -
9/30/13	3,100,000	3,841,000	-	-	-
6/30/13	2,900,000	3,352,000	2,292,000	636,000	-
3/31/13	2,800,000	2,984,000	2,328,000	232,000	-
12/31/12	$ 2,700,000	$ 3,187,000	$ 2,689,000	$ 334,000	$ 87,000
9/30/12	2,600,000	2,875,000	2,603,000	181,000	57,000
6/30/12	2,500,000	2,777,000	2,306,000	173,000	299,000
3/31/12	2,500,000	2,581,000	2,282,000	121,000	178,000
12/31/11	$ 2,200,000	$ 2,760,000	$ 2,188,000	$ 214,000	$ 358,000
9/30/11	2,200,000	2,455,000	2,276,000	87,000	92,000
6/30/11	2,000,000	2,410,000	2,281,000	100,000	30,000
3/31/11	2,000,000	2,275,000	2,039,000	147,000	89,000

The Company has contracted with a pharmaceutical benefits manager to provide pharmaceutical services and obtain pharmacy rebates from drug manufacturers for the Medicare Prescription Drug Program. The estimate for the fourth quarter of each year is based on the previous quarter's actual prescriptions, which are confirmed/invoiced by the Company's pharmaceutical benefit manager. At December 31, 2013 and 2012, the Company had total pharmacy rebates receivable of $2,793,000 and $2,247,000, respectively, of which $2,746,000 and $2,172,000, respectively, is an admitted asset. The pharmaceutical rebate receivables for the Medicare Prescription Drug Program, by quarter, are as follows:

Quarter Ending	Estimated Pharmacy Rebates	Pharmacy Rebates Invoiced/Confirmed as an admitted asset	Actual Rebates Collected Within 90 days of Invoicing/Confirmation	Actual Rebates Collected Within 91 to 180 days of Invoicing/Confirmation	Actual Rebates Collected More Than 180 Days of Invoicing/Confirmation
12/31/13	$ 1,386,000	$ 1,386,000	$ -	$ -	$ -
9/30/13	1,497,000	1,359,000	-	-	-
6/30/13	1,151,000	1,219,000	-	1,204,000	-
3/31/13	1,291,000	1,086,000	-	1,053,000	-
12/31/12	$ 1,086,000	$ 1,160,000	$ -	$ 1,160,000	$ -
9/30/12	1,039,000	1,081,000	-	1,016,000	65,000
6/30/12	982,000	1,039,000	-	1,005,000	33,000
3/31/12	817,000	980,000	-	940,000	40,000
12/31/11	$ 1,014,000	$ 1,091,000	$ -	$ 1,086,000	$ 5,000
9/30/11	1,045,000	1,072,000	-	1,066,000	6,000
6/30/11	956,000	1,040,000	-	1,044,000	(3,000)
3/31/11	849,000	988,000	-	989,000	(200)

Note 5 - Federal Employees Program

The Blue Cross and Blue Shield Federal Employees Program (FEP) is an insurance contract between the federal government and local Blue Cross and Blue Shield plans. The Blue Cross and Blue Shield Association acts as an agent for the local plans in the capacity of contracting with the government and providing other resources necessary to fulfill the agency relationship. The Company includes its share of the full amount of assets, liabilities, revenues, and expenses resulting from this contract in the financial statements. A liability and an offsetting asset (Federal Employees Program) have been recorded in the statements of admitted assets, liabilities, and policyholder surplus related to claims liabilities and related assets held. Premium income, investment income, and administrative expenses have been included in the statements of income to reflect the Company's portion of the FEP results. As of December 31, 2013 and 2012, the Company held assets in connection with the program of $28,696,000 and $26,498,000, respectively. The related liabilities are included in contract claim reserves for accident and health policies and aggregate reserve for accident and health policies. Additionally, the Company had recorded receivables of $1,301,000 and $1,178,000 as of December 31, 2013 and 2012, respectively, related to reimbursable claims for the program.

Note 6 - Equipment and Software

	2013	2012
Electronic data processing equipment and software	**$ 47,461,000**	$ 39,831,000
Furniture, fixtures, and equipment	**19,120,000**	17,175,000
Automobiles	**192,000**	137,000
Telephone	**3,629,000**	3,157,000
Depreciable software	**40,688,000**	32,050,000
	111,090,000	92,350,000
Accumulated depreciation	**(82,805,000)**	(75,880,000)
	$ 28,285,000	$ 16,470,000

The total amount of equipment and software above includes admitted and non-admitted assets. Admitted assets consist of electronic data processing equipment and software of $47,461,000 and $39,831,000 and related accumulated depreciation of $35,951,000 and $32,497,000 for 2013 and 2012, respectively. Net admitted assets total $11,510,000 and $7,334,000 for 2013 and 2012, respectively. The remaining assets of $63,629,000 and $52,519,000 and accumulated depreciation of $46,854,000 and $43,383,000 for 2013 and 2012, respectively, are non-admitted.

Equipment and software depreciation is calculated, on a straight-line method, over an estimated useful life of 3 to 15 years. Depreciation expense for the years ended December 31, 2013 and 2012 was $6,998,000 and $7,537,000 respectively, of which $4,769,000 and $6,327,000 has been allocated to and reimbursed by other users.

Electronic data processing equipment and depreciation reflect amounts prescribed or permitted practices that depart from NAIC Accounting Practices and Procedures Manual, see Note 1.

Note 7 - Lessee Operating Leases

The Company leases office space under various non-cancelable operating lease agreements that expire through March 31, 2018. Office space rental expense for 2013 and 2012 was approximately $772,000 and $389,000, respectively, of which $107,000 and $0 has been allocated to and reimbursed by other users in 2013. The Company leases computer and office equipment under various non-cancelable operating lease agreements that expire through June 30, 2016. Computer and office equipment rental expense for 2013 and 2012 was approximately $5,574,000 and $5,561,000, respectively, of which $4,388,000 and $4,688,000 has been allocated to and reimbursed by other users.

At December 31, 2013, the minimum aggregate rental commitments net of amounts allocated to others are as follows:

Years ending December 31,	Real Estate Leases	Equipment Leases
2014	694,000	967,000
2015	627,000	900,000
2016	355,000	212,000
2017	345,000	199,000
2018	86,000	132,000
	$ 2,107,000	$ 2,410,000

Certain rental commitments have renewal options extending through the year 2018. Some of these renewals are subject to adjustments in future periods.

Note 8 - Lessor Leases

The Company owns one site that is leased to affiliated companies. Prorated operating costs are charged to affiliated companies through administrative service agreements and subsequently reimbursed to the Company.

The cost and carrying amount of these properties is approximately $14,078,000 and $6,217,000 as of December 31, 2013 and $13,615,000 and $6,764,000 as of December 31, 2012 as listed in the investment summary at Note 2.

There are no future minimum lease payment receivable arrangements.

Note 9 - Employee Benefit Plans

Pension Plan

The Company has a defined benefit pension plan covering a significant number of its employees. The plan was amended to exclude NHS employees hired on or after September 1, 2006. The plan was amended to exclude all Noridian employees hired on or after January 1, 2010.

The benefits are based on years of service and the employee's final average compensation. The Company's funding and accounting policies are to contribute annually the minimum amount required by applicable regulations plus such additional amounts as the employer may determine to be appropriate from time to time and to charge such contributions to expense as allowed under statutory accounting principles.

Prior to 2001, the Company was allowed under statutory accounting principles to recognize pension costs equal to the amount of the contributions paid to the plan. Beginning in 2001, the Company was required to adopt statutory accounting principles which recognize the funded status of the Plan as allowed under SSAP No. 89 – *Accounting for Pensions*. The Company elected to amortize the incremental liability resulting from the change in accounting principle as a component of net periodic pension cost over a period of 20 years. Effective January 1, 2013, the Company adopted SSAP No. 102 – *Accounting for Pensions*. SSAP 102 replaces SSAP 89, with the change in accounting principle requiring recognition of the projected benefit obligation and underfunded status to surplus.

A summary of pension plan disclosures is as follows:

	2013	2012
Change in projected benefit obligation		
Projected benefit obligation at beginning of year	$ 164,716,000	$ 145,977,000
Service cost	7,522,000	7,692,000
Interest cost	6,328,000	6,592,000
Benefit payments	(852,000)	(8,878,000)
Settlements	(14,600,000)	-
Actuarial losses (gains)	(12,182,000)	13,333,000
Projected benefit obligation at end of year	$ 150,932,000	$ 164,716,000
The actuarial gains (losses) are a result of changes in actuarial assumptions, primarily changes in the discount rate, and the impact of differences between actual and anticipated experience.		
Accumulated benefit obligation	$ 121,688,528	$ 132,757,000
Change in plan assets		
Fair value of plan assets at beginning of year	$ 130,480,000	$ 107,701,000
Actual return on assets (net of expenses)	15,249,000	16,457,000
Employer contributions	12,000,000	15,200,000
Settlements	(14,600,000)	-
Benefit payments	(852,000)	(8,878,000)
Fair value of plan assets at end of year	$ 142,277,000	$ 130,480,000
Funded Status		
Overfunded		
Assets		
Prepaid benefit cost	$ 36,123,000	N/A
Overfunded program contra-asset	(36,123,000)	N/A
Total Assets	$ -	N/A

	2013	2012
Underfunded		
Liabilities Recognized		
Accrued benefit liability	$ 1,943,000	N/A
Unrecognized liabilities	$ 6,713,000	N/A
Components of net periodic benefit cost		
Service cost	$ 7,522,000	$ 7,692,000
Interest cost	6,328,000	6,592,000
Expected return on assets	(9,245,000)	(8,518,000)
Amortization of transition obligation	630,000	630,000
Amortization of prior service cost	403,000	403,000
Amortization of actuarial loss	4,585,000	4,304,000
Loss recognized due to settlement or curtailment	3,720,000	-
Total net periodic benefit cost	$ 13,943,000	$ 11,103,000
Items not recognized as a component of net periodic cost		
Beginning of the year	$ 72,302,000	N/A
Net transition asset or obligation recognized	(630,000)	N/A
Net prior service cost or credit recognized	(403,000)	N/A
Net gain and loss arising during the period	(18,186,000)	N/A
Net gain and loss recognized	(8,304,000)	N/A
Items not yet recognized as a component of net periodic cost		
End of the year	$ 44,779,000	N/A
Amounts in unassigned funds (surplus) expected to be recognized in the next fiscal year as components of net periodic benefit cost		
Net transition obligation	$ 630,000	N/A
Prior Service Cost	403,000	N/A
Net actuarial loss	2,315,000	N/A
Amounts in unassigned funds (surplus) that have not yet been recognized as components of net periodic benefit cost		
Net transition obligation	$ 4,409,000	$ 5,039,000
Prior Service Cost	1,920,000	2,323,000
Net actuarial loss	38,450,000	64,940,000
Items not yet recognized as a component of net periodic cost	$ 44,779,000	$ 72,302,000

	2013	2012
Weighted average assumptions used to determine net periodic cost during the year		
Discount rate	4.00%	4.75%
Expected return on assets	7.00%	7.50%
Rate of compensation increase	Graded; 4% - 9%	Graded; 4% - 9%
Weighted average assumptions used to determine projected benefit obligations at December 31		
Discount rate	4.75%	4.00%
Expected return on assets	7.00%	7.00%
Rate of compensation increase	Graded; 4% - 9%	Graded; 4% - 9%

At December 31, 2013, the basis of the overall expected long-term rate of return on assets assumption is a forward-looking approach based on the current long-term capital market outlook assumptions of the asset categories the trust invests in and the trust's target asset allocation. This rate is net of both investment related expenses and a 0.10% reduction for other administrative expenses charged to the Trust.

At December 31, 2013, the assumed target asset allocation for the program is: 44 - 56% equity securities, 34 - 46% debt securities and 6 - 14% other securities. Using a mean-variance model to project returns over a 30 year horizon under the target asset allocation, the 35th to 65th percentile range of annual rates of return is 6.2% - 7.8%.

At December 31, 2012, the basis of the overall expected long-term rate of return on assets assumption is a forward-looking approach based on the current long-term capital market outlook assumptions of the asset categories the trust invests in and the trust's target asset allocation. This rate is net of both investment related expenses and a 0.10% reduction for other administrative expenses charged to the Trust.

At December 31, 2012, the assumed target asset allocation for the program is: 44 – 56% equity securities, 35 – 45% debt securities and 6 – 14% other securities. Using a mean-variance model to project returns over a 30 year horizon under the target asset allocation, the 35th to 65th percentile range of annual rates of return is 6.2% - 7.8%.

The Company's pension plan assets are invested in the Blue Cross Blue Shield National Retirement Trust. The Company's pension plan weighted-average asset allocations at December 31, 2013 and 2012 by asset category are as follows:

	2013	2012
Equity securities	53%	46%
Debt securities	37%	40%
Real estate	7%	6%
Other	3%	8%
Total	100%	100%

The investment program for the Blue Cross Blue Shield National Retirement Trust is based on the precepts of capital market theory that are generally accepted and followed by institutional investors, who by definition are long-term oriented investors. The philosophy holds that:

1. Increasing risk is rewarded with compensating returns over time and therefore, prudent risk taking is justifiable for long-term investors.

2. Risk can be controlled through diversification of asset classes and investment approaches as well as diversification of individual securities.

3. Risk is reduced by time, and over time the relative performance of different asset classes is reasonably consistent. Over the long term, equity investments have provided and should continue to provide superior returns over other security types. Fixed-income securities can dampen volatility and provide liquidity in periods of depressed economic activity.

4. The strategic or long-term allocation of assets among various asset classes is an important driver of long-term returns.

5. Relative performance of various asset classes is unpredictable in the short-term and attempts to shift tactically between asset classes are unlikely to be rewarded.

Investments will be made for the sole interest of the participants and beneficiaries of the programs participating in the Blue Cross Blue Shield National Retirement Trust. Accordingly, the assets of the Blue Cross Blue Shield National Retirement Trust shall be invested in accordance with these objectives:

1. To ensure assets are available to meet current and future obligations of the participating programs when due.

2. To earn the maximum return that can be realistically achieved in the markets over the long term at a specified and controlled level of risk in order to minimize future contributions.

3. To invest assets with consideration of the liability characteristics in order to better align asset and liabilities.

4. To invest the assets with the care, skill, and diligence that a prudent person acting in a like capacity would undertake. The Blue Cross Blue Shield National Retirement Trust Committee acknowledges that, in the process, it has the objective of controlling the costs involved with administering and managing the investments of the Blue Cross Blue Shield National Retirement Trust.

The Company expects to contribute $0 to its pension program in 2014.

The following benefit payments, which reflect expected future service, as appropriate, are expected to be paid:

Estimated Future Benefits Payments	2013
2014 Payouts	$ 9,959,000
2015 Payouts	9,517,000
2016 Payouts	9,725,000
2017 Payouts	10,428,000
2018 Payouts	10,709,000
2019 Payouts to 2023	58,445,000

The fair value measurements of the plan assets at December 31, 2013 are as follows:

Asset Category	Quoted Prices In Active Markets for Identical Assets Level 1	Significant Observable Inputs Level 2	Significant Observable Inputs Level 3	Total
Government Obligations	$ 2,615,000	$ 6,478,000	$ 81,000	$ 9,174,000
Corporate Obligations	-	6,430,000	2,000	6,432,000
Partnership/Joint Venture	-	-	1,983,000	1,983,000
Limited Liability Corporations	-	7,780,000	-	7,780,000
Real Estate	-	-	5,498,000	5,498,000
Registered Investments	11,445,000	27,421,000	-	38,866,000
Common/Collective Trusts	-	51,771,000	-	51,771,000
Hedge Funds	-	9,439,000	-	9,439,000
Common Stocks	10,322,000	-	-	10,322,000
Preferred Stocks	245,000	-	-	245,000
Forward Foreign Currency Contracts	4,000	-	-	4,000
Interest-Bearing Cash	754,000	-	-	754,000
Derivatives	-	9,000	-	9,000
Total Assets Measured At Fair Value	$ 25,385,000	$ 109,328,000	$ 7,564,000	$ 142,277,000

The fair value measurements in Level 3 of the fair value hierarchy are as follows:

	Beginning Balance 1/1/2013	Transfers into Level 3	Transfers out of Level 3	Return on Assets Still Held	Return on Assets Sold	Purchases	Issuances	Sales	Settlements	Ending Balance 12/31/2013
Government Obligations	$ 88,000	$ -	$ -	$ (8,000)	$ -	$ 16,000	$ -	$ -	$ (15,000)	$ 81,000
Corporate Obligations	-	-	-	(23,000)	-	25,000	-	-	-	2,000
Partnership/Joint Venture	1,834,000	-	-	112,000	-	327,000	-	-	(290,000)	1,983,000
Real Estate	5,070,000	-	-	699,000	52,000	1,122,000	-	-	(1,445,000)	5,498,000
Hedge Funds	2,402,000	-	(1,805,000)	288,000	438,000	413,000	-	-	(1,736,000)	-
Total Plan Assets	$ 9,394,000	$ -	$ (1,805,000)	$ 1,068,000	$ 490,000	$ 1,903,000	$ -	$ -	$ (3,486,000)	$ 7,564,000

The following is a description of the valuation techniques used for the signifant qualified pension assets measured at fair value utilizing, and classified as, Level 1, 2 or 3:

Cash and Short-Term Investments – Cash and short-term investments include interest-bearing investments with initial maturities of three months or less. Such amounts are recorded at cost, plus accrued interest.

Investments Traded in Active Markets – Common stock, preferred stock, fixed income securities including government and corporate obligations, options and futures traded in active markets on national and international securities exchanges are valued at closing prices on the last business day of each period presented. Securities traded in markets that are not considered active are valued based on quoted market prices, broker or dealer quotations, or alternative pricing sources with reasonable levels of price transparency. Securities that trade infrequently and therefore have little or no price transparency are valued using the Trust's investment managers' best estimates. In general, corporate obligations are valued based on yields currently available on comparable securities of issuers with similar credit ratings. Investments in government obligations are estimated using best available trade data. Investments in certain restricted common stocks are valued at the quoted market price of the issuer's unrestricted common stock less an appropriate discount. Investments in other equities are based on quoted market prices.

Real Estate Investments – Fair values of real estate investments are based on the quoted redemption values of the participation units in real estate funds owned by the Trust. Redemption values principally represent the appraised values of real estate investments held in the real estate funds.

Hedge Funds – Hedge fund investments represent investment in hedge fund of funds and investments in portfolios investing in a range of stocks, bonds, distressed corporate debt, government debt, emerging market equities, currencies, commodities, commodity and financial futures, options, forwards, swaps and derivative instruments. Hedge fund of funds investments are valued using the NAV provided by the administrator of the fund. The NAV is based on the value of the underlying assets owned by the fund (including investments in a master fund that is primarily comprised of hedge funds) minus its liabilities and then divided by the number of shares outstanding. In general, portfolio securities for which market quotations are readily available are valued at market value. If market quotations are not readily available, the fair value is determined based on other relevant factors, including deal price quotations, price activity for equivalent investments and valuation pricing models.

Registered Investment Companies – These are investments valued using the NAV provided by the administrator of the fund. The NAV is based on the value of the underlying assets owned by the fund minus its liabilities, and then divided by the number of shares outstanding.

Limited Liability Corporations – These investments are valued at estimated fair value which, based on the appraised values, approximates market price and other market information pertaining to their underlying investments at December 31. Because of inherent uncertainty of valuing these investments and certain of the underlying investments, the Trust's estimate of fair value may differ from the values that would have been used had a ready market for the investment existed. The financial statements of these investments are audited annually by an independent public accounting firm.

Partnership /Limited Liability Company Interests – These investments are valued at estimated fair value which, based on the appraised values, approximates market price and other market information pertaining to its underlying investments at December 31.

Common/Collective Trust Funds – Common/collective trust funds represent investments with various investment managers. Units held in common/collective trusts, including stable value funds, are valued at the unit value as reported by the investment managers as of December 31.

Futures and Forward Contracts – The Trust may, from time to time, enter into equity futures contracts, forward foreign currency contracts, and forward contracts to purchase government agency obligations for trading purposes. Equity futures contracts are used as a means to replicate the performance of the broad stock market and to reduce transaction costs associated with rebalancing an indexed portfolio when there are cash inflows or outflows. Forward foreign currency contracts are used to manage the risk of foreign currency fluctuations and to ensure that adequate funds, denominated in the local currency, are available to settle purchases of foreign securities. Forward contracts to purchase government agency obligations are used to take advantage of market yield premiums available for delayed settlement contracts.

Equity futures contracts, forward foreign currency contracts, and forward contracts to purchase government agency obligations are stated at market value as determined by prices quoted on national security exchanges. Equity futures contracts are marked to market, and fluctuations in the value are recognized as realized gains or losses that are settled daily with cash through a margin account. Forward foreign currency contracts are valued at fair value, as determined by the Trust's investment managers (or independent third parties on behalf of the investment managers), using quoted forward foreign currency exchange rates. At the end of each period presented, open contracts are valued at the current forward foreign currency exchange rates, and the change in market value is recorded as an unrealized gain or loss. When the contract is closed or delivery taken, the Trust records a realized gain or loss equal to the difference between the value of the contract at the time it was opened and the value at the time it was closed.

Foreign Investments – Investments denominated in currencies other than the U.S. dollar are converted using exchange rates prevailing at the end of the periods presented. Purchases and sales of such investments are translated at the rate of exchange on the respective dates of such transactions.

Supplemental Retirement Program

The Company has an unfunded Supplemental Retirement Program (SERP) intended for certain employees that meet the required provisions set forth in the program.

Beginning in 2001, the Company was required to adopt statutory accounting principles which recognize the funded status of the Plan as allowed under SSAP No. 89 – *Accounting for Pensions*. The Company elected to amortize the incremental liability resulting from the change in accounting principle as a component of net periodic pension cost over a period of 20 years. Effective January 1, 2013, the Company adopted SSAP No. 102 – *Accounting for Pensions*. SSAP 102 replaces SSAP 89, with the change in accounting principle requiring recognition of the projected benefit obligation and underfunded status to surplus.

Information related to the SERP is as follows:

	2013	2012
Change in projected benefit obligation		
Projected benefit obligation at beginning of year	$ 4,987,000	$ 3,952,000
Service cost	294,000	338,000
Interest cost	211,000	222,000
Program Amendments	224,000	2,276,000
Benefit payments	(328,000)	(1,043,000)
Actuarial losses (gains)	93,000	(758,000)
Projected benefit obligation at end of year	$ 5,481,000	$ 4,987,000
Accumulated benefit obligation	$ 2,984,000	$ 2,666,000
Change in plan assets		
Fair value of plan assets at beginning of year	$ -	$ -
Employer contributions	328,000	1,043,000
Benefit payments	(328,000)	(1,043,000)
Settlements	-	-
Fair value of plan assets at end of year	$ -	$ -

	2013	2012
Overfunded		
Assets (nonadmitted)		
Prepaid benefit cost	$ -	N/A
Overfunded Program Asset	-	N/A
Total Assets	$ -	N/A
Underfunded		
Liabilities Recognized in Accrued General Expenses		
Accrued benefit liability	$ 2,411,000	N/A
Liability for benefits	3,070,000	N/A
	$ 5,481,000	N/A
Unrecognized liabilities	$ -	N/A
Components of net periodic benefit cost		
Service cost	$ 294,000	$ 339,000
Interest cost	211,000	222,000
Expected return on assets	-	-
Amortization of transition obligation	149,000	149,000
Amortization of prior service cost	357,000	352,000
Amortization of actuarial loss	-	20,000
Loss Recognized due to Settlement	-	94,000
Total net periodic benefit cost	$ 1,011,000	$ 1,176,000
Items not recognized as a component of net periodic cost		
Beginning of the year	$ 3,259,000	N/A
Net transition asset or obligation recognized	(149,000)	N/A
Net prior service cost or credit arising during the period	224,000	N/A
Net prior service cost or credit recognized	(357,000)	N/A
Net gain and loss arising during the period	93,000	N/A
Net gain and loss recognized	-	N/A
Items not recognized as a component of net periodic cost		
End of the year	$ 3,070,000	N/A
Amounts in unassigned funds (surplus) expected to be recognized in the next fiscal year as components of net periodic benefit cost		
Net transition obligation	$ 149,000	N/A
Prior Service Cost	357,000	N/A
Net actuarial loss	-	N/A

	2013	2012
Amounts in unassigned funds (surplus) that have not yet been recognized as components of net periodic benefit cost		
Net transition obligation	$ 1,045,000	$ 1,195,000
Prior Service Cost	1,664,000	1,797,000
Net actuarial loss	361,000	268,000
Items not yet recognized as a component of net periodic cost	$ 3,070,000	$ 3,260,000

Weighted average assumptions used to determine net periodic cost during the year	2013	2012
Discount rate	4.00%	4.75%
Rate of compensation increase	Flat; 5.00%	Flat; 5.00%

Weighted average assumptions used to determine projected benefit obligations at December 31	2013	2012
Discount rate	4.75%	4.00%
Rate of compensation increase	Flat; 5.00%	Flat; 5.00%

The SERP is funded on a pay-as-you-go basis. Therefore, no assets are accumulated to pay benefits under the program and no assumption regarding the expected return on assets is relevant.

The following benefit payments, which reflect expected future service and employer contributions, as appropriate, are expected to be paid:

	2013
Estimated Future Benefits Payments	
2014 Payouts	$ 9,000
2015 Payouts	186,000
2016 Payouts	760,000
2017 Payouts	25,000
2018 Payouts	4,602,000
2019 Payouts to 2023	655,000

Retiree Health Benefits and Life Insurance Plans

The Company provides certain health care and life insurance benefits (postretirement benefits) for retired employees. Substantially all employees may become eligible for these benefits if they reach retirement age while working for the Company. Life insurance benefits are generally set at a fixed amount. In 2003, the Company established a Noridian Mutual Insurance Company Retiree Voluntary Employee Beneficiary Association Trust (VEBA Trust) to fund this Plan. The Plan was amended to exclude any new employees hired after January 1, 2006. In January, 2010 the Plan was amended to phase-out the Company contribution for health care insurance for retirees over a ten year period, beginning in 2012 with a ten percent reduction each year. The health plan was remeasured on October 1, 2012 to reflect a 10% decrease in retiree premiums in 2013 and a change in prescription drug coverage.

Beginning in 2001, the Company was required to adopt statutory accounting principles which recognize the funded status of the Plan as allowed under SSAP No. 89 – *Accounting for Pensions*. The Company has elected to amortize the incremental liability resulting from the change in accounting principle as a component of net periodic pension cost over a period of 20 years. Effective January 1, 2013, the Company adopted SSAP No. 102 – *Accounting for Pensions*. SSAP 102 replaces SSAP 89, with the change in accounting principle requiring recognition of the projected benefit obligation and underfunded status to surplus.

Information related to the postretirement benefit plan is as follows:

	2013	2012
Change in projected benefit obligation		
Projected benefit obligation at beginning of year	$ 16,928,000	$ 19,835,000
Service cost	799,000	1,143,000
Interest cost	833,000	713,000
Benefit payments	(1,452,000)	(1,488,000)
Medicare Part D subsidy received	124,000	118,000
Adoption of new SSAP -nonvested benefit obligation	10,714,000	-
Plan amendments	-	3,473,000
Actuarial losses (gains)	(9,318,000)	(6,866,000)
Projected benefit obligation at end of year	$ 18,628,000	$ 16,928,000
Change in plan assets		
Fair value of plan assets at beginning of year	$ 43,390,000	$ 40,393,000
Actual return on program assets	3,888,000	4,615,000
Benefit payments	(1,346,000)	(1,618,000)
Fair value of plan assets at end of year	$ 45,932,000	$ 43,390,000

	2013	2012
Overfunded		
Assets (nonadmitted)		
Prepaid benefit cost	$ 11,898,000	N/A
Overfunded Program Asset	15,993,000	N/A
Total assets	$ 27,891,000	N/A
Underfunded		
Liabilities Recognized in Accrued General Expenses		
Accrued benefit liability	$ 823,000	N/A
Liability for benefits/(contra liability)	(236,000)	N/A
Total liabilities recognized	$ 587,000	N/A
Unrecognized liabilities	$ -	$ -
Components of net periodic benefit cost		
Service cost	$ 799,000	$ 1,143,000
Interest cost	833,000	713,000
Expected return on assets	(1,952,000)	(2,068,000)
Amortization of transition obligation	-	7,000
Amortization of prior service cost	72,000	(962,000)
Amortization of actuarial loss (gain)	(370,000)	(95,000)
Total net periodic benefit cost	$ (618,000)	$ (1,262,000)
Items not recognized as a component of net periodic cost,		
Beginning of the year	$ (15,987,000)	N/A
Net transition asset or obligation recognized	-	N/A
Net prior service cost or credit arising during the period	10,714,000	
Net prior service cost or credit recognized	(72,000)	N/A
Net gain and loss arising during the period	(11,254,000)	N/A
Net gain and loss recognized	370,000	N/A
Items not yet recognized as a component of net periodic cost,		
End of the year	$ (16,229,000)	N/A

	2013	2012
Amounts in unassigned funds (surplus) expected to recognized in the next fiscal year as components of net periodic benefit cost		
Net transition obligation	$ -	N/A
Prior service cost	72,000	N/A
Net actuarial loss (gain)	(582,000)	N/A
Amounts in unassigned funds (surplus) that have not yet been recognized as components of net periodic benefit cost		
Net transition obligation	$ -	$ -
Prior service cost (credit)	(2,186,000)	(12,827,000)
Net actuarial loss (gain)	(14,043,000)	(3,160,000)
Items not yet recognized as a component of net periodic cost	$ (16,229,000)	$ (15,987,000)

Weighted average assumptions used during the year to determine net periodic cost

	2013	2012
Discount rate	4.25%	4.75/4.25%*
Expected long-term rate of return	4.50%	5.00%
Health care trend rated-medical		
Trend for next year (pre-65/post-65)	8.00%/7.00%	8.00%/7.00%
Ultimate trend	5.00%	5.00%
Year ultimate trend reached (pre-65/post-65)	2021	2021/2022
Rate of compensation increase	Graded; 4%-9%	Graded; 4%-9%

	2013	2012
Weighted average assumptions used to determine projected benefit obligations at December 31		
Discount rate	5.00%	4.25%
Health care trend rated-medical		
Trend for next year (pre-65/post-65)	7.75%/6.75%	8.00%/7.00%
Ultimate trend	5.00%	5.00%
Year ultimate trend reached (pre-65/post-65)	2021	2021

*Effective October 1, 2012, the health benefits portion of the plans were remeasured due to plan changes as previously discussed, utilizing a 4.25% discount rate at that date. The life benefits portion of the plan is continuing to be remeasured at December 31, using a 4.75% discount rate.

The Company selected an overall expected long-term rate of return on assets assumption of 4.5% using a forward-looking approach based on the current long-term capital market outlook assumptions of the asset categories the Plan invests in. This rate is net of both investment related expenses and taxes.

Assumed health care cost trend rates have a significant effect on the amounts recognized for the health care plan. A one-percentage point change in assumed health care trend rates would have the following effect on the Retiree Health Benefits and Life Insurance Plans as of December 31, 2013:

	1% Increase	1% Decrease
Effect on total of service cost and interest cost components	$ 263,000	$ (201,000)
Effect on postretirement benefit obligation	2,052,000	(1,627,000)

The investment for the VEBA Trust shall be invested in such securities or in such property, real or personal, tangible or intangible, as the Trustee shall deem advisable, provided, however, that investments shall be so diversified as to minimize the risk of large losses unless under the circumstances it is clearly prudent not to do so in the sole judgment of the Trustee.

The 2014 target asset allocation for the VEBA Trust is as follows:

Equity securities	40% - 60%
Debt securities	40% - 60%
Cash	0% - 5%

The VEBA Trust is administered by Bank of the West and has asset allocations of 53% equity securities, 42% debt securities, and 5% other, as of December 31, 2013.

The Company expects to contribute $0 to the VEBA Trust in 2014.

The following benefit payments, which reflect expected future service, as appropriate, are expected to be paid:

Estimated Future Benefits Payments	
2014 Payouts	$ 1,554,000
2015 Payouts	1,486,000
2016 Payouts	1,419,000
2017 Payouts	1,319,000
2018 Payouts	1,238,000
2019 Payouts to 2023	5,758,000

The fair value measurements of the plan assets are as follows:

Asset Category	Quoted Prices In Active Markets for Identical Assets Level 1	Significant Observable Inputs Level 2	Significant Observable Inputs Level 3	Total
Government Obligations	$ -	$ 7,974,000	$ -	$ 7,974,000
Corporate Obligations	-	3,323,000	-	3,323,000
State & Municipal Obligations	-	1,943,000	-	1,943,000
Registered Investments	21,345,000	-	-	21,345,000
Common Stocks	11,150,000	-	-	11,150,000
Interest-Bearing Cash	197,000	-	-	197,000
Total Assets Measured At Fair Value	$ 32,692,000	$ 13,240,000	$ -	$ 45,932,000

The following is a descprtion of the valuation techniques used for the signifant qualified retiree health benefits and life insurance plan assets measured at fair value utilizing, and classified as, Level 1, 2 or 3:

Fixed Income Obligations - These are bonds whose value is derived from similar bonds that are publicly traded, collateralized debt obligations, as well as certain structured liabilities where the inputs to the valuation are primarily based on readily observable pricing information.

Registered Investments and Common Stocks - This includes SEC registered mutual funds, exchange traded funds tracking domestic or international equity indices, and individual equities held in the form of common stock of companies on any of the nationally/internationally recognized stock exchanges and/or the over-the-counter markets. The fair values are based on a review of unadjusted quoted prices for identical assets in active markets.

Cash and equivalents - This category includes cash and money market fund holdings. The fair values are based on a review of unadjusted quoted prices for identical assets in active markets.

Defined Contribution Plans

The Company has a qualified defined contribution pension plan covering substantially all of its employees. The Company will match up to 4% of an employee's eligible compensation. The Company's contribution to the Plan was $4,300,000 and $3,600,000 for 2013 and 2012, respectively. At December 31, 2013 and 2012, the fair value of plan assets was $145,287,000 and $121,452,000, respectively.

The Company established a qualified defined contribution pension plan on September 1, 2006. The Plan was established to cover NHS employees hired after September 1, 2006 who are not eligible for the defined benefit pension plan. The company contribution is a discretionary amount as determined by the Company from year to year. The Company's contribution to the Plan was $482,000 and $510,000 for the years 2013 and 2012 respectively. At December 31, 2013 and 2012, the fair value of plan assets was $3,650,000 and $2,689,000, respectively.

Note 10 - Administrative Services Contracts

Administrative Service Only Contracts

	2013	2012
Gross reimbursement for medical cost incurred	$ -	$ 1,648,000
Gross administrative fees accrued	-	2,113,000
Total net loss from operations	$ -	$ (465,000)

Self Insured Plans

	2013	2012
Gross reimbursement for medical cost incurred	$ 493,591,000	$ 405,853,000
Gross administrative fees accrued	28,304,000	23,448,000
Gross expenses (claims and administrative)	(523,879,000)	(432,222,000)
Total net loss from operations	$ (1,984,000)	$ (2,921,000)

As of December 31, 2013 and 2012, unpaid claim liabilities of $61,270,000 and $52,100,000, respectively, and corresponding receivables from self-insured groups for the same amount have been established but are not recorded in the financial statements.

As of December 31, 2013 and 2012, the Company reported a net gain of $5,688,000 and $14,787,000, respectively, on Stop Loss coverage associated with the Insured Portion of Partially Insured Plans.

Cost Reimbursement Contracts

Revenues from the Company's Civilian Health and Medical Program for the Uniformed Services administrative contracts for 2013 and 2012 were $201,000 and $472,000, respectively.

In addition, the Company is a member of the BlueCard Program and by agreement processes subscribers' claims for other Blue Cross and Blue Shield Plans. The claims, of $186,667,000 and $152,811,000 in 2013 and 2012, respectively, were processed for others and the related reimbursements have been excluded from the statutory statements of income. The Company's operating expense reimbursement for BlueCard was $7,497,000 and $7,284,000 in 2013 and 2012, respectively.

The Company also has administrative agreements with affiliated and related companies that are disclosed as related parties.

Note 11 - Reinsurance

Unsecured Reinsurance Recoverable

The Company does not have an unsecured aggregate recoverable for losses, paid and unpaid including incurred but not reported (IBNR), loss adjustment expenses and unearned premium with any individual reinsurers, authorized or unauthorized, that exceeds 3% of the Company's policyholder surplus.

Medicare Advantage/Medicare Part D

In 2006, the Company joined with Blue Cross Blue Shield of Minnesota, Blue Cross Blue Shield of Montana, Blue Cross Blue Shield of Nebraska, Wellmark, Inc., Wellmark of South Dakota, and Blue Cross Blue Shield of Wyoming to create a joint enterprise, Regional Advantage Services, LLC for the purposes of administering the Blue Cross Blue Shield Northern Plains Alliance Medicare Advantage and Medicare Part D Program.

There are multiple agreements in place among these entities that may involve transfers of revenue. These agreements fall into three main categories:

1) The allocation of CMS risk-sharing payments involves the distribution of payments to/from CMS that are calculated based on variances in financial experience from amounts bid for Medicare Advantage and Medicare Part D products. The Company currently has no risk-sharing payable to CMS. As of December 31, 2013 and 2012 the Company has risk sharing receivables recorded of $1,218,000 and $542,000, respectively.

2) The pooling of catastrophic claims involves the pooling of claims with amounts paid in excess of $100,000. The Company currently has no receivable recorded relating to the pooling of large claims.

3) The limited gain-sharing portion involves the potential transfer of portions of financial gains arising from Medicare Advantage and Medicare Part D products to other entities that incurred losses on the same. The Company currently has an $84,000 risk-sharing payable to the other plans in the region.

Reinsurance Assumed and Ceded

The Company entered into an agreement with MedAmerica Insurance Company in 1999 to offer long-term care insurance that would be 100% ceded to MedAmerica. Reinsurance ceded could become a liability to the Company in the event the reinsurer is unable to meet the obligations they have assumed. Claims paid by MedAmerica in 2013 and 2012 were $429,000 and $451,000, respectively. MedAmerica established claim reserves of $1,290,000 and $1,008,000 for 2013 and 2012, respectively.

Note 12 - Aggregate Reserves for Policy Contracts

Activity in the liability for aggregate reserves for policy contracts (excluding unpaid claims adjustment expenses and premium deficiency reserves) is summarized as follows:

	2013	2012
Balance at beginning of the year	$ 138,360,000	$ 119,978,000
Incurred related to		
Current year	1,105,643,000	1,009,239,000
Prior year	(8,175,000)	(12,163,000)
Total incurred	1,097,468,000	997,076,000
Paid related to		
Current year	959,563,000	870,890,000
Prior year	130,387,000	107,804,000
Total paid	1,089,950,000	978,694,000
Balance at end of the year	$ 145,878,000	$ 138,360,000

The decrease in the provision of insured events of prior years of $8,175,000 as of December 31, 2013 and $12,163,000 as of December 31, 2012 is a result of ongoing analysis of recent loss development trends and re-estimation of unpaid claims on fully insured and risk sharing agreements and resulting from loss development trends better than estimated.

Note 13 - Income Taxes

The components of the net deferred tax asset/(liability) at December 31, 2013 and 2012 are as follows:

	2013			2012		
	Ordinary	Capital	Total	Ordinary	Capital	Total
Gross Deferred Tax Assets	$ 33,900,000	$ -	$ 33,900,000	$ 23,600,000	$ 2,100,000	$ 25,700,000
Adjusted Gross Deferred tax Assets	33,900,000	-	33,900,000	23,600,000	2,100,000	25,700,000
Deferred Tax Assets Nonadmitted	20,400,000	-	20,400,000	19,000,000	2,100,000	21,100,000
Subtotal Net Admitted Deferred Tax Asset	13,500,000	-	13,500,000	4,600,000	-	4,600,000
Deferred Tax Liabilities	-	6,600,000	6,600,000	-	-	-
Net Admitted Deferred Tax Asset	$ 13,500,000	$ (6,600,000)	$ 6,900,000	$ 4,600,000	$ -	$ 4,600,000

The change in the components of the net deferred tax asset/liability between December 31, 2013 and 2012 is as follows:

	Change		
	Ordinary	Capital	Total
Gross Deferred Tax Assets	$ 10,300,000	$ (2,100,000)	$ 8,200,000
Adjusted Gross Deferred tax Assets	10,300,000	(2,100,000)	8,200,000
Deferred Tax Assets Nonadmitted	1,400,000	(2,100,000)	(700,000)
Subtotal Net Admitted Deferred Tax Asset	8,900,000	-	8,900,000
Deferred Tax Liabilities	-	6,600,000	6,600,000
Change in Net Admitted Deferred Tax Asset/(Net Deferred Tax Liability)	$ 8,900,000	$ (6,600,000)	$ 2,300,000

The admission calculation components under SSAP No. 101 as of December 31, 2013 and 2012 is as follows:

	2013			2012		
	Ordinary	Capital	Total	Ordinary	Capital	Total
Federal Income Taxes Paid In Prior Years Recoverable Through Loss Carrybacks	$ 3,700,000	$ -	$ 3,700,000	$ 4,600,000	$ -	$ 4,600,000
Adjusted Gross Deferred Tax Assets Expected To Be Realized (Excluding The Amount Of Deferred Tax Assets From above) After Application of the Threshold Limitation (The Lesser of 1 and 2 below)	3,200,000	-	3,200,000	-	-	-
Adjusted Gross Deferred Tax Assets Expected to be Realized Following the Balance Sheet Date	3,200,000	-	3,200,000	-	-	-
Adjusted Gross Deferred Tax Assets Allowed per Limitation Threshold	-	-	-	-	-	-
Adjusted Gross Deferred Tax Assets (Excluding The Amount of Deferred Tax Assets From above) Offset by Gross Deferred Tax Liabilities	-	6,600,000	6,600,000	-	-	-
Deferred Tax Assets Admitted as the result of application of SSAP No. 101	$ 6,900,000	$ 6,600,000	$ 13,500,000	$ 4,600,000	$ -	$ 4,600,000

The change in the admission calculation components is as follows:

	Change		
	Ordinary	Capital	Total
Federal Income Taxes Paid In Prior Years	$ (900,000)	$ -	$ (900,000)
Adjusted Gross Deferred Tax Assets Expected To Be Realized (Excluding The Amount Of Deferred Tax Assets From above) After Application of the Threshold Limitation (The Lesser of 1 and 2 below)	3,200,000	-	3,200,000
Adjusted Gross Deferred Tax Assets Expected to be Realized Following the Balance Sheet Date	3,200,000	-	3,200,000
Adjusted Gross Deferred Tax Assets Allowed per Limitation Threshold	-	-	-
Adjusted Gross Deferred Tax Assets (Excluding The Amount of Deferred Tax Assets From above) Offset by Gross Deferred Tax Liabilities	-	6,600,000	6,600,000
Change in Deferred Tax Assets Admitted as the result of application of SSAP No. 101	$ 2,300,000	$ 6,600,000	$ 8,900,000

	2013	2012
Ratio Percentage Used To Determine Recovery Period and Threshold Limitation Amount	343%	505%
Amount Of Adjusted Capital and Surplus Used To Determine Recovery Period and Threshold Limitation Above	$ 192,188,000	$ 267,400,000

The provision (benefit) for income taxes consist of the following major components for the years ended December 31, 2013 and 2012:

	2013	2012
Federal	$ 622,000	$ 3,484,000
Federal income tax on net capital gains	3,202,000	571,000
Other	(802,000)	499,000
Federal and foreign income taxes incurred	$ 3,022,000	$ 4,554,000

The effects of temporary differences that give rise to significant portions of the deferred tax assets and deferred tax liabilities are as follows:

	2013	2012	Change
Ordinary			
Discounting of unpaid losses	$ 600,000	$ 450,000	$ 150,000
Fixed assets	5,700,000	2,600,000	3,100,000
Compensation and benefits accual	3,800,000	4,100,000	(300,000)
Net operating loss carry forward	9,600,000	6,900,000	2,700,000
Other (including items <5% of total ordinary tax assets)	600,000	350,000	250,000
Intangible Assets - Subscriber and provider contracts	5,700,000	5,800,000	(100,000)
Prepaid Expenses	4,100,000	3,400,000	700,000
Premium Deficiency Reserve	3,800,000	-	3,800,000
Subtotal	33,900,000	23,600,000	10,300,000
Nonadmitted	(20,400,000)	(19,000,000)	(1,400,000)
Admitted ordinary deferred tax assets	13,500,000	4,600,000	8,900,000
Capital:			
Investments	$ -	$ 2,100,000	$ (2,100,000)
Nonadmitted capital deferred tax assets	-	2,100,000	(2,100,000)
Admitted capital deferred tax assets	-	-	-
Admitted deferred tax assets	13,500,000	4,600,000	8,900,000
Deferred Tax Liabilities			
Capital			
Investments	6,600,000	-	6,600,000
Net deferred tax assets	$ 6,900,000	$ 4,600,000	$ 2,300,000

The change in the net deferred income taxes is comprised of the following:

	2013	2012	Change
Gross deferred tax assets	$ 33,900,000	$ 25,700,000	$ 8,200,000
Total deferred tax liabilities	(6,600,000)	-	(6,600,000)
Net deferred tax assets	$ 27,300,000	$ 25,700,000	1,600,000
Tax effect of unrealized gains			3,900,000
Change in net deferred income taxes			$ 5,500,000

The provision for federal and foreign income taxes incurred is different from that which would be obtained by applying the statutory Federal income tax rate to income before income taxes. The significant items causing this difference are as follows:

	2013	2012
Provision computed at the statutory rate	$ (27,218,000)	$ 9,327,000
Benefit of the 833(b) deduction	(2,900,000)	(3,577,000)
Effect of permanent differences including impact of disregarded entity	33,942,000	(980,000)
Other provision	(802,000)	(216,000)
Total Statutory income tax provision	$ 3,022,000	$ 4,554,000

The Company has an alternative minimum tax (AMT) credit carryforward of $50,353,000 that may be carried forward indefinitely to reduce future regular federal income taxes payable. The Company also has $27,500,000 of operating loss carryforward that expires between 2018 and 2030 that may be used to offset future regular taxable income.

The Company has income taxes incurred of $200,000 in 2013 and $3,500,000 in 2012 that will be available for recoupment in the event of future net losses.

The Company's federal income tax return is filed on a consolidated basis with NHS, Twenty First, MDD, and NISI. The Company includes 50% of the taxable income/loss of CoreLink Administrative Solutions, LLC in the calculation of income tax due.

The method of allocation is described as the Taxable Income Method, under which the group's tax liability is apportioned among the members in accordance with the ratio which that portion of the consolidated taxable income attributable to each member having taxable income bears to the consolidated taxable income based upon separate return calculations with current credit for net losses. Intercompany tax balances are settled annually in the third quarter of the subsequent year. Under the tax sharing arrangement, the subsidiaries have the ability to recoup taxes if losses are incurred or use carryforward losses to offset future taxable income.

Note 14 - Related Party Transactions

The Company provides marketing and administrative services, building facilities, equipment, and data processing to the following companies. In accordance with administrative agreements, expenses are determined by a cost accounting system, which allocates operating expenses to the companies based on estimates of actual utilization.

The net amount due from (to) the Company are as follows:

	Admitted Amounts Due From (to) at December 31 2013	Admitted Amounts Due From (to) at December 31 2012
Noridian Healthcare Solutions, LLC	**$ 18,489,000**	$ 28,658,000
CoreLink Administrative Solutions, LLC	**3,635,000**	-
Dental Service Corporation of ND	**935,000**	-
MDdatacor, LLC	**465,000**	-
Comprehensive Health Association of ND	**287,000**	57,000
Noridian Insurance Services, Inc.	**108,000**	298,000
ND Vision Services, Inc.	**60,000**	114,000
North Dakota Caring Foundation	**59,000**	14,000
Lincoln Mutual Life and Casualty Insurance Co.	**8,000**	68,000
Discovery Benefits, Inc	**2,000**	2,000
Total due from	**$ 24,048,000**	$ 29,211,000
Noridian Insurance Services, Inc	**$ (2,170,000)**	$ -
Noridian Healthcare Solutions, LLC	**(691,000)**	-
CoreLink Administrative Solutions, LLC	**(182,000)**	(277,000)
Dental Service Corporation of ND	**-**	(2,413,000)
MDdatacor, LLC	**-**	(2,146,000)
Total due to	**$ (3,043,000)**	$ (4,836,000)

The total expenses allocated by the Company to the following related organizations are as follows:

	Total Expenses Allocated 2013	Total Expenses Allocated 2012
Noridian Healthcare Solutions, LLC	**$ 49,161,000**	$ 91,091,000
CoreLink Administrative Solutions, LLC	**9,755,000**	14,574,000
Dental Service Corporation of ND	**5,344,000**	5,297,000
Noridian Insurance Services, Inc.	**2,775,000**	3,037,000
ND Vision Services, Inc.	**1,920,000**	1,623,000
Lincoln Mutual Life and Casualty Insurance Co.	**1,313,000**	1,841,000
MDdatacor, Inc.	**1,093,000**	893,000
Comprehensive Health Association of ND	**600,000**	550,000
North Dakota Caring Foundation	**164,000**	168,000
Discovery Benefits, Inc	**29,000**	150,000
	$ 72,154,000	$ 119,224,000

The Company donated administrative services to The North Dakota Caring Foundation. The services donated were $236,000 and $216,000 for 2013 and 2012, respectively.

Certain board members are also management personnel for entities in which the Company conducts certain business.

Note 15 - Retrospectively Rating Contracts

The Company estimates accrued retrospective premium adjustments for its group health insurance business through a mathematical approach using an algorithm of the Company's underwriting rules and experience rating practices. The Company records accrued retrospective premium as an adjustment to earned premium. The amount of net premium written by the Company at December 31, 2013 and 2012 that are subject to retrospective rating features was $256,648,000 and $237,058,000 which represented 21% and 24%, respecitively, of the total net premium written.

Note 16 - Commitments and Contingencies

On June 28, 2012, the Company entered into an agreement to guarantee a letter of credit taken out by NHS. The letter of credit is a requirement for a contract NHS has with the State of Iowa. The amount of the letter of credit is $1,739,000. The letter expires on June 30, 2014. NHS is currently meeting all contractual obligations related to this contract.

On October 17, 2011, the Company entered into an agreement to guarantee up to a $6,000,000 line of credit taken out by MDD. In 2013, the line of credit limit and guarantee by the Company was raised to $8,000,000. As of December 31, 2013 the amount of the line of credit balance outstanding was $8,000,000. The line of credit matures on December 16, 2015. See Note 17 for subsequent events related to sale of membership units of MDD.

The Company's wholly owned subsidiary, NHS, was the prime contractor in building the State of Maryland's health insurance web-based marketplace (MDHIX). On December 31, 2013, the State issued a cure notice to NHS regarding alleged performance issues. NHS disputed and continues to dispute the State's claims. NHS successfully negotiated a consensual exit from the MDHIX contract as of February 24, 2014. The Transition Agreement associated with this negotiated exit provides that NHS and the State agreed to a standstill until August 22, 2014 (the "Standstill Period"), with regard to the assertion of any legal claims by any party against any other in connection with the Contract. The Company is a party to that exit agreement with respect to its efforts to support transitional data hosting services required by the State's new prime contractor, QSSI. NHS believes that it is probable that one or more material claims will be asserted by the State against NHS, and NHS will assert one or more material claims against the State. The Company believes that it is also possible that the State may assert material claims directly against NMIC for damages. However, the facts do not indicate that an unfavorable outcome for the Company is probable based on any such claims, nor is it reasonably possible to estimate a range of outcomes that may occur as a result of such claims. Counsel for both companies are of the view that, assuming that such claims will be asserted, it is not possible to determine either the probability of a favorable or unfavorable outcome or to estimate any gain or loss associated therewith.

On February 24, 2012, the Company entered into an agreement to guarantee a performance bond taken out by NHS. The performance bond was a requirement for a contract NHS has with the State of Maryland (the state) to build the State's Health Insurance Exchange. The amount of the performance bond is $10,000,000. The bond was originally set to mature on February 22, 2014 but was extended to October 22, 2014. In February 2014, NHS and the state came to an agreement for NHS to exit the contract as of February 24, 2014. Under terms of the agreement, both parties agreed to stay any legal proceedings in regard to the contract until August 22, 2014. No reasonable estimate can be made at this time regarding the potential liability, if any, or the amount or range of any loss that may result from the negotiated exit of the contract. In accordance with SSAP No. 5R – *Liabilities, Contingencies and Impairments of Assets*, an accrual of $5,000,000 was recorded based on management's assessment of the uncertainty surrounding implementation of call provisions of the bond, and the guarantee agreement between the Company and the surety company. The amount recorded represents the midpoint of the range of the bond in accordance with treatment prescribed in SSAP No. 5R. Subsequent to year end, the bond issuer has requested and the Company has placed $10,000,000 as funds on deposit with a financial institution.

The Company has committed no reserves to cover contingent liabilities that may arise from guarantee fund assessment amounts as amounts would not be material to the Company.

The Company is involved in various claims, lawsuits and proceedings that arose in the ordinary course of business. While these actions are being contested, the outcome of individual matters is not predictable with assurance. The Company does not believe that any liability resulting from any of the actions will have a material adverse effect on its financial position, operating results, policyholder surplus, cash flows or liquidity.

Note 17 - Subsequent Events

Subsequent events have been considered through June 26, 2014, which represents the date the statutory basis financial statements were available to be issued.

On January 1, 2014, the Company will be subject to an annual fee under section 9010 of the PPACA. This annual fee will be allocated to individual health insurers based on the ratio of the amount of the entity's net premiums written during the preceding calendar year to the amount of health insurance for any U.S. health risk that is written during the preceding calendar year. A health insurance entity's portion of the annual fee becomes payable once the entity provides health insurance for any U.S. health risk for each calendar year beginning on or after January 1, 2014. As of December 31, 2013, the Company has written health insurance subject to the PPACAassessment and expects to conduct health insurance business in 2014. The Company estimates their portion of the annual health insurance industry fee to be payable on September 30, 2014 to be $13,500,000. This assessment is expected to decrease risk based capital by approximately 24 points.

Twenty First entered into a membership interest purchase agreement on March 31, 2014 to sell all membership units of MDD to Symphony Performance Health Inc. (Symphony). The sales price was $10,000,000 payable in cash at closing, a $5,000,000 senior secured promissory note payable on the third anniversary year from closing date, and a $1,500,000 secured promissory note payable on the fifth anniversary year from closing date. The Company also has the potential to receive an additional $12,500,000 from the sale based on customer and revenue earn-out provisions. The transaction is expected to increase the Company's surplus by approximately $13,600,000 in 2014.

During March of 2014, the Company signed an agreement to sell its ownership share in TriWest Alliance, Inc.(TriWest). The Company will record a realized gain of $16,389,000, however, the impact on surplus will be a decrease of $128,000 after reversing the unrealized gain of $16,518,000 that was previously recognized. Under the agreement, the Company received $12,265,000 in March 2014 and a note for the remaining sale amount of $5,256,000. The Company expects the note to be settled before year end 2014.

Note 18 - Annual Statement Variance

There were classification differences between the accompanying statutory financial statements and the Company's statutory filing as of December 31, 2013 and 2012. These differences related to classifications represented on the statement of cash flows. These variances had no effect on the statutory statements of admitted assets, liabilities, and policyholder surplus or the statutory statements of operations and changes in policyholder surplus.

Note 19 - Statutory Surplus

The North Dakota Insurance Department imposes minimum risk-based capital requirements that were developed by the NAIC. The formulas for determining the amount of risk-based capital specify various weighting factors that are applied to financial balances or various levels of activity based on the perceived degree of risk. At December 31, 2013 and 2012, the Company is in compliance with all capital requirements.

EideBailly

CPAs & BUSINESS ADVISORS

Independent Auditor's Report on Supplementary Information

The Board of Directors
Noridian Mutual Insurance Company
d/b/a Blue Cross Blue Shield of North Dakota
Fargo, North Dakota

We have audited the statutory financial statements of Noridian Mutual Insurance Company as of and for the years ending December 31, 2013 and 2012, and our report thereon dated June 26, 2014, which expressed an unmodified opinion on those financial statements appears on page 1. Our audits were conducted for the purpose of forming an opinion on the basic statutory-basis financial statements taken as a whole. The accompanying supplementary information included in the *Supplemental Schedule of Investment Risks Interrogatories* and the *Summary Investment Schedule* including the notes to supplementary information on pages 56 through 60 are required to be presented to comply with the National Association of Insurance Commissioners' Annual Statement Instructions and the National Association of Insurance Commissioners' Accounting Practices and Procedures Manual and are not a required part of the basic statutory-basis financial statements. Such information included in the schedules referred to above is the responsibility of management, is presented for purposes of additional analysis and was derived from and relates directly to the underlying accounting and other records used to prepare the statutory financial statements. The information has been subjected to the auditing procedures applied in the audit of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other procedures in accordance with the auditing standards generally accepted in the United States of America. In our opinion, the information is fairly stated in all material respects in relation to the basic statutory financial statements taken as a whole.

Eide Bailly LLP

Minneapolis, Minnesota
June 26, 2014

1. The Company's total admitted assets as reported on the accompanying statutory balance sheet are $458,189,000 at December 31, 2013.

2. Following are the ten largest exposures to a single issuer/borrower/investment, by investment category, excluding U.S. government, U.S. government agency securities and those U.S. government money market funds listed in the Appendix to the *SVO Practices and Procedures Manual* as exempt property occupied by the Company:

	Amount	Percentage of Total Admitted Assets
TriWest Healthcare Alliance	$ 17,650,000	3.85
Prime Therapeutics	5,729,000	1.25
Pimco All Asset-1	5,207,000	1.14
Discovery Benefits Inc	4,683,000	1.02
ABERDEEN EMER MKTS-INST	4,526,000	0.99
Noridian Insurance Services Inc	3,187,000	0.70
Freddie Mac	2,350,000	0.51
Federal Home Loan Banks	1,839,000	0.40
KFW	1,629,000	0.36
LOEWS CORP	1,533,000	0.33

3. The Company's total admitted assets held in bonds and preferred stocks by NAIC rating:

	Amount	Percentage of Total Admitted Assets
Bonds and short-term investments		
NAIC-1	$ 166,490,000	36.34
NAIC-2	63,278,000	13.81
NAIC-3	2,927,000	0.64
NAIC-4	7,216,000	1.57
NAIC-5	1,316,000	0.29
	$ 241,227,000	
Preferred Stock		
P/RP - 1	$ 139,000	0.03
	$ 139,000	

4. Assets held in foreign investments are less than 2.5% of the Company's admitted assets.

5. through 6. The Company has no foreign investment exposure.

7. through 9. The Company has no unhedged foreign currency exposure.

10. The Company has no non-soverign foreign issues.

11. Assets held in Canadian investments are less than 2.5% of the Company's total assets.

12. The Company has no assets held in investments with contractual sales restrictions at December 31, 2013.

13. Following are the ten largest exposures to a single issuer/borrower/investment in equity interests, by investment category, including mutual funds, preferred stocks, publicly traded equity securities and other equity securities and excluding money market and bond mutual funds listed in the Appendix to the *SVO Practices and Procedures Manual* as exempt or Class 1.

		Amount	Percentage of Total Admitted Assets
13.02	TriWest Healthcare Alliance	$ 17,650,000	3.85
13.03	VANGUARD S&P 500 ETF	13,844,000	3.02
13.04	Prime Therapeutics	5,729,000	1.25
13.05	BLACKROCK GLOBAL ALLOCATIO-I	5,230,000	1.14
13.06	PIMCO ALL ASSET FUND-INSTITU	5,207,000	1.14
13.07	THORNBURG INTL VAL-I	4,685,000	1.02
13.08	Discovery Benefits, Inc.	4,683,000	1.02
13.09	ABERDEEN EMER MKTS-INST	4,526,000	0.99
13.10	Noridian Insurance Services, Inc.	3,187,000	0.70
13.11	Plans' Liability Insurance Company	597,000	0.13

14. Assets held in nonaffiliated, privately placed equities are greater than 2.5% of the Company's admitted assets at December 31, 2013.

		Amount	Percentage of Total Admitted Assets
14.02	Aggregate statement value of investments held in non affiliated privately placed equities	$ 23,981,000	5.23
	Largest three investments held in non affilliated, privately placed equities		
14.03	TriWest Healthcare Alliance	17,650,000	3.85
14.04	Prime Therapeutics	5,729,000	1.25
14.05	Plans' Liability Insurance Company	597,000	0.13

15. Assets held in general partnership interests are less than 2.5% of the Company's admitted assets at December 31, 2013.

16. through 17. The Company has no admitted assets held in mortgage loans at December 31, 2013.

18. The Company has no admitted assets held as investment real estate at December 31, 2013.

19. The Company has no admitted assets held as investments in mezzanine real estate loans at December 31, 2013.

20. The Company has no admitted assets subject to security lending or repurchase agreements at December 31, 2013.

21. The Company has no warrants at December 31, 2013.

22. The Company has no potential exposure for collars, swaps, and forwards at December 31, 2013.

23. The Company has no potential exposure for future contracts at December 31, 2013.

The Company held cash and invested assets as of December 31, 2013 consisting of the following:

	Gross Investment Holdings		Admitted Assets as Reported in the Annual Statement	
	Amount	Percentage	Amount	Percentage
Bonds				
US Treasury Securities	$ 24,141,000	6.96	$ 24,141,000	6.98
Certificates of Deposits	7,000,000	2.02	-	-
Securities issued by states, territories, possessions, and political subdivisions in the U.S.				
Revenue and assessment obligations	5,969,000	1.72	5,969,000	1.73
Mortgage-backed securities (includes residential and commercial MBS)				
Pass-through securities				
Issued by FNMA and FHLMC	4,776,000	1.38	4,776,000	1.38
All Other	1,107,000	0.32	1,107,000	0.32
CMO's and REMICs				
Issued or guaranteed by GNMA, FNMA, FHLMC or VA	4,736,000	1.37	4,736,000	1.37
Issued by non-U.S. Government issuers and collateralized by mortgage-backed securities issued or guaranteed by agencies	-	-	-	-
All Other	3,286,000	0.95	3,285,000	0.95
Other debt and other fixed income securities				
Unaffiliated domestic securities (includes credit tenant loans rated by the SVO)	106,691,000	30.75	106,691,000	30.86
Unaffiliated non-US securities	19,941,000	5.75	19,941,000	5.77
Equity interests				
Investments in mutual funds	35,171,000	10.14	35,171,000	10.17
Preferred Stocks				
Unaffiliated	139,000	0.04	139,000	0.04
Publicly traded equity securities				
Unaffiliated	34,378,000	9.91	34,378,000	9.94
Other equity securities				
Affiliated	2,655,000	0.77	2,655,000	0.77
Unaffiliated	-	-	-	-
Real estate investments				
Property occupied by company	25,171,000	7.26	24,503,000	7.09
Cash and short term investments	71,196,000	20.52	78,197,000	22.62
Other long-term invested assets	589,000	0.17	47,000	0.01
Total cash and invested assets	$ 346,946,000	100.00	$ 345,736,000	100.00

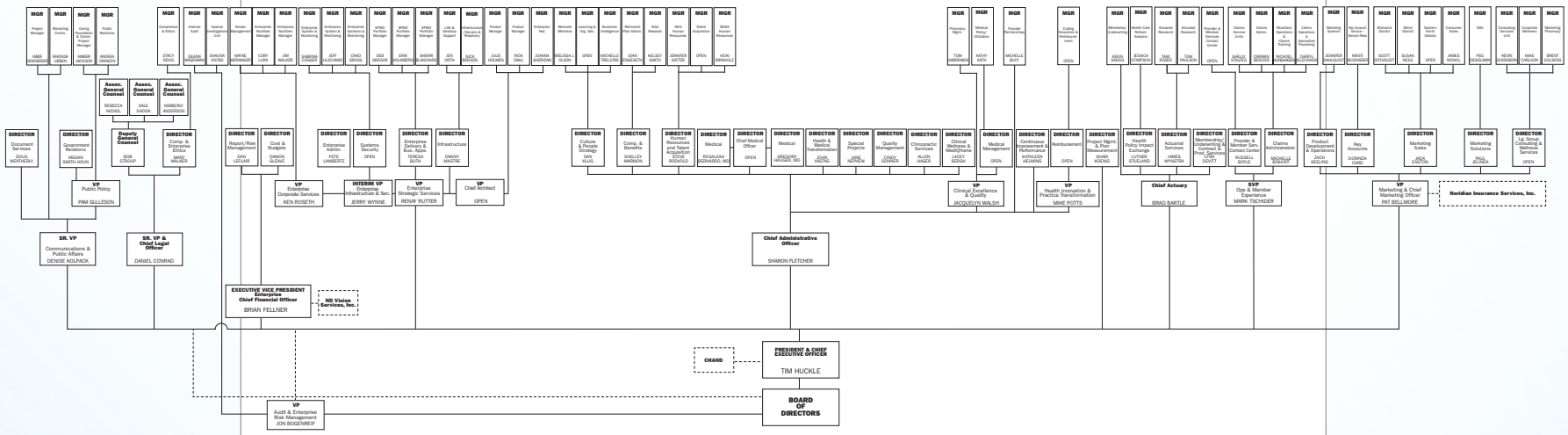
Note – Basis of Presentation

The accompanying schedules and interrogatories present selected statutory-basis financial data as of December 31, 2013 and for the year then ended for the purpose of complying with paragraph 9 of the Annual Audited Financial Reports in the Annual Audited Report section of the National Association of Insurance Commissioners' *Annual Statement Instructions* and the National Association of Insurance Commissioners' *Accounting Practices and Procedures Manual* and agree to or are included in the amounts reported in the Company's 2013 Statutory Annual Statement, as filed with the North Dakota Insurance Department.

Attachment 3

Attachment 3

Blue Cross Blue Shield of North Dakota Organizational Chart



An Independent Licensee of the Blue Cross & Blue Shield Association

Noridian Mutual Insurance Company

29305242 (2861) 10-14

Direct Reporting Relationships
October 2014

Attachment 4

Attachment 4

Attachment 4

Biographies – Alphabetical Order

Brad Bartle
Vice President of Actuarial & Membership
Fargo, N.D.
Phone Number: 701-282-1941 (office)
Brad.Bartle@bcbsnd.com

Brad Bartle is VP of Actuarial and Membership Services at BCBSND. He oversees Actuarial Services, Management Information Services, Health Policy Impact and Exchange, and Membership and Underwriting departments. Bartle has more than 20 years of experience working as an actuary on health insurance. He joined BCBSND in 2004 as AVP of Actuarial Services. He previously worked for the Blue Cross and Blue Shield Association in Chicago as an actuarial associate in the Federal Employee Program prior to working as a health actuary at Country Insurance and Financial Services in Bloomington, Illinois. A graduate of the University of Wisconsin Madison, Bartle holds a bachelor degree in actuarial mathematics. His is a fellow of the Society of Actuaries and a member of the American Academy of Actuaries. Bartle will earn his MBA from Kellogg School of Management in December 2014.

Pat Bellmore
Vice President of Marketing and Chief Marketing Officer
Fargo, N.D.
Phone Number: 701-282-1445 (office)
Pat.Bellmore@bcbsnd.com

Pat Bellmore has been employed by BCBSND since 1985. He has served in many positions within the Marketing Division including , Account Executive, Regional Manager for Eastern North Dakota and most recently was name the companies Vice President of Marketing and Chief Marketing Office in September/ 2014. He provides the leadership and direction for the development and implementation of strategic marketing and member service objectives and plans. He supports the corporate goals for growth, retention, service and market penetration in North Dakota. Bellmore holds the Certified Health Consultant designation from the national BCBS association and is a graduate of Valley City State University and holds a bachelor of science degree in Business Administration and a minor in Spanish.

Carman Bercier
Vice President Health Innovations and Practice
Fargo, N.D.
Phone Number: 701- 282-1886 (office)
Carman.Bercier@bcbsnd.com

Carman Bercier joined the Health Network Innovation (HNI) Division of Blue Cross Blue Shield of North Dakota (BCBSND) in October 2013 as Vice President of Health Innovation and Practice Transformation. In her role, Carman provides leadership, innovation and motivation to management in developing and implementing strategies for the network and reimbursement teams within HNI. Carman has been with BCBSND for 24 years holding various positions within the Claims Division. In her previous position, Carman served as Manager of BlueCard Operations, overseeing the daily activities of the Inter-Plan Program functions. She also served as the BlueCard Executive.

Michelle Bishoff
Director of Claims Administration
Fargo, N.D.
Phone Number: 701-282-1953 (office)
Michelle.Bishoff@bcbsnd.com

Michelle Bishoff has been employed by BCBSND since 1990. She has served in a number of capacities in the Claims Department including 16 years as claims manager. She has served in her current capacity as Director of Claim Administration since January 2008. In her current position Bishoff oversees 14 management and supervisory employees and 140 employees in the Claims Department including the NDPERS Service Unit. She has a bachelor degree in business management from the University of Mary, Bismarck.

Dorinda Card
Director of Key and National Accounts
Fargo, N.D.
Phone Number: 701-277-2798 (office)
Dorinda.Card@bcbsnd.com

Dorinda Card leads the team responsible for the retention and sales of our large and national accounts.

She joined BCBSND in June of 2013 and has been involved in developing a Key Account Sales and Account Management Division. Prior to BCBSND, Dorinda spent 27 years in the Health Insurance/ Managed Care Industry of which 16 years have been in leadership roles in sales and account management. She spent 22 years at UnitedHealthcare both in Minnetonka MN and Omaha NE. She was with Coventry Health Plan (Now an Aetna Company) for 3 years and a year at Cypress Benefit Administrators before moving to Fargo. She is experienced with strategic vision; goal setting; performance management; coaching; negotiating; hiring; restructuring; forecasting; process improvement; product development; compensation programs and development; product, strategy and execution of group health and ancillary business including dental, life, vision, and disability of all sizes. Dorinda has a bachelor's degree from UMD in communication and has been through multiple post graduate leadership and industry programs.

Michael Carlson
Manager of Health Management
Fargo, N.D.
Phone Number: 701-282-1140 (office)
Michael.Carlson@bcbsnd.com

Michael Carlson is the Manager of Health Management services for Blue Cross Blue Shield of North Dakota (BCBSND). Main responsibilities include the development, administration and performance review of programs that engage the membership of BCBSND in proactive prevention and healthy behaviors. Prior to coming to BCBSND, Mike spent time in the clinical and professional athletics environment. He has a Master's Degree in Exercise Science from St. Cloud State University and his Bachelor's degree in Athletic Training/Sports Medicine from North Dakota State University.

Tom Christensen
Manager of Pharmacy Management
Fargo, N.D.
Phone Number: 701-277-2588 (office)
Tom.Christensen@bcbsnd.com

Tom Christensen has been with BCBSND for 19 years. Since January 2004, he has been Manager of Pharmacy Management. Prior to his management role, he was pharmacy consultant at BCBSND. He has more than 30 years of pharmacy experience in a wide variety of settings, including pharmacy practice, association management, academia, and the pharmacy benefit management industry. He received his bachelor and Doctor of Philosophy degrees from the University of Michigan, Ann Arbor. He also holds a Juris Doctor degree from Michigan State University, East Lansing.

Dan Conrad
Chief Legal Officer & Corporate Secretary
Fargo, N.D.
Phone Number: 701-277-2279 (office)
Dan.Conrad@bcbsnd.com

Dan Conrad is chief legal officer at Blue Cross Blue Shield of North Dakota. As chief legal officer, he provides strategic and legal expertise to manage legal risks and opportunities across the enterprise. In addition to leading the Legal department, he represents the company with outside agencies and partners and oversees the BCBSND's Compliance and Ethics program. Before joining BCBSND in 2013, Conrad was in-house counsel at FedEx Corporation in Memphis, Tennessee. He began his legal career as a trial attorney for the United States Department of Justice in Washington, DC. Conrad received his undergraduate degree from Minnesota State University Moorhead and his Juris Doctor from the University of North Dakota.

Jodi Crouse
NDPERS Sr. Large Group Consultant
Fargo, N.D.
Phone Number: 701-277-2059 (office)
Jodi.Crouse@bcbsnd.com

Jodi Crouse has been employed by BCBSND 23 years. Since 2005, she has been a large group consultant in the Consulting Services Unit. She is the dedicated consultant for the NDPERS account. Her duties include preparing the quarterly NDPERS Executive Summary and Annual Report, and supporting the value-added programs for the NDPERS account. Crouse previously worked as a worksite marketing representative and National Accounts marketing service representative. She also worked in the NDPERS Service Unit for several years.

Stacy Duncan
NDPERS Wellness Consultant
Fargo, N.D.
Phone Number: 701-277-2884 (office)
Stacy.Duncan@bcbsnd.com

Stacy Duncan is the NDPERS Wellness Consultant for Blue Cross Blue Shield of North Dakota (BCBSND). Her duties include acting as a resource for the NDPERS Wellness Coordinators, preparing the monthly Wellness Coordinator Newsletter, conducting monthly conference calls/ webinars for wellness updates, and supporting BCBSND wellness programs to NDPERS members. Prior to coming to BCBSND, Stacy spent time in the non-profit health industry and the public sector. She has a Master's Degree in Business Administration from University of Mary and a Bachelor's degree in Public Administration from University of North Dakota.

Brian Fellner
Executive Vice President and Chief Financial Officer
Fargo, N.D.
Phone Number: 701-282-1103 (office)
Brian.Fellner@bcbsnd.com

Brian Fellner is executive vice president and chief financial officer at Blue Cross Blue Shield of North Dakota. His responsibilities include the oversight of the Company's financial statements, budgeting, treasury, and investment functions. Before joining BCBSND in 2013, Fellner was senior vice president of Enterprise Services at American Enterprise Group in Des Moines, where he was Chief Financial Officer and was responsible for the oversight of all corporate services functions. His background includes over 20 years of leadership and management experience within the Financial, Insurance and Health Care industries, including executive roles at Great West Life & Annuity Insurance Company, Pinon Management (a recognized leader and innovator in the long term care), and Pinon Health Network (where Fellner was a co-owner). Fellner commenced his career with Myers & Stauffer, a public accounting firm that specializes in healthcare auditing and consulting for State and Federal governments. Fellner also served as an adjunct faculty member at the University of Colorado Graduate School of Health Administration. Fellner is a certified public accountant, with additional professional certifications in managerial accounting and internal auditing. A graduate of the University of Colorado, Fellner holds a bachelor's degree in business administration and a master's degree in accounting.

Sharon Fletcher
Senior Vice President of Provider Relations & Reimbursement
Fargo, N.D.
Phone Number: 701-277-2698 (office)
Sharon.Fletcher@bcbsnd.com

Sharon Fletcher joined BCBSND in May 2012. As the SVP of Medical Management and Provider Reimbursement her role is to provide strategic oversight of and leadership for the division. Since 2011 Sharon worked as senior project director for Stanley Black and Decker Healthcare Solutions in New Britain, Conn., where she provided strategic consulting for health care organizations to help them implement long-term process capabilities that create efficiencies. Fletcher spent the previous four years working at Altru Health Systems in Grand Forks as manager of Learning and Organizational Development, Excellence and Effectiveness.

She has 23 years of experience in the human resources development, organizational development, strategic leadership and communications fields. Fletcher has held various senior level positions in the airline and technology industry.

Fletcher earned a doctorate in organizational leadership and behavior from Northcentral University in Prescott. Arizona. She earned a master of science degree in Human Resource Management and Labor Relations from La Roche College and an undergraduate degree in business management from Point Park College, both in Pittsburgh.

Miriam Griffin
Member Advocate Specialist
Fargo, N.D.
Phone Number: 701-277-2362 (office)
Miriam.Griffin@bcbsnd.com

Miriam Griffin is accountable for the development of, and responsibilities in relation to, the Member Advocacy Program (MAP). She also maintains her own case load of members experiencing unique medical circumstances. Griffin joined BCBSND in February of 2009 as a member services telephone representative. In January of 2011, Griffin moved into her current role, where she created and developed the procedures and standards currently being used today in MAP. Griffin holds a bachelor's degree from NDSU, and has completed company offered courses in the Lean Six Sigma management strategy.

Pam Gulleson
Vice President, Public Affairs and Government Relations
Fargo, N.D.
Phone Number: 701-277-2990 (office)
Pam.Gulleson@bcbsnd.com

Pam Gulleson is vice president of Public Affairs at Blue Cross Blue Shield of North Dakota. She is responsible for public affairs at the enterprise level, including corporate advocacy strategy, managing external business and government relations at the local, state and federal level, and public relations efforts for the organization. Before joining BCBSND in 2012, she served in the North Dakota State House of Representatives for 16 years and as chief of staff for North Dakota Senator Byron Dorgan for nine years. Other positions held by Gulleson include director for allied health programs for the North Dakota State College of Science, licensed nutritionist and director for nutrition programming at the Sargent and Ransom County Public Health offices in North Dakota. A graduate of North Dakota State University, Fargo, Gulleson holds a bachelor's degree in nutrition and education. She also completed master's coursework in Public Policy Administration from the North Dakota University System and the Minnesota State Colleges and Universities system. Since 1980, Gulleson has been a partner in a North Dakota ranching and farming business with her husband and their three sons.

Lacey Hogness
Project Manager
Fargo, N.D.
Phone Number: 701-282-1325 (office)
Lacey.Hogness@bcbsnd.com

Lacey Hogness has been with BCBSND since 2008. She has been a project manager for 2 years. In this role, she manages assigned corporate projects and activities that must be addressed in order to complete project deliverables within established timeframes. In addition, she is the one of the primary employees responsible for the coordination and implementation of the state and public accounts. Prior to this position, she worked in claims and quality assurance. She has a bachelor degree in business administration from Minnesota State University of Moorhead.

Heather Horner
Member Education Consultant
Bismarck-Dickinson-Williston-Minot, N.D.
Phone Number: 701-255-5575 (office)
Heather.Horner@bcbsnd.com

Heather Horner has been the Member Education Consultant for the western half of the state since March of 2011. As a Member Education Consultant, Heather meets with employees and provides concise, easy-to-understand information about how insurance works, what drives costs and what they can do to reduce their health care costs. She can tailor a presentation by including the group’s utilization statistics and information about how the group compares to statewide averages and peer groups. Before working at BCBSND she worked as the Wellness Director for Anytime Fitness.

Megan Smith Houn
Director of Government Relations
Bismarck, N.D.
Phone Number: 701-255-5548 (office)
Megan.Houn@bcbsnd.com

Megan Smith Houn is the director of Government Relations. She develops and maintains cooperative relationships with local, state, and federal officials, agencies and other health care related entities in both the private and public sectors on behalf of BCBSND. She communicates BCBSND's position on issues which impact the health care and reimbursement system and advocates on issues on behalf of BCBSND's members. A native of Bismarck, N.D., Smith Houn is a graduate of Baylor University in Waco, Texas, with a Bachelor of Arts degree in international relations. She has nearly fifteen years of experience in health promotion programs and working with policymakers. Before joining BCBSND, she served as the executive director of Tobacco Free North Dakota in Bismarck, where she led a successful campaign to pass the statewide initiated measure for smoke-free workplaces. Prior to that, she was the grassroots relationship manager for the American Cancer Society Cancer Action Network in Bismarck from 2005 to 2010.

Tim Huckle
President and CEO
Fargo, N.D.
Phone Number: 701-282-1539 (office)
Tim.Huckle@bcbsnd.com

Tim Huckle is President and Chief Executive Officer of Blue Cross Blue Shield of North Dakota (BCBSND). He directs and oversees all operations of the company, subsidiary and affiliated companies. He is also responsible to set corporate goals with the Board of Directors and develop corporate strategy. Huckle has more than 28 years of experience in the health care industry. Beginning as a work management specialist in 1986, he steadily moved up through the ranks at BCBSND, holding a number of key leadership positions within the company, including vice president, executive vice president and chief operating officer. His extensive management experience in a variety of departments, strong people skills, and ability to adapt to and embrace change, have served—and continue to serve—the company well. A graduate of the University of North Dakota, Grand Forks, Huckle holds a bachelor degree in business administration.

Zach Keeling
Director of Marketing Operations & Product Management
Fargo, N.D.
Phone Number: 701-282-1138 (office)
Zach.Keeling@bcbsnd.com

Zach Keeling is responsible for the development and implementation of BCBSND's full product portfolio. He and his team are also accountable for all operational activities within Sales and Marketing including marketing systems, market research, reporting and compensation. Keeling joined BCBSND in 2011. Prior to BCBSND, Keeling worked at Coventry Healthcare in Omaha, NE and MVP Healthcare in Schenectady, NY. Over the past 12 years, Keeling has held multiple leadership roles in Actuarial, Product Management, Sales and Marketing. A graduate of Doane College, Crete, NE, Keeling holds a bachelor degree in Mathematics and Economics.

Denise Kolpack
Chief of Staff and Senior Vice President of Communications and Public Affairs
Fargo, N.D.
Phone Number: 701-282-1485 (office)
Denise.Kolpack@noridian.com

Denise Kolpack is chief of staff and senior vice president of Communications and Public Affairs at Blue Cross Blue Shield of North Dakota. As chief of staff, she serves as liaison to executive staff across the enterprise, works with governing boards across the enterprise and serves as a strategic partner on all significant issues and programs. She also oversees the company's Creative Services and Document Services departments, which are responsible for advertising, public relations, internal communications, websites, video and audio, writing and editing, graphic design, and corporate print and mail services. Kolpack joined BCBSND in 2006 as assistant vice president of Corporate Communications and was promoted to vice president in 2007. Before joining BCBSND, she was donor recruitment director with United Blood Services, N.D., campaign manager for the Heidi Heitkamp for Governor campaign in North Dakota in 2000, and worked with the North Dakota Newspaper Association, the North Dakota Water Coalition and Kranzler-Kingsley, all in Bismarck. A graduate of the University of North Dakota, Grand Forks, Kolpack holds a bachelor of arts degree in marketing and a minor in political science.

Linda Merck
Senior Actuarial Analyst
Fargo, N.D.
Phone Number: 701-282-1137 (office)
Linda.Merck@bcbsnd.com

Linda Merck has worked in the Actuarial Department since she joined BCBSND 26 years ago. She assists with the NDPERS rate analysis, prepares the rate exhibit for the Administrative Service Agreement and assists in the implementation of the rate changes each July and January.

Mike Potts
Director, Employer Consulting and Wellness Services
Fargo, N.D.
Phone Number: 701-277-2065 (office)
Mike.Potts@bcbsnd.com

Mike Potts oversees Employer Consulting and Wellness Services at Blue Cross Blue Shield of North Dakota. He provides direction to a dedicated Consulting Team that includes a Pharmacist, Wellness Professionals, Large Group Consultants and Education Consultants. The team supports employer benefit plan goals by providing value-added analysis of various group data to identify improvement opportunities and recommendations. The recommendations include services and programs designed to optimize plan design, increase member engagement, improve health status and reduce long-term cost trends. Most recently, he has been educating group leaders on the impact of the Affordable Care Act. Mike has been with BCBSND for over 23 years. He brings a diversity of experiences to his current role. Prior to his current position, he spent 14 years overseeing the Provider Relations department at BCBSND. He has also held a number of positions in internal operations, marketing and with local provider organizations. Mike holds a Bachelor of Arts in Communications from the University of North Dakota and an MBA from the University of Mary.

Renay Rutter
Vice President of Enterprise Administration
Interim Vice President of Enterprise Strategic Services
Fargo, N.D.
Phone Number: 701-297-1634 (office)
Renay.Rutter@bcbsnd.com

Renay Rutter was hired in May 2013 as VP of Enterprise Administration and presently also serves as Interim VP of Enterprise Strategic Services where she leads Enterprise Information Technology teams (350 employees) including IT strategy and solution delivery; security; helpdesk services; enterprise project management, budgeting and governance; and corporate facility services. Prior to joining Noridian, Renay's entrepreneurial background included 25 years of senior and C-leadership roles in high tech industries such as software, legal business process outsourcing and customer service. Renay holds a bachelor degree in Business Administration.

Kevin Schoenborn
NDPERS Account Executive
Fargo, N.D.
Phone Number: 701-282-1172 (office)
Kevin.Schoenborn@bcbsnd.com

Kevin Schoenborn has been employed by BCBSND since August 1986, gaining over 28 years of experience in the health care industry. Since August 2008, he has served as the account executive for the NDPERS account, coordinating activities internally at BCBSND and with NDPERS staff. Prior to his account management role, Schoenborn was the dedicated large group consultant for NDPERS for eight years. In addition, he spent several years as a research analyst assigned to the NDPERS account for reporting purposes.

Onalee Sellheim
State and Public Programs Manager
Fargo, N.D.
Phone Number: 701-282-1154 (office)
Onalee.Sellheim@bcbsnd.com

Onalee Sellheim has been employed by BCBSND for 28 years. During that time, she has served in a number of capacities in the Claims Department, including eight years in the NDPERS Service Unit as a customer service representative and senior coordinator. She has also spent nine years servicing the NDPERS account in the Marketing division's Consulting Service Unit. In addition Onalee has now taken on the FEP Account as well.

Brent Solseng
Pharmacy Manager-Marketing
Fargo, N.D.
Phone Number: 701-282-1911 (office)
Brent.Solseng@bcbsnd.com

Brent Solseng, Pharm. D. has over 20 years combined experience in retail, hospital and managed care pharmacy. He is the Pharmacy Manager in Marketing for Blue Cross Blue Shield North Dakota where he is responsible for key account reporting and employer group consulting. Brent joined the BCBSND Medical Management division in June 2004. His primary responsibilities were delivery of education and performance reporting to prescribers and pharmacists. Brent worked on design and delivery of evidence-based presentations, prescribing reports and programs promoting judicious use of cost-effective therapies to North Dakota health care providers in the role of Academic Detailer. Brent transitioned to his current position in Marketing in March of 2011. As the Manager of Pharmacy Consulting, his work is centered on employer group reporting, program implementation and support. Currently Brent describes utilization and program performance in light of drug industry trends to BCBSND's largest employer clients.

Sheri Srnsky
Team Leader, NDPERS/FEP Service Unit
Fargo, N.D.
Phone Number: 701-277-2423 (office)
Sheri.Srnsky@bcbsnd.com

Sheri Srnsky has been employed with BCBSND since May of 2000. During that time, she has served in a number of capacities within the company. Sheri has served in the Claims Service Unit for nine years, including four years as a customer service representative, four years as a service unit coordinator, six months in Operation Support, and the last 7 months as a Team Leader (NDPERS/FEP).

Shelly Stalpes
Manager Claims Administration
Fargo, N.D.
Phone Number: 701-282-1476 (office)
Shelly.Stalpes@bcbsnd.com

Shelly Stalpes has been employed by BCBSND since 1985. During that time, she has served in a number of capacities in the Claims Department, including 17 years as team leader of Special Accounts (NDPERS and FEP). She became manager of the Claims Service Units in March 2008. As manager, Stalpes oversees six dedicated claims and customer service units, including the NDPERS Service Unit. She holds a bachelor degree in Business Administration from Minnesota State University Moorhead.

Mark Tschider
VP Customer Support & Claims Administration
Fargo, N.D.
Phone Number: 701-282-1980 (office)
Mark.Tschider@bcbsnd.com

Mark Tschider has been with BCBSND since 1989 and he has been the VP of Customer Support and Claims Administration for 4 years. Tschider spent his early years at BCBSND working with process and efficiency improvement projects in Claims Operations. From 1994 to 2010, he worked in BCBSND's Development and Business Strategies Division and was involved in implementing large corporate initiatives, including NDPERS project implementations. During 2009, he spent a year working with CoreLink during the startup of the company, he became heavily involved with BCBSND's Claims, Membership and Member Services systems and processes. In his current position, Tschider's responsibilities include providing oversight to the NDPERS Claims and Member Services department. He is responsible for continue improving the productivity, efficiency and quality of work BCBSND does in the high-performing areas of Claims and Customer Support.

Jacquelyn Walsh
Vice President of Clinical Excellence and Quality
Fargo, N.D.
Phone Number: 701-277-2786 (office)
Jacquelyn.Walsh@bcbsnd.com

Jacquelyn Walsh has been employed by BCBSND since December 2012. Prior to coming to the Plan, she worked in various nursing executive roles on the provider side for 36 years. Ms. Walsh provides leadership to management and clinical staff related to network provider relations, care management and quality to ensure the division’s efficient operation and to achieve desired outcomes in the work processes of medical and network policy development and implementation. She is also responsible for Plan accreditation and regulatory management with regard to the Plan’s commitment to a validated standard of excellence in the industry.

Jim Wynstra
Director of Actuarial
Fargo, N.D.
Phone Number: 701-277-2213 (office)
Jim.Wynstra@bcbsnd.com

Jim Wynstra joined BCBSND in August 2009. He has worked in the actuarial field since 1991. Prior to working at BCBSND, he worked at HealthMarkets located near Fort Worth, Texas. Before that, he spent 15 years working at Trustmark Insurance Company in Lake Forest, III. He has experience with pricing, reserving, financial forecasting and loss ratio experience analysis. Both Trustmark and HealthMarkets do business in multiple states, so he has experience with various insurance regulation environments as they relate to small-group and individual health insurance. Wynstra reports to the VP of Actuarial & Membership and manages an actuarial staff of eight with responsibilities including reserving, pricing and renewal increases.

Rebecca Balk, MBA, CPhT,
Director, Client Engagement – BCBSND and BCBSNE

BCBSND and BCBSNE will be served by experienced PBM expert, Rebecca Balk, who will serve as the Client Engagement Director. Becky has worked for Prime since 2008 in a number of leadership roles. She has much experience meeting with employers like <<CLIENTXX>> to discuss plan performance and benefit design/program options along with managing operational items as she was previously an Account Executive working with Prime's National Account team.

Prior to Rebecca joining the Client Engagement team, she managed consulting analytics for Prime's largest client, HCSC. Her responsibilities included analyzing and reporting on client data utilizing the SAS analytical data mining tool to determine pharmacy trends and develop recommendations based numerous sets of metrics. She presented this information to the client at the employer group level and at the overall plan level. Her position worked across many departments within Prime including clinical, sales, rebates, network, and finance.

Rebecca has been a Prime employee since February 2008. Prior to joining Prime, she was a Senior Financial Consultant with another pharmacy benefit manager, responsible for developing and approving pricing packages for pharmacy benefit plans for all sectors of business and measuring the financial impact of changes in plan design, network, and formulary coverage.Rebecca received her MBA from Capella University, her BA from the University of MN and is a Certified Pharmacy Technician.

Heather Belland
Account Consultant

Heather currently serves as the Employer Account Consultant for the Blue Cross Blue Shield of North Dakota Account team. As the Employer Account Consultant, she supports Account Directors, as well as an independent resource for employer groups. She interacts with many operational departments within Prime, and will require daily external interaction with employer groups. Responsibilities also include secondary and backup support in the absence of the Account Directors. Heather is responsible for ensuring that client needs are met on a daily basis by responding to escalated service inquiries and issues providing prompt resolution. Her responsibilities consist of oversight of non-standard benefit requests, escalated member issues, coordinate running and distribution of client reporting requests. She also provides operational assistance and issue resolution for clients on issues like eligibility, claims processing and prior authorizations. Heather began her career at Prime in 2011 and has previously supported our Sales team acquiring new business accounts in which she assisted the Vice President of Sales in all aspects of the sales cycle at the Normandale location. Heather comes to Prime with over 4 years of relationship management experience. Heather holds a Bachelor degree in Business, from the Capella University.

Megan Besser
Senior Consulting Analyst

As Senior Consulting Analyst, Megan's responsibilities include providing consulting analysis and reporting information to our Blue plans as well as other members of Prime's Client Engagement team. Megan joined Prime in 2011 and works closely with the Account Management team to ensure her client's analytics and reporting needs are met and opportunities for savings are identified. Megan is a graduate of Minnesota State University with a bachelor's degree in Business and Marketing.

Cameron Olig
Senior Vice President of Client Services and Sales

As Senior Vice President of Client Services and Sales, Cameron Olig is responsible for managing client relationships and delivering exceptional service and value to Prime's clients.

Cameron has been in the healthcare and PBM industry for over twenty years. Prior to joining Prime in 2004, Cameron was a principal and consultant at Towers Perrin, where he worked with clients on benefit design, benefit funding and all financial aspects of benefit management. In addition, he managed client relationships to ensure service delivery, customer satisfaction and revenue expansion. Most recently, he was responsible for leading the Towers Perrin health and welfare groups in Chicago and Milwaukee. Cameron also has experience as consulting with healthcare providers for the formation of risk bearing organizations. Cameron earned his Bachelor of Science degree in mathematics from the University of Wisconsin-Madison. He is a member of the American Academy of Actuaries and an associate in the Society of Actuaries.

Kent Wangsness
Regional Vice President

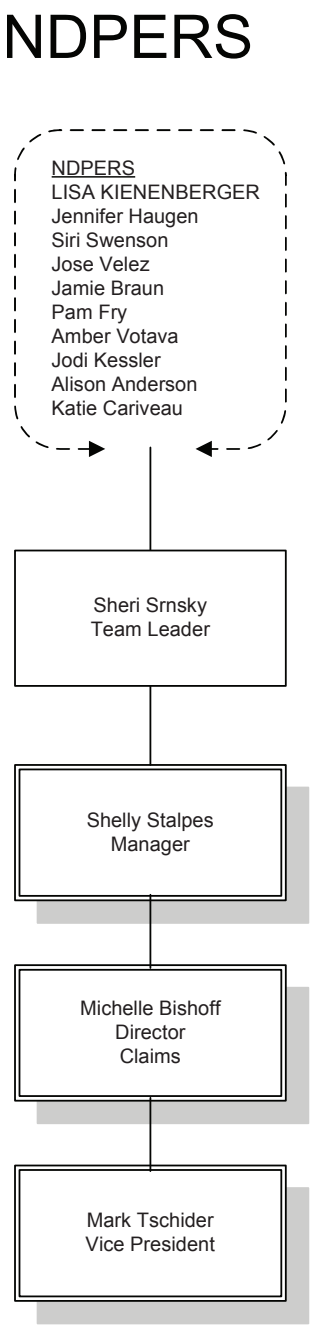
As Regional Vice President for four of Prime's Blue Cross and Blue Shield plans, Kent leads an account management team that ensures business objectives are successfully achieved. Kent works with our clients' leadership to develop and execute a comprehensive pharmacy strategy focused on effectively managing cost of care while providing optimal satisfaction to our clients and members. Kent has more than 20 years of healthcare experience, 16 of which in the pharmacy benefit management (PBM) space. Previous to joining Prime in 2011, his previous PBM positions include a Clinical Program Manager role with Express Scripts, a Principal with Mercer Health & Benefits and a Vice President position at The Burchfield Group. Kent has worked with a broad spectrum of payors, including middle market to jumbo self-insured employers, state Medicaid agencies, health plans (commercial and Medicare), and third party administrators.Kent holds a bachelor's degree in Chemistry from Saint Olaf College and a Doctor of Pharmacy degree from the University of Minnesota.

Attachment 5

Attachment 5

Attachment 5

NDPERS Service Unit



Internal Use Only

Attachment 6

Attachment 6

Samples of Standard Reporting

Sample Reports

Health Care Utilization Study

Claims Paid 01/01/2011 - 12/31/2013

Prepared By:

Management Information Services and Marketing Consulting Services Unit

Substantial legislation (Health Insurance Portability and Accountability Act and Graham Leach Bliley) has taken effect regarding the protection of personal health information. Blue Cross Blue Shield of North Dakota has worked diligently in the past to protect the privacy of personal information, and we are continuing to do so. We have reviewed the different reports and studies that we make available to our groups with respect to this legislation, and have made changes where necessary.

To ensure we are providing the “minimum necessary” information, as outlined by this legislation, we are asking you to review the reports you receive from us. If there are specific reports you have not used, or possibly will not be using in the future, we can discontinue those specific reports. We understand that you need information to make informed decisions regarding the benefits and funding of your employer group health plan. We will continue to provide that information to the best of our ability.

Effective 7/1/2013, dental and vision products from The Dental Service Corporation of North Dakota (DSC) and North Dakota Vision Services, Incorporated (VSI) began transitioning to Blue Cross Blue Shield of North Dakota (BCBSND) on the group's anniversary. Dental and Vision reports may contain a blend of data from any combination of DSC, VSI and/or BCBSND dental and vision products.

Please contact one of the Marketing Consultants if you have any questions or concerns.

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Sample Reports

Period Summary

Claims Paid 01/01/2011 - 12/31/2013

	01/01/2011 - 12/31/2011	01/01/2012 - 12/31/2012	01/01/2013 - 12/31/2013	Percent of Change 2011 - 2012	2012 - 2013	2011 - 2013
Membership						
Average Number of Contracts	1,074.2	1,100.1	1,122.9	2%	2%	5%
Average Number of Members	2,026.2	2,037.0	2,085.4	1%	2%	3%
Institutional						
Claims	2,881	3,377	3,581			
Days	408	720	569			
Charges	$5,281,057	$8,071,870	$8,015,442			
Payments	$2,857,179	$3,993,019	$4,339,518			
Average Paid Per Contract Per Month	$221.65	$302.47	$322.05	36%	6%	45%
Average Paid Per Member Per Month	$117.51	$163.35	$173.41	39%	6%	48%
Unique Members*	1,018	1,087	1,151	7%	6%	13%
Professional (excluding prescriptions)						
Services	30,289	32,049	33,788			
Charges	$4,615,343	$5,450,923	$5,728,862			
Payments	$2,322,974	$2,799,273	$2,947,657			
Average Paid Per Contract Per Month	$180.21	$212.05	$218.75	18%	3%	21%
Average Paid Per Member Per Month	$95.54	$114.52	$117.79	20%	3%	23%
Unique Members*	1,990	1,967	2,095	-1%	7%	5%
Prescription Drug						
Non-Drug Card Prescriptions						
Prescriptions	714	661	738			
Charges	$98,041	$87,390	$86,129			
Payments	$38,286	$33,727	$27,482			
Average Paid Per Contract Per Month	$2.97	$2.55	$2.04	-14%	-20%	-31%
Average Paid Per Member Per Month	$1.57	$1.38	$1.10	-12%	-20%	-30%
Unique Members*	264	234	275	-11%	18%	4%
Drug Card Prescriptions						
Prescriptions	18,950	19,025	20,103			
Charges	$2,265,644	$3,082,085	$3,438,433			
Payments	$945,290	$1,120,886	$1,449,236			
Average Paid Per Contract Per Month	$78.44	$85.22	$107.65	9%	26%	37%
Average Paid Per Member Per Month	$41.37	$45.95	$57.94	11%	26%	40%
Unique Members*	1,592	1,608	1,668	1%	4%	5%
Totals						
Average Paid Per Contract Per Month	$483.28	$602.29	$650.49	25%	8%	35%
Average Paid Per Member Per Month	$256.00	$325.20	$350.24	27%	8%	37%
Unique Members*	2,092	2,070	2,198	-1%	6%	5%

** Unique number of members incurring claims/services.*

Sample Reports

Plan/Peer Comparison

Claims Paid 01/01/2013 - 12/31/2013

		Group	Plan*	Percent Over/Under Plan*	Peer**	Percent Over/Under Peer**
Institutional						
Inpatient	- Claims per 1000 Members	72.9	74.8	-3%	72.6	0%
	- Days per 1000 Members	269.0	286.9	-6%	257.1	5%
	- Avg Charge per Member per Month	$140.98	$146.94	-4%	$129.76	9%
	- Avg Paid per Member per Month	$90.40	$77.92	16%	$70.08	29%
Outpatient	- Claims per 1000 Members	1,639.5	1,359.8	21%	1,146.9	43%
	- Avg Charge per Member per Month	$178.46	$174.78	2%	$158.51	13%
	- Avg Paid per Member per Month	$82.33	$69.56	18%	$64.73	27%
Other***	- Claims per 1000 Members	4.8	17.5	-73%	14.4	-67%
	- Avg Charge per Member per Month	$0.86	$10.19	-92%	$6.87	-87%
	- Avg Paid per Member per Month	$0.68	$1.96	-65%	$2.04	-67%
Professional (excluding prescriptions)						
	- Services per 1000 Members	16,202.2	17,171.5	-6%	17,177.9	-6%
	- Avg Charge per Member per Month	$228.93	$235.77	-3%	$227.92	0%
	- Avg Paid per Member per Month	$117.79	$109.08	8%	$107.28	10%
Prescription Drug						
	Non-Drug Card Prescriptions					
	- Prescriptions per 1000 Members	353.9	490.0	-28%	400.8	-12%
	- Avg Charge per Member per Month	$3.44	$11.16	-69%	$10.18	-66%
	- Avg Paid per Member per Month	$1.10	$4.14	-74%	$3.55	-69%
	Drug Card Prescriptions					
	- Prescriptions per 1000 Members	9,644.5	8,436.2	14%	8,151.9	18%
	- Avg Charge per Member per Month	$137.47	$109.78	25%	$108.36	27%
	- Avg Paid per Member per Month	$57.94	$41.13	41%	$43.61	33%
Total Payments per Capita						
	- Institutional, Professional, and Prescription Drug	$350.24	$303.79	15%	$291.28	20%

** Includes all BCBSND members (in state and out of state).*

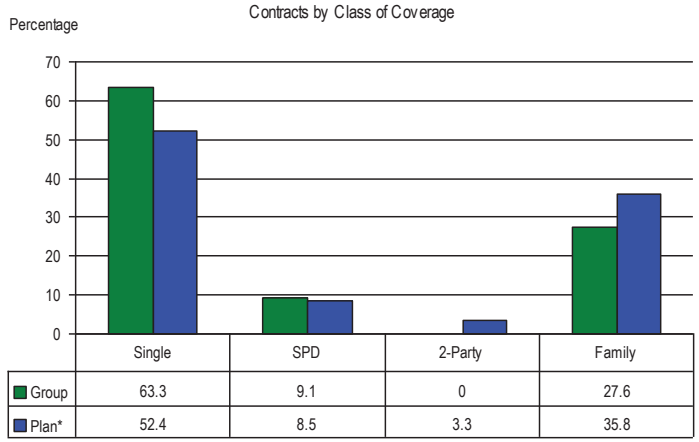
*** Service (Banks, Insurance Companies, etc.) peer group*

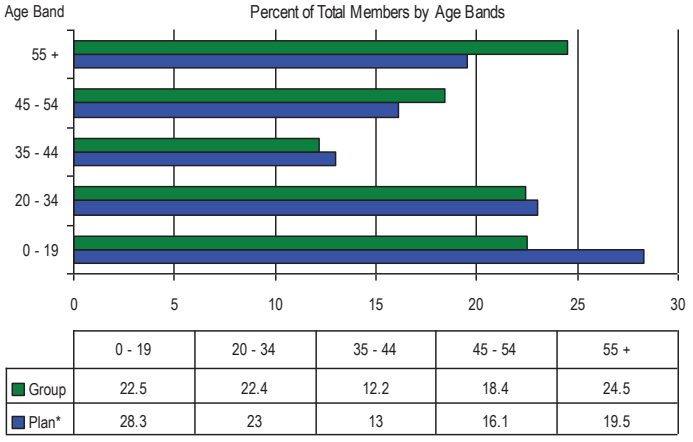
**** Contains SNF, HHA,Swing Beds, etc.*

Sample Reports

Health PMPM Membership Demographics Graph

Claims Paid 01/01/2013 - 12/31/2013





	Single		SPD		2-Party		Family		Total	
Average Contracts	711.2	63.3%	102.1	9.1%	0.0	0.0%	309.5	27.6%	1,122.9	100.0%
Average Members	711.2	34.1%	293.5	14.1%	0.0	0.0%	1,080.7	51.8%	2,085.4	100.0%

	Members	% of Total
Male	949.7	45.5%
Female	1,135.7	54.5%

	Members	% of Total
Subscriber	1,122.9	53.8%
Spouse	309.5	14.8%
Dependent	652.9	31.3%

	Group Paid Per Member Per Month	Plan* Paid Per Member Per Month
Age 0 to 19	$288.88	$191.29
Age 20 to 34	$190.28	$200.44
Age 35 to 44	$214.48	$273.99
Age 45 to 54	$413.68	$385.70
Age 55 & Over	$572.57	$546.79

** Includes all BCBSND members (in state and out of state).*

Sample Reports

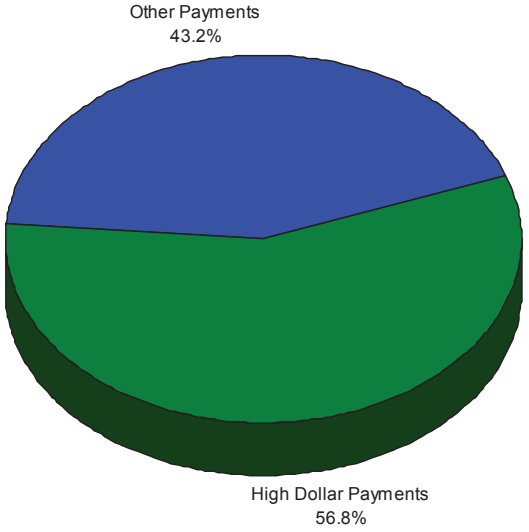
High Dollar Claims Summary

Claims Paid 01/01/2011 - 12/31/2013

	High Dollar Members	High Dollar Payments	Percent of Total Members	Percent of Total Payments	Plan* Average
01/01/2011 - 12/31/2011	70	$2,596,233	3.5%	42.1%	47.0%
01/01/2012 - 12/31/2012	79	$4,247,160	3.9%	53.4%	48.7%
01/01/2013 - 12/31/2013	88	$4,978,748	4.2%	56.8%	49.6%

Current Year

Total Payments



Accumulated IN, PR, and RX paid amounts which meet or exceed $20,000

** Includes all BCBSND members (in state and out of state).*

Sample Reports

BlueCard® Activity

Claims Paid 01/01/2013 - 12/31/2013

State	Institutional				Professional			
	Claims	Charges	Payments*	Discounts	Services	Charges	Payments	Discounts
ALABAMA	1	$678	$0	$540	2	$647	$498	$0
ARIZONA	9	$22,788	$11,098	$10,431	145	$38,839	$23,464	$13,076
CALIFORNIA	1	$2,552	$2,230	$0	58	$5,556	$1,403	$1,411
COLORADO	0	$0	$0	$0	23	$2,699	$806	$1,419
DISTRICT OF COLUMBIA	0	$0	$0	$0	5	$1,434	$263	$1,120
FLORIDA	2	$56,581	$43,792	$11,541	68	$17,312	$5,690	$10,163
GEORGIA	0	$0	$0	$0	1	$0	$0	$0
IDAHO	12	$59,820	$35,471	$21,577	106	$22,024	$9,326	$7,107
ILLINOIS	11	$9,013	$5,557	$2,070	129	$18,370	$10,528	$3,943
IOWA	0	$0	$0	$0	18	$968	$263	$371
KENTUCKY	0	$0	$0	$0	8	$928	$202	$185
MICHIGAN	2	$1,911	$1,248	$536	8	$1,334	$647	$458
MINNESOTA	85	$706,430	$506,134	$185,896	1,200	$493,997	$321,205	$140,462
MISSOURI	1	$391	$260	$20	4	$799	$237	$411
MONTANA	89	$86,266	$63,230	$9,488	294	$64,904	$24,254	$14,641
NEW JERSEY	0	$0	$0	$0	1	$500	$222	$253
NORTH CAROLINA	0	$0	$0	$0	2	$72	$19	$33
OHIO	0	$0	$0	$0	1	$149	$65	$43
OKLAHOMA	0	$0	$0	$0	2	$0	$0	$0
OREGON	4	$16,809	$14,747	$1,658	31	$8,184	$4,887	$2,206
PENNSYLVANIA	1	$1,074	$0	$105	9	$2,009	$180	$1,292
SOUTH CAROLINA	1	$202	$160	$0	0	$0	$0	$0
SOUTH DAKOTA	75	$285,232	$94,404	$175,628	951	$161,547	$54,231	$79,868
TEXAS	0	$0	$0	$0	6	$1,165	$1,071	$0
UTAH	2	$46,500	$29,419	$0	9	$675	$358	$84
VIRGINIA	1	$5,203	$5,203	$0	24	$2,197	$518	$1,577
WASHINGTON	20	$60,276	$29,481	$24,348	254	$38,809	$14,564	$15,240
WISCONSIN	24	$498,142	$439,334	$56,381	252	$163,602	$137,290	$24,114
WYOMING	0	$0	$0	$0	8	$1,299	$114	$865
Totals	**341**	**$1,859,869**	**$1,281,768**	**$500,219**	**3,619**	**$1,050,019**	**$612,304**	**$320,342**
Discounts as a percent of BlueCard charges				**27%**				**31%**
Grand Totals						**$2,909,889**	**$1,894,072**	**$820,560**
Discounts as a percent of BlueCard charges								**28%**

*Access fees are not included in the payments field

Sample Reports

Institutional Type of Service

Claims Paid 01/01/2011 - 12/31/2013

Type of Service	Claims			Days			Charges			Payments		
	12/2011	12/2012	12/2013	12/2011	12/2012	12/2013	12/2011	12/2012	12/2013	12/2011	12/2012	12/2013
Inpatient												
Normal Newborns	14	25	22	27	39	40	$26,385	$67,527	$46,390	$17,067	$33,974	$28,747
Critical Newborns	1	2	4	30	11	88	$68,668	$25,657	$457,823	$63,472	$29,176	$428,720
Medical	39	37	34	121	220	160	$494,327	$825,363	$666,722	$368,481	$463,753	$373,446
Maternity	29	38	36	67	74	80	$236,272	$287,891	$265,875	$129,875	$170,558	$142,598
Surgical	50	61	53	122	208	179	$1,427,066	$2,500,103	$2,057,353	$841,231	$1,205,986	$1,273,667
Psychiatric	6	4	1	37	58	10	$51,763	$91,471	$26,906	$16,526	$72,145	$12,420
Chemical Dependency	0	4	2	0	9	4	$0	$26,351	$6,938	$0	$14,325	$2,601
Totals	**139**	**171**	**152**	**404**	**619**	**561**	**$2,304,481**	**$3,824,363**	**$3,528,006**	**$1,436,652**	**$1,989,916**	**$2,262,200**
Outpatient												
Maternity	86	173	135				$45,826	$56,213	$75,922	$24,515	$28,081	$39,788
Surgical	263	303	324				$1,251,530	$1,593,266	$1,672,491	$615,581	$695,101	$734,931
Psychiatric	27	17	16				$37,551	$43,631	$14,092	$26,552	$18,963	$4,601
Chemical Dependency	8	16	18				$30,098	$45,558	$95,918	$26,252	$36,923	$62,456
Medical	2,355	2,687	2,926				$1,609,659	$2,426,462	$2,607,397	$724,691	$1,150,995	$1,218,625
Totals	**2,739**	**3,196**	**3,419**				**$2,974,664**	**$4,165,129**	**$4,465,819**	**$1,417,592**	**$1,930,063**	**$2,060,400**
Other												
SNF & Swing Bed	2	3	2	4	101	8	$1,362	$71,459	$8,111	$2,425	$63,963	$8,152
Home Health Agency	1	7	5	0	0	0	$550	$10,919	$2,952	$510	$9,078	$2,390
Other *	0	0	3	0	0	0	$0	$0	$10,554	$0	$0	$6,377
Refunds	0	0	0	0	0	0	$0	$0	$0	$0	$0	$0
Totals	**3**	**10**	**10**	**4**	**101**	**8**	**$1,912**	**$82,378**	**$21,617**	**$2,935**	**$73,040**	**$16,919**
Grand Totals	**2,881**	**3,377**	**3,581**	**408**	**720**	**569**	**$5,281,057**	**$8,071,870**	**$8,015,442**	**$2,857,179**	**$3,993,019**	**$4,339,518**

** Includes dialysis, labs, diagnostic services, chemotherapy,etc*

Sample Reports

Institutional Type of Service - Membership Adjusted

Claims Paid 01/01/2011 - 12/31/2013

Type of Service	Per 1000 Members: Claims			Per 1000 Members: Days			Per Member Per Month: Charges			Per Member Per Month: Payments		
	12/2011	12/2012	12/2013	12/2011	12/2012	12/2013	12/2011	12/2012	12/2013	12/2011	12/2012	12/2013
Inpatient												
Normal Newborns	6.9	12.3	10.5	13.3	19.1	19.2	$1.09	$2.76	$1.85	$0.70	$1.39	$1.15
Critical Newborns	0.5	1.0	1.9	14.8	5.4	42.2	$2.82	$1.05	$18.29	$2.61	$1.19	$17.13
Medical	19.2	18.2	16.3	59.7	108.0	76.7	$20.33	$33.77	$26.64	$15.15	$18.97	$14.92
Maternity	14.3	18.7	17.3	33.1	36.3	38.4	$9.72	$11.78	$10.62	$5.34	$6.98	$5.70
Surgical	24.7	29.9	25.4	60.2	102.1	85.8	$58.69	$102.28	$82.21	$34.60	$49.34	$50.90
Psychiatric	3.0	2.0	0.5	18.3	28.5	4.8	$2.13	$3.74	$1.08	$0.68	$2.95	$0.50
Chemical Dependency	0.0	2.0	1.0	0.0	4.4	1.9	$0.00	$1.08	$0.28	$0.00	$0.59	$0.10
Totals	**68.6**	**83.9**	**72.9**	**199.4**	**303.9**	**269.0**	**$94.78**	**$156.45**	**$140.98**	**$59.09**	**$81.41**	**$90.40**
Outpatient												
Maternity	42.4	84.9	64.7				$1.88	$2.30	$3.03	$1.01	$1.15	$1.59
Surgical	129.8	148.7	155.4				$51.47	$65.18	$66.83	$25.32	$28.44	$29.37
Psychiatric	13.3	8.3	7.7				$1.54	$1.78	$0.56	$1.09	$0.78	$0.18
Chemical Dependency	3.9	7.9	8.6				$1.24	$1.86	$3.83	$1.08	$1.51	$2.50
Medical	1,162.3	1,319.1	1,403.1				$66.20	$99.27	$104.19	$29.81	$47.09	$48.70
Totals	**1,351.8**	**1,569.0**	**1,639.5**				**$122.34**	**$170.39**	**$178.46**	**$58.30**	**$78.96**	**$82.33**
Other												
SNF & Swing Bed	1.0	1.5	1.0	2.0	49.6	3.8	$0.06	$2.92	$0.32	$0.10	$2.62	$0.33
Home Health Agency	0.5	3.4	2.4	0.0	0.0	0.0	$0.02	$0.45	$0.12	$0.02	$0.37	$0.10
Other *	0.0	0.0	1.4	0.0	0.0	0.0	$0.00	$0.00	$0.42	$0.00	$0.00	$0.25
Refunds	0.0	0.0	0.0	0.0	0.0	0.0	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00
Totals	**1.5**	**4.9**	**4.8**	**2.0**	**49.6**	**3.8**	**$0.08**	**$3.37**	**$0.86**	**$0.12**	**$2.99**	**$0.68**
Grand Totals	**1,421.9**	**1,657.8**	**1,717.2**	**201.4**	**353.5**	**272.8**	**$217.20**	**$330.22**	**$320.30**	**$117.51**	**$163.35**	**$173.41**

** Includes dialysis, labs, diagnostic services, chemotherapy,etc*

Sample Reports

Institutional Type of Service - Plan/Peer Comparison

Claims Paid 01/01/2013 - 12/31/2013

	Per 1000 Members						Per Member Per Month					
	Claims			Days			Charges			Payments		
Type of Service	**Group**	**Plan***	**Peer****	**Group**	**Plan***	**Peer****	**Group**	**Plan***	**Peer****	**Group**	**Plan***	**Peer****
Inpatient												
Normal Newborns	10.5	11.0	12.9	19.2	24.0	27.5	$1.85	$2.90	$3.43	$1.15	$1.50	$1.72
Critical Newborns	1.9	1.4	1.2	42.2	22.9	19.5	$18.29	$7.22	$5.75	$17.13	$5.31	$4.53
Medical	16.3	22.2	18.0	76.7	93.6	75.9	$26.64	$38.91	$30.42	$14.92	$20.31	$15.97
Maternity	17.3	14.1	16.4	38.4	33.4	39.7	$10.62	$9.56	$11.77	$5.70	$4.87	$6.05
Surgical	25.4	21.3	19.4	85.8	82.0	69.8	$82.21	$83.54	$74.01	$50.90	$43.36	$39.49
Psychiatric	0.5	3.5	3.3	4.8	24.9	19.2	$1.08	$3.69	$3.12	$0.50	$1.97	$1.65
Chemical Dependency	1.0	1.4	1.4	1.9	6.2	5.5	$0.28	$1.12	$1.24	$0.10	$0.58	$0.67
Totals	**72.9**	**74.8**	**72.6**	**269.0**	**286.9**	**257.1**	**$140.98**	**$146.94**	**$129.76**	**$90.40**	**$77.92**	**$70.08**
Outpatient												
Maternity	64.7	49.3	53.6	0.0	0.0	0.0	$3.03	$2.54	$2.90	$1.59	$1.18	$1.25
Surgical	155.4	158.4	142.7	0.0	0.0	0.0	$66.83	$68.51	$65.74	$29.37	$28.33	$28.22
Psychiatric	7.7	19.0	16.4	0.0	0.0	0.0	$0.56	$2.99	$2.47	$0.18	$1.45	$1.10
Chemical Dependency	8.6	19.9	27.3	0.0	0.0	0.0	$3.83	$3.30	$3.81	$2.50	$1.80	$2.08
Medical	1,403.1	1,113.2	907.0	0.0	0.0	0.0	$104.19	$97.44	$83.59	$48.70	$36.80	$32.08
Totals	**1,639.5**	**1,359.8**	**1,146.9**				**$178.46**	**$174.78**	**$158.51**	**$82.33**	**$69.56**	**$64.73**
Other												
SNF & Swing Bed	1.0	5.3	3.1	3.8	69.0	31.6	$0.32	$3.91	$1.80	$0.33	$1.01	$0.68
Home Health Agency	2.4	4.7	4.9	0.0	0.0	0.0	$0.12	$0.63	$0.68	$0.10	$0.21	$0.38
Other ***	1.4	7.4	6.5	0.0	0.2	0.0	$0.42	$6.01	$4.81	$0.25	$1.00	$1.36
Refunds	0.0	0.0	0.0	0.0	0.0	0.0	$0.00	($0.36)	($0.41)	$0.00	($0.26)	($0.38)
Totals	**4.8**	**17.5**	**14.4**	**3.8**	**69.2**	**31.6**	**$0.86**	**$10.19**	**$6.87**	**$0.68**	**$1.96**	**$2.04**
Grand Totals	**1,717.2**	**1,452.0**	**1,233.9**	**272.8**	**356.0**	**288.7**	**$320.30**	**$331.90**	**$295.14**	**$173.41**	**$149.43**	**$136.85**

** Includes all BCBSND members (in state and out of state).*

*** Service Groups peer group*

**** Includes dialysis, labs, diagnostic services, chemotherapy,etc*

Sample Reports

Institutional Cost Savings - Summary

Claims Paid 01/01/2011 - 12/31/2013

Month	Total Charges	Total Payments	Total Savings	Deductible	Coinsurance	Copay	Medicare/ COB*	Med.Policy/ Sanctions	DRG Differential	Discounts	Non-Cov Services	Adjustment Differential
1st year	**$5,281,057**	**$2,857,179**	**$2,423,878**	**$185,534**	**$215,300**	**$33,233**	**$46,200**	**$24**	**$583,453**	**$1,439,220**	**$17,177**	**($96,264)**
Savings as a Percent of Total Charges			45.9%	3.5%	4.1%	0.6%	0.9%	0.0%	11.0%	27.3%	0.3%	-1.8%
2nd year	**$8,071,870**	**$3,993,019**	**$4,078,850**	**$176,011**	**$207,913**	**$46,777**	**$122,055**	**$396**	**$971,271**	**$2,604,734**	**$11,992**	**($62,299)**
Savings as a Percent of Total Charges			50.5%	2.2%	2.6%	0.6%	1.5%	0.0%	12.0%	32.3%	0.1%	-0.8%
Jan-2013	$791,417	$366,037	$425,380	$31,923	$19,078	$3,016	$73,219	$0	$33,136	$260,929	$6,138	($2,058)
Feb-2013	$520,826	$225,151	$295,676	$34,600	$23,035	$4,555	$1,180	$0	$95,900	$137,302	$702	($1,599)
Mar-2013	$596,502	$306,420	$290,082	$22,738	$17,172	$4,882	$1,821	$0	$85,662	$149,417	$9,825	($1,436)
Apr-2013	$818,134	$423,168	$394,966	$20,043	$23,526	$7,429	$12,295	$0	$128,969	$197,308	$9,981	($4,584)
May-2013	$459,394	$224,115	$235,280	$16,000	$11,207	$3,769	$15,773	$0	$11,064	$178,935	$593	($2,061)
Jun-2013	$353,275	$178,444	$174,830	$16,507	$12,536	$3,885	$4,083	$0	$18,013	$120,742	$1,672	($2,609)
Jul-2013	$669,253	$319,808	$349,445	$13,399	$17,537	$5,056	$11,680	$3,068	$34,836	$266,500	$3,100	($5,732)
Aug-2013	$793,262	$463,613	$329,649	$13,109	$21,612	$3,005	$838	$0	$116,754	$173,717	$2,043	($1,429)
Sep-2013	$799,884	$560,526	$239,357	$8,928	$6,185	$4,716	$6,085	$1,480	$33,785	$180,449	$1,335	($3,604)
Oct-2013	$678,447	$354,981	$323,466	$13,276	$18,117	$6,065	$1,808	$673	$48,854	$236,064	($816)	($574)
Nov-2013	$680,244	$414,963	$265,281	$10,623	$12,383	$2,754	$3,821	$35	$81,852	$154,123	$706	($1,016)
Dec-2013	$854,804	$502,291	$352,513	$8,457	$11,919	$3,395	$94,489	$0	$79,876	$156,207	$250	($2,080)
3rd year	**$8,015,442**	**$4,339,518**	**$3,675,924**	**$209,604**	**$194,306**	**$52,527**	**$227,091**	**$5,256**	**$768,700**	**$2,211,691**	**$35,530**	**($28,781)**
Savings as a Percent of Total Charges			45.9%	2.6%	2.4%	0.7%	2.8%	0.1%	9.6%	27.6%	0.4%	-0.4%

** Includes Workers' Comp., coordination of benefits with second and third parties, and No-Fault Auto.*
Negative amounts in the "Non-Covered" column denote refund and supplemental activity during the month.

Sample Reports

Professional Type of Service

Claims Paid 01/01/2011 - 12/31/2013

Type of Service	Services			Charges			Payments		
	12/2011	12/2012	12/2013	12/2011	12/2012	12/2013	12/2011	12/2012	12/2013
Surgery Inpatient	130	197	162	$264,455	$389,086	$405,456	$160,719	$199,860	$193,520
Surgery Outpatient	319	370	369	$314,430	$347,327	$415,899	$136,064	$156,314	$174,188
Surgery Office	886	765	821	$350,326	$301,404	$339,812	$154,737	$141,304	$156,483
Anesthesia	443	544	503	$293,631	$375,173	$375,693	$146,150	$179,894	$180,914
Assistant Fee	89	97	92	$66,289	$116,617	$62,369	$23,289	$22,262	$27,542
Ancillary Rooms	114	97	102	$240,223	$223,569	$186,644	$124,529	$120,179	$91,614
Inpatient Visits	386	596	572	$82,361	$117,822	$200,035	$61,111	$80,508	$170,325
Hosp Outpat/ER Visit	451	542	577	$84,043	$108,959	$124,389	$37,824	$50,791	$59,378
Office Calls	5,794	5,853	6,280	$792,869	$868,252	$978,263	$403,981	$455,266	$519,901
Maternity Care	214	376	380	$109,429	$177,173	$147,406	$69,025	$105,010	$96,502
Optical Exam/Supply	586	510	538	$60,852	$57,081	$59,593	$26,800	$26,708	$24,418
Chem/Psych Inpat	37	84	11	$6,142	$15,318	$2,166	$2,680	$9,306	$1,236
Chem/Psych Outpat	36	23	13	$6,385	$4,321	$3,592	$3,174	$2,616	$1,838
Chem/Psych Office	911	900	829	$132,610	$143,463	$131,892	$73,257	$81,332	$77,117
Therapies	4,416	4,694	5,149	$274,571	$243,793	$279,385	$97,007	$116,062	$137,875
EKG, EEG, Etc.	704	825	1,085	$118,876	$148,442	$212,132	$42,705	$67,366	$93,779
Diagnostic Lab	6,377	6,594	5,959	$446,723	$507,301	$500,665	$210,769	$241,316	$225,572
Diagnostic X-Ray	3,239	3,364	3,625	$462,009	$459,539	$529,716	$231,266	$228,282	$258,249
Therapeutic Rad	99	165	53	$86,790	$160,134	$42,146	$55,083	$89,325	$24,598
Chemotherapy	66	127	202	$112,675	$185,777	$213,211	$67,262	$108,717	$104,773
Prescription Drugs	714	661	738	$98,041	$87,390	$86,129	$38,286	$33,727	$27,482
Injectables	2,562	2,471	3,271	$98,390	$120,138	$162,975	$72,434	$78,103	$112,579
Home Infusion	15	8	33	$7,066	$13,821	$26,877	$2,350	$5,126	$13,575
Supplies	147	175	308	$17,187	$15,908	$31,417	$11,187	$10,471	$19,561
HME	515	723	764	$101,171	$163,627	$136,165	$59,474	$100,756	$76,503
Special Svcs/Tests*	1,753	1,949	2,090	$85,841	$186,876	$160,966	$50,098	$122,400	$105,618
Totals	**31,003**	**32,710**	**34,526**	**$4,713,384**	**$5,538,313**	**$5,814,991**	**$2,361,260**	**$2,833,000**	**$2,975,139**

** Includes embedded dental, ambulance, blood components, venipuncture, specimen handling, allergy testing, the MediQHome program, etc.*

Sample Reports

Professional Type of Service - Membership Adjusted

Claims Paid 01/01/2011 - 12/31/2013

Type of Service	Per 1000 Members — Services			Per Member Per Month — Charges			Per Member Per Month — Payments		
	12/2011	12/2012	12/2013	12/2011	12/2012	12/2013	12/2011	12/2012	12/2013
Surgery Inpatient	64.2	96.7	77.7	$10.88	$15.92	$16.20	$6.61	$8.18	$7.73
Surgery Outpatient	157.4	181.6	176.9	$12.93	$14.21	$16.62	$5.60	$6.39	$6.96
Surgery Office	437.3	375.6	393.7	$14.41	$12.33	$13.58	$6.36	$5.78	$6.25
Anesthesia	218.6	267.1	241.2	$12.08	$15.35	$15.01	$6.01	$7.36	$7.23
Assistant Fee	43.9	47.6	44.1	$2.73	$4.77	$2.49	$0.96	$0.91	$1.10
Ancillary Rooms	56.3	47.6	48.9	$9.88	$9.15	$7.46	$5.12	$4.92	$3.66
Inpatient Visits	190.5	292.6	274.3	$3.39	$4.82	$7.99	$2.51	$3.29	$6.81
Hosp Outpat/ER Visit	222.6	266.1	276.7	$3.46	$4.46	$4.97	$1.56	$2.08	$2.37
Office Calls	2,859.5	2,873.3	3,011.4	$32.61	$35.52	$39.09	$16.61	$18.62	$20.78
Maternity Care	105.6	184.6	182.2	$4.50	$7.25	$5.89	$2.84	$4.30	$3.86
Optical Exam/Supply	289.2	250.4	258.0	$2.50	$2.34	$2.38	$1.10	$1.09	$0.98
Chem/Psych Inpat	18.3	41.2	5.3	$0.25	$0.63	$0.09	$0.11	$0.38	$0.05
Chem/Psych Outpat	17.8	11.3	6.2	$0.26	$0.18	$0.14	$0.13	$0.11	$0.07
Chem/Psych Office	449.6	441.8	397.5	$5.45	$5.87	$5.27	$3.01	$3.33	$3.08
Therapies	2,179.4	2,304.4	2,469.1	$11.29	$9.97	$11.16	$3.99	$4.75	$5.51
EKG, EEG, Etc.	347.4	405.0	520.3	$4.89	$6.07	$8.48	$1.76	$2.76	$3.75
Diagnostic Lab	3,147.3	3,237.1	2,857.5	$18.37	$20.75	$20.01	$8.67	$9.87	$9.01
Diagnostic X-Ray	1,598.6	1,651.4	1,738.3	$19.00	$18.80	$21.17	$9.51	$9.34	$10.32
Therapeutic Rad	48.9	81.0	25.4	$3.57	$6.55	$1.68	$2.27	$3.65	$0.98
Chemotherapy	32.6	62.3	96.9	$4.63	$7.60	$8.52	$2.77	$4.45	$4.19
Prescription Drugs	352.4	324.5	353.9	$4.03	$3.58	$3.44	$1.57	$1.38	$1.10
Injectables	1,264.4	1,213.1	1,568.5	$4.05	$4.91	$6.51	$2.98	$3.20	$4.50
Home Infusion	7.4	3.9	15.8	$0.29	$0.57	$1.07	$0.10	$0.21	$0.54
Supplies	72.5	85.9	147.7	$0.71	$0.65	$1.26	$0.46	$0.43	$0.78
HME	254.2	354.9	366.4	$4.16	$6.69	$5.44	$2.45	$4.12	$3.06
Special Svcs/Tests*	865.2	956.8	1,002.2	$3.53	$7.65	$6.43	$2.06	$5.01	$4.22
Totals	**15,301.1**	**16,057.9**	**16,556.1**	**$193.85**	**$226.57**	**$232.37**	**$97.11**	**$115.90**	**$118.89**

** Includes embedded dental, ambulance, blood components, venipuncture, specimen handling, allergy testing, the MediQHome program, etc.*

Sample Reports

Professional Type of Service - Plan/Peer Comparison

Claims Paid 01/01/2013 - 12/31/2013

	Per 1000 Members			Per Member Per Month					
	Services			Charges			Payments		
Type of Service	Group	Plan**	Peer***	Group	Plan**	Peer***	Group	Plan**	Peer***
Surgery Inpatient	77.7	66.9	61.8	$16.20	$10.98	$10.21	$7.73	$5.35	$5.08
Surgery Outpatient	176.9	183.3	167.4	$16.62	$15.89	$15.58	$6.96	$5.93	$5.91
Surgery Office	393.7	381.6	361.8	$13.58	$13.82	$12.57	$6.25	$5.00	$4.67
Anesthesia	241.2	223.4	208.9	$15.01	$13.15	$12.72	$7.23	$5.76	$5.72
Assistant Fee	44.1	32.2	29.2	$2.49	$3.06	$2.74	$1.10	$0.68	$0.64
Ancillary Rooms	48.9	39.5	32.0	$7.46	$6.76	$5.44	$3.66	$3.09	$2.64
Inpatient Visits	274.3	296.2	257.7	$7.99	$5.97	$5.20	$6.81	$3.64	$3.24
Hosp Outpat/ER Visit	276.7	369.9	296.3	$4.97	$6.37	$5.46	$2.37	$2.44	$2.14
Office Calls	3,011.4	2,991.3	2,988.0	$39.09	$40.99	$41.45	$20.78	$22.66	$23.00
Maternity Care	182.2	131.2	158.7	$5.89	$4.81	$5.63	$3.86	$3.05	$3.56
Optical Exam/Supply	258.0	278.6	277.9	$2.38	$2.51	$2.39	$0.98	$0.99	$1.00
Chem/Psych Inpat	5.3	33.7	32.0	$0.09	$0.52	$0.51	$0.05	$0.29	$0.28
Chem/Psych Outpat	6.2	27.1	26.2	$0.14	$0.48	$0.47	$0.07	$0.21	$0.20
Chem/Psych Office	397.5	574.2	577.3	$5.27	$7.87	$7.94	$3.08	$4.38	$4.35
Therapies	2,469.1	2,621.8	2,795.2	$11.16	$12.14	$13.24	$5.51	$5.86	$6.23
EKG, EEG, Etc.	520.3	539.1	560.9	$8.48	$7.07	$6.86	$3.75	$2.52	$2.54
Diagnostic Lab	2,857.5	3,532.4	3,623.9	$20.01	$23.65	$24.63	$9.01	$8.33	$8.63
Diagnostic X-Ray	1,738.3	1,496.3	1,455.6	$21.17	$19.61	$19.16	$10.32	$8.19	$8.22
Therapeutic Rad	25.4	49.3	45.8	$1.68	$3.61	$3.18	$0.98	$2.01	$2.16
Chemotherapy	96.9	73.4	68.9	$8.52	$8.68	$7.24	$4.19	$4.14	$3.62
Prescription Drugs	353.9	490.0	400.8	$3.44	$11.16	$10.18	$1.10	$4.14	$3.55
Injectables	1,568.5	1,531.4	1,606.1	$6.51	$7.66	$8.48	$4.50	$4.87	$5.45
Home Infusion	15.8	32.5	25.2	$1.07	$4.29	$2.29	$0.54	$1.40	$0.83
Supplies	147.7	122.7	98.8	$1.26	$1.21	$1.10	$0.78	$0.53	$0.55
HME	366.4	332.3	302.7	$5.44	$5.66	$5.10	$3.06	$2.82	$2.53
Special Svcs/Tests*	1,002.2	1,211.1	1,119.4	$6.43	$9.02	$8.35	$4.22	$4.95	$4.07
Totals	**16,556.1**	**17,661.4**	**17,578.7**	**$232.37**	**$246.93**	**$238.11**	**$118.89**	**$113.23**	**$110.82**

** Includes embedded dental, ambulance, blood components, venipuncture, specimen handling, allergy testing, the MediQHome program, etc.*

*** Includes all BCBSND members (in state and out of state).*

**** Service Groups peer group*

Sample Reports

Professional Cost Savings Summary

Claims Paid 01/01/2011 - 12/31/2013

Month	Total Charges	Total Payments	Total Savings	Deductible	Coinsurance	Copay	Medicare/ COB*	Med. Policy/ Sanctions	Discounts	Non-Cov Services	Adjustment Differential
1st year	**$4,713,384**	**$2,361,260**	**$2,352,124**	**$331,086**	**$241,771**	**$163,402**	**$45,306**	**$2,446**	**$1,492,444**	**$80,946**	**($5,276)**
Savings as a Percent of Total Charges			49.9%	7.0%	5.1%	3.5%	1.0%	0.1%	31.7%	1.7%	-0.1%
2nd year	**$5,538,313**	**$2,833,000**	**$2,705,313**	**$326,657**	**$240,656**	**$173,372**	**$69,406**	**$3,823**	**$1,778,617**	**$116,690**	**($3,909)**
Savings as a Percent of Total Charges			48.8%	5.9%	4.3%	3.1%	1.3%	0.1%	32.1%	2.1%	-0.1%
Jan-2013	$519,095	$260,085	$259,010	$38,429	$25,292	$16,625	$4,291	$1,209	$161,310	$12,152	($299)
Feb-2013	$440,343	$191,498	$248,846	$46,224	$20,360	$13,412	$14,984	$0	$149,656	$7,164	($2,954)
Mar-2013	$410,346	$212,670	$197,676	$34,553	$21,177	$13,608	$1,803	$174	$123,642	$2,910	($190)
Apr-2013	$578,949	$264,680	$314,269	$40,095	$26,105	$18,449	$2,083	$213	$220,608	$7,271	($555)
May-2013	$460,918	$257,962	$202,956	$29,263	$19,951	$14,261	$2,896	$0	$128,737	$8,468	($620)
Jun-2013	$390,387	$193,237	$197,150	$28,429	$14,250	$14,119	$3,486	$436	$129,291	$7,282	($143)
Jul-2013	$484,573	$228,580	$255,993	$34,873	$22,425	$17,033	$5,528	$1,409	$161,474	$13,409	($157)
Aug-2013	$455,178	$227,551	$227,627	$24,899	$20,129	$16,222	$2,638	$3,033	$145,246	$15,584	($124)
Sep-2013	$435,740	$251,206	$184,534	$17,760	$17,776	$13,411	$3,597	($2,222)	$124,939	$9,833	($560)
Oct-2013	$545,730	$278,283	$267,447	$24,315	$26,627	$17,654	$14,293	($109)	$177,891	$7,604	($828)
Nov-2013	$468,131	$260,836	$207,295	$23,311	$14,998	$15,619	$10,132	$294	$140,542	$2,721	($322)
Dec-2013	$625,599	$348,551	$277,048	$22,439	$19,775	$17,808	$13,716	$936	$198,297	$4,662	($586)
3rd year	**$5,814,991**	**$2,975,139**	**$2,839,852**	**$364,590**	**$248,865**	**$188,220**	**$79,446**	**$5,373**	**$1,861,634**	**$99,061**	**($7,337)**
Savings as a Percent of Total Charges			48.8%	6.3%	4.3%	3.2%	1.4%	0.1%	32.0%	1.7%	-0.1%

** Includes Workers' Comp., coordination of benefits with second and third parties, and No-Fault Auto.*
Negative amounts in the "Non-Covered" column denote refund and supplemental activity during the month.

Sample Reports

Prescription Drug Type of Drug

Claims Paid 01/01/2011 - 12/31/2013

Type of Drug	Prescriptions			Charges			Payments		
	12/2011	12/2012	12/2013	12/2011	12/2012	12/2013	12/2011	12/2012	12/2013
Antihistamine Drugs	108	66	63	$4,731	$2,031	$2,550	$326	$234	$261
Anti-Infective Agents	2,481	2,248	2,303	$146,329	$128,624	$162,049	$37,921	$24,883	$35,337
Antineoplastic Agents	77	114	141	$82,814	$231,978	$286,952	$62,390	$106,151	$167,386
Autonomic Drugs	790	851	866	$101,018	$125,269	$129,946	$48,150	$54,280	$55,897
Blood Formation & Coag	202	198	254	$45,549	$43,827	$43,022	$26,729	$19,046	$11,359
Cardiovascular Drugs	4,220	4,302	4,415	$461,111	$505,778	$552,270	$141,237	$123,618	$117,579
Centrl Nerv Sys Agents	4,488	4,349	4,735	$458,028	$524,516	$556,014	$131,518	$130,014	$123,892
Diagnostic Agents	178	218	175	$31,448	$40,846	$36,534	$21,079	$27,027	$24,714
Electrolytic, Caloric	704	798	802	$21,467	$26,908	$26,517	$3,689	$5,301	$5,435
Respiratory Agents	380	340	370	$41,285	$427,753	$396,828	$21,789	$173,156	$314,022
Eye & ENT Preparations	809	794	767	$75,510	$71,066	$74,670	$27,369	$24,918	$25,250
Gastrointestinal Drugs	695	739	872	$137,508	$156,568	$215,698	$45,358	$50,752	$79,488
Hormones, Synth Subst	2,624	2,797	3,046	$300,767	$480,419	$430,930	$140,087	$182,831	$199,472
Skin/Mucous Mem Prep	515	555	607	$55,893	$57,791	$72,969	$24,978	$22,502	$28,290
Smooth Muscle Relaxant	63	63	69	$14,461	$18,288	$14,686	$8,017	$10,108	$8,047
Vitamins	113	113	135	$3,699	$5,973	$5,702	$524	$1,313	$976
Unclass Therapeutic	294	266	288	$274,248	$219,568	$420,534	$201,177	$161,920	$248,778
Devices	110	156	128	$3,641	$9,129	$4,482	$2,305	$2,306	$2,686
Other*	99	58	67	$6,137	$5,754	$6,078	$647	$524	$365
Totals	**18,950**	**19,025**	**20,103**	**$2,265,644**	**$3,082,085**	**$3,438,433**	**$945,290**	**$1,120,886**	**$1,449,236**

** Includes blood derivatives, contraceptives, local anesthetics, and serums, etc.*

Sample Reports

Prescription Drug Generic/Brand Name Comparison

Claims Paid 01/01/2011 - 12/31/2013

	01/01/2011 - 12/31/2011	01/01/2012 - 12/31/2012	01/01/2013 - 12/31/2013	Percent of Change 2011 - 2012	2012 - 2013	2011 - 2013
Brand Name						
Prescriptions	5,094	4,377	3,868	-14%	-12%	-24%
Charges	$1,348,269	$1,933,315	$1,986,987	43%	3%	47%
Payments	$827,895	$981,724	$1,249,274	19%	27%	51%
Average Paid Per Prescription	$162.52	$224.29	$322.98	38%	44%	99%
Average Paid Per Contract Per Month	$68.70	$74.64	$92.79	9%	24%	35%
Average Paid Per Member Per Month	$36.23	$40.24	$49.95	11%	24%	38%
Generic						
Prescriptions	13,856	14,648	16,235	6%	11%	17%
Charges	$917,375	$1,148,770	$1,451,447	25%	26%	58%
Payments	$117,395	$139,163	$199,962	19%	44%	70%
Average Paid Per Prescription	$8.47	$9.50	$12.32	12%	30%	45%
Average Paid Per Contract Per Month	$9.74	$10.58	$14.85	9%	40%	52%
Average Paid Per Member Per Month	$5.14	$5.70	$7.99	11%	40%	56%
Generic Utilization Rate	73%	77%	81%	5%	5%	10%
Plan* Generic Utilization Rate	73%	77%	80%	5%	4%	10%

** Includes all BCBSND members (in state and out of state).*

Sample Reports

Prescription Drug Formulary Comparison

Claims Paid 01/01/2013 - 12/31/2013

Formulary Drugs	Brand Name	Generic	Total
Prescriptions	2,625	15,530	18,155
Charges	$1,591,700	$1,399,427	$2,991,126
Allowed Amount	$1,339,570	$436,704	$1,776,274
Payments	$1,172,534	$194,948	$1,367,482
Average Paid Per Prescription	$446.68	$12.55	$75.32
Non-Formulary Drugs			
Prescriptions	1,151	588	1,739
Charges	$237,640	$49,080	$286,720
Allowed Amount	$186,355	$15,914	$202,270
Payments	$76,739	$5,015	$81,754
Average Paid Per Prescription	$66.67	$8.53	$47.01
Non-Payable Drugs			
Prescriptions	92	117	209
Charges	$157,647	$2,940	$160,587
Allowed Amount	$0	$0	$0
Payments	$0	$0	$0
Average Paid Per Prescription	$0.00	$0.00	$0.00
Total			
Prescriptions	3,868	16,235	20,103
Charges	$1,986,987	$1,451,447	$3,438,433
Allowed Amount	$1,525,925	$452,619	$1,978,543
Payments	$1,249,274	$199,962	$1,449,236
Average Paid Per Prescription	$322.98	$12.32	$72.09
Formulary Usage Rate			90%
Generic Utilization Rate			81%
Plan* Generic Utilization Rate			80%

** Includes all BCBSND members (in state and out of state).*

Sample Reports

Prescription Drug Breakdown by Drug - Top 30 Sorted by Payments

Claims Paid 01/01/2013 - 12/31/2013

Drug Description	Type	Prescriptions	Percent of Total	Payments	Percent of Total	Average Paid Per Prescription
KALYDECO	BRAND	12	0.1%	$311,194	21.5%	$25,932.84
REBIF	BRAND	24	0.1%	$102,257	7.1%	$4,260.72
HUMIRA PEN	BRAND	30	0.1%	$95,672	6.6%	$3,189.07
GLEEVEC	BRAND	12	0.1%	$79,751	5.5%	$6,645.92
TYKERB	BRAND	12	0.1%	$45,942	3.2%	$3,828.49
CRESTOR	BRAND	221	1.1%	$39,429	2.7%	$178.41
COPAXONE	BRAND	16	0.1%	$25,211	1.7%	$1,575.71
ADVAIR DISKUS	BRAND	115	0.6%	$22,041	1.5%	$191.66
LIALDA	BRAND	33	0.2%	$20,853	1.4%	$631.90
NOVOLOG FLEXPEN	BRAND	54	0.3%	$20,243	1.4%	$374.87
LANTUS SOLOSTAR	BRAND	74	0.4%	$19,630	1.4%	$265.27
LEVEMIR FLEXPEN	BRAND	79	0.4%	$19,553	1.3%	$247.51
AMPHETAMINE/DEXTROAMPHETA	GENERIC	164	0.8%	$18,633	1.3%	$113.62
REVLIMID	BRAND	9	0.0%	$17,160	1.2%	$1,906.61
TEMODAR	BRAND	5	0.0%	$15,944	1.1%	$3,188.77
CREON	BRAND	17	0.1%	$15,927	1.1%	$936.90
CELEBREX	BRAND	72	0.4%	$14,869	1.0%	$206.52
HUMALOG KWIKPEN	BRAND	37	0.2%	$12,368	0.9%	$334.28
BUDESONIDE	GENERIC	30	0.1%	$11,716	0.8%	$390.54
DIOVAN	BRAND	72	0.4%	$11,477	0.8%	$159.40
JANUVIA	BRAND	39	0.2%	$11,429	0.8%	$293.04
VANCOMYCIN HCL	GENERIC	6	0.0%	$11,399	0.8%	$1,899.80
BYDUREON	BRAND	37	0.2%	$11,201	0.8%	$302.73
PENTASA	BRAND	12	0.1%	$10,815	0.7%	$901.21
ZENPEP	BRAND	7	0.0%	$10,606	0.7%	$1,515.19
VYVANSE	BRAND	62	0.3%	$10,269	0.7%	$165.64
LANTUS	BRAND	42	0.2%	$9,939	0.7%	$236.65
CYMBALTA	BRAND	88	0.4%	$9,592	0.7%	$109.00
PREMARIN	BRAND	73	0.4%	$9,434	0.7%	$129.23
NEXIUM	BRAND	42	0.2%	$9,264	0.6%	$220.58
OTHER		18,607	92.6%	$425,416	29.4%	$22.86
Totals		**20,103**	**100.0%**	**$1,449,236**	**100.0%**	**$72.09**

Unlisted Drugs/Supplies can be new drugs or supplies most commonly used for diabetes and allergies.

Sample Reports

Prescription Drug Cost Savings - Summary

Claims Paid 01/01/2011 - 12/31/2013

Month	Total Charges	Total Payments	Total Savings	Deductible	Coinsurance	Copay	Medicare/ COB*	Med. Policy/ Sanctions	Discounts	Non-Cov Services	Adjustment Differential
1st year	**$2,265,644**	**$945,290**	**$1,320,353**	**$81,538**	**$141,958**	**$226,463**	**$0**	**$74,382**	**$755,383**	**$40,267**	**$361**
Savings as a Percent of Total Charges			58.3%	3.6%	6.3%	10.0%	0.0%	3.3%	33.3%	1.8%	0.0%
2nd year	**$3,082,085**	**$1,120,886**	**$1,961,198**	**$86,519**	**$138,068**	**$226,564**	**$0**	**$86,935**	**$965,521**	**$457,579**	**$12**
Savings as a Percent of Total Charges			63.6%	2.8%	4.5%	7.4%	0.0%	2.8%	31.3%	14.8%	0.0%
Jan-2013	$241,220	$96,377	$144,844	$9,626	$15,857	$18,812	$0	$5,089	$93,651	$1,808	$0
Feb-2013	$238,999	$89,860	$149,139	$11,187	$9,852	$17,717	$0	$4,742	$88,622	$17,020	$0
Mar-2013	$306,815	$127,780	$179,034	$12,126	$14,063	$23,506	$0	$7,999	$118,388	$2,953	$0
Apr-2013	$242,126	$104,635	$137,491	$6,344	$10,231	$17,873	$0	$6,307	$92,840	$3,895	$0
May-2013	$243,078	$106,001	$137,076	$7,733	$9,123	$16,882	$0	$5,705	$94,893	$2,741	$0
Jun-2013	$325,483	$126,987	$198,496	$9,677	$13,205	$20,618	$0	$7,221	$112,333	$35,441	$0
Jul-2013	$303,199	$119,037	$184,162	$6,542	$10,158	$18,599	$0	$6,373	$90,737	$51,753	$0
Aug-2013	$381,256	$147,572	$233,683	$5,431	$13,691	$20,897	$0	$4,772	$121,144	$67,748	$0
Sep-2013	$267,217	$117,108	$150,109	$3,005	$9,396	$17,654	$0	$5,765	$101,700	$12,582	$7
Oct-2013	$285,214	$127,551	$157,663	$5,941	$10,728	$18,405	$0	$6,370	$110,236	$5,983	$0
Nov-2013	$306,827	$148,539	$158,287	$4,875	$11,643	$20,403	$0	$6,272	$111,684	$3,411	$0
Dec-2013	$297,000	$137,788	$159,213	$3,799	$9,889	$19,873	$0	$7,331	$115,852	$2,470	$0
3rd year	**$3,438,433**	**$1,449,236**	**$1,989,197**	**$86,286**	**$137,838**	**$231,238**	**$0**	**$73,945**	**$1,252,079**	**$207,804**	**$7**
Savings as a Percent of Total Charges			57.9%	2.5%	4.0%	6.7%	0.0%	2.2%	36.4%	6.0%	0.0%

** Includes Workers' Comp., coordination of benefits with second and third parties, and No-Fault Auto.*
Negative amounts in the "Non-Covered" column denote refund and supplemental activity during the month.

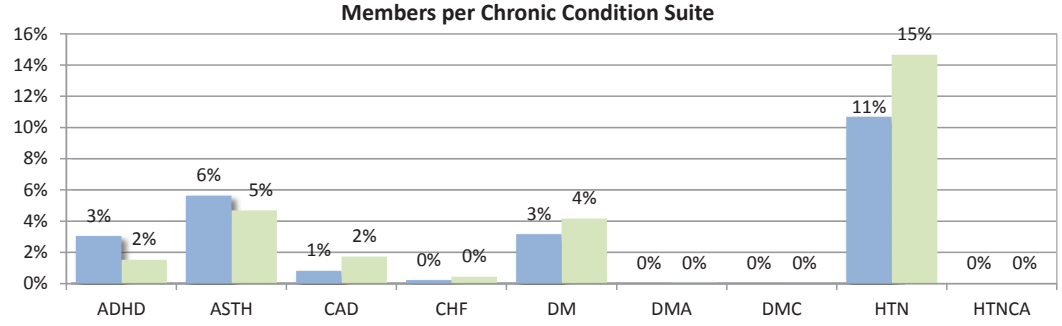
mediQhome℠
your home for quality care

Group: Sample Group
Data Refresh Date: 4/16/2014

Total Membership:	3,786	**Members in a Medical Home:**	851
ND Membership:	1,098	**Members in a Medical Home with a Targeted Chronic Condition:**	170

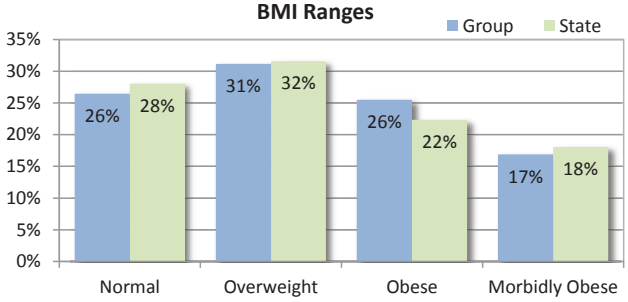
Note: Members may belong to more than one suite in the graphs below.

Members per Chronic Condition Suite

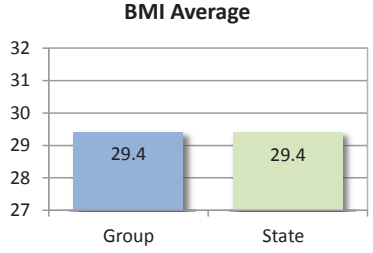


	ADHD	ASTH	CAD	CHF	DM	DMA	DMC	HTN	HTNCA
Sample Group Member Count	26	48	7	2	27	0	0	91	0

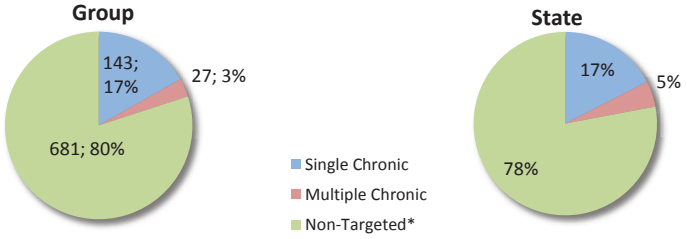
BMI Ranges



BMI Average



Members by Number of Conditions

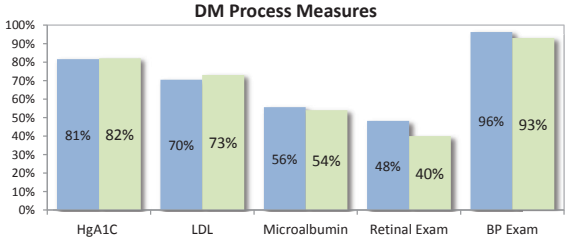


** The "Non-Targeted" category designates members who do not have one or more of the six MediQHome targeted conditions.*

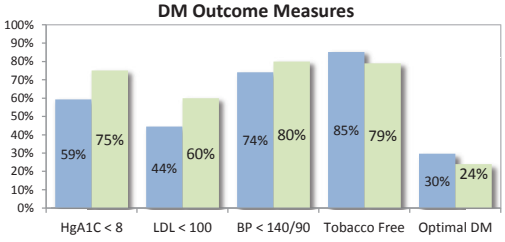
Group: Sample Group
Data Refresh Date: 4/16/2014

Clinical Performance Measures

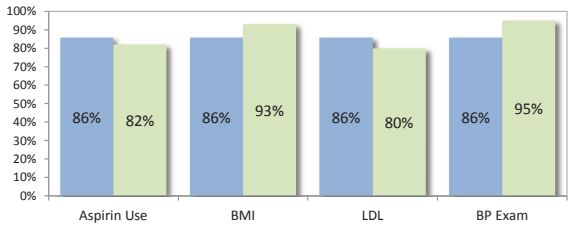
DM Process Measures



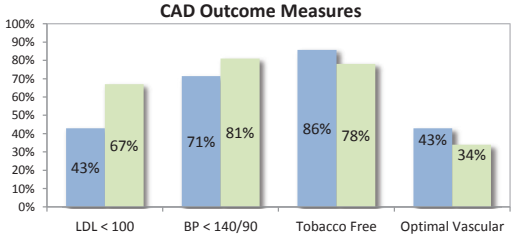
DM Outcome Measures



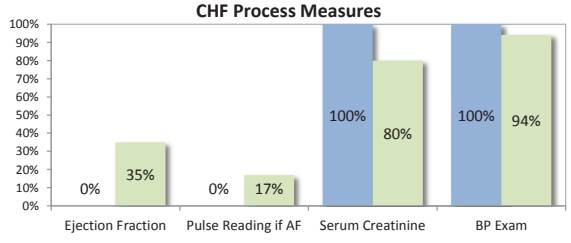
CAD Process Measures



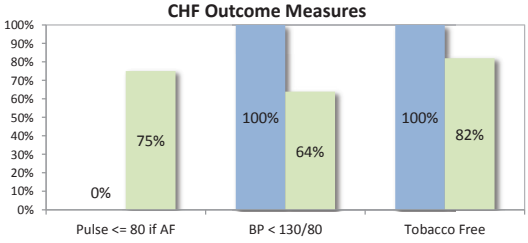
CAD Outcome Measures



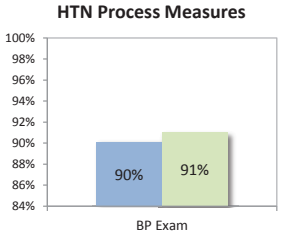
CHF Process Measures



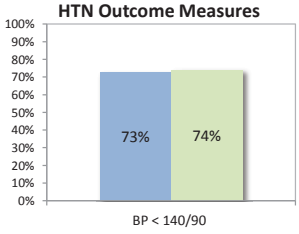
CHF Outcome Measures



HTN Process Measures



HTN Outcome Measures



Legend:
Group | State*

Abbreviations:
BP = Blood Pressure
HgA1C = Hemoglobin A1C
LDL = Low Density Lipoprotein
GFR = Glomerular Filtration Rate
ACEi/ARB = Angiotensin converting enzyme inhibitor/angiotensin receptor blocker

* State data consists of most current quarter. For definition of State, please see attached glossary.

Definitions of Terms

Membership: Defined as total active contracts as of the most recent full month.
ND Membership: Defined as the number of members who reside in North Dakota.

Members in a Medical Home: The number of group members who are in the MediQHome program and attributed to a physician.
Members in a Medical Home with a Targeted Chronic Condition: The number of members in a Medical Home who have one or more of the six targeted chronic conditions.

Six Targeted Chronic Conditions: Asthma, Attention Deficit Hyperactivity Disorder, Coronary Artery Disease, Congestive Heart Failure, Diabetes, and Hypertension. These conditions are further stratified by age to create clinical suites.

ADHD: Attention Deficit Hyperactivity Disorder
ASTH: Asthma
CAD: Coronary Artery Disease
CHF: Congestive Heart Failure
DM: Adult Diabetes
DMA: Adolescent Diabetes
DMC: Childhood Diabetes

HTN: Adult Hypertension
HTNCA: Child or Adolescent Hypertension

Single Chronic: Members who are only in one of the targeted chronic condition suites.
Multiple Chronic: Members who are in more than one of the targeted chronic condition suites.

Non-Targeted: Members who are not in any of the targeted chronic condition suites, though these members may have conditions outside of those targeted by the MediQHome program.

BMI Ranges:

- **Normal:** less than or equal to 25
- **Overweight:** between 25.01 and 29.99
- **Obese:** between 30 and 34.99
- **Morbidly Obese:** greater than or equal to 35

State Comparison: Includes all commerical BCBSND book of business plus FEP, for members under age 65 residing within the state of North Dakota (zip code beginning with 58). Medicare members are excluded.

State Employees Group
July 31, 2014

Basic Code	Class	Description	Contracts	Members
1756,1757	1	Single Active Employee & Political Sub	5,899	5,899
1756,1757	3	Family Active Employee & Political Sub	14,650	48,081
1761,1762	1	Single Political Sub, Non-Grandfathered	143	143
1761,1762	3	Family Political Sub, Non-Grandfathered	201	675
1759,1760	1	Single Active Employee & Political Sub, Non-Grandfathered HDHP	80	80
1759,1760	3	Family Active Employee & Political Sub, Non-Grandfathered HDHP	69	230
1757	1	Single Active Employee Leave of Absence, Temporary, Part-Time	0	0
1757	3	Family Active Employee Leave of Absence, Temporary, Part-Time	0	0
1757	1	Single Active Employee, COBRA	254	254
1757	3	Family Active Employee, COBRA	47	133
1760	1	Single Active Employee, Non-Grandfathered HDHP, COBRA	1	1
1760	3	Family Active Employee, Non-Grandfathered HDHP, COBRA	0	0
1756,1757	1	Single Political Sub, COBRA	82	82
1756,1757	3	Family Political Sub, COBRA	29	95
1761,1762	1	Single Political Sub, Non-Grandfathered, COBRA	4	4
1761,1762	3	Family Political Sub, Non-Grandfathered, COBRA	0	0
1759,1760	1	Single Political Sub, Non-Grandfathered HDHP, COBRA	0	0
1759,1760	3	Family Political Sub, Non-Grandfathered HDHP, COBRA	0	0
1756	1	Single Non-Medicare Retiree	366	366
1756	3	Family Non-Medicare Retiree	133	266
1757	3	Family 3+ Non Medicare Retirees	13	42
1326,1330,1328	1	Medicare Retiree (A+B) (1 medicare only)	4,223	4,223
1326,1330,1328	7	Medicare Retiree (A+B) (2 medicare only)	2,034	4,068
1326,1330,1328	3	Medicare Retiree (A+B) (3 medicare only)	6	18
1327,1331,1329	3	Medicare Retiree (A+B) (4 medicare only)	1	4
1755	1	Medicare Retiree (A only) (1 medicare only)	2	2
1753,1754,1758	1	Medicare Retiree (A+B) (non-Medicare members only)	437	437
1753,1754,1758	3	Medicare Retiree (A+B) (non-Medicare members only)	24	55
1756	1	Single Non-Medicare Retiree COBRA	1	1
1756	3	Family Non-Medicare Retiree COBRA	0	0
1757	3	Family 3+ Non Medicare Retiree COBRAs	0	0
1326,1330,1328	1	Medicare Retiree COBRA (A+B) (1 medicare only)	0	0
1326,1330,1328	7	Medicare Retiree COBRA (A+B) (2 medicare only)	0	0
1326,1330,1328	3	Medicare Retiree COBRA (A+B) (3 medicare only)	0	0
1327,1331,1329	3	Medicare Retiree COBRA (A+B) (4 medicare only)	0	0
1753,1754,1758	1	Medicare Retiree (A+B) (non-Medicare members only)	9	9
1753,1754,1758	3	Medicare Retiree (A+B) (non-Medicare members only)	0	0
		Total	**28,708**	**65,168**

SEPTEMBER 9, 2014

GROUP LEADER
ANY GROUP
ANY STREET USA
Fargo, ND 58106-9156

Dear GROUP LEADER:

Enclosed are the Claims Listings for the weekly payment of September 9, 2014. The claims payment plus administration totaled $4,552.25.

Instiutional Claims	$ 3,515.48
Professional Claims	113.99
Drug	359.35
Administration	558.43
BlueCard Admin	5.00
Total	$ 4,552.25

This amount will be transfered via ACH from your bank account #0123456789012 on Friday, September 12, 2014. If you should have any questions, please contact FINANCE at (701) 282-XXXX.

Sincerely,

BCBSND

enc. Listing

```
AF1300A   149                    ALTERNATE FINANCING CLAIMS PAID FOR WEEK ENDING 09/09/14     RUN DATE 09/09/14      PAGE 1
OD-17725                         ---------------------------------------------------------    RUN TIME 23:27:03

GROUP NO            NAME                    ANNIVERSARY: 07/01/2013         ACCOUNT TYPE:        BILL GROUP
--------            --------                GROUP LIMIT $34,966,259         ACCRUAL METHOD:      INCUR DATE
  99999   GROUP NAME                        INDIV. LIMIT   $200,000         HOSP. REIMB. METHOD: ALTERNATE REIMB. METHOD
          GROUP ADDRESS                     ADMIN. LIMIT         $0
                                            ADMIN. %           0.00

          CITY           ST 99999
                                                        . . . . . . . . . . . . . C U R R E N T  T O T A L . . . . . . . . . . . . . . . .
                                    PATIENT    TYPE       INCURRED  PAID                        PAYMENT       GROUP'S     STOP LOSS
  CONTRACT      SUBSCRIBER NAME     NO    NAME   CLM  BASIC   DATE    DATE                      AMOUNT        AMOUNT      CLAIMS
  --------      ---------------     --    ----   ---- ----- -------- --------                  -------     ---------     ---------
AAA800000000  DOE   JOHN D          01 JOHN D    PROF       08/24/13 10/02/13                    37.74          .00         37.74
                                                                                               -------     ---------     ---------
                                     **PATIENT #01 WEEKLY TOTALS:                              $37.74         $.00         $37.74
                                       PATIENT #01 YEAR-TO-DATE EXPENSE =     $255,040.09


                                                    G R O U P   T O T A L S                  $37.74         $.00         $37.74


TOTALS FOR ANNIVERSARY YEAR BEGINNING:  07/01/2013
==================================================

W E E K L Y    T O T A L S:              ANNIVERSARY YEAR-TO-DATE TOTALS:
---------------------------------       ---------------------------------
CLAIMS EXPENSE              $.00        YTD CLAIMS EXPENSE    $672,443.11
ADMIN. EXPENSE              $.00        YTD ADMIN. EXPENSE          $.00
BLUECARD FEES               $.00        YTD BLUECARD FEES         $651.00
TOTAL AMOUNT DUE            $.00
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AF1300A     2                    ALTERNATE FINANCING CLAIMS PAID FOR WEEK ENDING 09/09/14     RUN DATE 09/09/14      PAGE   2
OD-17725                        ----------------------------------------------------------    RUN TIME  3:19:08

GROUP NO            NAME                     ANNIVERSARY: 07/01/2014          ACCOUNT TYPE:        BILL GROUP
--------          --------                   GROUP LIMIT          $0          ACCRUAL METHOD:      INCUR DATE
  99999   GROUP NAME                         INDIV. LIMIT    $20,000          HOSP. REIMB. METHOD: ALTERNATE REIMB. METHOD
          GROUP ADDRESS                      ADMIN. LIMIT         $0
                                             ADMIN. %           7.40

          CITY            ST 99999
                                                        . . . . . . . . . . . . C U R R E N T   T O T A L . . . . . . . . . . . . . . . .
                                    PATIENT    TYPE       INCURRED  PAID                      PAYMENT       GROUP'S     STOP LOSS
  CONTRACT      SUBSCRIBER NAME     NO    NAME   CLM  BASIC   DATE    DATE                      AMOUNT        AMOUNT      CLAIMS
  --------      ---------------     --    ----   ---- ----- -------- --------                  -------     ---------     ---------
AAA999999999  LAST FIRST    I      09 FIRST      PROF      01/08/14 04/12/14                    58.59         58.59          .00
AAA999999999  LAST FIRST    I      09 FIRST      PROF      01/08/14 04/12/14                    55.40         55.40          .00
                                                                                              -------     ---------     ---------
                                     **PATIENT #09 WEEKLY TOTALS:                             $113.99       $113.99         $.00
                                       PATIENT #09 YEAR-TO-DATE EXPENSE =        $896.16

AAA999999998  LAST FIRST I         05 FIRST      DRUG      03/29/14 03/29/14                   199.56        199.56          .00
AAA999999998  LAST FIRST I         05 FIRST      DRUG      03/29/14 03/29/14                   159.79        159.79          .00
                                                                                              -------     ---------     ---------
                                     **PATIENT #05 WEEKLY TOTALS:                             $359.35       $359.35         $.00
                                       PATIENT #05 YEAR-TO-DATE EXPENSE =      $3,123.37

AAA999999997  LAST FIRST I         03 FIRST      INST      07/07/14 08/15/14                 3,515.48      3,515.48          .00
                                                                                              -------     ---------     ---------
                                     **PATIENT #03 WEEKLY TOTALS:                           $3,515.48     $3,515.48         $.00
                                       PATIENT #03 YEAR-TO-DATE EXPENSE =      $5,410.69


                                                  G R O U P   T O T A L S                 $4,026.56     $3,988.82        $37.74


TOTALS FOR ANNIVERSARY YEAR BEGINNING:  07/01/2014
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W E E K L Y    T O T A L S:                 ANNIVERSARY YEAR-TO-DATE TOTALS:
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CLAIMS EXPENSE          $3,988.82          YTD CLAIMS EXPENSE    $662,629.75
ADMIN. EXPENSE          $  558.43          YTD ADMIN. EXPENSE     $49,034.61
BLUECARD FEES              5.00
TOTAL AMOUNT DUE        $4,552.25
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Monthly Reports

AF2100A POOL CODE 000 - INSTITUTIONAL CLAIMS ALTERNATE FINANCE MONTHLY INCURRED TOTALS 09/26/12 PAGE 1
(OD-5083) 99999 + GROUP NAME 18:56:48

	----- GROUP LIABILITY -----		---- CARRIER LIABILITY ----		------ TOTAL LIABILITY ------	
INC MONTH	CURR MO	TO DATE	CURR MO	TO DATE	CURR MO	TO DATE
2001-01	.00	109,458.45	.00	.00	.00	109,458.45
2001-02	.00	134,540.79	.00	96,324.22	.00	230,865.01
2001-03	.00	173,986.12	.00	31,764.28	.00	205,750.40
2001-04	.00	174,620.01	.00	.00	.00	174,620.01
2001-05	.00	230,181.13	.00	.00	.00	230,181.13
2001-06	.00	167,925.52	.00	.00	.00	167,925.52
2001-07	.00	88,876.85	.00	.00	.00	88,876.85
2001-08	.00	134,704.31	.00	1,529.64	.00	136,233.95
2001-09	.00	138,079.34	.00	.00	.00	138,079.34
2001-10	.00	160,397.34	.00	3,305.18	.00	163,702.52
2001-11	.00	190,821.29	.00	5,626.19	.00	196,447.48
2001-12	.00	99,810.29	.00	3,088.68	.00	102,898.97
**TOTAL	.00	1,803,401.44	.00	141,638.19	.00	1,945,039.63
2002-01	.00	101,825.28	.00	.00	.00	101,825.28
2002-02	.00	198,391.91	.00	2,084.14	.00	200,476.05
2002-03	.00	128,285.25	.00	.00	.00	128,285.25
2002-04	.00	163,705.91	.00	.00	.00	163,705.91
2002-05	.00	168,677.43	.00	.00	.00	168,677.43
2002-06	.00	200,972.30	.00	.00	.00	200,972.30
2002-07	.00	127,325.52	.00	.00	.00	127,325.52
2002-08	.00	186,489.88	.00	2,977.81	.00	189,467.69
2002-09	.00	150,299.03	.00	132.60	.00	150,431.63
2002-10	.00	157,064.99	.00	3,444.58	.00	160,509.57
2002-11	.00	298,109.98	.00	13,546.75	.00	311,656.73
2002-12	.00	142,282.94	.00	27,182.88	.00	169,465.82
**TOTAL	.00	2,023,430.42	.00	49,368.76	.00	2,072,799.18
2003-01	.00	173,710.23	.00	.00	.00	173,710.23
2003-02	.00	183,994.63	.00	2,300.57	.00	186,295.20
2003-03	.00	170,654.87	.00	3,651.15	.00	174,306.02
2003-04	.00	192,982.29	.00	9,105.32	.00	202,087.61
2003-05	.00	261,422.04	.00	24,014.60	.00	285,436.64
2003-06	.00	251,666.74	.00	15,191.41	.00	266,858.15
2003-07	.00	236,938.69	.00	13,493.08	.00	250,431.77
2003-08	.00	193,176.95	.00	4,866.98	.00	198,043.93
2003-09	.00	252,227.39	.00	43,097.57	.00	295,324.96
2003-10	.00	239,051.19	.00	541.66	.00	239,592.85
2003-11	.00	182,177.37	.00	9,315.96	.00	191,493.33
2003-12	.00	269,323.72	.00	21,684.24	.00	291,007.96
**TOTAL	.00	2,607,326.11	.00	147,262.54	.00	2,754,588.65

INC MONTH	GROUP LIABILITY CURR MO	GROUP LIABILITY TO DATE	CARRIER LIABILITY CURR MO	CARRIER LIABILITY TO DATE	TOTAL LIABILITY CURR MO	TOTAL LIABILITY TO DATE
2004-01	.00	251,544.47	.00	.00	.00	251,544.47
2004-02	.00	187,238.39	.00	.00	.00	187,238.39
2004-03	.00	296,775.23	.00	.00	.00	296,775.23
2004-04	.00	224,033.62	.00	13,483.26	.00	237,516.88
2004-05	.00	187,825.59	.00	23,108.75	.00	210,934.34
2004-06	.00	262,921.60	.00	83,782.82	.00	346,704.42
2004-07	.00	230,645.86	.00	24,407.05	.00	255,052.91
2004-08	.00	244,076.01	.00	10,248.82	.00	254,324.83
2004-09	.00	229,707.54	.00	14,470.45	.00	244,177.99
2004-10	.00	332,366.96	.00	12,300.15	.00	344,667.11
2004-11	.00	270,660.05	.00	12,009.48	.00	282,669.53
2004-12	.00	370,331.95	.00	34,746.64	.00	405,078.59
**TOTAL	.00	3,088,127.27	.00	228,557.42	.00	3,316,684.69
2005-01	.00	434,841.77	.00	9,110.05	.00	443,951.82
2005-02	.00	329,052.95	.00	9,571.47	.00	338,624.42
2005-03	.00	284,160.39	.00	28,081.74	.00	312,242.13
2005-04	.00	316,028.52	.00	12,063.40	.00	328,091.92
2005-05	.00	203,790.45	.00	10,818.68	.00	214,609.13
2005-06	.00	342,095.94	.00	16,108.50	.00	358,204.44
2005-07	.00	170,613.55	.00	13,001.18	.00	183,614.73
2005-08	.00	217,490.18	.00	12,290.57	.00	229,780.75
2005-09	.00	325,273.08	.00	36,937.91	.00	362,210.99
2005-10	.00	227,107.41	.00	35,068.08	.00	262,175.49
2005-11	.00	319,959.51	.00	74,542.19	.00	394,501.70
2005-12	.00	301,709.77	.00	70,664.44	.00	372,374.21
**TOTAL	.00	3,472,123.52	.00	328,258.21	.00	3,800,381.73
2006-01	.00	520,348.84	.00	12,323.36	.00	532,672.20
2006-02	.00	369,894.45	.00	58,795.89	.00	428,690.34
2006-03	.00	268,470.82	.00	38,021.23	.00	306,492.05
2006-04	.00	289,170.31	.00	89,470.32	.00	378,640.63
2006-05	.00	291,288.13	.00	203,195.33	.00	494,483.46
2006-06	.00	270,067.79	.00	158,765.37	.00	428,833.16
2006-07	.00	249,642.02	.00	105,808.00	.00	355,450.02
2006-08	.00	370,268.39	.00	57,096.67	.00	427,365.06
2006-09	.00	214,413.27	.00	91,407.19	.00	305,820.46
2006-10	.00	303,497.73	.00	37,567.40	.00	341,065.13
2006-11	.00	293,808.00	.00	67,867.84	.00	361,675.84
2006-12	.00	242,045.09	.00	98,036.05	.00	340,081.14
**TOTAL	.00	3,682,914.84	.00	1,018,354.65	.00	4,701,269.49

INC MONTH	GROUP LIABILITY CURR MO	GROUP LIABILITY TO DATE	CARRIER LIABILITY CURR MO	CARRIER LIABILITY TO DATE	TOTAL LIABILITY CURR MO	TOTAL LIABILITY TO DATE
2007-01	.00	326,460.04	.00	53,889.73	.00	380,349.77
2007-02	.00	232,892.68	.00	309.87	.00	233,202.55
2007-03	.00	312,556.09	.00	107,809.42	.00	420,365.51
2007-04	.00	289,511.03	.00	34,742.65	.00	324,253.68
2007-05	.00	352,482.46	.00	146,141.30	.00	498,623.76
2007-06	.00	246,564.83	.00	111,108.48	.00	357,673.31
2007-07	.00	346,037.35	.00	28,988.16	.00	375,025.51
2007-08	.00	284,004.67	.00	53,451.46	.00	337,456.13
2007-09	.00	261,886.00	.00	66,294.37	.00	328,180.37
2007-10	.00	346,124.52	.00	156,747.39	.00	502,871.91
2007-11	.00	285,981.92	.00	294,057.77	.00	580,039.69
2007-12	.00	400,972.43	.00	55,191.88	.00	456,164.31
**TOTAL	.00	3,685,474.02	.00	1,108,732.48	.00	4,794,206.50
2008-01	.00	394,489.77	.00	82,198.58	.00	476,688.35
2008-02	.00	504,836.05	.00	68,277.46	.00	573,113.51
2008-03	.00	390,558.91	.00	55,218.25	.00	445,777.16
2008-04	.00	343,414.22	.00	80,291.91	.00	423,706.13
2008-05	.00	303,727.89	.00	41,728.04	.00	345,455.93
2008-06	.00	315,291.76	.00	154,735.80	.00	470,027.56
2008-07	.00	288,266.73	.00	28,663.27	.00	316,930.00
2008-08	.00	246,418.47	.00	140,292.68	.00	386,711.15
2008-09	.00	411,189.01	.00	31,037.59	.00	442,226.60
2008-10	.00	544,563.76	.00	179,485.92	.00	724,049.68
2008-11	.00	343,954.94	.00	248,247.40	.00	592,202.34
2008-12	.00	484,402.00	.00	538,531.81	.00	1,022,933.81
**TOTAL	.00	4,571,113.51	.00	1,648,708.71	.00	6,219,822.22
2009-01	.00	513,973.49	.00	177,367.92	.00	691,341.41
2009-02	.00	506,230.21	.00	161,953.80	.00	668,184.01
2009-03	.00	621,672.03	.00	360,679.96	.00	982,351.99
2009-04	.00	401,153.47	.00	403,166.77	.00	804,320.24
2009-05	.00	599,435.10	.00	513,482.24	.00	1,112,917.34
2009-06	.00	477,192.44	.00	266,095.27	.00	743,287.71
2009-07	.00	555,949.53	.00	171,182.65	.00	727,132.18
2009-08	.00	326,238.81	.00	176,150.15	.00	502,388.96
2009-09	.00	377,210.49	.00	721,559.99	.00	1,098,770.48
2009-10	.00	432,935.23	.00	125,776.15	.00	558,711.38
2009-11	.00	528,593.87	.00	278,868.65	.00	807,462.52
2009-12	.00	483,477.73	.00	402,909.24	.00	886,386.97
**TOTAL	.00	5,824,062.40	.00	3,759,192.79	.00	9,583,255.19

AF2100A POOL CODE 000 - INSTITUTIONAL CLAIMS ALTERNATE FINANCE MONTHLY INCURRED TOTALS 09/26/12 PAGE 4
(OD-5083) 99999 + GROUP NAME 18:56:48

	----- GROUP LIABILITY -----		---- CARRIER LIABILITY ----		------ TOTAL LIABILITY ------	
INC MONTH	CURR MO	TO DATE	CURR MO	TO DATE	CURR MO	TO DATE
2010-01	.00	624,910.35	.00	168,731.79	.00	793,642.14
2010-02	.00	388,591.43	.00	298,525.20	.00	687,116.63
2010-03	.00	551,319.10	.00	84,990.74	.00	636,309.84
2010-04	.00	513,154.13	.00	129,961.15	.00	643,115.28
2010-05	.00	485,614.27	.00	127,305.64	.00	612,919.91
2010-06	.00	474,647.18	.00	32,263.52	.00	506,910.70
2010-07	.00	602,097.11	.00	50,454.84	.00	652,551.95
2010-08	.00	491,554.70	.00	510,612.22	.00	1,002,166.92
2010-09	.00	593,397.00	.00	227,328.37	.00	820,725.37
2010-10	.00	436,955.76	.00	75,786.14	.00	512,741.90
2010-11	.00	576,808.20	.00	483,793.25	.00	1,060,601.45
2010-12	.00	540,007.59	.00	140,629.40	.00	680,636.99
**TOTAL	.00	6,279,056.82	.00	2,330,382.26	.00	8,609,439.08
2011-01	.00	443,068.54	.00	101,271.40	.00	544,339.94
2011-02	.00	408,963.25	.00	10,767.81	.00	419,731.06
2011-03	.00	477,812.46	.00	80,851.47	.00	558,663.93
2011-04	.00	412,770.27	.00	42,052.05	.00	454,822.32
2011-05	.00	408,864.83	.00	14,446.96	.00	423,311.79
2011-06	.00	376,398.90	.00	188,026.32	.00	564,425.22
2011-07	.00	340,326.82	.00	155,783.96	.00	496,110.78
2011-08	.00	461,193.23	.00	54,986.93	.00	516,180.16
2011-09	339.06	405,372.40	.00	121,704.03	339.06	527,076.43
2011-10	.00	408,924.63	.00	67,389.76	.00	476,314.39
2011-11	1,537.49-	552,199.10	.00	70,804.11	1,537.49-	623,003.21
2011-12	6,897.65	473,315.43	.00	225,710.46	6,897.65	699,025.89
**TOTAL	5,699.22	5,169,209.86	.00	1,133,795.26	5,699.22	6,303,005.12
2012-01	1,478.01	258,794.55	.00	.00	1,478.01	258,794.55
2012-02	5,360.19	367,601.78	.00	.00	5,360.19	367,601.78
2012-03	129.26	452,578.93	.00	.00	129.26	452,578.93
2012-04	7,643.48	438,163.37	.00	7,893.62	7,643.48	446,056.99
2012-05	3,223.89	463,644.96	.00	66,008.82	3,223.89	529,653.78
2012-06	928.36	338,565.81	.00	69,978.28	928.36	408,544.09
2012-07	19,923.77	370,368.16	1,627.26	50,407.46	21,551.03	420,775.62
2012-08	211,242.08	346,219.37	8,050.87	21,431.68	219,292.95	367,651.05
2012-09	57,409.08	57,409.08	.00	.00	57,409.08	57,409.08
**TOTAL	307,338.12	3,093,346.01	9,678.13	215,719.86	317,016.25	3,309,065.87
** GRAND TOTAL	313,037.34	45,299,586.22	9,678.13	12,109,971.13	322,715.47	57,409,557.35

INC MONTH	GROUP LIABILITY CURR MO	GROUP LIABILITY TO DATE	CARRIER LIABILITY CURR MO	CARRIER LIABILITY TO DATE	TOTAL LIABILITY CURR MO	TOTAL LIABILITY TO DATE
2001-01	.00	111,479.91	.00	9.57	.00	111,489.48
2001-02	.00	105,343.95	.00	71.28	.00	105,415.23
2001-03	.00	146,460.33	.00	320.00	.00	146,780.33
2001-04	.00	135,228.16	.00	1,571.83	.00	136,799.99
2001-05	.00	147,889.75	.00	1,158.30	.00	149,048.05
2001-06	.00	117,533.29	.00	34.20	.00	117,567.49
2001-07	.00	119,029.77	.00	767.63	.00	119,797.40
2001-08	.00	155,234.80	.00	1,659.21	.00	156,894.01
2001-09	.00	125,834.82	.00	80.49	.00	125,915.31
2001-10	.00	131,617.13	.00	1,835.87	.00	133,453.00
2001-11	.00	144,175.81	.00	3,626.59	.00	147,802.40
2001-12	.00	141,558.38	.00	2,410.88	.00	143,969.26
**TOTAL	.00	1,581,386.10	.00	13,545.85	.00	1,594,931.95
2002-01	.00	120,226.32	.00	.00	.00	120,226.32
2002-02	.00	119,205.00	.00	5,328.70	.00	124,533.70
2002-03	.00	126,311.16	.00	94.50	.00	126,405.66
2002-04	.00	142,652.44	.00	66.24	.00	142,718.68
2002-05	.00	141,671.35	.00	.00	.00	141,671.35
2002-06	.00	163,965.39	.00	491.15	.00	164,456.54
2002-07	.00	162,714.96	.00	191.31	.00	162,906.27
2002-08	.00	183,679.09	.00	14,137.89	.00	197,816.98
2002-09	.00	169,247.41	.00	26,152.76	.00	195,400.17
2002-10	.00	182,988.24	.00	31,854.94	.00	214,843.18
2002-11	.00	178,422.83	.00	51,117.51	.00	229,540.34
2002-12	.00	167,699.00	.00	46,643.77	.00	214,342.77
**TOTAL	.00	1,858,783.19	.00	176,078.77	.00	2,034,861.96
2003-01	.00	192,853.26	.00	.00	.00	192,853.26
2003-02	.00	178,841.36	.00	28,962.17	.00	207,803.53
2003-03	.00	172,447.19	.00	42,812.21	.00	215,259.40
2003-04	.00	164,762.25	.00	31,310.41	.00	196,072.66
2003-05	.00	216,209.13	.00	43,194.96	.00	259,404.09
2003-06	.00	206,101.61	.00	31,725.77	.00	237,827.38
2003-07	.00	199,818.40	.00	37,462.38	.00	237,280.78
2003-08	.00	202,843.61	.00	31,595.99	.00	234,439.60
2003-09	.00	207,670.36	.00	29,266.30	.00	236,936.66
2003-10	.00	266,403.32	.00	9,345.12	.00	275,748.44
2003-11	.00	178,676.28	.00	14,015.73	.00	192,692.01
2003-12	.00	272,233.96	.00	11,610.16	.00	283,844.12
**TOTAL	.00	2,458,860.73	.00	311,301.20	.00	2,770,161.93

INC MONTH	GROUP LIABILITY CURR MO	GROUP LIABILITY TO DATE	CARRIER LIABILITY CURR MO	CARRIER LIABILITY TO DATE	TOTAL LIABILITY CURR MO	TOTAL LIABILITY TO DATE
2004-01	.00	173,783.33	.00	.00	.00	173,783.33
2004-02	.00	165,843.76	.00	12.90	.00	165,856.66
2004-03	.00	241,148.89	.00	.00	.00	241,148.89
2004-04	.00	203,308.33	.00	4,551.54	.00	207,859.87
2004-05	.00	181,758.81	.00	1,849.33	.00	183,608.14
2004-06	.00	202,739.79	.00	10,102.95	.00	212,842.74
2004-07	.00	202,789.49	.00	5,924.94	.00	208,714.43
2004-08	.00	252,869.36	.00	1,519.75	.00	254,389.11
2004-09	.00	232,752.22	.00	3,549.84	.00	236,302.06
2004-10	.00	257,649.52	.00	11,445.10	.00	269,094.62
2004-11	.00	239,744.08	.00	1,520.71	.00	241,264.79
2004-12	.00	316,761.93	.00	1,692.22	.00	318,454.15
**TOTAL	.00	2,671,149.51	.00	42,169.28	.00	2,713,318.79
2005-01	.00	208,651.03	.00	5,943.10	.00	214,594.13
2005-02	.00	207,412.12	.00	3,274.38	.00	210,686.50
2005-03	.00	297,051.62	.00	26,424.67	.00	323,476.29
2005-04	.00	273,743.15	.00	9,226.20	.00	282,969.35
2005-05	.00	207,133.08	.00	6,677.20	.00	213,810.28
2005-06	.00	221,409.19	.00	19,682.80	.00	241,091.99
2005-07	.00	175,475.55	.00	10,908.91	.00	186,384.46
2005-08	.00	248,814.62	.00	11,441.35	.00	260,255.97
2005-09	.00	265,647.43	.00	33,109.47	.00	298,756.90
2005-10	.00	217,763.74	.00	21,569.26	.00	239,333.00
2005-11	.00	299,634.95	.00	13,312.88	.00	312,947.83
2005-12	.00	328,726.54	.00	10,411.45	.00	339,137.99
**TOTAL	.00	2,951,463.02	.00	171,981.67	.00	3,123,444.69
2006-01	.00	272,442.10	.00	13,662.10	.00	286,104.20
2006-02	.00	238,483.62	.00	9,104.60	.00	247,588.22
2006-03	.00	256,919.25	.00	35,993.89	.00	292,913.14
2006-04	.00	235,575.98	.00	3,924.55	.00	239,500.53
2006-05	.00	273,598.39	.00	8,138.08	.00	281,736.47
2006-06	.00	260,050.60	.00	33,872.40	.00	293,923.00
2006-07	.00	225,210.32	.00	10,950.97	.00	236,161.29
2006-08	.00	298,529.47	.00	14,305.25	.00	312,834.72
2006-09	.00	220,134.25	.00	20,864.75	.00	240,999.00
2006-10	.00	293,781.26	.00	25,823.06	.00	319,604.32
2006-11	.00	274,310.49	.00	25,398.41	.00	299,708.90
2006-12	.00	305,112.54	.00	25,887.31	.00	330,999.85
**TOTAL	.00	3,154,148.27	.00	227,925.37	.00	3,382,073.64

INC MONTH	GROUP LIABILITY CURR MO	GROUP LIABILITY TO DATE	CARRIER LIABILITY CURR MO	CARRIER LIABILITY TO DATE	TOTAL LIABILITY CURR MO	TOTAL LIABILITY TO DATE
2007-01	.00	253,096.48	.00	2,413.34	.00	255,509.82
2007-02	.00	247,165.93	.00	1,674.17	.00	248,840.10
2007-03	.00	247,823.65	.00	148.19-	.00	247,675.46
2007-04	.00	290,693.33	.00	11,496.95	.00	302,190.28
2007-05	.00	291,006.82	.00	31,209.12	.00	322,215.94
2007-06	.00	266,899.00	.00	26,253.97	.00	293,152.97
2007-07	.00	267,335.41	.00	29,202.04	.00	296,537.45
2007-08	.00	284,275.13	.00	37,470.23	.00	321,745.36
2007-09	.00	279,109.16	.00	15,072.68	.00	294,181.84
2007-10	.00	315,894.44	.00	24,464.43	.00	340,358.87
2007-11	.00	349,980.81	.00	39,299.34	.00	389,280.15
2007-12	.00	351,212.31	.00	29,019.63	.00	380,231.94
**TOTAL	.00	3,444,492.47	.00	247,427.71	.00	3,691,920.18
2008-01	.00	295,479.47	.00	6,520.13	.00	301,999.60
2008-02	.00	372,337.13	.00	31,759.09	.00	404,096.22
2008-03	.00	347,811.59	.00	18,381.72	.00	366,193.31
2008-04	.00	388,134.68	.00	32,220.08	.00	420,354.76
2008-05	.00	306,096.57	.00	25,680.57	.00	331,777.14
2008-06	.00	296,115.25	.00	11,884.48	.00	307,999.73
2008-07	.00	291,852.04	.00	12,083.11	.00	303,935.15
2008-08	.00	269,272.24	.00	25,320.23	.00	294,592.47
2008-09	.00	338,062.41	.00	25,937.99	.00	364,000.40
2008-10	.00	397,945.39	.00	37,990.88	.00	435,936.27
2008-11	.00	333,607.77	.00	43,565.29	.00	377,173.06
2008-12	.00	441,505.46	.00	31,118.34	.00	472,623.80
**TOTAL	.00	4,078,220.00	.00	302,461.91	.00	4,380,681.91
2009-01	.00	324,069.32	.00	325.34	.00	324,394.66
2009-02	.00	365,122.05	.00	54,439.99	.00	419,562.04
2009-03	.00	393,914.74	.00	35,167.07	.00	429,081.81
2009-04	.00	418,291.42	.00	50,784.08	.00	469,075.50
2009-05	.00	415,468.07	.00	95,895.43	.00	511,363.50
2009-06	.00	403,644.57	.00	70,069.50	.00	473,714.07
2009-07	.00	429,708.88	.00	41,507.99	.00	471,216.87
2009-08	.00	343,547.57	.00	52,490.13	.00	396,037.70
2009-09	.00	413,812.95	.00	103,417.34	.00	517,230.29
2009-10	.00	404,487.89	.00	91,684.72	.00	496,172.61
2009-11	.00	484,515.54	.00	85,954.67	.00	570,470.21
2009-12	.00	459,446.70	.00	125,496.90	.00	584,943.60
**TOTAL	.00	4,856,029.70	.00	807,233.16	.00	5,663,262.86

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	----- GROUP LIABILITY -----		---- CARRIER LIABILITY ----		------ TOTAL LIABILITY ------	
INC MONTH	CURR MO	TO DATE	CURR MO	TO DATE	CURR MO	TO DATE
2010-01	.00	398,459.53	.00	2,310.62	.00	400,770.15
2010-02	.00	367,775.00	.00	5,785.35	.00	373,560.35
2010-03	.00	439,924.11	.00	24,874.78	.00	464,798.89
2010-04	.00	473,242.18	.00	7,721.41	.00	480,963.59
2010-05	.00	413,106.87	.00	38,205.15	.00	451,312.02
2010-06	.00	482,522.87	.00	8,016.62	.00	490,539.49
2010-07	.00	488,726.50	.00	22,138.20	.00	510,864.70
2010-08	.00	477,666.64	.00	89,955.06	.00	567,621.70
2010-09	.00	485,901.62	.00	59,995.84	.00	545,897.46
2010-10	.00	447,711.98	.00	45,947.55	.00	493,659.53
2010-11	.00	499,214.81	.00	68,146.00	.00	567,360.81
2010-12	.00	548,044.32	.00	58,743.14	.00	606,787.46
**TOTAL	.00	5,522,296.43	.00	431,839.72	.00	5,954,136.15
2011-01	.00	326,063.80	.00	8,267.23	.00	334,331.03
2011-02	.00	333,360.84	.00	12,408.23	.00	345,769.07
2011-03	.00	449,266.31	.00	21,457.66	.00	470,723.97
2011-04	1,576.84	413,894.66	.00	73,615.22	1,576.84	487,509.88
2011-05	.00	435,722.95	765.68-	14,812.96	765.68-	450,535.91
2011-06	.00	431,859.12	.00	47,836.33	.00	479,695.45
2011-07	179.76	346,139.37	.00	57,977.96	179.76	404,117.33
2011-08	.00	447,159.45	.00	62,125.89	.00	509,285.34
2011-09	582.17	432,237.08	136.00	36,354.26	718.17	468,591.34
2011-10	.00	404,876.38	.00	41,620.91	.00	446,497.29
2011-11	53.85-	479,270.94	.00	30,464.75	53.85-	509,735.69
2011-12	3,228.06	493,873.11	99.10	74,149.27	3,327.16	568,022.38
**TOTAL	5,512.98	4,993,724.01	530.58-	481,090.67	4,982.40	5,474,814.68
2012-01	75.20	299,860.44	17.29	354.27	92.49	300,214.71
2012-02	86.46	377,223.55	.00	168.61	86.46	377,392.16
2012-03	1,229.01	469,772.68	266.69	4,899.89	1,495.70	474,672.57
2012-04	3,503.83	416,218.29	266.69	29,417.23	3,770.52	445,635.52
2012-05	4,349.56	444,756.21	.00	55,303.82	4,349.56	500,060.03
2012-06	5,862.33	415,107.80	1,352.63	51,792.56	7,214.96	466,900.36
2012-07	27,773.91	405,582.60	21,641.71	36,022.17	49,415.62	441,604.77
2012-08	233,090.21	372,326.99	13,388.91	20,433.42	246,479.12	392,760.41
2012-09	80,227.09	80,227.09	10,222.77	10,222.77	90,449.86	90,449.86
**TOTAL	356,197.60	3,281,075.65	47,156.69	208,614.74	403,354.29	3,489,690.39
** GRAND TOTAL	361,710.58	40,851,629.08	46,626.11	3,421,670.05	408,336.69	44,273,299.13

INC MONTH	GROUP LIABILITY CURR MO	GROUP LIABILITY TO DATE	CARRIER LIABILITY CURR MO	CARRIER LIABILITY TO DATE	TOTAL LIABILITY CURR MO	TOTAL LIABILITY TO DATE
2001-01	.00	91,127.46	.00	.00	.00	91,127.46
2001-02	.00	85,873.71	.00	.00	.00	85,873.71
2001-03	.00	90,073.78	.00	.00	.00	90,073.78
2001-04	.00	86,999.64	.00	.00	.00	86,999.64
2001-05	.00	94,032.50	.00	.00	.00	94,032.50
2001-06	.00	79,249.21	.00	.00	.00	79,249.21
2001-07	.00	84,149.73	.00	80.51	.00	84,230.24
2001-08	.00	86,024.69	.00	433.14	.00	86,457.83
2001-09	.00	89,219.51	.00	18.45	.00	89,237.96
2001-10	.00	94,855.80	.00	80.60	.00	94,936.40
2001-11	.00	97,110.21	.00	116.34	.00	97,226.55
2001-12	.00	93,588.85	.00	447.93	.00	94,036.78
**TOTAL	.00	1,072,305.09	.00	1,176.97	.00	1,073,482.06
2002-01	.00	105,326.49	.00	.00	.00	105,326.49
2002-02	.00	97,891.18	.00	.00	.00	97,891.18
2002-03	.00	98,267.47	.00	.00	.00	98,267.47
2002-04	.00	111,002.09	.00	217.74	.00	111,219.83
2002-05	.00	106,905.14	.00	156.07	.00	107,061.21
2002-06	.00	96,810.61	.00	158.36	.00	96,968.97
2002-07	.00	104,003.34	.00	120.78	.00	104,124.12
2002-08	.00	110,373.19	.00	120.78	.00	110,493.97
2002-09	.00	113,109.17	.00	181.63	.00	113,290.80
2002-10	.00	113,026.83	.00	118.23	.00	113,145.06
2002-11	.00	107,704.18	.00	232.07	.00	107,936.25
2002-12	.00	124,837.55	.00	381.98	.00	125,219.53
**TOTAL	.00	1,289,257.24	.00	1,687.64	.00	1,290,944.88
2003-01	.00	135,879.80	.00	.00	.00	135,879.80
2003-02	.00	124,571.14	.00	.00	.00	124,571.14
2003-03	.00	146,815.47	.00	33.87	.00	146,849.34
2003-04	.00	128,560.15	.00	24.89	.00	128,585.04
2003-05	.00	131,622.91	.00	.00	.00	131,622.91
2003-06	.00	134,164.12	.00	547.76	.00	134,711.88
2003-07	.00	131,469.28	.00	44.50	.00	131,513.78
2003-08	.00	137,930.30	.00	44.50	.00	137,974.80
2003-09	.00	141,434.58	.00	695.46	.00	142,130.04
2003-10	.00	140,106.52	.00	.00	.00	140,106.52
2003-11	.00	132,119.93	.00	199.24	.00	132,319.17
2003-12	.00	155,511.59	.00	1,285.31	.00	156,796.90
**TOTAL	.00	1,640,185.79	.00	2,875.53	.00	1,643,061.32

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	----- GROUP LIABILITY -----		---- CARRIER LIABILITY ----		------ TOTAL LIABILITY ------	
INC MONTH	CURR MO	TO DATE	CURR MO	TO DATE	CURR MO	TO DATE
2004-01	.00	121,021.74	.00	.00	.00	121,021.74
2004-02	.00	112,980.39	.00	.00	.00	112,980.39
2004-03	.00	131,854.32	.00	.00	.00	131,854.32
2004-04	.00	117,580.34	.00	.00	.00	117,580.34
2004-05	.00	121,459.86	.00	161.57	.00	121,621.43
2004-06	.00	130,677.43	.00	708.27	.00	131,385.70
2004-07	.00	126,738.84	.00	56.69	.00	126,795.53
2004-08	.00	133,437.89	.00	254.00	.00	133,691.89
2004-09	.00	123,554.63	.00	542.04	.00	124,096.67
2004-10	.00	137,608.57	.00	560.97	.00	138,169.54
2004-11	.00	127,815.53	.00	243.14	.00	128,058.67
2004-12	.00	144,528.42	.00	1,057.62	.00	145,586.04
**TOTAL	.00	1,529,257.96	.00	3,584.30	.00	1,532,842.26
2005-01	.00	129,898.91	.00	.00	.00	129,898.91
2005-02	.00	125,635.36	.00	.00	.00	125,635.36
2005-03	.00	144,245.97	.00	174.39	.00	144,420.36
2005-04	.00	127,878.06	.00	366.18	.00	128,244.24
2005-05	.00	129,521.81	.00	1,358.72	.00	130,880.53
2005-06	.00	126,574.24	.00	404.32	.00	126,978.56
2005-07	.00	121,725.80	.00	525.26	.00	122,251.06
2005-08	.00	145,930.50	.00	1,058.14	.00	146,988.64
2005-09	.00	131,925.68	.00	1,236.17	.00	133,161.85
2005-10	.00	140,237.92	.00	1,964.76	.00	142,202.68
2005-11	.00	143,099.10	.00	3,046.02	.00	146,145.12
2005-12	.00	168,185.36	.00	3,376.81	.00	171,562.17
**TOTAL	.00	1,634,858.71	.00	13,510.77	.00	1,648,369.48
2006-01	.00	126,070.13	.00	.00	.00	126,070.13
2006-02	.00	125,126.22	.00	.00	.00	125,126.22
2006-03	.00	137,237.82	.00	1,117.57	.00	138,355.39
2006-04	.00	115,152.97	.00	4,240.02	.00	119,392.99
2006-05	.00	134,264.13	.00	2,965.12	.00	137,229.25
2006-06	.00	136,305.52	.00	3,430.33	.00	139,735.85
2006-07	.00	108,780.43	.00	9,767.54	.00	118,547.97
2006-08	.00	130,005.66	.00	3,716.00	.00	133,721.66
2006-09	.00	128,898.01	.00	6,015.62	.00	134,913.63
2006-10	.00	128,748.34	.00	7,666.62	.00	136,414.96
2006-11	.00	129,010.24	.00	4,193.21	.00	133,203.45
2006-12	.00	144,690.41	.00	12,738.32	.00	157,428.73
**TOTAL	.00	1,544,289.88	.00	55,850.35	.00	1,600,140.23

INC MONTH	GROUP LIABILITY CURR MO	GROUP LIABILITY TO DATE	CARRIER LIABILITY CURR MO	CARRIER LIABILITY TO DATE	TOTAL LIABILITY CURR MO	TOTAL LIABILITY TO DATE
2007-01	.00	138,613.58	.00	.00	.00	138,613.58
2007-02	.00	133,794.77	.00	875.89	.00	134,670.66
2007-03	.00	134,091.22	.00	4,962.87	.00	139,054.09
2007-04	.00	125,529.05	.00	1,518.43	.00	127,047.48
2007-05	.00	128,473.88	.00	5,463.98	.00	133,937.86
2007-06	.00	135,708.49	.00	4,967.09	.00	140,675.58
2007-07	.00	117,581.22	.00	4,422.65	.00	122,003.87
2007-08	.00	125,065.50	.00	4,703.14	.00	129,768.64
2007-09	.00	135,707.88	.00	4,930.41	.00	140,638.29
2007-10	.00	146,872.46	.00	5,904.65	.00	152,777.11
2007-11	.00	127,793.88	.00	6,583.89	.00	134,377.77
2007-12	.00	150,968.30	.00	9,305.80	.00	160,274.10
**TOTAL	.00	1,600,200.23	.00	53,638.80	.00	1,653,839.03
2008-01	.00	162,403.16	.00	119.42	.00	162,522.58
2008-02	.00	138,875.59	.00	2,632.70	.00	141,508.29
2008-03	.00	151,564.20	.00	4,544.31	.00	156,108.51
2008-04	.00	147,085.44	.00	4,148.49	.00	151,233.93
2008-05	.00	145,595.64	.00	6,751.51	.00	152,347.15
2008-06	.00	145,430.65	.00	5,177.92	.00	150,608.57
2008-07	.00	144,622.47	.00	5,978.59	.00	150,601.06
2008-08	.00	138,550.48	.00	11,324.54	.00	149,875.02
2008-09	.00	151,177.41	.00	12,240.05	.00	163,417.46
2008-10	.00	145,689.59	.00	12,782.20	.00	158,471.79
2008-11	.00	131,681.02	.00	15,067.96	.00	146,748.98
2008-12	.00	163,305.98	.00	17,701.67	.00	181,007.65
**TOTAL	.00	1,765,981.63	.00	98,469.36	.00	1,864,450.99
2009-01	.00	154,629.62	.00	.00	.00	154,629.62
2009-02	.00	149,599.33	.00	3,516.70	.00	153,116.03
2009-03	.00	166,608.60	.00	3,565.90	.00	170,174.50
2009-04	.00	149,184.91	.00	7,809.32	.00	156,994.23
2009-05	.00	144,729.62	.00	4,856.54	.00	149,586.16
2009-06	.00	164,694.98	.00	3,595.94	.00	168,290.92
2009-07	.00	141,083.98	.00	9,776.38	.00	150,860.36
2009-08	.00	152,607.64	.00	11,751.34	.00	164,358.98
2009-09	.00	165,045.94	.00	5,753.00	.00	170,798.94
2009-10	.00	161,525.00	.00	12,314.37	.00	173,839.37
2009-11	.00	148,746.28	.00	8,953.86	.00	157,700.14
2009-12	.00	186,991.44	.00	10,464.22	.00	197,455.66
**TOTAL	.00	1,885,447.34	.00	82,357.57	.00	1,967,804.91

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INC MONTH	GROUP LIABILITY CURR MO	GROUP LIABILITY TO DATE	CARRIER LIABILITY CURR MO	CARRIER LIABILITY TO DATE	TOTAL LIABILITY CURR MO	TOTAL LIABILITY TO DATE
2010-01	.00	180,369.11	.00	.00	.00	180,369.11
2010-02	.00	152,746.96	.00	.00	.00	152,746.96
2010-03	.00	192,314.76	.00	93.22	.00	192,407.98
2010-04	.00	177,015.37	.00	1,457.63	.00	178,473.00
2010-05	.00	164,066.76	.00	3,698.05	.00	167,764.81
2010-06	.00	186,031.02	.00	5,036.36	.00	191,067.38
2010-07	.00	178,916.56	.00	4,022.25	.00	182,938.81
2010-08	.00	184,736.11	.00	4,813.62	.00	189,549.73
2010-09	.00	179,053.51	.00	1,702.60	.00	180,756.11
2010-10	.00	182,200.75	.00	9,124.66	.00	191,325.41
2010-11	.00	192,726.99	.00	11,416.42	.00	204,143.41
2010-12	.00	204,532.03	.00	7,155.44	.00	211,687.47
**TOTAL	.00	2,174,709.93	.00	48,520.25	.00	2,223,230.18
2011-01	.00	176,431.75	.00	.00	.00	176,431.75
2011-02	.00	178,355.17	.00	61.77	.00	178,416.94
2011-03	.00	205,644.33	.00	441.86	.00	206,086.19
2011-04	.00	148,366.56	.00	964.33	.00	149,330.89
2011-05	.00	173,789.03	.00	1,667.80	.00	175,456.83
2011-06	.00	188,233.54	.00	1,517.82	.00	189,751.36
2011-07	.00	148,432.84	.00	3,616.16	.00	152,049.00
2011-08	.00	167,986.03	.00	1,949.62	.00	169,935.65
2011-09	.00	175,276.02	.00	2,444.72	.00	177,720.74
2011-10	.00	177,292.79	.00	3,169.32	.00	180,462.11
2011-11	.00	171,110.98	.00	21,298.84	.00	192,409.82
2011-12	.00	185,032.01	.00	7,414.42	.00	192,446.43
**TOTAL	.00	2,095,951.05	.00	44,546.66	.00	2,140,497.71
2012-01	.00	162,946.82	.00	.00	.00	162,946.82
2012-02	.00	164,105.74	.00	.00	.00	164,105.74
2012-03	.00	171,018.21	.00	.00	.00	171,018.21
2012-04	.00	165,920.02	.00	.00	.00	165,920.02
2012-05	.00	196,401.18	.00	448.30	.00	196,849.48
2012-06	.00	180,412.63	.00	3,140.28	.00	183,552.91
2012-07	307.60-	202,609.41	.00	1,745.04	307.60-	204,354.45
2012-08	44,315.30	232,849.04	394.39	4,011.02	44,709.69	236,860.06
2012-09	140,385.81	140,385.81	1,195.10	1,195.10	141,580.91	141,580.91
**TOTAL	184,393.51	1,616,648.86	1,589.49	10,539.74	185,983.00	1,627,188.60
** GRAND TOTAL	184,393.51	19,849,093.71	1,589.49	416,757.94	185,983.00	20,265,851.65

	GROUP LIABILITY		CARRIER LIABILITY		TOTAL LIABILITY	
INC MONTH	CURR MO	TO DATE	CURR MO	TO DATE	CURR MO	TO DATE
2001-01	.00	3,709.15	.00	.00	.00	3,709.15
2001-02	.00	5,154.60	.00	.00	.00	5,154.60
2001-03	.00	8,526.90	.00	.00	.00	8,526.90
2001-04	.00	8,215.89	.00	.00	.00	8,215.89
2001-05	.00	9,917.70	.00	.00	.00	9,917.70
2001-06	.00	8,823.39	.00	.00	.00	8,823.39
2001-07	.00	9,364.72	.00	.00	.00	9,364.72
2001-08	.00	13,061.63	.00	.00	.00	13,061.63
2001-09	.00	14,978.19	.00	.00	.00	14,978.19
2001-10	.00	10,765.62	.00	.00	.00	10,765.62
2001-11	.00	11,508.39	.00	.00	.00	11,508.39
2001-12	.00	10,293.44	.00	.00	.00	10,293.44
**TOTAL	.00	114,319.62	.00	.00	.00	114,319.62
2002-01	.00	8,690.65	.00	.00	.00	8,690.65
2002-02	.00	9,331.25	.00	.00	.00	9,331.25
2002-03	.00	10,650.42	.00	.00	.00	10,650.42
2002-04	.00	16,164.65	.00	.00	.00	16,164.65
2002-05	.00	15,315.34	.00	.00	.00	15,315.34
2002-06	.00	18,506.99	.00	.00	.00	18,506.99
2002-07	.00	10,540.49	.00	.00	.00	10,540.49
2002-08	.00	11,618.06	.00	.00	.00	11,618.06
2002-09	.00	11,254.88	.00	.00	.00	11,254.88
2002-10	.00	17,028.72	.00	.00	.00	17,028.72
2002-11	.00	13,605.58	.00	.00	.00	13,605.58
2002-12	.00	14,186.76	.00	91.00	.00	14,277.76
**TOTAL	.00	156,893.79	.00	91.00	.00	156,984.79
2003-01	.00	9,420.23	.00	.00	.00	9,420.23
2003-02	.00	18,643.30	.00	.00	.00	18,643.30
2003-03	.00	16,140.80	.00	.00	.00	16,140.80
2003-04	.00	15,385.33	.00	.00	.00	15,385.33
2003-05	.00	13,215.10	.00	.00	.00	13,215.10
2003-06	.00	21,864.02	.00	.00	.00	21,864.02
2003-07	.00	15,879.86	.00	.00	.00	15,879.86
2003-08	.00	19,407.27	.00	.00	.00	19,407.27
2003-09	.00	17,155.30	.00	.00	.00	17,155.30
2003-10	.00	20,493.30	.00	164.40	.00	20,657.70
2003-11	.00	13,277.93	.00	67.32	.00	13,345.25
2003-12	.00	15,813.30	.00	.00	.00	15,813.30
**TOTAL	.00	196,695.74	.00	231.72	.00	196,927.46

INC MONTH	GROUP LIABILITY CURR MO	GROUP LIABILITY TO DATE	CARRIER LIABILITY CURR MO	CARRIER LIABILITY TO DATE	TOTAL LIABILITY CURR MO	TOTAL LIABILITY TO DATE
2004-01	.00	10,335.55	.00	.00	.00	10,335.55
2004-02	.00	17,293.36	.00	.00	.00	17,293.36
2004-03	.00	16,737.33	.00	.00	.00	16,737.33
2004-04	.00	14,436.09	.00	855.53	.00	15,291.62
2004-05	.00	13,926.42	.00	2,008.43	.00	15,934.85
2004-06	.00	14,341.85	.00	286.30	.00	14,628.15
2004-07	.00	14,571.15	.00	182.24	.00	14,753.39
2004-08	.00	18,667.39	.00	91.12	.00	18,758.51
2004-09	.00	20,430.83	.00	182.24	.00	20,613.07
2004-10	.00	19,056.58	.00	104.57	.00	19,161.15
2004-11	.00	16,787.65	.00	91.12	.00	16,878.77
2004-12	.00	17,688.15	.00	.00	.00	17,688.15
**TOTAL	.00	194,272.35	.00	3,801.55	.00	198,073.90
2005-01	.00	7,569.91	.00	.00	.00	7,569.91
2005-02	.00	12,323.91	.00	.00	.00	12,323.91
2005-03	.00	13,988.76	.00	.00	.00	13,988.76
2005-04	.00	15,592.27	.00	.00	.00	15,592.27
2005-05	.00	16,273.51	.00	.00	.00	16,273.51
2005-06	.00	17,571.27	.00	235.97	.00	17,807.24
2005-07	.00	12,180.51	.00	36.12	.00	12,216.63
2005-08	.00	25,331.25	.00	140.80	.00	25,472.05
2005-09	.00	36,796.59	.00	.00	.00	36,796.59
2005-10	.00	27,321.49	.00	28.00	.00	27,349.49
2005-11	.00	49,762.79	.00	172.33	.00	49,935.12
2005-12	.00	50,168.97	.00	70.72	.00	50,239.69
**TOTAL	.00	284,881.23	.00	683.94	.00	285,565.17
2006-01	.00	13,362.84	.00	.00	.00	13,362.84
2006-02	.00	30,683.14	.00	.00	.00	30,683.14
2006-03	.00	33,924.02	.00	.00	.00	33,924.02
2006-04	.00	22,663.56	.00	.00	.00	22,663.56
2006-05	.00	29,947.16	.00	.00	.00	29,947.16
2006-06	.00	16,325.41	.00	722.60	.00	17,048.01
2006-07	.00	16,706.35	.00	1,457.54	.00	18,163.89
2006-08	.00	25,504.57	.00	1,368.01	.00	26,872.58
2006-09	.00	17,949.74	.00	413.03	.00	18,362.77
2006-10	.00	26,862.43	.00	345.08	.00	27,207.51
2006-11	.00	25,354.86	.00	349.73	.00	25,704.59
2006-12	.00	26,301.72	.00	408.44	.00	26,710.16
**TOTAL	.00	285,585.80	.00	5,064.43	.00	290,650.23

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	----- GROUP LIABILITY -----		---- CARRIER LIABILITY ----		------ TOTAL LIABILITY ------	
INC MONTH	CURR MO	TO DATE	CURR MO	TO DATE	CURR MO	TO DATE
2007-01	.00	8,351.76	.00	130.90	.00	8,482.66
2007-02	.00	11,857.71	.00	.00	.00	11,857.71
2007-03	.00	15,261.65	.00	.00	.00	15,261.65
2007-04	.00	18,213.62	.00	.00	.00	18,213.62
2007-05	.00	20,115.54	.00	82.63	.00	20,198.17
2007-06	.00	20,181.98	.00	82.63	.00	20,264.61
2007-07	.00	18,130.50	.00	119.00	.00	18,249.50
2007-08	.00	24,142.33	.00	136.55	.00	24,278.88
2007-09	.00	16,121.39	.00	40.33	.00	16,161.72
2007-10	.00	20,235.35	.00	291.17	.00	20,526.52
2007-11	.00	16,349.00	.00	312.51	.00	16,661.51
2007-12	.00	16,750.77	.00	632.95	.00	17,383.72
**TOTAL	.00	205,711.60	.00	1,828.67	.00	207,540.27
2008-01	.00	6,572.24	.00	.00	.00	6,572.24
2008-02	.00	9,554.27	.00	.00	.00	9,554.27
2008-03	.00	10,737.11	.00	.00	.00	10,737.11
2008-04	.00	13,756.34	.00	.00	.00	13,756.34
2008-05	.00	15,700.41	.00	.00	.00	15,700.41
2008-06	.00	10,293.75	.00	.00	.00	10,293.75
2008-07	.00	10,596.87	.00	.00	.00	10,596.87
2008-08	.00	7,661.92	.00	.00	.00	7,661.92
2008-09	.00	12,458.01	.00	.00	.00	12,458.01
2008-10	.00	8,943.87	.00	106.31	.00	9,050.18
2008-11	.00	9,448.04	.00	388.20	.00	9,836.24
2008-12	.00	11,015.05	.00	95.67	.00	11,110.72
**TOTAL	.00	126,737.88	.00	590.18	.00	127,328.06
** GRAND TOTAL	.00	1,565,098.01	.00	12,291.49	.00	1,577,389.50

INC MONTH	GROUP LIABILITY CURR MO	GROUP LIABILITY TO DATE	CARRIER LIABILITY CURR MO	CARRIER LIABILITY TO DATE	TOTAL LIABILITY CURR MO	TOTAL LIABILITY TO DATE
2001-01	.00	374,900.29	.00	9.57	.00	374,909.86
2001-02	.00	386,437.92	.00	96,395.50	.00	482,833.42
2001-03	.00	473,343.10	.00	32,084.28	.00	505,427.38
2001-04	.00	453,561.62	.00	1,571.83	.00	455,133.45
2001-05	.00	531,475.17	.00	1,158.30	.00	532,633.47
2001-06	.00	423,667.47	.00	34.20	.00	423,701.67
2001-07	.00	347,903.19	.00	966.14	.00	348,869.33
2001-08	.00	444,810.19	.00	3,621.99	.00	448,432.18
2001-09	.00	402,897.08	.00	98.94	.00	402,996.02
2001-10	.00	447,546.71	.00	5,221.65	.00	452,768.36
2001-11	.00	493,804.83	.00	9,369.12	.00	503,173.95
2001-12	.00	391,224.11	.00	5,947.49	.00	397,171.60
**TOTAL	.00	5,171,571.68	.00	156,479.01	.00	5,328,050.69
2002-01	.00	399,505.24	.00	.00	.00	399,505.24
2002-02	.00	467,840.94	.00	7,412.84	.00	475,253.78
2002-03	.00	413,930.21	.00	94.50	.00	414,024.71
2002-04	.00	492,803.11	.00	283.98	.00	493,087.09
2002-05	.00	481,702.97	.00	156.07	.00	481,859.04
2002-06	.00	533,079.60	.00	649.51	.00	533,729.11
2002-07	.00	452,312.79	.00	312.09	.00	452,624.88
2002-08	.00	547,605.28	.00	17,236.48	.00	564,841.76
2002-09	.00	483,256.11	.00	26,466.99	.00	509,723.10
2002-10	.00	519,090.18	.00	35,417.75	.00	554,507.93
2002-11	.00	641,337.46	.00	64,896.33	.00	706,233.79
2002-12	.00	501,522.21	.00	74,299.63	.00	575,821.84
**TOTAL	.00	5,933,986.10	.00	227,226.17	.00	6,161,212.27
2003-01	.00	572,476.82	.00	.00	.00	572,476.82
2003-02	.00	559,346.28	.00	31,262.74	.00	590,609.02
2003-03	.00	569,859.44	.00	46,497.23	.00	616,356.67
2003-04	.00	567,178.43	.00	40,440.62	.00	607,619.05
2003-05	.00	680,342.42	.00	67,209.56	.00	747,551.98
2003-06	.00	664,007.40	.00	47,464.94	.00	711,472.34
2003-07	.00	640,017.17	.00	50,999.96	.00	691,017.13
2003-08	.00	605,882.58	.00	36,507.47	.00	642,390.05
2003-09	.00	664,057.53	.00	73,059.33	.00	737,116.86
2003-10	.00	714,216.05	.00	10,051.18	.00	724,267.23
2003-11	.00	552,117.51	.00	23,598.25	.00	575,715.76
2003-12	.00	763,250.59	.00	34,579.71	.00	797,830.30
**TOTAL	.00	7,552,752.22	.00	461,670.99	.00	8,014,423.21

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INC MONTH	GROUP LIABILITY CURR MO	GROUP LIABILITY TO DATE	CARRIER LIABILITY CURR MO	CARRIER LIABILITY TO DATE	TOTAL LIABILITY CURR MO	TOTAL LIABILITY TO DATE
2004-01	.00	615,065.02	.00	.00	.00	615,065.02
2004-02	.00	537,682.30	.00	12.90	.00	537,695.20
2004-03	.00	752,236.79	.00	.00	.00	752,236.79
2004-04	.00	614,436.90	.00	18,890.33	.00	633,327.23
2004-05	.00	558,596.61	.00	27,128.08	.00	585,724.69
2004-06	.00	671,435.40	.00	94,880.34	.00	766,315.74
2004-07	.00	633,528.70	.00	30,570.92	.00	664,099.62
2004-08	.00	712,553.90	.00	12,113.69	.00	724,667.59
2004-09	.00	656,545.22	.00	18,744.57	.00	675,289.79
2004-10	.00	792,110.18	.00	24,410.79	.00	816,520.97
2004-11	.00	707,842.42	.00	14,027.85	.00	721,870.27
2004-12	.00	914,100.95	.00	37,496.48	.00	951,597.43
**TOTAL	.00	8,166,134.39	.00	278,275.95	.00	8,444,410.34
2005-01	.00	847,565.42	.00	15,053.15	.00	862,618.57
2005-02	.00	729,941.08	.00	12,845.85	.00	742,786.93
2005-03	.00	803,223.81	.00	54,680.80	.00	857,904.61
2005-04	.00	787,751.81	.00	21,760.78	.00	809,512.59
2005-05	.00	612,330.88	.00	19,303.30	.00	631,634.18
2005-06	.00	770,716.04	.00	36,431.59	.00	807,147.63
2005-07	.00	521,655.00	.00	24,471.47	.00	546,126.47
2005-08	.00	703,087.86	.00	24,930.86	.00	728,018.72
2005-09	.00	813,723.11	.00	71,367.55	.00	885,090.66
2005-10	.00	653,759.48	.00	58,630.10	.00	712,389.58
2005-11	.00	866,068.25	.00	91,073.42	.00	957,141.67
2005-12	.00	899,260.57	.00	84,523.42	.00	983,783.99
**TOTAL	.00	9,009,083.31	.00	515,072.29	.00	9,524,155.60
2006-01	.00	993,706.30	.00	25,985.46	.00	1,019,691.76
2006-02	.00	830,991.20	.00	67,900.49	.00	898,891.69
2006-03	.00	754,213.46	.00	75,132.69	.00	829,346.15
2006-04	.00	708,196.21	.00	97,634.89	.00	805,831.10
2006-05	.00	778,906.00	.00	214,298.53	.00	993,204.53
2006-06	.00	745,168.28	.00	196,866.70	.00	942,034.98
2006-07	.00	648,519.18	.00	128,122.45	.00	776,641.63
2006-08	.00	901,732.97	.00	76,550.93	.00	978,283.90
2006-09	.00	631,631.28	.00	118,700.59	.00	750,331.87
2006-10	.00	805,421.32	.00	72,368.56	.00	877,789.88
2006-11	.00	772,609.03	.00	97,911.79	.00	870,520.82
2006-12	.00	773,567.21	.00	137,179.52	.00	910,746.73
**TOTAL	.00	9,344,662.44	.00	1,308,652.60	.00	10,653,315.04

INC MONTH	GROUP LIABILITY CURR MO	GROUP LIABILITY TO DATE	CARRIER LIABILITY CURR MO	CARRIER LIABILITY TO DATE	TOTAL LIABILITY CURR MO	TOTAL LIABILITY TO DATE
2007-01	.00	795,979.62	.00	56,433.97	.00	852,413.59
2007-02	.00	689,764.45	.00	2,859.93	.00	692,624.38
2007-03	.00	781,236.50	.00	112,624.10	.00	893,860.60
2007-04	.00	786,305.05	.00	47,758.03	.00	834,063.08
2007-05	.00	849,310.60	.00	182,897.03	.00	1,032,207.63
2007-06	.00	723,490.67	.00	142,412.17	.00	865,902.84
2007-07	.00	804,600.24	.00	62,731.85	.00	867,332.09
2007-08	.00	778,456.33	.00	95,997.38	.00	874,453.71
2007-09	.00	753,318.37	.00	86,337.79	.00	839,656.16
2007-10	.00	902,929.54	.00	187,407.64	.00	1,090,337.18
2007-11	.00	842,120.92	.00	342,316.71	.00	1,184,437.63
2007-12	.00	973,634.65	.00	94,495.86	.00	1,068,130.51
**TOTAL	.00	9,681,146.94	.00	1,414,272.46	.00	11,095,419.40
2008-01	.00	944,039.80	.00	88,838.13	.00	1,032,877.93
2008-02	.00	1,088,798.39	.00	102,669.25	.00	1,191,467.64
2008-03	.00	970,907.33	.00	78,144.28	.00	1,049,051.61
2008-04	.00	952,771.40	.00	116,778.48	.00	1,069,549.88
2008-05	.00	840,273.64	.00	74,160.12	.00	914,433.76
2008-06	.00	832,605.94	.00	171,798.20	.00	1,004,404.14
2008-07	.00	800,513.43	.00	47,057.37	.00	847,570.80
2008-08	.00	729,179.10	.00	177,693.05	.00	906,872.15
2008-09	.00	969,860.05	.00	69,215.63	.00	1,039,075.68
2008-10	.00	1,150,493.34	.00	230,365.31	.00	1,380,858.65
2008-11	.00	866,814.82	.00	308,200.05	.00	1,175,014.87
2008-12	.00	1,162,574.27	.00	588,281.09	.00	1,750,855.36
**TOTAL	.00	11,308,831.51	.00	2,053,200.96	.00	13,362,032.47
2009-01	.00	1,061,140.26	.00	177,693.26	.00	1,238,833.52
2009-02	.00	1,086,404.47	.00	219,910.49	.00	1,306,314.96
2009-03	.00	1,250,053.62	.00	399,412.93	.00	1,649,466.55
2009-04	.00	1,043,494.93	.00	461,760.17	.00	1,505,255.10
2009-05	.00	1,224,954.56	.00	614,234.21	.00	1,839,188.77
2009-06	.00	1,118,674.44	.00	340,591.71	.00	1,459,266.15
2009-07	.00	1,199,570.35	.00	222,467.02	.00	1,422,037.37
2009-08	.00	881,104.30	.00	240,479.02	.00	1,121,583.32
2009-09	.00	1,013,286.81	.00	832,164.93	.00	1,845,451.74
2009-10	.00	1,065,585.39	.00	230,362.84	.00	1,295,948.23
2009-11	.00	1,232,102.06	.00	374,853.58	.00	1,606,955.64
2009-12	.00	1,197,389.64	.00	540,383.06	.00	1,737,772.70
**TOTAL	.00	13,373,760.83	.00	4,654,313.22	.00	18,028,074.05

INC MONTH	GROUP LIABILITY CURR MO	GROUP LIABILITY TO DATE	CARRIER LIABILITY CURR MO	CARRIER LIABILITY TO DATE	TOTAL LIABILITY CURR MO	TOTAL LIABILITY TO DATE
2010-01	.00	1,280,134.16	.00	171,042.41	.00	1,451,176.57
2010-02	.00	973,580.71	.00	304,310.55	.00	1,277,891.26
2010-03	.00	1,269,957.87	.00	109,958.74	.00	1,379,916.61
2010-04	.00	1,236,833.65	.00	139,243.19	.00	1,376,076.84
2010-05	.00	1,128,582.77	.00	169,208.84	.00	1,297,791.61
2010-06	.00	1,221,891.98	.00	45,316.50	.00	1,267,208.48
2010-07	.00	1,338,177.71	.00	76,801.69	.00	1,414,979.40
2010-08	.00	1,232,488.99	.00	605,624.50	.00	1,838,113.49
2010-09	.00	1,320,254.70	.00	289,618.41	.00	1,609,873.11
2010-10	.00	1,137,882.77	.00	131,379.55	.00	1,269,262.32
2010-11	.00	1,344,157.03	.00	563,623.47	.00	1,907,780.50
2010-12	.00	1,377,816.66	.00	206,907.58	.00	1,584,724.24
**TOTAL	.00	14,861,759.00	.00	2,813,035.43	.00	17,674,794.43
2011-01	.00	1,037,884.75	.00	109,538.63	.00	1,147,423.38
2011-02	.00	998,515.29	.00	23,237.81	.00	1,021,753.10
2011-03	.00	1,215,711.21	.00	102,750.99	.00	1,318,462.20
2011-04	1,576.84	1,049,183.11	.00	116,631.60	1,576.84	1,165,814.71
2011-05	.00	1,089,923.13	765.68-	31,310.72	765.68-	1,121,233.85
2011-06	.00	1,069,969.20	.00	237,380.47	.00	1,307,349.67
2011-07	179.76	901,198.89	.00	217,458.88	179.76	1,118,657.77
2011-08	.00	1,162,374.18	.00	120,007.44	.00	1,282,381.62
2011-09	921.23	1,070,279.49	136.00	161,021.61	1,057.23	1,231,301.10
2011-10	.00	1,058,085.13	.00	113,494.79	.00	1,171,579.92
2011-11	1,591.34-	1,277,275.35	.00	123,665.00	1,591.34-	1,400,940.35
2011-12	10,125.71	1,228,006.56	99.10	307,612.95	10,224.81	1,535,619.51
**TOTAL	11,212.20	13,158,406.29	530.58-	1,664,110.89	10,681.62	14,822,517.18
2012-01	1,553.21	808,607.84	17.29	354.27	1,570.50	808,962.11
2012-02	5,617.25	996,402.96	.00	168.61	5,617.25	996,571.57
2012-03	1,358.27	1,178,186.58	266.69	4,899.89	1,624.96	1,183,086.47
2012-04	11,147.31	1,090,450.11	266.69	37,310.85	11,414.00	1,127,760.96
2012-05	7,479.45	1,170,767.49	.00	121,760.94	7,479.45	1,292,528.43
2012-06	7,017.59	1,002,335.24	1,352.63	124,911.12	8,370.22	1,127,246.36
2012-07	47,775.28	1,052,350.82	23,268.97	88,476.67	71,044.25	1,140,827.49
2012-08	533,244.02	1,034,331.30	21,834.17	45,876.12	555,078.19	1,080,207.42
2012-09	297,597.31	297,597.31	11,603.87	11,603.87	309,201.18	309,201.18
**TOTAL	912,789.69	8,631,029.65	58,610.31	435,362.34	971,400.00	9,066,391.99
** GRAND TOTAL	924,001.89	116,193,124.36	58,079.73	15,981,672.31	982,081.62	132,174,796.67

AF2010A POOL CODE 000 ALTERNATE FINANCE MONTHLY PAID TOTALS 09/26/12 PAGE 1034
OD-11390 GRP 9999 + GROUP NAME STOP LOSS CLAIMS PAID FROM 2012/01 THRU 2012/09 18:52:01

PAID MONTH	INSTITUTIONAL	PROFESSIONAL	DSC	VSI	RX DRUG	MAJ MED	TOTAL PAID AMT
2012-01	223,001.40	29,071.69	76.80	.00	1,710.11	.00	253,860.00
2012-02	5,045.88-	6,435.79	.00	.00	.00	.00	1,389.91
2012-03	1,738.62	22,505.75	.00	.00	74.00-	.00	24,170.37
2012-04	6,219.64	518.55	.00	.00	.00	.00	6,738.19
2012-05	16,611.06	52,960.15	.00	.00	132.97	.00	69,704.18
2012-06	87,245.78	55,914.58	.00	.00	2,894.88	.00	146,055.24
2012-07	68,733.85	45,207.81	302.00	.00	2,417.33	.00	116,660.99
2012-08	42,432.78	26,528.70	.00	.00	3,736.07	.00	72,697.55
2012-09	9,678.13	46,626.11	186.00	.00	1,589.49	.00	58,079.73
**** TOTAL	450,615.38	285,769.13	564.80	.00	12,406.85	.00	749,356.16

N O T E : STOP LOSS CLAIMS PAID ARE VALID FROM MARCH 1987 TO PRESENT.

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Group Name

Health Alternate Finance Funding and Claims Summary

Anniversary Date 01/2014

Claims Incurred 01/01/2014 - 07/31/2014 Billed Through 08/12/2014

Incurred Month	Contract Months Single	SPD	2-Party	Family	*Group Paid	Carrier Paid	SFL	Stop Loss Premium	BlueCard® Admin.	Admin. Fees
Jan-2014	285	61	0	236	$267,099.84	$0.00	$453,365.50	$33,365.40	$3,912.00	$17,094.39
Feb-2014	290	60	0	234	$233,598.20	$0.00	$452,482.18	$33,300.48	$3,491.00	$14,950.28
Mar-2014	286	61	0	235	$325,991.98	$0.00	$452,644.41	$33,312.36	$3,765.00	$20,863.49
Apr-2014	282	60	0	236	$383,913.70	$0.00	$451,220.28	$33,207.48	$4,262.00	$24,570.48
May-2014	275	59	0	237	$397,155.15	$0.00	$448,444.11	$33,003.06	$3,640.00	$25,417.93
Jun-2014	284	59	0	238	$282,486.76	$0.00	$453,672.00	$33,387.90	$3,321.00	$18,079.15
Jul-2014	277	57	0	236	$231,762.92	$0.00	$446,587.34	$32,866.44	$2,442.00	$14,832.83
Totals	**1,979**	**417**	**0**	**1,652**	**$2,122,008.55**	**$0.00**	**$3,158,415.82**	**$232,443.12**	**$24,833.00**	**$135,808.55**

**Incurred contract, does not include incurred but not reported.*
2014 Individual Stop Loss = $200,000

Group Name

Health Alternate Finance Group/Carrier Liability Threshold

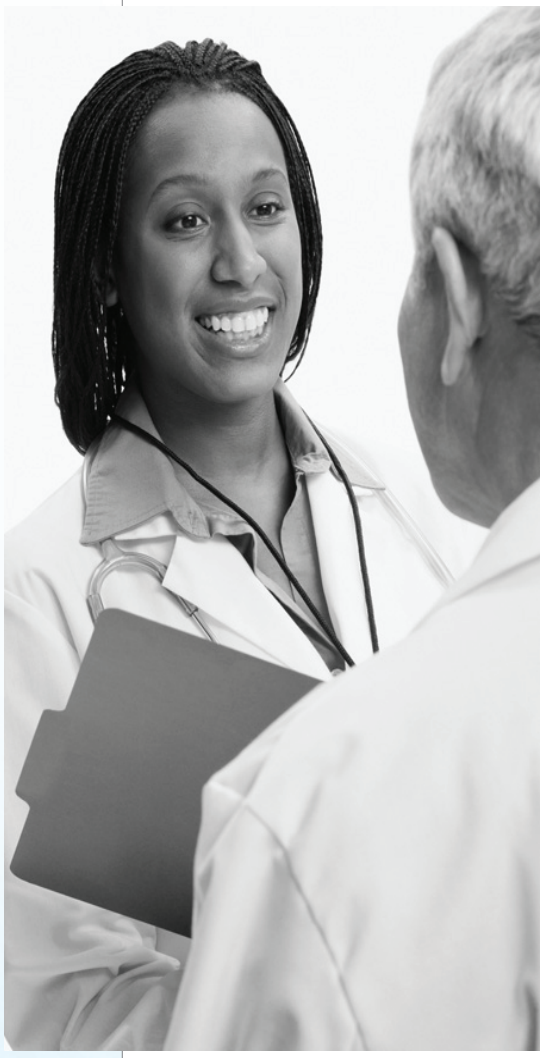
Anniversary Date 01/2014

Claims Incurred 01/01/2014 - 08/12/2014

Member	Group Liability	BCBSND Liability	*Total Liability
1	$104,317.82	$0.00	$104,317.82
2	$84,333.68	$0.00	$84,333.68
3	$68,058.21	$0.00	$68,058.21
4	$53,677.99	$0.00	$53,677.99
5	$50,769.72	$0.00	$50,769.72
6	$43,874.44	$0.00	$43,874.44
7	$43,727.84	$0.00	$43,727.84
8	$36,875.80	$0.00	$36,875.80
9	$35,169.74	$0.00	$35,169.74
10	$35,167.93	$0.00	$35,167.93
11	$31,789.16	$0.00	$31,789.16
12	$26,151.91	$0.00	$26,151.91
13	$25,293.76	$0.00	$25,293.76
Totals	**$639,208.00**	**$0.00**	**$639,208.00**

** Excludes Administration Fees*
Group Liability Threshold = $25,000
Individual Stop-Loss = $200,000

Sample RxInsights Report (Trend Report)



Medicare RxInsights®

SAMPLE CLIENT

Prescription Benefit Review

Jan 2011 - Dec 2011

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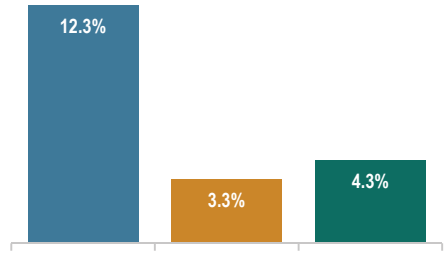
CVS CAREMARK

Executive Summary—Snapshot

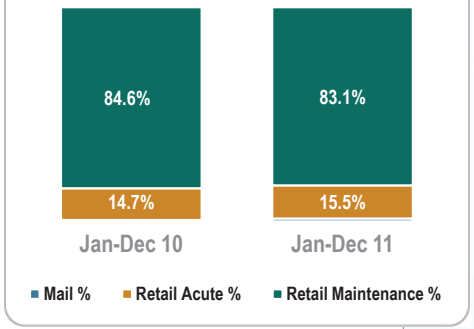
Membership	Jan-Dec 10	% Change	Jan-Dec 11	Medicare BOB	Peer Group*
Average Eligible Members Per Month	6,900	38.4%	9,551		
Avg. Monthly Utilizers as % of Members	68.7%	4.0%	71.5%	75.2%	74.4%
LIS Utilizing Members	4,316	38.6%	5,981		
Cost					
Total Gross Cost	$23,322,312	55.4%	$36,247,721		
Member Cost	$453,044	47.3%	$667,392		
Member Cost Share	1.9%	-5.2%	1.8%	10.8%	18.0%
Total Net Cost	$22,869,268	55.6%	$35,580,329		
Net Cost PMPY	$3,314	12.4%	$3,725	$3,129	$2,117
Federal Reinsurance	$3,908,610	57.7%	$6,162,894		
Low-Income Subsidy	$8,440,249	23.3%	$10,409,924		
Reported Gap Discount	$0		$116,098		
Plan Liability	$10,520,409	79.6%	$18,891,413		
Drug Mix					
% Single Source Brands	29.3%	-3.3%	28.3%	24.3%	21.3%
% Multi Source Brands	0.8%	-8.5%	0.7%	0.9%	1.0%
Generic Dispensing Rate	69.9%	1.5%	71.0%	74.8%	77.6%
Generic Substitution Rate	98.9%	0.1%	99.0%	98.8%	98.7%
Utilization					
Total Prescriptions	259,096	57.6%	408,418		
Rx PMPM	3.13	13.9%	3.56		
% Retail Prescriptions	99.6%	-0.3%	99.3%	96.5%	96.0%
% Mail Prescriptions	0.4%	73.2%	0.7%	3.5%	4.0%
Days' Supply PMPY	1,238	20.1%	1,487	1,485	1,397
Specialty					
Specialty Total Gross Cost	$3,735,092	54.1%	$5,756,648		
Specialty Utilizers as % of Members	4.3%	-3.0%	4.2%		
Specialty % of Total Gross Cost	16.0%	-0.8%	15.9%	14.2%	11.2%
Specialty % of Total Prescriptions	1.2%	-8.5%	1.1%	0.8%	0.5%

* Peer Group: MAPD

Your Gross Trend



Your Non-Specialty Days' Supply



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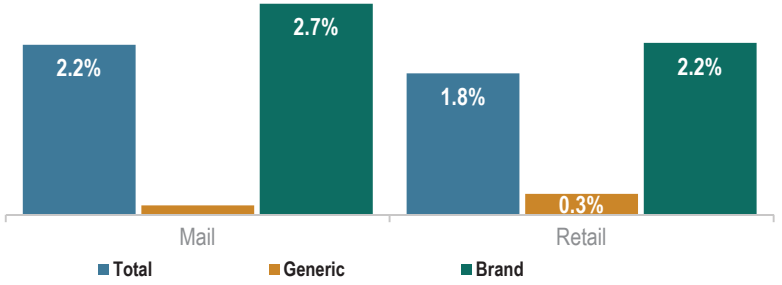
Your Executive Summary

Member Cost Share

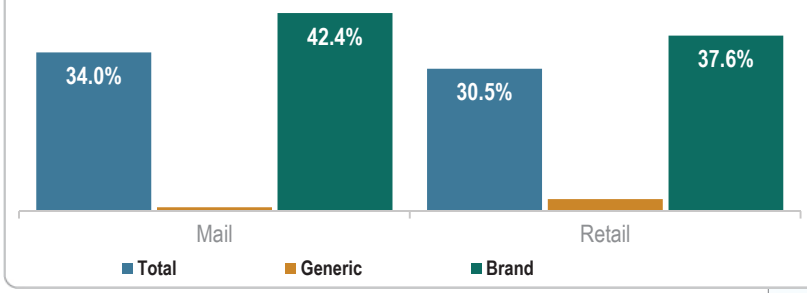
Your Member Cost Share for Retail decreased 0.1% from Jan 2011-Dec 2011. Your Member Cost Share for Mail decreased 1.1% for the same period.

Your mail member cost share before LIS was 2.2% and your retail member cost share before LIS was 1.8%. Your mail member cost share after LIS was 34.0% and your retail member cost share after LIS was 30.5%.

Member Cost Share Before LIS



Member Cost Share After LIS



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Your Prescription Benefit Financial Summary

	Jan-Dec 10	% Change	Jan-Dec 11
Your Total Prescription Cost (AWP)	**$36,231,133**	**60.6%**	**$58,184,875**
Discount	$12,908,821	69.9%	$21,937,153
Total Savings	**$12,908,821**	**69.9%**	**$21,937,153**

Cost Components

	Jan-Dec 10	% Change	Jan-Dec 11
Total Gross Cost	**$23,322,312**	**55.4%**	**$36,247,721**
Member Cost	$453,044	47.3%	$667,392
Member Cost Share	1.9%	-5.2%	1.8%
Net Cost	$22,869,268	55.6%	$35,580,329
Federal Reinsurance	$3,908,610	57.7%	$6,162,894
Low-Income Subsidy	$8,440,249	23.3%	$10,409,924
Reported Gap Discount	$0		$116,098
Plan Liability	**$10,520,409**	**79.6%**	**$18,891,413**

Financial Impact Beyond Drug Costs

	Jan-Dec 10	% Change	Jan-Dec 11
Less:			
Client Share of Invoiced Rebates	$0		$0
Add:			
Administration Fees	$0		$0
Total Plan Cost	**$10,520,409**	**79.6%**	**$18,891,413**

Additional program fees not included.

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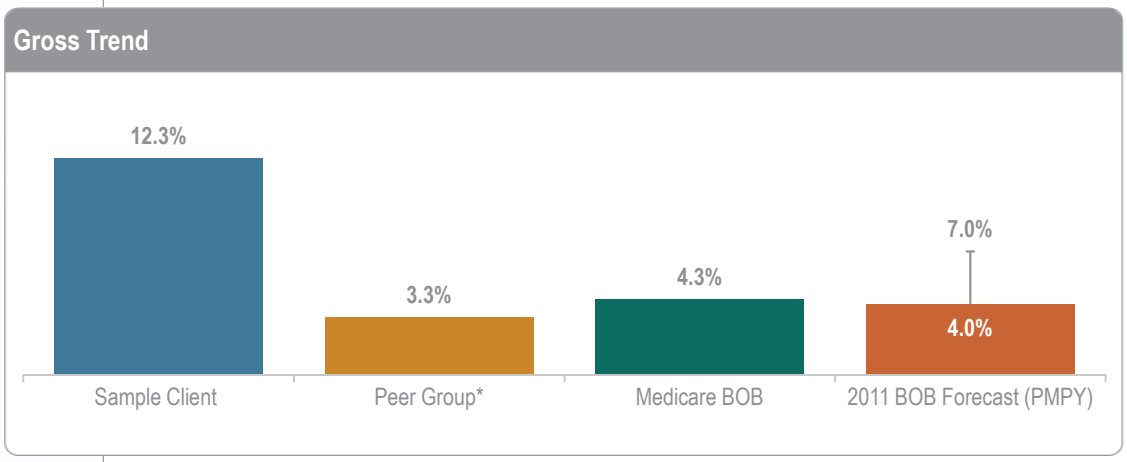
CVS CAREMARK Rx

Your Trend

Gross Trend



Trend	Jan-Dec 10	Jan-Dec 11	Medicare BOB
Total Gross Trend		12.3%	4.3%
Gross Age-Adjusted Trend (PMPM)**		11.6%	
Non-Specialty Gross Trend (PMPM)		12.5%	2.9%
Specialty Gross Trend (PMPM)		11.3%	18.1%
Total Gross Trend Components			
Price Inflation		0.3%	3.5%
Utilization (PMPM)		20.1%	3.4%
Drug Mix		-6.8%	-2.5%

* Peer Group: MAPD

** Estimated trend if the age distribution remains the same from time period one to time period two.

Peer Group and Book of Business trends are based on the last full year of data from January to December 2011.

The best-in-class trend metric is the CY2009 BOB Gross Cost PMPM trend adjusted to GPI-2 class GDR performance of clients within +/- 0.5% of the 2007 BOB GDR and whose 2008 GDR improvement exceeded the BOB; and, adjusted for managing appropriate utilization in seven lifestyle or potential misuse classes.

The estimated client-specific trend forecast is not an actuarial work product thus, clients should seek appropriate independent professional advice in connection with its use.

Due to the variability of factors including market conditions, which are not under the control of CVS Caremark, this forecast is subject to change at any time and cannot be guaranteed.

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Impacting Pharmacy Trend

Clinical Solutions

- Safety initiatives, utilization management savings, and health management strategies

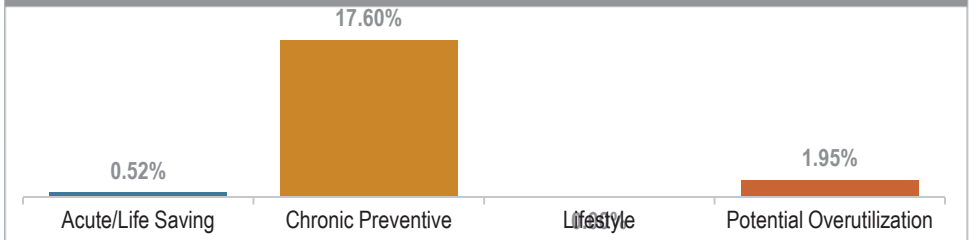
Member Experience

- Reinforce desired behaviors through multi-channel consumer outreach

Your Gross Trend Component Drivers

Gross Trend	=	Price Inflation	Utilization	Drug Mix
12.3%		0.3%	20.1%	-6.8%

Categories Driving Your Utilization Trend



Potential Overutilization: Top Drugs**

- Oxycontin
- hydrocodone + acetaminophen
- oxycodone + acetaminophen
- Lunesta
- zolpidem

Chronic Preventive: Top Drugs**

- Lipitor
- Plavix
- Aricept
- Advair Diskus

Price Inflation	Jan-Dec 10	% Change	Jan-Dec 11	Medicare BOB	Peer Group*
Overall AWP Inflation	4.6%		1.2%	2.7%	
Brand AWP Inflation	9.0%		6.1%	9.0%	
Generic AWP Inflation	-1.9%		-5.8%	-2.6%	
Specialty AWP Inflation	4.2%		2.5%	8.5%	
Utilization					
Average Member Age	64.2	-0.4%	64.0	68.3	71.4
Average Monthly Member Utilization as % of Eligible Members	68.7%	4.0%	71.5%	75.2%	74.4%
Average 30-Day Prescriptions Per Eligible Member Per Year (PMPY)	41.3	20.1%	49.6	49.5	46.6
Drug Mix					
Generic Dispensing Rate	69.9%	1.5%	71.0%	74.8%	77.6%
Single Source Brand Dispensing Rate	29.3%	-3.3%	28.3%	24.3%	21.3%
Multi Source Brand Dispensing Rate	0.8%	-8.5%	0.7%	0.9%	1.0%
Specialty Percentage of Total Gross Cost	16.0%	-0.8%	15.9%	14.2%	11.2%

* Peer Group: MAPD

** Based on a static list of common top drugs.

This page contains references to brand-name prescription drugs that are trademarks or registered trademarks of pharmaceutical manufacturers that are not affiliated with CVS Caremark.

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Your Cost and Utilization Metrics

Member Metrics	Jan-Dec 10	% Change	Jan-Dec 11	Jan-Dec 11 Medicare BOB	Jan-Dec 11 Peer Group*	Age-Adjusted Benchmark**
Eligible Members	6,900	38.4%	9,551			
Total Gross Cost Per Eligible Member Per Year (PMPY)	$3,380	12.3%	$3,795	$3,508	$2,580	$3,645
Total Net Cost Per Eligible Member Per Year (PMPY)	$3,314	12.4%	$3,725	$3,129	$2,117	$3,297
Total Days' Supply Per Eligible Member Per Year (PMPY)	1,238	20.1%	1,487	1,485	1,397	1,442
Average 30-Day Prescriptions Per Eligible Member Per Year (PMPY)	41.3	20.1%	49.6	49.5	46.6	48.1
Average Member Age	64	-0.4%	64	68	71	
Utilization Metrics						
Distinct Utilizing Members	7,828	50.4%	11,771			
Average Utilizing Members	4,743	44.0%	6,829			
Average LIS Utilizing Members	4,316	38.6%	5,981			
Average Non-LIS Utilizing Members	427	98.6%	848			
Average Monthly Member Utilization as % of Members	68.7%	4.0%	71.5%	76.6%	74.4%	
Total Gross Cost Per Utilizing Member Per Month (PUMPM)	$410	7.9%	$442	$371	$289	
Total Gross Cost Per Average LIS Utilizing Member Per Month	$332	12.4%	$373			
Total Gross Cost Per Average Non-LIS Utilizing Member Per Month	$1,195	-22.2%	$930			
Total Net Cost Per Utilizing Member Per Month (PUMPM)	$402	8.1%	$434	$326	$237	
Total Days' Supply Per Utilizing Member Per Month (PUMPM)	150	15.5%	173	162	157	

* Peer Group: MAPD

** The age-adjusted metric provides Book of Business projected spend and utilization, if the BOB had the same age demographics as the client. The age-adjusted metric helps to define how age can be a contributing factor that drives a client's overall spend.

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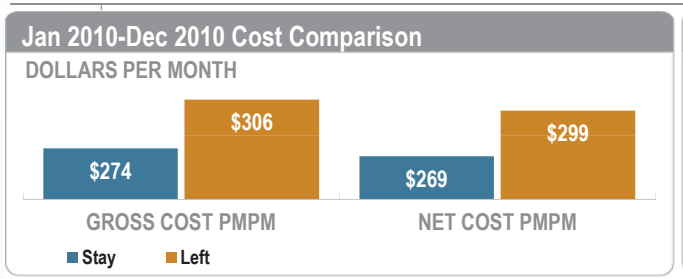
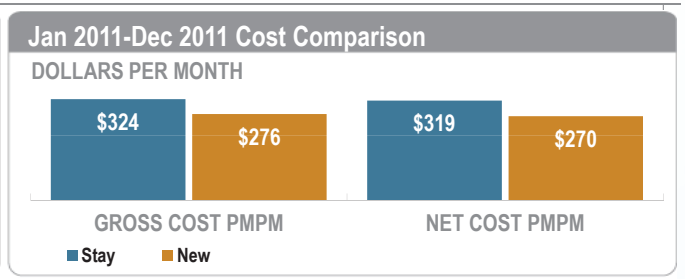
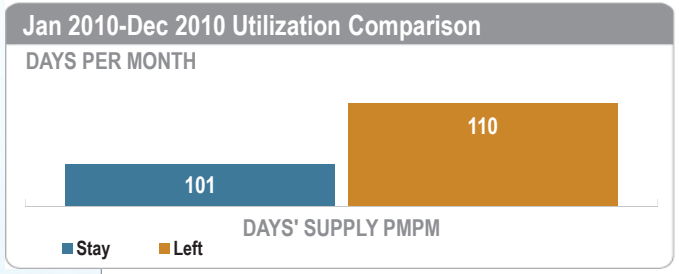
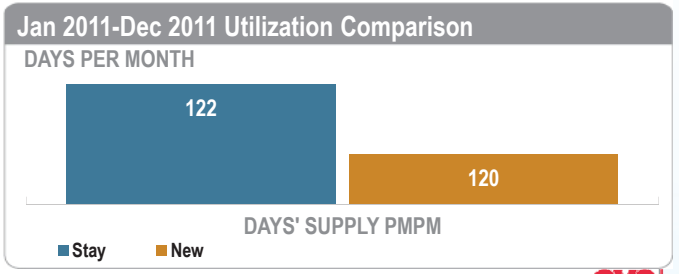
Membership Change Affecting Cost

Member Metrics	Members that Left the Plan	Members Remaining Eligible in the Plan			Members New to the Plan
		Jan-Dec 10	% Change	Jan-Dec 11	
Distinct Eligible Members	1,612	7,224	0.0%	7,224	5,804
Average Eligible Members	675	6,303	6.8%	6,734	2,971
Average Member Age	66	64	1.6%	65	63
Percent Utilizing Members	70.4%	67.3%	2.7%	69.1%	71.9%
Percent LIS Utilizing Members	64.9%	61.4%	3.0%	63.2%	57.6%
Total Gross Cost Per Member Per Month (PMPM)	$306.18	$274.03	18.2%	$323.85	$276.50
Total Net Cost Per Member Per Month (PMPM)	$298.95	$268.81	18.6%	$318.74	$269.59
Total Days' Supply Per Member Per Month (PMPM)	110	101	20.4%	122	120
Rx PMPM	3.46	3.05	15.6%	3.53	3.39
Total Gross Cost Per Utilizer Per Month (PUPM)	$435.09	$407.36	15.1%	$468.79	$384.77
Total Net Cost Per Utilizer Per Month (PUPM)	$424.83	$399.61	15.5%	$461.39	$375.15
Total Day's Supply Per Utilizer Per Month (PUPM)	156	150	17.2%	176	167
Rx PUPM	4.91	4.53	12.6%	5.10	4.72









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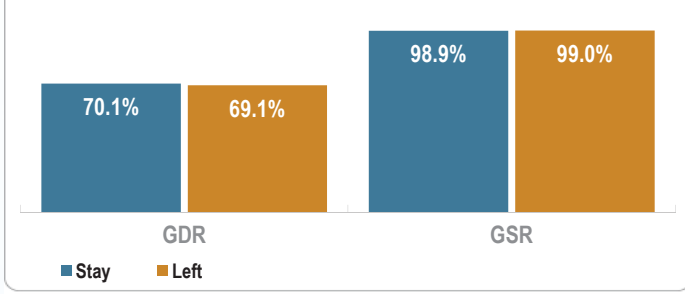
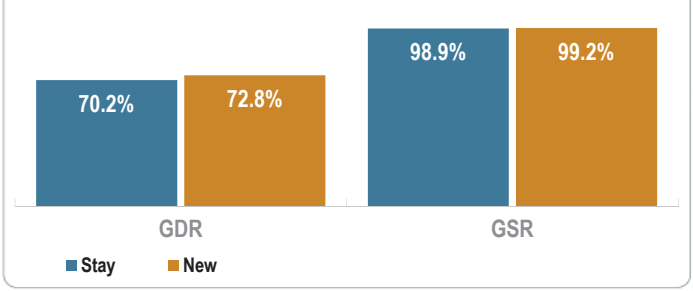
Membership Change Affecting Utilization

Eligibility	Members that Left the Plan	Members Remaining Eligible in the Plan Jan-Dec 10	% Change	Jan-Dec 11	Members New to the Plan
Generic Dispensing Rate	69.1%	70.1%	0.2%	70.2%	72.8%
Generic Substitution Rate	99.0%	98.9%	0.0%	98.9%	99.2%
Mail Percent of Rxs	0.3%	0.4%	46.8%	0.6%	0.9%

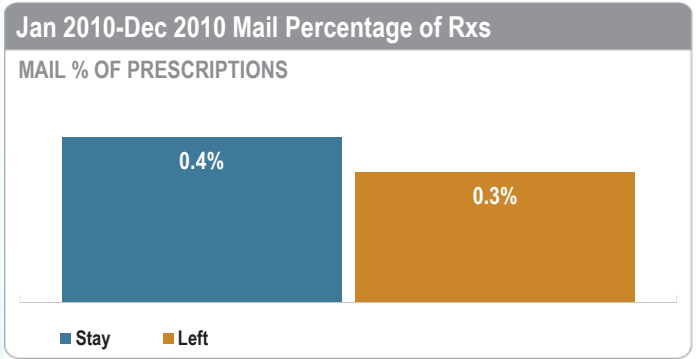
Jan 2010-Dec 2010 Generic Utilization Comparison



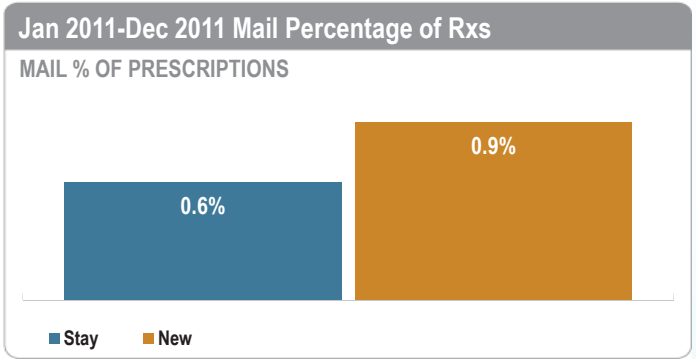
Jan 2011-Dec 2011 Generic Utilization Comparison



Jan 2010-Dec 2010 Mail Percentage of Rxs



Jan 2011-Dec 2011 Mail Percentage of Rxs



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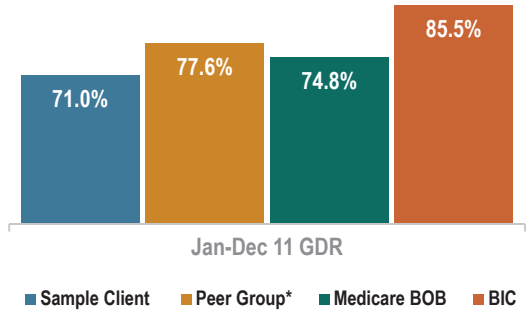
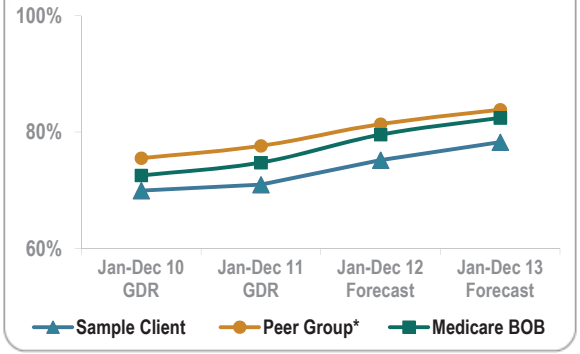
GDR Performance and Forecast

Current GDR Performance



Past and Two-Year Forecast
(Based on Current Plan and Expected Generic Launches)



Your Opportunity

Therapeutic Class**	Jan-Dec 10	Jan-Dec 11 GDR	Peer Group* GDR	Medicare BOB	Jan-Dec 12 Annualized Forecasted GDR	Jan-Dec 13 Annualized Forecasted GDR	Medicare CY 2010 BIC GDR
Antiasthmatic And Bronchodilator Agents	16.4%	16.0%	13.9%	12.8%	21.5%	32.5%	17.3%
Anticonvulsants	79.4%	80.9%	85.7%	83.0%	82.0%	82.0%	92.3%
Antidepressants	76.2%	78.3%	84.3%	79.1%	86.0%	89.0%	90.4%
Antidiabetics	59.9%	59.4%	61.9%	51.9%	60.7%	66.1%	70.9%
Antihyperlipidemics	54.5%	56.1%	68.0%	59.3%	72.3%	74.9%	82.1%
Antihypertensives	72.3%	78.7%	81.4%	77.2%	82.2%	91.9%	87.0%
Antipsychotics/Antimanic Agents	36.3%	39.0%	44.9%	41.8%	65.3%	76.5%	52.9%
Antivirals	21.0%	22.1%	47.3%	26.5%	25.5%	25.8%	88.5%
Psychotherapeutic And Neurological Agents - Mi	7.0%	44.8%	49.3%	41.6%	48.1%	48.1%	15.6%
Ulcer Drugs	58.8%	62.3%	83.5%	79.7%	62.4%	62.4%	96.6%

* Peer Group: MAPD

** Therapeutic classes displayed are based on a static list of classes that represent the top ten classes for the Medicare Book of Business.

*** CVS Caremark Enterprise Analytics. Analysis of Generic Dispensing Rate and Pharmacy Spend (R321), February 2010.
The best-in-class metric is CY2010 BOB utilization adjusted to the GPI-2 class performance of the top 10 percent of ranked clients for this metric. BIC clients must have more than 50,000 annual claims. Mail only and retail only clients were excluded.

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Your Opportunity

For each 1% increase in GDR, your gross pharmacy spend is estimated to decrease an average of 2.5%*.**

To Help You Save, CVS Caremark Analytics Services Can:

- Target generics with the greatest potential to impact your drug spend and trend
- Help you determine the most effective approach to maximize that potential
- Help you address emerging developments such as the migration of brand drugs to over-the-counter status

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Generic Outlook

Top Generic Launches Expected to Influence Your GDR

Projected Savings from Jan 2012 - Dec 2012 Generic Launches

Rank	Drug Name	Jan-Dec 12	Jan-Dec 13	Jan-Dec 14	Total
1	PLAVIX	$277,323	$892,612	$1,040,888	$2,210,823
2	SEROQUEL	$317,782	$729,946	$833,281	$1,881,009
3	ACTOS	$66,091	$404,007	$514,121	$984,219
4	SINGULAIR	$36,636	$222,787	$283,357	$542,780
5	GEODON	$36,467	$220,474	$280,245	$537,186
	All Other	$218,312	$1,010,890	$1,284,482	$2,513,684
	Total	$952,610	$3,480,716	$4,236,374	$8,669,700

Projected Savings from Jan 2013 - Dec 2013 Generic Launches

Rank	Drug Name	Jan-Dec 13	Jan-Dec 14	Total
1	CYMBALTA	$18,069	$218,193	$236,262
2	ACTOPLUS MET	$36,815	$57,829	$94,644
3	OXYCONTIN	$6,430	$77,651	$84,081
4	NIASPAN	$11,698	$56,561	$68,258
5	TEMODAR	$1,773	$8,688	$10,460
	All Other	$4,646	$16,968	$21,614
	Total	$79,431	$435,890	$515,321

Projected Savings from Jan 2014 - Dec 2014 Generic Launches

Rank	Drug Name	Jan-Dec 14	Total
1	NEXIUM	$321,282	$321,282
2	CELEBREX	$35,241	$35,241
3	ACTONEL WITH CALCIUM	$31,091	$31,091
4	COPAXONE	$30,502	$30,502
5	XELODA	$28,245	$28,245
	All Other	$117,199	$117,199
	Total	$563,559	$563,559

Implement plan designs that use generics first

Employ incentives and outreach such as:

- Generic copay waivers
- Personalized multi-channel savings messages
- Provide physician education on generics
- Consider promoting use of OTCs in select classes

*Impact of future generic launches has been calculated by drug strength and rolled up by drug name. GDR impact and savings are reported under brand name and launch date of the first available generic within each drug name.

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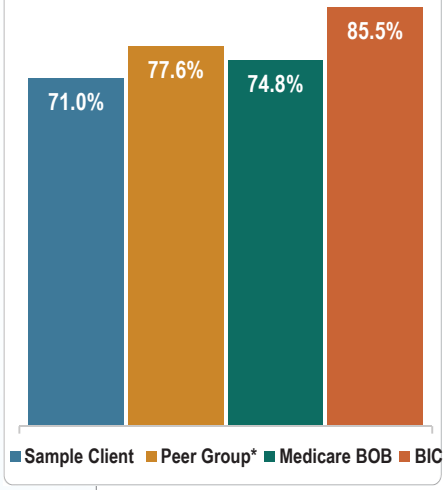
Generic and Brand Performance

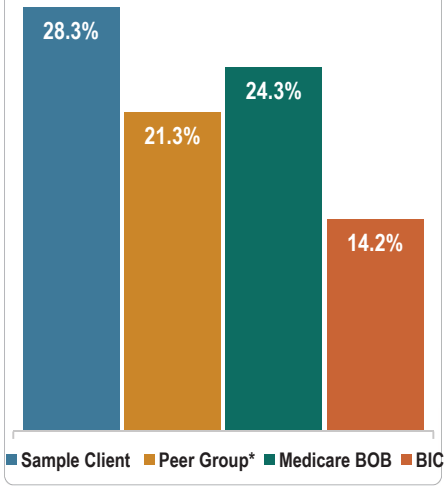
Generic Dispensing Rate

PERCENT OF CLAIMS



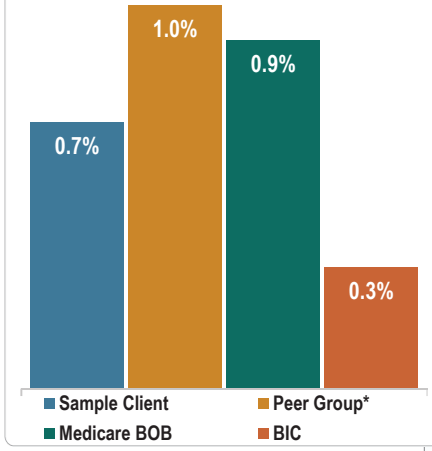
Single Source Brand Dispensing Rate

PERCENT OF CLAIMS



Multi Source Brand Dispensing Rate

PERCENT OF CLAIMS



After premiums, formularies have the strongest influence on a member's initial selection of a plan. It is therefore important to seize opportunities that will influence the behavior of your members in ways that enable you to find an optimal balance of growth, rebates and cost containment.

Ways to get members involved:

- Targeted letters to educate members on generic alternatives
- Online drug savings tool to provide members with real-time cost savings options on generics, OTCs and preferred brands
- Letters to notify members about new generics
- Communication to members on how easy it is to get started with CVS Caremark mail service

* Peer Group: MAPD

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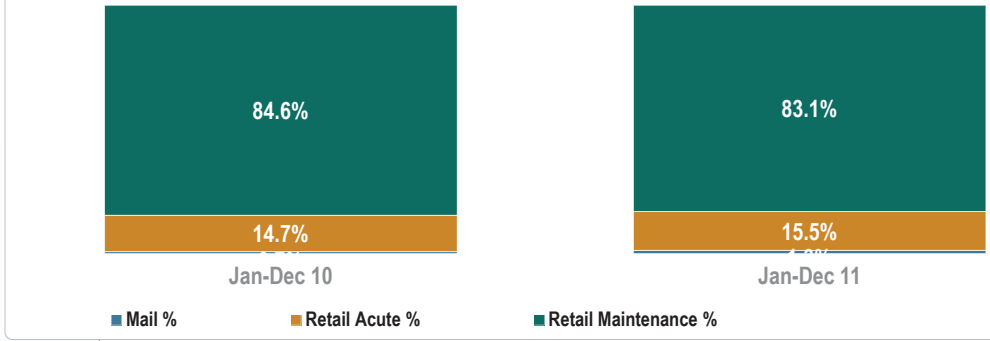
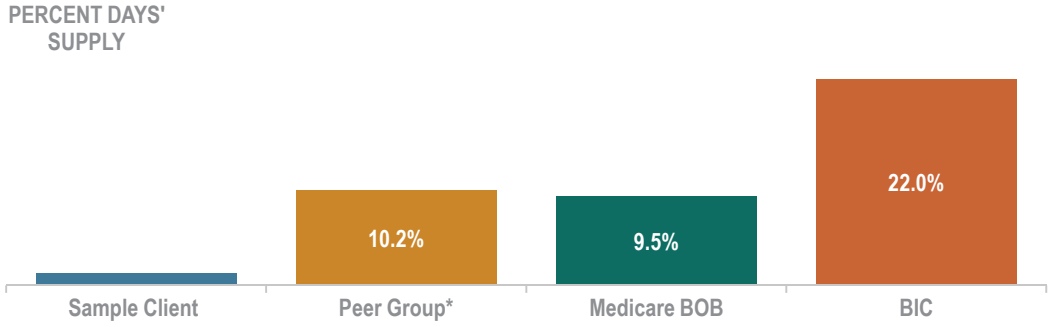
CVS CAREMARK

Your Pharmacy Utilization: An Overview

Your Non-Specialty Days' Supply



Your Days' Supply at Mail Service Pharmacy**



* Peer Group: MAPD

** Excluding Specialty Claims

The Best-in-Class metric is CY2009 BOB utilization adjusted to the GPI-2 class performance of the top 10 percent of ranked clients for this metric. BIC clients must have more than 50,000 annual claims. Mail only and retail only clients were excluded.

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Increase Use of Mail Service Pharmacy

Makes prescriptions more affordable for you and your members

CVS Caremark Mail Service Pharmacy

- Adherence on 90-day therapy is 12% higher than those on 30-day therapy
- Easy for members to get started:
  - Enroll at CVS/pharmacy
  - Call or order online
  - FastStart® program
- Flexible payment options
- Refill reminders and renewals

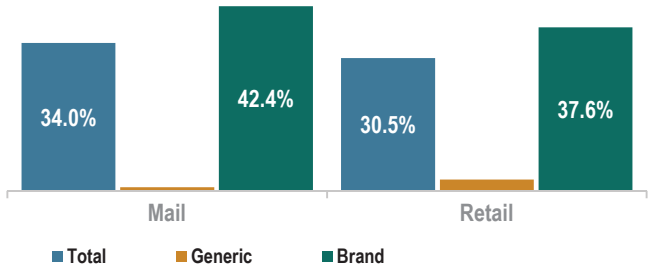
CVS CAREMARK

Your Utilization by Delivery Channel

Delivery Channel Comparison by Gross Cost

Drug Name**	Retail Gross Cost per 90-Day Rx	Preferred Delivery Channel Gross Cost per 90-Day Rx
Nexium	$561	$503
Plavix	$544	$503
Seroquel	$1,475	$1,491
Lipitor	$412	$392
Abilify	$1,951	$1,556

Member Cost Share After LIS



	Jan-Dec 10	% Change	Jan-Dec 11	Medicare BOB Jan-Dec 11	Peer Group* Jan-Dec 11
Total Prescriptions	259,096	57.6%	408,418		
% Retail Prescriptions	99.6%	-0.3%	99.3%	96.5%	96.0%
% Mail Prescriptions	0.4%	73.2%	0.7%	3.5%	4.0%
Mail Utilization					
% Days' Supply	0.7%	82.3%	1.3%	8.7%	9.5%
% Total Gross Cost	0.6%	67.1%	1.0%	6.8%	8.0%

* Peer Group: MAPD

** Drug name based on most commonly dispensed form. Based on client specific top 5 drugs by gross cost excluding specialty.

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Your Top 10 Therapeutic Class Review

Trend Analysis by Gross Cost

Percentage Change Period-Over-Period

Prior Rank	Current Rank	Therapeutic Class	GDR	Total Gross Cost	Utilizing Members	Gross Cost per Rx	Gross Cost PMPM	Cost Components: Cost — Gross PMPM	Cost Components: Utilization — Days' Supply PMPM	Cost Components: Drug Mix/Inflation — Gross Cost per Day	Utilization Components: Density of Use — Utilizing Members	Utilization Components: Density of Use — Days' Supply/ Utilizing Member
1	1	Antipsychotics	39.0%	$4,677,588	1,470	$427.72	$40.81	4.4%	1.3%	3.0%	3.4%	-2.0%
3	2	Antidiabetics	59.4%	$3,723,628	3,632	$118.41	$32.49	33.1%	27.9%	4.1%	11.3%	14.9%
2	3	Antivirals	22.1%	$3,209,568	535	$832.36	$28.00	12.0%	-0.5%	12.5%	9.2%	-8.8%
4	4	Antihyperlipidemics	56.1%	$2,974,428	5,782	$93.62	$25.95	19.3%	27.6%	-6.5%	14.2%	11.7%
5	5	Ulcer Drugs	62.3%	$2,133,986	4,450	$110.92	$18.62	-7.3%	2.9%	-10.0%	12.2%	-8.3%
8	6	Antiasthmatic And Bronchodilator Agents	16.0%	$2,069,807	2,354	$149.75	$18.06	37.5%	29.6%	6.1%	18.6%	9.2%
7	7	Antihypertensives	78.7%	$1,953,415	6,310	$51.78	$17.04	13.5%	19.9%	-5.3%	11.6%	7.5%
6	8	Hematological Agents - Misc.	8.7%	$1,842,981	1,204	$299.96	$16.08	3.3%	16.0%	-11.0%	9.5%	5.9%
9	9	Psychotherapeutic And Neurological Agents - Misc.	44.8%	$1,160,463	616	$359.28	$10.13	-2.5%	2.7%	-5.1%	-3.0%	5.9%
10	10	Anticonvulsants	80.9%	$1,153,309	2,428	$81.29	$10.06	1.4%	20.7%	-16.0%	13.7%	6.2%
Top 10 Therapeutic Classes as a Percent of Gross Cost												68.7%

Summary of Specific Findings:

- Comment one
- Comment two

Recommendations:

- Comment one
- Comment two

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Forecasting Trends

Therapeutic Categories to Watch

Therapeutic Categories	Your Total Gross Cost PPM	Your Expected Gross Cost PPM	Percent of Total Gross Cost	Recent and Anticipated Brand Launches	Recent and Anticipated Generic Opportunities	Comments
Analgesics—Opioid	$5.34	$5.61	1.7%	OxyContin, Butrans, Nucynta, Oxymorphone ER, Remoxy	Oxymorphone, Oxymorphone ER	Dosage forms that are harder to abuse are in development. The FDA is trying to control opioid abuse by requiring risk management programs and limited distribution networks. The FDA has requested withdrawal of propoxyphene-containing products from the market.
Anticonvulsants	$10.06	$10.72	3.2%	Banzel suspension, Clobazam, Potiga		Expanded indication for **H.P. Acthar Gel**.
Antidepressants	$9.07	$9.53	2.9%	Oleptro, Bupropion high dose ER, Vilazodone	Venlafaxine ER	Expanded indication for Cymbalta.
Antidiabetics	$32.49	$34.75	10.3%	ACTOplus Met XR, Cycloset, Kombiglyze XR, Dapagliflozin, Linagliptin		FDA guidelines requiring long-term cardiovascular safety data for type 2 antidiabetic therapies may impact the approval of new agents. The FDA will significantly restrict the use of Avandia and rosiglitazone-containing products.
Antihyperlipidemics	$25.92	$28.15	8.2%	Livalo	Atorvastatin	Expanded indication for Crestor.
Antipsychotics	$40.81	$42.51	12.9%	Latuda, Adusuve Staccato		Expanded indications for Saphris
Antivirals	$28.00	$28.17	8.9%	**Boceprevir, Telaprevir**		The addition of **Boceprevir** or **Telaprevir** to **Pegylated Interferon** and **Ribavirin** may improve efficacy and may shorten the duration of hepatitis C therapy.
Gastrointestinal Agents	$18.62	$19.17	5.9%	Vimovo, Zuplenz, Solpura	Omeprazole/ sodium bicarbonate, Lansoprazole ODT	
Hematological Agents	$16.08	$16.87	5.1%	Pradaxa, Brilinta, Eliquis, **Neutroval**, Xarelto	Enoxaparin	**Neutroval** is a biosimilar to **Neupogen**. Pradaxa, Eliquis and Xarelto are oral anticoagulants that do not require blood level monitoring.
Psychotherapeutic and Neurological Agents	$10.13	$11.00	3.2%	**Gilenya**, Namenda XR, Kapvay, **Movectro**, Aricept transdermal	Donepezil, Rivastigmine, Zolpidem ER, Methylphenidate, Olanzapine	Expanded indications for Daytrana and Vyvanse. **Gilenya** and **Movectro** are oral disease-modifying MS drugs that could replace current injectable therapies such as **Copaxone**, **Avonex**, etc.

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Teal indicates specialty drugs.

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Your Top 25 Drugs
By Gross Cost

Book of Business Rank*	Prior Rank	Current Rank	Drug Name	Dispense Type	Therapeutic Class	Generic Launch Date**	Gross Cost	Total Rxs	Total Utilizers	Gross Cost Per Rx	Gross Cost Per Day
8	1	1	Nexium	Brand	Ulcer Drugs	Q2-2014	$1,420,112	6,333	2,059	$224.24	$6.23
1	2	2	Plavix	Brand	Hematological Agents - Misc.		$1,419,574	5,283	1,077	$268.71	$6.04
3	3	3	Seroquel	Brand	Antipsychotics/Antimanic Agents		$1,213,163	2,299	395	$527.69	$16.39
2	6	4	Lipitor	Brand	Antihyperlipidemics		$909,994	4,505	1,026	$202.00	$4.57
5	5	5	Abilify	Brand	Antipsychotics/Antimanic Agents	Q2-2015	$875,884	1,248	267	$701.83	$21.58
4	4	6	Zyprexa	Brand	Antipsychotics/Antimanic Agents		$838,877	861	152	$974.31	$30.84
7	7	7	Actos	Brand	Antidiabetics		$770,735	2,374	493	$324.66	$7.40
9	9	8	Crestor	Brand	Antihyperlipidemics	NA	$743,624	3,947	937	$188.40	$4.39
6	10	9	Advair Diskus	Brand	Antiasthmatic And Bronchodilator Agents	NA	$573,434	2,190	643	$261.84	$7.47
22	12	10	Truvada	Specialty	Antivirals	NA	$523,934	456	76	$1,148.98	$36.07
15	19	11	Januvia	Brand	Antidiabetics	NA	$485,596	1,656	367	$293.23	$6.79
18	24	12	Singulair	Brand	Antiasthmatic And Bronchodilator Agents		$412,535	2,245	592	$183.76	$4.65
21	11	13	Geodon	Brand	Antipsychotics/Antimanic Agents		$410,632	742	140	$553.41	$17.34
12	28	14	Cymbalta	Brand	Antidepressants	Q4-2013	$390,393	1,751	418	$222.95	$6.49
24	17	15	Diovan Hct	Brand	Antihypertensives		$384,254	2,503	473	$153.52	$3.73
28	16	16	Atripla	Specialty	Antivirals	NA	$368,421	214	30	$1,721.59	$54.79
23	21	17	Lyrica	Brand	Anticonvulsants	NA	$364,240	1,932	525	$188.53	$5.51
16	25	18	Lantus	Brand	Antidiabetics	NA	$350,804	1,584	361	$221.47	$5.62
20	15	19	Copaxone	Specialty	Psychotherapeutic And Neurological Agents	Q4-2014	$336,092	94	10	$3,575.44	$119.52
13	20	20	Diovan	Brand	Antihypertensives		$332,044	2,353	505	$141.12	$3.25
11	291	21	Donepezil Hcl	Generic	Psychotherapeutic And Neurological Agents		$309,291	1,336	306	$231.51	$5.92
10	33	22	Spiriva	Brand	Antiasthmatic And Bronchodilator Agents	NA	$296,198	1,142	299	$259.37	$7.36
43	27	23	Tricor	Brand	Antihyperlipidemics		$279,557	1,584	352	$176.49	$4.02
33	46	24	Lantus Solostar	Brand	Antidiabetics	NA	$279,089	1,012	273	$275.78	$6.24
34	23	25	Seroquel Xr	Brand	Antipsychotics/Antimanic Agents	NA	$273,472	553	133	$494.52	$15.35

*Medicare BOB information is based on the most recent year ending Dec 31, 2011.

** Generic launch date is based on numerous market factors and is an estimation. "NA" means that no estimate launch date is available at the time of this report.

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CVS CAREMARK

Your Top 25 Drugs
By Days' Supply

Book of Business Rank*	Prior Rank	Current Rank	Drug Name	Dispense Type	Therapeutic Class	Total Gross Cost	% of Total Days' Supply	Total Rxs	Total Utilizers	Gross Cost per Rx	Gross Cost per Day
1	1	1	Simvastatin	Generic	Antihyperlipidemics	$173,085	4.0%	12,067	2,766	$14.34	$0.30
3	2	2	Amlodipine Besylate	Generic	Calcium Channel Blockers	$120,705	3.2%	9,860	2,216	$12.24	$0.27
2	3	3	Lisinopril	Generic	Antihypertensives	$68,459	2.9%	9,436	2,186	$7.26	$0.16
7	4	4	Metformin Hcl	Generic	Antidiabetics	$103,937	2.8%	8,652	1,876	$12.01	$0.26
4	5	5	Levothyroxine Sodium	Generic	Thyroid Agents	$52,911	2.3%	7,083	1,375	$7.47	$0.17
12	7	6	Hydrocodone-Acetaminopt	Generic	Analgesics - Opioid	$214,278	2.2%	16,722	3,791	$12.81	$0.69
5	9	7	Furosemide	Generic	Diuretics	$20,557	1.7%	6,101	1,442	$3.37	$0.08
13	8	8	Plavix	Brand	Hematological Agents - Misc.	$1,419,574	1.7%	5,283	1,077	$268.71	$6.04
33	6	9	Nexium	Brand	Ulcer Drugs	$1,420,112	1.6%	6,333	2,059	$224.24	$6.23
9	13	10	Hydrochlorothiazide	Generic	Diuretics	$18,136	1.6%	4,794	1,252	$3.78	$0.08
10	11	11	Metoprolol Tartrate	Generic	Beta Blockers	$24,203	1.5%	4,935	1,119	$4.90	$0.11
14	15	12	Metoprolol Succinate	Generic	Beta Blockers	$225,099	1.5%	4,455	1,025	$50.53	$1.06
18	10	13	Alendronate Sodium	Generic	Endocrine And Metabolic Agents - Mis	$82,421	1.4%	4,192	1,009	$19.66	$0.41
8	12	14	Lipitor	Brand	Antihyperlipidemics	$909,994	1.4%	4,505	1,026	$202.00	$4.57
43	14	15	Enalapril Maleate	Generic	Antihypertensives	$25,586	1.3%	3,861	815	$6.63	$0.14
6	17	16	Omeprazole	Generic	Ulcer Drugs	$187,784	1.3%	4,856	1,776	$38.67	$1.05
24	16	17	Crestor	Brand	Antihyperlipidemics	$743,624	1.2%	3,947	937	$188.40	$4.39
15	20	18	Gabapentin	Generic	Anticonvulsants	$148,834	1.2%	4,711	1,195	$31.59	$0.88
37	18	19	Lisinopril-Hydrochlorothiaz	Generic	Antihypertensives	$33,358	1.1%	3,468	820	$9.62	$0.21
11	19	20	Atenolol	Generic	Beta Blockers	$11,842	0.9%	2,687	603	$4.41	$0.09
22	24	21	Zolpidem Tartrate	Generic	Hypnotics	$27,596	0.9%	4,317	1,157	$6.39	$0.22
17	25	22	Carvedilol	Generic	Beta Blockers	$57,185	0.9%	2,929	637	$19.52	$0.45
26	36	23	Tamsulosin Hcl	Generic	Genitourinary Agents - Miscellaneous	$118,505	0.9%	2,707	678	$43.78	$0.96
29	65	24	Losartan Potassium	Generic	Antihypertensives	$219,677	0.9%	2,634	664	$83.40	$1.78
20	31	25	Pravastatin Sodium	Generic	Antihyperlipidemics	$46,128	0.8%	2,476	679	$18.63	$0.38

*Medicare BOB information is based on the most recent year ending Dec 31, 2011.

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Specialty drugs are those drugs filled through specialty pharmacy.

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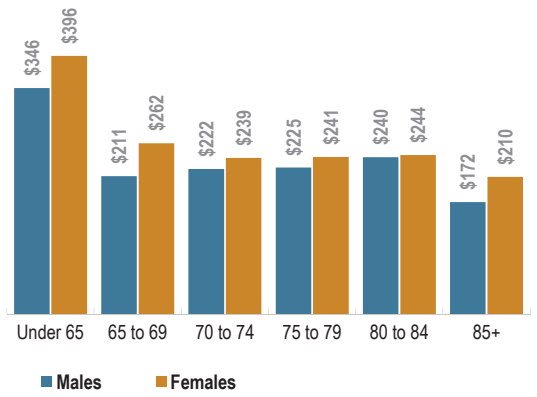
Utilizer Demographics

Age Band	Under 65	65 to 69	70 to 74	75 to 79	80 to 84	85+
Total Members	3,562	2,050	1,528	1,134	720	630
Total Prescriptions	147,416	78,400	57,405	41,377	26,417	21,239
Rx PMPM	0.00	0.00	0.00	0.00	0.00	0.00
Gross Cost	$16,052,279	$5,929,927	$4,253,448	$3,183,569	$2,095,076	$1,513,250
Gross Cost PMPM	375.54	241.05	231.97	233.95	242.49	200.17
Generic Dispensing Rate	72.4%	71.7%	70.4%	69.6%	70.1%	72.2%
Mail Dispensing Rate	0.7%	0.8%	0.6%	0.4%	0.2%	0.5%

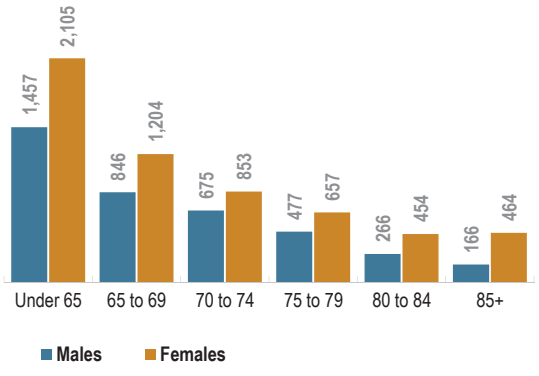
Age Band	Under 65	65 to 69	70 to 74	75 to 79	80 to 84	85+
Males	1,457	846	675	477	266	166
Total Prescriptions	47,927	28,628	23,730	15,705	8,935	4,732
Rx PMPM	0.00	0.00	0.00	0.00	0.00	0.00
Gross Cost	$6,056,338	$2,145,077	$1,802,192	$1,285,269	$767,482	$342,178
Gross Cost PMPM	346.39	211.30	222.49	224.54	240.44	171.78
Generic Dispensing Rate	72.7%	72.1%	70.5%	69.9%	70.1%	73.4%
Mail Dispensing Rate	0.7%	0.6%	0.8%	0.4%	0.3%	0.1%

Age Band	Under 65	65 to 69	70 to 74	75 to 79	80 to 84	85+
Females	2,105	1,204	853	657	454	464
Total Prescriptions	99,489	49,772	33,675	25,672	17,482	16,507
Rx PMPM	0.00	0.00	0.00	0.00	0.00	0.00
Gross Cost	$9,995,940	$3,784,850	$2,451,256	$1,898,299	$1,327,594	$1,171,072
Gross Cost PMPM	395.72	261.96	239.47	240.78	243.68	210.32
Generic Dispensing Rate	72.2%	71.4%	70.4%	69.4%	70.1%	71.8%
Mail Dispensing Rate	0.8%	0.9%	0.5%	0.4%	0.1%	0.6%

Gross Cost PMPM by Gender



Plan Membership by Age and Gender



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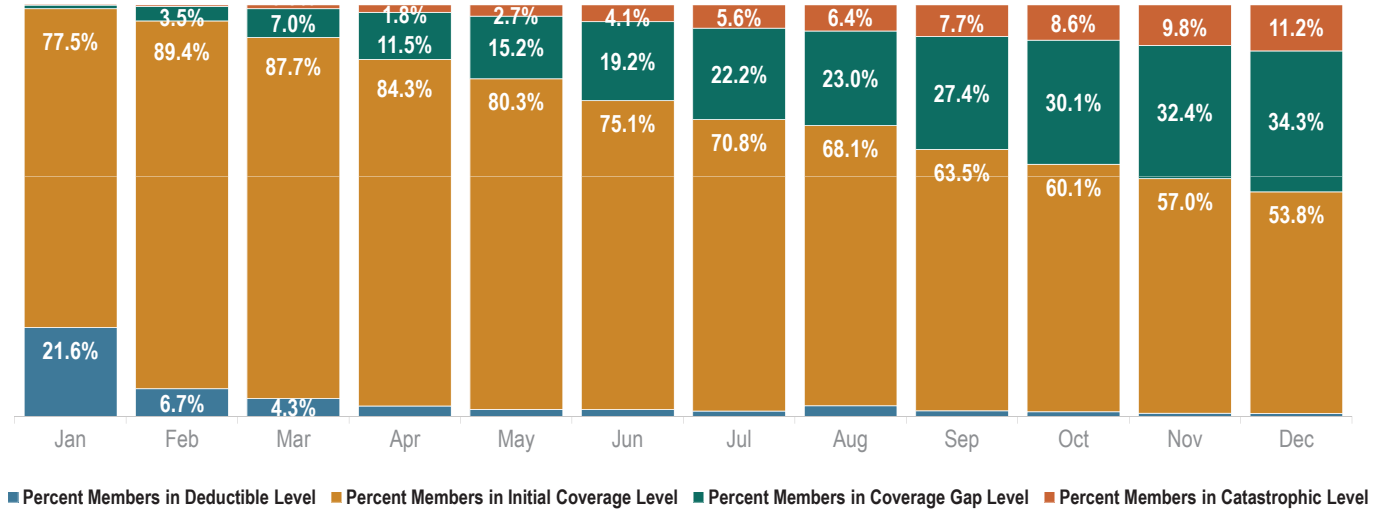
2011 Utilization by Coverage Level

	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
Members in Deductible Level	1,519	406	281	166	119	118	94	200	111	92	63	61
Members in Initial Coverage Level	5,445	5,385	5,688	5,581	5,510	5,354	5,130	5,322	5,130	4,879	4,680	4,543
Members in Coverage Gap Level	59	213	455	760	1,044	1,369	1,611	1,796	2,213	2,445	2,660	2,892
Members in Catastrophic Level	3	20	59	117	186	291	407	497	620	696	807	943

2011 Percent Utilization by Coverage Level



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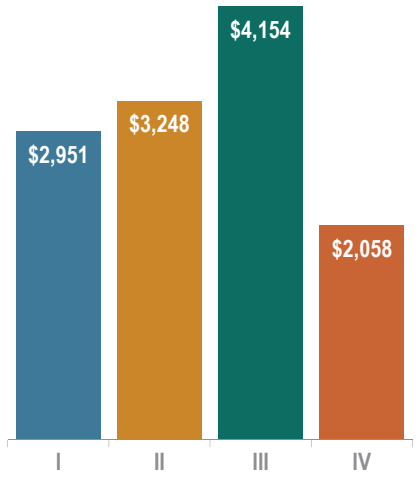
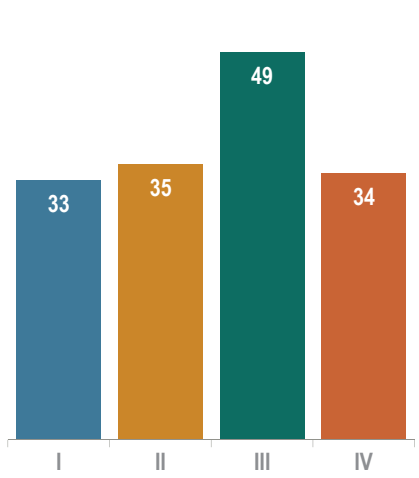
Low-Income Subsidy Report

Subsidy Member Level Type Code	Total Gross Cost	Total Net Cost	Gross Drug Cost Above Out-of-Pocket Threshold	Gross Drug Cost Below Out-of-Pocket Threshold	Total Rx	TrOOP Amount	Total Member Cost	Total Utilizing Members
I	$5,252,702.50	$5,176,373.35	$1,303,576.77	$3,807,931.71	58,226	$1,715,879.22	$76,329.15	1,780
II	$27,935,538.08	$27,695,574.06	$5,874,696.40	$20,918,261.87	299,134	$8,360,479.38	$239,964.02	8,600
III	$569,140.81	$569,140.81	$169,669.34	$397,865.48	6,710	$178,185.79	$0.00	137
IV	$304,550.07	$281,935.53	$41,802.92	$240,155.39	4,979	$87,600.80	$22,614.54	148

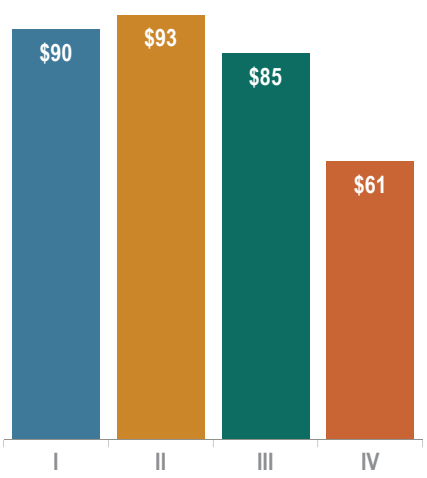
Total Gross Cost Per Utilizer



Rx Per Utilizer



Total Gross Cost Per Rx



Every effort is made by CVS Caremark and its advisors to maintain the highest level of accuracy in its projections; however because of the variability of numberous factors, which are not under the control of CVS Caremark, we cannot guarantee the estimated results shown

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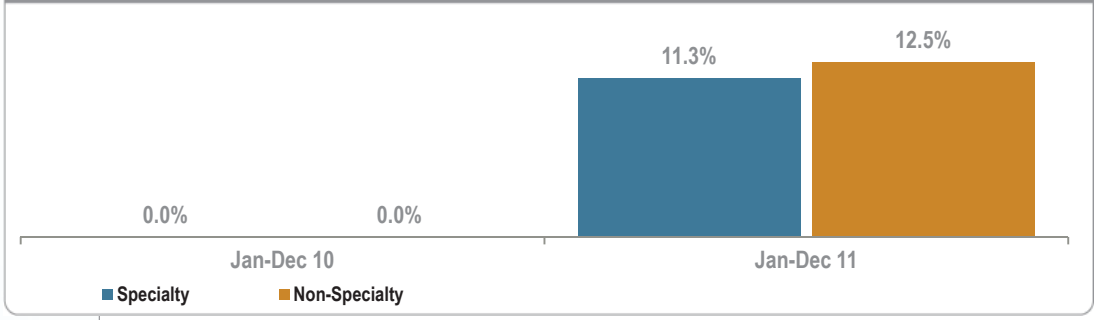
Specialty Pharmacy Trend, Cost and Utilization Metrics

Specialty Gross Drug Trend



Improve Specialty Savings

- Proactive calls to patients to manage their drug inventory and reduce waste

Your Specialty Utilization Metrics

	Jan-Dec 10	% Change	Jan-Dec 11	Jan-Dec 11 Medicare BOB	Jan-Dec 11 Peer Group*
Specialty Prescriptions	2,987	44.2%	4,306		
% of Specialty Total Prescriptions	1.2%	-8.5%	1.1%	0.8%	0.5%
% CVS Caremark Specialty Pharmacy Prescriptions	7.4%	-9.9%	6.7%		
Specialty Utilizers	300	34.3%	403		
% of Specialty Utilizers	3.8%	-10.7%	3.4%		
Average Age Per Specialty Utilizer	54.6	2.4%	55.9		

Your Specialty Cost Metrics

	Jan-Dec 10	% Change	Jan-Dec 11	Jan-Dec 11 Medicare BOB	Jan-Dec 11 Peer Group*
Specialty Gross Cost	$3,735,092	54.1%	$5,756,648		
% Specialty Prescriptions By Gross Cost	16.0%	-0.8%	15.9%	14.2%	11.2%
Specialty Net Cost	$3,695,606	53.9%	$5,686,152		
% Specialty Prescriptions By Net Cost	16.2%	-1.1%	16.0%	15.4%	12.8%
Specialty Member Cost	$39,487	78.5%	$70,497		
% Specialty Member Cost Share	1.1%	15.8%	1.2%	3.2%	6.4%
Gross Cost Per Specialty Utilizer	$12,450	14.7%	$14,284		

* Peer Group: MAPD

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Your Top 25 Specialty Therapeutic Class Review

By Gross Cost

Specialty Class	Total Gross Cost*	% Specialty Gross Cost	Total Gross Cost PMPY	Total Utilizing Members	% Change in Utilizing Members	Total Gross Cost per Utilizer	Total Number of Prescriptions	Gross Cost Per Rx	% Prescriptions CVS Caremark Specialty Pharmacy
HUMAN IMMUNODEFICIENCY VIRUS	$2,429,062	42.2%	$254.33	175	33.6%	$13,880	2,615	$929	3.1%
HEPATITIS C	$564,791	9.8%	$59.13	24	41.2%	$23,533	237	$2,383	0.0%
MULTIPLE SCLEROSIS	$457,654	8.0%	$47.92	15	7.1%	$30,510	146	$3,135	33.6%
RHEUMATOID ARTHRITIS	$415,112	7.2%	$43.46	37	105.6%	$11,219	208	$1,996	4.3%
ONCOLOGY	$358,492	6.2%	$37.53	27	58.8%	$13,277	96	$3,734	4.2%
HEMOPHILIA	$336,896	5.9%	$35.27	1	-50.0%	$336,896	11	$30,627	100.0%
NEUTROPENIA	$257,682	4.5%	$26.98	16	60.0%	$16,105	75	$3,436	0.0%
ANEMIA	$209,432	3.6%	$21.93	34	30.8%	$6,160	112	$1,870	6.3%
TRANSPLANT	$177,842	3.1%	$18.62	30	15.4%	$5,928	381	$467	27.0%
HEPATITIS B	$132,541	2.3%	$13.88	23	43.8%	$5,763	163	$813	0.0%
CYSTIC FIBROSIS	$128,666	2.2%	$13.47	4	100.0%	$32,166	40	$3,217	0.0%
OSTEOPOROSIS	$72,148	1.3%	$7.55	17	-10.5%	$4,244	72	$1,002	1.4%
RENAL DISEASE	$62,079	1.1%	$6.50	14	16.7%	$4,434	76	$817	10.5%
GROWTH HORMONE AND RELATED	$57,635	1.0%	$6.03	1	0.0%	$57,635	7	$8,234	0.0%
PULMONARY ARTERIAL HYPERTEN	$50,348	0.9%	$5.27	5	400.0%	$10,070	35	$1,439	25.7%
HORMONAL THERAPIES	$12,044	0.2%	$1.26	3	-50.0%	$4,015	7	$1,721	0.0%
PSORIASIS	$7,056	0.1%	$0.74	1	NA	$7,056	1	$7,056	0.0%
MOVEMENT DISORDERS	$6,907	0.1%	$0.72	1	NA	$6,907	3	$2,302	100.0%
IRON OVERLOAD	$6,560	0.1%	$0.69	1	NA	$6,560	1	$6,560	100.0%
IMMUNE (IDIOPATHIC) THROMBOCY	$4,019	0.1%	$0.42	1	0.0%	$4,019	1	$4,019	100.0%
OSTEOARTHRITIS	$3,550	0.1%	$0.37	3	200.0%	$1,183	4	$888	25.0%
IMMUNE DEFICIENCIES AND RELATI	$2,532	0.0%	$0.27	1	0.0%	$2,532	2	$1,266	0.0%
CARDIAC DISORDERS	$2,289	0.0%	$0.24	1	-50.0%	$2,289	11	$208	0.0%
ASTHMA	$1,313	0.0%	$0.14	1	NA	$1,313	2	$656	0.0%

Percentage of Top 25 Specialty Therapeutic Classes Gross Spend/Total Specialty Gross Spend	100.0%
Percentage Total Specialty Gross Spend/Total Gross	15.9%

* Represents pharmacy claims only.

NA = No prior data available

Source: CVS Caremark Data Warehouse and Internal Sources

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Your Top 25 Specialty Drugs

By Gross Cost

Book of Business Rank*	Prior Rank	Current Rank	Drug Name	Specialty Class	Total Gross Cost	% of Total Specialty Gross Cost	Utilizing Members	Total Rxs	Gross Cost Per Rx	Gross Cost per Days' Supply
2	2	1	Truvada	Human Immunodeficiency Virus	$523,934	9.10%	74	456	$1,148.98	$36.07
5	4	2	Atripla	Human Immunodeficiency Virus	$368,421	6.40%	30	214	$1,721.59	$54.79
1	3	3	Copaxone	Multiple Sclerosis	$336,092	5.84%	10	94	$3,575.44	$119.52
167	1	4	Advate Uh	Hemophilia	$266,336	4.63%	1	9	$29,592.89	$1,286.65
4	14	5	Humira	Rheumatoid Arthritis	$257,671	4.48%	26	127	$2,028.90	$66.70
9	6	6	Reyataz	Human Immunodeficiency Virus	$243,615	4.23%	41	246	$990.31	$32.10
21	0	7	Incivek	Hepatitis C	$221,508	3.85%	5	13	$17,039.07	$601.92
12	11	8	Prezista	Human Immunodeficiency Virus	$208,107	3.62%	38	202	$1,030.23	$33.00
57	12	9	Neulasta	Neutropenia	$205,091	3.56%	12	58	$3,536.05	$259.28
14	7	10	Norvir	Human Immunodeficiency Virus	$166,172	2.89%	75	450	$369.27	$12.00
38	5	11	Aranesp	Anemia	$165,771	2.88%	19	66	$2,511.69	$105.79
27	9	12	Pegasys	Hepatitis C	$163,517	2.84%	16	70	$2,335.96	$83.43
17	8	13	Epzicom	Human Immunodeficiency Virus	$141,207	2.45%	23	139	$1,015.88	$32.02
6	13	14	Enbrel	Rheumatoid Arthritis	$107,005	1.86%	10	55	$1,945.55	$68.68
44	16	15	Baraclude	Hepatitis B	$102,036	1.77%	20	115	$887.27	$27.21
24	10	16	Kaletra	Human Immunodeficiency Virus	$101,806	1.77%	20	124	$821.01	$24.59
23	15	17	Viread	Human Immunodeficiency Virus	$99,215	1.72%	22	110	$901.96	$24.50
31	26	18	Intelence	Human Immunodeficiency Virus	$92,987	1.62%	18	120	$774.89	$25.41
10	24	19	Isentress	Human Immunodeficiency Virus	$90,336	1.57%	19	87	$1,038.34	$31.86
48	32	20	Xeloda	Oncology	$86,933	1.51%	10	44	$1,975.76	$110.46
92	43	21	Tobi	Cystic Fibrosis	$86,686	1.51%	4	19	$4,562.42	$161.13
79	19	22	Pegintron Redipen	Hepatitis C	$82,576	1.43%	8	35	$2,359.33	$84.26
69	36	23	Rituxan	Oncology	$72,212	1.25%	2	6	$12,035.40	$405.69
208	0	24	Advate	Hemophilia	$70,560	1.23%	1	2	$35,280.10	$1,260.00
30	18	25	Combivir	Human Immunodeficiency Virus	$69,512	1.21%	11	61	$1,139.54	$27.92
Total Top Gross Specialty Drugs										**$4,329,306**
Percentage Top Gross Specialty Drugs/Overall Biotech Specialty Drugs										**75.2%**

* Medicare BOB trend information is based on the most recent year ending Dec 31, 2011.

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Source: CVS Caremark Data Warehouse and Internal Sources

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CVS CAREMARK

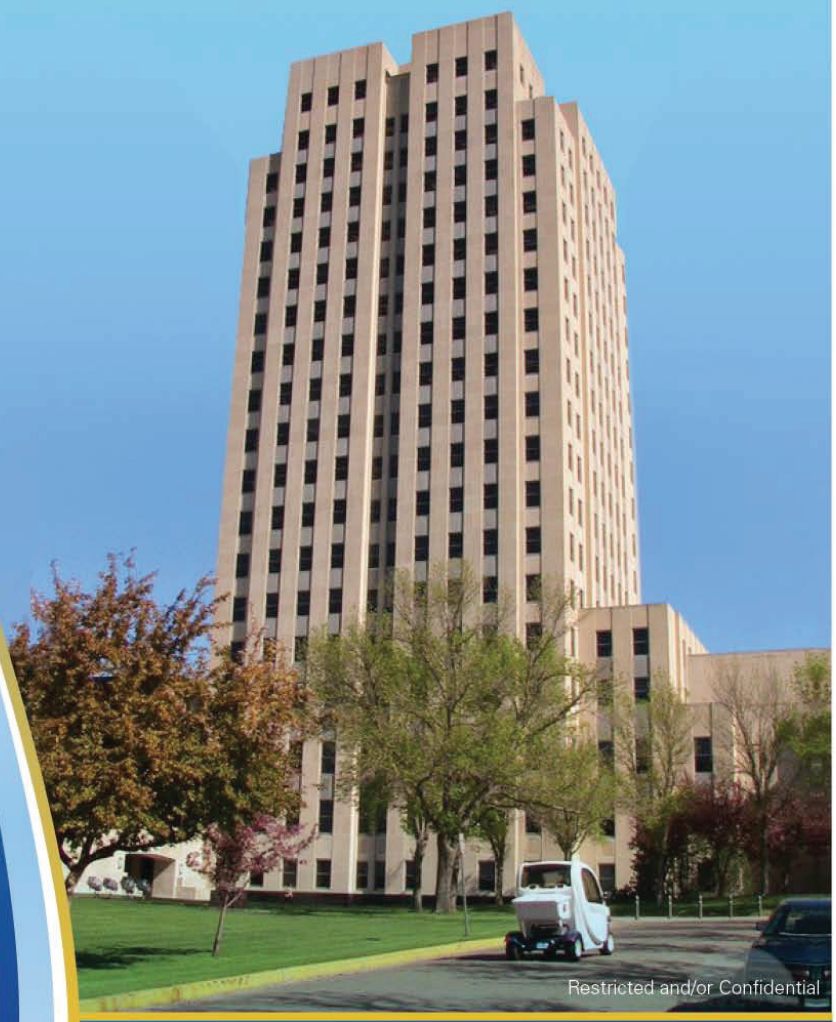
Attachment 7

Attachment 7

Samples of Executive Summaries

NDPERS
Executive Summary

Q1 | Presented May 2014



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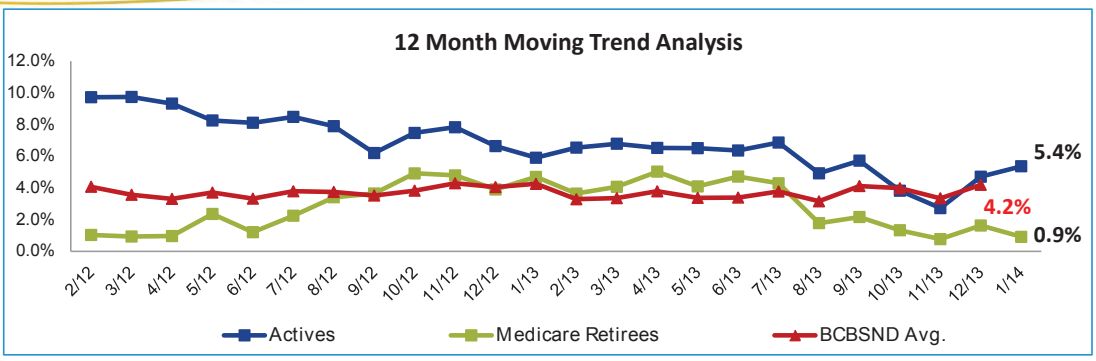
NORTH DAKOTA PUBLIC EMPLOYEES RETIREMENT SYSTEM

ND

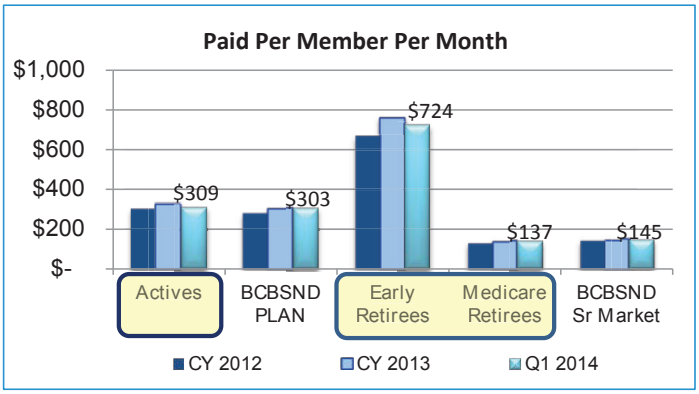
Blue Cross Blue Shield of North Dakota is an independent licensee of the Blue Cross & Blue Shield Association

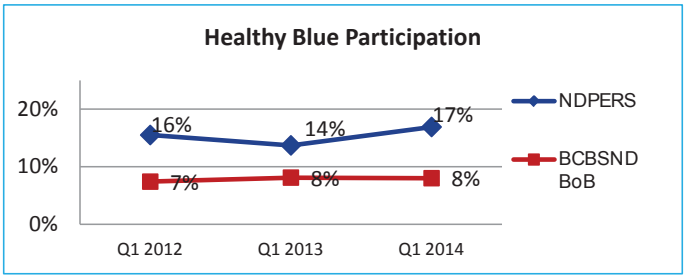
Noridian Mutual Insurance Company

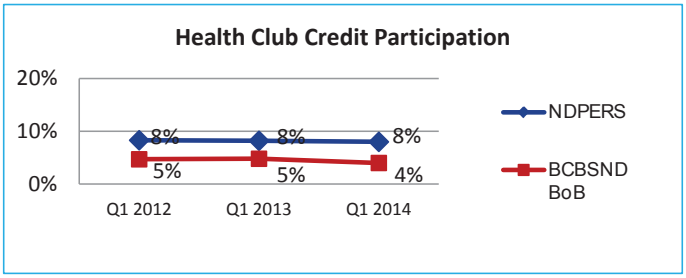
Dashboard

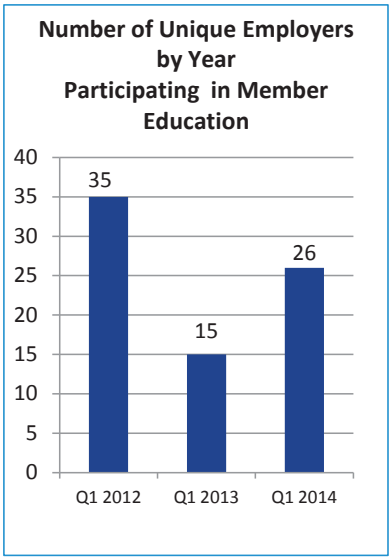


Membership Comparison	CY 2013	Q1 2014
Actives	54,813	55,678
Early Retirees	1,242	1,202
Medicare Retirees	7,854	8,136









Actives include Political Subs and State Employees

NDPERS Biennium Comparison

Paid through March 31, 2014

Incurred	Premium	Admin Fee	Interest on Surplus	Estimated Incurred Claims	Gain (Loss)	Gain (Loss) as % of Premium	Biennium Gain (loss)	% of Premium
July 09 - Jan 10	122,061	6,450	73	100,430	15,253	12.5%	38,094	9.0%
July 11 - Jan 12	133,866	7,102	19	120,700	6,084	4.5%	10,516	2.2%
July 13 - Jan 14	157,864	12,002	27	142,465	3,424	2.2%	N/A	N/A

Note: Reported in thousands

The July 11 - June 13 biennium is reporting a gain of $10.5 million with nine months of claims run out. Biennium gain(losses) are prior to risk sharing. It is important to note that the bienniums beginning with July 13 includes estimated claim reserves. Actual claims run out may vary from original reserve estimates.

It is expected that premiums will exceed claims in the first few months of the biennium. This is due to stable premium levels throughout the entire biennium and increasing claims during the biennium. At the mid-point of the biennium claims would be expected to be equal to premiums less admin fees and during the last months of the biennium, claims would be expected to exceed premiums

NDPERS Quarterly Trend Analysis

Paid through March 31, 2014

Twelve Month Moving Average				
Incurred Month	Est. Incurred Claim/Contract		Annual Trend	
	Actives	Med Retirees	Actives	Med Retirees
3/12	$759.75	$171.89	9.7%	0.9%
4/12	763.45	172.25	9.3%	1.0%
5/12	767.26	174.18	8.3%	2.4%
6/12	770.34	173.51	8.1%	1.2%
7/12	774.57	175.08	8.5%	2.2%
8/12	783.52	177.39	7.9%	3.4%
9/12	782.27	177.81	6.2%	3.7%
10/12	795.13	179.85	7.5%	4.9%
11/12	802.63	179.72	7.8%	4.8%
12/12	800.64	178.99	6.6%	3.9%
1/13	801.43	179.81	5.9%	4.7%
2/13	807.86	178.57	6.5%	3.6%
3/13	811.34	178.89	6.8%	4.1%
4/13	813.28	180.92	6.5%	5.0%
5/13	817.21	181.31	6.5%	4.1%
6/13	819.36	181.70	6.4%	4.7%
7/13	827.74	182.60	6.9%	4.3%
8/13	822.10	180.56	4.9%	1.8%
9/13	827.04	181.67	5.7%	2.2%
10/13	825.55	182.24	3.8%	1.3%
11/13	824.53	181.11	2.7%	0.8%
12/13	838.34	181.91	4.7%	1.6%
1/14	844.46	181.46	5.4%	0.9%

The 4.7% twelve month rolling trend for NDPERS Actives through December 2013 is greater than the Blue Cross Blue Shield overall trend of 4.2%.

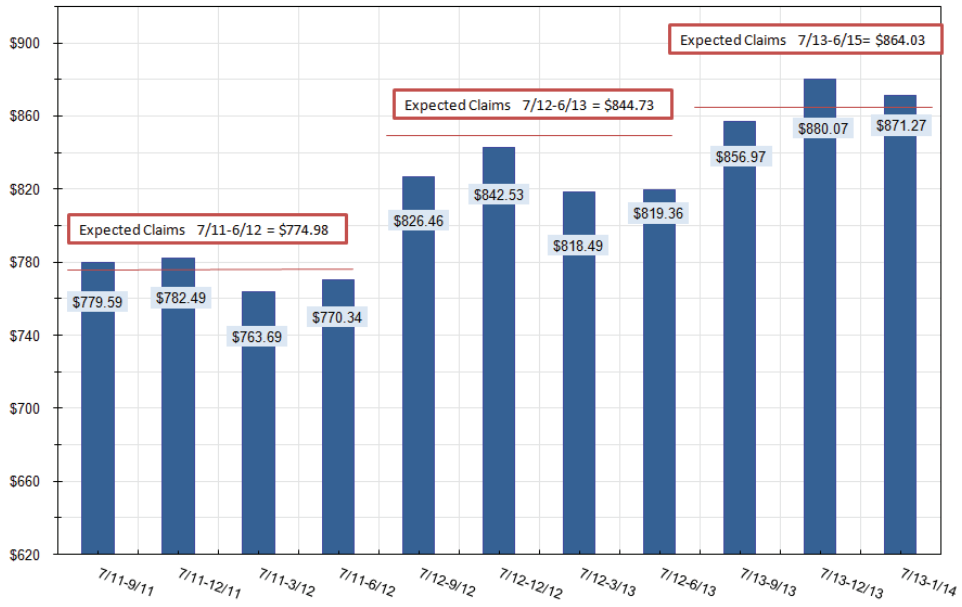
A 6.68% trend was used in rating the first year of the biennium beginning July 2013.

NDPERS Quarterly Trend Analysis

Paid through March 31, 2014

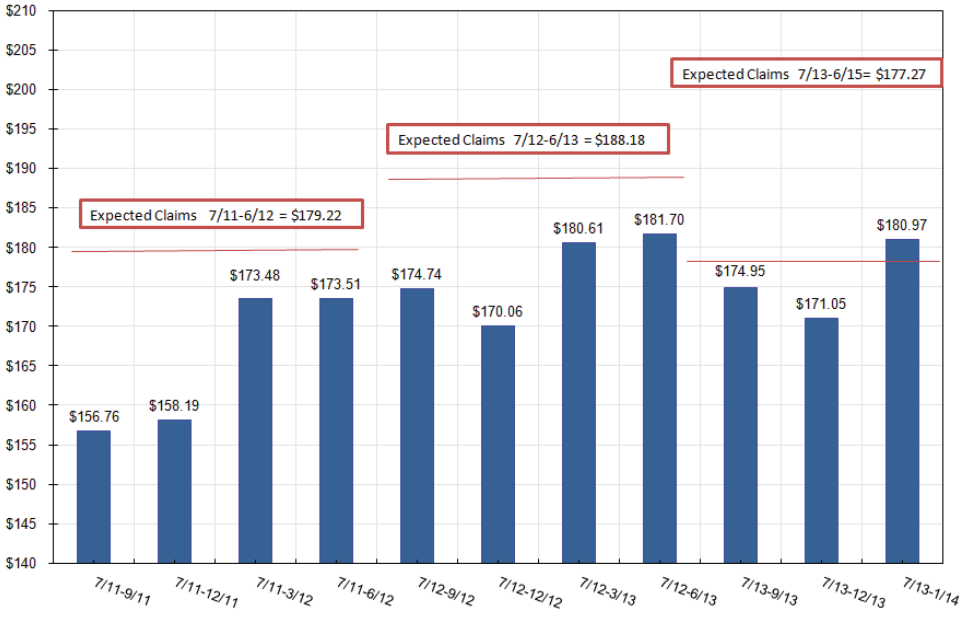
NDPERS - Actives

AVERAGE MONTHLY INCURRED CLAIMS PER CONTRACT



NDPERS - Medicare Retirees

AVERAGE MONTHLY INCURRED CLAIMS PER CONTRACT

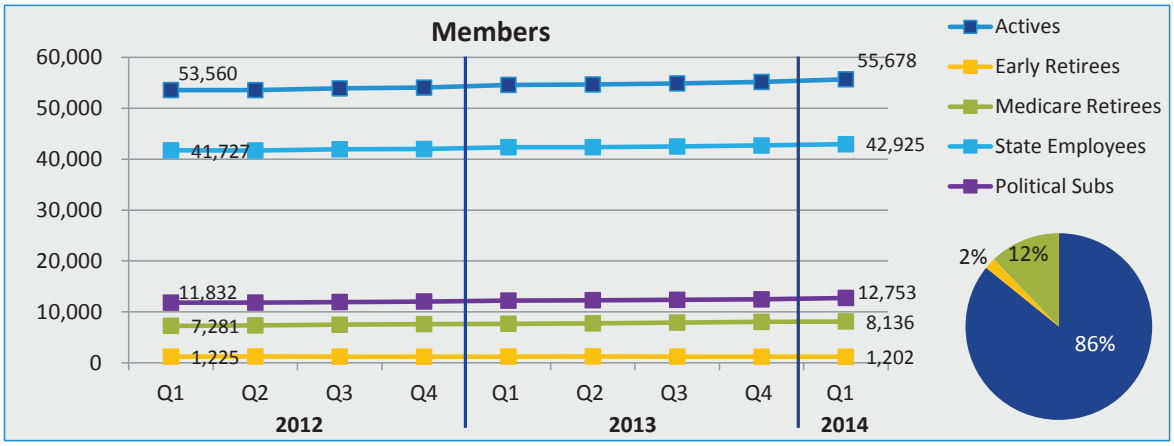


Membership & Health Utilization Summary

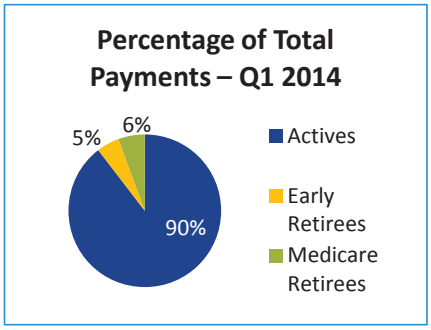
Paid each Calendar Year (Q1 through 3/31/2014)

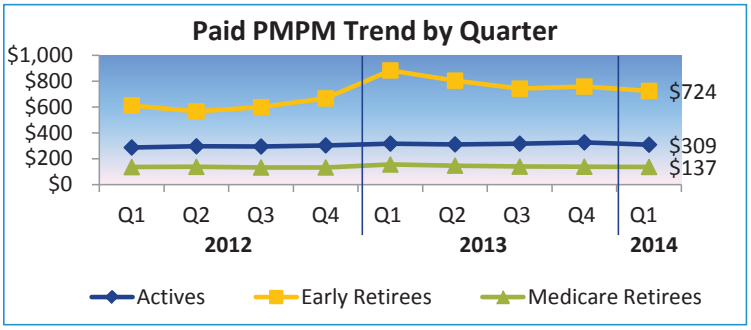
ND

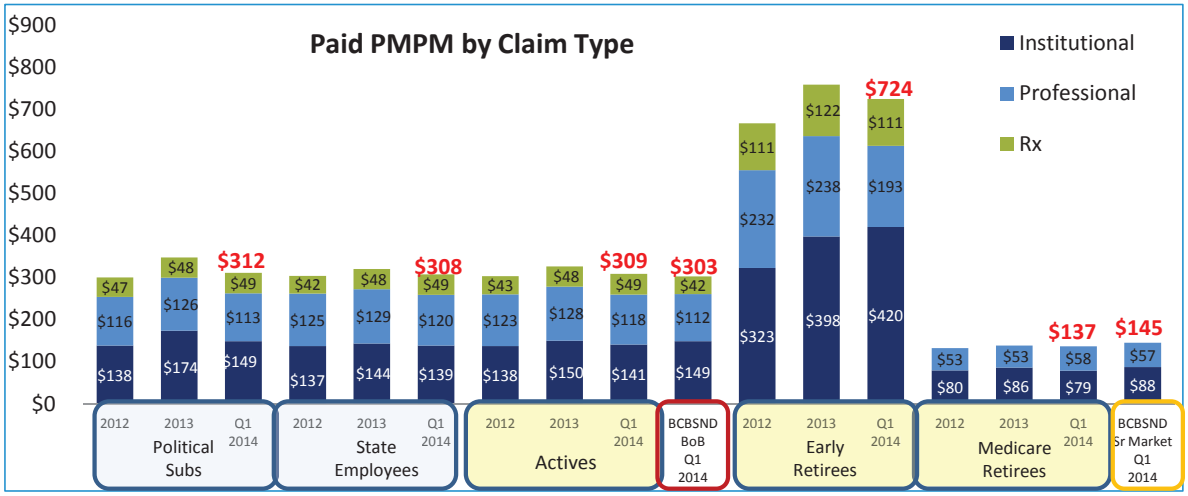
Membership



Claims Paid Per Member Per Month (PMPM)





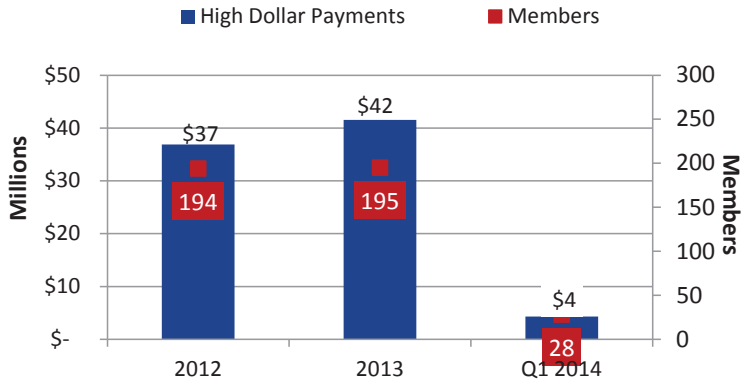


Actives include Political Subs and State Employees

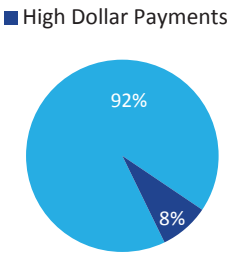
Quarters are cumulative to calendar year end

High Dollar Cases

Actives
High Dollar Cases over $100,000/member



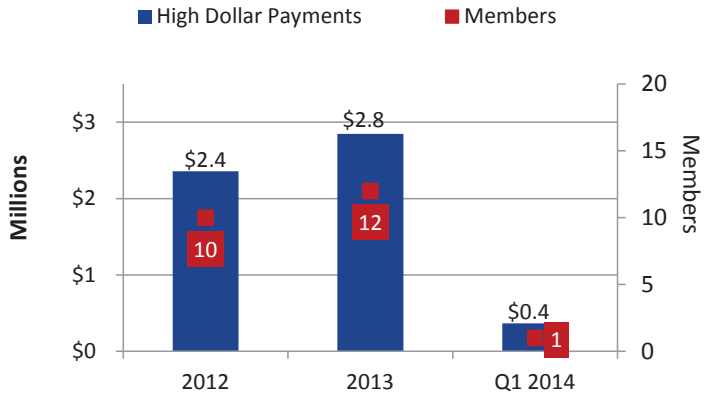
Q1 2014 as a % of Total Payments



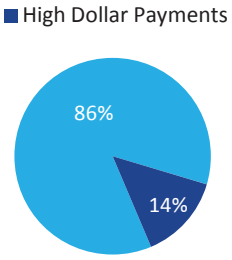
BCBSND Avg. 20%

Avg. Paid/Case	**$190,129**	**$213,099**	**$153,299**
% of Total Payments	**19%**	**19%**	**8%**
BCBSND % of Tot. Payments	17%	18%	20%

Early Retirees
High Dollar Cases over $100,000/member



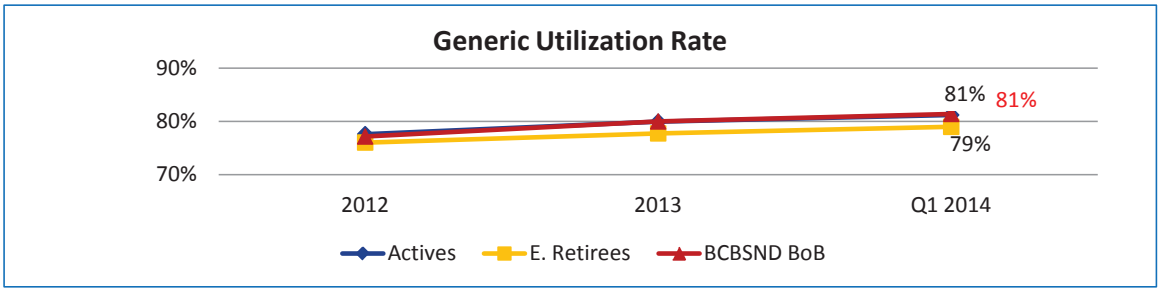
Q1 2014 as a % of Total Payments

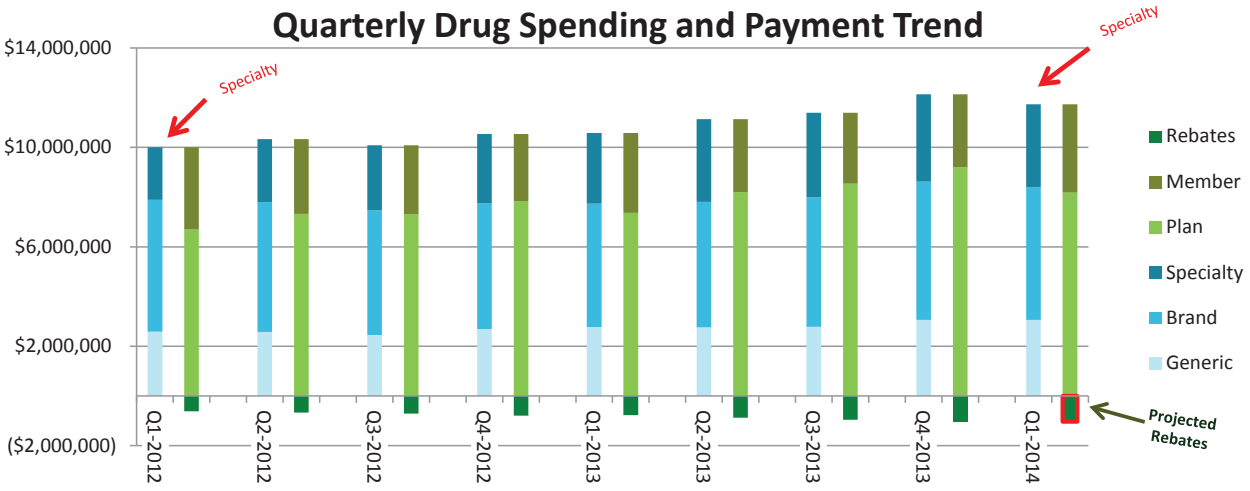


Avg. Paid/Case	**$235,754**	**$237,265**	**$364,986**
% of Total Payments	**24%**	**25%**	**14%**

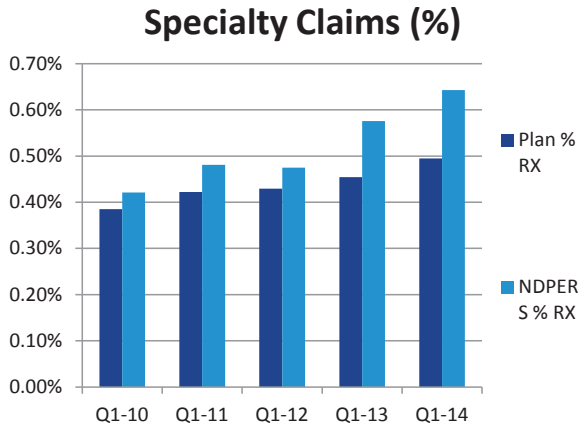
Prescription Drug & Specialty Pharmacy

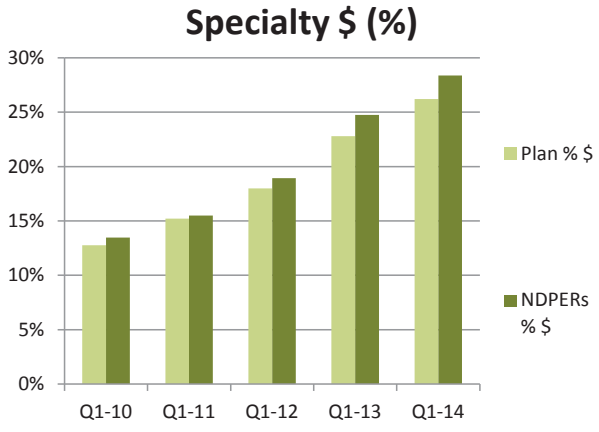
Prescription Drugs



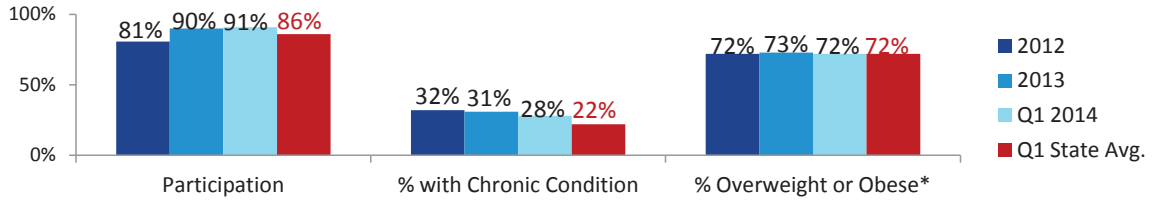


- Specialty spend continues to increase
- Plan (NDPERS) costs are increasing – benefit design may not be keeping up with inflation
- Rebates have also increased

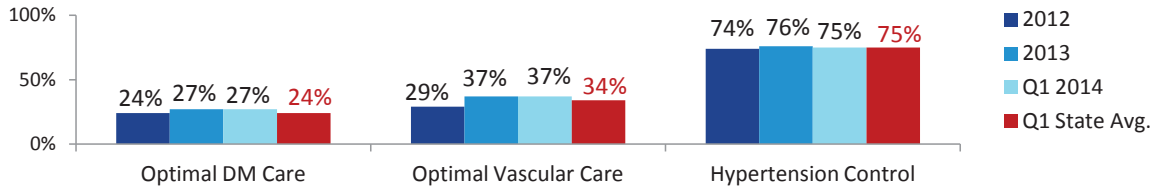




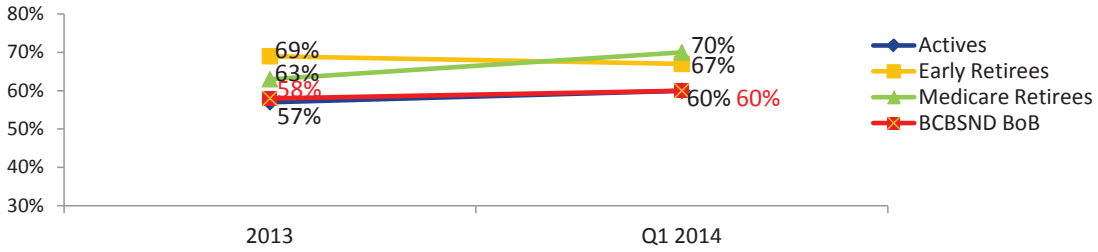
MediQHome Key Measures



MediQHome Outcome Measures



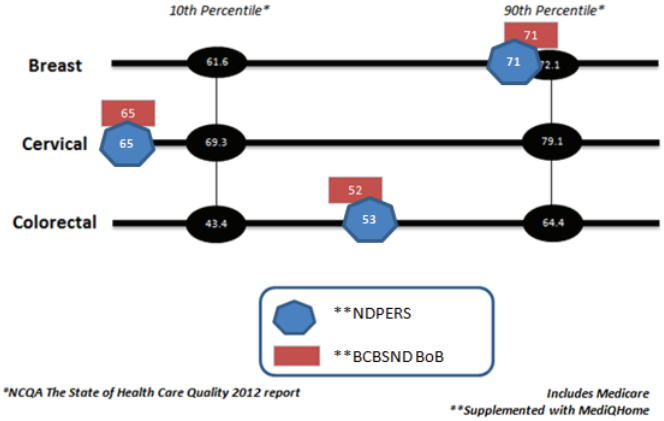
AccordantCare Participation – Rare and Complex Disease Management



- **533 eligible, 327 participating (overall participation 61%)**
- 2013 to Q1 2014 shows an overall increase in participation
  - Due to small population of the retirees, addition or decline of a few members could change participation percentage significantly

Preventive Cancer Screenings

Cancer screening compliance is at the BCBSND book of business but below the 2012 NCQA 90th percentile.

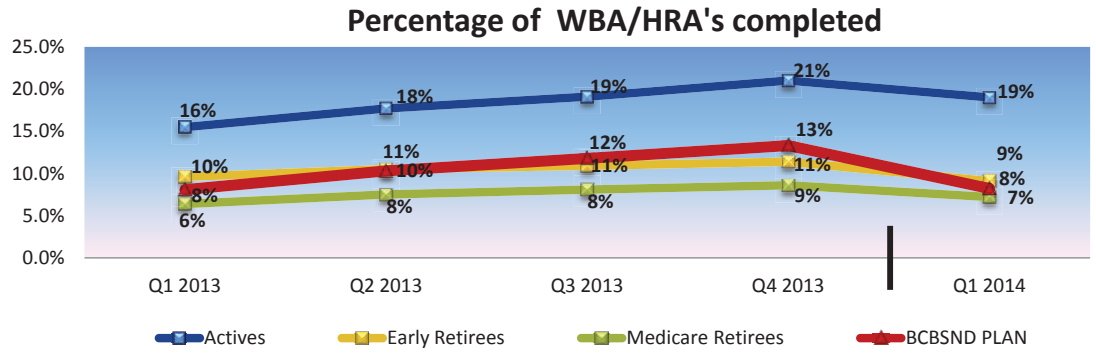


Wellness Programs

Through Q1 2014 (Jan-Mar), there was a total of 44,305 members eligible for the wellness programs, HealthyBlue and Health Club Credit. NDPERS member participation in both wellness programs is higher than the BCBSND Plan average.

HealthyBlue

- 17% (slightly down from 19% Q4) of <u>total</u> eligible members have completed a Health Risk Assessment (7,329 members).
  - BCBSND Plan HRA completion rate was 8% (also down from 13% in Q4)
- Point redemption through Q1 2014 - $48,086 in redeemed prizes

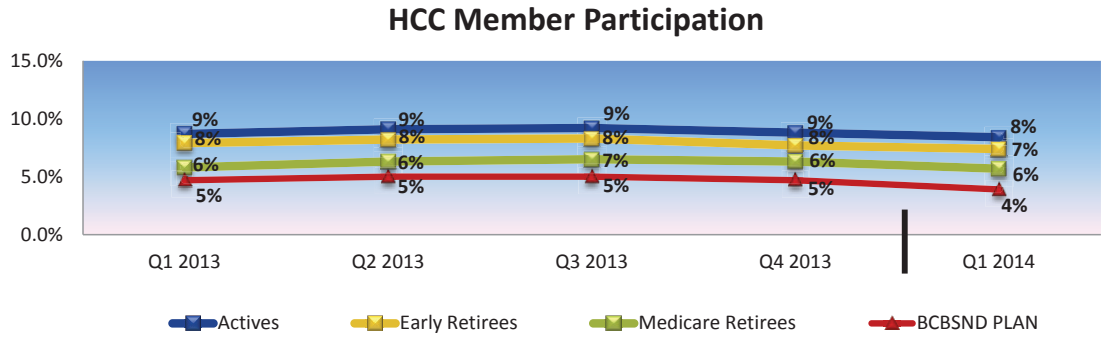


Q1 2014 begins over due to annual HRA completion requirement.

Quarters are cumulative to calendar year end

Health Club Credit

- 8% (same as Q4) participate in the Health Club Credit Program (3,478 members)
  - BCBSND Plan average is 4% (down from 5% Q4)
- Members receiving credit 61% (up from 55% Q4) - those participating in HCC exercise 12 or more days per month (2,137 members)
  - BCBSND Plan average is 63% (also up from 53% Q4)
- Health club credits paid through Q1 2014 - $114,661



Quarters are cumulative to calendar year end

Wellness Programs Cont'd

Member Engagement

Member Education Representatives introduce programs that provide employees with valuable information and engages them in their health care. Along with making more informed health care decisions, these programs include valuable life skills.

Presentations are available for the following programs:

- Take Care of Yourself
- Walking Works
- Strength Training
- Beat The Bug
- Summer Safety
- Stress Management
- Medication Education
- Tobacco Cessation
- Wellness Programs (HealthyBlue/Health Club Credit)
- Nutrition Basics for a Healthier You
- **NEW!** "CPR and First Aid Basics"

2014 through Q1, 26 employer groups have held these educational programs and 10 employer groups have had a benefit overview meeting.

	Number of Employers	Member Education Programs & Benefit Overview	Member Attendance
Q1 2014	15	HealthyBlue /HCC	308
	15	Other	499
	15	Benefit Overview	

NDPERS Wellness Specialist

- Two week Walking Challenge in January/February – 1155 registered participants walked approximately 146 million steps.
- Cervical Cancer Screening & HealthyBlue HRA Reminder mailings
- Completed "Spring into Action" physical activity challenge May 1 – results will be released in the next quarterly review.
- NDPERS Wellness Coordinator monthly calls & newsletters
  - **Call -** April featured a special guest from the NDSU Extension Service for a new nutrition program they are launching that is targeted at baby boomers.
  - **Newsletter** - featuring the health topic of the month and additional resources for wellness activities.
- Conducted a Wellness Coordinator survey in February. 63% of coordinators have been in their role for three or more years. Nearly all of coordinators are satisfied with the resources provided to them through the monthly newsletters and conference calls.
- HealthyBlueHighlights, sent bimonthly through HealthyBlue, highlights monthly health topics and encourages members to participate in HealthyBlue workshops.
- Pebble promotion in HealthyBlue – electronic tracking device that automatically uploads into HealthyBlue
- Debut of Duncan's Digest – online health topic presentation in HealthyBlue
- Launched online video tutorial on HealthyBlue
- Gearing Up for Worksite Wellness trainings were offered in Fargo and Bismarck. Approximately 10 NDPERS Wellness Coordinators attended.

Performance Standards and Guarantees

Measure	Goal	3/31/2014
Cost Management (measurement period : by 12-31-14)		
HRA Completions	17%	17%
HRA Score	5% point increase in the 2013 NDPERS group aggregate HRA wellness score Goal = 55	72
HealthyBlue – incentives paid	10% increase over 2013 incentives paid Goal = $581,798	$48,086
Health Club Credit – members receiving credit	10% increase over 2013 members receiving credit Goal = 2,177	2,137
Health Outcomes:		
Members enrolled in a Medical Home	80%	91%
Breast Cancer Screening Rates*	80%	76%
Cervical Cancer Screening Rates*	85%	68%
Colorectal Cancer Screening Rates*	60%	62%
Operational Performance:		
Claims Financial Accuracy	99%	99.8%
Payment Incident Accuracy	97%	99.6%
Claim Timeliness	99%	99%
Average Speed of Answer (in seconds)	30 seconds or less	21
Call Abandonment Rate	5% or less	1%
Provider Network Management:		
NDPERS PPO network	92% (or more) participation	99.6%
Provider Discount (non-Medicare contracts)	30% or more	53%

Green – meeting goal
Red – below goal
Purple – data not complete

**Cancer screening rates were a culmination of MediQHome and Optum claims data*

Opportunities and Activities

Completed

- Gearing Up for Worksite Wellness trainings in Fargo and Bismarck.
- Two week Walking Challenge in January/February
- "Spring into Action" physical activity challenge
- Wellness Coordinator survey
- Cervical Cancer Screening mailing
- HealthyBlue HRA Reminder mailing
- National Walk at Lunch Day at Capitol with First Lady Dalrymple & Kathleen Wrigley
- New MyPrime.com website is now available

Ongoing Activities

- **New BCBSND staff member to provide additional support for NDPERS program management**
- **Case Management – dedicated NDPERS Case Manager, works closely with Member Advocacy Program (MAP)**
    - **83 cases reviewed/followed in last 12 months**
        - **Projected savings (soft & hard) - $237,060**
- **There are currently 9 members in the Member Advocacy Program (MAP) – an increase from 3 last quarter. Two additional MAP advocates have been hired as the need for their services continue to increase.**
- **HealthyBlue upgrade to log community event participation**
- A fruit & veggie challenge is scheduled for summer.
- Monthly NDPERS Wellness Coordinator calls and newsletters
- Specialty Pharmacy
    - NDPERS enrollment in Prime Specialty Pharmacy Care Management
    - Targeted mailings continue to identify new specialty users
- Accordant Care – continue to identify newly eligibly members

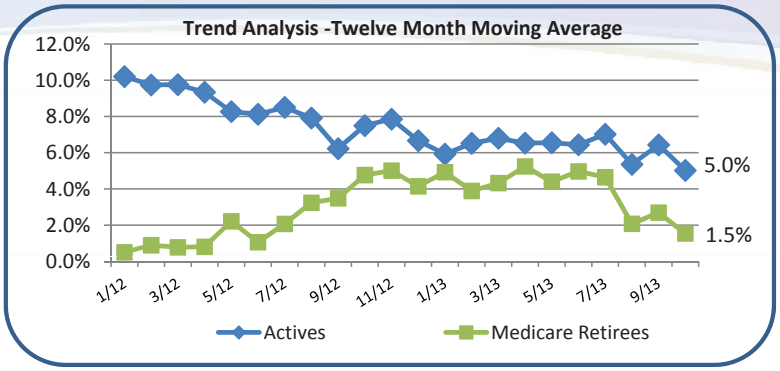
North Dakota Public Employees Retirement System

Presented by: Blue Cross Blue Shield of ND

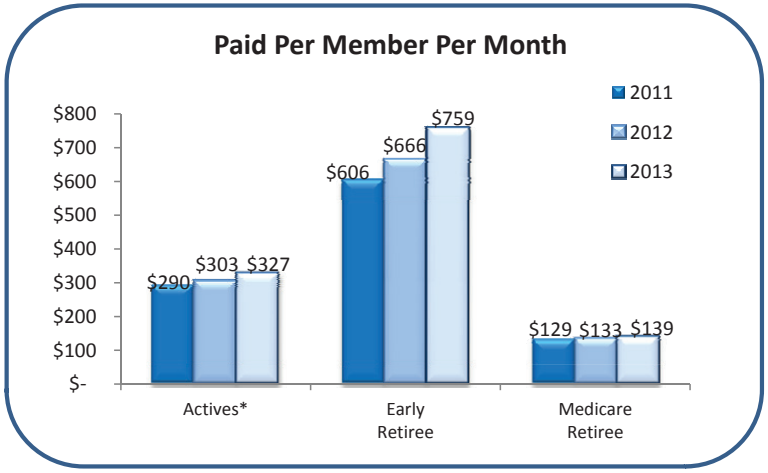
March 2014

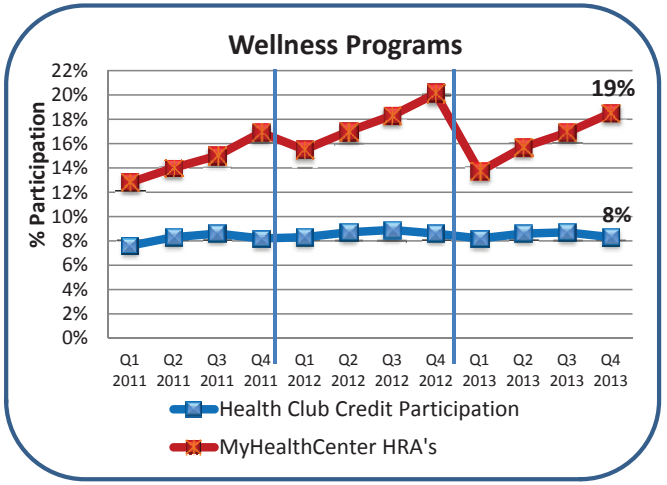
Dashboard

2



Membership	2011	2012	2013
Actives	50,887	53,759	54,807
Early Retirees	1,220	1,233	1,241
Medicare Retirees	6,923	7,439	7,854

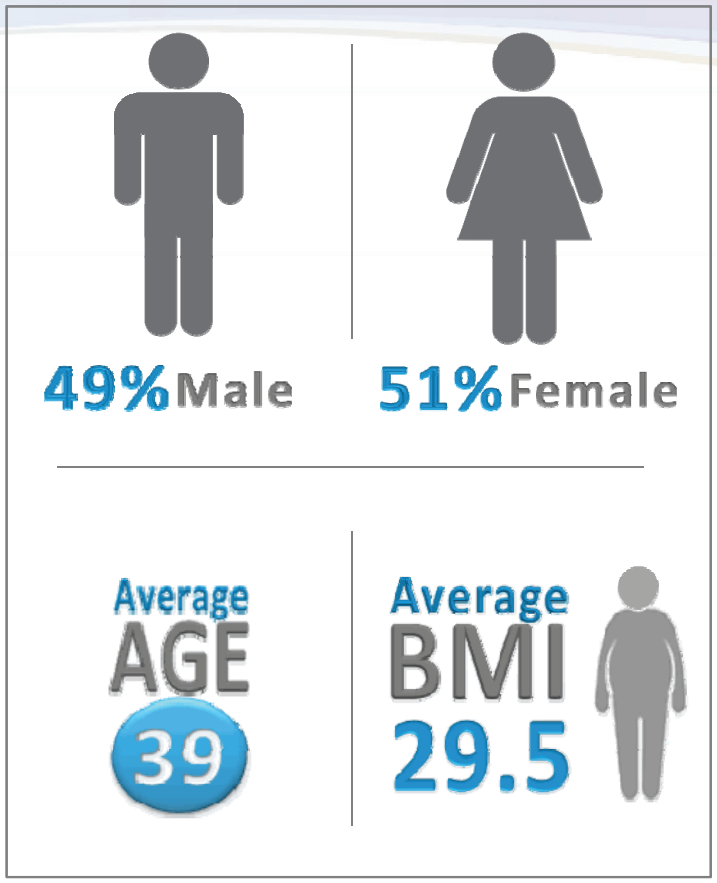


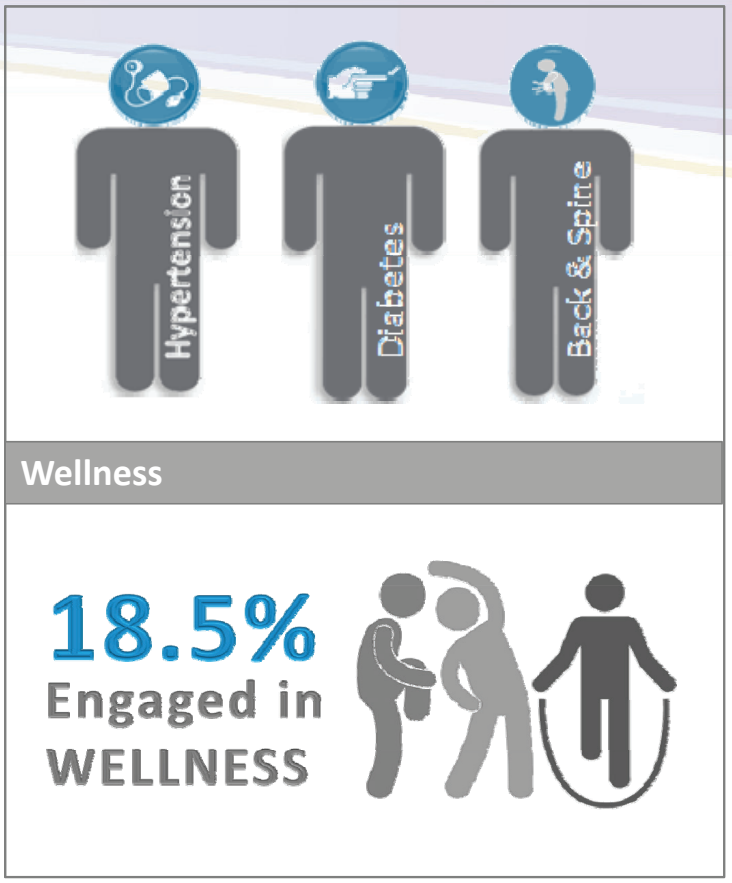


Restricted and/or Confidential

NDPERS Population

3





Restricted and/or Confidential

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FINANCIAL

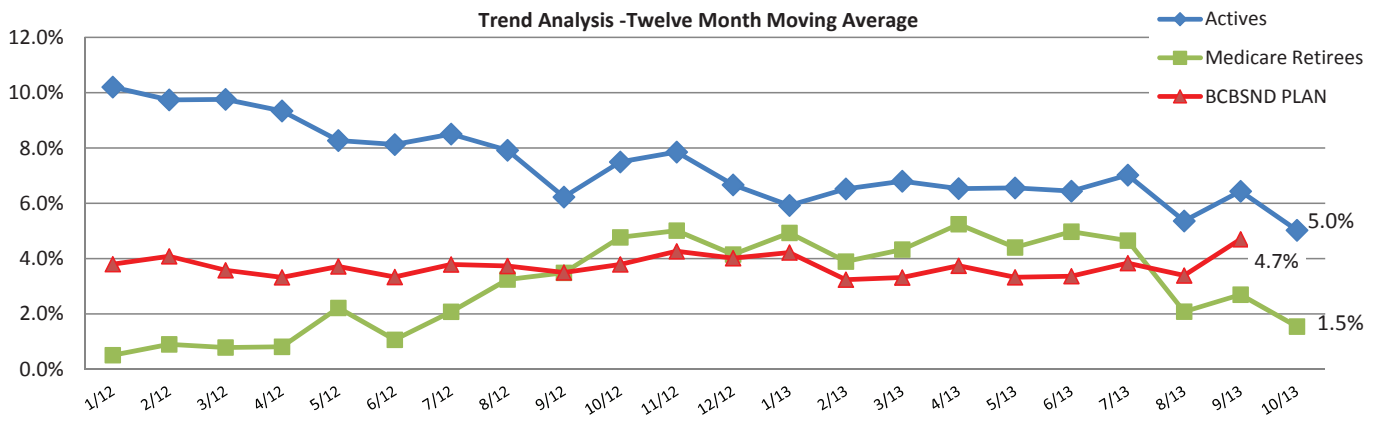
Annual Trend

PERS Biennium Comparison

Paid through December 31, 2013

	Premium	Admin Fee	Interest on Surplus	Estimated Incurred Claims	Gain(Loss)	Gain(Loss) as a % of Premium	Biennium Gain(loss)	% of Premium
July 09 - Oct 09	69,610	3,677	27	57,077	8,883	12.8%	38,094	9.0%
July 11 - Oct 11	75,914	4,023	6	67,956	3,941	5.2%	10,311	2.2%
July 13 - Oct 13	90,012	6,839	10	82,304	879	1.0%	N/A	N/A

Note: Reported in thousands

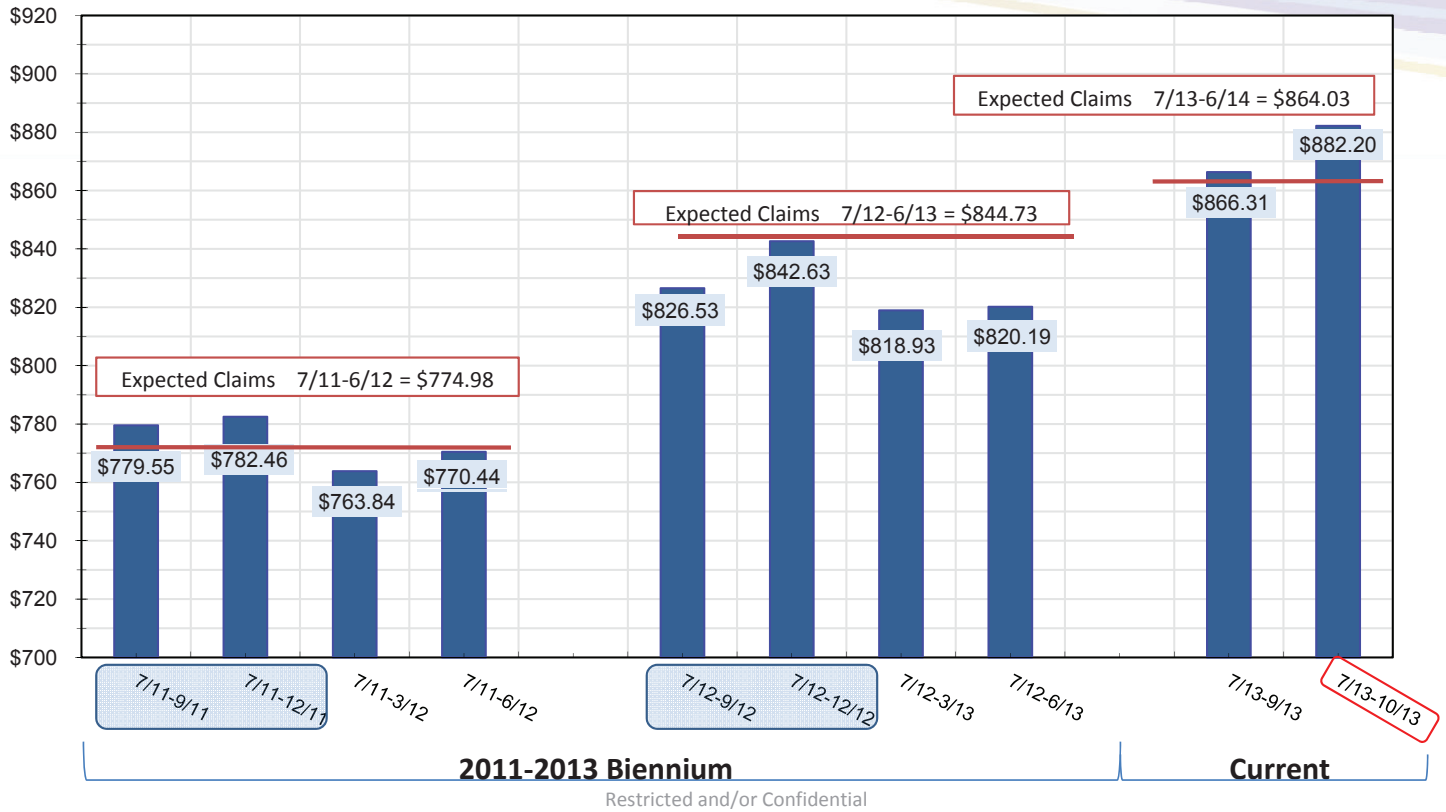


Restricted and/or Confidential

Year to Date
Incurred Claims Per Contract

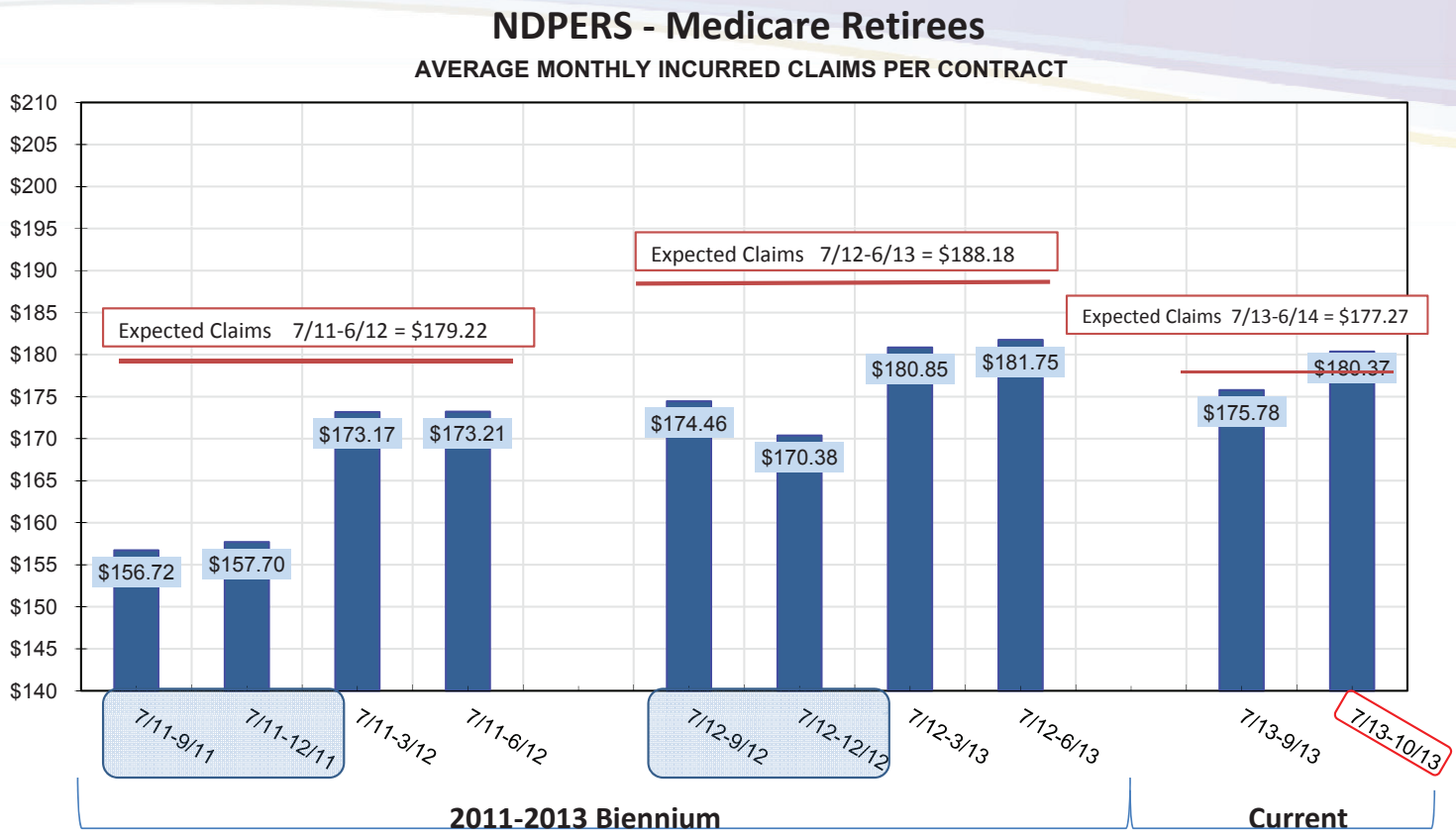
NDPERS - Actives

AVERAGE MONTHLY INCURRED CLAIMS PER CONTRACT



Restricted and/or Confidential

Year to Date
Incurred Claims Per Contract

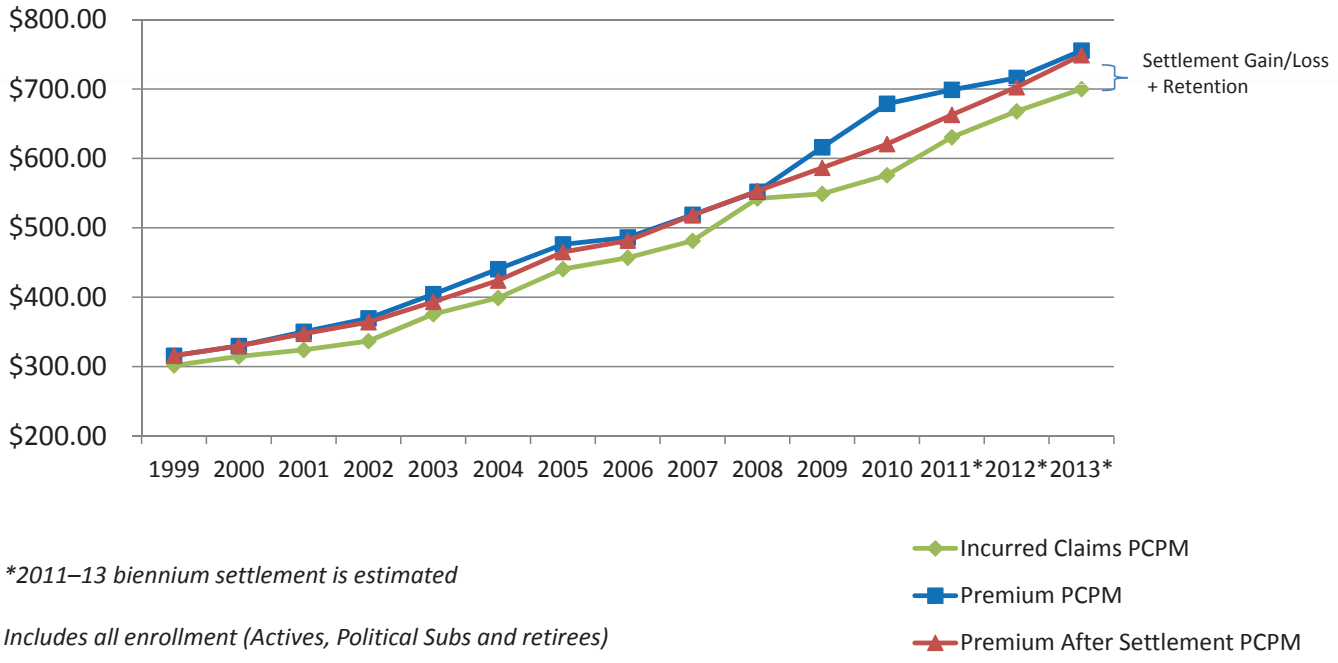


Restricted and/or Confidential

Claims Trend

9

- NDPERS average annual claims increase: 6.2%



**2011–13 biennium settlement is estimated*

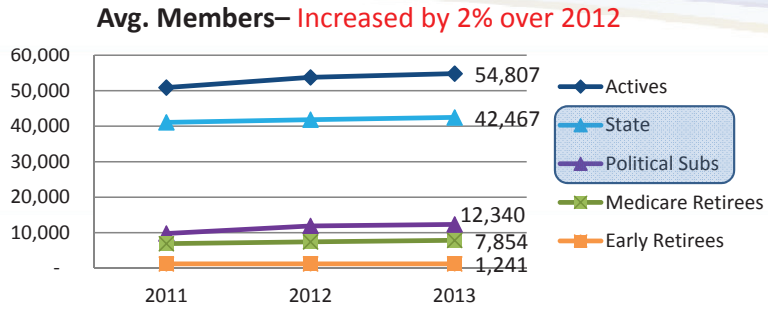
Includes all enrollment (Actives, Political Subs and retirees)

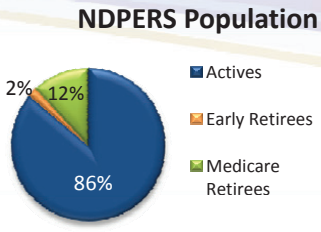
Restricted and/or Confidential

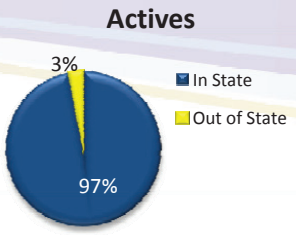
NDPERS SUMMARY

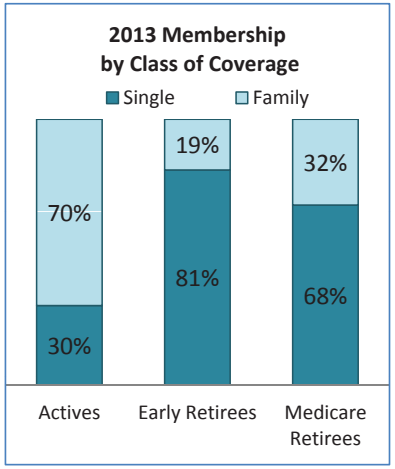
- Membership/Demographics
- Utilization
- High Dollar Cases
- Provider Discounts

Membership & Demographics

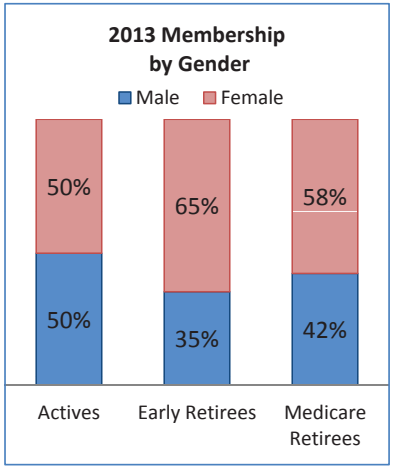








	Actives	E. Retirees	M. Retirees	BCBSND BoB
Average Age	34.4	59.7	74.2	32.7
Demographic Risk Score	1.12		3.26	1.05
Future Risk Score	1.21		4.11	1.05

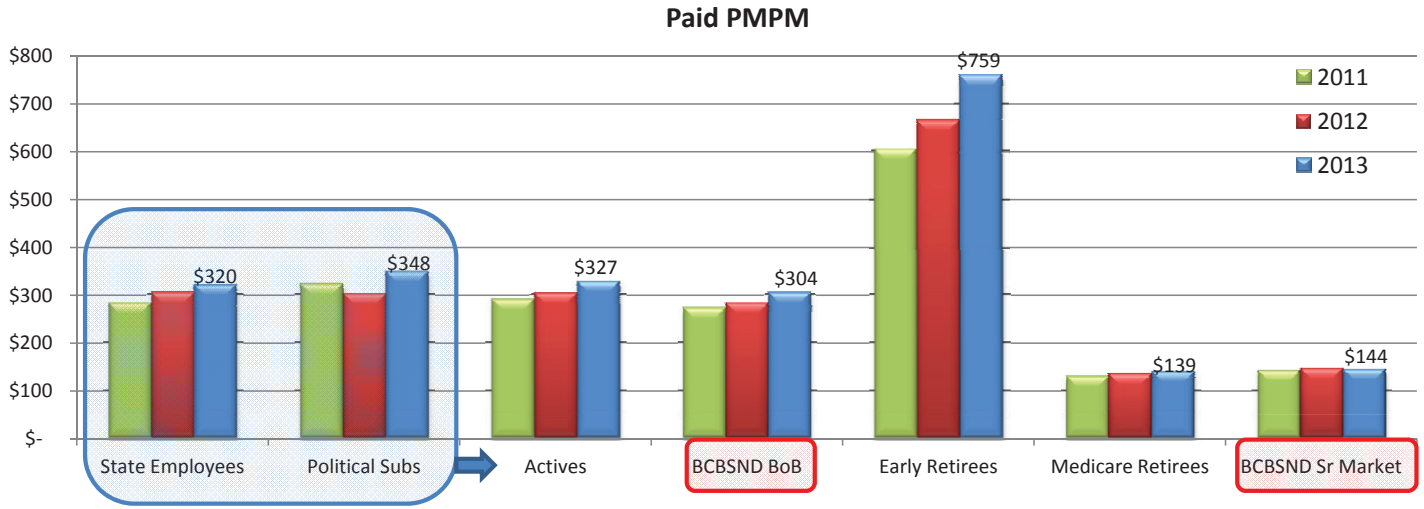


**Actives = includes State Employees & Political Subs*

Restricted and/or Confidential

Total Payments

	2011	2012	2013	% Change 2012-2013
Actives	$177,027,226	$195,785,987	$214,835,134	10%
Early Retirees	8,870,187	$9,856,378	$11,300,089	15%
Medicare Retirees	10,747,502	$11,861,408	$13,079,475	10%
TOTAL PAID	**$196,644,915**	**$217,503,773**	**$239,214,698**	**10%**



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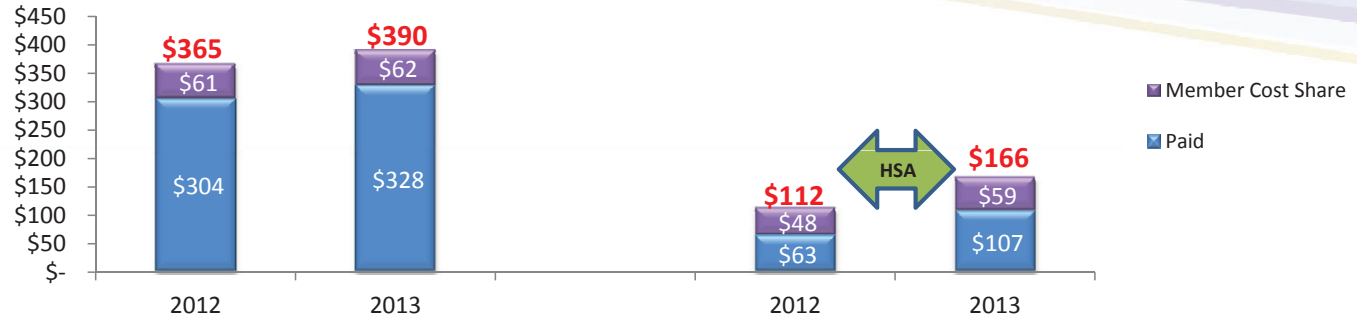
Actives/ Early Retirees

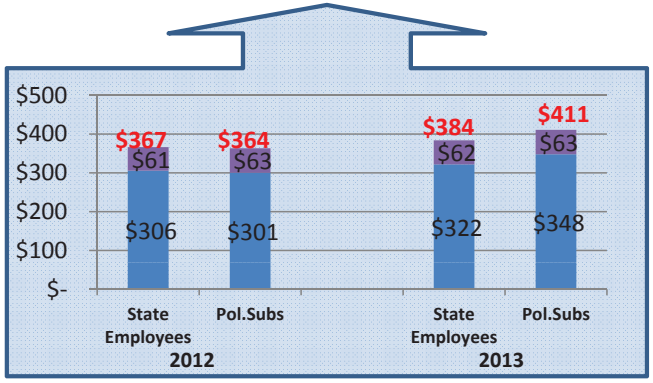
2012 Allowed Amount by Product

Members	53,545	54,539	218	274



PPO PLAN
State & Political Subs

HDHP Plan
State Employees only



- Both the PPO & HDHP Plans saw an increase to enrolled members
- HSA dollars contributed by NDPERS reduces the member's out of pocket but adds to the over-all costs for NDPERS

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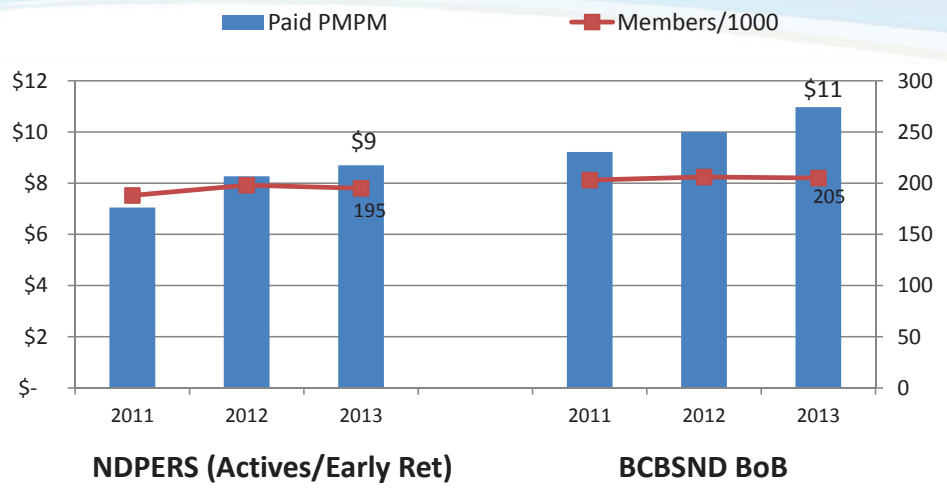
Outpatient ER Utilization

Consideration:

•Increase ER copay to $60

Current copay of $50 is lower than BCBSND standard copay - $75



• NDPERS PMPM is lower than BCBSND Plan average

• Small difference between ER copay ($50) and office visit copay ($25) may adversely affect utilization

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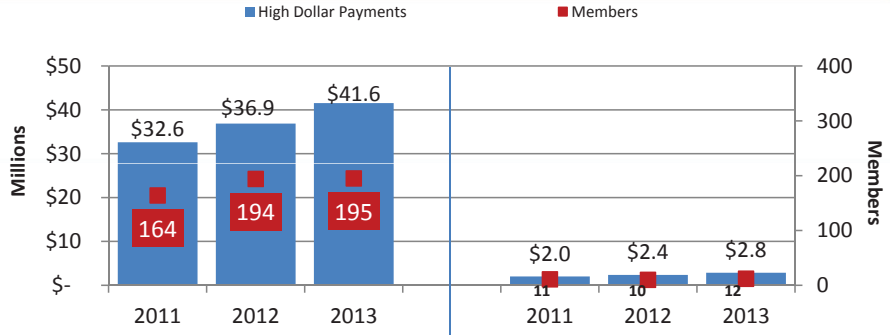
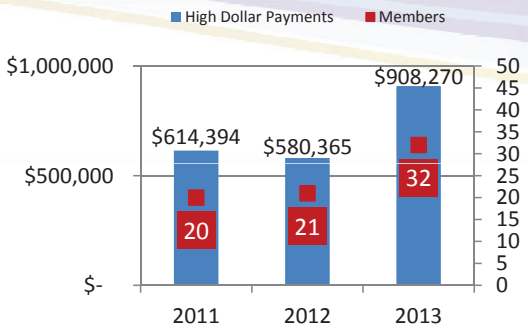
High Dollar Cases

Actives & Early Retirees
High Dollar Cases over $100,000/member



	ACTIVES			EARLY RETIREES		
Paid Range	2011	2012	2013	2011	2012	2013
Avg. / Case	$198,813	$190,129	$213,099	$181,916	$235,754	$237,265
$1,000,000+	1	2	1			
$300,000-999,999						
$300,000-999,999	18	16	30	1	2	3
$200,000-299,999	31	35	33	3	2	2
$100,000-$199,999	114	141	131	7	6	7
	164	194	195	11	10	12

Medicare Retirees
High Dollar Cases over $20,000/member



	MEDICARE RETIREES		
Paid Range	2011	2012	2013
Avg. / Case	$30,720	$27,636	$28,383
$50,000-$90,000	2	1	1
$40,000-$49,999	1	2	2
$30,000-$39,000	3	1	4
$20,000-$29000	14	17	25
	20	21	32

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2013 Provider Discounts

Performance Guarantees:

- BCBSND will maintain a PPO network: consisting of 92% or more of the in-state hospitals, MD's and DO's

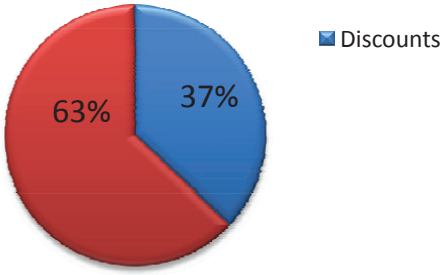
Currently above Goal - 99.7%

- **BCBSND guarantees NDPERS a minimum provider discount of 30% for Non-Medicare contracts.**

Currently above Goal – 52.5%

PPO Discounts	**$**	**4,725,857**
Other	**$**	**149,848,446**
Total In-State Discounts		**$154,574,303**
BlueCard Discounts	**$**	**18,281,877**
Total Discounts		**$172,856,180**

% Discounts off Total Charges*



**Medicare Retirees excluded*

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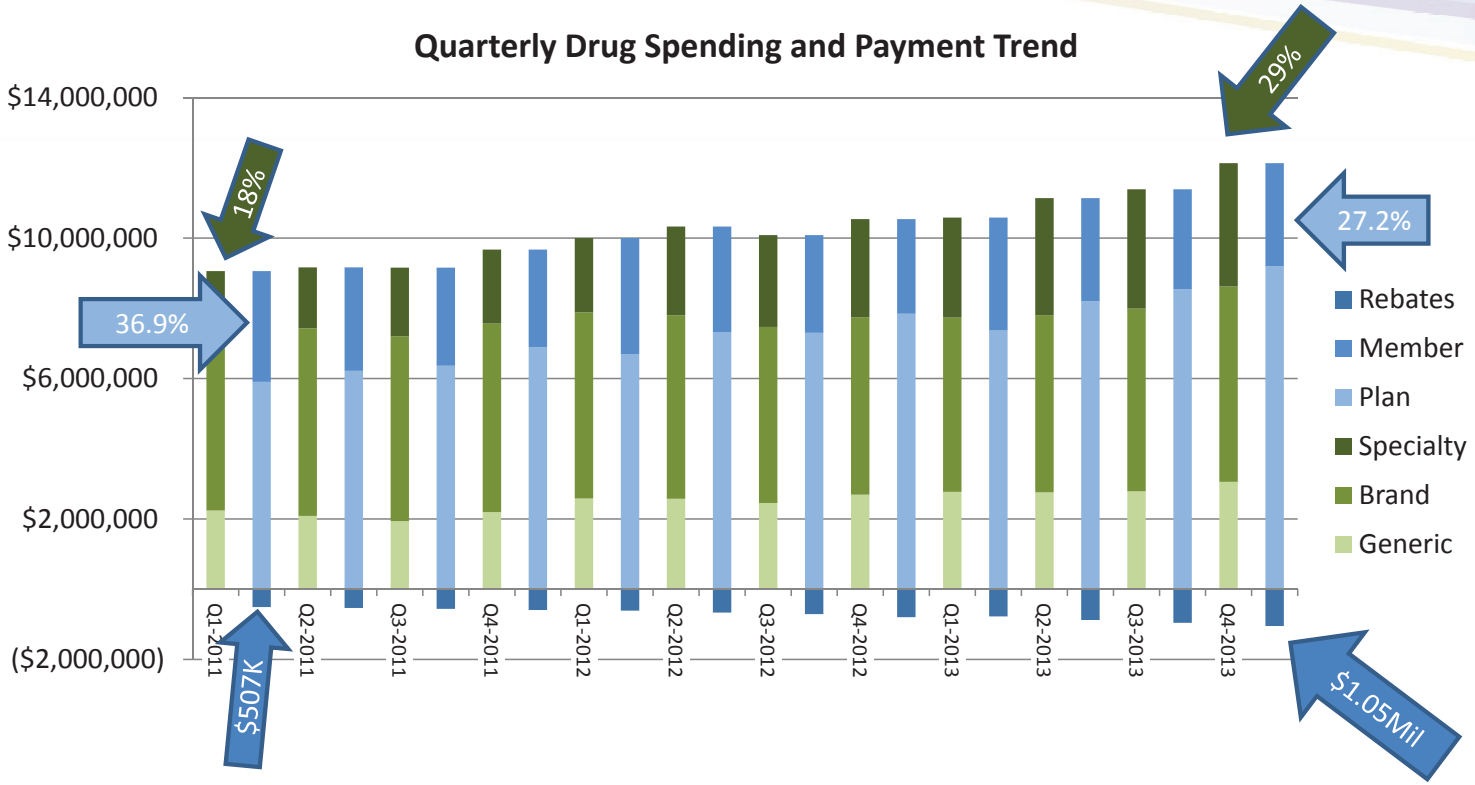
PHARMACY MANAGEMENT

Quarterly RX Spending

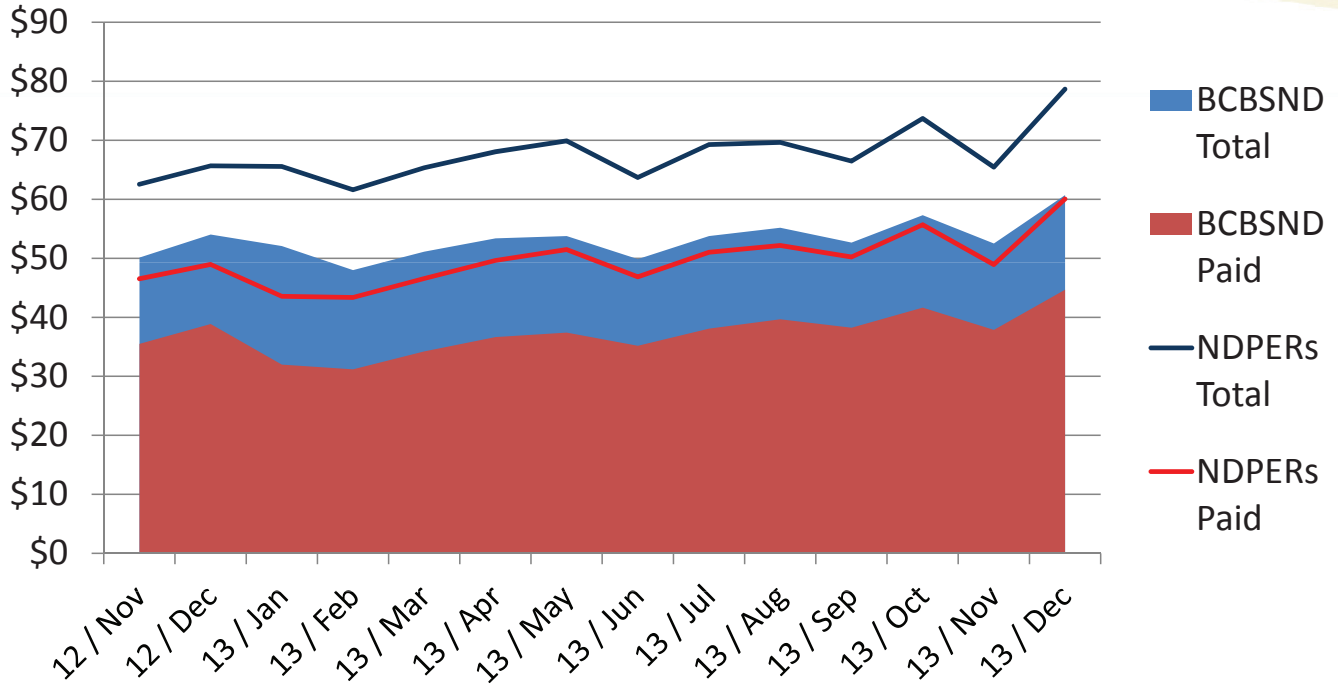
- Annual RX Spending Trends have been 5-9% quarter to quarter since 2010.
- Overall trend is driven by separate trends in generic, brand and specialty.



Monthly PMPM

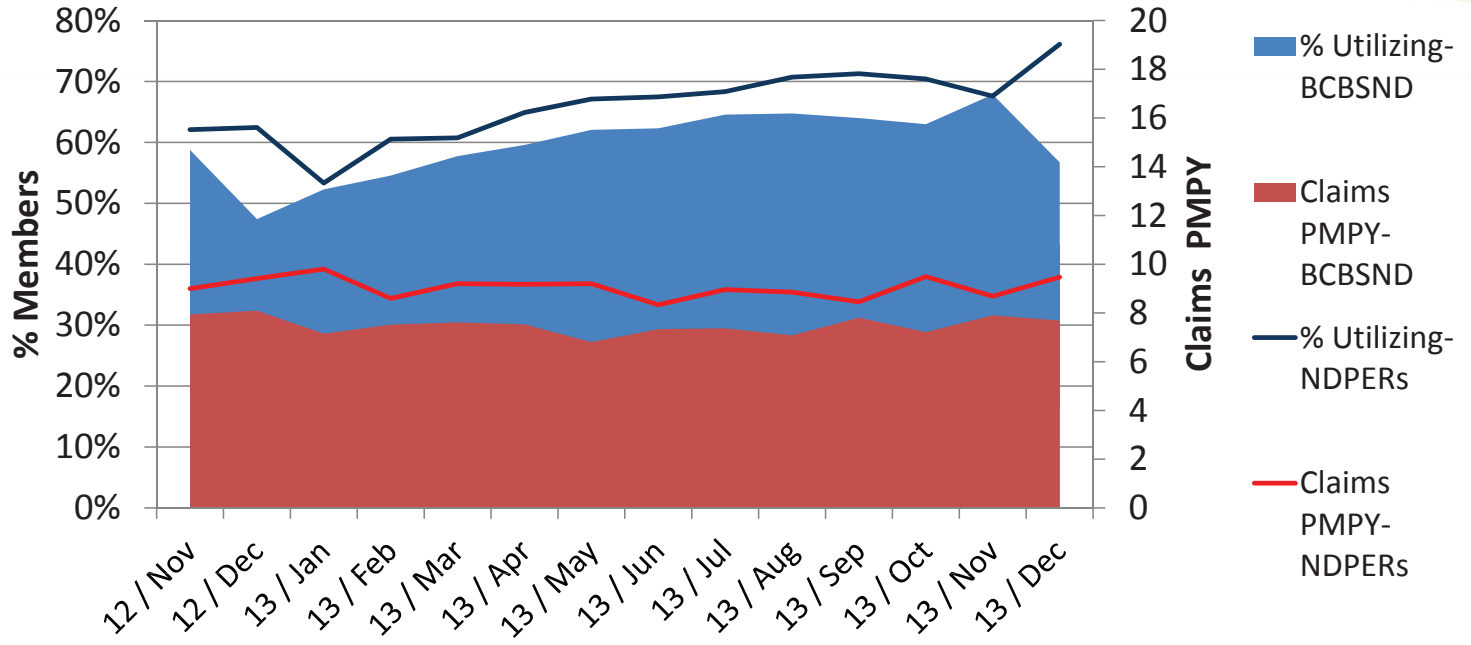
19

PMPM Plan and total paid amounts average $10-15 higher than monthly plan values



Monthly Utilization

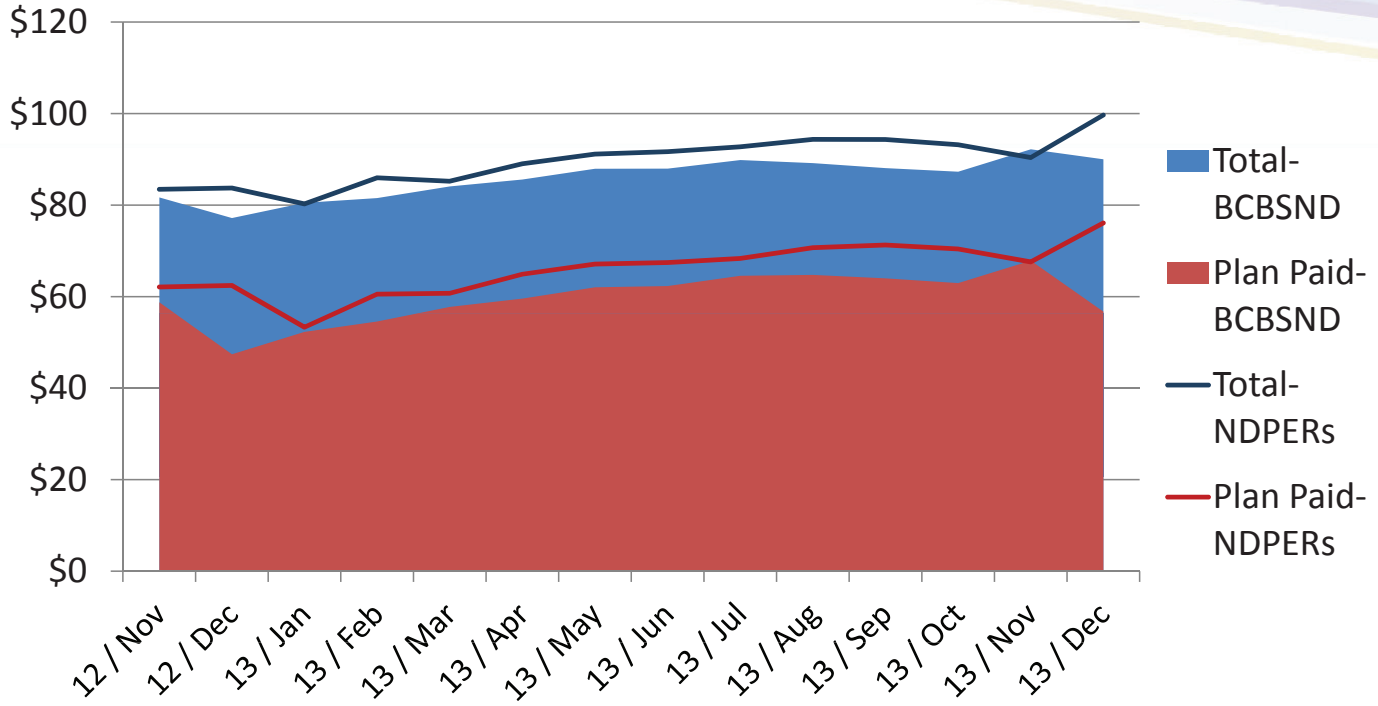
Utilization outpaces BCBSND average in both % of members and claims per member measures



Monthly Claims Costs

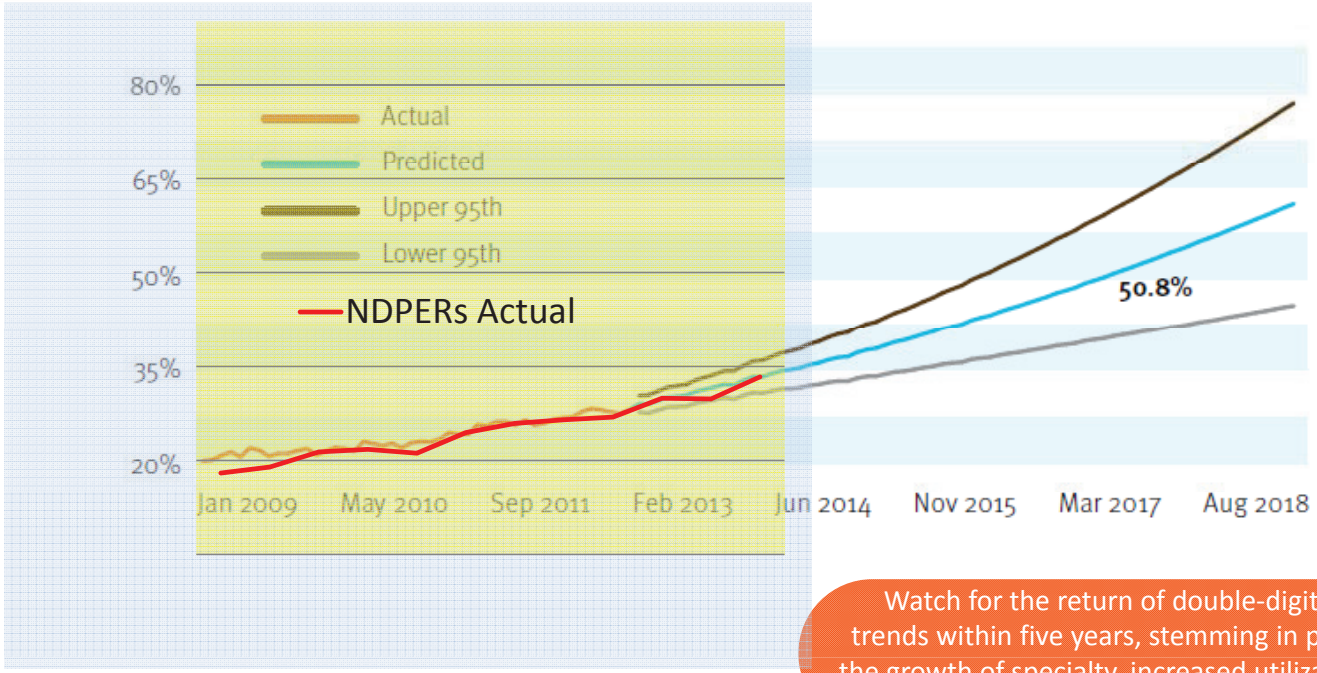
21

Average claims costs are higher than plan average



By 2018, more than 50 percent of all drug spend will be specialty

Fig. 10 **Specialty drug costs as a percentage of total drug spend**



Watch for the return of double-digit drug trends within five years, stemming in part from the growth of specialty, increased utilization and aging baby boomers

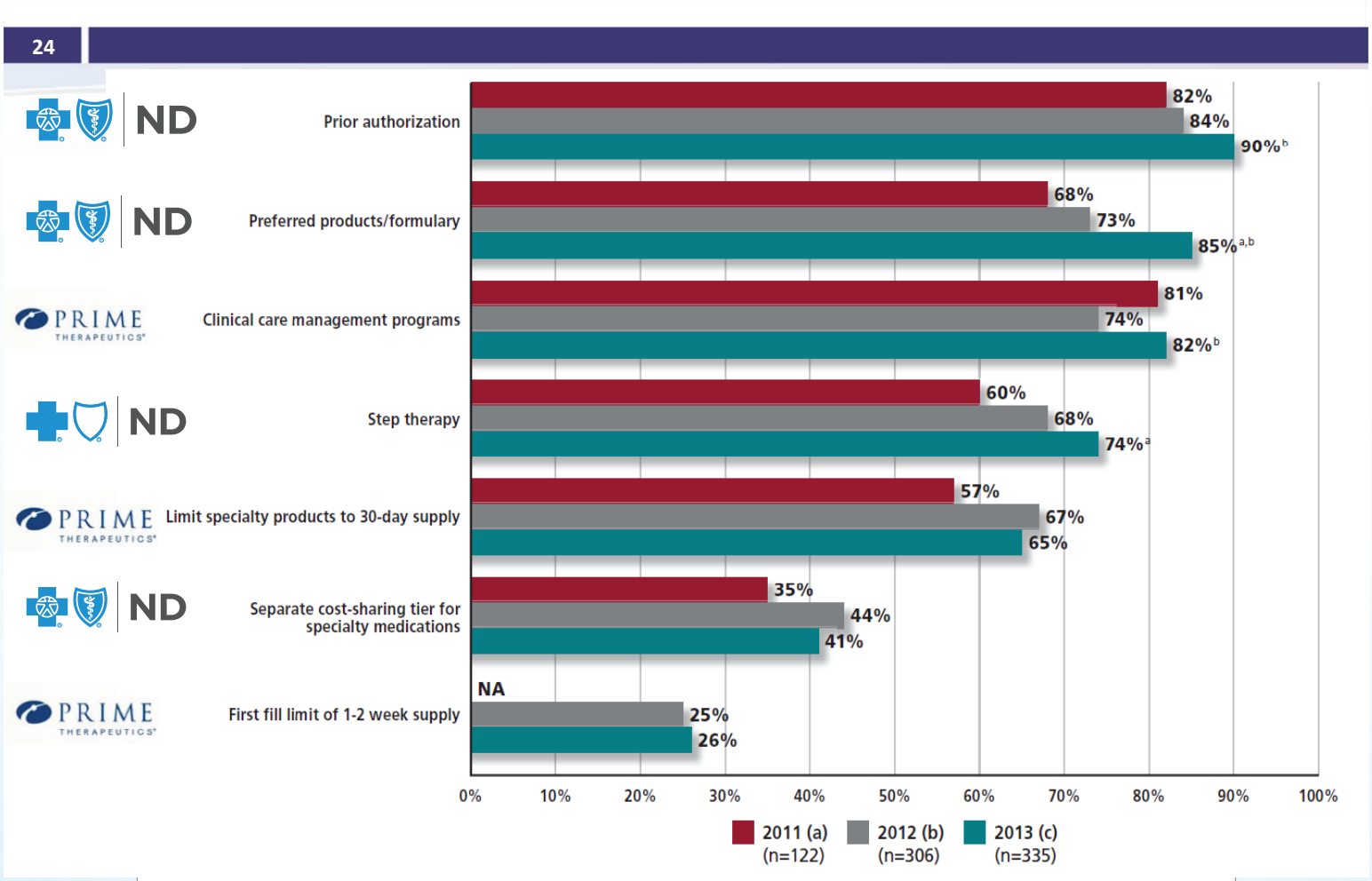
Research on National Trends

Web location available on request

Employer Surveys:

- EMD: 102 health Plans, 52% of commercial lives within geographical areas surveyed.
- Walgreens: 306 employers representing 17.6 million members, 62% in groups >5000.
- PBMI: 1st Published in 1995. 478 Plans, 22.5 million members.

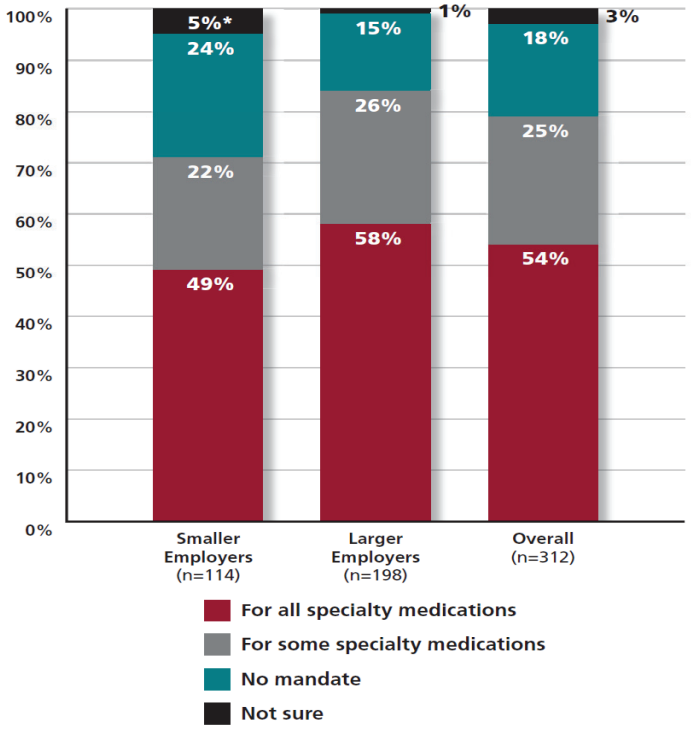
Specialty Drug Management includes patient, acquisition, handling, delivery and monitoring considerations.



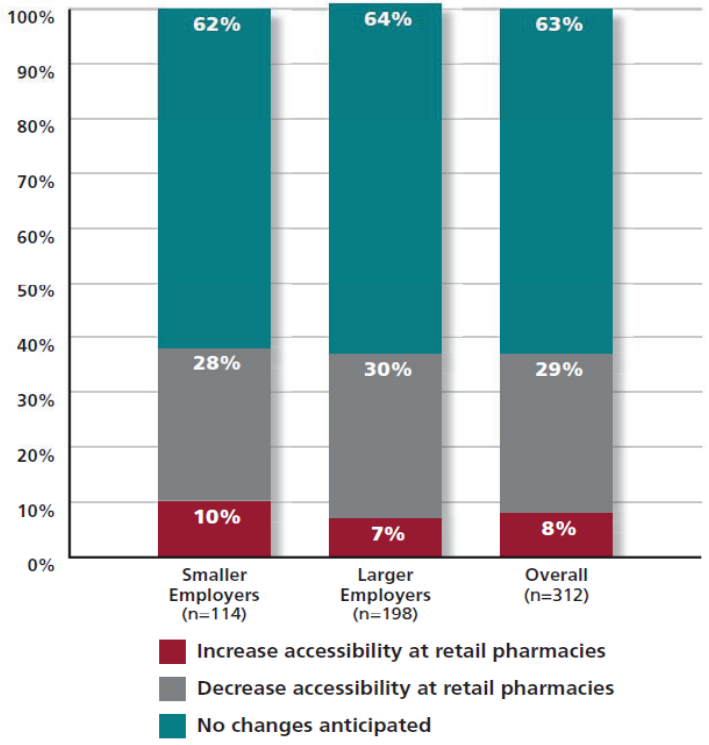
Managing Specialty (2014 specialty Drug Report)

25

Approximately 80% of employer groups use ***Channel Management***



Trends are to decrease access to retail channel



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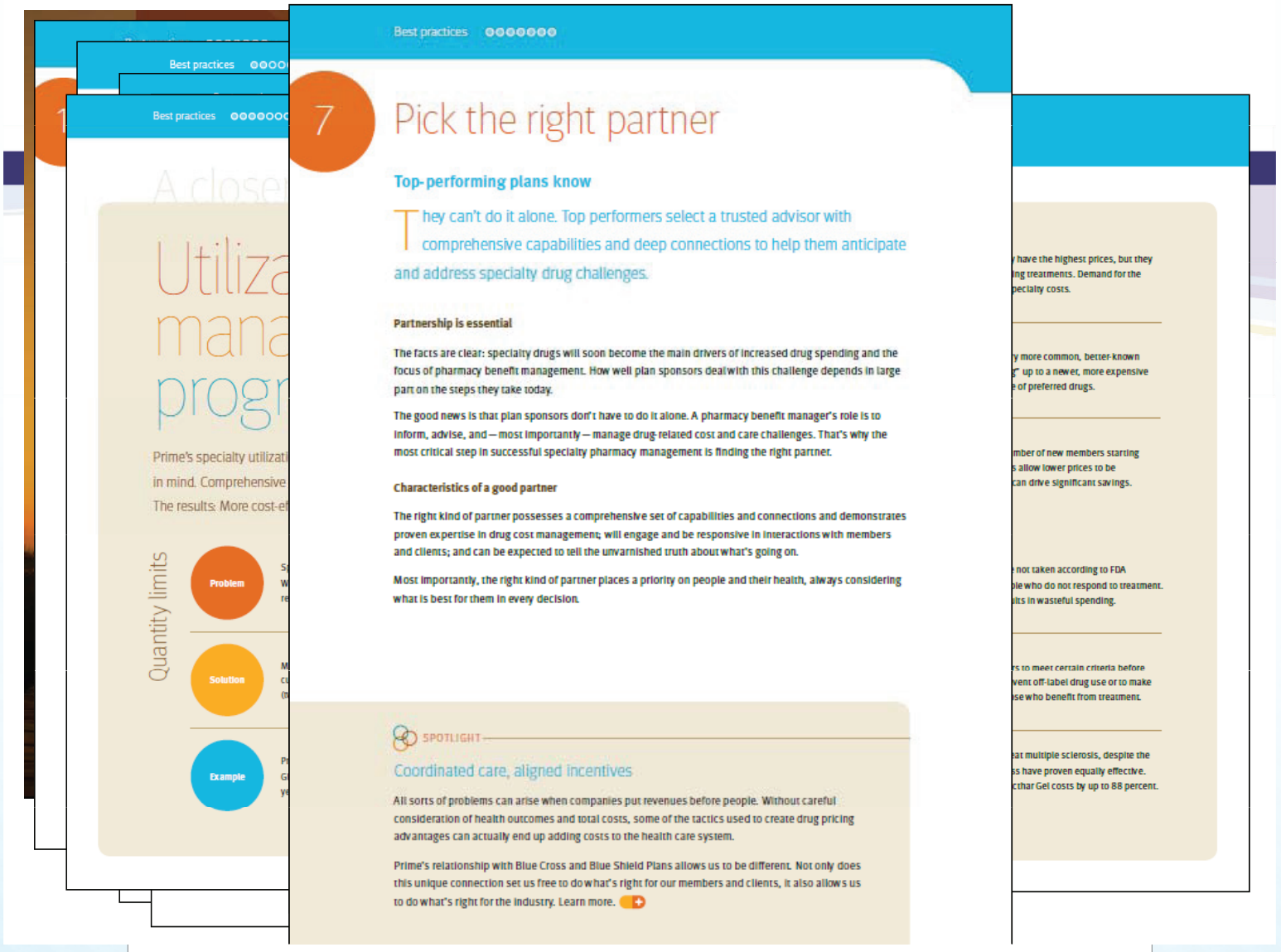
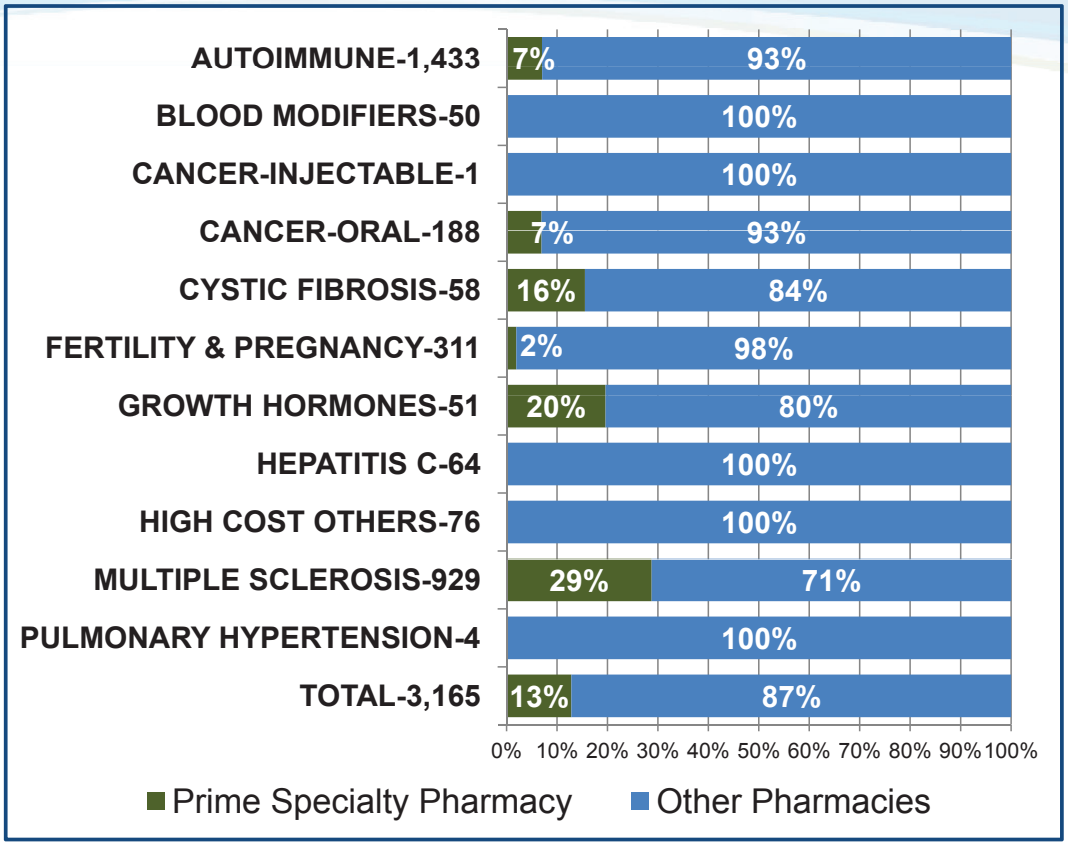

Best practices
7
Pick the right partner
Top-performing plans know
They can't do it alone. Top performers select a trusted advisor with comprehensive capabilities and deep connections to help them anticipate and address specialty drug challenges.
Partnership is essential
The facts are clear: specialty drugs will soon become the main drivers of increased drug spending and the focus of pharmacy benefit management. How well plan sponsors deal with this challenge depends in large part on the steps they take today.
The good news is that plan sponsors don't have to do it alone. A pharmacy benefit manager's role is to inform, advise, and — most importantly — manage drug-related cost and care challenges. That's why the most critical step in successful specialty pharmacy management is finding the right partner.
Characteristics of a good partner
The right kind of partner possesses a comprehensive set of capabilities and connections and demonstrates proven expertise in drug cost management; will engage and be responsive in interactions with members and clients; and can be expected to tell the unvarnished truth about what's going on.
Most importantly, the right kind of partner places a priority on people and their health, always considering what is best for them in every decision.
SPOTLIGHT
Coordinated care, aligned incentives
All sorts of problems can arise when companies put revenues before people. Without careful consideration of health outcomes and total costs, some of the tactics used to create drug pricing advantages can actually end up adding costs to the health care system.
Prime's relationship with Blue Cross and Blue Shield Plans allows us to be different. Not only does this unique connection set us free to do what's right for our members and clients, it also allows us to do what's right for the industry. Learn more.
Quantity limits
Problem
Solution
Example

Prime Specialty Campaign

27

PSP Campaign:

March 2013:
•284 targeted NDPERs Specialty Utilizers.
•33 new utilizers identified through close of 2013.
•PrimeSpecialty Pharmacy penetration remains low at 13% of claims.*



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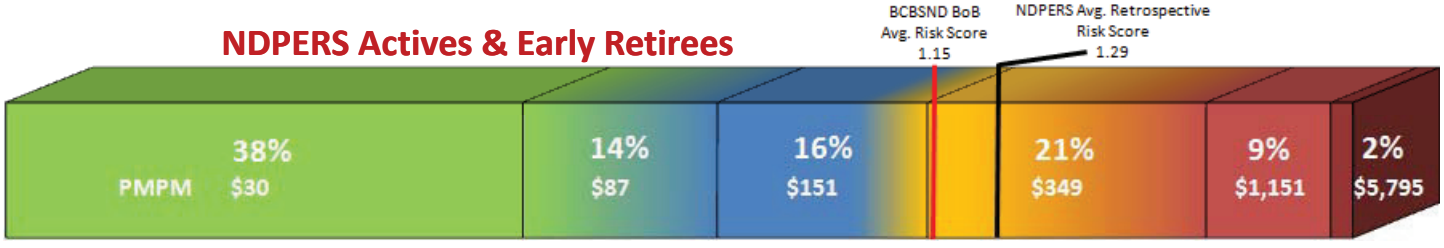
HEALTH MANAGEMENT

Well by Design

Healthy	At Risk	Chronic Conditions	High Cost Episodes
Stay Healthy	Reduce Lifestyle Risks	Manage Chronic Conditions	Manage High Cost Episodes
1. HealthyBlue 2. Health Club Credit	1. Member Education 2. Targeted Messaging	1. MediQHome 2. Guided Health 3. Specialty Rx 4. Accordant	1. Member Advocacy 2. Prenatal Plus 3. Case Management

NDPERS Actives & Early Retirees



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Health Improvement Programs

30

Member Advocacy Program

- Currently following 6 Cases

Tobacco Cessation Program

- 53 members enrolled with 53 start dates
- 35 members had claims totaling $9,295
- Biennium Program Expenditures through 12/31: $10,132

AIM Specialty Health

- April 1, 2014
- Educational
- BCBSND will require case review for selected outpatient non-emergency diagnostic imaging services. (CT, MRI, etc.)

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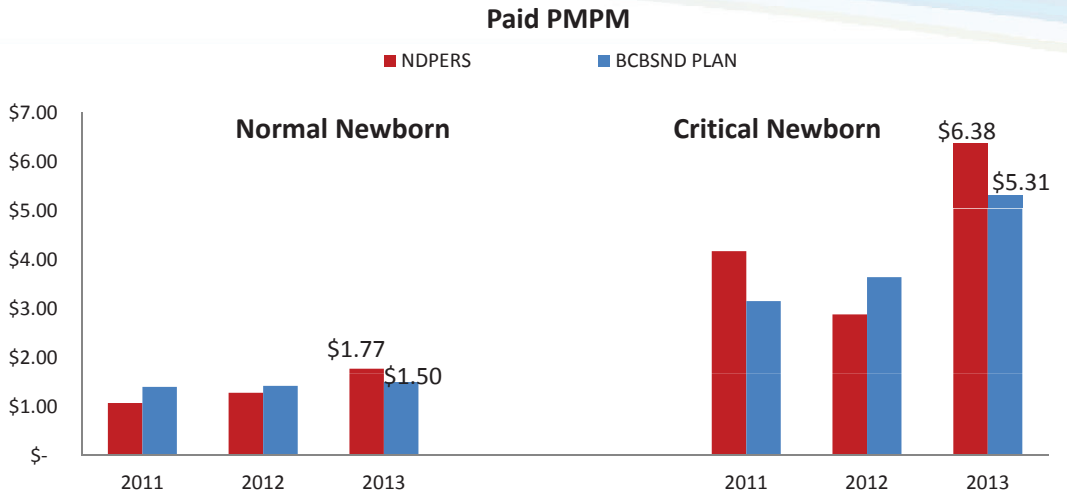
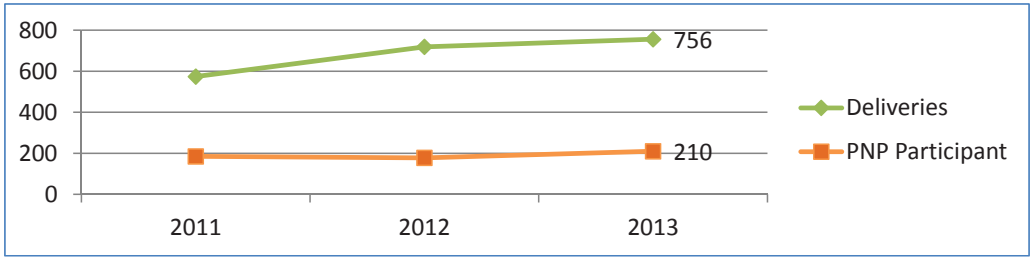
Newborns

Opportunity:

- Prenatal Plus Program
- Average of 28% participation over last 3 years





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Cancer Screening Measures

32

Performance Guarantees:

- Breast Cancer screening rates at 86%

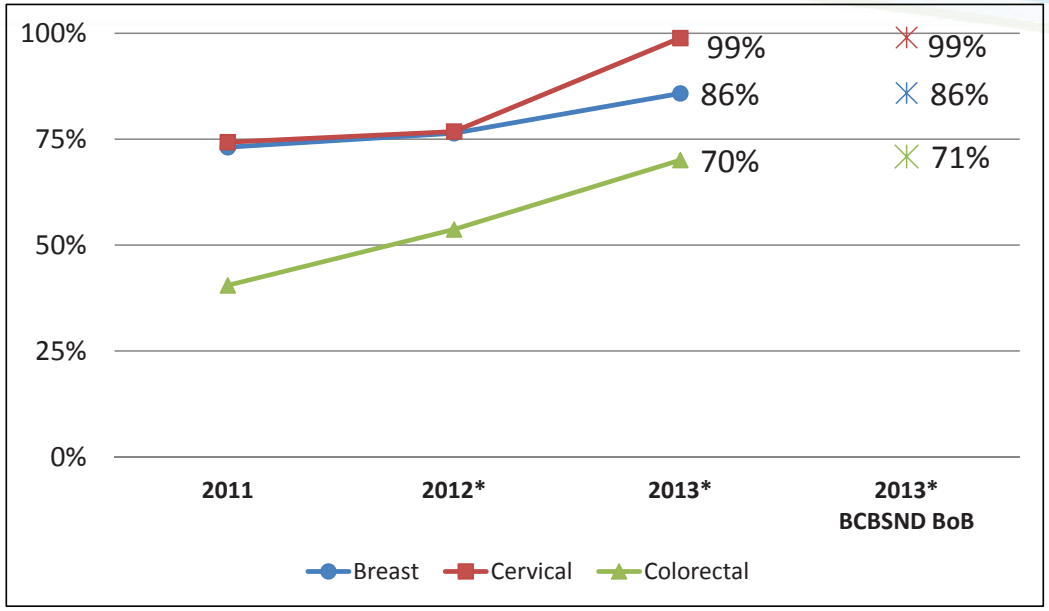
Goal = 80%

- Colorectal Cancer screening rates at 70%

Goal = 60%

- Cervical Cancer screening rates at 99%

Goal = 85%



**Supplemented with MediQHome*

Includes all NDPERS members who were active on NDPERS plan as of January 2014

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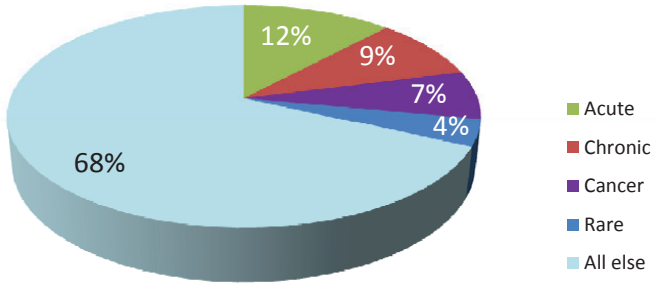
Top 10 Diseases

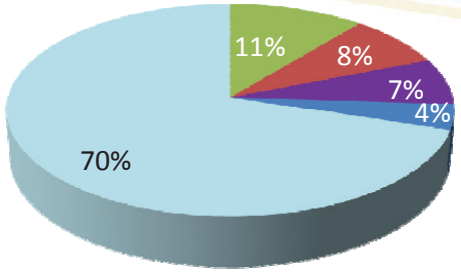
33

% of Total Spending by Disease Category

NDPERS – Actives/Early Retirees



BCBSND BoB



Rank	Disease	Disease Payment	Total Payment
1	Back and Spine, Pain or Condition	$7,909,341	$47,987,526
2	Osteoarthritis	$6,752,286	$18,570,630
3	Diabetes	$6,547,363	$34,165,186
4	Depression	$5,828,776	$54,695,307
5	Cancer, Breast	$5,071,348	$7,231,762
6	Multiple Sclerosis	$3,026,423	$4,568,316
7	CHF	$2,666,840	$7,051,448
8	Cancer, Leukemia	$2,605,960	$3,241,904
9	Hypertension	$2,379,092	$57,445,966
10	Rheumatoid Arthritis	$2,318,455	$5,042,309

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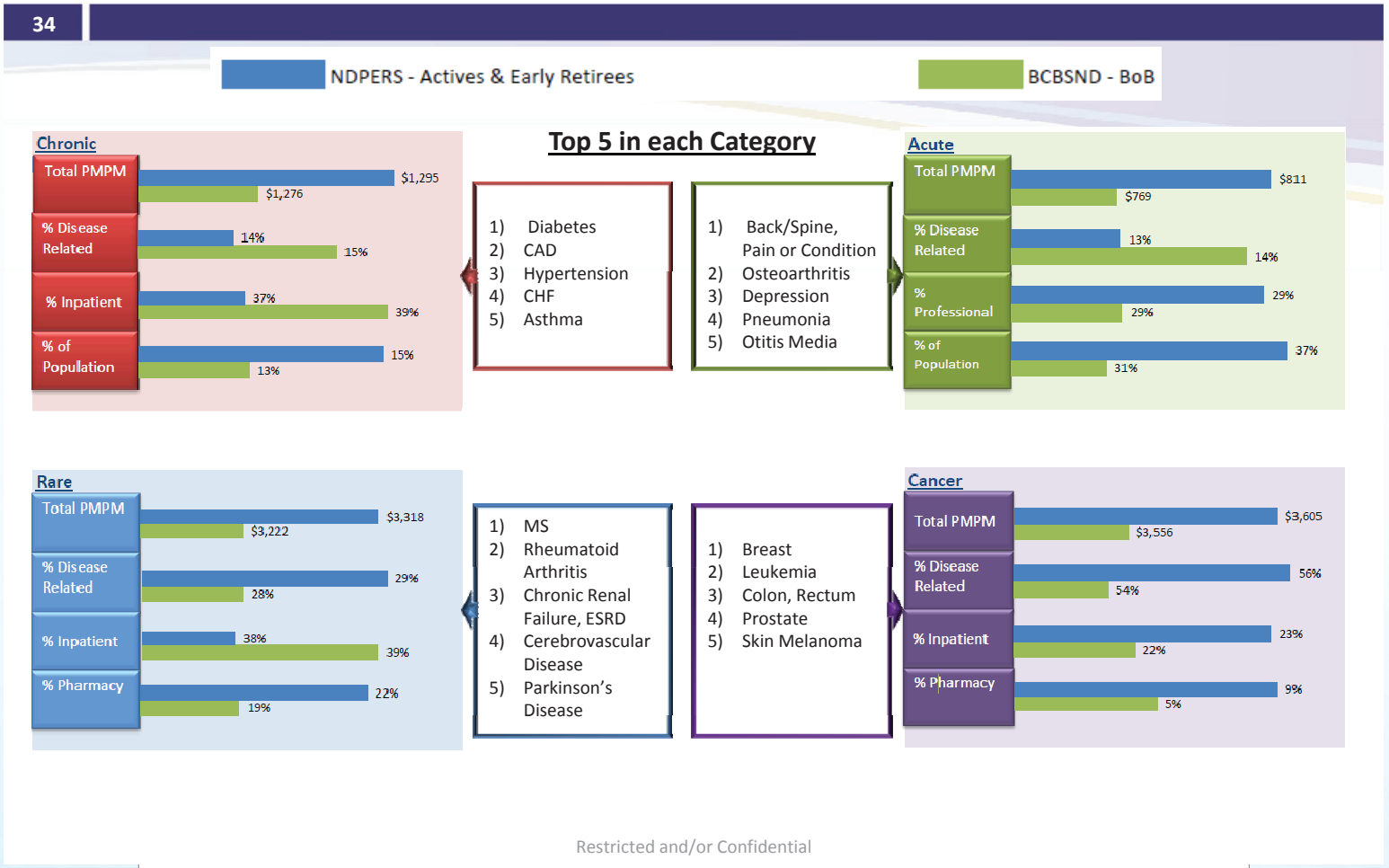
Cost Distribution



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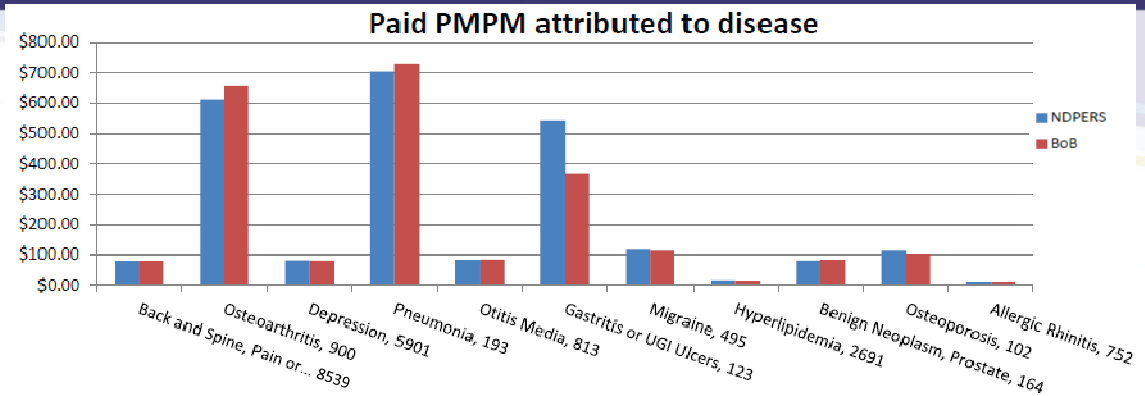
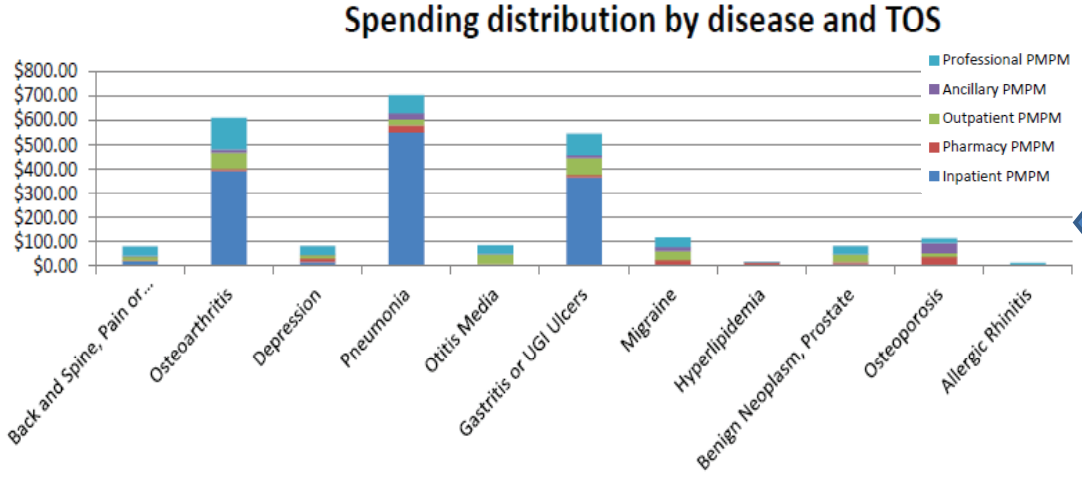
Top Acute Conditions

35





Inpatient & OP Spend
- ✓Pneumonia
- ✓Osteoarthritis
- ✓Gastritis/UGI Ulcers

Rx Spend
- ✓Osteoporosis
- ✓Pneumonia
- ✓Migraine

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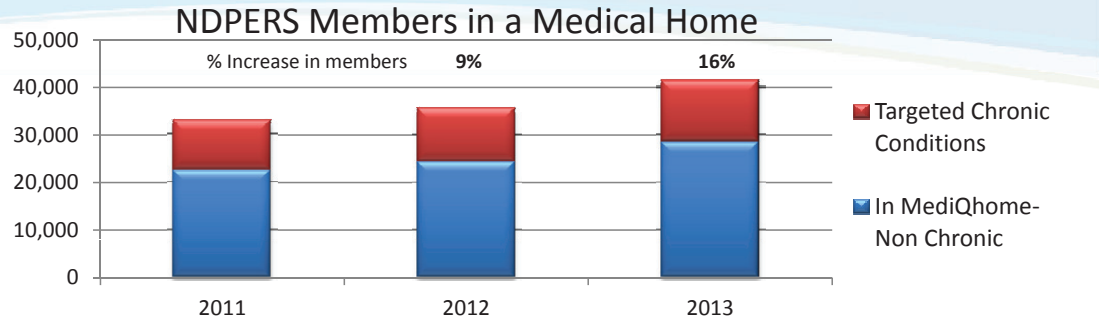
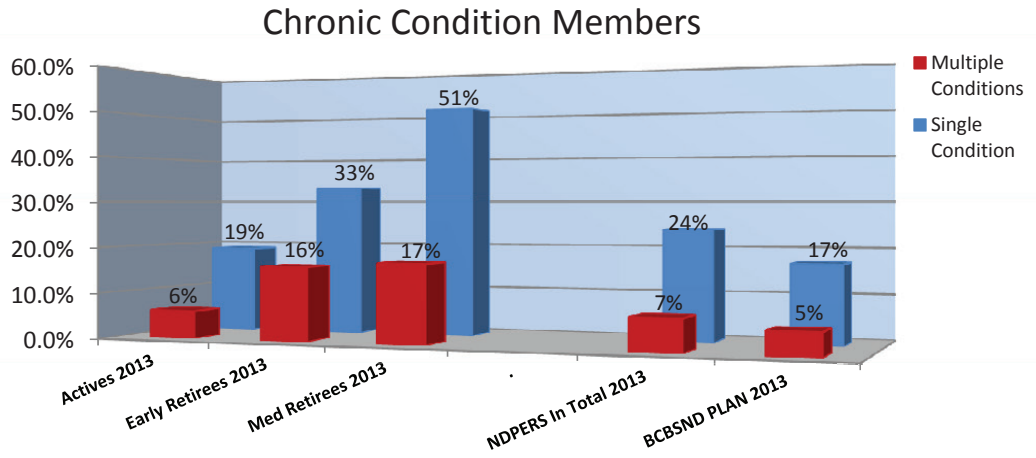
MediQHome

Performance Guarantee:

- 90% of NDPERS in state population identified in MQP

Goal = 80%





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MediQHome Findings

MediQHome Metrics	NDPERS	State Avg.	Target	% of Change
	2013	2013		From 2012
Hypertension Prevalence	23%	16%	<16%	-1%
% Overweight/Obese	73%	72%	<72%	-1%
Average BMI	29.5	29.2	<29.2	-0.1%
Optimal Diabetes Compliance	27%	24%	>24%	3%
Optimal CAD Compliance	37%	34%	>34%	6%
Hypertension Control	76%	75%	>75%	2%

Green - Exceeding Target Goal
Yellow - Exceeding State Baseline
Red - Below State Baseline

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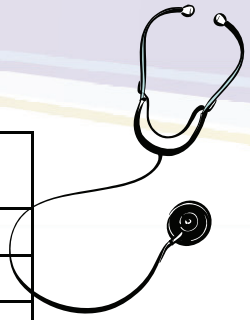
AccordantCare

Rare and complex condition disease management

- 17 conditions



❖ Chronic Inflammatory Demyelinating Polyradiculoneuropathy (CIDP)	❖ Systemic Lupus Erythematosus
❖ Crohn's	❖ Multiple Sclerosis
❖ Dermatomyositis	❖ Myasthenia Gravis
❖ Gaucher Disease	❖ Parkinson's Disease
❖ Hemophilia	❖ Polymyositis
❖ ALS (Lou Gehrig's)	❖ Rheumatoid Arthritis
❖ Seizure Disorder	❖ Scleroderma
❖ Sickle Cell Disease	❖ Cystic Fibrosis
❖ Ulcerative Colitis	

	Active	Early Retiree	Medicare Retiree
Participation Rate	57% (266 members)	69% (20 members)	63% (27 members)

BCBSND BoB participation rate - 58%

Restricted and/or Confidential

Health Club Credit & HealthyBlue

39

Performance Guarantees:

Health Club Credit
- Members receiving credit will increase 10% - 2013 compared to 2014

Baseline: 1,979
Goal =2,177

HealthyBlue
- Incentives paid will increase by 10% over 2013 rate

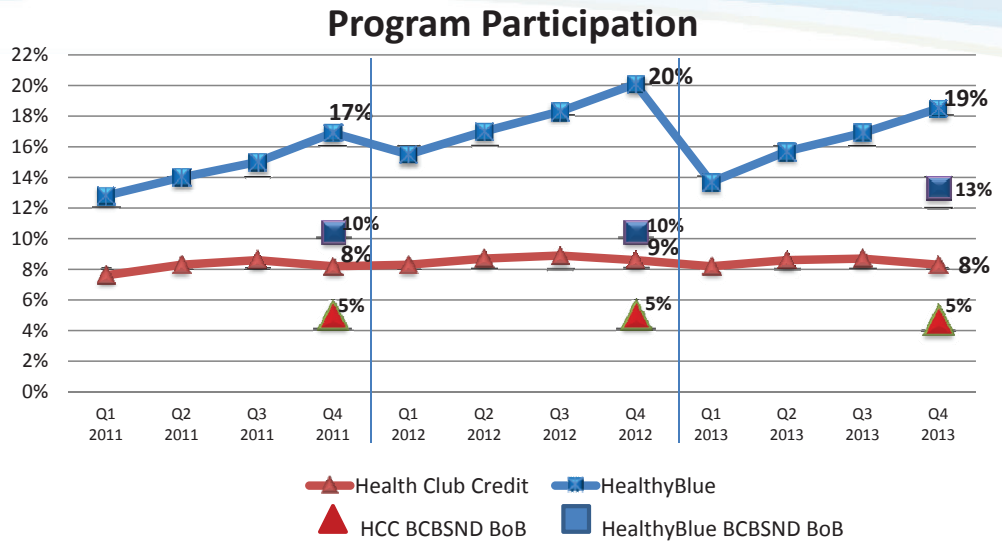
Baseline: $528,907
Goal = $581,798

- HRA Completions by 12/31/2014

Goal = 17%

- HRA score: 5% point increase by 12/31/2014

Baseline: 52
Goal = 55



Health Club Credit	2013
Credits Paid	$492,294
Members receiving credit	1,979

HealthyBlue	2013
Redemptions	$528,907
HRA Completions	8,087
HRA Score	52

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HealthyBlue Program Results

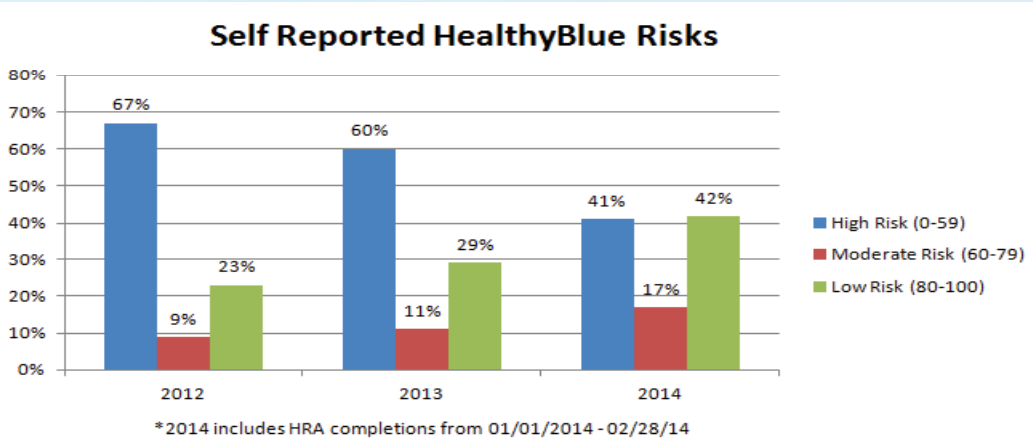
40

Key Points

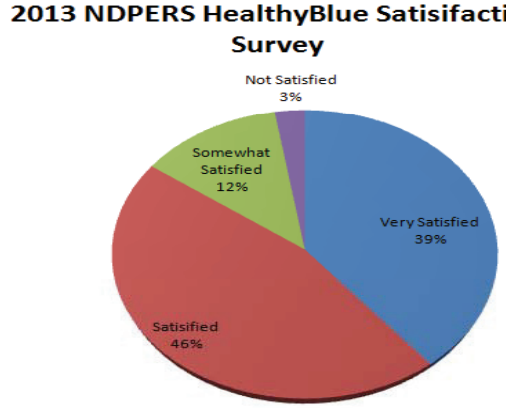
- 43,682 eligible members
- 97% of users are satisfied with HealthyBlue

"I joined HealthyBlue because of the benefits of improving my health." –NDPERS Member

"The HealthyBlue website has reinvigorated our wellness program." -NDPERS Wellness Coordinator

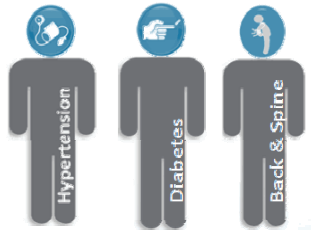


*2014 includes HRA completions from 01/01/2014 - 02/28/14



OPPORTUNITIES

2014 Focus Areas



- **Excite**
  - Promote mobile app functionality
  - Promote devices
  - Wellness Star of the Month
- **Engage**
  - Lt. Governor's Award
  - National Walk @ Lunch Day
- **Empower**
  - Targeted Messaging
  - Guided Tutorials

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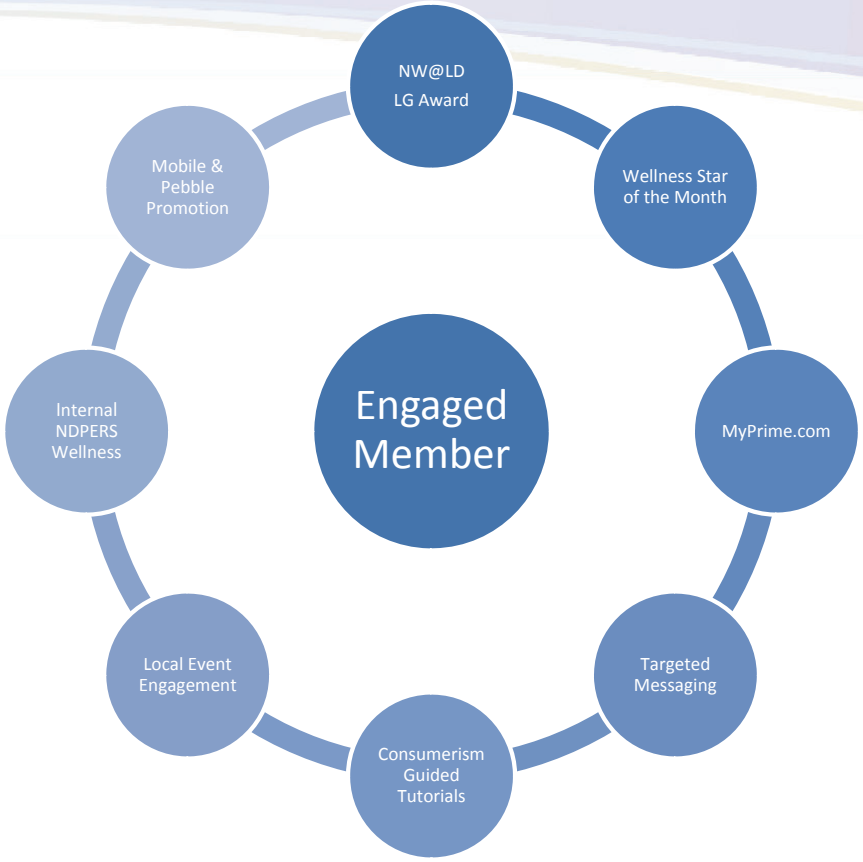
2014 Focus Areas



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Performance Standards and Guarantees

44

Measure	Goal	12/31/2013
Cost Management (measurement period : by 12-31-14)		
HRA Completions	17%	19%
HRA Score	5% point increase in the 2013 NDPERS group aggregate HRA wellness score 55	52
HealthyBlue - incentives paid	10% increase over 2013 incentives paid $581,798	$528,907
Health Club Credit - members receiving credit	10% increase over 2013 members receiving credit 2,177	1,979
Health Outcomes:		
Members enrolled in a Medical Home	80%	90%
Breast Cancer Screening Rates*	80%	86%
Cervical Cancer Screening Rates*	85%	99%
Colorectal Cancer Screening Rates*	60%	70%
Operational Performance:		
Claims Financial Accuracy	99%	98%
Payment Incident Accuracy	97%	99%
Claim Timeliness	99%	99%
Average Speed of Answer (in seconds)	30 seconds or less	25
Call Abandonment Rate	5% or less	2%
Provider Network Management:		
NDPERS PPO network	92% (or more) participation	99.6%
Provider Discount for non-Medicare contracts	30% or more	53%

**Cancer screening rates are a culmination of MediQHome and Optum claims data*

Green – meeting goal
Red – below goal
Purple – neither above nor below

Restricted and/or Confidential

Future Considerations

- Telehealth
- Gamification
- Specialty Pharmacy
- Cost sharing adjustments allowed within a Grandfathered plan
  - Office Visit Copay
  - Emergency Room Copay
  - Rx Copay & Coinsurance Maximum

Restricted and/or Confidential

QUESTIONS?

Attachment 8

Attachment 8

Sample of Health Intelligenc Employer Profile Report

Employer Profile

Report Timeframe: 01/01/2012 - 03/31/2014

Employer Name: SAMPLE GROUP

Average Number of Members: 3,943.3

Average Age: 29.2

Employer ID: 019301

Relative Health Risk: 0.99

Product: PREFERRED BLUE PPO

Member Category 1: ALL

Member Category 2: ALL

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Employer Name: SAMPLE GROUP

Product: PREFERRED BLUE PPO

Current Incurred Period: 01/01/2013 - 12/31/2013, Paid Through 03/31/2014

Prior Incurred Period: 01/01/2012 - 12/31/2012, Paid Through 03/31/2014

Executive Summary

Key performance metrics

		Employer Group			Benchmark		
		Current Period	Prior Period	% Change	Current Period	Prior Period	% Change
Demographics	Average Number of Members	3,943.3	3,540.5	11.4%	-	-	0.0%
	Average Members per Contract	2.4	2.4	-0.4%	-	-	0.0%
	Average Age	29.2	29.7	-1.7%	-	-	0.0%
	Relative Health Risk	0.99	1.02	-3.1%	0.96	0.99	-2.2%
	In-Network Utilization (% cost)	100.0%	100.0%	0.0%	100.0%	100.0%	0.0%
Encounters per 1,000 Members	Inpatient Admits	68.98	75.97	-9.2%	64.13	65.90	-2.7%
	Days per 1,000	255.36	357.00	-28.5%	272.92	274.40	-0.5%
	Average LOS	3.70	4.70	-21.2%	4.26	4.16	2.2%
	Outpatient Services/Visits	1,406	1,417	-0.8%	1,570	1,626	-3.5%
	Professional Services/Visits	9,955	10,249	-2.9%	9,865	9,877	-0.1%
	Ancillary Services	1,714	1,748	-1.9%	1,528	1,570	-2.6%
	Pharmacy Prescriptions	7,092	7,415	-4.4%	7,003	7,224	-3.1%
Cost per Encounter	Inpatient	$11,280	$12,185	-7.4%	$13,081	$12,693	3.1%
	Outpatient	$526	$536	-2.0%	$418	$402	4.0%
	Professional	$98	$96	1.6%	$103	$99	4.5%
	Ancillary	$140	$156	-9.9%	$148	$137	7.7%
	Pharmacy	$48	$45	6.9%	$54	$49	10.7%
Employee Cost Sharing PMPM	Total Medical	$40.53	$40.53	0.0%	$42.87	$42.68	0.4%
	Deductible	$11.64	$11.90	-2.2%	$18.70	$18.04	3.7%
	Coinsurance	$19.23	$18.72	2.7%	$16.09	$16.43	-2.0%
	Copayment	$9.67	$9.91	-2.4%	$8.08	$8.22	-1.7%
	Total Pharmacy	$10.44	$11.06	-5.6%	$11.47	$12.10	-5.2%
High Cost Cases (>$25,000 in Claim Costs)	Prevalence - % of All Members	1.9%	2.1%	-12.1%	-	-	0.0%
	Cost PMPM	$5,672.59	$6,104.77	-7.1%	-	-	0.0%
Pharmacy Use Patterns	Generic Utilization	80.4%	77.8%	3.4%	81.0%	77.9%	4.0%
	Formulary Utilization	88.5%	88.6%	-0.1%	88.0%	88.1%	-0.1%
	Mail Order Utilization	0.1%	0.0%	306.8%	0.0%	0.0%	0.0%

Employer Name: SAMPLE GROUP

Product: PREFERRED BLUE PPO

Current Incurred Period: 01/01/2013 - 12/31/2013, Paid Through 03/31/2014

Prior Incurred Period: 01/01/2012 - 12/31/2012, Paid Through 03/31/2014

Account Summary

Distribution of cost by service category

	Employer Group					Benchmark				
	Cost Distribution		Cost PMPM			Cost Distribution		Cost PMPM		
Service Category	Current Period	Prior Period	Current Period	Prior Period	% Change	Current Period	Prior Period	Current Period	Prior Period	% Change
Ancillary (excluding Home Health/Hospice Visits)	7.6%	8.1%	$19.51	$22.25	-12.3%	7.0%	6.9%	$18.30	$17.46	4.8%
Home Health/Hospice Visits	0.2%	0.2%	$0.53	$0.42	25.0%	0.2%	0.2%	$0.49	$0.46	6.1%
Facility Inpatient	25.3%	28.2%	$64.84	$77.15	-16.0%	26.9%	27.6%	$69.91	$69.71	0.3%
Emergency Room	1.8%	1.5%	$4.54	$4.18	8.7%	1.3%	1.3%	$3.45	$3.35	3.1%
Facility Outpatient (excluding ER)	22.3%	21.6%	$57.02	$59.14	-3.6%	19.7%	20.2%	$51.24	$51.14	0.2%
Pharmacy	11.2%	10.2%	$28.65	$28.02	2.3%	12.2%	11.6%	$31.57	$29.43	7.3%
Laboratory	1.6%	1.5%	$4.18	$4.08	2.4%	1.7%	1.7%	$4.30	$4.33	-0.9%
Mental Health	0.2%	0.9%	$0.57	$2.56	-77.9%	0.2%	1.4%	$0.65	$3.45	-81.2%
Office Visits	6.6%	6.1%	$17.02	$16.77	1.5%	6.9%	6.7%	$17.91	$16.94	5.7%
Professional Services (excluding Laboratory, Mental Health, Office Visits & Radiology)	20.5%	18.2%	$52.49	$49.82	5.4%	20.9%	19.3%	$54.31	$48.73	11.4%
Radiology	2.7%	3.3%	$6.92	$9.05	-23.5%	2.9%	3.1%	$7.54	$7.71	-2.3%
Total	**100.0%**	**100.0%**	**$256.28**	**$273.44**	**-6.3%**	**100.0%**	**100.0%**	**$259.67**	**$252.72**	**2.7%**
Member Months	**47,320**	**42,486**								
Total Costs	**$12,126,954**	**$11,617,296**								

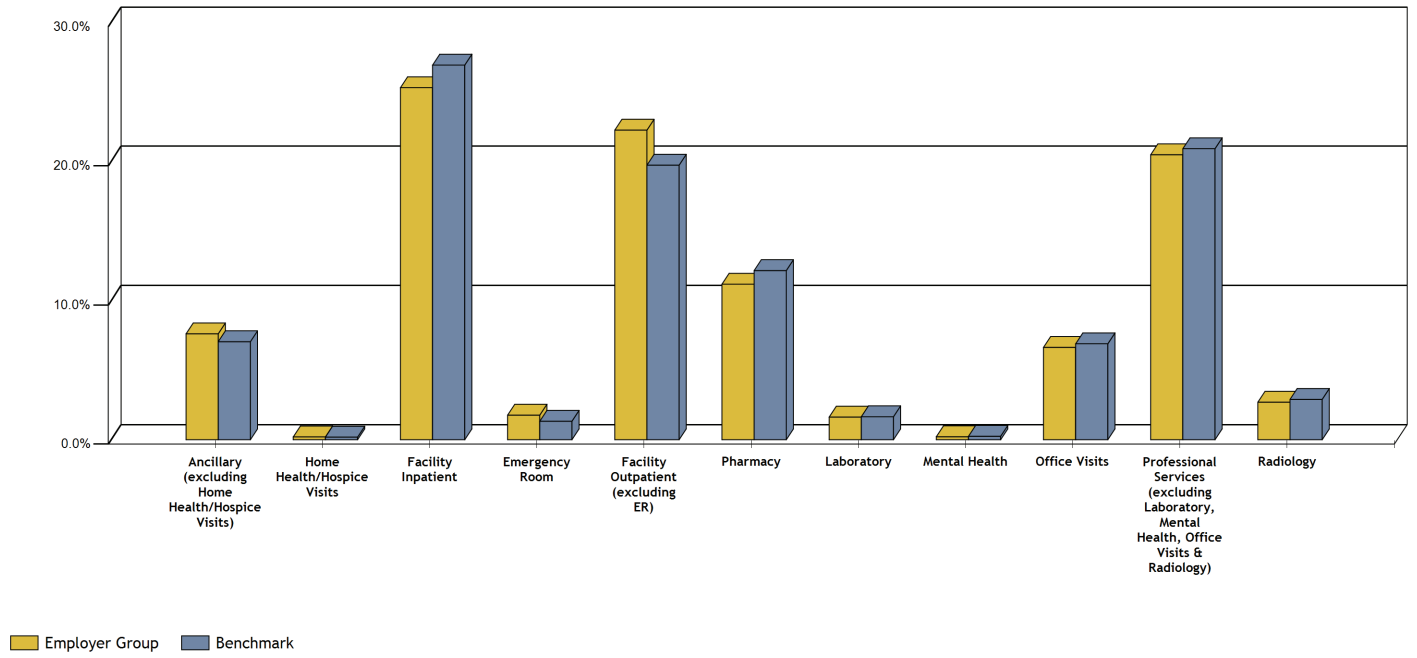
Employer Name: SAMPLE GROUP

Product: PREFERRED BLUE PPO

Current Incurred Period: 01/01/2013 - 12/31/2013, Paid Through 03/31/2014

Prior Incurred Period: 01/01/2012 - 12/31/2012, Paid Through 03/31/2014

Cost Distribution - Current Period
Employer Group versus Benchmark



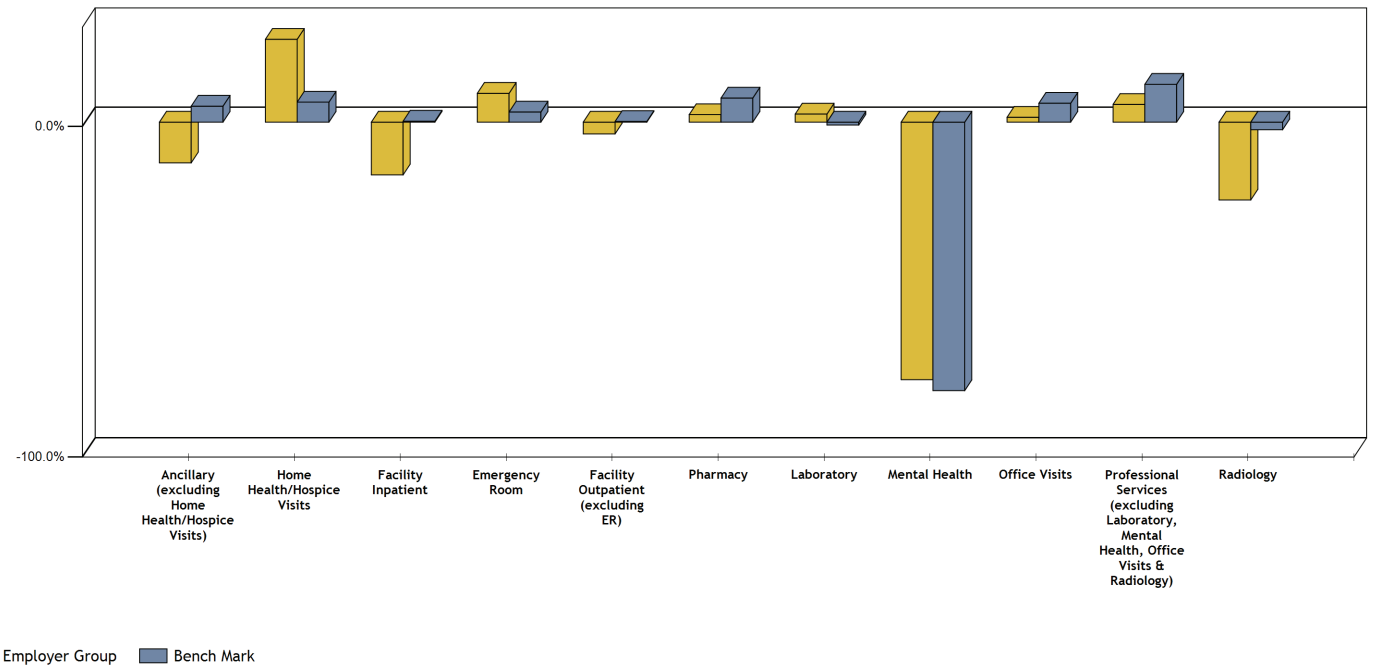
Employer Name: SAMPLE GROUP

Product: PREFERRED BLUE PPO

Current Incurred Period: 01/01/2013 - 12/31/2013, Paid Through 03/31/2014

Prior Incurred Period: 01/01/2012 - 12/31/2012, Paid Through 03/31/2014

PMPM % Change
Employer Group versus Benchmark



Employer Name: SAMPLE GROUP

Product: PREFERRED BLUE PPO

Current Incurred Period: 01/01/2013 - 12/31/2013, Paid Through 03/31/2014

Prior Incurred Period: 01/01/2012 - 12/31/2012, Paid Through 03/31/2014

Membership Trend by Contract Type

Average number of contracts by quarter by contract type

Contract Type	Q1	Q2	Q3	Q4	Q5	Q6	Q7	Q8	Average Current Period	Average Prior Period	% Change
FAMILY	647.7	660.7	684.3	691.7	710.3	726.7	739.3	747.0	730.8	671.1	8.9%
SINGLE	580.3	591.7	617.7	638.3	664.7	685.7	718.7	754.7	705.9	607.0	16.3%
SPD	166.7	176.7	173.3	177.7	176.3	180.3	187.0	204.3	187.0	173.6	7.7%
Total Contracts	1,394.7	1,429.0	1,475.3	1,507.7	1,551.3	1,592.7	1,645.0	1,706.0	1,623.8	1,451.7	11.9%
Average Members	3,400.0	3,490.0	3,593.7	3,678.3	3,802.3	3,891.7	3,990.3	4,089.0	3,943.3	3,540.5	11.4%
Average Members per Contract	2.44	2.44	2.44	2.44	2.45	2.44	2.43	2.40	2.43	2.44	-0.4%

Employer Name: SAMPLE GROUP

Product: PREFERRED BLUE PPO

Current Incurred Period: 01/01/2013 - 12/31/2013, Paid Through 03/31/2014

Prior Incurred Period: 01/01/2012 - 12/31/2012, Paid Through 03/31/2014

Summary Trend by Major Type of Service

Quarterly costs by major type of service

	Employer Group							
	Prior Period				Current Period			
Service Category	**Q1**	**Q2**	**Q3**	**Q4**	**Q5**	**Q6**	**Q7**	**Q8**
Facility Inpatient Cost	$641,080	$755,287	$990,815	$890,521	$932,746	$487,403	$983,026	$665,081
Cost PMPM	$62.85	$72.14	$91.90	$80.70	$81.77	$41.75	$82.12	$54.22
Facility Outpatient Cost	$750,174	$643,138	$702,967	$593,830	$558,722	$711,442	$782,897	$860,195
Cost PMPM	$73.55	$61.43	$65.20	$53.81	$48.98	$60.94	$65.40	$70.12
Professional Services Cost	$773,239	$813,166	$945,688	$963,733	$845,292	$854,516	$1,027,055	$1,114,312
Cost PMPM	$75.81	$77.67	$87.72	$87.33	$74.10	$73.19	$85.80	$90.84
Ancillary Cost	$254,182	$282,678	$194,710	$231,799	$216,728	$186,550	$192,789	$352,271
Cost PMPM	$24.92	$27.00	$18.06	$21.01	$19.00	$15.98	$16.10	$28.72
Total Medical Cost	$2,418,674	$2,494,270	$2,834,181	$2,679,883	$2,553,488	$2,239,910	$2,985,766	$2,991,859
Cost PMPM	$237.12	$238.23	$262.89	$242.85	$223.85	$191.86	$249.42	$243.89
Total Pharmacy Cost	$284,958	$288,870	$306,295	$310,165	$290,156	$340,705	$349,179	$375,891
Cost PMPM	$27.94	$27.59	$28.41	$28.11	$25.44	$29.18	$29.17	$30.64
Total Costs	**$2,703,632**	**$2,783,139**	**$3,140,476**	**$2,990,048**	**$2,843,644**	**$2,580,615**	**$3,334,946**	**$3,367,750**
Total Costs PMPM	**$265.06**	**$265.82**	**$291.30**	**$270.96**	**$249.29**	**$221.04**	**$278.59**	**$274.54**
% In-Network	**100.0%**	**100.0%**	**100.0%**	**100.0%**	**100.0%**	**100.0%**	**100.0%**	**100.0%**

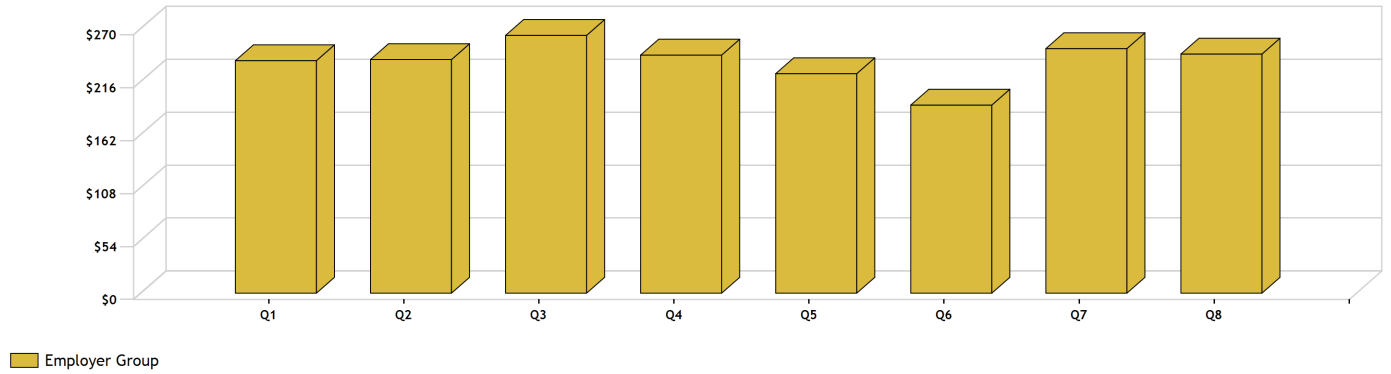
Employer Name: SAMPLE GROUP

Product: PREFERRED BLUE PPO

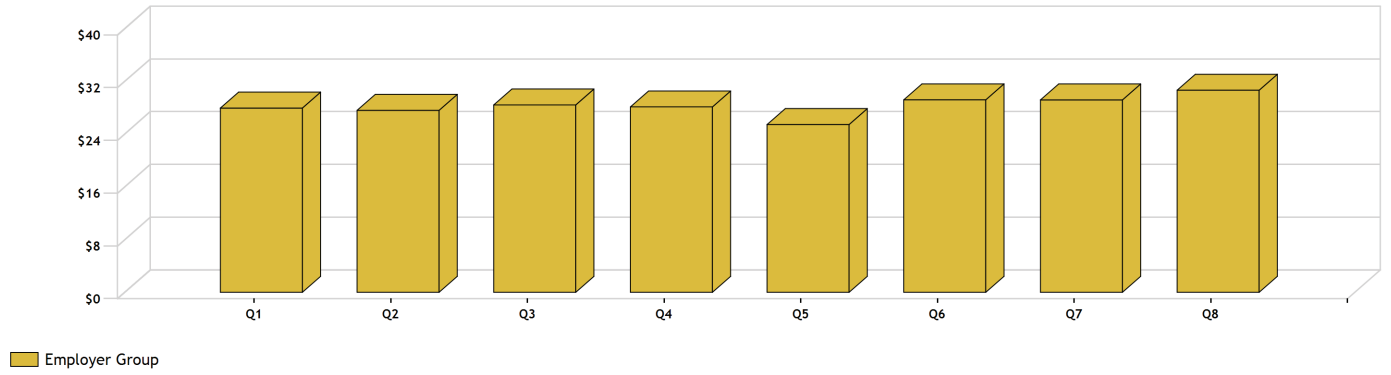
Current Incurred Period: 01/01/2013 - 12/31/2013, Paid Through 03/31/2014

Prior Incurred Period: 01/01/2012 - 12/31/2012, Paid Through 03/31/2014

Total Medical PMPM



Total Pharmacy PMPM



Employer Name: SAMPLE GROUP

Product: PREFERRED BLUE PPO

Current Incurred Period: 01/01/2013 - 12/31/2013, Paid Through 03/31/2014

Prior Incurred Period: 01/01/2012 - 12/31/2012, Paid Through 03/31/2014

Membership Distribution by Age and Gender

	Employer Group											
	Current Period						Prior Period					
	Males		Females		Total		Males		Females		Total	
Age Range	Average Members	% of Total	Average Members	% of Total	Average Members	% of Total	Average Members	% of Total	Average Members	% of Total	Average Members	% of Total
00-17	650.8	28.3%	596.8	36.4%	1,247.7	31.6%	569.3	27.5%	516.3	35.1%	1,085.5	30.7%
18-30	526.7	22.9%	338.3	20.6%	865.0	21.9%	467.7	22.6%	300.1	20.4%	767.8	21.7%
31-44	565.9	24.6%	347.8	21.2%	913.7	23.2%	497.7	24.0%	309.6	21.0%	807.3	22.8%
45-64	527.0	22.9%	340.3	20.8%	867.3	22.0%	505.6	24.4%	332.3	22.6%	837.9	23.7%
65-74	32.0	1.4%	16.6	1.0%	48.6	1.2%	28.3	1.4%	12.8	0.9%	41.1	1.2%
75+	1.2	0.1%	0.0	0.0%	1.2	0.0%	1.0	0.0%	0.0	0.0%	1.0	0.0%
Total	2,303.6	100.0%	1,639.7	100.0%	3,943.3	100.0%	2,069.5	100.0%	1,471.0	100.0%	3,540.5	100.0%

Employer Name: SAMPLE GROUP

Product: PREFERRED BLUE PPO

Current Incurred Period: 01/01/2013 - 12/31/2013, Paid Through 03/31/2014

Prior Incurred Period: 01/01/2012 - 12/31/2012, Paid Through 03/31/2014

Membership Health Risk Distribution

Cost and membership distribution by member health risk (based on member attributes as of their last active date within the time period)

	Employer Group				
		Current Period		Prior Period	
Relative Health Risk Range	Total Cost	Member Month Distribution	Cost Distribution	Member Month Distribution	Cost Distribution
0.00 - 0.3063	$601,479	48.6%	4.9%	47.4%	4.9%
0.3063 - 0.6152	$535,396	13.4%	4.4%	14.7%	5.0%
0.6152 - 1.1350	$1,046,885	13.8%	8.6%	13.6%	7.1%
1.1350 - 2.9306	$3,302,544	16.1%	27.0%	16.0%	22.2%
2.9306 - 8.8022	$3,508,357	7.0%	28.7%	7.0%	31.1%
> 8.8022	$3,243,581	1.1%	26.5%	1.3%	29.8%
No Med Elig	$0	0.0%	0.0%	0.0%	0.0%
Total	**$12,238,243**	**100.0%**	**100.0%**	**100.0%**	**100.0%**

	Employer Group
Relative Health Risk - Current Period	0.99
Relative Health Risk - Prior Period	1.02
Average Number of Members - Current Period	3,943.3
Average Number of Members - Prior Period	3,540.5

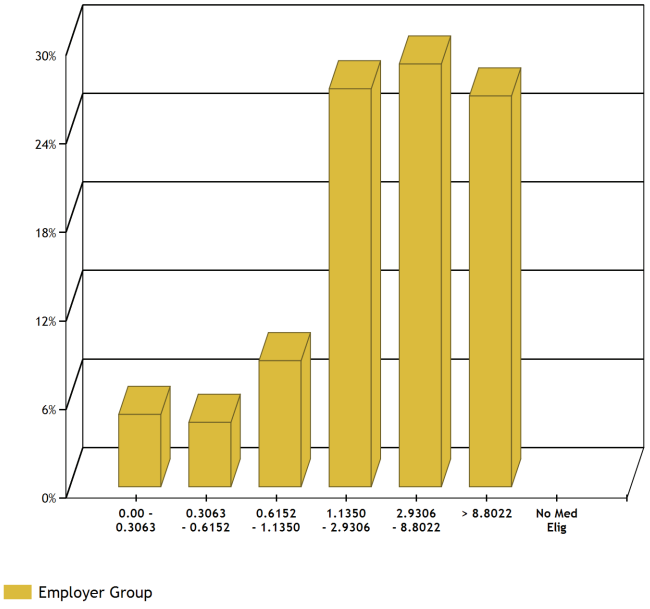
Employer Name: SAMPLE GROUP

Product: PREFERRED BLUE PPO

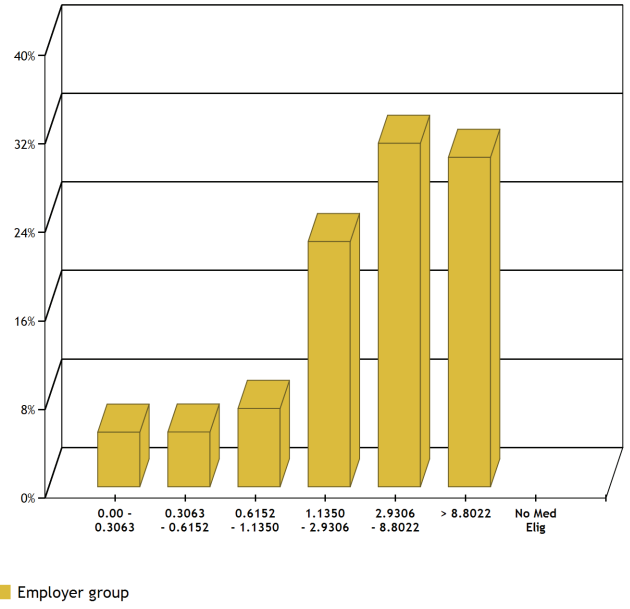
Current Incurred Period: 01/01/2013 - 12/31/2013, Paid Through 03/31/2014

Prior Incurred Period: 01/01/2012 - 12/31/2012, Paid Through 03/31/2014

Cost Distribution By Risk Range
Current Period



Cost Distribution By Risk Range
Prior Period



Medical Claims Distribution

Distribution of member months and claim cost

	Employer Group				
Cost Range	Member Months	Member Month Distribution	Total Cost	Cost Distribution	Cost PMPM
Less than $50	10,523	22.2%	$4,454	0.0%	$0.42
$50 - $99	3,064	6.5%	$20,171	0.2%	$6.58
$100 - $249	6,059	12.8%	$86,401	0.8%	$14.26
$250 - $499	6,184	13.1%	$170,738	1.6%	$27.61
$500 - $999	6,119	12.9%	$321,500	3.0%	$52.54
$1,000 - $2,499	6,498	13.7%	$744,933	6.9%	$114.64
$2,500 - $4,999	3,666	7.7%	$997,004	9.3%	$271.96
$5,000 - $9,999	2,231	4.7%	$1,188,972	11.0%	$532.93
$10,000 - $14,999	1,052	2.2%	$970,213	9.0%	$922.26
$15,000 - $24,999	1,034	2.2%	$1,571,214	14.6%	$1,519.55
$25,000 - $49,999	541	1.1%	$1,511,378	14.0%	$2,793.67
$50,000 - $99,999	204	0.4%	$1,003,655	9.3%	$4,919.88
$100,000 - $199,999	97	0.2%	$977,241	9.1%	$10,074.65
$200,000 or Over	48	0.1%	$1,203,151	11.2%	$25,065.64
All Members	**47,320**	**100.0%**	**$10,771,024**	**100.0%**	**$227.62**

Employer Name: SAMPLE GROUP

Product: PREFERRED BLUE PPO

Current Period: 01/01/2013 - 12/31/2013

Prior Period: 01/01/2012 - 12/31/2012

Quality

Compliance with evidence based medicine guidelines for members in-force during the current period

Rule Type	Case	Quality Opportunities	With Compliance	Compliance Rate	Benchmark
Clinical Outcomes	Smoking Cessation	1,940	1,839	0.95	0.94
	Migraine	46	45	0.98	0.97
	Obesity and Overweight	11	11	1.00	0.97
	Breast CA - I	8	7	0.88	0.93
	Diabetes	1	1	1.00	1.00
	Hepatitis C	0	0	0	0
Patient Drug Adherence and Safety	HTN	448	376	0.84	0.88
	Diabetes	146	118	0.81	0.86
	Hyperlipidemia	136	98	0.72	0.84
	Pregnancy Management	102	101	0.99	1.00
	Depression	90	72	0.80	0.79
	CAD	82	75	0.91	0.90
	Asthma	46	25	0.54	0.52
	Global Rules	43	40	0.93	0.93
	Migraine	32	25	0.78	0.79
	CHF	16	13	0.81	0.85
	RA	14	13	0.93	0.78
	Epilepsy	12	10	0.83	0.84
	Chronic Kidney Disease	10	7	0.70	0.91
	Obesity and Overweight	9	8	0.89	0.99
	Atrial Fib	9	7	0.78	0.82
	COPD	4	4	1.00	0.78
	Breast CA - I	4	3	0.75	0.85
	Inflam Bowel Disease	3	1	0.33	0.86
	CVA/TIA - Part 1	2	2	1.00	0.81
	Osteoporosis	1	1	1.00	0.67
	Sickle Cell Anemia	0	0	0	0
	Multiple Sclerosis	0	0	0	0

Employer Name: SAMPLE GROUP

Product: PREFERRED BLUE PPO

Current Period: 01/01/2013 - 12/31/2013

Prior Period: 01/01/2012 - 12/31/2012

Quality

Compliance with evidence based medicine guidelines for members in-force during the current period

Rule Type	Case	Quality Opportunities	With Compliance	Compliance Rate	Benchmark
	Hepatitis C	0	0	0	0
	HIV/AIDS	0	0	0	0
Preventive	Adult Access Prev (NS)	4,492	3,394	0.76	0.76
	Weight Assessment (NS)	1,542	2	0.00	0.00
	Adult BMI Assessment (NS)	1,518	41	0.03	0.03
	Child-Adol Access PCP(NS)	606	200	0.33	0.63
	Adolescent Well-Care (NS)	535	91	0.17	0.22
	Cervical CA Scrn (NS)	514	364	0.71	0.67
	Colorectal CA Scrn (NS)	500	259	0.52	0.48
	Diabetes Care (NS)	481	172	0.36	0.35
	Child Access to PCP (NS)	399	128	0.32	0.60
	Well-Child 15 Mo (NS)	360	26	0.07	0.12
	Breast CA Scrn (NS)	355	236	0.66	0.67
	Global Rules	288	228	0.79	0.77
	Well-Child 3-6 Yr (NS)	260	44	0.17	0.32
	Immunizations for Adol (NS)	189	93	0.49	0.63
	LBP Imaging (NS)	111	97	0.87	0.88
	IVD (NS)	104	30	0.29	0.25
	Care for Older Adults(NS)	93	0	0.00	0.00
	Bronchitis, Acute (NS)	62	13	0.21	0.22
	Depression Med Mgmt (NS)	52	31	0.60	0.61
	Cholesterol Mgmt (NS)	50	24	0.48	0.44
	Alcohol Treatment (NS)	46	12	0.26	0.35
	Asthma (NS)	42	38	0.90	0.89
	HPV Vaccine (NS)	31	4	0.13	0.14
	ADHD (NS)	18	1	0.06	0.23
	Glaucoma Screening (NS)	17	7	0.41	0.38
	DMARD Therapy in RA (NS)	7	7	1.00	0.90

Quality

Compliance with evidence based medicine guidelines for members in-force during the current period

Rule Type	Case	Quality Opportunities	With Compliance	Compliance Rate	Benchmark
	Beta-Blocker Tx (NS)	2	0	0.00	0.52
	Osteoporosis (NS)	0	0	0	0
	URI (NS)	0	0	0	0
	Pharyngitis (NS)	0	0	0	0
Process Outcomes, Care Patterns	Influenza Immunization (NS)	5,337	618	0.12	0.15
	Annual Dental Visit (NS)	2,368	6	0.00	0.01
	Childhood Imms (NS)	912	328	0.36	0.39
	Hyperlipidemia	822	709	0.86	0.83
	Obesity and Overweight	816	578	0.71	0.70
	HTN	775	591	0.76	0.78
	Diabetes	649	503	0.78	0.76
	Sinusitis, Acute	583	543	0.93	0.92
	Diabetes Care-ECC	419	277	0.66	0.69
	Diabetes Care (NS)	399	104	0.26	0.29
	Asthma	338	229	0.68	0.67
	LBP Imaging (NS)	333	317	0.95	0.96
	Pregnancy Management	210	159	0.76	0.72
	Chlamydia Scrn (NS)	172	62	0.36	0.31
	Chronic Kidney Disease	170	89	0.52	0.57
	CAD	122	93	0.76	0.78
	Weight Screening	114	8	0.07	0.16
	Smoking Cessation	101	25	0.25	0.20
	CAD (NS)	99	47	0.47	0.56
	Global Rules	97	87	0.90	0.89
	Depression	96	76	0.79	0.85
	Migraine	85	73	0.86	0.90
	Optimal Diabetes Care	74	1	0.01	0.04
	Pneumonia	64	20	0.31	0.30

Employer Name: SAMPLE GROUP

Product: PREFERRED BLUE PPO

Current Period: 01/01/2013 - 12/31/2013

Prior Period: 01/01/2012 - 12/31/2012

Quality

Compliance with evidence based medicine guidelines for members in-force during the current period

Rule Type	Case	Quality Opportunities	With Compliance	Compliance Rate	Benchmark
	Well-Child 15 Mo (NS)	60	26	0.43	0.70
	Postpartum Care (NS)	56	45	0.80	0.86
	Lead Screening (NS)	48	13	0.27	0.31
	Prenatal Care (NS)	43	10	0.23	0.54
	Prenatal Visits	40	10	0.25	0.25
	CAD - ACE and ARB	36	17	0.47	0.59
	Care for Older Adults(NS)	31	0	0.00	0.00
	Emergency Medicine	24	22	0.92	0.92
	RA	24	13	0.54	0.67
	CHF	23	18	0.78	0.77
	Post-Fracture Care (NS)	23	0	0.00	0.00
	COPD	21	18	0.86	0.73
	Pneumococcal Imm (NS)	19	2	0.11	0.13
	Otitis Externa, Acute	18	13	0.72	0.83
	Tonsillectomy	16	15	0.94	0.91
	Breast CA - I	16	14	0.88	0.90
	CVA/TIA - Part 1	15	12	0.80	0.74
	Otitis Media, Acute	15	8	0.53	0.56
	Osteoporosis Testing	14	8	0.57	0.43
	Tympanostomy	13	13	1.00	0.95
	Mental Illness - FU (NS)	12	4	0.33	0.41
	Cholesterol Mgmt-ECC	11	9	0.82	0.79
	Osteoporosis	9	2	0.22	0.49
	Epilepsy	9	9	1.00	0.97
	Prostate CA - I	8	6	0.75	0.90
	Inflam Bowel Disease	8	4	0.50	0.54
	Heart Failure - ACE	7	5	0.71	0.67
	Multiple Sclerosis	6	4	0.67	0.79

Employer Name: SAMPLE GROUP

Product: PREFERRED BLUE PPO

Current Period: 01/01/2013 - 12/31/2013

Prior Period: 01/01/2012 - 12/31/2012

Quality

Compliance with evidence based medicine guidelines for members in-force during the current period

Rule Type	Case	Quality Opportunities	With Compliance	Compliance Rate	Benchmark
	Diabetic Retinopathy (NS)	4	0	0.00	0.05
	Atrial Fib	4	2	0.50	0.63
	Adenoidectomy	4	4	1.00	0.93
	Knee Replacement	4	3	0.75	0.84
	COPD Exacerbation (NS)	4	3	0.75	0.71
	Bacterial Pneumonia: Hosp	4	0	0.00	0.00
	COPD/Asthma: Hosp	3	0	0.00	0.00
	CVA/TIA - Part 2	3	2	0.67	0.67
	COPD (NS)	2	1	0.50	0.44
	CVA/TIA - Part 4	2	1	0.50	0.53
	CHF: Hospitalization	2	1	0.50	0.25
	CHF (NS)	2	2	1.00	0.73
	Drug-Disease Interactions (NS)	2	2	1.00	0.95
	Dehydration: Hosp	1	0	0.00	0.00
	CVA/TIA - Part 3	1	0	0.00	0.56
	Cervical Dysplasia	1	1	1.00	0.82
	Cardiac Surgery	0	0	0	0
	IVD (NS)	0	0	0	0
	Breast CA - II	0	0	0	0
	Prostate CA - II	0	0	0	0
	Colon CA - II	0	0	0	0
	UTI: Hospitalization	0	0	0	0
	Asthma: Hospitalization	0	0	0	0
	Diabetes: Hosp	0	0	0	0
	Diabetes, LE Amputation	0	0	0	0
	Angina: Hospitalization	0	0	0	0
	Cholesterol Mgmt (NS)	0	0	0	0
	Sickle Cell Anemia	0	0	0	0

Employer Name: SAMPLE GROUP

Product: PREFERRED BLUE PPO

Current Period: 01/01/2013 - 12/31/2013

Prior Period: 01/01/2012 - 12/31/2012

Quality

Compliance with evidence based medicine guidelines for members in-force during the current period

Rule Type	Case	Quality Opportunities	With Compliance	Compliance Rate	Benchmark
	Colon CA - I	0	0	0	0
	HIV/AIDS	0	0	0	0
	Hepatitis C	0	0	0	0
Process Outcomes, Safety Monitoring	HTN	226	184	0.81	0.82
	Global Rules	174	142	0.82	0.79
	Diabetes	155	142	0.92	0.89
	Hyperlipidemia	141	122	0.87	0.83
	CAD	49	43	0.88	0.86
	RA	24	18	0.75	0.66
	CHF	6	4	0.67	0.93
	Inflam Bowel Disease	4	2	0.50	0.70
	Chronic Kidney Disease	3	1	0.33	0.33
	Atrial Fib	3	3	1.00	0.86
	HIV/AIDS	0	0	0	0
	Asthma	0	0	0	0
	Hepatitis C	0	0	0	0
	Depression	0	0	0	0
	Breast CA - I	0	0	0	0
	Sickle Cell Anemia	0	0	0	0
	Multiple Sclerosis	0	0	0	0
	CVA/TIA - Part 1	0	0	0	0

Employer Name: SAMPLE GROUP

Product: PREFERRED BLUE PPO

Current Paid Period: 04/01/2013 - 03/31/2014, Incurred After: 12/31/2011

Prior Paid Period: 04/01/2012 - 03/31/2013, Incurred After 12/31/2011

Financial Overview

Overview of financial performance (claim costs vs. premiums) by network status

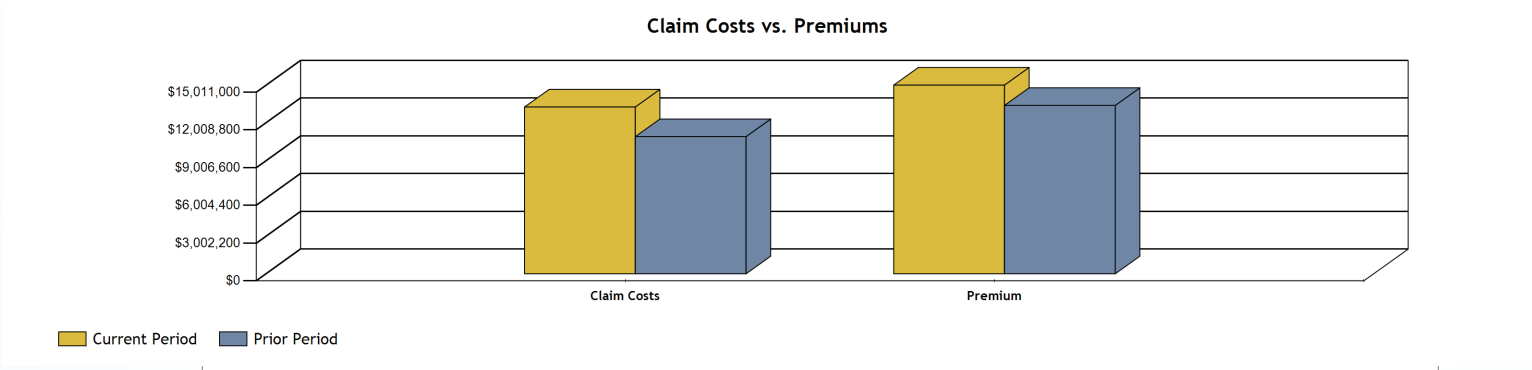
	Current Period			Prior Period				
Claim Costs	In-Network	Out-of-Network	Total	In-Network	Out-of-Network	Total	Net Change	% Change
Facility Inpatient	**$3,441,541**	**$0**	**$3,441,541**	**$2,908,100**	**$0**	**$2,908,100**	**$533,442**	**18.3%**
Average per Contract	$2,054.65	$0.00	$2,054.65	$1,950.65	$0.00	$1,950.65	$104.00	5.3%
Average per Member	$848.65	$0.00	$848.65	$798.69	$0.00	$798.69	$49.95	6.3%
Facility Outpatient	**$3,194,563**	**$0**	**$3,194,563**	**$2,502,598**	**$0**	**$2,502,598**	**$691,965**	**27.6%**
Average per Contract	$1,907.20	$0.00	$1,907.20	$1,678.66	$0.00	$1,678.66	$228.54	13.6%
Average per Member	$787.74	$0.00	$787.74	$687.32	$0.00	$687.32	$100.42	14.6%
Total Facility	**$6,636,104**	**$0**	**$6,636,104**	**$5,410,698**	**$0**	**$5,410,698**	**$1,225,406**	**22.6%**
Average per Contract	$3,961.85	$0.00	$3,961.85	$3,629.31	$0.00	$3,629.31	$332.54	9.2%
Average per Member	$1,636.39	$0.00	$1,636.39	$1,486.01	$0.00	$1,486.01	$150.38	10.1%
Professional Services	**$4,132,417**	**$0**	**$4,132,417**	**$3,416,169**	**$0**	**$3,416,169**	**$716,248**	**21.0%**
Average per Contract	$2,467.11	$0.00	$2,467.11	$2,291.45	$0.00	$2,291.45	$175.67	7.7%
Average per Member	$1,019.01	$0.00	$1,019.01	$938.23	$0.00	$938.23	$80.78	8.6%
Ancillary	**$1,058,074**	**$0**	**$1,058,074**	**$889,401**	**$0**	**$889,401**	**$168,673**	**19.0%**
Average per Contract	$631.69	$0.00	$631.69	$596.58	$0.00	$596.58	$35.11	5.9%
Average per Member	$260.91	$0.00	$260.91	$244.27	$0.00	$244.27	$16.64	6.8%
Pharmacy	**$1,441,679**	**$0**	**$1,441,679**	**$1,194,314**	**$0**	**$1,194,314**	**$247,366**	**20.7%**
Average per Contract	$860.70	$0.00	$860.70	$801.10	$0.00	$801.10	$59.60	7.4%
Average per Member	$355.50	$0.00	$355.50	$328.01	$0.00	$328.01	$27.49	8.4%
Total Cost	**$13,268,274**	**$0**	**$13,268,274**	**$10,910,581**	**$0**	**$10,910,581**	**$2,357,693**	**21.6%**
Average per Contract	$7,921.36	$0.00	$7,921.36	$7,318.44	$0.00	$7,318.44	$602.91	8.2%
Average per Member	$3,271.81	$0.00	$3,271.81	$2,996.52	$0.00	$2,996.52	$275.29	9.2%
Total Premiums			**$15,010,020**			**$13,392,900**	**$1,617,121**	**12.1%**
Average per Contract			$8,961.21			$8,983.50	-$22.29	-0.2%
Average per Member			$3,701.30			$3,678.27	$23.03	0.6%

Employer Name: SAMPLE GROUP

Product: PREFERRED BLUE PPO

Current Paid Period: 04/01/2013 - 03/31/2014, Incurred After: 12/31/2011

Prior Paid Period: 04/01/2012 - 03/31/2013, Incurred After 12/31/2011



Employer Name: SAMPLE GROUP

Product: PREFERRED BLUE PPO

Current Paid Period: 04/01/2013 - 03/31/2014, Incurred After: 12/31/2011

Prior Paid Period: 04/01/2012 - 03/31/2013, Incurred After 12/31/2011

Claim Cost by Age, Gender and Relationship to Contract Holder

		Current Period						Prior Period						
Age Range	Gender	Contract Holder	Spouse	Dependent	Total	% of Age Range	% of Total	Contract Holder	Spouse	Dependent	Total	% of Age Range	% of Total	% Change
00-17	Male	$151	$0	$1,523,566	$1,523,717	49.8%	11.5%	$0	$0	$1,013,547	$1,013,547	56.9%	9.3%	50.3%
	Female	$39	$0	$1,534,498	$1,534,537	50.2%	11.6%	$0	$0	$768,545	$768,545	43.1%	7.0%	99.7%
	Subtotal	$190	$0	$3,058,064	$3,058,255	100.0%	23.0%	$0	$0	$1,782,092	$1,782,092	100.0%	16.3%	71.6%
18-30	Male	$292,652	$611	$218,590	$511,854	30.2%	3.9%	$416,772	$583	$244,258	$661,613	36.0%	6.1%	-22.6%
	Female	$155,691	$685,459	$340,720	$1,181,870	69.8%	8.9%	$124,945	$686,247	$363,903	$1,175,095	64.0%	10.8%	0.6%
	Subtotal	$448,343	$686,071	$559,310	$1,693,724	100.0%	12.8%	$541,717	$686,830	$608,162	$1,836,708	100.0%	16.8%	-7.8%
31-44	Male	$1,049,157	$11,819	$0	$1,060,976	37.3%	8.0%	$798,923	$8,693	$0	$807,616	31.0%	7.4%	31.4%
	Female	$222,936	$1,557,961	$0	$1,780,897	62.7%	13.4%	$215,998	$1,579,560	$0	$1,795,558	69.0%	16.5%	-0.8%
	Subtotal	$1,272,093	$1,569,781	$0	$2,841,873	100.0%	21.4%	$1,014,921	$1,588,252	$0	$2,603,174	100.0%	23.9%	9.2%
45-64	Male	$3,187,078	$138,761	$0	$3,325,839	65.0%	25.1%	$2,352,982	$214,461	$0	$2,567,443	59.8%	23.5%	29.5%
	Female	$573,283	$1,220,207	$0	$1,793,490	35.0%	13.5%	$630,926	$1,097,581	$0	$1,728,508	40.2%	15.8%	3.8%
	Subtotal	$3,760,361	$1,358,968	$0	$5,119,329	100.0%	38.6%	$2,983,909	$1,312,042	$0	$4,295,950	100.0%	39.4%	19.2%
65-74	Male	$243,431	$223,595	$0	$467,026	85.6%	3.5%	$81,991	$231,445	$0	$313,436	82.6%	2.9%	49.0%
	Female	$58,723	$20,003	$0	$78,726	14.4%	0.6%	$16,871	$49,161	$0	$66,032	17.4%	0.6%	19.2%
	Subtotal	$302,154	$243,598	$0	$545,752	100.0%	4.1%	$98,862	$280,605	$0	$379,468	100.0%	3.5%	43.8%
75+	Male	$9,342	$0	$0	$9,342	100.0%	0.1%	$13,189	$0	$0	$13,189	100.0%	0.1%	-29.2%
	Female	$0	$0	$0	$0	0.0%	0.0%	$0	$0	$0	$0	0.0%	0.0%	0.0%
	Subtotal	$9,342	$0	$0	$9,342	100.0%	0.1%	$13,189	$0	$0	$13,189	100.0%	0.1%	-29.2%
Total	**Male**	**$4,781,811**	**$374,787**	**$1,742,157**	**$6,898,755**	**52.0%**	**52.0%**	**$3,663,858**	**$455,181**	**$1,257,806**	**$5,376,844**	**49.3%**	**49.3%**	**28.3%**
	Female	**$1,010,672**	**$3,483,630**	**$1,875,218**	**$6,369,520**	**48.0%**	**48.0%**	**$988,740**	**$3,412,548**	**$1,132,448**	**$5,533,737**	**50.7%**	**50.7%**	**15.1%**
	Total	**$5,792,483**	**$3,858,417**	**$3,617,375**	**$13,268,274**	**100.0%**	**100.0%**	**$4,652,598**	**$3,867,729**	**$2,390,254**	**$10,910,581**	**100.0%**	**100.0%**	**21.6%**

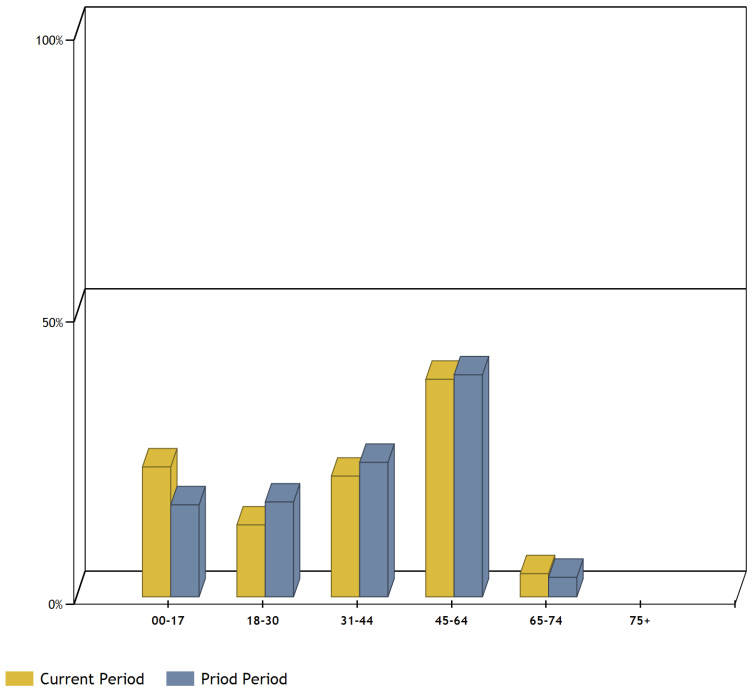
Employer Name: SAMPLE GROUP

Current Paid Period: 04/01/2013 - 03/31/2014, Incurred After: 12/31/2011

Product: PREFERRED BLUE PPO

Prior Paid Period: 04/01/2012 - 03/31/2013, Incurred After 12/31/2011

Claim Cost by Age Group



Employer Name: SAMPLE GROUP

Current Paid Period: 04/01/2013 - 03/31/2014, Incurred After 12/31/2011

Product: PREFERRED BLUE PPO

Claim Lag

Medical and Pharmacy Claims

	Month Paid												
Month Incurred	Apr-13	May-13	Jun-13	Jul-13	Aug-13	Sep-13	Oct-13	Nov-13	Dec-13	Jan-14	Feb-14	Mar-14	Total
Prior Incurred	$784,031	$500,917	$215,102	$64,496	$110,187	$122,175	$15,980	$7,957	$30,286	$19,287	$3,548	$14,273	$1,888,239
Apr-13	$278,763	$314,011	$106,929	$13,938	$5,809	$4,651	$1,328	$1,912	$1,307	$1,121	$327	$2,368	$732,465
May-13		$245,857	$428,275	$147,661	$37,767	$14,043	$7,497	$7,124	$2,263	$1,091	$7,116	$28	$898,721
Jun-13			$216,577	$455,605	$123,109	$83,668	$51,888	$8,226	$4,030	$439	$919	$4,969	$949,429
Jul-13				$235,326	$488,168	$86,192	$27,937	$5,911	$8,267	$1,188	$3,042	$1,204	$857,234
Aug-13					$348,739	$535,916	$578,168	$79,619	$28,167	$39,942	$2,746	$9,715	$1,623,010
Sep-13						$230,320	$472,634	$112,761	$15,413	$7,049	$12,314	$4,211	$854,701
Oct-13							$361,679	$620,986	$154,817	$89,257	$25,419	$14,817	$1,266,976
Nov-13								$285,257	$519,372	$46,469	$82,307	$45,417	$978,821
Dec-13									$406,219	$568,201	$115,158	$32,375	$1,121,953
Jan-14										$83,718	$641,267	$171,244	$896,229
Feb-14											$229,428	$545,944	$775,372
Mar-14												$425,123	$425,123
Total Claims	$1,062,794	$1,060,785	$966,883	$917,027	$1,113,777	$1,076,964	$1,517,110	$1,129,755	$1,170,141	$857,762	$1,123,589	$1,271,688	$13,268,274

Employer Name: SAMPLE GROUP

Current Paid Period: 04/01/2013 - 03/31/2014, Incurred After: 12/31/2011

Product: PREFERRED BLUE PPO

Premium and Claim Cost Analysis

Month - Year	Average Number of Contracts	Member Months	Premium	Capitation	Medical Claim Cost	Pharmacy Claim Cost	Total Claim Cost	Loss Ratio
Apr-13	1,579.0	3,863	$1,178,504	$0	$964,676	$98,118	$1,062,794	90.2%
May-13	1,591.0	3,889	$1,188,171	$0	$946,756	$114,029	$1,060,785	89.3%
Jun-13	1,608.0	3,923	$1,198,016	$0	$840,544	$126,339	$966,883	80.7%
Jul-13	1,639.0	3,984	$1,217,898	$0	$829,089	$87,938	$917,027	75.3%
Aug-13	1,645.0	3,990	$1,220,026	$0	$959,757	$154,019	$1,113,776	91.3%
Sep-13	1,651.0	3,997	$1,223,871	$0	$972,742	$104,222	$1,076,964	88.0%
Oct-13	1,656.0	3,998	$1,227,358	$0	$1,425,909	$91,201	$1,517,110	123.6%
Nov-13	1,726.0	4,117	$1,265,804	$0	$981,439	$148,316	$1,129,755	89.3%
Dec-13	1,736.0	4,152	$1,275,056	$0	$1,038,693	$131,448	$1,170,141	91.8%
Jan-14	1,757.0	4,258	$1,341,913	$0	$769,772	$87,990	$857,762	63.9%
Feb-14	1,755.0	4,246	$1,337,229	$0	$981,784	$141,805	$1,123,589	84.0%
Mar-14	1,757.0	4,247	$1,336,174	$0	$1,115,434	$156,254	$1,271,688	95.2%
Total	**20,100.0**	**48,664**	**$15,010,020**	**$0**	**$11,826,595**	**$1,441,679**	**$13,268,274**	**88.4%**

Top 20 Episode Families Ranked by Cost

Average cost per episode by major type of service, complete non-outlier episodes

Episode Families		Episodes	Total Cost	Average Cost Per Episode					
				Inpatient Facility	Outpatient Facility	Professional Services	Ancillary	Pharmacy	Total
Joint degeneration, localized	Employer Group	332.5	$674,406	$605.96	$526.81	$765.75	$82.97	$46.99	$2,028.47
	Benchmark			$731.13	$582.25	$732.21	$51.71	$51.86	$2,149.15
Cerebral vascular disease	Employer Group	16.0	$388,638	$19,869.33	$1,458.61	$2,009.87	$946.01	$6.08	$24,289.89
	Benchmark			$10,238.25	$1,135.29	$1,696.07	$605.49	$121.10	$13,796.22
Pregnancy, with delivery	Employer Group	29.0	$380,174	$6,616.72	$1,273.86	$4,766.86	$408.43	$43.57	$13,109.44
	Benchmark			$4,430.40	$791.01	$4,436.69	$179.57	$41.16	$9,878.83
Malignant neoplasm of rectum or anus	Employer Group	3.0	$365,371	$2,264.43	$26,116.57	$7,909.86	$85,114.69	$384.93	$121,790.48
	Benchmark			$13,937.46	$13,289.49	$29,509.70	$38,193.01	$6,337.29	$101,266.95
Diabetes	Employer Group	101.0	$179,431	$59.36	$149.54	$368.72	$107.29	$1,091.28	$1,776.19
	Benchmark			$83.06	$80.91	$403.44	$102.59	$1,215.58	$1,885.57
Malignant neoplasm of central nervous system	Employer Group	1.0	$155,194	$78,022.94	$2,196.48	$51,704.80	$4,156.75	$19,113.26	$155,194.23
	Benchmark			$50,516.96	$1,704.78	$51,111.78	$6,432.23	$15,933.80	$125,699.55
Hypertension	Employer Group	377.6	$145,788	$0.00	$95.52	$135.93	$8.57	$146.12	$386.13
	Benchmark			$2.56	$88.66	$154.69	$8.04	$109.38	$363.35
Routine exam	Employer Group	797.0	$139,122	$0.00	$6.25	$168.30	$0.00	$0.00	$174.56
	Benchmark			$0.00	$9.52	$167.40	$0.10	$0.05	$177.07
Malignant neoplasm of ear/nose/throat	Employer Group	5.0	$129,932	$0.00	$14,834.18	$6,756.79	$4,350.51	$44.92	$25,986.40
	Benchmark			$0.00	$14,583.38	$6,381.10	$2,944.67	$44.54	$23,953.68
Ischemic heart disease	Employer Group	46.3	$129,682	$1,541.71	$474.75	$510.73	$74.11	$202.62	$2,803.93
	Benchmark			$1,719.90	$660.45	$697.59	$268.40	$191.43	$3,537.77
Kidney transplant	Employer Group	1.0	$125,783	$93,658.32	$7,801.36	$14,307.86	$161.40	$9,853.98	$125,782.92
	Benchmark			$90,896.72	$5,118.33	$15,051.80	$293.07	$12,297.46	$123,657.38
Mood disorder, depressed	Employer Group	199.0	$108,616	$0.00	$97.96	$294.58	$12.48	$140.87	$545.89
	Benchmark			$27.73	$65.85	$335.79	$8.62	$117.01	$554.99
Malignant neoplasm of pancreatic gland	Employer Group	1.6	$96,811	$32,143.61	$12,139.57	$11,159.79	$5,440.98	$3.21	$60,887.15
	Benchmark			$16,599.47	$9,653.61	$8,744.72	$8,372.79	$719.09	$44,089.67

Top 20 Episode Families Ranked by Cost

Average cost per episode by major type of service, complete non-outlier episodes

Episode Families		Episodes	Total Cost	Average Cost Per Episode					
				Inpatient Facility	Outpatient Facility	Professional Services	Ancillary	Pharmacy	Total
Chronic sinusitis	Employer Group	219.5	$96,753	$0.00	$92.56	$307.40	$2.36	$38.56	$440.89
	Benchmark			$0.00	$132.82	$220.06	$4.54	$32.16	$389.59
Tonsillitis, adenoiditis or pharyngitis	Employer Group	468.0	$90,914	$0.00	$80.24	$106.07	$6.15	$1.80	$194.26
	Benchmark			$0.00	$77.70	$109.88	$4.57	$2.55	$194.69
Hernias, except hiatal	Employer Group	24.0	$90,123	$0.00	$2,560.59	$1,111.70	$82.84	$0.00	$3,755.13
	Benchmark			$146.26	$2,134.37	$1,013.83	$120.16	$0.10	$3,414.72
Otitis media	Employer Group	312.0	$85,324	$0.00	$116.32	$136.47	$3.39	$17.30	$273.48
	Benchmark			$0.00	$115.65	$130.60	$2.10	$15.40	$263.74
Asthma	Employer Group	187.8	$83,457	$0.00	$72.38	$128.77	$16.77	$226.54	$444.46
	Benchmark			$21.19	$68.56	$150.18	$21.01	$317.54	$578.48
Malignant central nervous system metastases	Employer Group	1.0	$80,897	$0.00	$79,955.37	$777.36	$162.38	$1.86	$80,896.97
	Benchmark			$0.00	$46,140.48	$2,178.05	$81.19	$16.93	$48,416.65
Adult rheumatoid arthritis	Employer Group	12.5	$80,863	$0.00	$86.85	$1,273.38	$938.90	$4,169.93	$6,469.06
	Benchmark			$130.58	$423.75	$475.99	$729.10	$4,058.64	$5,818.06
Subtotal - Top 20	**Employer Group**	**3,134.6**	**$3,627,280**	**$324.81**	**$244.08**	**$350.42**	**$123.18**	**$114.69**	**$1,157.18**
	Benchmark			**$270.70**	**$216.82**	**$361.30**	**$73.01**	**$124.00**	**$1,045.83**
All Other Families	Employer Group	6,044.5	$3,144,724	$71.77	$154.50	$196.37	$33.59	$64.03	$520.26
	Benchmark			$70.33	$141.59	$217.66	$45.14	$66.47	$541.19
Total	**Employer Group**	**9,179.1**	**$6,772,004**	**$158.18**	**$185.09**	**$248.98**	**$64.18**	**$81.33**	**$737.76**
	Benchmark			**$138.75**	**$167.28**	**$266.71**	**$54.66**	**$86.11**	**$713.52**

Employer Name: SAMPLE GROUP

Current Incurred Period: 01/01/2013 - 12/31/2013, Paid Through 03/31/2014

Product: PREFERRED BLUE PPO

Total Costs by Disease

Top 20 diseases, ranked by total patient costs (including non-disease related), based on members attributes as of their last active date within the time period.

Disease	Member Months	Relative Health Risk	Inpatient Facility PMPM	Outpatient Facility PMPM	Professional Services PMPM	Ancillary PMPM	Pharmacy PMPM	Total PMPM	Total Cost	% Disease Related	Disease Costs
Back and Spine, Pain or Condition	5,254	2.01	$172.62	$150.84	$197.36	$75.43	$44.52	$640.77	$3,366,617	19.3%	$648,530
Depression	3,228	2.72	$205.11	$163.08	$224.61	$41.23	$76.67	$710.70	$2,294,132	13.1%	$300,858
Hypertension	2,123	3.46	$335.31	$279.52	$236.84	$91.03	$117.36	$1,060.06	$2,250,512	5.3%	$119,873
Hyperlipidemia	1,697	2.95	$161.80	$267.97	$194.05	$36.44	$143.71	$803.96	$1,364,325	2.2%	$30,109
Cancer, All	317	10.92	$577.51	$968.58	$655.26	$1,027.20	$96.86	$3,325.41	$1,054,156	51.5%	$543,047
Diabetes	1,430	2.52	$101.56	$113.48	$136.10	$63.75	$180.81	$595.69	$851,837	34.5%	$294,205
Cancer, Other	92	18.85	$1,578.83	$2,288.43	$1,350.20	$2,280.50	$78.24	$7,576.20	$697,010	0.0%	$0
Pneumonia	120	14.30	$1,405.10	$1,600.71	$880.78	$1,594.40	$230.96	$5,711.95	$685,434	7.7%	$52,537
Osteoarthritis	418	3.86	$661.63	$286.63	$401.51	$134.42	$139.82	$1,624.01	$678,836	28.1%	$190,591
Migraine	419	4.32	$434.80	$359.62	$324.61	$70.42	$80.90	$1,270.34	$532,273	6.8%	$36,340
Cancer, Metastatic and Secondary	33	31.85	$969.93	$3,157.43	$2,036.24	$8,353.71	$452.41	$14,969.73	$494,001	0.0%	$0
COPD, incl Emphysema	156	6.95	$1,474.23	$585.45	$547.51	$115.64	$398.39	$3,121.22	$486,911	18.9%	$92,255
CAD, All	283	4.66	$331.36	$720.77	$275.42	$64.80	$227.14	$1,619.50	$458,318	60.5%	$277,094
Cancer, Colon, Rectum	42	21.63	$762.09	$2,145.07	$1,189.72	$6,413.15	$289.37	$10,799.40	$453,575	93.1%	$422,497
Asthma	772	1.82	$142.50	$126.77	$156.09	$18.60	$75.54	$519.50	$401,053	14.9%	$59,802
Allergic Rhinitis	940	1.47	$50.63	$102.52	$167.56	$15.49	$63.98	$400.19	$376,175	4.2%	$15,636
Otitis Media	774	1.20	$35.64	$147.93	$182.88	$28.41	$79.14	$474.00	$366,876	20.1%	$73,691
CAD, Other	241	4.09	$170.42	$704.39	$301.85	$73.27	$250.71	$1,500.63	$361,653	50.7%	$183,343
High Cost Chronic Condition	199	5.33	$312.08	$275.63	$369.17	$175.71	$646.82	$1,779.40	$354,100	47.4%	$167,743
Rheumatoid Arthritis	139	5.51	$381.83	$358.43	$482.94	$251.55	$763.36	$2,238.11	$311,098	47.3%	$147,131
Subtotal - Top 20	-	-	-	-	-	-	-	-	-	-	**$3,655,282**
All Other Diseases	-	-	-	-	-	-	-	-	-	-	$831,210
Total	-	-	-	-	-	-	-	-	-	-	**$4,486,492**

Employer Name: SAMPLE GROUP

Current Incurred Period: 01/01/2013 - 12/31/2013, Paid Through 03/31/2014

Product: PREFERRED BLUE PPO

Disease Related Costs

Top 20 diseases, ranked by disease related costs, based on member attributes as of their last active date within the time period.

Disease	Member Months	Inpatient Facility PMPM	Outpatient Facility PMPM	Professional Services PMPM	Ancillary PMPM	Pharmacy PMPM	Total PMPM	Total Costs
Back and Spine, Pain or Condition	5,254	$35.66	$28.62	$50.38	$2.43	$6.34	$123.44	$648,530
Cancer, All	317	$122.13	$417.59	$273.78	$862.84	$36.74	$1,713.08	$543,047
Cancer, Colon, Rectum	42	$652.57	$1,919.11	$873.15	$6,351.53	$263.09	$10,059.45	$422,497
Depression	3,228	$22.76	$18.10	$41.21	$1.00	$10.13	$93.20	$300,858
Diabetes	1,430	$10.39	$10.32	$34.97	$27.49	$122.56	$205.74	$294,205
CAD, All	283	$244.50	$571.54	$85.12	$57.19	$20.79	$979.13	$277,094
Cerebrovascular Disease, including Stroke	64	$2,977.24	$264.53	$352.89	$220.58	$1.52	$3,816.76	$244,273
Osteoarthritis	418	$154.48	$99.77	$154.00	$44.91	$2.80	$455.96	$190,591
CAD, Other	241	$68.41	$530.70	$81.08	$64.35	$16.22	$760.76	$183,343
High Cost Chronic Condition	199	$122.78	$12.32	$117.49	$126.52	$463.83	$842.93	$167,743
Rheumatoid Arthritis	139	$175.77	$8.96	$156.35	$181.13	$536.28	$1,058.50	$147,131
Transplant, All	36	$2,601.62	$216.70	$397.44	$4.48	$273.72	$3,493.97	$125,783
Transplants, Kidney	36	$2,601.62	$216.70	$397.44	$4.48	$273.72	$3,493.97	$125,783
Hypertension	2,123	$0.00	$22.39	$16.44	$4.05	$13.58	$56.46	$119,873
COPD, incl Emphysema	156	$273.33	$51.39	$75.43	$21.95	$169.28	$591.38	$92,255
Otitis Media	774	$0.00	$47.51	$41.74	$1.41	$4.55	$95.21	$73,691
Cancer, Breast	75	$0.00	$491.79	$382.92	$86.70	$5.40	$966.81	$72,511
Asthma	772	$0.00	$13.75	$19.88	$1.17	$42.67	$77.46	$59,802
CAD, MI	36	$1,464.05	$38.73	$124.49	$0.00	$33.50	$1,660.77	$59,788
Pneumonia	120	$243.30	$71.68	$95.81	$24.34	$2.68	$437.81	$52,537
Subtotal - Top 20	-	**$66.27**	**$60.59**	**$58.09**	**$46.64**	**$35.27**	**$266.87**	**$4,201,334**
All Other Diseases	-	$10.33	$26.98	$17.80	$3.67	$15.22	$74.01	$285,158
Total	-	**$55.27**	**$53.98**	**$50.17**	**$38.19**	**$31.33**	**$228.95**	**$4,486,492**

Employer Name: SAMPLE GROUP

Product: PREFERRED BLUE PPO

Current Incurred Period: 01/01/2013 - 12/31/2013, Paid Through 03/31/2014

Prior Incurred Period: 01/01/2012 - 12/31/2012, Paid Through 03/31/2014

Top 20 Facilities

Hospitals ranked by Total Cost (Inpatient and Outpatient Services)

			Prior Period	Current Period				
Facility	State	Inpatient / Outpatient	Total Cost	Total Cost	Encounters	Encounter Distribution	Average Length of Stay	Average Cost per Encounter
ST ST ST FRANCIS MEDICAL	IL	Inpatient	$23,094	$11,506	4.0	0.1%	1.50	$2,877
		Outpatient	$55,682	$67,631	103.0	1.8%	-	$657
ROHCESTER METHODIST HOSP	MN	Inpatient	$46,815	$24,432	1.0	0.0%	1.00	$24,432
		Outpatient	$17,810	$71,729	23.5	0.4%	-	$3,048
ST MARYS HOSPITAL GENERO	MN	Inpatient	$97,509	$275,500	4.0	0.1%	10.25	$68,875
		Outpatient	$46,577	$42,377	24.0	0.4%	-	$1,767
REGIONS SLEEP CENT	MN	Inpatient	$0	$180,510	1.0	0.0%	20.00	$180,510
		Outpatient	$0	$0	0.0	0.0%	-	$0
UNIVERSITY OF MN MEDICAL	MN	Inpatient	$39,413	$103,854	3.0	0.1%	2.00	$34,618
		Outpatient	$48,318	$25,019	101.6	1.8%	-	$246
AVERA ST LUKES RENAL	SD	Inpatient	$162,818	$74,047	9.0	0.2%	2.11	$8,227
		Outpatient	$217,363	$177,299	314.3	5.5%	-	$564
WAUBAY CLINIC AVERA HEAL	SD	Inpatient	$42,080	$78,472	8.0	0.1%	3.50	$9,809
		Outpatient	$47,600	$24,396	38.0	0.7%	-	$642
SANFORD USD MEDICAL CENT	SD	Inpatient	$28,532	$41,123	3.0	0.1%	4.33	$13,708
		Outpatient	$27,478	$43,096	54.0	0.9%	-	$798
SANSANFORD HEALTH NETWOR	SD	Inpatient	$2,867	$53,271	11.0	0.2%	2.27	$4,843
		Outpatient	$38,910	$82,332	232.1	4.0%	-	$355
COMMUNITY MEMORIAL HOSP	SD	Inpatient	$2,831	$11,393	3.0	0.1%	2.00	$3,798
		Outpatient	$28,071	$79,992	326.7	5.7%	-	$245
DOMINICAN SANTA CRUZ HOS	CA	Inpatient	$0	$152,493	3.0	0.1%	4.67	$50,831
		Outpatient	$0	$7,564	13.0	0.2%	-	$582
BAYLOR MEDICAL CENTER AT	TX	Inpatient	$0	$89,962	2.0	0.0%	4.00	$44,981
		Outpatient	$0	$28,423	36.5	0.6%	-	$780
YUMA REGIONAL MEDICAL CE	AZ	Inpatient	$47,194	$1,023	1.0	0.0%	1.00	$1,023
		Outpatient	$71,490	$88,911	80.5	1.4%	-	$1,105

Employer Name: SAMPLE GROUP

Product: PREFERRED BLUE PPO

Current Incurred Period: 01/01/2013 - 12/31/2013, Paid Through 03/31/2014

Prior Incurred Period: 01/01/2012 - 12/31/2012, Paid Through 03/31/2014

Top 20 Facilities

Hospitals ranked by Total Cost (Inpatient and Outpatient Services)

			Prior Period	Current Period				
Facility	State	Inpatient / Outpatient	Total Cost	Total Cost	Encounters	Encounter Distribution	Average Length of Stay	Average Cost per Encounter
OREGON HEALTH AND SCIENC	OR	Inpatient	$0	$186,342	2.0	0.0%	30.00	$93,171
		Outpatient	$215	$2,712	5.5	0.1%	-	$491
LOS ROBLES REGIONAL MEDI	CA	Inpatient	$2,940	$3,925	1.0	0.0%	1.00	$3,925
		Outpatient	$0	$109,607	21.0	0.4%	-	$5,222
SANFORD MEDICAL CENTER FARGO	ND	Inpatient	$308,718	$169,219	23.0	0.4%	4.30	$7,357
		Outpatient	$212,885	$192,446	382.3	6.6%	-	$503
ST ALEXIUS MEDICAL CTR	ND	Inpatient	$154,291	$95,765	14.0	0.2%	5.07	$6,840
		Outpatient	$29,541	$38,640	183.3	3.2%	-	$211
TRINITY HOSPITALS	ND	Inpatient	$3,182	$53,799	11.0	0.2%	2.64	$4,891
		Outpatient	$29,502	$29,330	206.4	3.6%	-	$142
SANFORD MEDICAL CENTER	ND	Inpatient	$85,594	$124,962	5.0	0.1%	17.60	$24,992
		Outpatient	$58,761	$47,951	152.5	2.7%	-	$314
ESSENTIA HEALTH FARGO	ND	Inpatient	$130,221	$62,423	12.0	0.2%	2.00	$5,202
		Outpatient	$51,881	$84,573	282.6	4.9%	-	$299
Subtotal - Top 20		**Inpatient**	**$1,178,098**	**$1,794,023**	**121.0**	**2.1%**	**4.63**	**$14,827**
		Outpatient	**$982,083**	**$1,244,029**	**2,580.7**	**44.8%**	**-**	**$482**
All Other Facilities		Inpatient	**$2,099,604**	$1,274,233	151.0	2.6%	2.96	$8,439
		Outpatient	**$1,668,993**	$1,642,666	2,901.9	50.4%	-	$566
Total		**Inpatient**	**$3,277,702**	**$3,068,256**	**272.0**	**4.7%**	**3.70**	**$11,280**
		Outpatient	**$2,651,075**	**$2,886,695**	**5,482.5**	**95.3%**	**-**	**$527**

Employer Name: SAMPLE GROUP **Current Incurred Period: 01/01/2013 - 12/31/2013, Paid Through 03/31/2014**

Product: PREFERRED BLUE PPO

Top 20 Providers

Medical, Surgical, Primary Care, Ancillary, Laboratory, Facility-Based, & Home-Based Specialty Providers ranked by Total Cost

Provider	State	Specialty	Total Cost	Encounters	Encounter Distribution	Average Cost per Encounter
Y EAST FGO LAB SANFORD CLINIC BROADWA	ND	Laboratory	$21,199	342.7	2.3%	$62
RICHARD J MARSDEN MD	MN	Radiology	$16,081	92.3	0.6%	$174
RAFAEL OCEJO MD	ND	Pediatrics	$14,265	107.0	0.7%	$133
CATHERINE P FISHER MD	ND	Pathology	$11,556	306.6	2.1%	$38
JAN M BURY MD	ND	Obstetrics	$10,912	30.0	0.2%	$364
JAMES E HALVORSON MD	MN	Family Medicine	$10,078	73.5	0.5%	$137
MELISSA KUNKEL MD	ND	Pediatrics	$8,786	62.6	0.4%	$140
RHONDA R SCHAFER MCLEAN MD	ND	Obstetrics	$8,183	43.0	0.3%	$190
LUCY B MALKASIAN MD	ND	Pediatrics	$7,553	78.0	0.5%	$97
WILLIAM HUTCHISON MD	ND	Pediatrics	$7,486	55.0	0.4%	$136
LISA BRAUN PA	MN	Physicians Assistant	$7,121	96.5	0.7%	$74
TY CAMPUS LAB SANFORD SOUTH UNIVERSI	ND	Laboratory	$7,067	140.7	1.0%	$50
PATRICK E EMERY MD	MN	Family Medicine	$5,961	48.8	0.3%	$122
MAHESH PATEL MD	ND	Pediatrics	$5,961	16.0	0.1%	$373
SARA L DELANEY ST	ND	Speech Therapy	$5,939	71.0	0.5%	$84
MICHELLE R TINCHER MD	ND	Family Medicine	$5,760	50.0	0.3%	$115
PARAG KUMAR MD	ND	Pediatrics	$5,539	39.5	0.3%	$140
MICHELLE L MART ST	ND	Speech Therapy	$5,424	60.0	0.4%	$90
AARON M GARMAN MD	ND	Family Medicine	$5,418	112.7	0.8%	$48
KAREN R BROWN MD	ND	Pediatrics	$5,177	27.0	0.2%	$192
Subtotal - Top 20			**$175,466**	**1,852.8**	**12.6%**	**$95**
All Other Providers			$1,082,424	12,867.1	87.4%	$84
Total			**$1,257,890**	**14,719.9**	**100.0%**	**$85**

Employer Name: SAMPLE GROUP

Product: PREFERRED BLUE PPO

Current Incurred Period: 01/01/2013 - 12/31/2013, Paid Through 03/31/2014

Prior Incurred Period: 01/01/2012 - 12/31/2012, Paid Through 03/31/2014

Top 15 Specialties

Medical, Surgical, Primary Care, Ancillary, Laboratory, Facility-Based, & Home-Based Specialties ranked by Total Cost

	Encounters per 1,000 Members		Cost per Encounter		Cost per Member per Month			
Specialty	Current Period	Prior Period	Current Period	Prior Period	Current Period	Prior Period	$ Change	% Change
Family Medicine	642	634	$84.41	$86.82	$4.51	$4.58	-$0.07	-1.6%
Pediatrics	327	315	$126.00	$123.25	$3.43	$3.24	$0.19	6.0%
Hematology/Oncology	35	22	$675.74	$916.59	$1.95	$1.67	$0.27	16.2%
Obstetrics and Gynecology	111	130	$184.82	$196.56	$1.71	$2.13	-$0.41	-19.4%
Chiropractor	768	814	$24.98	$22.97	$1.60	$1.56	$0.04	2.5%
Radiology	163	193	$113.36	$159.59	$1.54	$2.57	-$1.02	-39.8%
Nursing Service Providers	250	275	$68.10	$75.17	$1.42	$1.72	-$0.30	-17.4%
Physicians Assistant	200	219	$74.95	$74.58	$1.25	$1.36	-$0.11	-8.3%
Internal Medicine	137	184	$108.48	$91.63	$1.24	$1.40	-$0.17	-11.9%
Behavioral Health	111	94	$103.01	$113.73	$0.96	$0.89	$0.06	7.2%
Rehabilitative Services	154	78	$73.47	$64.01	$0.94	$0.41	$0.53	127.3%
Pathology	150	156	$60.57	$67.20	$0.76	$0.87	-$0.12	-13.3%
CRNA	18	22	$394.53	$434.99	$0.58	$0.81	-$0.23	-28.8%
Anesthesiology	20	29	$330.56	$370.28	$0.56	$0.90	-$0.34	-38.0%
General Surgery	21	26	$297.47	$323.95	$0.51	$0.71	-$0.20	-27.8%
Subtotal - Top 15	**3,106**	**3,191**	**$88.68**	**$93.39**	**$22.95**	**$24.84**	**-$1.88**	**-7.6%**
All Other Specialties	414	419	$133.46	$154.64	$4.60	$5.40	-$0.80	-14.8%
Total	**3,520**	**3,610**	**$93.95**	**$100.51**	**$27.56**	**$30.24**	**-$2.68**	**-8.9%**

Employer Name: SAMPLE GROUP

Current Incurred Period: 01/01/2013 - 12/31/2013, Paid Through 03/31/2014

Product: PREFERRED BLUE PPO

Network Utilization

Utilization of medical services by network status

Employer Group

	In-Network			Out-of-Network			Total			
Service Category	**Encounters**	**Cost PMPM**	**Total Cost**	**Encounters**	**Cost PMPM**	**Total Cost**	**Encounters**	**Cost PMPM**	**Total Cost**	**% Total Cost In-Network**
Facility Inpatient	272	$64.84	$3,068,256	0	$0.00	$0	272	$64.84	$3,068,256	100.0%
Facility Outpatient	5,544	$61.57	$2,913,257	0	$0.00	$0	5,544	$61.57	$2,913,257	100.0%
Professional Services	39,256	$81.17	$3,841,174	0	$0.00	$0	39,256	$81.17	$3,841,174	100.0%
Ancillary	6,759	$20.04	$948,337	0	$0.00	$0	6,759	$20.04	$948,337	100.0%
Total	**51,831**	**$227.62**	**$10,771,024**	**0**	**$0.00**	**$0**	**51,831**	**$227.62**	**$10,771,024**	**100.0%**

Benchmark

	In-Network	Out-of-Network	Total	
Service Category	**Cost PMPM**	**Cost PMPM**	**Cost PMPM**	**% Total Cost In-Network**
Facility Inpatient	$69.91	$0.00	$69.91	100.0%
Facility Outpatient	$54.69	$0.00	$54.69	100.0%
Professional Services	$84.70	$0.00	$84.70	100.0%
Ancillary	$18.79	$0.00	$18.79	100.0%
Total	**$228.09**	**$0.00**	**$228.09**	**100.0%**

Employer Name: SAMPLE GROUP

Product: PREFERRED BLUE PPO

Current Incurred Period: 01/01/2013-12/31/2013, Paid Through 03/31/2014

Prior Incurred Period: 01/01/2012-12/31/2012, Paid Through 03/31/2014

Provider Cost Savings and Employee Cost Sharing Analysis

Provider cost and employee contribution as a percent of total billed medical charges

		Employer Group				Benchmark	
		Total		Total PMPM		Total PMPM	
	Category	Current Period	Prior Period	Current Period	Prior Period	Current Period	Prior Period
Savings as a % of Total Billed Charges	Billed Charges	$23,941,096	$22,954,120	$505.94	$540.27	$450	$445
	Provider Cost	$10,771,024	$10,427,008	$227.62	$245.42	$228	$223
	Provider Savings Percentage	47.0%	47.1%	47.0%	47.1%	39.8%	40.3%
	Employee Cost Sharing Percentage	8.0%	7.5%	8.0%	7.5%	9.5%	9.6%
Provider Savings (Billed Less Allowed)	Facility Inpatient	$2,421,023	$2,692,377	$51.16	$63.37	$41.80	$45.92
	Facility Outpatient	$3,620,525	$3,323,456	$76.51	$78.22	$59.00	$56.90
	Professional Services	$3,748,837	$3,484,611	$79.22	$82.02	$61.66	$60.84
	Ancillary	$1,461,597	$1,304,820	$30.89	$30.71	$16.91	$15.55
	Subtotal	**$11,251,981**	**$10,805,264**	**$237.78**	**$254.33**	**$179.37**	**$179.22**
Employee Cost Sharing	Deductible	$550,703	$505,493	$11.64	$11.90	$18.70	$18.04
	Coinsurance	$909,804	$795,303	$19.23	$18.72	$16.09	$16.43
	Copayment	$457,584	$421,053	$9.67	$9.91	$8.07	$8.22
	Other	$0	$0	$0.00	$0.00	$0.00	$0.00
	Subtotal	**$1,918,090**	**$1,721,848**	**$40.53**	**$40.53**	**$42.87**	**$42.69**
	Total Savings	**$13,170,072**	**$12,527,112**	**$278.32**	**$294.85**	**$222.23**	**$221.90**

Employer Name: SAMPLE GROUP

Product: PREFERRED BLUE PPO

Current Incurred Period: 01/01/2013 - 12/31/2013, Paid Through 03/31/2014

Prior Incurred Period: 01/01/2012 - 12/31/2012, Paid Through 03/31/2014

Medical Cost and Utilization by Detailed Service Category

	Employer Group						Benchmark					
	Encounters per 1,000 Members		Cost PMPM				Encounters per 1,000 Members		Cost PMPM			
Service Category	Current Period	Prior Period	Current Period	Prior Period	PMPM Change	% Change	Current Period	Prior Period	Current Period	Prior Period	PMPM Change	% Change
Facility Inpatient												
Acute	68	74	$64.77	$74.52	-$9.75	-13.1%	63	65	$69.61	$68.99	$0.62	0.9%
Rehab/Skilled Nursing Facility	1	2	$0.07	$2.62	-$2.56	-97.4%	1	1	$0.30	$0.72	-$0.42	-58.4%
Total Facility Inpatient	**69**	**76**	**$64.84**	**$77.15**	**-$12.31**	**-16.0%**	**64**	**66**	**$69.91**	**$69.71**	**$0.20**	**0.3%**
Facility Outpatient												
Emergency Room	84	94	$4.54	$4.18	$0.36	8.7%	94	103	$3.45	$3.35	$0.10	3.1%
OP Facility Diagnostic	88	93	$4.24	$2.42	$1.82	75.3%	92	94	$2.88	$2.46	$0.42	17.2%
OP Facility Laboratory	292	292	$5.09	$4.50	$0.58	13.0%	375	384	$4.17	$3.96	$0.21	5.3%
OP Facility Other	531	503	$16.05	$14.57	$1.47	10.1%	514	525	$15.52	$15.50	$0.01	0.1%
OP Facility Radiology	146	152	$12.88	$16.96	-$4.08	-24.1%	169	185	$11.98	$12.74	-$0.77	-6.0%
OP Facility Surgery	265	282	$18.77	$20.68	-$1.91	-9.2%	326	336	$16.69	$16.47	$0.22	1.3%
Total Facility Outpatient	**1,406**	**1,417**	**$61.57**	**$63.32**	**-$1.75**	**-2.8%**	**1,570**	**1,626**	**$54.69**	**$54.49**	**$0.20**	**0.4%**
Professional Services												
Allergy Tests and Injections	115	128	$0.51	$0.60	-$0.08	-13.9%	85	86	$0.43	$0.43	$0.00	0.3%
Anesthesia	117	117	$5.50	$5.38	$0.12	2.2%	118	118	$5.09	$4.96	$0.13	2.7%
Consultations	57	69	$0.89	$0.90	$0.00	-0.5%	28	30	$0.52	$0.54	-$0.03	-4.6%
Diagnostic Testing	263	288	$1.70	$2.29	-$0.59	-25.8%	217	233	$1.61	$2.04	-$0.42	-20.8%
Emergency Room	92	96	$1.93	$1.90	$0.03	1.6%	94	101	$1.58	$1.66	-$0.08	-4.5%
Immunizations and Injections	696	680	$5.30	$5.17	$0.13	2.6%	745	684	$5.52	$4.84	$0.68	14.0%
Inpatient Visits	216	176	$3.66	$2.83	$0.83	29.3%	198	189	$4.63	$3.17	$1.46	46.1%
Laboratory	1,043	1,092	$4.18	$4.08	$0.10	2.4%	893	906	$4.30	$4.33	-$0.04	-0.9%
Mental Health	52	338	$0.57	$2.56	-$2.00	-77.9%	95	440	$0.65	$3.45	-$2.80	-81.2%
Obstetrics	65	57	$3.78	$3.34	$0.44	13.2%	52	49	$2.58	$2.53	$0.05	2.1%
Office Visits	2,659	2,769	$17.02	$16.77	$0.25	1.5%	2,590	2,592	$17.91	$16.94	$0.97	5.7%
Pathology	176	211	$2.26	$2.07	$0.19	9.1%	162	184	$1.98	$2.21	-$0.23	-10.6%

Employer Name: SAMPLE GROUP

Product: PREFERRED BLUE PPO

Current Incurred Period: 01/01/2013 - 12/31/2013, Paid Through 03/31/2014

Prior Incurred Period: 01/01/2012 - 12/31/2012, Paid Through 03/31/2014

Medical Cost and Utilization by Detailed Service Category

	Employer Group						Benchmark					
	Encounters per 1,000 Members		Cost PMPM				Encounters per 1,000 Members		Cost PMPM			
Service Category	Current Period	Prior Period	Current Period	Prior Period	PMPM Change	% Change	Current Period	Prior Period	Current Period	Prior Period	PMPM Change	% Change
Professional Services												
Physical Medicine/Rehab	1,812	1,831	$4.16	$3.66	$0.51	13.9%	2,016	2,038	$4.89	$4.41	$0.48	10.8%
Preventive Medicine	405	386	$4.11	$3.82	$0.29	7.6%	371	354	$4.31	$3.80	$0.51	13.4%
Professional Other	435	195	$3.84	$1.70	$2.14	126.1%	557	201	$4.99	$1.76	$3.23	183.3%
Radiology	580	599	$6.92	$9.05	-$2.13	-23.5%	554	571	$7.54	$7.71	-$0.18	-2.3%
Surgery	971	1,040	$13.68	$15.28	-$1.60	-10.5%	910	942	$15.19	$15.58	-$0.39	-2.5%
Vision, Hearing and Speech	200	174	$1.15	$0.88	$0.27	30.3%	180	159	$0.99	$0.80	$0.19	24.0%
Total Professional Services	**9,955**	**10,249**	**$81.17**	**$82.28**	**-$1.11**	**-1.3%**	**9,865**	**9,877**	**$84.70**	**$81.17**	**$3.53**	**4.3%**
Ancillary												
Drugs Administered	1,359	1,377	$12.87	$17.62	-$4.75	-27.0%	1,215	1,242	$12.79	$11.94	$0.85	7.2%
Durable Medical Equipment	75	88	$1.31	$1.29	$0.03	2.0%	72	78	$1.48	$1.60	-$0.11	-7.2%
Home Health/Hospice Visits	14	34	$0.53	$0.42	$0.11	25.0%	13	12	$0.49	$0.46	$0.03	6.1%
Services and Supplies	250	233	$1.86	$1.36	$0.50	36.3%	214	222	$1.72	$1.71	$0.01	0.7%
Transportation Services	16	16	$3.47	$1.98	$1.49	75.1%	15	16	$2.30	$2.21	$0.09	4.1%
Total Ancillary	**1,714**	**1,748**	**$20.04**	**$22.67**	**-$2.63**	**-11.6%**	**1,528**	**1,570**	**$18.79**	**$17.92**	**$0.87**	**4.9%**
Total			**$227.62**	**$245.42**	**-$17.80**	**-7.3%**			**$228.09**	**$223.29**	**$4.80**	**2.2%**

Employer Name: SAMPLE GROUP

Current Incurred Period: 01/01/2013-12/31/2013, Paid Through 03/31/2014

Product: PREFERRED BLUE PPO

High Cost Cases

Members with greater than $25,000 in claim amounts ranked by total cost

			Inpatient Facility		Outpatient Facility		Professional Services		Pharmacy		Ancillary
Coverage Status	Member Status	Total Cost	Cost	Admits	Cost	Encounters	Cost	Encounters	Cost	Scripts	Cost
DEPENDENT	ACTIVE	$498,594	$345,358	4	$21,349	38	$85,093	219	$339	25	$46,456
DEPENDENT	ACTIVE	$204,877	$177,650	2	$487	1	$19,275	82	$0	2	$7,464
DEPENDENT	ACTIVE	$182,080	$52,053	4	$70,634	41	$42,091	133	$4,397	86	$12,906
DEPENDENT	ACTIVE	$112,949	$17,926	1	$24,795	28	$12,784	92	$11,272	86	$46,172
DEPENDENT	ACTIVE	$101,266	$49,069	1	$15,797	24	$20,030	63	$96	8	$16,274
DEPENDENT	ACTIVE	$83,830	$24,268	1	$17,677	14	$41,739	123	$142	43	$4
DEPENDENT	ACTIVE	$82,806	$26,377	6	$34,559	39	$12,877	111	$790	76	$8,203
DEPENDENT	ACTIVE	$80,822	$20,534	4	$29,300	125	$15,766	102	$2,297	142	$12,925
DEPENDENT	ACTIVE	$73,011	$0	0	$43,874	18	$25,575	82	$2,432	13	$1,129
DEPENDENT	ACTIVE	$65,186	$25,681	2	$25,595	30	$11,546	49	$331	71	$2,033
DEPENDENT	ACTIVE	$60,922	$58,826	1	$0	0	$2,096	21	$0	0	$0
DEPENDENT	ACTIVE	$60,896	$58,734	1	$0	0	$2,155	16	$7	2	$0
DEPENDENT	ACTIVE	$60,207	$34,933	1	$17,319	20	$7,721	35	$0	5	$234
DEPENDENT	ACTIVE	$59,839	$35,107	3	$1,570	4	$9,596	67	$13,565	11	$0
DEPENDENT	ACTIVE	$56,494	$40,022	3	$1,677	9	$13,915	49	$116	10	$763
DEPENDENT	ACTIVE	$54,079	$0	0	$2,062	2	$4,042	24	$47,497	21	$478
DEPENDENT	ACTIVE	$49,930	$31,046	2	$3,180	4	$15,643	57	$39	5	$23
DEPENDENT	ACTIVE	$49,242	$0	0	$19,717	18	$18,035	71	$174	14	$11,317
DEPENDENT	ACTIVE	$48,595	$38,911	2	$4,494	19	$5,148	26	$42	13	$0
DEPENDENT	ACTIVE	$46,902	$10,875	1	$14,232	7	$8,952	27	$82	7	$12,760
DEPENDENT	ACTIVE	$46,512	$27,910	2	$0	0	$6,708	24	$0	0	$11,894
DEPENDENT	TERMED	$44,795	$0	0	$14,102	9	$21,293	24	$2,898	12	$6,503
DEPENDENT	ACTIVE	$43,344	$25,803	1	$7,862	24	$6,233	44	$2,313	60	$1,133
DEPENDENT	ACTIVE	$40,921	$0	0	$21,018	77	$15,282	30	$444	13	$4,177
DEPENDENT	ACTIVE	$40,777	$0	0	$31,229	10	$8,597	15	$0	3	$952
DEPENDENT	ACTIVE	$38,918	$0	0	$35,853	4	$2,350	12	$140	9	$574

Employer Name: SAMPLE GROUP

Current Incurred Period: 01/01/2013-12/31/2013, Paid Through 03/31/2014

Product: PREFERRED BLUE PPO

High Cost Cases

Members with greater than $25,000 in claim amounts ranked by total cost

			Inpatient Facility		Outpatient Facility		Professional Services		Pharmacy		Ancillary
Coverage Status	Member Status	Total Cost	Cost	Admits	Cost	Encounters	Cost	Encounters	Cost	Scripts	Cost
DEPENDENT	ACTIVE	$38,221	$31,174	1	$0	0	$7,047	32	$0	0	$0
DEPENDENT	ACTIVE	$36,312	$19,650	1	$1,020	2	$1,284	8	$0	0	$14,358
DEPENDENT	ACTIVE	$31,231	$27,141	1	$1,018	3	$2,741	17	$32	10	$299
DEPENDENT	ACTIVE	$30,304	$8,238	1	$10,805	12	$10,186	33	$715	19	$360
DEPENDENT	ACTIVE	$30,231	$0	0	$18,688	19	$8,853	68	$95	51	$2,595
DEPENDENT	ACTIVE	$30,215	$22,719	2	$3,131	2	$4,365	76	$0	4	$0
DEPENDENT	TERMED	$29,971	$22,575	2	$488	9	$4,664	32	$2,243	36	$0
DEPENDENT	TERMED	$29,463	$19,503	2	$0	0	$9,838	52	$122	16	$0
DEPENDENT	ACTIVE	$28,829	$26,973	1	$0	0	$1,122	11	$735	10	$0
DEPENDENT	ACTIVE	$28,547	$20,789	1	$0	0	$7,420	62	$252	6	$87
DEPENDENT	ACTIVE	$26,861	$0	0	$23,131	17	$1,645	12	$515	19	$1,570
DEPENDENT	ACTIVE	$26,464	$0	0	$512	4	$834	9	$25,118	47	$0
DEPENDENT	ACTIVE	$26,126	$11,863	1	$7,274	8	$6,206	16	$0	2	$783
DEPENDENT	ACTIVE	$25,967	$0	0	$19,111	18	$6,103	27	$338	15	$414
DEPENDENT	ACTIVE	$25,050	$17,982	1	$249	7	$4,999	35	$1,193	26	$628
SUBSCRIBER	ACTIVE	$282,719	$11,393	3	$72,576	197	$26,894	114	$1,397	53	$170,459
SUBSCRIBER	ACTIVE	$219,329	$180,510	1	$4,421	10	$20,306	60	$632	16	$13,459
SUBSCRIBER	ACTIVE	$136,530	$3,925	1	$109,607	21	$8,566	36	$1,021	6	$13,411
SUBSCRIBER	ACTIVE	$128,682	$93,658	2	$7,936	13	$16,587	89	$10,340	119	$161
SUBSCRIBER	ACTIVE	$126,402	$81,806	4	$15,967	47	$21,519	66	$344	15	$6,765
SUBSCRIBER	ACTIVE	$125,617	$84,179	2	$928	3	$36,181	85	$39	44	$4,290
SUBSCRIBER	ACTIVE	$105,411	$64,220	2	$25,800	26	$13,630	65	$46	18	$1,715
SUBSCRIBER	ACTIVE	$104,775	$0	0	$13,899	27	$4,840	32	$723	18	$85,313
SUBSCRIBER	ACTIVE	$73,401	$0	0	$3,026	12	$2,245	21	$28,843	24	$39,287
SUBSCRIBER	ACTIVE	$62,020	$51,663	1	$1,133	1	$4,070	18	$1,260	26	$3,894
SUBSCRIBER	TERMED	$61,712	$20,615	1	$3,618	4	$14,170	55	$9,912	27	$13,398

Employer Name: SAMPLE GROUP

Current Incurred Period: 01/01/2013-12/31/2013, Paid Through 03/31/2014

Product: PREFERRED BLUE PPO

High Cost Cases

Members with greater than $25,000 in claim amounts ranked by total cost

			Inpatient Facility		Outpatient Facility		Professional Services		Pharmacy		Ancillary
Coverage Status	Member Status	Total Cost	Cost	Admits	Cost	Encounters	Cost	Encounters	Cost	Scripts	Cost
SUBSCRIBER	ACTIVE	$59,839	$36,512	3	$6,636	29	$8,086	55	$4,576	57	$4,029
SUBSCRIBER	ACTIVE	$59,009	$45,760	2	$240	1	$12,941	43	$69	2	$0
SUBSCRIBER	ACTIVE	$57,769	$24,432	1	$0	0	$19,032	21	$195	13	$14,110
SUBSCRIBER	ACTIVE	$56,069	$0	0	$0	0	$0	0	$56,069	9	$0
SUBSCRIBER	ACTIVE	$46,083	$0	0	$20,427	21	$23,667	46	$471	18	$1,488
SUBSCRIBER	ACTIVE	$44,118	$0	0	$8,255	10	$2,753	29	$32,330	73	$780
SUBSCRIBER	ACTIVE	$43,155	$38,834	1	$0	0	$3,686	21	$96	13	$179
SUBSCRIBER	ACTIVE	$41,636	$0	0	$28,063	23	$7,804	48	$2,233	36	$3,535
SUBSCRIBER	ACTIVE	$38,698	$35,723	1	$0	0	$2,975	11	$0	5	$0
SUBSCRIBER	ACTIVE	$37,898	$19,794	1	$8,821	5	$6,936	58	$81	27	$2,265
SUBSCRIBER	TERMED	$35,259	$0	0	$32,825	5	$65	1	$1,692	13	$676
SUBSCRIBER	ACTIVE	$34,770	$0	0	$21,400	11	$10,057	62	$3,071	72	$241
SUBSCRIBER	ACTIVE	$34,636	$0	0	$25,481	18	$5,362	11	$160	22	$3,633
SUBSCRIBER	ACTIVE	$33,882	$29,357	1	$0	0	$4,436	34	$88	67	$0
SUBSCRIBER	ACTIVE	$33,851	$0	0	$2,065	5	$3,412	23	$0	1	$28,374
SUBSCRIBER	ACTIVE	$32,317	$0	0	$0	0	$3,158	22	$6,236	38	$22,923
SUBSCRIBER	ACTIVE	$30,656	$0	0	$5,419	5	$5,585	135	$19,257	88	$394
SUBSCRIBER	TERMED	$30,437	$0	0	$26,489	6	$1,962	7	$0	1	$1,985
SUBSCRIBER	ACTIVE	$28,783	$0	0	$15,623	20	$9,083	31	$414	29	$3,663
SUBSCRIBER	ACTIVE	$27,233	$0	0	$527	2	$10,571	46	$15,505	64	$629
SUBSCRIBER	ACTIVE	$26,966	$19,332	1	$3,976	14	$3,155	36	$126	30	$377
SUBSCRIBER	ACTIVE	$26,941	$0	0	$4,676	4	$6,785	51	$15,329	46	$151
SUBSCRIBER	ACTIVE	$26,534	$0	0	$15,714	20	$10,057	18	$358	7	$405
SUBSCRIBER	ACTIVE	$25,904	$7,982	1	$0	0	$1,422	19	$15,669	79	$831
SUBSCRIBER	ACTIVE	$25,819	$0	0	$2,472	7	$23,345	16	$2	4	$0
SUBSCRIBER	ACTIVE	$25,813	$0	0	$0	0	$1,527	24	$13,486	31	$10,800

Employer Name: SAMPLE GROUP

Current Incurred Period: 01/01/2013-12/31/2013, Paid Through 03/31/2014

Product: PREFERRED BLUE PPO

High Cost Cases

Members with greater than $25,000 in claim amounts ranked by total cost

			Inpatient Facility		Outpatient Facility		Professional Services		Pharmacy		Ancillary
Coverage Status	Member Status	Total Cost	Cost	Admits	Cost	Encounters	Cost	Encounters	Cost	Scripts	Cost
SUBSCRIBER	ACTIVE	$25,476	$0	0	$20,695	6	$4,339	8	$1	5	$442
SUBSCRIBER	ACTIVE	$25,186	$0	0	$695	5	$13,331	10	$305	7	$10,855
High Cost		**$5,172,919**	**$2,179,388**	**85**	**$1,053,220**	**1,242**	**$886,388**	**3,611**	**$363,146**	**2,221**	**$690,387**
% of Total		**42.0%**	**69.0%**	**31.1%**	**36.0%**	**22.0%**	**23.0%**	**9.0%**	**27.0%**	**8.0%**	**74.0%**
Total Costs		**$12,238,243**	**$3,150,803**	**273**	**$2,924,070**	**5,579**	**$3,852,377**	**39,356**	**$1,364,135**	**28,013**	**$930,237**

Employer Name: SAMPLE GROUP

Product: PREFERRED BLUE PPO

Current Incurred Period: 01/01/2013 - 12/31/2013, Paid Through 03/31/2014

Prior Incurred Period: 01/01/2012 - 12/31/2012, Paid Through 03/31/2014

Pharmacy Overview

Key pharmacy performance metrics

		Employer Group			Benchmark		
		Current Period	Prior Period	% Change	Current Period	Prior Period	% Change
Demographics	Member Months	47,320	0	0.0%	-	-	-
	Average Number of Members	3,943.3	0.0	0.0%	-	-	-
	Average Number of Contracts	1,623.8	0.0	0.0%	-	-	-
	Average Number of Members per Contract	10.9	0.0	0.0%	-	-	-
Utilization	Prescriptions	27,968	0	0.0%	-	-	-
	Percent Generic	80.4%	0.0%	0.0%	80.5%	0.0%	0.0%
	Percent Formulary	88.5%	0.0%	0.0%	89.0%	0.0%	0.0%
	Percent Mail Order	0.1%	0.0%	0.0%	0.1%	0.0%	0.0%
	Prescriptions per 1,000 Members	7,092	0	0.0%	7,003	0	0.0%
	Prescriptions per 1,000 Contracts	17,224	0	0.0%	17,008	0	0.0%
	Average Day Supply per Prescription	33	0	0.0%	35	0	0.0%
Cost	Billed Charges	$4,101,723	$0	0.0%	-	-	-
	Provider Cost	$1,355,930	$0	0.0%	-	-	-
	Employee Cost Sharing	$494,194	$0	0.0%	-	-	-
	Provider Cost per Contract	$835	$0	0.0%	$920	$0	0.0%
Cost per Prescription	Billed Charges per Prescription	$146.66	$0.00	0.0%	$150.97	$0.00	0.0%
	Provider Cost per Prescription	$48.48	$0.00	0.0%	$54.10	$0.00	0.0%
	Employee Cost Sharing per Prescription	$17.67	$0.00	0.0%	$19.66	$0.00	0.0%
By Source:	Generic	$13.19	$0.00	0.0%	$13.97	$0.00	0.0%
	Brand	$193.54	$0.00	0.0%	$220.25	$0.00	0.0%
By Formulary:	Formulary	$48.53	$0.00	0.0%	$54.56	$0.00	0.0%
	Non-Formulary	$48.14	$0.00	0.0%	$50.41	$0.00	0.0%
By Channel:	Mail Order	$2308.25	$0.00	0.0%	$344.98	$0.00	0.0%
	Retail	$46.38	$0.00	0.0%	$53.85	$0.00	0.0%
Cost per Member per Month (PMPM)	Billed Charges PMPM	$86.68	$0.00	0.0%	$88.11	$0.00	0.0%
	Provider Cost PMPM	$28.65	$0.00	0.0%	$31.57	$0.00	0.0%
	Employee Cost Sharing PMPM	$10.44	$0.00	0.0%	$11.47	$0.00	0.0%

Employer Name: SAMPLE GROUP

Product: PREFERRED BLUE PPO

Current Incurred Period: 01/01/2013 - 12/31/2013,Paid Through 03/31/2014

Prior Incurred Period: 01/01/2012 - 12/31/2012,Paid Through 03/31/2014

Pharmacy Cost and Utilization by Formulary and Tier

	Employer Group				Benchmark			
	Cost PMPM		Scripts per 1,000 Members		Cost PMPM		Scripts per 1,000 Members	
	Current Period	Prior Period	Current Period	Prior Period	Current Period	Prior Period	Current Period	Prior Period
Formulary	**$25.39**	**$25.05**	**6,278**	**6,570**	**$28.33**	**$26.23**	**6,232**	**6,311**
Tier Unknown	$25.39	$25.05	6,278	6,570	$28.33	$26.23	6,232	6,311
Non Formulary	**$3.27**	**$2.96**	**814**	**845**	**$3.24**	**$3.20**	**771**	**913**
Unknown	**$0.00**	**$0.00**	**0**	**0**	**$0.00**	**$0.00**	**0**	**1**
Total	**$28.65**	**$28.02**	**7,092**	**7,415**	**$31.57**	**$29.43**	**7,004**	**7,225**

Employer Name: SAMPLE GROUP

Current Incurred Period: 01/01/2013 - 12/31/2013, Paid Through 03/31/2014

Product: PREFERRED BLUE PPO

Top 20 Prescriptions Ranked by Cost

	Employer Group					
Drug Name	Number of Scripts	Average Days Supply	Cost	Employee Cost Sharing	Scripts per 1,000 Members	Cost PMPM
ENBREL	68	42.0	$147,227	$3,115	17.2	$3.11
HUMIRA	50	32.7	$73,481	$1,998	12.7	$1.55
OMNITROPE	20	38.5	$70,392	$2,097	5.1	$1.49
CRESTOR	203	48.8	$42,429	$11,370	51.5	$0.90
ADVAIR DISKUS	157	30.8	$33,892	$8,114	39.8	$0.72
LANTUS SOLOSTAR	95	49.5	$26,959	$4,965	24.1	$0.57
NOVOLOG	69	41.5	$26,545	$3,505	17.5	$0.56
HUMALOG	65	51.2	$26,119	$3,306	16.5	$0.55
OXYCONTIN	45	28.3	$24,559	$2,060	11.4	$0.52
NEXIUM	108	38.7	$24,514	$6,366	27.4	$0.52
DEXTROAMPHETAMINE-AMPHETAMINE	176	32.4	$22,064	$7,911	44.6	$0.47
ENOXAPARIN SODIUM	20	17.5	$20,146	$2,135	5.1	$0.43
DIOVAN	98	53.3	$17,910	$5,608	24.9	$0.38
ONE TOUCH ULTRA TEST STRIPS	99	35.2	$17,759	$2,579	25.1	$0.38
METHYLPHENIDATE ER	126	32.0	$15,438	$5,691	32.0	$0.33
VYVANSE	97	30.7	$14,762	$4,755	24.6	$0.31
NUTROPIN AQ NUSPIN	14	26.4	$14,170	$631	3.6	$0.30
CELEBREX	59	36.3	$13,368	$3,111	15.0	$0.28
CYMBALTA	95	35.1	$13,254	$1,833	24.1	$0.28
ANDROGEL	25	31.4	$11,194	$1,590	6.3	$0.24
Subtotal - Top 20	**1689**	**38.3**	**$656,181**	**$82,739**	**428.3**	**$13.87**
All Other Drugs	**26279**	**33.1**	**$699,749**	**$411,455**	**6,664.2**	**$14.79**
Total	**27968**	**33.4**	**$1,355,930**	**$494,194**	**7,092.5**	**$28.65**

Pharmacy Cost by Therapeutic Class

Top 20 pharmaceutical therapeutic classes ranked by cost

	Employer Group								Benchmark	
Therapeutic Class	Number of Scripts	Average Days Supply	% Generic Scripts	% Formulary Scripts	Cost	Cost per Script	Scripts per 1,000 Members	Cost PMPM	Scripts per 1,000 Members	Cost PMPM
Hormones, synthetic substitutes, & metabolic agents	3,708	43.5	74.4%	93.1%	$305,473	$82	940	$6.46	941	$5.43
Biologic & immunologic agents	226	28.6	27.9%	50.4%	$224,745	$994	57	$4.75	58	$5.16
Central nervous system agents	8,338	30.0	90.9%	91.6%	$218,134	$26	2,114	$4.61	2,028	$6.80
Cardiovascular agents	4,294	52.3	83.1%	93.4%	$138,067	$32	1,089	$2.92	1,127	$2.35
Respiratory agents	2,364	26.6	61.3%	76.4%	$106,874	$45	599	$2.26	543	$2.40
Gastrointestinal agents	1,089	38.2	81.0%	77.6%	$54,381	$50	276	$1.15	264	$1.21
Anti-infective agents	3,538	11.8	95.0%	98.0%	$51,727	$15	897	$1.09	898	$1.62
Medical supplies	503	42.6	0.2%	88.7%	$47,832	$95	128	$1.01	116	$0.86
Skin & mucus membrane condition agents	844	21.6	78.3%	78.4%	$46,508	$55	214	$0.98	226	$1.21
Undefined NDC	863	31.6	86.9%	81.7%	$43,704	$51	219	$0.92	187	$1.42
Miscellaneous agents	414	23.4	13.0%	25.8%	$32,796	$79	105	$0.69	105	$0.80
Blood formation & coagulation agents	293	42.6	77.8%	82.9%	$31,137	$106	74	$0.66	90	$0.45
Antineoplastic agents	113	49.8	85.0%	85.8%	$14,244	$126	29	$0.30	29	$1.15
Ophthalmic preparations	393	18.9	69.2%	86.5%	$12,451	$32	100	$0.26	107	$0.29
Nutritional agents	225	53.2	75.6%	79.1%	$8,494	$38	57	$0.18	53	$0.15
Compounding products	73	26.7	0.0%	0.0%	$7,054	$97	19	$0.15	16	$0.10
Electrolyte, caloric, water balance agents	501	52.8	91.8%	94.4%	$6,211	$12	127	$0.13	163	$0.07
Otic preparations	129	11.1	65.1%	96.9%	$5,530	$43	33	$0.12	32	$0.09
Mouth & throat preparations	60	15.8	96.7%	90.0%	$568	$9	15	$0.01	19	$0.01
Diagnostic agents	0	0.0	0.0%	0.0%	$0	$0	0	$0.00	1	$0.00
Total	**27,968**	**33.4**	**80.4%**	**88.5%**	**$1,355,930**	**$48**	**7,092**	**$28.65**	**7,003**	**$31.57**

Report Descriptions

Section 1: Summary Reports

Executive Summary
Account Summary
Membership Trend by Contract Type
Summary Trend by Major Type of Service
Membership Distribution by Age and Gender
Membership Health Risk Distribution
Medical Claims Distribution
Quality

Section 2: Financial Reports (Paid Period Based)

Financial Overview
Claim Cost by Age, Gender and Relationship to Contract Holder
Claim Lag
Premium and Claim Cost Analysis

Section 3: Cost and Utilization Detail Reports

Top 20 Episode Families Ranked by Cost
Total Costs by Disease
Disease Related Costs
Top 20 Facilities
Top 20 Providers
Top 15 Specialties
Network Utilization
Provider Cost Savings and Employee Cost Sharing Analysis
Medical Cost and Utilization by Detailed Service Category
High Cost Cases

Report Descriptions

Section 4: Pharmacy Reports

Pharmacy Overview
Pharmacy Cost and Utilization by Formulary and Tier
Top 20 Prescriptions Ranked by Cost
Pharmacy Cost by Therapeutic Class

Glossary

Term	Definition
Allowed Amount	Total amount allowed under the medical plan including the employee paid portion of deductibles, co-pays, coinsurance, the employer paid portion (paid amount) and COB. Allowed amount does not include plan and administrative exclusions such as duplicate claims, ineligible claims, network discount savings and R&C savings.
Average Age	The average age of the members covered under the plan for the reporting period.
Average Cost per Contract	The total cost divided by the average number of contract holders for the reporting period
Average Cost per Episode	The total cost divided by the number of episodes.
Average Cost per Member	The total cost divided by the average number of members for the reporting period
Average Days Supply per Prescription	The number of days supplied per prescription.
Average Length of Stay (ALOS)	The number of days, counted from the day of admission to the day of discharge, that a plan member is confined to a hospital or other facility for each admission. Number of inpatient days divided by the number of inpatient admissions.
Average Members per Contract	Number of members associated with a contract holder. The number of months each member was enrolled during the reporting period is used in the calculation therefore fractional or partial members will be associated with a contract holder.
Average Members per Family	Number of members enrolled under family coverage for a contract holder. The number of months each member was enrolled during the reporting period is used in the calculation therefore fractional or partial members will be associated with a contract holder.
Average Number of Contracts	Number of members defined as a contract holder. The number of months each member was enrolled during the reporting period is used in the calculation therefore a fractional number of contracts will be reported.
Average Number of Members	Number of members enrolled during the reporting period. The number of months each member was enrolled during the reporting period is used in the calculation therefore a fractional number of members will be reported.
Benchmark	Comparative cost and utilization statistics based on the experience of similar member populations. Benchmarks are adjusted for the plan sponsor age and gender mix and mix of episodes as appropriate for comparative purposes.
Billed Charges	Total amount of charges requested or billed by the provider for services.
Brand	A prescription drug that has been patented and is only available through one manufacturer.
Capitation	A method of paying for healthcare services on the basis of the number of patients who are covered for specific services over a specified period of time rather than the cost or number of services that are actually provided.
Coinsurance	A specified percent of costs that a member must pay out-of-pocket for services once a deductible is met.
Completed Episode	An episode of care is termed “complete” based on the absence of treatment for a medical condition for a specified period of time.
Compliance Rate (Quality)	Percent of recommended treatments received by the member population. Ratio of the Quality Opportunities-With Compliance to Total Quality Opportunities.
Contract Holder	The individual in whose name a contract is issued. The employee covered under an employer's group health contract. The contract holder (or subscriber) can enroll dependents under family coverage.
Co-payment	A specified dollar amount that a member must pay out-of-pocket for a specified service at the time the service is rendered.
Cost per Encounter	Total cost divided by the total number of encounters.
Cost per Episode	Total Cost divided by the number of episodes.

Cost per Member per Month (PMPM)	Cost divided by the number of enrolled member months during the reporting period.
Cost per Prescription	See Cost per Encounter
Deductible	A specified dollar amount that a member must pay out-of-pocket each year for covered services before the health plan assumes any liability for the cost of covered services.
Disease Related Costs	Cost of services related to a specific disease.
Employee Cost Sharing	When an employee pays out of pocket for a portion of the covered medical expense. Deductible, coinsurance, and co-pay are all forms of employee cost sharing.
Encounters	A contact between a patient and the health care system for a related set of service(s) for one or more medical conditions that occur in a given day for a member. For Outpatient Facility, Professional, and Ancillary Type of Services, each related set of visits and services per day is a single encounter. For Inpatient Facility, each confinement is a single encounter where confinements can span multiple days. For Pharmacy Type of Services, each service or prescription is a single encounter.
Encounters per 1,000 members	The encounter rate per 1,000 members. The number of encounters divided by the average number of members in the reporting period multiplied by 1,000.
Episode Families	An Episode Family is a group of related episodes of care.
Episode Treatment Group (ETG)	A clinical classification methodology combining medical and pharmacy services into mutually exclusive and exhaustive categories called episodes of care.
Episode(s) of Care	The unique occurrences of a medical condition or disease for a patient and the services involved (e.g. provider visits, labs, hospitalization, medications) in diagnosing and managing their treatment.
Formulary	Preferred Drug List of brand-name and generic medications that have been rigorously reviewed and selected by a committee of practicing doctors and clinical pharmacists for their quality, cost savings, and effectiveness.
Formulary Utilization	The percentage of total prescriptions that were dispensed on the Formulary list.
Generic	A drug which is the pharmaceutical equivalent to one or more brand name drugs. Such drugs have been approved by the Food and drug Administration as meeting the same standards for safety, purity, strength and effectiveness as the brand name drug.
Generic Utilization	The ratio of prescriptions that were dispensed as generic to the total prescriptions available as generic.
Health Risk	See Relative Health Risk
In-Network Utilization	Percent of costs performed by participating providers at the time the claim was incurred.
Loss ratio	Total claim cost divided by total premium
Mail Order Utilization	The percentage of total prescriptions that were ordered and dispensed through the mail
Member Months	A cumulative total of monthly membership for the reporting period.
Non Formulary	All other medications not included on the Formulary or a Preferred Drug List.
Out-of-Network	Services performed by non-participating providers at the time the claim was incurred.
Percent Formulary (Scripts)	See Formulary Utilization
Percent Generic (Scripts)	See Generic Utilization
Percent In-Network Costs	See In-Network Utilization
Percent Mail Order (Scripts)	See Mail Order Utilization
Prescriptions per 1,000 Contracts	The prescription rate per 1,000 members. The number of prescriptions divided by the average number of contracts in the reporting period multiplied by 1,000.
Prescriptions per 1,000 Members	See Encounters per 1,000 Members
Provider Cost	Amount reimbursed to the provider by the plan

Provider Cost Savings	The total savings to the plan sponsor due to the application of negotiated discount arrangements with contracted providers and R&C savings. Billed Charges less Allowed Amount.
Quality Opportunities	Number of treatments recommended by evidence based medicine guidelines and national standards of care for each member based on their clinical condition (case).
Relative Health Risk	Average member's relative health risk during a period of time using information about their mix of diseases and conditions for that same year.
Service Category	See Type of Service
Therapeutic Class	A method of classifying a drug according to its therapeutic action in the body.
Tier (Pharmacy)	Payment Tier Drug was assigned to at the time of purchase.
Total Medical Cost	Total medical claims costs including Facility Inpatient, Facility Outpatient, Professional Services and Ancillary Services.
Total Pharmacy Cost	Total retail pharmacy costs. Drugs administered in an office setting (e.g. allergy shots, immunizations) are included in medical costs.
Type of Service (TOS)	Type of Service categories are assigned for medical claims based on Major type of services and the procedure codes used in describing the service. The four major types of service used in categorizing medical claims are 1. Facility Inpatient; 2. Facility Outpatient; 3. Professional Services; and 4. Ancillary Services. After assigning a service to these categories, CPT, HCPCs and Revenue Codes are used to further differentiate services at four separate levels.
With Compliance (Quality)	The number of recommended treatments actually received by the member population.

Attachment 9

Attachment 9

Attachment 9

GeoAccess

Please refer to Attachment 9 in the electronic submission for full details referring to the GeoAccess summary provided.

Attachment 10

Attachment 10

Attachment 10

NDPERS PPO Providers

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING FREESTANDING AMBULATORY FACILITIES

North Dakota

Bismarck

Advanced Surgical Arts Center
3913 Lockport St
(701) 530-8450

Becker Plastic Surgery Center
1500 Interchange Ave
Ste 100
(701) 530-3333

Bismarck Surgical Associates, LLC
600 N 9th St
(701) 221-2299

Dakota Surgery & Laser Center
430 E Sweet Ave
(701) 222-4900

Face & Jaw Surgery Center
1140 W Capitol Ave
(701) 258-7220

Institute of Facial Surgery
2331 Tyler Pkwy Ste 4
(701) 255-4000

IPA, LLC dba Independent Practitioners of American, LLC
115 W Century Ave Ste B
(701) 255-2252

Mid Dakota Clinic
401 N 9th St
(701) 530-6000

Dickinson

Great Plains Clinic, PC
33 9th St W
(701) 483-6017

Fargo

Abdullah Surgery Center
3280 20 St S
(701) 293-7408

Face & Jaw Surgery Center
4344 20th Ave S Ste 2
(701) 239-5969

FM Endoscopy Center LLC
300 Main Ave Ste 205
(701) 200-4150

North Dakota (cont.)

Fargo (cont.)

Institute For Low Back Care LLC
300 Main Ave Suite 212
(701) 297-0817

Lamb Plastic Surgery Center, PC
1507 University Dr S
(701) 237-9592

Northern Plains Surgery Center, LLC
44 4th St S
(701) 232-9200

Grand Forks

Face & Jaw Surgery Center
2845 36th Ave S
(701) 775-4444

North Dakota Surgery Center
3035 Demers Ave
(701) 738-4240

Minot

Same Day Surgery Center
400 E Burdick Expy
Suite 400
(701) 857-7951

Wahpeton

Essentia Health Wahpeton Clinic
275 11th St S
(701) 642-2000

Williston

Trinity Community Clinic/Western Dakota
1321 W Dakota Parkway
(701) 572-7711

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING PHYSICIANS

Minnesota

Ada

Bridges Medical Center dba Essentia Health Ada Clinic
201 9th Street W
(218) 784-2727

- Anesthesiology (MD)
  Erie, John K., MD
  Vinych, John V., MD
- Family Practice
  Martsching, Sandra L., MD
  Sikkink, Kari Rae, MD
  Winjum, Charles S., MD
- General Surgery
  Wasemiller, Paul S., MD
- Orthopedic Surgery
  Sehgal, Bantoo, MD
- Urology
  Strinden, Steven P., MD

Valley Vision Clinic, Ltd.
402 3rd St E #1
(218) 784-4091

- Optometrist
  Solseng, David C., OD

Barnesville

Barnesville Area Clinic
209 2nd St SE
(218) 354-2111

- Family Practice
  Thompson, Owen R., MD

Minnesota Eyecare Network Inc dba Barnesville Eye Clinic
112 S Front St
(218) 354-2510

- Optometrist
  Van Den Einde, Kathryn R., OD

Breckenridge

St Francis Medical Center
2400 St Francis Drive
(218) 643-3000

- Emergency Medicine
  Weiner, Michael D., MD
- Family Practice
  Carrera, Rafael, MD
  Emery, Patrick E., MD
  Halvorson, James E., MD
  Kuzma, George, MD
  Mayo, William M., MD
  Munnell, Dean T., MD

Minnesota (cont.)

Breckenridge (cont.)

St Francis Medical Center (cont.)

- Family Practice (continued)
  Nelson, Susan K., MD
  Nyarandi, Timothy, MD
  Odom, John H L., MD
  Ostmo, Robert P., MD
  Overvold, Angel D., DO
  Rath, Michael B., MD
  Salazar-Tier, Mary Ruth G., MD
  Turner, Stephen M., DO
  Veland, Robert R., DO
  Wadell, Larry D., MD
- General Practice
  Houserman, Leighanne H., MD
- General Surgery
  Chukwuani, Okwudili F., MD
  Collins, Jay D., MD
  Hossain, Azhar, MD
  Moza, Joseph S., MD
- Internal Medicine
  Hasnain, Mohsin, MD
  Strand, Duane D., MD
  Torseth, John W., MD
- Orthopedic Surgery
  Johnson, James F., MD
- Pathology
  Smith, Gregory M., MD
- Pathology, Anatomy, Clinical Pathology
  Pauley, Scott D., MD
- Plastic Surgery
  Weiner, Michael D., MD
- Psychiatry (MD/DO)
  Torson, Nancy E., MD
- Radiology
  Licht, Lawrence H., MD

Crookston

Altru Crookston
400 S Minnesota St
(218) 281-9100

- Allergy
  Jacobsen, John J., MD
- Cardiovascular Disease
  Aboufakher, Rabeea, MD
- Dermatology
  Hoverson-Schott, Alyssa R., MD
- Family Practice
  Ajayi, Olumide A., MD
  Brandt, Rose B., MD

Minnesota (cont.)

Crookston (cont.)

Altru Crookston (cont.)

- Family Practice (continued)
  Dorman, Ronald C., MD
  Hanson, Rolf C., MD
- Gastroenterology
  Ojuro, Peter O., DO
- General Surgery
  Charette, Scott D., MD
  Usatii, Anatolie A., MD
- Geriatrics
  Aboufakher, Rabeea, MD
  Frugone Larrea, David F., MD
  Ring, Bruce L., MD
- Internal Medicine
  Aboufakher, Rabeea, MD
  Breitwieser, Wayne R., MD
  Frugone Larrea, David F., MD
  Makarem, Andres O., MD
  Olson, Theodore S., MD
  Paulson, Rolf R., MD
  Ring, Bruce L., MD
- Nephrology
  Haastrup, Adetola T., MD
- Neurology
  Roller, Matthew J., MD
- Oncology
  Walsh, Daniel J., MD
- Ophthalmology
  Brockman, Ronald J., MD
- Orthopedic Surgery
  Gardner, Jeremy J., MD
- Otology, Laryngology, Rhinology
  Yoshida, Glen Y., MD
- Pathology
  Brown, Ann K., MD
- Psychiatry (MD/DO)
  Madaram, Kondal R., MD
- Radiology
  Aafedt, Bradley C., MD
  Aizpuru, Richard D., MD
  Ali, Azhar T., MD
  Arsenault, Todd M., MD
  Asis, Martin J., MD
  Baldwin, Matthew T., MD
  Baraga, Joseph J., MD
  Barkmeier, Jeffrey, MD
  Berens, Bruce M., MD
  Berger, Mark W., MD
  Block, Nathan D., MD
  Bowman Seitz, Tara S., MD

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PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING PHYSICIANS

Altru Crookston (cont.)

- Radiology (continued)
  Bretzman, Peter A., MD
  Bryan, Erich N., MD
  Bryson, Thomas C., MD
  Butler, Robert R., MD
  Carlson, Blake A., MD
  Carolan, Paul R., MD
  Caspers, John M., MD
  Castaneda, Wilfrido R., MD
  Dallum, Bernie J., MD
  Drake, David G., MD
  Edmonson, George R., MD
  Frecentese, Dominic F., MD
  Gilloon, Benjamin A., MD
  Goertzen, Timothy C., MD
  Grogan, Michael J., MD
  Hagen, William N., DO
  Hartigan, Andrew S., MD
  Hedlund, Laura J., MD
  Hommeyer, Steven C., MD
  Hood, Larissa L., MD
  Jackson, Christopher A., MD
  Johnson, Adam C., MD
  Kang, Edith H., MD
  Knoedler, John P., MD
  Knutzen, Anders M., MD
  Lambert, David P., MD
  Leon, Jorge A., MD
  Loe, Matthew J., MD
  Longley, Deborah G., MD
  Ludeman, Lucas B., MD
  Magnuson, Jeffrey E., MD
  Maguire, Frank P., MD
  May, Benjamin J., MD
  Muschenheim, Alexandra L., MD
  Omdahl, Bonnie B., MD
  Page, Graydon T., MD
  Parrino, Suzanne S., MD
  Passe, Theodore J., MD
  Phelan, Jeffrey S., MD
  Prescott, Trisha R., MD
  Rathmann, Gregory A., MD
  Rhodes, Nicholas G., MD
  Rosenberg, Michael S., MD
  Ruzek, Kimberly A., MD
  Savcenko, Vladimir, MD
  Tai, Angela W., MD
  Tashjian, Joseph H., MD
  Treuer, Jody B., MD

Minnesota (cont.)
Crookston (cont.)

Altru Crookston (cont.)

- Radiology (continued)
  Truman, Susan M., MD
  Tummala, Anuradha K., MD
  Veldman, Mark W., MD
  Weinmann, Robert H., MD
  Weisensee, Anne M., MD
  Wiese, Don E., MD
  Wittenberg, Keith H., MD
  Wold, Peter B., MD

Crookston Eye Clinic
216 S Main St
(218) 281-2020

- Optometrist
  Forgit, Matthew C., OD
  Miller, Kari J., OD
  Smith, Angela S., OD

Northwestern Mental Health Center, Inc.
603 Bruce St
(218) 281-3940

- Psychiatry (MD/DO)
  Jarmuskewicz, James R., MD
  Michels, Paul O., MD

Riverview Family Practice
323 S Minnesota St
(218) 281-9519

- Family Practice
  Bell, Debra, MD
  Kanten, Erik J., MD
- Internal Medicine
  Fashoro, Olatubosun B., MD

Riverview Healthcare Association
323 S Minnesota St
(218) 281-9200

- Emergency Medicine
  Aigbedion, Eric, MD
  Eelkema, William H., MD
  Lasala, Frank, MD
  May, Sara B., MD
  Trites, Paul N., MD
- Family Practice
  Bell, Debra, MD
  Brown, James B., MD
  Dorman, Ronald C., MD
  Eriksson, Peter A., MD
  Hanson, Rolf C., MD
  Kanten, Erik J., MD

Minnesota (cont.)
Crookston (cont.)

Riverview Healthcare Association (cont.)

- Family Practice (continued)
  Paneru, Ram P., MD
  Viscito, Matthew S., MD
- General Surgery
  Afonya, Idatonye I., MD
  Moza, Joseph S., MD
- Internal Medicine
  Aigbedion, Eric, MD
  Baig, Mirza B., MD
  Chapin, Clifford A., MD
  Fashoro, Olatubosun B., MD
  Olson, Theodore S., MD
- Orthopedic Surgery
  Fennell, Collin W., MD
  Kim, Sunny S., MD
  Palkert, Diane M., MD
- Pediatrics
  Lazzara, Joseph V., MD
- Podiatry, Surgical Chiropody
  Peterson, David C., DPM

Riverview Specialty Clinic
323 S Minnesota St
(218) 281-9595

- Family Practice
  Balaraman, Saravana K., MD
  Bell, Debra, MD
  Kanten, Erik J., MD
- General Surgery
  Afonya, Idatonye I., MD
  Bolar, Randall J., MD
- Internal Medicine
  Baig, Mirza B., MD
  Fashoro, Olatubosun B., MD
- Obstetrics/Gynecology
  Wessman, Kari J., MD
- Orthopedic Surgery
  Fennell, Collin W., MD
  Palkert, Diane M., MD
- Pediatrics
  Brito, Paula, MD
- Podiatry, Surgical Chiropody
  Peterson, David C., DPM
- Urology
  Schultz, Steven E., MD

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PARTICIPATING PHYSICIANS

Minnesota (cont.)

Dilworth

Becker Optometry, PC
415 34th St N
(218) 233-9839

- Optometrist
  Becker, Corey L., OD

E Grand Forks

Altru Clinic East Grand Forks
607 Demers Ave
(218) 773-0357

- Cardiovascular Disease
  Bekdash, Ismail L., MD
  Kirnus, Mikhail, MD
- Family Practice
  Gasparini, Andrew, MD
- Gastroenterology
  Ojuro, Peter O., DO
- Internal Medicine
  Bekdash, Ismail L., MD
  Go, Jason S., MD
  Kirnus, Mikhail, MD
  Makarem, Andres O., MD
  Ojuro, Peter O., DO
- Obstetrics/Gynecology
  Andreson, Laura K., DO
- Oncology
  Dentchev, Todor N., MD
- Podiatry, Surgical Chiropody
  Britten, Joshua W., DPM
  Lo, Shoua, DPM

Opticare
421 Demers Ave NW
(218) 773-2400

- Optometrist
  Coles, Destin R., OD
  Gander, Steven P., OD
  Storhaug, Bruce A., OD

Riverview Health dba Glenmore Recovery Center
1424 Central Ave NE
(218) 773-4994

- Pediatrics
  Conley, Justin T., MD

Minnesota (cont.)

E Grand Forks (cont.)

Riverview Specialty Clinic-E. Grand Forks
1428 Central Ave NE
(866) 773-1390

- Family Practice
  Balaraman, Saravana K., MD
- Obstetrics/Gynecology
  Wessman, Kari J., MD
- Orthopedic Surgery
  Fennell, Collin W., MD
  Palkert, Diane M., MD
- Pediatrics
  Brito, Paula, MD
- Podiatry, Surgical Chiropody
  Peterson, David C., DPM
- Urology
  Schultz, Steven E., MD

Sanford Health 621 Demers Ave Clinic
621 Demers Ave
(218) 773-5858

- Cardiovascular Disease
  Clardy, David J., MD
  Farkas, Susan I., MD
  Kohlman-Petrick, Joellen, MD
  McDowell, Christina, MD
  Wynne, Joshua, MD
- Family Practice
  Alam, Mohammad, MD
  Berntson, Mark E., MD
  Bradbury, Jon E., MD
  Lokensgard Pierce, Karin A., MD
  Pearson, Eric C., MD
  Stayman, Mathew L., MD
- General Surgery
  Albrecht, Warren E., DO
  Fabian, Matthew W., DO
  Garcia, Luis A., MD
  Mistry, Bhargav M., MD
- Internal Medicine
  Geeraerts, Louis H., MD
- Obstetrics/Gynecology
  Mickelson, Margaret T., MD
- Oncology
  Geeraerts, Louis H., MD
- Otology, Laryngology, Rhinology
  Abraham, David A., MD
- Podiatry, Surgical Chiropody
  Arness, Richard E., DPM

Minnesota (cont.)

E Grand Forks (cont.)

Sanford Health 621 Demers Ave Clinic (cont.)

- Podiatry, Surgical Chiropody (continued)
  Cullen, Nicole, DPM
- Urology
  Williams, Brent, MD

Sanford Health 621 Demers Ave Clinic
621 Demers Ave
(218) 773-5858

- Cardiovascular Disease
  Kohlman-Petrick, Joellen, MD
  McDowell, Christina, MD
- Internal Medicine
  Tinguely, Matthew, MD
- Nephrology
  Phadke, Gautam, MD
- Obstetrics/Gynecology
  Christensen, Steffen P., MD
  Dangerfield, Jon D., MD
- Podiatry, Surgical Chiropody
  Cullen, Nicole, DPM

Sanford Health 929 Central Ave Clinic
929 Central Ave NW
(218) 773-6800

- Cardiovascular Disease
  Clardy, David J., MD
  Farkas, Susan I., MD
  Wynne, Joshua, MD
- Family Practice
  Alam, Mohammad, MD
  Beattie, Robert W., MD
  Berntson, Mark E., MD
  Bradbury, Jon E., MD
  Breen, Charles J., MD
  Lokensgard Pierce, Karin A., MD
  Pearson, Eric C., MD
  Stayman, Mathew L., MD
- General Surgery
  Albrecht, Warren E., DO
  Fabian, Matthew W., DO
  Garcia, Luis A., MD
  Mistry, Bhargav M., MD
- Obstetrics/Gynecology
  Christensen, Steffen P., MD
  Dangerfield, Jon D., MD
  Mickelson, Margaret T., MD

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PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING PHYSICIANS

Minnesota (cont.)

E Grand Forks (cont.)

Sanford Health 929 Central Ave Clinic (cont.)

- Otology, Laryngology, Rhinology
  Abraham, David A., MD
- Urology
  Williams, Brent, MD

Sanford Health 929 Central Ave Clinic
929 Central Ave NW
(218) 733-6800

- Cardiovascular Disease
  Kohlman-Petrick, Joellen, MD
- Nephrology
  Phadke, Gautam, MD
- Obstetrics/Gynecology
  Christensen, Steffen P., MD
  Dangerfield, Jon D., MD
- Orthopedic Surgery
  Robertson, Christopher, MD
- Podiatry, Surgical Chiropody
  Cullen, Nicole, DPM
- Radiology
  Asheim, Jason, MD
  Marsden, Richard J., MD

Erskine

Altru Clinic Erskine
23076 347th St SE
(218) 687-5317

- Family Practice
  Ajayi, Olumide A., MD
  Brandt, Rose B., MD
- Geriatrics
  Frugone Larrea, David F., MD
- Internal Medicine
  Frugone Larrea, David F., MD
  Makarem, Andres O., MD
  Olson, Theodore S., MD
  Paulson, Rolf R., MD
- Pathology
  Weiland, Timothy L., MD

Fertile

Altru Clinic Fertile
101 N Mill St
(218) 945-6064

- Family Practice
  Ajayi, Olumide A., MD
  Hanson, Rolf C., MD

Minnesota (cont.)

Fertile (cont.)

Altru Clinic Fertile (cont.)

- Geriatrics
  Frugone Larrea, David F., MD
  Ring, Bruce L., MD
- Internal Medicine
  Breitwieser, Wayne R., MD
  Frugone Larrea, David F., MD
  Makarem, Andres O., MD
  Olson, Theodore S., MD
  Paulson, Rolf R., MD
  Ring, Bruce L., MD
- Pulmonary Diseases
  Breitwieser, Wayne R., MD

Riverview Family Practice Fertile
306 North Mill Street
(218) 945-6695

- Family Practice
  Balaraman, Saravana K., MD
  Kanten, Erik J., MD
- Pediatrics
  Brito, Paula, MD
  Conley, Justin T., MD

Fosston

First Care Medical Services dba Essentia Health - Fosston
900 Hilligoss Blvd SE
(218) 435-1500

- Anesthesiology (MD)
  Erie, John K., MD
  Vinych, John V., MD
- Cardiovascular Disease
  Almanaseer, Yassar, MD
- Family Practice
  Swanson, Darren D., MD
  Winjum, Charles S., MD
- General Surgery
  Brattlof, Brian D., MD
  Vinych, John V., MD
  Wroblewski, Robert L., MD
- Internal Medicine
  Almanaseer, Yassar, MD
  Mohammed Rafiyath, Shamudheen, MD
  Tiwari, Sumit, MD
- Oncology
  Mohammed Rafiyath, Shamudheen, MD

Minnesota (cont.)

Fosston (cont.)

First Care Medical Services dba Essentia Health - Fosston (cont.)

- Orthopedic Surgery
  Sawardeker, Prasad J., MD
- Otology, Laryngology, Rhinology
  Belizario, Francisco Y., MD
- Podiatry, Surgical Chiropody
  Moen, Andrew, DPM
- Radiology
  Bullis, Brent R., MD
  Carlson, Annelisa M., MD
  Farah, Nazih N., MD
  Gramith, Frederick C., MD
  Groebner, Nathan J., MD
  Hite, Stephen H., MD
  Inampudi, Subbarao, MD
  Kane, Jon P., MD
  Kang, Eul S., MD
  Keszler, Jason L., DO
  Lee, Peter U., MD
  Mills, David J., MD
  Myhra-Bloom, Karla G., MD
  Parker, Robin, MD
  Peterson, Jeffrey J., MD
  Quinones, Eduardo, MD
  Sidney, Scott D., MD
  Tran, Huy, MD
  Yost, Robert A., MD
- Urology
  Strinden, Steven P., MD

Hallock

Kittson Memorial Clinic
1010 S Birch
(218) 843-2165

- Emergency Medicine
  Lohstreter, Thomas A., MD
- Family Practice
  Lester, Gordon J., MD
  Lohstreter, Thomas A., MD
- Internal Medicine
  Surdy, James E., MD

Valley Vision Clinic Ltd
204 S Atlantic
(701) 775-3135

- Optometrist
  Rutz, Duane P., OD

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PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING PHYSICIANS

Minnesota (cont.)
Halstad

Sanford Health Halstad Clinic
445 1st St E
(218) 456-2158

- Family Practice
  Breen, Charles J., MD
  Luithle, Timothy J., MD
- Radiology
  Asheim, Jason, MD

Hawley

Sanford Hawley Clinic
1412 Main St
(218) 483-3564

- Family Practice
  Smith, Stacey A., MD
  Vogt, David, DO
- Internal Medicine
  Hall, Katherine S., MD
  Prasai, Dirgha, MD
- Radiology
  Asheim, Jason, MD
  Marsden, Richard J., MD

Sanford Hawley Clinic
1412 Main St
(218) 483-3564

- Family Practice
  Andersen, Jeffrey B., MD
  Smith, Stacey A., MD
  Vogt, David, DO
- General Surgery
  Goldstein, Mitchell B., MD
- Internal Medicine
  Hall, Katherine S., MD
  Prasai, Dirgha, MD
- Obstetrics/Gynecology
  Deraney, Jaimie J., MD
- Radiology
  Marsden, Richard J., MD

Karlstad

Kittson Memorial Clinic of Karlstad
205 Roosevelt Ave
(218) 436-2251

- Emergency Medicine
  Lohstreter, Thomas A., MD
- Family Practice
  Lohstreter, Thomas A., MD

Minnesota (cont.)
Karlstad (cont.)

Kittson Memorial Clinic of Karlstad (cont.)

- Internal Medicine
  Surdy, James E., MD

Moorhead

7 Day Clinic
720 Main Ave
(701) 232-6211

- Family Practice
  Bjellum, Hans E., MD
  Page, Michael J., MD

Essentia Health Moorhead Clinic
801 Belsly Blvd S
(701) 364-8900

- Family Practice
  Kuhlmann, Craig F., MD
  Lunde, Lara N., MD
  Nelson, Kinsey B., MD
  Nelson, Susan K., MD
  Rogers, Jerry P., MD
  Sakariya, Geetabahen A., MD
  Sikkink, Kari Rae, MD
  Steinke, Emil B., MD
  Vetter, Richard T., MD
- General Surgery
  Portilla, George A., MD
  Wroblewski, Robert L., MD
  Zreik, Khaled S., MD
- Internal Medicine
  Kooyer, Kurt W., MD
- Obstetrics/Gynecology
  Christensen, James M., MD
  Conmy, Bruce, MD
- Pediatrics
  Kooyer, Kurt W., MD

Family Healthcare Center At Concordia Health Services
901 S 8th St
(218) 299-3662

- Family Practice
  Espejo, Napoleon R., MD

Hendrix Health Center
1104 7th Ave S
(218) 477-2623

- Family Practice
  Luistro, Allan J., MD

Minnesota (cont.)
Moorhead (cont.)

Hendrix Health Center (cont.)

- Internal Medicine
  Kooyer, Kurt W., MD

Lakeland Mental Health Center Inc
1010 32nd Ave S
(218) 233-7524

- Psychiatry (MD/DO)
  Dizon, Amador M., MD
  Erickson, Chad C., MD
  Michels, Paul O., MD
  Staton, R D., MD

Midwest Vision Centers
3206 Easten Shopping Ce
(218) 233-1867

- Optometrist
  Connelly, James B., OD

Opticare
725 Center Ave Ste 2
(218) 233-2650

- Optometrist
  Brandt, Ron, OD

Renew Medical Clinic, LLC
119 4th St S
(218) 227-5374

- Anesthesiology (MD)
  Hanson, David J., MD

Sanford Moorhead Clinic
4000 28th Ave S
(701) 234-3200

- Family Practice
  Bauer-Olson, Cheryl, DO
  Campbell, Robert D., MD
  Glunberg, Steven K., MD
  Haugo, Amie, MD
  Kringlie, Ross A., MD
  Martindale, Donald J., MD
- Internal Medicine
  Ladwig, John W., MD
  Sand, Michael L., DO
  Twedt, Heidi L., MD
- Radiology
  Kallenbach, Christopher, MD

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PARTICIPATING PHYSICIANS

Minnesota (cont.)
Moorhead (cont.)

Sanford Moorhead Clinic
4000 28th Ave S
(701) 234-3200

- Family Practice
  Bauer-Olson, Cheryl, DO
  Campbell, Robert D., MD
  Glunberg, Steven K., MD
  Haugo, Amie, MD
  Kringlie, Ross A., MD
  Martindale, Donald J., MD
  Spina, Julie A., MD
  Wiisanen, Ronald E., MD
- Internal Medicine
  Ladwig, John W., MD
  Levitski-Heikkila, Teresa V., MD
  Sand, Michael L., DO
  Twedt, Heidi L., MD
  Wilke, Russell, MD
- Nephrology
  Levitski-Heikkila, Teresa V., MD
- Pediatrics
  Hanson, Stephanie, MD
  Kunkel, Melissa, MD
- Radiology
  Asheim, Jason, MD

Sanford Moorhead Clinic
4000 28th Ave S
(701) 234-3200

- Family Practice
  Bauer-Olson, Cheryl, DO
  Campbell, Robert D., MD
  Glunberg, Steven K., MD
  Haugo, Amie, MD
  Kringlie, Ross A., MD
  Spina, Julie A., MD
  Wiisanen, Ronald E., MD
- Internal Medicine
  Ladwig, John W., MD
  Levitski-Heikkila, Teresa V., MD
  Sand, Michael L., DO
  Twedt, Heidi L., MD
  Wilke, Russell, MD
- Nephrology
  Levitski-Heikkila, Teresa V., MD
- Obstetrics/Gynecology
  Kappenman, James, MD
- Pediatrics
  Kunkel, Melissa, MD

Minnesota (cont.)
Moorhead (cont.)

Sanford Moorhead Clinic (cont.)

- Psychiatry (MD/DO)
  Fleissner, Rachel M., MD
- Radiology
  Asheim, Jason, MD
  Kallenbach, Christopher, MD

Solutions Behavioral Healthcare Professionals, Inc.
891 Belsly Blvd
(218) 287-4338

- Psychiatry (MD/DO)
  Carlson, David L., MD
  Hanisch, Stefanie U., MD

Pelican Rapids

Pelican Rapids Eye Clinic
20 South Broadway
(218) 863-7061

- Optometrist
  Van Den Einde, Kathryn R., OD

Twin Valley

Sanford Health Twin Valley Clinic
501 2nd St NW
(218) 584-5142

- Family Practice
  Andersen, Jeffrey B., MD
  Breen, Charles J., MD
- Internal Medicine
  Gurung, Anju, MD
  Prasai, Dirgha, MD
- Radiology
  Asheim, Jason, MD

Ulen

Sanford Health Ulen Clinic
108 Viking Ave W
(218) 596-8867

- Family Practice
  Breen, Charles J., MD
  Lawrence, Scott A., MD
- Psychiatry (MD/DO)
  Lawrence, Scott A., MD
- Radiology
  Asheim, Jason, MD

Minnesota (cont.)
Warren

Warren Eye Care PC
205 W Johnson Ave
Suite 1
(218) 745-5151

- Optometrist
  Bienek, Stacey J., OD

Wheaton

Sanford Wheaton
401 12th St N
(320) 563-8971

- Family Practice
  Andersen, Jeffrey B., MD
  Emery, Patrick E., MD
  Mislan, Garry A., MD
- Internal Medicine
  Gitau, Mark, MD
- Oncology
  Gitau, Mark, MD

Sanford Wheaton
401 12th St N
(320) 563-8971

- Family Practice
  Andersen, Jeffrey B., MD
  Emery, Patrick E., MD
  Mislan, Garry A., MD
- Internal Medicine
  Gitau, Mark, MD
- Oncology
  Gitau, Mark, MD

Sanford Wheaton
401 12 St N
(320) 563-8971

- Family Practice
  Andersen, Jeffrey B., MD
  Emery, Patrick E., MD
  Kuzma, George, MD
  Mislan, Garry A., MD

Montana
Sidney

John B Andelin MD PC dba Pathology Services
216 14th Ave SW
(701) 770-3927

- Pathology
  Andelin, John B., MD
  McCoy Jr, Franklin E., MD

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PARTICIPATING PHYSICIANS

Montana (cont.)
Sidney (cont.)

Sidney Eye Care
112 2nd St SE
(406) 482-2609

- Optometrist
  Cavanaugh, Gregory E., OD
  Hjelden, Melissa P., OD
  O'Brien, Kristin, OD

North Dakota
Ashley

Ashley Clinic PC Tinsatul
612 Center Ave N
(701) 288-3431

- General Practice
  Tinsatul, Udom, MD
- General Surgery
  Tinsatul, Udom, MD

Ashley Medical Center
612 Center Ave N
(701) 288-3448

- Emergency Medicine
  Oliveira-Filho, Edgar K., MD
- Family Practice
  Geier, David C., MD
  Oliveira-Filho, Edgar K., MD
- General Practice
  Vegiraju, Thammi R., MD
- Psychiatry (MD/DO)
  Oliveira-Filho, Edgar K., MD

Eye Center of The Dakotas PC
611 Center Ave
(701) 288-3071

- Optometrist
  Moch, Danelle F., OD
  Pathroff, Kellen E., OD
  Tello, Timothy L., OD

Beach

Beach Medical Clinic
95 2nd St NW
(701) 872-3777

- Emergency Medicine
  Cassidy, Michael L., MD
- Pediatrics
  Ahmed, Ibrahim M., MD

North Dakota (cont.)
Beulah

Beulah Vision, PC
204 W Main St
(701) 873-5251

- Optometrist
  Hammerschmidt, Michael J., OD

Coal Country Community Health Center
1312 Highway 49 N
(701) 873-4445

- Family Practice
  Garman, Aaron M., MD
  Jackson, Orlan D., DO
  Jon-Klindworth, Jacinta, MD
  Kaspari, Thomas D., MD

Dakota Eye Institute
204 W Main
(701) 222-3937

- Ophthalmology
  Fortney, Aaron C., MD

Bismarck

A Balanced Mind Psychiatric Wellness Center
4023 State St Ste 100
(701) 751-3737

- Psychiatry (MD/DO)
  Delap, Susan E., MD

Addo, Fek MD
300 W Century Ave
(701) 323-9900

- Internal Medicine
  Addo, Ferdinand E., MD

Advanced Surgical Arts Center
3913 Lockport St
(701) 530-8450

- Plastic Surgery
  Honeycutt, D'Arcy A., MD

Aesthetic Center of Plastic Surgery, PC
115 W Century Ave Ste B
(701) 255-3311

- Plastic Surgery
  Paulson, Rick L., MD

North Dakota (cont.)
Bismarck (cont.)

Baker Family Medicine PC
300 West Century Ave
(701) 751-4340

- Family Practice
  Baker, Biron D., MD

Becker Plastic Surgery Center
1500 Interchange Ave
Ste 100
(701) 530-3333

- Plastic Surgery
  Becker, Ricky C., MD

Becker Plastic Surgery, LLC
1500 Interchange Ave
Ste 100
(701) 530-3333

- Plastic Surgery
  Becker, Ricky C., MD

Bis-Man Eyecare Associates
2717 Rock Island Pl
(701) 258-3402

- Optometrist
  Borstad, Josh E., OD
  Dillavou, Nichol K., OD
  Erhardt, Jason D., OD
  Neumiller, Joel D., OD

Bis-Man Eyecare Associates
1400 Skyline Blvd
(701) 255-4117

- Optometrist
  Borstad, Josh E., OD
  Erhardt, Jason D., OD
  Neumiller, Joel D., OD

Bismarck Cancer Center
500 N 8th St
(701) 222-6100

- Oncology
  Dufan, Tarek A., MD
  Russo, James K., MD
  Watkins, John M., MD
- Radiology
  Dufan, Tarek A., MD

Bismarck Eyecare, PC
1830 E Century Ave Ste 1
(701) 222-1140

- Optometrist
  Patzman, Taya M., OD

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING PHYSICIANS

North Dakota (cont.)
Bismarck (cont.)

Bismarck Radiology Associates
1310 E Main Ave Ste 219
(701) 530-8575

- Radiology
  Fortney, Michael S., MD
  Holmen, John H., MD
  Peterson, Douglas R., MD
  Schirado, Mike A., MD

Bismarck Surgical Associates, LLC
600 N 9th St
(701) 221-2299

- Orthopedic Surgery
  Ackerman, Duncan B., MD
  Carlson, Chad B., MD

Bismarck Surgical Associates, LLC
600 N 9th St
(701) 221-2299

- Orthopedic Surgery
  Juelson, Timothy J., MD

Bridging The Dental Gap
1223 S 12th St Ste 1
(701) 221-0518

- Oral Surgery
  Keaveny, John T., DDS

Center For Family Medicine
701 E Rosser
(701) 751-9500

- Dermatology
  Luger, Joseph A., MD
- Family Practice
  Betting, Susan S., MD
  Dhamija, Sulakshna, MD
  Garman, Aaron M., MD
  Hostetter, Jeffrey E., MD
  Jon-Klindworth, Jacinta, MD
  Luger, Joseph A., MD
  Nybakken, Mary M., MD
  Penn, Jeremiah J., MD
  Quisno, Jacqueline E., MD
  Sherman, Kamille S., MD
  Taha, Taleb N., MD
  Tangedahl, Guy P., MD
  Wells, Robert C., MD
- General Practice
  Willis, Karin K., MD
- Obstetrics/Gynecology
  Woodrow, Peter A., MD

North Dakota (cont.)
Bismarck (cont.)

Center For Family Medicine (cont.)

- Pediatrics
  Connell, Joan M., MD
  Johnson, George M., MD

Cornatzer Jr, William, MD
225 N 7th St Ste B
(701) 224-1273

- Dermatology
  Cornatzer, William Jr E., MD

Custer Family Planning
549 Airport Rd
(701) 255-3535

- Family Practice
  Nybakken, Mary M., MD
  Quisno, Jacqueline E., MD

Dakota Eye Institute
200 S 5th St
(701) 222-3937

- Ophthalmology
  Fortney, Aaron C., MD
  Hilts, George H., MD
  Litchfield, Douglas W., MD
  Raducu, Elena R., MD
  Volk, Charles R., MD
- Optometrist
  Beattie, Sharon C., OD
  Hellebush, Leslie R., OD
  Otteson, Guy G., OD
  Otteson, Kyle M., OD
  Ranum, Michael R., OD
  Samson, Thomas J., OD

Dakota Eye Institute
3119 N 14th St
(701) 222-3937

- Ophthalmology
  Fortney, Aaron C., MD
  Hilts, George H., MD
  Litchfield, Douglas W., MD
  Raducu, Elena R., MD
  Volk, Charles R., MD
- Optometrist
  Balliet, Paul, OD
  Hellebush, Leslie R., OD
  Ranum, Michael R., OD
  Samson, Thomas J., OD
  Springan, Joel H., OD

North Dakota (cont.)
Bismarck (cont.)

Dakota Foot & Ankle Clinic
1733 E Capital Ave
(701) 255-3338

- Podiatry, Surgical Chiropody
  Gale, Brian D., DPM

Dakota Pain Management Center
705 E Main Ave Ste 300
(701) 255-2453

- Physical Medicine and Rehabilitation
  Krause, Carol L., MD

Dillavou, Nichol, OD
2700 State St
(701) 255-9349

- Optometrist
  Dillavou, Nichol K., OD

Drs Schindler & Deis
204 W Century Ave
(701) 255-0186

- Optometrist
  Deis, Thomas L., OD
  Schindler, Keith L., OD

Eye Center of The Dakotas PC
1221 W Divide Ave
(701) 224-0661

- Optometrist
  Moch, Danelle F., OD
  Pathroff, Kellen E., OD
  Tello, Timothy L., OD

Eye Clinic of North Dakota
620 N 9th St
(701) 255-4673

- Ophthalmology
  Leidenix, Monte J., MD
- Optometrist
  Hansted, Thomas S., OD
  Towle, Steven J., OD

Eyes On Parkway
210 W Front Ave
(701) 222-2461

- Optometrist
  Beattie, Brian C., OD
  Houle, Michael G., OD
  Kostelecky, Eve, OD
  Kostelecky, Michael G., OD

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PARTICIPATING PHYSICIANS

North Dakota (cont.)
Bismarck (cont.)

Eyes On Parkway, Inc
2331 Tyler Parkway Ste 2
(701) 258-4384

- Optometrist
  Beattie, Brian C., OD
  Houle, Michael G., OD
  Kostelecky, Eve, OD
  Kostelecky, Michael G., OD

Face & Jaw Surgery Center
1140 W Capitol Ave
(701) 258-7220

- Oral Surgery
  Afshar, Andrew A., DDS
  Crago, Charles A., DMD
  Deatherage, Joseph R., DMD
  Preisler, Scott A., DDS

Family Vision Clinic
111 E Century Ave
(701) 222-1420

- Optometrist
  Fleck, Amy M., OD
  Gero, George, OD
  Heil, Krista R., OD

Foot Care Associates, PC
310 S 5th Street
(701) 250-8637

- Podiatry, Surgical Chiropody
  Rinehart, Karen M., DPM

Forte Pathroff, Denise, MD PC
225 N 7th St Suite B
(701) 224-9643

- Allergy
  Forte-Pathroff, Denise, MD
- Dermatology
  Forte-Pathroff, Denise, MD

Heartview Foundation
101 E Broadway Ave
(701) 222-0386

- Internal Medicine
  Henke, Melissa J., MD
- Psychiatry (MD/DO)
  Henke, Melissa J., MD

North Dakota (cont.)
Bismarck (cont.)

Institute of Facial Surgery
2331 Tyler Pkwy Ste 4
(701) 255-4000

- Oral Surgery
  Stanley, John G., DMD

Marty J Mrachek OD dba Sears Optical
2700 State St
(701) 255-8490

- Optometrist
  Mrachek, Marty J., OD

Mid Dakota Clinic
401 N 9th St
(701) 530-6000

- Emergency Medicine
  Magill, Thomas R., MD
- Endocrinology
  Ahmed, Bilal, MD
- Family Practice
  Botsford, John D., MD
  Erickstad, John A., MD
  Gustafson, Jean, MD
  Hamar, Matthew, MD
  Jondahl, Paul E., MD
  Longie, Kelly B., MD
  Longie, Kevin B., MD
  Magill, Thomas R., MD
  Moe, Jason T., MD
  Penn, Jeremiah J., MD
  Scherr, Steven J., MD
  Seifert, Shelly A., MD
  Traxinger, Stephanie A., DO
  Wells, Robert C., MD
  Wilder, Andrew J., MD
- Gastroenterology
  Ezzeddine, Dina Z., MD
  Karls, Kevin A., MD
  Kathawala, Mustafa, MD
- General Surgery
  Altringer, William E., MD
  Chalmers, Aaron J., MD
  Hamar, Steven K., MD
  Helbling, Brandon M., MD
  Johnson, Steven R., MD
  Kane, Derek D., MD
  Kavlie, Gaylord J., MD
  Narayana, Avinash, DO

North Dakota (cont.)
Bismarck (cont.)

Mid Dakota Clinic (cont.)

- Geriatrics
  Hetland, Bruce M., MD
- Internal Medicine
  Bertram, Juergen H., MD
  Bharadwaj, Jayaram S., MD
  Bharadwaj, Savitha J., MD
  Erickstad, Mark A., MD
  Ezzeddine, Dina Z., MD
  Grenz, Don H., MD
  Happel, Keith R., MD
  Hebert, Brian J., MD
  Hetland, Bruce M., MD
  Karls, Kevin A., MD
  Luebke, Aaron, MD
  Naseer, Khalid, MD
  Rauta, Radu L., MD
  Schwartz, Julie M., MD
  Starr, Daniel C., MD
  Tanous, Robert, DO
- Neurology
  Dunnigan, Ralph T., MD
- Obstetrics/Gynecology
  Bradley, Shannon, MD
  Delvo, Stephanie, MD
  Hutchens, Thomas P., MD
  Schafer Mclean, Rhonda R., MD
  Steinle, Jill, MD
  Wisdom, Marissa A., MD
- Oncology
  Bharadwaj, Jayaram S., MD
  Rao, Vijay P., MD
- Otology, Laryngology, Rhinology
  Hetland, Andrew R., MD
- Pediatrics
  Anderson, Kathy M., MD
  Dramko, Joseph G., MD
  Juelson, Amy M., MD
  Kozel, Lisa L., MD
  Toman, Kristie A., DO
- Plastic Surgery
  Yearsley, Steven G., MD
- Podiatry, Surgical Chiropody
  Iwaasa, Gregory B., DPM
- Radiology
  Ruhland, Jessica, MD
- Thoracic Surgery
  Altringer, William E., MD
  Johnson, Steven R., MD
  Kavlie, Gaylord J., MD

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING PHYSICIANS

Mid Dakota Clinic
525 N 9 St
(701) 530-6000

- Podiatry, Surgical Chiropody
  Olson, Aaron C., DPM

Mid Dakota Clinic - 727 Kirkwood
727 Kirkwood Mall
(701) 530-6000

- Family Practice
  Seifert, Shelly A., MD
- Internal Medicine
  Bharadwaj, Savitha J., MD

Mid Dakota Clinic - Gateway
2700 State St
(701) 530-6000

- Dermatology
  Appert, David L., MD
  Borrowman, Theresa, MD
  Strand, Megan, MD
- Family Practice
  Botsford, John D., MD
  Hamar, Matthew, MD
  Moen, Douglas L., MD
  Murphy, Louise A., MD
  Orchard, Jeffrey L., MD
  Roswick, Robert J., MD
- Internal Medicine
  Grenz, Don H., MD
  Hebert, Brian J., MD

Mid Dakota Clinic-Center For Women
1000 E Rosser Ave
(701) 530-6000

- Obstetrics/Gynecology
  Bury, Jan M., MD
  Corfman, Randle S., MD
  Delvo, Stephanie, MD
  Obritsch, Jerry M., MD
  Schafer Mclean, Rhonda R., MD
  Witt, John M., MD

Mid Dakota Clinic-Gateway Dermatology
2700 State St
(701) 530-6000

- Dermatology
  Ebertz, J Mark, MD

Mid Dakota Clinic-Kirkwood
828 Kirkwood Mall
(701) 530-6000

- Family Practice
  Gustafson, Jean, MD
  Jondahl, Paul E., MD
  Longie, Kelly B., MD
- Pediatrics
  Dramko, Joseph G., MD
  Juelson, Amy M., MD
  Kozel, Lisa L., MD
  Toman, Kristie A., DO
  Zacher, Carla J., MD

Midwest Vision Centers
738 Kirkwood Mall
(701) 258-8810

- Optometrist
  Bencker, Shanon S., OD
  Remboldt, David M., OD

Missouri Basin Anesthesia PLLC
401 N 9th Street
(701) 530-5550

- Anesthesiology (MD)
  Cave, Jeffrey R., MD
  Cleary, William F., MD
  Hoskins, Nicholas A., MD
  Jankoviak, Michael D., MD
  Klein, Scott A., MD
  Laszewski, Linda J., MD
  Lo, Lim-Che, MD
  Loven, Roger R., MD
  Markewich, Stephen, MD
  Mathieu, Maryse, MD
  Preszler, Todd M., MD
  Russon, Troy S., MD
  Voigt, Matthew L., MD
  White, Peter, MD
- Internal Medicine
  Benson, Jeffre J., MD

Northern Plains Family Medicine and Behavioral Health PC
1720 Burnt Boat Drive
Ste 108
(701) 673-3575

- Family Practice
  Gray, Scharazard, MD

Ophthalmology Associates
111 E Century Ave
(701) 222-1420

- Ophthalmology
  Wischmeier, Curt A., MD

Oral Surgery Center of Bismarck
3117 N 14th St
(701) 221-2719

- Oral Surgery
  Iravani, Mansureh, DMD

Pain Treatment Center Anesthesiologists PC
600 N 9th St Suite 2
(701) 223-7822

- Anesthesiology (MD)
  Boutrous, Attas, MD
  Carlson, Hugh S., MD
  Knutson, Ronald M., MD

Pathology Consultants
900 E Broadway
(701) 222-2480

- Pathology
  Ellison, Wesley A., MD
  Fredrickson, Ward D., MD
  Hipp, John A., MD
  Laszewski, Michael J., MD
  Linz, Laurie J., MD
- Pathology, Anatomy, Clinical Pathology
  Schmidt, Jared L., MD

Pathology Consultants, PC
3502 Franklin Ave
(701) 222-2480

- Pathology
  Ellison, Wesley A., MD
  Fredrickson, Ward D., MD
  Hipp, John A., MD
  Laszewski, Michael J., MD
  Linz, Laurie J., MD
- Pathology, Anatomy, Clinical Pathology
  Schmidt, Jared L., MD

Pneumos Clinic
300 W Century Ave
(701) 323-9900

- Pulmonary Diseases
  Mendoza, Pedro G., MD

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PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING PHYSICIANS

Precision Eyez, PC
2304 Clydesdale Dr
(701) 255-2865

- Optometrist
  Aberle, Wayne D., OD

Regional Neurological Center
1033 Basin Ave Ste A
(701) 222-1300

- Neurology
  Ragland, James B., MD

Sanford Children's North Clinic
765 W Interstate Ave
(701) 323-3700

- Pediatrics
  Klein, Katherine A., MD
  Kumar, Parag, MD
  Reinke, Sara L., MD
  Seibel, Melissa M., MD

Sanford Clinic
222 N 7th St
(701) 323-6000

- Anesthesiology (MD)
  Jaramillo, Diosdado T., MD
  Quast, Michael L., MD
- Cardiovascular Disease
  Balf, Dragos V., MD
  Frank, Walter E., MD
  Howard, Richard A., MD
  Kraft, Diane C., MD
  Pansegrau, Timothy L., MD
  Reddy, Karthik, MD
- Emergency Medicine
  Reisenauer, Justin J., MD
  Schmidt, Steven D., MD
  Tello, Anthony M., MD
  Zimny, Matthew, MD
- Endocrinology
  Faulk, Kellie, MD
- Family Practice
  Ashley, Lynn E., MD
  Bossort, James B., MD
  Gade, Ashwini P., MD
  Martin, Heather M., DO
  Rauta, Olimpia, MD
  Sharma, Deepti, MD
  Wyman, Allen E., MD

Sanford Clinic (cont.)

- Gastroenterology
  Anees, Mukhtar, MD
  Blonsky, Jeffery, MD
  Donovan, Jeremiah P., MD
  Firozi, M Tarik A., MD
  Monticello, Anthony, MD
  Nammour, Fadel E., MD
  Renton, Douglas J., MD
  Starley, Brad Q., MD
  Zagnoon, Abbas, MD
- General Surgery
  Akins, Chris W., MD
  Berglund, Douglas D., MD
  Bock, Steven N., MD
  Boyko, Kimber M., MD
  Dewing, Bree D., MD
  Dibbell, David G., MD
  Fabian, Matthew W., DO
  Garcia, Luis A., MD
  Knudson, Joshua J., MD
  McNeil, Jeffrey, MD
  Stam, Marc, MD
  Viney, Jeanette M., MD
- Infectious Diseases
  Martin, C Kent, MD
  Mateo, Noe, MD
- Internal Medicine
  Al Bitar, Sado, MD
  Artham, Surya M., MD
  Chaudhary, Vijay, MD
  Dendy, Khalin F., MD
  Donovan, Jeremiah P., MD
  Frank, Walter E., MD
  Gravning, Stephanie L., MD
  Gray, Thandiwe, MD
  Gupta, Vikesh, MD
  Kodjoe, Gladys, MD
  Layawen, Aselo, MD
  Lebeau, Michael E., MD
  Luckenbill, Michael R., MD
  Lunn, Gerry M., MD
  Martin, C Kent, MD
  Monticello, Anthony, MD
  Nammour, Fadel E., MD
  Reddy, Karthik, MD
  Sarrigiannidis, Andreas, MD
  Shrestha, Bhaja O., MD
  Tello, Anthony M., MD
  Tello, Ronald D., MD

Sanford Clinic (cont.)

- Internal Medicine (continued)
  Zagnoon, Abbas, MD
- Nephrology
  Hassan, Syed F., MD
- Neurological Surgery
  Lwu, Shelly H., MD
  Owen, Michael P., MD
- Neurology
  Arazi, Richard, MD
  Dunnigan, Ralph T., MD
  Kiok, Maximo C., MD
  Miller, Stephanie A., MD
  Spahija, Berislav, MD
- Obstetrics/Gynecology
  Klemin, Peter L., MD
  Woodrow, Peter A., MD
- Oncology
  Chaudhary, Vijay, MD
  Serabe, Baruti M., MD
- Orthopedic Surgery
  Kovacs, Gregg R., DO
- Otology, Laryngology, Rhinology
  Nelson, Jeffrey J., MD
- Pathology
  Jia, Hongchen, MD
  Johnson, Craig A., MD
  Meyer, Jason L., MD
  Osmond, Gregory W., MD
- Pediatrics
  Cabalka, Allison L., MD
  Cannon, Bryan, MD
  Casas, Luis, MD
  Cleveland, Chris, MD
  Dasival, Christina M., DO
  Decock, Christopher, MD
  Horner, Justin, MD
  Johnson, Jonathan N., MD
  Klein, Katherine A., MD
  Kumar, Parag, MD
  McDonough, Stephen M., MD
  Ocejo, Rafael, MD
  Reinke, Sara L., MD
  Seibel, Melissa M., MD
  Serabe, Baruti M., MD
  Twogood, Todd A., MD
- Peripheral Vascular Diseases Or Surgery
  Boyko, Kimber M., MD

Providers are subject to be added or terminated without notice.

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PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING PHYSICIANS

Sanford Clinic (cont.)

- Physical Medicine and Rehabilitation
  Eggert, Douglas K., MD
  Murphy, Kevin P., MD
- Plastic Surgery
  Dibbell, David G., MD
- Podiatry, Surgical Chiropody
  Hart, Eric M., DPM
  Tello, Francisco A., DPM
- Psychiatry (MD/DO)
  Shrestha, Sacheen, MD
- Pulmonary Diseases
  Gupta, Vikesh, MD
  Sarrigiannidis, Andreas, MD
  Shrestha, Bhaja O., MD
- Radiology
  Fogarty, Edward F., MD
  Hasson, Richard M., MD
  Herrera, Marcos A., MD
  Iwamoto, Matthew M., MD
  McIntee, Michael J., MD
  Miller, John A., MD
  Tello-Skjerseth, Christina, MD
- Thoracic Surgery
  Akins, Chris W., MD
  Boyko, Kimber M., MD
  McNeil, Jeffrey, MD
  Pansegrau, Timothy L., MD
  Russell, Sean S., MD
  Viney, Jeanette M., MD
- Urology
  Fondahn, Dean J., MD
  Horowitz, Andrew I., MD
  Koleilat, Nadim, MD
  Taylor, Joseph C., MD

Sanford Health Occupational Medicine Clinic
2603 E Broadway Ave
(701) 323-5222

- Emergency Medicine
  Blanchard, Joel H., MD
- Family Practice
  Blanchard, Joel H., MD
- Pathology
  Fisher, Catherine P., MD
- Radiology
  Fogarty, Edward F., MD
  Iwamoto, Matthew M., MD

North Dakota (cont.)
Bismarck (cont.)

Sanford Health Occupational Medicine Clinic (cont.)

- Radiology (continued)
  McIntee, Michael J., MD
  Miller, John A., MD
  Tello-Skjerseth, Christina, MD

Sanford Medical Center
300 N 7th St
(701) 323-6000

- Allergy
  Larson, James B., MD
- Anesthesiology (MD)
  Bro, Nathan A., MD
  Cave, Jeffrey R., MD
  Hoskins, Nicholas A., MD
  Jaramillo, Diosdado T., MD
  Jones, Marshall S., MD
  Ngatia, Josephat, MD
  Quast, Michael L., MD
  Smith, Craig D., MD
- Cardiovascular Disease
  Balf, Dragos V., MD
  Frank, Walter E., MD
  Howard, Richard A., MD
  Korte, Stephen A., MD
  Pansegrau, Timothy L., MD
  Reddy, Karthik, MD
- Dermatology
  Knudson, Richelle M., MD
- Emergency Medicine
  Blanchard, Joel H., MD
  Fairbairn, Thomas D., MD
  Hintz, Kadon K., MD
  Jackson, Walter O., MD
  Puetz, Catherine, MD
  Reisenauer, Justin J., MD
  Schmidt, Steven D., MD
  Tello, Anthony M., MD
  Zimny, Matthew, MD
- Endocrinology
  Faulk, Kellie, MD
  Tincher, Michelle R., MD
- Family Practice
  Beckwith, Jennifer A., MD
  Belzer-Curl, Gretchen G., MD
  Betting, Susan S., MD
  Blanchard, Joel H., MD
  Bossort, James B., MD
  Carlson, Jessica A., MD

North Dakota (cont.)
Bismarck (cont.)

Sanford Medical Center (cont.)

- Family Practice (continued)
  Dornacker, Angela S., MD
  Emery, Russell J., MD
  Fyfe, Alistair G., MD
  Garman, Aaron M., MD
  Hoggarth, Tonia L., MD
  Jackson, Walter O., MD
  Johansen, James R., MD
  Johnson, Anthony T., MD
  Klein, Dale A., MD
  Klemin, Jill M., MD
  Klop, Krissondra L., DO
  Kosiak, Donald J., MD
  Lange, Darwin K., MD
  Miller, Brenda L., MD
  Pengilly, David J., MD
  Penn, Jeremiah J., MD
  Rauta, Olimpia, MD
  Sell, Shanon M., DO
  Sharma, Deepti, MD
  Shultz Piatz, Kinsey A., MD
  Smith, Stuart T., MD
  Stein, Sherry L., MD
  Thomas, Jack G., MD
  Thompson, Eric M., MD
  Thorson, Thomas A., MD
  Tincher, Michelle R., MD
  Wolf, Terry L., DO
- Gastroenterology
  Anees, Mukhtar, MD
  Donovan, Jeremiah P., MD
  Firozi, M Tarik A., MD
  Hughes, John J., MD
  Monticello, Anthony, MD
  Renton, Douglas J., MD
  Starley, Brad Q., MD
  Zagnoon, Abbas, MD
- General Surgery
  Akins, Chris W., MD
  Berglund, Douglas D., MD
  Boyko, Kimber M., MD
  Dewing, Bree D., MD
  Dibbell, David G., MD
  Fabian, Matthew W., DO
  Garcia, Luis A., MD
  Knudson, Joshua J., MD
  McNeil, Jeffrey, MD
  Nelson, Brook V., MD
  Pansegrau, Timothy L., MD

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PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING PHYSICIANS

Sanford Medical Center (cont.)

- General Surgery (continued)
  Stam, Marc, MD
  Viney, Jeanette M., MD
- Infectious Diseases
  Martin, C Kent, MD
  Mateo, Noe, MD
- Internal Medicine
  Al Bitar, Sado, MD
  Artham, Surya M., MD
  Badar, Mubashir K., MD
  Chaudhary, Vijay, MD
  Dasilva, Lawrence J., MD
  Dendy, Khalin F., MD
  Donovan, Jeremiah P., MD
  Frank, Walter E., MD
  Gajanayaka, Ranil, MD
  Gravning, Stephanie L., MD
  Gray, Thandiwe, MD
  Gupta, Vikesh, MD
  Hinrichs, Mark, MD
  Howard, Richard A., MD
  Hughes, John J., MD
  James, Lindsey B., MD
  Javaid, Mian M., MD
  Kodjoe, Gladys, MD
  Korte, Stephen A., MD
  Larson, James B., MD
  Larsson, Ernst O., MD
  Layawen, Aselo, MD
  Lebeau, Michael E., MD
  Luckenbill, Michael R., MD
  Mahale, Adit, MD
  Martin, C Kent, MD
  Reddy, Karthik, MD
  Reynolds, John T., MD
  Tello, Ronald D., MD
  Wos, Edward J., DO
  Zagnoon, Abbas, MD
- Nephrology
  Hassan, Syed F., MD
  Mahale, Adit, MD
- Neurological Surgery
  Lwu, Shelly H., MD
  Van Norman, Alan, MD
- Neurology
  Arazi, Richard, MD
  Dunnigan, Ralph T., MD
  Miller, Stephanie A., MD
  Spahija, Berislav, MD

North Dakota (cont.)
Bismarck (cont.)

Sanford Medical Center (cont.)

- Obstetrics/Gynecology
  Danielson, Christopher J., MD
  Hofland, Erica C., MD
  Iverson, Christie A., MD
  Klemin, Peter L., MD
  Orser, Shari L., MD
  Perkerewicz, Kathleen M., MD
  Williams, Alisha V., MD
  Woodrow, Peter A., MD
- Oncology
  Chaudhary, Vijay, MD
  Reynolds, John T., MD
  Serabe, Baruti M., MD
  Wos, Edward J., DO
- Ophthalmology
  Litchfield, Douglas W., MD
- Orthopedic Surgery
  Canham, William D., MD
  Carpenter, Matthew R., MD
  Fyfe, Ian C., MD
  Gattey, Philip H., MD
  Gehrig, Laura M., MD
  Norberg, Jon D., MD
  O'Regan, David J., MD
- Otology, Laryngology, Rhinology
  Coombe, Walter T., MD
  Fiechtner, Marcus M., MD
  Nelson, Jeffrey J., MD
  Wink, Sue K., MD
  Yorgason, Joshua G., MD
- Pathology
  Colby, Karna, MD
  Fisher, Catherine P., MD
  Jia, Hongchen, MD
  Johnson, Craig A., MD
  Osmond, Gregory W., MD
- Pathology, Anatomy, Clinical Pathology
  Meyer, Jason L., MD
- Pediatrics
  Bautista-Azores, Richelle P., MD
  Cabalka, Allison L., MD
  Cannon, Bryan, MD
  Cleveland, Chris, MD
  Decock, Christopher, MD
  Eidem, Benjamin W., MD
  Horner, Justin, MD
  Johnson, Jonathan N., MD
  Klein, Katherine A., MD

North Dakota (cont.)
Bismarck (cont.)

Sanford Medical Center (cont.)

- Pediatrics (continued)
  Kumar, Parag, MD
  McDonough, Stephen M., MD
  Ocejo, Rafael, MD
  Oksa, Amy E., MD
  Peterson, Gary D., MD
  Reinke, Sara L., MD
  Seibel, Melissa M., MD
  Serabe, Baruti M., MD
  Twogood, Todd A., MD
- Peripheral Vascular Diseases Or Surgery
  Boyko, Kimber M., MD
  Pansegrau, Timothy L., MD
- Physical Medicine and Rehabilitation
  Eggert, Douglas K., MD
  Murphy, Kevin P., MD
  Peterson, Gregory S., MD
- Plastic Surgery
  Bronson, Davis L., MD
  Dibbell, David G., MD
- Podiatry, Surgical Chiropody
  Hart, Eric M., DPM
  Koester, Kevin J., DPM
  Tello, Francisco A., DPM
- Psychiatry (MD/DO)
  Balf, Gabriela, MD
  Belzer-Curl, Gretchen G., MD
  Collier, Jeanine S., MD
  Gibson, David K., MD
  Haaland, Robin M., MD
  Henke, Melissa J., MD
  Huber, Cheryl, MD
  Pathak, Prem N., MD
  Shrestha, Sacheen, MD
- Psychiatry, Neurology
  Judice, Ross D., MD
- Pulmonary Diseases
  Gupta, Vikesh, MD
  Sarrigiannidis, Andreas, MD
- Radiology
  Fogarty, Edward F., MD
  Gardner, Bruce A., MD
  Iwamoto, Matthew M., MD
  McIntee, Michael J., MD
  Miller, John A., MD
  Tello-Skjerseth, Christina, MD

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PARTICIPATING PHYSICIANS

Sanford Medical Center (cont.)

- Rheumatology
  Peterson, Lynne S., MD
- Thoracic Surgery
  Akins, Chris W., MD
  Boyko, Kimber M., MD
  Hieb, Robert E., MD
  McNeil, Jeffrey, MD
  Pansegrau, Timothy L., MD
  Russell, Sean S., MD
  Viney, Jeanette M., MD
- Urology
  Chinn, Douglas O., MD
  Koleilat, Nadim, MD
  Taylor, Joseph C., MD

Sanford North Clinic
2830 N Washington St
(701) 323-6400

- Dermatology
  Knudson, Richelle M., MD
- Family Practice
  Carlson, Jessica A., MD
  Emery, Russell J., MD
  Klemin, Jill M., MD
  Yalamanchili, Prashanthi, MD
- Pathology
  Fisher, Catherine P., MD
- Radiology
  Fogarty, Edward F., MD
  Iwamoto, Matthew M., MD
  McIntee, Michael J., MD
  Miller, John A., MD
  Tello-Skjerseth, Christina, MD

Sanford North Walk-In Clinic
3318 N 14th Street
(701) 323-8300

- Emergency Medicine
  Blanchard, Joel H., MD
  Cusic, Robert L., MD
  Fairbairn, Thomas D., MD
- Family Practice
  Ashley, Lynn E., MD
  Betting, Susan S., MD
  Blanchard, Joel H., MD
  Dornacker, Angela S., MD
  Kosiak, Donald J., MD
  Patel, Niral R., MD
  Rauta, Olimpia, MD

North Dakota (cont.)
Bismarck (cont.)

Sanford North Walk-In Clinic (cont.)

- Infectious Diseases
  Martin, C Kent, MD
- Internal Medicine
  Martin, C Kent, MD
- Pathology
  Fisher, Catherine P., MD
- Radiology
  Fogarty, Edward F., MD
  Iwamoto, Matthew M., MD
  McIntee, Michael J., MD
  Miller, John A., MD
  Tello-Skjerseth, Christina, MD

Sanford Seventh and Broadway
715 E Broadway Ave
(701) 323-8922

- Allergy
  Larson, James B., MD
- Emergency Medicine
  Fairbairn, Thomas D., MD
  Grooms, Paul G., DO
  Moen, R J., MD
- Family Practice
  Bossort, James B., MD
  Carlson, Jessica A., MD
  Fairbairn, Thomas D., MD
  Fyfe, Alistair G., MD
  Hoggarth, Tonia L., MD
  Klop, Krissondra L., DO
  Moen, R J., MD
  Thompson, Eric M., MD
- General Practice
  Bossort, James B., MD
  Fyfe, Alistair G., MD
- Otology, Laryngology, Rhinology
  Coombe, Walter T., MD
  Fiechtner, Marcus M., MD
  Nelson, Jeffrey J., MD
  Wink, Sue K., MD
  Yorgason, Joshua G., MD
- Pathology
  Fisher, Catherine P., MD
- Radiology
  Fogarty, Edward F., MD
  Iwamoto, Matthew M., MD
  McIntee, Michael J., MD
  Miller, John A., MD
  Tello-Skjerseth, Christina, MD

North Dakota (cont.)
Bismarck (cont.)

Sanford Seventh and Rosser Clinic
414 N 7th St
(701) 323-6815

- Anesthesiology (MD)
  Quast, Michael L., MD
- Endocrinology
  Christensen, Steffen P., MD
  Dahl, Stephanie K., MD
- Family Practice
  Field, David R., MD
  Sell, Shanon M., DO
- Internal Medicine
  Henke, Melissa J., MD
- Obstetrics/Gynecology
  Christensen, Steffen P., MD
  Dahl, Stephanie K., MD
  Danielson, Christopher J., MD
  Iverson, Christie A., MD
  Klemin, Peter L., MD
  Orser, Shari L., MD
  Perkerewicz, Kathleen M., MD
  Woodrow, Peter A., MD
- Psychiatry (MD/DO)
  Balf, Gabriela, MD
  Gibson, David K., MD
  Haaland, Robin M., MD
  Henke, Melissa J., MD
  Huber, Cheryl, MD
  Pathak, Prem N., MD
  Shrestha, Sacheen, MD
- Radiology
  Fogarty, Edward F., MD
  Iwamoto, Matthew M., MD
  McIntee, Michael J., MD
  Miller, John A., MD
  Tello-Skjerseth, Christina, MD

Sanford Seventh and Thayer
209 7 St N
(701) 323-5590

- Family Practice
  Field, David R., MD
- Internal Medicine
  Keys, Daniel O., MD
  Lebeau, Michael E., MD
  Lunn, Gerry M., MD
- Pathology
  Fisher, Catherine P., MD

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PARTICIPATING PHYSICIANS

North Dakota (cont.)
Bismarck (cont.)

Sanford Seventh and Thayer
225 N 7th St
(701) 323-8920

- Family Practice
  Penn, Jeremiah J., MD
- Orthopedic Surgery
  Canham, William D., MD
  Carpenter, Matthew R., MD
  Fyfe, Ian C., MD
  Gattey, Philip H., MD
  Gehrig, Laura M., MD
  Norberg, Jon D., MD
  O'Regan, David J., MD
- Plastic Surgery
  Bronson, Davis L., MD
- Podiatry, Surgical Chiropody
  Koester, Kevin J., DPM
  Tello, Francisco A., DPM

Sanford South Clinic
1040 Tocoma Ave
(701) 323-6400

- Family Practice
  Klop, Krissondra L., DO
  Miller, Brenda L., MD
  Pengilly, David J., MD
  Smith, Stuart T., MD
  Stein, Sherry L., MD
  Tincher, Michelle R., MD
- Pathology
  Fisher, Catherine P., MD
- Radiology
  Fogarty, Edward F., MD
  Iwamoto, Matthew M., MD
  McIntee, Michael J., MD
  Miller, John A., MD
  Tello-Skjerseth, Christina, MD

Smith, Jeff, MD PC
1033 Basin Ave
(701) 223-6613

- Family Practice
  Smith, Jeffrey A., MD

Spine Orthopedic and Pain Center PC
121 W Century Ave
(701) 530-8500

- Physical Medicine and Rehabilitation
  Martire, Michael P., MD

North Dakota (cont.)
Bismarck (cont.)

St Alexius Heart & Lung Clinic LLC
310 N 10th St
(701) 530-7500

- Allergy
  Piyamahunt, Arkapol, MD
- Anesthesiology (MD)
  Cave, Jeffrey R., MD
  Cleary, William F., MD
  Harvey, William S., DO
  Hoskins, Nicholas A., MD
  Jankoviak, Michael D., MD
  Klein, Scott A., MD
  Laszewski, Linda J., MD
  Lo, Lim-Che, MD
  Loven, Roger R., MD
  Mathieu, Maryse, MD
  Preszler, Todd M., MD
  Russon, Troy S., MD
  Voigt, Matthew L., MD
  White, Peter, MD
- Cardiovascular Disease
  Brown, Michael R., MD
  Diede, Stanley T., MD
  Eshoo, Norman S., MD
  Mahr, Nicholas C., MD
  Mathew, Boban, MD
  Murthy, Mylapanahalli G., MD
  Nelson, Matthew R., MD
  Oatfield, Robert G., MD
- General Surgery
  Booth, A Michael, MD
  Marts, Boyd C., MD
- Geriatrics
  Kriengkrairut, Somsak, MD
- Internal Medicine
  Benson, Jeffre J., MD
  Diede, Stanley T., MD
  Eshoo, Norman S., MD
  Hughes, James A., MD
  Ilie, Camelia C., MD
  Kriengkrairut, Somsak, MD
  Mathew, Boban, MD
  Murthy, Mylapanahalli G., MD
  Oatfield, Robert G., MD
  Paulo, Monica T., MD
  Piyamahunt, Arkapol, MD
  Sulieman Daoud, Ahmed, MD
- Pediatrics
  Fernandez-Martorell, Patricio, MD

North Dakota (cont.)
Bismarck (cont.)

St Alexius Heart & Lung Clinic LLC (cont.)

- Pediatrics (continued)
  Zacher, Carla J., MD
- Pulmonary Diseases
  Hughes, James A., MD
  Kriengkrairut, Somsak, MD
  Paulo, Monica T., MD
  Sulieman Daoud, Ahmed, MD
- Radiology
  Herbel, Brent D., MD
  Jahn, Paul, MD
  Kalagher, Sean D., MD
- Thoracic Surgery
  Booth, A Michael, MD
  Brown, Michael R., MD

St Alexius Medical Center
900 E Broadway Ave
(701) 530-3105

- Anesthesiology (MD)
  Johnson, Gary N., MD
  Markewich, Stephen, MD
  White, Peter, MD
- Emergency Medicine
  Bradley, Amanda J., MD
  Magill, Thomas R., MD
- Family Practice
  Abramovith Feijo, Paula A., MD
  Dhamija, Sulakshna, MD
  Fahn, J Patrick C., DO
  Guanzon, Ricardo A., MD
  Guntakandla, Jaswanth R., MD
  Hostetter, Jeffrey E., MD
  Kim, In-Ah, MD
  Magill, Thomas R., MD
  Seifert, Shelly A., MD
  Taha, Taleb N., MD
  Tepastte, Michelle L., MD
  Walker, Laura L., MD
- General Practice
  Chow, Ling Sing, MD
  Hoovestol, Ryan A., MD
  Price, Tyler C., MD
  Willis, Karin K., MD
- General Surgery
  Booth, A Michael, MD
  Narayana, Avinash, DO
- Infectious Diseases
  Arthurs, Supha K., MD

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PARTICIPATING PHYSICIANS

North Dakota (cont.)
Bismarck (cont.)

St Alexius Medical Center (cont.)

- Internal Medicine
  Acharya, Pranab S., MD
  Anderson, Peter W., MD
  Arthurs, Supha K., MD
  Astorne Figari, Walter J., MD
  Datz, Kurt G., DO
  Dunnigan, Earl J., MD
  Eklof, Jonathan R., MD
  Finkielman, Javier D., MD
  Francis, Lisa, MD
  Grenz, Don H., MD
  Hebert, Brian J., MD
  Hetland, Bruce M., MD
  Hsu, Chia Chun, MD
  Jain, Sunanda, MD
  Kichloo, Amir A., MD
  Levora, Jan, MD
  Pandeya, Sameer R., MD
  Raducu, Radu R., MD
  Ramdeen, Khris R., MD
  Reyman, Jake E., DO
  Reyman, Lindsey R., DO
  Sandhu, Ankur, MD
  Schwartz, Julie M., MD
  Songsiridej, Nowarat, MD
  Sulieman Daoud, Ahmed, MD
  Tanous, Robert, DO
  Vasa, Aaron A., MD
  White, Peter, MD
- Nephrology
  Dunnigan, Earl J., MD
  Jain, Sunanda, MD
  Levora, Jan, MD
- Neurological Surgery
  Belanger, Eric, MD
  Kraljic, Steven G., MD
  Monasky, Mark S., MD
- Neurology
  Hyder, Syed S., MD
  Kriengkrairut, Siriwan, MD
  Tariq, Farhan A., MD
  Wongjirad, Chatree, MD
- Obstetrics/Gynecology
  Obritsch, Jerry M., MD
- Pediatrics
  Brown, Karen R., MD
  Fernandez-Martorell, Patricio, MD
  Kriengkrairut, Siriwan, MD

North Dakota (cont.)
Bismarck (cont.)

St Alexius Medical Center (cont.)

- Pediatrics (continued)
  Patel, Mahesh, MD
- Physical Medicine and Rehabilitation
  Killen, Shelley A., MD
- Psychiatry (MD/DO)
  Capan, Michael P., MD
  Dahmen, Kevin R., MD
  Johnson, Terry M., MD
  Mirzai, Michael, MD
  Nelson, Diane L., MD
  Row, Jeffrey H., MD
  Sanches, Marsal, MD
  Van Valkenburg, Daisy R., MD
- Pulmonary Diseases
  Sulieman Daoud, Ahmed, MD
- Radiology
  Fortney, Michael S., MD
  Holmen, John H., MD
  Peterson, Douglas R., MD
  Schirado, Mike A., MD
- Rheumatology
  Francis, Lisa, MD
  Songsiridej, Nowarat, MD
- Thoracic Surgery
  Booth, A Michael, MD
- Urology
  Fukuda, Christopher S., MD
  Gray, Todd A., MD
  Pathroff, Robert A., MD
  Rainwater, Leslie M., MD

St Alexius Medical Center/Emergency Physician Services
900 E Broadway Ave
(701) 530-7001

- Emergency Medicine
  Allen, Charles O., DO
  Bathurst, Robert M., MD
  Bradley, Amanda J., MD
  Gayton, David J., MD
  Leingang, Gordon D., DO
  Magill, Thomas R., MD
  McCullough, Sarah J., MD
  Mickelson, Kevin S., MD
  Price, Tyler C., MD
- Family Practice
  Magill, Thomas R., MD

North Dakota (cont.)
Bismarck (cont.)

St Sophies, LLC
3000 N 14th St #2a
(701) 252-2001

- Psychiatry (MD/DO)
  Kenney, Emmet M., MD

The Bone & Joint Center, PC
310 N 9th St
(701) 530-8650

- Family Practice
  Cote, Derrick O., MD
- Hand Surgery
  Larsen, David H., DO
  Pierce, Troy D., MD
- Orthopedic Surgery
  Ackerman, Duncan B., MD
  Bopp, Timothy J., MD
  Carlson, Chad B., MD
  Carlson, Joseph W., MD
  Dahl, Charles P., MD
  Hart, Mark B., MD
  Juelson, Timothy J., MD
  Larsen, David H., DO
  Moore, Michael R., MD
  Pierce, Troy D., MD

Valley Weight Loss Clinic
1500 Interchange Ave
Ste 210
(701) 365-8446

- Internal Medicine
  Hella, Brent M., MD

West Central Human Service Center
1237 W Divide Ave Ste 5
(701) 328-8888

- Psychiatry (MD/DO)
  Capan, Michael P., MD
  Eick, Thomas J., DO
  McLean, Andrew J., MD

Bottineau

Family Vision Center
522 Main St
(701) 228-2219

- Optometrist
  Dunderland, Paul D., OD

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PARTICIPATING PHYSICIANS

North Dakota (cont.)

Bottineau (cont.)

St Andrews Bottineau Clinic, LLC
314 Ohmer St
(701) 228-9400

- Family Practice
  Hamilton, Robert A., MD
  Skjolden, Jessica A., MD
- General Practice
  Kihle, Kenneth W., MD

St Andrews Health Center
316 Ohmer St
(701) 228-9400

- Family Practice
  Hamilton, Robert A., MD
  Kihle, Kenneth W., MD
  Skjolden, Jessica A., MD
- General Practice
  Kihle, Kenneth W., MD
- Ophthalmology
  Bouchard Kindy, Evelyne B., MD

St Andrews Hospital/MAMC
314 Ohmer St
(701) 228-9400

- Family Practice
  Hamilton, Robert A., MD

Bowbells

Northland Community Health Center
18 Main St SW
(701) 377-4758

- Family Practice
  Vaagen, Jeffrey L., MD
- Internal Medicine
  Vaagen, Jeffrey L., MD

Bowman

Southwest Medical Clinic
12 6th Ave SW
(701) 523-3226

- Family Practice
  Meadows, David T., MD
  Tomboulian, Sherryl, MD
- General Practice
  Lanchbury, Forrest, MD
  Swisher, Paul L., MD
- Pediatrics
  Oksa, Amy E., MD

North Dakota (cont.)

Bowman (cont.)

West River Health Service
608 Highway 12 W
(701) 523-3271

- Family Practice
  Boschee, Tracy B., DO
  Houle, Catherine E., MD
  Jacobsen, Thomas E., MD
  Joyce, John P., MD
  Thorngren, Frank A., MD
  Wellman, Stacie M., MD
- General Practice
  Sheffield, Jennifer L., MD
- Geriatrics
  Hoerauf, Kent R., MD
  Willoughby, Brian G., MD
- Internal Medicine
  Hoerauf, Kent R., MD
  Ranum, Joshua C., MD
  Willoughby, Brian G., MD
- Obstetrics/Gynecology
  Jacobsen, Thomas E., MD
- Pediatrics
  Ketterling, Ellen L., MD
  Ranum, Carrie Ann K., MD
- Podiatry, Surgical Chiropody
  Kilwein, Steven C., DPM

Cando

Towner County Medical Center
Hwy 281 N
(701) 968-2541

- Family Practice
  Peterson, Mark G., MD
  Petty, Russell W., MD
  Viscito, Matthew S., MD
- Podiatry, Surgical Chiropody
  Fanous, Basem Z., DPM

Carrington

Carrington Health Center
800 4th St N
(701) 652-3141

- Family Practice
  Page, Michael J., MD
  Schaffer, Todd W., MD
- General Practice
  Geier, Rick J., MD

North Dakota (cont.)

Carrington (cont.)

Family Vision Center
110 9th Ave S
(701) 652-2020

- Optometrist
  Hendrickson, Kathy M., OD

Foster County Medical Center
820 5th St N
(701) 652-2515

- Family Practice
  Page, Michael J., MD
  Schaffer, Todd W., MD
- General Practice
  Geier, Rick J., MD
- General Surgery
  Khokha, Inder V., MD

Frisk, James L. MD Ltd
800 North 4th St
(701) 235-1924

- Otology, Laryngology, Rhinology
  Frisk, James L., MD

Plains Ear Nose Throat & Facial Plastic Surgery,PC
800 North 4th St
(701) 235-1924

- Otology, Laryngology, Rhinology
  Frisk, James L., MD

Professional Eyecare Center
6712 Highway 200 E
(701) 652-2222

- Optometrist
  Frohlich, Douglas L., OD
  Fronk, Kent, OD

Casselton

Essentia Health Casselton Clinic
5 9th Ave N
(701) 347-4445

- Family Practice
  Domm, Bruce L., MD
- Geriatrics
  Domm, Bruce L., MD
- Obstetrics/Gynecology
  Domm, Bruce L., MD

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PARTICIPATING PHYSICIANS

North Dakota (cont.)

Cavalier

Altru Cavalier
201 E 3rd Ave S
(701) 265-8338

- Allergy
  Jacobsen, John J., MD
- Cardiovascular Disease
  Aboufakher, Rabeea, MD
  Bekdash, Ismail L., MD
- Dermatology
  Hoverson-Schott, Alyssa R., MD
  Muus, John H., MD
- Endocrinology
  Brosseau, James D., MD
- Family Practice
  Gaul, Joanne N., MD
  Thompson, Susan J., MD
- General Surgery
  Hape, Robin T., MD
  Usatii, Anatolie A., MD
- Geriatrics
  Aboufakher, Rabeea, MD
  Brosseau, James D., MD
  Okundaye, Ebima C., MD
- Internal Medicine
  Bekdash, Ismail L., MD
  Breitwieser, Wayne R., MD
  Brosseau, James D., MD
  Mudireddy, Uma M., MD
  Okundaye, Ebima C., MD
  Panico, Kevin, MD
  Paulson, Rolf R., MD
  Thompson, Susan J., MD
- Nephrology
  Okundaye, Ebima C., MD
- Neurology
  Novacek, Rebecca K., MD
  Roller, Matthew J., MD
- Obstetrics/Gynecology
  Lessard, Collette R., MD
- Oncology
  Walsh, Daniel J., MD
- Ophthalmology
  Brockman, Ronald J., MD
- Otology, Laryngology, Rhinology
  Johnson, Alan W., MD
- Podiatry, Surgical Chiropody
  Britten, Joshua W., DPM
- Psychiatry (MD/DO)
  Feldman, Ellen K., MD
  Madaram, Kondal R., MD

North Dakota (cont.)

Cavalier (cont.)

Altru Cavalier (cont.)

- Pulmonary Diseases
  Breitwieser, Wayne R., MD
  Mudireddy, Uma M., MD
- Radiology
  James, John, MD
  Stevens, Kerry A., MD

Cavalier Optometry Clinic
201 E 3rd Ave S
(701) 265-8315

- Optometrist
  Clark, Selmer M., OD

Pembina County Hospital/Clinic
301 Mountain St E
(701) 265-6307

- Family Practice
  Sumra, Kulvinder S., MD
- General Surgery
  Khokha, Inder V., MD
- Radiology
  Aizpuru, Richard D., MD
  Ali, Azhar T., MD
  Arsenault, Todd M., MD
  Asis, Martin J., MD
  Baldwin, Matthew T., MD
  Baraga, Joseph J., MD
  Barkmeier, Jeffrey, MD
  Berens, Bruce M., MD
  Berger, Mark W., MD
  Block, Nathan D., MD
  Bowman Seitz, Tara S., MD
  Bretzke, Carl A., MD
  Bretzman, Peter A., MD
  Bryan, Erich N., MD
  Butler, Robert R., MD
  Carlson, Blake A., MD
  Caspers, John M., MD
  Castaneda, Wilfrido R., MD
  Ditmanson, Phil M., MD
  Drake, David G., MD
  Edmonson, George R., MD
  Frecentese, Dominic F., MD
  Gilloon, Benjamin A., MD
  Goertzen, Timothy C., MD
  Hartigan, Andrew S., MD
  Hommeyer, Steven C., MD
  Jackson, Christopher A., MD
  Johnson, Adam C., MD
  Kang, Edith H., MD

North Dakota (cont.)

Cavalier (cont.)

Pembina County Hospital/Clinic (cont.)

- Radiology (continued)
  Knoedler, John P., MD
  Knutzen, Anders M., MD
  Lambert, David P., MD
  Leon, Jorge A., MD
  Loe, Matthew J., MD
  Longley, Deborah G., MD
  Magnuson, Jeffrey E., MD
  Maguire, Frank P., MD
  May, Benjamin J., MD
  Mulcahy, Paul F., MD
  Muschenheim, Alexandra L., MD
  Page, Graydon T., MD
  Parrino, Suzanne S., MD
  Passe, Theodore J., MD
  Phelan, Jeffrey S., MD
  Prescott, Trisha R., MD
  Rathmann, Gregory A., MD
  Rhodes, Nicholas G., MD
  Ruzek, Kimberly A., MD
  Savcenko, Vladimir, MD
  Sullivan, Patrick P., MD
  Tai, Angela W., MD
  Tashjian, Joseph H., MD
  Truman, Susan M., MD
  Tummala, Anuradha K., MD
  Veldman, Mark W., MD
  Weinmann, Robert H., MD
  Weisensee, Anne M., MD
  Wiese, Don E., MD
  Wittenberg, Keith H., MD
  Wold, Peter B., MD

Pembina County Memorial Hospital (MAMC)
301 Mountain St E
(701) 265-8461

- Family Practice
  Lindemann, Alan R., MD

Center

Coal Country Community Health Center
111 E Main St
(701) 794-8798

- Family Practice
  Garman, Aaron M., MD
  Jackson, Orlan D., DO
  Jon-Klindworth, Jacinta, MD

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PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING PHYSICIANS

North Dakota (cont.)

Cooperstown

Cooperstown Medical Center
1200 Roberts Ave NE
(701) 797-2128

- Family Practice
  Gourneau, Linda F., MD
  Karki, Mohan R., MD

Family Vision Center
1200 Roberts Ave NE
(701) 797-2699

- Optometrist
  Hendrickson, Kathy M., OD

Crosby

Crosby Clinic
702 1st St SW
(701) 965-6349

- Family Practice
  Hutchison, Rose E., MD
  Peterson, Mark G., MD
  Sedo, Philip S., MD
  Selland, Brian L., MD
  Sullivan, Brian M., MD

Devils Lake

20/20 Eyecare
211 4th St NE Suite 1
(701) 662-2040

- Optometrist
  Burdick, Blaine L., OD

Altru At 20/20 Eye Care
211 4th St NE Ste 1
(701) 662-2817

- Ophthalmology
  Khairallah, Christian G., MD

Altru Clinic Lake Region
1001 7th St
(701) 662-2157

- Allergy
  Jacobsen, John J., MD
- Cardiovascular Disease
  Chebaclo, Mohamed, MD
  Kirnus, Mikhail, MD
- Dermatology
  Hoverson-Schott, Alyssa R., MD
  Muus, John H., MD
- Endocrinology
  Brosseau, James D., MD

North Dakota (cont.)

Devils Lake (cont.)

Altru Clinic Lake Region (cont.)

- Family Practice
  Bittner, Heidi M., MD
  Fetterly, Paul J., MD
  Fleissner, Paul, MD
  Lim, Elson T., MD
  Martin, Candelaria C., MD
  Nalubega, Rita, MD
  Rostad, Christina T., MD
  Wayman, Derek, MD
- Gastroenterology
  Bharath, Somasundaram, MD
- General Surgery
  Belluk, Bradley P., MD
  Charette, Scott D., MD
  Debeltz, Donald J., MD
  Guttormson, Robert D., MD
  Usatii, Anatolie A., MD
- Geriatrics
  Brosseau, James D., MD
  Okundaye, Ebima C., MD
- Hand Surgery
  Leetun, Darin T., MD
- Infectious Diseases
  Hargreaves, James E., DO
- Internal Medicine
  Bharath, Somasundaram, MD
  Breitwieser, Wayne R., MD
  Brosseau, James D., MD
  Corbett, Thomas C., MD
  Downs, Jacqueline L., MD
  Go, Jason S., MD
  Haastrup, Adetola T., MD
  Kirnus, Mikhail, MD
  Logrono, Al-Marie Grace T., MD
  Moraleda, Roberto H., MD
  Mudireddy, Uma M., MD
  Okundaye, Ebima C., MD
  Paulson, Rolf R., MD
  Rahman, Mohammed H., MD
- Nephrology
  Haastrup, Adetola T., MD
  Okundaye, Ebima C., MD
  Rahman, Mohammed H., MD
- Neurology
  Roller, Matthew J., MD
- Obstetrics/Gynecology
  Eickenbrock, Andrea M., MD

North Dakota (cont.)

Devils Lake (cont.)

Altru Clinic Lake Region (cont.)

- Oncology
  Bustillo Chams, Ivan J., MD
  Dentchev, Todor N., MD
- Orthopedic Surgery
  Clayburgh, Robert H., MD
  Johnson, Robert A., MD
  Leetun, Darin T., MD
- Otology, Laryngology, Rhinology
  Lapp, Gregory C., MD
- Pathology
  Cooley, A. Marvin, MD
- Pediatrics
  Panda, Durga P., MD
  Sondrol, Lori A., MD
- Physical Medicine and Rehabilitation
  Fleissner, Paul, MD
- Podiatry, Surgical Chiropody
  Criswell, Samuel W., DPM
  Johnston, Alisha L., DPM
- Psychiatry (MD/DO)
  Feldman, Ellen K., MD
  Madaram, Kondal R., MD
- Pulmonary Diseases
  Bansal, Arvind K., MD
  Breitwieser, Wayne R., MD
  Mudireddy, Uma M., MD
- Radiology
  Aafedt, Bradley C., MD
  Chou, David, MD
  Dallum, Bernie J., MD
  Hagen, William N., DO
  Hood, Larissa L., MD
  James, John, MD
  Johnson, Richard E., MD
  Omdahl, Bonnie B., MD
  Schroeder, James G., MD
  Treuer, Jody B., MD

Devils Lake Community Clinic
425 S College Dr Ste 14
(701) 968-2541

- Family Practice
  Petty, Russell W., MD
- Podiatry, Surgical Chiropody
  Fanous, Basem Z., DPM

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING PHYSICIANS

North Dakota (cont.)
Devils Lake (cont.)

Drs Krein & Moen, PC
404 Highway 2 E
(701) 662-4085

- Optometrist
  Enderle, Carey L., OD
  Krein, Kyle D., OD
  Moen, Mark, OD

Lake Region Human Service Center
200 Highway 2 SW
(701) 665-2200

- Psychiatry (MD/DO)
  Clinkenbeard, James, MD
  McLean, Andrew J., MD

Medical Imaging Associates
1031 7th St
(701) 662-5247

- Radiology
  Johnson, Richard E., MD

The Mercy Hospital of Devils Lake
1031 7th St NE
(701) 662-2131

- Emergency Medicine
  Bales, Jordan L., MD
  Beaty, James R., MD
  Wiltse, Richard J., MD
- Family Practice
  Andersen, Jeffrey B., MD
  Baruti, Timur A., MD
  Cheng, Stephen, MD
  Doser, Craig M., MD
  Dueber, George B., DO
  Dumbolton, John H., DO
  Fetterly, Paul J., MD
  Jonas, Roxanne L., MD
  Larson, Richard L., MD
  Martin, Richard E., MD
  Matheson, Thomas B., MD
  Overvold, Angel D., DO
  Raymond, Arthur J., MD
  Wilson Hall, Nicole, DO
- Gastroenterology
  Bharath, Somasundaram, MD
- General Practice
  Bermudez, Christopher J., MD
  Mercy Hospital Devils Lk Cln
- Internal Medicine
  Bharath, Somasundaram, MD

North Dakota (cont.)
Devils Lake (cont.)

The Mercy Hospital of Devils Lake (cont.)

- Internal Medicine (continued)
  Corbett, Thomas C., MD
  Jahed, Abdul Z., MD
  Moraleda, Roberto H., MD
- Plastic Surgery
  Martello, Jeannette Y., MD

Trinity Regional Eyecare - Devils Lake
404 Hwy 2 East
(701) 662-4085

- Family Practice
  Dicken, Robert A., MD
- Ophthalmology
  Dannenberg, Lee L., MD
  Dicken, Robert A., MD
  Wolsky, Chad J., MD

Dickinson

Addo, Fek MD
227 16th St W
(866) 503-9900

- Internal Medicine
  Addo, Ferdinand E., MD

Advanced Vision Centers
446 3rd Ave W
(701) 225-2020

- Optometrist
  Nelson, Jay C., OD
  Przymus, David C., OD

Badlands ENT Clinic
227 16th St W
(701) 456-4700

- Otology, Laryngology, Rhinology
  Rosenberg, Zachary, MD

Badlands Human Service Center
300 13 Ave W Ste 1
(701) 227-7500

- Psychiatry (MD/DO)
  McLean, Andrew J., MD
  Van Valkenburg, Daisy R., MD

Better Vision PC
2456 3rd Ave W
(701) 456-8035

North Dakota (cont.)
Dickinson (cont.)

Better Vision PC (cont.)

- Optometrist
  Biesiot, Vincent, OD

Community Action Partnership
202 E Villard St
(701) 227-0131

- General Practice
  Sheffield, Jennifer L., MD

Dakota Bone and Joint
109 W 7th St
(701) 483-2973

- Orthopedic Surgery
  Isackson, Ronald D., MD

Emmerich Eye Clinic
34 1st St E
(701) 225-9601

- Optometrist
  Emmerich, Mark A., OD

Eyewear Concepts
2273 3rd Ave W
(701) 225-7886

- Optometrist
  Keller, Jessica, OD
  Oltmanns, Melanie K., OD
  Shilman, Nathaniel D., OD

Great Plains Clinic, PC
33 9th St W
(701) 483-6017

- Family Practice
  Komorowska, Danuta, MD
  Rathgeber, Cory E., MD
  Wolf, Dennis E., MD
- General Surgery
  Brooke, James M., MD
- Geriatrics
  Wolf, Dennis E., MD
- Internal Medicine
  Ohara, Brian E., MD
  Olin, Bruce W., MD
- Pediatrics
  Ohara, Brian E., MD

Grube Retina Clinic, PC
2273 3rd Ave W
(701) 751-2131

- Ophthalmology
  Grube, Thomas J., MD

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING PHYSICIANS

North Dakota (cont.)
Dickinson (cont.)

Keaveny, John, DDS
669 12th St W
(701) 225-5163

- Oral Surgery
  Keaveny, John T., DDS

King Family Eye Clinic, PC
341 1st St E
(701) 483-9141

- Optometrist
  Hoff, Candace P., OD
  King, Alan J., OD

Matthys, Gary A., MD, Plc
33 9th St W
(701) 241-9300

- Orthopedic Surgery
  Matthys, Gary, MD

Neurosurgical & Spinal Surgery Associates, PC
683 State Ave N
(605) 341-2424

- Neurological Surgery
  Ingraham, Robert Q., MD
- Neurology
  Maclachlan, Robert D., MD

Sanford Health Dickinson Clinic
2615 Fairway St
(701) 456-6000

- Cardiovascular Disease
  Korte, Stephen A., MD
  Reddy, Karthik, MD
- Family Practice
  Garman, Aaron M., MD
  Hochhalter, David, MD
  Johansen, James R., MD
  Martin, Heather M., DO
  Nordeng Zimmermann, Rena M., MD
  Sherman, Kamille S., MD
  Skager, Tanya L., MD
  Thomas, Jack G., MD
  Thompson, Eric M., MD
  Wilson Hall, Nicole, DO
  Wolf, Terry L., DO
  Zimmerman, Ryan M., MD
- General Surgery
  Nelson, Brook V., MD

North Dakota (cont.)
Dickinson (cont.)

Sanford Health Dickinson Clinic (cont.)

- Internal Medicine
  Anderson, Patricia W., MD
  Hinrichs, Mark, MD
  Korte, Stephen A., MD
  Reddy, Karthik, MD
  Wos, Edward J., DO
- Obstetrics/Gynecology
  Hofland, Erica C., MD
  McMacken, Audrey, MD
  Vandall, Michael, MD
  Williams, Alisha V., MD
- Oncology
  Wos, Edward J., DO
- Orthopedic Surgery
  Gattey, Philip H., MD
  Kovacs, Gregg R., DO
- Pathology
  Fisher, Catherine P., MD
- Pediatrics
  Oksa, Amy E., MD
  Peterson, Gary D., MD
  Ricks, Marc D., MD
- Radiology
  Fogarty, Edward F., MD
  Iwamoto, Matthew M., MD
  McIntee, Michael J., MD
  Miller, John A., MD
  Tello-Skjerseth, Christina, MD
- Urology
  Koleilat, Nadim, MD

Sanford Health Occupational Medicine Clinic
1531 W Villard St Ste A
(701) 225-7575

- Emergency Medicine
  Blanchard, Joel H., MD
- Family Practice
  Blanchard, Joel H., MD
- Pathology
  Fisher, Catherine P., MD

St Josephs Hospital & Health Center
30 7th St W
(701) 456-4000

- Anesthesiology (MD)
  Boutrous, Attas, MD
  Carlson, Hugh S., MD

North Dakota (cont.)
Dickinson (cont.)

St Josephs Hospital & Health Center (cont.)

- Anesthesiology (MD) (continued)
  Johnson, Gary N., MD
  Knutson, Ronald M., MD
  Volesky, Patrick J., MD
- Emergency Medicine
  Adams, Kelly, DO
  Bathurst, Robert M., MD
  Cassidy, Michael L., MD
  Kuylen, David A., MD
  Lotstein, Robert J., MD
  Magill, Thomas R., MD
  McCarthy, John P., MD
  McCullough, Sarah J., MD
  Swenson, Kjirsten, MD
  Swenson, Sheldon L., MD
  Wilkie, Penny M., MD
- Family Practice
  McCarthy, John P., MD
  Paneru, Ram P., MD
- General Practice
  Riddick, Robert S., MD
- Internal Medicine
  Hinrichs, Mark, MD
  Jamil, Muhammad O., MD
  Labrie, Sonja, MD
  Olin, Bruce W., MD
  Sheps, Daniel J., DO
  Swami, Sharad S., MD
  Zehra, Nida, MD
- Obstetrics/Gynecology
  Arnold, Thomas, MD
  Pierce, Stephanie R., MD
  Stewart, Jeanne M., MD
- Orthopedic Surgery
  Kilzer, Ralph L., MD
- Otology, Laryngology, Rhinology
  Lennard-Love, Colleen M., MD
  Rosenberg, Zachary, MD
- Pathology
  Kovacs, Simin, DO
- Psychiatry (MD/DO)
  Fornal, Robert E., MD
  Lopez, David J., MD
- Psychiatry, Neurology
  Helgason, Chanel M., MD
- Radiology
  Bakker, Hilton J., MD

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PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING PHYSICIANS

North Dakota (cont.)
Dickinson (cont.)

St Josephs Surgical Care
45 8 St W
(701) 456-4740

- General Practice
  Riddick, Robert S., MD

St Josephs Walk In Clinic
227 16th St W
(701) 227-7900

- Internal Medicine
  Jamil, Muhammad O., MD
- Obstetrics/Gynecology
  Hendrzak, Ann Marie, MD
- Pediatrics
  Ahmed, Ibrahim M., MD
  Bautista-Azores, Richelle P., MD
  Khelghati, Amrullah, MD

St Josephs Womens Clinic
30 W 7th St
(701) 456-4200

- Obstetrics/Gynecology
  Arnold, Thomas, MD
  Barrett, Mary T., MD
  Clayton, Yocunda D., MD
  Hoffman, Cara L., MD
  Lowe, William M., MD
  Stewart, Jeanne M., MD

Weir Eye Clinic, LLC
849 3rd Ave W
(701) 483-2200

- Optometrist
  Weir, John C., OD

West River Foot and Ankle Center
683 State Ave Ste E
(701) 483-4561

- Podiatry, Surgical Chiropody
  Kilwein, Steven C., DPM

Drayton

Altru Drayton
1003 N Main St
(701) 454-3311

- Family Practice
  Funk, Peter A., MD
  Walz, Joel D., MD
- Psychiatry (MD/DO)
  Madaram, Kondal R., MD

North Dakota (cont.)
Drayton (cont.)

Dunham, Thomas, OD
104 E Hiway 66 Ste 102
(701) 454-3340

- Optometrist
  Dunham, Thomas, OD

Dunseith

Heart of America Johnson Clinic Dunseith
215 Main St SE
(701) 244-5694

- Emergency Medicine
  Fernandez, Oscar O., MD
- Family Practice
  Fernandez, Oscar O., MD
  Kremer, Ashely J., MD
  Schoneberg, Steven B., MD

Turtle Mountain Family Medicine LLC
115 Main St NE
(701) 244-5800

- Family Practice
  Selland, Brian L., MD

Edgeley

Sanford Health Edgeley Clinic
506 2nd St
(701) 493-2245

- Family Practice
  Schatz, Sarah, MD

Elgin

Jacobson Memorial Elgin Community Clinic
603 East St N
(701) 584-7231

- General Practice
  Knecht, John F., MD
- Internal Medicine
  Goyal, Deepak M., MD

Jacobson Memorial Hospital Care Center
601 East St N
(701) 584-3338

- General Practice
  Knecht, John F., MD

North Dakota (cont.)
Ellendale

Avera Clinic of Ellendale
240 Main St
(701) 349-3666

- Family Practice
  Holkesvik, Reid E., MD
- Orthopedic Surgery
  Macdougall, James B., MD
  Mantone, James K., MD

Avera Medical Group Cadiovascular Specialists Aberdeen
240 Main St
(605) 622-2573

- Cardiovascular Disease
  Sidaway, Larry S., DO
- Internal Medicine
  Sidaway, Larry S., DO

Avera Medical Group Orthopedic Surgery Specialists
141 Main St
(605) 226-2663

- Orthopedic Surgery
  Macdougall, James B., MD

Ophthalmology Associates
111 Main St
(605) 226-2108

- Ophthalmology
  Bormes, John M., MD

Sanford Health Ellendale Clinic
141 Main St
(701) 349-3331

- Internal Medicine
  Nagala, Vani, MD

Enderlin

Sanford Health Enderlin Clinic
201 4th Ave Ste 1
(701) 437-3320

- Family Practice
  Braunagel, Bradley A., MD
  Buhr, James B., MD
  Hochhalter, David, MD

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING PHYSICIANS

North Dakota (cont.)
Fargo

20/20 Vision Express
1300 Gateway Dr
(701) 235-0280

- Optometrist
  Mari, John L., OD

3-D Optical dba Sterling Optical
3402 13th Ave S
(701) 234-0939

- Optometrist
  Crissler, Darrel L., OD
  Kosir, Kristen N., OD
  McCamy, Robert T., OD
  Prasad, Niropa M., OD

3-D Optical dba Sterling Optical
3120 25th St S Ste X
(701) 234-9768

- Optometrist
  Crissler, Darrel L., OD
  Kosir, Kristen N., OD
  Prasad, Niropa M., OD

7 Day Clinic
1517 32nd Ave S
(701) 232-6211

- Family Practice
  Bjellum, Hans E., MD
  Page, Michael J., MD

7 Day Clinic
1100 19th Ave N Ste L-M
(701) 364-2909

- Family Practice
  Bjellum, Hans E., MD

7 Day Clinic -Osgood
4622 40th Ave S
(701) 364-2909

- Family Practice
  Bjellum, Hans E., MD
  Page, Michael J., MD

Angela Darveaux OD PC
3902 13th Ave S Ste 256
(701) 277-3636

- Optometrist
  Archibald, Stacey K., OD
  Darveaux, Angela K., OD
  Hillmer, Jed, OD

North Dakota (cont.)
Fargo (cont.)

Bagan Strinden Vision
4344 20th Ave S
(701) 293-8242

- Ophthalmology
  Bagan, Steven M., MD
  Strinden, Thomas I., MD
- Optometrist
  Swanholm, Sarah M., OD

Bergstrom Eye and Laser Clinic
2601 S University
(701) 235-5200

- Ophthalmology
  Bergstrom, Lance K., MD
- Optometrist
  Collins, Nicole M., OD
  Malsom, Tracie L., OD

Catalyst Medical Center, PC
1800 21 Ave S
(701) 365-8700

- Otology, Laryngology, Rhinology
  Bellis, Morris E., MD
  Mathison, Susan M., MD

Center For Pain Medicine Inc
2829 S University Dr
Ste 201
(701) 551-6980

- Anesthesiology (MD)
  Ghazi, Majid, MD

Center For Psychiatric Care
1202 23rd St S
(701) 478-7887

- Psychiatry (MD/DO)
  Lind, Jackson W., MD

Center For Sleep LLC
4152 30th Ave S Ste 103b
(701) 356-3000

- Internal Medicine
  Khosla, Seema, MD
- Pulmonary Diseases
  Khosla, Seema, MD

Dakota Boys Ranch
1641 31st Ave S
(701) 237-3123

- Psychiatry (MD/DO)
  Martinsen, Wayne L., MD

North Dakota (cont.)
Fargo (cont.)

Dakota Family Services
7151 15th St S
(701) 364-2950

- Psychiatry (MD/DO)
  Martinsen, Wayne L., MD

Dakota Gastroenterology, Ltd
1711 Gold Dr Ste 150
(701) 866-9000

- Gastroenterology
  Nammour, Fadel E., MD
- Internal Medicine
  Nammour, Fadel E., MD

Dakota Gastroenterology, Ltd
1707 Gold Dr Ste 101
(701) 866-9000

- Gastroenterology
  Nammour, Fadel E., MD
- Internal Medicine
  Nammour, Fadel E., MD

Dermatology Associates PC
4141 31st Ave S Ste 103
(701) 478-7747

- Dermatology
  Honl, Beth A., MD

Dr L. R. Masciarelli and Associates Optometry PC
4302 13th Ave S
(701) 281-9393

- Optometrist
  Erickson, Michele M., OD
  Kisch, Joseph J., OD
  Masciarelli, Leslie R., OD

Engstrom, Kristin F., OD PC
4731 13th Ave SW Ste 1
(701) 281-2746

- Optometrist
  Engstrom, James W., OD
  Engstrom, Kristin F., OD
  Perzinski, Branden L., OD

Essentia Health 32nd Avenue Clinic
3000 32nd Ave S
(701) 364-8000

- Anesthesiology (MD)
  Bhide, Suwarna A., MD
  Brumwell, Melanie, MD
  Chan, Leslie, MD

Providers are subject to be added or terminated without notice.

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PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING PHYSICIANS

Essentia Health 32nd Avenue Clinic (cont.)

- Anesthesiology (MD) (continued)
  Dosch, Helen, DO
  Erie, John K., MD
  Perencevic, Boris, MD
  Sivanna, Panjini M., MD
  Sornson, Michael D., MD
  Vinych, John V., MD
- Cardiovascular Disease
  Almanaseer, Yassar, MD
  Jenny, Donald B., MD
  Karimian, Siamak, MD
  Nadig, Vishwanatha S., MD
  Rothberg, Martin L., MD
  Saquib, Azim, MD
- Dermatology
  Ziegler, Rebecca, MD
- Emergency Medicine
  Anderson, Christopher E., MD
  Beachy, Arden M., MD
  Belk, John W., DO
  Bone, William M., MD
  Burns, Joseph T., MD
  Deppe, Scott A., MD
  Hamilton, Tony J., DO
  Hunt, Daniel S., MD
  Kitagawa, Benji K., DO
  Poulose, Jaise T., MD
  Sauter, Brian A., MD
  Schenck, Jason, MD
  Stowers, John C., MD
- Family Practice
  Akkerman, Dave S., MD
  Baugh, John R., MD
  Kuhlmann, Craig F., MD
  Rogers, Jerry P., MD
  Sondreal, Philip S., MD
- Gastroenterology
  Anees, Mukhtar, MD
  Brooks, Jeffrey, MD
  Proano, Maritza, MD
  Rajender, Settihalli L., MD
- General Surgery
  Dees, Brian K., MD
  Gebur, Joshua J., MD
  Harris, Scott S., MD
  Jun, Hong J., MD
  Mahoney, Timothy J., MD
  Shahzad, Farooq, MD

North Dakota (cont.)
Fargo (cont.)

Essentia Health 32nd Avenue Clinic (cont.)

- General Surgery (continued)
  Siyanbade, Oyetunde O., MD
  Wroblewski, Robert L., MD
  Zreik, Khaled S., MD
- Infectious Diseases
  Alonto, Augusto M., MD
- Internal Medicine
  Almanaseer, Yassar, MD
  Anees, Mukhtar, MD
  Balsam, Peter, MD
  Briggs, Michael S., MD
  Gupta, Parul, MD
  Jadaan, Atef A., MD
  Jenny, Donald B., MD
  Jerome, Peter S., MD
  Kafle, Prakash, MD
  Kapphahn, Samantha, DO
  Karimian, Siamak, MD
  Kooyer, Kurt W., MD
  Kremens, Karol, MD
  Kunecka, Paulina, MD
  Larsson, Ernst O., MD
  Luger, Patrick A., MD
  Manickavasagam, Saraswathy, MD
  Mateuszczyk, Jaroslaw, MD
  Matthees, Donald J., MD
  Mehta, Dharmesh, MD
  Nammour, Fadel E., MD
  Neumann, James L., MD
  Parajuli, Anjali, MD
  Poulose, Jaise T., MD
  Proano, Maritza, MD
  Rajender, Settihalli L., MD
  Raval, Mihir, MD
  Saquib, Azim, MD
  Skogen, Jeffrey W., MD
  Tananusont, Weerawat, MD
  Tiwari, Priyanka, MD
  Tiwari, Sumit, MD
  Toumeh, Mohamed, MD
  Whitbeck, Matthew G., MD
- Nephrology
  Qarni, Ahmer H., MD
  Skogen, Jeffrey W., MD
- Neurological Surgery
  Baker, Adbul A., MD
  Hill, Michael, DO

North Dakota (cont.)
Fargo (cont.)

Essentia Health 32nd Avenue Clinic (cont.)

- Neurological Surgery (continued)
  Selland, Bradford A., MD
  Syrquin, Mickey G., DO
- Neurology
  Christenson, Shaun K., MD
  Darkhabani, Ziad, MD
  Donovan, Charles B., MD
  Duffy, Kristina, MD
  Penney, Curtis W., DO
- Obstetrics/Gynecology
  Bexell-Gierke, Jan M., MD
  Danilenko, Diana R., MD
  Fiebiger, Siri J., MD
  Gefroh Ellison, Stefanie S., MD
  Glasner, Gregory C., MD
  Holm, Mary K., MD
  Homan, Zena K., MD
  Ladella, Subhashini J., MD
  Linn, Stephen T., MD
  Lynch Salamon, David I., MD
  Wothe, Donald D., MD
- Oncology
  Adolfson, Troy E., MD
- Oral Surgery
  Iverson, Paul H., DDS
- Orthopedic Surgery
  Beard, David M., MD
  Johnson, Julie M., MD
  Lantz, Steven W., MD
  Sawardeker, Prasad J., MD
  Sehgal, Bantoo, MD
- Pathology
  Ortmeier, Thomas C., MD
  Roise, Douglas A., MD
- Pathology, Anatomy, Clinical Pathology
  Adloff, Vladimir, MD
  Rodgers-Rieger, Elena, MD
- Pediatrics
  Deoskar, Dhananjay S., MD
  Exo, Jennifer, DO
  Kooyer, Kurt W., MD
  Mutchler, Scott B., MD
  Nicklay-Catalan, Janice M., MD
- Physical Medicine and Rehabilitation
  Sollom, Dennis G., MD

Providers are subject to be added or terminated without notice.

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PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING PHYSICIANS

Essentia Health 32nd Avenue Clinic (cont.)

- Psychiatry, Neurology
  Christenson, Shaun K., MD
- Pulmonary Diseases
  Briggs, Michael S., MD
  Jerome, Peter S., MD
- Radiology
  Althoen, Morgan C., MD
  Arslanlar, Norman, DO
  Axmacher, Jessica A., MD
  Bullis, Brent R., MD
  Carlson, Annelisa M., MD
  Coursey, Richard L., MD
  Crandall, Benjamin, DO
  Crider, Mitchell H., MD
  Crowe, Christopher H., MD
  Delgado Almandoz, Josser, MD
  Donovan, Charles B., MD
  Doyscher, Mark W., MD
  Ehrenwald, Eduardo, MD
  Engstrom, Bjorn I., MD
  Farah, Nazih N., MD
  Fry, Stephen M., MD
  Gordon, Jeffery D., MD
  Gramith, Frederick C., MD
  Groebner, Nathan J., MD
  Hassell, Douglass S., MD
  Hite, Stephen H., MD
  Ibach, Thomas J., MD
  Inampudi, Subbarao, MD
  Kadkhodayan, Yasha, MD
  Kane, Jon P., MD
  Kang, Eul S., MD
  Kayfes, Mareve, MD
  Keszler, Jason L., DO
  Kurisko, Stanley D., MD
  Lee, Peter U., MD
  Matson, Thomas C., MD
  Mehling, Jason A., MD
  Mills, David J., MD
  Myhra-Bloom, Karla G., MD
  Mylrea, James M., MD
  Nobrega, John M., MD
  Oswood, Mark C., MD
  Parker, Robin, MD
  Parker, Trudi K., MD
  Peterson, Jeffrey J., MD
  Plunkett, Michael, MD
  Pollock, Robert A., MD

North Dakota (cont.)
Fargo (cont.)

Essentia Health 32nd Avenue Clinic (cont.)

- Radiology (continued)
  Quinones, Eduardo, MD
  Reardon, Scott T., MD
  Rust, Paul R., MD
  Sampson, Jerome M., MD
  Schumacher, Clark W., MD
  Shearer, Damon D., DO
  Sidney, Scott D., MD
  Steely, John W., MD
  Tillotson, Christopher L., MD
  Veldman, Sara B., MD
  Wright, Aaron D., MD
  Yost, Robert A., MD
- Sports Medicine
  Ostlie, Daniel K., MD
- Thoracic Surgery
  Ally, Saeed A., MD
  Heck, Christopher, MD
  Murphy, William, MD
  Stam, Marc, MD
- Urology
  Khan Galzie, Sardar Mohammad Farhan, MD
  Strinden, Steven P., MD

Essentia Health Hospital
3000 32nd Ave S
(701) 364-8000

- Emergency Medicine
  Beachy, Arden M., MD
  Burns, Joseph T., MD
  Hamilton, Tony J., DO
  Hunt, Daniel S., MD
  Sauter, Brian A., MD
  Schenck, Jason, MD
  Stowers, John C., MD
- Family Practice
  Baugh, John R., MD
  Howden, Richard L., MD
  Martin, Richard E., MD
- General Surgery
  Wasemiller, Paul S., MD
- Internal Medicine
  Hager, Jake R., MD
  Khanal, Binaya, MD

North Dakota (cont.)
Fargo (cont.)

Essentia Health South University Clinic
1702 University Dr S
(701) 364-3300

- Allergy
  Mante, Saakwa, MD
- Anesthesiology (MD)
  Sornson, Michael D., MD
- Dermatology
  Beehler, Amanda, MD
  Belknap, Burton S., MD
  Blankinship, Michael J., MD
  Kelly, Kimberly R., MD
  Ziegler, Rebecca, MD
- Family Practice
  Domm, Bruce L., MD
  Kuhlmann, Craig F., MD
  Lunde, Lara N., MD
  Rogers, Jerry P., MD
  Rohla, Richard A., MD
- Geriatrics
  Domm, Bruce L., MD
  Johnson, Walter S., MD
  Kempf, Thomas W., MD
  Rau, Keith D., MD
- Internal Medicine
  Briggs, Michael S., MD
  Gupta, Mahendra K., MD
  Gupta, Parul, MD
  Johnson, Walter S., MD
  Kempf, Thomas W., MD
  Kooyer, Kurt W., MD
  Link, David B., MD
  Matthees, Donald J., MD
  Rau, Keith D., MD
  Sheldon, Michael S., MD
  Sleckman, Joseph B., MD
- Obstetrics/Gynecology
  Domm, Bruce L., MD
  Kuhlmann, Craig F., MD
- Oncology
  Keating, John J., MD
  Mohammed Rafiyath, Shamudheen, MD
- Ophthalmology
  Danylkova, Nataliya, MD
  Keating, Anne M., MD
  Yongsmith, Hope R., MD
- Optometrist
  Metzger, Todd L., OD

Providers are subject to be added or terminated without notice.

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PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING PHYSICIANS

Essentia Health South University Clinic (cont.)

- Optometrist (continued)
  Scheel, Lori Y., OD
- Oral Surgery
  Iverson, Paul H., DDS
- Otology, Laryngology, Rhinology
  Acevedo, Jason L., MD
  Belizario, Francisco Y., MD
  Bruns, Alan D., MD
  Buell, Brad R., MD
  Tsen, David W., MD
- Pathology
  Ortmeier, Thomas C., MD
  Roise, Douglas A., MD
- Pathology, Anatomy, Clinical Pathology
  Adloff, Vladimir, MD
  Rodgers-Rieger, Elena, MD
- Pediatrics
  Clutter, David J., MD
  Exo, Jennifer, DO
  Houston, Sara, MD
  Jones, Jenifer E., MD
  Kleiman, Theodore W., MD
  Mullally, Jennifer L., MD
  Mutchler, Scott B., MD
  Praveen Kumar, Valiparambil B., MD
  Sukumaran, Anju P., MD
- Physical Medicine and Rehabilitation
  Sollom, Dennis G., MD
  Vijayalakshmi, Bangalore S., MD
- Podiatry, Surgical Chiropody
  Hofsommer, Lee A., DPM
  Olson, Bradley R., DPM
- Pulmonary Diseases
  Briggs, Michael S., MD
- Radiation Therapy
  Cooper, Mark C., MD
- Radiology
  Althoen, Morgan C., MD
  Axmacher, Jessica A., MD
  Buechler-Price, Joni, MD
  Carlson, Annelisa M., MD
  Keszler, Jason L., DO
  McNaney, David, MD
  Moore, Randy L., DO

Essentia Health South University Clinic (cont.)

- Rheumatology
  Azimian, Morteza, MD
  Sleckman, Joseph B., MD
- Sports Medicine
  Kuhlmann, Craig F., MD

Essentia Health West Acres Clinic
3902 13th Ave S
(701) 364-6600

- Dermatology
  Blankinship, Michael J., MD
- Emergency Medicine
  Regmi, Suman R., MD
  Sauter, Brian A., MD
- Family Practice
  Akkerman, Dave S., MD
  Aryal, Suima, MD
  Domm, Bruce L., MD
  Haugen, Joel R., MD
  Howden, Richard L., MD
  Jamsa Tollefson, Lisa J., MD
  Kuhlmann, Craig F., MD
  Laqua, Patricia L., MD
  Nelson, Kinsey B., MD
  Nelson, Susan K., MD
  Refsland, Bradley A., MD
  Regmi, Suman R., MD
  Rogers, Jerry P., MD
  Rohla, Richard A., MD
  Sakariya, Geetabahen A., MD
  Sikkink, Kari Rae, MD
  Sondreal, Philip S., MD
  Steinke, Emil B., MD
  Topley, Stuart R., MD
  Vetter, Richard T., MD
- General Surgery
  Harris, Scott S., MD
- Geriatrics
  Domm, Bruce L., MD
- Internal Medicine
  Kooyer, Kurt W., MD
  Luger, Patrick A., MD
- Neurology
  Christenson, Shaun K., MD
- Obstetrics/Gynecology
  Domm, Bruce L., MD
  Haugen, Joel R., MD
  Holm, Mary K., MD

Essentia Health West Acres Clinic (cont.)

- Orthopedic Surgery
  Haugen, Joel R., MD
- Pediatrics
  Houston, Sara, MD
  Jones, Jenifer E., MD
  Kleiman, Theodore W., MD
  Kooyer, Kurt W., MD
  Mullally, Jennifer L., MD

Eyecare Associates PC
3902 13th Ave SW
(701) 282-5880

- Optometrist
  Brookshire, Barbra B., OD
  Jangula, Jordan J., OD
  Melicher, Kevin, OD
  Wilner, Mason R., OD

Eyesite Family Eyecare
1695 43rd St S
(701) 235-3937

- Optometrist
  Levin, Daniel J., OD
  Malsom, Tracie L., OD
  Miller, Anna J., OD

Face & Jaw Surgery Center
4344 20th Ave S Ste 2
(701) 239-5969

- Oral Surgery
  Crago, Charles A., DMD
  Gray, Jonathan R., DDS
  Preisler, Scott A., DDS

Family Healthcare Center
301 NP Ave
(701) 271-3344

- Family Practice
  Espejo, Napoleon R., MD
  Gopi, Sreejith, MD
  Lenzmeier, Richard D., MD
- Optometrist
  Levin, Daniel J., OD
  Miller, Anna J., OD
  Ross, Eric M., OD

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NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING PHYSICIANS

Fargo Cass Public Health
401 3rd Ave N
(701) 241-1383

- Obstetrics/Gynecology
  Christensen, Steffen P., MD

Fargo Gastroenterology & Hepatology Clinic, PC
1665 43 St S Ste 100
(701) 235-3050

- Gastroenterology
  Taheri, Arezoo, MD
- Internal Medicine
  Taheri, Arezoo, MD

Fargo Plastic Surgery PC
3280 20th St S
(701) 293-7408

- Plastic Surgery
  Sampson, John A., MD

Fercho Cataract & Eye Clinic
100 4th St S Ste 612
(701) 235-0561

- Ophthalmology
  Grosz, David E., MD
  Rodenbiker, Harold T., MD
- Optometrist
  Melicher, Paul R., OD

FM Endoscopy Center LLC
300 Main Ave Ste 205
(701) 200-4150

- Gastroenterology
  Nammour, Fadel E., MD
- Internal Medicine
  Ludwig, Rodney A., MD

Frisk, James, MD Ltd
2700 12th Ave SW Ste D
(701) 235-1924

- Otology, Laryngology, Rhinology
  Frisk, James L., MD

Gary E Johnson OD PC
3902 13th Ave S Ste 406
(701) 277-9555

- Optometrist
  Johnson, Gary E., OD

Independent Family Doctors
1711 Gold Drive S #160
(701) 234-9400

- Family Practice
  Johnson, Steven R., MD
  Johnson, Therese A., MD
  Martin, Tracy J., MD
  Radke, Michelle M., MD

Independent Radiology Services
2829 University Dr S
Ste 104
(701) 271-1423

- Radiology
  Wosick, William F., MD

Institute For Low Back Care LLC
300 Main Ave Suite 212
(701) 297-0817

- Anesthesiology (MD)
  Sivanna, Panjini M., MD

Internal Medicine Associates
1707 Gold Dr S Ste 101
(701) 280-2033

- Internal Medicine
  Baumgardner, David P., MD
  Clemenson, Steven G., MD
  Hella, Brent M., MD
  Lillestol, Michael J., MD
  Ludwig, Rodney A., MD
  Odedra-Mistry, Bhanu, MD
  Yohe, Mark G., MD

Jed D Hillmer, OD, PLLC
101 10th St N Ste 120
(701) 239-9771

- Optometrist
  Hillmer, Jed, OD

Lamb Plastic Surgery Center, PC
1507 University Dr S
(701) 237-9592

- General Surgery
  Lamb, Donald R., MD
- Plastic Surgery
  Lamb, Donald R., MD

Lighthouse Vision Clinic
3757 55th Ave S
(701) 630-5255

- Optometrist
  Ross, Eric M., OD

Lind, Jackson W, MD
1202 23 St S Ste 3
(701) 478-7887

- Psychiatry (MD/DO)
  Lind, Jackson W., MD

Mark Tufte OD PC dba Eyes On Broadway
311 Broadway N
(701) 356-3937

- Optometrist
  Tufte, Mark G., OD

Matthys, Gary, MD
2301 25th St S Suite I
(701) 241-9300

- Orthopedic Surgery
  Matthys, Gary, MD

McCulley, Melissa OD, PC
2553 Kirsten Lane
Ste 202
(701) 373-2020

- Optometrist
  McCulley, Melissa J., OD

Midwest Vision Centers
3051 25th St S
(701) 234-0766

- Optometrist
  Connelly, James B., OD
  Kensok, Shari L., OD

OMS Associates
300 Main Ave Ste 201
(701) 232-9565

- General Surgery
  Noffze, Michael J., MD
- Oral Surgery
  Noffze, Michael J., DDS

Opgrande, J. Donald, MD, PC
2829 S Univ Dr Ste 2
(701) 232-2848

- Hand Surgery
  Opgrande, J. Donald, MD

Providers are subject to be added or terminated without notice.

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PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING PHYSICIANS

Opgrande, J. Donald, MD, PC (cont.)
- Orthopedic Surgery
  Opgrande, J. Donald, MD

Orthopedic and Sport Medicine Specialists of Fargo, Ltd.
2829 S University Dr
Ste 202
(701) 478-0307
- Orthopedic Surgery
  Johnson, Philip Q., MD

Osgood Eyecare
4622 40th Ave S
(701) 356-5355
- Optometrist
  Larson, Jonathan D., OD

Pearle Vision
3232 13th Ave S
(701) 280-3000
- Optometrist
  Gunhus, Don W., OD
  Koeppe, Michael A., OD
  Mitzel-Dubois, Amy M., OD

Pediatric Arts Clinic, PC
2829 S Univ Dr Ste 101
(701) 478-4722
- Pediatrics
  Raghib, Ender G., MD

Plains Ear Nose Throat & Facial Plastic Surgery Inc
2700 12th Ave S
(701) 235-1924
- Otology, Laryngology, Rhinology
  Frisk, James L., MD
  Soine, Lesley A., MD

Plains Medical Clinic LLC
3290 20th St S
(701) 499-4800
- Family Practice
  Harris, Hoadley H., MD
  Schock, Joel F., MD

Plastic Surgery Institute, PC
3270 20th St S
(701) 293-7408
- General Surgery
  Abdullah, Ahmed, MD

Plastic Surgery Institute, PC (cont.)
- Plastic Surgery
  Abdullah, Ahmed, MD

Porter, William, MD
100 S 4th St Ste 608
(701) 235-0161
- Otology, Laryngology, Rhinology
  Porter, William C., MD

Prairie Oral Surgery
2585 23rd Ave S Ste A
(701) 478-4404
- Oral Surgery
  May, Edward F., DDS

Prairie St Johns
510 4th St S
(701) 476-7200
- Psychiatry (MD/DO)
  Akgul, Fetih, MD
  Anunobi, Echezona, MD
  Armstrong, Lacey L., MD
  Bronson, Natalya, MD
  Burtnett, Lawana M., MD
  Haliburton, James R., MD
  Hess, Douglas J., DO
  Jarvis, Julie O., DO
  Jordan, Natalie D., MD
  Kelly, Edward L., MD
  Mach, David J., DO
  Meany, Gavin P., MD
  Meek, Steven J., MD
  Meza, Eduardo E., MD
  Miller, Halbert B., MD
  Nadkarni, Nivedita S., MD
  Rauch, Harry B., MD
  Siemens, Charlotte A., MD
  Smith, Timothy A., MD
  Underwood, Amy K., MD
  Wichmann, Gerry-Lynn, MD
- Psychiatry, Neurology
  Vaca, Anthony M., MD

Precision Diagnostic Services Inc
4152 30th Ave S Ste 103
(701) 234-9667
- Internal Medicine
  Khosla, Seema, MD
- Pulmonary Diseases
  Khosla, Seema, MD

Psychiatry Networks
300 NP Ave Suite 101
(701) 478-6700
- Family Practice
  Fornal, Robert E., MD
- Psychiatry (MD/DO)
  Fornal, Robert E., MD
  Lopez, David J., MD

Rachel Ness MD PLLC
4141 31st Ave S Ste 103
(701) 478-7747
- Dermatology
  Ness, Rachel C., MD

Red River Women's Clinic
512 1st Ave N
(701) 298-9999
- Family Practice
  Eggleston, Kathryn L., MD
  Thorndike, Lori Lynn, DO

Retina Associates, PC
4642 Amber Valley Pkwy S
(701) 277-4699
- Internal Medicine
  Haynie, Gary D., MD
- Ophthalmology
  Haynie, Gary D., MD

Retina Consultants
2829 S Univ Dr Ste 204
(701) 293-9829
- Ophthalmology
  Johnson, Max R., MD
  Mason, Craig M., MD

Roger S Hogue MD PA dba Hogue Vein Institute
4133 30th Ave S Ste 101
(701) 232-8346
- Internal Medicine
  Dando, Carl F., MD

Sanford 1717 Medical Building
1717 S University Drive
(701) 234-2000
- Family Practice
  Wiisanen, Ronald E., MD
- General Surgery
  Fabian, Matthew W., DO
  Garcia, Luis A., MD

Providers are subject to be added or terminated without notice.

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PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING PHYSICIANS

Sanford 1717 Medical Building (cont.)

- General Surgery (continued)
  Monson, Timothy P., MD
- Ophthalmology
  Anderson, Steven, MD
  Atchison, Michelle, MD
  Jordan, Andrew A., MD
- Optometrist
  Gilbertson, Kimberly A., OD
  Kelly, Brendan, OD
- Psychiatry (MD/DO)
  Burd, Ronald M., MD

Sanford 1717 Medical Building
1717 South University Dr
(701) 234-2000

Grandhi, Anupama, DDS

- Family Practice
  Wiisanen, Ronald E., MD
- General Surgery
  Fabian, Matthew W., DO
  Garcia, Luis A., MD
  Monson, Timothy P., MD
- Ophthalmology
  Anderson, Steven, MD
  Atchison, Michelle, MD
  Jordan, Andrew A., MD
- Optometrist
  Gilbertson, Kimberly A., OD
  Kelly, Brendan, OD
- Oral Surgery
  Rubin, David, DDS
- Psychiatry (MD/DO)
  Burd, Ronald M., MD
  Mayfield Jorgensen, Michelle L., MD

Sanford 2801 Medical Building
2801 University Dr S
(701) 234-5673

- Neurology
  Faber, Kevin M., MD
- Plastic Surgery
  Antoniuk, Pamela, MD
  Keim, Jeffrey R., MD
  Schmidt Krings, Diane R., MD
- Psychiatry (MD/DO)
  Karaz, Samy, MD

Sanford 2801 Medical Building
2801 University Dr S
(701) 234-5673

- Internal Medicine
  Mashaqi, Saif, MD
- Neurology
  Faber, Kevin M., MD
- Pediatrics
  Setty, Arveity, MD
- Plastic Surgery
  Antoniuk, Pamela, MD
  Keim, Jeffrey R., MD
  Schmidt Krings, Diane R., MD
- Psychiatry (MD/DO)
  Karaz, Samy, MD

Sanford Broadway Clinic
801 Broadway North
(701) 234-2000

- Anesthesiology (MD)
  Berndt, Steven D., MD
  Daniels, Steven, MD
  Fisher, Cristina, MD
  Gaba, Vijay, MD
  Gessner, Maxwell W., MD
  Goswami, Arundhati, MD
  Harris, Brian, MD
  Hass, Brian, MD
  Indergaard, Patrick J., MD
  Raad, Robert, MD
  Vandrovec, Chad, MD
  Williams, Elisa, DO
- Cardiovascular Disease
  Desai, Monali, MD
  Farkas, Susan I., MD
  Haldis, Thomas A., DO
  Kohlman-Petrick, Joellen, MD
  Kouba, Craig R., MD
  Manjunath, Heeraimangalore S., MD
  McDowell, Christina, MD
  Otero-Cagide, Manuel R., MD
  Sarji, Rawa, DO
- Dermatology
  Ausmus, Gregory, MD
- Emergency Medicine
  Bakke, Andrew, MD
  Bilstad, Paul R., MD
  Bjerke, Gregory J., MD
  Drage, David C., MD

Sanford Broadway Clinic (cont.)

- Emergency Medicine (continued)
  Griffin, David M., MD
  Grosz, Kenneth, MD
  Hintz, Warren J., MD
  Hushka, Douglas J., MD
  Klosterman, Bruce J., MD
  Lako-Adamson, Heidi, MD
  Madsen, Shane, MD
  Parks, J Scott, MD
  Schaff, Troy C., MD
  Sepe, Frank J., MD
  Teske, Owen Garth, MD
  Tiongson, Jeffrey, MD
  Vigesaa, Gregory, DO
  Zeitouni, Mohammed O., MD
- Endocrinology
  Kenien, Alan G., MD
- Family Practice
  Hushka, Douglas J., MD
  Klosterman, Bruce J., MD
- Gastroenterology
  Blaufuss, Mark C., MD
  Blonsky, Jeffery, MD
  McNelis, Joseph, MD
  Meidinger, Ross, MD
  Monticello, Anthony, MD
  Nalluri, Murali, MD
  Okoh, Emuejevoke, MD
  Starley, Brad Q., MD
  Womeldorph, Craig, DO
  Zagnoon, Abbas, MD
- General Practice
  Grimm, Carol J., MD
  Vilenski, Leonid, MD
- General Surgery
  Aaland, Mary, MD
  Bouton, Michael, MD
  Briggs, Steven E., MD
  Dyke, Cornelius, MD
  Fabian, Matthew W., DO
  Fetner, Erik, MD
  Garcia, Luis A., MD
  Gasevic, Enej, MD
  Kroetsch, Corey, MD
  Kubalak, Gary M., MD
  McNeil, Jeffrey, MD
  Mistry, Bhargav M., MD
  Monson, Timothy P., MD
  Stam, Marc, MD

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PARTICIPATING PHYSICIANS

Sanford Broadway Clinic (cont.)

- General Surgery (continued)
  Sticca, Robert P., MD
  Stover, David A., MD
  Thambi-Pillai, Thavam, MD
  Traynor, Michael D., MD
  Wagner, James S., MD
- Genetics
  McGrann, Pamela, MD
- Geriatrics
  Blehm, Julie A., MD
  Ketterling, Rhonda L., MD
- Infectious Diseases
  Brito, Maximo, MD
  Carson, Paul J., MD
  Guerrero, Dubert, MD
  Lo, Tze Shien S., MD
  Mariani, Paul G., MD
  Tight, Robert R., MD
- Internal Medicine
  Abouchala, Nabil, MD
  Alberto, Neville M., MD
  Alkhalaf, Abdulhamid, MD
  Alonto, Augusto M., MD
  Alonto, Eileen A., MD
  Aravapalli, Aruna, MD
  Arora, Kanwardeep, MD
  Barun, Bipin, MD
  Beard, Debra A., MD
  Bhora, Milapchand A., MD
  Bhunia, Kaushik, MD
  Bjerke, Gregory J., MD
  Blehm, Julie A., MD
  Carson, Paul J., MD
  Chavour, Sudhir K., MD
  Farkas, Susan I., MD
  Hall, Katherine S., MD
  Hao, Weimin, MD
  Jalil, Sajid, MD
  Jasti, Anil, MD
  Ketterling, Rhonda L., MD
  Khan, Hasrat, MD
  Kherallah, Mazen, MD
  Kouba, Craig R., MD
  Lagler, Regis, MD
  Levitski-Heikkila, Teresa V., MD
  Mahale, Adit, MD
  Manjunath, Heeraimangalore S., MD
  Newman, William P., MD

North Dakota (cont.)
Fargo (cont.)

Sanford Broadway Clinic (cont.)

- Internal Medicine (continued)
  Potluri, Rajendra C., MD
  Pyae, Nyan, MD
  Sanaullah, Mohamed, MD
  Shahira, Eram, MD
  Shanaah, Almothana M., MD
  Starley, Brad Q., MD
  Talha, Muhammad, MD
  Talluri, Krishna, MD
  Theige, David J., MD
  Thompson, Jody, MD
  Tieszen, Mark J., MD
  Tight, Robert R., MD
  Toumeh, Mohamed, MD
  Vilenski, Leonid, MD
  Volk, James A., MD
  Watkins, Jeffrey, MD
  Womeldorph, Craig, DO
  Zeitouni, Mohammed O., MD
- Nephrology
  Chemiti, Gopal K., MD
  Levitski-Heikkila, Teresa V., MD
  Louvar, Daniel, MD
  Mahale, Adit, MD
- Nuclear Medicine
  Fisher, Mark F., MD
  Schneider, Mark R., MD
  Stallman, Donald J., MD
- Obstetrics/Gynecology
  Bell, Maria, MD
  Boyle, Jeffrey G., MD
  Bro, Walter C., MD
  Keup, Christine, MD
  McCann, Michelle, MD
  McNamara, Michael F., DO
  Mickelson, Margaret T., MD
  Siegel, Eric, MD
  Tompkins, Rebekah, MD
  Van Eerden, Peter, MD
- Orthopedic Surgery
  Matthys, Gary, MD
- Otology, Laryngology, Rhinology
  Elliott, Clark, MD
  Larson, Daniel, MD
  Nagle, James W., MD
  Raisen, Jay, MD
- Pathology
  Baldwin, Jerry J., MD
  Grimm, Terrence E., MD

North Dakota (cont.)
Fargo (cont.)

Sanford Broadway Clinic (cont.)

- Pathology (continued)
  Lessard, Julie L., MD
  Marsh, Julie A., MD
- Pathology, Anatomy, Clinical Pathology
  Adloff, Vladimir, MD
  Azam, Arif, MD
  Lappinga, Paul, MD
  Peng, Hong Qi, MD
  Wood, Angela, MD
- Pediatrics
  Altaf, Waseem, MD
  Bass, John, MD
  Bellas, William, DO
  Blaufuss, Mark C., MD
  Casas-Melley, Adela, MD
  Dorostkar, Parvin, MD
  Gheen, Kenneth, MD
  Horner, Justin, MD
  Kenien, Alan G., MD
  Kochilas, Lazaros, MD
  Miller, Ron H., MD
  Mohamed, Mohamed, MD
  Nelson, Stephen N., MD
  Nicklay-Catalan, Janice M., MD
  Paschall, John, MD
  Sapiega, Vytautas, MD
  Sapiegiene, Lina, MD
  Smith, Jo-Ann, MD
  Stephens, Scott, DO
  Storm, Waldemar G., MD
  Thurlow, Brenda K., MD
  Tinguely, Stephen J., MD
  Trefz, Matthew, MD
  Yoe, Norbert, MD
- Peripheral Vascular Diseases Or Surgery
  Bakken, Andrew, MD
  Kubalak, Gary M., MD
  Reil, Todd, MD
- Physical Medicine and Rehabilitation
  Fillmore, Scott, MD
  Goldstein, Heidi J., MD
  Klava, William N., MD
  Lindquist, Paul J., MD
- Plastic Surgery
  Antoniuk, Pamela, MD
  Schmidt Krings, Diane R., MD

Providers are subject to be added or terminated without notice.

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PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING PHYSICIANS

Sanford Broadway Clinic (cont.)

- Psychiatry (MD/DO)
  Haider, Naveed, MD
  Olson, Robert J., MD
- Pulmonary Diseases
  Adhami, Naeem, MD
  Hung, Robert, MD
  Jamil, Mouhamad G., MD
  Lababidi, Hani, MD
  Schilero, Gregory, MD
  Zeitouni, Mohammed O., MD
- Radiology
  Asheim, Jason, MD
  Asleson, Bruce A., MD
  Asleson, John, MD
  Austin, William R., MD
  Carson, Janine L., MD
  Catalan, Richard, MD
  Dahl, Benjamin, MD
  Fish, Jonathan, MD
  Fisher, Mark F., MD
  Garrity, Stephen P., MD
  Goldenberg, Jacob A., MD
  Kallenbach, Christopher, MD
  Karlins, Nathaniel L., MD
  Kearns, Martha, MD
  Khaghany, Kamran, MD
  Licht, Lawrence H., MD
  Machayya, Jon, MD
  Marsden, Richard J., MD
  Maurer, James W., MD
  Mickelson, Daniel G., MD
  Mitchell, Steven L., MD
  Ng, Su-Ann, MD
  Promersberger, Eric R., MD
  Reynolds, Ryan, MD
  Schneider, Mark R., MD
  Shook, Robert J., MD
  Stallman, Donald J., MD
  Teigen, Corey L., MD
  Thurgood, Michael, MD
  Weilke, Florian A., MD
  Weiner, Michael J., MD
- Thoracic Surgery
  Jolly, Shashank, MD
  McNeil, Jeffrey, MD
  Newman, Roxanne V., MD
- Urology
  Garrels, Kristina, MD
  Nguyen, Carvell T., MD

Sanford Broadway Clinic (cont.)

- Urology (continued)
  Noah, Thomas A., MD
  Sawchuk, Theodore J., MD
  Segal, Michael D., MD
  Thomas, Anil, MD
  Toni, Conrad, MD
  Williams, Brent, MD

Sanford Broadway Clinic
801 Broadway North
(701) 234-2000

- Anesthesiology (MD)
  Berndt, Steven D., MD
  Brunsvold, Robert A., MD
  Calone, John, MD
  Colon-Dejesus, Manuel, MD
  Daniels, Steven, MD
  Fisher, Cristina, MD
  Gaba, Vijay, MD
  Gessner, Maxwell W., MD
  Goswami, Arundhati, MD
  Habli, Nader, MD
  Harris, Brian, MD
  Hass, Brian, MD
  Hong, Back, MD
  Indergaard, Patrick J., MD
  Moussa, Adib, MD
  Onuora, Tochukwu, MD
  Parves, Shah, MD
  Pezhman, Eric, MD
  Raad, Robert, MD
  Rashid, Karim, MD
  Vandrovec, Chad, MD
  Williams, Elisa, DO
- Cardiovascular Disease
  Boatman, James, MD
  Clardy, David J., MD
  Desai, Monali, MD
  Dowsley, Taylor, MD
  Farkas, Susan I., MD
  Haldis, Thomas A., DO
  Kohlman-Petrick, Joellen, MD
  Kouba, Craig R., MD
  Manjunath, Heeraimangalore S., MD
  McDowell, Christina, MD
  Otero-Cagide, Manuel R., MD
  Pierce, Christopher L., MD
  Sarji, Rawa, DO
  Shamshad, Faisal, MD

Sanford Broadway Clinic (cont.)

- Cardiovascular Disease (continued)
  Wynne, Joshua, MD
- Emergency Medicine
  Agema, Ryan, MD
  Bakke, Andrew, MD
  Bilstad, Paul R., MD
  Bjerke, Gregory J., MD
  Brudevold, Jeremy, DO
  Drage, David C., MD
  Glynn, Alicia, MD
  Griffin, David M., MD
  Grosz, Kenneth, MD
  Hintz, Warren J., MD
  Hushka, Douglas J., MD
  Jarandeh, Eric, MD
  Klosterman, Bruce J., MD
  Lako-Adamson, Heidi, MD
  Madsen, Shane, MD
  Parks, J Scott, MD
  Schaff, Troy C., MD
  Sepe, Frank J., MD
  Teske, Owen Garth, MD
  Tiongson, Jeffrey, MD
  Vigesaa, Gregory, DO
  Wiest, Eric, MD
  Zeitouni, Mohammed O., MD
- Endocrinology
  Kenien, Alan G., MD
- Family Practice
  Beauclair, John G., MD
  Hushka, Douglas J., MD
  Kaster, Andrea L., MD
  Klosterman, Bruce J., MD
  Martino, Robert M., MD
- Gastroenterology
  Anand, Oksana, MD
  Blaufuss, Mark C., MD
  Blonsky, Jeffery, MD
  Lamb, Paul, MD
  McNelis, Joseph, MD
  Meidinger, Ross, MD
  Monticello, Anthony, MD
  Nalluri, Murali, MD
  Nammour, Fadel E., MD
  Nelson, Austin, MD
  Okoh, Emuejevoke, MD
  Paul, Navin, MD
  Starley, Brad Q., MD

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- Gastroenterology (continued)
  Womeldorph, Craig, DO
  Zagnoon, Abbas, MD
- General Practice
  Grimm, Carol J., MD
  Vilenski, Leonid, MD
- General Surgery
  Aaland, Mary, MD
  Ahmeti, Mentor, MD
  Albrecht, Warren E., DO
  Bouton, Michael, MD
  Briggs, Steven E., MD
  Dyke, Cornelius, MD
  Fabian, Matthew W., DO
  Fetner, Erik, MD
  Garcia, Luis A., MD
  Gasevic, Enej, MD
  Kroetsch, Corey, MD
  Kubalak, Gary M., MD
  Macgregor, Jay, MD
  McNeil, Jeffrey, MD
  Mistry, Bhargav M., MD
  Monson, Timothy P., MD
  Stam, Marc, MD
  Sticca, Robert P., MD
  Stover, David A., MD
  Thambi-Pillai, Thavam, MD
  Traynor, Michael D., MD
  Wagner, James S., MD
  Winton, Barry, MD
  Zreik, Khaled S., MD
- Genetics
  Casas, Kari, MD
  McGrann, Pamela, MD
- Geriatrics
  Blehm, Julie A., MD
  Ketterling, Rhonda L., MD
- Infectious Diseases
  Brito, Maximo, MD
  Carson, Paul J., MD
  Guerrero, Dubert, MD
  Lo, Tze Shien S., MD
  Mariani, Paul G., MD
  Nagpal, Avish, MD
  Sinclair, Gary, MD
  Tight, Robert R., MD
- Internal Medicine
  Abouchala, Nabil, MD
  Al Hallak, Mohammed, MD

Sanford Broadway Clinic (cont.)

- Internal Medicine (continued)
  Alberto, Neville M., MD
  Alkhalaf, Abdulhamid, MD
  Alonto, Augusto M., MD
  Alonto, Eileen A., MD
  Aravapalli, Aruna, MD
  Arora, Kanwardeep, MD
  Bande, Dinesh, MD
  Barun, Bipin, MD
  Beard, Debra A., MD
  Bhatta, Puspa, MD
  Bhattaral, Jaya, MD
  Bhora, Milapchand A., MD
  Bhunia, Kaushik, MD
  Bjerke, Gregory J., MD
  Blehm, Julie A., MD
  Briggs, Jill, MD
  Carey, Jantey, MD
  Carson, Paul J., MD
  Chavour, Sudhir K., MD
  Clardy, David J., MD
  Farkas, Susan I., MD
  Hall, Katherine S., MD
  Hall, Nathaniel, MD
  Hao, Weimin, MD
  Hess, April, MD
  Jalil, Sajid, MD
  Jasti, Anil, MD
  Ketterling, Rhonda L., MD
  Khan, Hasrat, MD
  Kherallah, Mazen, MD
  Kouba, Craig R., MD
  Ladwig, John W., MD
  Lagler, Regis, MD
  Lamb, Paul, MD
  Levitski-Heikkila, Teresa V., MD
  Li, Hung-Kei, MD
  Machani, Sathyanarayana, MD
  Mahale, Adit, MD
  Manjunath, Heeraimangalore S., MD
  Mannuru, Devendranath, MD
  Nammour, Fadel E., MD
  Nelson, Austin, MD
  Newman, William P., MD
  Paladugu, Gopikrishna, MD
  Pitts, Bruce P., MD
  Potluri, Rajendra C., MD
  Pyae, Nyan, MD

Sanford Broadway Clinic (cont.)

- Internal Medicine (continued)
  Sanaullah, Mohamed, MD
  Sanda, Janelle C., MD
  See, Jay K., MD
  Shahira, Eram, MD
  Shamshad, Faisal, MD
  Shanaah, Almothana M., MD
  Sheldon, Peggy A., MD
  Shrestha, Alok, MD
  Sinclair, Gary, MD
  Starley, Brad Q., MD
  Starosta, Vitaliy, MD
  Talha, Muhammad, MD
  Talluri, Krishna, MD
  Theige, David J., MD
  Thompson, Jody, MD
  Tieszen, Mark J., MD
  Tight, Robert R., MD
  Toumeh, Mohamed, MD
  Twedt, Heidi L., MD
  Vilenski, Leonid, MD
  Volk, James A., MD
  Watkins, Jeffrey, MD
  Wiisanen, Matthew, MD
  Wilke, Russell, MD
  Womeldorph, Craig, DO
  Zeitouni, Mohammed O., MD
- Nephrology
  Chemiti, Gopal K., MD
  Levitski-Heikkila, Teresa V., MD
  Louvar, Daniel, MD
  Mahale, Adit, MD
  Phadke, Gautam, MD
- Nuclear Medicine
  Fisher, Mark F., MD
  Stallman, Donald J., MD
- Obstetrics/Gynecology
  Bell, Maria, MD
  Boyle, Jeffrey G., MD
  Bro, Walter C., MD
  Keup, Christine, MD
  Lesteberg, Keith G., MD
  McCann, Michelle, MD
  McNamara, Michael F., DO
  Mickelson, Margaret T., MD
  Perkerewicz, Jedidiah, MD
  Siegel, Eric, MD
  Tompkins, Rebekah, MD
  Van Eerden, Peter, MD

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- Orthopedic Surgery
  Matthys, Gary, MD
- Otology, Laryngology, Rhinology
  Driskill, Brent, MD
  Elliott, Clark, MD
  Gasser, Charles R., MD
  Larson, Daniel, MD
  Lee, John, MD
  Nagle, James W., MD
  Raisen, Jay, MD
  Ryan, Jesse, MD
  Shami, Halla, MD
  Sirotnak, John J., MD
  Westbrook, Benjamin, MD
- Pathology
  Baldwin, Jerry J., MD
  Grimm, Terrence E., MD
  Lessard, Julie L., MD
  Marsh, Julie A., MD
- Pathology, Anatomy, Clinical Pathology
  Bing, Zhanyong, MD
  Lappinga, Paul, MD
  Wood, Angela, MD
- Pediatrics
  Altaf, Waseem, MD
  Bass, John, MD
  Bellas, William, DO
  Blaufuss, Mark C., MD
  Casas, Luis, MD
  Casas-Melley, Adela, MD
  Davis Keppen, Laura, MD
  Decock, Christopher, MD
  Dorostkar, Parvin, MD
  Gheen, Kenneth, MD
  Horner, Justin, MD
  Jarandeh, Eric, MD
  Kenien, Alan G., MD
  Kochilas, Lazaros, MD
  Mannheimer, Alan, MD
  Mauriello, Clifford, MD
  Miller, Ron H., MD
  Mohamed, Mohamed, MD
  Nelson, Stephen N., MD
  Nicklay-Catalan, Janice M., MD
  Paschall, John, MD
  Sanders, John, MD
  Sapiega, Vytautas, MD
  Sapiegiene, Lina, MD

North Dakota (cont.)
Fargo (cont.)

Sanford Broadway Clinic (cont.)

- Pediatrics (continued)
  Smith, Jo-Ann, MD
  Stephens, Scott, DO
  Storm, Waldemar G., MD
  Thurlow, Brenda K., MD
  Tinguely, Stephen J., MD
  Trefz, Matthew, MD
  Wang, Jenny, MD
  Yoe, Norbert, MD
- Peripheral Vascular Diseases Or Surgery
  Bakken, Andrew, MD
  Kubalak, Gary M., MD
  Reil, Todd, MD
- Physical Medicine and Rehabilitation
  Fillmore, Scott, MD
  Goldstein, Heidi J., MD
  Klava, William N., MD
  Lindquist, Paul J., MD
- Plastic Surgery
  Antoniuk, Pamela, MD
  Schmidt Krings, Diane R., MD
- Podiatry, Surgical Chiropody
  Arness, Richard E., DPM
  Cullen, Nicole, DPM
- Psychiatry (MD/DO)
  Haider, Naveed, MD
  Kohoutek, Bradley W., MD
  Olson, Robert J., MD
  Tavakoli, Sirpa, MD
- Pulmonary Diseases
  Adhami, Naeem, MD
  Hung, Robert, MD
  Jamil, Mouhamad G., MD
  Johnson, Kara, MD
  Lababidi, Hani, MD
  Schilero, Gregory, MD
  Zeitouni, Mohammed O., MD
- Radiology
  Anderson, Seth, DO
  Asheim, Jason, MD
  Biegler, Peter, MD
  Carson, Janine L., MD
  Catalan, Richard, MD
  Dahl, Benjamin, MD
  Fisher, Mark F., MD
  Garrity, Stephen P., MD
  Goldenberg, Jacob A., MD

North Dakota (cont.)
Fargo (cont.)

Sanford Broadway Clinic (cont.)

- Radiology (continued)
  Kallenbach, Christopher, MD
  Karlins, Nathaniel L., MD
  Kearns, Martha, MD
  Licht, Lawrence H., MD
  Machayya, Jon, MD
  Marsden, Richard J., MD
  Maurer, James W., MD
  Mickelson, Daniel G., MD
  Mitchell, Steven L., MD
  Ng, Su-Ann, MD
  Promersberger, Eric R., MD
  Reynolds, Ryan, MD
  Shook, Robert J., MD
  Stallman, Donald J., MD
  Teigen, Corey L., MD
  Weilke, Florian A., MD
  Weiner, Michael J., MD
- Thoracic Surgery
  Jolly, Shashank, MD
  McNeil, Jeffrey, MD
  Newman, Roxanne V., MD
  Winton, Barry, MD
- Urology
  Eeg, Kurt, MD
  Garrels, Kristina, MD
  Heshmat, Samy, MD
  McAdams, Paul, MD
  Nguyen, Carvell T., MD
  Noah, Thomas A., MD
  Sawchuk, Theodore J., MD
  Segal, Michael D., MD
  Thomas, Anil, MD
  Toni, Conrad, MD
  Williams, Brent, MD

Sanford Broadway Medical Building
736 Broadway
(701) 234-2000

- Infectious Diseases
  Mariani, Paul G., MD
- Internal Medicine
  Mariani, Paul G., MD
- Physical Medicine and Rehabilitation
  Fillmore, Scott, MD

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Sanford Broadway Medical Building
736 Broadway N
(701) 234-2000

- General Surgery
  Mistry, Bhargav M., MD
- Infectious Diseases
  Carson, Paul J., MD
  Guerrero, Dubert, MD
  Mariani, Paul G., MD
- Internal Medicine
  Alonto, Augusto M., MD
  Carson, Paul J., MD
  Levitski-Heikkila, Teresa V., MD
  Mahale, Adit, MD
- Nephrology
  Chemiti, Gopal K., MD
  Levitski-Heikkila, Teresa V., MD
  Louvar, Daniel, MD
  Mahale, Adit, MD
- Physical Medicine and Rehabilitation
  Fillmore, Scott, MD
  Goldstein, Heidi J., MD
  Klava, William N., MD

Sanford Childrens Southwest Clinic
2701 13th Ave S
(701) 234-3600

- Pediatrics
  Bakke, Rebecca, MD
  Bentz, Barbara A., MD
  Gunderson, Aaron C., MD
  Hanson, Stephanie, MD
  Horner, Melissa, MD
  Hutchison, William, MD
  Jost, Aaron, MD
  Kantak, Sunita A., MD
  Krasniewska, Lidia D., MD
  Kunkel, Melissa, MD
  Kvistad, Bonnie, MD
  Lewis, David S., MD
  Lien, Sarah J., MD
  Lucht, Kamilla L., MD
  Mausbach, Thomas W., MD
  Miller, Ron H., MD
  Newman, Tracie, MD
  Sanders, John, MD
  Tiongson, Christopher, MD
  Welle, Patrick J., MD
  Weller, Maria L., MD

Sanford Childrens Southwest Clinic (cont.)

- Psychiatry (MD/DO)
  Hanisch, Stefanie U., MD
  Kjelstrup, Diane, MD
  Roembach, Jeanine L., MD
- Radiology
  Asheim, Jason, MD

Sanford Childrens Southwest Clinic
2701 13th Ave S
(701) 234-3600

- Pediatrics
  Bakke, Rebecca, MD
  Bentz, Barbara A., MD
  Gunderson, Aaron C., MD
  Hanson, Stephanie, MD
  Horner, Melissa, MD
  Hutchison, William, MD
  Jost, Aaron, MD
  Kantak, Sunita A., MD
  Kenien Erpelding, Julie, MD
  Krasniewska, Lidia D., MD
  Kunkel, Melissa, MD
  Kvistad, Bonnie, MD
  Lewis, David S., MD
  Lien, Sarah J., MD
  Lucht, Kamilla L., MD
  Mausbach, Thomas W., MD
  Miller, Ron H., MD
  Newman, Tracie, MD
  Sanders, John, MD
  Setty, Arveity, MD
  Thurlow, Brenda K., MD
  Tiongson, Christopher, MD
  Welle, Patrick J., MD
  Weller, Maria L., MD
- Psychiatry (MD/DO)
  Hanisch, Stefanie U., MD
  Kjelstrup, Diane, MD
  Roembach, Jeanine L., MD

Sanford Clinic Internal Medicine At Family Wellness
2960 Seter Parkway
(701) 234-8800

- Geriatrics
  Blehm, Julie A., MD
- Internal Medicine
  Blehm, Julie A., MD
  Raum, Jennifer, MD

Sanford Dermatology & Laser Clinic
4656 40th Ave S
(701) 234-8860

- Dermatology
  Flach, David B., MD
  Holzwarth, Ryan L., MD
  Khan, Yulia, MD
  Maingi, Chetan, MD
  Matzke, Thomas, MD

Sanford Dermatology & Laser Clinic
4656 40th Ave S
(701) 234-8860

- Dermatology
  Flach, David B., MD
  Holzwarth, Ryan L., MD
  Khan, Yulia, MD
  Maingi, Chetan, MD
  Matzke, Thomas, MD

Sanford Dialysis Fargo
2801 University Drive S
(701) 234-8400

- Nephrology
  Chemiti, Gopal K., MD
  Mahale, Adit, MD

Sanford Health Occupational Medicine Clinic
3838 12th Ave N
(701) 839-5902

- Emergency Medicine
  Blanchard, Joel H., MD
- Family Practice
  Blanchard, Joel H., MD

Sanford Health Occupational Medicine Clinic
3838 12th Ave N
(701) 234-4700

- Emergency Medicine
  Mickelson, John G., DO
- Family Practice
  Beauclair, John G., MD
  Martino, Robert M., MD
  Mickelson, John G., DO
- General Practice
  Koski, Charles G., MD
- Orthopedic Surgery
  Robertson, Christopher, MD

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Sanford Health Occupational Medicine Clinic
3838 12th Ave N
(701) 234-4700

- Orthopedic Surgery
  Piatt, Bruce E., MD

Sanford Neuroscience Clinic
700 1st Ave S
(701) 234-4036

- Neurological Surgery
  Amin, Beejal, MD
  Eickman, John, MD
  Hutchison, John W., MD
  Jones, Moses, MD
  Lindley, Timothy, MD
  Mattingly, Thomas, MD
  Middleton, Troy, MD
  Rahhal, Ryan, MD
- Neurology
  Bailly, Richard C., MD
  Caillier, Rebecca, MD
  Diamond, Amanda, MD
  Eickman, Kara, MD
  Faber, Kevin M., MD
  Harlow, Tanya, MD
  Knutson, Cynthia M., MD
  Meyerson, Rebecca, MD
  Scarberry, Susan L., MD
  Venkataramana, Anita, MD
- Radiology
  Asheim, Jason, MD

Sanford Neuroscience Clinic
700 1st Ave S
(701) 234-4036

- Neurological Surgery
  Amin, Beejal, MD
  Eickman, John, MD
  Hutchison, John W., MD
  Jackson, Adam, MD
  Jones, Moses, MD
  Li, Maria S., MD
  Lindley, Timothy, MD
  Mattingly, Thomas, MD
  Middleton, Troy, MD
  Rahhal, Ryan, MD
  Zellem, Ronald T., MD
- Neurology
  Bailly, Richard C., MD
  Caillier, Rebecca, MD

Sanford Neuroscience Clinic (cont.)

- Neurology (continued)
  Diamond, Amanda, MD
  Duffy, Kristina, MD
  Eickman, Kara, MD
  Faber, Kevin M., MD
  Harlow, Tanya, MD
  Kim, Duk H., MD
  Knutson, Cynthia M., MD
  Lou, Jau-Shin, MD
  Meyerson, Rebecca, MD
  Muntean, Eugeniu, MD
  Samaraweera, Ravinda, MD
  Scarberry, Susan L., MD
  Smigrodzki, Rafal M., MD
  Venkataramana, Anita, MD
- Psychiatry (MD/DO)
  Tomb, David, MD

Sanford North Fargo Clinic
2601 N Broadway
(701) 234-2900

- Family Practice
  Card, Charlene C., MD
  Knutson Bueling, Robyn, MD
- Radiology
  Asheim, Jason, MD
- Sports Medicine
  Knutson Bueling, Robyn, MD

Sanford North Fargo Clinic
2601 Broadway N
(701) 234-2900

- Family Practice
  Bauer-Olson, Cheryl, DO
  Card, Charlene C., MD
  Gibbs, Karyssa, MD
  Knutson Bueling, Robyn, MD
  Myrmoe, Jason, MD
- Sports Medicine
  Knutson Bueling, Robyn, MD

Sanford Open MRI
2829 South University Dr
(701) 234-7100

- Radiology
  Asheim, Jason, MD
  Asleson, John, MD
  Austin, William R., MD
  Biegler, Peter, MD
  Catalan, Richard, MD

Sanford Open MRI (cont.)

- Radiology (continued)
  Dahl, Benjamin, MD
  Fish, Jonathan, MD
  Fisher, Mark F., MD
  Garrity, Stephen P., MD
  Kallenbach, Christopher, MD
  Karlins, Nathaniel L., MD
  Kearns, Martha, MD
  Khaghany, Kamran, MD
  Licht, Lawrence H., MD
  Machayya, Jon, MD
  Mickelson, Daniel G., MD
  Mitchell, Steven L., MD
  Ng, Su-Ann, MD
  Promersberger, Eric R., MD
  Reynolds, Ryan, MD
  Shook, Robert J., MD
  Stallman, Donald J., MD
  Weilke, Florian A., MD
  Weiner, Michael J., MD

Sanford Orthopedics Sports Medicine
2301 25th St S Ste A
(701) 237-9712

- General Surgery
  Bailey, David A., MD
- Hand Surgery
  Bailey, David A., MD
  Erpelding, Jason, MD
- Orthopedic Surgery
  Askew, R Mark, MD
  Berglund, Howard T., MD
  Dahl, Kevin, MD
  Friederichs, Matthew G., MD
  Haft, Geoffrey, MD
  Hvidston, Andrew J., MD
  Lundeen, Mark A., MD
  Nelsen, Matthew J., MD
  Noonan, Benjamin, MD
  Norberg, Jon D., MD
  Orson, Gregory G., MD
  Prochaska, Vern, MD
  Robertson, Christopher, MD
  Stavenger, Jeffrey P., MD
  Wiest, David L., MD
- Radiology
  Marsden, Richard J., MD

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Sanford Orthopedics Sports Medicine (cont.)
- Sports Medicine
  Lystad, Jeffrey K., MD

Sanford Orthopedics Sports Medicine
2301 S 25th St Ste A
(701) 237-9712

- General Surgery
  Bailey, David A., MD
- Hand Surgery
  Bailey, David A., MD
  Erpelding, Jason, MD
  Gibbs, Randolph, MD
- Orthopedic Surgery
  Askew, R Mark, MD
  Berglund, Howard T., MD
  Brown, Anthony, MD
  Dahl, Kevin, MD
  Friederichs, Matthew G., MD
  Haft, Geoffrey, MD
  Hvidston, Andrew J., MD
  Lundeen, Mark A., MD
  Nelsen, Matthew J., MD
  Noonan, Benjamin, MD
  Norberg, Jon D., MD
  Orson, Gregory G., MD
  Piatt, Bruce E., MD
  Prochaska, Vern, MD
  Robertson, Christopher, MD
  Stavenger, Jeffrey P., MD
  Wiest, David L., MD
- Radiology
  Asheim, Jason, MD
- Sports Medicine
  Lystad, Jeffrey K., MD

Sanford Professional Building
100 4th St S
(701) 234-3100

- Family Practice
  Glunberg, Steven K., MD
  Graff, Arne, MD
- Psychiatry (MD/DO)
  Burd, Ronald M., MD
  Fleissner, Rachel M., MD
  Gaffrey, Jane, DO
  Goyal, Harish, MD
  Haider, Naveed, MD
  Hanisch, Stefanie U., MD

Sanford Professional Building (cont.)
- Psychiatry (MD/DO) (continued)
  Hund, Morris A., MD
  Kjelstrup, Diane, MD
  Leon, Zelko, MD
  Mitchell, James E., MD
  Roembach, Jeanine L., MD
  Seicarescu, Cristina, MD
  Swensen, Eric C., MD

Sanford Professional Building
100 4th St S
(701) 234-3100

- Family Practice
  Glunberg, Steven K., MD
  Graff, Arne, MD
- Internal Medicine
  Mashaqi, Saif, MD
- Pediatrics
  Decock, Christopher, MD
- Psychiatry (MD/DO)
  Allick, Albert, MD
  Burd, Ronald M., MD
  Dennison, Evelyn, MD
  Eason, Phyllis, MD
  Fleissner, Rachel M., MD
  Gaffrey, Jane, DO
  Goyal, Harish, MD
  Haider, Naveed, MD
  Hanisch, Stefanie U., MD
  Hund, Morris A., MD
  Kjelstrup, Diane, MD
  Kohoutek, Bradley W., MD
  Leon, Zelko, MD
  Mitchell, James E., MD
  Olson, Robert J., MD
  Roembach, Jeanine L., MD
  Seicarescu, Cristina, MD
  Swensen, Eric C., MD

Sanford Reproductive Medicine Clinic
1111 Harwood Dr
(701) 234-2700

- Endocrinology
  Cain, Kristen, MD
  Christensen, Steffen P., MD
- Obstetrics/Gynecology
  Christensen, Steffen P., MD
  Dahl, Stephanie K., MD

Sanford Reproductive Medicine Clinic
1111 Harwood Dr
(701) 234-2700

- Endocrinology
  Cain, Kristen, MD
- Obstetrics/Gynecology
  Christensen, Steffen P., MD
  Dahl, Stephanie K., MD

Sanford Roger Maris Cancer Center
820 4th St N
(701) 234-6161

- Anesthesiology (MD)
  Indergaard, Patrick J., MD
- Internal Medicine
  Alzoubi, Ammar, MD
  Geeraerts, Louis H., MD
  Leitch, John M., MD
  Levitt, Ralph, MD
  Steen, Preston D., MD
  Terstriep, Shelby, MD
- Oncology
  Alzoubi, Ammar, MD
  Foster, Ethan, MD
  Gaba, Anu G., MD
  Geeraerts, Louis H., MD
  Gross, Gerald G., MD
  Jensen, Ashley, MD
  Kobrinsky, Nathan L., MD
  Leitch, John M., MD
  Levitt, Ralph, MD
  Panwalkar, Amit, MD
  Parmley, Richard T., MD
  Russell, Howard L., MD
  Shahidi, Homayoon, MD
  Snow, Denise, MD
  Steen, Preston D., MD
  Terstriep, Shelby, MD
- Pediatrics
  Anim, Samuel, MD
  Kobrinsky, Nathan L., MD
  Parmley, Richard T., MD
- Radiation Therapy
  Arusell, Robert M., MD
  Bier, Dennis E., MD
  Nordstrom, Kathleen A., MD

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PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING PHYSICIANS

Sanford Roger Maris Cancer Center
820 4th St N
(701) 234-6161

- Anesthesiology (MD)
  Indergaard, Patrick J., MD
- Internal Medicine
  Alzoubi, Ammar, MD
  Geeraerts, Louis H., MD
  Leitch, John M., MD
  Levitt, Ralph, MD
  Russell, Howard L., MD
  Steen, Preston D., MD
  Terstriep, Shelby, MD
  Tinguely, Matthew, MD
- Oncology
  Alzoubi, Ammar, MD
  Foster, Ethan, MD
  Gaba, Anu G., MD
  Geeraerts, Louis H., MD
  Gitau, Mark, MD
  Gross, Gerald G., MD
  Jensen, Ashley, MD
  Kobrinsky, Nathan L., MD
  Leitch, John M., MD
  Levitt, Ralph, MD
  Nordstrom, Kathleen A., MD
  Panwalkar, Amit, MD
  Parmley, Richard T., MD
  Russell, Howard L., MD
  Shahidi, Homayoon, MD
  Snow, Denise, MD
  Steen, Preston D., MD
  Terstriep, Shelby, MD
- Pediatrics
  Anim, Samuel, MD
  Kobrinsky, Nathan L., MD
  Parmley, Richard T., MD
- Radiation Therapy
  Arusell, Robert M., MD
  Bier, Dennis E., MD

Sanford South University
1720 University Dr S
(701) 234-2000

- Anesthesiology (MD)
  Berndt, Steven D., MD
  Brunsvold, Robert A., MD
  Daniels, Steven, MD
  Fisher, Cristina, MD
  Gaba, Vijay, MD

Sanford South University (cont.)

- Anesthesiology (MD) (continued)
  Ghazi, Majid, MD
  Goswami, Arundhati, MD
  Harris, Brian, MD
  Hass, Brian, MD
  Indergaard, Patrick J., MD
  Onuora, Tochukwu, MD
  Raad, Robert, MD
  Swami, Swati, MD
  Vandrovec, Chad, MD
  Vandrovec, Sara, MD
  Williams, Elisa, DO
- Family Practice
  Braunagel, Bradley A., MD
  Glatt, David J., MD
  Jessen, Jamey, MD
  Kenninger, Randall A., MD
  Kringlie, Ross A., MD
  Lien, David J., MD
  Magura, Connie A., MD
  Mickelson, John G., DO
  Naseer, Osama B., MD
  Nyhus, Curtis C., MD
  Roesler, Sean E., MD
  Sampson, Steven M., MD
  Schatz, Sarah, MD
  Skari, Bradly, MD
  Sorlie, Mandy, MD
  Webster, Michael G., MD
  Wiisanen, Ronald E., MD
- General Surgery
  Bailey, David A., MD
- Hand Surgery
  Bailey, David A., MD
- Internal Medicine
  Anderson, Misty, DO
  Arora, Kanwardeep, MD
  Barun, Bipin, MD
  Chavour, Sudhir K., MD
  Jasti, Anil, MD
  Paladugu, Gopikrishna, MD
  Potluri, Rajendra C., MD
  Pyae, Nyan, MD
  Sanaullah, Mohamed, MD
  Shahira, Eram, MD
  Talluri, Krishna, MD
- Ophthalmology
  Anderson, Steven, MD
  Jordan, Andrew A., MD

Sanford South University (cont.)

- Optometrist
  Edwards, Robert A., OD
  Gilbertson, Kimberly A., OD
  Kelly, Brendan, OD
  Zieman, Blaine G., OD
- Orthopedic Surgery
  Friederichs, Matthew G., MD
- Pathology
  Ren, Yongshen, MD
- Pathology, Anatomy, Clinical Pathology
  Bianco, Michelle K., MD
- Pediatrics
  Kvistad, Bonnie, MD
- Psychiatry (MD/DO)
  Burd, Ronald M., MD
  Haider, Naveed, MD
  Hund, Morris A., MD
  Leon, Zelko, MD
  Olson, Robert J., MD
  Rougle, James, DO
  Swensen, Eric C., MD
- Radiology
  Asleson, John, MD
  Catalan, Richard, MD
  Dahl, Benjamin, MD
  Fish, Jonathan, MD
  Kallenbach, Christopher, MD
  Khaghany, Kamran, MD
  Machayya, Jon, MD
  Marsden, Richard J., MD
  Reynolds, Ryan, MD
  Shook, Robert J., MD

Sanford South University
1720 University Dr S
(701) 234-2000

- Anesthesiology (MD)
  Berndt, Steven D., MD
  Brunsvold, Robert A., MD
  Colon-Dejesus, Manuel, MD
  Daniels, Steven, MD
  Fisher, Cristina, MD
  Gaba, Vijay, MD
  Ghazi, Majid, MD
  Goswami, Arundhati, MD
  Habli, Nader, MD
  Harris, Brian, MD
  Hass, Brian, MD

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PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING PHYSICIANS

Sanford South University (cont.)

- Anesthesiology (MD) (continued)
  Indergaard, Patrick J., MD
  Moussa, Adib, MD
  Onuora, Tochukwu, MD
  Parves, Shah, MD
  Pezhman, Eric, MD
  Raad, Robert, MD
  Rashid, Karim, MD
  Swami, Swati, MD
  Vandrovec, Chad, MD
  Vandrovec, Sara, MD
  Williams, Elisa, DO
- Emergency Medicine
  Agema, Ryan, MD
- Family Practice
  Braunagel, Bradley A., MD
  Haugo, Amie, MD
  Hochhalter, David, MD
  Jessen, Jamey, MD
  Kringlie, Ross A., MD
  Kruger, Michael S., MD
  Lien, David J., MD
  Magura, Connie A., MD
  Martino, Robert M., MD
  Mickelson, John G., DO
  Naseer, Osama B., MD
  Nyhus, Curtis C., MD
  Roesler, Sean E., MD
  Sampson, Steven M., MD
  Schatz, Sarah, MD
  Skari, Bradly, MD
  Sorlie, Mandy, MD
  Webster, Michael G., MD
  Wiisanen, Ronald E., MD
- General Surgery
  Bailey, David A., MD
- Hand Surgery
  Bailey, David A., MD
- Internal Medicine
  Al Hallak, Mohammed, MD
  Anderson, Misty, DO
  Arora, Kanwardeep, MD
  Bande, Dinesh, MD
  Barun, Bipin, MD
  Bhatta, Puspa, MD
  Bhattaral, Jaya, MD
  Briggs, Jill, MD
  Carey, Jantey, MD
  Chavour, Sudhir K., MD

Sanford South University (cont.)

- Internal Medicine (continued)
  Hess, April, MD
  Jasti, Anil, MD
  Mannuru, Devendranath, MD
  Paladugu, Gopikrishna, MD
  Potluri, Rajendra C., MD
  Pyae, Nyan, MD
  Sanaullah, Mohamed, MD
  See, Jay K., MD
  Shahira, Eram, MD
  Shrestha, Alok, MD
  Starosta, Vitaliy, MD
  Talluri, Krishna, MD
- Obstetrics/Gynecology
  Christensen, Steffen P., MD
  Dahl, Stephanie K., MD
- Ophthalmology
  Atchison, Michelle, MD
- Optometrist
  Edwards, Robert A., OD
  Kelly, Maggie, OD
- Orthopedic Surgery
  Friederichs, Matthew G., MD
  Matthys, Gary, MD
- Pathology
  Ren, Yongshen, MD
- Pathology, Anatomy, Clinical Pathology
  Bianco, Michelle K., MD
  Bing, Zhanyong, MD
- Pediatrics
  Kvistad, Bonnie, MD
- Plastic Surgery
  Keim, Jeffrey R., MD
- Psychiatry (MD/DO)
  Armstrong, Lacey L., MD
  Burd, Ronald M., MD
  Hund, Morris A., MD
  Leon, Zelko, MD
  Olson, Robert J., MD
  Rougle, James, DO
  Swensen, Eric C., MD
  Yarosh, Scott, MD
- Radiology
  Anderson, Seth, DO
  Asheim, Jason, MD
  Biegler, Peter, MD
  Ng, Su-Ann, MD
  Reynolds, Ryan, MD

Sanford South University Eye Center & Optical
1717 South University Dr
(701) 234-2305

- Ophthalmology
  Anderson, Steven, MD
  Jordan, Andrew A., MD
  Tufty, Geoffrey, MD
- Optometrist
  Edwards, Robert A., OD
  Gilbertson, Kimberly A., OD
  Kelly, Brendan, OD

Sanford Southpointe Clinic
2400 32nd Ave S
(701) 234-8800

- Allergy
  Eng, Woei Yeang, MD
  Kantak, Anand A., MD
- Emergency Medicine
  Lystad, Jeffrey K., MD
- Endocrinology
  Chaithongdi, Niyutchai, MD
  Hallanger-Johnson, Julie E., MD
  Munoz, Juan M., MD
  Newman, David, MD
- Family Practice
  Glatt, David J., MD
  Gullickson, Nicole, MD
  Kennedy, Gary J., MD
  Kenninger, Randall A., MD
  Lien, David J., MD
  Nyayapati, Neelima, MD
  Wiisanen, Ronald E., MD
- Geriatrics
  Nakasato, Yuri, MD
- Hand Surgery
  Bailey, David A., MD
- Internal Medicine
  Chaithongdi, Niyutchai, MD
  Chavour, Sreekanth, MD
  Dahl, Lindsey, MD
  Kallamadi, Rekha, MD
  Lang, Darin W., MD
  Munoz, Juan M., MD
  Nakasato, Yuri, MD
  Parvathareddy, Vishnupriyadevi, MD
  Raum, Jennifer, MD

Providers are subject to be added or terminated without notice.

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PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING PHYSICIANS

Sanford Southpointe Clinic (cont.)

- Nuclear Medicine
  Stallman, Donald J., MD
- Obstetrics/Gynecology
  Coauette, Jordan, MD
  Lesteberg, Keith G., MD
  Rondeau, Denise M., MD
  Rondeau, Jeffrey A., MD
- Ophthalmology
  Jordan, Andrew A., MD
- Optometrist
  Kelly, Maggie, OD
  Ulland, Bradley J., OD
- Orthopedic Surgery
  Dahl, Kevin, MD
  Friederichs, Matthew G., MD
  Nagle, Thomas D., MD
  Orson, Gregory G., MD
  Prochaska, Vern, MD
  Robertson, Christopher, MD
- Pediatrics
  Kantak, Anand A., MD
- Podiatry, Surgical Chiropody
  Anderson, Brad C., DPM
  Arness, Richard E., DPM
  Cullen, Nicole, DPM
  Uglem, Timothy P., DPM
- Psychiatry (MD/DO)
  Swensen, Eric C., MD
- Radiology
  Asheim, Jason, MD
  Asleson, Bruce A., MD
  Asleson, John, MD
  Catalan, Richard, MD
  Dahl, Benjamin, MD
  Kallenbach, Christopher, MD
  Khaghany, Kamran, MD
  Marsden, Richard J., MD
  Mickelson, Daniel G., MD
  Reynolds, Ryan, MD
  Stallman, Donald J., MD
- Rheumatology
  Nakasato, Yuri, MD
  Overiene, Viktorija, MD

Sanford Southpointe Clinic
2400 32nd Ave S
(701) 234-8800

- Allergy
  Eng, Woei Yeang, MD

North Dakota (cont.)
Fargo (cont.)

Sanford Southpointe Clinic (cont.)

- Allergy (continued)
  Kantak, Anand A., MD
- Emergency Medicine
  Lystad, Jeffrey K., MD
- Endocrinology
  Babu, Varsha, MD
  Chaithongdi, Niyutchai, MD
  Hallanger-Johnson, Julie E., MD
  Munoz, Juan M., MD
  Newman, David, MD
- Family Practice
  Altaf, Misbah, MD
  Glatt, David J., MD
  Gullickson, Nicole, MD
  Kennedy, Gary J., MD
  Kenninger, Randall A., MD
  Lien, David J., MD
  Martens, Kristine, DO
  Nyayapati, Neelima, MD
  Roesler, Sean E., MD
  Walker, Debra, MD
  Wiisanen, Ronald E., MD
- Hand Surgery
  Bailey, David A., MD
- Internal Medicine
  Chavour, Sreekanth, MD
  Dahl, Lindsey, MD
  Juhl, Kirsten, MD
  Kallamadi, Rekha, MD
  Lang, Darin W., MD
  Parvathareddy, Vishnupriyadevi, MD
  Raum, Jennifer, MD
  Trout, Malachia, MD
  Twedt, Heidi L., MD
- Nuclear Medicine
  Stallman, Donald J., MD
- Obstetrics/Gynecology
  Coauette, Jordan, MD
  Kappenman, James, MD
  Lesteberg, Keith G., MD
  Rondeau, Denise M., MD
  Rondeau, Jeffrey A., MD
  Saha, Joyoti, MD
  Tinguely, Christina, MD
  Tompkins, Rebekah, MD
- Ophthalmology
  Jordan, Andrew A., MD

North Dakota (cont.)
Fargo (cont.)

Sanford Southpointe Clinic (cont.)

- Optometrist
  Kelly, Maggie, OD
- Orthopedic Surgery
  Dahl, Kevin, MD
  Friederichs, Matthew G., MD
  Nagle, Thomas D., MD
  Orson, Gregory G., MD
  Piatt, Bruce E., MD
  Prochaska, Vern, MD
  Robertson, Christopher, MD
- Pediatrics
  Casas, Luis, MD
  Cleveland, Chris, MD
  Kantak, Anand A., MD
  Trout, Malachia, MD
- Podiatry, Surgical Chiropody
  Anderson, Brad C., DPM
  Arness, Richard E., DPM
  Cullen, Nicole, DPM
  Uglem, Timothy P., DPM
- Psychiatry (MD/DO)
  Kohoutek, Bradley W., MD
  Swensen, Eric C., MD
- Radiology
  Anderson, Seth, DO
  Asheim, Jason, MD
  Biegler, Peter, MD
  Dahl, Benjamin, MD
  Kallenbach, Christopher, MD
  Marsden, Richard J., MD
  Mickelson, Daniel G., MD
  Ng, Su-Ann, MD
  Reynolds, Ryan, MD
  Stallman, Donald J., MD
- Rheumatology
  Nakasato, Yuri, MD
  Overiene, Viktorija, MD

Sanford Southpointe Eye Center & Optical
2400 32nd Ave S
(701) 234-3640

- Optometrist
  Kelly, Maggie, OD
  Quitberg, Joy, OD
  Ulland, Bradley J., OD
  Zieman, Blaine G., OD

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PARTICIPATING PHYSICIANS

North Dakota (cont.)
Fargo (cont.)

Southeast Human Service Center
2624 9th Ave S
(701) 298-4500

- Family Practice
  Stoe, Anne, MD
- Psychiatry (MD/DO)
  Hajek, Philip T., MD
  Kroetsch, Laura A., MD
  McLean, Andrew J., MD
  Vo, Timothy T., MD

St Sophies LLC
3201 33rd St S
(701) 365-4488

- Psychiatry (MD/DO)
  Kenney, Emmet M., MD

Staton, R. Dennis, MD
509 25th Ave N
(701) 451-9145

- Psychiatry (MD/DO)
  Staton, R D., MD

Steven Thom, MD PC
2601 S University Dr
(701) 235-5200

- Ophthalmology
  Thom, Steven B., MD

The Cortino Group Ltd,LLC
1555 43rd St S Ste102
(701) 364-4107

- General Surgery
  Corpus Jr, Eduardo T., MD

Tracie Teig Malstrom, O.D.
3902 13th Ave S
(701) 282-0129

- Optometrist
  Malsom, Tracie L., OD

Urgent Medicine Associates, LLC
2829 S Univ Dr Ste 101
(701) 232-9000

- Family Practice
  Sondreal, Philip S., MD
- Internal Medicine
  Kooyer, Kurt W., MD
- Pediatrics
  Kooyer, Kurt W., MD

North Dakota (cont.)
Fargo (cont.)

Valley Anesthesia Associates, PC
2301 S 25th St Ste K
(701) 234-1728

- Anesthesiology (MD)
  Chalasani, Nageswararao V., MD

Valley Medical Clinic, PC
300 Main Ave Suite 200
(701) 297-0817

- Anesthesiology (MD)
  Sivanna, Panjini M., MD
- Orthopedic Surgery
  Kim, Sunny S., MD

Valley Oral & Facial Surgery, PC
2701 9th Ave S Ste F
(701) 235-7379

- Oral Surgery
  Petersen, Troy R., DMD

Wessman, Kari, MD, PC
1665 43 St S
(701) 282-0051

- Obstetrics/Gynecology
  Wessman, Kari J., MD

Forman

Sanford Health Forman Clinic
336 Main St
(701) 724-3221

- Internal Medicine
  Nagala, Vani, MD
- Podiatry, Surgical Chiropody
  Arness, Richard E., DPM
- Radiology
  Asheim, Jason, MD
  Marsden, Richard J., MD

Fort Totten

Early Childhood Tracking
416 2nd Ave N
(701) 766-1248

- Family Practice
  Devlin, Kwanza N., MD
  Hostetter, Jeffrey E., MD
  Krohn, Kimberly T., MD
- General Practice
  Willis, Karin K., MD
- Internal Medicine
  Neumann, Nicholas H., MD

North Dakota (cont.)
Fort Totten (cont.)

Early Childhood Tracking (cont.)

- Pediatrics
  Dwelle, Terry L., MD
- Pulmonary Diseases
  Neumann, Nicholas H., MD

Fort Yates

Fort Yates IHS
North River Rd
(701) 854-3831

- Clinic
  Fort Yates

Gackle

Wishek Rural Health Clinic/Gackle
321 Main St
(701) 452-2364

- Family Practice
  Kosiak, Donald J., MD
  Oliveira-Filho, Edgar K., MD
  Patel, Suresh K., MD
- General Practice
  Vegiraju, Thammi R., MD
- Internal Medicine
  Thirumala Reddy, Joseph R., MD

Garrison

Drs Schindler & Deis
151 N Main St
(701) 463-2224

- Optometrist
  Deis, Thomas L., OD
  Schindler, Keith L., OD

Garrison Family Clinic
437 3rd Ave SE
(701) 463-2245

- Family Practice
  Dornacker, Jon E., MD
  Harchenko, Vern A., MD

Glen Ullin

Glen Ullin Family Medical Center
602 Ash Ave E
(701) 348-9175

- General Practice
  Knecht, John F., MD
- Internal Medicine
  Goyal, Deepak M., MD

Providers are subject to be added or terminated without notice.

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PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING PHYSICIANS

North Dakota (cont.)
Grafton

Christian Unity Hospital, Corp. dba Grafton Family Clinic
164 West 13th Street
(701) 352-2000

- Family Practice
  Fillipi, Linda R., MD
  Kotnik, Anthony J., MD
  Omotunde, Joshua O., MD
- General Surgery
  Khokha, Inder V., MD
- Internal Medicine
  Sundberg, Elizabeth E., MD
- Nephrology
  Sundberg, Elizabeth E., MD
- Radiology
  Ali, Azhar T., MD
  Asis, Martin J., MD
  Baraga, Joseph J., MD
  Barkmeier, Jeffrey, MD
  Block, Nathan D., MD
  Bowman Seitz, Tara S., MD
  Bretzke, Carl A., MD
  Bretzman, Peter A., MD
  Bryan, Erich N., MD
  Butler, Robert R., MD
  Carlson, Blake A., MD
  Carolan, Paul R., MD
  Caspers, John M., MD
  Castaneda, Wilfrido R., MD
  Ditmanson, Phil M., MD
  Grogan, Michael J., MD
  Hedlund, Laura J., MD
  Jackson, Christopher A., MD
  Johnson, Adam C., MD
  Kang, Edith H., MD
  Lambert, David P., MD
  Loe, Matthew J., MD
  Longley, Deborah G., MD
  Ludeman, Lucas B., MD
  Magnuson, Jeffrey E., MD
  Maguire, Frank P., MD
  May, Benjamin J., MD
  Muschenheim, Alexandra L., MD
  Parrino, Suzanne S., MD
  Passe, Theodore J., MD
  Phelan, Jeffrey S., MD
  Prescott, Trisha R., MD
  Rhodes, Nicholas G., MD
  Rosenberg, Michael S., MD
  Ruzek, Kimberly A., MD

North Dakota (cont.)
Grafton (cont.)

Christian Unity Hospital, Corp. dba Grafton Family Clinic (cont.)

- Radiology (continued)
  Savcenko, Vladimir, MD
  Sullivan, Patrick P., MD
  Tai, Angela W., MD
  Truman, Susan M., MD
  Weisensee, Anne M., MD
  Wiese, Don E., MD
  Wittenberg, Keith H., MD

Heartland Eye Care
415 Hill Ave
(701) 352-1370

- Optometrist
  Carlson, Dori M., OD
  Carter, Michelle K., OD
  Helgeson, Mark K., OD
  Hoenke, Jaime A., OD

Unity Medical Center
164 W 13th St
(701) 352-1620

- Family Practice
  Fillipi, Linda R., MD
  Kotnik, Anthony J., MD
  Omotunde, Joshua O., MD
- Internal Medicine
  Go, Jason S., MD
  Jahed, Abdul Z., MD
  Sundberg, Elizabeth E., MD
- Nephrology
  Sundberg, Elizabeth E., MD
- Obstetrics/Gynecology
  Lessard, Collette R., MD
- Podiatry, Surgical Chiropody
  Fanous, Basem Z., DPM
- Radiology
  Ali, Azhar T., MD
  Arsenault, Todd M., MD
  Asis, Martin J., MD
  Baldwin, Matthew T., MD
  Baraga, Joseph J., MD
  Barkmeier, Jeffrey, MD
  Berens, Bruce M., MD
  Berger, Mark W., MD
  Block, Nathan D., MD
  Bretzke, Carl A., MD
  Bretzman, Peter A., MD
  Bryan, Erich N., MD
  Butler, Robert R., MD

North Dakota (cont.)
Grafton (cont.)

Unity Medical Center (cont.)

- Radiology (continued)
  Carlson, Blake A., MD
  Carolan, Paul R., MD
  Caspers, John M., MD
  Castaneda, Wilfrido R., MD
  Ditmanson, Phil M., MD
  Drake, David G., MD
  Edmonson, George R., MD
  Frecentese, Dominic F., MD
  Grogan, Michael J., MD
  Hartigan, Andrew S., MD
  Hedlund, Laura J., MD
  Hommeyer, Steven C., MD
  Jackson, Christopher A., MD
  Johnson, Adam C., MD
  Kang, Edith H., MD
  Knoedler, John P., MD
  Knutzen, Anders M., MD
  Lambert, David P., MD
  Leon, Jorge A., MD
  Longley, Deborah G., MD
  Ludeman, Lucas B., MD
  Magnuson, Jeffrey E., MD
  Maguire, Frank P., MD
  May, Benjamin J., MD
  Mulcahy, Paul F., MD
  Muschenheim, Alexandra L., MD
  Page, Graydon T., MD
  Parrino, Suzanne S., MD
  Phelan, Jeffrey S., MD
  Rathmann, Gregory A., MD
  Rhodes, Nicholas G., MD
  Rosenberg, Michael S., MD
  Ruzek, Kimberly A., MD
  Savcenko, Vladimir, MD
  Sullivan, Patrick P., MD
  Tashjian, Joseph H., MD
  Truman, Susan M., MD
  Tummala, Anuradha K., MD
  Veldman, Mark W., MD
  Weinmann, Robert H., MD
  Weisensee, Anne M., MD
  Wiese, Don E., MD
  Wittenberg, Keith H., MD
  Wold, Peter B., MD

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NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING PHYSICIANS

Advanced Eyecare
2860 10th Ave N Ste 350
(701) 757-2121

- Optometrist
  Lagodinski-Christian, Julie A., OD

Altru Cancer Center
960 S Columbia Rd
(701) 780-5400

- Internal Medicine
  Lizakowski, Laura A., MD
  Panico, Kevin, MD
- Oncology
  Bustillo Chams, Ivan J., MD
  Dentchev, Todor N., MD
  Panico, Kevin, MD
  Seeger, Grant R., MD
  Siddiqui, Tariq, MD
  Walsh, Daniel J., MD
  Winchester, Marshall B., MD

Altru Family Medicine Center
1380 S Columbia Rd
(701) 795-2000

- Family Practice
  Calin, Cristina, MD
  Chan, Paul J., MD
  Chaudhry, Aisha B., MD
  Deere, Joshua R., MD
  Funk, Peter A., MD
  Gomez, Yvonne L., MD
  Johnson, Eric L., MD
  Lantoria, Gerardo P., MD
  Lyste, Derek J., MD
  Millette, Keith W., MD
  Nazir, Asad, MD
  Riaz, Freaha, MD
  Roxas, Rodrigo C., MD
  Roxas, Sharon K., MD
  Stevens, Kirk D., MD
  Walz, Joel D., MD
- Pathology
  Cooley, A. Marvin, MD
- Radiology
  Hood, Larissa L., MD
  James, John, MD

Altru Family Medicine Residency
725 Hamline St
(701) 780-6800

- Family Practice
  Gasparini, Andrew, MD
  Ghimire, Roshan, MD
  Greek, Gregory D., MD
  Grissom, Douglas W., MD
  Halvorson, Larry O., MD
  Konzak-Jones, M. Kim, MD
  Laqua, Patricia L., MD
  Luciano, Andrew S., MD
  Mann, William S., MD
  Mees, Christopher J., MD
  Mees, Sara L., MD
  Nielsen, A Marc, MD
  Philpot, Heidi, MD
  Roed, James R., MD
  Roers Irmen, Stacy L., MD
- General Practice
  Henderson, Christopher P., MD
- General Surgery
  Khromachou, Tamim R., MD
- Radiology
  Hagen, William N., DO

Altru Hospital
1200 S Columbia Rd
(701) 780-5000

- Anesthesiology (MD)
  Beauchamp, Bruce, DO
  Carcoana, Olivia V., MD
  Childs, Robert S., MD
  Eagleton, Kvame D., MD
  Haug, Jonathan S., MD
  Koltes-Edwards, Renee M., MD
  Mork, Kevin J., MD
  Parikh, Jitendra R., MD
  Parikh, Vinita J., MD
  Porot, Marc J., MD
  Pylman, Michael L., MD
  Schuster, Michael R., MD
  Severud, Robin, MD
  Staggs, Karen M., MD
- Cardiovascular Disease
  Aboufakher, Rabeea, MD
  Ahmed, Abdel M., MD
  Bekdash, Ismail L., MD
  Chebaclo, Mohamed, MD
  Kirnus, Mikhail, MD

Altru Hospital (cont.)

- Cardiovascular Disease (continued)
  Wynne, Joshua, MD
- Emergency Medicine
  Baba, Taketo, MD
  Boe, Christopher T., MD
  Fasbender, James R., MD
  Jackson, Walter O., MD
  Johnson, Joel L., MD
  Kaushik, Shivu, MD
  Knecht, Tony A., MD
  Lizardi, Pablo L., MD
  McKinnon, William G., MD
  Raymond, Jon F., MD
  Richardson, Shoshone A., MD
  Schanzenbach, Stewart H., MD
  Stull, Benjamin W., MD
  Temple, Kevin, MD
  Weiser, Steven J., MD
- Family Practice
  Bacolod, Ramesis J., MD
  Fasbender, James R., MD
  Foughty, Stephanie A., MD
  Gasparini, Andrew, MD
  Grewal, Surinder P., MD
  Hoverson, Fallon R., MD
  Knecht, Tony A., MD
  Kolberg, Jon B., MD
  Lantoria, Gerardo P., MD
  McKinnon, William G., MD
  Mees, Christopher J., MD
  Mees, Sara L., MD
  Metzger, Dana L., DO
  Millette, Keith W., MD
  Moore, Patrick F., MD
  Patel, Neel A., MD
  Raymond, Jon F., MD
  Roers Irmen, Stacy L., MD
  Weiser, Steven J., MD
- General Practice
  Henderson, Christopher P., MD
- General Surgery
  Charette, Scott D., MD
  Hape, Robin T., MD
  Khromachou, Tamim R., MD
- Geriatrics
  Aboufakher, Rabeea, MD
- Hand Surgery
  Leetun, Darin T., MD

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PARTICIPATING PHYSICIANS

Altru Hospital (cont.)

- Hand Surgery (continued)
  Meland, N. Bradly, MD
- Infectious Diseases
  Hargreaves, James E., DO
- Internal Medicine
  Aboufakher, Rabeea, MD
  Bekdash, Ismail L., MD
  Chebaclo, Mohamed, MD
  Consing, Raul P., MD
  Dalmi, Attila, MD
  Fredstrom, Rene' D., MD
  Go, Jason S., MD
  Hargreaves, James E., DO
  Jones, Janelle D., MD
  Kartham, Sunil, MD
  Kaushik, Shivu, MD
  Khan, Zaki H., MD
  Kirnus, Mikhail, MD
  Lizakowski, Laura A., MD
  Onyeka, Ikechukwu C., MD
  Pulagam, Srinivas R., MD
  Rusten, Heather W., DO
  Samimian Tehrani, Pezhman, MD
  Willardson, James D., MD
- Neurology
  Woodward, George, MD
- Obstetrics/Gynecology
  Brewster, Earl M., MD
  Brost, Brian C., MD
  Brown, Michael R., MD
  Rose, Carl H., MD
  Setness Hoefs, Tana, MD
  Wildey, Brian M., MD
- Ophthalmology
  Brockman, Ronald J., MD
  Byers, Norman T., MD
- Orthopedic Surgery
  Gardner, Jeremy J., MD
  Jones, Roger A., MD
  Leetun, Darin T., MD
  Martin, Jeffrey A., MD
  Robinson, Ben, MD
- Otology, Laryngology, Rhinology
  Beck, Gwendolyn J., MD
- Pathology
  Brown, Ann K., MD
  Cooley, A. Marvin, MD
  Koponen, Mark A., MD

Altru Hospital (cont.)

- Pathology (continued)
  Raymond, Laura A., MD
  Weiland, Timothy L., MD
- Pathology, Anatomy, Clinical Pathology
  Koponen, Mark A., MD
  Lockhart, Christopher, MD
- Pediatrics
  Adjekum, Gloria A., MD
  Dwarakanath, Kiran, MD
  Heise, Amber S., MD
  Mallipaddi, Pramod, MD
  Panda, Durga P., MD
  Zelewski, Susan K., MD
- Physical Medicine and Rehabilitation
  Caoili, Henri Rommel A., MD
- Plastic Surgery
  Meland, N. Bradly, MD
- Pulmonary Diseases
  Kaushik, Shivu, MD
- Radiology
  Aafedt, Bradley C., MD
  Dallum, Bernie J., MD
  Hagen, William N., DO
  Jahn, Paul, MD
  Owens, Charles A., MD
  Schmelka, Daniel R., MD
  Schreiner, Shawn A., MD
  Smith, Randall J., MD
  Treuer, Jody B., MD
- Thoracic Surgery
  Ali, Syed O., MD

Altru Main Clinic
1000 S Columbia Rd
(701) 780-5000

- Allergy
  Jacobsen, John J., MD
- Anesthesiology (MD)
  Beauchamp, Bruce, DO
- Cardiovascular Disease
  Aboufakher, Rabeea, MD
  Ahmed, Abdel M., MD
  Bekdash, Ismail L., MD
  Chebaclo, Mohamed, MD
  Kirnus, Mikhail, MD
  Rios, Rodrigo, MD
  Wijetunga, Mevan N., MD
  Wynne, Joshua, MD

Altru Main Clinic (cont.)

- Emergency Medicine
  Jackson, Walter O., MD
  Kaushik, Shivu, MD
- Endocrinology
  Brosseau, James D., MD
  Ryan, Casey J., MD
  Zaks, William J., MD
- Family Practice
  Berg, Jonathon H., MD
  Grewal, Surinder P., MD
  Metzger, Dana L., DO
- Gastroenterology
  Chu, Anthony G., MD
  Ojuro, Peter O., DO
  Wood, James R., MD
- General Surgery
  Belluk, Bradley P., MD
  Charette, Scott D., MD
  Debeltz, Donald J., MD
  Grieve, Billie J., MD
  Guttormson, Robert D., MD
  Hape, Robin T., MD
  Szlabick, Randolph E., MD
  Usatii, Anatolie A., MD
  Van Dyken, Irminne G., MD
- Geriatrics
  Brosseau, James D., MD
  Okundaye, Ebima C., MD
  Ryan, Casey J., MD
- Infectious Diseases
  Hargreaves, James E., DO
- Internal Medicine
  Aboufakher, Rabeea, MD
  Allen, Jon W., MD
  Bekdash, Ismail L., MD
  Breitwieser, Wayne R., MD
  Brosseau, James D., MD
  Chebaclo, Mohamed, MD
  Chu, Anthony G., MD
  Durrani, Qasim K., MD
  Fredstrom, Rene' D., MD
  Gautham, Shanta, MD
  Go, Jason S., MD
  Haastrup, Adetola T., MD
  Hargreaves, James E., DO
  Jerome, Peter S., MD
  Kaushik, Shivu, MD
  Khan, Fatima S., MD
  Khan, Zaki H., MD

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Altru Main Clinic (cont.)

- Internal Medicine (continued)
  Kirnus, Mikhail, MD
  Lizakowski, Laura A., MD
  Mudireddy, Uma M., MD
  Nausheen, Sara, MD
  Okundaye, Ebima C., MD
  Paulson, Rolf R., MD
  Peterson, Kirsten D., MD
  Rahman, Mohammed H., MD
  Ryan, Casey J., MD
  Samimian Tehrani, Pezhman, MD
  Wijetunga, Mevan N., MD
  Zaks, William J., MD
- Nephrology
  Haastrup, Adetola T., MD
  Okundaye, Ebima C., MD
  Rahman, Mohammed H., MD
- Neurological Surgery
  Larkins, Mark V., MD
  Lee, Janet, MD
  Oxenhandler, Donald C., MD
  Wood, Charles O., MD
- Neurology
  Hyder, Syed S., MD
  Novacek, Rebecca K., MD
  Patterson-Marshall, Bridget, MD
  Roller, Matthew J., MD
  Woodward, George, MD
- Obstetrics/Gynecology
  Andreson, Laura K., DO
  Barbot, Pierre A., MD
  Brewster, Earl M., MD
  Brost, Brian C., MD
  Brown, Michael R., MD
  Eickenbrock, Andrea M., MD
  Lays, Andrea R., MD
  Lessard, Collette R., MD
  Rose, Carl H., MD
  Setness Hoefs, Tana, MD
  Wildey, Brian M., MD
- Oncology
  Winchester, Marshall B., MD
- Ophthalmology
  Brockman, Ronald J., MD
  Byers, Norman T., MD
  Khairallah, Christian G., MD

North Dakota (cont.)
Grand Forks (cont.)

Altru Main Clinic (cont.)

- Optometrist
  Boettcher, Terra L., OD
  Schumacher, Jennifer E., OD
- Orthopedic Surgery
  Johnson, Robert A., MD
  Jones, Roger A., MD
  Lebrun, Christopher T., MD
  Peterson, Steven H., MD
  Robinson, Ben, MD
- Otology, Laryngology, Rhinology
  Beck, Gwendolyn J., MD
  Johnson, Alan W., MD
  Lapp, Gregory C., MD
  Yoshida, Glen Y., MD
- Pediatrics
  Adjekum, Gloria A., MD
  Ayoob, Abdur R., MD
  Cetta, Frank, MD
  Douvoyiannis, Miltiadis, MD
  Dwarakanath, Kiran, MD
  Heise, Amber S., MD
  Horner, Justin, MD
  Jacobsen, John J., MD
  Khan, Fatima S., MD
  Lunn, Eric R., MD
  Mack, Kenneth J., MD
  Mallipaddi, Pramod, MD
  Mishra, Ramesh, MD
  Panda, Durga P., MD
  Peterson, Jennifer M., MD
  Rios, Rodrigo, MD
  Shelton, Frank J., MD
  Sondrol, Lori A., MD
  Swank, Colleen M., MD
  Taggart, Nathaniel W., MD
  Zelewski, Susan K., MD
- Podiatry, Surgical Chiropody
  Britten, Joshua W., DPM
  Criswell, Samuel W., DPM
  Lo, Shoua, DPM
- Pulmonary Diseases
  Bansal, Arvind K., MD
  Breitwieser, Wayne R., MD
  Jerome, Peter S., MD
  Kaushik, Shivu, MD
  Mudireddy, Uma M., MD
- Radiology
  Aafedt, Bradley C., MD
  Aizpuru, Richard D., MD

North Dakota (cont.)
Grand Forks (cont.)

Altru Main Clinic (cont.)

- Radiology (continued)
  Ali, Azhar T., MD
  Arsenault, Todd M., MD
  Asis, Martin J., MD
  Baldwin, Matthew T., MD
  Baraga, Joseph J., MD
  Barkmeier, Jeffrey, MD
  Berens, Bruce M., MD
  Berger, Mark W., MD
  Block, Nathan D., MD
  Bowman Seitz, Tara S., MD
  Bretzman, Peter A., MD
  Bryan, Erich N., MD
  Bryson, Thomas C., MD
  Butler, Robert R., MD
  Carlson, Blake A., MD
  Carolan, Paul R., MD
  Caspers, John M., MD
  Castaneda, Wilfrido R., MD
  Chou, David, MD
  Dallum, Bernie J., MD
  Drake, David G., MD
  Edmonson, George R., MD
  Frecentese, Dominic F., MD
  Gilloon, Benjamin A., MD
  Goertzen, Timothy C., MD
  Grogan, Michael J., MD
  Hagen, William N., DO
  Hartigan, Andrew S., MD
  Hedlund, Laura J., MD
  Hommeyer, Steven C., MD
  Hood, Larissa L., MD
  Jackson, Christopher A., MD
  James, John, MD
  Johnson, Adam C., MD
  Kang, Edith H., MD
  Knoedler, John P., MD
  Knutzen, Anders M., MD
  Lambert, David P., MD
  Leon, Jorge A., MD
  Loe, Matthew J., MD
  Longley, Deborah G., MD
  Ludeman, Lucas B., MD
  Magnuson, Jeffrey E., MD
  Maguire, Frank P., MD
  May, Benjamin J., MD
  Muschenheim, Alexandra L., MD
  Omdahl, Bonnie B., MD
  Owens, Charles A., MD

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Altru Main Clinic (cont.)

- Radiology (continued)
  Page, Graydon T., MD
  Parrino, Suzanne S., MD
  Passe, Theodore J., MD
  Phelan, Jeffrey S., MD
  Prescott, Trisha R., MD
  Rathmann, Gregory A., MD
  Rhodes, Nicholas G., MD
  Rosenberg, Michael S., MD
  Ruzek, Kimberly A., MD
  Savcenko, Vladimir, MD
  Schmelka, Daniel R., MD
  Stevens, Kerry A., MD
  Sullivan, Patrick P., MD
  Tai, Angela W., MD
  Tashjian, Joseph H., MD
  Treuer, Jody B., MD
  Truman, Susan M., MD
  Tummala, Anuradha K., MD
  Veldman, Mark W., MD
  Weinmann, Robert H., MD
  Weisensee, Anne M., MD
  Wiese, Don E., MD
  Wittenberg, Keith H., MD
  Wold, Peter B., MD
- Thoracic Surgery
  Ali, Syed O., MD
  Bjorgaard, Barry A., MD
  Murphy, William, MD
  Rothberg, Martin L., MD
  Tadros, Nader B., MD
- Urology
  Highshaw, Ralph, MD
  Kiser, George C., MD
  Leichter, Eric S., MD
  Nicholson, Adam F., MD

Altru Professional Center
4440 S Washington St
(701) 780-5000

- Anesthesiology (MD)
  Eagleton, Kvame D., MD
  Haug, Jonathan S., MD
  Parikh, Vinita J., MD
  Porot, Marc J., MD
  Pylman, Michael L., MD
- Family Practice
  Bakke, Eric L., MD
  Calin, Cristina, MD

Altru Professional Center (cont.)

- Family Practice (continued)
  Chan, Paul J., MD
  Chaudhry, Aisha B., MD
  Deere, Joshua R., MD
  Eickman, Jeffrey J., MD
  Funk, Peter A., MD
  Gasparini, Andrew, MD
  Gaul, Joanne N., MD
  Gomez, Yvonne L., MD
  Greek, Gregory D., MD
  Grissom, Douglas W., MD
  Johnson, Eric L., MD
  Konzak-Jones, M. Kim, MD
  Lantoria, Gerardo P., MD
  Lyste, Derek J., MD
  Mees, Sara L., MD
  Millette, Keith W., MD
  Nazir, Asad, MD
  Nygard, Shane D., MD
  Philpot, Heidi, MD
  Riaz, Freaha, MD
  Roed, James R., MD
  Roers Irmen, Stacy L., MD
  Roxas, Rodrigo C., MD
  Roxas, Sharon K., MD
  Stevens, Kirk D., MD
  Svedjan-Walz, Hayley J., MD
  Walz, Joel D., MD
- Gastroenterology
  Chu, Anthony G., MD
  Ojuro, Peter O., DO
  Wood, James R., MD
- General Surgery
  Belluk, Bradley P., MD
  Guttormson, Robert D., MD
  Hape, Robin T., MD
  Van Dyken, Irminne G., MD
- Podiatry, Surgical Chiropody
  Britten, Joshua W., DPM
  Criswell, Samuel W., DPM
  Lo, Shoua, DPM

Altru Psychiatric Center
860 S Columbia Rd
(701) 780-6697

- Psychiatry (MD/DO)
  Bansal, Ashok K., MD
  Esprit, Lori J., MD
  Feldman, Ellen K., MD

Altru Psychiatric Center (cont.)

- Psychiatry (MD/DO) (continued)
  Madaram, Kondal R., MD

Altru Rehabilitation Center
1300 S Columbia Rd
(701) 780-2311

- Family Practice
  Fleissner, Paul, MD
  Kolberg, Jon B., MD
- Hand Surgery
  Leetun, Darin T., MD
  Meland, N. Bradly, MD
- Orthopedic Surgery
  Ansari, Aftab, MD
  Gardner, Jeremy J., MD
  Johnson, Robert A., MD
  Jones, Roger A., MD
  Kaltenbaugh, Orie E., MD
  Lebrun, Christopher T., MD
  Leetun, Darin T., MD
  Martin, Jeffrey A., MD
  Peterson, Steven H., MD
  Robinson, Ben, MD
  Stuart, Joseph J., MD
  Swope, Ryan W., DO
  Whitney, Frank E., MD
- Physical Medicine and Rehabilitation
  Belville, Kaylan L., DO
  Caoili, Henri Rommel A., MD
  Fleissner, Paul, MD
  Klava, William N., MD
  Podduturu, Vikram R., MD
  Vanness, William C., MD
- Plastic Surgery
  Meland, N. Bradly, MD
- Sports Medicine
  Haug, William O., MD

Altru Specialty Center
4500 S Washington St
(701) 732-7000

- Anesthesiology (MD)
  Carcoana, Olivia V., MD
  Childs, Robert S., MD
  Eagleton, Kvame D., MD
  Haug, Jonathan S., MD
  Koltes-Edwards, Renee M., MD
  Mork, Kevin J., MD
  Parikh, Jitendra R., MD

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Altru Specialty Center (cont.)

- Anesthesiology (MD) (continued)
  Schuster, Michael R., MD
  Severud, Robin, MD
  Staggs, Karen M., MD
- General Surgery
  Hape, Robin T., MD
- Internal Medicine
  Dalmi, Attila, MD
  Fredstrom, Rene' D., MD
  Kartham, Sunil, MD
  Khan, Zaki H., MD
  Onyeka, Ikechukwu C., MD
  Pulagam, Srinivas R., MD
  Rusten, Heather W., DO
  Samimian Tehrani, Pezhman, MD
  Willardson, James D., MD
- Orthopedic Surgery
  Gardner, Jeremy J., MD
  Johnson, Robert A., MD
  Leetun, Darin T., MD
- Physical Medicine and Rehabilitation
  Belville, Kaylan L., DO
  Caoili, Henri Rommel A., MD
  Podduturu, Vikram R., MD
- Podiatry, Surgical Chiropody
  Britten, Joshua W., DPM
  Criswell, Samuel W., DPM
  Lo, Shoua, DPM
- Radiology
  Chou, David, MD
  Dallum, Bernie J., MD
  Hood, Larissa L., MD
  James, John, MD

Aurora Urgent Care
2650 32nd Ave S
Ste D
(701) 732-2710

- Family Practice
  Magidow, Michael, MD
  Masa, Cedric B., MD
  Peterson, Mark G., MD
  Sullivan, Brian M., MD

Cancer Center of North Dakota
1451 44 Ave S Unit E
(701) 787-5800

- Internal Medicine
  Potti, Anil, MD
- Oncology
  Noyes, William R., MD
  Potti, Anil, MD
- Radiology
  Noyes, William R., MD

Center For Psychiatric Care
1451 44th Ave S Unit A
(701) 732-2500

- Family Practice
  Peterson, Timothy A., MD
- Psychiatry (MD/DO)
  Azhar, Muhammad N., MD
  Frank, Bradford L., MD
  Peterson, Thomas M., MD
  Pitera, Matthew J., MD
  Thomas, Janice M., MD
  Tsibulsky, Mark, MD

Center For Sleep LLC
3301 30 Ave S Ste 102
(701) 757-4800

- Internal Medicine
  Khosla, Seema, MD
- Pulmonary Diseases
  Khosla, Seema, MD

Face & Jaw Surgery Center
2845 36th Ave S
(701) 775-4444

- Oral Surgery
  Chahal, Omar C., DDS
  Crago, Charles A., DMD
  Gray, Jonathan R., DDS

Fercho Cataract & Eye Clinic
2100 S Columbia Rd
(701) 235-0561

- Ophthalmology
  Rodenbiker, Harold T., MD

Lamb Plastic Surgery
2100 S Columbia Rd
(701) 237-9592

- Plastic Surgery
  Lamb, Donald R., MD

Lemaster, Zachary OD
3601 32nd Ave S
(701) 787-8627

- Optometrist
  Lemaster, Zachary C., OD

Lifetime Vision Center
2900 S Columbia Rd
(701) 746-6745

- Optometrist
  Lappegaard, Cassandra J., OD
  Torkelson, Kari E., OD
  Yunker, Jeffery B., OD

Medical School Practice Support
501 N Columbia Rd
Stop 9037
(701) 777-4277

- Pediatrics
  Martsolf, John T., MD

Midwest Vision Centers
2800 S Columbia Rd
Ste 301
(701) 757-4100

- Optometrist
  Safratowich, Susan M., OD

Murie, Carol, OD
2650 32 Ave S Ste F3
(701) 757-3937

- Optometrist
  Murie, Carol A., OD

North Dakota Eye Clinic
3035 Demers Ave
(701) 775-3151

- Ophthalmology
  Gaul, Gerald N., MD
  Sczepanski, Mark L., MD
- Optometrist
  Dunham, Thomas, OD
  Lagodinski-Christian, Julie A., OD

North Dakota Surgery Center
3035 Demers Ave
(701) 738-4240

- Ophthalmology
  Gaul, Gerald N., MD
  Sczepanski, Mark L., MD

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PARTICIPATING PHYSICIANS

North Dakota (cont.)
Grand Forks (cont.)

Northeast Human Service Center
151 S 4th St Ste 401
(701) 795-3000

- Psychiatry (MD/DO)
  Feldman, Ellen K., MD
  Goodman, Patrick B., MD
  Hill, Steven M., MD
  McLean, Andrew J., MD
  Tevington, Kathryn, MD

Northern Valley Obstetrics & Gynecology
2810 17th Ave S
(701) 738-2004

- Obstetrics/Gynecology
  Sirany, Trudy D., MD
  Trottier, Rory D., MD
- Radiology
  Bakker, Hilton J., MD

Northland Christian Counseling Center
2315 Library Circle
(701) 795-8550

- Family Practice
  Lange, Marsha M., MD

Northland Family Physicians, LLC dba Aurora Clinic
1451 44th Ave S Unit F
(701) 732-2700

- Dermatology
  Treen, Ben M., MD
- Family Practice
  Magidow, Michael, MD
  Masa, Cedric B., MD
  Peterson, Mark G., MD
  Selland, Brian L., MD
  Sullivan, Brian M., MD

Plains Ear Nose Throat & Facial Plastic Surgery Inc
4350 S Washington
Ste 112
(701) 235-1924

- Otology, Laryngology, Rhinology
  Soine, Lesley A., MD

Retina Associates, PC
2534 17th Ave S
(701) 277-4699

North Dakota (cont.)
Grand Forks (cont.)

Retina Associates, PC (cont.)

- Internal Medicine
  Haynie, Gary D., MD
- Ophthalmology
  Haynie, Gary D., MD

Retina Consultants Ltd
4350 S Washington
Ste 112
(701) 775-7175

- Ophthalmology
  Johnson, Max R., MD

The Heart Institute of ND, Ltd
1191 S Columbia Rd
(701) 780-2000

- Cardiovascular Disease
  Chelliah, Noah N., MD
- Internal Medicine
  Chelliah, Noah N., MD

The Kidney and Hypertension Center
1451 44th Ave S Ste 112d
(701) 775-5800

- Family Practice
  Lange, Marsha M., MD
- Internal Medicine
  Velander, Byron A., MD
- Nephrology
  Rabadi, Khaled M., MD

Truyu Aesthetic Center
3165 Demers Ave
(701) 780-6219

- Dermatology
  Alhashim, Minhal H., MD
  Hoverson-Schott, Alyssa R., MD
  Muus, John H., MD
- Hand Surgery
  Meland, N. Bradly, MD
- Plastic Surgery
  Meland, N. Bradly, MD
  Muiderman, Anthony K., MD

UND Student Health Service
Mccannel Hall Room 100
2891 2nd Ave N Stop 9038
(701) 777-4791

- Family Practice
  Christenson, Mark J., MD
  Heinley, Timothy, MD

North Dakota (cont.)
Grand Forks (cont.)

UND Student Health Service (cont.)

- Family Practice (continued)
  Jensen, Warren C., MD

Valley Bone and Joint Clinic
3035 Demers Ave
(701) 746-7521

- Family Practice
  Kruger, Michael S., MD
- Orthopedic Surgery
  Adams, Edward L., MD
  Clayburgh, Robert H., MD
  Schall, David M., MD
  Thompson, Joffrey G., MD
- Podiatry, Surgical Chiropody
  Miller, John C., DPM
- Rheumatology
  Cleland, Esperanza S., MD

Valley Health
360 Division Ave Ste 200
(701) 775-4251

- Family Practice
  Konzak-Jones, M. Kim, MD

Valley Oral & Facial Surgery, PC
1165 S Columbia Rd Ste C
(701) 772-7379

- Oral Surgery
  Petersen, Troy R., DMD
  Schneider, Rudy J., DMD
  Tanabe, Marcus B., DDS

Valley Vision Clinic, Ltd
2200 S Washington St
(701) 775-3135

- Optometrist
  Biberdorf, David H., OD
  Emmerich, Michael W., OD
  Hall, Lyle A., OD
  Jones, Avery T., OD
  Otto, Gregory C., OD
  Schaff, Jason M., OD
  Solseng, David C., OD

Viscito Family Medicine, PLLC
2750 26th St S Ste C
(701) 757-1999

- Family Practice
  Viscito, Matthew S., MD

Providers are subject to be added or terminated without notice.

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PARTICIPATING PHYSICIANS

North Dakota (cont.)

Grand Forks (cont.)

Woodmansee, James, OD dba Family Eye Care
3750 32nd Ave S Ste 109
(701) 780-8726

- Optometrist
  Woodmansee, James A., OD
  Zollinger, Rikson, OD

Guelph

Amg Cardiovascular Specialists Aberdeen
1200 N 7th St
(605) 622-2573

- Cardiovascular Disease
  Sidaway, Larry S., DO
- Internal Medicine
  Sidaway, Larry S., DO

Gwinner

Sanford Health Gwinner Clinic
69 Highway 13 W
(701) 678-2263

- Internal Medicine
  Nagala, Vani, MD
- Radiology
  Marsden, Richard J., MD

Sanford Health Gwinner Clinic
69 Hwy 13 W
(701) 678-2263

- Radiology
  Asheim, Jason, MD

Hankinson

Essentia Health Hankinson Clinic
501 Main Avenue South
(701) 242-7118

- Family Practice
  Jamsa Tollefson, Lisa J., MD
  Nelson, Susan K., MD
  Regmi, Suman R., MD
- Geriatrics
  Strand, Duane D., MD
- Internal Medicine
  Strand, Duane D., MD

North Dakota (cont.)

Harvey

Central Dakota Family Physicians
922 Lincoln Ave
(701) 324-4856

- Family Practice
  Nyhus, Charles D., MD
- Pediatrics
  Martine, Cynthia, MD

Harvey Clinic PC
110 9th St E
(701) 324-2396

- Obstetrics/Gynecology
  Lindemann, Alan R., MD

Kourajian, Steven, OD
901 Lincoln Ave
(701) 324-2154

- Optometrist
  Kourajian, Steven C., OD

St Aloisius Medical Center
325 E Brewster St
(701) 324-4651

- Family Practice
  Nyhus, Charles D., MD
- Internal Medicine
  Cowan, Hugh B., MD
- Pediatrics
  Martine, Cynthia, MD

Hazelton

Hazelton Clinic
343 Main St
(701) 782-4338

- General Practice
  Knecht, John F., MD

Hazen

Dakota Eye Institute
34 West Main
(701) 222-3937

- Ophthalmology
  Fortney, Aaron C., MD

Hazen Family Eyecare PC
34 W Main St
(701) 748-6533

- Optometrist
  Czywczynski, Derek D., OD

North Dakota (cont.)

Hazen (cont.)

Sakakawea Clinic
510 8th Ave NE
(701) 748-7266

- Family Practice
  Blacksmith, Michael R., DO
  Jackson, Orlan D., DO
  Kaspari, Thomas D., MD
  Zimmerman, Rodney L., MD

Sakakawea Hazen Clinic
517 8th Ave NE
(701) 748-2256

- Family Practice
  Blacksmith, Michael R., DO
  Zimmerman, Rodney L., MD

Sakakawea Medical Center
510 8th Ave NE
(701) 748-2256

- Family Practice
  Blacksmith, Michael R., DO
  Garman, Aaron M., MD
  Jackson, Orlan D., DO
  Jon-Klindworth, Jacinta, MD

Hettinger

West River Eye Center
1000 Highway 12
(701) 567-6133

- Optometrist
  Kludt, John F., OD

West River Health Services
1000 Highway 12
(701) 567-4561

- Family Practice
  Boschee, Tracy B., DO
  Houle, Catherine E., MD
  Jacobsen, Thomas E., MD
  Joyce, John P., MD
  Thorngren, Frank A., MD
  Wellman, Stacie M., MD
- General Practice
  Sheffield, Jennifer L., MD
- General Surgery
  Elder, William C., MD
- Geriatrics
  Hoerauf, Kent R., MD
  Willoughby, Brian G., MD

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING PHYSICIANS

North Dakota (cont.)
Hettinger (cont.)

West River Health Services (cont.)
- Internal Medicine
  Hoerauf, Kent R., MD
  Ranum, Joshua C., MD
  Willoughby, Brian G., MD
- Obstetrics/Gynecology
  Jacobsen, Thomas E., MD
- Pediatrics
  Ketterling, Ellen L., MD
  Ranum, Carrie Ann K., MD
- Podiatry, Surgical Chiropody
  Kilwein, Steven C., DPM
- Radiology
  Kristy, Mark S., MD

Hillsboro

Sanford Health Hillsboro Clinic
315 E Caledonia Ave
(701) 636-5311
- Family Practice
  Breen, Charles J., MD
  Luithle, Timothy J., MD
- Radiology
  Asheim, Jason, MD

Jamestown

Catalyst Medical Center, PC
2422 20th Street SW
(701) 365-8700
- Otology, Laryngology, Rhinology
  Mathison, Susan M., MD

Central Valley Health District
122 2nd Street NW
(701) 252-8130
- Emergency Medicine
  Jystad, Philip N., MD

Essentia Health Jamestown Clinic
2430 20th St SW
(701) 253-5300
- Anesthesiology (MD)
  Chan, Leslie, MD
- Cardiovascular Disease
  Jenny, Donald B., MD
- Family Practice
  Howden, Richard L., MD
  Torrance, James R., MD

North Dakota (cont.)
Jamestown (cont.)

Essentia Health Jamestown Clinic (cont.)
- General Surgery
  Cunningham, Crystal M., MD
  Meier, Mark A., MD
  Stone, James R., MD
  Wasemiller, Paul S., MD
- Internal Medicine
  Briggs, Michael S., MD
  Jenny, Donald B., MD
  Kapphahn, Samantha, DO
  Khanal, Binaya, MD
  Skogen, Jeffrey W., MD
  Tiwari, Sumit, MD
  Whitbeck, Matthew G., MD
- Nephrology
  Qarni, Ahmer H., MD
  Skogen, Jeffrey W., MD
- Oncology
  Mohammed Rafiyath, Shamudheen, MD
- Orthopedic Surgery
  Lantz, Steven W., MD
  Sehgal, Bantoo, MD
- Otology, Laryngology, Rhinology
  Belizario, Francisco Y., MD
  Buell, Brad R., MD
  Tsen, David W., MD
- Pediatrics
  Quanrud, Myra J., MD
- Podiatry, Surgical Chiropody
  Hofsommer, Lee A., DPM
  Kang, Jill, DPM
- Pulmonary Diseases
  Briggs, Michael S., MD
- Radiology
  Crider, Mitchell H., MD
- Sports Medicine
  Ostlie, Daniel K., MD
- Urology
  Khan Galzie, Sardar Mohammad Farhan, MD

Jamestown Eyecare
921 25 St SW
(701) 252-4415
- Optometrist
  Patzman, Taya M., OD

North Dakota (cont.)
Jamestown (cont.)

Jamestown Regional Medical Center
2422 20th St SW
(701) 252-1050
- General Surgery
  Mohs, Thomas J., MD
  Saunders, David S., MD
  Stone, James R., MD
- Obstetrics/Gynecology
  Barrett, Mary T., MD
  Hutchens, Thomas P., MD
  Stewart, Jeanne M., MD
- Orthopedic Surgery
  Dean, Michael T., MD
- Podiatry, Surgical Chiropody
  Harris, Manuel C., DPM

Jamestown Regional Medical Center /ER Physicians
2422 20th St SW
(701) 252-1050
- Family Practice
  Jonas, Roxanne L., MD
  Larson, Richard L., MD
  Martin, Richard E., MD
  McCarthy, John P., MD
  Mitzel, Fredrick, MD
  Omotunde, Joshua O., MD
- Geriatrics
  Mitzel, Fredrick, MD
- Internal Medicine
  Hasnain, Mohsin, MD
- Ophthalmology
  Larsen, Raymond L., MD
- Pediatrics
  Westrate, Kenneth J., MD
- Sports Medicine
  Mitzel, Fredrick, MD

Jamestown Regional Medical Center/Radiology
2422 20th St SW
(701) 252-1050
- Radiology
  Reddy, Madhusudhan P., MD
  Wade, Gary L., MD
  Walklett, William D., MD

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING PHYSICIANS

North Dakota (cont.)
Jamestown (cont.)

Larsen, Raymond, MD
916 5th Ave NE
(701) 252-9020

- Ophthalmology
  Larsen, Raymond L., MD

Lifetime Vision Source
300 2nd Ave NE
(701) 252-2020

- Optometrist
  Mathison, Tamara K., OD
  Motacek, Adam J., OD
  Motacek, Ashley M., OD
  Motacek, Lawrence J., OD
  Rene, Thomas J., OD

Matthys, Gary A., MD, Plc
904 5th Ave NE
(701) 241-9300

- Orthopedic Surgery
  Matthys, Gary, MD

Precision Diagnostic Services, Inc
2422 20 St SW
(701) 234-9667

- Internal Medicine
  Khosla, Seema, MD
- Pulmonary Diseases
  Khosla, Seema, MD

Professional Eyecare Center
210 10th St SE
(701) 252-5000

- Optometrist
  Frohlich, Douglas L., OD
  Fronk, Kent, OD

Sanford Health 2nd Ave Clinic
300 2nd Ave NE
(701) 251-6000

- Family Practice
  Brickner, Derek M., MD
  Johnson, Larry E., MD
  Jystad, Philip N., MD
  Mathison, David, MD
  McMillan, William K., MD
  Skari, Bradly, MD
- Obstetrics/Gynecology
  Klemin, Peter L., MD

North Dakota (cont.)
Jamestown (cont.)

Sanford Health 2nd Ave Clinic
300 2 Ave NE
(701) 251-6000

- Orthopedic Surgery
  Norberg, Jon D., MD
- Peripheral Vascular Diseases Or Surgery
  Reil, Todd, MD
- Radiology
  Asheim, Jason, MD

Sanford Health Hearing Center
300 2nd Ave NE
(701) 252-4100

- Internal Medicine
  Mahale, Adit, MD
- Nephrology
  Mahale, Adit, MD

Sanford Health Jamestown Clinic
904 5th Ave NE
(701) 253-4000

- Cardiovascular Disease
  Clardy, David J., MD
  Manjunath, Heeraimangalore S., MD
- Dermatology
  Holzwarth, Ryan L., MD
- Family Practice
  Andersen, Jeffrey B., MD
  Brickner, Derek M., MD
  Johnson, Larry E., MD
  Jystad, Philip N., MD
  Mathison, David, MD
  McMillan, William K., MD
  Muhs, David M., MD
  Schatz, Sarah, MD
  Skari, Bradly, MD
  Sorlie, Mandy, MD
- General Surgery
  Maier, Steven C., MD
- Internal Medicine
  Geier, Debra A., MD
  Mahale, Adit, MD
  Manjunath, Heeraimangalore S., MD
- Nephrology
  Mahale, Adit, MD
- Neurology
  Faber, Kevin M., MD

North Dakota (cont.)
Jamestown (cont.)

Sanford Health Jamestown Clinic (cont.)

- Obstetrics/Gynecology
  Dahl, Stephanie K., MD
- Oncology
  Gross, Gerald G., MD
- Ophthalmology
  Jordan, Andrew A., MD
- Physical Medicine and Rehabilitation
  Klava, William N., MD
- Podiatry, Surgical Chiropody
  Anderson, Brad C., DPM
  Arness, Richard E., DPM
- Psychiatry (MD/DO)
  Karaz, Samy, MD
- Radiology
  Marsden, Richard J., MD
- Urology
  Toni, Conrad, MD

Sanford Health Jamestown Clinic
904 5th Ave NE
(701) 253-4000

- Endocrinology
  Dahl, Stephanie K., MD
- Internal Medicine
  Mahale, Adit, MD
  Terstriep, Shelby, MD
- Nephrology
  Mahale, Adit, MD
- Obstetrics/Gynecology
  Dahl, Stephanie K., MD
- Oncology
  Terstriep, Shelby, MD
- Orthopedic Surgery
  Norberg, Jon D., MD
- Peripheral Vascular Diseases Or Surgery
  Reil, Todd, MD
- Physical Medicine and Rehabilitation
  Klava, William N., MD
- Psychiatry (MD/DO)
  Karaz, Samy, MD
- Radiology
  Asheim, Jason, MD
  Marsden, Richard J., MD

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING PHYSICIANS

North Dakota (cont.)
Jamestown (cont.)

South Central Human Service Center
520 3rd St NW
(701) 253-6300

- Psychiatry (MD/DO)
  McLean, Andrew J., MD
  Robles, Maria Diana E., MD

Kenmare

Colby, David, OD
28 2nd St NW
(701) 385-4004

- Optometrist
  Colby, David P., OD

Kenmare Health Center
307 1st Ave NW
(701) 385-4283

- Emergency Medicine
  Nelson, John G., MD
- Family Practice
  Oni, Olubukola O., MD
- Podiatry, Surgical Chiropody
  Racz, Roger S., DPM

Killdeer

St Josephs Hospital/Killdeer Clinic
150 Central Ave N
(701) 764-5822

- Emergency Medicine
  Cassidy, Michael L., MD
- Pediatrics
  Ahmed, Ibrahim M., MD

Kulm

Wishek Rural Health Clinic/Kulm
4 First Ave SE
(701) 647-2345

- Family Practice
  Kosiak, Donald J., MD
  Oliveira-Filho, Edgar K., MD
  Patel, Suresh K., MD
- General Practice
  Vegiraju, Thammi R., MD
- Internal Medicine
  Thirumala Reddy, Joseph R., MD

North Dakota (cont.)
Lamoure

Sanford Health Lamoure Clinic
100 1st Ave SW Ste 2
(701) 883-5048

- Internal Medicine
  Nagala, Vani, MD
- Radiology
  Asheim, Jason, MD
  Marsden, Richard J., MD

Langdon

Cavalier County Memorial Hospital
909 2nd St
(701) 256-6120

- Family Practice
  Hutchison, Rose E., MD
  Khromachou, Tamim R., MD
  Magidow, Michael, MD
  Noyes, Randal H., DO
  Patel, Suresh K., MD
  Peterson, Mark G., MD
  Selland, Brian L., MD
- General Surgery
  Khokha, Inder V., MD
- Orthopedic Surgery
  Schall, David M., MD
- Psychiatry (MD/DO)
  Peterson, Thomas M., MD

CCMH Clinic
901 2nd St
(701) 256-6120

- Family Practice
  Hutchison, Rose E., MD
  Khromachou, Tamim R., MD
  Magidow, Michael, MD
  Noyes, Randal H., DO
  Patel, Suresh K., MD
  Peterson, Mark G., MD
  Selland, Brian L., MD
- Infectious Diseases
  Hargreaves, James E., DO
- Internal Medicine
  Hargreaves, James E., DO

Eklof, Richard, OD
324 9th Ave
(701) 256-2269

- Optometrist
  Eklof, Richard H., OD

North Dakota (cont.)
Lidgerwood

Sanford Health Lidgerwood Clinic
21 Wiley Ave S
(701) 538-4189

- Internal Medicine
  Nagala, Vani, MD
- Radiology
  Marsden, Richard J., MD

Sanford Health Lidgerwood Clinic
21 Wiley Ave S
(701) 538-4189

- Radiology
  Asheim, Jason, MD

Linton

Dakota Eye Institute
100 Broadway N
(701) 222-3937

- Optometrist
  Balliet, Paul, OD
  Otteson, Guy G., OD
  Otteson, Kyle M., OD

Linton Hospital
518 N Broadway
(701) 254-4511

- General Practice
  Knecht, John F., MD

Linton Medical Center
511 Elm Ave
(701) 254-4531

- General Practice
  Knecht, John F., MD
- General Surgery
  Khokha, Inder V., MD

Lisbon

Essentia Health Lisbon Clinic
819 Main St
(701) 683-4134

- Family Practice
  Diegel, Tanya L., DO
- General Surgery
  Mohs, Thomas J., MD
  Wasemiller, Paul S., MD
- Podiatry, Surgical Chiropody
  Hofsommer, Lee A., DPM
- Radiology
  Crider, Mitchell H., MD
  Crowe, Christopher H., MD

Providers are subject to be added or terminated without notice.

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PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING PHYSICIANS

North Dakota (cont.)
Lisbon (cont.)

Essentia Health Lisbon Clinic (cont.)
- Urology
  Strinden, Steven P., MD

Family Medical Clinic, PC
10 9th Ave E
(701) 683-4711
- Family Practice
  Sheets-Olson, Barbara A., MD

Fercho Cataract & Eye Clinic
17 11 Ave W
(701) 235-0561
- Ophthalmology
  Rodenbiker, Harold T., MD

Lisbon Area Health Service-ER
905 Main St
(701) 683-6400
- Emergency Medicine
  Topouzian, Keri B., DO
- Family Practice
  Fernandez, Oscar O., MD
  Loperena, Rudolf, MD
- General Practice
  Bermudez, Christopher J., MD
- General Surgery
  Fernandez, Oscar O., MD

Lisbon Area Health Services
905 Main St
(701) 683-6400
- Emergency Medicine
  Topouzian, Keri B., DO
  Wiltse, Richard J., MD
- Family Practice
  Crowley, Lana R., MD
  Gustafson, Jean, MD
  Martin, Richard E., MD
  Michaud, Brian S., DO
  Mitzel, Fredrick, MD
  Overvold, Angel D., DO

Lisbon Vision Center, P.C.
17 11th Ave W
(701) 683-5815
- Optometrist
  Mairs, Corey R., OD

North Dakota (cont.)
Lisbon (cont.)

Sanford Health Lisbon Clinic
102 10th Ave W
(701) 683-2214
- Internal Medicine
  Nagala, Vani, MD
- Podiatry, Surgical Chiropody
  Arness, Richard E., DPM

Sanford Health Lisbon Clinic
102 10th Ave W
(701) 683-2241
- Radiology
  Mickelson, Daniel G., MD

Maddock

Heart of America Johnson Clinic Maddock
301 Roosevelt Ave
(701) 438-2555
- Family Practice
  Fernandez, Oscar O., MD
  Kremer, Ashely J., MD
  Schoneberg, Steven B., MD
  Seiler, Hubert L., MD
- General Surgery
  Fernandez, Oscar O., MD
- Geriatrics
  Seiler, Hubert L., MD

Mandan

Bis-Man Eyecare Associates
1000 Old Red Trail
(701) 663-0012
- Optometrist
  Borstad, Josh E., OD
  Erhardt, Jason D., OD
  Neumiller, Joel D., OD

Dakota Physical Therapy, PC
2004 Twin City Dr
(701) 667-0745
- Ambulatory Surgical Center
  Dakota Physical Therapy, PC

Eyecare Professionals
113 3rd Ave NW
(701) 663-2020
- Optometrist
  Helmers, James A., OD
  Helmers, John N., OD
  Long, Daniel J., OD

North Dakota (cont.)
Mandan (cont.)

Grube Retina Clinic, PC
107 3rd Ave NW
(701) 751-2131
- Ophthalmology
  Grube, Thomas J., MD

Regional Medical Center
2008 Twin City Dr
(701) 667-1000
- Family Practice
  Addy, Boyd F., MD

Sanford East Mandan Clinic
102 Mandan Ave
(701) 667-5000
- Family Practice
  Johnson, Anthony T., MD
  Thorson, Thomas A., MD
  Wolf, Terry L., DO
- Pathology
  Fisher, Catherine P., MD
- Radiology
  Fogarty, Edward F., MD
  Iwamoto, Matthew M., MD

Sanford North Mandan Clinic
910 18th St NW
(701) 667-5100
- Family Practice
  Beckwith, Jennifer A., MD
  Belzer-Curl, Gretchen G., MD
  Klein, Dale A., MD
  Lange, Darwin K., MD
  Shultz Piatz, Kinsey A., MD
- General Surgery
  Boyko, Kimber M., MD
- Pathology
  Fisher, Catherine P., MD
- Peripheral Vascular Diseases Or Surgery
  Boyko, Kimber M., MD
- Psychiatry (MD/DO)
  Belzer-Curl, Gretchen G., MD
- Thoracic Surgery
  Boyko, Kimber M., MD

St Alexius Mandan Clinic North
2500 Sunset Drive NW
(701) 667-4600
- Family Practice
  Archuleta, Laura J., MD

Providers are subject to be added or terminated without notice.

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PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING PHYSICIANS

North Dakota (cont.)

Mandan (cont.)

St Alexius Mandan Clinic North (cont.)
- Family Practice (continued)
  Bramati, Patricia, MD
  Froelich, Joy A., MD
  McDonough, Denise M., MD
  Price, Brandon J., DO

Vision Source Mandan
107 6th Ave NW
(701) 663-0313
- Optometrist
  Little, Daniel C., OD
  Schauer, Brittany G., OD
  Schmidt, Terry D., OD

Mayville

Bagan Strinden Vision
42 6 Ave SE
(701) 293-8242
- Ophthalmology
  Strinden, Thomas I., MD

Bagan Strinden Vision
34 Center Ave Suite B
(701) 293-8242
- Ophthalmology
  Strinden, Thomas I., MD

Rexine, Michael OD PC
34 Center Ave S
(701) 786-2666
- Optometrist
  Rexine, Michael K., OD

Sanford Mayville
600 1st St SE
(701) 786-4500
- Family Practice
  Andersen, Jeffrey B., MD
  Ostlie, Jane, MD
  Skari, Bradly, MD
- General Surgery
  Garcia, Luis A., MD
- Internal Medicine
  Mehus, James, MD
- Neurology
  Faber, Kevin M., MD
- Obstetrics/Gynecology
  Lesteberg, Keith G., MD

North Dakota (cont.)

Mayville (cont.)

Sanford Mayville (cont.)
- Pediatrics
  Mehus, James, MD
- Podiatry, Surgical Chiropody
  Arness, Richard E., DPM
- Urology
  Sawchuk, Theodore J., MD

Sanford Mayville
600 1st Street SE
(701) 786-4500
- Family Practice
  Andersen, Jeffrey B., MD
  Berntson, Mark E., MD
  Lokensgard Pierce, Karin A., MD
  Ostlie, Jane, MD
  Stayman, Mathew L., MD
- General Surgery
  Fabian, Matthew W., DO
  Garcia, Luis A., MD
  Stover, David A., MD
- Internal Medicine
  Mehus, James, MD
- Neurology
  Faber, Kevin M., MD
- Obstetrics/Gynecology
  Lesteberg, Keith G., MD
  McCann, Michelle, MD
- Orthopedic Surgery
  Prochaska, Vern, MD
- Pediatrics
  Mehus, James, MD
- Podiatry, Surgical Chiropody
  Arness, Richard E., DPM
  Cullen, Nicole, DPM
- Radiology
  Asheim, Jason, MD
  Marsden, Richard J., MD
- Urology
  Sawchuk, Theodore J., MD

McClusky

Northland Community Health Center- McClusky
122 2nd St E
(701) 363-2296
- Family Practice
  Vaagen, Jeffrey L., MD

North Dakota (cont.)

McVille

Dunham, Thomas, OD
116 Main St
(701) 322-5111
- Optometrist
  Dunham, Thomas, OD

Nelson County Health System Clinic
108 N Main St
(701) 322-4347
- Family Practice
  Czarnik, Tamarack R., MD
  Martinson, Erling D., MD

Michigan

Hagen, Boyd, MD dba Michigan Community Medical Clinic
115 South Street
(701) 259-2119
- General Practice
  Hagen, N Boyd, MD

Milnor

St Francis Healthcare Campus dba Milnor Clinic
401 Main St
(701) 427-5317
- Family Practice
  Emery, Patrick E., MD
  Mayo, William M., MD
- Orthopedic Surgery
  Johnson, James F., MD

Minot

Bradley, Jason L, OD
207 S Main St
(701) 852-5626
- Optometrist
  Bradley, Jason L., OD

Center For Family Medicine/Minot
1201 11th Ave SW
(701) 858-6700
- Emergency Medicine
  Olson, Paul D., MD
- Family Practice
  Best, Lyle G., MD
  Devlin, Kwanza N., MD
  Krohn, Kimberly T., MD
  Olson, Paul D., MD
  Schlecht, Kristina A., MD

Providers are subject to be added or terminated without notice.

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PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING PHYSICIANS

Center For Family Medicine/Minot (cont.)
- Family Practice (continued)
  Stripe, Stephen C., MD
  Talley, Wade, MD
  Thomas-Eapen, Neena E., MD

Dakota Boys Ranch
6301 19th Ave NW
(701) 857-4224
- Psychiatry (MD/DO)
  Martinsen, Wayne L., MD

Dakota Family Services
6301 19th Ave NW
(701) 837-6508
- Internal Medicine
  Mattson, Steven R., MD
- Pediatrics
  Mattson, Steven R., MD
- Psychiatry (MD/DO)
  Martinsen, Wayne L., MD

Deschamp, Cameron, OD, PC
3900 S Broadway
(701) 839-8726
- Optometrist
  Deschamp, Cameron T., OD
  Hjelden, Melissa P., OD

Dr Jaime L Haaland OD PC
10 1st St SW
(701) 839-5000
- Optometrist
  Haaland, Jaime L., OD

Erickson, Arthur W, OD
2400 SW 10th St
(701) 858-0849
- Optometrist
  Erickson, Arthur W., OD

Face & Jaw Surgery Center
2615 Elk Drive Suite 3
(701) 852-3421
- Oral Surgery
  Afshar, Andrew A., DDS
  Deatherage, Joseph R., DMD
  Glosenger, Jeremiah J., DDS

Farah, Samir, MD
20 Burdick Expy W
Ste 500
(701) 852-5236
- Endocrinology
  Farah, Samir I., MD
- Internal Medicine
  Farah, Samir I., MD

First District Health Unit Family Planning
801 11th Ave SW
(701) 852-1376
- Emergency Medicine
  Jethwa, Ratilal N., MD
- Family Practice
  Jethwa, Ratilal N., MD

Great Planes Reproductive Centers, PA
400 Burdick Expy E
(800) 508-9763
- Endocrinology
  Corfman, Randle S., MD

Jethwa, Ratilal, MD
20 W Burdick Expwy #302
(701) 852-4720
- Emergency Medicine
  Jethwa, Ratilal N., MD
- Family Practice
  Jethwa, Ratilal N., MD

Johnson Eyecare and Eyewear
1525 31 Ave SW Suite E
(701) 857-6050
- Optometrist
  Ahmann, Jessica, OD
  Johnson, Darin L., OD

Mattson, Steven, MD
831 S Broadway #102
(701) 857-4224
- Internal Medicine
  Mattson, Steven R., MD
- Pediatrics
  Mattson, Steven R., MD

Midwest Vision Centers
2400 SW 10th St
(701) 852-6836

Midwest Vision Centers (cont.)
- Optometrist
  Lawson-Kopp, Wendy K., OD

Neck & Back Pain Clinic
315 Main St S Ste 102
(701) 839-6664
- Physical Medicine and Rehabilitation
  Mehta, Rajnikant L., MD

North Central Human Service Center
1015 S Broadway Ste 18
(701) 857-8500
- Psychiatry (MD/DO)
  Eick, Thomas J., DO
  McLean, Andrew J., MD
  Schield, Laura B., MD

Northland Community Health Center
1600 2nd Ave SW Ste 19
(701) 377-4758
- Family Practice
  Vaagen, Jeffrey L., MD
- Internal Medicine
  Vaagen, Jeffrey L., MD

Nyre, Robert, OD
1100 N Broadway Ste 110
(701) 852-2020
- Optometrist
  Linster, Carolyn A., OD
  Nyre, Robert P., OD

Optical Outlook
1100 31st Ave SW Ste 2
(701) 837-0022
- Optometrist
  Moen, Bruce A., OD

Psychiatric Services, PC
601 18th Ave SE Ste 101
(701) 852-8798
- General Practice
  Bell, Lloyd M., DO
- Psychiatry (MD/DO)
  Bell, Lloyd M., DO

Providers are subject to be added or terminated without notice.

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PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING PHYSICIANS

Sanford Health Occupational Medicine Clinic
801 21st Avenue SE
(701) 839-5902

- Emergency Medicine
  Blanchard, Joel H., MD
- Family Practice
  Blanchard, Joel H., MD

Sanford Health Walk-In Clinic
801 21st Ave SE
(701) 838-3150

- Cardiovascular Disease
  Reddy, Karthik, MD
- Emergency Medicine
  Grooms, Paul G., DO
- Family Practice
  Blanchard, Joel H., MD
  Bossort, James B., MD
  Evans, Patrick J., MD
  Hoggarth, Tonia L., MD
  Klop, Krissondra L., DO
  Moen, R J., MD
  Patel, Niral R., MD
  Rauta, Olimpia, MD
  Wilson Hall, Nicole, DO
  Wyman, Allen E., MD
- Internal Medicine
  Reddy, Karthik, MD
- Pathology
  Fisher, Catherine P., MD
- Pediatrics
  Cleveland, Chris, MD
- Radiology
  Fogarty, Edward F., MD
  Iwamoto, Matthew M., MD
  McIntee, Michael J., MD
  Miller, John A., MD
  Tello-Skjerseth, Christina, MD

St Alexius Clinic
2700 8th St NW
(701) 857-8000

- Cardiovascular Disease
  Mahr, Nicholas C., MD
  Mathew, Boban, MD
- Internal Medicine
  Monteau, Lance M., MD
  Paulo, Monica T., MD

St Alexius Clinic (cont.)

- Obstetrics/Gynecology
  Hutchens, Thomas P., MD
  Witt, John M., MD
- Pulmonary Diseases
  Paulo, Monica T., MD

The Bone & Joint Center, PC
1600 2nd Ave SW Ste 19
(701) 857-8000

- Hand Surgery
  Pierce, Troy D., MD
- Neurological Surgery
  Moore, Michael R., MD
- Orthopedic Surgery
  Ackerman, Duncan B., MD
  Hart, Mark B., MD
  Moore, Michael R., MD
  Pierce, Troy D., MD

The Cortino Group Ltd , LLC
2400 10 St SW Ste 418
(701) 852-7588

- Family Practice
  Corpus, Ian Manuel G., MD
- General Surgery
  Corpus Jr, Eduardo T., MD

Total Transformation Clinic
317 16th St NW
(701) 837-9900

- Internal Medicine
  Madziwa, Felistas H., MD

Trinity Health dba Oral & Facial Surgery Center
307 5th Ave SE
(701) 857-2600

- Oral Surgery
  McMahon, Michael G., DDS

Trinity Health dba Trinity Riverside Campus
1900 8th Ave SE
(701) 857-5998

- Psychiatry (MD/DO)
  Colletti, Richard A., MD
  Dallolio, Michael J., MD
  Evans, Booker T., MD
  Martinsen, Wayne L., MD
  Meunier, Ronny P., MD
  Richards, Deidre L., MD

Trinity Health dba Trinity Riverside Campus (cont.)

- Psychiatry, Neurology
  Johnson, Robin, MD
  Sheth, Pravina B., MD
  Warhol, Peter J., MD

Trinity Hospitals
1 Burdick Expressway W
(701) 857-5252

- Psychiatry (MD/DO)
  Macey, Helen L., MD

Trinity Medical Group
831 S Broadway
(701) 857-5650

- Endocrinology
  Sethi, Muhammad, MD
- Family Practice
  Fife, Todd, MD
  Mullin, Sarah L., MD
- Internal Medicine
  Kim, Kwanghee, MD
  Makoni, Stephen, MD
  Sheehan, John E., MD
- Obstetrics/Gynecology
  Billings, David A., MD
  Madland, William T., MD
  Nordell, Margaret C., MD
  Schaffner, Carol M., MD
- Oncology
  Makoni, Stephen, MD
  Watanaboonyakhet, Patanit, DO
- Radiation Therapy
  Collins, Kevin B., MD
- Radiology
  Grant, Michael, MD

Trinity Medical Group
407 3rd Street SE
(701) 857-5871

- Anesthesiology (MD)
  Gauthier, Robert L., MD
  He, Chaoying, MD
  Lagrone, Robert A., MD
  Lewis, Aaron D., MD
  Lin, Steven C., MD
  Shidyak, Gus E., MD
  Smith, Lakesha S., MD
  Smolik, Martin J., MD
  Tin-Maung, Brian, MD

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PARTICIPATING PHYSICIANS

Trinity Medical Group (cont.)

- Anesthesiology (MD) (continued)
  Torpy, Janet M., MD
- Cardiovascular Disease
  Rothberg, Martin L., MD
- Family Practice
  Young, Marcel P., MD
- Gastroenterology
  Cader, Rukshana N., MD
  Chaudhary, Ayaz J., MD
- General Surgery
  Brandt, Jerel J., DO
  Jun, Hong J., MD
  Shipley, Frank E., MD
  Wease, Gary, MD
- Nephrology
  Ho, Warren R., MD
- Neurological Surgery
  Eichler, Marc E., MD
  Kennedy, Roger F., MD
- Obstetrics/Gynecology
  Amsbury, John D., DO
  Bedell, Timothy H., MD
- Ophthalmology
  Bouchard Kindy, Evelyne B., MD
  Jacobs, David J., MD
  Sanke, Robert F., MD
  Williams, Darrell P., MD
  Wolsky, Chad J., MD
- Orthopedic Surgery
  Joshi, Ravindra, MD
  Kearney, Sean P., MD
  Macleod, Paul R., MD
  Muawwad, Rafik, MD
  Scott, Earl D., MD
  Uthus, David M., MD
- Otology, Laryngology, Rhinology
  Noel, Mark D., DO
  Schmitt Jr, John E., MD
  Sule, Sandeep D., MD
  Thomas, Robert G., MD
- Plastic Surgery
  Kochevar, Andrew, MD
- Psychiatry (MD/DO)
  Colletti, Richard A., MD
  Macey, Helen L., MD
  Meunier, Ronny P., MD
- Psychiatry, Neurology
  Drexler, Jeffrey A., MD
  Gee, Dennis H., MD

Trinity Medical Group (cont.)

- Psychiatry, Neurology (continued)
  Johnson, Robin, MD
  Sheth, Pravina B., MD
- Thoracic Surgery
  Phillips, Christopher C., MD
- Urology
  Akhter, Saeed, MD
  Carmack, Adrienne J., MD
  Chiang, George J., MD
  Chinn, Douglas O., MD
  Jang, Thomas L., MD
  Kader, Andrew K., MD
  Nelson, Dayne M., MD
  Neto, Manuel V., MD
  Van Bibber, Michael, MD
  Yeung, Chi Kong, MD
  Zorn, Kevin C., MD

Trinity Medical Group
400 Burdick Expy E
(701) 857-7387

- Allergy
  Reder, Michael W., MD
- Cardiovascular Disease
  Chikwendu, Valentine C., MD
  Dodin, Emad M., MD
  Percell, Robert L., MD
  Turk, Samir M., MD
- Family Practice
  Albertson, Marisa A., MD
  Bansode, Gaurav A., MD
  Crowley, Lana R., MD
  Heninger, Robert D., MD
  Hurly, Mary T., MD
  Kihle, Kenneth W., MD
  Ree, Cheryl R., MD
  Reeve, Howard E., MD
  Roach, Bruce L., MD
  Smothers, Joe L., DO
- Gastroenterology
  Cader, Rukshana N., MD
  Chaudhary, Ayaz J., MD
- General Practice
  Kihle, Kenneth W., MD
- Geriatrics
  Reeve, Howard E., MD
- Hand Surgery
  Cumani, Blendi C., MD

Trinity Medical Group (cont.)

- Hand Surgery (continued)
  Williams, Daniel C., MD
- Infectious Diseases
  Alkhalaf, Abdulhamid, MD
  Nwaigwe, Casmiar I., MD
- Internal Medicine
  Chaudhary, Ayaz J., MD
  Chikwendu, Valentine C., MD
  Justino, Edmundo S., MD
  Lowe, Douglas L., MD
  Percell, Robert L., MD
  Pugatch, Bruce S., MD
  Suliman, Faroug Y., MD
  Turk, Samir M., MD
- Nuclear Medicine
  Keller, Kenneth J., MD
- Obstetrics/Gynecology
  Amsbury, John D., DO
  Bedell, Heather L., MD
  Bedell, Timothy H., MD
  Bozeman, James D., DO
- Pediatrics
  Cadwalader, Ann M., MD
  Holland, Michael J., MD
  Jones, Frederick W., MD
  Messerly, Melissa M., MD
  Montanez Concepcion, Ana M., MD
  Osuala, Friday, MD
  Peterson, Diana L., MD
  Stanga, Sean D., MD
  Tvedt-Davis, Heather J., MD
  Udekwe, Anthony A., MD
- Podiatry, Surgical Chiropody
  Albers, Aaron J., DPM
  Racz, Roger S., DPM
  Williams, Tyson D., DPM
- Radiation Therapy
  Kamba, Thompson T., MD
- Radiology
  Haddon, Margaret J., MD
  Hanjani, Farzodd E., MD
  Keller, Kenneth J., MD
  Lewis, Scott B., MD
  Miller, James A., MD
  Naidu, Sridhar, DO
  Serebrennik, Mikhail, MD
  Turneau, Kevin J., MD

Providers are subject to be added or terminated without notice.

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PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING PHYSICIANS

Trinity Medical Group (cont.)

- Rheumatology
  Diri, Erdal, MD
- Urology
  Akhter, Saeed, MD
  Chiang, George J., MD
  Chinn, Douglas O., MD
  Jang, Thomas L., MD
  Kader, Andrew K., MD
  Neto, Manuel V., MD
  Van Bibber, Michael, MD

Trinity Medical Group
101 3rd Ave SW
(701) 857-5500

- Family Practice
  Mattern, Dawn D., MD
- General Surgery
  Brandt, Jerel J., DO
  Casey, Gregory D., MD
  Cassidy, Scott A., MD
  Jun, Hong J., MD
  Lee, Lane M., DO
  Shipley, Frank E., MD
  Wease, Gary, MD
- Oral Pathology
  Lee, Lane M., DO
- Orthopedic Surgery
  Benaissa, Rafik, MD
  Joshi, Ravindra, MD
  Kindy, Alexandre S., MD
  Macleod, Paul R., MD
  Muawwad, Rafik, MD
  Scott, Earl D., MD
  Uthus, David M., MD
- Otology, Laryngology, Rhinology
  Gasser, Charles R., MD
  Noel, Mark D., DO
  Schmitt Jr, John E., MD
  Sule, Sandeep D., MD
  Thomas, Robert G., MD
- Pediatrics
  Carver, Thomas D., DO
  Moss, John E., MD
  Zak, Linda K., MD
- Thoracic Surgery
  Phillips, Christopher C., MD
  Shipley, Frank E., MD
- Urology
  Lee, Lane M., DO

North Dakota (cont.)
Minot (cont.)

Trinity Medical Group
20 Burdick Expressway W
(701) 857-5741

- Internal Medicine
  Durkin, Robert J., DO
  Verhey, Jeffrey T., MD
- Nephrology
  Ho, Warren R., MD
  Rohloff, Walter, MD
  Saffarian, Nasser, MD
- Neurological Surgery
  Corbett, Joseph E., MD
  Eichler, Marc E., MD
  Kennedy, Roger F., MD
- Neurology
  Kellenberger, Edward F., MD
  Kordlar, Bahram A., MD
  Lee, Kon Hweii, MD
  Robbie, Ahmed T., MD
  Said, Areen T., MD
- Psychiatry, Neurology
  Mosley, Anthony D., MD
  Wuthrich, Catherine H., MD
- Pulmonary Diseases
  Verhey, Jeffrey T., MD
- Urology
  Yeung, Chi Kong, MD

Trinity Medical Group
1 Burdick Expy W
(701) 857-5000

- Anesthesiology (MD)
  Charity, Lynette D., MD
  Sedlacek, Michael A., MD
  Smith, Lakesha S., MD
  Torpy, Janet M., MD
  Wu, Joanne, MD
- Cardiovascular Disease
  Chikwendu, Valentine C., MD
  Dodin, Emad M., MD
  Percell, Robert L., MD
  Turk, Samir M., MD
- Emergency Medicine
  Franks, Kevin T., DO
  Herington, Aaron C., MD
  Hoff, Ann M., MD
  Jackson, Walter O., MD
  Jethwa, Ratilal N., MD
  Kehoe, Cullen T., DO
  Kitagawa, Benji K., DO

North Dakota (cont.)
Minot (cont.)

Trinity Medical Group (cont.)

- Emergency Medicine (continued)
  Knutson, Scott E., MD
  Nelson, John G., MD
  Novey, Walter L., MD
  Olson, Paul D., MD
  Puetz, Catherine, MD
  Salaman, Erica, DO
  Sather, Jeffrey A., MD
  Stull, Benjamin W., MD
  Walters, Justin A., MD
  Zipin, Kevan M., MD
- Endocrinology
  Sethi, Muhammad, MD
- Family Practice
  Alkilani, Suhail, MD
  Bansode, Gaurav A., MD
  El Hoyek, Georges M., MD
  Gutierrez, Francisco, MD
  Kitagawa, Benji K., DO
  Knutson, Scott E., MD
  Padgett, Danial R., MD
  Pannu, Birpal R., MD
  Schmidt, James A., MD
  Talebdoost, Alex F., MD
  Young, Marcel P., MD
- Gastroenterology
  Cader, Rukshana N., MD
  Chaudhary, Ayaz J., MD
- General Practice
  Nasur, Ali M., MD
- General Surgery
  Brandt, Jerel J., DO
  Casey, Gregory D., MD
  Cassidy, Scott A., MD
  Jun, Hong J., MD
  Shipley, Frank E., MD
  Wease, Gary, MD
- Hand Surgery
  Cumani, Blendi C., MD
  Williams, Daniel C., MD
- Internal Medicine
  Abdalrhim, Ahmed D., MD
  Bartaula, Rajiv, MD
  Chikwendu, Valentine C., MD
  Durkin, Robert J., DO
  Gajanayaka, Ranil, MD
  Gharbi, Nael, MD
  Gharbi, Shazel, MD
  Khan, Amer Y., MD

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PARTICIPATING PHYSICIANS

Trinity Medical Group (cont.)

- Internal Medicine (continued)
  Lamichhane, Diman R., MD
  Madziwa, Felistas H., MD
  Mann, Amit, MD
  Mattson, Steven R., MD
  Norby, Alicia M., MD
  Pandove, Sandeep, MD
  Percell, Robert L., MD
  Singh, Rashpal, MD
  Turk, Samir M., MD
  Turneau, Kelly J., MD
  Verhey, Jeffrey T., MD
- Nephrology
  Ho, Warren R., MD
  Saffarian, Nasser, MD
- Neurological Surgery
  Corbett, Joseph E., MD
  Eichler, Marc E., MD
  Kennedy, Roger F., MD
- Neurology
  Kordlar, Bahram A., MD
  Lee, Kon Hweii, MD
  Robbie, Ahmed T., MD
  Said, Areen T., MD
- Nuclear Medicine
  Keller, Kenneth J., MD
- Obstetrics/Gynecology
  Amsbury, John D., DO
  Bedell, Timothy H., MD
  Billings, David A., MD
- Ophthalmology
  Bouchard Kindy, Evelyne B., MD
  Dicken, Robert A., MD
  Jacobs, David J., MD
  Sanke, Robert F., MD
  Williams, Darrell P., MD
  Wolsky, Chad J., MD
- Orthopedic Surgery
  Joshi, Ravindra, MD
  Kearney, Sean P., MD
  Kindy, Alexandre S., MD
  Macleod, Paul R., MD
  Muawwad, Rafik, MD
  Scott, Earl D., MD
  Uthus, David M., MD
- Otology, Laryngology, Rhinology
  Noel, Mark D., DO
  Schmitt Jr, John E., MD
  Sule, Sandeep D., MD

North Dakota (cont.)
Minot (cont.)

Trinity Medical Group (cont.)

- Otology, Laryngology, Rhinology (continued)
  Thomas, Robert G., MD
- Pathology
  Alakech, Badie, MD
  Jansen, Wayne L., MD
  Repp, Mark, MD
  Sigauke, Ellen, MD
- Pediatrics
  Cadwalader, Ann M., MD
  Holland, Michael J., MD
  Udekwe, Anthony A., MD
- Plastic Surgery
  Kochevar, Andrew, MD
- Psychiatry (MD/DO)
  Colletti, Richard A., MD
  Martinsen, Wayne L., MD
  Meunier, Ronny P., MD
  Richards, Deidre L., MD
- Psychiatry, Neurology
  Gee, Dennis H., MD
  Johnson, Robin, MD
  Mosley, Anthony D., MD
  Sheth, Pravina B., MD
  Warhol, Peter J., MD
  Wuthrich, Catherine H., MD
- Pulmonary Diseases
  Verhey, Jeffrey T., MD
- Radiation Therapy
  Kamba, Thompson T., MD
- Radiology
  Arov, Gregory, DO
  Chilcote, Wayne S., MD
  Grant, Michael, MD
  Haddon, Margaret J., MD
  Hanjani, Farzodd E., MD
  Keller, Kenneth J., MD
  Kramer, Michael K., MD
  Lewis, Scott B., MD
  Miller, James A., MD
  Naidu, Sridhar, DO
  Powell, Douglas, DO
  Serebrennik, Mikhail, MD
  Turneau, Kevin J., MD
  Vidovich, Danko V., MD
- Thoracic Surgery
  Phillips, Christopher C., MD
  Rothberg, Martin L., MD

North Dakota (cont.)
Minot (cont.)

Trinity Medical Group (cont.)

- Urology
  Akhter, Saeed, MD
  Carmack, Adrienne J., MD
  Chiang, George J., MD
  Chinn, Douglas O., MD
  Jang, Thomas L., MD
  Kader, Andrew K., MD
  Nelson, Dayne M., MD
  Neto, Manuel V., MD
  Van Bibber, Michael, MD
  Yeung, Chi Kong, MD
  Zorn, Kevin C., MD

Trinity Medical Group Anesthesiology
1 Burdick Expressway W
(701) 857-5124

- Anesthesiology (MD)
  Beauchamp, Bruce, DO
  Chan, Yieshan M., MD
  Gauthier, Robert L., MD
  He, Chaoying, MD
  Hill, Kenneth J., MD
  Kinyungu, Erick N., MD
  Lagrone, Robert A., MD
  Lewis, Aaron D., MD
  Lin, Steven C., MD
  Shidyak, Gus E., MD
  Smolik, Martin J., MD
  Tin-Maung, Brian, MD
  Wu, Joanne, MD

Trinity Medical Group South Ridge
1500 24th Ave SW
(701) 857-5343

- Anesthesiology (MD)
  Kinyungu, Erick N., MD
  Templer, Michael J., MD
- Dermatology
  Hunter, Jennifer L., MD
- Family Practice
  Young, Marcel P., MD
- Internal Medicine
  Mattson, Steven R., MD
- Plastic Surgery
  Kochevar, Andrew, MD

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PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING PHYSICIANS

North Dakota (cont.)
Minot (cont.)

Trinity Oral and Maxillofacial Reconstruction Center
2815 16th St SW Ste 100
(701) 857-2900

- Oral Surgery
  Ulloa, Juan J., DDS

Trinity Regional Eyecare/Minot Center
2815 16th St SW Ste 102
(701) 852-3500

- Ophthalmology
  Bouchard Kindy, Evelyne B., MD
  Jacobs, David J., MD
  Sanke, Robert F., MD
  Williams, Darrell P., MD
  Wolsky, Chad J., MD
- Optometrist
  Martinson-Redekopp, Jill R., OD
  Nelson, Shawn P., OD
  Schimke, Bradley J., OD
- Plastic Surgery
  Sanke, Robert F., MD

Mott

West River Health Services
420 Pacific Ave
(701) 824-2391

- Family Practice
  Boschee, Tracy B., DO
  Houle, Catherine E., MD
  Joyce, John P., MD
  Thorngren, Frank A., MD
  Wellman, Stacie M., MD
- General Practice
  Sheffield, Jennifer L., MD
- Geriatrics
  Hoerauf, Kent R., MD
  Willoughby, Brian G., MD
- Internal Medicine
  Hoerauf, Kent R., MD
  Ranum, Joshua C., MD
  Willoughby, Brian G., MD
- Pediatrics
  Ketterling, Ellen L., MD
  Ranum, Carrie Ann K., MD
- Podiatry, Surgical Chiropody
  Kilwein, Steven C., DPM

North Dakota (cont.)
Napoleon

Wishek Rural Health Clinic/Napoleon
420 Main Ave
(701) 754-2322

- Family Practice
  Kosiak, Donald J., MD
  Oliveira-Filho, Edgar K., MD
  Patel, Suresh K., MD
- General Practice
  Vegiraju, Thammi R., MD
- Internal Medicine
  Thirumala Reddy, Joseph R., MD

New England

West River Health Services
820 2nd Ave W
(701) 579-4507

- Family Practice
  Boschee, Tracy B., DO
  Houle, Catherine E., MD
  Joyce, John P., MD
  Thorngren, Frank A., MD
  Wellman, Stacie M., MD
- General Practice
  Sheffield, Jennifer L., MD
- Geriatrics
  Hoerauf, Kent R., MD
  Willoughby, Brian G., MD
- Internal Medicine
  Hoerauf, Kent R., MD
  Ranum, Joshua C., MD
  Willoughby, Brian G., MD
- Pediatrics
  Ketterling, Ellen L., MD
  Ranum, Carrie Ann K., MD
- Podiatry, Surgical Chiropody
  Kilwein, Steven C., DPM

New Rockford

Community Health Clinic
118 1st St S
(701) 652-2515

- Family Practice
  Page, Michael J., MD
  Schaffer, Todd W., MD
- General Practice
  Geier, Rick J., MD
- General Surgery
  Khokha, Inder V., MD

North Dakota (cont.)
New Town

Elbowoods Memorial Healthcare Center
1058 College Drive
(701) 627-4701

- Clinic
  Three Affiliated Tribes - Minne Tohe Health

Nordby Vision Center
603 1st St N Rm 301-Al1
(701) 627-3036

- Optometrist
  Hjelden, Melissa P., OD
  Nordby, Douglas M., OD

Trinity Community Clinic New Town
604 1st Street North
(701) 627-2990

- Family Practice
  Naranja, Imelda T., MD
  Sell, Shanon M., DO
- General Practice
  Naranja, Imelda T., MD
- Pediatrics
  Naranja, Imelda T., MD

Northwood

Northwood Deaconess Health Center
4 N Park St
(701) 587-6060

- Family Practice
  Berg, Jonathon H., MD
  Stenger, George S., DO

Valley Community Health Centers
301 Hwy 15
(701) 587-6000

- Family Practice
  Christianson, Charles E., MD

Oakes

Avera Medical Group Podiatry Aberdeen-Oakes Clinic
1200 N 7th St
(701) 742-3600

- Podiatry, Surgical Chiropody
  Stapp, Chad M., DPM

Providers are subject to be added or terminated without notice.

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PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING PHYSICIANS

North Dakota (cont.)
Oakes (cont.)

Avera St Lukes
420 7th St S
(701) 742-3267

- Orthopedic Surgery
  Macdougall, James B., MD
  Mantone, James K., MD
- Radiology
  Aguilar, Melchor J., MD
  Fritz, Daniel R., MD
  Kimmel, Douglas J., MD
  Lenter, Leslie H., MD
  Lundell, Caroline J., MD
  Peters, Stephen R., MD
  Siegmund, Sheryl A., MD

Oakes Community Hospital
1200 N 7th St
(701) 742-3291

- Emergency Medicine
  Bolton, Mark J., MD
  Hicks, Robert C., MD
- Family Practice
  Bolton, Mark J., MD
- Internal Medicine
  Obrien Paradis, Katie A., MD

Ophthalmology Associates
409 Main St
(701) 742-3291

- Ophthalmology
  Wischmeier, Curt A., MD

Rath, Geoffrey, OD
409 Main Ave
(701) 742-3111

- Optometrist
  Rath, Geoffrey A., OD

Sanford Health Oakes Clinic
420 S 7th St
(701) 742-3267

- Family Practice
  Buhr, James B., MD
  Nagala, Rupkumar K., MD
  Small, Donna M., MD
- Geriatrics
  Luke, Madeline Z., MD
- Internal Medicine
  Luke, Madeline Z., MD
  Nagala, Vani, MD

North Dakota (cont.)
Oakes (cont.)

Sanford Health Oakes Clinic (cont.)

- Nephrology
  Chemiti, Gopal K., MD
- Oncology
  Geeraerts, Louis H., MD
- Podiatry, Surgical Chiropody
  Anderson, Brad C., DPM
- Radiology
  Marsden, Richard J., MD

Sanford Health Oakes Clinic
420 S 7th St
(701) 742-3267

- Orthopedic Surgery
  Dahl, Kevin, MD
- Radiology
  Asheim, Jason, MD

St Francis Medical Center
1200 7 St N
(701) 742-3600

- Orthopedic Surgery
  Johnson, James F., MD

Park River

First Care Health Center
115 Vivian St
(701) 284-7500

- Family Practice
  Mees, Sara L., MD
- General Surgery
  Khokha, Inder V., MD
- Radiology
  Ali, Azhar T., MD
  Asis, Martin J., MD
  Baraga, Joseph J., MD
  Barkmeier, Jeffrey, MD
  Block, Nathan D., MD
  Bowman Seitz, Tara S., MD
  Bretzke, Carl A., MD
  Bretzman, Peter A., MD
  Butler, Robert R., MD
  Carlson, Blake A., MD
  Ditmanson, Phil M., MD
  Drake, David G., MD
  Edmonson, George R., MD
  Frecentese, Dominic F., MD
  Goertzen, Timothy C., MD
  Hartigan, Andrew S., MD
  Hedlund, Laura J., MD

North Dakota (cont.)
Park River (cont.)

First Care Health Center (cont.)

- Radiology (continued)
  Hommeyer, Steven C., MD
  Knoedler, John P., MD
  Knutzen, Anders M., MD
  Lambert, David P., MD
  Leon, Jorge A., MD
  Longley, Deborah G., MD
  Magnuson, Jeffrey E., MD
  Maguire, Frank P., MD
  Mulcahy, Paul F., MD
  Muschenheim, Alexandra L., MD
  Page, Graydon T., MD
  Passe, Theodore J., MD
  Rosenberg, Michael S., MD
  Tashjian, Joseph H., MD
  Tummala, Anuradha K., MD
  Veldman, Mark W., MD
  Wiese, Don E., MD

First Care Health Center
115 Vivan St
(701) 284-7555

- Family Practice
  Johnson, Joel J., MD
  Johnson, Mandi L., MD
  Omotunde, Joshua O., MD
- General Surgery
  Khokha, Inder V., MD
- Internal Medicine
  Baig, Mirza B., MD
- Ophthalmology
  Brockman, Ronald J., MD
- Optometrist
  Carlson, Dori M., OD
  Helgeson, Mark K., OD
- Radiology
  Aizpuru, Richard D., MD
  Arsenault, Todd M., MD
  Baldwin, Matthew T., MD
  Baraga, Joseph J., MD
  Berens, Bruce M., MD
  Berger, Mark W., MD
  Bowman Seitz, Tara S., MD
  Bretzke, Carl A., MD
  Bretzman, Peter A., MD
  Bryan, Erich N., MD
  Bryson, Thomas C., MD
  Butler, Robert R., MD
  Carlson, Blake A., MD

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING PHYSICIANS

North Dakota (cont.)
Park River (cont.)

First Care Health Center (cont.)
- Radiology (continued)
  Carolan, Paul R., MD
  Caspers, John M., MD
  Castaneda, Wilfrido R., MD
  Gilloon, Benjamin A., MD
  Grogan, Michael J., MD
  Jackson, Christopher A., MD
  Johnson, Adam C., MD
  Loe, Matthew J., MD
  Ludeman, Lucas B., MD
  May, Benjamin J., MD
  Page, Graydon T., MD
  Parrino, Suzanne S., MD
  Passe, Theodore J., MD
  Phelan, Jeffrey S., MD
  Prescott, Trisha R., MD
  Rathmann, Gregory A., MD
  Rhodes, Nicholas G., MD
  Rosenberg, Michael S., MD
  Ruzek, Kimberly A., MD
  Savcenko, Vladimir, MD
  Sullivan, Patrick P., MD
  Tai, Angela W., MD
  Weinmann, Robert H., MD
  Wittenberg, Keith H., MD
  Wold, Peter B., MD
  Wosick, William F., MD

Heartland Eye Care, PC
121 Briggs Ave N
(701) 284-7330
- Optometrist
  Carlson, Dori M., OD
  Helgeson, Mark K., OD
  Hoenke, Jaime A., OD

Midgarden Family Clinic, PC
503 Park St W Suite B
(701) 284-6663
- Family Practice
  Midgarden, Kristi J., MD

Riverview Specialty Clinic - Park River
115 Vivan St
(701) 284-7887
- Internal Medicine
  Baig, Mirza B., MD

North Dakota (cont.)
Richardton

Richardton Health Center
215 3rd Ave W
(701) 974-3372
- General Practice
  Gehring, A William, MD

Rolette

Northland Community Health Center
401 2nd Ave
(701) 246-3391
- Family Practice
  Vaagen, Jeffrey L., MD

Rolla

Northland Community Health Center-Rolla
114 3rd St NE
(701) 477-3111
- Family Practice
  Vaagen, Jeffrey L., MD

Presentation Medical Center
213 2nd Ave NE
(701) 477-3161
- Emergency Medicine
  Cordy, Roy A., MD
- Family Practice
  Cordy, Roy A., MD
  Paneru, Ram P., MD
- Podiatry, Surgical Chiropody
  Williams, Tyson D., DPM

Thorman Joseph A OD
118 3rd St NE
(701) 477-5656
- Optometrist
  Thorman, Joseph A., OD

Rugby

Dakota Eye Institute
201 SW 7th St Ste 2
(701) 222-3937
- Ophthalmology
  Fortney, Aaron C., MD
  Raducu, Elena R., MD
- Optometrist
  Hellebush, Leslie R., OD
  Ranum, Michael R., OD

North Dakota (cont.)
Rugby (cont.)

Heart of America Johnson Clinic
800 3rd Ave SW
(701) 776-5235
- Emergency Medicine
  Fernandez, Oscar O., MD
- Family Practice
  Fernandez, Oscar O., MD
  Kremer, Ashely J., MD
  Schoneberg, Steven B., MD
  Seiler, Hubert L., MD
- Geriatrics
  Seiler, Hubert L., MD

Heart of America Medical Center
800 S Main Ave
(701) 776-5261
- Emergency Medicine
  Hicks, Robert C., MD
  Nelson, John G., MD
  Sather, Jeffrey A., MD
- Family Practice
  Fernandez, Oscar O., MD
  Kremer, Ashely J., MD
  Schoneberg, Steven B., MD
  Seiler, Hubert L., MD
- General Surgery
  Fernandez, Oscar O., MD
  Skipper, Ronald P., MD
- Geriatrics
  Seiler, Hubert L., MD
- Urology
  Lim, Alan Fh, MD

Scranton

West River Health Services
211 Main Street S
(701) 275-6336
- Family Practice
  Boschee, Tracy B., DO
  Houle, Catherine E., MD
  Joyce, John P., MD
  Thorngren, Frank A., MD
  Wellman, Stacie M., MD
- General Practice
  Sheffield, Jennifer L., MD
- Geriatrics
  Hoerauf, Kent R., MD
  Willoughby, Brian G., MD

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING PHYSICIANS

North Dakota (cont.)
Scranton (cont.)

West River Health Services (cont.)
- Internal Medicine
  Hoerauf, Kent R., MD
  Ranum, Joshua C., MD
  Willoughby, Brian G., MD
- Pediatrics
  Ketterling, Ellen L., MD
  Ranum, Carrie Ann K., MD
- Podiatry, Surgical Chiropody
  Kilwein, Steven C., DPM

Stanley

Mountrail County Medical Clinic
615 6th St SE
(701) 628-2505
- Family Practice
  Langager, Tyrone O., MD
  Longmuir, Mark, MD

Tioga

Tioga Medical Center
710 N Welo St
(701) 664-3368
- Family Practice
  Gade, Swami P., MD
  Neelamegam Premnath, Vijay, MD
  Paneru, Ram P., MD
  Peterson, Mark G., MD
  Selland, Brian L., MD
  Sullivan, Brian M., MD

Trenton

Trenton Community Clinic
331 4th Ave E
(701) 774-0461
- General Practice
  Trenton Community Clinic/MD
- Podiatry, Surgical Chiropody
  Trenton Community Clinic/DPM

Turtle Lake

Northland Community Health Center- Turtle Lake
416 Kundert St
(701) 448-9225
- Family Practice
  Vaagen, Jeffrey L., MD

North Dakota (cont.)
Valley City

Essentia Health Valley City Clinic
132 4th Ave NE
(701) 845-8060
- Cardiovascular Disease
  Jenny, Donald B., MD
- Family Practice
  Diegel, Tanya L., DO
  Ostlie, Daniel K., MD
  Torrance, James R., MD
- General Surgery
  Dees, Brian K., MD
- Internal Medicine
  Jenny, Donald B., MD
  Whitbeck, Matthew G., MD
- Pediatrics
  Quanrud, Myra J., MD
- Podiatry, Surgical Chiropody
  Kang, Jill, DPM
- Radiology
  Crider, Mitchell H., MD
  Crowe, Christopher H., MD
- Sports Medicine
  Ostlie, Daniel K., MD

Fercho Cataract & Eye Clinic
200 Central Ave N Ste F
(701) 235-0561
- Ophthalmology
  Grosz, David E., MD

Fercho Cataract & Eye Clinic
1230 W Main
(701) 235-0561
- Ophthalmology
  Grosz, David E., MD

Fercho Cataract & Eye Clinic
570 Chautauqua Blvd
(701) 235-0561
- Ophthalmology
  Grosz, David E., MD

Mercy Hospital
570 Chautauqua Blvd
(701) 845-6400
- Anesthesiology (MD)
  Bathurst, Robert M., MD
- Emergency Medicine
  Bathurst, Robert M., MD
  Bone, William M., MD
  Garcia, Julia V., MD

North Dakota (cont.)
Valley City (cont.)

Mercy Hospital (cont.)
- Emergency Medicine (continued)
  Stull, Benjamin W., MD
  Wiltse, Richard J., MD
  Wukie, John J., DO
- Family Practice
  Andersen, Jeffrey B., MD
  Baruti, Timur A., MD
  Dumbolton, John H., DO
  Garcia, Julia V., MD
  Larson, Richard L., MD
  Martin, Richard E., MD
  Matheson, Thomas B., MD
  Michaud, Brian S., DO
  Mitzel, Fredrick, MD
  Omotunde, Joshua O., MD
  Overvold, Angel D., DO
  Raymond, Arthur J., MD
  Svec, Linda P., MD
- General Surgery
  Khokha, Inder V., MD
- Internal Medicine
  Anderson, Misty, DO
  Hasnain, Mohsin, MD
  Labrie, Sonja, MD
  Layawen, Aselo, MD
- Pediatrics
  Labrie, Sonja, MD

Professional Eyecare Center
200 Central Ave N Ste F
(701) 845-5000
- Optometrist
  Frohlich, Douglas L., OD
  Fronk, Kent, OD
  Sayler, Larry H., OD

Sanford Health Valley City Clinic
520 Chautauqua Blvd
(701) 845-6000
- Dermatology
  Holzwarth, Ryan L., MD
- Family Practice
  Andersen, Jeffrey B., MD
  Braunagel, Bradley A., MD
  Buhr, James B., MD
  Goven, Genevieve M., MD
  Hochhalter, David, MD
- General Surgery
  Albrecht, Warren E., DO
  Kroetsch, Corey, MD

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING PHYSICIANS

North Dakota (cont.)
Valley City (cont.)

Sanford Health Valley City Clinic (cont.)

- General Surgery (continued)
  Stasko, Andrew, MD
- Internal Medicine
  Anderson, Misty, DO
  Leitch, John M., MD
  Luke, Madeline Z., MD
  Mahale, Adit, MD
- Nephrology
  Mahale, Adit, MD
- Neurology
  Faber, Kevin M., MD
- Oncology
  Leitch, John M., MD
- Orthopedic Surgery
  Hvidston, Andrew J., MD
  Nagle, Thomas D., MD
- Podiatry, Surgical Chiropody
  Anderson, Brad C., DPM
  Arness, Richard E., DPM
- Radiology
  Kallenbach, Christopher, MD
  Khaghany, Kamran, MD
- Urology
  Noah, Thomas A., MD

Sanford Health Valley City Clinic
520 Chautauqua Blvd
(701) 845-6000

- General Surgery
  Kroetsch, Corey, MD
- Internal Medicine
  Mahale, Adit, MD
- Nephrology
  Mahale, Adit, MD
- Orthopedic Surgery
  Hvidston, Andrew J., MD
  Lundeen, Mark A., MD
  Stavenger, Jeffrey P., MD
- Radiology
  Asheim, Jason, MD

Sanford Health Valley City Eye Center & Optical
253 Central Ave N
(701) 845-1511

- Optometrist
  Quitberg, Joy, OD
  Rexine, Michael K., OD

North Dakota (cont.)
Wahpeton

Essentia Health Wahpeton Clinic
275 11th St S
(701) 642-2000

- Cardiovascular Disease
  Almanaseer, Yassar, MD
- Family Practice
  Aryal, Suima, MD
  Jamsa Tollefson, Lisa J., MD
  Nelson, Susan K., MD
  Pankow, Dawn K., MD
  Refsland, Bradley A., MD
  Regmi, Suman R., MD
  Vetter, Richard T., MD
- General Surgery
  Harris, Scott S., MD
  Mohs, Thomas J., MD
  Wasemiller, Paul S., MD
- Geriatrics
  Strand, Duane D., MD
- Internal Medicine
  Briggs, Michael S., MD
  Gupta, Mahendra K., MD
  Kapphahn, Samantha, DO
  Link, David B., MD
  Qarni, Ahmer H., MD
  Strand, Duane D., MD
  Tiwari, Sumit, MD
- Nephrology
  Qarni, Ahmer H., MD
- Obstetrics/Gynecology
  Gefroh Ellison, Stefanie S., MD
  Pankow, Dawn K., MD
- Ophthalmology
  Keating, Anne M., MD
- Optometrist
  Lampl, Shila K., OD
- Orthopedic Surgery
  Johnson, Julie M., MD
  Lantz, Steven W., MD
- Otology, Laryngology, Rhinology
  Belizario, Francisco Y., MD
  Bruns, Alan D., MD
- Pediatrics
  Malkasian, Lucy B., MD
- Physical Medicine and Rehabilitation
  Sollom, Dennis G., MD
- Podiatry, Surgical Chiropody
  Olson, Bradley R., DPM

North Dakota (cont.)
Wahpeton (cont.)

Essentia Health Wahpeton Clinic (cont.)

- Pulmonary Diseases
  Briggs, Michael S., MD
- Urology
  Khan Galzie, Sardar Mohammad Farhan, MD

Fercho Cataract & Eye Clinic
315 11 St N Ste A8
(701) 235-0561

- Ophthalmology
  Grosz, David E., MD

Midwest Vision Centers
517 Dakota Ave
(701) 642-9302

- Optometrist
  Connelly, James B., OD
  Ross, Eric M., OD

Prairie Vision Center PC
315 11th St N Ste A
(701) 642-4090

- Optometrist
  Picken, Jace H., OD
  Welder, William J., OD

Sanford Health Wahpeton Clinic
332 2nd Ave N
(701) 642-7000

- Dermatology
  Holzwarth, Ryan L., MD
- Family Practice
  Ackerman, Winter M., MD
  Emery, Patrick E., MD
  Halvorson, James E., MD
  Mayo, William M., MD
  Mislan, Garry A., MD
  Nyarandi, Timothy, MD
  Ostmo, Robert P., MD
- General Surgery
  Stasko, Andrew, MD
- Nephrology
  Louvar, Daniel, MD
- Obstetrics/Gynecology
  Tompkins, Rebekah, MD
- Oncology
  Gaba, Anu G., MD
- Orthopedic Surgery
  Hvidston, Andrew J., MD

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING PHYSICIANS

North Dakota (cont.)

Wahpeton (cont.)

Sanford Health Wahpeton Clinic (cont.)
- Radiology
  Catalan, Richard, MD
  Garrity, Stephen P., MD
  Kallenbach, Christopher, MD
  Shook, Robert J., MD
  Stallman, Donald J., MD
- Urology
  Segal, Michael D., MD
  Toni, Conrad, MD

Sanford Health Wahpeton Clinic
332 2nd Ave N
(701) 642-7000
- Nuclear Medicine
  Stallman, Donald J., MD
- Obstetrics/Gynecology
  Tompkins, Rebekah, MD
- Orthopedic Surgery
  Friederichs, Matthew G., MD
  Hvidston, Andrew J., MD
- Radiology
  Asheim, Jason, MD
  Catalan, Richard, MD
  Garrity, Stephen P., MD
  Stallman, Donald J., MD

Sanford Health Wahpeton Eye Center & Optical
332 2nd Ave N
(701) 642-7000
- Optometrist
  Myron, Sarah, OD

Walhalla

Walhalla Clinic
301 5th St
(701) 549-2710
- Family Practice
  Khromachou, Tamim R., MD
  Noyes, Randal H., DO

Washburn

Washburn Family Clinic
1177 Border Lane
(701) 462-3396
- Family Practice
  Hamilton, Robert A., MD
  Harchenko, Vern A., MD
  Johansen, James R., MD

North Dakota (cont.)

Watford City

Addo, Fek MD Inc
525 N Main St
(701) 842-3771
- Internal Medicine
  Addo, Ferdinand E., MD
- Oncology
  Addo, Ferdinand E., MD

McKenzie County Healthcare Systems Clinic
525 N Main St
(701) 842-3771
- Family Practice
  Matheson, Thomas B., MD
  Rivas, David, DO
- General Practice
  Ramage, Gary W., MD

McKenzie County Healthcare Systems/Hospital
516 N Main St
(701) 842-3000
- Family Practice
  Diamond, Donita K., DO
  Rivas, David, DO
- General Practice
  Ramage, Gary W., MD

Nordby Vision Center, Ltd
109 5th St SW
(701) 444-3221
- Optometrist
  Hjelden, Melissa P., OD
  Nordby, Douglas M., OD

West Fargo

Dye, J G., OD
1207 Prairie Parkway
(701) 282-2020
- Optometrist
  Dye, J G., OD

Essentia Health West Fargo Clinic
1401 13th Ave E
(701) 364-5751
- Family Practice
  Howden, Richard L., MD
  Kuhlmann, Craig F., MD
  Nelson, Kinsey B., MD
  Refsland, Bradley A., MD
  Sondreal, Philip S., MD
  Vetter, Richard T., MD

North Dakota (cont.)

West Fargo (cont.)

Essentia Health West Fargo Clinic (cont.)
- General Surgery
  Harris, Scott S., MD
- Internal Medicine
  Kooyer, Kurt W., MD
- Obstetrics/Gynecology
  Holm, Mary K., MD
  Kuhlmann, Craig F., MD
- Pediatrics
  Kooyer, Kurt W., MD
- Sports Medicine
  Kuhlmann, Craig F., MD

Knowlton Oneill & Associates PC
1401 13th Ave E
(701) 364-0060
- Psychiatry (MD/DO)
  Block, Terry N., MD

Sanford West Fargo Clinic
1220 Sheyenne St
(701) 234-4445
- Family Practice
  Borowicz, Ronald J., MD
  Dahl, Bruce L., MD
  Dahl, Daniel, MD
- Obstetrics/Gynecology
  Dangerfield, Jon D., MD

Sanford West Fargo Clinic
1220 Sheyenne St
(701) 234-4455
- Family Practice
  Borowicz, Ronald J., MD
  Dahl, Bruce L., MD
  Dahl, Daniel, MD
  Goyal, Shaveta, MD
  McLeod, Matthew, MD
  Walker, Debra, MD
- Obstetrics/Gynecology
  Dangerfield, Jon D., MD

Valley Oral & Facial Surgery
3187 Bluestem Dr Ste 4
(701) 235-7379
- Oral Surgery
  Schneider, Rudy J., DMD

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NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING PHYSICIANS

North Dakota (cont.)

Westhope

Trinity Health dba Tcc-Westhope
310 2nd Ave E
(701) 245-6638

- Family Practice
  Kihle, Kenneth W., MD
- General Practice
  Kihle, Kenneth W., MD

Williston

Accessible Podiatry LLC dba Williston Foot & Ankle Clinic
3 4th St E Ste 102
(701) 572-4094

- Podiatry, Surgical Chiropody
  Slann, Guy K., DPM

Adducci, Joseph, MD
1213 15th Ave W
(701) 572-0316

- Obstetrics/Gynecology
  Adducci, Joseph E., MD

Billings Clinic
1301 15th Ave W
(701) 774-7464

- Internal Medicine
  Whittenberger, Brock P., MD
- Oncology
  Santala, Roger S., MD
  Whittenberger, Brock P., MD
- Pediatrics
  Gunville, Fred E., MD

Great Plains Womens Health Clinic
1700 11th St W
(701) 774-7687

- Obstetrics/Gynecology
  Adum, Vivian L., MD
  Loo, Li ER, MD
  Newton, Yolanda M., MD
  Solberg, Sara R., MD
  Tong, Beverly J., MD

John B Andelin MD PC dba Pathology Services
201 2nd Ave W
(701) 770-3927

- Pathology
  Andelin, John B., MD
  McCoy Jr, Franklin E., MD

North Dakota (cont.)

Williston (cont.)

Lapan, Michael, DPM
1213 15th Ave W
(800) 331-7575

- Podiatry, Surgical Chiropody
  Lapan, Michael D., DPM

Mercy Medical Center
1219 Knoll St
(701) 572-0127

- Urology
  Shahin, Salem S., MD

Mercy Medical Center dba Craven Hagan Clinic
1213 15th Ave W
(701) 774-7400

- Anesthesiology (MD)
  Hoglund, Christine J., DO
- Family Practice
  Andelin, Paul, MD
  Kemp, Robert G., MD
  Mulu, Menelik, MD
  Small, William C., MD
  Wiens, Glenn A., MD
- General Practice
  Caplan, Gary, MD
- General Surgery
  Anderson, Wayne L., MD
  Li, Anson S., MD
  Vibeto, Brett K., MD
- Internal Medicine
  McCoy, Austin J., MD
  Miller, Cory R., MD
- Obstetrics/Gynecology
  Adducci, Joseph E., MD
- Orthopedic Surgery
  Keene, Roxanne R., MD
  Mai, Matthew C., MD
  McNulty, John M., MD
- Pediatrics
  Grorud, Jane A., MD
  Keene, David E., MD
  Mulu, Menelik, MD
  Ponzio, Sheila K., MD
- Plastic Surgery
  Hegge, Theresa A., MD
- Psychiatry (MD/DO)
  Eick, Thomas J., DO
- Radiation Therapy
  Collins, Kevin B., MD

North Dakota (cont.)

Williston (cont.)

Mercy Medical Center dba Craven Hagan Clinic (cont.)

- Radiology
  Grant, Michael, MD

Mercy Medical Center dba Radiology Services
1301 15th Ave W
(701) 774-7435

- Nuclear Medicine
  Bodeau, Geoffrey R., MD
- Radiology
  Arslanlar, Norman, DO
  Austin, Mark J., MD
  Austin, Susan J., MD
  Bodeau, Geoffrey R., MD
  Bullis, Brent R., MD
  Carlson, Annelisa M., MD
  Donovan, Charles B., MD
  Doyscher, Mark W., MD
  Edelman, Kevin, MD
  Engstrom, Bjorn I., MD
  Farah, Nazih N., MD
  Fry, Stephen M., MD
  Gordon, Jeffery D., MD
  Gramith, Frederick C., MD
  Groebner, Nathan J., MD
  Hassell, Douglass S., MD
  Hegge, Ryan K., MD
  Hite, Stephen H., MD
  Ibach, Thomas J., MD
  Inampudi, Subbarao, MD
  Jaszczak, Leszek J., MD
  Kane, Jon P., MD
  Kang, Eul S., MD
  Kayfes, Mareve, MD
  Keszler, Jason L., DO
  Kurisko, Stanley D., MD
  Lee, Peter U., MD
  Matson, Thomas C., MD
  Mills, David J., MD
  Myhra-Bloom, Karla G., MD
  Mylrea, James M., MD
  Nobrega, John M., MD
  Oswood, Mark C., MD
  Parker, Robin, MD
  Parker, Trudi K., MD
  Peterson, Jeffrey J., MD
  Plunkett, Michael, MD
  Pollock, Robert A., MD
  Quinones, Eduardo, MD

Providers are subject to be added or terminated without notice.

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PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING PHYSICIANS

North Dakota (cont.)
Williston (cont.)

Mercy Medical Center dba Radiology Services (cont.)
- Radiology (continued)
  Reddy, Madhusudhan P., MD
  Rust, Paul R., MD
  Schneider, Lisa, MD
  Shearer, Damon D., DO
  Sidney, Scott D., MD
  Steely, John W., MD
  Tillotson, Christopher L., MD
  Tran, Huy, MD
  Tyson, Scott E., MD
  Veldman, Sara B., MD
  Yost, Robert A., MD

Neurosurgical & Spinal Surgery Associates, PC
3 4th Street East
(800) 253-5876
- Neurological Surgery
  Ingraham, Robert Q., MD
  Watt, Tim J., MD
- Neurology
  Maclachlan, Robert D., MD

Northwest Human Service Center
316 2nd Ave W
(701) 774-4600
- Psychiatry (MD/DO)
  Eick, Thomas J., DO
  McLean, Andrew J., MD
  Schield, Laura B., MD

Professional Anesthesia Services
1301 15th Ave W
(701) 774-7406
- Anesthesiology (MD)
  Radic, Zeljko, MD
  Skurdal, David N., MD

Sanford At Craven Hagan Clinic
1213 15th Ave W
(701) 572-7651
- Neurology
  Arazi, Richard, MD

Shahin, Salem, MD
1219 Knoll St
(701) 572-0127
- Urology
  Shahin, Salem S., MD

North Dakota (cont.)
Williston (cont.)

St Alexius Heart & Lung Clinic LLC
1301 15th Ave W
(701) 530-7502
- Allergy
  Piyamahunt, Arkapol, MD
- Internal Medicine
  Piyamahunt, Arkapol, MD

Svpn Mfm Great Plains
1700 11th St W
(701) 774-7487
- Obstetrics/Gynecology
  Wallace, Roger L., DO

Svpn Neuro Williston
1213 15th Ave W
(800) 544-3579
- Neurological Surgery
  Spire, William J., MD
- Psychiatry (MD/DO)
  Mosser, Jeffrey F., MD

Trinity Community Clinic/Western Dakota
1321 W Dakota Parkway
(701) 857-7388
- Cardiovascular Disease
  Percell, Robert L., MD
  Turk, Samir M., MD
- Family Practice
  Nardozzi, Kristen L., DO
  Olson, Mark A., MD
- General Practice
  Kennedy, James A., MD
- General Surgery
  Lee, Lane M., DO
- Internal Medicine
  Percell, Robert L., MD
  Rhule, Garett A., MD
  Wilson, George M., MD
- Ophthalmology
  Knapp, Stefanie, MD
- Orthopedic Surgery
  Joshi, Ravindra, MD
  Kindy, Alexandre S., MD
- Podiatry, Surgical Chiropody
  Albers, Aaron J., DPM
- Rheumatology
  Diri, Erdal, MD

North Dakota (cont.)
Williston (cont.)

Trinity Regional Eyecare/Western Dakota
1321 W Dakota Parkway
(701) 572-7641
- Ophthalmology
  Raymond, Mark C., MD
  Reeves, Juliana E., MD
- Optometrist
  Roles, Cynthia J., OD

Williston Basin Eyecare Associates, PC
1213 15th Ave W
(701) 577-3937
- Optometrist
  Anderson, Allison R., OD
  Brenno-Watterud, Danielle J., OD
  Fearing, Mitchell R., OD
  Sime, Laurali M., OD
  Tofte, Michael D., OD

Williston Radiology Consultants
3 East 4th St #100
(701) 577-6337
- Family Practice
  Shafer, Justin A., MD
- Radiology
  Jaszczak, Leszek J., MD

Wishek

Eye Center of The Dakotas PC
400 Beaver Ave
(701) 452-2620
- Optometrist
  Moch, Danelle F., OD
  Pathroff, Kellen E., OD
  Tello, Timothy L., OD

Wishek Hospital Clinic Assn
1007 4th Ave S
(701) 452-2326
- Family Practice
  Kosiak, Donald J., MD
  Nelson, Susan K., MD
  Oliveira-Filho, Edgar K., MD
  Patel, Suresh K., MD
- General Practice
  Vegiraju, Thammi R., MD
- Internal Medicine
  Thirumala Reddy, Joseph R., MD

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING PHYSICIANS

North Dakota (cont.)
Wishek (cont.)

Wishek Rural Health Clinic
1015 4th Ave S
(701) 452-2364

- Family Practice
  Kosiak, Donald J., MD
  Oliveira-Filho, Edgar K., MD
  Patel, Suresh K., MD
- General Practice
  Vegiraju, Thammi R., MD
- Internal Medicine
  Thirumala Reddy, Joseph R., MD

South Dakota
Aberdeen

Avera Medical Group Ear Nose & Throat
201 S Lloyd St Ste E106
(605) 225-1420

- Otology, Laryngology, Rhinology
  Cihak, Robert, MD
  Weekly, James M., MD

Avera Medical Group Orthopedic Surgery Specialists
701 8th Ave NW Ste A
(605) 226-2663

- Family Practice
  Wolfgram, Danny A., MD
- Orthopedic Surgery
  Fites, Brandon S., MD
  Macdougall, James B., MD
  Mantone, James K., MD
  Miller, Patrick J., MD
  Reynen, Matthew C., MD
- Physical Medicine and Rehabilitation
  Frisco, Donald J., MD
- Podiatry, Surgical Chiropody
  Johnston, James S., DPM
  Wobst, Garrett, DPM
- Psychiatry (MD/DO)
  Frisco, Donald J., MD

Avera Medical Group Radiology
305 S State St
(605) 622-5540

- Radiology
  Aguilar, Melchor J., MD
  Fritz, Daniel R., MD
  Kimmel, Douglas J., MD
  Lenter, Leslie H., MD

South Dakota (cont.)
Aberdeen (cont.)

Avera Medical Group Radiology (cont.)

- Radiology (continued)
  Lundell, Caroline J., MD
  Peters, Stephen R., MD
  Siegmund, Sheryl A., MD

Barnett Vision Center, LLP
508 Moccasin Dr
(605) 225-4046

- Optometrist
  Barnett, Francis L., OD
  Hase, Angela J., OD
  Lunzman, Kara M., OD

Ophthalmology Associates
310 8th Ave NW Ste 507
(605) 226-2108

- Ophthalmology
  Wischmeier, Curt A., MD

Thomas G Harbert, MD
201 S Lloyd Ste W110
(605) 229-0205

- General Practice
  Harbert, Thomas G., MD
- Orthopedic Surgery
  Harbert, Thomas G., MD

Vision Care Associates, LLP
310 8th Ave NW
(605) 225-2020

- Optometrist
  Dohman, Darren, OD
  Dorsett, Marshall, OD
  Olson, James, OD
  Quam, Stuart, OD
  Struble, Mark, OD

Britton

Ophthalmology Associates
701 Main St
(605) 448-5151

- Ophthalmology
  Wischmeier, Curt A., MD

Vision Care Associates, LLP
701 Main St
(605) 448-5151

- Optometrist
  Dohman, Darren, OD
  Siegling, Bruce, OD

South Dakota (cont.)
Eureka

Vision Care Associates, LLP
808 C Ave
(605) 284-2391

- Optometrist
  Dockter, Craig, OD
  Dohman, Darren, OD
  Olson, John C., OD

Herreid

Campbell County Clinic
208 N Main St
(605) 437-2304

- General Practice
  Knecht, John F., MD

Lemmon

Lemmon Eye Clinic
16 4th St W
(605) 374-5781

- Optometrist
  Nash, Heidi J., OD
  Trimble, James E., OD

West River Health Services
401 6th Ave W
(605) 374-3773

- Family Practice
  Boschee, Tracy B., DO
  Jacobsen, Thomas E., MD
  Joyce, John P., MD
  Thorngren, Frank A., MD
  Wellman, Stacie M., MD
- Geriatrics
  Hoerauf, Kent R., MD
  Willoughby, Brian G., MD
- Internal Medicine
  Hoerauf, Kent R., MD
  Ranum, Joshua C., MD
  Willoughby, Brian G., MD
- Obstetrics/Gynecology
  Jacobsen, Thomas E., MD
- Pediatrics
  Ketterling, Ellen L., MD
  Ranum, Carrie Ann K., MD
- Podiatry, Surgical Chiropody
  Kilwein, Steven C., DPM

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING PHYSICIANS

South Dakota (cont.)

Mobridge

Ophthalmology Associates
1315 10th Ave W
(605) 845-2932

- Ophthalmology
  Bormes, John M., MD

Sisseton

St Francis Medical Center
205 Orchard Drive
(605) 698-7681

- Orthopedic Surgery
  Johnson, James F., MD

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING DENTISTS

Minnesota

Barnesville

Dahl, Jonathan P, DDS, PC
102 Front St
(218) 354-2289

Dahl, Jonathan P., DDS
Mack, Robert D., DDS
Seaborn, Stacy L., DDS

Dilworth

Edeen Family Dentistry
806 Center Ave W
(218) 287-2938

Edeen, Darin L., DDS

E Grand Forks

Irvin M Galstad, DDS Ltd
1416 Central Ave NE
(218) 773-3004

Galstad, Irvin M., DDS
Johnson, Craig A., DDS

McDonald-Galstad, Ltd
1421 Central Ave NW
(218) 773-3010

McDonald, Christopher J., DDS
McDonald, Peter J., DDS

Fosston

Sjulson Family Dentistry
109 Johnson Ave
(218) 435-1599

Gupta, Ravi N., DDS
Sjulson, Roger W., DDS

Halstad

Dr Joy's Dental Clinic
132 3rd St West
(218) 456-2182

Hollinshead, Joyce C., DDS

Hawley

Appletree Dental
520 Main St
(218) 483-1038

Arneson, Peder T., DDS
Boedigheimer, Daniel, DDS
Christianson, Wayne E., DDS
Dobmeier, David D., DDS
Hieb, Matthew W., DDS
Nease, Jesse M., DDS
Peterka, Ruth C., DDS

Minnesota (cont.)

Hawley (cont.)

Appletree Dental (cont.)

- Dentist (continued)
  Reardon, Nicole J., DDS
  Terveen, Amanda M., DDS
- Oral Surgery
  Lindemoen, Gary L., DDS

Bentley, Geoffrey, DDS, PA
500 6th St
(218) 483-3311

Bentley, Geoffrey D., DDS

Karlstad

Gracza and Gracza dba Karlstad Dental Clinic
223 S Main St
(218) 436-2944

Gracza, Edward R., DDS

McIntosh

Lesmeister Dental, LLC
105 2nd St SW
(218) 563-3001

Lesmeister, Steven G., DDS

Moorhead

Donabauer Family Dentistry, PC
211 S 5th St
(218) 233-1754

Donabauer, Bradly J., DDS

Family Healthcare Center
715 11th St N Ste 106b
(218) 299-7830

Breding, Joshua T., DDS
Bultema, Jonathan, DDS
Rud, Courtney M., DDS

Harvey, Jeffrey, DDS
1550 30th Ave S
(218) 236-1322

Harvey, Jeffrey C., DDS

Skatvold Family Dentistry
841 Belsly Blvd
(218) 236-5466

Skatvold, Erik P., DDS

Minnesota (cont.)

Moorhead (cont.)

Southview Dental Corp
2704 12th St S
(218) 233-0570

Tranby, David K., DDS

Steidl Family Dentistry PC
523 8th St S
(218) 236-9319

Steidl, Jamie W., DDS

Toutges, Robert, DDS PA
3505 S 8th St Ste 3
(218) 287-2324

Toutges, Robert V., DDS

Wentz, David C., DDS
320 2nd Ave S Ste 106
(218) 236-1666

Wentz, David C., DDS

Warren

Lone Oak Family Dentistry
205 W Johnson Ave Ste 3
(218) 745-4601

Hanel, Travis, DDS

Montana

Sidney

Martineau, Paul R DDS
401 North Central Ave
(406) 482-2423

Martineau, Paul R., DDS

North Dakota

Beulah

Beulah Dental, PC.
200 W Main St
(701) 873-2259

Just, Alison L., DDS
Lee, Kevin B., DDS

Bismarck

A Lifetime of Smiles
1004 7th St S
(701) 258-5220

Frank, Anthony, DDS
Hoerner, Derik P., DDS

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING DENTISTS

North Dakota (cont.)
Bismarck (cont.)

Bjork, Kevin, DDS
1929 N Washington
(701) 222-1286
Bjork, Kevin S., DDS

Brend, Arliss, DDS
207 E Front Ave Ste C
(701) 222-4111
Brend, Arliss L., DDS

Brend, Leroy, DDS
1143 W Turnpike Ave
(701) 255-2467
Brend, Leroy O., DDS
Brend, Megan L., DMD

Bridging The Dental Gap
1223 S 12th St Ste 1
(701) 221-0518
Luger, Joanne, DDS
Mertz, Sarah K., DDS
Nichols-Johnson, Heidi M., DDS

Clausnitzer Dentistry PC
1110 College Dr Ste 108
(701) 255-0586
Clausnitzer, Blaine T., DDS
Schuetzle, Bethany A., DDS

Dakota Family Dental
1929 N Washington
(701) 258-7900
Nichols-Johnson, Heidi M., DDS
Oukrop, Brock A., DDS

Dental Makeover Center
311 N Mandan St
(701) 255-3130
Gonzales, John P., DDS

Dohm, Otto, DDS
1142 W Capitol Ave
(701) 222-8760
Dohm, Otto W., DDS
- Periodontist
  Dohm, Otto W., DDS

Gilchrist, Kevin, DDS
1929 N Washington
(701) 222-1213
Gilchrist, Kevin E., DDS

North Dakota (cont.)
Bismarck (cont.)

Heringer, Everett, DDS
1839 E Capitol Ave
(701) 255-4850
Heringer, Everett E., DDS
Renz, Brielle M., DMD

Jesperson Orthodontics
531 S 7th St
(701) 224-1558
- Orthodontist
  Jesperson, Brian R., DDS
  Keith, Daniel J., DDS

Kapla, Thomas, DDS
1110 College Dr Ste 110
(701) 258-8100
Kapla, Thomas P., DDS

Knudsen, Dean, DDS
714 S 2nd St
(701) 258-3308
Knudsen, Dean D., DDS

Michael Goebel, DDS
407 East Ave C
(701) 258-8509
Goebel, Bryce M., DDS
Goebel, D Michael, DDS
Goebel, Drew A., DDS

Midstokke Family Dentistry
2940 N 19th St Ste 2
(701) 255-0475
Midstokke, Steven J., DDS

Missouri River Dental, PC
1401 Skyline Blvd
Ste 210
(701) 751-7177
Anderson, Timothy A., DDS

Nelson Family Dentistry General Partnership
1700 E Interstate Ave
(701) 222-4746
Nelson, James A., DDS
Overby, Crystal, DDS
Schoch, Kristin R., DDS

Parker Dental Clinic
4501 Coleman St Ste 107
(701) 204-7232
Parker, Riley, DMD

North Dakota (cont.)
Bismarck (cont.)

Pinehurst Family Dentistry
1001 W Interstate Ave
Ste 132
(701) 223-1476
Martinson, James W., DDS

Prairie Rose Family Dental
121 E Front Ave
(701) 223-1194
Carlson, Casey B., DDS
Giese, Travis T., DDS
Hieb, Richard J., DDS
King, Bradley E., DDS
Munns, Kevin J., DDS
Quinn, William J., DDS
Schmidt, Sidney J., DDS
Spies, Christopher J., DDS

Prairie Rose Family Dental North
900 East Calgary Ave
(701) 223-8262
Carlson, Casey B., DDS
Giese, Travis T., DDS
Hollevoet, Leslie A., DDS
King, Bradley E., DDS
Munns, Kevin J., DDS
Quinn, William J., DDS
Schmidt, Sidney J., DDS
Spies, Christopher J., DDS

Smile By Design, PC
301 E Front Ave Ste 105
(701) 223-5500
Axvig, Daniel D., DDS
Dwyer, Maria, DDS

Warford Orthodontics
1145 W Turnpike
(701) 255-1311
- Orthodontist
  Warford, John H., DDS

Bottineau

Witteman, Lori, DDS, PC
109 5th St E
(701) 228-3153
Witteman, Lori J., DDS

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING DENTISTS

North Dakota (cont.)

Bowman

Anderson, Bonnie J
20 First Ave SW
(701) 523-5651
Anderson, Bonnie J., DDS

Prairie Dental Inc
608 Hwy 12 W
(701) 523-3255
Kelly, Patrick D., DDS
Sarsland, Jennifer, DDS

Carrington

Carrington Dental Care, PC
923 1st St S
(701) 652-2801
Bauer, Jay A., DDS

Garr Dental Center
318 Highway 281 NE
(701) 652-2300
Garr, Benjamin L., DMD

Casselton

Hagen Dental PC
102 Langer Ave N
(701) 347-5345
Hagen, Jesse P., DDS

Center

Dj Trzpuc, DDS, PC
111 E Main St
(701) 794-8796
Trzpuc, Darrell J., DDS

Devils Lake

Kenner, Kristin, DDS
501 5th Ave SE
(701) 662-4141
Kenner, Kristin H., DDS

Remmick, Robert, DDS, PC
310 4th St NW
(701) 662-8980
Remmick, Robert, DDS

Smilequest
206 5th Ave SE
(701) 662-8191
Herman, Rollin D., DDS
Mack, Benjamin F., DDS

North Dakota (cont.)

Dickinson

Apollonia Dental, PC
1019 W Villard
(701) 483-0857
Forster, Kristen L., DDS

Dahl & Associates
1119 Sims St
(701) 227-1193
Dahl, Jason O., DDS

Dickinson Dental Center
2 W 1st St Ste 215
(701) 483-6999
Galster, Shannon D., DDS

High Plains Dental PC
669 12th St West
(701) 483-4746
Eberts, Melissa M., DDS
Meyer, Maria D., DDS

Neuberger Dental Clinic PC
239 14th St W
(701) 483-3462
Neuberger, Lonnie S., DDS

Selle Family Dental, P.C.
1560 Western Dr
(701) 483-9801
Selle, Brent J., DDS

Drayton

Drayton Family Dentistry
110 Main
(701) 454-6218
Duncklee, Andrew D., DDS

Edmore

Legacie Dental Clinic
323a Main St
(701) 644-2254
Legacie, Larry D., DDS

Elgin

Sanderson, John, DDS
306 N Main St
(701) 584-2580
Sanderson, John F., DDS

North Dakota (cont.)

Ellendale

Dakota Dental Care, PC
210 Main St
(701) 349-3636
Schlecht, Lana R., DDS

Enderlin

Krivarchka, Duane, DDS
213 4th Ave
(701) 437-2676
Krivarchka, Duane V., DDS

Fargo

About Smiles Dental
4575 23 Ave S Ste 1200
(701) 356-4077
Sampson, Svetlana K., DDS

Advanced Dental Technologies Center
827 S 28th St
(701) 280-1020
Brant, David G., DDS

Anderson Dental
4521 38 Ave S
(701) 232-1368
Anderson, Bradley J., DDS
Anderson, Jon D., DDS

Baker, Brooke M. DDS
1790 32nd Ave S
(701) 232-0774
Baker, Brooke M., DDS

Bond, Robert A., DDS
2851 S University Dr
(701) 235-3205
Bond, Robert A., DDS

Coffey, Roger, DDS
1790 32 Ave S
(701) 232-0774
Coffey, Roger K., DDS

Cornforth, Gary, DDS
2534 S University Dr
Suite 6
(701) 232-1500
Cornforth, Gary P., DDS
- Orthodontist
  Gill, Jared B., DMD

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING DENTISTS

North Dakota (cont.)
Fargo (cont.)

Dahl, Jonathan P, DDS, PC
1324 23rd St S
(701) 237-5616

Dahl, Jonathan P., DDS
Mack, Robert D., DDS
Seaborn, Stacy L., DDS

Dakota Pediatric Dentistry PC
4265 45th St S Ste 202
(701) 478-5439

Hoge, Beth, DDS
Hoge, Chad J., DDS
Hoge, Mikala A., DDS

Dental Care Fargo
3226 13th Ave S
(701) 232-3379

Peterson, Carrie N., DDS
Zaffke, Nathan A., DDS

Designer Smiles
3525 25th St S
(701) 298-9400

Hetland, Dennis L., DDS

Dorsher, Nicholas, DDS
118 Broadway Ste 711
(701) 237-4331

Dorsher, Nicholas C., DDS

Dr. B. Dentistry
1701 38 St S
(701) 282-4044

Bonicelli, Tanya K., DDS

Edwin Shirley DDS
1231 27th St SW Ste B
(701) 235-8402

Shirley, Edwin K., DDS

Essentia Health 32nd Avenue Clinic
3000 32nd Ave S
(701) 364-8000

- Oral Surgery
  Hicks, John L., DDS

Essentia Health South University Clinic
1702 University Dr S
(701) 364-3300

- Oral Surgery
  Hicks, John L., DDS

North Dakota (cont.)
Fargo (cont.)

Family Healthcare Center
301 NP Ave
(701) 271-3344

Breding, Joshua T., DDS
Bultema, Jonathan, DDS
Podrebarac, James T., DDS
Rud, Courtney M., DDS
Sticka, Samuel J., DMD

Fargo Family Dentistry
3210 18th St S Ste B
(701) 237-6008

Colbert, James J., DDS

Friendly Smiles Family Dentistry PC
2701 9th Ave SW
(701) 364-9990

Barfield, Brenda, DDS
Johnson, Michael S., DDS
Mahale, Naina A., DDS
Slama, Ann E., DDS

George, Steven, DDS
1701 38th St SW
(701) 282-4111

George, Steven C., DDS

Heartland Dental Limited dba Evergreen Dental
1220 Main Ave Ste 220
(701) 237-6307

Fines, Casey D., DDS
Patel, Neha S., DDS
Schmaltz, Christopher J., DDS
Wells, David D., DDS

Hegge Jr, David N., DDS
1411 32nd St S
(701) 235-8978

Hegge Jr, David N., DDS

Jay P Erickson, DDS
1331 32nd Ave S #3
(701) 235-7322

Erickson, Jay P., DDS

Joel T. Kangas, DDS dba Kangas Hardy Dental, P.C.
1701 38 St SW
(701) 282-4905

Hardy, Stefanie K., DMD
Kangas, Joel T., DDS

North Dakota (cont.)
Fargo (cont.)

Johnson, James F, DDS
825 28 St SW Ste F
(701) 237-4297

Johnson, James F., DDS

Keim, Michael, DDS
2585 23 Ave S Ste B
(701) 293-0006

Keim, Michael L., DDS

- Orthodontist
  Keim, Michael L., DDS

Lysne, Daniel, DDS
1322 S 23rd St
(701) 232-3323

Lysne, Daniel G., DDS

- Periodontist
  Lysne, Daniel G., DDS

Mathison, Brian, DDS, PC
4742 Amber Valley Pkwy
(701) 356-3999

Mathison, Brian C., DDS

Mathison, Peter T. DDS PC
1351 Page Dr S Ste 102
(701) 478-4500

Mathison, Peter T., DDS

McClure Ronald P DDS
520 Main Ave Ste 705
(701) 237-4341

McClure, Ronald P., DDS

McDonald & Gruchalla, D.D.S., P.C
1231 27th St SW
(701) 235-1261

Gruchalla, Stephanie G., DDS
McDonald, James L., DDS

Moe, Terry, DDS
118 Broadway Ste 708
(701) 232-8314

Moe, Terry L., DDS

Olson-Rommesmo, Lynne, DDS
1115 19th Ave N
(701) 293-8625

Olson-Rommesmo, Lynne M., DDS

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING DENTISTS

North Dakota (cont.)
Fargo (cont.)

Pediatric Dentistry. Ltd
3142 49th St S
(701) 293-6999
Olson, Travis, DDS

Pollard, John, DDS, PC
1221 Harwood Drive S
(701) 235-6622
Pollard, John J., DDS

Riverview Family Dental
100 4th St S Ste 304
(701) 235-6075
Harnish, Derek W., DDS

Sandman Family Dentistry, Ltd
1383 21st Ave N Ste B
(701) 237-3517
Joyce, Michael P., DDS
Klemz, Charles B., DDS
Sandman, Lucas A., DDS

Saunders Robert A., DDS dba Saunders Dental
2834 S University Dr
(701) 293-9886
Krog, Brittany C., DDS
Saunders, Robert A., DDS

Serenity Valley Family Dentistry, PC
4141 31st Ave S Ste 104
(701) 373-0681
Rosenfeldt, Shandra D., DDS

South University Dental Associates, PC
3115 University Dr S
(701) 232-8884
Bergan, Chad R., DDS
Debates, Todd E., DDS
Fellman, Thomas G., DDS
Samuel, Walter V., DDS

Southpointe Dental
3210 18th St S Ste A
(701) 280-1941
Lichtsinn, James B., DDS

Spriggs Kent, DDS
2910 University Dr S
(701) 235-1113

North Dakota (cont.)
Fargo (cont.)

Spriggs Kent, DDS (cont.)
- Endodontist
  Spriggs, Kent A., DDS

Trout, Carl A DDS, PC
2538 S University Dr
Ste A
(701) 232-1148
Holman, Brent L., DDS
Trout, Carl A., DDS

Valley Dental Center, PC
1338 Gateway Dr
(701) 232-1664
Tofteland, Bruce C., DDS

Valley Oral & Facial Surgery, PC
2701 9th Ave S Ste F
(701) 235-7379
Tanabe, Marcus B., DDS

Vogelsang, David R. DDS
3003 32nd Ave S
(701) 478-3513
Vogelsang, David R., DDS

Forman

Day Family Dentistry
317 Antelope Ave W
(701) 724-3671
Day, Joshua B., DDS

Grafton

Brewer, Boone, DDS PLLC
17 E 7th St
(701) 352-2450
Brewer, Boone T., DDS

Daby, Neil, DDS
15 E 7th St
(701) 352-0730
Daby, Neil W., DDS

Kern Family Dentistry PC
21 W 5th St
(701) 352-2013
Kern, Joseph C., DDS

North Dakota (cont.)
Grand Forks

1101 Dental PLLC
1101 S Columbia Rd
Unit B
(701) 795-1101
Johnson, Heather N., DDS

Anderson, John, DDS
3425 S Washington
(701) 775-3989
Anderson, John A., DDS

Baden, John, DDS
2512-A S Washington
(701) 775-7441
Baden, John J., DDS

Bridgeford, Charles, DDS
117 N Washington
(701) 746-0485
Bridgeford, Charles L., DDS

Center For Smile Design, Ltd
117 N Washington St
(701) 746-1481
Oconnell, James R., DDS

Dakota Pediatric Dentistry PC
2812 17 Ave S Ste F
(701) 746-1400
Hoge, Beth, DDS
Hoge, Chad J., DDS
Hoge, Mikala A., DDS

Danel Jeremiah, DDS PC
2650 32nd Ave S Ste G
(701) 775-0684
Danel, Jeremiah K., DDS
- Orthodontist
  Danel, Jeremiah K., DDS

Great Northern Dental Care
667 Demers Ave
(701) 772-8488
Clayburgh, John E., DDS

Labine, Glenn, DDS
2401 S Washington St
(701) 775-0682
Labine, Glenn W., DDS

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING DENTISTS

North Dakota (cont.)

Grand Forks (cont.)

Lysne, Daniel, DDS
3325 S Washington
(701) 775-7525

Lysne, Daniel G., DDS

- Periodontist
  Lysne, Daniel G., DDS

Manke Family Dentistry, PC
2401 S Washington St
Ste B
(701) 772-8158

Manke, Rory B., DDS

Nancy C Parr, DDS, PLLC
1321 S Washington St
(701) 772-6901

Parr, Nancy C., DDS

Nuveen, Michiel J., DDS
1165 Columbia Rd S Ste A
(701) 772-4835

Nuveen, Michiel J., DMD

Parr, Brian C., DDS dba Brian C, Parr, Dds
1165 B S Columbia Rd
(701) 772-3544

Parr, Brian C., DDS

Schefter, Dan, DDS
3001 B 32nd Ave S
(701) 775-7005

Schefter, Dan J., DDS

Swanson, Steven, DDS
1323 2nd Ave N
(701) 775-4289

Swanson, Steven B., DDS

Tran, Duc, DDS
600 Demers Ave Ste 304
(701) 775-7611

Tran, Duc V., DDS

Valley Community Health Center
212 S 4th St Suite 101
(701) 757-2100

Korsmo, Grant S., DDS
Manke, Lauren R., DDS
Nord, Jackie, DDS

North Dakota (cont.)

Harvey

Meharry, Marlin, DDS PC
317 Brewster St E
(701) 324-4861

Meharry, Marlin, DDS

Hebron

Hebron Dental Clinic
811 1/2 Main St
(701) 878-4700

Leutz, Roger F., DDS

Hettinger

Nelson, Mark W, DDS
204 E Hwy 12
(701) 567-4302

Nelson, Mark W., DDS

Hillsboro

Rothfusz, Craig, DDS, PC
7 W Caledonia Ave
(701) 636-4244

Rothfusz, Craig E., DDS

Jamestown

Anderson, Edward, DDS
302 2nd Ave SW
(701) 252-1661

Anderson, Edward A., DDS

Braun, Jason, DDS
116 2nd St NW
(701) 252-0690

Braun, Jason J., DDS

Cornforth, Gary, DDS
406 1st Ave N
(701) 252-7050

Cornforth, Gary P., DDS

- Orthodontist
  Cornforth, Gary P., DDS
  Gill, Jared B., DMD

Michel, Vicki, DDS
1209 5th Ave SE
(701) 252-0251

Michel, Vicki R., DDS

North Dakota (cont.)

Jamestown (cont.)

Sinner, Timothy H, DDS PC
1209 5th Ave SE Ste 6
(701) 252-6005

Sinner, Timothy H., DDS

The Dental Specialists of Jamestown, PC
920 10th St SE Ste A
(701) 252-1212

Fallgatter, Alison M., DDS

Ukestad, James, DDS
1209 5th Ave SE
(701) 252-0141

Ukestad, James, DDS

Kenmare

Kenmare Dental Clinic
318 1st Ave NE
(701) 385-4041

Ganes, Eric M., DDS

Lidgerwood

Marotzke, James, DDS
19 Wiley Ave S
(701) 538-4583

Marotzke, James D., DDS

Linton

Turman, Cristopher, DDS
117 S Broadway
(701) 254-4521

Turman, Cristopher, DDS

Lisbon

Krivarchka, Duane, DDS
11 11th Ave W
(701) 683-4455

Krivarchka, Duane V., DDS

Lisbon Smiles
420 Main Sreet
(701) 683-7695

Nelson, Ryan M., DDS

Zeck, Francis, DDS
513 Main St
(701) 683-5821

Zeck, Francis H., DDS

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING DENTISTS

North Dakota (cont.)

Mandan

Dental Associates PC
204 3rd Ave NW
(701) 663-7545

Duckwitz, Nicole M., DDS
Grunseth, John M., DDS
Maier, Michael D., DDS
Malaktaris, Anthony G., DDS

Ideal Image Dentistry & Spa
600 E Main St Ste 2
(701) 667-1933

Brady, Leah N., DDS

Mayville

Goose River Dental Association
37 1/2 E Main St
(701) 788-4064

Lauf, Robert C., DDS

Minot

Broadway Family Dentistry
1839 S Broadway
(701) 839-1299

Hirst, Stanley B., DDS
Jensen, Bethany J., DDS

Central Valley Dentistry & Oral Health
10 1st St SW
(701) 852-3939

Krasniqi, Fatbardhe, DMD
Monson, Andrea L., DMD

Dakota Dental Health Center PLLC
515 20th Ave SE Ste 8
(701) 852-4755

Bengson, Douglas T., DDS
Dibble, Amanda, DDS
Dibble, Patricio R., DMD

Dakota Kids Dentistry, PC
2615 Elk Drive Ste 1
(701) 839-4440

Behm, Lance R., DMD

Evanoff, Gregory, DDS PC
1000 31st Ave SW
(701) 852-3222

Evanoff, Gregory A., DDS
Evanoff, Michael A., DMD

North Dakota (cont.)

Minot (cont.)

Greer Dental
1015 S Broadway #20
(701) 838-1123

Greer, Murray E., DDS

Kemmet Dental Design
1015 S Broadway #42
(701) 852-4789

Kemmet, Lindell C., DDS

Landsiedel, Patrick, DDS PC
1000 31 Ave SW
(701) 852-3222

Landsiedel, Patrick B., DDS

Maercklein, Mark DDS
720 Western Ave
(701) 839-1484

Maercklein, Mark W., DDS

Northland Community Health Center
315 Main St S Ste 314
(701) 838-3051

Krasniqi, Fatbardhe, DMD
Stemm, Wilson S., DMD
Wood, R L., DMD

Olson, David, DDS
15 2nd Ave SW
(701) 852-4933

Olson, David C., DDS
Olson, Megan M., DDS

Ricks, Stephen, DDS
900 20th Ave SW
(701) 852-2455

Ashworth, Glenn T., DDS
Ricks, Stephen L., DDS

Scouton, Larry D., DDS
315 S Main St Ste 314
(701) 838-3051

Scouton, Larry D., DDS

Trinity Medical Group
407 3rd Street SE
(701) 857-5871

- Oral Surgery
  McMahon, Michael G., DDS
  Ulloa, Juan J., DDS

North Dakota (cont.)

Minot (cont.)

Trinity Medical Group
1 Burdick Expy W
(701) 857-5000

- Oral Surgery
  McMahon, Michael G., DDS
  Ulloa, Juan J., DDS

Mohall

Brown, Theodore A., DDS
106 3rd Ave SE
(701) 756-6655

Brown, Theodore A., DDS

Mott

Apollonia Dental, PC
223 Brown Ave
(701) 824-2991

Forster, Kristen L., DDS
Gjerstad, Lawrence E., DDS

New Rockford

James River Dentistry
120 S 1st St
(701) 947-2354

Belquist, Robert L., DDS
Cudworth, Robert F., DDS
Ellingson, Amy, DDS

Oakes

Malmberg Mark DDS
19 N 6th
(701) 742-3401

Malmberg, Mark M., DDS

Park River

First Care Health Center
115 Vivan St
(701) 284-7555

Beneda, Nicholas D., DDS
Larson, Brian J., DDS

Lifetime Dental, LLC
321 Briggs Ave S Ste 3
(701) 284-7777

Ekman, Roberta L., DDS

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING DENTISTS

North Dakota (cont.)

Park River (cont.)

Park River Dental, PC
418 Briggs Ave S
(701) 284-6131

Beneda, Nicholas D., DDS
Larson, Brian J., DDS
Larson, Gerald D., DDS

Parshall

Parshall Dental Clinic
#20 S Main
(701) 862-3121

Ganes, Eric M., DDS

Richardton

Richardton Dental Clinic
200 3rd Ave W
(701) 974-2118

Johnson, Gregory J., DDS

Rolla

Turner Dental Office PC
4 3rd Ave NE
(701) 477-3821

Turner, Kenard A., DDS
Turner, William W., DDS

Rugby

Rugby Dental Office DDS PC
201 7th St SW Ste 1
(701) 776-5884

Niemi, Paul W., DDS
Santjer, Kathy L., DDS

Stanley

Anderson, Douglas, DDS, PLLC
514 4th St SE
(701) 628-2138

Anderson, Douglas B., DDS

Tioga

Carlson, David, DDS
111 Main St
(701) 664-2582

Carlson, David C., DDS

North Dakota (cont.)

Turtle Lake

Northland Community Health Center- Turtle Lake
416 Kundert St
(701) 448-9225

Stemm, Wilson S., DMD
Wood, R L., DMD

Valley City

Concept Dentistry PC
117 3rd St NW
(701) 845-2180

Bulik, Brian E., DDS
Hagen, Louis T., DDS
Slama, Ann E., DDS

Wahpeton

Ndscs Allied Dental Education Dept
800 N 6th St
(701) 671-2333

Swanson, Susan L., DDS

Three Rivers Dental, PC
1999 4th St N #B
(701) 642-2656

Pope, Joan E., DDS

Wasemiller, Mark, DDS
276 11th St S
(701) 642-4866

Wasemiller, Mark A., DDS

Withuski, Jeffrey, DDS & Sabbe, Paula S. Dds
103 9th St N Suite 2
(701) 642-8566

Sabbe, Paula S., DDS
Withuski, Jeffrey S., DDS

Watford City

Maisey Dental Clinic
109 5th St SW
(701) 842-4474

Allen, Lucas M., DDS

West Fargo

Capp, Patrick, DDS
105 13th Ave E
(701) 282-7772

Capp, Patrick J., DDS

North Dakota (cont.)

West Fargo (cont.)

Elmwood Family Dentistry, PLLP
1213 Prairie Parkway
(701) 282-5250

Bakkum, Nicholas R., DDS
Dobmeier, David D., DDS
Seeley, Bryan J., DDS

Hieb, J Christopher, DDS, PC
309 Sheyenne St
(701) 282-5035

Hieb, James C., DDS

Williston

Burke, L N, DDS
10 1/2 E 1st
(701) 774-3002

Burke, Lawrence N., DDS

Fisher, Tony, DDS
215 W Highland Dr Ste D
(701) 572-3414

Fisher, Anthony E., DDS

- Orthodontist
  Fisher, Anthony E., DDS

Hamilton, John, DDS, PC
2204 2nd Ave W Ste 101
(701) 774-8822

Hamilton, John W., DDS

Maisey Dental Clinic
708 Main St
(701) 774-1879

Allen, Lucas M., DDS
Maisey, Edward D., DDS
Maisey, William H., DDS

Messer Dental PC
2224 1st Ave W
(701) 774-0404

Messer, Jeremy J., DMD
Seeley, Ron J., DDS

Ulloa, Juan J, DDS dba Implant and Maxillofacial Surgical Ce
2224 1st Ave W Ste 3
(701) 572-2046

- Oral Surgery
  Ulloa, Juan J., DDS

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING DENTISTS

North Dakota (cont.)

Wishek

Turman, Cristopher, DDS
521 Beaver Ave
(701) 452-2115

Turman, Cristopher, DDS

South Dakota

Aberdeen

Carrels & Bain Family Dental Care
805 South State St
(605) 225-1192

Bain, Mark, DDS

Northeastern Dental Center
3015 6th Ave SE
(605) 226-3939

Van Beek, Gregg, DDS

Opp, Darold D, DDS, PC
1409 6th Ave SE Ste 8
(605) 225-2236

Opp, Darold D., DDS

Smile Solutions
105 6th Ave SE
(605) 725-1500

Scepaniak, Amy M., DDS

Britton

Day Family Dentistry
701 Main St
(605) 448-5977

Day, Joshua B., DDS

Eureka

Eureka Family Dental Care
708 G Avenue
(605) 284-2461

Bain, Mark, DDS

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING ANCILLARY PROVIDERS

California

S San Fran

Counsyl Inc
180 Kimball Way
(888) 268-6795

- Independent Laboratory
  Counsyl, Inc

Colorado

Lone Tree

Zynex Medical, Inc.
9990 Park Meadows Drive
(800) 495-6670

- Home Medical Equipment
  Zynex Medical, Inc.

Florida

Stuart

Liberator Medical Supply, Inc.
2979 SE Gran Park Way
(800) 536-2390

- Home Medical Equipment
  Liberator Medical Supply, Inc

Minnesota

Ada

Bridges Medical Center dba Essentia Health Ada Clinic
201 9th Street W
(218) 784-2727

- Certified Registered Nurse Anesthetist
  Bulik, Robert E., CRNA
  Honeyman, Ron L., CRNA
  Kremer, Randall L., CRNA
  Spicer, Nathan M., CRNA
  Strasburg, Ryan G., CRNA
- Physician Assistant
  Dangerud, Chentel, PA
  Skyberg, Angela M., PA

Red River Counseling PLLC
110 3rd Ave E
(218) 227-0338

- Psychology
  Hamann, Linda R., MS

Minnesota (cont.)

Alexandria

Rice Home Medical, LLC
115 18th Ave W
(320) 235-8434

- Home Medical Equipment
  Rice Home Medical LLC

Rice Home Medical, LLC
1804 S Bdwy Ste 160
(320) 235-8434

- Home Medical Equipment
  Rice Home Medical LLC

Barnesville

Barnesville Area Clinic
209 2nd St SE
(218) 354-2111

- Nurse Practitioner
  Hohman, Adam G., FNP
- Physician Assistant
  Johnson, Ronald M., PA

Rehab Plus Barnesville
220 Front Street
(218) 354-7080

- Physical Therapy
  Larson, Peter N., PT

Breckenridge

Orthopedic and Sports Physical Therapy Inc
430 5th St N
(218) 641-7725

- Occupational Therapy
  Dotzenrod, Alison R., OT
  Holubok, Gregory D., OT
- Physical Therapy
  Dockter, Rebecca S., PT
  Eggiman, Anthony C., PT
  Kraemer, Jennifer N., PT
  Krause-Roberts, Shawn M., PT
  Paulson, Tera D., PT
- Speech Therapy
  Hoffert, April, ST

R P Ascano & Associates Inc.
614 Nebraska Ave
(218) 643-3867

- Psychology
  Ascano, R P., PHD

Minnesota (cont.)

Breckenridge (cont.)

Red River Anesthesia PC
2400 St Francis Dr
(800) 922-5852

- Certified Registered Nurse Anesthetist
  Genereux, Heidi E., CRNA
  Splichal, Robert J., CRNA
  Vaughn, Rita K., CRNA

St Francis Medical Center
2400 St Francis Drive
(218) 643-3000

- Licensed Addiction Counselor-Chemical Dependency
  Clark, Sherri E., LAC
- Nurse Practitioner
  Rick, Brenda M., FNP
- Occupational Therapy
  Kjar, Jason C., OT
- Physical Therapy
  Gregerson, Kyle A., PT
  Hansen, Casey J., PT
  Jelinek, Denise R., PT
  Lynch, Brian J., PT
- Physical/Occupational Therapist
  Kjar, Jason C., OT
- Psychology
  Ketterling, Jan E., PSYD
  Molstre, John A., PHD
- Speech Therapy
  Francois, Sara, ST

Thrifty White Drug #781
126 N 5th St
(218) 643-3871

- Home Medical Equipment
  Thrifty White Drug #781

Crookston

Altru Crookston
400 S Minnesota St
(218) 281-9100

- Audiology
  Brandt, Mackensie M., AUD
- Licensed Registered Dietitian
  Love, Marla R., LRD
- Nurse Practitioner
  Devine Roberts, Jacqueline R., CNP
  Dorman, Seth T., FNP

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING ANCILLARY PROVIDERS

Minnesota (cont.)
Crookston (cont.)

Altru Crookston (cont.)

- Nurse Practitioner (continued)
  Laframboise, Jennifer L., FNP
  Olson, Wade A., FNP
  Rustvang, Daniel R., FNP
  Sperle, Roni L., FNP
  Suda, Amy L., FNP
  Tinkler, Jennifer A., FNP
- Occupational Therapy
  Knott, Christina M., OT
- Physical Therapy
  Knott, Kristin R., PT
  Kunz, Carter K., PT
- Physical/Occupational Therapist
  Knott, Christina M., OT
- Physician Assistant
  Clauson, Carrie B., PA
  Linnen, Katherine M., PA
  Myrfield, Deborah L., PA
  Ring, Karin E., PA
  Staveteig, Mindy S., PA
  Wright, Shellie D., PA

Altru Specialty Services Inc Crookston dba Yorhom Medical Es
400 S Minnesota St
(218) 281-9176

- Home Medical Equipment
  Altru Specialty Services Inc Crookston dba Y

Northwestern Mental Health Center, Inc.
603 Bruce St
(218) 281-3940

- Licensed Professional Clinical Counselor
  Amundson, Janet L., LPCC
  Serna, Carrie L., LPCC
  Solheim, Sheri L., LPCC
  Taylor, Heather, LPCC
- Licensed Professional Counselor/Therapist
  Williams, Gail E., LPCC
- Nurse Practitioner
  Holler-Bibel, Mary P., CNP
- Psychology
  Campbell, Karen L., PHD
  Gudvangen, Denise R., PSYD
  Jorgens, Michal C., PHD
  Pedersen, Heather A., PHD

Minnesota (cont.)
Crookston (cont.)

Riverview Family Practice
323 S Minnesota St
(218) 281-9519

- Nurse Practitioner
  Nupdal, Jason B., CNP
- Physician Assistant
  Reese, Paul L., PA

Riverview Health dba Glenmore Recovery Center
23616 Us Hwy 2 SW
(218) 281-9511

- Licensed Addiction Counselor-Chemical Dependency
  Buseth, Oliver, LAC
  Johnson, Ashley A., LAC
  Niffenegger, Angela, LAC
  Reff, Thomas M., LAC

Riverview Healthcare Association
323 S Minnesota St
(218) 281-9200

- Certified Registered Nurse Anesthetist
  Buettner, Kevin C., CRNA
  Channel, Eileen M., CRNA
  Eversvik, Jeremy J., CRNA
  Kaiser, Brent A., CRNA
  Krueger, Curtis C., CRNA
  Macleod, Mary C., CRNA
  Nuelle, David B., CRNA
  Osowski, Lynn, CRNA
  Reese, Gregory H., CRNA
  Roed, Eric B., CRNA
  Siemers, Trent E., CRNA
  Wolfgram, Alicia M., CRNA
- Home Medical Equipment
  Riverview Healthcare
- Nurse Practitioner
  Anderson, Kari L., FNP
  Nupdal, Jason B., CNP
- Occupational Therapy
  Maruska, Crystal A., OT
- Physician Assistant
  Bratvold, Marion J., PA
  Reese, Paul L., PA
- Speech Therapy
  Cameron, Ashley D., ST

Minnesota (cont.)
Crookston (cont.)

Riverview Specialty Clinic
323 S Minnesota St
(218) 281-9595

- Nurse Midwives
  Hemler, Elizabeth A., CNM
- Nurse Practitioner
  Anderson, Kari L., FNP
  Nupdal, Jason B., CNP
  Royal, Natalie R., FNP
  Sundberg, David P., FNP
  Updike, Meghan T., CNP
- Physician Assistant
  Bratvold, Marion J., PA
  Haas, Carly M., PA
  Massmann, Matthew S., PA
  Reese, Paul L., PA
- Psychology
  King, Brenda J., PHD

Thrifty White Drug # 729
206 N Main St
(218) 281-2540

- Home Medical Equipment
  Thrifty White Drug # 729

Tri County Community Corrections
816 Marin Ave Ste 110
(218) 470-8134

- Licensed Addiction Counselor-Chemical Dependency
  Thibert, Mary, LAC

Duluth

Midwest Medical Equipment & Supplies, Inc.
530 E 2nd St
(218) 786-4368

- Home Medical Equipment
  Midwest Medical Equipment & Supplies, Inc

Midwest Medical Equipment & Supplies, Inc.
4418 Haines Rd #1200
(218) 722-3420

- Home Medical Equipment
  Midwest Medical Equipment & Supplies, Inc

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING ANCILLARY PROVIDERS

Minnesota (cont.)
E Grand Forks

Achieve Therapy
408 3rd St NW
(218) 773-3388

- Physical Therapy
  Bolek, Megan E., PT
  Carson, Thomas L., PT
  Lafreniere, Clifford W., PT
  Walsh, Heather A., PT
  Wilcox, Lacey J., PT

Altru Clinic East Grand Forks
607 Demers Ave
(218) 773-0357

- Nurse Practitioner
  Meyer, Lana J., FNP
  Suda, Amy L., FNP
  Tinkler, Jennifer A., FNP

Patrick Hart, LPCC
1125 18th Ave SE
(218) 289-6177

- Licensed Professional Clinical Counselor
  Hart, Patrick E., LPCC

Riverview Health dba Glenmore Recovery Center
1424 Central Ave NE
(218) 773-4994

- Licensed Addiction Counselor-Chemical Dependency
  Buseth, Oliver, LAC

Riverview Specialty Clinic-E. Grand Forks
1428 Central Ave NE
(866) 773-1390

- Nurse Practitioner
  Anderson, Kari L., FNP
  Gullicks, Jean N., CNP
  Royal, Natalie R., FNP
  Updike, Meghan T., CNP
- Physician Assistant
  Haas, Carly M., PA

Sanford Health 621 Demers Ave Clinic
621 Demers Ave
(218) 773-5858

- Audiology
  Kjersten, Wendy L., AUD

Minnesota (cont.)
E Grand Forks (cont.)

Sanford Health 621 Demers Ave Clinic (cont.)

- Nurse Practitioner
  Spiekermeier, Michele A., CNP
- Physical Therapy
  Jung, Laurie T., PT
  Klabunde, Joshua P., PT
  Ness, Richard J., PT
  Parvey, Christel, PT
- Physician Assistant
  Hinkle, Stephanie, PA

Sanford Health 929 Central Ave Clinic
929 Central Ave NW
(218) 773-6800

- Licensed Registered Dietitian
  Grove, Denae D., LRD
- Nurse Practitioner
  Berge, Cheri J., CNP
  Spiekermeier, Michele A., CNP
- Physician Assistant
  Braun, Lisa, PA
  Hinkle, Stephanie, PA

Sanford Healthcare Accessories East Grand Forks
621 Demers Ave
(218) 773-5840

- Home Infusion
  Sanford Healthcare Accessories East Grand Fo
- Home Medical Equipment
  Sanford Healthcare Accessories East Grand Fo

Erskine

Altru Clinic Erskine
23076 347th St SE
(218) 687-5317

- Nurse Practitioner
  Dorman, Seth T., FNP
  Rustvang, Daniel R., FNP
- Physician Assistant
  Myrfield, Deborah L., PA
  Staveteig, Mindy S., PA

Minnesota (cont.)
Fertile

Altru Clinic Fertile
101 N Mill St
(218) 945-6064

- Nurse Practitioner
  Dorman, Seth T., FNP
  Rustvang, Daniel R., FNP
- Physician Assistant
  Clauson, Carrie B., PA
  Ring, Karin E., PA
  Staveteig, Mindy S., PA

Poissant Therapy and Fitness
208 N Mill St
(218) 945-3409

- Physical Therapy
  Poissant, Steven L., PT

Riverview Family Practice Fertile
306 North Mill Street
(218) 945-6695

- Nurse Practitioner
  Nupdal, Jason B., CNP
  Royal, Natalie R., FNP
  Updike, Meghan T., CNP
- Physician Assistant
  Bratvold, Marion J., PA
  Haas, Carly M., PA
  Reese, Paul L., PA

Fosston

First Care Medical Services dba Essentia Health - Fosston
900 Hilligoss Blvd SE
(218) 435-1500

- Certified Registered Nurse Anesthetist
  Lane, Mary K., CRNA
  Spicer, Nathan M., CRNA
  Strasburg, Ryan G., CRNA
- Nurse Practitioner
  Duppong, Maija L., CNP
  Vobr, Nan C., FNP
- Physician Assistant
  Dargus, Corinne A., PA
  Kiesow, Nicole M., PA
  Melgard, Margaret A., PA
  Wahlin-Quinlan, Shelley, PA

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING ANCILLARY PROVIDERS

Minnesota (cont.)

Hallock

Kittson Memorial Clinic
1010 S Birch
(218) 843-2165

- Nurse Practitioner
  Johnson, Julie A., FNP
  Pinnock, Amanda J., FNP
- Physician Assistant
  Warner, Karen J., PA

Halstad

Sanford Health Halstad Clinic
445 1st St E
(218) 456-2158

- Physician Assistant
  Herbst, Harold J., PA
  Hinkle, Stephanie, PA
  Owens, Ann, PA

Hawley

Mobility Plus Rehabilitation
520 Main Street
(218) 483-1500

- Occupational Therapy
  Dahl, Robert L., OT
- Physical Therapy
  Johnson, Loriann M., PT

Sanford Hawley Clinic
1412 Main St
(218) 483-3564

- Licensed Registered Dietitian
  Martodam, Susan M., LRD
- Nurse Practitioner
  Gross, Dean A., CNP
  Tobkin, Julie, FNP
- Physician Assistant
  Affield, Carrie A., PA
  Hass, Tabitha, PA
  Herbst, Harold J., PA
  Hinkle, Stephanie, PA
  Zimney, Stacy J., PA
- Psychology
  Gatheridge, Brian, PHD

Sanford Hawley Clinic
1412 Main St
(218) 483-3564

- Licensed Registered Dietitian
  Martodam, Susan M., LRD

Minnesota (cont.)

Hawley (cont.)

Sanford Hawley Clinic (cont.)

- Nurse Practitioner
  Gross, Dean A., CNP
  Tobkin, Julie, FNP
- Physician Assistant
  Affield, Carrie A., PA
  Hass, Tabitha, PA
  Herbst, Harold J., PA
  Hinkle, Stephanie, PA
  Waage, Kagen, PA
  Zimney, Stacy J., PA
- Psychology
  Gatheridge, Brian, PHD

Karlstad

Kittson Memorial Clinic of Karlstad
205 Roosevelt Ave
(218) 436-2251

- Nurse Practitioner
  Pinnock, Amanda J., FNP
- Physician Assistant
  Anderson, Paul R., PA

Madison

Rice Home Medical LLC
105 Sixth Ave
(320) 235-8434

- Home Medical Equipment
  Rice Home Medical LLC

Minneapolis

Tactile Systems Technology Inc
1331 Tyler St NE Ste 200
(612) 355-5100

- Home Medical Equipment
  Tactile Systems Technology Inc

Moorhead

7 Day Clinic
720 Main Ave
(701) 232-6211

- Nurse Practitioner
  Allard, Amy M., FNP
  Dolalie-Kelsch, Angela A., CNP
  Ek, Marilyn S., FNP
  Forsythe, Suzanne K., CNP
  Hamilton, Andrew P., FNP

Minnesota (cont.)

Moorhead (cont.)

7 Day Clinic (cont.)

- Physician Assistant
  Davidson, Gabriel L., PA
  Eastman, Nancy M., PA
  Nycklemoe-Connell, Joan L., PA

Coram Alternate Site Services Inc
2901 Frontage Road S
Hwy 10 E Ste 7
(218) 233-2210

- Home Infusion
  Coram Healthcare Inc

Drake Counseling Services, Inc
715 11 St North
Suite 204
(218) 477-1092

- Licensed Addiction Counselor-Chemical Dependency
  Flann, Kayla J., LAC
  Hersrud, Jacqueline M., LAC
  Johnson, Janna M., LAC

Duke, Bill, PhD
420 Center Ave Ste 7
(701) 241-9281

- Psychology
  Duke, Bill J., PHD

Duke, Denise, EDD
420 Center Ave Ste 7
(701) 241-9281

- Psychology
  Duke, Denise M., EDD

Essentia Health Moorhead Clinic
801 Belsly Blvd S
(701) 364-8900

- Certified Diabetic Educator
  Kocka, Tia M., CDE
  Walters, Leah M., CDE
- Licensed Registered Dietitian
  Andvik, Vicki, LRD
  Walters, Leah M., LRD
- Nurse Practitioner
  Garberg, Tamra A., FNP
  Safranski, Mary B., CNP
  Weston, Penni M., FNP
- Occupational Therapy
  Enockson, Michelle I., OT
  McKibbin, Randon N., OT
  Mueller, Amy L., OT

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING ANCILLARY PROVIDERS

Essentia Health Moorhead Clinic (cont.)
- Physical Therapy
  Bitz, Heidi S., PT
  Brekke, Teri J., PT
  Gauer, Chelsey N., PT
  Gunkelman, Ashley L., PT
  Halls, Ruth Ann, PT
  Isaak, Christine M., PT
  Kowalski, Darrin P., PT
  Sauvageau, Katie M., PT
  Sunde, Lizette, PT
- Physical/Occupational Therapist
  Enockson, Michelle I., OT
  Mueller, Amy L., OT
- Physician Assistant
  Norby, Brenda J., PA
  Olson-Fitzgerald, Heidi M., PA
- Speech Therapy
  Sullivan, Patricia C., ST

Family Healthcare Center At Concordia Health Services
901 S 8th St
(218) 299-3662
- Nurse Practitioner
  Ross, Cheryl, FNP

Hendrix Health Center
1104 7th Ave S
(218) 477-2623
- Psychology
  Bertelsen, Lora, PHD
  Lall, Rita, MS

Integrated Counseling Services Inc
1132 28th Ave S Ste 102
(218) 204-1183
- Psychology
  Follingstad, Carol C., PSYD

Karen Knutson, PhD
1506 Main Ave Ste 101
(218) 287-2872
- Psychology
  Knutson, Karen, PHD

Kolotkin, Richard, PhD
403 Center Ave Ste 601
(701) 280-2484
- Psychology
  Kolotkin, Richard A., PHD

Kuznia Colette C. LPCC
403 Center Ave Ste 405
(218) 233-9426
- Licensed Professional Clinical Counselor
  Kuznia, Colette C., LPCC

Lakeland Mental Health Center Inc
1010 32nd Ave S
(218) 233-7524
- Licensed Professional Clinical Counselor
  Stielow, Ashley L., LPCC
- Nurse Practitioner
  Graham Steinhauer, Jessica K., CNP
- Psychology
  Molstre, John A., PHD

Med-Plus Therapy Ltd
312 Hwy 75 N
(218) 233-8544
- Physical Therapy
  Crockett, Jodi, PT

Medical Pharmacy Moorhead
101 11th St S
(218) 233-7365
- Home Medical Equipment
  Medical Pharmacy

Migrant Health Services Inc-Moorhead
810 4th Ave S Ste 101
(218) 236-6502
- Nurse Practitioner
  Checco De Souza, Jocelyn, FNP
  Gibson, Beverly A., FNP

Minnesota Hearing Aid Center of Moorhead
725 Center Ave
(218) 233-1116
- Home Medical Equipment
  Minnesota Hearing Aid Ctr. of Moorhead,Ltd

MSUM Speech, Language & Hearing Clinic
1104 7th Ave S
(218) 477-5953
- Audiology
  Drake, Mary K., AUD

MSUM Speech, Language & Hearing Clinic (cont.)
- Speech Therapy
  Adler, Richard K., ST
  Hanson, Bruce R., ST
  Mehrhoff, Joni K., ST
  Paul, Nancy A., ST
  Plankers, Maribeth K., ST
  Pyle, Elaine K., ST
  Riedinger, Vicki L., ST
  Stotts, Rachel L., ST
  Vossler, Kristi A., ST
  Walseth, Wanda C., ST

Prairie St Johns
2925 20th St S
(218) 284-0300
- Nurse Practitioner
  Conteh, Patricia E., CNP

Red River Counseling PLLC
403 Center Ave Ste 410
(218) 227-0338
- Psychology
  Hamann, Linda R., MS

Sanford Moorhead Clinic
4000 28th Ave S
(701) 234-3200
- Independent Laboratory
  Sanford Moorhead Clinic Lab
- Licensed Registered Dietitian
  Williams, Michelle D., LRD
- Nurse Practitioner
  Eldridge, Rose Mary, CNP
  Kary, Shelby, FNP
  Teske, Victoria R., CNP
- Physician Assistant
  Fisher, Jennifer, PA
  Hoffmann-Carroll, Joanna E., PA
  Kringlie, Cassandra, PA
  Marsden, Jenny K., PA
- Psychiatric Nurse
  Cameron, Kathryn M., CNS

Sanford Moorhead Clinic
4000 28th Ave S
(701) 234-3200
- Licensed Registered Dietitian
  Williams, Michelle D., LRD

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING ANCILLARY PROVIDERS

Minnesota (cont.)
Moorhead (cont.)

Sanford Moorhead Clinic (cont.)
- Nurse Practitioner
  Eldridge, Rose Mary, CNP
  Hoban, Alissa, CNP
  Hoffmann, Jennifer, FNP
  Kary, Shelby, FNP
  Teske, Victoria R., CNP
- Physician Assistant
  Fisher, Jennifer, PA
  Hoffmann-Carroll, Joanna E., PA
  Kringlie, Cassandra, PA
  Marsden, Jenny K., PA
- Psychiatric Nurse
  Cameron, Kathryn M., CNS
- Psychology
  Maley, Robyn, PSYD
  Preussler, Rebecca S., PSYD

Sanford Moorhead Clinic
4000 28th Ave S
(701) 234-3200
- Licensed Registered Dietitian
  Williams, Michelle D., LRD
- Nurse Practitioner
  Carlson, Kari, CNP
  Eldridge, Rose Mary, CNP
  Hoban, Alissa, CNP
  Teske, Victoria R., CNP
- Physician Assistant
  Fisher, Jennifer, PA
  Hoffmann-Carroll, Joanna E., PA
  Kringlie, Cassandra, PA
  Marsden, Jenny K., PA
- Psychiatric Nurse
  Cameron, Kathryn M., CNS
- Psychology
  Maley, Robyn, PSYD

Solutions Behavioral Healthcare Professionals, Inc.
891 Belsly Blvd
(218) 287-4338
- Psychology
  Cox, Joseph M., PSYD
  Ochsendorf, Amy L., PSYD
  Paulson, Michael D., PHD
  Witte-Bakken, Jan K., PHD

Minnesota (cont.)
Redwood Falls

Rice Home Medical, LLC
252 Second St E
(320) 235-8434
- Home Medical Equipment
  Rice Home Medical LLC

Thief River Fls

Rehab Authority LLC
1511 Highway 59 South
(218) 681-0449
- Physical Therapy
  Kraemer, Jennifer N., PT

Twin Valley

Sanford Health Twin Valley Clinic
501 2nd St NW
(218) 584-5142
- Licensed Registered Dietitian
  Rockstad, Gretchen B., LRD
- Nurse Practitioner
  Larson, Joeanna, FNP
- Physician Assistant
  Affield, Carrie A., PA
  Herbst, Harold J., PA
  Hinkle, Stephanie, PA
  Waage, Kagen, PA
  Zimney, Stacy J., PA

Ulen

Sanford Health Ulen Clinic
108 Viking Ave W
(218) 596-8867
- Nurse Practitioner
  Gross, Dean A., CNP
- Physician Assistant
  Affield, Carrie A., PA
  Hass, Tabitha, PA
  Herbst, Harold J., PA
  Hinkle, Stephanie, PA
  Waage, Kagen, PA
  Zimney, Stacy J., PA

Wheaton

Sanford Wheaton
401 12th St N
(320) 563-8971
- Physician Assistant
  Braun, Lisa, PA

Minnesota (cont.)
Wheaton (cont.)

Sanford Wheaton
401 12th St N
(320) 563-8971
- Physician Assistant
  Braun, Lisa, PA

Sanford Wheaton
401 12 St N
(320) 563-8971
- Nurse Practitioner
  Colon, Deborah, CNP
  Kremer, Kathi, FNP
  Rinke, Michelle, FNP
- Physician Assistant
  Braun, Lisa, PA
  Waage, Kagen, PA

Willmar

Rice Home Medical, LLC
1033 19th Ave SW
(320) 235-8434
- Home Medical Equipment
  Rice Home Medical LLC

Montana
Sidney

District II Alcohol & Drug
209 2 St SE
(406) 433-4097
- Licensed Addiction Counselor-Chemical Dependency
  Anderson, Tim G., LAC

Thrifty White Pharmacy #25
402 E Main St
(406) 482-1420
- Home Medical Equipment
  White Drug #25

New Jersey
Hamilton

Medical Diagnostic Laboratories LLC
2439 Kuser Road
(877) 333-9233
- Independent Laboratory
  Medical Diagnostic Laboratories, LLC

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING ANCILLARY PROVIDERS

New York
Hauppauge

Better Living Now Inc
185 Oser Ave
(800) 854-5729

- Home Medical Equipment
  Better Living Now Inc

New York

Yummy Mummy LLC
1201 Lexington Ave
(516) 931-6300

- Home Medical Equipment
  Yummy Mummy

North Dakota
Arthur

Arthur Drug
340 Main St
(701) 967-8900

- Home Medical Equipment
  Casselton Drug Inc dba Arthur Drug

Ashley

Ashley Medical Center
612 Center Ave N
(701) 288-3448

- Licensed Registered Dietitian
  Imdieke, Catherine B., LRD
- Nurse Practitioner
  Bichler, Lori M., CNP
  Klein, Nina J., FNP

Ashley Medical Center
612 Center Ave N
(701) 288-3433

- Certified Registered Nurse Anesthetist
  Mettler, Daniel W., CRNA
- Licensed Registered Dietitian
  Imdieke, Catherine B., LRD

Sanford Bismarck At Ashley Medical Center
612 Center Ave N
(701) 288-3438

- Audiology
  Arneson-Thilmony, Debra J., AUD
  Boutilier, Amanda D., AUD
  Mann, Krystal L., AUD

North Dakota (cont.)
Ashley (cont.)

Sanford Bismarck At Ashley Medical Center (cont.)

- Audiology (continued)
  Mattheis Anderson, Amy M., AUD
  Ness, Brady J., AUD
  Schauer, Douglas D., AUD

White Drug #66
109 W Main St
(701) 288-3355

- Home Medical Equipment
  White Drug #66

Beach

Advanced Physical Therapy and Fitness, LLC
61 South Central Ave #6
(701) 751-3001

- Occupational Therapy
  Brown, Melissa, OT
- Physical Therapy
  Hollar, Anthony C., PT
  Jurgens-Dinius, Nicholl, PT

Beach Medical Clinic
95 2nd St NW
(701) 872-3777

- Nurse Practitioner
  Hardy, Michelle M., CNP
  Jepson, Lori A., CNP
  Medford, Jessica L., FNP
- Physician Assistant
  Olstad, Kristina M., PA

Telepharmacy Concepts Inc dba Beach Pharmacy
180 Central Ave N
(701) 872-2800

- Home Medical Equipment
  Telepharmacy Concepts dba Beach Pharmacy

Beulah

Beulah Drug Co
147 W Main
(701) 873-5215

- Home Medical Equipment
  Beulah Drug Co

North Dakota (cont.)
Beulah (cont.)

Coal Country Community Health Center
1312 Highway 49 N
(701) 873-4445

- Licensed Addiction Counselor-Chemical Dependency
  Herman, Melissa M., LAC
  Oster, Sharold E., LAC
  White, Darlene S., LAC
- Licensed Registered Dietitian
  Langeliers, Jean D., LRD
- Nurse Practitioner
  Olson, Sharon J., CNP
  Rogness, Corrie L., CNP
  Sailer, Debra L., CNP
- Physical Therapy
  Klindworth, Eric H., PT
- Physician Assistant
  Mollman, Burton J., PA
  Olson, Kayla L., PA
  Zimmerman, Beth, PA

Sakakawea Medical Center
118 22nd St NE
(701) 873-3271

- Physical Therapy
  Huber, Dannette R., PT
  Miller, Nicholas J., PT

Sanford Bismarck At Coal Country Community Health
1312 Hwy 49 N
(701) 323-6000

- Audiology
  Arneson-Thilmony, Debra J., AUD
  Boutilier, Amanda D., AUD
  Mann, Krystal L., AUD
  Mattheis Anderson, Amy M., AUD
  Schauer, Douglas D., AUD

Bismarck

Advanced Physical Therapy and Fitness LLC At Healthways
1033 Basin Ave
(701) 751-3001

- Physical Therapy
  Bakkum, Matthew P., PT

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING ANCILLARY PROVIDERS

Advanced Physical Therapy and Fitness, LLC
1000 Tacoma Ave Ste 500
(701) 751-3001

- Physical Therapy
  Bakkum, Matthew P., PT
  Hieb, Marcus A., PT
  Hieb, Nada D., PT
  Hollar, Anthony C., PT

Advanced Surgical Arts Center
3913 Lockport St
(701) 530-8450

- Certified Registered Nurse Anesthetist
  Christ, Renee, CRNA
  Filler, Laura K., CRNA
  Freitag, Heather, CRNA
  Oshea, Carol W., CRNA
  Schaar, Launi M., CRNA

Anchor Christian Counseling Inc
1501 N 12th St
(701) 255-3325

- Licensed Professional Clinical Counselor
  Holden, Harley A., LPCC

Baker Family Medicine PC
300 West Century Ave
(701) 751-4340

- Nurse Practitioner
  Todd-Reisnour, Kristie L., CNP

Basaraba Counseling Service
433 E Bismarck Expwy #3
(701) 224-1615

- Licensed Addiction Counselor-Chemical Dependency
  Basaraba, Rose, LAC

Becker Plastic Surgery Center
1500 Interchange Ave
Ste 100
(701) 530-3333

- Certified Registered Nurse Anesthetist
  Ahneman, Jon, CRNA
  Klein, Kevin L., CRNA
  Kuennen, Timothy S., CRNA
  McArthur, Ryan, CRNA
  Walford, Steven M., CRNA

Becker Plastic Surgery, LLC
1500 Interchange Ave
Ste 100
(701) 530-3333

- Nurse Practitioner
  Sondrol, Cynthia, FNP

Bismarck Surgical Associates, LLC
600 N 9th St
(701) 221-2299

- Certified Registered Nurse Anesthetist
  Albert, Kory M., CRNA
  Dollinger, Jay, CRNA
  Geiger, Kim E., CRNA
  Goeddertz, John P., CRNA
  Hildebrandt-Folske, Carla J., CRNA
  Kuennen, Timothy S., CRNA
  Manders, Landa, CRNA
  Maund, Michelle, CRNA
  Oshea, Carol W., CRNA
  Roloff, Diana J., CRNA
  Schaar, Launi M., CRNA
  Staiger, Joshua J., CRNA
  Town, Jerry R., CRNA
  Walth, Doran D., CRNA

Cc's Physical Therapy, LLC
215 E Broadway Ave
Ste 130
(701) 751-0994

- Physical Therapy
  Mettler, April J., PT
  Rambur, Jenny M., PT

Center For Family Medicine
701 E Rosser
(701) 751-9500

- Licensed Professional Clinical Counselor
  Luger, Brynn, LPCC
- Nurse Practitioner
  Melby, Kristin L., FNP

Chambers & Blohm Psychological Services, PC
309 N Mandan St Ste 1
(701) 323-0924

- Licensed Addiction Counselor-Chemical Dependency
  Weisz, Shannon P., LAC

Chambers & Blohm Psychological Services, PC (cont.)

- Psychiatric Nurse
  Fike, Michelle M., PNU
  Hellman, Lauree L., PNU
- Psychology
  Blohm, Kathy, PHD
  Johnson, Robert A., PHD
  Weisz, Shannon P., PSYD

Choices Counseling & Educational Center
1655 N Grandview Ln 204
(701) 751-2020

- Licensed Professional Clinical Counselor
  Herner, Diana L., LPCC

Chuppe Chiropractic Clinic
1936 N 11th St
(701) 258-0029

- Physical Therapy
  Romsaas, Jodi E., PT

Crosspoint Counseling
1655 N Grandview Lane
#204
(701) 751-2020

- Licensed Professional Clinical Counselor
  Mitzel, Julie M., LPCC

Dakota Eye Institute
200 S 5th St
(701) 222-3937

- Nurse Practitioner
  Pfenning, Stacey R., CNP
  Rising, Cheryl D., FNP
  Sandness, Amber, FNP

Dakota Eye Institute
3119 N 14th St
(701) 222-3937

- Nurse Practitioner
  Pfenning, Stacey R., CNP
  Rising, Cheryl D., FNP
  Sandness, Amber, FNP

Dakota Foot & Ankle Clinic
1733 E Capital Ave
(701) 255-3338

- Home Medical Equipment
  Dakota Foot & Ankle Clinic

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING ANCILLARY PROVIDERS

Dakota Institute of Trauma Therapy PC
4023 State St Ste 120
(701) 751-4447

- Licensed Addiction Counselor-Chemical Dependency
  Klein-Buffington, Shelley K., LAC

Dakota Pharmacy
705 E Main Ave
(701) 255-1881

- Pharmacy
  Dakota Pharmacy

Dakota Physical Therapy PC
1000 W Century Ave
(701) 355-1295

- Physical Therapy
  Bergan, April, PT
  Bergan, Chad M., PT
  Gietzen, Chris, PT
  Lang, Monica L., PT

Dakota Physical Therapy,PC
3124 Colorado Lane
(701) 751-5325

- Physical Therapy
  Bergan, April, PT
  Bergan, Chad M., PT
  Gietzen, Chris, PT

Dakota Surgery & Laser Center
430 E Sweet Ave
(701) 222-4900

- Certified Registered Nurse Anesthetist
  Kovar, Kathryn M., CRNA
  Martin, Donald C., CRNA
  Nelson, Denise, CRNA
  Schmidt, Cloris L., CRNA
  Schwindt, Brian E., CRNA

Decoteau Trauma-Informed Care & Practice, PLLC Td
515 1/2 E Broadway Ave
Ste 106
(701) 751-0443

- Nurse Practitioner
  Clark, Bonnie L., FNP
- Psychology
  Decoteau, Tami J., PHD
  Gustafson, Lisa A., PHD

Dsj Enterprises, LLC dba Aim Physical Therapy Clinic
2945 N 11 St
(701) 258-7730

- Physical Therapy
  Churchill, Stephen P., PT
  Fischer, Jonathan J., PT

Face & Jaw Surgery Center
1140 W Capitol Ave
(701) 258-7220

- Certified Registered Nurse Anesthetist
  Schwindt, Brian E., CRNA

Focus Chiropractic
1122 Divide Ave W
(701) 258-5058

- Physical Therapy
  Bossert, Amber D., PT

Foot Care Associates, PC
310 S 5th Street
(701) 250-8637

- Home Medical Equipment
  Foot Care Associates

Forte Pathroff, Denise, MD PC
225 N 7th St Suite B
(701) 224-9643

- Nurse Practitioner
  Martin, Shih Ru, CNP

Four Directions Clinic
300 West Century Ave
(701) 323-9900

- Nurse Practitioner
  Greybull, Ian L., FNP

Gateway Pharmacy
3101 N 11th St Ste 2
(701) 224-9521

- Home Medical Equipment
  Gateway Pharmacy North

Great Plains Rehab Service
1212 E Main Ave
(701) 530-4000

- Home Medical Equipment
  Great Plains Rehab Service

Hanger Prosthetics & Orthotics
721 E Rosser Ave
(701) 221-3000

- Home Medical Equipment
  Hanger Prosthetics & Orthotics

Haugen, Stacey, CNS
6221 University Dr
(701) 258-4483

- Psychiatric Nurse
  Haugen, Stacey S., CNS

Heartview Foundation
101 E Broadway Ave
(701) 222-0386

- Licensed Addiction Counselor-Chemical Dependency
  Carlson, Bruce L., LAC
  Ell, Candace J., LAC
  Fetting, Brenda M., LAC
  Gerhardt, Ronald J., LAC
  Meier, Shawn M., LAC
  Miller, Kay A., LAC
  Olson, Darcy C., LAC
  Peet, Roger M., LAC
  Schwan, Bruce, LAC
  Schwehr, Marjean L., LAC
  Snyder, Kurt A., LAC
  Stroup-Menge, Elizabeth A., LAC
- Psychology
  Peterson, Peter, PHD

Heritage Pharmacy Gateway Mall
2700 State St Ste F13
(701) 530-5800

- Home Medical Equipment
  Heritage Pharmacy Gateway Mall

Hope Therapy Center, PLLC
1929 N Washington St
Ste W
(701) 426-5804

- Occupational Therapy
  Fiechtner, Nicole M., OT
  Tosseth, Geri M., OT

Inspired Life Wellness Clinic, PLLC
200 E Main St Ste 204
(701) 989-4351

- Nurse Practitioner
  Aman, Christine M., CNP

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING ANCILLARY PROVIDERS

Inspired Life Wellness Clinic, PLLC (cont.)
- Nurse Practitioner (continued)
  Horner, Melissa M., CNP

Institute of Facial Surgery
2331 Tyler Pkwy Ste 4
(701) 255-4000
- Certified Registered Nurse Anesthetist
  Ahneman, Jon, CRNA
  Silbernagel, Paul J., CRNA
- Nurse Practitioner
  Stanley, Miranda D., FNP

IPA, LLC dba Independent Practitioners of American, LLC
115 W Century Ave Ste B
(701) 255-2252
- Certified Registered Nurse Anesthetist
  Ahneman, Jon, CRNA
  Huber-Manstrom, Charlotte, CRNA
  Klein, Kevin L., CRNA
  Silbernagel, Paul J., CRNA

Jones Physical Therapy, PC
1655 N Grandview Ln #204
(701) 751-2020
- Physical Therapy
  Dinius, Joshua W., PT
  Hager, Caitlyn N., PT
  Hochhalter, Mindy A., PT
  Jones, Elizabeth A., PT
  Mees, Melissa J., PT

Kehrwald, Edward, PhD
721 Memorial Hwy
(701) 224-1897
- Psychology
  Kehrwald, Edward, PHD

Kuchler, Christine, PhD
721 Memorial Highway
(701) 224-1897
- Psychology
  Kuchler, Christine, PHD

Ldw, Inc
1850 Billings Drive
(701) 471-7066
- Nurse Practitioner
  Watkins, Lisa K., PNU

Lifeways Partners In Health
1001 Gateway Ave
(701) 751-3271
- Nurse Practitioner
  Allmaras, Amanda E., CNP
  Jolliffe, Rhonda D., CNP
- Physical Therapy
  Pierce, Jena M., PT
  Wetzel, Denise A., PT

Link Counseling Service, PC
1655 N Grandview Lande
#204
(701) 751-2020
- Licensed Professional Clinical Counselor
  Link, Annette, LPCC

Link Psychological Services, PC
1424 W Century Ave
Suite 207
(701) 223-3571
- Psychology
  Link, James P., PSYD

Mid Dakota Clinic
401 N 9th St
(701) 530-6000
- Audiology
  Jacobus, Karen L., AUD
  Ness, Joe A., MS
- Certified Diabetic Educator
  Wanner, Kay A., CDE
- Certified Registered Nurse Anesthetist
  Ahneman, Jon, CRNA
  Christ, Renee, CRNA
  Ficek, Jenna L., CRNA
  Filler, Laura K., CRNA
  Freitag, Heather, CRNA
  Gabel, Kelli J., CRNA
  Geiger, Kim E., CRNA
  Klein, Kevin L., CRNA
  Kleser, Chris, CRNA
  Knowlen, Kim M., CRNA
  Kuennen, Timothy S., CRNA

Mid Dakota Clinic (cont.)
- Certified Registered Nurse Anesthetist (continued)
  Maddock, Jerome P., CRNA
  Manders, Landa, CRNA
  Martin, Donald C., CRNA
  McArthur, Ryan, CRNA
  Oshea, Carol W., CRNA
  Reems, Brenda, CRNA
  Roloff, Diana J., CRNA
  Sailer, Jill, CRNA
  Schaar, Launi M., CRNA
  Schumacher-Feiler, Paula J., CRNA
  Spears, Lura, CRNA
  Staiger, Joshua J., CRNA
  Teske, Arla R., CRNA
  Town, Jerry R., CRNA
  Turman, Richard T., CRNA
  Walford, Steven M., CRNA
  Walth, Doran D., CRNA
- Licensed Registered Dietitian
  Wanner, Kay A., LRD
- Nurse Practitioner
  Brodeur, Amanda, CNP
  Chaussee, Kevin P., CNP
  Dietz, Traci L., FNP
  Koivula, Mark E., FNP
  Lutzwick, Lindsey A., CNP
  Roloff, Kendra L., CNP
  Schlittenhardt, Melanie A., CNP
  Townsend, Cammy K., FNP
- Physical Therapy
  Bossert, Amber D., PT
  Olson, Nicole A., PT
  Steckler, Jay R., PT
- Physician Assistant
  Anderson, Danielle R., PA
  Earsley, Anne M., PA
  Nolz-Leingang, Jacqueline K., PA
  Schaff, Kristen L., PA
  Vander Linden, Jaclyn A., PA

Mid Dakota Clinic - Gateway
2700 State St
(701) 530-6000
- Nurse Practitioner
  Chaussee, Kevin P., CNP
  Fuerstenberg, Laura M., FNP

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING ANCILLARY PROVIDERS

Mid Dakota Clinic - Gateway (cont.)
- Occupational Therapy
  Schempp, Carmen, OT
  Smith, Megan E., OT
- Physical Therapy
  Lervick, Jessica A., PT
- Physical/Occupational Therapist
  Smith, Megan E., OT

Mid Dakota Clinic - U of Mary Student Health Center
7500 University Dr
(701) 355-8288
- Nurse Practitioner
  Darras, Kyle M., FNP

Mid Dakota Clinic-Center For Women
1000 E Rosser Ave
(701) 530-6000
- Nurse Practitioner
  Loraas, Dawn R., FNP
  Ritter, Rebecca L., FNP
- Physician Assistant
  Earsley, Anne M., PA
  Graf, Stacie L., PA

Miracle Ear
2331 Tyler Pkwy Ste 1
(701) 222-2484
- Home Medical Equipment
  Miracle Ear

Missouri Basin Anesthesia PLLC
401 N 9th Street
(701) 530-5550
- Certified Registered Nurse Anesthetist
  Ahneman, Jon, CRNA
  Christ, Renee, CRNA
  Ficek, Jenna L., CRNA
  Filler, Laura K., CRNA
  Freitag, Heather, CRNA
  Gabel, Kelli J., CRNA
  Geiger, Kim E., CRNA
  Grenz, Melodee J., CRNA
  Heyerman, James, CRNA
  Klein, Kevin L., CRNA
  Kleser, Chris, CRNA
  Knowlen, Kim M., CRNA
  Kuennen, Timothy S., CRNA
  Maddock, Jerome P., CRNA

Missouri Basin Anesthesia PLLC (cont.)
- Certified Registered Nurse Anesthetist (continued)
  Manders, Landa, CRNA
  Martin, Donald C., CRNA
  McArthur, Ryan, CRNA
  Miller, Carl B., CRNA
  Oshea, Carol W., CRNA
  Reems, Brenda, CRNA
  Roller, Brandon J., CRNA
  Roloff, Diana J., CRNA
  Sailer, Jill, CRNA
  Schaar, Launi M., CRNA
  Schumacher-Feiler, Paula J., CRNA
  Silbernagel, Paul J., CRNA
  Spears, Lura, CRNA
  Staiger, Joshua J., CRNA
  Teske, Arla R., CRNA
  Town, Jerry R., CRNA
  Turman, Richard T., CRNA
  Walford, Steven M., CRNA
  Walth, Doran D., CRNA

New Freedom Center
905 E Interstate Ave
(701) 222-4673
- Licensed Addiction Counselor-Chemical Dependency
  Elefson, Richard D., LAC
  Knopik, James A., LAC

Northbrook Drug
1929 N Washington St
Suite C
(701) 258-1412
- Pharmacy
  Northbrook Drug

Northern Lights Physical Therapy Limited Partnership
911 W Interstate Ave
Ste 12 Bldg 3
(701) 223-8717
- Physical Therapy
  Iverson Harstad, Charity A., PT
  Olheiser, Rachel L., PT

Northern Plains Laboratory LLC
401 N 9th St
(701) 222-2480
- Independent Laboratory
  Northern Plains Laboratory LLC

Pathway To Freedom
418 E Rosser Ave Ste A
(701) 426-6308
- Licensed Addiction Counselor-Chemical Dependency
  Olson, Jeff R., LAC

Pediatric Therapy Partners Inc
4501 Coleman St Ste 103
(701) 751-6336
- Occupational Therapy
  Deweese, Kelly E., OT
  Flemmer, Mary Kay, OT
  Glasser, Jodi L., OT
  Krapp, Emily S., OT
  Neznik, Jennifer A., OT
- Physical Therapy
  Dosland, Kiley A., PT
- Speech Therapy
  Feist, Amy A., ST
  Murray, Krista M., ST

Professional Hearing Services
4900 Ottawa Suite 300
(701) 751-6232
- Audiology
  Tongen, John L., AUD

Professional Pharmacy
3124 Colorado Lane #400
(701) 223-6854
- Home Medical Equipment
  Professional Pharmacy

Red Door Pediatric Therapy
1303 E Central Ave
(701) 222-3175
- Occupational Therapy
  Breitbach, Brandi L., OT
  Oswald, Jessica B., OT
  Rossman, Elyse R., OT
  Strand, Casey B., OT
- Speech Therapy
  Arnt, Heather S., ST
  Berg, Dana B., ST

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING ANCILLARY PROVIDERS

Red Door Pediatric Therapy (cont.)

- Speech Therapy (continued)
  Ellenbaum, Kelli K., ST
  Hay, Chelsea C., ST
  Sehn, Stephanie K., ST

Regional Neurological Center
1033 Basin Ave Ste A
(701) 222-1300

- Physical Therapy
  Zastoupil-Hartze, Donna J., PT

Sanford 5th & Broadway Clinic
515 East Broadway Ave
(701) 323-5631

- Certified Diabetic Educator
  Amundson, Donna M., CDE
  Malard, Maysil M., CDE
  Schumacher, Margaret L., CDE
  Timm, Lyla J., CDE
  Walter, Julieanne M., CDE
- Licensed Registered Dietitian
  Anderst, Cynthia J., LRD
  Blees, Kristen M., LRD
  Davis, Amy M., LRD
  Enzminger, Nicole A., LRD
  Fisher, Kelly R., LRD
  Hirst, Mikaela L., LRD
- Nurse Practitioner
  Meier, Dawn M., CNP
  Schwinkendorf, Erin M., CNP
  Small, Renee, CNP
- Physician Assistant
  Bertsche, Shannon A., PA
  Knudson, Wanda L., PA

Sanford Children's North Clinic
765 W Interstate Ave
(701) 323-3700

- Nurse Practitioner
  Caster, Amber J., CNP
- Psychology
  Doerner, Mark, PHD

Sanford Clinic
222 N 7th St
(701) 323-6000

- Audiology
  Boutilier, Amanda D., AUD
  Mann, Krystal L., AUD

Sanford Clinic (cont.)

- Certified Diabetic Educator
  Amundson, Donna M., CDE
  Anderst, Cynthia J., CDE
  Blees, Kristen M., CDE
  Fisher, Kelly R., CDE
  Schumacher, Margaret L., CDE
  Timm, Lyla J., CDE
  Walter, Julieanne M., CDE
- Certified Registered Nurse Anesthetist
  Frigstad, Samantha, CRNA
  Goeddertz, John P., CRNA
- Licensed Registered Dietitian
  Anderst, Cynthia J., LRD
  Blees, Kristen M., LRD
  Clausen, Rachel I., LRD
  Fisher, Kelly R., LRD
  Hirst, Mikaela L., LRD
- Nurse Practitioner
  Ahmann, Jessica L., FNP
  Allan, Nora L., FNP
  Anderson, Tamala M., CNP
  Andes, Rebecca J., FNP
  Auck, Tonya L., CNP
  Balvitsch, Jessica A., CNP
  Bayer, Tosha L., FNP
  Carlson, Denise R., CNP
  Caster, Amber J., CNP
  Clairmont, Lisa, FNP
  Collins, Susan G., FNP
  Cornell, Carissa R., FNP
  Eggers, Mary M., FNP
  Fischer, Bridgit M., FNP
  Glass, Fae M., FNP
  Hermanson, Patricia C., FNP
  Hertz, Kristin L., FNP
  Knaup, Keeta J., CNP
  Lein, Kathryn A., CNP
  Lindberg, Jade A., CNP
  Macdonald, Karen R., CNP
  Murdoff, Lisa A., FNP
  Olson, Janel, FNP
  Scheurer, Elizabeth M., FNP
  Schneider, Chelsey J., FNP
  Stensgard, Kathryn M., CNP
  Weigum, Cindy, FNP
- Physician Assistant
  Amsbaugh, Nicole L., PA
  Bertsche, Shannon A., PA

Sanford Clinic (cont.)

- Physician Assistant (continued)
  Curtis-Haberlock, Tara M., PA
  Hauff, Hannah M., PA
  Held, Debra E., PA
  Knudson, Wanda L., PA
  Nicholson, Jaclyn C., PA
  Preszler, Roger R., PA
  Tescher, Steele B., PA
  Vearrier, Tracy L., PA
  Wiseman, Amber J., PA
- Psychiatric Nurse
  Melberg, Tiffany A., PNU
  Schirado, Kevin G., CNS
- Psychology
  Brown, Marland C., PSYD
  Doppler, Matthew J., PHD

Sanford Health Dakota Childrens Advocacy Center
200 E Main St #301
(701) 323-5626

- Licensed Professional Clinical Counselor
  Condol, Paula J., LPCC
  Hilfer, Shannon L., LPCC

Sanford Health Occupational Medicine Clinic
2603 E Broadway Ave
(701) 323-5222

- Physical Therapy
  Becker, Erica M., PT
  Brousseau, Michael A., PT
  Hahn, Sondra M., PT
  Heaton, Mariah D., PT
  Hunt, Heather L., PT
  Judah, Grant E., PT
  Jurgens-Dinius, Nicholl, PT
  Skluzacek, Amanda R., PT
  Wetzel, Jeff, PT
- Physician Assistant
  Champa, Whitney L., PA
  Fridrich, Elizabeth F., PA
  Malzer, Christine M., PA
  Schillo, Sherry K., PA
  Vearrier, Tracy L., PA
  Worrel, Leslie A., PA

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING ANCILLARY PROVIDERS

Sanford Healthcare Accessories Bismarck
121 E Century Ave
(701) 530-0200

- Home Infusion
  Sanford Healthcare Accessories Bismarck
- Home Medical Equipment
  Sanford Healthcare Accessories Bismarck

Sanford Medical Center
300 N 7th St
(701) 323-6000

- Audiology
  Arneson-Thilmony, Debra J., AUD
  Mann, Krystal L., AUD
  Mattheis Anderson, Amy M., AUD
  Ness, Brady J., AUD
  Schauer, Douglas D., AUD
- Certified Diabetic Educator
  Amundson, Donna M., CDE
  Anderst, Cynthia J., CDE
  Blees, Kristen M., CDE
  Fisher, Kelly R., CDE
  Malard, Maysil M., CDE
  Schumacher, Margaret L., CDE
  Timm, Lyla J., CDE
  Walter, Julieanne M., CDE
- Certified Registered Nurse Anesthetist
  Bohlman, Lorrissa, CRNA
  Frigstad, Samantha, CRNA
  Goeddertz, John P., CRNA
  Hawk, Jamie L., CRNA
  Hoggarth, Jennifer A., CRNA
  Huber-Manstrom, Charlotte, CRNA
  Kienzle, Mike N., CRNA
  Matthews, Christian M., CRNA
  Myers, Michael R., CRNA
  Nelson, Denise, CRNA
  Schwab, Jessica M., CRNA
- Licensed Professional Clinical Counselor
  Condol, Paula J., LPCC
  Hilfer, Shannon L., LPCC
- Licensed Registered Dietitian
  Anderst, Cynthia J., LRD
  Blees, Kristen M., LRD

Sanford Medical Center (cont.)

- Licensed Registered Dietitian (continued)
  Clausen, Rachel I., LRD
  Davis, Amy M., LRD
  Enzminger, Nicole A., LRD
  Fisher, Kelly R., LRD
  Ihmels, Amanda K., LRD
- Nurse Practitioner
  Ahmann, Jessica L., FNP
  Allan, Nora L., FNP
  Auck, Tonya L., CNP
  Balvitsch, Jessica A., CNP
  Bartz, Darleen, CNP
  Bayer, Tosha L., FNP
  Carlson, Denise R., CNP
  Caster, Amber J., CNP
  Ceynar-Moen, Jennifer D., FNP
  Clairmont, Lisa, FNP
  Collins, Susan G., FNP
  Cristy, Donna M., CNP
  Dockter, Debra K., CNP
  Doll, Sara M., FNP
  Ebach, Connie M., CNP
  Eggers, Mary M., FNP
  Fischer, Bridgit M., FNP
  Frank, Sally, FNP
  Glass, Fae M., FNP
  Hermanson, Patricia C., FNP
  Hertz, Kristin L., FNP
  Horner, Melissa M., CNP
  Huston, Laurie J., CNP
  Knaup, Keeta J., CNP
  Lein, Kathryn A., CNP
  Lindberg, Jade A., CNP
  Macdonald, Karen R., CNP
  McPherson, Danielle, FNP
  Meier, Dawn M., CNP
  Murdoff, Lisa A., FNP
  Olson, Janel, FNP
  Rakowski, Jana, FNP
  Rodriguez, Carmen E., FNP
  Rud, Billie, CNP
  Scheurer, Elizabeth M., FNP
  Schmit, Julie, CNP
  Schneider, Chelsey J., FNP
  Schwinkendorf, Erin M., CNP
  Small, Renee, CNP
  Thompson, Ashley L., FNP
  Weigum, Cindy, FNP

Sanford Medical Center (cont.)

- Nurse Practitioner (continued)
  Wetsch, Ashley L., CNP
- Occupational Therapy
  Volk, Aimee L., OT
- Physical Therapy
  Guthmiller, Bryan, PT
- Physician Assistant
  Arndorfer, Brooke, PA
  Bertsche, Shannon A., PA
  Champa, Whitney L., PA
  Ciavarella, Tana J., PA
  Curtis-Haberlock, Tara M., PA
  Fried, Denise E., PA
  Gibson, Allen, PA
  Hauff, Hannah M., PA
  Held, Debra E., PA
  Hennessy, Jill M., PA
  Knudson, Wanda L., PA
  Nicholson, Jaclyn C., PA
  Nottestad, Stephanie J., PA
  Preszler, Roger R., PA
  Tescher, Steele B., PA
- Psychiatric Nurse
  Melberg, Tiffany A., PNU
- Psychology
  Arndorfer, Richard E., PHD
  Brown, Marland C., PSYD
  Doerner, Mark, PHD
  Doppler, Matthew J., PHD
  Ghering, Karli, PHD
  Reno, Claudette M., PHD
  Schaaf Gallagher, Marie A., PHD

Sanford Pharmacy
300 N 7th St
(701) 323-6186

- Home Infusion
  Sanford Pharmacy/Hif

Sanford Seventh and Broadway
715 E Broadway Ave
(701) 323-8922

- Audiology
  Arneson-Thilmony, Debra J., AUD
  Boutilier, Amanda D., AUD
  Grossman, Shelly M., MS
  Mann, Krystal L., AUD
  Mattheis Anderson, Amy M., AUD

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING ANCILLARY PROVIDERS

Sanford Seventh and Broadway (cont.)

- Audiology (continued)
  Ness, Brady J., AUD
  Schauer, Douglas D., AUD
- Nurse Practitioner
  Ceynar-Moen, Jennifer D., FNP
- Physician Assistant
  Arndorfer, Brooke, PA

Sanford Seventh and Rosser Clinic
414 N 7th St
(701) 323-6815

- Nurse Practitioner
  Allan, Nora L., FNP
  Auck, Tonya L., CNP
  Balvitsch, Jessica A., CNP
  Cristy, Donna M., CNP
  Dockter, Debra K., CNP
- Physician Assistant
  Fried, Denise E., PA
  Nottestad, Stephanie J., PA
- Psychiatric Nurse
  Melberg, Tiffany A., PNU
  Schirado, Kevin G., CNS
- Psychology
  Arndorfer, Richard E., PHD
  Doerner, Mark, PHD
  Doppler, Matthew J., PHD
  Ghering, Karli, PHD
  Herrick, Christen, PHD
  Reno, Claudette M., PHD
  Schaaf Gallagher, Marie A., PHD

Sanford Seventh and Thayer
209 7 St N
(701) 323-5590

- Nurse Practitioner
  Frank, Sally, FNP
  Hermanson, Patricia C., FNP
  Horner, Melissa M., CNP
  Leier, Jennifer M., CNP
  McPherson, Danielle, FNP
  Schmit, Julie, CNP
  Weigum, Cindy, FNP
- Physician Assistant
  Tescher, Steele B., PA

Sanford Seventh and Thayer
225 N 7th St
(701) 323-8920

- Nurse Practitioner
  Ahmann, Jessica L., FNP
  Rodriguez, Carmen E., FNP
  Rud, Billie, CNP
  Schneider, Chelsey J., FNP
- Physical Therapy
  Guthmiller, Bryan, PT
- Physician Assistant
  Ciavarella, Tana J., PA
  Gibson, Allen, PA

Sanford South Clinic
1040 Tocoma Ave
(701) 323-6400

- Nurse Practitioner
  Rakowski, Jana, FNP
  Thompson, Ashley L., FNP
  Wetsch, Ashley L., CNP
- Physician Assistant
  Kristensen, Karlee J., PA

Schlittenhardt, Melanie dba Bladder Care, Inc.
2315 Jackson Ave
(701) 527-4959

- Nurse Practitioner
  Schlittenhardt, Melanie A., FNP

Smith, Jeff, MD PC
1033 Basin Ave
(701) 223-6613

- Nurse Practitioner
  Middleton, Debra L., FNP

Soul Survivor Counseling Services, PC
1120 College Dr Ste 201
(701) 258-2008

- Licensed Professional Clinical Counselor
  Martin, Andrea J., LPCC

Spine Orthopedic and Pain Center PC
121 W Century Ave
(701) 530-8500

- Physical Therapy
  Folk, Heidi M., PT
  Neameyer, Tony E., PT

St Alexius Heart & Lung Clinic LLC
310 N 10th St
(701) 530-7500

- Nurse Practitioner
  Bock, Tana L., FNP
  Braun, Kristin, CNP
  Fettig, Megan C., FNP
  Folk, Cynthia A., FNP
  Fueller, Debra L., FNP
  Gisvold, Christina R., FNP
  Koivula, Mark E., FNP
  Meyhoff, Camille M., FNP
  Pengilly, Danette, CNP
  Rudnick, Andrea J., FNP
  Stone, Jennifer N., FNP
  Torske, Brian J., FNP
  Vanklootwyk, Michelle, CNP
  Wagner, Sheila R., CNP
  Wiedrich, Sara L., CNP
- Physician Assistant
  Brackin, Ilene A., PA
  Braun, Mandi L., PA
  Kessler, Kenneth S., PA
  Renner, Cindy M., PA
  Sveen, Jane E., PA

St Alexius Medical Center
900 E Broadway Ave
(701) 530-7000

- Certified Registered Nurse Anesthetist
  Filler, Laura K., CRNA
  Freitag, Heather, CRNA
  Kuennen, Timothy S., CRNA
  McArthur, Ryan, CRNA
  Schaar, Launi M., CRNA
  Walford, Steven M., CRNA

St Alexius Medical Center
900 E Broadway Ave
(701) 530-6500

- Emergency Medicine
  Pierre-Louis, Nika M., PA
- Licensed Addiction Counselor-Chemical Dependency
  Motis, Charles R., LAC
  Werre, Richard, LAC
- Licensed Professional Clinical Counselor
  Millner, Paul D., LPCC
  Motis, Charles R., LPCC

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING ANCILLARY PROVIDERS

St Alexius Medical Center (cont.)

- Licensed Professional Clinical Counselor (continued)
  Olson, Thomas A., LPCC
- Nurse Practitioner
  Allmaras, Amanda E., CNP
  Bitz, Cheryle K., CNP
  Braun, Kristin, CNP
  Bryan, Jennifer L., FNP
  Eckroth, Janel M., FNP
  Engelhart, Jolene, FNP
  Erickstad, Faith, CNP
  Folk, Cynthia A., FNP
  Guthmiller, Tanya R., CNP
  Herman, Jenna M., CNP
  Hofferber, Rick W., CNP
  Jacobson-Bauer, Heather A., FNP
  Kaiser, Trina R., CNP
  Koivula, Mark E., FNP
  Landsiedel, Julie, FNP
  Lardy, Susan A., FNP
  Leier, Heather M., FNP
  Maier, Michelle D., CNP
  Malucky, Andrea A., CNP
  Toman, Jean A., CNP
  Welder, Sheila, FNP
  Wolf, Gloria, FNP
- Physician Assistant
  Anderson, Danielle R., PA
  Klabunde, Lori A., PA
  Kunrath, Scott H., PA
  Lelito, Nicholas, PA
  Schaffner, Preston A., PA
- Psychology
  Berentson, Lea J., PHD
  Brooks, David A., PHD
  Degree, Craig E., PHD
  Horner, Sara M., PSYD
  Lang, Marny, PSYD

St Alexius Medical Center/Emergency Physician Services
900 E Broadway Ave
(701) 530-7000

- Nurse Practitioner
  Landsiedel, Julie, FNP
  Lardy, Susan A., FNP
  Madler, Billie J., FNP
  Malucky, Andrea A., CNP

St Alexius Medical Center/Emergency Physician Services (cont.)

- Nurse Practitioner (continued)
  Pfenning, Stacey R., CNP
  Wolf, Gloria, FNP
- Occupational Therapy
  Fettig, Renae A., OT
- Physician Assistant
  Reiman, Jennifer M., PA
  Thomas, Kari A., PA

St Alexius Medical Center/Human Performance Center
310 N 9th St
(701) 530-8100

- Occupational Therapy
  Ottmar, Lynly J., OT
  Stewart, Kimberly A., OT
- Physical Therapy
  Beachey, Ruth B., PT
  Brossart, Allan J., PT
  Dekrey, Jeanne M., PT
  Herr, Tana J., PT
  Jahnke, Joel B., PT
  Keller, Sarah C., PT
  Kleinjan, Connie J., PT
  Schuler, Erica H., PT

St Gabriel's Community
4580 Coleman St
(701) 751-4224

- Occupational Therapy
  Fiechtner, Nicole M., OT

St Sophies, LLC
3000 N 14th St #2a
(701) 252-2001

- Licensed Professional Clinical Counselor
  Hjelle, Catherine A., LPCC
- Nurse Practitioner
  Hollevoet, Jacqualine J., FNP
- Psychology
  Schumacher, Kevin, PHD

The Bone & Joint Center, PC
310 N 9th St
(701) 530-8650

- Nurse Practitioner
  Hollenbeck, Kellee, FNP
  Kittleson, Shannon L., CNP

The Bone & Joint Center, PC (cont.)

- Nurse Practitioner (continued)
  Melander, Jeremy, FNP
  Staloch, Coleen, CNP
  Stork, Bradley R., CNP
- Occupational Therapy
  Clarke, Renee, OT
  Gerrity, Joshua D., OT
  Sullivan, Terri A., OT
- Physical Therapy
  Axtman, Kevin C., PT
  Dschaak, Brent O., PT
  Westin, Lesley L., PT
- Physical/Occupational Therapist
  Gerrity, Joshua D., OT
  Sullivan, Terri A., OT
- Physician Assistant
  Hilzendeger, Jeff, PA
  Laumb, Kellie J., PA
  Mittleider, Erica F., PA
  Moore, Jodi L., PA
  Schillo, Jamelle, PA
  Staloch, Coleen, PA
  Szymanski, Kila J., PA
  Zachmeier-Babb, Amanda L., PA

The Enrichment Garden
1911 North 11th Street
(701) 258-1569

- Occupational Therapy
  Hansen, Alicia D., OT
  Hillestad, Brianna K., OT
  Johnson, Ashley M., OT
  Krapp, Emily S., OT
  Leblanc, Matthew G., OT
- Physical Therapy
  Zastoupil-Hartze, Donna J., PT
- Speech Therapy
  Bry, Anne C., ST
  Fawcett, Donna B., ST
  Johnson, Brooke D., ST
  Martire, Sandra, ST
  Towle, Jessica M., ST

The Kids Therapy Center
600 S 2nd St Ste 201
(701) 751-0384

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING ANCILLARY PROVIDERS

North Dakota (cont.)
Bismarck (cont.)

The Kids Therapy Center (cont.)
- Licensed Professional Clinical Counselor
  Meyers, Valerie, LPCC

The Medicine Shoppe
1304 East Boulevard Ave
(701) 224-0175
- Pharmacy
  The Medicine Shoppe

The Village Family Service Center
107 West Main Suite 350
(701) 451-4900
- Licensed Professional Clinical Counselor
  Thompson, Anna, LPCC

True North Solutions
418 N 2nd Street
(701) 224-8783
- Psychiatric Nurse
  Engel, Bonnie, PNU

Valley View Pharmacy
2425 Hillview Ave
(701) 223-5750
- Home Infusion
  Valley View Pharmacy

Valley Weight Loss Clinic
1500 Interchange Ave
Ste 210
(701) 365-8446
- Licensed Registered Dietitian
  Deics, Cathy A., LRD
- Physician Assistant
  Hanson, Susan J., PA

West Central Human Service Center
1237 W Divide Ave Ste 5
(701) 328-8888
- Licensed Addiction Counselor-Chemical Dependency
  Combs, Miranda, LAC
  Goldade, Jennifer L., LAC
  Hultin, Dawn L., LAC
  Ibach, Heather R., LAC
  Janzer, Mandi L., LAC
  Johnson, Carmen C., LAC
  Karlin, Corinne J., LAC

North Dakota (cont.)
Bismarck (cont.)

West Central Human Service Center (cont.)
- Licensed Addiction Counselor-Chemical Dependency (continued)
  Kitzan, Justun J., LAC
  Mickelson, David H., LAC
  Mock, Sue A., LAC
  Mohl, Brenda E., LAC
  Rennich, Jennifer L., LAC
  Ridl, Jeffrey G., LAC
  Ronsberg, Elise A., LAC
  Sather, Katherine, LAC
  Schatz, Kiki J., LAC
  Selk, Jennifer H., LAC
  Thompson, Sandy K., LAC
- Licensed Professional Clinical Counselor
  Hellman, Lory, LPCC
  McConnachie, Rebecca, LPCC
- Psychiatric Nurse
  Schirado, Kevin G., CNS
- Psychology
  Aasen, Paulette, PHD
  Hay, Lisa D., PHD
  Kehrwald, Edward, PHD
  Larson, Roger A., PHD

White Drug #5
117 N 5th St
(701) 223-0936
- Home Medical Equipment
  White Drug #5

Bottineau

Bottineau Clinic Pharmacy Inc
314 Ohmer St
(701) 228-2220
- Pharmacy
  Bottineau Cl Pharm Inc

Bottineau Good Samaritan Center
725 E 10th St
(701) 228-3796
- Physical Therapy
  Pritchard, Keith A., PT

North Dakota (cont.)
Bottineau (cont.)

Corey J Gorder
104 11th St W
(701) 201-0076
- Licensed Professional Clinical Counselor
  Gorder, Corey J., LPCC

Rural Mental Health Consortium
316 Ohmer St
(701) 228-9300
- Nurse Practitioner
  Weathers, Vickie K., CNP
- Psychiatric Nurse
  Sartain, Cheryl A., PNU

St Andrews Bottineau Clinic, LLC
314 Ohmer St
(701) 228-9400
- Nurse Practitioner
  Koch, Brenda L., CNP
  Larson, Tracy L., FNP
  Stabo, Susan L., FNP

St Andrews Health Center
316 Ohmer St
(701) 228-9400
- Certified Registered Nurse Anesthetist
  Berentson, Kari, CRNA
  Cederstrom, Luann, CRNA
  Rist, Kari L., CRNA
  Simon, Jeffrey J., CRNA
  Stock, Terry L., CRNA
  Vibeto, Mark C., CRNA
  Zahn, Denise M., CRNA
- Nurse Practitioner
  Costner, David S., CNP
  Koch, Brenda L., CNP
  Larson, Tracy L., FNP
  Stabo, Susan L., FNP

St Andrews Hospital/MAMC
314 Ohmer St
(701) 228-9400
- Certified Registered Nurse Anesthetist
  Brandt, Kraig W., CRNA
- Nurse Practitioner
  Stabo, Susan L., FNP

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING ANCILLARY PROVIDERS

North Dakota (cont.)

Bowbells

Northland Community Health Center
18 Main St SW
(701) 377-4758

- Nurse Practitioner
  Green, Alain M., FNP
- Physician Assistant
  Bartow, Shelley M., PA
  Malzer, Christine M., PA

Bowman

Southwest Healthcare Services
802 2nd St NW
(701) 523-3214

- Licensed Registered Dietitian
  Narum, Barbi J., LRD

Southwest Healthcare Services DME
14 6th Ave SW
(701) 523-3226

- Home Medical Equipment
  Southwest Healthcare Services

Southwest Medical Clinic
12 6th Ave SW
(701) 523-3226

- Certified Registered Nurse Anesthetist
  Hildebrandt-Folske, Carla J., CRNA
- Nurse Practitioner
  Peterson, Christine R., FNP
- Physician Assistant
  Gilbert, Patricia, PA

The Bowman Drug Co
12 N Main
(701) 523-3232

- Pharmacy
  Bowman Drug Co

West River Health Service
608 Highway 12 W
(701) 523-3271

- Licensed Professional Clinical Counselor
  Jorgenson, Tara L., LPCC
- Licensed Registered Dietitian
  Narum, Barbi J., LRD
- Nurse Practitioner
  Hill, Lori A., CNP

North Dakota (cont.)

Bowman (cont.)

West River Health Service (cont.)

- Nurse Practitioner (continued)
  Oase, Megan M., FNP
  Reiten, Elizabeth, FNP
- Physician Assistant
  Bergquist, Rose B., PA
  Bondell, Sheila, PA
  Cooper, Brian K., PA
  Mattis, Billie J., PA

Cando

Towner County Medical Center
Hwy 281 N
(701) 968-4411

- Certified Registered Nurse Anesthetist
  Andruski, Heidi L., CRNA
  Berentson, Kari, CRNA
  Brandt, Kraig W., CRNA
  Brown, Terri R., CRNA
  Kelly, Karen J., CRNA
  Keniston, Dierdre V., CRNA
  Myers, Michael R., CRNA
  Stock, Terry L., CRNA
  Trontvet, Kent A., CRNA
  Underdahl, Nicole A., CRNA
  Vibeto, Mark C., CRNA

Towner County Medical Center
Hwy 281 N
(701) 968-2541

- Nurse Practitioner
  Almen, Joann S., FNP
  Cox, Amy S., CNP
  Held, Samuel, FNP
- Physical Therapy
  Pederson, Jennifer A., PT
- Physician Assistant
  Jorde, Jeana A., PA

Carrington

Carrington Drug
415 Main St
(701) 652-2521

- Home Medical Equipment
  Carrington Drug Co

North Dakota (cont.)

Carrington (cont.)

Carrington Health Center
800 4th St N
(701) 652-3141

- Certified Diabetic Educator
  Carrington Health Center
- Certified Registered Nurse Anesthetist
  Krueger, Curtis C., CRNA
  Myers, Michael R., CRNA
  Shefland, Raymond C., CRNA
  Siemers, Trent E., CRNA
  Trontvet, Kent A., CRNA
- Licensed Registered Dietitian
  Fredrickson, Brooke, LRD
  Getz, Janel A., LRD
- Physician Assistant
  Hoff, Bradley D., PA
  Hoff, Mary L., PA
  Nelson, Jacqueline D., PA
- Speech Therapy
  Stockert, Misty J., ST

Central Dakota Physical Therapy PC
800 N 4th St
(701) 652-7179

- Physical Therapy
  Irmen, Kadee A., PT
  Pate, Julie L., PT
  Smith, Kyle E., PT

Foster County Medical Center
820 5th St N
(701) 652-2515

- Physician Assistant
  Hoff, Bradley D., PA
  Hoff, Mary L., PA
  Nelson, Jacqueline D., PA

Fuher, Jessie, LPCC
800 N 4th St
(701) 252-9838

- Licensed Professional Clinical Counselor
  Fuher, Jessie K., LPCC

Sanford Bismarck At Carrington Foster Co Clinic
820 5th St N
(701) 323-6000

- Audiology

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING ANCILLARY PROVIDERS

North Dakota (cont.)
Carrington (cont.)

Sanford Bismarck At Carrington Foster Co Clinic (cont.)
- Audiology (continued)
  Arneson-Thilmony, Debra J., AUD
  Boutilier, Amanda D., AUD
  Mann, Krystal L., AUD
  Mattheis Anderson, Amy M., AUD
  Ness, Brady J., AUD

Casselton

Casselton Drug Inc
622 Front St
(701) 347-4281
- Home Medical Equipment
  Casselton Drug Inc

Essentia Health Casselton Clinic
5 9th Ave N
(701) 347-4445
- Speech Therapy
  Rongstad, Sarah L., ST

Cavalier

Altru Cavalier
201 E 3rd Ave S
(701) 265-8338
- Certified Diabetic Educator
  Metelmann, Stacie L., CDE
- Nurse Practitioner
  Dorman, Seth T., FNP
  Laframboise, Jennifer L., FNP
  Rustvang, Daniel R., CNP
  Sperle, Roni L., FNP
  Suda, Amy L., FNP
  Tinkler, Jennifer A., FNP
  Vivatson, Debra K., CNP
- Physician Assistant
  Kosmatka, Erika J., PA
  Linnen, Katherine M., PA
  Pegg, Judy A., PA
  Wright, Shellie D., PA

Pembina County Hospital/Clinic
301 Mountain St E
(701) 265-8461
- Certified Diabetic Educator
  Myers, Jane M., CDE

North Dakota (cont.)
Cavalier (cont.)

Pembina County Hospital/Clinic (cont.)
- Certified Registered Nurse Anesthetist
  Myers, Michael R., CRNA
  Trontvet, Kent A., CRNA
- Licensed Registered Dietitian
  Myers, Jane M., LRD
- Nurse Practitioner
  Lee, Renee, CNP

White Drug #53
201 E 3rd Ave S
(763) 513-4301
- Pharmacy
  White Drug #53

Center

Coal Country Community Health Center
111 E Main St
(701) 794-8798
- Licensed Registered Dietitian
  Langeliers, Jean D., LRD
- Nurse Practitioner
  Olson, Sharon J., CNP
  Rogness, Corrie L., CNP
  Sailer, Debra L., CNP
- Physician Assistant
  Mollman, Burton J., PA

Cooperstown

Cooperstown Medical Center
1200 Roberts Ave NE
(701) 797-2221
- Certified Diabetic Educator
  Getz, Janel A., CDE
- Home Medical Equipment
  Cooperstown Medical Center DME
- Licensed Registered Dietitian
  Fredrickson, Brooke, LRD
  Getz, Janel A., LRD
- Nurse Practitioner
  Bitz, Trent W., FNP
  Middleton, Debra L., FNP

North Dakota (cont.)
Cooperstown (cont.)

Paczkowski Inc dba Almklov's Pharmacy
848 Burrel Ave
(701) 797-2414
- Home Medical Equipment
  Paczkowski Inc

Crosby

Crosby Clinic
702 1st St SW
(701) 965-6349
- Nurse Practitioner
  Barlow, Steven L., FNP
  Lindsey, Jacquelyn, FNP
  Warren, Ginger P., FNP

Rural Mental Health Consortium
705 4th St SE
(701) 857-2199
- Nurse Practitioner
  Weathers, Vickie K., CNP
- Psychiatric Nurse
  Sartain, Cheryl A., PNU

Devils Lake

Altru Clinic Lake Region
1001 7th St
(701) 662-2157
- Certified Diabetic Educator
  Warner-Noreen, Danika A., CDE
- Licensed Registered Dietitian
  Holum, Lynn M., LRD
  Warner-Noreen, Danika A., LRD
- Nurse Practitioner
  Dorman, Seth T., FNP
  Ferry, Rhea J., CNP
  Gerhardt, Annie M., CNP
  Krogstad, Mary Beth, CNP
  Laframboise, Jennifer L., FNP
  Leiphon, Kelly L., FNP
  Rustvang, Daniel R., CNP
  Schall, Tobey D., FNP
  Sperle, Roni L., FNP
  Suda, Amy L., FNP
  Tinkler, Jennifer A., FNP
  Zwilling, Jana G., FNP
- Physician Assistant
  Kosmatka, Erika J., PA
  Wright, Shellie D., PA

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING ANCILLARY PROVIDERS

North Dakota (cont.)
Devils Lake (cont.)

Altru Specialty Services, Inc dba Yorhom Medical Essentials
223 4th Ave NE Ste B
(701) 544-2100

- Home Medical Equipment
  Altru Specialty Services Devils Lake

Beltone Hearing Aid Center
219 4th Ave NE
(701) 662-7347

- Home Medical Equipment
  Beltone Hearing Aid Center

Blooming Prairie Assessment & Therapy Center, PC
211 4th St NE Ste 4
(701) 662-8255

- Psychology
  Kenney, Sara K., PSYD
  Normandin, Sherman, PHD

Clinic Pharmacy/Devils Lake
1001 7th St
(701) 662-4427

- Pharmacy
  Clinic Pharmacy/Devils Lake

Devils Lake Community Clinic
425 S College Dr Ste 14
(701) 968-2541

- Nurse Practitioner
  Almen, Joann S., FNP
  Cox, Amy S., CNP
- Physician Assistant
  Jorde, Jeana A., PA

Hearing Aid & Optical Company
425 S College Drive
Ste 16
(701) 662-2765

- Home Medical Equipment
  Hearing Aid & Optical Company

Lake Region Family Planning
524 4th Ave NE Unit 9
(701) 662-7046

- Nurse Practitioner
  Hefta, Cheryl A., CNP

North Dakota (cont.)
Devils Lake (cont.)

Lake Region Human Service Center
200 Highway 2 SW
(701) 665-2200

- Licensed Addiction Counselor-Chemical Dependency
  Fisher, Troy A., LAC
  Hellerud, Elizabeth J., LAC
  Juntunen, Kevin R., LAC
  McCrea, Adalia M., LAC
  McEwen, Billy, LAC
  Reichenberg, Kathleen E., LAC
  Schmidt-Boknecht, Ava V., LAC
- Physician Assistant
  Lindgren, Sheila M., PA
- Psychology
  Bradley, Patricia J., PSYD
  Kuna, David P., PHD
  Newberry, Donald E., PHD

Mary Lundy Progressive Physical Therapy of Devils Lake
204 N College Dr
(701) 662-5874

- Physical Therapy
  Lundy, Mary E., PT

Ramsey Drug Co
401 College Dr S
(701) 662-3117

- Home Medical Equipment
  Ramsey Drug Co000

The Mercy Hospital of Devils Lake
1031 7th St NE
(701) 662-2131

- Certified Registered Nurse Anesthetist
  Overend, Timothy, CRNA
  Reiner, Timothy W., CRNA
- Licensed Registered Dietitian
  Lee, Lenae A., LRD
- Nurse Practitioner
  Middleton, Debra L., FNP
  Nardacci, Tara M., FNP
  Thorson, Kim A., FNP
- Physical Therapy
  Brekhus, Jennifer L., PT
  Pederson, Steven L., PT
  Thompson, Scott J., PT

North Dakota (cont.)
Devils Lake (cont.)

The Mercy Hospital of Devils Lake (cont.)

- Physician Assistant
  Altamirano, Alfredo, PA
  Chapel, Dean A., PA
  Hager, Dustin T., PA
  Johnson, Brian W., PA
  Kerr, Brenna L., PA
  Konzak, Stacey L., PA
  Moberg, Jeffrey A., PA
  Moore, Jodi L., PA
  Rasmusson, Mark A., PA
  Schmitt, David M., PA
  Strand, Ginger M., PA
  Vearrier, Tracy L., PA

Volk Human Services, PC
501 3rd St NE Ste 1
(701) 662-1911

- Psychology
  Volk, Gregory S., PSYD

White Drug #63
425 College Dr S #10
(763) 513-4301

- Home Medical Equipment
  White Drug #63

Dickinson

Badlands ENT Clinic
227 16th St W
(701) 456-4700

- Audiology
  Ness, David A., AUD

Badlands Human Service Center
300 13 Ave W Ste 1
(701) 227-7500

- Licensed Addiction Counselor-Chemical Dependency
  Combs, Miranda, LAC
  Karlin, Corinne J., LAC
  Ronsberg, Elise A., LAC
  Schatz, Kiki J., LAC
  Thompson, Sandy K., LAC
  Waller, Linda K., LAC
- Licensed Professional Clinical Counselor
  Lefor, Katie L., LPCC
  Mack, Kimberly M., LPCC

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING ANCILLARY PROVIDERS

Badlands Human Service Center (cont.)
- Psychology
  Aasen, Paulette, PHD
  Boomgaarden, Renee L., PHD
  Demolen, Richard N., PSYD
  Gabbert, Nancy A., PHD
  Hertler, Chris A., PHD
  Wu, Zongjian, PSYD

Clinic Pharmacy Dickinson
2615 Fariway St
(701) 483-4401
- Pharmacy
  Clinic Pharmacy Dickinso

Community Action Partnership
202 E Villard St
(701) 227-0131
- Physician Assistant
  Nielsen, Teresa H., PA

Connect Hearing Inc
925 West Villard
(701) 227-4403
- Home Medical Equipment
  Connect Hearing Inc

Dickinson Family Counseling Center, PLLC
11 2nd Ave E Ste B
(701) 483-9720
- Licensed Professional Clinical Counselor
  Anderson, Lacey R., LPCC
- Psychology
  Baer, Robert, PSYD

Great Plains Clinic, PC
33 9th St W
(701) 483-6017
- Certified Diabetic Educator
  Rathgeber, Heather D., CDE
- Certified Registered Nurse Anesthetist
  Hildebrandt-Folske, Carla J., CRNA
  Tooz, Laura J., CRNA
- Nurse Practitioner
  Floberg, Lea M., CNP
  Gold, Maryann, FNP

Great Plains Clinic, PC (cont.)
- Physician Assistant
  Nies, Troy S., PA
  Pirkl, Erin M., PA
  Samples, Amy L., PA

Greene Drug
16 W Villard
(701) 225-5171
- Home Medical Equipment
  M & S Inc dba Greene Drug

Heart River Alcohol Drug Inc.
7 1st Ave W Ste 101
(701) 483-0795
- Licensed Addiction Counselor-Chemical Dependency
  Waller, Linda K., LAC
  Wieglenda, John H., LAC
  Wieglenda, Marsha, LAC

Heart River Hearing Aid Practice
1051 3rd Ave W
(701) 227-0728
- Audiology
  Callahan, Kim B., AUD

Medquest/St Josephs Hospital
584 12th St W
(701) 456-4364
- Home Medical Equipment
  Medquest/ST Josephs Hospital

Medquest/St Josephs Hospital
584 12th St W
(701) 456-4364
- Home Infusion
  Medquest/ST Josephs Hospital

Miracle Ear
1173 3rd Ave W Ste 14
(701) 483-3588
- Home Medical Equipment
  Miracle Ear

ND Pharmacy Inc
446 18th St W Ste 2
(701) 225-4434
- Pharmacy
  ND Pharmacy Inc

Neurosurgical & Spinal Surgery Associates, PC
683 State Ave N
(605) 341-2424
- Physician Assistant
  Davis Faith, Kara L., PA
  Richards, James W., PA
  Richards, Juanita M., PA

Ollerman Inc dba Medicine Shoppe
1571 W Villard #1
(701) 227-8265
- Home Medical Equipment
  Ollerman Inc dba Medicine Shoppe

Omaha Therapy Inc. dba Rehabvisions
683 State Ave Ste B
(701) 483-9400
- Occupational Therapy
  Huffman, Katie, OT
  McPeters, Rayel, OT
  Meier, Miranda J., OT
- Physical Therapy
  Ash, Cory, PT
  Gerving, Sara, PT
  Metz, Daniel G., PT
  Olson, Savannah, PT
  Schlosser, Katie, PT
  Zastoupil-Hartze, Donna J., PT
- Speech Therapy
  Abel, Amber, ST
  Casciato, Valerie M., ST
  Doerr, Shayna R., ST
  Fuchs, Haley, ST
  Herauf, Jean L., ST
  Meyer, Cassandra, ST
  Pensak, Melanie, ST
  Schatz, Candace, ST
  Wiggins, Angelica, ST

Sacajawea Substance Abuse Counseling and Drug Testing Center
112 3 St W Ste 301
(701) 483-9150
- Licensed Addiction Counselor-Chemical Dependency
  Kuhn, Janet L., LAC
  Wanner, Victor, LAC

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING ANCILLARY PROVIDERS

Sanford Health Dickinson Clinic
2615 Fairway St
(701) 456-6000

- Certified Registered Nurse Anesthetist
  Myers, Michael R., CRNA
- Nurse Practitioner
  Anderson, Tamala M., CNP
  Olson, Janel, FNP
- Physician Assistant
  Champa, Whitney L., PA
  Laumb, Kellie J., PA
- Psychology
  Doerner, Mark, PHD

Sanford Health Dickinson Hearing Center
1531 W Villard St Ste B
(701) 225-7188

- Audiology
  Arneson-Thilmony, Debra J., AUD
  Boutilier, Amanda D., AUD
  Mann, Krystal L., AUD
  Mattheis Anderson, Amy M., AUD
  Ness, Brady J., AUD
  Schauer, Douglas D., AUD

Sanford Health Family Connection Safe Visitation Center
128 1st St W #2
(701) 483-7233

- Licensed Professional Clinical Counselor
  Condol, Paula J., LPCC
  Hilfer, Shannon L., LPCC

Sanford Health Occupational Medicine Clinic
1531 W Villard St Ste A
(701) 225-7575

- Physical Therapy
  Becker, Erica M., PT
  Brousseau, Michael A., PT
  Hahn, Sondra M., PT
  Heaton, Mariah D., PT
  Hunt, Heather L., PT
  Judah, Grant E., PT
  Jurgens-Dinius, Nicholl, PT
  Skluzacek, Amanda R., PT
  Wetzel, Jeff, PT

Sanford Health Occupational Medicine Clinic (cont.)

- Physician Assistant
  Champa, Whitney L., PA
  Fridrich, Elizabeth F., PA
  Malzer, Christine M., PA
  Schillo, Sherry K., PA
  Vearrier, Tracy L., PA
  Worrel, Leslie A., PA

St Josephs Hospice and Home Care
986 2nd Ave W
(701) 456-4378

- Speech Therapy
  Stockert, Misty J., ST

St Josephs Hospital & Health Center
30 7th St W
(701) 456-4000

- Audiology
  Ness, David A., AUD
- Certified Diabetic Educator
  Olheiser, Sharon M., CDE
- Certified Registered Nurse Anesthetist
  Bakke, Amy J., CRNA
  Grosulak, Tammy J., CRNA
  Jorda, Arlys M., CRNA
  Lefor, Glenn R., CRNA
  Milner, Misty, CRNA
  Rau, Sasha, CRNA
  Stengel, Susan K., CRNA
- Licensed Registered Dietitian
  Bruels, Suzanne, LRD
  Quammen, Alexis H., LRD
  Stafford, Darcy A., LRD
- Nurse Practitioner
  Hardy, Michelle M., CNP
  Jepson, Lori A., CNP
  Kiecker, Rebecca A., CNP
  Swanson, Karen I., FNP
  Volk, Robert, FNP
- Occupational Therapy
  Belland, Adrienne N., OT
  Metz, Nancy L., OT
- Physical/Occupational Therapist
  Belland, Adrienne N., OT
- Physician Assistant
  Brophy, Shad W., PA

St Josephs Hospital & Health Center (cont.)

- Physician Assistant (continued)
  Holland, Randy R., PA
  Lelito, Nicholas, PA
  Preszler, Roger R., PA
  Reiman, Jennifer M., PA
  Vearrier, Tracy L., PA

St Josephs Walk In Clinic
227 16th St W
(701) 227-7900

- Nurse Practitioner
  Medford, Jessica L., FNP
- Physical Therapy
  Weber, Shane M., PT
- Physician Assistant
  Champa, Whitney L., PA
  Holland, Randy R., PA
  Lamping, Tiffany R., PA

St Josephs Womens Clinic
30 W 7th St
(701) 456-4200

- Nurse Practitioner
  Wicks, Mary Jo, CNP
- Physician Assistant
  Schillinger, Amie M., PA

Therapy Solutions
448 21 St W Ste D-1
(701) 483-1000

- Occupational Therapy
  Belland, Adrienne N., OT
  Crespo, Erica K., OT
  Erie, Jared D., OT
  Halverson, Eric, OT
- Physical Therapy
  Binstock, Jessie, PT
  Henke, Thomas D., PT
  Laumb, Brian T., PT
  Tsibur-Mayer, Alexandra (Sasha) S., PT
  Wock, Roberta J., PT
  Zastoupil-Hartze, Donna J., PT
- Physical/Occupational Therapist
  Erie, Jared D., OT

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING ANCILLARY PROVIDERS

North Dakota (cont.)

Dickinson (cont.)

Westwind Consulting Center
135 W Villard St
(701) 225-1050

- Psychology
  Fehr, Alan J., PHD
  Hall, Shelly, PSYD

Drayton

Altru Drayton
1003 N Main St
(701) 454-3311

- Licensed Registered Dietitian
  Larson, Tara K., LRD
- Nurse Practitioner
  Anderson, Marie K., CNP

Dunseith

Cornerstone Addiction
101 Peace Garden Ave
(701) 244-2299

- Licensed Addiction Counselor-Chemical Dependency
  Berdahl, Linda A., LAC

Heart of America Johnson Clinic Dunseith
215 Main St SE
(701) 244-5694

- Nurse Practitioner
  Costner, David S., CNP
  Harder, Tammie J., CNP
  Mickelson, Barbara J., CNP
  Pagel-Trana- Duttenhef, Bobbie M., CNP
  Stahl, Andrea L., FNP
  Townsend, Cammy K., FNP
- Physician Assistant
  Danielson, Gail L., PA
  Hager, Dustin T., PA
  Harder, Tammie J., PA

Turtle Mountain Family Medicine LLC
115 Main St NE
(701) 244-5800

- Nurse Practitioner
  Gottbreht, Rosann, CNP

North Dakota (cont.)

Edgeley

Sanford Health Edgeley Clinic
506 2nd St
(701) 493-2245

- Nurse Practitioner
  Falk, Kara A., FNP
  Levee, Linda C., CNP
- Physician Assistant
  Hack, Vicki L., PA

Elgin

Hands On Health, Inc
302 N Main St
(605) 374-5844

- Physical Therapy
  Keller, Niomi M., PT

Jacobson Memorial Elgin Community Clinic
603 East St N
(701) 584-7231

- Nurse Practitioner
  Rivinius, Carey E., CNP
- Physician Assistant
  Dent, Tyesha, PA
  Duppong, Linda E., PA

Jacobson Memorial Hospital Care Center
601 East St N
(701) 584-3338

- Nurse Practitioner
  Rivinius, Carey E., CNP
- Physician Assistant
  Dent, Tyesha, PA
  Duppong, Linda E., PA

Ellendale

Avera Clinic of Ellendale
240 Main St
(701) 349-3666

- Physician Assistant
  Ermer, Brian, PA
  Martin, Valerie B., PA
  Snyder, Michelle K., PA

Life Seasons Counseling, PLLC
240 Main St
(701) 678-4800

- Licensed Professional Clinical Counselor
  Elhard, Deborah J., LPCC

North Dakota (cont.)

Ellendale (cont.)

Life Seasons Counseling, PLLC
240 Main St
(701) 678-4800

- Licensed Professional Clinical Counselor
  Elhard, Deborah J., LPCC

Sanford Health Ellendale Clinic
141 Main St
(701) 349-3331

- Licensed Registered Dietitian
  Erlandson, Barbara H., LRD
- Nurse Practitioner
  Gabriel, James, FNP
  Kaiser, Karen A., CNP
  Long, Lillian, FNP
- Physician Assistant
  Hack, Vicki L., PA
  Hendricks, Larry A., PA

Enderlin

Maryhill Manor
110 Hillcrest Dr
(701) 437-3544

- Occupational Therapy
  Aberle, Carmen, OT
  Shearer, Treena, OT
- Physical Therapy
  Long, Charles A., PT
- Physical/Occupational Therapist
  Aberle, Carmen, OT
  Shearer, Treena, OT

Mobility Plus Rehabilitation
110 Hillcrest Dr
(701) 437-3782

- Occupational Therapy
  Aberle, Carmen, OT
- Physical Therapy
  Long, Charles A., PT
  Lorenz, Ryan R., PT
  Shanenko, Paul, PT
  White, Brittany L., PT
- Physical/Occupational Therapist
  Aberle, Carmen, OT

Sanford Health Enderlin Clinic
201 4th Ave Ste 1
(701) 437-3320

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING ANCILLARY PROVIDERS

North Dakota (cont.)
Enderlin (cont.)

Sanford Health Enderlin Clinic (cont.)
- Nurse Practitioner
  Pfennig, Gregory, FNP
- Physician Assistant
  Buchholz, Brent M., PA
  Lueck, Michelle A., PA
  Stoltz, Joan L., PA

Fargo

7 Day Clinic
1517 32nd Ave S
(701) 232-6211
- Licensed Registered Dietitian
  White, Natalie J., LRD
- Nurse Practitioner
  Allard, Amy M., FNP
  Dolalie-Kelsch, Angela A., CNP
  Ek, Marilyn S., FNP
  Hamilton, Andrew P., FNP
  Montplaisir, Pamela J., FNP
  Nuelle, Bethann M., FNP
  Stanger, Carole, FNP
- Physician Assistant
  Davidson, Gabriel L., PA
  Hoff, Bradley D., PA
  Ratajczak, Amy, PA
  Worrel, Leslie A., PA
  Zink, Jamie, PA
- Psychology
  Hartson, David, PHD

7 Day Clinic
1100 19th Ave N Ste L-M
(701) 364-2909
- Nurse Practitioner
  Allard, Amy M., FNP
  Dolalie-Kelsch, Angela A., CNP
  Ek, Marilyn S., FNP
  Hamilton, Andrew P., FNP
  Montplaisir, Pamela J., FNP
  Nuelle, Bethann M., FNP
  Rick, Brenda M., FNP
  Stanger, Carole, FNP
- Physician Assistant
  Davidson, Gabriel L., PA
  Hoff, Bradley D., PA
  Ratajczak, Amy, PA
  Worrel, Leslie A., PA

North Dakota (cont.)
Fargo (cont.)

7 Day Clinic -Osgood
4622 40th Ave S
(701) 364-2909
- Licensed Registered Dietitian
  White, Natalie J., LRD
- Nurse Practitioner
  Allard, Amy M., FNP
  Dolalie-Kelsch, Angela A., CNP
  Ek, Marilyn S., FNP
  Hamilton, Andrew P., FNP
  Stanger, Carole, FNP
- Physician Assistant
  Davidson, Gabriel L., PA
  Ratajczak, Amy, PA
  Zink, Jamie, PA
- Psychology
  Hartson, David, PHD

Altendorf Counseling & Associates
1351 Page Dr SW Ste 100
(701) 478-4044
- Licensed Professional Clinical Counselor
  Altendorf, John, LPCC

Andersen Counseling
624 Main Ave Suite 4b
(701) 793-7822
- Licensed Professional Clinical Counselor
  Andersen, Mary Jo, LPCC

Anesthesia Resources
3280 20th St S
(701) 361-6957
- Certified Registered Nurse Anesthetist
  Schmalz, Paula K., CRNA

Anesthesia Resources
1507 University Dr S
(701) 361-6957
- Certified Registered Nurse Anesthetist
  Schmalz, Paula K., CRNA

At Home Therapy Services dba Rehab4life Physical Therapy
4622 40 Ave S Ste B
(701) 293-7294
- Physical Therapy
  Gieseke, Stephanie, PT
  Gunkel, Amanda M., PT

North Dakota (cont.)
Fargo (cont.)

At Home Therapy Services dba Rehab4life Physical Therapy (cont.)
- Physical Therapy (continued)
  Hunt, Lindsey, PT
  Keller, Tracy L., PT
  St Clair, Keli N., PT
  Stroh, Roger J., PT
  Torgerson, Kari A., PT
  Wold, Jeffrey L., PT

Avail Psychological and Addiction Services, PLLC
112 Univ Dr N Ste 200
(701) 566-5272
- Licensed Addiction Counselor-Chemical Dependency
  Busch, Megan M., LAC
  Karjalainen, Jessica R., LAC
- Psychology
  Sternhagen, Scott V., PHD

Barbara Stanton, LPCC
3309 Fiechtner Drive
Suite C
(701) 356-2273
- Licensed Professional Clinical Counselor
  Stanton, Barbara K., LPCC

Beltone Hearing Aid Service
825 25 St S
(701) 237-9977
- Home Medical Equipment
  Beltone Hearing Aid Service

Benson Psychological Services
1308 23rd St S Ste G
(701) 297-7540
- Licensed Professional Clinical Counselor
  Forde, June M., LPCC
  Singh, Usha, LPCC
- Psychology
  Benson, Stacey L., PSYD
  Darveaux, Dion X., PHD
  Phillippi, Jay R., PHD
  Quam, Sara D., PSYD
  Smith, Kelly C., PSYD
  Stone, Eileen M., PSYD

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING ANCILLARY PROVIDERS

Bethany On University
201 S University Dr
(701) 239-3000

- Occupational Therapy
  Edwards, Chelsey L., OT
- Physical Therapy
  Joyce, Jonah D., PT
- Speech Therapy
  Kapitan, Kari J., ST

Bethany Retirement Living
4255 30th Ave S
(701) 478-8950

- Physical Therapy
  Riley, Lindsay A., PT

Beyond Boundaries Occupational Therapy Inc
3001 S 11th St
(701) 356-0062

- Occupational Therapy
  Bannach, Ladonna R., OT
  Hensrud, Andrea M., OT
  Lund, Kelsey, OT
  Olson, Janet R., OT
  Stevenson, Valerie J., OT
- Physical Therapy
  Anderson, Brittany, PT
  Askvig, Janelle E., PT

Beyond Boundaries Speech Language Therapy, Inc
3001 11th St S
(701) 356-0062

- Speech Therapy
  Anderson, Carol A., ST
  Dewald, Jessica, ST
  Doty, Megan, ST
  Fiskness, Heidi A., ST
  Glynn, Valerie, ST
  Grommesh, Kelsey A., ST
  Jore, Erin K., ST
  Perman, Nicole M., ST
  Radermacher, Katharine R., ST
  Severson, Krysta M., ST
  Suppes, Jill, ST

Bodyworks Physical Therapy, Ltd
3242 20th St S
(701) 893-2639

Bodyworks Physical Therapy, Ltd (cont.)

- Physical Therapy
  Grunewald, Claire F., PT
  Helgoe, Amanda R., PT
  Zimmerman, Andrew K., PT

Bogenreif, Marian, LPCC, LAC
118 Broadway Ste 601
(218) 736-5009

- Licensed Addiction Counselor-Chemical Dependency
  Bogenreif, Marian F., LAC
- Licensed Professional Clinical Counselor
  Bogenreif, Marian F., LPCC

Cariveau, Geraldine V, LPCC
3107 Westgate Dr
(701) 232-7374

- Licensed Professional Clinical Counselor
  Cariveau, Geraldine V., LPCC

Catalyst Medical Center, PC
1800 21 Ave S
(701) 365-8700

- Audiology
  Brakke, Rose I., AUD
- Nurse Practitioner
  Quinn, Angela Y., CNP
  Sedlaczek, Katarzyna N., CNP
- Physician Assistant
  Regan, Linda K., PA

Catholic Charities North Dakota
5201 Bishops Blvd Ste B
(701) 235-4457

- Licensed Professional Clinical Counselor
  Johnson, Catherine A., LPCC

Child Family Therapy Associates
1121 Westrac Dr Ste 204
(701) 893-3419

- Psychology
  Shawchuck, Carita R., PHD

Christeen A McLain dba Consultation & Movement
1402 Broadway N
(701) 388-1813

- Licensed Addiction Counselor-Chemical Dependency
  McLain, Christeen A., LAC
- Psychiatric Nurse
  McLain, Christeen A., PNU

Clarity Counseling
808 3 Ave S Suite 303
(701) 356-5545

- Licensed Professional Clinical Counselor
  Tallakson, Martin E., LPCC

Claudia McGrath Counseling HHN
417 38th St SW Ste B
(701) 277-0654

- Licensed Addiction Counselor-Chemical Dependency
  McGrath, Claudia M., LAC
- Licensed Professional Clinical Counselor
  McGrath, Claudia M., LPCC

Conscious Living Counseling and Education Center
26 Roberts St Ste 114
(701) 371-6211

- Licensed Professional Clinical Counselor
  Jensen, Kama B., LPCC

Counseling Etc
5731 18th St S
(701) 205-1743

- Licensed Professional Clinical Counselor
  Hundley, Steven F., LPCC

D & L PC dba Quality Life
1316 23rd Street S
(701) 478-0333

- Licensed Professional Clinical Counselor
  Emmel, Jenny E., LPCC
  Holt Johnson, Georgia M., LPCC
  Naslund, Angell M., LPCC

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING ANCILLARY PROVIDERS

D & L PC dba Quality Life (cont.)
- Nurse Practitioner
  Conteh, Patricia E., CNP
  Graham Steinhauer, Jessica K., CNP
- Psychiatric Nurse
  Volness, Linda J., CNS

Daigle Professional Counseling Services PLLC
1323 23rd St S Ste H
(701) 232-2886
- Licensed Addiction Counselor-Chemical Dependency
  Daigle, Rachel, LAC
- Licensed Professional Clinical Counselor
  Daigle, Rachel, LPCC

Dakota Boys Ranch
1641 31st Ave S
(701) 237-3123
- Licensed Addiction Counselor-Chemical Dependency
  Waind, Melissa, LAC
  Wendt, Jamie L., LAC
- Licensed Professional Clinical Counselor
  Simonson, Boni M., LPCC
  Vetter, Sara J., LPCC

Dakota Family Services
7151 15th St S
(701) 364-2950
- Occupational Therapy
  Willert, Shea, OT
- Psychology
  Willert Jr, Meryl G., PHD

Deer Oaks Mental Health Associates PC At Bethany On 42nd
4255 30th Ave S
(701) 478-8900
- Psychology
  Rosenheim, Harold D., PHD

Denton-Graber, Ruth LPCC
3309 Fiechtner Drive
Ste C
(701) 356-2273

Denton-Graber, Ruth LPCC (cont.)
- Licensed Professional Clinical Counselor
  Denton-Graber, Ruth M., LPCC

Discovery Counseling Center
115 N University Dr
(701) 237-4542
- Psychology
  Barrett, Terence W., PHD

Drake Counseling Services, Inc
1202 23rd St S
(701) 293-5429
- Licensed Addiction Counselor-Chemical Dependency
  Bartsch, Jennifer A., LAC
  Drake, Charles, LAC
  Flann, Kayla J., LAC
  Hersrud, Jacqueline M., LAC
  Johnson, Janna M., LAC
  Walen, Charlyne, LAC
  Williams, Sheena M., LAC
- Licensed Professional Clinical Counselor
  Drake, Charles, LPCC

Eslinger, Kristi J. Otr
2933 37th Ave S
(701) 239-0439
- Occupational Therapy
  Eslinger, Kristi J., OT

Essentia Health 32nd Avenue Clinic
3000 32nd Ave S
(701) 364-8000
- Certified Registered Nurse Anesthetist
  Borgen, Melissa J., CRNA
  Bulik, Robert E., CRNA
  Callahan, Joseph R., CRNA
  Callahan, Kevin C., CRNA
  Deutsch, Sarah R., CRNA
  Eckman, Nikki, CRNA
  Gross, Amanda J., CRNA
  Harvey, Lynda R., CRNA
  Hayes, Angela W., CRNA
  Honeyman, Ron L., CRNA
  Horner, Bradley, CRNA
  Huntington, Tracy A., CRNA
  Kremer, Randall L., CRNA
  Lambert, Matthew, CRNA

Essentia Health 32nd Avenue Clinic (cont.)
- Certified Registered Nurse Anesthetist (continued)
  Lantz, Leo J., CRNA
  Larson, Tara R., CRNA
  Mikkelsen, John M., CRNA
  Olson, Jeffrey E., CRNA
  Skatvold, Sara J., CRNA
  Spicer, Nathan M., CRNA
  Strasburg, Ryan G., CRNA
  Zarling, Anne C., CRNA
  Zuel, Melissa M., CRNA
- Licensed Registered Dietitian
  Andvik, Vicki, LRD
  Dubord, Tara, LRD
  Hieb, Amy, LRD
  Lund, Karla M., LRD
- Nurse Midwives
  Burrell, Terry J., CNM
  Carver, Linda D., CNM
  Howell, Christa L., CNM
  Janke, Jennifer L., CNM
  Powell, Denise C., CNM
- Nurse Practitioner
  Beecher, Tracy L., FNP
  Beiseker, Andrea M., FNP
  Bergs, Laura M., CNP
  Boeddeker, Spring A., FNP
  Brown, Camille A., CNP
  Eriksson, Kelli L., CNP
  Forbes Crowe, Feneta, FNP
  French Baker, Karla, FNP
  Holtz, Pamela P., FNP
  Kjos, Janell K., FNP
  Middlestead, Andrea, CNP
  Naslund, Leslee S., CNP
  Roth, Shannon, FNP
  Sims, Jessica, CNP
  Soforenko, Margaret R., CNP
  Wojcik, Susan E., CNP
- Occupational Therapy
  Boerboom, Sarah A., OT
  Crowe, Cheryl B., OT
  Enockson, Michelle I., OT
  Hager, Megan, OT
  Husar, Abby E., OT
  Kiefer, Megan M., OT
  Knott, Christina M., OT
  McKibbin, Randon N., OT

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING ANCILLARY PROVIDERS

Essentia Health 32nd Avenue Clinic (cont.)

- Occupational Therapy (continued)
  Mueller, Amy L., OT
  Thiel, Barbara E., OT
  Wasemiller, Peggy J., OT
- Physical Therapy
  Ali, Sana, PT
  Barnhardt, Scott D., PT
  Bitz, Heidi S., PT
  Bitz, James P., PT
  Brekke, Teri J., PT
  Garrahy, Shauna, PT
  Gauer, Chelsey N., PT
  Gunkelman, Ashley L., PT
  Halls, Ruth Ann, PT
  Isaak, Christine M., PT
  Kohler, Brittany, PT
  Meuwissen, Marissa N., PT
  Sauvageau, Katie M., PT
  Schmidt, Nicole J., PT
  Sunde, Lizette, PT
- Physical/Occupational Therapist
  Boerboom, Sarah A., OT
  Crowe, Cheryl B., OT
  Enockson, Michelle I., OT
  Husar, Abby E., OT
  Mueller, Amy L., OT
  Wasemiller, Peggy J., OT
- Physician Assistant
  Balvitsch, Jason, PA
  Dewey, Phillip A., PA
  Fewless, Theresa R., PA
  Francis, Lora, PA
  Kauffman, Russell A., PA
  Kessel, Ryan T., PA
  Knutson, Crystal Y., PA
  Mitzel, Wyatt L., PA
  Olson-Fitzgerald, Heidi M., PA
  Purnama, Paulina, PA
  Skove, Marcie S., PA
  Skyberg, Angela M., PA
  Swenson, Tiffany, PA
  Urlaub, Cathy R., PA
  Welk, Nikki L., PA
- Psychology
  Hauge, Gregory A., PHD
  Kirchner, Joel T., PSYD

Essentia Health 32nd Avenue Clinic (cont.)

- Speech Therapy
  Booth, Jill M., ST
  Boucher, Nicole R., ST
  Haen Sawrey, Amy C., ST
  James, Laura, ST
  Leadbetter, Jennifer, ST
  McAllister, Meghan L., ST
  McNutt, Melanie J., ST
  Rongstad, Sarah L., ST
  Stich, Sherrey L., ST
  Sullivan, Patricia C., ST

Essentia Health Hospital
3000 32nd Ave S
(701) 364-8000

- Nurse Practitioner
  Forbes Crowe, Feneta, FNP
  Holtz, Pamela P., FNP
- Physician Assistant
  Fewless, Theresa R., PA
  Kauffman, Russell A., PA

Essentia Health South University Clinic
1702 University Dr S
(701) 364-3300

- Audiology
  Almer, Marin A., AUD
  Frisk (Movchan), Cari L., AUD
- Certified Diabetic Educator
  Bednar, Jennifer, CDE
  Skoog, Jennifer M., CDE
  Viger, Karen M., CDE
- Certified Registered Nurse Anesthetist
  Borgen, Melissa J., CRNA
  Bulik, Robert E., CRNA
  Callahan, Joseph R., CRNA
  Callahan, Kevin C., CRNA
  Deutsch, Sarah R., CRNA
  Eckman, Nikki, CRNA
  Gross, Amanda J., CRNA
  Harvey, Lynda R., CRNA
  Hayes, Angela W., CRNA
  Honeyman, Ron L., CRNA
  Horner, Bradley, CRNA
  Huntington, Tracy A., CRNA
  Kremer, Randall L., CRNA
  Lambert, Matthew, CRNA

Essentia Health South University Clinic (cont.)

- Certified Registered Nurse Anesthetist (continued)
  Lantz, Leo J., CRNA
  Larson, Tara R., CRNA
  Mikkelsen, John M., CRNA
  Skatvold, Sara J., CRNA
  Spicer, Nathan M., CRNA
  Strasburg, Ryan G., CRNA
  Zarling, Anne C., CRNA
  Zuel, Melissa M., CRNA
- Licensed Registered Dietitian
  Andvik, Vicki, LRD
  Bednar, Jennifer, LRD
  Dubord, Tara, LRD
  Hieb, Amy, LRD
  Lund, Karla M., LRD
  Nagel, Joan L., LRD
  Skoog, Jennifer M., LRD
  Walters, Leah M., LRD
- Nurse Practitioner
  Garberg, Tamra A., FNP
  Kuhn, Jessica R., CNP
  McKinnon, Dawn R., CNP
  Moen, Lisa R., CNP
  Nelles, Rachel K., CNP
  Schultz, Joan M., CNP
  Weston, Penni M., FNP
- Occupational Therapy
  Boerboom, Sarah A., OT
  Crowe, Cheryl B., OT
  Enockson, Michelle I., OT
  Hager, Megan, OT
  Husar, Abby E., OT
  Kiefer, Megan M., OT
  Knott, Christina M., OT
  McKibbin, Randon N., OT
  Mueller, Amy L., OT
  Thiel, Barbara E., OT
  Wasemiller, Peggy J., OT
- Physical Therapy
  Ali, Sana, PT
  Barnhardt, Scott D., PT
  Bitz, Heidi S., PT
  Bitz, James P., PT
  Brekke, Teri J., PT
  Garrahy, Shauna, PT
  Gauer, Chelsey N., PT
  Gunkelman, Ashley L., PT

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING ANCILLARY PROVIDERS

Essentia Health South University Clinic (cont.)

- Physical Therapy (continued)
  Halls, Ruth Ann, PT
  Isaak, Christine M., PT
  Kohler, Brittany, PT
  Meuwissen, Marissa N., PT
  Sauvageau, Katie M., PT
  Schmidt, Nicole J., PT
  Schwengler, Jason J., PT
  Sunde, Lizette, PT
- Physical/Occupational Therapist
  Boerboom, Sarah A., OT
  Crowe, Cheryl B., OT
  Enockson, Michelle I., OT
  Husar, Abby E., OT
  Mueller, Amy L., OT
  Wasemiller, Peggy J., OT
- Physician Assistant
  Erickson, Rick D., PA
  Norby, Brenda J., PA
  Olson-Fitzgerald, Heidi M., PA
  Swenson, Tiffany, PA
- Psychology
  Hauge, Gregory A., PHD
- Speech Therapy
  Booth, Jill M., ST
  Boucher, Nicole R., ST
  Haen Sawrey, Amy C., ST
  James, Laura, ST
  Leadbetter, Jennifer, ST
  Lindquist, Elise, ST
  McAllister, Meghan L., ST
  McNutt, Melanie J., ST
  Rongstad, Sarah L., ST
  Stich, Sherrey L., ST
  Sullivan, Patricia C., ST

Essentia Health West Acres Clinic
3902 13th Ave S
(701) 364-6600

- Nurse Practitioner
  Anderson, Elisha D., FNP
  Boeddeker, Spring A., FNP
  Garberg, Tamra A., FNP
  Hansen, Sara, CNP
  Kempton, Marcia E., FNP
  Kjos, Janell K., FNP
  McKinnon, Dawn R., CNP
  Meyer, Lana J., FNP
  Nelles, Rachel K., CNP

Essentia Health West Acres Clinic (cont.)

- Nurse Practitioner (continued)
  Safranski, Mary B., CNP
  Schultz, Joan M., CNP
  Weston, Penni M., FNP
- Occupational Therapy
  Boerboom, Sarah A., OT
  Crowe, Cheryl B., OT
  Enockson, Michelle I., OT
  Husar, Abby E., OT
  Kiefer, Megan M., OT
  McKibbin, Randon N., OT
  Mueller, Amy L., OT
- Physical Therapy
  Ali, Sana, PT
  Barnhardt, Scott D., PT
  Bitz, Heidi S., PT
  Bitz, James P., PT
  Brekke, Teri J., PT
  Garrahy, Shauna, PT
  Gauer, Chelsey N., PT
  Gunkelman, Ashley L., PT
  Halls, Ruth Ann, PT
  Isaak, Christine M., PT
  Kohler, Brittany, PT
  Sauvageau, Katie M., PT
  Schmidt, Nicole J., PT
  Schwengler, Jason J., PT
  Sunde, Lizette, PT
- Physical/Occupational Therapist
  Boerboom, Sarah A., OT
  Crowe, Cheryl B., OT
  Enockson, Michelle I., OT
  Husar, Abby E., OT
  Mueller, Amy L., OT
- Physician Assistant
  Hoffman, Leah, PA
  Larson, Bruce D., PA
  Motschenbacher, Kurtis K., PA
  Olson-Fitzgerald, Heidi M., PA
  Shilling, John R., PA
  Skyberg, Angela M., PA
  Soper, Constance F., PA
  Swenson, Tiffany, PA
  Welk, Nikki L., PA

Family Healthcare Center
301 NP Ave
(701) 271-3344

- Clinical Nurse Specialist
  Dobmeier, Terry, CNS
- Licensed Registered Dietitian
  Berg, Vanessa, LRD
  Leino-Mills, Pamela, LRD
- Nurse Midwives
  Dockter, Meghan, CNM
- Nurse Practitioner
  Grothem, Avis L., CNP
  Hauff, Alicia, FNP
  McMullen, Jill M., FNP
  Polcher, Kelly, FNP
  Sprague, Mary L., FNP
  Swingen, Randy C., FNP
- Physician Assistant
  Gray, Kathryn, PA

Family Institute PC
4955 17th Ave S Ste 122
(701) 282-8510

- Psychology
  Adams Larsen, Margo A., PHD
  Moe, Brian K., PHD
  Paulson, Michael D., PHD

Fargo Cass Public Health
401 3rd Ave N
(701) 241-1383

- Nurse Practitioner
  Eckes, Audrey A., CNP
  Ellingson, Lori L., FNP

Gail Reierson Consulting
2524 18th St S
(701) 730-6279

- Licensed Professional Clinical Counselor
  Reierson, Gail N., LPCC

Gjerde, Elizabeth LPCC dba Accent On Care
3309 Fiechtner Dr Ste C
(701) 866-3969

- Licensed Professional Clinical Counselor
  Gjerde, Elizabeth A., LPCC

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING ANCILLARY PROVIDERS

Great Kids Therapy Ltd
3507 Evergreen Rd NE
(701) 261-4643

- Occupational Therapy
  Meinhardt, Sarah D., OT
- Physical/Occupational Therapist
  Meinhardt, Sarah D., OT

Hanger Prosthetics and Orthotics Inc
3003 32nd Ave S Ste 102
(701) 298-7926

- Home Medical Equipment
  Hanger Prosthetics and Orthotics Inc

Hcr Manorcare Medical Services of Florida, LLC dba Hcp
1315 S University Drive
(800) 375-5495

- Nurse Practitioner
  Buegel, Huyen, CNP
  Moore, Wendy M., FNP

Healthsource of Fargo-Moorhead
3175 Sienna Dr Ste 105
(701) 451-9098

- Home Medical Equipment
  Healthsource of Fargo-Moorhead

Hearing Solutions, Inc.
2700 12th Ave SW Ste D
(701) 232-2438

- Audiology
  Frisk, Matthew T., MS
- Home Medical Equipment
  Hearing Solutions, Inc.

Heartland Diagnostic Services LLC
3280 20th St S
(701) 499-4800

- Independent Laboratory
  Heartland Diagnostic Services LLC

Horizon Therapy, Inc
4420 37th Ave S
(701) 365-4771

- Occupational Therapy
  Nelson, Crystal L., OT
- Physical Therapy
  Huber, Matthew T., PT

Hospice of The Red River
1701 38th St S Ste 101
(701) 356-1500

- Nurse Practitioner
  Johnson, Jennifer L., FNP

Independent Anesthesia
1507 S University Dr
(701) 237-9592

- Certified Registered Nurse Anesthetist
  Mosey, Karen M., CRNA

Independent Family Doctors
1711 Gold Drive S #160
(701) 234-9400

- Nurse Practitioner
  Dunkel, Sharon K., FNP
  Schmidt, Lori B., FNP

Inner Light Counseling Services
1323 23 St S Suite H
(701) 478-0906

- Licensed Professional Clinical Counselor
  Axtman, Mystal R., LPCC

Internal Medicine Associates
1707 Gold Dr S Ste 101
(701) 280-2033

- Licensed Registered Dietitian
  Fuchs, Lisa M., LRD
  Vettleson, Lindsay R., LRD
- Nurse Practitioner
  Holtz, Pamela P., FNP
- Physician Assistant
  Engberg, Dacia, PA
  Hanson, Susan J., PA

Jeffrey C Gregory, PhD PC dba Gregory Psychology Solutions
1323 23rd St S Ste B
(701) 293-7477

- Psychology
  Gregory, Jeffrey C., PHD

Johnson Counseling & Consulting
3309 Fiechtner Drive
Suite C
(701) 356-2273

- Licensed Professional Clinical Counselor
  Johnson, Cynthia S., LPCC

Joy Belzer Counseling
1330 Page Dr S Ste 202b
(701) 367-5985

- Licensed Professional Clinical Counselor
  Belzer, Joy A., LPCC

Lamb Plastic Surgery Center, PC
1507 University Dr S
(701) 237-9592

- Certified Registered Nurse Anesthetist
  Mosey, Karen M., CRNA

Lincare Inc
1609 32 Ave S Ste C
(701) 235-0175

- Home Medical Equipment
  Lincare Inc

Linson Pharmacy
3175 25th St S
(701) 293-6022

- Pharmacy
  Linson Pharmacy

Magelky, Phyllis Ltd
3509 Interstate Blvd
Ste B
(701) 364-9070

- Speech Therapy
  Henrich, Stacy R., ST
  Magelky, Phyllis J., ST
  Nostrum, Cari Ann, ST
  Staehnke, Emilee K., ST
  Walker, Amanda C., ST

Matthys, Gary, MD
2301 25th St S Suite I
(701) 241-9300

- Home Medical Equipment
  Gary A. Matthys, MD Plc
- Physician Assistant
  McDonald, Sean D., PA

Neuropsychology Associates PA
1220 Main Ave #100
(701) 297-7588

- Psychology
  Meidinger, Amy L., PHD
  Swenson, Rodney, PHD

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING ANCILLARY PROVIDERS

Nielsen Counseling
1919 N Univ Dr Sgc C119
(701) 231-7676

- Licensed Professional Clinical Counselor
  Nielsen, Robert C., LPCC

Onword Therapy
1220 Main Ave Ste 120
(701) 364-5433

- Speech Therapy
  Doerfler, Elaine, ST
  Glynn, Valerie, ST
  Grommesh, Kelsey A., ST
  Hoepfner, Sarah, ST
  Kennelly, Nanette S., ST
  Kraling, Michelle, ST
  Wiedenman, Katyana M., ST

Partner Medical ND LLC
5256 50th Ave S
(866) 590-2138

- Home Medical Equipment
  Partner Medical ND LLC

Pediatric Therapy Partners Inc
3060 Frontier Way S
(701) 232-2340

- Occupational Therapy
  Bluhm, Erica, OT
  Borlaug, Cassandra, OT
  Dingmann, Rochelle A., OT
  Drewlo, Sharon R., OT
  Gottenborg, Kaitlynn, OT
  Hauck, Megan, OT
  Larson, Tessa, OT
  Mitteness, Lisa, OT
  Olson, Stephen P., OT
  Pladson, Leslie, OT
  Sauvageau, Alyssa L., OT
  Sayler, Kathleen S., OT
  Wildeman, Desiree M., OT
  Zimmerman, Hannah M., OT
- Physical Therapy
  Borchardt, Brian A., PT
  Buckmier, Shannon M., PT
  Daily, Alishia M., PT
  Dosland, Kiley A., PT
  Hendrickson, Jodi D., PT
- Physical/Occupational Therapist
  Olson, Stephen P., OT

Pediatric Therapy Partners Inc (cont.)

- Speech Therapy
  Belk, Tessa L., ST
  Delaney, Sara L., ST
  Donahue, Elizabeth A., ST
  Feist, Amy A., ST
  Flach, Arica C., ST
  Graham, Heather L., ST
  Lawson, Chelsey J., ST
  Mart, Michelle L., ST
  Miller, Linaya K., ST
  Murray, Krista M., ST
  Olson, Rachel A., ST
  Quam, Brittany, ST
  Rodke, Stephanie, ST
  Rogness, Lora M., ST
  Thrash, Rebecca, ST
  Vanden Hoek, Amanda M., ST
  Venaas-Gilbraith, Janette, ST
  Voigt, Tiffany P., ST

Plains Medical Clinic LLC
3290 20th St S
(701) 499-4800

- Physician Assistant
  Andvik, Debra E., PA
  Brosowske, Cristy M., PA
  Skyberg, Angela M., PA

Prairie St Johns
510 4th St S
(701) 476-7200

- Licensed Addiction Counselor-Chemical Dependency
  Brink, William D., LAC
  Curran, Patrick C., LAC
  Grahn, Erin M., LAC
  Luzier, Marikay, LAC
  Makonnen, Kimberly R., LAC
  Onungwe, Mary O., LAC
  Phillips, Brenda R., LAC
  Readel, Kelly D., LAC
  Shiaro, Chris M., LAC
  Sorenson, Tonya S., LAC
  Wendt, Jamie L., LAC
- Licensed Professional Clinical Counselor
  Denton-Graber, Ruth M., LPCC
  Pfeifer, James, LPCC
  Stanton, Barbara K., LPCC

Prairie St Johns (cont.)

- Nurse Practitioner
  Bleess Toppen, Jacqueline K., CNP
- Psychology
  Frissell, Jenny, PHD
  Juanto-Laver, Nils-Erik J., PHD

Primary Care At Lillestol Research
1711 Gold Dr S #170
(701) 232-7705

- Physician Assistant
  Brown, Jamie, PA

Professional Rehabilitation Center, Inc
1711 Gold Dr Ste 120
(701) 451-9417

- Occupational Therapy
  Baumgartner, Jessica M., OT
  Wilson, Sarah J., OT
- Physical Therapy
  Baumgartner, Tom L., PT
  England, Heather A., PT
  Kirchner, Tracy L., PT
  Kurtz, Lynden H., PT
  Rugg, Jennifer M., PT
  Schram, Denise V., PT
  Studsrud, Heather, PT
  Tonn, Krista J., PT
  Wolden, Mitchell J., PT
- Physical/Occupational Therapist
  Baumgartner, Jessica M., OT

Prorehab Center At Edgewood Vista
4420 37 Ave S
(701) 451-9417

- Occupational Therapy
  Baumgartner, Jessica M., OT
- Physical Therapy
  Kirchner, Tracy L., PT
  Rugg, Jennifer M., PT
  Schram, Denise V., PT
  Tonn, Krista J., PT
  Wolden, Mitchell J., PT
- Physical/Occupational Therapist
  Baumgartner, Jessica M., OT

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING ANCILLARY PROVIDERS

Prorehab Center At Touchmark
1200 Harwood Dr S
(701) 451-9417

- Occupational Therapy
  Baumgartner, Jessica M., OT
- Physical Therapy
  Kirchner, Tracy L., PT
  Schram, Denise V., PT
  Tonn, Krista J., PT
  Wolden, Mitchell J., PT
- Physical/Occupational Therapist
  Baumgartner, Jessica M., OT

Prorehab Center At Trollwood Village
3105 N Bdwy Ste 7
(701) 235-4456

- Physical Therapy
  Rugg, Jennifer M., PT
  Schram, Denise V., PT
  Tonn, Krista J., PT
  Wolden, Mitchell J., PT

PT OT Partners PC
2829 University Dr S
Ste 2
(701) 478-7868

- Home Medical Equipment
  PT OT Partners PC
- Occupational Therapy
  Redinger, Deron L., OT
- Physical Therapy
  Crockett, Jodi, PT
  Kroke, Mike C., PT
- Physical/Occupational Therapist
  Redinger, Deron L., OT

Red River Pediatric Therapy
6681 56th Ave S
(701) 361-9622

- Occupational Therapy
  Meissner, Anna L., OT

Red River Women's Clinic
512 1st Ave N
(701) 298-9999

- Nurse Practitioner
  Alberty, Sandra K., CNP

Rehab Authority
3170 43rd St South
Ste 101
(701) 277-8448

- Physical Therapy
  Burcham, Tyler, PT
  Hayes, Kirk J., PT
  Johnson, Eldon A., PT
  Kraemer, Christopher C., PT
  Kraemer, Jennifer N., PT
  Peterson, Kristopher W., PT

Rehab Authority
1100 19th Ave N Ste K
(701) 235-1400

- Physical Therapy
  Burcham, Tyler, PT
  Kraemer, Jennifer N., PT
  Peterson, Kristopher W., PT

Rosewood On Broadway
1351 Broadway
(701) 277-7999

- Occupational Therapy
  Kessel, Tracy R., OT

Sanford 1717 Medical Building
1717 S University Drive
(701) 234-2000

- Certified Diabetic Educator
  Haugen, Andrea J., CDE
- Licensed Professional Clinical Counselor
  Woodbury, Kara B., LPCC
- Licensed Registered Dietitian
  Goetz, Jennifer S., LRD
  Haugen, Andrea J., LRD
  Herrick, Kelsey R., LRD
  Krueger, Maren A., LRD
  Moe, Barbara J., LRD
  Olson, Katherine S., LRD
  Tehven, Kathy J., LRD
  Williams, Michelle D., LRD
- Nurse Practitioner
  Groth, Bonnie L., FNP
- Physician Assistant
  Aamold, Robyn, PA
  Welle, Erin, PA
- Psychiatric Nurse
  Roerig, Deborah B., CNS

Sanford 1717 Medical Building (cont.)

- Psychology
  Kadlec, Kelly E., EDD
  Lahaise, Kim T., PHD
  Myers, Tricia C., PHD
  Swan-Kremeier, Lorraine, PHD

Sanford 1717 Medical Building
1717 South University Dr
(701) 234-2000

- Certified Diabetic Educator
  Haugen, Andrea J., CDE
- Licensed Professional Clinical Counselor
  Woodbury, Kara B., LPCC
- Licensed Registered Dietitian
  Goetz, Jennifer S., LRD
  Hass, Naomi, LRD
  Haugen, Andrea J., LRD
  Herrick, Kelsey R., LRD
  Krueger, Maren A., LRD
  Moe, Barbara J., LRD
  Nagel, Joan L., LRD
  Olson, Katherine S., LRD
  Srnsky, Brianna, LRD
  Tehven, Kathy J., LRD
  Williams, Michelle D., LRD
- Nurse Practitioner
  Groth, Bonnie L., FNP
- Physician Assistant
  Aamold, Robyn, PA
  Welle, Erin, PA
- Psychiatric Nurse
  Roerig, Deborah B., CNS
- Psychology
  Kadlec, Kelly E., EDD
  Lahaise, Kim T., PHD
  Myers, Tricia C., PHD
  Swan-Kremeier, Lorraine, PHD

Sanford 2801 Medical Building
2801 University Dr S
(701) 234-5673

- Clinical Nurse Specialist
  Wages, Leann A., CNS
- Nurse Practitioner
  Saarinen, Heidi, FNP
- Physician Assistant
  Garvey, Catherine M., PA
  Pratt, Amanda, PA

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING ANCILLARY PROVIDERS

Sanford 2801 Medical Building (cont.)

- Physician Assistant (continued)
  Saunders, Mary C., PA

Sanford 2801 Medical Building
2801 University Dr S
(701) 234-5673

- Clinical Nurse Specialist
  Wages, Leann A., CNS
- Nurse Practitioner
  Saarinen, Heidi, FNP
- Physician Assistant
  Garvey, Catherine M., PA
  Pratt, Amanda, PA
  Saunders, Mary C., PA

Sanford Broadway Clinic
801 Broadway North
(701) 234-2000

- Audiology
  Berg, Michael A., MS
  Olson, Ardell E., MS
  Qvammen, Brian D., MS
- Certified Diabetic Educator
  Bosch, Ryan T., CDE
  Haugen, Andrea J., CDE
  Homuth, Angela B., CDE
- Certified Registered Nurse Anesthetist
  Abrahamson, Nicole, CRNA
  Adams, Julie A., CRNA
  Balvitsch, Deanna M., CRNA
  Baumeister, Ann M., CRNA
  Bjornstad, Mark, CRNA
  Blaze, Jodee, CRNA
  Boe, Julie, CRNA
  Busker, Katie, CRNA
  Carr, Michael, CRNA
  Coulter, Casie, CRNA
  Currie, Michael, CRNA
  Dallman, Megan, CRNA
  Diederick, Lee, CRNA
  Diehl, Margaret, CRNA
  Errett, Bruce I., CRNA
  Fines, Michelle L., CRNA
  Flom, Adrianne, CRNA
  Greene, Susan G., CRNA
  Gross, Brenda M., CRNA
  Hilscher Decker, Tara, CRNA
  Hoganson, Tammy, CRNA

Sanford Broadway Clinic (cont.)

- Certified Registered Nurse Anesthetist (continued)
  Holman, Amy, CRNA
  Holte, Ralph, CRNA
  Holzer, Tonya, CRNA
  Huber, Jason P., CRNA
  Kleven, Lori K., CRNA
  Kostecki, Karen, CRNA
  Kreklau, Joseph, CRNA
  Krupich, Mary E., CRNA
  Lee, Carol M., CRNA
  Lemnus-Elias, Dana, CRNA
  Marsh, Todd M., CRNA
  Mathiason, Kurt, CRNA
  Mattern, Travis J., CRNA
  McNeally, Shawn L., CRNA
  Meier, Raymond S., CRNA
  Moser, Kent, CRNA
  Mund, Steven, CRNA
  Nygaard, Lynette, CRNA
  Rasmussen, Tami O., CRNA
  Reuter, Patric, CRNA
  Schauer, Summer, CRNA
  Schreiber, Charlene, CRNA
  Selch, Lenae, CRNA
  Senn, Laurie, CRNA
  Smogard, Wayne, CRNA
  Stahl, Heidi, CRNA
  Stenehjem, Jenny A., CRNA
  Stevenson, James, CRNA
  Tapia-Zegarra, Janet, CRNA
  Torpen, S Michelle, CRNA
  Triepke, Sheri, CRNA
  Underdahl, Todd, CRNA
  Vaagen, Roger, CRNA
  Vanmatre, Melissa, CRNA
  Vincent, Matthew, CRNA
  Watson, Erik, CRNA
  Wentz, Nina, CRNA
  Wick, Twyla, CRNA
  Zarling, Anne C., CRNA
  Zarling, Jeffrey W., CRNA
- Clinical Nurse Specialist
  Waagen, Gail L., CNS
- Licensed Registered Dietitian
  Anderson, Paula A., LRD
  Brakke, Kayla, LRD
  Breedon, Catherine H., LRD
  Goetz, Jennifer S., LRD

Sanford Broadway Clinic (cont.)

- Licensed Registered Dietitian (continued)
  Haugen, Andrea J., LRD
  Helleen, Jennifer L., LRD
  Hoff, Nancy L., LRD
  Kadrmas, Lisa M., LRD
  Kruger, Darlene, LRD
  Liebl, Kristen M., LRD
  Moe, Barbara J., LRD
  Noreen, Laura J., LRD
  Olson, Katherine S., LRD
  Sickels, Robin J., LRD
  Srnsky, Brianna, LRD
  Welsch, Nicole M., LRD
  Williams, Michelle D., LRD
- Nurse Practitioner
  Baugh, Miranda L., FNP
  Bellas, Jennifer D., CNP
  Borgeson, Debra S., CNP
  Cox, Candice, CNP
  Fossum, Tricia M., CNP
  Groth, Bonnie L., FNP
  Haug, Kimberly, CNP
  Hockett, Stephaine L., FNP
  Hoover, Casey M., FNP
  Johnson, Julie, CNP
  Krueger, Stacy, FNP
  Nilles, Stephanie, CNP
  Peterson, Andrea, FNP
  Seung, Chantee, FNP
  Smith, Jennifer, CNP
  Ulmer, Tosha F., CNP
  Welch, Molly, FNP
  Wojcik, Susan E., CNP
- Physical Therapy
  Peterson, Kristopher W., PT
- Physician Assistant
  Aamold, Robyn, PA
  Becker, Alison, PA
  Evanson, Candyce K., PA
  Flom, Beau S., PA
  Gigstad-Stave, Doreen J., PA
  Hardmeyer, Gabriel, PA
  Harry, Eric, PA
  Hennessy, Jill M., PA
  Ihle, Lorna J., PA
  Lammle, William G., PA
  Lien, Morgan, PA
  Lizakowski, Jason, PA

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING ANCILLARY PROVIDERS

Sanford Broadway Clinic (cont.)

- Physician Assistant (continued)
  McDonald, Sean D., PA
  Murphy, Matthew C., PA
  Smith, Cynthia A., PA
  Welle, Erin, PA
- Psychology
  Christianson, Kenneth E., PHD

Sanford Broadway Clinic
801 Broadway North
(701) 234-2000

- Audiology
  Berg, Michael A., MS
  Bolda, Megan E., AUD
  Olson, Ardell E., MS
  Qvammen, Brian D., MS
- Certified Diabetic Educator
  Bosch, Ryan T., CDE
  Cavalier, Susan K., CDE
  Haugen, Andrea J., CDE
  Homuth, Angela B., CDE
  Klocke, Janet D., CDE
  Skolness, Vanessa, CDE
- Certified Registered Nurse Anesthetist
  Abrahamson, Nicole, CRNA
  Adams, Julie A., CRNA
  Balvitsch, Deanna M., CRNA
  Baumeister, Ann M., CRNA
  Bialas, Jedd, CRNA
  Bjornstad, Mark, CRNA
  Blaze, Jodee, CRNA
  Boe, Julie, CRNA
  Busker, Katie, CRNA
  Carr, Michael, CRNA
  Chathams, Cody, CRNA
  Coulter, Casie, CRNA
  Cross, Jennifer, CRNA
  Currie, Michael, CRNA
  Dallman, Megan, CRNA
  Devaney, Stephen, CRNA
  Diederick, Lee, CRNA
  Diehl, Margaret, CRNA
  Errett, Bruce I., CRNA
  Fines, Michelle L., CRNA
  Flom, Adrianne, CRNA
  Greene, Susan G., CRNA
  Gross, Brenda M., CRNA
  Herbrandson, Jeremy, CRNA
  Hilscher Decker, Tara, CRNA

Sanford Broadway Clinic (cont.)

- Certified Registered Nurse Anesthetist (continued)
  Hoganson, Tammy, CRNA
  Holman, Amy, CRNA
  Holte, Ralph, CRNA
  Holzer, Tonya, CRNA
  Huber, Jason P., CRNA
  Johnson, Leif, CRNA
  Kleven, Lori K., CRNA
  Kostecki, Karen, CRNA
  Kreklau, Joseph, CRNA
  Krupich, Mary E., CRNA
  Lauer, Leanna, CRNA
  Lee, Carol M., CRNA
  Lemnus-Elias, Dana, CRNA
  Marsh, Todd M., CRNA
  Mathiason, Kurt, CRNA
  Mattern, Travis J., CRNA
  McNeally, Shawn L., CRNA
  Meier, Raymond S., CRNA
  Moser, Kent, CRNA
  Mund, Steven, CRNA
  Nygaard, Lynette, CRNA
  Rasmussen, Tami O., CRNA
  Reuter, Patric, CRNA
  Schauer, Summer, CRNA
  Schreiber, Charlene, CRNA
  Selch, Lenae, CRNA
  Senn, Laurie, CRNA
  Smogard, Wayne, CRNA
  Son, Irina, CRNA
  Stahl, Heidi, CRNA
  Stenehjem, Jenny A., CRNA
  Stevenson, James, CRNA
  Szczepanski, Amber L., CRNA
  Tapia-Zegarra, Janet, CRNA
  Torpen, S Michelle, CRNA
  Triepke, Sheri, CRNA
  Underdahl, Todd, CRNA
  Vaagen, Roger, CRNA
  Vanmatre, Melissa, CRNA
  Vincent, Matthew, CRNA
  Watson, Erik, CRNA
  Wentz, Nina, CRNA
  Wick, Twyla, CRNA
  Woitzel, Ashley, CRNA
  Zarling, Anne C., CRNA
  Zarling, Jeffrey W., CRNA

Sanford Broadway Clinic (cont.)

- Clinical Nurse Specialist
  Ashmore, Beth R., CNS
  Waagen, Gail L., CNS
- Licensed Registered Dietitian
  Anderson, Paula A., LRD
  Brakke, Kayla, LRD
  Breedon, Catherine H., LRD
  Goetz, Jennifer S., LRD
  Hass, Naomi, LRD
  Haugen, Andrea J., LRD
  Helleen, Jennifer L., LRD
  Hoff, Nancy L., LRD
  Kadrmas, Lisa M., LRD
  Krueger, Maren A., LRD
  Kruger, Darlene, LRD
  Liebl, Kristen M., LRD
  Meyer, Elizabeth Ann G., LRD
  Moe, Barbara J., LRD
  Nagel, Joan L., LRD
  Noreen, Laura J., LRD
  Olson, Katherine S., LRD
  Sickels, Robin J., LRD
  Srnsky, Brianna, LRD
  Welsch, Nicole M., LRD
  Williams, Michelle D., LRD
- Nurse Practitioner
  Bartnick, Jamie, CNP
  Baugh, Miranda L., FNP
  Beiseker, Andrea M., FNP
  Bellas, Jennifer D., CNP
  Blanchard, Janet A., CNP
  Borgeson, Debra S., CNP
  Cooley, Michelle, CNP
  Cox, Candice, CNP
  Dowsley, Kari, CNP
  Feragen, Shantelle, CNP
  Fossum, Tricia M., CNP
  Groth, Bonnie L., FNP
  Haug, Kimberly, CNP
  Hochstein, Leah, CNP
  Hockett, Stephaine L., FNP
  Hoover, Casey M., FNP
  Johnson, Julie, CNP
  Krueger, Stacy, FNP
  Loiland, Julie, CNP
  Nilles, Stephanie, CNP
  Noonan, Melanie, CNP
  Ouradnik, Heather, CNP
  Peterson, Andrea, FNP

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING ANCILLARY PROVIDERS

Sanford Broadway Clinic (cont.)
- Nurse Practitioner (continued)
  Rossland, Alexis, CNP
  Seung, Chantee, FNP
  Sjoquist, Nina C., CNP
  Smith, Jennifer, CNP
  Ulmer, Tosha F., CNP
  Welch, Molly, FNP
  Wojcik, Susan E., CNP
- Physician Assistant
  Aamold, Robyn, PA
  Becker, Alison, PA
  Evanson, Candyce K., PA
  Flom, Beau S., PA
  Francis, Lora, PA
  Gigstad-Stave, Doreen J., PA
  Hardmeyer, Gabriel, PA
  Harry, Eric, PA
  Hennessy, Jill M., PA
  Ihle, Lorna J., PA
  Lammle, William G., PA
  Lien, Morgan, PA
  Lizakowski, Jason, PA
  McDonald, Sean D., PA
  Meyer, Shane, PA
  Murphy, Matthew C., PA
  Smith, Cynthia A., PA
  Welle, Erin, PA
- Psychology
  Biebl, Sara, PHD
  Brower Breitwieser, Carrie, PHD
  Christianson, Kenneth E., PHD
  Hines, Lindsay, PHD

Sanford Broadway Medical Building
736 Broadway N
(701) 234-2000
- Physician Assistant
  Evanson, Candyce K., PA
  Hennessy, Jill M., PA
  Lizakowski, Jason, PA

Sanford Childrens Southwest Clinic
2701 13th Ave S
(701) 234-3600
- Independent Laboratory
  Sanford Children's Southwest Clinic Lab
- Nurse Practitioner
  Osowski, Elizabeth, CNP

North Dakota (cont.)
Fargo (cont.)

Sanford Childrens Southwest Clinic
2701 13th Ave S
(701) 234-3600
- Nurse Practitioner
  Osowski, Elizabeth, CNP
- Psychology
  Biebl, Sara, PHD

Sanford Dermatology & Laser Clinic
4656 40th Ave S
(701) 234-8860
- Nurse Practitioner
  Schue, Richard M., CNP
- Physician Assistant
  Hegge, Erin C., PA
  Reese, Judith, PA

Sanford Dermatology & Laser Clinic
4656 40th Ave S
(701) 234-8860
- Nurse Practitioner
  Schue, Richard M., CNP
- Physician Assistant
  Hegge, Erin C., PA
  Reese, Judith, PA

Sanford Health Edgewood Vista Clinic
4420 37 Ave S
(701) 365-4746
- Nurse Practitioner
  Montplaisir, Pamela J., FNP
- Physician Assistant
  Carr, Kristen, PA

Sanford Health Edgewood Vista Clinic
4420 37 Ave S
(701) 365-4746
- Nurse Practitioner
  Hoffmann, Jennifer, FNP

Sanford Health Occupational Medicine Clinic
3838 12th Ave N
(701) 234-4700
- Nurse Practitioner
  Granlund, Terry, CNP
- Physical Therapy
  Burd, Ann, PT
  Frappier, Chantel M., PT
  Layfield, Katie M., PT

North Dakota (cont.)
Fargo (cont.)

Sanford Health Occupational Medicine Clinic (cont.)
- Physical Therapy (continued)
  Sandsmark, Suzanne R., PT
- Physician Assistant
  McGregor, Michael J., PA

Sanford Health Occupational Medicine Clinic
3838 12th Ave N
(701) 234-4700
- Nurse Practitioner
  Granlund, Terry, CNP
- Physical Therapy
  Bennington, Heather R., PT

Sanford Healthcare Accessories Fargo
3223 32nd Ave S
(701) 293-8211
- Home Infusion
  Sanford Healthcare Accessories Fargo
- Home Medical Equipment
  Sanford Healthcare Accessories Fargo

Sanford Healthcare Accessories LLC
2801 S University
(701) 234-8411
- Home Medical Equipment
  Sanford Healthcare Accessories LLC

Sanford Medical Center Fargo
801 Broadway North
(701) 234-2000
- Home Medical Equipment
  Sanford Medical Center Fargo/DME

Sanford Neuroscience Clinic
700 1st Ave S
(701) 234-4036
- Neurological Surgery
  Potter, Matthew, PA
- Nurse Practitioner
  Hager, Molissa, FNP
  Koltes, Leslie, FNP
  Matcha, Sarah, FNP
- Physician Assistant
  Bjorklund, Gregory T., PA

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING ANCILLARY PROVIDERS

Sanford Neuroscience Clinic (cont.)

- Physician Assistant (continued)
  Falck, Susan K., PA
  Keshavarz, Tahereh, PA
  Sieg, Daryl A., PA
  Spaeth, James B., PA
  Wagner, Angela, PA
- Psychology
  Bergloff, Paula J., PHD
  Hines, Lindsay, PHD
  Wood, Susan M., PHD

Sanford Neuroscience Clinic
700 1st Ave S
(701) 234-4036

- Licensed Professional Clinical Counselor
  Dokken, Julie, LPCC
- Neurological Surgery
  Potter, Matthew, PA
- Nurse Practitioner
  Hager, Molissa, FNP
  Heinle, Sarah, CNP
  Koltes, Leslie, FNP
  Matcha, Sarah, FNP
- Physician Assistant
  Baldwin, Gretchen, PA
  Bjorklund, Gregory T., PA
  Breding, Joanna, PA
  Falck, Susan K., PA
  Keshavarz, Tahereh, PA
  Sieg, Daryl A., PA
  Spaeth, James B., PA
  Wagner, Angela, PA
- Psychology
  Bergloff, Paula J., PHD
  Hines, Lindsay, PHD
  Porter, Scott, PHD
  Wood, Susan M., PHD

Sanford North Fargo Clinic
2601 N Broadway
(701) 234-2900

- Independent Laboratory
  Sanford North Fargo Clinic Lab
- Nurse Practitioner
  Kringlie, Jennifer L., CNP
- Physician Assistant
  Branca, Autumn, PA
  Peterson, Terry A., PA

North Dakota (cont.)
Fargo (cont.)

Sanford North Fargo Clinic
2601 Broadway N
(701) 234-2900

- Nurse Practitioner
  Fossum, Tricia M., CNP
  Kringlie, Jennifer L., CNP
- Physician Assistant
  Branca, Autumn, PA
  Peterson, Terry A., PA
- Psychology
  Hysjulien, Cheryl, PSYD

Sanford Orthopedics Sports Medicine
2301 25th St S Ste A
(701) 237-9712

- Physician Assistant
  Brown, Amanda, PA
  Crabill, James R., PA
  Diers, Shara J., PA
  Hellman, Jason, PA
  McGregor, Michael J., PA
  Meier, Nicole, PA
  Stavenger, Christopher, PA
  Stompro, Gregory P., PA
  Voth, Joshua, PA

Sanford Orthopedics Sports Medicine
2301 S 25th St Ste A
(701) 237-9712

- Physician Assistant
  Brown, Amanda, PA
  Crabill, James R., PA
  Diers, Shara J., PA
  Harry, Eric, PA
  Hellman, Jason, PA
  Johnson, Kami, PA
  McGregor, Michael J., PA
  Meier, Nicole, PA
  Noteboom, Kurt, PA
  Reinholz, Teresa, PA
  Stavenger, Christopher, PA
  Stompro, Gregory P., PA
  Voth, Joshua, PA

Sanford Pharmacy Broadway
737 Broadway N
(701) 234-2416

- Home Infusion
  Sanford Pharmacy Broadway

North Dakota (cont.)
Fargo (cont.)

Sanford Pharmacy Broadway (cont.)

- Home Medical Equipment
  Sanford Pharmacy Broadway

Sanford Pharmacy Mills Avenue
801 Broadway North
(701) 234-2398

- Home Medical Equipment
  Sanford Pharmacy Mills Avenue

Sanford Professional Building
100 4th St S
(701) 234-3100

- Licensed Professional Clinical Counselor
  Christianson, Alice, LPCC
  Heim, Kathy J., LPCC
  Woodbury, Kara B., LPCC
- Licensed Registered Dietitian
  Meyer, Elizabeth Ann G., LRD
- Nurse Practitioner
  Cushing, Anne G., CNP
- Psychiatric Nurse
  Cameron, Kathryn M., CNS
  Johnson, Lucy M., CNS
  Roerig, Deborah B., CNS
- Psychology
  Anady, Kara, PSYD
  Corneliussen, Stephanie, PSYD
  Kadlec, Kelly E., EDD
  Lahaise, Kim T., PHD
  Moser, Richard J., PHD
  Myers, Tricia C., PHD
  Preussler, Rebecca S., PSYD
  Revland, Paul, PHD
  Stone, Kenneth J., PSYD
  Sturgill, Danial, PHD
  Swan-Kremeier, Lorraine, PHD
  Tupa, David J., PHD
  Ulven, Jon, PHD
  Wenstrom, Timothy A., PSYD
  Wonderlich, Stephen A., PHD

Sanford Professional Building
100 4th St S
(701) 234-3100

- Licensed Professional Clinical Counselor
  Christianson, Alice, LPCC
  Heim, Kathy J., LPCC
  Woodbury, Kara B., LPCC

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING ANCILLARY PROVIDERS

Sanford Professional Building (cont.)

- Licensed Registered Dietitian
  Meyer, Elizabeth Ann G., LRD
- Nurse Practitioner
  Cushing, Anne G., CNP
  Peterson, Lindsey, CNP
- Psychiatric Nurse
  Cameron, Kathryn M., CNS
  Johnson, Lucy M., CNS
  Roerig, Deborah B., CNS
- Psychology
  Anady, Kara, PSYD
  Biebl, Sara, PHD
  Brower Breitwieser, Carrie, PHD
  Corneliussen, Stephanie, PSYD
  Hysjulien, Cheryl, PSYD
  Kadlec, Kelly E., EDD
  Lahaise, Kim T., PHD
  Maley, Robyn, PSYD
  Moser, Richard J., PHD
  Myers, Tricia C., PHD
  Preussler, Rebecca S., PSYD
  Revland, Paul, PHD
  Stone, Kenneth J., PSYD
  Sturgill, Danial, PHD
  Swan-Kremeier, Lorraine, PHD
  Tupa, David J., PHD
  Ulven, Jon, PHD
  Wenstrom, Timothy A., PSYD
  Wonderlich, Stephen A., PHD

Sanford Reproductive Medicine Clinic
1111 Harwood Dr
(701) 234-2700

- Certified Registered Nurse Anesthetist
  Gross, Brenda M., CRNA
- Nurse Practitioner
  Lee, Erin, FNP

Sanford Reproductive Medicine Clinic
1111 Harwood Dr
(701) 234-2700

- Certified Registered Nurse Anesthetist
  Gross, Brenda M., CRNA
- Nurse Practitioner
  Lee, Erin, FNP

Sanford Roger Maris Cancer Center
820 4th St N
(701) 234-6161

- Licensed Registered Dietitian
  Barts, Sarah, LRD
  Helleen, Jennifer L., LRD
- Nurse Practitioner
  Hofland, Susan K., CNP
  Kozojed, Mia, FNP
  Suder, Jana, CNP
  Swenson, Leah K., CNP
  Wolf, Lorelei A., CNP
- Physician Assistant
  Kirkeby, Kathy A., PA
  Welle, Erin, PA

Sanford Roger Maris Cancer Center
820 4th St N
(701) 234-6161

- Licensed Registered Dietitian
  Barts, Sarah, LRD
  Helleen, Jennifer L., LRD
- Nurse Practitioner
  Hofland, Susan K., CNP
  Kozojed, Mia, FNP
  Kreis, Rebecca, CNP
  Suder, Jana, CNP
  Swenson, Leah K., CNP
  Wolf, Lorelei A., CNP
- Physician Assistant
  Kirkeby, Kathy A., PA
  Welle, Erin, PA

Sanford South University
1720 University Dr S
(701) 234-2000

- Certified Diabetic Educator
  Bosch, Ryan T., CDE
- Certified Registered Nurse Anesthetist
  Abrahamson, Nicole, CRNA
  Adams, Julie A., CRNA
  Balvitsch, Deanna M., CRNA
  Baumeister, Ann M., CRNA
  Bjornstad, Mark, CRNA
  Blaze, Jodee, CRNA
  Boe, Julie, CRNA
  Cannon, Sharon R., CRNA
  Carr, Michael, CRNA

Sanford South University (cont.)

- Certified Registered Nurse Anesthetist (continued)
  Coulter, Casie, CRNA
  Currie, Michael, CRNA
  Dallman, Megan, CRNA
  Diederick, Lee, CRNA
  Diehl, Margaret, CRNA
  Errett, Bruce I., CRNA
  Fines, Michelle L., CRNA
  Flom, Adrianne, CRNA
  Greene, Susan G., CRNA
  Gross, Brenda M., CRNA
  Hilscher Decker, Tara, CRNA
  Hoganson, Tammy, CRNA
  Holman, Amy, CRNA
  Holte, Ralph, CRNA
  Holzer, Tonya, CRNA
  Huber, Jason P., CRNA
  Kleven, Lori K., CRNA
  Kostecki, Karen, CRNA
  Krupich, Mary E., CRNA
  Lee, Carol M., CRNA
  Marsh, Todd M., CRNA
  Mathiason, Kurt, CRNA
  Mattern, Travis J., CRNA
  McNeally, Shawn L., CRNA
  Meier, Raymond S., CRNA
  Moser, Kent, CRNA
  Mund, Steven, CRNA
  Nygaard, Lynette, CRNA
  Rasmussen, Tami O., CRNA
  Reuter, Patric, CRNA
  Schauer, Summer, CRNA
  Schreiber, Charlene, CRNA
  Selch, Lenae, CRNA
  Senn, Laurie, CRNA
  Smogard, Wayne, CRNA
  Stahl, Heidi, CRNA
  Stenehjem, Jenny A., CRNA
  Stevenson, James, CRNA
  Tapia-Zegarra, Janet, CRNA
  Torpen, S Michelle, CRNA
  Triepke, Sheri, CRNA
  Underdahl, Todd, CRNA
  Vaagen, Roger, CRNA
  Vanmatre, Melissa, CRNA
  Vincent, Matthew, CRNA
  Watson, Erik, CRNA
  Zarling, Jeffrey W., CRNA

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING ANCILLARY PROVIDERS

Sanford South University (cont.)

- Independent Laboratory
  Sanford South University Campus/Lab
- Licensed Addiction Counselor-Chemical Dependency
  Christianson, Alice, LAC
- Licensed Professional Clinical Counselor
  Dokken, Julie, LPCC
  Groslie, Dawn L., LPCC
- Licensed Registered Dietitian
  Wichman, Robin A., LRD
- Nurse Practitioner
  Breidenbach, Terry, FNP
  Hestbeck, Amy, CNP
  Kary, Shelby, FNP
  Kringlie, Jennifer L., CNP
  Swenson, Leah K., CNP
  Ulmer, Tosha F., CNP
- Physician Assistant
  Branca, Autumn, PA
  Brekken, Marie L., PA
  Reinholz, Teresa, PA
- Psychiatric Nurse
  Cameron, Kathryn M., CNS
  Johnson, Lucy M., CNS
- Psychology
  Bauste, Larry G., PHD
  Revland, Paul, PHD

Sanford South University
1720 University Dr S
(701) 234-2000

- Certified Diabetic Educator
  Bosch, Ryan T., CDE
- Certified Registered Nurse Anesthetist
  Abrahamson, Nicole, CRNA
  Adams, Julie A., CRNA
  Balvitsch, Deanna M., CRNA
  Baumeister, Ann M., CRNA
  Bialas, Jedd, CRNA
  Bjornstad, Mark, CRNA
  Blaze, Jodee, CRNA
  Boe, Julie, CRNA
  Cannon, Sharon R., CRNA
  Carr, Michael, CRNA
  Chathams, Cody, CRNA
  Coulter, Casie, CRNA

Sanford South University (cont.)

- Certified Registered Nurse Anesthetist (continued)
  Cross, Jennifer, CRNA
  Currie, Michael, CRNA
  Dallman, Megan, CRNA
  Devaney, Stephen, CRNA
  Diederick, Lee, CRNA
  Diehl, Margaret, CRNA
  Errett, Bruce I., CRNA
  Fines, Michelle L., CRNA
  Flom, Adrianne, CRNA
  Greene, Susan G., CRNA
  Gross, Brenda M., CRNA
  Herbrandson, Jeremy, CRNA
  Hilscher Decker, Tara, CRNA
  Hoganson, Tammy, CRNA
  Holman, Amy, CRNA
  Holte, Ralph, CRNA
  Holzer, Tonya, CRNA
  Huber, Jason P., CRNA
  Johnson, Leif, CRNA
  Kleven, Lori K., CRNA
  Kostecki, Karen, CRNA
  Krupich, Mary E., CRNA
  Lauer, Leanna, CRNA
  Lee, Carol M., CRNA
  Lemnus-Elias, Dana, CRNA
  Marsh, Todd M., CRNA
  Mathiason, Kurt, CRNA
  Mattern, Travis J., CRNA
  McNeally, Shawn L., CRNA
  Meier, Raymond S., CRNA
  Moser, Kent, CRNA
  Mund, Steven, CRNA
  Nygaard, Lynette, CRNA
  Rasmussen, Tami O., CRNA
  Reuter, Patric, CRNA
  Schauer, Summer, CRNA
  Schreiber, Charlene, CRNA
  Selch, Lenae, CRNA
  Senn, Laurie, CRNA
  Smogard, Wayne, CRNA
  Son, Irina, CRNA
  Stahl, Heidi, CRNA
  Stenehjem, Jenny A., CRNA
  Stevenson, James, CRNA
  Szczepanski, Amber L., CRNA
  Tapia-Zegarra, Janet, CRNA
  Torpen, S Michelle, CRNA

Sanford South University (cont.)

- Certified Registered Nurse Anesthetist (continued)
  Triepke, Sheri, CRNA
  Underdahl, Todd, CRNA
  Vaagen, Roger, CRNA
  Vanmatre, Melissa, CRNA
  Vincent, Matthew, CRNA
  Watson, Erik, CRNA
  Wick, Twyla, CRNA
  Woitzel, Ashley, CRNA
  Zarling, Jeffrey W., CRNA
- Licensed Addiction Counselor-Chemical Dependency
  Christianson, Alice, LAC
- Licensed Professional Clinical Counselor
  Dokken, Julie, LPCC
  Groslie, Dawn L., LPCC
  Heim, Kathy J., LPCC
  Woodbury, Kara B., LPCC
- Licensed Registered Dietitian
  Hass, Naomi, LRD
  Kittelson, Brad W., LRD
  Wichman, Robin A., LRD
- Nurse Practitioner
  Blickensderfer, Rhonda K., CNP
  Breidenbach, Terry, FNP
  Crawford, Melissa A., FNP
  Hestbeck, Amy, CNP
  Kary, Shelby, FNP
  Kringlie, Jennifer L., CNP
  Pfennig, Gregory, FNP
  Swenson, Leah K., CNP
  Ulmer, Tosha F., CNP
- Physician Assistant
  Branca, Autumn, PA
  Brekken, Marie L., PA
  Clarke, Paula K., PA
  Jones, Corwin A., PA
  Kauffman, Russell A., PA
  Reinholz, Teresa, PA
- Psychiatric Nurse
  Cameron, Kathryn M., CNS
  Johnson, Lucy M., CNS
  Moraghan, Kathleen, CNS
- Psychology
  Bauste, Larry G., PHD
  Revland, Paul, PHD

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING ANCILLARY PROVIDERS

Sanford Southpointe Clinic
2400 32nd Ave S
(701) 234-8800

- Certified Diabetic Educator
  Bosch, Ryan T., CDE
  Klocke, Janet D., CDE
  Levitt, Helen S., CDE
- Independent Laboratory
  Sanford Southpointe Clinic Lab
- Licensed Professional Clinical Counselor
  Christianson, Alice, LPCC
  Woodbury, Kara B., LPCC
- Licensed Registered Dietitian
  Herrick, Kelsey R., LRD
  Kadrmas, Lisa M., LRD
  Krueger, Maren A., LRD
  Olson, Katherine S., LRD
  Tehven, Kathy J., LRD
- Nurse Practitioner
  Brekke, Brooke, CNP
  Hoffmann, Jennifer, FNP
  Kringlie, Jennifer L., CNP
  Lundeen, Tina M., CNP
  Mears, Julie, CNP
  Montplaisir, Pamela J., FNP
  Skatvold, Linda K., CNP
  Teske, Victoria R., CNP
  Turman, Ranelle I., CNP
- Physician Assistant
  Brandt, Christine, PA
  Brown, Amanda, PA
  Carr, Kristen, PA
  Christensen, Melissa, PA
  Fisher, Jennifer, PA
  Hellman, Jason, PA
  Jones, Corwin A., PA
  Kringlie, Cassandra, PA
  Meier, Nicole, PA
  Stegmiller, Dana L., PA
  Stompro, Gregory P., PA
  Tesch, Yan, PA
- Psychology
  Christianson, Kenneth E., PHD
  Ulven, Jon, PHD

North Dakota (cont.)
Fargo (cont.)

Sanford Southpointe Clinic
2400 32nd Ave S
(701) 234-8800

- Certified Diabetic Educator
  Bosch, Ryan T., CDE
  Cavalier, Susan K., CDE
  Essary, Shirley A., CDE
  Klocke, Janet D., CDE
  Levitt, Helen S., CDE
  Schaan, Peggy, CDE
- Licensed Professional Clinical Counselor
  Christianson, Alice, LPCC
  Woodbury, Kara B., LPCC
- Licensed Registered Dietitian
  Bartholomay, Linda, LRD
  Goetz, Jennifer S., LRD
  Hass, Naomi, LRD
  Haugen, Andrea J., LRD
  Herrick, Kelsey R., LRD
  Kadrmas, Lisa M., LRD
  Krueger, Maren A., LRD
  Meyer, Elizabeth Ann G., LRD
  Moe, Barbara J., LRD
  Nagel, Joan L., LRD
  Olson, Katherine S., LRD
  Tehven, Kathy J., LRD
  Williams, Michelle D., LRD
- Nurse Practitioner
  Brekke, Brooke, CNP
  Carlson, Kari, CNP
  Cross, Cheri, CNP
  Hoban, Alissa, CNP
  Hoffmann, Jennifer, FNP
  Koenig, Cynthia J., CNP
  Kringlie, Jennifer L., CNP
  Lundeen, Tina M., CNP
  Mears, Julie, CNP
  Montplaisir, Pamela J., FNP
  Skatvold, Linda K., CNP
  Teske, Victoria R., CNP
  Turman, Ranelle I., CNP
- Physician Assistant
  Branca, Autumn, PA
  Brandt, Christine, PA
  Brown, Amanda, PA
  Carr, Kristen, PA
  Christensen, Melissa, PA
  Fisher, Jennifer, PA
  Hellman, Jason, PA

North Dakota (cont.)
Fargo (cont.)

Sanford Southpointe Clinic (cont.)

- Physician Assistant (continued)
  Jones, Corwin A., PA
  Kringlie, Cassandra, PA
  McGregor, Michael J., PA
  Meier, Nicole, PA
  Stegmiller, Dana L., PA
  Stompro, Gregory P., PA
  Tesch, Yan, PA
- Psychology
  Christianson, Kenneth E., PHD
  Ulven, Jon, PHD
  Zielke, Desiree, PHD

Sharehouse - Genesis
505 40th St S Ste B
(701) 478-8440

- Licensed Addiction Counselor-Chemical Dependency
  Cameron, Lisa, LAC
  Collins, David C., LAC
  Hoff, Miracle R., LAC
  Maynard, Joshua J., LAC
  Shirkey, Amie M., LAC
  Stinson, Roberta J., LAC
  Symons, James E., LAC
  Traen, Jeremy M., LAC
  Westall, Wanda L., LAC
  Winters, Patricia L., LAC
  Witteman, Anne K., LAC

Sharehouse Sisters Path
4219 9th Avenue SW
(701) 478-6562

- Nurse Practitioner
  Beare, Jeanne C., CNP

Sharehouse Transitions
505 40th St S Suite B
(701) 478-8440

- Licensed Addiction Counselor-Chemical Dependency
  Nelson, Roberta R., LAC
- Licensed Professional Clinical Counselor
  Belzer, Joy A., LPCC
- Licensed Professional Counselor/Therapist
  Nelson, Roberta R., LPCC

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING ANCILLARY PROVIDERS

Sharehouse Transitions (cont.)
- Psychology
  Hoff, Erica R., PHD

Sharehouse, Inc
4227 9th Ave SW
(701) 282-6561
- Licensed Addiction Counselor-Chemical Dependency
  Cameron, Lisa, LAC
  Collins, David C., LAC
  Hoff, Miracle R., LAC
  Maynard, Joshua J., LAC
  Nelson, Roberta R., LAC
  Shirkey, Amie M., LAC
  Stevens, Connie K., LAC
  Stinson, Roberta J., LAC
  Symons, James E., LAC
  Traen, Jeremy M., LAC
  Westall, Wanda L., LAC
  Winters, Patricia L., LAC
  Witteman, Anne K., LAC
- Licensed Professional Counselor/Therapist
  Nelson, Roberta R., LPCC
- Nurse Practitioner
  Beare, Jeanne C., CNP
- Psychology
  Hoff, Erica R., PHD

Sleep Easy Therapeutics, Inc
3003 32nd Ave S Ste 7c
(866) 921-2727
- Home Medical Equipment
  Sleepeasy Therapeutics, Inc

Southeast Human Service Center
2624 9th Ave S
(701) 298-4500
- Licensed Addiction Counselor-Chemical Dependency
  Berglund, Randi A., LAC
  Brown, Bradley T., LAC
  Christensen, James R., LAC
  Decker, Amanda R., LAC
  Erickson, Kylee R., LAC
  Fay, Julie M., LAC
  Holt, John W., LAC
  Illing, Stephen, LAC
  Kilen, Kristi, LAC

Southeast Human Service Center (cont.)
- Licensed Addiction Counselor-Chemical Dependency (continued)
  Mastel, Lisa A., LAC
  Nicoli, Sara L., LAC
  Peterson, Melody B., LAC
  Phillips, Sandra L., LAC
  Pytlik, Roberta J., LAC
  Richter, Daniel A., LAC
  Trautman, Tatum R., LAC
- Licensed Professional Clinical Counselor
  Cavett, Tarah E., LPCC
  Gjerde, Elizabeth A., LPCC
  Richter, Daniel A., LPCC
  Singh, Usha, LPCC
- Psychology
  Cross-Hillman, Nicole, PSYD
  Hein-Kolo, Nancy, PHD
  Moe, Brian K., PHD
  Quam, Sara D., PSYD
  Wegner, Krislea E., PHD
  Witte-Bakken, Jan K., PHD

Southeast Human Service Center Off Main
1122 1st Ave N
(701) 298-4650
- Licensed Addiction Counselor-Chemical Dependency
  Worner, Bruce, LAC
- Licensed Professional Clinical Counselor
  Singh, Usha, LPCC

Southpointe Pharmacy
2400 32nd Ave S
(701) 234-9912
- Home Medical Equipment
  Southpointe Pharmacy

St Sophies LLC
3201 33rd St S
(701) 365-4488
- Licensed Professional Clinical Counselor
  Hjelle, Catherine A., LPCC
- Psychology
  Schumacher, Kevin, PHD

Stellar Healthcare Ltd
827 28 St S Unit B
(701) 364-3660
- Nurse Practitioner
  Erdmann, Melissa, FNP
  Gibson, Beverly A., FNP

The Village Family Service Center
1201 25th St S
(701) 451-4900
- Licensed Professional Clinical Counselor
  Aasness, Mary K., LPCC
  Blumhardt, Rachel A., LPCC
  Fetting, Debberlee, LPCC
  Hillesheim, Nadine A., LPCC
  Jandro, Joanne M., LPCC
  Olson, Patricia J., LPCC
- Psychiatric Nurse
  Elbert, Rebecca E., CNS
- Psychology
  Juntunen, Cindy L., PHD

The Village Family Service Center
1200 Harwood Drive
(701) 451-4900
- Licensed Professional Clinical Counselor
  Blumhardt, Rachel A., LPCC

The Village Family Service Center dba First Step Recovery
409 7th St S
(701) 293-3384
- Licensed Addiction Counselor-Chemical Dependency
  Boren, Margaret E., LAC
  Erickson, Pamla J., LAC
  Knipfer, Jodee L., LAC
  Senn, Patti L., LAC
  Spooner, Kristie L., LAC
  Stenehjem-Titus, Peggy L., LAC

The Village Family Service Center dba First Step Recovery
3201 Fiechtner Drive
(701) 293-3384
- Licensed Addiction Counselor-Chemical Dependency
  Boren, Margaret E., LAC
  Clairmont Hansen, Mary, LAC

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING ANCILLARY PROVIDERS

North Dakota (cont.)
Fargo (cont.)

The Village Family Service Center dba First Step Recovery (cont.)
- Licensed Addiction Counselor-Chemical Dependency (continued)
  Erickson, Pamla J., LAC
  Knipfer, Jodee L., LAC
  Priebnow, Adam T., LAC
  Senn, Patti L., LAC
  Spooner, Kristie L., LAC
  Stenehjem-Titus, Peggy L., LAC

Thielges Therapy At Rosewood On Broadway
1351 N Broadway
(701) 277-7950
- Physical Therapy
  Joyce, Jonah D., PT
- Speech Therapy
  Kapitan, Kari J., ST

Urgent Medicine Associates, LLC
2829 S Univ Dr Ste 101
(701) 232-9000
- Nurse Practitioner
  Kjos, Janell K., FNP
  Ross, Cheryl, FNP
- Physician Assistant
  Brown, Wendy, PA
  Metzger, Jay, PA
  Swenson, Tiffany, PA

Valley Anesthesia Associates, PC
2301 S 25th St Ste K
(701) 234-1728
- Certified Registered Nurse Anesthetist
  Christensen, Tracie, CRNA
  Currier, Michelle E., CRNA
  Joachim, Kari L., CRNA
  Kurtz, Julie A., CRNA
  Pantzke, Traci L., CRNA
  Pender, Janel V., CRNA

Valley Christian Counseling Center
509 25th Ave N
(701) 232-6224
- Licensed Professional Clinical Counselor
  Watnemo, Larry J., LPCC
- Psychiatric Nurse
  Zaeske, Ellen L., CNS

North Dakota (cont.)
Fargo (cont.)

Valley Christian Counseling Center (cont.)
- Psychology
  Rottman, Lori S., PHD

Valley Medical Clinic, PC
300 Main Ave Suite 200
(701) 297-0817
- Physical Therapy
  Hall, Jeanne M., PT

Vosburg Counseling
2913 12th St S
(701) 235-2092
- Licensed Professional Clinical Counselor
  Vosburg, Doreen M., LPCC

Wegner Psychological and Therapeutic Services
3220 S 18th Street Ste 6
(701) 361-0433
- Psychology
  Quam, Sara D., PSYD
  Wegner, Krislea E., PHD

White Drug #39
1401 33rd St S
(701) 235-5511
- Pharmacy
  White Drug #39

White Drug #52
712 38 St NW Ste A
(701) 893-9217
- Home Medical Equipment
  White Drug #52

White Drug #68
4255 30th Ave S
(701) 478-8953
- Home Medical Equipment
  White Drug #68

Wilhelm, Vickie A., MS, LPCC Counseling
1111 Westrac Dr Ste 201
(701) 235-2003
- Licensed Professional Clinical Counselor
  Wilhelm, Vickie A., LPCC

North Dakota (cont.)
Fargo (cont.)

Winmar Diagnostics North Central Inc
2700 12th Ave S Ste B
(701) 235-7424
- Home Medical Equipment
  Winmar Diagnostics

Wolf, Beth, MS, CCC/SLP
3532 19th St S
(701) 293-3345
- Speech Therapy
  Wolf, Beth A., ST

Youth Works
317 S Univ Dr
(701) 232-8558
- Licensed Addiction Counselor-Chemical Dependency
  Erhardt, Timothy T., LAC

Finley

Integrated Therapy
652 130th Ave NE
(701) 789-1026
- Occupational Therapy
  Loen-Bakke, Sherry L., OT
- Physical/Occupational Therapist
  Loen-Bakke, Sherry L., OT

Sanford Health Finley Clinic
Hwy 200 E
(701) 524-1005
- Licensed Registered Dietitian
  Willyard, Susan R., LRD
- Nurse Practitioner
  Gustafson, Sarah, FNP
  Unterseher, Jeanne A., CNP
- Occupational Therapy
  Becker, Joan M., OT
- Physical Therapy
  Parker, Tami K., PT
- Physical/Occupational Therapist
  Becker, Joan M., OT
- Physician Assistant
  Bjore, Zachery, PA

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING ANCILLARY PROVIDERS

North Dakota (cont.)

Forman

Forman Drug
330 Main St S
(701) 724-6222

- Pharmacy
  Forman Drug

Sanford Health Forman Clinic
336 Main St
(701) 724-3221

- Licensed Registered Dietitian
  Erlandson, Barbara H., LRD
- Nurse Practitioner
  Gabriel, James, FNP
- Physical Therapy
  Lorenz, Ryan R., PT
  Mattson, Heather, PT
- Physician Assistant
  Hendricks, Larry A., PA
  Pfeifer, Loretta V., PA
  Reich, Brenda R., PA

Fort Totten

Early Childhood Tracking
416 2nd Ave N
(701) 766-1251

- Nurse Practitioner
  Hefta, Cheryl A., CNP

Spirit Lake Nation Recovery & Wellness Program
7102 Crow Hill Rd
(701) 766-4285

- Licensed Addiction Counselor-Chemical Dependency
  Spirit Lake Nation Recovery & Wellness Progr

Youth Healing & Wellness Center
816 3rd Ave N
(701) 766-4236

- Licensed Addiction Counselor-Chemical Dependency
  Duckwitz, Linda, LAC

Fort Yates

Fort Yates IHS
North River Rd
(701) 854-3831

North Dakota (cont.)

Fort Yates (cont.)

Fort Yates IHS (cont.)

- Certified Diabetic Educator
  Fort Yates/CDE
- Licensed Registered Dietitian
  Fort Yates/LRD
- Nurse Practitioner
  Fort Yates/CNP
- Psychology
  Fort Yates/PhD

Prairie Hearing Aid Center dba Grey Wolf Hearing Aid Service
9299 Hwy 24
(701) 471-1271

- Home Medical Equipment
  Prairie Hearing Aid Center dba Grey Wolf Hea

Gackle

Wishek Rural Health Clinic/Gackle
321 Main St
(701) 452-2364

- Nurse Practitioner
  Benson, Paulette, FNP
  Ketterling, Marcia R., FNP
- Physician Assistant
  Hauff, Rosemary, PA
  Kosiak, Maureen A., PA
  Rau, Kay M., PA

Garrison

Chase Pharmacy Inc
21 N Main St
(701) 463-2242

- Home Medical Equipment
  Chase Pharmacy Inc

Garrison Family Clinic
437 3rd Ave SE
(701) 463-2245

- Nurse Practitioner
  Schroeder, Dara, FNP
- Physician Assistant
  Larson, Kathleen A., PA

Garrison Mem Hospital
407 3rd Ave SE
(701) 463-6514

- Physical Therapy
  Gradin, Denise M., PT
  Olson, Kurt D., PT

North Dakota (cont.)

Garrison (cont.)

Garrison Mem Hospital (cont.)

- Physical Therapy (continued)
  Reinholt, Ann E., PT

Trinity Community Clinic Garrison
131 N Main St
(701) 463-2626

- Nurse Practitioner
  Rime, Hedi J., FNP

Glen Ullin

Bogerosa Inc
602 Ash Ave
(701) 426-7095

- Physical Therapy
  Bogert, Mark, PT

Glen Ullin Drug
113 S Main St
(701) 348-3303

- Home Medical Equipment
  Glen Ullin Drug

Glen Ullin Family Medical Center
602 Ash Ave E
(701) 348-9175

- Nurse Practitioner
  Duppong, Linda E., CNP
  Rivinius, Carey E., CNP
- Physician Assistant
  Dent, Tyesha, PA
  Duppong, Linda E., PA

Grafton

Christian Unity Hospital, Corp. dba Grafton Family Clinic
164 West 13th Street
(701) 352-2000

- Certified Diabetic Educator
  Myers, Jane M., CDE
- Licensed Registered Dietitian
  Myers, Jane M., LRD
- Nurse Practitioner
  Anderson, Miriam, CNP
  Trontvet, Sheila, CNP

Grafton Drug
38 E 12th St
(701) 352-0831

- Home Medical Equipment

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING ANCILLARY PROVIDERS

North Dakota (cont.)
Grafton (cont.)

Grafton Drug (cont.)
- Home Medical Equipment (continued)
  Kb Pharmacy Pllc dba Grafton Drug

Life Skills and Transition Center
701 W 6th St
(701) 352-4200
- Home Medical Equipment
  Developmental Center
- Licensed Registered Dietitian
  Schroeder, Brenda K., LRD
- Occupational Therapy
  Dusek, Mary K., OT
  Gemmill, Julie, OT
- Physical Therapy
  Holm, Karena (Karey) L., PT
  Olson, Donald N., PT
  Olson, Kimberly D., PT
- Speech Therapy
  Callahan, Julie A., ST

Mab Counseling Services
47 West 6th Street
(701) 352-1667
- Licensed Addiction Counselor-Chemical Dependency
  Bryan, Michael A., LAC

Migrant Health Services Inc
701 West 6th St
(701) 352-4048
- Nurse Practitioner
  Stabo, Kristin M., FNP
  Vigen, Rebecca A., CNP

Quinn Dui/Mip Counseling
47 W 6 St
(701) 352-9622
- Licensed Addiction Counselor-Chemical Dependency
  Quinn, Pamela J., LAC

Quotable Kids Speech & Language Clinic PLLC
819 Hill Ave
(701) 739-5437
- Speech Therapy
  Ziegelmann, Kristin M., ST

North Dakota (cont.)
Grafton (cont.)

Unity Medical Center
164 W 13th St
(701) 352-1620
- Certified Diabetic Educator
  Myers, Jane M., CDE
- Certified Registered Nurse Anesthetist
  Shefland, Raymond C., CRNA
  Trontvet, Kent A., CRNA
- Licensed Registered Dietitian
  Myers, Jane M., LRD
- Nurse Practitioner
  Anderson, Miriam, CNP
  Ketterling, Marcia R., FNP
  Mattson, Jaime R., FNP
  Trontvet, Sheila, CNP

White Drug #65
544 Hill Ave
(701) 352-1760
- Home Medical Equipment
  White Drug #65

Grand Forks

Achieve Therapy, LLC
3035 Demers Ave
(701) 746-6694
- Home Medical Equipment
  Achieve Therapy LLC
- Physical Therapy
  Bolek, Megan E., PT
  Chine, Nicole J., PT
  Holte, Laurie M., PT
  Schindler, Gary D., PT
  Walsh, Heather A., PT

Achieve Therapy, LLC
1425 S Columbia Rd
(701) 746-8374
- Home Medical Equipment
  Achieve Therapy LLC
- Physical Therapy
  Bolek, Megan E., PT
  Carson, Thomas L., PT
  Chine, Nicole J., PT
  Lafreniere, Clifford W., PT
  Palmgren, Annette L., PT
  Schindler, Gary D., PT
  Walsh, Heather A., PT
  Wilcox, Lacey J., PT

North Dakota (cont.)
Grand Forks (cont.)

Agassiz Associates, PLLC
1407 24th Ave S Ste 520
(701) 746-6336
- Licensed Addiction Counselor-Chemical Dependency
  Grimsley, Tanner E., LAC
  Walton, Karin L., LAC
- Licensed Professional Clinical Counselor
  Walton, Karin L., LPCC
- Physician Assistant
  Anvinson, Nicole C., PA
  Osowski, Paula M., PA
- Psychology
  Achilleoudes, Helen, PHD
  Green, Rebecca M., PHD
  Jensen, Heidi K., PHD
  McBride, Rosanne B., PHD

Altru At Choice
4401 S 11th St
(701) 732-7620
- Nurse Practitioner
  Mason, Ann L., FNP
- Physical Therapy
  Wehe, Bradley C., PT

Altru Cancer Center
960 S Columbia Rd
(701) 780-5400
- Nurse Practitioner
  Devine Roberts, Jacqueline R., CNP
  Dudgeon, Amanda J., FNP
  Nygaard, Anne M., CNP

Altru Clinic Pharmacy
1000 S Columbia Rd
(701) 772-4875
- Home Medical Equipment
  Altru Clinic Pharmacy

Altru Family Medicine Center
1380 S Columbia Rd
(701) 795-2000
- Nurse Practitioner
  Engel, Pamela L., CNP
  Shimek, Heather M., FNP

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING ANCILLARY PROVIDERS

Altru Family Medicine Residency
725 Hamline St
(701) 780-6800

- Certified Diabetic Educator
  Westereng, Rebecca, CDE
- Home Medical Equipment
  Grand Forks Family Medicine Residency Pharma
- Licensed Registered Dietitian
  Westereng, Rebecca, LRD
- Psychology
  Haugen, Erin N., PHD

Altru Hospital
1200 S Columbia Rd
(701) 780-5000

- Certified Registered Nurse Anesthetist
  Adams, Darla J., CRNA
  Boen, Chad E., CRNA
  Bolduc, Julie A., CRNA
  Branby, Michael D., CRNA
  Bratrud, Jessica A., CRNA
  Buettner, Kevin C., CRNA
  Carter, Scott B., CRNA
  Cole, Ronald J., CRNA
  Fontaine, Scott A., CRNA
  Hagert, Karen L., CRNA
  Hanson, Dane C., CRNA
  Harms, Bethany A., CRNA
  Harms, Kendall J., CRNA
  Harrison, Jennifer A., CRNA
  Hill, Deborah E., CRNA
  Hoverson, Lynne M., CRNA
  Koland, Nathan, CRNA
  Krueger, Curtis C., CRNA
  Macleod, Mary C., CRNA
  McBride, Elizabeth A., CRNA
  Nuelle, David B., CRNA
  Osowski, Lynn, CRNA
  Reynolds-Cooley, Lynn, CRNA
  Schmiedeberg, Timothy R., CRNA
  Secord, Melissa D., CRNA
  Siemers, Trent E., CRNA
  Slominski, Vera J., CRNA
  Sperle, James K., CRNA
  Spivey, Matthew J., CRNA
  Strand, James E., CRNA
  Wolfgram, Alicia M., CRNA
  Wray, Garth E., CRNA

Altru Hospital (cont.)

- Clinical Nurse Specialist
  Senti, Jeanine L., CNS
- Licensed Registered Dietitian
  Larson, Tara K., LRD
  Mankie, Wendy A., LRD
- Nurse Practitioner
  Anderson, Kari L., FNP
  Boger, Estella A., CNP
  Cook, Gina M., FNP
  Kropp, Michael C., FNP
  Lalonde, Theresa, CNP
  Leach, Kelly, FNP
  Salberg, Rachel M., CNP
  Shimek, Heather M., FNP
  Zwilling, Jana G., FNP
- Physical Therapy
  Grams-Dennis, Vivian, PT
- Physician Assistant
  Drown, Paul G., PA
  Hanson, Brenda K., PA
  Oliver, Sarah A., PA
  Wright, Shellie D., PA
- Psychology
  Haugen, Erin N., PHD
  Muse, Shyla L., PHD

Altru Main Clinic
1000 S Columbia Rd
(701) 780-5000

- Audiology
  Brandt, Mackensie M., AUD
  Green, Mandi R., AUD
  Thorson, Megan J., AUD
- Certified Diabetic Educator
  Hampton, Arlene, CDE
  Mutzenberger, Sara B., CDE
- Certified Registered Nurse Anesthetist
  Adams, Darla J., CRNA
  Boen, Chad E., CRNA
  Bolduc, Julie A., CRNA
  Branby, Michael D., CRNA
  Buettner, Kevin C., CRNA
  Carter, Scott B., CRNA
  Cole, Ronald J., CRNA
  Fontaine, Scott A., CRNA
  Hagert, Karen L., CRNA
  Hanson, Dane C., CRNA
  Harms, Bethany A., CRNA

Altru Main Clinic (cont.)

- Certified Registered Nurse Anesthetist (continued)
  Harms, Kendall J., CRNA
  Harrison, Jennifer A., CRNA
  Hill, Deborah E., CRNA
  Hoverson, Lynne M., CRNA
  Koland, Nathan, CRNA
  Krueger, Curtis C., CRNA
  Macleod, Mary C., CRNA
  McBride, Elizabeth A., CRNA
  Nuelle, David B., CRNA
  Osowski, Lynn, CRNA
  Reynolds-Cooley, Lynn, CRNA
  Schmiedeberg, Timothy R., CRNA
  Secord, Melissa D., CRNA
  Siemers, Trent E., CRNA
  Slominski, Vera J., CRNA
  Sperle, James K., CRNA
  Spivey, Matthew J., CRNA
  Strand, James E., CRNA
  Wray, Garth E., CRNA
- Clinical Nurse Specialist
  Senti, Jeanine L., CNS
- Licensed Registered Dietitian
  Dahl, Jean Marie C., LRD
  Doebler, Ellen A., LRD
  Haugen, Jennifer M., LRD
  Holum, Lynn M., LRD
  Streitz, Susan M., LRD
  Warner-Noreen, Danika A., LRD
- Nurse Practitioner
  Boger, Estella A., CNP
  Cook, Gina M., FNP
  Cooley, Michelle A., FNP
  Dorman, Seth T., FNP
  Ferry, Rhea J., CNP
  Hanson, Erica R., CNP
  Huso, Joan, FNP
  Hutton, Cora Len M., CNP
  Kaiser, Stephanie A., FNP
  Kotrba, Jessica M., FNP
  Krogstad, Mary Beth, CNP
  Krogstad, Sheri L., FNP
  Kropp, Michael C., FNP
  Lauzon, Christine S., CNP
  Leach, Kelly, FNP
  Macki, Kamrin L., CNP
  Mason, Ann L., FNP

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING ANCILLARY PROVIDERS

Altru Main Clinic (cont.)

- Nurse Practitioner (continued)
  Meyer, Lana J., FNP
  Olson, Wade A., FNP
  Riendeau, Andrea M., FNP
  Rustvang, Daniel R., CNP
  Rustvang, Pamela A., CNP
  Salberg, Rachel M., CNP
  Schmaltz, Debra F., CNP
  Shimek, Heather M., FNP
  Sperle, Roni L., FNP
  Spicer, Laura J., CNP
  Stauss Carlson, Kelly J., CNP
  Verkuehlen, Jennifer A., FNP
  Zwilling, Jana G., FNP
- Occupational Therapy
  Adams, Jill E., OT
  Brown-Mikkelson, Jolene, OT
  Cherney, Alison, OT
  Cooley, Monica N., OT
  Estad, Jennifer L., OT
  Fabian, Kristina M., OT
  Hellman, Janaye M., OT
  Jensen, Stacy J., OT
  Kliner, Ashley L., OT
  Lauer, Wanda K., OT
  Lehr, Emilee J., OT
  Nordstrom, Brandon K., OT
  Rosenquist, Jenna R., OT
  Schmaltz, Randi D., OT
  Schuster, Kristina M., OT
  Schwenzfeier, Margo J., OT
  Thiele, Paige E., OT
  Thompson, Lori M., OT
  Voth, Stacie L., OT
  Warren, Jacob B., OT
  Willis, Nicole R., OT
  Wirth, Jessica M., OT
- Physical Therapy
  Auch, Andrea M., PT
  Aymond, Peggi J., PT
  Barstad, Stephanie J., PT
  Beck, Jonathan, PT
  Breitbach, Rhonda L., PT
  Bucher, Kayla J., PT
  Burris, Amanda J., PT
  Capp, Kirby J., PT
  Elbert, Amy J., PT
  Elke, Kayla M., PT
  Failing, Rachel A., PT

Altru Main Clinic (cont.)

- Physical Therapy (continued)
  Gorder, Allison, PT
  Gulka, Amanda, PT
  Haarstad, Sarah K., PT
  Halcrow, Steven K., PT
  Halstenson, Jill K., PT
  Haney, Jeffrey S., PT
  Hanson, Erica H., PT
  Johnson, Brittany R., PT
  Knudson, Sandra L., PT
  Kuchan, Anthony J., PT
  Kuchar, Marleigh M., PT
  Letvin, Hayley J., PT
  Lommen, Amy B., PT
  Malott, Kathryn E., PT
  Marti, Leah M., PT
  Miller, Brandi J., PT
  O'Brien, Kevin L., PT
  Olson, Elizabeth J., PT
  Panos, Heidi L., PT
  Panos, Steven I., PT
  Pederson, Jennifer A., PT
  Roemmich, Suzanne R., PT
  Slocum, William I., PT
  Stromme, Ryan C., PT
  Suedel, Adam J., PT
  Voigt, Jacquelyn M., PT
  Voth, Wayne P., PT
  Wehe, Marcia A., PT
  Wessman, Erin L., PT
  Wise, Weston P., PT
- Physical/Occupational Therapist
  Estad, Jennifer L., OT
  Jensen, Stacy J., OT
  Wirth, Jessica M., OT
- Physician Assistant
  Adams, Allison, PA
  Bauduin, Tamra S., PA
  Gorder, Vicki L., PA
  Hankey, Jill R., PA
  Kosmatka, Erika J., PA
  Linnen, Katherine M., PA
  Wright, Shellie D., PA
- Psychology
  Muse, Shyla L., PHD
  Yeager, Catherine, PHD
- Speech Therapy
  Anderson, Cassie N., ST
  Anderson, Heidi, ST

Altru Main Clinic (cont.)

- Speech Therapy (continued)
  Anhorn, Jennifer J., ST
  Brown, Heidi M., ST
  Kjono, Chelsey, ST
  McEntee, Samantha, ST
  Miesbauer, Hannah K., ST
  Miskavige, Lindsey G., ST
  Newhouse, Jennifer L., ST
  Smith, Jenna S., ST
  Spicer, Michelle R., ST

Altru Professional Center
4440 S Washington St
(701) 780-5000

- Nurse Practitioner
  Engel, Pamela L., CNP
  Macki, Kamrin L., CNP
  Shimek, Heather M., FNP
- Physician Assistant
  Hanson, Brenda K., PA
  Pearson, Roberta J., PA

Altru Rehabilitation Center
1300 S Columbia Rd
(701) 780-2311

- Nurse Practitioner
  Olson, Wade A., FNP
  Stabo, Kristin M., FNP
  Zwilling, Jana G., FNP
- Occupational Therapy
  Brown-Mikkelson, Jolene, OT
  Davis, Rachel A., OT
  Hagen-Johnson, Heidi J., OT
  Hoff, Bonita, OT
  Jensen, Stacy J., OT
  Loscheider, Jane A., OT
  Mackenzie, Travis E., OT
  Ophaug, Lynn R., OT
  Pauley-Colter, Brenda H., OT
  Purcell, Kristin M., OT
  Roed, Rhonda M., OT
  Storhaug, Jodie L., OT
  Suedel, Stephanie A., OT
  Thibert, Heather A., OT
  Waind, Marsha A., OT
  Wavra, Jinell S., OT
  Welke, Kara, OT
- Physical Therapy
  Boese, Kari E., PT
  Boettner, Jodi R., PT

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING ANCILLARY PROVIDERS

Altru Rehabilitation Center (cont.)

- Physical Therapy (continued)
  Bommersbach, Holly M., PT
  Carter, Patricia R., PT
  Decker, Schawnn M., PT
  Delacruz, Angela D., PT
  Due, Joan K., PT
  Elbert, Amy J., PT
  Grams-Dennis, Vivian, PT
  Grant-Gooden, Suzanne, PT
  Hoffarth, Jennifer A., PT
  Jurgens, Theresa A., PT
  Koerber, Shelley M., PT
  McDonald, Heidi K., PT
  McMillan, Becky S., PT
  Putbrese, Anne G., PT
  Riley, Maureen L., PT
  Rood, Stephen M., PT
  Strand, Jessica M., PT
  Ternes, Tamara M., PT
  Wehe, Bradley C., PT
- Physical/Occupational Therapist
  Brown-Mikkelson, Jolene, OT
  Davis, Rachel A., OT
  Hagen-Johnson, Heidi J., OT
  Hoff, Bonita, OT
  Jensen, Stacy J., OT
  Loscheider, Jane A., OT
  Mackenzie, Travis E., OT
  Pauley-Colter, Brenda H., OT
  Purcell, Kristin M., OT
  Storhaug, Jodie L., OT
  Suedel, Stephanie A., OT
  Thibert, Heather A., OT
  Waind, Marsha A., OT
  Wavra, Jinell S., OT
  Welke, Kara, OT
- Physician Assistant
  Elkins, William E., PA
  Salveson, Angela K., PA
  Silvernail, Rio D., PA

Altru Specialty Center
4500 S Washington St
(701) 732-7000

- Certified Registered Nurse Anesthetist
  Adams, Darla J., CRNA
  Boen, Chad E., CRNA
  Bolduc, Julie A., CRNA
  Branby, Michael D., CRNA

Altru Specialty Center (cont.)

- Certified Registered Nurse Anesthetist (continued)
  Bratrud, Jessica A., CRNA
  Buettner, Kevin C., CRNA
  Carter, Scott B., CRNA
  Cole, Ronald J., CRNA
  Fontaine, Scott A., CRNA
  Hagert, Karen L., CRNA
  Hanson, Dane C., CRNA
  Harms, Bethany A., CRNA
  Harms, Kendall J., CRNA
  Harrison, Jennifer A., CRNA
  Hill, Deborah E., CRNA
  Hoverson, Lynne M., CRNA
  Koland, Nathan, CRNA
  Krueger, Curtis C., CRNA
  Macleod, Mary C., CRNA
  McBride, Elizabeth A., CRNA
  Nuelle, David B., CRNA
  Osowski, Lynn, CRNA
  Reynolds-Cooley, Lynn, CRNA
  Schmiedeberg, Timothy R., CRNA
  Secord, Melissa D., CRNA
  Siemers, Trent E., CRNA
  Slominski, Vera J., CRNA
  Sperle, James K., CRNA
  Spivey, Matthew J., CRNA
  Strand, James E., CRNA
  Wolfgram, Alicia M., CRNA
  Wray, Garth E., CRNA
- Nurse Practitioner
  Olson, Wade A., FNP
  Stabo, Kristin M., FNP
- Physician Assistant
  Elkins, William E., PA
  Salveson, Angela K., PA
  Silvernail, Rio D., PA

Altru Specialty Services dba Yorhom Medical Essentials
4350 S Washington St
(701) 780-2436

- Home Medical Equipment
  Altru Specialty Services dba Yorhom Medical

Altru Specialty Services Inc dba Yorhom Medical Essentials
1200 S Columbia Rd
(701) 780-5827

- Home Medical Equipment
  Altru Specialty Services dba Yorhom Medical

Altru Specialty Services Inc dba Yorhom Medical Essentials
1200 S Columbia Rd
(701) 780-5827

- Home Infusion
  Altru Specialty Services dba Yorhom Medical

Assessment and Therapy Associates of Grand Forks
725 Hamline St
(701) 780-6821

- Licensed Professional Clinical Counselor
  Enblom, Kristen E., LPCC
  Gamliel, Tiram, LPCC
- Psychology
  Ertelt, Troy W., PHD
  Haugen, Erin N., PHD
  Jackson, David, PHD
  Muse, Shyla L., PHD
  Petros, Thomas V., PHD
  Schmutzer, Peter A., PHD
  Welke, Charles K., PHD
  Yeager, Catherine, PHD

Assessment and Therapy Associates of Grand Forks
2755 10th Ave N
(701) 780-6821

- Psychology
  Boulton-Olson, Christine, PHD
  Schmutzer, Peter A., PHD

Audiocare Hearing Center
2812 17 Ave S Ste E
(701) 746-8421

- Home Medical Equipment
  Audiocare Hearing Center

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING ANCILLARY PROVIDERS

Aurora Medical Park Laboratory, LLC
1451 44th Ave S
Unit A
(701) 732-2200

- Independent Laboratory
  Aurora Medical Park Laboratory, LLC

Aurora Urgent Care
2650 32nd Ave S
Ste D
(701) 732-2710

- Nurse Practitioner
  Graves, Mark A., FNP
  McKinney, Bain L., FNP
  Royal, Natalie R., FNP
- Physician Assistant
  Adams, Jeffrey S., PA
  Bergs, Kara R., PA
  Hager, Dustin T., PA
  Solberg, Julie S., PA

Center For Psychiatric Care
1451 44th Ave S Unit A
(701) 732-2500

- Certified Registered Nurse Anesthetist
  Andruski, Heidi L., CRNA

Center For Psychological and Educational Assessment
210 Montgomery Hall
(701) 777-3260

- Psychology
  Petros, Thomas V., PHD

Center For Self Growth & Renewal, PC
1551 28 Ave S Ste C
(701) 746-4400

- Licensed Professional Clinical Counselor
  Reiten Eylands, Mary, LPCC
  Serna, Carrie L., LPCC
- Psychology
  Brustad, Laurie A., PHD

Dakota Therapy Center, LLC
600 Demers Ave Ste 301
(701) 746-9341

- Psychology
  Cheney, Angela R., PHD

Drake Counseling Services, Inc
311 4 St S Ste 106
(701) 746-8414

- Licensed Addiction Counselor-Chemical Dependency
  Bostyan, Eva L., LAC
  Loyland, Vicki J., LAC

Family Institute PC
2100 S Columbia Rd
Ste 202
(701) 772-1588

- Psychology
  Adams Larsen, Margo A., PHD
  Bradley, April, PHD
  Deyoung, Kyle, PHD
  Kotschwar, Jeanine E., PHD
  Legerski, John P., PHD
  Looby, Alison, PHD
  Miller, Joseph C., PHD
  Moe, Brian K., PHD
  Navarro, Rachel L., PHD
  Paulson, Michael D., PHD
  Rowan, Leslie A., PHD
  Wettersten, Kara, PHD
  Whitcomb, David H., PHD

Fire Audiological Services PC
121 N Washington St
(701) 787-5862

- Audiology
  Fire, Kevin M., MS
  Gowan, Jennifer L., AUD

Grand Forks Anesthesia Service Inc
3035 Demers Ave
(701) 738-4240

- Certified Registered Nurse Anesthetist
  Andruski, Heidi L., CRNA
  Bazey, Lori, CRNA
  Channel, Eileen M., CRNA
  Hanson, Dane C., CRNA
  Hoverson, Lynne M., CRNA
  Johnson, Amber, CRNA
  Krueger, Curtis C., CRNA
  Siemers, Trent E., CRNA

Independent Communication Therapy
901 S 11th St
(701) 740-5740

- Speech Therapy
  Woolsey, Diane K., ST

Jeffrey C Gregory, PhD PC dba Gregory Psychology Solutions
1407 24th Ave S
(701) 293-7477

- Psychology
  Gregory, Jeffrey C., PHD

Laidlaw Psychological Services, PC
3301 30th Ave S #101
(701) 780-9700

- Psychology
  Laidlaw, Robert A., PHD

Lincare Inc
2100 S Columbia Rd
Ste 110
(701) 775-3965

- Home Medical Equipment
  Lincare Inc

Lipp Carlson Lommen & Witucki
2808 17th Ave S
(701) 746-8376

- Psychology
  Dannewitz, Holly J., PHD
  King, Brenda J., PHD
  Lipp, Leland H., PHD
  Lommen, David P., PHD
  Tait, Alison N., PHD
  Whalen, Jonathan E., PHD
  Witucki, Marty P., PHD

Lipp, Carlson, Lommen & Witucki
1380 S Columbia Rd
(701) 746-8376

- Psychology
  Lommen, David P., PHD
  Tait, Alison N., PHD
  Whalen, Jonathan E., PHD

Little Miracles, Inc
2951 34th St S
(701) 772-3851

- Occupational Therapy
  Hennes, Laura L., OT
  Kieffer, Nicole M., OT

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING ANCILLARY PROVIDERS

Little Miracles, Inc (cont.)
- Occupational Therapy (continued)
  Rios, Maile, OT
- Physical Therapy
  Cole, Karen L., PT
  Holm, Karena (Karey) L., PT
  Sayler, Tammy L., PT
- Speech Therapy
  Kocourek, Erin R., ST
  Sporbert, Jessica A., ST
  Thompson, Heidi J., ST
  Woolsey, Diane K., ST

Little Miracles, Inc
2200 Library Circle
(701) 757-2155
- Occupational Therapy
  Hennes, Laura L., OT
  Kieffer, Nicole M., OT
- Physical Therapy
  Cole, Karen L., PT
  Holm, Karena (Karey) L., PT
  Sayler, Tammy L., PT
- Speech Therapy
  Kocourek, Erin R., ST
  Sporbert, Jessica A., ST
  Thompson, Heidi J., ST
  Woolsey, Diane K., ST

Midwest Neuropsychology, PLLC
3301 30th Ave S #101
(701) 780-9700
- Psychology
  Thompson, Susan J., PHD

Mindfulness Based Therapies, Pain and Chronic Illness
1133b S Columbia Rd
Ste 3
(218) 779-3513
- Psychology
  Sloan, Lora L., PHD

Miracle Ear
2650 32nd Ave S Ste M
(701) 772-5313
- Home Medical Equipment
  Miracle Ear

Northeast Human Service Center
151 S 4th St Ste 401
(701) 795-3000
- Licensed Addiction Counselor-Chemical Dependency
  Davis, Deborah L., LAC
  Fisher, Marlys F., LAC
  Grimsley, Tanner E., LAC
  Jones, Angela M., LAC
  Juarez, Guadalupe, LAC
  Kuntz, Kristi L., LAC
  McMillan, Cynthia R., LAC
  Miller, Kim M., LAC
  Mohagen, Lori C., LAC
  Olson, Neil I., LAC
  Quinn, Pamela J., LAC
  Scott, David L., LAC
  Theisen, Jana, LAC
  White, Kelly, LAC
- Licensed Professional Clinical Counselor
  Scott, David L., LPCC
  Shulind, Joan, LPCC
- Occupational Therapy
  Demars, Julie S., OT
  Littlejohn, Diane L., OT
- Psychiatric Nurse
  Gagner-Tjellesen, Desiree J., CNS
- Psychology
  Decker, Greg, PHD
  Jagow France, Desiree A., PHD
  Newberry, Donald E., PHD

Northern Valley Obstetrics & Gynecology
2810 17th Ave S
(701) 738-2004
- Nurse Midwives
  Hemler, Elizabeth A., CNM
- Nurse Practitioner
  Detke, Kathryn R., CNP

Northland Christian Counseling Center
2315 Library Circle
(701) 795-8550
- Licensed Addiction Counselor-Chemical Dependency
  Scott, David L., LAC

Northland Christian Counseling Center (cont.)
- Licensed Addiction Counselor-Chemical Dependency (continued)
  Torgerson, Carol A., LAC
- Licensed Professional Clinical Counselor
  Klug, Marna J., LPCC
  Scott, David L., LPCC
  Seay, Stephen H., LPCC

Northland Christian Counseling Center
308 5th St S
(701) 795-8550
- Licensed Addiction Counselor-Chemical Dependency
  Scott, David L., LAC
- Licensed Professional Clinical Counselor
  Scott, David L., LPCC

Northland Family Physicians, LLC dba Aurora Clinic
1451 44th Ave S Unit F
(701) 732-2700
- Nurse Practitioner
  Barlow, Steven L., FNP
  Graves, Mark A., FNP
  McKinney, Bain L., FNP
  Royal, Natalie R., FNP
- Physician Assistant
  Adams, Jeffrey S., PA
  Bergs, Kara R., PA
  Solberg, Julie S., PA

Quotable Kids Speech Language Clinic
121 N Washington St
(701) 739-5437
- Speech Therapy
  Fitzgerald, Kristy A., ST
  Volk, Andrea, ST

Rasmussen, Maxine, LPCC
1407 24th Ave S Ste 315
(701) 772-8013
- Licensed Professional Clinical Counselor
  Rasmussen, Maxine K., LPCC

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING ANCILLARY PROVIDERS

North Dakota (cont.)
Grand Forks (cont.)

Rehab Authority
701 Demers Ave
(701) 772-2200

- Occupational Therapy
  Berntson, Mary Lynn, OT
- Physical Therapy
  Burcham, Tyler, PT
  Hayes, Kirk J., PT
  Rustebakke, Kathryn G., PT

Russell, Sue A, PhD P.C.
628 7th Ave S Ste B
(701) 746-8737

- Psychology
  Russell, Sue A., PHD

Sleep Easy Therapeutics Ltd dba Grand Forks Cpap Store
3301 30th Ave S Ste 103
(701) 757-4801

- Home Medical Equipment
  Sleep Easy Therapeutics Ltd dba Grand Forks

Sweet Dreams Anesthesia PLLC
1451 44th Ave S #A
(701) 746-7441

- Certified Registered Nurse Anesthetist
  Andruski, Heidi L., CRNA
  Bazey, Lori, CRNA
  Johnson, Amber, CRNA

The Village Family Service Center
1726 S Washington Street
Ste 33a
(701) 746-4584

- Psychology
  Edwards, Sarah R., PHD
  Juntunen, Cindy L., PHD

Truyu Aesthetic Center
3165 Demers Ave
(701) 780-6219

- Nurse Practitioner
  Laframboise, Jennifer L., FNP
  Stauss Carlson, Kelly J., CNP
  Suda, Amy L., FNP
  Tinkler, Jennifer A., FNP

North Dakota (cont.)
Grand Forks (cont.)

UND Center For Sports Medicine
2751 2nd Ave N Stop 9013
(701) 777-4845

- Physical Therapy
  Tracy, Robin C., PT
  Ziegler, Cathy J., PT

UND Speech Language & Hearing Clinic
Montgomery Hall Room 101
290 Centennial Dr Stop 8040
(701) 777-3728

- Audiology
  Madden, John D., MS
- Speech Therapy
  Biberdorf, Peggy D., ST
  Detienne, Shauna L., ST
  Robinson, Sarah A., ST
  Weisz, Shari M., ST

UND Student Health Service
Mccannel Hall Room 100
2891 2nd Ave N Stop 9038
(701) 777-4500

- Licensed Registered Dietitian
  Wittmann, Karina L., LRD
- Nurse Practitioner
  Freeland, Bonnie L., CNP
  Hjeldness, Marlene K., CNP
  Kary, Shelby, FNP
- Physician Assistant
  Larson, Annette C., PA
  McGee, Megan F., PA
- Psychiatric Nurse
  Olson, Stacie L., PNU

Valley Bone and Joint Clinic
3035 Demers Ave
(701) 746-7521

- Home Medical Equipment
  Valley Bone & Joint Clinic
- Nurse Practitioner
  Carson, Katherine M., FNP

Valley Health
360 Division Ave Ste 200
(701) 775-4251

- Nurse Midwives
  Shogren, Maridee D., CNM
- Nurse Practitioner
  Cicha, Nannette L., CNP
  Detke, Kathryn R., CNP

North Dakota (cont.)
Grand Forks (cont.)

Valley Health (cont.)

- Nurse Practitioner (continued)
  Halverson, Gail R., CNP
  Spicer, Laura J., CNP

Viscito Family Medicine, PLLC
2750 26th St S Ste C
(701) 757-1999

- Physician Assistant
  Solberg, Julie S., PA

Wakefield Hearing Center
2514 S Washington St
(701) 746-7000

- Home Medical Equipment
  Wakefield Hearing Center

Walls Medicine Center
708 S Washington St
(701) 746-0498

- Home Medical Equipment
  Walls Medicine Center

White Drug #9
2475 32 Ave S Ste 1
(701) 775-9937

- Home Medical Equipment
  Thrifty White Drug #9

Gwinner

Mobility Plus Rehabilitation
11 North Main
(701) 678-2244

- Occupational Therapy
  Aberle, Carmen, OT
  Dahl, Robert L., OT
  Shearer, Treena, OT
- Physical Therapy
  Long, Charles A., PT
  Lorenz, Ryan R., PT
  Shanenko, Paul, PT
  White, Brittany L., PT
- Physical/Occupational Therapist
  Aberle, Carmen, OT
  Shearer, Treena, OT

Sanford Health Gwinner Clinic
69 Highway 13 W
(701) 678-2263

- Nurse Practitioner
  Gabriel, James, FNP

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING ANCILLARY PROVIDERS

North Dakota (cont.)
Gwinner (cont.)

Sanford Health Gwinner Clinic (cont.)
- Physician Assistant
  Hendricks, Larry A., PA
  Pfeifer, Loretta V., PA
  Reich, Brenda R., PA
  Siedschlag, Kathleen L., PA

Hankinson

Hankinson Drug
323 Main Ave South
(701) 242-7414
- Home Medical Equipment
  Hankinson Drug

Orthopedic & Sports Physical Therapy Inc
112 5th St SW
(701) 242-7323
- Occupational Therapy
  Holubok, Gregory D., OT
- Physical Therapy
  Eggiman, Anthony C., PT
  Krause-Roberts, Shawn M., PT
  Paulson, Tera D., PT
- Speech Therapy
  Hoffert, April, ST

Harvey

Blooming Prairie Assessment & Therapy Center PC
1008 Adams Ave
(701) 662-8255
- Psychology
  Kenney, Sara K., PSYD
  Normandin, Sherman, PHD

Central Dakota Family Physicians
922 Lincoln Ave
(701) 324-4856
- Home Medical Equipment
  Central Dakota Family Physicians
- Nurse Practitioner
  Hagemeister, Erin K., FNP
- Physician Assistant
  Keller, Julie A., PA

North Dakota (cont.)
Harvey (cont.)

Harvey Clinic PC
110 9th St E
(701) 324-2396
- Nurse Practitioner
  Mertz, Deborah, FNP
  Neumiller, Lisa M., FNP

Rural Mental Health Consortium
325 E Brewster St
(701) 324-4651
- Psychiatric Nurse
  Sartain, Cheryl A., PNU

St Aloisius Medical Center
325 E Brewster St
(701) 324-4651
- Certified Registered Nurse Anesthetist
  Berentson, Kari, CRNA
  Bossert, Melanie A., CRNA
  Bouma, Kelly M., CRNA
  Braaflat, Tyler D., CRNA
  Brandt, Kraig W., CRNA
  Brown, Terri R., CRNA
  Cederstrom, Luann, CRNA
  Daigle Bjerke, Adelle A., CRNA
  Foisy, Shannon R., CRNA
  Henjum, Jennifer K., CRNA
  Howe, Melinda A., CRNA
  Kelly, Karen J., CRNA
  Keniston, Dierdre V., CRNA
  Peterson, Renee P., CRNA
  Rist, Kari L., CRNA
  Simon, Jeffrey J., CRNA
  Stock, Terry L., CRNA
  Underdahl, Nicole A., CRNA
  Vibeto, Mark C., CRNA
  Wilson, Roni M., CRNA
  Woodland, Michael J., CRNA
  Zahn, Denise M., CRNA
- Licensed Registered Dietitian
  Mertz, Lanette A., LRD
- Nurse Practitioner
  Middleton, Debra L., FNP
  Thorson, Kim A., FNP

North Dakota (cont.)
Hazelton

Hazelton Clinic
343 Main St
(701) 782-4338
- Nurse Practitioner
  Grunefelder, Jacqueline M., FNP
  Moch, Paula M., FNP
- Physician Assistant
  Schatz, Alice, PA

Hazen

Sakakawea Clinic
510 8th Ave NE
(701) 748-7266
- Nurse Practitioner
  Czywczynski, Heather, FNP
  Doll, Sherri K., CNP
  Volk, Robert, FNP

Sakakawea Hazen Clinic
517 8th Ave NE
(701) 748-2256
- Nurse Practitioner
  Czywczynski, Heather, FNP
  Volk, Robert, FNP
- Physician Assistant
  Olson, Kayla L., PA

Sakakawea Medical Center
510 8th Ave NE
(701) 748-2225
- Certified Registered Nurse Anesthetist
  Ahneman, Jon, CRNA
  Miller, Carl B., CRNA
  Reems, Brenda, CRNA
  Sailer, Jill, CRNA
  Schwindt, Brian E., CRNA
- Nurse Practitioner
  Czywczynski, Heather, FNP
  Doll, Sherri K., CNP
  Volk, Robert, FNP
- Occupational Therapy
  Allmendinger, Kayla L., OT
- Physical Therapy
  Hetzler, Jennifer C., PT
  Huber, Dannette R., PT
  Knell, Bonnie L., PT
  Larson, Mary J., PT
  Miller, Nicholas J., PT

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING ANCILLARY PROVIDERS

North Dakota (cont.)
Hazen (cont.)

Sakakawea Medical Center (cont.)
- Physical/Occupational Therapist
  Allmendinger, Kayla L., OT

Hettinger

West River Health Services
1000 Highway 12
(701) 567-4561

- Certified Diabetic Educator
  Nudell, Linda M., CDE
  West, Barbara J., CDE
- Certified Registered Nurse Anesthetist
  Christensen, Randy L., CRNA
  Olson, David O., CRNA
  Schwindt, Brian E., CRNA
- Licensed Professional Clinical Counselor
  Jorgenson, Tara L., LPCC
- Licensed Registered Dietitian
  Nudell, Linda M., LRD
- Nurse Practitioner
  Harper, Darci J., CNP
  Hildebrandt-Folske, Carla J., CNP
  Hill, Lori A., CNP
  Jackson, Linette M., FNP
  Oase, Megan M., FNP
  Reiten, Elizabeth, FNP
  Wilson, Jodi L., FNP
- Physician Assistant
  Bergquist, Rose B., PA
  Bondell, Sheila, PA
  Cooper, Brian K., PA
  Mattis, Billie J., PA
  Moore, Jodi L., PA
  Vearrier, Tracy L., PA

West River Home Medical Services
1000 Highway 12
(701) 567-6086

- Home Medical Equipment
  West River Home Medical Services

White Drug #55
112 S Main St
(763) 513-4301

- Pharmacy
  White Drug #55

North Dakota (cont.)
Hillsboro

Hillsboro Rexall Drug
13 N Main
(701) 636-5231

- Pharmacy
  Hillsboro Rexall Drug

Sanford Health Hillsboro Clinic
315 E Caledonia Ave
(701) 636-5311

- Physician Assistant
  Hinkle, Stephanie, PA
  Owens, Ann, PA
- Psychiatric Nurse
  Cameron, Kathryn M., CNS

Jamestown

Addiction & Counseling Services
300 2nd Ave NE
(701) 252-5398

- Licensed Addiction Counselor-Chemical Dependency
  Cudmore Kramer, Shawn, LAC
  Monek, Martin D., LAC
  Peterson, Debra I., LAC
  Randall, Timothy L., LAC
- Psychology
  Shaleen, Lori A., PHD

Anne Carlsen Center
701 3rd Street NW
(701) 952-5142

- Nurse Practitioner
  Nygaard, Jessica R., FNP
- Occupational Therapy
  Colburn, Jeannine K., OT
  Eckstein, Andrea E., OT
  Eggl, Katie M., OT
  Fugleberg, M Beth, OT
  Lillejord, Connie J., OT
- Physical Therapy
  Lonnberg, Natalie E., PT
  Reis, Tammy V., PT
  Roaldson, Tara J., PT
  Rosencrans, Amanda R., PT
  Trautman, Whitney A., PT
- Speech Therapy
  Albrecht, Ann S., ST
  Coppin, Rachel I., ST
  Fisher, Lisa, ST
  Hanson, Joni E., ST

North Dakota (cont.)
Jamestown (cont.)

Anne Carlsen Center (cont.)
- Speech Therapy (continued)
  Lilleberg, Stephanie K., ST
  Murillo, Flora, ST
  Nelson, Stephanie J., ST
  Roecker, Amanda M., ST
  Schauer, Laurie, ST
  Schmidt, Lonna J., ST

Central Valley Health District dba Central Valley Family Pla
122 2nd Street NW
(701) 252-8130

- Nurse Practitioner
  Dardis, Patricia J., FNP
  Mello, Bethany J., CNP

Essentia Health Jamestown Clinic
2430 20th St SW
(701) 253-5300

- Audiology
  Almer, Marin A., AUD
  Frisk (Movchan), Cari L., AUD
- Certified Diabetic Educator
  Viger, Karen M., CDE
- Home Medical Equipment
  Essentia Health Jamestown/DME
- Licensed Registered Dietitian
  Musgrave, Larissa A., LRD
- Nurse Midwives
  Howell, Christa L., CNM
- Nurse Practitioner
  Bergs, Laura M., CNP
  Boeddeker, Spring A., FNP
  Busch, Tania, CNP
  French Baker, Karla, FNP
  Strobel, Amber D., FNP
  Wojcik, Susan E., CNP
- Physician Assistant
  Hoffman, Leah, PA
  Huber, Amanda, PA
  Larson, Bruce D., PA
- Psychology
  Hauge, Gregory A., PHD

Fuher, Jessie, LPCC
619 8th Ave SE
(701) 252-9838

- Licensed Professional Clinical Counselor
  Fuher, Jessie K., LPCC

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING ANCILLARY PROVIDERS

Jamestown Counseling Center
300 2nd Ave NE Ste 215
(701) 952-7400

- Licensed Professional Clinical Counselor
  Lipetzky, Jennifer L., LPCC

Jamestown Regional Medical Center
2422 20th St SW
(701) 252-1050

- Physician Assistant
  Dugan, Angela, PA
  Gross, Vantreia M., PA

Jamestown Regional Medical Center /ER Physicians
2422 20th St SW
(701) 252-1050

- Audiology
  Matthiesen, Susan, MS
- Licensed Registered Dietitian
  Johnston, Brittany A., LRD

Jamestown Regional Medical Center Jamestown Hospital
2422 20th St SW
(701) 252-1050

- Certified Registered Nurse Anesthetist
  Andruski, Heidi L., CRNA
  Block, Teresa, CRNA
  Ellingson, Lee A., CRNA
  Errett, Bruce I., CRNA
  Metzger, James M., CRNA
  Moser, Marco, CRNA
  Peterson, Renee P., CRNA
  Schott, Andrew L., CRNA

Life Seasons Counseling, PLLC
302 Second Ave SE
(701) 678-4800

- Licensed Professional Clinical Counselor
  Elhard, Deborah J., LPCC

Matthys, Gary A., MD, Plc
904 5th Ave NE
(701) 241-9300

- Physician Assistant
  McDonald, Sean D., PA

Prairie Counseling
3952 Hwy 281 SE
(701) 252-8939

- Licensed Addiction Counselor-Chemical Dependency
  Wicks, Kerry W., LAC
- Licensed Professional Clinical Counselor
  Wicks, Kerry W., LPCC

Precision Diagnostic Services, Inc
2422 20 St SW
(701) 234-9667

- Independent Laboratory
  Precision Diagonstic Services Inc

Sanford Health 2nd Ave Clinic
300 2nd Ave NE
(701) 251-6000

- Audiology
  Schauer, Douglas D., AUD
- Nurse Practitioner
  Beach, Sueellen T., FNP
  Falk, Kara A., FNP
  Kreiter, Candace R., FNP
  Nygaard, Jessica R., FNP
  Schneider, Chelsey J., FNP
  Wiles, Amanda, CNP
- Physical Therapy
  Sorenson, Becky J., PT
- Physician Assistant
  Murphy, Bertha, PA
- Psychology
  Collins, John, PHD

Sanford Health Hearing Center
300 2nd Ave NE
(701) 252-4100

- Audiology
  Arneson-Thilmony, Debra J., AUD
  Boutilier, Amanda D., AUD
  Mann, Krystal L., AUD
  Mattheis Anderson, Amy M., AUD
  Ness, Brady J., AUD
- Home Medical Equipment
  Sanford Health Hearing Center
- Physician Assistant
  Hennessy, Jill M., PA

Sanford Health Jamestown Clinic
904 5th Ave NE
(701) 253-4000

- Certified Diabetic Educator
  Getz, Janel A., CDE
  Hager, Wendy L., CDE
- Licensed Registered Dietitian
  Erickson, Gracia, LRD
  Krueger, Maren A., LRD
- Nurse Practitioner
  Beach, Sueellen T., FNP
  Falk, Kara A., FNP
  Levee, Linda C., CNP
  Nygaard, Jessica R., FNP
  Schneider, Chelsey J., FNP
  Wiles, Amanda, CNP
- Physical Therapy
  Burgess, Jacy L., PT
  Burgess, Michel T., PT
- Physician Assistant
  Murphy, Bertha, PA
  Walter, Patrick, PA
- Psychology
  Collins, John, PHD
  Wilson, Joel R., PHD

Sanford Health Jamestown Clinic
904 5th Ave NE
(701) 253-4000

- Licensed Registered Dietitian
  Krueger, Maren A., LRD

Sanford Healthcare Accessories Jamestown
1023 10th St SE
(701) 251-1331

- Home Infusion
  Sanford Healthcare Accessories Jamestown
- Home Medical Equipment
  Sanford Healthcare Accessories Jamestown

South Central Human Service Center
520 3rd St NW
(701) 253-6300

- Clinical Nurse Specialist
  Moos, Patricia J., CNS

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING ANCILLARY PROVIDERS

North Dakota (cont.)
Jamestown (cont.)

South Central Human Service Center (cont.)
- Licensed Addiction Counselor-Chemical Dependency
  Brown, Bradley T., LAC
  Cudmore Kramer, Shawn, LAC
  Hallsten, Lindsey A., LAC
  Hunt, Geoffrey A., LAC
  Marsh, Billy J., LAC
  Motter, Elsie A., LAC
  Selle, Brooke J., LAC
  Woodard, Eric T., LAC
- Licensed Professional Clinical Counselor
  Listul, David, LPCC
  Morton, Jennifer, LPCC
  Schagunn Lere, Cara L., LPCC
- Nurse Practitioner
  Dardis, Patricia J., FNP
  Laxdal, Sharon A., CNP
- Psychology
  Coombs, Lincoln D., PHD
  Cramer, Daniel P., PHD
  Hunt, Stacey L., PSYD
  Lepeltier, Marie, PHD
  Nitschke, Jennifer D., PSYD

T and K Speech Language Services
300 2nd Ave NE
Ste 215a
(701) 252-6066
- Speech Therapy
  Carroll, Tristy L., ST
  Lorenz, Kristy L., ST

The Medicine Shoppe
703 1st Ave S
(701) 252-3002
- Home Medical Equipment
  The Medicine Shoppe

White Drug #15
320 10 St SE
(701) 252-5980
- Home Medical Equipment
  White Drug #15

North Dakota (cont.)
Jamestown (cont.)

White Drug #45
310 1st Ave S
(701) 251-1432
- Home Medical Equipment
  White Drug #45

White Drug #73
213 1st Ave N
(701) 252-3181
- Home Medical Equipment
  White Drug #73

Kenmare

Kenmare Health Center
307 1st Ave NW
(701) 385-4283
- Nurse Practitioner
  Hochhausen, Heidi, FNP
  Lautt, Heather J., FNP
  Olson, Jody G., FNP
  Simmons, Sheila, CNP
  Stanley, Ruth A., FNP
- Physical Therapy
  Pabian, Jackie L., PT

Kenmare Rural Mental Health Consortium
317 1st Ave NW
(701) 385-4344
- Nurse Practitioner
  Weathers, Vickie K., CNP

Killdeer

Killdeer Pharmacy
400 Central Ave S
(701) 764-5093
- Home Medical Equipment
  Killdeer Pharmacy

St Josephs Hospital/Killdeer Clinic
150 Central Ave N
(701) 764-5822
- Nurse Practitioner
  Jepson, Lori A., CNP
  Medford, Jessica L., FNP

North Dakota (cont.)
Kulm

Wishek Rural Health Clinic/Kulm
4 First Ave SE
(701) 647-2345
- Nurse Practitioner
  Benson, Paulette, FNP
  Ketterling, Marcia R., FNP
- Physician Assistant
  Hauff, Rosemary, PA
  Kosiak, Maureen A., PA
  Rau, Kay M., PA

Lakota

Lakota Drug
117 Main St
(701) 247-2781
- Home Medical Equipment
  Lakota Drug & Gift

Lamoure

Apex Physical Therapy and Wellness Center, PC
203 7th St SE Ste 2
(701) 883-5611
- Physical Therapy
  Ihry Hodem, Kameron J., PT

Lamoure Drug Store
100 1st Ave SW
(701) 883-5339
- Home Medical Equipment
  Lamoure Drug Store, Inc

Sanford Health Lamoure Clinic
100 1st Ave SW Ste 2
(701) 883-5048
- Licensed Registered Dietitian
  Erlandson, Barbara H., LRD
- Nurse Practitioner
  Gabriel, James, FNP
  Kaiser, Karen A., CNP
  Long, Lillian, FNP
- Physical Therapy
  Lorenz, Ryan R., PT
  Mattson, Heather, PT
- Physician Assistant
  Hack, Vicki L., PA
  Hendricks, Larry A., PA
  Reich, Brenda R., PA
  Siedschlag, Kathleen L., PA

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING ANCILLARY PROVIDERS

North Dakota (cont.)
Lamoure (cont.)

Thielges Therapy, Inc
119 Main St SE Ste A
(701) 277-7950

- Occupational Therapy
  Young, Shannon, OT
- Physical Therapy
  Anderson, Jason, PT
  Joyce, Jonah D., PT
  Thielges, Toby L., PT
- Physical/Occupational Therapist
  Young, Shannon, OT

Langdon

Blooming Prairie Assessment & Therapy Center PC
721 11 Ave
(701) 662-8255

- Psychology
  Kenney, Sara K., PSYD
  Normandin, Sherman, PHD

Cavalier County Memorial Hospital
909 2nd St
(701) 256-6120

- Certified Diabetic Educator
  Swanson, Brenna J., CDE
- Certified Registered Nurse Anesthetist
  Myers, Michael R., CRNA
  Shefland, Raymond C., CRNA
  Trontvet, Kent A., CRNA
- Licensed Registered Dietitian
  Swanson, Brenna J., LRD
- Nurse Practitioner
  Barlow, Steven L., FNP
  Sillers, Elizabeth M., CNP
  Skaar, Danielle, FNP
  Witzel, Gwen L., CNP
- Physical Therapy
  Badding, Sarah J., PT
  Kartes, Joan M., PT
- Physician Assistant
  Adams, Jeffrey S., PA

CCMH Clinic
901 2nd St
(701) 256-6120

- Nurse Practitioner
  Barlow, Steven L., FNP
  Sillers, Elizabeth M., CNP
  Skaar, Danielle, FNP

North Dakota (cont.)
Langdon (cont.)

CCMH Clinic (cont.)

- Nurse Practitioner (continued)
  Witzel, Gwen L., CNP
- Physician Assistant
  Adams, Jeffrey S., PA

Langdon Community Drug
805 3rd St
(701) 256-3330

- Home Medical Equipment
  Langdon Community Drug

Larimore

Larimore Drug & Gift
203 Towner Ave
(701) 343-2461

- Home Medical Equipment
  Larimore Drug & Gift

Valley Community Health Center Larimore
607 Towner Ave
(701) 343-6418

- Nurse Midwives
  Shogren, Maridee D., CNM
- Nurse Practitioner
  Harsell, Christine, CNP
  Nuelle, Bethann M., FNP
  Solberg, Roberta, FNP
  Vigen, Rebecca A., CNP

Lidgerwood

Sanford Health Lidgerwood Clinic
21 Wiley Ave S
(701) 538-4189

- Nurse Practitioner
  Gabriel, James, FNP
- Physical Therapy
  Lorenz, Ryan R., PT
  Mattson, Heather, PT
- Physician Assistant
  Buchholz, Brent M., PA
  Hendricks, Larry A., PA
  Pfeifer, Loretta V., PA
  Reich, Brenda R., PA

North Dakota (cont.)
Lignite

Lignite Clinic
115 Main St
(701) 933-2220

- Nurse Practitioner
  Warren, Ginger P., FNP

Linton

Linton Hospital
518 N Broadway
(701) 254-4511

- Certified Registered Nurse Anesthetist
  Mettler, Daniel W., CRNA

Linton Medical Center
511 Elm Ave
(701) 254-4531

- Licensed Registered Dietitian
  Imdieke, Catherine B., LRD
- Nurse Practitioner
  Grunefelder, Jacqueline M., FNP
  Moch, Paula M., FNP
- Physician Assistant
  Biel, Ardalia, PA
  Schatz, Alice, PA

Linton Medical Center
511 Elm Ave
(701) 254-4531

- Nurse Practitioner
  Grunefelder, Jacqueline M., FNP
- Physician Assistant
  Biel, Ardalia, PA
  Schatz, Alice, PA

Linton Medical Center
511 Elm Ave
(701) 254-4531

- Nurse Practitioner
  Grunefelder, Jacqueline M., FNP
- Physician Assistant
  Biel, Ardalia, PA
  Schatz, Alice, PA

White Drug
121 N Broadway
(701) 254-5432

- Home Medical Equipment
  White Drug #71

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING ANCILLARY PROVIDERS

North Dakota (cont.)
Lisbon

Essentia Health Lisbon Clinic
819 Main St
(701) 683-4134

- Certified Diabetic Educator
  Viger, Karen M., CDE
- Licensed Registered Dietitian
  Musgrave, Larissa A., LRD
  Rather, Sandra J., LRD
- Nurse Midwives
  Howell, Christa L., CNM
- Nurse Practitioner
  Anderson, Elisha D., FNP
- Physician Assistant
  Larson, Bruce D., PA

Family Medical Clinic, PC
10 9th Ave E
(701) 683-4711

- Nurse Practitioner
  Kelsen, Meredith K., CNP
  Pfaff, Kelli, CNP
- Physician Assistant
  Tanner, Katie L., PA
  Walton, Stacey M., PA

Lisbon Area Health Service-ER
905 Main St
(701) 683-6400

- Nurse Practitioner
  Kelsen, Meredith K., CNP
- Physician Assistant
  Larson, Bruce D., PA
  Tanner, Katie L., PA
  Walton, Stacey M., PA

Lisbon Area Health Services
905 Main St
(701) 683-6400

- Certified Registered Nurse Anesthetist
  Bakke, Amy J., CRNA
  Genereux, Heidi E., CRNA
  Kremer, Randall L., CRNA
  Splichal, Robert J., CRNA
- Licensed Registered Dietitian
  Erlandson, Barbara H., LRD
- Occupational Therapy
  Aberle, Carmen, OT
  Shearer, Treena, OT

North Dakota (cont.)
Lisbon (cont.)

Lisbon Area Health Services (cont.)

- Physical/Occupational Therapist
  Aberle, Carmen, OT
  Shearer, Treena, OT

Lisbon Area Health Services
905 Main St
(701) 683-6400

- Nurse Practitioner
  Jacobson, Kevin S., FNP

Sanford Health Lisbon Clinic
102 10th Ave W
(701) 683-2214

- Nurse Practitioner
  Gabriel, James, FNP
  Long, Lillian, FNP
- Physician Assistant
  Hendricks, Larry A., PA
  Reich, Brenda R., PA
  Siedschlag, Kathleen L., PA

Southeast Dakota Pharmacies, Inc. dba Sheyenne Valley Pharma
407 Main St
(701) 683-5282

- Home Medical Equipment
  Southeast Dakota Pharmacies, Inc.

White Drug
404 Main St
(701) 683-4691

- Home Medical Equipment
  White Drug #72

Maddock

Heart of America Johnson Clinic Maddock
301 Roosevelt Ave
(701) 438-2555

- Nurse Practitioner
  Mickelson, Barbara J., CNP
  Pagel-Trana- Duttenhef, Bobbie M., CNP
  Stahl, Andrea L., FNP
  Townsend, Cammy K., FNP
- Physician Assistant
  Hager, Dustin T., PA
  Weick, Keri L., PA

North Dakota (cont.)
Maddock (cont.)

White Drug #57
108 Central Ave
(701) 438-2567

- Home Medical Equipment
  White Drug #57

Mandan

Dakota Physical Therapy, PC
2004 Twin City Dr
(701) 667-0745

- Physical Therapy
  Bergan, April, PT
  Bergan, Chad M., PT
  Gietzen, Chris, PT

Dsj Enterprises LLC dba Aim Physical Therapy Clinic
101 Collins Ave Ste A
(701) 667-8778

- Physical Therapy
  Churchill, Stephen P., PT
  Fischer, Jonathan J., PT

Landsiedel, PLLC
1302 1st St NE
(701) 220-0479

- Nurse Practitioner
  Landsiedel, Julie, FNP

Prairie Assisted Living Services, LLC
2817 Waters Edge Lane SE
(701) 751-1307

- Nurse Practitioner
  Hogue-Kinahan, Janice K., FNP
  Rising, Cheryl D., FNP

Sanford East Mandan Clinic
102 Mandan Ave
(701) 667-5000

- Nurse Practitioner
  Nordmeyer, Courtney L., CNP

St Alexius Mandan Clinic North
2500 Sunset Drive NW
(701) 667-4600

- Nurse Practitioner
  Toman, Jean A., FNP
- Physician Assistant
  Renner, Cindy M., PA

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING ANCILLARY PROVIDERS

North Dakota (cont.)
Mandan (cont.)

The Medicine Shoppe
116 2 Ave NW
(701) 663-1151

- Home Medical Equipment
  Lbg Pharmacy dba The Medicine Shoppe

Thrifty White Drug #43
2600 Overlook Lane NW
(763) 513-4300

- Home Medical Equipment
  Thrifty White Drug #43

University Associates Sports & Orthopedic Specialists
101 Collins Ave Ste B
(701) 667-8700

- Physical Therapy
  Schulte, Robert A., PT

Zenker Physical Therapy
101 Collins Ave Ste B
(701) 667-8778

- Physical Therapy
  Zenker, Teejay, PT

Mayville

Sanford Mayville
600 1st St SE
(701) 786-4500

- Nurse Practitioner
  Unterseher, Jeanne A., CNP
- Physician Assistant
  Bjore, Zachery, PA
  Hinkle, Stephanie, PA

Sanford Mayville
600 1st Street SE
(701) 786-4500

- Nurse Practitioner
  Boeddeker, Spring A., FNP
  Gustafson, Sarah, FNP
  Kozojed, Mia, FNP
  Unterseher, Jeanne A., CNP
- Physician Assistant
  Bjore, Zachery, PA
  Braun, Lisa, PA
  Hinkle, Stephanie, PA
  Owens, Ann, PA
- Psychiatric Nurse
  Cameron, Kathryn M., CNS

North Dakota (cont.)
Mayville (cont.)

Sanford Medical Center Mayville
42 6th Ave SE
(701) 788-4437

- Licensed Registered Dietitian
  Willyard, Susan R., LRD

McClusky

Northland Community Health Center- McClusky
122 2nd St E
(701) 363-2296

- Nurse Practitioner
  Busch, Cassie F., CNP
  Goven, Jill R., CNP
  Green, Alain M., FNP
  Volk, Robert, FNP
- Physician Assistant
  Bartow, Shelley M., PA
  Jensen, Brian, PA
  Malzer, Christine M., PA

Washburn Family Clinic - McClusky
122 2 St E
(701) 363-2296

- Physical Therapy
  Hahn, Jason R., PT

McVille

Nelson County Health System Clinic
108 N Main St
(701) 322-4347

- Certified Diabetic Educator
  Getz, Janel A., CDE
- Licensed Registered Dietitian
  Getz, Janel A., LRD
- Nurse Practitioner
  Kelly, Darlene C., CNP
  Middleton, Debra L., FNP

Milnor

St Francis Healthcare Campus dba Milnor Clinic
401 Main St
(701) 427-5317

- Nurse Practitioner
  Myklebust, Kimberley D., FNP
  Rick, Brenda M., FNP

North Dakota (cont.)
Minot

April Wilson-Warren Npc,PLLC
315 Main St S Ste 301
(701) 838-1558

- Nurse Practitioner
  Wilson, April E., FNP

Berdahl, Linda, MS, LAC, Sap dba Cornerstone Addiction Servi
1705 4th Ave NW
(701) 839-0474

- Licensed Addiction Counselor-Chemical Dependency
  Berdahl, Linda A., LAC

Bob Hayes Addiction Services
1809 S Broadway Ste G
(701) 838-1422

- Licensed Addiction Counselor-Chemical Dependency
  Hayes, Bob M., LAC

Center For Family Medicine/Minot
1201 11th Ave SW
(701) 858-6700

- Licensed Registered Dietitian
  Schmidt, Megan C., LRD
- Nurse Practitioner
  Braasch, Terrilyn M., FNP
- Physician Assistant
  Kitzman, Marilyn A., PA
- Psychology
  Rickert, Julie A., PHD

Center For Mind & Body Wellness
1015 S Broadway Ste 37
(701) 852-3550

- Psychiatric Nurse
  Johnson, Deborah K., CNS

Clark, Thomas, PhD
2116 4th Ave NW
(701) 838-2442

- Psychology
  Clark, Thomas R., PHD

Communication Disorders Clinic
500 University Ave W
(701) 858-3030

- Audiology
  Froelich, Thomas M., MS

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING ANCILLARY PROVIDERS

Communication Disorders Clinic (cont.)
- Speech Therapy
  Beste Guldborg, Ann M., ST
  Gilson, Cheryl B., ST
  Hagen, Nadine, ST
  Harmon, Leisa H., ST
  Herzig, Melissa G., ST
  Holt, Erin M., ST
  Magnus, Lesley C., ST
  Roteliuk, Lisa M., ST
  Schroeder, Orlene L., ST
  Sorenson, Tricia L., ST

Dakota Boys Ranch
6301 19th Ave NW
(701) 839-7888
- Licensed Addiction Counselor-Chemical Dependency
  Waind, Melissa, LAC
  Wendt, Jamie L., LAC
- Licensed Professional Clinical Counselor
  Simonson, Boni M., LPCC
  Vetter, Sara J., LPCC
- Psychology
  Willert Jr, Meryl G., PHD

Dakota Family Services
6301 19th Ave NW
(701) 837-6508
- Licensed Professional Clinical Counselor
  Simonson, Boni M., LPCC
- Nurse Practitioner
  Uleberg, Tammy L., FNP
- Occupational Therapy
  Willert, Shea, OT
- Psychology
  Willert Jr, Meryl G., PHD

Eaton, Timothy, PhD
1705 4th Ave NW
(701) 839-0474
- Psychology
  Eaton, Timothy T., PHD

Edwards, Robert B LPCC
304 Burdick Expy W
(701) 833-8907
- Licensed Professional Clinical Counselor
  Edwards, Robert B., LPCC

First Choice Physical Therapy
2700 8th St NW
(701) 839-4102
- Home Medical Equipment
  First Choice Physical Therapy
- Physical Therapy
  Argent, Reed J., PT
  Becker, Krista H., PT
  Glessing-Laskowski, Katie B., PT
  Kihle, Cynthia, PT
  Kjelshus, Meghan K., PT
  Lambrecht, Kayla R., PT
  Proia, Lindsey N., PT
  Rasmusson, Karen M., PT
  Smith, Eris W., PT

Hcr Manorcare Medical Services of Florida, LLC dba Hcp
600 S Main St
(800) 375-5495
- Nurse Practitioner
  Krein, Georgia R., FNP

Holt Speech and Language Services
711 36th St SW
(701) 838-0419
- Speech Therapy
  Holt, Erin M., ST

Keycare Medical
530 20th Ave SW
(701) 857-7370
- Home Medical Equipment
  Keycare Medical

Keycare Medical
400 Burdick Expy E
Ste E117
(701) 857-7425
- Home Medical Equipment
  Keycare Medical

Keycare Pharmacy
400 Burdick Expy E
Ste 201
(701) 857-7900
- Home Medical Equipment
  Keycare Pharmacy

Landsiedel, Andrea St
1712 13th Street NW
(701) 721-0468
- Speech Therapy
  Landsiedel, Andrea K., ST

Mayer, Allyson
1308 17th Ave NW
(701) 340-5414
- Speech Therapy
  Mayer, Allyson D., ST

Minot Center For Pediatric Therapy
315 Main St S Suite 104
(701) 837-9801
- Occupational Therapy
  Miller, Krisann M., OT
- Speech Therapy
  Geer, Kylee B., ST
  Hieb, Emily, ST

Minot Health Clinic
1418 S Broadway
Ste B
(701) 320-8293
- Nurse Practitioner
  Fennern, Trisha J., FNP

Miracle Ear
1425 24th Ave SW
(701) 852-1897
- Home Medical Equipment
  Miracle Ear

North Central Human Service Center
1015 S Broadway Ste 18
(701) 857-8500
- Licensed Addiction Counselor-Chemical Dependency
  Andersen, Jason L., LAC
  Berger, Stacey A., LAC
  Browne, Racia J., LAC
  Duchscherer, Dana L., LAC
  Faa, Nathan, LAC

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING ANCILLARY PROVIDERS

North Central Human Service Center (cont.)

- Licensed Addiction Counselor-Chemical Dependency (continued)
  Kidney, Brietta M., LAC
  Lider, Heather L., LAC
  Mock, Candis, LAC
  Nelson, Amy L., LAC
  Twogood, Amber A., LAC
- Licensed Professional Clinical Counselor
  Burke, Jean M., LPCC
  Gartner, Melissa M., LPCC
- Psychiatric Nurse
  Hanson, Leah A., PNU
  Walls, Pamela S., PNU
- Psychology
  Langelle, Charyle, PHD
  Shaleen, Lori A., PHD
  Slaughter, Stacy L., PSYD

Northland Community Health Center
1600 2nd Ave SW Ste 19
(701) 377-4758

- Nurse Practitioner
  Green, Alain M., FNP
- Physician Assistant
  Bartow, Shelley M., PA
  Malzer, Christine M., PA

Prairie Therapy
700 Harmony St NW
(701) 720-5355

- Occupational Therapy
  Drevecky, Kelly L., OT

Professional Hearing Services
1400 37th Ave SW
(701) 852-6565

- Audiology
  Larson, Andrea B., AUD
  Malazdrewicz, Edward J., AUD
  Tongen, John L., AUD
  Wells, Jessica C., AUD

Psychiatric Services, PC
601 18th Ave SE Ste 101
(701) 852-8798

- Psychiatric Nurse
  Zuleger, Zane N., CNS

North Dakota (cont.)
Minot (cont.)

Psychological Services, PC
600 22nd Ave NW
(701) 852-9113

- Psychology
  Podrygula, Stephan, PHD

Sanford Health Occupational Medicine Clinic
801 21st Avenue SE
(701) 839-5902

- Physical Therapy
  Becker, Erica M., PT
  Brousseau, Michael A., PT
  Hahn, Sondra M., PT
  Heaton, Mariah D., PT
  Hunt, Heather L., PT
  Judah, Grant E., PT
  Jurgens-Dinius, Nicholl, PT
  Skluzacek, Amanda R., PT
  Wetzel, Jeff, PT
- Physician Assistant
  Champa, Whitney L., PA
  Fridrich, Elizabeth F., PA
  Malzer, Christine M., PA
  Manglitz, Brianne, PA
  Schillo, Sherry K., PA
  Vearrier, Tracy L., PA
  Worrel, Leslie A., PA

Sanford Health Walk-In Clinic
801 21st Ave SE
(701) 838-3150

- Nurse Practitioner
  Ahmann, Jessica L., FNP
  Collins, Susan G., FNP
  Ebach, Connie M., CNP
  Rakowski, Jana, FNP
- Physician Assistant
  Amsbaugh, Nicole L., PA
  Bennett, Rebekah, PA
  Held, Debra E., PA
  Kosiak, Maureen A., PA
  Kristensen, Karlee J., PA
  Nicholson, Jaclyn C., PA
  Vearrier, Tracy L., PA

North Dakota (cont.)
Minot (cont.)

Sanford Healthcare Accessories Minot
116 1st St SW
(701) 852-4110

- Home Infusion
  Sanford Healthcare Accessories Minot
- Home Medical Equipment
  Sanford Healthcare Accessories Minot

St Alexius Clinic
2700 8th St NW
(701) 857-8000

- Nurse Practitioner
  Baker, Sarah M., FNP
  Harju, Renee K., CNP
  Kitzman, Annie J., FNP
  Wiedrich, Sara L., CNP
- Physician Assistant
  Renner, Cindy M., PA
  Wolff, Lori A., PA

The Bone & Joint Center, PC
1600 2nd Ave SW Ste 19
(701) 857-8000

- Nurse Practitioner
  Kittleson, Shannon L., CNP
- Physician Assistant
  Zachmeier-Babb, Amanda L., PA

The Village Family Service Center
20 1st St SW Ste 250
(701) 852-3328

- Licensed Professional Clinical Counselor
  Jandro, Joanne M., LPCC

Total Transformation Clinic
317 16th St NW
(701) 837-9900

- Nurse Midwives
  Raghib, Kerry J., CNM

Trinity Health dba Oral & Facial Surgery Center
307 5th Ave SE
(701) 857-5124

- Certified Registered Nurse Anesthetist
  Rist, Kari L., CRNA

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING ANCILLARY PROVIDERS

Trinity Health dba Trinity Riverside Campus
1900 8th Ave SE
(701) 857-5998

- Clinical Nurse Specialist
  Andreas, Kiley R., CNS
- Licensed Professional Clinical Counselor
  Frueh, Keri J., LPCC
  Gertz, Linda M., LPCC
- Nurse Practitioner
  Anderson, Tonya M., FNP
  Volk, Sheryl L., FNP
- Physician Assistant
  Amsbaugh, Nicole L., PA
- Psychology
  Anderson, Thora R., PHD
  Boseck, Justin J., PHD
  Guilbert, Shana D., PSYD
  McAllister, Della A., PHD
  Michels, Vicki J., PHD
  Mugge, Jessica R., PHD
  Townsend, Richard B., EDD
  Vanlith, Clinten D., PHD

Trinity Hospitals
1 Burdick Expressway W
(701) 857-5252

- Licensed Registered Dietitian
  Cole, Kayla, LRD
  Doucet, Cory L., LRD
  Fundingsland, Michelle J., LRD
  Horob, Sandra J., LRD
- Physical Therapy
  Proia, Lindsey N., PT

Trinity Hospitals
101 3rd Ave SW Ste 102
(701) 857-5286

- Occupational Therapy
  Burke, Lisa M., OT
  Butgereit, Krystal R., OT
  Hunt, Chelsey L., OT
  Kruse, Arnold (Gus) W., OT
  Sandstrom, Danielle N., OT
- Physical Therapy
  Bohan, Katelyn M., PT
  Gasmann, Nancy, PT
  Lambrecht, Kayla R., PT
  Pankratz, Amber M., PT
  Peterson, Katrina L., PT

Trinity Hospitals (cont.)

- Physical Therapy (continued)
  Riehl, Aundrea, PT
  Ruckheim, Beth J., PT
  Templer, Lucia T., PT
  Wedar, Lynwood N., PT
- Physical/Occupational Therapist
  Kruse, Arnold (Gus) W., OT
  Sandstrom, Danielle N., OT

Trinity Hospitals Pharmacy
1 Burdick Expressway W
(701) 857-5550

- Home Infusion
  Trinity Hospital Pharmacy

Trinity Medical Group
831 S Broadway
(701) 857-5703

- Nurse Midwives
  Berg, Gloria J., CNM
- Nurse Practitioner
  Maxson, Janet L., CNP
  Pearson, Pamela K., FNP
- Physician Assistant
  Strand, Ginger M., PA

Trinity Medical Group
407 3rd Street SE
(701) 857-2360

- Nurse Practitioner
  Brown, Roxann M., FNP
- Physician Assistant
  Noya, Joseph V., PA
- Psychology
  Boseck, Justin J., PHD

Trinity Medical Group
400 Burdick Expy E
(701) 857-7385

- Nurse Midwives
  Brooking, Shawn E., CNM
  Crowe, Kerena M., CNM
  Riordan, Erica R., CNM
- Nurse Practitioner
  Bender, Heidi A., FNP
  Brewster, Leah M., FNP
  Brown, Roxann M., FNP
  Burgardt, Katharyn A., FNP
  Eberle, Sally M., FNP
  Fennern, Trisha J., FNP

Trinity Medical Group (cont.)

- Nurse Practitioner (continued)
  Ler, Bonnie S., CNP
  Lesmann, Allison D., FNP
  Maxson, Janet L., CNP
  Pease, Carla M., CNP
  Rime, Hedi J., FNP
  Schiele, Hailey R., FNP
  Welch, Ann M., FNP
  Wright, Sharon A., FNP
- Physician Assistant
  Dockter, Lori A., PA
  Fitzpatrick, Demaris A., PA

Trinity Medical Group
101 3rd Ave SW
(701) 857-5986

- Audiology
  Maxson, Jerrica L., AUD
  Nechodom, Tricia M., AUD
- Nurse Practitioner
  Lesmann, Allison D., FNP
  Striha, Desiree A., FNP
- Physician Assistant
  Evert, Seth G., PA
  Noya, Joseph V., PA
  Verhasselt, Donna E., PA

Trinity Medical Group
20 Burdick Expressway W
(701) 857-5877

- Nurse Practitioner
  Auch, Allison R., FNP
  Bender, Heidi A., FNP
  Jones, Durand S., FNP
  Wallner, Ashley N., FNP

Trinity Medical Group
1 Burdick Expy W
(701) 857-5000

- Certified Registered Nurse Anesthetist
  Hankel, Natalie F., CRNA
  Klabunde, Jenna B., CRNA
  Kruta, Clark J., CRNA
  Morey, Steven K., CRNA
- Nurse Midwives
  Crowe, Kerena M., CNM
- Nurse Practitioner
  Boyko, Heather L., FNP
  Dobrzelecki, Shawna L., FNP

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING ANCILLARY PROVIDERS

North Dakota (cont.)
Minot (cont.)

Trinity Medical Group (cont.)
- Nurse Practitioner (continued)
  Fricke, Jessica M., FNP
  Hillestad, Chantel K., FNP
  Jones, Durand S., FNP
  Leier, Kristy J., FNP
  Sadler, Mary A., FNP
  Storey, Sandra J., CNP
  Vondal, Lynette, FNP
  Wilson, April E., FNP
  Wright, Sharon A., FNP
- Physician Assistant
  Amsbaugh, Nicole L., PA
  Noya, Joseph V., PA
  Paige, Dick, PA
- Psychology
  Boseck, Justin J., PHD
  McAllister, Della A., PHD
  Townsend, Richard B., EDD
  Vanlith, Clinten D., PHD

Trinity Medical Group Anesthesiology
1 Burdick Expressway W
(701) 857-5124

- Certified Registered Nurse Anesthetist
  Berentson, Kari, CRNA
  Bossert, Melanie A., CRNA
  Bouma, Kelly M., CRNA
  Braaflat, Tyler D., CRNA
  Brandt, Kraig W., CRNA
  Brown, Terri R., CRNA
  Cederstrom, Luann, CRNA
  Daigle Bjerke, Adelle A., CRNA
  Desautel, David A., CRNA
  Heilman, Rebecca A., CRNA
  Henjum, Jennifer K., CRNA
  Howe, Melinda A., CRNA
  Huber-Manstrom, Charlotte, CRNA
  Kelly, Karen J., CRNA
  Keniston, Dierdre V., CRNA
  Kleespie, Myca L., CRNA
  Maund, Michelle, CRNA
  Nelson, Christine M., CRNA
  Peterson, Renee P., CRNA
  Potter, Lonna M., CRNA
  Rist, Kari L., CRNA
  Simon, Jeffrey J., CRNA
  Stock, Terry L., CRNA

North Dakota (cont.)
Minot (cont.)

Trinity Medical Group Anesthesiology (cont.)
- Certified Registered Nurse Anesthetist (continued)
  Underdahl, Nicole A., CRNA
  Vaughn, Rita K., CRNA
  Vibeto, Mark C., CRNA
  Wetsch, Tyler, CRNA
  Wilson, Roni M., CRNA
  Woodland, Michael J., CRNA
  Zahn, Denise M., CRNA

Trinity Medical Group South Ridge
1500 24th Ave SW
(701) 857-5343

- Nurse Practitioner
  Rasmussen, Nora L., CNP
- Physician Assistant
  Forsberg, Jerane A., PA

Walls,Pamela,APRN,BC
24 N Main St Ste J
(701) 721-5143

- Psychiatric Nurse
  Walls, Pamela S., PNU

Weiss, Faye, RN, CNS, PC
234 14th Ave SE
Ste 317
(701) 833-8158

- Psychiatric Nurse
  Weiss, Faye M., CNS

White Drug #17
1015 S Broadway
(701) 852-4181

- Home Medical Equipment
  White Drug #17

White Drug #40
2211 16th St NW Ste B
(701) 852-0388

- Home Medical Equipment
  White Drug #40

Mohall

Good Samaritan Society - Mohall
602 Main St E
(701) 756-6831

- Occupational Therapy
  Drevecky, Kelly L., OT

North Dakota (cont.)
Mohall (cont.)

Good Samaritan Society - Mohall (cont.)
- Physical/Occupational Therapist
  Drevecky, Kelly L., OT
- Speech Therapy
  Duerre, Rachelle B., ST

Rural Mental Health Consortium
602 Main St E
(701) 857-2199

- Nurse Practitioner
  Weathers, Vickie K., CNP
- Psychiatric Nurse
  Sartain, Cheryl A., PNU

Trinity Community Clinic Mohall Rbm
504 1st St SE
(701) 756-6841

- Nurse Practitioner
  Stanley, Ruth A., FNP
- Physician Assistant
  Paige, Dick, PA

White Drug #62
115 Main St
(763) 513-4301

- Home Medical Equipment
  White Drug #62

Mott

Mott Good Samaritan Nursing Home
401 Millionaire Ave
(701) 824-3222

- Physical Therapy
  Pagel, Erika, PT
  Thompson, Alex, PT

West River Health Services
420 Pacific Ave
(701) 824-2391

- Licensed Professional Clinical Counselor
  Jorgenson, Tara L., LPCC
- Nurse Practitioner
  Hill, Lori A., CNP
  Reiten, Elizabeth, FNP
- Physician Assistant
  Bergquist, Rose B., PA
  Bondell, Sheila, PA
  Cooper, Brian K., PA

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING ANCILLARY PROVIDERS

North Dakota (cont.)
Mott (cont.)

West River Health Services (cont.)
- Physician Assistant (continued)
  Mattis, Billie J., PA

Napoleon

Napoleon Drug Inc
214 Main Ave
(701) 754-2203
- Pharmacy
  Napoleon Drug Inc

Wishek Rural Health Clinic/Napoleon
420 Main Ave
(701) 754-2322
- Nurse Practitioner
  Benson, Paulette, FNP
  Ketterling, Marcia R., FNP
- Physician Assistant
  Hauff, Rosemary, PA
  Kosiak, Maureen A., PA
  Rau, Kay M., PA

New England

New England Drug
713 E Main
(701) 579-4276
- Pharmacy
  New England Drug

West River Health Services
820 2nd Ave W
(701) 579-4507
- Licensed Professional Clinical Counselor
  Jorgenson, Tara L., LPCC
- Nurse Practitioner
  Hill, Lori A., CNP
- Physician Assistant
  Bergquist, Rose B., PA
  Cooper, Brian K., PA
  Mattis, Billie J., PA
  Nielsen, Teresa H., PA

North Dakota (cont.)
New Rockford

Blooming Prairie Assessment & Therapy Center
24 8th St N
(701) 662-8255
- Psychology
  Kenney, Sara K., PSYD
  Normandin, Sherman, PHD

Community Health Clinic
118 1st St S
(701) 652-2515
- Physician Assistant
  Hoff, Bradley D., PA
  Hoff, Mary L., PA
  Nelson, Jacqueline D., PA

New Salem

Elm Crest Manor
100 Elm Avenue
(701) 843-8494
- Occupational Therapy
  Fettig, Lindsey R., OT
- Physical Therapy
  Schanandore, Amy, PT
- Speech Therapy
  Stockert, Misty J., ST

New Town

Trinity Community Clinic New Town
604 1st Street North
(701) 627-2990
- Nurse Practitioner
  Trulson, Jill M., CNP
- Physician Assistant
  Ulven, Cheryl D., PA

Northwood

Northwood Deaconess Health Center
4 N Park St
(701) 587-6060
- Licensed Registered Dietitian
  Becker, Lisa M., LRD
- Nurse Practitioner
  Ness, Condetta H., CNP
  Shannon, Heidi J., FNP
  Twete, Brian C., CNP
- Physical Therapy
  Snyder, Catherine L., PT

North Dakota (cont.)
Northwood (cont.)

Valley Community Health Centers
301 Hwy 15
(701) 587-6000
- Licensed Registered Dietitian
  Getz, Janel A., LRD
- Nurse Midwives
  Shogren, Maridee D., CNM
- Nurse Practitioner
  Nuelle, Bethann M., FNP
  Solberg, Roberta, FNP
  Vigen, Rebecca A., CNP

Oakes

James River Counseling Services PC
412 Main Ave
(701) 742-1513
- Licensed Professional Clinical Counselor
  Meehl, Stacey B., LPCC

Oakes Community Hospital
1200 N 7th St
(701) 742-3291
- Certified Diabetic Educator
  Erlandson, Barbara H., CDE
- Certified Registered Nurse Anesthetist
  Bakke, Amy J., CRNA
- Licensed Registered Dietitian
  Erlandson, Barbara H., LRD
- Nurse Practitioner
  Myklebust, Kimberley D., FNP
- Physical Therapy
  Lagodinski, Ryan J., PT
  Patzlaff, Amber M., PT
- Physician Assistant
  Chapel, Dean A., PA
  Hedlund, Jeffrey S., PA

Sanford Health Oakes Clinic
420 S 7th St
(701) 742-3267
- Licensed Registered Dietitian
  Erlandson, Barbara H., LRD
- Nurse Practitioner
  Gabriel, James, FNP
  Kaiser, Karen A., CNP
  Long, Lillian, FNP

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING ANCILLARY PROVIDERS

North Dakota (cont.)
Oakes (cont.)

Sanford Health Oakes Clinic (cont.)
- Physical Therapy
  Lorenz, Ryan R., PT
  Mattson, Heather, PT
- Physician Assistant
  Buchholz, Brent M., PA
  Gulsvig, Nancy J., PA
  Hack, Vicki L., PA
  Hendricks, Larry A., PA
  Reich, Brenda R., PA
  Siedschlag, Kathleen L., PA

Tara's Thrifty White LLC
610 Main Avenue
(701) 742-3824
- Home Medical Equipment
  Tara's Thrifty White

Park River

Achieve Therapy, LLC
424 Briggs Ave
(701) 284-6707
- Physical Therapy
  Bolek, Megan E., PT
  Chine, Nicole J., PT
  Walsh, Heather A., PT
  Wilcox, Lacey J., PT

First Care Health Center
115 Vivian St
(701) 284-7500
- Certified Registered Nurse Anesthetist
  Myers, Michael R., CRNA
  Trontvet, Kent A., CRNA
- Licensed Registered Dietitian
  Bata, Christina, LRD

First Care Health Center
115 Vivan St
(701) 284-7555
- Certified Registered Nurse Anesthetist
  Krueger, Curtis C., CRNA
  Shefland, Raymond C., CRNA
- Nurse Practitioner
  Pengilly, Paula L., FNP
- Physician Assistant
  Clemetson, Tamara J., PA
- Psychology
  Juntunen, Cindy L., PHD

North Dakota (cont.)
Park River (cont.)

Midgarden Family Clinic, PC
503 Park St W Suite B
(701) 284-6663
- Nurse Practitioner
  Pengilly, Paula L., FNP

Parshall

Parshall Health Center IHS
107 3rd Street SE
(701) 862-8220
- Nurse Practitioner
  Three Affiliated Tribes/Np

Raleigh

Prairie Learning Center
7785 St Gertrude Ave
(701) 597-3419
- Licensed Addiction Counselor-Chemical Dependency
  Anderson, Christy K., LAC

Richardton

Country Drug Store
116 North Ave E
(701) 974-3558
- Home Medical Equipment
  Country Drug Store

Richardton Health Center
215 3rd Ave W
(701) 974-3372
- Nurse Practitioner
  Hoerauf, Lynda B., FNP
  Schmidt, Rhonda, FNP
- Physician Assistant
  Emond, Sister Michael, PA

Rolette

Northland Community Health Center
401 2nd Ave
(701) 246-3391
- Nurse Practitioner
  Busch, Cassie F., CNP
  Goven, Jill R., FNP
  Green, Alain M., FNP
- Physician Assistant
  Bartow, Shelley M., PA
  Jensen, Brian, PA

North Dakota (cont.)
Rolette (cont.)

Northland Community Health Center (cont.)
- Physician Assistant (continued)
  Malzer, Christine M., PA

White Drug #58
208 Main Street
(701) 246-3600
- Home Medical Equipment
  White Drug #58

Rolla

Lake Region Hsc/Rolla Outreach
113 Main Ave E
(701) 665-2200
- Licensed Addiction Counselor-Chemical Dependency
  Bercier, Cynthia R., LAC
  Lamotte, Wanda J., LAC
  Longie, Glenn B., LAC
- Licensed Professional Clinical Counselor
  Allen-Halvorson, Natascha V., LPCC
  Baumgarn, Julie K., LPCC

Northland Community Health Center-Rolla
114 3rd St NE
(701) 477-3111
- Nurse Practitioner
  Busch, Cassie F., CNP
  Goven, Jill R., FNP
  Green, Alain M., FNP
- Physician Assistant
  Bartow, Shelley M., PA
  Jensen, Brian, PA
  Malzer, Christine M., PA
  McQueeney, Michael T., PA

Presentation Medical Center
213 2nd Ave NE
(701) 477-3161
- Certified Registered Nurse Anesthetist
  Cederstrom, Luann, CRNA
- Nurse Practitioner
  Benning, Kimberly, FNP
  Bucher, Benjamin, FNP
  Sharp, Jody R., FNP

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING ANCILLARY PROVIDERS

North Dakota (cont.)
Rolla (cont.)

Rolla Drug
117 Main St E
(701) 477-3174

- Home Medical Equipment
  Rolla Drug

Rural Mental Health Consortium
213 2nd Ave NE
(701) 857-2199

- Nurse Practitioner
  Weathers, Vickie K., CNP
- Psychiatric Nurse
  Sartain, Cheryl A., PNU

Rugby

Heart of America Clinic Pharmacy
800 S Main Ave
(701) 776-2531

- Home Medical Equipment
  Heart of America Clinic Pharmacy

Heart of America Johnson Clinic
800 3rd Ave SW
(701) 776-5235

- Nurse Practitioner
  Costner, David S., CNP
  Harder, Tammie J., CNP
  Herman, Jenna M., CNP
  Mickelson, Barbara J., CNP
  Pagel-Trana- Duttenhef, Bobbie M., CNP
  Stahl, Andrea L., FNP
  Townsend, Cammy K., FNP
- Physician Assistant
  Danielson, Gail L., PA
  Hager, Dustin T., PA
  Harder, Tammie J., PA
  Weick, Keri L., PA

Heart of America Medical Center
800 S Main Ave
(701) 776-5261

- Certified Registered Nurse Anesthetist
  Beare, Ronald J., CRNA
  Cannon, Sharon R., CRNA
  Cederstrom, Luann, CRNA
  Johnson, Amber, CRNA
- Home Medical Equipment
  Heart of America Medical Center

North Dakota (cont.)
Rugby (cont.)

Heart of America Medical Center (cont.)

- Licensed Registered Dietitian
  Brandt, Kathy J., LRD
- Nurse Practitioner
  Cooper, Thomas E., FNP
  Costner, David S., CNP
  Harder, Tammie J., CNP
  Herman, Jenna M., CNP
  Mickelson, Barbara J., CNP
  Pagel-Trana- Duttenhef, Bobbie M., CNP
  Pfenning, Stacey R., CNP
  Stahl, Andrea L., FNP
  Townsend, Cammy K., FNP
- Occupational Therapy
  Becker, Rachel L., OT
- Physical Therapy
  Backstrom, Jordan, PT
  Fragodt, Marie E., PT
- Physician Assistant
  Danielson, Gail L., PA
  Hager, Dustin T., PA
  Harder, Tammie J., PA
  Weick, Keri L., PA

Scranton

West River Health Services
211 Main Street S
(701) 275-6336

- Licensed Professional Clinical Counselor
  Jorgenson, Tara L., LPCC
- Nurse Practitioner
  Hill, Lori A., CNP
  Reiten, Elizabeth, FNP
- Physician Assistant
  Bergquist, Rose B., PA
  Bondell, Sheila, PA
  Cooper, Brian K., PA
  Mattis, Billie J., PA

Sentinel Butte

Home On The Range
16351 I 94
(701) 872-3745

- Licensed Addiction Counselor-Chemical Dependency
  Ebel, Jodine M., LAC

North Dakota (cont.)
Stanley

Dakota Drug Company
107 S Main St
(701) 628-2255

- Home Medical Equipment
  Dakota Drug Company of Stanley

Mountrail Bethel Home
615 6th St SE
(701) 628-2442

- Occupational Therapy
  Aufforth, Miranda M., OT
- Physical/Occupational Therapist
  Aufforth, Miranda M., OT

Mountrail County Medical Center
615 6th St SE
(701) 628-2505

- Certified Registered Nurse Anesthetist
  Oxner, William D., CRNA

Mountrail County Medical Clinic
615 6th St SE
(701) 628-2505

- Nurse Practitioner
  Nardacci, Tara M., FNP
  Wacker, Donna M., FNP
- Physician Assistant
  Effertz, Abbey, PA

Rural Mental Health Consortium
615 6th St SE
(701) 857-2199

- Nurse Practitioner
  Weathers, Vickie K., CNP
- Psychiatric Nurse
  Sartain, Cheryl A., PNU

Steele

Advanced Physical Therapy and Fitness, LLC
112 West Broadway
(701) 475-2911

- Physical Therapy
  Hieb, Marcus A., PT
  Hollar, Anthony C., PT

Dakota Physical Therapy, PC
214 4th Street NW
(701) 202-3280

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING ANCILLARY PROVIDERS

North Dakota (cont.)
Steele (cont.)

Dakota Physical Therapy, PC (cont.)
- Physical Therapy
  Bergan, April, PT
  Bergan, Chad M., PT
  Gietzen, Chris, PT

Kidder County Primary Health Corporation
110 West Broadway
(701) 475-2910
- Nurse Practitioner
  Rath, Mandy K., FNP

Steele Drug
101 W Broadway
(701) 475-2521
- Pharmacy
  Steele Drug

Tioga

Tioga Drug Inc
106 N Main
(701) 664-2116
- Home Medical Equipment
  Tioga Drug Inc

Tioga Medical Center
710 N Welo St
(701) 664-3368
- Nurse Practitioner
  Barlow, Steven L., FNP
  Carlson, Nancy R., FNP
  Royal, Natalie R., FNP
  Shellman, Laura M., FNP
- Occupational Therapy
  Keever, Andrea, OT
- Physician Assistant
  Adams, Jeffrey S., PA
  Coughlin, Corinne E., PA
  Joyce, Gail R., PA
  Moberg, Jeffrey A., PA

Tioga Medical Center Hospital
810 N Welo St
(701) 664-3305
- Certified Registered Nurse Anesthetist
  Oxner, William D., CRNA
- Licensed Registered Dietitian
  Bearce, Tammy R., LRD

North Dakota (cont.)
Tioga (cont.)

Tioga Medical Center Hospital
810 N Welo St
(701) 664-3305
- Home Medical Equipment
  Tioga Medical Center

Trenton

Trenton Community Clinic
331 4th Ave E
(701) 774-0461
- Licensed Addiction Counselor-Chemical Dependency
  Trenton Community Clinic/LAC
- Nurse Practitioner
  Trenton Community Clinic/Nup
- Physician Assistant
  Trenton Community Clinic/PA

Trenton Community Clinic HME
331 4th Ave E
(701) 774-0461
- Home Medical Equipment
  Trenton Community Clinic HME

Turtle Lake

Northland Community Health Center- Turtle Lake
416 Kundert St
(701) 448-9225
- Nurse Practitioner
  Busch, Cassie F., CNP
  Goven, Jill R., CNP
  Green, Alain M., FNP
  Pfenning, Stacey R., CNP
  Volk, Robert, FNP
- Physician Assistant
  Bartow, Shelley M., PA
  Jensen, Brian, PA
  Malzer, Christine M., PA

Turtle Lake Rexall Drug
218 Main St
(701) 448-2542
- Pharmacy
  Turtle Lake Rexall Drug

North Dakota (cont.)
Underwood

Underwood Clinic
87 Lincoln Ave
(701) 442-3148
- Nurse Practitioner
  Leidholm, Michele D., CNP
  Weisenburger, Kellie C., CNP

Valley City

Concept Dentistry PC
117 3rd St NW
(701) 845-2180
- Certified Registered Nurse Anesthetist
  Bulik, Robert E., CRNA

Essentia Health Valley City Clinic
132 4th Ave NE
(701) 845-8060
- Certified Diabetic Educator
  Viger, Karen M., CDE
- Licensed Registered Dietitian
  Musgrave, Larissa A., LRD
- Nurse Practitioner
  Anderson, Elisha D., FNP
  Johnson, Roxanne M., CNP
  Meyer, Lana J., FNP
- Physician Assistant
  Hoffman, Leah, PA
  Klabo, Mark, PA
  Larson, Bruce D., PA
- Psychology
  Hauge, Gregory A., PHD

Fuher Jessie, LPCC
570 Chautauqua Blvd
(701) 252-9838
- Licensed Professional Clinical Counselor
  Fuher, Jessie K., LPCC

Life Seasons Counseling, PLLC
570 Chautauqua Blvd
(701) 678-4800
- Licensed Professional Clinical Counselor
  Elhard, Deborah J., LPCC

Mercy Home Care Services
367 2nd St NW
(701) 845-6550

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING ANCILLARY PROVIDERS

North Dakota (cont.)
Valley City (cont.)

Mercy Home Care Services (cont.)
- Physical Therapy
  Ystaas, Matthew A., PT
- Speech Therapy
  Stockert, Misty J., ST

Mercy Hospital
570 Chautauqua Blvd
(701) 845-6400

- Certified Registered Nurse Anesthetist
  Bakke, Amy J., CRNA
  Honeyman, Ron L., CRNA
  Kruta, Clark J., CRNA
  Strasburg, Ryan G., CRNA
- Nurse Practitioner
  Ballard, Kevin D., CNP
  Bitz, Trent W., FNP
- Occupational Therapy
  Smith, Donna M., OT
- Physician Assistant
  Klabo, Mark, PA
  Konzak, Stacey L., PA
  Malzer, Christine M., PA
  Moberg, Jeffrey A., PA

Nucara Pharmacy #31
234 Central Ave N
(701) 845-2652

- Home Medical Equipment
  Nucara Pharmacy # 31

Pain Relief Center
136 2 Ave NE
(701) 840-0079

- Occupational Therapy
  Gabriel-Johnson, Janice K., OT

Sanford Health Valley City Clinic
520 Chautauqua Blvd
(701) 845-6000

- Licensed Registered Dietitian
  Buhr, Sharon E., LRD
- Nurse Practitioner
  Pfennig, Gregory, FNP
- Physician Assistant
  Anderson, Judy L., PA
  Bjore, Nicholas, PA
  Hendricks, Larry A., PA
  Lueck, Michelle A., PA
  Owens, Ann, PA

North Dakota (cont.)
Valley City (cont.)

Sanford Health Valley City Clinic (cont.)
- Psychology
  Wilson, Joel R., PHD

Sanford Health Valley City Hearing Center
1140 W Main St
(701) 845-4955

- Audiology
  Arneson-Thilmony, Debra J., AUD
  Boutilier, Amanda D., AUD
  Mann, Krystal L., AUD
  Mattheis Anderson, Amy M., AUD
  Ness, Brady J., AUD
  Schauer, Douglas D., AUD

White Drug #60
148 S Central Ave
(763) 513-4301

- Home Medical Equipment
  White Drug #60

Velva

Souris Valley Care Center
300 Main St S
(701) 338-2072

- Physical Therapy
  Rath, Jennifer, PT

Trinity Community Clinic
111 W 1st St
(701) 338-2066

- Nurse Practitioner
  Larsen, Kendra L., CNP
- Physician Assistant
  Fitzpatrick, Demaris A., PA

Velva Drug Co
16 N Main St
(701) 338-2911

- Pharmacy
  Velva Drug Co

Wahpeton

Corner Drug Store, Inc
619 Dakota Ave
(701) 642-6223

North Dakota (cont.)
Wahpeton (cont.)

Corner Drug Store, Inc (cont.)
- Home Medical Equipment
  Corner Drug Wahpeton

Essentia Health Wahpeton Clinic
275 11th St S
(701) 642-2000

- Audiology
  Almer, Marin A., AUD
- Certified Diabetic Educator
  Viger, Karen M., CDE
- Certified Registered Nurse Anesthetist
  Genereux, Heidi E., CRNA
  Honeyman, Ron L., CRNA
  Splichal, Robert J., CRNA
  Vaughn, Rita K., CRNA
- Home Medical Equipment
  Essentia Health Wahpeton/DME
- Licensed Registered Dietitian
  Rather, Sandra J., LRD
- Nurse Midwives
  Howell, Christa L., CNM
- Nurse Practitioner
  Anderson, Elisha D., FNP
  Boeddeker, Spring A., FNP
  Lies, Patricia A., CNP
  Wojcik, Susan E., CNP
- Occupational Therapy
  Crowe, Cheryl B., OT
  Enockson, Michelle I., OT
  Kiefer, Megan M., OT
  Wasemiller, Peggy J., OT
- Physical Therapy
  Brekke, Teri J., PT
  Schmidt, Nicole J., PT
- Physical/Occupational Therapist
  Crowe, Cheryl B., OT
  Wasemiller, Peggy J., OT
- Physician Assistant
  Balvitsch, Jason, PA
  Larson, Bruce D., PA
- Psychology
  Hauge, Gregory A., PHD

Lincare Inc
507 Dakota Ave
(701) 642-5375

- Home Medical Equipment
  Lincare Inc

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING ANCILLARY PROVIDERS

North Dakota (cont.)
Wahpeton (cont.)

Red River Anesthesia, PC
824 Richland St
(800) 922-5852

- Certified Registered Nurse Anesthetist
  Genereux, Heidi E., CRNA
  Splichal, Robert J., CRNA
  Vaughn, Rita K., CRNA

Richland County Family Planning
413 3rd Ave N
(701) 642-7735

- Nurse Practitioner
  Eckes, Audrey A., CNP
  Ellingson, Lori L., FNP

Sanford Health Wahpeton Clinic
332 2nd Ave N
(701) 642-7000

- Nurse Practitioner
  Berge, Cheri J., CNP
- Physical Therapy
  Amundson, Bruce T., PT
- Physician Assistant
  Braun, Lisa, PA
  Hegge, Erin C., PA
  Lueck, Michelle A., PA
- Psychology
  Geiselhart, Richard L., PHD
  Getz, Ariane M., PSYD

Sanford Health Wahpeton Clinic
332 2nd Ave N
(701) 642-7000

- Certified Diabetic Educator
  Klocke, Janet D., CDE
  Schaan, Peggy, CDE
- Licensed Registered Dietitian
  Meyer, Elizabeth Ann G., LRD
  Tehven, Kathy J., LRD

St Catherines Living Center
1307 7th St N
(701) 642-6667

- Physical Therapy
  Engen, Mary D., PT
  Heilman, Kristi R., PT
- Speech Therapy
  Peyton, Mary J., ST

North Dakota (cont.)
Wahpeton (cont.)

Swanson Counseling
315 11 St N Suite E
(701) 591-2003

- Licensed Professional Clinical Counselor
  Swanson, Cynthia, LPCC

Thrifty White Pharmacy #75
387 11th St S Ofc 2
(701) 642-2336

- Home Medical Equipment
  Thrifty White Pharmacy 75

Walhalla

Pembilier Nursing Center
500 Delano Ave
(701) 549-3310

- Occupational Therapy
  Schill, Megan, OT
- Physical Therapy
  McMillan, Becky S., PT

Speech Wellness Services, LLC
9715 129 Ave NE
(701) 549-3283

- Speech Therapy
  Heidler, Sharon L., ST

Walhalla Clinic
301 5th St
(701) 549-2710

- Nurse Practitioner
  Sillers, Elizabeth M., CNP
  Skaar, Danielle, FNP
  Witzel, Gwen L., CNP

Walhalla Prescription Shop, Inc
1102 Central Ave
(701) 549-2661

- Home Medical Equipment
  Walhalla Prescription Shop, Inc

Washburn

Jones Physical Therapy
1167 Border Lane Road
(701) 462-3389

- Physical Therapy
  Hager, Caitlyn N., PT
  Hochhalter, Mindy A., PT
  Jones, Elizabeth A., PT

North Dakota (cont.)
Washburn (cont.)

Washburn Clinic
1167 Border Lane Rd
(701) 462-3389

- Nurse Practitioner
  Leidholm, Michele D., CNP
  Weisenburger, Kellie C., CNP

Washburn Family Clinic
1177 Border Lane
(701) 462-3396

- Nurse Practitioner
  Busch, Cassie F., CNP
  Christianson, Jane, FNP
  Goven, Jill R., FNP
  Hofferber, Rick W., CNP
  Pfenning, Stacey R., CNP
  Schroeder, Dara, FNP
  Townsend, Cammy K., FNP
  Wacker, Donna M., FNP
  Wardner, Susan G., FNP
- Physical Therapy
  Hahn, Jason R., PT
- Physician Assistant
  Graeber, Luanna J., PA
  Malzer, Christine M., PA
  Vearrier, Tracy L., PA

Watford City

Anova Family Health Center Inc
301 12th St SE
(701) 842-6400

- Nurse Practitioner
  Haak, Cassie J., FNP
  Johnson, Vonnie J., FNP
  Pedersen, Anita A., FNP

McKenzie County Healthcare Systems Clinic
525 N Main St
(701) 842-3771

- Nurse Practitioner
  Hunter, Bart T., FNP
  Kostenko, Suzanne V., CNP
  Vetterkind, Kirsten, FNP

McKenzie County Healthcare Systems/Hospital
516 N Main St
(701) 842-3000

- Licensed Registered Dietitian
  Bearce, Tammy R., LRD

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING ANCILLARY PROVIDERS

North Dakota (cont.)
Watford City (cont.)

McKenzie County Healthcare Systems/Hospital (cont.)
- Nurse Practitioner
  Hunter, Bart T., FNP
  Kostenko, Suzanne V., CNP
  Vetterkind, Kirsten, FNP
- Physical Therapy
  Samuelson, Corey J., PT

West Fargo

Apex Physical Therapy and Wellness Center, PC
550 13 Ave E
(701) 364-2739
- Physical Therapy
  Buske, Allison K., PT
  Erstad, Brooke E., PT
  Ihry Hodem, Kameron J., PT
  Zachmann, Marley C., PT

At Home Physical Therapy PC dba Rehab 4 Life
1420 9th St E Ste 409
(701) 293-7294
- Occupational Therapy
  Costello, Kelly N., OT
- Physical Therapy
  Gieseke, Stephanie, PT

Beacon Behavioral Health Services & Training Center
102 West Beaton Dr #103
(701) 356-1276
- Psychology
  Cavett, Angela M., PHD
  Garaas, Jennifer M., PHD

Essentia Health West Fargo Clinic
1401 13th Ave E
(701) 364-5751
- Nurse Midwives
  Janke, Jennifer L., CNM
- Nurse Practitioner
  McKinnon, Dawn R., CNP
  Nelles, Rachel K., CNP
  Schultz, Joan M., CNP
- Occupational Therapy
  Boerboom, Sarah A., OT
  Crowe, Cheryl B., OT
  Enockson, Michelle I., OT
  Hager, Megan, OT
  Husar, Abby E., OT

North Dakota (cont.)
West Fargo (cont.)

Essentia Health West Fargo Clinic (cont.)
- Occupational Therapy (continued)
  Kiefer, Megan M., OT
  Knott, Christina M., OT
  McKibbin, Randon N., OT
  Mueller, Amy L., OT
  Wasemiller, Peggy J., OT
- Physical Therapy
  Ali, Sana, PT
  Barnhardt, Scott D., PT
  Bitz, James P., PT
  Brekke, Teri J., PT
  Garrahy, Shauna, PT
  Gauer, Chelsey N., PT
  Gunkelman, Ashley L., PT
  Halls, Ruth Ann, PT
  Isaak, Christine M., PT
  Meuwissen, Marissa N., PT
  Sauvageau, Katie M., PT
  Schmidt, Nicole J., PT
  Schwengler, Jason J., PT
  Sunde, Lizette, PT
- Physical/Occupational Therapist
  Boerboom, Sarah A., OT
  Crowe, Cheryl B., OT
  Enockson, Michelle I., OT
  Husar, Abby E., OT
  Mueller, Amy L., OT
  Wasemiller, Peggy J., OT
- Physician Assistant
  Larson, Bruce D., PA
  Olson-Fitzgerald, Heidi M., PA
  Soper, Constance F., PA
  Welk, Nikki L., PA

Knowlton Oneill & Associates PC
1401 13th Ave E
(701) 364-0060
- Nurse Practitioner
  Cushing, Anne G., CNP
- Psychology
  Bratton, Brenda L., PHD
  Dvorak, Robert D., PHD
  Hegstad, Holly J., PHD
  Knowlton, Glenn E., PHD
  Schjeldahl, Katherine M., PHD

North Dakota (cont.)
West Fargo (cont.)

Leaps and Bounds Speech Services, Inc
1121 9th Ave W
(701) 356-0062
- Speech Therapy
  Helgeson, Danielle M., ST
  Lucht, Stacey L., ST

Miracle Ear
745 13th Ave E #6
(701) 277-1478
- Home Medical Equipment
  Miracle Ear

Northwest Respiratory Services, LLC
500 10th St NE Ste 230
(800) 232-0706
- Home Medical Equipment
  Northwest Respiratory Services, LLC

Progressive Therapy Associates
1150 Prairie Pkwy
Ste 105
(701) 356-7766
- Speech Therapy
  Christiansen, Amber L., ST
  Grove, Janet, ST
  Hedstrom, Jodi L., ST
  Simon, Tessa M., ST

Sanford West Fargo Clinic
1220 Sheyenne St
(701) 234-4445
- Certified Diabetic Educator
  Klocke, Janet D., CDE
- Nurse Practitioner
  Joyce, Rebecca, FNP
  Koenig, Cynthia J., CNP
- Physician Assistant
  Jones, Corwin A., PA

Sanford West Fargo Clinic
1220 Sheyenne St
(701) 234-4455
- Certified Diabetic Educator
  Klocke, Janet D., CDE
- Licensed Registered Dietitian
  Krueger, Maren A., LRD
- Nurse Practitioner
  Joyce, Rebecca, FNP
  Koenig, Cynthia J., CNP

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING ANCILLARY PROVIDERS

North Dakota (cont.)
West Fargo (cont.)

Sanford West Fargo Clinic (cont.)
- Physician Assistant
  Branca, Autumn, PA
  Jones, Corwin A., PA

Sheyenne Hearing Service
205 Sheyenne St #2
(701) 281-8137
- Home Medical Equipment
  Sheyenne Hearing Service

Terry Braun, LPCC
1042 14 Ave E Ste 210
(701) 799-6258
- Licensed Professional Clinical Counselor
  Braun, Terry N., LPCC

The Prescription Shop Wf
1210 Sheyenne St
(701) 282-4665
- Home Medical Equipment
  The Prescription Shop Wf

Thrifty White Drug #46
1100 13th Ave E
(701) 281-5695
- Home Medical Equipment
  White Drug #46

Williston

Billings Clinic
1301 15th Ave W
(701) 774-7464
- Physician Assistant
  Allen, Travis G., PA

Clinical Consulting, PC
322 Main St Ste 104
(701) 651-6951
- Psychiatric Nurse
  Ferrell, Charlotte A., PNU

Elite Health & Fitness
512 Main St
(701) 774-0320
- Physical Therapy
  Baltz, Haley K., PT
  Boston, Kari E., PT
  Fortney, Rachel J., PT
  Haug, Martin J., PT
  Huravitch, Chris E., PT

North Dakota (cont.)
Williston (cont.)

Elite Health & Fitness
512 Main St
(701) 774-0320
- Nurse Practitioner
  Falcon, Misty K., FNP
  Paulson, Breanna L., FNP

Fairlight Medical Center
3 E 4th St Ste 201
(701) 577-6337
- Nurse Practitioner
  Ebach, Connie M., CNP
- Physician Assistant
  Blomquist, Patricia A., PA

G & G Rx, Inc dba Service Drug Pharmacy
317 Main
(701) 572-6721
- Home Medical Equipment
  Service Drug Pharmacy

Medquest Inc
1602 W 11th St
(701) 774-7438
- Home Infusion
  Medquest Inc.
- Home Medical Equipment
  Medquest Inc

Mercy Medical Center dba Craven Hagan Clinic
1213 15th Ave W
(701) 774-7400
- Nurse Practitioner
  Grondahl, Heidi L., CNP
  Lukenbill, Debra J., FNP
  Norby, Cherise A., FNP
  Warmsbecker, Brandy, FNP
- Physical Therapy
  Skluzacek, Amanda R., PT
- Physician Assistant
  Peterson, Lisa M., PA
  Wiedrich, Leah R., PA

Mercy Medical Center dba CRNA
1301 15th Ave W
(701) 774-7400
- Certified Registered Nurse Anesthetist
  Cederstrom, Luann, CRNA
  Johnson, Karen L., CRNA

North Dakota (cont.)
Williston (cont.)

Mercy Medical Center dba CRNA (cont.)
- Certified Registered Nurse Anesthetist (continued)
  Johnson, Kristi, CRNA
  Lewis, James E., CRNA
  Lewis, Melissa M., CRNA
  Olson, Jeffrey K., CRNA

Mercy Nutritional Service
1301 15th Ave W
(701) 774-7441
- Licensed Registered Dietitian
  Bearce, Tammy R., LRD
  Brannan, Emilee R., LRD
  Philpot, Tamara, LRD

Neurosurgical & Spinal Surgery Associates, PC
3 4th Street East
(800) 253-5876
- Physician Assistant
  Davis Faith, Kara L., PA
  Richards, James W., PA
  Richards, Juanita M., PA

Northwest Human Service Center
316 2nd Ave W
(701) 774-4600
- Clinical Nurse Specialist
  Lukenbill, Debra J., CNS
- Licensed Addiction Counselor-Chemical Dependency
  Conmy, Stephen W., LAC
  Montgomery, Christine R., LAC
- Nurse Practitioner
  Ferrell, Charlotte A., FNP
- Psychology
  Semchenko, Alana, PSYD

Oxner, William, CRNA
1102 Main St
(952) 442-9770
- Certified Registered Nurse Anesthetist
  Oxner, William D., CRNA

Svpn Neuro Williston
1213 15th Ave W
(800) 544-3579

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING ANCILLARY PROVIDERS

North Dakota (cont.)

Williston (cont.)

Svpn Neuro Williston (cont.)
- Physician Assistant
  Crowell, Kristine M., PA

Trinity Community Clinic/Western Dakota
1321 W Dakota Parkway
(701) 572-7711
- Certified Diabetic Educator
  Liepke, Karen M., CDE
- Certified Registered Nurse Anesthetist
  Oxner, William D., CRNA
  Zahn, Keith, CRNA
- Independent Laboratory
  Trinity Community Cln/We
- Nurse Practitioner
  Hickok, Evonne A., FNP
  Knapkewicz, Cami S., FNP
- Psychology
  Mugge, Jessica R., PHD

Upper Missouri District Health
110 W Broadway Ste 101
(701) 774-6400
- Nurse Practitioner
  Grondahl, Heidi L., CNP

White Drug #67
300 W 11th St
(701) 774-3923
- Home Medical Equipment
  White Drug #67

Williston Center Pediatric Therapy
1106 2nd St W
(701) 572-5974
- Speech Therapy
  Vickers, Brittany K., ST

Williston Radiology Consultants
3 East 4th St #100
(701) 577-6337
- Nurse Practitioner
  Mickelson, Barbara J., CNP
- Physician Assistant
  Blomquist, Patricia A., PA

North Dakota (cont.)

Wishek

Wishek Drug
9 S Centennial St
(701) 452-2368
- Home Medical Equipment
  Wishek Drug

Wishek Hospital Clinic Assn
1007 4th Ave S
(701) 452-2326
- Certified Registered Nurse Anesthetist
  Silbernagel, Paul J., CRNA
- Nurse Practitioner
  Benson, Paulette, FNP
  Ketterling, Marcia R., FNP
- Physician Assistant
  Hauff, Rosemary, PA
  Kosiak, Maureen A., PA
  Rau, Kay M., PA

Wishek Rural Health Clinic
1015 4th Ave S
(701) 452-2364
- Certified Registered Nurse Anesthetist
  Silbernagel, Paul J., CRNA
- Licensed Registered Dietitian
  Imdieke, Catherine B., LRD
- Nurse Practitioner
  Benson, Paulette, FNP
  Ketterling, Marcia R., FNP
- Physician Assistant
  Hauff, Rosemary, PA
  Kosiak, Maureen A., PA
  Rau, Kay M., PA

Zeeland

Zeeland Clinic
203 S Main
(701) 423-5403
- Nurse Practitioner
  Bichler, Lori M., CNP

Ohio

Ohio (cont.)

Twinsburg

Edgepark Medical Supplies - Mail Order
1810 Summit Commerce Park
(800) 321-0591
- Home Medical Equipment
  Edgepark Medical Supplies

Oklahoma

Oklahoma City

180 Medical, Inc.
5324 West Reno Ste A
(877) 688-2729
- Home Medical Equipment
  180 Medical Inc

Rhode Island

North Kingstown

Dominion Diagnostics, LLC
211 Circuit Drive
(401) 667-0855
- Independent Laboratory
  Dominion Diagnostics LLC

South Dakota

Aberdeen

Avera Medical Group Orthopedic Surgery Specialists
701 8th Ave NW Ste B
(605) 225-0430
- Physical Therapy
  Bain, Jenna, PT
  Brennan, Kelly, PT
  Clayton, Erica M., PT
  Cox, Doug, PT
  Orr, Brad, PT

Avera Medical Group Orthopedic Surgery Specialists
701 8th Ave NW Ste A
(605) 226-2663
- Physical Therapy
  Cox, Doug, PT
  Orr, Brad, PT
- Physician Assistant
  Ermer, Brian, PA
  Snyder, Sharon L., PA
  Solum, Philip, PA
  Vilhauer, Loren T., PA

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING ANCILLARY PROVIDERS

South Dakota (cont.)

Aberdeen (cont.)

Orthopedic Physical Therapy Center, Ltd
6 N Roosevelt St
(605) 725-9900

- Physical Therapy
  Goetz, Lee V., PT
  Iverson, Jaclyn N., PT
  Smid, Patricia M., PT

Orthotic & Prosthetic Specialties Inc
2211 8th Ave NE Ste 3102
(605) 725-2311

- Home Medical Equipment
  Orthotic & Prosthetic Specialties Inc

PSI Health Care, Inc.
1108 6th Ave SE
(605) 229-3462

- Home Medical Equipment
  PSI Health Care, Inc.

Sanford Home Medical Equipment
3001 6th Ave SE Ste 5
(605) 226-5690

- Home Medical Equipment
  Sanford Home Medical Equipment

State Street Pharmacy
105 S State St Ste 111
(605) 225-1945

- Home Medical Equipment
  State Street Pharmacy

Herreid

Campbell County Clinic
208 N Main St
(605) 437-2304

- Physician Assistant
  Biel, Ardalia, PA
  Schatz, Alice, PA

Lemmon

Hands On Health, Inc.
601 Main Ave
(605) 374-5844

- Occupational Therapy
  Dreiske, Lisa M., OT
- Physical Therapy
  Keller, Niomi M., PT
  Oliver, Colleen M., PT

South Dakota (cont.)

Lemmon (cont.)

Hands On Health, Inc. (cont.)

- Physical Therapy (continued)
  Thyne, Jason G., PT

West River Health Services
401 6th Ave W
(605) 374-3773

- Licensed Professional Clinical Counselor
  Jorgenson, Tara L., LPCC
- Nurse Practitioner
  Hill, Lori A., CNP

Mc Intosh

McIntosh Clinic
208 Main St
(605) 273-4335

- Nurse Practitioner
  Harper, Darci J., CNP
- Physician Assistant
  Hahne, Geralyn C., PA

Sioux Falls

Sanford Health Pathology Clinic
1305 W 18th St
(605) 333-1720

- Independent Laboratory
  Sanford Health Pathology Clinic

Texas

Lewisville

Orthofix Inc
3451 Plano Parkway
(800) 527-0404

- Home Medical Equipment
  Orthofix Inc

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING CHIROPRACTORS

Minnesota

Ada

Ada Chiropractic Clinic
406 E Main St
(218) 784-2330
Thomas, Kennedy H., DC

Barnesville

Barnesville Chiropractic
423 Front Street North
(218) 354-2148
Wahl, Sean K., DC

Breckenridge

Burud Chiropractic
1325 N Hwy 75
(218) 643-1668
Burud, Chad J., DC

Crookston

Active Health Family Chiropractic
116 4th Ave N
(218) 470-2020
Qual, Nicole K., DC

Aspen Chiropractic Clinic
116 N Main St
(218) 281-3811
Theede, Craig J., DC

Biermaier Chiropractic Clinic PA
1226 University Ave
(218) 281-6311
Biermaier, Steven J., DC

Dilworth

Kreps, David, DC
1675 Center Ave W Ste B
(218) 236-1187
Kreps, David J., DC

E Grand Forks

Ray Chiropractic, PA
418 Demers Ave
(218) 773-8403
Ray, Shanon R., DC

Minnesota (cont.)

Fertile

Hanson Chiropractic Clinic, P.A.
306 N Mill St
(218) 945-3220
Hanson, Dennis D., DC

Hawley

Hawley Chiropractic
209 6th St
(218) 483-4297
Kuhn, Daniel F., DC

Karlstad

Karlstad Family Chiropractic
205 Roosevelt
(218) 436-4264
Riley, Jana D., DC

Moorhead

Life Chiropratic Center
1032 Center Ave
(218) 233-3600
Moser, Melinda M., DC
Mosey, Michael C., DC

Marz Chiropractic PC dba Riverview Chiropractic Clinic
3505 8th St S Suite 6
(218) 236-1516
Marz, Aimee M., DC
Marz, Lucas J., DC

Med-Plus Healthcare, P.L.L.C.
2921 S Frontage Rd Ste
(218) 233-8544
Shogren, Paul, DC

Moorhead Chiropractic Clinic
213 7th St S
(218) 233-5141
Koslofsky, Nona M., DC
Lotzer, David S., DC

Moorhead Chiropractic Clinic
213 7th St S
(218) 233-5141
Lotzer, Jeffrey C., DC

Morlock Chiropractic Center Ltd
1602 30th Ave S
(218) 233-4402
Morlock, Gregg P., DC

Minnesota (cont.)

Moorhead (cont.)

Nokken Chiropractic Clinic
1220 2nd Ave S
(218) 233-1188
Downs, Jodee M., DC
Nokken, Beth A., DC
Sabourin, Jennifer L., DC

Pladson Chiropractic Clinic, PA
420 Center Ave Suite 48
(218) 236-5151
Lau, Matthew D., DC
Pladson, Jeff S., DC

Roth Family Chiropractic Inc
1906 30th Ave S
(218) 233-2517
Roth, Jason D., DC
Roth, Stacey A., DC

Storlie Family Chiropractic PC
40 4th St N
(218) 477-1120
Storlie, Troy E., DC

Thomas Chiropractic
2223 Highway 10 E
(218) 477-1145
Thomas, Kennedy H., DC

Tickel Chiropractic, PC
819 30th Ave S Ste 100
(218) 284-3030
Tickel, Tammy M., DC
Tickel, William D., DC

Stephen

Anderson Myren DC dba Stephen Chiropractic Center
121 3rd St
(218) 478-2415
Anderson, Myren D., DC

Twin Valley

Nelson Chiropractic Clinic
605 4th St NW
(218) 584-5515
Nelson, G Thomas, DC

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING CHIROPRACTORS

Minnesota (cont.)
Warren

Family Chiropractic
603 N Main St
(218) 745-6655

Pederson, Mark A., DC

Myren D Anderson, DC
105 S Division St
(218) 745-4330

Anderson, Myren D., DC

North Dakota
Beach

Holkup Chiropractic Clinic PC
110 Central Ave S
(701) 872-7520

Holkup, Jacob P., DC

Beulah

Erickson Chiropractic
212 W Main St
(701) 873-7677

Erickson, Donlyn J., DC
Voegele, Travis J., DC

Bismarck

A L Wagner Family Chiropractic
1655 N Grandview Lane
Suite 204
(701) 751-2020

Wagner, Ashley L., DC

Accelerate Health Chiropractic PLLC
120 N 3rd Street Ste 25
(701) 425-0700

Kraft, Christina L., DC

Active Life Chiropractic
535 S 7th St
(701) 255-4241

Ness, Douglas M., DC
Weigel, Charles A., DC
Weigel, Sara J., DC

Adjust Life
2000 N 19th St
(701) 255-5000

Roloff, Joel W., DC

North Dakota (cont.)
Bismarck (cont.)

Align-Mindt Chiropractic
1211 Memorial Hwy Ste 7
(701) 255-3950

Mindt III, John H., DC

Berger Chiropractic & Acupuncture
3123 N 14th St
(701) 751-3070

- Acupuncturist

Berger, Cody O., DC
Berger, Cody O., DC
Heid, Dane M., DC

Bis-Man Chiropractic Acupuncture, P. A.
207 E Front Ave Ste A
(701) 425-0797

Wiegel, Lance A., DC
Wiegel, Rachael N., DC

Capital Chiropractic & Spinal Rehab Center
2911 N 14th St Ste 102
(701) 221-2636

Anderson, Daniel E., DC
Dockter, Tonya L., DC
Miller, Shane D., DC

Chiropractic Carecentre, PC
1921 N 13th St
(701) 222-2252

Olsen, Blaine R., DC

Chuppe Chiropractic Clinic
1936 N 11th St
(701) 258-0029

Chuppe, Gregory P., DC
Chuppe, Steven V., DC
Moritz, Laci, DC

Dakota Life Chiropractic PC
1929 N Washington St
Ste Oa
(701) 255-7800

Seil, Charles M., DC
Seil, Elizabeth A., DC

Derosier, Matthew, R
1921 N 13th St
(701) 222-2252

Derosier, Matthew R., DC

North Dakota (cont.)
Bismarck (cont.)

Discover Health Chiropractic
1136 W Divide Ave
(701) 223-8237

Livesay, Travis W., DC

Family Health Chiropractic
117 E Century Ave
(701) 258-7047

Badinger, John W., DC

Focus Chiropractic
1122 Divide Ave W
(701) 258-5058

Remillard, Kelly D., DC

German, PC
1033 Basin Ave
(701) 223-6613

German, David L., DC

Gossett Chiropractic Arts, PC
1421 Mapleton Ave
(701) 250-2182

Gossett, Michael J., DC

Healthsource of Bismarck South
232 W Front Ave
(701) 751-1660

Scott, Carlyle W., DC

Innate, PC
1033 Basin Ave
(701) 223-6613

Wollmann, Troy A., DC

Jorde Chiropractic Clinic
2921 Homestead Dr
(701) 224-9008

Jorde, Dennis A., DC

Life Enhancement Clinic, PC
1023 East Capitol Ave
(701) 323-0266

Sefcik, Charles M., DC

Maximized Chiropractic
2000 N 12th St #101
(701) 751-6000

Coleman, Alex B., DC

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING CHIROPRACTORS

North Dakota (cont.)

Bismarck (cont.)

Messer Chiropractic, P.C.
1050 E Interstate Ave
#21
(701) 255-6377

Bentz, Ashleigh R., DC
Messer, Amanda L., DC

Nagel Family Chiropractic and Wellness LLC
4501 Coleman St Ste 106
(701) 214-6818

Nagel, Steven A., DC

Nelson, William, DC, PC dba Healthsource
1051 E Interstate Ave
(701) 222-8322

Chase, William M., DC
Nelson, William J., DC

Nemecek Chiropractic, PC
1431 Interstate Loop
(701) 223-5001

Nemecek, Cameron J., DC

Paape Chiropractic Clinic
433 Bismarck Expy E
(701) 258-0300

Nagel, Timothy, DC
Paape, William G., DC

Patchen, Dr Aaron, PC
2600 Gateway Ave Ste 2
(701) 751-1161

Patchen, Aaron B., DC

Pathways Chiropractic & Wellness
2600 Gateway Ave Ste 2
(701) 751-1161

Erickson, Bethany A., DC

Rummel Chiropractic PC
705 E Main Ave
(701) 258-9418

Rummel, Gregory D., DC

Ryan Koch, DC
2600 Gateway Ave Ste 2
(701) 751-1161

Koch, Ryan P., DC

North Dakota (cont.)

Bismarck (cont.)

Sanford Clinic
222 N 7th St
(701) 323-6000

Seamands, Eric D., DC

Sanford Health Chiropractic
1833 E Bismarck Expressw
(701) 323-5222

Askew, Jeffrey J., DC
Seamands, Eric D., DC

Sanford Health Chiropractic
2603 E Broadway Ave
(701) 323-5222

Askew, Jeffrey J., DC
Seamands, Eric D., DC

Shaw Chiropractic Health Institute PC
1003 E Interstate Ave
Ste 5
(701) 221-2788

Shaw, Robert D., DC

Sicble Coty, DC
1921 N 13th St
(701) 222-2252

Sicble, Coty R., DC

Southridge Chiropractic Clinic
425 S 7th St
(701) 258-8388

Gietzen, Lori J., DC
Kahl, Chad, DC
Kahl, Jamie, DC
Kjos, Rusty A., DC
Nagel, Timothy, DC
Ness, Angela K., DC
Tenbroek, Sheri L., DC

Swanson, Thomas, DC
1102 S Washington St
(701) 223-2907

Swanson, Thomas J., DC

Total Wellness Chiropractic Clinic PC
1401 Skyline Blvd
Ste 240
(701) 224-9500

Vollmers, Alicia, DC

North Dakota (cont.)

Bismarck (cont.)

Walth Robert Jr DC
1655 N Grandview Ln
Ste 204
(701) 751-2020

Walth, Robert H., DC

Winkler Chiropractic, PC
1431 Interstate Loop
(701) 223-5001

Winkler, Carol J., DC

Bottineau

Chiropractic Arts
909 11th St E
(701) 228-2275

Jorde, Erica L., DC
Pewe, Mark W., DC

Bowman

Bachmeier Chiropractic
108 N Main St
(701) 523-7454

Bachmeier, Dixie J., DC

Stafford James, DC
15 N Main St
(701) 523-4830

Stafford, James O., DC

Tri State Chiropractic Center
111 4th St NW
(701) 523-3239

Whitney, Charles F., DC

Cando

Towner County Medical Center
Hwy 281 N
(701) 968-2541

Ellenbecker, Paul D., DC
Nicholas, Lana M., DC

Carrington

Galt Chiropractic Clinic
615 Main St
(701) 652-2631

Galt, Jeffrey R., DC

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING CHIROPRACTORS

North Dakota (cont.)

Casselton

Davis Chiropractic Clinic
722 Front St
(701) 347-4006

Davis, Keith G., DC

Cavalier

Blanchard's Chiropractic Clinic
100 Division Ave N
(701) 265-8150

Blanchard, Darren E., DC

Center

Rummel Chiropractic PC
111 E Main St
(701) 794-8798

Rummel, Gregory D., DC

Cooperstown

Essential Chiropractic PLLC
402 4th St SW
(701) 797-2385

Ham, Lori J., DC

Crosby

Wehrman, Kami DC dba Crosby Chiropractic Clinic, PC
206 N Main St
(701) 965-3222

Wehrman, Kami V., DC

Devils Lake

Freije Chiropractic Center
204 College Dr N
(701) 662-3443

Freije, Bonnie K., DC

Remmick, Michael A, DC
201 6th Ave NE
(701) 662-7538

Remmick, Michael A., DC

Sad Carl, DC
204 College Dr N
(701) 662-3443

Sad, Carl F., DC

North Dakota (cont.)

Dickinson

Bell Chiropractic and Fitness PC
1462 I-94 Bus Loop E #1
(701) 483-8806

Bell, Brian, DC
Dukart, Jessica, DC

Berger Family Chiropractic, LLC
745 State Ave Ste A
(701) 483-0800

Berger, Shawn M., DC

Ficek Chiropractic, PC
562 1/2 12th St W
(701) 483-8824

Biel-Ficek, Maripat, DC
Ficek, Dion S., DC

Health and Wellness Chiropractic Center
448 21st St W Unit D2
(701) 483-6325

Dorval, Todd A., DC
Leintz, Tyler J., DC

Healthsource Chiropractic & Progressive Rehab
383 15th St W
(701) 225-3536

Eberts, Marvin M., DC

Hutzenbiler Chiropractic PC
1428 W Villard St
(701) 483-6917

Hutzenbiler, Matthias H., DC

Meyer Family Chiropractic PC
1428 West Villard St
(701) 483-6917

Meyer, Jennifer D., DC

Ouellette Chiropractic PC
745 State Ave Ste A
(701) 483-1106

Ouellette, Michelle L., DC

Peters, Timothy, DC
562 12th St W
(701) 483-1104

- Acupuncturist

Steffes, Cassandra L., DC
Peters, Timothy J., DC
Steffes, Cassandra L., DC

North Dakota (cont.)

Dickinson (cont.)

Pokorny Chiropractic Clinic, PC
1035 3rd Ave W
(701) 225-9696

Pokorny, Jeffrey D., DC

Prairie Hills Chiropractic PC
2125 Sims St Ste 3
(701) 264-7351

Knutson, Bryon E., DC

Sanford Health Occupational Medicine Clinic
1531 W Villard St Ste A
(701) 225-7575

Seamands, Eric D., DC

Simnioniw Family Chiropractic, PLLC
352 1st St E Ste D
(701) 483-1802

Simnioniw, Kylie, DC

Western Skies Chiropractic, PC
1428 W Villard St
(701) 483-8855

Kostelecky, Christina M., DC

Work Partners of ND
653 19th St W
(701) 483-1808

Kovash, Jesse L., DC

Drayton

Catherine J. H. Borud dba Drayton Chiropractic
104 E Hwy 66 Ste 4
(701) 454-3555

Borud, Catherine J., DC

Edgeley

Sundby Family Chiropractic PC
509 Main Street
(701) 883-4353

Sundby, Jessica R., DC

Edmore

Freije Chiropractic Center, PC
6895 99th Ave NE
(701) 662-3443

Freije, Bonnie K., DC

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING CHIROPRACTORS

North Dakota (cont.)

Ellendale

Ellendale Chiropractic Clinic
305 1st Ave S
(701) 349-4727

Kendall, Craig L., DC

Fairmount

Moon Chiropractic Clinic
110 Main Ave
(701) 474-5948

Moon, Derryl E., DC

Moon Chiropractic Health
110 Main Ave
(701) 474-5748

Moon, Barry L., DC

Fargo

Above & Beyond Chiropractic
2506 35th Ave SW
(701) 293-1133

St Louis, Elizabeth, DC

Active Family Chiropractic
2808 N Broadway
(701) 364-9362

Salwey, Todd A., DC

All Seasons Full Body Chiropractic Center, LLC
4325 13th Ave S Ste 5
(701) 356-0016

Bekkum, Paul M., DC

Anderson Family Chiropractic
4132 30th Ave S #102
(701) 241-7737

Anderson, Brandan A., DC

Anderson, Alisha, PC dba Anderson Family Chiropractic
4132 30th Ave S Ste 102
(701) 241-7737

Anderson, Alisha L., DC

Anderson, Jadean, PC dba Anderson Family Chiropractic
4132 30th Ave S #102
(701) 241-7737

Anderson, Jadean J., DC

North Dakota (cont.)

Fargo (cont.)

Andrew Wagner Chiropractic
4357 13 Ave S Ste 100
(701) 356-2225

Wagner, Andrew M., DC

Askland Yohe Chiropractor, Ltd
2800 S University Dr
(701) 237-0614

Yohe, Kent G., DC

Badinger Chiropractic Clinic
1617 32nd Ave S
(701) 239-4749

Badinger, Cory J., DC

Balance Chiropractic & Rehab PC
300 45th St S # 315
(701) 893-7878

Pozarnsky, Daniel I., DC

Bjorlie Chiropractic Clinic PC
1383 21st Ave N Ste A
(701) 235-8050

Bjorlie, Kevin N., DC

Body In Balance Chiropractic, LLC
4040 42 St S Ste K
(701) 893-9100

Dusek, Amy L., DC

Bossart Chiropractic
1815 South University Dr
(701) 239-4710

Bossart, Thomas D., DC

Chiropractic First, PC
1450 25th St S Ste B
(701) 298-7778

Petermeier, Jane M., DC

Chiropractic Rehabilitation Center PLLC
2280 S 45th St Ste B
(701) 364-3760

Haroldson, Erik T., DC

Clark, Raymond, DC
1306 23rd St S
(701) 235-1360

Clark, Raymond G., DC

North Dakota (cont.)

Fargo (cont.)

Core Health Chiro, PA
4955 17th Ave S Ste 108
(701) 364-2673

Barton, Dustin J., DC

Dakota Health Solutions, PC
1383 21st Ave N
(701) 365-0999

Danduran, Christopher A., DC

Dr. Robert J. Schulte, Jr., PA
2800 S University Dr
(701) 237-0710

Schulte, Robert J., DC

Drake Jason M DC PC
3301 13th Ave SW
(701) 234-0057

Drake, Jason M., DC

Dynamics Chiropractic and Rehab PLLC
3222 28th St S
(701) 232-4770

Halvorson, Shawn, DC

Essentia Health 32nd Avenue Clinic
3000 32nd Ave S
(701) 364-8000

Hager, Allen L., DC

Essentia Health South University Clinic
1702 University Dr S
(701) 364-3300

Hager, Allen L., DC

Fargo Chiropractic
1515 S University Dr
(701) 232-4922

Davis, Debra F., DC

Fargo Spine and Rehabilitation
3222 28th St SW
(701) 232-4770

Vein, Marc P., DC

Fetzer Christy, DC
1555 43 St S Suite 107
(701) 356-6700

Fetzer, Christy M., DC

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING CHIROPRACTORS

North Dakota (cont.)
Fargo (cont.)

Gillette Family Chiropractic
825 25th St S Ste C
(701) 237-4010
Gillette, Darrin S., DC

Grant, Gregory, DC
1515 S University Dr
(701) 232-4922
Grant, Gregory L., DC

Great Plains Chiropractic
3301 13th Ave SW
(701) 234-0057
Haug, Christian M., DC

Healing Arts Chiropractic, PC
3240 15th St S Ste C
(701) 451-9070
Gunderson, Mark T., DC
Paape, Kevin G., DC

Health Source of North Fargo
2802 N Broadway
(701) 451-9098
Carpenter, Courtney R., DC
Farrell, Mindy A., DC

Healthsource of Fargo-Moorhead
3175 Sienna Dr Ste 105
(701) 451-9098
Bakken-Paschke, Jessica A., DC
McManus, Matthew, DC
Orth, Mason J., DC
Wurgler, Matthew R., DC
Zimmerman, Chad R., DC

Ihry, Kevin, DC
1411 32nd St S
(701) 232-1232
Ihry, Kevin, DC

Inline Chiropractic, PLLC
300 45th St S Ste 315
(701) 205-1825
Opp, Ramey J., DC

Judisch Chiropractic
1411 32nd St S
(701) 235-0313
Judisch, Rick L., DC

North Dakota (cont.)
Fargo (cont.)

Moon Chiropractic Health
3431 4th Ave S
(701) 640-3530
Moon, Barry L., DC

Natural Health and Chiropractic, PC
1450 25 St S
(701) 241-9355
Kemper, Thomas L., DC

Optimal Health
3369 39th St S Suite 3
(701) 367-6980
Anda, Geoffrey L., DC

Origin Chiropractic Physicians
2701 9th Ave SW Ste 800
(701) 280-2955
Townley, Brook A., DC

Pausch Chiropractic
1665 43rd St S Ste 102
(701) 356-3990
Pausch, Dana J., DC

Peterson, Rodney, DC
2800 S University Dr
(701) 237-0614
Peterson, Rodney W., DC

Pure Chiropractic & Rehab, PC
300 45th St S Ste 315
(701) 893-7873
Feldner, Brad S., DC

Red River Wellness
3411 Fiechtner Dr
(701) 235-2700
Jorgensen, Michael W., DC

Renelt Family Chiropractic
1383 21st Ave N Ste A
(701) 277-5930
Renelt, Aaron M., DC

Rokke Chiropractic
1411 32nd St SW
(701) 241-4393
Rokke, Vincent O., DC

North Dakota (cont.)
Fargo (cont.)

Sanford Southpointe Clinic
2400 32nd Ave S
(701) 234-8800
Solien, Thomas P., DC

South Pointe Chiropractic
3220 18th St S Ste 2
(701) 234-0028
Olson, Timothy M., DC
Tabberson, Mary P., DC

Strive Chiropractic PC
3120 25th St S Ste V
(701) 893-4200
Grinaker, Jacob F., DC
Kerber, Joseph R., DC

Summit Chiropractic, PLLC
300 45 St S #315
(701) 356-7660
Roers, Stephanie A., DC

Syvrud Chiropractic Clinic
825 25th St S Ste C
(701) 237-5150
Syvrud, Ryan S., DC

United Health Chiropractic, PLLC
3212 14th Ave SW #2
(701) 232-2662
Schroeder, Ryan J., DC

Van Dam Chiropractic PC
2701 9th Ave SW Ste 800
(701) 280-2599
Van Dam, Scott A., DC

Venture Chiropractic
2553 Kirsten Lane South
Suite 207
(701) 730-3867
Dockter, Christopher D., DC
Dockter, Melanie A., DC
Hanson, Heidi L., DC

Vertical Health Chiropractic
4040 42nd St S Ste K
(701) 356-0080
Finley, Mathew, DC

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING CHIROPRACTORS

North Dakota (cont.)

Fargo (cont.)

Waale Chiropractic Clinic, PLLC
417 Main Ave Ste 301
(701) 365-0401

Waale, David H., DC

Walker Chiropractic PC
250 25th St S
(701) 293-8882

Walker, Charles T., DC

Walton Chiropractic Clinic
120 Broadway
(701) 237-0770

Walton, Stephen C., DC

Weiss Chiropractic Clinic
1360 10th St N
(701) 237-5517

Weiss, Carol, DC
Weiss, Joel C., DC

Flasher

Southridge Chiropractic Clinic
105 Main St N
(701) 597-3931

Tenbroek, Sheri L., DC

Garrison

Complete Chiropractic
101 N Main St
(701) 463-7808

Turck, Nathan P., DC

Kelly Chiropractic, PC
141 N Main St
(701) 463-2988

Kelly, Krista C., DC

Glen Ullin

Glen Ullin Chiropractic Clinic
602 Ash Ave E
(701) 348-3143

Gietzen, Lori J., DC

Hometown Wellness, PC
115 B St S
(701) 878-4300

Coleman, Sandee, DC

North Dakota (cont.)

Grafton

Blanchard Chiropractic
Highway 17 W
(701) 352-1690

Blanchard, Darren E., DC
Blanchard, Jerry D., DC

- Licensed Manipulative Therapist
  Blanchard, Jerry D., DC

Grafton Chiropractic Clinic, P.C.
728 Hill Ave
(701) 352-0400

Jelinek, Jonathan E., DC

Grand Forks

A Schlager Chiropractic Clinic
2303 S Washington Ste I
(701) 775-8462

Schlager, Todd A., DC

Advance Chiropractic Clinic
2840 19th Ave S
(701) 772-2670

Fulp, John T., DC
Gruhot, Kevin K., DC

Altru At Choice
4401 S 11th St
(701) 732-7620

Howson, Christopher J., DC

Benson Chiropractic
824 University Ave Ste A
(218) 230-1700

Benson, Rachel J., DC

Chiro Rx Ltd
2625 24 Ave S Ste B
(701) 746-7979

Berg, Phillip W., DC

Chirocenter One
2812 17th Ave S Ste C
(701) 775-0223

Jongeward, Brian V., DC

Dallman Chiropractic PC
1395 S Columbia Rd #B
(701) 775-3215

Dallman, John E., DC

North Dakota (cont.)

Grand Forks (cont.)

Grand Forks Chiropractic
3001 S Columbia Rd Ste C
(701) 795-8818

Walker, Jody A., DC

Heartland Clinic of Chiropractic
2525 Demers Ave Suite B
(701) 746-5977

Kiefat, Daniel G., DC

McIntyre Chiropractic, PLLC
2600 Demers Ave #110
(701) 772-3505

McIntyre, Jordan J., DC

Midwest Chiropractic
2600 Demers Ave #110
(218) 773-9245

Galstad, Richard A., DC

New Horizon Chiropractic & Wellness Center, PLLC
2100 S Columbia Rd
Ste 114
(701) 757-2225

Weiss, Nathan A., DC

Performance Chiropractic
4350 S Washington St
Ste 100
(701) 732-2888

Anderson, Kristian R., DC
Hallgren, Stacy L., DC

Plains Chiropractic & Acupuncture PC
3750 32nd Ave S Ste 103
(701) 775-1034

Muth, Carson C., DC
Muth, Natalie N., DC

Red River Family Chiropractic, PC
1425 S Columbia Rd Ste 3
(701) 746-8636

Thomsen, Bradley R., DC

Renewed Hope Chiropractic & Wellnes PLLC
1726 S Washington St
Ste 79
(701) 738-0990

Swenson, Garret C., DC
Swenson, Sheila L., DC

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING CHIROPRACTORS

North Dakota (cont.)
Grand Forks (cont.)

Waind Chiropractic and Acupuncture
2506 S Washington St
(701) 746-5477
Waind, Michael J., DC

Granville

McCabe Family Chiropractic, PC
121 Main St S
(701) 776-7676
- Acupuncturist
McCabe, Tobias T., DC
McCabe, Tobias T., DC

Gwinner

Waswick Chiropractic
10 N Main St
(701) 678-2431
Waswick, Gerald M., DC

Hankinson

Hankinson Family Chiropractic
101 1st Street NE
(701) 242-7200
Salwey, Todd A., DC

Harvey

Dakota Plains Chiropractic
817 Lincoln Ave
(701) 324-2262
Gottenborg, Robb J., DC

Weber Chiropractic Clinic
1008 Adams Ave
(701) 324-2335
Weber, Genevieve E., DC

Hazen

Isaak Chiropractic of Hazen
301 4th Ave NE
(701) 748-4400
Isaak, Chad, DC

Pfliger Chiropractic Clinic PC
706 8th Ave NE
(701) 748-3303
Pfliger, Duane J., DC

North Dakota (cont.)
Hazen (cont.)

Swanson Chiropractic, PC
612 7th St NE
(701) 748-2136
Swanson, William C., DC
Winkler, Kyle K., DC

Hebron

Hebron Chiropractic Clinic
811 1/2 Main St
(701) 878-4131
Gietzen, Lori J., DC

Hometown Wellness, PC
725 Main St
(701) 878-4300
Coleman, Sandee, DC

Hillsboro

Hillsboro Chiropractic Clinic
322 4th Ave SE
(701) 636-4606
Bishop, Michael E., DC
Smith, Aimee L., DC

Trail County Chiropractic
102 1st St SW
(701) 636-2251
Leeseberg, Thomas J., DC

Horace

Horace Family Chiropractic, PC
534 N Main St Unit A
(701) 532-3100
Schultz, Jeremy J., DC
Sundby, Haley K., DC

Jamestown

Absolute Chiropractic
623 10th St SE
(701) 252-6509
Purcell, Robert J., DC

Essentia Health Jamestown Clinic
2430 20th St SW
(701) 253-5300
Brown, Jeffrey D., DC

North Dakota (cont.)
Jamestown (cont.)

Iverson, Kenn, DC, PC
312 2nd Ave SW Ste 101
(701) 252-2424
Iverson, Kenn E., DC

Qual Chiropractic
805 10th St SE
(701) 252-4700
Goehner, Matthew, DC
Qual, Richard W., DC

Schmidt Chiropractic Clinic
102 2nd Ave SW
(701) 251-1550
Hann, Jerrod, DC
Heim, Heidi H., DC
Schmidt, Dwight B., DC
Schmidt, Nicholas D., DC

Siefken Chiropractic
701 1st Ave S
(701) 252-0569
Siefken, Arnold G., DC

Thorlakson Chiropractic Services
1015 5th Ave NE
(701) 952-9400
Thorlakson, Mika S., DC

Lamoure

Black Chiropractic
107 2nd Ave NE
(701) 883-4276
Black, Carl R., DC

Sundby Family Chiropractic
100 1st Ave SW
(701) 883-4353
Sundby, Dana P., DC
Sundby, Jessica R., DC

Larimore

Larimore Chiropractic Clinic PLLC
320 Booth Ave
(701) 343-6496
Byrd, Nancy M., DC
Byrd, Rex J., DC

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING CHIROPRACTORS

North Dakota (cont.)

Lidgerwood

Valley Spine Center Inc
39 Wiley Ave S
(701) 538-4002
Dohman, Robb Q., DC

Linton

Nagel Family Chiropractic and Wellness LLC
116 S Broadway
(701) 214-6818
Nagel, Steven A., DC

Wangler, Leo, DC
118 Broadway St S
(701) 254-4319
Wangler, Leo J., DC

Lisbon

Herring Chiropractic Clinic
12 10th Ave W
(701) 683-5272
Herring, Richard G., DC

Lisbon Chiropractic Clinic
906 Main St
(701) 683-4582
Olson, Chad A., DC
Williams, Corey C., DC

Sheyenne Valley Chiropractic
15 11th Ave W
(701) 683-5337
Bartosh-Heacox, Annette I., DC
Sandness-Rieger, Jodi K., DC

Mandan

Carter Chiropractic PC dba Spine Care Chiropractic
408 1st St NW #A
(701) 663-2992
Carter, Joshua S., DC

Kersten Chiropractic PC
1800 E Main St Ste B
(701) 663-2700
Kersten, Brad R., DC

Leingang Chiropractic & Wellness
307 1st St NE
(701) 663-0488
Leingang, Andrea R., DC

North Dakota (cont.)

Mandan (cont.)

Mandan Chiropractic Clinic / Advanced Spine & Rehab
1302 1st St NE
(701) 663-0480
Isaacson, Erik R., DC

Newgard Chiropractic Clinic
104 W Main St
(701) 663-5855
Newgard, Joel A., DC

Newgard, Scott, DC
104 W Main St
(701) 663-5855
Newgard, Scott L., DC

Schoepp Family Chiropractic PC
405 Burlington Street SE
(701) 667-6290
Schoepp-Erhardt, Debra E., DC

Schwartz Family Chiropractic Center PC
503 E Main St Plaza 2
(701) 663-3380
Motta, Rachel E., DC
Schwartz, Kent H., DC

Mayville

Omdalen Chiropractic
45 1st Ave SE
(701) 786-4024
Omdalen, Scott E., DC

Mc Clusky

Southridge Chiropractic Clinic
122 2nd St E
(800) 458-8388
Ness, Angela K., DC

Minot

Active Body Chiropractic PC
2010 4th Ave NW Ste 106
(701) 852-1665
Dammen, Jason S., DC

Back To Back Chiropractic
1050 31st Ave SW Ste D
(701) 838-0223
Schuler, Jerome R., DC

North Dakota (cont.)

Minot (cont.)

Brintnell Chiropractic PC
720 20th Ave SW
(701) 838-8000
Brintnell, Jason R., DC

Chirocare Family Center, PC
309 27th St NW
(701) 852-0596
Borgen, Amy L., DC

Chiropractic Arts Clinic
1001 20th Ave SW
(701) 852-0158
Falcon, Christopher W., DC
Howe, Brenden J., DC
Redington, Dean, DC
Roedocker, Travis, DC

Chiropractic Health & Wellness
1825 16th St SW
(701) 838-5000
Lipp, Steven J., DC

Chiropractic Health and Welless
1825 16th St SW
(701) 838-5000
Burckhard-Teets, Tifany A., DC

Ellenbecker Chiropractic, PC
1050 31 Ave SW Ste B
(701) 838-1987
Ellenbecker, Paul D., DC

Horizon Family Chiropractic
1400 37th Ave SW Ste C
(701) 837-9355
Samson, Matthew J., DC

Infinite Health Chiropractic
1020 N Broadway Ste B
(701) 837-1020
Larson, Annika, DC

Kelly Chiropractic, PC
1415 2nd Ave SW
(701) 837-5733
Kelly, Krista C., DC
Kelly, Michael A., DC

Kessler Chiropractic
1809 S Broadway Ste Y
(701) 852-5416
Kessler, David S., DC

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING CHIROPRACTORS

North Dakota (cont.)

Minot (cont.)

Klein Chiropractic & Wellness PC
309 27th Ave SW
(701) 852-3223
Klein, Sara J., DC

Lifetime Chiropractic
1050 31 Ave SW Ste C
(701) 839-2010
Ellenbecker, Amy L., DC

Mid Town Chiropractic
212 S Broadway #4
(701) 838-7676
Kraft, Bradley D., DC

Mosser Chiropractic PC
1825 16th St SW
(701) 838-5000
Mosser, Mark, DC

Pearson Chiropractic, PLLC
1310 E Burdick Expy
Ste A
(701) 852-5230
Pearson, Devanni L., DC
Pearson, Paul S., DC

Pederson Chiropractic Clinic PC
720 20th Ave SW
(701) 838-8000
Jones, Mackenzie J., DC
Pederson, Steven S., DC

Rime Chiropractic
104 20 Ave SW
(701) 852-5736
Rime, Richard A., DC

Saunders Chiropractic Health
1015 S Broadway Suite 16
(701) 838-2752
Saunders, William S., DC

Staci Borkhuis Chiropractic, PC dba Cornerstone Chiropractic
1350 20th Ave SW
(701) 852-2800
Borkhuis, Staci J., DC
Hanson, Matthew C., DC
Myers, Travis J., DC

North Dakota (cont.)

Napoleon

Focus Chiropractic
420 Main Ave
(701) 754-2323
Remillard, Kelly D., DC

Total Life Chiropractic
123 Lake Ave W
(701) 754-2345
Weigel, Charles A., DC

New England

Ficek Chiropractic, PC
820 2nd Ave W
(701) 579-4507
Ficek, Dion S., DC

New Rockford

Nicolai Chiropractic Center, PC
207 1st Ave S
(701) 947-2121
Nicolai, Michael K., DC
Smith, Zachary T., DC

New Salem

Washburn Chiropractic, Inc dba New Salem Chiropractic Clinic
1200 N 8th St
(701) 843-8888
Thompson, John A., DC

Northwood

Northwood Chiropractic, PC
12 N Park St
(701) 587-6300
Thorsgard, Erik J., DC

Oakes

Back To Health Chiropractic Clinic
9 5th St N
(701) 742-3386
Cline, Nicole R., DC

Dethlefsen Chiropractic
14 N 5th St
(701) 742-2750
Dethlefsen, Brian L., DC

North Dakota (cont.)

Ray

Fischer Family Chiropractic
Ray Mini Mall - Main St
(701) 568-6824
Fischer, Christine A., DC
Fischer, Derek D., DC

Rugby

Heart of America Johnson Clinic
800 3rd Ave SW
(701) 776-5235
Pederson, Steven S., DC

McCabe Family Chiropractic, PC
218 S Main Ave
(701) 776-7676
McCabe, Tobias T., DC

Stanley

Johnson, Kurtis, DC
112 S Main St
(701) 628-2136
Johnson, Kurtis T., DC

Mortensen Chiropractic
108 Main St
(701) 628-7246
Mortensen, Gregory L., DC

Steele

Kidder County Chiropractic
214 4th St NW
(701) 475-5555
Ruff, Dannielle L., DC

Steele Chiropractic Clinic
105 Broadway East
(701) 475-2802
Kahl, Jamie, DC
Tenbroek, Sheri L., DC

Tioga

Chiropractic Care Clinic
23 N Main St
(701) 664-2042
Krieger, Sharon L., DC

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING CHIROPRACTORS

North Dakota (cont.)

Towner

Align Chiropractic PC
2 3rd Ave SW
(701) 537-2080

Jorde, Erica L., DC

Turtle Lake

Anderson Health & Wellness, PC
416 Kundert St
(701) 221-2636

Anderson, Daniel E., DC

Southridge Chiropractic Clinic
416 Kundert St
(701) 448-9225

Ness, Angela K., DC

Valley City

Central Ave Chiropractic PC
323 Central Ave N
Ste 202
(701) 845-0709

Sayler, Larry E., DC
Sayler, Nathan T., DC

Essentia Health Valley City Clinic
132 4th Ave NE
(701) 845-8060

Brown, Jeffrey D., DC

Foell Chiropractic Clinic
150 9th Ave NW
(701) 845-3132

Foell, Kim B., DC

Thomsen Chiropractic PC dba Thomsen Chiropractic
1530 W Main Street
(701) 845-2481

Thomsen, Brent L., DC

Wahpeton

Cook Chiropractic Clinic
103 9th St N Ste 1
(701) 642-1913

Cook, David M., DC
Cook, James R., DC

Dakota Chiropractic Clinic
320 Dakota Ave
(701) 642-5600

Jacklitch, Michael D., DC

North Dakota (cont.)

Wahpeton (cont.)

Hornstein Family Chiropractic
715 Dakota Ave Ste 2
(701) 672-1300

- Acupuncturist

Hornstein, Andrea L., DC
Hornstein, Andrea L., DC

Valley Spine Center Inc
319 11th St N
(701) 642-6480

Dohman, Robb Q., DC
Mitskog, Alisa T., DC

Washburn

A L Wagner Family Chiropractic PC
1167 Border Lane
(701) 462-3389

Wagner, Ashley L., DC

Washburn Chiropractic, PC
Hwy 83 County Rd 22
(701) 462-3531

Thompson, John A., DC

Watford City

Trauger Chiropractic Center
105 2nd Ave NE
(701) 842-2917

Trauger, Gary L., DC

Watford City Chiropractic
105 9th Ave SE Suite 3
(701) 842-3100

Darr, Wade A., DC

West Fargo

Aker Chiropractic Ltd
1150 Prairie Pkwy
Ste 102
(701) 356-4900

Aker, Janyne F., DC
Western, Heidi J., DC

Nitschke Chiropractic
726 13th Ave E
(701) 282-4948

Nitschke, Harvey L., DC

North Dakota (cont.)

West Fargo (cont.)

The Clinic: Fhsc, PC
1207 Prairie Pkwy
(701) 492-0696

Jenkins, Ryan T., DC
Jones, Aaron B., DC
Kiecker, Samantha R., DC

West Fargo Chiropractic Center PC
205 Sheyenne Street
(701) 282-2919

Hasse, Robert L., DC
Redington, Bruce L., DC
Redington, Jonathan H., DC
Salwey, Todd A., DC

Williston

Basin Health and Spine Center PLLC Chase Lee Theige
1319 2nd Ave W
(701) 577-2472

Theige, Chase L., DC

Ceynar Chiropractic
2315 2 Ave W
(701) 572-8796

Ceynar, Kyle R., DC
Ceynar, Robert G., DC

Fischer Family Chiropractic
226 14 St W
(701) 774-8277

Fischer, Christine A., DC
Fischer, Derek D., DC

Full Circle Chiropractic PLLC
2204 2nd Ave W
(701) 774-5036

Carr, Lacee N., DC

Health Source of Williston, PC
20 West Broadway
(701) 774-3635

Nelson, Eric R., DC

Kovacs Chiropractic and Nutrition Center
2304 11th Ave W Ste 104
(701) 774-3832

Kovacs, Thomas J., DC

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING CHIROPRACTORS

North Dakota (cont.)

Williston (cont.)

Wright Chiropractic Office
2204 2nd Ave W
(701) 572-2951

Wright, Ronald A., DC

Wishek

Wishek Chiropractic Clinic
20 N 5th St
(701) 452-2593

Froehling, Eric J., DC
Volk, Clarissa K., DC

South Dakota

Aberdeen

Ivey Chiropractic Clinic
221 6th Ave SE Ste 3
(605) 225-7414

Ivey, Thomas L., DC
Johnson, Taylor J., DC

Northeast Chiropractic
416 S Dakota St Ste 1
(605) 262-4059

Anderson, Taylor R., DC

Winkler Chiropractic Clinic
803 S Main St
(605) 225-8288

Winkler, Barry J., DC

Eden

Northeast Chiropractic
319 Taft Ave
(605) 262-4060

Anderson, Taylor R., DC

Herreid

Wishek Chiropractic Clinic
121 Main St N
(605) 437-2252

Volk, Clarissa K., DC

Lemmon

Deutscher Clinics PC
11 E 4th St
(605) 374-5654

Deutscher, Joel A., DC

South Dakota (cont.)

Lemmon (cont.)

Fuerst, James, DC
1003 5th Ave W
(605) 374-5761

Fuerst, James R., DC

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING BEHAVIORAL HEALTH PROVIDERS

Minnesota

Ada

Red River Counseling PLLC
110 3rd Ave E
(218) 227-0338

- Psychology
  Hamann, Linda R., MS

Breckenridge

R P Ascano & Associates Inc.
614 Nebraska Ave
(218) 643-3867

- Psychology
  Ascano, R P., PHD

Solutions Counseling Services Inc
415 1/2 Nebraska Ave
(218) 643-9330

- Clinical Social Worker
  Thompson, Pamela J., LICSW

St Francis Medical Center
2400 St Francis Drive
(218) 643-3000

- Licensed Addiction Counselor-Chemical Dependency
  Clark, Sherri E., LAC
- Psychiatry (MD/DO)
  Torson, Nancy E., MD
- Psychology
  Ketterling, Jan E., PSYD
  Molstre, John A., PHD

Crookston

Altru Crookston
400 S Minnesota St
(218) 281-9100

- Clinical Social Worker
  Tescher, Jodi L., LICSW
- Psychiatry (MD/DO)
  Madaram, Kondal R., MD

Northwestern Mental Health Center, Inc.
603 Bruce St
(218) 281-3940

- Clinical Social Worker
  Anderson, Michael R., LICSW
  Berg, Carolyn K., LICSW
  Christie, Don, LICSW
  Denison, Janet, LICSW
  Green, Christopher J., LICSW

Minnesota (cont.)

Crookston (cont.)

Northwestern Mental Health Center, Inc. (cont.)

- Clinical Social Worker (continued)
  Hammer, Denise E., LICSW
  Hellerud, Tricia J., LICSW
  Kronlund, Shannon L., LICSW
  Mack, Brenda M., LICSW
  Miller, Tara E., LICSW
  Rustad, Erika M., LICSW
  Skavlem, Cheri L., LICSW
- Licensed Professional Clinical Counselor
  Amundson, Janet L., LPCC
  Serna, Carrie L., LPCC
  Solheim, Sheri L., LPCC
  Taylor, Heather, LPCC
- Licensed Professional Counselor/Therapist
  Williams, Gail E., LPCC
- Psychiatry (MD/DO)
  Jarmuskewicz, James R., MD
  Michels, Paul O., MD
- Psychology
  Campbell, Karen L., PHD
  Gudvangen, Denise R., PSYD
  Jorgens, Michal C., PHD
  Pedersen, Heather A., PHD

Playworks Therapy
203 W Fletcher
(218) 281-1510

- Clinical Social Worker
  Colley, Kathleen P., LICSW

Riverview Health dba Glenmore Recovery Center
23616 Us Hwy 2 SW
(218) 281-9511

- Licensed Addiction Counselor-Chemical Dependency
  Buseth, Oliver, LAC
  Johnson, Ashley A., LAC
  Niffenegger, Angela, LAC
  Reff, Thomas M., LAC

Riverview Specialty Clinic
323 S Minnesota St
(218) 281-9595

- Psychology
  King, Brenda J., PHD

Minnesota (cont.)

Crookston (cont.)

Tri County Community Corrections
816 Marin Ave Ste 110
(218) 470-8134

- Licensed Addiction Counselor-Chemical Dependency
  Thibert, Mary, LAC

E Grand Forks

Patrick Hart, LPCC
1125 18th Ave SE
(218) 289-6177

- Licensed Professional Clinical Counselor
  Hart, Patrick E., LPCC

Riverview Health dba Glenmore Recovery Center
1424 Central Ave NE
(218) 773-4994

- Licensed Addiction Counselor-Chemical Dependency
  Buseth, Oliver, LAC

Fosston

Northwestern Mental Health Center, Inc - Fosston
102 Sather Dr
(218) 281-3940

- Clinical Social Worker
  Anderson, Michael R., LICSW

Hawley

Sanford Hawley Clinic
1412 Main St
(218) 483-3564

- Psychology
  Gatheridge, Brian, PHD

Sanford Hawley Clinic
1412 Main St
(218) 483-3564

- Psychology
  Gatheridge, Brian, PHD

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING BEHAVIORAL HEALTH PROVIDERS

Drake Counseling Services, Inc
715 11 St North
Suite 204
(218) 477-1092

- Licensed Addiction Counselor-Chemical Dependency
  Flann, Kayla J., LAC
  Hersrud, Jacqueline M., LAC
  Johnson, Janna M., LAC

Duke, Bill, PhD
420 Center Ave Ste 7
(701) 241-9281

- Psychology
  Duke, Bill J., PHD

Duke, Denise, EDD
420 Center Ave Ste 7
(701) 241-9281

- Psychology
  Duke, Denise M., EDD

Hendrix Health Center
1104 7th Ave S
(218) 477-2623

- Psychology
  Bertelsen, Lora, PHD
  Lall, Rita, MS

Integrated Counseling Services Inc
1132 28th Ave S Ste 102
(218) 204-1183

- Psychology
  Follingstad, Carol C., PSYD

Karen Knutson, PhD
1506 Main Ave Ste 101
(218) 287-2872

- Psychology
  Knutson, Karen, PHD

Kolotkin, Richard, PhD
403 Center Ave Ste 601
(701) 280-2484

- Psychology
  Kolotkin, Richard A., PHD

Kuznia Colette C. LPCC
403 Center Ave Ste 405
(218) 233-9426

Kuznia Colette C. LPCC (cont.)

- Licensed Professional Clinical Counselor
  Kuznia, Colette C., LPCC

Lakeland Mental Health Center Inc
1010 32nd Ave S
(218) 233-7524

- Clinical Social Worker
  Kuntz, Dawn M., LICSW
  Larson, Julie D., LICSW
  Martin, Brian J., LICSW
  May, Coleen R., LICSW
  Ross, Katherine M., LICSW
  Steer, Abby L., LICSW
  Toutges, Cheryl, LICSW
  Weickert, Craig L., LICSW
  Wieser, Allison M., LICSW
- Licensed Professional Clinical Counselor
  Stielow, Ashley L., LPCC
- Psychiatry (MD/DO)
  Dizon, Amador M., MD
  Erickson, Chad C., MD
  Michels, Paul O., MD
  Staton, R D., MD
- Psychology
  Molstre, John A., PHD

Lee-Eckes, Melissa, LICSW
1506 Main Ave Ste 102
(218) 443-0642

- Clinical Social Worker
  Lee-Eckes, Melissa A., LICSW

Prairie St Johns
2925 20th St S
(218) 284-0300

- Clinical Social Worker
  Leverence, Melissa, LICSW
  Madler, Tamara, LICSW

Red River Counseling PLLC
403 Center Ave Ste 410
(218) 227-0338

- Psychology
  Hamann, Linda R., MS

Sanford Moorhead Clinic
4000 28th Ave S
(701) 234-3200

- Clinical Social Worker
  Foldesi-Penas, Tracy M., LICSW
  Hubrig, Joni, LICSW
- Psychiatric Nurse
  Cameron, Kathryn M., CNS

Sanford Moorhead Clinic
4000 28th Ave S
(701) 234-3200

- Clinical Social Worker
  Brown, Chad J., LICSW
  Foldesi-Penas, Tracy M., LICSW
  Hubrig, Joni, LICSW
- Psychiatric Nurse
  Cameron, Kathryn M., CNS
- Psychology
  Maley, Robyn, PSYD
  Preussler, Rebecca S., PSYD

Sanford Moorhead Clinic
4000 28th Ave S
(701) 234-3200

- Psychiatric Nurse
  Cameron, Kathryn M., CNS
- Psychiatry (MD/DO)
  Fleissner, Rachel M., MD
- Psychology
  Maley, Robyn, PSYD

Solutions Behavioral Healthcare Professionals, Inc.
891 Belsly Blvd
(218) 287-4338

- Clinical Social Worker
  Gast, Kelli A., LICSW
  Grandpre, Brian M., LICSW
  Joyce, Charles M., LICSW
  Lovehaug, Michele L., LICSW
  Moen, Kristin M., LICSW
  Moynihan, Peter J., LICSW
  Narum, Denette M., LICSW
  Stallman, Sara A., LICSW
- Psychiatry (MD/DO)
  Carlson, David L., MD
  Hanisch, Stefanie U., MD
- Psychology
  Cox, Joseph M., PSYD
  Ochsendorf, Amy L., PSYD

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING BEHAVIORAL HEALTH PROVIDERS

Minnesota (cont.)

Moorhead (cont.)

Solutions Behavioral Healthcare Professionals, Inc. (cont.)
- Psychology (continued)
  Paulson, Michael D., PHD
  Witte-Bakken, Jan K., PHD

The Village Family Service Center
1401 8 St S
(701) 451-4811
- Clinical Social Worker
  Bernardy, Amanda N., LICSW
  Medenwald, Joni L., LICSW

Ulen

Sanford Health Ulen Clinic
108 Viking Ave W
(218) 596-8867
- Psychiatry (MD/DO)
  Lawrence, Scott A., MD

Montana

Sidney

District II Alcohol & Drug
209 2 St SE
(406) 433-4097
- Licensed Addiction Counselor-Chemical Dependency
  Anderson, Tim G., LAC

North Dakota

Ashley

Ashley Medical Center
612 Center Ave N
(701) 288-3448
- Psychiatry (MD/DO)
  Oliveira-Filho, Edgar K., MD

Beulah

Coal Country Community Health Center
1312 Highway 49 N
(701) 873-4445
- Clinical Social Worker
  Herman, Melissa M., LICSW
- Licensed Addiction Counselor-Chemical Dependency
  Herman, Melissa M., LAC
  Oster, Sharold E., LAC

North Dakota (cont.)

Beulah (cont.)

Coal Country Community Health Center (cont.)
- Licensed Addiction Counselor-Chemical Dependency (continued)
  White, Darlene S., LAC

Bismarck

A Balanced Mind Psychiatric Wellness Center
4023 State St Ste 100
(701) 751-3737
- Psychiatry (MD/DO)
  Delap, Susan E., MD

A Change of Heart
1424 W Century Ave
Ste 207
(701) 471-9820
- Clinical Social Worker
  Colton, Deborah D., LICSW

Alliance Mediation & Therapy, PC
418 E Broadway Ave
Ste 216
(701) 751-1549
- Clinical Social Worker
  Huebschwerlen, Stephen, LICSW

Anchor Christian Counseling Inc
1501 N 12th St
(701) 255-3325
- Licensed Professional Clinical Counselor
  Holden, Harley A., LPCC

Basaraba Counseling Service
433 E Bismarck Expwy #3
(701) 224-1615
- Licensed Addiction Counselor-Chemical Dependency
  Basaraba, Rose, LAC

Center For Family Medicine
701 E Rosser
(701) 751-9500
- Licensed Professional Clinical Counselor
  Luger, Brynn, LPCC

North Dakota (cont.)

Bismarck (cont.)

Chambers & Blohm Psychological Services, PC
309 N Mandan St Ste 1
(701) 323-0924
- Clinical Social Worker
  Bosch, Debra M., LICSW
- Licensed Addiction Counselor-Chemical Dependency
  Weisz, Shannon P., LAC
- Psychiatric Nurse
  Fike, Michelle M., PNU
  Hellman, Lauree L., PNU
- Psychology
  Blohm, Kathy, PHD
  Johnson, Robert A., PHD
  Weisz, Shannon P., PSYD

Charley Joyce, LICSW, Counseling & Consultation, LLC
200 E Main Ave Ste 102a
(701) 471-6487
- Clinical Social Worker
  Joyce, Charles M., LICSW

Choices Counseling & Educational Center
1655 N Grandview Ln 204
(701) 751-2020
- Licensed Professional Clinical Counselor
  Herner, Diana L., LPCC

Crosspoint Counseling
1655 N Grandview Lane
#204
(701) 751-2020
- Licensed Professional Clinical Counselor
  Mitzel, Julie M., LPCC

Dakota Institute of Trauma Therapy PC
4023 State St Ste 120
(701) 751-4447
- Clinical Social Worker
  Ritz, Lynnea J., LICSW
- Licensed Addiction Counselor-Chemical Dependency
  Klein-Buffington, Shelley K., LAC

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING BEHAVIORAL HEALTH PROVIDERS

North Dakota (cont.)
Bismarck (cont.)

Decoteau Trauma-Informed Care & Practice, PLLC Td
515 1/2 E Broadway Ave
Ste 106
(701) 751-0443

- Clinical Social Worker
  Chaussee, Jerome, LICSW
  Herzog, Susan K., LICSW
- Psychology
  Decoteau, Tami J., PHD
  Gustafson, Lisa A., PHD

Haugen, Stacey, CNS
6221 University Dr
(701) 258-4483

- Psychiatric Nurse
  Haugen, Stacey S., CNS

Heartview Foundation
101 E Broadway Ave
(701) 222-0386

- Licensed Addiction Counselor-Chemical Dependency
  Carlson, Bruce L., LAC
  Ell, Candace J., LAC
  Fetting, Brenda M., LAC
  Gerhardt, Ronald J., LAC
  Meier, Shawn M., LAC
  Miller, Kay A., LAC
  Olson, Darcy C., LAC
  Peet, Roger M., LAC
  Schwan, Bruce, LAC
  Schwehr, Marjean L., LAC
  Snyder, Kurt A., LAC
  Stroup-Menge, Elizabeth A., LAC
- Psychiatry (MD/DO)
  Henke, Melissa J., MD
- Psychology
  Peterson, Peter, PHD

Kehrwald, Edward, PhD
721 Memorial Hwy
(701) 224-1897

- Psychology
  Kehrwald, Edward, PHD

Kuchler, Christine, PhD
721 Memorial Highway
(701) 224-1897

- Psychology
  Kuchler, Christine, PHD

North Dakota (cont.)
Bismarck (cont.)

Link Counseling Service, PC
1655 N Grandview Lande
#204
(701) 751-2020

- Licensed Professional Clinical Counselor
  Link, Annette, LPCC

Link Psychological Services, PC
1424 W Century Ave
Suite 207
(701) 223-3571

- Psychology
  Link, James P., PSYD

Mueller, Karen, LICSW
400 E Broadway Ste 611
(701) 223-7540

- Clinical Social Worker
  Mueller, Karen L., LICSW

New Freedom Center
905 E Interstate Ave
(701) 222-4673

- Licensed Addiction Counselor-Chemical Dependency
  Elefson, Richard D., LAC
  Knopik, James A., LAC

Nu Vation Health Services
600 2 St S Ste 201
(701) 258-3780

- Clinical Social Worker
  Beck, Dean M., LICSW
  Porter, Theresa A., LICSW

Pathway To Freedom
418 E Rosser Ave Ste A
(701) 426-6308

- Licensed Addiction Counselor-Chemical Dependency
  Olson, Jeff R., LAC

Resiliency Clinical Services
515 1/2 E Broadway Ave
#106
(701) 751-2777

- Clinical Social Worker
  Herzog, Susan K., LICSW

North Dakota (cont.)
Bismarck (cont.)

Sanford Children's North Clinic
765 W Interstate Ave
(701) 323-3700

- Psychology
  Doerner, Mark, PHD

Sanford Clinic
222 N 7th St
(701) 323-6000

- Clinical Social Worker
  Brown, Sharon E., LICSW
  Stafford, Darla J., LICSW
- Psychiatric Nurse
  Melberg, Tiffany A., PNU
  Schirado, Kevin G., CNS
- Psychiatry (MD/DO)
  Shrestha, Sacheen, MD
- Psychology
  Brown, Marland C., PSYD
  Doppler, Matthew J., PHD

Sanford Health Dakota Childrens Advocacy Center
200 E Main St #301
(701) 323-5626

- Licensed Professional Clinical Counselor
  Condol, Paula J., LPCC
  Hilfer, Shannon L., LPCC

Sanford Medical Center
300 N 7th St
(701) 323-6000

- Clinical Social Worker
  Brown, Sharon E., LICSW
  Charbonneau, Lori, LICSW
  Stafford, Darla J., LICSW
- Licensed Professional Clinical Counselor
  Condol, Paula J., LPCC
  Hilfer, Shannon L., LPCC
- Psychiatric Nurse
  Melberg, Tiffany A., PNU
- Psychiatry (MD/DO)
  Balf, Gabriela, MD
  Belzer-Curl, Gretchen G., MD
  Collier, Jeanine S., MD
  Gibson, David K., MD
  Haaland, Robin M., MD
  Henke, Melissa J., MD
  Huber, Cheryl, MD
  Pathak, Prem N., MD

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING BEHAVIORAL HEALTH PROVIDERS

Sanford Medical Center (cont.)

- Psychiatry (MD/DO) (continued)
  Shrestha, Sacheen, MD
- Psychology
  Arndorfer, Richard E., PHD
  Brown, Marland C., PSYD
  Doerner, Mark, PHD
  Doppler, Matthew J., PHD
  Ghering, Karli, PHD
  Reno, Claudette M., PHD
  Schaaf Gallagher, Marie A., PHD

Sanford Seventh and Rosser Clinic
414 N 7th St
(701) 323-6815

- Clinical Social Worker
  Bashus, Sara R., LICSW
  Charbonneau, Lori, LICSW
  Stafford, Darla J., LICSW
- Psychiatric Nurse
  Melberg, Tiffany A., PNU
  Schirado, Kevin G., CNS
- Psychiatry (MD/DO)
  Balf, Gabriela, MD
  Gibson, David K., MD
  Haaland, Robin M., MD
  Henke, Melissa J., MD
  Huber, Cheryl, MD
  Pathak, Prem N., MD
  Shrestha, Sacheen, MD
- Psychology
  Arndorfer, Richard E., PHD
  Doerner, Mark, PHD
  Doppler, Matthew J., PHD
  Ghering, Karli, PHD
  Herrick, Christen, PHD
  Reno, Claudette M., PHD
  Schaaf Gallagher, Marie A., PHD

Soul Survivor Counseling Services, PC
1120 College Dr Ste 201
(701) 258-2008

- Licensed Professional Clinical Counselor
  Martin, Andrea J., LPCC

St Alexius Medical Center
900 E Broadway Ave
(701) 530-7194

- Clinical Social Worker
  Schoenhard, Kari J., LICSW
  Wangler, Valentine, LICSW
- Licensed Addiction Counselor-Chemical Dependency
  Motis, Charles R., LAC
  Werre, Richard, LAC
- Licensed Professional Clinical Counselor
  Millner, Paul D., LPCC
  Motis, Charles R., LPCC
  Olson, Thomas A., LPCC
- Psychiatry (MD/DO)
  Capan, Michael P., MD
  Dahmen, Kevin R., MD
  Johnson, Terry M., MD
  Mirzai, Michael, MD
  Nelson, Diane L., MD
  Row, Jeffrey H., MD
  Sanches, Marsal, MD
  Van Valkenburg, Daisy R., MD
- Psychology
  Berentson, Lea J., PHD
  Brooks, David A., PHD
  Degree, Craig E., PHD
  Horner, Sara M., PSYD
  Lang, Marny, PSYD

St Sophies, LLC
3000 N 14th St #2a
(701) 252-2001

- Clinical Social Worker
  Madeen, Rebecca L., LICSW
- Licensed Professional Clinical Counselor
  Hjelle, Catherine A., LPCC
- Psychiatry (MD/DO)
  Kenney, Emmet M., MD
- Psychology
  Schumacher, Kevin, PHD

The Kids Therapy Center
600 S 2nd St Ste 201
(701) 751-0384

- Licensed Professional Clinical Counselor
  Meyers, Valerie, LPCC

The Village Family Service Center
107 West Main Suite 350
(701) 451-4900

- Licensed Professional Clinical Counselor
  Thompson, Anna, LPCC

True North Solutions
418 N 2nd Street
(701) 224-8783

- Psychiatric Nurse
  Engel, Bonnie, PNU

West Central Human Service Center
1237 W Divide Ave Ste 5
(701) 328-8888

- Clinical Social Worker
  Best, Ariana J., LICSW
  Chaussee, Jerome, LICSW
  Dailey, Stacie R., LICSW
  Eckroth, Gordon, LICSW
  Gienger, Tim J., LICSW
  Lelm, Jacqueline M., LICSW
  Nieuwsma, Heidi, LICSW
  Sauer, Jerrica L., LICSW
  Schon, Deborah K., LICSW
  Tellmann, Janna, LICSW
- Licensed Addiction Counselor-Chemical Dependency
  Combs, Miranda, LAC
  Goldade, Jennifer L., LAC
  Hultin, Dawn L., LAC
  Ibach, Heather R., LAC
  Janzer, Mandi L., LAC
  Johnson, Carmen C., LAC
  Karlin, Corinne J., LAC
  Kitzan, Justun J., LAC
  Mickelson, David H., LAC
  Mock, Sue A., LAC
  Mohl, Brenda E., LAC
  Rennich, Jennifer L., LAC
  Ridl, Jeffrey G., LAC
  Ronsberg, Elise A., LAC
  Sather, Katherine, LAC
  Schatz, Kiki J., LAC
  Selk, Jennifer H., LAC
  Thompson, Sandy K., LAC

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING BEHAVIORAL HEALTH PROVIDERS

North Dakota (cont.)
Bismarck (cont.)

West Central Human Service Center (cont.)
- Licensed Professional Clinical Counselor
  Hellman, Lory, LPCC
  McConnachie, Rebecca, LPCC
- Psychiatric Nurse
  Schirado, Kevin G., CNS
- Psychiatry (MD/DO)
  Capan, Michael P., MD
  Eick, Thomas J., DO
  McLean, Andrew J., MD
- Psychology
  Aasen, Paulette, PHD
  Hay, Lisa D., PHD
  Kehrwald, Edward, PHD
  Larson, Roger A., PHD

Youth Works
221 W Rosser Ave
(701) 255-6909
- Clinical Social Worker
  Heitkamp, Melanie L., LICSW

Bottineau

Corey J Gorder
104 11th St W
(701) 201-0076
- Licensed Professional Clinical Counselor
  Gorder, Corey J., LPCC

Rural Mental Health Consortium
316 Ohmer St
(701) 228-9300
- Psychiatric Nurse
  Sartain, Cheryl A., PNU

Ryan Henry Consulting, LLC
609 Jay St
(701) 263-1088
- Clinical Social Worker
  Henry, Ryan M., LICSW

Bowman

West River Health Service
608 Highway 12 W
(701) 523-3271
- Licensed Professional Clinical Counselor
  Jorgenson, Tara L., LPCC

North Dakota (cont.)
Carrington

Fuher, Jessie, LPCC
800 N 4th St
(701) 252-9838
- Licensed Professional Clinical Counselor
  Fuher, Jessie K., LPCC

Cavalier

Altru Cavalier
201 E 3rd Ave S
(701) 265-8338
- Clinical Social Worker
  Conrad, Danielle M., LICSW
- Psychiatry (MD/DO)
  Feldman, Ellen K., MD
  Madaram, Kondal R., MD

Crosby

Rural Mental Health Consortium
705 4th St SE
(701) 857-2199
- Psychiatric Nurse
  Sartain, Cheryl A., PNU

Devils Lake

Advanced Counseling For Change, PLLC
424 3 St SE
(701) 351-1182
- Clinical Social Worker
  Hawley, Lisa, LICSW

Altru Clinic Lake Region
1001 7th St
(701) 662-2157
- Clinical Social Worker
  Conrad, Danielle M., LICSW
- Psychiatry (MD/DO)
  Feldman, Ellen K., MD
  Madaram, Kondal R., MD

Blooming Prairie Assessment & Therapy Center, PC
211 4th St NE Ste 4
(701) 662-8255
- Psychology
  Kenney, Sara K., PSYD
  Normandin, Sherman, PHD

North Dakota (cont.)
Devils Lake (cont.)

Christofferson Consulting
11 N College Drive Ste C
(701) 665-3030
- Clinical Social Worker
  Christofferson, Sandi C., LICSW

Country Counseling and Consulting
400 12 Ave NE Ste D
(701) 665-5433
- Clinical Social Worker
  Hanson, Deborah L., LICSW

Hope Unlimited Inc
400 12th Ave NE Ste D
(701) 351-1934
- Clinical Social Worker
  Dobler, Janet F., LICSW

Lake Region Human Service Center
200 Highway 2 SW
(701) 665-2200
- Clinical Social Worker
  Boe, Jamie J., LICSW
  Boknecht, Douglas, LICSW
  Borchardt, Abby, LICSW
  Cariveau, Jacqueline M., LICSW
  Hultgren, Amy M., LICSW
  Kligmann, Marci L., LICSW
  Shock, Michael A., LICSW
  Wilson, Heather D., LICSW
- Licensed Addiction Counselor-Chemical Dependency
  Fisher, Troy A., LAC
  Hellerud, Elizabeth J., LAC
  Juntunen, Kevin R., LAC
  McCrea, Adalia M., LAC
  McEwen, Billy, LAC
  Reichenberg, Kathleen E., LAC
  Schmidt-Boknecht, Ava V., LAC
- Psychiatry (MD/DO)
  Clinkenbeard, James, MD
  McLean, Andrew J., MD
- Psychology
  Bradley, Patricia J., PSYD
  Kuna, David P., PHD
  Newberry, Donald E., PHD

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING BEHAVIORAL HEALTH PROVIDERS

North Dakota (cont.)
Devils Lake (cont.)

Lifewise Christian Counseling
1820 Walnut St E Ste 7
(701) 662-1046

- Clinical Social Worker
  Cox, Darrin L., LICSW

New Horizons Counseling Services
217 Grand View Ave
(701) 662-5590

- Clinical Social Worker
  Rose, Roxanne M., LICSW

The Village Family Service Center
224 4th Street NW Ste 5
(701) 662-6776

- Clinical Social Worker
  Andersen, Jaclyn, LICSW
  Owen, Brenda L., LICSW

Volk Human Services, PC
501 3rd St NE Ste 1
(701) 662-1911

- Psychology
  Volk, Gregory S., PSYD

Dickinson

Badlands Human Service Center
300 13 Ave W Ste 1
(701) 227-7541

- Clinical Social Worker
  Fast, Russell, LICSW
  Gullickson, Candice M., LICSW
  Siegler, Allen L., LICSW
  Waller, Linda K., LICSW
- Licensed Addiction Counselor-Chemical Dependency
  Combs, Miranda, LAC
  Karlin, Corinne J., LAC
  Ronsberg, Elise A., LAC
  Schatz, Kiki J., LAC
  Thompson, Sandy K., LAC
  Waller, Linda K., LAC
- Licensed Professional Clinical Counselor
  Lefor, Katie L., LPCC
  Mack, Kimberly M., LPCC
- Psychiatry (MD/DO)
  McLean, Andrew J., MD
  Van Valkenburg, Daisy R., MD

North Dakota (cont.)
Dickinson (cont.)

Badlands Human Service Center (cont.)

- Psychology
  Aasen, Paulette, PHD
  Boomgaarden, Renee L., PHD
  Demolen, Richard N., PSYD
  Gabbert, Nancy A., PHD
  Hertler, Chris A., PHD
  Wu, Zongjian, PSYD

Dickinson Family Counseling Center, PLLC
11 2nd Ave E Ste B
(701) 483-9720

- Licensed Professional Clinical Counselor
  Anderson, Lacey R., LPCC
- Psychology
  Baer, Robert, PSYD

Heart River Alcohol Drug Inc.
7 1st Ave W Ste 101
(701) 483-0795

- Clinical Social Worker
  Waller, Linda K., LICSW
- Licensed Addiction Counselor-Chemical Dependency
  Waller, Linda K., LAC
  Wieglenda, John H., LAC
  Wieglenda, Marsha, LAC

Prairie Horizons
25 1st Ave W Ste 140
(701) 483-0058

- Clinical Social Worker
  Dassinger, Gerald M., LICSW

Sacajawea Substance Abuse Counseling and Drug Testing Center
112 3 St W Ste 301
(701) 483-9150

- Licensed Addiction Counselor-Chemical Dependency
  Kuhn, Janet L., LAC
  Wanner, Victor, LAC

North Dakota (cont.)
Dickinson (cont.)

Sanford Health Dickinson Clinic
2615 Fairway St
(701) 456-6000

- Psychology
  Doerner, Mark, PHD

Sanford Health Family Connection Safe Visitation Center
128 1st St W #2
(701) 483-7233

- Licensed Professional Clinical Counselor
  Condol, Paula J., LPCC
  Hilfer, Shannon L., LPCC

St Josephs Hospital & Health Center
30 7th St W
(701) 456-4000

- Psychiatry (MD/DO)
  Fornal, Robert E., MD
  Lopez, David J., MD

Therapy Solutions
448 21 St W Ste D-1
(701) 483-1000

- Clinical Social Worker
  Erie, Brenda J., LICSW

Westwind Consulting Center
135 W Villard St
(701) 225-1050

- Psychology
  Fehr, Alan J., PHD
  Hall, Shelly, PSYD

Drayton

Altru Drayton
1003 N Main St
(701) 454-3311

- Psychiatry (MD/DO)
  Madaram, Kondal R., MD

Dunseith

Cornerstone Addiction
101 Peace Garden Ave
(701) 244-2299

- Licensed Addiction Counselor-Chemical Dependency
  Berdahl, Linda A., LAC

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING BEHAVIORAL HEALTH PROVIDERS

North Dakota (cont.)

Edgeley

Healing Hearts Counseling
305 5th Ave
(701) 535-0616

- Clinical Social Worker
  Simle, Susan A., LICSW

Ellendale

Healing Hearts Counseling
240 Main
(701) 535-0616

- Clinical Social Worker
  Simle, Susan A., LICSW

Life Seasons Counseling, PLLC
240 Main St
(701) 678-4800

- Licensed Professional Clinical Counselor
  Elhard, Deborah J., LPCC

Life Seasons Counseling, PLLC
240 Main St
(701) 678-4800

- Licensed Professional Clinical Counselor
  Elhard, Deborah J., LPCC

Fargo

7 Day Clinic
1517 32nd Ave S
(701) 232-6211

- Psychology
  Hartson, David, PHD

7 Day Clinic -Osgood
4622 40th Ave S
(701) 364-2909

- Psychology
  Hartson, David, PHD

Altendorf Counseling & Associates
1351 Page Dr SW Ste 100
(701) 478-4044

- Licensed Professional Clinical Counselor
  Altendorf, John, LPCC

Andersen Counseling
624 Main Ave Suite 4b
(701) 793-7822

North Dakota (cont.)

Fargo (cont.)

Andersen Counseling (cont.)

- Licensed Professional Clinical Counselor
  Andersen, Mary Jo, LPCC

Avail Psychological and Addiction Services, PLLC
112 Univ Dr N Ste 200
(701) 566-5272

- Licensed Addiction Counselor-Chemical Dependency
  Busch, Megan M., LAC
  Karjalainen, Jessica R., LAC
- Psychology
  Sternhagen, Scott V., PHD

Barbara Stanton, LPCC
3309 Fiechtner Drive
Suite C
(701) 356-2273

- Licensed Professional Clinical Counselor
  Stanton, Barbara K., LPCC

Benson Psychological Services
1308 23rd St S Ste G
(701) 297-7540

- Clinical Social Worker
  Flanders, Lynne, LICSW
  Rorvig, Lisa K., LICSW
- Licensed Professional Clinical Counselor
  Forde, June M., LPCC
  Singh, Usha, LPCC
- Psychology
  Benson, Stacey L., PSYD
  Darveaux, Dion X., PHD
  Phillippi, Jay R., PHD
  Quam, Sara D., PSYD
  Smith, Kelly C., PSYD
  Stone, Eileen M., PSYD

Bogenreif, Marian, LPCC, LAC
118 Broadway Ste 601
(218) 736-5009

- Licensed Addiction Counselor-Chemical Dependency
  Bogenreif, Marian F., LAC
- Licensed Professional Clinical Counselor
  Bogenreif, Marian F., LPCC

North Dakota (cont.)

Fargo (cont.)

Cariveau, Geraldine V, LPCC
3107 Westgate Dr
(701) 232-7374

- Licensed Professional Clinical Counselor
  Cariveau, Geraldine V., LPCC

Catholic Charities North Dakota
5201 Bishops Blvd Ste B
(701) 235-4457

- Clinical Social Worker
  Anderson, Jennifer L., LICSW
- Licensed Professional Clinical Counselor
  Johnson, Catherine A., LPCC

Center For Psychiatric Care
1202 23rd St S
(701) 478-7887

- Psychiatry (MD/DO)
  Lind, Jackson W., MD

Child Family Therapy Associates
1121 Westrac Dr Ste 204
(701) 893-3419

- Clinical Social Worker
  Fry, Lisa M., LICSW
  Steiner, Julie A., LICSW
- Psychology
  Shawchuck, Carita R., PHD

Christeen A McLain dba Consultation & Movement
1402 Broadway N
(701) 388-1813

- Licensed Addiction Counselor-Chemical Dependency
  McLain, Christeen A., LAC
- Psychiatric Nurse
  McLain, Christeen A., PNU

Clarity Counseling
808 3 Ave S Suite 303
(701) 356-5545

- Licensed Professional Clinical Counselor
  Tallakson, Martin E., LPCC

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING BEHAVIORAL HEALTH PROVIDERS

Clark, Gregory LICSW
118 Broadway Ste 810
(701) 799-8785

- Clinical Social Worker
  Clark, Gregory D., LICSW

Claudia McGrath Counseling HHN
417 38th St SW Ste B
(701) 277-0654

- Licensed Addiction Counselor-Chemical Dependency
  McGrath, Claudia M., LAC
- Licensed Professional Clinical Counselor
  McGrath, Claudia M., LPCC

Conscious Living Counseling and Education Center
26 Roberts St Ste 114
(701) 371-6211

- Licensed Professional Clinical Counselor
  Jensen, Kama B., LPCC

Counseling Etc
5731 18th St S
(701) 205-1743

- Licensed Professional Clinical Counselor
  Hundley, Steven F., LPCC

D & L PC dba Quality Life
1316 23rd Street S
(701) 478-0333

- Clinical Social Worker
  Madler, Tamara, LICSW
- Licensed Professional Clinical Counselor
  Emmel, Jenny E., LPCC
  Holt Johnson, Georgia M., LPCC
  Naslund, Angell M., LPCC
- Psychiatric Nurse
  Volness, Linda J., CNS

Daigle Professional Counseling Services PLLC
1323 23rd St S Ste H
(701) 232-2886

- Licensed Addiction Counselor-Chemical Dependency
  Daigle, Rachel, LAC

Daigle Professional Counseling Services PLLC (cont.)

- Licensed Professional Clinical Counselor
  Daigle, Rachel, LPCC

Dakota Boys Ranch
1641 31st Ave S
(701) 237-3123

- Clinical Social Worker
  Wilkie, Christy, LICSW
- Licensed Addiction Counselor-Chemical Dependency
  Waind, Melissa, LAC
  Wendt, Jamie L., LAC
- Licensed Professional Clinical Counselor
  Simonson, Boni M., LPCC
  Vetter, Sara J., LPCC
- Psychiatry (MD/DO)
  Martinsen, Wayne L., MD

Dakota Boys Ranch
7151 15th St S
(701) 857-4232

- Clinical Social Worker
  Eissinger, Rebecca D., LICSW

Dakota Family Services
7151 15th St S
(701) 364-2950

- Clinical Social Worker
  Wilkie, Christy, LICSW
- Psychiatry (MD/DO)
  Martinsen, Wayne L., MD
- Psychology
  Willert Jr, Meryl G., PHD

Deer Oaks Mental Health Associates PC At Bethany On 42nd
4255 30th Ave S
(701) 478-8900

- Psychology
  Rosenheim, Harold D., PHD

Denton-Graber, Ruth LPCC
3309 Fiechtner Drive
Ste C
(701) 356-2273

- Licensed Professional Clinical Counselor
  Denton-Graber, Ruth M., LPCC

Destiny & Purpose, LLC
3220 S 18th St Ste 8f
(734) 262-4115

- Clinical Social Worker
  Walker, Paulette, LICSW

Discovery Counseling Center
115 N University Dr
(701) 237-4542

- Psychology
  Barrett, Terence W., PHD

Drake Counseling Services, Inc
1202 23rd St S
(701) 293-5429

- Licensed Addiction Counselor-Chemical Dependency
  Bartsch, Jennifer A., LAC
  Drake, Charles, LAC
  Flann, Kayla J., LAC
  Hersrud, Jacqueline M., LAC
  Johnson, Janna M., LAC
  Walen, Charlyne, LAC
  Williams, Sheena M., LAC
- Licensed Professional Clinical Counselor
  Drake, Charles, LPCC

Edwards, Peter dba Journeying Together Counseling Service
2631 12th Ave So
(701) 630-9214

- Clinical Social Worker
  Edwards, Peter A., LICSW

Essentia Health 32nd Avenue Clinic
3000 32nd Ave S
(701) 364-8000

- Psychology
  Hauge, Gregory A., PHD
  Kirchner, Joel T., PSYD

Essentia Health South University Clinic
1702 University Dr S
(701) 364-3300

- Psychology
  Hauge, Gregory A., PHD

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING BEHAVIORAL HEALTH PROVIDERS

Family Institute PC
4955 17th Ave S Ste 122
(701) 282-8510

- Psychology
  Adams Larsen, Margo A., PHD
  Moe, Brian K., PHD
  Paulson, Michael D., PHD

Fraser, Ltd
2902 University Dr S
(701) 232-3301

- Clinical Social Worker
  Starkey-Labat, Julie K., LICSW

Gail Reierson Consulting
2524 18th St S
(701) 730-6279

- Licensed Professional Clinical Counselor
  Reierson, Gail N., LPCC

Gjerde, Elizabeth LPCC dba Accent On Care
3309 Fiechtner Dr Ste C
(701) 866-3969

- Licensed Professional Clinical Counselor
  Gjerde, Elizabeth A., LPCC

Inner Light Counseling Services
1323 23 St S Suite H
(701) 478-0906

- Licensed Professional Clinical Counselor
  Axtman, Mystal R., LPCC

Jeffrey C Gregory, PhD PC dba Gregory Psychology Solutions
1323 23rd St S Ste B
(701) 293-7477

- Psychology
  Gregory, Jeffrey C., PHD

Johnson Counseling & Consulting
3309 Fiechtner Drive
Suite C
(701) 356-2273

- Licensed Professional Clinical Counselor
  Johnson, Cynthia S., LPCC

Johnson, Tina M, LICSW
1321 23rd St S Ste H
(701) 261-9685

- Clinical Social Worker
  Johnson, Tina M., LICSW

Joy Belzer Counseling
1330 Page Dr S Ste 202b
(701) 367-5985

- Licensed Professional Clinical Counselor
  Belzer, Joy A., LPCC

Life Choices Counseling
1790 32nd Ave S Ste 3
(701) 205-2592

- Clinical Social Worker
  Pagenkopf, Linda L., LICSW

Lind, Jackson W, MD
1202 23 St S Ste 3
(701) 478-7887

- Psychiatry (MD/DO)
  Lind, Jackson W., MD

Medenwald, Joni L., LICSW dba Accent On Care
3309 Fiechtner Dr Ste C
(701) 388-3045

- Clinical Social Worker
  Medenwald, Joni L., LICSW

Neuropsychology Associates PA
1220 Main Ave #100
(701) 297-7588

- Psychology
  Meidinger, Amy L., PHD
  Swenson, Rodney, PHD

Nielsen Counseling
1919 N Univ Dr Sgc C119
(701) 231-7676

- Licensed Professional Clinical Counselor
  Nielsen, Robert C., LPCC

Prairie St Johns
510 4th St S
(701) 476-7200

- Clinical Social Worker
  Clark, Gregory D., LICSW
  Faul, Jennifer J., LICSW
  Halone, Carole, LICSW

Prairie St Johns (cont.)

- Clinical Social Worker (continued)
  Kottenbrock, Gerard, LICSW
  Marberry, Mario, LICSW
  Metcalfe, William A., LICSW
  Walker, Paulette, LICSW
- Licensed Addiction Counselor-Chemical Dependency
  Brink, William D., LAC
  Curran, Patrick C., LAC
  Grahn, Erin M., LAC
  Luzier, Marikay, LAC
  Makonnen, Kimberly R., LAC
  Onungwe, Mary O., LAC
  Phillips, Brenda R., LAC
  Readel, Kelly D., LAC
  Shiaro, Chris M., LAC
  Sorenson, Tonya S., LAC
  Wendt, Jamie L., LAC
- Licensed Professional Clinical Counselor
  Denton-Graber, Ruth M., LPCC
  Pfeifer, James, LPCC
  Stanton, Barbara K., LPCC
- Psychiatry (MD/DO)
  Akgul, Fetih, MD
  Anunobi, Echezona, MD
  Armstrong, Lacey L., MD
  Bronson, Natalya, MD
  Burtnett, Lawana M., MD
  Haliburton, James R., MD
  Hess, Douglas J., DO
  Jarvis, Julie O., DO
  Jordan, Natalie D., MD
  Kelly, Edward L., MD
  Mach, David J., DO
  Meany, Gavin P., MD
  Meek, Steven J., MD
  Meza, Eduardo E., MD
  Miller, Halbert B., MD
  Nadkarni, Nivedita S., MD
  Rauch, Harry B., MD
  Siemens, Charlotte A., MD
  Smith, Timothy A., MD
  Underwood, Amy K., MD
  Wichmann, Gerry-Lynn, MD
- Psychology
  Frissell, Jenny, PHD
  Juanto-Laver, Nils-Erik J., PHD

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING BEHAVIORAL HEALTH PROVIDERS

North Dakota (cont.)
Fargo (cont.)

Psychiatry Networks
300 NP Ave Suite 101
(701) 478-6700

- Psychiatry (MD/DO)
  Fornal, Robert E., MD
  Lopez, David J., MD

Rohrer, Mark, LICSW
1321 23 St S Suite H
(701) 720-9093

- Clinical Social Worker
  Rohrer, Mark A., LICSW

Sanford 1717 Medical Building
1717 S University Drive
(701) 234-2000

- Licensed Professional Clinical Counselor
  Woodbury, Kara B., LPCC
- Psychiatric Nurse
  Roerig, Deborah B., CNS
- Psychiatry (MD/DO)
  Burd, Ronald M., MD
- Psychology
  Kadlec, Kelly E., EDD
  Lahaise, Kim T., PHD
  Myers, Tricia C., PHD
  Swan-Kremeier, Lorraine, PHD

Sanford 1717 Medical Building
1717 South University Dr
(701) 234-2000

- Licensed Professional Clinical Counselor
  Woodbury, Kara B., LPCC
- Psychiatric Nurse
  Roerig, Deborah B., CNS
- Psychiatry (MD/DO)
  Burd, Ronald M., MD
  Mayfield Jorgensen, Michelle L., MD
- Psychology
  Kadlec, Kelly E., EDD
  Lahaise, Kim T., PHD
  Myers, Tricia C., PHD
  Swan-Kremeier, Lorraine, PHD

Sanford 2801 Medical Building
2801 University Dr S
(701) 234-5673

North Dakota (cont.)
Fargo (cont.)

Sanford 2801 Medical Building (cont.)

- Psychiatry (MD/DO)
  Karaz, Samy, MD

Sanford 2801 Medical Building
2801 University Dr S
(701) 234-5673

- Psychiatry (MD/DO)
  Karaz, Samy, MD

Sanford Broadway Clinic
801 Broadway North
(701) 234-2000

- Clinical Social Worker
  Hubrig, Joni, LICSW
- Psychiatry (MD/DO)
  Haider, Naveed, MD
  Olson, Robert J., MD
- Psychology
  Christianson, Kenneth E., PHD

Sanford Broadway Clinic
801 Broadway North
(701) 234-2000

- Clinical Social Worker
  Brown, Chad J., LICSW
  Hubrig, Joni, LICSW
  Syverson, Kate, LICSW
- Psychiatry (MD/DO)
  Haider, Naveed, MD
  Kohoutek, Bradley W., MD
  Olson, Robert J., MD
  Tavakoli, Sirpa, MD
- Psychology
  Biebl, Sara, PHD
  Brower Breitwieser, Carrie, PHD
  Christianson, Kenneth E., PHD
  Hines, Lindsay, PHD

Sanford Childrens Southwest Clinic
2701 13th Ave S
(701) 234-3600

- Clinical Social Worker
  Hubrig, Joni, LICSW
  Peterson, Bethany, LICSW
- Psychiatry (MD/DO)
  Hanisch, Stefanie U., MD
  Kjelstrup, Diane, MD
  Roembach, Jeanine L., MD

North Dakota (cont.)
Fargo (cont.)

Sanford Childrens Southwest Clinic
2701 13th Ave S
(701) 234-3600

- Clinical Social Worker
  Hubrig, Joni, LICSW
  Peterson, Bethany, LICSW
- Psychiatry (MD/DO)
  Hanisch, Stefanie U., MD
  Kjelstrup, Diane, MD
  Roembach, Jeanine L., MD
- Psychology
  Biebl, Sara, PHD

Sanford Neuroscience Clinic
700 1st Ave S
(701) 234-4036

- Psychology
  Bergloff, Paula J., PHD
  Hines, Lindsay, PHD
  Wood, Susan M., PHD

Sanford Neuroscience Clinic
700 1st Ave S
(701) 234-4036

- Clinical Social Worker
  Schneider, Monica, LICSW
- Licensed Professional Clinical Counselor
  Dokken, Julie, LPCC
- Psychiatry (MD/DO)
  Tomb, David, MD
- Psychology
  Bergloff, Paula J., PHD
  Hines, Lindsay, PHD
  Porter, Scott, PHD
  Wood, Susan M., PHD

Sanford North Fargo Clinic
2601 Broadway N
(701) 234-2900

- Clinical Social Worker
  Syverson, Kate, LICSW
- Psychology
  Hysjulien, Cheryl, PSYD

Sanford Professional Building
100 4th St S
(701) 234-3100

- Clinical Social Worker
  Donaldson, Mary Ann, LICSW
  Fidler, Nancy, LICSW
  Foldesi-Penas, Tracy M., LICSW

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING BEHAVIORAL HEALTH PROVIDERS

Sanford Professional Building (cont.)

- Clinical Social Worker (continued)
  Hubrig, Joni, LICSW
  Peterson, Bethany, LICSW
- Licensed Professional Clinical Counselor
  Christianson, Alice, LPCC
  Heim, Kathy J., LPCC
  Woodbury, Kara B., LPCC
- Psychiatric Nurse
  Cameron, Kathryn M., CNS
  Johnson, Lucy M., CNS
  Roerig, Deborah B., CNS
- Psychiatry (MD/DO)
  Burd, Ronald M., MD
  Fleissner, Rachel M., MD
  Gaffrey, Jane, DO
  Goyal, Harish, MD
  Haider, Naveed, MD
  Hanisch, Stefanie U., MD
  Hund, Morris A., MD
  Kjelstrup, Diane, MD
  Leon, Zelko, MD
  Mitchell, James E., MD
  Roembach, Jeanine L., MD
  Seicarescu, Cristina, MD
  Swensen, Eric C., MD
- Psychology
  Anady, Kara, PSYD
  Corneliussen, Stephanie, PSYD
  Kadlec, Kelly E., EDD
  Lahaise, Kim T., PHD
  Moser, Richard J., PHD
  Myers, Tricia C., PHD
  Preussler, Rebecca S., PSYD
  Revland, Paul, PHD
  Stone, Kenneth J., PSYD
  Sturgill, Danial, PHD
  Swan-Kremeier, Lorraine, PHD
  Tupa, David J., PHD
  Ulven, Jon, PHD
  Wenstrom, Timothy A., PSYD
  Wonderlich, Stephen A., PHD

Sanford Professional Building
100 4th St S
(701) 234-3100

North Dakota (cont.)
Fargo (cont.)

Sanford Professional Building (cont.)

- Clinical Social Worker
  Brown, Chad J., LICSW
  Donaldson, Mary Ann, LICSW
  Fidler, Nancy, LICSW
  Foldesi-Penas, Tracy M., LICSW
  Hubrig, Joni, LICSW
  Leyden, James, LICSW
  Peterson, Bethany, LICSW
- Licensed Professional Clinical Counselor
  Christianson, Alice, LPCC
  Heim, Kathy J., LPCC
  Woodbury, Kara B., LPCC
- Psychiatric Nurse
  Cameron, Kathryn M., CNS
  Johnson, Lucy M., CNS
  Roerig, Deborah B., CNS
- Psychiatry (MD/DO)
  Allick, Albert, MD
  Burd, Ronald M., MD
  Dennison, Evelyn, MD
  Eason, Phyllis, MD
  Fleissner, Rachel M., MD
  Gaffrey, Jane, DO
  Goyal, Harish, MD
  Haider, Naveed, MD
  Hanisch, Stefanie U., MD
  Hund, Morris A., MD
  Kjelstrup, Diane, MD
  Kohoutek, Bradley W., MD
  Leon, Zelko, MD
  Mitchell, James E., MD
  Olson, Robert J., MD
  Roembach, Jeanine L., MD
  Seicarescu, Cristina, MD
  Swensen, Eric C., MD
- Psychology
  Anady, Kara, PSYD
  Biebl, Sara, PHD
  Brower Breitwieser, Carrie, PHD
  Corneliussen, Stephanie, PSYD
  Hysjulien, Cheryl, PSYD
  Kadlec, Kelly E., EDD
  Lahaise, Kim T., PHD
  Maley, Robyn, PSYD
  Moser, Richard J., PHD
  Myers, Tricia C., PHD
  Preussler, Rebecca S., PSYD

North Dakota (cont.)
Fargo (cont.)

Sanford Professional Building (cont.)

- Psychology (continued)
  Revland, Paul, PHD
  Stone, Kenneth J., PSYD
  Sturgill, Danial, PHD
  Swan-Kremeier, Lorraine, PHD
  Tupa, David J., PHD
  Ulven, Jon, PHD
  Wenstrom, Timothy A., PSYD
  Wonderlich, Stephen A., PHD

Sanford South University
1720 University Dr S
(701) 234-2000

- Licensed Addiction Counselor-Chemical Dependency
  Christianson, Alice, LAC
- Licensed Professional Clinical Counselor
  Dokken, Julie, LPCC
  Groslie, Dawn L., LPCC
- Psychiatric Nurse
  Cameron, Kathryn M., CNS
  Johnson, Lucy M., CNS
- Psychiatry (MD/DO)
  Burd, Ronald M., MD
  Haider, Naveed, MD
  Hund, Morris A., MD
  Leon, Zelko, MD
  Olson, Robert J., MD
  Rougle, James, DO
  Swensen, Eric C., MD
- Psychology
  Bauste, Larry G., PHD
  Revland, Paul, PHD

Sanford South University
1720 University Dr S
(701) 234-2000

- Clinical Social Worker
  Brown, Chad J., LICSW
- Licensed Addiction Counselor-Chemical Dependency
  Christianson, Alice, LAC
- Licensed Professional Clinical Counselor
  Dokken, Julie, LPCC
  Groslie, Dawn L., LPCC
  Heim, Kathy J., LPCC

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING BEHAVIORAL HEALTH PROVIDERS

Sanford South University (cont.)

- Licensed Professional Clinical Counselor (continued)
  Woodbury, Kara B., LPCC
- Psychiatric Nurse
  Cameron, Kathryn M., CNS
  Johnson, Lucy M., CNS
  Moraghan, Kathleen, CNS
- Psychiatry (MD/DO)
  Armstrong, Lacey L., MD
  Burd, Ronald M., MD
  Hund, Morris A., MD
  Leon, Zelko, MD
  Olson, Robert J., MD
  Rougle, James, DO
  Swensen, Eric C., MD
  Yarosh, Scott, MD
- Psychology
  Bauste, Larry G., PHD
  Revland, Paul, PHD

Sanford Southpointe Clinic
2400 32nd Ave S
(701) 234-8800

- Licensed Professional Clinical Counselor
  Christianson, Alice, LPCC
  Woodbury, Kara B., LPCC
- Psychiatry (MD/DO)
  Swensen, Eric C., MD
- Psychology
  Christianson, Kenneth E., PHD
  Ulven, Jon, PHD

Sanford Southpointe Clinic
2400 32nd Ave S
(701) 234-8800

- Clinical Social Worker
  Brown, Chad J., LICSW
  Powell, Trishia K., LICSW
  Schneider, Monica, LICSW
- Licensed Professional Clinical Counselor
  Christianson, Alice, LPCC
  Woodbury, Kara B., LPCC
- Psychiatry (MD/DO)
  Kohoutek, Bradley W., MD
  Swensen, Eric C., MD
- Psychology
  Christianson, Kenneth E., PHD
  Ulven, Jon, PHD

Sanford Southpointe Clinic (cont.)

- Psychology (continued)
  Zielke, Desiree, PHD

Sharehouse - Genesis
505 40th St S Ste B
(701) 478-8440

- Licensed Addiction Counselor-Chemical Dependency
  Cameron, Lisa, LAC
  Collins, David C., LAC
  Hoff, Miracle R., LAC
  Maynard, Joshua J., LAC
  Shirkey, Amie M., LAC
  Stinson, Roberta J., LAC
  Symons, James E., LAC
  Traen, Jeremy M., LAC
  Westall, Wanda L., LAC
  Winters, Patricia L., LAC
  Witteman, Anne K., LAC

Sharehouse Transitions
505 40th St S Suite B
(701) 478-8440

- Clinical Social Worker
  Sparke, William P., LICSW
- Licensed Addiction Counselor-Chemical Dependency
  Nelson, Roberta R., LAC
- Licensed Professional Clinical Counselor
  Belzer, Joy A., LPCC
- Licensed Professional Counselor/Therapist
  Nelson, Roberta R., LPCC
- Psychology
  Hoff, Erica R., PHD

Sharehouse, Inc
4227 9th Ave SW
(701) 282-6561

- Clinical Social Worker
  Sparke, William P., LICSW
- Licensed Addiction Counselor-Chemical Dependency
  Cameron, Lisa, LAC
  Collins, David C., LAC
  Hoff, Miracle R., LAC
  Maynard, Joshua J., LAC
  Nelson, Roberta R., LAC

Sharehouse, Inc (cont.)

- Licensed Addiction Counselor-Chemical Dependency (continued)
  Shirkey, Amie M., LAC
  Stevens, Connie K., LAC
  Stinson, Roberta J., LAC
  Symons, James E., LAC
  Traen, Jeremy M., LAC
  Westall, Wanda L., LAC
  Winters, Patricia L., LAC
  Witteman, Anne K., LAC
- Licensed Professional Counselor/Therapist
  Nelson, Roberta R., LPCC
- Psychology
  Hoff, Erica R., PHD

Southeast Human Service Center
2624 9th Ave S
(701) 298-4500

- Clinical Social Worker
  Gierszewski, Angelique S., LICSW
  Rorvig, Lisa K., LICSW
  Varriano, Deonne J., LICSW
- Licensed Addiction Counselor-Chemical Dependency
  Berglund, Randi A., LAC
  Brown, Bradley T., LAC
  Christensen, James R., LAC
  Decker, Amanda R., LAC
  Erickson, Kylee R., LAC
  Fay, Julie M., LAC
  Holt, John W., LAC
  Illing, Stephen, LAC
  Kilen, Kristi, LAC
  Mastel, Lisa A., LAC
  Nicoli, Sara L., LAC
  Peterson, Melody B., LAC
  Phillips, Sandra L., LAC
  Pytlik, Roberta J., LAC
  Richter, Daniel A., LAC
  Trautman, Tatum R., LAC
- Licensed Professional Clinical Counselor
  Cavett, Tarah E., LPCC
  Gjerde, Elizabeth A., LPCC
  Richter, Daniel A., LPCC
  Singh, Usha, LPCC

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING BEHAVIORAL HEALTH PROVIDERS

Southeast Human Service Center (cont.)
- Psychiatry (MD/DO)
  Hajek, Philip T., MD
  Kroetsch, Laura A., MD
  McLean, Andrew J., MD
  Vo, Timothy T., MD
- Psychology
  Cross-Hillman, Nicole, PSYD
  Hein-Kolo, Nancy, PHD
  Moe, Brian K., PHD
  Quam, Sara D., PSYD
  Wegner, Krislea E., PHD
  Witte-Bakken, Jan K., PHD

Southeast Human Service Center Off Main
1122 1st Ave N
(701) 298-4650
- Licensed Addiction Counselor-Chemical Dependency
  Worner, Bruce, LAC
- Licensed Professional Clinical Counselor
  Singh, Usha, LPCC

St Sophies LLC
3201 33rd St S
(701) 365-4488
- Licensed Professional Clinical Counselor
  Hjelle, Catherine A., LPCC
- Psychiatry (MD/DO)
  Kenney, Emmet M., MD
- Psychology
  Schumacher, Kevin, PHD

Staton, R. Dennis, MD
509 25th Ave N
(701) 451-9145
- Psychiatry (MD/DO)
  Staton, R D., MD

The Village Family Service Center
1201 25th St S
(701) 451-4900
- Clinical Social Worker
  Eissinger, Rebecca D., LICSW
  Heding, Charity C., LICSW
  Lyon, John A., LICSW
  Medenwald, Joni L., LICSW

North Dakota (cont.)
Fargo (cont.)

The Village Family Service Center (cont.)
- Licensed Professional Clinical Counselor
  Aasness, Mary K., LPCC
  Blumhardt, Rachel A., LPCC
  Fetting, Debberlee, LPCC
  Hillesheim, Nadine A., LPCC
  Jandro, Joanne M., LPCC
  Olson, Patricia J., LPCC
- Psychiatric Nurse
  Elbert, Rebecca E., CNS
- Psychology
  Juntunen, Cindy L., PHD

The Village Family Service Center
1620 16 Ave S
(701) 451-4900
- Clinical Social Worker
  Lyon, John A., LICSW

The Village Family Service Center
1200 Harwood Drive
(701) 451-4900
- Licensed Professional Clinical Counselor
  Blumhardt, Rachel A., LPCC

The Village Family Service Center dba First Step Recovery
409 7th St S
(701) 293-3384
- Licensed Addiction Counselor-Chemical Dependency
  Boren, Margaret E., LAC
  Erickson, Pamla J., LAC
  Knipfer, Jodee L., LAC
  Senn, Patti L., LAC
  Spooner, Kristie L., LAC
  Stenehjem-Titus, Peggy L., LAC

The Village Family Service Center dba First Step Recovery
3201 Fiechtner Drive
(701) 293-3384
- Licensed Addiction Counselor-Chemical Dependency
  Boren, Margaret E., LAC
  Clairmont Hansen, Mary, LAC
  Erickson, Pamla J., LAC
  Knipfer, Jodee L., LAC

North Dakota (cont.)
Fargo (cont.)

The Village Family Service Center dba First Step Recovery (cont.)
- Licensed Addiction Counselor-Chemical Dependency (continued)
  Priebnow, Adam T., LAC
  Senn, Patti L., LAC
  Spooner, Kristie L., LAC
  Stenehjem-Titus, Peggy L., LAC

Valley Christian Counseling Center
509 25th Ave N
(701) 232-6224
- Clinical Social Worker
  Conkins, Elizabeth A., LICSW
  Erkenbrack, Naomi, LICSW
- Licensed Professional Clinical Counselor
  Watnemo, Larry J., LPCC
- Psychiatric Nurse
  Zaeske, Ellen L., CNS
- Psychology
  Rottman, Lori S., PHD

Vosburg Counseling
2913 12th St S
(701) 235-2092
- Licensed Professional Clinical Counselor
  Vosburg, Doreen M., LPCC

Wegner Psychological and Therapeutic Services
3220 S 18th Street Ste 6
(701) 361-0433
- Psychology
  Quam, Sara D., PSYD
  Wegner, Krislea E., PHD

Wilhelm, Vickie A., MS, LPCC Counseling
1111 Westrac Dr Ste 201
(701) 235-2003
- Licensed Professional Clinical Counselor
  Wilhelm, Vickie A., LPCC

Youth Works
317 S Univ Dr
(701) 232-8558

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING BEHAVIORAL HEALTH PROVIDERS

North Dakota (cont.)
Fargo (cont.)

Youth Works (cont.)
- Licensed Addiction Counselor-Chemical Dependency
  Erhardt, Timothy T., LAC

Fort Totten

Youth Healing & Wellness Center
816 3rd Ave N
(701) 766-4236
- Clinical Social Worker
  Duckwitz, Linda, LICSW
- Licensed Addiction Counselor-Chemical Dependency
  Duckwitz, Linda, LAC

Grafton

Mab Counseling Services
47 West 6th Street
(701) 352-1667
- Licensed Addiction Counselor-Chemical Dependency
  Bryan, Michael A., LAC

Quinn Dui/Mip Counseling
47 W 6 St
(701) 352-9622
- Licensed Addiction Counselor-Chemical Dependency
  Quinn, Pamela J., LAC

Grand Forks

Agassiz Associates, PLLC
1407 24th Ave S Ste 520
(701) 746-6336
- Clinical Social Worker
  Aberle Riddle, Julie A., LICSW
  Muhs, Angela, LICSW
- Licensed Addiction Counselor-Chemical Dependency
  Grimsley, Tanner E., LAC
  Walton, Karin L., LAC
- Licensed Professional Clinical Counselor
  Walton, Karin L., LPCC
- Psychology
  Achilleoudes, Helen, PHD
  Green, Rebecca M., PHD

North Dakota (cont.)
Grand Forks (cont.)

Agassiz Associates, PLLC (cont.)
- Psychology (continued)
  Jensen, Heidi K., PHD
  McBride, Rosanne B., PHD

Altru Family Medicine Residency
725 Hamline St
(701) 780-6800
- Psychology
  Haugen, Erin N., PHD

Altru Hospital
1200 S Columbia Rd
(701) 780-5000
- Psychology
  Haugen, Erin N., PHD
  Muse, Shyla L., PHD

Altru Main Clinic
1000 S Columbia Rd
(701) 780-5000
- Psychology
  Muse, Shyla L., PHD
  Yeager, Catherine, PHD

Altru Psychiatric Center
860 S Columbia Rd
(701) 780-6697
- Clinical Social Worker
  Conrad, Danielle M., LICSW
  Olson, Joann J., LICSW
  Tescher, Jodi L., LICSW
  Thomas, Mary E., LICSW
  Werkley, Christopher J., LICSW
- Psychiatry (MD/DO)
  Bansal, Ashok K., MD
  Esprit, Lori J., MD
  Feldman, Ellen K., MD
  Madaram, Kondal R., MD

Assessment and Therapy Associates of Grand Forks
725 Hamline St
(701) 780-6821
- Licensed Professional Clinical Counselor
  Enblom, Kristen E., LPCC
  Gamliel, Tiram, LPCC
- Psychology
  Ertelt, Troy W., PHD
  Haugen, Erin N., PHD
  Jackson, David, PHD

North Dakota (cont.)
Grand Forks (cont.)

Assessment and Therapy Associates of Grand Forks (cont.)
- Psychology (continued)
  Muse, Shyla L., PHD
  Petros, Thomas V., PHD
  Schmutzer, Peter A., PHD
  Welke, Charles K., PHD
  Yeager, Catherine, PHD

Assessment and Therapy Associates of Grand Forks
2755 10th Ave N
(701) 780-6821
- Psychology
  Boulton-Olson, Christine, PHD
  Schmutzer, Peter A., PHD

Baumbach, Diane, LICSW
1407 24 Ave S Ste 530
(218) 791-5669
- Clinical Social Worker
  Baumbach, Diane K., LICSW

Carol Schneweis, LICSW
1407 24th Ave S Ste 530
(701) 739-5480
- Clinical Social Worker
  Schneweis, Carol J., LICSW

Center For Psychiatric Care
1451 44th Ave S Unit A
(701) 732-2500
- Clinical Social Worker
  Peterson, Bonnie J., LICSW
- Psychiatry (MD/DO)
  Azhar, Muhammad N., MD
  Frank, Bradford L., MD
  Peterson, Thomas M., MD
  Pitera, Matthew J., MD
  Thomas, Janice M., MD
  Tsibulsky, Mark, MD

Center For Psychological and Educational Assessment
210 Montgomery Hall
(701) 777-3260
- Psychology
  Petros, Thomas V., PHD

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING BEHAVIORAL HEALTH PROVIDERS

Center For Self Growth & Renewal, PC
1551 28 Ave S Ste C
(701) 746-4400

- Licensed Professional Clinical Counselor
  Reiten Eylands, Mary, LPCC
  Serna, Carrie L., LPCC
- Psychology
  Brustad, Laurie A., PHD

Dakota Therapy Center, LLC
600 Demers Ave Ste 301
(701) 746-9341

- Clinical Social Worker
  Badran-Wakefield, Aida B., LICSW

Dakota Therapy Center, LLC
600 Demers Ave Ste 301
(701) 746-9341

- Psychology
  Cheney, Angela R., PHD

Drake Counseling Services, Inc
311 4 St S Ste 106
(701) 746-8414

- Licensed Addiction Counselor-Chemical Dependency
  Bostyan, Eva L., LAC
  Loyland, Vicki J., LAC

Family Institute PC
2100 S Columbia Rd
Ste 202
(701) 772-1588

- Psychology
  Adams Larsen, Margo A., PHD
  Bradley, April, PHD
  Deyoung, Kyle, PHD
  Kotschwar, Jeanine E., PHD
  Legerski, John P., PHD
  Looby, Alison, PHD
  Miller, Joseph C., PHD
  Moe, Brian K., PHD
  Navarro, Rachel L., PHD
  Paulson, Michael D., PHD
  Rowan, Leslie A., PHD
  Wettersten, Kara, PHD
  Whitcomb, David H., PHD

Jeffrey C Gregory, PhD PC dba Gregory Psychology Solutions
1407 24th Ave S
(701) 293-7477

- Psychology
  Gregory, Jeffrey C., PHD

Kvasager Marlys, LICSW
1133a S Columbia Rd
(701) 757-2010

- Clinical Social Worker
  Kvasager, Marlys M., LICSW

Laidlaw Psychological Services, PC
3301 30th Ave S #101
(701) 780-9700

- Psychology
  Laidlaw, Robert A., PHD

Lipp Carlson Lommen & Witucki
2808 17th Ave S
(701) 746-8376

- Psychology
  Dannewitz, Holly J., PHD
  King, Brenda J., PHD
  Lipp, Leland H., PHD
  Lommen, David P., PHD
  Tait, Alison N., PHD
  Whalen, Jonathan E., PHD
  Witucki, Marty P., PHD

Lipp, Carlson, Lommen & Witucki
1380 S Columbia Rd
(701) 746-8376

- Psychology
  Lommen, David P., PHD
  Tait, Alison N., PHD
  Whalen, Jonathan E., PHD

Midwest Neuropsychology, PLLC
3301 30th Ave S #101
(701) 780-9700

- Psychology
  Thompson, Susan J., PHD

Mindfulness Based Therapies, Pain and Chronic Illness
1133b S Columbia Rd
Ste 3
(218) 779-3513

- Psychology
  Sloan, Lora L., PHD

Northeast Human Service Center
151 S 4th St Ste 401
(701) 795-3000

- Clinical Social Worker
  Carson, Roberta J., LICSW
  Dauksavage, Larry, LICSW
  Dusenbury, Katherine B., LICSW
  Hemming, Beth M., LICSW
  Oberg, Debbie A., LICSW
  Slavens, Randall L., LICSW
  Stein Fugazzi, Alissa J., LICSW
  Walker, Andrea I., LICSW
- Licensed Addiction Counselor-Chemical Dependency
  Davis, Deborah L., LAC
  Fisher, Marlys F., LAC
  Grimsley, Tanner E., LAC
  Jones, Angela M., LAC
  Juarez, Guadalupe, LAC
  Kuntz, Kristi L., LAC
  McMillan, Cynthia R., LAC
  Miller, Kim M., LAC
  Mohagen, Lori C., LAC
  Olson, Neil I., LAC
  Quinn, Pamela J., LAC
  Scott, David L., LAC
  Theisen, Jana, LAC
  White, Kelly, LAC
- Licensed Professional Clinical Counselor
  Scott, David L., LPCC
  Shulind, Joan, LPCC
- Psychiatric Nurse
  Gagner-Tjellesen, Desiree J., CNS
- Psychiatry (MD/DO)
  Feldman, Ellen K., MD
  Goodman, Patrick B., MD
  Hill, Steven M., MD
  McLean, Andrew J., MD
  Tevington, Kathryn, MD
- Psychology
  Decker, Greg, PHD
  Jagow France, Desiree A., PHD
  Newberry, Donald E., PHD

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING BEHAVIORAL HEALTH PROVIDERS

North Dakota (cont.)
Grand Forks (cont.)

Northland Christian Counseling Center
2315 Library Circle
(701) 795-8550

- Clinical Social Worker
  Broden, Renae A., LICSW
  Slavens, Randall L., LICSW
- Licensed Addiction Counselor-Chemical Dependency
  Scott, David L., LAC
  Torgerson, Carol A., LAC
- Licensed Professional Clinical Counselor
  Klug, Marna J., LPCC
  Scott, David L., LPCC
  Seay, Stephen H., LPCC

Northland Christian Counseling Center
308 5th St S
(701) 795-8550

- Licensed Addiction Counselor-Chemical Dependency
  Scott, David L., LAC
- Licensed Professional Clinical Counselor
  Scott, David L., LPCC

Rasmussen, Maxine, LPCC
1407 24th Ave S Ste 315
(701) 772-8013

- Licensed Professional Clinical Counselor
  Rasmussen, Maxine K., LPCC

Russell, Sue A, PhD P.C.
628 7th Ave S Ste B
(701) 746-8737

- Psychology
  Russell, Sue A., PHD

The Village Family Service Center
1726 S Washington Street
Ste 33a
(701) 746-4584

- Psychology
  Edwards, Sarah R., PHD
  Juntunen, Cindy L., PHD

North Dakota (cont.)
Grand Forks (cont.)

UND Student Health Service
Mccannel Hall Room 100
2891 2nd Ave N Stop 9038
(701) 777-4500

- Psychiatric Nurse
  Olson, Stacie L., PNU

Harvey

Blooming Prairie Assessment & Therapy Center PC
1008 Adams Ave
(701) 662-8255

- Psychology
  Kenney, Sara K., PSYD
  Normandin, Sherman, PHD

Rural Mental Health Consortium
325 E Brewster St
(701) 324-4651

- Psychiatric Nurse
  Sartain, Cheryl A., PNU

Hettinger

West River Health Services
1000 Highway 12
(701) 567-4561

- Licensed Professional Clinical Counselor
  Jorgenson, Tara L., LPCC

Hillsboro

Sanford Health Hillsboro Clinic
315 E Caledonia Ave
(701) 636-5311

- Psychiatric Nurse
  Cameron, Kathryn M., CNS

Jamestown

Addiction & Counseling Services
300 2nd Ave NE
(701) 252-5398

- Licensed Addiction Counselor-Chemical Dependency
  Cudmore Kramer, Shawn, LAC
  Monek, Martin D., LAC
  Peterson, Debra I., LAC
  Randall, Timothy L., LAC

North Dakota (cont.)
Jamestown (cont.)

Essentia Health Jamestown Clinic
2430 20th St SW
(701) 253-5300

- Psychology
  Hauge, Gregory A., PHD

Fuher, Jessie, LPCC
619 8th Ave SE
(701) 252-9838

- Licensed Professional Clinical Counselor
  Fuher, Jessie K., LPCC

Jamestown Counseling Center
300 2nd Ave NE Ste 215
(701) 952-7400

- Licensed Professional Clinical Counselor
  Lipetzky, Jennifer L., LPCC

Life Seasons Counseling, PLLC
302 Second Ave SE
(701) 678-4800

- Licensed Professional Clinical Counselor
  Elhard, Deborah J., LPCC

Prairie Counseling
3952 Hwy 281 SE
(701) 252-8939

- Licensed Addiction Counselor-Chemical Dependency
  Wicks, Kerry W., LAC
- Licensed Professional Clinical Counselor
  Wicks, Kerry W., LPCC

Sanford Health 2nd Ave Clinic
300 2nd Ave NE
(701) 251-6000

- Psychology
  Collins, John, PHD

Sanford Health Jamestown Clinic
904 5th Ave NE
(701) 253-4000

- Psychiatry (MD/DO)
  Karaz, Samy, MD
- Psychology
  Collins, John, PHD
  Wilson, Joel R., PHD

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING BEHAVIORAL HEALTH PROVIDERS

North Dakota (cont.)

Jamestown (cont.)

Sanford Health Jamestown Clinic
904 5th Ave NE
(701) 253-4000

- Psychiatry (MD/DO)
  Karaz, Samy, MD

South Central Human Service Center
520 3rd St NW
(701) 253-6318

- Clinical Social Worker
  Hart, Tim E., LICSW
  Reinarts, Courtney M., LICSW
  Weber, John J., LICSW
- Licensed Addiction Counselor-Chemical Dependency
  Brown, Bradley T., LAC
  Cudmore Kramer, Shawn, LAC
  Hallsten, Lindsey A., LAC
  Hunt, Geoffrey A., LAC
  Marsh, Billy J., LAC
  Motter, Elsie A., LAC
  Selle, Brooke J., LAC
  Woodard, Eric T., LAC
- Licensed Professional Clinical Counselor
  Listul, David, LPCC
  Morton, Jennifer, LPCC
  Schagunn Lere, Cara L., LPCC
- Psychiatry (MD/DO)
  McLean, Andrew J., MD
  Robles, Maria Diana E., MD
- Psychology
  Coombs, Lincoln D., PHD
  Cramer, Daniel P., PHD
  Hunt, Stacey L., PSYD
  Lepeltier, Marie, PHD
  Nitschke, Jennifer D., PSYD

Lamoure

Healing Hearts Counseling
421 3rd St SE
(701) 535-0616

- Clinical Social Worker
  Simle, Susan A., LICSW

North Dakota (cont.)

Langdon

Blooming Prairie Assessment & Therapy Center PC
721 11 Ave
(701) 662-8255

- Psychology
  Kenney, Sara K., PSYD
  Normandin, Sherman, PHD

Cavalier County Memorial Hospital
909 2nd St
(701) 256-6120

- Clinical Social Worker
  Osowski, Kimber Lee, LICSW
- Psychiatry (MD/DO)
  Peterson, Thomas M., MD

Mandan

Sanford North Mandan Clinic
910 18th St NW
(701) 667-5100

- Psychiatry (MD/DO)
  Belzer-Curl, Gretchen G., MD

Mayville

Sanford Mayville
600 1st Street SE
(701) 786-4500

- Psychiatric Nurse
  Cameron, Kathryn M., CNS

Minot

Berdahl, Linda, MS, LAC, Sap dba Cornerstone Addiction Servi
1705 4th Ave NW
(701) 839-0474

- Licensed Addiction Counselor-Chemical Dependency
  Berdahl, Linda A., LAC

Bob Hayes Addiction Services
1809 S Broadway Ste G
(701) 838-1422

- Licensed Addiction Counselor-Chemical Dependency
  Hayes, Bob M., LAC

North Dakota (cont.)

Minot (cont.)

Bruley, Charlene, LICSW
308 2nd Ave SW
(701) 838-4632

- Clinical Social Worker
  Bruley, Charlene P., LICSW

Center For Family Medicine/Minot
1201 11th Ave SW
(701) 858-6700

- Psychology
  Rickert, Julie A., PHD

Center For Mind & Body Wellness
1015 S Broadway Ste 37
(701) 852-3550

- Psychiatric Nurse
  Johnson, Deborah K., CNS

Clark, Thomas, PhD
2116 4th Ave NW
(701) 838-2442

- Psychology
  Clark, Thomas R., PHD

Corneliusen Lacey LICSW LLC
315 Main St Ste 301
(701) 858-1558

- Clinical Social Worker
  Corneliusen, Lacey D., LICSW

Dakota Boys Ranch
6301 19th Ave NW
(701) 839-7888

- Clinical Social Worker
  Eissinger, Rebecca D., LICSW
  Wilkie, Christy, LICSW
- Licensed Addiction Counselor-Chemical Dependency
  Waind, Melissa, LAC
  Wendt, Jamie L., LAC
- Licensed Professional Clinical Counselor
  Simonson, Boni M., LPCC
  Vetter, Sara J., LPCC
- Psychiatry (MD/DO)
  Martinsen, Wayne L., MD
- Psychology
  Willert Jr, Meryl G., PHD

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING BEHAVIORAL HEALTH PROVIDERS

North Dakota (cont.)
Minot (cont.)

Dakota Family Services
6301 19th Ave NW
(701) 837-6508

- Licensed Professional Clinical Counselor
  Simonson, Boni M., LPCC
- Psychiatry (MD/DO)
  Martinsen, Wayne L., MD
- Psychology
  Willert Jr, Meryl G., PHD

Eaton, Timothy, PhD
1705 4th Ave NW
(701) 839-0474

- Psychology
  Eaton, Timothy T., PHD

Edwards, Robert B LPCC
304 Burdick Expy W
(701) 833-8907

- Licensed Professional Clinical Counselor
  Edwards, Robert B., LPCC

Flood, Melissa K, LICSW
1705 4 Ave NW
(701) 839-0474

- Clinical Social Worker
  Flood, Melissa K., LICSW

Mary Solberg LICSW
1705 4th Ave NW
(701) 839-0474

- Clinical Social Worker
  Solberg, Mary J., LICSW

North Central Human Service Center
1015 S Broadway Ste 18
(701) 857-8500

- Clinical Social Worker
  Ness, Tammy D., LICSW
  Nyberg, Rochelle R., LICSW
  Vaudt, Cheryl A., LICSW
- Licensed Addiction Counselor-Chemical Dependency
  Andersen, Jason L., LAC
  Berger, Stacey A., LAC
  Browne, Racia J., LAC
  Duchscherer, Dana L., LAC
  Faa, Nathan, LAC
  Kidney, Brietta M., LAC

North Dakota (cont.)
Minot (cont.)

North Central Human Service Center (cont.)

- Licensed Addiction Counselor-Chemical Dependency (continued)
  Lider, Heather L., LAC
  Mock, Candis, LAC
  Nelson, Amy L., LAC
  Twogood, Amber A., LAC
- Licensed Professional Clinical Counselor
  Burke, Jean M., LPCC
  Gartner, Melissa M., LPCC
- Psychiatric Nurse
  Hanson, Leah A., PNU
  Walls, Pamela S., PNU
- Psychiatry (MD/DO)
  Eick, Thomas J., DO
  McLean, Andrew J., MD
  Schield, Laura B., MD
- Psychology
  Langelle, Charyle, PHD
  Shaleen, Lori A., PHD
  Slaughter, Stacy L., PSYD

Northern Plains Childrens Advocacy Center dba Npcac
20 First St SW Ste 202
(701) 852-0836

- Clinical Social Worker
  Baldwin, Tricia, LICSW
  Lemay, Jeanne J., LICSW

Pospishil & Associates, PLLC
1425 21st Ave NW
(701) 858-0888

- Clinical Social Worker
  Pospishil, Charles, LICSW

Psychiatric Services, PC
601 18th Ave SE Ste 101
(701) 852-8798

- Clinical Social Worker
  Lein, James, LICSW
- Psychiatric Nurse
  Zuleger, Zane N., CNS
- Psychiatry (MD/DO)
  Bell, Lloyd M., DO

North Dakota (cont.)
Minot (cont.)

Psychological Services, PC
600 22nd Ave NW
(701) 852-9113

- Psychology
  Podrygula, Stephan, PHD

Stein's Specialized Counseling Center
1809 S Broadway Plaza
Ste A
(701) 833-2085

- Clinical Social Worker
  Grossman-Chinburg, Jennifer N., LICSW
  Spooner, Dionne L., LICSW
  Stein, Suzi E., LICSW

Tammy Ness, LICSW
1809 S Broadway Suite Q2
(701) 720-8876

- Clinical Social Worker
  Ness, Tammy D., LICSW

The Burckhard Clinic, PC
315 S Main St Ste 315
(701) 852-5876

- Clinical Social Worker
  Burckhard, Mike V., LICSW

The Village Family Service Center
20 1st St SW Ste 250
(701) 852-3328

- Licensed Professional Clinical Counselor
  Jandro, Joanne M., LPCC

Trinity Health dba Trinity Riverside Campus
1900 8th Ave SE
(701) 857-5998

- Clinical Social Worker
  Andersen, Bruce F., LICSW
  Johnson, Lea J., LICSW
  Larsen, Elizabeth A., LICSW
  Roerick, Denise R., LICSW
  Wanner, Denice L., LICSW
- Licensed Professional Clinical Counselor
  Frueh, Keri J., LPCC
  Gertz, Linda M., LPCC
- Psychiatry (MD/DO)
  Colletti, Richard A., MD
  Dallolio, Michael J., MD

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING BEHAVIORAL HEALTH PROVIDERS

North Dakota (cont.)
Minot (cont.)

Trinity Health dba Trinity Riverside Campus (cont.)
- Psychiatry (MD/DO) (continued)
  Evans, Booker T., MD
  Martinsen, Wayne L., MD
  Meunier, Ronny P., MD
  Richards, Deidre L., MD
- Psychology
  Anderson, Thora R., PHD
  Boseck, Justin J., PHD
  Guilbert, Shana D., PSYD
  McAllister, Della A., PHD
  Michels, Vicki J., PHD
  Mugge, Jessica R., PHD
  Townsend, Richard B., EDD
  Vanlith, Clinten D., PHD

Trinity Hospitals
1 Burdick Expressway W
(701) 857-5252
- Psychiatry (MD/DO)
  Macey, Helen L., MD

Trinity Medical Group
407 3rd Street SE
(701) 857-5871
- Psychiatry (MD/DO)
  Colletti, Richard A., MD
  Macey, Helen L., MD
  Meunier, Ronny P., MD
- Psychology
  Boseck, Justin J., PHD

Trinity Medical Group
1 Burdick Expy W
(701) 857-5000
- Psychiatry (MD/DO)
  Colletti, Richard A., MD
  Martinsen, Wayne L., MD
  Meunier, Ronny P., MD
  Richards, Deidre L., MD
- Psychology
  Boseck, Justin J., PHD
  McAllister, Della A., PHD
  Townsend, Richard B., EDD
  Vanlith, Clinten D., PHD

North Dakota (cont.)
Minot (cont.)

Vaudt, Cheryl, LICSW
24 Main St N Ste H
(701) 833-8070
- Clinical Social Worker
  Vaudt, Cheryl A., LICSW

Walls,Pamela,APRN,BC
24 N Main St Ste J
(701) 721-5143
- Psychiatric Nurse
  Walls, Pamela S., PNU

Weiss, Faye, RN, CNS, PC
234 14th Ave SE
Ste 317
(701) 833-8158
- Psychiatric Nurse
  Weiss, Faye M., CNS

Mohall

Rural Mental Health Consortium
602 Main St E
(701) 857-2199
- Psychiatric Nurse
  Sartain, Cheryl A., PNU

Mott

West River Health Services
420 Pacific Ave
(701) 824-2391
- Licensed Professional Clinical Counselor
  Jorgenson, Tara L., LPCC

New England

West River Health Services
820 2nd Ave W
(701) 579-4507
- Licensed Professional Clinical Counselor
  Jorgenson, Tara L., LPCC

New Rockford

Blooming Prairie Assessment & Therapy Center
24 8th St N
(701) 662-8255
- Psychology
  Kenney, Sara K., PSYD
  Normandin, Sherman, PHD

North Dakota (cont.)
Oakes

Healing Hearts Counseling
115 S 5th St
(701) 535-0616
- Clinical Social Worker
  Simle, Susan A., LICSW

James River Counseling Services PC
412 Main Ave
(701) 742-1513
- Licensed Professional Clinical Counselor
  Meehl, Stacey B., LPCC

Park River

First Care Health Center
115 Vivan St
(701) 284-7555
- Psychology
  Juntunen, Cindy L., PHD

Raleigh

Prairie Learning Center
7785 St Gertrude Ave
(701) 597-3419
- Licensed Addiction Counselor-Chemical Dependency
  Anderson, Christy K., LAC

Rolla

Lake Region Hsc/Rolla Outreach
113 Main Ave E
(701) 665-2200
- Licensed Addiction Counselor-Chemical Dependency
  Bercier, Cynthia R., LAC
  Lamotte, Wanda J., LAC
  Longie, Glenn B., LAC
- Licensed Professional Clinical Counselor
  Allen-Halvorson, Natascha V., LPCC
  Baumgarn, Julie K., LPCC

Rural Mental Health Consortium
213 2nd Ave NE
(701) 857-2199
- Psychiatric Nurse
  Sartain, Cheryl A., PNU

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING BEHAVIORAL HEALTH PROVIDERS

North Dakota (cont.)

Scranton

West River Health Services
211 Main Street S
(701) 275-6336

- Licensed Professional Clinical Counselor
  Jorgenson, Tara L., LPCC

Sentinel Butte

Home On The Range
16351 I 94
(701) 872-3745

- Clinical Social Worker
  Feldmann, Laura M., LICSW
  Gooch, Michael N., LICSW
  Johnson, Jay R., LICSW
  Maness, Jessica B., LICSW
- Licensed Addiction Counselor-Chemical Dependency
  Ebel, Jodine M., LAC

Souris

Family Mental Health Clinic
701 100th St NW
(701) 263-1298

- Clinical Social Worker
  Howery-Siercks, Laura, LICSW

Stanley

Rural Mental Health Consortium
615 6th St SE
(701) 857-2199

- Psychiatric Nurse
  Sartain, Cheryl A., PNU

Valley City

Essentia Health Valley City Clinic
132 4th Ave NE
(701) 845-8060

- Psychology
  Hauge, Gregory A., PHD

Fuher Jessie, LPCC
570 Chautauqua Blvd
(701) 252-9838

- Licensed Professional Clinical Counselor
  Fuher, Jessie K., LPCC

North Dakota (cont.)

Valley City (cont.)

Life Seasons Counseling, PLLC
570 Chautauqua Blvd
(701) 678-4800

- Licensed Professional Clinical Counselor
  Elhard, Deborah J., LPCC

Sanford Health Valley City Clinic
520 Chautauqua Blvd
(701) 845-6000

- Psychology
  Wilson, Joel R., PHD

Wahpeton

Essentia Health Wahpeton Clinic
275 11th St S
(701) 642-2000

- Psychology
  Hauge, Gregory A., PHD

Sanford Health Wahpeton Clinic
332 2nd Ave N
(701) 642-7000

- Psychology
  Geiselhart, Richard L., PHD
  Getz, Ariane M., PSYD

Swanson Counseling
315 11 St N Suite E
(701) 591-2003

- Licensed Professional Clinical Counselor
  Swanson, Cynthia, LPCC

West Fargo

Beacon Behavioral Health Services & Training Center
102 West Beaton Dr #103
(701) 356-1276

- Psychology
  Cavett, Angela M., PHD
  Garaas, Jennifer M., PHD

Knowlton Oneill & Associates PC
1401 13th Ave E
(701) 364-0060

- Psychiatry (MD/DO)
  Block, Terry N., MD
- Psychology
  Bratton, Brenda L., PHD
  Dvorak, Robert D., PHD
  Hegstad, Holly J., PHD

North Dakota (cont.)

West Fargo (cont.)

Knowlton Oneill & Associates PC (cont.)

- Psychology (continued)
  Knowlton, Glenn E., PHD
  Schjeldahl, Katherine M., PHD

Terry Braun, LPCC
1042 14 Ave E Ste 210
(701) 799-6258

- Licensed Professional Clinical Counselor
  Braun, Terry N., LPCC

Williston

Clinical Consulting, PC
322 Main St Ste 104
(701) 651-6951

- Psychiatric Nurse
  Ferrell, Charlotte A., PNU

Dakota Family Solutions
612 4 St E
(701) 570-4647

- Clinical Social Worker
  Goldade, Terry L., LICSW

Mercy Medical Center dba Craven Hagan Clinic
1213 15th Ave W
(701) 774-7400

- Psychiatry (MD/DO)
  Eick, Thomas J., DO

Northwest Human Service Center
316 2nd Ave W
(701) 774-4600

- Clinical Social Worker
  Goldade, Terry L., LICSW
  Iverson, Sandra M., LICSW
  Shannon, Katie, LICSW
  Stenehjem, Gerald A., LICSW
- Licensed Addiction Counselor-Chemical Dependency
  Conmy, Stephen W., LAC
  Montgomery, Christine R., LAC
- Psychiatry (MD/DO)
  Eick, Thomas J., DO
  McLean, Andrew J., MD
  Schield, Laura B., MD
- Psychology
  Semchenko, Alana, PSYD

Providers are subject to be added or terminated without notice.

NDPERS PPO
PROFESSIONAL PROVIDERS - NETWORK #7400
PARTICIPATING BEHAVIORAL HEALTH PROVIDERS

North Dakota (cont.)

Williston (cont.)

Playworks
501 Main St
(701) 774-1122

- Clinical Social Worker
  Nordaune, Tina M., LICSW

Svpn Neuro Williston
1213 15th Ave W
(800) 544-3579

- Psychiatry (MD/DO)
  Mosser, Jeffrey F., MD

Trinity Community Clinic/Western Dakota
1321 W Dakota Parkway
(701) 572-7711

- Psychology
  Mugge, Jessica R., PHD

Yockim, James, LICSW
1705 3rd Ave W Ste 101
(701) 570-9591

- Clinical Social Worker
  Yockim, James C., LICSW

South Dakota

Aberdeen

Avera Medical Group Orthopedic Surgery Specialists
701 8th Ave NW Ste A
(605) 226-2663

- Psychiatry (MD/DO)
  Frisco, Donald J., MD

Lemmon

West River Health Services
401 6th Ave W
(605) 374-3773

- Licensed Professional Clinical Counselor
  Jorgenson, Tara L., LPCC

Providers are subject to be added or terminated without notice.

Attachment 11

Attachment 11

Physician Quality Measurement

Physician Quality Measurement (PQM)

PQM is the program Blue Plans across the nation will be using to support making measured performance information available to consumers, based on national research showing consumers value access to the kind of information and tools that can help them assume a more active role in managing care for themselves and their families. This program will launch July 1, 2012, and consumers will be able to access this information on the redesigned Blue National Doctor and Hospital Finder website.

The PQM program complements your practice improvement efforts and highlights your commitment to providing safe, evidence-based and patient-centered care in your community. The program aligns with our belief that care improvement comes from a combination of measuring what can be measured, promoting ongoing practice improvement and recognizing the champions of care delivery.

- The vertical integration of local measurement into a national display considers the local patient population and physician demographics, access to care, resources and other local factors.
- PQM is based on select physician performance measures that are displayed to assist patients in choosing a doctor.
- The PQM program will display these nationally endorsed and evidence-based physician quality performance measures along with supporting data, local comparison norms and educational consumer information.
- PQM is based on a core set of HEDIS® physician measures selected by Blue Cross and Blue Shield companies' clinical measurement experts. BCBSND has selected the following nationally endorsed and evidence-based measurements which align with industry and federal health care improvement and reporting initiatives. These measures are:

Category	Measure
Cancer Screening	• Breast cancer screening • Cervical cancer screening • Colorectal cancer screening
Diabetes	• HgA1C testing • LDL-C screening
Heart Disease	• Cholesterol screening for patients with cardiovascular conditions
Women's Health	• Breast cancer screening • Cervical cancer screening

- Using a three-star display, BCBSND can communicate if a group practice is below (1 star), meets (2 stars) or exceeds (3 stars) the performance level score for each measure as compared to the local average for the same measure and comparable peer group.
- Additional information is also available to help Blue members determine how this information can be useful in their health care decision making.

The Local Comparison Score provides a benchmark for performance in North Dakota and is compared to the group's performance score to determine the PQM rating. The local comparison score can vary by measure and is determined by BCBSND. The group practice's score will be based on data taken from the MediQHomeSM Quality Program.

ND

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Noridian Mutual Insurance Company

Attachment 12

Attachment 12

Blue Physician Recognition

Blue Physician Recognition (BPR)

BPR is designed to provide more meaningful and consistent information to consumers, and is complementary to the Physician Quality Measurement initiative. This program will launch July 1, 2012, and consumers will be able to access this information on the redesigned Blue National Doctor and Hospital Finder website.

- Group practices who participate in the MediQHome℠ Quality Program will be submitted for display on the Blue National Doctor and Hospital Finder with the BPR icon.
- The BPR program recognizes participation in quality improvement efforts across multiple disciplines and care settings and also highlights group practices as champions of quality care in the community.
- North Dakota providers not participating in the MediQHome Quality Program will be designated as "not eligible" for BPR in the Blue National Doctor & Hospital Finder.

BCBSND believes that care is improved through a combination of measuring what can be measured, promoting ongoing practice improvement and recognizing the champions of care delivery. BPR supports this philosophy by providing a national display for group practices committed to delivering quality and patient-centered care based on BPR program guidelines.

ND

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Noridian Mutual Insurance Company

Attachment 13

Attachment 13

Attachment 13

Patient Review of Physicians

Patient Review of Physicians (PRP)

PRP allows Blue Cross Blue Shield of North Dakota (BCBSND) members to view and post reviews of doctors and other professional providers based on their patient experiences. After the program launches, July 1, 2012, members will initiate physician reviews through our member portal. Once complete, reviews will be published on the redesigned Blue National Doctor and Hospital Finder website.

While patient reviews are just one of many factors to consider when choosing a health care provider, research shows that online patient review capabilities are in high demand. User-generated patient reviews are one of the most sought after pieces of information for consumers looking for a new doctor, and approximately 85-90 percent of patient reviews are positive. To assure that your overall score accurately reflects the quality of your patient experiences, encourage your patients to contribute to your reviews.

- To ensure accountability and validity, BCBSND has implemented a rigorous process that authenticates, verifies and moderates reviews prior to posting online.
- Members respond to a core set of questions covering their overall experience, and reviews are checked for appropriateness prior to display.
- This process helps ensure that only authenticated BCBSND members who verify they have seen the doctor can contribute reviews.

BCBSND will distribute additional information about this program as it becomes available, including screen shots and more information about how a patient will be able to write physician reviews.

ND

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Noridian Mutual Insurance Company

Attachment 14

Attachment 14

Attachment 14

MediQHome Clinical Suites

Clinical Suites

Asthma

5 – 50 years

Process Measures:

Severity classified using the NAEPP guidelines

Inhaled corticosteriod (or alternative steroid sparing control medication) for patients with persistent asthma (moderate to severe).

Inhaled short-acting beta-agonist for patients with persistent (all grades) asthma.

Attention Deficit Hyperactivity Disorder (ADHD)

< 18 years

Process Measures:

2 BMI documented in the medical record.

Breast Cancer Screening

50 – 74 years (female)

Process Measures (every 2 years):

Breast MRI -OR-

BSGI -OR-

Mammogram

Cervical Cancer Screening

21 – 65 years (female)

Process Measures:

Pap test (once every 3 years)

Chronic Heart Failure

18 – 75 years

Process Measures:

BP exam

Ejection fraction (once within 24 months)

Pulse exam

Serum Creatinine

Outcome Measures:

ACEi/ARB therapy if LVF ≤ 40

Beta-blocker therapy if LVF ≤ 40

BP ≤ 130/80

If Afib, heart rate ≤ 80

If Afib, presence of an anticoagulant

Tobacco free

Child Diabetes

0 – < 13 years

Process Measures:

BP exam

HgA1C exam

Outcome Measures:

BP < 130/80

HgA1C ≤ 8.5

Colorectal Cancer Screening

50 – 75 years

Process Measures:

Colonoscopy (every 10 years) -OR-

CT Colonography (every 5 years) -OR-

Double Contrast Barium Enema (every 5 years) -OR-

Fecal Immunochemical-based testing (FIT) -OR-

Flexible Sigmoidoscopy (every 5 years) -OR-

FOBT

Coronary Artery Disease

18 – 75 years

Process Measures:

Beta-blocker therapy in patients with history of MI

BMI

BP exam

LDL exam (every 15 months)

Outcome Measures:

BP < 140/90

Daily ASA

LDL < 100

Tobacco free

"Optimal Vascular Care"

Adult Diabetes

18 – 75 years

Process Measures:

BP exam

Diabetic foot exam

HgA1C exam

LDL exam

Microalbumin exam

Retinal exam

Outcome Measures:

BP< 140/90

HgA1C < 8

LDL < 100

Tobacco free

"Optimal Diabetes Care"

Daily ASA if presence of IVD

Adolescent Diabetes

13 – <18 years

Process Measures:

BP exam

HgA1C exam

Microalbumin exam

Outcome Measures:

BP < 130/80

HgA1C ≤ 8

Adult Hypertension

18 years and older

Process Measures:

ACEi/ARB therapy if GFR < 60

BP exam

Outcome Measures:

BP < 140/90

Child & Adolescent Hypertension

< 18 years

Process Measures:

BMI

BP exam

Fasting blood glucose

Serum Creatinine

Total cholesterol exam

Urine analysis/microalbumin

Outcome Measures:

BP ≤ 120/80

Fasting blood glucose ≤ 100

Total Cholesterol ≤ 200

Adult & Adolescent Immunizations

> 11 years

Process Measures:

Herpes Zoster if > 60, (once)

Human Papilloma Vaccine (HPV) if female ages 18-26 (3 doses, ever)

Influenza-A (Flu Vaccine)

Pneumococcal if > 65, (once every 10 years)

Tetanus, diphtheria and acellular pertussis (Td/Tdap) (once every 10 years)

Varicella (VZV) (2 doses, ever)

Child Immunizations

0 – 2 years

Process Measures (by the 2nd birthday):

4 Diphtheria, tetanus and pertussis (DTaP)

3 Haemophilus influenza type B (HIB)

2 Hepatitis A (Hep-A)

3 Hepatitis B (Hep-B)

2 Influenza A (Flu Vaccine) (annually)

1 Measles, mumps, rubella (MMR)

4 Pneumococcal vaccine

3 Polio vaccine (IPV)

1 Varicella/chicken pox (VZV)

Vitals

All Ages

Process Measures:

Total Blood Pressure

Height

Weight

BMI

HDL

LDL

GFR

Serum creatinine

Triglycerides

Fasting Blood Glucose

Tobacco use indicated

Tobacco free

Total cholesterol

Tobacco

< 13 years

Process Measures:

Tobacco Assessment

Advised to quit

Willing to quit

Counseling/assistance given

Follow-up scheduled

Clinical Suites

Chronic diseases, such as diabetes, hypertension and coronary artery disease, are the dominant drivers of morbidity in today's health care environment. Blue Cross Blue Shield of North Dakota (BCBSND) believes that cost-effective chronic disease management will have the greatest effect on the long-term health of North Dakotans and the cost of health care for the entire state. That's why all patients will be a part of the MediQHome quality program, regardless of the patient's health insurance coverage.

The program measures are clinically relevant and endorsed by the National Quality Forum and the National Committee for Quality Assurance. The Care Center will initially track asthma, attention deficit hyperactivity disorder (ADHD), breast cancer screening, cervical cancer screening, chronic heart failure, colon cancer screening, coronary artery disease, adult and pediatric diabetes, adult and pediatric hypertension and adult and pediatric immunizations.

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Asthma

The American Medical Association (AMA) describes asthma as a chronic respiratory disease that places a considerable burden on those affected and results in substantial morbidity and use of health care services. The AMA estimates more than 30 million people in the United States have been diagnosed with asthma, with 12 million experiencing an asthma attack in the previous year.

Purpose of the Clinical Suite

The purpose of the Asthma Clinical Suite is to aid in the management of patients with asthma by identifying and tracking the severity of asthma and ensuring the provision of appropriate evidence-based pharmacological interventions. These interventions have been clinically proven to reduce the risk of worsening or acute exacerbation of asthma.

Clinical Suite Measures

The Asthma Clinical Suite is designed to capture the process and outcome measures that are relevant for successful treatment of patients with asthma.

This suite will be reported for patients ages 5 to 50 as follows:

Process measures (once per 12-month program period)

- Asthma severity classified using the National Asthma Education & Prevention Program guidelines:
  - Intermittent
  - Mild persistent
  - Moderate persistent
  - Severe persistent
- Inhaled corticosteroid – patients with persistent asthma (moderate to severe) are prescribed a long-term control medication (inhaled corticosteroid) or alternative steroid sparing control medication
- Inhaled short-acting beta-agonist – patients with persistent (all grades) asthma are prescribed a short-acting beta-agonist

The following exclusions have been defined for the suite:

Asthma

- Allergic disease without lower airway involvement
- COPD or emphysema
- Allergy to inhaled steroid or beta-agonist
- Patient refusal for economic, religious or social reasons

References

National Heart Lung and Blood Institute:
www.nhlbi.nih.gov/guidelines/asthma
Center for Disease Control:
www.cdc.gov
Minnesota Community Measurement Program:
www.mnhealthcare.org
National Committee of Quality Assurance (NCQA):
www.ncqa.org
Healthcare Effectiveness Data and Information Set (HEDIS®):
www.ncqa.org
American Medical Association:
www.ama-assn.org
UpToDate:
www.uptodate.com

Attention Deficit Hyperactivity Disorder (ADHD)

The American Medical Association emphasizes that people with ADHD experience substantial impairment in peer, family and academic functioning and that a diagnosis of ADHD is associated with significant educational and social impairment, an increased risk of accident and injury, and increased use of health care resources. Research continues to show that ADHD should be managed in a manner similar to other childhood chronic conditions.

Purpose of the Clinical Suite

The purpose of the ADHD Clinical Suite is to monitor the appropriate diagnosis and treatment of these patients. Follow-up care is considered as important as the initiation of the care and should be equally monitored.

Clinical Suite Measures

The ADHD Clinical Suite is designed to capture the process measures associated with the appropriate diagnosis, treatment and follow-up of these patients. The guidelines have been adopted from the National Quality Forum and the Institute for Clinical Systems Improvement.

This suite will be reported for patients younger than 18 as follows:

Process Measures

- 2 Body Mass Index (BMI) documented in the medical record within the reporting period

No exclusions have been defined for this suite.

References

Minnesota Community Measurement Program:
www.mnhealthcare.org

Institute for Clinical Systems Improvement:
www.icsi.org

National Committee of Quality Assurance (NCQA):
www.ncqa.org

Healthcare Effectiveness Data and Information Set (HEDIS®):
www.ncqa.org

American Medical Association:
www.ama-assn.org

UpToDate:
www.uptodate.com

Breast Cancer Screening

Breast cancer is the most common female cancer in the United States and the second most common cause of cancer death in women. Several risk factors have been identified, the most important of which are family history and endogenous as well as exogenous hormonal factors.

Purpose of the Clinical Suite

The purpose of the Breast Cancer Screening Clinical Suite is to increase screening compliance of female patients ages 50 to 74 to allow for early detection and treatment of breast cancer.

Clinical Suite Measures

The Breast Cancer Screening Clinical Suite is designed to capture the process measures that are relevant for successful breast cancer screening of female patients.

This suite will be reported on female patients ages 50 to 74 as follows:

- Mammogram: checked and reported once in a 12-month program period or one year prior OR
- Breast MRI: checked and reported once in a 12-month program period or one year prior OR
- Breast-specific gamma imaging (Scintamammogram): checked and reported once in a 12-month program period or one year prior.

NOTE: The screening measures for this clinical suite are considered minimum recommendations. With some disease processes or with higher risk factors, some patients may require more intensive surveillance.

The following exclusions have been defined for the suite:

- Absence of both breasts
- Patient refusal for economic, religious or social reasons

References

U.S. Preventive Services Task Force:
www.ahrq.gov
American Cancer Society:
www.cancer.org
Center for Disease Control:
www.cdc.gov
Minnesota Community Measurement Program:
www.mnhealthcare.org
National Committee of Quality Assurance (NCQA):
www.ncqa.org
Healthcare Effectiveness Data and Information Set (HEDIS®):
www.ncqa.org
American Medical Association:
www.ama-assn.org
UpToDate:
www.uptodate.com

Cervical Cancer Screening

The National Cancer Institute estimated that in 2008 more than 11,000 U.S. women would be diagnosed with cervical cancer and 3,800 of these women would die of the disease. Efforts to increase the number of women who get Pap tests has led to a 70 percent decrease in the number of cervical cancer cases since the test was introduced in the 1950s.

Purpose of the Clinical Suite

The purpose of the Cervical Cancer Screening Clinical Suite is to increase the cervical cancer screening rates in female patients ages 21 to 65 to allow for early detection and treatment of cervical cancers.

Clinical Suite Measures

The Cervical Cancer Screening Clinical Suite is designed to capture the process measure of Pap test exams in female patients.

This suite will report on female patients ages 21 to 65 as follows:

- Pap Test: checked and reported once in a 12-month program period or two years prior.

NOTE: The screening measures for this clinical suite are considered minimum recommendations. With some disease processes or with higher risk factors, some patients may require more intensive surveillance.

The following exclusions have been defined for the suite:

- Hysterectomy
- Patient refusal for economic, religious or social reasons

References

U.S. Preventive Services Task Force
www.ahrq.gov
American Cancer Society:
www.cancer.org
Center for Disease Control:
www.cdc.gov
Minnesota Community Measurement Program:
www.mnhealthcare.org
National Committee of Quality Assurance (NCQA):
www.ncqa.org
Healthcare Effectiveness Data and Information Set (HEDIS®):
www.ncqa.org
American Medical Association:
www.ama-assn.org
National Cancer Institute:
www.cancer.gov
UpToDate:
www.uptodate.com

Chronic Heart Failure

An aging population and modern therapeutic innovations that prolong the lives of cardiac patients have made chronic heart failure (CHF) more common. Despite improvements in therapy, the mortality rate in patients with CHF is high.

Purpose of the Clinical Suite

The purpose of the Chronic Heart Failure Clinical Suite is to identify and comprehensively manage patients with chronic heart failure by pinpointing and tracking interventions that have been clinically proven to reduce the risk of developing complications.

Clinical Suite Measures

The Chronic Heart Failure Clinical Suite is designed to capture the process and outcome measures that are relevant to the successful treatment of patients with CHF.

This suite will be reported on patients ages 18-75 as follows:

Process Measures

- Ejection fraction (checked and reported once within 24-month reporting period)
- Serum Creatinine (checked and reported once within 12-month reporting period)
- Blood pressure exam
- Pulse exam

Outcome Measures

- Blood pressure (BP) ≤ 130/80 (most recent)
- If presence of Atrial Fibrillation, heart rate ≤ 80 (most recent)
- Tobacco free
- Presence of ACEi/ARB therapy when Left Ventricular Function (LVF) ≤ 40%
- Presence of Beta-blocker therapy when LVF is ≤ 40%
- If presence of Atrial Fibrillation, patient is on an anticoagulant*.

The following exclusions have been defined for the suite:

Anticoagulant

- Allergy to medication
- Contraindication to anticoagulation
- Patient refusal for economic, religious or social reasons

ACEi/ARB

- Allergy to ACEi *and* ARB
- Moderate to severe aortic stenosis
- Patient refusal for economic, religious or social reasons**Beta Blocker**

- Allergy to beta blocker
- Contraindication to use
- Patient refusal due to economic, religious or social reasons

References

American Heart Association:
www.americanheart.org
Center for Disease Control:
www.cdc.gov
Minnesota Community Measurement Program:
www.mnhealthcare.org
National Committee of Quality Assurance (NCQA):
www.ncqa.org
Healthcare Effectiveness Data and Information Set (HEDIS®):
www.ncqa.org
American Medical Association:
www.ama-assn.org
UpToDate:
www.uptodate.com

* Clopidogrel (Plavix), Prasugrel (Effient), Ticagrelor (Brilinta), Dabagatrin (Pradaxa), Warfarin, Coumadin

Colorectal Cancer Screening

Colorectal cancer is a common and lethal disease, with the risk of development being influenced by both environmental and genetic factors. According to the American Medical Association, screening exams can reduce the mortality rate from this disease by at least 30 percent.

Purpose of the Clinical Suite

The purpose of the Colorectal Cancer Screening Clinical Suite is to increase screening rates for colorectal cancer in patients to reduce the morbidity and mortality associated with this condition.

Clinical Suite Measures

The Colorectal Cancer Screening Clinical Suite is designed to capture the process measures that are relevant to successful colorectal cancer screening of patients.

This suite will be reported on patients ages 50 to 75 as follows:

- Fecal Occult Blood Test (FOBT): checked and reported once in a 12-month program period OR
- Fecal Immunochemical-based testing (FIT): checked and reported once in a 12-month program period OR
- Flexible Sigmoidoscopy: checked and reported once in a 12-month program period or four years prior OR
- Double Contrast Barium Enema (DCBE): checked and reported once in a 12-month program period or four years prior OR
- Colonoscopy: checked and reported once in a 12-month program period or nine years prior OR
- CT Colonography: checked and reported once in a 12-month program period or four years prior.

NOTE: The screening measures for this clinical suite are considered minimum recommendations. With some disease processes or with higher risk factors, some patients may require more intensive surveillance.

Claims data for BCBSND members will be available in patient care summary reports and identified as data from claims.

The following exclusions have been defined for the suite:

- History of a total colectomy
- Patient refusal for economic, religious or social reasons

References

American Cancer Society:
www.cancer.org
Center for Disease Control:
www.cdc.gov
Minnesota Community Measurement Program:
www.mnhealthcare.org
National Committee of Quality Assurance (NCQA):
www.ncqa.org
Healthcare Effectiveness Data and Information Set (HEDIS®):
www.ncqa.org
American Medical Association:
www.ama-assn.org
UpToDate:
www.uptodate.com

Coronary Artery Disease

Coronary artery disease (CAD), which includes coronary heart disease (CHD), stroke and peripheral vascular disease, is the leading cause of death in the United States and accounts for more than 900,000 deaths annually. The American Heart Association identifies the following major modifiable risk factors for coronary heart disease: smoking, hypertension, dyslipidemia, physical inactivity, obesity and diabetes.

Purpose of the Clinical Suite

The purpose of the Adult Stable Coronary Artery Disease Clinical Suite is to aid in the identification of patients with known CAD and provide a platform for the identification and management of the major risk factors associated with progression of CAD. The suite also identifies and tracts interventions that have been clinically proven to reduce the risk of complications associated with CAD.

Clinical Suite Measures

The Adult Stable Coronary Artery Disease Clinical Suite is designed to capture the process and intermediate outcome measures that are relevant to the successful management of patients age 18-75 with a diagnosis of CAD, including obstructive and non-obstructive CAD. The intermediate outcome measures are risk-adjusted to reflect underlying co-existing clinical conditions that affect treatment. The measures adopted, with the exception of optimal vascular care combined intermediate measure, are congruent with the AHA endorsed Chronic Stable Coronary Artery Disease Clinical Performance Measures.

This suite will be reported on patients ages 18-75 as follows:

Process Measures *(checked and reported once per reporting period)*

- Body Mass Index (BMI)
- LDL exam
- Beta-blocker therapy in patients with history of myocardial infarction (MI)
- Blood pressure exam

Outcome Measures

- BP < 140/90
- Most recent LDL < 100
- Patient is tobacco free
- Daily aspirin therapy *
- Optimal vascular care**

The following exclusions have been defined for the measure:

Aspirin

- Asthma
- Active bleeding/history of ASA - induced bleeding
- Allergy/anaphylaxis to medication
- Medical contraindication to use
- Patient refusal for economic, religious or social reasons

Beta-blocker therapy

- Allergy/anaphylaxis to medication
- Medical contraindication to use
- Patient refusal for economic, religious or social reasons

NOTE: No exclusions for tobacco status should exist in terms of reporting purposes.

References

American Heart Association: www.americanheart.org

Minnesota Community Measurement Program: www.mnhealthcare.org

National Committee of Quality Assurance (NCQA): www.ncqa.org

American Medical Association: www.ama-assn.org

*Plavix, Ticlid and Aggrenox will be considered equivalent to aspirin and an exclusion for aspirin will be considered legitimate exclusion for other antiplatelet agents.

**Optimal vascular care is defined as BP < 140/90 for patients with IVD *and* LDL < 100 *and* tobacco free *and* daily aspirin use if appropriate. This combined intermediate outcome measure is being adopted unchanged from the Minnesota Community Measure Project.

Diabetes, Adult

Diabetes is considered the fifth deadliest disease in the United States, according to the American Medical Association. It is associated with microvascular and macrovascular disease and accounts for almost 14 percent of U.S. health care expenditures, at least half of which are related to complications, such as myocardial infarction, stroke, end-stage renal disease, retinopathy and foot ulcers.

Purpose of the Clinical Suite

The purpose of the Adult Diabetes Clinical Suite is to aid in the management of patients with diabetes by identifying and tracking the major clinical factors associated with outcomes in diabetes. The suite also identifies and tracks additional clinical data that have been shown to reduce the risk of complications associated with poor management in this high-risk group of patients.

Clinical Suite Measures

The Adult Diabetes Clinical Suite is designed to capture the process and outcome measures that are relevant to the successful, comprehensive management of these patients.

This suite will be reported on patients ages 18-75 as follows:

Process Measures *(within the 12-month reporting period)*

- Blood pressure exam
- Diabetic foot exam
- Hemoglobin A1C (HgA1C) exam
- Low-density lipoprotein (LDL) exam
- Microalbumin exam
- Retinal exam

Outcome Measures

- Blood pressure (BP) < 140/90 (most recent)
- HgA1C < 8% (most recent)
- LDL < 100mg/dL (most recent)
- Patient is tobacco free
- "Optimal Diabetes Care"*

The following exclusions have been defined for the measure:

Microalbumin Exam

- Renal replacement therapy
- Diagnosis of nephropathy
- Macroscopic proteinuria
- Renal insufficiency
- Patient refusal for economic, religious or social reasons

Retinal Exam

- Blindness
- Diagnosis of retinopathy
- No retinopathy-exam deferred to next year
- Patient refusal for economic, religious or social reasons

References

American Diabetes Association:
www.diabetes.org
Minnesota Community Measurement Program:
www.mnhealthcare.org
National Committee of Quality Assurance (NCQA):
www.ncqa.org
Healthcare Effectiveness Data and Information Set (HEDIS®):
www.ncqa.org
American Medical Association:
www.ama-assn.org
UpToDate:
www.uptodate.com

* "Optimal Diabetes Care" is defined as HgA1C < 8 *and* LDL <100 *and* BP < 140/90 *and* tobacco free.

Diabetes, adolescent

Recent Blue Cross Blue Shield of North Dakota (BCBSND) research shows the incidence and prevalence of childhood diabetes continue to rise. Most significant is the rise in Type 2 diabetes. This data emphasizes the need for early detection and prevention of diabetes and its co-morbid conditions.

Purpose of the Clinical Suite

The purpose of the Adolescent Diabetes Clinical Suite is to aid in the management of patients age less than 18 who have diabetes by identifying and tracking the major clinical factors associated.

This clinical suite is designed to improve the detection, evaluation and management of diabetes complications in children and adolescents by tracking clinical and non-clinical factors, based on age stratification, that have an effect on the successful management of this condition.

Clinical Suite Measures

The Adolescent Diabetes Clinical Suite is designed to capture the process and outcome measures that are relevant to the successful, comprehensive management of these patients.

This suite will be reported on the American Diabetes Association (ADA) 2008 recommendations:

Age 13 – <18 years:

Process Measures *(within the 12-month reporting period)*

- Blood pressure exam
- HgA1C exam
- Microalbumin exam

Outcome Measures

- BP ≤ 130/80 (most recent)
- HgA1C ≤ 8% (most recent)

The following exclusions have been defined for the suite:

Microalbumin Exam

- Renal replacement therapy
- Diagnosis of nephropathy
- Macroscopic proteinuria
- Renal insufficiency
- Patient refusal for economic, religious or social reasons

References

American Diabetes Association:
www.diabetes.org
Minnesota Community Measurement Program:
www.mnhealthcare.org
National Committee of Quality Assurance (NCQA):
www.ncqa.org
Healthcare Effectiveness Data and Information Set (HEDIS®):
www.ncqa.org
American Medical Association:
www.ama-assn.org
UpToDate:
www.uptodate.com

Diabetes, child

Recent Blue Cross Blue Shield of North Dakota (BCBSND) research shows the incidence and prevalence of childhood diabetes continue to rise. Most significant is the rise in Type 2 diabetes. This data emphasizes the need for early detection and prevention of diabetes and its co-morbid conditions.

Purpose of the Clinical Suite

The purpose of the Child Diabetes Clinical Suite is to aid in the management of patients younger than 13 who have diabetes by identifying and tracking the major clinical factors associated.

This clinical suite is designed to improve the detection, evaluation and management of diabetes complications in children and adolescents by tracking clinical and non-clinical factors, based on age stratification, that have an effect on the successful management of this condition.

Clinical Suite Measures

The Child Diabetes Clinical Suite is designed to capture the process and outcome measures that are relevant to the successful, comprehensive management of these patients.

This suite will be reported on the American Diabetes Association (ADA) 2008 recommendations:

Age 0 – < 13 years:

Process Measures *(within the 12-month reporting period)*

- Hemoglobin A1C (HgA1C) exam
- Blood pressure exam

Outcome Measures

- HgA1C ≤ 8.5% (most recent)
- Blood pressure (BP) < 130/80 (most recent)

No exclusions have been defined for this suite.

References

American Diabetes Association:
www.diabetes.org
Minnesota Community Measurement Program:
www.mnhealthcare.org
National Committee of Quality Assurance (NCQA):
www.ncqa.org
Healthcare Effectiveness Data and Information Set (HEDIS®):
www.ncqa.org
American Medical Association:
www.ama-assn.org
UpToDate:
www.uptodate.com

Hypertension, adult

Hypertension is a major independent, modifiable risk factor for the development of CAD, stroke and renal failure. At least 65 million adult Americans, or nearly one-fourth of the adult population of the United States, have hypertension. The risk of cardiovascular disease in the patient with hypertension can be greatly reduced with effective hypertension management.

Purpose of the Clinical Suite

The Adult Hypertension Suite is designed to improve the detection, evaluation and management of hypertension in patients 18 and older. The suite also identifies and tracks interventions that have been clinically proven to reduce the risk of developing complications associated with poor hypertension control.

Clinical Suite Measures

The Adult Hypertension Clinical Suite is designed to capture the process and intermediate clinical outcome measures that are relevant to the successful management of patients 18 and older with known hypertension (Stage I or II). The intermediate outcomes measures being tracked are risk-adjusted based on the presence or absence of chronic kidney disease (CKD), defined as an estimated glomerular filtration rate (eGFR) of less than 60 mL/min, the presence thereof, significantly impacting patient management. In addition, the suite will track patient demographics, associated laboratory values, medications and laboratory values associated with the management of these patients.

The Adult Hypertension Suite will be activated only within the Care Center in instances where blood pressure control is not being tracked as an intermediate outcomes measure in another suite, such as diabetes or chronic heart failure. In the event where blood pressure control is being tracked as an intermediate outcomes measure in another suite, that suite's measures will reflect the patient's hypertension control.

The suite will report patients 18 and older who have been diagnosed with hypertension (Stage I & II) as follows:

Process Measures

- Annual blood pressure (BP) measurement
- ACEi/ARB therapy if GFR < 60
- Blood pressure exam

Outcome Measures

- BP < 140/90 or BP < 130/80 if GFR < 60 or microalbumin exclusion

The following exclusions have been defined for the suite:

Microalbumin

- Renal replacement therapy
- Macroscopic proteinuria
- Chronic renal failure

ACEi

- ACEi Allergy
- Hypotension
- Cough
- Patient intolerance
- Aortic Stenosis
- Patient refusal for economic, religious or social reasons

ARB

- ARB Allergy
- Hypotension
- Patient intolerance
- Aortic Stenosis
- Patient refusal for economic, religious or social reasons

The measures above will allow treating physicians the ability to identify additional co-morbidities, as well as clinical factors that may impact treatment decisions, thus allowing for a more comprehensive management plan for individual patients.

References

American Heart Association:
www.americanheart.org
Minnesota Community Measurement Program:
www.mnhealthcare.org
National Committee of Quality Assurance (NCQA):
www.ncqa.org
The Seventh Report of the Joint National Committee on the Prevention, Detection, Evaluation, and Treatment of High Blood Pressure (JNC VII):
www.nhlbi.nih.gov/guidelines/hypertension/express.pdf
National Kidney Disease Education Program:
www.nkdep.nih.gov

Hypertension, child and adolescent

The American Heart Association reports that high blood pressure in childhood can be a major predictor of chronic high blood pressure in adulthood. The AHA goes on to state that elevated blood pressure (prehypertension and hypertension) can lead to a number of more serious health problems and affects about 60 percent of American children and adolescents.

Purpose of the Clinical Suite

The Child and Adolescent Hypertension Suite is designed to improve the early detection of hypertension in patients who are 18 years and younger. The suite also tracks risk factors for associated co-morbidities such as hyperglycemia, obesity and hyperlipidemia.

Clinical Suite Measures

The Child and Adolescent Hypertension Clinical Suite is designed to capture the process and intermediate clinical outcome measures that are relevant to the successful management of patients younger than 18 with known hypertension (Stage I or II, as established by the National High Blood Pressure Education Program).

The Child and Adolescent Hypertension Suite will only be activated within the Care Center in instances where blood pressure control is not being tracked as an intermediate outcomes measure in another suite. In the event where blood pressure control is being tracked as an intermediate outcomes measure in another suite, that suite's measures will reflect the patient's hypertension control.

The suite will report patients with a diagnosis of hypertension (Stage I & II) who are younger than 18 as follows:

Process Measures

- Annual blood pressure (BP) measurement
- Annual body mass index (BMI) calculation
- Annual urine analysis/microalbumin
- Annual serum creatinine
- Annual fasting blood glucose
- Annual total cholesterol exam

Outcome Measures

- BP ≤ 120/80*
- Total cholesterol ≤ 200
- Fasting blood glucose ≤ 100

The following exclusions have been defined for the measure:

Microalbumin

- Renal replacement therapy
- Macroscopic proteinuria
- Chronic renal failure
- Patient refusal for economic, religious or social reasons

References

National Heart Lung and Blood Institute:
www.nhlbi.nih.gov/guidelines/asthma

American Heart Association:
www.americanheart.org

Minnesota Community Measurement Program:
www.mnhealthcare.org

National Committee of Quality Assurance (NCQA):
www.ncqa.org

The Seventh Report of the Joint National Committee on the Prevention, Detection, Evaluation, and Treatment of High Blood Pressure (JNC VII):
www.nhlbi.nih.gov/guidelines/hypertension/express.pdf

National Kidney Disease Education Program:
www.nkdep.nih.gov

* The complexity of defining hypertension in children necessitates an elective decision to define hypertension in this age group to a chronic elevation in blood pressure above 120 systolic and/or 80 diastolic.

Immunizations, adult and adolescent

Technology has allowed an array of vaccines to be developed. Disease prevention provides both health benefits and helps control the rising cost of medical care. Adult immunizations are heavily related to the co-morbid conditions of the patient.

Purpose of the Clinical Suite

The purpose of the Adult Immunizations Clinical Suite is to encourage all adults to have immunizations recommended by the Centers for Disease Control and Prevention (CDC).

Clinical Suite Measures

The Adult Immunizations Clinical Suite is designed to show care opportunities for adult immunizations recommended by the CDC.

This suite will be reported for patients older than 11 on the CDC guidelines as follows:

Process Measures

- Influenza-A (Flu Vaccine): 1 in the past 12-month reporting period
- Tetanus, diphtheria and acellular pertussis (Td/Tdap): 1 booster every 10 years
- Varicella (VZV): 2 doses, ever
- Human Papilloma Vaccine (HPV): female patients 18 to 26 with 3 HPV before 26th birthday
- Herpes Zoster Vaccination: 1 for patients 60 and older, ever
- Pneumococcal Vaccine: 1 for patients older than 65, 1 every 10 years

NOTE: These standards are recommended for the average healthy adult patient. Certain disease states may require modifications to these recommendations.

The following exclusions have been defined for the suite:

All immunizations

- Anaphylactic reaction to the vaccine or its components
- Medical contraindication to use
- Patient refusal for economic, religious or social reasons

References

Center for Disease Control:
www.cdc.gov
Minnesota Community Measurement Program:
www.mnhealthcare.org
National Committee of Quality Assurance (NCQA):
www.ncqa.org
Healthcare Effectiveness Data and Information Set (HEDIS®):
www.ncqa.org
American Medical Association:
www.ama-assn.org
UpToDate:
www.uptodate.com

Immunizations, child

Technology has allowed an array of vaccines to be developed. Disease prevention provides health benefits and helps control the rising cost of medical care.

Purpose of the Clinical Suite

The purpose of the Childhood Immunizations Clinical Suite is to encourage all children and adolescents to receive immunizations recommended by the Centers for Disease Control and Prevention (CDC), while taking into consideration the social, economic and religious preferences of each child's parents.

Clinical Suite Measures

The Childhood Immunizations Clinical Suite is designed to show the care opportunities for immunizations for the child and adolescent population as recommended by the CDC. The complexity of clinical risk-adjustment and application of the CDC immunization recommendations necessitates that only general guidelines be applicable to the average healthy child.

This suite will be reported on the CDC guidelines as follows:

Children birth to 2

Process Measures *(to be completed on or before the second birthday)*

- 4 Diphtheria, tetanus and pertussis (DTaP)
- 3 Polio vaccine (IPV)
- 1 Measles, mumps, rubella (MMR)
- 3 Haemophilus influenza type B (HIB)
- 3 Hepatitis B (Hep-B)
- 1 Varicella/chicken pox (VZV)
- 4 Pneumococcal vaccine
- 2 Hepatitis A (Hep-A)
- 2 Influenza-A, annually

The following exclusions have been defined for the suite:

All immunizations

- Anaphylactic reaction to the vaccine or its components
- Medical contraindication to use
- Parent refusal for economic, religious or social reasons

References

Center for Disease Control:
www.cdc.gov

Minnesota Community Measurement Program:
www.mnhealthcare.org

National Committee of Quality Assurance (NCQA):
www.ncqa.org

Healthcare Effectiveness Data and Information Set (HEDIS®):
www.ncqa.org

American Medical Association:
www.ama-assn.org

UpToDate:
www.uptodate.com

Attachment 15

Attachment 15

Attachment 15

Pharmacy Carve-In

Study Shows Advantages of Carve-in Pharmacy Benefits

FACT SHEET

BlueCross BlueShield Association

Accounts purchasing health insurance products can choose between packages with integrated medical and pharmacy benefits or those with separate medical and pharmacy benefits. Health insurance products with integrated medical and pharmacy benefits are defined as having carve-in pharmacy benefits, while health insurance products with separate medical and pharmacy benefits are defined as having carve-out pharmacy benefits. Both carve-in and carve-out pharmacy benefit programs may include clinical and cost-saving components such as mail order pharmacy services, specialty pharmacy services, formulary management, prescription drug utilization review and disease management programs.

Carve-In Program	Carve-Out Program
May include services such as mail-order and specialty pharmacy services, formulary management, drug utilization review and care management. Plan may use a pharmacy benefit manager (PBM), but PBM is integrated with health plan.	May include services such as mail-order and specialty pharmacy services, formulary management, drug utilization review and care management. Pharmacy benefits manager contracts separately with account to provide services.
Health plan **HAS DIRECT ACCESS** to pharmacy data.	Health plan **DOES NOT HAVE DIRECT ACCESS** to pharmacy data.
Health plan **CONTROLS** copayments, drug benefit tiers and formulary.	Health plan **DOES NOT CONTROL** copayments, drug benefit tiers and formulary.

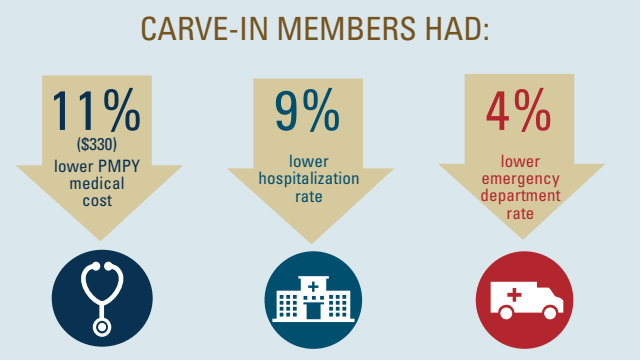
Study Overview

The Blue Cross Blue Shield Association commissioned a study comparing the medical costs of members with carve-in pharmacy benefits with those of members with carve-out pharmacy benefits, as well as the rate of hospitalization and emergency department visits for members in both types of plans. In July 2013, Prime Therapeutics, a pharmacy benefits management company owned by a consortium of Blue Plans, conducted the study. The Prime Therapeutics health outcomes team compared the medical costs, hospital admissions and emergency department visits in 2010 and 2011 for **1.8 million Blue members in self-funded plans** administered by **25 Blue Plans**. Members were **roughly evenly divided between carve-in and carve-out plans** and were **matched by age, gender and geographic region**.

KEY RESULTS

The study indicated that members with carve-in pharmacy benefits had lower per member per year (PMPY) medical costs, fewer hospitalizations and fewer emergency department visits.

Results were consistent with those of three regional Blue studies comparing medical costs for carve-in and carve-out members.[1-3]



Blue Cross Blue Shield Association is an association of independent Blue Cross and Blue Shield companies.

ANALYSIS

The lower medical costs for members with carve-in pharmacy benefits may be due to one or more factors, including:

- Integration of medical and pharmacy data in carve-in arrangements enables health plans to take a **holistic approach to controlling medical costs**, in which prescription drug costs are considered in the context of effective overall management of the patient's condition.[4]
- Plans can design the prescription drug formulary to include medications that result in the **best overall clinical outcomes,** instead of designing the formulary based solely on cost or rebates.
- Pharmacy data available through carve-in pharmacy benefits **improves healthcare coordination and data integration**, thus enabling providers to offer quicker and more targeted health interventions to patients.[5-6]
- Carve-in health plans can design the prescription drug benefit to encourage appropriate utilization by therapeutic class, instead of designing the benefit to drive use of the most profitable drugs. Lowering copayments have been shown to increase medication adherence but raising copayments too high may increase medication abandonment and effectively combining these strategies may contribute to lower medical costs.[7] **Lower copayments have been shown to increase member compliance with drug therapy**.[8-10]

For more detailed study information, please contact your Blue Cross Blue Shield Plan.

STUDY DESIGN

- Used de-identified Blue Health Intelligence®[11] data on 1.8 million members under age 65 in 25 Blue Plans for 2011 and 2012. Members who had changes in benefit design or who had lapses in coverage were excluded from the study.
- Compared medical costs, hospitalization rates, and emergency department visit rates for 818,054 carve-in and 1,042,029 carve-out members.
- Used a general linear model with gamma distribution to measure the difference in average PMPY total medical costs between carve-in and carve-out patients and a multivariate logistic regression model to compare the percentage of carve-in and carve-out members who were hospitalized or visited the emergency department.
- These methods were used to adjust for baseline differences in member age, gender, diagnostic cost group scores, presence of one or more of six chronic diseases, insurance product type, urban or rural geographic region, and group size.

1. Culley EJ, Williams LC, Thomas L. Pharmacy Benefits Carve-In: The Right Prescription for Cost Savings. Benefits & Compensation Digest 2010; 47(11):22-26. http://web.ebscohost.com/ehost/pdfviewer/pdfviewer?sid=da7c8ed3-fd61-4d61-983c-54690231d77a%40sessionmgr11&vid=2&hid=23. Accessed June 28, 2013.
2. Smith-McLallen A. Effects of Pharmacy Benefit Carve-In on Utilization and Medical Costs: A Three-Year Study. Benefits Magazine 2012;49(2):1-6 http://www.ifebp.org/pdf/webexclusive/12feb.pdf. Accessed June 28, 2013.

3-4. Wells P, Ness D. Pharmacy Carve-In: The Value of Integrated Benefits. Premera Blue Cross. 2011. Washington Healthcare News. http://www/wahcnews.com/newsletters/wa-premera-0412.pdf. Accessed June 28, 2013.

5. BlueCross Blue Shield of North Carolina – Corporate Medical Policy – Infertility Diagnosis and Treatment. http://www.bcbsnc.com/assets/services/public/pdfs/medicalpolicy/infertility_diagnosis_and_treatment.pdf. Accessed June 28, 2013.
6. Carefirst BluePreferred (PPO) member services. https://member.carefirst.com/wps/portal/!ut/p/c4/04_SB8K8xLLM9MSSzPy8xBz9CP0os3hLbzN_Q09LYwN_Fw9DA09fiBHj6AgQwNHM_2CbEdFANmphzQ!/?WCM_GLOBAL_CONTEXT=/wcmwps/wcm/connect/content-member/carefirst/memberportal/plansummaries/popup/bluepreferred Accessed June 28, 2013.
7. Gleason P. Lessons from the Real World: Designing Specialty Pharmacy Benefits to Maximize Value. Benefits Magazine 2012;10:38-41
8. Solomon MD, Goldman DP, Joyce GF, Escarce JJ. Cost Sharing and the Initiation of Drug Therapy for the Chronically Ill. Arch Intern Med 2009; 169(8): 740-748.
9. Shrank WH, Hoang T, Ettner SL, et al. The Implications of Choice: Prescribing Generic or Preferred Pharmaceuticals Improves Adherence for Chronic Conditions. Arch Intern Med 2006; 166: 332-337.
10. Karac-Mandic P, Jena AB, Joyce GF, Goldman DP. Out-of-Pocket Medication Costs and Use of Medications and Health Care Services among Children with Asthma. JAMA 2012; 307(12): 1284-1291.
11. Blue Health Intelligence (BHI) is a trade name of Health Intelligence Company, LLC, an independent licensee of the Blue Cross and Blue Shield Association.

Y10-13-391

Attachment 16

Attachment 16

Drug Formulary

July 2014

Blue Cross Blue Shield of North Dakota Drug Formulary

Click to search for a **drug name** in this document

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Please consider talking to your doctor about prescribing formulary medications, which may help reduce your out-of-pocket costs. This list may help guide you and your doctor in selecting an appropriate medication for you.

The drug formulary is regularly updated. Please visit **bcbsnd.com** for the most up-to-date information.

To search for a drug name within this PDF document, use the **Control** and **F** keys on your keyboard, or go to **Edit** in the drop-down menu and select **Find/Search**. Type in the word or phrase you are looking for and click on **Search**.

2626 ND © Prime Therapeutics LLC 07/14

Introduction

Formulary

The goal of the Blue Cross Blue Shield of North Dakota (BCBSND) formulary is to provide our members broad access to drugs and supplies at a reasonable overall cost. The BCBSND Drug Formulary is the list of products (drugs and supplies) that reflect the current recommendations of the BCBSND Pharmacy & Therapeutics (P&T) Committee. The formulary is intended for use in the ambulatory setting. Drugs are selected for addition to the formulary after considering safety, efficacy, uniqueness, and market considerations. **Providers are encouraged to prescribe formulary drugs.**

Benefits are not limited to the drugs on this formulary list. Products not listed in this formulary are non-formulary (NF). Exception: most diabetic supplies are covered at the highest benefit for plans that cover them. The P&T committee may choose to not add a drug or remove a drug from formulary for reasons including safety or efficacy concerns, or because a clinically similar, more cost-effective drug is already on formulary. Newly marketed drugs are non-formulary until reviewed by the P&T Committee. The entire formulary is reviewed annually by the P&T Committee. This formulary list is subject to change. **Drug coverage is dependent on individual plan benefits**.

Members

To save the most money on prescription drugs, take this Formulary with you each time you visit your physician. Consider asking your physician to prescribe drugs listed in this Formulary, if appropriate. Any and all decisions that require or pertain to independent professional medical judgment or training, or the need for, and dosage of, a prescription drug, must be made solely by you and your physician in accordance with the patient/physician relationship.

The current version and recent changes to this Formulary is available at the BCBSND website at **www.bcbsnd.com** or by calling the customer service number listed on your identification card. **Online pharmacy tools** are available through the Prime Therapeutics® website at **www.MyPrime.com**. BCBSND members can find drug cost estimates or check if a particular drug is on the BCBSND formulary.

Under some circumstances, formulary drugs may be excluded from coverage under the drug benefit (e.g., oral contraceptives, nicotine replacement therapy, Retin-A, various injectables, etc.). In all cases, plan inclusions/exclusions determine specific coverage regardless of formulary status. Drugs not listed are non-formulary. Exception: most diabetic supplies are covered at the highest benefit level for plans that cover them. However, only the preferred products are included on this list.

Providers

Generic Utilization

The BCBSND Committee encourages generic utilization as a way to provide high-quality drugs at a reduced cost. By prescribing drugs listed in this formulary that are available generically, you are providing a product that can be expected to have the same effectiveness and safety profile as the brand product while lowering overall medical insurance costs for your patients. In addition, your patient will likely have a lower cost share for generic drugs because most benefit plans are based on a tiered or brand/generic copayment and coinsurance structure.

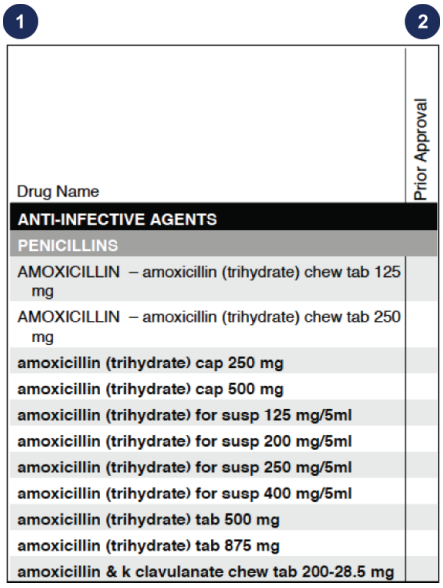
Prior Approval

Use of some products identified by **PA** may be approved only after certain criteria are met. If prior approval is not obtained, benefits may be denied. A physician (or clinic personnel) should submit a written request to the address shown below for prior approval consideration. The Prior Approval Request form is available at https://www.thorconnect.org/docs/wcmd_014232.pdf. A list of the products requiring prior approval may be found at **www.bcbsnd.com** under pharmacy.

Fax to: (701) 277-2253
Mail to:
BCBSND
Attn: Medical Management
4510 13th Ave S
Fargo, ND 58121

How to use this list

The Formulary is organized into broad categories (e.g. Anti-Infective drugs). Within most categories, drugs are sub-grouped by drug class (e.g. Penicillins) or by use for a specific medical condition (e.g. Diabetes). These categories can help determine which specific product is on formulary.



1. The first column of the chart lists the drug name. Generic drugs are shown in lower-case **boldface** type. Most generic drugs are followed by a reference brand drug in (parentheses). Some generic products have no reference brand.

   Brand prescription drugs are shown in capital letters followed by the generic name.

2. The second column indicates the Utilization Management (UM) program(s) that apply to the prescription drug (e.g., Prior Approval). If an indicator is present in the column(s), then the UM program noted is possibly applied to your benefit. Some plans may have UM on additional medications beyond those noted in this document.

Abbreviation/acronym key

caps.....capsules
chew.....chewable
conc.....concentrate
cr.....controlled release
dr.....delayed release
ec.....enteric coated
effe.....effervescent
equiv.....equivalent
er.....extended release
inhal.....inhalation
inj.....injection
liq.....liquid
lotn.....lotion
nebu.....nebulizer
odt.....orally disintegrating tablets
oint.....ointment
ophth.....ophthalmic
osm.....osmotic release
powd.....powder
sa.....sustained action
sl.....sublingual
soln.....solution
sr.....sustained release
suppos.....suppositories
susp.....suspension
tab.....tablets
td.....transdermal

Drug Name	Prior Approval
ANTI-INFECTIVE AGENTS	
PENICILLINS	
AMOXICILLIN – amoxicillin (trihydrate) chew tab 125 mg	
AMOXICILLIN – amoxicillin (trihydrate) chew tab 250 mg	
amoxicillin (trihydrate) cap 250 mg	
amoxicillin (trihydrate) cap 500 mg	
amoxicillin (trihydrate) for susp 125 mg/5ml	
amoxicillin (trihydrate) for susp 200 mg/5ml	
amoxicillin (trihydrate) for susp 250 mg/5ml	
amoxicillin (trihydrate) for susp 400 mg/5ml	
amoxicillin (trihydrate) tab 500 mg	
amoxicillin (trihydrate) tab 875 mg	
amoxicillin & k clavulanate chew tab 200-28.5 mg	
amoxicillin & k clavulanate chew tab 400-57 mg	
amoxicillin & k clavulanate for susp 200-28.5 mg/5ml	
amoxicillin & k clavulanate for susp 250-62.5 mg/5ml (Augmentin)	
amoxicillin & k clavulanate for susp 400-57 mg/5ml	
amoxicillin & k clavulanate for susp 600-42.9 mg/5ml (Augmentin es-600)	
amoxicillin & k clavulanate tab sr 12hr 1000-62.5 mg (Augmentin xr)	
amoxicillin & k clavulanate tab 250-125 mg	
amoxicillin & k clavulanate tab 500-125 mg (Augmentin)	
amoxicillin & k clavulanate tab 875-125 mg (Augmentin)	
AMPICILLIN – ampicillin for susp 125 mg/5ml	
AMPICILLIN – ampicillin for susp 250 mg/5ml	
ampicillin cap 250 mg	
ampicillin cap 500 mg	
AUGMENTIN – amoxicillin & k clavulanate for susp 125-31.25 mg/5ml	

Drug Name	Prior Approval
dicloxacillin sodium cap 250 mg	
dicloxacillin sodium cap 500 mg	
penicillin v potassium for soln 125 mg/5ml	
penicillin v potassium for soln 250 mg/5ml	
penicillin v potassium tab 250 mg	
penicillin v potassium tab 500 mg	
CEPHALOSPORINS	
cefaclor cap 250 mg	
cefaclor cap 500 mg	
cefadroxil cap 500 mg	
cefadroxil for susp 250 mg/5ml	
cefadroxil for susp 500 mg/5ml	
cefadroxil tab 1 gm	
cefdinir cap 300 mg	
cefdinir for susp 125 mg/5ml	
cefdinir for susp 250 mg/5ml	
cefpodoxime proxetil for susp 100 mg/5ml	
cefpodoxime proxetil for susp 50 mg/5ml	
cefpodoxime proxetil tab 100 mg	
cefpodoxime proxetil tab 200 mg	
cefprozil for susp 125 mg/5ml	
cefprozil for susp 250 mg/5ml	
cefprozil tab 250 mg	
cefprozil tab 500 mg	
cefuroxime axetil for susp 125 mg/5ml (Ceftin)	
cefuroxime axetil tab 250 mg (Ceftin)	
cefuroxime axetil tab 500 mg (Ceftin)	
cephalexin cap 250 mg (Keflex)	
cephalexin cap 500 mg (Keflex)	
cephalexin for susp 125 mg/5ml	
cephalexin for susp 250 mg/5ml	
SUPRAX – cefixime tab 400 mg	
SUPRAX – cefixime for susp 100 mg/5ml	
SUPRAX – cefixime for susp 200 mg/5ml	
SUPRAX – cefixime for susp 500 mg/5ml	

Drug Name	Prior Approval
MACROLIDES	
AZITHROMYCIN – azithromycin powd pack for susp 1 gm	
azithromycin for susp 100 mg/5ml (Zithromax)	
azithromycin for susp 200 mg/5ml (Zithromax)	
azithromycin tab 250 mg (Zithromax)	
azithromycin tab 500 mg (Zithromax)	
azithromycin tab 600 mg (Zithromax)	
clarithromycin for susp 125 mg/5ml	
clarithromycin for susp 250 mg/5ml (Biaxin)	
clarithromycin tab sr 24hr 500 mg (Biaxin xl pac)	
clarithromycin tab 250 mg (Biaxin)	
clarithromycin tab 500 mg (Biaxin)	
E.E.S. 400 – erythromycin ethylsuccinate tab 400 mg	
ERY-TAB – erythromycin tab delayed release 250 mg	
ERY-TAB – erythromycin tab delayed release 333 mg	
ERY-TAB – erythromycin tab delayed release 500 mg	
ERYTHROCIN STEARATE – erythromycin stearate tab 250 mg	
ERYTHROMYCIN BASE – erythromycin tab 250 mg	
ERYTHROMYCIN BASE – erythromycin tab 500 mg	
ERYTHROMYCIN ETHYLSUCCINA – erythromycin ethylsuccinate tab 400 mg	
erythromycin w/ delayed release particles cap 250 mg	
ZITHROMAX – azithromycin powd pack for susp 1 gm	
TETRACYCLINES	
demeclocycline hcl tab 150 mg	
demeclocycline hcl tab 300 mg	
doxycycline hyclate cap 100 mg (Vibramycin)	
doxycycline hyclate cap 50 mg	
doxycycline hyclate tab 100 mg	
doxycycline hyclate tab 20 mg	

Drug Name	Prior Approval
doxycycline monohydrate cap 100 mg (Monodox)	
doxycycline monohydrate cap 150 mg (Adoxa)	
doxycycline monohydrate cap 50 mg	
doxycycline monohydrate cap 75 mg (Monodox)	
doxycycline monohydrate tab 100 mg (Adoxa pak 1/100)	
doxycycline monohydrate tab 150 mg (Adoxa pak 1/150)	
doxycycline monohydrate tab 50 mg (Adoxa)	
doxycycline monohydrate tab 75 mg (Adoxa)	
minocycline hcl cap 100 mg (Minocin)	
minocycline hcl cap 50 mg (Minocin)	
minocycline hcl cap 75 mg (Minocin)	
minocycline hcl tab 100 mg	
minocycline hcl tab 50 mg	
minocycline hcl tab 75 mg	
TETRACYCLINE HCL – tetracycline hcl cap 250 mg	
TETRACYCLINE HCL – tetracycline hcl cap 500 mg	
FLUOROQUINOLONES	
CIPRO – ciprofloxacin for oral susp 250 mg/5ml (5%) (5 gm/100ml)	
CIPRO – ciprofloxacin for oral susp 500 mg/5ml (10%) (10 gm/100ml)	
ciprofloxacin hcl tab 100 mg (base equiv)	
ciprofloxacin hcl tab 250 mg (base equiv) (Cipro)	
ciprofloxacin hcl tab 500 mg (base equiv) (Cipro)	
ciprofloxacin hcl tab 750 mg (base equiv)	
ciprofloxacin-ciprofloxacin hcl tab sr 24hr 1000 mg(base eq) (Cipro xr)	
ciprofloxacin-ciprofloxacin hcl tab sr 24hr 500 mg (base eq) (Cipro xr)	
levofloxacin oral soln 25 mg/ml (Levaquin)	
levofloxacin tab 250 mg (Levaquin)	
levofloxacin tab 500 mg (Levaquin)	
levofloxacin tab 750 mg (Levaquin)	
ofloxacin tab 200 mg	

Drug Name	Prior Approval
ofloxacin tab 300 mg	
ofloxacin tab 400 mg	
AMINOGLYCOSIDES	
neomycin sulfate tab 500 mg	
paromomycin sulfate cap 250 mg	
tobramycin nebu soln 300 mg/5ml (Tobi)	
TUBERCULOSIS	
ethambutol hcl tab 100 mg (Myambutol)	
ethambutol hcl tab 400 mg (Myambutol)	
ISONIAZID – isoniazid syrup 50 mg/5ml	
isoniazid & rifampin cap 150-300 mg	
isoniazid tab 100 mg	
isoniazid tab 300 mg	
PRIFTIN – rifapentine tab 150 mg	
pyrazinamide tab 500 mg	
rifabutin cap 150 mg (Mycobutin)	
RIFAMATE – isoniazid & rifampin cap 150-300 mg	
rifampin cap 150 mg (Rifadin)	
rifampin cap 300 mg (Rifadin)	
FUNGAL INFECTIONS	
fluconazole for susp 10 mg/ml (Diflucan)	
fluconazole for susp 40 mg/ml (Diflucan)	
fluconazole tab 100 mg (Diflucan)	
fluconazole tab 150 mg (Diflucan)	
fluconazole tab 200 mg (Diflucan)	
fluconazole tab 50 mg (Diflucan)	
flucytosine cap 250 mg (Ancobon)	
flucytosine cap 500 mg (Ancobon)	
griseofulvin microsize susp 125 mg/5ml	
griseofulvin microsize tab 500 mg (Grifulvin v)	
itraconazole cap 100 mg (Sporanox)	
LAMISIL – terbinafine hcl oral granules packet 125 mg	
LAMISIL – terbinafine hcl oral granules packet 187.5 mg	

Drug Name	Prior Approval
NOXAFIL – posaconazole susp 40 mg/ml	•
nystatin tab 500000 unit	
terbinafine hcl tab 250 mg (Lamisil)	
voriconazole for susp 40 mg/ml (Vfend)	•
voriconazole tab 200 mg (Vfend)	•
voriconazole tab 50 mg (Vfend)	•
VIRAL INFECTIONS	
Cytomegalovirus	
VALCYTE – valganciclovir hcl tab 450 mg	
VALCYTE – valganciclovir hcl for soln 50 mg/ml (base equiv)	
Hepatitis	
adefovir dipivoxil tab 10 mg (Hepsera)	
BARACLUDE – entecavir tab 0.5 mg	
BARACLUDE – entecavir tab 1 mg	
BARACLUDE – entecavir oral soln 0.05 mg/ml	
EPIVIR HBV – lamivudine oral soln 5 mg/ml	
lamivudine tab 100 mg (Epivir hbv)	
OLYSIO – simeprevir sodium cap 150 mg (base equivalent)	•
PEGASYS – peginterferon alfa-2a inj 180 mcg/ml	
PEGASYS – peginterferon alfa-2a inj 180 mcg/0.5ml	
PEGASYS – peginterferon alfa-2a inj kit 180 mcg/0.5ml	
PEGASYS PROCLICK – peginterferon alfa-2a inj 135 mcg/0.5ml	
PEGASYS PROCLICK – peginterferon alfa-2a inj 180 mcg/0.5ml	
ribavirin cap 200 mg (Rebetol)	
ribavirin tab 200 mg (Copegus)	
SOVALDI – sofosbuvir tab 400 mg	•
Herpes	
acyclovir cap 200 mg (Zovirax)	
acyclovir susp 200 mg/5ml (Zovirax)	
acyclovir tab 400 mg (Zovirax)	
acyclovir tab 800 mg (Zovirax)	

Drug Name	Prior Approval
famciclovir tab 125 mg (Famvir)	
famciclovir tab 250 mg (Famvir)	
famciclovir tab 500 mg (Famvir)	
valacyclovir hcl tab 1 gm (Valtrex)	
valacyclovir hcl tab 500 mg (Valtrex)	
HIV/AIDS	
abacavir sulfate tab 300 mg (base equiv) (Ziagen)	
abacavir sulfate-lamivudine-zidovudine tab 300-150-300 mg (Trizivir)	
APTIVUS – tipranavir cap 250 mg	
APTIVUS – tipranavir oral soln 100 mg/ml	
ATRIPLA – efavirenz-emtricitabine-tenofovir df tab 600-200-300 mg	
COMPLERA – emtricitabine-rilpivirine-tenofovir df tab 200-25-300 mg	
CRIXIVAN – indinavir sulfate cap 200 mg	
CRIXIVAN – indinavir sulfate cap 400 mg	
didanosine delayed release capsule 125 mg (Videx ec)	
didanosine delayed release capsule 200 mg (Videx ec)	
didanosine delayed release capsule 250 mg (Videx ec)	
didanosine delayed release capsule 400 mg (Videx ec)	
EDURANT – rilpivirine hcl tab 25 mg (base equivalent)	
EMTRIVA – emtricitabine caps 200 mg	
EMTRIVA – emtricitabine soln 10 mg/ml	
EPIVIR – lamivudine oral soln 10 mg/ml	
EPZICOM – abacavir sulfate-lamivudine tab 600-300 mg	
FUZEON – enfuvirtide for inj 90 mg	
INTELENCE – etravirine tab 25 mg	
INTELENCE – etravirine tab 100 mg	
INTELENCE – etravirine tab 200 mg	
INVIRASE – saquinavir mesylate cap 200 mg	

Drug Name	Prior Approval
INVIRASE – saquinavir mesylate tab 500 mg	
ISENTRESS – raltegravir potassium tab 400 mg (base equiv)	
ISENTRESS – raltegravir potassium chew tab 25 mg (base equiv)	
ISENTRESS – raltegravir potassium chew tab 100 mg (base equiv)	
KALETRA – lopinavir-ritonavir tab 100-25 mg	
KALETRA – lopinavir-ritonavir tab 200-50 mg	
KALETRA – lopinavir-ritonavir soln 400-100 mg/5ml (80-20 mg/ml)	
lamivudine tab 150 mg (Epivir)	
lamivudine tab 300 mg (Epivir)	
lamivudine-zidovudine tab 150-300 mg (Combivir)	
LEXIVA – fosamprenavir calcium tab 700 mg (base equiv)	
LEXIVA – fosamprenavir calcium susp 50 mg/ml (base equiv)	
nevirapine tab sr 24hr 400 mg (Viramune xr)	
nevirapine tab 200 mg (Viramune)	
NORVIR – ritonavir cap 100 mg	
NORVIR – ritonavir tab 100 mg	
NORVIR – ritonavir oral soln 80 mg/ml	
PREZISTA – darunavir ethanolate tab 75 mg (base equiv)	
PREZISTA – darunavir ethanolate tab 150 mg (base equiv)	
PREZISTA – darunavir ethanolate tab 400 mg (base equiv)	
PREZISTA – darunavir ethanolate tab 600 mg (base equiv)	
PREZISTA – darunavir ethanolate tab 800 mg (base equiv)	
PREZISTA – darunavir ethanolate susp 100 mg/ml (base equiv)	
RESCRIPTOR – delavirdine mesylate tab 100 mg	
RESCRIPTOR – delavirdine mesylate tab 200 mg	

Drug Name	Prior Approval
REYATAZ – atazanavir sulfate cap 100 mg (base equiv)	
REYATAZ – atazanavir sulfate cap 150 mg (base equiv)	
REYATAZ – atazanavir sulfate cap 200 mg (base equiv)	
REYATAZ – atazanavir sulfate cap 300 mg (base equiv)	
SELZENTRY – maraviroc tab 150 mg	
SELZENTRY – maraviroc tab 300 mg	
stavudine cap 15 mg (Zerit)	
stavudine cap 20 mg (Zerit)	
stavudine cap 30 mg (Zerit)	
stavudine cap 40 mg (Zerit)	
stavudine for oral soln 1 mg/ml (Zerit)	
STRIBILD – elvitegrav-cobicis-emtricitab-tenofov tab 150-150-200-300 mg	
SUSTIVA – efavirenz cap 50 mg	
SUSTIVA – efavirenz cap 200 mg	
SUSTIVA – efavirenz tab 600 mg	
TIVICAY – dolutegravir sodium tab 50 mg (base equiv)	
TRUVADA – emtricitabine-tenofovir disoproxil fumarate tab 200-300 mg	
VIDEX – didanosine for soln 2 gm	
VIDEX – didanosine for soln 4 gm	
VIRACEPT – nelfinavir mesylate tab 250 mg	
VIRACEPT – nelfinavir mesylate tab 625 mg	
VIRAMUNE – nevirapine susp 50 mg/5ml	
VIRAMUNE XR – nevirapine tab sr 24hr 100 mg	
VIRAMUNE XR – nevirapine tab sr 24hr 400 mg	
VIREAD – tenofovir disoproxil fumarate tab 150 mg	
VIREAD – tenofovir disoproxil fumarate tab 200 mg	
VIREAD – tenofovir disoproxil fumarate tab 250 mg	
VIREAD – tenofovir disoproxil fumarate tab 300 mg	
VIREAD – tenofovir disoproxil fumarate oral powder 40 mg/gm	
ZIAGEN – abacavir sulfate soln 20 mg/ml (base equiv)	
zidovudine cap 100 mg (Retrovir)	
zidovudine syrup 10 mg/ml (Retrovir)	
zidovudine tab 300 mg	
Influenza	
RELENZA DISKHALER – zanamivir aero powder breath activated 5 mg/blister	
TAMIFLU – oseltamivir phosphate cap 30 mg (base equiv)	
TAMIFLU – oseltamivir phosphate cap 45 mg (base equiv)	
TAMIFLU – oseltamivir phosphate cap 75 mg (base equiv)	
TAMIFLU – oseltamivir phosphate for susp 6 mg/ml (base equiv)	
MALARIA	
atovaquone-proguanil hcl tab 250-100 mg (Malarone)	
ATOVAQUONE/PROGUANIL HCL – atovaquone-proguanil hcl tab 62.5-25 mg	
chloroquine phosphate tab 250 mg	
chloroquine phosphate tab 500 mg (Aralen)	
COARTEM – artemether-lumefantrine tab 20-120 mg	
DARAPRIM – pyrimethamine tab 25 mg	
hydroxychloroquine sulfate tab 200 mg (Plaquenil)	
MALARONE – atovaquone-proguanil hcl tab 62.5-25 mg	
mefloquine hcl tab 250 mg	
PRIMAQUINE PHOSPHATE – primaquine phosphate tab 26.3 mg	
WORM INFECTIONS	
ALBENZA – albendazole tab 200 mg	
BILTRICIDE – praziquantel tab 600 mg	
STROMECTOL – ivermectin tab 3 mg	
SULFONAMIDES	

Drug Name	Prior Approval
sulfamethoxazole-trimethoprim susp 200-40 mg/5ml	
sulfamethoxazole-trimethoprim tab 400-80 mg (Bactrim)	
sulfamethoxazole-trimethoprim tab 800-160 mg (Bactrim ds)	
OTHER ANTI-INFECTIVES	
ALINIA – nitazoxanide tab 500 mg	
ALINIA – nitazoxanide for susp 100 mg/5ml	
clindamycin hcl cap 150 mg (Cleocin)	
clindamycin hcl cap 300 mg (Cleocin)	
clindamycin hcl cap 75 mg (Cleocin)	
clindamycin palmitate hcl for soln 75 mg/5ml (base equiv) (Cleocin pediatric gr)	
DAPSONE – dapsone tab 25 mg	
DAPSONE – dapsone tab 100 mg	
erythromycin-sulfisoxazole for susp 200-600 mg/5ml	
metronidazole tab 250 mg (Flagyl)	
metronidazole tab 500 mg (Flagyl)	
NEBUPENT – pentamidine isethionate for nebulization soln 300 mg	
trimethoprim tab 100 mg	
vancomycin hcl cap 125 mg (Vancocin hcl)	
vancomycin hcl cap 250 mg (Vancocin hcl)	
XIFAXAN – rifaximin tab 550 mg	
ZYVOX – linezolid tab 600 mg	•
ZYVOX – linezolid for susp 100 mg/5ml	•
IMMUNIZING AGENTS	
BCG VACCINE – bcg vaccine inj	
CANCER DRUGS	
ACTIMMUNE – interferon gamma-1b inj 100 mcg/0.5ml (2000000 unit/0.5ml)	•
AFINITOR – everolimus tab 2.5 mg	•
AFINITOR – everolimus tab 5 mg	•
AFINITOR – everolimus tab 7.5 mg	•
AFINITOR – everolimus tab 10 mg	•

Drug Name	Prior Approval
AFINITOR DISPERZ – everolimus tab for oral susp 2 mg	•
AFINITOR DISPERZ – everolimus tab for oral susp 3 mg	•
AFINITOR DISPERZ – everolimus tab for oral susp 5 mg	•
ALKERAN – melphalan tab 2 mg	
anastrozole tab 1 mg (Arimidex)	
bicalutamide tab 50 mg (Casodex)	
BOSULIF – bosutinib tab 100 mg	•
BOSULIF – bosutinib tab 500 mg	•
capecitabine tab 150 mg (Xeloda)	•
capecitabine tab 500 mg (Xeloda)	•
CAPRELSA – vandetanib tab 100 mg	•
CAPRELSA – vandetanib tab 300 mg	•
CEENU – lomustine cap 10 mg	
CEENU – lomustine cap 40 mg	
CEENU – lomustine cap 100 mg	
COMETRIQ – cabozantinib s-malate cap 3 x 20 mg (60 mg dose) kit	•
COMETRIQ – cabozantinib s-mal cap 1 x 80 mg & 1 x 20 mg (100 dose) kit	•
COMETRIQ – cabozantinib s-mal cap 1 x 80 mg & 3 x 20 mg (140 dose) kit	•
CYCLOPHOSPHAMIDE – cyclophosphamide tab 25 mg	
CYCLOPHOSPHAMIDE – cyclophosphamide tab 50 mg	
EMCYT – estramustine phosphate sodium cap 140 mg	
ERIVEDGE – vismodegib cap 150 mg	•
ETOPOSIDE – etoposide cap 50 mg	
exemestane tab 25 mg (Aromasin)	
FARESTON – toremifene citrate tab 60 mg (base equivalent)	
flutamide cap 125 mg	
GILOTRIF – afatinib dimaleate tab 20 mg (base equivalent)	•

Drug Name	Prior Approval
GILOTRIF – afatinib dimaleate tab 30 mg (base equivalent)	•
GILOTRIF – afatinib dimaleate tab 40 mg (base equivalent)	•
GLEEVEC – imatinib mesylate tab 100 mg (base equivalent)	•
GLEEVEC – imatinib mesylate tab 400 mg (base equivalent)	•
HEXALEN – altretamine cap 50 mg	
HYCAMTIN – topotecan hcl cap 0.25 mg (base equiv)	•
HYCAMTIN – topotecan hcl cap 1 mg (base equiv)	•
hydroxyurea cap 500 mg (Hydrea)	
ICLUSIG – ponatinib hcl tab 15 mg (base equiv)	•
ICLUSIG – ponatinib hcl tab 45 mg (base equiv)	•
IMBRUVICA – ibrutinib cap 140 mg	•
INLYTA – axitinib tab 1 mg	•
INLYTA – axitinib tab 5 mg	•
JAKAFI – ruxolitinib phosphate tab 5 mg (base equivalent)	•
JAKAFI – ruxolitinib phosphate tab 10 mg (base equivalent)	•
JAKAFI – ruxolitinib phosphate tab 15 mg (base equivalent)	•
JAKAFI – ruxolitinib phosphate tab 20 mg (base equivalent)	•
JAKAFI – ruxolitinib phosphate tab 25 mg (base equivalent)	•
letrozole tab 2.5 mg (Femara)	
LEUCOVORIN CALCIUM – leucovorin calcium tab 10 mg	
LEUCOVORIN CALCIUM – leucovorin calcium tab 15 mg	
leucovorin calcium tab 25 mg	
leucovorin calcium tab 5 mg	
LEUKERAN – chlorambucil tab 2 mg	
LOMUSTINE – lomustine cap 10 mg	
LOMUSTINE – lomustine cap 40 mg	
LOMUSTINE – lomustine cap 100 mg	
LYSODREN – mitotane tab 500 mg	
MATULANE – procarbazine hcl cap 50 mg	
megestrol acetate susp 40 mg/ml (Megace oral)	
megestrol acetate tab 20 mg	
megestrol acetate tab 40 mg	
MEKINIST – trametinib dimethyl sulfoxide tab 0.5 mg (base equivalent)	•
MEKINIST – trametinib dimethyl sulfoxide tab 2 mg (base equivalent)	•
mercaptopurine tab 50 mg (Purinethol)	
MESNEX – mesna tab 400 mg	
methotrexate sodium tab 2.5 mg (base equiv)	
MYLERAN – busulfan tab 2 mg	
NEXAVAR – sorafenib tosylate tab 200 mg (base equivalent)	•
NILANDRON – nilutamide tab 150 mg	
POMALYST – pomalidomide cap 1 mg	
POMALYST – pomalidomide cap 2 mg	
POMALYST – pomalidomide cap 3 mg	
POMALYST – pomalidomide cap 4 mg	
SOLTAMOX – tamoxifen citrate oral soln 10 mg/5ml (base equivalent)	
SPRYCEL – dasatinib tab 20 mg	•
SPRYCEL – dasatinib tab 50 mg	•
SPRYCEL – dasatinib tab 70 mg	•
SPRYCEL – dasatinib tab 80 mg	•
SPRYCEL – dasatinib tab 100 mg	•
SPRYCEL – dasatinib tab 140 mg	•
STIVARGA – regorafenib tab 40 mg	•
SUTENT – sunitinib malate cap 12.5 mg (base equivalent)	•
SUTENT – sunitinib malate cap 25 mg (base equivalent)	•
SUTENT – sunitinib malate cap 50 mg (base equivalent)	•

Drug Name	Prior Approval
SYLATRON – peginterferon alfa-2b for inj kit 296 mcg	
SYLATRON – peginterferon alfa-2b for inj kit 444 mcg	
SYLATRON – peginterferon alfa-2b for inj kit 888 mcg	
SYLATRON – peginterferon alfa-2b for inj kit 4 x 296 mcg	
SYLATRON – peginterferon alfa-2b for inj kit 4 x 444 mcg	
SYLATRON – peginterferon alfa-2b for inj kit 4 x 888 mcg	
TABLOID – thioguanine tab 40 mg	
TAFINLAR – dabrafenib mesylate cap 50 mg (base equivalent)	•
TAFINLAR – dabrafenib mesylate cap 75 mg (base equivalent)	•
tamoxifen citrate tab 10 mg (base equivalent)	
tamoxifen citrate tab 20 mg (base equivalent)	
TARCEVA – erlotinib tab 25 mg	•
TARCEVA – erlotinib tab 100 mg	•
TARCEVA – erlotinib tab 150 mg	•
TARGRETIN – bexarotene cap 75 mg	
TASIGNA – nilotinib cap 150 mg	•
TASIGNA – nilotinib cap 200 mg	•
temozolomide cap 100 mg (Temodar)	
temozolomide cap 140 mg (Temodar)	
temozolomide cap 180 mg (Temodar)	
temozolomide cap 20 mg (Temodar)	
temozolomide cap 250 mg (Temodar)	
temozolomide cap 5 mg (Temodar)	
tretinoin cap 10 mg	
TYKERB – lapatinib ditosylate tab 250 mg (base equiv)	•
VANDETANIB – vandetanib tab 100 mg	•
VANDETANIB – vandetanib tab 300 mg	•
VOTRIENT – pazopanib hcl tab 200 mg (base equiv)	•
XALKORI – crizotinib cap 200 mg	•
XALKORI – crizotinib cap 250 mg	•
XTANDI – enzalutamide cap 40 mg	•
ZELBORAF – vemurafenib tab 240 mg (base equivalent)	•
ZOLINZA – vorinostat cap 100 mg	•
ZYKADIA – ceritinib cap 150 mg	
ZYTIGA – abiraterone acetate tab 250 mg	•
HORMONES, DIABETES AND RELATED DRUGS	
CORTICOSTEROIDS	
budesonide cap sr 24hr 3 mg (Entocort ec)	
CORTISONE ACETATE – cortisone acetate tab 25 mg	
DEXAMETHASONE – dexamethasone tab 1 mg	
DEXAMETHASONE – dexamethasone tab 2 mg	
DEXAMETHASONE – dexamethasone soln 0.5 mg/5ml	
dexamethasone elixir 0.5 mg/5ml	
DEXAMETHASONE INTENSOL – dexamethasone conc 1 mg/ml	
dexamethasone tab 0.5 mg	
dexamethasone tab 0.75 mg	
dexamethasone tab 1.5 mg	
dexamethasone tab 4 mg	
dexamethasone tab 6 mg	
fludrocortisone acetate tab 0.1 mg	
hydrocortisone tab 10 mg (Cortef)	
hydrocortisone tab 20 mg (Cortef)	
hydrocortisone tab 5 mg (Cortef)	
methylprednisolone tab 16 mg (Medrol)	
methylprednisolone tab 32 mg (Medrol)	
methylprednisolone tab 4 mg (Medrol)	
methylprednisolone tab 4 mg dose pack (Medrol dosepak)	
methylprednisolone tab 8 mg (Medrol)	

Drug Name	Prior Approval
prednisolone sod phosph oral soln 6.7 mg/5ml (5 mg/5ml base) (Pediapred)	
prednisolone sod phosphate oral soln 15 mg/5ml (base equiv)	
prednisolone syrup 15 mg/5ml (usp solution equivalent) (Prelone)	
PREDNISONE – prednisone tab 50 mg	
PREDNISONE – prednisone oral soln 5 mg/5ml	
PREDNISONE – prednisone tab 5 mg dose pack	
PREDNISONE – prednisone tab 10 mg dose pack	
prednisone tab 1 mg	
prednisone tab 10 mg	
prednisone tab 10 mg dose pack	
prednisone tab 2.5 mg	
prednisone tab 20 mg	
prednisone tab 5 mg	
prednisone tab 5 mg dose pack	
MALE HORMONES	
ANDRODERM – testosterone td patch 24hr 2 mg/24hr	
ANDRODERM – testosterone td patch 24hr 4 mg/24hr	
ANDROGEL – testosterone td gel 25 mg/2.5gm (1%)	
ANDROGEL – testosterone td gel 50 mg/5gm (1%)	
ANDROGEL – testosterone td gel 20.25 mg/1.25gm (1.62%)	
ANDROGEL – testosterone td gel 40.5 mg/2.5gm (1.62%)	
ANDROGEL PUMP – testosterone td gel 12.5 mg/act (1%)	
ANDROGEL PUMP – testosterone td gel 20.25 mg/act (1.62%)	
ANDROXY – fluoxymesterone tab 10 mg	
danazol cap 100 mg	
danazol cap 200 mg	
danazol cap 50 mg	

Drug Name	Prior Approval
DEPO-TESTOSTERONE – testosterone cypionate im in oil 100 mg/ml	
DEPO-TESTOSTERONE – testosterone cypionate im in oil 200 mg/ml	
testosterone cypionate im in oil 100 mg/ml (Depo-testosterone)	
testosterone cypionate im in oil 200 mg/ml (Depo-testosterone)	
testosterone enanthate im in oil 200 mg/ml	
ESTROGENS	
CLIMARA PRO – estradiol-levonorgestrel td patch weekly 0.045-0.015 mg/day	
DIVIGEL – estradiol td gel 0.25 mg/0.25gm (0.1%)	
DIVIGEL – estradiol td gel 0.5 mg/0.5gm (0.1%)	
DIVIGEL – estradiol td gel 1 mg/gm (0.1%)	
estradiol & norethindrone acetate tab 0.5-0.1 mg (Activella)	
estradiol & norethindrone acetate tab 1-0.5 mg (Activella)	
estradiol tab 0.5 mg (Estrace)	
estradiol tab 1 mg (Estrace)	
estradiol tab 2 mg (Estrace)	
estradiol td patch weekly 0.025 mg/24hr (Climara)	
estradiol td patch weekly 0.0375 mg/24hr (37.5 mcg/24hr) (Climara)	
estradiol td patch weekly 0.05 mg/24hr (Climara)	
estradiol td patch weekly 0.06 mg/24hr (Climara)	
estradiol td patch weekly 0.075 mg/24hr (Climara)	
estradiol td patch weekly 0.1 mg/24hr (Climara)	
ESTROPIPATE – estropipate tab 3 mg	
estropipate tab 0.75 mg	
estropipate tab 1.5 mg	
PREFEST – estradiol tab 1 mg(15)/estrad-norgestimate tab 1-0.09mg(15)	
PREMARIN – estrogens, conjugated tab 0.3 mg	
PREMARIN – estrogens, conjugated tab 0.45 mg	
PREMARIN – estrogens, conjugated tab 0.625 mg	

Drug Name	Prior Approval
PREMARIN – estrogens, conjugated tab 0.9 mg	
PREMARIN – estrogens, conjugated tab 1.25 mg	
PREMPHASE – conj est 0.625(14)/conj est-medroxypro ac tab 0.625-5mg(14)	
PREMPRO – conjugated estrogen-medroxyprogest acetate tab 0.3-1.5 mg	
PREMPRO – conjugated estrogen-medroxyprogest acetate tab 0.45-1.5 mg	
PREMPRO – conjugated estrogen-medroxyprogest acetate tab 0.625-2.5 mg	
PREMPRO – conjugated estrogen-medroxyprogest acetate tab 0.625-5 mg	
VIVELLE-DOT – estradiol td patch biweekly 0.025 mg/24hr	
VIVELLE-DOT – estradiol td patch biweekly 0.0375 mg/24hr	
VIVELLE-DOT – estradiol td patch biweekly 0.05 mg/24hr	
VIVELLE-DOT – estradiol td patch biweekly 0.075 mg/24hr	
VIVELLE-DOT – estradiol td patch biweekly 0.1 mg/24hr	
PROGESTINS	
medroxyprogesterone acetate tab 10 mg (Provera)	
medroxyprogesterone acetate tab 2.5 mg (Provera)	
medroxyprogesterone acetate tab 5 mg (Provera)	
norethindrone acetate tab 5 mg (Aygestin)	
progesterone micronized cap 100 mg (Prometrium)	
progesterone micronized cap 200 mg (Prometrium)	
BIRTH CONTROL Most generic oral contraceptives are formulary products; exceptions are noted. Selected brands that are not available generically are also on the formulary and appear as: TRADE NAME followed by the generic name, e.g., OGESTREL – norgestrel/ethinyl estradiol.	

Drug Name	Prior Approval
DEPO-PROVERA CONTRACEPTIV – medroxyprogesterone acetate im susp 150 mg/ml	
desogest-eth estrad & eth estrad tab 0.15-0.02/0.01 mg(21/5) (Mircette)	
desogest-ethin est tab 0.1-0.025/0.125-0.025/0.15-0.025mg-mg (Cyclessa)	
desogestrel & ethinyl estradiol tab 0.15 mg-30 mcg (Desogen)	
drospirenone-ethinyl estradiol tab 3-0.02 mg (Yaz)	
drospirenone-ethinyl estradiol tab 3-0.03 mg (Yasmin 28)	
ELLA – ulipristal acetate tab 30 mg	
ethynodiol diacetate & ethinyl estradiol tab 1 mg-35 mcg	
levonorg-eth est tab 0.1-0.02mg(84) & eth est tab 0.01mg(7) (Loseasonique)	
levonorgestrel & ethinyl estradiol (91-day) tab 0.15-0.03 mg	
levonorgestrel & ethinyl estradiol tab 0.1 mg-20 mcg	
levonorgestrel & ethinyl estradiol tab 0.15 mg-30 mcg	
levonorgestrel tab 0.75 mg (Plan b)	
levonorgestrel tab 1.5 mg (Plan b one-step)	
levonorgestrel-eth estra tab 0.05-30/0.075-40/0.125-30mg-mcg	
medroxyprogesterone acetate im susp 150 mg/ml (Depo-provera contrac)	
MIRENA – levonorgestrel releasing iud 20 mcg/24hr (52 mg total)	
NECON 1/50-28 – norethindrone & mestranol tab 1 mg-50 mcg	
NECON 10/11-28 – norethindrone-eth estradiol tab 0.5-35/1-35 mg-mcg (10/11)	
norelgestromin-ethinyl estradiol td ptwk 150-35 mcg/24hr (Ortho evra)	
norethindrone & ethinyl estradiol tab 0.4 mg-35 mcg (Ovcon-35)	

Drug Name	Prior Approval
norethindrone & ethinyl estradiol tab 0.5 mg-35 mcg (Brevicon-28)	
norethindrone & ethinyl estradiol tab 1 mg-35 mcg (Norinyl 1+35)	
norethindrone ac-ethinyl estrad-fe tab 1-20/1-30/1-35 mg-mcg (Estrostep fe)	
norethindrone ace & ethinyl estradiol tab 1 mg-20 mcg (Loestrin 1/20-21)	
norethindrone ace & ethinyl estradiol tab 1.5 mg-30 mcg (Loestrin 1.5/30-21)	
norethindrone ace & ethinyl estradiol-fe tab 1 mg-20 mcg (Loestrin fe 1/20)	
norethindrone ace & ethinyl estradiol-fe tab 1.5 mg-30 mcg (Loestrin fe 1.5/30)	
norethindrone tab 0.35 mg (Nor-qd)	
norethindrone-eth estradiol tab 0.5-35/0.75-35/1-35 mg-mcg (Ortho-novum 7/7/7)	
norethindrone-eth estradiol tab 0.5-35/1-35/0.5-35 mg-mcg (Tri-norinyl 28)	
norgestimate & ethinyl estradiol tab 0.25 mg-35 mcg (Ortho-cyclen)	
norgestimate-eth estrad tab 0.18-35/0.215-35/0.25-35 mg-mcg (Ortho tri-cyclen)	
norgestrel & ethinyl estradiol tab 0.3 mg-30 mcg	
NUVARING – etonogestrel-ethinyl estradiol va ring 0.120-0.015 mg/24hr	
OGESTREL – norgestrel & ethinyl estradiol tab 0.5 mg-50 mcg	
ORTHO EVRA – norelgestromin-ethinyl estradiol td ptwk 150-35 mcg/24hr	
ORTHO TRI-CYCLEN LO – norgestimate-eth estrad tab 0.18-25/0.215-25/0.25-25 mg-mcg	
SKYLA – levonorgestrel releasing iud 13.5 mg	
ZOVIA 1/50E – ethynodiol diacetate & ethinyl estradiol tab 1 mg-50 mcg	
INFERTILITY	
BRAVELLE – urofollitropin purified for inj 75 unit	
CETROTIDE – cetrorelix acetate for inj kit 0.25 mg	

Drug Name	Prior Approval
CETROTIDE – cetrorelix acetate for inj kit 3 mg	
chorionic gonadotropin for inj 10000 unit	
clomiphene citrate tab 50 mg (Clomid)	
FOLLISTIM AQ – follitropin beta inj 75 unit/0.5ml	
FOLLISTIM AQ – follitropin beta inj 150 unit/0.5ml	
FOLLISTIM AQ – follitropin beta inj 300 unit/0.36ml	
FOLLISTIM AQ – follitropin beta inj 600 unit/0.72ml	
FOLLISTIM AQ – follitropin beta inj 900 unit/1.08ml	
GANIRELIX ACETATE – ganirelix acetate inj 250 mcg/0.5ml	
GONAL-F – follitropin alfa for inj 450 unit	
GONAL-F – follitropin alfa for inj 1050 unit	
GONAL-F RFF – follitropin alfa for inj 75 unit	
GONAL-F RFF PEN – follitropin alfa inj 300 unit/0.5ml	
GONAL-F RFF PEN – follitropin alfa inj 450 unit/0.75ml	
GONAL-F RFF PEN – follitropin alfa inj 900 unit/1.5ml	
GONAL-F RFF REDIJECT – follitropin alfa inj 300 unit/0.5ml	
GONAL-F RFF REDIJECT – follitropin alfa inj 450 unit/0.75ml	
GONAL-F RFF REDIJECT – follitropin alfa inj 900 unit/1.5ml	
LUVERIS – lutropin alfa for subcutaneous inj 75 unit	
MENOPUR – menotropins for subcutaneous inj 75 unit	
OVIDREL – choriogonadotropin alfa inj 250 mcg/0.5ml	
REPRONEX – menotropins for inj 75 unit	
DIABETES	
acarbose tab 100 mg (Precose)	
acarbose tab 25 mg (Precose)	
acarbose tab 50 mg (Precose)	
BYDUREON – exenatide extended release for inj susp 2 mg	

Drug Name	Prior Approval
BYETTA – exenatide soln pen-injector 5 mcg/0.02ml	
BYETTA – exenatide soln pen-injector 10 mcg/0.04ml	
glimepiride tab 1 mg (Amaryl)	
glimepiride tab 2 mg (Amaryl)	
glimepiride tab 4 mg (Amaryl)	
glipizide tab sr 24hr 10 mg (Glucotrol xl)	
glipizide tab sr 24hr 2.5 mg (Glucotrol xl)	
glipizide tab sr 24hr 5 mg (Glucotrol xl)	
glipizide tab 10 mg (Glucotrol)	
glipizide tab 5 mg (Glucotrol)	
glipizide-metformin hcl tab 2.5-250 mg	
glipizide-metformin hcl tab 2.5-500 mg	
glipizide-metformin hcl tab 5-500 mg	
GLUCAGON EMERGENCY KIT – glucagon (rdna) for inj kit 1 mg	
GLYBURIDE – glyburide tab 1.25 mg	
GLYBURIDE – glyburide tab 2.5 mg	
GLYBURIDE – glyburide tab 5 mg	
glyburide micronized tab 1.5 mg (Glynase)	
glyburide micronized tab 3 mg (Glynase)	
glyburide micronized tab 6 mg (Glynase)	
glyburide tab 1.25 mg	
glyburide tab 2.5 mg	
glyburide tab 5 mg	
glyburide-metformin tab 1.25-250 mg (Glucovance)	
glyburide-metformin tab 2.5-500 mg (Glucovance)	
glyburide-metformin tab 5-500 mg (Glucovance)	
JANUMET – sitagliptin-metformin hcl tab 50-500 mg	
JANUMET – sitagliptin-metformin hcl tab 50-1000 mg	
JANUMET XR – sitagliptin-metformin hcl tab sr 24hr 50-500 mg	
JANUMET XR – sitagliptin-metformin hcl tab sr 24hr 50-1000 mg	
JANUMET XR – sitagliptin-metformin hcl tab sr 24hr 100-1000 mg	
JANUVIA – sitagliptin phosphate tab 25 mg (base equiv)	
JANUVIA – sitagliptin phosphate tab 50 mg (base equiv)	
JANUVIA – sitagliptin phosphate tab 100 mg (base equiv)	
JUVISYNC – sitagliptin-simvastatin tab 50-10 mg	
JUVISYNC – sitagliptin-simvastatin tab 50-20 mg	
JUVISYNC – sitagliptin-simvastatin tab 50-40 mg	
JUVISYNC – sitagliptin-simvastatin tab 100-10 mg	
JUVISYNC – sitagliptin-simvastatin tab 100-20 mg	
JUVISYNC – sitagliptin-simvastatin tab 100-40 mg	
KOMBIGLYZE XR – saxagliptin-metformin hcl tab sr 24hr 2.5-1000 mg	
KOMBIGLYZE XR – saxagliptin-metformin hcl tab sr 24hr 5-500 mg	
KOMBIGLYZE XR – saxagliptin-metformin hcl tab sr 24hr 5-1000 mg	
metformin hcl tab sr 24hr 500 mg (Glucophage xr)	
metformin hcl tab sr 24hr 750 mg (Glucophage xr)	
metformin hcl tab 1000 mg (Glucophage)	
metformin hcl tab 500 mg (Glucophage)	
metformin hcl tab 850 mg (Glucophage)	
nateglinide tab 120 mg (Starlix)	
nateglinide tab 60 mg (Starlix)	
ONGLYZA – saxagliptin hcl tab 2.5 mg (base equiv)	
ONGLYZA – saxagliptin hcl tab 5 mg (base equiv)	
pioglitazone hcl tab 15 mg (base equiv) (Actos)	
pioglitazone hcl tab 30 mg (base equiv) (Actos)	
pioglitazone hcl tab 45 mg (base equiv) (Actos)	
pioglitazone hcl-metformin hcl tab 15-500 mg (Actoplus met)	
pioglitazone hcl-metformin hcl tab 15-850 mg (Actoplus met)	

Drug Name	Prior Approval
SYMLINPEN 120 – pramlintide acetate pen-inj 2700 mcg/2.7ml (1000 mcg/ml)	
SYMLINPEN 60 – pramlintide acetate pen-inj 1500 mcg/1.5ml (1000 mcg/ml)	
VICTOZA – liraglutide soln pen-injector 18 mg/3ml (6 mg/ml)	
DIABETES - INSULINS	
Rapid-Acting Insulins	
HUMALOG – insulin lispro (human) soln cartridge 100 unit/ml	
HUMALOG – insulin lispro (human) inj 100 unit/ml	
HUMALOG KWIKPEN – insulin lispro (human) soln pen-injector 100 unit/ml	
NOVOLOG – insulin aspart inj 100 unit/ml	
NOVOLOG FLEXPEN – insulin aspart soln pen-injector 100 unit/ml	
NOVOLOG PENFILL – insulin aspart soln cartridge 100 unit/ml	
Short-Acting Insulins	
HUMULIN R – insulin regular (human) inj 100 unit/ml	
HUMULIN R U-500 (CONCENTR – insulin regular (human) inj 500 unit/ml	
NOVOLIN R – insulin regular (human) inj 100 unit/ml	
NOVOLIN R RELION – insulin regular (human) inj 100 unit/ml	
Intermediate-Acting Insulins	
HUMALOG MIX 50/50 – insulin lispro prot & lispro (human) inj 100 unit/ml (50-50)	
HUMALOG MIX 50/50 KWIKPEN – insulin lispro prot & lispro sus pen-inj 100 unit/ml (50-50)	
HUMALOG MIX 75/25 – insulin lispro prot & lispro (human) inj 100 unit/ml (75-25)	
HUMALOG MIX 75/25 KWIKPEN – insulin lispro prot & lispro sus pen-inj 100 unit/ml (75-25)	
HUMULIN N – insulin isophane (human) inj 100 unit/ml	
HUMULIN N KWIKPEN – insulin isophane (human) susp pen-injector 100 unit/ml	
HUMULIN N U-100 PEN – insulin isophane (human) susp pen-injector 100 unit/ml	
HUMULIN 70/30 – insulin isophane & regular (human) inj 100 unit/ml (70-30)	
HUMULIN 70/30 KWIKPEN – insulin isophane & regular susp pen-inj 100 unit/ml (70-30)	
HUMULIN 70/30 PEN – insulin isophane & regular susp pen-inj 100 unit/ml (70-30)	
NOVOLIN N – insulin isophane (human) inj 100 unit/ml	
NOVOLIN N RELION – insulin isophane (human) inj 100 unit/ml	
NOVOLIN 70/30 – insulin isophane & regular (human) inj 100 unit/ml (70-30)	
NOVOLIN 70/30 RELION – insulin isophane & regular (human) inj 100 unit/ml (70-30)	
NOVOLOG MIX 70/30 – insulin aspart prot & aspart (human) inj 100 unit/ml (70-30)	
NOVOLOG MIX 70/30 PREFILL – insulin aspart prot & aspart sus pen-inj 100 unit/ml (70-30)	
Basal Insulins	
LANTUS – insulin glargine inj 100 unit/ml	
LANTUS SOLOSTAR – insulin glargine soln pen-injector 100 unit/ml	
LEVEMIR – insulin detemir inj 100 unit/ml	
LEVEMIR FLEXPEN – insulin detemir soln pen-injector 100 unit/ml	
LEVEMIR FLEXTOUCH – insulin detemir soln pen-injector 100 unit/ml	
THYROID REGULATION	
levothyroxine sodium tab 100 mcg (Synthroid)	
levothyroxine sodium tab 112 mcg (Synthroid)	
levothyroxine sodium tab 125 mcg (Synthroid)	
levothyroxine sodium tab 137 mcg (Synthroid)	
levothyroxine sodium tab 150 mcg (Synthroid)	
levothyroxine sodium tab 175 mcg (Synthroid)	
levothyroxine sodium tab 200 mcg (Synthroid)	
levothyroxine sodium tab 25 mcg (Synthroid)	

Drug Name	Prior Approval
levothyroxine sodium tab 300 mcg (Synthroid)	
levothyroxine sodium tab 50 mcg (Synthroid)	
levothyroxine sodium tab 75 mcg (Synthroid)	
levothyroxine sodium tab 88 mcg (Synthroid)	
liothyronine sodium tab 25 mcg (Cytomel)	
liothyronine sodium tab 5 mcg (Cytomel)	
liothyronine sodium tab 50 mcg (Cytomel)	
methimazole tab 10 mg (Tapazole)	
methimazole tab 5 mg (Tapazole)	
propylthiouracil tab 50 mg	
GROWTH HORMONE	
INCRELEX – mecasermin inj 40 mg/4ml (10 mg/ml)	•
OMNITROPE – somatropin inj 5 mg/1.5ml	•
OMNITROPE – somatropin inj 10 mg/1.5ml	•
OMNITROPE – somatropin for inj 5.8 mg	•
OTHER HORMONES AND RELATED DRUGS	
ALENDRONATE SODIUM – alendronate sodium tab 40 mg	
alendronate sodium tab 10 mg	
alendronate sodium tab 35 mg	
alendronate sodium tab 5 mg	
alendronate sodium tab 70 mg (Fosamax)	
cabergoline tab 0.5 mg	
calcitriol cap 0.25 mcg (Rocaltrol)	
calcitriol cap 0.5 mcg (Rocaltrol)	
calcitriol oral soln 1 mcg/ml (Rocaltrol)	
desmopressin acetate inj 4 mcg/ml (Ddavp)	
desmopressin acetate nasal soln 0.01% (refrigerated) (Ddavp)	
desmopressin acetate nasal spray soln 0.01% (Ddavp)	
desmopressin acetate nasal spray soln 0.01% (refrigerated)	
desmopressin acetate tab 0.1 mg (Ddavp)	
desmopressin acetate tab 0.2 mg (Ddavp)	

Drug Name	Prior Approval
ETIDRONATE DISODIUM – etidronate disodium tab 200 mg	
ETIDRONATE DISODIUM – etidronate disodium tab 400 mg	
FORTEO – teriparatide (recombinant) inj 600 mcg/2.4ml	•
ibandronate sodium tab 150 mg (base equivalent) (Boniva)	
KUVAN – sapropterin dihydrochloride soluble tab 100 mg	•
levocarnitine oral soln 1 gm/10ml (10%) (Carnitor)	
levocarnitine tab 330 mg (Carnitor)	
LUPANETA PACK – LEUPROLIDE (1 MON) INJ 3.75 MG & NORETHINDRONE TAB 5 MG KIT	
LUPANETA PACK – LEUPROLIDE (3 MON) INJ 11.25 MG & NORETHINDRONE TAB 5 MG KIT	
methylergonovine maleate tab 0.2 mg	
octreotide acetate inj 100 mcg/ml (0.1 mg/ml) (Sandostatin)	
octreotide acetate inj 1000 mcg/ml (1 mg/ml) (Sandostatin)	
octreotide acetate inj 200 mcg/ml (0.2 mg/ml) (Sandostatin)	
octreotide acetate inj 50 mcg/ml (0.05 mg/ml) (Sandostatin)	
octreotide acetate inj 500 mcg/ml (0.5 mg/ml) (Sandostatin)	
paricalcitol cap 1 mcg (Zemplar)	
paricalcitol cap 2 mcg (Zemplar)	
paricalcitol cap 4 mcg (Zemplar)	
raloxifene hcl tab 60 mg (Evista)	
SANDOSTATIN – octreotide acetate inj 50 mcg/ml (0.05 mg/ml)	
SANDOSTATIN – octreotide acetate inj 100 mcg/ml (0.1 mg/ml)	
SANDOSTATIN – octreotide acetate inj 200 mcg/ml (0.2 mg/ml)	
SANDOSTATIN – octreotide acetate inj 500 mcg/ml (0.5 mg/ml)	

Drug Name	Prior Approval
SANDOSTATIN – octreotide acetate inj 1000 mcg/ml (1 mg/ml)	
SANDOSTATIN LAR DEPOT – octreotide acetate for im inj kit 10 mg	
SANDOSTATIN LAR DEPOT – octreotide acetate for im inj kit 20 mg	
SANDOSTATIN LAR DEPOT – octreotide acetate for im inj kit 30 mg	
SENSIPAR – cinacalcet hcl tab 30 mg (base equiv)	•
SENSIPAR – cinacalcet hcl tab 60 mg (base equiv)	•
SENSIPAR – cinacalcet hcl tab 90 mg (base equiv)	•
STIMATE – desmopressin acetate nasal soln 1.5 mg/ml	
SYNAREL – NAFARELIN ACETATE NASAL SOLN 2 MG/ML	
HEART AND CIRCULATORY DRUGS	
ANGIOTENSIN CONVERTING ENZYME (ACE) INHIBITORS AND COMBINATIONS	
benazepril & hydrochlorothiazide tab 10-12.5 mg (Lotensin hct)	
benazepril & hydrochlorothiazide tab 20-12.5 mg (Lotensin hct)	
benazepril & hydrochlorothiazide tab 20-25 mg (Lotensin hct)	
benazepril & hydrochlorothiazide tab 5-6.25 mg	
benazepril hcl tab 10 mg (Lotensin)	
benazepril hcl tab 20 mg (Lotensin)	
benazepril hcl tab 40 mg (Lotensin)	
benazepril hcl tab 5 mg	
captopril tab 100 mg	
captopril tab 12.5 mg	
captopril tab 25 mg	
captopril tab 50 mg	
CAPTOPRIL/HYDROCHLOROTHIA – captopril & hydrochlorothiazide tab 25-15 mg	
CAPTOPRIL/HYDROCHLOROTHIA – captopril & hydrochlorothiazide tab 25-25 mg	
CAPTOPRIL/HYDROCHLOROTHIA – captopril & hydrochlorothiazide tab 50-15 mg	
CAPTOPRIL/HYDROCHLOROTHIA – captopril & hydrochlorothiazide tab 50-25 mg	
enalapril maleate & hydrochlorothiazide tab 10-25 mg (Vaseretic)	
enalapril maleate & hydrochlorothiazide tab 5-12.5 mg	
enalapril maleate tab 10 mg (Vasotec)	
enalapril maleate tab 2.5 mg (Vasotec)	
enalapril maleate tab 20 mg (Vasotec)	
enalapril maleate tab 5 mg (Vasotec)	
fosinopril sodium & hydrochlorothiazide tab 10-12.5 mg	
fosinopril sodium & hydrochlorothiazide tab 20-12.5 mg	
fosinopril sodium tab 10 mg	
fosinopril sodium tab 20 mg	
fosinopril sodium tab 40 mg	
lisinopril & hydrochlorothiazide tab 10-12.5 mg (Zestoretic)	
lisinopril & hydrochlorothiazide tab 20-12.5 mg (Zestoretic)	
lisinopril & hydrochlorothiazide tab 20-25 mg (Zestoretic)	
lisinopril tab 10 mg (Prinivil)	
lisinopril tab 2.5 mg (Zestril)	
lisinopril tab 20 mg (Prinivil)	
lisinopril tab 30 mg (Zestril)	
lisinopril tab 40 mg (Zestril)	
lisinopril tab 5 mg (Prinivil)	
moexipril hcl tab 15 mg (Univasc)	
moexipril hcl tab 7.5 mg (Univasc)	
moexipril-hydrochlorothiazide tab 15-12.5 mg (Uniretic)	
moexipril-hydrochlorothiazide tab 15-25 mg	
moexipril-hydrochlorothiazide tab 7.5-12.5 mg	

Drug Name	Prior Approval
perindopril erbumine tab 2 mg	
perindopril erbumine tab 4 mg (Aceon)	
perindopril erbumine tab 8 mg (Aceon)	
quinapril hcl tab 10 mg (Accupril)	
quinapril hcl tab 20 mg (Accupril)	
quinapril hcl tab 40 mg (Accupril)	
quinapril hcl tab 5 mg (Accupril)	
quinapril-hydrochlorothiazide tab 10-12.5 mg (Accuretic)	
quinapril-hydrochlorothiazide tab 20-12.5 mg (Accuretic)	
quinapril-hydrochlorothiazide tab 20-25 mg (Accuretic)	
ramipril cap 1.25 mg (Altace)	
ramipril cap 10 mg (Altace)	
ramipril cap 2.5 mg (Altace)	
ramipril cap 5 mg (Altace)	
trandolapril tab 1 mg (Mavik)	
trandolapril tab 2 mg (Mavik)	
trandolapril tab 4 mg (Mavik)	
ANGIOTENSIN II RECEPTOR ANTAGONISTS (ARBS) AND COMBINATIONS	
candesartan cilexetil tab 16 mg (Atacand)	
candesartan cilexetil tab 32 mg (Atacand)	
candesartan cilexetil tab 4 mg (Atacand)	
candesartan cilexetil tab 8 mg (Atacand)	
candesartan cilexetil-hydrochlorothiazide tab 16-12.5 mg (Atacand hct)	
candesartan cilexetil-hydrochlorothiazide tab 32-12.5 mg (Atacand hct)	
candesartan cilexetil-hydrochlorothiazide tab 32-25 mg (Atacand hct)	
DIOVAN – valsartan tab 40 mg	
DIOVAN – valsartan tab 80 mg	
DIOVAN – valsartan tab 160 mg	
DIOVAN – valsartan tab 320 mg	
EXFORGE HCT – amlodipine-valsartan-hydrochlorothiazide tab 5-160-12.5 mg	
EXFORGE HCT – amlodipine-valsartan-hydrochlorothiazide tab 5-160-25 mg	
EXFORGE HCT – amlodipine-valsartan-hydrochlorothiazide tab 10-160-12.5 mg	
EXFORGE HCT – amlodipine-valsartan-hydrochlorothiazide tab 10-160-25 mg	
EXFORGE HCT – amlodipine-valsartan-hydrochlorothiazide tab 10-320-25 mg	
irbesartan tab 150 mg (Avapro)	
irbesartan tab 300 mg (Avapro)	
irbesartan tab 75 mg (Avapro)	
irbesartan-hydrochlorothiazide tab 150-12.5 mg (Avalide)	
irbesartan-hydrochlorothiazide tab 300-12.5 mg (Avalide)	
losartan potassium & hydrochlorothiazide tab 100-12.5 mg (Hyzaar)	
losartan potassium & hydrochlorothiazide tab 100-25 mg (Hyzaar)	
losartan potassium & hydrochlorothiazide tab 50-12.5 mg (Hyzaar)	
losartan potassium tab 100 mg (Cozaar)	
losartan potassium tab 25 mg (Cozaar)	
losartan potassium tab 50 mg (Cozaar)	
valsartan-hydrochlorothiazide tab 160-12.5 mg (Diovan hct)	
valsartan-hydrochlorothiazide tab 160-25 mg (Diovan hct)	
valsartan-hydrochlorothiazide tab 320-12.5 mg (Diovan hct)	
valsartan-hydrochlorothiazide tab 320-25 mg (Diovan hct)	
valsartan-hydrochlorothiazide tab 80-12.5 mg (Diovan hct)	
BETA BLOCKERS AND COMBINATIONS	
acebutolol hcl cap 200 mg (Sectral)	
acebutolol hcl cap 400 mg (Sectral)	

Drug Name	Prior Approval
atenolol & chlorthalidone tab 100-25 mg (Tenoretic 100)	
atenolol & chlorthalidone tab 50-25 mg (Tenoretic 50)	
atenolol tab 100 mg (Tenormin)	
atenolol tab 25 mg (Tenormin)	
atenolol tab 50 mg (Tenormin)	
bisoprolol & hydrochlorothiazide tab 10-6.25 mg (Ziac)	
bisoprolol & hydrochlorothiazide tab 2.5-6.25 mg (Ziac)	
bisoprolol & hydrochlorothiazide tab 5-6.25 mg (Ziac)	
bisoprolol fumarate tab 10 mg (Zebeta)	
bisoprolol fumarate tab 5 mg (Zebeta)	
carvedilol tab 12.5 mg (Coreg)	
carvedilol tab 25 mg (Coreg)	
carvedilol tab 3.125 mg (Coreg)	
carvedilol tab 6.25 mg (Coreg)	
DUTOPROL – metoprolol & hydrochlorothiazide tab sr 24hr 25-12.5 mg	
DUTOPROL – metoprolol & hydrochlorothiazide tab sr 24hr 50-12.5 mg	
DUTOPROL – metoprolol & hydrochlorothiazide tab sr 24hr 100-12.5 mg	
labetalol hcl tab 100 mg (Trandate)	
labetalol hcl tab 200 mg (Trandate)	
labetalol hcl tab 300 mg (Trandate)	
metoprolol & hydrochlorothiazide tab 100-25 mg (Lopressor hct)	
metoprolol & hydrochlorothiazide tab 100-50 mg	
metoprolol & hydrochlorothiazide tab 50-25 mg (Lopressor hct)	
metoprolol succinate tab sr 24hr 100 mg (Toprol xl)	
metoprolol succinate tab sr 24hr 200 mg (Toprol xl)	
metoprolol succinate tab sr 24hr 25 mg (Toprol xl)	
metoprolol succinate tab sr 24hr 50 mg (Toprol xl)	
metoprolol tartrate tab 100 mg (Lopressor)	
metoprolol tartrate tab 25 mg	
metoprolol tartrate tab 50 mg (Lopressor)	
nadolol & bendroflumethiazide tab 40-5 mg (Corzide)	
nadolol & bendroflumethiazide tab 80-5 mg (Corzide)	
nadolol tab 20 mg (Corgard)	
nadolol tab 40 mg (Corgard)	
nadolol tab 80 mg (Corgard)	
pindolol tab 10 mg	
pindolol tab 5 mg	
PROPRANOLOL HCL – propranolol hcl oral soln 20 mg/5ml	
PROPRANOLOL HCL – propranolol hcl oral soln 40 mg/5ml	
propranolol hcl cap sr 24hr 120 mg (Inderal la)	
propranolol hcl cap sr 24hr 160 mg (Inderal la)	
propranolol hcl cap sr 24hr 60 mg (Inderal la)	
propranolol hcl cap sr 24hr 80 mg (Inderal la)	
propranolol hcl tab 10 mg	
propranolol hcl tab 20 mg	
propranolol hcl tab 40 mg	
propranolol hcl tab 60 mg	
propranolol hcl tab 80 mg	
PROPRANOLOL/HYDROCHLOROTH – propranolol & hydrochlorothiazide tab 40-25 mg	
PROPRANOLOL/HYDROCHLOROTH – propranolol & hydrochlorothiazide tab 80-25 mg	
TIMOLOL MALEATE – timolol maleate tab 5 mg	
TIMOLOL MALEATE – timolol maleate tab 10 mg	
TIMOLOL MALEATE – timolol maleate tab 20 mg	
CALCIUM CHANNEL BLOCKERS AND COMBINATIONS	
amlodipine besylate tab 10 mg (Norvasc)	
amlodipine besylate tab 2.5 mg (Norvasc)	

Drug Name	Prior Approval
amlodipine besylate tab 5 mg (Norvasc)	
amlodipine besylate-atorvastatin calcium tab 10-10 mg (Caduet)	
amlodipine besylate-atorvastatin calcium tab 10-20 mg (Caduet)	
amlodipine besylate-atorvastatin calcium tab 10-40 mg (Caduet)	
amlodipine besylate-atorvastatin calcium tab 10-80 mg (Caduet)	
amlodipine besylate-atorvastatin calcium tab 2.5-10 mg (Caduet)	
amlodipine besylate-atorvastatin calcium tab 2.5-20 mg (Caduet)	
amlodipine besylate-atorvastatin calcium tab 2.5-40 mg (Caduet)	
amlodipine besylate-atorvastatin calcium tab 5-10 mg (Caduet)	
amlodipine besylate-atorvastatin calcium tab 5-20 mg (Caduet)	
amlodipine besylate-atorvastatin calcium tab 5-40 mg (Caduet)	
amlodipine besylate-atorvastatin calcium tab 5-80 mg (Caduet)	
amlodipine besylate-benazepril hcl cap 10-20 mg (Lotrel)	
amlodipine besylate-benazepril hcl cap 10-40 mg (Lotrel)	
amlodipine besylate-benazepril hcl cap 2.5-10 mg (Lotrel)	
amlodipine besylate-benazepril hcl cap 5-10 mg (Lotrel)	
amlodipine besylate-benazepril hcl cap 5-20 mg (Lotrel)	
amlodipine besylate-benazepril hcl cap 5-40 mg (Lotrel)	
diltiazem hcl cap sr 24hr 120 mg	
diltiazem hcl cap sr 24hr 180 mg	
diltiazem hcl cap sr 24hr 240 mg	
diltiazem hcl coated beads cap sr 24hr 120 mg (Cardizem cd)	
diltiazem hcl coated beads cap sr 24hr 180 mg (Cardizem cd)	
diltiazem hcl coated beads cap sr 24hr 240 mg (Cardizem cd)	
diltiazem hcl coated beads cap sr 24hr 300 mg (Cardizem cd)	
diltiazem hcl coated beads cap sr 24hr 360 mg (Cardizem cd)	
diltiazem hcl extended release beads cap sr 24hr 120 mg (Tiazac)	
diltiazem hcl extended release beads cap sr 24hr 180 mg (Tiazac)	
diltiazem hcl extended release beads cap sr 24hr 240 mg (Tiazac)	
diltiazem hcl extended release beads cap sr 24hr 300 mg (Tiazac)	
diltiazem hcl extended release beads cap sr 24hr 360 mg (Tiazac)	
diltiazem hcl extended release beads cap sr 24hr 420 mg (Tiazac)	
diltiazem hcl tab 120 mg (Cardizem)	
diltiazem hcl tab 30 mg (Cardizem)	
diltiazem hcl tab 60 mg (Cardizem)	
diltiazem hcl tab 90 mg	
EXFORGE – amlodipine besylate-valsartan tab 5-160 mg	
EXFORGE – amlodipine besylate-valsartan tab 5-320 mg	
EXFORGE – amlodipine besylate-valsartan tab 10-160 mg	
EXFORGE – amlodipine besylate-valsartan tab 10-320 mg	
felodipine tab sr 24hr 10 mg	
felodipine tab sr 24hr 2.5 mg	
felodipine tab sr 24hr 5 mg	
nifedipine tab sr 24hr osmotic 30 mg (Procardia xl)	
nifedipine tab sr 24hr osmotic 60 mg (Procardia xl)	

Drug Name	Prior Approval
nifedipine tab sr 24hr osmotic 90 mg (Procardia xl)	
nifedipine tab sr 24hr 30 mg (Adalat cc)	
nifedipine tab sr 24hr 60 mg (Adalat cc)	
nifedipine tab sr 24hr 90 mg (Adalat cc)	
VERAPAMIL HCL – verapamil hcl tab 40 mg	
verapamil hcl cap sr 24hr 100 mg (Verelan pm)	
verapamil hcl cap sr 24hr 120 mg (Verelan)	
verapamil hcl cap sr 24hr 180 mg (Verelan)	
verapamil hcl cap sr 24hr 200 mg (Verelan pm)	
verapamil hcl cap sr 24hr 240 mg (Verelan)	
verapamil hcl cap sr 24hr 300 mg (Verelan pm)	
verapamil hcl cap sr 24hr 360 mg (Verelan)	
verapamil hcl tab cr 120 mg (Calan sr)	
verapamil hcl tab cr 180 mg (Calan sr)	
verapamil hcl tab cr 240 mg (Calan sr)	
verapamil hcl tab 120 mg (Calan)	
verapamil hcl tab 80 mg (Calan)	
CHEST PAIN (ANGINA)	
ISOSORBIDE DINITRATE – isosorbide dinitrate tab 30 mg	
isosorbide dinitrate tab 10 mg	
isosorbide dinitrate tab 20 mg	
isosorbide dinitrate tab 30 mg	
isosorbide dinitrate tab 5 mg (Isordil titradose)	
isosorbide mononitrate tab sr 24hr 120 mg (Imdur)	
isosorbide mononitrate tab sr 24hr 30 mg (Imdur)	
isosorbide mononitrate tab sr 24hr 60 mg (Imdur)	
isosorbide mononitrate tab 10 mg	
isosorbide mononitrate tab 20 mg	
NITRO-BID – nitroglycerin oint 2%	
nitroglycerin cap cr 2.5 mg	
nitroglycerin cap cr 6.5 mg	
nitroglycerin cap cr 9 mg	
nitroglycerin td patch 24hr 0.1 mg/hr (Nitro-dur)	
nitroglycerin td patch 24hr 0.2 mg/hr (Nitro-dur)	
nitroglycerin td patch 24hr 0.4 mg/hr (Nitro-dur)	
nitroglycerin td patch 24hr 0.6 mg/hr (Nitro-dur)	
NITROSTAT – nitroglycerin sl tab 0.3 mg	
NITROSTAT – nitroglycerin sl tab 0.4 mg	
NITROSTAT – nitroglycerin sl tab 0.6 mg	
CHOLESTEROL LOWERING	
atorvastatin calcium tab 10 mg (base equivalent) (Lipitor)	
atorvastatin calcium tab 20 mg (base equivalent) (Lipitor)	
atorvastatin calcium tab 40 mg (base equivalent) (Lipitor)	
atorvastatin calcium tab 80 mg (base equivalent) (Lipitor)	
cholestyramine light powder packets 4 gm	
cholestyramine light powder 4 gm/dose (Questran light)	
cholestyramine powder packets 4 gm (Questran)	
cholestyramine powder 4 gm/dose (Questran)	
choline fenofibrate cap dr 135 mg (fenofibric acid equiv) (Trilipix)	
choline fenofibrate cap dr 45 mg (fenofibric acid equiv) (Trilipix)	
colestipol hcl granule packets 5 gm (Colestid flavored)	
colestipol hcl granules 5 gm (Colestid flavored)	
colestipol hcl tab 1 gm (Colestid)	
CRESTOR – rosuvastatin calcium tab 5 mg	
CRESTOR – rosuvastatin calcium tab 10 mg	
CRESTOR – rosuvastatin calcium tab 20 mg	
CRESTOR – rosuvastatin calcium tab 40 mg	
fenofibrate micronized cap 130 mg (Antara)	
fenofibrate micronized cap 134 mg (Lofibra)	
fenofibrate micronized cap 200 mg (Lofibra)	
fenofibrate micronized cap 43 mg (Antara)	
fenofibrate micronized cap 67 mg (Lofibra)	

Drug Name	Prior Approval
fenofibrate tab 145 mg (Tricor)	
fenofibrate tab 160 mg (Lofibra)	
fenofibrate tab 48 mg (Tricor)	
fenofibrate tab 54 mg (Lofibra)	
gemfibrozil tab 600 mg (Lopid)	
JUXTAPID – lomitapide mesylate cap 5 mg (base equiv)	•
JUXTAPID – lomitapide mesylate cap 10 mg (base equiv)	•
JUXTAPID – lomitapide mesylate cap 20 mg (base equiv)	•
lovastatin tab 10 mg	
lovastatin tab 20 mg (Mevacor)	
lovastatin tab 40 mg (Mevacor)	
LOVAZA – omega-3-acid ethyl esters cap 1 gm	
niacin tab cr 1000 mg (antihyperlipidemic) (Niaspan)	
niacin tab cr 500 mg (antihyperlipidemic) (Niaspan)	
niacin tab cr 750 mg (antihyperlipidemic) (Niaspan)	
omega-3-acid ethyl esters cap 1 gm (Lovaza)	
pravastatin sodium tab 10 mg	
pravastatin sodium tab 20 mg (Pravachol)	
pravastatin sodium tab 40 mg (Pravachol)	
pravastatin sodium tab 80 mg (Pravachol)	
simvastatin tab 10 mg (Zocor)	
simvastatin tab 20 mg (Zocor)	
simvastatin tab 40 mg (Zocor)	
simvastatin tab 5 mg (Zocor)	
simvastatin tab 80 mg (Zocor)	
WELCHOL – colesevelam hcl tab 625 mg	
WELCHOL – colesevelam hcl packet for susp 3.75 gm	
FLUID REDUCTION	
ACETAZOLAMIDE – acetazolamide tab 125 mg	
acetazolamide cap sr 12hr 500 mg (Diamox)	
acetazolamide tab 250 mg	
amiloride & hydrochlorothiazide tab 5-50 mg	
amiloride hcl tab 5 mg	
bumetanide tab 0.5 mg	
bumetanide tab 1 mg	
bumetanide tab 2 mg	
CHLOROTHIAZIDE – chlorothiazide tab 250 mg	
chlorothiazide tab 250 mg	
chlorothiazide tab 500 mg	
CHLORTHALIDONE – chlorthalidone tab 25 mg	
CHLORTHALIDONE – chlorthalidone tab 50 mg	
furosemide oral soln 10 mg/ml	
furosemide tab 20 mg (Lasix)	
furosemide tab 40 mg (Lasix)	
furosemide tab 80 mg (Lasix)	
hydrochlorothiazide cap 12.5 mg (Microzide)	
hydrochlorothiazide tab 25 mg	
hydrochlorothiazide tab 50 mg	
indapamide tab 1.25 mg	
indapamide tab 2.5 mg	
metolazone tab 10 mg	
metolazone tab 2.5 mg (Zaroxolyn)	
metolazone tab 5 mg (Zaroxolyn)	
spironolactone & hydrochlorothiazide tab 25-25 mg (Aldactazide)	
spironolactone tab 100 mg (Aldactone)	
spironolactone tab 25 mg (Aldactone)	
spironolactone tab 50 mg (Aldactone)	
torsemide tab 10 mg (Demadex)	
torsemide tab 100 mg (Demadex)	
torsemide tab 20 mg (Demadex)	
torsemide tab 5 mg (Demadex)	
triamterene & hydrochlorothiazide cap 37.5-25 mg (Dyazide)	
triamterene & hydrochlorothiazide tab 37.5-25 mg (Maxzide-25)	

Drug Name	Prior Approval
triamterene & hydrochlorothiazide tab 75-50 mg (Maxzide)	
TRIAMTERENE/HYDROCHLOROTH – triamterene & hydrochlorothiazide cap 50-25 mg	
HEART RHYTHM	
amiodarone hcl tab 100 mg	
amiodarone hcl tab 200 mg (Cordarone)	
amiodarone hcl tab 400 mg	
disopyramide phosphate cap 100 mg (Norpace)	
disopyramide phosphate cap 150 mg (Norpace)	
flecainide acetate tab 100 mg	
flecainide acetate tab 150 mg	
flecainide acetate tab 50 mg	
mexiletine hcl cap 150 mg	
mexiletine hcl cap 200 mg	
mexiletine hcl cap 250 mg	
MULTAQ – dronedarone hcl tab 400 mg (base equivalent)	
NORPACE CR – disopyramide phosphate cap sr 12hr 100 mg	
propafenone hcl cap sr 12hr 225 mg (Rythmol sr)	
propafenone hcl cap sr 12hr 325 mg (Rythmol sr)	
propafenone hcl cap sr 12hr 425 mg (Rythmol sr)	
propafenone hcl tab 150 mg (Rythmol)	
propafenone hcl tab 225 mg (Rythmol)	
propafenone hcl tab 300 mg	
quinidine gluconate tab cr 324 mg	
QUINIDINE SULFATE – quinidine sulfate tab 200 mg	
QUINIDINE SULFATE ER – quinidine sulfate tab cr 300 mg	
quinidine sulfate tab 200 mg	
quinidine sulfate tab 300 mg	
sotalol hcl (afib/afl) tab 120 mg (Betapace af)	
sotalol hcl (afib/afl) tab 160 mg (Betapace af)	
sotalol hcl (afib/afl) tab 80 mg (Betapace af)	

Drug Name	Prior Approval
sotalol hcl tab 120 mg (Betapace)	
sotalol hcl tab 160 mg (Betapace)	
sotalol hcl tab 240 mg	
sotalol hcl tab 80 mg (Betapace)	
OTHER HEART RELATED DRUGS	
ADCIRCA – tadalafil tab 20 mg (pah)	•
clonidine hcl tab 0.1 mg (Catapres)	
clonidine hcl tab 0.2 mg (Catapres)	
clonidine hcl tab 0.3 mg (Catapres)	
clonidine hcl td patch weekly 0.1 mg/24hr (Catapres-tts-1)	
clonidine hcl td patch weekly 0.2 mg/24hr (Catapres-tts-2)	
clonidine hcl td patch weekly 0.3 mg/24hr (Catapres-tts-3)	
DIBENZYLINE – phenoxybenzamine hcl cap 10 mg	
DIGOXIN – digoxin oral soln 0.05 mg/ml	
digoxin tab 125 mcg (0.125 mg) (Lanoxin)	
digoxin tab 250 mcg (0.25 mg) (Lanoxin)	
doxazosin mesylate tab 1 mg (Cardura)	
doxazosin mesylate tab 2 mg (Cardura)	
doxazosin mesylate tab 4 mg (Cardura)	
doxazosin mesylate tab 8 mg (Cardura)	
eplerenone tab 25 mg (Inspra)	
eplerenone tab 50 mg (Inspra)	
guanfacine hcl tab 1 mg (Tenex)	
guanfacine hcl tab 2 mg (Tenex)	
hydralazine hcl tab 10 mg	
hydralazine hcl tab 100 mg	
hydralazine hcl tab 25 mg	
hydralazine hcl tab 50 mg	
LETAIRIS – ambrisentan tab 5 mg	•
LETAIRIS – ambrisentan tab 10 mg	•
methyldopa tab 250 mg	
methyldopa tab 500 mg	
midodrine hcl tab 10 mg	

Drug Name	Prior Approval
midodrine hcl tab 2.5 mg	
midodrine hcl tab 5 mg	
minoxidil tab 10 mg	
minoxidil tab 2.5 mg	
OPSUMIT – macitentan tab 10 mg	•
prazosin hcl cap 1 mg (Minipress)	
prazosin hcl cap 2 mg (Minipress)	
prazosin hcl cap 5 mg (Minipress)	
REMODULIN – treprostinil sodium inj 1 mg/ml (base equiv)	•
REMODULIN – treprostinil sodium inj 2.5 mg/ml (base equiv)	•
REMODULIN – treprostinil sodium inj 5 mg/ml (base equiv)	•
REMODULIN – treprostinil sodium inj 10 mg/ml (base equiv)	•
sildenafil citrate tab 20 mg (Revatio)	•
terazosin hcl cap 1 mg	
terazosin hcl cap 10 mg	
terazosin hcl cap 2 mg	
terazosin hcl cap 5 mg	
TRACLEER – bosentan tab 62.5 mg	•
TRACLEER – bosentan tab 125 mg	•
VENTAVIS – iloprost inhalation solution 10 mcg/ml	•
VENTAVIS – iloprost inhalation solution 20 mcg/ml	•
BEE STING KITS	
EPIPEN 2-PAK – epinephrine solution auto-injector 0.3 mg/0.3ml (1:1000)	
EPIPEN-JR 2-PAK – epinephrine solution auto-injector 0.15 mg/0.3ml (1:2000)	
RESPIRATORY AGENTS	
ANTIHISTAMINES	
cyproheptadine hcl syrup 2 mg/5ml	
cyproheptadine hcl tab 4 mg	
promethazine hcl suppos 12.5 mg	
promethazine hcl suppos 25 mg	

Drug Name	Prior Approval
promethazine hcl syrup 6.25 mg/5ml	
promethazine hcl tab 12.5 mg	
promethazine hcl tab 25 mg	
promethazine hcl tab 50 mg	
PROMETHEGAN – promethazine hcl suppos 50 mg	
NASAL PRODUCTS	
ASTEPRO – azelastine hcl nasal spray 0.15% (205.5 mcg/spray)	
azelastine hcl nasal spray 0.15% (205.5 mcg/spray) (Astepro)	
azelastine hcl nasal spray 137 mcg/spray (1 mg/ml)	
BACTROBAN NASAL – mupirocin calcium nasal oint 2%	
FLUNISOLIDE – flunisolide nasal soln 29 mcg/act (0.025%)	
flunisolide nasal soln 0.025% (Flunisolide)	
fluticasone propionate nasal susp 50 mcg/act (Flonase)	
ipratropium bromide nasal soln 0.03% (21 mcg/spray) (Atrovent)	
ipratropium bromide nasal soln 0.06% (42 mcg/spray) (Atrovent)	
triamcinolone acetonide nasal inhal 55 mcg/act (Nasacort aq)	
COUGH/COLD/ALLERGY	
acetylcysteine inhal soln 10%	
acetylcysteine inhal soln 20%	
promethazine w/ codeine syrup 6.25-10 mg/5ml	
SSKI – potassium iodide soln 1 gm/ml	
ASTHMA/COPD	
ADVAIR DISKUS – fluticasone-salmeterol aer powder ba 100-50 mcg/dose	
ADVAIR DISKUS – fluticasone-salmeterol aer powder ba 250-50 mcg/dose	
ADVAIR DISKUS – fluticasone-salmeterol aer powder ba 500-50 mcg/dose	

Drug Name	Prior Approval
ADVAIR HFA – fluticasone-salmeterol inhal aerosol 45-21 mcg/act	
ADVAIR HFA – fluticasone-salmeterol inhal aerosol 115-21 mcg/act	
ADVAIR HFA – fluticasone-salmeterol inhal aerosol 230-21 mcg/act	
albuterol sulfate soln nebu 0.083% (2.5 mg/3ml)	
albuterol sulfate soln nebu 0.5% (5 mg/ml)	
albuterol sulfate soln nebu 0.63 mg/3ml (base equiv)	
albuterol sulfate soln nebu 1.25 mg/3ml (base equiv)	
albuterol sulfate syrup 2 mg/5ml	
albuterol sulfate tab sr 12hr 4 mg (Vospire er)	
albuterol sulfate tab sr 12hr 8 mg (Vospire er)	
albuterol sulfate tab 2 mg	
albuterol sulfate tab 4 mg	
ANORO ELLIPTA – umeclidinium-vilanterol aero powd ba 62.5-25 mcg/inh	
ASMANEX 120 METERED DOSES – mometasone furoate inhal powd 220 mcg/inh (breath activated)	
ASMANEX 14 METERED DOSES – mometasone furoate inhal powd 220 mcg/inh (breath activated)	
ASMANEX 30 METERED DOSES – mometasone furoate inhal powd 110 mcg/inh (breath activated)	
ASMANEX 30 METERED DOSES – mometasone furoate inhal powd 220 mcg/inh (breath activated)	
ASMANEX 60 METERED DOSES – mometasone furoate inhal powd 220 mcg/inh (breath activated)	
ATROVENT HFA – ipratropium bromide hfa inhal aerosol 17 mcg/act	
BREO ELLIPTA – fluticasone furoate-vilanterol aero powd ba 100-25 mcg/inh	
budesonide inhalation susp 0.25 mg/2ml (Pulmicort)	
budesonide inhalation susp 0.5 mg/2ml (Pulmicort)	
COMBIVENT – ipratropium-albuterol aerosol 18-103 mcg/act (20-120mcg/act)	

Drug Name	Prior Approval
COMBIVENT RESPIMAT – ipratropium-albuterol inhal aerosol soln 20-100 mcg/act	
cromolyn sodium soln nebu 20 mg/2ml	
DULERA – mometasone furoate-formoterol fumarate aerosol 100-5 mcg/act	
DULERA – mometasone furoate-formoterol fumarate aerosol 200-5 mcg/act	
FLOVENT DISKUS – fluticasone propionate aer pow ba 50 mcg/blister	
FLOVENT DISKUS – fluticasone propionate aer pow ba 100 mcg/blister	
FLOVENT DISKUS – fluticasone propionate aer pow ba 250 mcg/blister	
FLOVENT HFA – fluticasone propionate hfa inhal aero 44 mcg/act (50/valve)	
FLOVENT HFA – fluticasone propionate hfa inhal aer 110 mcg/act (125/valve)	
FLOVENT HFA – fluticasone propionate hfa inhal aer 220 mcg/act (250/valve)	
FORADIL AEROLIZER – formoterol fumarate inhal cap 12 mcg	
ipratropium bromide inhal soln 0.02%	
ipratropium-albuterol nebu soln 0.5-2.5(3) mg/3ml (Duoneb)	
levalbuterol hcl soln nebu conc 1.25 mg/0.5ml (base equiv) (Xopenex concentrate)	
levalbuterol hcl soln nebu 0.31 mg/3ml (base equiv) (Xopenex)	
levalbuterol hcl soln nebu 0.63 mg/3ml (base equiv) (Xopenex)	
levalbuterol hcl soln nebu 1.25 mg/3ml (base equiv) (Xopenex)	
MAXAIR AUTOHALER – pirbuterol acetate breath activated inhal aerosol 200mcg/inh	
montelukast sodium chew tab 4 mg (base equiv) (Singulair)	
montelukast sodium chew tab 5 mg (base equiv) (Singulair)	
montelukast sodium oral granules packet 4 mg (base equiv) (Singulair)	

Drug Name	Prior Approval
montelukast sodium tab 10 mg (base equiv) (Singulair)	
PROAIR HFA – albuterol sulfate inhal aero 108 mcg/act (90mcg base equiv)	
PULMICORT – budesonide inhalation susp 1 mg/2ml	
QVAR – beclomethasone dipropionate inhal aero soln 40 mcg/act	
QVAR – beclomethasone dipropionate inhal aero soln 80 mcg/act	
SEREVENT DISKUS – salmeterol xinafoate aer pow ba 50 mcg/dose (base equiv)	
SPIRIVA HANDIHALER – tiotropium bromide monohydrate inhal cap 18 mcg (base equiv)	
SYMBICORT – budesonide-formoterol fumarate dihyd aerosol 80-4.5 mcg/act	
SYMBICORT – budesonide-formoterol fumarate dihyd aerosol 160-4.5 mcg/act	
terbutaline sulfate tab 2.5 mg	
terbutaline sulfate tab 5 mg	
theophylline tab sr 12hr 100 mg	
theophylline tab sr 12hr 200 mg	
theophylline tab sr 12hr 300 mg	
theophylline tab sr 12hr 450 mg	
theophylline tab sr 24hr 400 mg	
theophylline tab sr 24hr 600 mg	
VENTOLIN HFA – albuterol sulfate inhal aero 108 mcg/act (90mcg base equiv)	
XOLAIR – omalizumab for inj 150 mg	•
zafirlukast tab 10 mg (Accolate)	
zafirlukast tab 20 mg (Accolate)	
OTHER RESPIRATORY DRUGS	
KALYDECO – ivacaftor tab 150 mg	•
PULMOZYME – dornase alfa inhal soln 1 mg/ml	
GASTROINTESTINAL DRUGS	
LAXATIVES	
lactulose solution 10 gm/15ml	

Drug Name	Prior Approval
peg 3350-kcl-na bicarb-nacl-na sulfate for soln 236 gm (Golytely)	
peg 3350-kcl-na bicarb-nacl-na sulfate for soln 240 gm (Colyte-flavor packs)	
peg 3350-kcl-sod bicarb-nacl for soln 420 gm (Nulytely/flavor pack)	
ULCER/GERD	
amoxicillin cap-clarithro tab-lansopraz cap dr therapy pack (Prevpac)	
CARAFATE – sucralfate susp 1 gm/10ml	
cimetidine hcl soln 300 mg/5ml	
cimetidine tab 300 mg	
cimetidine tab 400 mg	
cimetidine tab 800 mg	
DICYCLOMINE HCL – dicyclomine hcl oral soln 10 mg/5ml	
dicyclomine hcl cap 10 mg (Bentyl)	
dicyclomine hcl tab 20 mg (Bentyl)	
famotidine tab 40 mg (Pepcid)	
glycopyrrolate tab 1 mg (Robinul)	
glycopyrrolate tab 2 mg (Robinul forte)	
hyoscyamine sulfate elixir 0.125 mg/5ml	
hyoscyamine sulfate soln 0.125 mg/ml	
hyoscyamine sulfate tab sl 0.125 mg (Levsin/sl)	
hyoscyamine sulfate tab sr 12hr 0.375 mg (Levbid)	
hyoscyamine sulfate tab 0.125 mg (Levsin)	
lansoprazole cap delayed release 15 mg (Prevacid)	
lansoprazole cap delayed release 30 mg (Prevacid)	
misoprostol tab 100 mcg (Cytotec)	
misoprostol tab 200 mcg (Cytotec)	
NEXIUM – esomeprazole magnesium for delayed release susp pack 2.5 mg	
NEXIUM – esomeprazole magnesium for delayed release susp packet 5 mg	

Drug Name	Prior Approval
NEXIUM – esomeprazole magnesium for delayed release susp packet 10 mg	
NEXIUM – esomeprazole magnesium for delayed release susp packet 20 mg	
NEXIUM – esomeprazole magnesium for delayed release susp packet 40 mg	
NEXIUM – esomeprazole magnesium cap delayed release 20 mg	
NEXIUM – esomeprazole magnesium cap delayed release 40 mg	
omeprazole cap delayed release 10 mg (Prilosec)	
omeprazole cap delayed release 20 mg (Prilosec)	
omeprazole cap delayed release 40 mg (Prilosec)	
pantoprazole sodium ec tab 20 mg (base equiv) (Protonix)	
pantoprazole sodium ec tab 40 mg (base equiv) (Protonix)	
ranitidine hcl cap 300 mg	
ranitidine hcl syrup 15 mg/ml (75 mg/5ml)	
ranitidine hcl tab 300 mg (Zantac)	
sucralfate tab 1 gm (Carafate)	
NAUSEA AND VOMITING	
EMEND – aprepitant capsule 40 mg	
EMEND – aprepitant capsule 80 mg	
EMEND – aprepitant capsule 125 mg	
EMEND – aprepitant capsule therapy pack 80 & 125 mg	
ondansetron hcl oral soln 4 mg/5ml (Zofran)	
ondansetron hcl tab 24 mg	
ondansetron hcl tab 4 mg (Zofran)	
ondansetron hcl tab 8 mg (Zofran)	
ondansetron orally disintegrating tab 4 mg (Zofran odt)	
ondansetron orally disintegrating tab 8 mg (Zofran odt)	
trimethobenzamide hcl cap 300 mg (Tigan)	
DIGESTIVE ENZYMES	
CREON – pancrelipase (lip-prot-amyl) dr cap 3000-9500-15000 unit	
CREON – pancrelipase (lip-prot-amyl) dr cap 6000-19000-30000 unit	
CREON – pancrelipase (lip-prot-amyl) dr cap 12000-38000-60000 unit	
CREON – pancrelipase (lip-prot-amyl) dr cap 24000-76000-120000 unit	
CREON – pancrelipase (lip-prot-amyl) dr cap 36000-114000-180000 unit	
ZENPEP – pancrelipase (lip-prot-amyl) dr cap 3000-10000-16000 unit	
ZENPEP – pancrelipase (lip-prot-amyl) dr cap 5000-17000-27000 unit	
ZENPEP – pancrelipase (lip-prot-amyl) dr cap 10000-34000-55000 unit	
ZENPEP – pancrelipase (lip-prot-amyl) dr cap 15000-51000-82000 unit	
ZENPEP – pancrelipase (lip-prot-amyl) dr cap 20000-68000-109000 unit	
ZENPEP – pancrelipase (lip-prot-amyl) dr cap 25000-85000-136000 unit	
OTHER GASTROINTESTINAL DRUGS	
ASACOL – mesalamine tab delayed release 400 mg	
ASACOL HD – mesalamine tab delayed release 800 mg	
balsalazide disodium cap 750 mg (Colazal)	
calcium acetate (phosphate binder) cap 667 mg (169 mg ca) (Phoslo)	
CANASA – mesalamine suppos 1000 mg	
CHENODAL – chenodiol tab 250 mg	•
DELZICOL – mesalamine cap dr 400 mg	
lactulose (encephalopathy) solution 10 gm/15ml	
LIALDA – mesalamine tab delayed release 1.2 gm	
mesalamine enema 4 gm	
metoclopramide hcl soln 5 mg/5ml (10 mg/10ml)	
metoclopramide hcl tab 10 mg (Reglan)	
metoclopramide hcl tab 5 mg (Reglan)	

Drug Name	Prior Approval
PENTASA – mesalamine cap cr 250 mg	
PENTASA – mesalamine cap cr 500 mg	
RELISTOR – methylnaltrexone bromide inj 8 mg/0.4ml (20 mg/ml)	•
RELISTOR – methylnaltrexone bromide inj 12 mg/0.6ml (20 mg/ml)	•
RELISTOR – methylnaltrexone bromide inj kit 12 mg/0.6ml	•
RENVELA – sevelamer carbonate tab 800 mg	
RENVELA – sevelamer carbonate packet 0.8 gm	
RENVELA – sevelamer carbonate packet 2.4 gm	
sulfasalazine tab delayed release 500 mg (Azulfidine en-tabs)	
sulfasalazine tab 500 mg (Azulfidine)	
ursodiol cap 300 mg (Actigall)	
GENITOURINARY DRUGS	
URINARY TRACT INFECTIONS	
nitrofurantoin macrocrystalline cap 100 mg (Macrodantin)	
nitrofurantoin macrocrystalline cap 50 mg (Macrodantin)	
nitrofurantoin monohydrate macrocrystalline cap 100 mg (Macrobid)	
nitrofurantoin susp 25 mg/5ml (Furadantin)	
URINARY TRACT SPASMS	
oxybutynin chloride syrup 5 mg/5ml	
oxybutynin chloride tab sr 24hr 10 mg (Ditropan xl)	
oxybutynin chloride tab sr 24hr 15 mg (Ditropan xl)	
oxybutynin chloride tab sr 24hr 5 mg (Ditropan xl)	
oxybutynin chloride tab 5 mg	
tolterodine tartrate cap sr 24hr 2 mg (Detrol la)	
tolterodine tartrate cap sr 24hr 4 mg (Detrol la)	
tolterodine tartrate tab 1 mg (Detrol)	
tolterodine tartrate tab 2 mg (Detrol)	
VESICARE – solifenacin succinate tab 5 mg	

Drug Name	Prior Approval
VESICARE – solifenacin succinate tab 10 mg	
VAGINAL PRODUCTS	
CLEOCIN – clindamycin phosphate vaginal suppos 100 mg	
clindamycin phosphate vaginal cream 2% (Cleocin)	
metronidazole vaginal gel 0.75% (Metrogel-vaginal)	
PREMARIN – estrogens, conjugated vaginal cream 0.625 mg/gm	
terconazole vaginal cream 0.4% (Terazol 7)	
terconazole vaginal cream 0.8% (Terazol 3)	
terconazole vaginal suppos 80 mg	
VAGIFEM – estradiol vaginal tab 10 mcg	
OTHER GENITOURINARY DRUGS	
alfuzosin hcl tab sr 24hr 10 mg (Uroxatral)	
CYTRA-K – potassium citrate & citric acid soln 1100-334 mg/5ml	
CYTRA-3 – pot & sod citrates w/ cit ac syrup 550-500-334 mg/5ml	
ELMIRON – pentosan polysulfate sodium caps 100 mg	
finasteride tab 5 mg (Proscar)	•
K-PHOS NO 2 – potassium & sodium acid phosphates tab 305-700 mg	
POTASSIUM CITRATE – potassium citrate tab cr 5 meq (540 mg)	
POTASSIUM CITRATE – potassium citrate tab cr 10 meq (1080 mg)	
potassium citrate & citric acid powder pack 3300-1002 mg	
potassium citrate & citric acid soln 1100-334 mg/5ml	
sodium citrate & citric acid soln 500-334 mg/5ml (Shohls solution modi)	
tamsulosin hcl cap 0.4 mg (Flomax)	
TRICITRATES – pot & sod citrates w/ cit ac soln 550-500-334 mg/5ml	

Drug Name	Prior Approval
CENTRAL NERVOUS SYSTEM DRUGS	
ANXIETY	
ALPRAZOLAM INTENSOL – alprazolam conc 1 mg/ml	
alprazolam tab sr 24hr 0.5 mg (Xanax xr)	
alprazolam tab sr 24hr 1 mg (Xanax xr)	
alprazolam tab sr 24hr 2 mg (Xanax xr)	
alprazolam tab sr 24hr 3 mg (Xanax xr)	
alprazolam tab 0.25 mg (Xanax)	
alprazolam tab 0.5 mg (Xanax)	
alprazolam tab 1 mg (Xanax)	
alprazolam tab 2 mg (Xanax)	
buspirone hcl tab 10 mg	
buspirone hcl tab 15 mg	
buspirone hcl tab 30 mg	
buspirone hcl tab 5 mg	
buspirone hcl tab 7.5 mg	
clorazepate dipotassium tab 15 mg (Tranxene t)	
clorazepate dipotassium tab 3.75 mg (Tranxene t)	
clorazepate dipotassium tab 7.5 mg (Tranxene t)	
DIAZEPAM – diazepam soln 1 mg/ml	
DIAZEPAM – diazepam inj 5 mg/ml	
DIAZEPAM – diazepam im inj device 10 mg/2ml	
DIAZEPAM INTENSOL – diazepam conc 5 mg/ml	
diazepam tab 10 mg (Valium)	
diazepam tab 2 mg (Valium)	
diazepam tab 5 mg (Valium)	
hydroxyzine hcl syrup 10 mg/5ml	
hydroxyzine hcl tab 10 mg	
hydroxyzine hcl tab 25 mg	
hydroxyzine hcl tab 50 mg	
HYDROXYZINE PAMOATE – hydroxyzine pamoate cap 100 mg	
hydroxyzine pamoate cap 25 mg (Vistaril)	
hydroxyzine pamoate cap 50 mg (Vistaril)	

Drug Name	Prior Approval
lorazepam conc 2 mg/ml (Lorazepam intensol)	
lorazepam tab 0.5 mg (Ativan)	
lorazepam tab 1 mg (Ativan)	
lorazepam tab 2 mg (Ativan)	
DEPRESSION	
amitriptyline hcl tab 10 mg	
amitriptyline hcl tab 100 mg	
amitriptyline hcl tab 150 mg	
amitriptyline hcl tab 25 mg	
amitriptyline hcl tab 50 mg	
amitriptyline hcl tab 75 mg	
bupropion hcl tab sr 12hr 100 mg (Wellbutrin sr)	
bupropion hcl tab sr 12hr 150 mg (Wellbutrin sr)	
bupropion hcl tab sr 12hr 200 mg (Wellbutrin sr)	
bupropion hcl tab sr 24hr 150 mg (Wellbutrin xl)	
bupropion hcl tab sr 24hr 300 mg (Wellbutrin xl)	
bupropion hcl tab 100 mg (Wellbutrin)	
bupropion hcl tab 75 mg (Wellbutrin)	
citalopram hydrobromide oral soln 10 mg/5ml	
citalopram hydrobromide tab 10 mg (base equiv) (Celexa)	
citalopram hydrobromide tab 20 mg (base equiv) (Celexa)	
citalopram hydrobromide tab 40 mg (base equiv) (Celexa)	
clomipramine hcl cap 25 mg (Anafranil)	
clomipramine hcl cap 50 mg (Anafranil)	
clomipramine hcl cap 75 mg (Anafranil)	
desipramine hcl tab 10 mg (Norpramin)	
desipramine hcl tab 100 mg (Norpramin)	
desipramine hcl tab 150 mg (Norpramin)	
desipramine hcl tab 25 mg (Norpramin)	
desipramine hcl tab 50 mg (Norpramin)	
desipramine hcl tab 75 mg (Norpramin)	
DOXEPIN HCL – doxepin hcl cap 75 mg	
doxepin hcl cap 10 mg	

Drug Name	Prior Approval
doxepin hcl cap 100 mg	
doxepin hcl cap 150 mg	
doxepin hcl cap 25 mg	
doxepin hcl cap 50 mg	
doxepin hcl conc 10 mg/ml	
duloxetine hcl enteric coated pellets cap 20 mg (Cymbalta)	
duloxetine hcl enteric coated pellets cap 30 mg (Cymbalta)	
duloxetine hcl enteric coated pellets cap 60 mg (Cymbalta)	
escitalopram oxalate soln 5 mg/5ml (base equiv) (Lexapro)	
escitalopram oxalate tab 10 mg (base equiv) (Lexapro)	
escitalopram oxalate tab 20 mg (base equiv) (Lexapro)	
escitalopram oxalate tab 5 mg (base equiv) (Lexapro)	
fluoxetine hcl cap 10 mg (Prozac)	
fluoxetine hcl cap 20 mg (Prozac)	
fluoxetine hcl cap 40 mg (Prozac)	
fluoxetine hcl solution 20 mg/5ml	
fluoxetine hcl tab 10 mg	
fluoxetine hcl tab 20 mg	
fluvoxamine maleate tab 100 mg	
fluvoxamine maleate tab 25 mg	
fluvoxamine maleate tab 50 mg	
imipramine hcl tab 10 mg (Tofranil)	
imipramine hcl tab 25 mg (Tofranil)	
imipramine hcl tab 50 mg (Tofranil)	
imipramine pamoate cap 100 mg (Tofranil-pm)	
imipramine pamoate cap 125 mg (Tofranil-pm)	
imipramine pamoate cap 150 mg (Tofranil-pm)	
imipramine pamoate cap 75 mg (Tofranil-pm)	
mirtazapine orally disintegrating tab 15 mg (Remeron soltab)	
mirtazapine orally disintegrating tab 30 mg (Remeron soltab)	
mirtazapine orally disintegrating tab 45 mg (Remeron soltab)	
mirtazapine tab 15 mg (Remeron)	
mirtazapine tab 30 mg (Remeron)	
mirtazapine tab 45 mg (Remeron)	
mirtazapine tab 7.5 mg	
NORTRIPTYLINE HCL – nortriptyline hcl soln 10 mg/5ml	
nortriptyline hcl cap 10 mg (Pamelor)	
nortriptyline hcl cap 25 mg (Pamelor)	
nortriptyline hcl cap 50 mg (Pamelor)	
nortriptyline hcl cap 75 mg (Pamelor)	
paroxetine hcl tab sr 24hr 12.5 mg (Paxil cr)	
paroxetine hcl tab sr 24hr 25 mg (Paxil cr)	
paroxetine hcl tab sr 24hr 37.5 mg (Paxil cr)	
paroxetine hcl tab 10 mg (Paxil)	
paroxetine hcl tab 20 mg (Paxil)	
paroxetine hcl tab 30 mg (Paxil)	
paroxetine hcl tab 40 mg (Paxil)	
phenelzine sulfate tab 15 mg (Nardil)	
sertraline hcl oral conc 20 mg/ml (Zoloft)	
sertraline hcl tab 100 mg (Zoloft)	
sertraline hcl tab 25 mg (Zoloft)	
sertraline hcl tab 50 mg (Zoloft)	
tranylcypromine sulfate tab 10 mg (Parnate)	
trazodone hcl tab 100 mg	
trazodone hcl tab 150 mg	
trazodone hcl tab 300 mg	
trazodone hcl tab 50 mg	
venlafaxine hcl cap sr 24hr 150 mg (base equivalent) (Effexor xr)	
venlafaxine hcl cap sr 24hr 37.5 mg (base equivalent) (Effexor xr)	

Drug Name	Prior Approval
venlafaxine hcl cap sr 24hr 75 mg (base equivalent) (Effexor xr)	
VENLAFAXINE HCL ER – venlafaxine hcl tab sr 24hr 225 mg (base equivalent)	
venlafaxine hcl tab sr 24hr 150 mg (base equivalent) (Venlafaxine hcl er)	
venlafaxine hcl tab sr 24hr 37.5 mg (base equivalent) (Venlafaxine hcl er)	
venlafaxine hcl tab sr 24hr 75 mg (base equivalent) (Venlafaxine hcl er)	
venlafaxine hcl tab 100 mg	
venlafaxine hcl tab 25 mg	
venlafaxine hcl tab 37.5 mg	
venlafaxine hcl tab 50 mg	
venlafaxine hcl tab 75 mg	
PSYCHOTIC AND BIPOLAR DISORDERS	
chlorpromazine hcl tab 10 mg	
chlorpromazine hcl tab 100 mg	
chlorpromazine hcl tab 200 mg	
chlorpromazine hcl tab 25 mg	
chlorpromazine hcl tab 50 mg	
clozapine tab 100 mg (Clozaril)	
clozapine tab 200 mg	
clozapine tab 25 mg (Clozaril)	
clozapine tab 50 mg	
FLUPHENAZINE HCL – fluphenazine hcl elixir 2.5 mg/5ml	
FLUPHENAZINE HCL – fluphenazine hcl oral conc 5 mg/ml	
fluphenazine hcl tab 1 mg	
fluphenazine hcl tab 10 mg	
fluphenazine hcl tab 2.5 mg	
fluphenazine hcl tab 5 mg	
haloperidol lactate oral conc 2 mg/ml	
haloperidol tab 0.5 mg	
haloperidol tab 1 mg	
haloperidol tab 10 mg	

Drug Name	Prior Approval
haloperidol tab 2 mg	
haloperidol tab 20 mg	
haloperidol tab 5 mg	
LITHIUM CARBONATE – lithium carbonate cap 150 mg	
lithium carbonate cap 150 mg (Lithium carbonate)	
lithium carbonate cap 300 mg	
lithium carbonate cap 600 mg (Lithium carbonate)	
lithium carbonate tab cr 300 mg (Lithobid)	
lithium carbonate tab cr 450 mg	
lithium carbonate tab 300 mg	
LITHIUM CITRATE – lithium citrate oral soln 8 meq/5ml	
loxapine succinate cap 10 mg	
loxapine succinate cap 25 mg	
loxapine succinate cap 5 mg (Loxitane)	
loxapine succinate cap 50 mg	
olanzapine orally disintegrating tab 10 mg (Zyprexa zydis)	
olanzapine orally disintegrating tab 15 mg (Zyprexa zydis)	
olanzapine orally disintegrating tab 20 mg (Zyprexa zydis)	
olanzapine orally disintegrating tab 5 mg (Zyprexa zydis)	
olanzapine tab 10 mg (Zyprexa)	
olanzapine tab 15 mg (Zyprexa)	
olanzapine tab 2.5 mg (Zyprexa)	
olanzapine tab 20 mg (Zyprexa)	
olanzapine tab 5 mg (Zyprexa)	
olanzapine tab 7.5 mg (Zyprexa)	
perphenazine tab 16 mg	
perphenazine tab 2 mg	
perphenazine tab 4 mg	
perphenazine tab 8 mg	
prochlorperazine maleate tab 10 mg (Compazine)	

Drug Name	Prior Approval
prochlorperazine maleate tab 5 mg (Compazine)	
prochlorperazine suppos 25 mg	
quetiapine fumarate tab 100 mg (Seroquel)	
quetiapine fumarate tab 200 mg (Seroquel)	
quetiapine fumarate tab 25 mg (Seroquel)	
quetiapine fumarate tab 300 mg (Seroquel)	
quetiapine fumarate tab 400 mg (Seroquel)	
quetiapine fumarate tab 50 mg (Seroquel)	
risperidone orally disintegrating tab 0.25 mg	
risperidone orally disintegrating tab 0.5 mg (Risperdal m-tab)	
risperidone orally disintegrating tab 1 mg (Risperdal m-tab)	
risperidone orally disintegrating tab 2 mg (Risperdal m-tab)	
risperidone orally disintegrating tab 3 mg (Risperdal m-tab)	
risperidone orally disintegrating tab 4 mg (Risperdal m-tab)	
risperidone soln 1 mg/ml (Risperdal)	
risperidone tab 0.25 mg (Risperdal)	
risperidone tab 0.5 mg (Risperdal)	
risperidone tab 1 mg (Risperdal)	
risperidone tab 2 mg (Risperdal)	
risperidone tab 3 mg (Risperdal)	
risperidone tab 4 mg (Risperdal)	
SEROQUEL XR – quetiapine fumarate tab sr 24hr 50 mg	
SEROQUEL XR – quetiapine fumarate tab sr 24hr 150 mg	
SEROQUEL XR – quetiapine fumarate tab sr 24hr 200 mg	
SEROQUEL XR – quetiapine fumarate tab sr 24hr 300 mg	
SEROQUEL XR – quetiapine fumarate tab sr 24hr 400 mg	
thiothixene cap 1 mg	
thiothixene cap 10 mg	
thiothixene cap 2 mg	
thiothixene cap 5 mg	
trifluoperazine hcl tab 1 mg	
trifluoperazine hcl tab 10 mg	
trifluoperazine hcl tab 2 mg	
trifluoperazine hcl tab 5 mg	
ziprasidone hcl cap 20 mg (Geodon)	
ziprasidone hcl cap 40 mg (Geodon)	
ziprasidone hcl cap 60 mg (Geodon)	
ziprasidone hcl cap 80 mg (Geodon)	
SLEEP AIDS	
estazolam tab 1 mg	
estazolam tab 2 mg	
PHENOBARBITAL – phenobarbital tab 15 mg	
PHENOBARBITAL – phenobarbital tab 30 mg	
PHENOBARBITAL – phenobarbital tab 60 mg	
PHENOBARBITAL – phenobarbital tab 64.8 mg	
PHENOBARBITAL – phenobarbital tab 97.2 mg	
PHENOBARBITAL – phenobarbital tab 100 mg	
phenobarbital elixir 20 mg/5ml	
phenobarbital tab 16.2 mg	
phenobarbital tab 30 mg	
phenobarbital tab 32.4 mg	
temazepam cap 15 mg (Restoril)	
temazepam cap 22.5 mg (Restoril)	
temazepam cap 30 mg (Restoril)	
temazepam cap 7.5 mg (Restoril)	
zaleplon cap 10 mg (Sonata)	
zaleplon cap 5 mg (Sonata)	
zolpidem tartrate tab cr 12.5 mg (Ambien cr)	
zolpidem tartrate tab cr 6.25 mg (Ambien cr)	
zolpidem tartrate tab 10 mg (Ambien)	
zolpidem tartrate tab 5 mg (Ambien)	
HYPERACTIVITY/NARCOLEPSY	

Drug Name	Prior Approval
amphetamine-dextroamphetamine cap sr 24hr 10 mg (Adderall xr)	
amphetamine-dextroamphetamine cap sr 24hr 15 mg (Adderall xr)	
amphetamine-dextroamphetamine cap sr 24hr 20 mg (Adderall xr)	
amphetamine-dextroamphetamine cap sr 24hr 25 mg (Adderall xr)	
amphetamine-dextroamphetamine cap sr 24hr 30 mg (Adderall xr)	
amphetamine-dextroamphetamine cap sr 24hr 5 mg (Adderall xr)	
amphetamine-dextroamphetamine tab 10 mg (Adderall)	
amphetamine-dextroamphetamine tab 12.5 mg (Adderall)	
amphetamine-dextroamphetamine tab 15 mg (Adderall)	
amphetamine-dextroamphetamine tab 20 mg (Adderall)	
amphetamine-dextroamphetamine tab 30 mg (Adderall)	
amphetamine-dextroamphetamine tab 5 mg (Adderall)	
amphetamine-dextroamphetamine tab 7.5 mg (Adderall)	
caffeine citrate oral soln 60 mg/3ml (10 mg/ml base equiv) (Cafcit)	
dexmethylphenidate hcl tab 10 mg (Focalin)	
dexmethylphenidate hcl tab 2.5 mg (Focalin)	
dexmethylphenidate hcl tab 5 mg (Focalin)	
dextroamphetamine sulfate cap sr 24hr 10 mg (Dexedrine)	
dextroamphetamine sulfate cap sr 24hr 15 mg (Dexedrine)	
dextroamphetamine sulfate cap sr 24hr 5 mg (Dexedrine)	
dextroamphetamine sulfate tab 10 mg	
dextroamphetamine sulfate tab 5 mg	

Drug Name	Prior Approval
methylphenidate hcl cap cr 10 mg (Metadate cd)	
methylphenidate hcl cap cr 20 mg (Metadate cd)	
methylphenidate hcl cap cr 30 mg (Metadate cd)	
methylphenidate hcl cap cr 40 mg (Metadate cd)	
methylphenidate hcl cap cr 50 mg (Metadate cd)	
methylphenidate hcl cap cr 60 mg (Metadate cd)	
methylphenidate hcl cap sr 24hr 20 mg (Ritalin la)	
methylphenidate hcl cap sr 24hr 30 mg (Ritalin la)	
methylphenidate hcl cap sr 24hr 40 mg (Ritalin la)	
METHYLPHENIDATE HCL ER – methylphenidate hcl tab cr 10 mg	
methylphenidate hcl tab cr 20 mg (Ritalin sr)	
methylphenidate hcl tab sa osm 18 mg (Concerta)	
methylphenidate hcl tab sa osm 27 mg (Concerta)	
methylphenidate hcl tab sa osm 36 mg (Concerta)	
methylphenidate hcl tab sa osm 54 mg (Concerta)	
methylphenidate hcl tab 10 mg (Ritalin)	
methylphenidate hcl tab 20 mg (Ritalin)	
methylphenidate hcl tab 5 mg (Ritalin)	
modafinil tab 100 mg (Provigil)	
modafinil tab 200 mg (Provigil)	
STRATTERA – atomoxetine hcl cap 10 mg (base equiv)	
STRATTERA – atomoxetine hcl cap 18 mg (base equiv)	
STRATTERA – atomoxetine hcl cap 25 mg (base equiv)	
STRATTERA – atomoxetine hcl cap 40 mg (base equiv)	
STRATTERA – atomoxetine hcl cap 60 mg (base equiv)	
STRATTERA – atomoxetine hcl cap 80 mg (base equiv)	
STRATTERA – atomoxetine hcl cap 100 mg (base equiv)	
VYVANSE – lisdexamfetamine dimesylate cap 20 mg	

Drug Name	Prior Approval
VYVANSE – lisdexamfetamine dimesylate cap 30 mg	
VYVANSE – lisdexamfetamine dimesylate cap 40 mg	
VYVANSE – lisdexamfetamine dimesylate cap 50 mg	
VYVANSE – lisdexamfetamine dimesylate cap 60 mg	
VYVANSE – lisdexamfetamine dimesylate cap 70 mg	
MULTIPLE SCLEROSIS	
BETASERON – interferon beta-1b for inj kit 0.3 mg	•
COPAXONE – glatiramer acetate soln prefilled syringe 40 mg/ml	•
COPAXONE – glatiramer acetate inj kit 20 mg/ml	•
REBIF – interferon beta-1a inj 22 mcg/0.5ml (12mu/ml) (44 mcg/ml)	•
REBIF – interferon beta-1a inj 44 mcg/0.5ml (24mu/ml) (88 mcg/ml)	•
REBIF REBIDOSE – interferon beta-1a inj 22 mcg/0.5ml (12mu/ml) (44 mcg/ml)	•
REBIF REBIDOSE – interferon beta-1a inj 44 mcg/0.5ml (24mu/ml) (88 mcg/ml)	•
REBIF REBIDOSE TITRATION – interferon beta-1a inj 6 x 8.8 mcg/0.2ml & 6 x 22 mcg/0.5ml	•
REBIF TITRATION PACK – interferon beta-1a inj 6 x 8.8 mcg/0.2ml & 6 x 22 mcg/0.5ml	•
TECFIDERA – dimethyl fumarate capsule delayed release 120 mg	•
TECFIDERA – dimethyl fumarate capsule delayed release 240 mg	•
TECFIDERA STARTER PACK – dimethyl fumarate capsule dr starter pack 120 mg & 240 mg	•
TOBACCO CESSATION	
bupropion hcl (smoking deterrent) tab sr 12hr 150 mg (Zyban)	
CHANTIX – varenicline tartrate tab 0.5 mg (base equiv)	
CHANTIX – varenicline tartrate tab 1 mg (base equiv)	

Drug Name	Prior Approval
CHANTIX CONTINUING MONTH – varenicline tartrate tab 1 mg (base equiv)	
CHANTIX STARTING MONTH PA – varenicline tartrate tab 0.5 mg x 11 & tab 1 mg x 42 pack	
COMMIT – nicotine polacrilex lozenge 4 mg	
NICODERM CQ – nicotine td patch 24hr 7 mg/24hr	
NICODERM CQ – nicotine td patch 24hr 14 mg/24hr	
NICODERM CQ – nicotine td patch 24hr 21 mg/24hr	
NICORETTE – nicotine polacrilex gum 2 mg	
NICORETTE – nicotine polacrilex gum 4 mg	
NICORETTE – nicotine polacrilex lozenge 2 mg	
NICORETTE – nicotine polacrilex lozenge 4 mg	
NICORETTE MINI – nicotine polacrilex lozenge 2 mg	
NICORETTE MINI – nicotine polacrilex lozenge 4 mg	
NICORETTE REFILL – nicotine polacrilex gum 2 mg	
NICORETTE REFILL – nicotine polacrilex gum 4 mg	
NICORETTE STARTER KIT – nicotine polacrilex gum 2 mg	
NICORETTE STARTER KIT – nicotine polacrilex gum 4 mg	
nicotine polacrilex gum 2 mg	
nicotine polacrilex gum 4 mg	
nicotine polacrilex lozenge 2 mg	
nicotine polacrilex lozenge 4 mg	
nicotine td patch 24hr 14 mg/24hr	
nicotine td patch 24hr 21 mg/24hr	
nicotine td patch 24hr 7 mg/24hr	
NICOTINE TRANSDERMAL SYST – nicotine td patch 24 hr kit 21-14-7 mg/24hr	
NICOTROL INHALER – nicotine inhaler system 10 mg (4 mg delivered)	
NICOTROL NS – nicotine nasal spray 10 mg/ml (0.5 mg/spray)	
OTHER CENTRAL NERVOUS SYSTEM DRUGS	
acamprosate calcium tab delayed release 333 mg (Campral)	
disulfiram tab 250 mg (Antabuse)	

Drug Name	Prior Approval
disulfiram tab 500 mg (Antabuse)	
donepezil hydrochloride orally disintegrating tab 10 mg (Aricept odt)	
donepezil hydrochloride orally disintegrating tab 5 mg (Aricept odt)	
donepezil hydrochloride tab 10 mg (Aricept)	
donepezil hydrochloride tab 5 mg (Aricept)	
galantamine hydrobromide cap sr 24hr 16 mg (Razadyne er)	
galantamine hydrobromide cap sr 24hr 24 mg (Razadyne er)	
galantamine hydrobromide cap sr 24hr 8 mg (Razadyne er)	
galantamine hydrobromide tab 12 mg (Razadyne)	
galantamine hydrobromide tab 4 mg (Razadyne)	
galantamine hydrobromide tab 8 mg (Razadyne)	
NAMENDA – memantine hcl tab 5 mg	
NAMENDA – memantine hcl tab 10 mg	
NAMENDA – memantine hcl oral solution 2 mg/ml	
NAMENDA TITRATION PAK – memantine hcl tab 5 mg (28) & 10 mg (21) titration pak	
NAMENDA XR – memantine hcl cap sr 24hr 7 mg	
NAMENDA XR – memantine hcl cap sr 24hr 14 mg	
NAMENDA XR – memantine hcl cap sr 24hr 21 mg	
NAMENDA XR – memantine hcl cap sr 24hr 28 mg	
NAMENDA XR TITRATION PACK – memantine hcl cap sr 24hr 7 mg & 14 mg & 21 mg & 28 mg pack	
olanzapine-fluoxetine hcl cap 12-25 mg (Symbyax)	
olanzapine-fluoxetine hcl cap 12-50 mg (Symbyax)	
olanzapine-fluoxetine hcl cap 3-25 mg (Symbyax)	
olanzapine-fluoxetine hcl cap 6-25 mg (Symbyax)	
olanzapine-fluoxetine hcl cap 6-50 mg (Symbyax)	
ORAP – pimozide tab 1 mg	
ORAP – pimozide tab 2 mg	
rivastigmine tartrate cap 1.5 mg (Exelon)	
rivastigmine tartrate cap 3 mg (Exelon)	
rivastigmine tartrate cap 4.5 mg (Exelon)	
rivastigmine tartrate cap 6 mg (Exelon)	
XENAZINE – tetrabenazine tab 12.5 mg	•
XENAZINE – tetrabenazine tab 25 mg	•
PAIN RELIEF DRUGS	
NON-NARCOTIC DRUGS	
butalbital-acetaminophen-caffeine cap 50-325-40 mg	
butalbital-acetaminophen-caffeine tab 50-325-40 mg	
butalbital-aspirin-caffeine cap 50-325-40 mg (Fiorinal)	
butalbital-aspirin-caffeine tab 50-325-40 mg	
BUTALBITAL/ASPIRIN/CAFFEI – butalbital-aspirin-caffeine tab 50-325-40 mg	
salsalate tab 500 mg	
salsalate tab 750 mg	
NARCOTIC DRUGS	
acetaminophen w/ codeine soln 120-12 mg/5ml	
acetaminophen w/ codeine tab 300-15 mg (Tylenol/codeine)	
acetaminophen w/ codeine tab 300-30 mg (Tylenol/codeine #3)	
acetaminophen w/ codeine tab 300-60 mg (Tylenol/codeine #4)	
buprenorphine hcl sl tab 2 mg (base equiv)	
buprenorphine hcl sl tab 8 mg (base equiv)	
buprenorphine hcl-naloxone hcl sl tab 2-0.5 mg (base equiv)	
buprenorphine hcl-naloxone hcl sl tab 8-2 mg (base equiv)	
butalbital-aspirin-caff w/ codeine cap 50-325-40-30 mg (Fiorinal/codeine #3)	
CODEINE SULFATE – codeine sulfate tab 15 mg	
CODEINE SULFATE – codeine sulfate tab 30 mg	
CODEINE SULFATE – codeine sulfate tab 60 mg	

Drug Name	Prior Approval
fentanyl citrate lollipop 1200 mcg (Actiq)	
fentanyl citrate lollipop 1600 mcg (Actiq)	
fentanyl citrate lollipop 200 mcg (Actiq)	
fentanyl citrate lollipop 400 mcg (Actiq)	
fentanyl citrate lollipop 600 mcg (Actiq)	
fentanyl citrate lollipop 800 mcg (Actiq)	
fentanyl td patch 72hr 100 mcg/hr (Duragesic)	
fentanyl td patch 72hr 12 mcg/hr (Duragesic)	
fentanyl td patch 72hr 25 mcg/hr (Duragesic)	
fentanyl td patch 72hr 50 mcg/hr (Duragesic)	
fentanyl td patch 72hr 75 mcg/hr (Duragesic)	
hydrocodone-acetaminophen soln 7.5-325 mg/15ml (Hycet)	
hydrocodone-acetaminophen tab 10-325 mg (Norco)	
hydrocodone-acetaminophen tab 5-300 mg (Xodol)	
hydrocodone-acetaminophen tab 5-325 mg (Norco)	
hydrocodone-acetaminophen tab 7.5-325 mg (Norco)	
hydrocodone-ibuprofen tab 10-200 mg (Ibudone)	
hydrocodone-ibuprofen tab 5-200 mg (Reprexain)	
hydrocodone-ibuprofen tab 7.5-200 mg (Vicoprofen)	
HYDROMORPHONE HCL – hydromorphone hcl suppos 3 mg	
hydromorphone hcl liqd 1 mg/ml (Dilaudid)	
hydromorphone hcl tab 2 mg (Dilaudid)	
hydromorphone hcl tab 4 mg (Dilaudid)	
hydromorphone hcl tab 8 mg (Dilaudid)	
methadone hcl conc 10 mg/ml (Methadose)	
methadone hcl soln 10 mg/5ml (Methadone hcl)	
methadone hcl soln 5 mg/5ml (Methadone hcl)	
methadone hcl tab for oral susp 40 mg	
methadone hcl tab 10 mg (Dolophine)	
methadone hcl tab 5 mg (Dolophine hcl)	

Drug Name	Prior Approval
MORPHINE SULFATE – morphine sulfate tab 15 mg	
MORPHINE SULFATE – morphine sulfate tab 30 mg	
MORPHINE SULFATE – morphine sulfate suppos 5 mg	
MORPHINE SULFATE – morphine sulfate suppos 10 mg	
MORPHINE SULFATE – morphine sulfate suppos 20 mg	
MORPHINE SULFATE – morphine sulfate suppos 30 mg	
morphine sulfate (concentrate) oral soln 20 mg/ml	
morphine sulfate oral soln 10 mg/5ml	
morphine sulfate oral soln 20 mg/5ml	
morphine sulfate tab cr 100 mg (Ms contin)	
morphine sulfate tab cr 15 mg (Ms contin)	
morphine sulfate tab cr 200 mg (Ms contin)	
morphine sulfate tab cr 30 mg (Ms contin)	
morphine sulfate tab cr 60 mg (Ms contin)	
OXYCODONE HCL – oxycodone hcl conc 100 mg/5ml (20 mg/ml)	
oxycodone hcl cap 5 mg	
oxycodone hcl conc 100 mg/5ml (20 mg/ml) (Oxycodone hcl)	
oxycodone hcl soln 5 mg/5ml (Oxycodone hcl)	
oxycodone hcl tab 10 mg	
oxycodone hcl tab 15 mg (Roxicodone)	
oxycodone hcl tab 20 mg	
oxycodone hcl tab 30 mg (Roxicodone)	
oxycodone hcl tab 5 mg (Roxicodone)	
oxycodone w/ acetaminophen tab 10-325 mg (Percocet)	
oxycodone w/ acetaminophen tab 5-325 mg (Percocet)	
oxycodone w/ acetaminophen tab 7.5-325 mg (Percocet)	
oxycodone-aspirin tab 4.8355-325 mg (Percodan)	

Drug Name	Prior Approval
OXYCONTIN – oxycodone hcl tab er 12hr deter 10 mg	
OXYCONTIN – oxycodone hcl tab er 12hr deter 15 mg	
OXYCONTIN – oxycodone hcl tab er 12hr deter 20 mg	
OXYCONTIN – oxycodone hcl tab er 12hr deter 30 mg	
OXYCONTIN – oxycodone hcl tab er 12hr deter 40 mg	
OXYCONTIN – oxycodone hcl tab er 12hr deter 60 mg	
OXYCONTIN – oxycodone hcl tab er 12hr deter 80 mg	
ROXICET – oxycodone w/ acetaminophen soln 5-325 mg/5ml	
SUBOXONE – buprenorphine hcl-naloxone hcl sl film 2-0.5 mg (base equiv)	
SUBOXONE – buprenorphine hcl-naloxone hcl sl film 4-1 mg (base equiv)	
SUBOXONE – buprenorphine hcl-naloxone hcl sl film 8-2 mg (base equiv)	
SUBOXONE – buprenorphine hcl-naloxone hcl sl film 12-3 mg (base equiv)	
tramadol hcl tab sr 24hr 100 mg (Ultram er)	
tramadol hcl tab sr 24hr 200 mg (Ultram er)	
tramadol hcl tab sr 24hr 300 mg (Ultram er)	
tramadol hcl tab 50 mg (Ultram)	
tramadol-acetaminophen tab 37.5-325 mg (Ultracet)	
RHEUMATOID AND OSTEOARTHRITIS	
CELEBREX – celecoxib cap 50 mg	
CELEBREX – celecoxib cap 100 mg	
CELEBREX – celecoxib cap 200 mg	
CELEBREX – celecoxib cap 400 mg	
diclofenac potassium tab 50 mg (Cataflam)	
diclofenac sodium tab delayed release 25 mg	
diclofenac sodium tab delayed release 50 mg	

Drug Name	Prior Approval
diclofenac sodium tab delayed release 75 mg	
diclofenac sodium tab sr 24hr 100 mg (Voltaren-xr)	
ENBREL – etanercept subcutaneous inj 50 mg/ml	•
ENBREL – etanercept subcutaneous inj 25 mg/0.5ml	•
ENBREL – etanercept for subcutaneous inj kit 25 mg	•
ENBREL SURECLICK – etanercept subcutaneous inj 50 mg/ml	•
etodolac cap 200 mg	
etodolac cap 300 mg	
etodolac tab sr 24hr 400 mg	
etodolac tab sr 24hr 500 mg	
etodolac tab sr 24hr 600 mg	
etodolac tab 400 mg	
etodolac tab 500 mg	
flurbiprofen tab 100 mg	
flurbiprofen tab 50 mg	
HUMIRA – adalimumab inj kit 20 mg/0.4ml	•
HUMIRA – adalimumab inj kit 40 mg/0.8ml (50 mg/ml)	•
HUMIRA PEN – adalimumab inj kit 40 mg/0.8ml (50 mg/ml)	•
HUMIRA PEN-CROHNS DISEASE – adalimumab inj kit 40 mg/0.8ml (50 mg/ml)	•
HUMIRA PEN-PSORIASIS STAR – adalimumab inj kit 40 mg/0.8ml (50 mg/ml)	•
ibuprofen susp 100 mg/5ml	
ibuprofen tab 400 mg	
ibuprofen tab 600 mg	
ibuprofen tab 800 mg	
ILARIS – canakinumab for inj 180 mg	•
indomethacin cap 25 mg	
indomethacin cap 50 mg	
ketoprofen cap 50 mg	
ketoprofen cap 75 mg	
ketorolac tromethamine tab 10 mg	

Drug Name	Prior Approval
leflunomide tab 10 mg (Arava)	
leflunomide tab 20 mg (Arava)	
meloxicam tab 15 mg (Mobic)	
meloxicam tab 7.5 mg (Mobic)	
nabumetone tab 500 mg	
nabumetone tab 750 mg	
naproxen sodium tab 275 mg (Anaprox)	
naproxen sodium tab 550 mg (Anaprox ds)	
naproxen susp 125 mg/5ml (Naprosyn)	
naproxen tab ec 375 mg (Ec-naprosyn)	
naproxen tab ec 500 mg (Ec-naprosyn)	
naproxen tab 250 mg (Naprosyn)	
naproxen tab 375 mg (Naprosyn)	
naproxen tab 500 mg (Naprosyn)	
oxaprozin tab 600 mg (Daypro)	
piroxicam cap 10 mg (Feldene)	
piroxicam cap 20 mg (Feldene)	
RIDAURA – auranofin cap 3 mg	
sulindac tab 150 mg	
sulindac tab 200 mg	
MIGRAINE HEADACHES	
acetaminophen-isometheptene-dichloral cap 325-65-100 mg	
dihydroergotamine mesylate inj 1 mg/ml (D.h.e. 45)	
IMITREX – sumatriptan nasal spray 5 mg/act	
IMITREX – sumatriptan nasal spray 20 mg/act	
MIGRANAL – dihydroergotamine mesylate nasal spray 4 mg/ml	
naratriptan hcl tab 1 mg (base equiv) (Amerge)	
naratriptan hcl tab 2.5 mg (base equiv) (Amerge)	
rizatriptan benzoate orally disintegrating tab 10 mg (Maxalt-mlt)	
rizatriptan benzoate orally disintegrating tab 5 mg (Maxalt-mlt)	
rizatriptan benzoate tab 10 mg (Maxalt)	

Drug Name	Prior Approval
rizatriptan benzoate tab 5 mg (Maxalt)	
SUMATRIPTAN – sumatriptan nasal spray 5 mg/act	
SUMATRIPTAN – sumatriptan nasal spray 20 mg/act	
SUMATRIPTAN SUCCINATE – sumatriptan succinate solution prefilled syringe 6 mg/0.5ml	
SUMATRIPTAN SUCCINATE – sumatriptan succinate inj 4 mg/0.5ml	
sumatriptan succinate inj 4 mg/0.5ml	
sumatriptan succinate inj 6 mg/0.5ml (Imitrex)	
sumatriptan succinate solution auto-injector 4 mg/0.5ml (Imitrex statdose sys)	
sumatriptan succinate solution auto-injector 6 mg/0.5ml (Imitrex statdose sys)	
sumatriptan succinate solution cartridge 4 mg/0.5ml (Imitrex statdose ref)	
sumatriptan succinate solution cartridge 6 mg/0.5ml (Imitrex statdose ref)	
sumatriptan succinate solution prefilled syringe 6 mg/0.5ml	
sumatriptan succinate tab 100 mg (Imitrex)	
sumatriptan succinate tab 25 mg (Imitrex)	
sumatriptan succinate tab 50 mg (Imitrex)	
zolmitriptan orally disintegrating tab 2.5 mg (Zomig zmt)	
zolmitriptan orally disintegrating tab 5 mg (Zomig zmt)	
zolmitriptan tab 2.5 mg (Zomig)	
zolmitriptan tab 5 mg (Zomig)	
GOUT	
allopurinol tab 100 mg (Zyloprim)	
allopurinol tab 300 mg (Zyloprim)	
colchicine w/ probenecid tab 0.5-500 mg	
COLCRYS – colchicine tab 0.6 mg	
probenecid tab 500 mg	
NEUROMUSCULAR DRUGS	
SEIZURES	

Drug Name	Prior Approval
BANZEL – rufinamide tab 200 mg	•
BANZEL – rufinamide tab 400 mg	•
BANZEL – rufinamide susp 40 mg/ml	•
carbamazepine cap sr 12hr 100 mg (Carbatrol)	
carbamazepine cap sr 12hr 200 mg (Carbatrol)	
carbamazepine cap sr 12hr 300 mg (Carbatrol)	
carbamazepine chew tab 100 mg	
carbamazepine susp 100 mg/5ml (Tegretol)	
carbamazepine tab sr 12hr 200 mg (Tegretol-xr)	
carbamazepine tab sr 12hr 400 mg (Tegretol-xr)	
carbamazepine tab 200 mg (Tegretol)	
clonazepam orally disintegrating tab 0.125 mg	
clonazepam orally disintegrating tab 0.25 mg	
clonazepam orally disintegrating tab 0.5 mg	
clonazepam orally disintegrating tab 1 mg	
clonazepam orally disintegrating tab 2 mg	
clonazepam tab 0.5 mg (Klonopin)	
clonazepam tab 1 mg (Klonopin)	
clonazepam tab 2 mg (Klonopin)	
DIASTAT ACUDIAL – diazepam rectal gel delivery system 10 mg	
DIASTAT ACUDIAL – diazepam rectal gel delivery system 20 mg	
DIASTAT PEDIATRIC – diazepam rectal gel delivery system 2.5 mg	
DILANTIN – phenytoin susp 125 mg/5ml	
DILANTIN – phenytoin sodium extended cap 30 mg	
DILANTIN – phenytoin sodium extended cap 100 mg	
divalproex sodium cap sprinkle 125 mg (Depakote sprinkles)	
divalproex sodium tab delayed release 125 mg (Depakote)	
divalproex sodium tab delayed release 250 mg (Depakote)	
divalproex sodium tab delayed release 500 mg (Depakote)	
divalproex sodium tab sr 24 hr 250 mg (Depakote er)	
divalproex sodium tab sr 24 hr 500 mg (Depakote er)	
ethosuximide cap 250 mg (Zarontin)	
ethosuximide soln 250 mg/5ml (Zarontin)	
felbamate susp 600 mg/5ml (Felbatol)	
felbamate tab 400 mg (Felbatol)	
felbamate tab 600 mg (Felbatol)	
gabapentin cap 100 mg (Neurontin)	
gabapentin cap 300 mg (Neurontin)	
gabapentin cap 400 mg (Neurontin)	
gabapentin oral soln 250 mg/5ml (Neurontin)	
gabapentin tab 600 mg (Neurontin)	
gabapentin tab 800 mg (Neurontin)	
lamotrigine tab chewable dispersible 25 mg (Lamictal chewable di)	
lamotrigine tab chewable dispersible 5 mg (Lamictal chewable di)	
lamotrigine tab 100 mg (Lamictal)	
lamotrigine tab 150 mg (Lamictal)	
lamotrigine tab 200 mg (Lamictal)	
lamotrigine tab 25 mg (Lamictal)	
levetiracetam oral soln 100 mg/ml (Keppra)	
levetiracetam tab sr 24hr 500 mg (Keppra xr)	
levetiracetam tab sr 24hr 750 mg (Keppra xr)	
levetiracetam tab 1000 mg (Keppra)	
levetiracetam tab 250 mg (Keppra)	
levetiracetam tab 500 mg (Keppra)	
levetiracetam tab 750 mg (Keppra)	
oxcarbazepine susp 300 mg/5ml (60 mg/ml) (Trileptal)	
oxcarbazepine tab 150 mg (Trileptal)	
oxcarbazepine tab 300 mg (Trileptal)	
oxcarbazepine tab 600 mg (Trileptal)	
phenytoin chew tab 50 mg (Dilantin infatabs)	

Drug Name	Prior Approval
phenytoin sodium extended cap 100 mg (Dilantin)	
phenytoin sodium extended cap 200 mg (Phenytek)	
phenytoin sodium extended cap 300 mg (Phenytek)	
phenytoin susp 125 mg/5ml (Dilantin)	
primidone tab 250 mg (Mysoline)	
primidone tab 50 mg (Mysoline)	
SABRIL – vigabatrin tab 500 mg	
SABRIL – vigabatrin powd pack 500 mg	
TEGRETOL-XR – carbamazepine tab sr 12hr 100 mg	
topiramate sprinkle cap 15 mg (Topamax sprinkle)	
topiramate sprinkle cap 25 mg (Topamax sprinkle)	
topiramate tab 100 mg (Topamax)	
topiramate tab 200 mg (Topamax)	
topiramate tab 25 mg (Topamax)	
topiramate tab 50 mg (Topamax)	
valproate sodium syrup 250 mg/5ml (base equiv) (Depakene)	
valproic acid cap 250 mg (Depakene)	
zonisamide cap 100 mg (Zonegran)	
zonisamide cap 25 mg (Zonegran)	
zonisamide cap 50 mg	
PARKINSON'S DISEASE	
benztropine mesylate tab 0.5 mg	
benztropine mesylate tab 1 mg	
benztropine mesylate tab 2 mg	
bromocriptine mesylate cap 5 mg (Parlodel)	
bromocriptine mesylate tab 2.5 mg (Parlodel)	
carbidopa & levodopa orally disintegrating tab 10-100 mg	
carbidopa & levodopa orally disintegrating tab 25-100 mg	
carbidopa & levodopa orally disintegrating tab 25-250 mg	

Drug Name	Prior Approval
carbidopa & levodopa tab cr 25-100 mg (Sinemet cr)	
carbidopa & levodopa tab cr 50-200 mg (Sinemet cr)	
carbidopa & levodopa tab 10-100 mg (Sinemet)	
carbidopa & levodopa tab 25-100 mg (Sinemet)	
carbidopa & levodopa tab 25-250 mg (Sinemet)	
CARBIDOPA/LEVODOPA/ENTACA – carbidopa-levodopa-entacapone tabs 12.5-50-200 mg	
CARBIDOPA/LEVODOPA/ENTACA – carbidopa-levodopa-entacapone tabs 18.75-75-200 mg	
CARBIDOPA/LEVODOPA/ENTACA – carbidopa-levodopa-entacapone tabs 25-100-200 mg	
CARBIDOPA/LEVODOPA/ENTACA – carbidopa-levodopa-entacapone tabs 31.25-125-200 mg	
CARBIDOPA/LEVODOPA/ENTACA – carbidopa-levodopa-entacapone tabs 37.5-150-200 mg	
CARBIDOPA/LEVODOPA/ENTACA – carbidopa-levodopa-entacapone tabs 50-200-200 mg	
entacapone tab 200 mg (Comtan)	
pramipexole dihydrochloride tab 0.125 mg (Mirapex)	
pramipexole dihydrochloride tab 0.25 mg (Mirapex)	
pramipexole dihydrochloride tab 0.5 mg (Mirapex)	
pramipexole dihydrochloride tab 0.75 mg (Mirapex)	
pramipexole dihydrochloride tab 1 mg (Mirapex)	
pramipexole dihydrochloride tab 1.5 mg (Mirapex)	
ropinirole hydrochloride tab 0.25 mg (Requip)	
ropinirole hydrochloride tab 0.5 mg (Requip)	
ropinirole hydrochloride tab 1 mg (Requip)	
ropinirole hydrochloride tab 2 mg (Requip)	
ropinirole hydrochloride tab 3 mg (Requip)	
ropinirole hydrochloride tab 4 mg (Requip)	
ropinirole hydrochloride tab 5 mg (Requip)	
selegiline hcl cap 5 mg (Eldepryl)	
selegiline hcl tab 5 mg	

Drug Name	Prior Approval
trihexyphenidyl hcl elixir 0.4 mg/ml	
trihexyphenidyl hcl tab 2 mg	
trihexyphenidyl hcl tab 5 mg	
MUSCLE RELAXANTS	
baclofen tab 10 mg	
baclofen tab 20 mg	
chlorzoxazone tab 500 mg (Parafon forte dsc)	
cyclobenzaprine hcl tab 10 mg	
cyclobenzaprine hcl tab 5 mg	
dantrolene sodium cap 100 mg (Dantrium)	
dantrolene sodium cap 25 mg (Dantrium)	
dantrolene sodium cap 50 mg (Dantrium)	
methocarbamol tab 500 mg (Robaxin)	
methocarbamol tab 750 mg (Robaxin-750)	
orphenadrine citrate tab sr 12hr 100 mg	
ORPHENADRINE COMPOUND DS – orphenadrine w/ aspirin & caffeine tab 50-770-60 mg	
orphenadrine w/ aspirin & caffeine tab 25-385-30 mg	
OTHER NEUROMUSCULAR DRUGS	
MESTINON – pyridostigmine bromide syrup 60 mg/5ml	
MESTINON TIMESPAN – pyridostigmine bromide tab cr 180 mg	
pyridostigmine bromide tab 60 mg (Mestinon)	
riluzole tab 50 mg (Rilutek)	
VITAMINS	
ergocalciferol cap 50000 unit (Drisdol)	
MEPHYTON – phytonadione tab 5 mg	
phytonadione inj 1 mg/0.5ml (2 mg/ml)	
VITAMIN K1 – phytonadione inj 10 mg/ml	
MULTIVITAMINS	
pediatric multivitamins	
pediatric vitamins ADC	
PRENAFIRST – prenatal vit w/ fe fumarate-fa tab 17-1 mg	

Drug Name	Prior Approval
PRENAPLUS – prenatal vit w/ fe fumarate-fa tab 27-1 mg	
PRENATABS FA – prenatal vit w/ fe fumarate-fa tab 29-1 mg	
PRENATABS OBN – prenatal w/o a vit w/ fe carbonyl-fa tab 29-1 mg	
PRENATABS RX – prenatal vit w/ iron carbonyl-fa tab 29-1 mg	
PRENATAL AD – prenatal vit w/ dss-iron carbonyl-fa tab 90-1 mg	
PRENATAL PLUS – prenatal vit w/ fe fumarate-fa tab 27-1 mg	
PRENATAL VITAMINS PLUS – prenatal vit w/ fe fumarate-fa tab 27-1 mg	
PRENATAL 19 – prenatal vit w/ fe fumarate-fa chew tab 29-1 mg	
PRENATAL 19 – prenatal vit w/ dss-fe fumarate-fa tab 29-1 mg	
PRENATAL-U – prenatal w/o a vit w/ fe fumarate-fa cap 106.5-1 mg	
QUFLORA PEDIATRIC – pediatric multiple vitamins w/ fluoride chew tab 0.25 mg	
TRI-VIT/FLUORIDE/IRON – pediatric vitamins acd fluoride & fe drops 0.25-10 mg/ml	
TRINATE – prenatal vit w/ fe fumarate-fa tab 28-1 mg	
VINACAL – prenatal w/o a w/ fe carbonyl-fe gluc-dss-fa tab 27-1mg	
VINACAL B – prenat w/o a w/fecbn-feglu-fa tab 20-1 mg & vit b6 tab pak	
VINATE AZ – prenatal vit w/ fe bisglycinate chelate-fa tab 27-1 mg	
VINATE AZ EXTRA – prenatal vit w/ fe bisglycinate chelate-fa tab 29-1 mg	
VINATE C – prenatal w/o a vit w/ fe fumarate-fa tab 30-1 mg	
VINATE CALCIUM – prenatal vit w/ iron carbonyl-fe gluc-fa tab 27-1 mg	
VINATE CARE – prenatal w/o a vit w/ fe fum-fa tab chew 40-1 mg	

Drug Name	Prior Approval
VINATE DHA – prenat w/o a w/fefum-methylfol-fa-omegas cap 27-1.53 mg	
VINATE DHA RF – prenat w/o a w/fefum-methylfol-omegas cap 27-1.13 mg	
VINATE GT – prenatal vit w/ dss-iron carbonyl-fa tab 90-1 mg	
VINATE IC – prenatal w/o a w/fe fum-fe poly-fa cap 162.115.2-1 mg	
VINATE II – prenatal vit w/ fe bisglycinate chelate-fa tab 29-1 mg	
VINATE M – prenatal vit w/ sel-fe fumarate-fa tab 27-1 mg	
VINATE ONE – prenatal vit w/ fe fumarate-fa tab 60-1 mg	
VINATE PN CARE – prenatal without a w/ fe asparto gly-doc-fa tab 30-1mg	
VINATE ULTRA – prenatal vit w/ dss-iron carbonyl-fa tab 90-1 mg	
MINERALS AND ELECTROLYTES	
FLUOR-A-DAY – sodium fluoride-xylitol chew tab 0.55 (0.25 mg f)-236.79 mg	
FLUOR-A-DAY – sodium fluoride-xylitol chew tab 1.1 (0.5 mg f)-236.79 mg	
FLUOR-A-DAY – sodium fluoride-xylitol chew tab 2.2 (1 mg f)-236.79 mg	
FLURA-DROPS – sodium fluoride soln 0.25 mg/drop f (from 0.55 mg/drop naf)	
K-PHOS – potassium phosphate monobasic tab 500 mg	
pot phos monobasic w/sod phos di & monobas tab 155-852-130mg (K-phos neutral)	
potassium bicarbonate effer tab 25 meq	
potassium chloride cap cr 10 meq (Micro-k)	
potassium chloride cap cr 8 meq (Micro-k)	
potassium chloride microencapsulated crys cr tab 10 meq	
potassium chloride microencapsulated crys cr tab 20 meq	
potassium chloride oral liq 10% (20 meq/15ml)	

Drug Name	Prior Approval
potassium chloride oral liq 20% (40 meq/15ml)	
potassium chloride powder packet 20 meq	
potassium chloride tab cr 10 meq (K-tab)	
potassium chloride tab cr 8 meq (600 mg)	
SODIUM FLUORIDE – sodium fluoride tab 0.5 mg f (from 1.1 mg naf)	
SODIUM FLUORIDE – sodium fluoride tab 1 mg f (from 2.2 mg naf)	
sodium fluoride chew tab 0.25 mg f (from 0.55 mg naf) (Luride)	
sodium fluoride chew tab 0.5 mg f (from 1.1 mg naf) (Luride)	
sodium fluoride chew tab 1 mg f (from 2.2 mg naf) (Luride)	
sodium fluoride soln 0.125 mg/drop f (0.275 mg/drop naf)	
sodium fluoride soln 0.5 mg/ml f (from 1.1 mg/ml naf) (Luride)	
BLOOD MODIFYING DRUGS	
AGGRENOX – aspirin-dipyridamole cap sr 12hr 25-200 mg	
aminocaproic acid syrup 25% (Amicar)	
aminocaproic acid tab 500 mg (Amicar)	
anagrelide hcl cap 0.5 mg (Agrylin)	
anagrelide hcl cap 1 mg	
ARANESP ALBUMIN FREE – darbepoetin alfa-polysorbate 80 soln inj 25 mcg/ml	
ARANESP ALBUMIN FREE – darbepoetin alfa-polysorbate 80 soln inj 25 mcg/0.42ml	
ARANESP ALBUMIN FREE – darbepoetin alfa-polysorbate 80 soln inj 40 mcg/ml	
ARANESP ALBUMIN FREE – darbepoetin alfa-polysorbate 80 soln inj 40 mcg/0.4ml	
ARANESP ALBUMIN FREE – darbepoetin alfa-polysorbate 80 soln inj 60 mcg/ml	
ARANESP ALBUMIN FREE – darbepoetin alfa-polysorbate 80 soln inj 60 mcg/0.3ml	
ARANESP ALBUMIN FREE – darbepoetin alfa-polysorbate 80 soln inj 100 mcg/ml	

Drug Name	Prior Approval
ARANESP ALBUMIN FREE – darbepoetin alfa-polysorbate 80 soln inj 100 mcg/0.5ml	
ARANESP ALBUMIN FREE – darbepoetin alfa-polysorbate 80 soln inj 150 mcg/0.75ml	
ARANESP ALBUMIN FREE – darbepoetin alfa-polysorbate 80 soln inj 150 mcg/0.3ml	
ARANESP ALBUMIN FREE – darbepoetin alfa-polysorbate 80 soln inj 200 mcg/ml	
ARANESP ALBUMIN FREE – darbepoetin alfa-polysorbate 80 soln inj 200 mcg/0.4ml	
ARANESP ALBUMIN FREE – darbepoetin alfa-polysorbate 80 soln inj 300 mcg/ml	
ARANESP ALBUMIN FREE – darbepoetin alfa-polysorbate 80 soln inj 300 mcg/0.6ml	
ARANESP ALBUMIN FREE – darbepoetin alfa-polysorbate 80 soln inj 500 mcg/ml	
cilostazol tab 100 mg (Pletal)	
cilostazol tab 50 mg (Pletal)	
clopidogrel bisulfate tab 300 mg (base equiv) (Plavix)	
clopidogrel bisulfate tab 75 mg (base equiv) (Plavix)	
cyanocobalamin inj 1000 mcg/ml	
dipyridamole tab 25 mg (Persantine)	
dipyridamole tab 50 mg (Persantine)	
dipyridamole tab 75 mg (Persantine)	
EFFIENT – prasugrel hcl tab 5 mg (base equiv)	
EFFIENT – prasugrel hcl tab 10 mg (base equiv)	
enoxaparin sodium inj 100 mg/ml (Lovenox)	
enoxaparin sodium inj 120 mg/0.8ml (Lovenox)	
enoxaparin sodium inj 150 mg/ml (Lovenox)	
enoxaparin sodium inj 30 mg/0.3ml (Lovenox)	
enoxaparin sodium inj 300 mg/3ml (Lovenox)	
enoxaparin sodium inj 40 mg/0.4ml (Lovenox)	
enoxaparin sodium inj 60 mg/0.6ml (Lovenox)	
enoxaparin sodium inj 80 mg/0.8ml (Lovenox)	
FIRAZYR – icatibant acetate inj 30 mg/3ml (base equivalent)	

Drug Name	Prior Approval
folic acid tab 1 mg	
fondaparinux sodium inj 10 mg/0.8ml (Arixtra)	
fondaparinux sodium inj 2.5 mg/0.5ml (Arixtra)	
fondaparinux sodium inj 5 mg/0.4ml (Arixtra)	
fondaparinux sodium inj 7.5 mg/0.6ml (Arixtra)	
GRANIX – tbo-filgrastim soln prefilled syringe 300 mcg/0.5ml	
GRANIX – tbo-filgrastim soln prefilled syringe 480 mcg/0.8ml	
LEUKINE – sargramostim inj 500 mcg/ml	
NEULASTA – pegfilgrastim inj 6 mg/0.6ml	
NEUMEGA – oprelvekin for inj 5 mg	
NEUPOGEN – filgrastim inj 300 mcg/ml	
NEUPOGEN – filgrastim inj 480 mcg/1.6ml (300 mcg/ml)	
NEUPOGEN – filgrastim inj 300 mcg/0.5ml (600 mcg/ml)	
NEUPOGEN – filgrastim inj 480 mcg/0.8ml (600 mcg/ml)	
NPLATE – romiplostim for inj 250 mcg	•
NPLATE – romiplostim for inj 500 mcg	•
pentoxifylline tab cr 400 mg	
PROCRIT – epoetin alfa inj 2000 unit/ml	
PROCRIT – epoetin alfa inj 3000 unit/ml	
PROCRIT – epoetin alfa inj 4000 unit/ml	
PROCRIT – epoetin alfa inj 10000 unit/ml	
PROCRIT – epoetin alfa inj 20000 unit/ml	
PROCRIT – epoetin alfa inj 40000 unit/ml	
PROMACTA – eltrombopag olamine tab 12.5 mg (base equiv)	•
PROMACTA – eltrombopag olamine tab 25 mg (base equiv)	•
PROMACTA – eltrombopag olamine tab 50 mg (base equiv)	•
PROMACTA – eltrombopag olamine tab 75 mg (base equiv)	•
warfarin sodium tab 1 mg (Coumadin)	

Drug Name	Prior Approval
warfarin sodium tab 10 mg (Coumadin)	
warfarin sodium tab 2 mg (Coumadin)	
warfarin sodium tab 2.5 mg (Coumadin)	
warfarin sodium tab 3 mg (Coumadin)	
warfarin sodium tab 4 mg (Coumadin)	
warfarin sodium tab 5 mg (Coumadin)	
warfarin sodium tab 6 mg (Coumadin)	
warfarin sodium tab 7.5 mg (Coumadin)	
XARELTO – rivaroxaban tab 10 mg	
XARELTO – rivaroxaban tab 15 mg	
XARELTO – rivaroxaban tab 20 mg	
TOPICAL PRODUCTS	
EYE	
Anti-infectives	
BACITRACIN – bacitracin ophth oint 500 unit/gm	
bacitracin-polymyxin b ophth oint	
CILOXAN – ciprofloxacin hcl ophth oint 0.3%	
ciprofloxacin hcl ophth soln 0.3% (Ciloxan)	
erythromycin ophth oint 5 mg/gm	
gentamicin sulfate ophth oint 0.3%	
gentamicin sulfate ophth soln 0.3% (Garamycin)	
NATACYN – natamycin ophth susp 5%	
neomycin-bacitrac zn-polymyx 5(3.5)mg-400unt-10000unt op oin	
neomycin-polymy-gramicid op sol 1.75-10000-0.025mg-unt-mg/ml (Neosporin)	
ofloxacin ophth soln 0.3% (Ocuflox)	
polymyxin b-trimethoprim ophth soln 10000 unit/ml-0.1% (Polytrim)	
sulfacetamide sodium ophth soln 10% (Bleph-10)	
tobramycin ophth soln 0.3% (Tobrex)	
trifluridine ophth soln 1% (Viroptic)	
VIGAMOX – moxifloxacin hcl ophth soln 0.5% (base equiv)	
Steroids and Combination Products	
ALREX – loteprednol etabonate ophth susp 0.2%	

Drug Name	Prior Approval
bacitracin-polymyxin-neomycin-hc ophth oint 1%	
BLEPHAMIDE – sulfacetamide sodium-prednisolone ophth susp 10-0.2%	
BLEPHAMIDE S.O.P. – sulfacetamide sodium-prednisolone ophth oint 10-0.2%	
fluorometholone ophth susp 0.1% (Fml liquifilm)	
FML – fluorometholone ophth oint 0.1%	
LOTEMAX – loteprednol etabonate ophth susp 0.5%	
LOTEMAX – loteprednol etabonate ophth gel 0.5%	
LOTEMAX – loteprednol etabonate ophth oint 0.5%	
neomycin-polymyxin-dexamethasone ophth oint 0.1% (Maxitrol)	
neomycin-polymyxin-dexamethasone ophth susp 0.1% (Maxitrol)	
prednisolone acetate ophth susp 1% (Pred forte)	
PREDNISOLONE SODIUM PHOSP – prednisolone sodium phosphate ophth soln 1%	
sulfacetamide sodium-prednisolone ophth soln 10-0.23(0.25)%	
TOBRADEX – tobramycin-dexamethasone ophth oint 0.3-0.1%	
tobramycin-dexamethasone ophth susp 0.3-0.1% (Tobradex)	
ZYLET – loteprednol etabonate-tobramycin ophth susp 0.5-0.3%	
Glaucoma	
ALPHAGAN P – brimonidine tartrate ophth soln 0.1%	
AZOPT – brinzolamide ophth susp 1%	
BETOPTIC-S – betaxolol hcl ophth susp 0.25%	
brimonidine tartrate ophth soln 0.15% (Alphagan p)	
brimonidine tartrate ophth soln 0.2%	
carteolol hcl ophth soln 1%	
dorzolamide hcl ophth soln 2% (Trusopt)	
dorzolamide hcl-timolol maleate ophth soln 22.3-6.8 mg/ml (Cosopt)	
latanoprost ophth soln 0.005% (Xalatan)	

Drug Name	Prior Approval
LEVOBUNOLOL HCL – levobunolol hcl ophth soln 0.25%	
levobunolol hcl ophth soln 0.5% (Betagan)	
LUMIGAN – bimatoprost ophth soln 0.01%	
LUMIGAN – bimatoprost ophth soln 0.03%	
METIPRANOLOL – metipranolol ophth soln 0.3%	
pilocarpine hcl ophth soln 1% (Isopto carpine)	
pilocarpine hcl ophth soln 2% (Isopto carpine)	
pilocarpine hcl ophth soln 4% (Isopto carpine)	
SIMBRINZA – brinzolamide-brimonidine tartrate ophth susp 1-0.2%	
timolol maleate ophth gel forming soln 0.25% (Timoptic-xe)	
timolol maleate ophth gel forming soln 0.5% (Timoptic-xe)	
timolol maleate ophth soln 0.25% (Timoptic)	
timolol maleate ophth soln 0.5% (Timoptic)	
TRAVATAN Z – travoprost ophth soln 0.004% (benzalkonium free) (bak free)	
Other Eye Products	
ATROPINE SULFATE – atropine sulfate ophth oint 1%	
atropine sulfate ophth soln 1% (Isopto atropine)	
azelastine hcl ophth soln 0.05% (Optivar)	
cromolyn sodium ophth soln 4%	
cyclopentolate hcl ophth soln 1% (Cyclogyl)	
diclofenac sodium ophth soln 0.1%	
flurbiprofen sodium ophth soln 0.03% (Ocufen)	
homatropine hbr ophth soln 5% (Isopto homatropine)	
ketorolac tromethamine ophth soln 0.4% (Acular ls)	
ketorolac tromethamine ophth soln 0.5% (Acular)	
PATADAY – olopatadine hcl ophth soln 0.2%	
EAR	
acetic acid otic soln 2%	
antipyrine-benzocaine otic soln 54-14 mg/ml (5.4-1.4%)	
CIPRO HC – ciprofloxacin-hydrocortisone otic susp 0.2-1%	
CIPRODEX – ciprofloxacin-dexamethasone otic susp 0.3-0.1%	
neomycin-polymyxin-hc otic soln 1% (Cortisporin)	
neomycin-polymyxin-hc otic susp 3.5 mg/ml-10000 unit/ml-1%	
ofloxacin otic soln 0.3%	
MOUTH AND THROAT (LOCAL)	
chlorhexidine gluconate soln 0.12% (Peridex)	
lidocaine hcl viscous soln 2%	
nystatin susp 100000 unit/ml	
pilocarpine hcl tab 5 mg (Salagen)	
pilocarpine hcl tab 7.5 mg (Salagen)	
sodium fluoride cream 1.1% (Prevident 5000 plus)	
sodium fluoride gel 1.1% (0.5% f) (Prevident fluoride)	
triamcinolone acetonide dental paste 0.1%	
ANORECTAL	
hydrocortisone acetate suppos 25 mg (Anusol-hc)	
hydrocortisone enema 100 mg/60ml (Cortenema)	
hydrocortisone rectal cream 2.5% (Anusol-hc)	
SKIN CONDITIONS/PRODUCTS	
Acne	
adapalene cream 0.1% (Differin)	•
adapalene gel 0.1% (Differin)	•
benzoyl peroxide-erythromycin gel 5-3% (Benzamycin)	
CLARAVIS – isotretinoin cap 30 mg	
clindamycin phosphate gel 1% (Cleocin-t)	
clindamycin phosphate lotion 1% (Cleocin-t)	
clindamycin phosphate soln 1% (Cleocin-t)	
clindamycin phosphate swab 1% (Cleocin-t)	
clindamycin phosphate-benzoyl peroxide gel 1-5% (Benzaclin)	

Drug Name	Prior Approval
erythromycin gel 2% (Erygel)	
erythromycin pads 2%	
erythromycin soln 2%	
FINACEA – azelaic acid gel 15%	
isotretinoin cap 10 mg	
isotretinoin cap 20 mg	
isotretinoin cap 40 mg	
metronidazole cream 0.75% (Metrocream)	
metronidazole gel 0.75%	
metronidazole gel 1% (Metrogel)	
metronidazole lotion 0.75% (Metrolotion)	
SODIUM SULFACETAMIDE/SULF – sulfacetamide sodium w/ sulfur susp 10-5%	
sulfacetamide sodium lotion 10% (acne) (Klaron)	
sulfacetamide sodium w/ sulfur cream 10-5%	
sulfacetamide sodium w/ sulfur emulsion 10-5%	
sulfacetamide sodium w/ sulfur lotion 10-5%	
TAZORAC – tazarotene cream 0.05%	•
TAZORAC – tazarotene cream 0.1%	•
TAZORAC – tazarotene gel 0.05%	•
TAZORAC – tazarotene gel 0.1%	•
tretinoin cream 0.025% (Retin-a)	•
tretinoin cream 0.05% (Retin-a)	•
tretinoin cream 0.1% (Retin-a)	•
tretinoin gel 0.01% (Retin-a)	•
tretinoin gel 0.025% (Retin-a)	•
tretinoin microsphere gel 0.04% (Retin-a micro)	•
tretinoin microsphere gel 0.1% (Retin-a micro)	•
Anti-infectives	
ciclopirox gel 0.77% (Loprox)	
ciclopirox olamine cream 0.77% (base equiv)	
ciclopirox olamine susp 0.77% (base equiv)	
ciclopirox shampoo 1% (Loprox shampoo)	
clotrimazole w/ betamethasone cream 1-0.05% (Lotrisone)	
clotrimazole w/ betamethasone lotion 1-0.05%	
econazole nitrate cream 1%	
GENTAMICIN SULFATE – gentamicin sulfate cream 0.1%	
GENTAMICIN SULFATE – gentamicin sulfate oint 0.1%	
ketoconazole cream 2%	
ketoconazole shampoo 2% (Nizoral)	
mupirocin calcium cream 2% (Bactroban)	
mupirocin oint 2% (Bactroban)	
nystatin cream 100000 unit/gm	
nystatin oint 100000 unit/gm	
nystatin topical powder	
silver sulfadiazine cream 1% (Silvadene)	
VOLTAREN – diclofenac sodium gel 1%	
Corticosteroids	
alclometasone dipropionate cream 0.05% (Aclovate)	
alclometasone dipropionate oint 0.05%	
amcinonide cream 0.1%	
betamethasone dipropionate augmented cream 0.05% (Diprolene af)	
betamethasone dipropionate augmented gel 0.05%	
betamethasone dipropionate augmented lotion 0.05% (Diprolene)	
betamethasone dipropionate augmented oint 0.05% (Diprolene)	
betamethasone dipropionate cream 0.05%	
betamethasone dipropionate lotion 0.05%	
betamethasone dipropionate oint 0.05%	
betamethasone valerate cream 0.1%	
betamethasone valerate lotion 0.1%	
betamethasone valerate oint 0.1%	
clobetasol propionate cream 0.05% (Temovate)	
clobetasol propionate emollient base cream 0.05% (Temovate e)	

Drug Name	Prior Approval
clobetasol propionate foam 0.05% (Olux)	
clobetasol propionate gel 0.05% (Temovate)	
clobetasol propionate oint 0.05% (Temovate)	
clobetasol propionate soln 0.05% (Temovate)	
desonide cream 0.05% (Desowen)	
desonide lotion 0.05% (Desowen)	
desonide oint 0.05% (Desowen)	
DESOXIMETASONE – desoximetasone cream 0.05%	
desoximetasone cream 0.25% (Topicort)	
desoximetasone gel 0.05% (Topicort)	
desoximetasone oint 0.25% (Topicort)	
DIFLORASONE DIACETATE – diflorasone diacetate cream 0.05%	
diflorasone diacetate oint 0.05%	
fluocinolone acetonide cream 0.01%	
fluocinolone acetonide cream 0.025% (Synalar)	
fluocinolone acetonide oint 0.025% (Synalar)	
fluocinolone acetonide soln 0.01% (Synalar)	
fluocinonide cream 0.05%	
fluocinonide emulsified base cream 0.05%	
fluocinonide gel 0.05%	
fluocinonide oint 0.05%	
fluocinonide soln 0.05%	
fluticasone propionate cream 0.05% (Cutivate)	
fluticasone propionate oint 0.005% (Cutivate)	
halobetasol propionate cream 0.05% (Ultravate)	
halobetasol propionate oint 0.05% (Ultravate)	
hydrocortisone cream 2.5%	
hydrocortisone lotion 2.5%	
hydrocortisone oint 2.5%	
hydrocortisone valerate cream 0.2%	
hydrocortisone valerate oint 0.2% (Westcort)	
mometasone furoate cream 0.1% (Elocon)	
mometasone furoate oint 0.1% (Elocon)	

Drug Name	Prior Approval
mometasone furoate solution 0.1% (lotion) (Elocon)	
nystatin-triamcinolone cream 100000-0.1 unit/gm-%	
nystatin-triamcinolone oint 100000-0.1 unit/gm-%	
TRIAMCINOLONE ACETONIDE – triamcinolone acetonide oint 0.5%	
triamcinolone acetonide cream 0.025%	
triamcinolone acetonide cream 0.1%	
triamcinolone acetonide cream 0.5%	
triamcinolone acetonide lotion 0.025%	
triamcinolone acetonide lotion 0.1%	
triamcinolone acetonide oint 0.025%	
triamcinolone acetonide oint 0.1%	
Other Products	
acitretin cap 10 mg (Soriatane)	
acitretin cap 17.5 mg (Soriatane)	
acitretin cap 25 mg (Soriatane)	
aluminum chloride soln 20% (Drysol)	
calcipotriene cream 0.005% (Dovonex)	
calcipotriene soln 0.005% (50 mcg/ml)	
CARAC – fluorouracil cream 0.5%	
diclofenac sodium (actinic keratoses) gel 3% (Solaraze)	
ELIDEL – pimecrolimus cream 1%	
FLUOROPLEX – fluorouracil cream 1%	
fluorouracil cream 5% (Efudex)	
fluorouracil soln 2%	
fluorouracil soln 5%	
imiquimod cream 5% (Aldara)	
lidocaine-prilocaine cream 2.5-2.5% (Emla)	
LIDOCAINE/PRILOCAINE – lidocaine-prilocaine kit 2.5-2.5%	
lindane lotion 1%	
lindane shampoo 1%	
malathion lotion 0.5% (Ovide)	

Drug Name	Prior Approval
OXSORALEN ULTRA – methoxsalen rapid cap 10 mg	
permethrin cream 5% (Elimite)	
PICATO – ingenol mebutate gel 0.015%	
PICATO – ingenol mebutate gel 0.05%	
podofilox soln 0.5% (Condylox)	
PROTOPIC – tacrolimus oint 0.03%	
PROTOPIC – tacrolimus oint 0.1%	
selenium sulfide lotion 2.5%	
SYNERA – lidocaine-tetracaine topical patch 70-70 mg	
ULESFIA – benzyl alcohol lotion 5%	
VALCHLOR – mechlorethamine hcl gel 0.016% (base equivalent)	
XERAC AC – aluminum chloride in alcohol solution 6.25%	
ZYCLARA – imiquimod cream 3.75%	
ZYCLARA PUMP – imiquimod cream 2.5%	
ZYCLARA PUMP – imiquimod cream 3.75%	
MISCELLANEOUS CATEGORIES	
DIABETIC SUPPLIES	
CALIBRATION LIQUID – various	
INSULIN PEN NEEDLES – NOVOFINE, NOVOTWIST; various	
INSULIN SYRINGES – various	
LANCETS – various	
TEST STRIPS – LIFESCAN ONETOUCH BASIC/ PROFILE, BASIC/PROFILE/ONETOUCH II, FASTTAKE, SURESTEP, ULTRA BLUE, VERIO, VERIO IQ	
TEST STRIPS – ROCHE ACCU-CHEK ACTIVE, AVIVA, AVIVA PLUS, COMFORT CURVE, COMPACT, COMPACT PLUS, SMARTVIEW	
TEST STRIPS – various	
MEDICAL DEVICES	
INHALER ASSIST DEVICES – spacers	
MISCELLANEOUS DRUGS	

Drug Name	Prior Approval
azathioprine tab 50 mg (Imuran)	
CELLCEPT – mycophenolate mofetil for oral susp 200 mg/ml	
CHEMET – succimer cap 100 mg	
CUPRIMINE – penicillamine cap 250 mg	
cyclosporine cap 100 mg (Sandimmune)	
cyclosporine cap 25 mg (Sandimmune)	
cyclosporine modified cap 100 mg (Neoral)	
cyclosporine modified cap 25 mg (Neoral)	
cyclosporine modified oral soln 100 mg/ml (Neoral)	
EXJADE – deferasirox tab for oral susp 125 mg	
EXJADE – deferasirox tab for oral susp 250 mg	
EXJADE – deferasirox tab for oral susp 500 mg	
mycophenolate mofetil cap 250 mg (Cellcept)	
mycophenolate mofetil tab 500 mg (Cellcept)	
mycophenolate sodium tab dr 180 mg (mycophenolic acid equiv) (Myfortic)	
mycophenolate sodium tab dr 360 mg (mycophenolic acid equiv) (Myfortic)	
naltrexone hcl tab 50 mg (Revia)	
RAPAMUNE – sirolimus tab 1 mg	
RAPAMUNE – sirolimus tab 2 mg	
RAPAMUNE – sirolimus oral soln 1 mg/ml	
REVLIMID – lenalidomide caps 2.5 mg	•
REVLIMID – lenalidomide cap 5 mg	•
REVLIMID – lenalidomide cap 10 mg	•
REVLIMID – lenalidomide cap 15 mg	•
REVLIMID – lenalidomide cap 20 mg	•
REVLIMID – lenalidomide cap 25 mg	•
sirolimus tab 0.5 mg (Rapamune)	
sodium polystyrene sulfonate oral susp 15 gm/60ml (Sps)	
sodium polystyrene sulfonate powder (Kayexalate)	
sodium polystyrene sulfonate rectal susp 30 gm/120ml	

Drug Name	Prior Approval
tacrolimus cap 0.5 mg (Prograf)	
tacrolimus cap 1 mg (Prograf)	
tacrolimus cap 5 mg (Prograf)	
THALOMID – thalidomide cap 50 mg	•
THALOMID – thalidomide cap 100 mg	•
THALOMID – thalidomide cap 150 mg	•
THALOMID – thalidomide cap 200 mg	•
ZORTRESS – everolimus tab 0.25 mg	
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ZORTRESS – everolimus tab 0.75 mg	

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albuterol sulfate tab sr 12hr 4 mg (Vospire er)....23
albuterol sulfate tab sr 12hr 8 mg (Vospire er)....23
alclometasone dipropionate cream 0.05% (Aclovate)....44
alclometasone dipropionate oint 0.05%....44
ALENDRONATE SODIUM – alendronate sodium tab 40 mg....14
alendronate sodium tab 10 mg....14
alendronate sodium tab 35 mg....14
alendronate sodium tab 5 mg....14
alendronate sodium tab 70 mg (Fosamax)....14
alfuzosin hcl tab sr 24hr 10 mg (Uroxatral)....26
ALINIA – nitazoxanide for susp 100 mg/5ml....6
ALINIA – nitazoxanide tab 500 mg....6
ALKERAN – melphalan tab 2 mg....6
allopurinol tab 100 mg (Zyloprim)....36
allopurinol tab 300 mg (Zyloprim)....36
ALPHAGAN P – brimonidine tartrate ophth soln 0.1%....42
ALPRAZOLAM INTENSOL – alprazolam conc 1 mg/ml....27
alprazolam tab 0.25 mg (Xanax)....27
alprazolam tab 0.5 mg (Xanax)....27
alprazolam tab 1 mg (Xanax)....27
alprazolam tab 2 mg (Xanax)....27
alprazolam tab sr 24hr 0.5 mg (Xanax xr)....27
alprazolam tab sr 24hr 1 mg (Xanax xr)....27
alprazolam tab sr 24hr 2 mg (Xanax xr)....27
alprazolam tab sr 24hr 3 mg (Xanax xr)....27
ALREX – loteprednol etabonate ophth susp 0.2%....42
aluminum chloride soln 20% (Drysol)....45
amcinonide cream 0.1%....44
amiloride & hydrochlorothiazide tab 5-50 mg....20
amiloride hcl tab 5 mg....20
aminocaproic acid syrup 25% (Amicar)....40
aminocaproic acid tab 500 mg (Amicar)....40

amiodarone hcl tab 100 mg....21
amiodarone hcl tab 200 mg (Cordarone)....21
amiodarone hcl tab 400 mg....21
amitriptyline hcl tab 100 mg....27
amitriptyline hcl tab 10 mg....27
amitriptyline hcl tab 150 mg....27
amitriptyline hcl tab 25 mg....27
amitriptyline hcl tab 50 mg....27
amitriptyline hcl tab 75 mg....27
amlodipine besylate-atorvastatin calcium tab 10-10 mg (Caduet)....18
amlodipine besylate-atorvastatin calcium tab 10-20 mg (Caduet)....18
amlodipine besylate-atorvastatin calcium tab 10-40 mg (Caduet)....18
amlodipine besylate-atorvastatin calcium tab 10-80 mg (Caduet)....18
amlodipine besylate-atorvastatin calcium tab 2.5-10 mg (Caduet)....18
amlodipine besylate-atorvastatin calcium tab 2.5-20 mg (Caduet)....18
amlodipine besylate-atorvastatin calcium tab 2.5-40 mg (Caduet)....18
amlodipine besylate-atorvastatin calcium tab 5-10 mg (Caduet)....18
amlodipine besylate-atorvastatin calcium tab 5-20 mg (Caduet)....18
amlodipine besylate-atorvastatin calcium tab 5-40 mg (Caduet)....18
amlodipine besylate-atorvastatin calcium tab 5-80 mg (Caduet)....18
amlodipine besylate-benazepril hcl cap 10-20 mg (Lotrel)....18
amlodipine besylate-benazepril hcl cap 10-40 mg (Lotrel)....18
amlodipine besylate-benazepril hcl cap 2.5-10 mg (Lotrel)....18
amlodipine besylate-benazepril hcl cap 5-10 mg (Lotrel)....18
amlodipine besylate-benazepril hcl cap 5-20 mg (Lotrel)....18
amlodipine besylate-benazepril hcl cap 5-40 mg (Lotrel)....18
amlodipine besylate tab 10 mg (Norvasc)....17
amlodipine besylate tab 2.5 mg (Norvasc)....17
amlodipine besylate tab 5 mg (Norvasc)....18
amoxicillin (trihydrate) cap 250 mg....1
amoxicillin (trihydrate) cap 500 mg....1
amoxicillin (trihydrate) for susp 125 mg/5ml....1
amoxicillin (trihydrate) for susp 200 mg/5ml....1
amoxicillin (trihydrate) for susp 250 mg/5ml....1
amoxicillin (trihydrate) for susp 400 mg/5ml....1
amoxicillin (trihydrate) tab 500 mg....1
amoxicillin (trihydrate) tab 875 mg....1
amoxicillin & k clavulanate chew tab 200-28.5 mg....1
amoxicillin & k clavulanate chew tab 400-57 mg....1
amoxicillin & k clavulanate for susp 200-28.5 mg/5ml 1
amoxicillin & k clavulanate for susp 250-62.5 mg/5ml (Augmentin)....1
amoxicillin & k clavulanate for susp 400-57 mg/5ml... 1
amoxicillin & k clavulanate for susp 600-42.9 mg/5ml (Augmentin es-600)....1
amoxicillin & k clavulanate tab 250-125 mg....1
amoxicillin & k clavulanate tab 500-125 mg (Augmentin)....1
amoxicillin & k clavulanate tab 875-125 mg (Augmentin)....1
amoxicillin & k clavulanate tab sr 12hr 1000-62.5 mg (Augmentin xr)....1
AMOXICILLIN – amoxicillin (trihydrate) chew tab 125 mg 1
AMOXICILLIN – amoxicillin (trihydrate) chew tab 250 mg 1
amoxicillin cap-clarithro tab-lansopraz cap dr therapy pack (Prevpac)....24
amphetamine-dextroamphetamine cap sr 24hr 10 mg (Adderall xr)....31
amphetamine-dextroamphetamine cap sr 24hr 15 mg (Adderall xr)....31
amphetamine-dextroamphetamine cap sr 24hr 20 mg (Adderall xr)....31
amphetamine-dextroamphetamine cap sr 24hr 25 mg (Adderall xr)....31
amphetamine-dextroamphetamine cap sr 24hr 30 mg (Adderall xr)....31
amphetamine-dextroamphetamine cap sr 24hr 5 mg (Adderall xr)....31
amphetamine-dextroamphetamine tab 10 mg (Adderall)....31
amphetamine-dextroamphetamine tab 12.5 mg (Adderall)....31
amphetamine-dextroamphetamine tab 15 mg (Adderall)....31
amphetamine-dextroamphetamine tab 20 mg (Adderall)....31
amphetamine-dextroamphetamine tab 30 mg (Adderall)....31
amphetamine-dextroamphetamine tab 5 mg (Adderall)....31
amphetamine-dextroamphetamine tab 7.5 mg (Adderall)....31
AMPICILLIN – ampicillin for susp 125 mg/5ml....1
AMPICILLIN – ampicillin for susp 250 mg/5ml....1
ampicillin cap 250 mg....1
ampicillin cap 500 mg....1
anagrelide hcl cap 0.5 mg (Agrylin)....40
anagrelide hcl cap 1 mg....40
anastrozole tab 1 mg (Arimidex)....6
ANDRODERM – testosterone td patch 24hr 2 mg/24hr... 9
ANDRODERM – testosterone td patch 24hr 4 mg/24hr... 9
ANDROGEL PUMP – testosterone td gel 12.5 mg/act (1%)....9
ANDROGEL PUMP – testosterone td gel 20.25 mg/act (1.62%)....9

ANDROGEL – testosterone td gel 20.25 mg/1.25gm (1.62%)....9
ANDROGEL – testosterone td gel 25 mg/2.5gm (1%)....9
ANDROGEL – testosterone td gel 40.5 mg/2.5gm (1.62%)....9
ANDROGEL – testosterone td gel 50 mg/5gm (1%)....9
ANDROXY – fluoxymesterone tab 10 mg....9
ANORO ELLIPTA – umeclidinium-vilanterol aero powd ba 62.5-25 mcg/inh....23
antipyrine-benzocaine otic soln 54-14 mg/ml (5.4-1.4%)....43
APTIVUS – tipranavir cap 250 mg....4
APTIVUS – tipranavir oral soln 100 mg/ml....4
ARANESP ALBUMIN FREE – darbepoetin alfa-polysorbate 80 soln inj 100 mcg/0.5ml....41
ARANESP ALBUMIN FREE – darbepoetin alfa-polysorbate 80 soln inj 100 mcg/ml....40
ARANESP ALBUMIN FREE – darbepoetin alfa-polysorbate 80 soln inj 150 mcg/0.3ml....41
ARANESP ALBUMIN FREE – darbepoetin alfa-polysorbate 80 soln inj 150 mcg/0.75ml....41
ARANESP ALBUMIN FREE – darbepoetin alfa-polysorbate 80 soln inj 200 mcg/0.4ml....41
ARANESP ALBUMIN FREE – darbepoetin alfa-polysorbate 80 soln inj 200 mcg/ml....41
ARANESP ALBUMIN FREE – darbepoetin alfa-polysorbate 80 soln inj 25 mcg/0.42ml....40
ARANESP ALBUMIN FREE – darbepoetin alfa-polysorbate 80 soln inj 25 mcg/ml....40
ARANESP ALBUMIN FREE – darbepoetin alfa-polysorbate 80 soln inj 300 mcg/0.6ml....41
ARANESP ALBUMIN FREE – darbepoetin alfa-polysorbate 80 soln inj 300 mcg/ml....41
ARANESP ALBUMIN FREE – darbepoetin alfa-polysorbate 80 soln inj 40 mcg/0.4ml....40
ARANESP ALBUMIN FREE – darbepoetin alfa-polysorbate 80 soln inj 40 mcg/ml....40
ARANESP ALBUMIN FREE – darbepoetin alfa-polysorbate 80 soln inj 500 mcg/ml....41
ARANESP ALBUMIN FREE – darbepoetin alfa-polysorbate 80 soln inj 60 mcg/0.3ml....40
ARANESP ALBUMIN FREE – darbepoetin alfa-polysorbate 80 soln inj 60 mcg/ml....40
ASACOL HD – mesalamine tab delayed release 800 mg....25
ASACOL – mesalamine tab delayed release 400 mg....25
ASMANEX 120 METERED DOSES – mometasone furoate inhal powd 220 mcg/inh (breath activated)....23
ASMANEX 14 METERED DOSES – mometasone furoate inhal powd 220 mcg/inh (breath activated)....23
ASMANEX 30 METERED DOSES – mometasone furoate inhal powd 110 mcg/inh (breath activated)....23
ASMANEX 30 METERED DOSES – mometasone furoate inhal powd 220 mcg/inh (breath activated)....23
ASMANEX 60 METERED DOSES – mometasone furoate inhal powd 220 mcg/inh (breath activated)....23
ASTEPRO – azelastine hcl nasal spray 0.15% (205.5 mcg/spray)....22
atenolol & chlorthalidone tab 100-25 mg (Tenoretic 100)....17
atenolol & chlorthalidone tab 50-25 mg (Tenoretic 50)....17
atenolol tab 100 mg (Tenormin)....17
atenolol tab 25 mg (Tenormin)....17
atenolol tab 50 mg (Tenormin)....17
atorvastatin calcium tab 10 mg (base equivalent) (Lipitor)....19
atorvastatin calcium tab 20 mg (base equivalent) (Lipitor)....19
atorvastatin calcium tab 40 mg (base equivalent) (Lipitor)....19
atorvastatin calcium tab 80 mg (base equivalent) (Lipitor)....19
ATOVAQUONE/PROGUANIL HCL – atovaquone-proguanil hcl tab 62.5-25 mg....5
atovaquone-proguanil hcl tab 250-100 mg (Malarone)5
ATRIPLA – efavirenz-emtricitabine-tenofovir df tab 600-200-300 mg....4
ATROPINE SULFATE – atropine sulfate ophth oint 1%.43
atropine sulfate ophth soln 1% (Isopto atropine)....43
ATROVENT HFA – ipratropium bromide hfa inhal aerosol 17 mcg/act....23
AUGMENTIN – amoxicillin & k clavulanate for susp 125-31.25 mg/5ml....1
azathioprine tab 50 mg (Imuran)....46
azelastine hcl nasal spray 0.15% (205.5 mcg/spray) (Astepro)....22
azelastine hcl nasal spray 137 mcg/spray (1 mg/ml).22
azelastine hcl ophth soln 0.05% (Optivar)....43
AZITHROMYCIN – azithromycin powd pack for susp 1 gm....2
azithromycin for susp 100 mg/5ml (Zithromax)....2
azithromycin for susp 200 mg/5ml (Zithromax)....2
azithromycin tab 250 mg (Zithromax)....2
azithromycin tab 500 mg (Zithromax)....2
azithromycin tab 600 mg (Zithromax)....2
AZOPT – brinzolamide ophth susp 1%....42

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BACITRACIN – bacitracin ophth oint 500 unit/gm....42
bacitracin-polymyxin b ophth oint....42
bacitracin-polymyxin-neomycin-hc ophth oint 1%....42
baclofen tab 10 mg....39
baclofen tab 20 mg....39
BACTROBAN NASAL – mupirocin calcium nasal oint 2%....22
balsalazide disodium cap 750 mg (Colazal)....25
BANZEL – rufinamide susp 40 mg/ml....37
BANZEL – rufinamide tab 200 mg....37
BANZEL – rufinamide tab 400 mg....37
BARACLUDE – entecavir oral soln 0.05 mg/ml....3
BARACLUDE – entecavir tab 0.5 mg....3

BARACLUDE – entecavir tab 1 mg....3
BCG VACCINE – bcg vaccine inj....6
benazepril & hydrochlorothiazide tab 10-12.5 mg (Lotensin hct)....15
benazepril & hydrochlorothiazide tab 20-12.5 mg (Lotensin hct)....15
benazepril & hydrochlorothiazide tab 20-25 mg (Lotensin hct)....15
benazepril & hydrochlorothiazide tab 5-6.25 mg....15
benazepril hcl tab 10 mg (Lotensin)....15
benazepril hcl tab 20 mg (Lotensin)....15
benazepril hcl tab 40 mg (Lotensin)....15
benazepril hcl tab 5 mg....15
benzoyl peroxide-erythromycin gel 5-3% (Benzamycin)....43
benztropine mesylate tab 0.5 mg....38
benztropine mesylate tab 1 mg....38
benztropine mesylate tab 2 mg....38
betamethasone dipropionate augmented cream 0.05% (Diprolene af)....44
betamethasone dipropionate augmented gel 0.05%. 44
betamethasone dipropionate augmented lotion 0.05% (Diprolene)....44
betamethasone dipropionate augmented oint 0.05% (Diprolene)....44
betamethasone dipropionate cream 0.05%....44
betamethasone dipropionate lotion 0.05%....44
betamethasone dipropionate oint 0.05%....44
betamethasone valerate cream 0.1%....44
betamethasone valerate lotion 0.1%....44
betamethasone valerate oint 0.1%....44
BETASERON – interferon beta-1b for inj kit 0.3 mg....32
BETOPTIC-S – betaxolol hcl ophth susp 0.25%....42
bicalutamide tab 50 mg (Casodex)....6
BILTRICIDE – praziquantel tab 600 mg....5
bisoprolol & hydrochlorothiazide tab 10-6.25 mg (Ziac)....17
bisoprolol & hydrochlorothiazide tab 2.5-6.25 mg (Ziac)....17
bisoprolol & hydrochlorothiazide tab 5-6.25 mg (Ziac)....17
bisoprolol fumarate tab 10 mg (Zebeta)....17
bisoprolol fumarate tab 5 mg (Zebeta)....17
BLEPHAMIDE S.O.P. – sulfacetamide sodium-prednisolone ophth oint 10-0.2%....42
BLEPHAMIDE – sulfacetamide sodium-prednisolone ophth susp 10-0.2%....42
BOSULIF – bosutinib tab 100 mg....6
BOSULIF – bosutinib tab 500 mg....6
BRAVELLE – urofollitropin purified for inj 75 unit....11
BREO ELLIPTA – fluticasone furoate-vilanterol aero powd ba 100-25 mcg/inh....23
brimonidine tartrate ophth soln 0.15% (Alphagan p) 42
brimonidine tartrate ophth soln 0.2%....42
bromocriptine mesylate cap 5 mg (Parlodel)....38
bromocriptine mesylate tab 2.5 mg (Parlodel)....38
budesonide cap sr 24hr 3 mg (Entocort ec).... 8
budesonide inhalation susp 0.25 mg/2ml (Pulmicort)....23
budesonide inhalation susp 0.5 mg/2ml (Pulmicort).23
bumetanide tab 0.5 mg....20
bumetanide tab 1 mg....20
bumetanide tab 2 mg....20
buprenorphine hcl-naloxone hcl sl tab 2-0.5 mg (base equiv)....33
buprenorphine hcl-naloxone hcl sl tab 8-2 mg (base equiv)....33
buprenorphine hcl sl tab 2 mg (base equiv)....33
buprenorphine hcl sl tab 8 mg (base equiv)....33
bupropion hcl (smoking deterrent) tab sr 12hr 150 mg (Zyban)....32
bupropion hcl tab 100 mg (Wellbutrin)....27
bupropion hcl tab 75 mg (Wellbutrin)....27
bupropion hcl tab sr 12hr 100 mg (Wellbutrin sr)....27
bupropion hcl tab sr 12hr 150 mg (Wellbutrin sr)....27
bupropion hcl tab sr 12hr 200 mg (Wellbutrin sr)....27
bupropion hcl tab sr 24hr 150 mg (Wellbutrin xl)....27
bupropion hcl tab sr 24hr 300 mg (Wellbutrin xl)....27
buspirone hcl tab 10 mg....27
buspirone hcl tab 15 mg....27
buspirone hcl tab 30 mg....27
buspirone hcl tab 5 mg....27
buspirone hcl tab 7.5 mg....27
BUTALBITAL/ASPIRIN/CAFFEI – butalbital-aspirin-caffeine tab 50-325-40 mg....33
butalbital-acetaminophen-caffeine cap 50-325-40 mg....33
butalbital-acetaminophen-caffeine tab 50-325-40 mg....33
butalbital-aspirin-caffeine cap 50-325-40 mg (Fiorinal)....33
butalbital-aspirin-caffeine tab 50-325-40 mg....33
butalbital-aspirin-caff w/ codeine cap 50-325-40-30 mg (Fiorinal/codeine #3)....33
BYDUREON – exenatide extended release for inj susp 2 mg....11
BYETTA – exenatide soln pen-injector 10 mcg/0.04ml.. 12
BYETTA – exenatide soln pen-injector 5 mcg/0.02ml.... 12

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cabergoline tab 0.5 mg....14
caffeine citrate oral soln 60 mg/3ml (10 mg/ml base equiv) (Cafcit)....31
calcipotriene cream 0.005% (Dovonex)....45
calcipotriene soln 0.005% (50 mcg/ml)....45
calcitriol cap 0.25 mcg (Rocaltrol)....14
calcitriol cap 0.5 mcg (Rocaltrol)....14
calcitriol oral soln 1 mcg/ml (Rocaltrol)....14
calcium acetate (phosphate binder) cap 667 mg (169 mg ca) (Phoslo)....25
CALIBRATION LIQUID – various....46
CANASA – mesalamine suppos 1000 mg....25

candesartan cilexetil-hydrochlorothiazide tab 16-12.5 mg (Atacand hct).....16
candesartan cilexetil-hydrochlorothiazide tab 32-12.5 mg (Atacand hct).....16
candesartan cilexetil-hydrochlorothiazide tab 32-25 mg (Atacand hct).....16
candesartan cilexetil tab 16 mg (Atacand).....16
candesartan cilexetil tab 32 mg (Atacand).....16
candesartan cilexetil tab 4 mg (Atacand).....16
candesartan cilexetil tab 8 mg (Atacand).....16
capecitabine tab 150 mg (Xeloda).....6
capecitabine tab 500 mg (Xeloda).....6
CAPRELSA – vandetanib tab 100 mg.....6
CAPRELSA – vandetanib tab 300 mg.....6
CAPTOPRIL/HYDROCHLOROTHIA – captopril & hydrochlorothiazide tab 25-15 mg.....15
CAPTOPRIL/HYDROCHLOROTHIA – captopril & hydrochlorothiazide tab 25-25 mg.....15
CAPTOPRIL/HYDROCHLOROTHIA – captopril & hydrochlorothiazide tab 50-15 mg.....15
CAPTOPRIL/HYDROCHLOROTHIA – captopril & hydrochlorothiazide tab 50-25 mg.....15
captopril tab 100 mg.....15
captopril tab 12.5 mg.....15
captopril tab 25 mg.....15
captopril tab 50 mg.....15
CARAC – fluorouracil cream 0.5%.....45
CARAFATE – sucralfate susp 1 gm/10ml.....24
carbamazepine cap sr 12hr 100 mg (Carbatrol).....37
carbamazepine cap sr 12hr 200 mg (Carbatrol).....37
carbamazepine cap sr 12hr 300 mg (Carbatrol).....37
carbamazepine chew tab 100 mg.....37
carbamazepine susp 100 mg/5ml (Tegretol).....37
carbamazepine tab 200 mg (Tegretol).....37
carbamazepine tab sr 12hr 200 mg (Tegretol-xr).....37
carbamazepine tab sr 12hr 400 mg (Tegretol-xr).....37
CARBIDOPA/LEVODOPA/ENTACA – carbidopa-levodopa-entacapone tabs 12.5-50-200 mg.....38
CARBIDOPA/LEVODOPA/ENTACA – carbidopa-levodopa-entacapone tabs 18.75-75-200 mg.....38
CARBIDOPA/LEVODOPA/ENTACA – carbidopa-levodopa-entacapone tabs 25-100-200 mg.....38
CARBIDOPA/LEVODOPA/ENTACA – carbidopa-levodopa-entacapone tabs 31.25-125-200 mg.....38
CARBIDOPA/LEVODOPA/ENTACA – carbidopa-levodopa-entacapone tabs 37.5-150-200 mg.....38
CARBIDOPA/LEVODOPA/ENTACA – carbidopa-levodopa-entacapone tabs 50-200-200 mg.....38
carbidopa & levodopa orally disintegrating tab 10-100 mg.....38
carbidopa & levodopa orally disintegrating tab 25-100 mg.....38
carbidopa & levodopa orally disintegrating tab 25-250 mg.....38
carbidopa & levodopa tab 10-100 mg (Sinemet).....38
carbidopa & levodopa tab 25-100 mg (Sinemet).....38
carbidopa & levodopa tab 25-250 mg (Sinemet).....38
carbidopa & levodopa tab cr 25-100 mg (Sinemet cr).....38
carbidopa & levodopa tab cr 50-200 mg (Sinemet cr).....38
carteolol hcl ophth soln 1%.....42
carvedilol tab 12.5 mg (Coreg).....17
carvedilol tab 25 mg (Coreg).....17
carvedilol tab 3.125 mg (Coreg).....17
carvedilol tab 6.25 mg (Coreg).....17
CEENU – lomustine cap 100 mg.....6
CEENU – lomustine cap 10 mg.....6
CEENU – lomustine cap 40 mg.....6
cefaclor cap 250 mg.....1
cefaclor cap 500 mg.....1
cefadroxil cap 500 mg.....1
cefadroxil for susp 250 mg/5ml.....1
cefadroxil for susp 500 mg/5ml.....1
cefadroxil tab 1 gm.....1
cefdinir cap 300 mg.....1
cefdinir for susp 125 mg/5ml.....1
cefdinir for susp 250 mg/5ml.....1
cefpodoxime proxetil for susp 100 mg/5ml.....1
cefpodoxime proxetil for susp 50 mg/5ml.....1
cefpodoxime proxetil tab 100 mg.....1
cefpodoxime proxetil tab 200 mg.....1
cefprozil for susp 125 mg/5ml.....1
cefprozil for susp 250 mg/5ml.....1
cefprozil tab 250 mg.....1
cefprozil tab 500 mg.....1
cefuroxime axetil for susp 125 mg/5ml (Ceftin).....1
cefuroxime axetil tab 250 mg (Ceftin).....1
cefuroxime axetil tab 500 mg (Ceftin).....1
CELEBREX – celecoxib cap 100 mg.....35
CELEBREX – celecoxib cap 200 mg.....35
CELEBREX – celecoxib cap 400 mg.....35
CELEBREX – celecoxib cap 50 mg.....35
CELLCEPT – mycophenolate mofetil for oral susp 200 mg/ml.....46
cephalexin cap 250 mg (Keflex).....1
cephalexin cap 500 mg (Keflex).....1
cephalexin for susp 125 mg/5ml.....1
cephalexin for susp 250 mg/5ml.....1
CETROTIDE – cetrorelix acetate for inj kit 0.25 mg.....11
CETROTIDE – cetrorelix acetate for inj kit 3 mg.....11
CHANTIX CONTINUING MONTH – varenicline tartrate tab 1 mg (base equiv).....32
CHANTIX STARTING MONTH PA – varenicline tartrate tab 0.5 mg x 11 & tab 1 mg x 42 pack.....32
CHANTIX – varenicline tartrate tab 0.5 mg (base equiv)32
CHANTIX – varenicline tartrate tab 1 mg (base equiv)...32
CHEMET – succimer cap 100 mg.....46
CHENODAL – chenodiol tab 250 mg.....25
chlorhexidine gluconate soln 0.12% (Peridex).....43
chloroquine phosphate tab 250 mg.....5
chloroquine phosphate tab 500 mg (Aralen).....5

CHLOROTHIAZIDE – chlorothiazide tab 250 mg.....20
chlorothiazide tab 250 mg.....20
chlorothiazide tab 500 mg.....20
chlorpromazine hcl tab 100 mg.....29
chlorpromazine hcl tab 10 mg.....29
chlorpromazine hcl tab 200 mg.....29
chlorpromazine hcl tab 25 mg.....29
chlorpromazine hcl tab 50 mg.....29
CHLORTHALIDONE – chlorthalidone tab 25 mg.....20
CHLORTHALIDONE – chlorthalidone tab 50 mg.....20
chlorzoxazone tab 500 mg (Parafon forte dsc).....39
cholestyramine light powder 4 gm/dose (Questran light).....19
cholestyramine light powder packets 4 gm.....19
cholestyramine powder 4 gm/dose (Questran).....19
cholestyramine powder packets 4 gm (Questran).....19
choline fenofibrate cap dr 135 mg (fenofibric acid equiv) (Trilipix).....19
choline fenofibrate cap dr 45 mg (fenofibric acid equiv) (Trilipix).....19
chorionic gonadotropin for inj 10000 unit.....11
ciclopirox gel 0.77% (Loprox).....44
ciclopirox olamine cream 0.77% (base equiv).....44
ciclopirox olamine susp 0.77% (base equiv).....44
ciclopirox shampoo 1% (Loprox shampoo).....44
cilostazol tab 100 mg (Pletal).....41
cilostazol tab 50 mg (Pletal).....41
CILOXAN – ciprofloxacin hcl ophth oint 0.3%.....42
cimetidine hcl soln 300 mg/5ml.....24
cimetidine tab 300 mg.....24
cimetidine tab 400 mg.....24
cimetidine tab 800 mg.....24
CIPRO – ciprofloxacin for oral susp 250 mg/5ml (5%) (5 gm/100ml).....2
CIPRO – ciprofloxacin for oral susp 500 mg/5ml (10%) (10 gm/100ml).....2
CIPRODEX – ciprofloxacin-dexamethasone otic susp 0.3-0.1%.....43
ciprofloxacin-ciprofloxacin hcl tab sr 24hr 1000 mg(base eq) (Cipro xr).....2
ciprofloxacin-ciprofloxacin hcl tab sr 24hr 500 mg (base eq) (Cipro xr).....2
ciprofloxacin hcl ophth soln 0.3% (Ciloxan).....42
ciprofloxacin hcl tab 100 mg (base equiv).....2
ciprofloxacin hcl tab 250 mg (base equiv) (Cipro).....2
ciprofloxacin hcl tab 500 mg (base equiv) (Cipro).....2
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FLOVENT HFA – fluticasone propionate hfa inhal aer 110 mcg/act (125/valve).....23
FLOVENT HFA – fluticasone propionate hfa inhal aer 220 mcg/act (250/valve).....23
FLOVENT HFA – fluticasone propionate hfa inhal aero 44 mcg/act (50/valve).....23
fluconazole for susp 10 mg/ml (Diflucan).....3
fluconazole for susp 40 mg/ml (Diflucan).....3
fluconazole tab 100 mg (Diflucan).....3
fluconazole tab 150 mg (Diflucan).....3
fluconazole tab 200 mg (Diflucan).....3
fluconazole tab 50 mg (Diflucan).....3
flucytosine cap 250 mg (Ancobon).....3
flucytosine cap 500 mg (Ancobon).....3
fludrocortisone acetate tab 0.1 mg.....8
FLUNISOLIDE – flunisolide nasal soln 29 mcg/act (0.025%).....22
flunisolide nasal soln 0.025% (Flunisolide).....22
fluocinolone acetonide cream 0.01%.....45
fluocinolone acetonide cream 0.025% (Synalar).....45
fluocinolone acetonide oint 0.025% (Synalar).....45
fluocinolone acetonide soln 0.01% (Synalar).....45
fluocinonide cream 0.05%.....45
fluocinonide emulsified base cream 0.05%.....45
fluocinonide gel 0.05%.....45
fluocinonide oint 0.05%.....45
fluocinonide soln 0.05%.....45
FLUOR-A-DAY – sodium fluoride-xylitol chew tab 0.55 (0.25 mg f)-236.79 mg.....40
FLUOR-A-DAY – sodium fluoride-xylitol chew tab 1.1 (0.5 mg f)-236.79 mg.....40
FLUOR-A-DAY – sodium fluoride-xylitol chew tab 2.2 (1 mg f)-236.79 mg.....40
fluorometholone ophth susp 0.1% (Fml liquifilm).....42
FLUOROPLEX – fluorouracil cream 1%.....45
fluorouracil cream 5% (Efudex).....45
fluorouracil soln 2%.....45
fluorouracil soln 5%.....45
fluoxetine hcl cap 10 mg (Prozac).....28
fluoxetine hcl cap 20 mg (Prozac).....28
fluoxetine hcl cap 40 mg (Prozac).....28
fluoxetine hcl solution 20 mg/5ml.....28
fluoxetine hcl tab 10 mg.....28
fluoxetine hcl tab 20 mg.....28
FLUPHENAZINE HCL – fluphenazine hcl elixir 2.5 mg/5ml.....29
FLUPHENAZINE HCL – fluphenazine hcl oral conc 5 mg/ml.....29
fluphenazine hcl tab 10 mg.....29
fluphenazine hcl tab 1 mg.....29
fluphenazine hcl tab 2.5 mg.....29
fluphenazine hcl tab 5 mg.....29
FLURA-DROPS – sodium fluoride soln 0.25 mg/drop f (from 0.55 mg/drop naf).....40
flurbiprofen sodium ophth soln 0.03% (Ocufen).....43
flurbiprofen tab 100 mg.....35
flurbiprofen tab 50 mg.....35
flutamide cap 125 mg.....6
fluticasone propionate cream 0.05% (Cutivate).....45
fluticasone propionate nasal susp 50 mcg/act (Flonase).....22
fluticasone propionate oint 0.005% (Cutivate).....45
fluvoxamine maleate tab 100 mg.....28
fluvoxamine maleate tab 25 mg.....28
fluvoxamine maleate tab 50 mg.....28
FML – fluorometholone ophth oint 0.1%.....42
folic acid tab 1 mg.....41
FOLLISTIM AQ – follitropin beta inj 150 unit/0.5ml.....11
FOLLISTIM AQ – follitropin beta inj 300 unit/0.36ml.....11
FOLLISTIM AQ – follitropin beta inj 600 unit/0.72ml.....11
FOLLISTIM AQ – follitropin beta inj 75 unit/0.5ml.....11
FOLLISTIM AQ – follitropin beta inj 900 unit/1.08ml.....11
fondaparinux sodium inj 10 mg/0.8ml (Arixtra).....41
fondaparinux sodium inj 2.5 mg/0.5ml (Arixtra).....41
fondaparinux sodium inj 5 mg/0.4ml (Arixtra).....41
fondaparinux sodium inj 7.5 mg/0.6ml (Arixtra).....41
FORADIL AEROLIZER – formoterol fumarate inhal cap 12 mcg.....23
FORTEO – teriparatide (recombinant) inj 600 mcg/2.4ml.....14
fosinopril sodium & hydrochlorothiazide tab 10-12.5 mg.....15

fosinopril sodium & hydrochlorothiazide tab 20-12.5 mg....15
fosinopril sodium tab 10 mg....15
fosinopril sodium tab 20 mg....15
fosinopril sodium tab 40 mg....15
furosemide oral soln 10 mg/ml....20
furosemide tab 20 mg (Lasix)....20
furosemide tab 40 mg (Lasix)....20
furosemide tab 80 mg (Lasix)....20
FUZEON – enfuvirtide for inj 90 mg....4

G

gabapentin cap 100 mg (Neurontin)....37
gabapentin cap 300 mg (Neurontin)....37
gabapentin cap 400 mg (Neurontin)....37
gabapentin oral soln 250 mg/5ml (Neurontin)....37
gabapentin tab 600 mg (Neurontin)....37
gabapentin tab 800 mg (Neurontin)....37
galantamine hydrobromide cap sr 24hr 16 mg (Razadyne er)....33
galantamine hydrobromide cap sr 24hr 24 mg (Razadyne er)....33
galantamine hydrobromide cap sr 24hr 8 mg (Razadyne er)....33
galantamine hydrobromide tab 12 mg (Razadyne)....33
galantamine hydrobromide tab 4 mg (Razadyne)....33
galantamine hydrobromide tab 8 mg (Razadyne)....33
GANIRELIX ACETATE – ganirelix acetate inj 250 mcg/0.5ml....11
gemfibrozil tab 600 mg (Lopid)....20
GENTAMICIN SULFATE – gentamicin sulfate cream 0.1%....44
GENTAMICIN SULFATE – gentamicin sulfate oint 0.1%....44
gentamicin sulfate ophth oint 0.3%....42
gentamicin sulfate ophth soln 0.3% (Garamycin)....42
GILOTRIF – afatinib dimaleate tab 20 mg (base equivalent)....6
GILOTRIF – afatinib dimaleate tab 30 mg (base equivalent)....7
GILOTRIF – afatinib dimaleate tab 40 mg (base equivalent)....7
GLEEVEC – imatinib mesylate tab 100 mg (base equivalent)....7
GLEEVEC – imatinib mesylate tab 400 mg (base equivalent)....7
glimepiride tab 1 mg (Amaryl)....12
glimepiride tab 2 mg (Amaryl)....12
glimepiride tab 4 mg (Amaryl)....12
glipizide-metformin hcl tab 2.5-250 mg....12
glipizide-metformin hcl tab 2.5-500 mg....12
glipizide-metformin hcl tab 5-500 mg....12
glipizide tab 10 mg (Glucotrol)....12
glipizide tab 5 mg (Glucotrol)....12
glipizide tab sr 24hr 10 mg (Glucotrol xl)....12
glipizide tab sr 24hr 2.5 mg (Glucotrol xl)....12
glipizide tab sr 24hr 5 mg (Glucotrol xl)....12
GLUCAGON EMERGENCY KIT – glucagon (rdna) for inj kit 1 mg....12
GLYBURIDE – glyburide tab 1.25 mg....12
GLYBURIDE – glyburide tab 2.5 mg....12
GLYBURIDE – glyburide tab 5 mg....12
glyburide-metformin tab 1.25-250 mg (Glucovance)....12
glyburide-metformin tab 2.5-500 mg (Glucovance)....12
glyburide-metformin tab 5-500 mg (Glucovance)....12
glyburide micronized tab 1.5 mg (Glynase)....12
glyburide micronized tab 3 mg (Glynase)....12
glyburide micronized tab 6 mg (Glynase)....12
glyburide tab 1.25 mg....12
glyburide tab 2.5 mg....12
glyburide tab 5 mg....12
glycopyrrolate tab 1 mg (Robinul)....24
glycopyrrolate tab 2 mg (Robinul forte)....24
GONAL-F – follitropin alfa for inj 1050 unit....11
GONAL-F – follitropin alfa for inj 450 unit....11
GONAL-F RFF – follitropin alfa for inj 75 unit....11
GONAL-F RFF PEN – follitropin alfa inj 300 unit/0.5ml....11
GONAL-F RFF PEN – follitropin alfa inj 450 unit/0.75ml 11
GONAL-F RFF PEN – follitropin alfa inj 900 unit/1.5ml....11
GONAL-F RFF REDIJECT – follitropin alfa inj 300 unit/0.5ml....11
GONAL-F RFF REDIJECT – follitropin alfa inj 450 unit/0.75ml....11
GONAL-F RFF REDIJECT – follitropin alfa inj 900 unit/1.5ml....11
GRANIX – tbo-filgrastim soln prefilled syringe 300 mcg/0.5ml....41
GRANIX – tbo-filgrastim soln prefilled syringe 480 mcg/0.8ml....41
griseofulvin microsize susp 125 mg/5ml....3
griseofulvin microsize tab 500 mg (Grifulvin v)....3
guanfacine hcl tab 1 mg (Tenex)....21
guanfacine hcl tab 2 mg (Tenex)....21

H

halobetasol propionate cream 0.05% (Ultravate)....45
halobetasol propionate oint 0.05% (Ultravate)....45
haloperidol lactate oral conc 2 mg/ml....29
haloperidol tab 0.5 mg....29
haloperidol tab 10 mg....29
haloperidol tab 1 mg....29
haloperidol tab 20 mg....29
haloperidol tab 2 mg....29
haloperidol tab 5 mg....29
HEXALEN – altretamine cap 50 mg....7
homatropine hbr ophth soln 5% (Isopto homatropine)....43
HUMALOG – insulin lispro (human) inj 100 unit/ml....13
HUMALOG – insulin lispro (human) soln cartridge 100 unit/ml....13
HUMALOG KWIKPEN – insulin lispro (human) soln pen-injector 100 unit/ml....13

HUMALOG MIX 50/50 – insulin lispro prot & lispro (human) inj 100 unit/ml (50-50)..... 13
HUMALOG MIX 50/50 KWIKPEN – insulin lispro prot & lispro sus pen-inj 100 unit/ml (50-50)..... 13
HUMALOG MIX 75/25 – insulin lispro prot & lispro (human) inj 100 unit/ml (75-25)..... 13
HUMALOG MIX 75/25 KWIKPEN – insulin lispro prot & lispro sus pen-inj 100 unit/ml (75-25)..... 13
HUMIRA – adalimumab inj kit 20 mg/0.4ml.....35
HUMIRA – adalimumab inj kit 40 mg/0.8ml (50 mg/ml).. 35
HUMIRA PEN – adalimumab inj kit 40 mg/0.8ml (50 mg/ml)..... 35
HUMIRA PEN-CROHNS DISEASE – adalimumab inj kit 40 mg/0.8ml (50 mg/ml)..... 35
HUMIRA PEN-PSORIASIS STAR – adalimumab inj kit 40 mg/0.8ml (50 mg/ml)..... 35
HUMULIN 70/30 – insulin isophane & regular (human) inj 100 unit/ml (70-30).....13
HUMULIN 70/30 KWIKPEN – insulin isophane & regular susp pen-inj 100 unit/ml (70-30).....13
HUMULIN 70/30 PEN – insulin isophane & regular susp pen-inj 100 unit/ml (70-30).....13
HUMULIN N – insulin isophane (human) inj 100 unit/ml.13
HUMULIN N KWIKPEN – insulin isophane (human) susp pen-injector 100 unit/ml..... 13
HUMULIN N U-100 PEN – insulin isophane (human) susp pen-injector 100 unit/ml.....13
HUMULIN R – insulin regular (human) inj 100 unit/ml.... 13
HUMULIN R U-500 (CONCENTR – insulin regular (human) inj 500 unit/ml.....13
HYCAMTIN – topotecan hcl cap 0.25 mg (base equiv).... 7
HYCAMTIN – topotecan hcl cap 1 mg (base equiv)..... 7
hydralazine hcl tab 100 mg..... 21
hydralazine hcl tab 10 mg..... 21
hydralazine hcl tab 25 mg..... 21
hydralazine hcl tab 50 mg..... 21
hydrochlorothiazide cap 12.5 mg (Microzide).....20
hydrochlorothiazide tab 25 mg..... 20
hydrochlorothiazide tab 50 mg..... 20
hydrocodone-acetaminophen soln 7.5-325 mg/15ml (Hycet)..... 34
hydrocodone-acetaminophen tab 10-325 mg (Norco)..... 34
hydrocodone-acetaminophen tab 5-300 mg (Xodol). 34
hydrocodone-acetaminophen tab 5-325 mg (Norco). 34
hydrocodone-acetaminophen tab 7.5-325 mg (Norco)..... 34
hydrocodone-ibuprofen tab 10-200 mg (Ibudone)..... 34
hydrocodone-ibuprofen tab 5-200 mg (Reprexain)....34
hydrocodone-ibuprofen tab 7.5-200 mg (Vicoprofen)..... 34
hydrocortisone acetate suppos 25 mg (Anusol-hc).. 43
hydrocortisone cream 2.5%.....45
hydrocortisone enema 100 mg/60ml (Cortenema).....43
hydrocortisone lotion 2.5%..... 45
hydrocortisone oint 2.5%.....45
hydrocortisone rectal cream 2.5% (Anusol-hc)..... 43
hydrocortisone tab 10 mg (Cortef)..... 8
hydrocortisone tab 20 mg (Cortef)..... 8
hydrocortisone tab 5 mg (Cortef)..... 8
hydrocortisone valerate cream 0.2%.....45
hydrocortisone valerate oint 0.2% (Westcort)..... 45
HYDROMORPHONE HCL – hydromorphone hcl suppos 3 mg.....34
hydromorphone hcl liqd 1 mg/ml (Dilaudid)..... 34
hydromorphone hcl tab 2 mg (Dilaudid)..... 34
hydromorphone hcl tab 4 mg (Dilaudid)..... 34
hydromorphone hcl tab 8 mg (Dilaudid)..... 34
hydroxychloroquine sulfate tab 200 mg (Plaquenil)....5
hydroxyurea cap 500 mg (Hydrea).....7
hydroxyzine hcl syrup 10 mg/5ml.....27
hydroxyzine hcl tab 10 mg.....27
hydroxyzine hcl tab 25 mg.....27
hydroxyzine hcl tab 50 mg.....27
hydroxyzine pamoate cap 25 mg (Vistaril).....27
hydroxyzine pamoate cap 50 mg (Vistaril).....27
HYDROXYZINE PAMOATE – hydroxyzine pamoate cap 100 mg.....27
hyoscyamine sulfate elixir 0.125 mg/5ml..... 24
hyoscyamine sulfate soln 0.125 mg/ml..... 24
hyoscyamine sulfate tab 0.125 mg (Levsin).....24
hyoscyamine sulfate tab sl 0.125 mg (Levsin/sl).....24
hyoscyamine sulfate tab sr 12hr 0.375 mg (Levbid)..24

I

ibandronate sodium tab 150 mg (base equivalent) (Boniva).....14
ibuprofen susp 100 mg/5ml.....35
ibuprofen tab 400 mg.....35
ibuprofen tab 600 mg.....35
ibuprofen tab 800 mg.....35
ICLUSIG – ponatinib hcl tab 15 mg (base equiv)..... 7
ICLUSIG – ponatinib hcl tab 45 mg (base equiv)..... 7
ILARIS – canakinumab for inj 180 mg.....35
IMBRUVICA – ibrutinib cap 140 mg.....7
imipramine hcl tab 10 mg (Tofranil)..... 28
imipramine hcl tab 25 mg (Tofranil)..... 28
imipramine hcl tab 50 mg (Tofranil)..... 28
imipramine pamoate cap 100 mg (Tofranil-pm)..... 28
imipramine pamoate cap 125 mg (Tofranil-pm)..... 28
imipramine pamoate cap 150 mg (Tofranil-pm)..... 28
imipramine pamoate cap 75 mg (Tofranil-pm)..... 28
imiquimod cream 5% (Aldara).....45
IMITREX – sumatriptan nasal spray 20 mg/act..... 36
IMITREX – sumatriptan nasal spray 5 mg/act..... 36
INCRELEX – mecasermin inj 40 mg/4ml (10 mg/ml)..... 14
indapamide tab 1.25 mg..... 20
indapamide tab 2.5 mg..... 20
indomethacin cap 25 mg..... 35
indomethacin cap 50 mg..... 35
INHALER ASSIST DEVICES – spacers.....46
INLYTA – axitinib tab 1 mg.....7

INLYTA – axitinib tab 5 mg....7
INSULIN PEN NEEDLES – NOVOFINE, NOVOTWIST; various....46
INSULIN SYRINGES – various....46
INTELENCE – etravirine tab 100 mg....4
INTELENCE – etravirine tab 200 mg....4
INTELENCE – etravirine tab 25 mg....4
INVIRASE – saquinavir mesylate cap 200 mg....4
INVIRASE – saquinavir mesylate tab 500 mg....4
ipratropium-albuterol nebu soln 0.5-2.5(3) mg/3ml (Duoneb)....23
ipratropium bromide inhal soln 0.02%....23
ipratropium bromide nasal soln 0.03% (21 mcg/ spray) (Atrovent)....22
ipratropium bromide nasal soln 0.06% (42 mcg/ spray) (Atrovent)....22
irbesartan-hydrochlorothiazide tab 150-12.5 mg (Avalide)....16
irbesartan-hydrochlorothiazide tab 300-12.5 mg (Avalide)....16
irbesartan tab 150 mg (Avapro)....16
irbesartan tab 300 mg (Avapro)....16
irbesartan tab 75 mg (Avapro)....16
ISENTRESS – raltegravir potassium chew tab 100 mg (base equiv)....4
ISENTRESS – raltegravir potassium chew tab 25 mg (base equiv)....4
ISENTRESS – raltegravir potassium tab 400 mg (base equiv)....4
isoniazid & rifampin cap 150-300 mg....3
ISONIAZID – isoniazid syrup 50 mg/5ml....3
isoniazid tab 100 mg....3
isoniazid tab 300 mg....3
ISOSORBIDE DINITRATE – isosorbide dinitrate tab 30 mg....19
isosorbide dinitrate tab 10 mg....19
isosorbide dinitrate tab 20 mg....19
isosorbide dinitrate tab 30 mg....19
isosorbide dinitrate tab 5 mg (Isordil titradose)....19
isosorbide mononitrate tab 10 mg....19
isosorbide mononitrate tab 20 mg....19
isosorbide mononitrate tab sr 24hr 120 mg (Imdur)....19
isosorbide mononitrate tab sr 24hr 30 mg (Imdur)....19
isosorbide mononitrate tab sr 24hr 60 mg (Imdur)....19
isotretinoin cap 10 mg....44
isotretinoin cap 20 mg....44
isotretinoin cap 40 mg....44
itraconazole cap 100 mg (Sporanox)....3

J

JAKAFI – ruxolitinib phosphate tab 10 mg (base equivalent)....7
JAKAFI – ruxolitinib phosphate tab 15 mg (base equivalent)....7
JAKAFI – ruxolitinib phosphate tab 20 mg (base equivalent)....7
JAKAFI – ruxolitinib phosphate tab 25 mg (base equivalent)....7
JAKAFI – ruxolitinib phosphate tab 5 mg (base equivalent)....7
JANUMET – sitagliptin-metformin hcl tab 50-1000 mg....12
JANUMET – sitagliptin-metformin hcl tab 50-500 mg....12
JANUMET XR – sitagliptin-metformin hcl tab sr 24hr 100-1000 mg....12
JANUMET XR – sitagliptin-metformin hcl tab sr 24hr 50-1000 mg....12
JANUMET XR – sitagliptin-metformin hcl tab sr 24hr 50-500 mg....12
JANUVIA – sitagliptin phosphate tab 100 mg (base equiv)....12
JANUVIA – sitagliptin phosphate tab 25 mg (base equiv)....12
JANUVIA – sitagliptin phosphate tab 50 mg (base equiv)....12
JUVISYNC – sitagliptin-simvastatin tab 100-10 mg....12
JUVISYNC – sitagliptin-simvastatin tab 100-20 mg....12
JUVISYNC – sitagliptin-simvastatin tab 100-40 mg....12
JUVISYNC – sitagliptin-simvastatin tab 50-10 mg....12
JUVISYNC – sitagliptin-simvastatin tab 50-20 mg....12
JUVISYNC – sitagliptin-simvastatin tab 50-40 mg....12
JUXTAPID – lomitapide mesylate cap 10 mg (base equiv)....20
JUXTAPID – lomitapide mesylate cap 20 mg (base equiv)....20
JUXTAPID – lomitapide mesylate cap 5 mg (base equiv)....20

K

KALETRA – lopinavir-ritonavir soln 400-100 mg/5ml (80-20 mg/ml)....4
KALETRA – lopinavir-ritonavir tab 100-25 mg....4
KALETRA – lopinavir-ritonavir tab 200-50 mg....4
KALYDECO – ivacaftor tab 150 mg....24
ketoconazole cream 2%....44
ketoconazole shampoo 2% (Nizoral)....44
ketoprofen cap 50 mg....35
ketoprofen cap 75 mg....35
ketorolac tromethamine ophth soln 0.4% (Acular ls)....43
ketorolac tromethamine ophth soln 0.5% (Acular)....43
ketorolac tromethamine tab 10 mg....35
KOMBIGLYZE XR – saxagliptin-metformin hcl tab sr 24hr 2.5-1000 mg....12
KOMBIGLYZE XR – saxagliptin-metformin hcl tab sr 24hr 5-1000 mg....12
KOMBIGLYZE XR – saxagliptin-metformin hcl tab sr 24hr 5-500 mg....12
K-PHOS NO 2 – potassium & sodium acid phosphates tab 305-700 mg....26
K-PHOS – potassium phosphate monobasic tab 500 mg....40
KUVAN – sapropterin dihydrochloride soluble tab 100 mg....14

L

labetalol hcl tab 100 mg (Trandate).....17
labetalol hcl tab 200 mg (Trandate).....17
labetalol hcl tab 300 mg (Trandate).....17
lactulose (encephalopathy) solution 10 gm/15ml.....25
lactulose solution 10 gm/15ml.....24
LAMISIL – terbinafine hcl oral granules packet 125 mg... 3
LAMISIL – terbinafine hcl oral granules packet 187.5 mg 3
lamivudine tab 100 mg (Epivir hbv).....3
lamivudine tab 150 mg (Epivir).....4
lamivudine tab 300 mg (Epivir).....4
lamivudine-zidovudine tab 150-300 mg (Combivir).....4
lamotrigine tab 100 mg (Lamictal).....37
lamotrigine tab 150 mg (Lamictal).....37
lamotrigine tab 200 mg (Lamictal).....37
lamotrigine tab 25 mg (Lamictal).....37
lamotrigine tab chewable dispersible 25 mg (Lamictal chewable di).....37
lamotrigine tab chewable dispersible 5 mg (Lamictal chewable di).....37
LANCETS – various.....46
lansoprazole cap delayed release 15 mg (Prevacid). 24
lansoprazole cap delayed release 30 mg (Prevacid). 24
LANTUS – insulin glargine inj 100 unit/ml.....13
LANTUS SOLOSTAR – insulin glargine soln pen-injector 100 unit/ml.....13
latanoprost ophth soln 0.005% (Xalatan).....42
leflunomide tab 10 mg (Arava).....36
leflunomide tab 20 mg (Arava).....36
LETAIRIS – ambrisentan tab 10 mg.....21
LETAIRIS – ambrisentan tab 5 mg.....21
letrozole tab 2.5 mg (Femara).....7
LEUCOVORIN CALCIUM – leucovorin calcium tab 10 mg.....7
LEUCOVORIN CALCIUM – leucovorin calcium tab 15 mg.....7
leucovorin calcium tab 25 mg.....7
leucovorin calcium tab 5 mg.....7
LEUKERAN – chlorambucil tab 2 mg.....7
LEUKINE – sargramostim inj 500 mcg/ml.....41
– LEUPROLIDE (1 MON) INJ 3.75 MG & NORETHINDRONE TAB 5 MG KIT.....14
– LEUPROLIDE (3 MON) INJ 11.25 MG & NORETHINDRONE TAB 5 MG KIT.....14
levalbuterol hcl soln nebu 0.31 mg/3ml (base equiv) (Xopenex).....23
levalbuterol hcl soln nebu 0.63 mg/3ml (base equiv) (Xopenex).....23
levalbuterol hcl soln nebu 1.25 mg/3ml (base equiv) (Xopenex).....23
levalbuterol hcl soln nebu conc 1.25 mg/0.5ml (base equiv) (Xopenex concentrate).....23
LEVEMIR FLEXPEN – insulin detemir soln pen-injector 100 unit/ml.....13
LEVEMIR FLEXTOUCH – insulin detemir soln pen-injector 100 unit/ml.....13
LEVEMIR – insulin detemir inj 100 unit/ml.....13
levetiracetam oral soln 100 mg/ml (Keppra).....37
levetiracetam tab 1000 mg (Keppra).....37
levetiracetam tab 250 mg (Keppra).....37
levetiracetam tab 500 mg (Keppra).....37
levetiracetam tab 750 mg (Keppra).....37
levetiracetam tab sr 24hr 500 mg (Keppra xr).....37
levetiracetam tab sr 24hr 750 mg (Keppra xr).....37
LEVOBUNOLOL HCL – levobunolol hcl ophth soln 0.25%.....43
levobunolol hcl ophth soln 0.5% (Betagan).....43
levocarnitine oral soln 1 gm/10ml (10%) (Carnitor)... 14
levocarnitine tab 330 mg (Carnitor).....14
levofloxacin oral soln 25 mg/ml (Levaquin).....2
levofloxacin tab 250 mg (Levaquin).....2
levofloxacin tab 500 mg (Levaquin).....2
levofloxacin tab 750 mg (Levaquin).....2
levonorgestrel & ethinyl estradiol (91-day) tab 0.15-0.03 mg.....10
levonorgestrel & ethinyl estradiol tab 0.15 mg-30 mcg.....10
levonorgestrel & ethinyl estradiol tab 0.1 mg-20 mcg.....10
levonorgestrel-eth estra tab 0.05-30/0.075-40/0.125-30mg-mcg.....10
levonorgestrel tab 0.75 mg (Plan b).....10
levonorgestrel tab 1.5 mg (Plan b one-step).....10
levonorg-eth est tab 0.1-0.02mg(84) & eth est tab 0.01mg(7) (Loseasonique).....10
levothyroxine sodium tab 100 mcg (Synthroid).....13
levothyroxine sodium tab 112 mcg (Synthroid).....13
levothyroxine sodium tab 125 mcg (Synthroid).....13
levothyroxine sodium tab 137 mcg (Synthroid).....13
levothyroxine sodium tab 150 mcg (Synthroid).....13
levothyroxine sodium tab 175 mcg (Synthroid).....13
levothyroxine sodium tab 200 mcg (Synthroid).....13
levothyroxine sodium tab 25 mcg (Synthroid).....13
levothyroxine sodium tab 300 mcg (Synthroid).....14
levothyroxine sodium tab 50 mcg (Synthroid).....14
levothyroxine sodium tab 75 mcg (Synthroid).....14
levothyroxine sodium tab 88 mcg (Synthroid).....14
LEXIVA – fosamprenavir calcium susp 50 mg/ml (base equiv).....4
LEXIVA – fosamprenavir calcium tab 700 mg (base equiv).....4
LIALDA – mesalamine tab delayed release 1.2 gm.....25
LIDOCAINE/PRILOCAINE – lidocaine-prilocaine kit 2.5-2.5%.....45
lidocaine hcl viscous soln 2%.....43
lidocaine-prilocaine cream 2.5-2.5% (Emla).....45
lindane lotion 1%.....45
lindane shampoo 1%.....45
liothyronine sodium tab 25 mcg (Cytomel).....14
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STRATTERA – atomoxetine hcl cap 40 mg (base equiv)....31
STRATTERA – atomoxetine hcl cap 60 mg (base equiv)....31
STRATTERA – atomoxetine hcl cap 80 mg (base equiv)....31
STRIBILD – elvitegrav-cobicis-emtricitab-tenofov tab 150-150-200-300 mg....5
STROMECTOL – ivermectin tab 3 mg....5
SUBOXONE – buprenorphine hcl-naloxone hcl sl film 12-3 mg (base equiv)....35
SUBOXONE – buprenorphine hcl-naloxone hcl sl film 2-0.5 mg (base equiv)....35
SUBOXONE – buprenorphine hcl-naloxone hcl sl film 4-1 mg (base equiv)....35
SUBOXONE – buprenorphine hcl-naloxone hcl sl film 8-2 mg (base equiv)....35
sucralfate tab 1 gm (Carafate)....25
sulfacetamide sodium lotion 10% (acne) (Klaron)....44
sulfacetamide sodium ophth soln 10% (Bleph-10)....42
sulfacetamide sodium-prednisolone ophth soln 10-0.23(0.25)%....42
sulfacetamide sodium w/ sulfur cream 10-5%....44
sulfacetamide sodium w/ sulfur emulsion 10-5%....44
sulfacetamide sodium w/ sulfur lotion 10-5%....44
sulfamethoxazole-trimethoprim susp 200-40 mg/5ml....6
sulfamethoxazole-trimethoprim tab 400-80 mg (Bactrim)....6
sulfamethoxazole-trimethoprim tab 800-160 mg (Bactrim ds)....6
sulfasalazine tab 500 mg (Azulfidine)....26
sulfasalazine tab delayed release 500 mg (Azulfidine en-tabs)....26
sulindac tab 150 mg....36
sulindac tab 200 mg....36
sumatriptan succinate inj 4 mg/0.5ml....36
sumatriptan succinate inj 6 mg/0.5ml (Imitrex)....36
sumatriptan succinate solution auto-injector 4 mg/0.5ml (Imitrex statdose sys)....36
sumatriptan succinate solution auto-injector 6 mg/0.5ml (Imitrex statdose sys)....36
sumatriptan succinate solution cartridge 4 mg/0.5ml (Imitrex statdose ref)....36
sumatriptan succinate solution cartridge 6 mg/0.5ml (Imitrex statdose ref)....36
sumatriptan succinate solution prefilled syringe 6 mg/0.5ml....36
SUMATRIPTAN SUCCINATE – sumatriptan succinate inj 4 mg/0.5ml....36

SUMATRIPTAN SUCCINATE – sumatriptan succinate solution prefilled syringe 6 mg/0.5ml..... 36
sumatriptan succinate tab 100 mg (Imitrex)..... 36
sumatriptan succinate tab 25 mg (Imitrex)..... 36
sumatriptan succinate tab 50 mg (Imitrex)..... 36
SUMATRIPTAN – sumatriptan nasal spray 20 mg/act... 36
SUMATRIPTAN – sumatriptan nasal spray 5 mg/act..... 36
SUPRAX – cefixime for susp 100 mg/5ml.....1
SUPRAX – cefixime for susp 200 mg/5ml.....1
SUPRAX – cefixime for susp 500 mg/5ml.....1
SUPRAX – cefixime tab 400 mg.....1
SUSTIVA – efavirenz cap 200 mg..... 5
SUSTIVA – efavirenz cap 50 mg..... 5
SUSTIVA – efavirenz tab 600 mg..... 5
SUTENT – sunitinib malate cap 12.5 mg (base equivalent).....7
SUTENT – sunitinib malate cap 25 mg (base equivalent) 7
SUTENT – sunitinib malate cap 50 mg (base equivalent) 7
SYLATRON – peginterferon alfa-2b for inj kit 296 mcg.... 8
SYLATRON – peginterferon alfa-2b for inj kit 444 mcg.... 8
SYLATRON – peginterferon alfa-2b for inj kit 4 x 296 mcg..... 8
SYLATRON – peginterferon alfa-2b for inj kit 4 x 444 mcg..... 8
SYLATRON – peginterferon alfa-2b for inj kit 4 x 888 mcg..... 8
SYLATRON – peginterferon alfa-2b for inj kit 888 mcg.... 8
SYMBICORT – budesonide-formoterol fumarate dihyd aerosol 160-4.5 mcg/act..... 24
SYMBICORT – budesonide-formoterol fumarate dihyd aerosol 80-4.5 mcg/act..... 24
SYMLINPEN 120 – pramlintide acetate pen-inj 2700 mcg/2.7ml (1000 mcg/ml)..... 13
SYMLINPEN 60 – pramlintide acetate pen-inj 1500 mcg/1.5ml (1000 mcg/ml)..... 13
SYNERA – lidocaine-tetracaine topical patch 70-70 mg.46

T

TABLOID – thioguanine tab 40 mg..... 8
tacrolimus cap 0.5 mg (Prograf)..... 47
tacrolimus cap 1 mg (Prograf)..... 47
tacrolimus cap 5 mg (Prograf)..... 47
TAFINLAR – dabrafenib mesylate cap 50 mg (base equivalent).....8
TAFINLAR – dabrafenib mesylate cap 75 mg (base equivalent).....8
TAMIFLU – oseltamivir phosphate cap 30 mg (base equiv)..... 5
TAMIFLU – oseltamivir phosphate cap 45 mg (base equiv)..... 5
TAMIFLU – oseltamivir phosphate cap 75 mg (base equiv)..... 5
TAMIFLU – oseltamivir phosphate for susp 6 mg/ml (base equiv).....5
tamoxifen citrate tab 10 mg (base equivalent).....8
tamoxifen citrate tab 20 mg (base equivalent).....8
tamsulosin hcl cap 0.4 mg (Flomax).....26
TARCEVA – erlotinib tab 100 mg..... 8
TARCEVA – erlotinib tab 150 mg..... 8
TARCEVA – erlotinib tab 25 mg..... 8
TARGRETIN – bexarotene cap 75 mg.....8
TASIGNA – nilotinib cap 150 mg..... 8
TASIGNA – nilotinib cap 200 mg..... 8
TAZORAC – tazarotene cream 0.05%.....44
TAZORAC – tazarotene cream 0.1%.....44
TAZORAC – tazarotene gel 0.05%.....44
TAZORAC – tazarotene gel 0.1%.....44
TECFIDERA – dimethyl fumarate capsule delayed release 120 mg.....32
TECFIDERA – dimethyl fumarate capsule delayed release 240 mg.....32
TECFIDERA STARTER PACK – dimethyl fumarate capsule dr starter pack 120 mg & 240 mg.....32
TEGRETOL-XR – carbamazepine tab sr 12hr 100 mg...38
temazepam cap 15 mg (Restoril)..... 30
temazepam cap 22.5 mg (Restoril)..... 30
temazepam cap 30 mg (Restoril)..... 30
temazepam cap 7.5 mg (Restoril)..... 30
temozolomide cap 100 mg (Temodar)..... 8
temozolomide cap 140 mg (Temodar)..... 8
temozolomide cap 180 mg (Temodar)..... 8
temozolomide cap 20 mg (Temodar)..... 8
temozolomide cap 250 mg (Temodar)..... 8
temozolomide cap 5 mg (Temodar)..... 8
terazosin hcl cap 10 mg..... 22
terazosin hcl cap 1 mg..... 22
terazosin hcl cap 2 mg..... 22
terazosin hcl cap 5 mg..... 22
terbinafine hcl tab 250 mg (Lamisil)..... 3
terbutaline sulfate tab 2.5 mg..... 24
terbutaline sulfate tab 5 mg..... 24
terconazole vaginal cream 0.4% (Terazol 7)..... 26
terconazole vaginal cream 0.8% (Terazol 3)..... 26
terconazole vaginal suppos 80 mg.....26
testosterone cypionate im in oil 100 mg/ml (Depo-testosterone)..... 9
testosterone cypionate im in oil 200 mg/ml (Depo-testosterone)..... 9
testosterone enanthate im in oil 200 mg/ml.....9
TEST STRIPS – LIFESCAN ONETOUCH BASIC/PROFILE, BASIC/PROFILE/ONETOUCH II, FASTTAKE, SURESTEP, ULTRA BLUE, VERIO, VERIO IQ.....46
TEST STRIPS – ROCHE ACCU-CHEK ACTIVE, AVIVA, AVIVA PLUS, COMFORT CURVE, COMPACT, COMPACT PLUS, SMARTVIEW.....46
TEST STRIPS – various..... 46
TETRACYCLINE HCL – tetracycline hcl cap 250 mg.....2
TETRACYCLINE HCL – tetracycline hcl cap 500 mg.....2
THALOMID – thalidomide cap 100 mg.....47
THALOMID – thalidomide cap 150 mg.....47
THALOMID – thalidomide cap 200 mg.....47

THALOMID – thalidomide cap 50 mg..... 47
theophylline tab sr 12hr 100 mg..... 24
theophylline tab sr 12hr 200 mg..... 24
theophylline tab sr 12hr 300 mg..... 24
theophylline tab sr 12hr 450 mg..... 24
theophylline tab sr 24hr 400 mg..... 24
theophylline tab sr 24hr 600 mg..... 24
thiothixene cap 10 mg..... 30
thiothixene cap 1 mg..... 30
thiothixene cap 2 mg..... 30
thiothixene cap 5 mg..... 30
timolol maleate ophth gel forming soln 0.25% (Timoptic-xe).....43
timolol maleate ophth gel forming soln 0.5% (Timoptic-xe).....43
timolol maleate ophth soln 0.25% (Timoptic).....43
timolol maleate ophth soln 0.5% (Timoptic)..... 43
TIMOLOL MALEATE – timolol maleate tab 10 mg..... 17
TIMOLOL MALEATE – timolol maleate tab 20 mg..... 17
TIMOLOL MALEATE – timolol maleate tab 5 mg..... 17
TIVICAY – dolutegravir sodium tab 50 mg (base equiv)...5
TOBRADEX – tobramycin-dexamethasone ophth oint 0.3-0.1%.....42
tobramycin-dexamethasone ophth susp 0.3-0.1% (Tobradex).....42
tobramycin nebu soln 300 mg/5ml (Tobi).....3
tobramycin ophth soln 0.3% (Tobrex)..... 42
tolterodine tartrate cap sr 24hr 2 mg (Detrol la)..... 26
tolterodine tartrate cap sr 24hr 4 mg (Detrol la)..... 26
tolterodine tartrate tab 1 mg (Detrol).....26
tolterodine tartrate tab 2 mg (Detrol).....26
topiramate sprinkle cap 15 mg (Topamax sprinkle).. 38
topiramate sprinkle cap 25 mg (Topamax sprinkle).. 38
topiramate tab 100 mg (Topamax)..... 38
topiramate tab 200 mg (Topamax)..... 38
topiramate tab 25 mg (Topamax)..... 38
topiramate tab 50 mg (Topamax)..... 38
torsemide tab 100 mg (Demadex)..... 20
torsemide tab 10 mg (Demadex)..... 20
torsemide tab 20 mg (Demadex)..... 20
torsemide tab 5 mg (Demadex)..... 20
TRACLEER – bosentan tab 125 mg..... 22
TRACLEER – bosentan tab 62.5 mg..... 22
tramadol-acetaminophen tab 37.5-325 mg (Ultracet) 35
tramadol hcl tab 50 mg (Ultram)..... 35
tramadol hcl tab sr 24hr 100 mg (Ultram er)..... 35
tramadol hcl tab sr 24hr 200 mg (Ultram er)..... 35
tramadol hcl tab sr 24hr 300 mg (Ultram er)..... 35
trandolapril tab 1 mg (Mavik)..... 16
trandolapril tab 2 mg (Mavik)..... 16
trandolapril tab 4 mg (Mavik)..... 16
tranylcypromine sulfate tab 10 mg (Parnate).....28
TRAVATAN Z – travoprost ophth soln 0.004% (benzalkonium free) (bak free)..... 43
trazodone hcl tab 100 mg.....28
trazodone hcl tab 150 mg.....28
trazodone hcl tab 300 mg.....28
trazodone hcl tab 50 mg.....28
tretinoin cap 10 mg..... 8
tretinoin cream 0.025% (Retin-a).....44
tretinoin cream 0.05% (Retin-a).....44
tretinoin cream 0.1% (Retin-a).....44
tretinoin gel 0.01% (Retin-a).....44
tretinoin gel 0.025% (Retin-a).....44
tretinoin microsphere gel 0.04% (Retin-a micro)..... 44
tretinoin microsphere gel 0.1% (Retin-a micro)..... 44
triamcinolone acetonide cream 0.025%..... 45
triamcinolone acetonide cream 0.1%..... 45
triamcinolone acetonide cream 0.5%..... 45
triamcinolone acetonide dental paste 0.1%..... 43
triamcinolone acetonide lotion 0.025%..... 45
triamcinolone acetonide lotion 0.1%..... 45
triamcinolone acetonide nasal inhal 55 mcg/act (Nasacort aq).....22
triamcinolone acetonide oint 0.025%..... 45
triamcinolone acetonide oint 0.1%..... 45
TRIAMCINOLONE ACETONIDE – triamcinolone acetonide oint 0.5%.....45
TRIAMTERENE/HYDROCHLOROTH – triamterene & hydrochlorothiazide cap 50-25 mg.....21
triamterene & hydrochlorothiazide cap 37.5-25 mg (Dyazide)..... 20
triamterene & hydrochlorothiazide tab 37.5-25 mg (Maxzide-25).....20
triamterene & hydrochlorothiazide tab 75-50 mg (Maxzide).....21
TRICITRATES – pot & sod citrates w/ cit ac soln 550-500-334 mg/5ml.....26
trifluoperazine hcl tab 10 mg..... 30
trifluoperazine hcl tab 1 mg..... 30
trifluoperazine hcl tab 2 mg..... 30
trifluoperazine hcl tab 5 mg..... 30
trifluridine ophth soln 1% (Viroptic)..... 42
trihexyphenidyl hcl elixir 0.4 mg/ml.....39
trihexyphenidyl hcl tab 2 mg.....39
trihexyphenidyl hcl tab 5 mg.....39
trimethobenzamide hcl cap 300 mg (Tigan).....25
trimethoprim tab 100 mg..... 6
TRINATE – prenatal vit w/ fe fumarate-fa tab 28-1 mg...39
TRI-VIT/FLUORIDE/IRON – pediatric vitamins acd fluoride & fe drops 0.25-10 mg/ml..... 39
TRUVADA – emtricitabine-tenofovir disoproxil fumarate tab 200-300 mg..... 5
TYKERB – lapatinib ditosylate tab 250 mg (base equiv).. 8

U

ULESFIA – benzyl alcohol lotion 5%.....46
ursodiol cap 300 mg (Actigall).....26

V

VAGIFEM – estradiol vaginal tab 10 mcg..... 26
valacyclovir hcl tab 1 gm (Valtrex)..... 4

valacyclovir hcl tab 500 mg (Valtrex)..... 4
VALCHLOR – mechlorethamine hcl gel 0.016% (base equivalent).....46
VALCYTE – valganciclovir hcl for soln 50 mg/ml (base equiv)..... 3
VALCYTE – valganciclovir hcl tab 450 mg.....3
valproate sodium syrup 250 mg/5ml (base equiv) (Depakene).....38
valproic acid cap 250 mg (Depakene)..... 38
valsartan-hydrochlorothiazide tab 160-12.5 mg (Diovan hct)..... 16
valsartan-hydrochlorothiazide tab 160-25 mg (Diovan hct).....16
valsartan-hydrochlorothiazide tab 320-12.5 mg (Diovan hct)..... 16
valsartan-hydrochlorothiazide tab 320-25 mg (Diovan hct).....16
valsartan-hydrochlorothiazide tab 80-12.5 mg (Diovan hct)..... 16
vancomycin hcl cap 125 mg (Vancocin hcl)..... 6
vancomycin hcl cap 250 mg (Vancocin hcl)..... 6
VANDETANIB – vandetanib tab 100 mg.....8
VANDETANIB – vandetanib tab 300 mg.....8
venlafaxine hcl cap sr 24hr 150 mg (base equivalent) (Effexor xr).....28
venlafaxine hcl cap sr 24hr 37.5 mg (base equivalent) (Effexor xr).....28
venlafaxine hcl cap sr 24hr 75 mg (base equivalent) (Effexor xr).....29
VENLAFAXINE HCL ER – venlafaxine hcl tab sr 24hr 225 mg (base equivalent).....29
venlafaxine hcl tab 100 mg..... 29
venlafaxine hcl tab 25 mg..... 29
venlafaxine hcl tab 37.5 mg.....29
venlafaxine hcl tab 50 mg..... 29
venlafaxine hcl tab 75 mg..... 29
venlafaxine hcl tab sr 24hr 150 mg (base equivalent) (Venlafaxine hcl er).....29
venlafaxine hcl tab sr 24hr 37.5 mg (base equivalent) (Venlafaxine hcl er).....29
venlafaxine hcl tab sr 24hr 75 mg (base equivalent) (Venlafaxine hcl er).....29
VENTAVIS – iloprost inhalation solution 10 mcg/ml..... 22
VENTAVIS – iloprost inhalation solution 20 mcg/ml..... 22
VENTOLIN HFA – albuterol sulfate inhal aero 108 mcg/act (90mcg base equiv).....24
verapamil hcl cap sr 24hr 100 mg (Verelan pm)..... 19
verapamil hcl cap sr 24hr 120 mg (Verelan).....19
verapamil hcl cap sr 24hr 180 mg (Verelan).....19
verapamil hcl cap sr 24hr 200 mg (Verelan pm)..... 19
verapamil hcl cap sr 24hr 240 mg (Verelan).....19
verapamil hcl cap sr 24hr 300 mg (Verelan pm)..... 19
verapamil hcl cap sr 24hr 360 mg (Verelan).....19
verapamil hcl tab 120 mg (Calan)..... 19
verapamil hcl tab 80 mg (Calan)..... 19
verapamil hcl tab cr 120 mg (Calan sr)..... 19
verapamil hcl tab cr 180 mg (Calan sr)..... 19
verapamil hcl tab cr 240 mg (Calan sr)..... 19
VERAPAMIL HCL – verapamil hcl tab 40 mg..... 19
VESICARE – solifenacin succinate tab 10 mg..... 26
VESICARE – solifenacin succinate tab 5 mg..... 26
VICTOZA – liraglutide soln pen-injector 18 mg/3ml (6 mg/ml)..... 13
VIDEX – didanosine for soln 2 gm.....5
VIDEX – didanosine for soln 4 gm.....5
VIGAMOX – moxifloxacin hcl ophth soln 0.5% (base equiv)..... 42
VINACAL B – prenat w/o a w/fecbn-feglu-fa tab 20-1 mg & vit b6 tab pak..... 39
VINACAL – prenatal w/o a w/ fe carbonyl-fe gluc-dss-fa tab 27-1mg.....39
VINATE AZ EXTRA – prenatal vit w/ fe bisglycinate chelate-fa tab 29-1 mg..... 39
VINATE AZ – prenatal vit w/ fe bisglycinate chelate-fa tab 27-1 mg..... 39
VINATE CALCIUM – prenatal vit w/ iron carbonyl-fe gluc-fa tab 27-1 mg..... 39
VINATE CARE – prenatal w/o a vit w/ fe fum-fa tab chew 40-1 mg.....39
VINATE C – prenatal w/o a vit w/ fe fumarate-fa tab 30-1 mg..... 39
VINATE DHA – prenat w/o a w/fefum-methylfol-fa-omegas cap 27-1.53 mg.....40
VINATE DHA RF – prenat w/o a w/fefum-methylfol-omegas cap 27-1.13 mg.....40
VINATE GT – prenatal vit w/ dss-iron carbonyl-fa tab 90-1 mg.....40
VINATE IC – prenatal w/o a w/fe fum-fe poly-fa cap 162.115.2-1 mg.....40
VINATE II – prenatal vit w/ fe bisglycinate chelate-fa tab 29-1 mg.....40
VINATE M – prenatal vit w/ sel-fe fumarate-fa tab 27-1 mg..... 40
VINATE ONE – prenatal vit w/ fe fumarate-fa tab 60-1 mg..... 40
VINATE PN CARE – prenatal without a w/ fe asparto gly-doc-fa tab 30-1mg.....40
VINATE ULTRA – prenatal vit w/ dss-iron carbonyl-fa tab 90-1 mg.....40
VIRACEPT – nelfinavir mesylate tab 250 mg.....5
VIRACEPT – nelfinavir mesylate tab 625 mg.....5
VIRAMUNE – nevirapine susp 50 mg/5ml..... 5
VIRAMUNE XR – nevirapine tab sr 24hr 100 mg.....5
VIRAMUNE XR – nevirapine tab sr 24hr 400 mg.....5
VIREAD – tenofovir disoproxil fumarate oral powder 40 mg/gm..... 5
VIREAD – tenofovir disoproxil fumarate tab 150 mg..... 5
VIREAD – tenofovir disoproxil fumarate tab 200 mg..... 5
VIREAD – tenofovir disoproxil fumarate tab 250 mg..... 5
VIREAD – tenofovir disoproxil fumarate tab 300 mg..... 5
VITAMIN K1 – phytonadione inj 10 mg/ml..... 39

VIVELLE-DOT – estradiol td patch biweekly 0.025 mg/24hr....10
VIVELLE-DOT – estradiol td patch biweekly 0.0375 mg/24hr....10
VIVELLE-DOT – estradiol td patch biweekly 0.05 mg/24hr....10
VIVELLE-DOT – estradiol td patch biweekly 0.075 mg/24hr....10
VIVELLE-DOT – estradiol td patch biweekly 0.1 mg/24hr....10
VOLTAREN – diclofenac sodium gel 1%....44
voriconazole for susp 40 mg/ml (Vfend)....3
voriconazole tab 200 mg (Vfend)....3
voriconazole tab 50 mg (Vfend)....3
VOTRIENT – pazopanib hcl tab 200 mg (base equiv)....8
VYVANSE – lisdexamfetamine dimesylate cap 20 mg....31
VYVANSE – lisdexamfetamine dimesylate cap 30 mg....32
VYVANSE – lisdexamfetamine dimesylate cap 40 mg....32
VYVANSE – lisdexamfetamine dimesylate cap 50 mg....32
VYVANSE – lisdexamfetamine dimesylate cap 60 mg....32
VYVANSE – lisdexamfetamine dimesylate cap 70 mg....32

W

warfarin sodium tab 10 mg (Coumadin)....42
warfarin sodium tab 1 mg (Coumadin)....41
warfarin sodium tab 2.5 mg (Coumadin)....42
warfarin sodium tab 2 mg (Coumadin)....42
warfarin sodium tab 3 mg (Coumadin)....42
warfarin sodium tab 4 mg (Coumadin)....42
warfarin sodium tab 5 mg (Coumadin)....42
warfarin sodium tab 6 mg (Coumadin)....42
warfarin sodium tab 7.5 mg (Coumadin)....42
WELCHOL – colesevelam hcl packet for susp 3.75 gm. 20
WELCHOL – colesevelam hcl tab 625 mg....20

X

XALKORI – crizotinib cap 200 mg....8
XALKORI – crizotinib cap 250 mg....8
XARELTO – rivaroxaban tab 10 mg....42
XARELTO – rivaroxaban tab 15 mg....42
XARELTO – rivaroxaban tab 20 mg....42
XENAZINE – tetrabenazine tab 12.5 mg....33
XENAZINE – tetrabenazine tab 25 mg....33
XERAC AC – aluminum chloride in alcohol solution 6.25%....46
XIFAXAN – rifaximin tab 550 mg....6
XOLAIR – omalizumab for inj 150 mg....24
XTANDI – enzalutamide cap 40 mg....8

Y

Z

zafirlukast tab 10 mg (Accolate)....24
zafirlukast tab 20 mg (Accolate)....24
zaleplon cap 10 mg (Sonata)....30
zaleplon cap 5 mg (Sonata)....30
ZELBORAF – vemurafenib tab 240 mg (base equivalent)8
ZENPEP – pancrelipase (lip-prot-amyl) dr cap 10000-34000-55000 unit....25
ZENPEP – pancrelipase (lip-prot-amyl) dr cap 15000-51000-82000 unit....25
ZENPEP – pancrelipase (lip-prot-amyl) dr cap 20000-68000-109000 unit....25
ZENPEP – pancrelipase (lip-prot-amyl) dr cap 25000-85000-136000 unit....25
ZENPEP – pancrelipase (lip-prot-amyl) dr cap 3000-10000-16000 unit....25
ZENPEP – pancrelipase (lip-prot-amyl) dr cap 5000-17000-27000 unit....25
ZIAGEN – abacavir sulfate soln 20 mg/ml (base equiv)... 5
zidovudine cap 100 mg (Retrovir)....5
zidovudine syrup 10 mg/ml (Retrovir)....5
zidovudine tab 300 mg....5
ziprasidone hcl cap 20 mg (Geodon)....30
ziprasidone hcl cap 40 mg (Geodon)....30
ziprasidone hcl cap 60 mg (Geodon)....30
ziprasidone hcl cap 80 mg (Geodon)....30
ZITHROMAX – azithromycin powd pack for susp 1 gm....2
ZOLINZA – vorinostat cap 100 mg....8
zolmitriptan orally disintegrating tab 2.5 mg (Zomig zmt)....36
zolmitriptan orally disintegrating tab 5 mg (Zomig zmt)....36
zolmitriptan tab 2.5 mg (Zomig)....36
zolmitriptan tab 5 mg (Zomig)....36
zolpidem tartrate tab 10 mg (Ambien)....30
zolpidem tartrate tab 5 mg (Ambien)....30
zolpidem tartrate tab cr 12.5 mg (Ambien cr)....30
zolpidem tartrate tab cr 6.25 mg (Ambien cr)....30
zonisamide cap 100 mg (Zonegran)....38
zonisamide cap 25 mg (Zonegran)....38
zonisamide cap 50 mg....38
ZORTRESS – everolimus tab 0.25 mg....47
ZORTRESS – everolimus tab 0.5 mg....47
ZORTRESS – everolimus tab 0.75 mg....47
ZOVIA 1/50E – ethynodiol diacetate & ethinyl estradiol tab 1 mg-50 mcg....11
ZYCLARA – imiquimod cream 3.75%....46
ZYCLARA PUMP – imiquimod cream 2.5%....46
ZYCLARA PUMP – imiquimod cream 3.75%....46
ZYKADIA – ceritinib cap 150 mg....8
ZYLET – loteprednol etabonate-tobramycin ophth susp 0.5-0.3%....42
ZYTIGA – abiraterone acetate tab 250 mg....8
ZYVOX – linezolid for susp 100 mg/5ml....6
ZYVOX – linezolid tab 600 mg....6

Attachment 17

Attachment 17

Pharmacy Reporting

PRIME THERAPEUTICS®

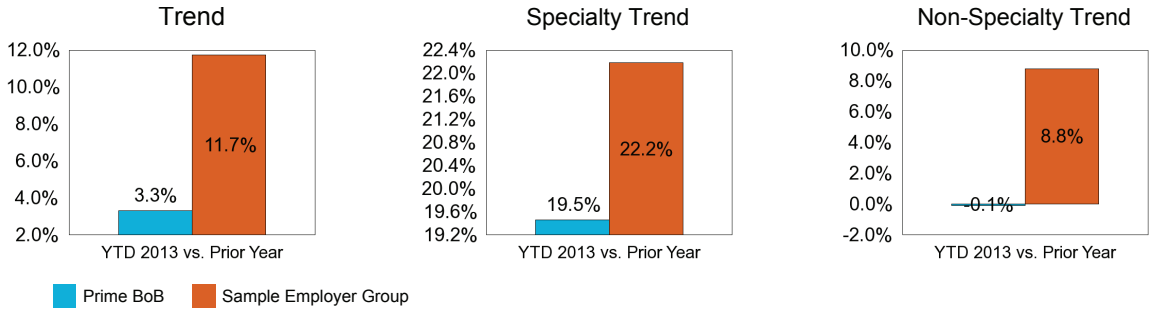
Sample Employer Group,
Group Review Trend Performance Suite

Year to Date through Quarter 4, 2013

Helping people get the medicine they need to feel better
and live well through smart pharmacy benefit management

Executive Summary

4.2%	5.8%	1.5%	11.7%
utilization	**inflation**	**mix**	**drug trend**
change in number of drugs used	change in unit cost of drugs	change in high cost verses low cost drugs	change in total cost per member, per month



At Prime, people are at the center of everything we do. We help keep medicine more affordable. We deliver superior experiences. And we leverage our unique connections to drive better outcomes and lower costs for everyone.

Key Performance Indicators

	YTD Q4, 13	YTD Q4, 12	Chg	Prime BoB	Prime % Chg
Average Members Per Month	7,072	7,277	-2.8%	--	--
Total Cost	$6,913,831	$6,366,520	8.6%	--	--
Plan Paid	$5,820,066	$5,256,428	10.7%	--	--
Member Paid	$1,093,766	$1,110,092	-1.5%	--	--
Total Cost PMPM	$81.47	$72.91	11.7%		
Plan Paid PMPM	$68.58	$60.20	13.9%		
Member Paid PMPM	$12.89	$12.71	1.4%		
Member Contribution	15.8%	17.4%	-1.6 pts		
Specialty Total Cost*	$1,660,164	$1,398,070	18.7%	--	--
Specialty Total Cost PMPM*	$19.56	$16.01	22.2%		
Avg Ing Cost/Rx	$76.98	$71.68	7.4%		
PMPY - Rxs	12.5	11.99	4.2%		
Generic Utilization	80.0%	78.2%	1.8 pts		
90 Day Rx Utilization (Mail)	1.4%	0.7%	0.6 pts		
90 Day Rx Utilization (ESN)	-0.1%	-0.1%	-0.1 pts		

*Specialty metrics are derived from Prime's standard specialty drug management list

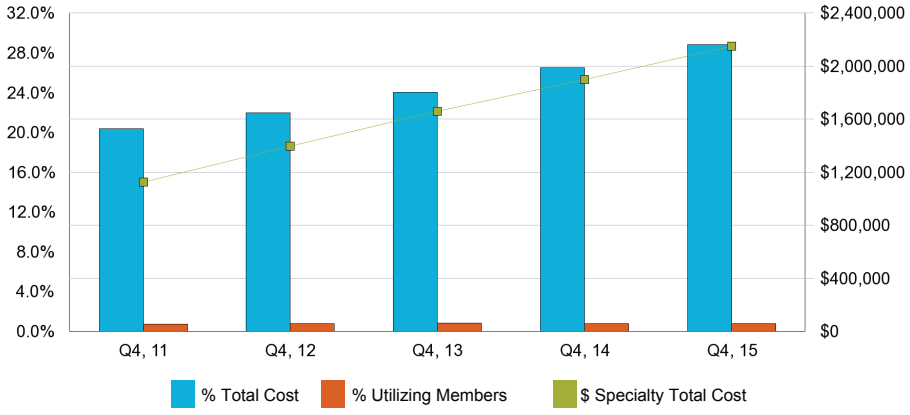
2.2%	11.9%	6.8%	22.2%
utilization	**inflation**	**mix**	**drug trend**
change in number of drugs used	change in unit cost of drugs	change in high cost verses low cost drugs	change in total cost per member, per month

Despite the small number of specialty drugs used, they will have a huge impact on total costs. Specialty drugs represent 0.61% of all prescriptions, but still account for 24.0% of total drug cost.

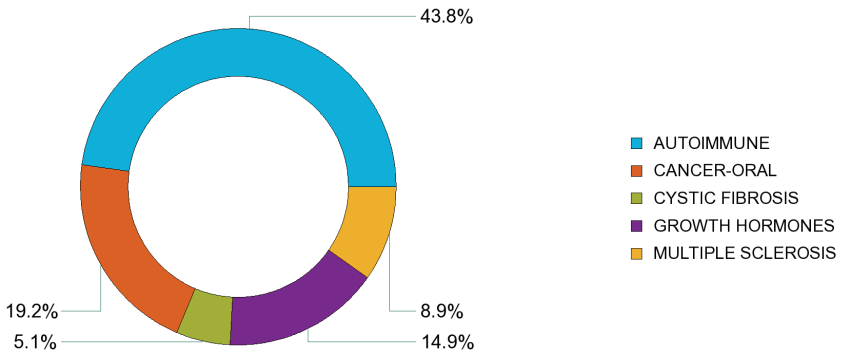
Key Performance Indicators

	YTD Q4, 13	YTD Q4, 12	Chg	Prime BoB
# Rxs	452	454	-0.4%	--
PMPY - RXs	0.07	0.07	2.3%	0.05
% Rxs	0.61%	0.61%	0.00 pts	0.38%
Specialty Total Cost	$1,660,164	$1,398,070	18.7%	--
Specialty Total Cost PMPM	$19.56	$16.01	22.2%	
% Total Cost	24.0%	22.0%	2.1 pts	20.2%
Avg Ing Cost/Rx	$3,495.89	$2,924.15	19.6%	

Specialty Trend



Top Therapeutic Classes account for 91.8% of all Specialty Cost



Specialty costs are expected to push overall drug trend into double digits soon. As costly new drugs continue to emerge, we can help keep medicine affordable — for you and your members. Our national scale, experience and big-picture view will work for you to deliver superior service and lower costs.

Specialty Drug Utilization by Volume*

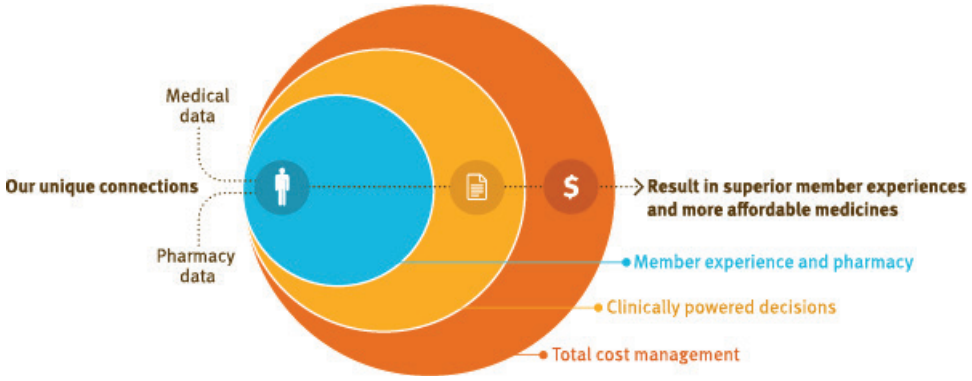
Q4, 13 Rank	Q4, 12 Rank	Drug Name	Therapeutic Class	Utilizing Members	# Rxs	Avg Ing Cost/Rx Current Paid	Avg Ing Cost/Rx Previous Paid
1	1	HUMIRA PEN	AUTOIMMUNE	14	124	$3,060	$2,722
2	2	ENBREL	AUTOIMMUNE	6	59	$2,331	$2,030
3	5	OMNITROPE	GROWTH HORMONES	5	46	$4,859	$4,335
4	3	ENBREL SURECLICK	AUTOIMMUNE	6	45	$2,324	$2,105
5	6	REBIF	MULTIPLE SCLEROSIS	3	25	$4,362	$3,693
6	12	AMPYRA	MULTIPLE SCLEROSIS	2	21	$1,484	$1,351
6	18	ORENCIA	AUTOIMMUNE	3	21	$2,433	$2,239
8	4	GLEEVEC	CANCER-ORAL	2	17	$6,776	$5,973
8	7	PULMOZYME	CYSTIC FIBROSIS	4	17	$3,692	$2,968
10	8	HUMIRA	AUTOIMMUNE	2	15	$2,366	$2,795

*Specialty metrics are derived from Prime's standard specialty drug management list

Prime Therapeutics Specialty Pharmacy™ (Prime Specialty Pharmacy) is a state-of-the-art, full-service pharmacy backed by major accreditation and more than 100 experts.

Prime Specialty Pharmacy

- Benefit design consultation
- Formulary options
- Utilization management options
- Member-centered support services
- Specialty drug pipeline analysis

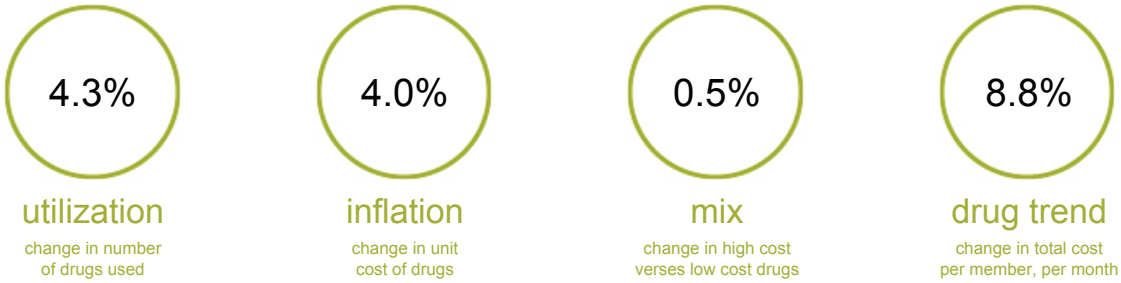


Our in-house specialty pharmacy has everything you need to drive better outcomes, experiences and savings. People using Prime Specialty Pharmacy are shown to have higher adherence, which can lead to improved outcomes and fewer costly hospital stays. And they're supported 24/7/365 by nurses and pharmacists, so when questions arise, answers are always just a call away.

Specialty Claim Distribution*

Channel	# Util Mbrs	# of Rxs	% Total Cost	Ingredient Cost	Dispensing Fee	Mandatory PSP Est. Ing Cost	Mandatory PSP Est. Savings
Prime Specialty Pharmacy (PSP)	13	85	18.6%	$331,108	$0	$329,736	$1,372
Retail Pharmacy	51	424	63.8%	$1,130,856	$20	$1,130,856	$0
Specialty Vendors	13	80	17.6%	$313,514	$6	$312,311	$1,208
TOTAL	**N/A**	**589**	**100.0%**	**$1,775,478**	**$26**	**$1,773,310**	**$2,580**

*Claims based on the specialty drug management list of the specific employer group



Top 15 Drugs (Non-Specialty) by Plan Paid*

Q4, 13 Rank	Q4, 12 Rank	Drug Name	Therapeutic Class	Plan Paid PMPM	Avg Ing Cost/Rx	Mbr Paid PMPM	# Rxs
1	1	ATRIPLA	HIV	$1.35	$1,923.85	$0.02	61
2	6	ANDROGEL PUMP	NOT IN CORE AREAS	$1.30	$450.99	$0.12	267
3	2	NEXIUM	PPIs	$1.20	$228.22	$0.24	536
4	7	AMPHETAMINE/DEXTROAMPH	ADHD	$1.13	$117.18	$0.15	924
5	9	ABILIFY	OTHER - ANTIPSYCHOTIC	$1.06	$742.14	$0.09	132
6	5	CYMBALTA	DEPRESSION	$1.03	$248.64	$0.18	415
7	3	CRESTOR	ANTIHYPERLIPIDEMIC	$1.02	$169.01	$0.20	613
8	4	ADVAIR DISKUS	ASTHMA/COPD	$0.81	$270.24	$0.12	296
9	13	VYVANSE	ADHD	$0.68	$181.49	$0.20	414
10	14	NOVOLOG	DIABETES	$0.65	$448.44	$0.04	132
11	10	VALACYCLOVIR HCL	NOT IN CORE AREAS	$0.52	$79.18	$0.05	612
12	361	METHYLPHENIDATE HCL ER	ADHD	$0.50	$157.49	$0.02	280
13	23	LANTUS SOLOSTAR	DIABETES	$0.49	$240.59	$0.06	196
14	19	NOVOLOG FLEXPEN	DIABETES	$0.46	$342.97	$0.03	125
15	37	VICTOZA	DIABETES	$0.45	$457.72	$0.03	90

*Specialty claims are exclueded based on Prime's standard specialty drug management list

Prime leads the market in managing traditional drug costs. Our drug trend is consistently lower than the industry standard.That means we're doing our job — making the medicine members need to feel better and live well more affordable.

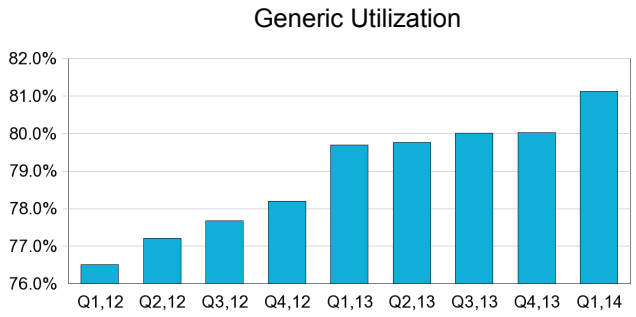
Therapeutic Class Summary

	Utilizing Members		PMPY - Rxs		Total Cost PMPM		Generic Utilization	
Category	YTD Q4, 13	YTD Q4, 12	YTD Q4, 13	YTD Q4, 12	YTD Q4, 13	YTD Q4, 12	YTD Q4, 13	YTD Q4, 12
High Cholesterol	739	762	0.92	0.87	$3.57	$3.95	80.7%	75.0%
Diabetes	318	311	0.62	0.57	$6.37	$5.04	45.4%	46.2%
Hypertension	1,118	1,167	1.90	1.83	$3.05	$3.17	93.3%	92.0%
Depression	850	923	0.93	0.92	$2.96	$3.47	88.8%	86.0%
Asthma/COPD	744	778	0.42	0.38	$3.56	$4.01	39.3%	20.3%

A 4.98 pt increase in generic utilization leads to $516,463 in savings*

Prime Products & Services can increase Generic Utilization Rate

- Utilization Management
- Formulary
- Benefit Design



Generic Trend

	YTD Q4, 13			YTD Q4, 12			Chg			Prime BoB	
	# Rxs	% Rxs	Avg Ing Cost/Rx	# Rxs	% Rxs	Avg Ing. Cost/Rx	# Rxs	Pts	Avg Ing Cost/Rx	% Rxs	Avg Ing Cost/Rx
Generic Utilization	58,044	80.0%	$21.81	57,373	78.2%	$21.07	8.6%	1.8	3.5%	80.2%	$19.72

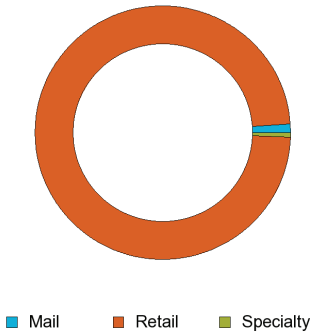
Generic Opportunity

				$ Avg Total Cost		% Generic Target Rates**			$ Target Savings		
Therapeutic Class	**$ Cost**	**% Cost**	**% Generic**	**Generic**	**Brand**	**Low**	**Med**	**High**	**Low**	**Med**	**High**
ADHD	390,290	5.6%	59.7%	$126.53	$215.38	40.0%	50.0%	65.0%	Already Met	Already Met	$27,274
ANTIHYPERLIPIDEMIC	302,650	4.4%	80.7%	$16.00	$175.29	75.0%	85.0%	95.0%	Already Met	$134,379	$201,568
ASTHMA/COPD	302,343	4.4%	39.3%	$40.31	$142.82	45.0%	55.0%	65.0%	$47,467	$74,488	$101,510
DIABETES	540,287	7.8%	45.4%	$16.64	$212.30	45.0%	50.0%	60.0%	Already Met	$180,966	$242,384
PAIN	299,156	4.3%	91.2%	$21.27	$263.82	85.0%	93.0%	97.0%	Already Met	$38,798	$104,840
TOTAL	**1,834,726**	**26.5%**	**69.8%**	**29.68**	**192.95**				**$47,467**	**$428,632**	**$677,576**
% Savings									**2.6%**	**23.4%**	**36.9%**

**Generic Target Savings rates are determined by Prime's Clinical Team

*This information is only an estimate and should not be considered binding

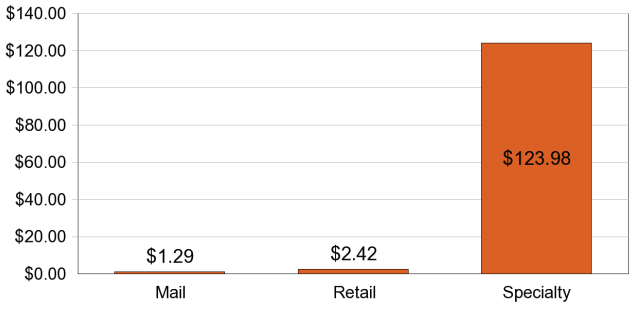
Rxs by Channel



Cost by Channel

	Retail	Mail	ESN	Specialty
# Rxs	72,150	907	--	452
% Rxs	98.2%	1.2%	--	0.6%
% Total Cost	74.6%	1.4%	--	24.0%
Avg Total Cost/Rx	$59.16	$38.54	--	$3,495.89
Avg Plan Paid/Rx	$48.04	$32.25	--	$3,450.27
Avg Total Cost/Day	$2.42	$1.29	--	$123.98
Generic Utilization	80.2%	86.9%	--	2.1%
Member Contribution	20.4%	16.3%	--	1.5%

Avg Cost per Day by Channel



Prime serves 25 million members nationwide, and we handle over 200 million claims each year. Our size, market share and expertise result in market-leading generic rates, net-ingredient costs and drug trend. And that means sizable savings for you. Because of our unique ownership structure, we pass savings on to clients — not shareholders.

Thank you for choosing Prime. This report is part of our efforts to help you gauge the financial performance of your pharmacy benefit. We're dedicated to helping you clearly see the whole picture and drive down your total cost of care — so your employees can get the medicine they need to feel better and live well.

Pharmacy Management Continuum

	Company A Not Managed	Company B Lightly Managed	Company C Managed	Company D Highly Managed	Company E Aggressively Managed
Specialty	Open specialty benefit	Open specialty network	Exclusive specialty network	Exclusive specialty program	Exclusive specialty program
Formulary	Commercial	Commercial	Commercial	Commercial	GenPlus
Quantity Limit/ Prior Authorization	None	All applicable classes	All applicable classes	All applicable classes	All applicable classes
Mail Service and % 90 day Rx	0	< 5%	Incented 5-10%	Mandatory 10-20%	Mandatory > 20%
Employee Cost Share	< 15%	15-20%	20-25%	25-30%	> 30%
Generic Utilization	68%	71%	74%	80%	87%
Retail Network	Open retail network	Open retail network	Open retail network	Open retail network	Narrower retail network
Step Therapy	None	Basic	Preferred	Preferred or enhanced	Preferred

Connected specialty drug management

With specialty costs projected to double in the next five years, proactively managing these expenses now is crucial. Our end-to-end specialty pharmacy, high-touch care management and suite of clinical solutions can help you lower the total cost of care while delivering superior member experiences.

Mail-delivery pharmacy services

Are you taking full advantage of mail-order pharmacy services savings? PrimeMail® offers sizable savings through bulk purchasing, elimination of dispensing fees and improved adherence. Plus, it provides added convenience and privacy for members.

Traditional drug management

They don't garner as much attention as specialty medicines, but traditional drugs account for 99 percent of claims. With a leading generic rate, a big-picture perspective and the expertise that comes along with serving more than 25 million members, we can help you streamline and save in this arena.

Utilization management (UM) programs

Our programs are built on the fact that members who adhere to their drug therapy are more likely to have better health outcomes and lower overall care costs. Through UM, we can help you manage your members' drug use patterns to help you achieve both of these goals.

Pipeline Watch

Generic Name	Brand Name	Manufacturer Name	Indication(s)	Route of Administration	Approval Date*
apremilast	N/A	Celgene	Psoriatic arthritis	Oral	Anytime
recombinant factor IX	Alprolix™	Biogen	Hemophilia B	Intravenous infusion	April 2014
recombinant human C1 esterase inhibitor	Ruconest™	Santarus/Pharming	Hereditary angioedema	Intravenous infusion	April 2014
siltuximab	N/A	J&J	Castleman disease	Intravenous infusion	May 2014
vedolizumab	Entyvio™	Takeda	Ulcerative colitis	Intravenous infusion	May 2014
peginterferon beta 1a	Plegridy™	Biogen	Multiple sclerosis	Subcutaneous injection	May 2014
dexamethasone, intravitreal implant	Ozurdex Eloctate®	Allergan	Diabetic macular edema	Intravitreal implant	June 2014
recombinant factor VIII Fc fusion protein	Eloctate™	Biogen	Hemophilia A	Intravenous infusion	June 2014
corifollitropin alfa	N/A	Merck	Fertility	Subcutaneous injection	July 2014

* Expected approval dates are predictions made by Prime Therapeutics based on industry information

Attachment 18

Attachment 18

Specialty Drug Listing

Blue Cross Blue Shield of North Dakota
Specialty Drug List

Specialty Drug – medications or drugs that are generally high cost and may have other considerations such as special drug administration, limited availability, unique delivery and dispensing or unique and/or required patient support or monitoring.

Use of some products identified by **[PA]** may be approved only after certain criteria are met. If prior approval is not obtained, benefits may be denied if criteria are not met. A physician (or clinic personnel) should submit a written request to the address shown below for prior approval consideration. **Both brand name drugs and generic equivalents require Prior Approval.**

Mail to:
BCBSND
Attn: Medical Management
4510 13th Ave S
Fargo, ND 58121

Fax to: (701) 277-2253

CATEGORY	BRAND NAME(S)	GENERIC NAME	PA required
AUTOIMMUNE INFLAMMATORY DISORDERS	ACTEMRA	TOCILIZUMAB	[PA]
	AMEVIVE	ALEFACEPT	[PA]
	ARCALYST	RILONACEPT	[PA]
	ENBREL	ETANERCEPT	[PA]
	HUMIRA	ADALIMUMAB	[PA]
	ILARIS	CANAKINUMAB	[PA]
	KINERET	ANAKINRA	[PA]
	ORENCIA	ABATACEPT	[PA]
	OTEZLA	APREMILAST	
	SIMPONI/SIMPONI ARIA	GOLIMUMAB	[PA]
	XELJANZ	TOFACITINIB	[PA]
BLOOD MODIFIERS	ARANESP	DARBEPOETIN ALFA	
	EPOGEN	EPOETIN ALFA	
	LEUKINE	SARGRAMOSTIM	
	NEULASTA	PEGFILGRASTIM	
	NEUMEGA	OPRELVEKIN	
	NEUPOGEN	FILGRASTIM	
	NPLATE	ROMIPLOSTIM	[PA]
	PROCRIT	EPOETIN ALFA	
	PROMACTA	ELTROMBOPAG	[PA]
CANCER-ORAL	AFINITOR/AFINITOR DISPERZ	EVEROLIMUS	[PA]
	BOSULIF	BOSUTINIB	[PA]
	CAPRELSA	VANDETANIB	[PA]
	COMETRIQ	CABOZANTINIB S-MAL	[PA]
	ERIVEDGE	VISMODEGIB	[PA]
	GILOTRIF	AFATINIB	
	GLEEVEC	IMATINIB	[PA]
	HEXALEN	ALTRETAMINE	
	HYCAMTIN	TOPOTECAN	[PA]
	ICLUSIG	PONATINIB	[PA]
	IMBRUVICA	IBRUTINIB	[PA]
	INLYTA	AXITINIB	[PA]

CATEGORY	BRAND NAME(S)	GENERIC NAME	PA required
CANCER-ORAL (con't)	JAKAFI	RUXOLITINIB	[PA]
	LYSODREN	MITOTANE	
	MATULANE	PROCARBAZINE	
	MEKINIST	TRAMETINIB	[PA]
	NEXAVAR	SORAFENIB	[PA]
	POMALYST	POMALIDOMIDE	
	REVLIMID	LENALIDOMIDE	[PA]
	SPRYCEL	DASATINIB	[PA]
	STIVARGA	REGORAFENIB	[PA]
	SUTENT	SUNITINIB	[PA]
	TAFINLAR	DABRAFENIB	[PA]
	TARCEVA	ERLOTINIB	[PA]
	TARGRETIN	BEXAROTENE	
	TASIGNA	NILOTINIB	[PA]
	TEMODAR	TEMOZOLOMIDE	
	THALOMID	THALIDOMIDE	[PA]
	TRETINOIN	TRETINOIN	
	TYKERB	LAPATINIB	[PA]
	VANDETANIB	VANDETANIB	[PA]
	VOTRIENT	PAZOPANIB	[PA]
	XALKORI	CRIZOTINIB	[PA]
	XELODA	CAPECITABINE	[PA]
	XTANDI	ENZALUTAMIDE	[PA]
	ZELBORAF	VEMURAFENIB	[PA]
	ZOLINZA	VORINOSTAT	[PA]
	ZYKADIA	CERITINIB	
	ZYTIGA	ABIRATERONE	[PA]
CANCER- INJECTABLE	SYLATRON	PEGINTERFERON ALFA-2B	
CYSTIC FIBROSIS	CAYSTON	AZTREONAM	[PA]
	KALYDECO	IVACAFTOR	[PA]
	PULMOZYME	DORNASE ALFA	
	TOBI/TOBI PODHALR	TOBRAMYCIN NEBU SOLN	
	BETHKIS	TOBRAMYCIN NEBU SOLN	
ENZYME DEFICIENCIES	BUPHENYL	SODIUM PHENYLBUTYRATE	
	CARBAGLU	CARGLUMIC ACID	[PA]
	CYSTAGON	CYSTEAMINE BITARTRATE	
	CYSTARAN	CYSTEAMINE HCL	
	KUVAN	SAPROPTERIN	[PA]
	PROCYSBI	CYSTEAMINE BITARTRATE	
	RAVICTI	GLYCEROL PHENYLBUTYRATE	
	SUCRAID	SACROSIDASE	[PA]
	ZAVESCA	MIGLUSTAT	[PA]
GROWTH HORMONES	GENOTROPIN, HUMATROPE, NORDITROPIN, NUTROPIN/ NUTROPIN AQ, OMNITROPE, SAIZEN, SEROSTIM, TEV-TROPIN, ZORBTIVE	SOMATROPIN	[PA]
	INCRELEX	MECASERMIN	[PA]

CATEGORY	BRAND NAME(S)	GENERIC NAME	PA required
HEPATITIS	COPEGUS	RIBAVIRIN	
	INCIVEK	TELAPREVIR	[PA]
	INFERGEN	INTERFERON ALFACON	
	INTRON A	INTERFERON ALFA-2B	
	MODERIBA	RIBAVIRIN	
	OLYSIO	SIMEPRIVIR	[PA]
	PEGASYS	PEGINTERFERON ALFA-2A	
	PEG-INTRON	PEGINTERFERON ALFA-2B	
	REBETOL	RIBAVIRIN	
	RIBAPAK, RIBASPHERE, RIBATAB	RIBAVIRIN	
	SOVALDI	SOFOSBUVIR	[PA]
	VICTRELIS	BOCEPREVIR	[PA]
HIV	EGRIFTA	TESAMORELIN ACETATE	
	FUZEON	ENFUVIRTIDE	
INFERTILITY	BRAVELLE	UROFOLLITROPIN	
	CETROTIDE	CETRORELIX ACETATE	
	FOLLISTIM AQ	FOLLITROPIN BETA	
	GANIRELIX ACETATE	GANIRELIX ACETATE	
	GONAL-F	FOLLITROPIN ALFA	
	LUVERIS	LUTROPIN ALFA	
	MENOPUR	MENOTROPINS	
	NOVAREL	CHORIONIC GONADOTROPIN	
	OVIDREL	CHORIONIC GONADOTROPIN	
	PREGNYL	CHORIONIC GONADOTROPIN	
	REPRONEX	MENOTROPINS	
LUNG DISORDERS	ACTIMMUNE	INTERFERON GAMMA-1B	[PA]
MULTIPLE SCLEROSIS	AMPYRA	DALFAMPRIDINE	
	AUBAGIO	TERIFLUNOMIDE	[PA]
	AVONEX	INTERFERON BETA-1A	[PA]
	BETASERON	INTERFERON BETA-1B	[PA]
	COPAXONE	GLATIRAMER ACETATE	[PA]
	EXTAVIA	INTERFERON BETA-1B	[PA]
	GILENYA	FINGOLIMOD	[PA]
	REBIF	INTERFERON BETA-1A	[PA]
	TECFIDERA	DIMETHYL FUMARATE	[PA]
PULMONARY HYPERTENSION	ADCIRCA	TADALAFIL	[PA]
	ADEMPAS	RIOCIGUAT	[PA]
	LETAIRIS	AMBRISENTAN	[PA]
	OPSUMIT	MACITENTAN	[PA]
	ORENITRAM	TREPROSTINIL	[PA]
	REVATIO	SILDENAFIL CITRATE	[PA]
	TRACLEER	BOSENTAN	[PA]
	TYVASO	TREPROSTINIL	[PA]
	VENTAVIS	ILOPROST	[PA]
OTHERS	ALFERON N	INTERFERON ALFA-N3	
	APOKYN	APOMORPHINE	[PA]

CATEGORY	BRAND NAME(S)	GENERIC NAME	PA required
OTHERS (con't)	BERINERT	C1 ESTERASE INHIBITOR	
	CHENODAL	CHENODIOL	**[PA]**
	CUPRIMINE, DEPEN	PENICILLAMINE	
	EXJADE	DEFERASIROX	
	FERRIPROX	DEFERIPRONE	
	FIRAZYR	ICATIBANT ACETATE	
	FORTEO	TERIPARATIDE	**[PA]**
	GATTEX	TEDUGLUTIDE	
	JUXTAPID	LOMITAPIDE	**[PA]**
	KALBITOR	ECALLANTIDE	
	KORLYM	MIFEPRISTONE	
	KYNAMRO	MIPOMERSEN SODIUM	
	LUPRON	LEUPROLIDE ACETATE	
	LUPRON DEPOT	LEUPROLIDE ACETATE	
	LUPRON DEPOT-PED	LEUPROLIDE ACETATE	
	MYALEPT	METRELEPTIN	
	SAMSCA	TOLVAPTAN	**[PA]**
	SIGNIFOR	PASIREOTIDE	
	SYPRINE	TRIENTINE HCL	
	VALCHLOR	MECHLORETHAMINE	
	XENAZINE	TETRABENAZINE	**[PA]**
	XYREM	SODIUM OXYBATE	

Attachment 19

Attachment 19

Attachment 19

Pharmacy Network

NCPDP	NPI	Pharmacy Name	Address Line 1	Address Line 2	City	State	Zip
3500736	1811939416	NDSU STUDENT HEALTH SERVICE PHARMAC	1707 CENTENNIAL BLVD		FARGO	ND	58102
3504683	1790004182	DRAYTON DRUG	104 E HIGHWAY 66		DRAYTON	ND	58225
3502451	1194805796	FAMILY HEALTHCARE PHARMACY, NDSU	301 NP AVENUE		FARGO	ND	58102
3501170	1164579249	LARIMORE DRUG AND GIFT INC	203 TOWNER AVE		LARIMORE	ND	58251
3501853	1568408581	LARSEN SERVICE DRUG INC	244 N MAIN ST		WATFORD CITY	ND	58854
3504099	1093891095	LARSEN SERVICE DRUG INC	334 MAIN STREET		NEW TOWN	ND	58763
3503934	1689895427	TRENTON COMM CLN TRENTON INDIAN SVC	331 4TH AVE E		TRENTON	ND	58853
3500394	1730177510	CASSELTON HEALTH MART DRUG	622 FRONT STREET		CASSELTON	ND	58012
3504277	1982655049	ARTHUR DRUG	340 MAIN ST		ARTHUR	ND	58006
3504380	1740228774	GRAFTON DRUG	501 HILL AVE		GRAFTON	ND	58237
3500229	1295778082	BEULAH DRUG COMPANY	147 W MAIN		BEULAH	ND	58523
3500344	1023193554	BOWMAN DRUG	12 NORTH MAIN		BOWMAN	ND	58623
3500469	1881705499	J CO DRUG INC	120 N MAIN		CROSBY	ND	58730
3500635	1023036050	ECONOMY DRUG INC	201 N MAIN ST	PO BOX 308	ELGIN	ND	58533
3500659	1811031511	ELLENDALE PHARMACY	117 MAIN ST		ELLENDALE	ND	58436
3500801	1417945080	FORMAN DRUG INC	330 MAIN ST S		FORMAN	ND	58032
3500851	1619151206	GLEN ULLIN DRUG	113 S MAIN ST		GLEN ULLIN	ND	58631
3501144	1417968074	LAKOTA DRUG	117 MAIN ST		LAKOTA	ND	58344
3501485	1104927094	NAPOLEON DRUG	214 MAIN AVE		NAPOLEON	ND	58561
3501497	1588770440	NEW ENGLAND DRUG	713 E MAIN		NEW ENGLAND	ND	58647
3501536	1063690774	PAUL BILDEN PHARMACY	10 N MAIN ST		NORTHWOOD	ND	58267
3501601	1184669616	THE COUNTRY DRUG STORE	116 NORTH AVE EAST		RICHARDTON	ND	58652
3501714	1689725434	TIOGA DRUG INC	106 N MAIN ST		TIOGA	ND	58852
3502033	1144231705	NORTHBROOK DRUG	1929 N WASHINGTON ST	STE C	BISMARCK	ND	58501
3502766	1578588307	WISHEK DRUG INC	9 S CENTENNIAL		WISHEK	ND	58495
3503263	1770639130	ARROWHEAD PLAZA DRUG INC	1116 N 3RD ST		BISMARCK	ND	58501
3503504	1932241676	NILLES DRUG INC	58 MAIN AVE S		FESSENDEN	ND	58438
3503542	1386664829	LINSON PHARMACY	3175 25TH ST S		FARGO	ND	58103
3503744	1508972936	KILLDEER PHARMACY INC	14 CENTRAL AVE S		KILLDEER	ND	58640
3504025	1245347368	BEACH PHARMACY INC	95 CENTRAL AVE		BEACH	ND	58621
3504190	1982734042	CENTER FOR FAMILY MEDICINE PHARMACY	1201 11TH AVE SW		MINOT	ND	58701
3502982	1922000108	HOLIDAY PROFESSIONAL PHARMACY	1140 E. BISMARCK EXPRESSWAY		BISMARCK	ND	58504
3502944	1639254113	PRESCRIPTION CENTER PHARMACY	2701 13TH AVE S		FARGO	ND	58103
3503388	1396723797	SOUTHPOINTE PHARMACY	2400 32ND AVE S		FARGO	ND	58103
3501118	1396871216	KENMARE DRUG	109 NW 1ST AVE		KENMARE	ND	58746
3501790	1376646315	VELVA DRUG COMPANY	16 N MAIN ST		VELVA	ND	58790
3502312	1114055324	CHASE PHARMACY INC	21 N MAIN		GARRISON	ND	58540
3500445	1558379248	ALMKLOVS PHARMACY	848 BURREL AVE		COOPERSTOWN	ND	58425
3501473	1255486908	MOTT DRUG STORE	216 BROWN AVE		MOTT	ND	58646
3501625	1235140898	ROLLA DRUG INC	117 MAIN AVE E		ROLLA	ND	58367
3501738	1780699314	TURTLE LAKE REXALL DRUG	218 MAIN		TURTLE LAKE	ND	58575
3501841	1265548101	CHASE DRUG STORE	703 MAIN AVE		WASHBURN	ND	58577
3503617	1053414565	WALHALLA PRESCRIPTION SHOP	1102 CENTRAL AVE		WALHALLA	ND	58282

3504607	1982859617	NEUMANN DRUG	412 MAIN STREET		CANDO	ND	58324
3504859	1508120205	ROCKVIEW PHARMACY	307 3RD ST NE		PARSHALL	ND	58770
3502273	1720020324	YE OLDE MEDICINE CENTER	503 PARK ST WEST		PARK RIVER	ND	58270
3503794	1407861040	YE OLDE MEDICINE CENTER	102 DIVISION AVE S		CAVALIER	ND	58220
3500990	1710024807	HAZEN DRUG	30 MAIN ST W		HAZEN	ND	58545
3501310	1609908631	AASEN DRUG INC	15 MAIN ST E		MAYVILLE	ND	58257
3504532	1811153505	TAT TWIN BUTTES TELEPHARMACY	726 80 AVE NW		HALLIDAY	ND	58636
3504544	1801052592	TAT PARSHALL PHARMACY	107 3RD ST SE		PARSHALL	ND	58770
3504556	1124284914	TAT WHITE TELE PHARMACY	2 MAIN STREET B		ROSEGLEN	ND	58775
3504568	1063678779	TAT MANADREE TELEPHARMACY	305 MAIN STREET		MANDAREE	ND	58757
3504594	1467611970	ELBOWOODS PHARMACY	1058 COLLEGE DRIVE		NEW TOWN	ND	58763
3504342	1043260722	NORTH DAKOTA STATE HOSPITAL PHARMAC	2605 CIRCLE DR		JAMESTOWN	ND	58401
3504671	1982927406	WALLSLTC PHARMACY	1020 S WASHINGTON		GRAND FORKS	ND	58201
3501702	1437179371	STEELE DRUG	101 W BROADWAY		STEELE	ND	58482
3500899	1649363144	DEVELOPMENTAL CENTER PHARMACY	701 W 6TH ST		GRAFTON	ND	58237
3501079	1508924622	JAMESTOWN HOSPITAL PHARMACY	2422 20TH ST SW		JAMESTOWN	ND	58401
3504835	1730453366	SEIP DRUG #13	550 13TH AVE E STE B		WEST FARGO	ND	58078
3504847	1538428610	CENTER FOR FAMILY MEDICINE PHARMACY	701 E ROSSER		BISMARCK	ND	58501
3504900	1194922328	VALLEY HEALTH	360 DIVISION AVE STE 200		GRAND FORKS	ND	58201
3504998	1902853120	CENTRAL VALLEY FAMILY PLANNING	122 2ND ST NW		JAMESTOWN	ND	58401
3503958	1205925815	WHITE DRUG #50	107 SECOND STREET SE		RUGBY	ND	58368
3503984	1730242728	WHITE DRUG #53	201 EAST 3RD AVENUE SOUTH		CAVALIER	ND	58220
3503996	1396835237	WHITE DRUG #55	112 SOUTH MAIN STREET		HETTINGER	ND	58639
3504049	1205926144	WHITE DRUG #57	108 CENTRAL AVENUE		MADDOCK	ND	58348
3504051	1568552404	WHITE DRUG #58	208 MAIN STREET		ROLETTE	ND	58366
3504102	1477643310	WHITE DRUG #62	115 MAIN STREET WEST		MOHALL	ND	58761
3504431	1053475020	WHITE DRUG #66	109 W MAIN ST		ASHLEY	ND	58413
3504695	1548572076	WHITE DRUG #71	121 N BROADWAY ST		LINTON	ND	58552
3504289	1700828993	CVS PHARMACY #	1520 20TH AVE SW		MINOT	ND	58701
3504291	1619919800	CVS PHARMACY	1950 32ND AVE S		GRAND FORKS	ND	58201
3504304	1528000718	CVS PHARMACY	525 S 3RD ST		BISMARCK	ND	58504
3504316	1821039793	CVS PHARMACY #	2425 13TH AVE S		FARGO	ND	58103
3504328	1730120601	CVS PHARMACY	1225 E CALGARY AVENUE		BISMARCK	ND	58503
3504330	1649211517	CVS PHARMACY	1321 19TH AVE NORTH		FARGO	ND	58102
3503720	1093841496	MEDICAP PHARMACY	1395 SOUTH COLUMBIA ROAD	SUITE C	GRAND FORKS	ND	58201
3500142	1689763294	WHITE DRUG #9	2475 32ND AVE S	STE 1	GRAND FORKS	ND	58201
3501106	1497844005	WHITE DRUG #15	320 10TH ST SE		JAMESTOWN	ND	58401
3502362	1306935911	WHITE DRUG #17	1015 SOUTH BROADWAY	SUITE 3	MINOT	ND	58701
3502499	1215026828	WHITE DRUG #39	1401 33RD STREET SW		FARGO	ND	58103
3502502	1760572606	WHITE DRUG #5	117 NORTH FIFTH STREET		BISMARCK	ND	58501
3502677	1679663512	WHITE DRUG #40	2211 16TH STREET NW SUITE B		MINOT	ND	58703
3503009	1124117734	WHITE DRUG #34	1681 THIRD AVENUE WEST		DICKINSON	ND	58601
3503338	1588753198	THRIFTY WHITE PHARMACY #043	2600 OVERLOOK LN NW		MANDAN	ND	58554
3503807	1588754428	WHITE DRUG #45	310 FIRST AVENUE SOUTH		JAMESTOWN	ND	58401

3503857	1396834909	WHITE DRUG #47 DBA BELL DRUG	323 FIFTH STREET		DEVILS LAKE	ND	58301
3503869	1033208640	WHITE DRUG #46	1100 13TH AVENUE EAST		WEST FARGO	ND	58078
3503972	1114016722	WHITE DRUG #52	706 38TH STREET NW	UNIT B	FARGO	ND	58102
3504075	1023107638	WHITE DRUG #59 DBA VALLEY DRUG	239 2ND AVENUE NW		VALLEY CITY	ND	58072
3504114	1386734226	WHITE DRUG #63	425 COLLEGE DRIVE SOUTH	SUITE 10	DEVILS LAKE	ND	58301
3504126	1194815035	WHITE DRUG #60	148 SOUTH CENTRAL AVENUE		VALLEY CITY	ND	58072
3504138	1003906942	WHITE DRUG #61	706 38TH STREET NW	UNIT A	FARGO	ND	58102
3504164	1932298544	WHITE DRUG #65	544 HILL AVENUE		GRAFTON	ND	58237
3504417	1629182605	WHITE DRUG #67	300 11TH STREET W		WILLISTON	ND	58801
3504455	1730369711	WHITE DRUG #68	4255 30TH AVE S		FARGO	ND	58104
3504708	1184932063	WHITE DRUG #72	404 MAIN ST		LISBON	ND	58054
3504746	1124317490	WHITE DRUG #061T-MN	706 38TH ST NW	UNIT A	FARGO	ND	58102
3504861	1033460217	WHITE DRUG #73	213 1ST AVE N		JAMESTOWN	ND	58401
3504912	1477997005	THRIFTY WHITE PHARMACY #75	387 11TH ST S		WAHPETON	ND	58075
3504962	1760808299	WHITE DRUG #078	352 1ST ST E STE C		DICKINSON	ND	58601
3502730	1851485262	THE MEDICINE SHOPPE	1304 E BOULEVARD AVE		BISMARCK	ND	58501
3502867	1356413140	MEDICINE SHOPPE	209 11TH AVE SW		MINOT	ND	58701
3502968	1134110463	MEDICINE SHOPPE PHARMACY	703 1ST AVENUE S		JAMESTOWN	ND	58401
3503225	1265504054	MEDICINE SHOPPE	116 2ND AVE NW		MANDAN	ND	58554
3503326	1538271549	MEDICINE SHOPPE	1605 SOUTH UNIVERSITY DRIVE		FARGO	ND	58103
3503489	1447362454	MEDICINE SHOPPE	2800 N BROADWAY		FARGO	ND	58102
3504570	1629222542	MEDICINE SHOPPE	722 LINCOLN AVENUE		HARVEY	ND	58341
3504758	1043504574	MEDICINE SHOPPE	1571 W VILLARD ST # 1		DICKINSON	ND	58601
3502475	1790762318	UNIV OF ND STUDENT HLTH PHCY	2891 2ND AVE N STOP 9038	MCCANNEL HALL RM	GRAND FORKS	ND	58202
3500231	1790889715	SANFORD RETAIL PHARMACY	300 N 7TH ST		BISMARCK	ND	58501
3500697	1558458844	SANFORD PHARMACY SOUTH UNIVERSITY	1720 S UNIVERSITY DR		FARGO	ND	58103
3500712	1235173519	SANFORD PHARMACY BROADWAY	737 BROADWAY		FARGO	ND	58102
3500774	1356407910	SANFORD PHARMACY MILLS AVENUE	801 BROADWAY NORTH		FARGO	ND	58102
3501372	1326059981	B & B NORTHWEST PHARMACY	20 BURDICK EXPY W		MINOT	ND	58701
3501384	1093764599	KEYCARE PHARMACY	400 BURDICK EXPY E STE 201	SUITE 201	MINOT	ND	58701
3502083	1235277179	ALTRU RETAIL PHARMACY	1200 S COLUMBIA RD		GRAND FORKS	ND	58201
3502401	1013029024	CLINIC PHARMACY	2615 FAIRWAY STREET		DICKINSON	ND	58601
3503441	1144368085	FAMILY MEDICINE RESIDENCY PHARMACY	725 HAMLINE ST		GRAND FORKS	ND	58203
3502449	1407946338	WALLS MEDICINE CENTER	708 S WASHINGTON ST		GRAND FORKS	ND	58201
3504354	1912954165	MEDICAL PHARMACY SOUTH	4151 45TH ST SO		FARGO	ND	58104
3504405	1376632067	WALLS HEALTH MART PHARMACY	4440 S. WASHINGTON ST.	STE 101D	GRAND FORKS	ND	58201
3504986	1093134017	ST. ALEXIUS MANDAN PHARMACY	2501 SUNSET DRIVE NW, SUITE 2		MANDAN	ND	58554
3500130	1891891149	THE PRESCRIPTION SHOP INC	1210 SHEYENNE ST		WEST FARGO	ND	58078
3500281	1013018910	MAYO PHARMACY	303 N 4TH ST		BISMARCK	ND	58501
3500560	1245322437	GREENE DRUG AND GIFT COMPANY	16 W VILLARD ST		DICKINSON	ND	58601
3501803	1134345457	CORNER DRUG STORE	619 DAKOTA AVE		WAHPETON	ND	58075
3502172	1336283928	ST ALEXIUS COMMUNITY PHARMACY	900 E BROADWAY AVE		BISMARCK	ND	58506
3502689	1457419962	NORTHPORT DRUG	2522 N BROADWAY		FARGO	ND	58102
3502843	1558376152	N D PHARMACY INC	20 E 26TH ST		WILLISTON	ND	58801

3502879	1386680767	N D PHARMACY INC	446 18TH STREET WEST	STE 2	DICKINSON	ND	58601
3503213	1447356399	GATEWAY HEALTHMART PHARMACY NORTH	3101 N 11TH ST	SUITE 2	BISMARCK	ND	58503
3503237	1639111230	CHURCHILL PHARMACY INC	1190 W TURNPIKE AVE		BISMARCK	ND	58501
3503251	1669546149	CENTRAL AVENUE PHARMACY	323 CENTRAL AVE N	SUITE 101	VALLEY CITY	ND	58072
3503302	1184718876	CLINIC PHARMACY	1001 7TH ST NE		DEVILS LAKE	ND	58301
3503403	1710056452	NEW SALEM PHARMACY	509 ASH AVE		NEW SALEM	ND	58563
3503516	1790795987	BARRETT PHARMACY	145 N MAIN ST		WATFORD CITY	ND	58854
3503679	1205927571	GATEWAY HEALTHMART PHARMACY SOUTH	835 S WASHINGTON ST	SUITE 2	BISMARCK	ND	58504
3503821	1497847776	GATEWAY HEALTH MART PHARMACY MANDAN	500 BURLINGTON ST SE		MANDAN	ND	58554
3504215	1881791721	PRAIRIE PHARMACY FA1	4731 13TH AVE SW		FARGO	ND	58103
3504950	1275963308	GATEWAY HEALTHMART PHARMACY SUNRISE	4007 STATE ST STE L30		BISMARCK	ND	58503
3504760	1780962126	HEART OF AMERICA CLINIC PHARMACY	800 S MAIN AVE		RUGBY	ND	58368
3503883	1477652790	MINOT PHCY	10 MISSILE AVE	BLDG 194	MINOT AFB	ND	58705
3503895	1487716403	MINOT REFILL PHCY	10 MISSILE AVE	BLDG 194	MINOT AFB	ND	58705
3503908	1316001084	MINOT MAIN HCP PHCY	10 MISSILE AVE	BLDG 194	MINOT AFB	ND	58705
3503922	1366541682	GRAND FORKS PHCY 319TH MDG	1599 J ST BLDG 109	C/O 3RD PARTY COLL	GRAND FORKS AFB	ND	58205
3505003	1104231091	DOD GRAND FORKS EPHCY	1599 J ST		GRAND FORKS AFB	ND	58205
3505015	1801201793	DOD MINOT EPHCY	194 MISSILE AVE		MINOT AFB	ND	58705
3504633	1326279548	ALTRU CLINIC PHARMACY INC	1000 S COLUMBIA RD		GRAND FORKS	ND	58201
3504645	1871829028	ALTRU CLINIC PHARMACY - FAMILY MEDI	1380 S COLUMBIA RD		GRAND FORKS	ND	58201
3500091	1528120870	MEDICAL PHARMACY INC	100 SO 4TH ST		FARGO	ND	58103
3500952	1801900881	HANKINSON DRUG	309 S MAIN AVE		HANKINSON	ND	58041
3502487	1952407892	THRIFTY DRUG LTD	1521 S UNIVERSITY DR		FARGO	ND	58103
3502665	1588724728	METRO DRUG	123 N BROADWAY		FARGO	ND	58102
3503629	1881785053	THRIFTY DRUG LTD	1532 32ND AVE S		FARGO	ND	58103
3504936	1396184750	M-D PHARMACY	4101 13TH AVE S		FARGO	ND	58103
3500243	1548202369	DAKOTA PHARMACY OF BISMARCK INC	705 E MAIN AVE		BISMARCK	ND	58501
3500522	1588686539	RAMSEY DRUG COMPANY	401 COLLEGE DR S		DEVILS LAKE	ND	58301
3501132	1740249929	LA MOURE DRUG STORE	100 1ST AVE SW		LAMOURE	ND	58458
3501548	1528093259	OAKES DRUG	422 MAIN AVE		OAKES	ND	58474
3501699	1770698714	DAKOTA DRUG CO STANLEY	107 S MAIN ST		STANLEY	ND	58784
3501752	1548282403	NUCARA PHARMACY #31	234 CENTRAL AVE N		VALLEY CITY	ND	58072
3502829	1265535389	SHEYENNE VALLEY DRUG	407 MAIN ST		LISBON	ND	58054
3503061	1548281736	HERITAGE PHARMACY	401 9TH ST		BISMARCK	ND	58501
3503100	1962411868	THOMPSON DRUG	505 MAIN ST		BOTTINEAU	ND	58318
3503427	1306931977	SKIPS BUDGET DRUG	2015 LIBRARY CIRCLE	STE 102	GRAND FORKS	ND	58201
3503453	1235264862	MARKET PHARMACY	1930 S BROADWAY		MINOT	ND	58701
3503477	1336237346	WAHPETON DRUG COMPANY INC	508 DAKOTA AVE		WAHPETON	ND	58075
3504087	1548276371	HERITAGE PHARMACY EAST	1000 E ROSSER AVE		BISMARCK	ND	58501
3504152	1356453369	ENDERLIN PHARMACY	308 RAILWAY ST		ENDERLIN	ND	58027
3504443	1982826756	SEIP PRESCRIPTION SHOPPE #12	550 13TH AVE EAST		WEST FARGO	ND	58078
3504506	1184892523	TARAS THRIFTY WHITE LLC	610 MAIN AVE		OAKES	ND	58474
3504520	1790941342	BELCOURT DRUG INC	1110 HOSPITAL RD	1	BELCOURT	ND	58316
3504582	1326291238	HERITAGE PHARMACY GATEWAY MALL INC	2700 STATE ST	STE F13	BISMARCK	ND	58503

3504657	1336477223	SERVICE DRUG AND GIFT	815 LINCOLN AVE		HARVEY	ND	58341
3504722	1548566698	EDGELEY PHARM STORE	509 MAIN ST		EDGELEY	ND	58433
3504734	1669771523	DUNSEITH DRUG,INC.	10 MAIN ST SW		DUNSEITH	ND	58329
3504948	1508299272	SERVICE DRUG PHARMACY	317 MAIN		WILLISTON	ND	58801
3504974	1063839496	G & G PHARMACY	1500 14TH ST W STE 150		WILLISTON	ND	58801
3504063	1700844636	FARGO VAMC PHARMACY	2101 ELM ST		FARGO	ND	58102
3504493	1336318567	INNOVIS HEALTH	3000 32ND AVE SW		FARGO	ND	58104
3504710	1851691596	TRINITY HOSPITAL PHARMACY	BURDICK EXPRESSWAY AT MAIN ST		MINOT	ND	58701
3504772	1104112127	7 DAY CLINIC	1517 32ND AVE S		FARGO	ND	58103
3504784	1679869697	7 DAY CLINIC	4622 40TH AVE S		FARGO	ND	58104
3504796	1790060937	MERCY HOSPITAL	1301 15TH AVE W		WILLISTON	ND	58801
3504811	1457629834	ALTRU HEALTH SYSTEM	1200 S COLUMBIA RD		GRAND FORKS	ND	58206
3504885	1073867263	7 DAY CLINIC-NORTH FARGO LOCATION	1100 19TH AVE N		FARGO	ND	58102
3503693	1568592137	SPIRIT LAKE HEALTH CENTER PHARMACY	3883 74TH AVE NE		FORT TOTTEN	ND	58335
3503833	1770613325	FORT YATES INDIAN HOSPITAL PHARMACY	1010 N RIVER RD		FORT YATES	ND	58538
3503871	1790811503	QUENTIN N BURDICK IHS PHARMACY	1ST MAIN ST HIGHWAY 5		BELCOURT	ND	58316
3500318	1285651984	BOTTINEAU CLINIC PHARMACY	314 OHMER ST		BOTTINEAU	ND	58318
3500368	1275569790	CARRINGTON DRUG INC	415 MAIN ST		CARRINGTON	ND	58421
3501055	1740380542	HILLSBORO DRUG	13 N MAIN ST		HILLSBORO	ND	58045
3502146	1497767990	CENTRAL PHARMACY INC	990 MAIN ST		CARRINGTON	ND	58421
3503415	1154333730	CENTRAL PHARMACY INC	4 8TH ST NORTH		NEW ROCKFORD	ND	58356
3503756	1235177221	LANGDON COMMUNITY DRUG	805 3RD ST		LANGDON	ND	58249
3500685	1154332716	DAKOTA CLINIC PHARMACY	1702 S UNIVERSITY DR		FARGO	ND	58103
3502994	1487783262	WEST ACRES PHARMACY	3902 13TH AVENUE S	STE 3706	FARGO	ND	58103
3503770	1770626004	HEALTH CENTER PHARMACY	1401 13TH AVE E		WEST FARGO	ND	58078
3504897	1730421256	SKRIPTS PHARMACY	750 23RD AVE E		WEST FARGO	ND	58078
3503554	1043243272	PROFESSIONAL PHARMACY	3124 COLORADO LANE	#400	BISMARCK	ND	58503
3504619	1356570766	UNIT PAK	4153 12TH AVE. N.		FARGO	ND	58102

Attachment 20

Attachment 20

Attachment 20

Member Pre-Service Inquiry & Appeal Policy

Member Pre-Service Claim for Benefits Inquiry and Appeal Policy

The following is the BCBSND Member Pre-Service Inquiry and Appeal policy. The Inquiry and Appeal definitions are identified below. The Member can initiate an Inquiry or Appeal by contacting Member Services at the telephone number on the back of their ID card, by e-mail through the BCBSND website, or in writing to BCBSND Attn: Member Services Department, 4510 13th Ave S, Fargo, ND 58121.

Pre-Service Claim for Benefits Inquiry

A Pre-Service Claim for Benefits Inquiry is defined as a request, either verbal or written, that is conditioned on a Member obtaining approval in advance of obtaining the benefit or service.

There are two levels of Pre-Service inquiry:

- Pre-Service Claim for Benefits
- Emergency Claim for Benefits

A **Pre-Service** Claim for Benefits Inquiry will be responded to by BCBSND in writing within 15 calendar days.

An **Emergency** Claim for Benefits Inquiry is when the above timeframe for the Pre-Service Claim for Benefits Inquiry would seriously jeopardize the Member's life, health or ability to regain maximum function and will be responded to by verbal response from BCBSND within 72 hours, followed by written response within 3 calendar days. If the services in question meet the following definition of an Emergency Medical Condition, the Inquiry will be considered emergent. An Emergency Medical Condition is defined as:

- A medical condition of recent onset and severity, including severe pain, that would lead a prudent layperson acting reasonably and possessing an average knowledge of health and medicine to believe that the absence of immediate medical attention could reasonably be expected to result in serious impairment to bodily function, serious dysfunction of any bodily organ or part or would place the person's health, or with respect to a pregnant woman the health of the woman or her unborn child, in serious jeopardy.

The table below indicates the timeframes that apply to the Inquiries.

Type of Inquiry	Time Frame for BCBSND to respond
Pre-Service Claim for Benefits	15 calendar days
Emergency Claim for Benefits	72 hours

Pre-Service Claim for Benefits Appeal

A Pre-Service Claim for Benefits Appeal is defined as a Member expressing disagreement, either verbal or written, with a decision that was made on a request for services, drugs or supplies and requesting a change in that decision.

The table below indicates the timeframes that apply to the Appeals.

Type of Appeal	Time Frame for BCBSND to respond
Pre-Service Claim for Benefits *	Written response within 30 calendar days.
Emergency Claim for Benefits *	Verbal response within 72 hours, followed by written response within 3 calendar days.

*See definitions under Inquiry.

Appeal Policy

A Member may submit written comments, documents and records or other documents relating to the case to Appeal an Inquiry determination. This Appeal must be received within 180 calendar days from the date BCBSND notifies the Member of the Inquiry determination. The Member must specifically state the nature of the Appeal and include all supporting information and rationale for overturning the Inquiry determination. Any Appeal received after the 180 calendar days will be returned to the Member without review.

BCBSND will take all the information into account during the Appeal process without regard to whether the information was submitted or considered in the initial consideration of the case.

A BCBSND Medical Director/Medical Consultant who was not involved in the original Inquiry determination will review the Appeal. This individual will be board certified in the same or similar specialty as the provider who typically manages the medical condition appealed and is not the individual who made the original non-certification, or the subordinate of such an individual.

BCBSND will implement the decision of the Appeal if the initial denial is overturned and respond with a written notice of the final determination including an explanation of the reason for the determination within the time frames shown above. Emergent Pre-Service Appeal response will be via telephone and in writing.

Attachment 21

Attachment 21

Member Post-Service Review Inquiry and Appeal Policy

Member Post-Service Claim for Benefits Inquiry and Appeal Policy

The following is the BCBSND Member Post-Service Claim for Benefits Inquiry and Appeal Policy. The Inquiry and Appeal definitions are identified below. The Member can initiate an Inquiry or Appeal by contacting Member Services at the telephone number on the back of their ID card, by e-mail through the BCBSND website, or in writing to BCBSND, Attn: Member Services Department, 4510 13th Ave S, Fargo, ND 58121.

Post-Service Claim for Benefits Inquiry

A Post-Service Claim for Benefits Inquiry is defined as a request, either verbal or written, expressing disagreement with a claim that has been processed correctly according to the Member's Benefit Plan that is not conditioned on a Member obtaining approval in advance of obtaining the benefit or service. The Member is responsible for providing BCBSND with a Claim for Benefits within 18 months after the date the benefits or services offered under their Benefit Plan were incurred. BCBSND will respond within 30 calendar days upon receipt of all relevant information. Any Inquiry received after the 18 months will be returned to the Member without review.

The Inquiry determination will be provided in writing, by telephone or through the Member remittance. Post-Service Inquiries will include claim adjustments.

The table below indicates the timeframe that applies to the Inquiry.

Type of Inquiry	Time Frame for BCBSND to respond
Post-Service Claim for Benefits	30 calendar days

Post-Service Claim for Benefits Appeal

A Post-Service Claim for Benefits Appeal is defined as a statement, either verbal or written, expressing disagreement with a claim that has been processed correctly according to the Member's Benefit Plan that is not conditioned on a Member obtaining approval in advance of obtaining the benefit or service.

The table below indicates the timeframe that applies to the Appeal.

Type of Appeal	Time Frame for BCBSND to respond
Post-Service Claim for Benefits	Written response within 60 calendar days.

Appeal Policy

A Member may submit written comments, documents and records or other documents relating to the case to Appeal an Inquiry determination. This Appeal must be received within 180 calendar days from the date BCBSND notifies the Member of the Inquiry determination. The Member must specifically state the nature of the Appeal and include all supporting information and rationale for overturning the Inquiry determination. Any Appeal received after the 180 calendar days will be returned to the Member without review.

BCBSND will take all the information into account during the Appeal process without regard to whether the information was submitted or considered in the initial consideration of the case.

A BCBSND Medical Director/Medical Consultant who was not involved in the original Inquiry determination will review the Appeal. This individual will be board certified in the same or similar specialty as the provider who typically manages the medical condition appealed and is not the individual who made the original non-certification, or the subordinate of such an individual.

BCBSND will implement the decision of the Appeal if the initial denial is overturned and respond with a written notice of the final determination including an explanation of the reason for the determination within the time frames shown above.

Attachment 22

Attachment 22

CVS/Caremark Attachments

Due to size please refer to Electronic CD for:

CVS/Caremark's SSAE 16 under file name – SSAE16 Report (04-01-2013 to 03-31-2014).pdf

CVS/Caremark's Annual Report under file name – CVS+Caremark=2013+10-K=Report.pdf

CVS/Caremark's Formulary Drug List under file name – Formulary+drug+List+01012015.pdf

Request for Proposal
for

North Dakota Public Employees Retirement System
Fully-Insured
Group Medical & Prescription Drug Coverage

September 4, 2014

Plan on the best fit.

SANFORD HEALTH PLAN

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Summary of Proprietary, Confidential and/or Trade Secret Information

The responses in the following questions include trade secret, proprietary or financial information that is privileged and has not been previously publicly disclosed. This information is to be held confidential and is prohibited from being disclosed to the public:

- Cost Proposal
- Fee Disclosure Analysis
- Disruption Analysis

- Qualitative Proposal Questions pertaining to Reimbursement and Discounts: # 59, #60, #61, #62, and #63.

SANFORD HEALTH PLAN

Questionnaire

Organizational Background, Strength, and Experience

1. **Provide a brief description of your organization, including your company history, organizational structure, services provided, location of headquarters, and length of time you have been in business. Describe any significant historical or future organizational developments (acquisitions, mergers, change in subcontracted vendors, etc.).**

   In 1996, Sioux Valley Hospitals & Health System formulated a corporate response to the changing health care marketplace, the rapid growth in the number of managed care service organizations, and the need to meet the coverage requirements of Medicare-eligible persons residing with the organization's tri-state service area. A panel of health care professionals was thus assembled and charged with the responsibility of researching, designing, and developing the requisite infrastructure for an outcomes-based health maintenance organization that would be recognized in the local marketplace and associated with quality health care. The result was the formulation of Sioux Valley Health Plan.

   In March 2007, Sioux Valley Health Plan changed its name to Sanford Health Plan as a result of a generous gift of $400 Million to Sioux Valley Hospital & Health System from South Dakota businessman, Denny T. Sanford. Subsequently, the Sioux Valley Board of Trustees unanimously voted to re-name the healthcare system "Sanford Health" and Sioux Valley Health Plan was also renamed "Sanford Health Plan."

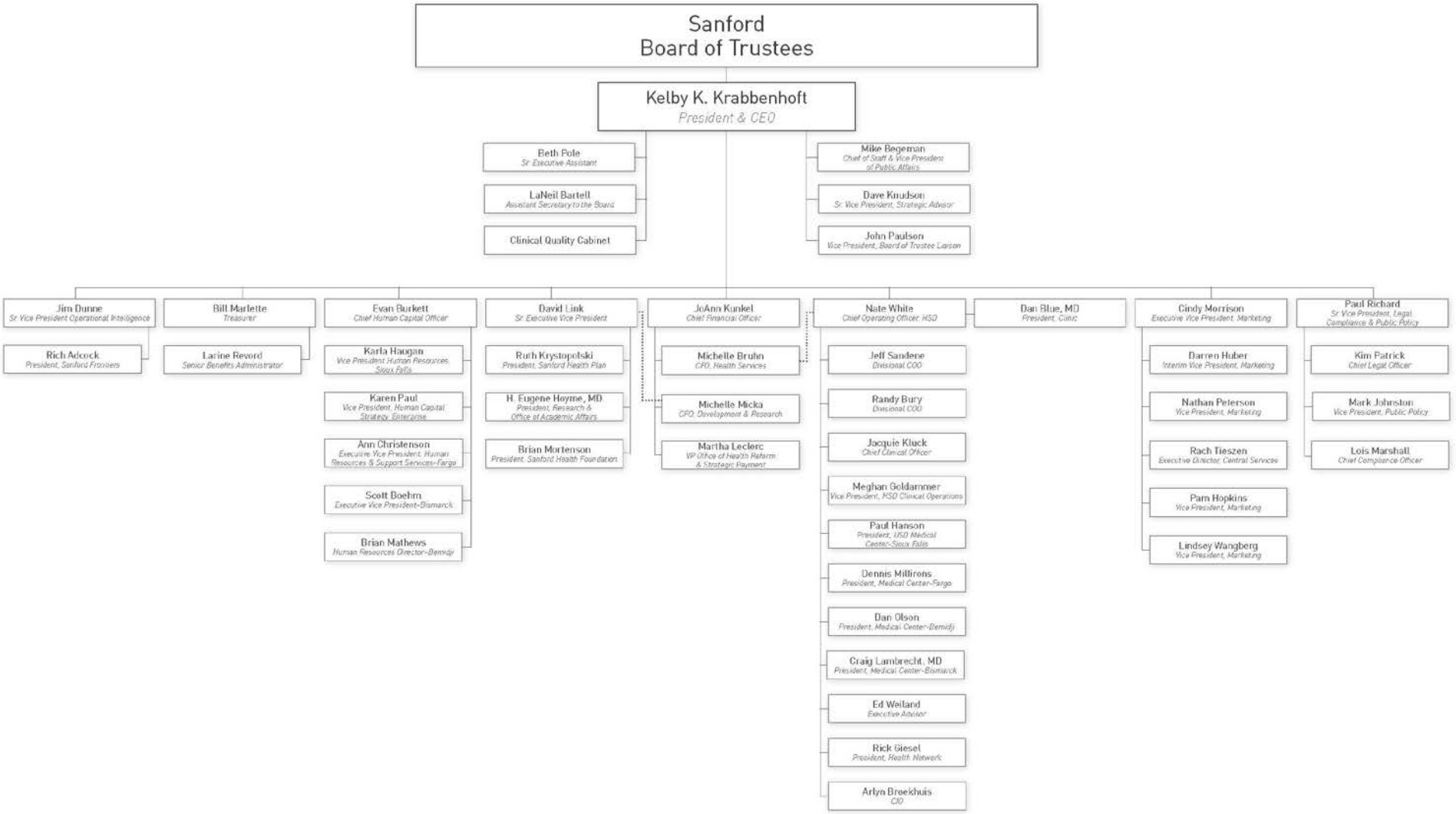
   Sanford Health Plan is a not-for-profit, community-based HMO that began operations in South Dakota on January 1, 1998. Managed care services are provided to large and small groups in South Dakota, North Dakota and Iowa by Sanford Health Plan and in Minnesota by Sanford Health Plan of Minnesota which is a subsidiary of Sanford Health Plan. Sanford Health Plan was designed to align physicians and hospitals, establish a framework for providers to efficiently manage the delivery of health care services, and operate on the strength of affordable premiums.

   Central to the design of Sanford Health Plan is a collaborative effort between Sanford Health, contracting providers, and member representatives of service area communities. Each of these elements offers unique perspectives, and acknowledgment that health care resources are finite. Accordingly, maintenance of the Plan's financial viability is based upon the application of sound, balanced, and efficient healthcare practices. Sanford Health Plan is authorized to offer three core products. These products are described as follows:

   1. Integrated Delivery Network (IDN) - A non-risk bearing product in which enrollees may access any network physician and receive the same level of benefit. Extensive care management services are available to enrollees.
   2. Point Of Service (POS) - A risk-bearing product in which enrollees choose at each medical encounter whether to seek care from in-network or out-of-network providers. Financial incentives are offered to enrollees selecting in-network providers through increased benefit levels.

3. Health Maintenance Organization (HMO) - A risk-bearing product that provides enrollees with benefits only when in-network providers are utilized. Extensive care management services are available to enrollees.

Sanford Health Plan was granted its Certificates of Authority in 1998 by South Dakota, Iowa and Minnesota and North Dakota in September 2009. All health plan operations occur at its corporate office in Sioux Falls, South Dakota. The next two organizational charts illustrate Sanford Health and Sanford Health Plan.



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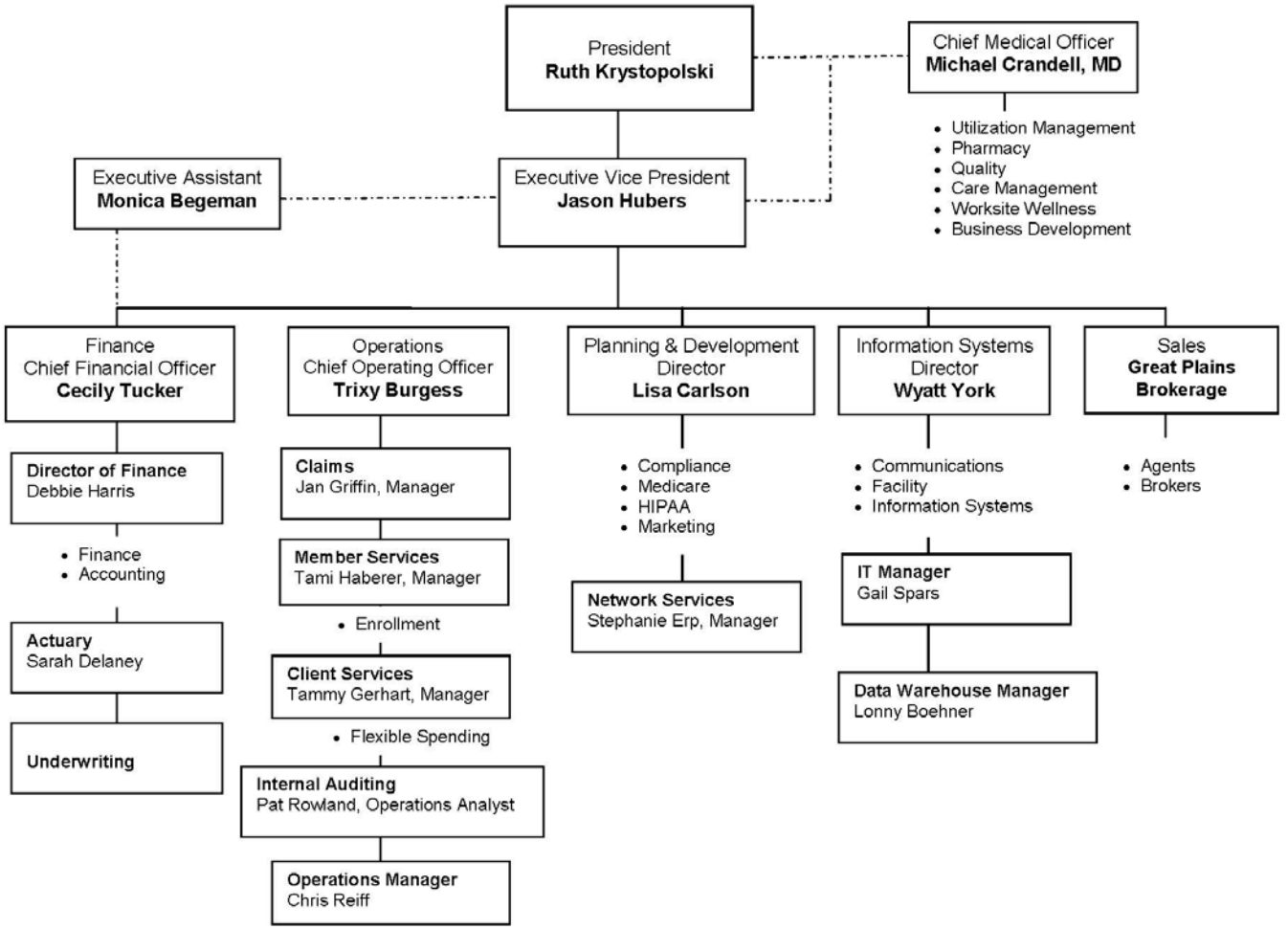
SANFORD HEALTH

Sanford Health Plan



02.2013

Sanford Health Plan offers the follow products:

- Third Party Administration (TPA) services since 1998
- Federal Employee Health Benefit Plan (FEHB) in South Dakota and Iowa since 2002
- Section 125 Plans since 2003
- Medicare Supplement Plans and Sanford SELECT Plans (distinguished by a limited network of hospital and ambulatory surgery centers in concert with competitive premiums) in South Dakota since 2003; Iowa and Minnesota since 2004; and North Dakota since 2010
- HSA-Qualified High Deductible Health Plans since January 2005
- Individual Plans marketed as Sanford "elite1" in South Dakota since 2008 and since 2010 in North Dakota
- Marketplace Insurance Exchange products since January 1, 2014 in Iowa, North Dakota and South Dakota.

Sanford Health Plan has no equity partners. No outstanding stock exists and no dividends are distributed. Premium revenue is utilized solely on behalf of Plan members according to Internal Revenue Service requirements. Additionally, Sanford Health Plan is the second largest carrier in the state of South Dakota.

2. Vendors responding to this RFP must be able to substantiate their financial stability. Provide a copy of your audited financial statement or other financial information. Include, at a minimum, a Balance Sheet and a Profit and Loss Statement, together with the name and address of the bank(s) with which you conduct business and the public accounting firm(s) that audit your financial statements. Other sufficient information may include a written statement from a financial institution confirming the creditworthiness and financial stability of the vendor.

First PREMIER Bank Address & Contact Information:

First PREMIER Bank
601 S Minnesota Avenue
PO Box 1348
Sioux Falls, SD 57101-1348

Contact –
Lisa Wehrkamp, Business Banking Assistant
Business: 605.357.3027

Auditor Address and Contact Information:

Deloitte & Touche LLP
50 South Sixth Street
Suite 2800
Minneapolis, MN 55402-1538

Additionally, please refer to the following attachments:

- Attachment A – Sanford Health Plan, Audited Financial Exam Report

Sanford Health Plan does not have a statement of creditworthiness.

3. **Provide a copy of any State or Federal regulatory audit performed within the last two years.**
   Please refer to the following attachments:
   - Attachment B – Sanford Health Plan, South Dakota DOI Exam Report

4. **Confirm that your organization agrees to be accountable for everything stated in and submitted as part of your proposal, even if not specifically addressed in the proposed sample contract/ASA.**

   Sanford Health Plan agrees to be accountable for all services as submitted as part of this proposal, even if not specifically addressed in the attached sample Administrative Service Agreement.

5. **Indicate whether your company has ever been or is currently a party to litigation regarding a medical benefit plan contract or agreement. If so, provide details of the litigation or action. Failure to disclose this may constitute grounds for rejection of any proposal or termination of any contract.**

   Sanford Health Plan has been involved in only one legal action. Sanford Health Plan (formerly known as Sioux Valley Health Plan) was named as the Defendant in a Civil Action on April 29, 2004 for a South Dakota resident who was a health plan Member in an employee welfare benefit plan governed by ERISA. The Member elected COBRA, however, the initial premium was not paid within the 45 day grace period and the Member was consequently terminated. Claims incurred after the date of termination were denied. The 8th circuit court found in favor of Sioux Valley Health Plan.

6. **State whether the vendor, its officers, agents or employees, who are expected to perform services under the NDPERS contract, have been disciplined, admonished, warned, or had a license, registration, charter, certification, or any similar authorization to do business suspended or revoked for any reason.**

   None of Sanford Health Plan's executive management as listed in Section 1 above has been disciplined, admonished, warned, or had a license, registration, charter, certification, or any similar authorization to do business suspended or revoked.

7. **Include a description of your organization's major short term strategic initiatives and your long term strategic business plan. Specifically address cost containment efforts.**

   Sanford Health Plan is committed to adapt to the Accountable Care Act both in the immediate 12-24 months and in the long term over the next 3 to 5 years.

   Our membership goal is to attain an annual growth of 5% in overall membership

   Cost Containment continues to be at the forefront of all our strategic initiatives. We are committed to furthering the integration with the Sanford Health Services Division by leveraging opportunities to jointly share information and impact the health of our members who are patients. This will be accomplished by:

- Integration between care management and patient centered medical home teams;
- Integrating data from applications, health risk assessment and screenings with medical homes in the clinics;
- Alignment of disease management programs with medical homes; and
- Continued promotion of and integration with Occupational Medicine and wellness activities.

8. Describe how your organization differentiates itself from your competitors. Specifically, what makes your organization the best partner for NDPERS?

Sanford Health Plan is excited to have the opportunity to further our relationship with the state of North Dakota. We understand the challenges faced by our clients with regards to the cost of healthcare, utilization of service, and an understanding the value of preventive care benefits. As a part of a fully-integrated health delivery system who is also our largest self-funded client (Sanford Health), we are currently held to a level of complete accountability through provider network contracting arrangements and our health plan management.

Currently, 57% of our enrolled business exists in risk-based HMO products. This composition compels us to be diligent about cost savings, utilization, and population management versus traditional TPA services whose focus is to process claims with little to no accountability. As a result of our structure, Sanford Health Plan incorporates its population management techniques and focus on value of services delivered into the daily process provided to all our clients regardless of where risk resides.

We commit to complete transparency of data and full reporting capabilities as well as local decision-making authority and control. Our intent is to ensure that the state of North Dakota has the information that is needed to manage one of its' largest expenses. Our focus is always to be a partner in managing our client's health care dollars while continuing to raise the bar on overall quality of care. Presently, Sanford Health Plan's "Commendable" certification by the National Committee for Quality Assurance illustrates our commitment to quality care.

Sanford understands and commits to PERS a partnership that will accomplish the following goals:

1. Manage healthcare costs to maintain affordable premiums for you and your employees;
2. Provide full data transparency and analysis of utilization, quality of care, cost efficiency, and comparative provider cost and utilization data;
3. Develop and deliver information in formats that are useful in planning and decision making;
4. Educate and inform your employees to become engaged healthcare consumers
5. Prompt and accurate claims processing;
6. Identify and implement innovative programs to address costs and quality of care provided;
7. Superior customer service; and
8. Web-based tools that assist in eligibility, benefit experience review, and claims management services available to staff and employees.

In addition, Sanford would like to take this opportunity to communicate additional services we are able to offer. Sanford, in the entirety of the Health System, extends the invitation to create a partnership that will result in greater hands-on care for your employees, while at the same time increasing your cost savings for services at the Sanford provider level. Our goal would be to develop a medical home shared risk structure for the Bismarck and Fargo marketplace that would be identified and agreed upon by July 1, 2015. Additionally, we would contract for services that PERS would desire to have outside of the risk arrangement.

We currently envision this arrangement to come in the form of a fully-capitated or Episode of Care model. We would also like to jointly develop targets across disease states or processes that are important to the North Dakota population and are willing to accept an incentive based payment structure structured around these targets. Our goal would be to build a model, including all required infrastructure (reporting templates and contracting templates) in all of Sanford's applicable locations. For example, our combined relationships in North Dakota communities would allow our potential partnership to expand geographically and provide mutually beneficial results as we define and work towards common goals.

Our current payment system is extremely flexible and we are able to run multiple fee schedules for different product lines simultaneously. These fee schedules can also tie reimbursement models to quality/protocol targets as well. Additionally, we can build withholds or risk based payments based on specific criteria and apply to different payment methodologies. We welcome the opportunity to work with the State on this innovative and progressive partnership model.

Sanford Health Plan commits to an arrangement to help your organization meet its objectives with regards to quality healthcare and cost containment. Our goal will be to provide expert services that enable the PERS to focus on the overall improvement of the health of your employee population and strategic business planning and development.

9. Identify all services that are currently outsourced or subcontracted, the name of the vendor/partner, and length of the relationship. Describe how you ensure quality customer service and timely and effective issue resolution.

Quality Customer Service

Sanford Health Plan ensures quality customer service by tracking member-to-staff ratios, call logs, and quality measures. The Claims department and Member Services department are physically located within close proximity to each other to facilitate efficient workflow and communication to address and resolve questions as quickly as possible. All Member Service and Claims representatives rely on the same claims payment system to view benefits. Representatives can also simultaneously view the member's online myHealthPlan account information to address and discuss exactly what the member is seeing online.

Sanford Health Plan evaluates phone call statistics and staffing needs for the Member Services Department to ensure members have timely access to customer service.

All claims and customer service calls are received at a central location conducive to open, inter-department communications in order to resolve inquiries in a timely manner.

Call centers are not outsourced to external (or international) companies not familiar with health plan operations and the details of plan design and claims payment processes.

Additionally, all calls are always answered by a live person during normal business hours. Calls are not sent to voicemail if the call queue is busy, nor do callers ever receive a busy signal. Callers are not required to dial in their member ID numbers or any other information prior to a call being answered; all member information is collected by the receiving Member Service representative to create a personal and courteous experience.

Performance Standards

All Member Service phone calls and emails are logged and recorded. Call center statistics show number of calls answered, calls made, voicemails and abandoned calls. It also shows the answer speed of calls and the rate of abandonment and voicemails. Call answer timeliness is the percentage of calls received by the Plan's member services call center (during operating hours) that were answered by a live voice within 30 seconds.

The call abandonment rate is the percentage of calls received by the Plan's member service call center that were abandoned by the caller before being answered by a live voice. These statistics are measured monthly and used by the Quality Committee on a quarterly basis to determine opportunities for improvement.

Finally, Sanford Health Plan conducts annual consumer satisfaction surveys rating the health plan on customer service and claims processing.

Additionally, performance guarantees are tied to ensure Average Speed of Answer will be 30 seconds or less and the abandoned rate will be 5% or less.

Below is a list of Sanford Health Plan vendors and contractors.

Vendors	Service/Activity Provided	Location	Length of Relationship
AAA Collections	Collections Agency	Sioux Falls, SD	12 years
GHI Medicare	Medicare COB Crossover	Louisville, KY	9 years
Optum (formerly known as Ingenix)	Subrogation - Claims Savings & Recovery	Green Bay, WI	11 years
Advanced Business Fulfillment	Outbound mail service agreement	St. Louis, MO	9 years
AIM HealthCare Services, Inc.	Pre-payment Claim Validation	Franklin, TN	4 years
Decision Support Systems, Inc.	Physician Satisfaction Research Services	Fort Worth, TX	11 years
Express Scripts, Inc.	Pharmacy Benefit Claims Processing	Maryland Heights, MD	14 years

Great Plains Brokerage	Sales & Marketing	Sioux Falls, SD	16 years
Language Line® Certified Medical Interpreting Service	Interpretation Services	Monterey, CA	8 years
McKesson LLC	InterQual Services	Scottsdale, AZ	12 years
Milliman USA	Actuarial Services	Brookfield, WI	16 years
Evolution1, Inc.	Flexible Benefits Software Consulting Services	Fargo, ND (general), Simsbury CT (support), Edina MN (sales) and St. Louis MO (marketing)	8 months
EPIC	Claims Processing Software Services	Middleton, WI	3 years
Starline	Reinsurance	Minneapolis	8 years
Travis	COBRA Software	Houston, TX	16 years
HealthX	Online Account Portal	Indianapolis, IN	5 years
Verisk	HEDIS/Analytics	Waltham, MA	3 years
VIIAD	Online Provider Directory	Langhorne, PA	4 years
National Medical Reviews, Inc.	Independent Medical Review Organization	Southampton, PA	3 years
Medwork of Wisconsin, Inc.	Independent Medical Review Organization	Eau Claire, WI	3 years
IPRO	Independent Medical Review Organization	Lake Success, NY	3 years

Additionally, Sanford Health Plan contracts with the following Network Repricing vendors to ensure adequate access and availability for our Membership nationwide.

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10. What ratings have you received from the following third party rating companies and organizations?

Sanford Health Plan is a wholly owned subsidiary of Sanford Health, an integrated healthcare delivery system with $2.3 billion in operating revenue for 2011. Sanford Health has an A1 Moody's bond rating and AA- Standard & Poors rating.

Rating Organization	Rating	Date of Last Accreditation / Rating
A.M. Best	NA	
Standard & Poor's	NA	
Moody's	NA	
NCQA (by product)	HMO - Commendable	11/15/16
JCAHO	NA	
URAC	NA	
American HealthCare Commission	NA	

11. What fidelity and surety insurance or bond coverage do you carry to protect your clients? Specifically describe the type and amount of the fidelity bond insuring your employees that would protect this plan in the event of a loss. Do you agree to furnish a copy of all such policies for review by legal counsel if requested?

Sanford Health Plan maintains a Fiduciary Liability Insurance with an aggregate limit of $15M and a $50,000 Deductible and a Managed Care Errors & Omissions Policy with a $5M aggregate limit and a $100,000 per claim limit. We wil furnish copies of these policies upon request.

12. Are any of the services you are proposing to provide to NDPERS contracted outside the U.S.A? Describe any business you do outside the U.S.A. and the financial impact, if any, of requiring those services to be provided within the U.S.A.

All business is conducted inside the United States.

13. Confirm that your proposal includes any and all deviations to the sample ASA (via submission of Exhibit F) and to the other RFP requirements (via Exhibit F, worksheet 2).

Please refer to Exhibits F1, F2 and F3 under separate cover with this proposal.

SANFORD HEALTH PLAN

14. Confirm that you will to the best of your ability conform to the Patient Protection and Affordable Care Act and the Health Care and Education Reconciliation Act of 2010. Describe any provisions that NDPERS must be prepared to comply with.

Sanford Health Plan currently coordinates regulatory compliance not only federally but within the four state areas of Iowa, Minnesota, North Dakota and South Dakota. Regulatory monitoring and compliance at the health plan is coordinated by the Director of Planning & Regulation, the Associate Actuary and two Policy Analysts. Additionally the health plan tracks legislation at the federal level jointly with the health system's Office of Public Policy which includes the Vice President of Health Policy and three Policy Analysts. Sanford Health Plan is a member of AHIP, the Minnesota Council of Health Plans, and the Iowa Federation of Insurers.

Sanford Health Plan successfully transitioned non-group and fully insured small-group plans (except grandfathered plans) to ACA-compliant plans inclusive of the required essential health benefits (EHB) package.

Sanford Health Plan also allowed members and group clients to renew existing individual market and small group market plans even if they do not include the full menu of required health care reform benefits pursuant to the Department of Health and Human Services (DHHS) "Transitional Policy."

Under the transition policy, Sanford Health Plan chose to extend individual market and small group market policies that were in effect on October 1, 2013 without amending the policies to meet all ACA standards. The transition policy does not apply to individuals or small businesses that obtain new coverage after October 1, 2013. The transition policy applies to renewals of existing business occurring from January 1, 2014 until October 1, 2014. HHS indicated that it will re-evaluate this policy in 2014 and could extend it to additional renewal months.

As required, Sanford Health Plan provided notification to its enrollees the following:

- The options available to them;
- Which of the specified ACA market reforms would not be reflected in any coverage that continues;
- Their potential right to enroll in a qualified health plan offered through a Health Insurance Marketplace and possibly qualify for financial assistance;
- How to access such coverage through a Marketplace; and
- Their right to enroll in health insurance coverage outside of a Marketplace that complies with the specified market reforms.

Sanford Health Plan continues to track which policies are:

- Transitional policies (but not technically grandfathered);
- Grandfathered policies; and
- Non-Grandfathered policies.

As well as tracking policies that comply with certain ACA market reforms, including:

- The requirement to limit premium variations to age, tobacco use and geography
- Essential health benefits
- Actuarial value metal levels
- Restrictions on cost sharing
- Guaranteed availability of coverage
- Guaranteed renewability of coverage
- Non-discrimination against a provider operating within their scope of practice
- Non-discrimination in coverage for individuals participating in approved clinical trials
- Prohibition of pre-existing condition exclusions or waiting periods for adults (exclusion would not apply to small group)
- Prohibition on health status discrimination (exclusion would not apply to small group)

Through our flexible claims administration system we are able to administer the tiered benefits that have been complicated by the ACA.

Sanford Health Plan is committed to aid the state in finding balance to both strategic and financial factors when making decisions about offering coverage to their employees in the months and years to come in the post-reform market. Sanford Health Plan will guide NDPERS to implement additional provisions as required under the ACA including the following provisions that will affect NDPERS during the next biennium:

- Additional preventive care services with an “A” or “B” rating by the U.S. Preventive Services Task Force (USPSTF) including screening tests, counseling, immunizations, and preventive medications.
- Transitional Reinsurance Assessments 2014 – 2016
- Medical Loss Ratio Rebates
- Health Insurance Provider Fee
- Changes in essential health benefits or state mandates
- Tracking grandfathered status
- Non-Discrimination 105(h) Rules
- Employer Shared Responsibility Mandate and related information reporting requirements under IRC section 6056
- Patient-Centered Outcomes Research Institute Fee
- High Cost Insurance Excise Tax (2018)

References and Experience

15. **Provide the following information on a maximum of three (3) of your largest medical plan clients for whom you provide medical network, insurance, and administrative services. References of similar size and scope to NDPERS are preferred; one must be your largest public sector client and one must be your largest North Dakota-based client.**

    a. **Name of employer sponsoring plan and location**
    b. **Type of services provided to plan sponsor**
    c. **Plan inception date**
    d. **Length of time as client**
    e. **Number of contracts and members participating in the plan**
    f. **Contact information (name, title, phone number, email address)**

    Other than our own self-funded organization of Sanford Health (with 34,198 members), we do not have a similarly sized client to PERS to use for reference. Please accept the following references below:

    ND Department of Human Services
    Medicaid Expansion Program
    Effective: January 1, 2014
    Client for 8 months
    12,716 contracts / total members 12,716
    Maggie Anderson, Executive Director, (701) 328-2538 / manderson@nd.gov

    Joint Venture Group – South Dakota Schools Group Insurance Pool
    Fully insured client with Worksite Wellness
    Effective: July 1, 2000
    An average of 60 schools participating for 12 years
    2417 Contracts / 4011 Members
    Dean Christensen / (605) 874-2161 Ext. 204) / dean.christensen@k12.sd.us

16. **Provide the following information for two (2) of your largest medical plan clients that have terminated services during the preceding 3-year period. References of similar size and scope to NDPERS are preferred.**

    a. **Name of employer sponsoring plan and location**
    b. **Type of services provided to plan sponsor**
    c. **Plan inception date**
    d. **Length of time as client**
    e. **Number of contracts and members participating in the plan**
    f. **Reason for termination**
    g. **Contact information (name, title, phone number, email address)**

    Please note that we have not had any of our large groups similar to the size of NDPERS terminate. We respectfully submit the following terminated references:

    Huron Regional Medical Center
    Fully insured client
    Effective: 01/01/07
    Participating for 5 years
    208 contracts / 429 members
    Terminated due to rates
    Rhonda Hanson, HR Director / (605) 353-6200 / rhanson@huronregional.org

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Adams Thermal
47920 5th Street
Canton SD 57013
Benefits Manager: Bryan Plowman
Phone: (605) 764-1108
Kathy Wynia, Benefits Manager / (605) 764-1157 / kwynia@adamsthermal.com

Fully insured group
Effective 01/01/2005 to 12/31/2008 – 4 years with SHP
Termination reason: Moved to Medica due to rates
Subscribers 303 / members 629

Implementation and Account Management

17. **Proposers must outline in detail the specific activities and tasks necessary to implement the NDPERS program. Be specific with regard to the following:**
    - **Amount of total time needed to effectively implement the program**
    - **Activities/tasks and corresponding timing**
    - **Responsible parties and amount of time dedicated to implementation, broken out by vendor and NDPERS staff**
    - **Any transition activities required with incumbent carriers, including providing members adequate notice regarding current care or treatment plans at least 60 days prior to a change**
    - **Length of time implementation team lead and members will be available to NDPERS**

    As a new carrier, Sanford Health Plan would need to begin implementation immediately after vendor selection. We would expect to hire new, Fargo-based staff that physically reside and work in at least the Fargo and Bismarck regions to start. Ideally Sanford Health Plan would prefer nine (9) months implementation time from Oct. 1st through June 30th.

    An account the size of the NDPERS will require dedicated resources throughout the implementation period. Therefore, we will provide the state with a number of dedicated resources from our Management Team. Upon the award of the contract, Sanford Health Plan will immediately hire a dedicated Director for NDPERS who will work closely with the management team to identify distinct responsibilities and ensure efficient task coordination and a common understanding of NDPERS-specific needs and objectives.

    Hiring and Training of Dedicated Staff

    In addition to our dedicated NDPERS Director, we will hire department staff to build Member Services, Claims, and Management, Utilization Management, Network Services, Finance and Client Services staff dedicated solely to service the NDPERS account and membership. Some of these staff will be co-located with existing staff already serving the Sanford Health Commercial product lines. This co-location will enable us to utilize the experience of the staff to provide comprehensive, program-specific training for NDPERS staff as well as opportunities to foster a culture of collaboration.

    Claims and Member Service

    After identifying the main contacts of these departments, we will review the NDPERS Program with all staff including claims configuration and processing requirements, certification of benefits rules, and performance standards.

    Telecommunications

    The NDPERS Director will work with the appropriate departments to design phone prompting and intake scripting/greeting language, with approval by NDPERS. We plan to activate our toll-free NDPERS Program number so it is available to answer calls during the NDPERS open enrollment period.

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Network Development

Once it is confirmed that Sanford Health Plan is the selected carrier, create a customized network development plan for the Program based on our current understanding of the NDPERS program needs which will include amend our current provider contracts to ensure NDPERS specific discounts on top of our current provider discounts. As part of this plan, we will target the Program's high-volume clinicians and facilities prior to implementation. In addition to high-volume clinicians and facilities, we will pursue additional clinicians and facilities in limited access areas as identified in the GeoAccess report included in our proposal. With the NDPERS approval, we will distribute a letter of invitation. During the January and February months of 2015, we will accept applications, perform credentialing, and follow up with non-responders. Throughout the transition period, we will recruit willing providers who are currently treating members to ensure continuity of care.

Training for Network Providers

Sanford Health Plan will provide a NDPERS-specific training program for our clinicians and facilities serving the Program. This training program will include an overview of the benefits (e.g., copayments and deductibles); information about our online provider services; an overview of our UM protocols; and coordinated communications and training with medical network management to optimize medical-behavioral synergies.

Eligibility

With the help of the NDPERS, we will determine eligibility requirements for Program members. We will agree upon an eligibility file format, and provide test data until all formatting issues are resolved. We will then receive and upload the full production file, including COBRA eligibility, to our claims administration system.

Reporting

We will design a reporting grid and submit it to the NDPERS for approval. We will develop reporting protocols regarding frequency and delivery and confirm all ad hoc reporting requirements for the Program.

External Vendor Interface

Our Management Team will determine external vendors' needs and interface requirements, and provide training, as needed. In addition, as part of our any wellness programs and disease management programs we will establish pharmacy and medical data feeds to identify opportunities for outreach and determine effective intervention strategies.

Communications

We will develop an initial and ongoing communications strategy with feedback from NDPERS. We will design materials and distribute approved materials as agreed. The Client Services Team will develop an orientation presentation for NDPERS Program members, conduct orientations on benefits, and attend NDPERS Health Fairs and open enrollment meetings that are conducive to NDPERS timelines.

Customized Web Site

Our information technology department will determine the internal and external links required, and the flexibility to customize the site for NDPERS members, and activate the site with NDPERS approval. The site will include NDPERS member-specific information when members log into their myHealthPlan Account in addition to NDPERS-specific online provider directory.

Performance Guarantees

Our Account Team will finalize the performance guarantee grid and explain penalty distributions and payment procedures in a communication to all areas including client reporting. We will have distributed the final information to our departments by December 31, 2014.

Date	Task	Responsibility
Oct. 2014	Award Notification	NDPERS
October 2014	Sign Administrative Services Agreement between Sanford Health Plan and NDPERS	NDPERS and Sanford Health Plan
Nov. 2014	Begin implementation and operations • Amending Provider Agreements for NDPERS-specific discounts • Develop Summaries of Benefits and Evidence of Coverage (Member Policy) • Develop NDPERS-specific forms and documents (ID cards, applications, provider manual, policies and procedures) • Begin system configuration of benefits, claim edits and rules	Sanford Health Plan
Jan. 2015	Develop Marketing and Communication Plan	
April 2015	Begin Open enrollment meetings and health fairs	
May 2015	Procedure for employee enrollment transaction determined. This could include electronic file transfer, paper enrollment or electronic enrollment via Sanford Health Plan's enrollment system, *myHealthPlan* Employer Portal.	NDPERS & Sanford Health Plan
30 days prior to effective date	Applications processed and Identification Cards are printed and mailed to member's home address.	Sanford Health Plan

18. Provide an overview of how the NDPERS relationship will be managed, both strategically and on a day-to-day basis. Include an organizational chart. NDPERS will give preference to vendors who are willing to assign a dedicated account management team and provide access to senior leadership. Designate the names, titles, location, telephone numbers, and email addresses for the representatives listed below. For the account service individuals listed (b, c, d, and e below), provide brief biographical information, such as years of service with your company, experience as it relates to this proposal, and the number of clients for which they perform similar services.

a. The key individual representing your company during the proposal process;
b. The key individuals on your proposed implementation team;
c. The key individual assigned to overall contract management;
d. The key dedicated individual or team members responsible for day-to-day account management and service;
e. The key individual responsible for provider contracting; and

f. The key individual responsible for provider relations if different than letter e. above.

Dedicated Implementation Team

A dedicated NDPERS Program Director will be assigned to manage the program implementation and channel all client inquiries to Sanford Health Plan. The NDPERS Director will be the key individual assigned for overall contract management. The following grid outlines the daily operations team assigned through the implementation process. The below list of management currently performs similar services for all of Sanford Health Plan's insured and self-funded business.

Name	Title	Years with Sanford Health Plan	Major Responsibility
Jason Hubers	Executive Vice President	15 years	Oversight of daily operations, performance, sales and strategic planning.
Cecily Tucker	Chief Financial Officer	15 years	Financial Oversight, Stretegic Planning & Underwriting
Michael Crandell, MD	Chief Medical Officer	7 years	Oversight of Care Management, Utilization Management & Worksite Wellness
Trixy Burgess	Chief Operating Officer	12 years	Oversight of Claims, Member Services, Client Services & Audit
Debbie Harris	Finance Director	7 years	Department Oversight
Sarah Delaney	Associate Actuary	6 years	Rate Development, Data analysis
Wyatt York	Information Technology Director	16 years	Department Oversight
Lisa Carlson	Director, Planning & Regulation	13 years	Oversight of State filings, marketing, legislative & legal review, Provider & Payor Relations Department.
Unassigned	NDPERS Director	-	Oversight of daily NDPERS operations
Jan Griffin	Claims Manager	16 years	Department Oversight
Tami Haberer	Member Services Manager	16 years	Department Oversight
Tammy Gerhart	Client Services Manager	9 years	Department Oversight including Flex Department
Steph Erp	Network Service Manager	13 years	Department Oversight
Barbara Vandonslear, RN	Care Management Manager	8 years	Department Oversight

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For day-to-day management, a dedicated NDPERS Supervisor will be hired and assigned to each operational department. This supervisor will be solely responsible for the NDPERS operations but will have dual reporting to the NDPERS Director and to their respective department managers within Sanford Health Plan. The following are the staffing statistics Sanford Health Plan proposes for the Program's dedicated department. We modeled our staffing projections using anticipated volume based on the NDPERS member population coupled with Sanford Health Plan's membership to staffing ratios. We have found this method to be an accurate predictor of staffing needs. Additionally, our telephone system automatically monitors call volume, allowing us to recursively refine our model and adjust staffing levels as needed.

Position	# proposed
ND PERS Director	1
Clerical Support	3
Operational Auditors	2
Care Management Department	
Care Management Supervisor	1
Nurse Case Managers	6
Quality Specialists	6
Worksite Wellness Department	
Wellness Supervisor	1
Wellness Educators	7
Client Services Department	
Client Services Supervisor	1
Account Representatives	2
Communications Coordinator	1
Marketing Specialist	2
Claims	
Claims Supervisor	1
Sr. Claims Adjudicator	4
Claims Adjudicator	12
Finance and Underwriting	

Finance Supervisor	1
Financial Analyst	3
Accountants	3
Information Technology	
IT Supervisor	1
Project Manager	1
Interface Analyst	3
Application Support/Reporting	4
IT Operations	2
Member Services Department	
Member Services Supervisor	1
Member Services Team Leader	1
Member Service Representative	15
Utilization Management Department	
UM Supervisor	1
UM Technician (RN and LPNs)	8
Provider & Payor Relations	
Network Supervisor	1
Provider Relations Representative	2
Technical Contract Specialist	1
Provider Network Specialist	1
Total FTEs	**99**

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19. Please provide the requested information for the functions that will be servicing NDPERS in the table below:

While the hours of operations below reflect our current business practice, Sanford Health Plan welcomes the state's input on business hours and is willing to establish hours specifically to meet the NDPERS employees' needs.

Area	Geographical Location(s)	Hours of Operation (Specify PST/CST/EST)	Is this service Outsourced? Yes or No? *If Yes, provide name of company to which the function is outsourced*
Member Service	Sioux Falls, SD	8am-5pm CST	❑ Yes *Specify Company Name:* _____ ☑ No
Claims Processing	Sioux Falls, SD	8am-5pm CST	❑ Yes *Specify Company Name:* _____ ☑ No
Enrollment, Eligibility, and Billing	Sioux Falls, SD	8am-5pm CST	❑ Yes *Specify Company Name:* _____ ☑ No
Disease Management	Sioux Falls, SD	8am-5pm CST	❑ Yes *Specify Company Name:* _____ ☑ No
Case and Utilization Management	UM: Sioux Falls, SD Case Managers: Located in various North Dakota towns, associated with Provider Offices	8am-5pm CST	❑ Yes *Specify Company Name:* _____ ☑ No

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Area	Geographical Location(s)	Hours of Operation (Specify PST/CST/EST)	Is this service Outsourced? Yes or No? *If Yes, provide name of company to which the function is outsourced*
Health, Education and Wellness Programs/Services (including dedicated wellness support staff)	North Dakota towns, associated with Provider Offices	8am-5pm CST	❑ Yes *Specify Company Name:* _____ ☑ No
Pharmacy Benefit Management	Minneapolis, MN	8am-5pm CST	☑ Yes *Specify Company Name:* Express Scripts, Inc. ❑ No
HSA	Sioux Falls, SD	8am-5pm CST	☑ Yes *Specify Company Name:* Evolution1 ❑ No
Other (Specify functional area)			❑ Yes *Specify Company Name:* _____ ❑ No

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Communications and Website

20. Please complete the table below by providing a description of the pre-enrollment communication materials you will provide to support NDPERS during its open enrollment period:

Area	Description	Can it be customized for NDPERS?
Website	myHealthPlan brochure – explaining how to create your personalized account and take advantage of online services	☑ Yes ☐ No
Employee Newsletter(s)	Sanford Health Plan can customize its current Member Messenger newsletter to communicate NDPERS-specific news, benefit changes, wellness initiatives, regulatory changes or NPERS program changes.	☑ Yes ☐ No
Brochures	Sanford Health Plan can customize its current brochures to communicate NDPERS-specific news, benefit changes, wellness initiatives, regulatory changes or NPERS program changes.	☑ Yes ☐ No
Direct mail (internal or home distribution)	Sanford Health Plan can create custom direct USPS mail or email blasts specific to a subdivision or employer unit.	☑ Yes ☐ No
Enrollment guide	Sanford Health Plan provides a comprehensive employee education package. This includes a summary of the group benefit package, pharmacy benefit information, provider network instructions and other information regarding coverage details.	☑ Yes ☐ No
Employee open enrollment meeting support and attendance	Sanford Health Plan facilitates on-site employee meetings as needed to educate employees on the benefits offered. Sanford Health Plan strives to promote open enrollment meetings by creating a fun and interactive environment with popcorn, trinkets available for give-away, and representatives available to answer questions or give formal presentations, at the client's request.	☑ Yes ☐ No
Benefits/HR staff training support	Sanford Health Plan provides a comprehensive employer education package. This includes a summary of the group benefit package, pharmacy benefit information, provider network instructions and other information regarding coverage details.	☑ Yes ☐ No

	Sanford Health Plan is also available throughout the year to assist in new employee orientation meetings, as requested by the client.	
Video	Sanford Health Plan can create custom online tutorials or coordinate video-conferences for remote open enrollment meetings.	☑ Yes ☐ No
Employee healthcare cost calculator worksheets (cost estimates)	Sanford Health Plan can provide an employee healthcare cost estimator.	☑ Yes ☐ No
Other (please list)		☐ Yes ☐ No

21. Are you willing to provide communication and marketing resources to work with NDPERS in the development of NDPERS-specific member communication materials (educational, open enrollment, benefit plan related, ongoing communications)? Describe the resources, sample communications, and your proposed approach and strategy/plan.

Yes, Sanford Health Plan is committed to provide communication and marketing pieces in collaboration with NDPERS for NDPERS-specific member communication materials.

We will ensure the human and financial resources are available to build a full spectrum marketing and awareness campaign that will include identifying core principles, logo and image recognition, taglines, imagery and identification system. Sanford Health Plan has the following marketing team to offer:

- Brand Manager;
- Marketing Specialist;
- Sales and Advertising Coordinator;
- Print and Document Coordinator; and a
- Digital Web Team.

Additionally, a dedicated NDPERS Communications Coordinator and two Marketing Specialists will be hired to facilitate the marketing and communications for NDPERS.

22. How much lead time is necessary for you to guarantee that ID cards will be received by members prior to the plan year effective date of July 1, 2015?

Sanford Health Plan is capable of printing ID cards for all Members (not just subscribers) within 7 days of receiving a clean enrollment file. Ideally Sanford Health Plan would mail new ID cards by June 1, 2015, 30 days prior to the effective date.

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23. Describe your plan for the post-65 programs that you will offer to NDPERS retirees.

Sanford Health Plan is able to replicate the current Dakota Retiree Plan benefits that provide health care coverage as a secondary payer to Medicare similar to a NAIC Plan F. Each eligible retiree will be able enroll his/her eligible dependents as described in the current SPD.

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Plan Administration

24. Confirm that you will communicate legislative changes related to the operations of the plan in a timely manner, and describe the support staff and process.

Sanford Health Plan diligently monitors both state and federal legislative changes. The Plan's Director of Planning & Regulation, the Associate Actuary and two full-time Policy Analyst are active members and meeting participants in the following organizations:

- Member of Minnesota Council of Health Plans
- Member of Iowa Federation of Insurers
- Member of the AHIP; and
- AHIP State Strategy Team - The Health Plan's Director of Planning & Regulation is a member of the AHIP State Strategy Team for the Midwest region comprised of 11 states, including South Dakota, North Dakota, Minnesota, and Iowa as well as Arkansas, Colorado, Kansas, Missouri, Nebraska, New Mexico, and Oklahoma. The AHIP State Strategy team provides local level, member input and direction to the regional AHIP directors regarding advocacy efforts in the states in both the legislative and regulatory arenas.

Additionally, Sanford Health Plan collaborates with Sanford Health's Office of Public Policy and Office of Health Care Reform to monitor and provide strategic input to ensure the system is engaged and prepared to be an active participant in policy making discussions at both the state and federal level.

25. Describe your proposed transition of care plan. At a minimum, the transition plan must address:

a. Conditions or type of care that is typically transitioned;
b. Individuals who are in a course of treatment;
c. Transition process of current medical treatment;
d. Communication of transition issues to all plan members.

Sanford Health Plan will follow NDPERS's directive regarding the introduction of services to your employees. We will have a dedicated NDPERS member services staff, marketing and communication staff, and client services team who will travel to all locations and attend the meetings scheduled by NDPERS. We feel that it is important to provide personal service to your employees and to be present at the enrollment meetings to answer employee questions. Historically, we have furnished materials regarding network access, benefit schedules, pharmacy and formulary information to employees during open enrollment. Sanford Health Plan will supply as much communication material as you feel is necessary for your employees.

During this transition there may be an employee who has to change providers due to network restrictions. He/she will be required to complete a Transition of Care form in order to temporarily or permanently continue care. The form will be reviewed by Sanford Health Plan's Chief Medical Officer for appropriate access to care. Our goal would be to have all of these transitions identified and processed by June 1, 2015.

Sanford Health Plan recognizes the influence of the patient-physician relationship and is committed to positively impacting healthcare services through appropriate and effective

resources. Optimal health is sought by customizing and coordinating the resources we have with the needs of the individual.

NDPERS individuals who are seeking regular care with a provider of service outside of the Sanford Health Plan network (or other approved network) will only be transitioned to an In-Network Provider when appropriate to do so. An example of transition: If care can be provided closer to the patient's home and/or with an In-Network Provider, the Plan will set up a transition of care schedule with the patient to develop a relationship with a new provider of service perhaps allowing the member to have one or two follow-up visits with their current provider in order to make the transition a seamless process.

When a Transition of Care form is received by Sanford Health Plan, the letter is logged and forwarded the Utilization Management Department. A determination is made by the Chief Medical Officer as to whether the Transition of Care form was submitted due to medical necessity, provider access or if not applicable.

1. Not Applicable (N/A) – If the issue was not applicable to a Transition of Care, Member Services will clarify with the member.

2. Medical Necessity – If the Chief Medical Officer determines the Transition of Care Form to be due to medical necessity, he will make an approval or denial decision and the following will take place:

    a) Consideration for continuation of care due to medical necessity include the following criteria:
        - Member is in their 2nd or 3rd trimester of their pregnancy;
        - Member is receiving cancer treatment;
        - Member is receiving transplant services;
        - Member is receiving services where it would be deemed harmful to transition at this point of treatment;
        - Member is undergoing active treatment for a disabling, chronic or acute medical condition;
        - Member has a life threatening mental or physical illness; or
        - Member has a physical or mental disability defined as an inability to engage in one or more major life activities, provided the disability has lasted or can be expected to last for at least one year, or can be expected to result in death.

    b) The Chief Medical Officer will send a personalized letter stating the approval or denial. It is the discretion of the Chief Medical Officer as to the number of Out-of-Network visits to approve for patients in the transition of care phase. Members who may see an Out-of-Network provider for annual exams (i.e., follow-up after surgical procedure or remission of cancer) may be allowed to have one transition follow-up appointment but must be prior authorized by the Chief Medical Officer. If a member is allowed to go for an Out-of-Network visit, the Health Plan has the right to request specific testing or treatments be done at the In-Network level. The results can then be reviewed by the former provider as a consultation visit only. The designated person from Utilization

Management will complete this letter, make copies of the Transition of Care Form and distribute accordingly.

c) The original letter, along with a copy of the Transition of Care Form will be sent directly to the member.
d) A copy of the letter and the original Transition of Care Form will be given to Utilization Management for authorization and recording in the claims management system. Once completed, these copies will be filed in the member's folder. Utilization Management will also send a letter of authorization to the member.
e) If the Transition of Care Form involves an organ transplant, a copy of the Transition of Care Form is also given to the Transplant Coordinator.

3. Provider Access – If the Transition of Care form was received due to a network access issue, then the form is reviewed by the Provider & Payor Relations Department.
   a) If Provider & Payor Relations determines that there is not appropriate access for this service, then Provider & Payor Relations will send an approval letter to the member.
   b) If Provider & Payor Relations determines that there is appropriate access for this service, then Provider & Payor Relations will send a letter to the member denying the transition request.

   A copy of the letter and Transition of Care Form is saved in the claims system and a copy is given to the designated person in the Utilization Management Department to be filed in the member's file.

26. What is your total commercial and Medicare health plan enrollment? Complete the table below.

Dates	Commercial	Medicare
As of January 2010	33,431	2,666
As of January 2011	33,571	2,481
As of January 2012	37,704	2,599

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Eligibility and Billing

27. Are ID cards the sole means of determining member eligibility? If not, please describe.

No, ID cards are not the sole means of determining eligibility. Members, Providers and Clients can log into their respective online account portal, myHealthPlan, to view a Member's eligibility status.

28. If desired, can NDPERS update and maintain eligibility and check employee claim status online? Are there any special charges for access to and use of these tools?

Yes, Sanford Health Plan offers the ability to perform enrollment transactions online. This secure online enrollment portal, entitled Empowered Benefits, provides the employer with instant access to their employee information and allows management of their enrollment by offering the ability to add, making changes or terminate employees online.

There are not separate charges for access to and use of the online tool.

The online enrollment tool is accessed through the employer's myHealthPlan account, which is offered to each employer, regardless of size, and enables the employer to access various information, including the ability to:

- View member eligibility, as well as benefit summaries for the member
- Order Replacement ID Cards
- View Preventive Health Guidelines
- Print Provider Nomination Request Forms, and
- Print medical and flex claim forms, if applicable

29. NDPERS will submit enrollment, billing and premium remittance via a centralized electronic system. NDPERS will collect enrollment/eligibility information which will be provided to the successful contractor on a data file that follows the HIPAA 834 file specifications. Premium payment information will be provided on a data file that follows the HIPAA 820 file specifications. Files will be transmitted using a secure file transmission process. Please confirm that you can receive this data in that format and media. Please confirm your ability to conform to this process and identify any potential issues.

Sanford Health Plan is able to receive enrollment, billing and premium remittance in that meet these file specifications.

30. Please describe how you handle manual eligibility updates and the turn-around/timing of such updates.

Enrollment

Sanford Health Plan accepts enrollment applications and eligibility files both electronically or hard copy. Manual updates are processed within 2 business days.

Full audit procedures are in place to assure that Membership information is timely, complete and accurate. Routine audit checks are conducted by Member Services Representatives of all newly processed enrollment applications. The enrollment applications are reviewed against the required enrollment fields in the Xcelys Claims Information System.

The following eligibility checks are conducted with processing applications: waiting period verification, effective date, dependent eligibility criteria and dependent age criteria, are all verified before applications are processed.

We conduct the following edit checks when processing application and enrollment changes: name, identification number (duplicate member), date of birth, sex, group number, date of hire, effective date, address, relationship to subscriber, dependent age, student verification, prior coverage verification, other coverage verification.

If no errors are identified, the Representative signs off on the auditing checklist. An enrollment audit log is maintained in order to identify any processing issues. The Audit Log provides documentation of the number of applications that are audited each month and the number and type of errors that are identified through the audit process. This audit log is reviewed by the Enrollment Coordinator to assure that the accuracy of Membership processing is consistent and that the audit process is conducted on an ongoing basis.

Eligibility Changes
Eligibility changes (electronic or paper) are manually processed within 2 business days. All change requests are reviewed for appropriateness of effective date and eligibility requirements before processing. The system allows all necessary coordination of benefits (COB) information to be recorded on an individual member basis. The other coverage carrier, type of carrier, effective date, policy number termination date, termination reason, entitlement (for Medicare), and COB order is stored for each Member with other coverage. Student status is verified for all dependents and maintained in a specified “dependent verification” field with a “verified through date” which is updated bi-annually or on an as needed basis. Sanford Health Plan works with the sponsoring group to establish appropriate eligibility standards meeting governmental and employer requirements.

Customer/Member Service

31. **Confirm if you will provide and maintain dedicated customer service staff acceptable to NDPERS. This unit will provide dedicated local and toll-free telephone numbers and shall respond directly to member inquiries regarding benefits, claim status, selecting participating providers, and provide general assistance with navigating on-line and other resources available through the health plan and NDPERS websites. Describe the structure and organization and provide an organizational chart of the unit you are proposing.**

    As described in Section 18 of this RFP, Sanford Health Plan will provide a dedicated Member Services Department comprised of the Member Services Supervisor, 16 Member Services Representatives, one of which is the Team Leader. A dedicated toll-free and local phone number shall also be established along with mutually agreed upon hours of operation.

    The Claims department and Member Services department are physically located within close proximity to each other to facilitate efficient workflow and communication to address and resolve questions as quickly as possible. Sanford Health Plan evaluates phone call statistics and staffing needs for the Member Services Department to ensure members have timely access to customer service.

    All Member Service and Claims representatives rely on the claims payment system to view benefits. Representatives can also simultaneously view the member's online myHealthPlan account information to address and discuss exactly what the member is seeing online.

    All claims and customer service calls are received at a central location conducive to open, inter-department communications in order to resolve inquiries in a timely manner. Call centers are not outsourced to external (or international) companies not familiar with health plan operations and the details of plan design and claims payment processes.

    Additionally, all calls are always answered by a live person during normal business hours. Calls are not sent to voicemail if the call queue is busy, nor do callers ever receive a busy signal. Callers are not required to dial in their member ID numbers or any other information prior to a call being answered; all member information is collected by the receiving Member Service representative to create a personal and courteous experience.

Claims Administration

32. Provide the following information regarding the claims administration unit that will handle the NDPERS account. If there is more than one claims processing location, provide information for each.

	Claims Processing Unit
Address/Location	Sioux Falls, SD
Phone Numbers	(605) 328-6840
Days and Hours of Operation	Monday – Friday; 8am-5pm CST
Number of Members Serviced	96,500
Number of Employer Groups Serviced	315
Ratio of Claims Unit Staff to Members Serviced	1 FTE:5,000 members
Volume of Claims Processed Daily	4,000

33. Will your organization identify a dedicated team of claims processors for the NDPERS account? If processors are shared with other clients, on average, how many clients does one team service? What is the average length of service of the claim processors?

As described in Section 18 of this RFP, Sanford Health Plan will provide a dedicated Claims Department for the NDPERS program. The NDPERS Staff will not be shared with other clients. The average length of service of current claims processors is 10 years.

34. Confirm that you are able to administer the NDPERS designs (Dakota Plan and Dakota Retiree Plan) and benefit levels without manual intervention. If you are unable to administer the plan, you must specify any plan design deviations proposed as specified in the RFP.

With the exception of these three manual interventions, Sanford Health Plan is able to automatically administer the NDPERS design. Please see Exhibit F2 under separate cover with this RFP.

19. Sanford Health Plan's claims system cannot administer a "per condition" benefit automatically. For outpatient therapy services (PT, OT & ST) we can administer count/quantity/visit limits without manual intervention.

35. Describe your claims processing system/platform and claims administration process.

Sanford Health Plan utilizes the Epic suite of Tapestry modules for payer operations. Enrollment, Premium Billing, Customer Service, Provider Network/Pricing, Service Pre-Authorization, Benefit/Claim Adjudication and Remittance functions are performed on this platform. Core health plan data is downloaded nightly to a local SQL Server-based data repository which is the foundation for analytical reporting and interface feeds to external processes and web portals. The Epic platform provides full EMR integration within the Sanford Health Enterprise as well as delivering standalone payer functionality with external providers. The Tapestry application piggybacks onto the same redundant, high availability Sanford Health datacenters and IT infrastructure utilized for 24/7 healthcare operations. Sanford Health has utilized Epic applications since 2004 and the Health Plan became operation on Tapestry in October 2013.

36. How do you determine reasonable and customary ("R&C") charge allowances? What methodology is used (i.e., HIAA)? What percentile is used? How often are R&C schedules updated?

Sanford Health Plan establishes “Reasonable Costs” as those that do not exceed the lesser of: (a) negotiated schedules of payment developed by Sanford Health Plan which are accepted by Participating Providers or (b) the prevailing marketplace charges. R&C is evaluated annually.

Reporting

37. Confirm your ability to provide the reports described in the RFP and provide samples.

Sanford Health Plan is able to provide all monthly reports for each plan offered (e.g. Grandfathered PPO, Non-Grandfathered PPO, HDHP, etc.) and provide roll-up reports to an annual, aggregate report. Please see Attachment C for a sample report package. Please note this report package may not currently reflect the below formats, however Sanford Health Plan’s internal IT Report Analysts are capable of customizing report formats for our clients and the dedicated PERS IT staff will be responsible for building and maintaining custom NDPERS report packages.

- ☑ Monthly claim reports broken down by plan, by category, split medical vs. prescription drugs.
- ☑ Monthly enrollment counts by plan.
- ☑ Monthly information, by plan, regarding large claims in excess of $100,000.
- ☑ Monthly premium vs. claim ratio report by plan with a year to date roll up.
- ☑ Monthly and year to date breakdown of medical claims by type of services by plan.
- ☑ Quarterly and year to date breakdown, by plan of medical charges submitted, ineligible charges, provider discounts, COB savings, deductibles and coinsurance paid by participants and final paid claims.
- ☑ Annual policy accounting statement including claim reserves.

- ☑ Annual medical claim lag study.

Sanford Health Plan also commits to provide:

- ☑ Claims specific data on a monthly basis in a format acceptable to NDPERS and subject to all federal and state laws on confidentiality and open records.
- ☑ Carry-over any deductible and or coinsurance amounts incurred from January 1 to June 30, of the prior contract period.
- ☑ Provide annual accounting of HSA accounts including year end balances; Number (and value) of eligible expense withdrawals; and Number (and value) of non-eligible expense withdrawals.

38. Describe your online reporting capabilities. Please describe the data/information and types of reports that can be accessed and downloaded from your online system.

Sanford Health Plan currently provides electronic and paper reports to clients at quarterly service meetings and upon request. However, we continue to evaluate a new online module to enhance our current myHealthPlan online portal for our clients and its reporting functions, which would include a custom report builder, to help NDPERS and other clients to:

- Enable clients to view records that have been updated since the last report and/or service meeting;
- Review trends and identify potential health issues that may impact worker productivity;
- Allows multiple users to access the site simultaneously, viewing reports jointly or independently;
- Robust sort and filter functions to create custom report views that can be reapplied to future reports;
- Clients can also delegate and manage access to the reports by benefits managers, payroll personnel, supervisors, wellness coaches, nurse case managers and others who need to see aggregate claims information, while ensuring the protection of employees' privacy.

We are committed to providing tools that empower our clients by providing them immediate access to actionable information so they can make timely business decisions.

39. Explain your ability to comply with the NDPERS current data warehouse arrangement by providing medical claims and enrollment data to NDPERS in a format agreed upon between you and NDPERS.

Sanford Health Plan agreed to provide NDPERS with its raw data, including detailed claims and enrollment data sets, based on a mutually agreed upon format no less than monthly for the data warehouse repository maintained by NDPERS.

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Case/Utilization Management

40. Provide a brief overview of your utilization management programs, including pre-certification, concurrent review, discharge planning, and large case management.

The Utilization Management Department staff performs the daily Utilization Management functions. Sanford Health Plan ensures that staff are properly trained, qualified, licensed as appropriate, and supervised. The dedicated NDPERs department will consists of the following roles:

- The Chief Medical Officer, a board certified Physician, who is responsible for the overall UM program and implementation. He reviews the medical appropriateness of any UM decision. However, medical appropriateness is determined by nationally developed and accepted review criteria from Milliman and InterQual which encompass literature review, specialty society standards of care, DME criteria, Medicare guidelines and health plan benefit interpretation.

- Utilization Management Coordinator(s) (Registered Nurses) or Technicians (Licensed Practical Nurses, Medical Assistants) report to the Chief Medical Officer, as do Complex Case Managers. Their responsibilities include the following:

    - Prior authorization of services
    - Concurrent, Retrospective (Post-service), and Focus Reviews
    - Identification of any quality assurance issues
    - Coordinate admission prior authorizations
    - Chief Medical Officer referrals
    - Member guidance and education

- Care Management Case Manager(s) report to the Care Management Manager and the Chief Medical Officer. Their responsibilities include the following:
    - Compilation and review of employer group utilization data
    - Health education to employer groups and members
    - High risk member identification and management (including Transplant Coordination)
    - Identification of any quality assurance issues

Physician Quality Committee

Sanford Health Plan's Physician Quality Committee is charged with supporting the Plan's Board of Directors and Chief Medical Officer in meeting quality assurance goals on issues of care. The Physician Quality Committee consists of physician and pharmacist members. Members of the Committee are appointed by the Chief Medical Officer who is the chairperson. The Committee meets eight times a year and the Plan's Chief Medical Officer reports to the Board of Directors at least four times a year the Physician Quality Committee's summary of trends, quality initiatives, findings, corrective actions and results.

The Committee responsibilities include developing and continually evaluating the review criteria used in the evaluation of appropriate utilization. The Committee is also responsible for quality activities by establishing, reviewing, and instituting needed actions and ensuring follow-up as appropriate. The review criteria shall be reviewed no less than once annually. Any recommended changes in the criteria or any other program changes must be approved by the Board of Directors.

Quality Improvement Program

Sanford Health Plan and its participating providers acknowledge their responsibility to provide high quality care in a cost-effective manner through an ongoing monitoring, evaluation and improvement process. The organized method for monitoring, evaluating, and improving the quality, safety and appropriateness of health care services including behavioral health care to members through related activities and studies is known as the Quality Improvement (QI) program.

The mission of the QI Program is to provide accountability for the quality of health care delivery and service. This is accomplished through the commitment of the Board of Directors and the Physician Quality and the Health Plan Quality Improvement Committees to develop and carry out a Quality Assurance Plan that has a systematic approach to assessing, measuring, defining and resolving medical care, and behavioral health and service issues.

Disease Management Services

Sanford Health Plan has developed a prospective program to manage our Members with chronic medical conditions. The emphasis on these programs is disease prevention and education to promote disease compliance for Members with targeted chronic medical conditions to improve the overall health, wellness and quality of the Member's life. The current disease management programs include: Congestive Heart Failure, Diabetes, and Hypertension.

Eligible members for the disease management programs are identified on a monthly basis by claims data or other sources like Utilization Management data, referrals, or after the initiation of a health risk assessment at the time of enrollment or with the initiation of health and wellness programs. The Health Plan Case Managers reach out to high risk Members identified with open disease specific care gaps to facilitate closure of gaps, adherence to treatment plans and to improve overall compliance with the evidence based medicine standards. Currently all disease management programs are opt-out (the member is automatically considered enrolled in the program unless they notify the Plan that they do not want to participate). Once identified by the disease management program, the Health Plan Case Managers reach out to high risk Members who are identified with open disease specific care gaps to facilitate closure of gaps, adherence to their treatment plan and to improve overall compliance with the evidence based medicine standards

The Medical Management Program (also referred to as Utilization Management or UM) is an organized method for monitoring and evaluating the course of treatment rendered

by all health personnel, given a standard of desirable care. It is a process that looks at the following to determine if the treatment, as prescribed, is appropriate:

1. The medical necessity of the treatment
2. The setting for the treatment
3. The types and intensity of resources to be used in the treatment
4. The time frame and duration of the treatment

Additionally, the Medical Management program monitors the delivery of medical and behavioral health services to ensure that those services are performed at the appropriate level of care in a timely, effective, and cost-efficient manner. It also studies patterns of health services utilization for Physician credentialing, sanctioning and continuing education of the medical staff, administration and consumers regarding health care cost containment.

The Medical Management and Care Management are responsible for:

1. Identifying problems by utilizing a system in which network practitioners, members and Sanford Health Plan staff can refer issues, concerns and potential opportunities for improvement.
2. Development and implementation of practice guidelines and/or clinical indicators. This includes structure, process and outcome indicators that are derived from current research and studies.
3. Establishing, monitoring and evaluating process for staff and committees to select appropriate topics, develop study parameters, retrieve and summarize data, and implement improvement interventions.
4. Review of the following quality performance measures on an ongoing basis:
    - Preventive Services
    - Health Education Programs
    - Obstetrical Care
    - Acute and Chronic Illness
    - Mental Health and Substance Abuse
    - Data from Satisfaction Surveys such as CAHPS and the Provider Satisfaction Survey.
5. Distribute any QI results, which may warrant improvement interventions, sanctions, improvement opportunities or concerns to the credentialing files for coordination in the annual recredentialing process.
6. Perform Medical Record Review at practitioner and/or Provider offices.
7. Perform peer review activities consisting of medical care reviews that assess the utilization of services and the quality of care rendered by practitioners and/or Providers. Results of the peer review process will be available for recredentialing purposes.
8. Evaluate healthcare quality related Complaints, Grievances and Appeals on a quarterly basis.
9. Perform quality improvement studies as it relates to timeliness of access to care/services and member service activities.

The Medical Management Program includes authorizations of services, Concurrent Reviews, Retrospective (Post-service) Reviews, focused reviews, case management

and discharge planning. Sanford Health Plan does not delegate any of these Medical Management (Utilization Management) activities, with the exception of Specialty Drug Management which includes dispensing according to The Plan's approved prior authorization criteria delegated through Curascript.

Medical Management Operational Procedures
Utilization Review

The purpose of Utilization Review is to establish requirements and standards of operation for Certification of medical Utilization Review agents. The Utilization Review criteria for medical services used by the Utilization Management Department shall be made available, upon request, to Participating Physicians. The clinical review criteria to determine medical necessity utilizes nationally developed and accepted review criteria from Milliman and InterQual. Milliman will be used as a length of stay guideline only. Clinical review criteria may also be developed based on literature review, specialty society standards of care, DME criteria, Medicare guidelines and health plan benefit interpretation. Local medical review policies will be utilized for decisions regarding Medicare coverage. The guidelines will be reviewed and updated, as appropriate, on an annual basis. Utilization Management staff review all cases and are instructed to refer any cases to the Chief Medical Officer or Behavioral Health Practitioner where medical necessity and/or criteria are not met or appropriate as they cannot make Denial decisions in those cases. Utilization management staff may make authorization decisions based on policies, procedures and benefit coverage guidelines. Utilization determination will be based on accepted review criteria, medical record review, and/or conversations with appropriate Physicians.

Utilization Review is a set of formal techniques designed to monitor the use of, or evaluate the clinical necessity, appropriateness, efficacy, or efficiency of, health care services, procedures, or facilities. The Utilization Review process shall consist of comparing Member profile information against set clinical review criteria (see policy MM-53 Utilization Management Criteria & Guidelines) along the following dimensions:

1. Presentation/Complaint;
2. Relevant History;
3. Medical History/Medications;
4. Previous Treatment;
5. Chemical Dependency History;
6. Treatment Plans and Recommendations

Medical Management Decision Protocols

The Plan's Medical Management decision protocols for Utilization Review consist of seven major component activities. Utilization Review is conducted prior to an admission or a course of treatment. These component areas include inpatient and outpatient services.

1. Prior-Authorization of all elective Hospital admissions (including same day surgeries), non-Urgent Care, pharmaceutical decisions and behavioral health services
2. Concurrent Reviews
3. Retrospective (Post-service) reviews
4. Focused reviews

5. Discharge planning
6. Complex Case Management
7. Case Management

Prior Authorization (Certification) of Services (Pre-service)
The Member is ultimately responsible for obtaining prior authorization from the Utilization Management Department in order to receive In-Network coverage. However, information provided by the Practitioner's office will also satisfy this requirement. Primary Care Physicians and any Participating Specialists have been given instructions on how to get the necessary authorizations for surgical procedures or Hospitalizations you may need.

Prior authorization (Certification) is the urgent or non-urgent authorization of a requested service prior to receiving the service. Prior authorization (or preCertification/Pre-service decision) is designed to facilitate early identification of the treatment plan to ensure medical management and available resources are provided throughout an episode of care.

The Plan determines approval for prior authorization based on appropriateness of care and service and existence of coverage. The Plan does not compensate Practitioners or other individuals conducting Utilization Review for issuing Denials of coverage or service care. Any financial incentives offered to Utilization Management decision makers do not encourage decisions that result in underutilization and do not encourage Denials of coverage or service.

Prior authorization is required for all inpatient admissions of Plan Members. This requirement applies to, but is not limited to the following:

1. Acute care Hospitalizations (including medical, surgical, and obstetric admissions);
2. Psychiatric Hospitalizations;
3. Rehabilitation center admissions; and
4. Chemical dependency admissions.

Admission before the day of non-emergency surgery will not be authorized unless the early admission is medically necessary and specifically approved by the Plan. Coverage for Hospital expenses prior to the day of surgery will be denied unless authorized prior to being incurred.

Concurrent Review
Concurrent Review (i.e. inpatient Hospitalization or ambulatory care) means a request for an extension of an approved ongoing course of treatment over a period of time or number of treatments is warranted. Sanford Health Plan will follow the same time frame as for prior authorization of services for a Concurrent Review decision.

Concurrent Review is conducted during a Member's Hospital stay or course of treatment. This includes inpatient Hospitalization including behavioral health care. The initial review is conducted within *twenty-four (24)* hours after admission. Subsequent reviews depend on the Member's condition, but at least *one (1)* subsequent review will

take place prior to the expiration of the approved length of stay. At the time of the initial review and each subsequent review, the Member's condition is evaluated to determine:

- the Member's progress;
- if the Member meets the approved acute level of care criteria;
- the projected discharge date; and
- the need for discharge planning.

When the Member's condition or treatment schedule changes, additional stay days are approved if the Member's condition has deteriorated or the Member has not progressed as originally anticipated. Additional stay days must meet the continued stay review criteria and, if acute levels of care criteria are not met, a decision to authorize further treatment must be made at that time. Authorization of the Hospital or behavioral healthcare stays will terminate on the date the Member is to be discharged from the Hospital or behavioral healthcare Facility (as ordered by the attending Physician). Hospital/Facility days accumulated beyond ordered discharge date will not be authorized unless the continued stay criteria continues to be met. Charges by Practitioners and/or Providers associated with these non-authorized days will be considered non-covered. The Plan Chief Medical Officer or a Physician or appropriate behavioral health Practitioner reviews all cases that may lead to Denial and those that are denied.

Retrospective Review (Post-service)
The Utilization Management Department may be required to perform Retrospective or Post-service Reviews at the direction of the Plan's administration. Retrospective (Post-service) Reviews may be used to identify patterns of care, to determine if charged services were actually provided and to Retrospectively Review services or denied days that have already occurred.

These reviews may be used to:

- Identify Practitioner patterns of care based on the parameters established by the Plan.
- Recommend positive changes in the Physician practice patterns and the credentialing process as identified by analysis and review of data.
- Analyze consumer patterns of care and to redirect the data to the employer groups to make any appropriate suggestions as to benefit structure.
- Determine if services charged were actually provided.
- Retrospectively deny days incurred due to failure to meet admission or continued stay criteria. Costs are to be absorbed by In-Network Providers.

Focused Reviews
Focused review is the process of reviewing patient's medical records as they relate to specific diagnoses, problem procedures, and/or Physicians identified by the Chief Medical Officer, Care Management Staff, Health Plan Quality Improvement Committee or Physician Quality Committee as an actual or potential utilization problem. The review may be Concurrent or Retrospective (Post-service).

If analysis of the focused review reveals ineffective or inefficient use of Hospital services or questionable patterns of care, the focused review will be subject to a more comprehensive in-depth review using the Plan's established criteria. Results of the focused review are to be reported to the requesting party and if a problem exists, a report and recommendations for action are made to the appropriate entity.

Discharge Planning
Discharge planning is the formal process for determining the coordination and management of care that a patient receives following discharge from a Facility. The reviewer assists in the identification of patients with post Hospital care needs for whom social service/discharge planning services would be appropriate. The Utilization Management Coordinator/Technician can, with the advice and counsel of the attending Physician, work actively with social service discharge planning to assist in coordinating inter-Hospital transfer, transfers to nursing homes, home health care, transportation, and durable medical equipment.

The Care Management Case Managers will contact Members post discharge to determine if access or care problems exist. This discharge follow-up phone call will allow the nurse to assess each Member, determine Member needs, and initiate the appropriate medical management intervention.

Complex Case Management
Sanford Health Plan's Complex Case Management Program is available to qualifying Health Plan Members and their families free of charge. Complex case management is the coordination of care and services provided to members who have experienced a critical event or diagnosis that requires the extensive use of resources and who need help navigating the system to facilitate appropriate delivery of care and services. The goal of complex case management is to help members regain optimum health or improved functional capability, in the right setting and in a cost-effective manner. It involves the comprehensive assessment of the member's condition; determination of available benefits and resources; and development and implementation of a case management plan with performance goals, monitoring and follow-up. Concentrating for the most part on catastrophic or chronic cases, case manager nurses are called in to consult and manage diagnoses such as serious traumas, cancers, HIV, organ transplants, spinal cord injuries, multiple chronic illnesses and/or chronic illnesses that result in high utilization and diagnoses as identified by our reinsurance provider.

Registered Nurse Case Managers are responsible for managing these complex cases to ensure high quality, cost effective and appropriate utilization of health services. The case manager acts as a Member advocate, seeking and coordinating creative solutions to a Member's health care needs without compromising quality health outcomes for selected medical diagnoses. The case manager contacts our Members by phone and mail. She is able to act as a resource, educator and/or coordinator of all medical care if needed.

Case Management
Sanford Health Plan offers employer groups Case Management services from our Care Management Department in order to assist in controlling healthcare costs. The case manager facilitates communication and coordination between Employees and Providers of services. This service involves all Members of the healthcare team in the decision-

making process in order to minimize fragmentation of the healthcare delivery system. The case manager educates the employer group Members about wellness, health conditions, community resources, insurance benefits, cost factors and issues of concern. The case manager is the link between the individual, the Practitioners and/or Providers, the payer and the community. The case manager should encourage appropriate use of medical cost effectiveness on a case-by-case basis. The case manager is an advocate for the Member as well as the payer to facilitate a win-win situation for the patient, the healthcare team and the payer.

Behavioral Health Care

The referral process for behavioral health care is based on the Provider Network established by Sanford Health Plan. In-Network facilities for inpatient Hospitalization must be utilized for authorization of services. If a Member chooses an Out-of-Network Facility then the Out-of-Network benefit limits will apply. Behavioral health care specialists for outpatient services are contracted for access as follows:

- Minnesota: within 30 miles of a Member's city of residence
- Iowa: within 60 miles of a Member's city of residence
- South Dakota: within 90 miles of a Member's city of residence, and.
- North Dakota: within 50 miles of a Member's legal residence.

A triage program is available to Practitioners for assessment and placement by Sanford's Behavioral Health Needs Assessment Team. This Facility has intake staff available 24 hours a day to assess the needs of a Member. The contracted Practitioners have access to a toll-free number to discuss a case, refer a Member for assessment or to triage a Member into a psychiatrist office on an urgent basis. Sites of service and levels of care for behavioral health services are evaluated through the contracting and credentialing/recredentialing process.

Physician Reviewer

A Physician reviewer is made available by phone to any Practitioner and/or Provider to discuss determinations based on medical appropriateness. The Plan informs the treating Practitioner of the Utilization Review criteria utilized by way of the Denial letter. The Physician reviewer may be the Plan's Chief Medical Officer or a Physician consultant. A Physician or appropriate behavioral health Practitioner (i.e., psychiatrist, doctoral-level clinical psychologist or certified addiction medicine specialist) reviews any Denial of behavioral health care that is based on medical necessity. For Sanford Health Plan of MN enrollees: For chiropractic, mental health and dental determinations not to certify, the review must be performed by a chiropractor, psychiatrist (certified by the American Board of Psychiatry and Neurology and licensed in the state of Minnesota) or dentist. In all other situations, on Appeal the case must be reviewed by a Practitioner practicing in the same or similar specialty.

41. What is the source of the criteria used for the following:

e. Determining surgical necessity and whether a second opinion is required.

Sanford Health Plan will cover the cost of a second opinion as long as it is requested by and provided by an In-Network Physician. This request is to aid in determining the diagnosis or treatment options of specific member conditions.

If after that visit, the physician feels that the Member would be better served at an Out-of-Network facility the Member will be authorized for that service. In general, consultations are for opinions only and not for care. If the member chooses to remain in the care of the consulting physician, in-network benefits may not apply.

This does not apply to emergency requests. Emergency requests will be evaluated following Plan criteria for Emergency Services.

f. Determining approved length of stay.

UM decisions to determine medical necessity are based on reasonable medical evidence by utilizing nationally developed and accepted review criteria from Milliman and InterQual. Milliman data is used as a length of stay guideline.

g. What percentile of the data is used?

Not applicable.

h. Approximately what percentages of review cases are referred to a physician because the initial review and attending physician cannot reach agreement on the proposed level of care?

This data is not tracked.

i. Does this percentage vary between medical/surgical and psychiatric/substance abuse cases? If so, provide variances.

This data is not tracked.

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Health Risk Management Programs

42. Indicate in the table below if you currently provide the care or disease management program listed, the number of members from ND-based employers currently enrolled, the cost per participant, and its accreditation status.
The below numbers include participation across all product lines and all states. Sanford Health Plan is committed to develop additional disease management programs that meets the state's needs.

	Program	Number of Members Enrolled	Cost per Participant	Accredited? If so, indicate accrediting organization.		Program	Number of Enrolled Members	Cost per Participant	Accredited? If so, indicate accrediting organization.
☐	Arthritis	NA	Included in Cost Proposal	NA	☒	High Risk Pregnancy/ Prenatal Support	84	Included in Cost Proposal	NA
☒	Asthma	5,021	Included in Cost Proposal	NA	☐	Hypercholesterolemia	NA	Included in Cost Proposal	NA
☒	Cancer (screenings and reminders)	28,487	Included in Cost Proposal	NA	☐	Pain Management	NA	Included in Cost Proposal	NA
☒	Congestive Heart Failure	260	Included in Cost Proposal	NA	☐	Renal Failure	NA	Included in Cost Proposal	NA
☐	COPD	NA	Included in Cost Proposal	NA	☐	Smoking/ Tobacco Cessation	NA	Included in Cost Proposal	NA
☒	Depression	2,153	Included in Cost Proposal	NA	☐	Weight Management	NA	Included in Cost Proposal	NA
☒	Diabetes	3,446	Included in Cost Proposal	NA	☐	Other, please indicate:		Included in Cost Proposal	NA
☐	Low Back Pain	NA	Included in Cost Proposal	NA	☐	Other, please indicate:		Included in Cost Proposal	NA

43. Briefly describe each of the programs currently offered and the cost of each program. Do you currently track and report specific clinical outcome measurements for each of the conditions for which care/disease management is offered? Please list them.

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As an NCQA-Accredited Health Plan, Sanford Health Plan tracks and utilizes a variety of measures for the development and refinement of the Plan's Quality Improvement Activities, Disease Management Programs and Clinical Practice Guidelines. These measures all include some form of continuous enrollment criteria which specifies that a member has to be enrolled in the Plan a certain amount of time before they may be included in the final population for the measure. This way the only members that are included in the final population are members for whom the Plan has had an adequate opportunity to provide services and education.

One of these programs is the **Effectiveness of Care Domain** which measures provide information about the quality of clinical care the Plan delivers to its members including preventive, acute and chronic care services. Please refer to Attachment D to view Sanford Health Plan's Health Employer Data Information Set (HEDIS) Report

The Effectiveness of Care measures included in the Sanford Health Plan HEDIS Report Report are:

- Adult BMI Assessment
- Weight Assessment and Counseling for Nutrition
- and Physical Activity for Children/Adolescents
- Childhood Immunization Status
- Colorectal Cancer Screening
- Breast Cancer Screening
- Cervical Cancer Screening
- Chlamydia Screening in Women
- Appropriate Testing for Children with Pharyngitis
- Appropriate Treatment for Children with Upper
- Respiratory Infection
- Avoidance of Antibiotic Treatment in Adults with
- Acute Bronchitis
- Use of Spirometry Testing in the Assessment and
- Diagnosis of COPD
- Use of Appropriate Medications for People with
- Asthma
- Cholesterol Management for Patients with
- Cardiovascular Conditions
- Controlling High Blood Pressure
- Persistence of Beta Blocker Treatment After a Heart
- Attack
- Comprehensive Diabetes Care
- Use of Imaging Studies for Low Back Pain
- Follow-Up Care for Children Prescribed ADHD
- Medication
- Antidepressant Medication Management
- Follow-Up After Hospitalization for Mental Illness
- Flu Shots for Adults Ages 50 – 64
- Medical Assistance with Smoking Cessation

The Access/Availability of Care domain contains measures that assess Sanford Health Plan members' access to care and whether those members are actually utilizing the

services available to them. Most of these measures include some form of continuous enrollment criteria which specifies that a member has to be enrolled in the Plan a certain amount of time before they may be included in the final population. This way the only members that are included in the final population are members for whom the Plan has had an adequate opportunity to provide services and education.

The Access and Availability measures included in HEDIS report are:

- Adults' Access to Preventive/Ambulatory Health
- Services
- Children and Adolescents' Access to Primary Care
- Practitioners
- Initiation and Engagement of Alcohol and Other Drug
- Dependence Treatment
- Prenatal and Postpartum Care
- Call Abandonment
- Call Answer Timeliness

Sanford Health Plan has developed a prospective disease-specific approach to the management of a member's chronic medical conditions. The emphasis of these programs is disease prevention and wellness education for targeted members and practitioners to improve the overall health, wellness and quality of the member's life. The goal of the program is to provide tools to educate our members on promoting improved health through better prevention, detection, treatment and education. By analyzing utilization patterns, we will be able to educate our members on preventable complications so that emergency department visits and hospital admissions/readmissions may be reduced. These tools will facilitate understanding and consumer responsibility for their own disease processes as well as coordination of care between their primary care practitioners. Additionally, Practitioners receive program details and condition-specific guidelines.

Congestive Heart Failure Disease Management Program

- Provides educational materials on appropriate treatment and management.
- Topics include treatment plans, sodium intake, nutrition, medication use, exercise and activity, tips for family, lifestyle changes and advance care planning.
- Members receive quarterly mailings and nurse phone support.

Diabetes Disease Management Program

Eligible members for the Diabetes Disease Management Program are identified through:

- ✓ Claims (at least one of the following):
  - o Dispensed insulin or oral hypoglycemics/antihyperglycemics
  - o Two face-to-face encounters with different dates of service in an ambulatory setting or non-acute inpatient setting
  - o One face-to-face encounter in an acute inpatient or emergency room setting
- ✓ Health Risk Assessment/health Screening results
- ✓ Other information: collected from case management or utilization management
- ✓ Practitioner or self referral

Members of all ages who meet these criteria are eligible for the program. This determination of eligible members occurs on a monthly basis.

Providing Eligible Members with Written Program Information

Eligible members are sent a program information packet which includes a health risk assessment. Members may choose to not participate in the program by completing and returning the Non Participant Form which is included in the program information packet. Members who choose this option will be removed from the program mailing list and will not be considered enrolled in the Diabetes Disease Management Program. Members who do not return the Non Participant form are automatically considered enrolled in the program.

The initial program information packet includes an outline of how to use the program's services, a health risk assessment, the types of interventions that are involved, how to contact the Plan regarding any questions related to the program or its services (see below for details) as well as details on quarterly mailings which include a wide range of educational materials

Program Participation and Participation Rates

This program consists of an involuntary participation or an opt-out process. Eligible members receive the initial program mailing accompanied by a Non Participant Form. If the member chooses not to participate in the program, they must complete non participant form and return it to Sanford Health Plan in the provided postage paid envelope. Eligible members who do not return this form are automatically considered enrolled in the program. Members are considered actively enrolled when they have at least one interactive contact in which the member receives self management support or health education. Interactive contact is a two-way interaction in which the member receives self management support or health education by one of the following modes:

- Mail – interactive communication that provides self management support or health education that was requested by the member; communication in the form of a member survey, quiz or assessment of member knowledge gained from reading the communication.
- Phone – in person contact (individual or group)
- Online contact – interactive web based module, secure email.

Note: health education or self management support given during the course of a health risk appraisal or health assessment is considered an interactive contact.

Interactive contact does **not** include:

- completion of health risk appraisal
- contacts made only to make an appointment, leave a message or acknowledge receipt of materials.

An Access database is maintained of eligible members who remain enrolled in the Diabetes Disease Management Program. The program's active participant rates are calculated on an annual basis and reported in the Annual Quality Improvement Program Evaluation. This participation rate is calculated as the number of eligible members divided by the total number of eligible members with at least one interactive contact.

Population Stratification *(Stratification classifies eligible members according to severity or other clinical criteria based on available clinical data. This is a dynamic process, and a level can change as a member's condition changes.)*

The eligible member population that remains enrolled in the Diabetes Disease Management Program is stratified based on risk factors identified via the HRA, through noncompliance with the HEDIS measures or by an inpatient stay for diabetes. Enrolled members are stratified as high, moderate/low risk by the Quality RN based on an HRA scoring tool or other claims related information. The stratification process is completed at least annually to determine if there are any members whose stratification status should change for the next year's round of program mailings. The stratification level identification for each member is documented in bWell to allow for separate lists to be pulled for the purposes of interventions based on specific stratification levels.

Interventions Based on Stratification *(Interventions must be implemented based on each stratification level.)*

Interventions are implemented based on the member's identified stratification level. Those members in the moderate/low risk category are mailed general education on a quarterly basis. This information includes topics such as blood sugars, eating right, medications, exercise, recommended tests and more.

High risk members receive all of the above interventions in addition to calls from a Care Management nurse every 3 to 6 months or more frequently as needed. (example: case of inpatient hospitalization or other chronic comorbid conditions.) Members who were not in compliance with any one or more of the HEDIS measure's indicators are pulled into a report, which is sent to the member's identified practitioner to notify them of their noncompliance with one or more of the HEDIS indicators. High risk members receive a phone call from the Quality RN.

Enrolled members may reach a Registered Nurse toll-free at 1-800-805-7938 or (605) 328-6807 for any questions concerning the Disease Management Program, medical benefits or other issues of concern.

All interventions implemented are tracked by date and type in bWell TX to allow for reporting. Details of specific telephonic interventions are documented in the nurses' notes screens of the bWell.

Condition Monitoring *(Mechanisms that allow the patient or practitioner to assess how well a condition is being managed.)*

Members and practitioners are provided with information regarding the recommended clinical practice guidelines to be followed for diabetes management.

Standards of Medical Care for Patients With Diabetes Mellitus - American Diabetes Association.

These guidelines are a resource for members and practitioners to assess how well they are managing their diabetes care.

The Care Management nurse assists high risk level members in monitoring their condition to assess how well they are managing their care and makes recommendations regarding visits with their practitioner to discuss their diabetes management.

Adherence to Treatment Plans (A treatment plan is the outline for all activities/ interventions in the program. Patient adherence to the treatment plans outlines how we track member self-management including the member's adherence to self-monitoring activities; adherence to medications, if appropriate; making needed visits; etc.)

Monitoring patient adherence to the Diabetes Disease Management Program's treatment plans includes a variety of activities. On an annual basis, the Comprehensive Diabetes Care HEDIS measure is analyzed to determine members who were not in compliance with any one or more of the HEDIS measure's indicators and are pulled into a report. These reports are sent to the member's identified practitioner to notify them of their noncompliance with one or more of the HEDIS indicators. These high risk diabetics are monitored through the Care Management nurse's telephonic interventions to discuss compliance with recommended treatment guidelines including medication compliance, keeping appointments, compliance with self-monitoring activities including checking their blood sugar levels and compliance with appropriate lab test recommendations.

Medical and Behavioral Comorbidities

High risk level enrolled members are screened for coexisting medical and behavioral conditions, including heart disease, hypertension, elevated cholesterol, kidney disease, etc., through the Care Management nurse contacts. The Care Management nurse then directs educational and telephonic interventions towards these coexisting conditions.

Health Behaviors *(e.g., goal-setting techniques, problem solving. Program content is consistent with clinical practice guidelines.)*
Targeted mailings and telephonic interventions, to the member regarding diabetes, address various lifestyle issues including diet, exercise, smoking cessation, medication compliance and other clinical practice guideline compliance including lab tests, foot care and office visits. These interventions comply with the American Diabetes Association clinical practice guidelines to ensure appropriate quality of care.

Psychosocial Issues

The Care Management nurse identifies potential psychosocial issues that could be significant in the management of Diabetes and any other conditions. Interventions are adjusted to address any issues identified as well as educating the member about their condition beyond just have general knowledge about their condition and adherence to a treatment plan. The following are psychosocial issues which can play a part in adherence:

- Beliefs and concerns about the condition and treatment

- Perceived barriers to meeting treatment requirements
- Access, transportation and financial barriers to obtaining treatment
- Cultural, religious and ethnic beliefs

Depression Screening

Depression screening results from the health risk assessment are reviewed by the Care Management nurse. Members who screen positive for depression are provided with educational resources and are referred to a primary care practitioner for further evaluation and treatment.

Providing Information to the Caregiver

If the member grants permission, information about their condition and treatment plan will be given to the caregiver. This information can be helpful for the caregiver to provide the appropriate support and care to the member. This information should include the type and methods of support a caregiver can provide.

Supporting Communication between Patient and Practitioner

An important aspect of care is the ongoing communication of the member's condition and adherence to treatment. Program materials provided to members address the importance of the communication with healthcare practitioners and provide helpful methods of ways to communicate with them.

Informing and Educating Practitioners about the Program

Sanford Health Plan practitioners are informed and educated on the Diabetes Disease Management Program. Information is published annually in provider newsletters and is included in the Provider Manual and on the Health Plan website at www.sanfordhealthplan.com.

The program information provided to practitioners includes instructions on how they or their Sanford Health Plan patients may access the disease management services offered by the program. Practitioners are also provided information on how the Plan works with their Sanford Health Plan patients in the program to monitor their self-management activities, diet and weight management, compliance with medication, compliance with clinical practice guideline recommended visits and tests and relevant test results.

Practitioners are instructed to contact the Sanford Health Plan Quality department at 1-888-315-0884 or 328-6868 for any questions concerning the Diabetes Disease Management Program. Questions about medical benefits or other issues should be directed to Member Services at 1-800-752-5863 or 328-6800.

Satisfaction with Disease Management

A program satisfaction survey is conducted annually to assist in determining additional resources needed and adjustments that may need to be made to the operations of the program. Disease management program inquiries and complaints are also reviewed and

analyzed quarterly in the Sanford Health Plan Quality Committee. The purpose of the review is to identify patters of inquires and complaints as well as improving satisfaction with the DM program

Measuring Effectiveness *(Audited HEDIS results that are specifically relevant to the condition addressed are considered appropriate measures.)*

Performance measures are tracked for the Diabetes Disease Management Program to measure the effectiveness of the program. For this specific program, the Comprehensive Diabetes Care HEDIS measures are used as indicators of the program's performance to ensure a valid methodology and reliable data. These measures include the identified eligible population according to HEDIS specifications. These quantitative measures are analyzed in comparison to national NCQA Quality Compass averages as benchmark rates and the Plan's past performance.

The participation rates, performance rates measured, analysis completed and interventions implemented are tracked in an NCQA Quality Improvement Activity Form to assist the Plan's Quality Improvement staff in ensuring that all necessary steps are completed.

Hypertension Disease Management Program
Eligible members for the Hypertension Disease Management Program are identified through:

- ✓ Claims :
  - o two or more claims with a primary or secondary diagnosis of Hypertension (ICD-9 CM Codes 401.XX).
- ✓ Health Risk Assessment/health Screening results
- ✓ Other information: collected from case management or utilization management
- ✓ Practitioner or self referral

Eligible members for the Hypertension Disease Management Program are at least 18 years of age and meet the above criteria. This determination of eligible members occurs at least monthly.

Providing Eligible Members with Written Program Information

Eligible members are sent a program information packet which includes a health risk assessment. Members may choose to not participate in the program by completing and returning the Non Participant Form which is included in the program information packet. Members who choose this option will be removed from the program mailing list and will not be considered enrolled in the Hypertension Disease Management Program. Members who do not return the Non Participant form are automatically considered enrolled in the program after a period of 30 days.

The initial program information packet includes an outline of how to use the program's services, a health risk assessment, the types of interventions that are involved, how to contact the Plan regarding any questions related to the program or its services as well as details on quarterly mailings which include a wide range of educational materials on topics such as: detection and diagnosis, risk factors, monitoring blood pressure, nutrition and weight control, tobacco cessation, physical activity, stress management, medications and treatments and more.

Program Participation and Participation Rates

This program consists of an involuntary participation or an opt out process. Members may choose to not participate in the program by completing and returning the Non Participant Form. If the member chooses not to participate in the program, they must complete non participant form and return it to Sanford Health Plan in the provided postage paid envelope. Eligible members who do not return this form are automatically considered enrolled in the program after a period of 30 days. Members are considered actively enrolled when they complete and return the health risk assessment included with the initial information packet.

An Access database is maintained of eligible members who remain enrolled in the Hypertension Disease Management Program. The program's active participant rates are calculated on an annual basis and reported in the Annual Quality Improvement Program Evaluation. This participation rate is calculated as the number of eligible members who remain enrolled in the program divided by the total number of eligible members identified in the first step of the eligible population identification, regardless of stratification level.

Population Stratification *(Stratification classifies eligible members according to severity or other clinical criteria based on available clinical data. This is a dynamic process, and a level can change as a member's condition changes.)*

The eligible member population that remains enrolled in the Hypertension Disease Management Program is stratified based on risk factors identified via the HRA, through noncompliance with the HEDIS measures or by an inpatient stay for hypertension. Enrolled members are stratified as high or moderate/low risk by the Quality RN based on an HRA scoring tool or other claims related information. The stratification process is completed at least annually to determine if there are any members whose stratification status should change for the next year's round of program mailings. The stratification level identification for each member is added to the Access database of enrolled eligible members to allow for separate lists to be pulled for the purposes of interventions based on specific stratification levels.

Interventions Based on Stratification *(Interventions must be implemented based on each stratification level, although we are not required to intervene at every level.)*

Interventions are implemented based on the member's identified stratification level. Those members in the moderate/low risk category are mailed general education on a quarterly basis. This information includes topics such as detection and diagnosis, risk factors, monitoring blood pressure, nutrition and weight control, tobacco cessation, physical activity, stress management, medications and treatments and more.

High risk members receive all of the above interventions in addition to calls from a Quality Resource Registered Nurse every 3 months or more frequently as needed. (example: case of inpatient hospitalization or other chronic comorbid conditions.) Members who were not in compliance with the HEDIS measure's indicator are pulled into a report, which is sent to the member's identified practitioner to notify them of their noncompliance. High risk members receive a phone call from the Quality RN.

Enrolled members may reach a Registered Nurse toll-free at 1-800-805-7938 or (605) 328-6807 for any questions concerning the Disease Management Program, medical benefits or other issues of concern.

All interventions implemented are tracked by date and type in an Access database to allow for easy reporting. Details of specific telephonic interventions are documented in the nurses' notes screens of the Plan's computer system.

Condition Monitoring (Mechanisms that allow the patient or practitioner to assess how well a condition is being managed.)

Members and Providers are provided with information regarding the Seventh report of the Joint National Committee on Prevention, Detection, Evaluation and Treatment of High Blood Pressure to be followed for hypertension management. This guideline is to assist them in assessing how well they (Members and Providers) are managing their care.

The Quality Resource RN assists high risk members in monitoring their condition to assess how well they are managing their care and makes recommendations regarding visits with their practitioner to discuss their Hypertension management.

Patient Adherence to Treatment Plans (A treatment plan is the outline for all activities/ interventions in the program. Patient adherence to the treatment plans outlines how we track member self-management including the member's adherence to self-monitoring activities; adherence to medications, if appropriate; making needed visits; etc.) Monitoring patient adherence to the Hypertension Disease Management Program's treatment plans includes a variety of activities. High risk members are monitored through RN telephonic interventions to determine compliance with recommended treatment guidelines including medication compliance, keeping appointments, compliance with self-monitoring activities and compliance with other appropriate recommendations. Adherence to treatment plans may also be monitored by the RN through analysis of a member's Health Risk Assessment responses.

Consideration of Other Health Conditions

High risk level enrolled members are screened for coexisting medical and behavioral conditions through the Quality Resource RN contacts. The Quality Resource RN then directs educational and telephonic interventions towards these coexisting conditions. In addition, members are provided information regarding smoking cessation. This information is designed to bring about awareness of the state smoking cessation programs.

Lifestyle Issues as Indicated by Practice Guidelines (e.g., goal-setting techniques, problem solving. Program content must be consistent with clinical practice guidelines) Targeted mailings and telephonic interventions to the member regarding Hypertension address various issues including medication compliance, stress management, hypertension warning signs and complications, exercise, weight management, nutrition and more. These interventions comply with the Joint National Committee on Prevention, Detection, Evaluation and Treatment of High Blood Pressure.

Informing and Educating Providers about the Program
Sanford Health Plan practitioners are informed and educated on the Hypertension Disease Management Program. Information is published annually in provider newsletters and is included in the Provider Manual and on the Health Plan website at www.sanfordhealthplan.com.

The program information provided to practitioners includes instructions on how they or their Sanford Health Plan patients may access the disease management services offered by the program. Practitioners are also provided information on how the Plan works with their Sanford Health Plan patients in the program to monitor their self-management activities, diet and weight management, compliance with medication, compliance with clinical practice guideline recommended visits and tests and relevant test results.

Practitioners are instructed to contact the Sanford Health Plan Quality department at 1-888-315-0884 or 328-6868 for any questions concerning the Hypertension Disease Management Program. Questions about medical benefits or other issues should be directed to Member Services at 1-800-752-5863 or 328-6800.

Measuring Effectiveness (Audited HEDIS results that are specifically relevant to the condition addressed are considered appropriate measures. NCQA recognizes that the population may not exactly match the population of the program, but it is an acceptable substitute.)

Performance measures are tracked for the Hypertension Disease Management Program to measure the effectiveness of the program. For this specific program, the percentage of Members with Confirmed Hypertension who had Controlled Blood Pressure HEDIS measure is used as an indicator of the program's performance to ensure a valid methodology and reliable data. This measure includes the identified eligible population according to HEDIS specifications. The quantitative measure is analyzed in comparison to national NCQA Quality Compass Averages as a benchmark rate and to the Plan's past performance rates.

The active participation rates, performance rates measured, analysis completed and interventions implemented are tracked in an NCQA Quality Improvement Activity Form to assist the Plan's Quality Improvement staff in ensuring that all necessary steps are completed.

Congestive Heart Failure

Eligible members for the CHF Disease Management Program are identified through:

- Claims: two or more claims (any type of service) with a primary or a secondary diagnosis of CHF (ICD-9 CM diagnosis codes 428.xx) and a claim indicating that an ejection fraction has been evaluated.
- Health Risk Assessment/Health Screening results
- Other information: collected from Care Management or Utilization Management
- Practitioner or self referral

Members of all ages who meet these criteria are eligible for the program. This determination of eligible members occurs on a monthly basis.

Providing Eligible Members with Written Program Information

Eligible members are sent a program information packet which includes a health risk assessment. Members may choose to not participate in the program by completing and returning the Non Participant Form which is included in the program information packet. Members who choose this option will be removed from the program mailing list and will not be considered enrolled in the CHF Disease Management Program. Members who do not return the Non Participant form are automatically considered enrolled in the program.

The initial program information packet includes an outline of how to use the program's services which includes a health risk assessment, the types of interventions that are involved, how to contact the Plan regarding any questions related to the program or its services (see below for details) as well as details on quarterly mailings which that include a wide range of educational materials.

Program Participation and Participation Rates

This program consists of an involuntary participation, or an opt-out process. Eligible members receive the initial program mailing accompanied by a Non Participant Form. If the member chooses not to participate in the program, they must complete the form and return it to Sanford Health Plan in the provided postage paid envelope. Eligible members who do not return this form are automatically considered enrolled in the program. Members are considered actively enrolled when they have at least one interactive contact in which the member receives self management support or health education. Interactive contact is a two-way interaction in which the member receives self management support or health education by one of the following modes:

- Mail – interactive communication that provides self management support or health education that was requested by the member; communication in the form of a member survey, quiz or assessment of member knowledge gained from reading the communication.
- Phone – in person contact (individual or group)
- Online contact – interactive web based module, secure email.

Note: health education or self management support given during the course of a health risk appraisal or health assessment is considered an interactive contact.

Interactive contact does **not** include:

- completion of health risk appraisal
- contacts made only to make an appointment, leave a message or acknowledge receipt of materials.

An Access database is maintained of eligible members who remain enrolled in the CHF Disease Management Program. The program's active participation rates are calculated on an annual basis and reported in the Annual Quality Improvement Program Evaluation. This participation rate is calculated as the number of eligible members divided by the total number of eligible members with at least one interactive contact.

Population Stratification *(Stratification classifies eligible members according to severity or other clinical criteria based on available clinical data. This is a dynamic process, and a level can change as a member's condition changes.)*

The eligible member population that remains enrolled in the CHF Disease Management Program is stratified based on results from a health risk assessment, and pharmaceutical claims data to identify members who utilize an ACE Inhibitor/ARB/beta blocker (low risk) and those members that do not (high risk). Another high risk identifier is inpatient hospitalization for CHF. The stratification process is completed at least annually for currently enrolled members to determine if there are any members whose stratification status should change. The stratification level identification for each member is documented in bWell TX to allow for separate lists to be pulled for the purposes of interventions based on specific stratification levels.

Interventions Based on Assessment *(Interventions must be implemented based on each stratification level.)*

Interventions are implemented based on the enrolled member's identified stratification level. Those members in the low risk category are mailed general educational materials on a quarterly basis. These quarterly mailings include information on: medications, nutrition, following a treatment plan, exercise and activity, managing other chronic conditions, lifestyle issues advance care planning and depression. Some educational materials are available in other languages and can be requested by the member.

High risk members receive all of the above interventions in addition to phone calls from a Care Management nurse on an annual basis or more frequently as needed (example: case of an inpatient hospitalization). The Care Management nurse discusses medication compliance and the importance of ACE Inhibitor utilization along with other recommended practice guidelines for the management of CHF. If applicable, the nurse will also send a notification letter to the member's practitioner to notify them that the member is not utilizing an ACE Inhibitor/ARB/beta blocker so that they may review the member's status and determine if an ACEI/ARB/beta blocker is warranted in their particular situation.

Members in all stratification levels may reach a nurse toll-free at 1-888-315-0884 or 328-6868 for any questions concerning the CHF Disease Management Program. For other issues of concern or medical benefits questions, contact Member Services at 1-800-752-5863 or 328-6800.

All interventions implemented are tracked by date and type in bWell to allow for reporting. In addition, comments regarding contact with members are also documented bWell.

Condition Monitoring *(Mechanisms that allow the patient or practitioner to assess how well a condition is being managed.)*

The national guidelines state that proper medical treatment for patients with heart failure due to left ventricular systolic dysfunction is the prescription of an angiotensin-enzyme inhibitor (ACEI)/ARB/beta blocker. This practice recommendation has been defined in guidelines issued by Heart Failure Society of America: Journal of Cardiac Failure.

Sanford Health Plan recommends the utilization of these guidelines to assist in the management and monitoring of CHF patients.

The Care Management nurse assists high risk level members in monitoring their condition to assess how well they are managing their care and makes recommendations regarding visits with their practitioner to discuss their CHF management, especially ACE Inhibitor/ARB/beta blocker utilization.

Adherence to Treatment Plans (A treatment plan is the outline for all activities/ interventions in the program. Patient adherence to the treatment plans outlines how we track member self-management including the member's adherence to self-monitoring activities; adherence to medications, if appropriate; making needed visits; etc.)

Monitoring patient adherence to the CHF Disease Management Program's treatment plans includes a variety of activities. High risk members with heart failure are monitored through the Care Management nurse's telephonic interventions to determine compliance with recommended treatment guidelines including medication compliance, keeping appointments, compliance with self-monitoring activities and compliance with appropriate lab test recommendations.

Medical and Behavioral Comorbidities

High risk level enrolled members are also screened for any other coexisting medical and behavioral conditions, including diabetes, heart disease, COPD, asthma, cardiac procedures, etc., through the Care Management nurse contacts and any information provided on a health risk assessment or health screening. The Care Management nurse then directs educational and telephonic interventions towards these coexisting conditions.

In addition to this, one of the program's quarterly mailings will be devoted to information on coexisting conditions.

Health Behaviors *(e.g., goal-setting techniques, problem solving. Program content must be consistent with clinical practice guidelines.)*
Targeted mailings and telephonic interventions, to the member regarding CHF, address various lifestyle issues including diet/weight management, smoking cessation, medication compliance and other clinical practice guideline compliance including lab

tests and office visits. These interventions comply with standard clinical practice guidelines (stated above) to ensure appropriate quality of care.

Psychosocial Issues

The Care Management nurse Identifies potential psychosocial issues that could be significant in the management of CHF and any other conditions. Interventions are adjusted to address any issues identified as well as educating the member about their condition beyond just having general knowledge about their condition and adherence to a treatment plan. The following are psychosocial issues which can play a part in adherence:

- Beliefs and concerns about the condition and treatment
- Perceived barriers to meeting treatment requirements
- Access, transportation and financial barriers to obtaining treatment
- Cultural, religious and ethnic beliefs

Depression Screening

Depression screening results from the health risk assessment are reviewed by the Care Management nurse. Members who screen positive for depression are provided with educational resources and are referred to a primary care practitioner for further evaluation and treatment.

Providing Information to the Caregiver

If the member grants permission, information about their condition and treatment plan will be given to the caregiver. This information can be helpful for the caregiver to provide the appropriate support and care to the member. This information should include the type and methods of support a caregiver can provide.

Supporting Communication between Patient and Practitioner

An important aspect of care is the ongoing communication of the member's condition and adherence to treatment. Program materials provided to members address the importance of the communication with healthcare practitioners and provide helpful methods of ways to communicate with them.

Informing and Educating Practitioners about the Program

Sanford Health Plan practitioners are informed and educated on the CHF Disease Management Program. Information is published annually in the provider newsletter and is included in the Provider Manual and on the Health Plan website at www.sanfordhealthplan.com.

The program information provided to practitioners includes instructions on how they or their Sanford Health Plan patients may access the disease management services offered by the program. Practitioners are provided information on how the Plan works with their Sanford Health Plan patients in the program to monitor their self-management activities, diet and weight management, compliance with medication, compliance with clinical practice guideline recommended visits and tests and relevant test results.

Practitioners are instructed to contact the Sanford Health Plan Quality department at 1-888-315-0884 or 328-6868 for any questions concerning the CHF Disease Management Program. Questions about medical benefits or other issues should be directed to Member Services at 1-800-752-5863 or 328-6800.

Satisfaction with Disease Management

A program satisfaction survey is conducted annually to assist in determining additional resources needed and adjustments that may need to be made to the operations of the program. Disease management program inquiries and complaints are also reviewed and analyzed quarterly in the Sanford Health Plan Quality Committee. The purpose of the review is to identify patters of inquires and complaints as well as improving satisfaction with the DM program

Measuring Effectiveness *(Audited HEDIS results that are specifically relevant to the condition addressed are considered appropriate measures. NCQA recognizes that the population may not exactly match the population of the program, but it is an acceptable substitute.)*

Performance measures are tracked annually for the CHF Disease Management Program to measure the effectiveness of the program. For this specific program, the ACE Inhibitor/ARB/beta blocker utilization rate is measured for the eligible enrolled population. The inpatient hospitalization rate is also measured for this population. These quantitative measures are analyzed in comparison to the Plan's past performance and national benchmarks, when available.

The active participation rates, performance rates measured, analysis completed and interventions implemented are tracked in an NCQA Quality Improvement Activity Form to assist the Plan's Quality Improvement staff in ensuring that all necessary steps are completed.

Additionally, Sanford Health Plan has also implemented several quality improvement activities.

Asthma

- An Asthma Tool Kit that includes information on triggers, formal asthma education, proper medication use, action plans, smoking cessation, online resources and more.
- A FREE peak flow meter and a spacer to help manage their asthma.
- Phone calls from caring nurses in the event of medication-compliance issues. The nurses may also notify the member's healthcare practitioner.

Attention Deficit/Hyperactivity Disorder (ADHD)

- A one-time mailing that includes fact sheets, age-specific and up-to-date information on ADHD symptoms and treatments.
- Guidelines regarding recommended follow-up care.
- Tools to track progress of ADHD treatments.

Headaches
Members diagnosed with chronic headaches can find on our website a variety of resources including tools to help identify triggers, symptom trackers, action plans, and more.

Mental Health
Targeted follow-up can make a positive difference for members who struggle with mental health problems. Sanford Health Plan provides:

- Follow-up education immediately after discharge from a mental health facility and a reminder by letter and by phone to keep follow-up appointments.
- Education on antidepressant medications for members with a new prescription.
- Notification to practitioners when their patients who recently started taking antidepressant therapy have stopped filling their prescriptions.

Healthy Pregnancy Program
The Healthy Pregnancy Program helps identify concerns early so that members and their healthcare practitioner can take steps to ensure a healthy pregnancy.

- A health risk assessment to identify any special needs and to customize your educational materials.
- Education materials on nutrition, lifestyle, prenatal testing, exercise, stress, fetal development, breast feeding, postpartum care, childhood immunizations and more.
- Nurse phone support as needed.

Adolescent Health
Sanford Health Plan opens the door to targeted, comprehensive care for our adolescent members, including:

- A reminder to parents to schedule an annual well care visit for their adolescent. A well care visit covers much more than an athletic physical. It addresses a wide range of topics that can best address the health of your adolescent.
- Members turning 11 and 12 receive birthday cards with immunization reminders.
- Useful information on almost any teen topic on our KidsHealth link on our website at www.sanfordhealthplan.org

44. Are you willing to customize your care management/DM programs and services for NDPERS? If so, please explain and provide an example.

Yes, Sanford Health Plan is willing to customize care management programs to specifically meet the NDPERS population management needs.

45. Describe the programs offered to patients with rare and chronic diseases. Is this program outsourced? Who is the current vendor?

As described above, Sanford Health Plan provides in-house complex case management services which often includes patients with comorbid conditions and/or rare and chronic diseases.

SANFORD HEALTH PLAN

46. Describe in detail your ability to provide on-line wellness programs. Compare it to the existing program presently in the NDPERS program (see our website). Specifically identify any deviations from the existing program.

Our Team

Sanford Health Plan's Worksite Wellness team has the depth and breadth of resources to help your organization achieve its wellness goals. Currently, our Business and Wellness Development Coordinator leads a team of Wellness Educators with education in nutrition & public health, exercise science & strength training, holistic wellness & Yoga, tobacco cessation and behavior change. Half of the wellness team holds a graduate degree in their area of specialty. All have all been trained as certified health and wellness coaches through Wellcoaches® and as tobacco cessation educators through the Minnesota American Lung Association.

Our Life Advocates and Licensed Social Workers, complements the team by providing resource referrals for psychosocial issues such as emotional, financial, interpersonal and personal needs. Our screening education team, Partners in Prevention, coordinates appropriate health screens with local provider partners with the goal of prevention in mind.

Our Approach

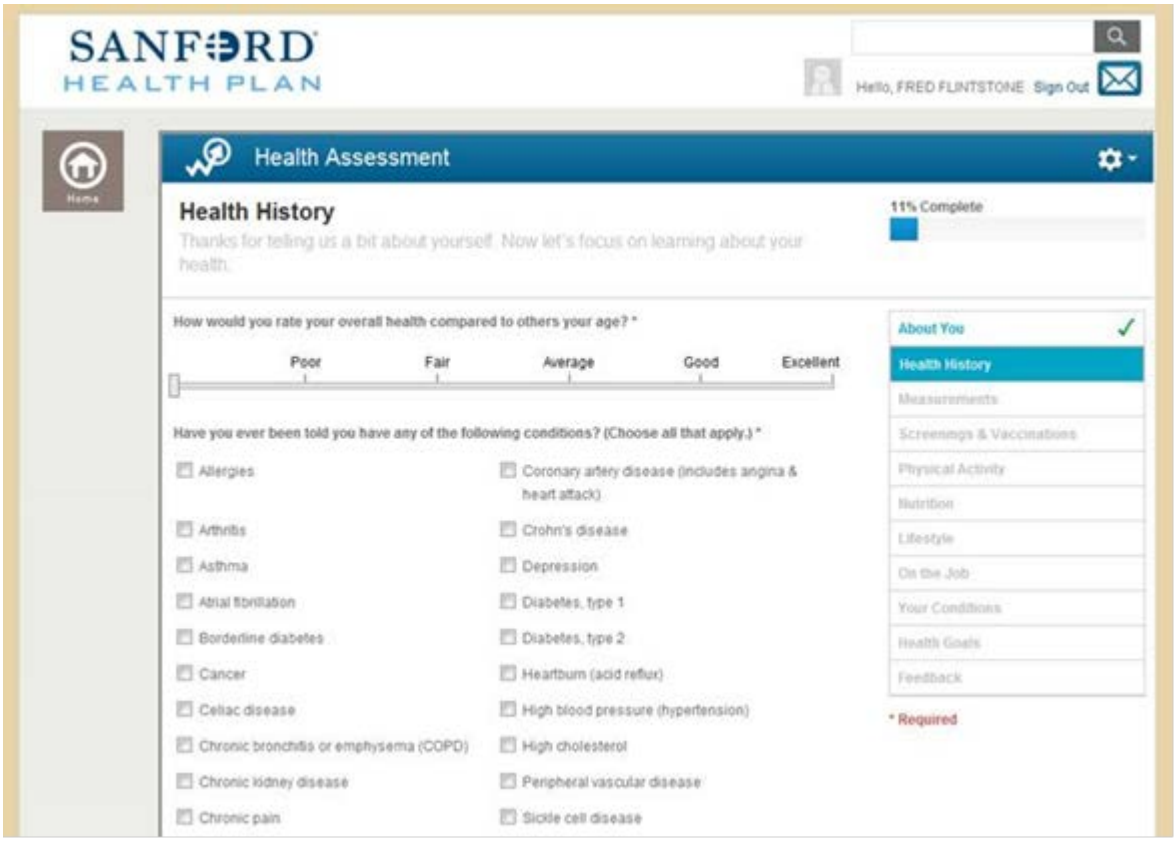
While the NDPERS employees would have a designated team member assigned to deliver wellness programming, all members of the team would be available to support the wellness initiatives of NDPERS. Our Worksite Wellness team works collaboratively based on the needs and interests of the group to deliver risk-based programs geared to decrease the health risks of the population, improve health literacy and impact behaviors that promote healthy lifestyles.

We work from a consultative model because we know one size does not fit all when it comes to worksite wellness programs. Our team works closely with employer wellness coordinators and wellness teams/committees to understand the culture and the best ways to message, implement and evaluate wellness programming. We have expertise in helping our clients start wellness teams and once they are started, we continue to play an active role. With larger clients with locations in multiple states, we host a regularly scheduled call/Webinar with representatives from their various wellness teams to share best practices, provide an opportunity to exchanges ideas and to make sure the company's wellness vision is being implemented in all locations. We would also provide special continuing education calls/Webinars for wellness coordinators to help them develop strategies to increase participation and engagement at the local level.

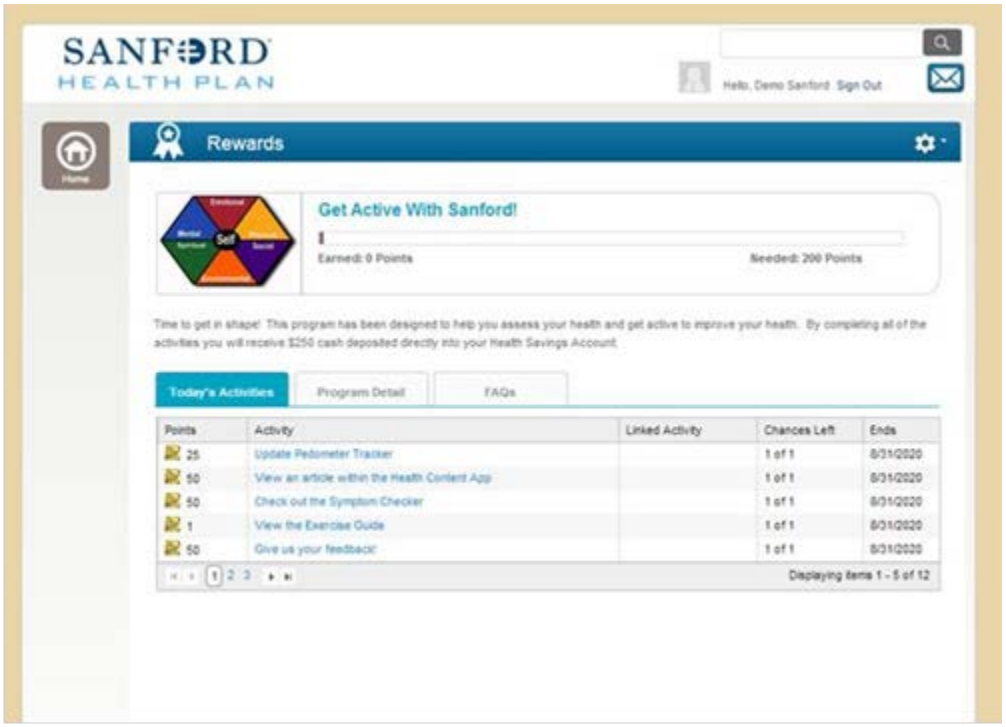
Our Online Resources

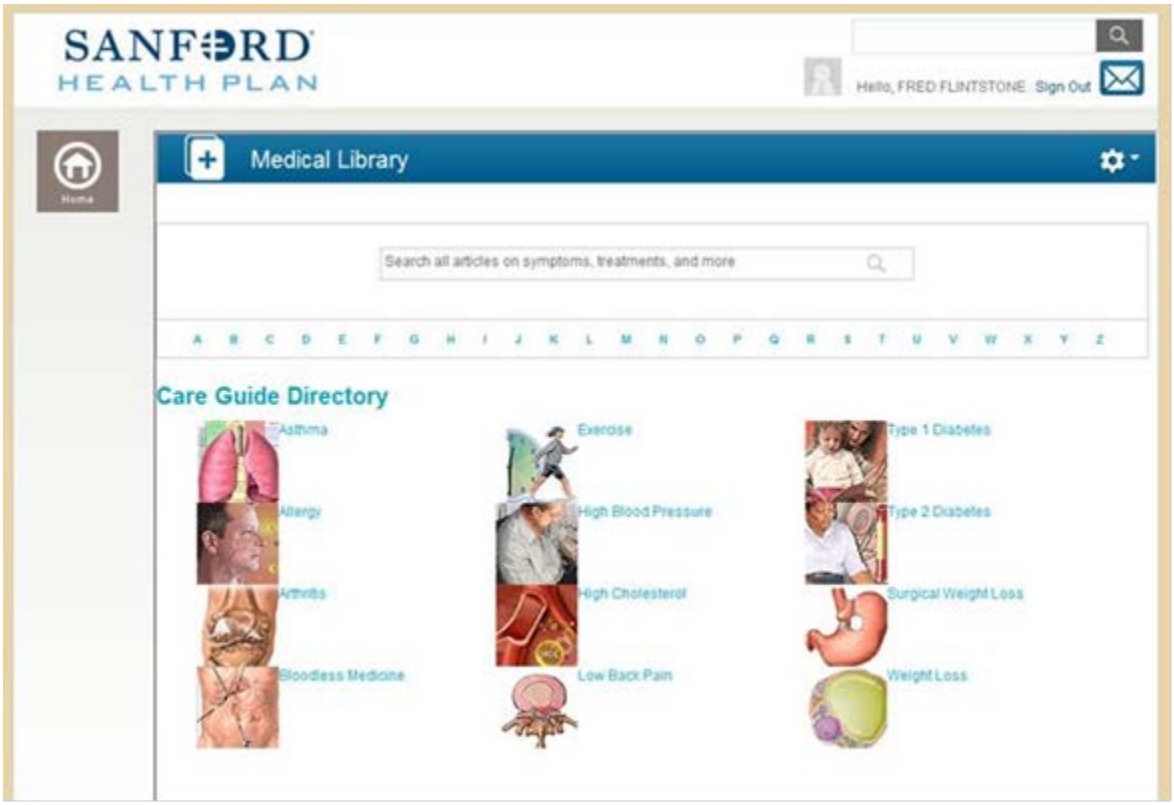
Our online health management tool, bWell, complements the expertise of our Worksite Wellness team. bWell is an interactive, web-based health management system. Using the personalized health tools and information on bWell can help individuals improve their health and make more informed healthcare decisions. The Health Assessment calculates health age, determines risk levels for serious conditions and provides feedback regarding how health habits can be improved. A medical library, medicine cabinet, and trackers for health behaviors are additional resources available in our bWell portal. Below are a few screen shots of these resources:

SANFORD HEALTH PLAN

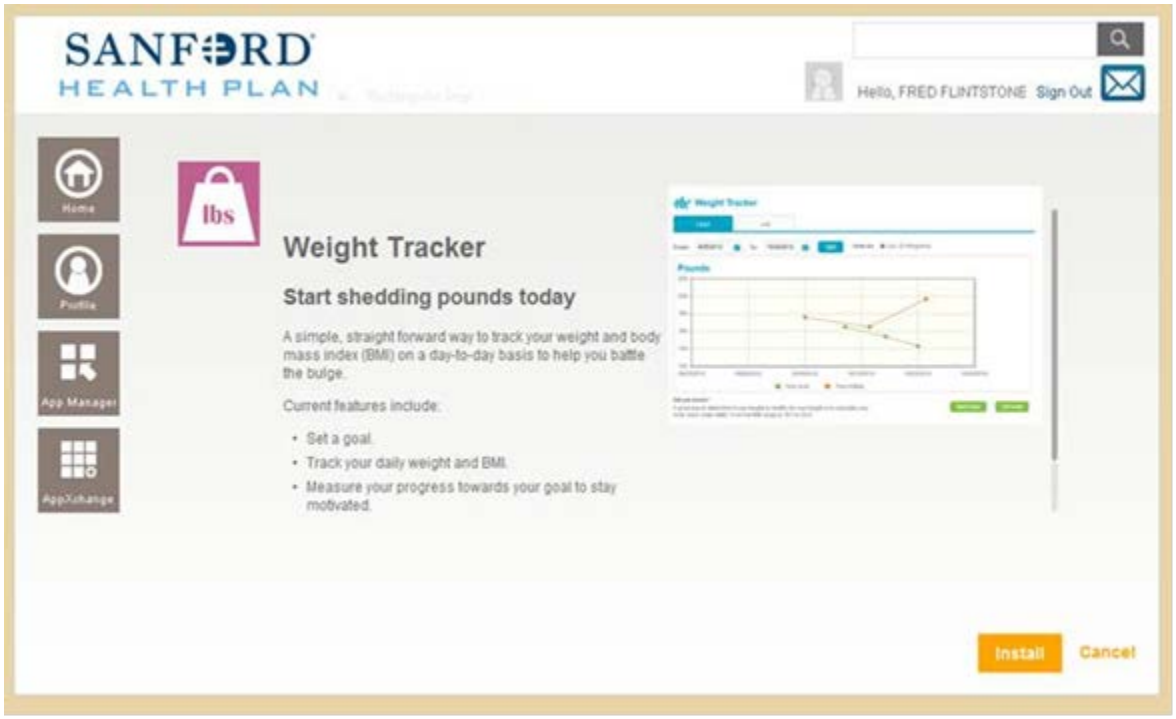


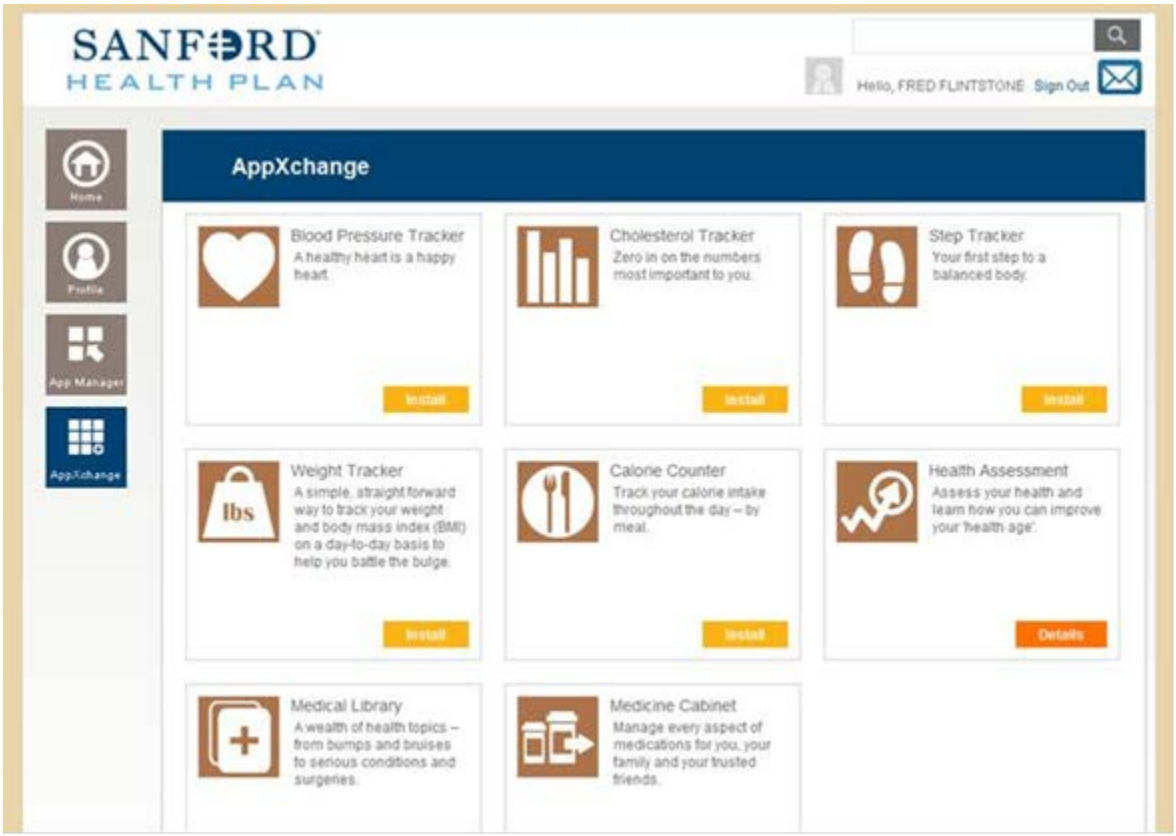
SANFORD HEALTH PLAN

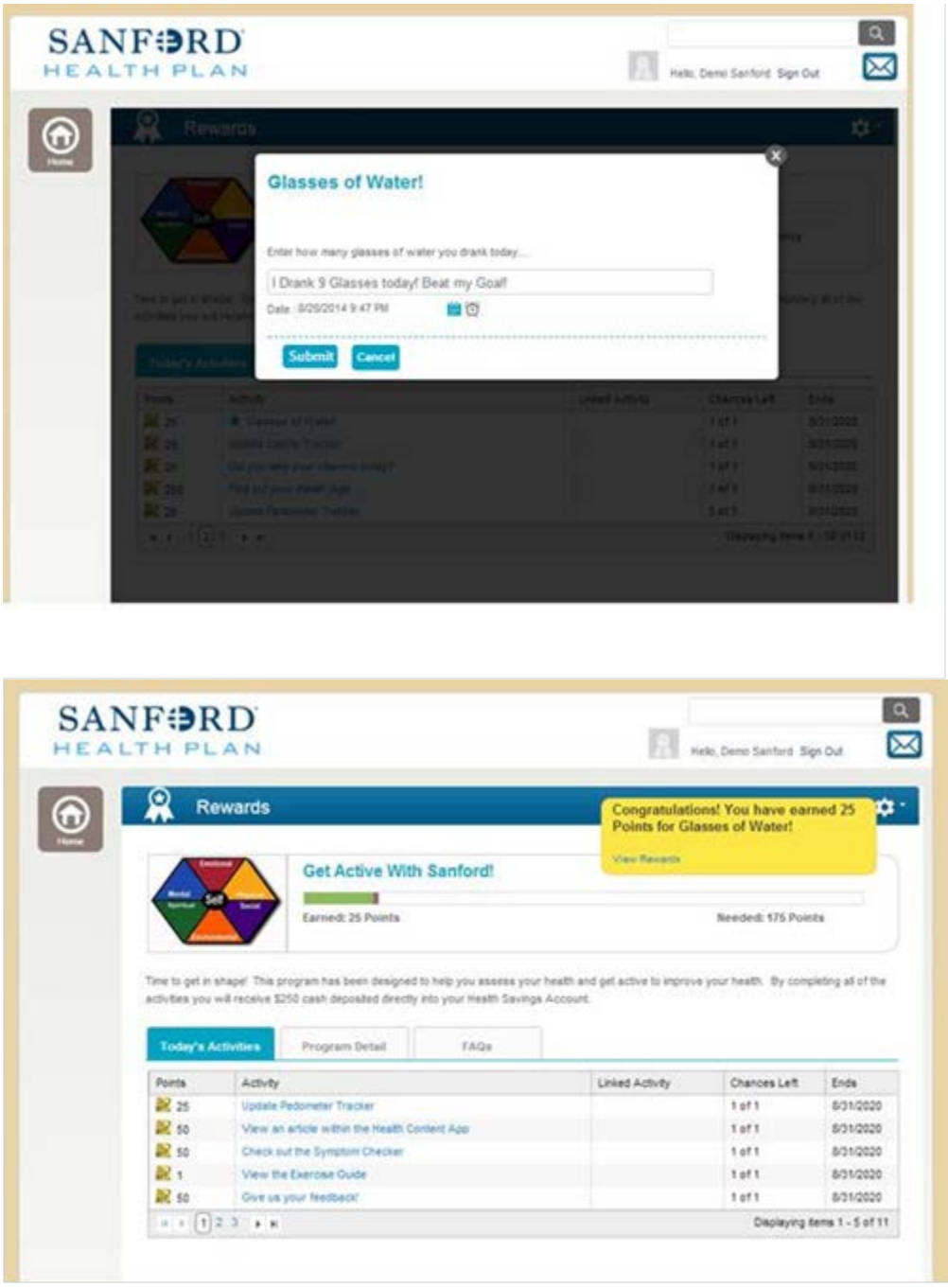




SANFORD HEALTH PLAN







These resources work in concert to empower participants to take charge of their health. Individuals who complete a Health Assessment are invited to participate in telephonic or email wellness coaching if they desire help in achieving their wellness vision.

Our Commitment to Outcomes

We know our clients want results so we work hard to get the best engagement possible. Messaging and marketing are at the heart of any successful health promotion program. The power of a fully articulated health promotion messaging strategy coupled with a committed

wellness team/committee can make a huge difference in participation. Although the Health Plan does provide some incentives for participation, e.g. pedometers, water bottles, resistance bands, cinch bags, etc. we have found the best way to increase participation is to help our clients build a culture of wellness and to continually communicate this message. The greater the participation and engagement in wellness programming, the better the population sample, which empowers you to see the impacts of your wellness program on your population's health. Sanford Health Plan provides aggregate group reporting whether it's for an annual Health Risk Assessment campaign, a physical activity or nutrition wellness challenge, or participation in our wellness Webinars. We partner with our clients to help them achieve and surpass their participation goals and then provide the resources to help participants improve and sustain their health outcomes.

bWell Online Health Management Tool

- Health Assessment
  - Learn risks for chronic conditions
  - Receive feedback on lifestyle choices
  - Discover "Health Age" compared to real age
- Medical Library
- Pharmacy
  Health Trackers
- Aggregate Reports

Preventive Health Screens
- Annual biometric screen (height, weight, blood pressure, glucose, cholesterol panel)
- Opportunities for other onsite health screens based on demographics and risk

Partnership with Employee Wellness Team/Committee
- Act as consultant
- Facilitate bWell Health Assessment biometric screen promotion & data collection
- Assist with development of worksite wellness plan, goal-setting and measurement
- Provide resources to support goals

Employer Wellness Incentive Program Administration
- Assist with wellness incentive program development
- Promote wellness incentive program to employees
- Provide incentive payout reporting quarterly or annually

Wellness Group Activity
- Online Wellness Challenges
- Physical Activity
- Nutrition
- Stress Management
- Tailored based on need

GoToMeeting/Webinars on Health & Wellness Topics, some examples include:

- Promoting bWell
- Reading Nutrition Labels
- Portion Sizes
- Dietary Guidelines
- Stretching Techniques
- Stress Management
- Behavior Change
- Tobacco Cessation Education

Wellness Coaching Program Development

- 1-1 telephonic/email wellness coaching based on individual readiness
- Focus on intrinsic motivation and behavior change

Health Notions

- Monthly newsletter

47. Describe Wellness incentives you offer. Compare and contrast that with the existing incentives.

Sanford Health Plan is committed to design a wellness program that fits the needs of NDPERS. Our wellness programs are not a one-size fits all and we currently customize programs that fit our clients' culture, demographics and strategic objectives. Additionally, Sanford Health Plan will work with the State to replicate and wellness incentives that meets the state's overall health and wellness goals.

48. Describe your ability to support PERS Wellness initiatives by providing the administrative services for:

a. Tobacco Cessation program
b. PERS Diabetes Program
c. Dedicated Wellness Program Staff
d. Prenatal Program

As described above, Sanford Health Plan is capable of supporting Tobacco Cessation Programs, Diabetes programs and Healthy Pregnancy program through its dedicated wellness program staff.

49. Describe your ability to support the employer based wellness program and the wellness benefit funding program (see our website).

Sanford Health Plan commits to administer an employer based wellness program configured to reward participating employers to receive a 1% health insurance premium discount for promoting wellness initiatives for their employees at their worksite.

This program would be administered through our existing WordDoc *Health eRewards* online tool as described in #46 above. While the look and feel of the program may be

different, the functionality will closely mimic the existing program where employers that participate in the NDPERS Group Health Insurance Plan have the opportunity to enroll in the employer based wellness program on an annual basis. Sanford Health Plan will appoint a Wellness Coordinator to perform the following services:

- Coordinate and attend the Employer Wellness Workshops;
- Distribute communication materials to employer's employees on a monthly basis and promote the PERS Tobacco Cessation Programs;
- Implement the Wellness Program during plan year; and
- Report at plan year-end the results of wellness activities

Network Accessibility and Disruption

50. We are requesting that vendors provide a GeoAccess network accessibility and disruption analysis outlining network access based on the access standards listed below separately by North Dakota County. If you are proposing a combination of owned and leased networks, please provide your results separately by network. This GeoAccess analysis must be provided for your proposed NDPERS network. A census file has been provided in Appendix E for your use.

Provider Type	Access
Primary Care Providers (family/general practice, pediatrics, internal medicine and OB/GYN)	2 providers within 30 miles
Specialists	2 providers within 30 miles
Hospitals	1 hospital within 50 miles

Please provide the GeoAccess summaries in the table below as well as back-up detail (back-up detail on CD submission only) for employees who fall both within and outside the following access standards. Your match should include all valid zip codes in each of the counties in North Dakota that your network serves and in which participants reside. In addition, you should include only open practices in your analysis.

Percent of NDPERS Employees Meeting the Access						
Provider Type	**Family/ General Practice**	**Pediatrics**	**Internal Medicine**	**OB/GYN**	**Specialists**	**Hospital**
North Dakota						
County 1						
County 2						
County 3						

Sanford Health Plan owns and maintains its own network in South Dakota, Minnesota, Iowa, North Dakota and Nebraska consisting of nearly 15,000 providers. Sanford Health Plan is proud that we have retained 99.9% of its contracted providers over the past few

years. The market experiences about a 5% turnover in available providers on an annual basis as providers either retire or move out of the area.
Please note that the proposed Sanford Health Plan network for NDPERS does not include the Essentia Health provider network.

Please refer to the following attachments:

- **Attachment H** – GeoAccess report illustrating NDPERS locations relative to Sanford Health Plan's local, proprietary commercial network which primarily consists of the four state region of South Dakota, Minnesota, Iowa and North Dakota.

- **Attachment I** – GeoAccess report illustrating NDPERS employee locations relative to Sanford Health Plan's national provider network, MultiPlan.

- **Attachment J** – GeoAccess report illustrating NDPERS employee locations relative to the Preferred One regional PPO network.

- **Attachment K** – Provider Access Standard by county report that illustrates the percent of NDPERS Employees that meet the access standard.

- **Attachment L –** Disruption Analysis report for professional and facility services. NOTE: THIS REPORT IS MARKED AS PROPREITY AND CONFIDENTIAL.

51. Provide a listing or provider directory and link to the web for the provider networks you are proposing for NDPERS.

Sanford Health Plan owns and maintains its own network in South Dakota, Minnesota, Iowa, North Dakota and Nebraska. There are nearly 15,000 Sanford Health Plan participating providers which may be found in our online directory at www.sanfordhealthplan.com. The online provider directory can produce a statewide directory or perform a search by provider name, location, or medical specialty. This website is updated weekly. Please refer to www.sanfordhealthplan.com

52. Identify and describe your national preferred provider organization.

For national coverage, Sanford Health Plan utilizes PHCS Healthy Directions and MultiPlan networks for members who live, work or travel outside of our service area and for students. Those providers can be located at www.multiplan.com.

The PHCS Network includes over 4,600 hospitals, 80,000 ancillary care facilities and 70,000 healthcare professionals. This ensures that members traveling, residing or outside of the network have access to the largest independent primary PPO in the nation. The PHCS Network has earned an endorsement for network quality from NCQA.

National average savings from PHCS Network are over 40% for practitioner and ancillary facility claims and over 90% of the practitioners in the PHCS Network are contracted under a fixed fee schedule arrangement, such as a DRG or Per Diem.

Current members can create a customized provider directory simply by logging into the website at www.sanfordhealthplan.com using their Member ID number and last name. This simple log-in will search the network(s) available to the individual based on their home address (i.e. Sanford Health Plan, PHCS Healthy Directions and MultiPlan, PreferredOne). For new hires or anyone else simply wanting to view the Sanford Health Plan network who does not have a Member ID, our website still displays the local Sanford Health Plan service area and national networks. This website is updated on a weekly basis and Sanford Health Plan conducts ongoing audits to ensure the validity of the information available to our members through the internet. However, Sanford Health Plan has worked with a variety of national wrap networks and is willing to accommodate networks arrangements that meet NDPERS' needs.

53. **Confirm your willingness to negotiate and maintain NDPERS-specific provider contracts to allow for cost control mechanisms and alignment of contract and plan years. Describe your process and approach for accomplishing this.**
Sanford Health Plan is committed to negotiate and maintain NDPERS-specific provider contracts and does not foresee any operational difficulty in completing this task prior to 7/1/15. We will assign regional Provider Relations Representatives to systematically meet with providers to amend existing provider contracts that align with the state's cost control needs.

54. **Do you anticipate any significant provider contract changes for 2015? Describe.**
Not at this time.

SANFORD HEALTH PLAN

Cost, Quality, and Pay for Performance

55. **Describe the programs and methodologies currently in place to gather and measure meaningful provider quality and efficiency data that can be shared with members.**
    Please refer to our HEDIS report in Attachment D for detailed information about our provider and quality measures.

56. **Describe in detail the performance standards you currently have in place with your contracted physicians, provider groups, hospitals, and other providers. Outline the types of measures utilized, how you monitor and track these measures, how providers are held accountable, and how frequently the data is compiled and shared with the physicians and provider groups.**
    Sanford Health Plan currently has the infrastructure in place to track and tie provider performance measures to a variety of reimbursement strategies. As described previously, Sanford Health Plan would welcome NDEPRS into a medical home model that meets the needs of state employees and NDPERS cost containment strategies. Performance standards using Sanford Health Plan's Patient and Population Management modules may include but are not limited to:

    - Patient risk stratification by medical condition and severity-of-illness.
    - Integration of patient "gaps-in-care" measures with the identified high-risk patients using unique, claims-based measures from nationally recognized organizations.
    - The ability to identify physicians involved in the treatment of the patient in the medical home model.
    - Identifying variables that contribute to the patient predictive risk score to effectively manage our patient population.
    - Ability to include lab values and other clinical results (e.g., blood pressure) that is extracted from the patient's electronic medical record.
    - The ability to focus on patients with "Repeat ER" and "Repeat Admissions" and determine the reasons behind these high-cost events.
    - Identifying the services most associated with physician inefficiency, by specialty type identified at either the overall or medical condition level for each specialty type.
    - Identifying common "markers" from national comparative datasets across regions, to provide the state with comparative rates for these "markers", at the 25th, 50th and 75th percentiles allowing the state to see not only where a physician's rates are as compared to their peer group, but also to compare their region's rates to national data.
    - Pinpoint the specific services (CPT-4 codes), medical conditions, and physician specialty types (including PCPs) to initially manage to maximize cost savings and effectiveness improvement.
    - Identifying and addressing providers that display inefficient patterns of care based on performance markers. The inefficient pattern can be concisely supported using a Provider Profile reports showing physicians how they compare to the peer group in their specialty that are driving their efficiency score.

57. Describe your participation in pay-for-performance initiatives. To what extent do these activities impact the health care costs of NDPERS or claims incurred by its covered population?

As described in Section 8 of this RFP, our goal would be to develop a medical home shared risk structure for the North Dakota marketplace that would be mutually agreed upon. We currently envision this arrangement to come in the form of a fully-capitated or Episode of Care model. We would also like to jointly develop targets across disease states or processes that are important to the North Dakota population and are willing to accept an incentive based payment structure structured around these targets.

Our goal would be to incorporate the NDPERS employees into a medical home model, titled "Sanford One Care" including all required infrastructure (reporting templates and contracting templates) in all of Sanford's applicable locations. For example, our combined relationships in North Dakota communities would allow our potential partnership to expand geographically and provide mutually beneficial results as we define and work towards common goals.

Sanford One Care will achieve a rapid and effective change through the deployment of expert training teams, new curriculums and a unique system of ongoing mentorship and consultation.

1. NDPERS employees will be treated in a new medical home that transforms primary care. Sanford One Care will establish the disposition that the role of healthcare is to enable patients to become active participants in their health rather than consumers of episodic services. This way of thinking is aimed not only at physicians, but all of allied health and the general population and accomplished through providing resources to make the paradigm shift. Training and development, technical assistance and health information technology resources embedded into this project are designed to support this transformation.

2. RN Health Coaches will be integrated into the redesigned care centers, to promote maximum patient engagement and personal health management, improved access and communication through non-traditional channels (personal health records, email, e-visits, etc.), and enhanced patient satisfaction. A Health Coach is a Registered Nurse specifically trained to coordinate patient care, conduct motivational interviews, establish patient centered goals for behavioral and/or lifestyle changes, manage quality improvement activities, and report data. Each Health Coach must attain a level of competency as demonstrated by skill assessments and competency checklists. Deployment of RN Health Coaches will initiate the integrated, team-based care to support better health, better care, and cost efficiencies. Workforce development activities aim for a ratio of 1:5 RN Health Coaches to primary care providers.

3. Behavioral health services will be integrated into the care center resulting in enhanced education, improved access to care, improved support to patients to modify behaviors, and more comprehensive collaborative treatment options. A key component of this proposal is enabling access to behavioral health care through new processes integrating behavioral health care professionals into patient-centered health care teams in primary care settings. In rural areas,

previously without access to behavioral health professionals, remote technology will enable the deployment of an integrated Behavioral Health Triage Therapist to provide diagnostic, acuity, and complexity assessments so that he patients can be triaged to the most appropriate level of collaborative care. Psychologists and psychiatrists from other regions in our health system will be able to partner with rural clinics through this technology to offer team consultation to the primary care team and direct clinical services via telehealth technology as needed to patients in the remote clinic sites. It is well documented that that most behavioral health conditions go unrecognized and undiagnosed, that even once identified, only half of the individuals will ever receive any treatment at all. Workforce development activities aim for a 1:10 ratio of Behavioral Health Triage Therapists to primary care providers.

4. Sanford One Care will maximize information technology to manage individual care opportunities, and transition to population care management in the future. Sanford Health's EPIC-based electronic medical records system, branded Sanford OneChart, provides the platform for connectivity to deliver a seamless experience across the large rural healthcare network. An innovative webbased adaptation will extend Sanford OneChart to include "MyChart" and "MyConditions," giving patients convenient access to view their medical record, lab results, preventive care topics, and patient-centered flow sheets.

   Additionally, MyChart and MyConditions enable patients to communicate with their healthcare teams and provide a central place to view both provider and patient entered flow sheet information to monitor chronic health conditions. To improve monitoring, a standardized patient registry will be enabled to produce recurrent reports, graph selected measurements, and generate patient-specific reports at the point of care for evidence based care standards and optimal chronic disease management. Behavioral health screening tools will be electronic, enabling patients to complete behavioral health assessments on line. Patients and the care team will also use electronic tools for completion of satisfactions surveys.

5. Measurement of success will be through standardized and transparent clinical metrics at region, clinic and individual physician levels, comparing performance to internal and external best practice benchmarks. The decision support team will work with the Methodology and Data Analysis team at Sanford Center for Health Outcomes and Prevention Research for a thorough self-evaluation.

   Formative evaluations will guide the project operations and implementation while summative evaluations are designed to assess this project's impact on the three-part aim of better care, better health, and lower costs through improved quality. Quality indicators and continuous improvement methods addressing patient satisfaction, utilization, clinical quality, and patient access are detailed in the evaluation section of this proposal. Additional measures of success presented include operational performance and the impact on lower costs. The hypothesis supporting this transformation is that workforce redesign and integration of behavioral health and primary care practice will improve adherence to quality standards of care while concurrently improving clinical outcomes and efficient

utilization of resources—cumulating in reduced healthcare expenditures, and strong patient and employee satisfaction.

Credentialing and Contracting

58. Briefly describe the initial credentialing process. How often are physician, hospital and other contracts (labs, imaging facilities, DME, home health care) reviewed?

Sanford Health Plan has an extensive provider credentialing and re-credentialing process. The minimum criteria for provider selected to the Sanford Health Plan network are that they must possess all of the necessary credentials required by NCQA. Those requirements include an active license in the state in which they practice, an active DEA license if they prescribe drugs, verified graduation from medical school or board certification, current malpractice insurance and verification and review of any malpractice claims, verification of work history and explanation of any gaps in work history, as well as a review of any reasons for any inability to perform the essential functions expected by the provider's specialty, lack of present illegal drug use, any history of loss of license and felony convictions, history of loss of privileges or disciplinary activity, as well as any discrepancies between the information gathered versus the information provided by the practitioner. Providers are credentialed every 3 years.

SANFORD HEALTH PLAN

Reimbursement and Discounts

NOTE: THE BELOW QUESTIONS 59 THROUGH 63 ARE MARKED AS PROPRIETARY AND CONFIDENTIAL.

SANFORD HEALTH PLAN

Performance Standards and Guarantees

As described in Section I. Overview, of this RFP, health plan vendors are required to comply with performance standards and guarantees that include a financial incentive/forfeiture which is negotiated as part of the renewal process. See appendix H for a copy of these performance standards and guarantees. You are required to offer your performance standards and guarantees for the board's consideration using appendix H. It is a priority for the board to have a comprehensive set of standards and guarantees relating to this plan.

64. Please confirm you have completed appendix H and confirm your willingness to comply with the performance standards and guarantees or provide suitable alternatives. Identify any additional standards and metrics your organization would be willing to include.

Sanford Health Plan is committed to match the current performance measures and dollars at risk. In Addition to these standards, Sanford Health Plan welcomes mutual evaluation of additional standards in coordination with the state to help meet cost containment or wellness initiatives.

Criteria	Value of Incentive	Value of Forfeiture	Confirm acceptance of standard/guarantee or propose an improved or suggested modification
Cost Management:			
By December 31, 2014, 17% of NDPERS members have completed a Health Risk Assessment (currently at 15.5%).	$0.00	$15,000	By December 31, 2015, 10% of NDPERS members have completed a Health Risk Assessment
By December 31 2014, NDPERS will have a 5% point increase in the NDPERS group aggregate HRA wellness score.	$0.00	$10,000	By December 31 2016, NDPERS will have a 5% point increase in the NDPERS group aggregate HRA wellness score.
By December 31, 2014, HealthyBlue NDPERS group aggregate incentives paid for HealthyBlue redemptions will increase by 10% over 2013 NDPERS rate.	$0.00	$7,500	By December 31, 2015, 10% of NDPERS members will have created a myHealthPlan account where they can access our beWell Health Management Tool and the incentive program.
2014 annual percentage average of NDPERS members receiving the Health Club Credit will increase by 10% over 2013 NDPERS rate.	$0.00	$7,500	By July 1, 2016 annual percentage average of NDPERS members receiving the Health Club Credit will meet the 2014 annual NDPERS rate.
Health Outcomes:			
80% of the NDPERS population will be enrolled in a medical home.	$0.00	$15,000	By July 1, 2016, 30% of the NDPERS population will be enrolled in a medical home.

Criteria	Value of Incentive	Value of Forfeiture	Confirm acceptance of standard/guarantee or propose an improved or suggested modification
HEDIS-like measures breast cancer screening rates will be at least 80%.	$0.00	$15,000	HEDIS-like measures breast cancer screening rates will be at least 80%
HEDIS-like measures cervical cancer screening rates will be at least 85%.	$0.00	$15,000	HEDIS-like measures cervical cancer screening rates will be at least 85%
HEDIS-like measures colorectal cancer screening rates will be at least 60%.	$0.00	$15,000	HEDIS-like measures colorectal cancer screening rates will be at least 60%
Provider Network Management:			
BCBSND will maintain an NDPERS PPO network consisting of 92% or more of the in-state hospitals, MDs and Dos that participate in the Company's Par Network.	$0.00	$75,000	Amount incorporates a requested increase from the current level By Dec. 31st, 2015 SHP will maintain an NDPERS PPO network consisting of 85% or more of the in-state hospitals, MDs an DOs that participate in the Company's Par Network.
BCBSND guarantees NDPERS a minimum provider discount (1-(Allowed/Billed)) of 30% for Non-Medicare contracts.	$0.00	$140,000	SHP guarantees NDPERS a minimum provider discount from in-network providers (1-(Allowed/Billed)) of 30% for Non-Medicare contracts.
Operational Performance:			
Claims Financial Accuracy will be 99% or greater.	$0.00	$25,000	Claims Financial Accuracy will be 99% or greater
Claims Payment Incidence Accuracy will be 97% or greater.	$0.00	$25,000	Claims Payment incidence Accuracy will be 97% or greater
Claim Timeliness – claims processing within 30 calendar days will be 99% or greater.	$0.00	$25,000	Claim Timeliness – claims processing within 30 calendar days will be 99% or greater
Average Speed of Answer will be 30 seconds or less.	$0.00	$25,000	Average Speed of Answer will be 45 seconds or less
Abandoned rate will be 5% or less.	$0.00	$25,000	Abandoned rate will be 7% or less
Requested New Standards/Guarantees:			
Provide a standard by which interest rates will be set at a level at least as favorable to NDPERS as the current methodology	$0.00	$50,000	The interest rate utilized currently is based on the US Treasury Notes quoted by the Wall Street Journal

Criteria	Value of Incentive	Value of Forfeiture	Confirm acceptance of standard/guarantee or propose an improved or suggested modification
Provide a guarantee on Rx rebates that will be passed-through to NDPERS	$0.00	$10,000	100% of Rx rebates will be passed-through to NDPERS
Total	**$0.00**	**$500,000**	

SANFORD HEALTH PLAN

Pharmacy Benefits Management Services

65. Describe your company's experience with administering pharmacy benefits. Provide a summary that includes the number of years that your company has provided such services, number and type (governmental or private) of clients, the total number of eligible employees, and the total number of actual participants that your company currently serves. Identify those clients who are large employers with multiple payroll processing centers and Medicare Part D program support.

Sanford Health Plan has been partners with Express Scripts Inc. for over a decade, administering pharmacy benefit plans for approximately 300 groups since inception and over 96,000 members currently including 2,500 Medicare supplement members. Most large employers have multiple payroll processing centers. Non of Sanford's clients currently have a Medicare Part D program administered by Sanford Health Plan. Sanford Health, and the Joint Venture Group School Pool would be our largest clients with multiple payroll processing centers.

You can view our formulary online at www.sanfordhealthplan.com. Sanford Health Plan has a closed formulary system and offers the employer group their choice of copay options. The current formulary is approved by the Physician Quality Committee on an annual basis in January.

Pharmacy Reports

Trend Central My Standard Reports is an online reporting tool divided into the following categories:

- Benchmark Reports — Compare program performance using data from clients of similar geographical location, industry or group type, or size. Users analyze benchmark information to assist in making decisions related to benefit plan changes.
- Billed Date Report — Lag triangle reports that include billing information and claim count by month with totals by month for the entire period. Users assess the lag time between a claim service date and the date the claim was billed to a client. Billed date reports match client billing and are used for reconciliation reporting.
- Drug Reports — Ranking, detail, and drill reports by drug and therapeutic levels to demonstrate and assist in analyzing drug patterns.
- Key Performance Metrics — Executive-level pharmacy program key performance metrics, which refer to period-over-period statistics. These indicators, typically at the claim level, provide the information most requested by clients. Key Performance Metric reports break out to the group or demographic levels of your choice, based on the eligibility information you provide to Express Scripts.
- Patient Analysis — Various reports at the member utilization level that provide cost breakdown information.
- Pharmacy Reports — Pharmacy-level reports that depict utilization by ranking claims for drug and member.
- Prescriber Reports — Ranking, detail, and drill reports by prescriber to demonstrate and assist in analyzing prescribing patterns.

- Prescription Detail — Utilization reports that demonstrate prescription drug detail across a variety of categories.
- Products and Services Reports — Summary and detail reports for claims processed for products and services, such as Prior Authorization. Various data components are captured for each product (for example, Prior Authorization coverage review requests, including approvals and denials).
- Ranking and Trend Reports — Ranking reports that depict utilization at the prescription and provider levels by ingredient cost. Users compare the current reporting period to historical performance.
- Specialty Drug Reports — Collection of reports, including key performance indicators, ranking, detail, benchmarking, and trending, used to retrieve utilization information on all specialty drugs.
- Utilization Summary Reports — Suite of report templates users employ to quickly retrieve summary information. These reports can be used to drill down into varying levels of utilization detail, such as highest-cost therapeutic classes, physician prescribing, retail pharmacy network, formulary, drug, therapy class, mail service pharmacy, and member demographics. The reports identify cost drivers and identify plan management opportunities.

Please see Attachment G for a sample prescription drug report package.

Sanford Health Plan provides thoughtfully designed, effective formulary compliance tools that help Members reduce overall prescription drug costs by encouraging utilization of generic and formulary drugs. The Sanford Health Plan drug formulary was designed with a copay structure that also gives the Member the cost saving advantage of choosing a generic medication. In certain categories only generic drugs are covered and in others generics are covered at the lowest copay and the Brand product at the highest copay. (Generics Preferred Program).

Sanford Health Plan utilizes a variety of methods for controlling the cost of prescription drugs. The following programs are offered to both Members and Providers by way of mail, telephonic or at the point of sale utilizing the Express Scripts claims adjudication system.

- Generic Preferred: Generic utilization program that promotes generic through economic incentives.
- $0 Copay: generic utilization program that promotes generics by having a $0 copay for a specific generic drugs (often tied to a disease management program). This plan is cost effective when the brand to generic cost differential is substantial.
- Drug Choice Program: Member and provider communications promoting the use of therapeutically equivalent generics and/or preferred brand drugs.
- Prior Authorization: Prior authorization protocols are enforced through concurrent analysis of pharmacy claims.
- Step Therapy: Step Therapy protocols apply to online clinical algorithm to second-line drugs at the point of service that requires Members to try a first-line therapy drug before a second-line drug.
- Formulary Compliance: Member education on how to use the formulary and reasons why.

- Pill-Splitting Program: Specific categories of drugs (those that are flat priced) are offered for at a 2 month supply for one (1) copay in order to increase compliance with medication and decrease the copay price burden to a Member.
- Quantity Level Limits: to ensure that medications are dispensed following the manufacturer guidelines or evidenced based medicine protocols based on patient safety.
- Peer Review Programs: Address the appropriate prescribing practices with physicians and midlevel providers

Sanford Health Plan maintains a transparent Prescription Drug program. We develop the formulary internally utilizing the most cost-efficient and effective methodologies for each drug category therefore making the drug program transparent. We use an internal evaluation process to assure the most effective prescription drug is listed in your formulary. The evaluation process utilized by the Physician Quality Committee is that each category of medications is reviewed on an annual basis to determine clinical efficacy of the medications on the formulary and their pricing structure as it relates to compliance, efficacy, plan cost, member cost, ingredient costs, single-source vs. multi-source, patent expiration, rebate possibility, count of pills per day utilization, and regional medical norms.

Member Communication of Pharmacy Program Information

Sanford Health Plan has an effective communication process in place for notifying our Members of changes affecting their pharmacy program. Members are notified of the following changes through these communication modes:

- Drug additions – Member Newsletter, website
- Changes in formulary status – On an annual basis, website, Member Newsletter
- Changes in the network - website
- Ineligible, banned or recalled drugs – Personal letters to Members and Providers
- Refills – At the time of retail fill

In the situation that a newly approved generic drug is now available, the Plan would determine that it demonstrate efficacy equivalent to a preferred brand counterpart—yet at a lower cost we add that new drug to the formulary. At times, the Plan may decide to remove the equivalent Brand product from the formulary and move the market share to the new generic. However, if the newly approved generic is more expensive than the preferred brand counterpart we do not add that product to the formulary and wait until it becomes cost neutral for the Plan, the Member and the Employer group.

Sanford Health Plan notifies Members each quarter with formulary updates in its Member newsletter. The formulary is updated on an annual basis and Members are notified of changes in the Member newsletter. Prior to any deletions or copay changes to the formulary our Members and prescribing Providers receive letters to ensure they understand the change, reason why this is occurring and to provide enough time to get new prescriptions written or to schedule an office visit to discuss change with a

physician. All formulary additions, deletions and/or cost saving strategies are provided on the Sanford Health web site as well as on the Express Scripts web site when the Member signs up for the free services.

Sanford Health Plan has an exception process in place for any Member or Physician who have tried a formulary product and failed.

Claims Payment Process for Pharmacy Claims

The Member receives a prescription from their physician and takes this to their local retail pharmacy to be filled. The Member shows their ID card at the time of the prescription fill so that the retail pharmacy can apply the correct benefits. The local retail pharmacist adjudicates the prescription on-line utilizing their link to the Express Scripts database. Express Scripts has successfully loaded Sanford Health Plan's Formulary with all requirements so that the prescription will process at the proper copay amount or the system will notify the pharmacist of any issues or rules that are required to be followed before the processing on-line can occur. Messaging from Express Scripts the pharmacist may incur is prior authorization required, quantity level limit, or step therapy edits to name a few. Once this occurs the pharmacist is required to call the Utilization Management Department of Sanford Health Plan to continue. If any messaging appears the prescription claim will not process until the issues is handled. If there is no message, the claim will process with a copay amount and the process is completed.

Sanford Health Plan does not cover medications that are filled at a non-participating pharmacy unless an emergency situation arises and then authorization is provided at that time.

For new groups, Sanford Health Plan is experienced in ensuring a smooth transition to our network and formulary in order to minimize disruption. First of all, Sanford Health Plan provides Formulary education in writing in the Members' enrollment packet instructing the Members to call if have any questions or note any formulary disruption prior to the transfer to the new plan.

Secondly, group education about the Formulary and the drug benefit will be provided at the enrollment meetings in each location. Employees will have the opportunity to provide their name and telephone number to a Sanford Health Plan Client Services Representative so that she can provide that information to the Utilization Review Department where a health care professional will complete an outbound call to the Member and assist in the conversion to a Formulary product, notify the Members physician for a letter of medical necessity or provide authorization for a non-formulary product or answer any questions they may have regarding the medication in question.

66. Describe your company's expertise and experience in implementing PBM services for a program that is comparable in size to the NDPERS program, based on the number of covered lives.

Sanford Health Plan effectively manages approximately 350 unique prescription drug benefit plans across all products lines, within four states' regulatory environments for over 96,000 members. Our generic fill rates consistently runs at 76% which is below the national average of ESI's overall HMO book of business generic fill rate of 74.6%.

67. Describe your mail order pharmacy program and provide details on how you market this service.

Specialty Drugs

Sanford Health Plan currently subcontracts specialty drug services to Curascript, a wholly-owned subsidiary of Express Scripts. All Plan Members must prior authorize specialty medication and it must be obtained through Curascript's mail order program. Medication protocols have been approved the Plan for the following conditions and the Member and Physicians office are notified of the process to obtain the medication from Curascript once medical necessity has been determined for the Member. Curascript clinicians are required to call the Plan for any Member who does not meet established clinical criteria for medical necessity determination and they are not able to deny any Member medical services unless it was reviewed and discussed by the Plan's Chief Medical Officer. Approved medication is shipped to the Member's home, physician office or home health agency based on the physician's orders.

Curascript offers clinical support to the Plan in the following disease state areas: Bleeding Disorders, Hemophilia Factor, Hepatitis C, HIV, Multiple Sclerosis, Psoriasis, Cancer, Respiratory Syncytial Virus (RSV), and Rheumatoid Arthritis.

Member financial responsibility is based on the type of specialty medication and the place of service. The specialty drug benefit either applies to the Members pharmacy Brand name copay or to the deductible and coinsurance level.

Curascript clinicians facilitate disease state education, conduct scheduled follow-up calls with patients, reviews appropriate dosing schedules and counsel members on side-effect management and general patient concerns. The core elements of the clinical program include: A patient admission process that includes benefit investigation and management, nursing coordination for teaching and instruction, patient assessment for educational needs, and clinical evaluation. Patient care coordinators take a proactive role in coordination prescription needs, facilitate product delivery, maintain insurance authorizations, monitor adherence, and perform clinical screening risk assessments (Ongoing risk assessment, monitoring, and clinical intervention when appropriate from licensed nurses. Ongoing compliance monitoring using a coordinated effort from the entire patient care team). Social services referrals are available from the on-staff social services team.

Finally detailed Plan reporting is provided by Curascript in order to determine clinical and financial effectiveness of the program.

Sanford Health Plan continues to monitor specialty market trend and are actively involved with Express Scripts. The Plan's President is part of an active leadership team

at Express Scripts that deals with emerging drug technology and trend providing insight and collaboration as it relates to the future of pharmaceuticals in relationship to overall health care initiatives.

This service is marketed during open enrollment sessions, and communicated via member handbooks, certificates of coverage and direct patient/pharmacy communication based on claim utilization.

68. Describe your PBM rebate process. NDPERS is requesting that you provide a rebate guarantee in appendix H?

Requested New Standards/Guarantees:			
Provide a standard by which interest rates will be set at a level at least as favorable to NDPERS as the current methodology	$0.00	$50,000	The interest rate utilized currently is based on the US Treasury Notes quoted by the Wall Street Journal
Provide a guarantee on Rx rebates that will be passed-through to NDPERS	$0.00	$10,000	100% of Rx rebates will be passed-through to NDPERS

Services Provided to the NDPERS

69. Describe the timetable and specific tasks involved to have the NDPERS' program operative for the July 2013 Plan Year. Include a detailed implementation plan and business plan or timeline related to prescription drug coverage including Medicare Part D program support. At a minimum be specific with regard to the following:

a. Amount of time needed for implementing the new program

Sanford Health Plan is able to configure, test and go live with a new prescription benefit package within 6 months. Medicare Part D timelines will follow CMS standards.

b. Recommended activities/tasks and timing

The following tasks would be completed in concert with the medical package program build.

Date	Task	Responsibility
Oct. 2014	Award Notification	NDPERS
October 2014	Sign Administrative Services Agreement between Sanford Health Plan and NDPERS	NDPERS and Sanford Health Plan
Nov. 2014	Begin implementation and operations • Amending Provider Agreements for NDPERS-specific discounts • Develop Summaries of Benefits and Evidence of Coverage (Member Policy) • Develop NDPERS-specific forms and documents (ID cards, applications, provider manual, policies and procedures) • Begin system configuration of benefits, claim edits and rules	Sanford Health Plan
Jan. 2015	Develop Marketing and Communication Plan	
April 2015	Begin Open enrollment meetings and health fairs	
May 2015	Procedure for employee enrollment transaction determined. This could include electronic file transfer, paper enrollment or electronic enrollment via Sanford Health Plan's enrollment system, *myHealthPlan* Employer Portal.	NDPERS & Sanford Health Plan
30 days prior to effective date	Applications processed and Identification Cards are printed and mailed to member's home address.	Sanford Health Plan

c. Responsibilities of the vendor and the NDPERS staff.

Please see above.

d. Transition with incumbent, including providing members 90 day notice regarding formulary changes, and the communication of transition issues to all plan members.

Sanford Health Plan will provide employees with personalized letters identifying formulary changes, alternative drug options and cost impact 90 days prior to the change.

e. Length of time implementation team will be available and accountable to NDPERS.

Sanford Health assures NDPERS that the implementation team and executive management team is available and accountable to NDPERS not only during the implementation process, but also indefinitely after the contract effective date.

f. Identify the staff members, by area of expertise, who will be assigned to the implementation team.

Sanford Health Plan's implementation team for the medical plan will also be the conduit for the prescription drug design, build, test, and go-live period. The Plan's COO and CMO are the lead persons for assigned to the NDPERS prescription drug plan along with the NDPERS Director.

Formulary

70. Provide details and the capabilities of your organization to provide a formulary that is at a minimum equivalent to and as comprehensive as the current formulary used by the NDPERS program. Provide sample formulary documents. At a minimum include the following:

i Describe your policy regarding formulary changes and your procedures for educating and notifying members. Indicate how often the formulary is changed.

Please see Attachment E for a copy of the Sanford Health Plan formulary for non-Grandfathered group plans.

Please see Attachment F for a copy of the Pharmacy Directory.

Sanford Health Plan maintains a transparent Prescription Drug program. We develop the formulary internally utilizing the most cost-efficient and effective methodologies for each drug category therefore making the drug program transparent. We use an internal evaluation process to assure the most effective prescription drug is listed in your formulary. The evaluation process utilized by the Physician Quality Committee is that each category of medications is reviewed on an annual basis to determine clinical efficacy of the medications on the formulary and their pricing structure as it relates to compliance, efficacy, plan cost, member cost, ingredient costs, single-source vs. multi-source, patent expiration, rebate possibility, count of pills per day utilization, and regional medical norms.

Sanford Health Plan notifies Members each quarter with formulary updates in its Member newsletter. The formulary is updated on an annual basis and Members are notified of changes in the Member newsletter. Prior to any deletions or copay changes to the formulary our Members and prescribing Providers receive letters to ensure they understand the change, reason why this is occurring and to provide enough time to get new prescriptions written or to schedule an office visit to discuss change with a physician. All formulary additions, deletions and/or cost saving strategies are provided on the Sanford Health web site as well as on the Express Scripts web site when the Member signs up for the free services.

Sanford Health Plan has an exception process in place for any Member or Physician who have tried a formulary product and failed.

ii Describe how drugs are evaluated for possible inclusion on the formulary.

Express Scripts provides pharmacy benefit management services to Sanford Health Plan. Sanford Health Plan has customized an Express Scripts formulary to meet the health plan's needs.

Sanford Health Plan's Express Scripts account team provides formulary consultation, including modeling tools that support informed formulary decisions and reports that demonstrate overall program effectiveness. Our formulary management provides:

- Clinically objective information from a pharmacy benefit manager that is independent of pharmaceutical manufacturer or chain pharmacy ownership
- Flexibility that enables you to implement and maintain a custom formulary
- Predictable impact, savings, and rebates
- Modeling tools and reports that help you fine-tune your program

Throughout the plan term, the Clinical Program Manager (CPM) serves as Sanford Health Plan's primary contact for clinical information:

Formulary Modeling — The CPM addresses each drug-cost component when helping Sanford Health Plan evaluate products for the formulary, including drug cost net of rebate and pharmacy network discount. The clinical program manager also evaluates utilization data to demonstrate the impact of formulary decisions that Sanford Health Plan may consider implementing and whether changes involve drug placement or benefit-design modification. The standard turnaround time for this modeling is five business days.

Sanford Health Plan P&T Committee Attendance — The Express Scripts CPM attends pharmacy and therapeutics committee meetings to present formulary-placement recommendations, which include impact on member costs

Formulary Management — Express Scripts supports the formulary at the point of service. The clinical program manager identifies formulary compliance and trend-management programs to increase utilization of generics and preferred brand products.

Formulary Updates — The CPM coordinates changes to the formulary file and claims processing system. Quality assurance checks are built into the system to ensure accuracy. Starting on the formulary change's effective date, Express Scripts supports the updated formulary through online pharmacy messaging.

Express Scripts evaluates drugs for possible inclusion on its formularies through this process.

Formulary Drug Selection and Approval Process

The Express Scripts formulary development process calls for a focus on clinical factors, with financial considerations coming into play only among clinically comparable or optional products. This results in clinically sound, cost-effective formularies for our plan sponsors and their members. Our process involves three committees:

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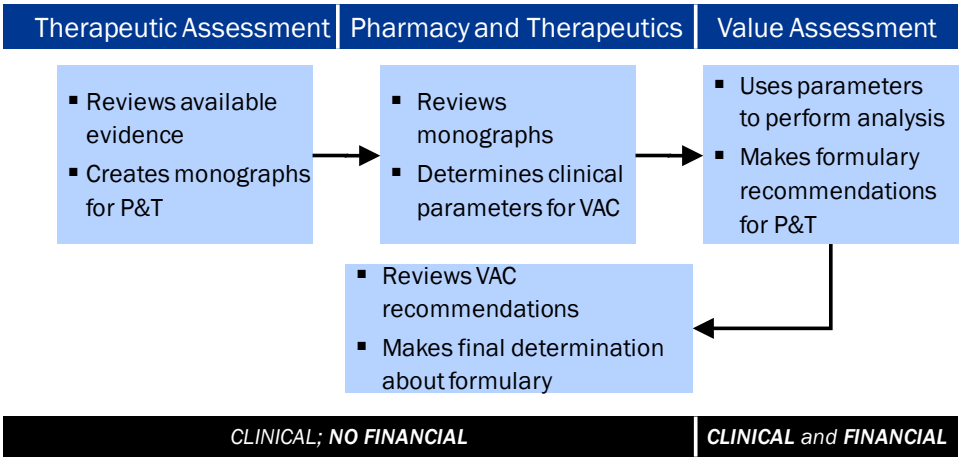
1. Therapeutic Assessment Committee, which reviews drugs based on clinical attributes. This committee includes the Office of Clinical Evaluation & Policy's vice president and medical director, the director of the Drug Evaluation Unit, and nine additional clinical pharmacists who represent areas such as product management, account services, emerging therapeutics, clinical programs, specialty pharmacy, and utilization management services.
2. National Pharmacy & Therapeutics Committee, a fully independent body that makes final formulary determinations. The committee comprises 18 independent physicians and one independent pharmacist who are not employed by Express Scripts. Committee members ensure Express Scripts formularies remain CMS-compliant.
3. Value Assessment Committee, which evaluates the net cost of drugs to Express Scripts, our plan sponsors, and their members. This committee includes representatives from product management, formulary management, rebate, finance, and account management who evaluate current and future market dynamics, economic considerations, and client needs.

The following illustrates the formulary development process and the roles of these committees:



As illustrated, our Pharmacy & Therapeutics Committee is insulated from financial considerations and has ultimate authority in our formulary development process.

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Formulary Committees

The following table details the composition and responsibilities of each committee involved in the formulary development process:

Name	Members	What They Review	Considerations
Therapeutic Assessment Committee	Vice president of the Office of Clinical Evaluation & Policy, medical director of the Office of Clinical Evaluation & Policy, director of the Drug Evaluation Unit, and nine clinical pharmacists representing various departments	Food and Drug Administration reports, clinical trials, peer-reviewed medical information, manufacturer data, utilization management criteria, clinical programs	Clinical, NOT financial
National Pharmacy & Therapeutics Committee	18 independent physician members and one independent pharmacist from active community and academic-based practices	Clinical information (formulary evaluation, place in therapy, and competitive product category overviews) for medications newly approved by the Food and Drug Administration	Clinical, NOT financial
Value Assessment Committee	Experts from the following departments: 1. Product Management 2. Formulary Management 3. Rebate 4. Finance 5. Account Management	Financial implications of "optional" medications for Express Scripts, clients, and members	Financial

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Formulary Evaluation Designations — Include, Optional, Exclude

Each drug evaluated for inclusion on our standard formularies receives one of three designations: include, optional, or exclude. Criteria for each designation follow:

Include	Optional	Exclude
• Unique treatment indication • Efficacy superior to that of existing therapy alternatives • Unique pharmacology or a unique status in therapy • Safety profile superior to that of existing therapy alternatives	• Designation based on acceptable clinical efficacy, as well as clinical equivalence to comparable drugs currently on the formulary • May receive a formulary or nonformulary recommendation based on financial analysis	• Insufficient data to make an effective evaluation • Efficacy inferior to that of existing therapy alternatives • Safety profile inferior to that of existing therapy alternatives

iii Describe the basis of your formulary development and maintenance?

Express Scripts makes additions to the formulary on a daily basis. For most standard formularies, we make deletions annually. For the High Performance Formulary, we make deletions twice a year, on January 1 and July 1. We notify clients and members at least 60 days in advance.

In addition, Express Scripts maintains an asterisk deletion list. Near the end of each year, prior to printing the next year's formulary list, Express Scripts notes with an asterisk (*) each brand drug that is due to lose patent protection soon. When the patent of a brand drug expires: (1) chemically equivalent generic drugs enter the market, (2) maximum reimbursement amount is scheduled for each generic, (3) Express Scripts notifies clients at least 30 days in advance via an Emerging Therapeutic Intervention announcement. This notification details the patent expiration, the brand's nonformulary status (at the beginning of the next month), and the newly available formulary generic equivalent(s).

Finally, with respect to Sanford Health Plan's customized formulary, as noted in response to the previous question, the CPM coordinates changes to the formulary file and claims processing system. Quality assurance checks are built into the system to ensure accuracy. Starting on the formulary change's effective date, Express Scripts supports the updated formulary through online pharmacy messaging.

iv Provide specific information where a higher cost option of therapeutic equivalent drug has been included in your formulary and provide rationale for doing so.

In developing our formularies, Sanford Health Plan's Pharmacy & Therapeutics Committee in concert with Express Scripts first considers clinical efficacy, then cost. If the Pharmacy & Therapeutics Committee determines a drug is clinically necessary, it is added to the formulary regardless of cost.

Occasionally, there are situations when the average wholesale price of the preferred drug is higher than that of the nonpreferred drug. For example, in the Insulin therapeutic class, Lantus is offered on our formularies due to clinical considerations.

Additionally, we include some higher-cost drugs on our formularies due to member disruption concerns (for example, Premarin), the need to offer member choice (antibiotics or birth control), and substitution concerns (specialty products).

- **What is your definition of a Generic Drug?**

  Sanford Health Plan defines generic drugs as drugs that (1) are approved by the Food and Drug Administration (FDA) as a therapeutic equivalent to the Brand Name Drug; (2) contain the same active ingredient as the Brand Name Drug; and (3) cost less than the Brand Name equivalent.

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Management of Clinical Programs

71. Provide information that demonstrates your organization can effectively administer the programs listed below in order to partner the pharmacist, other health professionals and the member to ensure the optimum therapeutic outcomes for our members. Also provide information that demonstrates your organization's ability to promote the safe and effective use of medications, and help our members achieve targeted outcomes.

a. Drug Utilization Reviews - retrospective, concurrent and prospective.

b. Disease Management

c. Medication Therapy Management

Sanford Health Plan's utilization review procedures, disease management programs and medication therapy management are incorporated in the Utilization Management daily operations and the Care Management program described above.

72. Does your organization perform retrospective DUR for all claims of a given client? Please provide frequency of retrospective DUR.

No, Sanford Health Plan conducts random claims audits in addition to "for cause" utilization case reviews.

73. What is the generic utilization and substitution rate for your overall book of business nationally and in North Dakota?

	2012	**2013**	**2014 YTD**
SANFORD HEALTH PLAN BOOK OF BUSINESS			
Generic utilization rate	78.5%	80.8%	81.9%
Generic substitution rate	98.7%	98.3%	98.7%
NORTH DAKOTA			
Generic utilization rate	82.2%	84.96%	86.22%
Generic substitution rate	97.28%	97.85%	99.1%

74. How many MAC lists do you have for pharmacies and clients? If more than one, which list will you use for NDPERS?

	Number of MAC lists
Pharmacies	One
Clients	One

75. Describe your methodology for pricing (AWP, AAC, WAC, etc.)? Please explain in detail.

Express Scripts prices claims based on Average Wholesale Price (AWP) minus your contract-specific discount for brand and generic prescriptions, MAC/MRA, or at the Usual and Customary (U&C) price.

AWP Source

Express Scripts currently utilizes Medi-Span as our vendor for all pricing-related fields, including AWP, wholesale acquisition cost, obsolete date, pack size, and unit of measure, to ensure consistency of data.

Medi-Span offers the following qualities:

- Standardized at the national level
- Widely available and accepted by the vendor community
- Stable and predictable
- Updated on a regular basis
- Applicable for generic and brand drugs, as well as home delivery and retail channels

Drug File Updates

We receive daily drug file updates, including amendments to drug file pricing, from our pricing source. The pricing updates are loaded in our system and made effective at midnight on the date they are loaded. Systematic processes ensure the updates are properly loaded into the system; a manual review also takes place according to our audit requirements. We store historical price file information indefinitely.

Trend Analysis

76. Your organization must be able to provide NDPERS with a comprehensive, annual trend analysis report as background for making pricing decisions. At a minimum the report must:

a. Contain extensive utilization and drug spend data that presents future trend drivers, both industry wide and specific to our programs;

Sanford Health Plan meets with Express Scripts frequently to discuss trends, strategies, quality, and cost-effective plan initiatives.

Please refer to Attachment G for a sample prescription drug report package.

Bi-Weekly and Monthly Meetings

Sanford Health Plan and our account management team conduct bi-weekly phone calls to discuss program performance and address any questions you need answered. Additionally, we are able to meet monthly for more detailed conversations related to the plan, your members' benefits and utilization, and Sanford Health Plan's questions or concerns, if any.

Quarterly Meetings

Our Managed Care Service Model includes a strategic client planning process that encompasses quarterly reviews. Together, Sanford Health Plan and Express Scripts set the agenda for the quarterly meeting, which typically includes topics such as:

- Overview of initiatives in process
- Review of communication strategies related to planned changes
- Review of quarterly plan performance, including financial, clinical, and operational metrics

When considering plan changes, our account team may engage a PharmacoAnalytics consultant to evaluate the impact plan changes may have on your pharmacy trend.

Our account team also utilizes the PharmacoAnalytics quarterly reporting package — the Costs and Trends Snapshot — which is focused on monitoring plan performance.

A sample of the report is below.

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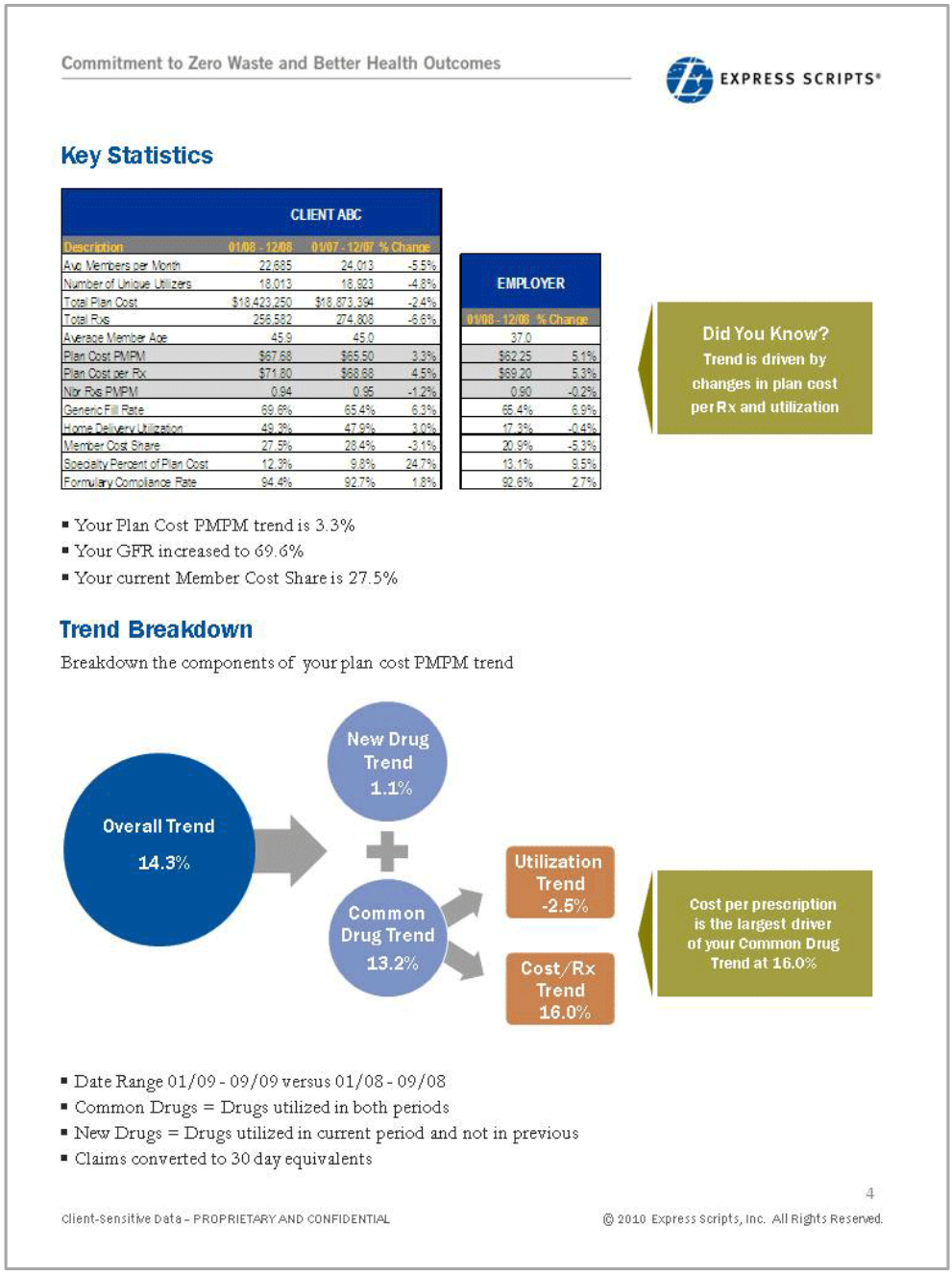

Commitment to Zero Waste and Better Health Outcomes

EXPRESS SCRIPTS®

Key Statistics

	CLIENT ABC			EMPLOYER	
Description	01/08 - 12/08	01/07 - 12/07	% Change	01/08 - 12/08	% Change
Avg Members per Month	22,685	24,013	-5.5%	37.0	
Number of Unique Utilizers	18,013	18,923	-4.8%	$62.25	5.1%
Total Plan Cost	$18,423,250	$18,873,394	-2.4%	$69.20	5.3%
Total Rxs	256,582	274,808	-6.6%	0.90	-0.2%
Average Member Age	45.9	45.0		65.4%	6.9%
Plan Cost PMPM	$67.68	$65.50	3.3%	17.3%	-0.4%
Plan Cost per Rx	$71.80	$68.68	4.5%	20.9%	-5.3%
Nbr Rxs PMPM	0.94	0.95	-1.2%	13.1%	9.5%
Generic Fill Rate	69.6%	65.4%	6.3%	92.6%	2.7%
Home Delivery Utilization	48.3%	47.9%	3.0%		
Member Cost Share	27.5%	28.4%	-3.1%		
Specialty Percent of Plan Cost	12.3%	9.8%	24.7%		
Formulary Compliance Rate	94.4%	92.7%	1.8%		

Did You Know?
Trend is driven by changes in plan cost per Rx and utilization

- Your Plan Cost PMPM trend is 3.3%
- Your GFR increased to 69.6%
- Your current Member Cost Share is 27.5%

Trend Breakdown

Breakdown the components of your plan cost PMPM trend

- Date Range 01/09 - 09/09 versus 01/08 - 09/08
- Common Drugs = Drugs utilized in both periods
- New Drugs = Drugs utilized in current period and not in previous
- Claims converted to 30 day equivalents

4

Client-Sensitive Data – PROPRIETARY AND CONFIDENTIAL

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Collaborative Planning Sessions

Express Scripts' client planning process is an ongoing, joint effort that incorporates scheduled meetings, including the annual Collaborative Planning Session. Agenda items for the Collaborative Planning Session are prioritized based on our needs and requests; we work with ESI to formulate an agreeable outline. Topics typically discussed during the Collaborative Planning Session include:

- Status update

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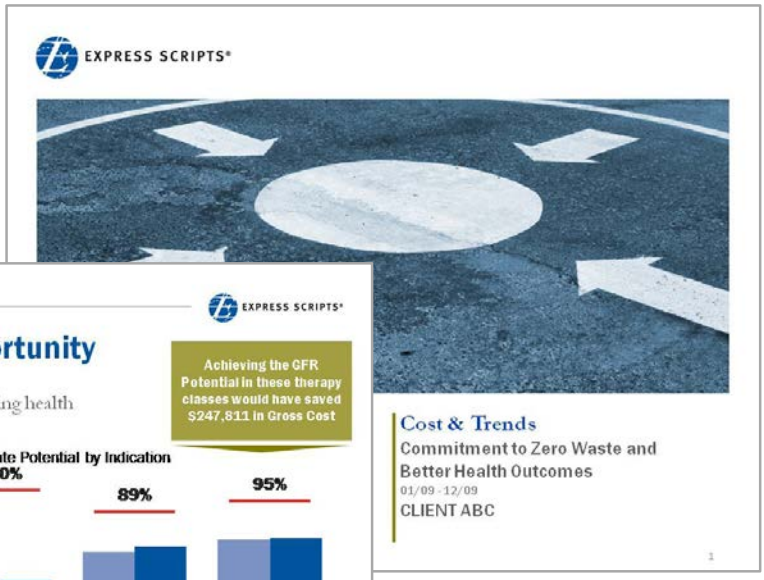
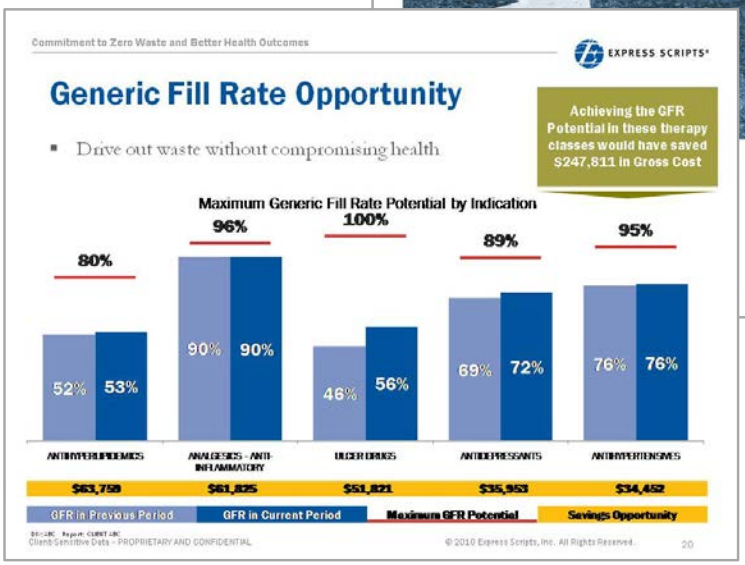
- Short-term and long-term objectives for the plan and Sanford Health Plan's members
- Three-year plan and next steps
- Industry trend analysis, such as examining the effect of direct-to-consumer advertising, drug mix, and emerging therapeutic issues

During the Collaborative Planning Session, our account team also presents Sanford Health Plan-specific program recommendations, prepared through careful planning and analyses. Our team:

- Reviews key data from our prior year
- Develops and validates Sanford Health Plan's plan goals for the coming year
- Identifies key opportunities specific to Sanford Health Plan
- Recommends programs to meet Sanford Health Plan's goals

Samples from the Collaborative Planning Session are below.





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Clinical Input

The CPM is our account team's primary contact and consultant for clinical issues and initiatives. Our CPM participates in Sanford Health Plan's meetings to discuss management of clinical programs and services. Topics and discussion points for these meetings typically consist of the following:

- Formulary initiatives and management
- Financial, formulary, and clinical modeling
- Sanford Health Plan-specific business plan development
- Clinical program structure discussion and results evaluation
- Drug utilization assessment

Additionally, our dedicated PharmacoAnalytics consultant is also available for more complex clinical analysis.

b. Provide information on the generic pipeline, drug indication changes that may affect drug utilization, specialty drug utilization trends, new drug introductions and other similar trend drivers;

Please see summary above.

c. Show the impacts of, and provide recommendations for addressing price inflation, rebate performance and other pricing related drivers, in addition to pharmacy network trends and opportunities.

Please see summary above.

77. Describe your organizations Trend Analysis reporting capabilities. Provide sample reports that reflect your organization's ability to provide thorough trend analysis for NDPERS.

Based on industry-leading software and Express Scripts' thought leadership, Trend Central provides an intuitive self-service method of accessing prescription claims and clinical programs performance reporting. Our web-based, interactive data analysis solution enables NDPERS to manage performance and promptly identify emerging issues and trends. The application, which can be co-branded, includes the following customization options:

- NDPERS users can tailor your homepage to support how each user works. For example, each user can design the homepage to display key statistics or show particular summary reports each time they log on to Trend Central. Users also can establish links to favorite reports.
- Users can schedule favorite reports for automated generation.

- Users can modify member population or groups and time frames to customize report presentation.

Utilizing our online library of templates, Trend Central permits a variety of users to run reports instantly from each person's desktop. Users can perform additional data manipulation or integration by downloading report data to any spreadsheet or database application using Trend Central's export function. Additionally, NDPERS can easily access ad hoc and custom reporting via Trend Central.

All Trend Central users can access Express Scripts' library of report templates. Reports are divided into the following categories:

- Key Performance Indicator
- Report Card
- Trend
- Prescription Detail
- Integrated Specialty
- Member
- Pharmacy
- Prescriber Analysis
- Billed Date
- Prior Authorization
- Benchmark

Key Performance Indicator (KPI) — Executive-level report summaries of pharmacy program performance. These reports refer to period-over-period statistics, usually at the claim level, providing the information most requested by clients. Key Performance Indicator reports break out to the group or demographic levels of your choice based on the eligibility information you provide to Express Scripts.

Report Card (RC) — Suite of report templates users employ to quickly retrieve summary information and drill down into varying levels of utilization detail, such as highest-cost therapeutic classes, physician prescribing, retail pharmacy network, formulary, drug, therapy class, mail service pharmacy, and member demographics. The reports identify cost drivers and identify plan management opportunities.

Trend (TR) — Ranking reports that depict utilization at the prescription and provider levels by ingredient cost. Users compare the current reporting period to historical performance.

Prescription Detail (DG) — Utilization reports that demonstrate prescription drug detail across a variety of categories

Integrated Specialty (SG) — Collection of reports, including key performance indicators, ranking, detail, benchmarking, and trending, used to retrieve utilization information on all specialty drugs

Member (MB) — Various reports at the member utilization level that provide cost breakdown information

Pharmacy Reports (PH) — Pharmacy-level reports that depict utilization by ranking claims for drug and member

Prescriber Analysis Reports (PR) — Ranking, detail, and drill reports by prescriber to demonstrate and assist in analyzing prescribing patterns

Billed Date Reports (BL) — Lag triangle reports that include billing information and claim count by month with totals by month for the entire period. Users assess the lag time between a claim service date and the date the claim was billed to a client. Billed date reports match client billing and are used for reconciliation reporting.

Prior Authorization Reports (PZ) — Summary and detail reports for claims processed with prior authorization. Various data components captured with each prior authorization override request are available, including approval and denial with comments.

Benchmark Reports (BN) — Compare program performance using data from clients of similar geographical location, industry or group type, or size. Users analyze benchmark information to assist in making decisions related to benefit plan changes.

Please see **Attachment G** to view sample prescription drug report package.

Specialty Drug Program

78. Describe in detail how your organization will manage specialty and compound drugs based on NDPERS's current plan design. Provide detailed information about your organization's capabilities to administer a specialty drug program. Indicate specific results your specialty drug program has achieved for your current and past clients in terms of reduced program costs (quantitative and qualitative). Include details about the Specialty pharmacy you contract with. Provide your listing of "Specialty" drugs.

Express Scripts provides Specialty Benefit Services to clients and members of Sanford Health Plan. Express Scripts owns and operates its specialty pharmacies.

Express Scripts Specialty Benefit Services is our solution to curbing rapidly increasing specialty trend and solving plan sponsors' specialty cost challenges. We provide complete specialty benefit and drug management services, delivering maximized savings and superior patient care to plan sponsors. We combine — into a single, comprehensive specialty offering — institutional capabilities and expertise in the following areas:

- Specialty pharmacy benefit management
- Specialty pharmacy dispensing and operations
- Clinical programs and care for patients

- Utilization management of specialty drugs
- Medical drug management
- Healthcare provider outreach
- Account management and implementation
- Communications to healthcare providers, members, and plan sponsors

Express Scripts' *CuraScript* mails specialty drug and all the supplies needed for injection directly to the Member's home or Practitioner's office within 24 to 48 hours after the request is approved and medication is ordered. Administration supplies (syringes, needles etc.) are free; Members are not required to pay additional copays for those supplies. Prior to all shipments, a Patient Admission Specialist contacts the Member to discuss copay liability for the drug and arrange delivery.

CuraScript offers toll-free customer service available 24 hours a day, 365 days a year. Specially trained staff offers support services for the Member, their caregivers, and their Practitioners that include:

- Injectable drug order information;
- Consultation with an experienced, knowledgeable pharmacist;
- Specially trained nurses available to answer questions about injectable drugs and the disease states they treat.

CuraScript mails the Practitioner a letter explaining the program and how to send prescriptions to *CuraScript*. By participating in Specialty Care, Members are automatically enrolled in a drug therapy management program. This program entitles them to receive the following benefits at no additional charge:

- Access to nurses and pharmacists 24 hours/day, 7 days/week for questions related to yhr injectable drug and the illness the drug is treating.
- Injectable drug refill reminders if they forget to call for refilld, and convenient refill process.
- Free delivery of your medication and supplies to the Member's home, Practitioner's office or designated location.

Injectable and High Cost Medications

- **The following medications (injectable and high cost medications) must be obtained from CuraScript by calling (866) 333-9721.** All medications obtained from CuraScript are prior authorized by CuraScript using criteria approved by the Sanford Health Plan. Most of these medications are covered under the medical benefit and are subject to payment with deductible, coinsurance or a medical copay, dependent upon your benefit package.

Name	Disease State	Coverage	Preferred Alternatives
8-MOP	MISCELLANEOUS SPECIALTY CONDITIONS	MEDICAL	
ABRAXANE	CANCER	MEDICAL	
ACTEMRA	INFLAMMATORY CONDITIONS	MEDICAL	
ACTHAR H.P.	MULTIPLE SCLEROSIS	MEDICAL	
ACTIMMUNE	IMMUNE DEFICIENCY	MEDICAL	
ADAGEN	*ENZYME DEFICIENCIES*	*MEDICAL - LIMITED*	

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Name	Disease State	Coverage	Preferred Alternatives
		DISTRIBUTION	
ADCIRCA	VASODILATOR	PHARMACY- TIER 3	
ADRIAMYCIN	CANCER	MEDICAL	
ADRUCIL	CANCER	MEDICAL	
ADVATE	HEMOPHILIA	MEDICAL	
AFINITOR	CANCER	MEDICAL	
ALDURAZYME	ENZYME DEFICIENCIES	MEDICAL	
ALFERON N	CANCER	MEDICAL	
ALIMTA	CANCER	MEDICAL	
ALKERAN	CANCER	MEDICAL	
ALPHANATE	HEMOPHILIA	MEDICAL	
ALPHANINE SD	HEMOPHILIA	MEDICAL	
AMEVIVE	INFLAMMATORY CONDITIONS	MEDICAL	
AMIFOSTINE	CANCER	MEDICAL	
AMPYRA	MULTIPLE SCLEROSIS	PHARMACY- TIER 3	
APOKYN	*MISCELLANEOUS SPECIALTY CONDITIONS*	*PHARMACY- TIER 3 - LIMITED DISTRIBUTION*	
ARALAST/NP	RESPIRATORY CONDITIONS	MEDICAL	
ARANESP	BLOOD CELL DEFICIENCY	PHARMACY - TIER 2	
ARCALYST	*INFLAMMATORY CONDITIONS*	*MEDICAL -LIMITED DISTRIBUTION*	
AREDIA	CANCER	MEDICAL	
ARRANON	*CANCER*	*MEDICAL - LIMITED DISTRIBUTION*	
ARZERRA	CANCER	MEDICAL	
ATGAM	TRANSPLANT	MEDICAL	
AUBAGIO	MULTIPLE SCLEROSIS	TIER 2	
AVASTIN	CANCER, OPTHALMIC DISORDERS	MEDICAL	
AVONEX	MULTIPLE SCLEROSIS	PHARMACY - TIER 3- STEP THERAPY RULES APPPLY	BETASERON- TIER 1 COPAXONE OR REBIF- TIER 2
BEBULIN VH IMMUNO	HEMOPHILIA	MEDICAL	
BENEFIX	HEMOPHILIA	MEDICAL	
BENLYSTA	SYSTEMIC LUPUS ERYTHEMATOUS	MEDICAL	
BERINERT	*HEREDITARY ANGIOEDEMA*	*MEDICAL- LIMITED DISTRIBUTION*	
BETASERON	MULTIPLE SCLEROSIS	PHARMACY -TIER 2	
BEXXAR	*CANCER*	*MEDICAL - LIMITED DISTRIBUTION*	
BICNU	CANCER	MEDICAL	
BLEOMYCIN SULFATE	CANCER	MEDICAL	
BOSULIF	CANCER	MEDICAL	
BOTOX	MISCELLANEOUS SPECIALTY CONDITIONS	MEDICAL	
BRAVELLE	INFERTILITY	PHARMACY 100% COPAY	
BUSULFEX	CANCER	MEDICAL	
CAMPATH	CANCER	MEDICAL	
CAMPTOSAR	CANCER	MEDICAL	
CAPRELSA	CANCER	MEDICAL	
CARBAGLU	*GENETIC DISORDER*	*MEDICAL - LIMITED*	

Name	Disease State	Coverage	Preferred Alternatives
		DISTRIBUTION	
CARBOPLATIN	CANCER	MEDICAL	
CARIMUNE	*IMMUNE DEFICIENCY*	*MEDICAL - LIMITED DISTRIBUTION*	
CAYSTON	*RESPIRATORY CONDITIONS*	*PHARMACY TIER 3- LIMITED DISTRIBUTION*	
CELLCEPT INJ	TRANSPLANT	MEDICAL	
CEPROTIN	*MISCELLANEOUS SPECIALTY CONDITIONS*	*MEDICAL- LIMITED DISTRIBUTION*	
CEREDASE	*ENZYME DEFICIENCIES*	*MEDICAL - LIMITED DISTRIBUTION*	
CEREZYME	ENZYME DEFICIENCIES	MEDICAL	
CERUBIDINE	CANCER	MEDICAL	
CETROTIDE	INFERTILITY	PHARMACY 100% COPAY	
CHENODAL	*MISCELLANEOUS SPECIALTY CONDITIONS*	*PHARMACY TIER 3- LIMITED DISTRIBUTION*	
CHORIONIC GONADOTROPIN	INFERTILITY	PHARMACY 100% COPAY	
CIMZIA	INFLAMMATORY CONDITIONS	PHARMACY TIER 3- STEP THERAPY RULES APPPLY	ENBREL OR HUMIRA - TIER 2
CINRYZE	HEREDITARY ANGIOEDEMA	MEDICAL	
CISPLATIN	CANCER	MEDICAL	
CLADRIBINE	CANCER	MEDICAL	
CLOLAR	CANCER	MEDICAL	
COPAXONE	MULTIPLE SCLEROSIS	PHARMACY - TIER 2	
COPEGUS	HEPATITIS C	PHARMACY - TIER 2	
CORIFACT	*HEMOPHILIA*	*MEDICAL - LIMITED DISTRIBUTION*	
COSMEGEN	CANCER	MEDICAL	
CYCLOPHOSPHAMIDE	CANCER	MEDICAL	
CYCLOSPORINE INJ	TRANSPLANT	MEDICAL	
CYSTAGON	*MISCELLANEOUS SPECIALTY CONDITIONS*	*PHARMACY TIER 3 - LIMITED DISTRIBUTION*	
CYTARABINE	CANCER	MEDICAL	
CYTOGAM	IMMUNE DEFICIENCY	MEDICAL	
DACARBAZINE	CANCER	MEDICAL	
DACOGEN	CANCER	MEDICAL	
DACTINOMYCIN	CANCER	MEDICAL	
DAUNORUBICIN HCL	CANCER	MEDICAL	
DAUNOXOME	CANCER	MEDICAL	
DDAVP (injection only)	ENDOCRINE DISORDERS	MEDICAL	
DEFEROXAMINE MESYLATE	IRON TOXICITY	MEDICAL	
DEPOCYT	CANCER	MEDICAL	
DESFERAL, MESYLATE	IRON TOXICITY	MEDICAL	
DESMOPRESSIN ACETATE INJ	OTHER ENDOCRINE DRUGS	MEDICAL	
DEXRAZOXANE	CANCER	MEDICAL	
DOCETAXEL	CANCER	MEDICAL	

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Name	Disease State	Coverage	Preferred Alternatives
DOXIL	CANCER	MEDICAL	
DOXORUBICIN HCL	CANCER	MEDICAL	
DYSPORT	*NEUROMUSCULAR CONDITIONS*	*MEDICAL- LIMITED DISTRIBUTION*	
EGRIFTA	*IMMUNE DEFICIENCY GROWTH HORMONE*	*PHARMACY- TIER 3 LIMITED DISTRIBUTION*	
ELAPRASE	*ENZYME DEFICIENCIES*	*MEDICAL - LIMITED DISTRIBUTION*	
ELELYSO	OTHER ENDOCRINE DRUGS	MEDICAL	
ELIGARD	CANCER	MEDICAL	
ELITEK	CANCER	MEDICAL	
ELLENCE	CANCER	MEDICAL	
ELOXATIN	CANCER	MEDICAL	
ELSPAR	CANCER	MEDICAL	
ENBREL	INFLAMMATORY CONDITIONS	PHARMACY - TIER 2	
ENOXAPARIN	ANTICOAGULANT	PHARMACY - AVAIL THRU RETAIL - TIER 1	
EPIRUBICIN	CANCER	MEDICAL	
EPOGEN	BLOOD CELL DEFICIENCY	PHARMACY - TIER 3	ARANESP OR PROCRIT – TIER 2
EPOPROSTENOL	*PULMONARY HYPERTENSION*	*MEDICAL- LIMITED DISTRIBUTION*	
ERBITUX	CANCER	MEDICAL	
ERIVEDGE	CANCER	MEDICAL	
ETHYOL	CANCER	MEDICAL	
ETOPOPHOS	CANCER	MEDICAL	
ETOPOSIDE	CANCER	MEDICAL	
EUFLEXXA	OSTEOARTHRITIS	MEDICAL	
EXJADE	*IRON TOXICITY*	*MEDICAL - LIMITED DISTRIBUTION*	
EYLEA	OPHTHALMIC CONDITIONS	MEDICAL	
FABRAZYME	ENZYME DEFICIENCIES	MEDICAL	
FASLODEX	CANCER	MEDICAL	
FEIBA NH	HEMOPHILIA	MEDICAL	
FEIBA VH IMMUNO	HEMOPHILIA	MEDICAL	
FIRAZYR	HEREDITARY ANGIOEDEMA	PHARMACY - TIER 3	
FIRMAGON	CANCER	MEDICAL	
FLEBOGAMMA/DIF	IMMUNE DEFICIENCY	MEDICAL	
FLOLAN	*PULMONARY HYPERTENSION*	*MEDICAL - LIMITED DISTRIBUTION*	
FLOXURIDINE	CANCER	MEDICAL	
FLUDARA	CANCER	MEDICAL	
FLUDARABINE PHOSPHATE	CANCER	MEDICAL	
FLUOROURACIL	CANCER	MEDICAL	
FOLLISTIM AQ	INFERTILITY	PHARMACY 100% COPAY	
FOLOTYN	*CANCER*	*MEDICAL - LIMITED DISTRIBUTION*	
FORTEO	OSTEOPOROSIS	PHARMACY - TIER 2	
FRAGMIN	ANTICOAGULANT	PHARMACY - AVAIL THRU RETAIL - TIER	

Name	Disease State	Coverage	Preferred Alternatives
		2	
FUDR	CANCER	MEDICAL	
FUSILEV	CANCER	MEDICAL	
FUZEON	IMMUNE DEFICIENCY	MEDICAL	
GAMASTAN S/D	IMMUNE DEFICIENCY	MEDICAL	
GAMMAGARD	IMMUNE DEFICIENCY	MEDICAL	
GAMMAKED	IMMUNE DEFICIENCY	MEDICAL	
GAMUNEX, -C	IMMUNE DEFICIENCY	MEDICAL	
GANIRELIX ACETATE	INFERTILITY	PHARMACY 100% COPAY	
GEMCITABINE HCL	CANCER	MEDICAL	
GEMZAR	CANCER	MEDICAL	
GENOTROPIN	GROWTH DEFICIENCY	MEDICAL	
GILENYA	MULTIPLE SCLEROSIS	PHARMACY- TIER 3	STEP THERAPY
GILOTRIF	CANCER	MEDICAL	
GLASSIA	RESPIRATORY CONDITIONS	MEDICAL	
GLEEVEC	CANCER	MEDICAL	
GONAL-F/RFF	INFERTILITY	PHARMACY 100% COPAY	
HALAVEN	CANCER	MEDICAL	
HELIXATE FS	HEMOPHILIA	MEDICAL	
HEMOFIL M	HEMOPHILIA	MEDICAL	
HEPAGAM B	HEPATITIS B	MEDICAL	NABI-HB - TIER 2
HERCEPTIN	CANCER	MEDICAL	
HIZENTRA	IMMUNE DEFICIENCY	MEDICAL	
HUMATE-P	HEMOPHILIA	MEDICAL	
HUMATROPE	GROWTH DEFICIENCY	MEDICAL	
HUMIRA	INFLAMMATORY CONDITIONS	PHARMACY - TIER 2	
HYALGAN	OSTEOARTHRITIS	MEDICAL	
HYCAMTIN	CANCER	MEDICAL	
HYPERHEP S/D	HEPATITIS B	MEDICAL	NABI-HB - TIER 2
HYPERRAB S/D	IMMUNE DEFICIENCY	MEDICAL	
HYPERRHO S/D	IMMUNE DEFICIENCY	MEDICAL	
IDAMYCIN PFS	CANCER	MEDICAL	
IDARUBICIN HCL	CANCER	MEDICAL	
IFEX	CANCER	MEDICAL	
IFOSFAMIDE	CANCER	MEDICAL	
IFOSFAMIDE/MESNA	CANCER	MEDICAL	
ILAIRS	AUTOINFLAMMATORY CONDITION	MEDICAL	
IMOGAM RABIES-HT	IMMUNE DEFICIENCY	MEDICAL	
INCIVEK	HEPATITIS C	MEDICAL	
INCRELEX	GROWTH DEFICIENCY	MEDICAL	
INFERGEN	HEPATITIS C	PHARMACY - TIER 3	INTRON A, ROFERON A-TIER 2
INLYTA	CANCER	MEDICAL	
INNOHEP	ANTICOAGULANT	PHARMACY - AVAIL THRU RETAIL - TIER 3	ENOXAPARIN-TIER 1, ARIXTRA OR FRAGMIN- TIER 2
INTRON A	CANCER	MEDICAL	
IPRIVASK	ANTICOAGULANT	PHARMACY - AVAIL THRU RETAIL - TIER 3	

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Name	Disease State	Coverage	Preferred Alternatives
IRESSA	CANCER	MEDICAL	
IRINOTECAN	CANCER	MEDICAL	
ISTODAX	CANCER	MEDICAL	
IXEMPRA	CANCER	MEDICAL	
JEVTANA	CANCER	MEDICAL	
KALBITOR	*HEREDITARY ANGIOEDEMA*	*MEDICAL - LIMITED DISTRIBUTION*	
KALYDECO	RESPIRATORY CONDITIONS	MEDICAL	
KEPIVANCE	*CANCER*	*MEDICAL - LIMITED DISTRIBUTION*	
KINERET	INFLAMMATORY CONDITIONS	PHARMACY - TIER 3	ENBREL - TIER 2
KOATE-DVI	HEMOPHILIA	MEDICAL	
KOGENATE FS	HEMOPHILIA	MEDICAL	
KRYSTEXXA	INFLAMMATORY CONDITIONS	MEDICAL	
KUVAN	PKU	MEDICAL	
KYPROLIS	CANCER	MEDICAL	
LETAIRIS	PULMONLARY HYPERTENSION	PHARMACY - TIER 3	
LEUCOVORIN CALCIUM	CANCER	MEDICAL	
LEUKINE	BLOOD CELL DEFICIENCY	MEDICAL	
LEUPROLIDE ACETATE	CANCER	MEDICAL	
LEUSTATIN	CANCER	MEDICAL	
LOVENOX	ANTICOAGULANT	PHARMACY TIER 3	ENOXAPARIN-TIER 1
LUCENTIS	OPTHALMIC CONDITIONS	MEDICAL	
LUMIZYME	*POMPE'S DISEASE*	*MEDICAL - LIMITED DISTRIBUTION*	
LUPRON	CANCER	MEDICAL	
LUPRON DEPOT	CANCER	MEDICAL	
LUVERIS	INFERTILITY	PHARMACY 100% COPAY	
MACUGEN	OPTHALMIC CONDITIONS	MEDICAL	
MELPHALAN	CANCER	MEDICAL	
MENOPUR	INFERTILITY	PHARMACY 100% COPAY	
MESNA	CANCER	MEDICAL	
MESNEX	CANCER	MEDICAL	
METHOTREXATE	CANCER	PHARMACY - TIER 1	
MICRHOGAM PLUS	IMMUNE DEFICIENCY	MEDICAL	
MITOMYCIN	CANCER	MEDICAL	
MITOXANTRONE, HCL	CANCER	MEDICAL	
MONOCLATE-P	HEMOPHILIA	MEDICAL	
MONONINE	HEMOPHILIA	MEDICAL	
MOZOBIL	BLOOD CELL DEFICIENCY	MEDICAL	
MUSTARGEN	CANCER	MEDICAL	
MYLOTARG	CANCER	MEDICAL	
MYOBLOC	MISCELLANEOUS SPECIALTY CONDITIONS	MEDICAL	
MYOZYME	ENZYME DEFICIENCIES	MEDICAL	
NABI-HB	HEPATITIS B	MEDICAL	
NAGLAZYME	ENZYME DEFICIENCIES	MEDICAL	
NAVELBINE	CANCER	MEDICAL	
NEULASTA	BLOOD CELL DEFICIENCY	PHARMACY - TIER 3	NEUPOGEN – TIER 2

Name	Disease State	Coverage	Preferred Alternatives
NEUMEGA	BLOOD CELL DEFICIENCY	MEDICAL	
NEUPOGEN	BLOOD CELL DEFICIENCY	PHARMACY - TIER 2	
NEXAVAR	CANCER	MEDICAL	
NIPENT	CANCER	MEDICAL	
NORDITROPIN	GROWTH DEFICIENCY	MEDICAL	
NOVANTRONE	CANCER	MEDICAL	
NOVAREL	INFERTILITY	PHARMACY 100% COPAY	
NOVOSEVEN/RT	HEMOPHILIA	MEDICAL	
NPLATE	BLOOD CELL DEFICIENCY	MEDICAL	
NULOJIX	TRANSPLANT	MEDICAL	
NUTROPIN, AQ, NUSPIN	GROWTH DEFICIENCY	MEDICAL	
OCTAGAM	IMMUNE DEFICIENCY	MEDICAL	
OCTREOTIDE ACETATE	ENDOCRINE DISORDERS	MEDICAL	
OFORTA	CANCER	MEDICAL	
OMNITROPE	GROWTH DEFICIENCY	MEDICAL	
ONCASPAR	CANCER	MEDICAL	
ONSOLIS	PAIN MANAGEMENT	PHARMACY – TIER 3	
ONTAK	CANCER	MEDICAL	
ONXOL	CANCER	MEDICAL	
ORENCIA	INFLAMMATORY CONDITIONS	INFUSION- MEDICAL SELF INJECTABLE- PHARMACY- TIER 3	
ORFADIN	*ENZYME DEFICIENCIES*	*MEDICAL - LIMITED DISTRIBUTION*	
ORTHOCLONE OKT-3	*TRANSPLANT*	*MEDICAL - LIMITED DISTRIBUTION*	
ORTHOVISC	OSTEOARTHRITIS	MEDICAL	
OVIDREL	INFERTILITY	PHARMACY 100% COPAY	
OXALIPLATIN	CANCER	MEDICAL	
PACLITAXEL	CANCER	MEDICAL	
PAMIDRONATE DISODIUM	CANCER	MEDICAL	
PANRETIN	MISCELLANEOUS SPECIALTY CONDITIONS	MEDICAL	
PEGASYS	HEPATITIS C	PHARMACY –TIER 2	
PEG-INTRON/REDIPEN	HEPATITIS C	PHARMACY –TIER 2	
PERJETA	CANCER	MEDICAL	
PHOTOFRIN	CANCER	MEDICAL	
PLENAXIS	CANCER	MEDICAL	
PREGNYL	INFERTILITY	PHARMACY 100% COPAY	
PRIALT	*MISCELLANEOUS SPECIALTY CONDITIONS*	*MEDICAL - LIMITED DISTRIBUTION*	
PRIVIGEN	IMMUNE DEFICIENCY	MEDICAL	
PROCRIT	BLOOD CELL DEFICIENCY	PHARMACY - TIER 2	
PROFILNINE SD	HEMOPHILIA	MEDICAL	
PROGESTERONE IN OIL	INFERTILITY	PHARMACY 100% COPAY	
PROGRAF	*TRANSPLANT*	*INFUSION-MEDICAL - LIMITED DISTRIBUTION*	

Name	Disease State	Coverage	Preferred Alternatives
		ORAL- PHARMACY-TIER 2	
PROLASTIN/C	*RESPIRATORY CONDITIONS*	*MEDICAL - LIMITED DISTRIBUTION*	
PROLEUKIN	CANCER	MEDICAL	
PROLIA	OSTEOPOROSIS	PHARMACY – TIER 3	
PROMACTA	BLOOD CELL DEFICIENCY	PHARMACY – TIER 3	
PROVENGE	*IMMUNE DEFICIENCY*	*MEDICAL- LIMITED DISTRIBUTION*	
PULMOZYME	RESPIRATORY CONDITIONS	PHARMACY - TIER 3	
REBETOL	HEPATITIS C	PHARMACY - TIER 1	
REBIF	MULTIPLE SCLEROSIS	PHARMACY - TIER 2	
RECLAST	PAGET'S DISEASE/ OSTEOPORSIS	MEDICAL	ALENDRONATE-TIER 1
RECOMBINATE	HEMOPHILIA	MEDICAL	
REFACTO	HEMOPHILIA	MEDICAL	
REFLUDAN	ANTICOAGULANT	PHARMACY - AVAIL THRU RETAIL- TIER 3	ENOXAPARIN-TIER 1, ARIXTRA OR FRAGMIN- TIER 2
REMICADE	INFLAMMATORY CONDITIONS	MEDICAL	
REMODULIN	*PULMONARY HYPERTENSION*	*PHARMACY - TIER 3 - LIMITED DISTRIBUTION*	
REPRONEX	INFERTILITY	PHARMACY 100% COPAY	
RETROVIR IV	IMMUNE DEFICIENCY	MEDICAL	
REVATIO	PULMONARY HYPERTENSION	PHARMACY - TIER 3	
REVLIMID	CANCER	MEDICAL	
RHOGAM PLUS	IMMUNE DEFICIENCY	MEDICAL	
RHOPHYLAC	IMMUNE DEFICIENCY	MEDICAL	
RIBAPAK	HEPATITIS C	PHARMACY - TIER 1	
RIBASPHERE	HEPATITIS C	PHARMACY - TIER 1	
RIBATAB	HEPATITIS C	PHARMACY - TIER 1	
RIBAVIRIN- ORAL	HEPATITIS C	PHARMACY - TIER 1	
RILUTEK	MISCELLANEOUS SPECIALTY CONDITIONS	MEDICAL	
RITUXAN	CANCER	MEDICAL	
SABRIL	ANTICONVULSANT	PHARMACY – TIER 3	
SAIZEN	GROWTH DEFICIENCY	MEDICAL	
SANDOSTATIN, LAR	ENDOCRINE DISORDERS	MEDICAL	
SEROSTIM	GROWTH DEFICIENCY	MEDICAL	
SIMPONI	INFLAMMATORY CONDITIONS	PHARMACY – TIER 3	
SIMULECT	TRANSPLANT	MEDICAL	
SOLIRIS	MISCELLANEOUS SPECIALTY CONDITIONS	MEDICAL	
SOMATULINE DEPOT	ENDOCRINE DISORDERS	PHARMACY – TIER 3	
SOMAVERT	*GROWTH DEFICIENCY*	*MEDICAL - LIMITED DISTRIBUTION*	
SPRYCEL	CANCER	MEDICAL	
STELARA	INFLAMMATORY CONDITIONS	PHARMACY – TIER 3	
STIVARGA	CANCER	MEDICAL	
SUCRAID	ENZYME DEFICIENCY	PHARMACY – TIER 2	
SUPARTZ	OSTEOARTHRITIS	MEDICAL	

Name	Disease State	Coverage	Preferred Alternatives
SUPPRELIN LA	ENDOCRINE DISORDERS	MEDICAL	
SUTENT	CANCER	MEDICAL	
SYLATRON	CANCER	MEDICAL	
SYNAGIS	RSV PREVENTION	MEDICAL	
SYNVISC, -ONE	OSTEOARTHRITIS	MEDICAL	
TARCEVA	CANCER	MEDICAL	
TASIGNA	CANCER	MEDICAL	
TAXOTERE	CANCER	MEDICAL	
TEMOZOLOMIDE	CANCER	MEDICAL	
TESTOPEL	*HYPOTESTOSTERONE*	*MEDICAL - LIMITED DISTRIBUTION*	
TEV-TROPIN	GROWTH DEFICIENCY	MEDICAL	
THALOMID	CANCER	MEDICAL	
THERACYS	CANCER	MEDICAL	
THIOTEPA	CANCER	MEDICAL	
THYMOGLOBULIN	*TRANSPLANT*	*MEDICAL - LIMITED DISTRIBUTION*	
THYROGEN	CANCER	MEDICAL	
TOBI	RESPIRATORY CONDITIONS	PHARMACY - TIER 3	
TOPOSAR	CANCER	MEDICAL	
TORISEL	CANCER	MEDICAL	
TRACLEER	PULMONARY HYPERTENSION	PHARMACY - TIER 3	
TREANDA	CANCER	MEDICAL	
TRELSTAR, -DEPOT	CANCER	MEDICAL	
TRELSTAR LA	CANCER	MEDICAL	
TRISENOX	CANCER	MEDICAL	
TYKERB	CANCER	MEDICAL	
TYSABRI	MULTIPLE SCLEROSIS	MEDICAL	
TYVASO	PULMONARY HYPERTENSION	MEDICAL	
VANDETANIB	CANCER	MEDICAL	
VANTAS	CANCER	MEDICAL	
VECTIBIX	CANCER	MEDICAL	
VELCADE	CANCER	MEDICAL	
VELETRI	*PULMONARY HYPERTENSION*	*MEDICAL - LIMITED DISTRIBUTION*	
VENTAVIS	*PULMONARY HYPERTENSION*	*MEDICAL - LIMITED DISTRIBUTION*	
VICTRELIS	HEPATITIS C	MEDICAL	
VIDAZA	CANCER	MEDICAL	
VINBLASTINE SULFATE	CANCER	MEDICAL	
VINCRISTINE SULFATE	CANCER	MEDICAL	
VINORELBINE TARTRATE	CANCER	MEDICAL	
VISUDYNE	OPHTHALMIC CONDITIONS	MEDICAL	
VIVAGLOBIN	IMMUNE DEFICIENCY	MEDICAL	
VIVITROL	MISCELLANEOUS CNS DISORDER	MEDICAL	
VOTRIENT	CANCER	MEDICAL	
VPRIV	RESPIRATORY CONDITIONS	MEDICAL	
VUMON	CANCER	MEDICAL	
WINRHO SDF	IMMUNE DEFICIENCY	MEDICAL	
XELJANZ	INFLAMMATORY CONDITIONS	TIER 2	
XELODA	CANCER	MEDICAL	
XENAZINE	MISCELLANEOUS CNS DISORDER	MEDICAL	

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Name	Disease State	Coverage	Preferred Alternatives
XEOMIN	MISCELLANEOUS CNS DISORDER	MEDICAL	
XGEVA	CANCER	MEDICAL	
XIAFLEX	MISCELLANEOUS SPECIALTY CONDITIONS	MEDICAL	
XOLAIR	RESPIRATORY CONDITIONS	MEDICAL	
XGEVA	ENDOCRINE CONDITIONS	MEDICAL	
XTANDI	CANCER	MEDICAL	
XYNTHA	HEMOPHILIA	MEDICAL	
XYREM	*MISCELLANEOUS SPECIALTY CONDITIONS*	*PHARMACY – TIER 2 - LIMITED DISTRIBUTION*	
YERVOY	CANCER	MEDICAL	
ZALTRAP	CANCER	MEDICAL	
ZANOSAR	CANCER	MEDICAL	
ZAVESCA	ENZYME DEFICIENCIES	MEDICAL	
ZEMAIRA	*RESPIRATORY CONDITIONS*	*MEDICAL - LIMITED DISTRIBUTION*	
ZENAPAX	TRANSPLANT	MEDICAL	
ZEVALIN	CANCER	MEDICAL	
ZINECARD	CANCER	MEDICAL	
ZOLADEX	CANCER	MEDICAL	
ZOLINZA	CANCER	MEDICAL	
ZOMETA	CANCER	MEDICAL	
ZORBTIVE	GROWTH DEFICIENCY	MEDICAL	
ZYTIGA	CANCER	MEDICAL	

Pharmacy Operations Overview

CuraScript provides unsurpassed specialty pharmacy services through specialty pharmacies located throughout the U.S. Main distribution centers are located in Orlando, Florida; Indianapolis, Indiana; and New Castle, Delaware.

ESI also operate specialty pharmacies in the following locations:

- Brewster, New York
- Houston, Texas
- Oldsmar, Florida
- Omaha, Nebraska
- Pleasanton, California

ESI's locations:

- Provide operational redundancy and the ability to serve unique plan sponsor reimbursement needs
- Enable us to serve plans all over the country
- Ensure timely deliveries, adequate stocking of medications, and the flexibility to successfully manage emergency situations

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CuraScript's service model reflects the heightened level of patient support required for specialty products. Our patient care advocates serve as a patient's primary contact and proactively coordinate ongoing prescription needs, including managing the delivery of products, maintaining insurance authorizations, and monitoring adherence. In addition to patient care advocates, our pharmaceutical care management team consists of nurses, social workers, and pharmacists who provide the expertise and support necessary for appropriate clinical management.

Specialty Pharmacy Benefit Management

For more than 25 years, Express Scripts has been a leader in trend and utilization management of drugs billed through the pharmacy benefit. As the first pharmacy benefit manager to publish a drug trend report and the first to hold an Outcomes conference for plan sponsors, Express Scripts is a thought leader in the industry. To continue this legacy, we apply the latest specialty pharmacy benefit management tools to reduce the trend of specialty drugs billed through the pharmacy benefit. Our specialty trend management programs include:

- Specialty Step Management
- Drug Quantity Management
- Care Continuum (includes utilization management, site of care management, and reimbursement management)

Specialty Utilization Management Programs

Express Scripts' Specialty Step Management, Drug Quantity Management, and Prior Authorization programs use clinical protocols to manage appropriate and cost-effective utilization of specialty medications. Additional program details are included below.

Specialty Step Management

Specialty drug spend is predicted to grow exponentially over the next several years. In addition, as more specialty drugs are approved, utilization in some traditional classes will transition to the specialty market. Additionally, as more specialty drugs are approved, utilization in some traditional classes will transition to the specialty market.

Specialty Step Management responds to this issue by reducing wasteful specialty spend and promoting clinically appropriate, cost-effective therapies.

Our Specialty Step Management program enhances our existing utilization management programs (Prior Authorization and Step Therapy) through the use of traditional medication cost-containment programs. By tailoring these trend management strategies to the specialty landscape, Specialty Step Management provides NDPERS with the tools to significantly reduce your specialty trend while also maximizing health outcomes.

Specialty Step Management addresses several of the most costly specialty therapy classes:

- Inflammatory Conditions
- Multiple Sclerosis
- Growth Hormones
- Erythroid StimulantsInfertility
- Pulmonary Arterial Hypertension (PAH)
- Alpha-1 Proteinase Inhibitors
- Cryopyrin-Associated Periodic Syndrome (CAPS)
- Prostate Cancer GnRH Analogs

Drug Quantity Management

Our Drug Quantity Management program supports safe, effective, and cost-efficient use of prescription drugs while giving patients access to quality care. Drug Quantity Management criteria can prevent unnecessary costs when there is not enough evidence to support using a medication at doses higher than Food and Drug Administration-approved labeling.

For example, Avonex® is dosed once weekly for multiple sclerosis patients. However, some physicians believe that patients who inject Avonex twice weekly see greater benefits from the medication and therefore increase their dosage, even though there is no solid evidence to support its use twice weekly. An additional weekly dose of Avonex doubles the annual cost of the medication from around $20,000 per year to $40,000 per year. Drug Quantity Management criteria would avoid this wasted spend.

Prior Authorization

Express Scripts' Prior Authorization department administers specialty prior authorization requests.

We offer more than 50 Prior Authorization programs for specialty medications, many of which are integrated into the Base, Supplemental, Pharmacogenomics, and Proactive Prior Authorization lists. Optional programs are available for individual medications. We also offer a centralized list for clients that would like automatic updates for all specialty products on the Base, Supplemental, and Optional lists.

Furthermore, clients who use our specialty pharmacy exclusively and would like to manage their specialty spending to a greater extent should consider our Specialty Prior Authorization Continuation Criteria. The authorization criteria under this program are the same as those for standard specialty prior authorizations. However, the duration of initial approval for prior authorizations with Continuation Criteria is shorter than under the standard program. Re-approval under the Continuation Criteria depends on response to the medication during the initial treatment phase. Express Scripts can manage the initial review and approval process, as well as administer re-approvals.

Specialty Care Management

In addition to the trend management programs previously described, our Specialty Care Management programs help reduce waste and improve health by increasing therapy

adherence. These programs use evidence-based guidelines and drug information to provide critical patient education and ongoing support.

Our suite of Specialty Care Management programs includes:

Program	Disease State	Program Objective	Enrollment Criteria
Asthma	Asthma	To improve adherence to medications and prevent recurrent exacerbations	Patients using Xolair™ have the option to enroll when their prescriptions are filled at CuraScript
Bleeding Disorders Logic®	Hemophilia and von Willebrand disease	To support the needs of hemophilia patients, clients, and providers in the appropriate management of factor products and related outcomes of hemophilia	All patients using factor products have the option to enroll when their prescriptions are filled through our specialty pharmacy
Crohn's Disease	Crohn's disease	To increase adherence through patient education and strong relationships between patients and their healthcare team	Patients using specific Crohn's disease agents have the option to enroll when their prescriptions are filled at CuraScript
Cystic Fibrosis	Cystic fibrosis	To increase adherence and improve respiratory symptoms	Patients using specific cystic fibrosis agents have the option to enroll when their prescriptions are filled at CuraScript
GrowthLogic℠	Growth hormone deficiency	To increase adherence and prevent growth retardation, delayed puberty, and abnormal height	Patients using specific growth hormone agents have the option to enroll when their prescriptions are filled at CuraScript
HEPLogic®	Hepatitis C	To improve patient adherence to the prescribed therapy regimen to achieve sustained viral response	All patients taking self-injectable interferons or ribavirin therapy have the option to enroll when their prescriptions are filled through our specialty pharmacy
HIVLogic℠	Human immunodeficiency virus	To avoid the emergence of drug-resistant virus and disease progression through increased adherence	All patients with HIV have the option to enroll when their prescriptions are filled through our specialty pharmacy
Iron Overload	Iron overload	To provide optimal clinical management and care to patients receiving oral medications for iron overload	All patients using oral medication for iron overload have the option to enroll when their prescriptions are filled through our specialty pharmacy

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Program	Disease State	Program Objective	Enrollment Criteria
MSLogic®	Multiple sclerosis	To improve patient adherence to the prescribed therapy regimen to reduce exacerbations in the patient population	All patients taking self-injectable medications for multiple sclerosis have the option to enroll when their prescriptions are filled through our specialty pharmacy
Oncology Care	Cancer	To provide optimal clinical management and care to oncology patients and prevent disease progression	All patients using oral oncology agents have the option to enroll when their prescriptions are filled through our specialty pharmacy
PAHLogic®	Pulmonary arterial hypertension	To prevent pulmonary disease progression and complications and support the physician-patient relationship and plan of care	All pulmonary arterial hypertension patients have access to complete care, the full range of therapies, and clinicians with expertise in this disease state
PsoriasisLogic®	Psoriasis and psoriatic arthritis	To improve patient adherence to the prescribed therapy regimen to reduce the amount of body surface affected and severity of the psoriasis plaques, as well as to slow the progression of joint damage and improve joint function in persons with psoriatic arthritis	All patients taking self-injectable medications for psoriasis or psoriatic arthritis have the option to enroll when their prescriptions are filled through our specialty pharmacy
RALogic®	Rheumatoid arthritis	To improve patient adherence to the prescribed therapy regimen to slow the progression of joint damage and improve the average Modified Health Assessment Questionnaire score for the patient population	All patients using self-injectable rheumatoid arthritis medications have the option to enroll when their prescriptions are filled through our specialty pharmacy
RSVLogic®	Respiratory syncytial virus prevention	To reduce the number of hospitalizations and mortalities by improving therapy adherence	All caregivers of patients receiving Synagis therapy have the option to enroll when the patients' prescriptions are filled through our specialty pharmacy
TransplantLogic℠	Not applicable. This program is for patients who have received an organ transplant.	To prevent rejection of transplanted organs through increased adherence to anti-rejection medications	Patients using specific immunosuppressant agents have the option to enroll when their prescriptions are filled at CuraScript

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Network Accessibility and Disruption

79. Submit a current listing of the participating pharmacies in North Dakota.

Please refer to **Attachment F** for a listing of participating pharmacies in North Dakota.

80. How are pharmacies selected for inclusion in your network? Would your organization be willing to contract with additional pharmacies if there are geographic locations where participants live but which do not have access to one of your pharmacies?

Sanford Health Plan is committed to the value local pharmacies provide to the communities we serve. Express Scripts negotiates competitive network pricing for our plan sponsors while building and maintaining stable networks and services through collaborative and strategic relationships with retail pharmacies.

Express Scripts integrates convenient network pharmacy programs with superior management systems to provide national provider networks that offer:

Client Support

- Network design consultation
- Flexible benefit designs
- CMS-compliant Medicare and Medicaid networks
- Workers' Compensation network
- Management reports
- Member eligibility control

Reduced Cost

- Discounted drug costs
- Limited provider networks to maximize savings

Clinical Expertise

- Online claims adjudication and drug utilization review
- Immunization programs
- Medication therapy management
- Pharmacist access to the Patient Care Contact Center, Pharmacy Help Desk, and Express-Scripts.com for Pharmacists

Convenience

- Process to easily add pharmacies based on member access needs
- Stable networks with low turnover
- Online pharmacy locator

ESI reduces unit costs for prescription drugs by negotiating discount rates with retail pharmacies across the country, increasing the use of preferred products, promoting generics, and encouraging formulary adherence. Additionally, we have built our value-enhanced networks so that members have convenient access to local pharmacies while limiting the number of participating pharmacies to maximize discounts for NDPERS.

If concerns related to network access are identified, Express Scripts can contract with additional pharmacies that meet our URAC-sanctioned credentialing requirements and contract terms. We can add new pharmacies within three business days after we have

received certification, a completed and signed contract from the pharmacy, and verification that all information is correct, which may take up to five business days.

81. Indicate which major chain stores are not included in your proposed network for NDPERS.

Walgreens does not participate in the network.

Medicare Part D

82. Describe the ability of your organization to provide Medicare Part D coverage for Medicare eligible retirees enrolled in the NDPERS group health insurance program. Identify any subcontractor that would be used to provide Medicare Part D coverage to the NDPERS Medicare eligible retirees and note that NDPERS reserves the right to approve the subcontractor. Also identify what type of plan would be used (e.g. fully-insured PDP, 800-Series EGWP, Direct-Contract EGWP)

Sanford Health Plan is committed to provide a Part D Plans through Express Scripts, Inc. using a EGWP arrangement.

HDHP/HSA

83. Describe how your organization will do the administration of the HSA option. What details are provided to individuals that select this option, the name of the service vendor and any other applicable information.

Sanford Health Plan currently has a relationship with Evolution1 for our HRA/HSAs. The 1Cloud HSA Solution is a true multi-account solution for HSAs – all account types are available on a single platform and service experience, debit card, and mobile applications.

It provides a comprehensive, one-stop, compliant HSA administration capability the includes both cash accounts and investment options. Other benefits include:

- A private labeled custodian option with secure, FDIC-insured deposits at HealthcareBank, a division of Bell State Bank & Trust, a $4B financial institution
- An additional revenue source with an indexed reimbursement on the balance of HSA cash accounts to the administrator.
- A flexible fee structure, so partners can set fees according to their markets and sales strategies.

The Employer Portal provides:

- Secure access to data and reports, submit changes and files, and proactively schedule contributions

SANFORD HEALTH PLAN

- Online lookup helps employers respond to employees' questions and issues.
- Over 50 standard employer reports and notifications, as well as custom reports, if available, are accessible via email and/or secure, self-service Employer Portal
- Use the Consumer Data Exchange to integrate with 1Cloud for exchanging eligibility files, or enroll employees through the Employer Portal.

Account Funding

Multiple options are available for funding accounts, including election-based scheduled contributions, ACH funding, and file-based contribution submission via Consumer Data Exchange. Or use Employer Portal to directly set up recurring contribution schedule, and load payroll deductions and employer contributions.

1Cloud also offers an Integrated debit card that provides:

- Real-time Integration - Account Balances in Sync
- All purses on one card - HSA, FSA, Limited-Purpose FSA
- Stacking Order: FSA > HSA
- Regulatory Compliance
- Merchant Code Restrictions
- FSA, HRA, optional for HSA
- IIAS Compliant
- Auto-Substantiation
- IIAS, Copayment Matching, Carrier Matching,

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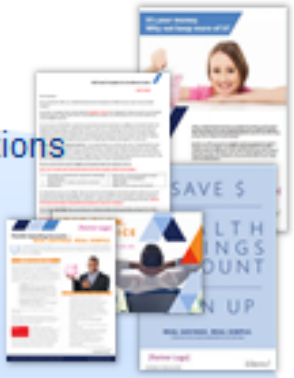
Consumer Experience

Mobile

Mobile app lets tech-savvy consumers manage their CDH accounts right from their phone.

Automated Communications

Over 10 statements and notifications – all accessible via e-mail, consumer portal, and mail when necessary.



1cloud by Evolution1

Consumer Portal

Robust, branded portal empowers consumers, providing everything they need to know about their account, with an industry-leading design that enables quick and easy navigation of content.

Flexible Payment Options

Consumer can choose from:

- Debit card, which increases consumer satisfaction by reducing paperwork.
- Consumer-initiated Payment on Consumer Portal
- Claims Exchange with auto-pay or Expense Tracker

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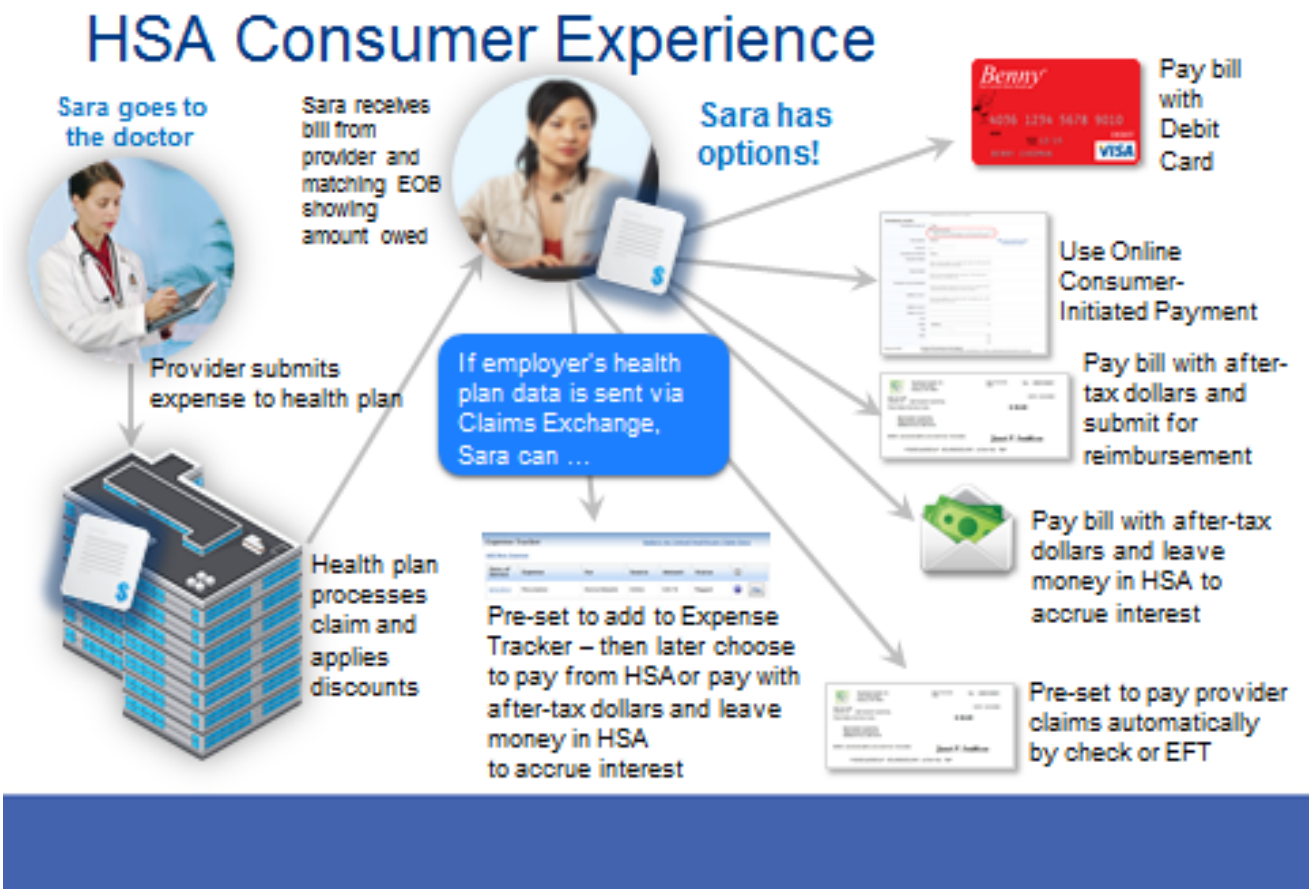
SANFORD HEALTH PLAN



SANFORD HEALTH PLAN

Convenient Self-Service Tools

Additionally, Sanford Health Plan can interface with ABG (or a vendor of the State's preference) to track and transmit credits NDPERS may want to contribute to an HSA account as a result of an employee's participation in a wellness program or meeting certain wellness standards as part of a bona fide wellness program.

Economy to be effected

84. Please indicate if you will have an office in North Dakota and where most of the work on this contract will be done?

Sanford Health Plan will consider opening service offices to include account representatives in the Bismarck and Fargo regions. Health coaches and/or case managers will be based in existing Sanford locations to support the disease management and wellness programs. However, claims administration and operations will continue to occur in the centralized Sioux Falls office.

85. Please identify the number of employees you will employ in North Dakota pursuant to this contract

As described in Section 18 of this proposal, Sanford Health Plan projects the need to hire nearly 100 FTEs to start with approximately 20 of the positions located in North Dakota.

86. Of your total administrative fee please estimate the amount that will be spent in North Dakota and the amount that will be spent outside the state.

Sanford Health Plan estimates that approximately $15M will be spent over the biennium within North Dakota.

Cost Proposal Exhibits

Please refer to the cost proposal exhibits included under separate cover with this RFP, directed to Deloitte Consulting:

- Medical & Rx Premiums (D1.1)
- Medical & Rx Premium Development (D1.2)
- Traditional Rx Terms (D1.3)
- Transparent (Pass-through) Rx Terms (D1.4)
- Medical (Only) Premiums (D1.5)
- Medical (Only) Premium Development (D1.6)
- Medicare Part D Group Prescription Drug Plan (PDP) Premiums (D2.1)
- Medicare Part D Group Prescription Drug Plan (PDP) Premium Development (D2.2)
- ACA Requirements (D3)

Sample Contract & Administrative Services Agreement

Please refer to the contract/ASA deviations exhibit included under separate cover with this RFP:

1. Exhibit F1 – Contract/ASA deviations and exceptions and proposed alternative language.
2. Exhibit F2 - Deviations from other RFP requirements
3. Exhibit F3 – Redline version of the sample contract/ASA reflecting the deviations identified in Exhibit F1.

SANFORD HEALTH PLAN

Face sheet

Name of Proposer's Firm:	Sanford Health Plan
Federal Tax I.D. Number:	91-1842494
Principal Place of Business:	Sioux Falls, SD
Address:	300 Cherapa Place, Suite 201
City:	Sioux Falls
State and Zip:	South Dakota, 57103
Contact Person:	Lisa M. Carlson
Title:	Director, Planning & Regulation
Telephone:	(605) 328-6859
Fax:	(605) 328-6811
E-mail address:	lisa.m.carlson@sanfordhealth.org

Minimum Requirements for Administrative Services Checklist

Minimum Requirements Statement	Response
Electronic Data Collection and Reporting Requirements: Respondents must, at a minimum, meet the data collection and reporting requirements described in Section 1 under Reporting Requirements of the RFP.	Sanford Health Plan agrees to meet this requirement.
Vendor must be able to take current electronic enrollment file (containing member eligibility) at no cost.	Sanford Health Plan agrees to meet this requirement.
Effective Date of Coverage: Respondents must be able to provide required coverages and services by July 1, 2015 and January 1 2016 for the PDP.	Sanford Health Plan agrees to meet this requirement.
Licensure: Respondents must have all applicable licenses required by North Dakota or agree to obtain necessary licensure prior to the effective dates of coverage.	Sanford Health Plan agrees to meet this requirement.
Term of Contract: NDPERS is required by state statute to solicit bids for medical benefit coverage for a specified term for a fully-insured arrangement and every other biennium for a self-funded arrangement. NDPERS has determined that the specified term for fully-insured arrangement shall be six years subject to two year renewals, however, NDPERS reserves the right to extend the agreement subject to negotiation with the successful vendor if the Board deems it necessary.	Sanford Health Plan agrees to meet this requirement.
Premium Rate Guarantees: For all insured proposals premium rates must be guaranteed for a period of two years, from July 1, 2015 to June 30, 2017. PDP rates will be developed each year based upon the federal subsidy.	Sanford Health Plan agrees to meet this requirement.
Group PDP product: Ability to offer a group PDP product meeting the requirements outlined in the RFP	Sanford Health Plan agrees to meet this requirement.
PDP rates: Must be submitted to PERS by September of each year.	Sanford Health Plan agrees to meet this requirement.
Non-Medicare Retirees: Rates are governed by state statue. Non-Medicare retiree single rate is 150% of the active member single rate; the rate for a non-Medicare retiree plus one is twice the non-Medicare single rate, and the rate for a non-Medicare retiree plus two or more dependents is two and one-half times the non-Medicare retiree single rate.	Sanford Health Plan agrees to meet this requirement.

Renewals: Renewals must be submitted to NDPERS in August of the year preceding the contract renewal date and in September of each year for the PDP.	Sanford Health Plan agrees to meet this requirement.
Contract Termination: Respondent's contract termination provision may not require more than 120-day notice and can occur only at renewal. NDPERS can terminate coverage at any time.	Sanford Health Plan agrees to meet this requirement.
Replicate Coverage: Respondent must replicate the existing coverage and financial terms for two years including an HSA arrangement. Variances and exceptions to existing coverage can be offered in Appendix F item F2.	Sanford Health Plan agrees to meet this requirement with the exceptions as noted herein.
Legislative Compliance: Respondents agree to comply with all provisions of the Health Insurance Portability Act of 1996 including, but not limited to providing certificates of creditable coverage. Respondents must also be in compliance with all HIPAA Privacy and HIPAA EDI requirements and be able to conduct all applicable employer/plan sponsor and provider transactions consistent with those requirements. Respondents will be expected to meet HIPAA security requirements when applicable to NDPERS. Respondents will also be expected to be in compliance with all ACA requirements	Sanford Health Plan agrees to meet this requirement.
Transition Management: Respondents agree, should they be selected, they will proactively manage the transition of coverage (e.g. claim accumulators, lifetime maximums, etc.) from the subsequent carrier.	Sanford Health Plan agrees to meet this requirement.
Administration: Respondents must agree to comply with existing administration of NDPERS. Any modifications needed to accommodate NDPERS data will be done at the vendor's own expense.	Sanford Health Plan agrees to meet this requirement.
Audit: NDCC 54-52-05 (10) relating to the audit authority of NDPERS.	Sanford Health Plan agrees to meet this requirement.
North Dakota Legislation Requirements: Respondent must meet all requirements in the North Dakota Century Code including 54-52.1 and all requirements in the North Dakota Administrative Code including 71-03. Specific recognition of 54-52.1-12 should be acknowledged.	Sanford Health Plan agrees to meet this requirement.
Ability to meet the specifications outlined in the RFP unless specifically noted	Sanford Health Plan agrees to meet this requirement.
Premium rates must be divisible by two.	Sanford Health Plan agrees to meeting this requirement.
Subject matter experts and other appropriate personnel will be available to attend board meetings, legislative hearings, etc. as needed	Sanford Health Plan agrees to meeting this requirement.

Affidavit of Non-collusion

I swear (or affirm) under the penalty of perjury:

1. That I am the Responder (if the Responder is an individual), a partner in the company (if the Responder is a partnership), or an officer or employee of the responding corporation having authority to sign on its behalf (if the Responder is a corporation);

2. That the attached proposal submitted in response to the Group Medical Coverage Request for Proposals has been arrived at by the Responder independently and has been submitted without collusion with and without any agreement, understanding or planned common course of action with, any other Responder of materials, supplies, equipment or services described in the Request for Proposal, designed to limit fair and open competition;

3. That the contents of the proposal have not been communicated by the Responder or its employees or agents to any person not an employee or agent of the Responder and will not be communicated to any such persons prior to the official opening of the proposals; and

4. That I am fully informed regarding the accuracy of the statements made in this affidavit.

Responder's Firm Name: Sanford Health Plan

Authorized Signature: Lisa M. Carlson

Date: Sept 2, 2014

Subscribed and sworn to me this _____ day of _____

Notary Public: _____

My commission expires: _____

Conflicts of Interest Statement

Conflicts of interest list	
Responders must provide a list of all entities with which it has relationships that create, or appear to create, a conflict of interest with the work that is contemplated in this request for proposals. The list should indicate the name of the entity, the relationship, and a discussion of the conflict.	There are no conflicts of interest to report.

Compliance with Federal and State Laws Form

NDPERS — Federal and State Law Compliance Certification

1. The company shown below is or will be in compliance with Federal and State laws and does not knowingly violate North Dakota or United States Laws. The company shown below will obtain this certification from all subcontractors who will participate in the performance of this contract; and

I certify that the company shown below is in compliance with items 1 above and that I am authorized to sign on its behalf.

Name of Company: Sanford Health Plan Date: 9/3/14

Authorized Signature: Ruth A. Krystopolski Telephone Number: (605) 328-6801

Printed Name: Ruth A. Krystopolski Title: President

STATE OF NORTH DAKOTA

LOCATION OF SERVICE DISCLOSURE AND CERTIFICATION

LOCATION OF SERVICE DISCLOSURE

Check all that apply:

- ❒ The services to be performed under the anticipated contract as specified in our proposal will be performed ENTIRELY within the State of North Dakota.
- ❒ The services to be performed under the anticipated contract as specified in our proposal entail work ENTIRELY within another state within the United States.
- ☑ The services to be performed under the anticipated contract as specified in our proposal will be performed in part within North Dakota and in part within another state within the United States.
- ❒ The services to be performed under the anticipated contract as specified in our proposal DO involve work outside the United States. Below (or attached) is a description of
  - (1) the identity of the company (identify if subcontractor) performing services outside the United States;
  - (2) the location where services under the contract will be performed; and
  - (3) the percentage of work (in dollars) as compared to the whole that will be conducted in each identified foreign location.

CERTIFICATION

By signing this statement, I certify that the information provided above is accurate and that the location where services have been indicated to be performed will not change during the course of the contract without prior, written approval from the State of North Dakota.

Name of Company: Sanford Health Plan

Authorized Signature: Ruth A. Krystopolski

Printed Name: Ruth A. Krystopolski

Title: President

Date: 9/3/14 Telephone Number: (605) 328-6801

Sanford Health Plan

Statutory-Basis Financial Statements as of and for the Years Ended December 31, 2013 and 2012, Supplemental Schedules as of and for the Year Ended December 31, 2013, Independent Auditors' Report, Qualifications Letter, and Internal Control Letter

SANFORD HEALTH PLAN

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Deloitte.

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USA

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Fax: +1 612 397 4450
www.deloitte.com

INDEPENDENT AUDITORS' REPORT

Audit Committee and Management
Sanford Health Plan
Sioux Falls, South Dakota

We have audited the accompanying statutory-basis financial statements of Sanford Health Plan (SHP or the "Company"), which comprise the statutory-basis statements of admitted assets, liabilities, and capital and surplus as of December 31, 2013 and 2012, and the related statutory-basis statements of revenue and expenses and capital and surplus, and cash flows for the years then ended, and the related notes to the statutory-basis financial statements.

Management's Responsibility for the Statutory-Basis Financial Statements

Management is responsible for the preparation and fair presentation of these statutory-basis financial statements in accordance with the accounting practices prescribed or permitted by the South Dakota Department of Commerce and Regulation, Division of Insurance. Management is also responsible for the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error.

Auditors' Responsibility

Our responsibility is to express an opinion on these statutory-basis financial statements based on our audits. We conducted our audits in accordance with auditing standards generally accepted in the United States of America. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the statutory-basis financial statements are free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the statutory-basis financial statements. The procedures selected depend on the auditor's judgment, including the assessment of the risks of material misstatement of the statutory-basis financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the Company's preparation and fair presentation of the statutory-basis financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the Company's internal control. Accordingly, we express no such opinion. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluating the overall presentation of the statutory-basis financial statements.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

Opinion

In our opinion, the statutory-basis financial statements referred to above present fairly, in all material respects, the admitted assets, liabilities, and capital and surplus of SHP as of December 31, 2013 and 2012, and the results of its operations and its cash flows for the years then ended in accordance with the accounting practices prescribed or permitted by the South Dakota Department of Commerce and Regulation, Division of Insurance described in Note 1 to the statutory-basis financial statements.

Basis of Accounting

We draw attention to Note 1 of the statutory-basis financial statements, which describes the basis of accounting. As described in Note 1 to the statutory-basis financial statements, the statutory-basis financial statements are prepared by SHP using accounting practices prescribed or permitted by the South Dakota Department of Commerce and Regulation, Division of Insurance, which is a basis of accounting other than accounting principles generally accepted in the United States of America, to meet the requirements of the South Dakota Department of Commerce and Regulation, Division of Insurance. Our opinion is not modified with respect to this matter.

Emphasis of Matter

As discussed in Note 2 to the statutory-basis financial statements, the Company has implemented Statement of Statutory Accounting Principles No. 101, *Income Taxes — A Replacement of SSAP No. 10R and SSAP No. 10*, which resulted in a cumulative change in accounting principle as of January 1, 2012.

Report on Supplemental Schedules

Our 2013 audit was conducted for the purpose of forming an opinion on the 2013 statutory-basis financial statements as a whole. The supplemental schedule of investment risk interrogatories and the supplemental summary investment schedule, as of and for the year ended December 31, 2013, are presented for purposes of additional analysis and are not a required part of the 2013 statutory-basis financial statements. These supplemental schedules are the responsibility of the Company's management and were derived from and relate directly to the underlying accounting and other records used to prepare the statutory-basis financial statements. Such supplemental schedules have been subjected to the auditing procedures applied in our audit of the 2013 statutory-basis financial statements and certain additional procedures, including comparing and reconciling such supplemental schedules directly to the underlying accounting and other records used to prepare the statutory-basis financial statements or to the statutory-basis financial statements themselves, and other additional procedures in accordance with auditing standards generally accepted in the United States of America. In our opinion, such supplemental schedules are fairly stated in all material respects in relation to the 2013 statutory-basis financial statements as a whole.

Restriction on Use

Our report is intended solely for the information and use of the board of directors and the management of SHP and for filing with the South Dakota Department of Commerce and Regulation, Division of Insurance and other state insurance departments to whose jurisdiction the Company is subject and is not intended to be, and should not be, used by anyone other than these specified parties.

Deloitte & Touche LLP

February 28, 2014

SANFORD HEALTH PLAN

STATUTORY-BASIS STATEMENTS OF ADMITTED ASSETS, LIABILITIES, AND CAPITAL AND SURPLUS AS OF DECEMBER 31, 2013 AND 2012

	2013	2012
ASSETS		
CASH AND INVESTED ASSETS:		
Bonds	$ 35,978,315	$ 34,440,381
Preferred stocks	828,239	
Cash and short-term investments	8,049,466	11,015,266
Investment in insurance subsidiary	1,232,509	
Total cash and invested assets	46,088,529	45,455,647
INVESTMENT INCOME DUE AND ACCRUED	297,681	275,698
UNCOLLECTED PREMIUMS AND AGENTS' BALANCES IN THE COURSE OF COLLECTION	1,503,562	217,241
AMOUNTS RECOVERABLE FROM REINSURERS	519,743	503,320
AMOUNTS RECEIVABLE RELATING TO UNINSURED PLANS	791	14,486
CURRENT FEDERAL AND FOREIGN INCOME TAX RECOVERABLE AND INTEREST THEREON	996,000	
NET DEFERRED TAX ASSETS	1,447,000	997,000
ELECTRONIC DATA PROCESSING EQUIPMENT AND SOFTWARE	90,324	160,760
RECEIVABLES FROM PARENT, SUBSIDIARIES, AND AFFILIATES	27,497	18,444
HEALTH CARE AND OTHER AMOUNTS RECEIVABLE	376,078	146,433
TOTAL	$ 51,347,205	$ 47,789,029
LIABILITIES AND CAPITAL AND SURPLUS		
LIABILITIES:		
Claims unpaid	$ 16,767,350	$ 12,907,798
Unpaid claims adjustment expenses	1,118,000	850,000
Aggregate health policy reserves	873,000	743,000
Premiums received in advance	912,379	1,352,457
General expenses due or accrued	4,202,854	2,394,223
Current federal income tax payable		1,358,000
Amounts due to parent, subsidiaries, and affiliates	1,480,650	1,392,614
Total liabilities	25,354,233	20,998,092
COMMITMENTS AND CONTINGENCIES (Notes 14 and 15)		
CAPITAL AND SURPLUS:		
Gross paid-in and contributed surplus	27,013,218	28,013,218
Unassigned funds deficit	(1,020,246)	(1,222,281)
Total capital and surplus	25,992,972	26,790,937
TOTAL	$ 51,347,205	$ 47,789,029

See notes to statutory-basis financial statements.

SANFORD HEALTH PLAN

STATUTORY-BASIS STATEMENTS OF REVENUES AND EXPENSES AND CAPITAL AND SURPLUS ACCOUNT
FOR THE YEARS ENDED DECEMBER 31, 2013 AND 2012

	2013	2012
REVENUES:		
Net premium income	$ 142,984,884	$ 137,562,080
Fee-for-service	333,411	666,826
Total revenues	143,318,295	138,228,906
HOSPITAL AND MEDICAL EXPENSES:		
Hospital/medical benefits	63,773,896	59,997,280
Other professional services	35,369,172	35,643,471
Outside referrals	9,490,254	8,658,370
Emergency room and out-of-area	4,104,705	4,224,950
Prescription drugs	17,806,020	16,299,721
Total hospital and medical expenses	130,544,047	124,823,792
Less net reinsurance recoveries	(674,320)	(924,756)
Hospital and medical expenses — net	129,869,727	123,899,036
CLAIMS ADJUSTMENT EXPENSES	9,192,821	8,250,046
GENERAL ADMINISTRATIVE EXPENSES	3,049,780	3,292,492
INCREASE (DECREASE) IN RESERVES FOR HEALTH CONTRACTS	130,000	(314,000)
Total underwriting deductions	142,242,328	135,127,574
NET UNDERWRITING INCOME	1,075,967	3,101,332
NET INVESTMENT GAINS	788,848	976,010
AGGREGATE WRITE-INS FOR OTHER INCOME OR EXPENSES	96,640	166,874
NET INCOME BEFORE FEDERAL INCOME TAXES	1,961,455	4,244,216
FEDERAL INCOME TAX EXPENSE	(180,000)	(1,396,000)
NET INCOME	$ 1,781,455	$ 2,848,216
CAPITAL AND SURPLUS — Beginning of year	$ 26,790,937	$ 25,146,214
CHANGE IN CAPITAL AND SURPLUS:		
Net income	1,781,455	2,848,216
Change in net unrealized capital gains (losses) less capital gains tax	(116,491)	
Change in net deferred income tax	441,000	(393,000)
Change in nonadmitted assets	(2,136,438)	(580,493)
Return of capital (Note 10)	(1,000,000)	(600,000)
Contribution to subsidiary	(1,000,000)	
Change in accounting principle (Note 2)		370,000
Initial investment in insurance subsidiary	831,807	
Unrealized change in investment in insurance subsidiary	400,702	
Net change in capital and surplus	(797,965)	1,644,723
CAPITAL AND SURPLUS — End of year	$ 25,992,972	$ 26,790,937

See notes to statutory-basis financial statements.

SANFORD HEALTH PLAN

STATUTORY-BASIS STATEMENTS OF CASH FLOWS
FOR THE YEARS ENDED DECEMBER 31, 2013 AND 2012

	2013	2012
CASH FROM OPERATIONS:		
Premiums collected — net of reinsurance	$ 141,388,485	$ 137,642,936
Net investment income	1,259,522	1,273,525
Miscellaneous income	(169,006)	564,892
Subtotal	142,479,001	139,481,353
Benefits and loss related payments	(126,156,599)	(122,098,704)
Commissions, expenses paid, and aggregate write-ins for deductions	(10,055,634)	(10,802,371)
Federal income taxes paid	(2,534,000)	(60,000)
Subtotal	(138,746,233)	(132,961,075)
Net cash provided by operations	3,732,768	6,520,278
CASH FROM INVESTING:		
Cost of investments acquired	(12,473,745)	(14,379,221)
Proceeds from investments sold, matured, or repaid	8,265,916	13,864,753
Net cash used in investing	(4,207,829)	(514,468)
CASH FROM FINANCING AND MISCELLANEOUS SOURCES:		
Return of capital to parent (Note 10)	(1,000,000)	(600,000)
Capital infusion to insurance subsidiary	(1,000,000)	
Other cash used	(490,739)	(49,562)
Net cash used in financing and miscellaneous sources	(2,490,739)	(649,562)
RECONCILIATION OF CASH AND SHORT-TERM INVESTMENTS:		
Net change in cash and short-term investments	(2,965,800)	5,356,248
Cash and short-term investments:		
Beginning of year	11,015,266	5,659,018
End of year	$ 8,049,466	$ 11,015,266

See notes to statutory-basis financial statements.

1. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

A. Accounting Practices

Sanford Health Plan (SHP or the "Company") is a taxable nonprofit health maintenance organization (HMO) licensed to operate in South Dakota, North Dakota, and Iowa. SHP offers commercial, Medicare supplement, and individual products to approximately 37,000 members. SHP is a wholly owned subsidiary of Sanford Health (SH). SH is a wholly owned subsidiary of Sanford, a fully integrated health care organization providing clinical care to patients, research, and health care coverage. SHP has entered into contracts with physicians, hospitals, and other health care providers pursuant to which such providers deliver medical care to its enrollees. SHP was incorporated on July 30, 1997, and began operations on January 1, 1998.

Effective July 1, 2013, Heart of American Health Plan became a wholly owned subsidiary of SHP and was renamed as Sanford Heart of America Health Plan (SHAHP). SHAHP is a nonprofit health maintenance organization licensed to operate in North Dakota and is exempt from income taxes under Section 501(c)(4) of the Internal Revenue Code. The transaction was an affiliation change in the corporate member and not an asset purchase. As disclosed in Note 3, no purchase price was paid for this affiliation. The ND Commissioner of Insurance approved the acquisition of control via an Order issued on May 21, 2013.

The statutory-basis financial statements of SHP are prepared on the basis of accounting practices prescribed or permitted by the South Dakota Department of Commerce and Regulation, Division of Insurance (SD Division of Insurance). These practices differ from accounting principles generally accepted in the United States of America (GAAP) as certain assets, including furniture, equipment, leasehold improvements, prepaid assets, and certain aged health care receivables, are considered nonadmitted assets for statutory purposes and are excluded from the statutory-basis statements of admitted assets, liabilities, and capital and surplus. The change in nonadmitted assets has been reflected in unassigned funds deficit in the accompanying statutory-basis financial statements. Under GAAP, these amounts would be included in total assets on the statutory-basis statements of admitted assets, liabilities, and capital and surplus. In addition, certain debt investments that would be shown at fair value under GAAP are presented at amortized cost in the accompanying statutory-basis statements of admitted assets, liabilities, and capital and surplus.

The SD Division of Insurance recognizes only statutory accounting practices prescribed or permitted by the state of South Dakota for determining and reporting the financial condition and results of operations of an insurance company for determining its solvency under the Division of Insurance Law. The National Association of Insurance Commissioners' (NAIC) Statutory Accounting Principles (SAP) have been adopted as a component of prescribed or permitted practices by the state of South Dakota. South Dakota has adopted certain prescribed accounting practices that differ from those found in NAIC SAP. Specifically for the state of South Dakota, electronic data processing (EDP) equipment original cost may not be more than 3% of the admitted assets of the insurer and shall be amortized over a period not to exceed five years. In NAIC SAP, EDP equipment shall be limited to 3% of the reporting entity's capital and surplus as shown on the statutory-basis statements of admitted assets, liabilities, and capital and surplus of the reporting entity for its most recently

filed statement with the domiciliary state commissioner and shall be depreciated for a period not to exceed three years. There is no material difference in net income or statutory-basis capital and surplus for the years ended December 31, 2013 and 2012, as a result of this prescribed practice. The commissioner of the SD Division of Insurance has the right to permit other specific practices that deviate from prescribed practices.

A reconciliation of SHP's net income (loss) and capital and surplus between NAIC SAP and practices prescribed and permitted by the State of South Dakota is shown below:

	State of Domicile	2013	2012
Net income:			
Company state basis	South Dakota	$ 1,781,455	$ 2,848,216
NAIC SAP	South Dakota	$ 1,781,455	$ 2,848,216
Capital and Surplus:			
Company state basis	South Dakota	$25,992,972	$26,790,937
NAIC SAP	South Dakota	$25,992,972	$26,790,937

B. Use of Estimates in the Preparation of the Statutory-Basis Financial Statements

These statutory-basis financial statements include certain amounts that are based on SHP's estimates and judgments. These estimates require SHP to apply complex assumptions and judgments often because SHP must make estimates about the effects of matters that are inherently uncertain and will change in subsequent periods. The most significant estimates relate to claims unpaid, aggregate health policy reserves, and unpaid claims adjustment expenses (CAE). SHP adjusts these estimates each period as more current information becomes available. The impact of any changes in estimates is included in the determination of income in the period in which the estimate is adjusted.

C. Significant Accounting Policies

SHP uses the following accounting policies:

(1) *Cash and Short-Term Investments* — As required by Statement of Statutory Accounting Principles (SSAP) No. 2, cash represents cash held by SHP in disbursement accounts and certificates of deposit with maturities of one year or less. Short-term investments consist of marketable securities with original maturities between three months and one year. The carrying amount of short-term investments reported in the accompanying statutory-basis statements of admitted assets, liabilities, and capital and surplus is cost, which approximates fair value.

(2) *Bonds* — Balance consists of U.S. government, U.S. state, U.S. political subdivisions of state, U.S. special revenue and special assessment, and industrial and miscellaneous bonds with original maturities in excess of one year and are carried at amortized cost as they meet NAIC credit risk designation one or two. Amortization of bond premiums and discounts is calculated using the interest method. Bonds are valued and reported using market prices published by the Securities Valuation Office of the NAIC (SVO) in accordance with the NAIC Valuations of Securities manual prepared by the SVO or an external pricing service. Prepayment assumptions are based on historic principal pay downs. SHP's investment policy limits investments in mortgage-backed securities to 30% of the portfolio.

(3) *Common Stock* — SHP did not hold any investments in common stock during the years ended December 31, 2013 or 2012.

(4) Preferred Stock — SHP had investments in preferred stocks of $828,239 as of December 31, 2013. Investments in preferred stocks are valued as prescribed by the SVO, or an external pricing service if NAIC values are not available, in the statutory-basis statements of admitted assets, liabilities, and capital and surplus, while under GAAP, preferred stocks are generally reported at fair value.

(5) *Mortgage Loans* — SHP did not have any mortgage loans during the years ended December 31, 2013 or 2012.

(6) *Loan-Backed Securities* — Loan-backed securities are stated at amortized cost. The retrospective adjustment method is used to value all securities.

(7) *Investments in Subsidiaries* — SHP owns 100% of SHAHP effective July 1, 2013. The value of the subsidiary was $1,232,509 as of December 31, 2013.

(8) *Joint Ventures* — SHP does not have any joint ventures.

(9) *Derivatives* — SHP did not participate in any derivative activity during the years ended December 31, 2013 or 2012.

(10) *Premium Deficiency Reserves* — Premium deficiency reserves and the related expense, as defined by SSAP No. 54, *Individual and Group Accident Health Contracts*, as well as actuarial practice guidelines, are recognized when it is probable that expected future health care expenses, CAE, and administration costs under a group of existing contracts will exceed anticipated future premiums and reinsurance recoveries considered over the remaining lives of the contracts. The methods for making such estimates and for establishing the resulting reserves are periodically reviewed and updated, and any adjustments are reflected in hospital and medical expenses in the accompanying statutory-basis statements of revenue and expenses and capital and surplus account in the period in which the change in estimate is identified. SHP used a 3% discount rate as a factor in the premium deficiency calculation in accordance with SSAP No. 54. A premium deficiency reserve (recorded as aggregate health policy reserves) of $873,000 and $743,000 related to SHP's individual business line was recorded as of December 31, 2013 and 2012, respectively.

(11) *Hospital and Medical Expenses, Claims Unpaid, Unpaid CAE, and Aggregate Health Policy Reserves* — Hospital and medical expenses and corresponding liabilities include claims paid, claims processed but not yet paid, estimates for claims received but not yet processed, and estimates for the costs of health care services enrollees have received but for which claims have not yet been submitted.

The estimates for claims unpaid are developed using actuarial methods based upon historical submission and payment data, cost trends, customer and product mix, seasonality, utilization of health care services, contracted service rates, and other relevant factors. The estimates may change as actuarial methods change or as underlying facts upon which estimates are based change. SHP did not change actuarial methods during the years ended December 31, 2013 and 2012. Management believes the amount of claims unpaid is adequate to cover SHP's liability for unpaid claims as of December 31, 2013; however, actual claim payments may differ from those established estimates. Adjustments to claims unpaid estimates are reflected in operating results in the period in which the change in estimate is identified.

Unpaid CAE as defined by SSAP No. 85, *Claim Adjustment Expenses, Amendments to SSAP No. 55 — Unpaid Claims, Losses, and Loss Adjustment Expenses*, are those costs expected to be incurred in connection with the adjustment and recording of accident and health claims. CAE is recorded as cost-containment expenses and other CAE. Cost-containment expenses include utilization review and other case management activities. A detailed review of SHP's administrative expenses is performed to determine the allocation between CAE and general administrative expenses (GAE) in accordance with SSAP No. 85. The method used for determining CAE is periodically reviewed and updated, and any adjustments are reflected in underwriting deductions in the accompanying statutory-basis statements of revenue and expenses and capital and surplus account in the period in which the change in methodology is identified.

(12) *Capitalization Policy* — SHP has not modified its capitalization policy from the prior period. The capital threshold is $2,500 for a single item and $3,000 for group purchases where per unit cost is greater than $1,000. All personal computers and laptops are capitalized regardless of the cost.

(13) *Impairment* — SHP continually monitors the difference between the cost and estimated fair value of its bonds and short-term investments. If any of SHP's bonds or short-term investments experience a decline in value believed to be other than temporary, or for which SHP has intent to sell, SHP records a realized loss. The new cost basis is not changed for subsequent recoveries in fair value. The prospective adjustment method is utilized for mortgage-backed securities for periods subsequent to the loss recognition. SHP has not recorded any other-than-temporary impairments for the years ended December 31, 2013 and 2012.

(14) *Net Premium Income and Premiums Received in Advance* — Premium revenue for prepaid health care is recognized as income in the month in which the enrollees are entitled to health care services. Premiums collected in advance are reported as premiums received in advance.

There are no premiums receivable balances greater than 90 days due, which are nonadmitted, with the exception of amounts due under government-insured plans, which are admitted assets.

(15) *Fee-for-Service Revenue* — Fee-for-service revenue is reported at the estimated net realizable amounts from patients, third-party payors, and others for services in the period in which services are provided.

(16) *Reinsurance* — SHP entered into a stop-loss reinsurance agreement with an insurance company for both 2013 and 2012 to limit losses on individual claims in excess of $500,000 for 2013 and 2012 of eligible medical and hospital services of any enrollee per contract year. Reinsurance premiums paid are deducted from net premium income in the statutory-basis financial statements. Reinsurance premiums were $1,561,856 and $1,029,595 for 2013 and 2012, respectively.

(17) *Depreciation* — All fixed assets are depreciated using the straight-line method over the shorter of the estimated useful lives of the assets or as prescribed by SAP. Only fixed assets that are admittable for statutory reporting are recorded on the statutory-basis statements of assets, liabilities, and capital and surplus. Upon asset retirement or disposal, the cost and accumulated depreciation accounts are adjusted, and the gain or loss is reflected in operations. Depreciation expense was $450,801 and $357,027 for 2013 and 2012, respectively, and shown as CAE. Accumulated depreciation was $3,078,706 and $2,671,840 as of December 31, 2013 and 2012, respectively.

(18) *Pharmacy Rebates Receivable* — Pharmacy rebates receivable are estimated based on the most current available data provided by SHP's unaffiliated pharmaceutical benefit manager and are invoiced on a quarterly lag basis. All pharmacy rebates receivable are considered nonadmitted assets for statutory purposes under SSAP No. 84, *Certain Healthcare Receivables and Receivables Under Government Insured Plans*, because such pharmacy rebates receivable are generally not collected within 90 days of the billing period. Accordingly, SHP has nonadmitted these receivables from the statutory-basis statements of admitted assets, liabilities, and capital and surplus.

(19) *Income Taxes* — Statutory accounting requires an amount to be recorded for deferred taxes on temporary differences between the financial reporting and tax basis of assets and liabilities, subject to a valuation allowance and admissibility limitations on deferred tax assets. The provision for income taxes is based on the amount estimated to be currently payable and the changes in those deferred taxes arising from the temporary differences.

(20) *Vulnerability Due to Certain Concentrations* — SHP is subject to substantial federal and state government regulation, including licensing and other requirements relating to the offering of SHP's existing products in new markets and offerings of new products, both of which may restrict SHP's ability to expand its business. SHP had one customer that accounted for more than 10% of premiums for the years ended December 31, 2013 and 2012.

(21) *Recently Issued Accounting Standard* — In November 2011, the NAIC adopted SSAP No. 101, *Income Taxes — A Replacement of SSAP No. 10R and SSAP No. 10* ("SSAP No. 101"), effective for 2012 interim and annual financial statements and beyond. The new standard includes revised guidance for tax contingencies; nonelective deferred tax asset admissibility test along with significant modifications to the deferred tax asset admissibility test; and disclosure modifications. A change resulting from the adoption of this revised statement shall be accounted for prospectively.

In March 2011, the NAIC revised SSAP No. 100, *Fair Value Measurements*, effective January 2012. The revisions require additional disclosures of the fair value hierarchy, as well as the method used to obtain the fair value measurement.

(22) *Reclassifications* — Certain 2012 amounts in the accompanying statutory-basis financial statements have been reclassified to conform to the 2013 presentation. Specifically, certain claims expenses have been reclassified to better align with the types of claims. These reclassifications had no effect on net income or total capital and surplus as previously reported in the statutory-basis financial statements.

2. ACCOUNTING CHANGES AND CORRECTIONS OF ERRORS

SHP did not detect any errors in reporting that would require a correction of an error to be recorded during the years ending December 31, 2013 and 2012.

As a result of the adoption of SSAP No. 101, SHP recalculated the nonadmitted deferred tax asset balance as of December 31, 2011, in accordance with SSAP No. 101. This resulted in an increase to the net deferred tax asset of $370,000 and a corresponding decrease of $370,000 to the nonadmitted deferred tax asset balance. There was no impact related to the change in guidance related to tax contingencies. The cumulative effect of this change in accounting principle was recorded by SHP in accordance with SSAP No. 3, *Accounting Changes and Corrections of Errors*, and is reflected as an increase to unassigned funds in the accompanying statutory-basis financial statements as of January 1, 2012.

3. BUSINESS COMBINATIONS AND GOODWILL

A. Statutory Purchase Method

SHP was a party to a business combination during the year ended December 31, 2013, with SHAHP. This transaction was accounted for as a statutory purchase, in accordance with *SSAP No. 68, Business Combinations and Goodwill,* due to the parent-subsidiary relationship that exists between SHP and SHAHP. As such, the value of the transaction equaled the sum of (a) any cash payment, (b) the fair value of other assets distributed, (c) the fair value of any liabilities assumed, and (d) any direct costs of acquisition. There was no cash payment and no acquisition costs associated with the purchase. Finally, no goodwill was recorded.

B. Statutory Merger

SHP was not a party to a statutory merger during the years ended December 31, 2013 and 2012.

C. Assumption Reinsurance

SHP did not participate in assumption reinsurance.

D. Impairment Loss

SHP did not recognize an impairment loss on any of the transactions described above.

4. DISCONTINUED OPERATIONS

SHP did not discontinue any operations during the years ended December 31, 2013 and 2012.

5. INVESTMENTS AND INVESTED ASSETS

Bonds and Short-Term Investments — The amortized cost, gross unrealized gains, gross unrealized losses, and estimated fair value of bonds and short-term investments as of December 31, 2013, excluding cash of $5,471,673, and as of December 31, 2012, excluding cash of $6,608,149, were as follows:

	Amortized Cost	Gross Unrealized Gains	Gross Unrealized Losses < 1 Year	Gross Unrealized Losses > 1 Year	Estimated Fair Value
As of December 31, 2013:					
U.S. government bonds	$10,177,547	$ 378,444	$ (51,650)	$ (14)	$10,504,327
U.S. state bonds	854,475	15,644			870,119
U.S. political subdivisions of state bonds	213,872	1,593	(1,731)		213,734
U.S. special revenue and special assessment bonds	184,386		(3,072)		181,314
Industrial and miscellaneous bonds, including foreign	17,206,386	237,447	(42,272)	(83,689)	17,317,872
Mortgage-backed securities	7,341,649	107,141	(25,936)	(35,098)	7,387,756
Preferred stocks	828,239				828,239
Short-term investments	2,577,793	70	(64)		2,577,799
	$39,384,347	$ 740,339	$(124,725)	$(118,801)	$39,881,160
Investment in insurance subsidiary	$ 1,232,509	$ -	$ -	$ -	$ 1,232,509
As of December 31, 2012:					
U.S. government bonds	$ 5,771,660	$ 766,541	$ (278)	$ -	$ 6,537,923
U.S. state bonds	854,984	70,412			925,396
U.S. political subdivisions of state bonds	100,000	5,419			105,419
U.S. special revenue and special assessment bonds	185,311	4,489			189,800
Industrial and miscellaneous bonds, including foreign	17,255,465	473,161	(24,363)	(5,913)	17,698,350
Mortgage-backed securities	10,272,961	279,359	(35,109)		10,517,211
Short-term investments	4,407,117	97	(1,622)		4,405,592
	$38,847,498	$1,599,478	$ (61,372)	$ (5,913)	$40,379,691

The amortized cost and estimated fair value of investments as of December 31, 2013, by contractual maturity, were as follows:

Years to Maturity	Amortized Cost	Gross Unrealized Gains	Gross Unrealized Losses < 1 Year	Gross Unrealized Losses > 1 Year	Estimated Fair Value
Less than one year	$ 5,284,505	$ 18,188	$ (65)	$ -	$ 5,302,628
One to five years	17,522,711	408,411	(18,635)	(14)	17,912,473
Five to ten years	5,963,358	72,274	(42,757)	(83,688)	5,909,187
Ten to twenty years	4,147,480	155,581	(32,591)	(1,215)	4,269,255
Over twenty years	5,638,054	85,885	(30,677)	(33,884)	5,659,378
	$38,556,108	$740,339	$(124,725)	$(118,801)	$39,052,921

The tables above show the gross unrealized losses and fair value of investments with unrealized losses that are not deemed to be other-than-temporarily impaired, aggregated by investment type and length of time that individual securities have been in a continuous unrealized loss position.

Proceeds from bond sales and maturities were $8,265,955 and $13,864,753 for 2013 and 2012, respectively, realized gains were $3,644 and $77,088 for 2013 and 2012, respectively, and realized losses were $0 and $2,467 for 2013 and 2012, respectively.

The unrealized losses on investments in U.S. government bonds and industrial and miscellaneous bonds at December 31, 2013 and 2012, were mainly caused by interest rate increases and not by unfavorable changes in credit ratings associated with these securities. SHP evaluates impairment at each reporting period for each of the securities, whereby the fair value of the investment is less than its amortized cost. The contractual cash flows of the U.S. government bonds are guaranteed either by the U.S. government or an agency of the U.S. government. It is expected that the securities would not be settled at a price less than the amortized cost of the investment, and SHP does not intend to sell the investment until the unrealized loss is fully recovered. SHP evaluated the credit ratings of the industrial and miscellaneous bonds, noting neither a significant deterioration since purchase nor other factors, which may indicate an other-than-temporary impairment, such as the length of time and extent to which fair value has been less than cost, the financial condition and near-term prospects of the issuer as well as specific events or circumstances that may influence the operations of the issuer, and SHP's ability and intent to hold the investments for a sufficient time in order to enable recovery of SHP's cost.

The investment in insurance subsidiary represents the total capital and surplus of SHAHP. Summarized financial information for SHAHP as of December 31, 2013 is as follows:

	2013
Total assets	$2,003,410
Total liabilities	770,901
Total capital and surplus	1,232,509
Total revenue	3,833,853
Net loss	(358,002)

There are no nonadmitted assets as a result of bonds that were in or near default as of December 31, 2013 and 2012.

Investments are reported in accordance with the NAIC Valuations of Securities manual prepared by the NAIC Securities Valuation Office.

A. Mortgage Loan, Including Mezzanine Real Estate Loans

SHP did not have any mortgage loans during the years ended December 31, 2013 or 2012.

B. Debt Restructuring

SHP did not have any debt during the years ended December 31, 2013 or 2012.

C. Reverse Mortgages

SHP did not have any reverse mortgages during the years ended December 31, 2013 or 2012.

D. Loan-Backed Securities

SHP had mortgage-backed securities of $7,341,649 and $10,272,961 during the years ended December 31, 2013 and 2012, respectively.

E. Repurchase Agreements and/or Securities Lending Transactions

SHP did not participate in any repurchase agreements or securities lending transactions during the years ended December 31, 2013 or 2012.

F. Real Estate

SHP does not own any real estate.

G. Investments in Low-Income Housing Tax Credits

SHP did not have any investments in low-income housing during the years ended December 31, 2013 or 2012.

6. JOINT VENTURES, PARTNERSHIPS, AND LIMITED LIABILITY COMPANIES

A. Joint Ventures

SHP has no investments in joint ventures, partnerships, or limited liability companies.

B. Impaired Investment Income

SHP did not have any impaired investment income during the years ended December 31, 2013 or 2012.

7. INVESTMENT INCOME

SHP has admitted all investment income due and accrued in the statutory-basis statements of admitted assets, liabilities, and capital and surplus.

8. DERIVATIVE INSTRUMENTS

SHP has no derivative instruments.

9. INCOME TAXES

A.-B. Deferred Tax Assets and Liabilities

(1) The components of the net deferred tax assets and deferred tax liabilities at December 31, 2013 and 2012, all of which are ordinary, and the changes in the net admitted DTAs for the year ended December 31, 2013, are as follows:

The 2013 and 2012 information is computed under SSAP No. 101.

	December 31, 2013		
	Ordinary	Capital	Total
Gross deferred tax assets	$1,732,000	$ -	$1,732,000
Statutory valuation allowance adjustments			-
Adjusted gross deferred tax assets	1,732,000	-	1,732,000
Deferred tax assets nonadmitted	240,000		240,000
Subtotal net admitted deferred tax assets	1,492,000	-	1,492,000
Deferred tax liabilities	45,000		45,000
Net admitted deferred tax assets	$1,447,000	$ -	$1,447,000

	December 31, 2012		
	Ordinary	Capital	Total
Gross deferred tax assets	$1,289,000	$ -	$1,289,000
Statutory valuation allowance adjustments			-
Adjusted gross deferred tax assets	1,289,000	-	1,289,000
Deferred tax assets nonadmitted	249,000		249,000
Subtotal net admitted deferred tax assets	1,040,000	-	1,040,000
Deferred tax liabilities	43,000		43,000
Net admitted deferred tax assets	$ 997,000	$ -	$ 997,000

	Change		
	Ordinary	Capital	Total
Gross deferred tax assets	$ 443,000	$ -	$ 443,000
Statutory valuation allowance adjustments			
Adjusted gross deferred tax assets	443,000	-	443,000
Deferred tax assets nonadmitted	(9,000)		(9,000)
Subtotal net admitted deferred tax assets	452,000	-	452,000
Deferred tax liabilities	2,000		2,000
Net admitted deferred tax assets	$ 450,000	$ -	$ 450,000

(2) Admission Calculation Components SSAP No 101:

	December 31, 2013		
	Ordinary	Capital	Total
Federal income taxes paid in prior years recoverable through loss carrybacks	$ 1,445,000	$ -	$ 1,445,000
Adjusted gross deferred tax assets expected to be realized after application of the threshold limitation	47,000		47,000
Adjusted gross deferred tax assets expected to be realized following the balance sheet date	128,000		128,000
Adjusted gross deferred tax assets allowed per limitation threshold	47,000		47,000
Adjusted gross deferred tax assets (excluding the amount of deferred tax assets above) offset by gross deferred tax liabilities			
Deferred tax assets admitted as the result of application of SSAP No. 101	1,492,000		1,492,000

	December 31, 2012		
	Ordinary	Capital	Total
Federal income taxes paid in prior years recoverable through loss carrybacks	$ 1,014,000	$ -	$ 1,014,000
Adjusted gross deferred tax assets expected to be realized after application of the threshold limitation	26,000		26,000
Adjusted gross deferred tax assets expected to be realized following the balance sheet date	26,000		26,000
Adjusted gross deferred tax assets allowed per limitation threshold			4,020,000
Adjusted gross deferred tax assets (excluding the amount of deferred tax assets above) offset by gross deferred tax liabilities			
Deferred tax assets admitted as the result of application of SSAP No. 101	1,040,000		1,040,000

	Change		
	Ordinary	Capital	Total
Federal income taxes paid in prior years recoverable through loss carrybacks	$ 431,000	$ -	$ 431,000
Adjusted gross deferred tax assets expected to be realized after application of the threshold limitation	21,000		21,000
Adjusted gross deferred tax assets expected to be realized following the balance sheet date	102,000		102,000
Adjusted gross deferred tax assets allowed per limitation threshold	47,000		47,000
Adjusted gross deferred tax assets (excluding the amount of deferred tax assets above) offset by gross deferred tax liabilities			
Deferred tax assets admitted as the result of application of SSAP No. 101	452,000		452,000

SSAP No. 101 is effective for 2012 interim and annual financial statements and beyond. The new standard includes revised guidance for tax contingencies, a nonelective DTA admissibility test along with significant modifications to the DTAs admissibility test, and disclosure modifications. A change resulting from this adoption would be accounted for prospectively and reflected as a change in accounting principle in accordance with SSAP No. 3. The adoption of this pronouncement resulted in a change of accounting principle as disclosed previously in Note 2.

(3) The ratio and amount of adjusted capital and surplus used to determine the applicable recovery period as of December 31, 2013 and 2012, are as follows:

Ratio percentage used to determine recovery period and threshold limitation amount	15.000 %	15.000 %
Amount of adjusted capital and surplus used to determine recovery period and threshold limitation above	$25,992,972	$26,790,937

(4) There was no impact to deferred tax assets as a result of tax planning strategies.

C. Significant components of current income taxes incurred consist of the following major categories:

(1) Current Federal Income Tax

	Year Ended December 31		
	2013	2012	Change
Current income tax:			
Federal	$ 179,000	$1,371,000	$(1,192,000)
Foreign			
Subtotal	179,000	1,371,000	(1,192,000)
Federal income tax on net capital gains	1,000	25,000	(24,000)
Federal and foreign income taxes incurred	$ 180,000	$1,396,000	$(1,216,000)

(2) Deferred Tax Assets

	Year Ended December 31		
	2013	2012	Change
Ordinary:			
Discounting of unpaid losses	$ 65,000	$ 66,000	$ (1,000)
Unearned premium reserve	62,000	92,000	(30,000)
Policyholder reserves	297,000	253,000	44,000
Fixed assets	591,000	275,000	316,000
Compensation and benefits accrual	104,000	86,000	18,000
Receivables — nonadmitted	559,000	413,000	146,000
Other (including items <5% of total tax ordinary assets)	54,000	104,000	(50,000)
Subtotal	1,732,000	1,289,000	443,000
Nonadmitted	240,000	249,000	(9,000)
Admitted ordinary deferred tax assets	$1,492,000	$1,040,000	$452,000

(3) Deferred Tax Liabilities

	Year Ended December 31		
	2013	2012	Change
Ordinary — other Capital	$45,000	$43,000	$2,000
Deferred tax liabilities	$45,000	$43,000	$2,000

(4) Net Deferred Tax Assets

	Year Ended December 31		
	2013	2012	Change
Net deferred tax assets	$ 1,447,000	$997,000	$450,000

The Company assessed the potential realization of the gross DTA, and as a result, no statutory valuation allowance was required and no allowance was established as of December 31, 2013 and 2012.

The change in net deferred income taxes is comprised of the following (this analysis is exclusive of any nonadmission of DTA under the admissibility test calculated in accordance with SSAP101 paragraph 11.

	Year Ended December 31		
	2013	2012	Change
Total deferred tax assets	$ 1,732,000	$ 1,289,000	$ 443,000
Total deferred tax liabilities	45,000	43,000	2,000
Net deferred tax assets	$ 1,687,000	$ 1,246,000	$ 441,000

D. Among the more significant book to tax adjustments were the following:

The provision for federal income taxes incurred was different from that which would be obtained by applying the statutory federal income tax rate of 34% to net income before federal income taxes. The significant items causing this difference for 2013 and 2012 were as follows:

	2013	Effective Tax Rate
Tax provision computed at statutory rate	$ 666,895	34.0 %
Meals and entertainment	3,569	0.2
Change in nonadmitted assets	(967,112)	(49.3)
Other	35,648	0.2
Total	$ (261,000)	(14.9)%
Federal and foreign income taxes incurred	180,000	9.2 %
Change in net deferred income taxes	(441,000)	(22.5)
Total statutory income taxes	$ (261,000)	(13.3)%

	2012	Effective Tax Rate
Tax provision computed at statutory rate	$1,442,955	34.0 %
Meals and entertainment	3,566	0.1
Change in deferred income taxes — net	(92,000)	(2.2)
Other	41,479	1.0
Total	$1,396,000	32.9 %

E. Additional Disclosures:

(1) *Carryforward Period* — At December 31, 2013, SHP had no net operating loss carryforwards.

(2) *Income Taxes Available for Recoupment* — Current federal income taxes payable of approximately $0 and $1,358,000 as of December 31, 2013 and 2012, respectively, are included in the accompanying statutory-basis statements of admitted assets, liabilities, and capital and surplus. Federal income taxes paid was $2,534,000 and $60,000 in 2013 and 2012, respectively.

Federal income tax incurred that is available for future recoupment in the event of future losses is $149,000 and $1,396,000 for 2013 and 2012, respectively.

F. Tax Return Consolidation

SHP does not consolidate tax returns with any other entity or entities.

G. Tax Loss Contingencies

SHP has no tax loss contingencies as of December 31, 2013 and 2012.

10. INFORMATION CONCERNING PARENT, SUBSIDIARIES, AFFILIATES, AND OTHER RELATED PARTIES

A-C. Related-Party Transactions

Administrative services, including claims processing, marketing, quality assurance, financial accounting, insurance, legal, payroll, and data processing, are provided by SHP to Sanford Health Plan of Minnesota (SHPMN), an affiliated entity. Expenses are allocated quarterly to SHPMN based on a percentage of overall membership and are reported as a reduction to administration expenses and CAE as applicable. Total allocated expenses were $116,450 and $126,169 for 2013 and 2012, respectively.

SH rents office space from SHP on a month-to-month basis. Total rental income was $16,101 and $21,468 for 2013 and 2012, respectively.

SH provides certain corporate services for SHP, and SHP reimburses SH for accounts payable expenses processed for SHP on a monthly basis. SHP pays SH for a monthly allocation of corporate services relating to compliance services, information technology services, and provider credentialing based on a percentage of total expenses. Other corporate services provided by SH include printing and health services support. Total corporate services and accounts payable reimbursements paid to SH for such expenses for 2013 and 2012 were $16,761,214 and $15,398,822, respectively, and are reported within CAE and GAE on the statutory-basis financial statements.

SHP provides third-party administrative services to Sanford through an Administrative Services Only (ASO) Agreement. SH reimburses SHP monthly for these services based on a per member per month basis. Payments received from SH for these services totaled $11,392,538 and $10,514,875 for 2013 and 2012, respectively, and are a reduction to general and administrative expense in the statutory-basis statements of revenues and expenses and capital and surplus account. SSAP 47.6 states that when a TPA acts in an administrative function only, related revenue should be deducted from general expense.

Payments made to SH for SHP's members' medical claims totaled $61,791,408 and $53,588,377 during 2013 and 2012, respectively, and are reported within hospital and medical expenses as applicable.

SHP provides screening services for SH. SH reimburses SHP monthly for these services. Payments received for screening services from SH totaled $6,650 and $397,057 for 2013 and 2012, respectively, and are reported within fee-for-service revenues on the statutory-basis statements of revenues and expenses and capital and surplus account.

SHP returned capital of $1,000,000 and $600,000 to SH during 2013 and 2012, respectively. SHP contributed capital of $1,000,000 to SHAHP during the year ended December 31, 2013.

SHP believes that its transactions with affiliates are reasonable and appropriate; however, operations of SHP may not be indicative of those that would have occurred if it had operated as an independent company.

D. Amounts Due from or to Related Parties

As of December 31, 2013 and 2012, SHP reported $1,480,650 and $1,392,614, respectively, as amounts due to SH, and $27,497 and $18,444, respectively, due from SHPMN.

E. Guarantees

SHP does not have any guarantees with related parties.

F. Material Management, Service Contracts, or Cost-Sharing Arrangements

Other than those discussed above, SHP does not have any material management, service contracts, or cost-sharing arrangements with related parties.

G. Control Relationship

The sole member of SHP is SH, and SH is a wholly owned subsidiary of Sanford, a fully integrated health care organization providing clinical care to patients, research, and health care coverage. As disclosed in Note 1, SHP took over control of SHAHP, which is now a wholly owned subsidiary of SHP.

H. Reduction of Asset Value of Securities

SHP did not reduce the asset value of any securities during the years ended December 31, 2013 or 2012.

I. Investment in Subsidiary, Controlled, or Affiliated (SCA) Entities that Exceeds 10% of Admitted Assets

Investments in SCA do not exceed 10% of admitted assets.

J. SCA Impaired Assets

SHP does not have any SCA impaired assets.

K. Investment in Foreign Insurance Subsidiary

SHP does not have any foreign insurance subsidiaries.

L. Investment in Downstream Noninsurance Holding Company

SHP does not have any investments in downstream noninsurance holding companies.

11. DEBT

A. Items Related to Debt

SHP had no debt outstanding during 2013 and 2012.

B. Federal Home Loan Bank Agreements

SHP had no Federal Home Loan Bank agreements during 2013 and 2012.

12. RETIREMENT PLANS, DEFERRED COMPENSATION, POSTEMPLOYMENT BENEFITS AND COMPENSATED ABSENCES, AND OTHER POSTRETIREMENT BENEFIT PLANS

A. Defined Benefit Plan

SHP does not have a defined benefit plan or other postretirement benefit plan.

B. Defined Contribution Plan

SH has retirement plans for qualified SHP employees. The benefits are based on the plans' provisions. SH makes contributions to the plans of approximately 2% of estimated salary costs. Expense allocated to SHP under the plans was $245,039 and $184,484 for 2013 and 2012, respectively. These balances are recorded in CAE and GAE during the years ended December 31, 2013 and 2012.

C. Multiemployer Plans

SHP does not participate in a multiemployer plan.

D. Consolidated/Holding Company Plans

SHP does not participate in a consolidated or holding company plan.

E. Postemployment Benefits and Compensated Absences

SHP does not provide postemployment benefits or compensated absences.

F. Impact of Medicare Modernization Act on Postretirement Benefits (INT 04-17)

There has been no impact of the Medicare Modernization Act on SHP.

13. CAPITAL AND SURPLUS, SHAREHOLDERS' DIVIDEND RESTRICTIONS, AND QUASI-REORGANIZATIONS

(1) *Capital Stock* — SHP did not have any capital stock outstanding during the years ended December 31, 2013 or 2012.

(2) *Preferred Stock* — SHP did not have any preferred stock outstanding during the years ended December 31, 2013 or 2012.

(3) *Dividend Restrictions* — There were no dividend restrictions applicable during the years ended December 31, 2013 or 2012.

(4) *Dividends Paid* — SHP paid dividends of $1,000,000 and $600,000 during the years ended December 31, 2013 and 2012, respectively.

(5) *Dividends to Stockholders* — SHP did not pay any dividends during the years ended December 31, 2013 or 2012.

(6) *Restrictions on Unassigned Funds* — There were no restrictions on unassigned funds during the years ended December 31, 2013 or 2012.

(7) *Advances to Surplus* — There were no advances to surplus during the years ended December 31, 2013 or 2012.

(8) *Stock Held for Special Purchases* — There was no stock held for special purchases for the years ended December 31, 2013 or 2012.

(9) *Changes in Special Surplus* — There were no changes in special surplus for the years ended December 31, 2013 or 2012.

(10) *Unassigned Surplus Funds* — The portion of unassigned funds deficit represented by nonadmitted asset values was $5,164,584 and $3,028,145 as of December 31, 2013 and 2012, respectively. The increase in 2013 is related to the nonadmitted portion of property and equipment.

(11) *Surplus Notes* — There were no surplus notes during the years ended December 31, 2013 or 2012.

(12) *Restatement Impact of Quasi-Reorganization* — SHP did not participate in a quasi-reorganization during the years ended December 31, 2013 or 2012.

(13) *Effective Date of Quasi-Reorganization* — SHP did not participate in a quasi-reorganization during the years ended December 31, 2013 or 2012.

14. CONTINGENCIES

A. Contingent Commitments

SHP does not have any contingent commitments as of December 31, 2013 or 2012.

B. Assessments

SHP does not have any assessments as of December 31, 2013 or 2012.

C. Gain Contingencies

SHP does not have any gain contingencies as of December 31, 2013 or 2012.

D. Claims Related Extra Contractual Obligation and Bad Faith Losses Stemming from Lawsuits

SHP does not have any material lawsuits resulting in extra contractual obligations or bad faith losses.

E. All Other Contingencies

SHP is involved in legal actions, which arise in the ordinary course of its business. Although the outcomes of any such legal actions cannot be predicted, in the opinion of management, the resolution of any currently pending or threatened actions will not have a material adverse effect upon the statutory-basis statements of revenues and expenses. SHP believes there are no assets that it considers impaired.

During the first quarter of 2010, the Patient Protection and Affordable Care Act and a reconciliation measure, the Health Care and Education Reconciliation Act of 2010 (collectively known as "Health Reform Legislation"), were signed into law, and after being challenged, were substantially upheld in a U.S. Supreme Court decision in the second quarter of 2012. The Health Reform Legislation

expands access to coverage and modifies aspects of the commercial insurance market, as well as the Medicaid and Medicare programs, Children's Health Insurance Program (CHIP), and other aspects of the health care system. Certain provisions of the Health Reform Legislation have already taken effect, and other provisions become effective at various dates over the next several years. The Department of Health and Human Services (HHS), the Department of Labor (DOL), and the Treasury Department have issued regulations or proposed regulations on a number of aspects of Health Reform Legislation, but final rules and interim guidance on the other key aspects of the legislation remain pending.

The Health Reform Legislation and the related federal and state regulations will impact how the Company does business and could restrict revenue and enrollment growth in certain products and market segments, restrict premium growth rates for certain products and market segments, increase the Company's medical and administrative costs, expose the Company to an increased risk of liability (including increasing the Company's liability in federal and state courts for coverage determinations and contract interpretation), or put the Company at risk for loss of business. In addition, the Company's statutory-basis results of operations, financial condition, and cash flows could be materially adversely affected by such changes. The Health Reform Legislation may create new or expand existing opportunities for business growth, but due to its complexity, the impact of the Health Reform Legislation remains difficult to predict and is not yet fully known.

On January 1, 2014, the SHP will be subject to an annual fee under section 9010 of the Affordable Care Act (ACA). This annual fee will be allocated to individual health insurers based on the ratio of the amount of the entity's net premiums written during the preceding calendar year to the amount of the health insurance for any U.S. health risk that is written during the preceding calendar year. A health insurance entity's portion of the annual fee becomes payable once the entity provides health insurance for a U.S. health risk for each calendar year beginning on or after January 1, 2014. As of December 31, 2013, SHP has written health insurance subject to the ACA assessment, expects to conduct health insurance business in 2014, and estimates its portion of the annual health insurance industry fee payable on September 30, 2014, to be $2,484,000. This assessment is expected to impact risk-based capital by $0.

15. LEASES

A. Lessee Operating Lease

SHP has certain rental commitments. Rental expense for 2013 and 2012 was approximately $745,927 and $792,624, respectively. These balances are recorded in CAE.

SHP entered into a lease agreement that commenced on November 1, 2007, and a sublease that commenced on November 1, 2011. These commitments have renewal options extending through the year 2017 and are subject to adjustments in future periods. The future rental commitments for this lease are included in the table below.

At December 31, 2013, the minimum aggregate rental commitments are as follows:

Years Ending December 31	Operating Leases
2014	$ 813,096
2015	813,096
2016	799,846
2017	643,906
Total	$3,069,944

SHP is not involved in any material sales — leaseback transactions.

B. Lessor Leases:

(1) *Operating Leases* — SHP entered into a sublease agreement with a third party that commenced on November 1, 2007. This commitment has renewal options extending through the year 2017 and is subject to adjustments in future periods. Rental income for 2013 and 2012 was $148,835 and $141,270, respectively. These balances are recorded in net investment gains on the statutory-basis statements of revenues and expenses.

(2) Future minimum lease payment receivables under noncancelable leasing arrangements as of December 31, 2013, are as follows:

Years Ending December 31	Operating Leases
2014	$ 143,051
2015	143,051
2016	143,051
2017	125,562
Total	$ 554,715

(3) *Leveraged Leases* — SHP is not a lessor to any leveraged leases.

16. INFORMATION ABOUT FINANCIAL INSTRUMENTS WITH OFF-BALANCE-SHEET RISK AND FINANCIAL INSTRUMENTS WITH CONCENTRATIONS OF CREDIT RISK

SHP does not hold any financial instruments with off-balance-sheet risk or concentrations of credit risk.

17. SALE, TRANSFER, AND SERVICING OF FINANCIAL ASSETS AND EXTINGUISHMENTS OF LIABILITIES

A. Transfers of Receivables

SHP did not transfer any receivables during the years ended December 31, 2013 or 2012.

B. Transfer and Service of Financial Assets

SHP did not transfer any financial assets during the years ended December 31, 2013 or 2012.

C. Wash Sales

SHP did not participate in any activity that would be considered a wash sale during the years ended December 31, 2013 or 2012.

18. GAIN OR LOSS TO THE REPORTING ENTITY FROM UNINSURED PLANS AND THE UNINSURED PORTION OF PARTIALLY INSURED PLANS

A. ASO (Administrative Services Only) Plans

The gains from operations from ASO uninsured plans and the uninsured portion of partially insured plans during 2013 and 2012 were as follows:

	2013		
	ASO Uninsured Plans	Uninsured Portion of Partially Insured Plans	Total ASO
Net reimbursement for administrative expenses (including administrative fees) in excess of actual expenses	$ 3,249,954	$ -	$ 3,249,954
Total net other income or expenses (including interest paid to or received from plans)			-
Net gain (loss) from operations	3,249,954		3,249,954
Total claim payment volume	175,127,195		175,127,195

	2012		
	ASO Uninsured Plans	Uninsured Portion of Partially Insured Plans	Total ASO
Net reimbursement for administrative expenses (including administrative fees) in excess of actual expenses	$ 3,343,640	$ -	$ 3,343,640
Total net other income or expenses (including interest paid to or received from plans)			-
Net gain (loss) from operations	3,343,640		3,343,640
Total claim payment volume	154,743,100		154,743,100

B. ASC (Administrative Services Contract) Plans

The loss from operations and claim payment volume for Administrative Services Contract (ASC) uninsured plans for 2013 and 2012 were as follows:

	2013		
	ASC Uninsured Plans	Uninsured Portion of Partially Insured Plans	Total ASC
Gross reimbursement for medical cost incurred	$ -	$ 221,391	$ 221,391
Gross administrative fees accrued			-
Other income or expenses (including interest paid to or received from plans)			-
Gross expenses incurred (claims and administrative)		345,201	345,201
Total net gain (loss) from operations		(123,810)	(123,810)

	2012		
	ASC Uninsured Plans	Uninsured Portion of Partially Insured Plans	Total ASC
Gross reimbursement for medical cost incurred	$ -	$ 324,994	$ 324,994
Gross administrative fees accrued			-
Other income or expenses (including interest paid to or received from plans)			-
Gross expenses incurred (claims and administrative)		522,864	522,864
Total net gain (loss) from operations		(197,870)	(197,870)

C. Medicare or Similarly Structured Cost-Based Reimbursement Contract

SHP does not have any Medicare or similarly structured cost-based reimbursement contracts, however SHAHP, the wholly owned subsidiary of SHP, does have a Medicare Cost contract.

19. DIRECT PREMIUM WRITTEN/PRODUCED BY MANAGING GENERAL AGENTS/THIRD-PARTY ADMINISTRATORS

SHP did not have any direct premiums written or produced by managing general agents or third-party administrators.

20. FAIR VALUE MEASUREMENTS

The NAIC SAP defines fair value, establishes a framework for measuring fair value, and outlines the disclosure requirements related to fair value measurements. The fair value hierarchy is as follows:

Level 1 — Quoted (unadjusted) prices for identical assets in active markets

Level 2 — Other observable inputs, either directly or indirectly, including:

- Quoted prices for similar assets in active markets
- Quoted prices for identical or similar assets in nonactive markets (few transactions, limited information, noncurrent prices, high variability over time, etc.)
- Inputs other than quoted prices that are observable for the asset (interest rates, yield curves, volatilities, default rates, etc.)
- Inputs that are derived principally from or corroborated by other observable market data

Level 3 — Unobservable inputs that cannot be corroborated by observable market data

In instances in which the inputs used to measure fair value fall into different levels of the fair value hierarchy, the fair value measurement has been determined based on the lowest level input that is significant to the fair value measurement in its entirety. SHP's assessment of the significance of a particular item to the fair value measurement in its entirety requires judgment, including the consideration of inputs specific to the asset or liability.

A. Assets and Liabilities Measured at Fair Value

SHP does not have any financial assets that are measured and reported at fair value on the statutory-basis statements of admitted assets, liabilities, and capital and surplus at December 31, 2013 and 2012.

B. Other Fair Value Disclosure

The following table presents information about SHP's financial assets disclosed at fair value at December 31, 2013 and 2012.

Description for Each Class of Asset or Liability	December 31, 2013 (Level 1)	(Level 2)	(Level 3)	Total
Assets at fair value:				
U.S. government bonds	$ -	$ 10,504,327	$ -	$ 10,504,327
U.S. state bonds		870,119		870,119
U.S. political subdivisions of state bonds		213,734		213,734
U.S. special revenue and special assessment bonds		181,314		181,314
Industrial and miscellaneous bonds, including foreign		17,317,872		17,317,872
Mortgage-backed securities		7,387,756		7,387,756
Preferred stocks	828,239			828,239
Short-term investments		2,577,799		2,577,799
Total assets at fair value	$828,239	$ 39,052,921	$ -	$ 39,881,160

Description for Each Class of Asset or Liability	December 31, 2012 (Level 1)	(Level 2)	(Level 3)	Total
Assets at fair value:				
U.S. government bonds	$ -	$ 6,537,923	$ -	$ 6,537,923
U.S. state bonds		925,396		925,396
U.S. political subdivisions of state bonds		105,419		105,419
U.S. special revenue and special assessment bonds		189,800		189,800
Industrial and miscellaneous bonds, including foreign		17,698,350		17,698,350
Mortgage-backed securities		10,517,211		10,517,211
Short-term investments	461,669	3,943,923		4,405,592
Total assets at fair value	$461,669	$ 39,918,022	$ -	$ 40,379,691

There were no transfers between Level 1 and Level 2 during the years ended December 31, 2013 and 2012.

C. Financial Instruments for Which Fair Value Cannot be Estimated

Not applicable.

D. Not Practicable to Estimate Fair Value

Not applicable.

21. OTHER ITEMS

A. Extraordinary Items

There were no extraordinary items for SHP during the years ended December 31, 2013 or 2012.

B. Troubled Debt Restructuring — Debtors

SHP does not have troubled debt restructuring.

C. Other Disclosures

Risk-based capital (RBC) is a regulatory tool for measuring the minimum amount of capital appropriate for a managed care organization to support its overall business operations in consideration of its size and risk profile. Under the laws of South Dakota, SHP is required to maintain a minimum net worth and company action-level RBC. SHP met the net worth requirements as of December 31, 2013 and 2012.

The Company is required by the State of South Dakota to maintain a minimum regulatory deposit of $300,000. The Company is in compliance with this requirement as of December 31, 2013 and 2012, respectively.

D. Uncollectible

Not applicable.

E. Business Interruption Insurance Recoveries

Not applicable.

F. State Transferable Tax Credits

SHP did not have any state transferable tax credits as of December 31, 2013 or 2012.

G. Subprime Mortgage-Related Exposure

Not applicable.

H. Retained Assets

SHP did not have any retained assets as of December 31, 2013 or 2012.

22. SUBSEQUENT EVENTS

Type I — Recognized Subsequent Events — SHP has evaluated recognized subsequent events through February 28, 2014, which is the date these statutory-basis financial statements were available for issuance.

There were no events subsequent to December 31, 2013, that require recognition or disclosure.

Type II — Nonrecognized Subsequent Events — SHP has evaluated nonrecognized subsequent events through February 28, 2014, which is the date these statutory-basis financial statements were available for issuance.

There were no events subsequent to December 31, 2013, that require disclosure.

23. REINSURANCE

A. Ceded Reinsurance Report:

Section 1 — General Interrogatories

(1) Are any of the reinsurers, listed in Schedule S as nonaffiliated, owned in excess of 10% or controlled, either directly or indirectly, by the Company or by any representative, officer, trustee, or director of the Company?

( ) Yes (X) No

(2) Have any polices issued by the Company been reinsured with a company chartered in a country other than the United States (excluding U.S. branches of such companies) that is owned in excess of 10% or controlled directly or indirectly by an insured, a beneficiary, a creditor, or an insured or any other person not primarily engaged in the insurance business?

( ) Yes (X) No

Section 2 — Ceded Reinsurance Report — Part A

(1) Does the Company have any reinsurance agreements in effect under which the reinsurer may unilaterally cancel any reinsurance for reasons other than for nonpayment of premium or other similar credit?

( ) Yes (X) No

(2) Does the reporting entity have any reinsurance agreements in effect such that the amount of losses paid or accrued through the statement date may result in a payment to the reinsurer of amounts that, in aggregate and allowing for offset of mutual credits from other reinsurance agreements with the same reinsurer, exceed the total direct premium collected under the reinsured policies?

( ) Yes (X) No

Section 3 — Ceded Reinsurance Report — Part B

(1) What is the estimated amount of the aggregate reduction in surplus (for agreements other than those under which the reinsurer may unilaterally cancel for reasons other than for nonpayment of payment or other similar credits that are reflected in Section 2 above) of termination of all reinsurance agreements, by either party, as of the date of this statement? Where necessary, the Company may consider the current or anticipated experience of the business reinsured in making this estimate.

$0

(2) Have any new agreements been executed or existing agreements amended, since January 1 of the year of this statement, to include policies or contracts that were in force or which had existing reserves established by the Company as of the effective date of the agreement?

( ) Yes (X) No

B. Uncollectible Reinsurance

During 2013 and 2012, there were no uncollectible reinsurance recoverables.

C. Commutation of Ceded Reinsurance

SHP does not have any commutation of ceded reinsurance.

D. Unsecured Reinsurance Recoverables

SHP does not have an unsecured aggregate reinsurance recovery receivable with any individual reinsurers, authorized or unauthorized, that exceeds 3% of SHP's policyholder surplus.

E. Reinsurance Recoverable in Dispute

SHP does not have a reinsurance recoverable balance that is being disputed by any individual reinsurer.

F. Retroactive Reinsurance

SHP did not have a retroactive reinsurance agreement in 2013 or 2012.

24. RETROSPECTIVELY RATED CONTRACTS AND CONTRACTS SUBJECT TO REDETERMINATION

A. Method Used to Estimate Retrospective Premium Adjustments

Not applicable.

B. Accrued Retrospective Premium

Not applicable.

C. Amount of Net Premiums

Not applicable.

D. Medical Loss Ratio Rebates

Not applicable.

25. CHANGE IN INCURRED CLAIMS AND UNPAID CAE

Reserves for incurred claims and unpaid CAE attributable to insured events of prior years have decreased by $331,133, from $13,757,798 in 2012 to $13,426,665 in 2013, as a result of a reestimation of unpaid claims and CAE principally on the commercial line of insurance. This decrease is generally the result of ongoing analysis of recent loss development trends. Original estimates are increased or decreased as additional information becomes known regarding individual claims.

Claims activity, net of reinsurance and aggregate health policy reserves in 2013 and 2012, was as follows:

	2013		
	Current Year Incurred Claims	Prior Years Incurred Claims	Total
Beginning of year claim reserve	$ -	$ (12,907,798)	$ (12,907,798)
Paid claims	113,688,899	12,321,277	126,010,176
End of year claim reserve	16,511,961	255,388	16,767,349
Total incurred claims	$ 130,200,860	$ (331,133)	$ 129,869,727

	2012		
	Current Year Incurred Claims	Prior Years Incurred Claims	Total
Beginning of year claim reserve	$ -	$ (11,172,146)	$ (11,172,146)
Paid claims	111,023,304	11,140,080	122,163,384
End of year claim reserve	12,902,210	5,588	12,907,798
Total incurred claims	$ 123,925,514	$ (26,478)	$ 123,899,036

SHP incurred CAE of $9,192,821 and $8,250,046 in 2013 and 2012, respectively. The paid CAE, incurred CAE, and the balance in the unpaid claim adjustment expenses reserve for 2013 and 2012 are as follows:

	2013	2012
Total CAE incurred	$9,192,821	$8,250,046
Less current year unpaid CAE	(1,118,000)	(850,000)
Add prior year unpaid CAE	850,000	775,000
Total CAE paid	$8,924,821	$8,175,046

26. INTERCOMPANY POOLING ARRANGEMENTS

SHP did not have any intercompany pooling arrangements in 2013 or 2012.

27. STRUCTURED SETTLEMENTS

Not applicable to health entities.

28. HEALTH CARE RECEIVABLES

Pharmaceutical Rebates Receivable — Pharmaceutical rebates receivable are recorded when reasonably estimated or billed by the unaffiliated pharmaceutical benefit manager in accordance with pharmaceutical rebate contract provisions. Information used to support rebates billed to the manufacturer is based on utilization information gathered by the pharmaceutical benefit manager and adjusted for significant changes in pharmaceutical contract provisions. SHP has excluded receivables that do not meet the admissibility criteria from the statutory-basis statements of admitted assets, liabilities, and capital and surplus.

The quarterly collection history of pharmacy rebates for the past three years is summarized in the table below.

Quarter	Estimated Pharmacy Rebates as Reported on Financial Statements	Pharmacy Rebates as Billed or Otherwise Confirmed	Actual Rebates Received within 90 Days of Billing	Actual Rebates Received within 91 to 180 Days of Billing	Actual Rebates Received More than 180 Days After Billing
December 31, 2013	$ -	$ -	$ -	$ -	$ -
September 30, 2013		733,554			
June 30, 2013		709,814		686,829	
March 31, 2013		709,847		732,652	
December 31, 2012		606,204		638,670	
September 30, 2012		613,555		664,542	
June 30, 2012	578,475	580,885		525,510	
March 31, 2012	527,756	518,158		525,109	
December 31, 2011	428,629	425,942		386,379	
September 30, 2011	438,787	425,135		415,562	
June 30, 2011		405,857		411,653	
March 31, 2011		384,198		381,119	

SHP did not admit health care receivables as of December 31, 2013 and 2012, respectively.

Risk Sharing Receivables — Not applicable.

29. PARTICIPATING POLICIES

SHP did not have any participating policies in 2013 or 2012.

30. PREMIUM DEFICIENCY RESERVES

SHP recorded a premium deficiency reserve of $873,000 and $743,000 based on an evaluation as of December 31, 2013 and 2012, respectively. Premium deficiency reserves are included in aggregate health policy reserves in the statutory-basis statements of admitted assets, liabilities, and capital and surplus. A discount rate of 3% was used in this analysis at December 31, 2013 and 2012.

Liability carried for premium deficiency reserves	$ 873,000
Date of the most recent evaluation of this liability	December 31, 2013
Was anticipated investment income utilized in the calculation?	Yes [X] No [ ]

31. ANTICIPATED SALVAGE AND SUBROGATION

Due to the type of business being written, SHP has no salvage. As of December 31, 2013 and 2012, SHP had no specific accruals established for outstanding subrogation as it is considered a component of the actuarial calculations used to develop the estimates of claims unpaid.

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SUPPLEMENTAL SCHEDULES

SUPPLEMENTAL SCHEDULES
EXHIBIT I: SUPPLEMENTAL SCHEDULE OF INVESTMENT RISKS INTERROGATORIES

SUPPLEMENT FOR THE YEAR 2013 OF THE SANFORD HEALTH PLAN

SUPPLEMENTAL INVESTMENT RISKS INTERROGATORIES

For The Year Ended December 31, 2013

(To Be Filed by April 1)

Of The SANFORD HEALTH PLAN

Address (City, State and Zip Code) Sioux Falls, SD 57103

NAIC Group Code 01246 NAIC Company Code 95683 Employer's ID Number 91-1842494

The Investment Risks Interrogatories are to be filed by April 1. They are also to be included with the Audited Statutory Financial Statements.

Answer the following interrogatories by reporting the applicable U. S. dollar amounts and percentages of the reporting entity's total admitted assets held in that category of investments.

1. Reporting entity's total admitted assets as reported on Page 2 of this annual statement. $ 51,347,204.78

2. Ten largest exposures to a single issuer/borrower/investment.

	1 Issuer	2 Description of Exposure	3 Amount	4 Percentage of Total Admitted Assets
2.01	FIRST PREMIER BANK	CHECKING ACCOUNT	$ 3,509,589.28	6.8 %
2.02	FANNIE MAE (FNMA)	MORTGAGE-BACKED SECURITIES	$ 3,100,803.76	6.0 %
2.03	FREDDIE MAC (FHLMC)	MORTGAGE-BACKED SECURITIES	$ 2,539,239.46	4.9 %
2.04	WELLS FARGO	CHECKING ACCOUNT/CORPORATE BONDS/PREF ST	$ 2,319,397.22	4.5 %
2.05	CREDIT SUISSE	CORPORATE BONDS	$ 1,503,217.33	2.9 %
2.06	ARCHER DANIELS MIDLAND	CORPORATE BONDS	$ 1,135,098.20	2.2 %
2.07	GENERAL ELECTRIC	CORPORATE BONDS	$ 528,838.97	1.0 %
2.08	GOLDMAN SACHS	CORPORATE BONDS/CERTIFICATES OF DEPOSIT	$ 499,033.75	1.0 %
2.09	STATOIL	CORPORATE BONDS	$ 492,514.63	1.0 %
2.10	TARGET CORP	CORPORATE BONDS	$ 462,819.49	0.9 %

3. Amounts and percentages of the reporting entity's total admitted assets held in bonds and preferred stocks by NAIC designation.

	Bonds	1	2		Preferred Stocks	3	4	
3.01	NAIC 1	$ 38,267,453.44	74.5	%	3.07 P/RP-1	$ 665,838.53	1.3	%
3.02	NAIC 2	$ 288,654.66	0.6	%	3.08 P/RP-2	$ 162,400.00	0.3	%
3.03	NAIC 3	$ 0.00	0.0	%	3.09 P/RP-3	$	0.0	%
3.04	NAIC 4	$ 0.00	0.0	%	3.10 P/RP-4	$	0.0	%
3.05	NAIC 5	$ 0.00	0.0	%	3.11 P/RP-5	$	0.0	%
3.06	NAIC 6	$ 0.00	0.0	%	3.12 P/RP-6	$	0.0	%

4. Assets held in foreign investments:

4.01 Are assets held in foreign investments less than 2.5% of the reporting entity's total admitted assets? Yes [ ] No [X]

If response to 4.01 above is yes, responses are not required for interrogatories 5 – 10.

4.02	Total admitted assets held in foreign investments	$ 2,034,776.78	4.0	%
4.03	Foreign-currency-denominated investments	$	0.0	%
4.04	Insurance liabilities denominated in that same foreign currency	$	0.0	%

SUPPLEMENTAL INVESTMENT RISKS INTERROGATORIES (cont.)

5. Aggregate foreign investment exposure categorized by NAIC sovereign designation:

		1	2	
5.01	Countries designated NAIC 1	$ 2,034,776.78	4.0	%
5.02	Countries designated NAIC 2	$	0.0	%
5.03	Countries designated NAIC 3 or below	$	0.0	%

6. Largest foreign investment exposures by country, categorized by the country's NAIC sovereign designation:

		1	2	
	Countries designated NAIC 1:			
6.01	Country 1: UNITED KINGDOM	$ 622,676.01	1.2	%
6.02	Country 2: NORWAY	$ 492,514.63	1.0	%
	Countries designated NAIC 2:			
6.03	Country 1:	$	0.0	%
6.04	Country 2:	$	0.0	%
	Countries designated NAIC 3 or below:			
6.05	Country 1:	$	0.0	%
6.06	Country 2:	$	0.0	%

		1	2	
7.	Aggregate unhedged foreign currency exposure	$	0.0	%

8. Aggregate unhedged foreign currency exposure categorized by NAIC sovereign designation:

		1	2	
8.01	Countries designated NAIC 1	$	0.0	%
8.02	Countries designated NAIC 2	$	0.0	%
8.03	Countries designated NAIC 3 or below	$	0.0	%

9. Largest unhedged foreign currency exposures by country, categorized by the country's NAIC sovereign designation:

		1	2	
	Countries designated NAIC 1:			
9.01	Country 1:	$	0.0	%
9.02	Country 2:	$	0.0	%
	Countries designated NAIC 2:			
9.03	Country 1:	$	0.0	%
9.04	Country 2:	$	0.0	%
	Countries designated NAIC 3 or below:			
9.05	Country 1:	$	0.0	%
9.06	Country 2:	$	0.0	%

10. Ten largest non-sovereign (i.e. non-governmental) foreign issues:

	1 Issuer	2 NAIC Designation	3	4	
10.01	STATOIL	1FE	$ 492,514.63	1.0	%
10.02	RABOBANK NEDERLANDS	1FE	$ 413,706.30	0.8	%
10.03	ABBEY NATIONAL TREASURY SERV	1FE	$ 346,629.43	0.7	%
10.04	BHP FINANCE	1FE	$ 303,864.73	0.6	%
10.05	WESTPAC BK CORP	1FE	$ 151,995.39	0.3	%
10.06	BP CAP MARKETS	1FE	$ 150,741.63	0.3	%
10.07	GLAXOSMITHKLINE	1FE	$ 125,304.95	0.2	%
10.08	TOTAL CAPITAL	1FE	$ 50,019.72	0.1	%
10.09			$	0.0	%
10.10			$	0.0	%

SUPPLEMENTAL INVESTMENT RISKS INTERROGATORIES (cont.)

11. Amounts and percentages of the reporting entity's total admitted assets held in Canadian investments and unhedged Canadian currency exposure:

11.01 Are assets held in Canadian investments less than 2.5% of the reporting entity's total admitted assets? ..... Yes [X] No [ ]

If response to 11.01 is yes, detail is not required for the remainder of Interrogatory 11.

		1	2
11.02	Total admitted assets held in Canadian investments	$ 560,441,20	1.1 %
11.03	Canadian-currency-denominated investments	$	0.0 %
11.04	Canadian-denominated insurance liabilities	$	0.0 %
11.05	Unhedged Canadian currency exposure	$	0.0 %

12. Report aggregate amounts and percentages of the reporting entity's total admitted assets held in investments with contractual sales restrictions.

12.01 Are assets held in investments with contractual sales restrictions less than 2.5% of the reporting entity's total admitted assets? ..... Yes [X] No [ ]

If response to 12.01 is yes, responses are not required for the remainder of Interrogatory 12.

		1	2	3
12.02	Aggregate statement value of investments with contractual sales restrictions	$		0.0 %
	Largest three investments with contractual sales restrictions:			
12.03		$		0.0 %
12.04		$		0.0 %
12.05		$		0.0 %

13. Amounts and percentages of admitted assets held in the ten largest equity interests:

13.01 Are assets held in equity interest less than 2.5% of the reporting entity's total admitted assets? ..... Yes [X] No [ ]

If response to 13.01 is yes, responses are not required for the remainder of Interrogatory 13.

	1 Issuer	2	3
13.02		$	0.0 %
13.03		$	0.0 %
13.04		$	0.0 %
13.05		$	0.0 %
13.06		$	0.0 %
13.07		$	0.0 %
13.08		$	0.0 %
13.09		$	0.0 %
13.10		$	0.0 %
13.11		$	0.0 %

SUPPLEMENTAL INVESTMENT RISKS INTERROGATORIES (cont.)

14. Amounts and percentages of the reporting entity's total admitted assets held in nonaffiliated, privately placed equities:

14.01 Are assets held in nonaffiliated, privately placed equities less than 2.5% of the reporting entity's total admitted assets? ..... Yes [X] No [ ]

If response to 14.01 above is yes, responses are not required for the remainder of Interrogatory 14.

	1	2	3
14.02	Aggregate statement value of investments held in nonaffiliated, privately placed equities	$	0.0 %
	Largest three investments held in nonaffiliated, privately placed equities:		
14.03		$	0.0 %
14.04		$	0.0 %
14.05		$	0.0 %

15. Amounts and percentages of the reporting entity's total admitted assets held in general partnership interests:

15.01 Are assets held in general partnership interests less than 2.5% of the reporting entity's total admitted assets? ..... Yes [X] No [ ]

If response to 15.01 above is yes, responses are not required for the remainder of Interrogatory 15.

	1	2	3
15.02	Aggregate statement value of investments held in general partnership interests	$	0.0 %
	Largest three investments in general partnership interests:		
15.03		$	0.0 %
15.04		$	0.0 %
15.05		$	0.0 %

16. Amounts and percentages of the reporting entity's total admitted assets held in mortgage loans:

16.01 Are mortgage loans reported in Schedule B less than 2.5% of the reporting entity's total admitted assets? ..... Yes [X] No [ ]

If response to 16.01 above is yes, responses are not required for the remainder of Interrogatory 16 and Interrogatory 17.

	1 Type (Residential, Commercial, Agricultural)	2	3
16.02		$	0.0 %
16.03		$	0.0 %
16.04		$	0.0 %
16.05		$	0.0 %
16.06		$	0.0 %
16.07		$	0.0 %
16.08		$	0.0 %
16.09		$	0.0 %
16.10		$	0.0 %
16.11		$	0.0 %

SUPPLEMENTAL INVESTMENT RISKS INTERROGATORIES (cont.)

16. Amount and percentage of the reporting entity's total admitted assets held in the following categories of mortgage loans:

		Loans	
16.12	Construction loans	$	0.0 %
16.13	Mortgage loans over 90 days past due	$	0.0 %
16.14	Mortgage loans in the process of foreclosure	$	0.0 %
16.15	Mortgage loans foreclosed	$	0.0 %
16.16	Restructured mortgage loans	$	0.0 %

17. Aggregate mortgage loans having the following loan-to-value ratios as determined from the most current appraisal as of the annual statement date:

Loan-to-Value		Residential		Commercial		Agricultural	
		1	2	3	4	5	6
17.01	above 95%	$	0.0 %	$	0.0 %	$	0.0 %
17.02	91% to 95%	$	0.0 %	$	0.0 %	$	0.0 %
17.03	81% to 90%	$	0.0 %	$	0.0 %	$	0.0 %
17.04	71% to 80%	$	0.0 %	$	0.0 %	$	0.0 %
17.05	below 70%	$	0.0 %	$	0.0 %	$	0.0 %

18. Amounts and percentages of the reporting entity's total admitted assets held in each of the five largest investments in real estate:

18.01 Are assets held in real estate reported less than 2.5% of the reporting entity's total admitted assets? Yes [X] No [ ]

If response to 18.01 above is yes, responses are not required for the remainder of Interrogatory 18.

Largest five investments in any one parcel or group of contiguous parcels of real estate.

	Description 1	2	3
18.02		$	0.0 %
18.03		$	0.0 %
18.04		$	0.0 %
18.05		$	0.0 %
18.06		$	0.0 %

19. Report aggregate amounts and percentages of the reporting entity's total admitted assets held in investments held in mezzanine real estate loans:

19.01 Are assets held in investments held in mezzanine real estate loans less than 2.5% of the reporting entity's total admitted assets? Yes [X] No [ ]

If response to 19.01 is yes, responses are not required for the remainder of Interrogatory 19.

	1	2	3
19.02	Aggregate statement value of investments held in mezzanine real estate loans:	$	0.0 %
	Largest three investments held in mezzanine real estate loans:		
19.03		$	0.0 %
19.04		$	0.0 %
19.05		$	0.0 %

SUPPLEMENTAL INVESTMENT RISKS INTERROGATORIES (cont.)

20. Amounts and percentages of the reporting entity's total admitted assets subject to the following types of agreements:

	At Year-end		At End of Each Quarter		
			1st Qtr	2nd Qtr	3rd Qtr
	1	2	3	4	5
20.01 Securities lending agreements (do not include assets held as collateral for such transactions)	$	0.0 %	$	$	$
20.02 Repurchase agreements	$	0.0 %	$	$	$
20.03 Reverse repurchase agreements	$	0.0 %	$	$	$
20.04 Dollar repurchase agreements	$	0.0 %	$	$	$
20.05 Dollar reverse repurchase agreements	$	0.0 %	$	$	$

21. Amounts and percentages of the reporting entity's total admitted assets for warrants not attached to other financial instruments, options, caps, and floors:

	Owned		Written	
	1	2	3	4
21.01 Hedging	$	0.0 %	$	0.0 %
21.02 Income generation	$	0.0 %	$	0.0 %
21.03 Other	$	0.0 %	$	0.0 %

22. Amounts and percentages of the reporting entity's total admitted assets of potential exposure for collars, swaps, and forwards:

	At Year-end		At End of Each Quarter		
			1st Qtr	2nd Qtr	3rd Qtr
	1	2	3	4	5
22.01 Hedging	$	0.0 %	$	$	$
22.02 Income generation	$	0.0 %	$	$	$
22.03 Replications	$	0.0 %	$	$	$
22.04 Other	$	0.0 %	$	$	$

23. Amounts and percentages of the reporting entity's total admitted assets of potential exposure for futures contracts:

	At Year-end		At End of Each Quarter		
			1st Qtr	2nd Qtr	3rd Qtr
	1	2	3	4	5
23.01 Hedging	$	0.0 %	$	$	$
23.02 Income generation	$	0.0 %	$	$	$
23.03 Replications	$	0.0 %	$	$	$
23.04 Other	$	0.0 %	$	$	$

SUPPLEMENTAL SCHEDULES
EXHIBIT II: SUPPLEMENTAL SUMMARY
INVESTMENT SCHEDULE

SUMMARY INVESTMENT SCHEDULE

	Gross Investment Holdings		Admitted Assets as Reported in the Annual Statement			
	1	2	3	4	5	6
Investment Categories	Amount	Percentage	Amount	Securities Lending Reinvested Collateral Amount	Total (Col. 3+4) Amount	Percentage
1. Bonds:						
1.1 U.S. treasury securities	1,547,665	3.358	1,547,665		1,547,665	3.358
1.2 U.S. government agency obligations (excluding mortgage-backed securities):						
1.21 Issued by U.S. government agencies		0.000			0	0.000
1.22 Issued by U.S. government sponsored agencies	8,629,883	18.725	8,629,883		8,629,883	18.725
1.3 Non-U.S. government (including Canada, excluding mortgage-backed securities)		0.000			0	0.000
1.4 Securities issued by states, territories, and possessions and political subdivisions in the U.S.:						
1.41 States, territories and possessions general obligations	854,475	1.854	854,475		854,475	1.854
1.42 Political subdivisions of states, territories and possessions and political subdivisions general obligations	213,872	0.464	213,872		213,872	0.464
1.43 Revenue and assessment obligations	184,386	0.400	184,386		184,386	0.400
1.44 Industrial development and similar obligations		0.000			0	0.000
1.5 Mortgage-backed securities (includes residential and commercial MBS):						
1.51 Pass-through securities:						
1.511 Issued or guaranteed by GNMA	1,395,571	3.028	1,395,571		1,395,571	3.028
1.512 Issued or guaranteed by FNMA and FHLMC	3,814,352	8.276	3,814,352		3,814,352	8.276
1.513 All other		0.000			0	0.000
1.52 CMOs and REMICs:						
1.521 Issued or guaranteed by GNMA, FNMA, FHLMC or VA	2,131,726	4.625	2,131,726		2,131,726	4.625
1.522 Issued by non-U.S. Government issuers and collateralized by mortgage-backed securities issued or guaranteed by agencies shown in Line 1.521		0.000			0	0.000
1.523 All other		0.000			0	0.000
2. Other debt and other fixed income securities (excluding short term):						
2.1 Unaffiliated domestic securities (includes credit tenant loans and hybrid securities)	14,763,145	32.032	14,763,145		14,763,145	32.032
2.2 Unaffiliated non-U.S. securities (including Canada)	2,443,241	5.301	2,443,241		2,443,241	5.301
2.3 Affiliated securities		0.000			0	0.000
3. Equity interests:						
3.1 Investments in mutual funds		0.000			0	0.000
3.2 Preferred stocks:						
3.21 Affiliated		0.000			0	0.000
3.22 Unaffiliated	828,239	1.797	828,239		828,239	1.797
3.3 Publicly traded equity securities (excluding preferred stocks):						
3.31 Affiliated		0.000			0	0.000
3.32 Unaffiliated		0.000			0	0.000
3.4 Other equity securities:						
3.41 Affiliated		0.000			0	0.000
3.42 Unaffiliated		0.000			0	0.000
3.5 Other equity interests including tangible personal property under lease:						
3.51 Affiliated		0.000			0	0.000
3.52 Unaffiliated		0.000			0	0.000
4. Mortgage loans:						
4.1 Construction and land development		0.000			0	0.000
4.2 Agricultural		0.000			0	0.000
4.3 Single family residential properties		0.000			0	0.000
4.4 Multifamily residential properties		0.000			0	0.000
4.5 Commercial loans		0.000			0	0.000
4.6 Mezzanine real estate loans		0.000			0	0.000
5. Real estate investments:						
5.1 Property occupied by company		0.000	0		0	0.000
5.2 Property held for production of income (including $ ..... of property acquired in satisfaction of debt)		0.000	0		0	0.000
5.3 Property held for sale (including $ ..... property acquired in satisfaction of debt)		0.000	0		0	0.000
6. Contract loans		0.000	0		0	0.000
7. Derivatives		0.000	0		0	0.000
8. Receivables for securities		0.000	0		0	0.000
9. Securities Lending (Line 10, Asset Page reinvested collateral)		0.000	0	XXX	XXX	XXX
10. Cash, cash equivalents and short-term investments	8,049,466	17.465	8,049,466		8,049,466	17.465
11. Other invested assets	1,232,509	2.674	1,232,509		1,232,509	2.674
12. Total invested assets	46,088,529	100.000	46,088,529	0	46,088,529	100.000

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OTHER ATTACHMENTS

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February 28, 2014

Audit Committee and Management
Sanford Health Plan
Sioux Falls, SD 57103

Dear Members of the Audit Committee and Management:

We have audited, in accordance with auditing standards generally accepted in the United States of America, the statutory-basis financial statements of Sanford Health Plan (SHP) for the years ended December 31, 2013 and 2012, and have issued our report thereon dated February 28, 2014. In connection therewith, we advise you as follows:

a. We are independent certified public accountants with respect to SHP and conform to the standards of the accounting profession as contained in the Code of Professional Conduct and pronouncements of the American Institute of Certified Public Accountants, and the Rules of Professional Conduct of the Minnesota State Board of Public Accountancy.

b. The engagement partner and engagement manager, who are certified public accountants, have 13 years and 7 years, respectively, of experience in public accounting and are experienced in auditing insurance enterprises. Members of the engagement team, most of whom have had experience in auditing insurance enterprises and 50% of whom are certified public accountants, were assigned to perform tasks commensurate with their training and experience.

c. We understand that SHP intends to file its audited statutory-basis financial statements and our report thereon with the South Dakota Department of Commerce and Regulation, Division of Insurance and other state insurance departments in states in which SHP is licensed and that the insurance commissioners of those states will be relying on that information in monitoring and regulating the statutory-basis financial condition of SHP.

d. While we understand that an objective of issuing a report on the statutory-basis financial statements is to satisfy regulatory requirements, our audit was not planned to satisfy all objectives or responsibilities of insurance regulators. In this context, SHP and insurance commissioners should understand that the objective of an audit of statutory-basis financial statements in accordance with auditing standards generally accepted in the United States of America is to form an opinion and issue a report on whether the statutory-basis financial statements present fairly, in all material respects, the admitted assets, liabilities, and capital and surplus, results of operations, and cash flows in accordance with accounting practices prescribed or permitted by the South Dakota Department of Commerce and Regulation, Division of Insurance. Consequently, under auditing standards generally accepted in the United States of America, we have the responsibility, within the inherent limitations of the auditing process, to plan and perform our audit to obtain reasonable assurance regarding whether the statutory-basis financial statements are free from material misstatement, whether due to error or fraud, and to exercise due professional care in the conduct of the audit. SHP is not required to have, nor were we engaged to perform, an audit of internal control over financial reporting. Our audit included consideration of internal control relevant to the entity's preparation and fair presentation of the statutory-basis financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of internal control over financial reporting. The concept of selective testing of the data being audited, which involves judgment both as to the number of transactions to be audited and the areas to be tested, has

been generally accepted as a valid and sufficient basis for an auditor to express an opinion on statutory-basis financial statements. Audit procedures that are effective for detecting errors, if they exist, may be ineffective for detecting misstatements resulting from fraud. Because of the characteristics of fraud, particularly those involving concealment and falsified documentation (including forgery), a properly planned and performed audit may not detect a material misstatement resulting from fraud. In addition, an audit does not address the possibility that material misstatements may occur in the future. Also, our use of professional judgment and the assessment of materiality for the purpose of our audit mean that matters may exist that would have been assessed differently by insurance commissioners.

e. It is the responsibility of the management of SHP to adopt sound accounting policies, to maintain an adequate and effective system of accounts, and to establish and maintain internal control that will, among other things, provide reasonable, but not absolute, assurance that assets are safeguarded against loss from unauthorized use or disposition and that transactions are executed in accordance with management's authorization and are recorded properly to permit the preparation of statutory-basis financial statements in conformity with accounting practices prescribed or permitted by the South Dakota Department of Commerce and Regulation, Division of Insurance.

f. The Insurance Commissioner should exercise due diligence to obtain whatever other information that may be necessary for the purpose of monitoring and regulating the statutory-basis financial position of insurers and should not rely solely on the independent auditors' report.

g. We will retain the working papers prepared in the conduct of our audit until the South Dakota Department of Commerce and Regulation, Division of Insurance has filed a Report of Examination covering 2013, but no longer than seven calendar years from the date of the audit report or until the filing of the report on examination covering the period of the audit, whichever is longer. After notification to SHP, we will make the working papers available for review by the South Dakota Department of Commerce and Regulation, Division of Insurance at the offices of the insurer, at our offices, at the South Dakota Department of Commerce and Regulation, Division of Insurance, or at any other reasonable place designated by the Insurance Commissioner. Furthermore, in the conduct of the aforementioned periodic review by the South Dakota Department of Commerce and Regulation, Division of Insurance, photocopies of pertinent audit working papers may be made (under the control of Deloitte & Touche LLP) and such copies may be retained by the South Dakota Department of Commerce and Regulation, Division of Insurance.

h. The engagement partner has served in this capacity with respect to SHP since 2013, is licensed by the Minnesota State Board of Public Accountancy, and is a member in good standing of the American Institute of Certified Public Accountants.

i. To the best of our knowledge and belief, we are in compliance with the requirements of Section 7 of the National Association of Insurance Commissioners' Model Rule (Regulation) Requiring Annual Audited Financial Reports regarding qualifications of independent certified public accountants.

This letter is intended solely for the information and use of the Audit Committee and management of SHP for filing with the South Dakota Department of Commerce and Regulation, Division of Insurance and other state insurance departments to whose jurisdiction SHP is subject and is not intended to be, and should not be, used by anyone other than these specified parties.

Yours Truly,

Deloitte & Touche LLP

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February 28, 2014

Audit Committee and Management
Sanford Health Plan
Sioux Falls, South Dakota

Dear Members of the Audit Committee and Management:

In planning and performing our audit of the statutory-basis financial statements of Sanford Health Plan (SHP) as of and for the year ended December 31, 2013 (on which we have issued our report dated February 28, 2014), in accordance with auditing standards generally accepted in the United States of America, we considered SHP's internal control over financial reporting as a basis for designing audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of SHP's internal control over financial reporting. Accordingly, we do not express an opinion on the effectiveness of SHP's internal control over financial reporting.

Our consideration of internal control over financial reporting was for the limited purpose described in the first paragraph and was not designed to identify all deficiencies in internal control over financial reporting that might be material weaknesses and therefore, material weaknesses may exist that were not identified. We did not identify any deficiencies in internal control over financial reporting that we consider to be material weaknesses as of December 31, 2013.

The definitions of a deficiency and a material weakness are set forth in the attached Appendix I.

A description of the responsibility of management for establishing and maintaining internal control over financial reporting and of the objectives of and inherent limitations of internal control over financial reporting, is set forth in the attached Appendix II and should be read in conjunction with this report.

This report is intended solely for the information and use of the Audit Committee, management, others within the organization, and state insurance departments to whose jurisdiction SHP is subject and is not intended to be, and should not be, used by anyone other than these specified parties.

Yours truly,

Deloitte & Touche LLP

DEFINITIONS

The definitions of a deficiency and a material weakness are as follows:

A *deficiency* in internal control over financial reporting exists when the design or operation of a control does not allow management or employees, in the normal course of performing their assigned functions, to prevent, or detect and correct misstatements on a timely basis. A deficiency in design exists when (a) a control necessary to meet the control objective is missing or (b) an existing control is not properly designed so that, even if the control operates as designed, the control objective would not be met. A deficiency in operation exists when (a) a properly designed control does not operate as designed or (b) the person performing the control does not possess the necessary authority or competence to perform the control effectively.

A *material weakness* is a deficiency, or a combination of deficiencies, in internal control over financial reporting, such that there is a reasonable possibility that a material misstatement of the entity's statutory-basis financial statements will not be prevented, or detected and corrected on a timely basis.

MANAGEMENT'S RESPONSIBILITY FOR, AND THE OBJECTIVES AND LIMITATIONS OF, INTERNAL CONTROL OVER FINANCIAL REPORTING

The following comments concerning management's responsibility for internal control over financial reporting and the objectives and inherent limitations of internal control over financial reporting are adapted from auditing standards generally accepted in the United States of America.

Management's Responsibility

SHP's management is responsible for the overall accuracy of the statutory-basis financial statements and their conformity with accounting practices prescribed or permitted by the South Dakota Department of Commerce and Regulation, Division of Insurance. In this regard, management is also responsible for establishing and maintaining effective internal control over financial reporting.

Objectives of Internal Control Over Financial Reporting

Internal control over financial reporting is a process effected by those charged with governance, management, and other personnel and designed to provide reasonable assurance about the achievement of the entity's objectives with regard to reliability of financial reporting, effectiveness and efficiency of operations, and compliance with applicable laws and regulations. Internal control over the safeguarding of assets against unauthorized acquisition, use, or disposition may include controls related to financial reporting and operations objectives. Generally, controls that are relevant to an audit of statutory-basis financial statements are those that pertain to the entity's objective of reliable financial reporting (i.e., the preparation of reliable statutory-basis financial statements that are fairly presented in conformity with accounting practices prescribed or permitted by the South Dakota Department of Commerce and Regulation, Division of Insurance.

Inherent Limitations of Internal Control Over Financial Reporting

Because of the inherent limitations of internal control over financial reporting, including the possibility of collusion or improper management override of controls, material misstatements due to error or fraud may not be prevented, or detected and corrected on a timely basis. Also, projections of any evaluation of the effectiveness of the internal control over financial reporting to future periods are subject to the risk that the controls may become inadequate because of changes in conditions, or that the degree of compliance with the policies or procedures may deteriorate.

BEFORE THE DIVISION OF INSURANCE
DEPARTMENT OF LABOR AND REGULATION
STATE OF SOUTH DAKOTA

IN THE MATTER OF THE FINANCIAL EXAMINATION OF SANFORD HEALTH PLAN	))	FINDINGS OF FACT, CONCLUSIONS OF LAW AND ORDER

On February 9, 2012, the Financial Examination Report (Report) for Sanford Health Plan (the Company) was submitted to the Director for his consideration and review, pursuant to SDCL 58-3-12. Having reviewed the Report, he makes the following Findings of Fact, Conclusions of Law and Order, pursuant to SDCL 58-3-12 and SDCL Chapter 1-26:

Findings of Fact

1.

The Company is a South Dakota domiciled nonprofit health maintenance organization subject to examination, pursuant to SDCL 58-3-1. The Company is a member of the Sanford Hospital and Health System.

2.

A financial examination of the Company was conducted for the period from January 1, 2006 through December 31, 2010. A copy of the Report is attached as Exhibit A, and by reference, is made a part of this Order.

3.

The Report was filed with the South Dakota Division of Insurance (Division) on February 9, 2012.

4.

No written response or rebuttal was received by the Division from the Company within thirty (30) days of submission of the Report, as allowed under SDCL 58-3-12.

5.

The Director has fully considered and reviewed the Report.

Conclusions of Law

1.

The Director of the Division has jurisdiction of this matter, pursuant to SDCL Chapter 58-3.

2.

Pursuant to SDCL 58-3-12 and 58-3-17, the Director must issue an Order in this matter, pursuant to SDCL Chapter 1-26. The Report may be adopted as filed or with modifications or corrections, or the Report may be rejected in full.

3.

Pursuant to SDCL 58-3-17, the Company must serve its directors with a copy of this Order and Report and file affidavits from the directors with the Division stating they have received a copy of the Order and Report.

Order

It is hereby ORDERED that the Report, attached as Exhibit A, is adopted. It is further

ORDERED that the Company is to serve a copy of the Order and Report on each member of its Board of Directors. It is further

ORDERED that within thirty (30) days of the date of this Order, the Company shall file affidavits with the Division, executed by each member of its Board of Directors, stating that they have received a copy of the Order and Report. It is further

ORDERED that within thirty (30) days of the date of this Order, the Company shall comply with the Report recommendations and provide written verification to the Director that each recommendation has been complied with. It is further

ORDERED that within thirty (30) days after the time for appeal has expired, the Company shall provide a copy of the Order and Report to each state in which it is licensed to do business and to the National Association of Insurance Commissioners (NAIC), 1100 Walnut Street, Suite 1500, Kansas City, MO 64106, and file an affidavit of mailing to the states and the NAIC with the Division within ten (10) days of the mailing. It is further

ORDERED that this Order may not be used by any person for any competitive purpose or used in a manner that would violate SDCL Chapter 58-33.

Dated this 12th day of March, 2012.

Merle Scheiber, Director
S.D. Division of Insurance

This Order may be appealed to the Circuit Court and Supreme Court, pursuant to SDCL Chapter 1-26.

BEFORE THE DIVISION OF INSURANCE
DEPARTMENT OF LABOR AND REGULATION
STATE OF SOUTH DAKOTA

IN THE MATTER OF THE FINANCIAL) CERTIFICATE OF SERVICE
EXAMINATION OF SANFORD HEALTH PLAN)

I, Wendell Malsam, the undersigned, do hereby certify that on this 12th day of March, 2012, I deposited a true and correct copy of the Findings of Fact, Conclusions of Law and Order in the United States mail, with postage prepaid thereon and addressed as follows:

Cecily Tucker, CFO
Sanford Health Plan
300 Cherapa Place, Suite 201
Sioux Falls, SD 57103

Dated at Pierre, South Dakota this 12th day of March, 2012.

Wendell Malsam, Assistant Director – Financial
S.D. Division of Insurance

REPORT OF THE FINANCIAL EXAMINATION

OF THE

SANFORD HEALTH PLAN

SIOUX FALLS, SOUTH DAKOTA

NAIC NUMBER 95683

AS OF

D E C E M B E R 3 1, 2 0 1 0

DATE OF SUBMISSION

F E B R U A R Y 9, 2 0 1 2

PARTICIPATING STATES
SOUTH DAKOTA, Zone III

REPORT NUMBER SHP-10-F

EXHIBIT A

South Dakota Department of Revenue & Regulation
Division of Insurance

445 East Capitol Avenue
Pierre, South Dakota 57501-3185
Phone: 605-773-3563
Fax: 605-773-5369

February 9, 2012

I, the undersigned, do hereby certify that the enclosed report of examination, as of December 31, 2010, of the conditions and affairs of the

SANFORD HEALTH PLAN

SIOUX FALLS, SOUTH DAKOTA

is a true and correct copy of the report. I further certify that the report was submitted to the South Dakota Division of Insurance on February 9, 2012, and to Cecily Tucker, Chief Financial Officer of Sanford Health Plan on February 9, 2012.

Marty Warns

Marty Warns, CFE
Examiner for the
South Dakota Division of Insurance

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South Dakota
Department of Revenue & Regulation
Division of Insurance

445 East Capitol Avenue
Pierre, South Dakota 57501-3185
Phone: 605-773-3563
Fax: 605-773-5369

February 9, 2012

Honorable Merle Scheiber, Director
South Dakota Division of Insurance
Department of Labor and Regulation
445 East Capitol Avenue
Pierre, SD 57501-3185

Honorable Stephen Robertson, Secretary
NAIC Midwestern Zone
Commissioner of Insurance
Indiana Department of Insurance
311 West Washington Street
Indianapolis, IN 46204-2787

Honorable Joseph Torti, Chairman
NAIC Financial Condition (E) Committee
Superintendent of Insurance
Rhode Island Insurance Division
1511 Pontiac Avenue, Bldg. 69-2
Cranston, RI 02920-4407

Chairman, Secretary and Director,

Pursuant to your instructions, and in accordance with the insurance laws of the State of South Dakota, a financial examination has been made of the

SANFORD HEALTH PLAN

SIOUX FALLS, SOUTH DAKOTA

as of December 31, 2010. The following examination report is respectfully submitted.

SCOPE OF EXAMINATION

An examination of Sanford Health Plan was performed by examiners representing the South Dakota Division of Insurance. The last examination of the Company was completed as of December 31, 2005. This examination covers the period from January 1, 2006, through December 31, 2010, together with such consideration of prior or subsequent matters as was deemed pertinent in the judgment of the examiners.

We conducted our examination in accordance with the NAIC *Financial Condition Examiners Handbook*. The Handbook requires that we plan and perform the examination to evaluate the financial condition and identify prospective risks of the Company by obtaining information about the Company including corporate governance, identifying and assessing inherent risks within the Company and evaluating system controls and procedures used to mitigate those risks. An examination also includes assessing the principles used and significant estimates made by management, as well as evaluating the overall financial statement presentation, management's compliance with Statutory Accounting Principles and annual statement instructions when applicable to domestic state regulations.

All accounts and activities of the Company were considered in accordance with the risk-focused examination process.

INTRODUCTION

Sanford Health Plan, also referred to as the Company or SHP, has its home office at 300 Cherapa Place, Suite 201, Sioux Falls, South Dakota 57103. Examiners representing the South Dakota Division of Insurance conducted this examination at the Company's home office.

SUMMARY OF SIGNIFICANT FINDINGS

MATERIAL ADVERSE FINDINGS

There are no material adverse findings.

SIGNIFICANT NON-COMPLIANCE FINDINGS

There are no significant non-compliance findings. See the Summary of Comments and Recommendations section of this report for comments regarding other findings of this examination.

MATERIAL CHANGES IN FINANCIAL STATEMENTS

The Surplus As Regards Policyholders, as determined through this examination is equal to the amount reported by the Company in its 2010 Annual Statement.

COMPLIANCE WITH PREVIOUS EXAMINATION RECOMMENDATIONS

The present status of the recommendations and important comments summarized in the 2005 Financial Examination Report is as follows:

OFFICERS - It is recommended that SHP have the officers required by SDCL 47-23-24.

Present Status: The Company has complied with this recommendation.

It is also recommend that the SHP Board of Directors annually elect or appoint the officers as required by SDCL 47-23-24.

Present Status: The Company has partially complied with this recommendation.

BOARD OF DIRECTORS - It is recommended that the SVHHS Board of Trustees elect/re-elect the non-consumer Directors and that the adult enrollees of the Company's health insurance plan elect the consumer directors as provided in the Company's Bylaws.

Present Status: The Company has complied with this recommendation.

COMMITTEES - It is again recommended that the Board of Directors appoint the various committees of the Company.

Present Status: The Company has not complied with this recommendation.

NOTE A - CASH AND SHORT-TERM INVESTMENTS - It is recommended that the Company monitor the amounts of admitted assets subject to repurchase agreements so that they do not exceed the limitations of SDCL 58-27-81(5).

Present Status: The Company has complied with this recommendation.

COMPANY HISTORY

Sioux Valley Health Plan was incorporated on July 30, 1997, under the laws of the State of South Dakota as a nonprofit health maintenance organization and commenced business on January 1, 1998. The Company's name was changed to Sanford Health Plan in 2007. The Company is owned entirely by Sanford Health (SH).

CORPORATE RECORDS

ARTICLES OF INCORPORATION

The Articles of Incorporation were amended in 2007 changing the name of the Company to Sanford Health Plan. The amendment was filed with and approved by the South Dakota Secretary of State and by South Dakota Division of Insurance.

BYLAWS

The Company's Bylaws were amended and restated on May 9, 2006. The main changes were increasing the number of directors, establishing Board of Directors terms of office and changing the provision concerning the CEO. The Company's Bylaws were again amended and restated on March 13, 2007, under which all references to Sioux Valley Health Plan were changed

to Sanford Health Plan and under which all references to Sioux Valley Hospital & Health System were changed to Sanford Health. Both the 2006 and 2007 Amended and Restated Bylaws were filed with and approved by the South Dakota Division of Insurance.

MINUTES

The minutes of the meetings of the Board of Directors, Physicians Quality Committee, Credentialing Committee and Pharmacy and Quality Improvement Committee were reviewed. Meetings of all the bodies appear to have been held in accordance with the Bylaws.

MANAGEMENT AND CONTROL

OFFICERS

Officers serving on December 31, 2010, were as follows:

Name	Office
Katherine Schnabel	Chairman of the Board
Pamela Ephgrave, MD	Vice-Chairman of the Board
Clayton Van Balen, MD	Vice-Chairman of the Board
Kelby Krabbenhoft	CEO
Ruth Krystopolski	President
David Link	Executive Vice President
Lisa Carlson	Secretary
Bill Marlette	Treasurer

The Bylaws provide that the CEO with the approval of the Board of Directors may appoint other officers of the Company. SDCL 47-23-24 provides that all officers shall be elected or appointed annually by the board of directors. In 2007, the CEO appointed officers and the Directors approved the appointments. No officer appointments/approvals were made in 2008, 2009 or 2010. As required by SDCL 47-23-24, it is recommended that annually the CEO appoint officers of the Company and the Board of Directors approve such officer appointments.

BOARD OF DIRECTORS

Directors serving on December 31, 2010, were as follows:

Name and Address	Principal Affiliation
Scott Boyens, MD Sioux Falls, SD	Sanford Clinic
Steve Brennan Sioux Falls, SD	Ambesbury Industries Inc.
Kimberly Elbers Sioux Falls, SD	First National Bank of Sioux Falls
Pamela Ephgrave, MD Sioux Falls, SD	Sanford Clinic Ephgrave OBGYN
Kelby K. Krabbenhoft Sioux Falls, SD	Sanford Health
Craig Lambrecht Bismarck, ND	Medcenter One Health Systems
Gary Leighton Florence, SD	Florence Schools
David Link Sioux Falls, SD	Sanford Health
Marlin Overman Rock Rapids, IA	DGR
Kathrine Schnabel Sioux Falls, SD	Citibank
Rajesh Singh, MD Sioux Falls, SD	Sanford Clinic University Psychiatry
Dwight Thompson Grand Forks, ND	Altru Health Systems
Clayton Van Balen, MD Sioux Falls, SD	Sanford Clinic Occupation Medicine
Steve Watkins Sioux Falls, SD	Hot Stuff Foods
Michael Crandell, MD (exofficio) Sioux Falls, SD	Sanford Health Plan

COMMITTEES

The Bylaws provide for the appointing of committees by the Board of Directors. Although not appointed by the Board of Directors, the following committees were serving at December 31, 2010.

Physician Quality Committee

Michael Crandell, MD, Chairman
Dean Berg, DC
Jerome Blake, MD
LuAnn Eidsness, MD
Kevin Faber, MD
Dennis Glatt, MD
Daniel Heinemann, MD
Scott Henry, MD
David Hoversten, MD
Donald Humphreys, MD
Elizabeth Jensen, DO
Peter Johnson, MD
Bill Ladwig
Laurie Landeen, MD
Fred Lovrien, MD
James McGrann, MD
David Munson, MD
Candice Nelson, MD
Susan Nygaard
Brad Randall, MD
Gene Regier, MD
Rajesh Singh, MD
Read Sulik, MD
Jerry Walton, MD
Ronald Wiisanen, MD

Credentialing Committee

Michael Crandell, MD, Chairman
Wendell Hoffman, MD
Samy Karaz, MD
James Oakland, MD
Barry Pitt-Hart, MD
Brad Randall, MD
Benjamin Roy, MD
Thomas Solien, DC
Ronald Wiisanen, MD
David Ziegler, MD

Quality Improvement Committee

Michael Crandell, MD, Chairman
Trixy Burgess
Lisa Carlson
Terri Delfs
Steph Erp
Tammy Gerhart
Jan Griffin
Tami Haberer
Debbie Harris
Cindy Held
Tracy Kueter
Pat Rowland
Michelle Vanderwert

It is again recommended that the Company comply with its Bylaws by having the Board of Directors appoint the various committees of the Company.

CONFLICT OF INTEREST

Members of the Board of Directors complete a conflict of interest statement annually. The conflict of interest statements are submitted to

Sanford Health which collects conflict of interest statements from its subsidiary Boards.

MEMBERS

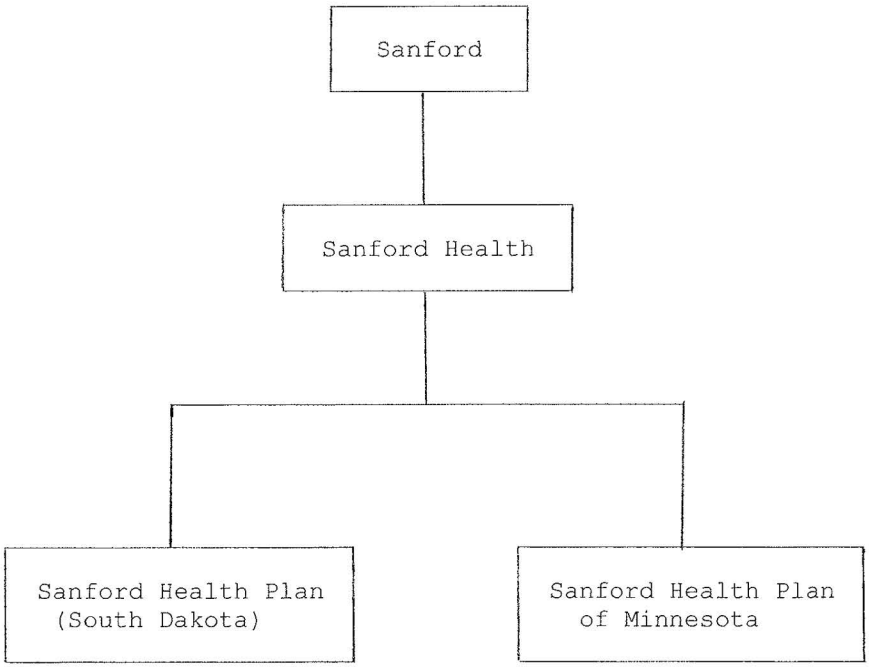
The Company is wholly-owned by Sanford Health. The sole corporate member did not hold any meetings during the period under examination.

MANAGEMENT AGREEMENTS

The Company and Sanford Health have entered into a Corporate Services Agreement. Under the terms of the agreement, Sanford Health provides corporate support services on an as needed basis to SHP. On a monthly basis, SHP reimburses Sanford Health for the actual costs of the provided services.

CORPORATE STRUCTURE

The position of SHP within the corporate structure as of December 31, 2010, follows:



FIDELITY BONDS AND OTHER INSURANCE

The Company is covered as a named insured with its parent and affiliates on a fiduciary insurance policy covering dishonesty by officers and employees. The policy provides for $10,000,000 of loss coverage. Computation of fidelity coverage recommended by the NAIC corporate fidelity bond coverage formula indicates a minimum exposure for a bond ranging in the amount of $700,000 to $800,000 for SHP. The only other insurance coverage protecting the Company is a Managed Care Errors and Omissions Liability Policy.

PENSION AND INSURANCE PLANS

The Company's employees participate in the health, vision, dental, disability and life insurance plans, flex spending plan and 401K retirement savings plan sponsored by Sanford Health. The Company reimburses Sanford Health on a monthly basis for the actual costs of the provided benefits.

TERRITORY AND PLAN OF OPERATION

As of year-end 2010, the Company was authorized to transact the business of health insurance in Iowa, North Dakota and South Dakota. The Company offers group health insurance, individual health insurance and Medicare Supplement insurance.

The Company and Great Plains Brokerage, Inc. have entered into a Sales Management Agreement. Under the agreement, Great Plains Brokerage is SHP's exclusive sales management company and is responsible for creating, staffing, training, supervising and operating the sales force in the sale of the Company's health insurance plans.

The Company also offers TPA services for self-insured employers. SHP and SH have entered into an Administrative Services Agreement. Under the Agreement, SHP is to perform the ministerial and administrative services over SH's Medical Benefit Plan.

GROWTH OF COMPANY

The following exhibits reflect historical data of the Company as reflected in SHP's Annual Statements:

Ten-Year Exhibit of
Assets, Liabilities, Capital and Surplus

Year	Admitted Assets	Liabilities	Contributed Surplus	Surplus Notes	Retained Earnings
2001	$13,308,363	$ 9,495,940	$11,316,435	$3,371,416	$(10,875,428)
2002	13,392,836	8,538,600	13,311,146	3,796,040	(12,252,950)
2003	18,310,375	13,381,072	14,612,712	3,796,040	(13,479,449)
2004	18,677,681	9,063,455	14,613,218	3,796,040	(8,795,032)
2005	19,837,257	10,797,469	14,613,218	0	(5,573,430)
2006	25,759,964	13,248,932	14,613,218	0	(2,102,186)
2007	25,317,383	15,614,014	14,613,218	0	(4,909,849)
2008	24,396,015	14,168,282	14,613,218	0	(4,385,485)
2009	24,420,315	14,896,286	14,613,218	0	(5,089,189)
2010	40,936,181	16,860,204	28,613,218	0	(4,537,241)

Ten-Year Exhibit
of Operating Income

Year	Underwriting Income	Investment Income	Other Income	Federal Income Taxes	Net Income
2001	$(1,173,736)	$ 248,424	$ 9,874	$ 0	$(915,438)
2002	(1,517,600)	169,213	925	0	(1,347,462)
2003	(434,628)	268,113	30,532	0	(135,983)
2004	3,926,880	303,147	52,392	83,233	4,199,186
2005	2,789,805	517,610	156,463	70,332	3,393,546
2006	2,225,821	960,552	181,557	61,167	3,306,763
2007	(2,170,509)	1,223,330	(688,864)	7,852	(1,643,895)
2008	(639,558)	809,672	34,090	8,171	196,033
2009	(1,429,062)	894,953	28,296	(171)	(505,642)
2010	(656,778)	868,319	(39,610)	(77,471)	249,402

LOSS EXPERIENCE

The Company's underwriting experience during the period under review, as compiled from filed annual statements, is as follows: (000's omitted)

	2006	2007	2008	2009	2010
Premiums Earned	$78,729	$93,014	$97,463	$105,851	$122,024
Deductions (Incurred)					
Medical & Hospital Exp.	$69,441	$86,278	$89,643	$ 98,063	$112,578
Claim Adjustment Exp.	3,575	4,318	4,522	5,036	7,095
Administration Expense	3,487	4,588	3,938	4,181	3,008
Total Deductions	$76,503	$95,184	$98,103	$107,280	$122,681
Net Underwriting Gain or (Loss)	$ 2,226	$(2,170)	$(640)	$(1,429)	$(657)

Losses and expenses incurred reflected as a percentage of premiums earned follows:

	2006	2007	2008	20049	2010
Medical & Hospital Exp.	88.20%	92.76%	91.98%	92.64%	92.26%
Claim Adjustment Exp.	4.54	4.64	4.64	4.76	5.81
Administration Expenses	4.43	4.93	4.04	3.95	2.47
Totals	97.17%	102.33%	100.66%	101.35%	100.54%

REINSURANCE

REINSURANCE CEDED

To minimize its exposure to large medical, physician and hospital claims, the Company entered into an excess of loss reinsurance agreement. Under the agreement, SHP retains the first $225,000 of eligible medical, hospital and physician expenses per member per year. The reinsurer is responsible for 90% of the excess eligible expenses up to a maximum $1,600,000 of eligible expenses per member per year.

The reinsurance agreement provides for risk transfer and contains insolvency, arbitration, continuance of coverage and coverage conversion provisions.

STATUTORY DEPOSITS

SDCL 58-6-34 provides that a minimum deposit of $200,000 be entrusted through the Director of Insurance by any company authorized to transact business in the State of South Dakota.

Compliance with the above provisions, based on results of the examination as of December 31, 2010, was determined as follows:

Qualified Deposits	
South Dakota:	
Money Market Funds	$300,000
Total Qualified Deposits	$300,000
Required Deposits	
Other Business:	
Deposits Required Under Statutory Law	$200,000
Total Required Deposits	$200,000
Excess of Required Deposits	$100,000

ACCOUNTS AND RECORDS

The Company and its affiliates operate as separate entities, maintaining their own files, records and books of accounts.

The Company pays direct expenses incurred. Expenses common to the Company and its affiliates are paid by Sanford Health and are then allocated to SHP according to the terms of the Corporate Services Agreement.

The Company's general ledger and its supporting journals and records are maintained by SH's EDP system. A trial balance of the 2010 general ledger was prepared and traced to the 2010 Annual Statement.

To ascertain proper compliance to prescribed operating and accounting procedures, a public accounting firm conducts an annual audit of the Company. Copies of the accounting firm's audit reports and workpapers were made available to the examiners.

FINANCIAL STATEMENTS

The following financial statements and supporting exhibits include various amounts reported by the Company for the year ending December 31, 2010.

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Liabilities, Capital and Surplus	15
Statement of Revenue and Expenses	16
Reconciliation of Surplus for the Period Since the Last Examination	18

The examination changes affecting surplus as of December 31, 2010, may be found under the caption "Comparative Statutory Balance Sheet."

ASSETS

		Current Year			Prior Year
		1	2	3	4
		Assets	Nonadmitted Assets	Net Admitted Assets (Cols. 1 - 2)	Net Admitted Assets
1.	Bonds (Schedule D)	20,712,224		20,712,224	19,654,402
2.	Stocks (Schedule D):				
	2.1 Preferred stocks	0		0	0
	2.2 Common stocks	0		0	0
3.	Mortgage loans on real estate (Schedule B):				
	3.1 First liens			0	0
	3.2 Other than first liens			0	0
4.	Real estate (Schedule A):				
	4.1 Properties occupied by the company (less $ ____ encumbrances)			0	0
	4.2 Properties held for the production of income (less $ ____ encumbrances)			0	0
	4.3 Properties held for sale (less $ ____ encumbrances)			0	0
5.	Cash ($ 18,053,771 , Schedule E-Part 1), cash equivalents ($ 0 , Schedule E-Part 2) and short-term investments ($ 560,127 , Schedule DA)	18,633,898		18,633,898	3,368,470
6.	Contract loans (including $ ____ premium notes)			0	0
7.	Derivatives			0	
8.	Other invested assets (Schedule BA)	0		0	0
9.	Receivables for securities			0	0
10.	Securities lending reinvested collateral assets			0	
11.	Aggregate write-ins for invested assets	0	0	0	0
12.	Subtotals, cash and invested assets (Lines 1 to 11)	39,346,122	0	39,346,122	23,022,872
13.	Title plants less $ ____ charged off (for Title insurers only)			0	0
14.	Investment income due and accrued	137,444		137,444	141,014
15.	Premiums and considerations:				
	15.1 Uncollected premiums and agents' balances in the course of collection	373,168	2,810	370,359	210,462
	15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due (including $ ____ earned but unbilled premiums)			0	0
	15.3 Accrued retrospective premiums			0	0
16.	Reinsurance:				
	16.1 Amounts recoverable from reinsurers	178,000		178,000	175,000
	16.2 Funds held by or deposited with reinsured companies			0	0
	16.3 Other amounts receivable under reinsurance contracts			0	0
17.	Amounts receivable relating to uninsured plans	9,640		9,640	20,478
18.1	Current federal and foreign income tax recoverable and interest thereon	57		57	0
18.2	Net deferred tax asset	1,471,000	1,278,000	193,000	300,000
19.	Guaranty funds receivable or on deposit			0	0
20.	Electronic data processing equipment and software	176,845	14,539	162,306	185,437
21.	Furniture and equipment, including health care delivery assets ($ ____)	1,025,618	1,025,618	0	0
22.	Net adjustment in assets and liabilities due to foreign exchange rates			0	0
23.	Receivables from parent, subsidiaries and affiliates	34,932		34,932	36,513
24.	Health care ($ 504,322) and other amounts receivable	1,274,122	769,801	504,322	326,520
25.	Aggregate write-ins for other than invested assets	47,218	47,218	0	0
26.	Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25)	44,074,166	3,137,985	40,936,181	24,420,315
27.	From Separate Accounts, Segregated Accounts and Protected Cell Accounts			0	0
28.	Total (Lines 26 and 27)	44,074,166	3,137,985	40,936,181	24,420,315
DETAILS OF WRITE-INS					
1101.				0	0
1102.					
1103.					
1198.	Summary of remaining write-ins for Line 11 from overflow page	0	0	0	0
1199.	Totals (Lines 1101 through 1103 plus 1198) (Line 11 above)	0	0	0	0
2501.	Prepaid Expenses	47,218	47,218	0	0
2502.					
2503.					
2598.	Summary of remaining write-ins for Line 25 from overflow page	0	0	0	0
2599.	Totals (Lines 2501 through 2503 plus 2598) (Line 25 above)	47,218	47,218	0	0

LIABILITIES, CAPITAL AND SURPLUS

	Current Year			Prior Year
	1 Covered	2 Uncovered	3 Total	4 Total
1. Claims unpaid (less $ ____ reinsurance ceded)	11,424,681	763,262	12,187,943	10,801,771
2. Accrued medical incentive pool and bonus amounts			0	0
3. Unpaid claims adjustment expenses	748,000		748,000	542,000
4. Aggregate health policy reserves			0	0
5. Aggregate life policy reserves			0	0
6. Property/casualty unearned premium reserves			0	0
7. Aggregate health claim reserves			0	0
8. Premiums received in advance	755,607		755,607	683,466
9. General expenses due or accrued	2,092,633		2,092,633	1,672,736
10.1 Current federal and foreign income tax payable and interest thereon (including $ ____ on realized capital gains (losses))			0	0
10.2 Net deferred tax liability			0	0
11. Ceded reinsurance premiums payable			0	0
12. Amounts withheld or retained for the account of others			0	0
13. Remittances and items not allocated			0	0
14. Borrowed money (including $ ____ current) and interest thereon $ ____ (including $ ____ current)			0	0
15. Amounts due to parent, subsidiaries and affiliates	1,076,021		1,076,021	1,196,293
16. Derivatives			0	
17. Payable for securities			0	0
18. Payable for securities lending			0	
19. Funds held under reinsurance treaties (with $ ____ authorized reinsurers and $ ____ unauthorized reinsurers)			0	0
20. Reinsurance in unauthorized companies			0	0
21. Net adjustments in assets and liabilities due to foreign exchange rates			0	0
22. Liability for amounts held under uninsured plans			0	0
23. Aggregate write-ins for other liabilities (including $ ____ current)	0	0	0	0
24 Total liabilities (Lines 1 to 23)	16,096,942	763,262	16,860,204	14,696,266
25. Aggregate write-ins for special surplus funds	XXX	XXX	0	0
26. Common capital stock	XXX	XXX		0
27 Preferred capital stock	XXX	XXX		0
28. Gross paid in and contributed surplus	XXX	XXX	28,613,218	14,613,218
29. Surplus notes	XXX	XXX		0
30. Aggregate write-ins for other than special surplus funds	XXX	XXX	0	0
31. Unassigned funds (surplus)	XXX	XXX	(4,537,241)	(5,089,189)
32. Less treasury stock, at cost: 32.1 ____ shares common (value included in Line 26 $ ____) 32.2 ____ shares preferred (value included in Line 27 $ ____)	XXX XXX	XXX XXX		0 0
33. Total capital and surplus (Lines 25 to 31 minus Line 32)	XXX	XXX	24,075,977	9,524,029
34. Total liabilities, capital and surplus (Lines 24 and 33)	XXX	XXX	40,936,181	24,420,315
DETAILS OF WRITE-INS				
2301. ____			0	0
2302. ____			0	0
2303. ____			0	0
2398. Summary of remaining write-ins for Line 23 from overflow page	0	0	0	0
2399. Totals (Lines 2301 through 2303 plus 2398) (Line 23 above)	0	0	0	0
2501. ____	XXX	XXX		0
2502. ____	XXX	XXX		0
2503. ____	XXX	XXX		0
2598. Summary of remaining write-ins for Line 25 from overflow page	XXX	XXX	0	0
2599. Totals (Lines 2501 through 2503 plus 2598) (Line 25 above)	XXX	XXX	0	0
3001. ____	XXX	XXX		0
3002. ____	XXX	XXX		0
3003. ____	XXX	XXX		0
3098. Summary of remaining write-ins for Line 30 from overflow page	XXX	XXX	0	0
3099. Totals (Lines 3001 through 3003 plus 3098) (Line 30 above)	XXX	XXX	0	0

STATEMENT OF REVENUE AND EXPENSES

	Current Year		Prior Year
	1 Uncovered	2 Total	3 Total
1. Member Months	XXX	410,543	373,780
2. Net premium income (including $ 0 non-health premium income)	XXX	121,189,946	105,044,458
3. Change in unearned premium reserves and reserve for rate credits	XXX		0
4. Fee-for-service (net of $ medical expenses)	XXX	834,713	806,607
5. Risk revenue	XXX		0
6. Aggregate write-ins for other health care related revenues	XXX	0	0
7. Aggregate write-ins for other non-health revenues	XXX	0	0
8. Total revenues (Lines 2 to 7)	XXX	122,024,659	105,851,065
Hospital and Medical:			
9. Hospital/medical benefits		89,927,027	79,069,710
10. Other professional services		2,372,757	2,111,141
11. Outside referrals		6,161,006	5,773,793
12. Emergency room and out-of-area		218,906	214,218
13. Prescription drugs		14,612,654	12,595,656
14. Aggregate write-ins for other hospital and medical	0	0	0
15. Incentive pool, withhold adjustments and bonus amounts			0
16. Subtotal (Lines 9 to 15)	0	113,312,349	99,784,518
Less:			
17. Net reinsurance recoveries		734,288	1,721,380
18. Total hospital and medical (Lines 16 minus 17)	0	112,578,061	98,063,138
19. Non-health claims (net)			0
20. Claims adjustment expenses, including $ 3,213,155 cost containment expenses		7,094,922	5,036,157
21. General administrative expenses		3,008,454	4,180,831
22. Increase in reserves for life and accident and health contracts (including $ increase in reserves for life only)		0	0
23. Total underwriting deductions (Lines 18 through 22)	0	122,681,437	107,280,127
24. Net underwriting gain or (loss) (Lines 8 minus 23)	XXX	(656,778)	(1,429,062)
25. Net investment income earned (Exhibit of Net Investment Income, Line 17)		888,319	894,953
26. Net realized capital gains (losses) less capital gains tax of $			0
27. Net investment gains (losses) (Lines 25 plus 26)	0	888,319	894,953
28. Net gain or (loss) from agents' or premium balances charged off [(amount recovered $) (amount charged off $)]			0
29. Aggregate write-ins for other income or expenses	0	(39,610)	28,296
30. Net income or (loss) after capital gains tax and before all other federal income taxes (Lines 24 plus 27 plus 28 plus 29)	XXX	171,931	(505,812)
31. Federal and foreign income taxes incurred	XXX	(77,471)	(171)
32. Net income (loss) (Lines 30 minus 31)	XXX	249,402	(505,641)
DETAILS OF WRITE-INS			
0601.	XXX		0
0602.	XXX		0
0603.	XXX		0
0698. Summary of remaining write-ins for Line 6 from overflow page	XXX	0	0
0699. Totals (Lines 0601 through 0603 plus 0698) (Line 6 above)	XXX	0	0
0701.	XXX		0
0702.	XXX		0
0703.	XXX		0
0798. Summary of remaining write-ins for Line 7 from overflow page	XXX	0	0
0799. Totals (Lines 0701 through 0703 plus 0798) (Line 7 above)	XXX	0	0
1401.			0
1402.			0
1403.			0
1498. Summary of remaining write-ins for Line 14 from overflow page	0	0	0
1499. Totals (Lines 1401 through 1403 plus 1498) (Line 14 above)	0	0	0
2901. Other Revenue		(39,610)	32,040
2902. Loss on Sale of Fixed Assets			(3,744)
2903.			
2998. Summary of remaining write-ins for Line 29 from overflow page	0	0	0
2999. Totals (Lines 2901 through 2903 plus 2998) (Line 29 above)	0	(39,610)	28,296

STATEMENT OF REVENUE AND EXPENSES (Continued)

		1 Current Year	2 Prior Year
	CAPITAL & SURPLUS ACCOUNT		
33.	Capital and surplus prior reporting year	9,524,029	10,227,733
34.	Net income or (loss) from Line 32	249,402	(505,641)
35.	Change in valuation basis of aggregate policy and claim reserves		0
36.	Change in net unrealized capital gains (losses) less capital gains tax of $		0
37.	Change in net unrealized foreign exchange capital gain or (loss)		0
38.	Change in net deferred income tax	(174,000)	174,000
39.	Change in nonadmitted assets	476,545	(372,063)
40.	Change in unauthorized reinsurance	0	0
41.	Change in treasury stock	0	0
42.	Change in surplus notes	0	0
43.	Cumulative effect of changes in accounting principles		0
44.	Capital Changes:		
	44.1 Paid in	0	0
	44.2 Transferred from surplus (Stock Dividend)		0
	44.3 Transferred to surplus		0
45.	Surplus adjustments:		
	45.1 Paid in	14,000,000	0
	45.2 Transferred to capital (Stock Dividend)	0	0
	45.3 Transferred from capital		0
46.	Dividends to stockholders		0
47.	Aggregate write-ins for gains or (losses) in surplus	0	0
48.	Net change in capital & surplus (Lines 34 to 47)	14,551,947	(703,704)
49.	Capital and surplus end of reporting year (Line 33 plus 48)	24,075,977	9,524,029
	DETAILS OF WRITE-INS		
4701.			0
4702.			0
4703.			0
4798.	Summary of remaining write-ins for Line 47 from overflow page	0	0
4799.	Totals (Lines 4701 through 4703 plus 4798) (Line 47 above)	0	0

RECONCILIATION OF SURPLUS FOR THE PERIOD SINCE THE LAST EXAMINATION

	2006	2007	2008
Capital and Surplus 12/31 Prior Year	$ 9,039,788	$12,511,032	$ 9,703,369
Net Income	$ 3,306,764	$(1,643,895)	$ 196,033
Change in Unrealized Capital Gains	0	0	0
Change in Net Deferred Income Tax	(1,203,000)	312,000	314,000
Change in Nonadmitted Assets	1,367,480	(1,475,768)	14,331
Paid In Surplus	0	0	0
Net Change in Capital and Surplus	$ 3,471,244	$(2,807,663)	$ 524,364
Capital and Surplus 12/31 Current Year	$12,511,032	$ 9,703,369	$10,227,733

	2009	2010
Capital and Surplus 12/31 Prior Year	$10,227,733	$ 9,524,029
Net Income	$ (505,641)	$ 249,402
Change in Unrealized Capital Gains	0	0
Change in Net Deferred Income Tax	174,000	(174,000)
Change in Nonadmitted Assets	(372,063)	476,546
Paid In Surplus	0	14,000,000
Net Change in Capital and Surplus	$ (703,704)	$14,551,948
Capital and Surplus 12/31 Current Year	$ 9,524,029	$24,075,977

COMPARATIVE STATUTORY BALANCE SHEET

The following exhibit reflects a statutory balance sheet comparison of the amounts reported by the Company in its 2010 Annual Statement and the amounts determined through examination.

	Per Company	Per Examination	Notes
Admitted Assets			
Bonds	$20,712,224	$20,712,224	
Cash and Short-Term Investments	18,633,898	18,633,898	
Investment Income Due and Accrued	137,444	137,444	
Premiums Receivable	370,359	370,359	
Amounts Recoverable From Reinsurers	178,000	178,000	
Amounts Receivable Uninsured Plans	9,640	9,640	
Federal Income Tax Recoverable	57	57	
Net Deferred Tax Asset	193,000	193,000	
EDP Equipment	162,306	162,306	
Receivable From Affiliates	34,931	34,931	
Health Care Receivable	504,322	504,322	
Total Admitted Assets	$40,936,181	$40,936,181	
Liabilities			
Claims Unpaid	$12,187,943	$12,187,943	
Unpaid Claim Adjustment Expenses	748,000	748,000	
Advance Premiums	755,607	755,607	
General Expenses Due and Accrued	2,092,633	2,092,633	
Amounts Due to Parent	1,076,021	1,076,021	
Total Liabilities	$16,860,204	$16,860,204	
Capital and Surplus			
Contributed Surplus	$28,613,218	$28,613,218	
Unassigned Funds	(4,537,241)	(4,537,241)	Note A
Net Capital and Surplus	$24,075,977	$24,075,977	Note B
Total Liabilities and Surplus	$40,936,181	$40,936,181	

EXAMINATION NOTES TO THE COMPARATIVE STATUTORY BALANCE SHEET

NOTE A - UNASSIGNED FUNDS

The unassigned funds of the Company at December 31, 2010, as determined by this examination are the same as the amount reported by the Company in its 2010 Annual Statement.

NOTE B - NET CAPITAL AND SURPLUS

The net capital and surplus of the Company at December 31, 2010, as determined by this examination, is the same as the amount reported by the Company in its 2010 Annual Statement.

SUMMARY OF COMMENTS AND RECOMMENDATIONS

Reference Page	
3	**COMPLIANCE WITH PREVIOUS EXAMINATION RECOMMENDATIONS** - The Company has not complied with all of the recommendations of the 2005 Financial Examination Report.
5	**OFFICERS** - As required by SDCL 47-23-24, it is recommended that annually the CEO appoint officers of the Company and the Board of Directors approve such officer appointments.
7	**COMMITTEES** - It is again recommended that the Company comply with its Bylaws by having the Board of Directors appoint the various committees of the Company.
20	**NOTE B - NET CAPITAL AND SURPLUS** - The net capital and surplus of the Company at December 31, 2010, as determined by this examination, is the same as the amount reported by the Company in its 2010 Annual Statement.

ACKNOWLEDGEMENT

The examiners wish to express appreciation for the cooperation extended by the officers and employees of SHP during the course of the examination.

In addition to the undersigned, Bruce Basham, CFE and Kristie Goetz, CFE, examiners for the South Dakota Division of Insurance, participated in the examination.

Respectfully submitted,

Marty Warns

Marty Warns, CFE
Division of Insurance
State of South Dakota
Representing Zone III, NAIC

Sample Company

Incurred February 2012 through January 2013
Paid February 2012 through April 2013

Presented by: Sanford Health Plan

SANFORD HEALTH PLAN

Group Reporting Package

Thank you for your continued business with Sanford Health Plan. Our unrelenting goal is to provide our clients with the highest level of customer service. As a part of our continued commitment to you, it is our pleasure to provide you with a comprehensive group reporting package.

It is important for us to help our clients understand the variables of the renewal rate calculations. However, it is important to note that your renewal is not based solely on formulas. We carefully consider each group's renewal individually. Your group is not just a conglomeration of numbers. You are a group of unique individuals. The sections below contain descriptions of the main variables which are part of your renewal calculation.

Credibility

Credibility is a statistical metric which correlates directly to group size and is a measure of claim volatility. Credibility is also impacted by the amount of historical data which is available. For example, a group that has less than 100 members and two years or fewer of historical claims data is statistically very volatile. Thus, the group has very little credibility. Conversely, a group with 1,000+ members and three or more years of historical claims is much more predictable actuarially in terms of future claims. The credibility for your group is currently 40%.

Group Size

Group size is determined by total employees eligible for health insurance or by total employees regardless of eligibility for health insurance. Group size is defined by codified law for the respective state in which the company is domiciled. Factors are assigned to differently sized groups and those factors are used in the renewal rate development calculation. Small group renewal calculations are developed primarily on the combinations of average age, gender distribution, plan design and expected health conditions of the group. Actual claims experience is not heavily weighted for small groups. Actual experience is the credibility weighted with the overall experience of SHP's commercial book of business. Large group renewal calculations rely more heavily on actual claims experience of the group. However, even though a group may be defined as "large" by state law; a group generally has to have an average of 500+ members per month to be considered credible. Your group is Large.

Pooling (Large Groups Only)

During the course of a plan year a group may have members that incur large claims. Those large claims may be considered outliers or claims that disproportionately contribute to a group's annual claims experience. In order to avoid penalizing a group for isolated large claims, the large claims are partially excluded and replaced with an expected level of claims. This is called pooling. The precise dollar amount at which claims are considered outliers is called the pooling point. The pooling point is determined by the membership and benefits offered by the group. Your pooling point is currently $40,000.

Loss Ratio

The loss ratio is a measure of the relationship between total claims paid and total premium received. It is calculated by dividing total claims by total premium. 86 cents of every premium dollar gets paid out in claims, so we target an 86% loss ratio for our book of business. Loss ratios for small and medium sized groups are volatile. The reason for the volatility is that the loss ratio has a direct relationship to credibility which is based on group size. The target loss ratio is for the entire book of business. Thus, a renewal calculation may not necessarily be intuitive for any given individual group.

Trend

Rate development calculations utilize trend as a factor. The simplest way to view trend is by equating it to inflation. Just as a dollar is worth less today than it was a year ago; healthcare costs are more expensive today than they were a year ago. Trend applies to hospital/physician services, prescription drug costs, utilization and medical advancements.

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Introduction

All reports in this specific report package are available:

- Period I
  - Incurred February 2012 through January 2013
  - Paid February 2012 through April 2013
- Period II
  - Incurred February 2011 through January 2012
  - Paid February 2011 through April 2013
- in DOC format

Selected reports within this package include period-over-period comparison.

Please note that many dollar values are rounded to the nearest dollar for increased readability. However, calculated values (such as total sums) are calculated precisely and then rounded afterwards. This produces more accurate results, but may occasionally cause calculated fields to appear inexact.

Please Note:

The information contained in this report has been produced from data provided to Verisk Health, which has not been independently verified by Verisk Health for accuracy or completeness. Additional information, including any claims that have been incurred but not paid as of the date of this report, or claims that were subject to subsequent adjustment, should be considered before any action is taken on the basis of the contents of this report. Additionally, if the underlying CPT codes for each laboratory test or panel are not submitted to Verisk Health in the medical claims, then the scores in the Quality and Risk measures may appear lower than they actually are. This report does not constitute the provision of medical or legal advice by Verisk Health to any party.

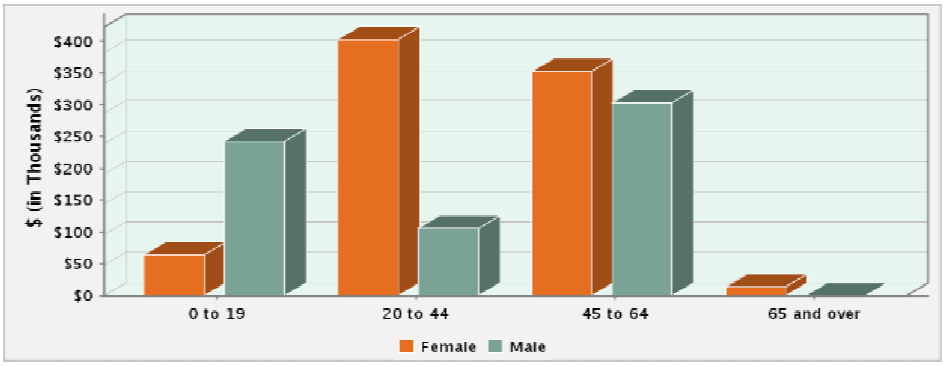
1. Membership Overview

The two tables and the figure in this section describe the membership demographics and the relationship to claims expense. This section includes medical and pharmacy claims expenses.

Table 1.1: Breakdown of Membership by Relationship

	Average Age	Members		Total Amount Billed	Employee Paid	Member Expenses	
		Total	Current			Total	% of Total
Employee	44	170	127	$1,645,272	$99,843	$724,949	47%
Spouse	43	92	73	$1,065,948	$104,648	$435,261	28%
Dependent	12	159	127	$702,507	$76,124	$395,481	25%
Total	**32**	**421**	**327**	**$3,413,726**	**$280,615**	**$1,555,691**	**100%**

Figure 1.1: Claims Paid by Gender and Age



Please Note: Average age for females is 34. Average age for males is 30.

Table 1.2: Membership Profile

	Female		Male		Total	
	Members	% of Members	Members	% of Members	Members	% of Members
Employee	53	13%	117	28%	170	40%
Spouse	77	18%	15	4%	92	22%
Dependent	67	16%	92	22%	159	38%
Total	**197**	**47%**	**224**	**53%**	**421**	**100%**

2. Health Plan Enrollment Analysis

Figure 2.1: Enrollment Category Distribution

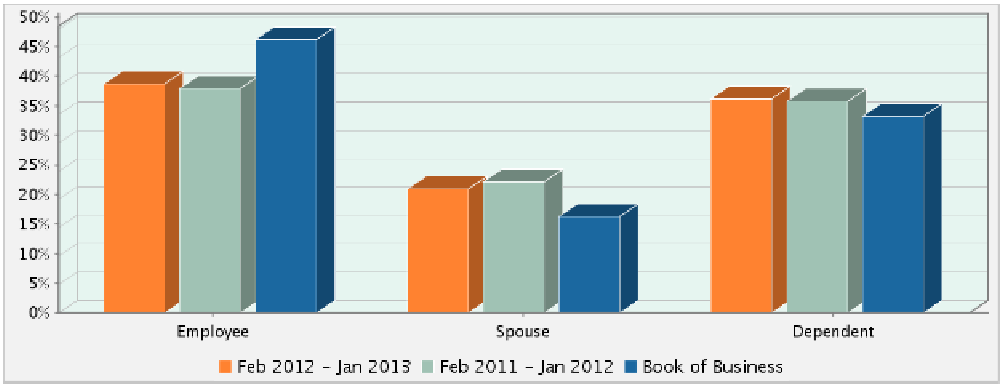


Table 2.1: Member Count by Enrollment Category

Category	Feb 2012 - Jan 2013		Feb 2011 - Jan 2012		Norm	Book of Business
	Count	%	Count	%		
Employee	170	40%	183	40%	48%	48%
Spouse	92	22%	107	23%	20%	17%
Dependent	159	38%	173	37%	32%	35%
Total Members	**421**	**100%**	**463**	**100%**	**100%**	**100%**

Please Note: Norm values are based on values derived from Verisk Health's Commercial Normative database.

Sample Company's employee population consists of 40% of the total population. 40% is eight percent lower than Verisk's norm. The dependent population is 38% of Sample Company's total population. 38% is six percent higher than Verisk's norm. The relationship between the employee and dependent population indicates that Sample Company has more family contracts than the Verisk norm.

The total population for Sample Company decreased by 42 members from the prior to current period. This is a 9.1% decrease.

Figure 2.2: Paid Claim Trend by Enrollment Category

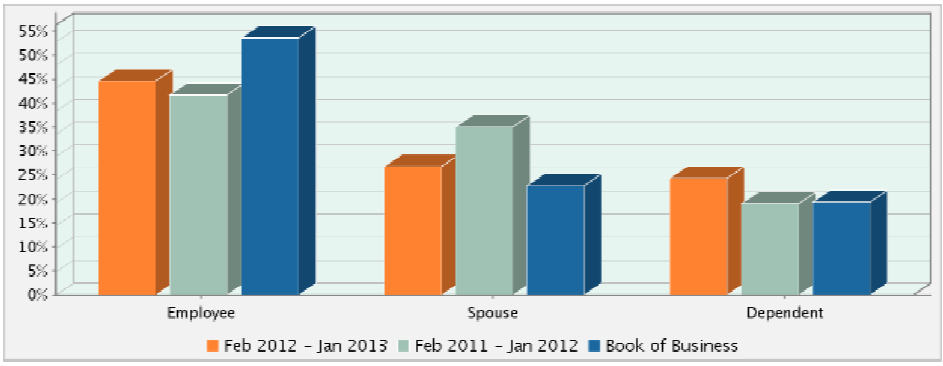


Table 2.2: Percentage of Claim Paid by Enrollment Category

Category	Feb 2012 - Jan 2013		Feb 2011 - Jan 2012		Norm	Book of Business
	Amount	%	Amount	%		
Employee	$724,949	47%	$490,543	44%	57%	56%
Spouse	$435,261	28%	$411,197	37%	28%	24%
Dependent	$395,481	25%	$224,001	20%	15%	20%
Total Members	**$1,555,691**	**100%**	**$1,125,741**	**100%**	**100%**	**100%**

Please Note: Norm values are based on values derived from Verisk Health's Commercial Normative database.

The significant increase in total claims dollars from the prior to current period is due to the number of claims over $40,000. In the prior period, the sum of claims over $40,000 was approximately $208,000. The sum of claims over $40,000 for the current period is approximately $649,000.

The $649,000 in large claims does not consist of one or two shock claims; rather it is comprised of seven claims that are over $40,000 but under $125,000.

3. Employer/Employee Share of Expenses

The following data evaluates the employer and employee paid for the current year and prior year. The user can compare the trend of the parameters as follows:

Figure 3.1: Employer/Employee Share of Expenses

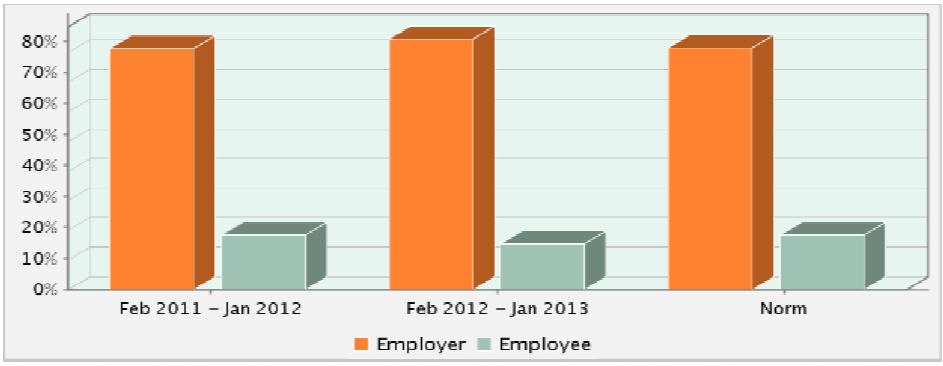


Table 3.1: Employer/Employee share of expenses

	Client		Norm
	Feb 2012 - Jan 2013	Feb 2011 - Jan 2012	
Employer Paid	85%	82%	82%
Employee Paid	15%	18%	18%

Please Note: Norm values are based on values derived from Verisk Health's Commercial Normative database.

Employee paid consists of co-pays, coinsurances, and deductibles paid by an enrollee, the spouses, and their dependents. Similarly, employer paid includes total paid by the plan for enrollee, the spouses, and their dependents. The following table breaks down the cost accordingly.

Table 3.2: Breakdown of Membership by Relationship

	Employee Paid			Employer Paid		
	Feb 2012 - Jan 2013	Feb 2011 - Jan 2012	% Change	Feb 2012 - Jan 2013	Feb 2011 - Jan 2012	% Change
Employee	$99,843	$106,278	-6%	$724,949	$490,543	48%
Spouse	$104,648	$86,895	20%	$435,261	$411,197	6%
Dependent	$76,124	$62,072	23%	$395,481	$224,001	77%
Total	**$280,615**	**$255,245**	**10%**	**$1,555,691**	**$1,125,741**	**38%**

4. Key Utilization Metrics Summary

Table 4.1 displays utilization information, typically on a services per 1000 basis, for a number of categories. A combination of variables (e.g. decreased office visits with increased ER visits) should also be considered for evaluation.

Table 4.1

Category	Metric Type	Feb 2012 - Jan 2013	Feb 2011 - Jan 2012	% Change
ER Visits	Per 1000	139	112	24%
Total Office Visits	Per 1000	4,417	3,947	12%
Regular Office Visits	Per 1000	2,777	2,558	9%
Preventive Office Visits	Per 1000	531	511	4%
Behavioral Health Office Visits	Per 1000	999	784	27%
Consultations	Per 1000	103	87	18%
Other Office Visits	Per 1000	5	8	-38%
Chiropractic Visits	Per 1000	1,280	1,223	5%
Physical Therapy	Per 1000	825	758	9%
MRI Scan	Per 1000	65	46	41%
CT Scan	Per 1000	33	38	-13%
Deliveries	Per 1000	27	20	35%
SNF Days	Per 1000	0	0	0%
Inpatient Days	Per 1000	278	237	17%
Total Admissions	Per 1000	93	79	18%
Pharmacy Scripts	Per 1000	9,794	9,682	1%
Pharmacy Scripts Mail Order	% of Mail Order	9%	8%	12%
Pharmacy Scripts Brand Drugs	% of Brand Drugs	27%	30%	-11%
Average Length of Stay	Average Days	3.0	3.0	0%

Please Note: Utilization metrics are always calculated on incurred basis.

Generic Rx utilization is up from 74.4% in the prior period to 78.6% in the current period.

Single-source brand Rx utilization is down from 19.4% in the prior period to 15.6% in the current period.

5. Key Cost Metrics Summary

Table 5.1 shows key cost metrics for the group. Any significant period-over-period percentage change should be reviewed in more detail for causes. This table provides overall per employee per month costs and trends as well as breakouts by medical and pharmacy. The breakout of costs between plan and employee identify how the employee's portion of overall costs relates to plan costs, information that is valuable in establishing plan design and cost sharing percentages. Additionally, attention should be paid to the brand/generic ratio for pharmaceuticals. If the generic percentage is too low or dropping, benefit plan and/or formulary changes should be considered.

Table 5.1

Category	Feb 2012 - Jan 2013	Feb 2011 - Jan 2012	% Change
Overall Medical Expenses (Employee + Plan)	$1,510,743	$1,104,722	37%
Employee Paid	$280,615	$255,245	10%
Plan Paid	$1,230,128	$849,477	45%
Hospital Inpatient Paid (%)	37%	28%	31%
Office Visits Paid (%)	11%	15%	-23%
Emergency Room Paid (%)	3%	3%	15%
Top 20 Diagnosis Group Paid (%)	68%	43%	59%
Overall Pharmacy Expenses (Employee + Plan)	$325,563	$276,264	18%
Employee Paid	$0	$0	0%
Plan Paid	$325,563	$276,264	18%
Mail Order Paid (%)	0%	0%	0%
Brand Drugs Paid (%)	83%	81%	3%
PMPM Expenses	$353.00	$239.52	47%
Medical	$279.13	$180.74	54%
Pharmacy	$73.87	$58.78	26%
Total PEPM Expenses	$880.41	$597.21	47%
Medical	$696.17	$450.65	54%
Pharmacy	$184.25	$146.56	26%

6. Claims Expense Distribution

This section divides the member population by total paid bands to reflect the spending trend of this population.

Figure 6.1: Member Distribution by Paid Amount Band

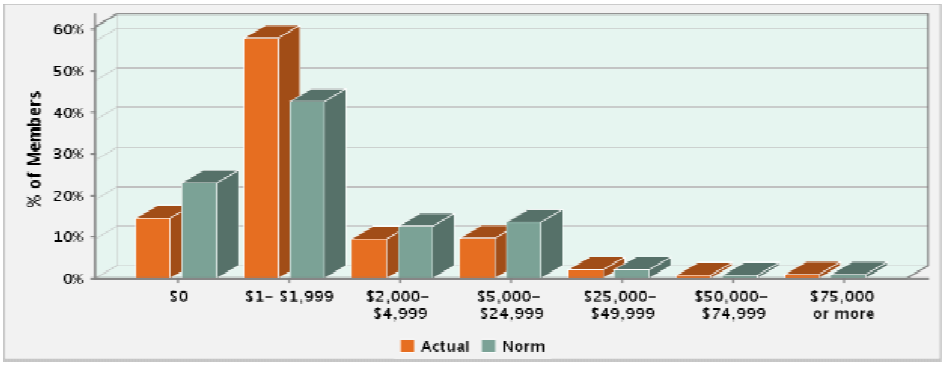


Table 6.1: Expense Distribution by Paid Amount Band

Paid Amount Band	Members			Paid			Cumulative Paid	Average Paid Per Member
	Count	%	Norm	Amount	%	Norm		
$0	64	15%	24%	$0	0%	0%	$0	$0
$1-$1,999	256	61%	45%	$126,816	8%	6%	$126,816	$495
$2,000-$4,999	42	10%	13%	$137,705	9%	9%	$264,521	$3,279
$5,000-$24,999	43	10%	14%	$412,010	26%	33%	$676,531	$9,582
$25,000-$49,999	9	2%	2%	$277,082	18%	15%	$953,613	$30,787
$50,000-$74,999	3	1%	1%	$171,256	11%	8%	$1,124,869	$57,085
$75,000 or more	4	1%	1%	$430,822	28%	29%	$1,555,691	$107,706

Please Note:

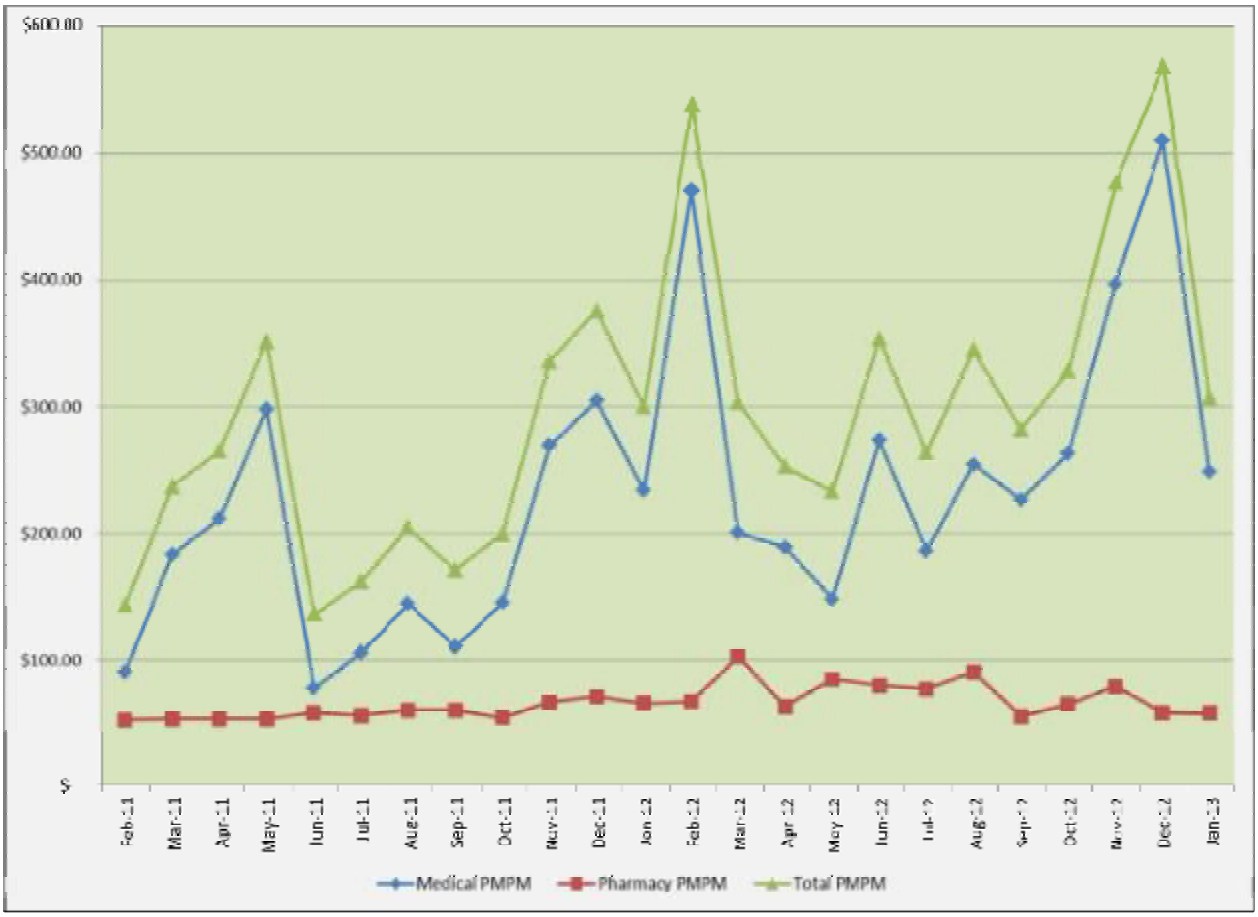
- $0 was credited back to the plan during the cycle period.
- Norm values are based on values derived from Verisk Health's Commercial Normative database.
- Claims Expense Distribution includes Medical and Pharmacy claims (to the extent that Pharmacy Claims are available).

1% of the population accounted for 28% of the total claims in the current period.
76% of the population accounted for 8% of the total claims in the current period.

7. Monthly Comparison of Paid Claims

Figure 7.1 tracks monthly claim paid amounts for the full cycle. Seasonality in claims paid (in terms of date incurred) is expected, with the highest monthly claims generally occurring in the winter. Claim volumes may also rise just before or after installation of a new health plan.

Figure 7.1: Paid Claims PMPM



8. Top 10 Places of Service Analysis

Table 8.1 shows places of service ranked according to medical claim expenses. Period-over-period percentage changes in Places of Service can be helpful when investigating changes in utilization patterns or when trying to understand the impact of plan design change. Increases in some categories may be appropriate. For example, outpatient hospital experience and office visits may increase as inpatient hospital services are more efficiently provided in the outpatient setting. Places of service experiencing large increases for many employers are Emergency Room, Outpatient Hospital, and Laboratory services.

Table 8.1

Service	Feb 2012 - Jan 2013		Feb 2011 - Jan 2012		% Change in Plan Paid
	Plan Paid	% of Total Plan Paid	Plan Paid	% of Total Plan Paid	
Inpatient Hospital	$456,863	37%	$240,187	28%	90%
Outpatient Hospital	$317,649	26%	$132,943	16%	139%
Office	$280,120	23%	$186,737	22%	50%
Ambulatory Surgical Center	$78,826	6%	$183,688	22%	-57%
Emergency Room Hospital	$62,581	5%	$49,315	6%	27%
Independent Laboratory	$17,092	1%	$25,570	3%	-33%
Home	$11,542	1%	$20,442	2%	-44%
Urgent Care Facility	$2,205	0%	$2,309	0%	-5%
Inpatient Psychiatric Facility	$2,179	0%	$288	0%	656%
Ambulance - Land	$1,071	0%	$6,545	1%	-84%
Subtotal	**$1,230,128**	**100%**	**$848,023**	**100%**	**45%**
All Others	**$0**	**0%**	**$1,454**	**0%**	**-100%**
Total	**$1,230,128**	**100%**	**$849,477**	**100%**	**45%**

9. Common Illness Analysis

Several common illnesses have been selected for analysis. Management of these key disorders may reflect effectiveness of overall medical management.

Figure 9.1: Common Illness

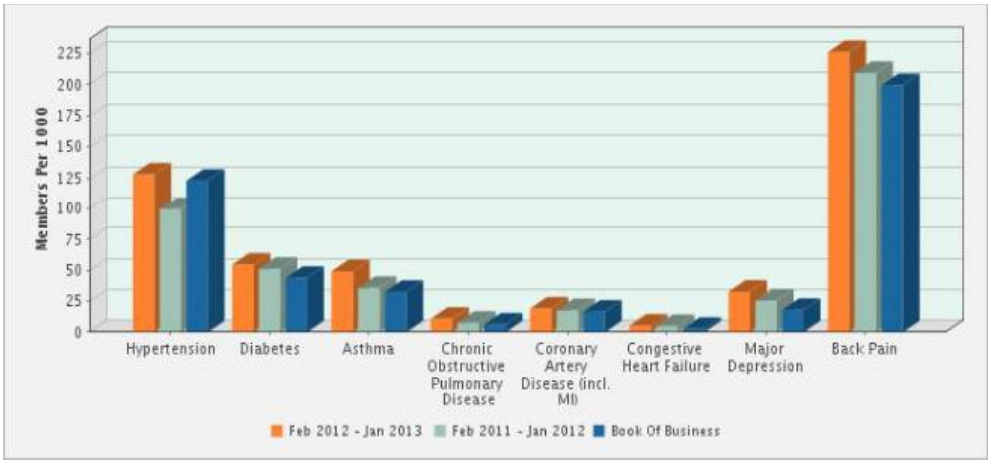


Table 9.1: Common Illness

Common Illness	Member Per 1000			
	Feb 2012 - Jan 2013	Feb 2011 - Jan 2012	Norm	Book of Business
Hypertension	128	100	102	123
Diabetes	54	51	62	44
Asthma	49	36	20	33
Chronic Obstructive Pulmonary Disease	11	8	9	6
Coronary Artery Disease (incl. MI)	19	18	20	17
Congestive Heart Failure	5	5	5	3
Major Depression	33	26	17	18
Back Pain	226	209	112	200

Please Note:

- Common Illness metrics are always calculated on incurred basis.
- Norm values are based on values derived from Verisk Health's Commercial Normative database.
- Members may fall within multiple categories.

10. Disease Conditions Utilization Summary

Monitoring the utilization patterns for disease conditions offers valuable insight into benefit design and/or case and disease management program performance. Table 10.1 presents utilization patterns of members with all disease condition, ranked by number of members, for office visits, emergency room visits and hospital admissions. In general, high utilization rates for such measures as inpatient admissions and emergency room services in these conditions bring into question the adequacy of outpatient care, plan design incentives to encourage outpatient care, and medical management performance.

Table 10.1

Disease Condition	# of Members	Members per 1000	Office Visits per 1000	ER Visits per 1000	Admissions per 1000	PMPY
Back Pain	83	226	9,621	196	157	$8,328
Neck Pain	50	136	11,716	262	131	$7,610
Hypertension	47	128	6,631	229	207	$11,841
Hyperlipidemia	42	114	5,571	214	54	$5,146
Diabetes	20	54	13,296	394	225	$8,800
Asthma	18	49	17,312	500	250	$14,314
Headache	16	44	22,467	800	267	$11,697
Major Depression	12	33	29,104	716	269	$11,855
Congenital Anomalies	8	22	6,429	0	429	$18,115
Coronary Artery Disease (incl. MI)	7	19	7,429	143	286	$20,615
Cancer	6	16	36,231	692	923	$58,692
High Risk Pregnancy	5	14	10,133	800	800	$11,483
Osteoarthritis	5	14	9,400	0	400	$14,253
Chronic Obstructive Pulmonary Disease	4	11	6,500	0	0	$3,400

Please Note:

- In this table a member can have multiple conditions.
- Metrics are always calculated on incurred basis.
- Members' total claims fall within each condition category to which they are assigned.
- Total PMPY expenses are $4,236 for the period February 2012 – January 2013.

Asthma: 11 members diagnosed; 5 with care gaps (45%)
Gaps in care (Sanford Health Plan benchmark 40%)

- Patients without inhaled corticosteroids or leukotriene inhibitor in the last 12 months
- Patients without an office visit in the last 12 months
- Patients without other inhalers in the last 12 months
- Patients without short-acting beta agonists in the last 12 months

Chronic obstructive pulmonary disease (COPD): 3 diagnosed; 2 with care gaps (67%)
Gaps in care (Sanford Health Plan benchmark 73%)

- Patients without a COPD-related long office visit in the last 12 months
- Patients without spirometry testing in the last 12 months
- Patients without an office visit in the last 12 months
- Patients not taking other nebulizers in the last 12 months

Coronary artery disease: 8 diagnosed; 4 with care gaps (50%)
Gaps in care (Sanford Health Plan benchmark 31%)

- Patients without a long office visit in the last 12 months
- Patients without antihyperlipidemic drugs in the last 12 months
- Patients without antihypertensive drugs in the last 12 months
- Patients who are not taking beta-blockers, ACE/ARB or statins in the last 12 months

Congestive heart failure (CHF): 2 diagnosed; 1 with care gaps (50%)
Gaps in care (Sanford Health Plan benchmark 50%)

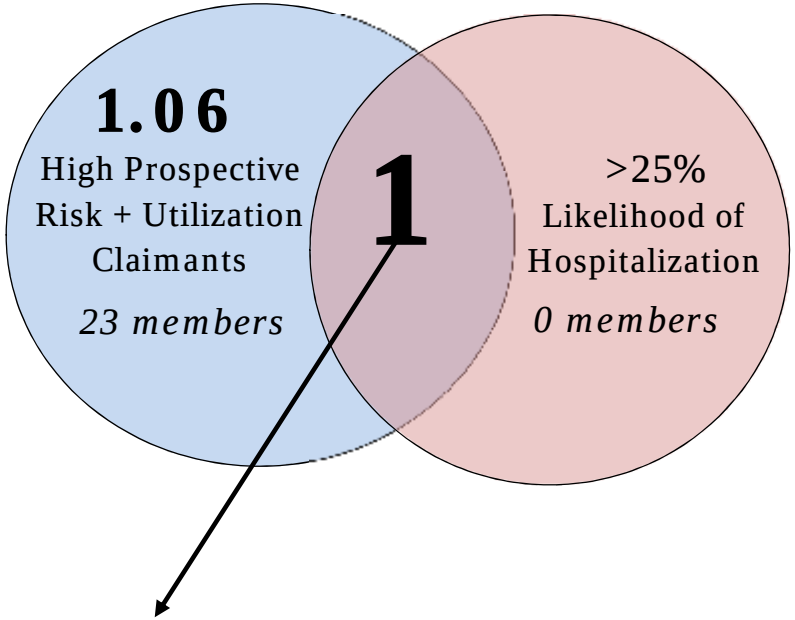
- Patients without beta-blocker drugs in the last 12 months
- Patients without a long office visit in the last 12 months
- Patients without an LDL-C or lipid profile test in the last 12 months
- Patients who are not taking beta-blockers, ACE/ARB or diuretics in the last 12 months

Diabetes: 14 diagnoses; 10 with care gaps (71%)
Gaps in care (Sanford Health Plan benchmark 56%)

- Patients without an HbA1c test in the last 12 months
- Patients without a lipid profile test in the last 12 months
- Patients without an ACE inhibitor or ARB drugs in the last 12 months
- Patients with hospitalization-related to short-term complications of diabetes in the analysis period
- Patients without home glucose measurement devices in the last 12 months
- Patients without liver function tests in the last 12 months

Sample Company

High Risk Member Analysis



High Prospective Risk + Utilization Claimants
= 24 members

Likelihood of Hospitalization > 25%
= 1 member

Individual *(by cost)*	Primary Diagnosis
1	Colorectal Cancer

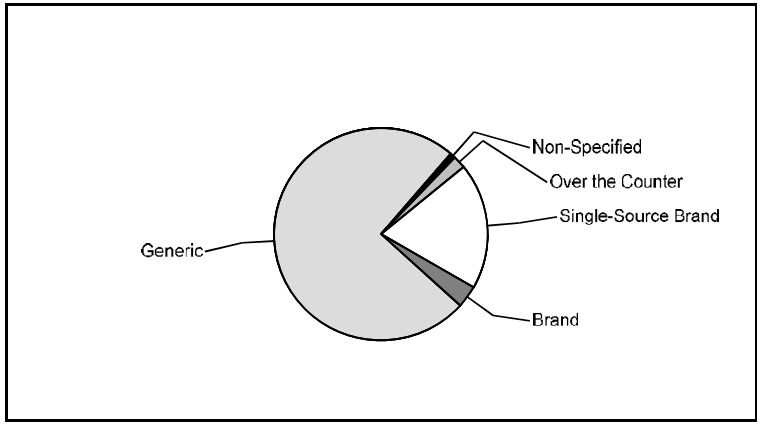
PRESCRIPTION DRUG SUMMARY

20110201 through 20120131 | 20110201 through 20120131

SANFORD HEALTH PLAN

20110201 through 20120131

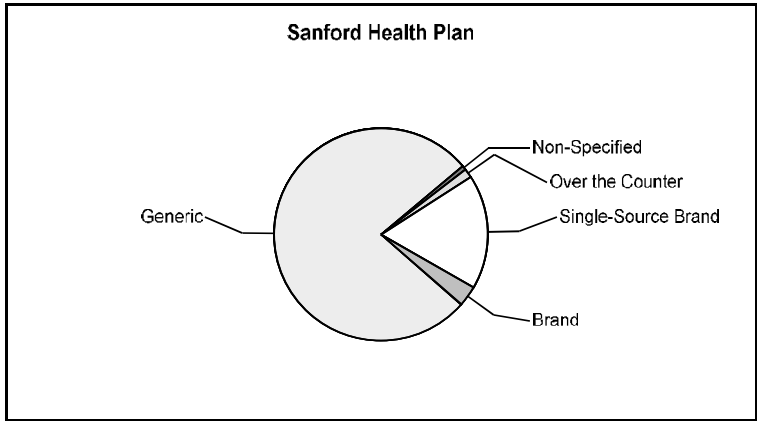
Type of Drug	Number of Fills	% of Total	Amount Billed	Mos. Supply	Average Cost
Brand	122	3.37 %	$16,646.21	131	$127.07
Generic	2,702	74.60 %	$54,322.14	3,144	$17.28
Non-Specified	31	0.86 %	$1,564.32	31	$50.46
Over the Counter	70	1.93 %	$5,406.81	107	$50.53
Single-Source Brand	697	19.24 %	$198,660.73	731	$271.77
Total	**3,622**		**$276,600.21**	**4,144**	**$66.75**



Sanford Health Plan

20110201 through 20120131

Type of Drug	Number of Fills	% of Total	Amount Billed	Mos. Supply	Average Cost
Brand	8,887	3.14 %	$765,444.35	10,269	$74.54
Generic	218,728	77.39 %	$4,771,881.04	254,924	$18.72
Non-Specified	1,808	0.64 %	$45,206.64	1,809	$24.99
Over the Counter	3,998	1.41 %	$344,522.83	5,212	$66.10
Single-Source Brand	49,209	17.41 %	$11,617,104.29	53,681	$216.41
Total	**282,630**		**$17,544,159.15**	**325,895**	**$53.83**



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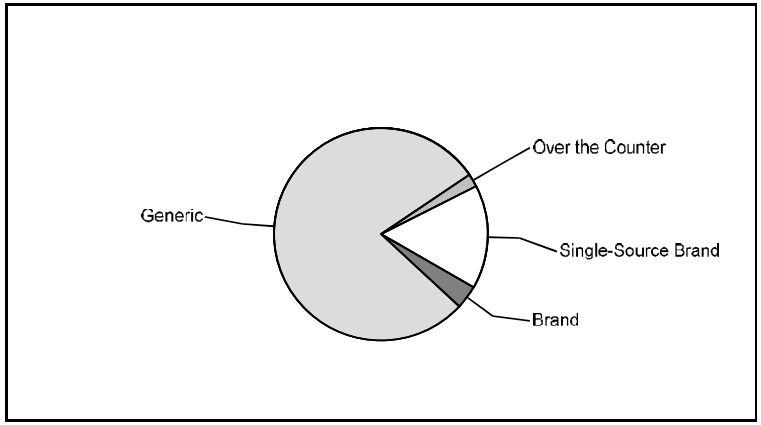
PRESCRIPTION DRUG SUMMARY

20120201 through 20130131 | 20120201 through 20130131

SANFORD HEALTH PLAN

20120201 through 20130131

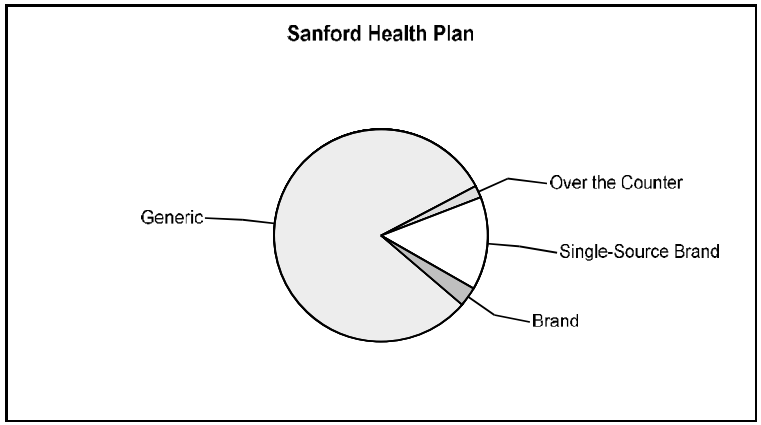
Type of Drug	Number of Fills	% of Total	Amount Billed	Mos. Supply	Average Cost
Brand	120	3.54 %	$16,319.24	130	$125.53
Generic	2,667	78.65 %	$62,433.55	3,122	$20.00
Over the Counter	68	2.01 %	$4,563.27	108	$42.25
Single-Source Brand	536	15.81 %	$242,149.54	572	$423.34
Total	**3,391**		**$325,465.60**	**3,932**	**$82.77**



Sanford Health Plan

20120201 through 20130131

Type of Drug	Number of Fills	% of Total	Amount Billed	Mos. Supply	Average Cost
Brand	8,216	2.95 %	$723,688.50	9,554	$75.75
Generic	225,985	81.05 %	$5,827,117.04	273,762	$21.29
Over the Counter	5,134	1.84 %	$419,835.86	6,782	$61.90
Single-Source Brand	39,480	14.16 %	$11,357,937.01	43,555	$260.77
Total	**278,815**		**$18,328,578.41**	**333,653**	**$54.93**



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Group:

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RX - Brand vs Generic Summary

From: 2011/02 through 2012/01

Prog/LOB: PS **Special Group:**

Group/Div No: 000XXX

GvsB	Count GvsB	%	Sum AmtBilled	Avg Cost	Sum RxMosSupply
B	128	**3.37%**	$16,646.21	$127.07	131
G	2826	**74.37%**	$54,322.14	$17.28	3144
N	33	**0.87%**	$1,564.32	$50.46	31
O	76	**2.00%**	$5,406.81	$50.53	107
S	737	**19.39%**	$198,660.73	$271.77	731
Grand Total	3800		$276,600.21	$66.75	4144

B = Brand
G = Generic
N = Non-Specified
O = Over the Counter (ie. Diabetic Supplies)
S = Single-source Brand

RX - Brand vs Generic Summary

From: 2012/02 through 2013/01

Prog/LOB: PS **Special Group:**

Group/Div No: 000XXX

GvsB	Count GvsB	%	Sum AmtBilled	Avg Cost	Sum RxMosSupply
B	130	**3.61%**	$16,319.24	$125.53	130
G	2831	**78.62%**	$62,433.55	$20.00	3122
O	78	**2.17%**	$4,563.27	$42.25	108
S	562	**15.61%**	$242,149.54	$423.34	572
Grand Total	3601		$325,465.60	$82.77	3932

B = Brand
G = Generic
N = Non-Specified
O = Over the Counter (ie. Diabetic Supplies)
S = Single-source Brand

CLIENT LOSS RATIO

Beg DOS: 20110601 End DOS: 20120531

Period	Contracts	Member Months	Total Premiums Billed	# of Med Claims Paid	% Mem w/Med Claims	Medical Claims Paid	Medical Claim Adjustments*	Medical Claims Billed	Medical Claims Allowed	Med % of Savings	# of Rx's	% of Mem w/Rx	Prescription Claims	Rx % of Savings	TOTAL Claims Paid	Adj Loss Ratio
201106	164	412	$96,692	275	28%	$31,941	$0	$72,608	$49,241	32%	368	32%	$24,065	16%	$56,005	58%
201107	158	396	$95,841	236	26%	$41,700	$0	$105,403	$59,958	43%	325	31%	$22,330	14%	$64,030	67%
201108	151	374	$92,758	272	31%	$53,906	$0	$126,633	$80,006	37%	323	32%	$22,658	15%	$76,564	83%
201109	151	369	$92,148	262	31%	$40,684	$0	$79,622	$54,273	32%	337	33%	$22,349	16%	$63,033	68%
201110	152	375	$93,719	406	45%	$54,309	$0	$142,878	$82,640	42%	332	33%	$20,501	15%	$74,810	80%
201111	154	379	$94,593	329	30%	$102,021	$0	$236,854	$139,817	41%	318	30%	$25,386	16%	$127,407	135%
201112	152	375	$93,545	325	27%	$114,264	$0	$258,648	$135,360	48%	323	31%	$26,576	16%	$140,840	151%
201201	158	385	$102,041	351	31%	$90,057	$0	$307,861	$130,682	58%	373	30%	$25,293	15%	$115,350	113%
201202	158	388	$103,027	376	32%	$182,249	$0	$420,587	$263,215	37%	306	30%	$26,106	16%	$208,356	202%
201203	156	384	$102,678	337	29%	$76,999	$0	$177,010	$105,161	41%	339	33%	$39,365	14%	$116,364	113%
201204	155	383	$102,325	293	30%	$72,415	$0	$183,710	$99,293	46%	313	30%	$24,329	17%	$96,743	95%
201205	155	382	$102,386	285	28%	$56,628	$0	$127,805	$75,350	41%	305	31%	$32,449	17%	$89,077	87%
TOTALS	155	4602	$1,171,754	3,747		$917,173	$0	$2,239,619	$1,274,996	43%	3,962		$311,406	16%	$1,228,579	105%

BeginningPaid: 20110601
Paid Through: 20130531
Group:
Spl Grp:

Prog/LOB: PS
Region: All
Period Sel: M

***ADJUST = Partial Self-Funding.**

NOTE: Information on this report is subject to change. The report is based on claims received and paid as of the date of this report.
Sanford Health Plan contracted providers must submit claims within 120 days. Beechstreet providers must submit claims within 365 days.

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Report: rptClientLossRatio

CLIENT LOSS RATIO

Beg DOS: 20120601 End DOS: 20130331

Period	Contracts	Member Months	Total Premiums Billed	# of Med Claims Paid	% Mem w/Med Claims	Medical Claims Paid	Medical Claim Adjustments*	Medical Claims Billed	Medical Claims Allowed	Med % of Savings	# of Rx's	% of Mem w/Rx	Prescription Claims	Rx % of Savings	TOTAL Claims Paid	Adj Loss Ratio
201206	153	378	$100,994	328	30%	$103,942	$0	$280,903	$143,065	49%	302	31%	$30,208	16%	$134,150	133%
201207	150	371	$97,114	283	30%	$69,090	$0	$148,457	$96,143	35%	313	29%	$28,690	16%	$97,780	101%
201208	149	367	$97,436	303	29%	$93,333	$0	$228,288	$118,117	48%	340	31%	$33,164	15%	$126,497	130%
201209	147	364	$96,112	335	41%	$82,410	$0	$207,017	$137,019	34%	307	32%	$20,260	19%	$102,670	107%
201210	143	362	$95,182	326	36%	$95,166	$0	$227,898	$120,293	47%	354	34%	$23,596	21%	$118,761	125%
201211	139	353	$93,417	328	35%	$140,015	$0	$249,508	$159,475	36%	352	34%	$28,008	15%	$168,024	180%
201212	135	348	$91,113	340	34%	$177,493	$0	$498,113	$220,646	56%	355	36%	$20,330	20%	$197,823	217%
201301	127	327	$83,330	389	33%	$81,170	$0	$273,745	$142,072	48%	350	32%	$19,058	17%	$100,228	120%
201302	128	327	$82,783	284	30%	$37,325	$0	$135,305	$76,626	43%	312	32%	$22,442	17%	$59,767	72%
201303	127	327	$82,253	330	33%	$382,640	$0	$1,032,008	$420,525	59%	356	35%	$27,942	19%	$410,582	499%
TOTALS	140	3524	$919,733	3,246		$1,262,584	$0	$3,281,242	$1,633,981	50%	3,341		$253,698	17%	$1,516,282	165%

BeginningPaid: 20120601
Paid Through: 20130531
Group:
Spl Grp:

Prog/LOB: PS
Region: All
Period Sel: M

*ADJUST = Partial Self-Funding.

NOTE: Information on this report is subject to change. The report is based on claims received and paid as of the date of this report.
Sanford Health Plan contracted providers must submit claims within 120 days. Beechstreet providers must submit claims within 365 days.

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Report: rptClientLossRatio

HEDIS Report 2013

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Plan on the best fit.

sanfordhealthplan.com

SANFORD
HEALTH PLAN

SVHP-0189 11/13

November 2013

Sanford Health has a long history of placing quality before all else as stated in our mission statement *"Dedicated to the Work of Health and Healing"*. As a subsidiary of Sanford Health, Sanford Health Plan believes that in order to meet the needs of our patients and healthcare partners, everything we do must be of the highest quality and value available in our region. We do so by utilizing Sanford Values: *Courage, Passion, Resolve, Advancement, Family*.

By improving the quality of care provided, employing the best managed care practices and principles, and partnering with our consumers, employer groups and physicians, Sanford Health Plan is able to assist in saving lives, reducing disability, improving productivity and managing health care costs.

We also believe that healing involves promoting and improving the health of our communities. To demonstrate our commitment to providing the highest quality of care and service, Sanford Health Plan would like to present our HEDIS® (Healthcare Effectiveness Data and Information Set) 2013 report along with the quality improvement activities and health management programs implemented by the Plan. This data provides you - our customer - with the information you need to judge our success in meeting our goals in various performance areas.

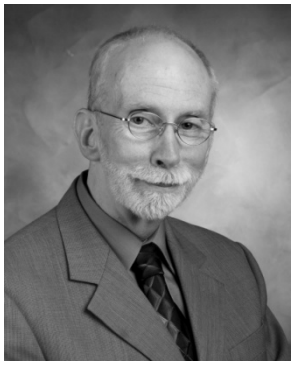
Along with Sanford Health, Sanford Health Plan's very foundation is quality. Reporting HEDIS rates will assist the Plan in identifying our strong points and areas where improvements need to be made. The Plan believes that the only way to achieve continuous quality improvement is to have its entire organization embrace a well-defined Quality Improvement Program and Annual Work Plan in their day to day activities. As this is our twelfth year of reporting, we are able to compare our rates to those of previous year's to determine where we made progress and where we did not. We look forward to future reporting years, which will allow us to continue to monitor and evaluate improvements that can be made in all aspects of our care and service delivery.

If you have any suggestions for us on how we can improve this report, or if you have any questions regarding the interpretation of the results, please feel free to contact our Care Management Department at (888) 315-0884.

Sincerely,

Ruth Krystopolski
President
Sanford Health Plan

Michael P. Crandell, MD
Chief Medical Officer
Sanford Health Plan



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Introduction

About Sanford Health Plan

Sanford Health Plan began operations in South Dakota in September 1997 as an open access, non-gatekeeper model, managed care organization. The first members were enrolled in January 1998. In January 1998, Sanford Health Plan became licensed in Minnesota. To obtain this licensure, the State of Minnesota required us to form a separate corporation known as Sanford Health Plan of Minnesota. Sanford Health Plan further expanded its service area to include Northwestern Iowa upon receiving licensure in August 1998 in that state. Sanford Health Plan also received a Certificate of Authority in February 2010 to operate in North Dakota as an expansion of its South Dakota license.

For purposes of this report, we will refer to Sanford Health Plan and Sanford Health Plan of Minnesota as "Sanford Health Plan" or "the Plan"; as operations for the two, including areas such as the quality improvement program, are one in the same. Beginning with HEDIS 2005, the Plan received permission from NCQA and the Minnesota Department of Health to combine the Sanford Health Plan and Sanford Health Plan of Minnesota populations to report one combined HEDIS rate.)

Sanford Health Plan is a wholly owned, nonprofit subsidiary of Sanford Health. The Plan is designed to provide employers and employees with the most appropriate cost effective health care possible. The Board of Trustees of Sanford Health is ultimately responsible for the Plan, but has delegated to the Sanford Health Plan Board of Directors the authority to act as the governing body. Sanford Health Plan's President and Chief Medical Officer are accountable to the Plan's Board of Directors.

Sanford Health Plan benefits are designed as a unique alternative to existing health insurance packages in our region. Applying our expertise in health care administration, quality patient care and network development, we have created a Health Plan with a focus on the health and well being of our members. Sanford Health Plan's medical management program monitors utilization and coordinates care plans to ensure that our members are receiving the most appropriate care. Also, prevention and wellness programs are built into the benefit package. This encourages members to seek treatment early and to live healthier lifestyles, thereby controlling long-term health care costs. The key to our success is our network of primary care physicians, specialists and hospitals. In partnership with these health care practitioners, Sanford Health Plan actively promotes health care education, prevention and early detection. Together, we understand the need to deliver the best possible patient care, maintaining good community health, while developing cost-effective solutions. Sanford Health Plan members have access to hundreds of area physicians and a hospital network that includes the region's most commended tertiary care facility - Sanford USD Medical Center. Because high-quality care is a priority, our network of practitioners is subject to strict credentialing guidelines and performance reviews.

In short, Sanford Health Plan has been developed to ensure that all members receive the right care, in the right place, at the right time, for the right reason.

Sanford Health Plan and its participating practitioners acknowledge their responsibility to provide high quality care in a cost-effective manner through an ongoing monitoring, evaluation and improvement process. The organized method for monitoring, evaluating, and improving the quality, safety and appropriateness of health care services including behavioral health care to members through related activities and studies is known as the Quality Improvement (QI) program. Throughout this report you will find descriptions of the quality improvement activities and health management programs that the Sanford Health Plan has implemented to improve the health and well being of its members. The activities that pertain directly to the HEDIS rates will be reported in conjunction with those rates.

Sanford Health Plan Awarded Accreditation

Commercial HMO Product
Effective through November 15, 2016

Sanford Health Plan prides itself on providing quality group health insurance and supporting wellness programs. Sanford Health Plan is equally honored to be recognized for our dedication. The National Committee for Quality Assurance (NCQA) has awarded Sanford Health Plan's commercial HMO with a Commendable Accreditation.

The NCQA Health Plan Accreditation is a voluntary review process. Surveys include rigorous on-site and off-site evaluations of over 60 standards and selected HEDIS® measures. NCQA sends a team of trained health care experts, including physicians, to conduct the survey.

According to NCQA, the standards are purposely set high to encourage health plans to continuously improve enhance their quality. They are intended to help

organizations achieve the highest level of performance possible, reduce patient risk for untoward outcomes and create an environment of continuous improvement. “The accreditation process gives our consumers and purchasers something other than cost alone to compare. It allows them to evaluate the quality of different health plans through a variety of dimensions,” said Dr. Crandell.

“Achieving an accreditation status of Commendable from NCQA is a sign that a health plan is serious about quality. It is awarded to plans whose service and clinical quality meet or exceed NCQA’s rigorous requirements for consumer protection and quality improvement.” said Margaret E. O’Kane, President, NCQA.

HEDIS®

HEDIS (Healthcare Effectiveness Data and Information Set) is a set of standardized performance measures designed to ensure that purchasers and consumers have the information they need to reliably compare healthcare quality.

Originally, HEDIS was designed to address private employers’ needs as purchasers of health care. It has since been adapted for use by public purchasers, regulators and consumers. Quality improvement activities, health management programs and practitioner profiling efforts have all used HEDIS as a core measurement set.

This report provides you with Sanford Health Plan’s HEDIS 2013 results (based on calendar year 2012 data) and the programs and activities that have been put in place to improve the health care and services the Plan provides to its members. The HEDIS measures, which are reported on an annual basis, are divided into domains that all reflect different aspects of care. The results are presented to you in comparison to NCQA’s Quality Compass® HEDIS 2011 benchmarks, which are a compilation of audited HEDIS results (based on calendar year 2010 data) from health plans across the nation. The HEDIS results are also compared to the Healthy People 2020 goals, where available. Healthy People 2020 is a set of 10-year health objectives for the United States aimed at health promotion and disease prevention initiatives. It was developed by the U.S. Department of Health and Human Services with the input of public health and prevention experts and a wide range of government officials and organizations.

The NCQA HEDIS Compliance Audit™ assures both purchasers and health plans of fair and accurate comparisons of health plan performance. Certified auditors, using a process designed by NCQA, rigorously audit the HEDIS results annually. The scope of the NCQA HEDIS Compliance Audit includes the following domains: Effectiveness of Care; Access/Availability of Care; Satisfaction with the Experience of Care; Health Plan Stability; Use of Services; Cost of Care; and Health Plan Descriptive Information. Sanford Health Plan has undergone a full audit. The following HEDIS measures in this report were deemed reportable according to the NCQA HEDIS Compliance Audit® Standards.

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NCQA HEDIS Compliance Audit™ is a trademark of the National Committee for Quality Assurance (NCQA).

Effectiveness of Care Domain

The Effectiveness of Care domain measures provide information about the quality of clinical care the Plan delivers to its members including preventive, acute and chronic care services. Many of these measures are utilized in the development and refinement of the Plan's Quality Improvement Activities, Health Management Programs and Clinical Practice Guidelines. These measures all include some form of continuous enrollment criteria which specifies that a member has to be enrolled in the Plan a certain amount of time before they may be included in the final population for the measure. This way the only members that are included in the final population are members for whom the Plan has had an adequate opportunity to provide services and education.

The Effectiveness of Care measures included in this report are:

- Adult BMI Assessment
- Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents
- Childhood Immunization Status
- Immunizations for Adolescents
- Human Papillomavirus Vaccine for Female Adolescents (HPV)
- Colorectal Cancer Screening
- Breast Cancer Screening
- Cervical Cancer Screening
- Chlamydia Screening in Women
- Appropriate Testing for Children with Pharyngitis
- Appropriate Treatment for Children with Upper Respiratory Infection
- Avoidance of Antibiotic Treatment in Adults with Acute Bronchitis
- Use of Spirometry Testing in the Assessment and Diagnosis of COPD
- Use of Appropriate Medications for People with Asthma
- Medication Management for People with Asthma
- Cholesterol Management for Patients with Cardiovascular Conditions
- Controlling High Blood Pressure
- Comprehensive Diabetes Care
- Use of Imaging Studies for Low Back Pain
- Follow-Up Care for Children Prescribed ADHD Medication
- Antidepressant Medication Management
- Follow-Up After Hospitalization for Mental Illness
- Flu Shots for Adults Ages 50 – 64
- Medical Assistance with Smoking Cessation

Adult BMI Assessment

According to the National Health and Nutrition Examination Survey (NHANES) 2007–2008, about one-third of adults in the United States are overweight and about one-third are obese. Guidelines from various organizations, including the National Heart, Lung, and Blood Institute whose clinical practice guidelines the Plan has adopted, indicate that the most useful measure of overweight and obesity is the body mass index (BMI).

Adult BMI Assessment measures the percentage of members ages 18-74 who had an outpatient visit and who had their body mass index (BMI) documented during the measurement year or the year prior to the measurement year.

Adult BMI Assessment

	HEDIS 2010	HEDIS 2011	HEDIS 2012	HEDIS 2013	National Average 2011[1]	Healthy People 2020
BMI Assessed in 2011 or 2012:	**44.04%**	**60.34%**	**73.67%**	**83.54%**	**55.4%**	**53.6%**

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Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents

According to the National Heart, Lung, and Blood Institute, the rate of obesity in children 2-5 has doubled in the last 30 years and the rate of obesity in children and adolescents ages 6-19 has tripled in that time. BMI percentile can be a useful screening tool for practitioners for assessing obesity in children and adolescents and offer the opportunity for counseling on the importance of good nutrition and physical activity.

This measure looks at the percentage of members ages 3-17 who had an outpatient visit with a PCP or OB/GYN and who had evidence of BMI percentile documentation, counseling for nutrition and counseling for physical activity during the measurement year.

Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents

	HEDIS 2010	HEDIS 2011	HEDIS 2012	HEDIS 2013	National Average 2011[1]	Healthy People 2020
BMI Percentile Assessed in 2012:	**31.63%**	**39.66%**	**49.64%**	**66.42%**	**44.7%**	**54.7%**
Counseling for Nutrition in 2012:	**25.30%**	**30.66%**	**32.60%**	**48.42%**	**46.4%**	**15.2%**
Counseling for Physical Activity in 2012:	**29.44%**	**32.60%**	**33.09%**	**48.42%**	**43.0%**	

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Childhood and Adolescent Immunization Status

Immunizations prevent serious illnesses, lost school and work days and millions of dollars in health care costs. This measure was developed based on immunization recommendations from the Centers for Disease Control and Prevention, the American Academy of Pediatrics, the American Academy of Family Physicians and the Advisory Committee on Immunization Practices.

Childhood Immunization Status involves measuring the percentage of enrolled children who turned 2 years old during the measurement year, who were continuously enrolled for 12 months preceding their 2nd birthday and who were identified as having the recommended vaccinations by their 2nd birthday. These vaccinations include:

1. **4 DTaP** (diphtheria, tetanus and pertussis) vaccines on or before child's 2nd birthday. Vaccinations administered prior to 42 days after birth are not counted.
2. **3 IPV** (polio) vaccinations on or before child's 2nd birthday. Vaccinations administered prior to 42 days after birth are not counted.
3. **1 MMR** (measles, mumps and rubella) on or before child's 2nd birthday.
4. **3 HiB** (Haemophilus influenza type B) vaccinations on or before 2nd birthday. Vaccinations administered prior to 42 days after birth are not counted.
5. **3 Hepatitis B** vaccinations on or before child's 2nd birthday.
6. **1 VZV** (chicken pox) vaccine on or before child's 2nd birthday.
7. **4 Pneumococcal conjugate** vaccinations on or before child's 2nd birthday.
8. **1 Hepatitis A** vaccinations on or before child's 2nd birthday.
9. **3 Rotavirus** (or 2 if the 2 dose type) vaccinations on or before child's 2nd birthday. Vaccinations administered prior to 42 days of birth are not counted.
10. **2 Influenza** vaccinations on or between 6 months after birth and child's 2nd birthday.

There are also 9 combination rates now calculated which consist of various combinations of the above vaccinations. Two of these combination rates are:

1. **Combination #2**: Children who have received 4 DtaP vaccinations, 3 IPV vaccinations, 1 MMR vaccination, 2 HiB vaccinations, 3 hepatitis B vaccinations and 1 VZV vaccination as specified above.
2. **Combination #3**: Children who have received all vaccinations in Combination #2 as well as 4 pneumococcal conjugate vaccinations as specified above.

Childhood Immunization Status

	HEDIS 2010	HEDIS 2011	HEDIS 2012	HEDIS 2013	National Average 2011[1]	Healthy People 2020[2]
4 DTaP	83.70%	84.59%	86.64%	90.13%	86.5%	90%
3 IPV	92.54%	96.07%	96.58%	94.55%	92.4%	90%
1 MMR	90.06%	91.80%	93.49%	94.81%	91.5%	90%
3 Hib	94.75%	95.74%	95.89%	95.84%	94.1%	90%
3 Hepatitis b	93.92%	94.43%	92.81%	92.21%	87.9%	90%
1 VZV	87.02%	91.80%	91.44%	94.03%	91.3%	90%
4 Pneumococcal	81.22%	88.20%	86.30%	90.91%	87.0%	90%
Hepatitis A	27.90%	22.30%	27.74%	63.9%	39.0%	60%
Rotavirus	54.70%	68.20%	68.15%	72.73%	75.1%	80%
Influenza	59.39%	65.25%	66.44%	75.58%	61.1%	80%
Combination #2	78.18%	79.02%	79.11%	85.19%	78.0%	
Combination #3	71.82%	74.10%	75.68%	84.42%	75.7%	80%

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[2]Healthy People 2020 target is based on children ages 19 through 35 months.

Immunizations for Adolescents involves measuring the percentage of enrolled adolescents who turned 13 years old during the measurement year, who were continuously enrolled for 12 months preceding their 13th birthday and who were identified as having the recommended vaccinations by their 13th birthday. These vaccinations include:

1. **1 meningococcal conjugate or meningococcal polysaccharide** vaccine on or between the adolescent's 11th and 13th birthdays.
2. **1 tetanus, diphtheria toxoids and acellular pertussis vaccine (Tdap) or 1 tetanus, diphtheria toxoids vaccine (Td)** vaccine on or between the adolescent's 10th and 13th birthdays.
3. **Combination measure** looks at how many of the adolescents in this group had both of the above vaccines.

Immunizations for Adolescents

	HEDIS 2010	HEDIS 2011	HEDIS 2012	HEDIS 2013	National Average 2011[1]	Healthy People 2020[2]
Meningococcal	15.70%	23.66%	29.24%	30.03%	61.9%	44%
Tdap/Td	38.91%	40.69%	53.49%	54.31%	77.0%	47%
Combination	13.31%	22.08%	26.58%	28.72%	59.4%	

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[2]Healthy People 2020 Goal is for adults ages 13-15.

Human Papillomavirus Vaccine (HPV) for Female Adolescents involves measuring the percentage of female adolescents 13 years of age, who were continuously enrolled for 12 months preceding their 13th birthday, and who had 3 doses of the HPV vaccine by their 13th birthday.

Human Papillomavirus Vaccine (HPV) for Female Adolescents

	HEDIS 2012	HEDIS 2013	National Average 2011[1]	Healthy People 2020[2]
3 Doses of HPV Vaccine	**8.03%**	**9.44%**	**NA**	**80%**

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[2]Healthy People 2020 Goal is for adults ages 13-15.

Immunization Guidelines

Sanford Health Plan recognizes that high immunization rates help prevent the spread of vaccine preventable diseases, as well as reduce the rates of disability and death from these diseases. Prevention through immunization can help reduce future health care costs associated with treating the disease and reduces employee absenteeism.

An immunization schedule is available on the Centers for Disease Control and Prevention website at www.cdc.gov/vaccines/. A copy may also be obtained by calling the Health Plan at (888) 315-0884. These immunization guidelines are available to Plan practitioners on the website and members and practitioners are informed of the availability of the immunization schedules in the newsletters. The Preventive Health Guidelines brochure directs members to the website or to call for a copy of the immunization schedules. Adolescent wellness visit reminder activities over the last year have included a reminder to get immunizations updated. A birthday card is sent to kids turning 11 and 12 to remind them to get their annual wellness visit and recommended immunizations. Postcard reminders were also sent to a targeted group of adolescents and their parents to remind them to get their wellness physical.

Colorectal Cancer Screening

According to the American Cancer Society, colorectal cancer is the third most commonly diagnosed cancer in men and women in the United States. Screening tests can help prevent some cancers by finding and removing polyps that could become cancer in the future. In other cases, screening tests can identify cancers in their early stages and improve the chances of successful treatment.

Colorectal Cancer Screening

	HEDIS 2010	HEDIS 2011	HEDIS 2012	HEDIS 2013	National Average 2011[1]	Healthy People 2020[2]
Colorectal Cancer Screening	**54.74%**	**59.90%**	**60.51%**	**61.27%**	**62.4%**	**70.5%**

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[2]Healthy People 2020 Goal is for adults ages 50-75.

This measure looks at the percentage of adults 50 to 75 years of age who were continuously enrolled during the measurement year and year prior to the measurement year and who had appropriate screening for colorectal cancer. Appropriate screenings are defined as one of the following:

- Fecal occult blood test during the measurement year.
- Flexible sigmoidoscopy during the measurement year or the 4 years prior to the measurement year.
- Colonoscopy during the measurement year or the 9 years prior to the measurement year.

Colorectal Cancer Screening Activities

Sanford Health Plan's male and female members who are turning 40, 50 and 60 receive birthday cards that include reminders for colorectal cancer screenings and the Plan's benefit for these screenings. Preventive Health Guidelines, including colorectal cancer screening benefits, are published in the Member Messenger and Provider Perspective newsletters yearly, are included in new member Enrollment Packets, and are available on the Health Plan website at www.sanfordhealthplan.com. The colorectal cancer screening clinical practice guidelines that Sanford Health Plan adopted and recommends to practitioners are published in the Provider Perspective yearly and are also available on the Plan's website.

All members are encouraged to complete an online health risk assessment on our WorldDoc site which includes questions related to colorectal screenings. WorldDoc also offers a health library and self management tools on this site as well

As a member of the South Dakota Council on Colorectal Cancer, Sanford Health Plan also collaborates with the American Cancer Society and other health care organizations and insurance plans on improving colorectal cancer screening rates and reducing the incidence of colorectal cancer. The Council has completed community education initiatives and continuing education related to colorectal cancer.

Breast Cancer Screening

According to the American Cancer Society:

- Breast cancer is the most common cancer among women, other than skin cancer.
- Breast cancer risk increases with age and every woman is at risk regardless of family history.
- Your chance of having breast cancer some time during your life is about 1 in 8.

Mammography is one of the most effective screening methods available for detecting breast cancer. Early detection of breast cancer increases the likelihood of successful treatment.

This measure looks at the percentage of women ages 40 through 69 years, who were continuously enrolled during the measurement year and the year prior to the measurement year, and who had a mammogram during one of those years.

Breast Cancer Screening

	HEDIS 2010	HEDIS 2011	HEDIS 2012	HEDIS 2013	National Average 2011[1]	Healthy People 2020[2]
Mammogram in 2011 or 2012:	**76.46%**	**75.03%**	**74.80%**	**74.76%**	**70.50%**	**81.1%**

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[2]Healthy People 2020 Goal is based on women ages 50-74.

Breast Health Initiative

Sanford Health Plan implemented numerous activities designed to provide members with information on breast health that promotes early detection of potential breast cancer. The activities included:

- Members are asked to complete an online health risk assessment on our WorldDoc site. There is a health library and self management tools on this site as well.
- Reminders –
  - A card was mailed which included a reminder to get a mammogram, reasons for the importance and information on benefits.
  - These members were offered the chance to enter a drawing for a prize if they got their mammogram completed.
  - A mammogram reminder card was mailed to women 3 months after their 40th birthday. Birthday cards are also mailed to those turning 40, 50 and 60 and include mammogram reminders.
  - Care Management nurses contacting female members for health management or screening purposes also addressed the importance of breast cancer screening.
- Mobile Screening – Some employer groups were offered the opportunity to arrange for mobile mammography screening so employees would have the convenience of having screening done in privacy at the worksite.
- Periodic articles are published in the Member Messenger newsletter with facts about breast cancer and the importance of mammography.
- Preventive Health Guidelines, including mammogram benefits, are published in the Member Messenger and Provider Perspective newsletters yearly, are included in new member Enrollment Packets, and are available on the Plan's website at www.sanfordhealthplan.com.
- The breast cancer screening clinical practice guidelines that Sanford Health Plan adopted and recommends to practitioners are published in the Provider Perspective yearly and are also available on the Plan's website.

Cervical Cancer Screening

Regular Pap tests can help detect cervical cancer in its early stages and thereby reduce the morbidity and mortality of women with cervical cancer. Clinical guidelines recommend Pap testing every 1 to 3 years for all women who have been sexually active or who are over the age of 21.

This measure looks at the percentage of women ages 21 through 64 years, who were continuously enrolled during the measurement year and the 2 years prior to the measurement year and who had a Pap test during one of those years.

Cervical Cancer Screening Activities

Sanford Health Plan's female members who are turning 21 and those who are turning 40, 50 and 60 receive birthday cards that include reminders for yearly gynecological exams and the Plan's benefits for yearly Pap tests. Periodic articles are published in the Member Messenger stressing the importance of having a yearly exam. Preventive Health Guidelines, including yearly Pap test benefits, are published in the Member Messenger and Provider Perspective newsletters yearly, are included in new member Enrollment Packets, and are available on the Health Plan website at www.sanfordhealthplan.com. The cervical cancer screening clinical practice guidelines that were adopted and recommended to practitioners are published in the Provider Perspective yearly and are also available on the Plan's website.

All members are encouraged to complete an online health risk assessment on our WorldDoc site which includes questions related to cervical cancer screenings. WorldDoc also offers a health library and self management tools on this site as well

Cervical Cancer Screening

	HEDIS 2010	HEDIS 2011	HEDIS 2012	HEDIS 2013	National Average 2011[1]	Healthy People 2020
Pap Test in 2010, 2011 or 2012	**78.80%**	**77.93%**	**77.25%**	**76.20%**	**76.5%**	**93.0%**

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Chlamydia Screening in Women

Chlamydia is the most common sexually transmitted disease, which left untreated can cause serious reproductive and other health problems. Routine screening and treatment can reduce serious consequences of Chlamydia in women. This underscores the importance of prevention and early treatment in the primary care arena.

The Chlamydia Screening in Women measure looks at the percentage of women ages 16 through 24 years, who were continuously enrolled during the measurement year, and who had a test for Chlamydia during the measurement year.

Chlamydia Screening in Women

Chlamydia Screening in 2012:	HEDIS 2010	HEDIS 2011	HEDIS 2012	HEDIS 2013	National Average 2011[1]	Healthy People 2020
Age 16 - 20	29.29%	29.31%	25.42%	25.62%	41.5%	65.9%
Age 21 – 24	33.20%	28.46%	32.43%	34.35%	48.4%	78.3%
Age 16 – 24	31.44%	28.84	29.29%	30.47%	45.0%	

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Appropriate Testing for Children with Pharyngitis

Excessive use of antibiotics is resulting in a higher prevalence of antibiotic resistance. Clinical guidelines recommend that only children with diagnosed group A streptococcus pharyngitis based on a group A strep test (rapid assay or throat culture) be treated with antibiotics.

This measure looks at the percentage of children 2 - 18 years of age who were diagnosed with pharyngitis, prescribed an antibiotic and received a group A streptococcus test for the episode. A higher rate indicates appropriate testing.

Appropriate Treatment for Children with Pharyngitis

	HEDIS 2011	HEDIS 2012	HEDIS 2013	National Average 2011[1]
Strep Test Administered	78.26%	74.55%	72.57%	80.20%

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Appropriate Treatment for Children with Upper Respiratory Infection

The common cold is one of the top reasons that parents take their children to see their doctor. Antibiotics, although not recommended by current guidelines for the treatment of the common cold, are still often prescribed in these cases.

This measure looks at the percentage of children 3 months - 18 years of age who were given a diagnosis of upper respiratory infection (URI) and were NOT dispensed an antibiotic prescription on or 3 days after the date the child was seen by the doctor for the URI. Not being prescribed an antibiotic in this situation indicates appropriate treatment.

Appropriate Treatment for Children with Upper Respiratory Infection

	HEDIS 2011	HEDIS 2012	HEDIS 2013	National Average 2011[1]
Antibiotic Not Dispensed (Indicates Appropriate Treatment)	97.86%	73.96%	73.62%	83.90%

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Avoidance of Antibiotic Treatment in Adults with Acute Bronchitis

Clinical guidelines do not indicate the need for antibiotics in treating adults with acute bronchitis unless they have another comorbidity or infection for which antibiotics may be appropriate.

This measure looks at the percentage of adults 18 – 64 years of age with a diagnosis of acute bronchitis who were NOT dispensed an antibiotic prescription on or 3 days after the diagnosis of acute bronchitis. Not being prescribed an antibiotic in this situation indicates appropriate treatment.

Avoidance of Antibiotic Treatment in Adults with Acute Bronchitis

	HEDIS 2012	HEDIS 2013	National Average 2011[1]
Appropriate Avoidance of Antibiotics	15.30%	16.39%	23.5%

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Use of Spirometry Testing in the Assessment & Diagnosis of COPD

According to the National Heart, Lung and Blood Institute, chronic obstructive pulmonary disease (COPD) is the third leading cause of death in the United States. COPD is a lung disease in which the airways that carry air in and out of the lungs are partially blocked resulting in shortness of breath. COPD patients may also have a chronic cough. The next 2 measures are focused on the diagnosis and management of COPD. A Spirometry test assists the doctor in verifying the COPD diagnosis as well as determining the severity of the condition.

This measure assesses whether members ages 40 and over with a new diagnosis or newly active COPD received appropriate Spirometry testing to confirm the diagnosis.

Use of Spirometry Testing in the Assessment & Diagnosis of COPD

	HEDIS 2010	HEDIS 2011	HEDIS 2012	HEDIS 2013	National Average 2011[1]
Appropriate Spirometry Testing	40.35%	44.83%	38.24%	41.79%	42.9%

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Asthma

Asthma is a disease of the lungs. When someone has asthma, the airways or breathing tubes in the lungs are very sensitive to many things in the air. When an asthma flare-up happens, the airways swell and fill with mucus and the muscles around the airways tighten making the airways smaller and making it hard to breathe. According to the National Heart, Lung and Blood Institute, more than 22 million people in the United States have been diagnosed with asthma. The good news is that asthma can be well managed by knowing and avoiding triggers for flare-ups and by taking medications that provide long-term control of asthma symptoms. The following 2 measures are related to management of asthma medications.

Use of Appropriate Medications for People with Asthma

This measure evaluates whether members with persistent asthma (as defined below) are being prescribed medications for long-term control of asthma. The list of acceptable medications comes from the National Heart, Lung and Blood Institute's (NHBLI) National Asthma Education and Prevention Program (NAEPP) guidelines. Eligible members include those continuously enrolled in the measurement year and the year prior to the measurement year, with any of the following in those years:

- At least 1 emergency room visit with a principal diagnosis of asthma.
- At least 1 acute inpatient discharge with a principal diagnosis of asthma.
- At least 4 outpatient visits with an asthma diagnosis and at least two (2) asthma medications filled at the pharmacy.
- At least 4 asthma medications filled at the pharmacy (members identified this way, where leukotriene modifiers were the sole asthma medication dispensed, must also have at least 1 diagnosis of asthma in the same year as the leukotriene modifier).

Use of Appropriate Medications For People with Asthma

Use of Appropriate Medication:	HEDIS 2012[2]	HEDIS 2013	National Average 2011[1]
Ages 5 to 11	100%	98.18%	96.0%
Ages 12 to 18	91.67%	100%	92.7%
Ages 19 to 50	91.13%	89.34%	89.1%
Ages 51 to 64	88.46%	93.51%	93.2%
Total	91.67%	93.52%	91.9%

[1]The source for data is Quality Compass® 2011 and is used with the permission of the National Committee for Quality Assurance (NCQA). Any analysis, interpretation, or conclusion based on these data is solely that of the authors, and NCQA specifically disclaims responsibility for any such analysis, interpretation, or conclusion. Quality Compass is a registered trademark of NCQA.

[2]For HEDIS 2012 the age ranges were changed so these rates are not comparable to previous year's rates.

Medication Management for People with Asthma

This measure identifies members 5-64 years of age who were identified as having persistent asthma and who were dispensed appropriate medications. Then 2 rates are reported on these members.

1. The percentage of members who remained on an asthma controller medication for at least 50% of their treatment period.
2. The percentage of members who remained on an asthma controller medication for at least 75% of their treatment period.

Medication Management For People with Asthma

	HEDIS 2012	HEDIS 2013	National Average 2011[1]
50% Med Compliance			
Ages 5 to 11	76.32%	70.37%	NA
Ages 12 to 18	75.76%	69.23%	NA
Ages 19 to 50	68.14%	64.22%	NA
Ages 51 to 64	73.91%	70.83%	NA
Total	71.94%	67.88%	NA
75% Med Compliance			
Ages 5 to 11	36.84%	42.59%	NA
Ages 12 to 18	69.70%	41.03%	NA
Ages 19 to 50	41.59%	29.36%	NA
Ages 51 to 64	53.62%	51.39%	NA
Total	47.83%	39.42%	NA

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Improving Asthma Management

In 1998, the Physician Quality Committee identified asthma as a common illness within the Health Plan population based on Sanford Health data and Health Plan clinical claims data and implemented an Asthma Quality Improvement Activity. Based on that claims data, the Plan identified significant numbers of asthmatic members with frequent physician visits for multiple respiratory diagnoses. Claims data also revealed some inappropriate utilization of asthma medications among this population.

The Asthma activity includes monthly identification of new asthmatic members and a free peak flow meter and spacer offer. Newly identified members are provided with educational information in the form of a toolkit which includes topics such as asthma triggers, asthma education, medication compliance, an asthma action plan, smoking cessation and more. The Plan has also

worked with the *South Dakota Asthma Institute* and has helped promote the annual Lung Association Asthma Camp for kids.

The asthma management clinical practice guidelines that Sanford Health Plan adopted and recommends to practitioners are published in the Provider Perspective yearly and are also available on the Plan's website at www.sanfordhealthplan.com.

Cholesterol Management for Patients with Cardiovascular Conditions

High blood cholesterol is one of the major risk factors for heart disease and heart attacks. More specifically, high LDL levels (bad cholesterol) can cause cholesterol to build up within the walls of the arteries which cause a hardening or narrowing of the arteries and can eventually slow or block blood flow to the heart. If the blood supply to a portion of the heart is completely cut off, the result is a heart attack.

This measure looks at members ages 18 to 75, who from January 1 - November 1 of the year prior to the measurement year were discharged for acute myocardial infarction (AMI), coronary artery bypass graft (CABG) or percutaneous coronary interventions (PCI), or who had a diagnosis of ischemic vascular disease during the measurement year or the year prior. Then we measure what percentage of members had each of the following during the measurement year: LDL-C (low density lipoprotein cholesterol) screening, LDL-C <100mg/dL.

Cholesterol Management for Patients with Cardiovascular conditions

	HEDIS 2010	HEDIS 2011	HEDIS 2012	HEDIS 2013	National Average 2011[1]
LDL-C Screening	90.20%	90.20%[2]	84.14%	86.89%	88.1%
LDL-C Level <100 mg/dL	64.71%	64.71%[2]	61.67%	62.70%	59.8%

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[2]The HEDIS 2010 rates were rotated for 2011. The actual screening rate was 88.11% and the actual level <100 rate was 67.84%.

Lipid Profile Screening Guidelines

The Preventive Health Guidelines allow for 1 lipid profile between the ages of 18 and 24, 1 lipid profile every 5 years between the ages of 25 and 44 and 1 lipid profile every year for ages 45 and over. The Preventive Health Guidelines are published for members and practitioners in the Member Messenger and Provider Perspective newsletters yearly, are provided in new member Enrollment Packets and are available on the Plan's website at www.sanfordhealthplan.com. The cholesterol screening clinical practice guidelines that Sanford Health Plan adopted and recommends to practitioners are published in the Provider Perspective yearly and are also available on the Plan's website.

Controlling High Blood Pressure

According to the National Heart, Lung and Blood Institute, more than 65 million adults in this country have high blood pressure. When arteries narrow, blood flow is forced to press against the artery walls with too much force, resulting in high blood pressure. The heart must work harder to pump blood through the arteries. Over time, high blood pressure can result in serious long-term health conditions like heart disease, stroke and renal failure.

Controlling High Blood Pressure

Members with Controlled Blood Pressure	HEDIS 2010	HEDIS 2011	HEDIS 2012	HEDIS 2013	National Average 2011[1]	Healthy People 2020[2]
Ages 18 - 85	66.07%	67.92%	70.83%	67.82%	65.4%	61.2%

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[2]The Healthy People 2020 Goal includes adults ages 18 and older.

This measure assesses whether blood pressure is controlled among adult persons ages 18 - 85 years of age with diagnosed hypertension who were continuously enrolled in the measurement year. A member in this measure is considered to have controlled blood pressure if their most recent blood pressure reading taken in the office in the measurement year was below 140mm Hg systolic and 90mm Hg diastolic.

Healthy Heart (High Blood Pressure) Health Management Program

Due to the large number of members with high blood pressure in the Plan's population, in April 2007 Sanford Health Plan implemented a Hypertension Health Management Program as an expansion on the already existing Quality Improvement Activity. The goal of the program is to provide tools to educate our members on promoting improved health through better prevention, detection, treatment and education. By analyzing utilization patterns, we will be able to educate our members on preventable complications so that emergency department visits and hospital admissions/readmissions may be reduced. These tools will facilitate understanding and consumer responsibility for their own disease processes as well as coordination of care between the member and his/her primary care physician.

The Hypertension Health Management Program was renamed the Healthy Heart Health Management Program in 2012. With this program, new eligible members for the program are identified on a monthly basis and sent a Hypertension Program booklet that contains information on the program as well as

education on managing hypertension and educational materials and resources that are available to the member. The program is an opt-out program, with newly identified members being automatically enrolled unless they contact the Plan to opt out of the program. Members are stratified as moderate/low or high risk. High risk members receive the same quarterly educational mailings as moderate/low risk, with additional high risk information specific to their needs and phone or letter contact from a Care Management RN. Educational materials for moderate/low and high risk members include topics such as non-pharmaceutical management of hypertension, medication compliance, diet and exercise recommendations, complications, self monitoring, smoking cessation and more. High risk members who were not compliant according to HEDIS specifications received an educational mailing accompanied by a blood pressure wallet card and tracking card.

The Healthy Heart Program also provides annual communications to practitioners regarding the program. Practitioners receive notice on an annual basis of their members who were not in compliance with the HEDIS Controlling High Blood Pressure measure specifications. Practitioners were also notified of the current rates of guideline recommended medication therapy. The Plan reviews and adopts on a yearly basis clinical practice guidelines for hypertension. Practitioners are made aware of the clinical practice guidelines on a yearly basis through the practitioner newsletter. The guidelines are distributed through special mailings and the Sanford Health Plan website, www.sanfordhealthplan.com.

Our Healthy Heart Health Management Program members are encouraged to complete an online health risk assessment on our WorldDoc site which includes questions related to hypertension and lifestyle as well as their current biometric readings. WorldDoc also offers a health library and self management tools on this site to help our members better manage their condition.

In April, our Care Management nurses and Partners in Prevention, our health screening team, took part in a community wide hypertension initiative by visiting some of our employer group sites to do blood pressure screenings. At risk members were referred to their primary care practitioner for follow up.

If you are a Sanford Health Plan member with high blood pressure and would like information on enrolling in this program, please call the Plan at (888) 315-0884. You can also find program and enrollment information on our website at www.sanfordhealthplan.com.

Comprehensive Diabetes Care

Diabetes is a costly, highly prevalent chronic disease which, if not controlled, can result in serious complications including amputations, blindness, kidney failure, heart disease, nerve damage and more. According to the American Diabetes Association, there are 25.8 million children and adults in the United States, or about 8.3% of the population, who have this disease. Many complications of diabetes can be prevented if detected and addressed in the early stages.

This measure looks at the percentage of members with diabetes ages 18 through 75 years old, who were continuously enrolled during the measurement year, who received the following aspects of diabetes care (except where noted, these are based on the most recent date of service in the measurement year):

- Hemoglobin A1c (HbA1c) Tested
- HbA1c Poor Control >9.0%
- HbA1c Control <8.0%
- HbA1c Control <7.0%
- LDL-C Screening Performed
- LDL-C Controlled <100mg/dL
- Eye Exam (Retinal) Performed in the measurement year (or in the year prior to the measurement year with a negative retinopathy diagnosis)
- Medical Attention for Nephropathy (Includes any of the following: Evidence of treatment for nephropathy, a nephrologist visit, a positive urine macroalbumin test, a urine microalbumin test or evidence of ACE Inhibitor/ARB drug therapy)
- Blood Pressure Control <140/80 mm Hg
- Blood Pressure Control <140/90 mm Hg

Comprehensive Diabetes Care

	HEDIS 2010	HEDIS 2011	HEDIS 2012	HEDIS 2013	National Average 2011[2]	Healthy People 2020[3]
HbA1c Tested	93.07%	93.07%[4]	95.07%	95.07%[6]	90.0%	71.1%[3]
HbA1c Poor Control >9.0%[1]	19.16%	19.16%[4]	16.61%	16.61%[6]	28.3%	14.6%
Hba1c Control <8.0%	70.80%	70.80%[4]	68.43%	68.43%[6]	61.2%	
Hba1c Control <7.0%	45.99%	45.99%[4]	49.76%	49.76%[6]	42.2%	58.9%
Eye Exam Performed	63.69%	64.42%	65.15%	72.63%	56.9%	58.7%
LDL-C Screened	81.57%	83.58%	85.04%	85.04%[6]	85.3%	
LDL-C Controlled (<100 mg/dL)	46.17%	48.54%	50.36%	50.36%[6]	48.1%	
Medical Attention for Nephropathy	86.13%	86.13%[4]	89.05%	89.05%[6]	83.8%	37.0%[3]
Blood Pressure <140/80[5]	42.88%	54.56%	56.57%	56.57%[6]	44.2%	57.0%
Blood Pressure <140/90	74.64%	75.73%	76.46%	76.46%[6]	65.8%	57.0%

[1]Lower rates for the HbA1c Poor Control measure indicate better performance.
[2]The source for data is Quality Compass® 2011 and is used with the permission of the National Committee for Quality Assurance (NCQA). Any analysis, interpretation, or conclusion based on these data is solely that of the authors, and NCQA specifically disclaims responsibility for any such analysis, interpretation, or conclusion. Quality Compass is a registered trademark of NCQA.
[3]Healthy People 2020 Goal includes ages 18 and older. The A1c testing goal is based on 2 screenings a year vs. 1 like HEDIS. The goal listed for nephropathy includes only microalbumin for the Healthy People goal.
[4]HEDIS 2010 rates were rotated for 2011. The actual HbA1c Tested rate was 92.88%. The actual A1c >9% rate was 16.97%. The actual A1c <8% rate was 72.08%. The actual A1c <7% rate was 48.91%. The actual nephropathy rate was 85.22%.
[5]For HEDIS 2011 and forward the Blood Pressure <130/80 rate was revised to <140/80.
[6]HEDIS 2012 rates were rotated for 2013. The actual HbA1c Tested rate was 93.43%. The actual A1c >9% rate was 20.26%. The actual A1c <8% rate was 69.71%. The actual A1c <7% rate was 47.37%. The actual nephropathy rate was 87.41%. The Blood Pressure <140/80 actual rate was 52.19%. The actual Blood Pressure <140/90 was 75.18%.

Diabetes Health Management Program

In 1998, Sanford Health Plan implemented a Diabetes Health Management Program. The Physician Quality Committee identified diabetes as a common illness within the Plan population. Clinical claims data identified significant numbers of diabetic members and practitioners that did not utilize established practice guidelines in the treatment of diabetes. A decrease in morbidity and mortality may not be achieved unless both members and practitioners are educated on Plan benefits and compliance with recommended care guidelines.

The goal of the program is to provide tools to educate our members on promoting improved health through better prevention, detection, treatment and education. By analyzing utilization patterns, we will be able to educate our members on preventable complications so that emergency department visits and hospital admissions/readmissions may be reduced. These tools will facilitate understanding and consumer responsibility for their own disease processes as well as coordination of care between the member and primary care physician.

In the Diabetes Health Management Program, new eligible members for the program are identified on a monthly basis. These members are sent a toolkit that contains information on the diabetes program, education on diabetes and an offer for educational materials available to members. The program is an opt-out program, with newly identified members being automatically enrolled unless they contact the Plan to opt out of the program. Members are stratified as moderate/low or high risk. High risk members receive the same educational mailings as low risk, with additional high risk information specific to their needs and phone or letter contact from a Care Management RN. Educational materials for moderate/low and high risk members include topics such as blood sugars, eating right, medications, exercise, recommended tests and more.

Special mailings are also done throughout the year to members. Members who are noncompliant with the recommended care guidelines are sent an educational letter with information on risks of complications and the importance of getting needed tests and visits. These members are asked to complete a HbA1c, LDL-C, eye exam and a microalbumin test. Members are reminded that they can receive their annual diabetic eye exam for free with a participating eye care professional.

All diabetic members, regardless of whether they remain enrolled in the program or not, receive notice of how to get information on the Plan's insurance benefits for medical and pharmaceutical care for diabetes, as well as how to obtain a free glucometer. Diabetic education is stressed in the program materials and in the member newsletter.

Our diabetes health management program members are encouraged to complete an online health risk assessment on our WorldDoc site which includes questions related to diabetes and lifestyle as well as their current biometric readings. WorldDoc also offers a health library and self management tools on this site to help our members better manage their condition.

If you are a Sanford Health Plan member with diabetes and would like information on enrolling in this program, please call the Plan at (888) 315-0884. You can also find program and enrollment information on our website at www.sanfordhealthplan.com.

The Diabetes Program also provides annual communications to practitioners regarding the program. A reminder is sent to eye care professionals about the required codes for the diabetic eye exam copay waive program. An eye exam consultation form is also included that they can complete and fax to the member's primary diabetes care practitioner to notify them of the member's exam and their results.

On a yearly basis, the Plan reviews and adopts clinical practice guidelines for diabetes. Practitioners are made aware of the clinical practice guidelines on a yearly basis through the practitioner newsletter. The guidelines are also distributed through the Sanford Health Plan website, www.sanfordhealthplan.com.

In addition to these program activities, the Preventive Health Guidelines allow for 1 lipid profile between the ages of 18 and 24, 1 lipid profile every 5 years between the ages of 25 and 44 and 1 lipid profile every year for ages 45 and over. The Guidelines also allow for 1 basic metabolic panel (which includes a glucose test, among others) every year. The Preventive Health Guidelines are published for members and practitioners in the Member Messenger and Provider Perspective newsletters yearly, are provided in Enrollment Packets and are available on the Plan's website at www.sanfordhealthplan.com.

Use of Imaging Studies for Low Back Pain

Back pain is among the most common musculoskeletal conditions affecting nearly all people at least once in their life. According to the American College of Radiology, uncomplicated low back pain is a benign, self-limited condition that does not warrant any imaging studies. The vast majority of these patients are back to their usual activities in 30 days.

This measure assesses whether imaging studies (plain x-ray, MRI, CT scan) are overused in evaluating patients with acute low back pain. A higher score indicates appropriate treatment of low back pain (i.e., proportion for whom imaging studies did not occur).

Use of Imaging Studies for Low Back Pain

	HEDIS 2010	HEDIS 2011	HEDIS 2012	HEDIS 2013	National Average 2011[1]
Imaging Studies Did Not Occur (Appropriate Treatment)	85.12%	87.31%	84.82%	87.23%	74.4%

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Follow-Up Care for Children Prescribed ADHD Medication

Attention-deficit/hyperactivity disorder (ADHD) is a condition that affects millions of children and adolescents. ADHD includes 3 main symptoms: inattention, hyperactivity and impulsivity. Practitioners can determine when medication therapy is indicated. When medication therapy is prescribed, the American Psychiatric Association recommends follow-up appointments be made at least monthly until the symptoms have stabilized. Once stable, an office visit every 3 to 6 months is recommended which allows for an assessment of learning and behavior in the child.

This HEDIS rate measures the percentage of children newly prescribed ADHD medication who have at least 3 follow-up care visits within a 10-month period, 1 of which is within 30 days of when the first ADHD medication was dispensed. The following are the rates:

1. **Initiation Phase:**
   The percentage of members 6-12 years of age with an ambulatory prescription dispensed for ADHD medication, who had 1 follow-up visit with a practitioner with prescribing authority during the 30-day Initiation Phase.
2. **Continuation and Maintenance Phase:**
   The percentage of members 6-12 years of age with an ambulatory prescription dispensed for ADHD medication, who remained on the medication for at least 210 days and who, in addition to the visit in the Initiation Phase, had at least 2 follow-up visits with a practitioner within 270 days (9 months) after the Initiation Phase ended.

Follow-Up Care for Children Prescribed ADHD Medication

	HEDIS 2010	HEDIS 2011	HEDIS 2012	HEDIS 2013	National Average 2011[2]
Initiation Phase	NA[1]	30.56%	25.45%	39.06%	39.4%
Continuation and Maintenance Phase	NA[1]	NA[1]	NA[1]	NA[1]	44.2%

[1]NA indicates that the Plan collected and reported the rate but the population was too small to report a valid rate.

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Improving ADHD Management

ADHD is a chronic health problem in which educational interventions can help lessen the impact of the disorder and improve the member's quality of life. The diagnosis of ADHD has consistently been in the top diagnosis codes incurred for the Plan. The baseline HEDIS rates for follow-up care for children prescribed ADHD medication also show a serious deficiency in appropriate follow-up care.

Sanford Health Plan implemented a Quality Improvement Activity, which includes sending educational materials to parents of children and adolescents with ADHD to educate them on the symptoms, types of treatment and follow-up recommendations for patients taking ADD/ADHD medications.

The Plan also provided educational materials to practitioners regarding the guidelines for follow-up care for patients prescribed ADD/ADHD medication. A screening tool was also made available. These resources were offered in the practitioner newsletter and continue to be available on the Plan's website. Practitioners are made aware of the clinical practice guidelines on a yearly basis through the practitioner newsletter. The guidelines are also distributed through special mailings and the Sanford Health Plan website, www.sanfordhealthplan.com.

Antidepressant Medication Management

According to the National Institute of Mental Health, an estimated 6.7% of American adults suffer from major depressive disorder in a given year. Many people can improve through clinical treatment with their healthcare practitioner and by taking their medications as prescribed. However, many stop taking their medication too soon because they feel better or because they do not feel the medication is working. It is important for people to take their medications as prescribed for as long as they are prescribed and to keep their follow-up appointments in order to prevent a recurrence of depression.

This measure is based on the treatment guidelines of the clinical management and pharmacological treatment of depression. The following are the 2 medication compliance rates reported for this measure.

1. **Effective Acute Phase Treatment**
   The percentage of members ages 18 years and older as of April 30 of the measurement year, who were diagnosed with a new episode of depression, treated with antidepressant medication, and who remained on an antidepressant drug during the entire 84-day (12 week) Acute Treatment Phase. This measures the percentage of adult members initiated on an antidepressant drug who received a continuous course of medication treatment during the Acute Treatment Phase.
2. **Effective Continuation Phase Treatment**
   The percentage of members ages 18 years and older as of April 30 of the measurement year, who were diagnosed with a new episode of depression, treated with antidepressant medication, and who remained on an antidepressant drug for at least 180 days (6 months). This measures the effectiveness of clinical management (follow-up visits) in achieving medication compliance (taking medications as long as prescribed) for the Continuation Phase Treatment Period, adequate for defining a recovery.

Antidepressant Medication Management

	HEDIS 2010	HEDIS 2011	HEDIS 2012	HEDIS 2013	National Average 2011[1]
Effective Acute Phase Treatment	**58.67%**	**59.55%**	**57.54%**	**58.73%**	**65.6%**
Effective Continuation Phase Treatment	**36.00%**	**41.01%**	**43.02%**	**41.27%**	**49.4%**

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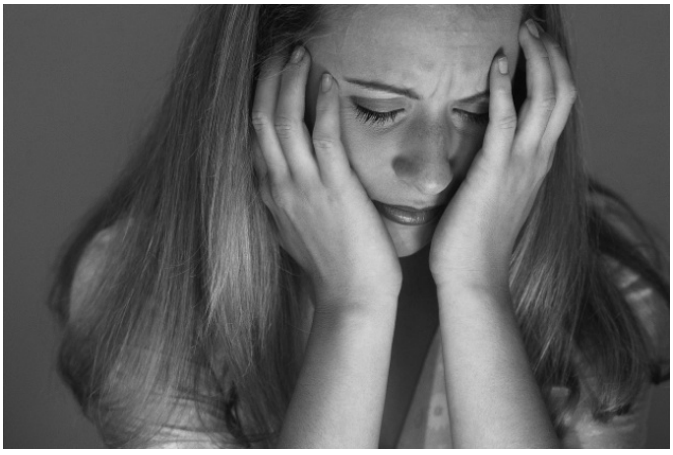
Improving Mental Health Medication Management

Depression was identified in general as a chronic, clinical issue with a high degree of risk for members. Clinical claims and pharmaceutical data have identified a significant number of members diagnosed with depression who are currently being treated with medications as well as those who are not. Data also indicates a significant difference in the treatment methods of practitioners. Clinical variance has been identified in the length of time on medication therapy for depression. Depression has consistently been one of the top diagnoses in the Plan, among adults and adolescents alike.

The activities involved in increasing medication compliance for members with depression include antidepressant letters, which are sent on a monthly basis to those members new on antidepressants to educate about medication compliance, side effects, keeping follow-up visits, etc. There have also been yearly articles in the Member Messenger newsletter regarding the importance of antidepressant compliance as well as the importance of continuity and coordination of care.

Depression clinical practice guidelines are reviewed and adopted on a yearly basis and practitioners are made aware of the availability of these guidelines in the practitioner newsletter and on the Plan website at www.sanfordhealthplan.com. Collaborative meetings are



held with behavioral health practitioners to discuss aspects of behavioral health care including how to improve access, continuity and coordination of care, medication compliance and to assist in reviewing formulary issues.

Quick Reference Cards, in addition to behavioral health screening tools, are also made available to primary care physicians to assist in locating participating behavioral health care practitioners in their regional area. These cards are available to practitioners on the Plan's website at www.sanfordhealthplan.com. If you would like a paper copy of these cards for your clinic, please call our Provider & Payor Relations Department at (605) 328-6877 or (800) 601-5086 to request a copy.

Follow-Up after Hospitalization for Mental Illness

Many who are discharged from an inpatient facility for mental illness need continued support after leaving the hospital. Help with continuing medications, going to therapy, getting back to work, and social issues is very important in ensuring successful treatment.

Consistent with the guidelines of the National Institute of Mental Health and the Centers for Mental Health Services, this measure looks at the percentage of members ages 6 years and older who were hospitalized for treatment of select mental health disorders in the measurement year who were continuously enrolled for 30 days after discharge and who were seen on an ambulatory basis or were in day/night treatment with a mental health practitioner.
Two separate rates are calculated:

- The percentage of members who had an ambulatory or day/night mental health visit within 7 days of hospital discharge.
- The percentage of members who had an ambulatory or day/night mental health visit within 30 days of hospital discharge.

Follow-Up After Hospitalization for Mental Illness

	HEDIS 2010	HEDIS 2011	HEDIS 2012	HEDIS 2013	National Average 2011[1]
Ambulatory Follow-Up Within 7 Days of Discharge	**42.31%**	**40.91%**	**43.82%**	**34.78%**	**58.9%**
Ambulatory Follow-Up Within 30 Days of Discharge	**67.95%**	**65.15%**	**70.79%**	**64.13%**	**76.5%**

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Improving Timeliness of Follow-Up after Hospitalization for Mental Illness

Sanford Health Plan identified a need for improvement in the area of mental health follow-up and continuity and coordination of care. Mental health diagnoses have consistently been one of our top diagnosis codes for the Plan and initial claims analysis showed a low rate of follow-up after hospitalization.

In an attempt to improve the follow-up rates, the Health Plan sends letters to those members being discharged from an inpatient mental health stay. The brochure included with the letter (Managing Your Follow-up Care) includes information about medication management, how to avoid readmission, and the importance of keeping outpatient appointments. Information about the member's upcoming outpatient follow-up appointment is also included in the letter as a reminder. Nurse phone calls are then made to these members to remind them of their follow-up appointment. The Plan also collaborates with behavioral health providers to determine actions that can be taken to have members seen in a more timely manner.

To increase awareness of available mental health services, Quick Reference Cards, as well as behavioral health screening tools, are made available for primary care physicians to assist them in locating Sanford Health Plan behavioral health care practitioners in their regional area. The Plan advertised these cards in the Provider Perspective newsletter sent to all participating practitioners. These cards are available to practitioners, as are the Plan's clinical practice guidelines on depression, on the Plan's website at www.sanfordhealthplan.com. If you would like a copy of these cards for your clinic, please call our Provider & Payor Relations Department at (605) 328-6877 or (800) 601-5086 to request a copy. The Plan also collaborates with mental health professionals to get feedback on our quality improvement activity and other activities involving mental health services.

Flu Shots for Adults Ages 50-64

The disease burden of influenza is high even though it is highly preventable with a safe and effective vaccination each year. This measure assesses the percentage of members ages 50-64 years as of September 1 of the measurement year who received an influenza vaccination. Sanford Health Plan publishes yearly newsletter articles to remind members to get their flu shots and that coverage for the flu shot is 100%.

Flu Shots for adults ages 50-64

Received Flu Shot:	CAHPS® 2011	CAHPS® 2012	CAHPS® 2013	National Average 2011[1]
Ages 50-64	**69.97%**	**70.25%**	**69.33%**	**53.3%**

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Medical Assistance with Smoking Cessation

According to the Centers for Disease Control and Prevention (CDC), smoking is the leading preventable cause of premature death in the United States, causing 400,000 deaths each year. Yet millions of Americans continue to smoke. Studies show that people who are advised by their health care practitioner to quit smoking are more likely to quit.

To measure the percentage of Sanford Health Plan members who were advised by their health care practitioner to quit smoking and who were offered assistance in other cessation strategies, the annual member satisfaction survey, CAHPS®5.0H (Consumer Assessment of Healthcare Providers and Systems), includes questions that address these issues. Specifically, these questions allow us to determine the percentage of members ages 18 years and older, who were continuously enrolled during the measurement year, who were either current smokers or recent quitters that were seen by a Plan practitioner during the measurement year and received advice to quit smoking, had discussion regarding cessation medications and had discussion regarding other smoking cessation strategies. The following are the results from the most recent CAHPS® 5.0H study.

Medical Assistance with Smoking Cessation

	CAHPS® 2010[1]	CAHPS® 2011	CAHPS® 2012	CAHPS® 2013	National Average 2011[2]
Advising Smokers to Quit	**80.00%**	**74.48%**	**73.79%**	**75.25%**	**77.6%**
Discussion of Smoking Cessation Medications	**55.00%**	**49.32%**	**47.12%**	**50.50%**	**53.1%**
Discussion of Other Smoking Cessation Strategies	**53.80%**	**44.52%**	**39.42%**	**50.50%**	**47.6%**

[1] The response options for these questions changed in 2010. This does not allow us to compare and trend these rates to previous years.

[2]The source for data is Quality Compass® 2011 and is used with the permission of the National Committee for Quality Assurance (NCQA). Any analysis, interpretation, or conclusion based on these data is solely that of the authors, and NCQA specifically disclaims responsibility for any such analysis, interpretation, or conclusion. Quality Compass is a registered trademark of NCQA.

Tobacco Cessation Program

In November 2001, the Physician Quality Committee approved the start of a tobacco cessation program based upon the results of the CAHPS® survey. The program includes educational pieces in the Member Messenger. Tobacco cessation is stressed in all of the Plan's health management program materials as well. Cessation tools such as the state quitlines are also published in the member newsletter and made available to employer groups through the Care Management program. Smoking cessation education is currently underway at select employer sites, led by the Plan's certified tobacco cessation educators, and includes information about local, state and Health Plan cessation benefits.

The tobacco treatment benefit included in the member's benefit package includes the following:

- **For South Dakota, North Dakota and Iowa members:**
  Treatment for tobacco abuse is covered as part of the Sanford Health Plan's Preventive Health Program. Tobacco abuse treatment will be covered as listed below. This will be a once per lifetime benefit. Therapy treatment options available include two (2) Physician counseling and treatment visits, two (2) smoking cessation classes, or two (2) visits to a Certified Respiratory Therapist. Any combination of the above is not to exceed two (2) total visits. Hypnotism and acupuncture are **non-covered** treatment options. Medications used to deter smoking, including nicotine patches, gum and nasal spray, Zyban, bupropion (generic Wellbutrin), and Chantix will be covered with confirmation of smoking abstinence for 6 months. Reimbursement will be for the total amount the member paid for up to a three (3) month supply. Only one medication will be covered per lifetime. Abstinence must be proven by a urine specimen for nicotine. The total cost of this test will be covered by the Health Plan. To receive this benefit, the member must submit up to 3 months of paid receipts and notify the Health Plan (Member Services (605) 328-6800 or (800) 752-5863) that he or she has completed a urine screening test at the 6 month smoke free mark.

- **For Minnesota members:**
  Sanford Health Plan will cover a 90-day supply for Nicotine Patches or Nicotine Gum under the brand copay amount per calendar year and Zyban (bupropion) a 180-day supply under the brand copay amount per calendar year. No more than a 30-day supply will be covered and dispensed at a time. A prescription is required from a licensed provider and prescriptions must be filled at a network pharmacy. Failure to use your ID card for prescription processing will result in zero payment. Counseling for cessation of smoking will be covered under the Member's medical benefit for an office copay amount or smoking cessation classes will be covered 1 time per calendar year under the Members coinsurance and deductible benefit. Other medications used to deter smoking; including nicotine nasal spray and Chantix will be covered with confirmation of smoking abstinence for 6 months. Reimbursement will be for the total amount the member paid for up to a three (3) month supply. Abstinence must be proven by a urine specimen for nicotine. The total cost of this test will be covered by the Health Plan. Please call our Members Services Department at (605) 328-6800 or (800) 752-5863 for more complete information.

Cessation resources are provided to members on a regular basis including the state quit lines and the National Cancer Institute's website:

- SD Quit Line Toll-Free 1-866-SD-QUITS
- MN's Tobacco Helpline (888) 354-PLAN
- IA Quit Line (800) QUIT NOW
- ND Quit Line (800) QUIT NOW
- www.smokefree.gov

The specifications for the above CAHPS® measures are consistent with recommendations from the clinical practice guidelines adopted and recommended on a yearly basis by the Plan for use. Newsletter articles continue to be published concerning current clinical practice guidelines for the treatment of tobacco use and dependence. These guidelines are also available on the Plan's website at www.sanfordhealthplan.com.

Access and Availability of Care Domain

The Access/Availability of Care domain contains measures that assess Sanford Health Plan members' access to care and whether those members are actually utilizing the services available to them. Most of these measures include some form of continuous enrollment criteria, which specifies that a member has to be enrolled in the Plan a certain amount of time before they may be included in the final population. This way the only members that are included in the final population are members for whom the Plan has had an adequate opportunity to provide services and education.

The Access and Availability measures included in this report are:

- Adults' Access to Preventive/Ambulatory Health Services
- Children and Adolescents' Access to Primary Care Practitioners
- Initiation and Engagement of Alcohol and Other Drug Dependence Treatment
- Prenatal and Postpartum Care
- Call Answer Timeliness

Adults' Access to Preventive/ Ambulatory Health Services

This measure determines whether adults have had preventive or ambulatory visits with their physician. This measure also tells us how many adults are not accessing the health care system at all and therefore are not receiving any preventive care or counseling on important factors like diet, exercise, smoking cessation, seat belt use and other risky behaviors. Specifically, we are looking at the percentage of members ages 20 through 44, 45 through 64 and 65 years and older who were continuously enrolled during the measurement year and the 2 years prior to the measurement year and who had an ambulatory or preventive care visit during 1 of those years. A separate rate is reported for each of the 3 age groups. Below are Sanford Health Plan's rates for this measure.

Adults' Access to Preventive/ Ambulatory Health Services

Ambulatory or Preventive Care Visit:	HEDIS 2010	HEDIS 2011	HEDIS 2012	HEDIS 2013
Age 20 - 44	94.90%	95.00%	94.62%	94.54%
Age 45 - 64	95.96%	95.83%	95.67%	95.87%
Age 65 & Older	96.79%	97.42%	96.74%	98.11%

Adult Wellness Visit Guidelines

Sanford Health Plan's female members turning 21, 40, 50 and 60 and male members turning 40, 50 and 60 receive birthday cards that include reminders and the Plan's benefits for yearly physical exams as well as other preventive health screenings. Preventive Health Guidelines, including yearly physical exam benefits, are

published in the Member Messenger and Provider Perspective newsletters yearly, are included in new member Enrollment Packets, and are available on the Plan's website at www.sanfordhealthplan.com.

Children and Adolescents' Access to Primary Care Practitioners

This measure determines whether children have had a visit with a primary care practitioner (PCP) like a pediatrician or family practice physician in order to assess general access to care for children and adolescents. Specifically, we are looking at the percentage of enrollees ages 12 months through 24 months and 25 months through 6 years who were continuously enrolled during the measurement year and who have had a visit with a primary care practitioner during that year. We also look at the percentage of enrollees ages 7 years through 11 years, and 12 years through 19 years, who were continuously enrolled during the measurement year and the year prior to the measurement year and who have had a visit with a primary care practitioner during 1 of those years. A separate rate is reported for each of the 4 age groups. Below are Sanford Health Plan's rates for this measure.

Children and Adolescents' Access to Primary Care Practitioners

Ambulatory or Preventive Care Visit:	HEDIS 2010	HEDIS 2011	HEDIS 2012	HEDIS 2013	National Average 2011[1]
Age 12 - 24 Mo	98.00%	98.26%	99.31%	98.69%	97.9%
Age 25 Mo - 6Years	89.77%	87.98%	88.84%	89.85%	91.9%
Age 7 – 11 Yr	86.84%	87.97%	87.11%	88.62%	91.9%
Age 12 – 19 Yr	89.25%	89.73%	89.10%	89.28%	89.3%

[1]The source for data is Quality Compass® 2011 and is used with the permission of the National Committee for Quality Assurance (NCQA). Any analysis, interpretation, or conclusion based on these data is solely that of the authors, and NCQA specifically disclaims responsibility for any such analysis, interpretation, or conclusion. Quality Compass is a registered trademark of NCQA.

Children and Adolescent Wellness Visit Guidelines

Preventive Health Guidelines, including yearly physical exam and well baby visit benefits, are published in the Member Messenger and Provider Perspective newsletters yearly, are included in new member Enrollment Packets and are available on the Plan's website at www.sanfordhealthplan.com.

Initiation and Engagement of Alcohol and Other Drug Dependence Treatment

There are more deaths, illnesses and disabilities from substance abuse than from any other preventable conditions.[1] These rates measure the degree to which members initiate and continue alcohol and other drug (AOD) dependence treatment once the need is identified.

Initiation of AOD Dependence Treatment: The percentage of members with a new episode of alcohol or other drug dependence who initiate treatment through either an inpatient AOD admission, outpatient visit, intensive outpatient encounter or partial hospitalization within 14 days of the diagnosis.

Engagement of AOD Treatment: An intermediate step between initially accessing care (initiation of treatment) and completing a full course of treatment. This measure is designed to assess the degree to which members engage in treatment with 2 additional AOD services within 30 days after the initiation visit.

[1]*Substance Abuse: The Nation's Number One Health Problem, Feb. 2001*

Initiation and Engagement of Alcohol and Other Drug (AOD) Dependence Treatment

	HEDIS 2010	HEDIS 2011	HEDIS 2012	HEDIS 2013	National Average 2011[1]
Initiation of AOD Treatment	50.60%	37.25%	44.74%	37.44%	40.2%
Engagement of AOD Treatment	46.99%	32.35%	23.16%	18.96%	15.2%

[1]The source for data is Quality Compass® 2011 and is used with the permission of the National Committee for Quality Assurance (NCQA). Any analysis, interpretation, or conclusion based on these data is solely that of the authors, and NCQA specifically disclaims responsibility for any such analysis, interpretation, or conclusion. Quality Compass is a registered trademark of NCQA.

Prenatal and Postpartum Care

Early and regular prenatal care is essential in keeping mom and baby healthy. Mothers who do not receive regular prenatal care are more likely to have problems including low birth weight and/or premature babies. Many health problems, if found early, can be treated or cured and other problems may be prevented. Prenatal care visits provide the practitioner the opportunity to discuss proper nutrition, counseling, vitamin supplements, risk factors and health promotion.

Care for the mother after delivery is also important. To give practitioners the chance to offer advice and assistance, the American College of Obstetricians and Gynecologists recommends that women see their health care practitioner at least once between 4 and 6 weeks after giving birth to allow for a physical examination and an opportunity to answer questions and give nutrition and family planning guidance.

This measure evaluates timely access to prenatal and postpartum care for Sanford Health Plan members. Prenatal care should be provided in the first trimester of pregnancy, or if the member enrolled after the first trimester, within 42 days of the member's enrollment date. Documentation of prenatal care visits should include screening tests, obstetrical history or risk assessment, counseling and education or an ultrasound. Postpartum care should be delivered on or between 21 and 56 days after delivery and should include a physical exam with either a pelvic exam or an evaluation of weight, blood pressure, breasts and abdomen. Below are Sanford Health Plan's rates for this measure.

Prenatal and Postpartum Care

	HEDIS 2010	HEDIS 2011	HEDIS 2012	HEDIS 2013	National Average 2011[1]	Healthy People 2020[2]
Timely Prenatal Care	**93.75%**	**96.94%**	**96.94%[3]**	**97.83%**	**91.0%**	**77.9%**
Timely Postpartum Care	**84.58%**	**88.21%**	**88.21%[3]**	**89.67%**	**80.6%**	

[1]The source for data is Quality Compass® 2011 and is used with the permission of the National Committee for Quality Assurance (NCQA). Any analysis, interpretation, or conclusion based on these data is solely that of the authors, and NCQA specifically disclaims responsibility for any such analysis, interpretation, or conclusion. Quality Compass is a registered trademark of NCQA.

[2]Healthy People 2020 Goal beginning in first trimester of pregnancy.

[3] This rate was rotated from HEDIS 2011. The actual rate for prenatal care was 93.48% and for postpartum care 85.33%.

Maternity Care Benefits & the Healthy Pregnancy Program

Sanford Health Plan provides maternity care benefits from prenatal through postpartum care. We also encourage our pregnant mothers to join the Healthy Pregnancy Program during their first trimester of pregnancy.

The Healthy Pregnancy Program focuses on education and awareness. The main objective is to assist a member in identifying concerns early so she and her healthcare practitioner can take steps to prevent or minimize any problems and ensure a healthy pregnancy. The American College of Obstetricians and Gynecologists (ACOG) guidelines state that medical, obstetric and lifestyle factors can complicate a pregnancy. Through regular prenatal care, women can take action to increase their chance of having a healthy baby. The member's health care practitioner continues to be the primary caregiver who provides the member with medical services and advice. Plan members may enroll in the program by calling the Plan to prior authorize their pregnancy. Members will receive a program packet with their authorization letter. A health risk assessment is included in the initial program packet, which should be completed and returned to the Plan. Based on the health risk assessment, responses members are classified as low or high risk. Enrolled members receive a follow-up mailing consisting of different health topics applicable to pregnant women. A Care Management nurse calls members whose pregnancy is high risk at least once throughout the pregnancy, or more often if needed. Enrolled members also receive a magazine and immunization guideline information after the baby is born.

If you are a Sanford Health Plan member who is pregnant and would like information on enrolling in this program, please call the Plan at (888) 315-0884. You can also find program and enrollment information on our website at www.sanfordhealthplan.com.

For practitioners, the program offers notification of the patients that they have participating in the program. Sanford Health Plan has adopted guidelines for prenatal care. Practitioners are made aware of the clinical practice guidelines on a yearly basis through the practitioner newsletter. The guidelines are available on the Sanford Health Plan website, www.sanfordhealthplan.com.

Call Answer Timeliness

Customer service plays a significant role in member satisfaction. Key measures involved in customer service include Member Services phone call response times.

Call Answer Timeliness

	HEDIS 2010	HEDIS 2011	HEDIS 2012	HEDIS 2013
Call Answer Timeliness	**71.24%**	**67.21%**	**67.94%**	**78.91%**

Member Services Phone Calls Quality Improvement Activity

Because the Health Plan Quality Improvement Committee recognizes the Member Services Department as vital to customer service, in 1999 the Committee chose to evaluate phone call statistics and staffing needs for the Member Services Department as a way of ensuring that Plan Members have timely access to customer service.

All Member Services phone calls are logged. Call center statistics show number of calls answered, calls made, voicemails, and abandoned calls. It also shows the answer speed of calls and the rate of abandonment and voicemails. These statistics are measured monthly and analyzed by the Committee on a quarterly basis to determine improvements that are needed. Many improvement activities have been implemented to improve these rates over the years including staff meetings with training and education on how to more accurately and efficiently handle member and practitioner calls, distribution of phone call statistics to each Member Services Representative and a phone log report to track all calls and their subject matter.

Satisfaction with Experience of Care Domain

HEDIS/CAHPS® 5.0H Adult Member Satisfaction Survey

This domain includes rates from the yearly member satisfaction survey completed by Sanford Health Plan. This survey is conducted by an independent survey vendor and provides information on the experiences of our members with our Health Plan and how well we meet our members' expectations. There are 4 overall ratings of satisfaction in addition to 7 more focused composite scores which summarize survey responses in key areas.

HEDIS/CAHPS® 5.0H, Adult Overall Ratings

Percentage Responding: 8, 9, 10
(Scale from 0-10, where 0 is worst and 10 is best)

	CAHPS® 2010	CAHPS® 2011	CAHPS® 2012	CAHPS® 2013	National Average 2011[1]
Health Plan Overall	53.26%	53.00%	52.35%	53.48%	66.12%
Health Care Overall	71.43%	77.84%	77.25%	79.94%	77.63%
Specialist Overall	76.10%	82.93%	82.58%	85.38%	83.11%
Personal Doctor Overall	81.68%	84.80%	88.98%	88.60%	83.90%

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HEDIS/CAHPS® 5.0H, Composite Ratings

Percentage Responding: "Not a Problem" or "Always or Usually"

	CAHPS® 2010	CAHPS® 2011	CAHPS® 2012	CAHPS® 2013	National Average 2011[1]
Getting Needed Care	85.24%	83.09%	83.87%	90.32%	85.59%
Getting Care Quickly	87.11%	86.11%	86.60%	88.97%	86.17%
How Well Doctors Communicate	92.77%	96.34%	96.03%	97.67%	94.06%
Customer Service	84.75%	90.52%	NA[2]	90.24%	84.62%
Claims Processing	88.82%	90.72%	91.00%	91.21%	88.08%
Plan Information on Costs	66.78%	70.26%	65.56%	55.77%	65.70%
Shared Decision Making				72.12%	NA

[1]The source for data is Quality Compass® 2011 and is used with the permission of the National Committee for Quality Assurance (NCQA). Any analysis, interpretation, or conclusion based on these data is solely that of the authors, and NCQA specifically disclaims responsibility for any such analysis, interpretation, or conclusion. Quality Compass is a registered trademark of NCQA.

[2] The average number of responses was too low to report a rate.

CAHPS® Opportunities and Improvement Activities

Sanford Health Plan strives to provide the best service we can to our members. The Plan's Quality Improvement Committee analyzed the full CAHPS® results report and identified the areas that show the greatest opportunities for improvement. The Committee also determined activities that will be (or already are being) implemented to achieve improvement in these areas. Examples of these activities include, but are not limited to:

- A workgroup is in place to improve the information communicated to members and to make the information easy to find and access.
- Continue New Member Survey postcard in an effort to identify issues with member materials or services and what we can do to improve them.
- Notify members of the features available on the Plan's web portal, including access to EOBs, benefit information and more. The myHealthPlan web portal provides streamlined services and enhanced access to information. The Plan's general website and portal have also been redesigned to improve ease of access to important member information.
- The Plan's case managers are partnering with the Sanford Clinic Health Coaches to get members appointments more quickly and to collaborate on the members care.
- Continue to provide information through our preventive health and quality programs regarding smoking cessation and the state quit line resources as well as the Plan's benefit for smoking cessation reimbursement. Smoking cessation resources are provided on our member portal, myHealthPlan.
- Include information on what is available to members on the Express Scripts, Inc. website (the Plan's pharmacy benefit manager) like drug information, member specific copay information, drug side effects, interactions and more. There is a link to this website on the Plan's pharmacy information page on the Plan's website.
- Continue to emphasize in member mailings the importance of having a primary care practitioner (PCP). Members are also informed that they may call the Health Plan for assistance in finding a PCP. (Call the Member Services Department at (605) 328-6800 or (800) 752-5863).
- Remind members when asking for an appointment with a specialist that is not available as soon as they would like, to ask for alternative specialists in that clinic or to call Member Services at (605) 328-6800 or (800) 752-5863) for information on additional specialists available in their area.
- Practitioners will be notified of satisfaction results related to how much time they spend with patients, shared decision making, coordination of care, etc. so that they are aware of areas that may need improvement in the practice setting.

Use of Services Domain

The Use of Services Domain provides information about the types of services Sanford Health Plan offers its members and how the Plan manages member care. It looks at a range of health care settings including inpatient, outpatient, non-acute and ambulatory.

The Use of Services measures included in this report are related to well-care visits:

- Well-Child Visits in the First 15 Months of Life
- Well-Child Visits in the Third, Fourth, Fifth and Sixth Year of Life
- Adolescent Well-Care Visits

Well-Child Visits in the First 15 Months of Life

Well-child visits, or well baby checks, are recommended frequently in the first year of life when a child's development is most rapid. These visits include a complete physical examination in addition to immunizations and communication and/or counseling to parents regarding normal development and developmental milestones, safety, nutrition, sleep, infectious diseases, etc. Frequent well-child visits can assist in identifying and addressing growth and developmental problems early.

The American Academy of Pediatrics recommends 8 well-child visits in the first 15 months of life: the first 3-5 days after birth and then at 1, 2, 4, 6, 9, 12 and15 months of age. The well-child visits for Sanford Health Plan members were reported as the percentage of 15 month old members receiving 0, 1, 2, 3, 4, 5, or 6 or more visits with a primary care practitioner.

Well-Child Visits in the First 15 Months of Life

	HEDIS 2010	HEDIS 2011	HEDIS 2012	HEDIS 2013	National Average 2011[1]
0 Visits	0.34%	1.05%	0%	0.90%	NA
1 Visit	1.01%	1.40%	0%	0.90%	NA
2 Visits	0.00%	2.11%	1.56%	1.51%	NA
3 Visits	4.36%	5.26%	1.17%	2.11%	NA
4 Visits	8.05%	7.02%	8.2%	7.53%	NA
5 Visits	19.13%	22.11%	17.97%	20.18%	NA
6+ Visits	67.11%	61.05%	71.09%	66.87%	78.00%

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Well-Child Visits in the Third, Fourth, Fifth, and Sixth Years of Life

Well-child visits during the third through sixth years of life should include (but not be limited to) a complete physical examination in addition to an evaluation of hearing and vision, an update of immunizations, discussion of nutrition, assessment of language development, assessment of developmental milestones and assessment of social and behavioral development.

The American Academy of Pediatrics recommends annual well-child visits for children ages 3 to 6 years of age. The rates below show the percentage of Plan member's ages 3-6 years of age who had well-child visit with a primary care practitioner during the measurement year.

Well-Child Visits in the Third, Fourth, Fifth and Sixth Year of Life

	HEDIS 2010	HEDIS 2011	HEDIS 2012	HEDIS 2013	National Average 2011[1]
Well-Child Visits in the Third, Fourth, Fifth and Sixth Year of Life	45.31%	51.36%	52.21%	56.00%	72.50%

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Well Baby and Well Child Visit Guidelines

Preventive Health Guidelines, including well baby visit benefits and yearly well child wellness exams, are published in the Member Messenger and Provider Perspective newsletters yearly, are included in new member Enrollment Packets and are available on the Plan's website at www.sanfordhealthplan.com.

Adolescent Well-Care Visits

Adolescents experience significant physical and emotional changes in their transition from childhood to adulthood. In addition, adolescents face many challenges in today's world and may be at risk for sexually transmitted disease, substance abuse, pregnancy, behavioral problems, etc. Accidents, homicide and suicide are the leading causes of death in the adolescent population between ages 15 and 24. According to the American Medical Association's Guidelines for Adolescent Preventive Services, "Annual visits offer the opportunity to reinforce health promotion messages for both adolescents and their parents, identify adolescents who have initiated health risk behaviors or who are at early stages of physical or emotional disorders, provide immunizations, and develop relationships with the adolescents that will foster an open disclosure of future health information."

The American Medical Association's Guidelines for Adolescent Preventive Services, the federal government's Bright Futures program and the American Academy of Pediatrics guidelines all recommend yearly well-care visits for adolescents. The adolescent well-care visit rates for Sanford Health Plan were reported for members in the 12 to

21 year old age group having had at least 1 well-care visit with a primary care practitioner. The rates below show the percentage of Plan members who had a well-care visit during the measurement year.

Adolescent Well-Care Visits

Adolescent Well-Care Visits:	HEDIS 2010	HEDIS 2011	HEDIS 2012	HEDIS 2013	National Average 2011[1]	Healthy People 2020[2]
Ages 12 - 21	28.82%	28.93%	29.27%	29.45%	43.20%	75.6%

[1]The source for data is Quality Compass® 2011 and is used with the permission of the National Committee for Quality Assurance (NCQA). Any analysis, interpretation, or conclusion based on these data is solely that of the authors, and NCQA specifically disclaims responsibility for any such analysis, interpretation, or conclusion. Quality Compass is a registered trademark of NCQA.

[2]Healthy People 2020 goal is based on ages 10-17.

Adolescent Health Program

Sanford Health Plan would like to see every adolescent develop an open and trusting relationship with a physician. Yearly visits offer this opportunity and the opportunity to reinforce health promotion messages for both adolescents and their parents. These visits will also identify adolescents who may have health risk behaviors or who are in the early stages of a physical or emotional disorder.

In an effort to increase the number of adolescent well-care visits, notices are published in the Member Messenger newsletter on a yearly basis regarding "Back-To-School Checkup Time". Birthday cards are sent monthly to those members turning 11 and 12 as a reminder to make sure they are up-to-date on immunizations by their 13th birthday. This postcard recommends a yearly wellness visit and reminds them of their benefits for yearly visits and immunizations.

A pilot project was also implemented to incentivize adolescents to get their wellness physical. Postcard reminders were sent to the parents first and then directly to the adolescent. Based on the success of this program, the postcard reminders were then rolled out to the rest of the Plan's group members in this age category.

The Plan encourages parents and adolescents to visit our website at www.sanfordhealthplan.com and click on the KidsHealth link for valuable health information for parents, kids and teens. The parent information topics include general health, infections, emotions & behavior, growth & development, recipes, medical problems, Q&A, positive parenting, first aid & safety and doctors & hospitals. Kids and teens will also enjoy the information provided specifically for them on this site.
Over the past few years the Health Plan has communicated with practitioners regarding preventive visits for adolescents and fostering these relationships. Preventive Health Guidelines and immunization guidelines are communicated yearly through the newsletters and the Health Plan encourages input from practitioners regarding the guidelines. The guidelines are also available on the Plan's website at www.sanfordhealthplan.com.

Quality Programs & Activities

Sanford Health Plan conducts, at a minimum, 2 health management programs each year as well as quality improvement activities as needed. Following are the quality evaluation and reporting steps utilized by the Plan:

- Problem Identification through the ongoing monitoring of process, structure, and outcomes of patient care or clinical performance and the evaluation of the data collected to identify potential problems.
- Selection of problems warranting corrective action or focused studies based on the prevalence of the problem or the severity of the problem impact on patient care and professional practices.
    - Topics for focused studies, health management programs and QI activities may be based on 1 of many factors:
        - Demographic characteristics, including age and sex of the member,
        - Areas of high volume,
        - Areas of high risk,
        - Areas demonstrating over or under utilization,
        - Areas that can be corrected or where prevention may have an impact, or
        - Areas where complaints or dissatisfaction have occurred.
    - Once the topic is selected, the following sources are then used to identify eligible members for the program or activity:
        - Claims data (medical and pharmacy),
        - Health risk appraisal data, if applicable,
        - Laboratory results, if applicable,
        - Data collected through the case management or UM process, if applicable, or
        - Member, practitioner or Plan staff (i.e., UM, Complex Case Management, Care Management, Health Information Line) referrals.
- Documenting corrective action steps including measurable objectives for each action, time frames, and the persons responsible for implementing the corrective action.
- After action steps are implemented and time has passed for the steps to take effect, a re-evaluation of the problem area will be done.
- Results of QI activities/surveys are published at year-end for practitioner, provider and member information by way of newsletters and special mailings. All contracted practitioners and providers are offered the opportunity to assist in problem selection by notifying the Plan regarding issues of concern. Reference is made yearly in the newsletter and/or special mailing for this opportunity.

Case Management Services

Sanford Health Plan offers case management services to all the members of our insured employer groups in order to assist in controlling healthcare costs. The case manager facilitates communication and coordination between members and practitioners of medical services. By involving all members of the healthcare team in the decision-making process, fragmentation of the healthcare delivery system is minimized. The case manager educates our members about wellness, health conditions, community resources, insurance benefits, cost factors and issues of concern. Serving as the link between individuals, practitioners, payers and the community, the case manager encourages and is an advocate for appropriate use of medical cost effectiveness on a case-by-case basis.

Complex Case Management Program

Sanford Health Plan's Complex Case Management Program is available to qualifying Health Plan Members and their families "FREE" of charge. Complex case management is a process that aims to identify high-risk or high cost Members, assess treatment options and opportunities to coordinate care, design treatment programs to improve quality and efficacy of care, control costs and manage Member care to ensure the optimum outcome. Concentrating for the most part on catastrophic or chronic cases, case manager nurses are called in to consult and manage diagnoses such as serious traumas, cancers, organ transplants, spinal cord injuries, multiple chronic illnesses and/or chronic illnesses that result in high utilization and diagnoses as identified by our reinsurance provider.

Health Plan Nurse Case Managers manage these complex cases to ensure high quality, cost effective and appropriate utilization of health services. The case manager acts as a Member advocate, seeking and coordinating creative solutions to a Member's health care needs without compromising quality health outcomes for selected medical diagnoses. The case manager contacts our Members by phone and mail. She is able to act as a resource, educator and/or coordinator of all medical care if needed.

If you would like more information about this program and whether you or your patient meet the criteria to participate in the program, please contact a Sanford Health Plan Complex Case Manager at (888) 315-0884.

Preventive Health Guidelines

Health promotion and disease prevention is our best opportunity to reduce the ever-increasing portion of resources spent to treat preventable illnesses and impairments that could have been prevented. As a health plan we would not be doing our jobs if we did not educate our members on how to cut health care costs, prevent premature onset of disease and disability, and to help all people achieve healthier, more productive lives.

Preventive Health Guidelines are age-specific and describe prevention or early detection interventions and recommended frequency and conditions under which the interventions are required. Appropriate practitioners are involved in the development of preventive health guidelines (i.e., practitioners who are from specialties that would use the guidelines).

Members of Sanford Health Plan are encouraged to utilize preventive health services, health education and health promotion by publicizing preventive health services, educational classes, and other articles on prevention in special mailings or in the Member Messenger Newsletters.

Current Preventive Health Guidelines are available on our website at www.sanfordhealthplan.com for both members and practitioners. A paper copy is available by calling the Plan at (605) 328-6800 or (800) 752-5863.

Sanford Health Plan Quality Improvement Committees

Physician Quality Committee

The Physician Quality Committee consists of physician members from various specialties of care. The Physician Quality Committee is charged with supporting the Plan's Board of Directors and Chief Medical Officer in meeting quality assurance goals on **issues of care**. Its responsibilities include, but are not limited to, developing and continually evaluating the review criteria used in the evaluation of appropriate utilization, development and implementation of medical policies and procedures and evaluation of quality programs. This Committee is also responsible for the Plan's pharmaceutical management procedures as well as formulary decisions.

Health Plan Quality Improvement Committee

The Health Plan Quality Improvement Committee is comprised of Plan directors and staff and is charged with supporting the Plan's Board of Directors and Chief Medical Officer in meeting quality assurance goals on **issues of service**.

The purpose of the QI Committee is to provide a mechanism for the comprehensive review of all health care issues affecting patients and facilitating the peer review process. The Committee is also responsible for quality activities by establishing, reviewing, and instituting needed actions and ensuring follow-up as appropriate. The committee will make recommendations to the Board of Directors regarding changes to Plan policies and procedures to improve quality based on the results of satisfaction surveys, evaluation of complaint and appeal data and quality improvement activities or processes. This Committee also serves as the internal confidentiality committee and ensures that appropriate practices are in place for the protection of member information.

Credentialing Committee

The Credentialing Committee is responsible for reviewing all issues regarding participating practitioners and determines a status for each individual who requests to be in the Sanford Health Plan practitioner network. Most often, the Committee will be reviewing new credentialing files and recredentialing files of participating practitioners at least every 3 years. However, in the instances of the Plan becoming aware of any serious quality deficiencies where the welfare of a Plan member may be affected, it is the responsibility of the Credentialing Committee members to determine if the status of that practitioner needs to be altered. The determinations of the Committee regarding participation status of all practitioners, as well as any alterations to a practitioner's status, are reviewed and approved the Sanford Health Plan Board of Directors. The monthly Credentialing Committee consists of physician members of various specialty backgrounds.

Member and Practitioner Communications

The following are the tools Sanford Health Plan utilizes to ensure timely and accurate communications with members and practitioners alike.

Member Messenger Newsletter

This newsletter is published for Sanford Health Plan members 3 times a year. It communicates information on preventive health, health management programs and quality improvement activities, how to initiate a complaint or appeal, answers to commonly asked questions, educational classes available to members, various educational articles, satisfaction survey results Plan policies and procedures, how to access the practitioner directory, pharmacy benefit information and much more. Members are also directed to access and utilize the Plan's website and ensured that if they do not have internet access, all information is available by calling the Plan.

Provider Perspective Newsletter

This newsletter goes out to all Sanford Health Plan practitioners 3 times a year. It communicates information such as Plan policies and procedures, information on preventive health, health management programs and quality improvement activities, clinical practice guidelines, satisfaction survey results, answers to commonly asked questions, billing and claims information, how to access the practitioner directory, pharmacy benefit information and much more. Practitioners are also directed to access and utilize the Plan's website and ensured that if they do not have internet access, all information is available by calling the Plan.

Medical Updates Newsletter

This newsletter is a tool for Sanford Health Plan's Chief Medical Officer, Dr. Michael Crandell, to utilize in communicating various educational or informational topics to Plan practitioners. This newsletter is sent on an as needed basis.

Health Notions Newsletter

This newsletter addresses health and wellness topics. It is sent on a monthly basis to the Plan's employer groups to share with their employees.

Sanford Health Plan Website

To further improve communication with our members, practitioners and providers, the Plan has a website that includes information for members, practitioners, employers and visitors. Whenever members are directed to the website through paper materials like the newsletters, they are also reminded that if they do not have internet access, they can call the Plan to request the same information.

The website also includes a link to the Plan's online portal, *my*HealthPlan. *my*HealthPlan allows members access to their personal medical and pharmacy claims and benefit information, check the status of claim payments, access their flexible spending account, ask questions, order ID cards online, enroll in health management programs, submit health related questions, access educational information on a variety of health conditions and much more.

WorldDoc, another feature of *my*HealthPlan, is a secure, health education website that provides the tools and information you need to better manage your health and to help you make informed healthcare decisions. Available 24/7 from any computer with Internet access, WorldDoc gives you the opportunity to privately evaluate and manage your health by:

- Learning your health risks by completing the Health Risk Assessment
- Improving health habits with the Healthy Living Program
- Using the Personal Evaluation System to investigate symptoms
- Searching the Medical Library to learn about medical conditions
- Tracking health behaviors, such as exercise or fruits and vegetable consumption, with the Health Trackers

Visit www.sanfordhealthplan.com and click on the *my*HealthPlan tab to create an account and explore what a great resource *my*HealthPlan and WorldDoc can be!

Conclusion

This report is Sanford Health Plan's commitment to our customers that we will continue to provide cost effective, quality care and service. Sanford Health Plan uses the data included in this report internally to identify opportunities for improvement and areas in need of quality improvement initiatives or health management programs.

Due to the changing nature of many of the HEDIS measures, employer groups and practitioners are advised to use HEDIS measures with care as a basis to initiate discussions with the Plan regarding our delivery system and quality of care and service being provided to our members.

The measures presented in this report have been audited by a certified HEDIS compliance auditor. Any questions regarding definitions of measures, data sources, information system specifications or quality projects should be directed to the Sanford Health Plan Care Management Department at (888) 315-0884.

Sources

1. The source for data contained in this publication is Quality Compass® 2011 and is used with the permission of the National Committee for Quality Assurance (NCQA). Any analysis, interpretation, or conclusion based on these data is solely that of the authors, and NCQA specifically disclaims responsibility for any such analysis, interpretation, or conclusion. Quality Compass® is a registered trademark of the National Committee for Quality Assurance (NCQA).
2. U.S. Department of Health and Human Services. "2020 Topics & Objectives." Healthy People .gov. 2 May 2011. Web. 14 Jul. 2011.

Formulary

for non-grandfathered members

The following is a list of the most commonly prescribed drugs. It represents an abbreviated version of the drug formulary that is the core of your pharmacy benefit coverage. In addition to using this list, allowing substitution of generic products is encouraged when appropriate.

If you are currently on a 3 or 4-tier pharmacy benefit program, the lowest co-payment is applied to all covered generic drugs. Generic drugs are indicated in bold. Tier 2 co-payment will apply to all of the covered brands listed on this formulary. Brand name drugs are listed in CAPITAL letters.

This is NOT a complete listing of covered drugs. For a complete list of medications, you can go to www.sanfordhealthplan.com/myhealthplan and link to the Express Scripts website.

"PA Required" indicates that prior authorization is required on that specific medication. "Step therapy" indicates the medication requires the use of first-line alternatives before more expensive second-line drugs are covered by the pharmacy benefit. Drugs marked with an asterisk (*) must be obtained from CuraScript.

If you are currently taking or are prescribed an injectable medication, please contact CuraScript Injectable Drug Program at (866) 333-9721 to order your drugs. Refer to the Pharmacy Handbook for a complete listing of drugs and instructions.

If you have questions regarding coverage call (800) 805-7938.

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	DRUG NAME	PA/STEP/QLL	TIER 1	TIER 2	TIER 3	TIER 4	SUGGESTED PREFFERED ALTERNATIVES
CHAPTER 1: ANESTHETICS							
1.2 TOPICAL ANESTHETICS							
	lidocaine hcl		X				
	lidocaine-prilocaine		X				
	LIDODERM			X			
CHAPTER 2: ANTIINFECTIVES							
2.1.1 CEPHALOSPORINS							
	cefaclor er		X				
	cefadroxil		X				
	cefdinir		X				
	cefpodoxime proxetil		X				
	cefprozil		X				
	cefuroxime		X				
	cephalexin		X				
	CEDAX				X		**cefprozil, cefuroxime, amox/clav**
	SUPRAX				X		**cefprozil, cefuroxime, amox/clav**
2.1.3 CLINDAMYCINS							
	clindamycin hcl		X				
	clindamycin phosphate		X				
2.1.4 ERYTHROMYCINS							
	erythromycin		X				
2.1.4.1 OTHER MACROLIDES							
	azithromycin		X				
	clarithromycin/er		X				
2.1.5 PENICILLINS							
	amox tr-potassium clavulanate		X				
	amoxicillin		X				
	amoxicillin-clavulanate er		X				
	dicloxacillin sodium		X				
	penicillin v potassium		X				
2.1.6 SULFONAMIDES							
	sulfamethoxazole-trimethoprim		X				
2.1.7 TETRACYCLINES							
	doxycycline hyclate		X				
	doxycycline monohydrate		X				
	minocycline hcl		X				
	tetracycline hcl		X				
	DORYX				X		
2.1.8 URINARY ANTIINFECTIVES							
	nitrofurantoin		X				
	nitrofurantoin mono-macro		X				
	trimethoprim		X				
2.1.9 QUINOLONES							
	ciprofloxacin, -er		X				
	levofloxacin		X				
	ofloxacin		X				
	AVELOX/ABC PACK			X			
	FACTIVE				X		
	NOROXIN				X		**ciprofloxacin, levofoxacin, ofloxacin**, AVELOX
2.2 TOPICAL ANTIBACTERIAL DRUGS							
	gentamicin sulfate		X				
	mupirocin		X				
	silver sulfadiazine		X				

DRUG NAME		PA/STEP/QLL	TIER				SUGGESTED PREFFERED ALTERNATIVES
			1	2	3	4	
	ALTABAX				X		
	BACTROBAN NASAL OINTMENT				X		
2.3 ORAL ANTIFUNGAL DRUGS							
	fluconazole		X				
	griseofulvin		X				
	itraconazole		X				
	ketoconazole		X				
	nystatin		X				
	terbinafine hcl		X				
	voriconazole		X				
	GRIFULVIN V			X			
	ONMEL				X		
	ORAVIG				X		
2.4.1 VAGINAL ANTIFUNGALS							
	clotrimazole		X				
	terconazole		X				
2.4.2 OTHER TOPICAL ANTIFUNGALS							
	ciclopirox		X				
	clotrimazole		X				
	econazole nitrate		X				
	ketoconazole		X				
	nystatin		X				
	ERTACZO				X		**generic**/OTC ANTIFUNGAL
	EXELDERM				X		**generic**/OTC ANTIFUNGAL
	NAFTIN				X		**generics**, LOROX
	OXISTAT				X		**generic**/OTC ANTIFUNGAL
2.4.3 TOPICAL ANTIFUNGAL-CORTICOSTEROID COMB.							
	clotrimazole-betamethasone		X				
	nystatin-triamcinolone		X				
2.5.1 ANTIRETROVIRALS & PROTEASE INHIBITORS							
	lamivudine		X				
	lamivudine-zidovudine		X				
	nevirapine		X				
	ATRIPLA			X			
	COMBIVIR			X			
	COMPLERA				X		
	EPIVIR			X			
	EPZICOM			X			
	INCIVEK	PA			X		
	INTELENCE				X		
	ISENTRESS			X			
	KALETRA			X			
	LEXIVA			X			
	NORVIR			X			
	PREZISTA			X			
	REYATAZ			X			
	SUSTIVA			X			
	TRUVADA			X			
	VICTRELIS	PA			X		
	VIRAMUNE			X			
	VIRAMUNE XR				X		
	VIREAD			X			
	ZIAGEN			X			
2.5.2 OTHER ANTIVIRAL DRUGS							

	DRUG NAME	PA/STEP/QLL	TIER 1	2	3	4	SUGGESTED PREFFERED ALTERNATIVES
	acyclovir		X				
	amantadine		X				
	famciclovir		X				
	ribapak					X	
	ribavirin					X	
	valacyclovir		X				
	BARACLUDE				X		
	DENAVIR			X			
	EPIVIR HBV			X			
	RELENZA	QLL		X			
	TAMIFLU	QLL		X			
2.6 TOPICAL ANTIVIRAL DRUGS							
	XERESE				X		
	ZOVIRAX			X			
2.7.2 ANTITUBERCULOSIS DRUGS							
	isoniazid		X				
	rifampin		X				
	MYCOBUTIN			X			
2.7.3 PLASMODICIDES							
	atovaquone-proguanil hcl		X				
	hydroxychloroquine sulfate		X				
	mefloquine hcl		X				
	QUALAQUIN				X		
2.7.4 SULFONES							
	DAPSONE			X			
2.7.5 TRICHOMONOCIDES							
	metronidazole		X				
	tinidazole		X				
2.8 OTHER ANTIINFECTIVE DRUGS							
	bacitracin		X				
	vancomycin hcl		X				
	DIFICID				X		
	MEPRON			X			
	NEBUPENT			X			
	VANCOCIN PULVULE	PA			X		
	XIFAXAN				X		
	ZYVOX	PA		X			
2.8.2 AMINOGLYCOSIDES							
	gentamicin sulfate		X				
	tobramycin sulfate		X				
	TOBI					X	
CHAPTER 3: ANTINEOPLASTIC/IMMUNOSUPPRESSANT DRUGS							
3.0 ANTINEOPLASTIC/IMMUNOSUPPRESSANT DRUGS							
	anagrelide hcl					X	
	azathioprine					X	
	cyclosporine modified					X	
	hydroxyurea					X	
	leflunomide					X	
	megestrol acetate					X	
	mercaptopurine					X	
	methotrexate					X	
	mycophenolate mofetil					X	
	tacrolimus					X	
	tamoxifen citrate					X	

	DRUG NAME	PA/STEP/QLL	TIER 1	2	3	4	SUGGESTED PREFFERED ALTERNATIVES
	tretinoin		X				
	ENBREL	PA				X	
	HUMIRA	PA				X	
	MEGACE ES					X	
	MYFORTIC					X	
	RAPAMUNE					X	
	SIMPONI	PA				X	
	STELARA	PA				X	
CHAPTER 4: CARDIOVASCULAR MEDICATIONS							
4.1 CARDIAC GLYCOSIDES							
	digoxin		X				
	LANOXIN			X			
4.2 CALCIUM ANTAGONISTS							
	amlodipine besylate		X				
	cartia xt		X				
	diltiazem/er		X				
	felodipine er		X				
	nifediac cc		X				
	nifedical xl		X				
	nifedipine er		X				
	nisoldipine		X				
	verapamil/er pm		X				
	CARDENE SR				X		**generics, amlodipine**
	CARDIZEM LA				X		
	SULAR				X		**nisoldipine**
4.3.1 LOOP DIURETICS							
	bumetanide		X				
	furosemide		X				
	torsemide		X				
4.3.2 THIAZIDE AND RELATED DRUGS							
	chlorthalidone		X				
	hydrochlorothiazide		X				
	indapamide		X				
	metolazone		X				
4.3.3 POTASSIUM SPARING DIURETICS							
	amiloride hcl		X				
	eplerenone		X				
	spironolactone		X				
	spironolactone-hctz		X				
	triamterene-hctz		X				
	triamterene-hydrochlorothiazid		X				
4.4 BETA-ADRENERGIC ANTAGONIST DRUGS							
	acebutolol hcl		X				
	atenolol		X				
	bisoprolol fumarate		X				
	carvedilol		X				
	labetalol hcl		X				
	metoprolol succinate		X				
	metoprolol tartrate		X				
	nadolol		X				
	pindolol		X				
	propranolol hcl		X				
	timolol maleate		X				
	BYSTOLIC				X		

DRUG NAME		PA/STEP/QLL	TIER				SUGGESTED PREFFERED ALTERNATIVES
			1	2	3	4	
	COREG CR				X		**carvedilol**
	INNOPRAN XL				X		
4.5.1 VASODILATOR ANTIHYPERTENSIVES							
	doxazosin mesylate		X				
	minoxidil		X				
	prazosin hcl		X				
	terazosin hcl		X				
4.5.2 CENTRALLY ACTING ANTIHYPERTENSIVES							
	clonidine, hcl		X				
	guanfacine hcl		X				
	methyldopa		X				
4.5.4.1 ANGIOTENSIN CONVERTING ENZYME INHIBITORS							
	benazepril hcl		X				
	captopril		X				
	enalapril maleate		X				
	fosinopril sodium		X				
	lisinopril		X				
	moexipril hcl		X				
	quinapril hcl		X				
	ramipril		X				
	trandolapril		X				
4.5.4.2 ANGIOTENSIN II RECEPTOR ANTAGONISTS							
	candesartan, -hctz		X				
	eprosartan mesylate		X				
	irbesartan, -hctz		X				
	losartan, -hctz		X				
	valsartan hctz		X				
	DIOVAN			X			
	EDARBI				X		**generics**, DIOVAN
	MICARDIS, -HCT				X		**generics**, DIOVAN
	TEVETEN HCT				X		**generics**
4.5.6 OTHER ANTIHYPERTENSIVES							
	amlodipine besylate-benazepril		X				
	atenolol-chlorthalidone		X				
	benazepril-hydrochlorothiazide		X				
	bisoprolol-hydrochlorothiazide		X				
	captopril-hydrochlorothiazide		X				
	enalapril-hydrochlorothiazide		X				
	fosinopril-hydrochlorothiazide		X				
	irbesartan-hydrochlorothiazide		X				
	lisinopril-hydrochlorothiazide		X				
	losartan-hydrochlorothiazide		X				
	metoprolol-hydrochlorothiazide		X				
	moexipril-hydrochlorothiazide		X				
	AMTURNIDE				X		
	AZOR				X		
	EXFORGE/HCT				X		
	TARKA ER				X		**trandolapril/verapamil**
	TEKAMLO				X		
	TEKTURNA/HCT				X		
	TRIBENZOR				X		
4.6.1 NITRATES							
	isosorbide		X				
	isosorbide dinitrate		X				

DRUG NAME		PA/STEP/QLL	TIER				SUGGESTED PREFFERED ALTERNATIVES
			1	2	3	4	
	nitroglycerin		X				
	nitroglycerin patch		X				
	NITROSTAT			X			
4.7.1.3 CLASS 1C							
	flecainide acetate		X				
	propafenone hcl		X				
	RYTHMOL SR				X		**propafenone**
4.7.3 AMIODARONES							
	amiodarone hcl		X				
4.7.5 OTHER ANTIARRHYTHMICS							
	sotalol		X				
	MULTAQ			X			
	TIKOSYN			X			
4.8.1 HYPOLIPOPROTEINEMICS							
	cholestyramine		X				
	colestipol hcl		X				
	fenofibrate		X				
	fenofibric acid		X				
	gemfibrozil		X				
	LOVAZA	PA		X			
	WELCHOL				X		
	ZETIA	ST		X			
4.8.2 HMG-COA REDUCTASE INHIBITORS							
	atorvastatin		X				
	fluvastatin	ST	X				
	lovastatin		X				
	pravastatin		X				
	simvastatin		X				
	CRESTOR	ST		X			
	LIVALO	ST			X		**generic HMGs**, Crestor
4.8.2.1 HMG-COA COMBINATIONS							
	amlodipine-atorvastatin		X				
	ADVICOR			X			
	CADUET	ST		X			
	LIPTRUZET	ST		X			
4.9 OTHER CARDIOVASCULAR DRUGS							
	pentoxifylline		X				
	RANEXA			X			
CHAPTER 5: AUTONOMIC AND CNS MEDICATIONS							
5.1.1 ANALGESICS							
	butorphanol tartrate		X				
	tramadol hcl/er		X				
	tramadol hcl-acetaminophen		X				
5.1.1.1 CLASS II NARCOTICS							
	endocet		X				
	fentanyl		X				
	hydromorphone hcl		X				
	methadone hcl		X				
	morphine sulfate/er		X				
	oxycodone hcl		X				
	oxycodone-acetaminophen		X				
	oxymorphone hcl		X				
	ROXICET		X				
	NUCYNTA, -ER	PA			X		

DRUG NAME		PA/STEP/QLL	TIER				SUGGESTED PREFFERED ALTERNATIVES
			1	2	3	4	
	OPANA ER	PA			X		
	OXYCONTIN			X			
5.1.1.2 CLASS III NARCOTICS							
	acetaminophen-codeine		X				
	buprenorphine hcl		X				
	hydrocodone bit-ibuprofen		X				
	hydrocodone-acetaminophen		X				
	reprexain		X				
	zamicet		X				
	BUTRANS				X		
	SUBOXONE				X		
5.1.2 DRUGS TO PREVENT AND TREAT HEADACHES							
	butalbital compound-codeine		X				
	butalbital-aspirin-caffeine		X				
	dihydroergotamine nasal spray		X				
	naratriptan tab	9/rx	X				
	rizatriptan tab	12/rx	X				
	sumatriptan tab	12/rx	X				
	sumatriptan inj	1 kit/rx	X				
	sumatriptan nasal spray	6/rx	X				
	zolmitriptan -zmt tab	12/rx	X				
	AXERT	6/rx			X		**naratriptan, rizatriptan, sumatriptan, zolmitritan**, RELPAX
	FROVA	9/rx			X		**naratriptan, rizatriptan, sumatriptan, zolmitritan**, RELPAX
	RELPAX	12/rx		X			
	ZOMIG NASAL SPRAY	6/rx			X		
5.2.1 ANXIOLYTICS							
	alprazolam/er/xr		X				
	buspirone hcl		X				
	chlordiazepoxide hcl		X				
	clorazepate dipotassium		X				
	diazepam		X				
	lorazepam		X				
	oxazepam		X				
5.2.2 SEDATIVE/HYPNOTIC DRUGS							
	estazolam		X				
	flurazepam		X				
	temazepam		X				
	triazolam		X				
	zaleplon		X				
	zolpidem tartrate, -er		X				
	LUNESTA				X		**zolpidem, zaleplon**
	ROZEREM				X		**zolpidem, zaleplon**
5.3 ANTIMANIA DRUGS							
	lithium carbonate		X				
5.4.1 CARBAMAZEPINES							
	carbamazepine, -xr		X				
	oxcarbazepine		X				
	TEGRETOL XR				X		**carbamazepine xr**
5.4.2 ANTICONVULSANT BENZODIAZEPINES							
	clonazepam		X				
	diazepam		X				
5.4.3 HYDANTOINS							

	DRUG NAME	PA/STEP/QLL	TIER 1	TIER 2	TIER 3	TIER 4	SUGGESTED PREFFERED ALTERNATIVES
	phenytoin sodium extended		X				
	DILANTIN			X			
	PHENYTEK			X			
5.4.4 VALPROIC ACID AND DERIVATIVES							
	divalproex sodium, -er		X				
	valproic acid		X				
5.4.6 ANTICONVULSANT BARBITURATES							
	phenobarbital		X				
	primidone		X				
5.4.7 OTHER ANTICONVULSANTS							
	gabapentin		X				
	lamotrigine		X				
	levetiracetam		X				
	topiramate		X				
	zonisamide		X				
	GRALISE				X		
	HORIZANT				X		
	KEPPRA, XR				X		
	LAMICTAL, -ODT, -XR				X		**lamotrigine**
	LYRICA			X			
	POTIGA				X		
	VIMPAT			X			
5.5.1.1 TERTIARY AMINES							
	amitriptyline hcl		X				
	clomipramine hcl		X				
	doxepin hcl		X				
	imipramine hcl		X				
5.5.1.2 SECONDARY AMINES							
	desipramine hcl		X				
	nortriptyline hcl		X				
5.5.1.3 SELECTIVE SEROTONIN REUPTAKE INHIBITORS							
	citalopram, - hbr		X				
	escitalopram oxalate		X				
	fluoxetine hcl		X				
	fluvoxamine maleate		X				
	paroxetine hcl		X				
	sertraline hcl		X				
	VIIBRYD	ST		X			
5.5.1.4 OTHER ANTIDEPRESSANTS							
	bupropion hcl,- sr, -xl		X				
	mirtazapine		X				
	nefazodone hcl		X				
	trazodone hcl		X				
	venlafaxine hcl, -er	ST	X				
	CYMBALTA	ST/QLL		X			
	PRISTIQ ER	ST		X			
	SAVELLA			X			
5.5.2 MAO INHIBITORS							
	tranylcypromine sulfate		X				
5.6 ANTIVERTIGO AND ANTIEMETIC DRUGS							
	dronabinol		X				
	granisetron hcl	LIMIT 2/rx	X				
	meclizine hcl		X				
	ondansetron hcl		X				

DRUG NAME		PA/STEP/QLL	TIER				SUGGESTED PREFFERED ALTERNATIVES
			1	2	3	4	
	ondansetron odt		X				
	prochlorperazine maleate		X				
	promethazine hcl		X				
	promethegan		X				
	ANZEMET	LIMIT 1/rx			X		
	EMEND	LIMIT 3/rx			X		**granisetron, ondansetron**
	TRANSDERM-SCOP				X		
5.7.1 ANTIPARKINSON ANTICHOLINERGIC DRUGS							
	benztropine mesylate		X				
	trihexyphenidyl hcl		X				
5.7.2 OTHER ANTIPARKINSON DRUGS							
	bromocriptine mesylate		X				
	carbidopa-levodopa		X				
	carbidopa-levodopa-entacapone		X				
	pramipexole dihydrochloride		X				
	ropinirole hcl		X				
	AZILECT			X			
	COMTAN			X			
	MIRAPEX ER				X		
	NEUPRO				X		
	REQUIP XL				X		
	STALEVO				X		**use generic**
5.8 ANTIPSYCHOTIC DRUGS							
	clozapine		X				
	fluphenazine hcl		X				
	haloperidol		X				
	olanzapine, -odt		X				
	perphenazine		X				
	quetiapine fumarate		X				
	risperidone		X				
	thioridazine hcl		X				
	thiothixene		X				
	trifluoperazine hcl		X				
	ziprasidone hcl		X				
	ABILIFY			X			
	FANAPT				X		**generics**, ABILIFY TAB, SEROQUEL XR
	GEODON			X			
	INVEGA ER	PA			X		**generics**, ABILIFY TAB, SEROQUEL XR
	LATUDA			X			
	SAPHRIS	PA			X		**generics**, ABILIFY TAB, SEROQUEL XR
	SEROQUEL XR			X			
5.8.1 ALIPHATIC PHENOTHIAZINES							
	chlorpromazine hcl		X				
5.8.1.1 PSYCHOTHERAPEUTIC COMBINATIONS							
	olanzapine-fluoxetine hcl		X				
	SYMBYAX				X		
5.9.1 CNS STIMULANT DRUGS							
	amphetamine salt combo		X				
	dexmethylphenidate hcl, -sulfate		X				
	dextroamphetamine-amphetamine		X				
	methylphenidate er, -hcl, -sr		X				
	modafinil		X				
	DAYTRANA				X		
	FOCALIN XR				X		

	DRUG NAME	PA/STEP/QLL	TIER 1	2	3	4	SUGGESTED PREFFERED ALTERNATIVES
	NUVIGIL				X		
	QUILLIVANT XR				X		
	RITALIN LA				X		**methylphenidate**,VYVANSE
	VYVANSE			X			
5.9.2 OTHER CNS/AUTONOMIC DRUGS							
	atropine sulfate		X				
	naltrexone hcl		X				
	pyridostigmine bromide		X				
	NUEDEXTA				X		
5.9.3 ANTIDEMENTIA DRUGS							
	donepezil hcl		X				
	galantamine hbr		X				
	rivastigmine		X				
	ARICEPT/ODT				X		donepezil
	EXELON SOLUTION, PATCHES				X		rivastigmine
	NAMENDA			X			
	NAMENDA XR				X		
5.9.6 OTHER DRUGS FOR ADHD							
	INTUNIV				X		
	KAPVAY				X		
	STRATTERA			X			
CHAPTER 6: DERMATOLOGICAL MEDICATIONS							
6.1 TOPICAL CORTICOSTEROID DRUGS							
	alclometasone dipropionate		X				
	betamethasone dipropionate		X				
	betamethasone valerate		X				
	clobetasol		X				
	desonide		X				
	desoximetasone		X				
	fluocinolone		X				
	fluticasone propionate		X				
	halobetasol propionate		X				
	hydrocortisone butyrate, -valerate		X				
	mometasone furoate		X				
	triamcinolone acetonide		X				
	CLOBEX				X		
	HALOG				X		**generics**
	KENALOG				X		**halobetasol propionate**
	OLUX-E				X		**clobetasol propionate**
	ULTRAVATE PAC				X		**halobetasol propionate**
6.2 ANTIPRURITIC DRUGS							
	hydroxyzine		X				
6.3 ANTIACNE DRUGS							
	adapalene		X				
	benzoyl peroxide		X				
	clindamycin phosphate		X				
	clindamycin-benzoyl peroxide		X				
	erythromycin		X				
	erythromycin-benzoyl peroxide		X				
	metronidazole		X				
	sodium sulfacetamide-sulfur		X				
	tretinoin	PA	X				
	ACANYA				X		
	BENZACLIN			X			

	DRUG NAME	PA/STEP/QLL	TIER 1	TIER 2	TIER 3	TIER 4	SUGGESTED PREFFERED ALTERNATIVES
	DIFFERIN 0.1% LOTION & 0.3% GEL			X			**adapalene**
	DUAC			X			
	EPIDUO			X			
	FINACEA				X		
	METROGEL				X		
	RETIN-A MICRO/PUMP	PA		X			
6.3.1 ACCUTANES							
	isotretinoin		X				
6.7 KERATOLYTIC DRUGS							
	CONDYLOX				X		**podofilox**
6.8 ANTIPSORIASIS AND ANTIECZEMA DRUGS							
	calcipotriene		X				
	calcitrene		X				
	selenium sulfide		X				
	sulfacetamide sodium		X				
	DOVONEX			X			
	SORILUX				X		
	TACLONEX				X		
	TAZORAC			X			
	VECTICAL				X		**calcipotriene ointment**
6.9.2 TOPICAL DERMATOLOGICAL DRUGS							
	fluorouracil		X				
	imiquimod		X				
	tretinoin		X				
	CARAC			X			
	ELIDEL			X			
	EPICERAM				X		
	FLUOROPLEX			X			
	PICATO				X		
	PROTOPIC			X			
	SANTYL				X		
	SOLARAZE				X		**fluorouracil**
	VEREGEN				X		**podofilox**
	ZYCLARA			X			
6.9.3 SCABICIDES							
	permethrin		X				
	EURAX			X			
	ULESFIA				X		
6.9.5 TOPICAL ANTI-INFLAMMATORY DRUGS							
	FLECTOR			X			
	VOLTAREN			X			
CHAPTER 7: EAR-NOSE-THROAT MEDICATIONS							
7.1 DRUGS AFFECTING THE EAR							
	antipyrine-benzocaine		X				
	neomycin-polymyxin-hc		X				
	neomycin-polymyxin-hydrocort		X				
	ofloxacin		X				
	CIPRODEX				X		**generic otic quinolone**
7.2 DRUGS AFFECTING THE NOSE							
	azelastine hcl		X				
	flunisolide		X				
	fluticasone propionate		X				
	ipratropium bromide		X				
	ASTELIN			X			

DRUG NAME		PA/STEP/QLL	TIER				SUGGESTED PREFFERED ALTERNATIVES
			1	2	3	4	
	ASTEPRO			X			
	DYMISTA				X		
	NASONEX			X			
	QNASL	PA			X		
	VERAMYST	PA			X		**fluticasone**, NASONEX
	ZETONNA	PA			X		
7.3 DRUGS AFFECTING THE THROAT AND MOUTH							
	doxycycline hyclate		X				
	pilocarpine hcl		X				
	triamcinolone acetonide		X				
CHAPTER 8: ENDOCRINE MEDICATIONS							
8.1.1 INSULIN							
	APIDRA/SOLOSTAR				X		
	HUMALOG			X			
	HUMULIN			X			
	LANTUS/SOLOSTAR			X			
	LEVEMIR/FLEXPEN			X			
	NOVOLIN			X			
	NOVOLOG/FLEXPEN			X			
	NOVOLOG MIX 70-30/FLEXPEN			X			
8.1.2 ORAL HYPOGLYCEMIC DRUGS							
	acarbose		X				
	glimepiride		X				
	glipizide, -er, -xl, -w/metformin		X				
	glyburide, -micronized, -w/metformin		X				
	metformin hcl/er		X				
	nateglinide		X				
	FORTAMET				X		
	PRANDIMET				X		
	PRANDIN			X			
	RIOMET				X		**metformin**
8.1.3 INSULIN SENSITIZERS							
	pioglitazone		X				
	pioglitazone-metformin		X				
	ACTOPLUS MET XR			X			
	AVANDAMET				X		**pioglitazone-metformin**
	AVANDARYL				X		**pioglitazone + sulfonylurea**
	AVANDIA				X		**pioglitazone**
	DUETACT				X		
8.1.4 AMYLIN ANALOGUES							
	SYMLINPEN VIAL	PA		X			
	SYMLINPEN PEN	PA			X		
8.1.5.1 INCRETIN MIMETICS							
	BYDUREON	ST		X			
	BYETTA	ST		X			
	VICTOZA	ST		X			
8.1.5.2 DIPEPTIDYL PEPTIDASE-IV INHIBITORS							
	JANUMET/XR			X			
	JANUVIA			X			
	JENTADUETO			X			
	JUVISYNC			X			
	KOMBIGLYZE XR			X			
	ONGLYZA			X			

DRUG NAME		PA/STEP/QLL	TIER				SUGGESTED PREFFERED ALTERNATIVES
			1	2	3	4	
	TRADJENTA			X			
8.2 GLUCOSE ELEVATING DRUGS							
	GLUCAGEN			X			
	GLUCAGON EMERGENCY KIT			X			
8.3.1 GLUCOCORTICOID DRUGS							
	dexamethasone		X				
	dexamethasone sodium phosphate		X				
	hydrocortisone		X				
	methylprednisolone		X				
	prednisolone		X				
	prednisone		X				
	veripred 20 solution		X				
8.3.2 MINERALOCORTICOID DRUGS							
	fludrocortisone acetate		X				
8.4.1 THYROID SUPPLEMENTS							
	levothyroxine sodium		X				
	ARMOUR THYROID			X			
	CYTOMEL				X		**liothyronine**
	SYNTHROID			X			
8.4.2 ANTITHYROID DRUGS							
	methimazole		X				
	propylthiouracil		X				
8.6 OTHER ENDOCRINE DRUGS							
	alendronate sodium		X				
	desmopressin acetate		X				
	etidronate disodium		X				
	ibandronate sodium		X				
	ACTONEL	PA			X		**alendronate**
CHAPTER 9: GASTROINTESTINAL MEDICATIONS							
9.2 ANTIDIARRHEAL DRUGS							
	diphenoxylate-atropine		X				
	loperamide		X				
9.3 ANTISPASMODICS/DRUGS AFFECT GI MOTILITY							
	chlordiazepoxide-clidinium		X				
	dicyclomine hcl		X				
	hyoscyamine sulfate		X				
	metoclopramide hcl		X				
9.4.1 OTHER ANTIULCER DRUGS							
	misoprostol		X				
	sucralfate		X				
	CARAFATE			X			
9.4.2 PROTON PUMP INHIBITORS							
	omeprazole		X				
	pantoprazole sodium		X				
	ACIPHEX	PA			X		**pantoprazole, omeprazole**
	DEXILANT	PA			X		**pantoprazole, omeprazole**
	NEXIUM	PA			X		**pantoprazole, omeprazole**
9.4.3 HELICOBACTER PYLORI DRUGS							
	HELIDAC				X		**generic equivalents**
	OMECLAMOX-PAK				X		**generic equivalents**
	PREVPAC				X		**generic equivalents**
	PYLERA				X		**generic equivalents**
9.5 LAXATIVES AND CATHARTICS							
	OSMOPREP				X		

DRUG NAME		PA/STEP/QLL	TIER 1	2	3	4	SUGGESTED PREFFERED ALTERNATIVES
9.6 OTHER GI DRUGS							
	anucort-hc		X				
	balsalazide disodium		X				
	budesonide ec		X				
	hydrocortisone, -acetate		X				
	pancrelipase 5,000		X				
	peg 3350-electrolyte		X				
	proctosol-hc		X				
	proctozone-hc		X				
	sulfasalazine		X				
	trilyte with flavor packets		X				
	ursodiol		X				
	ANALPRAM E				X		
	ANALPRAM HC			X			
	ASACOL HD			X			
	CANASA			X			
	CREON DR			X			
	DELZICOL			X			
	DIPENTUM				X		**sulfasalazine**, ASACOL, LIALDA
	GOLYTELY			X			
	HALFLYTELY-BISACODYL				X		**peg electrolyte**, GOLYTELY
	LIALDA			X			
	MOVIPREP				X		**peg electrolyte**, GOLYTELY
	NULYTELY WITH FLAVOR PACKS			X			
	PANCREAZE				X		
	PENTASA			X			
	PERTZYE				X		
	PREPOPIK				X		
	RECTIV				X		
	SUPREP				X		
	ULTRESA				X		
	ZENPEP				X		
9.7 IRRITABLE BOWEL DRUGS							
	AMITIZA			X			
	LINZESS			X			
CHAPTER 11: MUSCULOSKELETAL MEDICATIONS							
11.1.1 SALICYLATES AND RELATED DRUGS							
	aspirin, -ec		X				$0 with Rx, age restriction applies
	choline mag trisalicylate		X				
	diflunisal		X				
	salsalate		X				
11.1.2 NON-STEROIDAL ANTIINFLAMMATORY AGENTS							
	diclofenac potassium, -sodium		X				
	etodolac		X				
	flurbiprofen		X				
	ibuprofen		X				
	indomethacin		X				
	ketoprofen		X				
	ketorolac tromethamine		X				
	meloxicam		X				
	nabumetone		X				
	naproxen		X				
	oxaprozin		X				
	piroxicam		X				

DRUG NAME		PA/STEP/QLL	TIER 1	2	3	4	SUGGESTED PREFFERED ALTERNATIVES
	sulindac		X				
	CELEBREX	QLL		X			
	NAPRELAN CR				X		**naproxen**
11.2 DRUGS TO PREVENT AND TREAT GOUT							
	allopurinol		X				
	probenecid		X				
	COLCRYS				X		
	ULORIC	PA			X		
11.3.1 DIRECT MUSCLE RELAXANTS							
	baclofen		X				
	tizanidine hcl		X				
11.3.2 CNS MUSCLE RELAXANTS							
	carisoprodol		X				
	chlorzoxazone		X				
	cyclobenzaprine hcl		X				
	metaxalone		X				
	methocarbamol		X				
	orphenadrine citrate		X				
	AMRIX ER				X		**cyclobenzaprine**
CHAPTER 12: NUTRITION,BLOOD							
12.1.3 THERAPEUTIC VITAMINS & MINERALS							
	calcitriol		X				
	calcium acetate		X				
	eliphos		X				
	folic acid		X				$0 with Rx for females age 50 & younger
	levocarnitine		X				
	vitamin d		X				$0 with Rx for age 65 years & older
12.1.4 FLUORIDE PRODUCTS							
	sodium fluoride		X				
12.2 POTASSIUM SUPPLEMENTS							
	potassium chloride		X				
12.3.1 ORAL ANTICOAGULANTS, VITAMIN K							
	warfarin sodium		X				
	COUMADIN			X			
12.3.2 HEPARIN AND HEPARIN ANTAGONISTS							
	enoxaparin sodium					X	
	fondaparinux sodium					X	
	ARIXTRA					X	
	FRAGMIN					X	
12.3.3 OTHER DRUGS AFFECTING COAGULATION							
	ELIQUIS				X		
	XARELTO			X			
12.3.5 THROMBIN INHIBITORS							
	PRADAXA			X			
12.4 ANTIPLATELET DRUGS							
	cilostazol		X				
	clopidogrel		X				
	dipyridamole		X				
	AGGRENOX			X			
	BRILINTA			X			

DRUG NAME		PA/STEP/QLL	TIER 1	2	3	4	SUGGESTED PREFFERED ALTERNATIVES
	EFFIENT			X			
12.5 HEMOSTATICS							
	LYSTEDA				X		
12.7 BLOOD DETOXICANTS							
	enulose		X				
	lactulose		X				
	FOSRENOL				X		
	KRISTALOSE				X		
	RENAGEL			X			
	RENVELA			X			
CHAPTER 13: OBSTETRICAL & GYNECOLOGICAL MEDICATIONS							
13.1.3 OB/GYN TOPICAL ANTIINFECTIVES							
	clindamycin phosphate		X				
	metronidazole		X				
	vandazole		X				
13.3 ANDROGEN DRUGS							
	testosterone cypionate	PA	X				
	ANDRODERM	PA		X			
	ANDROGEL	PA		X			
	AXIRON	PA		X			
	STRIANT	PA			X		
13.4 ESTROGEN DRUGS							
	estradiol		X				
	estrogen-methyltestosterone		X				
	estropipate		X				
	CENESTIN				X		PREMARIN, ESTRATAB
	DIVIGEL				X		orals or patches
	ELESTRIN				X		orals or patches
	ENJUVIA				X		
	ESTRACE			X			
	ESTRASORB				X		orals or patches
	ESTRING	QLL		X			
	ESTROGEL				X		orals or patches
	EVAMIST				X		orals or patches
	MENEST				X		PREMARIN, ESTRATAB
	MINIVELLE				X		
	PREMARIN			X			
	VAGIFEM			X			
	VIVELLE-DOT			X			
13.4.1 ESTROGEN/PROGESTIN COMBINATIONS							
	jinteli		X				
	ACTIVELLA				X		PREMPRO, PREMPHASE
	CLIMARA PRO				X		
	COMBIPATCH			X			
	FEMHRT			X			
	PREFEST				X		PREMPRO, PREMPHASE
	PREMPHASE			X			
	PREMPRO			X			
13.4.3 SELECTIVE ESTROGEN RECEPTOR MODULATOR							
	EVISTA			X			
13.5 PROGESTIN DRUGS							
	camila		X				
	errin		X				

	DRUG NAME	PA/STEP/QLL	TIER 1	2	3	4	SUGGESTED PREFFERED ALTERNATIVES
	jolivette		X				
	nora-be		X				
	norethindrone		X				
	CRINONE GEL			X			
	PROMETRIUM			X			
13.7 CONTRACEPTIVES							
	gildess/fe, lutera, marlissa, heather, introvale, jolessa, jolivette, junel/fe, kariva, kelnor, kurvelo, leena, lessina, levonest, levonor-eth estrad, levora		X				
	low-ogestrel, microgestin/fe, mono-linya, mononessa, myzilra, necon, nora-be, norethindrone, norgestimate-eth estradiol, norg-ethin estr, nortrel, ocella, orsythia		X				
	portia, previfem, quasense, reclipsen, solia, sprintec, sronyx, syeda, tri-estarylla, tri-linyah, trinessa, tri-previfem, tri-sprintec, trivora, velivet, viorele, wera, zarah, zovia		X				
	NUVARING	QLL			X		
	ORTHO EVRA	QLL			X		
	ORTHO TRI-CYCLEN LO	QLL			X		
CHAPTER 14: OPHTHALMIC MEDICATIONS							
14.1.1 OPHTHALMIC TOPICAL ANTIBACTERIAL DRUGS							
	bacitracin		X				
	bacitracin-polymyxin		X				
	ciprofloxacin hcl		X				
	erythromycin		X				
	gentamicin sulfate		X				
	neomycin-bacitracin-polymyxin		X				
	ofloxacin		X				
	polymyxin b sul-trimethoprim		X				
	sulfacetamide sodium		X				
	AZASITE			X			
	BESIVANCE	PA			X		
	MOXEZA	PA			X		
	VIGAMOX			X			
14.1.2 OPHTHALMIC TOPICAL ANTIVIRAL DRUGS							
	trifluridine		X				
14.2 OPHTHALMIC CORTICOSTEROID DRUGS							
	fluorometholone		X				
	prednisolone acetate		X				
	DUREZOL				X		
	LOTEMAX			X			
	VEXOL				X		LOTEMAX
14.3 OPHTHALMIC ANTIINFECTIVE/CORTICOSTEROIDS							
	neomycin-polymyxin-dexameth		X				
	neomycin-polymyxin-hc		X				
	tobramycin-dexamethasone		X				
	ZYLET				X		
14.5 ANTIGLAUCOMA DRUGS							
	acetazolamide		X				
	brimonidine tartrate		X				
	dorzolamide hcl		X				
	dorzolamide-timolol		X				
	latanoprost		X				

DRUG NAME		PA/STEP/QLL	TIER 1	2	3	4	SUGGESTED PREFFERED ALTERNATIVES
	levobunolol hcl		X				
	pilocarpine hcl		X				
	timolol maleate		X				
	ALPHAGAN P			X			
	AZOPT				X		**generics**, Alphagan P
	BETIMOL				X		**betaxolol, timolol**
	BETOPTIC S				X		**betaxolol**
	COMBIGAN				X		generics, Alphagan P
	COSOPT PF				X		
	ISTALOL				X		**timolol maleate**
	LUMIGAN	PA		X			
	TRAVATAN Z	PA			X		LUMIGAN
14.6 OTHER OPHTHALMIC DRUGS							
	atropine sulfate		X				
	azelastine hcl		X				
	cromolyn sodium		X				
	diclofenac sodium		X				
	epinastine hcl		X				
	ACUVAIL			X			
	ALOCRIL	PA			X		**OTC ketotifen**, PATADAY
	ALOMIDE	PA			X		**OTC ketotifen**, PATADAY
	BEPREVE	PA			X		**OTC ketotifen**, PATADAY
	EMADINE	PA			X		**OTC ketotifen**, PATADAY
	LASTACAFT	PA			X		
	PATADAY			X			
	PATANOL			X			
	RESTASIS			X			
CHAPTER 15: RESPIRATORY MEDICATIONS							
15.1.1 BETA-2 ADRENERGIC DRUGS							
	albuterol sulfate		X				
	metaproterenol sulfate		X				
	ARCAPTA NEOHALER				X		
	BROVANA	PA			X		PERFOROMIST
	FORADIL			X			
	MAXAIR AUTOHALER	PA			X		VENTOLIN HFA, PROAIR HFA
	PERFOROMIST			X			
	PROAIR HFA			X			
	SEREVENT DISKUS			X			
	VENTOLIN HFA			X			
	XOPENEX SOLUTION				X		
15.1.2 METHYL XANTHINE DRUGS							
	theophylline		X				
	theophylline anhydrous		X				
15.1.3 OTHER DRUGS FOR ASTHMA							
	budesonide		X				
	cromolyn sodium		X				
	epinephrine		X				
	ipratropium bromide		X				
	ipratropium-albuterol		X				
	ADVAIR DISKUS			X			
	ADVAIR HFA			X			
	ASMANEX				X		QVAR, FLOVENT, PULMICORT FLEXHALER
	ATROVENT HFA			X			

	DRUG NAME	PA/STEP/QLL	TIER 1	TIER 2	TIER 3	TIER 4	SUGGESTED PREFFERED ALTERNATIVES
	AUVI-Q			X			
	COMBIVENT, -RESPIMAT			X			
	DULERA				X		
	EPIPEN, -JR			X			
	FLOVENT HFA, -DISKUS			X			
	PULMICORT FLEXHALER			X			
	QVAR			X			
	SPIRIVA			X			
	SYMBICORT			X			
	TUDORZA PRESSAIR				X		
15.1.4 LEUKOTRIENE MODIFIERS							
	montelukast sodium		X				
	zafirlukast		X				
15.2.1 ANTIHISTAMINES							
	arbinoxa		X				
	cyproheptadine hcl		X				
	desloratadine		X				
	fexofenadine hcl		X				
	levocetirizine dihydrochloride		X				
	promethazine hcl		X				
15.2.3 ANTIHISTAMINE/DECONGESTANT COMBINATIONS							
	promethazine vc		X				
15.3 ANTITUSSIVE AND EXPECTORANT DRUGS							
	benzonatate		X				
	guaifenesin-codeine		X				
	promethazine vc-codeine		X				
	promethazine-codeine		X				
	promethazine-dm		X				
	REZIRA				X		
	ZUTRIPRO				X		
15.4 OTHER RESPIRATORY DRUGS							
	DALIRESP			X			
CHAPTER 16: UROLOGICAL MEDICATIONS							
16.1.1 ANTICHOLINERGIC ANTISPASMODICS							
	oxybutynin chloride, -er		X				
	tolterodine tartrate		X				
	trospium chloride, -er						
	DETROL LA	ST		X			
	ENABLEX	ST			X		**generics**, VESICARE, DETROL LA, TOVIAZ
	TOVIAZ	ST		X			
	VESICARE	ST		X			
16.1.2 CHOLINERGIC STIMULANTS							
	bethanechol chloride		X				
16.1.3 URINARY ANESTHETICS							
	phenazopyridine hcl		X				
16.1.4 OTHER GENITOURINARY PRODUCTS							
	alfuzosin hcl		X				
	finasteride		X				
	potassium citrate		X				
	tamsulosin hcl		X				
	AVODART				X		
	ELMIRON			X			
	FLOMAX				X		**tamsulosin**

DRUG NAME		PA/STEP/QLL	TIER				SUGGESTED PREFFERED ALTERNATIVES
			1	2	3	4	
	JALYN				X		
	RAPAFLO				X		
CHAPTER 18: MEDICAL (MISCELLANEOUS) SUPPLIES							
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	ONE TOUCH			X			

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nifediac cc	4.2
nifedical xl	4.2
nifedipine er	4.2
nisoldipine	4.2
nitrofurantoin	2.1.8
nitrofurantoin mono-macro	2.1.8
nitroglycerin	4.6.1
nitroglycerin patch	4.6.1
NITROSTAT	4.6.1
nora-be	13.7
nora-be	13.5
norethindrone	13.7
norethindrone	13.5
norg-ethin estr	13.7
norgestimate-eth estradiol	13.7
NOROXIN	2.1.9
nortrel	13.7
nortriptyline hcl	5.5.1.2
NORVIR	2.5.1
NOVOLIN	8.1.1
NOVOLOG MIX 70-30/FLEXPEN	8.1.1
NOVOLOG/FLEXPEN	8.1.1
NUCYNTA, -ER	5.1.1.1
NUEDEXTA	5.9.2
NULYTELY WITH FLAVOR PACKS	9.6
NUVARING	13.7
NUVIGIL	5.9.1
nystatin	2.3
nystatin	2.4.2
nystatin-triamcinolone	2.4.3
ocella	13.7
ofloxacin	7.1
ofloxacin	14.1.1
ofloxacin	2.1.9
olanzapine, -odt	5.8
olanzapine-fluoxetine hcl	5.8.1.1
OLUX-E	6.1
OMECLAMOX-PAK	9.4.3
omeprazole	9.4.2
ondansetron hcl	5.6
ondansetron odt	5.6
ONE TOUCH	18.1
ONGLYZA	8.1.5.2
ONMEL	2.3
OPANA ER	5.1.1.1
ORAVIG	2.3
orphenadrine citrate	11.3.2
orsythia	13.7
ORTHO EVRA	13.7
ORTHO TRI-CYCLEN LO	13.7
OSMOPREP	9.5
oxaprozin	11.1.2
oxazepam	5.2.1
oxcarbazepine	5.4.1
OXISTAT	2.4.2
oxybutynin chloride, -er	16.1.1
oxycodone hcl	5.1.1.1
oxycodone-acetaminophen	5.1.1.1
OXYCONTIN	5.1.1.1
oxymorphone hcl	5.1.1.1
PANCREAZE	9.6
pancrelipase 5,000	9.6
pantoprazole sodium	9.4.2
paroxetine hcl	5.5.1.3
PATADAY	14.6
PATANOL	14.6
peg 3350-electrolyte	9.6
penicillin v potassium	2.1.5
PENTASA	9.6
pentoxifylline	4.9
PERFOROMIST	15.1.1
permethrin	6.9.3
perphenazine	5.8
PERTZYE	9.6
phenazopyridine hcl	16.1.3
phenobarbital	5.4.6
PHENYTEK	5.4.3
phenytoin sodium extended	5.4.3
PICATO	6.9.2
pilocarpine hcl	7.3
pilocarpine hcl	14.5
pindolol	4.4

pioglitazone	8.1.3
pioglitazone-metformin	8.1.3
piroxicam	11.1.2
polymyxin b sul-trimethoprim	14.1.1
portia	13.7
potassium chloride	12.2
potassium citrate	16.1.4
POTIGA	5.4.7
PRADAXA	12.3.5
pramipexole dihydrochloride	5.7.2
PRANDIMET	8.1.2
PRANDIN	8.1.2
pravastatin	4.8.2
prazosin hcl	4.5.1
prednisolone	8.3.1
prednisolone acetate	14.2
prednisone	8.3.1
PREFEST	13.4.1
PREMARIN	13.4
PREMPHASE	13.4.1
PREMPRO	13.4.1
PREPOPIK	9.6
previfem	13.7
PREVPAC	9.4.3
PREZISTA	2.5.1
primidone	5.4.6
PRISTIQ ER	5.5.1.4
PROAIR HFA	15.1.1
probenecid	11.2
prochlorperazine maleate	5.6
proctosol-hc	9.6
proctozone-hc	9.6
promethazine hcl	5.6
promethazine hcl	15.2.1
promethazine vc	15.2.3
promethazine vc-codeine	15.3
promethazine-codeine	15.3
promethazine-dm	15.3
promethegan	5.6
PROMETRIUM	13.5
propafenone hcl	4.7.1.3
propranolol hcl	4.4
propylthiouracil	8.4.2
PROTOPIC	6.9.2
PULMICORT FLEXHALER	15.1.3
PYLERA	9.4.3
pyridostigmine bromide	5.9.2
QNASL	7.2
QUALAQUIN	2.7.3
quasense	13.7
quetiapine fumarate	5.8
QUILLIVANT XR	5.9.1
quinapril hcl	4.5.4.1
QVAR	15.1.3
ramipril	4.5.4.1
RANEXA	4.9
RAPAFLO	16.1.4
RAPAMUNE	3
reclipsen	13.7
RECTIV	9.6
RELENZA	2.5.2
RELPAX	5.1.2
RENAGEL	12.7
RENVELA	12.7
reprexain	5.1.1.2
REQUIP XL	5.7.2
RESTASIS	14.6
RETIN-A MICRO/PUMP	6.3
REYATAZ	2.5.1
REZIRA	15.3
ribapak	2.5.2
ribavirin	2.5.2
rifampin	2.7.2
RIOMET	8.1.2
risperidone	5.8
RITALIN LA	5.9.1
rivastigmine	5.9.3
rizatriptan tab	5.1.2
ropinirole hcl	5.7.2
ROXICET	5.1.1.1
ROZEREM	5.2.2
RYTHMOL SR	4.7.1.3
salsalate	11.1.1
SANTYL	6.9.2
SAPHRIS	5.8
SAVELLA	5.5.1.4
selenium sulfide	6.8
SEREVENT DISKUS	15.1.1
SEROQUEL XR	5.8
sertraline hcl	5.5.1.3
silver sulfadiazine	2.2
SIMPONI	3
simvastatin	4.8.2
sodium fluoride	12.1.4
sodium sulfacetamide-sulfur	6.3
SOLARAZE	6.9.2
solia	13.7
SORILUX	6.8
sotalol	4.7.5
SPIRIVA	15.1.3
spironolactone	4.3.3
spironolactone-hctz	4.3.3
sprintec	13.7
sronyx	13.7
STALEVO	5.7.2
STELARA	3
STRATTERA	5.9.6
STRIANT	13.3
SUBOXONE	5.1.1.2
sucralfate	9.4.1
SULAR	4.2
sulfacetamide sodium	6.8
sulfacetamide sodium	14.1.1
sulfamethoxazole-trimethoprim	2.1.6
sulfasalazine	9.6
sulindac	11.1.2
sumatriptan inj	5.1.2
sumatriptan nasal spray	5.1.2
sumatriptan tab	5.1.2
SUPRAX	2.1.1
SUPREP	9.6
SUSTIVA	2.5.1
syeda	13.7
SYMBICORT	15.1.3
SYMBYAX	5.8.1.1
SYMLINPEN PEN	8.1.4
SYMLINPEN VIAL	8.1.4
SYNTHROID	8.4.1
TACLONEX	6.8
tacrolimus	3

TAMIFLU	2.5.2
tamoxifen citrate	3
tamsulosin hcl	16.1.4
TARKA ER	4.5.6
TAZORAC	6.8
TEGRETOL XR	5.4.1
TEKAMLO	4.5.6
TEKTURNA/HCT	4.5.6
temazepam	5.2.2
terazosin hcl	4.5.1
terbinafine hcl	2.3
terconazole	2.4.1
testosterone cypionate	13.3
tetracycline hcl	2.1.7
TEVETEN HCT	4.5.4.2
theophylline	15.1.2
theophylline anhydrous	15.1.2
thioridazine hcl	5.8
thiothixene	5.8
TIKOSYN	4.7.5
timolol maleate	4.4
timolol maleate	14.5
tinidazole	2.7.5
tizanidine hcl	11.3.1
TOBI	2.8.2
tobramycin sulfate	2.8.2
tobramycin-dexamethasone	14.3
tolterodine tartrate	16.1.1
topiramate	5.4.7
torsemide	4.3.1
TOVIAZ	16.1.1
TRADJENTA	8.1.5.2
tramadol hcl/er	5.1.1
tramadol hcl-acetaminophen	5.1.1
trandolapril	4.5.4.1
TRANSDERM-SCOP	5.6
tranylcypromine sulfate	5.5.2
TRAVATAN Z	14.5
trazodone hcl	5.5.1.4
tretinoin	3
tretinoin	6.3
tretinoin	6.9.2
triamcinolone acetonide	6.1
triamcinolone acetonide	7.3
triamterene-hctz	4.3.3
triamterene-hydrochlorothiazid	4.3.3
triazolam	5.2.2
TRIBENZOR	4.5.6
tri-estarylla	13.7
trifluoperazine hcl	5.8
trifluridine	14.1.2
trihexyphenidyl hcl	5.7.1
tri-linyah	13.7
trilyte with flavor packets	9.6
trimethoprim	2.1.8
trinessa	13.7
tri-previfem	13.7
tri-sprintec	13.7
trivora	13.7
trospium chloride, -er	16.1.1
TRUVADA	2.5.1
TUDORZA PRESSAIR	15.1.3
ULESFIA	6.9.3
ULORIC	11.2
ULTRAVATE PAC	6.1
ULTRESA	9.6
ursodiol	9.6
VAGIFEM	13.4
valacyclovir	2.5.2
valproic acid	5.4.4
valsartan hctz	4.5.4.2
VANCOCIN PULVULE	2.8
vancomycin hcl	2.8
vandazole	13.1.3
VECTICAL	6.8
velivet	13.7
venlafaxine hcl, -er	5.5.1.4
VENTOLIN HFA	15.1.1
VERAMYST	7.2
verapamil/er pm	4.2
VEREGEN	6.9.2
veripred 20 solution	8.3.1
VESICARE	16.1.1
VEXOL	14.2
VICTOZA	8.1.5.1
VICTRELIS	2.5.1
VIGAMOX	14.1.1
VIIBRYD	5.5.1.3
VIMPAT	5.4.7
viorele	13.7
VIRAMUNE	2.5.1
VIRAMUNE XR	2.5.1
VIREAD	2.5.1
vitamin d	12.1.3
VIVELLE-DOT	13.4
VOLTAREN	6.9.5
voriconazole	2.3
VYVANSE	5.9.1
warfarin sodium	12.3.1
WELCHOL	4.8.1
wera	13.7
XARELTO	12.3.3
XERESE	2.6
XIFAXAN	2.8
XOPENEX SOLUTION	15.1.1
zafirlukast	15.1.4
zaleplon	5.2.2
zamicet	5.1.1.2
zarah	13.7
ZENPEP	9.6
ZETIA	4.8.1
ZETONNA	7.2
ZIAGEN	2.5.1
ziprasidone hcl	5.8
zolmitriptan -zmt tab	5.1.2
zolpidem tartrate, -er	5.2.2
ZOMIG NASAL SPRAY	5.1.2
zonisamide	5.4.7
zovia	13.7
ZOVIRAX	2.6
ZUTRIPRO	15.3
ZYCLARA	6.9.2
ZYLET	14.3
ZYVOX	2.8

Pharmacy Network

Participating Chain Provider Listing

SD, ND, IA, MN, Individual & Self-Funded

SANFORD HEALTH PLAN

- A & P
- ACME
- ALBERTSON'S
- AURORA
- B & B
- BAKERS
- BARTELL DRUG
- BEL AIR
- BI-LO
- BI-MART
- BIOSCRIP
- BLOOM
- BROOKSHIRE
- BROOKSHIRE BROTHERS
- BUSCH'S
- CARRS
- CITY MARKET
- COBORNS
- COPPS FOOD CENTER
- COSTCO
- CUB
- CURASCRIPT
- CVS
- D & W
- DIERBERGS
- DILLON
- DISCOUNT DRUG MART
- DOC'S DRUGS
- DOMINICK'S
- DRUG WAREHOUSE
- DRUG WORLD
- DRUGS FOR LESS
- ECKERD DRUGS
- FAIRVIEW
- FAMILY FARE
- FARM FRESH
- FOOD CITY
- FOOD LION
- FOOD MAXX
- FOOD WORLD
- FRED MEYER
- FRED'S
- FRUTH
- FRY'S FOOD AND DRUG
- GERBES
- GIANT EAGLE
- GIANT PHARMACY
- GLEN'S
- HAGGEN FOOD & DRUG
- HANNAFORD
- HARPS
- HARRIS TEETER
- HARVEYS SUPERMARKET
- H-E-B
- HEN HOUSE
- HIGHPOINT
- HOMELAND
- HY-VEE
- INGLES
- KASH N' KARRY
- KERR DRUG
- KING SOOPERS
- KINNEY DRUGS
- KLINGENSMITH'S
- KMART
- KNIGHT DRUGS
- KOPP DRUG
- KROGER
- LONGS DRUG
- MARC'S
- MARSH DRUG STORE
- MARTIN'S
- MED-FAST
- MED-X DRUG
- MEIJER
- NAVARRO DISCOUNT
- NEIGHBORCARE
- NOB HILL
- OMNICARE
- OSCO
- P & C
- PAMIDA
- PATHMARK
- PATIENT FIRST
- PAVILIONS
- PAYLESS
- PHARMACARE
- PHARMACY EXPRESS
- PHARMERICA
- PICK N SAVE
- PINE KNOB
- PRICE CHOPPER
- PUBLIX
- QUICK CHEK
- RAINBOW FOODS
- RALEY'S
- RALPH'S
- RANDALLS
- RECEPT PHARMACY
- REDNER'S
- RITE AID
- SAFEWAY
- SAM'S CLUB
- SAVE MART
- SAVERITE
- SAV-MOR
- SAV-ON
- SCHNUCKS
- SHAW'S
- SHOP 'N SAVE
- SHOPKO
- SHOPPERS
- SHOPRITE
- SMITH'S FOOD AND DRUG
- SNYDER DRUG
- SOUTHERN FAMILY MARKET
- STAR DRUG
- STOP & SHOP
- SUPER 1
- SUPER D DRUGS
- SUPER FERSH
- SWEETBAY SUPERMARKET
- TARGET
- THRIFTY WHITE
- TOM THUMB
- TOP FOOD & DRUG
- TOPS
- UKROP'S
- UNITED
- USA DRUG
- VALLEY DRUG
- VG'S PHARMACY
- VONS
- WALDBAUM'S
- WAL-MART
- WEGMANS
- WEIS
- WHITE DRUG
- WINN-DIXIE

Pharmacy Network

By Pharmacy

SD, ND, IA, MN, Individual & Self-Funded

SANFORD HEALTH PLAN

Iowa Providers

Participating Pharmacies

NUCARA PHARMACY
722 MAIN ST
ACKLEY, IA 50601
(641)366-3440

FAY PHARMACY
400 AUDUBON ST
ADAIR, IA 50002
(641)742-3440

ADEL HEALTHMART
113 N 9TH ST
ADEL, IA 50003
(515)993-3644

SUMPTER PHARMACY
628 NILE KINNICK DR S STE A
ADEL, IA 50003
(515)993-1119

THORSON DRUG
233 REED ST
AKRON, IA 51001
(712)568-2013

HY-VEE PHARMACY
301 HIGHWAY 34 W
ALBIA, IA 52531
(641)932-2188

HY-VEE PHARMACY
1500 HIGHWAY 169 N
ALGONA, IA 50511
(515)295-9238

KMART PHARMACY
1501 HIGHWAY 169 N
ALGONA, IA 50511
(515)295-7704

KRHC FAMILY PHARMACY
1519 S PHILLIPS ST
ALGONA, IA 50511
(515)295-4567

ALLISON PHARMACY
305 N MAIN ST
ALLISON, IA 50602
(319)267-2505

HY-VEE PHARMACY
108 8TH ST SW
ALTOONA, IA 50009
(515)967-3765

MEDICAP PHARMACY
950 28TH AVE SW
ALTOONA, IA 50009
(515)957-0001

STERLING
120 8TH ST SE
ALTOONA, IA 50009
(515)967-4213

TARGET PHARMACY
3414 8TH ST SW
ALTOONA, IA 50009
(515)967-1885

WAL-MART
3501 8TH ST SW
ALTOONA, IA 50009
(515)967-1794

AMANA SOCIETY PHARMACY
507 39TH AVE
AMANA, IA 52203
(319)622-3341

DAHL'S PHARMACY
3121 GRAND AVE
AMES, IA 50010
(515)817-2879

DRUG TOWN CLINIC PHARMACY
1215 DUFF AVE
AMES, IA 50010
(515)232-7315

HY-VEE PHARMACY
3800 W LINCOLN WAY
AMES, IA 50010
(515)292-8375

HY-VEE PHARMACY
500 MAIN ST STE A
AMES, IA 50010
(515)233-9858

HY-VEE PHARMACY
640 LINCOLN WAY
AMES, IA 50010
(515)233-5645

KMART PHARMACY
1405 BUCKEYE AVE
AMES, IA 50010
(515)232-8414

MEDICAP PHARMACY
105 LINCOLN WAY
AMES, IA 50010
(515)232-1653

NUCARA PHARMACY
2709 NORTHRIDGE PKWY
AMES, IA 50010
(641)366-3440

TARGET PHARMACY
320 DUFF AVE
AMES, IA 50010
(515)663-9645

THIELEN STUDENT HLTH CNTR PHMY
2260 THIELEN STUDENT HEALTH
AMES, IA 50011
(515)294-5618

WAL-MART
3015 GRAND AVE
AMES, IA 50010
(515)233-1736

WAL-MART
534 S DUFF AVE
AMES, IA 50010
(515)956-3547

PHARMACY CARE CENTRE
1791 HIGHWAY 64 E
ANAMOSA, IA 52205
(319)462-3306

WAL-MART
101 115TH ST
ANAMOSA, IA 52205
(319)462-4314

ANITA CLINIC PHARMACY
710 MAIN ST
ANITA, IA 50020
(712)762-3945

CVS
104 E 1ST ST
ANKENY, IA 50021
(515)963-7889

DAHL'S PHARMACY
1802 N ANKENY BLVD
ANKENY, IA 50023
(515)278-1657

HY-VEE PHARMACY
410 N ANKENY BLVD
ANKENY, IA 50021
(515)964-9464

HY-VEE PHARMACY
849 S ANKENY BLVD
ANKENY, IA 50021
(515)964-0656

MEDICAP PHARMACY
107 NE DELAWARE AVE STE 6
ANKENY, IA 50021
(515)964-8550

MERCY NORTH PHARMACY
800 E 1ST STE 1800
ANKENY, IA 50021
(515)643-7590

TARGET PHARMACY
2135 SE DELAWARE AVE
ANKENY, IA 50021
(515)964-7000

WAL-MART
1002 SE NATIONAL DR
ANKENY, IA 50021
(515)964-3992

MILLS PHARMACY
120 E MAIN ST
ANTHON, IA 51004
(712)373-5256

ATLANTIC MEDICAL CENTER PHCY
1501 E 10TH ST
ATLANTIC, IA 50022
(712)243-3367

HY-VEE PHARMACY
1630 E 7TH ST
ATLANTIC, IA 50022
(712)243-2240

REX PHARMACY
507 CHESTNUT ST
ATLANTIC, IA 50022
(712)243-2110

WAL-MART
1905 E 7TH ST
ATLANTIC, IA 50022
(712)243-9223

MEDICAP PHARMACY
316 BROADWAY ST
AUDUBON, IA 50025
(712)563-2655

SHOPKO PHARMACY
109 N MARKET ST
AUDUBON, IA 50025
(712)563-3302

CARLEY DRUG
102 N ELM ST
AVOCA, IA 51521
(712)343-6777

BELLE PLAINE PHARMACY
810 12TH ST
BELLE PLAINE, IA 52208
(319)221-1050

CORNERSTONE APOTHECARY
731 12TH ST
BELLE PLAINE, IA 52208
(319)444-2290

BELLEVUE HEALTH MART PHARMACY
115 STATE ST
BELLEVUE, IA 52031
(563)872-4259

AMICARE PHARMACY
3740 UTICA RIDGE RD
BETTENDORF, IA 52722
(563)344-7450

CVS
2002 SPRUCE HILLS DR
BETTENDORF, IA 52722
(563)359-0374

HY-VEE PHARMACY
2900 DEVILS GLEN RD
BETTENDORF, IA 52722
(563)332-2983

MAIN HEALTHCARE PHARMACY
2151 KIMBERLY RD
BETTENDORF, IA 52722
(563)324-5004

SCHNUCKS
858 MIDDLE RD
BETTENDORF, IA 52722
(563)355-7838

HY-VEE PHARMACY
301 W JEFFERSON ST
BLOOMFIELD, IA 52537
(641)664-2975

SHOPKO PHARMACY
106 SMITH ST
BLOOMFIELD, IA 52537
(641)664-2349

CLINIC PHARMACY
1115 S MARSHALL ST
BOONE, IA 50036
(515)432-7123

HY-VEE PHARMACY
1111 8TH ST
BOONE, IA 50036
(515)432-1304

MEDICAL ASSOCIATES PHARMACY
120 S STORY ST
BOONE, IA 50036
(515)432-3460

MEDICAP PHARMACY
403 STORY ST
BOONE, IA 50036
(515)432-2311

WAL-MART
1815 S STORY ST
BOONE, IA 50036
(515)432-3484

ELIZABETH'S PHARMACY ON MAIN
52 MAIN AVE N
BRITT, IA 50423
(641)843-3885

BROOKLYN PHARMACY
101 E FRONT ST
BROOKLYN, IA 52211
(641)522-7813

HY-VEE PHARMACY
939 ANGULAR ST
BURLINGTON, IA 52601
(319)753-0112

HY-VEE PHARMACY
3140 AGENCY ST
BURLINGTON, IA 52601
(319)752-2773

SHOPKO PHARMACY
313 N ROOSEVELT AVE
BURLINGTON, IA 52601
(319)758-9526

MEDICAP PHARMACY
800 SCHOOL ST
CARLISLE, IA 50047
(515)989-3261

CARROLL HEALTH MART APOTHECARY
425 W HIGHWAY 30 ST STE 140
CARROLL, IA 51401
(712)792-2671

CLINIC PHARMACY OF CARROLL
405 S CLARK ST STE 102
CARROLL, IA 51401
(712)792-5393

CUSTOM CARE CMPDING PHCY
425 W US HIGHWAY 30 STE 140
CARROLL, IA 51401
(712)792-2671

HY-VEE PHARMACY
905 W US HIGHWAY 30
CARROLL, IA 51401
(712)792-9093

KMART PHARMACY
715 W US HIGHWAY 30
CARROLL, IA 51401
(712)792-5835

LINCOLN HIGHWAY PHARMACY
859 E US HIGHWAY 30
CARROLL, IA 51401
(712)792-2402

Iowa Providers

Participating Pharmacies

NUCARA PHARMACY
1214 S GRANT RD
CARROLL, IA 51401
(641)366-3440

WAL-MART
2014 KITTTYHAWK RD
CARROLL, IA 51401
(712)792-3033

MERCY FAMILY PHARMACY
805 JOHNSON ST SW
CASCADE, IA 52033
(563)852-7757

CVS
2302 W 1ST ST
CEDAR FALLS, IA 50613
(319)277-5181

HY-VEE PHARMACY
6301 UNIVERSITY AVE
CEDAR FALLS, IA 50613
(319)266-9874

MEDICAP PHARMACY
103 E 18TH ST
CEDAR FALLS, IA 50613
(319)277-1829

TARGET PHARMACY
214 VIKING PLAZA DR
CEDAR FALLS, IA 50613
(319)553-1121

UNIV OF NORTHERN IOWA PHARMACY
101 STUDENT HEALTH CTR
CEDAR FALLS, IA 50614
(319)273-2154

WAL-MART
525 BRANDILYNN BLVD
CEDAR FALLS, IA 50613
(319)277-7793

A AVENUE PHARMACY
717 A AVE NE STE 202
CEDAR RAPIDS, IA 52401
(319)364-1586

APPLE PHARMACY
9255 ATLANTIC DR SW
CEDAR RAPIDS, IA 52404
(319)396-1386

CAREPLUS CVS
5070 ROCKWELL DR NE
CEDAR RAPIDS, IA 52402
(319)377-5497

CAREPRO AT THE PAVILION
202 10TH ST SE STE 115
CEDAR RAPIDS, IA 52403
(319)364-2406

CLARK'S PHARMACY
1946 42ND ST NE
CEDAR RAPIDS, IA 52402
(319)393-3210

CVS
4116 CENTER POINT RD NE
CEDAR RAPIDS, IA 52402
(319)393-7480

CVS
3419 6TH AVE SW
CEDAR RAPIDS, IA 52404
(319)396-3262

CVS
2711 MOUNT VERNON RD SE
CEDAR RAPIDS, IA 52403
(319)364-3051

DOWNTOWN DRUG
207 2ND AVE SE
CEDAR RAPIDS, IA 52401
(319)221-1050

HALL PERRINE CANCER CTR PHCY
701 10TH ST SE
CEDAR RAPIDS, IA 52403
(319)398-6343

HY-VEE PHARMACY
1520 6TH ST SW
CEDAR RAPIDS, IA 52404
(319)363-0219

HY-VEE PHARMACY
505 BOYSON RD NE
CEDAR RAPIDS, IA 52402
(319)294-8095

HY-VEE PHARMACY
2405 MOUNT VERNON AVE SE
CEDAR RAPIDS, IA 52402
(319)365-7579

HY-VEE PHARMACY
3235 OAKLAND RD NE
CEDAR RAPIDS, IA 52402
(319)363-3587

HY-VEE PHARMACY
20 WILSON AVE SW
CEDAR RAPIDS, IA 52404
(319)362-3649

HY-VEE PHARMACY
5050 EDGEWOOD RD
CEDAR RAPIDS, IA 52411
(319)294-9193

HY-VEE PHARMACY
1843 JOHNSON AVE NW
CEDAR RAPIDS, IA 52405
(319)365-5343

HY-VEE PHARMACY
279 COLLINS RD NE
CEDAR RAPIDS, IA 52402
(319)393-4480

HY-VEE PHARMACY
4035 MT VERNON RD SE
CEDAR RAPIDS, IA 52403
(319)362-7900

HY-VEE PHARMACY
4825 JOHNSON AVE NW
CEDAR RAPIDS, IA 52405
(319)396-7419

HY-VEE PHARMACY
2001 BLAIRS FERRY RD NE
CEDAR RAPIDS, IA 52402
(319)393-0561

HY-VEE PHARMACY
1556 1ST AVE NE
CEDAR RAPIDS, IA 52402
(319)366-2239

KMART PHARMACY
180 COLLINS RD NE
CEDAR RAPIDS, IA 52402
(319)377-3338

MEDICAL PHARMACY
1030 5TH AVE SE STE 1800
CEDAR RAPIDS, IA 52403
(319)362-8976

MEDICAP PHARMACY
2030 6TH ST SW
CEDAR RAPIDS, IA 52404
(319)364-6930

MERCY MEDICAL CENTER
701 10TH ST SE
CEDAR RAPIDS, IA 52403
(319)398-6063

PHARMACY CARE ASSOCIATES
5801 16TH AVE SW
CEDAR RAPIDS, IA 52404
(319)390-6348

PHYSICIANS CLINIC OF IOWA PC
202 10TH ST SE
CEDAR RAPIDS, IA 52403
(319)297-2900

PLAZA FAMILY PHARMACY
5264 COUNCIL ST NE
CEDAR RAPIDS, IA 52402
(319)221-8861

REUTZEL PHARMACY
617 8TH AVE SE
CEDAR RAPIDS, IA 52403
(319)364-4181

SAM'S CLUB
2605 BLAIRS FERRY RD NE
CEDAR RAPIDS, IA 52402
(319)294-9461

TARGET PHARMACY
3400 EDGEWOOD RD SW
CEDAR RAPIDS, IA 52404
(319)396-4777

TARGET PHARMACY
1030 BLAIRS FERRY RD NE
CEDAR RAPIDS, IA 52402
(319)393-4348

THE GHOSH CENTER
1951 51ST ST NE
CEDAR RAPIDS, IA 52402
(319)294-1899

UNITY POINT HEALTH
1026 A AVE NE
CEDAR RAPIDS, IA 52402
(319)369-7528

WAL-MART
2645 BLAIRS FERRY RD NE
CEDAR RAPIDS, IA 52402
(319)393-2110

WAL-MART
3601 29TH AVE SW
CEDAR RAPIDS, IA 52404
(319)390-9925

CENTER POINT FAM PHARMACY
900 BANK CT
CENTER POINT, IA 52213
(319)849-2799

HY-VEE PHARMACY
609 N 18TH ST
CENTERVILLE, IA 52544
(641)856-3832

OWL PHARMACY
213 N 13TH ST
CENTERVILLE, IA 52544
(641)437-7200

WAL-MART
23145 HIGHWAY 5
CENTERVILLE, IA 52544
(641)437-7185

CENTRAL CITY FAMILY PHARMACY
402 MAIN ST
CENTRAL CITY, IA 52214
(319)438-1988

HY-VEE PHARMACY
2001 COURT AVE
CHARITON, IA 50049
(641)774-2111

SHOPKO PHARMACY
1901 COURT AVE
CHARITON, IA 50049
(641)774-5505

HY-VEE PHARMACY
901 KELLY ST
CHARLES CITY, IA 50616
(641)228-1222

KMART PHARMACY
1405 S GRAND AVE
CHARLES CITY, IA 50616
(641)228-7940

CHEROKEE MAIN STREET PHARMACY
206 W MAIN ST
CHEROKEE, IA 51012
(712)225-2320

HY-VEE
800 N 2ND ST
CHEROKEE, IA 51012
(712)225-6121

HY-VEE PHARMACY
1200 S 16TH ST
CLARINDA, IA 51632
(712)542-6546

TAYLOR PHARMACY
122 N 16TH ST # 124
CLARINDA, IA 51632
(712)542-3522

COMMUNITY PHARMACY
215 13TH AVE SW
CLARION, IA 50525
(515)532-2801

THRIFTY WHITE PHARMACY
210 N MAIN ST
CLARION, IA 50525
(515)532-6626

CLARKSVILLE PHARMACY
111 S MAIN ST
CLARKSVILLE, IA 50619
(319)278-4476

CLEAR LAKE LTC PHARMACY
560 US HIGHWAY 18 E STE B
CLEAR LAKE, IA 50428
(641)357-1522

CLEAR LAKE PHARMACY
560 US HIGHWAY 18 E
CLEAR LAKE, IA 50428
(641)357-1522

ECONOFOODS PHARMACY
20 S 4TH ST
CLEAR LAKE, IA 50428
(641)357-2169

THRIFTY WHITE DRUG
2 N 4TH ST
CLEAR LAKE, IA 50428
(641)357-5271

HY-VEE PHARMACY
901 S 4TH ST
CLINTON, IA 52733
(563)243-6063

MERCY HOSPITAL PHARMACY
1410 N 4TH ST
CLINTON, IA 52732
(563)244-5545

OSCO DRUG
1309 N 2ND ST
CLINTON, IA 52732
(563)243-6641

WAGNER CLINIC PHARMACY
915 13TH AVE N
CLINTON, IA 52732
(563)242-5944

WAGNER PHARMACY
200 5TH AVE S
CLINTON, IA 52732
(563)242-0626

WAGNER PHARMACY AND WELLNESS
1726 N 2ND ST
CLINTON, IA 52732
(563)519-2000

WAL-MART
2715 S 25TH ST
CLINTON, IA 52732
(563)243-0600

WRIGHTWAY LTC PHARMACY
200 5TH AVE S
CLINTON, IA 52732
(563)242-9376

DAHLS PHARMACY
15500 HICKMAN RD
CLIVE, IA 50325
(515)987-0377

DAHL'S PHARMACY
8700 HICKMAN RD
CLIVE, IA 50325
(515)276-8784

KMART PHARMACY
10331 UNIVERSITY AVE
CLIVE, IA 50325
(515)225-2694

MERCY WEST PHARMACY
1601 NW 114TH ST STE 234
CLIVE, IA 50325
(515)222-7979

WEIRICK PHARMACY
101 N WALNUT ST
COLFAX, IA 50054
(515)674-3503

HY-VEE DRUGSTORE CLINIC
111 E WALNUT ST
COLUMBUS JUNCTION, IA 52738
(319)728-3144

NUCARA PHARMACY
110 CENTER ST
CONRAD, IA 50621
(641)366-3440

COON RAPIDS PHARMACY
515 MAIN ST
COON RAPIDS, IA 50058
(712)999-7979

Iowa Providers

Participating Pharmacies

COSTCO
2900 HEARTLAND DR
CORALVILLE, IA 52241
(319)545-3201

HY-VEE PHARMACY
HWY 6 W 2000 8TH ST
CORALVILLE, IA 52241
(319)351-3880

IOWA RIVER LANDING PHARMACY
105 E 9TH ST STE A
CORALVILLE, IA 52241
(319)467-2050

NUCARA PHARMACY
1150 5TH ST STE 142
CORALVILLE, IA 52241
(641)366-3440

TARGET PHARMACY
1441 CORAL RIDGE AVE
CORALVILLE, IA 52241
(319)248-1080

WAL-MART
2801 COMMERCE DR
CORALVILLE, IA 52241
(319)545-6412

HY-VEE PHARMACY
625 DAVIS AVE
CORNING, IA 50841
(641)322-3454

NESSEN PHARMACY
104 S FRANKLIN ST
CORYDON, IA 50060
(641)872-2512

ALL CARE HEALTH CENTER PHCY
902 S 6TH ST
COUNCIL BLUFFS, IA 51501
(712)256-6583

CVS
545 W WASHINGTON ST
COUNCIL BLUFFS, IA 51503
(712)352-4152

HY-VEE PHARMACY
2323 W BROADWAY
COUNCIL BLUFFS, IA 51501
(712)322-3111

HY-VEE PHARMACY
757 W BROADWAY
COUNCIL BLUFFS, IA 51501
(712)328-3277

HY-VEE PHARMACY
1745 MADISON AVE
COUNCIL BLUFFS, IA 51501
(712)322-9222

KMART PHARMACY
2803 E KANESVILLE BLVD
COUNCIL BLUFFS, IA 51503
(712)325-0987

MEDICAP PHARMACY
2201 W BROADWAY STE 8
COUNCIL BLUFFS, IA 51501
(712)325-8676

OARD AND ROSS DRUG
701 16TH AVE
COUNCIL BLUFFS, IA 51501
(712)322-2501

SAM'S CLUB
3221 MANAWA CENTRE DR
COUNCIL BLUFFS, IA 51501
(712)366-7032

SHOPKO PHARMACY
3271 MARKETPLACE DR
COUNCIL BLUFFS, IA 51501
(712)366-0377

SUPER SAVER PHARMACY
1141 N BROADWAY
COUNCIL BLUFFS, IA 51503
(712)322-9019

TARGET PHARMACY
3804 METRO DR
COUNCIL BLUFFS, IA 51501
(712)309-3381

UNION PHARMACY
235 W BROADWAY
COUNCIL BLUFFS, IA 51503
(712)328-3344

WAL-MART
3200 MANAWA CENTRE DR
COUNCIL BLUFFS, IA 51501
(712)366-1315

HOINES PHARMACIES
113 N ELM ST
CRESCO, IA 52136
(563)547-3401

MEDICAP PHARMACY
303 2ND AVE SW
CRESCO, IA 52136
(563)547-5111

HY-VEE PHARMACY
600 SHELDON ST
CRESTON, IA 50801
(641)782-8417

MEDICAP PHARMACY
405 S SUMNER AVE
CRESTON, IA 50801
(641)782-6558

WAL-MART
806 LAUREL ST
CRESTON, IA 50801
(641)782-6951

MEDICAP PHARMACY
504 14TH ST
DALLAS CENTER, IA 50063
(515)992-3784

CVS
1655 W KIMBERLY RD
DAVENPORT, IA 52806
(563)388-7856

CVS
1777 DIVISION ST
DAVENPORT, IA 52804
(563)323-1074

FIRST MED PHARMACY
1227 E RUSHOLME ST
DAVENPORT, IA 52803
(563)421-6366

FIRST MED PHARMACY
1803 E KIMBERLY RD STE A
DAVENPORT, IA 52807
(563)421-3308

HY-VEE PHARMACY
1823 E KIMBERLY RD
DAVENPORT, IA 52807
(563)359-5313

HY-VEE PHARMACY
3019 ROCKINGHAM RD
DAVENPORT, IA 52802
(563)322-7573

HY-VEE PHARMACY
2351 W LOCUST ST
DAVENPORT, IA 52804
(563)324-3900

HY-VEE PHARMACY
2200 W KIMBERLY RD
DAVENPORT, IA 52806
(563)391-1543

HY-VEE PHARMACY
4064 E 53RD ST
DAVENPORT, IA 52807
(563)359-3120

IOWA CANCER SPECIALISTS
1351 W CENTRAL PARK AVE
DAVENPORT, IA 52804
(563)421-1960

KMART PHARMACY
3808 BRADY ST
DAVENPORT, IA 52806
(563)391-8587

MAIN AT LOCUST PHARMACY
129 W LOCUST ST
DAVENPORT, IA 52803
(563)324-1641

OMNICARE PHARMACY
2660 E 53RD ST STE 1
DAVENPORT, IA 52807
(563)388-1887

SAM'S CLUB
3887 ELMORE AVE
DAVENPORT, IA 52807
(563)344-4232

TARGET PHARMACY
5255 ELMORE AVE
DAVENPORT, IA 52807
(563)344-9629

WAL-MART
5811 ELMORE AVE
DAVENPORT, IA 52807
(563)359-4874

WAL-MART
3101 W KIMBERLY RD
DAVENPORT, IA 52806
(563)445-1098

FAMILY PHARMACY
21 S MAIN ST
DAYTON, IA 50530
(515)547-2384

HY-VEE PHARMACY
204 N 3RD ST
DECATUR, IA 50144
(641)446-4136

DONLON PHARMACY
201 W WATER ST
DECORAH, IA 52101
(563)382-3929

THRIFTY WHITE PHARMACY
702 MONTGOMERY ST
DECORAH, IA 52101
(563)382-8765

WAL-MART
1798 OLD STAGE RD
DECORAH, IA 52101
(563)382-8456

HY-VEE PHARMACY
1426 BROADWAY
DENISON, IA 51442
(712)263-6161

THRIFTY WHITE DRUG
1320 BROADWAY
DENISON, IA 51442
(712)263-4646

WAL-MART
510 AVENUE C
DENISON, IA 51442
(712)263-2012

DENVER DRUG
340 S STATE ST
DENVER, IA 50622
(319)984-5691

BAUDER PHARMACY
3802 INGERSOLL AVE
DES MOINES, IA 50312
(515)255-1124

BROADLAWS MEDICAL CTR OP PHCY
1801 HICKMAN RD
DES MOINES, IA 50314
(515)282-6149

CARECENTER PHARMACY
711 HIGH ST BLDG 1 3RD FL
DES MOINES, IA 50309
(515)244-8100

CASSADY PHARMACY
4505 SW 9TH ST
DES MOINES, IA 50315
(515)285-2474

CVS
215 EUCLID AVE
DES MOINES, IA 50313
(512)282-8454

CVS
3151 SE 14TH ST
DES MOINES, IA 50320
(515)288-1316

DAHL'S PHARMACY
4121 FLEUR DR
DES MOINES, IA 50321
(515)278-1657

DAHL'S PHARMACY
3425 INGERSOLL AVE
DES MOINES, IA 50312
(515)255-8642

DAHL'S PHARMACY
3400 E 33RD ST
DES MOINES, IA 50317
(515)262-7942

DAHL'S PHARMACY
4343 MERLE HAY RD
DES MOINES, IA 50310
(515)276-4845

DAHL'S PHARMACY
1819 BEAVER AVE
DES MOINES, IA 50310
(515)278-1657

DAHL'S PHARMACY
1320 E EUCLID AVE
DES MOINES, IA 50316
(515)278-1657

FIFIELD PHARMACY
501 UNIVERSITY AVE
DES MOINES, IA 50314
(515)244-3221

HAMMER PHARMACY
600 E GRAND AVE
DES MOINES, IA 50309
(515)243-4177

HY-VEE PHARMACY
3330 MARTIN LUTHER KING PKWY
DES MOINES, IA 50310
(515)255-6213

HY-VEE PHARMACY
4100 UNIVERSITY AVE
DES MOINES, IA 50311
(515)633-8606

HY-VEE PHARMACY
1107 SE ARMY POST RD
DES MOINES, IA 50315
(515)287-1022

HY-VEE PHARMACY
2540 E ECULID AVE
DES MOINES, IA 50317
(515)262-2108

HY-VEE PHARMACY
3221 SE 14TH ST
DES MOINES, IA 50320
(515)246-1390

HY-VEE PHARMACY
4605 FLEUR DR
DES MOINES, IA 50321
(515)285-7133

KMART PHARMACY
2535 HUBBELL AVE
DES MOINES, IA 50317
(515)262-9578

MEDICAP PHARMACY
2527 EASTON BLVD
DES MOINES, IA 50317
(515)266-2694

MEDICAP PHARMACY
5802 FRANKLIN AVE
DES MOINES, IA 50322
(515)274-4609

MEDICAP PHARMACY
2804 BEAVER AVE
DES MOINES, IA 50310
(515)277-3702

MEDICAP PHARMACY
1300 E 14TH ST
DES MOINES, IA 50316
(515)263-1782

MERCY OUTPATIENT PHARMACY
1111 6TH AVE
DES MOINES, IA 50314
(515)643-4429

MERCY SPECIALTY CARE PHCY
1750 48TH ST STE 4
DES MOINES, IA 50310
(515)271-6466

METHODIST PLAZA PHARMACY
1212 PLEASANT ST STE 105
DES MOINES, IA 50309
(515)244-8855

PLANNED PARENTHOOD HEARTLAND
1171 7TH ST
DES MOINES, IA 50314
(515)280-7000

RELIANT LTC
3520 GRAND AVE
DES MOINES, IA 50312
(515)279-2062

Iowa Providers

Participating Pharmacies

RICHARDS PHARMACY
5625 HICKMAN RD
DES MOINES, IA 50310
(515)274-4001

SAM'S CLUB
1101 73RD ST
DES MOINES, IA 50324
(515)274-9676

TARGET PHARMACY
5901 DOUGLAS AVE
DES MOINES, IA 50322
(515)331-0599

WAL-MART
1001 73RD ST
DES MOINES, IA 50324
(515)274-6359

WAL-MART
5101 SE 14TH ST
DES MOINES, IA 50320
(515)287-7748

WARD EAST SIDE PHARMACY
2501 E WALNUT ST
DES MOINES, IA 50317
(515)262-5615

SCOTT DRUG CLINIC PHARMACY
1021 11TH ST
DEWITT, IA 52742
(563)659-5042

SCOTT DRUG UNIT DOSE PHARMACY
609 7TH ST
DEWITT, IA 52742
(563)659-5041

SCOTT'S THRIFTY WHITE DRUG
629 6TH AVE
DEWITT, IA 52742
(563)659-5042

HARTIG DRUG
2255 JOHN F KENNEDY RD
DUBUQUE, IA 52002
(563)588-8703

HARTIG DRUG
157 LOCUST ST
DUBUQUE, IA 52001
(563)588-8702

HARTIG DRUG
2225 CENTRAL AVE
DUBUQUE, IA 52001
(563)588-8704

HARTIG DRUG
1600 UNIVERSITY AVE
DUBUQUE, IA 52001
(563)588-8708

HY-VEE PHARMACY
400 S LOCUST ST
DUBUQUE, IA 52003
(563)582-1143

HY-VEE PHARMACY
2395 NW ARTERIAL
DUBUQUE, IA 52002
(563)582-3436

HY-VEE PHARMACY
3500 DODGE ST
DUBUQUE, IA 52003
(563)583-3858

KMART PHARMACY
2600 DODGE ST
DUBUQUE, IA 52003
(563)588-9097

MERCY FAMILY PHARMACY
1920 ELM ST
DUBUQUE, IA 52001
(563)583-7379

MERCY FAMILY PHARMACY
1500 ASSOCIATES DR
DUBUQUE, IA 52002
(563)584-4405

MERCY FAMILY PHARMACY
250 MERCY DR
DUBUQUE, IA 52001
(563)589-9370

MERCY FAMILY PHARMACY
1000 LANGWORTHY ST
DUBUQUE, IA 52001
(563)584-3405

SAM'S CLUB
4400 ASBURY RD
DUBUQUE, IA 52002
(563)587-0586

SHOPKO PHARMACY
255 JOHN F KENNEDY RD
DUBUQUE, IA 52002
(563)583-5808

TARGET PHARMACY
3500 DODGE ST
DUBUQUE, IA 52003
(563)557-9800

UNION FAMILY PHARMACY
2541 CENTRAL AVE
DUBUQUE, IA 52001
(563)556-1493

WAL-MART
4200 DODGE ST
DUBUQUE, IA 52003
(563)582-1519

DUNLAP FAMILY PHARMACY
612 IOWA AVE
DUNLAP, IA 51529
(712)643-5162

WESTFAIR DRUG
621 5TH ST
DURANT, IA 52747
(563)785-4930

HARTIG DRUG
711 16TH AVE SE
DYERSVILLE, IA 52040
(563)875-2722

MERCY FAMILY PHARMACY
1111 3RD ST SW
DYERSVILLE, IA 52040
(563)875-2947

THE PRESCRIPTION SHOPPE
212 4TH ST SE
DYERSVILLE, IA 52040
(563)875-7455

EAGLE PHARMACY
311 W BROADWAY ST
EAGLE GROVE, IA 50533
(515)448-3814

MONTROSS PHARMACY
105 S CHESTNUT AVE
EARLHAM, IA 50072
(515)758-2174

PEXTON PHARMACY OF EARLING
100 INDUSTRIAL DR STE 102
EARLING, IA 51530
(712)755-2101

ELDORA VALU-RITE PHARMACY
1274 EDGINGTON AVE
ELDORA, IA 50627
(641)939-3091

MEDICAP PHARMACY
1602 EDGINGTON AVE
ELDORA, IA 50627
(641)858-3567

NORTH SCOTT PHARMACY
225 E LE CLAIRE RD
ELDRIDGE, IA 52748
(563)285-2001

ELK HORN PHARMACY
4022 MAIN ST
ELK HORN, IA 51531
(712)764-2334

MOSER FAMILY PHARMACY
135 N MAIN ST
ELKADER, IA 52043
(563)245-2530

HUGHES PHARMACY
2216 MAIN ST
EMMETSBURG, IA 50536
(712)852-2886

MANSMITH PHARMACY
3204 1ST ST
EMMETSBURG, IA 50536
(712)852-2727

ESTHERVILLE DRUG
522 CENTRAL AVE
ESTHERVILLE, IA 51334
(712)362-3154

HY-VEE PHARMACY
1221 CENTRAL AVE
ESTHERVILLE, IA 51334
(712)362-5551

EVANSDALE PHARMACY
3506 LAFAYETTE RD
EVANSDALE, IA 50707
(319)233-3395

HY-VEE PHARMACY
1300 W BURLINGTON AVE
FAIRFIELD, IA 52556
(641)472-3542

NUCARA PHARMACY
2000D S MAIN ST
FAIRFIELD, IA 52556
(641)469-3001

WAL-MART
2107 W BURLINGTON AVE
FAIRFIELD, IA 52556
(641)472-6199

SCOTT PHARMACY
238 S MAIN ST
FAYETTE, IA 52142
(563)425-4530

FONTANELLE DRUG
401 WASHINGTON ST
FONTANELLE, IA 50846
(641)745-3221

MILLER PHARMACY
635 E US HIGHWAY 9
FOREST CITY, IA 50436
(641)585-3931

SHOPKO PHARMACY
619 E US HIGHWAY 9
FOREST CITY, IA 50436
(641)582-2780

CVS
2029 5TH AVE N
FORT DODGE, IA 50501
(515)955-6453

DANIEL PHARMACY
1114 CENTRAL AVE
FORT DODGE, IA 50501
(515)573-3431

DISCO DRUG
1428 2ND AVE N
FORT DODGE, IA 50501
(515)955-5430

FRIENDSHIP HAVEN PHARMACY
420 KENYON RD
FORT DODGE, IA 50501
(515)573-6015

HY-VEE PHARMACY
115 S 29TH ST
FORT DODGE, IA 50501
(515)576-5320

HY-VEE PHARMACY
214 S 25TH ST
FORT DODGE, IA 50501
(515)576-3652

TARGET PHARMACY
2910 1ST AVE S
FORT DODGE, IA 50501
(515)573-7202

TRINITY REGIONAL MEDICAL CTR
802 KENYON RD
FORT DODGE, IA 50501
(952)653-2568

WAL-MART
3036 1ST AVE S
FORT DODGE, IA 50501
(515)576-7405

HY-VEE PHARMACY
2606 AVENUE L
FORT MADISON, IA 52627
(319)372-9396

RASHID LTC PHARMACY
2402 AVENUE L
FORT MADISON, IA 52627
(319)372-2300

RASHID PHARMACY
2404 AVENUE L
FORT MADISON, IA 52627
(319)372-2300

SHOPKO PHARMACY
4810 AVENUE O
FORT MADISON, IA 52627
(319)372-8629

TAMMY'S PHARMACY
930 W US HIGHWAY 18
GARNER, IA 50438
(641)923-2649

HY-VEE PHARMACY
409 S LOCUST ST
GLEENWOOD, IA 51534
(712)527-4006

MEDICAP PHARMACY
1206 S LOCUST ST
GLENWOOD, IA 51534
(712)527-1200

RUFFNER PHARMACY
409 S LOCUST ST
GLENWOOD, IA 51534
(712)527-4006

SHOPKO PHARMACY
902 S LOCUST ST
GLENWOOD, IA 51534
(712)527-9200

COMMUNITY PHARMACY
1800 MAIN ST
GOWRIE, IA 50543
(515)352-3876

GREENE PHARMACY
106 E TRAER ST
GREENE, IA 50636
(641)823-4210

SHOPKO PHARMACY
202 SW KENT ST
GREENFIELD, IA 50849
(641)743-2201

DRUG TOWN CLINIC PHARMACY
1541 S 3RD ST STE 100
GRIMES, IA 50111
(515)986-4527

MEDICAP PHARMACY
250 SE GATEWAY DR
GRIMES, IA 50111
(515)986-0101

WAL-MART
2150 E 1ST ST
GRIMES, IA 50111
(515)986-3657

HY-VEE PHARMACY
320 WEST ST S
GRINNELL, IA 50112
(641)236-4287

MEDICAP PHARMACY
320 6TH AVE
GRINNELL, IA 50112
(641)236-3663

WAL-MART
415 INDUSTRIAL AVE
GRINNELL, IA 50112
(641)236-6333

ENGLAND MEDICAL CLINIC
506 MAIN ST
GRISWOLD, IA 51535
(712)778-2395

MANLY DRUG STORE
621 G AVE
GRUNDY CENTER, IA 50638
(319)824-5446

DOWD DRUG
307 STATE ST
GUTHRIE CENTER, IA 50115
(641)747-8317

GUTTENBERG HEALTH MART PHCY
807 S HIGHWAY 52
GUTTENBERG, IA 52052
(563)252-1172

STONER DRUG
1105 MAIN ST
HAMBURG, IA 51640
(712)382-2551

KOERNER WHIPPLE PHARMACY
104 1ST ST NW
HAMPTON, IA 50441
(641)456-2510

Iowa Providers

Participating Pharmacies

MEDICAL CENTER PHARMACY
1720 CENTRAL AVE E
HAMPTON, IA 50441
(641)456-4146

RICK'S PHARMACY
6 1ST ST NW
HAMPTON, IA 50441
(641)456-3538

HY-VEE PHARMACY
2003 CHATBURN AVE
HARLAN, IA 51537
(712)755-2525

KWIK-RX PHARMACY
2308 12TH ST
HARLAN, IA 51537
(712)755-3823

PEXTON PHARMACY
1812 CHATBURN PLZ
HARLAN, IA 51537
(712)755-2101

SHOPKO PHARMACY
2099 CHATBURN AVE
HARLAN, IA 51537
(712)755-1112

HARTLEY HOMETOWN PHARMACY
177 S CENTRAL AVE
HARTLEY, IA 51346
(712)928-7070

MED-EQUIP PHARMACY
141 S CENTRAL AVE
HARTLEY, IA 51346
(712)728-2165

BOOTH PHARMACY
903 CENTRAL AVE
HAWARDEN, IA 51023
(712)551-2374

BLAIRS FERRY FAMILY PHARMACY
1790 BLAIRS FERRY RD
HIAWATHA, IA 52233
(319)393-4944

MAIN STREET PHARMACY
103 N MAIN ST
HOLSTEIN, IA 51025
(712)368-4549

HUDSON PHARMACY
101 EDDYSTONE DR
HUDSON, IA 50643
(319)988-3800

HULL PHARMACY
1044 MAIN ST
HULL, IA 51239
(712)439-1611

HY-VEE PHARMACY
611 10TH AVE N
HUMBOLDT, IA 50548
(515)332-5082

LARRY'S PHARMACY
1310 10TH AVE N
HUMBOLDT, IA 50548
(515)332-1627

HY-VEE PHARMACY
303 S US HIGHWAY 69
HUXLEY, IA 50124
(515)597-4100

IDA DRUG
506 2ND ST
IDA GROVE, IA 51445
(712)364-0000

IDA GROVE PHARMACY
506 2ND ST
IDA GROVE, IA 51445
(712)364-2756

LEWIS FAMILY DRUG
703 W HIGHWAY 175
IDA GROVE, IA 51445
(712)364-2120

HARTIG DRUG
200 1ST ST E
INDEPENDENCE, IA 50644
(319)334-7155

RYAN PHARMACY
1100 1ST ST E
INDEPENDENCE, IA 50644
(319)334-7171

WAL-MART
302 ENTERPRISE DR
INDEPENDENCE, IA 50644
(319)334-7131

HY-VEE PHARMACY
910 N JEFFERSON WAY
INDIANOLA, IA 50125
(515)962-9444

MEDICAP PHARMACY
208 E EUCLID AVE
INDIANOLA, IA 50125
(515)961-5303

MEDICAP PHARMACY
404 E EUCLID AVE
INDIANOLA, IA 50125
(515)962-9399

WAL-MART
1500 N JEFFERSON WAY
INDIANOLA, IA 50125
(515)961-8960

AMBULATORY CARE PHARMACY
200 HAWKINS DR
IOWA CITY, IA 52242
(319)384-9637

CVS
201 S CLINTON ST
IOWA CITY, IA 52240
(319)358-6462

CVS
2425 MUSCATINE AVE
IOWA CITY, IA 52240
(319)358-1056

HARTIG DRUG
701 MORMON TREK BLVD
IOWA CITY, IA 52246
(319)338-5778

HY-VEE PHARMACY
310 N 1ST AVE
IOWA CITY, IA 52240
(319)351-2921

HY-VEE PHARMACY
812 S 1ST AVE
IOWA CITY, IA 52245
(319)337-4279

HY-VEE PHARMACY
1720 WATERFRONT DR
IOWA CITY, IA 52240
(319)354-7121

HY-VEE PHARMACY
1201 N DODGE ST
IOWA CITY, IA 52245
(319)337-6310

IA CITY AMBULATORY SURGERY CTR
2963 NORTHGATE DR
IOWA CITY, IA 52245
(952)653-2568

KMART PHARMACY
901 HOLLYWOOD BLVD
IOWA CITY, IA 52240
(319)351-1768

MEDICAL PLAZA PHARMACY
540 E JEFFERSON ST STE 104
IOWA CITY, IA 52245
(319)337-3966

PHARMACY MATTERS LTC
3526 DOLPHIN DR SE
IOWA CITY, IA 52240
(319)337-8649

TOWNCREST PHARMACY
2306 MUSCATINE AVE
IOWA CITY, IA 52240
(319)337-3526

WAL-MART
1001 HIGHWAY 1 W
IOWA CITY, IA 52246
(319)337-8862

WESTLAWN PHARMACY
4189 WESTLAWN S
IOWA CITY, IA 52242
(319)335-9200

CORNER PHARMACY
504 ROCKSYLVANIA AVE
IOWA FALLS, IA 50126
(641)648-5550

HY-VEE PHARMACY
632 S OAK ST
IOWA FALLS, IA 50126
(641)648-4255

MEDICAP PHARMACY
516 S OAK ST
IOWA FALLS, IA 50126
(641)648-4263

RIEBER CLINIC PHARMACY
520 TALBOTT ST STE 2
IOWA FALLS, IA 50126
(641)648-3733

WAL-MART
840 S OAK ST
IOWA FALLS, IA 50126
(641)648-5109

HY-VEE PHARMACY
100 N WILSON AVE
JEFFERSON, IA 50129
(515)386-4152

MEDICAP PHARMACY
400 N ELM ST
JEFFERSON, IA 50129
(515)386-2164

JESUP PHARMACY
1094 220TH ST
JESUP, IA 50648
(319)827-6889

FAMILY PHARMACY
633 MAIN ST
JEWELL, IA 50130
(515)827-5134

DAHL'S PHARMACY
5440 NW 86TH ST
JOHNSTON, IA 50131
(515)278-1657

HY VEE PHARMACY
5750 MERLE HAY RD
JOHNSTON, IA 50131
(515)270-9212

SUN DRUG-VILLAGE SQUARE
6105 MERLE HAY RD
JOHNSTON, IA 50131
(515)278-5503

MILLERS MEDICINE CABINET
214 5TH ST
KALONA, IA 52247
(319)656-3134

HY-VEE PHARMACY
3111 MAIN ST
KEOKUK, IA 52632
(319)524-9535

KAME PHARMACY
420 N 17TH ST
KEOKUK, IA 52632
(319)524-8144

KEASLING'S PHARMACY
1414 MAIN ST
KEOKUK, IA 52632
(319)524-5435

WAL-MART
300 N PARK DR
KEOKUK, IA 52632
(319)524-4071

LEE PHARMACY
601 1ST ST
KEOSAUQUA, IA 52565
(319)293-3128

HY-VEE PHARMACY
809 W ROCK ISLAND ST
KNOXVILLE, IA 50138
(641)842-2512

KNOXVILLE AREA COMM HOSPITAL
1002 S LINCOLN ST
KNOXVILLE, IA 50138
(641)842-2151

MEDICAP PHARMACY
901 W PLEASANT ST
KNOXVILLE, IA 50138
(641)828-7312

WAL-MART
814 W BELL AVE
KNOXVILLE, IA 50138
(641)828-6183

COMMUNITY PHARMACY
1321 W MAIN ST
LAKE CITY, IA 51449
(712)464-7281

HARRIS DRUG
121 E MAIN ST
LAKE CITY, IA 51449
(712)464-3165

WOODLAWN PHARMACY
101 N WOODLAWN AVE
LAKE CITY, IA 51449
(712)464-8811

REDINGER PHARMACY
219 W MAIN ST
LAKE MILLS, IA 50450
(641)592-0141

COMMUNITY PHARMACY
1160 3RD ST
LAKE VIEW, IA 51450
(712)665-8554

HY-VEE PHARMACY
101 E MAIN ST
LAMONI, IA 50140
(641)784-6322

VARSITY DRUG
101 E MAIN ST
LAMONI, IA 50140
(641)784-6322

LAPORTE CITY PHARMACY
601 HIGHWAY 218 N
LAPORTE, IA 50651
(319)342-3620

HY-VEE RESSLERS PHCY
113 N 3RD ST
LAURENS, IA 50554
(712)841-4374

HY-VEE PHARMACY
1201 12TH AVE SW
LE MARS, IA 51031
(712)548-4503

L AND M PHARMACY CARE
22 1ST ST NE STE A
LE MARS, IA 51031
(712)546-8005

LE MARS FAMILY PHARMACY
44 1ST AVE NE
LE MARS, IA 51031
(712)546-4560

WAL-MART
1111 HOLTON DR
LE MARS, IA 51031
(712)546-5150

NUCARA PHARMACY
107 N MAIN ST
LENOX, IA 50851
(641)366-3440

DECATUR FAMILY PHARMACY
204 N MAIN ST
LEON, IA 50144
(641)446-4136

EBY DRUG STORE LOGAN
103 N 4TH AVE
LOGAN, IA 51546
(712)644-2160

MEDICAP PHARMACY
411 ANNEX RD
MADRID, IA 50156
(515)795-4252

KOHLL'S PHARMACY AND HOMECARE
410 MAIN ST
MALVERN, IA 51551
(712)624-9050

BLAKESLEY DRUG
220 E MAIN ST
MANCHESTER, IA 52057
(563)927-3509

WAL-MART
1220 W MAIN ST
MANCHESTER, IA 52057
(563)927-4988

WIDNER HEALTH MART DRUG
111 S FRANKLIN ST
MANCHESTER, IA 52057
(563)927-4463

Iowa Providers

Participating Pharmacies

MANNING PHARMACY
317 MAIN STREET
MANNING, IA 51455
(712)655-9490

MEDICAP PHARMACY
1224 10TH AVE
MANSON, IA 50563
(712)469-2214

MAIER FAMILY PHARMACY
411 MAIN ST
MAPLETON, IA 51034
(712)881-1033

OSTERHAUS PHARMACY
918 W PLATT ST STE 2
MAQUOKETA, IA 52060
(563)652-5611

WAL-MART
103 E CARLISLE
MAQUOKETA, IA 52060
(563)652-6733

HY-VEE PHARMACY
321 N MAIN ST
MARCUS, IA 51035
(712)376-2844

CORNERSTONE APOTHECARY
1099 COURT AVE
MARENGO, IA 52301
(319)741-6300

PETERSON PHARMACY
104 E WASHINGTON ST
MARENGO, IA 52301
(319)642-3312

CVS
3495 7TH AVE
MARION, IA 52302
(319)373-0430

HY-VEE PHARMACY
3600 BUSINESS HWY 151
MARION, IA 52302
(319)377-7216

HY-VEE PHARMACY
2790 7TH AVE
MARION, IA 52302
(319)377-0959

MARION FAMILY PHARMACY
3701 KATZ DR
MARION, IA 52302
(319)377-8709

WAL-MART
5491 HIGHWAY 151
MARION, IA 52302
(319)447-2870

HY-VEE PHARMACY
802 S CENTER ST
MARSHALLTOWN, IA 50158
(641)752-2266

HY-VEE PHARMACY
1706 S CENTER ST
MARSHALLTOWN, IA 50158
(641)752-4685

KMART PHARMACY
1720 S CENTER ST
MARSHALLTOWN, IA 50158
(641)753-0957

MEDICAP PHARMACY
11 N 3RD AVE
MARSHALLTOWN, IA 50158
(641)752-7139

NUCARA PHARMACY
303 NICHOLAS DR
MARSHALLTOWN, IA 50158
(641)366-3440

NUCARA PHARMACY
312 E MAIN ST
MARSHALLTOWN, IA 50158
(641)366-3440

WAL-MART
2802 S CENTER ST
MARSHALLTOWN, IA 50158
(641)753-3204

DAWN D THEILEN ARNP
100 1ST ST NW STE 200
MASON CITY, IA 50401
(641)423-5044

FOREST PARK PHARMACY
1010 4TH ST SW STE 110
MASON CITY, IA 50401
(641)428-6100

HY-VEE PHARMACY
2400 4TH ST SW
MASON CITY, IA 50401
(641)424-1343

HY-VEE PHARMACY
875 SW 4TH ST
MASON CITY, IA 50401
(641)424-5522

HY-VEE PHARMACY
551 S ILLINOIS AVE
MASON CITY, IA 50401
(641)424-7014

KMART PHARMACY
2006 4TH ST SW
MASON CITY, IA 50401
(641)423-5178

REGENCY PHARMACY
621 S ILLINOIS AVE STE 101
MASON CITY, IA 50401
(641)428-6940

SHOPKO PHARMACY
615 S MONROE AVE
MASON CITY, IA 50401
(641)424-4302

TARGET PHARMACY
3450 4TH ST SW
MASON CITY, IA 50401
(641)423-1325

WAL-MART
4151 4TH ST SW
MASON CITY, IA 50401
(641)423-3494

WESTSIDE PHARMACY
910 N EISENHOWER AVE
MASON CITY, IA 50401
(641)428-5630

MCGREGOR PHARMACY
230 MAIN ST
MCGREGOR, IA 52157
(563)873-3781

CARRUTHERS PHARMACY
526 MAIN ST
MEDIAPOLIS, IA 52637
(319)394-3420

HY-VEE PHARMACY
1012 OKOBOJI AVE
MIFORD, IA 51351
(712)338-4865

LEHAN PHARMACY
317 MAIN ST
MINDEN, IA 51553
(712)483-2884

SHOPKO PHARMACY
413 W HURON ST
MISSOURI VALLEY, IA 51555
(712)642-2716

VALLEY DRUG
318 E ERIE ST
MISSOURI VALLEY, IA 51555
(712)642-2747

MONONA PHARMACY
118 W CENTER ST
MONONA, IA 52159
(563)539-2348

REMEDY DRUG
323 E MAIN ST
MONTEZUMA, IA 50171
(641)623-5710

LONG DRUG
419 E 1ST ST
MONTICELLO, IA 52310
(319)221-1050

THE PRESCRIPTION SHOPPE
304 E 1ST ST
MONTICELLO, IA 52310
(319)465-4404

SHOPKO PHARMACY
201 N FILLMORE ST
MOUNT AYR, IA 50854
(641)464-4527

HY-VEE CLINIC PHARMACY
501 S WHITE ST
MOUNT PLEASANT, IA 52641
(319)385-6745

HY-VEE PHARMACY
1700 E WASHINGTON ST
MOUNT PLEASANT, IA 52641
(319)986-6979

HY-VEE PHARMACY
129 S JEFFERSON ST
MOUNT PLEASANT, IA 52641
(319)385-3163

WAL-MART
1045 N GRAND AVE
MOUNT PLEASANT, IA 52641
(319)385-8600

SHEPLEY PHARMACY
113 1ST ST NE
MOUNT VERNON, IA 52314
(319)895-6248

MOVILLE PHARMACY
216 MAIN ST
MOVILLE, IA 51039
(712)873-3401

HY-VEE PHARMACY
2400 2ND AVE
MUSCATINE, IA 52761
(563)264-5810

HY-VEE PHARMACY
510 E 6TH ST
MUSCATINE, IA 52761
(563)263-1852

WAL-MART
3003 N HIGHWAY 61
MUSCATINE, IA 52761
(563)262-3755

WESTER DRUG
315 2ND ST E
MUSCATINE, IA 52761
(563)263-2044

NASHUA PHARMACY
310 MAIN ST
NASHUA, IA 50658
(641)435-4188

NUCARA PHARMACY
1002 6TH ST
NEVADA, IA 50201
(641)366-3440

PARKVIEW HEALTH MART PHARMACY
1727 S B AVE
NEVADA, IA 50201
(515)382-2134

STORY COUNTY HOSPITAL PHARMACY
640 S 19TH ST
NEVADA, IA 50201
(515)382-7745

BENNETT PHARMACY
1 W MAIN ST
NEW HAMPTON, IA 50659
(641)394-4156

SHOPKO PHARMACY
660 W MILWAUKEE ST
NEW HAMPTON, IA 50659
(641)394-6404

TOMS FAMILY PHARMACY
15 E MAIN ST
NEW HAMPTON, IA 50659
(641)394-4132

HY-VEE PHARMACY
1501 1ST AVE E
NEWTON, IA 50208
(641)792-6100

MEDICAP PHARMACY
400 1ST AVE W
NEWTON, IA 50208
(641)792-3528

MEDICINE SHOPPE PHARMACY
212 1ST ST N
NEWTON, IA 50208
(641)792-3111

WAL-MART
300 IOWA SPEEDWAY DR
NEWTON, IA 50208
(641)792-9237

LIBERTY PHARMACY
555 W CHERRY ST
NORTH LIBERTY, IA 52317
(319)626-6188

MAIN HEALTHCARE PHARMACY
655 LIBERTY WAY STE 3-4
NORTH LIBERTY, IA 52317
(563)324-5004

PHARMACY MATTERS
1765 LININGER LN
NORTH LIBERTY, IA 52317
(319)626-6020

VER HELST DRUG CENTER
98 10TH ST N
NORTHWOOD, IA 50459
(641)324-2116

MEDICAP PHARMACY
2521 SUNSET DR
NORWALK, IA 50211
(515)285-2026

OAKLAND PHARMACY
601 PIONEER AVE
OAKLAND, IA 51560
(712)482-3015

DON'S PHARMACY
32 S FREDERICK AVE
OELWEIN, IA 50662
(319)283-5254

SCHUCHMANN'S PHARMACY
12 S FREDERICK AVE
OELWEIN, IA 50662
(319)283-2161

SHOPKO PHARMACY
1345 S FREDERICK AVE
OELWEIN, IA 50662
(319)283-2028

SWANSON DRUG
305 W WALNUT ST
OGDEN, IA 50212
(515)275-2362

SHOPKO PHARMACY
2220 HIGHWAY 175
ONAWA, IA 51040
(712)423-9648

STANGEL HEALTH MART PHARMACY
821 IOWA AVE
ONAWA, IA 51040
(712)423-1131

DUTCH MILL CLINIC PHARMACY
1000 LINCOLN CIR SE
ORANGE CITY, IA 51041
(712)737-5347

DUTCH MILL PHARMACY
104 ALBANY AVE NE
ORANGE CITY, IA 51041
(712)737-4844

HOMETOWN PHARMACY
512 8TH ST SE
ORANGE CITY, IA 51041
(712)737-4919

SMART PHARMACY
616 N 8TH ST
OSAGE, IA 50461
(641)732-5806

HY-VEE PHARMACY
1012 JEFFREYS DR
OSCEOLA, IA 50213
(641)342-1568

MEDICAP PHARMACY
214 S MAIN ST
OSCEOLA, IA 50213
(641)342-6557

WAL-MART
2400 COLLEGE DR
OSCEOLA, IA 50213
(641)342-1662

HY-VEE PHARMACY
110 S D ST
OSKALOOSA, IA 52577
(641)673-0259

MAHASKA DRUG
205 N E ST
OSKALOOSA, IA 52577
(641)673-3439

MEDICAP PHARMACY
504 A AVE W
OSKALOOSA, IA 52577
(641)673-8486

Iowa Providers

Participating Pharmacies

WAL-MART
2203 AVENUE A W
OSKALOOSA, IA 52577
(641)673-6811

HY-VEE PHARMACY
2453 N COURT
OTTUMWA, IA 52501
(641)684-1853

HY-VEE PHARMACY
1140 N JEFFERSON ST
OTTUMWA, IA 52501
(641)684-5467

HY-VEE PHARMACY
1025 N QUINCY AVE
OTTUMWA, IA 52501
(641)683-4483

KMART PHARMACY
1131 N QUINCY AVE
OTTUMWA, IA 52501
(641)683-3814

NUCARA PHARMACY
107 W MAIN ST
OTTUMWA, IA 52501
(641)366-3440

SOUTH SIDE DRUG
337 CHURCH ST
OTTUMWA, IA 52501
(641)682-3467

WAL-MART
1940 VENTURE DR
OTTUMWA, IA 52501
(641)683-1357

MEDICAP PHARMACY
615 E MAIN ST
PANORA, IA 50216
(641)755-2312

PARKERSBURG PHARMACY
226 3RD ST
PARKERSBURG, IA 50665
(319)346-1970

THRIFTY WHITE PHARMACY
127 N MAIN ST
PAULLINA, IA 51046
(712)957-8495

CROWN PHARMACY
802 WASHINGTON ST
PELLA, IA 50219
(641)628-1612

HY-VEE PHARMACY
118 SE 9TH ST
PELLA, IA 50219
(641)628-1280

PELLA REGIONAL HEALTH CENTER
404 JEFFERSON ST
PELLA, IA 50219
(641)628-3150

WAL-MART
1650 WASHINGTON ST
PELLA, IA 50219
(641)628-9227

HY-VEE PHARMACY
1215 141ST ST
PERRY, IA 50220
(515)465-3543

MEDICAP PHARMACY
601 1ST AVE
PERRY, IA 50220
(515)465-3391

SHOPKO PHARMACY
1305 141ST ST
PERRY, IA 50220
(515)465-5484

HY-VEE PHARMACY
4815 MAPLE DR
PLEASANT HILL, IA 50327
(515)265-6144

NUCARA PHARMACY
4927 MAPLE DR
PLEASANT HILL, IA 50327
(614)366-3440

PLEASANTVILLE CLINIC
104 N WASHINGTON ST
PLEASANTVILLE, IA 50225
(515)848-3113

POCAHONTAS PHARMACY
701 W ELM AVE
POCAHONTAS, IA 50574
(712)335-3119

POLK CITY PHARMACY
419 W BRIDGE RD
POLK CITY, IA 50226
(515)984-6554

ANDERSON PHARMACY
61 W GILLET ST
PRESTON, IA 52069
(563)689-3301

HY-VEE PHARMACY
1605 N BROADWAY ST
RED OAK, IA 51566
(712)623-3370

MEDICAP PHARMACY
600 SENATE AVE
RED OAK, IA 51566
(712)623-1900

RED OAK PHARMACY
1400 SENATE AVE STE 104
RED OAK, IA 51566
(712)623-7245

REINBECK PHARMACY
401 MAIN ST
REINBECK, IA 50669
(319)788-7445

REMSEN PHARMACY
111 S WASHINGTON ST
REMSEN, IA 51050
(712)786-2093

THE RICEVILLE PHARMACY
120 W MAIN ST
RICEVILLE, IA 50466
(641)985-4114

UI HLTH CARE RIVER XING PHCY
3056 RIVER CROSS CT STE A
RIVERSIDE, IA 52327
(319)467-8380

CORNER REXALL DRUGS
220 1ST AVE
ROCK RAPIDS, IA 51246
(712)472-3143

LEWIS FAMILY DRUG
402 S 2ND AVE
ROCK RAPIDS, IA 51246
(712)472-4220

LEWIS FAMILY DRUG
106 N BOONE ST
ROCK RAPIDS, IA 51246
(712)472-4044

LEWIS FAMILY DRUG
1319 10TH ST
ROCK VALLEY, IA 51247
(712)476-5405

COMMUNITY PHARMACY
507 E LAKE ST
ROCKWELL CITY, IA 50579
(712)297-7337

SAC CITY DRUG
514 MAIN ST
SAC CITY, IA 50583
(712)662-7146

BROWER PHARMACY
140 W 4TH ST
SAINT ANSGAR, IA 50472
(641)713-4381

MONTROSS PHARMACY
134 W MAIN ST
SAINT CHARLES, IA 50240
(641)396-2445

SERGEANT BLUFF PHARMACY
110 GAUL DR STE A
SERGEANT BLUFF, IA 51054
(712)943-1494

SHEFFIELD PHARMACY
115 GILMAN ST
SHEFFIELD, IA 50475
(641)892-4640

HY-VEE PHARMACY
1989 PARK ST
SHELDON, IA 51201
(712)324-0020

LEWIS FAMILY DRUG
610 PARK ST
SHELDON, IA 51201
(712)324-4331

SHOPKO PHARMACY
1501 PARK ST
SHELDON, IA 51201
(712)324-3552

GEORGE JAY DRUG COMPANY
612 W SHERIDAN AVE
SHENANDOAH, IA 51601
(712)246-2635

HY-VEE PHARMACY
500 S FREMONT ST
SHENANDOAH, IA 51601
(712)246-3440

WAL-MART
705 S FREMONT ST
SHENANDOAH, IA 51601
(712)246-4033

LEWIS FAMILY DRUG
420 2ND AVE
SIBLEY, IA 51249
(712)754-3859

REMEDIES PHARMACY
345 9TH ST
SIBLEY, IA 51249
(712)754-3551

PENN DRUG
714 ILLINOIS ST
SIDNEY, IA 51652
(712)374-2513

JACK'S CORNER DRUG
118 S MAIN ST STE B
SIGOURNEY, IA 52591
(641)622-3184

HY-VEE PHARMACY
1951 S MAIN AVE
SIOUX CENTER, IA 51250
(712)722-3516

LEWIS FAMILY DRUG
143 S MAIN AVE
SIOUX CENTER, IA 51250
(712)722-2704

WAL-MART
255 16TH ST SW
SIOUX CENTER, IA 51250
(712)722-2326

DRILLING MORNINGSIDE PHARMACY
4010 MORNINGSIDE AVE
SIOUX CITY, IA 51106
(712)276-4621

GREENVILLE PHARMACY
2705 CORRECTIONVILLE RD
SIOUX CITY, IA 51105
(712)258-0113

HY-VEE PHARMACY
2627 PIERCE ST
SIOUX CITY, IA 51104
(712)258-0117

HY-VEE PHARMACY
4500 SERGEANT RD
SIOUX CITY, IA 51106
(712)274-2949

HY-VEE PHARMACY
2827 HAMILTON BLVD
SIOUX CITY, IA 51104
(712)277-8734

HY-VEE PHARMACY
3301 GORDON DR
SIOUX CITY, IA 51105
(712)234-1949

KMART PHARMACY
5700 GORDON DR
SIOUX CITY, IA 51106
(712)276-1461

LEEDS PHARMACY
2729 OUTER DR N
SIOUX CITY, IA 51104
(712)239-2051

MERCY CARE PHARMACY
801 5TH ST
SIOUX CITY, IA 51101
(712)279-5880

SHOPKO PHARMACY
3025 HAMILTON BLVD
SIOUX CITY, IA 51104
(712)255-8055

SIOUXLAND COMM HLTH CTR PHCY
1021 NEBRASKA ST
SIOUX CITY, IA 51105
(712)255-4204

TARGET PHARMACY
5775 SUNNYBROOK DR
SIOUX CITY, IA 51106
(712)274-8854

THOMPSON DEAN DRUG
911 W 7TH ST
SIOUX CITY, IA 51103
(712)252-2761

WAL-MART
3400 SINGING HILLS BLVD
SIOUX CITY, IA 51106
(712)252-4905

WAL-MART
3101 FLOYD BLVD
SIOUX CITY, IA 51108
(712)239-8913

SOLON TOWNCREST PHARMACY
101 WINDFLOWER LN STE 100
SOLON, IA 52333
(319)624-2239

HY-VEE PHARMACY
819 GRAND AVE
SPENCER, IA 51301
(712)262-5611

THRIFTY WHITE DRUG
400 GRAND AVE
SPENCER, IA 51301
(712)262-1523

WAL-MART
500 11TH ST SW
SPENCER, IA 51301
(712)262-5011

HY-VEE PHARMACY
1500 18TH ST
SPIRIT LAKE, IA 51360
(712)336-4551

LEWIS FAMILY DRUG
2308 17TH ST
SPIRIT LAKE, IA 51360
(712)336-4731

WAL-MART
2200 17TH ST
SPIRIT LAKE, IA 51360
(712)336-1756

HY-VEE BEDELS PHARMACY
409 W 5TH ST
STORM LAKE, IA 50588
(712)732-4819

HY-VEE PHARMACY
1250 N LAKE AVE
STORM LAKE, IA 50588
(712)732-1364

WAL-MART
1831 LAKE AVE
STORM LAKE, IA 50588
(712)732-7960

NUCARA PHARMACY
621 BROAD ST
STORY CITY, IA 50248
(641)366-3440

FAMILY PHARMACY
803 SHAKESPEARE ST
STRATFORD, IA 50249
(515)838-2322

CLAYTON DRUG
104 W MISSION ST
STRAWBERRY POINT, IA 52076
(563)933-4762

WRIGHT PHARMACY
303 SW 7TH ST STE A
STUART, IA 50250
(515)523-1525

CLAYTON DRUG
100 E 1ST ST
SUMNER, IA 50674
(563)578-5068

STONER DRUG
712 MAIN ST
TABOR, IA 51653
(712)629-2945

Iowa Providers

Participating Pharmacies

TIPTON PHARMACY
124 E 5TH ST
TIPTON, IA 52772
(563)886-2158

WAL-MART
1128 HIGHWAY 38
TIPTON, IA 52772
(563)886-2117

MEDICAP PHARMACY
108 2ND AVE W
TOLEDO, IA 52342
(641)484-6198

SHOPKO PHARMACY
1006 S COUNTY RD
TOLEDO, IA 52342
(641)484-8801

NUCARA PHARMACY
500 2ND ST
TRAER, IA 50675
(641)366-3440

CRITICAL CARE SYSTEMS
11382 AURORA AVE
URBANDALE, IA 50322
(515)276-1660

HY-VEE PHARMACY
8701 DOUGLAS AVE
URBANDALE, IA 50322
(515)270-2225

KMART PHARMACY
7501 HICKMAN RD
URBANDALE, IA 50322
(515)270-2623

MEDICAP PHARMACY
7641 DOUGLAS AVE
URBANDALE, IA 50322
(515)276-3471

MERCY HOME INFUSION
2853 99TH ST
URBANDALE, IA 50322
(515)271-6456

NCS HEALTHCARE
4131 109TH ST
URBANDALE, IA 50322
(515)727-8090

PHARMERICA
2901 99TH ST
URBANDALE, IA 50322
(515)331-7756

TARGET PHARMACY
11148 PLUM DR
URBANDALE, IA 50322
(515)270-6884

CORNERSTONE APOTHECARY
122 MAIN ST
VAN HORNE, IA 52346
(319)228-8100

VICTOR DRUG
205 WASHINGTON ST
VICTOR, IA 52347
(319)653-1043

HONEYMAN DRUG
408 S 3RD AVE
VILLISCA, IA 50864
(712)826-4112

CLINGMAN HEALTH MART PHARMACY
106 E 4TH ST
VINTON, IA 52349
(319)472-4731

LA GRANGE PHARMACY
111 W 4TH ST
VINTON, IA 52349
(319)472-4274

HY-VEE PHARMACY
312 N 2ND ST
WAPELLO, IA 52653
(319)523-3784

BEANS PHARMACY
222 S IOWA AVE
WASHINGTON, IA 52353
(319)653-4646

HY-VEE PHARMACY
528 HIGHWAY 1 S
WASHINGTON, IA 52353
(319)653-2155

NUCARA PHARMACY
120 E MADISON ST
WASHINGTON, IA 52353
(641)366-3440

RELIANT LTC
222 S IOWA AVE STE B
WASHINGTON, IA 52353
(319)653-1043

WAL-MART
2485 HIGHWAY 92
WASHINGTON, IA 52353
(319)653-7218

ALLEN CLINIC PHARMACY
146 W DALE ST STE 103
WATERLOO, IA 50703
(319)235-3777

AMICARE PHARMACY
1015 S HACKETT RD
WATERLOO, IA 50701
(319)292-6600

COVENANT FAMILY PHARMACY
2710 SAINT FRANCIS DR
WATERLOO, IA 50702
(319)272-5700

CVS
207 FRANKLIN ST
WATERLOO, IA 50703
(319)234-4736

CVS
1825 E SAN MARNAN DR
WATERLOO, IA 50702
(319)235-6248

GREENWOOD DRUG ON KIMBALL AVE
2104 KIMBALL AVE
WATERLOO, IA 50702
(319)234-6673

HY-VEE PHARMACY
2834 ANSBOROUGH AVE
WATERLOO, IA 50701
(319)226-3514

HY-VEE PHARMACY
1422 FLAMMANG DR
WATERLOO, IA 50702
(319)234-1774

HY-VEE PHARMACY
4000 UNIVERSITY AVE
WATERLOO, IA 50701
(319)236-1786

HY-VEE PHARMACY
2181 LOGAN AVE
WATERLOO, IA 50703
(319)232-6366

KMART PHARMACY
3810 UNIVERSITY AVE
WATERLOO, IA 50701
(319)234-1507

NUCARA PHARMACY
209 E SAN MARNAN DR STE 140
WATERLOO, IA 50702
(641)366-3440

PEOPLES CLINIC PHARMACY
905 FRANKLIN ST
WATERLOO, IA 50703
(319)272-4300

TARGET PHARMACY
1501 EAST SANMARNAN DR
WATERLOO, IA 50702
(319)226-6761

UNITED MED PARK CLINIC PHARMAC
1717 W RIDGEWAY AVE STE 50A
WATERLOO, IA 50701
(319)833-5725

WAL-MART
1334 FLAMMANG DR
WATERLOO, IA 50702
(319)232-3514

HY-VEE PHARMACY
1005 E HICKMAN RD
WAUKEE, IA 50263
(515)216-2762

MEDICAP PHARMACY
10 WARRIOR LN
WAUKEE, IA 50263
(515)987-8111

HARTIG DRUG
21 W MAIN ST
WAUKON, IA 52172
(563)568-6315

SHOPKO PHARMACY
819 11TH AVE SW
WAUKON, IA 52172
(563)568-3668

CENTER PHARMACY
312 9TH ST SW STE 1000
WAVERLY, IA 50677
(319)483-4100

HY-VEE PHARMACY
1311 4TH ST SW
WAVERLY, IA 50677
(319)352-2021

MEYER HEALTH MART PHARMACY
110 10TH ST SW
WAVERLY, IA 50677
(319)352-3120

WAL-MART
2700 4TH ST SW
WAVERLY, IA 50677
(319)352-2735

HY-VEE PHARMACY
823 2ND ST
WEBSTER CITY, IA 50595
(515)832-4025

THRIFTY WHITE DRUG
909 WILSON AVE
WEBSTER CITY, IA 50595
(515)832-4137

PHARMACY ON 8TH
221 8TH AVE
WELLMAN, IA 52356
(319)646-3388

HERITAGE FAMILY PHARMACY
1201 W AGENCY RD
WEST BURLINGTON, IA 52655
(319)753-3681

HERITAGE PARK PHARMACY
1223 S GEAR AVE STE 105
WEST BURLINGTON, IA 52655
(319)768-3950

HERITAGE PARTNERS PHARMACY
1225 S GEAR AVE STE 154
WEST BURLINGTON, IA 52655
(319)768-3960

WAL-MART
324 W AGENCY RD
WEST BURLINGTON, IA 52655
(319)753-2269

COSTCO
7205 MILLS CIVIC PKWY
WEST DES MOINES, IA 50266
(515)222-2948

DAHLS PHARMACY
1208 PROSPECT RD
WEST DES MOINES, IA 50265
(515)223-4626

DAHL'S PHARMACY
5003 EP TRUE PKWY
WEST DES MOINES, IA 50265
(515)278-1657

HY-VEE PHARMACY
1010 60TH ST
WEST DES MOINES, IA 50266
(515)440-1620

HY-VEE PHARMACY
555 S 51ST ST
WEST DES MOINES, IA 50265
(515)221-2751

HY-VEE PHARMACY
1725 JORDAN CREEK PKWY
WEST DES MOINES, IA 50266
(515)226-8921

HY-VEE PHARMACY
1700 VALLEY WEST DR
WEST DES MOINES, IA 50265
(515)225-9330

HY-VEE PHARMACY
1990 GRAND AVE
WEST DES MOINES, IA 50265
(515)223-8506

TARGET PHARMACY
1800 35TH ST
WEST DES MOINES, IA 50266
(515)225-3170

TARGET PHARMACY
5405 MILL CIVIC PKWY
WEST DES MOINES, IA 50266
(515)223-3597

WAL-MART
6365 STAGECOACH
WEST DES MOINES, IA 50266
(515)453-2760

WEST LIBERTY PHARMACY
311 W RAINBOW DR APT 1
WEST LIBERTY, IA 52776
(319)653-1043

STEEGE PHARMACY
119 N VINE ST
WEST UNION, IA 52175
(641)366-3440

UNION DRUG
315 HIGHWAY 150 N
WEST UNION, IA 52175
(563)422-3721

WHITING FAMILY PHARMACY
723 WHITTER ST
WHITING, IA 51063
(712)458-2500

PETERSON DRUG
514 ELM ST
WILLIAMSBURG, IA 52361
(319)668-1664

STAR DRUG
517 COURT ST
WILLIAMSBURG, IA 52361
(319)668-1520

WESTER DRUG
400 OVESEN DR
WILTON, IA 52778
(563)732-5238

HY-VEE PHARMACY
7101 UNIVERSITY AVE
WINDSOR HEIGHTS, IA 50324
(515)279-4408

MEDICAP PHARMACY
904 N JOHN WAYNE DR
WINTERSET, IA 50273
(515)462-2880

MONTROSS PHARMACY
118-120 N 1ST AVE
WINTERSET, IA 50273
(515)462-2282

SHOPKO PHARMACY
402 E HIGHWAY 92
WINTERSET, IA 50273
(515)462-2192

EBY DRUG STORE
423 WALKER ST
WOODBINE, IA 51579
(712)647-2840

WYOMING DRUG
156 W MAIN ST
WYOMING, IA 52362
(319)221-1050

NUCARA PHARMACY
112 W MAIN ST
ZEARING, IA 50278
(641)366-3442

ZEARING MEDICAL CLINIC
112 W MAIN ST
ZEARING, IA 50278
(641)487-7779

Minnesota Providers

Participating Pharmacies

ADA PHARMACY
319 W MAIN ST
ADA, MN 56510
(218)784-4351

THRIFTY WHITE DRUG
104 W 3RD AVE
ADA, MN 56510
(218)784-2434

STERLING DRUG
209 MAINE AVE STE 105
ADRIAN, MN 56110
(507)483-2332

CVS
25 2ND ST NE
AITKIN, MN 56431
(218)927-3756

SHOPKO PHARMACY
190 SOUTHGATE DR
AITKIN, MN 56431
(218)927-2466

ALBANY APOTHECARY
509 RAILROAD AVE
ALBANY, MN 56307
(320)845-4220

CURT'S PHARMACY
1615 W MAIN ST
ALBERT LEA, MN 56007
(507)373-6337

HY-VEE PHARMACY
2708 BRIDGE AVE
ALBERT LEA, MN 56007
(507)373-1899

MAYO CLINIC HEALTH SYSTEM
404 W FOUNTAIN ST
ALBERT LEA, MN 56007
(507)373-7952

SHOPKO PHARMACY
2610 BRIDGE AVE
ALBERT LEA, MN 56007
(507)373-9424

STERLING DRUG
410 BRIDGE AVE
ALBERT LEA, MN 56007
(507)373-1486

WAL-MART
1550 BLAKE AVE
ALBERT LEA, MN 56007
(507)377-0668

COBORNS PHARMACY
5698 LACENTRE AVE NE
ALBERTVILLE, MN 55301
(763)497-1139

MARKETPLACE PHARMACY
5262 KYLER AVE NE STE 112
ALBERTVILLE, MN 55301
(763)497-2846

ALEXANDRIA APOTHECARY
1525 BROADWAY ST STE 100
ALEXANDRIA, MN 56308
(320)763-3076

KMART PHARMACY
2310 HIGHWAY 29 S
ALEXANDRIA, MN 56308
(320)763-7433

TARGET PHARMACY
4404 HIGHWAY 29 S
ALEXANDRIA, MN 56308
(320)763-7393

THRIFTY WHITE PHARMACY
503 3RD AVE E STE 100
ALEXANDRIA, MN 56308
(320)762-1531

TRUMM DRUG
600 FILLMORE ST
ALEXANDRIA, MN 56308
(320)763-3111

TRUMM DRUG - ALEXANDRIA
610 30TH AVE W STE 201
ALEXANDRIA, MN 56308
(320)763-3116

WAL-MART
4611 HWY 29 S
ALEXANDRIA, MN 56308
(320)762-2850

CVS
3633 BUNKER LN BLVD NW
ANDOVER, MN 55303
(763)421-5011

FAIRVIEW ANDOVER PHARMACY
13819 HANSON BLVD STE 100
ANDOVER, MN 55304
(763)862-4445

GOODRICH PHARMACY
15245 BLUEBIRD ST
ANDOVER, MN 55304
(763)434-1901

TARGET PHARMACY
200 BUNKER LK BLVD NW
ANDOVER, MN 55304
(763)852-0114

WAL-MART
1851 BUNKER LAKE BLVD
ANDOVER, MN 55304
(763)354-5720

ARENSON ANNANDALE PHARMACY
43 OAK AVE N
ANNANDALE, MN 55302
(320)274-5415

KEAVENY DRUG
700 NORWAY DR E STE 105
ANNANDALE, MN 55302
(320)274-3062

CVS
657 E MAIN ST
ANOKA, MN 55303
(763)427-2457

GOODRICH PHARMACY ANOKA
601 JACOB LN
ANOKA, MN 55303
(763)421-5540

KMART PHARMACY
1100 W HIGHWAY 10
ANOKA, MN 55303
(763)427-7699

ALLINA HEALTH APPLE VALLEY
14655 GALAXY AVE
APPLE VALLEY, MN 55124
(651)241-3800

CUB
15350 CEDAR AVE
APPLE VALLEY, MN 55124
(952)431-2221

CVS
15051 GALAXIE AVE
APPLE VALLEY, MN 55124
(952)432-3535

CVS
15115 DOVE TRL
APPLE VALLEY, MN 55124
(952)423-3200

FAIRVIEW CEDAR RIDGE PHCY
15650 CEDAR AVE
APPLE VALLEY, MN 55124
(952)997-4155

HEALTHPARTNERS
15290 PENNOCK LN
APPLE VALLEY, MN 55124
(952)431-8566

RAINBOW FOODS PHARMACY
15125 CEDAR AVE
APPLE VALLEY, MN 55124
(952)431-9774

SAM'S CLUB
14940 FLORENCE TRAIL
APPLE VALLEY, MN 55124
(952)432-7133

TARGET PHARMACY
15150 CEDAR AVE
APPLE VALLEY, MN 55124
(952)891-5515

TARGET PHARMACY
15560 PILOT KNOB RD
APPLE VALLEY, MN 55124
(952)236-3166

WAL-MART
7835 150TH ST W
APPLE VALLEY, MN 55124
(952)431-9703

LIEBE DRUG
145 N MILES ST
APPLETON, MN 56208
(320)289-2593

CUB
3717 LEXINGTON AVE N
ARDEN HILLS, MN 55126
(651)483-1504

HEALTHPARTNERS ARDEN HILLS
3930 NORTHWOODS DR
ARDEN HILLS, MN 55112
(651)523-8599

MORREIM PHARMACY
201 W MAIN ST
ARLINGTON, MN 55307
(507)964-5228

AURORA DRUG
201 N MAIN ST
AURORA, MN 55705
(218)229-3327

ESSENTIA HEALTH NORTHERN PINES
5211 HIGHWAY 110
AURORA, MN 55705
(218)229-2211

NORTHERN PINES MEDICAL CENTER
5211 HIGHWAY 110
AURORA, MN 55705
(952)653-2568

HY-VEE PHARMACY
1001 18TH AVE NW
AUSTIN, MN 55912
(507)437-9185

MEDICAP PHARMACY
1109 W OAKLAND AVE
AUSTIN, MN 55912
(507)433-7123

SHOPKO PHARMACY
1209 18TH AVE NW
AUSTIN, MN 55912
(507)437-7616

ST OLAF PHARMACY
1000 1ST DR NW
AUSTIN, MN 55912
(507)434-1422

STERLING DRUG
1305 1ST AVE SW
AUSTIN, MN 55912
(507)433-4586

TARGET PHARMACY
1701 NW 18TH AVE
AUSTIN, MN 55912
(507)437-7053

WAL-MART
1000 18TH AVE NW
AUSTIN, MN 55912
(507)434-8170

K AND S PHARMACY
107 AVON AVE S STE 1
AVON, MN 56310
(320)356-1000

THRIFTY WHITE DRUG
31 N MAIN ST
BAGLEY, MN 56621
(218)694-6210

CITY CENTER DRUG AND HARDWARE
117 FRONT ST S
BARNESVILLE, MN 56514
(218)354-2131

NOBLE THRIFTY WHITE PHARMACY
111 MAIN AVE N
BAUDETTE, MN 56623
(218)634-1236

COSTCO
13650 ELDER DR
BAXTER, MN 56425
(218)855-5755

CUB
14133 EDGEWOOD DR
BAXTER, MN 56425
(218)855-0880

ESSENTIA HEALTH BAXTER PHCY
13060 ISLE DR
BAXTER, MN 56425
(218)454-5920

WAL-MART
7295 GLORY RD
BAXTER, MN 56425
(218)829-5510

CENTRACARE PHARMACY BECKER
12800 ROLLING RIDGE RD
BECKER, MN 55308
(763)261-7008

COBORN'S PHARMACY
1010 ENTERPRISE DR E
BELLE PLAINE, MN 56011
(952)873-2605

OTTO DRUG EXPRESS AND VARIETY
613 E MAIN ST
BELLE PLAINE, MN 56011
(952)873-6220

MEDSAVE FAMILY PHARMACY
217 PAUL BUNYAN DR NW
BEMIDJI, MN 56601
(218)759-1222

SANFORD BEMIDJI MEDICAL CENTER
1300 ANNE ST NW
BEMIDJI, MN 56601
(952)653-2568

SANFORD PHARMACY 1611 ANNE ST
1611 ANNE ST NW
BEMIDJI, MN 56601
(218)333-2450

SANFORD PHARMACY 1705 ANNE ST
1705 ANNE ST NW STE 3
BEMIDJI, MN 56601
(218)333-4770

SANFORD PHARMACY BEMIDJI
1233 34TH ST NW
BEMIDJI, MN 56601
(218)333-5265

TARGET PHARMACY
2100 PAUL BUNYAN DR NW
BEMIDJI, MN 56601
(218)759-0133

THRIFTY WHITE DRUG
225 PAUL BUNYAN DR NW
BEMIDJI, MN 56601
(218)751-5030

THRIFTY WHITE DRUG
2000 PAUL BUNYAN DR NW
BEMIDJI, MN 56601
(218)751-6380

WAL-MART
2025 PAUL BUNYAN DR NW
BEMIDJI, MN 56601
(218)755-6132

BREEN'S PHARMACY
1207 PACIFIC AVE
BENSON, MN 56215
(320)842-4221

CLARKS REXALL DRUG
1214 ATLANTIC AVE
BENSON, MN 56215
(320)842-3221

SEIP DRUG
124 2ND AVE NW
BERTHA, MN 56437
(218)924-2124

COBORNS PHARMACY
711 ROSE DR
BIG LAKE, MN 55309
(763)263-7030

BIGFORK VALLEY PHARMACY
258 PINE TREE DR
BIGFORK, MN 56628
(218)743-4444

MOONS PHARMACY
17 MAIN ST S
BLACKDUCK, MN 56630
(218)835-7740

Minnesota Providers

Participating Pharmacies

CUB
12595 CENTRAL AVE NE
BLAINE, MN 55434
(763)767-4329

CUB
585 NORTHTOWN DR
BLAINE, MN 55434
(763)780-7350

CUB
4205 PHEASANT RIDGE DR
BLAINE, MN 55449
(763)784-0334

CVS
2357 108TH LN NE
BLAINE, MN 55449
(763)780-0776

EXPRESS HEALTHCARE
10190 BALITMORE ST NE
BLAINE, MN 55449
(763)795-9363

FAIRVIEW PHARMACY BLAINE
10961 CLUB WEST PKWY
BLAINE, MN 55449
(763)528-2975

GOODRICH PHARMACY
11855 ULYSSES ST NE
BLAINE, MN 55434
(763)717-0222

KMART PHARMACY
8949 UNIVERSITY AVE NE
BLAINE, MN 55434
(763)786-6820

RAINBOW FOODS PHARMACY
551 87TH LN NE
BLAINE, MN 55434
(763)785-4707

TARGET PHARMACY
1500 109TH AVE NE
BLAINE, MN 55449
(763)354-1001

WAL-MART
11505 ULYSSES ST NE
BLAINE, MN 55434
(763)354-5402

WAL-MART
4405 PHEASANT RIDGE NE
BLAINE, MN 55449
(763)784-0862

BLOOMINGTON DRUG
509 W 98TH ST
BLOOMINGTON, MN 55420
(952)884-7528

CUB
500 W 84TH ST
BLOOMINGTON, MN 55420
(952)346-8625

CUB
10520 FRANCE AVE S
BLOOMINGTON, MN 55431
(952)888-4310

CVS
8936 LYNDALE AVE S
BLOOMINGTON, MN 55420
(952)881-0163

FAIRVIEW OXBORO PHARMACY
600 W 98TH ST
BLOOMINGTON, MN 55420
(952)885-6166

HEALTHPARTNERS
8600 NICOLLET AVE S
BLOOMINGTON, MN 55420
(952)887-6602

HEALTHPARTNERS 8170 PHARMACY
8170 33RD AVE S
BLOOMINGTON, MN 55425
(952)967-6972

LUNDS PHARMACY
5159 W 98TH ST
BLOOMINGTON, MN 55437
(952)224-5034

PARK NICOLLET PHCY BLOOMINGTON
5320 HYLAND GREENS DR
BLOOMINGTON, MN 55437
(952)993-2530

RAINBOW FOODS PHARMACY
2600 W 80TH ST
BLOOMINGTON, MN 55431
(952)346-0121

SAM'S CLUB
200 79TH ST W
BLOOMINGTON, MN 55420
(952)888-6079

TARGET PHARMACY
2555 79TH ST W
BLOOMINGTON, MN 55431
(952)888-4677

WAL-MART
700 AMERICAN BLVD E
BLOOMINGTON, MN 55420
(952)854-8850

BLUE EARTH DRUG
125 S GROVE ST
BLUE EARTH, MN 56013
(507)526-2121

BLUE EARTH DRUG LTC
125 S GROVE ST STE 2
BLUE EARTH, MN 56013
(507)526-2121

WAL-MART
1210 GIANT DR
BLUE EARTH, MN 56013
(507)526-4514

CUB
417 8TH AVE NE
BRAINERD, MN 56401
(218)828-0440

ESSENTIA HEALTH BRAINERD PHCY
2024 S 6TH ST
BRAINERD, MN 56401
(218)829-7455

GUIDEPOINT PHARMACY
108 S 6TH ST
BRAINERD, MN 56401
(218)829-0347

SERVICE DRUG
218 W WASHINGTON ST
BRAINERD, MN 56401
(218)829-3664

ST JOSEPH'S MEDICAL CENTER
523 N 3RD ST
BRAINERD, MN 56401
(218)829-2861

TARGET PHARMACY
700 DELLWOOD DR N
BRAINERD, MN 56401
(218)828-9219

THRIFTY NYSTROM DRUG
233 S 8TH ST
BRAINERD, MN 56401
(218)825-0803

THRIFTY NYSTROM DRUG
223 S 8TH ST
BRAINERD, MN 56401
(218)829-3529

BRECKENRIDGE DRUG
116 N 5TH ST
BRECKENRIDGE, MN 56520
(218)643-5411

ST FRANCIS MEDICAL CTR PHCY
2400 ST FRANCIS DR
BRECKENRIDGE, MN 56520
(218)643-0260

THRIFTY WHITE PHARMACY
126 5TH ST N
BRECKENRIDGE, MN 56520
(218)643-3871

CUB
3245 COUNTY ROAD 10
BROOKLYN CENTER, MN 55429
(763)503-6810

CVS
5801 BROOKLYN BLVD
BROOKLYN CENTER, MN 55429
(763)537-1237

HEALTHPARTNERS BROOKLYN CTR
6845 LEE AVE N
BROOKLYN CENTER, MN 55429
(763)503-4418

PARK NICOLLET PHCY BROOKDALE
6000 EARLE BROWN DR
BROOKLYN CENTER, MN 55430
(952)993-4800

SUN PHARMACY
6350 BROOKLYN BLVD STE A1
BROOKLYN CENTER, MN 55429
(763)561-0722

TARGET PHARMACY
6100 SHINGLE CREEK PKWY
BROOKLYN CENTER, MN 55430
(763)566-0143

WAL-MART
1200 SHINGLE CREEK XING
BROOKLYN CENTER, MN 55430
(763)566-4089

CUB
7555 W BROADWAY AVE
BROOKLYN PARK, MN 55428
(763)424-0525

CUB
9655 COLORADO LN
BROOKLYN PARK, MN 55445
(763)315-0737

CVS
7996 BROOKLYN BLVD
BROOKLYN PARK, MN 55445
(763)488-1624

FAIRVIEW PHCY BROOKLYN PARK
10000 ZANE AVE N
BROOKLYN PARK, MN 55443
(763)569-6281

PARK POINT PHARMACY
7648 ZANE AVE N STE 104
BROOKLYN PARK, MN 55443
(763)560-1901

POLAR PHARMACY AND MED SUPPLY
8561 EDINBURGH CENTER DR
BROOKLYN PARK, MN 55443
(773)777-5995

TARGET PHARMACY
7535 W BROADWAY AVE
BROOKLYN PARK, MN 55428
(763)898-5528

WAL-MART
8000 LAKELAND AVE
BROOKLYN PARK, MN 55445
(763)424-7077

LIEBE DRUG
332 4TH BROADWAY
BROWNS VALLEY, MN 56219
(320)695-2331

ALLINA HEALTH BUFFALO PHARMACY
303 CATLIN ST
BUFFALO, MN 55313
(763)684-7676

BUFFALO HOSPITAL
303 CATLIN ST
BUFFALO, MN 55313
(763)682-7190

CUB
1008 HIGHWAY 55 E
BUFFALO, MN 55313
(763)682-5828

STERLING DRUG
25 DIVISON ST E
BUFFALO, MN 55313
(763)682-1911

TARGET PHARMACY
1300 STATE HIGHWAY 55 NE
BUFFALO, MN 55313
(763)682-5633

WAL-MART
1315 HWY 25 N
BUFFALO, MN 55313
(763)682-2963

BYERLY'S PHARMACY
401 COUNTY ROAD 42 E
BURNSVILLE, MN 55306
(952)435-8145

COSTCO
14050 BURNHAVEN DR
BURNSVILLE, MN 55337
(952)229-6458

CUB
300 E TRAVELERS TRL
BURNSVILLE, MN 55337
(952)894-0712

CUB
1750 COUNTRY RD 42 W
BURNSVILLE, MN 55337
(952)892-6262

CVS
12751 NICOLLET AVE
BURNSVILLE, MN 55337
(952)736-8130

FAIRVIEW RIDGEVIEW PHARMACY
303 E NICOLLET BLVD
BURNSVILLE, MN 55337
(952)892-2640

FAIRVIEW RIDGEVIEW PHARMACY
201 E NICOLLET BLVD
BURNSVILLE, MN 55337
(952)892-2130

KMART PHARMACY
14230 BURNHAVEN DR
BURNSVILLE, MN 55306
(952)435-8233

PARK NICOLLET PHCY BURNSVILLE
14000 FAIRVIEW DR
BURNSVILLE, MN 55337
(952)993-8524

TARGET PHARMACY
810 COUNTY ROAD 42 W
BURNSVILLE, MN 55337
(952)236-3004

WAL-MART
12200 RIVER RIDGE BLVD
BURNSVILLE, MN 55337
(952)882-9196

STERLING
615 ESCH DR
CALEDONIA, MN 55921
(507)725-3328

ALLINA HEALTH CAMBRIDGE PHCY
701 DELLWOOD ST S
CAMBRIDGE, MN 55008
(763)689-7809

CUB
100 XYLITE ST NE
CAMBRIDGE, MN 55008
(763)689-0185

MERWIN LTC PHARMACY
124 EMERSON ST N
CAMBRIDGE, MN 55008
(763)689-9300

TARGET PHARMACY
215 BALSAM ST N STE 100
CAMBRIDGE, MN 55008
(763)689-3687

WAL-MART
100 WAL-MART LN
CAMBRIDGE, MN 55008
(763)689-0609

CANBY DRUG AND GIFTS
130 SAINT OLAF AVE N
CANBY, MN 56220
(507)223-5955

MAYO CLINIC HEALTH SYSTEM
1116 MILL ST W
CANNON FALLS, MN 55009
(952)653-2568

SCOFIELD DRUG AND GIFT
108 4TH ST N
CANNON FALLS, MN 55009
(507)263-2881

Minnesota Providers

Participating Pharmacies

GORDY'S PHARMACY
320 SUMMIT AVE
CENTER CITY, MN 55012
(651)257-4500

CUB
8600 114TH AVE N
CHAMPLIN, MN 55316
(763)422-8700

TARGET PHARMACY
11990 BUSINESS PARK BLVD N
CHAMPLIN, MN 55316
(763)354-1007

BYERLY'S PHARMACY
800 W 78TH ST
CHANHASSEN, MN 55317
(952)380-5970

CUB
7900 MARKET BLVD
CHANHASSEN, MN 55317
(952)934-2865

CVS
7765 GALPIN BLVD
CHANHASSEN, MN 55317
(952)474-6623

PARK NICOLLET PHCY CHANHASSEN
300 LAKE DR E
CHANHASSEN, MN 55317
(952)993-4430

TARGET PHARMACY
851 W 78TH ST
CHANHASSEN, MN 55317
(952)470-1006

CHANHASSEN CENTER DRUG
111 HUNDERTMARK RD STE 100
CHASKA, MN 55318
(952)949-1002

RAINBOW FOODS PHARMACY
200 PIONEER TRL
CHASKA, MN 55318
(952)448-9809

TARGET PHARMACY
111 PIONEER TRL
CHASKA, MN 55318
(952)361-3766

CHOSEN VALLEY PHARMACY
237 MAIN ST N
CHATFIELD, MN 55923
(507)867-4425

CHISAGO DRUG
10655 RAILROAD AVE
CHISAGO CITY, MN 55013
(651)257-4950

CASEY DRUG
121 W LAKE ST
CHISHOLM, MN 55719
(218)254-3318

KEAVENY DRUG
110 MAIN ST
CLARA CITY, MN 56222
(320)847-3784

CLARISSA DRUG
210 MAIN ST W
CLARISSA, MN 56440
(218)756-2242

LARSON DRUG
941 10TH ST
CLARKFIELD, MN 56223
(320)669-4621

THRIFTY WHITE DRUG
30 S MAIN ST
CLEARBROOK, MN 56634
(218)776-3111

COBORNS PHARMACY
705 COUNTY ROAD 75 NW
CLEARWATER, MN 55320
(320)558-2454

MEDICINE SHOPPE PHARMACY
1208 CLOQUET AVE
CLOQUET, MN 55720
(218)879-4547

MEDICINE SHOPPE PHARMACY
419 SKYLINE BLVD
CLOQUET, MN 55720
(218)879-1501

WAL-MART
1308 HWY 33 S
CLOQUET, MN 55720
(218)878-0676

WHITE DRUG
707 HIGHWAY 33 S STE 12
CLOQUET, MN 55720
(218)879-6768

KEAVENY DRUG
205 BROADWAY AVE S
COKATO, MN 55321
(320)286-5483

KEAVENY LTC PHARMACY
201 BROADWAY AVE S
COKATO, MN 55321
(320)286-5129

THRIFTY WHITE PHARMACY
400 MAIN ST
COLD SPRING, MN 56320
(320)685-7015

FAIRVIEW COLUMBIA HTS PHARMACY
4000 CENTRAL AVE NE
COLUMBIA HEIGHTS, MN 55421
(763)782-8149

COOK HOSPITAL PHARMACY
10 5TH ST SE
COOK, MN 55723
(218)666-6229

FRANKS PHARMACY
1 W VERMILLION DR
COOK, MN 55723
(218)666-5325

ALLINA HEALTH MERCY PHARMACY
11850 BLACKFOOT ST NW
COON RAPIDS, MN 55433
(763)236-7111

BLUELINE
9243 E RIVER RD NW
COON RAPIDS, MN 55433
(612)986-7827

COSTCO
12547 RIVERDALE BLVD NW
COON RAPIDS, MN 55448
(763)712-7762

CUB
12900 RIVERDALE DR
COON RAPIDS, MN 55448
(763)421-0065

CUB
2050 NORTHDALE BLVD
COON RAPIDS, MN 55433
(763)754-9036

CVS
10930 UNIVERSITY AVE NW
COON RAPIDS, MN 55448
(763)755-6316

CVS
2017 COON RAPIDS BLVD
COON RAPIDS, MN 55433
(763)757-5615

GENOA HEALTHCARE
1930 COON RAPIDS BLVD
COON RAPIDS, MN 55433
(651)583-7093

HEALTHPARTNERS COON RAPIDS
11475 ROBINSON DR NW
COON RAPIDS, MN 55433
(763)754-4603

RAINBOW FOODS PHARMACY
3340 124TH AVE NW
COON RAPIDS, MN 55433
(763)576-9343

TARGET PHARMACY
3300 124TH AVE
COON RAPIDS, MN 55433
(763)323-8402

TARGET PHARMACY
8600 SPRINGBROOK DR NW
COON RAPIDS, MN 55433
(763)785-0720

WAL-MART
13020 RIVERDALE DR.
COON RAPIDS, MN 55448
(763)421-5717

ALLINA HLTH COTTAGE GROVE PHCY
8611 W POINT DOUGLAS RD S
COTTAGE GROVE, MN 55016
(651)241-0424

CUB
8690 E POINT DOUGLAS RD
COTTAGE GROVE, MN 55016
(651)459-7324

TARGET PHARMACY
8655 E POINT DOUGLAS RD S
COTTAGE GROVE, MN 55016
(651)458-8219

HUGO'S FAMILY PHARMACY
1310 UNIVERSITY AVE
CROOKSTON, MN 56716
(218)281-3174

PRESCRIPTION SHOPPE
211 N MAIN
CROOKSTON, MN 56716
(218)281-7045

RIVERVIEW HEALTH
323 S MINNESOTA ST
CROOKSTON, MN 56716
(218)281-9420

THRIFTY WHITE DRUG
206 N MAIN ST
CROOKSTON, MN 56716
(218)281-2540

WAL-MART
1930 SAHLSTROM DR
CROOKSTON, MN 56716
(218)281-6170

CUYUNA LAKES PHARMACY
320 E MAIN ST STE 2
CROSBY, MN 56441
(218)546-2345

CUYUNA REGIONAL MED CENTER
320 E MAIN ST
CROSBY, MN 56441
(952)653-2560

GUIDEPOINT PHARMACY
20 W MAIN ST
CROSBY, MN 56441
(218)546-5144

CROSS LAKE DRUG
14311 GOULD ST STE 7
CROSSLAKE, MN 56442
(218)692-2502

CUB
5301 36TH AVE N
CRYSTAL, MN 55422
(763)287-9797

OMNICARE PHARMACY
5534 LAKELAND AVE N
CRYSTAL, MN 55429
(763)259-0188

TARGET PHARMACY
5537 W BROADWAY AVE
CRYSTAL, MN 55428
(763)533-1651

DAWSON DRUG AND GIFTS
812 6TH ST
DAWSON, MN 56232
(320)769-2229

NELSON REXALL DRUG
728 6TH ST
DAWSON, MN 56232
(320)769-2546

OTT DRUG STORE
117 MAIN AVE E
DEER RIVER, MN 56636
(218)246-8642

COBORNS PHARMACY
1400 BABCOCK BLVD E
DELANO, MN 55328
(763)972-8385

CVS
1314 BABCOCK BLVD E
DELANO, MN 55328
(763)972-3266

7 DAY CLINIC
1361 WENNER RD
DETROIT LAKES, MN 56501
(952)653-2568

CVS
329 FRAZEE ST E
DETROIT LAKES, MN 56501
(218)847-1484

DL PHARMACY
211 FRAZEE ST E
DETROIT LAKES, MN 56501
(218)847-3537

KMART PHARMACY
1305 HIGHWAY 10 W
DETROIT LAKES, MN 56501
(218)847-9755

SANFORD PHARMACY DETROIT LAKES
1245 WASHINGTON AVE
DETROIT LAKES, MN 56501
(218)846-2276

ST MARY'S HEALTH CENTER
1027 WASHINGTON AVE
DETROIT LAKES, MN 56501
(218)847-5611

WAL-MART
1583 HWY 10 WEST
DETROIT LAKES, MN 56501
(218)847-7225

WHITE DRUG
808 WASHINGTON AVE STE 29
DETROIT LAKES, MN 56501
(218)847-9248

CVS
1714 CENTER AVE W
DILWORTH, MN 56529
(218)287-5147

WAL-MART
1711 HWY 10 W
DILWORTH, MN 56529
(218)233-9833

ARROW-PASEK PHARMACY
109 N 2ND AVE W
DULUTH, MN 55802
(218)733-6800

CUB
615 W CENTRAL ENTRANCE
DULUTH, MN 55811
(218)727-3010

CVS
4528 GRAND AVE
DULUTH, MN 55807
(218)624-2820

ESSENTIA HEALTH DULTUH 1ST ST
420 E 1ST ST
DULUTH, MN 55805
(218)786-1685

ESSENTIA HEALTH DULUTH 3RD ST
400 E 3RD ST
DULUTH, MN 55805
(218)786-3137

ESSENTIA HEALTH LAKESIDE PHCY
4621 E SUPERIOR ST
DULUTH, MN 55804
(218)786-3784

ESSENTIA HEALTH LAKEWALK PHCY
1502 LONDON RD STE 101
DULUTH, MN 55812
(218)733-1110

ESSENTIA HEALTH WEST DULUTH
4212 GRAND AVE
DULUTH, MN 55807
(218)786-3700

Minnesota Providers

Participating Pharmacies

GENOA HEALTHCARE MINNESOTA
1401 E 1ST ST
DULUTH, MN 55805
(218)728-2208

KMART PHARMACY
215 N CENTRAL AVE
DULUTH, MN 55807
(218)624-9305

NORTHLAND PHARMACY
1000 E 1ST ST
DULUTH, MN 55805
(218)249-2460

NUCARA PHARMACY
324 W SUPERIOR ST
DULUTH, MN 55802
(641)366-3440

SHOPKO PHARMACY
801 W CENTRAL ENTRANCE
DULUTH, MN 55811
(218)727-7139

ST MARY'S MEDICAL CENTER
407 E 3RD ST
DULUTH, MN 55805
(952)653-2568

TARGET PHARMACY
1902 MILLER TRUNK HWY
DULUTH, MN 55811
(218)727-8475

THRIFTY WHITE PHARMACY
202 N CENTRAL AVE
DULUTH, MN 55807
(218)624-5773

KMART PHARMACY
404 SCHILLING DR
DUNDAS, MN 55019
(507)645-5855

BYERLY'S PHARMACY
1299 PROMENADE PL
EAGAN, MN 55121
(651)209-2974

CUB
1020 DIFFLEY RD
EAGAN, MN 55123
(651)452-5500

CUB PHARMACY
1940 CLIFF LAKE RD
EAGAN, MN 55122
(651)454-5150

CVS
4241 JONNY CAKE RD
EAGAN, MN 55122
(651)688-7041

FAIRVIEW EAGAN PHARMACY
1440 DUCKWOOD DR
EAGAN, MN 55122
(651)406-8980

INFUSCIENCE
2915 WATERS RD STE 110
EAGAN, MN 55121
(612)486-1960

PARK NICOLLET PHCY EAGAN
1885 PLAZA DR
EAGAN, MN 55122
(952)993-4004

RAINBOW FOODS PHARMACY
1276 TOWNE CENTRE DR
EAGAN, MN 55123
(651)452-5663

SAM'S CLUB
3035 DENMARK AVE
EAGAN, MN 55121
(651)405-3879

TARGET PHARMACY
2000 CLIFF LAKE RD
EAGAN, MN 55122
(651)688-8947

WAL-MART
1360 TOWN CENTRE DR
EAGAN, MN 55123
(651)686-7431

HUGO'S FAMILY PHARMACY
224 14TH ST NE
EAST GRAND FORKS, MN 56721
(218)773-0611

SHOPKO PHARMACY
421 GATEWAY DR NE
EAST GRAND FORKS, MN 56721
(218)773-0940

ALIXA RX
10132 W 76TH ST
EDEN PRAIRIE, MN 55344
(877)322-4292

COSTCO
12011 TECHNOLOGY DR
EDEN PRAIRIE, MN 55344
(952)943-4828

CUB
8015 DEN RD
EDEN PRAIRIE, MN 55344
(952)941-6728

CVS
8251 COLUMBINE RD
EDEN PRAIRIE, MN 55344
(952)941-1266

FAIRVIEW EDEN PRAIRIE PHCY
830 PRAIRIE CENTER DR
EDEN PRAIRIE, MN 55344
(952)826-6680

HEALTHPARTNERS
9700 W 76TH ST STE A
EDEN PRAIRIE, MN 55344
(952)833-0499

RAINBOW FOODS PHARMACY
970 PRAIRIE CENTER DR
EDEN PRAIRIE, MN 55344
(952)934-5520

REDPHARM DRUG
6501 CITY WEST PKWY
EDEN PRAIRIE, MN 55344
(952)653-2525

SOUTH LAKE PEDIATRICS
800 PRAIRIE CENTER DR
EDEN PRAIRIE, MN 55344
(952)653-2568

TARGET PHARMACY
8225 FLYING CLOUD DR
EDEN PRAIRIE, MN 55344
(952)944-8720

WAL-MART
12195 SINGLETREE LANE
EDEN PRAIRIE, MN 55344
(952)829-9030

ADVANCED SPINE AND PAIN
7373 FRANCE AVE S STE 606
EDINA, MN 55435
(612)207-7463

BYERLY'S PHARMACY
7171 FRANCE AVE S
EDINA, MN 55435
(952)277-8663

CUB
6775 YORK AVE S
EDINA, MN 55435
(952)925-3911

CVS
6905 YORK AVE S
EDINA, MN 55435
(952)920-0126

FAIRVIEW EDINA PHARMACY
6363 FRANCE AVE S
EDINA, MN 55435
(952)924-1400

FAIRVIEW SOUTHDALE MED PHCY
6545 FRANCE AVE S STE 100
EDINA, MN 55435
(952)924-1499

FAIRVIEW SOUTHDALE PHARMACY
6401 FRANCE AVE S
EDINA, MN 55435
(612)924-5160

LUNDS PHARMACY
3945 W 50TH ST
EDINA, MN 55424
(952)224-9880

TARGET PHARMACY
7000 YORK AVE S
EDINA, MN 55435
(952)925-4250

TRUMM DRUG ELBOW LAKE CLINIC
930 1ST ST NE
ELBOW LAKE, MN 56531
(218)685-9988

TRUMM DRUG-ELBOW LAKE
11 CENTRAL AVE S
ELBOW LAKE, MN 56531
(218)685-4471

COBORNS PHARMACY
19425 EVANS ST NW
ELK RIVER, MN 55330
(763)441-0804

CUB
19216 FREEPORT ST
ELK RIVER, MN 55330
(763)241-8112

FAIRVIEW NORTHLAND PHCY ELK RV
290 MAIN ST NW
ELK RIVER, MN 55330
(763)241-5890

GOODRICH PHARMACY
530 3RD ST NW
ELK RIVER, MN 55330
(763)441-0764

KEMPER DRUG
323 JACKSON AVE NW
ELK RIVER, MN 55330
(763)441-1353

WAL-MART
18185 ZANE ST
ELK RIVER, MN 55330
(763)441-5332

ELY COMMUNITY PHARMACY
328 W CONAN ST
ELY, MN 55731
(218)365-8788

SHOPKO PHARMACY
1500 E SHERIDAN ST
ELY, MN 55731
(218)365-7123

JON'S DRUG
318 GRANT AVE
EVELETH, MN 55734
(218)744-2774

CUB
23800 HIGHWAY 7
EXCELSIOR, MN 55331
(952)401-3990

HY-VEE PHARMACY
907 S STATE ST
FAIRMONT, MN 56031
(507)238-2880

J AND R DRUG GIFT AND FLORAL
107 DOWNTOWN PLZ
FAIRMONT, MN 56031
(507)235-9719

SHOPKO PHARMACY
1001 HIGHWAY 15 S
FAIRMONT, MN 56031
(507)238-9488

STERLING DRUG
322 S STATE ST
FAIRMONT, MN 56031
(507)238-2797

WAL-MART
1250 GOEMANN RD
FAIRMONT, MN 56031
(507)235-2517

HEALTHCARE CAMPUS PHARMACY ONE
200 STATE AVE
FARIBAULT, MN 55021
(507)332-4797

HY-VEE PHARMACY
1920 GRANT ST
FARIBAULT, MN 55021
(507)334-1555

STERLING DRUG
430 2ND AVE NW
FARIBAULT, MN 55021
(507)333-5464

WAL-MART
150 WESTERN AVE
FARIBAULT, MN 55021
(507)332-0084

CVS
19605 PILOT KNOB RD
FARMINGTON, MN 55024
(651)463-3693

ECONOFOODS PHARMACY
115 ELM ST
FARMINGTON, MN 55024
(651)460-6160

KMART PHARMACY
1403 W LINCOLN AVE
FERGUS FALLS, MN 56537
(218)739-2670

LAKE REGION HEALTHCARE
712 S CASCADE ST
FERGUS FALLS, MN 56538
(218)736-8000

SHOPKO PHARMACY
226 E LINCOLN AVE
FERGUS FALLS, MN 56537
(218)736-7531

SUN MART PHARMACY
1205 W LINCOLN AVE
FERGUS FALLS, MN 56537
(218)739-3259

THRIFTY WHITE DRUG
107 E LINCOLN AVE
FERGUS FALLS, MN 56537
(218)736-5565

THRIFTY WHITE DRUG
615 S MILL ST
FERGUS FALLS, MN 56537
(218)736-5770

WAL-MART
3300 HWY 210 W
FERGUS FALLS, MN 56537
(218)739-5559

THRIFTY WHITE DRUG
203 MILL ST N
FERTILE, MN 56540
(218)945-6174

COBORNS PHARMACY
161 GLENN ST
FOLEY, MN 56329
(320)968-8625

FOLEY DRUG
351 DEWEY ST
FOLEY, MN 56329
(320)968-7272

CUB
2013 BROADWAY AVE W
FOREST LAKE, MN 55025
(651)982-4603

ROLSETH DRUG
107 LAKE ST N
FOREST LAKE, MN 55025
(651)464-2114

TARGET PHARMACY
356 12TH ST SW
FOREST LAKE, MN 55025
(651)464-1994

THRIFTY WHITE DRUG
808 S LAKE ST
FOREST LAKE, MN 55025
(651)464-5518

WAL-MART
200 SW 12TH ST
FOREST LAKE, MN 55025
(651)464-9742

FIRST CARE MEDICAL SERVICES
900 HILLIGOSS BLVD SE
FOSSTON, MN 56542
(952)653-2568

NORD'S LONG TERM CARE PHARMACY
115 JOHNSON AVE N STE A
FOSSTON, MN 56542
(218)435-6646

Minnesota Providers

Participating Pharmacies

NORD'S PHARMACY AND GIFTS
115 JOHNSON AVE N
FOSSTON, MN 56542
(218)435-6646

SEIP DRUG
101 E MAIN ST
FRAZEE, MN 56544
(218)334-3070

ALLINA HEALTH UNITY PHARMACY
550 OSBORNE RD
FRIDLEY, MN 55432
(763)236-4111

CUB
246 57TH AVE NE
FRIDLEY, MN 55432
(763)586-9184

CVS
5696 UNIVERSITY AVE
FRIDLEY, MN 55432
(763)571-2081

GOODRICH PHARMACY
480 OSBORNE RD STE 180
FRIDLEY, MN 55432
(763)780-0222

PHARMERICA
5255 E RIVER RD STE 204
FRIDLEY, MN 55421
(763)571-2220

SAM'S CLUB
8150 UNIVERSITY AVE NE
FRIDLEY, MN 55432
(763)792-6653

TARGET PHARMACY
755 53RD AVE NE
FRIDLEY, MN 55421
(763)571-9766

WAL-MART
8450 UNIVERSITY AVE NE
FRIDLEY, MN 55432
(763)780-9500

GUIDE POINT PHARMACY
115 N ST PAUL AVE
FULDA, MN 56131
(507)425-3166

GARRISON CLINIC
27278 STATE HIGHWAY 18
GARRISON, MN 56450
(320)525-3401

GARRISON DRUG
27378 STATE HIGHWAY 18
GARRISON, MN 56450
(320)692-5858

FIRST CHOICE PHARMACY
660 3RD ST
GAYLORD, MN 55334
(507)237-2933

COBORNS PHARMACY
2211 11TH ST E
GLENCOE, MN 55336
(320)864-5192

GLENCOE REGIONAL HEALTH SVCS
1805 HENNEPIN AVE N
GLENCOE, MN 55336
(320)864-3121

SHOPKO PHARMACY
3225 10TH ST E
GLENCOE, MN 55336
(320)864-5026

GLACIAL RIDGE HOSPITAL
10 4TH AVE SE
GLENWOOD, MN 56334
(952)653-2568

SHOPKO PHARMACY
710 COUNTY ROAD 21 S
GLENWOOD, MN 56334
(320)634-4399

TRUMM DRUG GLENWOOD
1 MINNESOTA AVE E
GLENWOOD, MN 56334
(320)634-4434

LIEBE DRUG
318 STUDDART AVE
GRACEVILLE, MN 56240
(320)748-7112

ARROWHEAD PHARMACY
21 W HIGHWAY 61
GRAND MARAIS, MN 55604
(218)387-1133

GRAND MARAIS PHARMACY
425 W HIGHWAY 61
GRAND MARAIS, MN 55604
(218)387-2110

CUB
2410 S POKEGAMA AVE
GRAND RAPIDS, MN 55744
(218)326-9089

GLOBE DRUG AND MEDICAL EQUIP
304 N POKEGAMA AVE
GRAND RAPIDS, MN 55744
(218)326-2635

GRAND ITASCA CLINIC AND HOSP
1601 GOLF COURSE RD
GRAND RAPIDS, MN 55744
(952)653-2568

KMART PHARMACY
1111 S POKEGAMA AVE
GRAND RAPIDS, MN 55744
(218)326-0593

REED DRUG
417 NW 1ST AVE
GRAND RAPIDS, MN 55744
(218)326-3453

TARGET PHARMACY
2140 S HIGHWAY 169
GRAND RAPIDS, MN 55744
(218)326-6412

THRIFTY WHITE DRUG
2026 POKEGAMA AVE S
GRAND RAPIDS, MN 55744
(218)326-9431

WAL-MART
1400 S POKEGAMA AVE
GRAND RAPIDS, MN 55744
(218)326-9401

THRIFTY WHITE DRUG
760 PRENTICE ST
GRANITE FALLS, MN 56241
(320)564-2339

GREENBUSH PHARMACY
152 MAIN ST N
GREENBUSH, MN 56726
(218)782-2366

NOVACEK HEALTHMART PHARMACY
122 HIGHWAY 11 E
GREENBUSH, MN 56726
(218)782-3456

ST JOSEPH MEDICAL CENTER
110 3RD ST S
HACKENSACK, MN 56452
(952)653-2568

ANDERSON PHARMACY
115 2ND ST
HALLOCK, MN 56728
(218)843-2205

STERLING
44 MAIN AVE N
HARMONY, MN 55939
(507)886-2322

COBORNS PHARMACY
225 33RD ST W
HASTINGS, MN 55033
(651)437-6716

CUB
1729 MARKET BLVD
HASTINGS, MN 55033
(651)438-2135

REGINA MEDICAL CENTER
1175 NININGER RD
HASTINGS, MN 55033
(952)480-4100

REGINA MEDICAL CENTER PHARMACY
1175 NININGER RD
HASTINGS, MN 55033
(651)480-4261

STERLING
1399 S FRONTAGE RD
HASTINGS, MN 55033
(651)438-7960

WAL-MART
1752 N FRONTAGE RD
HASTINGS, MN 55033
(651)438-3030

WAHL DRUG
1515 HARTFORD ST
HAWLEY, MN 56549
(218)483-3324

SIVERSON PHARMACY
118 S MAIN ST
HENDRICKS, MN 56136
(507)275-3323

SEIP DRUG
519 DOUGLAS AVE
HENNING, MN 56551
(218)583-2773

HERMAN CLINIC PHARMACY
204 5TH ST E
HERMAN, MN 56248
(320)677-2220

ESSENTIA HEALTH HERMANTOWN
4855 W ARROWHEAD RD
HERMANTOWN, MN 55811
(218)786-3549

SAM'S CLUB
4743 MAPLE GROVE RD
HERMANTOWN, MN 55811
(218)279-2858

WAL-MART
4740 MALL DR
HERMANTOWN, MN 55811
(218)727-4625

BARONS PHARMACY
3605 MAYFAIR AVE
HIBBING, MN 55746
(218)263-4922

BARON'S PHARMACY
1120 E 34TH ST
HIBBING, MN 55746
(218)263-7455

DULUTH CLINIC HIBBING PHARMACY
730 E 34TH ST
HIBBING, MN 55746
(218)262-5225

THRIFTY WHITE DRUG
1101 E 37TH ST
HIBBING, MN 55746
(218)262-6140

WAL-MART
12080 HWY 169
HIBBING, MN 55746
(218)262-3419

HINCKLEY DRUG
121 MAIN ST E
HINCKLEY, MN 55037
(320)384-6166

HOPKINS CENTER DRUG
913 HOPKINS CTR
HOPKINS, MN 55343
(952)938-2719

HOWARD LAKE DRUG COMPANY
732 6TH ST
HOWARD LAKE, MN 55349
(320)543-2141

MESABA DRUG
221 KENNEDY MEMORIAL DR
HOYT LAKES, MN 55750
(218)225-2128

FAIRVIEW HUGO PHARMACY
14712 VICTOR HUGO BLVD
HUGO, MN 55038
(651)466-1970

CASH WISE PHARMACY
1020 HIGHWAY 15 S
HUTCHINSON, MN 55350
(320)587-8070

FAMILY PHARMACY
3 CENTURY AVE SE
HUTCHINSON, MN 55350
(320)587-3638

FAMILY REXALL DRUG
237 HASSAN ST SE
HUTCHINSON, MN 55350
(320)587-2509

HUTCHINSON HOSPITAL
1095 HIGHWAY 15 S
HUTCHINSON, MN 55350
(320)234-5000

REGIONAL EYE SPECIALISTS PA
1455 MONTREAL ST SE
HUTCHINSON, MN 55350
(952)653-2568

SHOPKO PHARMACY
125 MAIN ST N
HUTCHINSON, MN 55350
(320)587-4941

TARGET PHARMACY
1370 HIGHWAY 15 S
HUTCHINSON, MN 55350
(320)587-9576

WAL-MART
1300 TRUNK HWY 15 S
HUTCHINSON, MN 55350
(320)587-1023

CITY HEALTH MART DRUG
314 3RD ST
INTL FALLS, MN 56649
(218)283-3061

ESSENTIA HEALTH INTL FALLS
2501 KEENAN DR
INTL FALLS, MN 56649
(218)285-6222

FALLS MEMORIAL HOSPITAL
1400 HIGHWAY 71
INTL FALLS, MN 56649
(218)283-5449

KMART PHARMACY
1606 HWY 11 71
INTL FALLS, MN 56649
(218)283-3246

CUB
7850 CAHILL AVE
INVER GROVE, MN 55076
(651)450-0676

HEALTHPARTNERS INVER GROVE
5625 CENEX DR
INVER GROVE, MN 55077
(651)552-2603

TARGET PHARMACY
7841 AMANA TRL
INVER GROVE, MN 55077
(651)234-2950

WAL-MART
9165 CAHILL AVE
INVER GROVE HTS, MN 55076
(651)451-7860

LAKE COUNTRY DRUG AND GIFTS
205 W MAIN ST
ISLE, MN 56342
(320)676-3115

IVANHOE FAMILY PHARMACY
366 E GEORGE ST STE 1
IVANHOE, MN 56142
(507)694-1166

SHOPKO PHARMACY
506 2ND ST
JACKSON, MN 56143
(507)847-3161

THRONDSET PHARMACY
908 HIGHWAY 71 N
JACKSON, MN 56143
(507)847-3282

CAHILL PHARMACY
131 N MAIN ST
JANESVILLE, MN 56048
(507)231-6372

KEAVENY DRUG
255 CREEK LN S
JORDAN, MN 55352
(952)458-3334

Minnesota Providers

Participating Pharmacies

THRIFTY WHITE DRUG
101 CLEVELAND AVE E
KARLSTAD, MN 56732
(218)436-2438

KASSON DRUG
408 W MAIN ST
KASSON, MN 55944
(507)634-3341

BERGH PHARMACY
103 REDWING AVE
KENYON, MN 55946
(507)789-5202

STERLING
306 MAIN ST STE 103
LA CRESCENT, MN 55947
(507)895-8784

KENNEDY SNYDER DRUG
223 S LAKESHORE DR
LAKE CITY, MN 55041
(651)345-3411

LAKE CRYSTAL FAMILY PRACTICE
221 S MURPHY ST
LAKE CRYSTAL, MN 56055
(952)653-2568

LAKE ELMO PHARMACY
11240 STILLWATER BLVD N
LAKE ELMO, MN 55042
(651)773-0889

THRIFTY WHITE DRUG
2040 2ND ST
LAKE PARK, MN 56544
(218)238-6642

THRONDSET PHARMACY
326 MAIN ST
LAKEFIELD, MN 56150
(507)662-5908

CUB
20250 HERITAGE DR
LAKEVILLE, MN 55044
(952)469-8404

CUB
7435 179TH ST
LAKEVILLE, MN 55044
(952)891-5050

CVS
17665 KENWOOD TRL
LAKEVILLE, MN 55044
(952)435-3784

CVS
17578 DODD BLVD
LAKEVILLE, MN 55044
(952)432-8770

ERICKSON DRUG
20751 HOLYOKE AVE #808
LAKEVILLE, MN 55044
(952)469-2964

RAINBOW FOODS PHARMACY
17756 KENWOOD TRL
LAKEVILLE, MN 55044
(952)892-4505

TARGET PHARMACY
18275 KENRICK AVE
LAKEVILLE, MN 55044
(952)892-5454

WAL-MART
20710 KEOKUK AVE
LAKEVILLE, MN 55044
(612)354-5934

CORNER DRUG HEALTH MART
204 VALLEY GREEN SQ
LE SUEUR, MN 56058
(507)665-3301

LINDSTROM THRIFTY WHITE PHCY
30699 LINCOLN RD
LINDSTROM, MN 55045
(651)257-4074

FAIRVIEW LAKES PHCY LINO LAKES
7455 VILLAGE DR
LINO LAKES, MN 55014
(651)717-3401

TARGET PHARMACY
749 APOLLO DR
LINO LAKES, MN 55014
(651)784-7618

ECONOFOODS PHARMACY
951 E FRONTAGE RD
LITCHFIELD, MN 55355
(320)693-3261

MEDICINE SHOPPE PHARMACY
329 E HIGHWAY 12
LITCHFIELD, MN 55355
(320)693-9314

WAL-MART
2301 E FRONTAGE RD
LITCHFIELD, MN 55355
(320)693-2004

CVS
2650 RICE ST
LITTLE CANADA, MN 55117
(651)484-0504

COBORNS PHARMACY
1105 2ND AVE N
LITTLE FALLS, MN 56345
(320)632-2380

ST GABRIEL'S HOSPITAL
815 2ND ST SE
LITTLE FALLS, MN 56345
(320)632-1172

WAL-MART
15091 18TH ST NE
LITTLE FALLS, MN 56345
(320)632-3644

LITTLEFORK MEDICAL CENTER PHCY
912 MAIN ST
LITTLEFORK, MN 56653
(218)278-6634

COBORNS PHARMACY
645 LAKE ST S
LONG PRAIRIE, MN 56347
(320)732-2915

LONG PRAIRIE THRIFTYWHITE PHCY
244 CENTRAL AVE
LONG PRAIRIE, MN 56347
(320)732-3228

GUIDEPOINT PHARMACY
1472 CITY RD 4
LONGVILLE, MN 56655
(218)363-2640

LONGVILLE LAKES CLINIC
180 JORDAN LN
LONGVILLE, MN 56655
(218)363-3300

HERRMANN THRIFTY WHITE PHCY
744 ASH ST NE
LONSDALE, MN 55046
(507)744-3373

LEWIS FAMILY DRUG
202 KNISS AVE S
LUVERNE, MN 56156
(507)283-9549

SHOPKO PHARMACY
405 W INTERSTATE DR
LUVERNE, MN 56156
(507)283-2156

WANZEK PHARMACY
12 W MAIN ST
MADELIA, MN 56062
(507)642-3218

THRIFTY WHITE DRUG
205 6TH AVE
MADISON, MN 56256
(320)598-3864

THRIFTY WHITE DRUG
113 N MAIN ST
MAHNOMEN, MN 56557
(218)935-2525

CUB
1800 MADISON AVE
MANKATO, MN 56001
(507)625-1241

CUB
1200 S RIVERFRONT DR
MANKATO, MN 56001
(507)345-5066

CVS
1175 MADISON AVE
MANKATO, MN 56001
(507)625-1791

CVS
1610 MONKS AVE
MANKATO, MN 56001
(507)625-1553

HEALTH SERVICES PHARMACY
21 CARKOSKI COMMONS
MANKATO, MN 56001
(507)389-2483

HY-VEE PHARMACY
410 S RIVER FRONT DR
MANKATO, MN 56001
(507)345-5091

HY-VEE PHARMACY
2010 ADAMS ST
MANKATO, MN 56001
(507)625-7565

MANKATO CLINIC
1230 E MAIN ST
MANKATO, MN 56001
(952)653-2568

MANKATO CLINIC ON ADAMS STREET
1809 ADAMS ST
MANKATO, MN 56001
(952)653-2568

MANKATO CLINIC WICKERSHAM
1421 PREMIER DR
MANKATO, MN 56001
(952)653-2568

SHOPKO PHARMACY
1850 E MADISON AVE
MANKATO, MN 56001
(507)387-6515

TARGET PHARMACY
1850 ADAMS ST
MANKATO, MN 56001
(507)625-9009

WAL-MART
1881 MADISON AVE
MANKATO, MN 56001
(507)625-1660

WAL-MART
1831 MADISON AVE
MANKATO, MN 56001
(507)387-4205

BYERLY'S PHARMACY
12880 ELM CREEK BLVD N
MAPLE GROVE, MN 55369
(763)420-3005

COSTCO
11330 FOUNTAINS DR N
MAPLE GROVE, MN 55369
(763)494-8059

CUB PHARMACY
8150 WEDGEWOOD LN
MAPLE GROVE, MN 55369
(763)494-8357

CVS
6300 WEDGWOOD RD
MAPLE GROVE, MN 55311
(763)551-1215

FAIRVIEW PHARMACY MAPLE GROVE
14500 99TH AVE N
MAPLE GROVE, MN 55369
(763)898-1800

MAPLE GROVE HOSPITAL
9875 HOSPITAL DR
MAPLE GROVE, MN 55369
(952)653-2568

NORTH MEMORIAL PHARMACY
9825 HOSPITAL DR STE 100
MAPLE GROVE, MN 55369
(763)581-9200

PARK NICOLLET PHCY MAPLE GROVE
15800 95TH AVE N
MAPLE GROVE, MN 55369
(952)993-2200

RAINBOW FOODS PHARMACY
16401 COUNTY RD 30
MAPLE GROVE, MN 55311
(763)416-1563

SAM'S CLUB
16701 94TH AVE N
MAPLE GROVE, MN 55311
(763)416-5930

SOUTH LAKE PEDIATRICS
12000 ELM CREEK BLVD N
MAPLE GROVE, MN 55369
(952)653-2568

THRIFTY WHITE DRUG
6901 E FISH LAKE RD
MAPLE GROVE, MN 55369
(763)463-4400

WAL-MART
9451 DUNKIRK LANE NO
MAPLE GROVE, MN 55311
(763)416-2300

COSTCO
1431 BEAM AVE
MAPLEWOOD, MN 55109
(612)486-1747

CUB
2390 WHITE BEAR AVE N
MAPLEWOOD, MN 55109
(651)777-3113

CUB
100 COUNTY ROAD B W
MAPLEWOOD, MN 55117
(651)489-6271

CVS
2196 WHITE BEAR AVE N
MAPLEWOOD, MN 55109
(651)704-0322

GUERTIN PHARMACY
21 CENTURY AVE S
MAPLEWOOD, MN 55119
(651)735-8781

HEALTHPARTNERS
2165 WHITE BEAR AVE N
MAPLEWOOD, MN 55109
(651)523-9820

MN CANCER CARE PHARMACY
1580 BEAM AVE
MAPLEWOOD, MN 55109
(651)255-8480

HY-VEE PHARMACY
1240 E COLLEGE DR
MARSHALL, MN 56258
(507)537-1230

HY-VEE PHARMACY
900 E MAIN ST
MARSHALL, MN 56258
(507)532-2556

KMART PHARMACY
1001 N HIGHWAY 23 BYP
MARSHALL, MN 56258
(507)532-4379

SHOPKO PHARMACY
1200 SUSAN DR
MARSHALL, MN 56258
(507)537-9650

THRIFTY WHITE DRUG
321 W MAIN ST
MARSHALL, MN 56258
(507)532-5754

WAL-MART
1221 E MAIN ST
MARSHALL, MN 56258
(507)532-9150

THRIFTY WHITE PHARMACY
241 W HIGHWAY 210
MCGREGOR, MN 55760
(218)768-4165

TARGET PHARMACY
300 HIGHWAY 55
MEDINA, MN 55340
(763)852-0007

COBORN'S PHARMACY
105 E MAIN ST
MELROSE, MN 56352
(320)256-4452

MELROSE PHARMACY
611 W MAIN ST
MELROSE, MN 56352
(320)256-7292

MEDICINE SHOPPE PHARMACY
750 MAIN ST STE 103
MENDOTA HEIGHTS, MN 55118
(651)455-6873

Minnesota Providers

Participating Pharmacies

FAIRVIEW NORTHLAND PHCY-MILACA
115 2ND AVE SW
MILACA, MN 56353
(320)983-3191

THRIFTY WHITE DRUG
127 2ND AVE SW
MILACA, MN 56353
(320)982-3300

ABBOTT NW HOSPITAL ED
800 E 28TH ST
MINNEAPOLIS, MN 55407
(612)863-4233

ALLINA HEALTH HEART HOSPITAL
920 E 28TH ST STE 92005
MINNEAPOLIS, MN 55407
(612)775-3100

ALLINA HEALTH MIDTOWN PHARMACY
2545 CHICAGO AVE STE 120
MINNEAPOLIS, MN 55404
(612)863-4190

ALLINA HEALTH PHILLIPS EYE
2215 PARK AVE S
MINNEAPOLIS, MN 55404
(612)775-8896

ALLINA HEALTH PIPER BLD PHCY
913 E 26TH ST
MINNEAPOLIS, MN 55404
(612)863-5370

BANADIR PHARMACY
405 E LAKE ST
MINNEAPOLIS, MN 55408
(612)825-1669

CHILDRENS HOSP AND CLINICS
2525 CHICAGO AVE
MINNEAPOLIS, MN 55404
(612)813-6210

CHILDREN'S HOSPITAL AND CLINIC
2530 CHICAGO AVE
MINNEAPOLIS, MN 55404
(612)813-7290

CUB
5937 NICOLLET AVE
MINNEAPOLIS, MN 55419
(612)866-9921

CUB
2850 26TH AVE S
MINNEAPOLIS, MN 55406
(612)721-5840

CUB
701 W BROADWAY AVE
MINNEAPOLIS, MN 55411
(612)302-8740

CVS
1110 HENNEPIN AVE
MINNEAPOLIS, MN 55403
(612)338-5867

CVS
1010 W LAKE ST
MINNEAPOLIS, MN 55408
(612)822-1297

CVS
2001 NICOLLET AVE
MINNEAPOLIS, MN 55404
(612)872-2656

CVS
3655 CENTRAL AVE NE
MINNEAPOLIS, MN 55418
(612)789-2460

CVS
2426 W BROADWAY AVE
MINNEAPOLIS, MN 55411
(612)287-0140

CVS
949 PORTLAND AVE
MINNEAPOLIS, MN 55404
(612)332-9647

CVS
316 15TH AVE SE
MINNEAPOLIS, MN 55414
(612)331-3252

CVS
880 WASHINGTON AVE SE
MINNEAPOLIS, MN 55414
(612)331-4240

DEGDEG'S CAREPOINT PHARMACY
2711 E FRANKLIN AVE
MINNEAPOLIS, MN 55406
(612)341-2273

FAIRVIEW HIAWATHA PHARMACY
3809 S 42ND AVE
MINNEAPOLIS, MN 55406
(612)728-7180

FAIRVIEW HOME INFUSION
711 KASOTA AVE SE STE B
MINNEAPOLIS, MN 55414
(651)672-2233

FAIRVIEW NORTHEAST PHARMACY
2847 JOHNSON ST NE
MINNEAPOLIS, MN 55418
(612)789-7277

FAIRVIEW PHARMACY
425 E RIVER RD UNIT KE
MINNEAPOLIS, MN 55455
(612)273-6212

FAIRVIEW PHCY SMILEY'S CLINIC
2020 E 28TH ST
MINNEAPOLIS, MN 55407
(612)672-4020

FAIRVIEW PHRMCY UNIV VILLAGE
2545 UNIVERSITY AVE SE
MINNEAPOLIS, MN 55414
(612)672-1430

FAIRVIEW RIVERSIDE MED CTR
2450 RIVERSIDE AVE
MINNEAPOLIS, MN 55082
(612)672-4200

FAIRVIEW RIVERSIDE PHARMACY
606 24TH AVE S
MINNEAPOLIS, MN 55454
(612)672-7507

FAIRVIEW SPECIALTY SVCS PHCY
711 KASOTA AVE SE
MINNEAPOLIS, MN 55414
(612)672-5260

FAIRVIEW UNIV CLINIC PHCY
516 DELAWARE ST SE
MINNEAPOLIS, MN 55455
(612)626-2828

FAIRVIEW UNIV DISCHARGE PHCY
500 HARVARD ST SE
MINNEAPOLIS, MN 55455
(612)273-2121

FAIRVIEW UNIV MASONIC PHARMACY
424 HARVARD ST SE STE 300
MINNEAPOLIS, MN 55455
(612)626-6429

HCMC P1 PHARMACY
701 PARK AVE S
MINNEAPOLIS, MN 55415
(612)873-3220

HEALTHPARTNERS
2220 RIVERSIDE AVE
MINNEAPOLIS, MN 55454
(612)341-5103

HIKMA PHARMACY
615 CEDAR AVE S
MINNEAPOLIS, MN 55454
(612)315-3678

KMART PHARMACY
10 W LAKE ST
MINNEAPOLIS, MN 55408
(612)827-5309

LAKE CEDAR PHARMACY
2423 E FRANKLIN AVE
MINNEAPOLIS, MN 55406
(512)353-5297

LUNDS PHARMACY
55 UNIVERSITY AVE SE
MINNEAPOLIS, MN 55414
(612)548-3835

NORTH POINT HLTH WELLNESS CTR
1313 N PENN AVE
MINNEAPOLIS, MN 55411
(612)543-2533

NORTHSIDE COMMUNITY HEALTHMART
1501 LOWRY AVE N
MINNEAPOLIS, MN 55411
(612)345-7842

PARK NICOLLET PHCY MINNEAPOLIS
2001 BLAISDELL AVE S
MINNEAPOLIS, MN 55404
(952)993-8004

PHARMA LIFE MINNESOTA
1200 NICOLLET MALL
MINNEAPOLIS, MN 55403
(612)354-3400

RAINBOW FOODS PHARMACY
1540 NEW BRIGHTON BLVD
MINNEAPOLIS, MN 55413
(612)788-4246

RAINBOW FOODS PHARMACY
1104 LAGOON AVE
MINNEAPOLIS, MN 55408
(612)821-0547

ROSS WEST BANK PHARMACY
327 CEDAR AVE S
MINNEAPOLIS, MN 55454
(612)333-6328

SCHNEIDER DRUG
3400 UNIVERSITY AVE SE
MINNEAPOLIS, MN 55414
(612)379-7232

TARGET PHARMACY
900 NICOLLET MALL
MINNEAPOLIS, MN 55403
(612)338-5215

TARGET PHARMACY
100 NICOLLET MALL PHARMACY
MINNEAPOLIS, MN 55403
(612)354-5914

TARGET PHARMACY
1650 NEW BRIGHTON BLVD
MINNEAPOLIS, MN 55413
(612)781-7746

TARGET PHARMACY
2500 E LAKE ST
MINNEAPOLIS, MN 55406
(612)721-1611

BYERLY'S PHARMACY
13081 RIDGEDALE DR
MINNETONKA, MN 55305
(952)417-0322

CUB
4801 COUNTY ROAD 101
MINNETONKA, MN 55345
(952)935-1053

PARK NICOLLET PHCY CARLSON
15111 TWELVE OAKS CTR DR
MINNETONKA, MN 55305
(952)993-4643

SOUTH LAKE PEDIATRICS
6060 CLEARWATER DR
MINNETONKA, MN 55343
(952)653-2568

SOUTH LAKE PEDS
17705 HUTCHINS DR
MINNETONKA, MN 55345
(952)401-8300

TARGET PHARMACY
13201 RIDGEDALE DR
MINNETONKA, MN 55305
(952)542-8266

TARGET PHARMACY
4802 HIGHWAY 101
MINNETONKA, MN 55345
(952)401-3814

COBORNS PHARMACY
1409 E HIGHWAY 7
MONTEVIDEO, MN 56265
(320)269-0940

THRIFTY WHITE DRUG
1234 E HIGHWAY 7
MONTEVIDEO, MN 56265
(320)269-6412

WAL-MART
2202 E HWY 7
MONTEVIDEO, MN 56265
(320)269-5496

HERRMANN THRIFTY WHITE
120 1ST ST S
MONTGOMERY, MN 56069
(507)364-7717

CENTRACARE HEALTH - MONTICELLO
1013 HART BLVD
MONTICELLO, MN 55362
(763)271-2251

CUB
216 7TH ST W
MONTICELLO, MN 55362
(763)295-6159

MONTICELLO BIG LAKE COMM HOSP
1013 HART BLVD
MONTICELLO, MN 55362
(763)295-2945

TARGET PHARMACY
1447 E 7TH ST
MONTICELLO, MN 55362
(763)271-1101

WAL-MART
9320 CEDAR ST
MONTICELLO, MN 55362
(763)295-9813

7 DAY CLINIC
720 MAIN AVE
MOORHEAD, MN 56560
(952)653-2568

CASH WISE PHARMACY
3300 HIGHWAY 10 E
MOORHEAD, MN 56560
(218)236-0345

CVS
822 30TH AVE S
MOORHEAD, MN 56560
(218)236-0807

HENDRIX HEALTH CENTER PHCY
1308 9TH AVE S
MOORHEAD, MN 56563
(218)477-5875

KMART PHARMACY
3000 HIGHWAY 10 E
MOORHEAD, MN 56560
(218)236-5267

MEDICAL PHARMACY MOORHEAD
101 S 11TH ST S
MOORHEAD, MN 56560
(218)233-7365

MOORHEAD DRUG CO
420 CENTER AVE STE 12
MOORHEAD, MN 56560
(218)233-1529

SANFORD PHARMACY MOORHEAD
1301 S 8TH ST
MOORHEAD, MN 56560
(701)234-3250

SUN MART PHARMACY
2605 8TH ST S
MOORHEAD, MN 56560
(218)291-0242

TARGET PHARMACY
3301 HIGHWAY 10 E
MOORHEAD, MN 56560
(218)233-2953

THRIFTY WHITE DRUG
4570 COUNTY HWY 61
MOOSE LAKE, MN 55767
(218)485-2111

Minnesota Providers

Participating Pharmacies

THRIFTY WHITE DRUG
441 N ARROWHEAD LN
MOOSE LAKE, MN 55767
(218)485-4401

COBORNS PHARMACY
710 FRANKIE LN
MORA, MN 55051
(320)679-2363

SHOPKO PHARMACY
340 HIGHWAY 65 S
MORA, MN 55051
(320)679-5115

CITY CENTER DRUG
618 ATLANTIC AVE
MORRIS, MN 56267
(320)589-1100

SHOPKO PHARMACY
116 STATE HWY 28
MORRIS, MN 56267
(320)589-0420

THRIFTY WHITE DRUG
533 ATLANTIC AVE
MORRIS, MN 56267
(320)589-4550

LONGBELLA DRUG-MOTLEY
1233 HIGHWAY 10 S
MOTLEY, MN 56466
(218)352-6337

CROSSTOWN DRUG
8400 CORAL SEA ST NE
MOUNDS VIEW, MN 55112
(763)780-0218

CVS
2800 HIGHWAY 10 NE
MOUNDS VIEW, MN 55112
(763)780-1549

RX EXPRESS
8400 CORAL SEA ST NE
MOUNDS VIEW, MN 55112
(763)780-0218

PETERSON DRUG AND GIFTS
1007 3RD AVE
MOUNTAIN LAKE, MN 56159
(507)427-2707

CUB
2600 RICE CREEK RD
NEW BRIGHTON, MN 55112
(651)631-8202

FAIRVIEW NEW BRIGHTON PHARMACY
1151 SILVER LAKE RD
NEW BRIGHTON, MN 55112
(651)746-2580

GENOA HEALTHCARE
1900 SILVER LAKE RD NW
NEW BRIGHTON, MN 55112
(651)583-7097

MERWIN IV AND SPECIALTY
1811 OLD HIGHWAY 8 NW STE C
NEW BRIGHTON, MN 55112
(651)604-5490

CVS
7901 BASS LAKE RD
NEW HOPE, MN 55428
(763)257-0130

CVS PHARMACY
7932 27TH AVE N
NEW HOPE, MN 55427
(763)544-3338

ST THERESE PHARMACY
8000 BASS LAKE RD STE 200A
NEW HOPE, MN 55428
(763)531-5005

CASH WISE CLINIC PHARMACY
600 PETERSON PKWY
NEW LONDON, MN 56273
(320)354-3998

COBORNS PHARMACY
200 ALTON AVE SE
NEW PRAGUE, MN 56071
(952)758-3132

DRUG EXPRESS VARIETY GALORE
1101 1ST ST NE
NEW PRAGUE, MN 56071
(952)758-5262

MAYO CLIN HLTH SYS NEW PRAGUE
301 2ND ST NE
NEW PRAGUE, MN 56071
(952)758-4431

NEW RICHLAND DRUG
112 S BROADWAY AVE S
NEW RICHLAND, MN 56072
(507)463-3714

ALLINA HEALTH NEW ULM PHCY
1217 8TH ST N STE 1010
NEW ULM, MN 56073
(507)217-5808

CASH WISE PHARMACY
1220 WESTRIDGE RD
NEW ULM, MN 56073
(507)354-2511

HY-VEE PHARMACY
2015 S BROADWAY ST
NEW ULM, MN 56073
(507)354-9833

NEW ULM MEDICAL CENTER
1324 N 5TH ST
NEW ULM, MN 56073
(507)233-1000

WAL-MART
1720 WESTRIDGE RD
NEW ULM, MN 56073
(507)354-0912

SEIP DRUG
99 MILLER ST
NEW YORK MILLS, MN 56567
(218)385-3360

NEWPORT DRUGS
1644 HASTINGS AVE
NEWPORT, MN 55055
(651)459-9553

GUIDE POINT PHARMACY
25527 MAIN ST
NISSWA, MN 56468
(218)963-7525

COUNTRY VALU SNYDER DRUG
6445 MAIN ST
NORTH BRANCH, MN 55056
(651)674-7177

FAIRVIEW NORTH BRANCH
5366 386TH ST NE
NORTH BRANCH, MN 55056
(651)674-6800

SHOPKO PHARMACY
5630 ST CROIX TRL
NORTH BRANCH, MN 55056
(651)674-9956

NORTH MANKATO FAMILY PRACTICE
1575 LOOKOUT DR
NORTH MANKATO, MN 56003
(952)653-2568

POLAR PHCY AND MED SUPPLIES
2564 E 7TH AVE
NORTH SAINT PAUL, MN 55109
(651)770-6606

CUB
2423 HIGHWAY 3 S
NORTHFIELD, MN 55057
(507)664-9029

ECONOFOODS PHARMACY
603 DIVISION ST
NORTHFIELD, MN 55057
(507)645-4489

NORTHFIELD HOSPITAL
2000 NORTH AVE
NORTHFIELD, MN 55057
(507)646-1000

NORTHFIELD PHARMACY
601 WATER ST S
NORTHFIELD, MN 55057
(507)663-0344

STERLING
700 DIVISION ST S
NORTHFIELD, MN 55057
(507)645-4455

TARGET PHARMACY
2323 HIGHWAY 3 S
NORTHFIELD, MN 55057
(507)403-4014

MARSDEN PHARMACY
402 FAXON RD
NORWOOD, MN 55368
(952)467-2100

WAL-MART
5815 NORELL AVE
OAK PARK HEIGHTS, MN 55082
(651)439-7630

KMART PHARMACY
7191 10TH ST N
OAKDALE, MN 55128
(651)739-7491

RAINBOW FOODS PHARMACY
7053 10TH ST N
OAKDALE, MN 55128
(651)739-6247

TARGET PHARMACY
7900 32ND ST N
OAKDALE, MN 55128
(651)855-0991

OLIVIA DRUG
102 9TH ST S
OLIVIA, MN 56277
(320)523-1630

SNYDER DRUG
801 E DUPUE AVE
OLIVIA, MN 56277
(320)523-2110

ONAMIA DRUG
516 MAIN ST
ONAMIA, MN 56359
(320)532-3633

CARTWRIGHT DRUG
147 2ND ST NW
ORTONVILLE, MN 56278
(320)839-6102

LIEBE DRUG
146 2ND ST NW
ORTONVILLE, MN 56278
(320)839-3825

THRIFTY WHITE DRUG
200 CENTRAL AVE
OSAKIS, MN 56360
(320)859-2161

TARGET PHARMACY
15300 GROVE CIR N
OSSEO, MN 55369
(763)447-2507

TARGET PHARMACY
15800 87TH ST NE
OTSEGO, MN 55330
(763)252-1316

SEIP DRUG
320 MN HIGHWAY 78 N
OTTERTAIL, MN 56571
(218)367-2196

ALLINA HEALTH OWATONNA PHCY
2250 26TH ST NW STE 1001
OWATONNA, MN 55060
(507)977-2020

CASH WISE PHARMACY
495 W NORTH ST
OWATONNA, MN 55060
(507)451-7886

GENOA HEALTHCARE
610 FLORENCE AVE STE 123
OWATONNA, MN 55060
(507)413-7752

HY-VEE PHARMACY
1620 S CEDAR AVE
OWATONNA, MN 55060
(507)451-0179

OWATONNA HOSPITAL
903 S OAK ST
OWATONNA, MN 55060
(507)451-3850

STERLING DRUG
410 HOFFMAN DR
OWATONNA, MN 55060
(507)451-0240

TARGET PHARMACY
301 PARK DR
OWATONNA, MN 55060
(507)451-1771

WAL-MART
1130 W FRONTAGE RD
OWATONNA, MN 55060
(507)451-3323

COBORNS PHARMACY
209 W 1ST ST
PARK RAPIDS, MN 56470
(218)732-0836

ST JOSEPH'S AREA HEALH SRVS
600 PLEASANT AVE
PARK RAPIDS, MN 56470
(218)732-3311

THE PHARMACY SHOPPE
100 8TH ST E
PARK RAPIDS, MN 56470
(218)732-3351

WAL-MART
1303 CHARLES ST
PARK RAPIDS, MN 56470
(218)732-0329

TRUMM DRUG
114 E S00 ST
PARKERS PRAIRIE, MN 56361
(218)338-2661

CENTRACARE HEALTH-PAYNESVILLE
200 W 1ST ST
PAYNESVILLE, MN 56362
(320)243-7702

NUCARA PHARMACY
216 WASHBURNE AVE
PAYNESVILLE, MN 56362
(320)243-3781

PELICAN HEALTH MART DRUG
11 N BROADWAY
PELICAN RAPIDS, MN 56572
(218)863-1441

LAKES AREA PHARMACY
30503 STATE HWY 371
PEQUOT LAKES, MN 56472
(218)568-5884

MEMORIAL HOSPITAL PHARMACY
1000 CONEY ST WEST
PERHAM, MN 56573
(218)347-1580

PERHAM HEALTH PHARMACY
1000 CONEY STREET
PERHAM, MN 56573
(218)347-1570

SEIP DRUG
211 MARKET DR
PERHAM, MN 56573
(218)346-3380

SHOPKO PHARMACY
300 JAKE ST SE
PERHAM, MN 56573
(218)346-7751

WHITE DRUG
125 1ST AVE S
PERHAM, MN 56573
(218)346-4840

THRIFTY WHITE PHARMACY
112 MAIN ST S STE A
PIERZ, MN 56364
(320)468-2072

SHOPKO PHARMACY
100 EVERGREEN SQ SW
PINE CITY, MN 55063
(320)629-3003

WAL-MART
950 11TH ST SW
PINE CITY, MN 55063
(320)629-6225

Minnesota Providers

Participating Pharmacies

PINE ISLAND PHARMACY
111 COUNTY ROAD 11 NW
PINE ISLAND, MN 55963
(507)356-8343

LAKES AREA PHARMACY
417 BARCLAY AVE
PINE RIVER, MN 56474
(218)587-3222

A AND S DRUGS
101 W MAIN ST
PIPESTONE, MN 56164
(507)825-3100

COBORN'S PHARMACY
1106 8TH ST SW
PIPESTONE, MN 56164
(507)825-0091

SHOPKO PHARMACY
1002 7TH ST SE
PIPESTONE, MN 56164
(507)825-6517

SNYDER DRUG
802 8TH AVE SE
PIPESTONE, MN 56164
(507)825-4259

PLAINVIEW PHARMACY
245 1ST ST SW
PLAINVIEW, MN 55964
(507)534-3815

ALLINA HEALTH WESTHEALTH PHCY
2855 CAMPUS DR
PLYMOUTH, MN 55441
(763)577-7007

CUB
3550 VICKSBURG LN N
PLYMOUTH, MN 55447
(763)553-2627

CUB
4445 N NATHAN LN
PLYMOUTH, MN 55442
(763)557-0377

CVS
4140 COUNTY ROAD 101 N
PLYMOUTH, MN 55446
(763)478-4612

LUNDS PHARMACY
3455 VICKSBURG LN N
PLYMOUTH, MN 55447
(763)553-1248

RAINBOW FOODS PHARMACY
10200 6TH AVE N
PLYMOUTH, MN 55441
(763)546-2311

RAINBOW FOODS PHARMACY
16705 COUNTY ROAD 24
PLYMOUTH, MN 55447
(763)559-7591

TARGET PHARMACY
4175 VINEWOOD LN N
PLYMOUTH, MN 55442
(763)553-1757

HAUGAN'S PHARMACY
136 MAIN ST SE
PRESTON, MN 55965
(507)765-2156

COBORNS PHARMACY
1100 7TH AVE S
PRINCETON, MN 55371
(763)389-8421

FAIRVIEW NORTHLAND PHCY PRNCTN
919 NORTHLAND DR
PRINCETON, MN 55371
(763)389-6622

FAIRVIEW PHARMACY PRINCETON
911 NORTHLAND DR
PRINCETON, MN 55371
(763)389-6625

SHOPKO PHARMACY
705 NORTHLAND DR
PRINCETON, MN 55371
(763)389-9656

THRIFTY WHITE DRUG
115 RUM RIVER DR N
PRINCETON, MN 55371
(763)389-1411

WAL-MART
300 21ST AVE N
PRINCETON, MN 55371
(763)389-1148

FAIRVIEW PRIOR LAKE
4151 WILLOWWOOD ST SE
PRIOR LAKE, MN 55372
(952)447-9570

LTC RX PROVIDERS
220 3RD AVE
PROCTOR, MN 55810
(218)628-9368

COBORNS PHARMACY
7900 SUNWOOD DR NW
RAMSEY, MN 55303
(763)323-1004

THRIFTY WHITE DRUG
105 INTERNATIONAL DR
RED LAKE FALLS, MN 56750
(218)253-3480

ECONOFOODS PHARMACY
623 MAIN ST
RED WING, MN 55066
(651)388-3589

FAIRVIEW PHARMACY
701 FAIRVIEW BLVD
RED WING, MN 55066
(651)267-5785

MAYO CLINIC PHCY RED WING
701 HEWITT BLVD STE 2116
RED WING, MN 55066
(651)267-5785

TARGET PHARMACY
151 TYLER RD N
RED WING, MN 55066
(651)388-2433

WAL-MART
295 TYLER RD S
RED WING, MN 55066
(651)385-0594

GUIDE POINT PHARMACY
216 WASHINGTON ST S
REDWOOD FALLS, MN 56283
(507)637-3549

SWARD KEMP SNYDER DRUG
207 S WASHINGTON ST
REDWOOD FALLS, MN 56283
(507)637-2911

WAL-MART
1410 E BRIDGE ST
REDWOOD FALLS, MN 56283
(507)644-6000

THRIFTY WHITE DRUG
303 N MAIN ST
RENVILLE, MN 56284
(320)329-8308

CVS
6540 PENN AVE S
RICHFIELD, MN 55423
(612)866-3040

LUNDS PHARMACY
6228 PENN AVE S
RICHFIELD, MN 55423
(612)866-8362

RAINBOW FOODS PHARMACY
140 W 66TH ST
RICHFIELD, MN 55423
(612)866-1256

TARGET PHARMACY
6445 RICHFIELD PKWY
RICHFIELD, MN 55423
(612)252-0474

CVS
4152 LAKELAND AVE N
ROBBINSDALE, MN 55422
(763)535-2459

HHHCC ONCOLOGY PHARMACY
3435 W BROADWAY AVE
ROBBINSDALE, MN 55422
(763)581-2815

N MEMORIAL PHCY - ROBBINSDALE
3300 OAKDALE AVE N
ROBBINSDALE, MN 55422
(763)520-4953

NORTH MEMORIAL MEDICAL CENTER
3300 OAKDALE AVE N
ROBBINSDALE, MN 55422
(763)520-5542

BARLOW PLAZA
1315 6TH ST NW
ROCHESTER, MN 55901
(507)289-6368

CLINIC PHARMACY
210 9TH ST SE
ROCHESTER, MN 55904
(507)288-2483

COSTCO
2020 COMMERCE DR NW
ROCHESTER, MN 55901
(507)286-1870

CUB
1021 15TH AVE SE
ROCHESTER, MN 55904
(507)288-3234

EAGLE DRUG OF ROCHESTER
23 2ND ST SW
ROCHESTER, MN 55902
(507)289-3141

GUIDEPOINT PHARMACY
202 N BROADWAY
ROCHESTER, MN 55906
(507)288-6463

HUNT LTC PHARMACY
1518 N BROADWAY
ROCHESTER, MN 55906
(507)288-3831

HUNT SILVER LAKE DRUGS
1510 N BROADWAY
ROCHESTER, MN 55906
(507)289-3901

HY-VEE PHARMACY
500 37TH ST NW
ROCHESTER, MN 55901
(507)289-7408

HY-VEE PHARMACY
500 CROSSROADS DR SW
ROCHESTER, MN 55904
(507)280-9441

KMART PHARMACY
201 9TH ST SE
ROCHESTER, MN 55904
(507)281-3532

MARRIOTT PLAZA
101 1ST AVE SW
ROCHESTER, MN 55902
(507)289-0716

MAYO CLINIC PHARMACY
21 2ND ST SW
ROCHESTER, MN 55902
(507)284-2021

MAYO CLINIC PHARMACY BALDWIN
221 4TH AVE SW
ROCHESTER, MN 55902
(507)284-8880

MAYO CLINIC PHARMACY EISENBERG
201 W CENTER ST STE LO92
ROCHESTER, MN 55902
(507)266-7416

MAYO CLINIC PHARMACY NE
3041 STONEHEDGE DR NE
ROCHESTER, MN 55906
(507)538-8550

MAYO CLINIC PHARMACY NW
4111 HIGHWAY 52 N
ROCHESTER, MN 55901
(507)266-0966

MAYO CLINIC PHARMACY SUBWAY
200 1ST ST SW STE SL14
ROCHESTER, MN 55905
(507)284-2021

MAYO CLINIC PHCY MARY BRIGH
1216 2ND ST SW STE M600B
ROCHESTER, MN 55902
(507)284-1546

OLMSTED MED CTR NORTHWEST PHCY
5067 55TH ST NW
ROCHESTER, MN 55901
(507)281-7685

QOL MEDS
343 WOODLAKE DR SE
ROCHESTER, MN 55904
(507)226-9020

ROCHESTER HOME INFUSION
221 1ST AVE SW STE 105R
ROCHESTER, MN 55902
(507)316-0001

SAM'S CLUB
3410 NW 55TH ST
ROCHESTER, MN 55901
(507)292-5783

SHOPKO PHARMACY
2820 HIGHWAY 63 S
ROCHESTER, MN 55904
(507)281-0688

SHOPKO PHARMACY
3708 HIGHWAY 63 N
ROCHESTER, MN 55906
(507)281-0658

TARGET PHARMACY
4611 MAINE AVE SE
ROCHESTER, MN 55904
(507)206-5021

TARGET PHARMACY
3827 MARKETPLACE DR NW
ROCHESTER, MN 55901
(507)536-3898

WAL-MART
3400 N W 55TH ST
ROCHESTER, MN 55901
(507)280-7665

WAL-MART
25 25TH ST SE
ROCHESTER, MN 55904
(507)292-1475

WEBER AND JUDD NURSING RX
1814 15TH ST NW
ROCHESTER, MN 55901
(507)289-1666

CUB
13855 ROGERS DR
ROGERS, MN 55374
(763)428-6080

CVS
21455 JOHN MILLESS DR
ROGERS, MN 55374
(763)428-2629

TARGET PHARMACY
21615 S DIAMOND LAKE RD
ROGERS, MN 55374
(763)428-6392

MATTSON PHARMACY
111 MAIN AVE S
ROSEAU, MN 56751
(218)463-2465

SHOPKO PHARMACY
1087 3RD ST NW
ROSEAU, MN 56751
(218)463-2420

CUB
3784 150TH ST
ROSEMOUNT, MN 55068
(651)423-0316

CUB
2100 SNELLING AVE N
ROSEVILLE, MN 55113
(651)633-9720

GENOA HEALTHCARE
3101 OLD HIGHWAY 8 STE 203B
ROSEVILLE, MN 55113
(612)326-9225

RAINBOW FOODS PHARMACY
1201 LARPENTEUR AVE W
ROSEVILLE, MN 55113
(651)489-8620

Minnesota Providers

Participating Pharmacies

TARGET PHARMACY
1515 COUNTY ROAD B W
ROSEVILLE, MN 55113
(651)631-1450

FAIRVIEW LAKES PHCY RUSH CITY
780 W 4TH ST
RUSH CITY, MN 55069
(320)358-4757

STERLING
115 W JESSIE ST
RUSHFORD, MN 55971
(507)864-2153

STERLING LONG TERM CARE PHCY
120 W JESSIE ST
RUSHFORD, MN 55971
(507)864-3159

CUB
3930 SILVER LAKE RD
SAINT ANTHONY, MN 55421
(612)781-6405

UNITED COMMUNITY PHARMACY
2500 NEW BRIGHTON BLVD
SAINT ANTHONY, MN 55418
(763)417-8888

WAL-MART
3800 SILVER LAKE RD NE
SAINT ANTHONY, MN 55418
(612)788-1478

BROWNELL DRUG
401 W 4TH ST
SAINT CHARLES, MN 55972
(507)932-3160

CASH WISE PHARMACY
1001 4TH ST SE
SAINT CLOUD, MN 56304
(320)258-0155

CENTRACARE PHARMACY HEALTH PLZ
1900 CENTRACARE CIR
SAINT CLOUD, MN 56303
(320)229-4904

CENTRACARE PHARMACY NORTHWAY
1555 NORTHWAY DR STE 150
SAINT CLOUD, MN 56303
(320)240-3160

CENTRACARE PHCY AT ST CLOUD HS
1406 6TH AVE N
SAINT CLOUD, MN 56303
(320)255-5670

COBORNS PHARMACY
2118 8TH ST N
SAINT CLOUD, MN 56303
(320)255-0054

COBORNS PHARMACY
900 COOPER AVE S
SAINT CLOUD, MN 56301
(320)252-1515

CVS
2420 W DIVISION ST
SAINT CLOUD, MN 56301
(320)253-5366

GUARDIAN PHARMACY OF MINNESOTA
3601 18TH ST S STE 101
SAINT CLOUD, MN 56301
(855)502-1050

SHOPKO PHARMACY
501 HIGHWAY 10 SE
SAINT CLOUD, MN 56304
(320)253-5373

SHOPKO PHARMACY
4161 2ND ST S
SAINT CLOUD, MN 56301
(320)253-3280

SOUTHSIDE PHARMACY
1301 33RD ST S
SAINT CLOUD, MN 56301
(320)259-0000

ST CLOUD EYE CLINIC
2055 15TH ST N
SAINT CLOUD, MN 56303
(952)653-2568

ST CLOUD ST UNIV HLTH SVC PHCY
251 6TH ST S
SAINT CLOUD, MN 56301
(320)308-4852

TARGET PHARMACY
125 LINCOLN AVE SE
SAINT CLOUD, MN 56304
(320)654-0712

TARGET PHARMACY
4201 W DIVISION ST
SAINT CLOUD, MN 56303
(320)253-4646

WAL-MART
21 COUNTY RD
SAINT CLOUD, MN 56301
(320)259-6363

GOODRICH PHARMACY
23122 ST FRANCIS BLVD
SAINT FRANCIS, MN 55070
(763)753-0222

SHOPKO PHARMACY
301 1ST AVE S
SAINT JAMES, MN 56081
(507)375-8115

ST JAMES MEDICAL CENTER
1101 MOULTON AND PARSONS DR
SAINT JAMES, MN 56081
(507)375-3391

COBORNS
1500 ELM ST E
SAINT JOSEPH, MN 56374
(320)271-1135

BEST AID PHARMACY
4335 EXCELSIOR BLVD
SAINT LOUIS PARK, MN 55416
(952)922-4444

BYERLY'S PHARMACY
3777 PARK CENTER BLVD
SAINT LOUIS PARK, MN 55416
(952)929-2315

COSTCO
5801 16TH ST W
SAINT LOUIS PARK, MN 55426
(763)582-9602

CUB
3620 TEXAS AVE S
SAINT LOUIS PARK, MN 55426
(952)933-3177

CVS
4656 EXCELSIOR BLVD
SAINT LOUIS PARK, MN 55416
(952)929-0140

GENOA HEALTHCARE
1155 FORD RD STE C
SAINT LOUIS PARK, MN 55426
(612)284-2197

HEALTHPARTNERS
5100 GAMBLE DR STE 100
SAINT LOUIS PARK, MN 55416
(952)541-2644

METHODIST HOSPITAL PHARMACY
6500 EXCELSIOR BLVD
SAINT LOUIS PARK, MN 55426
(952)993-6016

PARK NICOLLET PHCY MEADOWBROOK
3931 LOUISIANA AVE S
SAINT LOUIS PARK, MN 55426
(952)993-5764

PARK NICOLLET PHCY ST LOUIS PK
3850 PARK NICOLLET BLVD
SAINT LOUIS PARK, MN 55416
(952)993-3148

RAINBOW FOODS PHARMACY
5370 16TH ST W
SAINT LOUIS PARK, MN 55416
(952)546-1951

SAM'S CLUB
3745 LOUISIANA AVE S
SAINT LOUIS PARK, MN 55426
(952)922-3942

TARGET PHARMACY
3601 HIGHWAY 100 S
SAINT LOUIS PARK, MN 55416
(952)926-8967

TARGET PHARMACY
8900 HIGHWAY 7
SAINT LOUIS PARK, MN 55426
(952)935-8407

CVS
600 CENTRAL AVE W
SAINT MICHAEL, MN 55376
(763)497-6632

ALLINA HEALTH RITCHIE PHARMACY
280 SMITH AVE N STE 120
SAINT PAUL, MN 55102
(651)241-6380

ALLINA HEALTH UNITED PHARMACY
333 SMITH AVE N
SAINT PAUL, MN 55102
(651)241-8849

BLOMBERG PHARMACY
1583 HAMLINE AVE N
SAINT PAUL, MN 55108
(651)646-9645

CAPITOL PHARMACY
580 RICE ST
SAINT PAUL, MN 55103
(651)292-9728

CAREPLUS CVS PHARMACY
3M CENTER BLDG 2242E
SAINT PAUL, MN 55144
(651)739-9028

CHILDREN'S HOSPITAL AND CLINIC
345 SMITH AVE N
SAINT PAUL, MN 55102
(651)220-6963

CUB
1177 CLARENCE ST
SAINT PAUL, MN 55106
(651)774-7772

CUB
1440 UNIVERSITY AVE W
SAINT PAUL, MN 55104
(651)646-8858

CUB
2197 HUDSON RD
SAINT PAUL, MN 55119
(651)501-4934

CVS
1040 GRAND AVE
SAINT PAUL, MN 55105
(651)224-2155

CVS
810 MARYLAND AVE E
SAINT PAUL, MN 55106
(651)774-1005

CVS
499 SNELLING AVE N
SAINT PAUL, MN 55104
(651)917-2001

EAST SIDE FAMILY CLINIC PHCY
860 ARCADE ST
SAINT PAUL, MN 55106
(651)793-2250

EXPRESS PHARMACY
995 UNIVERSITY AVE W
SAINT PAUL, MN 55104
(651)644-7566

FAIRVIEW HIGHLAND PK PHARMACY
2155 FORD PKWY
SAINT PAUL, MN 55116
(651)696-5020

GENOA HEALTHCARE
317 YORK AVE
SAINT PAUL, MN 55130
(651)771-0286

GENOA HEALTHCARE
144 WABASHA ST S
SAINT PAUL, MN 55107
(612)254-9505

GENOA HEALTHCARE MINNESOTA
800 TRANSFER RD STE 29
SAINT PAUL, MN 55114
(651)917-4029

GILLETTE CHLDRN'S SPEC HLTHCRE
200 UNIVERSITY AVE E
SAINT PAUL, MN 55101
(651)726-2890

HEALTHPARTNERS
451 DUNLAP ST N
SAINT PAUL, MN 55104
(651)999-4821

HEALTHPARTNERS COMO
2500 COMO AVE
SAINT PAUL, MN 55108
(651)641-6292

HEALTHPARTNERS SPECIALTY CTR
401 PHALEN BLVD
SAINT PAUL, MN 55130
(651)254-8281

HEALTHPARTNERS ST PAUL
205 WABASHA ST S
SAINT PAUL, MN 55107
(651)293-8316

KMART PHARMACY
245 MARYLAND AVE E
SAINT PAUL, MN 55117
(651)488-6781

LLOYD'S PHARMACY
720 SNELLING AVE N
SAINT PAUL, MN 55104
(651)645-8636

LUNDS PHARMACY
2128 FORD PKWY
SAINT PAUL, MN 55116
(651)251-3491

PHALEN FAMILY PHARMACY
1001 JOHNSON PKWY STE B23
SAINT PAUL, MN 55106
(651)209-9000

PLANNED PARENTHOOD
671 VANDALIA ST
SAINT PAUL, MN 55114
(651)696-5651

PRO PHARMACY
242 CLEVELAND AVE S
SAINT PAUL, MN 55105
(651)698-0825

RAINBOW FOODS PHARMACY
892 W ARCADE ST
SAINT PAUL, MN 55106
(651)771-0556

REGIONS HOSPITAL PHARMACY
640 JACKSON ST
SAINT PAUL, MN 55101
(651)254-9561

RX HMONG PHARMACY
391 MARYLAND AVE E
SAINT PAUL, MN 55130
(651)330-2241

SETZER PHARMACY
1685 RICE ST
SAINT PAUL, MN 55113
(651)488-0251

ST PAUL CORNER DRUG
240 SNELLING AVE S
SAINT PAUL, MN 55105
(651)698-8859

TARGET PHARMACY
1300 UNIVERSITY AVE W
SAINT PAUL, MN 55104
(651)646-8002

Minnesota Providers

Participating Pharmacies

TARGET PHARMACY
2199 HIGHWAY 36 E
SAINT PAUL, MN 55109
(651)779-6341

TARGET PHARMACY
1744 SUBURBAN AVE
SAINT PAUL, MN 55106
(651)778-0105

UNITED HOSPITAL PHARMACY
333 SMITH AVE N # 1793
SAINT PAUL, MN 55102
(651)241-8849

WAL-MART
1450 UNIVERSITY AVE W
SAINT PAUL, MN 55104
(651)644-4286

WAL-MART
1644 S ROBERT ST
SAINT PAUL, MN 55118
(651)453-9671

WEST SEVENTH PHARMACY
1106 7TH ST W
SAINT PAUL, MN 55102
(651)228-1493

WESTSIDE COMM HLTH SVCS PHCY
153 CESAR CHAVEZ ST
SAINT PAUL, MN 55107
(651)602-7589

ECONOFOODS PHARMACY
612 S MINNESOTA AVE
SAINT PETER, MN 56082
(507)931-5540

SHOPKO PHARMACY
1002 OLD MINNESOTA AVE
SAINT PETER, MN 56082
(507)931-4410

SODERLUND DRUG
201 S 3RD ST
SAINT PETER, MN 56082
(715)808-0873

PINE MEDICAL CENTER
109 COURT AVE S
SANDSTONE, MN 55072
(320)245-2212

THRIFTY WHITE DRUG
204 LUNDORFF DR
SANDSTONE, MN 55072
(320)245-5500

COBORNS PHARMACY
1725 PINE CONE RD S
SARTELL, MN 56377
(320)258-4942

COBORNS PHARMACY
707 1ST AVE N
SARTELL, MN 56377
(320)656-8888

COUNTRY STORE AND PHARMACY
520 1ST ST NE
SARTELL, MN 56377
(320)255-0801

HEALTHPARTNERS PHARMACY
2251 CONNECTICUT AVE S
SARTELL, MN 56377
(320)259-7321

SAM'S CLUB
207 COUNTY RD 120
SARTELL, MN 56377
(320)229-8795

COBORNS PHARMACY
214 12TH ST
SAUK CENTRE, MN 56378
(320)352-5280

WAL-MART
205 12TH ST S
SAUK CENTRE, MN 56378
(320)352-7943

COBORNS PHARMACY
110 1ST ST S
SAUK RAPIDS, MN 56379
(320)240-9777

VILLAGE PHARMACY AND GIFT
108 2ND AVE S
SAUK RAPIDS, MN 56379
(320)252-1303

CUB
14075 HIGHWAY 13 S
SAVAGE, MN 55378
(952)447-1611

RAINBOW FOODS PHARMACY
14100 HIGHWAY 13 S
SAVAGE, MN 55378
(952)226-1571

TARGET PHARMACY
14333 HIGHWAY 13 S
SAVAGE, MN 55378
(952)226-1442

CUB
1198 VIERLING DR E
SHAKOPEE, MN 55379
(952)445-6344

CVS
4050 DEAN LAKE BLVD
SHAKOPEE, MN 55379
(952)402-9039

SAM'S CLUB
8201 OLD CARRIAGE CT
SHAKOPEE, MN 55379
(952)496-2982

ST FRANCIS REGIONAL MED CTR
1455 SAINT FRANCIS AVE
SHAKOPEE, MN 55379
(952)403-3000

TARGET PHARMACY
1685 17TH AVE E
SHAKOPEE, MN 55379
(952)445-1727

WAL-MART
8101 OLD CARRIAGE CT
SHAKOPEE, MN 55379
(952)445-8058

TARGET PHARMACY
3800 N LEXINGTON AVE
SHOREVIEW, MN 55126
(651)486-0649

ESSENTIA HEALTH SILVER BAY
99 EDISON BLVD STE L
SILVER BAY, MN 55614
(218)226-3829

GUIDEPOINT PHARMACY #110
2010 JUNIPER AVE
SLAYTON, MN 56172
(507)873-2075

THRIFTY WHITE PHARMACY
2622 BROADWAY AVE
SLAYTON, MN 56172
(507)836-6702

RANDY'S FAMILY DRUG
121 1ST AVE S
SLEEPY EYE, MN 56085
(507)794-3631

PRO PHARMACY
102 5TH AVE S
SOUTH SAINT PAUL, MN 55075
(651)455-4140

STERLING
137 W MAIN ST
SPRING GROVE, MN 55974
(507)498-5509

SPRING PARK PHARMACY
4689 SHORELINE DR STE 100
SPRING PARK, MN 55384
(952)471-3784

VALLEY PHARMACY
501 N PARK DR
SPRING VALLEY, MN 55975
(507)346-7273

MAYO CLINIC HEALTH SYSTEM
625 N JACKSON AVE
SPRINGFIELD, MN 56087
(952)653-2568

THRIFTY WHITE
18 S MARSHALL AVE
SPRINGFIELD, MN 56087
(507)723-4313

WAL-MART
3601 2ND ST S
ST. CLOUD, MN 56301
(320)251-0996

LAKEWOOD HLTH SYS HOSP PHCY
49725 COUNTY 83
STAPLES, MN 56479
(218)894-8454

LONGBELLA DRUG
421 2ND AVE NE
STAPLES, MN 56479
(218)894-2242

LONGBELLA DRUG CLINIC
49725 COUNTY 83 STE 100
STAPLES, MN 56479
(218)894-8761

SAMUELSONS DRUG
118 W 5TH ST
STARBUCK, MN 56381
(320)239-2246

STEWARTVILLE PHARMACY
220 CENTER TOWN PLZ N
STEWARTVILLE, MN 55976
(507)533-6883

CUB
1801 MARKET DR
STILLWATER, MN 55082
(651)430-2362

LAKEVIEW COMMUNITY PHARMACY
1500 CURVE CREST BLVD W
STILLWATER, MN 55082
(651)430-4670

LAKEVIEW MEMORIAL HOSPITAL
927 W CHURCHILL ST
STILLWATER, MN 55082
(952)653-2568

LAKEVIEW OUTPATIENT PHARMACY
927 CHURCHILL ST
STILLWATER, MN 55082
(651)430-4563

LAKEVIEW PHARMACY
927 CHURCHILL ST W
STILLWATER, MN 55082
(651)430-4562

TARGET PHARMACY
2021 MARKET DR
STILLWATER, MN 55082
(651)439-0992

HUGO'S PHARMACY
215 PENNINGTON AVE
THIEF RIVER FALLS, MN 56701
(218)681-1515

NORTHWEST MEDICAL CENTER
120 LABREE AVE S
THIEF RIVER FALLS, MN 56701
(218)681-4240

SANFORD PHCY THIEF RIVER FALLS
1720 HIGHWAY 59 S STE 2
THIEF RIVER FALLS, MN 56701
(218)683-2725

THRIFTY WHITE DRUG
201 HORACE AVE N
THIEF RIVER FALLS, MN 56701
(218)681-2932

WAL-MART
1755 HWY 59 SE
THIEF RIVER FALLS, MN 56701
(218)683-3655

SCENIC RIVER HEALTH SERVICES
415 N 2ND ST STE 2
TOWER, MN 55790
(952)653-2568

JOHN'S RX DRUG
131 3RD ST
TRACY, MN 56175
(507)629-3800

TWIN VALLEY DRUG
120 MAIN AVE
TWIN VALLEY, MN 56584
(218)584-5377

ESSENTIA HEALTH TWO HARBORS
802 11TH ST STE C
TWO HARBORS, MN 55616
(218)834-7202

LAKE VIEW MEMORIAL HOSPITAL
325 11TH AVE
TWO HARBORS, MN 55616
(952)653-2568

LAKE VIEW PHARMACY
1010 4TH ST
TWO HARBORS, MN 55616
(218)834-7799

THRIFTY WHITE DRUG
183 N TYLER ST
TYLER, MN 56178
(507)247-5504

NORTHEST PEDIATRIC CLINIC
4520 CENTERVILLE RD
VADNAIS HEIGHTS, MN 55127
(651)426-1141

TARGET PHARMACY
975 COUNTY ROAD E E
VADNAIS HEIGHTS, MN 55127
(651)483-2776

WAL-MART
850 E COUNTY RD E
VADNAIS HEIGHTS, MN 55127
(651)486-7005

ESSENTIA HEALTH VIRGINIA PHCY
1101 9TH ST N
VIRGINIA, MN 55792
(218)749-7828

FAMILY DRUG MART
1400 S 13TH AVE
VIRGINIA, MN 55792
(218)749-8943

KMART PHARMACY
1401 12TH AVE S
VIRGINIA, MN 55792
(218)749-4014

TARGET PHARMACY
1001 13TH ST S
VIRGINIA, MN 55792
(218)741-6603

VIRGINIA REGIONAL MED CTR PHCY
901 9TH ST N
VIRGINIA, MN 55792
(218)749-9441

WHITE DRUG
306 CHESTNUT ST
VIRGINIA, MN 55792
(218)749-6333

ST ELIZABETHS HOSP PHARMACY
1200 GRANT BLVD W
WABASHA, MN 55981
(651)565-5527

ST ELIZABETH'S OUTPATIENT PHCY
1200 GRANT BLVD W FL 1
WABASHA, MN 55981
(651)565-5611

WABASHA PHARMACY
207 MAIN ST W
WABASHA, MN 55981
(651)565-3949

BECK PHARMACY
851 MARKETPLACE DR
WACONIA, MN 55387
(952)442-4407

RIDGEVIEW MEDICAL CENTER
500 S MAPLE ST
WACONIA, MN 55387
(952)442-2191

Minnesota Providers

Participating Pharmacies

TARGET PHARMACY
875 E MAIN ST
WACONIA, MN 55387
(952)442-9334

WACONIA PHARMACY
430 W HIGHWAY 5
WACONIA, MN 55387
(952)442-3274

THRIFTY WHITE PHARMACY
321 JEFFERSON ST N
WADENA, MN 56482
(218)631-4050

TRI COUNTY HOSPITAL
415 N JEFFERSON ST
WADENA, MN 56482
(952)653-2568

TRI COUNTY HOSPITAL PHARMACY
415 JEFFERSON ST N
WADENA, MN 56482
(218)631-7598

WAL-MART
100 JUNIPER AVE NW
WADENA, MN 56482
(218)631-1723

CASH WISE PHARMACY
113 S WAITE AVE
WAITE PARK, MN 56387
(320)259-1148

KMART PHARMACY
40 2ND ST S
WAITE PARK, MN 56387
(320)251-3069

THRIFTY WHITE DRUG
603 MINNESOTA AVE W
WALKER, MN 56484
(218)547-1016

THRIFTY WHITE DRUG
110 MICHIGAN AVE W STE C
WALKER, MN 56484
(218)547-4734

WARREN PHARMACY
103 W JOHNSON AVE
WARREN, MN 56762
(218)745-5481

THRIFTY WHITE PHARMACY
310 LAKE ST NW
WARROAD, MN 56763
(218)386-2050

HY-VEE PHARMACY
1230 N STATE ST
WASECA, MN 56093
(507)833-7007

THRIFTY WHITE DRUG
122 ELM AVE E
WASECA, MN 56093
(507)835-1610

WAL-MART
2103 STATE ST N
WASECA, MN 56093
(507)835-8184

WASECA MEDICAL CENTER
501 N STATE ST
WASECA, MN 56093
(507)835-1210

WATERTOWN PHARMACY
204 LEWIS AVE S
WATERTOWN, MN 55388
(952)955-2153

BERGS PHARMACY
103 3RD ST S
WATERVILLE, MN 56096
(507)362-8500

LUNDS PHARMACY
1151 WAYZATA BLVD E
WAYZATA, MN 55391
(952)473-1687

PARK NICOLLET PHCY WAYZATA
250 N CENTRAL AVE
WAYZATA, MN 55391
(952)993-8200

WELLS DRUG
36 S BROADWAY
WELLS, MN 56097
(507)553-3161

CUB
2001 S ROBERT ST
WEST SAINT PAUL, MN 55118
(651)451-1113

CVS
1471 ROBERT ST
WEST SAINT PAUL, MN 55118
(651)552-6029

KMART PHARMACY
50 SIGNAL HILL MALL
WEST SAINT PAUL, MN 55118
(651)457-3355

TARGET PHARMACY
1750 S ROBERT ST
WEST SAINT PAUL, MN 55118
(651)455-6626

TWIN CITY PAIN CENTERS
1099 ROBERT ST S # 100
WEST SAINT PAUL, MN 55118
(952)657-7822

THRIFTY WHITE DRUG
601 1ST AVE
WESTBROOK, MN 56183
(507)274-6114

WHEATON DRUG
1105 BROADWAY
WHEATON, MN 56296
(320)563-4151

CVS
2730 COUNTY RD E E
WHITE BEAR LAKE, MN 55110
(651)777-6816

CVS
4800 HIGHWAY 61 N
WHITE BEAR LAKE, MN 55110
(651)762-3864

HEALTHPARTNERS
1430 HIGHWAY 96 E
WHITE BEAR LAKE, MN 55110
(651)653-2175

MEDICINE CHEST PHARMACY
2187 4TH ST
WHITE BEAR LAKE, MN 55110
(651)429-5356

SAM'S CLUB
1850 BUERKLE RD
WHITE BEAR LAKE, MN 55110
(651)779-6710

WHITE BEAR HEALTH MART PHCY
2008 COUNTY ROAD E E
WHITE BEAR LAKE, MN 55110
(651)289-4300

CUB
1059 MEADOWLANDS DR
WHITE BEAR LK, MN 55127
(651)426-5006

CASH WISE CLINIC PHARMACY
101 WILLMAR AVE SW
WILLMAR, MN 56201
(320)214-6975

CASH WISE PHARMACY
1300 5TH ST SE
WILLMAR, MN 56201
(320)235-2506

CUB
2201 1ST ST S
WILLMAR, MN 56201
(320)214-8502

PRESCRIPTION CENTER
1110 S 1ST ST
WILLMAR, MN 56201
(320)235-2440

RICE MEMORIAL HOSPITAL PHCY
301 BECKER AVE SW
WILLMAR, MN 56201
(320)235-4543

TARGET PHARMACY
2505 1ST ST S
WILLMAR, MN 56201
(320)235-3026

THRIFTY WHITE DRUG
1600 1ST ST S
WILLMAR, MN 56201
(320)235-1930

TRUCARE PHARMACY
316 4TH ST SW STE 7
WILLMAR, MN 56201
(320)231-3655

WAL-MART
3031 1ST ST S
WILLMAR, MN 56201
(320)231-3313

LEWIS FAMILY DRUG
599 2ND AVE
WINDOM, MN 56101
(507)831-4161

SHOPKO PHARMACY
2155 1ST AVE
WINDOM, MN 56101
(507)831-0263

GOLTZ PHARMACY
274 E 3RD ST
WINONA, MN 55987
(507)452-2547

HY-VEE PHARMACY
1475 SERVICE RD
WINONA, MN 55987
(507)452-5254

KMART PHARMACY
1122 W HIGHWAY 61
WINONA, MN 55987
(507)454-6072

PARKVIEW PHARMACY
825 MANKATO AVE
WINONA, MN 55987
(507)454-4925

PARKVIEW PHARMACY AT WSU
117 W SANBORN ST
WINONA, MN 55987
(507)457-2245

SHOPKO PHARMACY
405 COTTONWOOD DR
WINONA, MN 55987
(507)452-1244

TARGET PHARMACY
860 MANKATO AVE
WINONA, MN 55987
(507)452-6308

WAL-MART
955 FRONTENAC DR
WINONA, MN 55987
(507)452-0615

WINONA HEALTH SERVICES
825 MANKATO AVE
WINONA, MN 55987
(952)653-2568

WINONA HEALTH SVCS CLINIC
859 MANKATO AVE
WINONA, MN 55987
(507)457-4156

KEAVENY DRUG
150 MAIN AVE W
WINSTED, MN 55395
(320)485-2555

GUIDEPOINT PHARMACY
112 E 2ND ST
WINTHROP, MN 55396
(507)647-8800

ALLINA HEALTH WOODBURY PHCY
8675 VALLEY CREEK RD
WOODBURY, MN 55125
(651)501-3140

CUB
8432 TAMARACK VLG
WOODBURY, MN 55125
(651)702-1032

CVS
8468 TAMARACK BAY
WOODBURY, MN 55125
(651)731-5177

CVS
2150 EAGLE CREEK LN
WOODBURY, MN 55125
(651)436-4732

GENOA HEALTHCARE
1811 WEIR DR STE 275
WOODBURY, MN 55125
(612)594-8178

HEALTHPARTNERS WOODBURY
8450 SEASONS PKWY
WOODBURY, MN 55125
(651)702-5308

SAM'S CLUB
9925 HUDSON RD
WOODBURY, MN 55125
(651)702-7980

TARGET PHARMACY
449 COMMERCE DR
WOODBURY, MN 55125
(651)239-1875

TARGET PHARMACY
7200 VALLEY CREEK PLZ
WOODBURY, MN 55125
(651)735-9517

WAL-MART
10240 HUDSON RD
WOODBURY, MN 55129
(651)735-5190

GUIDE POINT PHARMACY
607 10TH ST
WORTHINGTON, MN 56187
(507)372-7371

HY-VEE PHARMACY
1235 OXFORD ST
WORTHINGTON, MN 56187
(507)376-3812

SHOPKO PHARMACY
1755 N HUMISTON AVE
WORTHINGTON, MN 56187
(507)376-9309

STERLING DRUG
511 10TH ST
WORTHINGTON, MN 56187
(507)372-7533

STERLING LTC
511 10TH ST STE B
WORTHINGTON, MN 56187
(507)372-7533

WAL-MART
1055 RYAN RD
WORTHINGTON, MN 56187
(507)376-4080

FAIRVIEW LK PHARMACY-WYOMING
5200 FAIRVIEW BLVD
WYOMING, MN 55092
(651)982-7500

WYOMING DRUG
26710 FOREST BLVD
WYOMING, MN 55092
(651)462-2082

FAIRVIEW NORTHLAND PHCY-ZIMMER
25945 GATEWAY DR
ZIMMERMAN, MN 55398
(763)856-6940

ZUMBROTA MAIN STREET PHARMACY
370 MAIN ST
ZUMBROTA, MN 55992
(507)732-5311

ZUMBROTA PHARMACY
228 WEST AVE
ZUMBROTA, MN 55992
(507)732-7309

North Dakota Providers

Participating Pharmacies

ARTHUR DRUG
325 MAIN ST
ARTHUR, ND 58006
(701)967-8900

WHITE DRUG
109 W MAIN ST
ASHLEY, ND 58413
(701)288-3355

BEACH PHARMACY
180 S CENTRAL AVE
BEACH, ND 58621
(701)872-2800

BELCOURT DRUG
9838 43T AVE NE
BELCOURT, ND 58316
(701)477-0202

BEULAH DRUG
147 W MAIN ST
BEULAH, ND 58523
(701)873-5215

ARROWHEAD PLAZA DRUG
1116 N 3RD ST
BISMARCK, ND 58501
(701)223-8806

CENTER FOR FAMILY MEDICINE
701 E ROSSER AVE
BISMARCK, ND 58501
(701)751-6803

CHURCHILL PHARMACY
1190 W TURNPIKE AVE
BISMARCK, ND 58501
(701)224-0339

CVS
525 S 3RD ST
BISMARCK, ND 58504
(701)255-1335

CVS
1225 E CALGARY AVE
BISMARCK, ND 58503
(701)223-9323

DAKOTA PHARMACY
705 E MAIN AVE
BISMARCK, ND 58501
(701)255-1881

GATEWAY HEALTH MART PHARMACY N
3101 N 11TH ST
BISMARCK, ND 58503
(701)224-9521

GATEWAY HEALTH MART PHCY SOUTH
835 S WASHINGTON ST
BISMARCK, ND 58504
(701)223-1656

GATEWAY HM PHARMACY SUNRISE
4007 STATE ST STE L30
BISMARCK, ND 58503
(701)425-0789

HERITAGE PHARMACY
401 N 9TH ST
BISMARCK, ND 58501
(701)530-6050

HERITAGE PHARMACY EAST
1000 E ROSSER AVE
BISMARCK, ND 58501
(701)530-6311

HERITAGE PHARMACY GATEWAY
2700 STATE ST STE F13
BISMARCK, ND 58503
(701)530-5800

HOLIDAY PROFESSIONAL PHARMACY
1140 E BISMARCK EXPY
BISMARCK, ND 58504
(701)255-7220

MAYO PHARMACY
303 N 4TH ST
BISMARCK, ND 58501
(701)223-2425

MEDICINE SHOPPE PHARMACY
1304 E BLVD AVE
BISMARCK, ND 58501
(701)224-0175

NORTHBROOK DRUG
1929 N WASHINGTON ST STE C
BISMARCK, ND 58501
(701)258-1412

PROFESSIONAL PHARMACY
3124 COLORADO LN STE 400
BISMARCK, ND 58503
(701)223-6854

SANFORD RETAIL PHARMACY
300 N 7TH ST
BISMARCK, ND 58501
(701)323-6099

ST ALEXIUS COMMUNITY PHARMACY
900 E BROADWAY AVE
BISMARCK, ND 58501
(701)530-6906

WHITE DRUG
117 N 5TH ST
BISMARCK, ND 58501
(701)223-0936

THOMPSON DRUG
505 MAIN ST
BOTTINEAU, ND 58318
(701)228-2291

THE BOWMAN DRUG COMPANY
12 N MAIN ST
BOWMAN, ND 58623
(701)523-3223

NEUMANN DRUG
412 MAIN ST
CANDO, ND 58324
(701)968-3531

CARRINGTON DRUG
415 MAIN ST
CARRINGTON, ND 58421
(701)652-2521

CENTRAL PHARMACY
990 MAIN ST
CARRINGTON, ND 58421
(701)652-2651

CASSELTON HEALTH MART DRUG
622 FRONT ST
CASSELTON, ND 58012
(701)347-4281

WHITE DRUG
201 E 3RD AVE S
CAVALIER, ND 58220
(701)265-4744

ALMKLOVS PHARMACY
848 BURRELL AVE
COOPERSTOWN, ND 58425
(701)797-2414

J CO DRUG
120 N MAIN ST
CROSBY, ND 58730
(701)965-6671

BELL DRUG
323 5TH ST
DEVILS LAKE, ND 58301
(701)662-3022

CLINIC PHARMACY
1001 7TH ST NE
DEVILS LAKE, ND 58301
(701)662-4427

RAMSEY DRUG
401 COLLEGE DR S
DEVILS LAKE, ND 58301
(701)662-3117

WHITE DRUG
425 COLLEGE DR S STE 10
DEVILS LAKE, ND 58301
(701)662-6270

CLINIC PHARMACY
938 2ND AVE W
DICKINSON, ND 58601
(701)483-4401

GREENE DRUG
16 W VILLARD ST
DICKINSON, ND 58601
(701)225-5171

IRSFIELD PHARMACY PC
33 9TH ST W
DICKINSON, ND 58601
(701)483-4858

MEDICINE SHOPPE PHARMACY
1571 W VILLARD ST UNIT 1
DICKINSON, ND 58601
(701)227-8265

ND HEALTH MART PHARMACY
446 18TH ST W STE 2
DICKINSON, ND 58601
(701)225-4434

STEINER PHARMACY
352 1ST ST E STE C
DICKINSON, ND 58601
(701)227-0191

WHITE DRUG
1681 3RD AVE W
DICKINSON, ND 58601
(701)225-4421

DRAYTON DRUG
104 E HIGHWAY 66
DRAYTON, ND 58225
(701)454-3831

DUNSEITH DRUG
10 MAIN ST SW
DUNSEITH, ND 58329
(701)244-0202

EDGELEY PHARM STORE
509 MAIN ST
EDGELEY, ND 58433
(701)493-2810

ECONOMY DRUG
201 N MAIN ST
ELGIN, ND 58533
(701)584-2733

ELLENDALE PHARMACY
117 MAIN ST
ELLENDALE, ND 58436
(701)349-3390

ENDERLIN PHARMACY
308 RAILWAY ST
ENDERLIN, ND 58027
(701)437-2464

7 DAY CLINIC
1517 32ND AVE S
FARGO, ND 58103
(952)653-2568

7 DAY CLINIC
1100 19TH AVE N
FARGO, ND 58102
(952)653-2568

7 DAY CLINIC
4622 40TH AVE S
FARGO, ND 58104
(952)653-2568

CVS
2425 13TH AVE S
FARGO, ND 58103
(701)232-4872

CVS
1321 19TH AVE N
FARGO, ND 58102
(701)232-2720

DAKOTA CLINIC PHARMACY
1702 UNIVERSITY DR S
FARGO, ND 58103
(701)364-6179

FAMILY HEALTHCARE PHCY NDSU
301 N P AVE
FARGO, ND 58102
(701)271-1495

INHEALTH SPECIALTY PHARMACY
2345 25TH ST S STE C
FARGO, ND 58103
(701)365-6050

INNOVIS HEALTH
3000 32ND AVE SW
FARGO, ND 58104
(701)364-8000

LINSON PHARMACY
3175 25TH ST S
FARGO, ND 58103
(701)293-6022

MD PHARMACY
4101 13TH AVE S
FARGO, ND 58103
(701)364-5690

MEDICAL PHARMACY
100 S 4TH ST STE 104
FARGO, ND 58103
(701)237-0322

MEDICAL PHARMACY SOUTH
4151 45TH ST S
FARGO, ND 58104
(701)282-8075

MEDICINE SHOPPE PHARMACY
2800 BROADWAY N
FARGO, ND 58102
(701)293-0221

MEDICINE SHOPPE PHARMACY
1605 S UNIVERSITY DR
FARGO, ND 58103
(701)293-3060

METRO DRUG
123 BROADWAY N
FARGO, ND 58102
(701)232-6150

NORTHPORT DRUG
2522 BROADWAY N
FARGO, ND 58102
(701)235-5543

PRAIRIE PHARMACY
4731 13TH AVE S
FARGO, ND 58103
(701)373-0325

PRESCRIPTION CENTER PHARMACY
2701 13TH AVE S
FARGO, ND 58103
(701)234-3630

SANFORD PHARMACY BROADWAY
737 BROADWAY N
FARGO, ND 58102
(701)234-2416

SANFORD PHARMACY MILLS AVENUE
801 BROADWAY N
FARGO, ND 58102
(701)234-3330

SANFORD PHARMACY S UNIVERSITY
1720 S UNIVERSITY DR
FARGO, ND 58103
(701)234-3843

SOUTHPOINTE PHARMACY
2400 32ND AVE S
FARGO, ND 58103
(701)234-9912

THRIFTY DRUG
1521 S UNIVERSITY DR
FARGO, ND 58103
(701)232-8690

THRIFTY DRUG SOUTHGATE
1532 32ND AVE S
FARGO, ND 58103
(701)280-1929

WEST ACRES PHARMACY
3902 13TH AVE S STE 3706
FARGO, ND 58103
(701)282-0285

WHITE DRUG
201 UNIVERSITY DR S
FARGO, ND 58103
(701)239-3543

WHITE DRUG
712 38TH ST N STE A
FARGO, ND 58103
(701)893-9217

WHITE DRUG
708 38TH ST NW STE C
FARGO, ND 58102
(701)893-9050

WHITE DRUG
1401 33RD ST SW
FARGO, ND 58103
(701)235-5511

North Dakota Providers

Participating Pharmacies

NILLES DRUG
58 S MAIN ST
FESSENDEN, ND 58438
(701)547-3201

FORMAN DRUG
330 MAIN ST S
FORMAN, ND 58032
(701)724-6222

CHASE PHARMACY
21 N MAIN ST
GARRISON, ND 58540
(701)463-2242

GLEN ULLIN DRUG
113 S MAIN ST
GLEN ULLIN, ND 58631
(701)348-3303

GRAFTON DRUG
38 E 12TH ST
GRAFTON, ND 58237
(701)352-0831

WHITE DRUG
544 HILL AVE
GRAFTON, ND 58237
(701)352-1760

ALTRU CLINIC PHARMACY
1000 S COLUMBIA RD
GRAND FORKS, ND 58201
(701)772-4875

ALTRU CLINIC PHARMACY FMC
1380 S COLUMBIA RD
GRAND FORKS, ND 58201
(701)795-2020

ALTRU HEALTH SYSTEMS
1200 S COLUMBIA RD
GRAND FORKS, ND 58201
(952)653-2568

ALTRU RETAIL PHARMACY
1200 S COLUMBIA RD
GRAND FORKS, ND 58201
(701)780-3444

CVS
1950 32ND AVE S
GRAND FORKS, ND 58201
(701)746-8643

FAMILY MEDICINE RESIDENCY PHCY
725 HAMLINE ST
GRAND FORKS, ND 58203
(701)780-6870

MEDICAP PHARMACY
1395 S COLUMBIA RD STE C
GRAND FORKS, ND 58201
(701)746-1800

SKIP'S BUDGET DRUG
2015 LIBRARY CIR STE 102
GRAND FORKS, ND 58201
(701)772-4805

UNIV OF ND STUDENT HLTH PHCY
2891 2ND AVE STOP 9038
GRAND FORKS, ND 58202
(701)777-3965

WALLS HEALTH MART PHARMACY
4440 S WASHINGTON ST STE 101D
GRAND FORKS, ND 58201
(701)732-2900

WALLS MEDICINE CENTER
708 S WASHINGTON ST
GRAND FORKS, ND 58201
(701)746-0497

WHITE DRUG
2475 32ND AVE S STE 1
GRAND FORKS, ND 58201
(701)775-4209

HANKINSON DRUG
323 S MAIN AVE
HANKINSON, ND 58041
(701)242-7414

MEDICINE SHOPPE PHARMACY
722 LINCOLN AVE
HARVEY, ND 58341
(701)324-2295

SERVICE DRUG AND GIFT
815 LINCOLN AVE
HARVEY, ND 58341
(701)324-2227

HAZEN DRUG
30 MAIN RD E
HAZEN, ND 58545
(701)748-2312

WHITE DRUG
112 S MAIN ST
HETTINGER, ND 58639
(701)567-2533

HILLSBORO DRUG
13 N MAIN ST
HILLSBORO, ND 58045
(701)636-5231

MEDICINE SHOPPE PHARMACY
703 1ST AVE S
JAMESTOWN, ND 58401
(701)252-3002

ND STATE HOSPITAL PHARMACY
2605 CIRCLE DR
JAMESTOWN, ND 58401
(701)253-3868

WHITE DRUG
310 1ST AVE S
JAMESTOWN, ND 58401
(701)251-1432

WHITE DRUG
410 10TH ST SE STE 8
JAMESTOWN, ND 58401
(701)252-5980

WHITE DRUG
213 1ST AVE N
JAMESTOWN, ND 58401
(701)252-3181

KENMARE DRUG
109 1ST AVE NW
KENMARE, ND 58746
(701)385-4257

KILLDEER PHARMACY
14 CENTRAL AVE S
KILLDEER, ND 58640
(701)764-5093

LAKOTA DRUG AND GIFT
117 MAIN ST N
LAKOTA, ND 58344
(701)247-2781

LA MOURE DRUG STORE
100 1ST ST SW
LAMOURE, ND 58458
(701)883-5339

LANGDON COMMUNITY DRUG
805 3RD ST
LANGDON, ND 58249
(701)256-3330

LARIMORE DRUG AND GIFT
203 TOWNER AVE
LARIMORE, ND 58251
(701)343-2461

WHITE DRUG
121 N BROADWAY ST
LINTON, ND 58552
(701)254-5432

SHEYENNE VALLEY DRUG
407 MAIN ST
LISBON, ND 58054
(701)683-5282

WHITE DRUG
404 MAIN ST
LISBON, ND 58054
(701)683-4691

WHITE DRUG
108 CENTRAL AVE
MADDOCK, ND 58348
(704)438-2567

GATEWAY HEALTH MART PHARMACY
500 BURLINGTON ST SE
MANDAN, ND 58554
(701)667-1843

MEDICINE SHOPPE PHARMACY
116 2ND AVE NW
MANDAN, ND 58554
(701)663-1151

THRIFTY WHITE DRUG
511 1ST ST NW
MANDAN, ND 58554
(701)663-5188

WAL-MART
1000 OLD RED TRL NE
MANDAN, ND 58554
(701)354-6964

AASEN DRUG
15 E MAIN ST
MAYVILLE, ND 58257
(701)788-2552

B AND B NORTHWEST PHARMACY
20 BURDICK EXPY W
MINOT, ND 58701
(701)838-2213

CNTR FOR FAMILY MEDICINE PHCY
1201 11TH AVE SW
MINOT, ND 58701
(701)858-6755

CVS
1520 20TH AVE SW
MINOT, ND 58701
(701)852-4068

KEYCARE PHARMACY
400 BURDICK EXPY E STE
MINOT, ND 58701
(701)857-7900

MARKET PHARMACY
1930 S BROADWAY
MINOT, ND 58701
(701)839-8883

MEDICINE SHOPPE PHARMACY
1118 S BROADWAY
MINOT, ND 58701
(701)852-1524

TRINITY HOSPITAL PHARMACY
1 BURDICK EXPY W
MINOT, ND 58701
(952)653-2568

WHITE DRUG
2700 8TH STREET NW
MINOT, ND 58703
(701)852-0388

WHITE DRUG
1015 S BROADWAY STE 3
MINOT, ND 58701
(701)852-4181

WHITE DRUG
115 MAIN ST W
MOHALL, ND 58761
(701)756-6000

ECONOMY DRUG MOTT
216 BROWN AVE
MOTT, ND 58646
(701)824-2897

NAPOLEON DRUG
214 MAIN AVE
NAPOLEON, ND 58561
(701)754-2203

NEW ENGLAND DRUG
713 MAIN ST
NEW ENGLAND, ND 58647
(701)579-4130

CENTRAL PHARMACY
4 8TH ST N
NEW ROCKFORD, ND 58356
(701)947-5313

NEW SALEM PHARMACY
509 ASH AVE
NEW SALEM, ND 58563
(701)843-7563

LARSEN SERVICE DRUG
334 MAIN ST
NEW TOWN, ND 58763
(701)627-2410

PAUL BILDEN PHARMACY
10 N MAIN ST
NORTHWOOD, ND 58267
(701)587-5271

OAKES DRUG
422 MAIN AVE
OAKES, ND 58474
(701)742-2118

TARA'S THRIFTY WHITE PHARMACY
610 MAIN AVE
OAKES, ND 58474
(701)742-3824

YE OLDE MEDICINE CENTER
503 PARK ST W
PARK RIVER, ND 58270
(701)284-7676

ROCKVIEW PHARMACY
307 3RD ST NE
PARSHALL, ND 58770
(701)240-2226

COUNTRY DRUG STORE
116 NORTH AVE E
RICHARDTON, ND 58652
(701)974-3558

WHITE DRUG
208 MAIN ST
ROLETTE, ND 58366
(701)246-3600

ROLLA DRUG
117 MAIN AVE E
ROLLA, ND 58367
(701)477-3174

HEART OF AMERICA CLINIC PHCY
800 S MAIN AVE
RUGBY, ND 58368
(701)776-2531

WHITE DRUG
107 2ND ST SE
RUGBY, ND 58368
(701)776-5741

DAKOTA DRUG
107 S MAIN ST
STANLEY, ND 58784
(701)628-2255

TIOGA DRUG
106 N MAIN ST
TIOGA, ND 58852
(701)664-2116

TURTLE LAKE REXALL DRUG
218 MAIN ST
TURTLE LAKE, ND 58575
(701)448-2542

CENTRAL AVENUE PHARMACY
323 CENTRAL AVE N STE 101
VALLEY CITY, ND 58072
(701)845-5280

NUCARA PHARMACY
234 CENTRAL AVE N
VALLEY CITY, ND 58072
(701)845-2652

NUCARA PHARMACY LTC
979 CENTRAL AVE N
VALLEY CITY, ND 58072
(701)845-6885

VALLEY DRUG
239 2ND AVE NW
VALLEY CITY, ND 58072
(701)845-1763

WHITE DRUG
148 S CENTRAL AVE
VALLEY CITY, ND 58072
(701)845-1421

VELVA DRUG COMPANY
16 MAIN ST N
VELVA, ND 58790
(701)338-2911

CORNER DRUG STORE
619 DAKOTA AVE
WAHPETON, ND 58075
(701)642-5595

THRIFTY WHITE PHARMACY
387 11TH ST S OFC 2
WAHPETON, ND 58075
(701)642-2336

WAHPETON DRUG
508 DAKOTA AVE
WAHPETON, ND 58075
(701)642-9211

North Dakota Providers

Participating Pharmacies

WALHALLA PRESCRIPTION SHOP
1102 CENTRAL AVE
WALHALLA, ND 58282
(701)549-2661

CHASE DRUG STORE
703 MAIN AVE
WASHBURN, ND 58577
(701)462-8174

BARRETT HEALTH MART PHARMACY
145 N MAIN ST
WATFORD CITY, ND 58854
(701)842-3311

LARSEN SERVICE DRUG
244 N MAIN ST
WATFORD CITY, ND 58854
(701)444-2410

HEALTH CENTER PHARMACY
1401 13TH AVE E
WEST FARGO, ND 58078
(701)364-5800

RXCO PHARMACY
550 13TH AVE E
WEST FARGO, ND 58078
(701)373-0685

RXCO PHARMACY
550 13TH AVE E STE B
WEST FARGO, ND 58078
(701)373-0890

SKRIPTS PHARMACY
750 23RD AVE E
WEST FARGO, ND 58078
(701)281-2222

THE PRESCRIPTION SHOP
1210 SHEYENNE ST
WEST FARGO, ND 58078
(701)282-4665

WHITE DRUG
1100 13TH AVE E
WEST FARGO, ND 58078
(701)281-5695

MERCY MEDICAL CENTER
1301 15TH AVE W
WILLISTON, ND 58801
(952)653-2568

ND HEALTH MART PHARMACY
20 26TH ST E
WILLISTON, ND 58801
(701)572-4181

SERVICE DRUG PHARMACY
317 MAIN ST
WILLISTON, ND 58801
(701)572-6721

THE PRESCRIPTION CENTER
1508 2ND AVE W
WILLISTON, ND 58801
(701)572-5884

WHITE DRUG
300 W 11TH ST
WILLISTON, ND 58801
(701)774-3923

WISHEK DRUG
9 S CENTENNIAL ST
WISHEK, ND 58495
(701)452-2368

South Dakota Providers

Participating Pharmacies

AVERA ST LUKE'S PHARMACY
305 S STATE ST
ABERDEEN, SD 57401
(605)622-5545

DT PHARMACY
815 1ST AVE SE STE 202
ABERDEEN, SD 57401
(605)725-4001

JONES DRUG HEALTHMART
816 6TH AVE SE STE 1
ABERDEEN, SD 57401
(605)225-3010

KESSLER'S PHARMACY
621 6TH AVE SE
ABERDEEN, SD 57401
(605)225-6673

KMART PHARMACY
1815 6TH AVE SE
ABERDEEN, SD 57401
(605)229-5500

PLAZA PHARMACY
2201 6TH AVE SE STE 23
ABERDEEN, SD 57401
(605)225-6344

SHOPKO PHARMACY
500 N HIGHWY 281
ABERDEEN, SD 57401
(605)225-3577

STATE STREET PHARMACY
105 S STATE ST STE 111
ABERDEEN, SD 57401
(605)225-1945

UNITED CLINIC PHARMACY
3015 3RD AVE SE STE 110
ABERDEEN, SD 57401
(605)225-4001

WAL-MART
3820 7TH AVE SE
ABERDEEN, SD 57401
(605)229-1519

NELSON DRUG
125 S MAIN ST
ARLINGTON, SD 57212
(605)983-5711

PRAIRIE PHARMACY
1311 BRADDOCK AVE
ARMOUR, SD 57313
(605)724-2970

LYNN'S DAKOTAMART PHARMACY
600 NATIONAL ST
BELLE FOURCHE, SD 57717
(605)892-2666

SHOPKO PHARMACY
1 N 5TH AVE
BELLE FOURCHE, SD 57717
(605)892-2252

LEWIS FAMILY DRUG
100 N 3RD ST
BERESFORD, SD 57004
(605)763-2633

TURNER DRUG
3033 MAIN ST
BOWDLE, SD 57428
(605)285-6121

BRANDON HEALTH MART PHARMACY
1517 W HOLLY BLVD
BRANDON, SD 57005
(605)582-6000

LEWIS DRUG
115 N SPLITROCK BLVD
BRANDON, SD 57005
(605)367-2910

HERITAGE PHARMACY
206 N MAIN AVE
BRIDGEWATER, SD 57319
(605)729-2744

QUARVE DRUG
710 MAIN ST
BRITTON, SD 57430
(605)448-2471

BROTHERS PHARMACY
1004 6TH ST
BROOKINGS, SD 57006
(605)692-2088

HY-VEE PHARMACY
790 22ND AVE S
BROOKINGS, SD 57006
(605)692-7311

LEWIS DRUG
910 22ND AVE S
BROOKINGS, SD 57006
(605)692-8881

SDSU JACKRABBIT PHARMACY
N CAMPUS DR
BROOKINGS, SD 57007
(605)688-5410

WAL-MART
2233 6TH ST
BROOKINGS, SD 57006
(605)692-1858

BURKE COMMUNITY PHARMACY
814 JACKSON ST
BURKE, SD 57523
(605)775-2294

HAISCH PHARMACY
303 E 5TH ST
CANTON, SD 57013
(605)987-2661

LEWIS FAMILY DRUG
715 E 5TH ST
CANTON, SD 57013
(605)987-4284

CENTERVILLE PHARMACY
513 BROADWAY
CENTERVILLE, SD 57014
(605)563-2243

LEWIS FAMILY DRUG
107 N MAIN ST
CHAMBERLAIN, SD 57325
(605)734-5871

CLARK COMMUNITY PHARMACY
211 N COMMERCIAL ST
CLARK, SD 57225
(605)532-3400

DEUEL COUNTY PHARMACY
411 3RD AVE S
CLEAR LAKE, SD 57226
(605)874-8220

PRAIRIE PHARMACY CORSICA
230 E MAIN ST
CORSICA, SD 57328
(605)946-5690

CARSON DRUG
521 MOUNT RUSHMORE RD
CUSTER, SD 57730
(605)673-2225

DUNES FAMILY PHARMACY
101 TOWER RD STE 130
DAKOTA DUNES, SD 57049
(605)242-5050

LEWIS FAMILY DRUG
213 CALUMET AVE SW
DE SMET, SD 57231
(605)854-9033

WHITE DRUG
71 CHARLES ST
DEADWOOD, SD 57732
(605)578-1512

LEWIS FAMILY DRUG
335 E 4TH ST
DELL RAPIDS, SD 57022
(605)428-5440

VILAS PHARMACY
123 MAIN ST
EAGLE BUTTE, SD 57625
(605)964-8955

PIONEER DRUG
107 E MAIN ST
ELK POINT, SD 57025
(605)356-3336

VILAS PHARMACY
712 7TH ST
EUREKA, SD 57437
(605)284-2752

VILAS PHARMACY
100 MAIN ST
FAITH, SD 57626
(605)967-2123

FAULKTON DRUG
118 8TH AVE S
FAULKTON, SD 57438
(605)598-4187

LEWIS FAMILY DRUG
127 E 2ND AVE
FLANDREAU, SD 57028
(605)997-2122

SHANES PHARMACY
202 ISLAND DR
FORT PIERRE, SD 57532
(605)223-9200

HERTIAGE PHARMACY
609 S US HIGHWAY 81
FREEMAN, SD 57029
(605)925-4510

NORM'S THRIFTY WHITE
389 S MAIN ST
FREEMAN, SD 57029
(605)925-7059

VILAS PHARMACY
103 E COMMERCIAL AVE
GETTYSBURG, SD 57442
(605)765-9458

GREGORY DRUG
604 MAIN ST
GREGORY, SD 57533
(605)835-8198

LORI'S PHARMACY
1205 N 1ST ST
GROTON, SD 57445
(605)397-2363

MEDICAP PHARMACY
304 W HIGHWAY 38 STE 102
HARTFORD, SD 57033
(605)528-2000

FALL RIVER HOSPITAL PHARMACY
1201 HIGHWAY 71 S
HOT SPRINGS, SD 57747
(605)745-3159

LYNN'S DAKOTAMART PHARMACY
501 S 6TH ST
HOT SPRINGS, SD 57747
(605)745-3110

SHOPKO PHARMACY
2701 18 HIGHWAY W
HOT SPRINGS, SD 57747
(605)745-4681

RAFFERTY-ROBBINS DRUG STORE
108 S MAIN ST
HOWARD, SD 57349
(605)772-5581

COBORNS PHARMACY
2150 DAKOTA AVE S
HURON, SD 57350
(605)352-1641

KMART PHARMACY
1000 18TH ST SW
HURON, SD 57350
(605)352-4525

LEWIS DRUG
1950 DAKOTA AVE S
HURON, SD 57350
(605)352-6495

NORTHSIDE PHARMACY
100 DAKOTA AVE N STE A
HURON, SD 57350
(605)352-9222

WAL-MART
2791 DAKOTA AVE S
HURON, SD 57350
(605)353-9513

VILAS PHARMACY
401 5TH AVE
IPSWICH, SD 57451
(605)426-6551

WOLLMAN ANDES PHARMACY
332 MAIN ST
LAKE ANDES, SD 57356
(605)487-7685

SMITH'S DRUG
301 MAIN AVE
LEMMON, SD 57638
(605)374-3897

LEWIS FAMILY DRUG
216 S MAIN ST
LENNOX, SD 57039
(605)647-2256

LEWIS DRUG
741 S WASHINGTON AVE
MADISON, SD 57042
(605)256-3571

SHOPKO PHARMACY
800 S WASHINGTON AVE
MADISON, SD 57042
(605)256-6169

GETSKOW PHARMACY
105 N BROADWAY AVE
MARION, SD 57043
(605)648-3751

GETSKOW PHARMACY
105 N BROADWAY
MARION, SD 57043
(605)648-3751

MARTIN DRUG
304 MAIN ST
MARTIN, SD 57551
(605)685-6200

BIEN PHARMACY
222 S MAIN ST
MILBANK, SD 57252
(605)432-5781

LIEBE DRUG
109 S MAIN ST
MILBANK, SD 57252
(605)432-5541

MILLER REXALL DRUG
209 N BROADWAY AVE
MILLER, SD 57362
(605)853-3649

MISSION COMMUNITY PHARMACY
161 S MAIN ST
MISSION, SD 57555
(605)856-2120

CAMPUS PHARMACY
525 N FOSTER ST
MITCHELL, SD 57301
(605)995-5670

KMART PHARMACY
1313 S BURR ST
MITCHELL, SD 57301
(605)996-1384

LEWIS FAMILY DRUG
1305 W HAVENS AVE
MITCHELL, SD 57301
(605)292-4000

LEWIS FAMILY DRUG
1507 N MAIN ST
MITCHELL, SD 57301
(605)292-1013

SHOPKO PHARMACY
1900 N MAIN ST
MITCHELL, SD 57301
(605)996-6568

WAL-MART
1101 E SPRUCE ST
MITCHELL, SD 57301
(605)995-6845

FAMILY PHARMACY
323 MAIN ST
MOBRIDGE, SD 57601
(605)845-3345

FAMILY PHARMACY
1317 10TH AVE W # 759
MOBRIDGE, SD 57601
(605)845-8140

PARKER PHARMACY
27516 SD HIGHWAY 19 STE 2
PARKER, SD 57053
(605)297-3235

MEDICINE SHOPPE PHARMACY
102 W MAIN
PARKSTON, SD 57366
(605)928-3661

South Dakota Providers

Participating Pharmacies

PARKSTON DRUG
112 W MAIN ST
PARKSTON, SD 57366
(605)928-3125

ZEEB PHARMACY
130 S CENTER AVE
PHILIP, SD 57567
(605)859-2833

KMART PHARMACY
1615 N HARRISON AVE
PIERRE, SD 57501
(605)224-1655

LYNN'S DAKOTAMART PHARMACY
120 W SIOUX AVE
PIERRE, SD 57501
(605)224-7396

VILAS PHARMACY
100 MAC LN STE 2
PIERRE, SD 57501
(605)224-7334

WAL-MART
1730 N GARFIELD RD
PIERRE, SD 57501
(605)224-8766

HOFFMAN DRUG
408 MAIN ST
PLATTE, SD 57369
(605)337-3662

PRESHO COMMUNITY PHARMACY
103 W HIGHWAY 16
PRESHO, SD 57568
(605)895-6337

BOYDS DRUG MART
909 E SAINT PATRICK ST
RAPID CITY, SD 57701
(605)348-0741

BOYDS DRUG MART
655 MOUNTAIN VIEW RD
RAPID CITY, SD 57702
(605)343-4445

BOYDS DRUG RX EXPRESS
2650 MOUNT RUSHMORE RD
RAPID CITY, SD 57701
(605)718-4040

FAMILY THRIFT CENTER
855 OMAHA ST
RAPID CITY, SD 57701
(605)343-8542

FAMILY THRIFT CTR PHCY
1516 E ST PATRICK ST
RAPID CITY, SD 57703
(605)343-6214

FTC EXPRESS PHARMACY
3464 STURGIS RD
RAPID CITY, SD 57702
(605)348-4414

KMART PHARMACY
1111 E NORTH ST
RAPID CITY, SD 57701
(605)343-2248

MEDICAP PHARMACY
339 SAINT PATRICK ST
RAPID CITY, SD 57701
(605)388-3622

MEDICINE SHOPPE PHARMACY
1304 MT RUSHMORE RD
RAPID CITY, SD 57701
(605)348-6305

PHARMERICA
3615 5TH ST STE 109
RAPID CITY, SD 57701
(605)342-8132

RAPIDCARE - RAPID CITY
408 KNOLLWOOD DR
RAPID CITY, SD 57701
(605)341-6600

REGIONAL LONG TERM CARE PHCY
1906 LOMBARDY DR
RAPID CITY, SD 57703
(605)755-3060

REGIONAL PHARMACY
353 FAIRMONT BLVD
RAPID CITY, SD 57701
(605)719-8184

SAFEWAY PHARMACY
2120 MOUNT RUSHMORE RD
RAPID CITY, SD 57701
(605)348-7552

SAFEWAY PHARMACY
730 MOUNTAIN VIEW RD
RAPID CITY, SD 57702
(605)342-8505

SAM'S CLUB
925 EGLIN ST
RAPID CITY, SD 57701
(605)877-3103

SHOPKO PHARMACY
1845 HAINES AVE
RAPID CITY, SD 57701
(605)342-1055

TARGET PHARMACY
1415 EGLIN ST
RAPID CITY, SD 57703
(605)341-8621

WAL-MART
1200 LACROSSE ST
RAPID CITY, SD 57701
(605)342-0881

WAL-MART
100 STUMMER RD
RAPID CITY, SD 57701
(605)343-1872

RANDALL PHARMACY
1010 W 1ST ST STE 2
REDFIELD, SD 57469
(605)472-1810

SALEM COMMUNITY DRUG
300 N MAIN ST
SALEM, SD 57058
(605)425-2827

SCOTLAND PHARMACY
620 BILLARS ST
SCOTLAND, SD 57059
(605)583-2514

AVERA 69TH STREET PHARMACY
4400 W 69TH ST STE 300
SIOUX FALLS, SD 57108
(605)322-5948

AVERA DERMATOLOGY PHARMACY
6701 S MINNESOTA AVE
SIOUX FALLS, SD 57108
(605)322-7695

AVERA MCKENNAN CAMPUS PHARMACY
1325 S CLIFF AVE STE CP
SIOUX FALLS, SD 57105
(605)322-8326

AVERA SPECIALTY PHARMACY
1301 S CLIFF AVE STE 200
SIOUX FALLS, SD 57105
(605)322-8360

CARETRENDS PHARMACY
6709 S MINNESOTA AVE
SIOUX FALLS, SD 57108
(605)338-9383

CLINIC PHARMACIES
2333 W 57TH ST STE 109
SIOUX FALLS, SD 57108
(605)331-3190

COMPLETE HOME CARE
1104 W RUSSELL ST
SIOUX FALLS, SD 57104
(605)338-9383

COSTCO
3700 S GRANGE AVE
SIOUX FALLS, SD 57105
(605)988-9150

HY-VEE PHARMACY
3000 S MINNESOTA AVE
SIOUX FALLS, SD 57105
(605)334-8012

HY-VEE PHARMACY
1231 E 57TH ST
SIOUX FALLS, SD 57103
(605)274-7062

HY-VEE PHARMACY
3020 E 10TH ST
SIOUX FALLS, SD 57103
(605)336-8998

HY-VEE PHARMACY
4101 S LOUISE AVE
SIOUX FALLS, SD 57106
(605)361-1382

HY-VEE PHARMACY
2700 W 10TH ST
SIOUX FALLS, SD 57104
(605)271-1645

HY-VEE PHARMACY
1900 S MARION RD
SIOUX FALLS, SD 57106
(605)361-3347

HY-VEE PHARMACY
1601 S SYCAMORE AVE
SIOUX FALLS, SD 57110
(605)334-1173

KMART PHARMACY
3709 E 10TH ST
SIOUX FALLS, SD 57103
(605)332-0102

KMART PHARMACY
3020 12TH ST W
SIOUX FALLS, SD 57104
(605)339-3111

LEWIS DRUG
2700 W 12TH ST
SIOUX FALLS, SD 57104
(605)367-2210

LEWIS DRUG
6109 S LOUISE AVE
SIOUX FALLS, SD 57108
(605)367-2510

LEWIS DRUG
1301 E 10TH ST
SIOUX FALLS, SD 57103
(605)367-2310

LEWIS DRUG
4409 E 26TH ST
SIOUX FALLS, SD 57103
(605)367-2710

LEWIS DRUG
5500 W 41ST ST
SIOUX FALLS, SD 57106
(605)367-2610

LEWIS DRUG
6110 S MINNESOTA AVE
SIOUX FALLS, SD 57108
(605)367-2810

LEWIS DRUG
500 41ST ST W
SIOUX FALLS, SD 57105
(605)367-2110

LEWIS DRUGS
2701 S MINNESOTA AVE STE 1
SIOUX FALLS, SD 57105
(605)367-2828

LEWIS FAMILY DRUG
1205 S GRANGE AVE
SIOUX FALLS, SD 57105
(605)328-2620

OMNICARE PHARMACY
709 N KIWANIS AVE
SIOUX FALLS, SD 57104
(605)338-9980

PHARMERICA
1507 W 51ST ST
SIOUX FALLS, SD 57105
(605)338-7007

SAM'S CLUB
3201 S LOUISE AVE
SIOUX FALLS, SD 57106
(605)362-2625

SANFORD CANCER CENTER ONCOLOGY
1309 W 17TH ST STE 101
SIOUX FALLS, SD 57104
(605)328-8040

SANFORD CANCER CTR ONC CLNC
1309 W 17TH ST STE 101
SIOUX FALLS, SD 57104
(605)328-8040

SHOPKO PHARMACY
1601 41ST ST W
SIOUX FALLS, SD 57105
(605)338-3155

SHOPKO PHARMACY
4501 E ARROWHEAD PKWY
SIOUX FALLS, SD 57103
(605)335-8806

SIOUX FALLS SURGICAL CENTER
910 E 20TH ST
SIOUX FALLS, SD 57105
(605)335-4202

TARGET PHARMACY
1021 S HIGHLINE PL
SIOUX FALLS, SD 57110
(605)333-5601

TARGET PHARMACY
3600 S LOUISE AVE
SIOUX FALLS, SD 57106
(605)254-1100

VAN HOVE PRESCRIPTION SHOP
1200 S 7TH AVE
SIOUX FALLS, SD 57105
(605)336-1816

WAL-MART
3209 S LOUISE AVE
SIOUX FALLS, SD 57106
(605)362-1602

WAL-MART PHARMACY #10-3237
5521 E ARROWHEAD PKWY
SIOUX FALLS, SD 57110
(605)367-3206

SHOPKO PHARMACY
1712 SD HIGHWAY 10
SISSETON, SD 57262
(605)742-0011

KMART PHARMACY
2323 COLORADO BLVD
SPEARFISH, SD 57783
(605)642-8749

MEDICAP PHARMACY
1330 NORTH AVE
SPEARFISH, SD 57783
(605)642-2442

REGIONAL PHARMACY
1420 N 10TH ST STE 1
SPEARFISH, SD 57783
(605)717-8741

SAFEWAY PHARMACY
1606 NORTH AVE STE 2
SPEARFISH, SD 57783
(605)642-3039

WAL-MART
2825 1ST AVE
SPEARFISH, SD 57783
(605)642-3025

COUNTY DRUG
1111 LAZELLE ST
STURGIS, SD 57785
(605)347-2466

SHOPKO PHARMACY
2105 LAZELLE ST STE 2
STURGIS, SD 57785
(605)347-4553

LEWIS DRUGS
720 E 1ST ST
TEA, SD 57064
(605)368-9001

BON HOMME PHARMACY
410 W 16TH AVE
TYNDALL, SD 57066
(605)589-4418

DAVIS PHARMACY
5 W CHERRY ST
VERMILLION, SD 57069
(605)624-4444

HY-VEE PHARMACY
525 W CHERRY ST
VERMILLION, SD 57069
(605)624-9591

SANFORD VERMILLION MED CENTER
20 S PLUM ST
VERMILLION, SD 57069
(605)638-8455

South Dakota Providers

Participating Pharmacies

WAL-MART
1207 PRINCETON ST
VERMILLION, SD 57069
(605)624-4106

LEWIS FAMILY DRUG
104 W PARK AVE
VIBORG, SD 57070
(605)326-5211

JAMES DRUG
201 S MAIN AVE
WAGNER, SD 57380
(605)384-3541

WALL DRUG STORE
510 MAIN ST
WALL, SD 57790
(605)279-2175

BROWN CLINIC PHARMACY
506 1ST AVE SE
WATERTOWN, SD 57201
(605)884-4234

GENOA HEALTHCARE
123 19TH ST NE
WATERTOWN, SD 57201
(605)882-9400

HY-VEE PHARMACY
1320 9TH AVE SE
WATERTOWN, SD 57201
(605)886-0661

PRAIRIE LAKES CAMPUS PHARMACY
401 9TH AVE NW
WATERTOWN, SD 57201
(605)882-7790

SHOPKO PHARMACY
700 9TH AVE SE
WATERTOWN, SD 57201
(605)882-2011

WAL-MART
1201 29TH ST SE
WATERTOWN, SD 57201
(605)886-8419

CORNWELL DRUG
701 MAIN ST
WEBSTER, SD 57274
(605)345-3351

THORNTON DRUG
202 E MAIN ST
WESSINGTON SPGS, SD 57382
(605)539-1421

RANCHLAND DRUG
101 N MAIN ST
WHITE RIVER, SD 57579
(605)259-3102

SHOPKO PHARMACY
1140 E 5TH ST
WINNER, SD 57580
(605)842-3242

WINNER HEALTH MART PHARMACY
702 W 2ND ST
WINNER, SD 57580
(605)842-2270

AVERA SACRED HEART HOSP PHCY
501 SUMMIT ST
YANKTON, SD 57078
(605)668-8303

HY-VEE PHARMACY
2100 N BROADWAY AVE
YANKTON, SD 57078
(605)665-8261

KMART PHARMACY
2210 BROADWAY AVE
YANKTON, SD 57078
(605)665-7920

ROGER'S FAMILY PHARMACY
218 W 4TH ST
YANKTON, SD 57078
(605)665-8042

SD HUMAN SERVICES CENTER PHCY
3515 BROADWAY AVE
YANKTON, SD 57078
(605)668-3155

WAL-MART
3001 BROADWAY AVE
YANKTON, SD 57078
(605)665-8197

YANKTON DRUG CO
109 W 3RD ST
YANKTON, SD 57078
(605)665-7865

YANKTON MEDICAL CLINIC PHCY
1104 W 8TH ST
YANKTON, SD 57078
(605)665-2929

Percent of NDPERS Employees Meeting the Access						
Provider Type	Family/ General Practice	Pediatrics	Internal Medicine	OB/GYN	Specialists	Hospital
North Dakota						
ADAMS	100.0	100.0	100.0	0.0	100.0	86.1
BARNES	100.0	99.2	99.6	7.9	100.0	100.0
BENSON	100.0	60.7	45.8	0.0	94.4	100.0
BILLINGS	3.6	3.6	3.6	3.6	3.6	100.0
BOTTINEAU	93.0	2.9	4.0	2.2	98.2	84.2
BOWMAN	100.0	3.4	100.0	0.0	100.0	100.0
BURKE	67.9	0.0	0.0	0.0	88.7	100.0
BURLEIGH	100.0	99.8	99.8	99.8	99.9	100.0
CASS	100.0	99.5	99.9	99.2	100.0	100.0
CAVALIER	100.0	85.9	99.4	0.0	100.0	100.0
DICKEY	100.0	0.0	100.0	0.0	100.0	100.0
DIVIDE	1.2	0.0	1.2	0.0	95.3	1.2
DUNN	46.3	34.6	20.6	34.6	46.3	100.0
EDDY	100.0	3.9	3.9	0.0	100.0	100.0
EMMONS	100.0	6.9	100.0	3.4	97.7	100.0
FOSTER	100.0	0.0	0.0	0.0	100.0	100.0
GOLDEN VALLEY	0.0	0.0	0.0	0.0	0.0	15.4
GRAND FORKS	100.0	98.5	100.0	99.2	100.0	100.0
GRANT	100.0	0.0	62.7	0.0	54.2	100.0
GRIGGS	100.0	1.3	1.3	0.0	100.0	100.0
HETTINGER	100.0	65.3	100.0	36.7	100.0	100.0
KIDDER	100.0	0.0	60.3	0.0	48.5	89.7
LAMOURE	100.0	10.9	98.4	13.2	98.4	100.0
LOGAN	100.0	0.0	98.5	0.0	75.4	100.0
MCHENRY	99.2	42.0	42.0	42.0	100.0	100.0
MCINTOSH	100.0	0.0	60.2	0.0	100.0	100.0
MCKENZIE	31.8	0.0	13.6	0.0	28.8	93.9
MCLEAN	99.6	6.7	31.1	6.7	98.8	100.0
MERCER	100.0	0.0	0.0	0.0	100.0	100.0
MORTON	100.0	87.3	91.6	89.1	99.4	100.0
MOUNTRAIL	98.8	0.0	0.0	0.0	55.0	100.0
NELSON	88.1	35.6	53.3	0.0	100.0	100.0
OLIVER	100.0	21.7	87.0	32.6	100.0	100.0
PEMBINA	100.0	17.6	81.5	0.0	100.0	100.0
PIERCE	100.0	9.1	0.0	0.0	100.0	100.0
RAMSEY	99.6	99.0	99.5	0.0	100.0	100.0
RANSOM	100.0	5.6	100.0	1.4	100.0	100.0
RENVILLE	100.0	28.9	28.9	28.9	100.0	100.0
RICHLAND	100.0	87.8	100.0	97.0	100.0	90.4
ROLETTE	100.0	0.0	0.0	0.0	9.9	100.0
SARGENT	100.0	0.0	100.0	0.0	100.0	100.0
SHERIDAN	100.0	0.0	0.0	0.0	80.0	100.0

Provider Type	Family/ General Practice	Pediatrics	Internal Medicine	OB/GYN	Specialists	Hospital
SIOUX	76.5	47.1	52.9	35.3	64.7	100.0
SLOPE	100.0	100.0	100.0	0.0	100.0	100.0
STARK	100.0	99.9	99.6	99.9	100.0	100.0
STEELE	100.0	18.2	88.6	70.5	100.0	100.0
STUTSMAN	100.0	98.0	99.3	98.0	98.7	100.0
TOWNER	96.5	0.0	0.0	0.0	84.2	100.0
TRAILL	100.0	9.6	100.0	100.0	100.0	100.0
WALSH	100.0	0.0	100.0	3.3	100.0	100.0
WARD	100.0	96.3	96.4	96.3	100.0	100.0
WELLS	100.0	45.3	0.0	0.0	45.3	100.0
WILLIAMS	99.6	0.0	96.1	0.0	96.3	95.3

Attachment M - Suggested Changes to Plan Design, Programs and Services

Vendors should match the current programs and services as closely as possible when providing proposals. This appendix is meant for vendors to offer suggested changes to plan design and identify the cost or cost savings associated with each suggestion. In addition, vendors can suggest or offer changes to the services along with identification of the benefits/cost or savings. This section is not meant to list deviations to required agreements or service offerings.

Sanford Health Plan would welcome a dialogue to understand the priorities and future strategic goals of ND PERS in order to offer suggested changes and plan designs.

Appendix F

Proposed Deviations

F1 Service Agreement Deviations
F2 RFP Deviations
F3 Redline ASA

Appendix F

Proposers are required to submit deviations in two parts and under separate cover with their proposals using the exhibits that follow:

1. Item F1 – Contract/ASA deviations and exceptions must be described in detail, and include proposed alternative language.
2. Item F2 - Deviations from other RFP requirements must also be described in detail and submitted with your proposal.

   Use the exhibits provided in the following pages to submit specific deviations.

   In addition, proposers must submit:

3. Item F3 – Submit the redline version of the sample contract/ASA with your proposal reflecting the deviations identified in your response to Exhibit F1. Note that electronic and hard copy formats must be submitted with the cost proposal as described earlier in the RFP.

Proposal Deviations

Instructions:
Vendors must complete and submit two separate proposal deviations worksheets. Item F1 for exceptions and suggested alternatives to the terms and provisions in the sample contract/ASA and Exhibit F2 for deviations to other RFP requirements (plan designs, administration, etc.). Failure to include this information with your proposal may exclude your organization from further consideration. As noted in Item F3, vendors are also required to submit a redline version of the ASA that reflects the deviations and suggested alternatives noted below (as outlined in Section III., Proposal Contents, of the RFP).

Appendix F, Item F1 – Proposal Deviations to Sample Contract/ASA

Please complete the following worksheet for any and all deviations and exceptions to the required contract language and provisions as outlined in the sample contract provided with this RFP. Suggested alternatives must be included. Vendors should add additional pages as needed.

NDPERS RFP SAMPLE CONTRACT/ASA DEVIATIONS AND EXCEPTIONS		
Contract Section/ Number	**Description/Contract Language**	**Suggested/Proposed Alternative Language or Provision**
3.7	Claims Processing location	Removed reference to claims processing center as Fargo, ND.
3.8	BlueCard Claims processing	Clarified that Sanford Health Plan will process claims from non-participating providers.
3.13	Conversion Policies	Clarified that an individual policy will be offered upon loss of group coverage.
3.18 (a)	Provider Network	Sanford Health Plan shall ensure PPO arrangements compared to existing SHP participation and reimbursement arrangements, to verify that PPO arrangements provide for payments which are comparable to the existing arrangements.
9 A and B	Provider Network Discount	Clarified the national and regional PPO network discount programs.
7	Final Accounting	SHP shall insert our specific numbers upon finalist selection process.
11.11	Certificates of Creditable Coverage	Will be sent pursuant to state and/or federal law.
Federal and State Regulations	Affordable Care Act and State Mandates	Sanford Health Plan must reserve the ability to amend and implement its plan benefits and documents pursuant to any changes in state or federal laws that are provided or developed following submission of our response to the RFP. SHP reserves the right to adjust premium rates, with a 90 day notice, for any taxe and/or benefits changes imposed by the state of federal government that affects NDPERS health plan benefits.

Appendix F, Item F2 – All Other Proposal Deviations

Please complete the following worksheet for all deviations and exceptions to the RFP requirements. Suggested alternatives or solutions must be included. Vendors should add additional pages as needed.

NDPERS RFP ALL OTHER DEVIATIONS AND EXCEPTIONS	
Specific Deviation	**Proposed Alternative/Solution**
Administering a 20% payment reduction to nonparticipating health care providers within the state of ND would be a manual process.	Sanford Health Plan proposes a manual process for the 20% payment reduction with the overall goal of reducing the number of nonparticipating providers in NDPERS program by securing competitive discounts state-wide.

Appendix F, Item F3 – Redline version of contract/ASA

North Dakota Public Employees Retirement System

July 1, 2013 through June 30, 2015

DRAFT

ADMINISTRATIVE SERVICE AGREEMENT

This Administrative Service Agreement ("Agreement") is entered into between North Dakota Public Employees Retirement System (NDPERS) ("the Plan Sponsor"), North Dakota Public Employees Retirement System (NDPERS) ("the Plan Administrator") and Blue Cross Blue Shield of North Dakota ("BCBSND") the terms of which are as follows:

The Plan Sponsor has established and maintains a fully insured group health plan (the Plan) which provides, among other things, various benefits to Members in the Plan, as set forth in the Certificate of Insurance provided to plan Members. The Plan Administrator is the administrator of the Plan established through this Agreement.

In consideration of payment of required premium and acceptance of membership applications, BCBSND enters into this Agreement with the Plan Sponsor and the Plan Administrator. BCBSND agrees to provide plan Members the benefits set forth in the Certificate of Insurance, in accordance with its terms and conditions. This Agreement also includes the Certificate of Insurance, membership applications, Identification Cards, Benefit Plan Attachments and any endorsements, supplements, attachments, addenda or amendments.

1. EFFECTIVE DATE AND PLAN YEAR

This Agreement is effective July 1, 2015~~3~~ through June 30, 2017~~5~~, unless terminated as provided.

For the purposes of the costs of any and all benefits and services extended through this Benefit Plan, including the implementation of any benefit changes required under federal or state law, the Plan Administrator agrees that the Plan Year shall commence on July 1, unless it is terminated by one of the parties as specified in Section 8. TERM AND TERMINATION OF AGREEMENT.

2. DEFINITIONS

This section defines the terms used in this Agreement. These terms will be capitalized throughout this Agreement when referred to in the context defined.

A. **BENEFIT PAYMENTS** - payments of benefits under the Plan.

B. **CERTIFICATE OF CREDITABLE COVERAGE** - a certificate disclosing information relating to an individual's creditable coverage under a health care benefit program for purposes of reducing any preexisting condition waiting period imposed by any group health plan coverage.

C. **CLAIM** - notification in a form acceptable to BCBSND that service has been provided or furnished to a Member.

D. **DRG** - shall mean diagnostic related groups.

E. **DATA AGGREGATION** - the combining of Protected Health Information that BCBSND creates or receives for or from the Plan and for or from other health plans or health care providers for which BCBSND is acting as a business associate to permit data analyses that relate to the Health Care Operations of the Plan and those other health plans or providers.

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F. **FEES AND CHARGES** - the amounts the Plan Administrator must pay BCBSND for the administrative services described in Section 6. FEES AND CHARGES.

G. **HEALTH CARE OPERATIONS** - any of the activities of a health plan to the extent the activities relate to functions that make it a health plan.

H. **HEALTH CARE PROVIDER** - any eligible provider that has provided care, diagnosis, or treatment to or for a Member for which benefits are sought under the Plan.

I. **INELIGIBLE PERSON** - any person, firm, or corporation that has received benefits or on whose behalf benefits have been paid but for whom benefits are not payable under the terms of the Plan.

J. **MEMBER** - the Subscriber and any dependent of a Subscriber or any other person designated by a Subscriber or by the terms of the Plan who is or may become entitled to a benefit under the Plan. The term shall also include any proprietor, partner, or owner of the Plan Sponsor, if any, who is designated by the terms of the Plan who is or may become entitled to a benefit under the Plan. In no case shall the term Member include any person not otherwise entitled to coverage under the terms of the Plan.

For the purposes of determining the various benefits and restrictions or other limitations thereto made available to a Member under the terms of this Agreement, all benefits under any Plan option or tier (and any restrictions or other limitations thereto) made available to or received by a Member shall accumulate toward that Member's benefits and any restrictions and other limitations thereto.

K. **PAYMENT** - activities undertaken to obtain premiums, determine or fulfill coverage and benefits, or obtain or provide reimbursement for health care services.

L. **PLAN ADMINISTRATOR** – **NORTH DAKOTA PUBLIC EMPLOYEES RETIREMENT SYSTEM.** North Dakota Public Employees Retirement System (NDPERS) is the administrator of the Plan with all of the duties and responsibilities applicable to plan administrators, including but not necessarily limited to compliance with any and all administrative, reporting, and disclosure requirements. BCBSND is not the Plan Sponsor or the Plan Administrator of the Plan and is not responsible for any of the duties assigned to the Plan Sponsor or the Plan Administrator by the terms of the Plan, or by this Agreement.

M. **PROTECTED HEALTH INFORMATION (PHI)** - individually identifiable health information, including summary and statistical information, collected from or on behalf of a Member that is transmitted by or maintained in electronic media, or transmitted or maintained in any other form or medium and that:

1. is created by or received from a Health Care Provider, health care employer, or health care clearinghouse;
2. relates to a Member's past, present or future physical or mental health or condition;
3. relates to the provision of health care to a Member;
4. relates to the past, present, or future payment for health care to or on behalf of a Member; or
5. identifies a Member or could reasonably be used to identify a Member.

Educational records and employment records are not considered PHI under federal law.

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N. **SECURITY INCIDENT** - any attempted or successful unauthorized access, use, disclosure, modification, or destruction of a Member's electronic PHI or interference with BCBSND's system operations in BCBSND's information systems.

O. **STANDARD TRANSACTIONS** - health care financial or administrative transactions conducted electronically for which standard data elements, code sets and formats have been adopted in accordance with federal or state law.

P. **SUBSCRIBER** - any employee of the Plan Sponsor who is or may become eligible to receive a benefit under the Plan. The term includes all common law employees and possibly proprietors, partners, or other owners who work for the Plan Sponsor and are otherwise entitled to coverage under the Plan. Notwithstanding the above, in no case shall the term Subscriber include any person not otherwise entitled to coverage under the terms of the Plan.

Q. **SUCCESSFUL SECURITY INCIDENTS** - Security Incidents that result in unauthorized access, use, disclosure, modification, or destruction of information or interference with system operations.

R. **UNSUCCESSFUL SECURITY INCIDENTS** - Security Incidents that do not result in unauthorized access, use, disclosure, modification, or destruction of information or interference with system operations.

3. **BCBSND SHALL:**

3.1 Establish a membership record for existing Members containing information as provided by NDPERS.

3.2 Provide Identification Cards, Certificates of Insurance/Summary Plan Descriptions and applications for enrollment for each Subscriber.

3.3 Provide the Health Plan Performance Guarantees, as outlined in Exhibit B.

3.4 Upon enrollment under the NDPERS Benefit Plan, BCBSND will provide written notice to covered employees and their covered spouses of their continuation rights pursuant to the Consolidated Omnibus Budget Reconciliation Act. (“COBRA”).

3.5 Receive applications for enrollment for late entrants.

3.6 Provide Managed Benefits services in accordance with appropriate licensure and certification requirements including a dedicated staff person.

3.7 Provide a dedicated service unit to adjudicate all claims and respond to Member's inquiries. Provide toll-free Member and Health Care Provider service lines between the hours of 8 AM and 5:00 PM CST ~~or CDT at the home office in Fargo, ND, as appropriate~~. A toll-free managed benefits line for Health Care Providers will also be available between the hours of 7:30 AM and 5:30 PM CST or CDT. During nonbusiness hours, answering machine services will be available for managed benefits calls.

3.8 Process claims and inquiries for all members, including claims from non-participating providers. ~~per MTM (Member Touchpoint Measures) for Non-BlueCard claims.~~

3.9 Correspond with the Members and Health Care Providers if additional information is deemed necessary by BCBSND to complete the administrative process.

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3.10 Administer other party liability programs.

3.11 Provide to Members an Explanation of Benefits Statement.

3.12 Provide a procedure for detection of fraud and unlawful activity.

3.13 Offer~~Provide to~~ Members an invididual ~~conversion~~ policy ~~when application is made~~ within 31 days of the termination of enrollment under NDPERS.

3.14 Provide assistance to NDPERS for the conduct of enrollment, servicing and education.

3.15 Provide to NDPERS formal Policy and Procedure guidelines for the conduct of external audits or reviews commissioned by NDPERS.

NDPERS shall provide BCBSND with the scope and requirements of any audit or review prior to the commencement of activities. If a sample of claims is required, BCBSND will provide or NDPERS will select a statistically valid computerized sample of claims, if not prohibited by law, regulation or rule.

NDPERS will provide a copy of the report of all audit or review findings and shall discuss the findings with BCBSND upon discovery to allow further investigation or implementation of corrective action.

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3.16 Provide NDPERS with reporting to include but not limited to:

a. Annual group reporting of membership and utilization by group segments and product.

b. Estimates of future claim reserves and premium to claim ratio.

c. Such other special claims reports as requested from time-to-time by NDPERS, subject to the availability of data and appropriate cost considerations.

d. Interest calculation monthly report.

e. Semi-annual performance objectives as outlined in section 2 of the BCBSND response to question 15 of the RFP.

3.17 Provide NDPERS with claims specific data on a monthly basis on compact disc or other agreed upon medium. This information shall be in a format acceptable to NDPERS and subject to all federal and state laws on confidentiality and open records.

3.18 Provide support to NDPERS for the establishment of a Preferred Provider Network consistent with objectives established by NDPERS.

a. BCBSND will provide technical and administrative advice to NDPERS relative to the appropriateness of PPO arrangements compared to existing Blue Cross Blue Shield participation and reimbursement arrangements, to verify that PPO arrangements provide for payments which comparable to ~~are no greater than~~ the existing arrangements. BCBSND will provide current information regarding Blue Cross Blue Shield participation and reimbursement arrangements in place on a provider-specific basis for comparative purposes.

b. BCBSND will develop jointly with NDPERS a written instrument to be used as the basis for providers participating in the PPO Program.

c. BCBSND will secure provider agreements upon completion of negotiations with providers. Such negotiations will be conducted jointly by BCBSND and NDPERS.

d. BCBSND will enforce strict managed benefits, utilization review and quality assurance criteria to assure attainment of Preferred Provider program objectives.

e. BCBSND will, upon NDPERS direction, terminate a Provider's NDPERS PPO participation agreement in accordance with terms of the agreement, when a PPO Provider is noncompliant with NDPERS policies and procedures. Said policies and procedures shall be documented and communicated to the participating provider prior to implementation.

3.19 Carry over any Deductible and/or Coinsurance Amounts incurred from January 1 to June 30, of the prior contract period.

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4. **NDPERS SHALL:**

4.1 Prepare and distribute monthly billings to participating employers and retirees participating in the Plan. NDPERS shall respond to the participating employers inquiries concerning eligibility rules, billing, etc.

4.2 Prepare monthly eligibility tape by participating employer and premium classification for both active and retired employees and provide the tape to BCBSND to be used for eligibility certification purposes. Along with the eligibility tape, NDPERS will furnish a monthly listing of participants added or terminated during the month. Such listing will reflect the name of the employee, dependents, Social Security Number, the effective date of coverage for a new employee or the termination date of a terminated employee and the coverage classification.

4.3 Provide enrollment forms, obtain completed classifications or addresses, etc. from participants and furnish BCBSND with a copy of the enrollment forms or request for coverage or address changes and retain the original copy. Enrollment forms will include the NDPERS and Blue Cross Blue Shield Service Marks.

4.4 Be responsible for the administration of and compliance with COBRA. BCBSND will forward requests for COBRA participation by membership to NDPERS upon notification.

4.5 Comply with BCBSND's established administrative policies which are reasonable and consistent with the NDPERS Health Plan and the bid specifications agreed to by the parties, including but not limited to: underwriting policies, standard adjudication and Medical Policy Guidelines, Payable Provider Guidelines, Managed Benefits Program Guidelines and claim payment procedures.

4.6 Develop and provide BCBSND the objectives established for the Preferred Provider programs.

4.7 Assume joint responsibility for the determination of provider eligibility and performance criteria in the Preferred Provider programs.

4.8 Be responsible for any systems redesign costs to BCBSND which result from the implementation of any new reimbursement mechanisms not presently in place within BCBSND automated claims payment systems. Those reimbursement mechanisms currently in place include:

Institutional	Professional
Percent of Billed Charges	Percent of Physician Payment Schedule
Percent of DRGs	Percent of Billed Charges
Percent of Per Diems	Capitation
Targeted Cost per Member	Targeted Cost per Member

4.9 Pay premiums to BCBSND according to the schedule in Section 6.

4.10 NDPERS acknowledges that the administration of the Benefit Plan that is the subject of this Agreement may be subject to regulation under federal and/or state law. NDPERS agrees to furnish BCBSND with any and all information necessary to comply with any applicable federal and/or state laws and to certify that this information is accurate. If there are any changes in the employer contribution rate for benefits and services

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available under this Agreement, NDPERS agrees that it is its obligation to provide information related to the change in contribution rates immediately to BCBSND.

5. PRIVACY USE AND DISCLOSURE RESPONSIBILITIES

5.1 RESPONSIBILITIES OF BCBSND

A. Privacy of Protected Health Information (PHI)

1. BCBSND will keep confidential all Claim records and all other PHI that BCBSND creates or receives in the performance of its duties under this Agreement. Except as permitted or required by this Agreement for BCBSND to perform its duties under this Agreement, BCBSND will not use or disclose such Claim information or other PHI without the authorization of the Member who is the subject of such information or as required by law.

2. BCBSND will neither use nor disclose Members' PHI (including any Members' PHI received from a business associate of the Plan) except (1) as permitted or required by this Agreement, (2) as permitted in writing by the Plan Administrator, (3) as authorized by Members, or (4) as required by law.

3. BCBSND will be permitted to use or disclose Members' PHI only as follows:

    a. BCBSND will be permitted to use and disclose Members' PHI (a) for the management, operation and administration of the Plan the Plan Administrator offers Members, and (b) for the services set forth in the Plan, which include Payment Activities, Health Care Operations, and Data Aggregation as these terms are defined under federal law.

        1. BCBSND will be permitted to use Members' PHI as necessary for BCBSND's proper management and administration or to carry out BCBSND's legal responsibilities.

        2. BCBSND will be permitted to disclose Members' PHI as necessary for BCBSND's proper management and administration or to carry out BCBSND's legal responsibilities only if (i) the disclosure is required by law, or (ii) before the disclosure, BCBSND obtains from the entity to which the disclosure is to be made reasonable assurance, evidenced by a written contract, that the entity will hold Members' PHI in confidence, use or further disclose Members' PHI only for the purposes for which BCBSND disclosed it to the entity or as required by law, and notify BCBSND of any instance the entity becomes aware of where the confidentiality of any Members' PHI was breached.

    b. BCBSND will make reasonable efforts in accordance with its written privacy policies and procedures to use, disclose, or request only the minimum necessary amount of Members' PHI to accomplish the intended purpose. BCBSND will make its written privacy policies and procedures available to the Plan Sponsor, upon request.

4. Other than disclosures permitted by Section 5.1(A)3, BCBSND will not disclose Members' PHI to the Plan Administrator or to the Plan's business associate except as directed by the Plan Administrator in writing.

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5. BCBSND will require each subcontractor and agent to which BCBSND is permitted by this Agreement or in writing by the Plan Administrator to disclose Members' PHI to provide reasonable assurance, evidenced by written contract, that such other entity will comply with the same privacy and security obligations with respect to Members' PHI as this Agreement applies to BCBSND.

6. BCBSND will not disclose any Members' PHI to the Plan Sponsor, except as permitted by and in accordance with Section 5.1(A)3.

7. BCBSND will report to the Plan Administrator any use or disclosure of Members' PHI not permitted by this Agreement. BCBSND will make any such report to the Plan Administrator after BCBSND learns of such non-permitted use or disclosure.

8. BCBSND will report to the Plan Administrator attempted or successful unauthorized access, use, disclosure, modification or destruction of a Member's electronic PHI or interference with BCBSND's system operations in BCBSND's information systems ("Security Incident"), of which BCBSND becomes aware. With regard to attempted unauthorized access, use, etc., BCBSND and the Plan Administrator recognize and agree that the significant number of meaningless attempts to, without authorization, access, use, disclose, modify or destroy electronic PHI will make real-time reporting formidable. Therefore, BCBSND and the Plan Administrator agree to the following reporting procedures for Security Incidents that result in unauthorized access, use, disclosure, modification, or destruction of information or interference with system operations ("Successful Security Incidents") and for Security Incidents that do not so result ("Unsuccessful Security Incidents").

   For Unsuccessful Security Incidents, BCBSND and the Plan Administrator agree that this Agreement constitutes notice from BCBSND of any such Unsuccessful Security Incidents. In other words, the Plan Administrator waives any separate notice of Unsuccessful Security Incidents. By way of example, BCBSND and the Plan Administrator consider the following to be illustrative of Unsuccessful Security Incidents when they do not result in unauthorized access, use, disclosure, modification, or destruction of a Member's electronic PHI or interference with an information system:

   1. Pings on BCBSND's firewall,

   2. Port scans,

   3. Attempts to log on to a system or enter a database with an invalid password or username,

   4. Denial-of-service attacks that do not result in a server being taken off-line, and

   5. Malware (e.g., worms, viruses).

   For Successful Security Incidents, BCBSND shall give notice promptly to the Plan Administrator in the event a Member's electronic PHI was compromised.

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9. Disposition of Protected Health Information

   The parties agree that upon termination, cancellation, expiration or other conclusion of this Agreement, BCBSND will return or destroy all PHI received or created by BCBSND on the Plan Administrator's behalf as soon as feasible. Due to various regulatory and legal requirements, the Plan Administrator acknowledges that immediate return or destruction of all such information is not feasible. BCBSND agrees that upon conclusion of this Agreement for any reason, it will use or disclose the PHI it received or created on the Plan's behalf only as necessary to meet BCBSND's regulatory and legal requirements and for no other purposes unless permitted in writing by the Plan Administrator. BCBSND will destroy PHI received or created by BCBSND on the Plan Administrator's behalf that is in BCBSND's possession under such circumstances and upon such schedule as BCBSND deems consistent with its regulatory and other legal obligations.

   These responsibilities agreed to by BCBSND and related to protecting the privacy and safeguarding the security of PHI, as well as any terms directly related thereto, shall survive the termination of this Agreement and, where applicable, shall govern BCBSND's receipt, use or disclosure of PHI pursuant to the terms of this Agreement.

B. **Access, Amendment and Disclosure Accounting for Protected Health Information**

1. Upon the Plan Administrator's written request, BCBSND will make available for inspection and obtaining copies by the Plan Administrator, or at the Plan Administrator's direction by the Member (or the Members' representative), any PHI about the Member created or received for or from the Plan Administrator in BCBSND's custody or control so the Plan Administrator may meet its access obligations under federal law.

2. Upon receipt of a written request from the Plan Administrator, or at the Plan Administrator's direction by the Member (or the Members' representative), BCBSND will amend or permit the Plan Administrator access to amend any portion of the PHI created or received for or from the Plan Administrator in BCBSND's custody or control, so the Plan Administrator may meet its amendment obligations under federal law.

3. So the Plan Administrator may meet its disclosure accounting obligations under federal law or state law, BCBSND will do the following:

   a. BCBSND will record each disclosure of Members' PHI which is not excepted from disclosure accounting under Section 5.1(B)3.b, that BCBSND makes to the Plan Administrator or to a third party.

      The information about each disclosure that BCBSND must record ("Disclosure Information") is (i) the disclosure date, (ii) the name and (if known) address of the person or entity to whom BCBSND made the disclosure, (iii) a brief description of the PHI disclosed, and (iv) a brief statement of the purpose of the disclosure.

      For repetitive disclosures of Members' PHI that BCBSND makes for a single purpose to the same person or entity (including the Plan Administrator),

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BCBSND may record (i) the disclosure information for the first of these repetitive disclosures, (ii) the frequency, periodicity or number of these repetitive disclosures, and (iii) the date of the last of these repetitive disclosures.

b. BCBSND will not be required to record disclosure information or otherwise account for disclosures of Members' PHI that this Agreement or the Plan Administrator in writing permits or requires:

(1) for Payment Activities or Health Care Operations,
(2) to the Member who is the subject of the PHI or to that Members' personal representative,
(3) to persons involved in that Members' health care or payment for health care, as provided under federal law,
(4) for notification for disaster relief purposes or national security or intelligence purposes as provided under federal law,
(5) to law enforcement officials or correctional institutions regarding inmates,
(6) for incidental uses or disclosures,
(7) as part of a limited data set in accordance with federal law,
(8) that occurred prior to the HIPAA Privacy Compliance Date,
(9) pursuant to a valid authorization.

c. BCBSND will have available for the Plan Administrator the disclosure information required by Section 5.1(B)3.a. for the six (6) years immediately preceding the date of the Plan Administrator's request for the disclosure information.

d. Upon the Plan Administrator's written request, BCBSND will make available to the Plan Administrator, or at the Plan Administrator's direction to the Member (or the Member's representative), disclosure information regarding the Member so the Plan Administrator may meet its disclosure accounting obligations under federal law.

C. **Information Safeguards**

1. BCBSND will maintain reasonable and appropriate administrative, technical and physical safeguards to protect the privacy of Member PHI. The safeguards must reasonably protect Member PHI from any intentional or unintentional use or disclosure in violation of federal law and limit incidental uses or disclosures made pursuant to a use or disclosure otherwise permitted by this Agreement.

2. BCBSND will implement administrative, technical, and physical safeguards that reasonably and appropriately protect the confidentiality, integrity, and availability of electronic PHI BCBSND creates, receives, maintains, or transmits on behalf of the Plan Administrator as required by federal law.

D. **Inspection of Books and Records**

BCBSND will make its internal practices, books, and records relating to its use and disclosure of PHI created or received for or from the Plan Administrator available to the Plan Administrator and to the U.S. Department of Health and Human Services to determine compliance with federal law or this Agreement.

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E. BCBSND will prepare and distribute a notice of privacy practices appropriate for the Plan to meet its notice obligations under federal law. The Plan Administrator authorizes BCBSND to disclose the minimum necessary PHI to the Plan Sponsor for plan administration functions specified in the Plan documents as amended.

F. **Information Privacy and Safeguard Provisions Survive Termination of Agreement**

These responsibilities agreed to by BCBSND and related to protecting the privacy of PHI, as well as any terms directly related thereto, shall survive the termination of this Agreement and where applicable, shall govern BCBSND's receipt and use of PHI obtained pursuant to the terms of this Agreement.

5.2 RESPONSIBILITIES OF THE PLAN SPONSOR

A. The Plan Sponsor retains full and final authority and responsibility for the Plan and its operation. BCBSND is empowered to act on behalf of the Plan only as stated in this Agreement or as mutually agreed in writing by the Plan Sponsor and BCBSND.

B. Except with respect to services provided by BCBSND set forth in this agreement, the Plan Sponsor will have the sole responsibility for and will bear the entire cost of compliance with all federal, state and local laws, rules, and regulations concerning the privacy of PHI, including any licensing, filing, reporting, and disclosure requirements, that may apply to the Plan. BCBSND will have no responsibility for or liability with respect to the Plan's compliance or noncompliance with any applicable federal, state, or local law, rule, or regulation, that the Plan Sponsor is responsible for under this subsection.

C. By executing this Agreement, the Plan Sponsor certifies to BCBSND that it has amended the Plan documents to incorporate the provisions required by and under federal law, and agrees to comply with the Plan Administrator's plan documents as amended.

BCBSND may rely on Plan Sponsor's certification and Plan Administrator's written authorization, and will have no obligation to verify (1) the Plan Administrator's plan documents have been amended to comply with the requirements of federal law or this Agreement or (2) the Plan Sponsor is complying with the Plan Administrator's plan document as amended.

D. For any high deductible health plan offered by the Plan Sponsor, the Plan Sponsor assumes sole responsibility for determining whether the Plan qualifies as a high deductible health plan under Section 223(c)(2) of the U.S. Internal Revenue Code. BCBSND MAKES NO WARRANTY, EXPRESS OR IMPLIED, INCLUDING, BUT NOT LIMITED TO, ANY IMPLIED WARRANTIES OF MERCHANTABILITY OR FITNESS FOR A PARTICULAR PURPOSE REGARDING THE PLAN.

For any high deductible health plan offered by the Plan Sponsor, BCBSND does not provide legal or tax advice, and expressly disclaims responsibility for determining, on behalf of any individual or group, the legal and tax implications of: (1) establishing a health savings account; (2) eligibility for a health savings account; (3) the contributions made to a health savings account; (4) the deductibility of contributions to a health savings account; and (5) withdrawals from a health savings account and related taxation.

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6. **FEES AND CHARGES:**

6.1 In consideration of the fully insured contract under this Agreement, BCBSND agrees to accept the following provisions and premium rates for the Effective Date of this Agreement. See attached Premium Rate Structure Table.

6.2 BCBSND and NDPERS agree to the Health Plan Performance Guarantees, as outlined in the attached Exhibit B.

6.3 NDPERS will pay BCBSND, on or before the last day of each month, premium income based on the amount identified in Column 6 of the attached Table for type of contract for that month.

6.4 NDPERS will maintain a deposit of $3,000,000 in a Cash Reserve Account held by BCBSND until the settlement of the biennium. This Cash Reserve Account shall earn interest at a rate to be determined monthly, based on US Treasury Notes quoted by the Wall Street Journal. The monthly rate will be established at the close of the first trading day each month based on the closing yield to maturity of US Treasury Notes maturing 24 months hence. If there are multiple notes for that maturity, the rate will be based on an average. If there are no notes with that maturity, the next subsequent maturity will be used.

6.5 BCBSND will retain any surplus funds from the amounts identified in Column 4 of the attached table. Surplus funds retained by BCBSND shall earn interest at a rate to be determined monthly, based on US Treasury Notes quoted by the Wall Street Journal. The monthly rate will be established at the close of the first trading day each month based on the closing yield to maturity of US Treasury Notes maturing 24 months hence. If there are multiple notes for that maturity, the rate will be based on an average. If there are no notes with that maturity, the next subsequent maturity will be used.

Surplus funds described in the above section 6.5 not used by BCBSND to pay NDPERS Health Plan incurred claims plus retention will be subject to the Final Accounting as described in Section 7 of this Agreement.

6.6 Payments made pursuant to Section 6.3 and pursuant to Column 5 of the attached Table will be handled as follows:

BCBSND will dispense to Regional Advantage Services LLC, Medicare Part D premiums identified in Column 5 of the attached Table for type of contract for that month. Interest will not be paid on this account.

Funds described in section 6.6 are not subject to final accounting as described in section 7 of this Agreement.

6.7 BCBSND reserves the right to adjust premium rates, with a 90-day notice, for any changes in taxes and/or benefits imposed upon BCBSND for the NDPERS health plan by any Federal, State or Local government authority that impact BCBSND expenses and/or NDPERS health plan benefits.

7. **FINAL ACCOUNTING**

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7.1 A continual accounting of NDPERS Health Plan experience will take place during the 2013-2015 biennium. Monthly reports of earned income less incurred claims and retention will be produced during the biennium and the twenty-four months following the biennium.

7.2 Within 31 days of 12 months after the end of the biennium (by July 31, 2016) BCBSND will provide an accounting which will result in an initial settlement of the biennium agreement as follows:

1. Earned Premium Income during the Biennium
2. Plus interest on Surplus Funds
3. Less Claims Incurred during the Biennium and Paid July 1, 2013 through June 30, 2016
4. Less Estimated Claims Incurred and Unpaid at June 30, 2016
5. Less Administrative Expense during the Biennium ($28.36 per contract per month)
6. Less Conversion Cost during the Biennium ($1.92 per Non-Medicare contract per month)
7. Less Service Charge during the Biennium ($9.58 per Non-Medicare contract per month and $2.16 per Medicare contract per month)
8. Less Disease Management Program fees during the Biennium ($1.40 per contract per month)
9. Less Wellness Program fees during the Biennium ($4.26 per contract per month)
10. Less PPACA fees during the Biennium ($21.54 per Non-Medicare contract per month)
11. If 1+2-3-4-5-6-7-8-9-10 of 7.2 is positive, the lesser of 50% of this amount or $1.5 million is retained by BCBSND. The remainder equals Refund paid to NDPERS.
12. If 1+2-3-4-5-6-7-8-9-10 of 7.2 is negative, the lesser of 50% of this amount or $3.0 million will be refunded by NDPERS to BCBSND.

Claims incurred and unpaid will be estimated by the mean of the latest three actual IBNR claims (Incurred But Not Reported) amounts for equivalent periods in the NDPERS history.

7.3 Within 31 days of 24 months after the end of the biennium (by July 31, 2017), BCBSND will provide an accounting, which will result in a final settlement of the biennium agreement as follows:

1. Earned Premium Income during the Biennium
2. Plus interest on Surplus Funds
3. Less Claims Incurred during the Biennium and Paid July 1, 2013 through June 30, 2017
4. Less Administrative Expense during the Biennium ($28.36 per contract per month)
5. Less Conversion Cost during the Biennium ($1.92 per Non-Medicare contract per month)
6. Less Service Charge during the Biennium ($9.58 per Non-Medicare contract per month and $2.16 per Medicare contract per month)
7. Less Disease Management Program fees during the Biennium ($1.40 per contract per month)
8. Less Wellness Program fees during the Biennium ($4.26 per contract per month)
9. Less PPACA fees during the Biennium ($21.54 per Non-Medicare contract per month)
10. Less any refund paid to NDPERS at initial settlement on July 31, 2016
11. If 1+2-3-4-5-6-7-8-9-10 of 7.3 is positive, the lesser of 50% of this amount or $1.5 million is retained by BCBSND for the July 1, 2013 through June 30, 2015 biennium. The remainder equals Refund paid to NDPERS. The maximum retained by BCBSND for the biennium is 50% of $3.0 million of gain.

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12. If 1+2-3-4-5-6-7-8-9-10 of 7.3 is negative, the lesser of 50% of this amount or $3.0 million will be refunded by NDPERS to BCBSND. BCBSND retains all losses beyond $6.0 million and any estimated gains previously distributed to NDPERS are subject to refund back to BCBSND based on this final settlement. The maximum loss NDPERS is subject to is 50% of $6.0 million of loss.

The language in red was filed with the Insurance Department 6-2-14 Still waiting for approval.7-8-14

7.4 Within 31 days of 12 months after the end of the biennium (by July 31, 2016), BCBSND will provide an accounting of PPACA fees. This adjustment is in addition to the settlement calculated in 7.2. The calculation will be as follows:

1. Estimated PPACA fees paid by NDPERS during the biennium ($21.54 per Non-Medicare contract per month)

2. Less actual PPACA fees paid by BCBSND for the biennium including:

   a. Patient Centered Outcomes Research Tax will be calculated based on actual average Non-Medicare Members at the rate of $2.00 per Member per year for July 1, 2013 through June 30, 2014, and the updated amount for the following year (unknown at this time) for July 1, 2014 through June 30, 2015.

   b. Transitional Reinsurance Assessment will be calculated based on actual average Non-Medicare Members at the rate of $5.25 per Member per month ($63.00 annual) for January 1, 2014 through December 31, 2014, and $3.67 per Member per month ($44.00 annual) for January 1, 2015 through June 30, 2015.

   c. Health Insurer Tax will be calculated using NDPERS' portion of the premium used to calculate the bill from the Federal Government, grossed up by 20% for Federal Income Tax. The 2014 bill is based on 2013 premium. The 2015 bill is based on 2014 premium, and only half of that amount will be charged to NDPERS since this biennium ends June 30, 2015. (Illustrative Example for 2014 payment: Assume BCBSND receives a $10 million HIT tax bill in 2014 that is based on $1 billion of 2013 premium. If NDPERS contributed $200 million to the $1 billion of 2013 premium, then NDPERS would be charged 20% of $12 million – the $10 million HIT tax bill grossed up by 20% for Federal Tax. The same approach would be taken for 2015 except that only half of the amount would be used to account for half of the year.)

3. If 1-2 of 7.4 is positive, the remainder equals Refund paid to NDPERS. If 1-2 of 7.4 is negative, the remainder will be refunded by NDPERS to BCBSND.

4. The parties agree that the above identified PPACA fees are subject to modification by the respective federal agencies at any time. If the PPACA fees are so modified, the modifications shall automatically be incorporated into this Agreement without further action by the parties.

8. TERM AND TERMINATION OF AGREEMENT

8.1 The term of this Agreement shall be for a two year period from July 1, 2015~~3~~ through June 30, 2017~~5~~.

8.2 This Agreement may be terminated by mutual agreement of both parties, upon 60 days notice, in writing.

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Either party may terminate this Agreement effective 90 days following delivery of written notice to the other party, or at such later date as may be stated in the notice, under any of the following conditions:

a. If funding from federal, state or other sources is not obtained and continued at levels sufficient to allow for purchase of the services or supplies in the indicated quantities or term. The Agreement may be modified by agreement of the parties in writing to accommodate a reduction of funds.

b. If federal or state laws, rules or regulations are modified, changed or interpreted in such a way that the services are no longer allowable or appropriate for purchase under this Agreement or are no longer eligible for the funding proposed for payments authorized by this Agreement.

c. If any license, permit or certificate required by law, rule or regulation, or by the terms of this Agreement, is for any reason denied, revoked, suspended or not renewed.

Any such termination of this Agreement shall be without prejudice to any obligations or liabilities of either party already accrued prior to such termination.

d. In the event of a breach by either party, other than for nonpayment of premium, the other party may terminate this Agreement by written notice to the breaching party. The breaching party has 31 days to fully cure the breach. If the breach is not cured within 31 days after written notice, this Agreement will immediately terminate.

9. PROVIDER NETWORK DISCOUNT ~~INTER-PLAN~~ PROGRAMS

SHP~~BCBSND~~ has a variety of relationships with regional and national PPO discount ~~other Blue Cross and/or Blue Shield Licensees referred to generally as "Inter-Plan~~ Programs~~"~~ Whenever a Member accesses health care services outside the geographic area SHP~~BCBSND~~ serves, the claim for those services may be processed through one of these discount ~~Inter-Plan~~ Programs and presented to BCBSND for payment in accordance with the rules of the ~~Inter-Plan~~ discount p~~P~~rograms policies then in effect. The discount ~~Inter-Plan~~ p~~P~~rograms available to Members under this Agreement are described generally below.

Typically when accessing care outside the SHP ~~BCBSND~~ service area, a Member will obtain care from health care providers that have a contractual agreement (i.e., "participating agreement") with the discount program~~local Blue Cross and/or Blue Shield Licensee in that other geographic area ("Host Blue")~~. In some instances, a Member may obtain care from health care providers who have not entered into a "participating agreement" with SHP directly~~a Host Blue~~. SHP~~BCBSND~~ payment practices in both instances are described below.

A. Regional and National Network Discount ~~BlueCard®~~ Program

~~Under the BlueCard Program, w~~When Members access health care services outside ~~within~~ the geographic area served by SHP, SHP ~~a Host Blue, BCBSND will remain responsible to the Group for fulfilling BCBSND's contractual obligations. However, in accordance with applicable Inter-Plan Programs policies then in effect, the Host Blue will be responsible for providing such services as contracting and~~ will adjudicate claims ~~handling substantially all interactions~~ with the health care providers who have entered into a "participating agreement" with anyone of SHP's discount network programs~~it~~ (participating health care providers). The financial terms of the Regional or National Network Discount~~BlueCard~~ Program are described generally below. Individual circumstances may arise that are not directly covered by this description; however, in those instances, SHP~~BCBSND~~'s action will be consistent with the spirit of this description.

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Liability Calculation Method Per Claim - The calculation of Member liability on claims for Covered Services processed through the Regional or National Network DiscountBlueCard Program will be based on the lower of the billed charges of the Host Blue's participating health care provider or the negotiated price made available to SHPBCBSND by the Regional or National Network Discount programHost Blue.

The Regional or National Network discount programHost Blues may use various methods to determine a negotiated price, depending on the terms of each Host Blue's health care provider contracts. The negotiated price made available to SHPBCBSND by the Host Blue may represents a payment negotiated by a Regional or National Network discount program Host Blue with a health care provider that is the difference between the applicable contract rate and the participating provider's billed charges.one of the following:

1. \the actual price. An actual price is a negotiated payment without any other increases or decreases; or

2. an estimated price. An estimated price is a negotiated payment reduced or increased by a percentage to take into account certain payments negotiated with the provider and other claim- and non-claim-related transactions. Such transactions may include, but are not limited to, anti-fraud and abuse recoveries, provider refunds not applied on a claim-specific basis, retrospective settlements, and performance-related bonuses or incentives; or

3. an average price. An average price is a percentage of billed covered charges representing the aggregate payments negotiated by the Host Blue with all of its health care providers or a similar classification of its providers and other claim- and non-claim-related transactions. Such transactions may include the same ones as noted above for an estimated price.

Host Blues using either an estimated price or an average price may, in accordance with Inter-Plan Programs policies, prospectively increase or reduce such prices to correct for over- or underestimation of past prices (i.e., prospective adjustments may mean that a current price reflects additional amounts or credits for claims already paid to providers or anticipated to be paid to or received from providers). However, Tthe amount paid by the Member is a final price; no future price adjustment will result in increases or decreases to the pricing of past claims. The BlueCard Program requires that the price submitted by a Host Blue to BCBSND is a final price irrespective of any future adjustments based on the use of estimated or average pricing.

A small number of states require a Host Blue either (i) to use a basis for determining Member liability for Covered Services that does not reflect the entire savings realized, or expected to be realized, on a particular claim or (ii) to add a surcharge. Should the state in which health care services are accessed mandate liability calculation methods that differ from the negotiated price methodology or require a surcharge, SHP BCBSND would then calculate the Member's liability in accordance with applicable law.

Return of Overpayments - Under the BlueCard Program, recoveries from a Host Blue or from participating health care providers of a Host Blue can arise in several ways, including, but not limited to, anti-fraud and abuse recoveries, provider/hospital audits, credit balance audits, utilization review refunds, and unsolicited refunds. In some cases, SHPthe Host Blue will engage third parties to assist in discovery or collection of recovery amounts. The fees of such a third party may be netted against the recovery. Recovery amounts determined in this way will be applied in accordance with applicable SHP Inter-Plan Programs policies, which generally require correction on a claim-by-claim or prospective basis.

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B. **Nonparticipating Providers Outside the SHP~~BCBSND~~ Service Area**

When Covered Services are provided outside of SHP's~~BCBSND's~~ service area by health care providers who have not entered into a "participating agreement" with SHP ~~a Host Blue~~ (nonparticipating health care providers), the amount the Member pays for such services will ~~generally~~ be based on ~~either~~ SHP's ~~the Host Blue's nonparticipating health care provider local~~ maximum allowed amount, which is the lesser of (a) the amount charged for a covered service or supply, or (b) reasonable costs as established by SHP. Members are responsible for any difference between the amount charged and SHP's payment for covered services. ~~payment or the pricing arrangements required by applicable state law. In these situations, the Member may be liable for the difference between the amount that the nonparticipating health care provider bills and the payment BCBSND will make for the Covered Services as set forth in this paragraph.~~

In certain situations, SHP~~BCBSND~~ may pay claims based on the payment SHP~~BCBSND~~ would make if the Covered Services had been obtained within the SHP~~BCBSND~~ service area. Such situations include where a Member did not have reasonable access to a participating health care provider, as determined by SHP~~BCBSND~~ in its sole and absolute discretion or by applicable state law. ~~In other situations, BCBSND may pay such a claim based on the payment BCBSND would make if BCBSND were paying a nonparticipating health care provider inside of BCBSND's service area (as described in the Member's Certificate of Insurance) where the Host Blue's corresponding payment would be more than BCBSND's payment to a nonparticipating health care provider within the BCBSND service area. BCBSND~~SHP may also in its sole and absolute discretion, negotiate a payment with such a health care provider on an exception basis. In any of these situations, the Member may be responsible for the difference between the amount that the nonparticipating health care provider bills and payment SHP~~BCBSND~~ will make for the Covered Services as set forth in this paragraph.

10. RETROSPECTIVE DISCOUNT PAYMENT

Regarding prescription medications or drugs purchased by Members under the terms of the Plan, BCBSND will pay the amount due to the pharmacy (or other prescription drug retailer) under the terms of the pharmacy provider participating agreement. The amount due to the pharmacy under the terms of the pharmacy provider participating agreement is that which is due at the time the prescription medication or drug is purchased by the Member. The amount due to the pharmacy under the pharmacy provider participating agreement is calculated without regard to any subsequent, retrospective manufacturer discount that may apply to the cost of the prescription medication or drug. The Plan Administrator acknowledges and agrees that, in some cases but not all, drug manufacturers may offer retrospective discounts to BCBSND on prescription medications and drugs purchased under the terms of the Plan. If a drug manufacturer makes a retrospective discount payment available, the Plan Administrator acknowledges and agrees that a portion of any such rebate may be retained by an entity that performs manufacturer discount program services on behalf of BCBSND under the terms of this Agreement. The Plan Administrator further acknowledges and agrees that, when made available by the drug manufacturer, another portion of the retrospective discount payment is retained by BCBSND. In its sole discretion, BCBSND may periodically refund to the Plan all or part of any rebate payments received. The calculation of any refund rests in the sole discretion of BCBSND.

In its sole discretion, and only in the case where a Member is required to pay Coinsurance as part of the Cost Sharing Amounts for each Prescription Medication and Drug provided under the terms of this Benefit Plan, BCBSND may periodically refund to Members a proportional amount of any retrospective discount payments received. The calculation and payment of any such

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proportional refund rests in the sole discretion of BCBSND. The manner in which such retrospective discount program payment refund, if any, is distributed to a Member rests in the sole discretion of BCBSND. The Member waives any right, title, or interest in and to such proportional retrospective discount payment once the Member is no longer eligible for benefits under the terms of this Benefit Plan, and BCBSND may use its discretion and disburse any such retrospective discount payments as it deems appropriate and necessary in its administration of this Benefit Plan. The Member shall pay all Cost Sharing Amounts at the time the Prescription Medication or Drug is purchased, without regard to any potential retrospective discount.

11. **GENERAL PROVISIONS:**

11.1 This Agreement is between NDPERS and BCBSND and does not create any rights or legal relationships between BCBSND and any Member(s).

11.2 This Agreement, together with the Response to the Request for Proposal and any exhibits, attachments and amendments constitutes the entire Agreement between the parties. No promises, terms, conditions or obligations other than those contained in this Agreement are valid or binding. Any prior agreements, statements, promises, negotiations, inducements or representations, either oral or written, made by either party or agent of either party that are not contained in this Agreement are of no effect. No modification of the terms or provisions of this Agreement shall be effective unless evidenced by a written amendment, signed by an authorized officer or employee of NDPERS and BCBSND.

11.3 This Agreement shall be governed by and construed according to the laws of the state of North Dakota.

11.4 Failure of either party at any time to require performance by the other party of any provision of this Agreement shall not be deemed to be a continuing waiver of that provision or a waiver of any other provision of this Agreement.

11.5 No assignment of this Agreement in whole or in part may be made by either party without written agreement approved by both parties.

11.6 All notices and correspondence required or permitted to be given under this Agreement shall be given by personal delivery to the other party or may be sent by mail, postage prepaid to the other party at the following addresses:

NORTH DAKOTA PUBLIC EMPLOYEES
RETIREMENT SYSTEM
PO Box 1657
Bismarck, North Dakota 58502

BLUE CROSS BLUE SHIELD
OF NORTH DAKOTA
4510 13th Avenue South
Fargo, North Dakota 58121

11.7 Neither party shall be liable for any delay in or failure to perform under this Agreement due to an act of God or due to war mobilization, insurrection, rebellion, civil commotion, riot, act of an extremist or public enemy, sabotage, labor dispute, explosion, fire, flood, storm, accident, drought, equipment failure, power failure, fuel or energy shortages, unavoidable delay of carriers, embargo, law, ordinance, act, rule or regulation of any government, whether valid or invalid.

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11.8 NDPERS hereby expressly acknowledges and understands that BCBSND is an independent corporation operating under a license with the Blue Cross and Blue Shield Association, an association of independent Blue Cross and Blue Shield Plans (the "Association"), permitting BCBSND to use the Blue Cross and Blue Shield Service Marks in the state of North Dakota, and that BCBSND is not contracting as an agent of the Association. NDPERS further acknowledges and agrees this Agreement was not entered into based upon representations by any person or entity other than BCBSND and that no person, entity, or organization other than BCBSND shall be held accountable or liable to NDPERS for any of BCBSND's obligations to NDPERS created under this Agreement. This paragraph shall not create any additional obligations whatsoever on the part of BCBSND other than those obligations created under other provisions of this Agreement.

11.9 If NDPERS or BCBSND creates benefit communications for Members, relating to the Certificate of Insurance attached as Exhibit A, such communications will be sent to BCBSND or NDPERS for comment prior to distribution. Either party will have 5 business days to comment on the communication. If one party fails to advise the other within that 5-day period, it will be presumed there are no comments on the communication. If NDPERS has a digital or online version of the Certificate of Insurance available to its Members, NDPERS agrees that it will not alter, modify or change the language of the Certificate of Insurance, and further agrees the Certificate of Insurance, attached as Exhibit A, will be the controlling document in the event of any conflict or liability that might arise as the result of any alterations, modifications or changes made by NDPERS. In the event a claim is paid based on NDPERS's modified or altered digital or online Certificate of Insurance, NDPERS is liable for all such claims. NDPERS further agrees that no waiver of this agreement is valid unless in writing and approved by BCBSND.

11.10 BCBSND will prepare Summaries of Benefits and Coverage for distribution to applicants and Members by NDPERS so that BCBSND, the Plan and NDPERS may all satisfy related disclosure obligations under federal law. It shall be the sole responsibility of NDPERS to distribute the Summaries of Benefits and Coverage in accordance with federal law, and the Plan Administrator acknowledges and agrees that BCBSND will rely upon NDPERS for compliance with the requirements for distribution of the Summaries of Benefits and Coverage to applicants and Members.

11.11 When coverage under this Agreement is terminated, BCBSND will, within a reasonable period of time, issue a Certificate of Creditable Coverage to the Subscriber until such time when the certificate is not required under state and/or federal law. Upon notification by the Subscriber of the ineligibility of a dependent, a Certificate of Creditable Coverage will be issued to the affected Member within a reasonable period of time. Certificates of Creditable Coverage may also be obtained from BCBSND upon request within 24 months after coverage is terminated. Certificates of Creditable Coverage will only reflect continuous coverage provided through BCBSND.

11.12 Upon the effective date of any final regulation or amendment to final regulations with respect to PHI, Standard Transactions, the security of health information or other aspects of the Health Insurance Portability and Accountability Act of 1996 applicable to this Agreement, this Agreement will automatically amend such that the obligations imposed on the Plan Sponsor, the Plan Administrator and BCBSND remain in compliance with such regulations, unless BCBSND elects to terminate this Agreement by providing the Plan Sponsor and the Plan Administrator notice of termination in accordance with this Agreement at least thirty-one (31) days before the effective date of such final regulation or amendment to final regulations.

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12. **DISPUTES AND INDEMNIFICATION**

If litigation is filed regarding denial of benefits or otherwise, and BCBSND is named as the sole defendant, BCBSND will have the right to manage and have full control of litigation and to determine whether to pay, compromise, litigate or appeal the litigation. Except as otherwise provided in this Agreement, NDPERS and BCBSND each agree to assume their own liability for any and all legal or equitable claims of any nature including all costs, expenses and attorneys' fees which may in any manner result from or arise out of this Agreement.

NDPERS agrees that all Retrospective Discount Payments will be made to Members of the Plan. BCBSND agrees to indemnify NDPERS for any judgments against NDPERS solely arising out of NDPERS' decision to participate in the Retrospective Discount Payment program.

BCBSND shall secure and keep in force during the term of this Agreement, from insurance companies, government self-insurance pools or government self-retention funds, authorized to do business in North Dakota, the following insurance coverages:

1. Commercial general liability, including premises or operations, contractual, and products or completed operations coverages (if applicable), with minimum liability limits of $250,000 per person and $1,000,000 per occurrence.

2. Professional errors and omissions with minimum liability limits of $1,000,000 per occurrence and in the aggregate, BCBSND shall continuously maintain such coverage during the term of the Agreement and for three years thereafter. In the event of a change or cancellation of such coverage, BCBSND shall purchase an extended reporting period to meet the time periods required in this section.

3. Automobile liability, including Owned (if any), Hired, and Non-Owned automobiles, with minimum liability limits of $250,000 per person and $500,000 per occurrence.

4. Workers compensation coverage meeting all statutory requirements.

The insurance coverages listed above must meet the following additional requirements:

1. Any deductible or self-insured retention amount or other similar obligation under the policies shall be the sole responsibility of BCBSND. The amount of any deductible or self retention is subject to approval by NDPERS, upon request.

2. This insurance may be in policy or policies of insurance, primary and excess, including the so-called umbrella or catastrophe form and must be placed with insurers rated “A-” or better by A.M. Best Company, Inc., provided any excess policy follows form for coverage. Less than an “A-” rating must be approved by NDPERS. The policies shall be in form and terms approved by NDPERS, upon request.

3. BCBSND shall furnish a certificate of insurance to the undersigned NDPERS representative, upon request.

4. Failure to provide insurance as required in this Agreement is a material breach of contract entitling NDPERS to terminate this Agreement immediately.

BCBSND shall not cancel or modify the insurance coverage required by this Agreement without thirty (30) days’ prior written notice to the undersigned NDPERS representative.

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IN WITNESS WHEREOF, the parties hereto have caused this Agreement to be executed, in their names by their undersigned officers, the same being duly authorized to do so.

NORTH DAKOTA PUBLIC EMPLOYEES RETIREMENT SYSTEM (PLAN ADMINISTRATOR)
PO Box 1657
Bismarck, North Dakota 58502

By: _____

Title: _____

Date: _____

BLUE CROSS BLUE SHIELD OF NORTH DAKOTA*
4510 13th Avenue South
Fargo, North Dakota 58121

NORTH DAKOTA PUBLIC EMPLOYEES RETIREMENT SYSTEM (PLAN SPONSOR)
PO Box 1657
Bismarck, North Dakota 58502

By: _____

Title: _____

Date: _____

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*An Independent Licensee of the Blue Cross and Blue Shield Association.

Exhibit "A"

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Appendix G

Contract Benefit Grid

Current Benefits

Matching Benefits and Resources

Plan on the best fit.

SANFORD HEALTH PLAN

SANFORD HEALTH PLAN

Exhibit G – Existing contract benefits (plan design, wellness, services, standards, etc.) this section identifies the existing PERS plans contract benefits. Please indicate if you can match these benefits/services and if so with what resources and if not what specifically you would not be able to provide.

Current Contract Benefits	Reference Resources	Discuss and Identify comparable service offering.
NDPERS Specific Plan Designs		
• Actives and Pre Medicare Retirees Medical plans o PPO/Basic Plan – Grandfathered o PPO/Basic Plan – Non Grandfathered • Active and Pre Medicare Retirees Rx plan o	http://www.nd.gov/ndpers/insurance-plans/group-health-ppo-basic-grandfathered.html http://www.nd.gov/ndpers/insurance-plans/group-health-ppo-basic-non-grandfathered.html	Sanford Health Plan will administer Pre Medicare Retirees Medical and Rx plans.
• Wellness Program o Dedicated Wellness Website and program similar to existing program with incentives, health club membership and employer efforts o Employer Based Wellness Program	http://www.nd.gov/ndpers/insurance-plans/employer-based-wellness.html Exhibit 1 Exhibit 2	Sanford Health Plan will administer a comparable wellness programs using our online tools and employer-based *bWell* programs.
HDHP/HSA Option for State agencies	http://www.nd.gov/ndpers/insurance-plans/group-health-hdhp.html	Sanford Health will administer the HDHP/HSA options using our vendor, Evolution1.

Current Contract Benefits	Reference Resources	Discuss and Identify comparable service offering.
General Services		
Medicare Retiree Plan o Plan F look alike	http://www.nd.gov/ndpers/insurance-plans/medicare-rx.html	Sanford Health Plan will administer the Medicare Supplement Plans internally as we currently offer Medicare Supplement, Medicare SELECT plans in the commercial market.
Separate Medicare Part D RX plan	http://www.nd.gov/ndpers/forms-and-publications/publications/grp-hlth-spd-retirees.pdf http://www.nd.gov/ndpers/forms-and-publications/publications/medicare-benefits-summary-current.pdf	Sanford Health Plan will contract with Express Scripts, Inc. to administer the Medicare Part D Plan.
Actuarial Services • Mandate cost estimates & reporting during Legislative session within 24 to 48 hours. • Trending • Financial reporting • Plan Design Options	Mandate Estimates – Exhibit 3 See Quarterly Report and Annual Report – (Exhibit 4 & 5 (Exhibit 6) See Exhibit 9	Sanford Health Plan will dedicate an Associate Actuary as well as resources from our retained actuarial staff from Milliman.

Current Contract Benefits	Reference Resources	Discuss and Identify comparable service offering.
<u>Underwriting Services</u> • Dedicated NDPERS underwriter • Enrollment processes – verify enrollments entered by NDPERS staff and sent through 834 file. Rush enrollments with immediate PTI updates, generate ID cards, mail benefit books, notify NDPERS when 834 file is bad, 834 file is mapped to correct group, roll, class of coverage using their rate structure code and coverage codes (other 834 files are required to send carrier our basic codes and class codes) and staff available always to answer questions by NDPERS office. • Eligibility (removal of dependents (EOM age 26), grandchildren when parent marries, divorce (removal for spouse and step children with or without rescission letters) • ID cards • Benefit books • Summary of Benefits & Coverage • 834 Enrollment Discrepancy Reports		• Sanford Health Plan will dedicate an Associate Actuary as well as resources from our retained actuarial staff from Milliman. • Sanford Health Plan will dedicate an enrollment coordinator to NDPERS to manage the enrollment process. • Sanford Health Plan will dedicate an enrollment coordinator to NDPERS to manage the enrollment process. • Sanford Health Plan currently utilizes a print-on-demand ID card vendor for printing, fulfilling and distributing ID cards, member handbooks, SBCs and Policies.
<u>Communications Services</u> • NDPERS newsletter items • Health focused Newsletter generated by Carrier • Letters, posters, brochures and grids • Directories	http://www.nd.gov/ndpers/forms-and-publications/index.html	Sanford Health Plan will dedicate a Communications Manager to coordinate all ND PERS communication plans.

Current Contract Benefits	Reference Resources	Discuss and Identify comparable service offering.
<u>Claims Administration & Member Services</u> • Dedicated NDPERS Pod for claims and customer calls • Subrogation, Medicare secondary payer, coordination of benefits processes • Member advocacy program • Annual satisfaction survey • Annual NDPERS claims audit • Facilitate PBM Audit • MSP Data Match Compliance • Prenatal Program enrollment/claims processing for NDPERS specific benefit • Enrollment for Tobacco Cessation Program • Subscriber Appeals • Telephone support for dedicated wellness website –dedicated PERS service unit handles calls from members	https://www.bcbsnd.com/health-and-wellness-programs/member-advocate (Exhibit 7) (Exhibit 8) http://www.nd.gov/ndpers/forms-and-publications/publications/grp-hlth-spd-actives.pdf#page=35 https://www.bcbsnd.com/search-preview/-/ndpers-tobacco-cessation	Sanford Health Plan will dedicate a Claims Supervisor to manage all ND PERS claims procedures. Sanford Health Plan will dedicate a Customer Services Supervisor to manager all ND PERS phone staff, appeals and grievance procedures. Sanford Health Plan will use existing NCQA-certified vendors to conduct consumer satisfaction surveys. Sanford Health Plan's will dedicate a Wellness Program Manager to manage the ND PERS wellness programs including a dedicated wellness service unit to handle member calls.
<u>Finance</u> • Manage & Report NDPERS risk sharing arrangement • Manage & Report NDPERS Cash Reserve Account • Process payments for NDPERS value added programs		Sanford Health Plan will dedicate a Finance Manager to manage all ND PERS finance and revenue cycle management procedures.

Current Contract Benefits	Reference Resources	Discuss and Identify comparable service offering.
• Tobacco Cessation Program • RX Disease Management Program • Employer Based Wellness Program • Billing (create monthly premium billings and group accounts receivables that report and track the total amount of premium due for all NDPERS members covered through carrier. These accounts are reconciled monthly with the payments and enrollment files submitted by NDPERS to ensure enrollment and billing accuracy) • 820 Premium Payment Discrepancy Reports		Sanford Health Plan will administer a comparable wellness programs using our online tools and employer-based *bWell* programs.
All funds in the NDPERS account at BCBS get interest paid each month based upon the yield to maturity of US Treasury Notes maturing 24 months hence. Contractor shall identify the rate they propose to use in their proposal.	Contract provision 6.5	Sanford Health Plan will replicate the current arrangement. The proposed rate is the rate as published in the WSJ at the close of the first trading day of each month.
Risk Sharing arrangement and return of funds if claims are less than premium	Sample Contract provisions 6 & 7	Sanford Health Plan acknowledges and agrees to comply.

Current Contract Benefits	Reference Resources	Discuss and Identify comparable service offering.
Information Technologies • NDPERS specific 820 payment file • NDPERS specific 834 enrollment file • NDPERS specific benefit matrix and claims processing logic • System for processing claims for Tobacco Cessation Program • Secure file transfer system • Monthly Process Improvement team meetings		Sanford Health Plan acknowledges and agrees to comply.
Legislative and Legal Services Monitor State and Federal legislation for changes affecting NDPERSMandate co estimates during Legislative session Contract reviews Develop Memorandum of Understandings for value added programsCompliance Pharmacy class action settlements Internal audit functions System for monitoring provider trends	Exhibit 3 Exhibit 10	Sanford Health Plan acknowledges and agrees to comply.
ACA Reporting & Compliance • Reporting of Minimum Essential Coverage (6055) • ACA required notices upon loss of coverage for exchanges • Monitor employer lapse in coverage for change to NGF and loss of participation if small group		Sanford Health Plan acknowledges and agrees to comply.

Current Contract Benefits	Reference Resources	Discuss and Identify comparable service offering.
Marketing and Adm Staff • Dedicated NDPERS Account Executive • Dedicated NDPERS Account Manager • Dedicated NDPERS Wellness Consultant • Dedicated NDPERS Group Consultant • Pharmacy Consulting		Sanford Health Plan acknowledges and agrees to comply by dedicating the following service staff to the ND PERS account: • Dedicated NDPERS Account Executive • Dedicated NDPERS Account Manager • Dedicated NDPERS Wellness Consultant • Dedicated NDPERS Group Consultant • Pharmacy Consulting
• Provide a stable Grandfathered benefit design by monitoring activities and regulations to limit risks		Sanford Health Plan acknowledges and agrees to comply.
• Benefit overviews for agencies and political subdivisions • Complete an annual minimum participation and contribution survey • Monitor performance guarantees • Monitor and address Legislative items • Member education programs for agencies and political subdivisions • Conduct routine meetings with NDPERS staff to ensure adequate communication on items such as wellness, process improvement, benefit designs changes, and new programs.	In 2013, there were 37 employers who held benefit overview presentations. https://www.bcbsnd.com/web/employers/wellness-programs/member-education In 2013, 87 employer groups held member education presentations (3,423 members).	Sanford Health Plan acknowledges and agrees to comply by using local account representatives to conduct service meetings.

Current Contract Benefits	Reference Resources	Discuss and Identify comparable service offering.
<u>Reporting</u> • Quarterly Executive Summary and Annual Assessment • Monthly data files through secure file transfer system • Adhoc reporting including cost, utilization and risk analysis • Provide flexible spending account files to NDPERS ADP	See Quarterly Report and Annual Report – Exhibit 4 & 5	Sanford Health Plan acknowledges and agrees to comply.
Wellness Programs		
<u>Dedicated Wellness Website</u> o Dedicated Wellness Program o Dedicated NDPERS portal o NDPERS specific voucher points o Developed wellness website challenges • Health Club Credit program • Support Wellness Star of the Month award designation. Promote community based wellness activities and award points for participation. • Develop and promote targeted messaging on Blood Pressure. • Monthly WebEx's provided by member education on dedicated wellness website and health club credit.	Exhibit 1 Exhibit 11 Exhibit 12 Exhibit 2 Exhibit 13	Sanford Health Plan will administer a comparable wellness programs using our online tools and employer-based bWell programs.

Employer Based Wellness Program • Dedicated wellness specialist to assist coordinators with wellness activities, planning and implementing ideas. • Planned and coordinated summer Wellness Coordinator workshops. • Support the Lt Governor's Award for Worksite Wellness with HealthyND. • Monthly Newsletter for Wellness Coordinators • Monthly conference call with Wellness Coordinators • Provide monthly wellness articles for distribution to coordinators/employees. • Provide monthly posters for distribution to wellness worksites. Employer Based Wellness Funding Program • Wellness consultant on evaluation team • Review and score applications • Administer payment of invoices from NDPERS Wellness EducationOn site wellness presentations at employer worksites • Benefit presentations at employer worksites Support Vaccination Awareness program with Department of Health • Create flyers for NDPERS web targeting specific disease/medical conditions • Organize the NDPERS Retiree Health Fairs . • Coordinate National Walk @ Lunch Day • Participate in COSE wellness fair at capitol each September	http://www.nd.gov/ndpers/insurance-plans/employer-based-wellness.html Exhibit 14 Exhibit 15 http://www.nd.gov/ndpers/insurance-plans/employer-based-wellness.html Exhibit 16 http://www.nd.gov/ndpers/forms-and-publications/publications/additional-bcbs-wellness-programs.pdf	Sanford Health Plan will administer a comparable wellness programs using our online tools and employer-based bWell programs.

Current Contract Benefits	Reference Resources	Discuss and Identify comparable service offering.
Rx Services		

Pharmacy Benefit Manager Programs
• Integrated medical and pharmacy services
• Clinical programs
• Generic incentive programs
• Specialty pharmacy program
• RX mail order services
• Formulary program
• Drug utilization reviews
  • Retrospective DUR
  • Concurrent DUR
  • Prospective DUR
  • Guided Health Medication Therapy Management Program
  • Member rebate accounts Rebates passed to NDPERS Carrier has set up a Member Rebate Account (MRA) in the member's name. Accounts are set up at the member level. For every eligible brand prescription medication a member purchases at the point-of- sale (electronic claim), they will receive an appropriate portion of the manufacturer rebate associated with that particular medication into their MRA. Please note this program does not apply to COB or paper claims.
	https://www.myprime.com	Sanford Health Plan acknowledges and agrees to comply with the exception of the Member Rebate Account. If selected as a finalist, Sanford Health Plan will initiate a development plan to create member rebate accounts, however, cannot guarantee that MRA will be operational by July 1, 2015.

Current Contract Benefits	Reference Resources	Discuss and Identify comparable service offering.
• Establish a nationwide Select Pharmacy Network • Claims processing for Part D program		Sanford Health Plan will contract with Express Scripts, Inc. to administer the Medicare Part D Plan and the nationwide pharmacy network.
Medical Management and Provider Services		
Medical Management • – Patient medical home • – rare and complex disease management • Disease management program for out of state members • member advocacy programs • Preauthorization's • Concurrent review/discharge planning • Prior approvals • Benefit inquiries • Therapy review process • Chiropractic review • Large case management • Prenatal Program with NDPERS specific benefits • Prenatal text messaging program • Provider news letters	https://www.bcbsnd.com/health-and-wellness-programs/mediqhome https://www.bcbsnd.com/health-and-wellness-programs/disease-management https://www.bcbsnd.com/health-and-wellness-programs/member-advocate http://www.nd.gov/ndpers/forms-and-publications/publications/grp-hlth-spd-actives.pdf#page=35 https://www.bcbsnd.com/health-and-wellness-programs/text4baby	Sanford Health Plan will administer a comparable Medical Management program.

Current Contract Benefits	Reference Resources	Discuss and Identify comparable service offering.
Provider Relations • Carrier owned provider network • Total cost of care contracts • National network (total out of state discounts = Provider credentialing and contracting • Physician Quality Measurement Program • Physician Recognition Program • Patient Review of Physicians Program	http://provider.bcbsnd.com 97.7% of providers in Network 35% discount off in state changes. An NDPERS specific PPO network in addition to vendors network	Sanford Health Plan acknowledges and agrees to comply.
Medicare Part D		
• Special contract for administration of Part D product • NDPERS specific benefit plan design • NDPERS specific Part D online enrollments – NDPERS does handle enrollment, however carrier receives reports each week with any enrollment discrepancies and then works with the PDP vendor and NDPERS to rectify those. NDPERS and carrier both share in working with specific Part D enrollments. • NDPERS specific Part D billing – carrier handles the billing that come directly from Medicare Rx each month in a paper format. Carrier pays directly to Medicare Rx the premium amount requested on the bill. A dedicated Membership person that manually goes over the bill for discrepancies each month and will find any issues we may have with the bill. • Research member enrollment/disenrollment exception	http://www.nd.gov/ndpers/insurance-plans/medicare-rx.html	Sanford Health Plan will contract with Express Scripts, Inc. to administer the Medicare Part D Plan.

Current Contract Benefits	Reference Resources	Discuss and Identify comparable service offering.

report
• Monthly meetings with Part D vendors
• Notification and tracking of late enrollment penalty (LEP)
• Notifications and tracking of Income-related monthly adjustment amount (IRMAA)
• Annual Adjustment to Part D rates based on the Federal subsidy and the Low Income Subsidy (LIS)
• Part D Reporting
  • Request for Information reports
  • NDPERS PDP Member Change reports
  • NDPERS PDP Response Error report
  • HICN reports
  • Gap/Cat
  • Process other internal and adhoc reporting
	Exhibit 17	

Health Savings Account		
Health Savings Account • Administration of HSA's • Administer payment of monthly invoice from NDPERS Cash Reserve Account •	http://www.nd.gov/ndpers/insurance-plans/group-health-hdhp.html	Sanford Health will administer the HDHP/HSA options using our vendor, Evolution1.
Additional Administrative Programs		

• Tobacco Cessation Program
  • Grant application and contract
  • Enrollment
  • Claims processing
  • Reporting requirements
  • Invoices for grant reimbursement
	https://www.bcbsnd.com/search-preview/-/ndpers-tobacco-cessation	Sanford Health Plan will administer a comparable wellness programs using our online tools and employer-based bWell programs.

Current Contract Benefits	Reference Resources	Discuss and Identify comparable service offering.

• RX Disease Management Program (About the Patient)
  • Eligibility reporting
  • Cost share incentive reporting
  • Administer payment of invoices from NDPERS Cash Reserve Account
	http://www.aboutthepatient.net/NDPERS-Program.html	Sanford Health Plan acknowledges and agrees to comply.

Miscellaneous		
Provide access to all subject matter experts and other appropriate personnel and make them available for attending board meetings, legislative, hearings, etc. as needed • Provide access to video or teleconference for Board meetings		Sanford Health Plan acknowledges and agrees to comply.

Request for Proposal
for

North Dakota Public Employees Retirement System
Self-Insured
Group Medical & Prescription Drug Coverage

October 10, 2014

Plan on the best fit.

SANFORD HEALTH PLAN

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Summary of Proprietary, Confidential and/or Trade Secret Information

The responses in the following questions include trade secret, proprietary or financial information that is privileged and has not been previously publicly disclosed. This information is to be held confidential and is prohibited from being disclosed to the public:

- Cost Proposal
- Fee Disclosure Analysis
- Disruption Analysis

- Qualitative Proposal Questions pertaining to Reimbursement and Discounts: # 59, #60, #61, #62, and #63.

SANFORD HEALTH PLAN

Questionnaire

Organizational Background, Strength, and Experience

1. **Provide a brief description of your organization, including your company history, organizational structure, services provided, location of headquarters, and length of time you have been in business. Describe any significant historical or future organizational developments (acquisitions, mergers, change in subcontracted vendors, etc.).**

   In 1996, Sioux Valley Hospitals & Health System formulated a corporate response to the changing health care marketplace, the rapid growth in the number of managed care service organizations, and the need to meet the coverage requirements of Medicare-eligible persons residing with the organization's tri-state service area. A panel of health care professionals was thus assembled and charged with the responsibility of researching, designing, and developing the requisite infrastructure for an outcomes-based health maintenance organization that would be recognized in the local marketplace and associated with quality health care. The result was the formulation of Sioux Valley Health Plan.

   In March 2007, Sioux Valley Health Plan changed its name to Sanford Health Plan as a result of a generous gift of $400 Million to Sioux Valley Hospital & Health System from South Dakota businessman, Denny T. Sanford. Subsequently, the Sioux Valley Board of Trustees unanimously voted to re-name the healthcare system "Sanford Health" and Sioux Valley Health Plan was also renamed "Sanford Health Plan."

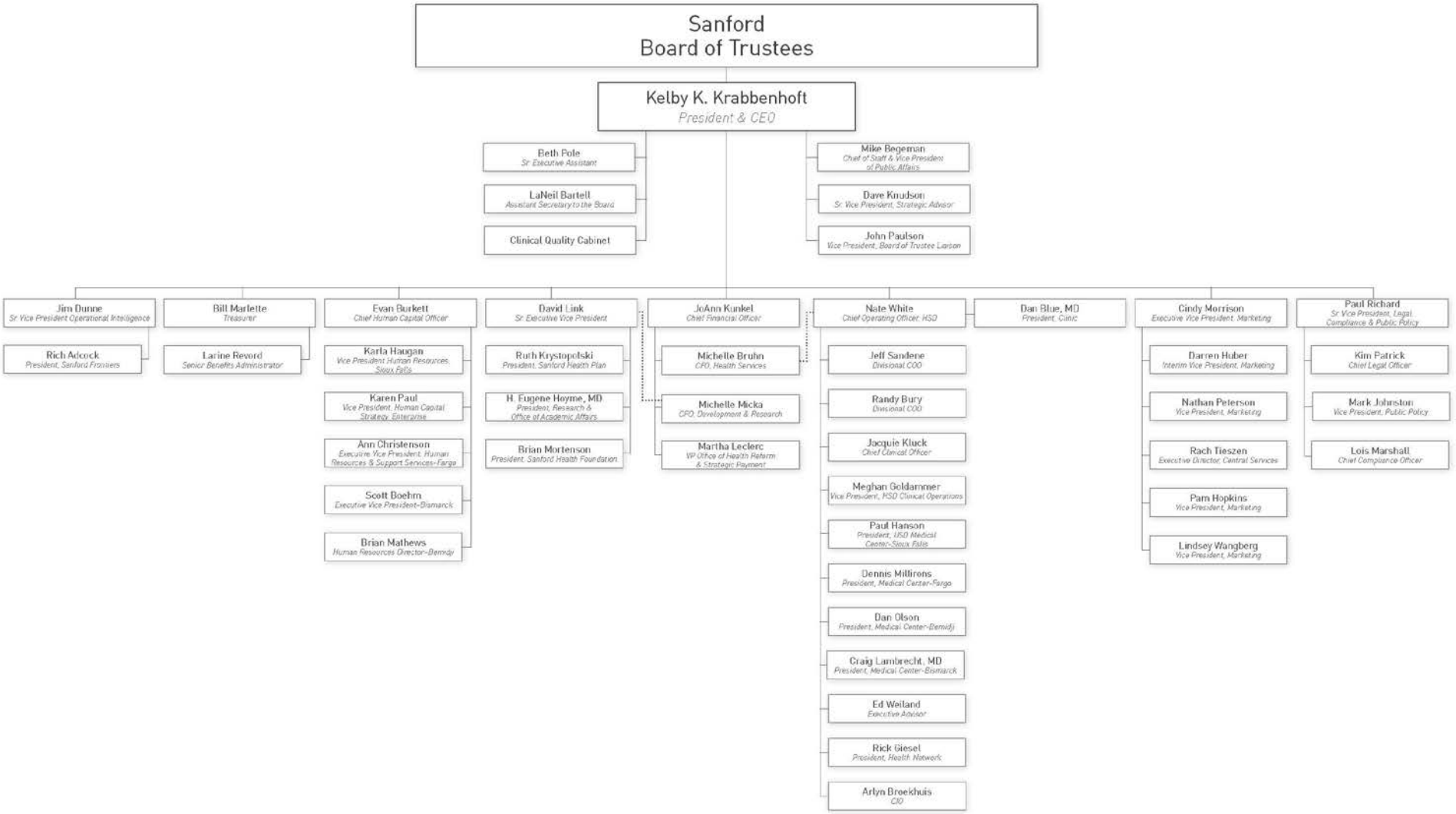
   Sanford Health Plan is a not-for-profit, community-based HMO that began operations in South Dakota on January 1, 1998. Managed care services are provided to large and small groups in South Dakota, North Dakota and Iowa by Sanford Health Plan and in Minnesota by Sanford Health Plan of Minnesota which is a subsidiary of Sanford Health Plan. Sanford Health Plan was designed to align physicians and hospitals, establish a framework for providers to efficiently manage the delivery of health care services, and operate on the strength of affordable premiums.

   Central to the design of Sanford Health Plan is a collaborative effort between Sanford Health, contracting providers, and member representatives of service area communities. Each of these elements offers unique perspectives, and acknowledgment that health care resources are finite. Accordingly, maintenance of the Plan's financial viability is based upon the application of sound, balanced, and efficient healthcare practices. Sanford Health Plan is authorized to offer three core products. These products are described as follows:

   1. Integrated Delivery Network (IDN) - A non-risk bearing product in which enrollees may access any network physician and receive the same level of benefit. Extensive care management services are available to enrollees.
   2. Point Of Service (POS) - A risk-bearing product in which enrollees choose at each medical encounter whether to seek care from in-network or out-of-network providers. Financial incentives are offered to enrollees selecting in-network providers through increased benefit levels.

3. Health Maintenance Organization (HMO) - A risk-bearing product that provides enrollees with benefits only when in-network providers are utilized. Extensive care management services are available to enrollees.

Sanford Health Plan was granted its Certificates of Authority in 1998 by South Dakota, Iowa and Minnesota and North Dakota in September 2009. All health plan operations occur at its corporate office in Sioux Falls, South Dakota. The next two organizational charts illustrate Sanford Health and Sanford Health Plan.



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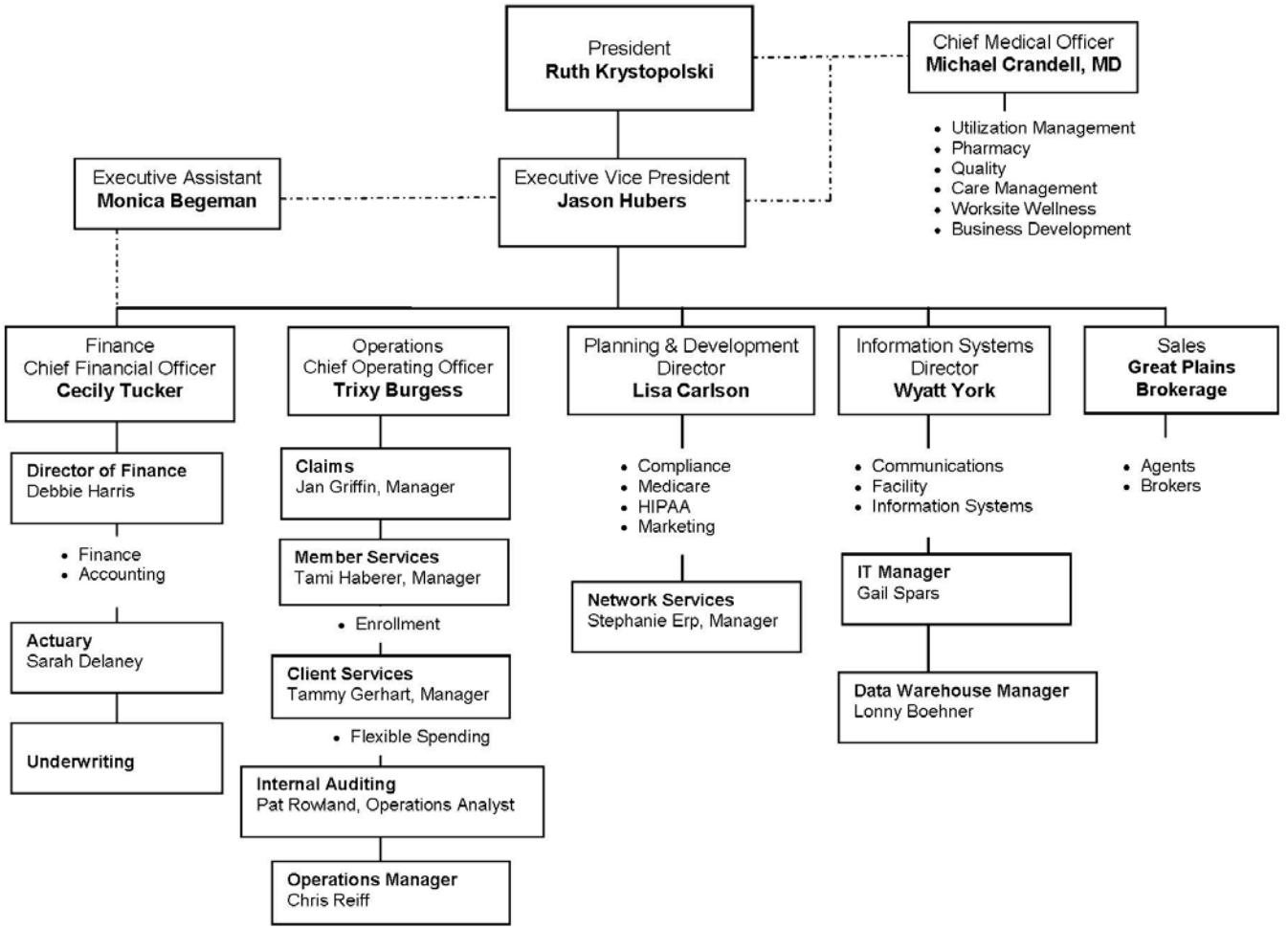
SANFORD HEALTH

Sanford Health Plan



02.2013

Sanford Health Plan offers the follow products:

- Third Party Administration (TPA) services since 1998
- Federal Employee Health Benefit Plan (FEHB) in South Dakota and Iowa since 2002
- Section 125 Plans since 2003
- Medicare Supplement Plans and Sanford SELECT Plans (distinguished by a limited network of hospital and ambulatory surgery centers in concert with competitive premiums) in South Dakota since 2003; Iowa and Minnesota since 2004; and North Dakota since 2010
- HSA-Qualified High Deductible Health Plans since January 2005
- Individual Plans marketed as Sanford "elite1" in South Dakota since 2008 and since 2010 in North Dakota
- Marketplace Insurance Exchange products since January 1, 2014 in Iowa, North Dakota and South Dakota.

Sanford Health Plan has no equity partners. No outstanding stock exists and no dividends are distributed. Premium revenue is utilized solely on behalf of Plan members according to Internal Revenue Service requirements. Additionally, Sanford Health Plan is the second largest carrier in the state of South Dakota.

2. Vendors responding to this RFP must be able to substantiate their financial stability. Provide a copy of your audited financial statement or other financial information. Include, at a minimum, a Balance Sheet and a Profit and Loss Statement, together with the name and address of the bank(s) with which you conduct business and the public accounting firm(s) that audit your financial statements. Other sufficient information may include a written statement from a financial institution confirming the creditworthiness and financial stability of the vendor.

First PREMIER Bank Address & Contact Information:

First PREMIER Bank
601 S Minnesota Avenue
PO Box 1348
Sioux Falls, SD 57101-1348

Contact –
Lisa Wehrkamp, Business Banking Assistant
Business: 605.357.3027

Auditor Address and Contact Information:

Deloitte & Touche LLP
50 South Sixth Street
Suite 2800
Minneapolis, MN 55402-1538

Additionally, please refer to the following attachments:

- Attachment A – Sanford Health Plan, Audited Financial Exam Report

Sanford Health Plan does not have a statement of creditworthiness.

3. **Provide a copy of any State or Federal regulatory audit performed within the last two years.**
   Please refer to the following attachments:
   - Attachment B – Sanford Health Plan, South Dakota DOI Exam Report

4. **Confirm that your organization agrees to be accountable for everything stated in and submitted as part of your proposal, even if not specifically addressed in the proposed sample contract/ASA.**

   Sanford Health Plan agrees to be accountable for all services as submitted as part of this proposal, even if not specifically addressed in the attached sample Administrative Service Agreement.

5. **Indicate whether your company has ever been or is currently a party to litigation regarding a medical benefit plan contract or agreement. If so, provide details of the litigation or action. Failure to disclose this may constitute grounds for rejection of any proposal or termination of any contract.**

   Sanford Health Plan has been involved in only one legal action. Sanford Health Plan (formerly known as Sioux Valley Health Plan) was named as the Defendant in a Civil Action on April 29, 2004 for a South Dakota resident who was a health plan Member in an employee welfare benefit plan governed by ERISA. The Member elected COBRA, however, the initial premium was not paid within the 45 day grace period and the Member was consequently terminated. Claims incurred after the date of termination were denied. The 8th circuit court found in favor of Sioux Valley Health Plan.

6. **State whether the vendor, its officers, agents or employees, who are expected to perform services under the NDPERS contract, have been disciplined, admonished, warned, or had a license, registration, charter, certification, or any similar authorization to do business suspended or revoked for any reason.**

   None of Sanford Health Plan's executive management as listed in Section 1 above has been disciplined, admonished, warned, or had a license, registration, charter, certification, or any similar authorization to do business suspended or revoked.

7. **Include a description of your organization's major short term strategic initiatives and your long term strategic business plan. Specifically address cost containment efforts.**

   Sanford Health Plan is committed to adapt to the Accountable Care Act both in the immediate 12-24 months and in the long term over the next 3 to 5 years.

   Our membership goal is to attain an annual growth of 5% in overall membership

   Cost Containment continues to be at the forefront of all our strategic initiatives. We are committed to furthering the integration with the Sanford Health Services Division by leveraging opportunities to jointly share information and impact the health of our members who are patients. This will be accomplished by:

- Integration between care management and patient centered medical home teams;
- Integrating data from applications, health risk assessment and screenings with medical homes in the clinics;
- Alignment of disease management programs with medical homes; and
- Continued promotion of and integration with Occupational Medicine and wellness activities.

8. Describe how your organization differentiates itself from your competitors. Specifically, what makes your organization the best partner for NDPERS?

Sanford Health Plan is excited to have the opportunity to further our relationship with the state of North Dakota. We understand the challenges faced by our clients with regards to the cost of healthcare, utilization of service, and an understanding the value of preventive care benefits. As a part of a fully-integrated health delivery system who is also our largest self-funded client (Sanford Health), we are currently held to a level of complete accountability through provider network contracting arrangements and our health plan management.

Currently, 57% of our enrolled business exists in risk-based HMO products. This composition compels us to be diligent about cost savings, utilization, and population management versus traditional TPA services whose focus is to process claims with little to no accountability. As a result of our structure, Sanford Health Plan incorporates its population management techniques and focus on value of services delivered into the daily process provided to all our clients regardless of where risk resides.

We commit to complete transparency of data and full reporting capabilities as well as local decision-making authority and control. Our intent is to ensure that the state of North Dakota has the information that is needed to manage one of its' largest expenses. Our focus is always to be a partner in managing our client's health care dollars while continuing to raise the bar on overall quality of care. Presently, Sanford Health Plan's "Commendable" certification by the National Committee for Quality Assurance illustrates our commitment to quality care.

Sanford understands and commits to PERS a partnership that will accomplish the following goals:

1. Manage healthcare costs to maintain affordable premiums for you and your employees;
2. Provide full data transparency and analysis of utilization, quality of care, cost efficiency, and comparative provider cost and utilization data;
3. Develop and deliver information in formats that are useful in planning and decision making;
4. Educate and inform your employees to become engaged healthcare consumers
5. Prompt and accurate claims processing;
6. Identify and implement innovative programs to address costs and quality of care provided;
7. Superior customer service; and
8. Web-based tools that assist in eligibility, benefit experience review, and claims management services available to staff and employees.

In addition, Sanford would like to take this opportunity to communicate additional services we are able to offer. Sanford, in the entirety of the Health System, extends the invitation to create a partnership that will result in greater hands-on care for your employees, while at the same time increasing your cost savings for services at the Sanford provider level. Our goal would be to develop a medical home shared risk structure for the Bismarck and Fargo marketplace that would be identified and agreed upon by July 1, 2015. Additionally, we would contract for services that PERS would desire to have outside of the risk arrangement.

We currently envision this arrangement to come in the form of a fully-capitated or Episode of Care model. We would also like to jointly develop targets across disease states or processes that are important to the North Dakota population and are willing to accept an incentive based payment structure structured around these targets. Our goal would be to build a model, including all required infrastructure (reporting templates and contracting templates) in all of Sanford's applicable locations. For example, our combined relationships in North Dakota communities would allow our potential partnership to expand geographically and provide mutually beneficial results as we define and work towards common goals.

Our current payment system is extremely flexible and we are able to run multiple fee schedules for different product lines simultaneously. These fee schedules can also tie reimbursement models to quality/protocol targets as well. Additionally, we can build withholds or risk based payments based on specific criteria and apply to different payment methodologies. We welcome the opportunity to work with the State on this innovative and progressive partnership model.

Sanford Health Plan commits to an arrangement to help your organization meet its objectives with regards to quality healthcare and cost containment. Our goal will be to provide expert services that enable the PERS to focus on the overall improvement of the health of your employee population and strategic business planning and development.

9. Identify all services that are currently outsourced or subcontracted, the name of the vendor/partner, and length of the relationship. Describe how you ensure quality customer service and timely and effective issue resolution.

Quality Customer Service

Sanford Health Plan ensures quality customer service by tracking member-to-staff ratios, call logs, and quality measures. The Claims department and Member Services department are physically located within close proximity to each other to facilitate efficient workflow and communication to address and resolve questions as quickly as possible. All Member Service and Claims representatives rely on the same claims payment system to view benefits. Representatives can also simultaneously view the member's online myHealthPlan account information to address and discuss exactly what the member is seeing online.

Sanford Health Plan evaluates phone call statistics and staffing needs for the Member Services Department to ensure members have timely access to customer service.

All claims and customer service calls are received at a central location conducive to open, inter-department communications in order to resolve inquiries in a timely manner.

Call centers are not outsourced to external (or international) companies not familiar with health plan operations and the details of plan design and claims payment processes.

Additionally, all calls are always answered by a live person during normal business hours. Calls are not sent to voicemail if the call queue is busy, nor do callers ever receive a busy signal. Callers are not required to dial in their member ID numbers or any other information prior to a call being answered; all member information is collected by the receiving Member Service representative to create a personal and courteous experience.

Performance Standards

All Member Service phone calls and emails are logged and recorded. Call center statistics show number of calls answered, calls made, voicemails and abandoned calls. It also shows the answer speed of calls and the rate of abandonment and voicemails. Call answer timeliness is the percentage of calls received by the Plan's member services call center (during operating hours) that were answered by a live voice within 30 seconds.

The call abandonment rate is the percentage of calls received by the Plan's member service call center that were abandoned by the caller before being answered by a live voice. These statistics are measured monthly and used by the Quality Committee on a quarterly basis to determine opportunities for improvement.

Finally, Sanford Health Plan conducts annual consumer satisfaction surveys rating the health plan on customer service and claims processing.

Additionally, performance guarantees are tied to ensure Average Speed of Answer will be 30 seconds or less and the abandoned rate will be 5% or less.

Below is a list of Sanford Health Plan vendors and contractors.

Vendors	Service/Activity Provided	Location	Length of Relationship
AAA Collections	Collections Agency	Sioux Falls, SD	12 years
GHI Medicare	Medicare COB Crossover	Louisville, KY	9 years
Optum (formerly known as Ingenix)	Subrogation - Claims Savings & Recovery	Green Bay, WI	11 years
Advanced Business Fulfillment	Outbound mail service agreement	St. Louis, MO	9 years
AIM HealthCare Services, Inc.	Pre-payment Claim Validation	Franklin, TN	4 years
Decision Support Systems, Inc.	Physician Satisfaction Research Services	Fort Worth, TX	11 years
Express Scripts, Inc.	Pharmacy Benefit Claims Processing	Maryland Heights, MD	14 years

Great Plains Brokerage	Sales & Marketing	Sioux Falls, SD	16 years
Language Line® Certified Medical Interpreting Service	Interpretation Services	Monterey, CA	8 years
McKesson LLC	InterQual Services	Scottsdale, AZ	12 years
Milliman USA	Actuarial Services	Brookfield, WI	16 years
Evolution1, Inc.	Flexible Benefits Software Consulting Services	Fargo, ND (general), Simsbury CT (support), Edina MN (sales) and St. Louis MO (marketing)	8 months
EPIC	Claims Processing Software Services	Middleton, WI	3 years
Starline	Reinsurance	Minneapolis	8 years
Travis	COBRA Software	Houston, TX	16 years
HealthX	Online Account Portal	Indianapolis, IN	5 years
Verisk	HEDIS/Analytics	Waltham, MA	3 years
VIIAD	Online Provider Directory	Langhorne, PA	4 years
National Medical Reviews, Inc.	Independent Medical Review Organization	Southampton, PA	3 years
Medwork of Wisconsin, Inc.	Independent Medical Review Organization	Eau Claire, WI	3 years
IPRO	Independent Medical Review Organization	Lake Success, NY	3 years

Additionally, Sanford Health Plan contracts with the following Network Repricing vendors to ensure adequate access and availability for our Membership nationwide.

SANFORD HEALTH PLAN

10. What ratings have you received from the following third party rating companies and organizations?

Sanford Health Plan is a wholly owned subsidiary of Sanford Health, an integrated healthcare delivery system with $2.3 billion in operating revenue for 2011. Sanford Health has an A1 Moody's bond rating and AA- Standard & Poors rating.

Rating Organization	Rating	Date of Last Accreditation / Rating
A.M. Best	NA	
Standard & Poor's	NA	
Moody's	NA	
NCQA (by product)	HMO - Commendable	11/15/16
JCAHO	NA	
URAC	NA	
American HealthCare Commission	NA	

11. What fidelity and surety insurance or bond coverage do you carry to protect your clients? Specifically describe the type and amount of the fidelity bond insuring your employees that would protect this plan in the event of a loss. Do you agree to furnish a copy of all such policies for review by legal counsel if requested?

Sanford Health Plan maintains a Fiduciary Liability Insurance with an aggregate limit of $15M and a $50,000 Deductible and a Managed Care Errors & Omissions Policy with a $5M aggregate limit and a $100,000 per claim limit. We wil furnish copies of these policies upon request.

12. Are any of the services you are proposing to provide to NDPERS contracted outside the U.S.A? Describe any business you do outside the U.S.A. and the financial impact, if any, of requiring those services to be provided within the U.S.A.

All business is conducted inside the United States.

13. Confirm that your proposal includes any and all deviations to the sample ASA (via submission of Exhibit F) and to the other RFP requirements (via Exhibit F, worksheet 2).

Please refer to Exhibits F1, F2 and F3 under separate cover with this proposal.

SANFORD HEALTH PLAN

14. Confirm that you will to the best of your ability conform to the Patient Protection and Affordable Care Act and the Health Care and Education Reconciliation Act of 2010. Describe any provisions that NDPERS must be prepared to comply with.

Sanford Health Plan currently coordinates regulatory compliance not only federally but within the four state areas of Iowa, Minnesota, North Dakota and South Dakota. Regulatory monitoring and compliance at the health plan is coordinated by the Director of Planning & Regulation, the Associate Actuary and two Policy Analysts. Additionally the health plan tracks legislation at the federal level jointly with the health system's Office of Public Policy which includes the Vice President of Health Policy and three Policy Analysts. Sanford Health Plan is a member of AHIP, the Minnesota Council of Health Plans, and the Iowa Federation of Insurers.

Sanford Health Plan successfully transitioned non-group and fully insured small-group plans (except grandfathered plans) to ACA-compliant plans inclusive of the required essential health benefits (EHB) package.

Sanford Health Plan also allowed members and group clients to renew existing individual market and small group market plans even if they do not include the full menu of required health care reform benefits pursuant to the Department of Health and Human Services (DHHS) "Transitional Policy."

Under the transition policy, Sanford Health Plan chose to extend individual market and small group market policies that were in effect on October 1, 2013 without amending the policies to meet all ACA standards. The transition policy does not apply to individuals or small businesses that obtain new coverage after October 1, 2013. The transition policy applies to renewals of existing business occurring from January 1, 2014 until October 1, 2014. HHS indicated that it will re-evaluate this policy in 2014 and could extend it to additional renewal months.

As required, Sanford Health Plan provided notification to its enrollees the following:

- The options available to them;
- Which of the specified ACA market reforms would not be reflected in any coverage that continues;
- Their potential right to enroll in a qualified health plan offered through a Health Insurance Marketplace and possibly qualify for financial assistance;
- How to access such coverage through a Marketplace; and
- Their right to enroll in health insurance coverage outside of a Marketplace that complies with the specified market reforms.

Sanford Health Plan continues to track which policies are:

- Transitional policies (but not technically grandfathered);
- Grandfathered policies; and
- Non-Grandfathered policies.

As well as tracking policies that comply with certain ACA market reforms, including:

- The requirement to limit premium variations to age, tobacco use and geography
- Essential health benefits
- Actuarial value metal levels
- Restrictions on cost sharing
- Guaranteed availability of coverage
- Guaranteed renewability of coverage
- Non-discrimination against a provider operating within their scope of practice
- Non-discrimination in coverage for individuals participating in approved clinical trials
- Prohibition of pre-existing condition exclusions or waiting periods for adults (exclusion would not apply to small group)
- Prohibition on health status discrimination (exclusion would not apply to small group)

Through our flexible claims administration system we are able to administer the tiered benefits that have been complicated by the ACA.

Sanford Health Plan is committed to aid the state in finding balance to both strategic and financial factors when making decisions about offering coverage to their employees in the months and years to come in the post-reform market. Sanford Health Plan will guide NDPERS to implement additional provisions as required under the ACA including the following provisions that will affect NDPERS during the next biennium:

- Additional preventive care services with an “A” or “B” rating by the U.S. Preventive Services Task Force (USPSTF) including screening tests, counseling, immunizations, and preventive medications.
- Transitional Reinsurance Assessments 2014 – 2016
- Medical Loss Ratio Rebates
- Health Insurance Provider Fee
- Changes in essential health benefits or state mandates
- Tracking grandfathered status
- Non-Discrimination 105(h) Rules
- Employer Shared Responsibility Mandate and related information reporting requirements under IRC section 6056
- Patient-Centered Outcomes Research Institute Fee
- High Cost Insurance Excise Tax (2018)

References and Experience

15. **Provide the following information on a maximum of three (3) of your largest medical plan clients for whom you provide medical network, insurance, and administrative services. References of similar size and scope to NDPERS are preferred; one must be your largest public sector client and one must be your largest North Dakota-based client.**

    a. **Name of employer sponsoring plan and location**
    b. **Type of services provided to plan sponsor**
    c. **Plan inception date**
    d. **Length of time as client**
    e. **Number of contracts and members participating in the plan**
    f. **Contact information (name, title, phone number, email address)**

    Other than our own self-funded organization of Sanford Health (with 34,198 members), we do not have a similarly sized client to PERS to use for reference. Please accept the following references below:

    ND Department of Human Services
    Medicaid Expansion Program
    Effective: January 1, 2014
    Client for 8 months
    12,716 contracts / total members 12,716
    Maggie Anderson, Executive Director, (701) 328-2538 / manderson@nd.gov

    Joint Venture Group – South Dakota Schools Group Insurance Pool
    Fully insured client with Worksite Wellness
    Effective: July 1, 2000
    An average of 60 schools participating for 12 years
    2417 Contracts / 4011 Members
    Dean Christensen / (605) 874-2161 Ext. 204) / dean.christensen@k12.sd.us

16. **Provide the following information for two (2) of your largest medical plan clients that have terminated services during the preceding 3-year period. References of similar size and scope to NDPERS are preferred.**

    a. **Name of employer sponsoring plan and location**
    b. **Type of services provided to plan sponsor**
    c. **Plan inception date**
    d. **Length of time as client**
    e. **Number of contracts and members participating in the plan**
    f. **Reason for termination**
    g. **Contact information (name, title, phone number, email address)**

    Please note that we have not had any of our large groups similar to the size of NDPERS terminate. We respectfully submit the following terminated references:

    Huron Regional Medical Center
    Fully insured client
    Effective: 01/01/07
    Participating for 5 years
    208 contracts / 429 members
    Terminated due to rates
    Rhonda Hanson, HR Director / (605) 353-6200 / rhanson@huronregional.org

SANFORD HEALTH PLAN

Adams Thermal
47920 5th Street
Canton SD 57013
Benefits Manager: Bryan Plowman
Phone: (605) 764-1108
Kathy Wynia, Benefits Manager / (605) 764-1157 / kwynia@adamsthermal.com

Fully insured group
Effective 01/01/2005 to 12/31/2008 – 4 years with SHP
Termination reason: Moved to Medica due to rates
Subscribers 303 / members 629

Implementation and Account Management

17. **Proposers must outline in detail the specific activities and tasks necessary to implement the NDPERS program. Be specific with regard to the following:**
    - **Amount of total time needed to effectively implement the program**
    - **Activities/tasks and corresponding timing**
    - **Responsible parties and amount of time dedicated to implementation, broken out by vendor and NDPERS staff**
    - **Any transition activities required with incumbent carriers, including providing members adequate notice regarding current care or treatment plans at least 60 days prior to a change**
    - **Length of time implementation team lead and members will be available to NDPERS**

    As a new carrier, Sanford Health Plan would need to begin implementation immediately after vendor selection. We would expect to hire new, Fargo-based staff that physically reside and work in at least the Fargo and Bismarck regions to start. Ideally Sanford Health Plan would prefer nine (9) months implementation time from Oct. 1st through June 30th.

    An account the size of the NDPERS will require dedicated resources throughout the implementation period. Therefore, we will provide the state with a number of dedicated resources from our Management Team. Upon the award of the contract, Sanford Health Plan will immediately hire a dedicated Director for NDPERS who will work closely with the management team to identify distinct responsibilities and ensure efficient task coordination and a common understanding of NDPERS-specific needs and objectives.

    Hiring and Training of Dedicated Staff

    In addition to our dedicated NDPERS Director, we will hire department staff to build Member Services, Claims, and Management, Utilization Management, Network Services, Finance and Client Services staff dedicated solely to service the NDPERS account and membership. Some of these staff will be co-located with existing staff already serving the Sanford Health Commercial product lines. This co-location will enable us to utilize the experience of the staff to provide comprehensive, program-specific training for NDPERS staff as well as opportunities to foster a culture of collaboration.

    Claims and Member Service

    After identifying the main contacts of these departments, we will review the NDPERS Program with all staff including claims configuration and processing requirements, certification of benefits rules, and performance standards.

    Telecommunications

    The NDPERS Director will work with the appropriate departments to design phone prompting and intake scripting/greeting language, with approval by NDPERS. We plan to activate our toll-free NDPERS Program number so it is available to answer calls during the NDPERS open enrollment period.

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Network Development

Once it is confirmed that Sanford Health Plan is the selected carrier, create a customized network development plan for the Program based on our current understanding of the NDPERS program needs which will include amend our current provider contracts to ensure NDPERS specific discounts on top of our current provider discounts. As part of this plan, we will target the Program's high-volume clinicians and facilities prior to implementation. In addition to high-volume clinicians and facilities, we will pursue additional clinicians and facilities in limited access areas as identified in the GeoAccess report included in our proposal. With the NDPERS approval, we will distribute a letter of invitation. During the January and February months of 2015, we will accept applications, perform credentialing, and follow up with non-responders. Throughout the transition period, we will recruit willing providers who are currently treating members to ensure continuity of care.

Training for Network Providers

Sanford Health Plan will provide a NDPERS-specific training program for our clinicians and facilities serving the Program. This training program will include an overview of the benefits (e.g., copayments and deductibles); information about our online provider services; an overview of our UM protocols; and coordinated communications and training with medical network management to optimize medical-behavioral synergies.

Eligibility

With the help of the NDPERS, we will determine eligibility requirements for Program members. We will agree upon an eligibility file format, and provide test data until all formatting issues are resolved. We will then receive and upload the full production file, including COBRA eligibility, to our claims administration system.

Reporting

We will design a reporting grid and submit it to the NDPERS for approval. We will develop reporting protocols regarding frequency and delivery and confirm all ad hoc reporting requirements for the Program.

External Vendor Interface

Our Management Team will determine external vendors' needs and interface requirements, and provide training, as needed. In addition, as part of our any wellness programs and disease management programs we will establish pharmacy and medical data feeds to identify opportunities for outreach and determine effective intervention strategies.

Communications

We will develop an initial and ongoing communications strategy with feedback from NDPERS. We will design materials and distribute approved materials as agreed. The Client Services Team will develop an orientation presentation for NDPERS Program members, conduct orientations on benefits, and attend NDPERS Health Fairs and open enrollment meetings that are conducive to NDPERS timelines.

Customized Web Site

Our information technology department will determine the internal and external links required, and the flexibility to customize the site for NDPERS members, and activate the site with NDPERS approval. The site will include NDPERS member-specific information when members log into their myHealthPlan Account in addition to NDPERS-specific online provider directory.

Performance Guarantees

Our Account Team will finalize the performance guarantee grid and explain penalty distributions and payment procedures in a communication to all areas including client reporting. We will have distributed the final information to our departments by December 31, 2014.

Date	Task	Responsibility
Oct. 2014	Award Notification	NDPERS
October 2014	Sign Administrative Services Agreement between Sanford Health Plan and NDPERS	NDPERS and Sanford Health Plan
Nov. 2014	Begin implementation and operations • Amending Provider Agreements for NDPERS-specific discounts • Develop Summaries of Benefits and Evidence of Coverage (Member Policy) • Develop NDPERS-specific forms and documents (ID cards, applications, provider manual, policies and procedures) • Begin system configuration of benefits, claim edits and rules	Sanford Health Plan
Jan. 2015	Develop Marketing and Communication Plan	
April 2015	Begin Open enrollment meetings and health fairs	
May 2015	Procedure for employee enrollment transaction determined. This could include electronic file transfer, paper enrollment or electronic enrollment via Sanford Health Plan's enrollment system, *myHealthPlan* Employer Portal.	NDPERS & Sanford Health Plan
30 days prior to effective date	Applications processed and Identification Cards are printed and mailed to member's home address.	Sanford Health Plan

18. Provide an overview of how the NDPERS relationship will be managed, both strategically and on a day-to-day basis. Include an organizational chart. NDPERS will give preference to vendors who are willing to assign a dedicated account management team and provide access to senior leadership. Designate the names, titles, location, telephone numbers, and email addresses for the representatives listed below. For the account service individuals listed (b, c, d, and e below), provide brief biographical information, such as years of service with your company, experience as it relates to this proposal, and the number of clients for which they perform similar services.

a. The key individual representing your company during the proposal process;
b. The key individuals on your proposed implementation team;
c. The key individual assigned to overall contract management;
d. The key dedicated individual or team members responsible for day-to-day account management and service;
e. The key individual responsible for provider contracting; and

f. The key individual responsible for provider relations if different than letter e. above.

Dedicated Implementation Team

A dedicated NDPERS Program Director will be assigned to manage the program implementation and channel all client inquiries to Sanford Health Plan. The NDPERS Director will be the key individual assigned for overall contract management. The following grid outlines the daily operations team assigned through the implementation process. The below list of management currently performs similar services for all of Sanford Health Plan's insured and self-funded business.

Name	Title	Years with Sanford Health Plan	Major Responsibility
Jason Hubers	Executive Vice President	15 years	Oversight of daily operations, performance, sales and strategic planning.
Cecily Tucker	Chief Financial Officer	15 years	Financial Oversight, Stretegic Planning & Underwriting
Michael Crandell, MD	Chief Medical Officer	7 years	Oversight of Care Management, Utilization Management & Worksite Wellness
Trixy Burgess	Chief Operating Officer	12 years	Oversight of Claims, Member Services, Client Services & Audit
Debbie Harris	Finance Director	7 years	Department Oversight
Sarah Delaney	Associate Actuary	6 years	Rate Development, Data analysis
Wyatt York	Information Technology Director	16 years	Department Oversight
Lisa Carlson	Director, Planning & Regulation	13 years	Oversight of State filings, marketing, legislative & legal review, Provider & Payor Relations Department.
Unassigned	NDPERS Director	-	Oversight of daily NDPERS operations
Jan Griffin	Claims Manager	16 years	Department Oversight
Tami Haberer	Member Services Manager	16 years	Department Oversight
Tammy Gerhart	Client Services Manager	9 years	Department Oversight including Flex Department
Steph Erp	Network Service Manager	13 years	Department Oversight
Barbara Vandonslear, RN	Care Management Manager	8 years	Department Oversight

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For day-to-day management, a dedicated NDPERS Supervisor will be hired and assigned to each operational department. This supervisor will be solely responsible for the NDPERS operations but will have dual reporting to the NDPERS Director and to their respective department managers within Sanford Health Plan. The following are the staffing statistics Sanford Health Plan proposes for the Program's dedicated department. We modeled our staffing projections using anticipated volume based on the NDPERS member population coupled with Sanford Health Plan's membership to staffing ratios. We have found this method to be an accurate predictor of staffing needs. Additionally, our telephone system automatically monitors call volume, allowing us to recursively refine our model and adjust staffing levels as needed.

Position	# proposed
ND PERS Director	1
Clerical Support	3
Operational Auditors	2
Care Management Department	
Care Management Supervisor	1
Nurse Case Managers	6
Quality Specialists	6
Worksite Wellness Department	
Wellness Supervisor	1
Wellness Educators	7
Client Services Department	
Client Services Supervisor	1
Account Representatives	2
Communications Coordinator	1
Marketing Specialist	2
Claims	
Claims Supervisor	1
Sr. Claims Adjudicator	4
Claims Adjudicator	12
Finance and Underwriting	

Finance Supervisor	1
Financial Analyst	3
Accountants	3
Information Technology	
IT Supervisor	1
Project Manager	1
Interface Analyst	3
Application Support/Reporting	4
IT Operations	2
Member Services Department	
Member Services Supervisor	1
Member Services Team Leader	1
Member Service Representative	15
Utilization Management Department	
UM Supervisor	1
UM Technician (RN and LPNs)	8
Provider & Payor Relations	
Network Supervisor	1
Provider Relations Representative	2
Technical Contract Specialist	1
Provider Network Specialist	1
Total FTEs	**99**

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19. Please provide the requested information for the functions that will be servicing NDPERS in the table below:

While the hours of operations below reflect our current business practice, Sanford Health Plan welcomes the state's input on business hours and is willing to establish hours specifically to meet the NDPERS employees' needs.

Area	Geographical Location(s)	Hours of Operation (Specify PST/CST/EST)	Is this service Outsourced? Yes or No? *If Yes, provide name of company to which the function is outsourced*
Member Service	Sioux Falls, SD	8am-5pm CST	❑ Yes *Specify Company Name:* _____ ☑ No
Claims Processing	Sioux Falls, SD	8am-5pm CST	❑ Yes *Specify Company Name:* _____ ☑ No
Enrollment, Eligibility, and Billing	Sioux Falls, SD	8am-5pm CST	❑ Yes *Specify Company Name:* _____ ☑ No
Disease Management	Sioux Falls, SD	8am-5pm CST	❑ Yes *Specify Company Name:* _____ ☑ No
Case and Utilization Management	UM: Sioux Falls, SD Case Managers: Located in various North Dakota towns, associated with Provider Offices	8am-5pm CST	❑ Yes *Specify Company Name:* _____ ☑ No

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Area	Geographical Location(s)	Hours of Operation (Specify PST/CST/EST)	Is this service Outsourced? Yes or No? *If Yes, provide name of company to which the function is outsourced*
Health, Education and Wellness Programs/Services (including dedicated wellness support staff)	North Dakota towns, associated with Provider Offices	8am-5pm CST	❑ Yes *Specify Company Name:* _____ ☑ No
Pharmacy Benefit Management	Minneapolis, MN	8am-5pm CST	☑ Yes *Specify Company Name:* Express Scripts, Inc. ❑ No
HSA	Sioux Falls, SD	8am-5pm CST	☑ Yes *Specify Company Name:* Evolution1 ❑ No
Other (Specify functional area)			❑ Yes *Specify Company Name:* _____ ❑ No

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Communications and Website

20. Please complete the table below by providing a description of the pre-enrollment communication materials you will provide to support NDPERS during its open enrollment period:

Area	Description	Can it be customized for NDPERS?
Website	myHealthPlan brochure – explaining how to create your personalized account and take advantage of online services	☑ Yes ☐ No
Employee Newsletter(s)	Sanford Health Plan can customize its current Member Messenger newsletter to communicate NDPERS-specific news, benefit changes, wellness initiatives, regulatory changes or NPERS program changes.	☑ Yes ☐ No
Brochures	Sanford Health Plan can customize its current brochures to communicate NDPERS-specific news, benefit changes, wellness initiatives, regulatory changes or NPERS program changes.	☑ Yes ☐ No
Direct mail (internal or home distribution)	Sanford Health Plan can create custom direct USPS mail or email blasts specific to a subdivision or employer unit.	☑ Yes ☐ No
Enrollment guide	Sanford Health Plan provides a comprehensive employee education package. This includes a summary of the group benefit package, pharmacy benefit information, provider network instructions and other information regarding coverage details.	☑ Yes ☐ No
Employee open enrollment meeting support and attendance	Sanford Health Plan facilitates on-site employee meetings as needed to educate employees on the benefits offered. Sanford Health Plan strives to promote open enrollment meetings by creating a fun and interactive environment with popcorn, trinkets available for give-away, and representatives available to answer questions or give formal presentations, at the client's request.	☑ Yes ☐ No
Benefits/HR staff training support	Sanford Health Plan provides a comprehensive employer education package. This includes a summary of the group benefit package, pharmacy benefit information, provider network instructions and other information regarding coverage details.	☑ Yes ☐ No

	Sanford Health Plan is also available throughout the year to assist in new employee orientation meetings, as requested by the client.	
Video	Sanford Health Plan can create custom online tutorials or coordinate video-conferences for remote open enrollment meetings.	☑ Yes ☐ No
Employee healthcare cost calculator worksheets (cost estimates)	Sanford Health Plan can provide an employee healthcare cost estimator.	☑ Yes ☐ No
Other (please list)		☐ Yes ☐ No

21. Are you willing to provide communication and marketing resources to work with NDPERS in the development of NDPERS-specific member communication materials (educational, open enrollment, benefit plan related, ongoing communications)? Describe the resources, sample communications, and your proposed approach and strategy/plan.

Yes, Sanford Health Plan is committed to provide communication and marketing pieces in collaboration with NDPERS for NDPERS-specific member communication materials.

We will ensure the human and financial resources are available to build a full spectrum marketing and awareness campaign that will include identifying core principles, logo and image recognition, taglines, imagery and identification system. Sanford Health Plan has the following marketing team to offer:

- Brand Manager;
- Marketing Specialist;
- Sales and Advertising Coordinator;
- Print and Document Coordinator; and a
- Digital Web Team.

Additionally, a dedicated NDPERS Communications Coordinator and two Marketing Specialists will be hired to facilitate the marketing and communications for NDPERS.

22. How much lead time is necessary for you to guarantee that ID cards will be received by members prior to the plan year effective date of July 1, 2015?

Sanford Health Plan is capable of printing ID cards for all Members (not just subscribers) within 7 days of receiving a clean enrollment file. Ideally Sanford Health Plan would mail new ID cards by June 1, 2015, 30 days prior to the effective date.

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23. Describe your plan for the post-65 programs that you will offer to NDPERS retirees.

Sanford Health Plan is able to replicate the current Dakota Retiree Plan benefits that provide health care coverage as a secondary payer to Medicare similar to a NAIC Plan F. Each eligible retiree will be able enroll his/her eligible dependents as described in the current SPD.

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Plan Administration

24. Confirm that you will communicate legislative changes related to the operations of the plan in a timely manner, and describe the support staff and process.

Sanford Health Plan diligently monitors both state and federal legislative changes. The Plan's Director of Planning & Regulation, the Associate Actuary and two full-time Policy Analyst are active members and meeting participants in the following organizations:

- Member of Minnesota Council of Health Plans
- Member of Iowa Federation of Insurers
- Member of the AHIP; and
- AHIP State Strategy Team - The Health Plan's Director of Planning & Regulation is a member of the AHIP State Strategy Team for the Midwest region comprised of 11 states, including South Dakota, North Dakota, Minnesota, and Iowa as well as Arkansas, Colorado, Kansas, Missouri, Nebraska, New Mexico, and Oklahoma. The AHIP State Strategy team provides local level, member input and direction to the regional AHIP directors regarding advocacy efforts in the states in both the legislative and regulatory arenas.

Additionally, Sanford Health Plan collaborates with Sanford Health's Office of Public Policy and Office of Health Care Reform to monitor and provide strategic input to ensure the system is engaged and prepared to be an active participant in policy making discussions at both the state and federal level.

25. Describe your proposed transition of care plan. At a minimum, the transition plan must address:

a. Conditions or type of care that is typically transitioned;
b. Individuals who are in a course of treatment;
c. Transition process of current medical treatment;
d. Communication of transition issues to all plan members.

Sanford Health Plan will follow NDPERS's directive regarding the introduction of services to your employees. We will have a dedicated NDPERS member services staff, marketing and communication staff, and client services team who will travel to all locations and attend the meetings scheduled by NDPERS. We feel that it is important to provide personal service to your employees and to be present at the enrollment meetings to answer employee questions. Historically, we have furnished materials regarding network access, benefit schedules, pharmacy and formulary information to employees during open enrollment. Sanford Health Plan will supply as much communication material as you feel is necessary for your employees.

During this transition there may be an employee who has to change providers due to network restrictions. He/she will be required to complete a Transition of Care form in order to temporarily or permanently continue care. The form will be reviewed by Sanford Health Plan's Chief Medical Officer for appropriate access to care. Our goal would be to have all of these transitions identified and processed by June 1, 2015.

Sanford Health Plan recognizes the influence of the patient-physician relationship and is committed to positively impacting healthcare services through appropriate and effective

resources. Optimal health is sought by customizing and coordinating the resources we have with the needs of the individual.

NDPERS individuals who are seeking regular care with a provider of service outside of the Sanford Health Plan network (or other approved network) will only be transitioned to an In-Network Provider when appropriate to do so. An example of transition: If care can be provided closer to the patient's home and/or with an In-Network Provider, the Plan will set up a transition of care schedule with the patient to develop a relationship with a new provider of service perhaps allowing the member to have one or two follow-up visits with their current provider in order to make the transition a seamless process.

When a Transition of Care form is received by Sanford Health Plan, the letter is logged and forwarded the Utilization Management Department. A determination is made by the Chief Medical Officer as to whether the Transition of Care form was submitted due to medical necessity, provider access or if not applicable.

1. Not Applicable (N/A) – If the issue was not applicable to a Transition of Care, Member Services will clarify with the member.

2. Medical Necessity – If the Chief Medical Officer determines the Transition of Care Form to be due to medical necessity, he will make an approval or denial decision and the following will take place:

    a) Consideration for continuation of care due to medical necessity include the following criteria:
        - Member is in their 2nd or 3rd trimester of their pregnancy;
        - Member is receiving cancer treatment;
        - Member is receiving transplant services;
        - Member is receiving services where it would be deemed harmful to transition at this point of treatment;
        - Member is undergoing active treatment for a disabling, chronic or acute medical condition;
        - Member has a life threatening mental or physical illness; or
        - Member has a physical or mental disability defined as an inability to engage in one or more major life activities, provided the disability has lasted or can be expected to last for at least one year, or can be expected to result in death.

    b) The Chief Medical Officer will send a personalized letter stating the approval or denial. It is the discretion of the Chief Medical Officer as to the number of Out-of-Network visits to approve for patients in the transition of care phase. Members who may see an Out-of-Network provider for annual exams (i.e., follow-up after surgical procedure or remission of cancer) may be allowed to have one transition follow-up appointment but must be prior authorized by the Chief Medical Officer. If a member is allowed to go for an Out-of-Network visit, the Health Plan has the right to request specific testing or treatments be done at the In-Network level. The results can then be reviewed by the former provider as a consultation visit only. The designated person from Utilization

Management will complete this letter, make copies of the Transition of Care Form and distribute accordingly.

c) The original letter, along with a copy of the Transition of Care Form will be sent directly to the member.
d) A copy of the letter and the original Transition of Care Form will be given to Utilization Management for authorization and recording in the claims management system. Once completed, these copies will be filed in the member's folder. Utilization Management will also send a letter of authorization to the member.
e) If the Transition of Care Form involves an organ transplant, a copy of the Transition of Care Form is also given to the Transplant Coordinator.

3. Provider Access – If the Transition of Care form was received due to a network access issue, then the form is reviewed by the Provider & Payor Relations Department.
   a) If Provider & Payor Relations determines that there is not appropriate access for this service, then Provider & Payor Relations will send an approval letter to the member.
   b) If Provider & Payor Relations determines that there is appropriate access for this service, then Provider & Payor Relations will send a letter to the member denying the transition request.

   A copy of the letter and Transition of Care Form is saved in the claims system and a copy is given to the designated person in the Utilization Management Department to be filed in the member's file.

26. What is your total commercial and Medicare health plan enrollment? Complete the table below.

Dates	Commercial	Medicare
As of January 2010	33,431	2,666
As of January 2011	33,571	2,481
As of January 2012	37,704	2,599

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Eligibility and Billing

27. Are ID cards the sole means of determining member eligibility? If not, please describe.

No, ID cards are not the sole means of determining eligibility. Members, Providers and Clients can log into their respective online account portal, myHealthPlan, to view a Member's eligibility status.

28. If desired, can NDPERS update and maintain eligibility and check employee claim status online? Are there any special charges for access to and use of these tools?

Yes, Sanford Health Plan offers the ability to perform enrollment transactions online. This secure online enrollment portal, entitled Empowered Benefits, provides the employer with instant access to their employee information and allows management of their enrollment by offering the ability to add, making changes or terminate employees online.

There are not separate charges for access to and use of the online tool.

The online enrollment tool is accessed through the employer's myHealthPlan account, which is offered to each employer, regardless of size, and enables the employer to access various information, including the ability to:

- View member eligibility, as well as benefit summaries for the member
- Order Replacement ID Cards
- View Preventive Health Guidelines
- Print Provider Nomination Request Forms, and
- Print medical and flex claim forms, if applicable

29. NDPERS will submit enrollment, billing and premium remittance via a centralized electronic system. NDPERS will collect enrollment/eligibility information which will be provided to the successful contractor on a data file that follows the HIPAA 834 file specifications. Premium payment information will be provided on a data file that follows the HIPAA 820 file specifications. Files will be transmitted using a secure file transmission process. Please confirm that you can receive this data in that format and media. Please confirm your ability to conform to this process and identify any potential issues.

Sanford Health Plan is able to receive enrollment, billing and premium remittance in that meet these file specifications.

30. Please describe how you handle manual eligibility updates and the turn-around/timing of such updates.

Enrollment

Sanford Health Plan accepts enrollment applications and eligibility files both electronically or hard copy. Manual updates are processed within 2 business days.

Full audit procedures are in place to assure that Membership information is timely, complete and accurate. Routine audit checks are conducted by Member Services Representatives of all newly processed enrollment applications. The enrollment applications are reviewed against the required enrollment fields in the Xcelys Claims Information System.

The following eligibility checks are conducted with processing applications: waiting period verification, effective date, dependent eligibility criteria and dependent age criteria, are all verified before applications are processed.

We conduct the following edit checks when processing application and enrollment changes: name, identification number (duplicate member), date of birth, sex, group number, date of hire, effective date, address, relationship to subscriber, dependent age, student verification, prior coverage verification, other coverage verification.

If no errors are identified, the Representative signs off on the auditing checklist. An enrollment audit log is maintained in order to identify any processing issues. The Audit Log provides documentation of the number of applications that are audited each month and the number and type of errors that are identified through the audit process. This audit log is reviewed by the Enrollment Coordinator to assure that the accuracy of Membership processing is consistent and that the audit process is conducted on an ongoing basis.

Eligibility Changes
Eligibility changes (electronic or paper) are manually processed within 2 business days. All change requests are reviewed for appropriateness of effective date and eligibility requirements before processing. The system allows all necessary coordination of benefits (COB) information to be recorded on an individual member basis. The other coverage carrier, type of carrier, effective date, policy number termination date, termination reason, entitlement (for Medicare), and COB order is stored for each Member with other coverage. Student status is verified for all dependents and maintained in a specified “dependent verification” field with a “verified through date” which is updated bi-annually or on an as needed basis. Sanford Health Plan works with the sponsoring group to establish appropriate eligibility standards meeting governmental and employer requirements.

Customer/Member Service

31. **Confirm if you will provide and maintain dedicated customer service staff acceptable to NDPERS. This unit will provide dedicated local and toll-free telephone numbers and shall respond directly to member inquiries regarding benefits, claim status, selecting participating providers, and provide general assistance with navigating on-line and other resources available through the health plan and NDPERS websites. Describe the structure and organization and provide an organizational chart of the unit you are proposing.**

    As described in Section 18 of this RFP, Sanford Health Plan will provide a dedicated Member Services Department comprised of the Member Services Supervisor, 16 Member Services Representatives, one of which is the Team Leader. A dedicated toll-free and local phone number shall also be established along with mutually agreed upon hours of operation.

    The Claims department and Member Services department are physically located within close proximity to each other to facilitate efficient workflow and communication to address and resolve questions as quickly as possible. Sanford Health Plan evaluates phone call statistics and staffing needs for the Member Services Department to ensure members have timely access to customer service.

    All Member Service and Claims representatives rely on the claims payment system to view benefits. Representatives can also simultaneously view the member's online myHealthPlan account information to address and discuss exactly what the member is seeing online.

    All claims and customer service calls are received at a central location conducive to open, inter-department communications in order to resolve inquiries in a timely manner. Call centers are not outsourced to external (or international) companies not familiar with health plan operations and the details of plan design and claims payment processes.

    Additionally, all calls are always answered by a live person during normal business hours. Calls are not sent to voicemail if the call queue is busy, nor do callers ever receive a busy signal. Callers are not required to dial in their member ID numbers or any other information prior to a call being answered; all member information is collected by the receiving Member Service representative to create a personal and courteous experience.

Claims Administration

32. Provide the following information regarding the claims administration unit that will handle the NDPERS account. If there is more than one claims processing location, provide information for each.

	Claims Processing Unit
Address/Location	Sioux Falls, SD
Phone Numbers	(605) 328-6840
Days and Hours of Operation	Monday – Friday; 8am-5pm CST
Number of Members Serviced	96,500
Number of Employer Groups Serviced	315
Ratio of Claims Unit Staff to Members Serviced	1 FTE:5,000 members
Volume of Claims Processed Daily	4,000

33. Will your organization identify a dedicated team of claims processors for the NDPERS account? If processors are shared with other clients, on average, how many clients does one team service? What is the average length of service of the claim processors?

As described in Section 18 of this RFP, Sanford Health Plan will provide a dedicated Claims Department for the NDPERS program. The NDPERS Staff will not be shared with other clients. The average length of service of current claims processors is 10 years.

34. Confirm that you are able to administer the NDPERS designs (Dakota Plan and Dakota Retiree Plan) and benefit levels without manual intervention. If you are unable to administer the plan, you must specify any plan design deviations proposed as specified in the RFP.

With the exception of these three manual interventions, Sanford Health Plan is able to automatically administer the NDPERS design. Please see Exhibit F2 under separate cover with this RFP.

19. Sanford Health Plan's claims system cannot administer a "per condition" benefit automatically. For outpatient therapy services (PT, OT & ST) we can administer count/quantity/visit limits without manual intervention.

35. Describe your claims processing system/platform and claims administration process.

Sanford Health Plan utilizes the Epic suite of Tapestry modules for payer operations. Enrollment, Premium Billing, Customer Service, Provider Network/Pricing, Service Pre-Authorization, Benefit/Claim Adjudication and Remittance functions are performed on this platform. Core health plan data is downloaded nightly to a local SQL Server-based data repository which is the foundation for analytical reporting and interface feeds to external processes and web portals. The Epic platform provides full EMR integration within the Sanford Health Enterprise as well as delivering standalone payer functionality with external providers. The Tapestry application piggybacks onto the same redundant, high availability Sanford Health datacenters and IT infrastructure utilized for 24/7 healthcare operations. Sanford Health has utilized Epic applications since 2004 and the Health Plan became operation on Tapestry in October 2013.

36. How do you determine reasonable and customary ("R&C") charge allowances? What methodology is used (i.e., HIAA)? What percentile is used? How often are R&C schedules updated?

Sanford Health Plan establishes “Reasonable Costs” as those that do not exceed the lesser of: (a) negotiated schedules of payment developed by Sanford Health Plan which are accepted by Participating Providers or (b) the prevailing marketplace charges. R&C is evaluated annually.

Reporting

37. Confirm your ability to provide the reports described in the RFP and provide samples.

Sanford Health Plan is able to provide all monthly reports for each plan offered (e.g. Grandfathered PPO, Non-Grandfathered PPO, HDHP, etc.) and provide roll-up reports to an annual, aggregate report. Please see Attachment C for a sample report package. Please note this report package may not currently reflect the below formats, however Sanford Health Plan’s internal IT Report Analysts are capable of customizing report formats for our clients and the dedicated PERS IT staff will be responsible for building and maintaining custom NDPERS report packages.

- ☑ Monthly claim reports broken down by plan, by category, split medical vs. prescription drugs.
- ☑ Monthly enrollment counts by plan.
- ☑ Monthly information, by plan, regarding large claims in excess of $100,000.
- ☑ Monthly premium vs. claim ratio report by plan with a year to date roll up.
- ☑ Monthly and year to date breakdown of medical claims by type of services by plan.
- ☑ Quarterly and year to date breakdown, by plan of medical charges submitted, ineligible charges, provider discounts, COB savings, deductibles and coinsurance paid by participants and final paid claims.
- ☑ Annual policy accounting statement including claim reserves.

- ☑ Annual medical claim lag study.

Sanford Health Plan also commits to provide:

- ☑ Claims specific data on a monthly basis in a format acceptable to NDPERS and subject to all federal and state laws on confidentiality and open records.
- ☑ Carry-over any deductible and or coinsurance amounts incurred from January 1 to June 30, of the prior contract period.
- ☑ Provide annual accounting of HSA accounts including year end balances; Number (and value) of eligible expense withdrawals; and Number (and value) of non-eligible expense withdrawals.

38. Describe your online reporting capabilities. Please describe the data/information and types of reports that can be accessed and downloaded from your online system.

Sanford Health Plan currently provides electronic and paper reports to clients at quarterly service meetings and upon request. However, we continue to evaluate a new online module to enhance our current myHealthPlan online portal for our clients and its reporting functions, which would include a custom report builder, to help NDPERS and other clients to:

- Enable clients to view records that have been updated since the last report and/or service meeting;
- Review trends and identify potential health issues that may impact worker productivity;
- Allows multiple users to access the site simultaneously, viewing reports jointly or independently;
- Robust sort and filter functions to create custom report views that can be reapplied to future reports;
- Clients can also delegate and manage access to the reports by benefits managers, payroll personnel, supervisors, wellness coaches, nurse case managers and others who need to see aggregate claims information, while ensuring the protection of employees' privacy.

We are committed to providing tools that empower our clients by providing them immediate access to actionable information so they can make timely business decisions.

39. Explain your ability to comply with the NDPERS current data warehouse arrangement by providing medical claims and enrollment data to NDPERS in a format agreed upon between you and NDPERS.

Sanford Health Plan agreed to provide NDPERS with its raw data, including detailed claims and enrollment data sets, based on a mutually agreed upon format no less than monthly for the data warehouse repository maintained by NDPERS.

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Case/Utilization Management

40. Provide a brief overview of your utilization management programs, including pre-certification, concurrent review, discharge planning, and large case management.

The Utilization Management Department staff performs the daily Utilization Management functions. Sanford Health Plan ensures that staff are properly trained, qualified, licensed as appropriate, and supervised. The dedicated NDPERs department will consists of the following roles:

- The Chief Medical Officer, a board certified Physician, who is responsible for the overall UM program and implementation. He reviews the medical appropriateness of any UM decision. However, medical appropriateness is determined by nationally developed and accepted review criteria from Milliman and InterQual which encompass literature review, specialty society standards of care, DME criteria, Medicare guidelines and health plan benefit interpretation.

- Utilization Management Coordinator(s) (Registered Nurses) or Technicians (Licensed Practical Nurses, Medical Assistants) report to the Chief Medical Officer, as do Complex Case Managers. Their responsibilities include the following:

    - Prior authorization of services
    - Concurrent, Retrospective (Post-service), and Focus Reviews
    - Identification of any quality assurance issues
    - Coordinate admission prior authorizations
    - Chief Medical Officer referrals
    - Member guidance and education

- Care Management Case Manager(s) report to the Care Management Manager and the Chief Medical Officer. Their responsibilities include the following:
    - Compilation and review of employer group utilization data
    - Health education to employer groups and members
    - High risk member identification and management (including Transplant Coordination)
    - Identification of any quality assurance issues

Physician Quality Committee

Sanford Health Plan's Physician Quality Committee is charged with supporting the Plan's Board of Directors and Chief Medical Officer in meeting quality assurance goals on issues of care. The Physician Quality Committee consists of physician and pharmacist members. Members of the Committee are appointed by the Chief Medical Officer who is the chairperson. The Committee meets eight times a year and the Plan's Chief Medical Officer reports to the Board of Directors at least four times a year the Physician Quality Committee's summary of trends, quality initiatives, findings, corrective actions and results.

The Committee responsibilities include developing and continually evaluating the review criteria used in the evaluation of appropriate utilization. The Committee is also responsible for quality activities by establishing, reviewing, and instituting needed actions and ensuring follow-up as appropriate. The review criteria shall be reviewed no less than once annually. Any recommended changes in the criteria or any other program changes must be approved by the Board of Directors.

Quality Improvement Program

Sanford Health Plan and its participating providers acknowledge their responsibility to provide high quality care in a cost-effective manner through an ongoing monitoring, evaluation and improvement process. The organized method for monitoring, evaluating, and improving the quality, safety and appropriateness of health care services including behavioral health care to members through related activities and studies is known as the Quality Improvement (QI) program.

The mission of the QI Program is to provide accountability for the quality of health care delivery and service. This is accomplished through the commitment of the Board of Directors and the Physician Quality and the Health Plan Quality Improvement Committees to develop and carry out a Quality Assurance Plan that has a systematic approach to assessing, measuring, defining and resolving medical care, and behavioral health and service issues.

Disease Management Services

Sanford Health Plan has developed a prospective program to manage our Members with chronic medical conditions. The emphasis on these programs is disease prevention and education to promote disease compliance for Members with targeted chronic medical conditions to improve the overall health, wellness and quality of the Member's life. The current disease management programs include: Congestive Heart Failure, Diabetes, and Hypertension.

Eligible members for the disease management programs are identified on a monthly basis by claims data or other sources like Utilization Management data, referrals, or after the initiation of a health risk assessment at the time of enrollment or with the initiation of health and wellness programs. The Health Plan Case Managers reach out to high risk Members identified with open disease specific care gaps to facilitate closure of gaps, adherence to treatment plans and to improve overall compliance with the evidence based medicine standards. Currently all disease management programs are opt-out (the member is automatically considered enrolled in the program unless they notify the Plan that they do not want to participate). Once identified by the disease management program, the Health Plan Case Managers reach out to high risk Members who are identified with open disease specific care gaps to facilitate closure of gaps, adherence to their treatment plan and to improve overall compliance with the evidence based medicine standards

The Medical Management Program (also referred to as Utilization Management or UM) is an organized method for monitoring and evaluating the course of treatment rendered

by all health personnel, given a standard of desirable care. It is a process that looks at the following to determine if the treatment, as prescribed, is appropriate:

1. The medical necessity of the treatment
2. The setting for the treatment
3. The types and intensity of resources to be used in the treatment
4. The time frame and duration of the treatment

Additionally, the Medical Management program monitors the delivery of medical and behavioral health services to ensure that those services are performed at the appropriate level of care in a timely, effective, and cost-efficient manner. It also studies patterns of health services utilization for Physician credentialing, sanctioning and continuing education of the medical staff, administration and consumers regarding health care cost containment.

The Medical Management and Care Management are responsible for:

1. Identifying problems by utilizing a system in which network practitioners, members and Sanford Health Plan staff can refer issues, concerns and potential opportunities for improvement.
2. Development and implementation of practice guidelines and/or clinical indicators. This includes structure, process and outcome indicators that are derived from current research and studies.
3. Establishing, monitoring and evaluating process for staff and committees to select appropriate topics, develop study parameters, retrieve and summarize data, and implement improvement interventions.
4. Review of the following quality performance measures on an ongoing basis:
    - Preventive Services
    - Health Education Programs
    - Obstetrical Care
    - Acute and Chronic Illness
    - Mental Health and Substance Abuse
    - Data from Satisfaction Surveys such as CAHPS and the Provider Satisfaction Survey.
5. Distribute any QI results, which may warrant improvement interventions, sanctions, improvement opportunities or concerns to the credentialing files for coordination in the annual recredentialing process.
6. Perform Medical Record Review at practitioner and/or Provider offices.
7. Perform peer review activities consisting of medical care reviews that assess the utilization of services and the quality of care rendered by practitioners and/or Providers. Results of the peer review process will be available for recredentialing purposes.
8. Evaluate healthcare quality related Complaints, Grievances and Appeals on a quarterly basis.
9. Perform quality improvement studies as it relates to timeliness of access to care/services and member service activities.

The Medical Management Program includes authorizations of services, Concurrent Reviews, Retrospective (Post-service) Reviews, focused reviews, case management

and discharge planning. Sanford Health Plan does not delegate any of these Medical Management (Utilization Management) activities, with the exception of Specialty Drug Management which includes dispensing according to The Plan's approved prior authorization criteria delegated through Curascript.

Medical Management Operational Procedures
Utilization Review

The purpose of Utilization Review is to establish requirements and standards of operation for Certification of medical Utilization Review agents. The Utilization Review criteria for medical services used by the Utilization Management Department shall be made available, upon request, to Participating Physicians. The clinical review criteria to determine medical necessity utilizes nationally developed and accepted review criteria from Milliman and InterQual. Milliman will be used as a length of stay guideline only. Clinical review criteria may also be developed based on literature review, specialty society standards of care, DME criteria, Medicare guidelines and health plan benefit interpretation. Local medical review policies will be utilized for decisions regarding Medicare coverage. The guidelines will be reviewed and updated, as appropriate, on an annual basis. Utilization Management staff review all cases and are instructed to refer any cases to the Chief Medical Officer or Behavioral Health Practitioner where medical necessity and/or criteria are not met or appropriate as they cannot make Denial decisions in those cases. Utilization management staff may make authorization decisions based on policies, procedures and benefit coverage guidelines. Utilization determination will be based on accepted review criteria, medical record review, and/or conversations with appropriate Physicians.

Utilization Review is a set of formal techniques designed to monitor the use of, or evaluate the clinical necessity, appropriateness, efficacy, or efficiency of, health care services, procedures, or facilities. The Utilization Review process shall consist of comparing Member profile information against set clinical review criteria (see policy MM-53 Utilization Management Criteria & Guidelines) along the following dimensions:

1. Presentation/Complaint;
2. Relevant History;
3. Medical History/Medications;
4. Previous Treatment;
5. Chemical Dependency History;
6. Treatment Plans and Recommendations

Medical Management Decision Protocols

The Plan's Medical Management decision protocols for Utilization Review consist of seven major component activities. Utilization Review is conducted prior to an admission or a course of treatment. These component areas include inpatient and outpatient services.

1. Prior-Authorization of all elective Hospital admissions (including same day surgeries), non-Urgent Care, pharmaceutical decisions and behavioral health services
2. Concurrent Reviews
3. Retrospective (Post-service) reviews
4. Focused reviews

5. Discharge planning
6. Complex Case Management
7. Case Management

Prior Authorization (Certification) of Services (Pre-service)
The Member is ultimately responsible for obtaining prior authorization from the Utilization Management Department in order to receive In-Network coverage. However, information provided by the Practitioner's office will also satisfy this requirement. Primary Care Physicians and any Participating Specialists have been given instructions on how to get the necessary authorizations for surgical procedures or Hospitalizations you may need.

Prior authorization (Certification) is the urgent or non-urgent authorization of a requested service prior to receiving the service. Prior authorization (or preCertification/Pre-service decision) is designed to facilitate early identification of the treatment plan to ensure medical management and available resources are provided throughout an episode of care.

The Plan determines approval for prior authorization based on appropriateness of care and service and existence of coverage. The Plan does not compensate Practitioners or other individuals conducting Utilization Review for issuing Denials of coverage or service care. Any financial incentives offered to Utilization Management decision makers do not encourage decisions that result in underutilization and do not encourage Denials of coverage or service.

Prior authorization is required for all inpatient admissions of Plan Members. This requirement applies to, but is not limited to the following:

1. Acute care Hospitalizations (including medical, surgical, and obstetric admissions);
2. Psychiatric Hospitalizations;
3. Rehabilitation center admissions; and
4. Chemical dependency admissions.

Admission before the day of non-emergency surgery will not be authorized unless the early admission is medically necessary and specifically approved by the Plan. Coverage for Hospital expenses prior to the day of surgery will be denied unless authorized prior to being incurred.

Concurrent Review
Concurrent Review (i.e. inpatient Hospitalization or ambulatory care) means a request for an extension of an approved ongoing course of treatment over a period of time or number of treatments is warranted. Sanford Health Plan will follow the same time frame as for prior authorization of services for a Concurrent Review decision.

Concurrent Review is conducted during a Member's Hospital stay or course of treatment. This includes inpatient Hospitalization including behavioral health care. The initial review is conducted within *twenty-four (24)* hours after admission. Subsequent reviews depend on the Member's condition, but at least *one (1)* subsequent review will

take place prior to the expiration of the approved length of stay. At the time of the initial review and each subsequent review, the Member's condition is evaluated to determine:

- the Member's progress;
- if the Member meets the approved acute level of care criteria;
- the projected discharge date; and
- the need for discharge planning.

When the Member's condition or treatment schedule changes, additional stay days are approved if the Member's condition has deteriorated or the Member has not progressed as originally anticipated. Additional stay days must meet the continued stay review criteria and, if acute levels of care criteria are not met, a decision to authorize further treatment must be made at that time. Authorization of the Hospital or behavioral healthcare stays will terminate on the date the Member is to be discharged from the Hospital or behavioral healthcare Facility (as ordered by the attending Physician). Hospital/Facility days accumulated beyond ordered discharge date will not be authorized unless the continued stay criteria continues to be met. Charges by Practitioners and/or Providers associated with these non-authorized days will be considered non-covered. The Plan Chief Medical Officer or a Physician or appropriate behavioral health Practitioner reviews all cases that may lead to Denial and those that are denied.

Retrospective Review (Post-service)
The Utilization Management Department may be required to perform Retrospective or Post-service Reviews at the direction of the Plan's administration. Retrospective (Post-service) Reviews may be used to identify patterns of care, to determine if charged services were actually provided and to Retrospectively Review services or denied days that have already occurred.

These reviews may be used to:

- Identify Practitioner patterns of care based on the parameters established by the Plan.
- Recommend positive changes in the Physician practice patterns and the credentialing process as identified by analysis and review of data.
- Analyze consumer patterns of care and to redirect the data to the employer groups to make any appropriate suggestions as to benefit structure.
- Determine if services charged were actually provided.
- Retrospectively deny days incurred due to failure to meet admission or continued stay criteria. Costs are to be absorbed by In-Network Providers.

Focused Reviews
Focused review is the process of reviewing patient's medical records as they relate to specific diagnoses, problem procedures, and/or Physicians identified by the Chief Medical Officer, Care Management Staff, Health Plan Quality Improvement Committee or Physician Quality Committee as an actual or potential utilization problem. The review may be Concurrent or Retrospective (Post-service).

If analysis of the focused review reveals ineffective or inefficient use of Hospital services or questionable patterns of care, the focused review will be subject to a more comprehensive in-depth review using the Plan's established criteria. Results of the focused review are to be reported to the requesting party and if a problem exists, a report and recommendations for action are made to the appropriate entity.

Discharge Planning
Discharge planning is the formal process for determining the coordination and management of care that a patient receives following discharge from a Facility. The reviewer assists in the identification of patients with post Hospital care needs for whom social service/discharge planning services would be appropriate. The Utilization Management Coordinator/Technician can, with the advice and counsel of the attending Physician, work actively with social service discharge planning to assist in coordinating inter-Hospital transfer, transfers to nursing homes, home health care, transportation, and durable medical equipment.

The Care Management Case Managers will contact Members post discharge to determine if access or care problems exist. This discharge follow-up phone call will allow the nurse to assess each Member, determine Member needs, and initiate the appropriate medical management intervention.

Complex Case Management
Sanford Health Plan's Complex Case Management Program is available to qualifying Health Plan Members and their families free of charge. Complex case management is the coordination of care and services provided to members who have experienced a critical event or diagnosis that requires the extensive use of resources and who need help navigating the system to facilitate appropriate delivery of care and services. The goal of complex case management is to help members regain optimum health or improved functional capability, in the right setting and in a cost-effective manner. It involves the comprehensive assessment of the member's condition; determination of available benefits and resources; and development and implementation of a case management plan with performance goals, monitoring and follow-up. Concentrating for the most part on catastrophic or chronic cases, case manager nurses are called in to consult and manage diagnoses such as serious traumas, cancers, HIV, organ transplants, spinal cord injuries, multiple chronic illnesses and/or chronic illnesses that result in high utilization and diagnoses as identified by our reinsurance provider.

Registered Nurse Case Managers are responsible for managing these complex cases to ensure high quality, cost effective and appropriate utilization of health services. The case manager acts as a Member advocate, seeking and coordinating creative solutions to a Member's health care needs without compromising quality health outcomes for selected medical diagnoses. The case manager contacts our Members by phone and mail. She is able to act as a resource, educator and/or coordinator of all medical care if needed.

Case Management
Sanford Health Plan offers employer groups Case Management services from our Care Management Department in order to assist in controlling healthcare costs. The case manager facilitates communication and coordination between Employees and Providers of services. This service involves all Members of the healthcare team in the decision-

making process in order to minimize fragmentation of the healthcare delivery system. The case manager educates the employer group Members about wellness, health conditions, community resources, insurance benefits, cost factors and issues of concern. The case manager is the link between the individual, the Practitioners and/or Providers, the payer and the community. The case manager should encourage appropriate use of medical cost effectiveness on a case-by-case basis. The case manager is an advocate for the Member as well as the payer to facilitate a win-win situation for the patient, the healthcare team and the payer.

Behavioral Health Care

The referral process for behavioral health care is based on the Provider Network established by Sanford Health Plan. In-Network facilities for inpatient Hospitalization must be utilized for authorization of services. If a Member chooses an Out-of-Network Facility then the Out-of-Network benefit limits will apply. Behavioral health care specialists for outpatient services are contracted for access as follows:

- Minnesota: within 30 miles of a Member's city of residence
- Iowa: within 60 miles of a Member's city of residence
- South Dakota: within 90 miles of a Member's city of residence, and.
- North Dakota: within 50 miles of a Member's legal residence.

A triage program is available to Practitioners for assessment and placement by Sanford's Behavioral Health Needs Assessment Team. This Facility has intake staff available 24 hours a day to assess the needs of a Member. The contracted Practitioners have access to a toll-free number to discuss a case, refer a Member for assessment or to triage a Member into a psychiatrist office on an urgent basis. Sites of service and levels of care for behavioral health services are evaluated through the contracting and credentialing/recredentialing process.

Physician Reviewer

A Physician reviewer is made available by phone to any Practitioner and/or Provider to discuss determinations based on medical appropriateness. The Plan informs the treating Practitioner of the Utilization Review criteria utilized by way of the Denial letter. The Physician reviewer may be the Plan's Chief Medical Officer or a Physician consultant. A Physician or appropriate behavioral health Practitioner (i.e., psychiatrist, doctoral-level clinical psychologist or certified addiction medicine specialist) reviews any Denial of behavioral health care that is based on medical necessity. For Sanford Health Plan of MN enrollees: For chiropractic, mental health and dental determinations not to certify, the review must be performed by a chiropractor, psychiatrist (certified by the American Board of Psychiatry and Neurology and licensed in the state of Minnesota) or dentist. In all other situations, on Appeal the case must be reviewed by a Practitioner practicing in the same or similar specialty.

41. What is the source of the criteria used for the following:

e. Determining surgical necessity and whether a second opinion is required.

Sanford Health Plan will cover the cost of a second opinion as long as it is requested by and provided by an In-Network Physician. This request is to aid in determining the diagnosis or treatment options of specific member conditions.

If after that visit, the physician feels that the Member would be better served at an Out-of-Network facility the Member will be authorized for that service. In general, consultations are for opinions only and not for care. If the member chooses to remain in the care of the consulting physician, in-network benefits may not apply.

This does not apply to emergency requests. Emergency requests will be evaluated following Plan criteria for Emergency Services.

f. Determining approved length of stay.

UM decisions to determine medical necessity are based on reasonable medical evidence by utilizing nationally developed and accepted review criteria from Milliman and InterQual. Milliman data is used as a length of stay guideline.

g. What percentile of the data is used?

Not applicable.

h. Approximately what percentages of review cases are referred to a physician because the initial review and attending physician cannot reach agreement on the proposed level of care?

This data is not tracked.

i. Does this percentage vary between medical/surgical and psychiatric/substance abuse cases? If so, provide variances.

This data is not tracked.

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Health Risk Management Programs

42. Indicate in the table below if you currently provide the care or disease management program listed, the number of members from ND-based employers currently enrolled, the cost per participant, and its accreditation status.
The below numbers include participation across all product lines and all states. Sanford Health Plan is committed to develop additional disease management programs that meets the state's needs.

	Program	Number of Members Enrolled	Cost per Participant	Accredited? If so, indicate accrediting organization.		Program	Number of Enrolled Members	Cost per Participant	Accredited? If so, indicate accrediting organization.
☐	Arthritis	NA	Included in Cost Proposal	NA	☒	High Risk Pregnancy/ Prenatal Support	84	Included in Cost Proposal	NA
☒	Asthma	5,021	Included in Cost Proposal	NA	☐	Hypercholesterolemia	NA	Included in Cost Proposal	NA
☒	Cancer (screenings and reminders)	28,487	Included in Cost Proposal	NA	☐	Pain Management	NA	Included in Cost Proposal	NA
☒	Congestive Heart Failure	260	Included in Cost Proposal	NA	☐	Renal Failure	NA	Included in Cost Proposal	NA
☐	COPD	NA	Included in Cost Proposal	NA	☐	Smoking/ Tobacco Cessation	NA	Included in Cost Proposal	NA
☒	Depression	2,153	Included in Cost Proposal	NA	☐	Weight Management	NA	Included in Cost Proposal	NA
☒	Diabetes	3,446	Included in Cost Proposal	NA	☐	Other, please indicate:		Included in Cost Proposal	NA
☐	Low Back Pain	NA	Included in Cost Proposal	NA	☐	Other, please indicate:		Included in Cost Proposal	NA

43. Briefly describe each of the programs currently offered and the cost of each program. Do you currently track and report specific clinical outcome measurements for each of the conditions for which care/disease management is offered? Please list them.

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As an NCQA-Accredited Health Plan, Sanford Health Plan tracks and utilizes a variety of measures for the development and refinement of the Plan's Quality Improvement Activities, Disease Management Programs and Clinical Practice Guidelines. These measures all include some form of continuous enrollment criteria which specifies that a member has to be enrolled in the Plan a certain amount of time before they may be included in the final population for the measure. This way the only members that are included in the final population are members for whom the Plan has had an adequate opportunity to provide services and education.

One of these programs is the **Effectiveness of Care Domain** which measures provide information about the quality of clinical care the Plan delivers to its members including preventive, acute and chronic care services. Please refer to Attachment D to view Sanford Health Plan's Health Employer Data Information Set (HEDIS) Report

The Effectiveness of Care measures included in the Sanford Health Plan HEDIS Report Report are:

- Adult BMI Assessment
- Weight Assessment and Counseling for Nutrition
- and Physical Activity for Children/Adolescents
- Childhood Immunization Status
- Colorectal Cancer Screening
- Breast Cancer Screening
- Cervical Cancer Screening
- Chlamydia Screening in Women
- Appropriate Testing for Children with Pharyngitis
- Appropriate Treatment for Children with Upper
- Respiratory Infection
- Avoidance of Antibiotic Treatment in Adults with
- Acute Bronchitis
- Use of Spirometry Testing in the Assessment and
- Diagnosis of COPD
- Use of Appropriate Medications for People with
- Asthma
- Cholesterol Management for Patients with
- Cardiovascular Conditions
- Controlling High Blood Pressure
- Persistence of Beta Blocker Treatment After a Heart
- Attack
- Comprehensive Diabetes Care
- Use of Imaging Studies for Low Back Pain
- Follow-Up Care for Children Prescribed ADHD
- Medication
- Antidepressant Medication Management
- Follow-Up After Hospitalization for Mental Illness
- Flu Shots for Adults Ages 50 – 64
- Medical Assistance with Smoking Cessation

The Access/Availability of Care domain contains measures that assess Sanford Health Plan members' access to care and whether those members are actually utilizing the

services available to them. Most of these measures include some form of continuous enrollment criteria which specifies that a member has to be enrolled in the Plan a certain amount of time before they may be included in the final population. This way the only members that are included in the final population are members for whom the Plan has had an adequate opportunity to provide services and education.

The Access and Availability measures included in HEDIS report are:

- Adults' Access to Preventive/Ambulatory Health
- Services
- Children and Adolescents' Access to Primary Care
- Practitioners
- Initiation and Engagement of Alcohol and Other Drug
- Dependence Treatment
- Prenatal and Postpartum Care
- Call Abandonment
- Call Answer Timeliness

Sanford Health Plan has developed a prospective disease-specific approach to the management of a member's chronic medical conditions. The emphasis of these programs is disease prevention and wellness education for targeted members and practitioners to improve the overall health, wellness and quality of the member's life. The goal of the program is to provide tools to educate our members on promoting improved health through better prevention, detection, treatment and education. By analyzing utilization patterns, we will be able to educate our members on preventable complications so that emergency department visits and hospital admissions/readmissions may be reduced. These tools will facilitate understanding and consumer responsibility for their own disease processes as well as coordination of care between their primary care practitioners. Additionally, Practitioners receive program details and condition-specific guidelines.

Congestive Heart Failure Disease Management Program

- Provides educational materials on appropriate treatment and management.
- Topics include treatment plans, sodium intake, nutrition, medication use, exercise and activity, tips for family, lifestyle changes and advance care planning.
- Members receive quarterly mailings and nurse phone support.

Diabetes Disease Management Program

Eligible members for the Diabetes Disease Management Program are identified through:

- ✓ Claims (at least one of the following):
  - o Dispensed insulin or oral hypoglycemics/antihyperglycemics
  - o Two face-to-face encounters with different dates of service in an ambulatory setting or non-acute inpatient setting
  - o One face-to-face encounter in an acute inpatient or emergency room setting
- ✓ Health Risk Assessment/health Screening results
- ✓ Other information: collected from case management or utilization management
- ✓ Practitioner or self referral

Members of all ages who meet these criteria are eligible for the program. This determination of eligible members occurs on a monthly basis.

Providing Eligible Members with Written Program Information

Eligible members are sent a program information packet which includes a health risk assessment. Members may choose to not participate in the program by completing and returning the Non Participant Form which is included in the program information packet. Members who choose this option will be removed from the program mailing list and will not be considered enrolled in the Diabetes Disease Management Program. Members who do not return the Non Participant form are automatically considered enrolled in the program.

The initial program information packet includes an outline of how to use the program's services, a health risk assessment, the types of interventions that are involved, how to contact the Plan regarding any questions related to the program or its services (see below for details) as well as details on quarterly mailings which include a wide range of educational materials

Program Participation and Participation Rates

This program consists of an involuntary participation or an opt-out process. Eligible members receive the initial program mailing accompanied by a Non Participant Form. If the member chooses not to participate in the program, they must complete non participant form and return it to Sanford Health Plan in the provided postage paid envelope. Eligible members who do not return this form are automatically considered enrolled in the program. Members are considered actively enrolled when they have at least one interactive contact in which the member receives self management support or health education. Interactive contact is a two-way interaction in which the member receives self management support or health education by one of the following modes:

- Mail – interactive communication that provides self management support or health education that was requested by the member; communication in the form of a member survey, quiz or assessment of member knowledge gained from reading the communication.
- Phone – in person contact (individual or group)
- Online contact – interactive web based module, secure email.

Note: health education or self management support given during the course of a health risk appraisal or health assessment is considered an interactive contact.

Interactive contact does **not** include:

- completion of health risk appraisal
- contacts made only to make an appointment, leave a message or acknowledge receipt of materials.

An Access database is maintained of eligible members who remain enrolled in the Diabetes Disease Management Program. The program's active participant rates are calculated on an annual basis and reported in the Annual Quality Improvement Program Evaluation. This participation rate is calculated as the number of eligible members divided by the total number of eligible members with at least one interactive contact.

Population Stratification *(Stratification classifies eligible members according to severity or other clinical criteria based on available clinical data. This is a dynamic process, and a level can change as a member's condition changes.)*

The eligible member population that remains enrolled in the Diabetes Disease Management Program is stratified based on risk factors identified via the HRA, through noncompliance with the HEDIS measures or by an inpatient stay for diabetes. Enrolled members are stratified as high, moderate/low risk by the Quality RN based on an HRA scoring tool or other claims related information. The stratification process is completed at least annually to determine if there are any members whose stratification status should change for the next year's round of program mailings. The stratification level identification for each member is documented in bWell to allow for separate lists to be pulled for the purposes of interventions based on specific stratification levels.

Interventions Based on Stratification *(Interventions must be implemented based on each stratification level.)*

Interventions are implemented based on the member's identified stratification level. Those members in the moderate/low risk category are mailed general education on a quarterly basis. This information includes topics such as blood sugars, eating right, medications, exercise, recommended tests and more.

High risk members receive all of the above interventions in addition to calls from a Care Management nurse every 3 to 6 months or more frequently as needed. (example: case of inpatient hospitalization or other chronic comorbid conditions.) Members who were not in compliance with any one or more of the HEDIS measure's indicators are pulled into a report, which is sent to the member's identified practitioner to notify them of their noncompliance with one or more of the HEDIS indicators. High risk members receive a phone call from the Quality RN.

Enrolled members may reach a Registered Nurse toll-free at 1-800-805-7938 or (605) 328-6807 for any questions concerning the Disease Management Program, medical benefits or other issues of concern.

All interventions implemented are tracked by date and type in bWell TX to allow for reporting. Details of specific telephonic interventions are documented in the nurses' notes screens of the bWell.

Condition Monitoring *(Mechanisms that allow the patient or practitioner to assess how well a condition is being managed.)*

Members and practitioners are provided with information regarding the recommended clinical practice guidelines to be followed for diabetes management.

Standards of Medical Care for Patients With Diabetes Mellitus - American Diabetes Association.

These guidelines are a resource for members and practitioners to assess how well they are managing their diabetes care.

The Care Management nurse assists high risk level members in monitoring their condition to assess how well they are managing their care and makes recommendations regarding visits with their practitioner to discuss their diabetes management.

Adherence to Treatment Plans (A treatment plan is the outline for all activities/ interventions in the program. Patient adherence to the treatment plans outlines how we track member self-management including the member's adherence to self-monitoring activities; adherence to medications, if appropriate; making needed visits; etc.)

Monitoring patient adherence to the Diabetes Disease Management Program's treatment plans includes a variety of activities. On an annual basis, the Comprehensive Diabetes Care HEDIS measure is analyzed to determine members who were not in compliance with any one or more of the HEDIS measure's indicators and are pulled into a report. These reports are sent to the member's identified practitioner to notify them of their noncompliance with one or more of the HEDIS indicators. These high risk diabetics are monitored through the Care Management nurse's telephonic interventions to discuss compliance with recommended treatment guidelines including medication compliance, keeping appointments, compliance with self-monitoring activities including checking their blood sugar levels and compliance with appropriate lab test recommendations.

Medical and Behavioral Comorbidities

High risk level enrolled members are screened for coexisting medical and behavioral conditions, including heart disease, hypertension, elevated cholesterol, kidney disease, etc., through the Care Management nurse contacts. The Care Management nurse then directs educational and telephonic interventions towards these coexisting conditions.

Health Behaviors *(e.g., goal-setting techniques, problem solving. Program content is consistent with clinical practice guidelines.)*
Targeted mailings and telephonic interventions, to the member regarding diabetes, address various lifestyle issues including diet, exercise, smoking cessation, medication compliance and other clinical practice guideline compliance including lab tests, foot care and office visits. These interventions comply with the American Diabetes Association clinical practice guidelines to ensure appropriate quality of care.

Psychosocial Issues

The Care Management nurse identifies potential psychosocial issues that could be significant in the management of Diabetes and any other conditions. Interventions are adjusted to address any issues identified as well as educating the member about their condition beyond just have general knowledge about their condition and adherence to a treatment plan. The following are psychosocial issues which can play a part in adherence:

- Beliefs and concerns about the condition and treatment

- Perceived barriers to meeting treatment requirements
- Access, transportation and financial barriers to obtaining treatment
- Cultural, religious and ethnic beliefs

Depression Screening

Depression screening results from the health risk assessment are reviewed by the Care Management nurse. Members who screen positive for depression are provided with educational resources and are referred to a primary care practitioner for further evaluation and treatment.

Providing Information to the Caregiver

If the member grants permission, information about their condition and treatment plan will be given to the caregiver. This information can be helpful for the caregiver to provide the appropriate support and care to the member. This information should include the type and methods of support a caregiver can provide.

Supporting Communication between Patient and Practitioner

An important aspect of care is the ongoing communication of the member's condition and adherence to treatment. Program materials provided to members address the importance of the communication with healthcare practitioners and provide helpful methods of ways to communicate with them.

Informing and Educating Practitioners about the Program

Sanford Health Plan practitioners are informed and educated on the Diabetes Disease Management Program. Information is published annually in provider newsletters and is included in the Provider Manual and on the Health Plan website at www.sanfordhealthplan.com.

The program information provided to practitioners includes instructions on how they or their Sanford Health Plan patients may access the disease management services offered by the program. Practitioners are also provided information on how the Plan works with their Sanford Health Plan patients in the program to monitor their self-management activities, diet and weight management, compliance with medication, compliance with clinical practice guideline recommended visits and tests and relevant test results.

Practitioners are instructed to contact the Sanford Health Plan Quality department at 1-888-315-0884 or 328-6868 for any questions concerning the Diabetes Disease Management Program. Questions about medical benefits or other issues should be directed to Member Services at 1-800-752-5863 or 328-6800.

Satisfaction with Disease Management

A program satisfaction survey is conducted annually to assist in determining additional resources needed and adjustments that may need to be made to the operations of the program. Disease management program inquiries and complaints are also reviewed and

analyzed quarterly in the Sanford Health Plan Quality Committee. The purpose of the review is to identify patters of inquires and complaints as well as improving satisfaction with the DM program

Measuring Effectiveness *(Audited HEDIS results that are specifically relevant to the condition addressed are considered appropriate measures.)*

Performance measures are tracked for the Diabetes Disease Management Program to measure the effectiveness of the program. For this specific program, the Comprehensive Diabetes Care HEDIS measures are used as indicators of the program's performance to ensure a valid methodology and reliable data. These measures include the identified eligible population according to HEDIS specifications. These quantitative measures are analyzed in comparison to national NCQA Quality Compass averages as benchmark rates and the Plan's past performance.

The participation rates, performance rates measured, analysis completed and interventions implemented are tracked in an NCQA Quality Improvement Activity Form to assist the Plan's Quality Improvement staff in ensuring that all necessary steps are completed.

Hypertension Disease Management Program
Eligible members for the Hypertension Disease Management Program are identified through:

- ✓ Claims :
  - o two or more claims with a primary or secondary diagnosis of Hypertension (ICD-9 CM Codes 401.XX).
- ✓ Health Risk Assessment/health Screening results
- ✓ Other information: collected from case management or utilization management
- ✓ Practitioner or self referral

Eligible members for the Hypertension Disease Management Program are at least 18 years of age and meet the above criteria. This determination of eligible members occurs at least monthly.

Providing Eligible Members with Written Program Information

Eligible members are sent a program information packet which includes a health risk assessment. Members may choose to not participate in the program by completing and returning the Non Participant Form which is included in the program information packet. Members who choose this option will be removed from the program mailing list and will not be considered enrolled in the Hypertension Disease Management Program. Members who do not return the Non Participant form are automatically considered enrolled in the program after a period of 30 days.

The initial program information packet includes an outline of how to use the program's services, a health risk assessment, the types of interventions that are involved, how to contact the Plan regarding any questions related to the program or its services as well as details on quarterly mailings which include a wide range of educational materials on topics such as: detection and diagnosis, risk factors, monitoring blood pressure, nutrition and weight control, tobacco cessation, physical activity, stress management, medications and treatments and more.

Program Participation and Participation Rates

This program consists of an involuntary participation or an opt out process. Members may choose to not participate in the program by completing and returning the Non Participant Form. If the member chooses not to participate in the program, they must complete non participant form and return it to Sanford Health Plan in the provided postage paid envelope. Eligible members who do not return this form are automatically considered enrolled in the program after a period of 30 days. Members are considered actively enrolled when they complete and return the health risk assessment included with the initial information packet.

An Access database is maintained of eligible members who remain enrolled in the Hypertension Disease Management Program. The program's active participant rates are calculated on an annual basis and reported in the Annual Quality Improvement Program Evaluation. This participation rate is calculated as the number of eligible members who remain enrolled in the program divided by the total number of eligible members identified in the first step of the eligible population identification, regardless of stratification level.

Population Stratification *(Stratification classifies eligible members according to severity or other clinical criteria based on available clinical data. This is a dynamic process, and a level can change as a member's condition changes.)*

The eligible member population that remains enrolled in the Hypertension Disease Management Program is stratified based on risk factors identified via the HRA, through noncompliance with the HEDIS measures or by an inpatient stay for hypertension. Enrolled members are stratified as high or moderate/low risk by the Quality RN based on an HRA scoring tool or other claims related information. The stratification process is completed at least annually to determine if there are any members whose stratification status should change for the next year's round of program mailings. The stratification level identification for each member is added to the Access database of enrolled eligible members to allow for separate lists to be pulled for the purposes of interventions based on specific stratification levels.

Interventions Based on Stratification *(Interventions must be implemented based on each stratification level, although we are not required to intervene at every level.)*

Interventions are implemented based on the member's identified stratification level. Those members in the moderate/low risk category are mailed general education on a quarterly basis. This information includes topics such as detection and diagnosis, risk factors, monitoring blood pressure, nutrition and weight control, tobacco cessation, physical activity, stress management, medications and treatments and more.

High risk members receive all of the above interventions in addition to calls from a Quality Resource Registered Nurse every 3 months or more frequently as needed. (example: case of inpatient hospitalization or other chronic comorbid conditions.) Members who were not in compliance with the HEDIS measure's indicator are pulled into a report, which is sent to the member's identified practitioner to notify them of their noncompliance. High risk members receive a phone call from the Quality RN.

Enrolled members may reach a Registered Nurse toll-free at 1-800-805-7938 or (605) 328-6807 for any questions concerning the Disease Management Program, medical benefits or other issues of concern.

All interventions implemented are tracked by date and type in an Access database to allow for easy reporting. Details of specific telephonic interventions are documented in the nurses' notes screens of the Plan's computer system.

Condition Monitoring (Mechanisms that allow the patient or practitioner to assess how well a condition is being managed.)

Members and Providers are provided with information regarding the Seventh report of the Joint National Committee on Prevention, Detection, Evaluation and Treatment of High Blood Pressure to be followed for hypertension management. This guideline is to assist them in assessing how well they (Members and Providers) are managing their care.

The Quality Resource RN assists high risk members in monitoring their condition to assess how well they are managing their care and makes recommendations regarding visits with their practitioner to discuss their Hypertension management.

Patient Adherence to Treatment Plans (A treatment plan is the outline for all activities/ interventions in the program. Patient adherence to the treatment plans outlines how we track member self-management including the member's adherence to self-monitoring activities; adherence to medications, if appropriate; making needed visits; etc.) Monitoring patient adherence to the Hypertension Disease Management Program's treatment plans includes a variety of activities. High risk members are monitored through RN telephonic interventions to determine compliance with recommended treatment guidelines including medication compliance, keeping appointments, compliance with self-monitoring activities and compliance with other appropriate recommendations. Adherence to treatment plans may also be monitored by the RN through analysis of a member's Health Risk Assessment responses.

Consideration of Other Health Conditions

High risk level enrolled members are screened for coexisting medical and behavioral conditions through the Quality Resource RN contacts. The Quality Resource RN then directs educational and telephonic interventions towards these coexisting conditions. In addition, members are provided information regarding smoking cessation. This information is designed to bring about awareness of the state smoking cessation programs.

Lifestyle Issues as Indicated by Practice Guidelines (e.g., goal-setting techniques, problem solving. Program content must be consistent with clinical practice guidelines) Targeted mailings and telephonic interventions to the member regarding Hypertension address various issues including medication compliance, stress management, hypertension warning signs and complications, exercise, weight management, nutrition and more. These interventions comply with the Joint National Committee on Prevention, Detection, Evaluation and Treatment of High Blood Pressure.

Informing and Educating Providers about the Program
Sanford Health Plan practitioners are informed and educated on the Hypertension Disease Management Program. Information is published annually in provider newsletters and is included in the Provider Manual and on the Health Plan website at www.sanfordhealthplan.com.

The program information provided to practitioners includes instructions on how they or their Sanford Health Plan patients may access the disease management services offered by the program. Practitioners are also provided information on how the Plan works with their Sanford Health Plan patients in the program to monitor their self-management activities, diet and weight management, compliance with medication, compliance with clinical practice guideline recommended visits and tests and relevant test results.

Practitioners are instructed to contact the Sanford Health Plan Quality department at 1-888-315-0884 or 328-6868 for any questions concerning the Hypertension Disease Management Program. Questions about medical benefits or other issues should be directed to Member Services at 1-800-752-5863 or 328-6800.

Measuring Effectiveness (Audited HEDIS results that are specifically relevant to the condition addressed are considered appropriate measures. NCQA recognizes that the population may not exactly match the population of the program, but it is an acceptable substitute.)

Performance measures are tracked for the Hypertension Disease Management Program to measure the effectiveness of the program. For this specific program, the percentage of Members with Confirmed Hypertension who had Controlled Blood Pressure HEDIS measure is used as an indicator of the program's performance to ensure a valid methodology and reliable data. This measure includes the identified eligible population according to HEDIS specifications. The quantitative measure is analyzed in comparison to national NCQA Quality Compass Averages as a benchmark rate and to the Plan's past performance rates.

The active participation rates, performance rates measured, analysis completed and interventions implemented are tracked in an NCQA Quality Improvement Activity Form to assist the Plan's Quality Improvement staff in ensuring that all necessary steps are completed.

Congestive Heart Failure

Eligible members for the CHF Disease Management Program are identified through:

- Claims: two or more claims (any type of service) with a primary or a secondary diagnosis of CHF (ICD-9 CM diagnosis codes 428.xx) and a claim indicating that an ejection fraction has been evaluated.
- Health Risk Assessment/Health Screening results
- Other information: collected from Care Management or Utilization Management
- Practitioner or self referral

Members of all ages who meet these criteria are eligible for the program. This determination of eligible members occurs on a monthly basis.

Providing Eligible Members with Written Program Information

Eligible members are sent a program information packet which includes a health risk assessment. Members may choose to not participate in the program by completing and returning the Non Participant Form which is included in the program information packet. Members who choose this option will be removed from the program mailing list and will not be considered enrolled in the CHF Disease Management Program. Members who do not return the Non Participant form are automatically considered enrolled in the program.

The initial program information packet includes an outline of how to use the program's services which includes a health risk assessment, the types of interventions that are involved, how to contact the Plan regarding any questions related to the program or its services (see below for details) as well as details on quarterly mailings which that include a wide range of educational materials.

Program Participation and Participation Rates

This program consists of an involuntary participation, or an opt-out process. Eligible members receive the initial program mailing accompanied by a Non Participant Form. If the member chooses not to participate in the program, they must complete the form and return it to Sanford Health Plan in the provided postage paid envelope. Eligible members who do not return this form are automatically considered enrolled in the program. Members are considered actively enrolled when they have at least one interactive contact in which the member receives self management support or health education. Interactive contact is a two-way interaction in which the member receives self management support or health education by one of the following modes:

- Mail – interactive communication that provides self management support or health education that was requested by the member; communication in the form of a member survey, quiz or assessment of member knowledge gained from reading the communication.
- Phone – in person contact (individual or group)
- Online contact – interactive web based module, secure email.

Note: health education or self management support given during the course of a health risk appraisal or health assessment is considered an interactive contact.

Interactive contact does **not** include:

- completion of health risk appraisal
- contacts made only to make an appointment, leave a message or acknowledge receipt of materials.

An Access database is maintained of eligible members who remain enrolled in the CHF Disease Management Program. The program's active participation rates are calculated on an annual basis and reported in the Annual Quality Improvement Program Evaluation. This participation rate is calculated as the number of eligible members divided by the total number of eligible members with at least one interactive contact.

Population Stratification *(Stratification classifies eligible members according to severity or other clinical criteria based on available clinical data. This is a dynamic process, and a level can change as a member's condition changes.)*

The eligible member population that remains enrolled in the CHF Disease Management Program is stratified based on results from a health risk assessment, and pharmaceutical claims data to identify members who utilize an ACE Inhibitor/ARB/beta blocker (low risk) and those members that do not (high risk). Another high risk identifier is inpatient hospitalization for CHF. The stratification process is completed at least annually for currently enrolled members to determine if there are any members whose stratification status should change. The stratification level identification for each member is documented in bWell TX to allow for separate lists to be pulled for the purposes of interventions based on specific stratification levels.

Interventions Based on Assessment *(Interventions must be implemented based on each stratification level.)*

Interventions are implemented based on the enrolled member's identified stratification level. Those members in the low risk category are mailed general educational materials on a quarterly basis. These quarterly mailings include information on: medications, nutrition, following a treatment plan, exercise and activity, managing other chronic conditions, lifestyle issues advance care planning and depression. Some educational materials are available in other languages and can be requested by the member.

High risk members receive all of the above interventions in addition to phone calls from a Care Management nurse on an annual basis or more frequently as needed (example: case of an inpatient hospitalization). The Care Management nurse discusses medication compliance and the importance of ACE Inhibitor utilization along with other recommended practice guidelines for the management of CHF. If applicable, the nurse will also send a notification letter to the member's practitioner to notify them that the member is not utilizing an ACE Inhibitor/ARB/beta blocker so that they may review the member's status and determine if an ACEI/ARB/beta blocker is warranted in their particular situation.

Members in all stratification levels may reach a nurse toll-free at 1-888-315-0884 or 328-6868 for any questions concerning the CHF Disease Management Program. For other issues of concern or medical benefits questions, contact Member Services at 1-800-752-5863 or 328-6800.

All interventions implemented are tracked by date and type in bWell to allow for reporting. In addition, comments regarding contact with members are also documented bWell.

Condition Monitoring *(Mechanisms that allow the patient or practitioner to assess how well a condition is being managed.)*

The national guidelines state that proper medical treatment for patients with heart failure due to left ventricular systolic dysfunction is the prescription of an angiotensin-enzyme inhibitor (ACEI)/ARB/beta blocker. This practice recommendation has been defined in guidelines issued by Heart Failure Society of America: Journal of Cardiac Failure.

Sanford Health Plan recommends the utilization of these guidelines to assist in the management and monitoring of CHF patients.

The Care Management nurse assists high risk level members in monitoring their condition to assess how well they are managing their care and makes recommendations regarding visits with their practitioner to discuss their CHF management, especially ACE Inhibitor/ARB/beta blocker utilization.

Adherence to Treatment Plans (A treatment plan is the outline for all activities/ interventions in the program. Patient adherence to the treatment plans outlines how we track member self-management including the member's adherence to self-monitoring activities; adherence to medications, if appropriate; making needed visits; etc.)

Monitoring patient adherence to the CHF Disease Management Program's treatment plans includes a variety of activities. High risk members with heart failure are monitored through the Care Management nurse's telephonic interventions to determine compliance with recommended treatment guidelines including medication compliance, keeping appointments, compliance with self-monitoring activities and compliance with appropriate lab test recommendations.

Medical and Behavioral Comorbidities

High risk level enrolled members are also screened for any other coexisting medical and behavioral conditions, including diabetes, heart disease, COPD, asthma, cardiac procedures, etc., through the Care Management nurse contacts and any information provided on a health risk assessment or health screening. The Care Management nurse then directs educational and telephonic interventions towards these coexisting conditions.

In addition to this, one of the program's quarterly mailings will be devoted to information on coexisting conditions.

Health Behaviors *(e.g., goal-setting techniques, problem solving. Program content must be consistent with clinical practice guidelines.)*
Targeted mailings and telephonic interventions, to the member regarding CHF, address various lifestyle issues including diet/weight management, smoking cessation, medication compliance and other clinical practice guideline compliance including lab

tests and office visits. These interventions comply with standard clinical practice guidelines (stated above) to ensure appropriate quality of care.

Psychosocial Issues

The Care Management nurse Identifies potential psychosocial issues that could be significant in the management of CHF and any other conditions. Interventions are adjusted to address any issues identified as well as educating the member about their condition beyond just having general knowledge about their condition and adherence to a treatment plan. The following are psychosocial issues which can play a part in adherence:

- Beliefs and concerns about the condition and treatment
- Perceived barriers to meeting treatment requirements
- Access, transportation and financial barriers to obtaining treatment
- Cultural, religious and ethnic beliefs

Depression Screening

Depression screening results from the health risk assessment are reviewed by the Care Management nurse. Members who screen positive for depression are provided with educational resources and are referred to a primary care practitioner for further evaluation and treatment.

Providing Information to the Caregiver

If the member grants permission, information about their condition and treatment plan will be given to the caregiver. This information can be helpful for the caregiver to provide the appropriate support and care to the member. This information should include the type and methods of support a caregiver can provide.

Supporting Communication between Patient and Practitioner

An important aspect of care is the ongoing communication of the member's condition and adherence to treatment. Program materials provided to members address the importance of the communication with healthcare practitioners and provide helpful methods of ways to communicate with them.

Informing and Educating Practitioners about the Program

Sanford Health Plan practitioners are informed and educated on the CHF Disease Management Program. Information is published annually in the provider newsletter and is included in the Provider Manual and on the Health Plan website at www.sanfordhealthplan.com.

The program information provided to practitioners includes instructions on how they or their Sanford Health Plan patients may access the disease management services offered by the program. Practitioners are provided information on how the Plan works with their Sanford Health Plan patients in the program to monitor their self-management activities, diet and weight management, compliance with medication, compliance with clinical practice guideline recommended visits and tests and relevant test results.

Practitioners are instructed to contact the Sanford Health Plan Quality department at 1-888-315-0884 or 328-6868 for any questions concerning the CHF Disease Management Program. Questions about medical benefits or other issues should be directed to Member Services at 1-800-752-5863 or 328-6800.

Satisfaction with Disease Management

A program satisfaction survey is conducted annually to assist in determining additional resources needed and adjustments that may need to be made to the operations of the program. Disease management program inquiries and complaints are also reviewed and analyzed quarterly in the Sanford Health Plan Quality Committee. The purpose of the review is to identify patters of inquires and complaints as well as improving satisfaction with the DM program

Measuring Effectiveness *(Audited HEDIS results that are specifically relevant to the condition addressed are considered appropriate measures. NCQA recognizes that the population may not exactly match the population of the program, but it is an acceptable substitute.)*

Performance measures are tracked annually for the CHF Disease Management Program to measure the effectiveness of the program. For this specific program, the ACE Inhibitor/ARB/beta blocker utilization rate is measured for the eligible enrolled population. The inpatient hospitalization rate is also measured for this population. These quantitative measures are analyzed in comparison to the Plan's past performance and national benchmarks, when available.

The active participation rates, performance rates measured, analysis completed and interventions implemented are tracked in an NCQA Quality Improvement Activity Form to assist the Plan's Quality Improvement staff in ensuring that all necessary steps are completed.

Additionally, Sanford Health Plan has also implemented several quality improvement activities.

Asthma

- An Asthma Tool Kit that includes information on triggers, formal asthma education, proper medication use, action plans, smoking cessation, online resources and more.
- A FREE peak flow meter and a spacer to help manage their asthma.
- Phone calls from caring nurses in the event of medication-compliance issues. The nurses may also notify the member's healthcare practitioner.

Attention Deficit/Hyperactivity Disorder (ADHD)

- A one-time mailing that includes fact sheets, age-specific and up-to-date information on ADHD symptoms and treatments.
- Guidelines regarding recommended follow-up care.
- Tools to track progress of ADHD treatments.

Headaches
Members diagnosed with chronic headaches can find on our website a variety of resources including tools to help identify triggers, symptom trackers, action plans, and more.

Mental Health
Targeted follow-up can make a positive difference for members who struggle with mental health problems. Sanford Health Plan provides:

- Follow-up education immediately after discharge from a mental health facility and a reminder by letter and by phone to keep follow-up appointments.
- Education on antidepressant medications for members with a new prescription.
- Notification to practitioners when their patients who recently started taking antidepressant therapy have stopped filling their prescriptions.

Healthy Pregnancy Program
The Healthy Pregnancy Program helps identify concerns early so that members and their healthcare practitioner can take steps to ensure a healthy pregnancy.

- A health risk assessment to identify any special needs and to customize your educational materials.
- Education materials on nutrition, lifestyle, prenatal testing, exercise, stress, fetal development, breast feeding, postpartum care, childhood immunizations and more.
- Nurse phone support as needed.

Adolescent Health
Sanford Health Plan opens the door to targeted, comprehensive care for our adolescent members, including:

- A reminder to parents to schedule an annual well care visit for their adolescent. A well care visit covers much more than an athletic physical. It addresses a wide range of topics that can best address the health of your adolescent.
- Members turning 11 and 12 receive birthday cards with immunization reminders.
- Useful information on almost any teen topic on our KidsHealth link on our website at www.sanfordhealthplan.org

44. Are you willing to customize your care management/DM programs and services for NDPERS? If so, please explain and provide an example.

Yes, Sanford Health Plan is willing to customize care management programs to specifically meet the NDPERS population management needs.

45. Describe the programs offered to patients with rare and chronic diseases. Is this program outsourced? Who is the current vendor?

As described above, Sanford Health Plan provides in-house complex case management services which often includes patients with comorbid conditions and/or rare and chronic diseases.

SANFORD HEALTH PLAN

46. Describe in detail your ability to provide on-line wellness programs. Compare it to the existing program presently in the NDPERS program (see our website). Specifically identify any deviations from the existing program.

Our Team

Sanford Health Plan's Worksite Wellness team has the depth and breadth of resources to help your organization achieve its wellness goals. Currently, our Business and Wellness Development Coordinator leads a team of Wellness Educators with education in nutrition & public health, exercise science & strength training, holistic wellness & Yoga, tobacco cessation and behavior change. Half of the wellness team holds a graduate degree in their area of specialty. All have all been trained as certified health and wellness coaches through Wellcoaches® and as tobacco cessation educators through the Minnesota American Lung Association.

Our Life Advocates and Licensed Social Workers, complements the team by providing resource referrals for psychosocial issues such as emotional, financial, interpersonal and personal needs. Our screening education team, Partners in Prevention, coordinates appropriate health screens with local provider partners with the goal of prevention in mind.

Our Approach

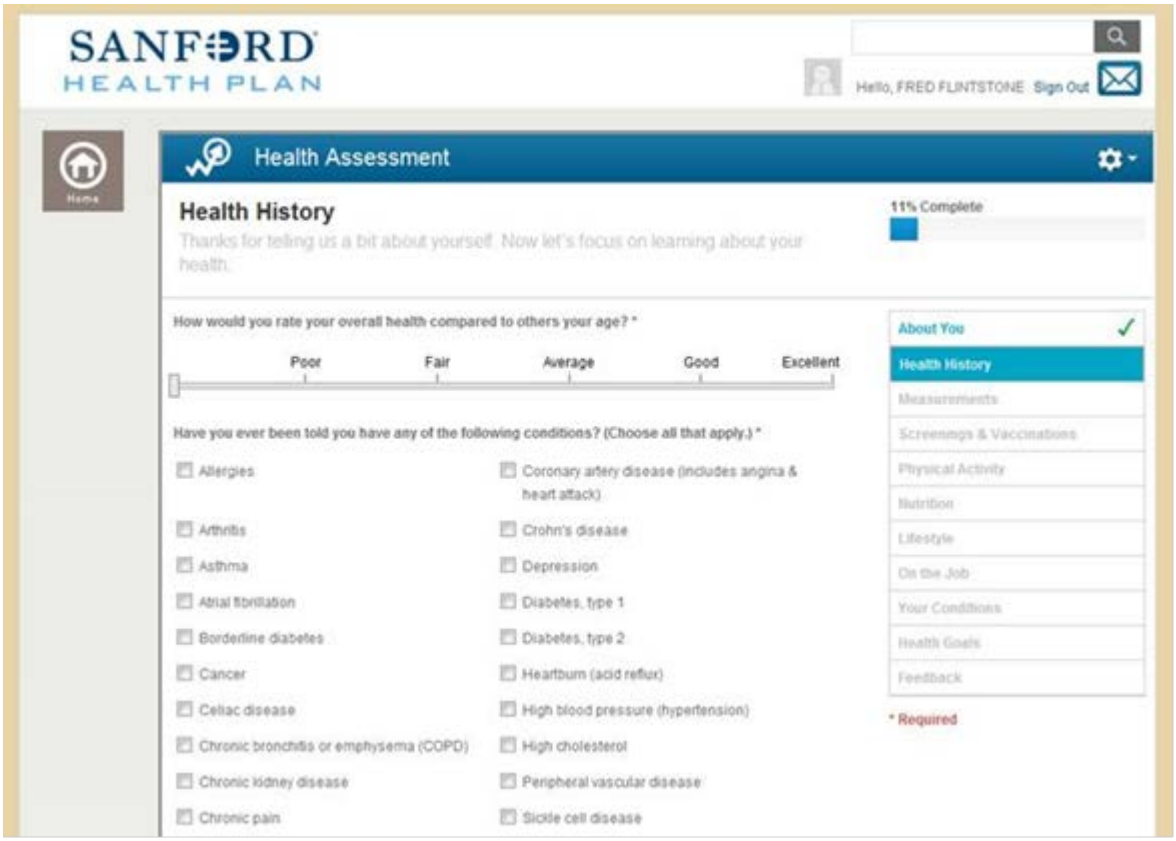
While the NDPERS employees would have a designated team member assigned to deliver wellness programming, all members of the team would be available to support the wellness initiatives of NDPERS. Our Worksite Wellness team works collaboratively based on the needs and interests of the group to deliver risk-based programs geared to decrease the health risks of the population, improve health literacy and impact behaviors that promote healthy lifestyles.

We work from a consultative model because we know one size does not fit all when it comes to worksite wellness programs. Our team works closely with employer wellness coordinators and wellness teams/committees to understand the culture and the best ways to message, implement and evaluate wellness programming. We have expertise in helping our clients start wellness teams and once they are started, we continue to play an active role. With larger clients with locations in multiple states, we host a regularly scheduled call/Webinar with representatives from their various wellness teams to share best practices, provide an opportunity to exchanges ideas and to make sure the company's wellness vision is being implemented in all locations. We would also provide special continuing education calls/Webinars for wellness coordinators to help them develop strategies to increase participation and engagement at the local level.

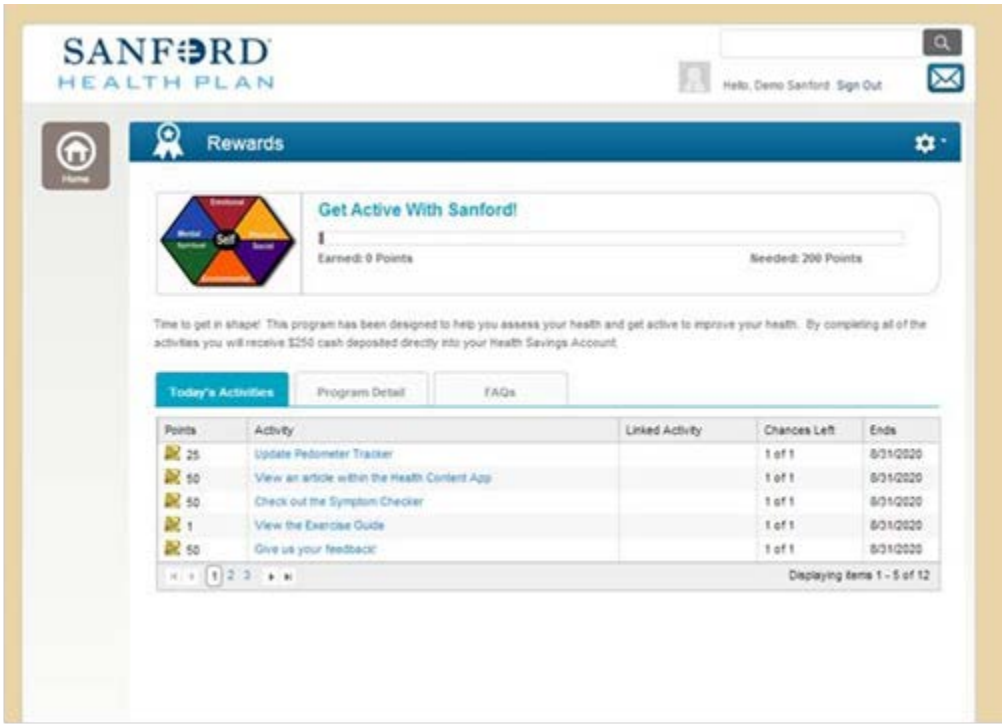
Our Online Resources

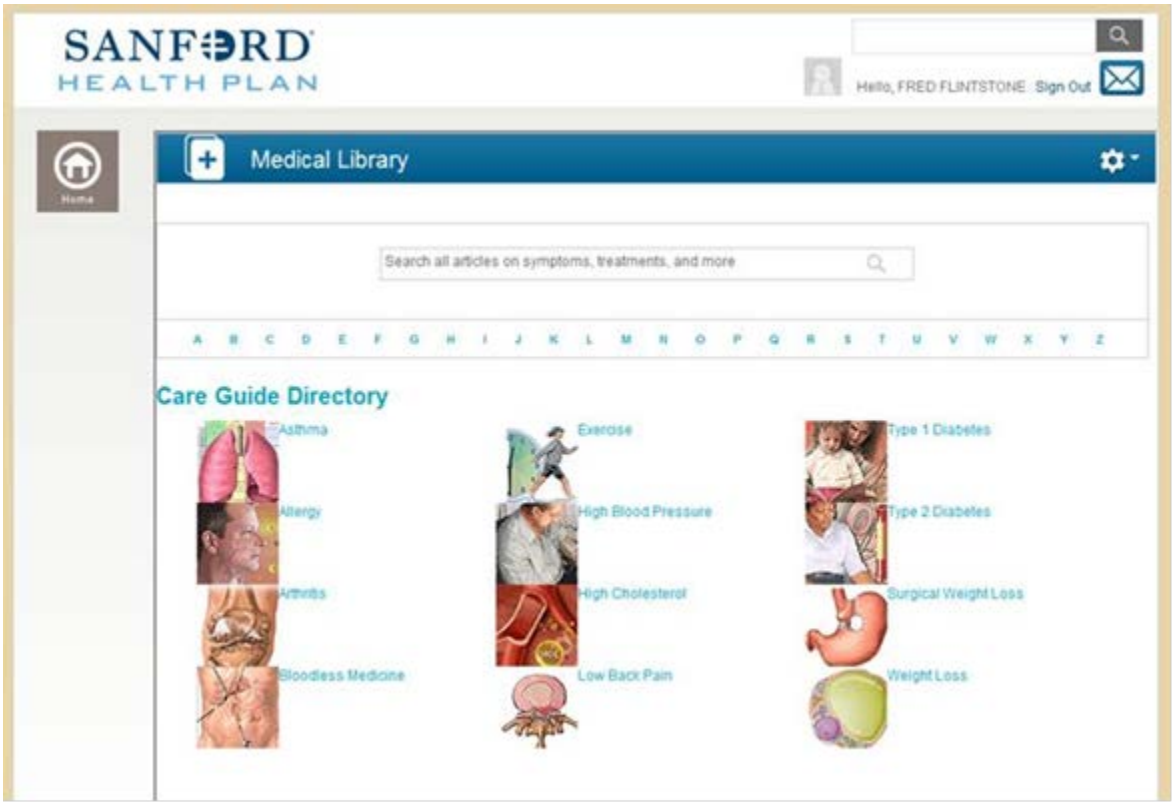
Our online health management tool, bWell, complements the expertise of our Worksite Wellness team. bWell is an interactive, web-based health management system. Using the personalized health tools and information on bWell can help individuals improve their health and make more informed healthcare decisions. The Health Assessment calculates health age, determines risk levels for serious conditions and provides feedback regarding how health habits can be improved. A medical library, medicine cabinet, and trackers for health behaviors are additional resources available in our bWell portal. Below are a few screen shots of these resources:

SANFORD HEALTH PLAN

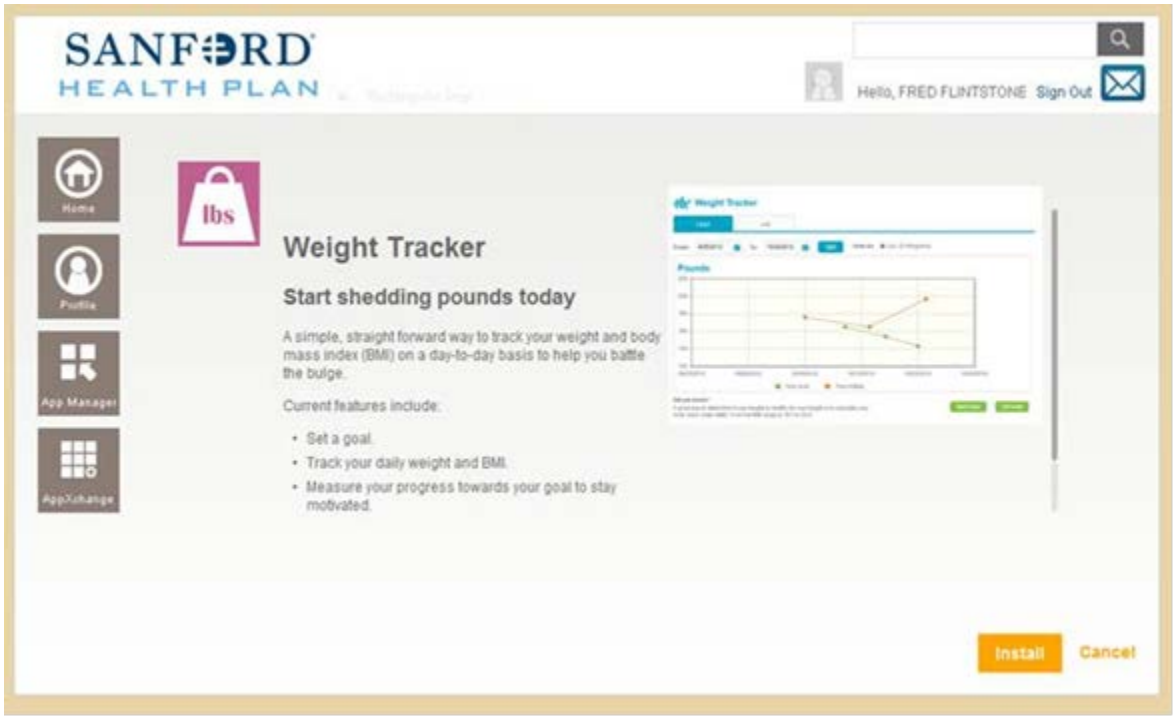


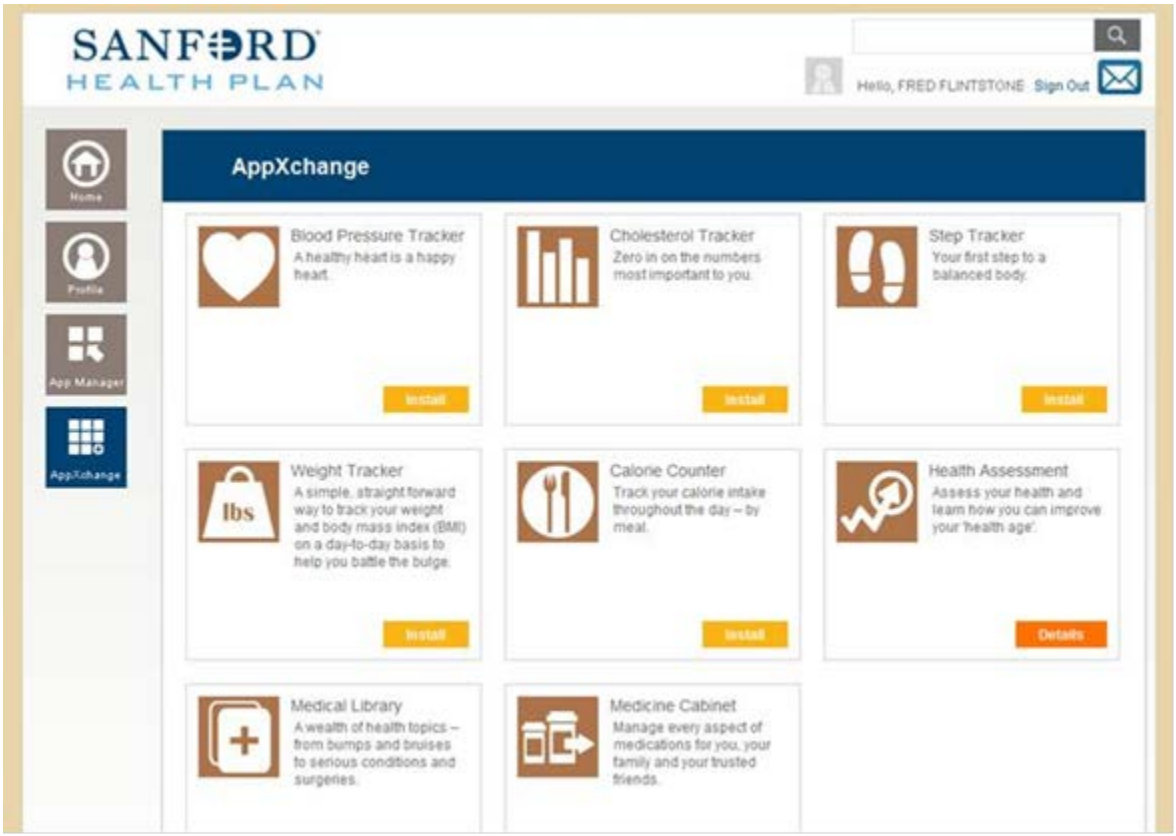
SANFORD HEALTH PLAN

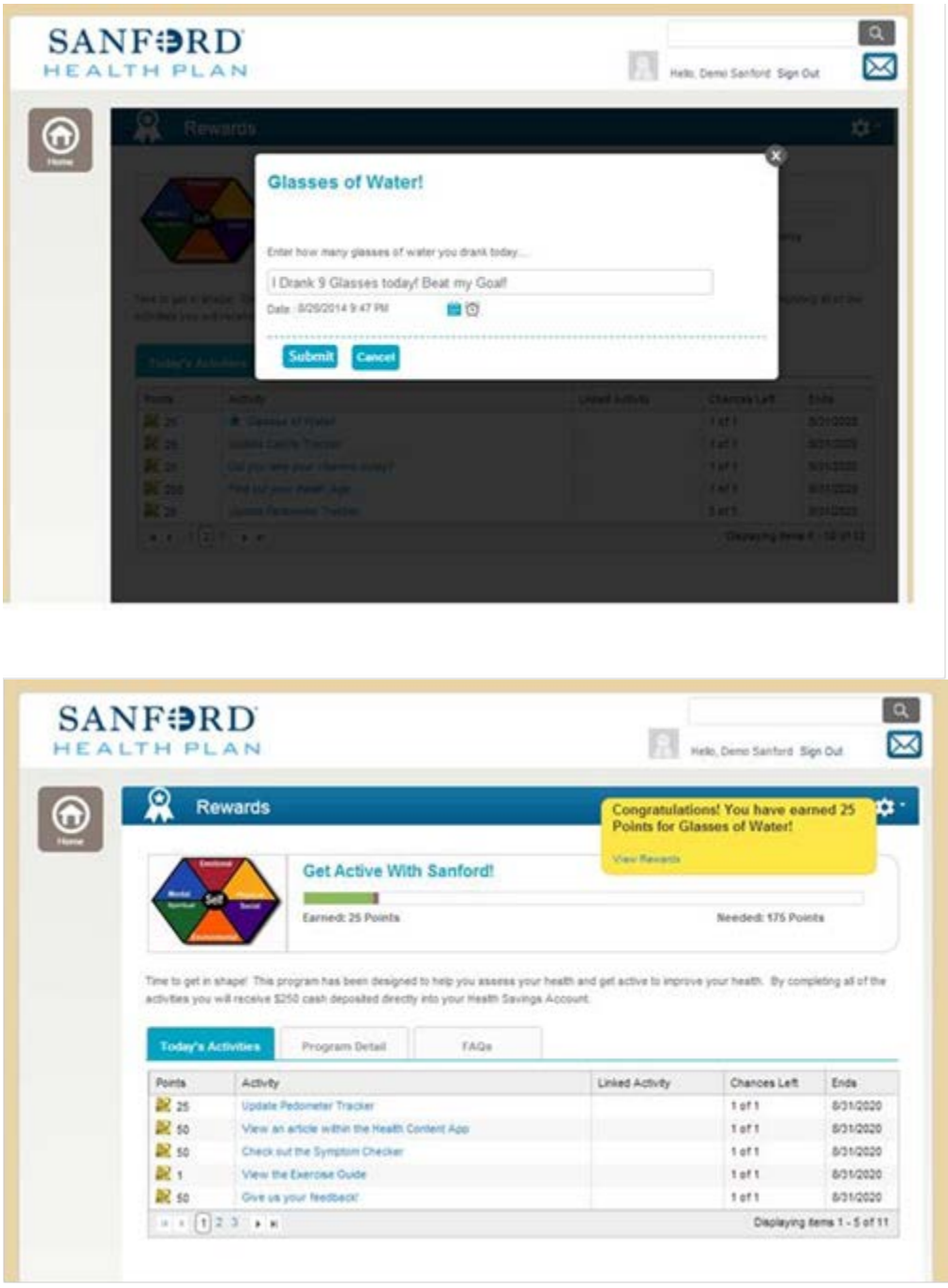




SANFORD HEALTH PLAN







These resources work in concert to empower participants to take charge of their health. Individuals who complete a Health Assessment are invited to participate in telephonic or email wellness coaching if they desire help in achieving their wellness vision.

Our Commitment to Outcomes

We know our clients want results so we work hard to get the best engagement possible. Messaging and marketing are at the heart of any successful health promotion program. The power of a fully articulated health promotion messaging strategy coupled with a committed

wellness team/committee can make a huge difference in participation. Although the Health Plan does provide some incentives for participation, e.g. pedometers, water bottles, resistance bands, cinch bags, etc. we have found the best way to increase participation is to help our clients build a culture of wellness and to continually communicate this message. The greater the participation and engagement in wellness programming, the better the population sample, which empowers you to see the impacts of your wellness program on your population's health. Sanford Health Plan provides aggregate group reporting whether it's for an annual Health Risk Assessment campaign, a physical activity or nutrition wellness challenge, or participation in our wellness Webinars. We partner with our clients to help them achieve and surpass their participation goals and then provide the resources to help participants improve and sustain their health outcomes.

bWell Online Health Management Tool

- Health Assessment
  - Learn risks for chronic conditions
  - Receive feedback on lifestyle choices
  - Discover "Health Age" compared to real age
- Medical Library
- Pharmacy
  Health Trackers
- Aggregate Reports

Preventive Health Screens
- Annual biometric screen (height, weight, blood pressure, glucose, cholesterol panel)
- Opportunities for other onsite health screens based on demographics and risk

Partnership with Employee Wellness Team/Committee
- Act as consultant
- Facilitate bWell Health Assessment biometric screen promotion & data collection
- Assist with development of worksite wellness plan, goal-setting and measurement
- Provide resources to support goals

Employer Wellness Incentive Program Administration
- Assist with wellness incentive program development
- Promote wellness incentive program to employees
- Provide incentive payout reporting quarterly or annually

Wellness Group Activity
- Online Wellness Challenges
- Physical Activity
- Nutrition
- Stress Management
- Tailored based on need

GoToMeeting/Webinars on Health & Wellness Topics, some examples include:

- Promoting bWell
- Reading Nutrition Labels
- Portion Sizes
- Dietary Guidelines
- Stretching Techniques
- Stress Management
- Behavior Change
- Tobacco Cessation Education

Wellness Coaching Program Development

- 1-1 telephonic/email wellness coaching based on individual readiness
- Focus on intrinsic motivation and behavior change

Health Notions

- Monthly newsletter

47. Describe Wellness incentives you offer. Compare and contrast that with the existing incentives.

Sanford Health Plan is committed to design a wellness program that fits the needs of NDPERS. Our wellness programs are not a one-size fits all and we currently customize programs that fit our clients' culture, demographics and strategic objectives. Additionally, Sanford Health Plan will work with the State to replicate and wellness incentives that meets the state's overall health and wellness goals.

48. Describe your ability to support PERS Wellness initiatives by providing the administrative services for:

a. Tobacco Cessation program
b. PERS Diabetes Program
c. Dedicated Wellness Program Staff
d. Prenatal Program

As described above, Sanford Health Plan is capable of supporting Tobacco Cessation Programs, Diabetes programs and Healthy Pregnancy program through its dedicated wellness program staff.

49. Describe your ability to support the employer based wellness program and the wellness benefit funding program (see our website).

Sanford Health Plan commits to administer an employer based wellness program configured to reward participating employers to receive a 1% health insurance premium discount for promoting wellness initiatives for their employees at their worksite.

This program would be administered through our existing WordDoc *Health eRewards* online tool as described in #46 above. While the look and feel of the program may be

different, the functionality will closely mimic the existing program where employers that participate in the NDPERS Group Health Insurance Plan have the opportunity to enroll in the employer based wellness program on an annual basis. Sanford Health Plan will appoint a Wellness Coordinator to perform the following services:

- Coordinate and attend the Employer Wellness Workshops;
- Distribute communication materials to employer's employees on a monthly basis and promote the PERS Tobacco Cessation Programs;
- Implement the Wellness Program during plan year; and
- Report at plan year-end the results of wellness activities

Network Accessibility and Disruption

50. We are requesting that vendors provide a GeoAccess network accessibility and disruption analysis outlining network access based on the access standards listed below separately by North Dakota County. If you are proposing a combination of owned and leased networks, please provide your results separately by network. This GeoAccess analysis must be provided for your proposed NDPERS network. A census file has been provided in Appendix E for your use.

Provider Type	Access
Primary Care Providers (family/general practice, pediatrics, internal medicine and OB/GYN)	2 providers within 30 miles
Specialists	2 providers within 30 miles
Hospitals	1 hospital within 50 miles

Please provide the GeoAccess summaries in the table below as well as back-up detail (back-up detail on CD submission only) for employees who fall both within and outside the following access standards. Your match should include all valid zip codes in each of the counties in North Dakota that your network serves and in which participants reside. In addition, you should include only open practices in your analysis.

Percent of NDPERS Employees Meeting the Access						
Provider Type	**Family/ General Practice**	**Pediatrics**	**Internal Medicine**	**OB/GYN**	**Specialists**	**Hospital**
North Dakota						
County 1						
County 2						
County 3						

Sanford Health Plan owns and maintains its own network in South Dakota, Minnesota, Iowa, North Dakota and Nebraska consisting of nearly 15,000 providers. Sanford Health Plan is proud that we have retained 99.9% of its contracted providers over the past few

years. The market experiences about a 5% turnover in available providers on an annual basis as providers either retire or move out of the area.
Please note that the proposed Sanford Health Plan network for NDPERS does not include the Essentia Health provider network.

Please refer to the following attachments:

- **Attachment H** – GeoAccess report illustrating NDPERS locations relative to Sanford Health Plan's local, proprietary commercial network which primarily consists of the four state region of South Dakota, Minnesota, Iowa and North Dakota.

- **Attachment I** – GeoAccess report illustrating NDPERS employee locations relative to Sanford Health Plan's national provider network, MultiPlan.

- **Attachment J** – GeoAccess report illustrating NDPERS employee locations relative to the Preferred One regional PPO network.

- **Attachment K** – Provider Access Standard by county report that illustrates the percent of NDPERS Employees that meet the access standard.

- **Attachment L –** Disruption Analysis report for professional and facility services. NOTE: THIS REPORT IS MARKED AS PROPREITY AND CONFIDENTIAL.

51. Provide a listing or provider directory and link to the web for the provider networks you are proposing for NDPERS.

Sanford Health Plan owns and maintains its own network in South Dakota, Minnesota, Iowa, North Dakota and Nebraska. There are nearly 15,000 Sanford Health Plan participating providers which may be found in our online directory at www.sanfordhealthplan.com. The online provider directory can produce a statewide directory or perform a search by provider name, location, or medical specialty. This website is updated weekly. Please refer to www.sanfordhealthplan.com

52. Identify and describe your national preferred provider organization.

For national coverage, Sanford Health Plan utilizes PHCS Healthy Directions and MultiPlan networks for members who live, work or travel outside of our service area and for students. Those providers can be located at www.multiplan.com.

The PHCS Network includes over 4,600 hospitals, 80,000 ancillary care facilities and 70,000 healthcare professionals. This ensures that members traveling, residing or outside of the network have access to the largest independent primary PPO in the nation. The PHCS Network has earned an endorsement for network quality from NCQA.

National average savings from PHCS Network are over 40% for practitioner and ancillary facility claims and over 90% of the practitioners in the PHCS Network are contracted under a fixed fee schedule arrangement, such as a DRG or Per Diem.

Current members can create a customized provider directory simply by logging into the website at www.sanfordhealthplan.com using their Member ID number and last name. This simple log-in will search the network(s) available to the individual based on their home address (i.e. Sanford Health Plan, PHCS Healthy Directions and MultiPlan, PreferredOne). For new hires or anyone else simply wanting to view the Sanford Health Plan network who does not have a Member ID, our website still displays the local Sanford Health Plan service area and national networks. This website is updated on a weekly basis and Sanford Health Plan conducts ongoing audits to ensure the validity of the information available to our members through the internet. However, Sanford Health Plan has worked with a variety of national wrap networks and is willing to accommodate networks arrangements that meet NDPERS' needs.

53. **Confirm your willingness to negotiate and maintain NDPERS-specific provider contracts to allow for cost control mechanisms and alignment of contract and plan years. Describe your process and approach for accomplishing this.**
Sanford Health Plan is committed to negotiate and maintain NDPERS-specific provider contracts and does not foresee any operational difficulty in completing this task prior to 7/1/15. We will assign regional Provider Relations Representatives to systematically meet with providers to amend existing provider contracts that align with the state's cost control needs.

54. **Do you anticipate any significant provider contract changes for 2015? Describe.**
Not at this time.

SANFORD HEALTH PLAN

Cost, Quality, and Pay for Performance

55. **Describe the programs and methodologies currently in place to gather and measure meaningful provider quality and efficiency data that can be shared with members.**
    Please refer to our HEDIS report in Attachment D for detailed information about our provider and quality measures.

56. **Describe in detail the performance standards you currently have in place with your contracted physicians, provider groups, hospitals, and other providers. Outline the types of measures utilized, how you monitor and track these measures, how providers are held accountable, and how frequently the data is compiled and shared with the physicians and provider groups.**
    Sanford Health Plan currently has the infrastructure in place to track and tie provider performance measures to a variety of reimbursement strategies. As described previously, Sanford Health Plan would welcome NDEPRS into a medical home model that meets the needs of state employees and NDPERS cost containment strategies. Performance standards using Sanford Health Plan's Patient and Population Management modules may include but are not limited to:

    - Patient risk stratification by medical condition and severity-of-illness.
    - Integration of patient "gaps-in-care" measures with the identified high-risk patients using unique, claims-based measures from nationally recognized organizations.
    - The ability to identify physicians involved in the treatment of the patient in the medical home model.
    - Identifying variables that contribute to the patient predictive risk score to effectively manage our patient population.
    - Ability to include lab values and other clinical results (e.g., blood pressure) that is extracted from the patient's electronic medical record.
    - The ability to focus on patients with "Repeat ER" and "Repeat Admissions" and determine the reasons behind these high-cost events.
    - Identifying the services most associated with physician inefficiency, by specialty type identified at either the overall or medical condition level for each specialty type.
    - Identifying common "markers" from national comparative datasets across regions, to provide the state with comparative rates for these "markers", at the 25th, 50th and 75th percentiles allowing the state to see not only where a physician's rates are as compared to their peer group, but also to compare their region's rates to national data.
    - Pinpoint the specific services (CPT-4 codes), medical conditions, and physician specialty types (including PCPs) to initially manage to maximize cost savings and effectiveness improvement.
    - Identifying and addressing providers that display inefficient patterns of care based on performance markers. The inefficient pattern can be concisely supported using a Provider Profile reports showing physicians how they compare to the peer group in their specialty that are driving their efficiency score.

57. Describe your participation in pay-for-performance initiatives. To what extent do these activities impact the health care costs of NDPERS or claims incurred by its covered population?

As described in Section 8 of this RFP, our goal would be to develop a medical home shared risk structure for the North Dakota marketplace that would be mutually agreed upon. We currently envision this arrangement to come in the form of a fully-capitated or Episode of Care model. We would also like to jointly develop targets across disease states or processes that are important to the North Dakota population and are willing to accept an incentive based payment structure structured around these targets.

Our goal would be to incorporate the NDPERS employees into a medical home model, titled "Sanford One Care" including all required infrastructure (reporting templates and contracting templates) in all of Sanford's applicable locations. For example, our combined relationships in North Dakota communities would allow our potential partnership to expand geographically and provide mutually beneficial results as we define and work towards common goals.

Sanford One Care will achieve a rapid and effective change through the deployment of expert training teams, new curriculums and a unique system of ongoing mentorship and consultation.

1. NDPERS employees will be treated in a new medical home that transforms primary care. Sanford One Care will establish the disposition that the role of healthcare is to enable patients to become active participants in their health rather than consumers of episodic services. This way of thinking is aimed not only at physicians, but all of allied health and the general population and accomplished through providing resources to make the paradigm shift. Training and development, technical assistance and health information technology resources embedded into this project are designed to support this transformation.

2. RN Health Coaches will be integrated into the redesigned care centers, to promote maximum patient engagement and personal health management, improved access and communication through non-traditional channels (personal health records, email, e-visits, etc.), and enhanced patient satisfaction. A Health Coach is a Registered Nurse specifically trained to coordinate patient care, conduct motivational interviews, establish patient centered goals for behavioral and/or lifestyle changes, manage quality improvement activities, and report data. Each Health Coach must attain a level of competency as demonstrated by skill assessments and competency checklists. Deployment of RN Health Coaches will initiate the integrated, team-based care to support better health, better care, and cost efficiencies. Workforce development activities aim for a ratio of 1:5 RN Health Coaches to primary care providers.

3. Behavioral health services will be integrated into the care center resulting in enhanced education, improved access to care, improved support to patients to modify behaviors, and more comprehensive collaborative treatment options. A key component of this proposal is enabling access to behavioral health care through new processes integrating behavioral health care professionals into patient-centered health care teams in primary care settings. In rural areas,

previously without access to behavioral health professionals, remote technology will enable the deployment of an integrated Behavioral Health Triage Therapist to provide diagnostic, acuity, and complexity assessments so that he patients can be triaged to the most appropriate level of collaborative care. Psychologists and psychiatrists from other regions in our health system will be able to partner with rural clinics through this technology to offer team consultation to the primary care team and direct clinical services via telehealth technology as needed to patients in the remote clinic sites. It is well documented that that most behavioral health conditions go unrecognized and undiagnosed, that even once identified, only half of the individuals will ever receive any treatment at all. Workforce development activities aim for a 1:10 ratio of Behavioral Health Triage Therapists to primary care providers.

4. Sanford One Care will maximize information technology to manage individual care opportunities, and transition to population care management in the future. Sanford Health's EPIC-based electronic medical records system, branded Sanford OneChart, provides the platform for connectivity to deliver a seamless experience across the large rural healthcare network. An innovative webbased adaptation will extend Sanford OneChart to include "MyChart" and "MyConditions," giving patients convenient access to view their medical record, lab results, preventive care topics, and patient-centered flow sheets.

   Additionally, MyChart and MyConditions enable patients to communicate with their healthcare teams and provide a central place to view both provider and patient entered flow sheet information to monitor chronic health conditions. To improve monitoring, a standardized patient registry will be enabled to produce recurrent reports, graph selected measurements, and generate patient-specific reports at the point of care for evidence based care standards and optimal chronic disease management. Behavioral health screening tools will be electronic, enabling patients to complete behavioral health assessments on line. Patients and the care team will also use electronic tools for completion of satisfactions surveys.

5. Measurement of success will be through standardized and transparent clinical metrics at region, clinic and individual physician levels, comparing performance to internal and external best practice benchmarks. The decision support team will work with the Methodology and Data Analysis team at Sanford Center for Health Outcomes and Prevention Research for a thorough self-evaluation.

   Formative evaluations will guide the project operations and implementation while summative evaluations are designed to assess this project's impact on the three-part aim of better care, better health, and lower costs through improved quality. Quality indicators and continuous improvement methods addressing patient satisfaction, utilization, clinical quality, and patient access are detailed in the evaluation section of this proposal. Additional measures of success presented include operational performance and the impact on lower costs. The hypothesis supporting this transformation is that workforce redesign and integration of behavioral health and primary care practice will improve adherence to quality standards of care while concurrently improving clinical outcomes and efficient

utilization of resources—cumulating in reduced healthcare expenditures, and strong patient and employee satisfaction.

Credentialing and Contracting

58. Briefly describe the initial credentialing process. How often are physician, hospital and other contracts (labs, imaging facilities, DME, home health care) reviewed?

Sanford Health Plan has an extensive provider credentialing and re-credentialing process. The minimum criteria for provider selected to the Sanford Health Plan network are that they must possess all of the necessary credentials required by NCQA. Those requirements include an active license in the state in which they practice, an active DEA license if they prescribe drugs, verified graduation from medical school or board certification, current malpractice insurance and verification and review of any malpractice claims, verification of work history and explanation of any gaps in work history, as well as a review of any reasons for any inability to perform the essential functions expected by the provider's specialty, lack of present illegal drug use, any history of loss of license and felony convictions, history of loss of privileges or disciplinary activity, as well as any discrepancies between the information gathered versus the information provided by the practitioner. Providers are credentialed every 3 years.

SANFORD HEALTH PLAN

Reimbursement and Discounts

NOTE: THE BELOW QUESTIONS 59 THROUGH 63 ARE MARKED AS PROPRIETARY AND CONFIDENTIAL.

SANFORD HEALTH PLAN

Performance Standards and Guarantees

As described in Section I. Overview, of this RFP, health plan vendors are required to comply with performance standards and guarantees that include a financial incentive/forfeiture which is negotiated as part of the renewal process. See appendix H for a copy of these performance standards and guarantees. You are required to offer your performance standards and guarantees for the board's consideration using appendix H. It is a priority for the board to have a comprehensive set of standards and guarantees relating to this plan.

64. Please confirm you have completed appendix H and confirm your willingness to comply with the performance standards and guarantees or provide suitable alternatives. Identify any additional standards and metrics your organization would be willing to include.

Sanford Health Plan is committed to match the current performance measures and dollars at risk. In Addition to these standards, Sanford Health Plan welcomes mutual evaluation of additional standards in coordination with the state to help meet cost containment or wellness initiatives.

Criteria	Value of Incentive	Value of Forfeiture	Confirm acceptance of standard/guarantee or propose an improved or suggested modification
Cost Management:			
By December 31, 2014, 17% of NDPERS members have completed a Health Risk Assessment (currently at 15.5%).	$0.00	$15,000	By December 31, 2015, 10% of NDPERS members have completed a Health Risk Assessment
By December 31 2014, NDPERS will have a 5% point increase in the NDPERS group aggregate HRA wellness score.	$0.00	$10,000	By December 31 2016, NDPERS will have a 5% point increase in the NDPERS group aggregate HRA wellness score.
By December 31, 2014, HealthyBlue NDPERS group aggregate incentives paid for HealthyBlue redemptions will increase by 10% over 2013 NDPERS rate.	$0.00	$7,500	By December 31, 2015, 10% of NDPERS members will have created a myHealthPlan account where they can access our beWell Health Management Tool and the incentive program.
2014 annual percentage average of NDPERS members receiving the Health Club Credit will increase by 10% over 2013 NDPERS rate.	$0.00	$7,500	By July 1, 2016 annual percentage average of NDPERS members receiving the Health Club Credit will meet the 2014 annual NDPERS rate.
Health Outcomes:			
80% of the NDPERS population will be enrolled in a medical home.	$0.00	$15,000	By July 1, 2016, 30% of the NDPERS population will be enrolled in a medical home.

Criteria	Value of Incentive	Value of Forfeiture	Confirm acceptance of standard/guarantee or propose an improved or suggested modification
HEDIS-like measures breast cancer screening rates will be at least 80%.	$0.00	$15,000	HEDIS-like measures breast cancer screening rates will be at least 80%
HEDIS-like measures cervical cancer screening rates will be at least 85%.	$0.00	$15,000	HEDIS-like measures cervical cancer screening rates will be at least 85%
HEDIS-like measures colorectal cancer screening rates will be at least 60%.	$0.00	$15,000	HEDIS-like measures colorectal cancer screening rates will be at least 60%
Provider Network Management:			
BCBSND will maintain an NDPERS PPO network consisting of 92% or more of the in-state hospitals, MDs and Dos that participate in the Company's Par Network.	$0.00	$75,000	Amount incorporates a requested increase from the current level By Dec. 31st, 2015 SHP will maintain an NDPERS PPO network consisting of 85% or more of the in-state hospitals, MDs an DOs that participate in the Company's Par Network.
BCBSND guarantees NDPERS a minimum provider discount (1-(Allowed/Billed)) of 30% for Non-Medicare contracts.	$0.00	$140,000	SHP guarantees NDPERS a minimum provider discount from in-network providers (1-(Allowed/Billed)) of 30% for Non-Medicare contracts.
Operational Performance:			
Claims Financial Accuracy will be 99% or greater.	$0.00	$25,000	Claims Financial Accuracy will be 99% or greater
Claims Payment Incidence Accuracy will be 97% or greater.	$0.00	$25,000	Claims Payment incidence Accuracy will be 97% or greater
Claim Timeliness – claims processing within 30 calendar days will be 99% or greater.	$0.00	$25,000	Claim Timeliness – claims processing within 30 calendar days will be 99% or greater
Average Speed of Answer will be 30 seconds or less.	$0.00	$25,000	Average Speed of Answer will be 45 seconds or less
Abandoned rate will be 5% or less.	$0.00	$25,000	Abandoned rate will be 7% or less
Requested New Standards/Guarantees:			
Provide a standard by which interest rates will be set at a level at least as favorable to NDPERS as the current methodology	$0.00	$50,000	The interest rate utilized currently is based on the US Treasury Notes quoted by the Wall Street Journal

Criteria	Value of Incentive	Value of Forfeiture	Confirm acceptance of standard/guarantee or propose an improved or suggested modification
Provide a guarantee on Rx rebates that will be passed-through to NDPERS	$0.00	$10,000	100% of Rx rebates will be passed-through to NDPERS
Total	**$0.00**	**$500,000**	

SANFORD HEALTH PLAN

Pharmacy Benefits Management Services

65. Describe your company's experience with administering pharmacy benefits. Provide a summary that includes the number of years that your company has provided such services, number and type (governmental or private) of clients, the total number of eligible employees, and the total number of actual participants that your company currently serves. Identify those clients who are large employers with multiple payroll processing centers and Medicare Part D program support.

Sanford Health Plan has been partners with Express Scripts Inc. for over a decade, administering pharmacy benefit plans for approximately 300 groups since inception and over 96,000 members currently including 2,500 Medicare supplement members. Most large employers have multiple payroll processing centers. Non of Sanford's clients currently have a Medicare Part D program administered by Sanford Health Plan. Sanford Health, and the Joint Venture Group School Pool would be our largest clients with multiple payroll processing centers.

You can view our formulary online at www.sanfordhealthplan.com. Sanford Health Plan has a closed formulary system and offers the employer group their choice of copay options. The current formulary is approved by the Physician Quality Committee on an annual basis in January.

Pharmacy Reports

Trend Central My Standard Reports is an online reporting tool divided into the following categories:

- Benchmark Reports — Compare program performance using data from clients of similar geographical location, industry or group type, or size. Users analyze benchmark information to assist in making decisions related to benefit plan changes.
- Billed Date Report — Lag triangle reports that include billing information and claim count by month with totals by month for the entire period. Users assess the lag time between a claim service date and the date the claim was billed to a client. Billed date reports match client billing and are used for reconciliation reporting.
- Drug Reports — Ranking, detail, and drill reports by drug and therapeutic levels to demonstrate and assist in analyzing drug patterns.
- Key Performance Metrics — Executive-level pharmacy program key performance metrics, which refer to period-over-period statistics. These indicators, typically at the claim level, provide the information most requested by clients. Key Performance Metric reports break out to the group or demographic levels of your choice, based on the eligibility information you provide to Express Scripts.
- Patient Analysis — Various reports at the member utilization level that provide cost breakdown information.
- Pharmacy Reports — Pharmacy-level reports that depict utilization by ranking claims for drug and member.
- Prescriber Reports — Ranking, detail, and drill reports by prescriber to demonstrate and assist in analyzing prescribing patterns.

- Prescription Detail — Utilization reports that demonstrate prescription drug detail across a variety of categories.
- Products and Services Reports — Summary and detail reports for claims processed for products and services, such as Prior Authorization. Various data components are captured for each product (for example, Prior Authorization coverage review requests, including approvals and denials).
- Ranking and Trend Reports — Ranking reports that depict utilization at the prescription and provider levels by ingredient cost. Users compare the current reporting period to historical performance.
- Specialty Drug Reports — Collection of reports, including key performance indicators, ranking, detail, benchmarking, and trending, used to retrieve utilization information on all specialty drugs.
- Utilization Summary Reports — Suite of report templates users employ to quickly retrieve summary information. These reports can be used to drill down into varying levels of utilization detail, such as highest-cost therapeutic classes, physician prescribing, retail pharmacy network, formulary, drug, therapy class, mail service pharmacy, and member demographics. The reports identify cost drivers and identify plan management opportunities.

Please see Attachment G for a sample prescription drug report package.

Sanford Health Plan provides thoughtfully designed, effective formulary compliance tools that help Members reduce overall prescription drug costs by encouraging utilization of generic and formulary drugs. The Sanford Health Plan drug formulary was designed with a copay structure that also gives the Member the cost saving advantage of choosing a generic medication. In certain categories only generic drugs are covered and in others generics are covered at the lowest copay and the Brand product at the highest copay. (Generics Preferred Program).

Sanford Health Plan utilizes a variety of methods for controlling the cost of prescription drugs. The following programs are offered to both Members and Providers by way of mail, telephonic or at the point of sale utilizing the Express Scripts claims adjudication system.

- Generic Preferred: Generic utilization program that promotes generic through economic incentives.
- $0 Copay: generic utilization program that promotes generics by having a $0 copay for a specific generic drugs (often tied to a disease management program). This plan is cost effective when the brand to generic cost differential is substantial.
- Drug Choice Program: Member and provider communications promoting the use of therapeutically equivalent generics and/or preferred brand drugs.
- Prior Authorization: Prior authorization protocols are enforced through concurrent analysis of pharmacy claims.
- Step Therapy: Step Therapy protocols apply to online clinical algorithm to second-line drugs at the point of service that requires Members to try a first-line therapy drug before a second-line drug.
- Formulary Compliance: Member education on how to use the formulary and reasons why.

- Pill-Splitting Program: Specific categories of drugs (those that are flat priced) are offered for at a 2 month supply for one (1) copay in order to increase compliance with medication and decrease the copay price burden to a Member.
- Quantity Level Limits: to ensure that medications are dispensed following the manufacturer guidelines or evidenced based medicine protocols based on patient safety.
- Peer Review Programs: Address the appropriate prescribing practices with physicians and midlevel providers

Sanford Health Plan maintains a transparent Prescription Drug program. We develop the formulary internally utilizing the most cost-efficient and effective methodologies for each drug category therefore making the drug program transparent. We use an internal evaluation process to assure the most effective prescription drug is listed in your formulary. The evaluation process utilized by the Physician Quality Committee is that each category of medications is reviewed on an annual basis to determine clinical efficacy of the medications on the formulary and their pricing structure as it relates to compliance, efficacy, plan cost, member cost, ingredient costs, single-source vs. multi-source, patent expiration, rebate possibility, count of pills per day utilization, and regional medical norms.

Member Communication of Pharmacy Program Information

Sanford Health Plan has an effective communication process in place for notifying our Members of changes affecting their pharmacy program. Members are notified of the following changes through these communication modes:

- Drug additions – Member Newsletter, website
- Changes in formulary status – On an annual basis, website, Member Newsletter
- Changes in the network - website
- Ineligible, banned or recalled drugs – Personal letters to Members and Providers
- Refills – At the time of retail fill

In the situation that a newly approved generic drug is now available, the Plan would determine that it demonstrate efficacy equivalent to a preferred brand counterpart—yet at a lower cost we add that new drug to the formulary. At times, the Plan may decide to remove the equivalent Brand product from the formulary and move the market share to the new generic. However, if the newly approved generic is more expensive than the preferred brand counterpart we do not add that product to the formulary and wait until it becomes cost neutral for the Plan, the Member and the Employer group.

Sanford Health Plan notifies Members each quarter with formulary updates in its Member newsletter. The formulary is updated on an annual basis and Members are notified of changes in the Member newsletter. Prior to any deletions or copay changes to the formulary our Members and prescribing Providers receive letters to ensure they understand the change, reason why this is occurring and to provide enough time to get new prescriptions written or to schedule an office visit to discuss change with a

physician. All formulary additions, deletions and/or cost saving strategies are provided on the Sanford Health web site as well as on the Express Scripts web site when the Member signs up for the free services.

Sanford Health Plan has an exception process in place for any Member or Physician who have tried a formulary product and failed.

Claims Payment Process for Pharmacy Claims

The Member receives a prescription from their physician and takes this to their local retail pharmacy to be filled. The Member shows their ID card at the time of the prescription fill so that the retail pharmacy can apply the correct benefits. The local retail pharmacist adjudicates the prescription on-line utilizing their link to the Express Scripts database. Express Scripts has successfully loaded Sanford Health Plan's Formulary with all requirements so that the prescription will process at the proper copay amount or the system will notify the pharmacist of any issues or rules that are required to be followed before the processing on-line can occur. Messaging from Express Scripts the pharmacist may incur is prior authorization required, quantity level limit, or step therapy edits to name a few. Once this occurs the pharmacist is required to call the Utilization Management Department of Sanford Health Plan to continue. If any messaging appears the prescription claim will not process until the issues is handled. If there is no message, the claim will process with a copay amount and the process is completed.

Sanford Health Plan does not cover medications that are filled at a non-participating pharmacy unless an emergency situation arises and then authorization is provided at that time.

For new groups, Sanford Health Plan is experienced in ensuring a smooth transition to our network and formulary in order to minimize disruption. First of all, Sanford Health Plan provides Formulary education in writing in the Members' enrollment packet instructing the Members to call if have any questions or note any formulary disruption prior to the transfer to the new plan.

Secondly, group education about the Formulary and the drug benefit will be provided at the enrollment meetings in each location. Employees will have the opportunity to provide their name and telephone number to a Sanford Health Plan Client Services Representative so that she can provide that information to the Utilization Review Department where a health care professional will complete an outbound call to the Member and assist in the conversion to a Formulary product, notify the Members physician for a letter of medical necessity or provide authorization for a non-formulary product or answer any questions they may have regarding the medication in question.

66. Describe your company's expertise and experience in implementing PBM services for a program that is comparable in size to the NDPERS program, based on the number of covered lives.

Sanford Health Plan effectively manages approximately 350 unique prescription drug benefit plans across all products lines, within four states' regulatory environments for over 96,000 members. Our generic fill rates consistently runs at 76% which is below the national average of ESI's overall HMO book of business generic fill rate of 74.6%.

67. Describe your mail order pharmacy program and provide details on how you market this service.

Specialty Drugs

Sanford Health Plan currently subcontracts specialty drug services to Curascript, a wholly-owned subsidiary of Express Scripts. All Plan Members must prior authorize specialty medication and it must be obtained through Curascript's mail order program. Medication protocols have been approved the Plan for the following conditions and the Member and Physicians office are notified of the process to obtain the medication from Curascript once medical necessity has been determined for the Member. Curascript clinicians are required to call the Plan for any Member who does not meet established clinical criteria for medical necessity determination and they are not able to deny any Member medical services unless it was reviewed and discussed by the Plan's Chief Medical Officer. Approved medication is shipped to the Member's home, physician office or home health agency based on the physician's orders.

Curascript offers clinical support to the Plan in the following disease state areas: Bleeding Disorders, Hemophilia Factor, Hepatitis C, HIV, Multiple Sclerosis, Psoriasis, Cancer, Respiratory Syncytial Virus (RSV), and Rheumatoid Arthritis.

Member financial responsibility is based on the type of specialty medication and the place of service. The specialty drug benefit either applies to the Members pharmacy Brand name copay or to the deductible and coinsurance level.

Curascript clinicians facilitate disease state education, conduct scheduled follow-up calls with patients, reviews appropriate dosing schedules and counsel members on side-effect management and general patient concerns. The core elements of the clinical program include: A patient admission process that includes benefit investigation and management, nursing coordination for teaching and instruction, patient assessment for educational needs, and clinical evaluation. Patient care coordinators take a proactive role in coordination prescription needs, facilitate product delivery, maintain insurance authorizations, monitor adherence, and perform clinical screening risk assessments (Ongoing risk assessment, monitoring, and clinical intervention when appropriate from licensed nurses. Ongoing compliance monitoring using a coordinated effort from the entire patient care team). Social services referrals are available from the on-staff social services team.

Finally detailed Plan reporting is provided by Curascript in order to determine clinical and financial effectiveness of the program.

Sanford Health Plan continues to monitor specialty market trend and are actively involved with Express Scripts. The Plan's President is part of an active leadership team

at Express Scripts that deals with emerging drug technology and trend providing insight and collaboration as it relates to the future of pharmaceuticals in relationship to overall health care initiatives.

This service is marketed during open enrollment sessions, and communicated via member handbooks, certificates of coverage and direct patient/pharmacy communication based on claim utilization.

68. Describe your PBM rebate process. NDPERS is requesting that you provide a rebate guarantee in appendix H?

Requested New Standards/Guarantees:			
Provide a standard by which interest rates will be set at a level at least as favorable to NDPERS as the current methodology	$0.00	$50,000	The interest rate utilized currently is based on the US Treasury Notes quoted by the Wall Street Journal
Provide a guarantee on Rx rebates that will be passed-through to NDPERS	$0.00	$10,000	100% of Rx rebates will be passed-through to NDPERS

Services Provided to the NDPERS

69. Describe the timetable and specific tasks involved to have the NDPERS' program operative for the July 2013 Plan Year. Include a detailed implementation plan and business plan or timeline related to prescription drug coverage including Medicare Part D program support. At a minimum be specific with regard to the following:

a. Amount of time needed for implementing the new program

Sanford Health Plan is able to configure, test and go live with a new prescription benefit package within 6 months. Medicare Part D timelines will follow CMS standards.

b. Recommended activities/tasks and timing

The following tasks would be completed in concert with the medical package program build.

Date	Task	Responsibility
Oct. 2014	Award Notification	NDPERS
October 2014	Sign Administrative Services Agreement between Sanford Health Plan and NDPERS	NDPERS and Sanford Health Plan
Nov. 2014	Begin implementation and operations • Amending Provider Agreements for NDPERS-specific discounts • Develop Summaries of Benefits and Evidence of Coverage (Member Policy) • Develop NDPERS-specific forms and documents (ID cards, applications, provider manual, policies and procedures) • Begin system configuration of benefits, claim edits and rules	Sanford Health Plan
Jan. 2015	Develop Marketing and Communication Plan	
April 2015	Begin Open enrollment meetings and health fairs	
May 2015	Procedure for employee enrollment transaction determined. This could include electronic file transfer, paper enrollment or electronic enrollment via Sanford Health Plan's enrollment system, *myHealthPlan* Employer Portal.	NDPERS & Sanford Health Plan
30 days prior to effective date	Applications processed and Identification Cards are printed and mailed to member's home address.	Sanford Health Plan

c. Responsibilities of the vendor and the NDPERS staff.

Please see above.

d. Transition with incumbent, including providing members 90 day notice regarding formulary changes, and the communication of transition issues to all plan members.

Sanford Health Plan will provide employees with personalized letters identifying formulary changes, alternative drug options and cost impact 90 days prior to the change.

e. Length of time implementation team will be available and accountable to NDPERS.

Sanford Health assures NDPERS that the implementation team and executive management team is available and accountable to NDPERS not only during the implementation process, but also indefinitely after the contract effective date.

f. Identify the staff members, by area of expertise, who will be assigned to the implementation team.

Sanford Health Plan's implementation team for the medical plan will also be the conduit for the prescription drug design, build, test, and go-live period. The Plan's COO and CMO are the lead persons for assigned to the NDPERS prescription drug plan along with the NDPERS Director.

Formulary

70. Provide details and the capabilities of your organization to provide a formulary that is at a minimum equivalent to and as comprehensive as the current formulary used by the NDPERS program. Provide sample formulary documents. At a minimum include the following:

i Describe your policy regarding formulary changes and your procedures for educating and notifying members. Indicate how often the formulary is changed.

Please see Attachment E for a copy of the Sanford Health Plan formulary for non-Grandfathered group plans.

Please see Attachment F for a copy of the Pharmacy Directory.

Sanford Health Plan maintains a transparent Prescription Drug program. We develop the formulary internally utilizing the most cost-efficient and effective methodologies for each drug category therefore making the drug program transparent. We use an internal evaluation process to assure the most effective prescription drug is listed in your formulary. The evaluation process utilized by the Physician Quality Committee is that each category of medications is reviewed on an annual basis to determine clinical efficacy of the medications on the formulary and their pricing structure as it relates to compliance, efficacy, plan cost, member cost, ingredient costs, single-source vs. multi-source, patent expiration, rebate possibility, count of pills per day utilization, and regional medical norms.

Sanford Health Plan notifies Members each quarter with formulary updates in its Member newsletter. The formulary is updated on an annual basis and Members are notified of changes in the Member newsletter. Prior to any deletions or copay changes to the formulary our Members and prescribing Providers receive letters to ensure they understand the change, reason why this is occurring and to provide enough time to get new prescriptions written or to schedule an office visit to discuss change with a physician. All formulary additions, deletions and/or cost saving strategies are provided on the Sanford Health web site as well as on the Express Scripts web site when the Member signs up for the free services.

Sanford Health Plan has an exception process in place for any Member or Physician who have tried a formulary product and failed.

ii Describe how drugs are evaluated for possible inclusion on the formulary.

Express Scripts provides pharmacy benefit management services to Sanford Health Plan. Sanford Health Plan has customized an Express Scripts formulary to meet the health plan's needs.

Sanford Health Plan's Express Scripts account team provides formulary consultation, including modeling tools that support informed formulary decisions and reports that demonstrate overall program effectiveness. Our formulary management provides:

- Clinically objective information from a pharmacy benefit manager that is independent of pharmaceutical manufacturer or chain pharmacy ownership
- Flexibility that enables you to implement and maintain a custom formulary
- Predictable impact, savings, and rebates
- Modeling tools and reports that help you fine-tune your program

Throughout the plan term, the Clinical Program Manager (CPM) serves as Sanford Health Plan's primary contact for clinical information:

Formulary Modeling — The CPM addresses each drug-cost component when helping Sanford Health Plan evaluate products for the formulary, including drug cost net of rebate and pharmacy network discount. The clinical program manager also evaluates utilization data to demonstrate the impact of formulary decisions that Sanford Health Plan may consider implementing and whether changes involve drug placement or benefit-design modification. The standard turnaround time for this modeling is five business days.

Sanford Health Plan P&T Committee Attendance — The Express Scripts CPM attends pharmacy and therapeutics committee meetings to present formulary-placement recommendations, which include impact on member costs

Formulary Management — Express Scripts supports the formulary at the point of service. The clinical program manager identifies formulary compliance and trend-management programs to increase utilization of generics and preferred brand products.

Formulary Updates — The CPM coordinates changes to the formulary file and claims processing system. Quality assurance checks are built into the system to ensure accuracy. Starting on the formulary change's effective date, Express Scripts supports the updated formulary through online pharmacy messaging.

Express Scripts evaluates drugs for possible inclusion on its formularies through this process.

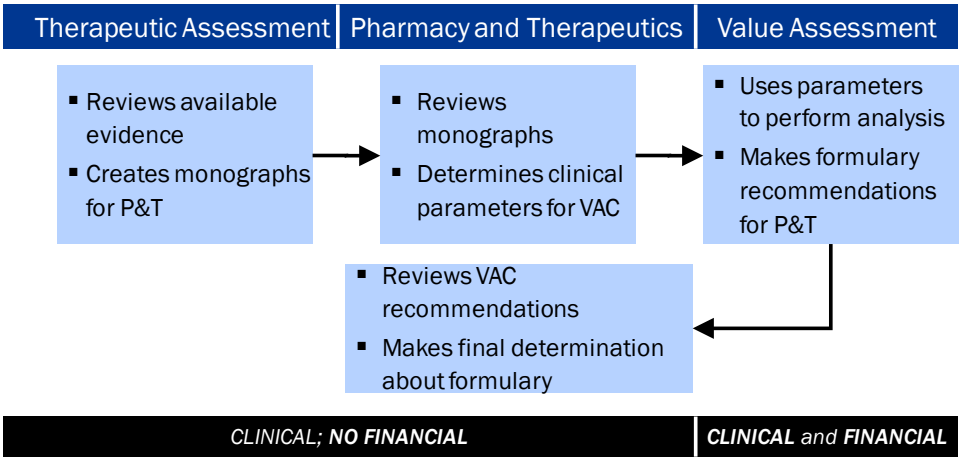
Formulary Drug Selection and Approval Process

The Express Scripts formulary development process calls for a focus on clinical factors, with financial considerations coming into play only among clinically comparable or optional products. This results in clinically sound, cost-effective formularies for our plan sponsors and their members. Our process involves three committees:

SANFORD HEALTH PLAN

1. Therapeutic Assessment Committee, which reviews drugs based on clinical attributes. This committee includes the Office of Clinical Evaluation & Policy's vice president and medical director, the director of the Drug Evaluation Unit, and nine additional clinical pharmacists who represent areas such as product management, account services, emerging therapeutics, clinical programs, specialty pharmacy, and utilization management services.
2. National Pharmacy & Therapeutics Committee, a fully independent body that makes final formulary determinations. The committee comprises 18 independent physicians and one independent pharmacist who are not employed by Express Scripts. Committee members ensure Express Scripts formularies remain CMS-compliant.
3. Value Assessment Committee, which evaluates the net cost of drugs to Express Scripts, our plan sponsors, and their members. This committee includes representatives from product management, formulary management, rebate, finance, and account management who evaluate current and future market dynamics, economic considerations, and client needs.

The following illustrates the formulary development process and the roles of these committees:



As illustrated, our Pharmacy & Therapeutics Committee is insulated from financial considerations and has ultimate authority in our formulary development process.

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Formulary Committees

The following table details the composition and responsibilities of each committee involved in the formulary development process:

Name	Members	What They Review	Considerations
Therapeutic Assessment Committee	Vice president of the Office of Clinical Evaluation & Policy, medical director of the Office of Clinical Evaluation & Policy, director of the Drug Evaluation Unit, and nine clinical pharmacists representing various departments	Food and Drug Administration reports, clinical trials, peer-reviewed medical information, manufacturer data, utilization management criteria, clinical programs	Clinical, NOT financial
National Pharmacy & Therapeutics Committee	18 independent physician members and one independent pharmacist from active community and academic-based practices	Clinical information (formulary evaluation, place in therapy, and competitive product category overviews) for medications newly approved by the Food and Drug Administration	Clinical, NOT financial
Value Assessment Committee	Experts from the following departments: 1. Product Management 2. Formulary Management 3. Rebate 4. Finance 5. Account Management	Financial implications of "optional" medications for Express Scripts, clients, and members	Financial

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Formulary Evaluation Designations — Include, Optional, Exclude

Each drug evaluated for inclusion on our standard formularies receives one of three designations: include, optional, or exclude. Criteria for each designation follow:

Include	Optional	Exclude
• Unique treatment indication • Efficacy superior to that of existing therapy alternatives • Unique pharmacology or a unique status in therapy • Safety profile superior to that of existing therapy alternatives	• Designation based on acceptable clinical efficacy, as well as clinical equivalence to comparable drugs currently on the formulary • May receive a formulary or nonformulary recommendation based on financial analysis	• Insufficient data to make an effective evaluation • Efficacy inferior to that of existing therapy alternatives • Safety profile inferior to that of existing therapy alternatives

iii Describe the basis of your formulary development and maintenance?

Express Scripts makes additions to the formulary on a daily basis. For most standard formularies, we make deletions annually. For the High Performance Formulary, we make deletions twice a year, on January 1 and July 1. We notify clients and members at least 60 days in advance.

In addition, Express Scripts maintains an asterisk deletion list. Near the end of each year, prior to printing the next year's formulary list, Express Scripts notes with an asterisk (*) each brand drug that is due to lose patent protection soon. When the patent of a brand drug expires: (1) chemically equivalent generic drugs enter the market, (2) maximum reimbursement amount is scheduled for each generic, (3) Express Scripts notifies clients at least 30 days in advance via an Emerging Therapeutic Intervention announcement. This notification details the patent expiration, the brand's nonformulary status (at the beginning of the next month), and the newly available formulary generic equivalent(s).

Finally, with respect to Sanford Health Plan's customized formulary, as noted in response to the previous question, the CPM coordinates changes to the formulary file and claims processing system. Quality assurance checks are built into the system to ensure accuracy. Starting on the formulary change's effective date, Express Scripts supports the updated formulary through online pharmacy messaging.

iv Provide specific information where a higher cost option of therapeutic equivalent drug has been included in your formulary and provide rationale for doing so.

In developing our formularies, Sanford Health Plan's Pharmacy & Therapeutics Committee in concert with Express Scripts first considers clinical efficacy, then cost. If the Pharmacy & Therapeutics Committee determines a drug is clinically necessary, it is added to the formulary regardless of cost.

Occasionally, there are situations when the average wholesale price of the preferred drug is higher than that of the nonpreferred drug. For example, in the Insulin therapeutic class, Lantus is offered on our formularies due to clinical considerations.

Additionally, we include some higher-cost drugs on our formularies due to member disruption concerns (for example, Premarin), the need to offer member choice (antibiotics or birth control), and substitution concerns (specialty products).

- **What is your definition of a Generic Drug?**

  Sanford Health Plan defines generic drugs as drugs that (1) are approved by the Food and Drug Administration (FDA) as a therapeutic equivalent to the Brand Name Drug; (2) contain the same active ingredient as the Brand Name Drug; and (3) cost less than the Brand Name equivalent.

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Management of Clinical Programs

71. Provide information that demonstrates your organization can effectively administer the programs listed below in order to partner the pharmacist, other health professionals and the member to ensure the optimum therapeutic outcomes for our members. Also provide information that demonstrates your organization's ability to promote the safe and effective use of medications, and help our members achieve targeted outcomes.

a. Drug Utilization Reviews - retrospective, concurrent and prospective.

b. Disease Management

c. Medication Therapy Management

Sanford Health Plan's utilization review procedures, disease management programs and medication therapy management are incorporated in the Utilization Management daily operations and the Care Management program described above.

72. Does your organization perform retrospective DUR for all claims of a given client? Please provide frequency of retrospective DUR.

No, Sanford Health Plan conducts random claims audits in addition to "for cause" utilization case reviews.

73. What is the generic utilization and substitution rate for your overall book of business nationally and in North Dakota?

	2012	2013	2014 YTD
SANFORD HEALTH PLAN BOOK OF BUSINESS			
Generic utilization rate	78.5%	80.8%	81.9%
Generic substitution rate	98.7%	98.3%	98.7%
NORTH DAKOTA			
Generic utilization rate	82.2%	84.96%	86.22%
Generic substitution rate	97.28%	97.85%	99.1%

74. How many MAC lists do you have for pharmacies and clients? If more than one, which list will you use for NDPERS?

	Number of MAC lists
Pharmacies	One
Clients	One

75. Describe your methodology for pricing (AWP, AAC, WAC, etc.)? Please explain in detail.

Express Scripts prices claims based on Average Wholesale Price (AWP) minus your contract-specific discount for brand and generic prescriptions, MAC/MRA, or at the Usual and Customary (U&C) price.

AWP Source

Express Scripts currently utilizes Medi-Span as our vendor for all pricing-related fields, including AWP, wholesale acquisition cost, obsolete date, pack size, and unit of measure, to ensure consistency of data.

Medi-Span offers the following qualities:

- Standardized at the national level
- Widely available and accepted by the vendor community
- Stable and predictable
- Updated on a regular basis
- Applicable for generic and brand drugs, as well as home delivery and retail channels

Drug File Updates

We receive daily drug file updates, including amendments to drug file pricing, from our pricing source. The pricing updates are loaded in our system and made effective at midnight on the date they are loaded. Systematic processes ensure the updates are properly loaded into the system; a manual review also takes place according to our audit requirements. We store historical price file information indefinitely.

Trend Analysis

76. Your organization must be able to provide NDPERS with a comprehensive, annual trend analysis report as background for making pricing decisions. At a minimum the report must:

a. Contain extensive utilization and drug spend data that presents future trend drivers, both industry wide and specific to our programs;

Sanford Health Plan meets with Express Scripts frequently to discuss trends, strategies, quality, and cost-effective plan initiatives.

Please refer to Attachment G for a sample prescription drug report package.

Bi-Weekly and Monthly Meetings

Sanford Health Plan and our account management team conduct bi-weekly phone calls to discuss program performance and address any questions you need answered. Additionally, we are able to meet monthly for more detailed conversations related to the plan, your members' benefits and utilization, and Sanford Health Plan's questions or concerns, if any.

Quarterly Meetings

Our Managed Care Service Model includes a strategic client planning process that encompasses quarterly reviews. Together, Sanford Health Plan and Express Scripts set the agenda for the quarterly meeting, which typically includes topics such as:

- Overview of initiatives in process
- Review of communication strategies related to planned changes
- Review of quarterly plan performance, including financial, clinical, and operational metrics

When considering plan changes, our account team may engage a PharmacoAnalytics consultant to evaluate the impact plan changes may have on your pharmacy trend.

Our account team also utilizes the PharmacoAnalytics quarterly reporting package — the Costs and Trends Snapshot — which is focused on monitoring plan performance.

A sample of the report is below.

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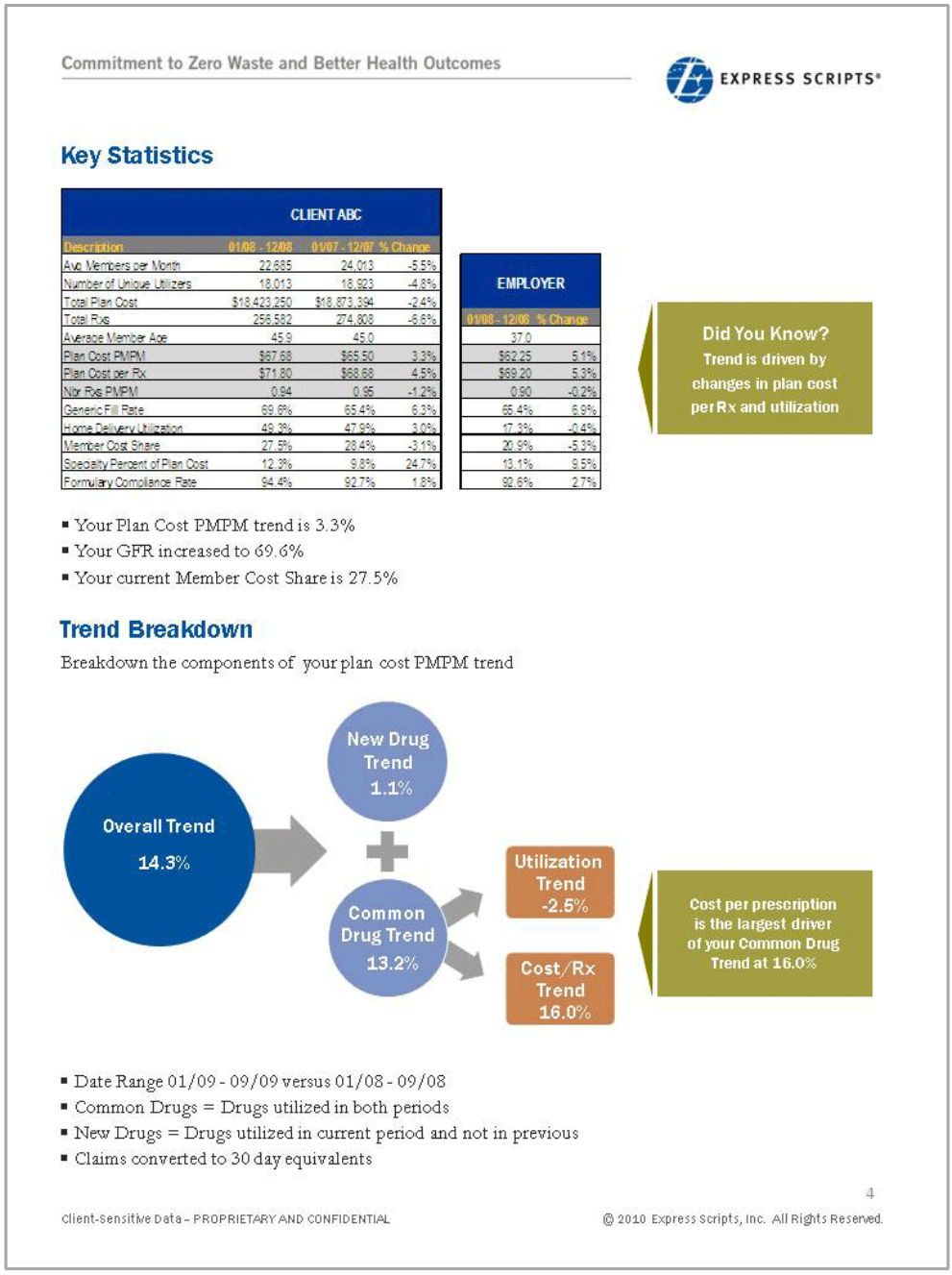

Commitment to Zero Waste and Better Health Outcomes

EXPRESS SCRIPTS®

Key Statistics

	CLIENT ABC			EMPLOYER	
Description	01/08 - 12/08	01/07 - 12/07	% Change	01/08 - 12/08	% Change
Avg Members per Month	22,685	24,013	-5.5%	37.0	
Number of Unique Utilizers	18,013	18,923	-4.8%	$62.25	5.1%
Total Plan Cost	$18,423,250	$18,873,394	-2.4%	$69.20	5.3%
Total Rxs	256,582	274,808	-6.6%	0.90	-0.2%
Average Member Age	45.9	45.0		65.4%	6.9%
Plan Cost PMPM	$67.68	$65.50	3.3%	17.3%	-0.4%
Plan Cost per Rx	$71.80	$68.68	4.5%	20.9%	-5.3%
Nbr Rxs PMPM	0.94	0.95	-1.2%	13.1%	9.5%
Generic Fill Rate	69.6%	65.4%	6.3%	92.6%	2.7%
Home Delivery Utilization	48.3%	47.9%	3.0%		
Member Cost Share	27.5%	28.4%	-3.1%		
Specialty Percent of Plan Cost	12.3%	9.8%	24.7%		
Formulary Compliance Rate	94.4%	92.7%	1.8%		

Did You Know?
Trend is driven by changes in plan cost per Rx and utilization

- Your Plan Cost PMPM trend is 3.3%
- Your GFR increased to 69.6%
- Your current Member Cost Share is 27.5%

Trend Breakdown

Breakdown the components of your plan cost PMPM trend

- Date Range 01/09 - 09/09 versus 01/08 - 09/08
- Common Drugs = Drugs utilized in both periods
- New Drugs = Drugs utilized in current period and not in previous
- Claims converted to 30 day equivalents

4

Client-Sensitive Data – PROPRIETARY AND CONFIDENTIAL

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Collaborative Planning Sessions

Express Scripts' client planning process is an ongoing, joint effort that incorporates scheduled meetings, including the annual Collaborative Planning Session. Agenda items for the Collaborative Planning Session are prioritized based on our needs and requests; we work with ESI to formulate an agreeable outline. Topics typically discussed during the Collaborative Planning Session include:

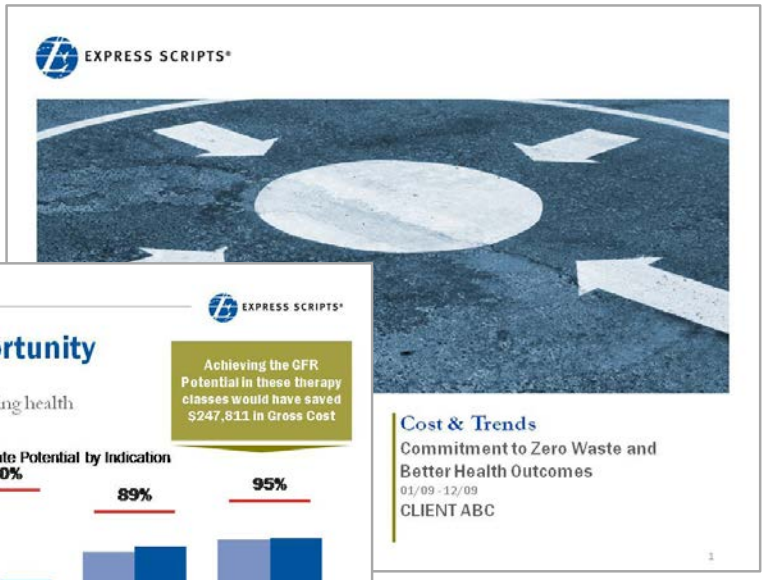
- Status update

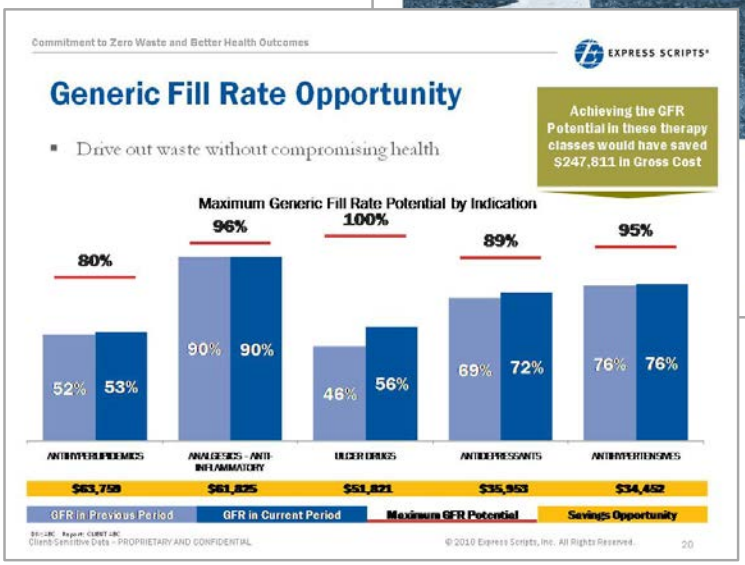
- Short-term and long-term objectives for the plan and Sanford Health Plan's members
- Three-year plan and next steps
- Industry trend analysis, such as examining the effect of direct-to-consumer advertising, drug mix, and emerging therapeutic issues

During the Collaborative Planning Session, our account team also presents Sanford Health Plan-specific program recommendations, prepared through careful planning and analyses. Our team:

- Reviews key data from our prior year
- Develops and validates Sanford Health Plan's plan goals for the coming year
- Identifies key opportunities specific to Sanford Health Plan
- Recommends programs to meet Sanford Health Plan's goals

Samples from the Collaborative Planning Session are below.





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Clinical Input

The CPM is our account team's primary contact and consultant for clinical issues and initiatives. Our CPM participates in Sanford Health Plan's meetings to discuss management of clinical programs and services. Topics and discussion points for these meetings typically consist of the following:

- Formulary initiatives and management
- Financial, formulary, and clinical modeling
- Sanford Health Plan-specific business plan development
- Clinical program structure discussion and results evaluation
- Drug utilization assessment

Additionally, our dedicated PharmacoAnalytics consultant is also available for more complex clinical analysis.

b. Provide information on the generic pipeline, drug indication changes that may affect drug utilization, specialty drug utilization trends, new drug introductions and other similar trend drivers;

Please see summary above.

c. Show the impacts of, and provide recommendations for addressing price inflation, rebate performance and other pricing related drivers, in addition to pharmacy network trends and opportunities.

Please see summary above.

77. Describe your organizations Trend Analysis reporting capabilities. Provide sample reports that reflect your organization's ability to provide thorough trend analysis for NDPERS.

Based on industry-leading software and Express Scripts' thought leadership, Trend Central provides an intuitive self-service method of accessing prescription claims and clinical programs performance reporting. Our web-based, interactive data analysis solution enables NDPERS to manage performance and promptly identify emerging issues and trends. The application, which can be co-branded, includes the following customization options:

- NDPERS users can tailor your homepage to support how each user works. For example, each user can design the homepage to display key statistics or show particular summary reports each time they log on to Trend Central. Users also can establish links to favorite reports.
- Users can schedule favorite reports for automated generation.

- Users can modify member population or groups and time frames to customize report presentation.

Utilizing our online library of templates, Trend Central permits a variety of users to run reports instantly from each person's desktop. Users can perform additional data manipulation or integration by downloading report data to any spreadsheet or database application using Trend Central's export function. Additionally, NDPERS can easily access ad hoc and custom reporting via Trend Central.

All Trend Central users can access Express Scripts' library of report templates. Reports are divided into the following categories:

- Key Performance Indicator
- Report Card
- Trend
- Prescription Detail
- Integrated Specialty
- Member
- Pharmacy
- Prescriber Analysis
- Billed Date
- Prior Authorization
- Benchmark

Key Performance Indicator (KPI) — Executive-level report summaries of pharmacy program performance. These reports refer to period-over-period statistics, usually at the claim level, providing the information most requested by clients. Key Performance Indicator reports break out to the group or demographic levels of your choice based on the eligibility information you provide to Express Scripts.

Report Card (RC) — Suite of report templates users employ to quickly retrieve summary information and drill down into varying levels of utilization detail, such as highest-cost therapeutic classes, physician prescribing, retail pharmacy network, formulary, drug, therapy class, mail service pharmacy, and member demographics. The reports identify cost drivers and identify plan management opportunities.

Trend (TR) — Ranking reports that depict utilization at the prescription and provider levels by ingredient cost. Users compare the current reporting period to historical performance.

Prescription Detail (DG) — Utilization reports that demonstrate prescription drug detail across a variety of categories

Integrated Specialty (SG) — Collection of reports, including key performance indicators, ranking, detail, benchmarking, and trending, used to retrieve utilization information on all specialty drugs

Member (MB) — Various reports at the member utilization level that provide cost breakdown information

Pharmacy Reports (PH) — Pharmacy-level reports that depict utilization by ranking claims for drug and member

Prescriber Analysis Reports (PR) — Ranking, detail, and drill reports by prescriber to demonstrate and assist in analyzing prescribing patterns

Billed Date Reports (BL) — Lag triangle reports that include billing information and claim count by month with totals by month for the entire period. Users assess the lag time between a claim service date and the date the claim was billed to a client. Billed date reports match client billing and are used for reconciliation reporting.

Prior Authorization Reports (PZ) — Summary and detail reports for claims processed with prior authorization. Various data components captured with each prior authorization override request are available, including approval and denial with comments.

Benchmark Reports (BN) — Compare program performance using data from clients of similar geographical location, industry or group type, or size. Users analyze benchmark information to assist in making decisions related to benefit plan changes.

Please see **Attachment G** to view sample prescription drug report package.

Specialty Drug Program

78. Describe in detail how your organization will manage specialty and compound drugs based on NDPERS's current plan design. Provide detailed information about your organization's capabilities to administer a specialty drug program. Indicate specific results your specialty drug program has achieved for your current and past clients in terms of reduced program costs (quantitative and qualitative). Include details about the Specialty pharmacy you contract with. Provide your listing of "Specialty" drugs.

Express Scripts provides Specialty Benefit Services to clients and members of Sanford Health Plan. Express Scripts owns and operates its specialty pharmacies.

Express Scripts Specialty Benefit Services is our solution to curbing rapidly increasing specialty trend and solving plan sponsors' specialty cost challenges. We provide complete specialty benefit and drug management services, delivering maximized savings and superior patient care to plan sponsors. We combine — into a single, comprehensive specialty offering — institutional capabilities and expertise in the following areas:

- Specialty pharmacy benefit management
- Specialty pharmacy dispensing and operations
- Clinical programs and care for patients

- Utilization management of specialty drugs
- Medical drug management
- Healthcare provider outreach
- Account management and implementation
- Communications to healthcare providers, members, and plan sponsors

Express Scripts' *CuraScript* mails specialty drug and all the supplies needed for injection directly to the Member's home or Practitioner's office within 24 to 48 hours after the request is approved and medication is ordered. Administration supplies (syringes, needles etc.) are free; Members are not required to pay additional copays for those supplies. Prior to all shipments, a Patient Admission Specialist contacts the Member to discuss copay liability for the drug and arrange delivery.

CuraScript offers toll-free customer service available 24 hours a day, 365 days a year. Specially trained staff offers support services for the Member, their caregivers, and their Practitioners that include:

- Injectable drug order information;
- Consultation with an experienced, knowledgeable pharmacist;
- Specially trained nurses available to answer questions about injectable drugs and the disease states they treat.

CuraScript mails the Practitioner a letter explaining the program and how to send prescriptions to *CuraScript*. By participating in Specialty Care, Members are automatically enrolled in a drug therapy management program. This program entitles them to receive the following benefits at no additional charge:

- Access to nurses and pharmacists 24 hours/day, 7 days/week for questions related to yhr injectable drug and the illness the drug is treating.
- Injectable drug refill reminders if they forget to call for refilld, and convenient refill process.
- Free delivery of your medication and supplies to the Member's home, Practitioner's office or designated location.

Injectable and High Cost Medications

- **The following medications (injectable and high cost medications) must be obtained from CuraScript by calling (866) 333-9721.** All medications obtained from CuraScript are prior authorized by CuraScript using criteria approved by the Sanford Health Plan. Most of these medications are covered under the medical benefit and are subject to payment with deductible, coinsurance or a medical copay, dependent upon your benefit package.

Name	Disease State	Coverage	Preferred Alternatives
8-MOP	MISCELLANEOUS SPECIALTY CONDITIONS	MEDICAL	
ABRAXANE	CANCER	MEDICAL	
ACTEMRA	INFLAMMATORY CONDITIONS	MEDICAL	
ACTHAR H.P.	MULTIPLE SCLEROSIS	MEDICAL	
ACTIMMUNE	IMMUNE DEFICIENCY	MEDICAL	
ADAGEN	*ENZYME DEFICIENCIES*	*MEDICAL - LIMITED*	

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Name	Disease State	Coverage	Preferred Alternatives
		DISTRIBUTION	
ADCIRCA	VASODILATOR	PHARMACY- TIER 3	
ADRIAMYCIN	CANCER	MEDICAL	
ADRUCIL	CANCER	MEDICAL	
ADVATE	HEMOPHILIA	MEDICAL	
AFINITOR	CANCER	MEDICAL	
ALDURAZYME	ENZYME DEFICIENCIES	MEDICAL	
ALFERON N	CANCER	MEDICAL	
ALIMTA	CANCER	MEDICAL	
ALKERAN	CANCER	MEDICAL	
ALPHANATE	HEMOPHILIA	MEDICAL	
ALPHANINE SD	HEMOPHILIA	MEDICAL	
AMEVIVE	INFLAMMATORY CONDITIONS	MEDICAL	
AMIFOSTINE	CANCER	MEDICAL	
AMPYRA	MULTIPLE SCLEROSIS	PHARMACY- TIER 3	
APOKYN	*MISCELLANEOUS SPECIALTY CONDITIONS*	*PHARMACY- TIER 3 - LIMITED DISTRIBUTION*	
ARALAST/NP	RESPIRATORY CONDITIONS	MEDICAL	
ARANESP	BLOOD CELL DEFICIENCY	PHARMACY - TIER 2	
ARCALYST	*INFLAMMATORY CONDITIONS*	*MEDICAL -LIMITED DISTRIBUTION*	
AREDIA	CANCER	MEDICAL	
ARRANON	*CANCER*	*MEDICAL - LIMITED DISTRIBUTION*	
ARZERRA	CANCER	MEDICAL	
ATGAM	TRANSPLANT	MEDICAL	
AUBAGIO	MULTIPLE SCLEROSIS	TIER 2	
AVASTIN	CANCER, OPTHALMIC DISORDERS	MEDICAL	
AVONEX	MULTIPLE SCLEROSIS	PHARMACY - TIER 3- STEP THERAPY RULES APPPLY	BETASERON- TIER 1 COPAXONE OR REBIF- TIER 2
BEBULIN VH IMMUNO	HEMOPHILIA	MEDICAL	
BENEFIX	HEMOPHILIA	MEDICAL	
BENLYSTA	SYSTEMIC LUPUS ERYTHEMATOUS	MEDICAL	
BERINERT	*HEREDITARY ANGIOEDEMA*	*MEDICAL- LIMITED DISTRIBUTION*	
BETASERON	MULTIPLE SCLEROSIS	PHARMACY -TIER 2	
BEXXAR	*CANCER*	*MEDICAL - LIMITED DISTRIBUTION*	
BICNU	CANCER	MEDICAL	
BLEOMYCIN SULFATE	CANCER	MEDICAL	
BOSULIF	CANCER	MEDICAL	
BOTOX	MISCELLANEOUS SPECIALTY CONDITIONS	MEDICAL	
BRAVELLE	INFERTILITY	PHARMACY 100% COPAY	
BUSULFEX	CANCER	MEDICAL	
CAMPATH	CANCER	MEDICAL	
CAMPTOSAR	CANCER	MEDICAL	
CAPRELSA	CANCER	MEDICAL	
CARBAGLU	*GENETIC DISORDER*	*MEDICAL - LIMITED*	

Name	Disease State	Coverage	Preferred Alternatives
		DISTRIBUTION	
CARBOPLATIN	CANCER	MEDICAL	
CARIMUNE	*IMMUNE DEFICIENCY*	*MEDICAL - LIMITED DISTRIBUTION*	
CAYSTON	*RESPIRATORY CONDITIONS*	*PHARMACY TIER 3- LIMITED DISTRIBUTION*	
CELLCEPT INJ	TRANSPLANT	MEDICAL	
CEPROTIN	*MISCELLANEOUS SPECIALTY CONDITIONS*	*MEDICAL- LIMITED DISTRIBUTION*	
CEREDASE	*ENZYME DEFICIENCIES*	*MEDICAL - LIMITED DISTRIBUTION*	
CEREZYME	ENZYME DEFICIENCIES	MEDICAL	
CERUBIDINE	CANCER	MEDICAL	
CETROTIDE	INFERTILITY	PHARMACY 100% COPAY	
CHENODAL	*MISCELLANEOUS SPECIALTY CONDITIONS*	*PHARMACY TIER 3- LIMITED DISTRIBUTION*	
CHORIONIC GONADOTROPIN	INFERTILITY	PHARMACY 100% COPAY	
CIMZIA	INFLAMMATORY CONDITIONS	PHARMACY TIER 3- STEP THERAPY RULES APPPLY	ENBREL OR HUMIRA - TIER 2
CINRYZE	HEREDITARY ANGIOEDEMA	MEDICAL	
CISPLATIN	CANCER	MEDICAL	
CLADRIBINE	CANCER	MEDICAL	
CLOLAR	CANCER	MEDICAL	
COPAXONE	MULTIPLE SCLEROSIS	PHARMACY - TIER 2	
COPEGUS	HEPATITIS C	PHARMACY - TIER 2	
CORIFACT	*HEMOPHILIA*	*MEDICAL - LIMITED DISTRIBUTION*	
COSMEGEN	CANCER	MEDICAL	
CYCLOPHOSPHAMIDE	CANCER	MEDICAL	
CYCLOSPORINE INJ	TRANSPLANT	MEDICAL	
CYSTAGON	*MISCELLANEOUS SPECIALTY CONDITIONS*	*PHARMACY TIER 3 - LIMITED DISTRIBUTION*	
CYTARABINE	CANCER	MEDICAL	
CYTOGAM	IMMUNE DEFICIENCY	MEDICAL	
DACARBAZINE	CANCER	MEDICAL	
DACOGEN	CANCER	MEDICAL	
DACTINOMYCIN	CANCER	MEDICAL	
DAUNORUBICIN HCL	CANCER	MEDICAL	
DAUNOXOME	CANCER	MEDICAL	
DDAVP (injection only)	ENDOCRINE DISORDERS	MEDICAL	
DEFEROXAMINE MESYLATE	IRON TOXICITY	MEDICAL	
DEPOCYT	CANCER	MEDICAL	
DESFERAL, MESYLATE	IRON TOXICITY	MEDICAL	
DESMOPRESSIN ACETATE INJ	OTHER ENDOCRINE DRUGS	MEDICAL	
DEXRAZOXANE	CANCER	MEDICAL	
DOCETAXEL	CANCER	MEDICAL	

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Name	Disease State	Coverage	Preferred Alternatives
DOXIL	CANCER	MEDICAL	
DOXORUBICIN HCL	CANCER	MEDICAL	
DYSPORT	*NEUROMUSCULAR CONDITIONS*	*MEDICAL- LIMITED DISTRIBUTION*	
EGRIFTA	*IMMUNE DEFICIENCY GROWTH HORMONE*	*PHARMACY- TIER 3 LIMITED DISTRIBUTION*	
ELAPRASE	*ENZYME DEFICIENCIES*	*MEDICAL - LIMITED DISTRIBUTION*	
ELELYSO	OTHER ENDOCRINE DRUGS	MEDICAL	
ELIGARD	CANCER	MEDICAL	
ELITEK	CANCER	MEDICAL	
ELLENCE	CANCER	MEDICAL	
ELOXATIN	CANCER	MEDICAL	
ELSPAR	CANCER	MEDICAL	
ENBREL	INFLAMMATORY CONDITIONS	PHARMACY - TIER 2	
ENOXAPARIN	ANTICOAGULANT	PHARMACY - AVAIL THRU RETAIL - TIER 1	
EPIRUBICIN	CANCER	MEDICAL	
EPOGEN	BLOOD CELL DEFICIENCY	PHARMACY - TIER 3	ARANESP OR PROCRIT – TIER 2
EPOPROSTENOL	*PULMONARY HYPERTENSION*	*MEDICAL- LIMITED DISTRIBUTION*	
ERBITUX	CANCER	MEDICAL	
ERIVEDGE	CANCER	MEDICAL	
ETHYOL	CANCER	MEDICAL	
ETOPOPHOS	CANCER	MEDICAL	
ETOPOSIDE	CANCER	MEDICAL	
EUFLEXXA	OSTEOARTHRITIS	MEDICAL	
EXJADE	*IRON TOXICITY*	*MEDICAL - LIMITED DISTRIBUTION*	
EYLEA	OPHTHALMIC CONDITIONS	MEDICAL	
FABRAZYME	ENZYME DEFICIENCIES	MEDICAL	
FASLODEX	CANCER	MEDICAL	
FEIBA NH	HEMOPHILIA	MEDICAL	
FEIBA VH IMMUNO	HEMOPHILIA	MEDICAL	
FIRAZYR	HEREDITARY ANGIOEDEMA	PHARMACY - TIER 3	
FIRMAGON	CANCER	MEDICAL	
FLEBOGAMMA/DIF	IMMUNE DEFICIENCY	MEDICAL	
FLOLAN	*PULMONARY HYPERTENSION*	*MEDICAL - LIMITED DISTRIBUTION*	
FLOXURIDINE	CANCER	MEDICAL	
FLUDARA	CANCER	MEDICAL	
FLUDARABINE PHOSPHATE	CANCER	MEDICAL	
FLUOROURACIL	CANCER	MEDICAL	
FOLLISTIM AQ	INFERTILITY	PHARMACY 100% COPAY	
FOLOTYN	*CANCER*	*MEDICAL - LIMITED DISTRIBUTION*	
FORTEO	OSTEOPOROSIS	PHARMACY - TIER 2	
FRAGMIN	ANTICOAGULANT	PHARMACY - AVAIL THRU RETAIL - TIER	

Name	Disease State	Coverage	Preferred Alternatives
		2	
FUDR	CANCER	MEDICAL	
FUSILEV	CANCER	MEDICAL	
FUZEON	IMMUNE DEFICIENCY	MEDICAL	
GAMASTAN S/D	IMMUNE DEFICIENCY	MEDICAL	
GAMMAGARD	IMMUNE DEFICIENCY	MEDICAL	
GAMMAKED	IMMUNE DEFICIENCY	MEDICAL	
GAMUNEX, -C	IMMUNE DEFICIENCY	MEDICAL	
GANIRELIX ACETATE	INFERTILITY	PHARMACY 100% COPAY	
GEMCITABINE HCL	CANCER	MEDICAL	
GEMZAR	CANCER	MEDICAL	
GENOTROPIN	GROWTH DEFICIENCY	MEDICAL	
GILENYA	MULTIPLE SCLEROSIS	PHARMACY- TIER 3	STEP THERAPY
GILOTRIF	CANCER	MEDICAL	
GLASSIA	RESPIRATORY CONDITIONS	MEDICAL	
GLEEVEC	CANCER	MEDICAL	
GONAL-F/RFF	INFERTILITY	PHARMACY 100% COPAY	
HALAVEN	CANCER	MEDICAL	
HELIXATE FS	HEMOPHILIA	MEDICAL	
HEMOFIL M	HEMOPHILIA	MEDICAL	
HEPAGAM B	HEPATITIS B	MEDICAL	NABI-HB - TIER 2
HERCEPTIN	CANCER	MEDICAL	
HIZENTRA	IMMUNE DEFICIENCY	MEDICAL	
HUMATE-P	HEMOPHILIA	MEDICAL	
HUMATROPE	GROWTH DEFICIENCY	MEDICAL	
HUMIRA	INFLAMMATORY CONDITIONS	PHARMACY - TIER 2	
HYALGAN	OSTEOARTHRITIS	MEDICAL	
HYCAMTIN	CANCER	MEDICAL	
HYPERHEP S/D	HEPATITIS B	MEDICAL	NABI-HB - TIER 2
HYPERRAB S/D	IMMUNE DEFICIENCY	MEDICAL	
HYPERRHO S/D	IMMUNE DEFICIENCY	MEDICAL	
IDAMYCIN PFS	CANCER	MEDICAL	
IDARUBICIN HCL	CANCER	MEDICAL	
IFEX	CANCER	MEDICAL	
IFOSFAMIDE	CANCER	MEDICAL	
IFOSFAMIDE/MESNA	CANCER	MEDICAL	
ILAIRS	AUTOINFLAMMATORY CONDITION	MEDICAL	
IMOGAM RABIES-HT	IMMUNE DEFICIENCY	MEDICAL	
INCIVEK	HEPATITIS C	MEDICAL	
INCRELEX	GROWTH DEFICIENCY	MEDICAL	
INFERGEN	HEPATITIS C	PHARMACY - TIER 3	INTRON A, ROFERON A-TIER 2
INLYTA	CANCER	MEDICAL	
INNOHEP	ANTICOAGULANT	PHARMACY - AVAIL THRU RETAIL - TIER 3	ENOXAPARIN-TIER 1, ARIXTRA OR FRAGMIN- TIER 2
INTRON A	CANCER	MEDICAL	
IPRIVASK	ANTICOAGULANT	PHARMACY - AVAIL THRU RETAIL - TIER 3	

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Name	Disease State	Coverage	Preferred Alternatives
IRESSA	CANCER	MEDICAL	
IRINOTECAN	CANCER	MEDICAL	
ISTODAX	CANCER	MEDICAL	
IXEMPRA	CANCER	MEDICAL	
JEVTANA	CANCER	MEDICAL	
KALBITOR	*HEREDITARY ANGIOEDEMA*	*MEDICAL - LIMITED DISTRIBUTION*	
KALYDECO	RESPIRATORY CONDITIONS	MEDICAL	
KEPIVANCE	*CANCER*	*MEDICAL - LIMITED DISTRIBUTION*	
KINERET	INFLAMMATORY CONDITIONS	PHARMACY - TIER 3	ENBREL - TIER 2
KOATE-DVI	HEMOPHILIA	MEDICAL	
KOGENATE FS	HEMOPHILIA	MEDICAL	
KRYSTEXXA	INFLAMMATORY CONDITIONS	MEDICAL	
KUVAN	PKU	MEDICAL	
KYPROLIS	CANCER	MEDICAL	
LETAIRIS	PULMONLARY HYPERTENSION	PHARMACY - TIER 3	
LEUCOVORIN CALCIUM	CANCER	MEDICAL	
LEUKINE	BLOOD CELL DEFICIENCY	MEDICAL	
LEUPROLIDE ACETATE	CANCER	MEDICAL	
LEUSTATIN	CANCER	MEDICAL	
LOVENOX	ANTICOAGULANT	PHARMACY TIER 3	ENOXAPARIN-TIER 1
LUCENTIS	OPTHALMIC CONDITIONS	MEDICAL	
LUMIZYME	*POMPE'S DISEASE*	*MEDICAL - LIMITED DISTRIBUTION*	
LUPRON	CANCER	MEDICAL	
LUPRON DEPOT	CANCER	MEDICAL	
LUVERIS	INFERTILITY	PHARMACY 100% COPAY	
MACUGEN	OPTHALMIC CONDITIONS	MEDICAL	
MELPHALAN	CANCER	MEDICAL	
MENOPUR	INFERTILITY	PHARMACY 100% COPAY	
MESNA	CANCER	MEDICAL	
MESNEX	CANCER	MEDICAL	
METHOTREXATE	CANCER	PHARMACY - TIER 1	
MICRHOGAM PLUS	IMMUNE DEFICIENCY	MEDICAL	
MITOMYCIN	CANCER	MEDICAL	
MITOXANTRONE, HCL	CANCER	MEDICAL	
MONOCLATE-P	HEMOPHILIA	MEDICAL	
MONONINE	HEMOPHILIA	MEDICAL	
MOZOBIL	BLOOD CELL DEFICIENCY	MEDICAL	
MUSTARGEN	CANCER	MEDICAL	
MYLOTARG	CANCER	MEDICAL	
MYOBLOC	MISCELLANEOUS SPECIALTY CONDITIONS	MEDICAL	
MYOZYME	ENZYME DEFICIENCIES	MEDICAL	
NABI-HB	HEPATITIS B	MEDICAL	
NAGLAZYME	ENZYME DEFICIENCIES	MEDICAL	
NAVELBINE	CANCER	MEDICAL	
NEULASTA	BLOOD CELL DEFICIENCY	PHARMACY - TIER 3	NEUPOGEN – TIER 2

Name	Disease State	Coverage	Preferred Alternatives
NEUMEGA	BLOOD CELL DEFICIENCY	MEDICAL	
NEUPOGEN	BLOOD CELL DEFICIENCY	PHARMACY - TIER 2	
NEXAVAR	CANCER	MEDICAL	
NIPENT	CANCER	MEDICAL	
NORDITROPIN	GROWTH DEFICIENCY	MEDICAL	
NOVANTRONE	CANCER	MEDICAL	
NOVAREL	INFERTILITY	PHARMACY 100% COPAY	
NOVOSEVEN/RT	HEMOPHILIA	MEDICAL	
NPLATE	BLOOD CELL DEFICIENCY	MEDICAL	
NULOJIX	TRANSPLANT	MEDICAL	
NUTROPIN, AQ, NUSPIN	GROWTH DEFICIENCY	MEDICAL	
OCTAGAM	IMMUNE DEFICIENCY	MEDICAL	
OCTREOTIDE ACETATE	ENDOCRINE DISORDERS	MEDICAL	
OFORTA	CANCER	MEDICAL	
OMNITROPE	GROWTH DEFICIENCY	MEDICAL	
ONCASPAR	CANCER	MEDICAL	
ONSOLIS	PAIN MANAGEMENT	PHARMACY – TIER 3	
ONTAK	CANCER	MEDICAL	
ONXOL	CANCER	MEDICAL	
ORENCIA	INFLAMMATORY CONDITIONS	INFUSION- MEDICAL SELF INJECTABLE- PHARMACY- TIER 3	
ORFADIN	*ENZYME DEFICIENCIES*	*MEDICAL - LIMITED DISTRIBUTION*	
ORTHOCLONE OKT-3	*TRANSPLANT*	*MEDICAL - LIMITED DISTRIBUTION*	
ORTHOVISC	OSTEOARTHRITIS	MEDICAL	
OVIDREL	INFERTILITY	PHARMACY 100% COPAY	
OXALIPLATIN	CANCER	MEDICAL	
PACLITAXEL	CANCER	MEDICAL	
PAMIDRONATE DISODIUM	CANCER	MEDICAL	
PANRETIN	MISCELLANEOUS SPECIALTY CONDITIONS	MEDICAL	
PEGASYS	HEPATITIS C	PHARMACY –TIER 2	
PEG-INTRON/REDIPEN	HEPATITIS C	PHARMACY –TIER 2	
PERJETA	CANCER	MEDICAL	
PHOTOFRIN	CANCER	MEDICAL	
PLENAXIS	CANCER	MEDICAL	
PREGNYL	INFERTILITY	PHARMACY 100% COPAY	
PRIALT	*MISCELLANEOUS SPECIALTY CONDITIONS*	*MEDICAL - LIMITED DISTRIBUTION*	
PRIVIGEN	IMMUNE DEFICIENCY	MEDICAL	
PROCRIT	BLOOD CELL DEFICIENCY	PHARMACY - TIER 2	
PROFILNINE SD	HEMOPHILIA	MEDICAL	
PROGESTERONE IN OIL	INFERTILITY	PHARMACY 100% COPAY	
PROGRAF	*TRANSPLANT*	*INFUSION-MEDICAL - LIMITED DISTRIBUTION*	

Name	Disease State	Coverage	Preferred Alternatives
		ORAL- PHARMACY-TIER 2	
PROLASTIN/C	*RESPIRATORY CONDITIONS*	*MEDICAL - LIMITED DISTRIBUTION*	
PROLEUKIN	CANCER	MEDICAL	
PROLIA	OSTEOPOROSIS	PHARMACY – TIER 3	
PROMACTA	BLOOD CELL DEFICIENCY	PHARMACY – TIER 3	
PROVENGE	*IMMUNE DEFICIENCY*	*MEDICAL- LIMITED DISTRIBUTION*	
PULMOZYME	RESPIRATORY CONDITIONS	PHARMACY - TIER 3	
REBETOL	HEPATITIS C	PHARMACY - TIER 1	
REBIF	MULTIPLE SCLEROSIS	PHARMACY - TIER 2	
RECLAST	PAGET'S DISEASE/ OSTEOPORSIS	MEDICAL	ALENDRONATE-TIER 1
RECOMBINATE	HEMOPHILIA	MEDICAL	
REFACTO	HEMOPHILIA	MEDICAL	
REFLUDAN	ANTICOAGULANT	PHARMACY - AVAIL THRU RETAIL- TIER 3	ENOXAPARIN-TIER 1, ARIXTRA OR FRAGMIN- TIER 2
REMICADE	INFLAMMATORY CONDITIONS	MEDICAL	
REMODULIN	*PULMONARY HYPERTENSION*	*PHARMACY - TIER 3 - LIMITED DISTRIBUTION*	
REPRONEX	INFERTILITY	PHARMACY 100% COPAY	
RETROVIR IV	IMMUNE DEFICIENCY	MEDICAL	
REVATIO	PULMONARY HYPERTENSION	PHARMACY - TIER 3	
REVLIMID	CANCER	MEDICAL	
RHOGAM PLUS	IMMUNE DEFICIENCY	MEDICAL	
RHOPHYLAC	IMMUNE DEFICIENCY	MEDICAL	
RIBAPAK	HEPATITIS C	PHARMACY - TIER 1	
RIBASPHERE	HEPATITIS C	PHARMACY - TIER 1	
RIBATAB	HEPATITIS C	PHARMACY - TIER 1	
RIBAVIRIN- ORAL	HEPATITIS C	PHARMACY - TIER 1	
RILUTEK	MISCELLANEOUS SPECIALTY CONDITIONS	MEDICAL	
RITUXAN	CANCER	MEDICAL	
SABRIL	ANTICONVULSANT	PHARMACY – TIER 3	
SAIZEN	GROWTH DEFICIENCY	MEDICAL	
SANDOSTATIN, LAR	ENDOCRINE DISORDERS	MEDICAL	
SEROSTIM	GROWTH DEFICIENCY	MEDICAL	
SIMPONI	INFLAMMATORY CONDITIONS	PHARMACY – TIER 3	
SIMULECT	TRANSPLANT	MEDICAL	
SOLIRIS	MISCELLANEOUS SPECIALTY CONDITIONS	MEDICAL	
SOMATULINE DEPOT	ENDOCRINE DISORDERS	PHARMACY – TIER 3	
SOMAVERT	*GROWTH DEFICIENCY*	*MEDICAL - LIMITED DISTRIBUTION*	
SPRYCEL	CANCER	MEDICAL	
STELARA	INFLAMMATORY CONDITIONS	PHARMACY – TIER 3	
STIVARGA	CANCER	MEDICAL	
SUCRAID	ENZYME DEFICIENCY	PHARMACY – TIER 2	
SUPARTZ	OSTEOARTHRITIS	MEDICAL	

Name	Disease State	Coverage	Preferred Alternatives
SUPPRELIN LA	ENDOCRINE DISORDERS	MEDICAL	
SUTENT	CANCER	MEDICAL	
SYLATRON	CANCER	MEDICAL	
SYNAGIS	RSV PREVENTION	MEDICAL	
SYNVISC, -ONE	OSTEOARTHRITIS	MEDICAL	
TARCEVA	CANCER	MEDICAL	
TASIGNA	CANCER	MEDICAL	
TAXOTERE	CANCER	MEDICAL	
TEMOZOLOMIDE	CANCER	MEDICAL	
TESTOPEL	*HYPOTESTOSTERONE*	*MEDICAL - LIMITED DISTRIBUTION*	
TEV-TROPIN	GROWTH DEFICIENCY	MEDICAL	
THALOMID	CANCER	MEDICAL	
THERACYS	CANCER	MEDICAL	
THIOTEPA	CANCER	MEDICAL	
THYMOGLOBULIN	*TRANSPLANT*	*MEDICAL - LIMITED DISTRIBUTION*	
THYROGEN	CANCER	MEDICAL	
TOBI	RESPIRATORY CONDITIONS	PHARMACY - TIER 3	
TOPOSAR	CANCER	MEDICAL	
TORISEL	CANCER	MEDICAL	
TRACLEER	PULMONARY HYPERTENSION	PHARMACY - TIER 3	
TREANDA	CANCER	MEDICAL	
TRELSTAR, -DEPOT	CANCER	MEDICAL	
TRELSTAR LA	CANCER	MEDICAL	
TRISENOX	CANCER	MEDICAL	
TYKERB	CANCER	MEDICAL	
TYSABRI	MULTIPLE SCLEROSIS	MEDICAL	
TYVASO	PULMONARY HYPERTENSION	MEDICAL	
VANDETANIB	CANCER	MEDICAL	
VANTAS	CANCER	MEDICAL	
VECTIBIX	CANCER	MEDICAL	
VELCADE	CANCER	MEDICAL	
VELETRI	*PULMONARY HYPERTENSION*	*MEDICAL - LIMITED DISTRIBUTION*	
VENTAVIS	*PULMONARY HYPERTENSION*	*MEDICAL - LIMITED DISTRIBUTION*	
VICTRELIS	HEPATITIS C	MEDICAL	
VIDAZA	CANCER	MEDICAL	
VINBLASTINE SULFATE	CANCER	MEDICAL	
VINCRISTINE SULFATE	CANCER	MEDICAL	
VINORELBINE TARTRATE	CANCER	MEDICAL	
VISUDYNE	OPHTHALMIC CONDITIONS	MEDICAL	
VIVAGLOBIN	IMMUNE DEFICIENCY	MEDICAL	
VIVITROL	MISCELLANEOUS CNS DISORDER	MEDICAL	
VOTRIENT	CANCER	MEDICAL	
VPRIV	RESPIRATORY CONDITIONS	MEDICAL	
VUMON	CANCER	MEDICAL	
WINRHO SDF	IMMUNE DEFICIENCY	MEDICAL	
XELJANZ	INFLAMMATORY CONDITIONS	TIER 2	
XELODA	CANCER	MEDICAL	
XENAZINE	MISCELLANEOUS CNS DISORDER	MEDICAL	

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Name	Disease State	Coverage	Preferred Alternatives
XEOMIN	MISCELLANEOUS CNS DISORDER	MEDICAL	
XGEVA	CANCER	MEDICAL	
XIAFLEX	MISCELLANEOUS SPECIALTY CONDITIONS	MEDICAL	
XOLAIR	RESPIRATORY CONDITIONS	MEDICAL	
XGEVA	ENDOCRINE CONDITIONS	MEDICAL	
XTANDI	CANCER	MEDICAL	
XYNTHA	HEMOPHILIA	MEDICAL	
XYREM	*MISCELLANEOUS SPECIALTY CONDITIONS*	*PHARMACY – TIER 2 - LIMITED DISTRIBUTION*	
YERVOY	CANCER	MEDICAL	
ZALTRAP	CANCER	MEDICAL	
ZANOSAR	CANCER	MEDICAL	
ZAVESCA	ENZYME DEFICIENCIES	MEDICAL	
ZEMAIRA	*RESPIRATORY CONDITIONS*	*MEDICAL - LIMITED DISTRIBUTION*	
ZENAPAX	TRANSPLANT	MEDICAL	
ZEVALIN	CANCER	MEDICAL	
ZINECARD	CANCER	MEDICAL	
ZOLADEX	CANCER	MEDICAL	
ZOLINZA	CANCER	MEDICAL	
ZOMETA	CANCER	MEDICAL	
ZORBTIVE	GROWTH DEFICIENCY	MEDICAL	
ZYTIGA	CANCER	MEDICAL	

Pharmacy Operations Overview

CuraScript provides unsurpassed specialty pharmacy services through specialty pharmacies located throughout the U.S. Main distribution centers are located in Orlando, Florida; Indianapolis, Indiana; and New Castle, Delaware.

ESI also operate specialty pharmacies in the following locations:

- Brewster, New York
- Houston, Texas
- Oldsmar, Florida
- Omaha, Nebraska
- Pleasanton, California

ESI's locations:

- Provide operational redundancy and the ability to serve unique plan sponsor reimbursement needs
- Enable us to serve plans all over the country
- Ensure timely deliveries, adequate stocking of medications, and the flexibility to successfully manage emergency situations

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CuraScript's service model reflects the heightened level of patient support required for specialty products. Our patient care advocates serve as a patient's primary contact and proactively coordinate ongoing prescription needs, including managing the delivery of products, maintaining insurance authorizations, and monitoring adherence. In addition to patient care advocates, our pharmaceutical care management team consists of nurses, social workers, and pharmacists who provide the expertise and support necessary for appropriate clinical management.

Specialty Pharmacy Benefit Management

For more than 25 years, Express Scripts has been a leader in trend and utilization management of drugs billed through the pharmacy benefit. As the first pharmacy benefit manager to publish a drug trend report and the first to hold an Outcomes conference for plan sponsors, Express Scripts is a thought leader in the industry. To continue this legacy, we apply the latest specialty pharmacy benefit management tools to reduce the trend of specialty drugs billed through the pharmacy benefit. Our specialty trend management programs include:

- Specialty Step Management
- Drug Quantity Management
- Care Continuum (includes utilization management, site of care management, and reimbursement management)

Specialty Utilization Management Programs

Express Scripts' Specialty Step Management, Drug Quantity Management, and Prior Authorization programs use clinical protocols to manage appropriate and cost-effective utilization of specialty medications. Additional program details are included below.

Specialty Step Management

Specialty drug spend is predicted to grow exponentially over the next several years. In addition, as more specialty drugs are approved, utilization in some traditional classes will transition to the specialty market. Additionally, as more specialty drugs are approved, utilization in some traditional classes will transition to the specialty market.

Specialty Step Management responds to this issue by reducing wasteful specialty spend and promoting clinically appropriate, cost-effective therapies.

Our Specialty Step Management program enhances our existing utilization management programs (Prior Authorization and Step Therapy) through the use of traditional medication cost-containment programs. By tailoring these trend management strategies to the specialty landscape, Specialty Step Management provides NDPERS with the tools to significantly reduce your specialty trend while also maximizing health outcomes.

Specialty Step Management addresses several of the most costly specialty therapy classes:

- Inflammatory Conditions
- Multiple Sclerosis
- Growth Hormones
- Erythroid StimulantsInfertility
- Pulmonary Arterial Hypertension (PAH)
- Alpha-1 Proteinase Inhibitors
- Cryopyrin-Associated Periodic Syndrome (CAPS)
- Prostate Cancer GnRH Analogs

Drug Quantity Management

Our Drug Quantity Management program supports safe, effective, and cost-efficient use of prescription drugs while giving patients access to quality care. Drug Quantity Management criteria can prevent unnecessary costs when there is not enough evidence to support using a medication at doses higher than Food and Drug Administration-approved labeling.

For example, Avonex® is dosed once weekly for multiple sclerosis patients. However, some physicians believe that patients who inject Avonex twice weekly see greater benefits from the medication and therefore increase their dosage, even though there is no solid evidence to support its use twice weekly. An additional weekly dose of Avonex doubles the annual cost of the medication from around $20,000 per year to $40,000 per year. Drug Quantity Management criteria would avoid this wasted spend.

Prior Authorization

Express Scripts' Prior Authorization department administers specialty prior authorization requests.

We offer more than 50 Prior Authorization programs for specialty medications, many of which are integrated into the Base, Supplemental, Pharmacogenomics, and Proactive Prior Authorization lists. Optional programs are available for individual medications. We also offer a centralized list for clients that would like automatic updates for all specialty products on the Base, Supplemental, and Optional lists.

Furthermore, clients who use our specialty pharmacy exclusively and would like to manage their specialty spending to a greater extent should consider our Specialty Prior Authorization Continuation Criteria. The authorization criteria under this program are the same as those for standard specialty prior authorizations. However, the duration of initial approval for prior authorizations with Continuation Criteria is shorter than under the standard program. Re-approval under the Continuation Criteria depends on response to the medication during the initial treatment phase. Express Scripts can manage the initial review and approval process, as well as administer re-approvals.

Specialty Care Management

In addition to the trend management programs previously described, our Specialty Care Management programs help reduce waste and improve health by increasing therapy

adherence. These programs use evidence-based guidelines and drug information to provide critical patient education and ongoing support.

Our suite of Specialty Care Management programs includes:

Program	Disease State	Program Objective	Enrollment Criteria
Asthma	Asthma	To improve adherence to medications and prevent recurrent exacerbations	Patients using Xolair™ have the option to enroll when their prescriptions are filled at CuraScript
Bleeding Disorders Logic®	Hemophilia and von Willebrand disease	To support the needs of hemophilia patients, clients, and providers in the appropriate management of factor products and related outcomes of hemophilia	All patients using factor products have the option to enroll when their prescriptions are filled through our specialty pharmacy
Crohn's Disease	Crohn's disease	To increase adherence through patient education and strong relationships between patients and their healthcare team	Patients using specific Crohn's disease agents have the option to enroll when their prescriptions are filled at CuraScript
Cystic Fibrosis	Cystic fibrosis	To increase adherence and improve respiratory symptoms	Patients using specific cystic fibrosis agents have the option to enroll when their prescriptions are filled at CuraScript
GrowthLogic℠	Growth hormone deficiency	To increase adherence and prevent growth retardation, delayed puberty, and abnormal height	Patients using specific growth hormone agents have the option to enroll when their prescriptions are filled at CuraScript
HEPLogic®	Hepatitis C	To improve patient adherence to the prescribed therapy regimen to achieve sustained viral response	All patients taking self-injectable interferons or ribavirin therapy have the option to enroll when their prescriptions are filled through our specialty pharmacy
HIVLogic℠	Human immunodeficiency virus	To avoid the emergence of drug-resistant virus and disease progression through increased adherence	All patients with HIV have the option to enroll when their prescriptions are filled through our specialty pharmacy
Iron Overload	Iron overload	To provide optimal clinical management and care to patients receiving oral medications for iron overload	All patients using oral medication for iron overload have the option to enroll when their prescriptions are filled through our specialty pharmacy

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Program	Disease State	Program Objective	Enrollment Criteria
MSLogic®	Multiple sclerosis	To improve patient adherence to the prescribed therapy regimen to reduce exacerbations in the patient population	All patients taking self-injectable medications for multiple sclerosis have the option to enroll when their prescriptions are filled through our specialty pharmacy
Oncology Care	Cancer	To provide optimal clinical management and care to oncology patients and prevent disease progression	All patients using oral oncology agents have the option to enroll when their prescriptions are filled through our specialty pharmacy
PAHLogic®	Pulmonary arterial hypertension	To prevent pulmonary disease progression and complications and support the physician-patient relationship and plan of care	All pulmonary arterial hypertension patients have access to complete care, the full range of therapies, and clinicians with expertise in this disease state
PsoriasisLogic®	Psoriasis and psoriatic arthritis	To improve patient adherence to the prescribed therapy regimen to reduce the amount of body surface affected and severity of the psoriasis plaques, as well as to slow the progression of joint damage and improve joint function in persons with psoriatic arthritis	All patients taking self-injectable medications for psoriasis or psoriatic arthritis have the option to enroll when their prescriptions are filled through our specialty pharmacy
RALogic®	Rheumatoid arthritis	To improve patient adherence to the prescribed therapy regimen to slow the progression of joint damage and improve the average Modified Health Assessment Questionnaire score for the patient population	All patients using self-injectable rheumatoid arthritis medications have the option to enroll when their prescriptions are filled through our specialty pharmacy
RSVLogic®	Respiratory syncytial virus prevention	To reduce the number of hospitalizations and mortalities by improving therapy adherence	All caregivers of patients receiving Synagis therapy have the option to enroll when the patients' prescriptions are filled through our specialty pharmacy
TransplantLogic℠	Not applicable. This program is for patients who have received an organ transplant.	To prevent rejection of transplanted organs through increased adherence to anti-rejection medications	Patients using specific immunosuppressant agents have the option to enroll when their prescriptions are filled at CuraScript

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Network Accessibility and Disruption

79. Submit a current listing of the participating pharmacies in North Dakota.

Please refer to **Attachment F** for a listing of participating pharmacies in North Dakota.

80. How are pharmacies selected for inclusion in your network? Would your organization be willing to contract with additional pharmacies if there are geographic locations where participants live but which do not have access to one of your pharmacies?

Sanford Health Plan is committed to the value local pharmacies provide to the communities we serve. Express Scripts negotiates competitive network pricing for our plan sponsors while building and maintaining stable networks and services through collaborative and strategic relationships with retail pharmacies.

Express Scripts integrates convenient network pharmacy programs with superior management systems to provide national provider networks that offer:

Client Support

- Network design consultation
- Flexible benefit designs
- CMS-compliant Medicare and Medicaid networks
- Workers' Compensation network
- Management reports
- Member eligibility control

Reduced Cost

- Discounted drug costs
- Limited provider networks to maximize savings

Clinical Expertise

- Online claims adjudication and drug utilization review
- Immunization programs
- Medication therapy management
- Pharmacist access to the Patient Care Contact Center, Pharmacy Help Desk, and Express-Scripts.com for Pharmacists

Convenience

- Process to easily add pharmacies based on member access needs
- Stable networks with low turnover
- Online pharmacy locator

ESI reduces unit costs for prescription drugs by negotiating discount rates with retail pharmacies across the country, increasing the use of preferred products, promoting generics, and encouraging formulary adherence. Additionally, we have built our value-enhanced networks so that members have convenient access to local pharmacies while limiting the number of participating pharmacies to maximize discounts for NDPERS.

If concerns related to network access are identified, Express Scripts can contract with additional pharmacies that meet our URAC-sanctioned credentialing requirements and contract terms. We can add new pharmacies within three business days after we have

received certification, a completed and signed contract from the pharmacy, and verification that all information is correct, which may take up to five business days.

81. Indicate which major chain stores are not included in your proposed network for NDPERS.

Walgreens does not participate in the network.

Medicare Part D

82. Describe the ability of your organization to provide Medicare Part D coverage for Medicare eligible retirees enrolled in the NDPERS group health insurance program. Identify any subcontractor that would be used to provide Medicare Part D coverage to the NDPERS Medicare eligible retirees and note that NDPERS reserves the right to approve the subcontractor. Also identify what type of plan would be used (e.g. fully-insured PDP, 800-Series EGWP, Direct-Contract EGWP)

Sanford Health Plan is committed to provide a Part D Plans through Express Scripts, Inc. using a EGWP arrangement.

HDHP/HSA

83. Describe how your organization will do the administration of the HSA option. What details are provided to individuals that select this option, the name of the service vendor and any other applicable information.

Sanford Health Plan currently has a relationship with Evolution1 for our HRA/HSAs. The 1Cloud HSA Solution is a true multi-account solution for HSAs – all account types are available on a single platform and service experience, debit card, and mobile applications.

It provides a comprehensive, one-stop, compliant HSA administration capability the includes both cash accounts and investment options. Other benefits include:

- A private labeled custodian option with secure, FDIC-insured deposits at HealthcareBank, a division of Bell State Bank & Trust, a $4B financial institution
- An additional revenue source with an indexed reimbursement on the balance of HSA cash accounts to the administrator.
- A flexible fee structure, so partners can set fees according to their markets and sales strategies.

The Employer Portal provides:

- Secure access to data and reports, submit changes and files, and proactively schedule contributions

SANFORD HEALTH PLAN

- Online lookup helps employers respond to employees' questions and issues.
- Over 50 standard employer reports and notifications, as well as custom reports, if available, are accessible via email and/or secure, self-service Employer Portal
- Use the Consumer Data Exchange to integrate with 1Cloud for exchanging eligibility files, or enroll employees through the Employer Portal.

Account Funding

Multiple options are available for funding accounts, including election-based scheduled contributions, ACH funding, and file-based contribution submission via Consumer Data Exchange. Or use Employer Portal to directly set up recurring contribution schedule, and load payroll deductions and employer contributions.

1Cloud also offers an Integrated debit card that provides:

- Real-time Integration - Account Balances in Sync
- All purses on one card - HSA, FSA, Limited-Purpose FSA
- Stacking Order: FSA > HSA
- Regulatory Compliance
- Merchant Code Restrictions
- FSA, HRA, optional for HSA
- IIAS Compliant
- Auto-Substantiation
- IIAS, Copayment Matching, Carrier Matching,

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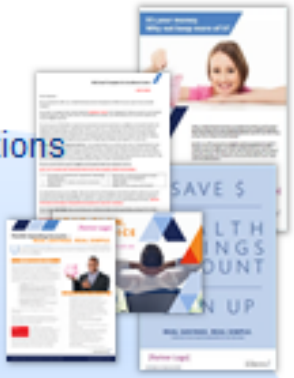
Consumer Experience

Mobile

Mobile app lets tech-savvy consumers manage their CDH accounts right from their phone.

Automated Communications

Over 10 statements and notifications – all accessible via e-mail, consumer portal, and mail when necessary.



1cloud by Evolution1

Consumer Portal

Robust, branded portal empowers consumers, providing everything they need to know about their account, with an industry-leading design that enables quick and easy navigation of content.

Flexible Payment Options

Consumer can choose from:

- Debit card, which increases consumer satisfaction by reducing paperwork.
- Consumer-initiated Payment on Consumer Portal
- Claims Exchange with auto-pay or Expense Tracker

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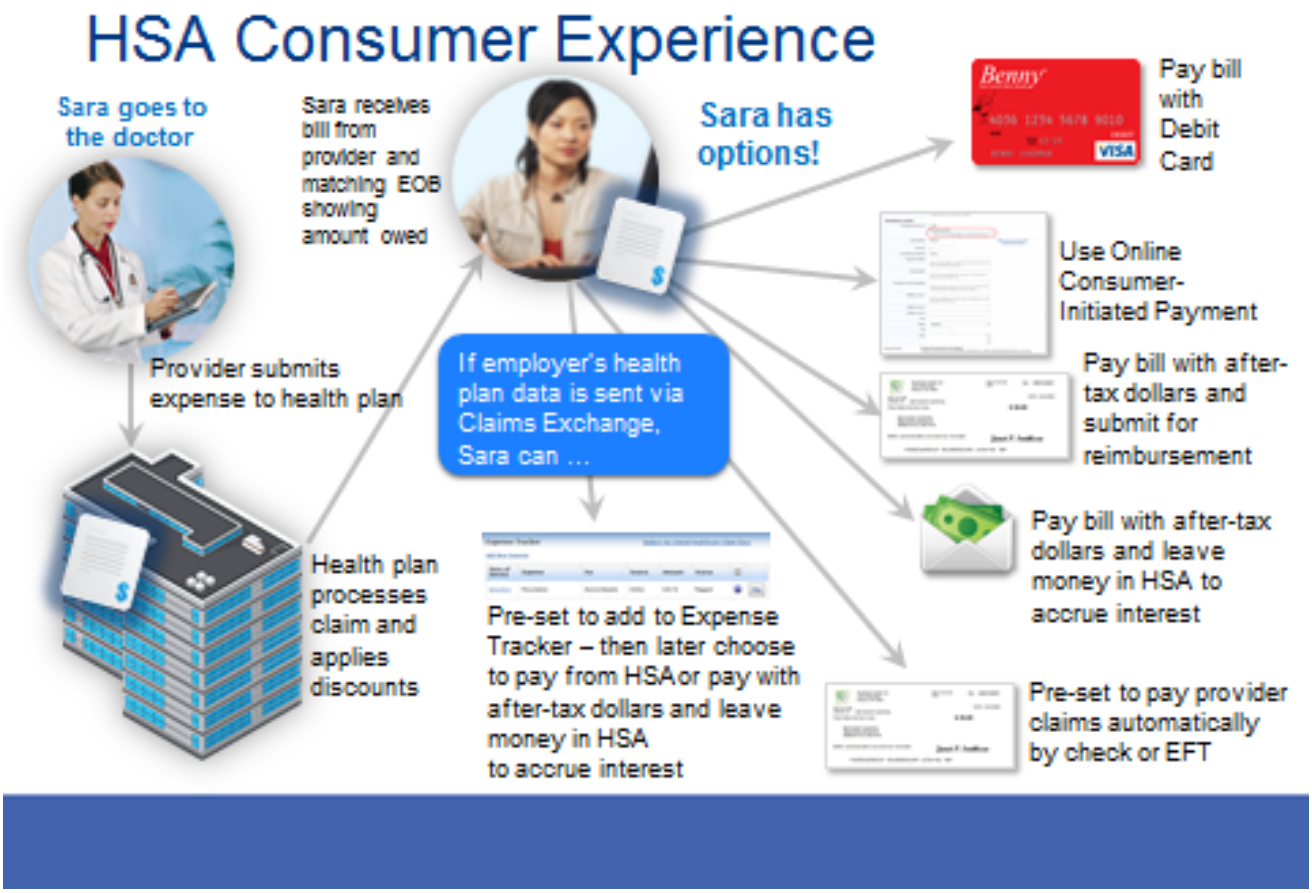
SANFORD HEALTH PLAN



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Convenient Self-Service Tools

Additionally, Sanford Health Plan can interface with ABG (or a vendor of the State's preference) to track and transmit credits NDPERS may want to contribute to an HSA account as a result of an employee's participation in a wellness program or meeting certain wellness standards as part of a bona fide wellness program.

Economy to be effected

84. Please indicate if you will have an office in North Dakota and where most of the work on this contract will be done?

Sanford Health Plan will consider opening service offices to include account representatives in the Bismarck and Fargo regions. Health coaches and/or case managers will be based in existing Sanford locations to support the disease management and wellness programs. However, claims administration and operations will continue to occur in the centralized Sioux Falls office.

85. Please identify the number of employees you will employ in North Dakota pursuant to this contract

As described in Section 18 of this proposal, Sanford Health Plan projects the need to hire nearly 100 FTEs to start with approximately 20 of the positions located in North Dakota.

86. Of your total administrative fee please estimate the amount that will be spent in North Dakota and the amount that will be spent outside the state.

Sanford Health Plan estimates that approximately $15M will be spent over the biennium within North Dakota.

Cost Proposal Exhibits

Please refer to the cost proposal exhibits included under separate cover with this RFP, directed to Deloitte Consulting:

- Medical & Rx Premiums (D1.1)
- Medical & Rx Premium Development (D1.2)
- Traditional Rx Terms (D1.3)
- Transparent (Pass-through) Rx Terms (D1.4)
- Medical (Only) Premiums (D1.5)
- Medical (Only) Premium Development (D1.6)
- Medicare Part D Group Prescription Drug Plan (PDP) Premiums (D2.1)
- Medicare Part D Group Prescription Drug Plan (PDP) Premium Development (D2.2)
- ACA Requirements (D3)

Sample Contract & Administrative Services Agreement

Please refer to the contract/ASA deviations exhibit included under separate cover with this RFP:

1. Exhibit F1 – Contract/ASA deviations and exceptions and proposed alternative language.
2. Exhibit F2 - Deviations from other RFP requirements
3. Exhibit F3 – Redline version of the sample contract/ASA reflecting the deviations identified in Exhibit F1.

SANFORD HEALTH PLAN

Face sheet

Name of Proposer's Firm:	Sanford Health Plan
Federal Tax I.D. Number:	91-1842494
Principal Place of Business:	Sioux Falls, SD
Address:	300 Cherapa Place, Suite 201
City:	Sioux Falls
State and Zip:	South Dakota, 57103
Contact Person:	Lisa M. Carlson
Title:	Director, Planning & Regulation
Telephone:	(605) 328-6859
Fax:	(605) 328-6811
E-mail address:	lisa.m.carlson@sanfordhealth.org

Minimum Requirements for Administrative Services Checklist

Minimum Requirements Statement	Response
Electronic Data Collection and Reporting Requirements: Respondents must, at a minimum, meet the data collection and reporting requirements described in Section 1 under Reporting Requirements of the RFP.	Sanford Health Plan agrees to meet this requirement.
Vendor must be able to take current electronic enrollment file (containing member eligibility) at no cost.	Sanford Health Plan agrees to meet this requirement.
Effective Date of Coverage: Respondents must be able to provide required coverages and services by July 1, 2015 and January 1 2016 for the PDP.	Sanford Health Plan agrees to meet this requirement.
Licensure: Respondents must have all applicable licenses required by North Dakota or agree to obtain necessary licensure prior to the effective dates of coverage.	Sanford Health Plan agrees to meet this requirement.
Term of Contract: NDPERS is required by state statute to solicit bids for medical benefit coverage for a specified term for a fully-insured arrangement and every other biennium for a self-funded arrangement. NDPERS has determined that the specified term for fully-insured arrangement shall be six years subject to two year renewals, however, NDPERS reserves the right to extend the agreement subject to negotiation with the successful vendor if the Board deems it necessary.	Sanford Health Plan agrees to meet this requirement.
Premium Rate Guarantees: For all insured proposals premium rates must be guaranteed for a period of two years, from July 1, 2015 to June 30, 2017. PDP rates will be developed each year based upon the federal subsidy.	Sanford Health Plan agrees to meet this requirement.
Group PDP product: Ability to offer a group PDP product meeting the requirements outlined in the RFP	Sanford Health Plan agrees to meet this requirement.
PDP rates: Must be submitted to PERS by September of each year.	Sanford Health Plan agrees to meet this requirement.
Non-Medicare Retirees: Rates are governed by state statue. Non-Medicare retiree single rate is 150% of the active member single rate; the rate for a non-Medicare retiree plus one is twice the non-Medicare single rate, and the rate for a non-Medicare retiree plus two or more dependents is two and one-half times the non-Medicare retiree single rate.	Sanford Health Plan agrees to meet this requirement.

Renewals: Renewals must be submitted to NDPERS in August of the year preceding the contract renewal date and in September of each year for the PDP.	Sanford Health Plan agrees to meet this requirement.
Contract Termination: Respondent's contract termination provision may not require more than 120-day notice and can occur only at renewal. NDPERS can terminate coverage at any time.	Sanford Health Plan agrees to meet this requirement.
Replicate Coverage: Respondent must replicate the existing coverage and financial terms for two years including an HSA arrangement. Variances and exceptions to existing coverage can be offered in Appendix F item F2.	Sanford Health Plan agrees to meet this requirement with the exceptions as noted herein.
Legislative Compliance: Respondents agree to comply with all provisions of the Health Insurance Portability Act of 1996 including, but not limited to providing certificates of creditable coverage. Respondents must also be in compliance with all HIPAA Privacy and HIPAA EDI requirements and be able to conduct all applicable employer/plan sponsor and provider transactions consistent with those requirements. Respondents will be expected to meet HIPAA security requirements when applicable to NDPERS. Respondents will also be expected to be in compliance with all ACA requirements	Sanford Health Plan agrees to meet this requirement.
Transition Management: Respondents agree, should they be selected, they will proactively manage the transition of coverage (e.g. claim accumulators, lifetime maximums, etc.) from the subsequent carrier.	Sanford Health Plan agrees to meet this requirement.
Administration: Respondents must agree to comply with existing administration of NDPERS. Any modifications needed to accommodate NDPERS data will be done at the vendor's own expense.	Sanford Health Plan agrees to meet this requirement.
Audit: NDCC 54-52-05 (10) relating to the audit authority of NDPERS.	Sanford Health Plan agrees to meet this requirement.
North Dakota Legislation Requirements: Respondent must meet all requirements in the North Dakota Century Code including 54-52.1 and all requirements in the North Dakota Administrative Code including 71-03. Specific recognition of 54-52.1-12 should be acknowledged.	Sanford Health Plan agrees to meet this requirement.
Ability to meet the specifications outlined in the RFP unless specifically noted	Sanford Health Plan agrees to meet this requirement.
Premium rates must be divisible by two.	Sanford Health Plan agrees to meeting this requirement.
Subject matter experts and other appropriate personnel will be available to attend board meetings, legislative hearings, etc. as needed	Sanford Health Plan agrees to meeting this requirement.

Affidavit of Non-collusion

I swear (or affirm) under the penalty of perjury:

1. That I am the Responder (if the Responder is an individual), a partner in the company (if the Responder is a partnership), or an officer or employee of the responding corporation having authority to sign on its behalf (if the Responder is a corporation);

2. That the attached proposal submitted in response to the Group Medical Coverage Request for Proposals has been arrived at by the Responder independently and has been submitted without collusion with and without any agreement, understanding or planned common course of action with, any other Responder of materials, supplies, equipment or services described in the Request for Proposal, designed to limit fair and open competition;

3. That the contents of the proposal have not been communicated by the Responder or its employees or agents to any person not an employee or agent of the Responder and will not be communicated to any such persons prior to the official opening of the proposals; and

4. That I am fully informed regarding the accuracy of the statements made in this affidavit.

Responder's Firm Name: Sanford Health Plan

Authorized Signature: Lisa M. Carlson

Date: October 9, 2014

Subscribed and sworn to me this _____ day of _____

Notary Public: _____

My commission expires: _____

Conflicts of Interest Statement

Conflicts of interest list	
Responders must provide a list of all entities with which it has relationships that create, or appear to create, a conflict of interest with the work that is contemplated in this request for proposals. The list should indicate the name of the entity, the relationship, and a discussion of the conflict.	There are no conflicts of interest to report.

Compliance with Federal and State Laws Form

NDPERS — Federal and State Law Compliance Certification

1. The company shown below is or will be in compliance with Federal and State laws and does not knowingly violate North Dakota or United States Laws. The company shown below will obtain this certification from all subcontractors who will participate in the performance of this contract; and

I certify that the company shown below is in compliance with items 1 above and that I am authorized to sign on its behalf.

Name of Company: Sanford Health Plan Date: 9/3/14

Authorized Signature: Ruth A. Krystopolski Telephone Number: (605) 328-6801

Printed Name: Ruth A. Krystopolski Title: President

STATE OF NORTH DAKOTA

LOCATION OF SERVICE DISCLOSURE AND CERTIFICATION

LOCATION OF SERVICE DISCLOSURE

Check all that apply:

- ❒ The services to be performed under the anticipated contract as specified in our proposal will be performed ENTIRELY within the State of North Dakota.
- ❒ The services to be performed under the anticipated contract as specified in our proposal entail work ENTIRELY within another state within the United States.
- ☑ The services to be performed under the anticipated contract as specified in our proposal will be performed in part within North Dakota and in part within another state within the United States.
- ❒ The services to be performed under the anticipated contract as specified in our proposal DO involve work outside the United States. Below (or attached) is a description of
  - (1) the identity of the company (identify if subcontractor) performing services outside the United States;
  - (2) the location where services under the contract will be performed; and
  - (3) the percentage of work (in dollars) as compared to the whole that will be conducted in each identified foreign location.

CERTIFICATION

By signing this statement, I certify that the information provided above is accurate and that the location where services have been indicated to be performed will not change during the course of the contract without prior, written approval from the State of North Dakota.

Name of Company: Sanford Health Plan

Authorized Signature: Ruth A. Krystopolski

Printed Name: Ruth A. Krystopolski

Title: President

Date: 9/3/14 Telephone Number: (605) 328-6801

Sanford Health Plan

Statutory-Basis Financial Statements as of and for the Years Ended December 31, 2013 and 2012, Supplemental Schedules as of and for the Year Ended December 31, 2013, Independent Auditors' Report, Qualifications Letter, and Internal Control Letter

SANFORD HEALTH PLAN

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USA

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Fax: +1 612 397 4450
www.deloitte.com

INDEPENDENT AUDITORS' REPORT

Audit Committee and Management
Sanford Health Plan
Sioux Falls, South Dakota

We have audited the accompanying statutory-basis financial statements of Sanford Health Plan (SHP or the "Company"), which comprise the statutory-basis statements of admitted assets, liabilities, and capital and surplus as of December 31, 2013 and 2012, and the related statutory-basis statements of revenue and expenses and capital and surplus, and cash flows for the years then ended, and the related notes to the statutory-basis financial statements.

Management's Responsibility for the Statutory-Basis Financial Statements

Management is responsible for the preparation and fair presentation of these statutory-basis financial statements in accordance with the accounting practices prescribed or permitted by the South Dakota Department of Commerce and Regulation, Division of Insurance. Management is also responsible for the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error.

Auditors' Responsibility

Our responsibility is to express an opinion on these statutory-basis financial statements based on our audits. We conducted our audits in accordance with auditing standards generally accepted in the United States of America. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the statutory-basis financial statements are free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the statutory-basis financial statements. The procedures selected depend on the auditor's judgment, including the assessment of the risks of material misstatement of the statutory-basis financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the Company's preparation and fair presentation of the statutory-basis financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the Company's internal control. Accordingly, we express no such opinion. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluating the overall presentation of the statutory-basis financial statements.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

Opinion

In our opinion, the statutory-basis financial statements referred to above present fairly, in all material respects, the admitted assets, liabilities, and capital and surplus of SHP as of December 31, 2013 and 2012, and the results of its operations and its cash flows for the years then ended in accordance with the accounting practices prescribed or permitted by the South Dakota Department of Commerce and Regulation, Division of Insurance described in Note 1 to the statutory-basis financial statements.

Basis of Accounting

We draw attention to Note 1 of the statutory-basis financial statements, which describes the basis of accounting. As described in Note 1 to the statutory-basis financial statements, the statutory-basis financial statements are prepared by SHP using accounting practices prescribed or permitted by the South Dakota Department of Commerce and Regulation, Division of Insurance, which is a basis of accounting other than accounting principles generally accepted in the United States of America, to meet the requirements of the South Dakota Department of Commerce and Regulation, Division of Insurance. Our opinion is not modified with respect to this matter.

Emphasis of Matter

As discussed in Note 2 to the statutory-basis financial statements, the Company has implemented Statement of Statutory Accounting Principles No. 101, *Income Taxes — A Replacement of SSAP No. 10R and SSAP No. 10*, which resulted in a cumulative change in accounting principle as of January 1, 2012.

Report on Supplemental Schedules

Our 2013 audit was conducted for the purpose of forming an opinion on the 2013 statutory-basis financial statements as a whole. The supplemental schedule of investment risk interrogatories and the supplemental summary investment schedule, as of and for the year ended December 31, 2013, are presented for purposes of additional analysis and are not a required part of the 2013 statutory-basis financial statements. These supplemental schedules are the responsibility of the Company's management and were derived from and relate directly to the underlying accounting and other records used to prepare the statutory-basis financial statements. Such supplemental schedules have been subjected to the auditing procedures applied in our audit of the 2013 statutory-basis financial statements and certain additional procedures, including comparing and reconciling such supplemental schedules directly to the underlying accounting and other records used to prepare the statutory-basis financial statements or to the statutory-basis financial statements themselves, and other additional procedures in accordance with auditing standards generally accepted in the United States of America. In our opinion, such supplemental schedules are fairly stated in all material respects in relation to the 2013 statutory-basis financial statements as a whole.

Restriction on Use

Our report is intended solely for the information and use of the board of directors and the management of SHP and for filing with the South Dakota Department of Commerce and Regulation, Division of Insurance and other state insurance departments to whose jurisdiction the Company is subject and is not intended to be, and should not be, used by anyone other than these specified parties.

Deloitte & Touche LLP

February 28, 2014

SANFORD HEALTH PLAN

STATUTORY-BASIS STATEMENTS OF ADMITTED ASSETS, LIABILITIES, AND CAPITAL AND SURPLUS AS OF DECEMBER 31, 2013 AND 2012

	2013	2012
ASSETS		
CASH AND INVESTED ASSETS:		
Bonds	$ 35,978,315	$ 34,440,381
Preferred stocks	828,239	
Cash and short-term investments	8,049,466	11,015,266
Investment in insurance subsidiary	1,232,509	
Total cash and invested assets	46,088,529	45,455,647
INVESTMENT INCOME DUE AND ACCRUED	297,681	275,698
UNCOLLECTED PREMIUMS AND AGENTS' BALANCES IN THE COURSE OF COLLECTION	1,503,562	217,241
AMOUNTS RECOVERABLE FROM REINSURERS	519,743	503,320
AMOUNTS RECEIVABLE RELATING TO UNINSURED PLANS	791	14,486
CURRENT FEDERAL AND FOREIGN INCOME TAX RECOVERABLE AND INTEREST THEREON	996,000	
NET DEFERRED TAX ASSETS	1,447,000	997,000
ELECTRONIC DATA PROCESSING EQUIPMENT AND SOFTWARE	90,324	160,760
RECEIVABLES FROM PARENT, SUBSIDIARIES, AND AFFILIATES	27,497	18,444
HEALTH CARE AND OTHER AMOUNTS RECEIVABLE	376,078	146,433
TOTAL	$ 51,347,205	$ 47,789,029
LIABILITIES AND CAPITAL AND SURPLUS		
LIABILITIES:		
Claims unpaid	$ 16,767,350	$ 12,907,798
Unpaid claims adjustment expenses	1,118,000	850,000
Aggregate health policy reserves	873,000	743,000
Premiums received in advance	912,379	1,352,457
General expenses due or accrued	4,202,854	2,394,223
Current federal income tax payable		1,358,000
Amounts due to parent, subsidiaries, and affiliates	1,480,650	1,392,614
Total liabilities	25,354,233	20,998,092
COMMITMENTS AND CONTINGENCIES (Notes 14 and 15)		
CAPITAL AND SURPLUS:		
Gross paid-in and contributed surplus	27,013,218	28,013,218
Unassigned funds deficit	(1,020,246)	(1,222,281)
Total capital and surplus	25,992,972	26,790,937
TOTAL	$ 51,347,205	$ 47,789,029

See notes to statutory-basis financial statements.

SANFORD HEALTH PLAN

STATUTORY-BASIS STATEMENTS OF REVENUES AND EXPENSES AND CAPITAL AND SURPLUS ACCOUNT
FOR THE YEARS ENDED DECEMBER 31, 2013 AND 2012

	2013	2012
REVENUES:		
Net premium income	$ 142,984,884	$ 137,562,080
Fee-for-service	333,411	666,826
Total revenues	143,318,295	138,228,906
HOSPITAL AND MEDICAL EXPENSES:		
Hospital/medical benefits	63,773,896	59,997,280
Other professional services	35,369,172	35,643,471
Outside referrals	9,490,254	8,658,370
Emergency room and out-of-area	4,104,705	4,224,950
Prescription drugs	17,806,020	16,299,721
Total hospital and medical expenses	130,544,047	124,823,792
Less net reinsurance recoveries	(674,320)	(924,756)
Hospital and medical expenses — net	129,869,727	123,899,036
CLAIMS ADJUSTMENT EXPENSES	9,192,821	8,250,046
GENERAL ADMINISTRATIVE EXPENSES	3,049,780	3,292,492
INCREASE (DECREASE) IN RESERVES FOR HEALTH CONTRACTS	130,000	(314,000)
Total underwriting deductions	142,242,328	135,127,574
NET UNDERWRITING INCOME	1,075,967	3,101,332
NET INVESTMENT GAINS	788,848	976,010
AGGREGATE WRITE-INS FOR OTHER INCOME OR EXPENSES	96,640	166,874
NET INCOME BEFORE FEDERAL INCOME TAXES	1,961,455	4,244,216
FEDERAL INCOME TAX EXPENSE	(180,000)	(1,396,000)
NET INCOME	$ 1,781,455	$ 2,848,216
CAPITAL AND SURPLUS — Beginning of year	$ 26,790,937	$ 25,146,214
CHANGE IN CAPITAL AND SURPLUS:		
Net income	1,781,455	2,848,216
Change in net unrealized capital gains (losses) less capital gains tax	(116,491)	
Change in net deferred income tax	441,000	(393,000)
Change in nonadmitted assets	(2,136,438)	(580,493)
Return of capital (Note 10)	(1,000,000)	(600,000)
Contribution to subsidiary	(1,000,000)	
Change in accounting principle (Note 2)		370,000
Initial investment in insurance subsidiary	831,807	
Unrealized change in investment in insurance subsidiary	400,702	
Net change in capital and surplus	(797,965)	1,644,723
CAPITAL AND SURPLUS — End of year	$ 25,992,972	$ 26,790,937

See notes to statutory-basis financial statements.

SANFORD HEALTH PLAN

STATUTORY-BASIS STATEMENTS OF CASH FLOWS
FOR THE YEARS ENDED DECEMBER 31, 2013 AND 2012

	2013	2012
CASH FROM OPERATIONS:		
Premiums collected — net of reinsurance	$ 141,388,485	$ 137,642,936
Net investment income	1,259,522	1,273,525
Miscellaneous income	(169,006)	564,892
Subtotal	142,479,001	139,481,353
Benefits and loss related payments	(126,156,599)	(122,098,704)
Commissions, expenses paid, and aggregate write-ins for deductions	(10,055,634)	(10,802,371)
Federal income taxes paid	(2,534,000)	(60,000)
Subtotal	(138,746,233)	(132,961,075)
Net cash provided by operations	3,732,768	6,520,278
CASH FROM INVESTING:		
Cost of investments acquired	(12,473,745)	(14,379,221)
Proceeds from investments sold, matured, or repaid	8,265,916	13,864,753
Net cash used in investing	(4,207,829)	(514,468)
CASH FROM FINANCING AND MISCELLANEOUS SOURCES:		
Return of capital to parent (Note 10)	(1,000,000)	(600,000)
Capital infusion to insurance subsidiary	(1,000,000)	
Other cash used	(490,739)	(49,562)
Net cash used in financing and miscellaneous sources	(2,490,739)	(649,562)
RECONCILIATION OF CASH AND SHORT-TERM INVESTMENTS:		
Net change in cash and short-term investments	(2,965,800)	5,356,248
Cash and short-term investments:		
Beginning of year	11,015,266	5,659,018
End of year	$ 8,049,466	$ 11,015,266

See notes to statutory-basis financial statements.

1. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

A. Accounting Practices

Sanford Health Plan (SHP or the "Company") is a taxable nonprofit health maintenance organization (HMO) licensed to operate in South Dakota, North Dakota, and Iowa. SHP offers commercial, Medicare supplement, and individual products to approximately 37,000 members. SHP is a wholly owned subsidiary of Sanford Health (SH). SH is a wholly owned subsidiary of Sanford, a fully integrated health care organization providing clinical care to patients, research, and health care coverage. SHP has entered into contracts with physicians, hospitals, and other health care providers pursuant to which such providers deliver medical care to its enrollees. SHP was incorporated on July 30, 1997, and began operations on January 1, 1998.

Effective July 1, 2013, Heart of American Health Plan became a wholly owned subsidiary of SHP and was renamed as Sanford Heart of America Health Plan (SHAHP). SHAHP is a nonprofit health maintenance organization licensed to operate in North Dakota and is exempt from income taxes under Section 501(c)(4) of the Internal Revenue Code. The transaction was an affiliation change in the corporate member and not an asset purchase. As disclosed in Note 3, no purchase price was paid for this affiliation. The ND Commissioner of Insurance approved the acquisition of control via an Order issued on May 21, 2013.

The statutory-basis financial statements of SHP are prepared on the basis of accounting practices prescribed or permitted by the South Dakota Department of Commerce and Regulation, Division of Insurance (SD Division of Insurance). These practices differ from accounting principles generally accepted in the United States of America (GAAP) as certain assets, including furniture, equipment, leasehold improvements, prepaid assets, and certain aged health care receivables, are considered nonadmitted assets for statutory purposes and are excluded from the statutory-basis statements of admitted assets, liabilities, and capital and surplus. The change in nonadmitted assets has been reflected in unassigned funds deficit in the accompanying statutory-basis financial statements. Under GAAP, these amounts would be included in total assets on the statutory-basis statements of admitted assets, liabilities, and capital and surplus. In addition, certain debt investments that would be shown at fair value under GAAP are presented at amortized cost in the accompanying statutory-basis statements of admitted assets, liabilities, and capital and surplus.

The SD Division of Insurance recognizes only statutory accounting practices prescribed or permitted by the state of South Dakota for determining and reporting the financial condition and results of operations of an insurance company for determining its solvency under the Division of Insurance Law. The National Association of Insurance Commissioners' (NAIC) Statutory Accounting Principles (SAP) have been adopted as a component of prescribed or permitted practices by the state of South Dakota. South Dakota has adopted certain prescribed accounting practices that differ from those found in NAIC SAP. Specifically for the state of South Dakota, electronic data processing (EDP) equipment original cost may not be more than 3% of the admitted assets of the insurer and shall be amortized over a period not to exceed five years. In NAIC SAP, EDP equipment shall be limited to 3% of the reporting entity's capital and surplus as shown on the statutory-basis statements of admitted assets, liabilities, and capital and surplus of the reporting entity for its most recently

filed statement with the domiciliary state commissioner and shall be depreciated for a period not to exceed three years. There is no material difference in net income or statutory-basis capital and surplus for the years ended December 31, 2013 and 2012, as a result of this prescribed practice. The commissioner of the SD Division of Insurance has the right to permit other specific practices that deviate from prescribed practices.

A reconciliation of SHP's net income (loss) and capital and surplus between NAIC SAP and practices prescribed and permitted by the State of South Dakota is shown below:

	State of Domicile	2013	2012
Net income:			
Company state basis	South Dakota	$ 1,781,455	$ 2,848,216
NAIC SAP	South Dakota	$ 1,781,455	$ 2,848,216
Capital and Surplus:			
Company state basis	South Dakota	$25,992,972	$26,790,937
NAIC SAP	South Dakota	$25,992,972	$26,790,937

B. Use of Estimates in the Preparation of the Statutory-Basis Financial Statements

These statutory-basis financial statements include certain amounts that are based on SHP's estimates and judgments. These estimates require SHP to apply complex assumptions and judgments often because SHP must make estimates about the effects of matters that are inherently uncertain and will change in subsequent periods. The most significant estimates relate to claims unpaid, aggregate health policy reserves, and unpaid claims adjustment expenses (CAE). SHP adjusts these estimates each period as more current information becomes available. The impact of any changes in estimates is included in the determination of income in the period in which the estimate is adjusted.

C. Significant Accounting Policies

SHP uses the following accounting policies:

(1) *Cash and Short-Term Investments* — As required by Statement of Statutory Accounting Principles (SSAP) No. 2, cash represents cash held by SHP in disbursement accounts and certificates of deposit with maturities of one year or less. Short-term investments consist of marketable securities with original maturities between three months and one year. The carrying amount of short-term investments reported in the accompanying statutory-basis statements of admitted assets, liabilities, and capital and surplus is cost, which approximates fair value.

(2) *Bonds* — Balance consists of U.S. government, U.S. state, U.S. political subdivisions of state, U.S. special revenue and special assessment, and industrial and miscellaneous bonds with original maturities in excess of one year and are carried at amortized cost as they meet NAIC credit risk designation one or two. Amortization of bond premiums and discounts is calculated using the interest method. Bonds are valued and reported using market prices published by the Securities Valuation Office of the NAIC (SVO) in accordance with the NAIC Valuations of Securities manual prepared by the SVO or an external pricing service. Prepayment assumptions are based on historic principal pay downs. SHP's investment policy limits investments in mortgage-backed securities to 30% of the portfolio.

(3) *Common Stock* — SHP did not hold any investments in common stock during the years ended December 31, 2013 or 2012.

(4) Preferred Stock — SHP had investments in preferred stocks of $828,239 as of December 31, 2013. Investments in preferred stocks are valued as prescribed by the SVO, or an external pricing service if NAIC values are not available, in the statutory-basis statements of admitted assets, liabilities, and capital and surplus, while under GAAP, preferred stocks are generally reported at fair value.

(5) *Mortgage Loans* — SHP did not have any mortgage loans during the years ended December 31, 2013 or 2012.

(6) *Loan-Backed Securities* — Loan-backed securities are stated at amortized cost. The retrospective adjustment method is used to value all securities.

(7) *Investments in Subsidiaries* — SHP owns 100% of SHAHP effective July 1, 2013. The value of the subsidiary was $1,232,509 as of December 31, 2013.

(8) *Joint Ventures* — SHP does not have any joint ventures.

(9) *Derivatives* — SHP did not participate in any derivative activity during the years ended December 31, 2013 or 2012.

(10) *Premium Deficiency Reserves* — Premium deficiency reserves and the related expense, as defined by SSAP No. 54, *Individual and Group Accident Health Contracts*, as well as actuarial practice guidelines, are recognized when it is probable that expected future health care expenses, CAE, and administration costs under a group of existing contracts will exceed anticipated future premiums and reinsurance recoveries considered over the remaining lives of the contracts. The methods for making such estimates and for establishing the resulting reserves are periodically reviewed and updated, and any adjustments are reflected in hospital and medical expenses in the accompanying statutory-basis statements of revenue and expenses and capital and surplus account in the period in which the change in estimate is identified. SHP used a 3% discount rate as a factor in the premium deficiency calculation in accordance with SSAP No. 54. A premium deficiency reserve (recorded as aggregate health policy reserves) of $873,000 and $743,000 related to SHP's individual business line was recorded as of December 31, 2013 and 2012, respectively.

(11) *Hospital and Medical Expenses, Claims Unpaid, Unpaid CAE, and Aggregate Health Policy Reserves* — Hospital and medical expenses and corresponding liabilities include claims paid, claims processed but not yet paid, estimates for claims received but not yet processed, and estimates for the costs of health care services enrollees have received but for which claims have not yet been submitted.

The estimates for claims unpaid are developed using actuarial methods based upon historical submission and payment data, cost trends, customer and product mix, seasonality, utilization of health care services, contracted service rates, and other relevant factors. The estimates may change as actuarial methods change or as underlying facts upon which estimates are based change. SHP did not change actuarial methods during the years ended December 31, 2013 and 2012. Management believes the amount of claims unpaid is adequate to cover SHP's liability for unpaid claims as of December 31, 2013; however, actual claim payments may differ from those established estimates. Adjustments to claims unpaid estimates are reflected in operating results in the period in which the change in estimate is identified.

Unpaid CAE as defined by SSAP No. 85, *Claim Adjustment Expenses, Amendments to SSAP No. 55 — Unpaid Claims, Losses, and Loss Adjustment Expenses*, are those costs expected to be incurred in connection with the adjustment and recording of accident and health claims. CAE is recorded as cost-containment expenses and other CAE. Cost-containment expenses include utilization review and other case management activities. A detailed review of SHP's administrative expenses is performed to determine the allocation between CAE and general administrative expenses (GAE) in accordance with SSAP No. 85. The method used for determining CAE is periodically reviewed and updated, and any adjustments are reflected in underwriting deductions in the accompanying statutory-basis statements of revenue and expenses and capital and surplus account in the period in which the change in methodology is identified.

(12) *Capitalization Policy* — SHP has not modified its capitalization policy from the prior period. The capital threshold is $2,500 for a single item and $3,000 for group purchases where per unit cost is greater than $1,000. All personal computers and laptops are capitalized regardless of the cost.

(13) *Impairment* — SHP continually monitors the difference between the cost and estimated fair value of its bonds and short-term investments. If any of SHP's bonds or short-term investments experience a decline in value believed to be other than temporary, or for which SHP has intent to sell, SHP records a realized loss. The new cost basis is not changed for subsequent recoveries in fair value. The prospective adjustment method is utilized for mortgage-backed securities for periods subsequent to the loss recognition. SHP has not recorded any other-than-temporary impairments for the years ended December 31, 2013 and 2012.

(14) *Net Premium Income and Premiums Received in Advance* — Premium revenue for prepaid health care is recognized as income in the month in which the enrollees are entitled to health care services. Premiums collected in advance are reported as premiums received in advance.

There are no premiums receivable balances greater than 90 days due, which are nonadmitted, with the exception of amounts due under government-insured plans, which are admitted assets.

(15) *Fee-for-Service Revenue* — Fee-for-service revenue is reported at the estimated net realizable amounts from patients, third-party payors, and others for services in the period in which services are provided.

(16) *Reinsurance* — SHP entered into a stop-loss reinsurance agreement with an insurance company for both 2013 and 2012 to limit losses on individual claims in excess of $500,000 for 2013 and 2012 of eligible medical and hospital services of any enrollee per contract year. Reinsurance premiums paid are deducted from net premium income in the statutory-basis financial statements. Reinsurance premiums were $1,561,856 and $1,029,595 for 2013 and 2012, respectively.

(17) *Depreciation* — All fixed assets are depreciated using the straight-line method over the shorter of the estimated useful lives of the assets or as prescribed by SAP. Only fixed assets that are admittable for statutory reporting are recorded on the statutory-basis statements of assets, liabilities, and capital and surplus. Upon asset retirement or disposal, the cost and accumulated depreciation accounts are adjusted, and the gain or loss is reflected in operations. Depreciation expense was $450,801 and $357,027 for 2013 and 2012, respectively, and shown as CAE. Accumulated depreciation was $3,078,706 and $2,671,840 as of December 31, 2013 and 2012, respectively.

(18) *Pharmacy Rebates Receivable* — Pharmacy rebates receivable are estimated based on the most current available data provided by SHP's unaffiliated pharmaceutical benefit manager and are invoiced on a quarterly lag basis. All pharmacy rebates receivable are considered nonadmitted assets for statutory purposes under SSAP No. 84, *Certain Healthcare Receivables and Receivables Under Government Insured Plans*, because such pharmacy rebates receivable are generally not collected within 90 days of the billing period. Accordingly, SHP has nonadmitted these receivables from the statutory-basis statements of admitted assets, liabilities, and capital and surplus.

(19) *Income Taxes* — Statutory accounting requires an amount to be recorded for deferred taxes on temporary differences between the financial reporting and tax basis of assets and liabilities, subject to a valuation allowance and admissibility limitations on deferred tax assets. The provision for income taxes is based on the amount estimated to be currently payable and the changes in those deferred taxes arising from the temporary differences.

(20) *Vulnerability Due to Certain Concentrations* — SHP is subject to substantial federal and state government regulation, including licensing and other requirements relating to the offering of SHP's existing products in new markets and offerings of new products, both of which may restrict SHP's ability to expand its business. SHP had one customer that accounted for more than 10% of premiums for the years ended December 31, 2013 and 2012.

(21) *Recently Issued Accounting Standard* — In November 2011, the NAIC adopted SSAP No. 101, *Income Taxes — A Replacement of SSAP No. 10R and SSAP No. 10* ("SSAP No. 101"), effective for 2012 interim and annual financial statements and beyond. The new standard includes revised guidance for tax contingencies; nonelective deferred tax asset admissibility test along with significant modifications to the deferred tax asset admissibility test; and disclosure modifications. A change resulting from the adoption of this revised statement shall be accounted for prospectively.

In March 2011, the NAIC revised SSAP No. 100, *Fair Value Measurements*, effective January 2012. The revisions require additional disclosures of the fair value hierarchy, as well as the method used to obtain the fair value measurement.

(22) *Reclassifications* — Certain 2012 amounts in the accompanying statutory-basis financial statements have been reclassified to conform to the 2013 presentation. Specifically, certain claims expenses have been reclassified to better align with the types of claims. These reclassifications had no effect on net income or total capital and surplus as previously reported in the statutory-basis financial statements.

2. ACCOUNTING CHANGES AND CORRECTIONS OF ERRORS

SHP did not detect any errors in reporting that would require a correction of an error to be recorded during the years ending December 31, 2013 and 2012.

As a result of the adoption of SSAP No. 101, SHP recalculated the nonadmitted deferred tax asset balance as of December 31, 2011, in accordance with SSAP No. 101. This resulted in an increase to the net deferred tax asset of $370,000 and a corresponding decrease of $370,000 to the nonadmitted deferred tax asset balance. There was no impact related to the change in guidance related to tax contingencies. The cumulative effect of this change in accounting principle was recorded by SHP in accordance with SSAP No. 3, *Accounting Changes and Corrections of Errors*, and is reflected as an increase to unassigned funds in the accompanying statutory-basis financial statements as of January 1, 2012.

3. BUSINESS COMBINATIONS AND GOODWILL

A. Statutory Purchase Method

SHP was a party to a business combination during the year ended December 31, 2013, with SHAHP. This transaction was accounted for as a statutory purchase, in accordance with *SSAP No. 68, Business Combinations and Goodwill,* due to the parent-subsidiary relationship that exists between SHP and SHAHP. As such, the value of the transaction equaled the sum of (a) any cash payment, (b) the fair value of other assets distributed, (c) the fair value of any liabilities assumed, and (d) any direct costs of acquisition. There was no cash payment and no acquisition costs associated with the purchase. Finally, no goodwill was recorded.

B. Statutory Merger

SHP was not a party to a statutory merger during the years ended December 31, 2013 and 2012.

C. Assumption Reinsurance

SHP did not participate in assumption reinsurance.

D. Impairment Loss

SHP did not recognize an impairment loss on any of the transactions described above.

4. DISCONTINUED OPERATIONS

SHP did not discontinue any operations during the years ended December 31, 2013 and 2012.

5. INVESTMENTS AND INVESTED ASSETS

Bonds and Short-Term Investments — The amortized cost, gross unrealized gains, gross unrealized losses, and estimated fair value of bonds and short-term investments as of December 31, 2013, excluding cash of $5,471,673, and as of December 31, 2012, excluding cash of $6,608,149, were as follows:

	Amortized Cost	Gross Unrealized Gains	Gross Unrealized Losses < 1 Year	Gross Unrealized Losses > 1 Year	Estimated Fair Value
As of December 31, 2013:					
U.S. government bonds	$10,177,547	$ 378,444	$ (51,650)	$ (14)	$10,504,327
U.S. state bonds	854,475	15,644			870,119
U.S. political subdivisions of state bonds	213,872	1,593	(1,731)		213,734
U.S. special revenue and special assessment bonds	184,386		(3,072)		181,314
Industrial and miscellaneous bonds, including foreign	17,206,386	237,447	(42,272)	(83,689)	17,317,872
Mortgage-backed securities	7,341,649	107,141	(25,936)	(35,098)	7,387,756
Preferred stocks	828,239				828,239
Short-term investments	2,577,793	70	(64)		2,577,799
	$39,384,347	$ 740,339	$(124,725)	$(118,801)	$39,881,160
Investment in insurance subsidiary	$ 1,232,509	$ -	$ -	$ -	$ 1,232,509
As of December 31, 2012:					
U.S. government bonds	$ 5,771,660	$ 766,541	$ (278)	$ -	$ 6,537,923
U.S. state bonds	854,984	70,412			925,396
U.S. political subdivisions of state bonds	100,000	5,419			105,419
U.S. special revenue and special assessment bonds	185,311	4,489			189,800
Industrial and miscellaneous bonds, including foreign	17,255,465	473,161	(24,363)	(5,913)	17,698,350
Mortgage-backed securities	10,272,961	279,359	(35,109)		10,517,211
Short-term investments	4,407,117	97	(1,622)		4,405,592
	$38,847,498	$1,599,478	$ (61,372)	$ (5,913)	$40,379,691

The amortized cost and estimated fair value of investments as of December 31, 2013, by contractual maturity, were as follows:

Years to Maturity	Amortized Cost	Gross Unrealized Gains	Gross Unrealized Losses < 1 Year	Gross Unrealized Losses > 1 Year	Estimated Fair Value
Less than one year	$ 5,284,505	$ 18,188	$ (65)	$ -	$ 5,302,628
One to five years	17,522,711	408,411	(18,635)	(14)	17,912,473
Five to ten years	5,963,358	72,274	(42,757)	(83,688)	5,909,187
Ten to twenty years	4,147,480	155,581	(32,591)	(1,215)	4,269,255
Over twenty years	5,638,054	85,885	(30,677)	(33,884)	5,659,378
	$38,556,108	$740,339	$(124,725)	$(118,801)	$39,052,921

The tables above show the gross unrealized losses and fair value of investments with unrealized losses that are not deemed to be other-than-temporarily impaired, aggregated by investment type and length of time that individual securities have been in a continuous unrealized loss position.

Proceeds from bond sales and maturities were $8,265,955 and $13,864,753 for 2013 and 2012, respectively, realized gains were $3,644 and $77,088 for 2013 and 2012, respectively, and realized losses were $0 and $2,467 for 2013 and 2012, respectively.

The unrealized losses on investments in U.S. government bonds and industrial and miscellaneous bonds at December 31, 2013 and 2012, were mainly caused by interest rate increases and not by unfavorable changes in credit ratings associated with these securities. SHP evaluates impairment at each reporting period for each of the securities, whereby the fair value of the investment is less than its amortized cost. The contractual cash flows of the U.S. government bonds are guaranteed either by the U.S. government or an agency of the U.S. government. It is expected that the securities would not be settled at a price less than the amortized cost of the investment, and SHP does not intend to sell the investment until the unrealized loss is fully recovered. SHP evaluated the credit ratings of the industrial and miscellaneous bonds, noting neither a significant deterioration since purchase nor other factors, which may indicate an other-than-temporary impairment, such as the length of time and extent to which fair value has been less than cost, the financial condition and near-term prospects of the issuer as well as specific events or circumstances that may influence the operations of the issuer, and SHP's ability and intent to hold the investments for a sufficient time in order to enable recovery of SHP's cost.

The investment in insurance subsidiary represents the total capital and surplus of SHAHP. Summarized financial information for SHAHP as of December 31, 2013 is as follows:

	2013
Total assets	$2,003,410
Total liabilities	770,901
Total capital and surplus	1,232,509
Total revenue	3,833,853
Net loss	(358,002)

There are no nonadmitted assets as a result of bonds that were in or near default as of December 31, 2013 and 2012.

Investments are reported in accordance with the NAIC Valuations of Securities manual prepared by the NAIC Securities Valuation Office.

A. Mortgage Loan, Including Mezzanine Real Estate Loans

SHP did not have any mortgage loans during the years ended December 31, 2013 or 2012.

B. Debt Restructuring

SHP did not have any debt during the years ended December 31, 2013 or 2012.

C. Reverse Mortgages

SHP did not have any reverse mortgages during the years ended December 31, 2013 or 2012.

D. Loan-Backed Securities

SHP had mortgage-backed securities of $7,341,649 and $10,272,961 during the years ended December 31, 2013 and 2012, respectively.

E. Repurchase Agreements and/or Securities Lending Transactions

SHP did not participate in any repurchase agreements or securities lending transactions during the years ended December 31, 2013 or 2012.

F. Real Estate

SHP does not own any real estate.

G. Investments in Low-Income Housing Tax Credits

SHP did not have any investments in low-income housing during the years ended December 31, 2013 or 2012.

6. JOINT VENTURES, PARTNERSHIPS, AND LIMITED LIABILITY COMPANIES

A. Joint Ventures

SHP has no investments in joint ventures, partnerships, or limited liability companies.

B. Impaired Investment Income

SHP did not have any impaired investment income during the years ended December 31, 2013 or 2012.

7. INVESTMENT INCOME

SHP has admitted all investment income due and accrued in the statutory-basis statements of admitted assets, liabilities, and capital and surplus.

8. DERIVATIVE INSTRUMENTS

SHP has no derivative instruments.

9. INCOME TAXES

A.-B. Deferred Tax Assets and Liabilities

(1) The components of the net deferred tax assets and deferred tax liabilities at December 31, 2013 and 2012, all of which are ordinary, and the changes in the net admitted DTAs for the year ended December 31, 2013, are as follows:

The 2013 and 2012 information is computed under SSAP No. 101.

	December 31, 2013		
	Ordinary	Capital	Total
Gross deferred tax assets	$1,732,000	$ -	$1,732,000
Statutory valuation allowance adjustments			-
Adjusted gross deferred tax assets	1,732,000	-	1,732,000
Deferred tax assets nonadmitted	240,000		240,000
Subtotal net admitted deferred tax assets	1,492,000	-	1,492,000
Deferred tax liabilities	45,000		45,000
Net admitted deferred tax assets	$1,447,000	$ -	$1,447,000

	December 31, 2012		
	Ordinary	Capital	Total
Gross deferred tax assets	$1,289,000	$ -	$1,289,000
Statutory valuation allowance adjustments			-
Adjusted gross deferred tax assets	1,289,000	-	1,289,000
Deferred tax assets nonadmitted	249,000		249,000
Subtotal net admitted deferred tax assets	1,040,000	-	1,040,000
Deferred tax liabilities	43,000		43,000
Net admitted deferred tax assets	$ 997,000	$ -	$ 997,000

	Change		
	Ordinary	Capital	Total
Gross deferred tax assets	$ 443,000	$ -	$ 443,000
Statutory valuation allowance adjustments			
Adjusted gross deferred tax assets	443,000	-	443,000
Deferred tax assets nonadmitted	(9,000)		(9,000)
Subtotal net admitted deferred tax assets	452,000	-	452,000
Deferred tax liabilities	2,000		2,000
Net admitted deferred tax assets	$ 450,000	$ -	$ 450,000

(2) Admission Calculation Components SSAP No 101:

	December 31, 2013		
	Ordinary	Capital	Total
Federal income taxes paid in prior years recoverable through loss carrybacks	$ 1,445,000	$ -	$ 1,445,000
Adjusted gross deferred tax assets expected to be realized after application of the threshold limitation	47,000		47,000
Adjusted gross deferred tax assets expected to be realized following the balance sheet date	128,000		128,000
Adjusted gross deferred tax assets allowed per limitation threshold	47,000		47,000
Adjusted gross deferred tax assets (excluding the amount of deferred tax assets above) offset by gross deferred tax liabilities			
Deferred tax assets admitted as the result of application of SSAP No. 101	1,492,000		1,492,000

	December 31, 2012		
	Ordinary	Capital	Total
Federal income taxes paid in prior years recoverable through loss carrybacks	$ 1,014,000	$ -	$ 1,014,000
Adjusted gross deferred tax assets expected to be realized after application of the threshold limitation	26,000		26,000
Adjusted gross deferred tax assets expected to be realized following the balance sheet date	26,000		26,000
Adjusted gross deferred tax assets allowed per limitation threshold			4,020,000
Adjusted gross deferred tax assets (excluding the amount of deferred tax assets above) offset by gross deferred tax liabilities			
Deferred tax assets admitted as the result of application of SSAP No. 101	1,040,000		1,040,000

	Change		
	Ordinary	Capital	Total
Federal income taxes paid in prior years recoverable through loss carrybacks	$ 431,000	$ -	$ 431,000
Adjusted gross deferred tax assets expected to be realized after application of the threshold limitation	21,000		21,000
Adjusted gross deferred tax assets expected to be realized following the balance sheet date	102,000		102,000
Adjusted gross deferred tax assets allowed per limitation threshold	47,000		47,000
Adjusted gross deferred tax assets (excluding the amount of deferred tax assets above) offset by gross deferred tax liabilities			
Deferred tax assets admitted as the result of application of SSAP No. 101	452,000		452,000

SSAP No. 101 is effective for 2012 interim and annual financial statements and beyond. The new standard includes revised guidance for tax contingencies, a nonelective DTA admissibility test along with significant modifications to the DTAs admissibility test, and disclosure modifications. A change resulting from this adoption would be accounted for prospectively and reflected as a change in accounting principle in accordance with SSAP No. 3. The adoption of this pronouncement resulted in a change of accounting principle as disclosed previously in Note 2.

(3) The ratio and amount of adjusted capital and surplus used to determine the applicable recovery period as of December 31, 2013 and 2012, are as follows:

Ratio percentage used to determine recovery period and threshold limitation amount	15.000 %	15.000 %
Amount of adjusted capital and surplus used to determine recovery period and threshold limitation above	$25,992,972	$26,790,937

(4) There was no impact to deferred tax assets as a result of tax planning strategies.

C. Significant components of current income taxes incurred consist of the following major categories:

(1) Current Federal Income Tax

	Year Ended December 31		
	2013	2012	Change
Current income tax:			
Federal	$ 179,000	$1,371,000	$(1,192,000)
Foreign			
Subtotal	179,000	1,371,000	(1,192,000)
Federal income tax on net capital gains	1,000	25,000	(24,000)
Federal and foreign income taxes incurred	$ 180,000	$1,396,000	$(1,216,000)

(2) Deferred Tax Assets

	Year Ended December 31		
	2013	2012	Change
Ordinary:			
Discounting of unpaid losses	$ 65,000	$ 66,000	$ (1,000)
Unearned premium reserve	62,000	92,000	(30,000)
Policyholder reserves	297,000	253,000	44,000
Fixed assets	591,000	275,000	316,000
Compensation and benefits accrual	104,000	86,000	18,000
Receivables — nonadmitted	559,000	413,000	146,000
Other (including items <5% of total tax ordinary assets)	54,000	104,000	(50,000)
Subtotal	1,732,000	1,289,000	443,000
Nonadmitted	240,000	249,000	(9,000)
Admitted ordinary deferred tax assets	$1,492,000	$1,040,000	$452,000

(3) Deferred Tax Liabilities

	Year Ended December 31		
	2013	2012	Change
Ordinary — other Capital	$45,000	$43,000	$2,000
Deferred tax liabilities	$45,000	$43,000	$2,000

(4) Net Deferred Tax Assets

	Year Ended December 31		
	2013	2012	Change
Net deferred tax assets	$ 1,447,000	$997,000	$450,000

The Company assessed the potential realization of the gross DTA, and as a result, no statutory valuation allowance was required and no allowance was established as of December 31, 2013 and 2012.

The change in net deferred income taxes is comprised of the following (this analysis is exclusive of any nonadmission of DTA under the admissibility test calculated in accordance with SSAP101 paragraph 11.

	Year Ended December 31		
	2013	2012	Change
Total deferred tax assets	$ 1,732,000	$ 1,289,000	$ 443,000
Total deferred tax liabilities	45,000	43,000	2,000
Net deferred tax assets	$ 1,687,000	$ 1,246,000	$ 441,000

D. Among the more significant book to tax adjustments were the following:

The provision for federal income taxes incurred was different from that which would be obtained by applying the statutory federal income tax rate of 34% to net income before federal income taxes. The significant items causing this difference for 2013 and 2012 were as follows:

	2013	Effective Tax Rate
Tax provision computed at statutory rate	$ 666,895	34.0 %
Meals and entertainment	3,569	0.2
Change in nonadmitted assets	(967,112)	(49.3)
Other	35,648	0.2
Total	$ (261,000)	(14.9)%
Federal and foreign income taxes incurred	180,000	9.2 %
Change in net deferred income taxes	(441,000)	(22.5)
Total statutory income taxes	$ (261,000)	(13.3)%

	2012	Effective Tax Rate
Tax provision computed at statutory rate	$1,442,955	34.0 %
Meals and entertainment	3,566	0.1
Change in deferred income taxes — net	(92,000)	(2.2)
Other	41,479	1.0
Total	$1,396,000	32.9 %

E. Additional Disclosures:

(1) *Carryforward Period* — At December 31, 2013, SHP had no net operating loss carryforwards.

(2) *Income Taxes Available for Recoupment* — Current federal income taxes payable of approximately $0 and $1,358,000 as of December 31, 2013 and 2012, respectively, are included in the accompanying statutory-basis statements of admitted assets, liabilities, and capital and surplus. Federal income taxes paid was $2,534,000 and $60,000 in 2013 and 2012, respectively.

Federal income tax incurred that is available for future recoupment in the event of future losses is $149,000 and $1,396,000 for 2013 and 2012, respectively.

F. Tax Return Consolidation

SHP does not consolidate tax returns with any other entity or entities.

G. Tax Loss Contingencies

SHP has no tax loss contingencies as of December 31, 2013 and 2012.

10. INFORMATION CONCERNING PARENT, SUBSIDIARIES, AFFILIATES, AND OTHER RELATED PARTIES

A-C. Related-Party Transactions

Administrative services, including claims processing, marketing, quality assurance, financial accounting, insurance, legal, payroll, and data processing, are provided by SHP to Sanford Health Plan of Minnesota (SHPMN), an affiliated entity. Expenses are allocated quarterly to SHPMN based on a percentage of overall membership and are reported as a reduction to administration expenses and CAE as applicable. Total allocated expenses were $116,450 and $126,169 for 2013 and 2012, respectively.

SH rents office space from SHP on a month-to-month basis. Total rental income was $16,101 and $21,468 for 2013 and 2012, respectively.

SH provides certain corporate services for SHP, and SHP reimburses SH for accounts payable expenses processed for SHP on a monthly basis. SHP pays SH for a monthly allocation of corporate services relating to compliance services, information technology services, and provider credentialing based on a percentage of total expenses. Other corporate services provided by SH include printing and health services support. Total corporate services and accounts payable reimbursements paid to SH for such expenses for 2013 and 2012 were $16,761,214 and $15,398,822, respectively, and are reported within CAE and GAE on the statutory-basis financial statements.

SHP provides third-party administrative services to Sanford through an Administrative Services Only (ASO) Agreement. SH reimburses SHP monthly for these services based on a per member per month basis. Payments received from SH for these services totaled $11,392,538 and $10,514,875 for 2013 and 2012, respectively, and are a reduction to general and administrative expense in the statutory-basis statements of revenues and expenses and capital and surplus account. SSAP 47.6 states that when a TPA acts in an administrative function only, related revenue should be deducted from general expense.

Payments made to SH for SHP's members' medical claims totaled $61,791,408 and $53,588,377 during 2013 and 2012, respectively, and are reported within hospital and medical expenses as applicable.

SHP provides screening services for SH. SH reimburses SHP monthly for these services. Payments received for screening services from SH totaled $6,650 and $397,057 for 2013 and 2012, respectively, and are reported within fee-for-service revenues on the statutory-basis statements of revenues and expenses and capital and surplus account.

SHP returned capital of $1,000,000 and $600,000 to SH during 2013 and 2012, respectively. SHP contributed capital of $1,000,000 to SHAHP during the year ended December 31, 2013.

SHP believes that its transactions with affiliates are reasonable and appropriate; however, operations of SHP may not be indicative of those that would have occurred if it had operated as an independent company.

D. Amounts Due from or to Related Parties

As of December 31, 2013 and 2012, SHP reported $1,480,650 and $1,392,614, respectively, as amounts due to SH, and $27,497 and $18,444, respectively, due from SHPMN.

E. Guarantees

SHP does not have any guarantees with related parties.

F. Material Management, Service Contracts, or Cost-Sharing Arrangements

Other than those discussed above, SHP does not have any material management, service contracts, or cost-sharing arrangements with related parties.

G. Control Relationship

The sole member of SHP is SH, and SH is a wholly owned subsidiary of Sanford, a fully integrated health care organization providing clinical care to patients, research, and health care coverage. As disclosed in Note 1, SHP took over control of SHAHP, which is now a wholly owned subsidiary of SHP.

H. Reduction of Asset Value of Securities

SHP did not reduce the asset value of any securities during the years ended December 31, 2013 or 2012.

I. Investment in Subsidiary, Controlled, or Affiliated (SCA) Entities that Exceeds 10% of Admitted Assets

Investments in SCA do not exceed 10% of admitted assets.

J. SCA Impaired Assets

SHP does not have any SCA impaired assets.

K. Investment in Foreign Insurance Subsidiary

SHP does not have any foreign insurance subsidiaries.

L. Investment in Downstream Noninsurance Holding Company

SHP does not have any investments in downstream noninsurance holding companies.

11. DEBT

A. Items Related to Debt

SHP had no debt outstanding during 2013 and 2012.

B. Federal Home Loan Bank Agreements

SHP had no Federal Home Loan Bank agreements during 2013 and 2012.

12. RETIREMENT PLANS, DEFERRED COMPENSATION, POSTEMPLOYMENT BENEFITS AND COMPENSATED ABSENCES, AND OTHER POSTRETIREMENT BENEFIT PLANS

A. Defined Benefit Plan

SHP does not have a defined benefit plan or other postretirement benefit plan.

B. Defined Contribution Plan

SH has retirement plans for qualified SHP employees. The benefits are based on the plans' provisions. SH makes contributions to the plans of approximately 2% of estimated salary costs. Expense allocated to SHP under the plans was $245,039 and $184,484 for 2013 and 2012, respectively. These balances are recorded in CAE and GAE during the years ended December 31, 2013 and 2012.

C. Multiemployer Plans

SHP does not participate in a multiemployer plan.

D. Consolidated/Holding Company Plans

SHP does not participate in a consolidated or holding company plan.

E. Postemployment Benefits and Compensated Absences

SHP does not provide postemployment benefits or compensated absences.

F. Impact of Medicare Modernization Act on Postretirement Benefits (INT 04-17)

There has been no impact of the Medicare Modernization Act on SHP.

13. CAPITAL AND SURPLUS, SHAREHOLDERS' DIVIDEND RESTRICTIONS, AND QUASI-REORGANIZATIONS

(1) *Capital Stock* — SHP did not have any capital stock outstanding during the years ended December 31, 2013 or 2012.

(2) *Preferred Stock* — SHP did not have any preferred stock outstanding during the years ended December 31, 2013 or 2012.

(3) *Dividend Restrictions* — There were no dividend restrictions applicable during the years ended December 31, 2013 or 2012.

(4) *Dividends Paid* — SHP paid dividends of $1,000,000 and $600,000 during the years ended December 31, 2013 and 2012, respectively.

(5) *Dividends to Stockholders* — SHP did not pay any dividends during the years ended December 31, 2013 or 2012.

(6) *Restrictions on Unassigned Funds* — There were no restrictions on unassigned funds during the years ended December 31, 2013 or 2012.

(7) *Advances to Surplus* — There were no advances to surplus during the years ended December 31, 2013 or 2012.

(8) *Stock Held for Special Purchases* — There was no stock held for special purchases for the years ended December 31, 2013 or 2012.

(9) *Changes in Special Surplus* — There were no changes in special surplus for the years ended December 31, 2013 or 2012.

(10) *Unassigned Surplus Funds* — The portion of unassigned funds deficit represented by nonadmitted asset values was $5,164,584 and $3,028,145 as of December 31, 2013 and 2012, respectively. The increase in 2013 is related to the nonadmitted portion of property and equipment.

(11) *Surplus Notes* — There were no surplus notes during the years ended December 31, 2013 or 2012.

(12) *Restatement Impact of Quasi-Reorganization* — SHP did not participate in a quasi-reorganization during the years ended December 31, 2013 or 2012.

(13) *Effective Date of Quasi-Reorganization* — SHP did not participate in a quasi-reorganization during the years ended December 31, 2013 or 2012.

14. CONTINGENCIES

A. Contingent Commitments

SHP does not have any contingent commitments as of December 31, 2013 or 2012.

B. Assessments

SHP does not have any assessments as of December 31, 2013 or 2012.

C. Gain Contingencies

SHP does not have any gain contingencies as of December 31, 2013 or 2012.

D. Claims Related Extra Contractual Obligation and Bad Faith Losses Stemming from Lawsuits

SHP does not have any material lawsuits resulting in extra contractual obligations or bad faith losses.

E. All Other Contingencies

SHP is involved in legal actions, which arise in the ordinary course of its business. Although the outcomes of any such legal actions cannot be predicted, in the opinion of management, the resolution of any currently pending or threatened actions will not have a material adverse effect upon the statutory-basis statements of revenues and expenses. SHP believes there are no assets that it considers impaired.

During the first quarter of 2010, the Patient Protection and Affordable Care Act and a reconciliation measure, the Health Care and Education Reconciliation Act of 2010 (collectively known as "Health Reform Legislation"), were signed into law, and after being challenged, were substantially upheld in a U.S. Supreme Court decision in the second quarter of 2012. The Health Reform Legislation

expands access to coverage and modifies aspects of the commercial insurance market, as well as the Medicaid and Medicare programs, Children's Health Insurance Program (CHIP), and other aspects of the health care system. Certain provisions of the Health Reform Legislation have already taken effect, and other provisions become effective at various dates over the next several years. The Department of Health and Human Services (HHS), the Department of Labor (DOL), and the Treasury Department have issued regulations or proposed regulations on a number of aspects of Health Reform Legislation, but final rules and interim guidance on the other key aspects of the legislation remain pending.

The Health Reform Legislation and the related federal and state regulations will impact how the Company does business and could restrict revenue and enrollment growth in certain products and market segments, restrict premium growth rates for certain products and market segments, increase the Company's medical and administrative costs, expose the Company to an increased risk of liability (including increasing the Company's liability in federal and state courts for coverage determinations and contract interpretation), or put the Company at risk for loss of business. In addition, the Company's statutory-basis results of operations, financial condition, and cash flows could be materially adversely affected by such changes. The Health Reform Legislation may create new or expand existing opportunities for business growth, but due to its complexity, the impact of the Health Reform Legislation remains difficult to predict and is not yet fully known.

On January 1, 2014, the SHP will be subject to an annual fee under section 9010 of the Affordable Care Act (ACA). This annual fee will be allocated to individual health insurers based on the ratio of the amount of the entity's net premiums written during the preceding calendar year to the amount of the health insurance for any U.S. health risk that is written during the preceding calendar year. A health insurance entity's portion of the annual fee becomes payable once the entity provides health insurance for a U.S. health risk for each calendar year beginning on or after January 1, 2014. As of December 31, 2013, SHP has written health insurance subject to the ACA assessment, expects to conduct health insurance business in 2014, and estimates its portion of the annual health insurance industry fee payable on September 30, 2014, to be $2,484,000. This assessment is expected to impact risk-based capital by $0.

15. LEASES

A. Lessee Operating Lease

SHP has certain rental commitments. Rental expense for 2013 and 2012 was approximately $745,927 and $792,624, respectively. These balances are recorded in CAE.

SHP entered into a lease agreement that commenced on November 1, 2007, and a sublease that commenced on November 1, 2011. These commitments have renewal options extending through the year 2017 and are subject to adjustments in future periods. The future rental commitments for this lease are included in the table below.

At December 31, 2013, the minimum aggregate rental commitments are as follows:

Years Ending December 31	Operating Leases
2014	$ 813,096
2015	813,096
2016	799,846
2017	643,906
Total	$3,069,944

SHP is not involved in any material sales — leaseback transactions.

B. Lessor Leases:

(1) *Operating Leases* — SHP entered into a sublease agreement with a third party that commenced on November 1, 2007. This commitment has renewal options extending through the year 2017 and is subject to adjustments in future periods. Rental income for 2013 and 2012 was $148,835 and $141,270, respectively. These balances are recorded in net investment gains on the statutory-basis statements of revenues and expenses.

(2) Future minimum lease payment receivables under noncancelable leasing arrangements as of December 31, 2013, are as follows:

Years Ending December 31	Operating Leases
2014	$ 143,051
2015	143,051
2016	143,051
2017	125,562
Total	$ 554,715

(3) *Leveraged Leases* — SHP is not a lessor to any leveraged leases.

16. INFORMATION ABOUT FINANCIAL INSTRUMENTS WITH OFF-BALANCE-SHEET RISK AND FINANCIAL INSTRUMENTS WITH CONCENTRATIONS OF CREDIT RISK

SHP does not hold any financial instruments with off-balance-sheet risk or concentrations of credit risk.

17. SALE, TRANSFER, AND SERVICING OF FINANCIAL ASSETS AND EXTINGUISHMENTS OF LIABILITIES

A. Transfers of Receivables

SHP did not transfer any receivables during the years ended December 31, 2013 or 2012.

B. Transfer and Service of Financial Assets

SHP did not transfer any financial assets during the years ended December 31, 2013 or 2012.

C. Wash Sales

SHP did not participate in any activity that would be considered a wash sale during the years ended December 31, 2013 or 2012.

18. GAIN OR LOSS TO THE REPORTING ENTITY FROM UNINSURED PLANS AND THE UNINSURED PORTION OF PARTIALLY INSURED PLANS

A. ASO (Administrative Services Only) Plans

The gains from operations from ASO uninsured plans and the uninsured portion of partially insured plans during 2013 and 2012 were as follows:

	2013		
	ASO Uninsured Plans	Uninsured Portion of Partially Insured Plans	Total ASO
Net reimbursement for administrative expenses (including administrative fees) in excess of actual expenses	$ 3,249,954	$ -	$ 3,249,954
Total net other income or expenses (including interest paid to or received from plans)			-
Net gain (loss) from operations	3,249,954		3,249,954
Total claim payment volume	175,127,195		175,127,195

	2012		
	ASO Uninsured Plans	Uninsured Portion of Partially Insured Plans	Total ASO
Net reimbursement for administrative expenses (including administrative fees) in excess of actual expenses	$ 3,343,640	$ -	$ 3,343,640
Total net other income or expenses (including interest paid to or received from plans)			-
Net gain (loss) from operations	3,343,640		3,343,640
Total claim payment volume	154,743,100		154,743,100

B. ASC (Administrative Services Contract) Plans

The loss from operations and claim payment volume for Administrative Services Contract (ASC) uninsured plans for 2013 and 2012 were as follows:

	2013		
	ASC Uninsured Plans	Uninsured Portion of Partially Insured Plans	Total ASC
Gross reimbursement for medical cost incurred	$ -	$ 221,391	$ 221,391
Gross administrative fees accrued			-
Other income or expenses (including interest paid to or received from plans)			-
Gross expenses incurred (claims and administrative)		345,201	345,201
Total net gain (loss) from operations		(123,810)	(123,810)

	2012		
	ASC Uninsured Plans	Uninsured Portion of Partially Insured Plans	Total ASC
Gross reimbursement for medical cost incurred	$ -	$ 324,994	$ 324,994
Gross administrative fees accrued			-
Other income or expenses (including interest paid to or received from plans)			-
Gross expenses incurred (claims and administrative)		522,864	522,864
Total net gain (loss) from operations		(197,870)	(197,870)

C. Medicare or Similarly Structured Cost-Based Reimbursement Contract

SHP does not have any Medicare or similarly structured cost-based reimbursement contracts, however SHAHP, the wholly owned subsidiary of SHP, does have a Medicare Cost contract.

19. DIRECT PREMIUM WRITTEN/PRODUCED BY MANAGING GENERAL AGENTS/THIRD-PARTY ADMINISTRATORS

SHP did not have any direct premiums written or produced by managing general agents or third-party administrators.

20. FAIR VALUE MEASUREMENTS

The NAIC SAP defines fair value, establishes a framework for measuring fair value, and outlines the disclosure requirements related to fair value measurements. The fair value hierarchy is as follows:

Level 1 — Quoted (unadjusted) prices for identical assets in active markets

Level 2 — Other observable inputs, either directly or indirectly, including:

- Quoted prices for similar assets in active markets
- Quoted prices for identical or similar assets in nonactive markets (few transactions, limited information, noncurrent prices, high variability over time, etc.)
- Inputs other than quoted prices that are observable for the asset (interest rates, yield curves, volatilities, default rates, etc.)
- Inputs that are derived principally from or corroborated by other observable market data

Level 3 — Unobservable inputs that cannot be corroborated by observable market data

In instances in which the inputs used to measure fair value fall into different levels of the fair value hierarchy, the fair value measurement has been determined based on the lowest level input that is significant to the fair value measurement in its entirety. SHP's assessment of the significance of a particular item to the fair value measurement in its entirety requires judgment, including the consideration of inputs specific to the asset or liability.

A. Assets and Liabilities Measured at Fair Value

SHP does not have any financial assets that are measured and reported at fair value on the statutory-basis statements of admitted assets, liabilities, and capital and surplus at December 31, 2013 and 2012.

B. Other Fair Value Disclosure

The following table presents information about SHP's financial assets disclosed at fair value at December 31, 2013 and 2012.

Description for Each Class of Asset or Liability	December 31, 2013 (Level 1)	(Level 2)	(Level 3)	Total
Assets at fair value:				
U.S. government bonds	$ -	$ 10,504,327	$ -	$ 10,504,327
U.S. state bonds		870,119		870,119
U.S. political subdivisions of state bonds		213,734		213,734
U.S. special revenue and special assessment bonds		181,314		181,314
Industrial and miscellaneous bonds, including foreign		17,317,872		17,317,872
Mortgage-backed securities		7,387,756		7,387,756
Preferred stocks	828,239			828,239
Short-term investments		2,577,799		2,577,799
Total assets at fair value	$828,239	$ 39,052,921	$ -	$ 39,881,160

Description for Each Class of Asset or Liability	December 31, 2012 (Level 1)	(Level 2)	(Level 3)	Total
Assets at fair value:				
U.S. government bonds	$ -	$ 6,537,923	$ -	$ 6,537,923
U.S. state bonds		925,396		925,396
U.S. political subdivisions of state bonds		105,419		105,419
U.S. special revenue and special assessment bonds		189,800		189,800
Industrial and miscellaneous bonds, including foreign		17,698,350		17,698,350
Mortgage-backed securities		10,517,211		10,517,211
Short-term investments	461,669	3,943,923		4,405,592
Total assets at fair value	$461,669	$ 39,918,022	$ -	$ 40,379,691

There were no transfers between Level 1 and Level 2 during the years ended December 31, 2013 and 2012.

C. Financial Instruments for Which Fair Value Cannot be Estimated

Not applicable.

D. Not Practicable to Estimate Fair Value

Not applicable.

21. OTHER ITEMS

A. Extraordinary Items

There were no extraordinary items for SHP during the years ended December 31, 2013 or 2012.

B. Troubled Debt Restructuring — Debtors

SHP does not have troubled debt restructuring.

C. Other Disclosures

Risk-based capital (RBC) is a regulatory tool for measuring the minimum amount of capital appropriate for a managed care organization to support its overall business operations in consideration of its size and risk profile. Under the laws of South Dakota, SHP is required to maintain a minimum net worth and company action-level RBC. SHP met the net worth requirements as of December 31, 2013 and 2012.

The Company is required by the State of South Dakota to maintain a minimum regulatory deposit of $300,000. The Company is in compliance with this requirement as of December 31, 2013 and 2012, respectively.

D. Uncollectible

Not applicable.

E. Business Interruption Insurance Recoveries

Not applicable.

F. State Transferable Tax Credits

SHP did not have any state transferable tax credits as of December 31, 2013 or 2012.

G. Subprime Mortgage-Related Exposure

Not applicable.

H. Retained Assets

SHP did not have any retained assets as of December 31, 2013 or 2012.

22. SUBSEQUENT EVENTS

Type I — Recognized Subsequent Events — SHP has evaluated recognized subsequent events through February 28, 2014, which is the date these statutory-basis financial statements were available for issuance.

There were no events subsequent to December 31, 2013, that require recognition or disclosure.

Type II — Nonrecognized Subsequent Events — SHP has evaluated nonrecognized subsequent events through February 28, 2014, which is the date these statutory-basis financial statements were available for issuance.

There were no events subsequent to December 31, 2013, that require disclosure.

23. REINSURANCE

A. Ceded Reinsurance Report:

Section 1 — General Interrogatories

(1) Are any of the reinsurers, listed in Schedule S as nonaffiliated, owned in excess of 10% or controlled, either directly or indirectly, by the Company or by any representative, officer, trustee, or director of the Company?

( ) Yes (X) No

(2) Have any polices issued by the Company been reinsured with a company chartered in a country other than the United States (excluding U.S. branches of such companies) that is owned in excess of 10% or controlled directly or indirectly by an insured, a beneficiary, a creditor, or an insured or any other person not primarily engaged in the insurance business?

( ) Yes (X) No

Section 2 — Ceded Reinsurance Report — Part A

(1) Does the Company have any reinsurance agreements in effect under which the reinsurer may unilaterally cancel any reinsurance for reasons other than for nonpayment of premium or other similar credit?

( ) Yes (X) No

(2) Does the reporting entity have any reinsurance agreements in effect such that the amount of losses paid or accrued through the statement date may result in a payment to the reinsurer of amounts that, in aggregate and allowing for offset of mutual credits from other reinsurance agreements with the same reinsurer, exceed the total direct premium collected under the reinsured policies?

( ) Yes (X) No

Section 3 — Ceded Reinsurance Report — Part B

(1) What is the estimated amount of the aggregate reduction in surplus (for agreements other than those under which the reinsurer may unilaterally cancel for reasons other than for nonpayment of payment or other similar credits that are reflected in Section 2 above) of termination of all reinsurance agreements, by either party, as of the date of this statement? Where necessary, the Company may consider the current or anticipated experience of the business reinsured in making this estimate.

$0

(2) Have any new agreements been executed or existing agreements amended, since January 1 of the year of this statement, to include policies or contracts that were in force or which had existing reserves established by the Company as of the effective date of the agreement?

( ) Yes (X) No

B. Uncollectible Reinsurance

During 2013 and 2012, there were no uncollectible reinsurance recoverables.

C. Commutation of Ceded Reinsurance

SHP does not have any commutation of ceded reinsurance.

D. Unsecured Reinsurance Recoverables

SHP does not have an unsecured aggregate reinsurance recovery receivable with any individual reinsurers, authorized or unauthorized, that exceeds 3% of SHP's policyholder surplus.

E. Reinsurance Recoverable in Dispute

SHP does not have a reinsurance recoverable balance that is being disputed by any individual reinsurer.

F. Retroactive Reinsurance

SHP did not have a retroactive reinsurance agreement in 2013 or 2012.

24. RETROSPECTIVELY RATED CONTRACTS AND CONTRACTS SUBJECT TO REDETERMINATION

A. Method Used to Estimate Retrospective Premium Adjustments

Not applicable.

B. Accrued Retrospective Premium

Not applicable.

C. Amount of Net Premiums

Not applicable.

D. Medical Loss Ratio Rebates

Not applicable.

25. CHANGE IN INCURRED CLAIMS AND UNPAID CAE

Reserves for incurred claims and unpaid CAE attributable to insured events of prior years have decreased by $331,133, from $13,757,798 in 2012 to $13,426,665 in 2013, as a result of a reestimation of unpaid claims and CAE principally on the commercial line of insurance. This decrease is generally the result of ongoing analysis of recent loss development trends. Original estimates are increased or decreased as additional information becomes known regarding individual claims.

Claims activity, net of reinsurance and aggregate health policy reserves in 2013 and 2012, was as follows:

	2013		
	Current Year Incurred Claims	Prior Years Incurred Claims	Total
Beginning of year claim reserve	$ -	$ (12,907,798)	$ (12,907,798)
Paid claims	113,688,899	12,321,277	126,010,176
End of year claim reserve	16,511,961	255,388	16,767,349
Total incurred claims	$ 130,200,860	$ (331,133)	$ 129,869,727

	2012		
	Current Year Incurred Claims	Prior Years Incurred Claims	Total
Beginning of year claim reserve	$ -	$ (11,172,146)	$ (11,172,146)
Paid claims	111,023,304	11,140,080	122,163,384
End of year claim reserve	12,902,210	5,588	12,907,798
Total incurred claims	$ 123,925,514	$ (26,478)	$ 123,899,036

SHP incurred CAE of $9,192,821 and $8,250,046 in 2013 and 2012, respectively. The paid CAE, incurred CAE, and the balance in the unpaid claim adjustment expenses reserve for 2013 and 2012 are as follows:

	2013	2012
Total CAE incurred	$9,192,821	$8,250,046
Less current year unpaid CAE	(1,118,000)	(850,000)
Add prior year unpaid CAE	850,000	775,000
Total CAE paid	$8,924,821	$8,175,046

26. INTERCOMPANY POOLING ARRANGEMENTS

SHP did not have any intercompany pooling arrangements in 2013 or 2012.

27. STRUCTURED SETTLEMENTS

Not applicable to health entities.

28. HEALTH CARE RECEIVABLES

Pharmaceutical Rebates Receivable — Pharmaceutical rebates receivable are recorded when reasonably estimated or billed by the unaffiliated pharmaceutical benefit manager in accordance with pharmaceutical rebate contract provisions. Information used to support rebates billed to the manufacturer is based on utilization information gathered by the pharmaceutical benefit manager and adjusted for significant changes in pharmaceutical contract provisions. SHP has excluded receivables that do not meet the admissibility criteria from the statutory-basis statements of admitted assets, liabilities, and capital and surplus.

The quarterly collection history of pharmacy rebates for the past three years is summarized in the table below.

Quarter	Estimated Pharmacy Rebates as Reported on Financial Statements	Pharmacy Rebates as Billed or Otherwise Confirmed	Actual Rebates Received within 90 Days of Billing	Actual Rebates Received within 91 to 180 Days of Billing	Actual Rebates Received More than 180 Days After Billing
December 31, 2013	$ -	$ -	$ -	$ -	$ -
September 30, 2013		733,554			
June 30, 2013		709,814		686,829	
March 31, 2013		709,847		732,652	
December 31, 2012		606,204		638,670	
September 30, 2012		613,555		664,542	
June 30, 2012	578,475	580,885		525,510	
March 31, 2012	527,756	518,158		525,109	
December 31, 2011	428,629	425,942		386,379	
September 30, 2011	438,787	425,135		415,562	
June 30, 2011		405,857		411,653	
March 31, 2011		384,198		381,119	

SHP did not admit health care receivables as of December 31, 2013 and 2012, respectively.

Risk Sharing Receivables — Not applicable.

29. PARTICIPATING POLICIES

SHP did not have any participating policies in 2013 or 2012.

30. PREMIUM DEFICIENCY RESERVES

SHP recorded a premium deficiency reserve of $873,000 and $743,000 based on an evaluation as of December 31, 2013 and 2012, respectively. Premium deficiency reserves are included in aggregate health policy reserves in the statutory-basis statements of admitted assets, liabilities, and capital and surplus. A discount rate of 3% was used in this analysis at December 31, 2013 and 2012.

Liability carried for premium deficiency reserves	$ 873,000
Date of the most recent evaluation of this liability	December 31, 2013
Was anticipated investment income utilized in the calculation?	Yes [X] No [ ]

31. ANTICIPATED SALVAGE AND SUBROGATION

Due to the type of business being written, SHP has no salvage. As of December 31, 2013 and 2012, SHP had no specific accruals established for outstanding subrogation as it is considered a component of the actuarial calculations used to develop the estimates of claims unpaid.

* * * * * *

SUPPLEMENTAL SCHEDULES

SUPPLEMENTAL SCHEDULES
EXHIBIT I: SUPPLEMENTAL SCHEDULE OF INVESTMENT RISKS INTERROGATORIES

SUPPLEMENT FOR THE YEAR 2013 OF THE SANFORD HEALTH PLAN

SUPPLEMENTAL INVESTMENT RISKS INTERROGATORIES

For The Year Ended December 31, 2013

(To Be Filed by April 1)

Of The SANFORD HEALTH PLAN

Address (City, State and Zip Code) Sioux Falls, SD 57103

NAIC Group Code 01246 NAIC Company Code 95683 Employer's ID Number 91-1842494

The Investment Risks Interrogatories are to be filed by April 1. They are also to be included with the Audited Statutory Financial Statements.

Answer the following interrogatories by reporting the applicable U. S. dollar amounts and percentages of the reporting entity's total admitted assets held in that category of investments.

1. Reporting entity's total admitted assets as reported on Page 2 of this annual statement. $ 51,347,204.78

2. Ten largest exposures to a single issuer/borrower/investment.

	1 Issuer	2 Description of Exposure	3 Amount	4 Percentage of Total Admitted Assets
2.01	FIRST PREMIER BANK	CHECKING ACCOUNT	$ 3,509,589.28	6.8 %
2.02	FANNIE MAE (FNMA)	MORTGAGE-BACKED SECURITIES	$ 3,100,803.76	6.0 %
2.03	FREDDIE MAC (FHLMC)	MORTGAGE-BACKED SECURITIES	$ 2,539,239.46	4.9 %
2.04	WELLS FARGO	CHECKING ACCOUNT/CORPORATE BONDS/PREF ST	$ 2,319,397.22	4.5 %
2.05	CREDIT SUISSE	CORPORATE BONDS	$ 1,503,217.33	2.9 %
2.06	ARCHER DANIELS MIDLAND	CORPORATE BONDS	$ 1,135,098.20	2.2 %
2.07	GENERAL ELECTRIC	CORPORATE BONDS	$ 528,838.97	1.0 %
2.08	GOLDMAN SACHS	CORPORATE BONDS/CERTIFICATES OF DEPOSIT	$ 499,033.75	1.0 %
2.09	STATOIL	CORPORATE BONDS	$ 492,514.63	1.0 %
2.10	TARGET CORP	CORPORATE BONDS	$ 462,819.49	0.9 %

3. Amounts and percentages of the reporting entity's total admitted assets held in bonds and preferred stocks by NAIC designation.

	Bonds	1	2		Preferred Stocks	3	4	
3.01	NAIC 1	$ 38,267,453.44	74.5	%	3.07 P/RP-1	$ 665,838.53	1.3	%
3.02	NAIC 2	$ 288,654.66	0.6	%	3.08 P/RP-2	$ 162,400.00	0.3	%
3.03	NAIC 3	$ 0.00	0.0	%	3.09 P/RP-3	$	0.0	%
3.04	NAIC 4	$ 0.00	0.0	%	3.10 P/RP-4	$	0.0	%
3.05	NAIC 5	$ 0.00	0.0	%	3.11 P/RP-5	$	0.0	%
3.06	NAIC 6	$ 0.00	0.0	%	3.12 P/RP-6	$	0.0	%

4. Assets held in foreign investments:

4.01 Are assets held in foreign investments less than 2.5% of the reporting entity's total admitted assets? Yes [ ] No [X]

If response to 4.01 above is yes, responses are not required for interrogatories 5 – 10.

4.02	Total admitted assets held in foreign investments	$ 2,034,776.78	4.0	%
4.03	Foreign-currency-denominated investments	$	0.0	%
4.04	Insurance liabilities denominated in that same foreign currency	$	0.0	%

SUPPLEMENTAL INVESTMENT RISKS INTERROGATORIES (cont.)

5. Aggregate foreign investment exposure categorized by NAIC sovereign designation:

		1	2	
5.01	Countries designated NAIC 1	$ 2,034,776.78	4.0	%
5.02	Countries designated NAIC 2	$	0.0	%
5.03	Countries designated NAIC 3 or below	$	0.0	%

6. Largest foreign investment exposures by country, categorized by the country's NAIC sovereign designation:

		1	2	
	Countries designated NAIC 1:			
6.01	Country 1: UNITED KINGDOM	$ 622,676.01	1.2	%
6.02	Country 2: NORWAY	$ 492,514.63	1.0	%
	Countries designated NAIC 2:			
6.03	Country 1:	$	0.0	%
6.04	Country 2:	$	0.0	%
	Countries designated NAIC 3 or below:			
6.05	Country 1:	$	0.0	%
6.06	Country 2:	$	0.0	%

		1	2	
7.	Aggregate unhedged foreign currency exposure	$	0.0	%

8. Aggregate unhedged foreign currency exposure categorized by NAIC sovereign designation:

		1	2	
8.01	Countries designated NAIC 1	$	0.0	%
8.02	Countries designated NAIC 2	$	0.0	%
8.03	Countries designated NAIC 3 or below	$	0.0	%

9. Largest unhedged foreign currency exposures by country, categorized by the country's NAIC sovereign designation:

		1	2	
	Countries designated NAIC 1:			
9.01	Country 1:	$	0.0	%
9.02	Country 2:	$	0.0	%
	Countries designated NAIC 2:			
9.03	Country 1:	$	0.0	%
9.04	Country 2:	$	0.0	%
	Countries designated NAIC 3 or below:			
9.05	Country 1:	$	0.0	%
9.06	Country 2:	$	0.0	%

10. Ten largest non-sovereign (i.e. non-governmental) foreign issues:

	1 Issuer	2 NAIC Designation	3	4	
10.01	STATOIL	1FE	$ 492,514.63	1.0	%
10.02	RABOBANK NEDERLANDS	1FE	$ 413,706.30	0.8	%
10.03	ABBEY NATIONAL TREASURY SERV	1FE	$ 346,629.43	0.7	%
10.04	BHP FINANCE	1FE	$ 303,864.73	0.6	%
10.05	WESTPAC BK CORP	1FE	$ 151,995.39	0.3	%
10.06	BP CAP MARKETS	1FE	$ 150,741.63	0.3	%
10.07	GLAXOSMITHKLINE	1FE	$ 125,304.95	0.2	%
10.08	TOTAL CAPITAL	1FE	$ 50,019.72	0.1	%
10.09			$	0.0	%
10.10			$	0.0	%

SUPPLEMENTAL INVESTMENT RISKS INTERROGATORIES (cont.)

11. Amounts and percentages of the reporting entity's total admitted assets held in Canadian investments and unhedged Canadian currency exposure:

11.01 Are assets held in Canadian investments less than 2.5% of the reporting entity's total admitted assets? ..... Yes [X] No [ ]

If response to 11.01 is yes, detail is not required for the remainder of Interrogatory 11.

		1	2
11.02	Total admitted assets held in Canadian investments	$ 560,441,20	1.1 %
11.03	Canadian-currency-denominated investments	$	0.0 %
11.04	Canadian-denominated insurance liabilities	$	0.0 %
11.05	Unhedged Canadian currency exposure	$	0.0 %

12. Report aggregate amounts and percentages of the reporting entity's total admitted assets held in investments with contractual sales restrictions.

12.01 Are assets held in investments with contractual sales restrictions less than 2.5% of the reporting entity's total admitted assets? ..... Yes [X] No [ ]

If response to 12.01 is yes, responses are not required for the remainder of Interrogatory 12.

		1	2	3
12.02	Aggregate statement value of investments with contractual sales restrictions	$		0.0 %
	Largest three investments with contractual sales restrictions:			
12.03		$		0.0 %
12.04		$		0.0 %
12.05		$		0.0 %

13. Amounts and percentages of admitted assets held in the ten largest equity interests:

13.01 Are assets held in equity interest less than 2.5% of the reporting entity's total admitted assets? ..... Yes [X] No [ ]

If response to 13.01 is yes, responses are not required for the remainder of Interrogatory 13.

	1 Issuer	2	3
13.02		$	0.0 %
13.03		$	0.0 %
13.04		$	0.0 %
13.05		$	0.0 %
13.06		$	0.0 %
13.07		$	0.0 %
13.08		$	0.0 %
13.09		$	0.0 %
13.10		$	0.0 %
13.11		$	0.0 %

SUPPLEMENTAL INVESTMENT RISKS INTERROGATORIES (cont.)

14. Amounts and percentages of the reporting entity's total admitted assets held in nonaffiliated, privately placed equities:

14.01 Are assets held in nonaffiliated, privately placed equities less than 2.5% of the reporting entity's total admitted assets? ..... Yes [X] No [ ]

If response to 14.01 above is yes, responses are not required for the remainder of Interrogatory 14.

	1	2	3
14.02	Aggregate statement value of investments held in nonaffiliated, privately placed equities	$	0.0 %
	Largest three investments held in nonaffiliated, privately placed equities:		
14.03		$	0.0 %
14.04		$	0.0 %
14.05		$	0.0 %

15. Amounts and percentages of the reporting entity's total admitted assets held in general partnership interests:

15.01 Are assets held in general partnership interests less than 2.5% of the reporting entity's total admitted assets? ..... Yes [X] No [ ]

If response to 15.01 above is yes, responses are not required for the remainder of Interrogatory 15.

	1	2	3
15.02	Aggregate statement value of investments held in general partnership interests	$	0.0 %
	Largest three investments in general partnership interests:		
15.03		$	0.0 %
15.04		$	0.0 %
15.05		$	0.0 %

16. Amounts and percentages of the reporting entity's total admitted assets held in mortgage loans:

16.01 Are mortgage loans reported in Schedule B less than 2.5% of the reporting entity's total admitted assets? ..... Yes [X] No [ ]

If response to 16.01 above is yes, responses are not required for the remainder of Interrogatory 16 and Interrogatory 17.

	1 Type (Residential, Commercial, Agricultural)	2	3
16.02		$	0.0 %
16.03		$	0.0 %
16.04		$	0.0 %
16.05		$	0.0 %
16.06		$	0.0 %
16.07		$	0.0 %
16.08		$	0.0 %
16.09		$	0.0 %
16.10		$	0.0 %
16.11		$	0.0 %

SUPPLEMENTAL INVESTMENT RISKS INTERROGATORIES (cont.)

16. Amount and percentage of the reporting entity's total admitted assets held in the following categories of mortgage loans:

		Loans	
16.12	Construction loans	$	0.0 %
16.13	Mortgage loans over 90 days past due	$	0.0 %
16.14	Mortgage loans in the process of foreclosure	$	0.0 %
16.15	Mortgage loans foreclosed	$	0.0 %
16.16	Restructured mortgage loans	$	0.0 %

17. Aggregate mortgage loans having the following loan-to-value ratios as determined from the most current appraisal as of the annual statement date:

Loan-to-Value		Residential		Commercial		Agricultural	
		1	2	3	4	5	6
17.01	above 95%	$	0.0 %	$	0.0 %	$	0.0 %
17.02	91% to 95%	$	0.0 %	$	0.0 %	$	0.0 %
17.03	81% to 90%	$	0.0 %	$	0.0 %	$	0.0 %
17.04	71% to 80%	$	0.0 %	$	0.0 %	$	0.0 %
17.05	below 70%	$	0.0 %	$	0.0 %	$	0.0 %

18. Amounts and percentages of the reporting entity's total admitted assets held in each of the five largest investments in real estate:

18.01 Are assets held in real estate reported less than 2.5% of the reporting entity's total admitted assets? Yes [X] No [ ]

If response to 18.01 above is yes, responses are not required for the remainder of Interrogatory 18.

Largest five investments in any one parcel or group of contiguous parcels of real estate.

	Description 1	2	3
18.02		$	0.0 %
18.03		$	0.0 %
18.04		$	0.0 %
18.05		$	0.0 %
18.06		$	0.0 %

19. Report aggregate amounts and percentages of the reporting entity's total admitted assets held in investments held in mezzanine real estate loans:

19.01 Are assets held in investments held in mezzanine real estate loans less than 2.5% of the reporting entity's total admitted assets? Yes [X] No [ ]

If response to 19.01 is yes, responses are not required for the remainder of Interrogatory 19.

	1	2	3
19.02	Aggregate statement value of investments held in mezzanine real estate loans:	$	0.0 %
	Largest three investments held in mezzanine real estate loans:		
19.03		$	0.0 %
19.04		$	0.0 %
19.05		$	0.0 %

SUPPLEMENTAL INVESTMENT RISKS INTERROGATORIES (cont.)

20. Amounts and percentages of the reporting entity's total admitted assets subject to the following types of agreements:

	At Year-end		At End of Each Quarter		
			1st Qtr	2nd Qtr	3rd Qtr
	1	2	3	4	5
20.01 Securities lending agreements (do not include assets held as collateral for such transactions)	$	0.0 %	$	$	$
20.02 Repurchase agreements	$	0.0 %	$	$	$
20.03 Reverse repurchase agreements	$	0.0 %	$	$	$
20.04 Dollar repurchase agreements	$	0.0 %	$	$	$
20.05 Dollar reverse repurchase agreements	$	0.0 %	$	$	$

21. Amounts and percentages of the reporting entity's total admitted assets for warrants not attached to other financial instruments, options, caps, and floors:

	Owned		Written	
	1	2	3	4
21.01 Hedging	$	0.0 %	$	0.0 %
21.02 Income generation	$	0.0 %	$	0.0 %
21.03 Other	$	0.0 %	$	0.0 %

22. Amounts and percentages of the reporting entity's total admitted assets of potential exposure for collars, swaps, and forwards:

	At Year-end		At End of Each Quarter		
			1st Qtr	2nd Qtr	3rd Qtr
	1	2	3	4	5
22.01 Hedging	$	0.0 %	$	$	$
22.02 Income generation	$	0.0 %	$	$	$
22.03 Replications	$	0.0 %	$	$	$
22.04 Other	$	0.0 %	$	$	$

23. Amounts and percentages of the reporting entity's total admitted assets of potential exposure for futures contracts:

	At Year-end		At End of Each Quarter		
			1st Qtr	2nd Qtr	3rd Qtr
	1	2	3	4	5
23.01 Hedging	$	0.0 %	$	$	$
23.02 Income generation	$	0.0 %	$	$	$
23.03 Replications	$	0.0 %	$	$	$
23.04 Other	$	0.0 %	$	$	$

SUPPLEMENTAL SCHEDULES
EXHIBIT II: SUPPLEMENTAL SUMMARY
INVESTMENT SCHEDULE

SUMMARY INVESTMENT SCHEDULE

	Gross Investment Holdings		Admitted Assets as Reported in the Annual Statement			
	1	2	3	4	5	6
Investment Categories	Amount	Percentage	Amount	Securities Lending Reinvested Collateral Amount	Total (Col. 3+4) Amount	Percentage
1. Bonds:						
1.1 U.S. treasury securities	1,547,665	3.358	1,547,665		1,547,665	3.358
1.2 U.S. government agency obligations (excluding mortgage-backed securities):						
1.21 Issued by U.S. government agencies		0.000			0	0.000
1.22 Issued by U.S. government sponsored agencies	8,629,883	18.725	8,629,883		8,629,883	18.725
1.3 Non-U.S. government (including Canada, excluding mortgage-backed securities)		0.000			0	0.000
1.4 Securities issued by states, territories, and possessions and political subdivisions in the U.S.:						
1.41 States, territories and possessions general obligations	854,475	1.854	854,475		854,475	1.854
1.42 Political subdivisions of states, territories and possessions and political subdivisions general obligations	213,872	0.464	213,872		213,872	0.464
1.43 Revenue and assessment obligations	184,386	0.400	184,386		184,386	0.400
1.44 Industrial development and similar obligations		0.000			0	0.000
1.5 Mortgage-backed securities (includes residential and commercial MBS):						
1.51 Pass-through securities:						
1.511 Issued or guaranteed by GNMA	1,395,571	3.028	1,395,571		1,395,571	3.028
1.512 Issued or guaranteed by FNMA and FHLMC	3,814,352	8.276	3,814,352		3,814,352	8.276
1.513 All other		0.000			0	0.000
1.52 CMOs and REMICs:						
1.521 Issued or guaranteed by GNMA, FNMA, FHLMC or VA	2,131,726	4.625	2,131,726		2,131,726	4.625
1.522 Issued by non-U.S. Government issuers and collateralized by mortgage-backed securities issued or guaranteed by agencies shown in Line 1.521		0.000			0	0.000
1.523 All other		0.000			0	0.000
2. Other debt and other fixed income securities (excluding short term):						
2.1 Unaffiliated domestic securities (includes credit tenant loans and hybrid securities)	14,763,145	32.032	14,763,145		14,763,145	32.032
2.2 Unaffiliated non-U.S. securities (including Canada)	2,443,241	5.301	2,443,241		2,443,241	5.301
2.3 Affiliated securities		0.000			0	0.000
3. Equity interests:						
3.1 Investments in mutual funds		0.000			0	0.000
3.2 Preferred stocks:						
3.21 Affiliated		0.000			0	0.000
3.22 Unaffiliated	828,239	1.797	828,239		828,239	1.797
3.3 Publicly traded equity securities (excluding preferred stocks):						
3.31 Affiliated		0.000			0	0.000
3.32 Unaffiliated		0.000			0	0.000
3.4 Other equity securities:						
3.41 Affiliated		0.000			0	0.000
3.42 Unaffiliated		0.000			0	0.000
3.5 Other equity interests including tangible personal property under lease:						
3.51 Affiliated		0.000			0	0.000
3.52 Unaffiliated		0.000			0	0.000
4. Mortgage loans:						
4.1 Construction and land development		0.000			0	0.000
4.2 Agricultural		0.000			0	0.000
4.3 Single family residential properties		0.000			0	0.000
4.4 Multifamily residential properties		0.000			0	0.000
4.5 Commercial loans		0.000			0	0.000
4.6 Mezzanine real estate loans		0.000			0	0.000
5. Real estate investments:						
5.1 Property occupied by company		0.000	0		0	0.000
5.2 Property held for production of income (including $ ..... of property acquired in satisfaction of debt)		0.000	0		0	0.000
5.3 Property held for sale (including $ ..... property acquired in satisfaction of debt)		0.000	0		0	0.000
6. Contract loans		0.000	0		0	0.000
7. Derivatives		0.000	0		0	0.000
8. Receivables for securities		0.000	0		0	0.000
9. Securities Lending (Line 10, Asset Page reinvested collateral)		0.000	0	XXX	XXX	XXX
10. Cash, cash equivalents and short-term investments	8,049,466	17.465	8,049,466		8,049,466	17.465
11. Other invested assets	1,232,509	2.674	1,232,509		1,232,509	2.674
12. Total invested assets	46,088,529	100.000	46,088,529	0	46,088,529	100.000

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OTHER ATTACHMENTS

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February 28, 2014

Audit Committee and Management
Sanford Health Plan
Sioux Falls, SD 57103

Dear Members of the Audit Committee and Management:

We have audited, in accordance with auditing standards generally accepted in the United States of America, the statutory-basis financial statements of Sanford Health Plan (SHP) for the years ended December 31, 2013 and 2012, and have issued our report thereon dated February 28, 2014. In connection therewith, we advise you as follows:

a. We are independent certified public accountants with respect to SHP and conform to the standards of the accounting profession as contained in the Code of Professional Conduct and pronouncements of the American Institute of Certified Public Accountants, and the Rules of Professional Conduct of the Minnesota State Board of Public Accountancy.

b. The engagement partner and engagement manager, who are certified public accountants, have 13 years and 7 years, respectively, of experience in public accounting and are experienced in auditing insurance enterprises. Members of the engagement team, most of whom have had experience in auditing insurance enterprises and 50% of whom are certified public accountants, were assigned to perform tasks commensurate with their training and experience.

c. We understand that SHP intends to file its audited statutory-basis financial statements and our report thereon with the South Dakota Department of Commerce and Regulation, Division of Insurance and other state insurance departments in states in which SHP is licensed and that the insurance commissioners of those states will be relying on that information in monitoring and regulating the statutory-basis financial condition of SHP.

d. While we understand that an objective of issuing a report on the statutory-basis financial statements is to satisfy regulatory requirements, our audit was not planned to satisfy all objectives or responsibilities of insurance regulators. In this context, SHP and insurance commissioners should understand that the objective of an audit of statutory-basis financial statements in accordance with auditing standards generally accepted in the United States of America is to form an opinion and issue a report on whether the statutory-basis financial statements present fairly, in all material respects, the admitted assets, liabilities, and capital and surplus, results of operations, and cash flows in accordance with accounting practices prescribed or permitted by the South Dakota Department of Commerce and Regulation, Division of Insurance. Consequently, under auditing standards generally accepted in the United States of America, we have the responsibility, within the inherent limitations of the auditing process, to plan and perform our audit to obtain reasonable assurance regarding whether the statutory-basis financial statements are free from material misstatement, whether due to error or fraud, and to exercise due professional care in the conduct of the audit. SHP is not required to have, nor were we engaged to perform, an audit of internal control over financial reporting. Our audit included consideration of internal control relevant to the entity's preparation and fair presentation of the statutory-basis financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of internal control over financial reporting. The concept of selective testing of the data being audited, which involves judgment both as to the number of transactions to be audited and the areas to be tested, has

been generally accepted as a valid and sufficient basis for an auditor to express an opinion on statutory-basis financial statements. Audit procedures that are effective for detecting errors, if they exist, may be ineffective for detecting misstatements resulting from fraud. Because of the characteristics of fraud, particularly those involving concealment and falsified documentation (including forgery), a properly planned and performed audit may not detect a material misstatement resulting from fraud. In addition, an audit does not address the possibility that material misstatements may occur in the future. Also, our use of professional judgment and the assessment of materiality for the purpose of our audit mean that matters may exist that would have been assessed differently by insurance commissioners.

e. It is the responsibility of the management of SHP to adopt sound accounting policies, to maintain an adequate and effective system of accounts, and to establish and maintain internal control that will, among other things, provide reasonable, but not absolute, assurance that assets are safeguarded against loss from unauthorized use or disposition and that transactions are executed in accordance with management's authorization and are recorded properly to permit the preparation of statutory-basis financial statements in conformity with accounting practices prescribed or permitted by the South Dakota Department of Commerce and Regulation, Division of Insurance.

f. The Insurance Commissioner should exercise due diligence to obtain whatever other information that may be necessary for the purpose of monitoring and regulating the statutory-basis financial position of insurers and should not rely solely on the independent auditors' report.

g. We will retain the working papers prepared in the conduct of our audit until the South Dakota Department of Commerce and Regulation, Division of Insurance has filed a Report of Examination covering 2013, but no longer than seven calendar years from the date of the audit report or until the filing of the report on examination covering the period of the audit, whichever is longer. After notification to SHP, we will make the working papers available for review by the South Dakota Department of Commerce and Regulation, Division of Insurance at the offices of the insurer, at our offices, at the South Dakota Department of Commerce and Regulation, Division of Insurance, or at any other reasonable place designated by the Insurance Commissioner. Furthermore, in the conduct of the aforementioned periodic review by the South Dakota Department of Commerce and Regulation, Division of Insurance, photocopies of pertinent audit working papers may be made (under the control of Deloitte & Touche LLP) and such copies may be retained by the South Dakota Department of Commerce and Regulation, Division of Insurance.

h. The engagement partner has served in this capacity with respect to SHP since 2013, is licensed by the Minnesota State Board of Public Accountancy, and is a member in good standing of the American Institute of Certified Public Accountants.

i. To the best of our knowledge and belief, we are in compliance with the requirements of Section 7 of the National Association of Insurance Commissioners' Model Rule (Regulation) Requiring Annual Audited Financial Reports regarding qualifications of independent certified public accountants.

This letter is intended solely for the information and use of the Audit Committee and management of SHP for filing with the South Dakota Department of Commerce and Regulation, Division of Insurance and other state insurance departments to whose jurisdiction SHP is subject and is not intended to be, and should not be, used by anyone other than these specified parties.

Yours Truly,

Deloitte & Touche LLP

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February 28, 2014

Audit Committee and Management
Sanford Health Plan
Sioux Falls, South Dakota

Dear Members of the Audit Committee and Management:

In planning and performing our audit of the statutory-basis financial statements of Sanford Health Plan (SHP) as of and for the year ended December 31, 2013 (on which we have issued our report dated February 28, 2014), in accordance with auditing standards generally accepted in the United States of America, we considered SHP's internal control over financial reporting as a basis for designing audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of SHP's internal control over financial reporting. Accordingly, we do not express an opinion on the effectiveness of SHP's internal control over financial reporting.

Our consideration of internal control over financial reporting was for the limited purpose described in the first paragraph and was not designed to identify all deficiencies in internal control over financial reporting that might be material weaknesses and therefore, material weaknesses may exist that were not identified. We did not identify any deficiencies in internal control over financial reporting that we consider to be material weaknesses as of December 31, 2013.

The definitions of a deficiency and a material weakness are set forth in the attached Appendix I.

A description of the responsibility of management for establishing and maintaining internal control over financial reporting and of the objectives of and inherent limitations of internal control over financial reporting, is set forth in the attached Appendix II and should be read in conjunction with this report.

This report is intended solely for the information and use of the Audit Committee, management, others within the organization, and state insurance departments to whose jurisdiction SHP is subject and is not intended to be, and should not be, used by anyone other than these specified parties.

Yours truly,

Deloitte & Touche LLP

DEFINITIONS

The definitions of a deficiency and a material weakness are as follows:

A *deficiency* in internal control over financial reporting exists when the design or operation of a control does not allow management or employees, in the normal course of performing their assigned functions, to prevent, or detect and correct misstatements on a timely basis. A deficiency in design exists when (a) a control necessary to meet the control objective is missing or (b) an existing control is not properly designed so that, even if the control operates as designed, the control objective would not be met. A deficiency in operation exists when (a) a properly designed control does not operate as designed or (b) the person performing the control does not possess the necessary authority or competence to perform the control effectively.

A *material weakness* is a deficiency, or a combination of deficiencies, in internal control over financial reporting, such that there is a reasonable possibility that a material misstatement of the entity's statutory-basis financial statements will not be prevented, or detected and corrected on a timely basis.

MANAGEMENT'S RESPONSIBILITY FOR, AND THE OBJECTIVES AND LIMITATIONS OF, INTERNAL CONTROL OVER FINANCIAL REPORTING

The following comments concerning management's responsibility for internal control over financial reporting and the objectives and inherent limitations of internal control over financial reporting are adapted from auditing standards generally accepted in the United States of America.

Management's Responsibility

SHP's management is responsible for the overall accuracy of the statutory-basis financial statements and their conformity with accounting practices prescribed or permitted by the South Dakota Department of Commerce and Regulation, Division of Insurance. In this regard, management is also responsible for establishing and maintaining effective internal control over financial reporting.

Objectives of Internal Control Over Financial Reporting

Internal control over financial reporting is a process effected by those charged with governance, management, and other personnel and designed to provide reasonable assurance about the achievement of the entity's objectives with regard to reliability of financial reporting, effectiveness and efficiency of operations, and compliance with applicable laws and regulations. Internal control over the safeguarding of assets against unauthorized acquisition, use, or disposition may include controls related to financial reporting and operations objectives. Generally, controls that are relevant to an audit of statutory-basis financial statements are those that pertain to the entity's objective of reliable financial reporting (i.e., the preparation of reliable statutory-basis financial statements that are fairly presented in conformity with accounting practices prescribed or permitted by the South Dakota Department of Commerce and Regulation, Division of Insurance.

Inherent Limitations of Internal Control Over Financial Reporting

Because of the inherent limitations of internal control over financial reporting, including the possibility of collusion or improper management override of controls, material misstatements due to error or fraud may not be prevented, or detected and corrected on a timely basis. Also, projections of any evaluation of the effectiveness of the internal control over financial reporting to future periods are subject to the risk that the controls may become inadequate because of changes in conditions, or that the degree of compliance with the policies or procedures may deteriorate.

BEFORE THE DIVISION OF INSURANCE
DEPARTMENT OF LABOR AND REGULATION
STATE OF SOUTH DAKOTA

IN THE MATTER OF THE FINANCIAL EXAMINATION OF SANFORD HEALTH PLAN	))	FINDINGS OF FACT, CONCLUSIONS OF LAW AND ORDER

On February 9, 2012, the Financial Examination Report (Report) for Sanford Health Plan (the Company) was submitted to the Director for his consideration and review, pursuant to SDCL 58-3-12. Having reviewed the Report, he makes the following Findings of Fact, Conclusions of Law and Order, pursuant to SDCL 58-3-12 and SDCL Chapter 1-26:

Findings of Fact

1.

The Company is a South Dakota domiciled nonprofit health maintenance organization subject to examination, pursuant to SDCL 58-3-1. The Company is a member of the Sanford Hospital and Health System.

2.

A financial examination of the Company was conducted for the period from January 1, 2006 through December 31, 2010. A copy of the Report is attached as Exhibit A, and by reference, is made a part of this Order.

3.

The Report was filed with the South Dakota Division of Insurance (Division) on February 9, 2012.

4.

No written response or rebuttal was received by the Division from the Company within thirty (30) days of submission of the Report, as allowed under SDCL 58-3-12.

5.

The Director has fully considered and reviewed the Report.

Conclusions of Law

1.

The Director of the Division has jurisdiction of this matter, pursuant to SDCL Chapter 58-3.

2.

Pursuant to SDCL 58-3-12 and 58-3-17, the Director must issue an Order in this matter, pursuant to SDCL Chapter 1-26. The Report may be adopted as filed or with modifications or corrections, or the Report may be rejected in full.

3.

Pursuant to SDCL 58-3-17, the Company must serve its directors with a copy of this Order and Report and file affidavits from the directors with the Division stating they have received a copy of the Order and Report.

Order

It is hereby ORDERED that the Report, attached as Exhibit A, is adopted. It is further

ORDERED that the Company is to serve a copy of the Order and Report on each member of its Board of Directors. It is further

ORDERED that within thirty (30) days of the date of this Order, the Company shall file affidavits with the Division, executed by each member of its Board of Directors, stating that they have received a copy of the Order and Report. It is further

ORDERED that within thirty (30) days of the date of this Order, the Company shall comply with the Report recommendations and provide written verification to the Director that each recommendation has been complied with. It is further

ORDERED that within thirty (30) days after the time for appeal has expired, the Company shall provide a copy of the Order and Report to each state in which it is licensed to do business and to the National Association of Insurance Commissioners (NAIC), 1100 Walnut Street, Suite 1500, Kansas City, MO 64106, and file an affidavit of mailing to the states and the NAIC with the Division within ten (10) days of the mailing. It is further

ORDERED that this Order may not be used by any person for any competitive purpose or used in a manner that would violate SDCL Chapter 58-33.

Dated this 12th day of March, 2012.

Merle Scheiber, Director
S.D. Division of Insurance

This Order may be appealed to the Circuit Court and Supreme Court, pursuant to SDCL Chapter 1-26.

BEFORE THE DIVISION OF INSURANCE
DEPARTMENT OF LABOR AND REGULATION
STATE OF SOUTH DAKOTA

IN THE MATTER OF THE FINANCIAL) CERTIFICATE OF SERVICE
EXAMINATION OF SANFORD HEALTH PLAN)

I, Wendell Malsam, the undersigned, do hereby certify that on this 12th day of March, 2012, I deposited a true and correct copy of the Findings of Fact, Conclusions of Law and Order in the United States mail, with postage prepaid thereon and addressed as follows:

Cecily Tucker, CFO
Sanford Health Plan
300 Cherapa Place, Suite 201
Sioux Falls, SD 57103

Dated at Pierre, South Dakota this 12th day of March, 2012.

Wendell Malsam, Assistant Director – Financial
S.D. Division of Insurance

REPORT OF THE FINANCIAL EXAMINATION

OF THE

SANFORD HEALTH PLAN

SIOUX FALLS, SOUTH DAKOTA

NAIC NUMBER 95683

AS OF

D E C E M B E R 3 1, 2 0 1 0

DATE OF SUBMISSION

F E B R U A R Y 9, 2 0 1 2

PARTICIPATING STATES
SOUTH DAKOTA, Zone III

REPORT NUMBER SHP-10-F

EXHIBIT A

South Dakota Department of Revenue & Regulation
Division of Insurance

445 East Capitol Avenue
Pierre, South Dakota 57501-3185
Phone: 605-773-3563
Fax: 605-773-5369

February 9, 2012

I, the undersigned, do hereby certify that the enclosed report of examination, as of December 31, 2010, of the conditions and affairs of the

SANFORD HEALTH PLAN

SIOUX FALLS, SOUTH DAKOTA

is a true and correct copy of the report. I further certify that the report was submitted to the South Dakota Division of Insurance on February 9, 2012, and to Cecily Tucker, Chief Financial Officer of Sanford Health Plan on February 9, 2012.

Marty Warns

Marty Warns, CFE
Examiner for the
South Dakota Division of Insurance

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South Dakota
Department of Revenue & Regulation
Division of Insurance

445 East Capitol Avenue
Pierre, South Dakota 57501-3185
Phone: 605-773-3563
Fax: 605-773-5369

February 9, 2012

Honorable Merle Scheiber, Director
South Dakota Division of Insurance
Department of Labor and Regulation
445 East Capitol Avenue
Pierre, SD 57501-3185

Honorable Stephen Robertson, Secretary
NAIC Midwestern Zone
Commissioner of Insurance
Indiana Department of Insurance
311 West Washington Street
Indianapolis, IN 46204-2787

Honorable Joseph Torti, Chairman
NAIC Financial Condition (E) Committee
Superintendent of Insurance
Rhode Island Insurance Division
1511 Pontiac Avenue, Bldg. 69-2
Cranston, RI 02920-4407

Chairman, Secretary and Director,

Pursuant to your instructions, and in accordance with the insurance laws of the State of South Dakota, a financial examination has been made of the

SANFORD HEALTH PLAN

SIOUX FALLS, SOUTH DAKOTA

as of December 31, 2010. The following examination report is respectfully submitted.

SCOPE OF EXAMINATION

An examination of Sanford Health Plan was performed by examiners representing the South Dakota Division of Insurance. The last examination of the Company was completed as of December 31, 2005. This examination covers the period from January 1, 2006, through December 31, 2010, together with such consideration of prior or subsequent matters as was deemed pertinent in the judgment of the examiners.

We conducted our examination in accordance with the NAIC *Financial Condition Examiners Handbook*. The Handbook requires that we plan and perform the examination to evaluate the financial condition and identify prospective risks of the Company by obtaining information about the Company including corporate governance, identifying and assessing inherent risks within the Company and evaluating system controls and procedures used to mitigate those risks. An examination also includes assessing the principles used and significant estimates made by management, as well as evaluating the overall financial statement presentation, management's compliance with Statutory Accounting Principles and annual statement instructions when applicable to domestic state regulations.

All accounts and activities of the Company were considered in accordance with the risk-focused examination process.

INTRODUCTION

Sanford Health Plan, also referred to as the Company or SHP, has its home office at 300 Cherapa Place, Suite 201, Sioux Falls, South Dakota 57103. Examiners representing the South Dakota Division of Insurance conducted this examination at the Company's home office.

SUMMARY OF SIGNIFICANT FINDINGS

MATERIAL ADVERSE FINDINGS

There are no material adverse findings.

SIGNIFICANT NON-COMPLIANCE FINDINGS

There are no significant non-compliance findings. See the Summary of Comments and Recommendations section of this report for comments regarding other findings of this examination.

MATERIAL CHANGES IN FINANCIAL STATEMENTS

The Surplus As Regards Policyholders, as determined through this examination is equal to the amount reported by the Company in its 2010 Annual Statement.

COMPLIANCE WITH PREVIOUS EXAMINATION RECOMMENDATIONS

The present status of the recommendations and important comments summarized in the 2005 Financial Examination Report is as follows:

OFFICERS - It is recommended that SHP have the officers required by SDCL 47-23-24.

Present Status: The Company has complied with this recommendation.

It is also recommend that the SHP Board of Directors annually elect or appoint the officers as required by SDCL 47-23-24.

Present Status: The Company has partially complied with this recommendation.

BOARD OF DIRECTORS - It is recommended that the SVHHS Board of Trustees elect/re-elect the non-consumer Directors and that the adult enrollees of the Company's health insurance plan elect the consumer directors as provided in the Company's Bylaws.

Present Status: The Company has complied with this recommendation.

COMMITTEES - It is again recommended that the Board of Directors appoint the various committees of the Company.

Present Status: The Company has not complied with this recommendation.

NOTE A - CASH AND SHORT-TERM INVESTMENTS - It is recommended that the Company monitor the amounts of admitted assets subject to repurchase agreements so that they do not exceed the limitations of SDCL 58-27-81(5).

Present Status: The Company has complied with this recommendation.

COMPANY HISTORY

Sioux Valley Health Plan was incorporated on July 30, 1997, under the laws of the State of South Dakota as a nonprofit health maintenance organization and commenced business on January 1, 1998. The Company's name was changed to Sanford Health Plan in 2007. The Company is owned entirely by Sanford Health (SH).

CORPORATE RECORDS

ARTICLES OF INCORPORATION

The Articles of Incorporation were amended in 2007 changing the name of the Company to Sanford Health Plan. The amendment was filed with and approved by the South Dakota Secretary of State and by South Dakota Division of Insurance.

BYLAWS

The Company's Bylaws were amended and restated on May 9, 2006. The main changes were increasing the number of directors, establishing Board of Directors terms of office and changing the provision concerning the CEO. The Company's Bylaws were again amended and restated on March 13, 2007, under which all references to Sioux Valley Health Plan were changed

to Sanford Health Plan and under which all references to Sioux Valley Hospital & Health System were changed to Sanford Health. Both the 2006 and 2007 Amended and Restated Bylaws were filed with and approved by the South Dakota Division of Insurance.

MINUTES

The minutes of the meetings of the Board of Directors, Physicians Quality Committee, Credentialing Committee and Pharmacy and Quality Improvement Committee were reviewed. Meetings of all the bodies appear to have been held in accordance with the Bylaws.

MANAGEMENT AND CONTROL

OFFICERS

Officers serving on December 31, 2010, were as follows:

Name	Office
Katherine Schnabel	Chairman of the Board
Pamela Ephgrave, MD	Vice-Chairman of the Board
Clayton Van Balen, MD	Vice-Chairman of the Board
Kelby Krabbenhoft	CEO
Ruth Krystopolski	President
David Link	Executive Vice President
Lisa Carlson	Secretary
Bill Marlette	Treasurer

The Bylaws provide that the CEO with the approval of the Board of Directors may appoint other officers of the Company. SDCL 47-23-24 provides that all officers shall be elected or appointed annually by the board of directors. In 2007, the CEO appointed officers and the Directors approved the appointments. No officer appointments/approvals were made in 2008, 2009 or 2010. As required by SDCL 47-23-24, it is recommended that annually the CEO appoint officers of the Company and the Board of Directors approve such officer appointments.

BOARD OF DIRECTORS

Directors serving on December 31, 2010, were as follows:

Name and Address	Principal Affiliation
Scott Boyens, MD Sioux Falls, SD	Sanford Clinic
Steve Brennan Sioux Falls, SD	Ambesbury Industries Inc.
Kimberly Elbers Sioux Falls, SD	First National Bank of Sioux Falls
Pamela Ephgrave, MD Sioux Falls, SD	Sanford Clinic Ephgrave OBGYN
Kelby K. Krabbenhoft Sioux Falls, SD	Sanford Health
Craig Lambrecht Bismarck, ND	Medcenter One Health Systems
Gary Leighton Florence, SD	Florence Schools
David Link Sioux Falls, SD	Sanford Health
Marlin Overman Rock Rapids, IA	DGR
Kathrine Schnabel Sioux Falls, SD	Citibank
Rajesh Singh, MD Sioux Falls, SD	Sanford Clinic University Psychiatry
Dwight Thompson Grand Forks, ND	Altru Health Systems
Clayton Van Balen, MD Sioux Falls, SD	Sanford Clinic Occupation Medicine
Steve Watkins Sioux Falls, SD	Hot Stuff Foods
Michael Crandell, MD (exofficio) Sioux Falls, SD	Sanford Health Plan

COMMITTEES

The Bylaws provide for the appointing of committees by the Board of Directors. Although not appointed by the Board of Directors, the following committees were serving at December 31, 2010.

Physician Quality Committee

Michael Crandell, MD, Chairman
Dean Berg, DC
Jerome Blake, MD
LuAnn Eidsness, MD
Kevin Faber, MD
Dennis Glatt, MD
Daniel Heinemann, MD
Scott Henry, MD
David Hoversten, MD
Donald Humphreys, MD
Elizabeth Jensen, DO
Peter Johnson, MD
Bill Ladwig
Laurie Landeen, MD
Fred Lovrien, MD
James McGrann, MD
David Munson, MD
Candice Nelson, MD
Susan Nygaard
Brad Randall, MD
Gene Regier, MD
Rajesh Singh, MD
Read Sulik, MD
Jerry Walton, MD
Ronald Wiisanen, MD

Credentialing Committee

Michael Crandell, MD, Chairman
Wendell Hoffman, MD
Samy Karaz, MD
James Oakland, MD
Barry Pitt-Hart, MD
Brad Randall, MD
Benjamin Roy, MD
Thomas Solien, DC
Ronald Wiisanen, MD
David Ziegler, MD

Quality Improvement Committee

Michael Crandell, MD, Chairman
Trixy Burgess
Lisa Carlson
Terri Delfs
Steph Erp
Tammy Gerhart
Jan Griffin
Tami Haberer
Debbie Harris
Cindy Held
Tracy Kueter
Pat Rowland
Michelle Vanderwert

It is again recommended that the Company comply with its Bylaws by having the Board of Directors appoint the various committees of the Company.

CONFLICT OF INTEREST

Members of the Board of Directors complete a conflict of interest statement annually. The conflict of interest statements are submitted to

Sanford Health which collects conflict of interest statements from its subsidiary Boards.

MEMBERS

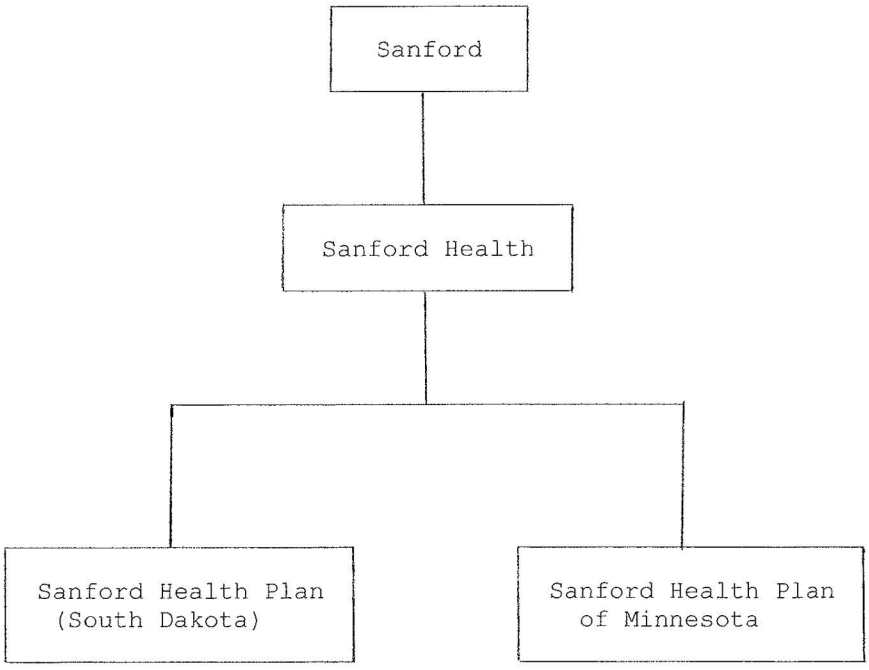
The Company is wholly-owned by Sanford Health. The sole corporate member did not hold any meetings during the period under examination.

MANAGEMENT AGREEMENTS

The Company and Sanford Health have entered into a Corporate Services Agreement. Under the terms of the agreement, Sanford Health provides corporate support services on an as needed basis to SHP. On a monthly basis, SHP reimburses Sanford Health for the actual costs of the provided services.

CORPORATE STRUCTURE

The position of SHP within the corporate structure as of December 31, 2010, follows:



FIDELITY BONDS AND OTHER INSURANCE

The Company is covered as a named insured with its parent and affiliates on a fiduciary insurance policy covering dishonesty by officers and employees. The policy provides for $10,000,000 of loss coverage. Computation of fidelity coverage recommended by the NAIC corporate fidelity bond coverage formula indicates a minimum exposure for a bond ranging in the amount of $700,000 to $800,000 for SHP. The only other insurance coverage protecting the Company is a Managed Care Errors and Omissions Liability Policy.

PENSION AND INSURANCE PLANS

The Company's employees participate in the health, vision, dental, disability and life insurance plans, flex spending plan and 401K retirement savings plan sponsored by Sanford Health. The Company reimburses Sanford Health on a monthly basis for the actual costs of the provided benefits.

TERRITORY AND PLAN OF OPERATION

As of year-end 2010, the Company was authorized to transact the business of health insurance in Iowa, North Dakota and South Dakota. The Company offers group health insurance, individual health insurance and Medicare Supplement insurance.

The Company and Great Plains Brokerage, Inc. have entered into a Sales Management Agreement. Under the agreement, Great Plains Brokerage is SHP's exclusive sales management company and is responsible for creating, staffing, training, supervising and operating the sales force in the sale of the Company's health insurance plans.

The Company also offers TPA services for self-insured employers. SHP and SH have entered into an Administrative Services Agreement. Under the Agreement, SHP is to perform the ministerial and administrative services over SH's Medical Benefit Plan.

GROWTH OF COMPANY

The following exhibits reflect historical data of the Company as reflected in SHP's Annual Statements:

Ten-Year Exhibit of
Assets, Liabilities, Capital and Surplus

Year	Admitted Assets	Liabilities	Contributed Surplus	Surplus Notes	Retained Earnings
2001	$13,308,363	$ 9,495,940	$11,316,435	$3,371,416	$(10,875,428)
2002	13,392,836	8,538,600	13,311,146	3,796,040	(12,252,950)
2003	18,310,375	13,381,072	14,612,712	3,796,040	(13,479,449)
2004	18,677,681	9,063,455	14,613,218	3,796,040	(8,795,032)
2005	19,837,257	10,797,469	14,613,218	0	(5,573,430)
2006	25,759,964	13,248,932	14,613,218	0	(2,102,186)
2007	25,317,383	15,614,014	14,613,218	0	(4,909,849)
2008	24,396,015	14,168,282	14,613,218	0	(4,385,485)
2009	24,420,315	14,896,286	14,613,218	0	(5,089,189)
2010	40,936,181	16,860,204	28,613,218	0	(4,537,241)

Ten-Year Exhibit
of Operating Income

Year	Underwriting Income	Investment Income	Other Income	Federal Income Taxes	Net Income
2001	$(1,173,736)	$ 248,424	$ 9,874	$ 0	$(915,438)
2002	(1,517,600)	169,213	925	0	(1,347,462)
2003	(434,628)	268,113	30,532	0	(135,983)
2004	3,926,880	303,147	52,392	83,233	4,199,186
2005	2,789,805	517,610	156,463	70,332	3,393,546
2006	2,225,821	960,552	181,557	61,167	3,306,763
2007	(2,170,509)	1,223,330	(688,864)	7,852	(1,643,895)
2008	(639,558)	809,672	34,090	8,171	196,033
2009	(1,429,062)	894,953	28,296	(171)	(505,642)
2010	(656,778)	868,319	(39,610)	(77,471)	249,402

LOSS EXPERIENCE

The Company's underwriting experience during the period under review, as compiled from filed annual statements, is as follows: (000's omitted)

	2006	2007	2008	2009	2010
Premiums Earned	$78,729	$93,014	$97,463	$105,851	$122,024
Deductions (Incurred)					
Medical & Hospital Exp.	$69,441	$86,278	$89,643	$ 98,063	$112,578
Claim Adjustment Exp.	3,575	4,318	4,522	5,036	7,095
Administration Expense	3,487	4,588	3,938	4,181	3,008
Total Deductions	$76,503	$95,184	$98,103	$107,280	$122,681
Net Underwriting Gain or (Loss)	$ 2,226	$(2,170)	$(640)	$(1,429)	$(657)

Losses and expenses incurred reflected as a percentage of premiums earned follows:

	2006	2007	2008	20049	2010
Medical & Hospital Exp.	88.20%	92.76%	91.98%	92.64%	92.26%
Claim Adjustment Exp.	4.54	4.64	4.64	4.76	5.81
Administration Expenses	4.43	4.93	4.04	3.95	2.47
Totals	97.17%	102.33%	100.66%	101.35%	100.54%

REINSURANCE

REINSURANCE CEDED

To minimize its exposure to large medical, physician and hospital claims, the Company entered into an excess of loss reinsurance agreement. Under the agreement, SHP retains the first $225,000 of eligible medical, hospital and physician expenses per member per year. The reinsurer is responsible for 90% of the excess eligible expenses up to a maximum $1,600,000 of eligible expenses per member per year.

The reinsurance agreement provides for risk transfer and contains insolvency, arbitration, continuance of coverage and coverage conversion provisions.

STATUTORY DEPOSITS

SDCL 58-6-34 provides that a minimum deposit of $200,000 be entrusted through the Director of Insurance by any company authorized to transact business in the State of South Dakota.

Compliance with the above provisions, based on results of the examination as of December 31, 2010, was determined as follows:

Qualified Deposits	
South Dakota:	
Money Market Funds	$300,000
Total Qualified Deposits	$300,000
Required Deposits	
Other Business:	
Deposits Required Under Statutory Law	$200,000
Total Required Deposits	$200,000
Excess of Required Deposits	$100,000

ACCOUNTS AND RECORDS

The Company and its affiliates operate as separate entities, maintaining their own files, records and books of accounts.

The Company pays direct expenses incurred. Expenses common to the Company and its affiliates are paid by Sanford Health and are then allocated to SHP according to the terms of the Corporate Services Agreement.

The Company's general ledger and its supporting journals and records are maintained by SH's EDP system. A trial balance of the 2010 general ledger was prepared and traced to the 2010 Annual Statement.

To ascertain proper compliance to prescribed operating and accounting procedures, a public accounting firm conducts an annual audit of the Company. Copies of the accounting firm's audit reports and workpapers were made available to the examiners.

FINANCIAL STATEMENTS

The following financial statements and supporting exhibits include various amounts reported by the Company for the year ending December 31, 2010.

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Liabilities, Capital and Surplus	15
Statement of Revenue and Expenses	16
Reconciliation of Surplus for the Period Since the Last Examination	18

The examination changes affecting surplus as of December 31, 2010, may be found under the caption "Comparative Statutory Balance Sheet."

ASSETS

		Current Year			Prior Year
		1	2	3	4
		Assets	Nonadmitted Assets	Net Admitted Assets (Cols. 1 - 2)	Net Admitted Assets
1.	Bonds (Schedule D)	20,712,224		20,712,224	19,654,402
2.	Stocks (Schedule D):				
	2.1 Preferred stocks	0		0	0
	2.2 Common stocks	0		0	0
3.	Mortgage loans on real estate (Schedule B):				
	3.1 First liens			0	0
	3.2 Other than first liens			0	0
4.	Real estate (Schedule A):				
	4.1 Properties occupied by the company (less $ ____ encumbrances)			0	0
	4.2 Properties held for the production of income (less $ ____ encumbrances)			0	0
	4.3 Properties held for sale (less $ ____ encumbrances)			0	0
5.	Cash ($ 18,053,771 , Schedule E-Part 1), cash equivalents ($ 0 , Schedule E-Part 2) and short-term investments ($ 560,127 , Schedule DA)	18,633,898		18,633,898	3,368,470
6.	Contract loans (including $ ____ premium notes)			0	0
7.	Derivatives			0	
8.	Other invested assets (Schedule BA)	0		0	0
9.	Receivables for securities			0	0
10.	Securities lending reinvested collateral assets			0	
11.	Aggregate write-ins for invested assets	0	0	0	0
12.	Subtotals, cash and invested assets (Lines 1 to 11)	39,346,122	0	39,346,122	23,022,872
13.	Title plants less $ ____ charged off (for Title insurers only)			0	0
14.	Investment income due and accrued	137,444		137,444	141,014
15.	Premiums and considerations:				
	15.1 Uncollected premiums and agents' balances in the course of collection	373,168	2,810	370,359	210,462
	15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due (including $ ____ earned but unbilled premiums)			0	0
	15.3 Accrued retrospective premiums			0	0
16.	Reinsurance:				
	16.1 Amounts recoverable from reinsurers	178,000		178,000	175,000
	16.2 Funds held by or deposited with reinsured companies			0	0
	16.3 Other amounts receivable under reinsurance contracts			0	0
17.	Amounts receivable relating to uninsured plans	9,640		9,640	20,478
18.1	Current federal and foreign income tax recoverable and interest thereon	57		57	0
18.2	Net deferred tax asset	1,471,000	1,278,000	193,000	300,000
19.	Guaranty funds receivable or on deposit			0	0
20.	Electronic data processing equipment and software	176,845	14,539	162,306	185,437
21.	Furniture and equipment, including health care delivery assets ($ ____)	1,025,618	1,025,618	0	0
22.	Net adjustment in assets and liabilities due to foreign exchange rates			0	0
23.	Receivables from parent, subsidiaries and affiliates	34,932		34,932	36,513
24.	Health care ($ 504,322) and other amounts receivable	1,274,122	769,801	504,322	326,520
25.	Aggregate write-ins for other than invested assets	47,218	47,218	0	0
26.	Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25)	44,074,166	3,137,985	40,936,181	24,420,315
27.	From Separate Accounts, Segregated Accounts and Protected Cell Accounts			0	0
28.	Total (Lines 26 and 27)	44,074,166	3,137,985	40,936,181	24,420,315
DETAILS OF WRITE-INS					
1101.				0	0
1102.					
1103.					
1198.	Summary of remaining write-ins for Line 11 from overflow page	0	0	0	0
1199.	Totals (Lines 1101 through 1103 plus 1198) (Line 11 above)	0	0	0	0
2501.	Prepaid Expenses	47,218	47,218	0	0
2502.					
2503.					
2598.	Summary of remaining write-ins for Line 25 from overflow page	0	0	0	0
2599.	Totals (Lines 2501 through 2503 plus 2598) (Line 25 above)	47,218	47,218	0	0

LIABILITIES, CAPITAL AND SURPLUS

	Current Year			Prior Year
	1 Covered	2 Uncovered	3 Total	4 Total
1. Claims unpaid (less $ ____ reinsurance ceded)	11,424,681	763,262	12,187,943	10,801,771
2. Accrued medical incentive pool and bonus amounts			0	0
3. Unpaid claims adjustment expenses	748,000		748,000	542,000
4. Aggregate health policy reserves			0	0
5. Aggregate life policy reserves			0	0
6. Property/casualty unearned premium reserves			0	0
7. Aggregate health claim reserves			0	0
8. Premiums received in advance	755,607		755,607	683,466
9. General expenses due or accrued	2,092,633		2,092,633	1,672,736
10.1 Current federal and foreign income tax payable and interest thereon (including $ ____ on realized capital gains (losses))			0	0
10.2 Net deferred tax liability			0	0
11. Ceded reinsurance premiums payable			0	0
12. Amounts withheld or retained for the account of others			0	0
13. Remittances and items not allocated			0	0
14. Borrowed money (including $ ____ current) and interest thereon $ ____ (including $ ____ current)			0	0
15. Amounts due to parent, subsidiaries and affiliates	1,076,021		1,076,021	1,196,293
16. Derivatives			0	
17. Payable for securities			0	0
18. Payable for securities lending			0	
19. Funds held under reinsurance treaties (with $ ____ authorized reinsurers and $ ____ unauthorized reinsurers)			0	0
20. Reinsurance in unauthorized companies			0	0
21. Net adjustments in assets and liabilities due to foreign exchange rates			0	0
22. Liability for amounts held under uninsured plans			0	0
23. Aggregate write-ins for other liabilities (including $ ____ current)	0	0	0	0
24 Total liabilities (Lines 1 to 23)	16,096,942	763,262	16,860,204	14,696,266
25. Aggregate write-ins for special surplus funds	XXX	XXX	0	0
26. Common capital stock	XXX	XXX		0
27 Preferred capital stock	XXX	XXX		0
28. Gross paid in and contributed surplus	XXX	XXX	28,613,218	14,613,218
29. Surplus notes	XXX	XXX		0
30. Aggregate write-ins for other than special surplus funds	XXX	XXX	0	0
31. Unassigned funds (surplus)	XXX	XXX	(4,537,241)	(5,089,189)
32. Less treasury stock, at cost: 32.1 ____ shares common (value included in Line 26 $ ____) 32.2 ____ shares preferred (value included in Line 27 $ ____)	XXX XXX	XXX XXX		0 0
33. Total capital and surplus (Lines 25 to 31 minus Line 32)	XXX	XXX	24,075,977	9,524,029
34. Total liabilities, capital and surplus (Lines 24 and 33)	XXX	XXX	40,936,181	24,420,315
DETAILS OF WRITE-INS				
2301. ____			0	0
2302. ____			0	0
2303. ____			0	0
2398. Summary of remaining write-ins for Line 23 from overflow page	0	0	0	0
2399. Totals (Lines 2301 through 2303 plus 2398) (Line 23 above)	0	0	0	0
2501. ____	XXX	XXX		0
2502. ____	XXX	XXX		0
2503. ____	XXX	XXX		0
2598. Summary of remaining write-ins for Line 25 from overflow page	XXX	XXX	0	0
2599. Totals (Lines 2501 through 2503 plus 2598) (Line 25 above)	XXX	XXX	0	0
3001. ____	XXX	XXX		0
3002. ____	XXX	XXX		0
3003. ____	XXX	XXX		0
3098. Summary of remaining write-ins for Line 30 from overflow page	XXX	XXX	0	0
3099. Totals (Lines 3001 through 3003 plus 3098) (Line 30 above)	XXX	XXX	0	0

STATEMENT OF REVENUE AND EXPENSES

	Current Year		Prior Year
	1 Uncovered	2 Total	3 Total
1. Member Months	XXX	410,543	373,780
2. Net premium income (including $ 0 non-health premium income)	XXX	121,189,946	105,044,458
3. Change in unearned premium reserves and reserve for rate credits	XXX		0
4. Fee-for-service (net of $ medical expenses)	XXX	834,713	806,607
5. Risk revenue	XXX		0
6. Aggregate write-ins for other health care related revenues	XXX	0	0
7. Aggregate write-ins for other non-health revenues	XXX	0	0
8. Total revenues (Lines 2 to 7)	XXX	122,024,659	105,851,065
Hospital and Medical:			
9. Hospital/medical benefits		89,927,027	79,069,710
10. Other professional services		2,372,757	2,111,141
11. Outside referrals		6,161,006	5,773,793
12. Emergency room and out-of-area		218,906	214,218
13. Prescription drugs		14,612,654	12,595,656
14. Aggregate write-ins for other hospital and medical	0	0	0
15. Incentive pool, withhold adjustments and bonus amounts			0
16. Subtotal (Lines 9 to 15)	0	113,312,349	99,784,518
Less:			
17. Net reinsurance recoveries		734,288	1,721,380
18. Total hospital and medical (Lines 16 minus 17)	0	112,578,061	98,063,138
19. Non-health claims (net)			0
20. Claims adjustment expenses, including $ 3,213,155 cost containment expenses		7,094,922	5,036,157
21. General administrative expenses		3,008,454	4,180,831
22. Increase in reserves for life and accident and health contracts (including $ increase in reserves for life only)		0	0
23. Total underwriting deductions (Lines 18 through 22)	0	122,681,437	107,280,127
24. Net underwriting gain or (loss) (Lines 8 minus 23)	XXX	(656,778)	(1,429,062)
25. Net investment income earned (Exhibit of Net Investment Income, Line 17)		888,319	894,953
26. Net realized capital gains (losses) less capital gains tax of $			0
27. Net investment gains (losses) (Lines 25 plus 26)	0	888,319	894,953
28. Net gain or (loss) from agents' or premium balances charged off [(amount recovered $) (amount charged off $)]			0
29. Aggregate write-ins for other income or expenses	0	(39,610)	28,296
30. Net income or (loss) after capital gains tax and before all other federal income taxes (Lines 24 plus 27 plus 28 plus 29)	XXX	171,931	(505,812)
31. Federal and foreign income taxes incurred	XXX	(77,471)	(171)
32. Net income (loss) (Lines 30 minus 31)	XXX	249,402	(505,641)
DETAILS OF WRITE-INS			
0601.	XXX		0
0602.	XXX		0
0603.	XXX		0
0698. Summary of remaining write-ins for Line 6 from overflow page	XXX	0	0
0699. Totals (Lines 0601 through 0603 plus 0698) (Line 6 above)	XXX	0	0
0701.	XXX		0
0702.	XXX		0
0703.	XXX		0
0798. Summary of remaining write-ins for Line 7 from overflow page	XXX	0	0
0799. Totals (Lines 0701 through 0703 plus 0798) (Line 7 above)	XXX	0	0
1401.			0
1402.			0
1403.			0
1498. Summary of remaining write-ins for Line 14 from overflow page	0	0	0
1499. Totals (Lines 1401 through 1403 plus 1498) (Line 14 above)	0	0	0
2901. Other Revenue		(39,610)	32,040
2902. Loss on Sale of Fixed Assets			(3,744)
2903.			
2998. Summary of remaining write-ins for Line 29 from overflow page	0	0	0
2999. Totals (Lines 2901 through 2903 plus 2998) (Line 29 above)	0	(39,610)	28,296

STATEMENT OF REVENUE AND EXPENSES (Continued)

		1 Current Year	2 Prior Year
	CAPITAL & SURPLUS ACCOUNT		
33.	Capital and surplus prior reporting year	9,524,029	10,227,733
34.	Net income or (loss) from Line 32	249,402	(505,641)
35.	Change in valuation basis of aggregate policy and claim reserves		0
36.	Change in net unrealized capital gains (losses) less capital gains tax of $		0
37.	Change in net unrealized foreign exchange capital gain or (loss)		0
38.	Change in net deferred income tax	(174,000)	174,000
39.	Change in nonadmitted assets	476,545	(372,063)
40.	Change in unauthorized reinsurance	0	0
41.	Change in treasury stock	0	0
42.	Change in surplus notes	0	0
43.	Cumulative effect of changes in accounting principles		0
44.	Capital Changes:		
	44.1 Paid in	0	0
	44.2 Transferred from surplus (Stock Dividend)		0
	44.3 Transferred to surplus		0
45.	Surplus adjustments:		
	45.1 Paid in	14,000,000	0
	45.2 Transferred to capital (Stock Dividend)	0	0
	45.3 Transferred from capital		0
46.	Dividends to stockholders		0
47.	Aggregate write-ins for gains or (losses) in surplus	0	0
48.	Net change in capital & surplus (Lines 34 to 47)	14,551,947	(703,704)
49.	Capital and surplus end of reporting year (Line 33 plus 48)	24,075,977	9,524,029
	DETAILS OF WRITE-INS		
4701.			0
4702.			0
4703.			0
4798.	Summary of remaining write-ins for Line 47 from overflow page	0	0
4799.	Totals (Lines 4701 through 4703 plus 4798) (Line 47 above)	0	0

RECONCILIATION OF SURPLUS FOR THE PERIOD SINCE THE LAST EXAMINATION

	2006	2007	2008
Capital and Surplus 12/31 Prior Year	$ 9,039,788	$12,511,032	$ 9,703,369
Net Income	$ 3,306,764	$(1,643,895)	$ 196,033
Change in Unrealized Capital Gains	0	0	0
Change in Net Deferred Income Tax	(1,203,000)	312,000	314,000
Change in Nonadmitted Assets	1,367,480	(1,475,768)	14,331
Paid In Surplus	0	0	0
Net Change in Capital and Surplus	$ 3,471,244	$(2,807,663)	$ 524,364
Capital and Surplus 12/31 Current Year	$12,511,032	$ 9,703,369	$10,227,733

	2009	2010
Capital and Surplus 12/31 Prior Year	$10,227,733	$ 9,524,029
Net Income	$ (505,641)	$ 249,402
Change in Unrealized Capital Gains	0	0
Change in Net Deferred Income Tax	174,000	(174,000)
Change in Nonadmitted Assets	(372,063)	476,546
Paid In Surplus	0	14,000,000
Net Change in Capital and Surplus	$ (703,704)	$14,551,948
Capital and Surplus 12/31 Current Year	$ 9,524,029	$24,075,977

COMPARATIVE STATUTORY BALANCE SHEET

The following exhibit reflects a statutory balance sheet comparison of the amounts reported by the Company in its 2010 Annual Statement and the amounts determined through examination.

	Per Company	Per Examination	Notes
Admitted Assets			
Bonds	$20,712,224	$20,712,224	
Cash and Short-Term Investments	18,633,898	18,633,898	
Investment Income Due and Accrued	137,444	137,444	
Premiums Receivable	370,359	370,359	
Amounts Recoverable From Reinsurers	178,000	178,000	
Amounts Receivable Uninsured Plans	9,640	9,640	
Federal Income Tax Recoverable	57	57	
Net Deferred Tax Asset	193,000	193,000	
EDP Equipment	162,306	162,306	
Receivable From Affiliates	34,931	34,931	
Health Care Receivable	504,322	504,322	
Total Admitted Assets	$40,936,181	$40,936,181	
Liabilities			
Claims Unpaid	$12,187,943	$12,187,943	
Unpaid Claim Adjustment Expenses	748,000	748,000	
Advance Premiums	755,607	755,607	
General Expenses Due and Accrued	2,092,633	2,092,633	
Amounts Due to Parent	1,076,021	1,076,021	
Total Liabilities	$16,860,204	$16,860,204	
Capital and Surplus			
Contributed Surplus	$28,613,218	$28,613,218	
Unassigned Funds	(4,537,241)	(4,537,241)	Note A
Net Capital and Surplus	$24,075,977	$24,075,977	Note B
Total Liabilities and Surplus	$40,936,181	$40,936,181	

EXAMINATION NOTES TO THE COMPARATIVE STATUTORY BALANCE SHEET

NOTE A - UNASSIGNED FUNDS

The unassigned funds of the Company at December 31, 2010, as determined by this examination are the same as the amount reported by the Company in its 2010 Annual Statement.

NOTE B - NET CAPITAL AND SURPLUS

The net capital and surplus of the Company at December 31, 2010, as determined by this examination, is the same as the amount reported by the Company in its 2010 Annual Statement.

SUMMARY OF COMMENTS AND RECOMMENDATIONS

Reference Page	
3	**COMPLIANCE WITH PREVIOUS EXAMINATION RECOMMENDATIONS** - The Company has not complied with all of the recommendations of the 2005 Financial Examination Report.
5	**OFFICERS** - As required by SDCL 47-23-24, it is recommended that annually the CEO appoint officers of the Company and the Board of Directors approve such officer appointments.
7	**COMMITTEES** - It is again recommended that the Company comply with its Bylaws by having the Board of Directors appoint the various committees of the Company.
20	**NOTE B - NET CAPITAL AND SURPLUS** - The net capital and surplus of the Company at December 31, 2010, as determined by this examination, is the same as the amount reported by the Company in its 2010 Annual Statement.

ACKNOWLEDGEMENT

The examiners wish to express appreciation for the cooperation extended by the officers and employees of SHP during the course of the examination.

In addition to the undersigned, Bruce Basham, CFE and Kristie Goetz, CFE, examiners for the South Dakota Division of Insurance, participated in the examination.

Respectfully submitted,

Marty Warns

Marty Warns, CFE
Division of Insurance
State of South Dakota
Representing Zone III, NAIC

Sample Company

Incurred February 2012 through January 2013
Paid February 2012 through April 2013

Presented by: Sanford Health Plan

SANFORD HEALTH PLAN

Group Reporting Package

Thank you for your continued business with Sanford Health Plan. Our unrelenting goal is to provide our clients with the highest level of customer service. As a part of our continued commitment to you, it is our pleasure to provide you with a comprehensive group reporting package.

It is important for us to help our clients understand the variables of the renewal rate calculations. However, it is important to note that your renewal is not based solely on formulas. We carefully consider each group's renewal individually. Your group is not just a conglomeration of numbers. You are a group of unique individuals. The sections below contain descriptions of the main variables which are part of your renewal calculation.

Credibility

Credibility is a statistical metric which correlates directly to group size and is a measure of claim volatility. Credibility is also impacted by the amount of historical data which is available. For example, a group that has less than 100 members and two years or fewer of historical claims data is statistically very volatile. Thus, the group has very little credibility. Conversely, a group with 1,000+ members and three or more years of historical claims is much more predictable actuarially in terms of future claims. The credibility for your group is currently 40%.

Group Size

Group size is determined by total employees eligible for health insurance or by total employees regardless of eligibility for health insurance. Group size is defined by codified law for the respective state in which the company is domiciled. Factors are assigned to differently sized groups and those factors are used in the renewal rate development calculation. Small group renewal calculations are developed primarily on the combinations of average age, gender distribution, plan design and expected health conditions of the group. Actual claims experience is not heavily weighted for small groups. Actual experience is the credibility weighted with the overall experience of SHP's commercial book of business. Large group renewal calculations rely more heavily on actual claims experience of the group. However, even though a group may be defined as "large" by state law; a group generally has to have an average of 500+ members per month to be considered credible. Your group is Large.

Pooling (Large Groups Only)

During the course of a plan year a group may have members that incur large claims. Those large claims may be considered outliers or claims that disproportionately contribute to a group's annual claims experience. In order to avoid penalizing a group for isolated large claims, the large claims are partially excluded and replaced with an expected level of claims. This is called pooling. The precise dollar amount at which claims are considered outliers is called the pooling point. The pooling point is determined by the membership and benefits offered by the group. Your pooling point is currently $40,000.

Loss Ratio

The loss ratio is a measure of the relationship between total claims paid and total premium received. It is calculated by dividing total claims by total premium. 86 cents of every premium dollar gets paid out in claims, so we target an 86% loss ratio for our book of business. Loss ratios for small and medium sized groups are volatile. The reason for the volatility is that the loss ratio has a direct relationship to credibility which is based on group size. The target loss ratio is for the entire book of business. Thus, a renewal calculation may not necessarily be intuitive for any given individual group.

Trend

Rate development calculations utilize trend as a factor. The simplest way to view trend is by equating it to inflation. Just as a dollar is worth less today than it was a year ago; healthcare costs are more expensive today than they were a year ago. Trend applies to hospital/physician services, prescription drug costs, utilization and medical advancements.

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Introduction

All reports in this specific report package are available:

- Period I
  - Incurred February 2012 through January 2013
  - Paid February 2012 through April 2013
- Period II
  - Incurred February 2011 through January 2012
  - Paid February 2011 through April 2013
- in DOC format

Selected reports within this package include period-over-period comparison.

Please note that many dollar values are rounded to the nearest dollar for increased readability. However, calculated values (such as total sums) are calculated precisely and then rounded afterwards. This produces more accurate results, but may occasionally cause calculated fields to appear inexact.

Please Note:

The information contained in this report has been produced from data provided to Verisk Health, which has not been independently verified by Verisk Health for accuracy or completeness. Additional information, including any claims that have been incurred but not paid as of the date of this report, or claims that were subject to subsequent adjustment, should be considered before any action is taken on the basis of the contents of this report. Additionally, if the underlying CPT codes for each laboratory test or panel are not submitted to Verisk Health in the medical claims, then the scores in the Quality and Risk measures may appear lower than they actually are. This report does not constitute the provision of medical or legal advice by Verisk Health to any party.

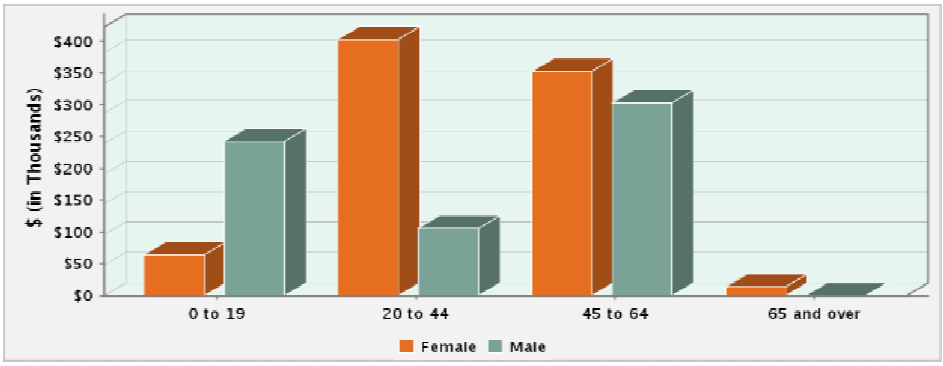
1. Membership Overview

The two tables and the figure in this section describe the membership demographics and the relationship to claims expense. This section includes medical and pharmacy claims expenses.

Table 1.1: Breakdown of Membership by Relationship

	Average Age	Members		Total Amount Billed	Employee Paid	Member Expenses	
		Total	Current			Total	% of Total
Employee	44	170	127	$1,645,272	$99,843	$724,949	47%
Spouse	43	92	73	$1,065,948	$104,648	$435,261	28%
Dependent	12	159	127	$702,507	$76,124	$395,481	25%
Total	**32**	**421**	**327**	**$3,413,726**	**$280,615**	**$1,555,691**	**100%**

Figure 1.1: Claims Paid by Gender and Age



Please Note: Average age for females is 34. Average age for males is 30.

Table 1.2: Membership Profile

	Female		Male		Total	
	Members	% of Members	Members	% of Members	Members	% of Members
Employee	53	13%	117	28%	170	40%
Spouse	77	18%	15	4%	92	22%
Dependent	67	16%	92	22%	159	38%
Total	**197**	**47%**	**224**	**53%**	**421**	**100%**

2. Health Plan Enrollment Analysis

Figure 2.1: Enrollment Category Distribution

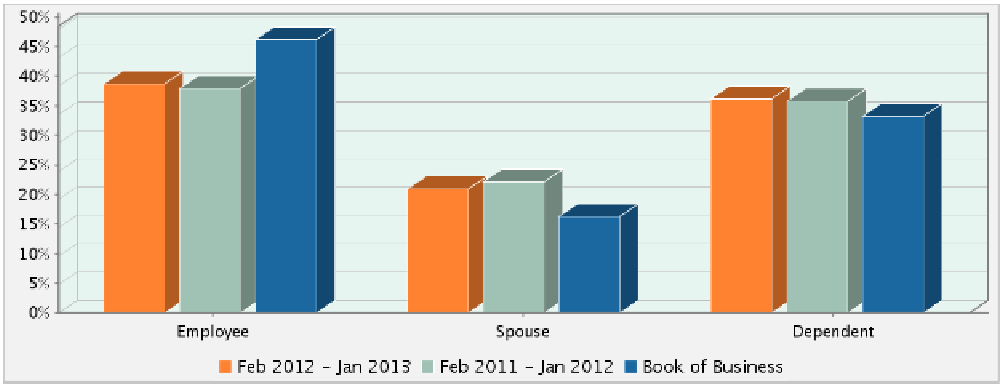


Table 2.1: Member Count by Enrollment Category

Category	Feb 2012 - Jan 2013		Feb 2011 - Jan 2012		Norm	Book of Business
	Count	%	Count	%		
Employee	170	40%	183	40%	48%	48%
Spouse	92	22%	107	23%	20%	17%
Dependent	159	38%	173	37%	32%	35%
Total Members	**421**	**100%**	**463**	**100%**	**100%**	**100%**

Please Note: Norm values are based on values derived from Verisk Health's Commercial Normative database.

Sample Company's employee population consists of 40% of the total population. 40% is eight percent lower than Verisk's norm. The dependent population is 38% of Sample Company's total population. 38% is six percent higher than Verisk's norm. The relationship between the employee and dependent population indicates that Sample Company has more family contracts than the Verisk norm.

The total population for Sample Company decreased by 42 members from the prior to current period. This is a 9.1% decrease.

Figure 2.2: Paid Claim Trend by Enrollment Category

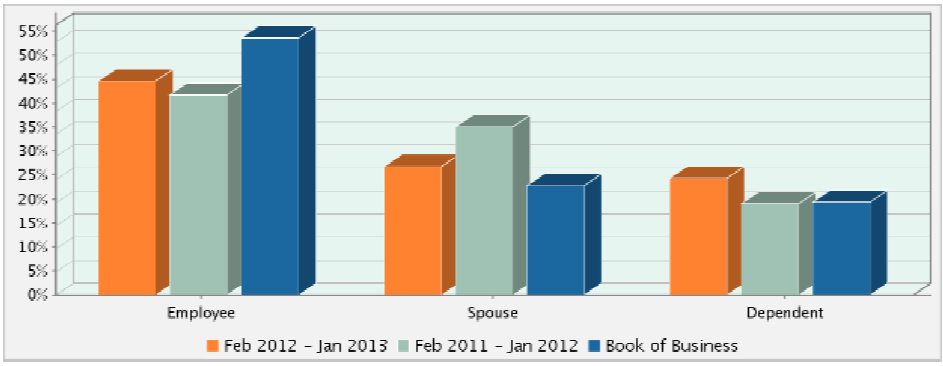


Table 2.2: Percentage of Claim Paid by Enrollment Category

Category	Feb 2012 - Jan 2013		Feb 2011 - Jan 2012		Norm	Book of Business
	Amount	%	Amount	%		
Employee	$724,949	47%	$490,543	44%	57%	56%
Spouse	$435,261	28%	$411,197	37%	28%	24%
Dependent	$395,481	25%	$224,001	20%	15%	20%
Total Members	**$1,555,691**	**100%**	**$1,125,741**	**100%**	**100%**	**100%**

Please Note: Norm values are based on values derived from Verisk Health's Commercial Normative database.

The significant increase in total claims dollars from the prior to current period is due to the number of claims over $40,000. In the prior period, the sum of claims over $40,000 was approximately $208,000. The sum of claims over $40,000 for the current period is approximately $649,000.

The $649,000 in large claims does not consist of one or two shock claims; rather it is comprised of seven claims that are over $40,000 but under $125,000.

3. Employer/Employee Share of Expenses

The following data evaluates the employer and employee paid for the current year and prior year. The user can compare the trend of the parameters as follows:

Figure 3.1: Employer/Employee Share of Expenses

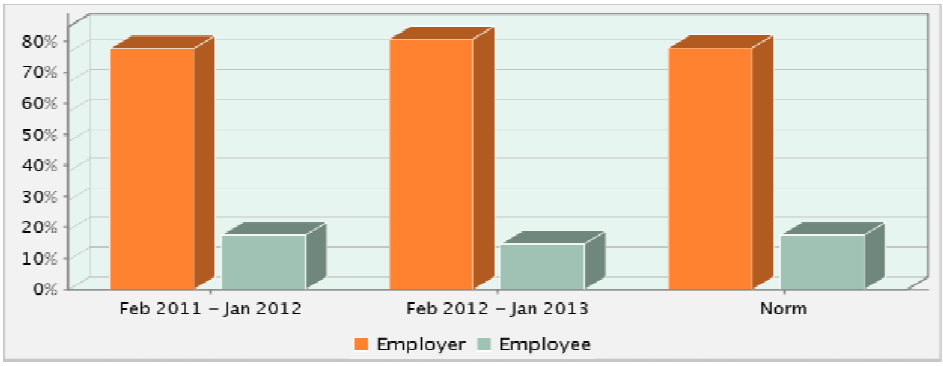


Table 3.1: Employer/Employee share of expenses

	Client		Norm
	Feb 2012 - Jan 2013	Feb 2011 - Jan 2012	
Employer Paid	85%	82%	82%
Employee Paid	15%	18%	18%

Please Note: Norm values are based on values derived from Verisk Health's Commercial Normative database.

Employee paid consists of co-pays, coinsurances, and deductibles paid by an enrollee, the spouses, and their dependents. Similarly, employer paid includes total paid by the plan for enrollee, the spouses, and their dependents. The following table breaks down the cost accordingly.

Table 3.2: Breakdown of Membership by Relationship

	Employee Paid			Employer Paid		
	Feb 2012 - Jan 2013	Feb 2011 - Jan 2012	% Change	Feb 2012 - Jan 2013	Feb 2011 - Jan 2012	% Change
Employee	$99,843	$106,278	-6%	$724,949	$490,543	48%
Spouse	$104,648	$86,895	20%	$435,261	$411,197	6%
Dependent	$76,124	$62,072	23%	$395,481	$224,001	77%
Total	**$280,615**	**$255,245**	**10%**	**$1,555,691**	**$1,125,741**	**38%**

4. Key Utilization Metrics Summary

Table 4.1 displays utilization information, typically on a services per 1000 basis, for a number of categories. A combination of variables (e.g. decreased office visits with increased ER visits) should also be considered for evaluation.

Table 4.1

Category	Metric Type	Feb 2012 - Jan 2013	Feb 2011 - Jan 2012	% Change
ER Visits	Per 1000	139	112	24%
Total Office Visits	Per 1000	4,417	3,947	12%
Regular Office Visits	Per 1000	2,777	2,558	9%
Preventive Office Visits	Per 1000	531	511	4%
Behavioral Health Office Visits	Per 1000	999	784	27%
Consultations	Per 1000	103	87	18%
Other Office Visits	Per 1000	5	8	-38%
Chiropractic Visits	Per 1000	1,280	1,223	5%
Physical Therapy	Per 1000	825	758	9%
MRI Scan	Per 1000	65	46	41%
CT Scan	Per 1000	33	38	-13%
Deliveries	Per 1000	27	20	35%
SNF Days	Per 1000	0	0	0%
Inpatient Days	Per 1000	278	237	17%
Total Admissions	Per 1000	93	79	18%
Pharmacy Scripts	Per 1000	9,794	9,682	1%
Pharmacy Scripts Mail Order	% of Mail Order	9%	8%	12%
Pharmacy Scripts Brand Drugs	% of Brand Drugs	27%	30%	-11%
Average Length of Stay	Average Days	3.0	3.0	0%

Please Note: Utilization metrics are always calculated on incurred basis.

Generic Rx utilization is up from 74.4% in the prior period to 78.6% in the current period.

Single-source brand Rx utilization is down from 19.4% in the prior period to 15.6% in the current period.

5. Key Cost Metrics Summary

Table 5.1 shows key cost metrics for the group. Any significant period-over-period percentage change should be reviewed in more detail for causes. This table provides overall per employee per month costs and trends as well as breakouts by medical and pharmacy. The breakout of costs between plan and employee identify how the employee's portion of overall costs relates to plan costs, information that is valuable in establishing plan design and cost sharing percentages. Additionally, attention should be paid to the brand/generic ratio for pharmaceuticals. If the generic percentage is too low or dropping, benefit plan and/or formulary changes should be considered.

Table 5.1

Category	Feb 2012 - Jan 2013	Feb 2011 - Jan 2012	% Change
Overall Medical Expenses (Employee + Plan)	$1,510,743	$1,104,722	37%
Employee Paid	$280,615	$255,245	10%
Plan Paid	$1,230,128	$849,477	45%
Hospital Inpatient Paid (%)	37%	28%	31%
Office Visits Paid (%)	11%	15%	-23%
Emergency Room Paid (%)	3%	3%	15%
Top 20 Diagnosis Group Paid (%)	68%	43%	59%
Overall Pharmacy Expenses (Employee + Plan)	$325,563	$276,264	18%
Employee Paid	$0	$0	0%
Plan Paid	$325,563	$276,264	18%
Mail Order Paid (%)	0%	0%	0%
Brand Drugs Paid (%)	83%	81%	3%
PMPM Expenses	$353.00	$239.52	47%
Medical	$279.13	$180.74	54%
Pharmacy	$73.87	$58.78	26%
Total PEPM Expenses	$880.41	$597.21	47%
Medical	$696.17	$450.65	54%
Pharmacy	$184.25	$146.56	26%

6. Claims Expense Distribution

This section divides the member population by total paid bands to reflect the spending trend of this population.

Figure 6.1: Member Distribution by Paid Amount Band

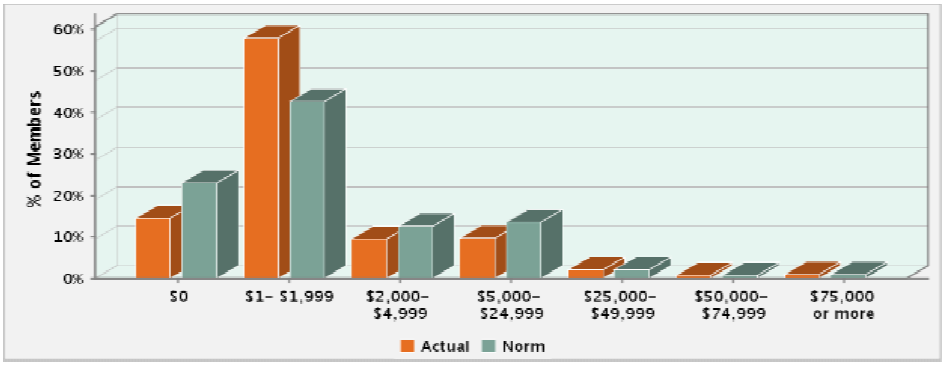


Table 6.1: Expense Distribution by Paid Amount Band

Paid Amount Band	Members			Paid			Cumulative Paid	Average Paid Per Member
	Count	%	Norm	Amount	%	Norm		
$0	64	15%	24%	$0	0%	0%	$0	$0
$1-$1,999	256	61%	45%	$126,816	8%	6%	$126,816	$495
$2,000-$4,999	42	10%	13%	$137,705	9%	9%	$264,521	$3,279
$5,000-$24,999	43	10%	14%	$412,010	26%	33%	$676,531	$9,582
$25,000-$49,999	9	2%	2%	$277,082	18%	15%	$953,613	$30,787
$50,000-$74,999	3	1%	1%	$171,256	11%	8%	$1,124,869	$57,085
$75,000 or more	4	1%	1%	$430,822	28%	29%	$1,555,691	$107,706

Please Note:

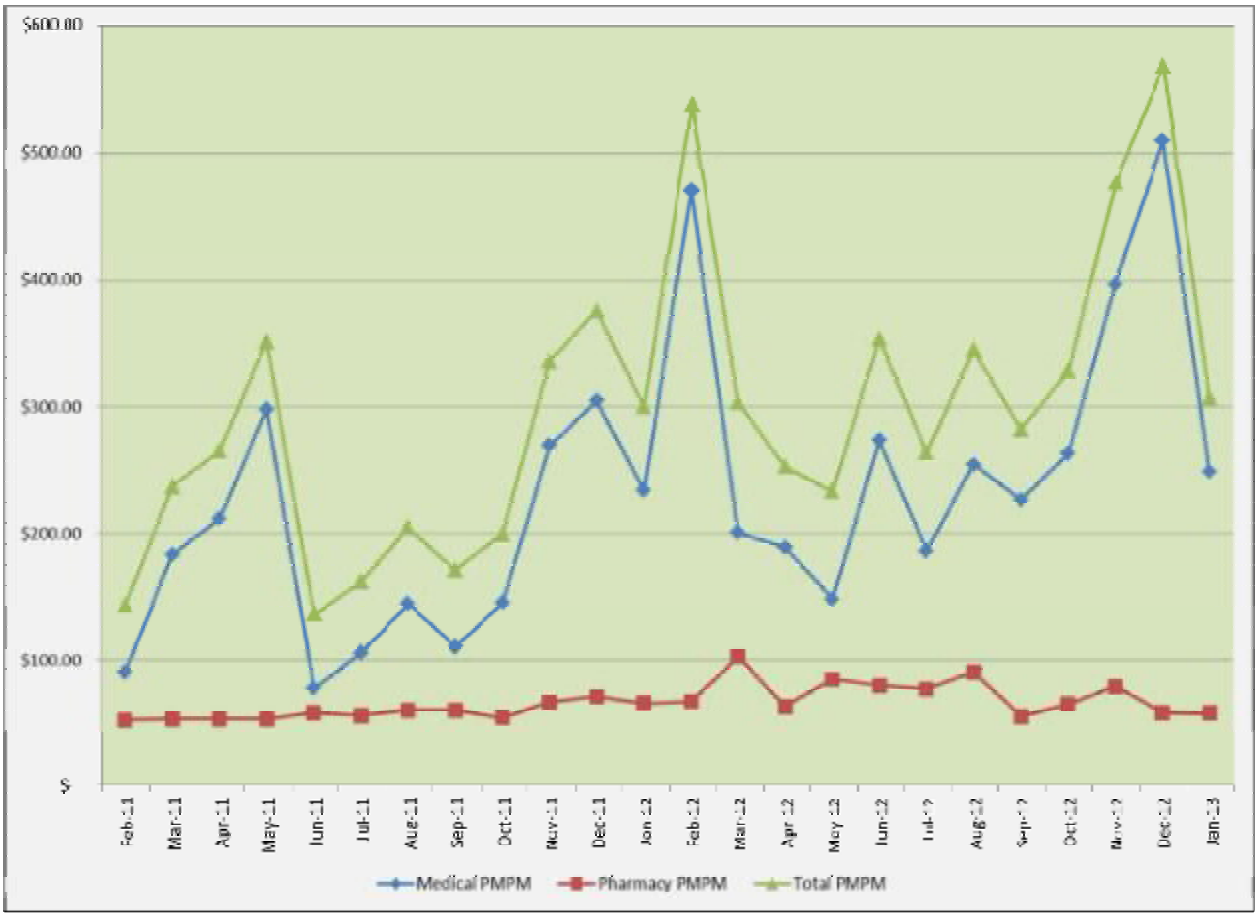
- $0 was credited back to the plan during the cycle period.
- Norm values are based on values derived from Verisk Health's Commercial Normative database.
- Claims Expense Distribution includes Medical and Pharmacy claims (to the extent that Pharmacy Claims are available).

1% of the population accounted for 28% of the total claims in the current period.
76% of the population accounted for 8% of the total claims in the current period.

7. Monthly Comparison of Paid Claims

Figure 7.1 tracks monthly claim paid amounts for the full cycle. Seasonality in claims paid (in terms of date incurred) is expected, with the highest monthly claims generally occurring in the winter. Claim volumes may also rise just before or after installation of a new health plan.

Figure 7.1: Paid Claims PMPM



8. Top 10 Places of Service Analysis

Table 8.1 shows places of service ranked according to medical claim expenses. Period-over-period percentage changes in Places of Service can be helpful when investigating changes in utilization patterns or when trying to understand the impact of plan design change. Increases in some categories may be appropriate. For example, outpatient hospital experience and office visits may increase as inpatient hospital services are more efficiently provided in the outpatient setting. Places of service experiencing large increases for many employers are Emergency Room, Outpatient Hospital, and Laboratory services.

Table 8.1

Service	Feb 2012 - Jan 2013		Feb 2011 - Jan 2012		% Change in Plan Paid
	Plan Paid	% of Total Plan Paid	Plan Paid	% of Total Plan Paid	
Inpatient Hospital	$456,863	37%	$240,187	28%	90%
Outpatient Hospital	$317,649	26%	$132,943	16%	139%
Office	$280,120	23%	$186,737	22%	50%
Ambulatory Surgical Center	$78,826	6%	$183,688	22%	-57%
Emergency Room Hospital	$62,581	5%	$49,315	6%	27%
Independent Laboratory	$17,092	1%	$25,570	3%	-33%
Home	$11,542	1%	$20,442	2%	-44%
Urgent Care Facility	$2,205	0%	$2,309	0%	-5%
Inpatient Psychiatric Facility	$2,179	0%	$288	0%	656%
Ambulance - Land	$1,071	0%	$6,545	1%	-84%
Subtotal	**$1,230,128**	**100%**	**$848,023**	**100%**	**45%**
All Others	**$0**	**0%**	**$1,454**	**0%**	**-100%**
Total	**$1,230,128**	**100%**	**$849,477**	**100%**	**45%**

9. Common Illness Analysis

Several common illnesses have been selected for analysis. Management of these key disorders may reflect effectiveness of overall medical management.

Figure 9.1: Common Illness

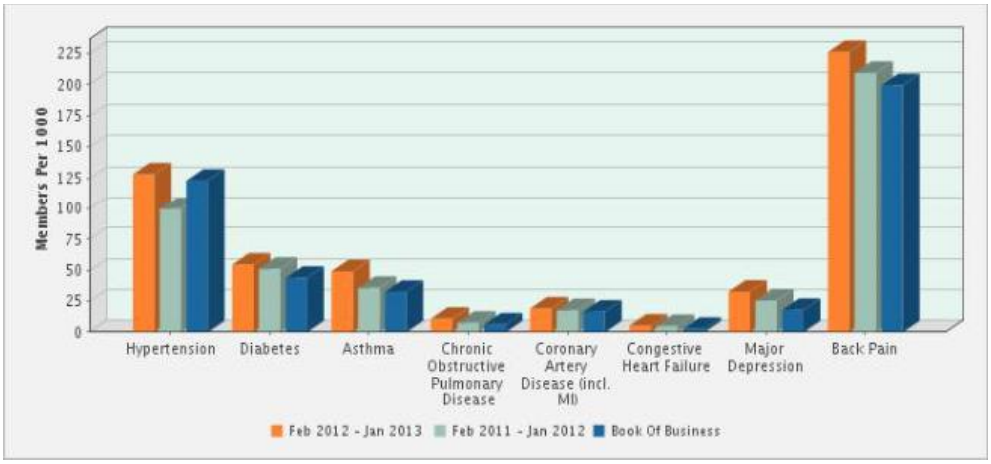


Table 9.1: Common Illness

Common Illness	Member Per 1000			
	Feb 2012 - Jan 2013	Feb 2011 - Jan 2012	Norm	Book of Business
Hypertension	128	100	102	123
Diabetes	54	51	62	44
Asthma	49	36	20	33
Chronic Obstructive Pulmonary Disease	11	8	9	6
Coronary Artery Disease (incl. MI)	19	18	20	17
Congestive Heart Failure	5	5	5	3
Major Depression	33	26	17	18
Back Pain	226	209	112	200

Please Note:

- Common Illness metrics are always calculated on incurred basis.
- Norm values are based on values derived from Verisk Health's Commercial Normative database.
- Members may fall within multiple categories.

10. Disease Conditions Utilization Summary

Monitoring the utilization patterns for disease conditions offers valuable insight into benefit design and/or case and disease management program performance. Table 10.1 presents utilization patterns of members with all disease condition, ranked by number of members, for office visits, emergency room visits and hospital admissions. In general, high utilization rates for such measures as inpatient admissions and emergency room services in these conditions bring into question the adequacy of outpatient care, plan design incentives to encourage outpatient care, and medical management performance.

Table 10.1

Disease Condition	# of Members	Members per 1000	Office Visits per 1000	ER Visits per 1000	Admissions per 1000	PMPY
Back Pain	83	226	9,621	196	157	$8,328
Neck Pain	50	136	11,716	262	131	$7,610
Hypertension	47	128	6,631	229	207	$11,841
Hyperlipidemia	42	114	5,571	214	54	$5,146
Diabetes	20	54	13,296	394	225	$8,800
Asthma	18	49	17,312	500	250	$14,314
Headache	16	44	22,467	800	267	$11,697
Major Depression	12	33	29,104	716	269	$11,855
Congenital Anomalies	8	22	6,429	0	429	$18,115
Coronary Artery Disease (incl. MI)	7	19	7,429	143	286	$20,615
Cancer	6	16	36,231	692	923	$58,692
High Risk Pregnancy	5	14	10,133	800	800	$11,483
Osteoarthritis	5	14	9,400	0	400	$14,253
Chronic Obstructive Pulmonary Disease	4	11	6,500	0	0	$3,400

Please Note:

- In this table a member can have multiple conditions.
- Metrics are always calculated on incurred basis.
- Members' total claims fall within each condition category to which they are assigned.
- Total PMPY expenses are $4,236 for the period February 2012 – January 2013.

Asthma: 11 members diagnosed; 5 with care gaps (45%)
Gaps in care (Sanford Health Plan benchmark 40%)

- Patients without inhaled corticosteroids or leukotriene inhibitor in the last 12 months
- Patients without an office visit in the last 12 months
- Patients without other inhalers in the last 12 months
- Patients without short-acting beta agonists in the last 12 months

Chronic obstructive pulmonary disease (COPD): 3 diagnosed; 2 with care gaps (67%)
Gaps in care (Sanford Health Plan benchmark 73%)

- Patients without a COPD-related long office visit in the last 12 months
- Patients without spirometry testing in the last 12 months
- Patients without an office visit in the last 12 months
- Patients not taking other nebulizers in the last 12 months

Coronary artery disease: 8 diagnosed; 4 with care gaps (50%)
Gaps in care (Sanford Health Plan benchmark 31%)

- Patients without a long office visit in the last 12 months
- Patients without antihyperlipidemic drugs in the last 12 months
- Patients without antihypertensive drugs in the last 12 months
- Patients who are not taking beta-blockers, ACE/ARB or statins in the last 12 months

Congestive heart failure (CHF): 2 diagnosed; 1 with care gaps (50%)
Gaps in care (Sanford Health Plan benchmark 50%)

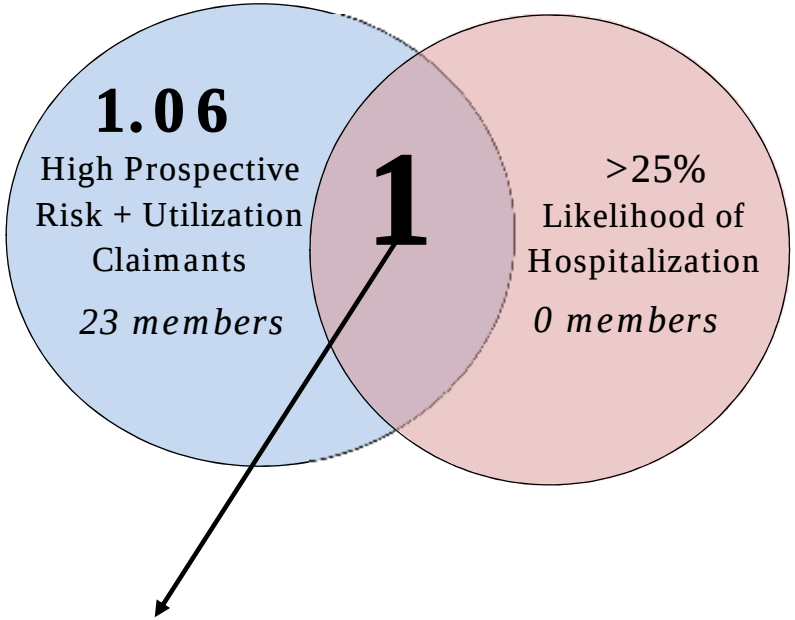
- Patients without beta-blocker drugs in the last 12 months
- Patients without a long office visit in the last 12 months
- Patients without an LDL-C or lipid profile test in the last 12 months
- Patients who are not taking beta-blockers, ACE/ARB or diuretics in the last 12 months

Diabetes: 14 diagnoses; 10 with care gaps (71%)
Gaps in care (Sanford Health Plan benchmark 56%)

- Patients without an HbA1c test in the last 12 months
- Patients without a lipid profile test in the last 12 months
- Patients without an ACE inhibitor or ARB drugs in the last 12 months
- Patients with hospitalization-related to short-term complications of diabetes in the analysis period
- Patients without home glucose measurement devices in the last 12 months
- Patients without liver function tests in the last 12 months

Sample Company

High Risk Member Analysis



High Prospective Risk + Utilization Claimants
= 24 members

Likelihood of Hospitalization > 25%
= 1 member

Individual *(by cost)*	Primary Diagnosis
1	Colorectal Cancer

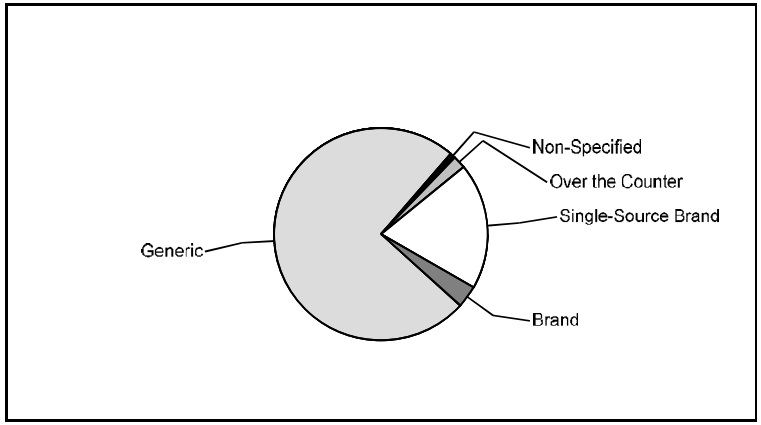
PRESCRIPTION DRUG SUMMARY

20110201 through 20120131 | 20110201 through 20120131

SANFORD HEALTH PLAN

20110201 through 20120131

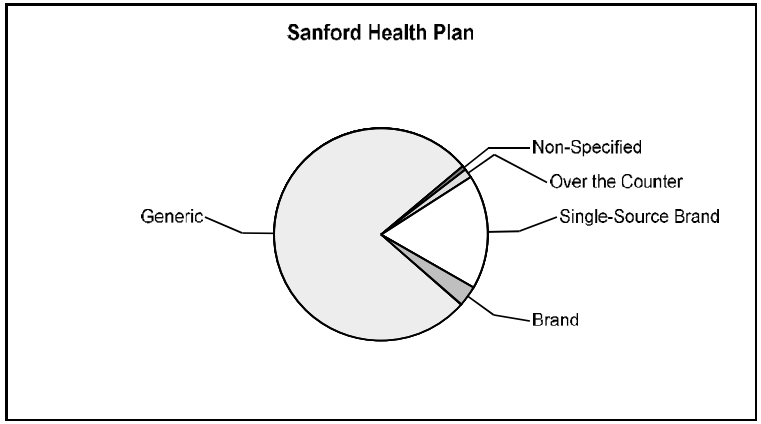
Type of Drug	Number of Fills	% of Total	Amount Billed	Mos. Supply	Average Cost
Brand	122	3.37 %	$16,646.21	131	$127.07
Generic	2,702	74.60 %	$54,322.14	3,144	$17.28
Non-Specified	31	0.86 %	$1,564.32	31	$50.46
Over the Counter	70	1.93 %	$5,406.81	107	$50.53
Single-Source Brand	697	19.24 %	$198,660.73	731	$271.77
Total	**3,622**		**$276,600.21**	**4,144**	**$66.75**



Sanford Health Plan

20110201 through 20120131

Type of Drug	Number of Fills	% of Total	Amount Billed	Mos. Supply	Average Cost
Brand	8,887	3.14 %	$765,444.35	10,269	$74.54
Generic	218,728	77.39 %	$4,771,881.04	254,924	$18.72
Non-Specified	1,808	0.64 %	$45,206.64	1,809	$24.99
Over the Counter	3,998	1.41 %	$344,522.83	5,212	$66.10
Single-Source Brand	49,209	17.41 %	$11,617,104.29	53,681	$216.41
Total	**282,630**		**$17,544,159.15**	**325,895**	**$53.83**



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Spl Group: *All | All*
Group:

/Reports/Prescription Drug Summary
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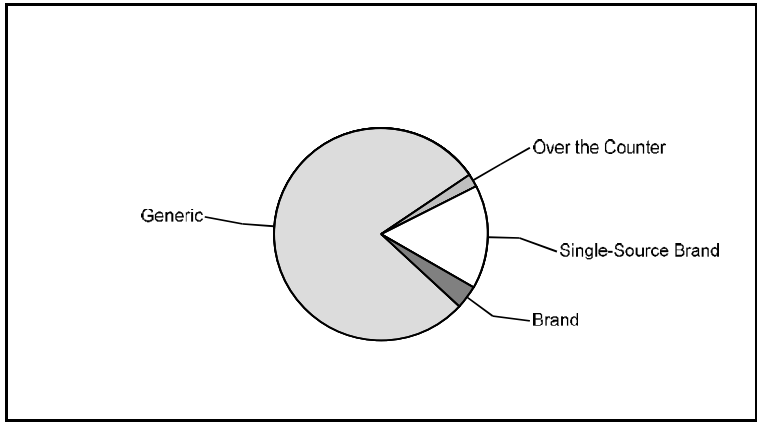
PRESCRIPTION DRUG SUMMARY

20120201 through 20130131 | 20120201 through 20130131

SANFORD HEALTH PLAN

20120201 through 20130131

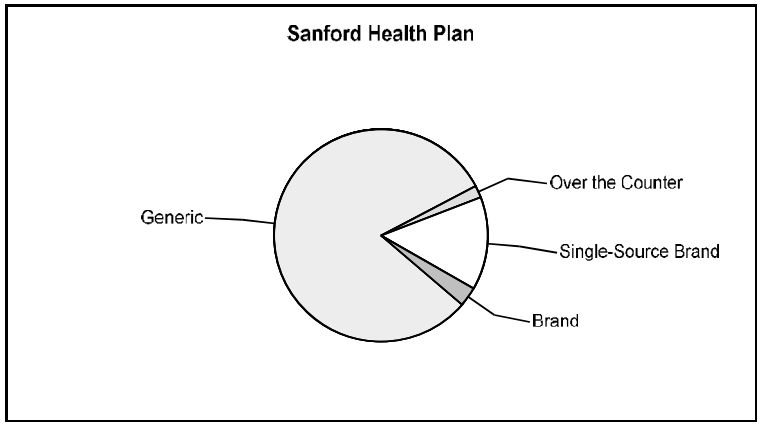
Type of Drug	Number of Fills	% of Total	Amount Billed	Mos. Supply	Average Cost
Brand	120	3.54 %	$16,319.24	130	$125.53
Generic	2,667	78.65 %	$62,433.55	3,122	$20.00
Over the Counter	68	2.01 %	$4,563.27	108	$42.25
Single-Source Brand	536	15.81 %	$242,149.54	572	$423.34
Total	**3,391**		**$325,465.60**	**3,932**	**$82.77**



Sanford Health Plan

20120201 through 20130131

Type of Drug	Number of Fills	% of Total	Amount Billed	Mos. Supply	Average Cost
Brand	8,216	2.95 %	$723,688.50	9,554	$75.75
Generic	225,985	81.05 %	$5,827,117.04	273,762	$21.29
Over the Counter	5,134	1.84 %	$419,835.86	6,782	$61.90
Single-Source Brand	39,480	14.16 %	$11,357,937.01	43,555	$260.77
Total	**278,815**		**$18,328,578.41**	**333,653**	**$54.93**



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Spl Group: *All | All*
Group:

/Reports/Prescription Drug Summary
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RX - Brand vs Generic Summary

From: 2011/02 through 2012/01

Prog/LOB: PS **Special Group:**

Group/Div No: 000XXX

GvsB	Count GvsB	%	Sum AmtBilled	Avg Cost	Sum RxMosSupply
B	128	**3.37%**	$16,646.21	$127.07	131
G	2826	**74.37%**	$54,322.14	$17.28	3144
N	33	**0.87%**	$1,564.32	$50.46	31
O	76	**2.00%**	$5,406.81	$50.53	107
S	737	**19.39%**	$198,660.73	$271.77	731
Grand Total	3800		$276,600.21	$66.75	4144

B = Brand
G = Generic
N = Non-Specified
O = Over the Counter (ie. Diabetic Supplies)
S = Single-source Brand

RX - Brand vs Generic Summary

From: 2012/02 through 2013/01

Prog/LOB: PS **Special Group:**

Group/Div No: 000XXX

GvsB	Count GvsB	%	Sum AmtBilled	Avg Cost	Sum RxMosSupply
B	130	**3.61%**	$16,319.24	$125.53	130
G	2831	**78.62%**	$62,433.55	$20.00	3122
O	78	**2.17%**	$4,563.27	$42.25	108
S	562	**15.61%**	$242,149.54	$423.34	572
Grand Total	3601		$325,465.60	$82.77	3932

B = Brand
G = Generic
N = Non-Specified
O = Over the Counter (ie. Diabetic Supplies)
S = Single-source Brand

CLIENT LOSS RATIO

Beg DOS: 20110601 End DOS: 20120531

Period	Contracts	Member Months	Total Premiums Billed	# of Med Claims Paid	% Mem w/Med Claims	Medical Claims Paid	Medical Claim Adjustments*	Medical Claims Billed	Medical Claims Allowed	Med % of Savings	# of Rx's	% of Mem w/Rx	Prescription Claims	Rx % of Savings	TOTAL Claims Paid	Adj Loss Ratio
201106	164	412	$96,692	275	28%	$31,941	$0	$72,608	$49,241	32%	368	32%	$24,065	16%	$56,005	58%
201107	158	396	$95,841	236	26%	$41,700	$0	$105,403	$59,958	43%	325	31%	$22,330	14%	$64,030	67%
201108	151	374	$92,758	272	31%	$53,906	$0	$126,633	$80,006	37%	323	32%	$22,658	15%	$76,564	83%
201109	151	369	$92,148	262	31%	$40,684	$0	$79,622	$54,273	32%	337	33%	$22,349	16%	$63,033	68%
201110	152	375	$93,719	406	45%	$54,309	$0	$142,878	$82,640	42%	332	33%	$20,501	15%	$74,810	80%
201111	154	379	$94,593	329	30%	$102,021	$0	$236,854	$139,817	41%	318	30%	$25,386	16%	$127,407	135%
201112	152	375	$93,545	325	27%	$114,264	$0	$258,648	$135,360	48%	323	31%	$26,576	16%	$140,840	151%
201201	158	385	$102,041	351	31%	$90,057	$0	$307,861	$130,682	58%	373	30%	$25,293	15%	$115,350	113%
201202	158	388	$103,027	376	32%	$182,249	$0	$420,587	$263,215	37%	306	30%	$26,106	16%	$208,356	202%
201203	156	384	$102,678	337	29%	$76,999	$0	$177,010	$105,161	41%	339	33%	$39,365	14%	$116,364	113%
201204	155	383	$102,325	293	30%	$72,415	$0	$183,710	$99,293	46%	313	30%	$24,329	17%	$96,743	95%
201205	155	382	$102,386	285	28%	$56,628	$0	$127,805	$75,350	41%	305	31%	$32,449	17%	$89,077	87%
TOTALS	155	4602	$1,171,754	3,747		$917,173	$0	$2,239,619	$1,274,996	43%	3,962		$311,406	16%	$1,228,579	105%

BeginningPaid: 20110601
Paid Through: 20130531
Group:
Spl Grp:

Prog/LOB: PS
Region: All
Period Sel: M

***ADJUST = Partial Self-Funding.**

NOTE: Information on this report is subject to change. The report is based on claims received and paid as of the date of this report.
Sanford Health Plan contracted providers must submit claims within 120 days. Beechstreet providers must submit claims within 365 days.

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Report: rptClientLossRatio

CLIENT LOSS RATIO

Beg DOS: 20120601 End DOS: 20130331

Period	Contracts	Member Months	Total Premiums Billed	# of Med Claims Paid	% Mem w/Med Claims	Medical Claims Paid	Medical Claim Adjustments*	Medical Claims Billed	Medical Claims Allowed	Med % of Savings	# of Rx's	% of Mem w/Rx	Prescription Claims	Rx % of Savings	TOTAL Claims Paid	Adj Loss Ratio
201206	153	378	$100,994	328	30%	$103,942	$0	$280,903	$143,065	49%	302	31%	$30,208	16%	$134,150	133%
201207	150	371	$97,114	283	30%	$69,090	$0	$148,457	$96,143	35%	313	29%	$28,690	16%	$97,780	101%
201208	149	367	$97,436	303	29%	$93,333	$0	$228,288	$118,117	48%	340	31%	$33,164	15%	$126,497	130%
201209	147	364	$96,112	335	41%	$82,410	$0	$207,017	$137,019	34%	307	32%	$20,260	19%	$102,670	107%
201210	143	362	$95,182	326	36%	$95,166	$0	$227,898	$120,293	47%	354	34%	$23,596	21%	$118,761	125%
201211	139	353	$93,417	328	35%	$140,015	$0	$249,508	$159,475	36%	352	34%	$28,008	15%	$168,024	180%
201212	135	348	$91,113	340	34%	$177,493	$0	$498,113	$220,646	56%	355	36%	$20,330	20%	$197,823	217%
201301	127	327	$83,330	389	33%	$81,170	$0	$273,745	$142,072	48%	350	32%	$19,058	17%	$100,228	120%
201302	128	327	$82,783	284	30%	$37,325	$0	$135,305	$76,626	43%	312	32%	$22,442	17%	$59,767	72%
201303	127	327	$82,253	330	33%	$382,640	$0	$1,032,008	$420,525	59%	356	35%	$27,942	19%	$410,582	499%
TOTALS	140	3524	$919,733	3,246		$1,262,584	$0	$3,281,242	$1,633,981	50%	3,341		$253,698	17%	$1,516,282	165%

BeginningPaid: 20120601
Paid Through: 20130531
Group:
Spl Grp:

Prog/LOB: PS
Region: All
Period Sel: M

*ADJUST = Partial Self-Funding.

NOTE: Information on this report is subject to change. The report is based on claims received and paid as of the date of this report.
Sanford Health Plan contracted providers must submit claims within 120 days. Beechstreet providers must submit claims within 365 days.

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Report: rptClientLossRatio

HEDIS Report 2013

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Plan on the best fit.

sanfordhealthplan.com

SANFORD
HEALTH PLAN

SVHP-0189 11/13

November 2013

Sanford Health has a long history of placing quality before all else as stated in our mission statement *"Dedicated to the Work of Health and Healing"*. As a subsidiary of Sanford Health, Sanford Health Plan believes that in order to meet the needs of our patients and healthcare partners, everything we do must be of the highest quality and value available in our region. We do so by utilizing Sanford Values: *Courage, Passion, Resolve, Advancement, Family*.

By improving the quality of care provided, employing the best managed care practices and principles, and partnering with our consumers, employer groups and physicians, Sanford Health Plan is able to assist in saving lives, reducing disability, improving productivity and managing health care costs.

We also believe that healing involves promoting and improving the health of our communities. To demonstrate our commitment to providing the highest quality of care and service, Sanford Health Plan would like to present our HEDIS® (Healthcare Effectiveness Data and Information Set) 2013 report along with the quality improvement activities and health management programs implemented by the Plan. This data provides you - our customer - with the information you need to judge our success in meeting our goals in various performance areas.

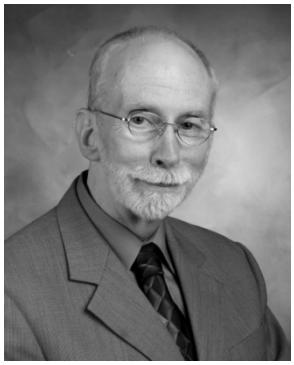
Along with Sanford Health, Sanford Health Plan's very foundation is quality. Reporting HEDIS rates will assist the Plan in identifying our strong points and areas where improvements need to be made. The Plan believes that the only way to achieve continuous quality improvement is to have its entire organization embrace a well-defined Quality Improvement Program and Annual Work Plan in their day to day activities. As this is our twelfth year of reporting, we are able to compare our rates to those of previous year's to determine where we made progress and where we did not. We look forward to future reporting years, which will allow us to continue to monitor and evaluate improvements that can be made in all aspects of our care and service delivery.

If you have any suggestions for us on how we can improve this report, or if you have any questions regarding the interpretation of the results, please feel free to contact our Care Management Department at (888) 315-0884.

Sincerely,

Ruth Krystopolski
President
Sanford Health Plan

Michael P. Crandell, MD
Chief Medical Officer
Sanford Health Plan



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Introduction

About Sanford Health Plan

Sanford Health Plan began operations in South Dakota in September 1997 as an open access, non-gatekeeper model, managed care organization. The first members were enrolled in January 1998. In January 1998, Sanford Health Plan became licensed in Minnesota. To obtain this licensure, the State of Minnesota required us to form a separate corporation known as Sanford Health Plan of Minnesota. Sanford Health Plan further expanded its service area to include Northwestern Iowa upon receiving licensure in August 1998 in that state. Sanford Health Plan also received a Certificate of Authority in February 2010 to operate in North Dakota as an expansion of its South Dakota license.

For purposes of this report, we will refer to Sanford Health Plan and Sanford Health Plan of Minnesota as "Sanford Health Plan" or "the Plan"; as operations for the two, including areas such as the quality improvement program, are one in the same. Beginning with HEDIS 2005, the Plan received permission from NCQA and the Minnesota Department of Health to combine the Sanford Health Plan and Sanford Health Plan of Minnesota populations to report one combined HEDIS rate.)

Sanford Health Plan is a wholly owned, nonprofit subsidiary of Sanford Health. The Plan is designed to provide employers and employees with the most appropriate cost effective health care possible. The Board of Trustees of Sanford Health is ultimately responsible for the Plan, but has delegated to the Sanford Health Plan Board of Directors the authority to act as the governing body. Sanford Health Plan's President and Chief Medical Officer are accountable to the Plan's Board of Directors.

Sanford Health Plan benefits are designed as a unique alternative to existing health insurance packages in our region. Applying our expertise in health care administration, quality patient care and network development, we have created a Health Plan with a focus on the health and well being of our members. Sanford Health Plan's medical management program monitors utilization and coordinates care plans to ensure that our members are receiving the most appropriate care. Also, prevention and wellness programs are built into the benefit package. This encourages members to seek treatment early and to live healthier lifestyles, thereby controlling long-term health care costs. The key to our success is our network of primary care physicians, specialists and hospitals. In partnership with these health care practitioners, Sanford Health Plan actively promotes health care education, prevention and early detection. Together, we understand the need to deliver the best possible patient care, maintaining good community health, while developing cost-effective solutions. Sanford Health Plan members have access to hundreds of area physicians and a hospital network that includes the region's most commended tertiary care facility - Sanford USD Medical Center. Because high-quality care is a priority, our network of practitioners is subject to strict credentialing guidelines and performance reviews.

In short, Sanford Health Plan has been developed to ensure that all members receive the right care, in the right place, at the right time, for the right reason.

Sanford Health Plan and its participating practitioners acknowledge their responsibility to provide high quality care in a cost-effective manner through an ongoing monitoring, evaluation and improvement process. The organized method for monitoring, evaluating, and improving the quality, safety and appropriateness of health care services including behavioral health care to members through related activities and studies is known as the Quality Improvement (QI) program. Throughout this report you will find descriptions of the quality improvement activities and health management programs that the Sanford Health Plan has implemented to improve the health and well being of its members. The activities that pertain directly to the HEDIS rates will be reported in conjunction with those rates.

Sanford Health Plan Awarded Accreditation

Commercial HMO Product
Effective through November 15, 2016

Sanford Health Plan prides itself on providing quality group health insurance and supporting wellness programs. Sanford Health Plan is equally honored to be recognized for our dedication. The National Committee for Quality Assurance (NCQA) has awarded Sanford Health Plan's commercial HMO with a Commendable Accreditation.

The NCQA Health Plan Accreditation is a voluntary review process. Surveys include rigorous on-site and off-site evaluations of over 60 standards and selected HEDIS® measures. NCQA sends a team of trained health care experts, including physicians, to conduct the survey.

According to NCQA, the standards are purposely set high to encourage health plans to continuously improve enhance their quality. They are intended to help

organizations achieve the highest level of performance possible, reduce patient risk for untoward outcomes and create an environment of continuous improvement. “The accreditation process gives our consumers and purchasers something other than cost alone to compare. It allows them to evaluate the quality of different health plans through a variety of dimensions,” said Dr. Crandell.

“Achieving an accreditation status of Commendable from NCQA is a sign that a health plan is serious about quality. It is awarded to plans whose service and clinical quality meet or exceed NCQA’s rigorous requirements for consumer protection and quality improvement.” said Margaret E. O’Kane, President, NCQA.

HEDIS®

HEDIS (Healthcare Effectiveness Data and Information Set) is a set of standardized performance measures designed to ensure that purchasers and consumers have the information they need to reliably compare healthcare quality.

Originally, HEDIS was designed to address private employers’ needs as purchasers of health care. It has since been adapted for use by public purchasers, regulators and consumers. Quality improvement activities, health management programs and practitioner profiling efforts have all used HEDIS as a core measurement set.

This report provides you with Sanford Health Plan’s HEDIS 2013 results (based on calendar year 2012 data) and the programs and activities that have been put in place to improve the health care and services the Plan provides to its members. The HEDIS measures, which are reported on an annual basis, are divided into domains that all reflect different aspects of care. The results are presented to you in comparison to NCQA’s Quality Compass® HEDIS 2011 benchmarks, which are a compilation of audited HEDIS results (based on calendar year 2010 data) from health plans across the nation. The HEDIS results are also compared to the Healthy People 2020 goals, where available. Healthy People 2020 is a set of 10-year health objectives for the United States aimed at health promotion and disease prevention initiatives. It was developed by the U.S. Department of Health and Human Services with the input of public health and prevention experts and a wide range of government officials and organizations.

The NCQA HEDIS Compliance Audit™ assures both purchasers and health plans of fair and accurate comparisons of health plan performance. Certified auditors, using a process designed by NCQA, rigorously audit the HEDIS results annually. The scope of the NCQA HEDIS Compliance Audit includes the following domains: Effectiveness of Care; Access/Availability of Care; Satisfaction with the Experience of Care; Health Plan Stability; Use of Services; Cost of Care; and Health Plan Descriptive Information. Sanford Health Plan has undergone a full audit. The following HEDIS measures in this report were deemed reportable according to the NCQA HEDIS Compliance Audit® Standards.

The source for data contained in this publication is Quality Compass® 2011 and is used with the permission of the National Committee for Quality Assurance (NCQA). Any analysis, interpretation, or conclusion based on these data is solely that of the authors, and NCQA specifically disclaims responsibility for any such analysis, interpretation, or conclusion. Quality Compass® is a registered trademark of the National Committee for Quality Assurance (NCQA).
NCQA HEDIS Compliance Audit™ is a trademark of the National Committee for Quality Assurance (NCQA).

Effectiveness of Care Domain

The Effectiveness of Care domain measures provide information about the quality of clinical care the Plan delivers to its members including preventive, acute and chronic care services. Many of these measures are utilized in the development and refinement of the Plan's Quality Improvement Activities, Health Management Programs and Clinical Practice Guidelines. These measures all include some form of continuous enrollment criteria which specifies that a member has to be enrolled in the Plan a certain amount of time before they may be included in the final population for the measure. This way the only members that are included in the final population are members for whom the Plan has had an adequate opportunity to provide services and education.

The Effectiveness of Care measures included in this report are:

- Adult BMI Assessment
- Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents
- Childhood Immunization Status
- Immunizations for Adolescents
- Human Papillomavirus Vaccine for Female Adolescents (HPV)
- Colorectal Cancer Screening
- Breast Cancer Screening
- Cervical Cancer Screening
- Chlamydia Screening in Women
- Appropriate Testing for Children with Pharyngitis
- Appropriate Treatment for Children with Upper Respiratory Infection
- Avoidance of Antibiotic Treatment in Adults with Acute Bronchitis
- Use of Spirometry Testing in the Assessment and Diagnosis of COPD
- Use of Appropriate Medications for People with Asthma
- Medication Management for People with Asthma
- Cholesterol Management for Patients with Cardiovascular Conditions
- Controlling High Blood Pressure
- Comprehensive Diabetes Care
- Use of Imaging Studies for Low Back Pain
- Follow-Up Care for Children Prescribed ADHD Medication
- Antidepressant Medication Management
- Follow-Up After Hospitalization for Mental Illness
- Flu Shots for Adults Ages 50 – 64
- Medical Assistance with Smoking Cessation

Adult BMI Assessment

According to the National Health and Nutrition Examination Survey (NHANES) 2007–2008, about one-third of adults in the United States are overweight and about one-third are obese. Guidelines from various organizations, including the National Heart, Lung, and Blood Institute whose clinical practice guidelines the Plan has adopted, indicate that the most useful measure of overweight and obesity is the body mass index (BMI).

Adult BMI Assessment measures the percentage of members ages 18-74 who had an outpatient visit and who had their body mass index (BMI) documented during the measurement year or the year prior to the measurement year.

Adult BMI Assessment

	HEDIS 2010	HEDIS 2011	HEDIS 2012	HEDIS 2013	National Average 2011[1]	Healthy People 2020
BMI Assessed in 2011 or 2012:	**44.04%**	**60.34%**	**73.67%**	**83.54%**	**55.4%**	**53.6%**

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Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents

According to the National Heart, Lung, and Blood Institute, the rate of obesity in children 2-5 has doubled in the last 30 years and the rate of obesity in children and adolescents ages 6-19 has tripled in that time. BMI percentile can be a useful screening tool for practitioners for assessing obesity in children and adolescents and offer the opportunity for counseling on the importance of good nutrition and physical activity.

This measure looks at the percentage of members ages 3-17 who had an outpatient visit with a PCP or OB/GYN and who had evidence of BMI percentile documentation, counseling for nutrition and counseling for physical activity during the measurement year.

Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents

	HEDIS 2010	HEDIS 2011	HEDIS 2012	HEDIS 2013	National Average 2011[1]	Healthy People 2020
BMI Percentile Assessed in 2012:	**31.63%**	**39.66%**	**49.64%**	**66.42%**	**44.7%**	**54.7%**
Counseling for Nutrition in 2012:	**25.30%**	**30.66%**	**32.60%**	**48.42%**	**46.4%**	**15.2%**
Counseling for Physical Activity in 2012:	**29.44%**	**32.60%**	**33.09%**	**48.42%**	**43.0%**	

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Childhood and Adolescent Immunization Status

Immunizations prevent serious illnesses, lost school and work days and millions of dollars in health care costs. This measure was developed based on immunization recommendations from the Centers for Disease Control and Prevention, the American Academy of Pediatrics, the American Academy of Family Physicians and the Advisory Committee on Immunization Practices.

Childhood Immunization Status involves measuring the percentage of enrolled children who turned 2 years old during the measurement year, who were continuously enrolled for 12 months preceding their 2nd birthday and who were identified as having the recommended vaccinations by their 2nd birthday. These vaccinations include:

1. **4 DTaP** (diphtheria, tetanus and pertussis) vaccines on or before child's 2nd birthday. Vaccinations administered prior to 42 days after birth are not counted.
2. **3 IPV** (polio) vaccinations on or before child's 2nd birthday. Vaccinations administered prior to 42 days after birth are not counted.
3. **1 MMR** (measles, mumps and rubella) on or before child's 2nd birthday.
4. **3 HiB** (Haemophilus influenza type B) vaccinations on or before 2nd birthday. Vaccinations administered prior to 42 days after birth are not counted.
5. **3 Hepatitis B** vaccinations on or before child's 2nd birthday.
6. **1 VZV** (chicken pox) vaccine on or before child's 2nd birthday.
7. **4 Pneumococcal conjugate** vaccinations on or before child's 2nd birthday.
8. **1 Hepatitis A** vaccinations on or before child's 2nd birthday.
9. **3 Rotavirus** (or 2 if the 2 dose type) vaccinations on or before child's 2nd birthday. Vaccinations administered prior to 42 days of birth are not counted.
10. **2 Influenza** vaccinations on or between 6 months after birth and child's 2nd birthday.

There are also 9 combination rates now calculated which consist of various combinations of the above vaccinations. Two of these combination rates are:

1. **Combination #2**: Children who have received 4 DtaP vaccinations, 3 IPV vaccinations, 1 MMR vaccination, 2 HiB vaccinations, 3 hepatitis B vaccinations and 1 VZV vaccination as specified above.
2. **Combination #3**: Children who have received all vaccinations in Combination #2 as well as 4 pneumococcal conjugate vaccinations as specified above.

Childhood Immunization Status

	HEDIS 2010	HEDIS 2011	HEDIS 2012	HEDIS 2013	National Average 2011[1]	Healthy People 2020[2]
4 DTaP	83.70%	84.59%	86.64%	90.13%	86.5%	90%
3 IPV	92.54%	96.07%	96.58%	94.55%	92.4%	90%
1 MMR	90.06%	91.80%	93.49%	94.81%	91.5%	90%
3 Hib	94.75%	95.74%	95.89%	95.84%	94.1%	90%
3 Hepatitis b	93.92%	94.43%	92.81%	92.21%	87.9%	90%
1 VZV	87.02%	91.80%	91.44%	94.03%	91.3%	90%
4 Pneumococcal	81.22%	88.20%	86.30%	90.91%	87.0%	90%
Hepatitis A	27.90%	22.30%	27.74%	63.9%	39.0%	60%
Rotavirus	54.70%	68.20%	68.15%	72.73%	75.1%	80%
Influenza	59.39%	65.25%	66.44%	75.58%	61.1%	80%
Combination #2	78.18%	79.02%	79.11%	85.19%	78.0%	
Combination #3	71.82%	74.10%	75.68%	84.42%	75.7%	80%

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[2]Healthy People 2020 target is based on children ages 19 through 35 months.

Immunizations for Adolescents involves measuring the percentage of enrolled adolescents who turned 13 years old during the measurement year, who were continuously enrolled for 12 months preceding their 13th birthday and who were identified as having the recommended vaccinations by their 13th birthday. These vaccinations include:

1. **1 meningococcal conjugate or meningococcal polysaccharide** vaccine on or between the adolescent's 11th and 13th birthdays.
2. **1 tetanus, diphtheria toxoids and acellular pertussis vaccine (Tdap) or 1 tetanus, diphtheria toxoids vaccine (Td)** vaccine on or between the adolescent's 10th and 13th birthdays.
3. **Combination measure** looks at how many of the adolescents in this group had both of the above vaccines.

Immunizations for Adolescents

	HEDIS 2010	HEDIS 2011	HEDIS 2012	HEDIS 2013	National Average 2011[1]	Healthy People 2020[2]
Meningococcal	15.70%	23.66%	29.24%	30.03%	61.9%	44%
Tdap/Td	38.91%	40.69%	53.49%	54.31%	77.0%	47%
Combination	13.31%	22.08%	26.58%	28.72%	59.4%	

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[2]Healthy People 2020 Goal is for adults ages 13-15.

Human Papillomavirus Vaccine (HPV) for Female Adolescents involves measuring the percentage of female adolescents 13 years of age, who were continuously enrolled for 12 months preceding their 13th birthday, and who had 3 doses of the HPV vaccine by their 13th birthday.

Human Papillomavirus Vaccine (HPV) for Female Adolescents

	HEDIS 2012	HEDIS 2013	National Average 2011[1]	Healthy People 2020[2]
3 Doses of HPV Vaccine	**8.03%**	**9.44%**	**NA**	**80%**

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[2]Healthy People 2020 Goal is for adults ages 13-15.

Immunization Guidelines

Sanford Health Plan recognizes that high immunization rates help prevent the spread of vaccine preventable diseases, as well as reduce the rates of disability and death from these diseases. Prevention through immunization can help reduce future health care costs associated with treating the disease and reduces employee absenteeism.

An immunization schedule is available on the Centers for Disease Control and Prevention website at www.cdc.gov/vaccines/. A copy may also be obtained by calling the Health Plan at (888) 315-0884. These immunization guidelines are available to Plan practitioners on the website and members and practitioners are informed of the availability of the immunization schedules in the newsletters. The Preventive Health Guidelines brochure directs members to the website or to call for a copy of the immunization schedules. Adolescent wellness visit reminder activities over the last year have included a reminder to get immunizations updated. A birthday card is sent to kids turning 11 and 12 to remind them to get their annual wellness visit and recommended immunizations. Postcard reminders were also sent to a targeted group of adolescents and their parents to remind them to get their wellness physical.

Colorectal Cancer Screening

According to the American Cancer Society, colorectal cancer is the third most commonly diagnosed cancer in men and women in the United States. Screening tests can help prevent some cancers by finding and removing polyps that could become cancer in the future. In other cases, screening tests can identify cancers in their early stages and improve the chances of successful treatment.

Colorectal Cancer Screening

	HEDIS 2010	HEDIS 2011	HEDIS 2012	HEDIS 2013	National Average 2011[1]	Healthy People 2020[2]
Colorectal Cancer Screening	**54.74%**	**59.90%**	**60.51%**	**61.27%**	**62.4%**	**70.5%**

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[2]Healthy People 2020 Goal is for adults ages 50-75.

This measure looks at the percentage of adults 50 to 75 years of age who were continuously enrolled during the measurement year and year prior to the measurement year and who had appropriate screening for colorectal cancer. Appropriate screenings are defined as one of the following:

- Fecal occult blood test during the measurement year.
- Flexible sigmoidoscopy during the measurement year or the 4 years prior to the measurement year.
- Colonoscopy during the measurement year or the 9 years prior to the measurement year.

Colorectal Cancer Screening Activities

Sanford Health Plan's male and female members who are turning 40, 50 and 60 receive birthday cards that include reminders for colorectal cancer screenings and the Plan's benefit for these screenings. Preventive Health Guidelines, including colorectal cancer screening benefits, are published in the Member Messenger and Provider Perspective newsletters yearly, are included in new member Enrollment Packets, and are available on the Health Plan website at www.sanfordhealthplan.com. The colorectal cancer screening clinical practice guidelines that Sanford Health Plan adopted and recommends to practitioners are published in the Provider Perspective yearly and are also available on the Plan's website.

All members are encouraged to complete an online health risk assessment on our WorldDoc site which includes questions related to colorectal screenings. WorldDoc also offers a health library and self management tools on this site as well

As a member of the South Dakota Council on Colorectal Cancer, Sanford Health Plan also collaborates with the American Cancer Society and other health care organizations and insurance plans on improving colorectal cancer screening rates and reducing the incidence of colorectal cancer. The Council has completed community education initiatives and continuing education related to colorectal cancer.

Breast Cancer Screening

According to the American Cancer Society:

- Breast cancer is the most common cancer among women, other than skin cancer.
- Breast cancer risk increases with age and every woman is at risk regardless of family history.
- Your chance of having breast cancer some time during your life is about 1 in 8.

Mammography is one of the most effective screening methods available for detecting breast cancer. Early detection of breast cancer increases the likelihood of successful treatment.

This measure looks at the percentage of women ages 40 through 69 years, who were continuously enrolled during the measurement year and the year prior to the measurement year, and who had a mammogram during one of those years.

Breast Cancer Screening

	HEDIS 2010	HEDIS 2011	HEDIS 2012	HEDIS 2013	National Average 2011[1]	Healthy People 2020[2]
Mammogram in 2011 or 2012:	**76.46%**	**75.03%**	**74.80%**	**74.76%**	**70.50%**	**81.1%**

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[2]Healthy People 2020 Goal is based on women ages 50-74.

Breast Health Initiative

Sanford Health Plan implemented numerous activities designed to provide members with information on breast health that promotes early detection of potential breast cancer. The activities included:

- Members are asked to complete an online health risk assessment on our WorldDoc site. There is a health library and self management tools on this site as well.
- Reminders –
  - A card was mailed which included a reminder to get a mammogram, reasons for the importance and information on benefits.
  - These members were offered the chance to enter a drawing for a prize if they got their mammogram completed.
  - A mammogram reminder card was mailed to women 3 months after their 40th birthday. Birthday cards are also mailed to those turning 40, 50 and 60 and include mammogram reminders.
  - Care Management nurses contacting female members for health management or screening purposes also addressed the importance of breast cancer screening.
- Mobile Screening – Some employer groups were offered the opportunity to arrange for mobile mammography screening so employees would have the convenience of having screening done in privacy at the worksite.
- Periodic articles are published in the Member Messenger newsletter with facts about breast cancer and the importance of mammography.
- Preventive Health Guidelines, including mammogram benefits, are published in the Member Messenger and Provider Perspective newsletters yearly, are included in new member Enrollment Packets, and are available on the Plan's website at www.sanfordhealthplan.com.
- The breast cancer screening clinical practice guidelines that Sanford Health Plan adopted and recommends to practitioners are published in the Provider Perspective yearly and are also available on the Plan's website.

Cervical Cancer Screening

Regular Pap tests can help detect cervical cancer in its early stages and thereby reduce the morbidity and mortality of women with cervical cancer. Clinical guidelines recommend Pap testing every 1 to 3 years for all women who have been sexually active or who are over the age of 21.

This measure looks at the percentage of women ages 21 through 64 years, who were continuously enrolled during the measurement year and the 2 years prior to the measurement year and who had a Pap test during one of those years.

Cervical Cancer Screening Activities

Sanford Health Plan's female members who are turning 21 and those who are turning 40, 50 and 60 receive birthday cards that include reminders for yearly gynecological exams and the Plan's benefits for yearly Pap tests. Periodic articles are published in the Member Messenger stressing the importance of having a yearly exam. Preventive Health Guidelines, including yearly Pap test benefits, are published in the Member Messenger and Provider Perspective newsletters yearly, are included in new member Enrollment Packets, and are available on the Health Plan website at www.sanfordhealthplan.com. The cervical cancer screening clinical practice guidelines that were adopted and recommended to practitioners are published in the Provider Perspective yearly and are also available on the Plan's website.

All members are encouraged to complete an online health risk assessment on our WorldDoc site which includes questions related to cervical cancer screenings. WorldDoc also offers a health library and self management tools on this site as well

Cervical Cancer Screening

	HEDIS 2010	HEDIS 2011	HEDIS 2012	HEDIS 2013	National Average 2011[1]	Healthy People 2020
Pap Test in 2010, 2011 or 2012	**78.80%**	**77.93%**	**77.25%**	**76.20%**	**76.5%**	**93.0%**

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Chlamydia Screening in Women

Chlamydia is the most common sexually transmitted disease, which left untreated can cause serious reproductive and other health problems. Routine screening and treatment can reduce serious consequences of Chlamydia in women. This underscores the importance of prevention and early treatment in the primary care arena.

The Chlamydia Screening in Women measure looks at the percentage of women ages 16 through 24 years, who were continuously enrolled during the measurement year, and who had a test for Chlamydia during the measurement year.

Chlamydia Screening in Women

Chlamydia Screening in 2012:	HEDIS 2010	HEDIS 2011	HEDIS 2012	HEDIS 2013	National Average 2011[1]	Healthy People 2020
Age 16 - 20	29.29%	29.31%	25.42%	25.62%	41.5%	65.9%
Age 21 – 24	33.20%	28.46%	32.43%	34.35%	48.4%	78.3%
Age 16 – 24	31.44%	28.84	29.29%	30.47%	45.0%	

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Appropriate Testing for Children with Pharyngitis

Excessive use of antibiotics is resulting in a higher prevalence of antibiotic resistance. Clinical guidelines recommend that only children with diagnosed group A streptococcus pharyngitis based on a group A strep test (rapid assay or throat culture) be treated with antibiotics.

This measure looks at the percentage of children 2 - 18 years of age who were diagnosed with pharyngitis, prescribed an antibiotic and received a group A streptococcus test for the episode. A higher rate indicates appropriate testing.

Appropriate Treatment for Children with Pharyngitis

	HEDIS 2011	HEDIS 2012	HEDIS 2013	National Average 2011[1]
Strep Test Administered	78.26%	74.55%	72.57%	80.20%

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Appropriate Treatment for Children with Upper Respiratory Infection

The common cold is one of the top reasons that parents take their children to see their doctor. Antibiotics, although not recommended by current guidelines for the treatment of the common cold, are still often prescribed in these cases.

This measure looks at the percentage of children 3 months - 18 years of age who were given a diagnosis of upper respiratory infection (URI) and were NOT dispensed an antibiotic prescription on or 3 days after the date the child was seen by the doctor for the URI. Not being prescribed an antibiotic in this situation indicates appropriate treatment.

Appropriate Treatment for Children with Upper Respiratory Infection

	HEDIS 2011	HEDIS 2012	HEDIS 2013	National Average 2011[1]
Antibiotic Not Dispensed (Indicates Appropriate Treatment)	97.86%	73.96%	73.62%	83.90%

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Avoidance of Antibiotic Treatment in Adults with Acute Bronchitis

Clinical guidelines do not indicate the need for antibiotics in treating adults with acute bronchitis unless they have another comorbidity or infection for which antibiotics may be appropriate.

This measure looks at the percentage of adults 18 – 64 years of age with a diagnosis of acute bronchitis who were NOT dispensed an antibiotic prescription on or 3 days after the diagnosis of acute bronchitis. Not being prescribed an antibiotic in this situation indicates appropriate treatment.

Avoidance of Antibiotic Treatment in Adults with Acute Bronchitis

	HEDIS 2012	HEDIS 2013	National Average 2011[1]
Appropriate Avoidance of Antibiotics	15.30%	16.39%	23.5%

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Use of Spirometry Testing in the Assessment & Diagnosis of COPD

According to the National Heart, Lung and Blood Institute, chronic obstructive pulmonary disease (COPD) is the third leading cause of death in the United States. COPD is a lung disease in which the airways that carry air in and out of the lungs are partially blocked resulting in shortness of breath. COPD patients may also have a chronic cough. The next 2 measures are focused on the diagnosis and management of COPD. A Spirometry test assists the doctor in verifying the COPD diagnosis as well as determining the severity of the condition.

This measure assesses whether members ages 40 and over with a new diagnosis or newly active COPD received appropriate Spirometry testing to confirm the diagnosis.

Use of Spirometry Testing in the Assessment & Diagnosis of COPD

	HEDIS 2010	HEDIS 2011	HEDIS 2012	HEDIS 2013	National Average 2011[1]
Appropriate Spirometry Testing	40.35%	44.83%	38.24%	41.79%	42.9%

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Asthma

Asthma is a disease of the lungs. When someone has asthma, the airways or breathing tubes in the lungs are very sensitive to many things in the air. When an asthma flare-up happens, the airways swell and fill with mucus and the muscles around the airways tighten making the airways smaller and making it hard to breathe. According to the National Heart, Lung and Blood Institute, more than 22 million people in the United States have been diagnosed with asthma. The good news is that asthma can be well managed by knowing and avoiding triggers for flare-ups and by taking medications that provide long-term control of asthma symptoms. The following 2 measures are related to management of asthma medications.

Use of Appropriate Medications for People with Asthma

This measure evaluates whether members with persistent asthma (as defined below) are being prescribed medications for long-term control of asthma. The list of acceptable medications comes from the National Heart, Lung and Blood Institute's (NHBLI) National Asthma Education and Prevention Program (NAEPP) guidelines. Eligible members include those continuously enrolled in the measurement year and the year prior to the measurement year, with any of the following in those years:

- At least 1 emergency room visit with a principal diagnosis of asthma.
- At least 1 acute inpatient discharge with a principal diagnosis of asthma.
- At least 4 outpatient visits with an asthma diagnosis and at least two (2) asthma medications filled at the pharmacy.
- At least 4 asthma medications filled at the pharmacy (members identified this way, where leukotriene modifiers were the sole asthma medication dispensed, must also have at least 1 diagnosis of asthma in the same year as the leukotriene modifier).

Use of Appropriate Medications For People with Asthma

Use of Appropriate Medication:	HEDIS 2012[2]	HEDIS 2013	National Average 2011[1]
Ages 5 to 11	100%	98.18%	96.0%
Ages 12 to 18	91.67%	100%	92.7%
Ages 19 to 50	91.13%	89.34%	89.1%
Ages 51 to 64	88.46%	93.51%	93.2%
Total	91.67%	93.52%	91.9%

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[2]For HEDIS 2012 the age ranges were changed so these rates are not comparable to previous year's rates.

Medication Management for People with Asthma

This measure identifies members 5-64 years of age who were identified as having persistent asthma and who were dispensed appropriate medications. Then 2 rates are reported on these members.

1. The percentage of members who remained on an asthma controller medication for at least 50% of their treatment period.
2. The percentage of members who remained on an asthma controller medication for at least 75% of their treatment period.

Medication Management For People with Asthma

	HEDIS 2012	HEDIS 2013	National Average 2011[1]
50% Med Compliance			
Ages 5 to 11	76.32%	70.37%	NA
Ages 12 to 18	75.76%	69.23%	NA
Ages 19 to 50	68.14%	64.22%	NA
Ages 51 to 64	73.91%	70.83%	NA
Total	71.94%	67.88%	NA
75% Med Compliance			
Ages 5 to 11	36.84%	42.59%	NA
Ages 12 to 18	69.70%	41.03%	NA
Ages 19 to 50	41.59%	29.36%	NA
Ages 51 to 64	53.62%	51.39%	NA
Total	47.83%	39.42%	NA

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Improving Asthma Management

In 1998, the Physician Quality Committee identified asthma as a common illness within the Health Plan population based on Sanford Health data and Health Plan clinical claims data and implemented an Asthma Quality Improvement Activity. Based on that claims data, the Plan identified significant numbers of asthmatic members with frequent physician visits for multiple respiratory diagnoses. Claims data also revealed some inappropriate utilization of asthma medications among this population.

The Asthma activity includes monthly identification of new asthmatic members and a free peak flow meter and spacer offer. Newly identified members are provided with educational information in the form of a toolkit which includes topics such as asthma triggers, asthma education, medication compliance, an asthma action plan, smoking cessation and more. The Plan has also

worked with the *South Dakota Asthma Institute* and has helped promote the annual Lung Association Asthma Camp for kids.

The asthma management clinical practice guidelines that Sanford Health Plan adopted and recommends to practitioners are published in the Provider Perspective yearly and are also available on the Plan's website at www.sanfordhealthplan.com.

Cholesterol Management for Patients with Cardiovascular Conditions

High blood cholesterol is one of the major risk factors for heart disease and heart attacks. More specifically, high LDL levels (bad cholesterol) can cause cholesterol to build up within the walls of the arteries which cause a hardening or narrowing of the arteries and can eventually slow or block blood flow to the heart. If the blood supply to a portion of the heart is completely cut off, the result is a heart attack.

This measure looks at members ages 18 to 75, who from January 1 - November 1 of the year prior to the measurement year were discharged for acute myocardial infarction (AMI), coronary artery bypass graft (CABG) or percutaneous coronary interventions (PCI), or who had a diagnosis of ischemic vascular disease during the measurement year or the year prior. Then we measure what percentage of members had each of the following during the measurement year: LDL-C (low density lipoprotein cholesterol) screening, LDL-C <100mg/dL.

Cholesterol Management for Patients with Cardiovascular conditions

	HEDIS 2010	HEDIS 2011	HEDIS 2012	HEDIS 2013	National Average 2011[1]
LDL-C Screening	90.20%	90.20%[2]	84.14%	86.89%	88.1%
LDL-C Level <100 mg/dL	64.71%	64.71%[2]	61.67%	62.70%	59.8%

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[2]The HEDIS 2010 rates were rotated for 2011. The actual screening rate was 88.11% and the actual level <100 rate was 67.84%.

Lipid Profile Screening Guidelines

The Preventive Health Guidelines allow for 1 lipid profile between the ages of 18 and 24, 1 lipid profile every 5 years between the ages of 25 and 44 and 1 lipid profile every year for ages 45 and over. The Preventive Health Guidelines are published for members and practitioners in the Member Messenger and Provider Perspective newsletters yearly, are provided in new member Enrollment Packets and are available on the Plan's website at www.sanfordhealthplan.com. The cholesterol screening clinical practice guidelines that Sanford Health Plan adopted and recommends to practitioners are published in the Provider Perspective yearly and are also available on the Plan's website.

Controlling High Blood Pressure

According to the National Heart, Lung and Blood Institute, more than 65 million adults in this country have high blood pressure. When arteries narrow, blood flow is forced to press against the artery walls with too much force, resulting in high blood pressure. The heart must work harder to pump blood through the arteries. Over time, high blood pressure can result in serious long-term health conditions like heart disease, stroke and renal failure.

Controlling High Blood Pressure

Members with Controlled Blood Pressure	HEDIS 2010	HEDIS 2011	HEDIS 2012	HEDIS 2013	National Average 2011[1]	Healthy People 2020[2]
Ages 18 - 85	66.07%	67.92%	70.83%	67.82%	65.4%	61.2%

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[2]The Healthy People 2020 Goal includes adults ages 18 and older.

This measure assesses whether blood pressure is controlled among adult persons ages 18 - 85 years of age with diagnosed hypertension who were continuously enrolled in the measurement year. A member in this measure is considered to have controlled blood pressure if their most recent blood pressure reading taken in the office in the measurement year was below 140mm Hg systolic and 90mm Hg diastolic.

Healthy Heart (High Blood Pressure) Health Management Program

Due to the large number of members with high blood pressure in the Plan's population, in April 2007 Sanford Health Plan implemented a Hypertension Health Management Program as an expansion on the already existing Quality Improvement Activity. The goal of the program is to provide tools to educate our members on promoting improved health through better prevention, detection, treatment and education. By analyzing utilization patterns, we will be able to educate our members on preventable complications so that emergency department visits and hospital admissions/readmissions may be reduced. These tools will facilitate understanding and consumer responsibility for their own disease processes as well as coordination of care between the member and his/her primary care physician.

The Hypertension Health Management Program was renamed the Healthy Heart Health Management Program in 2012. With this program, new eligible members for the program are identified on a monthly basis and sent a Hypertension Program booklet that contains information on the program as well as

education on managing hypertension and educational materials and resources that are available to the member. The program is an opt-out program, with newly identified members being automatically enrolled unless they contact the Plan to opt out of the program. Members are stratified as moderate/low or high risk. High risk members receive the same quarterly educational mailings as moderate/low risk, with additional high risk information specific to their needs and phone or letter contact from a Care Management RN. Educational materials for moderate/low and high risk members include topics such as non-pharmaceutical management of hypertension, medication compliance, diet and exercise recommendations, complications, self monitoring, smoking cessation and more. High risk members who were not compliant according to HEDIS specifications received an educational mailing accompanied by a blood pressure wallet card and tracking card.

The Healthy Heart Program also provides annual communications to practitioners regarding the program. Practitioners receive notice on an annual basis of their members who were not in compliance with the HEDIS Controlling High Blood Pressure measure specifications. Practitioners were also notified of the current rates of guideline recommended medication therapy. The Plan reviews and adopts on a yearly basis clinical practice guidelines for hypertension. Practitioners are made aware of the clinical practice guidelines on a yearly basis through the practitioner newsletter. The guidelines are distributed through special mailings and the Sanford Health Plan website, www.sanfordhealthplan.com.

Our Healthy Heart Health Management Program members are encouraged to complete an online health risk assessment on our WorldDoc site which includes questions related to hypertension and lifestyle as well as their current biometric readings. WorldDoc also offers a health library and self management tools on this site to help our members better manage their condition.

In April, our Care Management nurses and Partners in Prevention, our health screening team, took part in a community wide hypertension initiative by visiting some of our employer group sites to do blood pressure screenings. At risk members were referred to their primary care practitioner for follow up.

If you are a Sanford Health Plan member with high blood pressure and would like information on enrolling in this program, please call the Plan at (888) 315-0884. You can also find program and enrollment information on our website at www.sanfordhealthplan.com.

Comprehensive Diabetes Care

Diabetes is a costly, highly prevalent chronic disease which, if not controlled, can result in serious complications including amputations, blindness, kidney failure, heart disease, nerve damage and more. According to the American Diabetes Association, there are 25.8 million children and adults in the United States, or about 8.3% of the population, who have this disease. Many complications of diabetes can be prevented if detected and addressed in the early stages.

This measure looks at the percentage of members with diabetes ages 18 through 75 years old, who were continuously enrolled during the measurement year, who received the following aspects of diabetes care (except where noted, these are based on the most recent date of service in the measurement year):

- Hemoglobin A1c (HbA1c) Tested
- HbA1c Poor Control >9.0%
- HbA1c Control <8.0%
- HbA1c Control <7.0%
- LDL-C Screening Performed
- LDL-C Controlled <100mg/dL
- Eye Exam (Retinal) Performed in the measurement year (or in the year prior to the measurement year with a negative retinopathy diagnosis)
- Medical Attention for Nephropathy (Includes any of the following: Evidence of treatment for nephropathy, a nephrologist visit, a positive urine macroalbumin test, a urine microalbumin test or evidence of ACE Inhibitor/ARB drug therapy)
- Blood Pressure Control <140/80 mm Hg
- Blood Pressure Control <140/90 mm Hg

Comprehensive Diabetes Care

	HEDIS 2010	HEDIS 2011	HEDIS 2012	HEDIS 2013	National Average 2011[2]	Healthy People 2020[3]
HbA1c Tested	93.07%	93.07%[4]	95.07%	95.07%[6]	90.0%	71.1%[3]
HbA1c Poor Control >9.0%[1]	19.16%	19.16%[4]	16.61%	16.61%[6]	28.3%	14.6%
Hba1c Control <8.0%	70.80%	70.80%[4]	68.43%	68.43%[6]	61.2%	
Hba1c Control <7.0%	45.99%	45.99%[4]	49.76%	49.76%[6]	42.2%	58.9%
Eye Exam Performed	63.69%	64.42%	65.15%	72.63%	56.9%	58.7%
LDL-C Screened	81.57%	83.58%	85.04%	85.04%[6]	85.3%	
LDL-C Controlled (<100 mg/dL)	46.17%	48.54%	50.36%	50.36%[6]	48.1%	
Medical Attention for Nephropathy	86.13%	86.13%[4]	89.05%	89.05%[6]	83.8%	37.0%[3]
Blood Pressure <140/80[5]	42.88%	54.56%	56.57%	56.57%[6]	44.2%	57.0%
Blood Pressure <140/90	74.64%	75.73%	76.46%	76.46%[6]	65.8%	57.0%

[1]Lower rates for the HbA1c Poor Control measure indicate better performance.
[2]The source for data is Quality Compass® 2011 and is used with the permission of the National Committee for Quality Assurance (NCQA). Any analysis, interpretation, or conclusion based on these data is solely that of the authors, and NCQA specifically disclaims responsibility for any such analysis, interpretation, or conclusion. Quality Compass is a registered trademark of NCQA.
[3]Healthy People 2020 Goal includes ages 18 and older. The A1c testing goal is based on 2 screenings a year vs. 1 like HEDIS. The goal listed for nephropathy includes only microalbumin for the Healthy People goal.
[4]HEDIS 2010 rates were rotated for 2011. The actual HbA1c Tested rate was 92.88%. The actual A1c >9% rate was 16.97%. The actual A1c <8% rate was 72.08%. The actual A1c <7% rate was 48.91%. The actual nephropathy rate was 85.22%.
[5]For HEDIS 2011 and forward the Blood Pressure <130/80 rate was revised to <140/80.
[6]HEDIS 2012 rates were rotated for 2013. The actual HbA1c Tested rate was 93.43%. The actual A1c >9% rate was 20.26%. The actual A1c <8% rate was 69.71%. The actual A1c <7% rate was 47.37%. The actual nephropathy rate was 87.41%. The Blood Pressure <140/80 actual rate was 52.19%. The actual Blood Pressure <140/90 was 75.18%.

Diabetes Health Management Program

In 1998, Sanford Health Plan implemented a Diabetes Health Management Program. The Physician Quality Committee identified diabetes as a common illness within the Plan population. Clinical claims data identified significant numbers of diabetic members and practitioners that did not utilize established practice guidelines in the treatment of diabetes. A decrease in morbidity and mortality may not be achieved unless both members and practitioners are educated on Plan benefits and compliance with recommended care guidelines.

The goal of the program is to provide tools to educate our members on promoting improved health through better prevention, detection, treatment and education. By analyzing utilization patterns, we will be able to educate our members on preventable complications so that emergency department visits and hospital admissions/readmissions may be reduced. These tools will facilitate understanding and consumer responsibility for their own disease processes as well as coordination of care between the member and primary care physician.

In the Diabetes Health Management Program, new eligible members for the program are identified on a monthly basis. These members are sent a toolkit that contains information on the diabetes program, education on diabetes and an offer for educational materials available to members. The program is an opt-out program, with newly identified members being automatically enrolled unless they contact the Plan to opt out of the program. Members are stratified as moderate/low or high risk. High risk members receive the same educational mailings as low risk, with additional high risk information specific to their needs and phone or letter contact from a Care Management RN. Educational materials for moderate/low and high risk members include topics such as blood sugars, eating right, medications, exercise, recommended tests and more.

Special mailings are also done throughout the year to members. Members who are noncompliant with the recommended care guidelines are sent an educational letter with information on risks of complications and the importance of getting needed tests and visits. These members are asked to complete a HbA1c, LDL-C, eye exam and a microalbumin test. Members are reminded that they can receive their annual diabetic eye exam for free with a participating eye care professional.

All diabetic members, regardless of whether they remain enrolled in the program or not, receive notice of how to get information on the Plan's insurance benefits for medical and pharmaceutical care for diabetes, as well as how to obtain a free glucometer. Diabetic education is stressed in the program materials and in the member newsletter.

Our diabetes health management program members are encouraged to complete an online health risk assessment on our WorldDoc site which includes questions related to diabetes and lifestyle as well as their current biometric readings. WorldDoc also offers a health library and self management tools on this site to help our members better manage their condition.

If you are a Sanford Health Plan member with diabetes and would like information on enrolling in this program, please call the Plan at (888) 315-0884. You can also find program and enrollment information on our website at www.sanfordhealthplan.com.

The Diabetes Program also provides annual communications to practitioners regarding the program. A reminder is sent to eye care professionals about the required codes for the diabetic eye exam copay waive program. An eye exam consultation form is also included that they can complete and fax to the member's primary diabetes care practitioner to notify them of the member's exam and their results.

On a yearly basis, the Plan reviews and adopts clinical practice guidelines for diabetes. Practitioners are made aware of the clinical practice guidelines on a yearly basis through the practitioner newsletter. The guidelines are also distributed through the Sanford Health Plan website, www.sanfordhealthplan.com.

In addition to these program activities, the Preventive Health Guidelines allow for 1 lipid profile between the ages of 18 and 24, 1 lipid profile every 5 years between the ages of 25 and 44 and 1 lipid profile every year for ages 45 and over. The Guidelines also allow for 1 basic metabolic panel (which includes a glucose test, among others) every year. The Preventive Health Guidelines are published for members and practitioners in the Member Messenger and Provider Perspective newsletters yearly, are provided in Enrollment Packets and are available on the Plan's website at www.sanfordhealthplan.com.

Use of Imaging Studies for Low Back Pain

Back pain is among the most common musculoskeletal conditions affecting nearly all people at least once in their life. According to the American College of Radiology, uncomplicated low back pain is a benign, self-limited condition that does not warrant any imaging studies. The vast majority of these patients are back to their usual activities in 30 days.

This measure assesses whether imaging studies (plain x-ray, MRI, CT scan) are overused in evaluating patients with acute low back pain. A higher score indicates appropriate treatment of low back pain (i.e., proportion for whom imaging studies did not occur).

Use of Imaging Studies for Low Back Pain

	HEDIS 2010	HEDIS 2011	HEDIS 2012	HEDIS 2013	National Average 2011[1]
Imaging Studies Did Not Occur (Appropriate Treatment)	**85.12%**	**87.31%**	**84.82%**	**87.23%**	**74.4%**

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Follow-Up Care for Children Prescribed ADHD Medication

Attention-deficit/hyperactivity disorder (ADHD) is a condition that affects millions of children and adolescents. ADHD includes 3 main symptoms: inattention, hyperactivity and impulsivity. Practitioners can determine when medication therapy is indicated. When medication therapy is prescribed, the American Psychiatric Association recommends follow-up appointments be made at least monthly until the symptoms have stabilized. Once stable, an office visit every 3 to 6 months is recommended which allows for an assessment of learning and behavior in the child.

This HEDIS rate measures the percentage of children newly prescribed ADHD medication who have at least 3 follow-up care visits within a 10-month period, 1 of which is within 30 days of when the first ADHD medication was dispensed. The following are the rates:

1. **Initiation Phase:**
   The percentage of members 6-12 years of age with an ambulatory prescription dispensed for ADHD medication, who had 1 follow-up visit with a practitioner with prescribing authority during the 30-day Initiation Phase.
2. **Continuation and Maintenance Phase:**
   The percentage of members 6-12 years of age with an ambulatory prescription dispensed for ADHD medication, who remained on the medication for at least 210 days and who, in addition to the visit in the Initiation Phase, had at least 2 follow-up visits with a practitioner within 270 days (9 months) after the Initiation Phase ended.

Follow-Up Care for Children Prescribed ADHD Medication

	HEDIS 2010	HEDIS 2011	HEDIS 2012	HEDIS 2013	National Average 2011[2]
Initiation Phase	**NA[1]**	**30.56%**	**25.45%**	**39.06%**	**39.4%**
Continuation and Maintenance Phase	**NA[1]**	**NA[1]**	**NA[1]**	**NA[1]**	**44.2%**

[1]NA indicates that the Plan collected and reported the rate but the population was too small to report a valid rate.

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Improving ADHD Management

ADHD is a chronic health problem in which educational interventions can help lessen the impact of the disorder and improve the member's quality of life. The diagnosis of ADHD has consistently been in the top diagnosis codes incurred for the Plan. The baseline HEDIS rates for follow-up care for children prescribed ADHD medication also show a serious deficiency in appropriate follow-up care.

Sanford Health Plan implemented a Quality Improvement Activity, which includes sending educational materials to parents of children and adolescents with ADHD to educate them on the symptoms, types of treatment and follow-up recommendations for patients taking ADD/ADHD medications.

The Plan also provided educational materials to practitioners regarding the guidelines for follow-up care for patients prescribed ADD/ADHD medication. A screening tool was also made available. These resources were offered in the practitioner newsletter and continue to be available on the Plan's website. Practitioners are made aware of the clinical practice guidelines on a yearly basis through the practitioner newsletter. The guidelines are also distributed through special mailings and the Sanford Health Plan website, www.sanfordhealthplan.com.

Antidepressant Medication Management

According to the National Institute of Mental Health, an estimated 6.7% of American adults suffer from major depressive disorder in a given year. Many people can improve through clinical treatment with their healthcare practitioner and by taking their medications as prescribed. However, many stop taking their medication too soon because they feel better or because they do not feel the medication is working. It is important for people to take their medications as prescribed for as long as they are prescribed and to keep their follow-up appointments in order to prevent a recurrence of depression.

This measure is based on the treatment guidelines of the clinical management and pharmacological treatment of depression. The following are the 2 medication compliance rates reported for this measure.

1. **Effective Acute Phase Treatment**
   The percentage of members ages 18 years and older as of April 30 of the measurement year, who were diagnosed with a new episode of depression, treated with antidepressant medication, and who remained on an antidepressant drug during the entire 84-day (12 week) Acute Treatment Phase. This measures the percentage of adult members initiated on an antidepressant drug who received a continuous course of medication treatment during the Acute Treatment Phase.
2. **Effective Continuation Phase Treatment**
   The percentage of members ages 18 years and older as of April 30 of the measurement year, who were diagnosed with a new episode of depression, treated with antidepressant medication, and who remained on an antidepressant drug for at least 180 days (6 months). This measures the effectiveness of clinical management (follow-up visits) in achieving medication compliance (taking medications as long as prescribed) for the Continuation Phase Treatment Period, adequate for defining a recovery.

Antidepressant Medication Management

	HEDIS 2010	HEDIS 2011	HEDIS 2012	HEDIS 2013	National Average 2011[1]
Effective Acute Phase Treatment	**58.67%**	**59.55%**	**57.54%**	**58.73%**	**65.6%**
Effective Continuation Phase Treatment	**36.00%**	**41.01%**	**43.02%**	**41.27%**	**49.4%**

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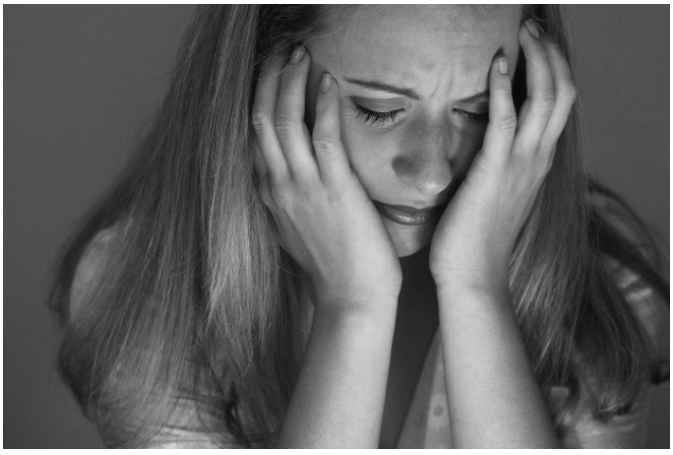
Improving Mental Health Medication Management

Depression was identified in general as a chronic, clinical issue with a high degree of risk for members. Clinical claims and pharmaceutical data have identified a significant number of members diagnosed with depression who are currently being treated with medications as well as those who are not. Data also indicates a significant difference in the treatment methods of practitioners. Clinical variance has been identified in the length of time on medication therapy for depression. Depression has consistently been one of the top diagnoses in the Plan, among adults and adolescents alike.

The activities involved in increasing medication compliance for members with depression include antidepressant letters, which are sent on a monthly basis to those members new on antidepressants to educate about medication compliance, side effects, keeping follow-up visits, etc. There have also been yearly articles in the Member Messenger newsletter regarding the importance of antidepressant compliance as well as the importance of continuity and coordination of care.

Depression clinical practice guidelines are reviewed and adopted on a yearly basis and practitioners are made aware of the availability of these guidelines in the practitioner newsletter and on the Plan website at www.sanfordhealthplan.com. Collaborative meetings are



held with behavioral health practitioners to discuss aspects of behavioral health care including how to improve access, continuity and coordination of care, medication compliance and to assist in reviewing formulary issues.

Quick Reference Cards, in addition to behavioral health screening tools, are also made available to primary care physicians to assist in locating participating behavioral health care practitioners in their regional area. These cards are available to practitioners on the Plan's website at www.sanfordhealthplan.com. If you would like a paper copy of these cards for your clinic, please call our Provider & Payor Relations Department at (605) 328-6877 or (800) 601-5086 to request a copy.

Follow-Up after Hospitalization for Mental Illness

Many who are discharged from an inpatient facility for mental illness need continued support after leaving the hospital. Help with continuing medications, going to therapy, getting back to work, and social issues is very important in ensuring successful treatment.

Consistent with the guidelines of the National Institute of Mental Health and the Centers for Mental Health Services, this measure looks at the percentage of members ages 6 years and older who were hospitalized for treatment of select mental health disorders in the measurement year who were continuously enrolled for 30 days after discharge and who were seen on an ambulatory basis or were in day/night treatment with a mental health practitioner.
Two separate rates are calculated:

- The percentage of members who had an ambulatory or day/night mental health visit within 7 days of hospital discharge.
- The percentage of members who had an ambulatory or day/night mental health visit within 30 days of hospital discharge.

Follow-Up After Hospitalization for Mental Illness

	HEDIS 2010	HEDIS 2011	HEDIS 2012	HEDIS 2013	National Average 2011[1]
Ambulatory Follow-Up Within 7 Days of Discharge	**42.31%**	**40.91%**	**43.82%**	**34.78%**	**58.9%**
Ambulatory Follow-Up Within 30 Days of Discharge	**67.95%**	**65.15%**	**70.79%**	**64.13%**	**76.5%**

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Improving Timeliness of Follow-Up after Hospitalization for Mental Illness

Sanford Health Plan identified a need for improvement in the area of mental health follow-up and continuity and coordination of care. Mental health diagnoses have consistently been one of our top diagnosis codes for the Plan and initial claims analysis showed a low rate of follow-up after hospitalization.

In an attempt to improve the follow-up rates, the Health Plan sends letters to those members being discharged from an inpatient mental health stay. The brochure included with the letter (Managing Your Follow-up Care) includes information about medication management, how to avoid readmission, and the importance of keeping outpatient appointments. Information about the member's upcoming outpatient follow-up appointment is also included in the letter as a reminder. Nurse phone calls are then made to these members to remind them of their follow-up appointment. The Plan also collaborates with behavioral health providers to determine actions that can be taken to have members seen in a more timely manner.

To increase awareness of available mental health services, Quick Reference Cards, as well as behavioral health screening tools, are made available for primary care physicians to assist them in locating Sanford Health Plan behavioral health care practitioners in their regional area. The Plan advertised these cards in the Provider Perspective newsletter sent to all participating practitioners. These cards are available to practitioners, as are the Plan's clinical practice guidelines on depression, on the Plan's website at www.sanfordhealthplan.com. If you would like a copy of these cards for your clinic, please call our Provider & Payor Relations Department at (605) 328-6877 or (800) 601-5086 to request a copy. The Plan also collaborates with mental health professionals to get feedback on our quality improvement activity and other activities involving mental health services.

Flu Shots for Adults Ages 50-64

The disease burden of influenza is high even though it is highly preventable with a safe and effective vaccination each year. This measure assesses the percentage of members ages 50-64 years as of September 1 of the measurement year who received an influenza vaccination. Sanford Health Plan publishes yearly newsletter articles to remind members to get their flu shots and that coverage for the flu shot is 100%.

Flu Shots for adults ages 50-64

Received Flu Shot:	CAHPS® 2011	CAHPS® 2012	CAHPS® 2013	National Average 2011[1]
Ages 50-64	**69.97%**	**70.25%**	**69.33%**	**53.3%**

[1]The source for data is Quality Compass® 2011 and is used with the permission of the National Committee for Quality Assurance (NCQA). Any analysis, interpretation, or conclusion based on these data is solely that of the authors, and NCQA specifically disclaims responsibility for any such analysis, interpretation, or conclusion. Quality Compass is a registered trademark of NCQA.

Medical Assistance with Smoking Cessation

According to the Centers for Disease Control and Prevention (CDC), smoking is the leading preventable cause of premature death in the United States, causing 400,000 deaths each year. Yet millions of Americans continue to smoke. Studies show that people who are advised by their health care practitioner to quit smoking are more likely to quit.

To measure the percentage of Sanford Health Plan members who were advised by their health care practitioner to quit smoking and who were offered assistance in other cessation strategies, the annual member satisfaction survey, CAHPS®5.0H (Consumer Assessment of Healthcare Providers and Systems), includes questions that address these issues. Specifically, these questions allow us to determine the percentage of members ages 18 years and older, who were continuously enrolled during the measurement year, who were either current smokers or recent quitters that were seen by a Plan practitioner during the measurement year and received advice to quit smoking, had discussion regarding cessation medications and had discussion regarding other smoking cessation strategies. The following are the results from the most recent CAHPS® 5.0H study.

Medical Assistance with Smoking Cessation

	CAHPS® 2010[1]	CAHPS® 2011	CAHPS® 2012	CAHPS® 2013	National Average 2011[2]
Advising Smokers to Quit	**80.00%**	**74.48%**	**73.79%**	**75.25%**	**77.6%**
Discussion of Smoking Cessation Medications	**55.00%**	**49.32%**	**47.12%**	**50.50%**	**53.1%**
Discussion of Other Smoking Cessation Strategies	**53.80%**	**44.52%**	**39.42%**	**50.50%**	**47.6%**

[1] The response options for these questions changed in 2010. This does not allow us to compare and trend these rates to previous years.

[2]The source for data is Quality Compass® 2011 and is used with the permission of the National Committee for Quality Assurance (NCQA). Any analysis, interpretation, or conclusion based on these data is solely that of the authors, and NCQA specifically disclaims responsibility for any such analysis, interpretation, or conclusion. Quality Compass is a registered trademark of NCQA.

Tobacco Cessation Program

In November 2001, the Physician Quality Committee approved the start of a tobacco cessation program based upon the results of the CAHPS® survey. The program includes educational pieces in the Member Messenger. Tobacco cessation is stressed in all of the Plan's health management program materials as well. Cessation tools such as the state quitlines are also published in the member newsletter and made available to employer groups through the Care Management program. Smoking cessation education is currently underway at select employer sites, led by the Plan's certified tobacco cessation educators, and includes information about local, state and Health Plan cessation benefits.

The tobacco treatment benefit included in the member's benefit package includes the following:

- **For South Dakota, North Dakota and Iowa members:**
  Treatment for tobacco abuse is covered as part of the Sanford Health Plan's Preventive Health Program. Tobacco abuse treatment will be covered as listed below. This will be a once per lifetime benefit. Therapy treatment options available include two (2) Physician counseling and treatment visits, two (2) smoking cessation classes, or two (2) visits to a Certified Respiratory Therapist. Any combination of the above is not to exceed two (2) total visits. Hypnotism and acupuncture are **non-covered** treatment options. Medications used to deter smoking, including nicotine patches, gum and nasal spray, Zyban, bupropion (generic Wellbutrin), and Chantix will be covered with confirmation of smoking abstinence for 6 months. Reimbursement will be for the total amount the member paid for up to a three (3) month supply. Only one medication will be covered per lifetime. Abstinence must be proven by a urine specimen for nicotine. The total cost of this test will be covered by the Health Plan. To receive this benefit, the member must submit up to 3 months of paid receipts and notify the Health Plan (Member Services (605) 328-6800 or (800) 752-5863) that he or she has completed a urine screening test at the 6 month smoke free mark.

- **For Minnesota members:**
  Sanford Health Plan will cover a 90-day supply for Nicotine Patches or Nicotine Gum under the brand copay amount per calendar year and Zyban (bupropion) a 180-day supply under the brand copay amount per calendar year. No more than a 30-day supply will be covered and dispensed at a time. A prescription is required from a licensed provider and prescriptions must be filled at a network pharmacy. Failure to use your ID card for prescription processing will result in zero payment. Counseling for cessation of smoking will be covered under the Member's medical benefit for an office copay amount or smoking cessation classes will be covered 1 time per calendar year under the Members coinsurance and deductible benefit. Other medications used to deter smoking; including nicotine nasal spray and Chantix will be covered with confirmation of smoking abstinence for 6 months. Reimbursement will be for the total amount the member paid for up to a three (3) month supply. Abstinence must be proven by a urine specimen for nicotine. The total cost of this test will be covered by the Health Plan. Please call our Members Services Department at (605) 328-6800 or (800) 752-5863 for more complete information.

Cessation resources are provided to members on a regular basis including the state quit lines and the National Cancer Institute's website:

- SD Quit Line Toll-Free 1-866-SD-QUITS
- MN's Tobacco Helpline (888) 354-PLAN
- IA Quit Line (800) QUIT NOW
- ND Quit Line (800) QUIT NOW
- www.smokefree.gov

The specifications for the above CAHPS® measures are consistent with recommendations from the clinical practice guidelines adopted and recommended on a yearly basis by the Plan for use. Newsletter articles continue to be published concerning current clinical practice guidelines for the treatment of tobacco use and dependence. These guidelines are also available on the Plan's website at www.sanfordhealthplan.com.

Access and Availability of Care Domain

The Access/Availability of Care domain contains measures that assess Sanford Health Plan members' access to care and whether those members are actually utilizing the services available to them. Most of these measures include some form of continuous enrollment criteria, which specifies that a member has to be enrolled in the Plan a certain amount of time before they may be included in the final population. This way the only members that are included in the final population are members for whom the Plan has had an adequate opportunity to provide services and education.

The Access and Availability measures included in this report are:

- Adults' Access to Preventive/Ambulatory Health Services
- Children and Adolescents' Access to Primary Care Practitioners
- Initiation and Engagement of Alcohol and Other Drug Dependence Treatment
- Prenatal and Postpartum Care
- Call Answer Timeliness

Adults' Access to Preventive/ Ambulatory Health Services

This measure determines whether adults have had preventive or ambulatory visits with their physician. This measure also tells us how many adults are not accessing the health care system at all and therefore are not receiving any preventive care or counseling on important factors like diet, exercise, smoking cessation, seat belt use and other risky behaviors. Specifically, we are looking at the percentage of members ages 20 through 44, 45 through 64 and 65 years and older who were continuously enrolled during the measurement year and the 2 years prior to the measurement year and who had an ambulatory or preventive care visit during 1 of those years. A separate rate is reported for each of the 3 age groups. Below are Sanford Health Plan's rates for this measure.

Adults' Access to Preventive/ Ambulatory Health Services

Ambulatory or Preventive Care Visit:	HEDIS 2010	HEDIS 2011	HEDIS 2012	HEDIS 2013
Age 20 - 44	94.90%	95.00%	94.62%	94.54%
Age 45 - 64	95.96%	95.83%	95.67%	95.87%
Age 65 & Older	96.79%	97.42%	96.74%	98.11%

Adult Wellness Visit Guidelines

Sanford Health Plan's female members turning 21, 40, 50 and 60 and male members turning 40, 50 and 60 receive birthday cards that include reminders and the Plan's benefits for yearly physical exams as well as other preventive health screenings. Preventive Health Guidelines, including yearly physical exam benefits, are

published in the Member Messenger and Provider Perspective newsletters yearly, are included in new member Enrollment Packets, and are available on the Plan's website at www.sanfordhealthplan.com.

Children and Adolescents' Access to Primary Care Practitioners

This measure determines whether children have had a visit with a primary care practitioner (PCP) like a pediatrician or family practice physician in order to assess general access to care for children and adolescents. Specifically, we are looking at the percentage of enrollees ages 12 months through 24 months and 25 months through 6 years who were continuously enrolled during the measurement year and who have had a visit with a primary care practitioner during that year. We also look at the percentage of enrollees ages 7 years through 11 years, and 12 years through 19 years, who were continuously enrolled during the measurement year and the year prior to the measurement year and who have had a visit with a primary care practitioner during 1 of those years. A separate rate is reported for each of the 4 age groups. Below are Sanford Health Plan's rates for this measure.

Children and Adolescents' Access to Primary Care Practitioners

Ambulatory or Preventive Care Visit:	HEDIS 2010	HEDIS 2011	HEDIS 2012	HEDIS 2013	National Average 2011[1]
Age 12 - 24 Mo	98.00%	98.26%	99.31%	98.69%	97.9%
Age 25 Mo - 6Years	89.77%	87.98%	88.84%	89.85%	91.9%
Age 7 – 11 Yr	86.84%	87.97%	87.11%	88.62%	91.9%
Age 12 – 19 Yr	89.25%	89.73%	89.10%	89.28%	89.3%

[1]The source for data is Quality Compass® 2011 and is used with the permission of the National Committee for Quality Assurance (NCQA). Any analysis, interpretation, or conclusion based on these data is solely that of the authors, and NCQA specifically disclaims responsibility for any such analysis, interpretation, or conclusion. Quality Compass is a registered trademark of NCQA.

Children and Adolescent Wellness Visit Guidelines

Preventive Health Guidelines, including yearly physical exam and well baby visit benefits, are published in the Member Messenger and Provider Perspective newsletters yearly, are included in new member Enrollment Packets and are available on the Plan's website at www.sanfordhealthplan.com.

Initiation and Engagement of Alcohol and Other Drug Dependence Treatment

There are more deaths, illnesses and disabilities from substance abuse than from any other preventable conditions.[1] These rates measure the degree to which members initiate and continue alcohol and other drug (AOD) dependence treatment once the need is identified.

Initiation of AOD Dependence Treatment: The percentage of members with a new episode of alcohol or other drug dependence who initiate treatment through either an inpatient AOD admission, outpatient visit, intensive outpatient encounter or partial hospitalization within 14 days of the diagnosis.

Engagement of AOD Treatment: An intermediate step between initially accessing care (initiation of treatment) and completing a full course of treatment. This measure is designed to assess the degree to which members engage in treatment with 2 additional AOD services within 30 days after the initiation visit.

[1]*Substance Abuse: The Nation's Number One Health Problem, Feb. 2001*

Initiation and Engagement of Alcohol and Other Drug (AOD) Dependence Treatment

	HEDIS 2010	HEDIS 2011	HEDIS 2012	HEDIS 2013	National Average 2011[1]
Initiation of AOD Treatment	50.60%	37.25%	44.74%	37.44%	40.2%
Engagement of AOD Treatment	46.99%	32.35%	23.16%	18.96%	15.2%

[1]The source for data is Quality Compass® 2011 and is used with the permission of the National Committee for Quality Assurance (NCQA). Any analysis, interpretation, or conclusion based on these data is solely that of the authors, and NCQA specifically disclaims responsibility for any such analysis, interpretation, or conclusion. Quality Compass is a registered trademark of NCQA.

Prenatal and Postpartum Care

Early and regular prenatal care is essential in keeping mom and baby healthy. Mothers who do not receive regular prenatal care are more likely to have problems including low birth weight and/or premature babies. Many health problems, if found early, can be treated or cured and other problems may be prevented. Prenatal care visits provide the practitioner the opportunity to discuss proper nutrition, counseling, vitamin supplements, risk factors and health promotion.

Care for the mother after delivery is also important. To give practitioners the chance to offer advice and assistance, the American College of Obstetricians and Gynecologists recommends that women see their health care practitioner at least once between 4 and 6 weeks after giving birth to allow for a physical examination and an opportunity to answer questions and give nutrition and family planning guidance.

This measure evaluates timely access to prenatal and postpartum care for Sanford Health Plan members. Prenatal care should be provided in the first trimester of pregnancy, or if the member enrolled after the first trimester, within 42 days of the member's enrollment date. Documentation of prenatal care visits should include screening tests, obstetrical history or risk assessment, counseling and education or an ultrasound. Postpartum care should be delivered on or between 21 and 56 days after delivery and should include a physical exam with either a pelvic exam or an evaluation of weight, blood pressure, breasts and abdomen. Below are Sanford Health Plan's rates for this measure.

Prenatal and Postpartum Care

	HEDIS 2010	HEDIS 2011	HEDIS 2012	HEDIS 2013	National Average 2011[1]	Healthy People 2020[2]
Timely Prenatal Care	**93.75%**	**96.94%**	**96.94%[3]**	**97.83%**	**91.0%**	**77.9%**
Timely Postpartum Care	**84.58%**	**88.21%**	**88.21%[3]**	**89.67%**	**80.6%**	

[1]The source for data is Quality Compass® 2011 and is used with the permission of the National Committee for Quality Assurance (NCQA). Any analysis, interpretation, or conclusion based on these data is solely that of the authors, and NCQA specifically disclaims responsibility for any such analysis, interpretation, or conclusion. Quality Compass is a registered trademark of NCQA.

[2]Healthy People 2020 Goal beginning in first trimester of pregnancy.

[3] This rate was rotated from HEDIS 2011. The actual rate for prenatal care was 93.48% and for postpartum care 85.33%.

Maternity Care Benefits & the Healthy Pregnancy Program

Sanford Health Plan provides maternity care benefits from prenatal through postpartum care. We also encourage our pregnant mothers to join the Healthy Pregnancy Program during their first trimester of pregnancy.

The Healthy Pregnancy Program focuses on education and awareness. The main objective is to assist a member in identifying concerns early so she and her healthcare practitioner can take steps to prevent or minimize any problems and ensure a healthy pregnancy. The American College of Obstetricians and Gynecologists (ACOG) guidelines state that medical, obstetric and lifestyle factors can complicate a pregnancy. Through regular prenatal care, women can take action to increase their chance of having a healthy baby. The member's health care practitioner continues to be the primary caregiver who provides the member with medical services and advice. Plan members may enroll in the program by calling the Plan to prior authorize their pregnancy. Members will receive a program packet with their authorization letter. A health risk assessment is included in the initial program packet, which should be completed and returned to the Plan. Based on the health risk assessment, responses members are classified as low or high risk. Enrolled members receive a follow-up mailing consisting of different health topics applicable to pregnant women. A Care Management nurse calls members whose pregnancy is high risk at least once throughout the pregnancy, or more often if needed. Enrolled members also receive a magazine and immunization guideline information after the baby is born.

If you are a Sanford Health Plan member who is pregnant and would like information on enrolling in this program, please call the Plan at (888) 315-0884. You can also find program and enrollment information on our website at www.sanfordhealthplan.com.

For practitioners, the program offers notification of the patients that they have participating in the program. Sanford Health Plan has adopted guidelines for prenatal care. Practitioners are made aware of the clinical practice guidelines on a yearly basis through the practitioner newsletter. The guidelines are available on the Sanford Health Plan website, www.sanfordhealthplan.com.

Call Answer Timeliness

Customer service plays a significant role in member satisfaction. Key measures involved in customer service include Member Services phone call response times.

Call Answer Timeliness

	HEDIS 2010	HEDIS 2011	HEDIS 2012	HEDIS 2013
Call Answer Timeliness	**71.24%**	**67.21%**	**67.94%**	**78.91%**

Member Services Phone Calls Quality Improvement Activity

Because the Health Plan Quality Improvement Committee recognizes the Member Services Department as vital to customer service, in 1999 the Committee chose to evaluate phone call statistics and staffing needs for the Member Services Department as a way of ensuring that Plan Members have timely access to customer service.

All Member Services phone calls are logged. Call center statistics show number of calls answered, calls made, voicemails, and abandoned calls. It also shows the answer speed of calls and the rate of abandonment and voicemails. These statistics are measured monthly and analyzed by the Committee on a quarterly basis to determine improvements that are needed. Many improvement activities have been implemented to improve these rates over the years including staff meetings with training and education on how to more accurately and efficiently handle member and practitioner calls, distribution of phone call statistics to each Member Services Representative and a phone log report to track all calls and their subject matter.

Satisfaction with Experience of Care Domain

HEDIS/CAHPS® 5.0H Adult Member Satisfaction Survey

This domain includes rates from the yearly member satisfaction survey completed by Sanford Health Plan. This survey is conducted by an independent survey vendor and provides information on the experiences of our members with our Health Plan and how well we meet our members' expectations. There are 4 overall ratings of satisfaction in addition to 7 more focused composite scores which summarize survey responses in key areas.

HEDIS/CAHPS® 5.0H, Adult Overall Ratings

Percentage Responding: 8, 9, 10
(Scale from 0-10, where 0 is worst and 10 is best)

	CAHPS® 2010	CAHPS® 2011	CAHPS® 2012	CAHPS® 2013	National Average 2011[1]
Health Plan Overall	53.26%	53.00%	52.35%	53.48%	66.12%
Health Care Overall	71.43%	77.84%	77.25%	79.94%	77.63%
Specialist Overall	76.10%	82.93%	82.58%	85.38%	83.11%
Personal Doctor Overall	81.68%	84.80%	88.98%	88.60%	83.90%

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HEDIS/CAHPS® 5.0H, Composite Ratings

Percentage Responding: "Not a Problem" or "Always or Usually"

	CAHPS® 2010	CAHPS® 2011	CAHPS® 2012	CAHPS® 2013	National Average 2011[1]
Getting Needed Care	85.24%	83.09%	83.87%	90.32%	85.59%
Getting Care Quickly	87.11%	86.11%	86.60%	88.97%	86.17%
How Well Doctors Communicate	92.77%	96.34%	96.03%	97.67%	94.06%
Customer Service	84.75%	90.52%	NA[2]	90.24%	84.62%
Claims Processing	88.82%	90.72%	91.00%	91.21%	88.08%
Plan Information on Costs	66.78%	70.26%	65.56%	55.77%	65.70%
Shared Decision Making				72.12%	NA

[1]The source for data is Quality Compass® 2011 and is used with the permission of the National Committee for Quality Assurance (NCQA). Any analysis, interpretation, or conclusion based on these data is solely that of the authors, and NCQA specifically disclaims responsibility for any such analysis, interpretation, or conclusion. Quality Compass is a registered trademark of NCQA.

[2] The average number of responses was too low to report a rate.

CAHPS® Opportunities and Improvement Activities

Sanford Health Plan strives to provide the best service we can to our members. The Plan's Quality Improvement Committee analyzed the full CAHPS® results report and identified the areas that show the greatest opportunities for improvement. The Committee also determined activities that will be (or already are being) implemented to achieve improvement in these areas. Examples of these activities include, but are not limited to:

- A workgroup is in place to improve the information communicated to members and to make the information easy to find and access.
- Continue New Member Survey postcard in an effort to identify issues with member materials or services and what we can do to improve them.
- Notify members of the features available on the Plan's web portal, including access to EOBs, benefit information and more. The myHealthPlan web portal provides streamlined services and enhanced access to information. The Plan's general website and portal have also been redesigned to improve ease of access to important member information.
- The Plan's case managers are partnering with the Sanford Clinic Health Coaches to get members appointments more quickly and to collaborate on the members care.
- Continue to provide information through our preventive health and quality programs regarding smoking cessation and the state quit line resources as well as the Plan's benefit for smoking cessation reimbursement. Smoking cessation resources are provided on our member portal, myHealthPlan.
- Include information on what is available to members on the Express Scripts, Inc. website (the Plan's pharmacy benefit manager) like drug information, member specific copay information, drug side effects, interactions and more. There is a link to this website on the Plan's pharmacy information page on the Plan's website.
- Continue to emphasize in member mailings the importance of having a primary care practitioner (PCP). Members are also informed that they may call the Health Plan for assistance in finding a PCP. (Call the Member Services Department at (605) 328-6800 or (800) 752-5863).
- Remind members when asking for an appointment with a specialist that is not available as soon as they would like, to ask for alternative specialists in that clinic or to call Member Services at (605) 328-6800 or (800) 752-5863) for information on additional specialists available in their area.
- Practitioners will be notified of satisfaction results related to how much time they spend with patients, shared decision making, coordination of care, etc. so that they are aware of areas that may need improvement in the practice setting.

Use of Services Domain

The Use of Services Domain provides information about the types of services Sanford Health Plan offers its members and how the Plan manages member care. It looks at a range of health care settings including inpatient, outpatient, non-acute and ambulatory.

The Use of Services measures included in this report are related to well-care visits:

- Well-Child Visits in the First 15 Months of Life
- Well-Child Visits in the Third, Fourth, Fifth and Sixth Year of Life
- Adolescent Well-Care Visits

Well-Child Visits in the First 15 Months of Life

Well-child visits, or well baby checks, are recommended frequently in the first year of life when a child's development is most rapid. These visits include a complete physical examination in addition to immunizations and communication and/or counseling to parents regarding normal development and developmental milestones, safety, nutrition, sleep, infectious diseases, etc. Frequent well-child visits can assist in identifying and addressing growth and developmental problems early.

The American Academy of Pediatrics recommends 8 well-child visits in the first 15 months of life: the first 3-5 days after birth and then at 1, 2, 4, 6, 9, 12 and15 months of age. The well-child visits for Sanford Health Plan members were reported as the percentage of 15 month old members receiving 0, 1, 2, 3, 4, 5, or 6 or more visits with a primary care practitioner.

Well-Child Visits in the First 15 Months of Life

	HEDIS 2010	HEDIS 2011	HEDIS 2012	HEDIS 2013	National Average 2011[1]
0 Visits	0.34%	1.05%	0%	0.90%	NA
1 Visit	1.01%	1.40%	0%	0.90%	NA
2 Visits	0.00%	2.11%	1.56%	1.51%	NA
3 Visits	4.36%	5.26%	1.17%	2.11%	NA
4 Visits	8.05%	7.02%	8.2%	7.53%	NA
5 Visits	19.13%	22.11%	17.97%	20.18%	NA
6+ Visits	67.11%	61.05%	71.09%	66.87%	78.00%

[1]The source for data is Quality Compass® 2011 and is used with the permission of the National Committee for Quality Assurance (NCQA). Any analysis, interpretation, or conclusion based on these data is solely that of the authors, and NCQA specifically disclaims responsibility for any such analysis, interpretation, or conclusion. Quality Compass is a registered trademark of NCQA.

Well-Child Visits in the Third, Fourth, Fifth, and Sixth Years of Life

Well-child visits during the third through sixth years of life should include (but not be limited to) a complete physical examination in addition to an evaluation of hearing and vision, an update of immunizations, discussion of nutrition, assessment of language development, assessment of developmental milestones and assessment of social and behavioral development.

The American Academy of Pediatrics recommends annual well-child visits for children ages 3 to 6 years of age. The rates below show the percentage of Plan member's ages 3-6 years of age who had well-child visit with a primary care practitioner during the measurement year.

Well-Child Visits in the Third, Fourth, Fifth and Sixth Year of Life

	HEDIS 2010	HEDIS 2011	HEDIS 2012	HEDIS 2013	National Average 2011[1]
Well-Child Visits in the Third, Fourth, Fifth and Sixth Year of Life	45.31%	51.36%	52.21%	56.00%	72.50%

[1]The source for data is Quality Compass® 2011 and is used with the permission of the National Committee for Quality Assurance (NCQA). Any analysis, interpretation, or conclusion based on these data is solely that of the authors, and NCQA specifically disclaims responsibility for any such analysis, interpretation, or conclusion. Quality Compass is a registered trademark of NCQA.

Well Baby and Well Child Visit Guidelines

Preventive Health Guidelines, including well baby visit benefits and yearly well child wellness exams, are published in the Member Messenger and Provider Perspective newsletters yearly, are included in new member Enrollment Packets and are available on the Plan's website at www.sanfordhealthplan.com.

Adolescent Well-Care Visits

Adolescents experience significant physical and emotional changes in their transition from childhood to adulthood. In addition, adolescents face many challenges in today's world and may be at risk for sexually transmitted disease, substance abuse, pregnancy, behavioral problems, etc. Accidents, homicide and suicide are the leading causes of death in the adolescent population between ages 15 and 24. According to the American Medical Association's Guidelines for Adolescent Preventive Services, "Annual visits offer the opportunity to reinforce health promotion messages for both adolescents and their parents, identify adolescents who have initiated health risk behaviors or who are at early stages of physical or emotional disorders, provide immunizations, and develop relationships with the adolescents that will foster an open disclosure of future health information."

The American Medical Association's Guidelines for Adolescent Preventive Services, the federal government's Bright Futures program and the American Academy of Pediatrics guidelines all recommend yearly well-care visits for adolescents. The adolescent well-care visit rates for Sanford Health Plan were reported for members in the 12 to

21 year old age group having had at least 1 well-care visit with a primary care practitioner. The rates below show the percentage of Plan members who had a well-care visit during the measurement year.

Adolescent Well-Care Visits

Adolescent Well-Care Visits:	HEDIS 2010	HEDIS 2011	HEDIS 2012	HEDIS 2013	National Average 2011[1]	Healthy People 2020[2]
Ages 12 - 21	28.82%	28.93%	29.27%	29.45%	43.20%	75.6%

[1]The source for data is Quality Compass® 2011 and is used with the permission of the National Committee for Quality Assurance (NCQA). Any analysis, interpretation, or conclusion based on these data is solely that of the authors, and NCQA specifically disclaims responsibility for any such analysis, interpretation, or conclusion. Quality Compass is a registered trademark of NCQA.

[2]Healthy People 2020 goal is based on ages 10-17.

Adolescent Health Program

Sanford Health Plan would like to see every adolescent develop an open and trusting relationship with a physician. Yearly visits offer this opportunity and the opportunity to reinforce health promotion messages for both adolescents and their parents. These visits will also identify adolescents who may have health risk behaviors or who are in the early stages of a physical or emotional disorder.

In an effort to increase the number of adolescent well-care visits, notices are published in the Member Messenger newsletter on a yearly basis regarding "Back-To-School Checkup Time". Birthday cards are sent monthly to those members turning 11 and 12 as a reminder to make sure they are up-to-date on immunizations by their 13th birthday. This postcard recommends a yearly wellness visit and reminds them of their benefits for yearly visits and immunizations.

A pilot project was also implemented to incentivize adolescents to get their wellness physical. Postcard reminders were sent to the parents first and then directly to the adolescent. Based on the success of this program, the postcard reminders were then rolled out to the rest of the Plan's group members in this age category.

The Plan encourages parents and adolescents to visit our website at www.sanfordhealthplan.com and click on the KidsHealth link for valuable health information for parents, kids and teens. The parent information topics include general health, infections, emotions & behavior, growth & development, recipes, medical problems, Q&A, positive parenting, first aid & safety and doctors & hospitals. Kids and teens will also enjoy the information provided specifically for them on this site.
Over the past few years the Health Plan has communicated with practitioners regarding preventive visits for adolescents and fostering these relationships. Preventive Health Guidelines and immunization guidelines are communicated yearly through the newsletters and the Health Plan encourages input from practitioners regarding the guidelines. The guidelines are also available on the Plan's website at www.sanfordhealthplan.com.

Quality Programs & Activities

Sanford Health Plan conducts, at a minimum, 2 health management programs each year as well as quality improvement activities as needed. Following are the quality evaluation and reporting steps utilized by the Plan:

- Problem Identification through the ongoing monitoring of process, structure, and outcomes of patient care or clinical performance and the evaluation of the data collected to identify potential problems.
- Selection of problems warranting corrective action or focused studies based on the prevalence of the problem or the severity of the problem impact on patient care and professional practices.
    - Topics for focused studies, health management programs and QI activities may be based on 1 of many factors:
        - Demographic characteristics, including age and sex of the member,
        - Areas of high volume,
        - Areas of high risk,
        - Areas demonstrating over or under utilization,
        - Areas that can be corrected or where prevention may have an impact, or
        - Areas where complaints or dissatisfaction have occurred.
    - Once the topic is selected, the following sources are then used to identify eligible members for the program or activity:
        - Claims data (medical and pharmacy),
        - Health risk appraisal data, if applicable,
        - Laboratory results, if applicable,
        - Data collected through the case management or UM process, if applicable, or
        - Member, practitioner or Plan staff (i.e., UM, Complex Case Management, Care Management, Health Information Line) referrals.
- Documenting corrective action steps including measurable objectives for each action, time frames, and the persons responsible for implementing the corrective action.
- After action steps are implemented and time has passed for the steps to take effect, a re-evaluation of the problem area will be done.
- Results of QI activities/surveys are published at year-end for practitioner, provider and member information by way of newsletters and special mailings. All contracted practitioners and providers are offered the opportunity to assist in problem selection by notifying the Plan regarding issues of concern. Reference is made yearly in the newsletter and/or special mailing for this opportunity.

Case Management Services

Sanford Health Plan offers case management services to all the members of our insured employer groups in order to assist in controlling healthcare costs. The case manager facilitates communication and coordination between members and practitioners of medical services. By involving all members of the healthcare team in the decision-making process, fragmentation of the healthcare delivery system is minimized. The case manager educates our members about wellness, health conditions, community resources, insurance benefits, cost factors and issues of concern. Serving as the link between individuals, practitioners, payers and the community, the case manager encourages and is an advocate for appropriate use of medical cost effectiveness on a case-by-case basis.

Complex Case Management Program

Sanford Health Plan's Complex Case Management Program is available to qualifying Health Plan Members and their families "FREE" of charge. Complex case management is a process that aims to identify high-risk or high cost Members, assess treatment options and opportunities to coordinate care, design treatment programs to improve quality and efficacy of care, control costs and manage Member care to ensure the optimum outcome. Concentrating for the most part on catastrophic or chronic cases, case manager nurses are called in to consult and manage diagnoses such as serious traumas, cancers, organ transplants, spinal cord injuries, multiple chronic illnesses and/or chronic illnesses that result in high utilization and diagnoses as identified by our reinsurance provider.

Health Plan Nurse Case Managers manage these complex cases to ensure high quality, cost effective and appropriate utilization of health services. The case manager acts as a Member advocate, seeking and coordinating creative solutions to a Member's health care needs without compromising quality health outcomes for selected medical diagnoses. The case manager contacts our Members by phone and mail. She is able to act as a resource, educator and/or coordinator of all medical care if needed.

If you would like more information about this program and whether you or your patient meet the criteria to participate in the program, please contact a Sanford Health Plan Complex Case Manager at (888) 315-0884.

Preventive Health Guidelines

Health promotion and disease prevention is our best opportunity to reduce the ever-increasing portion of resources spent to treat preventable illnesses and impairments that could have been prevented. As a health plan we would not be doing our jobs if we did not educate our members on how to cut health care costs, prevent premature onset of disease and disability, and to help all people achieve healthier, more productive lives.

Preventive Health Guidelines are age-specific and describe prevention or early detection interventions and recommended frequency and conditions under which the interventions are required. Appropriate practitioners are involved in the development of preventive health guidelines (i.e., practitioners who are from specialties that would use the guidelines).

Members of Sanford Health Plan are encouraged to utilize preventive health services, health education and health promotion by publicizing preventive health services, educational classes, and other articles on prevention in special mailings or in the Member Messenger Newsletters.

Current Preventive Health Guidelines are available on our website at www.sanfordhealthplan.com for both members and practitioners. A paper copy is available by calling the Plan at (605) 328-6800 or (800) 752-5863.

Sanford Health Plan Quality Improvement Committees

Physician Quality Committee

The Physician Quality Committee consists of physician members from various specialties of care. The Physician Quality Committee is charged with supporting the Plan's Board of Directors and Chief Medical Officer in meeting quality assurance goals on **issues of care**. Its responsibilities include, but are not limited to, developing and continually evaluating the review criteria used in the evaluation of appropriate utilization, development and implementation of medical policies and procedures and evaluation of quality programs. This Committee is also responsible for the Plan's pharmaceutical management procedures as well as formulary decisions.

Health Plan Quality Improvement Committee

The Health Plan Quality Improvement Committee is comprised of Plan directors and staff and is charged with supporting the Plan's Board of Directors and Chief Medical Officer in meeting quality assurance goals on **issues of service**.

The purpose of the QI Committee is to provide a mechanism for the comprehensive review of all health care issues affecting patients and facilitating the peer review process. The Committee is also responsible for quality activities by establishing, reviewing, and instituting needed actions and ensuring follow-up as appropriate. The committee will make recommendations to the Board of Directors regarding changes to Plan policies and procedures to improve quality based on the results of satisfaction surveys, evaluation of complaint and appeal data and quality improvement activities or processes. This Committee also serves as the internal confidentiality committee and ensures that appropriate practices are in place for the protection of member information.

Credentialing Committee

The Credentialing Committee is responsible for reviewing all issues regarding participating practitioners and determines a status for each individual who requests to be in the Sanford Health Plan practitioner network. Most often, the Committee will be reviewing new credentialing files and recredentialing files of participating practitioners at least every 3 years. However, in the instances of the Plan becoming aware of any serious quality deficiencies where the welfare of a Plan member may be affected, it is the responsibility of the Credentialing Committee members to determine if the status of that practitioner needs to be altered. The determinations of the Committee regarding participation status of all practitioners, as well as any alterations to a practitioner's status, are reviewed and approved the Sanford Health Plan Board of Directors. The monthly Credentialing Committee consists of physician members of various specialty backgrounds.

Member and Practitioner Communications

The following are the tools Sanford Health Plan utilizes to ensure timely and accurate communications with members and practitioners alike.

Member Messenger Newsletter

This newsletter is published for Sanford Health Plan members 3 times a year. It communicates information on preventive health, health management programs and quality improvement activities, how to initiate a complaint or appeal, answers to commonly asked questions, educational classes available to members, various educational articles, satisfaction survey results Plan policies and procedures, how to access the practitioner directory, pharmacy benefit information and much more. Members are also directed to access and utilize the Plan's website and ensured that if they do not have internet access, all information is available by calling the Plan.

Provider Perspective Newsletter

This newsletter goes out to all Sanford Health Plan practitioners 3 times a year. It communicates information such as Plan policies and procedures, information on preventive health, health management programs and quality improvement activities, clinical practice guidelines, satisfaction survey results, answers to commonly asked questions, billing and claims information, how to access the practitioner directory, pharmacy benefit information and much more. Practitioners are also directed to access and utilize the Plan's website and ensured that if they do not have internet access, all information is available by calling the Plan.

Medical Updates Newsletter

This newsletter is a tool for Sanford Health Plan's Chief Medical Officer, Dr. Michael Crandell, to utilize in communicating various educational or informational topics to Plan practitioners. This newsletter is sent on an as needed basis.

Health Notions Newsletter

This newsletter addresses health and wellness topics. It is sent on a monthly basis to the Plan's employer groups to share with their employees.

Sanford Health Plan Website

To further improve communication with our members, practitioners and providers, the Plan has a website that includes information for members, practitioners, employers and visitors. Whenever members are directed to the website through paper materials like the newsletters, they are also reminded that if they do not have internet access, they can call the Plan to request the same information.

The website also includes a link to the Plan's online portal, *my*HealthPlan. *my*HealthPlan allows members access to their personal medical and pharmacy claims and benefit information, check the status of claim payments, access their flexible spending account, ask questions, order ID cards online, enroll in health management programs, submit health related questions, access educational information on a variety of health conditions and much more.

WorldDoc, another feature of *my*HealthPlan, is a secure, health education website that provides the tools and information you need to better manage your health and to help you make informed healthcare decisions. Available 24/7 from any computer with Internet access, WorldDoc gives you the opportunity to privately evaluate and manage your health by:

- Learning your health risks by completing the Health Risk Assessment
- Improving health habits with the Healthy Living Program
- Using the Personal Evaluation System to investigate symptoms
- Searching the Medical Library to learn about medical conditions
- Tracking health behaviors, such as exercise or fruits and vegetable consumption, with the Health Trackers

Visit www.sanfordhealthplan.com and click on the *my*HealthPlan tab to create an account and explore what a great resource *my*HealthPlan and WorldDoc can be!

Conclusion

This report is Sanford Health Plan's commitment to our customers that we will continue to provide cost effective, quality care and service. Sanford Health Plan uses the data included in this report internally to identify opportunities for improvement and areas in need of quality improvement initiatives or health management programs.

Due to the changing nature of many of the HEDIS measures, employer groups and practitioners are advised to use HEDIS measures with care as a basis to initiate discussions with the Plan regarding our delivery system and quality of care and service being provided to our members.

The measures presented in this report have been audited by a certified HEDIS compliance auditor. Any questions regarding definitions of measures, data sources, information system specifications or quality projects should be directed to the Sanford Health Plan Care Management Department at (888) 315-0884.

Sources

1. The source for data contained in this publication is Quality Compass® 2011 and is used with the permission of the National Committee for Quality Assurance (NCQA). Any analysis, interpretation, or conclusion based on these data is solely that of the authors, and NCQA specifically disclaims responsibility for any such analysis, interpretation, or conclusion. Quality Compass® is a registered trademark of the National Committee for Quality Assurance (NCQA).
2. U.S. Department of Health and Human Services. "2020 Topics & Objectives." Healthy People .gov. 2 May 2011. Web. 14 Jul. 2011.

Formulary

for non-grandfathered members

The following is a list of the most commonly prescribed drugs. It represents an abbreviated version of the drug formulary that is the core of your pharmacy benefit coverage. In addition to using this list, allowing substitution of generic products is encouraged when appropriate.

If you are currently on a 3 or 4-tier pharmacy benefit program, the lowest co-payment is applied to all covered generic drugs. Generic drugs are indicated in bold. Tier 2 co-payment will apply to all of the covered brands listed on this formulary. Brand name drugs are listed in CAPITAL letters.

This is NOT a complete listing of covered drugs. For a complete list of medications, you can go to www.sanfordhealthplan.com/myhealthplan and link to the Express Scripts website.

"PA Required" indicates that prior authorization is required on that specific medication. "Step therapy" indicates the medication requires the use of first-line alternatives before more expensive second-line drugs are covered by the pharmacy benefit. Drugs marked with an asterisk (*) must be obtained from CuraScript.

If you are currently taking or are prescribed an injectable medication, please contact CuraScript Injectable Drug Program at (866) 333-9721 to order your drugs. Refer to the Pharmacy Handbook for a complete listing of drugs and instructions.

If you have questions regarding coverage call (800) 805-7938.

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	DRUG NAME	PA/STEP/QLL	TIER 1	TIER 2	TIER 3	TIER 4	SUGGESTED PREFFERED ALTERNATIVES
CHAPTER 1: ANESTHETICS							
1.2 TOPICAL ANESTHETICS							
	lidocaine hcl		X				
	lidocaine-prilocaine		X				
	LIDODERM			X			
CHAPTER 2: ANTIINFECTIVES							
2.1.1 CEPHALOSPORINS							
	cefaclor er		X				
	cefadroxil		X				
	cefdinir		X				
	cefpodoxime proxetil		X				
	cefprozil		X				
	cefuroxime		X				
	cephalexin		X				
	CEDAX				X		**cefprozil, cefuroxime, amox/clav**
	SUPRAX				X		**cefprozil, cefuroxime, amox/clav**
2.1.3 CLINDAMYCINS							
	clindamycin hcl		X				
	clindamycin phosphate		X				
2.1.4 ERYTHROMYCINS							
	erythromycin		X				
2.1.4.1 OTHER MACROLIDES							
	azithromycin		X				
	clarithromycin/er		X				
2.1.5 PENICILLINS							
	amox tr-potassium clavulanate		X				
	amoxicillin		X				
	amoxicillin-clavulanate er		X				
	dicloxacillin sodium		X				
	penicillin v potassium		X				
2.1.6 SULFONAMIDES							
	sulfamethoxazole-trimethoprim		X				
2.1.7 TETRACYCLINES							
	doxycycline hyclate		X				
	doxycycline monohydrate		X				
	minocycline hcl		X				
	tetracycline hcl		X				
	DORYX				X		
2.1.8 URINARY ANTIINFECTIVES							
	nitrofurantoin		X				
	nitrofurantoin mono-macro		X				
	trimethoprim		X				
2.1.9 QUINOLONES							
	ciprofloxacin, -er		X				
	levofloxacin		X				
	ofloxacin		X				
	AVELOX/ABC PACK			X			
	FACTIVE				X		
	NOROXIN				X		**ciprofloxacin, levofoxacin, ofloxacin**, AVELOX
2.2 TOPICAL ANTIBACTERIAL DRUGS							
	gentamicin sulfate		X				
	mupirocin		X				
	silver sulfadiazine		X				

DRUG NAME		PA/STEP/QLL	TIER				SUGGESTED PREFFERED ALTERNATIVES
			1	2	3	4	
	ALTABAX				X		
	BACTROBAN NASAL OINTMENT				X		
2.3 ORAL ANTIFUNGAL DRUGS							
	fluconazole		X				
	griseofulvin		X				
	itraconazole		X				
	ketoconazole		X				
	nystatin		X				
	terbinafine hcl		X				
	voriconazole		X				
	GRIFULVIN V			X			
	ONMEL				X		
	ORAVIG				X		
2.4.1 VAGINAL ANTIFUNGALS							
	clotrimazole		X				
	terconazole		X				
2.4.2 OTHER TOPICAL ANTIFUNGALS							
	ciclopirox		X				
	clotrimazole		X				
	econazole nitrate		X				
	ketoconazole		X				
	nystatin		X				
	ERTACZO				X		**generic**/OTC ANTIFUNGAL
	EXELDERM				X		**generic**/OTC ANTIFUNGAL
	NAFTIN				X		**generics**, LOROX
	OXISTAT				X		**generic**/OTC ANTIFUNGAL
2.4.3 TOPICAL ANTIFUNGAL-CORTICOSTEROID COMB.							
	clotrimazole-betamethasone		X				
	nystatin-triamcinolone		X				
2.5.1 ANTIRETROVIRALS & PROTEASE INHIBITORS							
	lamivudine		X				
	lamivudine-zidovudine		X				
	nevirapine		X				
	ATRIPLA			X			
	COMBIVIR			X			
	COMPLERA				X		
	EPIVIR			X			
	EPZICOM			X			
	INCIVEK	PA			X		
	INTELENCE				X		
	ISENTRESS			X			
	KALETRA			X			
	LEXIVA			X			
	NORVIR			X			
	PREZISTA			X			
	REYATAZ			X			
	SUSTIVA			X			
	TRUVADA			X			
	VICTRELIS	PA			X		
	VIRAMUNE			X			
	VIRAMUNE XR				X		
	VIREAD			X			
	ZIAGEN			X			
2.5.2 OTHER ANTIVIRAL DRUGS							

	DRUG NAME	PA/STEP/QLL	TIER 1	2	3	4	SUGGESTED PREFFERED ALTERNATIVES
	acyclovir		X				
	amantadine		X				
	famciclovir		X				
	ribapak					X	
	ribavirin					X	
	valacyclovir		X				
	BARACLUDE				X		
	DENAVIR			X			
	EPIVIR HBV			X			
	RELENZA	QLL		X			
	TAMIFLU	QLL		X			
2.6 TOPICAL ANTIVIRAL DRUGS							
	XERESE				X		
	ZOVIRAX			X			
2.7.2 ANTITUBERCULOSIS DRUGS							
	isoniazid		X				
	rifampin		X				
	MYCOBUTIN			X			
2.7.3 PLASMODICIDES							
	atovaquone-proguanil hcl		X				
	hydroxychloroquine sulfate		X				
	mefloquine hcl		X				
	QUALAQUIN				X		
2.7.4 SULFONES							
	DAPSONE			X			
2.7.5 TRICHOMONOCIDES							
	metronidazole		X				
	tinidazole		X				
2.8 OTHER ANTIINFECTIVE DRUGS							
	bacitracin		X				
	vancomycin hcl		X				
	DIFICID				X		
	MEPRON			X			
	NEBUPENT			X			
	VANCOCIN PULVULE	PA			X		
	XIFAXAN				X		
	ZYVOX	PA		X			
2.8.2 AMINOGLYCOSIDES							
	gentamicin sulfate		X				
	tobramycin sulfate		X				
	TOBI					X	
CHAPTER 3: ANTINEOPLASTIC/IMMUNOSUPPRESSANT DRUGS							
3.0 ANTINEOPLASTIC/IMMUNOSUPPRESSANT DRUGS							
	anagrelide hcl					X	
	azathioprine					X	
	cyclosporine modified					X	
	hydroxyurea					X	
	leflunomide					X	
	megestrol acetate					X	
	mercaptopurine					X	
	methotrexate					X	
	mycophenolate mofetil					X	
	tacrolimus					X	
	tamoxifen citrate					X	

	DRUG NAME	PA/STEP/QLL	TIER 1	2	3	4	SUGGESTED PREFFERED ALTERNATIVES
	tretinoin		X				
	ENBREL	PA				X	
	HUMIRA	PA				X	
	MEGACE ES					X	
	MYFORTIC					X	
	RAPAMUNE					X	
	SIMPONI	PA				X	
	STELARA	PA				X	
CHAPTER 4: CARDIOVASCULAR MEDICATIONS							
4.1 CARDIAC GLYCOSIDES							
	digoxin		X				
	LANOXIN			X			
4.2 CALCIUM ANTAGONISTS							
	amlodipine besylate		X				
	cartia xt		X				
	diltiazem/er		X				
	felodipine er		X				
	nifediac cc		X				
	nifedical xl		X				
	nifedipine er		X				
	nisoldipine		X				
	verapamil/er pm		X				
	CARDENE SR				X		**generics, amlodipine**
	CARDIZEM LA				X		
	SULAR				X		**nisoldipine**
4.3.1 LOOP DIURETICS							
	bumetanide		X				
	furosemide		X				
	torsemide		X				
4.3.2 THIAZIDE AND RELATED DRUGS							
	chlorthalidone		X				
	hydrochlorothiazide		X				
	indapamide		X				
	metolazone		X				
4.3.3 POTASSIUM SPARING DIURETICS							
	amiloride hcl		X				
	eplerenone		X				
	spironolactone		X				
	spironolactone-hctz		X				
	triamterene-hctz		X				
	triamterene-hydrochlorothiazid		X				
4.4 BETA-ADRENERGIC ANTAGONIST DRUGS							
	acebutolol hcl		X				
	atenolol		X				
	bisoprolol fumarate		X				
	carvedilol		X				
	labetalol hcl		X				
	metoprolol succinate		X				
	metoprolol tartrate		X				
	nadolol		X				
	pindolol		X				
	propranolol hcl		X				
	timolol maleate		X				
	BYSTOLIC				X		

DRUG NAME		PA/STEP/QLL	TIER				SUGGESTED PREFFERED ALTERNATIVES
			1	2	3	4	
	COREG CR				X		**carvedilol**
	INNOPRAN XL				X		
4.5.1 VASODILATOR ANTIHYPERTENSIVES							
	doxazosin mesylate		X				
	minoxidil		X				
	prazosin hcl		X				
	terazosin hcl		X				
4.5.2 CENTRALLY ACTING ANTIHYPERTENSIVES							
	clonidine, hcl		X				
	guanfacine hcl		X				
	methyldopa		X				
4.5.4.1 ANGIOTENSIN CONVERTING ENZYME INHIBITORS							
	benazepril hcl		X				
	captopril		X				
	enalapril maleate		X				
	fosinopril sodium		X				
	lisinopril		X				
	moexipril hcl		X				
	quinapril hcl		X				
	ramipril		X				
	trandolapril		X				
4.5.4.2 ANGIOTENSIN II RECEPTOR ANTAGONISTS							
	candesartan, -hctz		X				
	eprosartan mesylate		X				
	irbesartan, -hctz		X				
	losartan, -hctz		X				
	valsartan hctz		X				
	DIOVAN			X			
	EDARBI				X		**generics**, DIOVAN
	MICARDIS, -HCT				X		**generics**, DIOVAN
	TEVETEN HCT				X		**generics**
4.5.6 OTHER ANTIHYPERTENSIVES							
	amlodipine besylate-benazepril		X				
	atenolol-chlorthalidone		X				
	benazepril-hydrochlorothiazide		X				
	bisoprolol-hydrochlorothiazide		X				
	captopril-hydrochlorothiazide		X				
	enalapril-hydrochlorothiazide		X				
	fosinopril-hydrochlorothiazide		X				
	irbesartan-hydrochlorothiazide		X				
	lisinopril-hydrochlorothiazide		X				
	losartan-hydrochlorothiazide		X				
	metoprolol-hydrochlorothiazide		X				
	moexipril-hydrochlorothiazide		X				
	AMTURNIDE				X		
	AZOR				X		
	EXFORGE/HCT				X		
	TARKA ER				X		**trandolapril/verapamil**
	TEKAMLO				X		
	TEKTURNA/HCT				X		
	TRIBENZOR				X		
4.6.1 NITRATES							
	isosorbide		X				
	isosorbide dinitrate		X				

DRUG NAME		PA/STEP/QLL	TIER				SUGGESTED PREFFERED ALTERNATIVES
			1	2	3	4	
	nitroglycerin		X				
	nitroglycerin patch		X				
	NITROSTAT			X			
4.7.1.3 CLASS 1C							
	flecainide acetate		X				
	propafenone hcl		X				
	RYTHMOL SR				X		**propafenone**
4.7.3 AMIODARONES							
	amiodarone hcl		X				
4.7.5 OTHER ANTIARRHYTHMICS							
	sotalol		X				
	MULTAQ			X			
	TIKOSYN			X			
4.8.1 HYPOLIPOPROTEINEMICS							
	cholestyramine		X				
	colestipol hcl		X				
	fenofibrate		X				
	fenofibric acid		X				
	gemfibrozil		X				
	LOVAZA	PA		X			
	WELCHOL				X		
	ZETIA	ST		X			
4.8.2 HMG-COA REDUCTASE INHIBITORS							
	atorvastatin		X				
	fluvastatin	ST	X				
	lovastatin		X				
	pravastatin		X				
	simvastatin		X				
	CRESTOR	ST		X			
	LIVALO	ST			X		**generic HMGs**, Crestor
4.8.2.1 HMG-COA COMBINATIONS							
	amlodipine-atorvastatin		X				
	ADVICOR			X			
	CADUET	ST		X			
	LIPTRUZET	ST		X			
4.9 OTHER CARDIOVASCULAR DRUGS							
	pentoxifylline		X				
	RANEXA			X			
CHAPTER 5: AUTONOMIC AND CNS MEDICATIONS							
5.1.1 ANALGESICS							
	butorphanol tartrate		X				
	tramadol hcl/er		X				
	tramadol hcl-acetaminophen		X				
5.1.1.1 CLASS II NARCOTICS							
	endocet		X				
	fentanyl		X				
	hydromorphone hcl		X				
	methadone hcl		X				
	morphine sulfate/er		X				
	oxycodone hcl		X				
	oxycodone-acetaminophen		X				
	oxymorphone hcl		X				
	ROXICET		X				
	NUCYNTA, -ER	PA			X		

DRUG NAME		PA/STEP/QLL	TIER				SUGGESTED PREFFERED ALTERNATIVES
			1	2	3	4	
	OPANA ER	PA			X		
	OXYCONTIN			X			
5.1.1.2 CLASS III NARCOTICS							
	acetaminophen-codeine		X				
	buprenorphine hcl		X				
	hydrocodone bit-ibuprofen		X				
	hydrocodone-acetaminophen		X				
	reprexain		X				
	zamicet		X				
	BUTRANS				X		
	SUBOXONE				X		
5.1.2 DRUGS TO PREVENT AND TREAT HEADACHES							
	butalbital compound-codeine		X				
	butalbital-aspirin-caffeine		X				
	dihydroergotamine nasal spray		X				
	naratriptan tab	9/rx	X				
	rizatriptan tab	12/rx	X				
	sumatriptan tab	12/rx	X				
	sumatriptan inj	1 kit/rx	X				
	sumatriptan nasal spray	6/rx	X				
	zolmitriptan -zmt tab	12/rx	X				
	AXERT	6/rx			X		**naratriptan, rizatriptan, sumatriptan, zolmitritan**, RELPAX
	FROVA	9/rx			X		**naratriptan, rizatriptan, sumatriptan, zolmitritan**, RELPAX
	RELPAX	12/rx		X			
	ZOMIG NASAL SPRAY	6/rx			X		
5.2.1 ANXIOLYTICS							
	alprazolam/er/xr		X				
	buspirone hcl		X				
	chlordiazepoxide hcl		X				
	clorazepate dipotassium		X				
	diazepam		X				
	lorazepam		X				
	oxazepam		X				
5.2.2 SEDATIVE/HYPNOTIC DRUGS							
	estazolam		X				
	flurazepam		X				
	temazepam		X				
	triazolam		X				
	zaleplon		X				
	zolpidem tartrate, -er		X				
	LUNESTA				X		**zolpidem, zaleplon**
	ROZEREM				X		**zolpidem, zaleplon**
5.3 ANTIMANIA DRUGS							
	lithium carbonate		X				
5.4.1 CARBAMAZEPINES							
	carbamazepine, -xr		X				
	oxcarbazepine		X				
	TEGRETOL XR				X		**carbamazepine xr**
5.4.2 ANTICONVULSANT BENZODIAZEPINES							
	clonazepam		X				
	diazepam		X				
5.4.3 HYDANTOINS							

	DRUG NAME	PA/STEP/QLL	TIER 1	TIER 2	TIER 3	TIER 4	SUGGESTED PREFFERED ALTERNATIVES
	phenytoin sodium extended		X				
	DILANTIN			X			
	PHENYTEK			X			
5.4.4 VALPROIC ACID AND DERIVATIVES							
	divalproex sodium, -er		X				
	valproic acid		X				
5.4.6 ANTICONVULSANT BARBITURATES							
	phenobarbital		X				
	primidone		X				
5.4.7 OTHER ANTICONVULSANTS							
	gabapentin		X				
	lamotrigine		X				
	levetiracetam		X				
	topiramate		X				
	zonisamide		X				
	GRALISE				X		
	HORIZANT				X		
	KEPPRA, XR				X		
	LAMICTAL, -ODT, -XR				X		**lamotrigine**
	LYRICA			X			
	POTIGA				X		
	VIMPAT			X			
5.5.1.1 TERTIARY AMINES							
	amitriptyline hcl		X				
	clomipramine hcl		X				
	doxepin hcl		X				
	imipramine hcl		X				
5.5.1.2 SECONDARY AMINES							
	desipramine hcl		X				
	nortriptyline hcl		X				
5.5.1.3 SELECTIVE SEROTONIN REUPTAKE INHIBITORS							
	citalopram, - hbr		X				
	escitalopram oxalate		X				
	fluoxetine hcl		X				
	fluvoxamine maleate		X				
	paroxetine hcl		X				
	sertraline hcl		X				
	VIIBRYD	ST		X			
5.5.1.4 OTHER ANTIDEPRESSANTS							
	bupropion hcl,- sr, -xl		X				
	mirtazapine		X				
	nefazodone hcl		X				
	trazodone hcl		X				
	venlafaxine hcl, -er	ST	X				
	CYMBALTA	ST/QLL		X			
	PRISTIQ ER	ST		X			
	SAVELLA			X			
5.5.2 MAO INHIBITORS							
	tranylcypromine sulfate		X				
5.6 ANTIVERTIGO AND ANTIEMETIC DRUGS							
	dronabinol		X				
	granisetron hcl	LIMIT 2/rx	X				
	meclizine hcl		X				
	ondansetron hcl		X				

DRUG NAME		PA/STEP/QLL	TIER				SUGGESTED PREFFERED ALTERNATIVES
			1	2	3	4	
	ondansetron odt		X				
	prochlorperazine maleate		X				
	promethazine hcl		X				
	promethegan		X				
	ANZEMET	LIMIT 1/rx			X		
	EMEND	LIMIT 3/rx			X		**granisetron, ondansetron**
	TRANSDERM-SCOP				X		
5.7.1 ANTIPARKINSON ANTICHOLINERGIC DRUGS							
	benztropine mesylate		X				
	trihexyphenidyl hcl		X				
5.7.2 OTHER ANTIPARKINSON DRUGS							
	bromocriptine mesylate		X				
	carbidopa-levodopa		X				
	carbidopa-levodopa-entacapone		X				
	pramipexole dihydrochloride		X				
	ropinirole hcl		X				
	AZILECT			X			
	COMTAN			X			
	MIRAPEX ER				X		
	NEUPRO				X		
	REQUIP XL				X		
	STALEVO				X		**use generic**
5.8 ANTIPSYCHOTIC DRUGS							
	clozapine		X				
	fluphenazine hcl		X				
	haloperidol		X				
	olanzapine, -odt		X				
	perphenazine		X				
	quetiapine fumarate		X				
	risperidone		X				
	thioridazine hcl		X				
	thiothixene		X				
	trifluoperazine hcl		X				
	ziprasidone hcl		X				
	ABILIFY			X			
	FANAPT				X		**generics**, ABILIFY TAB, SEROQUEL XR
	GEODON			X			
	INVEGA ER	PA			X		**generics**, ABILIFY TAB, SEROQUEL XR
	LATUDA			X			
	SAPHRIS	PA			X		**generics**, ABILIFY TAB, SEROQUEL XR
	SEROQUEL XR			X			
5.8.1 ALIPHATIC PHENOTHIAZINES							
	chlorpromazine hcl		X				
5.8.1.1 PSYCHOTHERAPEUTIC COMBINATIONS							
	olanzapine-fluoxetine hcl		X				
	SYMBYAX				X		
5.9.1 CNS STIMULANT DRUGS							
	amphetamine salt combo		X				
	dexmethylphenidate hcl, -sulfate		X				
	dextroamphetamine-amphetamine		X				
	methylphenidate er, -hcl, -sr		X				
	modafinil		X				
	DAYTRANA				X		
	FOCALIN XR				X		

	DRUG NAME	PA/STEP/QLL	TIER 1	2	3	4	SUGGESTED PREFFERED ALTERNATIVES
	NUVIGIL				X		
	QUILLIVANT XR				X		
	RITALIN LA				X		**methylphenidate**,VYVANSE
	VYVANSE			X			
5.9.2 OTHER CNS/AUTONOMIC DRUGS							
	atropine sulfate		X				
	naltrexone hcl		X				
	pyridostigmine bromide		X				
	NUEDEXTA				X		
5.9.3 ANTIDEMENTIA DRUGS							
	donepezil hcl		X				
	galantamine hbr		X				
	rivastigmine		X				
	ARICEPT/ODT				X		donepezil
	EXELON SOLUTION, PATCHES				X		rivastigmine
	NAMENDA			X			
	NAMENDA XR				X		
5.9.6 OTHER DRUGS FOR ADHD							
	INTUNIV				X		
	KAPVAY				X		
	STRATTERA			X			
CHAPTER 6: DERMATOLOGICAL MEDICATIONS							
6.1 TOPICAL CORTICOSTEROID DRUGS							
	alclometasone dipropionate		X				
	betamethasone dipropionate		X				
	betamethasone valerate		X				
	clobetasol		X				
	desonide		X				
	desoximetasone		X				
	fluocinolone		X				
	fluticasone propionate		X				
	halobetasol propionate		X				
	hydrocortisone butyrate, -valerate		X				
	mometasone furoate		X				
	triamcinolone acetonide		X				
	CLOBEX				X		
	HALOG				X		**generics**
	KENALOG				X		**halobetasol propionate**
	OLUX-E				X		**clobetasol propionate**
	ULTRAVATE PAC				X		**halobetasol propionate**
6.2 ANTIPRURITIC DRUGS							
	hydroxyzine		X				
6.3 ANTIACNE DRUGS							
	adapalene		X				
	benzoyl peroxide		X				
	clindamycin phosphate		X				
	clindamycin-benzoyl peroxide		X				
	erythromycin		X				
	erythromycin-benzoyl peroxide		X				
	metronidazole		X				
	sodium sulfacetamide-sulfur		X				
	tretinoin	PA	X				
	ACANYA				X		
	BENZACLIN			X			

	DRUG NAME	PA/STEP/QLL	TIER 1	TIER 2	TIER 3	TIER 4	SUGGESTED PREFFERED ALTERNATIVES
	DIFFERIN 0.1% LOTION & 0.3% GEL			X			**adapalene**
	DUAC			X			
	EPIDUO			X			
	FINACEA				X		
	METROGEL				X		
	RETIN-A MICRO/PUMP	PA		X			
6.3.1 ACCUTANES							
	isotretinoin		X				
6.7 KERATOLYTIC DRUGS							
	CONDYLOX				X		**podofilox**
6.8 ANTIPSORIASIS AND ANTIECZEMA DRUGS							
	calcipotriene		X				
	calcitrene		X				
	selenium sulfide		X				
	sulfacetamide sodium		X				
	DOVONEX			X			
	SORILUX				X		
	TACLONEX				X		
	TAZORAC			X			
	VECTICAL				X		**calcipotriene ointment**
6.9.2 TOPICAL DERMATOLOGICAL DRUGS							
	fluorouracil		X				
	imiquimod		X				
	tretinoin		X				
	CARAC			X			
	ELIDEL			X			
	EPICERAM				X		
	FLUOROPLEX			X			
	PICATO				X		
	PROTOPIC			X			
	SANTYL				X		
	SOLARAZE				X		**fluorouracil**
	VEREGEN				X		**podofilox**
	ZYCLARA			X			
6.9.3 SCABICIDES							
	permethrin		X				
	EURAX			X			
	ULESFIA				X		
6.9.5 TOPICAL ANTI-INFLAMMATORY DRUGS							
	FLECTOR			X			
	VOLTAREN			X			
CHAPTER 7: EAR-NOSE-THROAT MEDICATIONS							
7.1 DRUGS AFFECTING THE EAR							
	antipyrine-benzocaine		X				
	neomycin-polymyxin-hc		X				
	neomycin-polymyxin-hydrocort		X				
	ofloxacin		X				
	CIPRODEX				X		**generic otic quinolone**
7.2 DRUGS AFFECTING THE NOSE							
	azelastine hcl		X				
	flunisolide		X				
	fluticasone propionate		X				
	ipratropium bromide		X				
	ASTELIN			X			

DRUG NAME		PA/STEP/QLL	TIER				SUGGESTED PREFFERED ALTERNATIVES
			1	2	3	4	
	ASTEPRO			X			
	DYMISTA				X		
	NASONEX			X			
	QNASL	PA			X		
	VERAMYST	PA			X		**fluticasone**, NASONEX
	ZETONNA	PA			X		
7.3 DRUGS AFFECTING THE THROAT AND MOUTH							
	doxycycline hyclate		X				
	pilocarpine hcl		X				
	triamcinolone acetonide		X				
CHAPTER 8: ENDOCRINE MEDICATIONS							
8.1.1 INSULIN							
	APIDRA/SOLOSTAR				X		
	HUMALOG			X			
	HUMULIN			X			
	LANTUS/SOLOSTAR			X			
	LEVEMIR/FLEXPEN			X			
	NOVOLIN			X			
	NOVOLOG/FLEXPEN			X			
	NOVOLOG MIX 70-30/FLEXPEN			X			
8.1.2 ORAL HYPOGLYCEMIC DRUGS							
	acarbose		X				
	glimepiride		X				
	glipizide, -er, -xl, -w/metformin		X				
	glyburide, -micronized, -w/metformin		X				
	metformin hcl/er		X				
	nateglinide		X				
	FORTAMET				X		
	PRANDIMET				X		
	PRANDIN			X			
	RIOMET				X		**metformin**
8.1.3 INSULIN SENSITIZERS							
	pioglitazone		X				
	pioglitazone-metformin		X				
	ACTOPLUS MET XR			X			
	AVANDAMET				X		**pioglitazone-metformin**
	AVANDARYL				X		**pioglitazone + sulfonylurea**
	AVANDIA				X		**pioglitazone**
	DUETACT				X		
8.1.4 AMYLIN ANALOGUES							
	SYMLINPEN VIAL	PA		X			
	SYMLINPEN PEN	PA			X		
8.1.5.1 INCRETIN MIMETICS							
	BYDUREON	ST		X			
	BYETTA	ST		X			
	VICTOZA	ST		X			
8.1.5.2 DIPEPTIDYL PEPTIDASE-IV INHIBITORS							
	JANUMET/XR			X			
	JANUVIA			X			
	JENTADUETO			X			
	JUVISYNC			X			
	KOMBIGLYZE XR			X			
	ONGLYZA			X			

DRUG NAME		PA/STEP/QLL	TIER				SUGGESTED PREFFERED ALTERNATIVES
			1	2	3	4	
	TRADJENTA			X			
8.2 GLUCOSE ELEVATING DRUGS							
	GLUCAGEN			X			
	GLUCAGON EMERGENCY KIT			X			
8.3.1 GLUCOCORTICOID DRUGS							
	dexamethasone		X				
	dexamethasone sodium phosphate		X				
	hydrocortisone		X				
	methylprednisolone		X				
	prednisolone		X				
	prednisone		X				
	veripred 20 solution		X				
8.3.2 MINERALOCORTICOID DRUGS							
	fludrocortisone acetate		X				
8.4.1 THYROID SUPPLEMENTS							
	levothyroxine sodium		X				
	ARMOUR THYROID			X			
	CYTOMEL				X		**liothyronine**
	SYNTHROID			X			
8.4.2 ANTITHYROID DRUGS							
	methimazole		X				
	propylthiouracil		X				
8.6 OTHER ENDOCRINE DRUGS							
	alendronate sodium		X				
	desmopressin acetate		X				
	etidronate disodium		X				
	ibandronate sodium		X				
	ACTONEL	PA			X		**alendronate**
CHAPTER 9: GASTROINTESTINAL MEDICATIONS							
9.2 ANTIDIARRHEAL DRUGS							
	diphenoxylate-atropine		X				
	loperamide		X				
9.3 ANTISPASMODICS/DRUGS AFFECT GI MOTILITY							
	chlordiazepoxide-clidinium		X				
	dicyclomine hcl		X				
	hyoscyamine sulfate		X				
	metoclopramide hcl		X				
9.4.1 OTHER ANTIULCER DRUGS							
	misoprostol		X				
	sucralfate		X				
	CARAFATE			X			
9.4.2 PROTON PUMP INHIBITORS							
	omeprazole		X				
	pantoprazole sodium		X				
	ACIPHEX	PA			X		**pantoprazole, omeprazole**
	DEXILANT	PA			X		**pantoprazole, omeprazole**
	NEXIUM	PA			X		**pantoprazole, omeprazole**
9.4.3 HELICOBACTER PYLORI DRUGS							
	HELIDAC				X		**generic equivalents**
	OMECLAMOX-PAK				X		**generic equivalents**
	PREVPAC				X		**generic equivalents**
	PYLERA				X		**generic equivalents**
9.5 LAXATIVES AND CATHARTICS							
	OSMOPREP				X		

DRUG NAME		PA/STEP/QLL	TIER 1	2	3	4	SUGGESTED PREFFERED ALTERNATIVES
9.6 OTHER GI DRUGS							
	anucort-hc		X				
	balsalazide disodium		X				
	budesonide ec		X				
	hydrocortisone, -acetate		X				
	pancrelipase 5,000		X				
	peg 3350-electrolyte		X				
	proctosol-hc		X				
	proctozone-hc		X				
	sulfasalazine		X				
	trilyte with flavor packets		X				
	ursodiol		X				
	ANALPRAM E				X		
	ANALPRAM HC			X			
	ASACOL HD			X			
	CANASA			X			
	CREON DR			X			
	DELZICOL			X			
	DIPENTUM				X		**sulfasalazine**, ASACOL, LIALDA
	GOLYTELY			X			
	HALFLYTELY-BISACODYL				X		**peg electrolyte**, GOLYTELY
	LIALDA			X			
	MOVIPREP				X		**peg electrolyte**, GOLYTELY
	NULYTELY WITH FLAVOR PACKS			X			
	PANCREAZE				X		
	PENTASA			X			
	PERTZYE				X		
	PREPOPIK				X		
	RECTIV				X		
	SUPREP				X		
	ULTRESA				X		
	ZENPEP				X		
9.7 IRRITABLE BOWEL DRUGS							
	AMITIZA			X			
	LINZESS			X			
CHAPTER 11: MUSCULOSKELETAL MEDICATIONS							
11.1.1 SALICYLATES AND RELATED DRUGS							
	aspirin, -ec		X				$0 with Rx, age restriction applies
	choline mag trisalicylate		X				
	diflunisal		X				
	salsalate		X				
11.1.2 NON-STEROIDAL ANTIINFLAMMATORY AGENTS							
	diclofenac potassium, -sodium		X				
	etodolac		X				
	flurbiprofen		X				
	ibuprofen		X				
	indomethacin		X				
	ketoprofen		X				
	ketorolac tromethamine		X				
	meloxicam		X				
	nabumetone		X				
	naproxen		X				
	oxaprozin		X				
	piroxicam		X				

DRUG NAME		PA/STEP/QLL	TIER 1	2	3	4	SUGGESTED PREFFERED ALTERNATIVES
	sulindac		X				
	CELEBREX	QLL		X			
	NAPRELAN CR				X		**naproxen**
11.2 DRUGS TO PREVENT AND TREAT GOUT							
	allopurinol		X				
	probenecid		X				
	COLCRYS				X		
	ULORIC	PA			X		
11.3.1 DIRECT MUSCLE RELAXANTS							
	baclofen		X				
	tizanidine hcl		X				
11.3.2 CNS MUSCLE RELAXANTS							
	carisoprodol		X				
	chlorzoxazone		X				
	cyclobenzaprine hcl		X				
	metaxalone		X				
	methocarbamol		X				
	orphenadrine citrate		X				
	AMRIX ER				X		**cyclobenzaprine**
CHAPTER 12: NUTRITION,BLOOD							
12.1.3 THERAPEUTIC VITAMINS & MINERALS							
	calcitriol		X				
	calcium acetate		X				
	eliphos		X				
	folic acid		X				$0 with Rx for females age 50 & younger
	levocarnitine		X				
	vitamin d		X				$0 with Rx for age 65 years & older
12.1.4 FLUORIDE PRODUCTS							
	sodium fluoride		X				
12.2 POTASSIUM SUPPLEMENTS							
	potassium chloride		X				
12.3.1 ORAL ANTICOAGULANTS, VITAMIN K							
	warfarin sodium		X				
	COUMADIN			X			
12.3.2 HEPARIN AND HEPARIN ANTAGONISTS							
	enoxaparin sodium					X	
	fondaparinux sodium					X	
	ARIXTRA					X	
	FRAGMIN					X	
12.3.3 OTHER DRUGS AFFECTING COAGULATION							
	ELIQUIS				X		
	XARELTO			X			
12.3.5 THROMBIN INHIBITORS							
	PRADAXA			X			
12.4 ANTIPLATELET DRUGS							
	cilostazol		X				
	clopidogrel		X				
	dipyridamole		X				
	AGGRENOX			X			
	BRILINTA			X			

DRUG NAME		PA/STEP/QLL	TIER 1	2	3	4	SUGGESTED PREFFERED ALTERNATIVES
	EFFIENT			X			
12.5 HEMOSTATICS							
	LYSTEDA				X		
12.7 BLOOD DETOXICANTS							
	enulose		X				
	lactulose		X				
	FOSRENOL				X		
	KRISTALOSE				X		
	RENAGEL			X			
	RENVELA			X			
CHAPTER 13: OBSTETRICAL & GYNECOLOGICAL MEDICATIONS							
13.1.3 OB/GYN TOPICAL ANTIINFECTIVES							
	clindamycin phosphate		X				
	metronidazole		X				
	vandazole		X				
13.3 ANDROGEN DRUGS							
	testosterone cypionate	PA	X				
	ANDRODERM	PA		X			
	ANDROGEL	PA		X			
	AXIRON	PA		X			
	STRIANT	PA			X		
13.4 ESTROGEN DRUGS							
	estradiol		X				
	estrogen-methyltestosterone		X				
	estropipate		X				
	CENESTIN				X		PREMARIN, ESTRATAB
	DIVIGEL				X		orals or patches
	ELESTRIN				X		orals or patches
	ENJUVIA				X		
	ESTRACE			X			
	ESTRASORB				X		orals or patches
	ESTRING	QLL		X			
	ESTROGEL				X		orals or patches
	EVAMIST				X		orals or patches
	MENEST				X		PREMARIN, ESTRATAB
	MINIVELLE				X		
	PREMARIN			X			
	VAGIFEM			X			
	VIVELLE-DOT			X			
13.4.1 ESTROGEN/PROGESTIN COMBINATIONS							
	jinteli		X				
	ACTIVELLA				X		PREMPRO, PREMPHASE
	CLIMARA PRO				X		
	COMBIPATCH			X			
	FEMHRT			X			
	PREFEST				X		PREMPRO, PREMPHASE
	PREMPHASE			X			
	PREMPRO			X			
13.4.3 SELECTIVE ESTROGEN RECEPTOR MODULATOR							
	EVISTA			X			
13.5 PROGESTIN DRUGS							
	camila		X				
	errin		X				

	DRUG NAME	PA/STEP/QLL	TIER 1	2	3	4	SUGGESTED PREFFERED ALTERNATIVES
	jolivette		X				
	nora-be		X				
	norethindrone		X				
	CRINONE GEL			X			
	PROMETRIUM			X			
13.7 CONTRACEPTIVES							
	gildess/fe, lutera, marlissa, heather, introvale, jolessa, jolivette, junel/fe, kariva, kelnor, kurvelo, leena, lessina, levonest, levonor-eth estrad, levora		X				
	low-ogestrel, microgestin/fe, mono-linya, mononessa, myzilra, necon, nora-be, norethindrone, norgestimate-eth estradiol, norg-ethin estr, nortrel, ocella, orsythia		X				
	portia, previfem, quasense, reclipsen, solia, sprintec, sronyx, syeda, tri-estarylla, tri-linyah, trinessa, tri-previfem, tri-sprintec, trivora, velivet, viorele, wera, zarah, zovia		X				
	NUVARING	QLL			X		
	ORTHO EVRA	QLL			X		
	ORTHO TRI-CYCLEN LO	QLL			X		
CHAPTER 14: OPHTHALMIC MEDICATIONS							
14.1.1 OPHTHALMIC TOPICAL ANTIBACTERIAL DRUGS							
	bacitracin		X				
	bacitracin-polymyxin		X				
	ciprofloxacin hcl		X				
	erythromycin		X				
	gentamicin sulfate		X				
	neomycin-bacitracin-polymyxin		X				
	ofloxacin		X				
	polymyxin b sul-trimethoprim		X				
	sulfacetamide sodium		X				
	AZASITE			X			
	BESIVANCE	PA			X		
	MOXEZA	PA			X		
	VIGAMOX			X			
14.1.2 OPHTHALMIC TOPICAL ANTIVIRAL DRUGS							
	trifluridine		X				
14.2 OPHTHALMIC CORTICOSTEROID DRUGS							
	fluorometholone		X				
	prednisolone acetate		X				
	DUREZOL				X		
	LOTEMAX			X			
	VEXOL				X		LOTEMAX
14.3 OPHTHALMIC ANTIINFECTIVE/CORTICOSTEROIDS							
	neomycin-polymyxin-dexameth		X				
	neomycin-polymyxin-hc		X				
	tobramycin-dexamethasone		X				
	ZYLET				X		
14.5 ANTIGLAUCOMA DRUGS							
	acetazolamide		X				
	brimonidine tartrate		X				
	dorzolamide hcl		X				
	dorzolamide-timolol		X				
	latanoprost		X				

DRUG NAME		PA/STEP/QLL	TIER 1	2	3	4	SUGGESTED PREFFERED ALTERNATIVES
	levobunolol hcl		X				
	pilocarpine hcl		X				
	timolol maleate		X				
	ALPHAGAN P			X			
	AZOPT				X		**generics**, Alphagan P
	BETIMOL				X		**betaxolol, timolol**
	BETOPTIC S				X		**betaxolol**
	COMBIGAN				X		generics, Alphagan P
	COSOPT PF				X		
	ISTALOL				X		**timolol maleate**
	LUMIGAN	PA		X			
	TRAVATAN Z	PA			X		LUMIGAN
14.6 OTHER OPHTHALMIC DRUGS							
	atropine sulfate		X				
	azelastine hcl		X				
	cromolyn sodium		X				
	diclofenac sodium		X				
	epinastine hcl		X				
	ACUVAIL			X			
	ALOCRIL	PA			X		**OTC ketotifen**, PATADAY
	ALOMIDE	PA			X		**OTC ketotifen**, PATADAY
	BEPREVE	PA			X		**OTC ketotifen**, PATADAY
	EMADINE	PA			X		**OTC ketotifen**, PATADAY
	LASTACAFT	PA			X		
	PATADAY			X			
	PATANOL			X			
	RESTASIS			X			
CHAPTER 15: RESPIRATORY MEDICATIONS							
15.1.1 BETA-2 ADRENERGIC DRUGS							
	albuterol sulfate		X				
	metaproterenol sulfate		X				
	ARCAPTA NEOHALER				X		
	BROVANA	PA			X		PERFOROMIST
	FORADIL			X			
	MAXAIR AUTOHALER	PA			X		VENTOLIN HFA, PROAIR HFA
	PERFOROMIST			X			
	PROAIR HFA			X			
	SEREVENT DISKUS			X			
	VENTOLIN HFA			X			
	XOPENEX SOLUTION				X		
15.1.2 METHYL XANTHINE DRUGS							
	theophylline		X				
	theophylline anhydrous		X				
15.1.3 OTHER DRUGS FOR ASTHMA							
	budesonide		X				
	cromolyn sodium		X				
	epinephrine		X				
	ipratropium bromide		X				
	ipratropium-albuterol		X				
	ADVAIR DISKUS			X			
	ADVAIR HFA			X			
	ASMANEX				X		QVAR, FLOVENT, PULMICORT FLEXHALER
	ATROVENT HFA			X			

	DRUG NAME	PA/STEP/QLL	TIER 1	TIER 2	TIER 3	TIER 4	SUGGESTED PREFFERED ALTERNATIVES
	AUVI-Q			X			
	COMBIVENT, -RESPIMAT			X			
	DULERA				X		
	EPIPEN, -JR			X			
	FLOVENT HFA, -DISKUS			X			
	PULMICORT FLEXHALER			X			
	QVAR			X			
	SPIRIVA			X			
	SYMBICORT			X			
	TUDORZA PRESSAIR				X		
15.1.4 LEUKOTRIENE MODIFIERS							
	montelukast sodium		X				
	zafirlukast		X				
15.2.1 ANTIHISTAMINES							
	arbinoxa		X				
	cyproheptadine hcl		X				
	desloratadine		X				
	fexofenadine hcl		X				
	levocetirizine dihydrochloride		X				
	promethazine hcl		X				
15.2.3 ANTIHISTAMINE/DECONGESTANT COMBINATIONS							
	promethazine vc		X				
15.3 ANTITUSSIVE AND EXPECTORANT DRUGS							
	benzonatate		X				
	guaifenesin-codeine		X				
	promethazine vc-codeine		X				
	promethazine-codeine		X				
	promethazine-dm		X				
	REZIRA				X		
	ZUTRIPRO				X		
15.4 OTHER RESPIRATORY DRUGS							
	DALIRESP			X			
CHAPTER 16: UROLOGICAL MEDICATIONS							
16.1.1 ANTICHOLINERGIC ANTISPASMODICS							
	oxybutynin chloride, -er		X				
	tolterodine tartrate		X				
	trospium chloride, -er						
	DETROL LA	ST		X			
	ENABLEX	ST			X		**generics**, VESICARE, DETROL LA, TOVIAZ
	TOVIAZ	ST		X			
	VESICARE	ST		X			
16.1.2 CHOLINERGIC STIMULANTS							
	bethanechol chloride		X				
16.1.3 URINARY ANESTHETICS							
	phenazopyridine hcl		X				
16.1.4 OTHER GENITOURINARY PRODUCTS							
	alfuzosin hcl		X				
	finasteride		X				
	potassium citrate		X				
	tamsulosin hcl		X				
	AVODART				X		
	ELMIRON			X			
	FLOMAX				X		**tamsulosin**

DRUG NAME		PA/STEP/QLL	TIER				SUGGESTED PREFFERED ALTERNATIVES
			1	2	3	4	
	JALYN				X		
	RAPAFLO				X		
CHAPTER 18: MEDICAL (MISCELLANEOUS) SUPPLIES							
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	ONE TOUCH			X			

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mono-linya	13.7
mononessa	13.7
montelukast sodium	15.1.4
morphine sulfate/er	5.1.1.1
MOVIPREP	9.6
MOXEZA	14.1.1
MULTAQ	4.7.5
mupirocin	2.2
MYCOBUTIN	2.7.2
mycophenolate mofetil	3
MYFORTIC	3
myzilra	13.7
nabumetone	11.1.2
nadolol	4.4
NAFTIN	2.4.2
naltrexone hcl	5.9.2
NAMENDA	5.9.3
NAMENDA XR	5.9.3
NAPRELAN CR	11.1.2
naproxen	11.1.2
naratriptan tab	5.1.2
NASONEX	7.2
nateglinide	8.1.2
NEBUPENT	2.8
necon	13.7
nefazodone hcl	5.5.1.4
neomycin-bacitracin-polymyxin	14.1.1
neomycin-polymyxin-dexameth	14.3
neomycin-polymyxin-hc	7.1
neomycin-polymyxin-hc	14.3
neomycin-polymyxin-hydrocort	7.1
NEUPRO	5.7.2
nevirapine	2.5.1
NEXIUM	9.4.2
nifediac cc	4.2
nifedical xl	4.2
nifedipine er	4.2
nisoldipine	4.2
nitrofurantoin	2.1.8
nitrofurantoin mono-macro	2.1.8
nitroglycerin	4.6.1
nitroglycerin patch	4.6.1
NITROSTAT	4.6.1
nora-be	13.7
nora-be	13.5
norethindrone	13.7
norethindrone	13.5
norg-ethin estr	13.7
norgestimate-eth estradiol	13.7
NOROXIN	2.1.9
nortrel	13.7
nortriptyline hcl	5.5.1.2
NORVIR	2.5.1
NOVOLIN	8.1.1
NOVOLOG MIX 70-30/FLEXPEN	8.1.1
NOVOLOG/FLEXPEN	8.1.1
NUCYNTA, -ER	5.1.1.1
NUEDEXTA	5.9.2
NULYTELY WITH FLAVOR PACKS	9.6
NUVARING	13.7
NUVIGIL	5.9.1
nystatin	2.3
nystatin	2.4.2
nystatin-triamcinolone	2.4.3
ocella	13.7
ofloxacin	7.1
ofloxacin	14.1.1
ofloxacin	2.1.9
olanzapine, -odt	5.8
olanzapine-fluoxetine hcl	5.8.1.1
OLUX-E	6.1
OMECLAMOX-PAK	9.4.3
omeprazole	9.4.2
ondansetron hcl	5.6
ondansetron odt	5.6
ONE TOUCH	18.1
ONGLYZA	8.1.5.2
ONMEL	2.3
OPANA ER	5.1.1.1
ORAVIG	2.3
orphenadrine citrate	11.3.2
orsythia	13.7
ORTHO EVRA	13.7
ORTHO TRI-CYCLEN LO	13.7
OSMOPREP	9.5
oxaprozin	11.1.2
oxazepam	5.2.1
oxcarbazepine	5.4.1
OXISTAT	2.4.2
oxybutynin chloride, -er	16.1.1
oxycodone hcl	5.1.1.1
oxycodone-acetaminophen	5.1.1.1
OXYCONTIN	5.1.1.1
oxymorphone hcl	5.1.1.1
PANCREAZE	9.6
pancrelipase 5,000	9.6
pantoprazole sodium	9.4.2
paroxetine hcl	5.5.1.3
PATADAY	14.6
PATANOL	14.6
peg 3350-electrolyte	9.6
penicillin v potassium	2.1.5
PENTASA	9.6
pentoxifylline	4.9
PERFOROMIST	15.1.1
permethrin	6.9.3
perphenazine	5.8
PERTZYE	9.6
phenazopyridine hcl	16.1.3
phenobarbital	5.4.6
PHENYTEK	5.4.3
phenytoin sodium extended	5.4.3
PICATO	6.9.2
pilocarpine hcl	7.3
pilocarpine hcl	14.5
pindolol	4.4

pioglitazone	8.1.3
pioglitazone-metformin	8.1.3
piroxicam	11.1.2
polymyxin b sul-trimethoprim	14.1.1
portia	13.7
potassium chloride	12.2
potassium citrate	16.1.4
POTIGA	5.4.7
PRADAXA	12.3.5
pramipexole dihydrochloride	5.7.2
PRANDIMET	8.1.2
PRANDIN	8.1.2
pravastatin	4.8.2
prazosin hcl	4.5.1
prednisolone	8.3.1
prednisolone acetate	14.2
prednisone	8.3.1
PREFEST	13.4.1
PREMARIN	13.4
PREMPHASE	13.4.1
PREMPRO	13.4.1
PREPOPIK	9.6
previfem	13.7
PREVPAC	9.4.3
PREZISTA	2.5.1
primidone	5.4.6
PRISTIQ ER	5.5.1.4
PROAIR HFA	15.1.1
probenecid	11.2
prochlorperazine maleate	5.6
proctosol-hc	9.6
proctozone-hc	9.6
promethazine hcl	5.6
promethazine hcl	15.2.1
promethazine vc	15.2.3
promethazine vc-codeine	15.3
promethazine-codeine	15.3
promethazine-dm	15.3
promethegan	5.6
PROMETRIUM	13.5
propafenone hcl	4.7.1.3
propranolol hcl	4.4
propylthiouracil	8.4.2
PROTOPIC	6.9.2
PULMICORT FLEXHALER	15.1.3
PYLERA	9.4.3
pyridostigmine bromide	5.9.2
QNASL	7.2
QUALAQUIN	2.7.3
quasense	13.7
quetiapine fumarate	5.8
QUILLIVANT XR	5.9.1
quinapril hcl	4.5.4.1
QVAR	15.1.3
ramipril	4.5.4.1
RANEXA	4.9
RAPAFLO	16.1.4
RAPAMUNE	3
reclipsen	13.7
RECTIV	9.6
RELENZA	2.5.2
RELPAX	5.1.2
RENAGEL	12.7
RENVELA	12.7
reprexain	5.1.1.2
REQUIP XL	5.7.2
RESTASIS	14.6
RETIN-A MICRO/PUMP	6.3
REYATAZ	2.5.1
REZIRA	15.3
ribapak	2.5.2
ribavirin	2.5.2
rifampin	2.7.2
RIOMET	8.1.2
risperidone	5.8
RITALIN LA	5.9.1
rivastigmine	5.9.3
rizatriptan tab	5.1.2
ropinirole hcl	5.7.2
ROXICET	5.1.1.1
ROZEREM	5.2.2
RYTHMOL SR	4.7.1.3
salsalate	11.1.1
SANTYL	6.9.2
SAPHRIS	5.8
SAVELLA	5.5.1.4
selenium sulfide	6.8
SEREVENT DISKUS	15.1.1
SEROQUEL XR	5.8
sertraline hcl	5.5.1.3
silver sulfadiazine	2.2
SIMPONI	3
simvastatin	4.8.2
sodium fluoride	12.1.4
sodium sulfacetamide-sulfur	6.3
SOLARAZE	6.9.2
solia	13.7
SORILUX	6.8
sotalol	4.7.5
SPIRIVA	15.1.3
spironolactone	4.3.3
spironolactone-hctz	4.3.3
sprintec	13.7
sronyx	13.7
STALEVO	5.7.2
STELARA	3
STRATTERA	5.9.6
STRIANT	13.3
SUBOXONE	5.1.1.2
sucralfate	9.4.1
SULAR	4.2
sulfacetamide sodium	6.8
sulfacetamide sodium	14.1.1
sulfamethoxazole-trimethoprim	2.1.6
sulfasalazine	9.6
sulindac	11.1.2
sumatriptan inj	5.1.2
sumatriptan nasal spray	5.1.2
sumatriptan tab	5.1.2
SUPRAX	2.1.1
SUPREP	9.6
SUSTIVA	2.5.1
syeda	13.7
SYMBICORT	15.1.3
SYMBYAX	5.8.1.1
SYMLINPEN PEN	8.1.4
SYMLINPEN VIAL	8.1.4
SYNTHROID	8.4.1
TACLONEX	6.8
tacrolimus	3

TAMIFLU	2.5.2
tamoxifen citrate	3
tamsulosin hcl	16.1.4
TARKA ER	4.5.6
TAZORAC	6.8
TEGRETOL XR	5.4.1
TEKAMLO	4.5.6
TEKTURNA/HCT	4.5.6
temazepam	5.2.2
terazosin hcl	4.5.1
terbinafine hcl	2.3
terconazole	2.4.1
testosterone cypionate	13.3
tetracycline hcl	2.1.7
TEVETEN HCT	4.5.4.2
theophylline	15.1.2
theophylline anhydrous	15.1.2
thioridazine hcl	5.8
thiothixene	5.8
TIKOSYN	4.7.5
timolol maleate	4.4
timolol maleate	14.5
tinidazole	2.7.5
tizanidine hcl	11.3.1
TOBI	2.8.2
tobramycin sulfate	2.8.2
tobramycin-dexamethasone	14.3
tolterodine tartrate	16.1.1
topiramate	5.4.7
torsemide	4.3.1
TOVIAZ	16.1.1
TRADJENTA	8.1.5.2
tramadol hcl/er	5.1.1
tramadol hcl-acetaminophen	5.1.1
trandolapril	4.5.4.1
TRANSDERM-SCOP	5.6
tranylcypromine sulfate	5.5.2
TRAVATAN Z	14.5
trazodone hcl	5.5.1.4
tretinoin	3
tretinoin	6.3
tretinoin	6.9.2
triamcinolone acetonide	6.1
triamcinolone acetonide	7.3
triamterene-hctz	4.3.3
triamterene-hydrochlorothiazid	4.3.3
triazolam	5.2.2
TRIBENZOR	4.5.6
tri-estarylla	13.7
trifluoperazine hcl	5.8
trifluridine	14.1.2
trihexyphenidyl hcl	5.7.1
tri-linyah	13.7
trilyte with flavor packets	9.6
trimethoprim	2.1.8
trinessa	13.7
tri-previfem	13.7
tri-sprintec	13.7
trivora	13.7
trospium chloride, -er	16.1.1
TRUVADA	2.5.1
TUDORZA PRESSAIR	15.1.3
ULESFIA	6.9.3
ULORIC	11.2
ULTRAVATE PAC	6.1
ULTRESA	9.6
ursodiol	9.6
VAGIFEM	13.4
valacyclovir	2.5.2
valproic acid	5.4.4
valsartan hctz	4.5.4.2
VANCOCIN PULVULE	2.8
vancomycin hcl	2.8
vandazole	13.1.3
VECTICAL	6.8
velivet	13.7
venlafaxine hcl, -er	5.5.1.4
VENTOLIN HFA	15.1.1
VERAMYST	7.2
verapamil/er pm	4.2
VEREGEN	6.9.2
veripred 20 solution	8.3.1
VESICARE	16.1.1
VEXOL	14.2
VICTOZA	8.1.5.1
VICTRELIS	2.5.1
VIGAMOX	14.1.1
VIIBRYD	5.5.1.3
VIMPAT	5.4.7
viorele	13.7
VIRAMUNE	2.5.1
VIRAMUNE XR	2.5.1
VIREAD	2.5.1
vitamin d	12.1.3
VIVELLE-DOT	13.4
VOLTAREN	6.9.5
voriconazole	2.3
VYVANSE	5.9.1
warfarin sodium	12.3.1
WELCHOL	4.8.1
wera	13.7
XARELTO	12.3.3
XERESE	2.6
XIFAXAN	2.8
XOPENEX SOLUTION	15.1.1
zafirlukast	15.1.4
zaleplon	5.2.2
zamicet	5.1.1.2
zarah	13.7
ZENPEP	9.6
ZETIA	4.8.1
ZETONNA	7.2
ZIAGEN	2.5.1
ziprasidone hcl	5.8
zolmitriptan -zmt tab	5.1.2
zolpidem tartrate, -er	5.2.2
ZOMIG NASAL SPRAY	5.1.2
zonisamide	5.4.7
zovia	13.7
ZOVIRAX	2.6
ZUTRIPRO	15.3
ZYCLARA	6.9.2
ZYLET	14.3
ZYVOX	2.8

Pharmacy Network

Participating Chain Provider Listing

SD, ND, IA, MN, Individual & Self-Funded

SANFORD HEALTH PLAN

- A & P
- ACME
- ALBERTSON'S
- AURORA
- B & B
- BAKERS
- BARTELL DRUG
- BEL AIR
- BI-LO
- BI-MART
- BIOSCRIP
- BLOOM
- BROOKSHIRE
- BROOKSHIRE BROTHERS
- BUSCH'S
- CARRS
- CITY MARKET
- COBORNS
- COPPS FOOD CENTER
- COSTCO
- CUB
- CURASCRIPT
- CVS
- D & W
- DIERBERGS
- DILLON
- DISCOUNT DRUG MART
- DOC'S DRUGS
- DOMINICK'S
- DRUG WAREHOUSE
- DRUG WORLD
- DRUGS FOR LESS
- ECKERD DRUGS
- FAIRVIEW
- FAMILY FARE
- FARM FRESH
- FOOD CITY
- FOOD LION
- FOOD MAXX
- FOOD WORLD
- FRED MEYER
- FRED'S
- FRUTH
- FRY'S FOOD AND DRUG
- GERBES
- GIANT EAGLE
- GIANT PHARMACY
- GLEN'S
- HAGGEN FOOD & DRUG
- HANNAFORD
- HARPS
- HARRIS TEETER
- HARVEYS SUPERMARKET
- H-E-B
- HEN HOUSE
- HIGHPOINT
- HOMELAND
- HY-VEE
- INGLES
- KASH N' KARRY
- KERR DRUG
- KING SOOPERS
- KINNEY DRUGS
- KLINGENSMITH'S
- KMART
- KNIGHT DRUGS
- KOPP DRUG
- KROGER
- LONGS DRUG
- MARC'S
- MARSH DRUG STORE
- MARTIN'S
- MED-FAST
- MED-X DRUG
- MEIJER
- NAVARRO DISCOUNT
- NEIGHBORCARE
- NOB HILL
- OMNICARE
- OSCO
- P & C
- PAMIDA
- PATHMARK
- PATIENT FIRST
- PAVILIONS
- PAYLESS
- PHARMACARE
- PHARMACY EXPRESS
- PHARMERICA
- PICK N SAVE
- PINE KNOB
- PRICE CHOPPER
- PUBLIX
- QUICK CHEK
- RAINBOW FOODS
- RALEY'S
- RALPH'S
- RANDALLS
- RECEPT PHARMACY
- REDNER'S
- RITE AID
- SAFEWAY
- SAM'S CLUB
- SAVE MART
- SAVERITE
- SAV-MOR
- SAV-ON
- SCHNUCKS
- SHAW'S
- SHOP 'N SAVE
- SHOPKO
- SHOPPERS
- SHOPRITE
- SMITH'S FOOD AND DRUG
- SNYDER DRUG
- SOUTHERN FAMILY MARKET
- STAR DRUG
- STOP & SHOP
- SUPER 1
- SUPER D DRUGS
- SUPER FERSH
- SWEETBAY SUPERMARKET
- TARGET
- THRIFTY WHITE
- TOM THUMB
- TOP FOOD & DRUG
- TOPS
- UKROP'S
- UNITED
- USA DRUG
- VALLEY DRUG
- VG'S PHARMACY
- VONS
- WALDBAUM'S
- WAL-MART
- WEGMANS
- WEIS
- WHITE DRUG
- WINN-DIXIE

Pharmacy Network

By Pharmacy

SD, ND, IA, MN, Individual & Self-Funded

SANFORD HEALTH PLAN

Iowa Providers

Participating Pharmacies

NUCARA PHARMACY
722 MAIN ST
ACKLEY, IA 50601
(641)366-3440

FAY PHARMACY
400 AUDUBON ST
ADAIR, IA 50002
(641)742-3440

ADEL HEALTHMART
113 N 9TH ST
ADEL, IA 50003
(515)993-3644

SUMPTER PHARMACY
628 NILE KINNICK DR S STE A
ADEL, IA 50003
(515)993-1119

THORSON DRUG
233 REED ST
AKRON, IA 51001
(712)568-2013

HY-VEE PHARMACY
301 HIGHWAY 34 W
ALBIA, IA 52531
(641)932-2188

HY-VEE PHARMACY
1500 HIGHWAY 169 N
ALGONA, IA 50511
(515)295-9238

KMART PHARMACY
1501 HIGHWAY 169 N
ALGONA, IA 50511
(515)295-7704

KRHC FAMILY PHARMACY
1519 S PHILLIPS ST
ALGONA, IA 50511
(515)295-4567

ALLISON PHARMACY
305 N MAIN ST
ALLISON, IA 50602
(319)267-2505

HY-VEE PHARMACY
108 8TH ST SW
ALTOONA, IA 50009
(515)967-3765

MEDICAP PHARMACY
950 28TH AVE SW
ALTOONA, IA 50009
(515)957-0001

STERLING
120 8TH ST SE
ALTOONA, IA 50009
(515)967-4213

TARGET PHARMACY
3414 8TH ST SW
ALTOONA, IA 50009
(515)967-1885

WAL-MART
3501 8TH ST SW
ALTOONA, IA 50009
(515)967-1794

AMANA SOCIETY PHARMACY
507 39TH AVE
AMANA, IA 52203
(319)622-3341

DAHL'S PHARMACY
3121 GRAND AVE
AMES, IA 50010
(515)817-2879

DRUG TOWN CLINIC PHARMACY
1215 DUFF AVE
AMES, IA 50010
(515)232-7315

HY-VEE PHARMACY
3800 W LINCOLN WAY
AMES, IA 50010
(515)292-8375

HY-VEE PHARMACY
500 MAIN ST STE A
AMES, IA 50010
(515)233-9858

HY-VEE PHARMACY
640 LINCOLN WAY
AMES, IA 50010
(515)233-5645

KMART PHARMACY
1405 BUCKEYE AVE
AMES, IA 50010
(515)232-8414

MEDICAP PHARMACY
105 LINCOLN WAY
AMES, IA 50010
(515)232-1653

NUCARA PHARMACY
2709 NORTHRIDGE PKWY
AMES, IA 50010
(641)366-3440

TARGET PHARMACY
320 DUFF AVE
AMES, IA 50010
(515)663-9645

THIELEN STUDENT HLTH CNTR PHMY
2260 THIELEN STUDENT HEALTH
AMES, IA 50011
(515)294-5618

WAL-MART
3015 GRAND AVE
AMES, IA 50010
(515)233-1736

WAL-MART
534 S DUFF AVE
AMES, IA 50010
(515)956-3547

PHARMACY CARE CENTRE
1791 HIGHWAY 64 E
ANAMOSA, IA 52205
(319)462-3306

WAL-MART
101 115TH ST
ANAMOSA, IA 52205
(319)462-4314

ANITA CLINIC PHARMACY
710 MAIN ST
ANITA, IA 50020
(712)762-3945

CVS
104 E 1ST ST
ANKENY, IA 50021
(515)963-7889

DAHL'S PHARMACY
1802 N ANKENY BLVD
ANKENY, IA 50023
(515)278-1657

HY-VEE PHARMACY
410 N ANKENY BLVD
ANKENY, IA 50021
(515)964-9464

HY-VEE PHARMACY
849 S ANKENY BLVD
ANKENY, IA 50021
(515)964-0656

MEDICAP PHARMACY
107 NE DELAWARE AVE STE 6
ANKENY, IA 50021
(515)964-8550

MERCY NORTH PHARMACY
800 E 1ST STE 1800
ANKENY, IA 50021
(515)643-7590

TARGET PHARMACY
2135 SE DELAWARE AVE
ANKENY, IA 50021
(515)964-7000

WAL-MART
1002 SE NATIONAL DR
ANKENY, IA 50021
(515)964-3992

MILLS PHARMACY
120 E MAIN ST
ANTHON, IA 51004
(712)373-5256

ATLANTIC MEDICAL CENTER PHCY
1501 E 10TH ST
ATLANTIC, IA 50022
(712)243-3367

HY-VEE PHARMACY
1630 E 7TH ST
ATLANTIC, IA 50022
(712)243-2240

REX PHARMACY
507 CHESTNUT ST
ATLANTIC, IA 50022
(712)243-2110

WAL-MART
1905 E 7TH ST
ATLANTIC, IA 50022
(712)243-9223

MEDICAP PHARMACY
316 BROADWAY ST
AUDUBON, IA 50025
(712)563-2655

SHOPKO PHARMACY
109 N MARKET ST
AUDUBON, IA 50025
(712)563-3302

CARLEY DRUG
102 N ELM ST
AVOCA, IA 51521
(712)343-6777

BELLE PLAINE PHARMACY
810 12TH ST
BELLE PLAINE, IA 52208
(319)221-1050

CORNERSTONE APOTHECARY
731 12TH ST
BELLE PLAINE, IA 52208
(319)444-2290

BELLEVUE HEALTH MART PHARMACY
115 STATE ST
BELLEVUE, IA 52031
(563)872-4259

AMICARE PHARMACY
3740 UTICA RIDGE RD
BETTENDORF, IA 52722
(563)344-7450

CVS
2002 SPRUCE HILLS DR
BETTENDORF, IA 52722
(563)359-0374

HY-VEE PHARMACY
2900 DEVILS GLEN RD
BETTENDORF, IA 52722
(563)332-2983

MAIN HEALTHCARE PHARMACY
2151 KIMBERLY RD
BETTENDORF, IA 52722
(563)324-5004

SCHNUCKS
858 MIDDLE RD
BETTENDORF, IA 52722
(563)355-7838

HY-VEE PHARMACY
301 W JEFFERSON ST
BLOOMFIELD, IA 52537
(641)664-2975

SHOPKO PHARMACY
106 SMITH ST
BLOOMFIELD, IA 52537
(641)664-2349

CLINIC PHARMACY
1115 S MARSHALL ST
BOONE, IA 50036
(515)432-7123

HY-VEE PHARMACY
1111 8TH ST
BOONE, IA 50036
(515)432-1304

MEDICAL ASSOCIATES PHARMACY
120 S STORY ST
BOONE, IA 50036
(515)432-3460

MEDICAP PHARMACY
403 STORY ST
BOONE, IA 50036
(515)432-2311

WAL-MART
1815 S STORY ST
BOONE, IA 50036
(515)432-3484

ELIZABETH'S PHARMACY ON MAIN
52 MAIN AVE N
BRITT, IA 50423
(641)843-3885

BROOKLYN PHARMACY
101 E FRONT ST
BROOKLYN, IA 52211
(641)522-7813

HY-VEE PHARMACY
939 ANGULAR ST
BURLINGTON, IA 52601
(319)753-0112

HY-VEE PHARMACY
3140 AGENCY ST
BURLINGTON, IA 52601
(319)752-2773

SHOPKO PHARMACY
313 N ROOSEVELT AVE
BURLINGTON, IA 52601
(319)758-9526

MEDICAP PHARMACY
800 SCHOOL ST
CARLISLE, IA 50047
(515)989-3261

CARROLL HEALTH MART APOTHECARY
425 W HIGHWAY 30 ST STE 140
CARROLL, IA 51401
(712)792-2671

CLINIC PHARMACY OF CARROLL
405 S CLARK ST STE 102
CARROLL, IA 51401
(712)792-5393

CUSTOM CARE CMPDING PHCY
425 W US HIGHWAY 30 STE 140
CARROLL, IA 51401
(712)792-2671

HY-VEE PHARMACY
905 W US HIGHWAY 30
CARROLL, IA 51401
(712)792-9093

KMART PHARMACY
715 W US HIGHWAY 30
CARROLL, IA 51401
(712)792-5835

LINCOLN HIGHWAY PHARMACY
859 E US HIGHWAY 30
CARROLL, IA 51401
(712)792-2402

Iowa Providers

Participating Pharmacies

NUCARA PHARMACY
1214 S GRANT RD
CARROLL, IA 51401
(641)366-3440

WAL-MART
2014 KITTTYHAWK RD
CARROLL, IA 51401
(712)792-3033

MERCY FAMILY PHARMACY
805 JOHNSON ST SW
CASCADE, IA 52033
(563)852-7757

CVS
2302 W 1ST ST
CEDAR FALLS, IA 50613
(319)277-5181

HY-VEE PHARMACY
6301 UNIVERSITY AVE
CEDAR FALLS, IA 50613
(319)266-9874

MEDICAP PHARMACY
103 E 18TH ST
CEDAR FALLS, IA 50613
(319)277-1829

TARGET PHARMACY
214 VIKING PLAZA DR
CEDAR FALLS, IA 50613
(319)553-1121

UNIV OF NORTHERN IOWA PHARMACY
101 STUDENT HEALTH CTR
CEDAR FALLS, IA 50614
(319)273-2154

WAL-MART
525 BRANDILYNN BLVD
CEDAR FALLS, IA 50613
(319)277-7793

A AVENUE PHARMACY
717 A AVE NE STE 202
CEDAR RAPIDS, IA 52401
(319)364-1586

APPLE PHARMACY
9255 ATLANTIC DR SW
CEDAR RAPIDS, IA 52404
(319)396-1386

CAREPLUS CVS
5070 ROCKWELL DR NE
CEDAR RAPIDS, IA 52402
(319)377-5497

CAREPRO AT THE PAVILION
202 10TH ST SE STE 115
CEDAR RAPIDS, IA 52403
(319)364-2406

CLARK'S PHARMACY
1946 42ND ST NE
CEDAR RAPIDS, IA 52402
(319)393-3210

CVS
4116 CENTER POINT RD NE
CEDAR RAPIDS, IA 52402
(319)393-7480

CVS
3419 6TH AVE SW
CEDAR RAPIDS, IA 52404
(319)396-3262

CVS
2711 MOUNT VERNON RD SE
CEDAR RAPIDS, IA 52403
(319)364-3051

DOWNTOWN DRUG
207 2ND AVE SE
CEDAR RAPIDS, IA 52401
(319)221-1050

HALL PERRINE CANCER CTR PHCY
701 10TH ST SE
CEDAR RAPIDS, IA 52403
(319)398-6343

HY-VEE PHARMACY
1520 6TH ST SW
CEDAR RAPIDS, IA 52404
(319)363-0219

HY-VEE PHARMACY
505 BOYSON RD NE
CEDAR RAPIDS, IA 52402
(319)294-8095

HY-VEE PHARMACY
2405 MOUNT VERNON AVE SE
CEDAR RAPIDS, IA 52402
(319)365-7579

HY-VEE PHARMACY
3235 OAKLAND RD NE
CEDAR RAPIDS, IA 52402
(319)363-3587

HY-VEE PHARMACY
20 WILSON AVE SW
CEDAR RAPIDS, IA 52404
(319)362-3649

HY-VEE PHARMACY
5050 EDGEWOOD RD
CEDAR RAPIDS, IA 52411
(319)294-9193

HY-VEE PHARMACY
1843 JOHNSON AVE NW
CEDAR RAPIDS, IA 52405
(319)365-5343

HY-VEE PHARMACY
279 COLLINS RD NE
CEDAR RAPIDS, IA 52402
(319)393-4480

HY-VEE PHARMACY
4035 MT VERNON RD SE
CEDAR RAPIDS, IA 52403
(319)362-7900

HY-VEE PHARMACY
4825 JOHNSON AVE NW
CEDAR RAPIDS, IA 52405
(319)396-7419

HY-VEE PHARMACY
2001 BLAIRS FERRY RD NE
CEDAR RAPIDS, IA 52402
(319)393-0561

HY-VEE PHARMACY
1556 1ST AVE NE
CEDAR RAPIDS, IA 52402
(319)366-2239

KMART PHARMACY
180 COLLINS RD NE
CEDAR RAPIDS, IA 52402
(319)377-3338

MEDICAL PHARMACY
1030 5TH AVE SE STE 1800
CEDAR RAPIDS, IA 52403
(319)362-8976

MEDICAP PHARMACY
2030 6TH ST SW
CEDAR RAPIDS, IA 52404
(319)364-6930

MERCY MEDICAL CENTER
701 10TH ST SE
CEDAR RAPIDS, IA 52403
(319)398-6063

PHARMACY CARE ASSOCIATES
5801 16TH AVE SW
CEDAR RAPIDS, IA 52404
(319)390-6348

PHYSICIANS CLINIC OF IOWA PC
202 10TH ST SE
CEDAR RAPIDS, IA 52403
(319)297-2900

PLAZA FAMILY PHARMACY
5264 COUNCIL ST NE
CEDAR RAPIDS, IA 52402
(319)221-8861

REUTZEL PHARMACY
617 8TH AVE SE
CEDAR RAPIDS, IA 52403
(319)364-4181

SAM'S CLUB
2605 BLAIRS FERRY RD NE
CEDAR RAPIDS, IA 52402
(319)294-9461

TARGET PHARMACY
3400 EDGEWOOD RD SW
CEDAR RAPIDS, IA 52404
(319)396-4777

TARGET PHARMACY
1030 BLAIRS FERRY RD NE
CEDAR RAPIDS, IA 52402
(319)393-4348

THE GHOSH CENTER
1951 51ST ST NE
CEDAR RAPIDS, IA 52402
(319)294-1899

UNITY POINT HEALTH
1026 A AVE NE
CEDAR RAPIDS, IA 52402
(319)369-7528

WAL-MART
2645 BLAIRS FERRY RD NE
CEDAR RAPIDS, IA 52402
(319)393-2110

WAL-MART
3601 29TH AVE SW
CEDAR RAPIDS, IA 52404
(319)390-9925

CENTER POINT FAM PHARMACY
900 BANK CT
CENTER POINT, IA 52213
(319)849-2799

HY-VEE PHARMACY
609 N 18TH ST
CENTERVILLE, IA 52544
(641)856-3832

OWL PHARMACY
213 N 13TH ST
CENTERVILLE, IA 52544
(641)437-7200

WAL-MART
23145 HIGHWAY 5
CENTERVILLE, IA 52544
(641)437-7185

CENTRAL CITY FAMILY PHARMACY
402 MAIN ST
CENTRAL CITY, IA 52214
(319)438-1988

HY-VEE PHARMACY
2001 COURT AVE
CHARITON, IA 50049
(641)774-2111

SHOPKO PHARMACY
1901 COURT AVE
CHARITON, IA 50049
(641)774-5505

HY-VEE PHARMACY
901 KELLY ST
CHARLES CITY, IA 50616
(641)228-1222

KMART PHARMACY
1405 S GRAND AVE
CHARLES CITY, IA 50616
(641)228-7940

CHEROKEE MAIN STREET PHARMACY
206 W MAIN ST
CHEROKEE, IA 51012
(712)225-2320

HY-VEE
800 N 2ND ST
CHEROKEE, IA 51012
(712)225-6121

HY-VEE PHARMACY
1200 S 16TH ST
CLARINDA, IA 51632
(712)542-6546

TAYLOR PHARMACY
122 N 16TH ST # 124
CLARINDA, IA 51632
(712)542-3522

COMMUNITY PHARMACY
215 13TH AVE SW
CLARION, IA 50525
(515)532-2801

THRIFTY WHITE PHARMACY
210 N MAIN ST
CLARION, IA 50525
(515)532-6626

CLARKSVILLE PHARMACY
111 S MAIN ST
CLARKSVILLE, IA 50619
(319)278-4476

CLEAR LAKE LTC PHARMACY
560 US HIGHWAY 18 E STE B
CLEAR LAKE, IA 50428
(641)357-1522

CLEAR LAKE PHARMACY
560 US HIGHWAY 18 E
CLEAR LAKE, IA 50428
(641)357-1522

ECONOFOODS PHARMACY
20 S 4TH ST
CLEAR LAKE, IA 50428
(641)357-2169

THRIFTY WHITE DRUG
2 N 4TH ST
CLEAR LAKE, IA 50428
(641)357-5271

HY-VEE PHARMACY
901 S 4TH ST
CLINTON, IA 52733
(563)243-6063

MERCY HOSPITAL PHARMACY
1410 N 4TH ST
CLINTON, IA 52732
(563)244-5545

OSCO DRUG
1309 N 2ND ST
CLINTON, IA 52732
(563)243-6641

WAGNER CLINIC PHARMACY
915 13TH AVE N
CLINTON, IA 52732
(563)242-5944

WAGNER PHARMACY
200 5TH AVE S
CLINTON, IA 52732
(563)242-0626

WAGNER PHARMACY AND WELLNESS
1726 N 2ND ST
CLINTON, IA 52732
(563)519-2000

WAL-MART
2715 S 25TH ST
CLINTON, IA 52732
(563)243-0600

WRIGHTWAY LTC PHARMACY
200 5TH AVE S
CLINTON, IA 52732
(563)242-9376

DAHLS PHARMACY
15500 HICKMAN RD
CLIVE, IA 50325
(515)987-0377

DAHL'S PHARMACY
8700 HICKMAN RD
CLIVE, IA 50325
(515)276-8784

KMART PHARMACY
10331 UNIVERSITY AVE
CLIVE, IA 50325
(515)225-2694

MERCY WEST PHARMACY
1601 NW 114TH ST STE 234
CLIVE, IA 50325
(515)222-7979

WEIRICK PHARMACY
101 N WALNUT ST
COLFAX, IA 50054
(515)674-3503

HY-VEE DRUGSTORE CLINIC
111 E WALNUT ST
COLUMBUS JUNCTION, IA 52738
(319)728-3144

NUCARA PHARMACY
110 CENTER ST
CONRAD, IA 50621
(641)366-3440

COON RAPIDS PHARMACY
515 MAIN ST
COON RAPIDS, IA 50058
(712)999-7979

Iowa Providers

Participating Pharmacies

COSTCO
2900 HEARTLAND DR
CORALVILLE, IA 52241
(319)545-3201

HY-VEE PHARMACY
HWY 6 W 2000 8TH ST
CORALVILLE, IA 52241
(319)351-3880

IOWA RIVER LANDING PHARMACY
105 E 9TH ST STE A
CORALVILLE, IA 52241
(319)467-2050

NUCARA PHARMACY
1150 5TH ST STE 142
CORALVILLE, IA 52241
(641)366-3440

TARGET PHARMACY
1441 CORAL RIDGE AVE
CORALVILLE, IA 52241
(319)248-1080

WAL-MART
2801 COMMERCE DR
CORALVILLE, IA 52241
(319)545-6412

HY-VEE PHARMACY
625 DAVIS AVE
CORNING, IA 50841
(641)322-3454

NESSEN PHARMACY
104 S FRANKLIN ST
CORYDON, IA 50060
(641)872-2512

ALL CARE HEALTH CENTER PHCY
902 S 6TH ST
COUNCIL BLUFFS, IA 51501
(712)256-6583

CVS
545 W WASHINGTON ST
COUNCIL BLUFFS, IA 51503
(712)352-4152

HY-VEE PHARMACY
2323 W BROADWAY
COUNCIL BLUFFS, IA 51501
(712)322-3111

HY-VEE PHARMACY
757 W BROADWAY
COUNCIL BLUFFS, IA 51501
(712)328-3277

HY-VEE PHARMACY
1745 MADISON AVE
COUNCIL BLUFFS, IA 51501
(712)322-9222

KMART PHARMACY
2803 E KANESVILLE BLVD
COUNCIL BLUFFS, IA 51503
(712)325-0987

MEDICAP PHARMACY
2201 W BROADWAY STE 8
COUNCIL BLUFFS, IA 51501
(712)325-8676

OARD AND ROSS DRUG
701 16TH AVE
COUNCIL BLUFFS, IA 51501
(712)322-2501

SAM'S CLUB
3221 MANAWA CENTRE DR
COUNCIL BLUFFS, IA 51501
(712)366-7032

SHOPKO PHARMACY
3271 MARKETPLACE DR
COUNCIL BLUFFS, IA 51501
(712)366-0377

SUPER SAVER PHARMACY
1141 N BROADWAY
COUNCIL BLUFFS, IA 51503
(712)322-9019

TARGET PHARMACY
3804 METRO DR
COUNCIL BLUFFS, IA 51501
(712)309-3381

UNION PHARMACY
235 W BROADWAY
COUNCIL BLUFFS, IA 51503
(712)328-3344

WAL-MART
3200 MANAWA CENTRE DR
COUNCIL BLUFFS, IA 51501
(712)366-1315

HOINES PHARMACIES
113 N ELM ST
CRESCO, IA 52136
(563)547-3401

MEDICAP PHARMACY
303 2ND AVE SW
CRESCO, IA 52136
(563)547-5111

HY-VEE PHARMACY
600 SHELDON ST
CRESTON, IA 50801
(641)782-8417

MEDICAP PHARMACY
405 S SUMNER AVE
CRESTON, IA 50801
(641)782-6558

WAL-MART
806 LAUREL ST
CRESTON, IA 50801
(641)782-6951

MEDICAP PHARMACY
504 14TH ST
DALLAS CENTER, IA 50063
(515)992-3784

CVS
1655 W KIMBERLY RD
DAVENPORT, IA 52806
(563)388-7856

CVS
1777 DIVISION ST
DAVENPORT, IA 52804
(563)323-1074

FIRST MED PHARMACY
1227 E RUSHOLME ST
DAVENPORT, IA 52803
(563)421-6366

FIRST MED PHARMACY
1803 E KIMBERLY RD STE A
DAVENPORT, IA 52807
(563)421-3308

HY-VEE PHARMACY
1823 E KIMBERLY RD
DAVENPORT, IA 52807
(563)359-5313

HY-VEE PHARMACY
3019 ROCKINGHAM RD
DAVENPORT, IA 52802
(563)322-7573

HY-VEE PHARMACY
2351 W LOCUST ST
DAVENPORT, IA 52804
(563)324-3900

HY-VEE PHARMACY
2200 W KIMBERLY RD
DAVENPORT, IA 52806
(563)391-1543

HY-VEE PHARMACY
4064 E 53RD ST
DAVENPORT, IA 52807
(563)359-3120

IOWA CANCER SPECIALISTS
1351 W CENTRAL PARK AVE
DAVENPORT, IA 52804
(563)421-1960

KMART PHARMACY
3808 BRADY ST
DAVENPORT, IA 52806
(563)391-8587

MAIN AT LOCUST PHARMACY
129 W LOCUST ST
DAVENPORT, IA 52803
(563)324-1641

OMNICARE PHARMACY
2660 E 53RD ST STE 1
DAVENPORT, IA 52807
(563)388-1887

SAM'S CLUB
3887 ELMORE AVE
DAVENPORT, IA 52807
(563)344-4232

TARGET PHARMACY
5255 ELMORE AVE
DAVENPORT, IA 52807
(563)344-9629

WAL-MART
5811 ELMORE AVE
DAVENPORT, IA 52807
(563)359-4874

WAL-MART
3101 W KIMBERLY RD
DAVENPORT, IA 52806
(563)445-1098

FAMILY PHARMACY
21 S MAIN ST
DAYTON, IA 50530
(515)547-2384

HY-VEE PHARMACY
204 N 3RD ST
DECATUR, IA 50144
(641)446-4136

DONLON PHARMACY
201 W WATER ST
DECORAH, IA 52101
(563)382-3929

THRIFTY WHITE PHARMACY
702 MONTGOMERY ST
DECORAH, IA 52101
(563)382-8765

WAL-MART
1798 OLD STAGE RD
DECORAH, IA 52101
(563)382-8456

HY-VEE PHARMACY
1426 BROADWAY
DENISON, IA 51442
(712)263-6161

THRIFTY WHITE DRUG
1320 BROADWAY
DENISON, IA 51442
(712)263-4646

WAL-MART
510 AVENUE C
DENISON, IA 51442
(712)263-2012

DENVER DRUG
340 S STATE ST
DENVER, IA 50622
(319)984-5691

BAUDER PHARMACY
3802 INGERSOLL AVE
DES MOINES, IA 50312
(515)255-1124

BROADLAWS MEDICAL CTR OP PHCY
1801 HICKMAN RD
DES MOINES, IA 50314
(515)282-6149

CARECENTER PHARMACY
711 HIGH ST BLDG 1 3RD FL
DES MOINES, IA 50309
(515)244-8100

CASSADY PHARMACY
4505 SW 9TH ST
DES MOINES, IA 50315
(515)285-2474

CVS
215 EUCLID AVE
DES MOINES, IA 50313
(512)282-8454

CVS
3151 SE 14TH ST
DES MOINES, IA 50320
(515)288-1316

DAHL'S PHARMACY
4121 FLEUR DR
DES MOINES, IA 50321
(515)278-1657

DAHL'S PHARMACY
3425 INGERSOLL AVE
DES MOINES, IA 50312
(515)255-8642

DAHL'S PHARMACY
3400 E 33RD ST
DES MOINES, IA 50317
(515)262-7942

DAHL'S PHARMACY
4343 MERLE HAY RD
DES MOINES, IA 50310
(515)276-4845

DAHL'S PHARMACY
1819 BEAVER AVE
DES MOINES, IA 50310
(515)278-1657

DAHL'S PHARMACY
1320 E EUCLID AVE
DES MOINES, IA 50316
(515)278-1657

FIFIELD PHARMACY
501 UNIVERSITY AVE
DES MOINES, IA 50314
(515)244-3221

HAMMER PHARMACY
600 E GRAND AVE
DES MOINES, IA 50309
(515)243-4177

HY-VEE PHARMACY
3330 MARTIN LUTHER KING PKWY
DES MOINES, IA 50310
(515)255-6213

HY-VEE PHARMACY
4100 UNIVERSITY AVE
DES MOINES, IA 50311
(515)633-8606

HY-VEE PHARMACY
1107 SE ARMY POST RD
DES MOINES, IA 50315
(515)287-1022

HY-VEE PHARMACY
2540 E ECULID AVE
DES MOINES, IA 50317
(515)262-2108

HY-VEE PHARMACY
3221 SE 14TH ST
DES MOINES, IA 50320
(515)246-1390

HY-VEE PHARMACY
4605 FLEUR DR
DES MOINES, IA 50321
(515)285-7133

KMART PHARMACY
2535 HUBBELL AVE
DES MOINES, IA 50317
(515)262-9578

MEDICAP PHARMACY
2527 EASTON BLVD
DES MOINES, IA 50317
(515)266-2694

MEDICAP PHARMACY
5802 FRANKLIN AVE
DES MOINES, IA 50322
(515)274-4609

MEDICAP PHARMACY
2804 BEAVER AVE
DES MOINES, IA 50310
(515)277-3702

MEDICAP PHARMACY
1300 E 14TH ST
DES MOINES, IA 50316
(515)263-1782

MERCY OUTPATIENT PHARMACY
1111 6TH AVE
DES MOINES, IA 50314
(515)643-4429

MERCY SPECIALTY CARE PHCY
1750 48TH ST STE 4
DES MOINES, IA 50310
(515)271-6466

METHODIST PLAZA PHARMACY
1212 PLEASANT ST STE 105
DES MOINES, IA 50309
(515)244-8855

PLANNED PARENTHOOD HEARTLAND
1171 7TH ST
DES MOINES, IA 50314
(515)280-7000

RELIANT LTC
3520 GRAND AVE
DES MOINES, IA 50312
(515)279-2062

Iowa Providers

Participating Pharmacies

RICHARDS PHARMACY
5625 HICKMAN RD
DES MOINES, IA 50310
(515)274-4001

SAM'S CLUB
1101 73RD ST
DES MOINES, IA 50324
(515)274-9676

TARGET PHARMACY
5901 DOUGLAS AVE
DES MOINES, IA 50322
(515)331-0599

WAL-MART
1001 73RD ST
DES MOINES, IA 50324
(515)274-6359

WAL-MART
5101 SE 14TH ST
DES MOINES, IA 50320
(515)287-7748

WARD EAST SIDE PHARMACY
2501 E WALNUT ST
DES MOINES, IA 50317
(515)262-5615

SCOTT DRUG CLINIC PHARMACY
1021 11TH ST
DEWITT, IA 52742
(563)659-5042

SCOTT DRUG UNIT DOSE PHARMACY
609 7TH ST
DEWITT, IA 52742
(563)659-5041

SCOTT'S THRIFTY WHITE DRUG
629 6TH AVE
DEWITT, IA 52742
(563)659-5042

HARTIG DRUG
2255 JOHN F KENNEDY RD
DUBUQUE, IA 52002
(563)588-8703

HARTIG DRUG
157 LOCUST ST
DUBUQUE, IA 52001
(563)588-8702

HARTIG DRUG
2225 CENTRAL AVE
DUBUQUE, IA 52001
(563)588-8704

HARTIG DRUG
1600 UNIVERSITY AVE
DUBUQUE, IA 52001
(563)588-8708

HY-VEE PHARMACY
400 S LOCUST ST
DUBUQUE, IA 52003
(563)582-1143

HY-VEE PHARMACY
2395 NW ARTERIAL
DUBUQUE, IA 52002
(563)582-3436

HY-VEE PHARMACY
3500 DODGE ST
DUBUQUE, IA 52003
(563)583-3858

KMART PHARMACY
2600 DODGE ST
DUBUQUE, IA 52003
(563)588-9097

MERCY FAMILY PHARMACY
1920 ELM ST
DUBUQUE, IA 52001
(563)583-7379

MERCY FAMILY PHARMACY
1500 ASSOCIATES DR
DUBUQUE, IA 52002
(563)584-4405

MERCY FAMILY PHARMACY
250 MERCY DR
DUBUQUE, IA 52001
(563)589-9370

MERCY FAMILY PHARMACY
1000 LANGWORTHY ST
DUBUQUE, IA 52001
(563)584-3405

SAM'S CLUB
4400 ASBURY RD
DUBUQUE, IA 52002
(563)587-0586

SHOPKO PHARMACY
255 JOHN F KENNEDY RD
DUBUQUE, IA 52002
(563)583-5808

TARGET PHARMACY
3500 DODGE ST
DUBUQUE, IA 52003
(563)557-9800

UNION FAMILY PHARMACY
2541 CENTRAL AVE
DUBUQUE, IA 52001
(563)556-1493

WAL-MART
4200 DODGE ST
DUBUQUE, IA 52003
(563)582-1519

DUNLAP FAMILY PHARMACY
612 IOWA AVE
DUNLAP, IA 51529
(712)643-5162

WESTFAIR DRUG
621 5TH ST
DURANT, IA 52747
(563)785-4930

HARTIG DRUG
711 16TH AVE SE
DYERSVILLE, IA 52040
(563)875-2722

MERCY FAMILY PHARMACY
1111 3RD ST SW
DYERSVILLE, IA 52040
(563)875-2947

THE PRESCRIPTION SHOPPE
212 4TH ST SE
DYERSVILLE, IA 52040
(563)875-7455

EAGLE PHARMACY
311 W BROADWAY ST
EAGLE GROVE, IA 50533
(515)448-3814

MONTROSS PHARMACY
105 S CHESTNUT AVE
EARLHAM, IA 50072
(515)758-2174

PEXTON PHARMACY OF EARLING
100 INDUSTRIAL DR STE 102
EARLING, IA 51530
(712)755-2101

ELDORA VALU-RITE PHARMACY
1274 EDGINGTON AVE
ELDORA, IA 50627
(641)939-3091

MEDICAP PHARMACY
1602 EDGINGTON AVE
ELDORA, IA 50627
(641)858-3567

NORTH SCOTT PHARMACY
225 E LE CLAIRE RD
ELDRIDGE, IA 52748
(563)285-2001

ELK HORN PHARMACY
4022 MAIN ST
ELK HORN, IA 51531
(712)764-2334

MOSER FAMILY PHARMACY
135 N MAIN ST
ELKADER, IA 52043
(563)245-2530

HUGHES PHARMACY
2216 MAIN ST
EMMETSBURG, IA 50536
(712)852-2886

MANSMITH PHARMACY
3204 1ST ST
EMMETSBURG, IA 50536
(712)852-2727

ESTHERVILLE DRUG
522 CENTRAL AVE
ESTHERVILLE, IA 51334
(712)362-3154

HY-VEE PHARMACY
1221 CENTRAL AVE
ESTHERVILLE, IA 51334
(712)362-5551

EVANSDALE PHARMACY
3506 LAFAYETTE RD
EVANSDALE, IA 50707
(319)233-3395

HY-VEE PHARMACY
1300 W BURLINGTON AVE
FAIRFIELD, IA 52556
(641)472-3542

NUCARA PHARMACY
2000D S MAIN ST
FAIRFIELD, IA 52556
(641)469-3001

WAL-MART
2107 W BURLINGTON AVE
FAIRFIELD, IA 52556
(641)472-6199

SCOTT PHARMACY
238 S MAIN ST
FAYETTE, IA 52142
(563)425-4530

FONTANELLE DRUG
401 WASHINGTON ST
FONTANELLE, IA 50846
(641)745-3221

MILLER PHARMACY
635 E US HIGHWAY 9
FOREST CITY, IA 50436
(641)585-3931

SHOPKO PHARMACY
619 E US HIGHWAY 9
FOREST CITY, IA 50436
(641)582-2780

CVS
2029 5TH AVE N
FORT DODGE, IA 50501
(515)955-6453

DANIEL PHARMACY
1114 CENTRAL AVE
FORT DODGE, IA 50501
(515)573-3431

DISCO DRUG
1428 2ND AVE N
FORT DODGE, IA 50501
(515)955-5430

FRIENDSHIP HAVEN PHARMACY
420 KENYON RD
FORT DODGE, IA 50501
(515)573-6015

HY-VEE PHARMACY
115 S 29TH ST
FORT DODGE, IA 50501
(515)576-5320

HY-VEE PHARMACY
214 S 25TH ST
FORT DODGE, IA 50501
(515)576-3652

TARGET PHARMACY
2910 1ST AVE S
FORT DODGE, IA 50501
(515)573-7202

TRINITY REGIONAL MEDICAL CTR
802 KENYON RD
FORT DODGE, IA 50501
(952)653-2568

WAL-MART
3036 1ST AVE S
FORT DODGE, IA 50501
(515)576-7405

HY-VEE PHARMACY
2606 AVENUE L
FORT MADISON, IA 52627
(319)372-9396

RASHID LTC PHARMACY
2402 AVENUE L
FORT MADISON, IA 52627
(319)372-2300

RASHID PHARMACY
2404 AVENUE L
FORT MADISON, IA 52627
(319)372-2300

SHOPKO PHARMACY
4810 AVENUE O
FORT MADISON, IA 52627
(319)372-8629

TAMMY'S PHARMACY
930 W US HIGHWAY 18
GARNER, IA 50438
(641)923-2649

HY-VEE PHARMACY
409 S LOCUST ST
GLEENWOOD, IA 51534
(712)527-4006

MEDICAP PHARMACY
1206 S LOCUST ST
GLENWOOD, IA 51534
(712)527-1200

RUFFNER PHARMACY
409 S LOCUST ST
GLENWOOD, IA 51534
(712)527-4006

SHOPKO PHARMACY
902 S LOCUST ST
GLENWOOD, IA 51534
(712)527-9200

COMMUNITY PHARMACY
1800 MAIN ST
GOWRIE, IA 50543
(515)352-3876

GREENE PHARMACY
106 E TRAER ST
GREENE, IA 50636
(641)823-4210

SHOPKO PHARMACY
202 SW KENT ST
GREENFIELD, IA 50849
(641)743-2201

DRUG TOWN CLINIC PHARMACY
1541 S 3RD ST STE 100
GRIMES, IA 50111
(515)986-4527

MEDICAP PHARMACY
250 SE GATEWAY DR
GRIMES, IA 50111
(515)986-0101

WAL-MART
2150 E 1ST ST
GRIMES, IA 50111
(515)986-3657

HY-VEE PHARMACY
320 WEST ST S
GRINNELL, IA 50112
(641)236-4287

MEDICAP PHARMACY
320 6TH AVE
GRINNELL, IA 50112
(641)236-3663

WAL-MART
415 INDUSTRIAL AVE
GRINNELL, IA 50112
(641)236-6333

ENGLAND MEDICAL CLINIC
506 MAIN ST
GRISWOLD, IA 51535
(712)778-2395

MANLY DRUG STORE
621 G AVE
GRUNDY CENTER, IA 50638
(319)824-5446

DOWD DRUG
307 STATE ST
GUTHRIE CENTER, IA 50115
(641)747-8317

GUTTENBERG HEALTH MART PHCY
807 S HIGHWAY 52
GUTTENBERG, IA 52052
(563)252-1172

STONER DRUG
1105 MAIN ST
HAMBURG, IA 51640
(712)382-2551

KOERNER WHIPPLE PHARMACY
104 1ST ST NW
HAMPTON, IA 50441
(641)456-2510

Iowa Providers

Participating Pharmacies

MEDICAL CENTER PHARMACY
1720 CENTRAL AVE E
HAMPTON, IA 50441
(641)456-4146

RICK'S PHARMACY
6 1ST ST NW
HAMPTON, IA 50441
(641)456-3538

HY-VEE PHARMACY
2003 CHATBURN AVE
HARLAN, IA 51537
(712)755-2525

KWIK-RX PHARMACY
2308 12TH ST
HARLAN, IA 51537
(712)755-3823

PEXTON PHARMACY
1812 CHATBURN PLZ
HARLAN, IA 51537
(712)755-2101

SHOPKO PHARMACY
2099 CHATBURN AVE
HARLAN, IA 51537
(712)755-1112

HARTLEY HOMETOWN PHARMACY
177 S CENTRAL AVE
HARTLEY, IA 51346
(712)928-7070

MED-EQUIP PHARMACY
141 S CENTRAL AVE
HARTLEY, IA 51346
(712)728-2165

BOOTH PHARMACY
903 CENTRAL AVE
HAWARDEN, IA 51023
(712)551-2374

BLAIRS FERRY FAMILY PHARMACY
1790 BLAIRS FERRY RD
HIAWATHA, IA 52233
(319)393-4944

MAIN STREET PHARMACY
103 N MAIN ST
HOLSTEIN, IA 51025
(712)368-4549

HUDSON PHARMACY
101 EDDYSTONE DR
HUDSON, IA 50643
(319)988-3800

HULL PHARMACY
1044 MAIN ST
HULL, IA 51239
(712)439-1611

HY-VEE PHARMACY
611 10TH AVE N
HUMBOLDT, IA 50548
(515)332-5082

LARRY'S PHARMACY
1310 10TH AVE N
HUMBOLDT, IA 50548
(515)332-1627

HY-VEE PHARMACY
303 S US HIGHWAY 69
HUXLEY, IA 50124
(515)597-4100

IDA DRUG
506 2ND ST
IDA GROVE, IA 51445
(712)364-0000

IDA GROVE PHARMACY
506 2ND ST
IDA GROVE, IA 51445
(712)364-2756

LEWIS FAMILY DRUG
703 W HIGHWAY 175
IDA GROVE, IA 51445
(712)364-2120

HARTIG DRUG
200 1ST ST E
INDEPENDENCE, IA 50644
(319)334-7155

RYAN PHARMACY
1100 1ST ST E
INDEPENDENCE, IA 50644
(319)334-7171

WAL-MART
302 ENTERPRISE DR
INDEPENDENCE, IA 50644
(319)334-7131

HY-VEE PHARMACY
910 N JEFFERSON WAY
INDIANOLA, IA 50125
(515)962-9444

MEDICAP PHARMACY
208 E EUCLID AVE
INDIANOLA, IA 50125
(515)961-5303

MEDICAP PHARMACY
404 E EUCLID AVE
INDIANOLA, IA 50125
(515)962-9399

WAL-MART
1500 N JEFFERSON WAY
INDIANOLA, IA 50125
(515)961-8960

AMBULATORY CARE PHARMACY
200 HAWKINS DR
IOWA CITY, IA 52242
(319)384-9637

CVS
201 S CLINTON ST
IOWA CITY, IA 52240
(319)358-6462

CVS
2425 MUSCATINE AVE
IOWA CITY, IA 52240
(319)358-1056

HARTIG DRUG
701 MORMON TREK BLVD
IOWA CITY, IA 52246
(319)338-5778

HY-VEE PHARMACY
310 N 1ST AVE
IOWA CITY, IA 52240
(319)351-2921

HY-VEE PHARMACY
812 S 1ST AVE
IOWA CITY, IA 52245
(319)337-4279

HY-VEE PHARMACY
1720 WATERFRONT DR
IOWA CITY, IA 52240
(319)354-7121

HY-VEE PHARMACY
1201 N DODGE ST
IOWA CITY, IA 52245
(319)337-6310

IA CITY AMBULATORY SURGERY CTR
2963 NORTHGATE DR
IOWA CITY, IA 52245
(952)653-2568

KMART PHARMACY
901 HOLLYWOOD BLVD
IOWA CITY, IA 52240
(319)351-1768

MEDICAL PLAZA PHARMACY
540 E JEFFERSON ST STE 104
IOWA CITY, IA 52245
(319)337-3966

PHARMACY MATTERS LTC
3526 DOLPHIN DR SE
IOWA CITY, IA 52240
(319)337-8649

TOWNCREST PHARMACY
2306 MUSCATINE AVE
IOWA CITY, IA 52240
(319)337-3526

WAL-MART
1001 HIGHWAY 1 W
IOWA CITY, IA 52246
(319)337-8862

WESTLAWN PHARMACY
4189 WESTLAWN S
IOWA CITY, IA 52242
(319)335-9200

CORNER PHARMACY
504 ROCKSYLVANIA AVE
IOWA FALLS, IA 50126
(641)648-5550

HY-VEE PHARMACY
632 S OAK ST
IOWA FALLS, IA 50126
(641)648-4255

MEDICAP PHARMACY
516 S OAK ST
IOWA FALLS, IA 50126
(641)648-4263

RIEBER CLINIC PHARMACY
520 TALBOTT ST STE 2
IOWA FALLS, IA 50126
(641)648-3733

WAL-MART
840 S OAK ST
IOWA FALLS, IA 50126
(641)648-5109

HY-VEE PHARMACY
100 N WILSON AVE
JEFFERSON, IA 50129
(515)386-4152

MEDICAP PHARMACY
400 N ELM ST
JEFFERSON, IA 50129
(515)386-2164

JESUP PHARMACY
1094 220TH ST
JESUP, IA 50648
(319)827-6889

FAMILY PHARMACY
633 MAIN ST
JEWELL, IA 50130
(515)827-5134

DAHL'S PHARMACY
5440 NW 86TH ST
JOHNSTON, IA 50131
(515)278-1657

HY VEE PHARMACY
5750 MERLE HAY RD
JOHNSTON, IA 50131
(515)270-9212

SUN DRUG-VILLAGE SQUARE
6105 MERLE HAY RD
JOHNSTON, IA 50131
(515)278-5503

MILLERS MEDICINE CABINET
214 5TH ST
KALONA, IA 52247
(319)656-3134

HY-VEE PHARMACY
3111 MAIN ST
KEOKUK, IA 52632
(319)524-9535

KAME PHARMACY
420 N 17TH ST
KEOKUK, IA 52632
(319)524-8144

KEASLING'S PHARMACY
1414 MAIN ST
KEOKUK, IA 52632
(319)524-5435

WAL-MART
300 N PARK DR
KEOKUK, IA 52632
(319)524-4071

LEE PHARMACY
601 1ST ST
KEOSAUQUA, IA 52565
(319)293-3128

HY-VEE PHARMACY
809 W ROCK ISLAND ST
KNOXVILLE, IA 50138
(641)842-2512

KNOXVILLE AREA COMM HOSPITAL
1002 S LINCOLN ST
KNOXVILLE, IA 50138
(641)842-2151

MEDICAP PHARMACY
901 W PLEASANT ST
KNOXVILLE, IA 50138
(641)828-7312

WAL-MART
814 W BELL AVE
KNOXVILLE, IA 50138
(641)828-6183

COMMUNITY PHARMACY
1321 W MAIN ST
LAKE CITY, IA 51449
(712)464-7281

HARRIS DRUG
121 E MAIN ST
LAKE CITY, IA 51449
(712)464-3165

WOODLAWN PHARMACY
101 N WOODLAWN AVE
LAKE CITY, IA 51449
(712)464-8811

REDINGER PHARMACY
219 W MAIN ST
LAKE MILLS, IA 50450
(641)592-0141

COMMUNITY PHARMACY
1160 3RD ST
LAKE VIEW, IA 51450
(712)665-8554

HY-VEE PHARMACY
101 E MAIN ST
LAMONI, IA 50140
(641)784-6322

VARSITY DRUG
101 E MAIN ST
LAMONI, IA 50140
(641)784-6322

LAPORTE CITY PHARMACY
601 HIGHWAY 218 N
LAPORTE, IA 50651
(319)342-3620

HY-VEE RESSLERS PHCY
113 N 3RD ST
LAURENS, IA 50554
(712)841-4374

HY-VEE PHARMACY
1201 12TH AVE SW
LE MARS, IA 51031
(712)548-4503

L AND M PHARMACY CARE
22 1ST ST NE STE A
LE MARS, IA 51031
(712)546-8005

LE MARS FAMILY PHARMACY
44 1ST AVE NE
LE MARS, IA 51031
(712)546-4560

WAL-MART
1111 HOLTON DR
LE MARS, IA 51031
(712)546-5150

NUCARA PHARMACY
107 N MAIN ST
LENOX, IA 50851
(641)366-3440

DECATUR FAMILY PHARMACY
204 N MAIN ST
LEON, IA 50144
(641)446-4136

EBY DRUG STORE LOGAN
103 N 4TH AVE
LOGAN, IA 51546
(712)644-2160

MEDICAP PHARMACY
411 ANNEX RD
MADRID, IA 50156
(515)795-4252

KOHLL'S PHARMACY AND HOMECARE
410 MAIN ST
MALVERN, IA 51551
(712)624-9050

BLAKESLEY DRUG
220 E MAIN ST
MANCHESTER, IA 52057
(563)927-3509

WAL-MART
1220 W MAIN ST
MANCHESTER, IA 52057
(563)927-4988

WIDNER HEALTH MART DRUG
111 S FRANKLIN ST
MANCHESTER, IA 52057
(563)927-4463

Iowa Providers

Participating Pharmacies

MANNING PHARMACY
317 MAIN STREET
MANNING, IA 51455
(712)655-9490

MEDICAP PHARMACY
1224 10TH AVE
MANSON, IA 50563
(712)469-2214

MAIER FAMILY PHARMACY
411 MAIN ST
MAPLETON, IA 51034
(712)881-1033

OSTERHAUS PHARMACY
918 W PLATT ST STE 2
MAQUOKETA, IA 52060
(563)652-5611

WAL-MART
103 E CARLISLE
MAQUOKETA, IA 52060
(563)652-6733

HY-VEE PHARMACY
321 N MAIN ST
MARCUS, IA 51035
(712)376-2844

CORNERSTONE APOTHECARY
1099 COURT AVE
MARENGO, IA 52301
(319)741-6300

PETERSON PHARMACY
104 E WASHINGTON ST
MARENGO, IA 52301
(319)642-3312

CVS
3495 7TH AVE
MARION, IA 52302
(319)373-0430

HY-VEE PHARMACY
3600 BUSINESS HWY 151
MARION, IA 52302
(319)377-7216

HY-VEE PHARMACY
2790 7TH AVE
MARION, IA 52302
(319)377-0959

MARION FAMILY PHARMACY
3701 KATZ DR
MARION, IA 52302
(319)377-8709

WAL-MART
5491 HIGHWAY 151
MARION, IA 52302
(319)447-2870

HY-VEE PHARMACY
802 S CENTER ST
MARSHALLTOWN, IA 50158
(641)752-2266

HY-VEE PHARMACY
1706 S CENTER ST
MARSHALLTOWN, IA 50158
(641)752-4685

KMART PHARMACY
1720 S CENTER ST
MARSHALLTOWN, IA 50158
(641)753-0957

MEDICAP PHARMACY
11 N 3RD AVE
MARSHALLTOWN, IA 50158
(641)752-7139

NUCARA PHARMACY
303 NICHOLAS DR
MARSHALLTOWN, IA 50158
(641)366-3440

NUCARA PHARMACY
312 E MAIN ST
MARSHALLTOWN, IA 50158
(641)366-3440

WAL-MART
2802 S CENTER ST
MARSHALLTOWN, IA 50158
(641)753-3204

DAWN D THEILEN ARNP
100 1ST ST NW STE 200
MASON CITY, IA 50401
(641)423-5044

FOREST PARK PHARMACY
1010 4TH ST SW STE 110
MASON CITY, IA 50401
(641)428-6100

HY-VEE PHARMACY
2400 4TH ST SW
MASON CITY, IA 50401
(641)424-1343

HY-VEE PHARMACY
875 SW 4TH ST
MASON CITY, IA 50401
(641)424-5522

HY-VEE PHARMACY
551 S ILLINOIS AVE
MASON CITY, IA 50401
(641)424-7014

KMART PHARMACY
2006 4TH ST SW
MASON CITY, IA 50401
(641)423-5178

REGENCY PHARMACY
621 S ILLINOIS AVE STE 101
MASON CITY, IA 50401
(641)428-6940

SHOPKO PHARMACY
615 S MONROE AVE
MASON CITY, IA 50401
(641)424-4302

TARGET PHARMACY
3450 4TH ST SW
MASON CITY, IA 50401
(641)423-1325

WAL-MART
4151 4TH ST SW
MASON CITY, IA 50401
(641)423-3494

WESTSIDE PHARMACY
910 N EISENHOWER AVE
MASON CITY, IA 50401
(641)428-5630

MCGREGOR PHARMACY
230 MAIN ST
MCGREGOR, IA 52157
(563)873-3781

CARRUTHERS PHARMACY
526 MAIN ST
MEDIAPOLIS, IA 52637
(319)394-3420

HY-VEE PHARMACY
1012 OKOBOJI AVE
MIFORD, IA 51351
(712)338-4865

LEHAN PHARMACY
317 MAIN ST
MINDEN, IA 51553
(712)483-2884

SHOPKO PHARMACY
413 W HURON ST
MISSOURI VALLEY, IA 51555
(712)642-2716

VALLEY DRUG
318 E ERIE ST
MISSOURI VALLEY, IA 51555
(712)642-2747

MONONA PHARMACY
118 W CENTER ST
MONONA, IA 52159
(563)539-2348

REMEDY DRUG
323 E MAIN ST
MONTEZUMA, IA 50171
(641)623-5710

LONG DRUG
419 E 1ST ST
MONTICELLO, IA 52310
(319)221-1050

THE PRESCRIPTION SHOPPE
304 E 1ST ST
MONTICELLO, IA 52310
(319)465-4404

SHOPKO PHARMACY
201 N FILLMORE ST
MOUNT AYR, IA 50854
(641)464-4527

HY-VEE CLINIC PHARMACY
501 S WHITE ST
MOUNT PLEASANT, IA 52641
(319)385-6745

HY-VEE PHARMACY
1700 E WASHINGTON ST
MOUNT PLEASANT, IA 52641
(319)986-6979

HY-VEE PHARMACY
129 S JEFFERSON ST
MOUNT PLEASANT, IA 52641
(319)385-3163

WAL-MART
1045 N GRAND AVE
MOUNT PLEASANT, IA 52641
(319)385-8600

SHEPLEY PHARMACY
113 1ST ST NE
MOUNT VERNON, IA 52314
(319)895-6248

MOVILLE PHARMACY
216 MAIN ST
MOVILLE, IA 51039
(712)873-3401

HY-VEE PHARMACY
2400 2ND AVE
MUSCATINE, IA 52761
(563)264-5810

HY-VEE PHARMACY
510 E 6TH ST
MUSCATINE, IA 52761
(563)263-1852

WAL-MART
3003 N HIGHWAY 61
MUSCATINE, IA 52761
(563)262-3755

WESTER DRUG
315 2ND ST E
MUSCATINE, IA 52761
(563)263-2044

NASHUA PHARMACY
310 MAIN ST
NASHUA, IA 50658
(641)435-4188

NUCARA PHARMACY
1002 6TH ST
NEVADA, IA 50201
(641)366-3440

PARKVIEW HEALTH MART PHARMACY
1727 S B AVE
NEVADA, IA 50201
(515)382-2134

STORY COUNTY HOSPITAL PHARMACY
640 S 19TH ST
NEVADA, IA 50201
(515)382-7745

BENNETT PHARMACY
1 W MAIN ST
NEW HAMPTON, IA 50659
(641)394-4156

SHOPKO PHARMACY
660 W MILWAUKEE ST
NEW HAMPTON, IA 50659
(641)394-6404

TOMS FAMILY PHARMACY
15 E MAIN ST
NEW HAMPTON, IA 50659
(641)394-4132

HY-VEE PHARMACY
1501 1ST AVE E
NEWTON, IA 50208
(641)792-6100

MEDICAP PHARMACY
400 1ST AVE W
NEWTON, IA 50208
(641)792-3528

MEDICINE SHOPPE PHARMACY
212 1ST ST N
NEWTON, IA 50208
(641)792-3111

WAL-MART
300 IOWA SPEEDWAY DR
NEWTON, IA 50208
(641)792-9237

LIBERTY PHARMACY
555 W CHERRY ST
NORTH LIBERTY, IA 52317
(319)626-6188

MAIN HEALTHCARE PHARMACY
655 LIBERTY WAY STE 3-4
NORTH LIBERTY, IA 52317
(563)324-5004

PHARMACY MATTERS
1765 LININGER LN
NORTH LIBERTY, IA 52317
(319)626-6020

VER HELST DRUG CENTER
98 10TH ST N
NORTHWOOD, IA 50459
(641)324-2116

MEDICAP PHARMACY
2521 SUNSET DR
NORWALK, IA 50211
(515)285-2026

OAKLAND PHARMACY
601 PIONEER AVE
OAKLAND, IA 51560
(712)482-3015

DON'S PHARMACY
32 S FREDERICK AVE
OELWEIN, IA 50662
(319)283-5254

SCHUCHMANN'S PHARMACY
12 S FREDERICK AVE
OELWEIN, IA 50662
(319)283-2161

SHOPKO PHARMACY
1345 S FREDERICK AVE
OELWEIN, IA 50662
(319)283-2028

SWANSON DRUG
305 W WALNUT ST
OGDEN, IA 50212
(515)275-2362

SHOPKO PHARMACY
2220 HIGHWAY 175
ONAWA, IA 51040
(712)423-9648

STANGEL HEALTH MART PHARMACY
821 IOWA AVE
ONAWA, IA 51040
(712)423-1131

DUTCH MILL CLINIC PHARMACY
1000 LINCOLN CIR SE
ORANGE CITY, IA 51041
(712)737-5347

DUTCH MILL PHARMACY
104 ALBANY AVE NE
ORANGE CITY, IA 51041
(712)737-4844

HOMETOWN PHARMACY
512 8TH ST SE
ORANGE CITY, IA 51041
(712)737-4919

SMART PHARMACY
616 N 8TH ST
OSAGE, IA 50461
(641)732-5806

HY-VEE PHARMACY
1012 JEFFREYS DR
OSCEOLA, IA 50213
(641)342-1568

MEDICAP PHARMACY
214 S MAIN ST
OSCEOLA, IA 50213
(641)342-6557

WAL-MART
2400 COLLEGE DR
OSCEOLA, IA 50213
(641)342-1662

HY-VEE PHARMACY
110 S D ST
OSKALOOSA, IA 52577
(641)673-0259

MAHASKA DRUG
205 N E ST
OSKALOOSA, IA 52577
(641)673-3439

MEDICAP PHARMACY
504 A AVE W
OSKALOOSA, IA 52577
(641)673-8486

Iowa Providers

Participating Pharmacies

WAL-MART
2203 AVENUE A W
OSKALOOSA, IA 52577
(641)673-6811

HY-VEE PHARMACY
2453 N COURT
OTTUMWA, IA 52501
(641)684-1853

HY-VEE PHARMACY
1140 N JEFFERSON ST
OTTUMWA, IA 52501
(641)684-5467

HY-VEE PHARMACY
1025 N QUINCY AVE
OTTUMWA, IA 52501
(641)683-4483

KMART PHARMACY
1131 N QUINCY AVE
OTTUMWA, IA 52501
(641)683-3814

NUCARA PHARMACY
107 W MAIN ST
OTTUMWA, IA 52501
(641)366-3440

SOUTH SIDE DRUG
337 CHURCH ST
OTTUMWA, IA 52501
(641)682-3467

WAL-MART
1940 VENTURE DR
OTTUMWA, IA 52501
(641)683-1357

MEDICAP PHARMACY
615 E MAIN ST
PANORA, IA 50216
(641)755-2312

PARKERSBURG PHARMACY
226 3RD ST
PARKERSBURG, IA 50665
(319)346-1970

THRIFTY WHITE PHARMACY
127 N MAIN ST
PAULLINA, IA 51046
(712)957-8495

CROWN PHARMACY
802 WASHINGTON ST
PELLA, IA 50219
(641)628-1612

HY-VEE PHARMACY
118 SE 9TH ST
PELLA, IA 50219
(641)628-1280

PELLA REGIONAL HEALTH CENTER
404 JEFFERSON ST
PELLA, IA 50219
(641)628-3150

WAL-MART
1650 WASHINGTON ST
PELLA, IA 50219
(641)628-9227

HY-VEE PHARMACY
1215 141ST ST
PERRY, IA 50220
(515)465-3543

MEDICAP PHARMACY
601 1ST AVE
PERRY, IA 50220
(515)465-3391

SHOPKO PHARMACY
1305 141ST ST
PERRY, IA 50220
(515)465-5484

HY-VEE PHARMACY
4815 MAPLE DR
PLEASANT HILL, IA 50327
(515)265-6144

NUCARA PHARMACY
4927 MAPLE DR
PLEASANT HILL, IA 50327
(614)366-3440

PLEASANTVILLE CLINIC
104 N WASHINGTON ST
PLEASANTVILLE, IA 50225
(515)848-3113

POCAHONTAS PHARMACY
701 W ELM AVE
POCAHONTAS, IA 50574
(712)335-3119

POLK CITY PHARMACY
419 W BRIDGE RD
POLK CITY, IA 50226
(515)984-6554

ANDERSON PHARMACY
61 W GILLET ST
PRESTON, IA 52069
(563)689-3301

HY-VEE PHARMACY
1605 N BROADWAY ST
RED OAK, IA 51566
(712)623-3370

MEDICAP PHARMACY
600 SENATE AVE
RED OAK, IA 51566
(712)623-1900

RED OAK PHARMACY
1400 SENATE AVE STE 104
RED OAK, IA 51566
(712)623-7245

REINBECK PHARMACY
401 MAIN ST
REINBECK, IA 50669
(319)788-7445

REMSEN PHARMACY
111 S WASHINGTON ST
REMSEN, IA 51050
(712)786-2093

THE RICEVILLE PHARMACY
120 W MAIN ST
RICEVILLE, IA 50466
(641)985-4114

UI HLTH CARE RIVER XING PHCY
3056 RIVER CROSS CT STE A
RIVERSIDE, IA 52327
(319)467-8380

CORNER REXALL DRUGS
220 1ST AVE
ROCK RAPIDS, IA 51246
(712)472-3143

LEWIS FAMILY DRUG
402 S 2ND AVE
ROCK RAPIDS, IA 51246
(712)472-4220

LEWIS FAMILY DRUG
106 N BOONE ST
ROCK RAPIDS, IA 51246
(712)472-4044

LEWIS FAMILY DRUG
1319 10TH ST
ROCK VALLEY, IA 51247
(712)476-5405

COMMUNITY PHARMACY
507 E LAKE ST
ROCKWELL CITY, IA 50579
(712)297-7337

SAC CITY DRUG
514 MAIN ST
SAC CITY, IA 50583
(712)662-7146

BROWER PHARMACY
140 W 4TH ST
SAINT ANSGAR, IA 50472
(641)713-4381

MONTROSS PHARMACY
134 W MAIN ST
SAINT CHARLES, IA 50240
(641)396-2445

SERGEANT BLUFF PHARMACY
110 GAUL DR STE A
SERGEANT BLUFF, IA 51054
(712)943-1494

SHEFFIELD PHARMACY
115 GILMAN ST
SHEFFIELD, IA 50475
(641)892-4640

HY-VEE PHARMACY
1989 PARK ST
SHELDON, IA 51201
(712)324-0020

LEWIS FAMILY DRUG
610 PARK ST
SHELDON, IA 51201
(712)324-4331

SHOPKO PHARMACY
1501 PARK ST
SHELDON, IA 51201
(712)324-3552

GEORGE JAY DRUG COMPANY
612 W SHERIDAN AVE
SHENANDOAH, IA 51601
(712)246-2635

HY-VEE PHARMACY
500 S FREMONT ST
SHENANDOAH, IA 51601
(712)246-3440

WAL-MART
705 S FREMONT ST
SHENANDOAH, IA 51601
(712)246-4033

LEWIS FAMILY DRUG
420 2ND AVE
SIBLEY, IA 51249
(712)754-3859

REMEDIES PHARMACY
345 9TH ST
SIBLEY, IA 51249
(712)754-3551

PENN DRUG
714 ILLINOIS ST
SIDNEY, IA 51652
(712)374-2513

JACK'S CORNER DRUG
118 S MAIN ST STE B
SIGOURNEY, IA 52591
(641)622-3184

HY-VEE PHARMACY
1951 S MAIN AVE
SIOUX CENTER, IA 51250
(712)722-3516

LEWIS FAMILY DRUG
143 S MAIN AVE
SIOUX CENTER, IA 51250
(712)722-2704

WAL-MART
255 16TH ST SW
SIOUX CENTER, IA 51250
(712)722-2326

DRILLING MORNINGSIDE PHARMACY
4010 MORNINGSIDE AVE
SIOUX CITY, IA 51106
(712)276-4621

GREENVILLE PHARMACY
2705 CORRECTIONVILLE RD
SIOUX CITY, IA 51105
(712)258-0113

HY-VEE PHARMACY
2627 PIERCE ST
SIOUX CITY, IA 51104
(712)258-0117

HY-VEE PHARMACY
4500 SERGEANT RD
SIOUX CITY, IA 51106
(712)274-2949

HY-VEE PHARMACY
2827 HAMILTON BLVD
SIOUX CITY, IA 51104
(712)277-8734

HY-VEE PHARMACY
3301 GORDON DR
SIOUX CITY, IA 51105
(712)234-1949

KMART PHARMACY
5700 GORDON DR
SIOUX CITY, IA 51106
(712)276-1461

LEEDS PHARMACY
2729 OUTER DR N
SIOUX CITY, IA 51104
(712)239-2051

MERCY CARE PHARMACY
801 5TH ST
SIOUX CITY, IA 51101
(712)279-5880

SHOPKO PHARMACY
3025 HAMILTON BLVD
SIOUX CITY, IA 51104
(712)255-8055

SIOUXLAND COMM HLTH CTR PHCY
1021 NEBRASKA ST
SIOUX CITY, IA 51105
(712)255-4204

TARGET PHARMACY
5775 SUNNYBROOK DR
SIOUX CITY, IA 51106
(712)274-8854

THOMPSON DEAN DRUG
911 W 7TH ST
SIOUX CITY, IA 51103
(712)252-2761

WAL-MART
3400 SINGING HILLS BLVD
SIOUX CITY, IA 51106
(712)252-4905

WAL-MART
3101 FLOYD BLVD
SIOUX CITY, IA 51108
(712)239-8913

SOLON TOWNCREST PHARMACY
101 WINDFLOWER LN STE 100
SOLON, IA 52333
(319)624-2239

HY-VEE PHARMACY
819 GRAND AVE
SPENCER, IA 51301
(712)262-5611

THRIFTY WHITE DRUG
400 GRAND AVE
SPENCER, IA 51301
(712)262-1523

WAL-MART
500 11TH ST SW
SPENCER, IA 51301
(712)262-5011

HY-VEE PHARMACY
1500 18TH ST
SPIRIT LAKE, IA 51360
(712)336-4551

LEWIS FAMILY DRUG
2308 17TH ST
SPIRIT LAKE, IA 51360
(712)336-4731

WAL-MART
2200 17TH ST
SPIRIT LAKE, IA 51360
(712)336-1756

HY-VEE BEDELS PHARMACY
409 W 5TH ST
STORM LAKE, IA 50588
(712)732-4819

HY-VEE PHARMACY
1250 N LAKE AVE
STORM LAKE, IA 50588
(712)732-1364

WAL-MART
1831 LAKE AVE
STORM LAKE, IA 50588
(712)732-7960

NUCARA PHARMACY
621 BROAD ST
STORY CITY, IA 50248
(641)366-3440

FAMILY PHARMACY
803 SHAKESPEARE ST
STRATFORD, IA 50249
(515)838-2322

CLAYTON DRUG
104 W MISSION ST
STRAWBERRY POINT, IA 52076
(563)933-4762

WRIGHT PHARMACY
303 SW 7TH ST STE A
STUART, IA 50250
(515)523-1525

CLAYTON DRUG
100 E 1ST ST
SUMNER, IA 50674
(563)578-5068

STONER DRUG
712 MAIN ST
TABOR, IA 51653
(712)629-2945

Iowa Providers

Participating Pharmacies

TIPTON PHARMACY
124 E 5TH ST
TIPTON, IA 52772
(563)886-2158

WAL-MART
1128 HIGHWAY 38
TIPTON, IA 52772
(563)886-2117

MEDICAP PHARMACY
108 2ND AVE W
TOLEDO, IA 52342
(641)484-6198

SHOPKO PHARMACY
1006 S COUNTY RD
TOLEDO, IA 52342
(641)484-8801

NUCARA PHARMACY
500 2ND ST
TRAER, IA 50675
(641)366-3440

CRITICAL CARE SYSTEMS
11382 AURORA AVE
URBANDALE, IA 50322
(515)276-1660

HY-VEE PHARMACY
8701 DOUGLAS AVE
URBANDALE, IA 50322
(515)270-2225

KMART PHARMACY
7501 HICKMAN RD
URBANDALE, IA 50322
(515)270-2623

MEDICAP PHARMACY
7641 DOUGLAS AVE
URBANDALE, IA 50322
(515)276-3471

MERCY HOME INFUSION
2853 99TH ST
URBANDALE, IA 50322
(515)271-6456

NCS HEALTHCARE
4131 109TH ST
URBANDALE, IA 50322
(515)727-8090

PHARMERICA
2901 99TH ST
URBANDALE, IA 50322
(515)331-7756

TARGET PHARMACY
11148 PLUM DR
URBANDALE, IA 50322
(515)270-6884

CORNERSTONE APOTHECARY
122 MAIN ST
VAN HORNE, IA 52346
(319)228-8100

VICTOR DRUG
205 WASHINGTON ST
VICTOR, IA 52347
(319)653-1043

HONEYMAN DRUG
408 S 3RD AVE
VILLISCA, IA 50864
(712)826-4112

CLINGMAN HEALTH MART PHARMACY
106 E 4TH ST
VINTON, IA 52349
(319)472-4731

LA GRANGE PHARMACY
111 W 4TH ST
VINTON, IA 52349
(319)472-4274

HY-VEE PHARMACY
312 N 2ND ST
WAPELLO, IA 52653
(319)523-3784

BEANS PHARMACY
222 S IOWA AVE
WASHINGTON, IA 52353
(319)653-4646

HY-VEE PHARMACY
528 HIGHWAY 1 S
WASHINGTON, IA 52353
(319)653-2155

NUCARA PHARMACY
120 E MADISON ST
WASHINGTON, IA 52353
(641)366-3440

RELIANT LTC
222 S IOWA AVE STE B
WASHINGTON, IA 52353
(319)653-1043

WAL-MART
2485 HIGHWAY 92
WASHINGTON, IA 52353
(319)653-7218

ALLEN CLINIC PHARMACY
146 W DALE ST STE 103
WATERLOO, IA 50703
(319)235-3777

AMICARE PHARMACY
1015 S HACKETT RD
WATERLOO, IA 50701
(319)292-6600

COVENANT FAMILY PHARMACY
2710 SAINT FRANCIS DR
WATERLOO, IA 50702
(319)272-5700

CVS
207 FRANKLIN ST
WATERLOO, IA 50703
(319)234-4736

CVS
1825 E SAN MARNAN DR
WATERLOO, IA 50702
(319)235-6248

GREENWOOD DRUG ON KIMBALL AVE
2104 KIMBALL AVE
WATERLOO, IA 50702
(319)234-6673

HY-VEE PHARMACY
2834 ANSBOROUGH AVE
WATERLOO, IA 50701
(319)226-3514

HY-VEE PHARMACY
1422 FLAMMANG DR
WATERLOO, IA 50702
(319)234-1774

HY-VEE PHARMACY
4000 UNIVERSITY AVE
WATERLOO, IA 50701
(319)236-1786

HY-VEE PHARMACY
2181 LOGAN AVE
WATERLOO, IA 50703
(319)232-6366

KMART PHARMACY
3810 UNIVERSITY AVE
WATERLOO, IA 50701
(319)234-1507

NUCARA PHARMACY
209 E SAN MARNAN DR STE 140
WATERLOO, IA 50702
(641)366-3440

PEOPLES CLINIC PHARMACY
905 FRANKLIN ST
WATERLOO, IA 50703
(319)272-4300

TARGET PHARMACY
1501 EAST SANMARNAN DR
WATERLOO, IA 50702
(319)226-6761

UNITED MED PARK CLINIC PHARMAC
1717 W RIDGEWAY AVE STE 50A
WATERLOO, IA 50701
(319)833-5725

WAL-MART
1334 FLAMMANG DR
WATERLOO, IA 50702
(319)232-3514

HY-VEE PHARMACY
1005 E HICKMAN RD
WAUKEE, IA 50263
(515)216-2762

MEDICAP PHARMACY
10 WARRIOR LN
WAUKEE, IA 50263
(515)987-8111

HARTIG DRUG
21 W MAIN ST
WAUKON, IA 52172
(563)568-6315

SHOPKO PHARMACY
819 11TH AVE SW
WAUKON, IA 52172
(563)568-3668

CENTER PHARMACY
312 9TH ST SW STE 1000
WAVERLY, IA 50677
(319)483-4100

HY-VEE PHARMACY
1311 4TH ST SW
WAVERLY, IA 50677
(319)352-2021

MEYER HEALTH MART PHARMACY
110 10TH ST SW
WAVERLY, IA 50677
(319)352-3120

WAL-MART
2700 4TH ST SW
WAVERLY, IA 50677
(319)352-2735

HY-VEE PHARMACY
823 2ND ST
WEBSTER CITY, IA 50595
(515)832-4025

THRIFTY WHITE DRUG
909 WILSON AVE
WEBSTER CITY, IA 50595
(515)832-4137

PHARMACY ON 8TH
221 8TH AVE
WELLMAN, IA 52356
(319)646-3388

HERITAGE FAMILY PHARMACY
1201 W AGENCY RD
WEST BURLINGTON, IA 52655
(319)753-3681

HERITAGE PARK PHARMACY
1223 S GEAR AVE STE 105
WEST BURLINGTON, IA 52655
(319)768-3950

HERITAGE PARTNERS PHARMACY
1225 S GEAR AVE STE 154
WEST BURLINGTON, IA 52655
(319)768-3960

WAL-MART
324 W AGENCY RD
WEST BURLINGTON, IA 52655
(319)753-2269

COSTCO
7205 MILLS CIVIC PKWY
WEST DES MOINES, IA 50266
(515)222-2948

DAHLS PHARMACY
1208 PROSPECT RD
WEST DES MOINES, IA 50265
(515)223-4626

DAHL'S PHARMACY
5003 EP TRUE PKWY
WEST DES MOINES, IA 50265
(515)278-1657

HY-VEE PHARMACY
1010 60TH ST
WEST DES MOINES, IA 50266
(515)440-1620

HY-VEE PHARMACY
555 S 51ST ST
WEST DES MOINES, IA 50265
(515)221-2751

HY-VEE PHARMACY
1725 JORDAN CREEK PKWY
WEST DES MOINES, IA 50266
(515)226-8921

HY-VEE PHARMACY
1700 VALLEY WEST DR
WEST DES MOINES, IA 50265
(515)225-9330

HY-VEE PHARMACY
1990 GRAND AVE
WEST DES MOINES, IA 50265
(515)223-8506

TARGET PHARMACY
1800 35TH ST
WEST DES MOINES, IA 50266
(515)225-3170

TARGET PHARMACY
5405 MILL CIVIC PKWY
WEST DES MOINES, IA 50266
(515)223-3597

WAL-MART
6365 STAGECOACH
WEST DES MOINES, IA 50266
(515)453-2760

WEST LIBERTY PHARMACY
311 W RAINBOW DR APT 1
WEST LIBERTY, IA 52776
(319)653-1043

STEEGE PHARMACY
119 N VINE ST
WEST UNION, IA 52175
(641)366-3440

UNION DRUG
315 HIGHWAY 150 N
WEST UNION, IA 52175
(563)422-3721

WHITING FAMILY PHARMACY
723 WHITTER ST
WHITING, IA 51063
(712)458-2500

PETERSON DRUG
514 ELM ST
WILLIAMSBURG, IA 52361
(319)668-1664

STAR DRUG
517 COURT ST
WILLIAMSBURG, IA 52361
(319)668-1520

WESTER DRUG
400 OVESEN DR
WILTON, IA 52778
(563)732-5238

HY-VEE PHARMACY
7101 UNIVERSITY AVE
WINDSOR HEIGHTS, IA 50324
(515)279-4408

MEDICAP PHARMACY
904 N JOHN WAYNE DR
WINTERSET, IA 50273
(515)462-2880

MONTROSS PHARMACY
118-120 N 1ST AVE
WINTERSET, IA 50273
(515)462-2282

SHOPKO PHARMACY
402 E HIGHWAY 92
WINTERSET, IA 50273
(515)462-2192

EBY DRUG STORE
423 WALKER ST
WOODBINE, IA 51579
(712)647-2840

WYOMING DRUG
156 W MAIN ST
WYOMING, IA 52362
(319)221-1050

NUCARA PHARMACY
112 W MAIN ST
ZEARING, IA 50278
(641)366-3442

ZEARING MEDICAL CLINIC
112 W MAIN ST
ZEARING, IA 50278
(641)487-7779

Minnesota Providers

Participating Pharmacies

ADA PHARMACY
319 W MAIN ST
ADA, MN 56510
(218)784-4351

THRIFTY WHITE DRUG
104 W 3RD AVE
ADA, MN 56510
(218)784-2434

STERLING DRUG
209 MAINE AVE STE 105
ADRIAN, MN 56110
(507)483-2332

CVS
25 2ND ST NE
AITKIN, MN 56431
(218)927-3756

SHOPKO PHARMACY
190 SOUTHGATE DR
AITKIN, MN 56431
(218)927-2466

ALBANY APOTHECARY
509 RAILROAD AVE
ALBANY, MN 56307
(320)845-4220

CURT'S PHARMACY
1615 W MAIN ST
ALBERT LEA, MN 56007
(507)373-6337

HY-VEE PHARMACY
2708 BRIDGE AVE
ALBERT LEA, MN 56007
(507)373-1899

MAYO CLINIC HEALTH SYSTEM
404 W FOUNTAIN ST
ALBERT LEA, MN 56007
(507)373-7952

SHOPKO PHARMACY
2610 BRIDGE AVE
ALBERT LEA, MN 56007
(507)373-9424

STERLING DRUG
410 BRIDGE AVE
ALBERT LEA, MN 56007
(507)373-1486

WAL-MART
1550 BLAKE AVE
ALBERT LEA, MN 56007
(507)377-0668

COBORNS PHARMACY
5698 LACENTRE AVE NE
ALBERTVILLE, MN 55301
(763)497-1139

MARKETPLACE PHARMACY
5262 KYLER AVE NE STE 112
ALBERTVILLE, MN 55301
(763)497-2846

ALEXANDRIA APOTHECARY
1525 BROADWAY ST STE 100
ALEXANDRIA, MN 56308
(320)763-3076

KMART PHARMACY
2310 HIGHWAY 29 S
ALEXANDRIA, MN 56308
(320)763-7433

TARGET PHARMACY
4404 HIGHWAY 29 S
ALEXANDRIA, MN 56308
(320)763-7393

THRIFTY WHITE PHARMACY
503 3RD AVE E STE 100
ALEXANDRIA, MN 56308
(320)762-1531

TRUMM DRUG
600 FILLMORE ST
ALEXANDRIA, MN 56308
(320)763-3111

TRUMM DRUG - ALEXANDRIA
610 30TH AVE W STE 201
ALEXANDRIA, MN 56308
(320)763-3116

WAL-MART
4611 HWY 29 S
ALEXANDRIA, MN 56308
(320)762-2850

CVS
3633 BUNKER LN BLVD NW
ANDOVER, MN 55303
(763)421-5011

FAIRVIEW ANDOVER PHARMACY
13819 HANSON BLVD STE 100
ANDOVER, MN 55304
(763)862-4445

GOODRICH PHARMACY
15245 BLUEBIRD ST
ANDOVER, MN 55304
(763)434-1901

TARGET PHARMACY
200 BUNKER LK BLVD NW
ANDOVER, MN 55304
(763)852-0114

WAL-MART
1851 BUNKER LAKE BLVD
ANDOVER, MN 55304
(763)354-5720

ARENSON ANNANDALE PHARMACY
43 OAK AVE N
ANNANDALE, MN 55302
(320)274-5415

KEAVENY DRUG
700 NORWAY DR E STE 105
ANNANDALE, MN 55302
(320)274-3062

CVS
657 E MAIN ST
ANOKA, MN 55303
(763)427-2457

GOODRICH PHARMACY ANOKA
601 JACOB LN
ANOKA, MN 55303
(763)421-5540

KMART PHARMACY
1100 W HIGHWAY 10
ANOKA, MN 55303
(763)427-7699

ALLINA HEALTH APPLE VALLEY
14655 GALAXY AVE
APPLE VALLEY, MN 55124
(651)241-3800

CUB
15350 CEDAR AVE
APPLE VALLEY, MN 55124
(952)431-2221

CVS
15051 GALAXIE AVE
APPLE VALLEY, MN 55124
(952)432-3535

CVS
15115 DOVE TRL
APPLE VALLEY, MN 55124
(952)423-3200

FAIRVIEW CEDAR RIDGE PHCY
15650 CEDAR AVE
APPLE VALLEY, MN 55124
(952)997-4155

HEALTHPARTNERS
15290 PENNOCK LN
APPLE VALLEY, MN 55124
(952)431-8566

RAINBOW FOODS PHARMACY
15125 CEDAR AVE
APPLE VALLEY, MN 55124
(952)431-9774

SAM'S CLUB
14940 FLORENCE TRAIL
APPLE VALLEY, MN 55124
(952)432-7133

TARGET PHARMACY
15150 CEDAR AVE
APPLE VALLEY, MN 55124
(952)891-5515

TARGET PHARMACY
15560 PILOT KNOB RD
APPLE VALLEY, MN 55124
(952)236-3166

WAL-MART
7835 150TH ST W
APPLE VALLEY, MN 55124
(952)431-9703

LIEBE DRUG
145 N MILES ST
APPLETON, MN 56208
(320)289-2593

CUB
3717 LEXINGTON AVE N
ARDEN HILLS, MN 55126
(651)483-1504

HEALTHPARTNERS ARDEN HILLS
3930 NORTHWOODS DR
ARDEN HILLS, MN 55112
(651)523-8599

MORREIM PHARMACY
201 W MAIN ST
ARLINGTON, MN 55307
(507)964-5228

AURORA DRUG
201 N MAIN ST
AURORA, MN 55705
(218)229-3327

ESSENTIA HEALTH NORTHERN PINES
5211 HIGHWAY 110
AURORA, MN 55705
(218)229-2211

NORTHERN PINES MEDICAL CENTER
5211 HIGHWAY 110
AURORA, MN 55705
(952)653-2568

HY-VEE PHARMACY
1001 18TH AVE NW
AUSTIN, MN 55912
(507)437-9185

MEDICAP PHARMACY
1109 W OAKLAND AVE
AUSTIN, MN 55912
(507)433-7123

SHOPKO PHARMACY
1209 18TH AVE NW
AUSTIN, MN 55912
(507)437-7616

ST OLAF PHARMACY
1000 1ST DR NW
AUSTIN, MN 55912
(507)434-1422

STERLING DRUG
1305 1ST AVE SW
AUSTIN, MN 55912
(507)433-4586

TARGET PHARMACY
1701 NW 18TH AVE
AUSTIN, MN 55912
(507)437-7053

WAL-MART
1000 18TH AVE NW
AUSTIN, MN 55912
(507)434-8170

K AND S PHARMACY
107 AVON AVE S STE 1
AVON, MN 56310
(320)356-1000

THRIFTY WHITE DRUG
31 N MAIN ST
BAGLEY, MN 56621
(218)694-6210

CITY CENTER DRUG AND HARDWARE
117 FRONT ST S
BARNESVILLE, MN 56514
(218)354-2131

NOBLE THRIFTY WHITE PHARMACY
111 MAIN AVE N
BAUDETTE, MN 56623
(218)634-1236

COSTCO
13650 ELDER DR
BAXTER, MN 56425
(218)855-5755

CUB
14133 EDGEWOOD DR
BAXTER, MN 56425
(218)855-0880

ESSENTIA HEALTH BAXTER PHCY
13060 ISLE DR
BAXTER, MN 56425
(218)454-5920

WAL-MART
7295 GLORY RD
BAXTER, MN 56425
(218)829-5510

CENTRACARE PHARMACY BECKER
12800 ROLLING RIDGE RD
BECKER, MN 55308
(763)261-7008

COBORN'S PHARMACY
1010 ENTERPRISE DR E
BELLE PLAINE, MN 56011
(952)873-2605

OTTO DRUG EXPRESS AND VARIETY
613 E MAIN ST
BELLE PLAINE, MN 56011
(952)873-6220

MEDSAVE FAMILY PHARMACY
217 PAUL BUNYAN DR NW
BEMIDJI, MN 56601
(218)759-1222

SANFORD BEMIDJI MEDICAL CENTER
1300 ANNE ST NW
BEMIDJI, MN 56601
(952)653-2568

SANFORD PHARMACY 1611 ANNE ST
1611 ANNE ST NW
BEMIDJI, MN 56601
(218)333-2450

SANFORD PHARMACY 1705 ANNE ST
1705 ANNE ST NW STE 3
BEMIDJI, MN 56601
(218)333-4770

SANFORD PHARMACY BEMIDJI
1233 34TH ST NW
BEMIDJI, MN 56601
(218)333-5265

TARGET PHARMACY
2100 PAUL BUNYAN DR NW
BEMIDJI, MN 56601
(218)759-0133

THRIFTY WHITE DRUG
225 PAUL BUNYAN DR NW
BEMIDJI, MN 56601
(218)751-5030

THRIFTY WHITE DRUG
2000 PAUL BUNYAN DR NW
BEMIDJI, MN 56601
(218)751-6380

WAL-MART
2025 PAUL BUNYAN DR NW
BEMIDJI, MN 56601
(218)755-6132

BREEN'S PHARMACY
1207 PACIFIC AVE
BENSON, MN 56215
(320)842-4221

CLARKS REXALL DRUG
1214 ATLANTIC AVE
BENSON, MN 56215
(320)842-3221

SEIP DRUG
124 2ND AVE NW
BERTHA, MN 56437
(218)924-2124

COBORNS PHARMACY
711 ROSE DR
BIG LAKE, MN 55309
(763)263-7030

BIGFORK VALLEY PHARMACY
258 PINE TREE DR
BIGFORK, MN 56628
(218)743-4444

MOONS PHARMACY
17 MAIN ST S
BLACKDUCK, MN 56630
(218)835-7740

Minnesota Providers

Participating Pharmacies

CUB
12595 CENTRAL AVE NE
BLAINE, MN 55434
(763)767-4329

CUB
585 NORTHTOWN DR
BLAINE, MN 55434
(763)780-7350

CUB
4205 PHEASANT RIDGE DR
BLAINE, MN 55449
(763)784-0334

CVS
2357 108TH LN NE
BLAINE, MN 55449
(763)780-0776

EXPRESS HEALTHCARE
10190 BALITMORE ST NE
BLAINE, MN 55449
(763)795-9363

FAIRVIEW PHARMACY BLAINE
10961 CLUB WEST PKWY
BLAINE, MN 55449
(763)528-2975

GOODRICH PHARMACY
11855 ULYSSES ST NE
BLAINE, MN 55434
(763)717-0222

KMART PHARMACY
8949 UNIVERSITY AVE NE
BLAINE, MN 55434
(763)786-6820

RAINBOW FOODS PHARMACY
551 87TH LN NE
BLAINE, MN 55434
(763)785-4707

TARGET PHARMACY
1500 109TH AVE NE
BLAINE, MN 55449
(763)354-1001

WAL-MART
11505 ULYSSES ST NE
BLAINE, MN 55434
(763)354-5402

WAL-MART
4405 PHEASANT RIDGE NE
BLAINE, MN 55449
(763)784-0862

BLOOMINGTON DRUG
509 W 98TH ST
BLOOMINGTON, MN 55420
(952)884-7528

CUB
500 W 84TH ST
BLOOMINGTON, MN 55420
(952)346-8625

CUB
10520 FRANCE AVE S
BLOOMINGTON, MN 55431
(952)888-4310

CVS
8936 LYNDALE AVE S
BLOOMINGTON, MN 55420
(952)881-0163

FAIRVIEW OXBORO PHARMACY
600 W 98TH ST
BLOOMINGTON, MN 55420
(952)885-6166

HEALTHPARTNERS
8600 NICOLLET AVE S
BLOOMINGTON, MN 55420
(952)887-6602

HEALTHPARTNERS 8170 PHARMACY
8170 33RD AVE S
BLOOMINGTON, MN 55425
(952)967-6972

LUNDS PHARMACY
5159 W 98TH ST
BLOOMINGTON, MN 55437
(952)224-5034

PARK NICOLLET PHCY BLOOMINGTON
5320 HYLAND GREENS DR
BLOOMINGTON, MN 55437
(952)993-2530

RAINBOW FOODS PHARMACY
2600 W 80TH ST
BLOOMINGTON, MN 55431
(952)346-0121

SAM'S CLUB
200 79TH ST W
BLOOMINGTON, MN 55420
(952)888-6079

TARGET PHARMACY
2555 79TH ST W
BLOOMINGTON, MN 55431
(952)888-4677

WAL-MART
700 AMERICAN BLVD E
BLOOMINGTON, MN 55420
(952)854-8850

BLUE EARTH DRUG
125 S GROVE ST
BLUE EARTH, MN 56013
(507)526-2121

BLUE EARTH DRUG LTC
125 S GROVE ST STE 2
BLUE EARTH, MN 56013
(507)526-2121

WAL-MART
1210 GIANT DR
BLUE EARTH, MN 56013
(507)526-4514

CUB
417 8TH AVE NE
BRAINERD, MN 56401
(218)828-0440

ESSENTIA HEALTH BRAINERD PHCY
2024 S 6TH ST
BRAINERD, MN 56401
(218)829-7455

GUIDEPOINT PHARMACY
108 S 6TH ST
BRAINERD, MN 56401
(218)829-0347

SERVICE DRUG
218 W WASHINGTON ST
BRAINERD, MN 56401
(218)829-3664

ST JOSEPH'S MEDICAL CENTER
523 N 3RD ST
BRAINERD, MN 56401
(218)829-2861

TARGET PHARMACY
700 DELLWOOD DR N
BRAINERD, MN 56401
(218)828-9219

THRIFTY NYSTROM DRUG
233 S 8TH ST
BRAINERD, MN 56401
(218)825-0803

THRIFTY NYSTROM DRUG
223 S 8TH ST
BRAINERD, MN 56401
(218)829-3529

BRECKENRIDGE DRUG
116 N 5TH ST
BRECKENRIDGE, MN 56520
(218)643-5411

ST FRANCIS MEDICAL CTR PHCY
2400 ST FRANCIS DR
BRECKENRIDGE, MN 56520
(218)643-0260

THRIFTY WHITE PHARMACY
126 5TH ST N
BRECKENRIDGE, MN 56520
(218)643-3871

CUB
3245 COUNTY ROAD 10
BROOKLYN CENTER, MN 55429
(763)503-6810

CVS
5801 BROOKLYN BLVD
BROOKLYN CENTER, MN 55429
(763)537-1237

HEALTHPARTNERS BROOKLYN CTR
6845 LEE AVE N
BROOKLYN CENTER, MN 55429
(763)503-4418

PARK NICOLLET PHCY BROOKDALE
6000 EARLE BROWN DR
BROOKLYN CENTER, MN 55430
(952)993-4800

SUN PHARMACY
6350 BROOKLYN BLVD STE A1
BROOKLYN CENTER, MN 55429
(763)561-0722

TARGET PHARMACY
6100 SHINGLE CREEK PKWY
BROOKLYN CENTER, MN 55430
(763)566-0143

WAL-MART
1200 SHINGLE CREEK XING
BROOKLYN CENTER, MN 55430
(763)566-4089

CUB
7555 W BROADWAY AVE
BROOKLYN PARK, MN 55428
(763)424-0525

CUB
9655 COLORADO LN
BROOKLYN PARK, MN 55445
(763)315-0737

CVS
7996 BROOKLYN BLVD
BROOKLYN PARK, MN 55445
(763)488-1624

FAIRVIEW PHCY BROOKLYN PARK
10000 ZANE AVE N
BROOKLYN PARK, MN 55443
(763)569-6281

PARK POINT PHARMACY
7648 ZANE AVE N STE 104
BROOKLYN PARK, MN 55443
(763)560-1901

POLAR PHARMACY AND MED SUPPLY
8561 EDINBURGH CENTER DR
BROOKLYN PARK, MN 55443
(773)777-5995

TARGET PHARMACY
7535 W BROADWAY AVE
BROOKLYN PARK, MN 55428
(763)898-5528

WAL-MART
8000 LAKELAND AVE
BROOKLYN PARK, MN 55445
(763)424-7077

LIEBE DRUG
332 4TH BROADWAY
BROWNS VALLEY, MN 56219
(320)695-2331

ALLINA HEALTH BUFFALO PHARMACY
303 CATLIN ST
BUFFALO, MN 55313
(763)684-7676

BUFFALO HOSPITAL
303 CATLIN ST
BUFFALO, MN 55313
(763)682-7190

CUB
1008 HIGHWAY 55 E
BUFFALO, MN 55313
(763)682-5828

STERLING DRUG
25 DIVISON ST E
BUFFALO, MN 55313
(763)682-1911

TARGET PHARMACY
1300 STATE HIGHWAY 55 NE
BUFFALO, MN 55313
(763)682-5633

WAL-MART
1315 HWY 25 N
BUFFALO, MN 55313
(763)682-2963

BYERLY'S PHARMACY
401 COUNTY ROAD 42 E
BURNSVILLE, MN 55306
(952)435-8145

COSTCO
14050 BURNHAVEN DR
BURNSVILLE, MN 55337
(952)229-6458

CUB
300 E TRAVELERS TRL
BURNSVILLE, MN 55337
(952)894-0712

CUB
1750 COUNTRY RD 42 W
BURNSVILLE, MN 55337
(952)892-6262

CVS
12751 NICOLLET AVE
BURNSVILLE, MN 55337
(952)736-8130

FAIRVIEW RIDGEVIEW PHARMACY
303 E NICOLLET BLVD
BURNSVILLE, MN 55337
(952)892-2640

FAIRVIEW RIDGEVIEW PHARMACY
201 E NICOLLET BLVD
BURNSVILLE, MN 55337
(952)892-2130

KMART PHARMACY
14230 BURNHAVEN DR
BURNSVILLE, MN 55306
(952)435-8233

PARK NICOLLET PHCY BURNSVILLE
14000 FAIRVIEW DR
BURNSVILLE, MN 55337
(952)993-8524

TARGET PHARMACY
810 COUNTY ROAD 42 W
BURNSVILLE, MN 55337
(952)236-3004

WAL-MART
12200 RIVER RIDGE BLVD
BURNSVILLE, MN 55337
(952)882-9196

STERLING
615 ESCH DR
CALEDONIA, MN 55921
(507)725-3328

ALLINA HEALTH CAMBRIDGE PHCY
701 DELLWOOD ST S
CAMBRIDGE, MN 55008
(763)689-7809

CUB
100 XYLITE ST NE
CAMBRIDGE, MN 55008
(763)689-0185

MERWIN LTC PHARMACY
124 EMERSON ST N
CAMBRIDGE, MN 55008
(763)689-9300

TARGET PHARMACY
215 BALSAM ST N STE 100
CAMBRIDGE, MN 55008
(763)689-3687

WAL-MART
100 WAL-MART LN
CAMBRIDGE, MN 55008
(763)689-0609

CANBY DRUG AND GIFTS
130 SAINT OLAF AVE N
CANBY, MN 56220
(507)223-5955

MAYO CLINIC HEALTH SYSTEM
1116 MILL ST W
CANNON FALLS, MN 55009
(952)653-2568

SCOFIELD DRUG AND GIFT
108 4TH ST N
CANNON FALLS, MN 55009
(507)263-2881

Minnesota Providers

Participating Pharmacies

GORDY'S PHARMACY
320 SUMMIT AVE
CENTER CITY, MN 55012
(651)257-4500

CUB
8600 114TH AVE N
CHAMPLIN, MN 55316
(763)422-8700

TARGET PHARMACY
11990 BUSINESS PARK BLVD N
CHAMPLIN, MN 55316
(763)354-1007

BYERLY'S PHARMACY
800 W 78TH ST
CHANHASSEN, MN 55317
(952)380-5970

CUB
7900 MARKET BLVD
CHANHASSEN, MN 55317
(952)934-2865

CVS
7765 GALPIN BLVD
CHANHASSEN, MN 55317
(952)474-6623

PARK NICOLLET PHCY CHANHASSEN
300 LAKE DR E
CHANHASSEN, MN 55317
(952)993-4430

TARGET PHARMACY
851 W 78TH ST
CHANHASSEN, MN 55317
(952)470-1006

CHANHASSEN CENTER DRUG
111 HUNDERTMARK RD STE 100
CHASKA, MN 55318
(952)949-1002

RAINBOW FOODS PHARMACY
200 PIONEER TRL
CHASKA, MN 55318
(952)448-9809

TARGET PHARMACY
111 PIONEER TRL
CHASKA, MN 55318
(952)361-3766

CHOSEN VALLEY PHARMACY
237 MAIN ST N
CHATFIELD, MN 55923
(507)867-4425

CHISAGO DRUG
10655 RAILROAD AVE
CHISAGO CITY, MN 55013
(651)257-4950

CASEY DRUG
121 W LAKE ST
CHISHOLM, MN 55719
(218)254-3318

KEAVENY DRUG
110 MAIN ST
CLARA CITY, MN 56222
(320)847-3784

CLARISSA DRUG
210 MAIN ST W
CLARISSA, MN 56440
(218)756-2242

LARSON DRUG
941 10TH ST
CLARKFIELD, MN 56223
(320)669-4621

THRIFTY WHITE DRUG
30 S MAIN ST
CLEARBROOK, MN 56634
(218)776-3111

COBORNS PHARMACY
705 COUNTY ROAD 75 NW
CLEARWATER, MN 55320
(320)558-2454

MEDICINE SHOPPE PHARMACY
1208 CLOQUET AVE
CLOQUET, MN 55720
(218)879-4547

MEDICINE SHOPPE PHARMACY
419 SKYLINE BLVD
CLOQUET, MN 55720
(218)879-1501

WAL-MART
1308 HWY 33 S
CLOQUET, MN 55720
(218)878-0676

WHITE DRUG
707 HIGHWAY 33 S STE 12
CLOQUET, MN 55720
(218)879-6768

KEAVENY DRUG
205 BROADWAY AVE S
COKATO, MN 55321
(320)286-5483

KEAVENY LTC PHARMACY
201 BROADWAY AVE S
COKATO, MN 55321
(320)286-5129

THRIFTY WHITE PHARMACY
400 MAIN ST
COLD SPRING, MN 56320
(320)685-7015

FAIRVIEW COLUMBIA HTS PHARMACY
4000 CENTRAL AVE NE
COLUMBIA HEIGHTS, MN 55421
(763)782-8149

COOK HOSPITAL PHARMACY
10 5TH ST SE
COOK, MN 55723
(218)666-6229

FRANKS PHARMACY
1 W VERMILLION DR
COOK, MN 55723
(218)666-5325

ALLINA HEALTH MERCY PHARMACY
11850 BLACKFOOT ST NW
COON RAPIDS, MN 55433
(763)236-7111

BLUELINE
9243 E RIVER RD NW
COON RAPIDS, MN 55433
(612)986-7827

COSTCO
12547 RIVERDALE BLVD NW
COON RAPIDS, MN 55448
(763)712-7762

CUB
12900 RIVERDALE DR
COON RAPIDS, MN 55448
(763)421-0065

CUB
2050 NORTHDALE BLVD
COON RAPIDS, MN 55433
(763)754-9036

CVS
10930 UNIVERSITY AVE NW
COON RAPIDS, MN 55448
(763)755-6316

CVS
2017 COON RAPIDS BLVD
COON RAPIDS, MN 55433
(763)757-5615

GENOA HEALTHCARE
1930 COON RAPIDS BLVD
COON RAPIDS, MN 55433
(651)583-7093

HEALTHPARTNERS COON RAPIDS
11475 ROBINSON DR NW
COON RAPIDS, MN 55433
(763)754-4603

RAINBOW FOODS PHARMACY
3340 124TH AVE NW
COON RAPIDS, MN 55433
(763)576-9343

TARGET PHARMACY
3300 124TH AVE
COON RAPIDS, MN 55433
(763)323-8402

TARGET PHARMACY
8600 SPRINGBROOK DR NW
COON RAPIDS, MN 55433
(763)785-0720

WAL-MART
13020 RIVERDALE DR.
COON RAPIDS, MN 55448
(763)421-5717

ALLINA HLTH COTTAGE GROVE PHCY
8611 W POINT DOUGLAS RD S
COTTAGE GROVE, MN 55016
(651)241-0424

CUB
8690 E POINT DOUGLAS RD
COTTAGE GROVE, MN 55016
(651)459-7324

TARGET PHARMACY
8655 E POINT DOUGLAS RD S
COTTAGE GROVE, MN 55016
(651)458-8219

HUGO'S FAMILY PHARMACY
1310 UNIVERSITY AVE
CROOKSTON, MN 56716
(218)281-3174

PRESCRIPTION SHOPPE
211 N MAIN
CROOKSTON, MN 56716
(218)281-7045

RIVERVIEW HEALTH
323 S MINNESOTA ST
CROOKSTON, MN 56716
(218)281-9420

THRIFTY WHITE DRUG
206 N MAIN ST
CROOKSTON, MN 56716
(218)281-2540

WAL-MART
1930 SAHLSTROM DR
CROOKSTON, MN 56716
(218)281-6170

CUYUNA LAKES PHARMACY
320 E MAIN ST STE 2
CROSBY, MN 56441
(218)546-2345

CUYUNA REGIONAL MED CENTER
320 E MAIN ST
CROSBY, MN 56441
(952)653-2560

GUIDEPOINT PHARMACY
20 W MAIN ST
CROSBY, MN 56441
(218)546-5144

CROSS LAKE DRUG
14311 GOULD ST STE 7
CROSSLAKE, MN 56442
(218)692-2502

CUB
5301 36TH AVE N
CRYSTAL, MN 55422
(763)287-9797

OMNICARE PHARMACY
5534 LAKELAND AVE N
CRYSTAL, MN 55429
(763)259-0188

TARGET PHARMACY
5537 W BROADWAY AVE
CRYSTAL, MN 55428
(763)533-1651

DAWSON DRUG AND GIFTS
812 6TH ST
DAWSON, MN 56232
(320)769-2229

NELSON REXALL DRUG
728 6TH ST
DAWSON, MN 56232
(320)769-2546

OTT DRUG STORE
117 MAIN AVE E
DEER RIVER, MN 56636
(218)246-8642

COBORNS PHARMACY
1400 BABCOCK BLVD E
DELANO, MN 55328
(763)972-8385

CVS
1314 BABCOCK BLVD E
DELANO, MN 55328
(763)972-3266

7 DAY CLINIC
1361 WENNER RD
DETROIT LAKES, MN 56501
(952)653-2568

CVS
329 FRAZEE ST E
DETROIT LAKES, MN 56501
(218)847-1484

DL PHARMACY
211 FRAZEE ST E
DETROIT LAKES, MN 56501
(218)847-3537

KMART PHARMACY
1305 HIGHWAY 10 W
DETROIT LAKES, MN 56501
(218)847-9755

SANFORD PHARMACY DETROIT LAKES
1245 WASHINGTON AVE
DETROIT LAKES, MN 56501
(218)846-2276

ST MARY'S HEALTH CENTER
1027 WASHINGTON AVE
DETROIT LAKES, MN 56501
(218)847-5611

WAL-MART
1583 HWY 10 WEST
DETROIT LAKES, MN 56501
(218)847-7225

WHITE DRUG
808 WASHINGTON AVE STE 29
DETROIT LAKES, MN 56501
(218)847-9248

CVS
1714 CENTER AVE W
DILWORTH, MN 56529
(218)287-5147

WAL-MART
1711 HWY 10 W
DILWORTH, MN 56529
(218)233-9833

ARROW-PASEK PHARMACY
109 N 2ND AVE W
DULUTH, MN 55802
(218)733-6800

CUB
615 W CENTRAL ENTRANCE
DULUTH, MN 55811
(218)727-3010

CVS
4528 GRAND AVE
DULUTH, MN 55807
(218)624-2820

ESSENTIA HEALTH DULTUH 1ST ST
420 E 1ST ST
DULUTH, MN 55805
(218)786-1685

ESSENTIA HEALTH DULUTH 3RD ST
400 E 3RD ST
DULUTH, MN 55805
(218)786-3137

ESSENTIA HEALTH LAKESIDE PHCY
4621 E SUPERIOR ST
DULUTH, MN 55804
(218)786-3784

ESSENTIA HEALTH LAKEWALK PHCY
1502 LONDON RD STE 101
DULUTH, MN 55812
(218)733-1110

ESSENTIA HEALTH WEST DULUTH
4212 GRAND AVE
DULUTH, MN 55807
(218)786-3700

Minnesota Providers

Participating Pharmacies

GENOA HEALTHCARE MINNESOTA
1401 E 1ST ST
DULUTH, MN 55805
(218)728-2208

KMART PHARMACY
215 N CENTRAL AVE
DULUTH, MN 55807
(218)624-9305

NORTHLAND PHARMACY
1000 E 1ST ST
DULUTH, MN 55805
(218)249-2460

NUCARA PHARMACY
324 W SUPERIOR ST
DULUTH, MN 55802
(641)366-3440

SHOPKO PHARMACY
801 W CENTRAL ENTRANCE
DULUTH, MN 55811
(218)727-7139

ST MARY'S MEDICAL CENTER
407 E 3RD ST
DULUTH, MN 55805
(952)653-2568

TARGET PHARMACY
1902 MILLER TRUNK HWY
DULUTH, MN 55811
(218)727-8475

THRIFTY WHITE PHARMACY
202 N CENTRAL AVE
DULUTH, MN 55807
(218)624-5773

KMART PHARMACY
404 SCHILLING DR
DUNDAS, MN 55019
(507)645-5855

BYERLY'S PHARMACY
1299 PROMENADE PL
EAGAN, MN 55121
(651)209-2974

CUB
1020 DIFFLEY RD
EAGAN, MN 55123
(651)452-5500

CUB PHARMACY
1940 CLIFF LAKE RD
EAGAN, MN 55122
(651)454-5150

CVS
4241 JONNY CAKE RD
EAGAN, MN 55122
(651)688-7041

FAIRVIEW EAGAN PHARMACY
1440 DUCKWOOD DR
EAGAN, MN 55122
(651)406-8980

INFUSCIENCE
2915 WATERS RD STE 110
EAGAN, MN 55121
(612)486-1960

PARK NICOLLET PHCY EAGAN
1885 PLAZA DR
EAGAN, MN 55122
(952)993-4004

RAINBOW FOODS PHARMACY
1276 TOWNE CENTRE DR
EAGAN, MN 55123
(651)452-5663

SAM'S CLUB
3035 DENMARK AVE
EAGAN, MN 55121
(651)405-3879

TARGET PHARMACY
2000 CLIFF LAKE RD
EAGAN, MN 55122
(651)688-8947

WAL-MART
1360 TOWN CENTRE DR
EAGAN, MN 55123
(651)686-7431

HUGO'S FAMILY PHARMACY
224 14TH ST NE
EAST GRAND FORKS, MN 56721
(218)773-0611

SHOPKO PHARMACY
421 GATEWAY DR NE
EAST GRAND FORKS, MN 56721
(218)773-0940

ALIXA RX
10132 W 76TH ST
EDEN PRAIRIE, MN 55344
(877)322-4292

COSTCO
12011 TECHNOLOGY DR
EDEN PRAIRIE, MN 55344
(952)943-4828

CUB
8015 DEN RD
EDEN PRAIRIE, MN 55344
(952)941-6728

CVS
8251 COLUMBINE RD
EDEN PRAIRIE, MN 55344
(952)941-1266

FAIRVIEW EDEN PRAIRIE PHCY
830 PRAIRIE CENTER DR
EDEN PRAIRIE, MN 55344
(952)826-6680

HEALTHPARTNERS
9700 W 76TH ST STE A
EDEN PRAIRIE, MN 55344
(952)833-0499

RAINBOW FOODS PHARMACY
970 PRAIRIE CENTER DR
EDEN PRAIRIE, MN 55344
(952)934-5520

REDPHARM DRUG
6501 CITY WEST PKWY
EDEN PRAIRIE, MN 55344
(952)653-2525

SOUTH LAKE PEDIATRICS
800 PRAIRIE CENTER DR
EDEN PRAIRIE, MN 55344
(952)653-2568

TARGET PHARMACY
8225 FLYING CLOUD DR
EDEN PRAIRIE, MN 55344
(952)944-8720

WAL-MART
12195 SINGLETREE LANE
EDEN PRAIRIE, MN 55344
(952)829-9030

ADVANCED SPINE AND PAIN
7373 FRANCE AVE S STE 606
EDINA, MN 55435
(612)207-7463

BYERLY'S PHARMACY
7171 FRANCE AVE S
EDINA, MN 55435
(952)277-8663

CUB
6775 YORK AVE S
EDINA, MN 55435
(952)925-3911

CVS
6905 YORK AVE S
EDINA, MN 55435
(952)920-0126

FAIRVIEW EDINA PHARMACY
6363 FRANCE AVE S
EDINA, MN 55435
(952)924-1400

FAIRVIEW SOUTHDALE MED PHCY
6545 FRANCE AVE S STE 100
EDINA, MN 55435
(952)924-1499

FAIRVIEW SOUTHDALE PHARMACY
6401 FRANCE AVE S
EDINA, MN 55435
(612)924-5160

LUNDS PHARMACY
3945 W 50TH ST
EDINA, MN 55424
(952)224-9880

TARGET PHARMACY
7000 YORK AVE S
EDINA, MN 55435
(952)925-4250

TRUMM DRUG ELBOW LAKE CLINIC
930 1ST ST NE
ELBOW LAKE, MN 56531
(218)685-9988

TRUMM DRUG-ELBOW LAKE
11 CENTRAL AVE S
ELBOW LAKE, MN 56531
(218)685-4471

COBORNS PHARMACY
19425 EVANS ST NW
ELK RIVER, MN 55330
(763)441-0804

CUB
19216 FREEPORT ST
ELK RIVER, MN 55330
(763)241-8112

FAIRVIEW NORTHLAND PHCY ELK RV
290 MAIN ST NW
ELK RIVER, MN 55330
(763)241-5890

GOODRICH PHARMACY
530 3RD ST NW
ELK RIVER, MN 55330
(763)441-0764

KEMPER DRUG
323 JACKSON AVE NW
ELK RIVER, MN 55330
(763)441-1353

WAL-MART
18185 ZANE ST
ELK RIVER, MN 55330
(763)441-5332

ELY COMMUNITY PHARMACY
328 W CONAN ST
ELY, MN 55731
(218)365-8788

SHOPKO PHARMACY
1500 E SHERIDAN ST
ELY, MN 55731
(218)365-7123

JON'S DRUG
318 GRANT AVE
EVELETH, MN 55734
(218)744-2774

CUB
23800 HIGHWAY 7
EXCELSIOR, MN 55331
(952)401-3990

HY-VEE PHARMACY
907 S STATE ST
FAIRMONT, MN 56031
(507)238-2880

J AND R DRUG GIFT AND FLORAL
107 DOWNTOWN PLZ
FAIRMONT, MN 56031
(507)235-9719

SHOPKO PHARMACY
1001 HIGHWAY 15 S
FAIRMONT, MN 56031
(507)238-9488

STERLING DRUG
322 S STATE ST
FAIRMONT, MN 56031
(507)238-2797

WAL-MART
1250 GOEMANN RD
FAIRMONT, MN 56031
(507)235-2517

HEALTHCARE CAMPUS PHARMACY ONE
200 STATE AVE
FARIBAULT, MN 55021
(507)332-4797

HY-VEE PHARMACY
1920 GRANT ST
FARIBAULT, MN 55021
(507)334-1555

STERLING DRUG
430 2ND AVE NW
FARIBAULT, MN 55021
(507)333-5464

WAL-MART
150 WESTERN AVE
FARIBAULT, MN 55021
(507)332-0084

CVS
19605 PILOT KNOB RD
FARMINGTON, MN 55024
(651)463-3693

ECONOFOODS PHARMACY
115 ELM ST
FARMINGTON, MN 55024
(651)460-6160

KMART PHARMACY
1403 W LINCOLN AVE
FERGUS FALLS, MN 56537
(218)739-2670

LAKE REGION HEALTHCARE
712 S CASCADE ST
FERGUS FALLS, MN 56538
(218)736-8000

SHOPKO PHARMACY
226 E LINCOLN AVE
FERGUS FALLS, MN 56537
(218)736-7531

SUN MART PHARMACY
1205 W LINCOLN AVE
FERGUS FALLS, MN 56537
(218)739-3259

THRIFTY WHITE DRUG
107 E LINCOLN AVE
FERGUS FALLS, MN 56537
(218)736-5565

THRIFTY WHITE DRUG
615 S MILL ST
FERGUS FALLS, MN 56537
(218)736-5770

WAL-MART
3300 HWY 210 W
FERGUS FALLS, MN 56537
(218)739-5559

THRIFTY WHITE DRUG
203 MILL ST N
FERTILE, MN 56540
(218)945-6174

COBORNS PHARMACY
161 GLENN ST
FOLEY, MN 56329
(320)968-8625

FOLEY DRUG
351 DEWEY ST
FOLEY, MN 56329
(320)968-7272

CUB
2013 BROADWAY AVE W
FOREST LAKE, MN 55025
(651)982-4603

ROLSETH DRUG
107 LAKE ST N
FOREST LAKE, MN 55025
(651)464-2114

TARGET PHARMACY
356 12TH ST SW
FOREST LAKE, MN 55025
(651)464-1994

THRIFTY WHITE DRUG
808 S LAKE ST
FOREST LAKE, MN 55025
(651)464-5518

WAL-MART
200 SW 12TH ST
FOREST LAKE, MN 55025
(651)464-9742

FIRST CARE MEDICAL SERVICES
900 HILLIGOSS BLVD SE
FOSSTON, MN 56542
(952)653-2568

NORD'S LONG TERM CARE PHARMACY
115 JOHNSON AVE N STE A
FOSSTON, MN 56542
(218)435-6646

Minnesota Providers

Participating Pharmacies

NORD'S PHARMACY AND GIFTS
115 JOHNSON AVE N
FOSSTON, MN 56542
(218)435-6646

SEIP DRUG
101 E MAIN ST
FRAZEE, MN 56544
(218)334-3070

ALLINA HEALTH UNITY PHARMACY
550 OSBORNE RD
FRIDLEY, MN 55432
(763)236-4111

CUB
246 57TH AVE NE
FRIDLEY, MN 55432
(763)586-9184

CVS
5696 UNIVERSITY AVE
FRIDLEY, MN 55432
(763)571-2081

GOODRICH PHARMACY
480 OSBORNE RD STE 180
FRIDLEY, MN 55432
(763)780-0222

PHARMERICA
5255 E RIVER RD STE 204
FRIDLEY, MN 55421
(763)571-2220

SAM'S CLUB
8150 UNIVERSITY AVE NE
FRIDLEY, MN 55432
(763)792-6653

TARGET PHARMACY
755 53RD AVE NE
FRIDLEY, MN 55421
(763)571-9766

WAL-MART
8450 UNIVERSITY AVE NE
FRIDLEY, MN 55432
(763)780-9500

GUIDE POINT PHARMACY
115 N ST PAUL AVE
FULDA, MN 56131
(507)425-3166

GARRISON CLINIC
27278 STATE HIGHWAY 18
GARRISON, MN 56450
(320)525-3401

GARRISON DRUG
27378 STATE HIGHWAY 18
GARRISON, MN 56450
(320)692-5858

FIRST CHOICE PHARMACY
660 3RD ST
GAYLORD, MN 55334
(507)237-2933

COBORNS PHARMACY
2211 11TH ST E
GLENCOE, MN 55336
(320)864-5192

GLENCOE REGIONAL HEALTH SVCS
1805 HENNEPIN AVE N
GLENCOE, MN 55336
(320)864-3121

SHOPKO PHARMACY
3225 10TH ST E
GLENCOE, MN 55336
(320)864-5026

GLACIAL RIDGE HOSPITAL
10 4TH AVE SE
GLENWOOD, MN 56334
(952)653-2568

SHOPKO PHARMACY
710 COUNTY ROAD 21 S
GLENWOOD, MN 56334
(320)634-4399

TRUMM DRUG GLENWOOD
1 MINNESOTA AVE E
GLENWOOD, MN 56334
(320)634-4434

LIEBE DRUG
318 STUDDART AVE
GRACEVILLE, MN 56240
(320)748-7112

ARROWHEAD PHARMACY
21 W HIGHWAY 61
GRAND MARAIS, MN 55604
(218)387-1133

GRAND MARAIS PHARMACY
425 W HIGHWAY 61
GRAND MARAIS, MN 55604
(218)387-2110

CUB
2410 S POKEGAMA AVE
GRAND RAPIDS, MN 55744
(218)326-9089

GLOBE DRUG AND MEDICAL EQUIP
304 N POKEGAMA AVE
GRAND RAPIDS, MN 55744
(218)326-2635

GRAND ITASCA CLINIC AND HOSP
1601 GOLF COURSE RD
GRAND RAPIDS, MN 55744
(952)653-2568

KMART PHARMACY
1111 S POKEGAMA AVE
GRAND RAPIDS, MN 55744
(218)326-0593

REED DRUG
417 NW 1ST AVE
GRAND RAPIDS, MN 55744
(218)326-3453

TARGET PHARMACY
2140 S HIGHWAY 169
GRAND RAPIDS, MN 55744
(218)326-6412

THRIFTY WHITE DRUG
2026 POKEGAMA AVE S
GRAND RAPIDS, MN 55744
(218)326-9431

WAL-MART
1400 S POKEGAMA AVE
GRAND RAPIDS, MN 55744
(218)326-9401

THRIFTY WHITE DRUG
760 PRENTICE ST
GRANITE FALLS, MN 56241
(320)564-2339

GREENBUSH PHARMACY
152 MAIN ST N
GREENBUSH, MN 56726
(218)782-2366

NOVACEK HEALTHMART PHARMACY
122 HIGHWAY 11 E
GREENBUSH, MN 56726
(218)782-3456

ST JOSEPH MEDICAL CENTER
110 3RD ST S
HACKENSACK, MN 56452
(952)653-2568

ANDERSON PHARMACY
115 2ND ST
HALLOCK, MN 56728
(218)843-2205

STERLING
44 MAIN AVE N
HARMONY, MN 55939
(507)886-2322

COBORNS PHARMACY
225 33RD ST W
HASTINGS, MN 55033
(651)437-6716

CUB
1729 MARKET BLVD
HASTINGS, MN 55033
(651)438-2135

REGINA MEDICAL CENTER
1175 NININGER RD
HASTINGS, MN 55033
(952)480-4100

REGINA MEDICAL CENTER PHARMACY
1175 NININGER RD
HASTINGS, MN 55033
(651)480-4261

STERLING
1399 S FRONTAGE RD
HASTINGS, MN 55033
(651)438-7960

WAL-MART
1752 N FRONTAGE RD
HASTINGS, MN 55033
(651)438-3030

WAHL DRUG
1515 HARTFORD ST
HAWLEY, MN 56549
(218)483-3324

SIVERSON PHARMACY
118 S MAIN ST
HENDRICKS, MN 56136
(507)275-3323

SEIP DRUG
519 DOUGLAS AVE
HENNING, MN 56551
(218)583-2773

HERMAN CLINIC PHARMACY
204 5TH ST E
HERMAN, MN 56248
(320)677-2220

ESSENTIA HEALTH HERMANTOWN
4855 W ARROWHEAD RD
HERMANTOWN, MN 55811
(218)786-3549

SAM'S CLUB
4743 MAPLE GROVE RD
HERMANTOWN, MN 55811
(218)279-2858

WAL-MART
4740 MALL DR
HERMANTOWN, MN 55811
(218)727-4625

BARONS PHARMACY
3605 MAYFAIR AVE
HIBBING, MN 55746
(218)263-4922

BARON'S PHARMACY
1120 E 34TH ST
HIBBING, MN 55746
(218)263-7455

DULUTH CLINIC HIBBING PHARMACY
730 E 34TH ST
HIBBING, MN 55746
(218)262-5225

THRIFTY WHITE DRUG
1101 E 37TH ST
HIBBING, MN 55746
(218)262-6140

WAL-MART
12080 HWY 169
HIBBING, MN 55746
(218)262-3419

HINCKLEY DRUG
121 MAIN ST E
HINCKLEY, MN 55037
(320)384-6166

HOPKINS CENTER DRUG
913 HOPKINS CTR
HOPKINS, MN 55343
(952)938-2719

HOWARD LAKE DRUG COMPANY
732 6TH ST
HOWARD LAKE, MN 55349
(320)543-2141

MESABA DRUG
221 KENNEDY MEMORIAL DR
HOYT LAKES, MN 55750
(218)225-2128

FAIRVIEW HUGO PHARMACY
14712 VICTOR HUGO BLVD
HUGO, MN 55038
(651)466-1970

CASH WISE PHARMACY
1020 HIGHWAY 15 S
HUTCHINSON, MN 55350
(320)587-8070

FAMILY PHARMACY
3 CENTURY AVE SE
HUTCHINSON, MN 55350
(320)587-3638

FAMILY REXALL DRUG
237 HASSAN ST SE
HUTCHINSON, MN 55350
(320)587-2509

HUTCHINSON HOSPITAL
1095 HIGHWAY 15 S
HUTCHINSON, MN 55350
(320)234-5000

REGIONAL EYE SPECIALISTS PA
1455 MONTREAL ST SE
HUTCHINSON, MN 55350
(952)653-2568

SHOPKO PHARMACY
125 MAIN ST N
HUTCHINSON, MN 55350
(320)587-4941

TARGET PHARMACY
1370 HIGHWAY 15 S
HUTCHINSON, MN 55350
(320)587-9576

WAL-MART
1300 TRUNK HWY 15 S
HUTCHINSON, MN 55350
(320)587-1023

CITY HEALTH MART DRUG
314 3RD ST
INTL FALLS, MN 56649
(218)283-3061

ESSENTIA HEALTH INTL FALLS
2501 KEENAN DR
INTL FALLS, MN 56649
(218)285-6222

FALLS MEMORIAL HOSPITAL
1400 HIGHWAY 71
INTL FALLS, MN 56649
(218)283-5449

KMART PHARMACY
1606 HWY 11 71
INTL FALLS, MN 56649
(218)283-3246

CUB
7850 CAHILL AVE
INVER GROVE, MN 55076
(651)450-0676

HEALTHPARTNERS INVER GROVE
5625 CENEX DR
INVER GROVE, MN 55077
(651)552-2603

TARGET PHARMACY
7841 AMANA TRL
INVER GROVE, MN 55077
(651)234-2950

WAL-MART
9165 CAHILL AVE
INVER GROVE HTS, MN 55076
(651)451-7860

LAKE COUNTRY DRUG AND GIFTS
205 W MAIN ST
ISLE, MN 56342
(320)676-3115

IVANHOE FAMILY PHARMACY
366 E GEORGE ST STE 1
IVANHOE, MN 56142
(507)694-1166

SHOPKO PHARMACY
506 2ND ST
JACKSON, MN 56143
(507)847-3161

THRONDSET PHARMACY
908 HIGHWAY 71 N
JACKSON, MN 56143
(507)847-3282

CAHILL PHARMACY
131 N MAIN ST
JANESVILLE, MN 56048
(507)231-6372

KEAVENY DRUG
255 CREEK LN S
JORDAN, MN 55352
(952)458-3334

Minnesota Providers

Participating Pharmacies

THRIFTY WHITE DRUG
101 CLEVELAND AVE E
KARLSTAD, MN 56732
(218)436-2438

KASSON DRUG
408 W MAIN ST
KASSON, MN 55944
(507)634-3341

BERGH PHARMACY
103 REDWING AVE
KENYON, MN 55946
(507)789-5202

STERLING
306 MAIN ST STE 103
LA CRESCENT, MN 55947
(507)895-8784

KENNEDY SNYDER DRUG
223 S LAKESHORE DR
LAKE CITY, MN 55041
(651)345-3411

LAKE CRYSTAL FAMILY PRACTICE
221 S MURPHY ST
LAKE CRYSTAL, MN 56055
(952)653-2568

LAKE ELMO PHARMACY
11240 STILLWATER BLVD N
LAKE ELMO, MN 55042
(651)773-0889

THRIFTY WHITE DRUG
2040 2ND ST
LAKE PARK, MN 56544
(218)238-6642

THRONDSET PHARMACY
326 MAIN ST
LAKEFIELD, MN 56150
(507)662-5908

CUB
20250 HERITAGE DR
LAKEVILLE, MN 55044
(952)469-8404

CUB
7435 179TH ST
LAKEVILLE, MN 55044
(952)891-5050

CVS
17665 KENWOOD TRL
LAKEVILLE, MN 55044
(952)435-3784

CVS
17578 DODD BLVD
LAKEVILLE, MN 55044
(952)432-8770

ERICKSON DRUG
20751 HOLYOKE AVE #808
LAKEVILLE, MN 55044
(952)469-2964

RAINBOW FOODS PHARMACY
17756 KENWOOD TRL
LAKEVILLE, MN 55044
(952)892-4505

TARGET PHARMACY
18275 KENRICK AVE
LAKEVILLE, MN 55044
(952)892-5454

WAL-MART
20710 KEOKUK AVE
LAKEVILLE, MN 55044
(612)354-5934

CORNER DRUG HEALTH MART
204 VALLEY GREEN SQ
LE SUEUR, MN 56058
(507)665-3301

LINDSTROM THRIFTY WHITE PHCY
30699 LINCOLN RD
LINDSTROM, MN 55045
(651)257-4074

FAIRVIEW LAKES PHCY LINO LAKES
7455 VILLAGE DR
LINO LAKES, MN 55014
(651)717-3401

TARGET PHARMACY
749 APOLLO DR
LINO LAKES, MN 55014
(651)784-7618

ECONOFOODS PHARMACY
951 E FRONTAGE RD
LITCHFIELD, MN 55355
(320)693-3261

MEDICINE SHOPPE PHARMACY
329 E HIGHWAY 12
LITCHFIELD, MN 55355
(320)693-9314

WAL-MART
2301 E FRONTAGE RD
LITCHFIELD, MN 55355
(320)693-2004

CVS
2650 RICE ST
LITTLE CANADA, MN 55117
(651)484-0504

COBORNS PHARMACY
1105 2ND AVE N
LITTLE FALLS, MN 56345
(320)632-2380

ST GABRIEL'S HOSPITAL
815 2ND ST SE
LITTLE FALLS, MN 56345
(320)632-1172

WAL-MART
15091 18TH ST NE
LITTLE FALLS, MN 56345
(320)632-3644

LITTLEFORK MEDICAL CENTER PHCY
912 MAIN ST
LITTLEFORK, MN 56653
(218)278-6634

COBORNS PHARMACY
645 LAKE ST S
LONG PRAIRIE, MN 56347
(320)732-2915

LONG PRAIRIE THRIFTYWHITE PHCY
244 CENTRAL AVE
LONG PRAIRIE, MN 56347
(320)732-3228

GUIDEPOINT PHARMACY
1472 CITY RD 4
LONGVILLE, MN 56655
(218)363-2640

LONGVILLE LAKES CLINIC
180 JORDAN LN
LONGVILLE, MN 56655
(218)363-3300

HERRMANN THRIFTY WHITE PHCY
744 ASH ST NE
LONSDALE, MN 55046
(507)744-3373

LEWIS FAMILY DRUG
202 KNISS AVE S
LUVERNE, MN 56156
(507)283-9549

SHOPKO PHARMACY
405 W INTERSTATE DR
LUVERNE, MN 56156
(507)283-2156

WANZEK PHARMACY
12 W MAIN ST
MADELIA, MN 56062
(507)642-3218

THRIFTY WHITE DRUG
205 6TH AVE
MADISON, MN 56256
(320)598-3864

THRIFTY WHITE DRUG
113 N MAIN ST
MAHNOMEN, MN 56557
(218)935-2525

CUB
1800 MADISON AVE
MANKATO, MN 56001
(507)625-1241

CUB
1200 S RIVERFRONT DR
MANKATO, MN 56001
(507)345-5066

CVS
1175 MADISON AVE
MANKATO, MN 56001
(507)625-1791

CVS
1610 MONKS AVE
MANKATO, MN 56001
(507)625-1553

HEALTH SERVICES PHARMACY
21 CARKOSKI COMMONS
MANKATO, MN 56001
(507)389-2483

HY-VEE PHARMACY
410 S RIVER FRONT DR
MANKATO, MN 56001
(507)345-5091

HY-VEE PHARMACY
2010 ADAMS ST
MANKATO, MN 56001
(507)625-7565

MANKATO CLINIC
1230 E MAIN ST
MANKATO, MN 56001
(952)653-2568

MANKATO CLINIC ON ADAMS STREET
1809 ADAMS ST
MANKATO, MN 56001
(952)653-2568

MANKATO CLINIC WICKERSHAM
1421 PREMIER DR
MANKATO, MN 56001
(952)653-2568

SHOPKO PHARMACY
1850 E MADISON AVE
MANKATO, MN 56001
(507)387-6515

TARGET PHARMACY
1850 ADAMS ST
MANKATO, MN 56001
(507)625-9009

WAL-MART
1881 MADISON AVE
MANKATO, MN 56001
(507)625-1660

WAL-MART
1831 MADISON AVE
MANKATO, MN 56001
(507)387-4205

BYERLY'S PHARMACY
12880 ELM CREEK BLVD N
MAPLE GROVE, MN 55369
(763)420-3005

COSTCO
11330 FOUNTAINS DR N
MAPLE GROVE, MN 55369
(763)494-8059

CUB PHARMACY
8150 WEDGEWOOD LN
MAPLE GROVE, MN 55369
(763)494-8357

CVS
6300 WEDGWOOD RD
MAPLE GROVE, MN 55311
(763)551-1215

FAIRVIEW PHARMACY MAPLE GROVE
14500 99TH AVE N
MAPLE GROVE, MN 55369
(763)898-1800

MAPLE GROVE HOSPITAL
9875 HOSPITAL DR
MAPLE GROVE, MN 55369
(952)653-2568

NORTH MEMORIAL PHARMACY
9825 HOSPITAL DR STE 100
MAPLE GROVE, MN 55369
(763)581-9200

PARK NICOLLET PHCY MAPLE GROVE
15800 95TH AVE N
MAPLE GROVE, MN 55369
(952)993-2200

RAINBOW FOODS PHARMACY
16401 COUNTY RD 30
MAPLE GROVE, MN 55311
(763)416-1563

SAM'S CLUB
16701 94TH AVE N
MAPLE GROVE, MN 55311
(763)416-5930

SOUTH LAKE PEDIATRICS
12000 ELM CREEK BLVD N
MAPLE GROVE, MN 55369
(952)653-2568

THRIFTY WHITE DRUG
6901 E FISH LAKE RD
MAPLE GROVE, MN 55369
(763)463-4400

WAL-MART
9451 DUNKIRK LANE NO
MAPLE GROVE, MN 55311
(763)416-2300

COSTCO
1431 BEAM AVE
MAPLEWOOD, MN 55109
(612)486-1747

CUB
2390 WHITE BEAR AVE N
MAPLEWOOD, MN 55109
(651)777-3113

CUB
100 COUNTY ROAD B W
MAPLEWOOD, MN 55117
(651)489-6271

CVS
2196 WHITE BEAR AVE N
MAPLEWOOD, MN 55109
(651)704-0322

GUERTIN PHARMACY
21 CENTURY AVE S
MAPLEWOOD, MN 55119
(651)735-8781

HEALTHPARTNERS
2165 WHITE BEAR AVE N
MAPLEWOOD, MN 55109
(651)523-9820

MN CANCER CARE PHARMACY
1580 BEAM AVE
MAPLEWOOD, MN 55109
(651)255-8480

HY-VEE PHARMACY
1240 E COLLEGE DR
MARSHALL, MN 56258
(507)537-1230

HY-VEE PHARMACY
900 E MAIN ST
MARSHALL, MN 56258
(507)532-2556

KMART PHARMACY
1001 N HIGHWAY 23 BYP
MARSHALL, MN 56258
(507)532-4379

SHOPKO PHARMACY
1200 SUSAN DR
MARSHALL, MN 56258
(507)537-9650

THRIFTY WHITE DRUG
321 W MAIN ST
MARSHALL, MN 56258
(507)532-5754

WAL-MART
1221 E MAIN ST
MARSHALL, MN 56258
(507)532-9150

THRIFTY WHITE PHARMACY
241 W HIGHWAY 210
MCGREGOR, MN 55760
(218)768-4165

TARGET PHARMACY
300 HIGHWAY 55
MEDINA, MN 55340
(763)852-0007

COBORN'S PHARMACY
105 E MAIN ST
MELROSE, MN 56352
(320)256-4452

MELROSE PHARMACY
611 W MAIN ST
MELROSE, MN 56352
(320)256-7292

MEDICINE SHOPPE PHARMACY
750 MAIN ST STE 103
MENDOTA HEIGHTS, MN 55118
(651)455-6873

Minnesota Providers

Participating Pharmacies

FAIRVIEW NORTHLAND PHCY-MILACA
115 2ND AVE SW
MILACA, MN 56353
(320)983-3191

THRIFTY WHITE DRUG
127 2ND AVE SW
MILACA, MN 56353
(320)982-3300

ABBOTT NW HOSPITAL ED
800 E 28TH ST
MINNEAPOLIS, MN 55407
(612)863-4233

ALLINA HEALTH HEART HOSPITAL
920 E 28TH ST STE 92005
MINNEAPOLIS, MN 55407
(612)775-3100

ALLINA HEALTH MIDTOWN PHARMACY
2545 CHICAGO AVE STE 120
MINNEAPOLIS, MN 55404
(612)863-4190

ALLINA HEALTH PHILLIPS EYE
2215 PARK AVE S
MINNEAPOLIS, MN 55404
(612)775-8896

ALLINA HEALTH PIPER BLD PHCY
913 E 26TH ST
MINNEAPOLIS, MN 55404
(612)863-5370

BANADIR PHARMACY
405 E LAKE ST
MINNEAPOLIS, MN 55408
(612)825-1669

CHILDRENS HOSP AND CLINICS
2525 CHICAGO AVE
MINNEAPOLIS, MN 55404
(612)813-6210

CHILDREN'S HOSPITAL AND CLINIC
2530 CHICAGO AVE
MINNEAPOLIS, MN 55404
(612)813-7290

CUB
5937 NICOLLET AVE
MINNEAPOLIS, MN 55419
(612)866-9921

CUB
2850 26TH AVE S
MINNEAPOLIS, MN 55406
(612)721-5840

CUB
701 W BROADWAY AVE
MINNEAPOLIS, MN 55411
(612)302-8740

CVS
1110 HENNEPIN AVE
MINNEAPOLIS, MN 55403
(612)338-5867

CVS
1010 W LAKE ST
MINNEAPOLIS, MN 55408
(612)822-1297

CVS
2001 NICOLLET AVE
MINNEAPOLIS, MN 55404
(612)872-2656

CVS
3655 CENTRAL AVE NE
MINNEAPOLIS, MN 55418
(612)789-2460

CVS
2426 W BROADWAY AVE
MINNEAPOLIS, MN 55411
(612)287-0140

CVS
949 PORTLAND AVE
MINNEAPOLIS, MN 55404
(612)332-9647

CVS
316 15TH AVE SE
MINNEAPOLIS, MN 55414
(612)331-3252

CVS
880 WASHINGTON AVE SE
MINNEAPOLIS, MN 55414
(612)331-4240

DEGDEG'S CAREPOINT PHARMACY
2711 E FRANKLIN AVE
MINNEAPOLIS, MN 55406
(612)341-2273

FAIRVIEW HIAWATHA PHARMACY
3809 S 42ND AVE
MINNEAPOLIS, MN 55406
(612)728-7180

FAIRVIEW HOME INFUSION
711 KASOTA AVE SE STE B
MINNEAPOLIS, MN 55414
(651)672-2233

FAIRVIEW NORTHEAST PHARMACY
2847 JOHNSON ST NE
MINNEAPOLIS, MN 55418
(612)789-7277

FAIRVIEW PHARMACY
425 E RIVER RD UNIT KE
MINNEAPOLIS, MN 55455
(612)273-6212

FAIRVIEW PHCY SMILEY'S CLINIC
2020 E 28TH ST
MINNEAPOLIS, MN 55407
(612)672-4020

FAIRVIEW PHRMCY UNIV VILLAGE
2545 UNIVERSITY AVE SE
MINNEAPOLIS, MN 55414
(612)672-1430

FAIRVIEW RIVERSIDE MED CTR
2450 RIVERSIDE AVE
MINNEAPOLIS, MN 55082
(612)672-4200

FAIRVIEW RIVERSIDE PHARMACY
606 24TH AVE S
MINNEAPOLIS, MN 55454
(612)672-7507

FAIRVIEW SPECIALTY SVCS PHCY
711 KASOTA AVE SE
MINNEAPOLIS, MN 55414
(612)672-5260

FAIRVIEW UNIV CLINIC PHCY
516 DELAWARE ST SE
MINNEAPOLIS, MN 55455
(612)626-2828

FAIRVIEW UNIV DISCHARGE PHCY
500 HARVARD ST SE
MINNEAPOLIS, MN 55455
(612)273-2121

FAIRVIEW UNIV MASONIC PHARMACY
424 HARVARD ST SE STE 300
MINNEAPOLIS, MN 55455
(612)626-6429

HCMC P1 PHARMACY
701 PARK AVE S
MINNEAPOLIS, MN 55415
(612)873-3220

HEALTHPARTNERS
2220 RIVERSIDE AVE
MINNEAPOLIS, MN 55454
(612)341-5103

HIKMA PHARMACY
615 CEDAR AVE S
MINNEAPOLIS, MN 55454
(612)315-3678

KMART PHARMACY
10 W LAKE ST
MINNEAPOLIS, MN 55408
(612)827-5309

LAKE CEDAR PHARMACY
2423 E FRANKLIN AVE
MINNEAPOLIS, MN 55406
(512)353-5297

LUNDS PHARMACY
55 UNIVERSITY AVE SE
MINNEAPOLIS, MN 55414
(612)548-3835

NORTH POINT HLTH WELLNESS CTR
1313 N PENN AVE
MINNEAPOLIS, MN 55411
(612)543-2533

NORTHSIDE COMMUNITY HEALTHMART
1501 LOWRY AVE N
MINNEAPOLIS, MN 55411
(612)345-7842

PARK NICOLLET PHCY MINNEAPOLIS
2001 BLAISDELL AVE S
MINNEAPOLIS, MN 55404
(952)993-8004

PHARMA LIFE MINNESOTA
1200 NICOLLET MALL
MINNEAPOLIS, MN 55403
(612)354-3400

RAINBOW FOODS PHARMACY
1540 NEW BRIGHTON BLVD
MINNEAPOLIS, MN 55413
(612)788-4246

RAINBOW FOODS PHARMACY
1104 LAGOON AVE
MINNEAPOLIS, MN 55408
(612)821-0547

ROSS WEST BANK PHARMACY
327 CEDAR AVE S
MINNEAPOLIS, MN 55454
(612)333-6328

SCHNEIDER DRUG
3400 UNIVERSITY AVE SE
MINNEAPOLIS, MN 55414
(612)379-7232

TARGET PHARMACY
900 NICOLLET MALL
MINNEAPOLIS, MN 55403
(612)338-5215

TARGET PHARMACY
100 NICOLLET MALL PHARMACY
MINNEAPOLIS, MN 55403
(612)354-5914

TARGET PHARMACY
1650 NEW BRIGHTON BLVD
MINNEAPOLIS, MN 55413
(612)781-7746

TARGET PHARMACY
2500 E LAKE ST
MINNEAPOLIS, MN 55406
(612)721-1611

BYERLY'S PHARMACY
13081 RIDGEDALE DR
MINNETONKA, MN 55305
(952)417-0322

CUB
4801 COUNTY ROAD 101
MINNETONKA, MN 55345
(952)935-1053

PARK NICOLLET PHCY CARLSON
15111 TWELVE OAKS CTR DR
MINNETONKA, MN 55305
(952)993-4643

SOUTH LAKE PEDIATRICS
6060 CLEARWATER DR
MINNETONKA, MN 55343
(952)653-2568

SOUTH LAKE PEDS
17705 HUTCHINS DR
MINNETONKA, MN 55345
(952)401-8300

TARGET PHARMACY
13201 RIDGEDALE DR
MINNETONKA, MN 55305
(952)542-8266

TARGET PHARMACY
4802 HIGHWAY 101
MINNETONKA, MN 55345
(952)401-3814

COBORNS PHARMACY
1409 E HIGHWAY 7
MONTEVIDEO, MN 56265
(320)269-0940

THRIFTY WHITE DRUG
1234 E HIGHWAY 7
MONTEVIDEO, MN 56265
(320)269-6412

WAL-MART
2202 E HWY 7
MONTEVIDEO, MN 56265
(320)269-5496

HERRMANN THRIFTY WHITE
120 1ST ST S
MONTGOMERY, MN 56069
(507)364-7717

CENTRACARE HEALTH - MONTICELLO
1013 HART BLVD
MONTICELLO, MN 55362
(763)271-2251

CUB
216 7TH ST W
MONTICELLO, MN 55362
(763)295-6159

MONTICELLO BIG LAKE COMM HOSP
1013 HART BLVD
MONTICELLO, MN 55362
(763)295-2945

TARGET PHARMACY
1447 E 7TH ST
MONTICELLO, MN 55362
(763)271-1101

WAL-MART
9320 CEDAR ST
MONTICELLO, MN 55362
(763)295-9813

7 DAY CLINIC
720 MAIN AVE
MOORHEAD, MN 56560
(952)653-2568

CASH WISE PHARMACY
3300 HIGHWAY 10 E
MOORHEAD, MN 56560
(218)236-0345

CVS
822 30TH AVE S
MOORHEAD, MN 56560
(218)236-0807

HENDRIX HEALTH CENTER PHCY
1308 9TH AVE S
MOORHEAD, MN 56563
(218)477-5875

KMART PHARMACY
3000 HIGHWAY 10 E
MOORHEAD, MN 56560
(218)236-5267

MEDICAL PHARMACY MOORHEAD
101 S 11TH ST S
MOORHEAD, MN 56560
(218)233-7365

MOORHEAD DRUG CO
420 CENTER AVE STE 12
MOORHEAD, MN 56560
(218)233-1529

SANFORD PHARMACY MOORHEAD
1301 S 8TH ST
MOORHEAD, MN 56560
(701)234-3250

SUN MART PHARMACY
2605 8TH ST S
MOORHEAD, MN 56560
(218)291-0242

TARGET PHARMACY
3301 HIGHWAY 10 E
MOORHEAD, MN 56560
(218)233-2953

THRIFTY WHITE DRUG
4570 COUNTY HWY 61
MOOSE LAKE, MN 55767
(218)485-2111

Minnesota Providers

Participating Pharmacies

THRIFTY WHITE DRUG
441 N ARROWHEAD LN
MOOSE LAKE, MN 55767
(218)485-4401

COBORNS PHARMACY
710 FRANKIE LN
MORA, MN 55051
(320)679-2363

SHOPKO PHARMACY
340 HIGHWAY 65 S
MORA, MN 55051
(320)679-5115

CITY CENTER DRUG
618 ATLANTIC AVE
MORRIS, MN 56267
(320)589-1100

SHOPKO PHARMACY
116 STATE HWY 28
MORRIS, MN 56267
(320)589-0420

THRIFTY WHITE DRUG
533 ATLANTIC AVE
MORRIS, MN 56267
(320)589-4550

LONGBELLA DRUG-MOTLEY
1233 HIGHWAY 10 S
MOTLEY, MN 56466
(218)352-6337

CROSSTOWN DRUG
8400 CORAL SEA ST NE
MOUNDS VIEW, MN 55112
(763)780-0218

CVS
2800 HIGHWAY 10 NE
MOUNDS VIEW, MN 55112
(763)780-1549

RX EXPRESS
8400 CORAL SEA ST NE
MOUNDS VIEW, MN 55112
(763)780-0218

PETERSON DRUG AND GIFTS
1007 3RD AVE
MOUNTAIN LAKE, MN 56159
(507)427-2707

CUB
2600 RICE CREEK RD
NEW BRIGHTON, MN 55112
(651)631-8202

FAIRVIEW NEW BRIGHTON PHARMACY
1151 SILVER LAKE RD
NEW BRIGHTON, MN 55112
(651)746-2580

GENOA HEALTHCARE
1900 SILVER LAKE RD NW
NEW BRIGHTON, MN 55112
(651)583-7097

MERWIN IV AND SPECIALTY
1811 OLD HIGHWAY 8 NW STE C
NEW BRIGHTON, MN 55112
(651)604-5490

CVS
7901 BASS LAKE RD
NEW HOPE, MN 55428
(763)257-0130

CVS PHARMACY
7932 27TH AVE N
NEW HOPE, MN 55427
(763)544-3338

ST THERESE PHARMACY
8000 BASS LAKE RD STE 200A
NEW HOPE, MN 55428
(763)531-5005

CASH WISE CLINIC PHARMACY
600 PETERSON PKWY
NEW LONDON, MN 56273
(320)354-3998

COBORNS PHARMACY
200 ALTON AVE SE
NEW PRAGUE, MN 56071
(952)758-3132

DRUG EXPRESS VARIETY GALORE
1101 1ST ST NE
NEW PRAGUE, MN 56071
(952)758-5262

MAYO CLIN HLTH SYS NEW PRAGUE
301 2ND ST NE
NEW PRAGUE, MN 56071
(952)758-4431

NEW RICHLAND DRUG
112 S BROADWAY AVE S
NEW RICHLAND, MN 56072
(507)463-3714

ALLINA HEALTH NEW ULM PHCY
1217 8TH ST N STE 1010
NEW ULM, MN 56073
(507)217-5808

CASH WISE PHARMACY
1220 WESTRIDGE RD
NEW ULM, MN 56073
(507)354-2511

HY-VEE PHARMACY
2015 S BROADWAY ST
NEW ULM, MN 56073
(507)354-9833

NEW ULM MEDICAL CENTER
1324 N 5TH ST
NEW ULM, MN 56073
(507)233-1000

WAL-MART
1720 WESTRIDGE RD
NEW ULM, MN 56073
(507)354-0912

SEIP DRUG
99 MILLER ST
NEW YORK MILLS, MN 56567
(218)385-3360

NEWPORT DRUGS
1644 HASTINGS AVE
NEWPORT, MN 55055
(651)459-9553

GUIDE POINT PHARMACY
25527 MAIN ST
NISSWA, MN 56468
(218)963-7525

COUNTRY VALU SNYDER DRUG
6445 MAIN ST
NORTH BRANCH, MN 55056
(651)674-7177

FAIRVIEW NORTH BRANCH
5366 386TH ST NE
NORTH BRANCH, MN 55056
(651)674-6800

SHOPKO PHARMACY
5630 ST CROIX TRL
NORTH BRANCH, MN 55056
(651)674-9956

NORTH MANKATO FAMILY PRACTICE
1575 LOOKOUT DR
NORTH MANKATO, MN 56003
(952)653-2568

POLAR PHCY AND MED SUPPLIES
2564 E 7TH AVE
NORTH SAINT PAUL, MN 55109
(651)770-6606

CUB
2423 HIGHWAY 3 S
NORTHFIELD, MN 55057
(507)664-9029

ECONOFOODS PHARMACY
603 DIVISION ST
NORTHFIELD, MN 55057
(507)645-4489

NORTHFIELD HOSPITAL
2000 NORTH AVE
NORTHFIELD, MN 55057
(507)646-1000

NORTHFIELD PHARMACY
601 WATER ST S
NORTHFIELD, MN 55057
(507)663-0344

STERLING
700 DIVISION ST S
NORTHFIELD, MN 55057
(507)645-4455

TARGET PHARMACY
2323 HIGHWAY 3 S
NORTHFIELD, MN 55057
(507)403-4014

MARSDEN PHARMACY
402 FAXON RD
NORWOOD, MN 55368
(952)467-2100

WAL-MART
5815 NORELL AVE
OAK PARK HEIGHTS, MN 55082
(651)439-7630

KMART PHARMACY
7191 10TH ST N
OAKDALE, MN 55128
(651)739-7491

RAINBOW FOODS PHARMACY
7053 10TH ST N
OAKDALE, MN 55128
(651)739-6247

TARGET PHARMACY
7900 32ND ST N
OAKDALE, MN 55128
(651)855-0991

OLIVIA DRUG
102 9TH ST S
OLIVIA, MN 56277
(320)523-1630

SNYDER DRUG
801 E DUPUE AVE
OLIVIA, MN 56277
(320)523-2110

ONAMIA DRUG
516 MAIN ST
ONAMIA, MN 56359
(320)532-3633

CARTWRIGHT DRUG
147 2ND ST NW
ORTONVILLE, MN 56278
(320)839-6102

LIEBE DRUG
146 2ND ST NW
ORTONVILLE, MN 56278
(320)839-3825

THRIFTY WHITE DRUG
200 CENTRAL AVE
OSAKIS, MN 56360
(320)859-2161

TARGET PHARMACY
15300 GROVE CIR N
OSSEO, MN 55369
(763)447-2507

TARGET PHARMACY
15800 87TH ST NE
OTSEGO, MN 55330
(763)252-1316

SEIP DRUG
320 MN HIGHWAY 78 N
OTTERTAIL, MN 56571
(218)367-2196

ALLINA HEALTH OWATONNA PHCY
2250 26TH ST NW STE 1001
OWATONNA, MN 55060
(507)977-2020

CASH WISE PHARMACY
495 W NORTH ST
OWATONNA, MN 55060
(507)451-7886

GENOA HEALTHCARE
610 FLORENCE AVE STE 123
OWATONNA, MN 55060
(507)413-7752

HY-VEE PHARMACY
1620 S CEDAR AVE
OWATONNA, MN 55060
(507)451-0179

OWATONNA HOSPITAL
903 S OAK ST
OWATONNA, MN 55060
(507)451-3850

STERLING DRUG
410 HOFFMAN DR
OWATONNA, MN 55060
(507)451-0240

TARGET PHARMACY
301 PARK DR
OWATONNA, MN 55060
(507)451-1771

WAL-MART
1130 W FRONTAGE RD
OWATONNA, MN 55060
(507)451-3323

COBORNS PHARMACY
209 W 1ST ST
PARK RAPIDS, MN 56470
(218)732-0836

ST JOSEPH'S AREA HEALH SRVS
600 PLEASANT AVE
PARK RAPIDS, MN 56470
(218)732-3311

THE PHARMACY SHOPPE
100 8TH ST E
PARK RAPIDS, MN 56470
(218)732-3351

WAL-MART
1303 CHARLES ST
PARK RAPIDS, MN 56470
(218)732-0329

TRUMM DRUG
114 E S00 ST
PARKERS PRAIRIE, MN 56361
(218)338-2661

CENTRACARE HEALTH-PAYNESVILLE
200 W 1ST ST
PAYNESVILLE, MN 56362
(320)243-7702

NUCARA PHARMACY
216 WASHBURNE AVE
PAYNESVILLE, MN 56362
(320)243-3781

PELICAN HEALTH MART DRUG
11 N BROADWAY
PELICAN RAPIDS, MN 56572
(218)863-1441

LAKES AREA PHARMACY
30503 STATE HWY 371
PEQUOT LAKES, MN 56472
(218)568-5884

MEMORIAL HOSPITAL PHARMACY
1000 CONEY ST WEST
PERHAM, MN 56573
(218)347-1580

PERHAM HEALTH PHARMACY
1000 CONEY STREET
PERHAM, MN 56573
(218)347-1570

SEIP DRUG
211 MARKET DR
PERHAM, MN 56573
(218)346-3380

SHOPKO PHARMACY
300 JAKE ST SE
PERHAM, MN 56573
(218)346-7751

WHITE DRUG
125 1ST AVE S
PERHAM, MN 56573
(218)346-4840

THRIFTY WHITE PHARMACY
112 MAIN ST S STE A
PIERZ, MN 56364
(320)468-2072

SHOPKO PHARMACY
100 EVERGREEN SQ SW
PINE CITY, MN 55063
(320)629-3003

WAL-MART
950 11TH ST SW
PINE CITY, MN 55063
(320)629-6225

Minnesota Providers

Participating Pharmacies

PINE ISLAND PHARMACY
111 COUNTY ROAD 11 NW
PINE ISLAND, MN 55963
(507)356-8343

LAKES AREA PHARMACY
417 BARCLAY AVE
PINE RIVER, MN 56474
(218)587-3222

A AND S DRUGS
101 W MAIN ST
PIPESTONE, MN 56164
(507)825-3100

COBORN'S PHARMACY
1106 8TH ST SW
PIPESTONE, MN 56164
(507)825-0091

SHOPKO PHARMACY
1002 7TH ST SE
PIPESTONE, MN 56164
(507)825-6517

SNYDER DRUG
802 8TH AVE SE
PIPESTONE, MN 56164
(507)825-4259

PLAINVIEW PHARMACY
245 1ST ST SW
PLAINVIEW, MN 55964
(507)534-3815

ALLINA HEALTH WESTHEALTH PHCY
2855 CAMPUS DR
PLYMOUTH, MN 55441
(763)577-7007

CUB
3550 VICKSBURG LN N
PLYMOUTH, MN 55447
(763)553-2627

CUB
4445 N NATHAN LN
PLYMOUTH, MN 55442
(763)557-0377

CVS
4140 COUNTY ROAD 101 N
PLYMOUTH, MN 55446
(763)478-4612

LUNDS PHARMACY
3455 VICKSBURG LN N
PLYMOUTH, MN 55447
(763)553-1248

RAINBOW FOODS PHARMACY
10200 6TH AVE N
PLYMOUTH, MN 55441
(763)546-2311

RAINBOW FOODS PHARMACY
16705 COUNTY ROAD 24
PLYMOUTH, MN 55447
(763)559-7591

TARGET PHARMACY
4175 VINEWOOD LN N
PLYMOUTH, MN 55442
(763)553-1757

HAUGAN'S PHARMACY
136 MAIN ST SE
PRESTON, MN 55965
(507)765-2156

COBORNS PHARMACY
1100 7TH AVE S
PRINCETON, MN 55371
(763)389-8421

FAIRVIEW NORTHLAND PHCY PRNCTN
919 NORTHLAND DR
PRINCETON, MN 55371
(763)389-6622

FAIRVIEW PHARMACY PRINCETON
911 NORTHLAND DR
PRINCETON, MN 55371
(763)389-6625

SHOPKO PHARMACY
705 NORTHLAND DR
PRINCETON, MN 55371
(763)389-9656

THRIFTY WHITE DRUG
115 RUM RIVER DR N
PRINCETON, MN 55371
(763)389-1411

WAL-MART
300 21ST AVE N
PRINCETON, MN 55371
(763)389-1148

FAIRVIEW PRIOR LAKE
4151 WILLOWWOOD ST SE
PRIOR LAKE, MN 55372
(952)447-9570

LTC RX PROVIDERS
220 3RD AVE
PROCTOR, MN 55810
(218)628-9368

COBORNS PHARMACY
7900 SUNWOOD DR NW
RAMSEY, MN 55303
(763)323-1004

THRIFTY WHITE DRUG
105 INTERNATIONAL DR
RED LAKE FALLS, MN 56750
(218)253-3480

ECONOFOODS PHARMACY
623 MAIN ST
RED WING, MN 55066
(651)388-3589

FAIRVIEW PHARMACY
701 FAIRVIEW BLVD
RED WING, MN 55066
(651)267-5785

MAYO CLINIC PHCY RED WING
701 HEWITT BLVD STE 2116
RED WING, MN 55066
(651)267-5785

TARGET PHARMACY
151 TYLER RD N
RED WING, MN 55066
(651)388-2433

WAL-MART
295 TYLER RD S
RED WING, MN 55066
(651)385-0594

GUIDE POINT PHARMACY
216 WASHINGTON ST S
REDWOOD FALLS, MN 56283
(507)637-3549

SWARD KEMP SNYDER DRUG
207 S WASHINGTON ST
REDWOOD FALLS, MN 56283
(507)637-2911

WAL-MART
1410 E BRIDGE ST
REDWOOD FALLS, MN 56283
(507)644-6000

THRIFTY WHITE DRUG
303 N MAIN ST
RENVILLE, MN 56284
(320)329-8308

CVS
6540 PENN AVE S
RICHFIELD, MN 55423
(612)866-3040

LUNDS PHARMACY
6228 PENN AVE S
RICHFIELD, MN 55423
(612)866-8362

RAINBOW FOODS PHARMACY
140 W 66TH ST
RICHFIELD, MN 55423
(612)866-1256

TARGET PHARMACY
6445 RICHFIELD PKWY
RICHFIELD, MN 55423
(612)252-0474

CVS
4152 LAKELAND AVE N
ROBBINSDALE, MN 55422
(763)535-2459

HHHCC ONCOLOGY PHARMACY
3435 W BROADWAY AVE
ROBBINSDALE, MN 55422
(763)581-2815

N MEMORIAL PHCY - ROBBINSDALE
3300 OAKDALE AVE N
ROBBINSDALE, MN 55422
(763)520-4953

NORTH MEMORIAL MEDICAL CENTER
3300 OAKDALE AVE N
ROBBINSDALE, MN 55422
(763)520-5542

BARLOW PLAZA
1315 6TH ST NW
ROCHESTER, MN 55901
(507)289-6368

CLINIC PHARMACY
210 9TH ST SE
ROCHESTER, MN 55904
(507)288-2483

COSTCO
2020 COMMERCE DR NW
ROCHESTER, MN 55901
(507)286-1870

CUB
1021 15TH AVE SE
ROCHESTER, MN 55904
(507)288-3234

EAGLE DRUG OF ROCHESTER
23 2ND ST SW
ROCHESTER, MN 55902
(507)289-3141

GUIDEPOINT PHARMACY
202 N BROADWAY
ROCHESTER, MN 55906
(507)288-6463

HUNT LTC PHARMACY
1518 N BROADWAY
ROCHESTER, MN 55906
(507)288-3831

HUNT SILVER LAKE DRUGS
1510 N BROADWAY
ROCHESTER, MN 55906
(507)289-3901

HY-VEE PHARMACY
500 37TH ST NW
ROCHESTER, MN 55901
(507)289-7408

HY-VEE PHARMACY
500 CROSSROADS DR SW
ROCHESTER, MN 55904
(507)280-9441

KMART PHARMACY
201 9TH ST SE
ROCHESTER, MN 55904
(507)281-3532

MARRIOTT PLAZA
101 1ST AVE SW
ROCHESTER, MN 55902
(507)289-0716

MAYO CLINIC PHARMACY
21 2ND ST SW
ROCHESTER, MN 55902
(507)284-2021

MAYO CLINIC PHARMACY BALDWIN
221 4TH AVE SW
ROCHESTER, MN 55902
(507)284-8880

MAYO CLINIC PHARMACY EISENBERG
201 W CENTER ST STE LO92
ROCHESTER, MN 55902
(507)266-7416

MAYO CLINIC PHARMACY NE
3041 STONEHEDGE DR NE
ROCHESTER, MN 55906
(507)538-8550

MAYO CLINIC PHARMACY NW
4111 HIGHWAY 52 N
ROCHESTER, MN 55901
(507)266-0966

MAYO CLINIC PHARMACY SUBWAY
200 1ST ST SW STE SL14
ROCHESTER, MN 55905
(507)284-2021

MAYO CLINIC PHCY MARY BRIGH
1216 2ND ST SW STE M600B
ROCHESTER, MN 55902
(507)284-1546

OLMSTED MED CTR NORTHWEST PHCY
5067 55TH ST NW
ROCHESTER, MN 55901
(507)281-7685

QOL MEDS
343 WOODLAKE DR SE
ROCHESTER, MN 55904
(507)226-9020

ROCHESTER HOME INFUSION
221 1ST AVE SW STE 105R
ROCHESTER, MN 55902
(507)316-0001

SAM'S CLUB
3410 NW 55TH ST
ROCHESTER, MN 55901
(507)292-5783

SHOPKO PHARMACY
2820 HIGHWAY 63 S
ROCHESTER, MN 55904
(507)281-0688

SHOPKO PHARMACY
3708 HIGHWAY 63 N
ROCHESTER, MN 55906
(507)281-0658

TARGET PHARMACY
4611 MAINE AVE SE
ROCHESTER, MN 55904
(507)206-5021

TARGET PHARMACY
3827 MARKETPLACE DR NW
ROCHESTER, MN 55901
(507)536-3898

WAL-MART
3400 N W 55TH ST
ROCHESTER, MN 55901
(507)280-7665

WAL-MART
25 25TH ST SE
ROCHESTER, MN 55904
(507)292-1475

WEBER AND JUDD NURSING RX
1814 15TH ST NW
ROCHESTER, MN 55901
(507)289-1666

CUB
13855 ROGERS DR
ROGERS, MN 55374
(763)428-6080

CVS
21455 JOHN MILLESS DR
ROGERS, MN 55374
(763)428-2629

TARGET PHARMACY
21615 S DIAMOND LAKE RD
ROGERS, MN 55374
(763)428-6392

MATTSON PHARMACY
111 MAIN AVE S
ROSEAU, MN 56751
(218)463-2465

SHOPKO PHARMACY
1087 3RD ST NW
ROSEAU, MN 56751
(218)463-2420

CUB
3784 150TH ST
ROSEMOUNT, MN 55068
(651)423-0316

CUB
2100 SNELLING AVE N
ROSEVILLE, MN 55113
(651)633-9720

GENOA HEALTHCARE
3101 OLD HIGHWAY 8 STE 203B
ROSEVILLE, MN 55113
(612)326-9225

RAINBOW FOODS PHARMACY
1201 LARPENTEUR AVE W
ROSEVILLE, MN 55113
(651)489-8620

Minnesota Providers

Participating Pharmacies

TARGET PHARMACY
1515 COUNTY ROAD B W
ROSEVILLE, MN 55113
(651)631-1450

FAIRVIEW LAKES PHCY RUSH CITY
780 W 4TH ST
RUSH CITY, MN 55069
(320)358-4757

STERLING
115 W JESSIE ST
RUSHFORD, MN 55971
(507)864-2153

STERLING LONG TERM CARE PHCY
120 W JESSIE ST
RUSHFORD, MN 55971
(507)864-3159

CUB
3930 SILVER LAKE RD
SAINT ANTHONY, MN 55421
(612)781-6405

UNITED COMMUNITY PHARMACY
2500 NEW BRIGHTON BLVD
SAINT ANTHONY, MN 55418
(763)417-8888

WAL-MART
3800 SILVER LAKE RD NE
SAINT ANTHONY, MN 55418
(612)788-1478

BROWNELL DRUG
401 W 4TH ST
SAINT CHARLES, MN 55972
(507)932-3160

CASH WISE PHARMACY
1001 4TH ST SE
SAINT CLOUD, MN 56304
(320)258-0155

CENTRACARE PHARMACY HEALTH PLZ
1900 CENTRACARE CIR
SAINT CLOUD, MN 56303
(320)229-4904

CENTRACARE PHARMACY NORTHWAY
1555 NORTHWAY DR STE 150
SAINT CLOUD, MN 56303
(320)240-3160

CENTRACARE PHCY AT ST CLOUD HS
1406 6TH AVE N
SAINT CLOUD, MN 56303
(320)255-5670

COBORNS PHARMACY
2118 8TH ST N
SAINT CLOUD, MN 56303
(320)255-0054

COBORNS PHARMACY
900 COOPER AVE S
SAINT CLOUD, MN 56301
(320)252-1515

CVS
2420 W DIVISION ST
SAINT CLOUD, MN 56301
(320)253-5366

GUARDIAN PHARMACY OF MINNESOTA
3601 18TH ST S STE 101
SAINT CLOUD, MN 56301
(855)502-1050

SHOPKO PHARMACY
501 HIGHWAY 10 SE
SAINT CLOUD, MN 56304
(320)253-5373

SHOPKO PHARMACY
4161 2ND ST S
SAINT CLOUD, MN 56301
(320)253-3280

SOUTHSIDE PHARMACY
1301 33RD ST S
SAINT CLOUD, MN 56301
(320)259-0000

ST CLOUD EYE CLINIC
2055 15TH ST N
SAINT CLOUD, MN 56303
(952)653-2568

ST CLOUD ST UNIV HLTH SVC PHCY
251 6TH ST S
SAINT CLOUD, MN 56301
(320)308-4852

TARGET PHARMACY
125 LINCOLN AVE SE
SAINT CLOUD, MN 56304
(320)654-0712

TARGET PHARMACY
4201 W DIVISION ST
SAINT CLOUD, MN 56303
(320)253-4646

WAL-MART
21 COUNTY RD
SAINT CLOUD, MN 56301
(320)259-6363

GOODRICH PHARMACY
23122 ST FRANCIS BLVD
SAINT FRANCIS, MN 55070
(763)753-0222

SHOPKO PHARMACY
301 1ST AVE S
SAINT JAMES, MN 56081
(507)375-8115

ST JAMES MEDICAL CENTER
1101 MOULTON AND PARSONS DR
SAINT JAMES, MN 56081
(507)375-3391

COBORNS
1500 ELM ST E
SAINT JOSEPH, MN 56374
(320)271-1135

BEST AID PHARMACY
4335 EXCELSIOR BLVD
SAINT LOUIS PARK, MN 55416
(952)922-4444

BYERLY'S PHARMACY
3777 PARK CENTER BLVD
SAINT LOUIS PARK, MN 55416
(952)929-2315

COSTCO
5801 16TH ST W
SAINT LOUIS PARK, MN 55426
(763)582-9602

CUB
3620 TEXAS AVE S
SAINT LOUIS PARK, MN 55426
(952)933-3177

CVS
4656 EXCELSIOR BLVD
SAINT LOUIS PARK, MN 55416
(952)929-0140

GENOA HEALTHCARE
1155 FORD RD STE C
SAINT LOUIS PARK, MN 55426
(612)284-2197

HEALTHPARTNERS
5100 GAMBLE DR STE 100
SAINT LOUIS PARK, MN 55416
(952)541-2644

METHODIST HOSPITAL PHARMACY
6500 EXCELSIOR BLVD
SAINT LOUIS PARK, MN 55426
(952)993-6016

PARK NICOLLET PHCY MEADOWBROOK
3931 LOUISIANA AVE S
SAINT LOUIS PARK, MN 55426
(952)993-5764

PARK NICOLLET PHCY ST LOUIS PK
3850 PARK NICOLLET BLVD
SAINT LOUIS PARK, MN 55416
(952)993-3148

RAINBOW FOODS PHARMACY
5370 16TH ST W
SAINT LOUIS PARK, MN 55416
(952)546-1951

SAM'S CLUB
3745 LOUISIANA AVE S
SAINT LOUIS PARK, MN 55426
(952)922-3942

TARGET PHARMACY
3601 HIGHWAY 100 S
SAINT LOUIS PARK, MN 55416
(952)926-8967

TARGET PHARMACY
8900 HIGHWAY 7
SAINT LOUIS PARK, MN 55426
(952)935-8407

CVS
600 CENTRAL AVE W
SAINT MICHAEL, MN 55376
(763)497-6632

ALLINA HEALTH RITCHIE PHARMACY
280 SMITH AVE N STE 120
SAINT PAUL, MN 55102
(651)241-6380

ALLINA HEALTH UNITED PHARMACY
333 SMITH AVE N
SAINT PAUL, MN 55102
(651)241-8849

BLOMBERG PHARMACY
1583 HAMLINE AVE N
SAINT PAUL, MN 55108
(651)646-9645

CAPITOL PHARMACY
580 RICE ST
SAINT PAUL, MN 55103
(651)292-9728

CAREPLUS CVS PHARMACY
3M CENTER BLDG 2242E
SAINT PAUL, MN 55144
(651)739-9028

CHILDREN'S HOSPITAL AND CLINIC
345 SMITH AVE N
SAINT PAUL, MN 55102
(651)220-6963

CUB
1177 CLARENCE ST
SAINT PAUL, MN 55106
(651)774-7772

CUB
1440 UNIVERSITY AVE W
SAINT PAUL, MN 55104
(651)646-8858

CUB
2197 HUDSON RD
SAINT PAUL, MN 55119
(651)501-4934

CVS
1040 GRAND AVE
SAINT PAUL, MN 55105
(651)224-2155

CVS
810 MARYLAND AVE E
SAINT PAUL, MN 55106
(651)774-1005

CVS
499 SNELLING AVE N
SAINT PAUL, MN 55104
(651)917-2001

EAST SIDE FAMILY CLINIC PHCY
860 ARCADE ST
SAINT PAUL, MN 55106
(651)793-2250

EXPRESS PHARMACY
995 UNIVERSITY AVE W
SAINT PAUL, MN 55104
(651)644-7566

FAIRVIEW HIGHLAND PK PHARMACY
2155 FORD PKWY
SAINT PAUL, MN 55116
(651)696-5020

GENOA HEALTHCARE
317 YORK AVE
SAINT PAUL, MN 55130
(651)771-0286

GENOA HEALTHCARE
144 WABASHA ST S
SAINT PAUL, MN 55107
(612)254-9505

GENOA HEALTHCARE MINNESOTA
800 TRANSFER RD STE 29
SAINT PAUL, MN 55114
(651)917-4029

GILLETTE CHLDRN'S SPEC HLTHCRE
200 UNIVERSITY AVE E
SAINT PAUL, MN 55101
(651)726-2890

HEALTHPARTNERS
451 DUNLAP ST N
SAINT PAUL, MN 55104
(651)999-4821

HEALTHPARTNERS COMO
2500 COMO AVE
SAINT PAUL, MN 55108
(651)641-6292

HEALTHPARTNERS SPECIALTY CTR
401 PHALEN BLVD
SAINT PAUL, MN 55130
(651)254-8281

HEALTHPARTNERS ST PAUL
205 WABASHA ST S
SAINT PAUL, MN 55107
(651)293-8316

KMART PHARMACY
245 MARYLAND AVE E
SAINT PAUL, MN 55117
(651)488-6781

LLOYD'S PHARMACY
720 SNELLING AVE N
SAINT PAUL, MN 55104
(651)645-8636

LUNDS PHARMACY
2128 FORD PKWY
SAINT PAUL, MN 55116
(651)251-3491

PHALEN FAMILY PHARMACY
1001 JOHNSON PKWY STE B23
SAINT PAUL, MN 55106
(651)209-9000

PLANNED PARENTHOOD
671 VANDALIA ST
SAINT PAUL, MN 55114
(651)696-5651

PRO PHARMACY
242 CLEVELAND AVE S
SAINT PAUL, MN 55105
(651)698-0825

RAINBOW FOODS PHARMACY
892 W ARCADE ST
SAINT PAUL, MN 55106
(651)771-0556

REGIONS HOSPITAL PHARMACY
640 JACKSON ST
SAINT PAUL, MN 55101
(651)254-9561

RX HMONG PHARMACY
391 MARYLAND AVE E
SAINT PAUL, MN 55130
(651)330-2241

SETZER PHARMACY
1685 RICE ST
SAINT PAUL, MN 55113
(651)488-0251

ST PAUL CORNER DRUG
240 SNELLING AVE S
SAINT PAUL, MN 55105
(651)698-8859

TARGET PHARMACY
1300 UNIVERSITY AVE W
SAINT PAUL, MN 55104
(651)646-8002

Minnesota Providers

Participating Pharmacies

TARGET PHARMACY
2199 HIGHWAY 36 E
SAINT PAUL, MN 55109
(651)779-6341

TARGET PHARMACY
1744 SUBURBAN AVE
SAINT PAUL, MN 55106
(651)778-0105

UNITED HOSPITAL PHARMACY
333 SMITH AVE N # 1793
SAINT PAUL, MN 55102
(651)241-8849

WAL-MART
1450 UNIVERSITY AVE W
SAINT PAUL, MN 55104
(651)644-4286

WAL-MART
1644 S ROBERT ST
SAINT PAUL, MN 55118
(651)453-9671

WEST SEVENTH PHARMACY
1106 7TH ST W
SAINT PAUL, MN 55102
(651)228-1493

WESTSIDE COMM HLTH SVCS PHCY
153 CESAR CHAVEZ ST
SAINT PAUL, MN 55107
(651)602-7589

ECONOFOODS PHARMACY
612 S MINNESOTA AVE
SAINT PETER, MN 56082
(507)931-5540

SHOPKO PHARMACY
1002 OLD MINNESOTA AVE
SAINT PETER, MN 56082
(507)931-4410

SODERLUND DRUG
201 S 3RD ST
SAINT PETER, MN 56082
(715)808-0873

PINE MEDICAL CENTER
109 COURT AVE S
SANDSTONE, MN 55072
(320)245-2212

THRIFTY WHITE DRUG
204 LUNDORFF DR
SANDSTONE, MN 55072
(320)245-5500

COBORNS PHARMACY
1725 PINE CONE RD S
SARTELL, MN 56377
(320)258-4942

COBORNS PHARMACY
707 1ST AVE N
SARTELL, MN 56377
(320)656-8888

COUNTRY STORE AND PHARMACY
520 1ST ST NE
SARTELL, MN 56377
(320)255-0801

HEALTHPARTNERS PHARMACY
2251 CONNECTICUT AVE S
SARTELL, MN 56377
(320)259-7321

SAM'S CLUB
207 COUNTY RD 120
SARTELL, MN 56377
(320)229-8795

COBORNS PHARMACY
214 12TH ST
SAUK CENTRE, MN 56378
(320)352-5280

WAL-MART
205 12TH ST S
SAUK CENTRE, MN 56378
(320)352-7943

COBORNS PHARMACY
110 1ST ST S
SAUK RAPIDS, MN 56379
(320)240-9777

VILLAGE PHARMACY AND GIFT
108 2ND AVE S
SAUK RAPIDS, MN 56379
(320)252-1303

CUB
14075 HIGHWAY 13 S
SAVAGE, MN 55378
(952)447-1611

RAINBOW FOODS PHARMACY
14100 HIGHWAY 13 S
SAVAGE, MN 55378
(952)226-1571

TARGET PHARMACY
14333 HIGHWAY 13 S
SAVAGE, MN 55378
(952)226-1442

CUB
1198 VIERLING DR E
SHAKOPEE, MN 55379
(952)445-6344

CVS
4050 DEAN LAKE BLVD
SHAKOPEE, MN 55379
(952)402-9039

SAM'S CLUB
8201 OLD CARRIAGE CT
SHAKOPEE, MN 55379
(952)496-2982

ST FRANCIS REGIONAL MED CTR
1455 SAINT FRANCIS AVE
SHAKOPEE, MN 55379
(952)403-3000

TARGET PHARMACY
1685 17TH AVE E
SHAKOPEE, MN 55379
(952)445-1727

WAL-MART
8101 OLD CARRIAGE CT
SHAKOPEE, MN 55379
(952)445-8058

TARGET PHARMACY
3800 N LEXINGTON AVE
SHOREVIEW, MN 55126
(651)486-0649

ESSENTIA HEALTH SILVER BAY
99 EDISON BLVD STE L
SILVER BAY, MN 55614
(218)226-3829

GUIDEPOINT PHARMACY #110
2010 JUNIPER AVE
SLAYTON, MN 56172
(507)873-2075

THRIFTY WHITE PHARMACY
2622 BROADWAY AVE
SLAYTON, MN 56172
(507)836-6702

RANDY'S FAMILY DRUG
121 1ST AVE S
SLEEPY EYE, MN 56085
(507)794-3631

PRO PHARMACY
102 5TH AVE S
SOUTH SAINT PAUL, MN 55075
(651)455-4140

STERLING
137 W MAIN ST
SPRING GROVE, MN 55974
(507)498-5509

SPRING PARK PHARMACY
4689 SHORELINE DR STE 100
SPRING PARK, MN 55384
(952)471-3784

VALLEY PHARMACY
501 N PARK DR
SPRING VALLEY, MN 55975
(507)346-7273

MAYO CLINIC HEALTH SYSTEM
625 N JACKSON AVE
SPRINGFIELD, MN 56087
(952)653-2568

THRIFTY WHITE
18 S MARSHALL AVE
SPRINGFIELD, MN 56087
(507)723-4313

WAL-MART
3601 2ND ST S
ST. CLOUD, MN 56301
(320)251-0996

LAKEWOOD HLTH SYS HOSP PHCY
49725 COUNTY 83
STAPLES, MN 56479
(218)894-8454

LONGBELLA DRUG
421 2ND AVE NE
STAPLES, MN 56479
(218)894-2242

LONGBELLA DRUG CLINIC
49725 COUNTY 83 STE 100
STAPLES, MN 56479
(218)894-8761

SAMUELSONS DRUG
118 W 5TH ST
STARBUCK, MN 56381
(320)239-2246

STEWARTVILLE PHARMACY
220 CENTER TOWN PLZ N
STEWARTVILLE, MN 55976
(507)533-6883

CUB
1801 MARKET DR
STILLWATER, MN 55082
(651)430-2362

LAKEVIEW COMMUNITY PHARMACY
1500 CURVE CREST BLVD W
STILLWATER, MN 55082
(651)430-4670

LAKEVIEW MEMORIAL HOSPITAL
927 W CHURCHILL ST
STILLWATER, MN 55082
(952)653-2568

LAKEVIEW OUTPATIENT PHARMACY
927 CHURCHILL ST
STILLWATER, MN 55082
(651)430-4563

LAKEVIEW PHARMACY
927 CHURCHILL ST W
STILLWATER, MN 55082
(651)430-4562

TARGET PHARMACY
2021 MARKET DR
STILLWATER, MN 55082
(651)439-0992

HUGO'S PHARMACY
215 PENNINGTON AVE
THIEF RIVER FALLS, MN 56701
(218)681-1515

NORTHWEST MEDICAL CENTER
120 LABREE AVE S
THIEF RIVER FALLS, MN 56701
(218)681-4240

SANFORD PHCY THIEF RIVER FALLS
1720 HIGHWAY 59 S STE 2
THIEF RIVER FALLS, MN 56701
(218)683-2725

THRIFTY WHITE DRUG
201 HORACE AVE N
THIEF RIVER FALLS, MN 56701
(218)681-2932

WAL-MART
1755 HWY 59 SE
THIEF RIVER FALLS, MN 56701
(218)683-3655

SCENIC RIVER HEALTH SERVICES
415 N 2ND ST STE 2
TOWER, MN 55790
(952)653-2568

JOHN'S RX DRUG
131 3RD ST
TRACY, MN 56175
(507)629-3800

TWIN VALLEY DRUG
120 MAIN AVE
TWIN VALLEY, MN 56584
(218)584-5377

ESSENTIA HEALTH TWO HARBORS
802 11TH ST STE C
TWO HARBORS, MN 55616
(218)834-7202

LAKE VIEW MEMORIAL HOSPITAL
325 11TH AVE
TWO HARBORS, MN 55616
(952)653-2568

LAKE VIEW PHARMACY
1010 4TH ST
TWO HARBORS, MN 55616
(218)834-7799

THRIFTY WHITE DRUG
183 N TYLER ST
TYLER, MN 56178
(507)247-5504

NORTHEST PEDIATRIC CLINIC
4520 CENTERVILLE RD
VADNAIS HEIGHTS, MN 55127
(651)426-1141

TARGET PHARMACY
975 COUNTY ROAD E E
VADNAIS HEIGHTS, MN 55127
(651)483-2776

WAL-MART
850 E COUNTY RD E
VADNAIS HEIGHTS, MN 55127
(651)486-7005

ESSENTIA HEALTH VIRGINIA PHCY
1101 9TH ST N
VIRGINIA, MN 55792
(218)749-7828

FAMILY DRUG MART
1400 S 13TH AVE
VIRGINIA, MN 55792
(218)749-8943

KMART PHARMACY
1401 12TH AVE S
VIRGINIA, MN 55792
(218)749-4014

TARGET PHARMACY
1001 13TH ST S
VIRGINIA, MN 55792
(218)741-6603

VIRGINIA REGIONAL MED CTR PHCY
901 9TH ST N
VIRGINIA, MN 55792
(218)749-9441

WHITE DRUG
306 CHESTNUT ST
VIRGINIA, MN 55792
(218)749-6333

ST ELIZABETHS HOSP PHARMACY
1200 GRANT BLVD W
WABASHA, MN 55981
(651)565-5527

ST ELIZABETH'S OUTPATIENT PHCY
1200 GRANT BLVD W FL 1
WABASHA, MN 55981
(651)565-5611

WABASHA PHARMACY
207 MAIN ST W
WABASHA, MN 55981
(651)565-3949

BECK PHARMACY
851 MARKETPLACE DR
WACONIA, MN 55387
(952)442-4407

RIDGEVIEW MEDICAL CENTER
500 S MAPLE ST
WACONIA, MN 55387
(952)442-2191

Minnesota Providers

Participating Pharmacies

TARGET PHARMACY
875 E MAIN ST
WACONIA, MN 55387
(952)442-9334

WACONIA PHARMACY
430 W HIGHWAY 5
WACONIA, MN 55387
(952)442-3274

THRIFTY WHITE PHARMACY
321 JEFFERSON ST N
WADENA, MN 56482
(218)631-4050

TRI COUNTY HOSPITAL
415 N JEFFERSON ST
WADENA, MN 56482
(952)653-2568

TRI COUNTY HOSPITAL PHARMACY
415 JEFFERSON ST N
WADENA, MN 56482
(218)631-7598

WAL-MART
100 JUNIPER AVE NW
WADENA, MN 56482
(218)631-1723

CASH WISE PHARMACY
113 S WAITE AVE
WAITE PARK, MN 56387
(320)259-1148

KMART PHARMACY
40 2ND ST S
WAITE PARK, MN 56387
(320)251-3069

THRIFTY WHITE DRUG
603 MINNESOTA AVE W
WALKER, MN 56484
(218)547-1016

THRIFTY WHITE DRUG
110 MICHIGAN AVE W STE C
WALKER, MN 56484
(218)547-4734

WARREN PHARMACY
103 W JOHNSON AVE
WARREN, MN 56762
(218)745-5481

THRIFTY WHITE PHARMACY
310 LAKE ST NW
WARROAD, MN 56763
(218)386-2050

HY-VEE PHARMACY
1230 N STATE ST
WASECA, MN 56093
(507)833-7007

THRIFTY WHITE DRUG
122 ELM AVE E
WASECA, MN 56093
(507)835-1610

WAL-MART
2103 STATE ST N
WASECA, MN 56093
(507)835-8184

WASECA MEDICAL CENTER
501 N STATE ST
WASECA, MN 56093
(507)835-1210

WATERTOWN PHARMACY
204 LEWIS AVE S
WATERTOWN, MN 55388
(952)955-2153

BERGS PHARMACY
103 3RD ST S
WATERVILLE, MN 56096
(507)362-8500

LUNDS PHARMACY
1151 WAYZATA BLVD E
WAYZATA, MN 55391
(952)473-1687

PARK NICOLLET PHCY WAYZATA
250 N CENTRAL AVE
WAYZATA, MN 55391
(952)993-8200

WELLS DRUG
36 S BROADWAY
WELLS, MN 56097
(507)553-3161

CUB
2001 S ROBERT ST
WEST SAINT PAUL, MN 55118
(651)451-1113

CVS
1471 ROBERT ST
WEST SAINT PAUL, MN 55118
(651)552-6029

KMART PHARMACY
50 SIGNAL HILL MALL
WEST SAINT PAUL, MN 55118
(651)457-3355

TARGET PHARMACY
1750 S ROBERT ST
WEST SAINT PAUL, MN 55118
(651)455-6626

TWIN CITY PAIN CENTERS
1099 ROBERT ST S # 100
WEST SAINT PAUL, MN 55118
(952)657-7822

THRIFTY WHITE DRUG
601 1ST AVE
WESTBROOK, MN 56183
(507)274-6114

WHEATON DRUG
1105 BROADWAY
WHEATON, MN 56296
(320)563-4151

CVS
2730 COUNTY RD E E
WHITE BEAR LAKE, MN 55110
(651)777-6816

CVS
4800 HIGHWAY 61 N
WHITE BEAR LAKE, MN 55110
(651)762-3864

HEALTHPARTNERS
1430 HIGHWAY 96 E
WHITE BEAR LAKE, MN 55110
(651)653-2175

MEDICINE CHEST PHARMACY
2187 4TH ST
WHITE BEAR LAKE, MN 55110
(651)429-5356

SAM'S CLUB
1850 BUERKLE RD
WHITE BEAR LAKE, MN 55110
(651)779-6710

WHITE BEAR HEALTH MART PHCY
2008 COUNTY ROAD E E
WHITE BEAR LAKE, MN 55110
(651)289-4300

CUB
1059 MEADOWLANDS DR
WHITE BEAR LK, MN 55127
(651)426-5006

CASH WISE CLINIC PHARMACY
101 WILLMAR AVE SW
WILLMAR, MN 56201
(320)214-6975

CASH WISE PHARMACY
1300 5TH ST SE
WILLMAR, MN 56201
(320)235-2506

CUB
2201 1ST ST S
WILLMAR, MN 56201
(320)214-8502

PRESCRIPTION CENTER
1110 S 1ST ST
WILLMAR, MN 56201
(320)235-2440

RICE MEMORIAL HOSPITAL PHCY
301 BECKER AVE SW
WILLMAR, MN 56201
(320)235-4543

TARGET PHARMACY
2505 1ST ST S
WILLMAR, MN 56201
(320)235-3026

THRIFTY WHITE DRUG
1600 1ST ST S
WILLMAR, MN 56201
(320)235-1930

TRUCARE PHARMACY
316 4TH ST SW STE 7
WILLMAR, MN 56201
(320)231-3655

WAL-MART
3031 1ST ST S
WILLMAR, MN 56201
(320)231-3313

LEWIS FAMILY DRUG
599 2ND AVE
WINDOM, MN 56101
(507)831-4161

SHOPKO PHARMACY
2155 1ST AVE
WINDOM, MN 56101
(507)831-0263

GOLTZ PHARMACY
274 E 3RD ST
WINONA, MN 55987
(507)452-2547

HY-VEE PHARMACY
1475 SERVICE RD
WINONA, MN 55987
(507)452-5254

KMART PHARMACY
1122 W HIGHWAY 61
WINONA, MN 55987
(507)454-6072

PARKVIEW PHARMACY
825 MANKATO AVE
WINONA, MN 55987
(507)454-4925

PARKVIEW PHARMACY AT WSU
117 W SANBORN ST
WINONA, MN 55987
(507)457-2245

SHOPKO PHARMACY
405 COTTONWOOD DR
WINONA, MN 55987
(507)452-1244

TARGET PHARMACY
860 MANKATO AVE
WINONA, MN 55987
(507)452-6308

WAL-MART
955 FRONTENAC DR
WINONA, MN 55987
(507)452-0615

WINONA HEALTH SERVICES
825 MANKATO AVE
WINONA, MN 55987
(952)653-2568

WINONA HEALTH SVCS CLINIC
859 MANKATO AVE
WINONA, MN 55987
(507)457-4156

KEAVENY DRUG
150 MAIN AVE W
WINSTED, MN 55395
(320)485-2555

GUIDEPOINT PHARMACY
112 E 2ND ST
WINTHROP, MN 55396
(507)647-8800

ALLINA HEALTH WOODBURY PHCY
8675 VALLEY CREEK RD
WOODBURY, MN 55125
(651)501-3140

CUB
8432 TAMARACK VLG
WOODBURY, MN 55125
(651)702-1032

CVS
8468 TAMARACK BAY
WOODBURY, MN 55125
(651)731-5177

CVS
2150 EAGLE CREEK LN
WOODBURY, MN 55125
(651)436-4732

GENOA HEALTHCARE
1811 WEIR DR STE 275
WOODBURY, MN 55125
(612)594-8178

HEALTHPARTNERS WOODBURY
8450 SEASONS PKWY
WOODBURY, MN 55125
(651)702-5308

SAM'S CLUB
9925 HUDSON RD
WOODBURY, MN 55125
(651)702-7980

TARGET PHARMACY
449 COMMERCE DR
WOODBURY, MN 55125
(651)239-1875

TARGET PHARMACY
7200 VALLEY CREEK PLZ
WOODBURY, MN 55125
(651)735-9517

WAL-MART
10240 HUDSON RD
WOODBURY, MN 55129
(651)735-5190

GUIDE POINT PHARMACY
607 10TH ST
WORTHINGTON, MN 56187
(507)372-7371

HY-VEE PHARMACY
1235 OXFORD ST
WORTHINGTON, MN 56187
(507)376-3812

SHOPKO PHARMACY
1755 N HUMISTON AVE
WORTHINGTON, MN 56187
(507)376-9309

STERLING DRUG
511 10TH ST
WORTHINGTON, MN 56187
(507)372-7533

STERLING LTC
511 10TH ST STE B
WORTHINGTON, MN 56187
(507)372-7533

WAL-MART
1055 RYAN RD
WORTHINGTON, MN 56187
(507)376-4080

FAIRVIEW LK PHARMACY-WYOMING
5200 FAIRVIEW BLVD
WYOMING, MN 55092
(651)982-7500

WYOMING DRUG
26710 FOREST BLVD
WYOMING, MN 55092
(651)462-2082

FAIRVIEW NORTHLAND PHCY-ZIMMER
25945 GATEWAY DR
ZIMMERMAN, MN 55398
(763)856-6940

ZUMBROTA MAIN STREET PHARMACY
370 MAIN ST
ZUMBROTA, MN 55992
(507)732-5311

ZUMBROTA PHARMACY
228 WEST AVE
ZUMBROTA, MN 55992
(507)732-7309

North Dakota Providers

Participating Pharmacies

ARTHUR DRUG
325 MAIN ST
ARTHUR, ND 58006
(701)967-8900

WHITE DRUG
109 W MAIN ST
ASHLEY, ND 58413
(701)288-3355

BEACH PHARMACY
180 S CENTRAL AVE
BEACH, ND 58621
(701)872-2800

BELCOURT DRUG
9838 43T AVE NE
BELCOURT, ND 58316
(701)477-0202

BEULAH DRUG
147 W MAIN ST
BEULAH, ND 58523
(701)873-5215

ARROWHEAD PLAZA DRUG
1116 N 3RD ST
BISMARCK, ND 58501
(701)223-8806

CENTER FOR FAMILY MEDICINE
701 E ROSSER AVE
BISMARCK, ND 58501
(701)751-6803

CHURCHILL PHARMACY
1190 W TURNPIKE AVE
BISMARCK, ND 58501
(701)224-0339

CVS
525 S 3RD ST
BISMARCK, ND 58504
(701)255-1335

CVS
1225 E CALGARY AVE
BISMARCK, ND 58503
(701)223-9323

DAKOTA PHARMACY
705 E MAIN AVE
BISMARCK, ND 58501
(701)255-1881

GATEWAY HEALTH MART PHARMACY N
3101 N 11TH ST
BISMARCK, ND 58503
(701)224-9521

GATEWAY HEALTH MART PHCY SOUTH
835 S WASHINGTON ST
BISMARCK, ND 58504
(701)223-1656

GATEWAY HM PHARMACY SUNRISE
4007 STATE ST STE L30
BISMARCK, ND 58503
(701)425-0789

HERITAGE PHARMACY
401 N 9TH ST
BISMARCK, ND 58501
(701)530-6050

HERITAGE PHARMACY EAST
1000 E ROSSER AVE
BISMARCK, ND 58501
(701)530-6311

HERITAGE PHARMACY GATEWAY
2700 STATE ST STE F13
BISMARCK, ND 58503
(701)530-5800

HOLIDAY PROFESSIONAL PHARMACY
1140 E BISMARCK EXPY
BISMARCK, ND 58504
(701)255-7220

MAYO PHARMACY
303 N 4TH ST
BISMARCK, ND 58501
(701)223-2425

MEDICINE SHOPPE PHARMACY
1304 E BLVD AVE
BISMARCK, ND 58501
(701)224-0175

NORTHBROOK DRUG
1929 N WASHINGTON ST STE C
BISMARCK, ND 58501
(701)258-1412

PROFESSIONAL PHARMACY
3124 COLORADO LN STE 400
BISMARCK, ND 58503
(701)223-6854

SANFORD RETAIL PHARMACY
300 N 7TH ST
BISMARCK, ND 58501
(701)323-6099

ST ALEXIUS COMMUNITY PHARMACY
900 E BROADWAY AVE
BISMARCK, ND 58501
(701)530-6906

WHITE DRUG
117 N 5TH ST
BISMARCK, ND 58501
(701)223-0936

THOMPSON DRUG
505 MAIN ST
BOTTINEAU, ND 58318
(701)228-2291

THE BOWMAN DRUG COMPANY
12 N MAIN ST
BOWMAN, ND 58623
(701)523-3223

NEUMANN DRUG
412 MAIN ST
CANDO, ND 58324
(701)968-3531

CARRINGTON DRUG
415 MAIN ST
CARRINGTON, ND 58421
(701)652-2521

CENTRAL PHARMACY
990 MAIN ST
CARRINGTON, ND 58421
(701)652-2651

CASSELTON HEALTH MART DRUG
622 FRONT ST
CASSELTON, ND 58012
(701)347-4281

WHITE DRUG
201 E 3RD AVE S
CAVALIER, ND 58220
(701)265-4744

ALMKLOVS PHARMACY
848 BURRELL AVE
COOPERSTOWN, ND 58425
(701)797-2414

J CO DRUG
120 N MAIN ST
CROSBY, ND 58730
(701)965-6671

BELL DRUG
323 5TH ST
DEVILS LAKE, ND 58301
(701)662-3022

CLINIC PHARMACY
1001 7TH ST NE
DEVILS LAKE, ND 58301
(701)662-4427

RAMSEY DRUG
401 COLLEGE DR S
DEVILS LAKE, ND 58301
(701)662-3117

WHITE DRUG
425 COLLEGE DR S STE 10
DEVILS LAKE, ND 58301
(701)662-6270

CLINIC PHARMACY
938 2ND AVE W
DICKINSON, ND 58601
(701)483-4401

GREENE DRUG
16 W VILLARD ST
DICKINSON, ND 58601
(701)225-5171

IRSFIELD PHARMACY PC
33 9TH ST W
DICKINSON, ND 58601
(701)483-4858

MEDICINE SHOPPE PHARMACY
1571 W VILLARD ST UNIT 1
DICKINSON, ND 58601
(701)227-8265

ND HEALTH MART PHARMACY
446 18TH ST W STE 2
DICKINSON, ND 58601
(701)225-4434

STEINER PHARMACY
352 1ST ST E STE C
DICKINSON, ND 58601
(701)227-0191

WHITE DRUG
1681 3RD AVE W
DICKINSON, ND 58601
(701)225-4421

DRAYTON DRUG
104 E HIGHWAY 66
DRAYTON, ND 58225
(701)454-3831

DUNSEITH DRUG
10 MAIN ST SW
DUNSEITH, ND 58329
(701)244-0202

EDGELEY PHARM STORE
509 MAIN ST
EDGELEY, ND 58433
(701)493-2810

ECONOMY DRUG
201 N MAIN ST
ELGIN, ND 58533
(701)584-2733

ELLENDALE PHARMACY
117 MAIN ST
ELLENDALE, ND 58436
(701)349-3390

ENDERLIN PHARMACY
308 RAILWAY ST
ENDERLIN, ND 58027
(701)437-2464

7 DAY CLINIC
1517 32ND AVE S
FARGO, ND 58103
(952)653-2568

7 DAY CLINIC
1100 19TH AVE N
FARGO, ND 58102
(952)653-2568

7 DAY CLINIC
4622 40TH AVE S
FARGO, ND 58104
(952)653-2568

CVS
2425 13TH AVE S
FARGO, ND 58103
(701)232-4872

CVS
1321 19TH AVE N
FARGO, ND 58102
(701)232-2720

DAKOTA CLINIC PHARMACY
1702 UNIVERSITY DR S
FARGO, ND 58103
(701)364-6179

FAMILY HEALTHCARE PHCY NDSU
301 N P AVE
FARGO, ND 58102
(701)271-1495

INHEALTH SPECIALTY PHARMACY
2345 25TH ST S STE C
FARGO, ND 58103
(701)365-6050

INNOVIS HEALTH
3000 32ND AVE SW
FARGO, ND 58104
(701)364-8000

LINSON PHARMACY
3175 25TH ST S
FARGO, ND 58103
(701)293-6022

MD PHARMACY
4101 13TH AVE S
FARGO, ND 58103
(701)364-5690

MEDICAL PHARMACY
100 S 4TH ST STE 104
FARGO, ND 58103
(701)237-0322

MEDICAL PHARMACY SOUTH
4151 45TH ST S
FARGO, ND 58104
(701)282-8075

MEDICINE SHOPPE PHARMACY
2800 BROADWAY N
FARGO, ND 58102
(701)293-0221

MEDICINE SHOPPE PHARMACY
1605 S UNIVERSITY DR
FARGO, ND 58103
(701)293-3060

METRO DRUG
123 BROADWAY N
FARGO, ND 58102
(701)232-6150

NORTHPORT DRUG
2522 BROADWAY N
FARGO, ND 58102
(701)235-5543

PRAIRIE PHARMACY
4731 13TH AVE S
FARGO, ND 58103
(701)373-0325

PRESCRIPTION CENTER PHARMACY
2701 13TH AVE S
FARGO, ND 58103
(701)234-3630

SANFORD PHARMACY BROADWAY
737 BROADWAY N
FARGO, ND 58102
(701)234-2416

SANFORD PHARMACY MILLS AVENUE
801 BROADWAY N
FARGO, ND 58102
(701)234-3330

SANFORD PHARMACY S UNIVERSITY
1720 S UNIVERSITY DR
FARGO, ND 58103
(701)234-3843

SOUTHPOINTE PHARMACY
2400 32ND AVE S
FARGO, ND 58103
(701)234-9912

THRIFTY DRUG
1521 S UNIVERSITY DR
FARGO, ND 58103
(701)232-8690

THRIFTY DRUG SOUTHGATE
1532 32ND AVE S
FARGO, ND 58103
(701)280-1929

WEST ACRES PHARMACY
3902 13TH AVE S STE 3706
FARGO, ND 58103
(701)282-0285

WHITE DRUG
201 UNIVERSITY DR S
FARGO, ND 58103
(701)239-3543

WHITE DRUG
712 38TH ST N STE A
FARGO, ND 58103
(701)893-9217

WHITE DRUG
708 38TH ST NW STE C
FARGO, ND 58102
(701)893-9050

WHITE DRUG
1401 33RD ST SW
FARGO, ND 58103
(701)235-5511

North Dakota Providers

Participating Pharmacies

NILLES DRUG
58 S MAIN ST
FESSENDEN, ND 58438
(701)547-3201

FORMAN DRUG
330 MAIN ST S
FORMAN, ND 58032
(701)724-6222

CHASE PHARMACY
21 N MAIN ST
GARRISON, ND 58540
(701)463-2242

GLEN ULLIN DRUG
113 S MAIN ST
GLEN ULLIN, ND 58631
(701)348-3303

GRAFTON DRUG
38 E 12TH ST
GRAFTON, ND 58237
(701)352-0831

WHITE DRUG
544 HILL AVE
GRAFTON, ND 58237
(701)352-1760

ALTRU CLINIC PHARMACY
1000 S COLUMBIA RD
GRAND FORKS, ND 58201
(701)772-4875

ALTRU CLINIC PHARMACY FMC
1380 S COLUMBIA RD
GRAND FORKS, ND 58201
(701)795-2020

ALTRU HEALTH SYSTEMS
1200 S COLUMBIA RD
GRAND FORKS, ND 58201
(952)653-2568

ALTRU RETAIL PHARMACY
1200 S COLUMBIA RD
GRAND FORKS, ND 58201
(701)780-3444

CVS
1950 32ND AVE S
GRAND FORKS, ND 58201
(701)746-8643

FAMILY MEDICINE RESIDENCY PHCY
725 HAMLINE ST
GRAND FORKS, ND 58203
(701)780-6870

MEDICAP PHARMACY
1395 S COLUMBIA RD STE C
GRAND FORKS, ND 58201
(701)746-1800

SKIP'S BUDGET DRUG
2015 LIBRARY CIR STE 102
GRAND FORKS, ND 58201
(701)772-4805

UNIV OF ND STUDENT HLTH PHCY
2891 2ND AVE STOP 9038
GRAND FORKS, ND 58202
(701)777-3965

WALLS HEALTH MART PHARMACY
4440 S WASHINGTON ST STE 101D
GRAND FORKS, ND 58201
(701)732-2900

WALLS MEDICINE CENTER
708 S WASHINGTON ST
GRAND FORKS, ND 58201
(701)746-0497

WHITE DRUG
2475 32ND AVE S STE 1
GRAND FORKS, ND 58201
(701)775-4209

HANKINSON DRUG
323 S MAIN AVE
HANKINSON, ND 58041
(701)242-7414

MEDICINE SHOPPE PHARMACY
722 LINCOLN AVE
HARVEY, ND 58341
(701)324-2295

SERVICE DRUG AND GIFT
815 LINCOLN AVE
HARVEY, ND 58341
(701)324-2227

HAZEN DRUG
30 MAIN RD E
HAZEN, ND 58545
(701)748-2312

WHITE DRUG
112 S MAIN ST
HETTINGER, ND 58639
(701)567-2533

HILLSBORO DRUG
13 N MAIN ST
HILLSBORO, ND 58045
(701)636-5231

MEDICINE SHOPPE PHARMACY
703 1ST AVE S
JAMESTOWN, ND 58401
(701)252-3002

ND STATE HOSPITAL PHARMACY
2605 CIRCLE DR
JAMESTOWN, ND 58401
(701)253-3868

WHITE DRUG
310 1ST AVE S
JAMESTOWN, ND 58401
(701)251-1432

WHITE DRUG
410 10TH ST SE STE 8
JAMESTOWN, ND 58401
(701)252-5980

WHITE DRUG
213 1ST AVE N
JAMESTOWN, ND 58401
(701)252-3181

KENMARE DRUG
109 1ST AVE NW
KENMARE, ND 58746
(701)385-4257

KILLDEER PHARMACY
14 CENTRAL AVE S
KILLDEER, ND 58640
(701)764-5093

LAKOTA DRUG AND GIFT
117 MAIN ST N
LAKOTA, ND 58344
(701)247-2781

LA MOURE DRUG STORE
100 1ST ST SW
LAMOURE, ND 58458
(701)883-5339

LANGDON COMMUNITY DRUG
805 3RD ST
LANGDON, ND 58249
(701)256-3330

LARIMORE DRUG AND GIFT
203 TOWNER AVE
LARIMORE, ND 58251
(701)343-2461

WHITE DRUG
121 N BROADWAY ST
LINTON, ND 58552
(701)254-5432

SHEYENNE VALLEY DRUG
407 MAIN ST
LISBON, ND 58054
(701)683-5282

WHITE DRUG
404 MAIN ST
LISBON, ND 58054
(701)683-4691

WHITE DRUG
108 CENTRAL AVE
MADDOCK, ND 58348
(704)438-2567

GATEWAY HEALTH MART PHARMACY
500 BURLINGTON ST SE
MANDAN, ND 58554
(701)667-1843

MEDICINE SHOPPE PHARMACY
116 2ND AVE NW
MANDAN, ND 58554
(701)663-1151

THRIFTY WHITE DRUG
511 1ST ST NW
MANDAN, ND 58554
(701)663-5188

WAL-MART
1000 OLD RED TRL NE
MANDAN, ND 58554
(701)354-6964

AASEN DRUG
15 E MAIN ST
MAYVILLE, ND 58257
(701)788-2552

B AND B NORTHWEST PHARMACY
20 BURDICK EXPY W
MINOT, ND 58701
(701)838-2213

CNTR FOR FAMILY MEDICINE PHCY
1201 11TH AVE SW
MINOT, ND 58701
(701)858-6755

CVS
1520 20TH AVE SW
MINOT, ND 58701
(701)852-4068

KEYCARE PHARMACY
400 BURDICK EXPY E STE
MINOT, ND 58701
(701)857-7900

MARKET PHARMACY
1930 S BROADWAY
MINOT, ND 58701
(701)839-8883

MEDICINE SHOPPE PHARMACY
1118 S BROADWAY
MINOT, ND 58701
(701)852-1524

TRINITY HOSPITAL PHARMACY
1 BURDICK EXPY W
MINOT, ND 58701
(952)653-2568

WHITE DRUG
2700 8TH STREET NW
MINOT, ND 58703
(701)852-0388

WHITE DRUG
1015 S BROADWAY STE 3
MINOT, ND 58701
(701)852-4181

WHITE DRUG
115 MAIN ST W
MOHALL, ND 58761
(701)756-6000

ECONOMY DRUG MOTT
216 BROWN AVE
MOTT, ND 58646
(701)824-2897

NAPOLEON DRUG
214 MAIN AVE
NAPOLEON, ND 58561
(701)754-2203

NEW ENGLAND DRUG
713 MAIN ST
NEW ENGLAND, ND 58647
(701)579-4130

CENTRAL PHARMACY
4 8TH ST N
NEW ROCKFORD, ND 58356
(701)947-5313

NEW SALEM PHARMACY
509 ASH AVE
NEW SALEM, ND 58563
(701)843-7563

LARSEN SERVICE DRUG
334 MAIN ST
NEW TOWN, ND 58763
(701)627-2410

PAUL BILDEN PHARMACY
10 N MAIN ST
NORTHWOOD, ND 58267
(701)587-5271

OAKES DRUG
422 MAIN AVE
OAKES, ND 58474
(701)742-2118

TARA'S THRIFTY WHITE PHARMACY
610 MAIN AVE
OAKES, ND 58474
(701)742-3824

YE OLDE MEDICINE CENTER
503 PARK ST W
PARK RIVER, ND 58270
(701)284-7676

ROCKVIEW PHARMACY
307 3RD ST NE
PARSHALL, ND 58770
(701)240-2226

COUNTRY DRUG STORE
116 NORTH AVE E
RICHARDTON, ND 58652
(701)974-3558

WHITE DRUG
208 MAIN ST
ROLETTE, ND 58366
(701)246-3600

ROLLA DRUG
117 MAIN AVE E
ROLLA, ND 58367
(701)477-3174

HEART OF AMERICA CLINIC PHCY
800 S MAIN AVE
RUGBY, ND 58368
(701)776-2531

WHITE DRUG
107 2ND ST SE
RUGBY, ND 58368
(701)776-5741

DAKOTA DRUG
107 S MAIN ST
STANLEY, ND 58784
(701)628-2255

TIOGA DRUG
106 N MAIN ST
TIOGA, ND 58852
(701)664-2116

TURTLE LAKE REXALL DRUG
218 MAIN ST
TURTLE LAKE, ND 58575
(701)448-2542

CENTRAL AVENUE PHARMACY
323 CENTRAL AVE N STE 101
VALLEY CITY, ND 58072
(701)845-5280

NUCARA PHARMACY
234 CENTRAL AVE N
VALLEY CITY, ND 58072
(701)845-2652

NUCARA PHARMACY LTC
979 CENTRAL AVE N
VALLEY CITY, ND 58072
(701)845-6885

VALLEY DRUG
239 2ND AVE NW
VALLEY CITY, ND 58072
(701)845-1763

WHITE DRUG
148 S CENTRAL AVE
VALLEY CITY, ND 58072
(701)845-1421

VELVA DRUG COMPANY
16 MAIN ST N
VELVA, ND 58790
(701)338-2911

CORNER DRUG STORE
619 DAKOTA AVE
WAHPETON, ND 58075
(701)642-5595

THRIFTY WHITE PHARMACY
387 11TH ST S OFC 2
WAHPETON, ND 58075
(701)642-2336

WAHPETON DRUG
508 DAKOTA AVE
WAHPETON, ND 58075
(701)642-9211

North Dakota Providers

Participating Pharmacies

WALHALLA PRESCRIPTION SHOP
1102 CENTRAL AVE
WALHALLA, ND 58282
(701)549-2661

CHASE DRUG STORE
703 MAIN AVE
WASHBURN, ND 58577
(701)462-8174

BARRETT HEALTH MART PHARMACY
145 N MAIN ST
WATFORD CITY, ND 58854
(701)842-3311

LARSEN SERVICE DRUG
244 N MAIN ST
WATFORD CITY, ND 58854
(701)444-2410

HEALTH CENTER PHARMACY
1401 13TH AVE E
WEST FARGO, ND 58078
(701)364-5800

RXCO PHARMACY
550 13TH AVE E
WEST FARGO, ND 58078
(701)373-0685

RXCO PHARMACY
550 13TH AVE E STE B
WEST FARGO, ND 58078
(701)373-0890

SKRIPTS PHARMACY
750 23RD AVE E
WEST FARGO, ND 58078
(701)281-2222

THE PRESCRIPTION SHOP
1210 SHEYENNE ST
WEST FARGO, ND 58078
(701)282-4665

WHITE DRUG
1100 13TH AVE E
WEST FARGO, ND 58078
(701)281-5695

MERCY MEDICAL CENTER
1301 15TH AVE W
WILLISTON, ND 58801
(952)653-2568

ND HEALTH MART PHARMACY
20 26TH ST E
WILLISTON, ND 58801
(701)572-4181

SERVICE DRUG PHARMACY
317 MAIN ST
WILLISTON, ND 58801
(701)572-6721

THE PRESCRIPTION CENTER
1508 2ND AVE W
WILLISTON, ND 58801
(701)572-5884

WHITE DRUG
300 W 11TH ST
WILLISTON, ND 58801
(701)774-3923

WISHEK DRUG
9 S CENTENNIAL ST
WISHEK, ND 58495
(701)452-2368

South Dakota Providers

Participating Pharmacies

AVERA ST LUKE'S PHARMACY
305 S STATE ST
ABERDEEN, SD 57401
(605)622-5545

DT PHARMACY
815 1ST AVE SE STE 202
ABERDEEN, SD 57401
(605)725-4001

JONES DRUG HEALTHMART
816 6TH AVE SE STE 1
ABERDEEN, SD 57401
(605)225-3010

KESSLER'S PHARMACY
621 6TH AVE SE
ABERDEEN, SD 57401
(605)225-6673

KMART PHARMACY
1815 6TH AVE SE
ABERDEEN, SD 57401
(605)229-5500

PLAZA PHARMACY
2201 6TH AVE SE STE 23
ABERDEEN, SD 57401
(605)225-6344

SHOPKO PHARMACY
500 N HIGHWY 281
ABERDEEN, SD 57401
(605)225-3577

STATE STREET PHARMACY
105 S STATE ST STE 111
ABERDEEN, SD 57401
(605)225-1945

UNITED CLINIC PHARMACY
3015 3RD AVE SE STE 110
ABERDEEN, SD 57401
(605)225-4001

WAL-MART
3820 7TH AVE SE
ABERDEEN, SD 57401
(605)229-1519

NELSON DRUG
125 S MAIN ST
ARLINGTON, SD 57212
(605)983-5711

PRAIRIE PHARMACY
1311 BRADDOCK AVE
ARMOUR, SD 57313
(605)724-2970

LYNN'S DAKOTAMART PHARMACY
600 NATIONAL ST
BELLE FOURCHE, SD 57717
(605)892-2666

SHOPKO PHARMACY
1 N 5TH AVE
BELLE FOURCHE, SD 57717
(605)892-2252

LEWIS FAMILY DRUG
100 N 3RD ST
BERESFORD, SD 57004
(605)763-2633

TURNER DRUG
3033 MAIN ST
BOWDLE, SD 57428
(605)285-6121

BRANDON HEALTH MART PHARMACY
1517 W HOLLY BLVD
BRANDON, SD 57005
(605)582-6000

LEWIS DRUG
115 N SPLITROCK BLVD
BRANDON, SD 57005
(605)367-2910

HERITAGE PHARMACY
206 N MAIN AVE
BRIDGEWATER, SD 57319
(605)729-2744

QUARVE DRUG
710 MAIN ST
BRITTON, SD 57430
(605)448-2471

BROTHERS PHARMACY
1004 6TH ST
BROOKINGS, SD 57006
(605)692-2088

HY-VEE PHARMACY
790 22ND AVE S
BROOKINGS, SD 57006
(605)692-7311

LEWIS DRUG
910 22ND AVE S
BROOKINGS, SD 57006
(605)692-8881

SDSU JACKRABBIT PHARMACY
N CAMPUS DR
BROOKINGS, SD 57007
(605)688-5410

WAL-MART
2233 6TH ST
BROOKINGS, SD 57006
(605)692-1858

BURKE COMMUNITY PHARMACY
814 JACKSON ST
BURKE, SD 57523
(605)775-2294

HAISCH PHARMACY
303 E 5TH ST
CANTON, SD 57013
(605)987-2661

LEWIS FAMILY DRUG
715 E 5TH ST
CANTON, SD 57013
(605)987-4284

CENTERVILLE PHARMACY
513 BROADWAY
CENTERVILLE, SD 57014
(605)563-2243

LEWIS FAMILY DRUG
107 N MAIN ST
CHAMBERLAIN, SD 57325
(605)734-5871

CLARK COMMUNITY PHARMACY
211 N COMMERCIAL ST
CLARK, SD 57225
(605)532-3400

DEUEL COUNTY PHARMACY
411 3RD AVE S
CLEAR LAKE, SD 57226
(605)874-8220

PRAIRIE PHARMACY CORSICA
230 E MAIN ST
CORSICA, SD 57328
(605)946-5690

CARSON DRUG
521 MOUNT RUSHMORE RD
CUSTER, SD 57730
(605)673-2225

DUNES FAMILY PHARMACY
101 TOWER RD STE 130
DAKOTA DUNES, SD 57049
(605)242-5050

LEWIS FAMILY DRUG
213 CALUMET AVE SW
DE SMET, SD 57231
(605)854-9033

WHITE DRUG
71 CHARLES ST
DEADWOOD, SD 57732
(605)578-1512

LEWIS FAMILY DRUG
335 E 4TH ST
DELL RAPIDS, SD 57022
(605)428-5440

VILAS PHARMACY
123 MAIN ST
EAGLE BUTTE, SD 57625
(605)964-8955

PIONEER DRUG
107 E MAIN ST
ELK POINT, SD 57025
(605)356-3336

VILAS PHARMACY
712 7TH ST
EUREKA, SD 57437
(605)284-2752

VILAS PHARMACY
100 MAIN ST
FAITH, SD 57626
(605)967-2123

FAULKTON DRUG
118 8TH AVE S
FAULKTON, SD 57438
(605)598-4187

LEWIS FAMILY DRUG
127 E 2ND AVE
FLANDREAU, SD 57028
(605)997-2122

SHANES PHARMACY
202 ISLAND DR
FORT PIERRE, SD 57532
(605)223-9200

HERTIAGE PHARMACY
609 S US HIGHWAY 81
FREEMAN, SD 57029
(605)925-4510

NORM'S THRIFTY WHITE
389 S MAIN ST
FREEMAN, SD 57029
(605)925-7059

VILAS PHARMACY
103 E COMMERCIAL AVE
GETTYSBURG, SD 57442
(605)765-9458

GREGORY DRUG
604 MAIN ST
GREGORY, SD 57533
(605)835-8198

LORI'S PHARMACY
1205 N 1ST ST
GROTON, SD 57445
(605)397-2363

MEDICAP PHARMACY
304 W HIGHWAY 38 STE 102
HARTFORD, SD 57033
(605)528-2000

FALL RIVER HOSPITAL PHARMACY
1201 HIGHWAY 71 S
HOT SPRINGS, SD 57747
(605)745-3159

LYNN'S DAKOTAMART PHARMACY
501 S 6TH ST
HOT SPRINGS, SD 57747
(605)745-3110

SHOPKO PHARMACY
2701 18 HIGHWAY W
HOT SPRINGS, SD 57747
(605)745-4681

RAFFERTY-ROBBINS DRUG STORE
108 S MAIN ST
HOWARD, SD 57349
(605)772-5581

COBORNS PHARMACY
2150 DAKOTA AVE S
HURON, SD 57350
(605)352-1641

KMART PHARMACY
1000 18TH ST SW
HURON, SD 57350
(605)352-4525

LEWIS DRUG
1950 DAKOTA AVE S
HURON, SD 57350
(605)352-6495

NORTHSIDE PHARMACY
100 DAKOTA AVE N STE A
HURON, SD 57350
(605)352-9222

WAL-MART
2791 DAKOTA AVE S
HURON, SD 57350
(605)353-9513

VILAS PHARMACY
401 5TH AVE
IPSWICH, SD 57451
(605)426-6551

WOLLMAN ANDES PHARMACY
332 MAIN ST
LAKE ANDES, SD 57356
(605)487-7685

SMITH'S DRUG
301 MAIN AVE
LEMMON, SD 57638
(605)374-3897

LEWIS FAMILY DRUG
216 S MAIN ST
LENNOX, SD 57039
(605)647-2256

LEWIS DRUG
741 S WASHINGTON AVE
MADISON, SD 57042
(605)256-3571

SHOPKO PHARMACY
800 S WASHINGTON AVE
MADISON, SD 57042
(605)256-6169

GETSKOW PHARMACY
105 N BROADWAY AVE
MARION, SD 57043
(605)648-3751

GETSKOW PHARMACY
105 N BROADWAY
MARION, SD 57043
(605)648-3751

MARTIN DRUG
304 MAIN ST
MARTIN, SD 57551
(605)685-6200

BIEN PHARMACY
222 S MAIN ST
MILBANK, SD 57252
(605)432-5781

LIEBE DRUG
109 S MAIN ST
MILBANK, SD 57252
(605)432-5541

MILLER REXALL DRUG
209 N BROADWAY AVE
MILLER, SD 57362
(605)853-3649

MISSION COMMUNITY PHARMACY
161 S MAIN ST
MISSION, SD 57555
(605)856-2120

CAMPUS PHARMACY
525 N FOSTER ST
MITCHELL, SD 57301
(605)995-5670

KMART PHARMACY
1313 S BURR ST
MITCHELL, SD 57301
(605)996-1384

LEWIS FAMILY DRUG
1305 W HAVENS AVE
MITCHELL, SD 57301
(605)292-4000

LEWIS FAMILY DRUG
1507 N MAIN ST
MITCHELL, SD 57301
(605)292-1013

SHOPKO PHARMACY
1900 N MAIN ST
MITCHELL, SD 57301
(605)996-6568

WAL-MART
1101 E SPRUCE ST
MITCHELL, SD 57301
(605)995-6845

FAMILY PHARMACY
323 MAIN ST
MOBRIDGE, SD 57601
(605)845-3345

FAMILY PHARMACY
1317 10TH AVE W # 759
MOBRIDGE, SD 57601
(605)845-8140

PARKER PHARMACY
27516 SD HIGHWAY 19 STE 2
PARKER, SD 57053
(605)297-3235

MEDICINE SHOPPE PHARMACY
102 W MAIN
PARKSTON, SD 57366
(605)928-3661

South Dakota Providers

Participating Pharmacies

PARKSTON DRUG
112 W MAIN ST
PARKSTON, SD 57366
(605)928-3125

ZEEB PHARMACY
130 S CENTER AVE
PHILIP, SD 57567
(605)859-2833

KMART PHARMACY
1615 N HARRISON AVE
PIERRE, SD 57501
(605)224-1655

LYNN'S DAKOTAMART PHARMACY
120 W SIOUX AVE
PIERRE, SD 57501
(605)224-7396

VILAS PHARMACY
100 MAC LN STE 2
PIERRE, SD 57501
(605)224-7334

WAL-MART
1730 N GARFIELD RD
PIERRE, SD 57501
(605)224-8766

HOFFMAN DRUG
408 MAIN ST
PLATTE, SD 57369
(605)337-3662

PRESHO COMMUNITY PHARMACY
103 W HIGHWAY 16
PRESHO, SD 57568
(605)895-6337

BOYDS DRUG MART
909 E SAINT PATRICK ST
RAPID CITY, SD 57701
(605)348-0741

BOYDS DRUG MART
655 MOUNTAIN VIEW RD
RAPID CITY, SD 57702
(605)343-4445

BOYDS DRUG RX EXPRESS
2650 MOUNT RUSHMORE RD
RAPID CITY, SD 57701
(605)718-4040

FAMILY THRIFT CENTER
855 OMAHA ST
RAPID CITY, SD 57701
(605)343-8542

FAMILY THRIFT CTR PHCY
1516 E ST PATRICK ST
RAPID CITY, SD 57703
(605)343-6214

FTC EXPRESS PHARMACY
3464 STURGIS RD
RAPID CITY, SD 57702
(605)348-4414

KMART PHARMACY
1111 E NORTH ST
RAPID CITY, SD 57701
(605)343-2248

MEDICAP PHARMACY
339 SAINT PATRICK ST
RAPID CITY, SD 57701
(605)388-3622

MEDICINE SHOPPE PHARMACY
1304 MT RUSHMORE RD
RAPID CITY, SD 57701
(605)348-6305

PHARMERICA
3615 5TH ST STE 109
RAPID CITY, SD 57701
(605)342-8132

RAPIDCARE - RAPID CITY
408 KNOLLWOOD DR
RAPID CITY, SD 57701
(605)341-6600

REGIONAL LONG TERM CARE PHCY
1906 LOMBARDY DR
RAPID CITY, SD 57703
(605)755-3060

REGIONAL PHARMACY
353 FAIRMONT BLVD
RAPID CITY, SD 57701
(605)719-8184

SAFEWAY PHARMACY
2120 MOUNT RUSHMORE RD
RAPID CITY, SD 57701
(605)348-7552

SAFEWAY PHARMACY
730 MOUNTAIN VIEW RD
RAPID CITY, SD 57702
(605)342-8505

SAM'S CLUB
925 EGLIN ST
RAPID CITY, SD 57701
(605)877-3103

SHOPKO PHARMACY
1845 HAINES AVE
RAPID CITY, SD 57701
(605)342-1055

TARGET PHARMACY
1415 EGLIN ST
RAPID CITY, SD 57703
(605)341-8621

WAL-MART
1200 LACROSSE ST
RAPID CITY, SD 57701
(605)342-0881

WAL-MART
100 STUMMER RD
RAPID CITY, SD 57701
(605)343-1872

RANDALL PHARMACY
1010 W 1ST ST STE 2
REDFIELD, SD 57469
(605)472-1810

SALEM COMMUNITY DRUG
300 N MAIN ST
SALEM, SD 57058
(605)425-2827

SCOTLAND PHARMACY
620 BILLARS ST
SCOTLAND, SD 57059
(605)583-2514

AVERA 69TH STREET PHARMACY
4400 W 69TH ST STE 300
SIOUX FALLS, SD 57108
(605)322-5948

AVERA DERMATOLOGY PHARMACY
6701 S MINNESOTA AVE
SIOUX FALLS, SD 57108
(605)322-7695

AVERA MCKENNAN CAMPUS PHARMACY
1325 S CLIFF AVE STE CP
SIOUX FALLS, SD 57105
(605)322-8326

AVERA SPECIALTY PHARMACY
1301 S CLIFF AVE STE 200
SIOUX FALLS, SD 57105
(605)322-8360

CARETRENDS PHARMACY
6709 S MINNESOTA AVE
SIOUX FALLS, SD 57108
(605)338-9383

CLINIC PHARMACIES
2333 W 57TH ST STE 109
SIOUX FALLS, SD 57108
(605)331-3190

COMPLETE HOME CARE
1104 W RUSSELL ST
SIOUX FALLS, SD 57104
(605)338-9383

COSTCO
3700 S GRANGE AVE
SIOUX FALLS, SD 57105
(605)988-9150

HY-VEE PHARMACY
3000 S MINNESOTA AVE
SIOUX FALLS, SD 57105
(605)334-8012

HY-VEE PHARMACY
1231 E 57TH ST
SIOUX FALLS, SD 57103
(605)274-7062

HY-VEE PHARMACY
3020 E 10TH ST
SIOUX FALLS, SD 57103
(605)336-8998

HY-VEE PHARMACY
4101 S LOUISE AVE
SIOUX FALLS, SD 57106
(605)361-1382

HY-VEE PHARMACY
2700 W 10TH ST
SIOUX FALLS, SD 57104
(605)271-1645

HY-VEE PHARMACY
1900 S MARION RD
SIOUX FALLS, SD 57106
(605)361-3347

HY-VEE PHARMACY
1601 S SYCAMORE AVE
SIOUX FALLS, SD 57110
(605)334-1173

KMART PHARMACY
3709 E 10TH ST
SIOUX FALLS, SD 57103
(605)332-0102

KMART PHARMACY
3020 12TH ST W
SIOUX FALLS, SD 57104
(605)339-3111

LEWIS DRUG
2700 W 12TH ST
SIOUX FALLS, SD 57104
(605)367-2210

LEWIS DRUG
6109 S LOUISE AVE
SIOUX FALLS, SD 57108
(605)367-2510

LEWIS DRUG
1301 E 10TH ST
SIOUX FALLS, SD 57103
(605)367-2310

LEWIS DRUG
4409 E 26TH ST
SIOUX FALLS, SD 57103
(605)367-2710

LEWIS DRUG
5500 W 41ST ST
SIOUX FALLS, SD 57106
(605)367-2610

LEWIS DRUG
6110 S MINNESOTA AVE
SIOUX FALLS, SD 57108
(605)367-2810

LEWIS DRUG
500 41ST ST W
SIOUX FALLS, SD 57105
(605)367-2110

LEWIS DRUGS
2701 S MINNESOTA AVE STE 1
SIOUX FALLS, SD 57105
(605)367-2828

LEWIS FAMILY DRUG
1205 S GRANGE AVE
SIOUX FALLS, SD 57105
(605)328-2620

OMNICARE PHARMACY
709 N KIWANIS AVE
SIOUX FALLS, SD 57104
(605)338-9980

PHARMERICA
1507 W 51ST ST
SIOUX FALLS, SD 57105
(605)338-7007

SAM'S CLUB
3201 S LOUISE AVE
SIOUX FALLS, SD 57106
(605)362-2625

SANFORD CANCER CENTER ONCOLOGY
1309 W 17TH ST STE 101
SIOUX FALLS, SD 57104
(605)328-8040

SANFORD CANCER CTR ONC CLNC
1309 W 17TH ST STE 101
SIOUX FALLS, SD 57104
(605)328-8040

SHOPKO PHARMACY
1601 41ST ST W
SIOUX FALLS, SD 57105
(605)338-3155

SHOPKO PHARMACY
4501 E ARROWHEAD PKWY
SIOUX FALLS, SD 57103
(605)335-8806

SIOUX FALLS SURGICAL CENTER
910 E 20TH ST
SIOUX FALLS, SD 57105
(605)335-4202

TARGET PHARMACY
1021 S HIGHLINE PL
SIOUX FALLS, SD 57110
(605)333-5601

TARGET PHARMACY
3600 S LOUISE AVE
SIOUX FALLS, SD 57106
(605)254-1100

VAN HOVE PRESCRIPTION SHOP
1200 S 7TH AVE
SIOUX FALLS, SD 57105
(605)336-1816

WAL-MART
3209 S LOUISE AVE
SIOUX FALLS, SD 57106
(605)362-1602

WAL-MART PHARMACY #10-3237
5521 E ARROWHEAD PKWY
SIOUX FALLS, SD 57110
(605)367-3206

SHOPKO PHARMACY
1712 SD HIGHWAY 10
SISSETON, SD 57262
(605)742-0011

KMART PHARMACY
2323 COLORADO BLVD
SPEARFISH, SD 57783
(605)642-8749

MEDICAP PHARMACY
1330 NORTH AVE
SPEARFISH, SD 57783
(605)642-2442

REGIONAL PHARMACY
1420 N 10TH ST STE 1
SPEARFISH, SD 57783
(605)717-8741

SAFEWAY PHARMACY
1606 NORTH AVE STE 2
SPEARFISH, SD 57783
(605)642-3039

WAL-MART
2825 1ST AVE
SPEARFISH, SD 57783
(605)642-3025

COUNTY DRUG
1111 LAZELLE ST
STURGIS, SD 57785
(605)347-2466

SHOPKO PHARMACY
2105 LAZELLE ST STE 2
STURGIS, SD 57785
(605)347-4553

LEWIS DRUGS
720 E 1ST ST
TEA, SD 57064
(605)368-9001

BON HOMME PHARMACY
410 W 16TH AVE
TYNDALL, SD 57066
(605)589-4418

DAVIS PHARMACY
5 W CHERRY ST
VERMILLION, SD 57069
(605)624-4444

HY-VEE PHARMACY
525 W CHERRY ST
VERMILLION, SD 57069
(605)624-9591

SANFORD VERMILLION MED CENTER
20 S PLUM ST
VERMILLION, SD 57069
(605)638-8455

South Dakota Providers

Participating Pharmacies

WAL-MART
1207 PRINCETON ST
VERMILLION, SD 57069
(605)624-4106

LEWIS FAMILY DRUG
104 W PARK AVE
VIBORG, SD 57070
(605)326-5211

JAMES DRUG
201 S MAIN AVE
WAGNER, SD 57380
(605)384-3541

WALL DRUG STORE
510 MAIN ST
WALL, SD 57790
(605)279-2175

BROWN CLINIC PHARMACY
506 1ST AVE SE
WATERTOWN, SD 57201
(605)884-4234

GENOA HEALTHCARE
123 19TH ST NE
WATERTOWN, SD 57201
(605)882-9400

HY-VEE PHARMACY
1320 9TH AVE SE
WATERTOWN, SD 57201
(605)886-0661

PRAIRIE LAKES CAMPUS PHARMACY
401 9TH AVE NW
WATERTOWN, SD 57201
(605)882-7790

SHOPKO PHARMACY
700 9TH AVE SE
WATERTOWN, SD 57201
(605)882-2011

WAL-MART
1201 29TH ST SE
WATERTOWN, SD 57201
(605)886-8419

CORNWELL DRUG
701 MAIN ST
WEBSTER, SD 57274
(605)345-3351

THORNTON DRUG
202 E MAIN ST
WESSINGTON SPGS, SD 57382
(605)539-1421

RANCHLAND DRUG
101 N MAIN ST
WHITE RIVER, SD 57579
(605)259-3102

SHOPKO PHARMACY
1140 E 5TH ST
WINNER, SD 57580
(605)842-3242

WINNER HEALTH MART PHARMACY
702 W 2ND ST
WINNER, SD 57580
(605)842-2270

AVERA SACRED HEART HOSP PHCY
501 SUMMIT ST
YANKTON, SD 57078
(605)668-8303

HY-VEE PHARMACY
2100 N BROADWAY AVE
YANKTON, SD 57078
(605)665-8261

KMART PHARMACY
2210 BROADWAY AVE
YANKTON, SD 57078
(605)665-7920

ROGER'S FAMILY PHARMACY
218 W 4TH ST
YANKTON, SD 57078
(605)665-8042

SD HUMAN SERVICES CENTER PHCY
3515 BROADWAY AVE
YANKTON, SD 57078
(605)668-3155

WAL-MART
3001 BROADWAY AVE
YANKTON, SD 57078
(605)665-8197

YANKTON DRUG CO
109 W 3RD ST
YANKTON, SD 57078
(605)665-7865

YANKTON MEDICAL CLINIC PHCY
1104 W 8TH ST
YANKTON, SD 57078
(605)665-2929

EXPRESS SCRIPTS®

Lag Triangle Report

Test Population

Claim Invoice Dates:01/2012 - 09/2012

Channel: Mail and Retail

Bill Month

Fill Month		JAN 2012	FEB 2012	MAR 2012	APR 2012	MAY 2012	JUN 2012	JUL 2012	AUG 2012	SEP 2012	Total
FEB 2006	Invoice Cost	$0	$0	$0	$0	$27.92	$0	$0	$0	$0	**$27.92**
	Claim Count	0	0	0	0	0	0	0	0	0	**0**
MAR 2006	Invoice Cost	$0	$0	$0	$0	$27.92	$0	$0	$0	$0	**$27.92**
	Claim Count	0	0	0	0	0	0	0	0	0	**0**
SEP 2006	Invoice Cost	$0	$0	$0	$0	$0	$0	$0	$0	$66.19	**$66.19**
	Claim Count	0	0	0	0	0	0	0	0	0	**0**
OCT 2006	Invoice Cost	$0	$0	$0	$0	$0	$0	$0	$0	$63.81	**$63.81**
	Claim Count	0	0	0	0	0	0	0	0	0	**0**
NOV 2006	Invoice Cost	$0	$0	$0	$0	$0	$0	$0	$0	$196.11	**$196.11**
	Claim Count	0	0	0	0	0	0	0	0	0	**0**
DEC 2006	Invoice Cost	$0	$0	$0	$0	$0	$0	$0	$0	$94.26	**$94.26**
	Claim Count	0	0	0	0	0	0	0	0	0	**0**
JAN 2007	Invoice Cost	$0	$0	$0	$0	$0	$0	$0	$0	$100.66	**$100.66**
	Claim Count	0	0	0	0	0	0	0	0	0	**0**
FEB 2007	Invoice Cost	$0	$0	$0	$0	$0	$0	$0	$0	$100.66	**$100.66**
	Claim Count	0	0	0	0	0	0	0	0	0	**0**
MAR 2007	Invoice Cost	$0	$0	$0	$0	$0	$0	$0	$0	$141.95	**$141.95**
	Claim Count	0	0	0	0	0	0	0	0	0	**0**
APR 2007	Invoice Cost	$0	$0	$0	$0	$0	$0	$22.94	$0	$105.66	**$128.60**
	Claim Count	0	0	0	0	0	0	0	0	0	**0**
MAY 2007	Invoice Cost	$0	$0	$0	$0	$0	$0	$0	$0	$184.88	**$184.88**
	Claim Count	0	0	0	0	0	0	0	0	0	**0**
JUN 2007	Invoice Cost	$0	$0	$0	$0	$0	$0	$0	$0	$133.14	**$133.14**
	Claim Count	0	0	0	0	0	0	0	0	0	**0**
AUG 2007	Invoice Cost	$0	$0	$0	$0	$0	$0	$0	$0	$93.86	**$93.86**
	Claim Count	0	0	0	0	0	0	0	0	0	**0**

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EXPRESS SCRIPTS®

Lag Triangle Report

Test Population

Claim Invoice Dates:01/2012 - 09/2012

Channel: Mail and Retail

Bill Month

Fill Month		JAN 2012	FEB 2012	MAR 2012	APR 2012	MAY 2012	JUN 2012	JUL 2012	AUG 2012	SEP 2012	Total
MAY 2012	Invoice Cost	$0	$0	$0	$0	$38,544,523.90	$11,444,348.26	$160,837.69	$62,135.04	$34,142.43	**$50,245,987.32**
	Claim Count	0	0	0	0	584,587	147,321	1,738	728	358	**734,732**
JUN 2012	Invoice Cost	$0	$0	$0	$0	$0	$31,195,795.26	$14,425,492.80	$211,836.19	$55,850.36	**$45,888,974.61**
	Claim Count	0	0	0	0	0	495,443	197,886	2,318	793	**696,440**
JUL 2012	Invoice Cost	$0	$0	$0	$0	$0	$0	$27,573,841.75	$19,077,130.04	$298,447.86	**$46,949,419.65**
	Claim Count	0	0	0	0	0	0	441,716	264,317	2,486	**708,519**
AUG 2012	Invoice Cost	$0	$0	$0	$0	$0	$0	$0	$24,047,726.58	$24,011,553.57	**$48,059,280.15**
	Claim Count	0	0	0	0	0	0	0	382,056	348,496	**730,552**
SEP 2012	Invoice Cost	$0	$0	$0	$0	$0	$0	$0	$0	$18,549,448.11	**$18,549,448.11**
	Claim Count	0	0	0	0	0	0	0	0	300,888	**300,888**
Total	**Invoice Cost**	**$41,398,762.35**	**$44,470,479.69**	**$44,846,183.13**	**$43,933,130.51**	**$67,983,128.96**	**$42,951,015.02**	**$42,296,156.92**	**$43,561,892.22**	**$43,092,173.43**	**$414,532,922.23**
Total	**Claim Count**	**641,973**	**672,799**	**671,843**	**664,962**	**1,003,605**	**646,540**	**643,387**	**650,943**	**654,343**	**6,250,395**

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BL020

EXPRESS SCRIPTS®

Benchmark Key Performance Comparison

Benchmark Population: Commercial Division (CD)

Member Population: Test Population

Prescription Service Dates: 01/2012 - 12/2012

	Benchmark			Member Population
Overall Performance	**LOW**	**MEDIUM**	**HIGH**	
Plan Cost PMPM	$51.76	$69.02	$93.07	$78.10
Rx Measures				
Rx PMPM	0.63	0.78	0.98	1.11
Average Plan Cost/Rx	$72.00	$88.36	$106.78	$70.15
Average Mbr Cost/Rx	$13.91	$18.05	$22.89	$21.42
Average AWP/Rx	$0.10	$149.29	$199.26	$188.18
Average Days of Therapy/Rx	$32.00	$36.00	$42.00	$46.07
Average Plan Cost/Day	$2.02	$2.40	$2.79	$1.52
Avg Plan Cost/Day - Retail	$1.88	$2.35	$2.85	$1.17
Avg Plan Cost/Day - Mail	$1.85	$2.40	$3.01	$1.85
Member Cost %	12.6 %	16.7 %	22.0 %	23.4 %
Member Cost % - Retail	14.8 %	20.5 %	26.7 %	32.5 %
Member Cost % - Mail	8.5 %	12.6 %	17.4 %	16.8 %
Channel				
Rx % - Mail	9.8 %	17.4 %	28.5 %	28.0 %
Rx % - Retail	99.9 %	100.0 %	100.0 %	71.4 %
Rx % - Member Submit	0.0 %	0.0 %	0.1 %	0.6 %
Rx Types				
Rx % - SSB	19.2 %	21.6 %	24.1 %	18.8 %
Rx % - MSB	0.4 %	0.9 %	1.5 %	1.0 %
Rx % - Generic	74.4 %	77.5 %	80.1 %	80.2 %
SSB Rx % - Retail	17.1 %	19.9 %	22.6 %	16.7 %
MSB Rx % - Retail	0.3 %	0.8 %	1.4 %	1.1 %
Generic Rx % - Retail	76.0 %	79.2 %	82.2 %	82.2 %
SSB Rx % - Mail	24.5 %	27.8 %	31.4 %	24.1 %
MSB Rx % - Mail	0.4 %	1.1 %	1.8 %	0.8 %
Generic Rx % - Mail	67.1 %	71.0 %	74.6 %	75.1 %
Rx % - Preferred Drug	92.6 %	93.9 %	94.9 %	93.7 %
Preferred Drug Rx % - Retail	92.4 %	93.7 %	95.1 %	92.9 %
Preferred Drug Rx % - Mail	91.9 %	94.0 %	95.6 %	95.7 %
Rx % - DAW	1.2 %	1.8 %	2.6 %	2.0 %
DAW Rx % - Retail	1.0 %	1.8 %	2.7 %	2.4 %
DAW Rx % - Mail	1.2 %	1.8 %	2.8 %	1.2 %
Generic Conversion %	98.0 %	98.9 %	99.5 %	98.7 %
Generic Conversion % - Retail	98.1 %	99.0 %	99.6 %	98.6 %
Generic Conversion % - Mail	97.4 %	98.5 %	99.5 %	99.0 %
Demographics				
Average Age	33.7	36.2	40.0	50.66
Male Members %	45.2 %	49.6 %	53.3 %	49.3 %
Female Members %	46.6 %	50.3 %	54.7 %	50.7 %

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EXPRESS SCRIPTS®

Specialty Utilization Summary

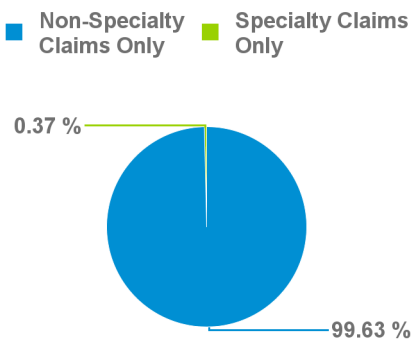
Test Population

Prescription Service Dates: 01/2012 - 12/2012

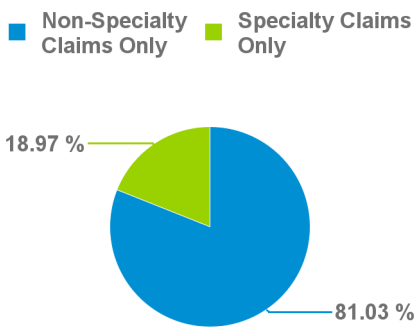
	Rx Count	Unique Patients	Ingredient Cost	Dispensing Fee	Sales Tax	Member Cost	Plan Cost
Total (All Drugs)	8,278,554	471,783	$750,404,581	$7,169,492	$502,156	$177,350,301	$580,725,928
Total Specialty	30,836	8,774	$115,088,304	$13,197	$45,574	$4,961,386	$110,185,689
Total Specialty filled at Accredo	22,714	4,909	$105,995,337	$4,337	$40,171	$4,401,047	$101,638,799

Total Specialty as a % of All Drugs	0.4 %	1.9 %	15.3 %	0.2 %	9.1 %	2.8 %	19.0 %
Accredo Fills as a % of Total Specialty	73.7 %	55.9 %	92.1 %	32.9 %	88.1 %	88.7 %	92.2 %

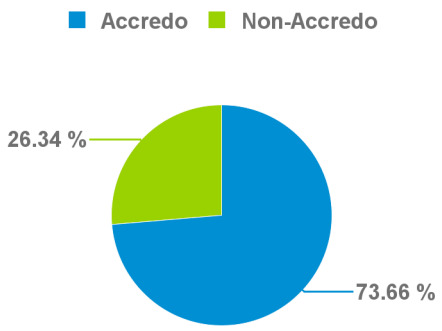
Total Specialty Rxs as a % of All Drugs



Total Specialty Plan Cost as a % of All Drugs



Accredo Rxs as a % of Total Specialty



ESI current all-inclusive specialty drug list was used to generate this report.

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SG020

4/11/13

EXPRESS SCRIPTS®

Drug Brand Name Trend - Top 25 by Ingredient Cost

Test Population

Current Period: 09/2012 - 10/2012

Previous Period: 07/2012 - 08/2012

		Current Period					Previous Period					% Change
Drug Brand Name	Indication	Ing Cost Rank	Ing Cost	Rx Count	Ing Cost/Rx	Mail Rx %	Ing Cost Rank	Ing Cost	Rx Count	Ing Cost/Rx	Mail Rx %	Ing Cost
NEXIUM	ULCER DISEASE	1	$2,558,779.64	7,892	$324.22	35.7%	1	$1,290,108.81	4,000	$322.53	34.6%	98.3%
HUMIRA	INFLAMMATORY CONDITIONS	2	$1,722,526.04	420	$4,101.25	98.8%	2	$906,102.02	220	$4,118.65	99.1%	90.1%
CRESTOR	HIGH BLOOD CHOLESTEROL	3	$1,432,245.25	5,333	$268.56	43.5%	4	$738,525.67	2,738	$269.73	44.2%	93.9%
ENBREL	INFLAMMATORY CONDITIONS	4	$1,326,516.08	339	$3,913.03	99.4%	3	$881,626.39	212	$4,158.62	99.5%	50.5%
CYMBALTA	DEPRESSION	5	$1,170,361.29	3,603	$324.83	27.1%	6	$590,137.19	1,809	$326.22	26.7%	98.3%
COPAXONE	MULTIPLE SCLEROSIS	6	$1,047,238.07	143	$7,323.34	100.0%	7	$581,957.17	79	$7,366.55	100.0%	80.0%
ADVAIR DISKUS	ASTHMA	7	$1,034,503.08	2,964	$349.02	27.0%	8	$535,462.66	1,526	$350.89	29.6%	93.2%
REMICADE	INFLAMMATORY CONDITIONS	8	$964,407.93	226	$4,267.29	99.6%	5	$639,822.14	148	$4,323.12	100.0%	50.7%
ABILIFY	MENTAL/NEURO DISORDERS	9	$931,745.32	1,275	$730.78	10.6%	9	$475,993.22	665	$715.78	9.3%	95.7%
COMPOUND	MISC CONDITIONS	10	$814,252.15	2,954	$275.64	1.2%	12	$358,193.75	1,522	$235.34	1.1%	127.3%
OXYCONTIN	PAIN	11	$635,554.90	1,344	$472.88	1.3%	13	$349,331.18	721	$484.51	1.8%	81.9%
VYVANSE	ATTENTION DISORDERS	12	$601,901.11	3,406	$176.72	5.5%	17	$283,739.67	1,614	$175.80	5.0%	112.1%
ANDROGEL	HORMONAL SUPPLEMENTATION	13	$600,644.14	1,275	$471.09	16.7%	16	$291,512.64	641	$454.78	15.6%	106.0%
DEXTROAMPHETAMINE-AMPHETAM	ATTENTION DISORDERS	14	$571,440.34	3,339	$171.14	3.4%	20	$268,737.04	1,591	$168.91	2.3%	112.6%
DIOVAN	HIGH BLOOD PRESS/HEART DISEAS	15	$556,029.29	2,832	$196.34	43.2%	22	$266,887.27	1,414	$188.75	43.7%	108.3%
SOLODYN	INFECTIONS	16	$550,519.14	683	$806.03	1.3%	15	$298,240.12	370	$806.05	1.6%	84.6%
ATORVASTATIN CALCIUM	HIGH BLOOD CHOLESTEROL	17	$509,455.58	9,292	$54.83	42.0%	21	$267,039.74	4,706	$56.74	44.9%	90.8%
ATRIPLA	VIRAL INFECTIONS	18	$502,352.07	221	$2,273.09	17.6%	19	$269,871.99	118	$2,287.05	17.8%	86.1%
GILENYA	MULTIPLE SCLEROSIS	19	$501,269.34	71	$7,060.13	100.0%	23	$266,160.71	38	$7,004.23	100.0%	88.3%
SUBOXONE	CHEMICAL DEPENDENCE	20	$493,250.31	1,776	$277.73	0.5%	25	$260,094.55	909	$286.13	0.4%	89.6%
GLEEVEC	CANCER	21	$484,992.35	39	$12,435.70	94.9%	11	$368,403.11	23	$16,017.53	95.7%	31.6%
METHYLPHENIDATE ER	ATTENTION DISORDERS	22	$484,963.89	2,492	$194.61	5.9%	26	$248,284.60	1,265	$196.27	6.8%	95.3%

4/24/13

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TR260

EXPRESS SCRIPTS®

Drug Brand Name Trend - Top 1,000 by Ingredient Cost

Test Population

Current Period: 09/2012 - 10/2012

Previous Period: 07/2012 - 08/2012

		Current Period					Previous Period					% Change
Drug Brand Name	Indication	Ing Cost Rank	Ing Cost	Rx Count	Ing Cost/Rx	Mail Rx %	Ing Cost Rank	Ing Cost	Rx Count	Ing Cost/Rx	Mail Rx %	Ing Cost
BANZEL	SEIZURES	573	$16,725.62	15	$1,115.04	20.0%	557	$9,245.26	10	$924.53	10.0%	80.9%
QUASENSE	CONTRACEPTIVES	574	$16,571.64	193	$85.86	45.6%	508	$10,570.98	123	$85.94	44.7%	56.8%
RENAGEL	KIDNEY DISEASE	575	$16,563.82	13	$1,274.14	23.1%	514	$10,374.20	8	$1,296.78	25.0%	59.7%
MEPRON	INFECTIONS	576	$16,536.69	14	$1,181.19	21.4%	608	$7,753.79	6	$1,292.30	16.7%	113.3%
VECTICAL	SKIN CONDITIONS	577	$16,534.38	29	$570.15	20.7%	774	$4,872.89	9	$541.43	11.1%	239.3%
NITROFURANTOIN	INFECTIONS	578	$16,502.47	241	$68.47	10.0%	559	$9,214.57	142	$64.89	7.7%	79.1%
KAPVAY	ATTENTION DISORDERS	579	$16,500.59	80	$206.26	6.3%	657	$6,617.80	34	$194.64	2.9%	149.3%
METHYLPHENIDATE ER-LA	ATTENTION DISORDERS	580	$16,471.55	108	$152.51	7.4%	633	$7,059.84	50	$141.20	8.0%	133.3%
TOBRADEX	EYE CONDITIONS	581	$16,458.82	110	$149.63	0.9%	578	$8,497.32	58	$146.51	1.7%	93.7%
HYDROCHLOROTHIAZIDE	HIGH BLOOD PRESSURE	582	$16,407.09	7,510	$2.18	27.2%	575	$8,619.96	3,826	$2.25	27.9%	90.3%
GLIPIZIDE XL	DIABETES	583	$16,315.82	453	$36.02	69.1%	638	$6,953.32	206	$33.75	66.0%	134.6%
TARKA	HIGH BLOOD PRESS/HEART DISEAS	584	$16,235.23	77	$210.85	49.4%	594	$8,201.23	35	$234.32	54.3%	98.0%
SKELAXIN	PAIN/CRAMPS	585	$16,195.16	48	$337.40	31.3%	446	$13,418.24	53	$253.17	32.1%	20.7%
DESONATE	SKIN CONDITIONS	586	$16,133.40	35	$460.95	11.4%	459	$12,806.91	32	$400.22	0.0%	26.0%
ATENOLOL	HIGH BLOOD PRESS/HEART DISEAS	587	$16,089.26	3,828	$4.20	30.1%	589	$8,293.55	1,995	$4.16	29.3%	94.0%
MESALAMINE	INFLAMMATORY CONDITIONS	588	$16,036.99	44	$364.48	9.1%	609	$7,687.42	21	$366.07	9.5%	108.6%
ILARIS	INFLAMMATORY CONDITIONS	589	$16,017.01	1	$16,017.01	0.0%	396	$16,017.01	1	$16,017.01	0.0%	0.0%
RAMIPRIL	HIGH BLOOD PRESS/HEART DISEAS	590	$16,003.64	1,319	$12.13	43.8%	576	$8,549.66	682	$12.54	44.0%	87.2%
TRANSDERM-SCOP	NAUSEA/VOMITING	591	$15,976.92	264	$60.52	0.8%	489	$11,029.26	165	$66.84	1.8%	44.9%
ALREX	EYE CONDITIONS	592	$15,954.42	107	$149.11	4.7%	577	$8,538.59	58	$147.22	3.4%	86.9%
CLODERM	SKIN CONDITIONS	593	$15,949.72	64	$249.21	3.1%	640	$6,916.19	32	$216.13	0.0%	130.6%
SUPPRELIN LA	ENDOCRINE DISORDERS	594	$15,921.34	1	$15,921.34	100.0%	402	$15,686.04	1	$15,686.04	0.0%	1.5%

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Percent of NDPERS Employees Meeting the Access						
Provider Type	Family/ General Practice	Pediatrics	Internal Medicine	OB/GYN	Specialists	Hospital
North Dakota						
ADAMS	100.0	100.0	100.0	0.0	100.0	86.1
BARNES	100.0	99.2	99.6	7.9	100.0	100.0
BENSON	100.0	60.7	45.8	0.0	94.4	100.0
BILLINGS	3.6	3.6	3.6	3.6	3.6	100.0
BOTTINEAU	93.0	2.9	4.0	2.2	98.2	84.2
BOWMAN	100.0	3.4	100.0	0.0	100.0	100.0
BURKE	67.9	0.0	0.0	0.0	88.7	100.0
BURLEIGH	100.0	99.8	99.8	99.8	99.9	100.0
CASS	100.0	99.5	99.9	99.2	100.0	100.0
CAVALIER	100.0	85.9	99.4	0.0	100.0	100.0
DICKEY	100.0	0.0	100.0	0.0	100.0	100.0
DIVIDE	1.2	0.0	1.2	0.0	95.3	1.2
DUNN	46.3	34.6	20.6	34.6	46.3	100.0
EDDY	100.0	3.9	3.9	0.0	100.0	100.0
EMMONS	100.0	6.9	100.0	3.4	97.7	100.0
FOSTER	100.0	0.0	0.0	0.0	100.0	100.0
GOLDEN VALLEY	0.0	0.0	0.0	0.0	0.0	15.4
GRAND FORKS	100.0	98.5	100.0	99.2	100.0	100.0
GRANT	100.0	0.0	62.7	0.0	54.2	100.0
GRIGGS	100.0	1.3	1.3	0.0	100.0	100.0
HETTINGER	100.0	65.3	100.0	36.7	100.0	100.0
KIDDER	100.0	0.0	60.3	0.0	48.5	89.7
LAMOURE	100.0	10.9	98.4	13.2	98.4	100.0
LOGAN	100.0	0.0	98.5	0.0	75.4	100.0
MCHENRY	99.2	42.0	42.0	42.0	100.0	100.0
MCINTOSH	100.0	0.0	60.2	0.0	100.0	100.0
MCKENZIE	31.8	0.0	13.6	0.0	28.8	93.9
MCLEAN	99.6	6.7	31.1	6.7	98.8	100.0
MERCER	100.0	0.0	0.0	0.0	100.0	100.0
MORTON	100.0	87.3	91.6	89.1	99.4	100.0
MOUNTRAIL	98.8	0.0	0.0	0.0	55.0	100.0
NELSON	88.1	35.6	53.3	0.0	100.0	100.0
OLIVER	100.0	21.7	87.0	32.6	100.0	100.0
PEMBINA	100.0	17.6	81.5	0.0	100.0	100.0
PIERCE	100.0	9.1	0.0	0.0	100.0	100.0
RAMSEY	99.6	99.0	99.5	0.0	100.0	100.0
RANSOM	100.0	5.6	100.0	1.4	100.0	100.0
RENVILLE	100.0	28.9	28.9	28.9	100.0	100.0
RICHLAND	100.0	87.8	100.0	97.0	100.0	90.4
ROLETTE	100.0	0.0	0.0	0.0	9.9	100.0
SARGENT	100.0	0.0	100.0	0.0	100.0	100.0
SHERIDAN	100.0	0.0	0.0	0.0	80.0	100.0

Provider Type	Family/ General Practice	Pediatrics	Internal Medicine	OB/GYN	Specialists	Hospital
SIOUX	76.5	47.1	52.9	35.3	64.7	100.0
SLOPE	100.0	100.0	100.0	0.0	100.0	100.0
STARK	100.0	99.9	99.6	99.9	100.0	100.0
STEELE	100.0	18.2	88.6	70.5	100.0	100.0
STUTSMAN	100.0	98.0	99.3	98.0	98.7	100.0
TOWNER	96.5	0.0	0.0	0.0	84.2	100.0
TRAILL	100.0	9.6	100.0	100.0	100.0	100.0
WALSH	100.0	0.0	100.0	3.3	100.0	100.0
WARD	100.0	96.3	96.4	96.3	100.0	100.0
WELLS	100.0	45.3	0.0	0.0	45.3	100.0
WILLIAMS	99.6	0.0	96.1	0.0	96.3	95.3

Attachment M - Suggested Changes to Plan Design, Programs and Services

Vendors should match the current programs and services as closely as possible when providing proposals. This appendix is meant for vendors to offer suggested changes to plan design and identify the cost or cost savings associated with each suggestion. In addition, vendors can suggest or offer changes to the services along with identification of the benefits/cost or savings. This section is not meant to list deviations to required agreements or service offerings.

Sanford Health Plan would welcome a dialogue to understand the priorities and future strategic goals of ND PERS in order to offer suggested changes and plan designs.

Formulary: CY 14 MHP Closed 3 Tier

RxCui	NDC	Drug Name	Dosage Form	Strength	Tier_Level_Value	Drug_Type_Label_Value	Quantity_Limit_Amount_YN	Quantity_Limit_Amount	Quantity_Limit_Days	Prior_Authorization_YN	Prior_Authorization_Group_Desc	Specialty Pharmacy Limited Access_YN	Medco FRS Therapeutic Category	Medco FRS Therapeutic Class	HPMS Therapeutic Category	HPMS Therapeutic Class	Step_Therapy_Type_Group_YN	Step_Therapy_Type_Group_Num	Step_Therapy_Type_Group_Desc_1	Step_Therapy_Type_Group_Step_1	Step_Therapy_Type_Group_Desc_2	Step_Therapy_Type_Group_Step_2	Admin Route	Generic Name	Substitution Indicator	Medco NDC	Med D Indicator
864082	57665010141	ABELCET	SUSP	5MG/ML	3	5	0			3		0	ANTI - INFECTIVES	ANTIFUNGAL AGENTS	ANTI - INFECTIVES	ANTIFUNGAL AGENTS	0						IV	AMPHOTERICIN B	W	57665010141	Enhanced
967388	00469305130	AMBISOME	SUSR	50MG	3	5	0			3		0	ANTI - INFECTIVES	ANTIFUNGAL AGENTS	ANTI - INFECTIVES	ANTIFUNGAL AGENTS	0						IV	AMPHOTERICIN B	W	00469305130	Enhanced
239240	39822105505	AMPHOTERICIN B	SOLR	50MG	1	2	0			3		0	ANTI - INFECTIVES	ANTIFUNGAL AGENTS	ANTI - INFECTIVES	ANTIFUNGAL AGENTS	0						IJ	AMPHOTERICIN B	Y	39822105505	Enhanced
828757	00006382210	CANCIDAS	SOLR	50MG	3	5	0			3		0	ANTI - INFECTIVES	ANTIFUNGAL AGENTS	ANTI - INFECTIVES	ANTIFUNGAL AGENTS	0						IV	CASPOFUNGIN ACETATE	W	00006382210	Enhanced
828541	00006382310	CANCIDAS	SOLR	70MG	3	5	0			3		0	ANTI - INFECTIVES	ANTIFUNGAL AGENTS	ANTI - INFECTIVES	ANTIFUNGAL AGENTS	0						IV	CASPOFUNGIN ACETATE	W	00006382310	Enhanced
309371	00054414623	CLOTRIMAZOLE	TROC	10MG	1	2	0			0		0	ANTI - INFECTIVES	ANTIFUNGAL AGENTS	ANTI - INFECTIVES	ANTIFUNGAL AGENTS	0						MT	CLOTRIMAZOLE	Y	00054414623	Enhanced
310352	00054000285	FLUCONAZOLE	SUSR	10MG/ML	1	2	0			0		0	ANTI - INFECTIVES	ANTIFUNGAL AGENTS	ANTI - INFECTIVES	ANTIFUNGAL AGENTS	0						OR	FLUCONAZOLE	Y	00054000285	Enhanced
310353	00054000385	FLUCONAZOLE	SUSR	40MG/ML	1	2	0			0		0	ANTI - INFECTIVES	ANTIFUNGAL AGENTS	ANTI - INFECTIVES	ANTIFUNGAL AGENTS	0						OR	FLUCONAZOLE	Y	00054000385	Enhanced
197698	00172541110	FLUCONAZOLE	TABS	100MG	1	2	0			0		0	ANTI - INFECTIVES	ANTIFUNGAL AGENTS	ANTI - INFECTIVES	ANTIFUNGAL AGENTS	0						OR	FLUCONAZOLE	Y	00172541110	Enhanced
197699	00172541211	FLUCONAZOLE	TABS	150MG	1	2	0			0		0	ANTI - INFECTIVES	ANTIFUNGAL AGENTS	ANTI - INFECTIVES	ANTIFUNGAL AGENTS	0						OR	FLUCONAZOLE	Y	00172541211	Enhanced
197700	00172541346	FLUCONAZOLE	TABS	200MG	1	2	0			0		0	ANTI - INFECTIVES	ANTIFUNGAL AGENTS	ANTI - INFECTIVES	ANTIFUNGAL AGENTS	0						OR	FLUCONAZOLE	Y	00172541346	Enhanced
197701	00172541046	FLUCONAZOLE	TABS	50MG	1	2	0			0		0	ANTI - INFECTIVES	ANTIFUNGAL AGENTS	ANTI - INFECTIVES	ANTIFUNGAL AGENTS	0						OR	FLUCONAZOLE	Y	00172541046	Enhanced
252432	00409468402	FLUCONAZOLE IN DEXTROSE	SOLN	56MG/ML; 400MG/200ML	1	2	0			0		0	ANTI - INFECTIVES	ANTIFUNGAL AGENTS	ANTI - INFECTIVES	ANTIFUNGAL AGENTS	0						IV	DEXTROSE MONOHYDRATE;	Y	00409468402	Enhanced
197702	64980017901	FLUCYTOSINE	CAPS	250MG	3	5	0			0		0	ANTI - INFECTIVES	ANTIFUNGAL AGENTS	ANTI - INFECTIVES	ANTIFUNGAL AGENTS	0						OR	FLUCYTOSINE	Y	64980017901	Enhanced
197703	64980018001	FLUCYTOSINE	CAPS	500MG	3	5	0			0		0	ANTI - INFECTIVES	ANTIFUNGAL AGENTS	ANTI - INFECTIVES	ANTIFUNGAL AGENTS	0						OR	FLUCYTOSINE	W	64980018001	Enhanced
239238	00093710212	GRISEOFULVIN MICROSIZE	SUSP	125MG/5ML	1	2	0			0		0	ANTI - INFECTIVES	ANTIFUNGAL AGENTS	ANTI - INFECTIVES	ANTIFUNGAL AGENTS	0						OR	GRISEOFULVIN	Y	00093710212	Enhanced
310600	64980018601	GRISEOFULVIN MICROSIZE	TABS	500MG	1	2	0			0		0	ANTI - INFECTIVES	ANTIFUNGAL AGENTS	ANTI - INFECTIVES	ANTIFUNGAL AGENTS	0						OR	GRISEOFULVIN	Y	64980018601	Enhanced
242631	64980018401	GRISEOFULVIN ULTRAMICROSIZE	TABS	125MG	1	2	0			0		0	ANTI - INFECTIVES	ANTIFUNGAL AGENTS	ANTI - INFECTIVES	ANTIFUNGAL AGENTS	0						OR	GRISEOFULVIN	Y	64980018401	Enhanced
239239	64980018501	GRISEOFULVIN ULTRAMICROSIZE	TABS	250MG	1	2	0			0		0	ANTI - INFECTIVES	ANTIFUNGAL AGENTS	ANTI - INFECTIVES	ANTIFUNGAL AGENTS	0						OR	GRISEOFULVIN	Y	64980018501	Enhanced
311204	00185055030	ITRACONAZOLE	CAPS	100MG	1	2	1	360	90	0		0	ANTI - INFECTIVES	ANTIFUNGAL AGENTS	ANTI - INFECTIVES	ANTIFUNGAL AGENTS	0						OR	ITRACONAZOLE	Y	00185055030	Enhanced
197853	00378026101	KETOCONAZOLE	TABS	200MG	1	2	0			0		0	ANTI - INFECTIVES	ANTIFUNGAL AGENTS	ANTI - INFECTIVES	ANTIFUNGAL AGENTS	0						OR	KETOCONAZOLE	Y	00378026101	Enhanced
753106	00078049659	LAMISIL	PACK	125MG	2	5	0			0		0	ANTI - INFECTIVES	ANTIFUNGAL AGENTS	ANTI - INFECTIVES	ANTIFUNGAL AGENTS	0						OR	TERBINAFINE	W	00078049659	Enhanced
795674	00078050058	LAMISIL	PACK	187.5MG	2	5	0			0		0	ANTI - INFECTIVES	ANTIFUNGAL AGENTS	ANTI - INFECTIVES	ANTIFUNGAL AGENTS	0						OR	TERBINAFINE	W	00078050058	Enhanced
861385	00469321110	MYCAMINE	SOLR	100MG	3	5	0			0		0	ANTI - INFECTIVES	ANTIFUNGAL AGENTS	ANTI - INFECTIVES	ANTIFUNGAL AGENTS	0						IV	MICAFUNGIN SODIUM	W	00469321110	Enhanced
861381	00469325010	MYCAMINE	SOLR	50MG	3	5	0			0		0	ANTI - INFECTIVES	ANTIFUNGAL AGENTS	ANTI - INFECTIVES	ANTIFUNGAL AGENTS	0						IV	MICAFUNGIN SODIUM	W	00469325010	Enhanced
665022	00085132801	NOXAFIL	SUSP	40MG/ML	3	5	0			0		0	ANTI - INFECTIVES	ANTIFUNGAL AGENTS	ANTI - INFECTIVES	ANTIFUNGAL AGENTS	0						OR	POSACONAZOLE	W	00085132801	Enhanced
312055	60432053716	NYSTATIN	SUSP	100000UNIT/ML	1	2	0			0		0	ANTI - INFECTIVES	ANTIFUNGAL AGENTS	ANTI - INFECTIVES	ANTIFUNGAL AGENTS	0						MT	NYSTATIN	Y	60432053716	Enhanced
312059	53489040001	NYSTATIN	TABS	500000UNIT	1	2	0			0		0	ANTI - INFECTIVES	ANTIFUNGAL AGENTS	ANTI - INFECTIVES	ANTIFUNGAL AGENTS	0						OR	NYSTATIN	Y	53489040001	Enhanced
152854	00458029515	SPORANOX	SOLN	10MG/ML	2	5	0			0		0	ANTI - INFECTIVES	ANTIFUNGAL AGENTS	ANTI - INFECTIVES	ANTIFUNGAL AGENTS	0						OR	ITRACONAZOLE	W	00458029515	Enhanced
313222	60505257201	TERBINAFINE HCL	TABS	250MG	1	2	0			0		0	ANTI - INFECTIVES	ANTIFUNGAL AGENTS	ANTI - INFECTIVES	ANTIFUNGAL AGENTS	0						OR	TERBINAFINE	Y	60505257201	Enhanced
546624	00049316044	VFEND	SUSR	40MG/ML	3	5	0			1	VFEND	0	ANTI - INFECTIVES	ANTIFUNGAL AGENTS	ANTI - INFECTIVES	ANTIFUNGAL AGENTS	0						OR	VORICONAZOLE	W	00049316044	Enhanced
351209	00378134184	VORICONAZOLE	SOLR	200MG	1	2	0			0		0	ANTI - INFECTIVES	ANTIFUNGAL AGENTS	ANTI - INFECTIVES	ANTIFUNGAL AGENTS	0						IV	VORICONAZOLE	Y	00378134184	Enhanced
349434	00378184093	VORICONAZOLE	TABS	200MG	3	2	0			1	VFEND	0	ANTI - INFECTIVES	ANTIFUNGAL AGENTS	ANTI - INFECTIVES	ANTIFUNGAL AGENTS	0						OR	VORICONAZOLE	Y	00378184093	Enhanced
349435	00378182693	VORICONAZOLE	TABS	50MG	1	2	0			1	VFEND	0	ANTI - INFECTIVES	ANTIFUNGAL AGENTS	ANTI - INFECTIVES	ANTIFUNGAL AGENTS	0						OR	VORICONAZOLE	Y	00378182693	Enhanced
242679	00378410591	ABACAVIR	TABS	300MG	1	2	0			0		0	ANTI - INFECTIVES	ANTIVIRALS	ANTI - INFECTIVES	ANTIVIRALS	0						OR	ABACAVIR SULFATE	Y	00378410591	Enhanced
197310	63304065205	ACYCLOVIR	CAPS	200MG	1	2	0			0		0	ANTI - INFECTIVES	ANTIVIRALS	ANTI - INFECTIVES	ANTIVIRALS	0						OR	ACYCLOVIR	Y	63304065205	Enhanced
307730	50383081016	ACYCLOVIR	SUSP	200MG/5ML	1	2	0			0		0	ANTI - INFECTIVES	ANTIVIRALS	ANTI - INFECTIVES	ANTIVIRALS	0						OR	ACYCLOVIR	Y	50383081016	Enhanced
197311	60505530601	ACYCLOVIR	TABS	400MG	1	2	0			0		0	ANTI - INFECTIVES	ANTIVIRALS	ANTI - INFECTIVES	ANTIVIRALS	0						OR	ACYCLOVIR	Y	60505530601	Enhanced
197313	60505530701	ACYCLOVIR	TABS	800MG	1	2	0			0		0	ANTI - INFECTIVES	ANTIVIRALS	ANTI - INFECTIVES	ANTIVIRALS	0						OR	ACYCLOVIR	Y	60505530701	Enhanced
313812	55390061210	ACYCLOVIR SODIUM	SOLR	500MG	1	2	0			0		0	ANTI - INFECTIVES	ANTIVIRALS	ANTI - INFECTIVES	ANTIVIRALS	0						IV	ACYCLOVIR SODIUM	Y	55390061210	Enhanced
849389	00781204805	AMANTADINE HCL	CAPS	100MG	1	2	0			0		0	ANTI - INFECTIVES	ANTIVIRALS	ANTI - INFECTIVES	ANTIVIRALS	0						OR	AMANTADINE HYDROCHLORIDE	Y	00781204805	Enhanced
849385	50383080716	AMANTADINE HCL	SYRP	50MG/5ML	1	2	0			0		0	ANTI - INFECTIVES	ANTIVIRALS	ANTI - INFECTIVES	ANTIVIRALS	0						OR	AMANTADINE HYDROCHLORIDE	Y	50383080716	Enhanced
849395	00832011150	AMANTADINE HCL	TABS	100MG	1	2	0			0		0	ANTI - INFECTIVES	ANTIVIRALS	ANTI - INFECTIVES	ANTIVIRALS	0						OR	AMANTADINE HYDROCHLORIDE	Y	00832011150	Enhanced
603378	00597000302	APTIVUS	CAPS	250MG	3	5	0			0		0	ANTI - INFECTIVES	ANTIVIRALS	ANTI - INFECTIVES	ANTIVIRALS	0						OR	TIPRANAVIR	W	00597000302	Enhanced
805515	00597000201	APTIVUS	SOLN	100MG/ML	3	5	0			0		0	ANTI - INFECTIVES	ANTIVIRALS	ANTI - INFECTIVES	ANTIVIRALS	0						OR	TIPRANAVIR	W	00597000201	Enhanced
643070	15584010101	ATRIPLA	TABS	600MG; 200MG; 300MG	3	5	0			0		0	ANTI - INFECTIVES	ANTIVIRALS	ANTI - INFECTIVES	ANTIVIRALS	0						OR	EFAVIRENZ, EMTRICITABINE,	W	15584010101	Enhanced
807579	00003161412	BARACLUDE	SOLN	0.05MG/ML	2	5	0			0		0	ANTI - INFECTIVES	ANTIVIRALS	ANTI - INFECTIVES	ANTIVIRALS	0						OR	ENTECAVIR MONOHYDRATE	W	00003161412	Enhanced
578457	00003161112	BARACLUDE	TABS	0.5MG	3	5	0			0		0	ANTI - INFECTIVES	ANTIVIRALS	ANTI - INFECTIVES	ANTIVIRALS	0						OR	ENTECAVIR MONOHYDRATE	W	00003161112	Enhanced
578459	00003161212	BARACLUDE	TABS	1MG	3	5	0			0		0	ANTI - INFECTIVES	ANTIVIRALS	ANTI - INFECTIVES	ANTIVIRALS	0						OR	ENTECAVIR MONOHYDRATE	W	00003161212	Enhanced
199388	23155021631	CIDOFOVIR	SOLN	75MG/ML	3	2	0			0		0	ANTI - INFECTIVES	ANTIVIRALS	ANTI - INFECTIVES	ANTIVIRALS	0						IV	CIDOFOVIR DIHYDRATE	Y	23155021631	Enhanced
1147337	61958110101	COMPLERA	TABS	200MG; 25MG; 300MG	3	5	0			0		0	ANTI - INFECTIVES	ANTIVIRALS	ANTI - INFECTIVES	ANTIVIRALS	0						OR	EMTRICITABINE; RILPIVIRINE	W	61958110101	Enhanced
153127	00006057743	CRIXIVAN	CAPS	200MG	2	5	0			0		0	ANTI - INFECTIVES	ANTIVIRALS	ANTI - INFECTIVES	ANTIVIRALS	0						OR	INDINAVIR SULFATE	W	00006057743	Enhanced
153128	00006057354	CRIXIVAN	CAPS	400MG	2	5	0			0		0	ANTI - INFECTIVES	ANTIVIRALS	ANTI - INFECTIVES	ANTIVIRALS	0						OR	INDINAVIR SULFATE	W	00006057354	Enhanced
284183	65862031030	DIDANOSINE	CPDR	125MG	1	2	0			0		0	ANTI - INFECTIVES	ANTIVIRALS	ANTI - INFECTIVES	ANTIVIRALS	0						OR	DIDANOSINE	Y	65862031030	Enhanced
284185	00555058801	DIDANOSINE	CPDR	200MG	1	2	0			0		0	ANTI - INFECTIVES	ANTIVIRALS	ANTI - INFECTIVES	ANTIVIRALS	0						OR	DIDANOSINE	Y	00555058801	Enhanced
284184	00555058901	DIDANOSINE	CPDR	250MG	1	2	0			0		0	ANTI - INFECTIVES	ANTIVIRALS	ANTI - INFECTIVES	ANTIVIRALS	0						OR	DIDANOSINE	Y	00555058901	Enhanced
284988	00555059001	DIDANOSINE	CPDR	400MG	1	2	0			0		0	ANTI - INFECTIVES	ANTIVIRALS	ANTI - INFECTIVES	ANTIVIRALS	0						OR	DIDANOSINE	Y	00555059001	Enhanced
1102277	59676027801	EDURANT	TABS	25MG	3	5	0			0		0	ANTI - INFECTIVES	ANTIVIRALS	ANTI - INFECTIVES	ANTIVIRALS	0						OR	RILPIVIRINE HYDROCHLORIDE	W	59676027801	Enhanced
404587	61958060101	EMTRIVA	CAPS	200MG	2	5	0			0		0	ANTI - INFECTIVES	ANTIVIRALS	ANTI - INFECTIVES	ANTIVIRALS	0						OR	EMTRICITABINE	W	61958060101	Enhanced
616148	61958060201	EMTRIVA	SOLN	10MG/ML	2	5	0			0		0	ANTI - INFECTIVES	ANTIVIRALS	ANTI - INFECTIVES	ANTIVIRALS	0						OR	EMTRICITABINE	W	61958060201	Enhanced
152932	49702020548	EPIVIR	SOLN	10MG/ML	2	5	0			0		0	ANTI - INFECTIVES	ANTIVIRALS	ANTI - INFECTIVES	ANTIVIRALS	0						OR	LAMIVUDINE	W	49702020548	Enhanced
213484	00173066300	EPIVIR HBV	SOLN	5MG/ML	2	5	0			0		0	ANTI - INFECTIVES	ANTIVIRALS	ANTI - INFECTIVES	ANTIVIRALS	0						OR	LAMIVUDINE	W	00173066300	Enhanced
213483	00173066200	EPIVIR HBV	TABS	100MG	2	5	0			0		0	ANTI - INFECTIVES	ANTIVIRALS	ANTI - INFECTIVES	ANTIVIRALS	0						OR	LAMIVUDINE	W	00173066200	Enhanced
802395	49702020613	EPZICOM	TABS	600MG; 300MG	3	5	0			0		0	ANTI - INFECTIVES	ANTIVIRALS	ANTI - INFECTIVES	ANTIVIRALS	0						OR	ABACAVIR SULFATE;	W	49702020613	Enhanced
199192	00093811756	FAMCICLOVIR	TABS	125MG	1	2	0			0		0	ANTI - INFECTIVES	ANTIVIRALS	ANTI - INFECTIVES	ANTIVIRALS	0						OR	FAMCICLOVIR	Y	00093811756	Enhanced
199193	00093811856	FAMCICLOVIR	TABS	250MG	1	2	0			0		0	ANTI - INFECTIVES	ANTIVIRALS	ANTI - INFECTIVES	ANTIVIRALS	0						OR	FAMCICLOVIR	Y	00093811856	Enhanced
198382	00093811956	FAMCICLOVIR	TABS	500MG	1	2	0			0		0	ANTI - INFECTIVES	ANTIVIRALS	ANTI - INFECTIVES	ANTIVIRALS	0						OR	FAMCICLOVIR	Y	00093811956	Enhanced
855611	00409386305	FOSCARNET SODIUM	SOLN	24MG/ML	1	2	0			0		0	ANTI - INFECTIVES	ANTIVIRALS	ANTI - INFECTIVES	ANTIVIRALS	0						IV	FOSCARNET SODIUM	Y	00409386305	Enhanced
404460	00004039840	FUZEON	SOLR	90MG	3	5	0			0		0	ANTI - INFECTIVES	ANTIVIRALS	ANTI - INFECTIVES	ANTIVIRALS	0						SC	ENFUVIRTIDE	W	00004039839	Enhanced
310442	63323031510	GANCICLOVIR	SOLR	500MG	1	2	0			0		0	ANTI - INFECTIVES	ANTIVIRALS	ANTI - INFECTIVES	ANTIVIRALS	0						IV	GANCICLOVIR SODIUM	Y	63323031510	Enhanced
881343	61958050101	HEPSERA	TABS	10MG	3	5	0			0		0	ANTI - INFECTIVES	ANTIVIRALS	ANTI - INFECTIVES	ANTIVIRALS	0						OR	ADEFOVIR DIPIVOXIL	W	61958050101	Enhanced
1102282	51167010001	INCIVEK	TABS	375MG	3	5	0			1	INCIVEK	0	ANTI - INFECTIVES	ANTIVIRALS	ANTI - INFECTIVES	ANTIVIRALS	0						OR	TELAPREVIR	W	51167010001	Enhanced
758555	59676057001	INTELENCE	TABS	100MG	3	5	0			0		0	ANTI - INFECTIVES	ANTIVIRALS	ANTI - INFECTIVES	ANTIVIRALS	0						OR	ETRAVIRINE	W	59676057001	Enhanced
1052660	59676057101	INTELENCE	TABS	200MG	3	5	0			0		0	ANTI - INFECTIVES	ANTIVIRALS	ANTI - INFECTIVES	ANTIVIRALS	0						OR	ETRAVIRINE	W	59676057101	Enhanced
859861	00004024515	INVIRASE	CAPS	200MG	2	5	0			0		0	ANTI - INFECTIVES	ANTIVIRALS	ANTI - INFECTIVES	ANTIVIRALS	0						OR	SAQUINAVIR MESYLATE	W	00004024515	Enhanced
859865	00004024451	INVIRASE	TABS	500MG	3	5	0			0		0	ANTI - INFECTIVES	ANTIVIRALS	ANTI - INFECTIVES	ANTIVIRALS	0						OR	SAQUINAVIR MESYLATE	W	00004024451	Enhanced
1235591	00006047761	ISENTRESS	CHEW	100MG	3	5	0			0		0	ANTI - INFECTIVES	ANTIVIRALS	ANTI - INFECTIVES	ANTIVIRALS	0						OR	RALTEGRAVIR POTASSIUM	W	00006047761	Enhanced
1235595	00006047361	ISENTRESS	CHEW	25MG	2	5	0			0		0	ANTI - INFECTIVES	ANTIVIRALS	ANTI - INFECTIVES	ANTIVIRALS	0						OR	RALTEGRAVIR POTASSIUM	W	00006047361	Enhanced
748846	00006022761	ISENTRESS	TABS	400MG	3	5	0			0		0	ANTI - INFECTIVES	ANTIVIRALS	ANTI - INFECTIVES	ANTIVIRALS	0						OR	RALTEGRAVIR POTASSIUM	W	00006022761	Enhanced
847749	00074395646	KALETRA	SOLN	400MG/5ML; 100MG/5ML	3	5	0			0		0	ANTI - INFECTIVES	ANTIVIRALS	ANTI - INFECTIVES	ANTIVIRALS	0						OR	LOPINAVIR; RITONAVIR	W	00074395646	Enhanced
847745	00074052260	KALETRA	TABS	100MG; 25MG	2	5	0			0		0	ANTI - INFECTIVES	ANTIVIRALS	ANTI - INFECTIVES	ANTIVIRALS	0						OR	LOPINAVIR; RITONAVIR	W	00074052260	Enhanced
847741	00074679622	KALETRA	TABS	200MG; 50MG	3	5	0			0		0	ANTI - INFECTIVES	ANTIVIRALS	ANTI - INFECTIVES	ANTIVIRALS	0						OR	LOPINAVIR; RITONAVIR	W	00074679622	Enhanced
200082	00093538506	LAMIVUDINE/ZIDOVUDINE	TABS	150MG; 300MG	1	2	0			0		0	ANTI - INFECTIVES	ANTIVIRALS	ANTI - INFECTIVES	ANTIVIRALS	0						OR	LAMIVUDINE; ZIDOVUDINE	Y	00093538506	Enhanced
199147	65862055260	LAMIVUDINE	TABS	150MG	1	2	0			0		0	ANTI - INFECTIVES	ANTIVIRALS	ANTI - INFECTIVES	ANTIVIRALS	0						OR	LAMIVUDINE	Y	65862055260	Enhanced
349491	65862055330	LAMIVUDINE	TABS	300MG	1	2	0			0		0	ANTI - INFECTIVES	ANTIVIRALS	ANTI - INFECTIVES	ANTIVIRALS	0						OR	LAMIVUDINE	Y	65862055330	Enhanced
723827	49702020853	LEXIVA	SUSP	50MG/ML	2	5	0			0		0	ANTI - INFECTIVES	ANTIVIRALS	ANTI - INFECTIVES	ANTIVIRALS	0						OR	FOSAMPRENAVIR CALCIUM	W	49702020853	Enhanced
402110	49702020718	LEXIVA	TABS	700MG	3	5	0			0		0	ANTI - INFECTIVES	ANTIVIRALS	ANTI - INFECTIVES	ANTIVIRALS	0						OR	FOSAMPRENAVIR CALCIUM	W	49702020718	Enhanced
199422	51991033106	NEVIRAPINE	TABS	200MG	1	2	0			0		0	ANTI - INFECTIVES	ANTIVIRALS	ANTI - INFECTIVES	ANTIVIRALS	0						OR	NEVIRAPINE	Y	51991033106	Enhanced
152970	00074983330	NORVIR	CAPS	100MG	2	5	0			0		0	ANTI - INFECTIVES	ANTIVIRALS	ANTI - INFECTIVES	ANTIVIRALS	0						OR	RITONAVIR	W	00074983330	Enhanced
152971	00074194063	NORVIR	SOLN	80MG/ML	2	5	0			0		0	ANTI - INFECTIVES	ANTIVIRALS	ANTI - INFECTIVES	ANTIVIRALS	0						OR	RITONAVIR	W	00074194063	Enhanced
900577	00074333330	NORVIR	TABS	100MG	2	5	0			0		0	ANTI - INFECTIVES	ANTIVIRALS	ANTI - INFECTIVES	ANTIVIRALS	0						OR	RITONAVIR	W	00074333330	Enhanced
850457	59676056401	PREZISTA	TABS	75MG	2	5	0			0		0	ANTI - INFECTIVES	ANTIVIRALS	ANTI - INFECTIVES	ANTIVIRALS	0						OR	DARUNAVIR ETHANOLATE	W	59676056401	Enhanced
824876	59676056101	PREZISTA	TABS	400MG	3	5	0			0		0	ANTI - INFECTIVES	ANTIVIRALS	ANTI - INFECTIVES	ANTIVIRALS	0						OR	DARUNAVIR ETHANOLATE	W	59676056101	Enhanced
794610	59676056201	PREZISTA	TABS	600MG	3	5	0			0		0	ANTI - INFECTIVES	ANTIVIRALS	ANTI - INFECTIVES	ANTIVIRALS	0						OR	DARUNAVIR	W	59676056201	Enhanced
831870	59676056301	PREZISTA	TABS	75MG	2	5	0			0		0	ANTI - INFECTIVES	ANTIVIRALS	ANTI - INFECTIVES	ANTIVIRALS	0						OR	DARUNAVIR ETHANOLATE	W	59676056301	Enhanced
1359271	59676056630	PREZISTA	TABS	800MG	3	5	0			0		0	ANTI - INFECTIVES	ANTIVIRALS	ANTI - INFECTIVES	ANTIVIRALS	0						OR	DARUNAVIR ETHANOLATE	W	59676056630	Enhanced
759473	00173068101	RELENZA DISKHALER	AEPB	5MG/BLISTER	2	5	1	60	180	0		0	ANTI - INFECTIVES	ANTIVIRALS	ANTI - INFECTIVES	ANTIVIRALS	0						IN	ZANAMIVIR	W	00173068101	Enhanced
856562	49702020924	RESCRIPTOR	TABS	100MG	2	5	0			0		0	ANTI - INFECTIVES	ANTIVIRALS	ANTI - INFECTIVES	ANTIVIRALS	0						OR	DELAVIRDINE MESYLATE	W	49702020924	Enhanced
856512	49702022517	RESCRIPTOR	TABS	200MG	2	5	0			0		0	ANTI - INFECTIVES	ANTIVIRALS	ANTI - INFECTIVES	ANTIVIRALS	0						OR	DELAVIRDINE MESYLATE	W	49702022517	Enhanced
108396	49702021305	RETROVIR IV INFUSION	SOLN	10MG/ML	2	5	0			0		0	ANTI - INFECTIVES	ANTIVIRALS	ANTI - INFECTIVES	ANTIVIRALS	0						IV	ZIDOVUDINE	W	49702021305	Enhanced
402095	00003362312	REYATAZ	CAPS	100MG	2	5	0			0		0	ANTI - INFECTIVES	ANTIVIRALS	ANTI - INFECTIVES	ANTIVIRALS	0						OR	ATAZANAVIR SULFATE	W	00003362312	Enhanced
402094	00003362412	REYATAZ	CAPS	150MG	3	5	0			0		0	ANTI - INFECTIVES	ANTIVIRALS	ANTI - INFECTIVES	ANTIVIRALS	0						OR	ATAZANAVIR SULFATE	W	00003362412	Enhanced
402093	00003363112	REYATAZ	CAPS	200MG	3	5	0			0		0	ANTI - INFECTIVES	ANTIVIRALS	ANTI - INFECTIVES	ANTIVIRALS	0						OR	ATAZANAVIR SULFATE	W	00003363112	Enhanced
664743	00003362212	REYATAZ	CAPS	300MG	3	5	0			0		0	ANTI - INFECTIVES	ANTIVIRALS	ANTI - INFECTIVES	ANTIVIRALS	0						OR	ATAZANAVIR SULFATE	W	00003362212	Enhanced
896790	66435010699	RIBAPAK	TABS	0	3	2	0			0		0	ANTI - INFECTIVES	ANTIVIRALS	ANTI - INFECTIVES	ANTIVIRALS	0						OR	RIBAVIRIN	Y	66435010699	Enhanced
902313	66435010799	RIBAPAK	TABS	600MG	3

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199123	68382022401	BICALUTAMIDE	TABS	50MG	1	2	0			0		0	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	0						OR	BICALUTAMIDE	Y	68382022401	Enhanced
105552	00015301260	BICNU	SOLR	100MG	2	5	0			0		0	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	0						IV	CARMUSTINE	W	00015301260	Enhanced
308770	00703315501	BLEOMYCIN SULFATE	SOLR	30UNIT	1	2	0			0		0	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	0						IJ	BLEOMYCIN SULFATE	Y	00703315501	Enhanced
1307630	00069013501	BOSULIF	TABS	100MG	3	5	1	360	90	2	BOSULIF	0	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	0						OR	BOSUTINIB MONOHYDRATE	W	00069013501	Enhanced
1307635	00069013601	BOSULIF	TABS	500MG	3	5	1	90	90	2	BOSULIF	0	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	0						OR	BOSUTINIB MONOHYDRATE	W	00069013601	Enhanced
284425	59148007091	BUSULFEX	SOLN	6MG/ML	3	5	0			0		0	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	0						IV	BUSULFAN	W	59148007091	Enhanced
1114074	00310782030	CAPRELSA	TABS	100MG	3	5	1	180	90	0		1	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	0						OR	VANDETANIB	W	00310782030	Enhanced
1114096	00310784030	CAPRELSA	TABS	300MG	3	5	1	90	90	0		1	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	0						OR	VANDETANIB	W	00310784030	Enhanced
597195	63323017215	CARBOPLATIN	SOLN	150MG/15ML	1	2	0			0		0	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	0						IV	CARBOPLATIN	Y	63323017215	Enhanced
206794	00015303020	CEENU	CAPS	10MG	2	5	0			0		0	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	0						OR	LOMUSTINE	W	00015303020	Enhanced
206795	00015303120	CEENU	CAPS	40MG	2	5	0			0		0	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	0						OR	LOMUSTINE	W	00015303120	Enhanced
616444	00004026129	CELLCEPT	SUSR	200MG/ML	3	5	0			3		0	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	0						OR	MYCOPHENOLATE MOFETIL	W	00004026129	Enhanced
213394	00004029809	CELLCEPT INTRAVENOUS	SOLR	500MG	2	5	0			3		0	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	0						IV	MYCOPHENOLATE MOFETIL HYDROCHLORIDE	W	00004029809	Enhanced
214117	55390028110	CERUBIDINE	SOLR	20MG	1	2	0			0		0	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	0						IV	DAUNORUBICIN HYDROCHLORIDE	Y	55390028110	Enhanced
309311	00703574811	CISPLATIN	SOLN	100MG/100ML	1	2	0			0		0	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	0						IV	CISPLATIN	Y	00703574811	Enhanced
240754	55390012401	CLADRIBINE	SOLN	1MG/ML	3	2	0			0		0	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	0						IV	CLADRIBINE	Y	55390012401	Enhanced
544915	58468010001	CLOLAR	SOLN	1MG/ML	3	5	0			0		0	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	0						IV	CLOFARABINE	W	58468010001	Enhanced
1363410	42388001214	COMETRIQ	KIT	0	3	5	0			2	COMETRIQ	0	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	0						OR	CABOZANTINIB S-MALATE (1140909483)	W	42388001214	Enhanced
1363408	42388001114	COMETRIQ	KIT	0	3	5	0			2	COMETRIQ	0	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	0						OR	CABOZANTINIB S-MALATE (1140909483)	W	42388001114	Enhanced
1364581	42388001314	COMETRIQ	KIT	20MG	3	5	0			2	COMETRIQ	0	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	0						OR	CABOZANTINIB S-MALATE (1140909483)	W	42388001314	Enhanced
197549	00054412925	CYCLOPHOSPHAMIDE	TABS	25MG	1	2	0			3		0	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	0						OR	CYCLOPHOSPHAMIDE	Y	00054412925	Enhanced
197550	00054413025	CYCLOPHOSPHAMIDE	TABS	50MG	1	2	0			3		0	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	0						OR	CYCLOPHOSPHAMIDE	Y	00054413025	Enhanced
328160	60505013400	CYCLOSPORINE	CAPS	100MG	1	2	0			3		0	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	0						OR	CYCLOSPORINE	Y	60505013400	Enhanced
241834	00172731246	CYCLOSPORINE MODIFIED	CAPS	100MG	1	2	0			3		0	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	0						OR	CYCLOSPORINE	Y	00172731246	Enhanced
197553	60505013300	CYCLOSPORINE	CAPS	25MG	1	2	0			3		0	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	0						OR	CYCLOSPORINE	Y	60505013300	Enhanced
835894	00172731046	CYCLOSPORINE MODIFIED	CAPS	25MG	1	2	0			3		0	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	0						OR	CYCLOSPORINE	Y	00172731046	Enhanced
835925	00172731146	CYCLOSPORINE MODIFIED	CAPS	50MG	1	2	0			3		0	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	0						OR	CYCLOSPORINE	Y	00172731146	Enhanced
205175	55390012210	CYCLOSPORINE	SOLN	50MG/ML	1	2	0			3		0	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	0						IV	CYCLOSPORINE	Y	55390012210	Enhanced
835886	00172731320	CYCLOSPORINE MODIFIED	SOLN	100MG/ML	1	2	0			3		0	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	0						OR	CYCLOSPORINE	Y	00172731320	Enhanced
249364	61703031922	CYTARABINE AQUEOUS	SOLN	100MG/ML	1	2	0			0		0	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	0						IJ	CYTARABINE	Y	61703031922	Enhanced
240416	61703030436	CYTARABINE AQUEOUS	SOLN	20MG/ML	1	2	0			0		0	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	0						IJ	CYTARABINE	Y	61703030436	Enhanced
245255	55390013210	CYTARABINE	SOLR	500MG	1	2	0			0		0	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	0						IJ	CYTARABINE	Y	55390013210	Enhanced
309638	00703507501	DACARBAZINE	SOLR	200MG	1	2	0			0		0	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	0						IV	DACARBAZINE	Y	00703507501	Enhanced
644989	62856060001	DACOGEN	SOLR	50MG	3	5	0			0		0	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	0						IV	DECITABINE	W	62856060001	Enhanced
309650	00703523313	DAUNORUBICIN HCL	INJ	5MG/ML	1	2	0			0		0	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	0						IV	DAUNORUBICIN HYDROCHLORIDE	Y	00703523313	Enhanced
1111073	47335028541	DOCEFREZ	SOLR	20MG	3	5	0			0		0	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	0						IV	DOCETAXEL	W	47335028541	Enhanced
1101773	47335028641	DOCEFREZ	SOLR	80MG	3	5	0			0		0	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	0						IV	DOCETAXEL	W	47335028641	Enhanced
1001405	00955102104	DOCETAXEL	CONC	80MG/4ML	3	2	0			0		0	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	0						IV	DOCETAXEL	Y	00955102104	Enhanced
1093280	00409020110	DOCETAXEL	SOLN	80MG/8ML	3	2	0			0		0	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	0						IV	DOCETAXEL	Y	00409020110	Enhanced
1191501	59676096001	DOXIL	INJ	2MG/ML	3	5	0			0		0	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	0						IV	DOXORUBICIN HCL LIPOSOME	X	59676096001	Enhanced
1191138	00703504601	DOXORUBICIN HCL	SOLN	2MG/ML	1	2	0			0		0	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	0						IV	DOXORUBICIN HYDROCHLORIDE	Y	00703504601	Enhanced
213282	00003633517	DROXIA	CAPS	200MG	2	5	0			0		0	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	0						OR	HYDROXYUREA	W	00003633517	Enhanced
213283	00003633617	DROXIA	CAPS	300MG	2	5	0			0		0	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	0						OR	HYDROXYUREA	W	00003633617	Enhanced
213284	00003633717	DROXIA	CAPS	400MG	2	5	0			0		0	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	0						OR	HYDROXYUREA	W	00003633717	Enhanced
825335	00024022205	ELIGARD	KIT	22.5MG	2	5	0			2	LEUPROLIDE (LONG ACTING)	0	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	0						SC	LEUPROLIDE ACETATE	W	00024022205	Enhanced
825333	00024061030	ELIGARD	KIT	30MG	2	5	0			2	LEUPROLIDE (LONG ACTING)	0	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	0						SC	LEUPROLIDE ACETATE	W	00024061030	Enhanced
825325	00024060545	ELIGARD	KIT	45MG	2	5	0			2	LEUPROLIDE (LONG ACTING)	0	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	0						SC	LEUPROLIDE ACETATE	W	00024060545	Enhanced
825334	00024079375	ELIGARD	KIT	7.5MG	2	5	0			2	LEUPROLIDE (LONG ACTING)	0	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	0						SC	LEUPROLIDE ACETATE	W	00024079375	Enhanced
861052	67386041151	ELSPAR	SOLR	10000UNIT	3	5	0			0		0	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	0						IJ	ASPARAGINASE	W	67386041151	Enhanced
205562	00013013202	EMCYT	CAPS	140MG	2	5	0			0		0	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	0						OR	ESTRAMUSTINE PHOSPHATE SODIUM	W	00013013202	Enhanced
836378	61703035993	EPIRUBICIN HCL	SOLN	50MG/25ML	1	2	0			0		0	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	0						IV	EPIRUBICIN HCL	Y	61703035993	Enhanced
544719	66733094823	ERBITUX	SOLN	100MG/50ML	3	5	0			0		0	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	0						IV	CETUXIMAB	W	66733094823	Enhanced
1242998	50242014001	ERIVEDGE	CAPS	150MG	3	5	1	90	90	2	ERIVEDGE	0	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	0						OR	VISMODEGIB	W	50242014001	Enhanced
226719	00015340420	ETOPOPHOS	SOLR	100MG	2	5	0			0		0	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	0						IV	ETOPOSIDE PHOSPHATE	W	00015340420	Enhanced
310248	55390029201	ETOPOSIDE	SOLN	20MG/ML	1	2	0			0		0	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	0						IV	ETOPOSIDE	Y	55390029201	Enhanced
310261	00054008013	EXEMESTANE	TABS	25MG	1	2	0			0		0	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	0						OR	EXEMESTANE	Y	00054008013	Enhanced
152880	42747032730	FARESTON	TABS	60MG	2	5	0			0		0	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	0						OR	TOREMIFENE CITRATE	W	11399000530	Enhanced
727954	00310072010	FASLODEX	SOLN	250MG/5ML	3	5	0			0		0	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	0						IM	FULVESTRANT	W	00310072010	Enhanced
858127	55566840101	FIRMAGON	SOLR	120MG	3	5	0			0		0	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	0						SC	DEGARELIX ACETATE	W	55566840101	Enhanced
858125	55566830101	FIRMAGON	SOLR	80MG	2	5	0			0		0	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	0						SC	DEGARELIX ACETATE	W	55566830101	Enhanced
310354	00703585401	FLUDARABINE PHOSPHATE	SOLR	50MG	1	2	0			0		0	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	0						IV	FLUDARABINE PHOSPHATE	Y	00703585401	Enhanced
239177	63323011751	FLUOROURACIL	SOLN	2.5GM/50ML	1	2	0			0		0	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	0						IV	FLUOROURACIL	Y	63323011751	Enhanced
197726	00172496070	FLUTAMIDE	CAPS	125MG	1	2	0			0		0	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	0						OR	FLUTAMIDE	Y	00172496070	Enhanced
865183	48818000102	FOLOTYN	SOLN	40MG/2ML	3	5	0			0		0	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	0						IV	PRALATREXATE	W	48818000102	Enhanced
1148919	16729011711	GEMCITABINE HCL	SOLR	1GM	3	2	0			0		0	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	0						IV	GEMCITABINE HCL	Y	16729011711	Enhanced
835835	00074647932	GENGRAF	CAPS	100MG	1	2	0			3		0	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	0						OR	CYCLOSPORINE	Y	00074647932	Enhanced
835896	00074646332	GENGRAF	CAPS	25MG	1	2	0			3		0	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	0						OR	CYCLOSPORINE	Y	00074646332	Enhanced
835892	00074726950	GENGRAF	SOLN	100MG/ML	1	2	0			3		0	ANTINEOPLASTIC / IM

1115473	00074377903	LUPRON DEPOT-PED	KIT	11.25MG	3	5	0			2	LEUPROLIDE (LONG ACTING)	0	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	0						IM	LEUPROLIDE ACETATE	W	00074377903	Enhanced
1115449	00074228203	LUPRON DEPOT-PED	KIT	11.25MG	3	5	0			2	LEUPROLIDE (LONG ACTING)	0	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	0						IM	LEUPROLIDE ACETATE	W	00074228203	Enhanced
1115456	00074244003	LUPRON DEPOT-PED	KIT	15MG	3	5	0			2	LEUPROLIDE (LONG ACTING)	0	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	0						IM	LEUPROLIDE ACETATE	W	00074244003	Enhanced
1115468	00074334603	LUPRON DEPOT	KIT	22.5MG	3	5	0			2	LEUPROLIDE (LONG ACTING)	0	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	0						IM	LEUPROLIDE ACETATE	W	00074334603	Enhanced
1115459	00074364103	LUPRON DEPOT	KIT	3.75MG	3	5	0			2	LEUPROLIDE (LONG ACTING)	0	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	0						IM	LEUPROLIDE ACETATE	W	00074364103	Enhanced
1115471	00074368303	LUPRON DEPOT	KIT	30MG	3	5	0			2	LEUPROLIDE (LONG ACTING)	0	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	0						IM	LEUPROLIDE ACETATE	W	00074368303	Enhanced
1115259	00074347303	LUPRON DEPOT	KIT	45MG	3	5	0			2	LEUPROLIDE (LONG ACTING)	0	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	0						IM	LEUPROLIDE ACETATE	W	00074347303	Enhanced
1115464	00074364203	LUPRON DEPOT	KIT	7.5MG	3	5	0			2	LEUPROLIDE (LONG ACTING)	0	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	0						IM	LEUPROLIDE ACETATE	W	00074364203	Enhanced
207373	00015308060	LYSODREN	TABS	500MG	2	5	0			0		0	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	0						OR	MITOTANE	W	00015308060	Enhanced
207588	54482005301	MATULANE	CAPS	50MG	3	5	0			0		0	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	0						OR	PROCARBAZINE HYDROCHLORIDE	W	54482005301	Enhanced
885111	49884094969	MEGACE ES	SUSP	625MG/5ML	2	5	0			0		0	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	0						OR	MEGESTROL ACETATE	W	49884094969	Enhanced
860225	49884090761	MEGESTROL ACETATE	SUSP	40MG/ML	1	2	0			0		0	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	0						OR	MEGESTROL ACETATE	Y	49884090761	Enhanced
860215	00555060602	MEGESTROL ACETATE	TABS	20MG	1	2	0			0		0	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	0						OR	MEGESTROL ACETATE	Y	00555060602	Enhanced
860221	49884029004	MEGESTROL ACETATE	TABS	40MG	1	2	0			0		0	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	0						OR	MEGESTROL ACETATE	Y	49884029004	Enhanced
311487	67457019501	MELPHALAN HYDROCHLORIDE	SOLR	50MG	3	2	0			0		0	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	0						IV	MELPHALAN HYDROCHLORIDE	Y	67457019501	Enhanced
197931	00378354752	MERCAPTOPURINE	TABS	50MG	1	2	0			0		0	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	0						OR	MERCAPTOPURINE	Y	00378354752	Enhanced
311625	55390014301	METHOTREXATE SODIUM	SOLR	1GM	1	2	0			0		0	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	0						IJ	METHOTREXATE SODIUM	Y	55390014301	Enhanced
311627	55390003310	METHOTREXATE SODIUM	SOLN	25MG/ML	1	2	0			3		0	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	0						IJ	METHOTREXATE SODIUM	Y	55390003310	Enhanced
105585	00378001401	METHOTREXATE	TABS	2.5MG	1	2	0			3		0	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	0						OR	METHOTREXATE	Y	00378001401	Enhanced
314096	55390025201	MITOMYCIN	SOLR	20MG	1	2	0			0		0	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	0						IV	MITOMYCIN C	Y	55390025201	Enhanced
197989	61703034365	MITOXANTRONE HCL	CONC	2MG/ML	1	2	0			0		0	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	0						IV	MITOXANTRONE HYDROCHLORIDE	Y	61703034365	Enhanced
992168	67386091151	MUSTARGEN	SOLR	10MG	2	5	0			0		0	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	0						IJ	MECHLORETHAMINE HYDROCHLORIDE	W	67386091151	Enhanced
199058	51079072120	MYCOPHENOLATE MOFETIL	CAPS	250MG	1	2	0			3		0	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	0						OR	MYCOPHENOLATE MOFETIL	Y	51079072120	Enhanced
200060	00781517505	MYCOPHENOLATE MOFETIL	TABS	500MG	1	2	0			3		0	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	0						OR	MYCOPHENOLATE MOFETIL	Y	00781517505	Enhanced
616450	00078038566	MYFORTIC	TBEC	180MG	2	5	0			3		0	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	0						OR	MYCOPHENOLATE SODIUM	W	00078038566	Enhanced
616449	00078038666	MYFORTIC	TBEC	360MG	2	5	0			3		0	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	0						OR	MYCOPHENOLATE SODIUM	W	00078038666	Enhanced
615979	50419048858	NEXAVAR	TABS	200MG	3	5	0			2	NEXAVAR	1	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	0						OR	SORAFENIB TOSYLATE	W	50419048858	Enhanced
284551	00088111114	NILANDRON	TABS	150MG	2	5	0			0		0	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	0						OR	NILUTAMIDE	W	00088111114	Enhanced
1112980	00003037113	NULOJIX	SOLR	250MG	3	5	0			3		0	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	0						IV	BELATACEPT	W	00003037113	Enhanced
312071	62756035240	OCTREOTIDE ACETATE	SOLN	1000MCG/ML	3	2	0			0		0	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	0						IJ	OCTREOTIDE ACETATE	Y	62756035240	Enhanced
312069	62756034944	OCTREOTIDE ACETATE	SOLN	100MCG/ML	1	2	0			0		0	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	0						IJ	OCTREOTIDE ACETATE	Y	62756034944	Enhanced
314152	62756035040	OCTREOTIDE ACETATE	SOLN	200MCG/ML	3	2	0			0		0	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	0						IJ	OCTREOTIDE ACETATE	Y	62756035040	Enhanced
312070	62756035144	OCTREOTIDE ACETATE	SOLN	500MCG/ML	3	2	0			0		0	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	0						IJ	OCTREOTIDE ACETATE	Y	62756035144	Enhanced
312068	62756034844	OCTREOTIDE ACETATE	SOLN	50MCG/ML	1	2	0			0		0	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	0						IJ	OCTREOTIDE ACETATE	Y	62756034844	Enhanced
281118	62856000301	ONTAK	SOLN	150MCG/ML	3	5	0			0		0	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	0						IV	DENILEUKIN DIFTITOX	W	62856000301	Enhanced
351248	61703036322	OXALIPLATIN	SOLN	100MG/20ML	3	2	0			0		0	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	0						IV	OXALIPLATIN	Y	61703036322	Enhanced
312199	61703034250	PACLITAXEL	CONC	300MG/50ML	1	2	0			0		0	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	0						IV	PACLITAXEL	Y	61703034250	Enhanced
240573	55390024401	PENTOSTATIN	SOLR	10MG	3	2	0			0		0	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	0						IV	PENTOSTATIN	Y	55390024401	Enhanced
1298953	50242014501	PERJETA	SOLN	420MG/14ML	3	5	0			0		0	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	0						IV	PERTUZUMAB	W	50242014501	Enhanced
1369724	59572050100	POMALYST	CAPS	1MG	3	5	0			0		0	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	0						OR	POMALIDOMIDE	W	59572050100	Enhanced
1369728	59572050200	POMALYST	CAPS	2MG	3	5	0			0		0	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	0						OR	POMALIDOMIDE	W	59572050200	Enhanced
1369732	59572050300	POMALYST	CAPS	3MG	3	5	0			0		0	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	0						OR	POMALIDOMIDE	W	59572050300	Enhanced
1369736	59572050400	POMALYST	CAPS	4MG	3	5	0			0		0	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	0						OR	POMALIDOMIDE	W	59572050400	Enhanced
108515	00469301601	PROGRAF	SOLN	5MG/ML	2	5	0			3		0	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	0						IV	TACROLIMUS	W	00469301601	Enhanced
351901	00008103006	RAPAMUNE	SOLN	1MG/ML	2	5	0			3		0	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	0						OR	SIROLIMUS	W	00008103006	Enhanced
905160	00008104005	RAPAMUNE	TABS	0.5MG	2	5	0			3		0	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	0						OR	SIROLIMUS	W	00008104005	Enhanced
351989	00008104105	RAPAMUNE	TABS	1MG	2	5	0			3		0	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	0						OR	SIROLIMUS	W	00008104105	Enhanced
404432	00008104205	RAPAMUNE	TABS	2MG	3	5	0			3		0	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	0						OR	SIROLIMUS	W	00008104205	Enhanced
616114	59572041000	REVLIMID	CAPS	10MG	3	5	1	90	60	0		1	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	0						OR	LENALIDOMIDE	W	59572041000	Enhanced
643714	59572041521	REVLIMID	CAPS	15MG	3	5	1	90	90	0		1	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	0						OR	LENALIDOMIDE	W	59572041521	Enhanced
643722	59572042500	REVLIMID	CAPS	25MG	3	5	1	63	90	0		1	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	0						OR	LENALIDOMIDE	W	59572042500	Enhanced
616116	59572040500	REVLIMID	CAPS	5MG	3	5	1	90	90	0		1	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	0						OR	LENALIDOMIDE	W	59572040500	Enhanced
213126	50242005306	RITUXAN	CONC	10MG/ML	3	5	0			2	RITUXAN	0	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	0						IV	RITUXIMAB	W	50242005306	Enhanced
898607	00078034061	SANDOSTATIN LAR DEPOT	KIT	10MG	3	5	0			0		0	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	0						IM	OCTREOTIDE ACETATE	W	00078034061	Enhanced
898591	00078034161	SANDOSTATIN LAR DEPOT	KIT	20MG	3	5	0			0		0	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	0						IM	OCTREOTIDE ACETATE	W	00078034161	Enhanced
898603	00078034261	SANDOSTATIN LAR DEPOT	KIT	30MG	3	5	0			0		0	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	0						IM	OCTREOTIDE ACETATE	W	00078034261	Enhanced
227146	00078033184	SIMULECT	SOLR	20MG	2	5	0			3		0	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	0						IV	BASILIXIMAB	W	00078033184	Enhanced
799830	00003085222	SPRYCEL	TABS	100MG	3	5	1	180	90	2	SPRYCEL	0	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	0						OR	DASATINIB	W	00003085222	Enhanced
1045404	00003085722	SPRYCEL	TABS	140MG	3	5	1	90	90	2	SPRYCEL	0	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	0						OR	DASATINIB	W	00003085722	Enhanced
643173	00003052711	SPRYCEL	TABS	20MG	3	5	1	180	90	2	SPRYCEL	0	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	0						OR	DASATINIB	W	00003052711	Enhanced
643175	00003052811	SPRYCEL	TABS	50MG	3	5	1	90	90	2	SPRYCEL	0	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	0						OR	DASATINIB	W	00003052811	Enhanced
643177	00003052411	SPRYCEL	TABS	70MG	3	5	1	90	90	2	SPRYCEL	0	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	0						OR	DASATINIB	W	00003052411	Enhanced
1045408	00003085522	SPRYCEL	TABS	80MG	3	5	1	90	90	2	SPRYCEL	0	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	0						OR	DASATINIB	W	00003085522	Enhanced
1312408	50419017103	STIVARGA	TABS	40MG	3	5	1	252	90	2	STIVARGA	0	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	0						OR	REGORAFENIB	W	50419017103	Enhanced
616283	00069055038	SUTENT	CAPS	12.5MG	3	5	1	270	90	2	SUTENT	0	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	0						OR	SUNITINIB MALATE	W	00069055038	Enhanced
616287	00069077038	SUTENT	CAPS	25MG	3	5	1	90	90	2	SUTENT	0	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	0						OR	SUNITINIB MALATE	W	00069077038	Enhanced
616292	00069098038	SUTENT	CAPS	50MG	3	5	1	90	90	2	SUTENT	0	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNO

905057	52544015602	TRELSTAR MIXJECT	SUSR	22.5MG	3	5	0			0		0	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	0						IM	TRIPTORELIN PAMOATE	W	52544015602	Enhanced
199159	00555080802	TRETINOIN	CAPS	10MG	3	2	0			0		0	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	0						OR	TRETINOIN	Y	00555080802	Enhanced
829928	83459060010	TRISENOX	SOLN	10MG/10ML	3	5	0			0		0	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	0						IV	ARSENIC TRIOXIDE	W	83459060010	Enhanced
672152	00173075200	TYKERB	TABS	250MG	3	5	1	540	90	2	TYKERB	1	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	0						OR	LAPATINIB DITOSYLATE	W	00173075200	Enhanced
667897	55513095401	VECTIBIX	SOLN	100MG/5ML	3	5	0			3		0	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	0						IV	PANITUMUMAB	W	55513095401	Enhanced
402244	63020004901	VELCADE	SOLR	3.5MG	3	5	0			0		0	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	0						IV	BORTEZOMIB	W	63020004901	Enhanced
545206	59572010201	VIDAZA	SUSR	100MG	3	5	0			0		0	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	0						IJ	AZACITIDINE	W	59572010201	Enhanced
239178	55390009110	VINBLASTINE SULFATE	SOLR	10MG	1	2	0			0		0	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	0						IV	VINBLASTINE SULFATE	Y	55390009110	Enhanced
894896	00703440211	VINCASAR PFS	SOLN	1MG/ML	1	2	0			0		0	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	0						IV	VINCRISTINE SULFATE	Y	00703440211	Enhanced
894893	61703030906	VINCRISTINE SULFATE	SOLN	1MG/ML	1	2	0			0		0	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	0						IV	VINCRISTINE SULFATE	Y	61703030906	Enhanced
630920	00703418301	VINORELBINE TARTRATE	SOLN	50MG/5ML	1	2	0			0		0	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	0						IV	VINORELBINE TARTRATE	Y	00703418301	Enhanced
867506	00173080409	VOTRIENT	TABS	200MG	3	5	1	360	90	2	VOTRIENT	0	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	0						OR	PAZOPANIB HYDROCHLORIDE	W	00173080409	Enhanced
1148502	00069814120	XALKORI	CAPS	200MG	3	5	1	180	90	2	XALKORI	0	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	0						OR	CRIZOTINIB	W	00069814120	Enhanced
1148506	00069814020	XALKORI	CAPS	250MG	3	5	1	180	90	2	XALKORI	0	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	0						OR	CRIZOTINIB	W	00069814020	Enhanced
1307309	00469012599	XTANDI	CAPS	40MG	3	5	1	360	90	2	XTANDI	0	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	0						OR	ENZALUTAMIDE	W	00469012599	Enhanced
1094840	00003232711	YERVOY	SOLN	50MG/10ML	3	5	0			0		0	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	0						IV	IPILIMUMAB	W	00003232711	Enhanced
1304484	00024584001	ZALTRAP	SOLN	100MG/4ML	3	5	0			0		0	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	0						IV	AFLIBERCEPT	W	00024584001	Enhanced
207948	00703463601	ZANOSAR	SOLR	1GM	3	5	0			0		0	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	0						IV	STREPTOZOCIN	W	00703463601	Enhanced
1147228	50242009001	ZELBORAF	TABS	240MG	3	5	1	720	90	2	ZELBORAF	0	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	0						OR	VEMURAFENIB	W	50242009001	Enhanced
668606	00006056840	ZOLINZA	CAPS	100MG	3	5	0			0		0	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	0						OR	VORINOSTAT	W	00006056840	Enhanced
977431	00078041720	ZORTRESS	TABS	0.25MG	2	5	0			3		0	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	0						OR	EVEROLIMUS	W	00078041720	Enhanced
977436	00078041420	ZORTRESS	TABS	0.5MG	3	5	0			3		0	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	0						OR	EVEROLIMUS	W	00078041420	Enhanced
977440	00078041520	ZORTRESS	TABS	0.75MG	3	5	0			3		0	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	0						OR	EVEROLIMUS	W	00078041520	Enhanced
1100079	57894015012	ZYTIGA	TABS	250MG	3	5	1	360	90	2	ZYTIGA	0	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS	0						OR	ABIRATERONE ACETATE	W	57894015012	Enhanced
1092360	62856058446	BANZEL	SUSP	40MG/ML	2	5	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	0						OR	RUFINAMIDE	W	62856058446	Enhanced
824299	62856058252	BANZEL	TABS	200MG	2	5	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	0						OR	RUFINAMIDE	W	62856058252	Enhanced
824303	62856058352	BANZEL	TABS	400MG	3	5	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	0						OR	RUFINAMIDE	W	62856058352	Enhanced
388311	29033001912	CARBAMAZEPINE ER	CP12	100MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	0						OR	CARBAMAZEPINE	Y	29033001912	Enhanced
200133	29033002012	CARBAMAZEPINE ER	CP12	200MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	0						OR	CARBAMAZEPINE	Y	29033002012	Enhanced
200131	29033000412	CARBAMAZEPINE ER	CP12	300MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	0						OR	CARBAMAZEPINE	Y	29033000412	Enhanced
308973	00093077801	CARBAMAZEPINE	CHEW	100MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	0						OR	CARBAMAZEPINE	Y	00093077801	Enhanced
308976	60432012916	CARBAMAZEPINE	SUSP	100MG/5ML	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	0						OR	CARBAMAZEPINE	Y	60432012916	Enhanced
308979	00093010910	CARBAMAZEPINE	TABS	200MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	0						OR	CARBAMAZEPINE	Y	00093010910	Enhanced
402505	51672412401	CARBAMAZEPINE ER	TB12	200MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	0						OR	CARBAMAZEPINE	Y	51672412401	Enhanced
402506	51672412501	CARBAMAZEPINE ER	TB12	400MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	0						OR	CARBAMAZEPINE	Y	51672412501	Enhanced
207088	00071052524	CELONTIN	CAPS	300MG	2	5	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	0						OR	METHSUXIMIDE	W	00071052524	Enhanced
349194	00555009496	CLONAZEPAM ODT	TBDP	0.125MG	1	2	0			2	HIGH RISK MEDICATIONS - BENZODIAZEPINES	0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	0						OR	CLONAZEPAM	Y	00555009496	Enhanced
349195	00555009596	CLONAZEPAM ODT	TBDP	0.25MG	1	2	0			2	HIGH RISK MEDICATIONS - BENZODIAZEPINES	0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	0						OR	CLONAZEPAM	Y	00555009596	Enhanced
349198	00555009696	CLONAZEPAM ODT	TBDP	0.5MG	1	2	0			2	HIGH RISK MEDICATIONS - BENZODIAZEPINES	0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	0						OR	CLONAZEPAM	Y	00555009696	Enhanced
349196	00555009796	CLONAZEPAM ODT	TBDP	1MG	1	2	0			2	HIGH RISK MEDICATIONS - BENZODIAZEPINES	0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	0						OR	CLONAZEPAM	Y	00555009796	Enhanced
349197	00555009896	CLONAZEPAM ODT	TBDP	2MG	1	2	0			2	HIGH RISK MEDICATIONS - BENZODIAZEPINES	0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	0						OR	CLONAZEPAM	Y	00555009896	Enhanced
197527	00093083201	CLONAZEPAM	TABS	0.5MG	1	2	0			2	HIGH RISK MEDICATIONS - BENZODIAZEPINES	0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	0						OR	CLONAZEPAM	Y	00093083201	Enhanced
197528	00603294902	CLONAZEPAM	TABS	1MG	1	2	0			2	HIGH RISK MEDICATIONS - BENZODIAZEPINES	0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	0						OR	CLONAZEPAM	Y	00603294902	Enhanced
197529	00093083401	CLONAZEPAM	TABS	2MG	1	2	0			2	HIGH RISK MEDICATIONS - BENZODIAZEPINES	0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	0						OR	CLONAZEPAM	Y	00093083401	Enhanced
801961	00093613832	DIAZEPAM	GEL	10MG	1	2	0			2	HIGH RISK MEDICATIONS - BENZODIAZEPINES	0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	0						RE	DIAZEPAM	Y	00093613832	Enhanced
801957	00093613732	DIAZEPAM	GEL	2.5MG	1	2	0			2	HIGH RISK MEDICATIONS - BENZODIAZEPINES	0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	0						RE	DIAZEPAM	Y	00093613732	Enhanced
801965	00093613932	DIAZEPAM	GEL	20MG	1	2	0			2	HIGH RISK MEDICATIONS - BENZODIAZEPINES	0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	0						RE	DIAZEPAM	Y	00093613932	Enhanced
855871	00071374066	DILANTIN	CAPS	30MG	2	5	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	0						OR	PHENYTOIN SODIUM	W	00071374066	Enhanced
1099596	68382010601	DIVALPROEX SODIUM	CPSP	125MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	0						OR	DIVALPROEX SODIUM	Y	68382010601	Enhanced
1099625	62756079613	DIVALPROEX SODIUM DR	TBEC	125MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	0						OR	DIVALPROEX SODIUM	Y	62756079613	Enhanced
1099678	00093744005	DIVALPROEX SODIUM DR	TBEC	250MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	0						OR	DIVALPROEX SODIUM	Y	00093744005	Enhanced
1099563	00378047201	DIVALPROEX SODIUM ER	TB24	250MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	0						OR	DIVALPROEX SODIUM	Y	00378047201	Enhanced
1099870	00093744105	DIVALPROEX SODIUM DR	TBEC	500MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	0						OR	DIVALPROEX SODIUM	Y	00093744105	Enhanced
1099569	00378047301	DIVALPROEX SODIUM ER	TB24	500MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	0						OR	DIVALPROEX SODIUM	Y	00378047301	Enhanced
211817	00093009001	EPITOL	TABS	200MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	0						OR	CARBAMAZEPINE	Y	00093009001	Enhanced
197682	50111090101	ETHOSUXIMIDE	CAPS	250MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	0						OR	ETHOSUXIMIDE	Y	50111090101	Enhanced
251322	00093966016	ETHOSUXIMIDE	SOLN	250MG/5ML	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	0						OR	ETHOSUXIMIDE	Y	00093966016	Enhanced
310285	65162068690	FELBAMATE	SUSP	600MG/5ML	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	0						OR	FELBAMATE	Y	65162068690	Enhanced
198358	65162073403	FELBAMATE	TABS	400MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	0						OR	FELBAMATE	Y	65162073403	Enhanced
198359	65162073509	FELBAMATE	TABS	600MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	0						OR	FELBAMATE	Y	65162073509	Enhanced
855893	00143978825	FOSPHENYTOIN SODIUM	SOLN	100MG PE/2ML	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	0						IJ	FOSPHENYTOIN SODIUM	Y	00143978825	Enhanced
310430	62756013702	GABAPENTIN	CAPS	100MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	0						OR	GABAPENTIN	Y	62756013702	Enhanced
310431	60505011301	GABAPENTIN	CAPS	300MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	0						OR	GABAPENTIN	Y	60505011301	Enhanced
310432	53746010301	GABAPENTIN	CAPS	400MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	0						OR	GABAPENTIN	Y	53746010301	Enhanced
283523	50383031147	GABAPENTIN	SOLN	250MG/5ML	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	0						OR	GABAPENTIN	Y	50383031147	Enhanced
310433	00228263611	GABAPENTIN	TABS	600MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	0						OR	GABAPENTIN	Y	00228263611	Enhanced
310434	60505255205	GABAPENTIN	TABS	800MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	0						OR	GABAPENTIN	Y	60505255205	Enhanced
1299967	63459041230	GABITRIL	TABS	12MG	2	5	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	0						OR	TIAGABINE HYDROCHLORIDE	W	63459041230	Enhanced
1299971	63459041630	GABITRIL	TABS	16MG	2	5	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	0						OR	TIAGABINE HYDROCHLORIDE	W	63459041630	Enhanced
311264	00093013201	LAMOTRIGINE	CHEW	25MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	0						OR	LAMOTRIGINE	Y	00093013201	Enhanced
311265	00093068801	LAMOTRIGINE	CHEW	5MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	0						OR	LAMOTRIGINE	Y	00093068801	Enhanced
198427	00093046301	LAMOTRIGINE	TABS	100MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	0						OR	LAMOTRIGINE	Y	00093046301	Enhanced
850087	64679027302	LAMOTRIGINE ER	TB24	100MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	0						OR	LAMOTRIGINE	Y	64679027302	Enhanced
198428	00093724706	LAMOTRIGINE	TABS	150MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	0						OR	LAMOTRIGINE	Y	00093724706	Enhanced
198429	00093724806	LAMOTRIGINE	TABS	200MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	0						OR	LAMOTRIGINE	Y	00093724806	Enhanced
900156	49884056411	LAMOTRIGINE ER	TB24	200MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	0						OR	LAMOTRIGINE	Y	49884056411	Enhanced
1146690	49884060411	LAMOTRIGINE ER	TB24	250MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	0						OR	LAMOTRIG

403884	60258086516	LEVETIRACETAM	SOLN	100MG/ML	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	0						OR	LEVETIRACETAM	Y	60258086516	Enhanced
387003	13668001760	LEVETIRACETAM	TABS	1000MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	0						OR	LEVETIRACETAM	Y	13668001760	Enhanced
311288	00378561305	LEVETIRACETAM	TABS	250MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	0						OR	LEVETIRACETAM	Y	00378561305	Enhanced
311289	00378561578	LEVETIRACETAM	TABS	500MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	0						OR	LEVETIRACETAM	Y	00378561578	Enhanced
807832	51079012706	LEVETIRACETAM ER	TB24	500MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	0						OR	LEVETIRACETAM	Y	49884020402	Enhanced
311290	00378561705	LEVETIRACETAM	TABS	750MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	0						OR	LEVETIRACETAM	Y	00378561705	Enhanced
846378	00228297506	LEVETIRACETAM ER	TB24	750MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	0						OR	LEVETIRACETAM	Y	49884020502	Enhanced
847121	62756051344	LEVETIRACETAM	SOLN	500MG/5ML	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	0						IV	LEVETIRACETAM	Y	62756051344	Enhanced
607018	00071101568	LYRICA	CAPS	100MG	2	5	0			2	GABAPENTIN	0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	0						OR	PREGABALIN	W	00071101568	Enhanced
607020	00071101668	LYRICA	CAPS	150MG	2	5	0			2	GABAPENTIN	0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	0						OR	PREGABALIN	W	00071101668	Enhanced
607022	00071101768	LYRICA	CAPS	200MG	2	5	0			2	GABAPENTIN	0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	0						OR	PREGABALIN	W	00071101768	Enhanced
607024	00071101968	LYRICA	CAPS	225MG	2	5	0			2	GABAPENTIN	0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	0						OR	PREGABALIN	W	00071101968	Enhanced
607026	00071101268	LYRICA	CAPS	25MG	2	5	0			2	GABAPENTIN	0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	0						OR	PREGABALIN	W	00071101268	Enhanced
607028	00071101868	LYRICA	CAPS	300MG	2	5	0			2	GABAPENTIN	0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	0						OR	PREGABALIN	W	00071101868	Enhanced
607033	00071101368	LYRICA	CAPS	50MG	2	5	0			2	GABAPENTIN	0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	0						OR	PREGABALIN	W	00071101368	Enhanced
607038	00071101468	LYRICA	CAPS	75MG	2	5	0			2	GABAPENTIN	0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	0						OR	PREGABALIN	W	00071101468	Enhanced
898718	00071102001	LYRICA	SOLN	20MG/ML	2	5	0			2	GABAPENTIN	0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	0						OR	PREGABALIN	W	00071102001	Enhanced
1191056	67386031101	ONFI	TABS	10MG	2	5	0			2	HIGH RISK MEDICATIONS - BENZODIAZEPINES	0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	0						OR	CLOBAZAM	W	67386031101	Enhanced
1191058	67386031201	ONFI	TABS	20MG	2	5	0			2	HIGH RISK MEDICATIONS - BENZODIAZEPINES	0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	0						OR	CLOBAZAM	W	67386031201	Enhanced
1191060	67386031001	ONFI	TABS	5MG	2	5	0			2	HIGH RISK MEDICATIONS - BENZODIAZEPINES	0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	0						OR	CLOBAZAM	W	67386031001	Enhanced
283536	00054019959	OXCARBAZEPINE	SUSP	60MG/ML	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	0						OR	OXCARBAZEPINE	Y	00054019959	Enhanced
312136	62756018388	OXCARBAZEPINE	TABS	150MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	0						OR	OXCARBAZEPINE	Y	62756018388	Enhanced
312137	62756018413	OXCARBAZEPINE	TABS	300MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	0						OR	OXCARBAZEPINE	Y	62756018413	Enhanced
312138	62756018513	OXCARBAZEPINE	TABS	600MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	0						OR	OXCARBAZEPINE	Y	62756018513	Enhanced
206750	67386060101	PEGANONE	TABS	250MG	2	5	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	0						OR	ETHOTOIN	W	67386060101	Enhanced
702519	00603150858	PHENOBARBITAL	ELIX	20MG/5ML	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	0						OR	PHENOBARBITAL	Y	00603150858	Enhanced
198083	00143145805	PHENOBARBITAL	TABS	100MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	0						OR	PHENOBARBITAL	Y	00143145805	Enhanced
312357	00143144505	PHENOBARBITAL	TABS	15MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	0						OR	PHENOBARBITAL	Y	00143144505	Enhanced
198086	00603516521	PHENOBARBITAL	TABS	16.2MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	0						OR	PHENOBARBITAL	Y	00603516521	Enhanced
312362	00143145005	PHENOBARBITAL	TABS	30MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	0						OR	PHENOBARBITAL	Y	00143145005	Enhanced
199167	00603516622	PHENOBARBITAL	TABS	32.4MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	0						OR	PHENOBARBITAL	Y	00603516622	Enhanced
198089	00143145505	PHENOBARBITAL	TABS	60MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	0						OR	PHENOBARBITAL	Y	00143145505	Enhanced
199168	00603516732	PHENOBARBITAL	TABS	64.8MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	0						OR	PHENOBARBITAL	Y	00603516732	Enhanced
199164	00603516832	PHENOBARBITAL	TABS	97.2MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	0						OR	PHENOBARBITAL	Y	00603516832	Enhanced
1313885	00378365005	PHENYTOIN	CHEW	50MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	0						OR	PHENYTOIN	Y	00378365005	Enhanced
855889	00641049325	PHENYTOIN SODIUM	SOLN	50MG/ML	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	0						IJ	PHENYTOIN SODIUM	Y	00409131701	Enhanced
1313112	00432013108	PHENYTOIN	SUSP	125MG/5ML	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	0						OR	PHENYTOIN	Y	00432013108	Enhanced
855671	62756040201	PHENYTOIN SODIUM EXTENDED	CAPS	100MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	0						OR	PHENYTOIN SODIUM	Y	62756040201	Enhanced
855861	62756029983	PHENYTOIN SODIUM EXTENDED	CAPS	200MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	0						OR	PHENYTOIN SODIUM	Y	62756029983	Enhanced
855873	62756043288	PHENYTOIN SODIUM EXTENDED	CAPS	300MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	0						OR	PHENYTOIN SODIUM	Y	62756043288	Enhanced
1112997	00173081259	POTIGA	TABS	200MG	2	5	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	0						OR	EZOGABINE	W	00173081259	Enhanced
1113001	00173081359	POTIGA	TABS	300MG	2	5	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	0						OR	EZOGABINE	W	00173081359	Enhanced
1113005	00173081459	POTIGA	TABS	400MG	2	5	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	0						OR	EZOGABINE	W	00173081459	Enhanced
1113009	00173081059	POTIGA	TABS	50MG	2	5	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	0						OR	EZOGABINE	W	00173081059	Enhanced
96304	00115103101	PRIMIDONE	TABS	250MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	0						OR	PRIMIDONE	Y	00115103101	Enhanced
198150	00527130105	PRIMIDONE	TABS	50MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	0						OR	PRIMIDONE	Y	00527130105	Enhanced
860898	67386021165	SABRIL	PACK	500MG	3	5	0			0		1	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	0						OR	VIGABATRIN	W	67386021165	Enhanced
860895	67386011101	SABRIL	TABS	500MG	3	5	0			0		1	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	0						OR	VIGABATRIN	W	67386011101	Enhanced
866303	00078051005	TEGRETOL-XR	TB12	100MG	2	5	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	0						OR	CARBAMAZEPINE	W	00078051005	Enhanced
1299911	62756020083	TIAGABINE HYDROCHLORIDE	TABS	2MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	0						OR	TIAGABINE HYDROCHLORIDE	Y	62756020083	Enhanced
1299917	62756022483	TIAGABINE HYDROCHLORIDE	TABS	4MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	0						OR	TIAGABINE HYDROCHLORIDE	Y	62756022483	Enhanced
205316	00093733506	TOPIRAMATE	CPSP	15MG	1	2	0			2	TOPAMAX/ZONEGRAN	0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	0						OR	TOPIRAMATE	Y	00093733506	Enhanced
205315	68382000514	TOPIRAMATE	CPSP	25MG	1	2	0			2	TOPAMAX/ZONEGRAN	0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	0						OR	TOPIRAMATE	Y	68382000514	Enhanced
199889	68462010910	TOPIRAMATE	TABS	100MG	1	2	0			2	TOPAMAX/ZONEGRAN	0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	0						OR	TOPIRAMATE	Y	68462010910	Enhanced
199890	68462011010	TOPIRAMATE	TABS	200MG	1	2	0			2	TOPAMAX/ZONEGRAN	0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	0						OR	TOPIRAMATE	Y	68462011010	Enhanced
199888	68462010810	TOPIRAMATE	TABS	25MG	1	2	0			2	TOPAMAX/ZONEGRAN	0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	0						OR	TOPIRAMATE	Y	68462010810	Enhanced
151226	68462015310	TOPIRAMATE	TABS	50MG	1	2	0			2	TOPAMAX/ZONEGRAN	0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	0						OR	TOPIRAMATE	Y	68462015310	Enhanced
1099648	55390000710	VALPROATE SODIUM	SOLN	100MG/ML	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	0						IV	VALPROATE SODIUM	Y	55390000710	Enhanced
1099681	00591401201	VALPROIC ACID	CAPS	250MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	0						OR	VALPROIC ACID	Y	00591401201	Enhanced
1099687	00603184158	VALPROIC ACID	SYRP	250MG/5ML	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	0						OR	VALPROATE SODIUM	Y	00603184158	Enhanced
809984	00131181067	VIMPAT	SOLN	200MG/20ML	2	5	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	0						IV	LACOSAMIDE	W	00131181067	Enhanced
995156	00131541070	VIMPAT	SOLN	10MG/ML	2	5	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	0						OR	LACOSAMIDE	W	00131541070	Enhanced
809990	00131247835	VIMPAT	TABS	100MG	2	5	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	0						OR	LACOSAMIDE	W	00131247835	Enhanced
809994	00131247935	VIMPAT	TABS	150MG	2	5	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	0						OR	LACOSAMIDE	W	00131247935	Enhanced
809998	00131248035	VIMPAT	TABS	200MG	2	5	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	0						OR	LACOSAMIDE	W	00131248035	Enhanced
810002	00131247735	VIMPAT	TABS	50MG	2	5	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	0						OR	LACOSAMIDE	W	00131247735	Enhanced
314285	00378672701	ZONISAMIDE	CAPS	100MG	1	2	0			2	TOPAMAX/ZONEGRAN	0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	0						OR	ZONISAMIDE	Y	00378672701	Enhanced
403966	00378672501	ZONISAMIDE	CAPS	25MG	1	2	0			2	TOPAMAX/ZONEGRAN	0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	0						OR	ZONISAMIDE	Y	00378672501	Enhanced
403967	00378672601	ZONISAMIDE	CAPS	50MG	1	2	0			2	TOPAMAX/ZONEGRAN	0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTICONVULSANTS	0						OR	ZONISAMIDE	Y	00378672601	Enhanced
855858	27505000405	APOKYN	SOLN	10MG/ML	3	5	0			0		1	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTIPARKINSONISM AGENTS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTIPARKINSONISM AGENTS	0						SC	APOMORPHINE HYDROCHLORIDE	W	27505000405	Enhanced
637218	68546014256	AZILECT	TABS	0.5MG	2	5	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTIPARKINSONISM AGENTS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTIPARKINSONISM AGENTS	0						OR	RASAGILINE MESYLATE	W	68546014256	Enhanced
637185	68546022956	AZILECT	TABS	1MG	2	5	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTIPARKINSONISM AGENTS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTIPARKINSONISM AGENTS	0						OR	RASAGILINE MESYLATE	W	68546022956	Enhanced
885205	00517078505	BENZTROPINE MESYLATE	SOLN	1MG/ML	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTIPARKINSONISM AGENTS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTIPARKINSONISM AGENTS	0						IJ	BENZTROPINE MESYLATE	Y	14789030002	Enhanced
885219	00603243321	BENZTROPINE MESYLATE	TABS	0.5MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTIPARKINSONISM AGENTS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTIPARKINSONISM AGENTS	0						OR	BENZTROPINE MESYLATE	Y	00603243321	Enhanced
885213	00603243421	BENZTROPINE MESYLATE	TABS	1MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTIPARKINSONISM AGENTS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTIPARKINSONISM AGENTS	0						OR	BENZTROPINE MESYLATE	Y	00603243421	Enhanced
885209	50111039501	BENZTROPINE MESYLATE	TABS	2MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTIPARKINSONISM AGENTS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTIPARKINSONISM AGENTS	0						OR	BENZTROPINE MESYLATE	Y	50111039501	Enhanced
197412	00378709693	BROMOCRIPTINE MESYLATE	CAPS	5MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTIPARKINSONISM AGENTS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTIPARKINSONISM AGENTS	0						OR	BROMOCRIPTINE MESYLATE	Y	00378709693	Enhanced
197411	00574010601	BROMOCRIPTINE MESYLATE	TABS	2.5MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTIPARKINSONISM AGENTS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTIPARKINSONISM AGENTS	0						OR	BROMOCRIPTINE MESYLATE	Y	00574010601	Enhanced
483090	00378505101	CARBIDOPA/LEVODOPA ODT	TBDP	10MG; 100MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTIPARKINSONISM AGENTS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTIPARKINSONISM AGENTS	0						OR	CARBIDOPA ANHYDROUS; LEVODOPA	Y	00378505101	Enhanced
197443	00093029201	CARBIDOPA/LEVODOPA	TABS	10MG; 100MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTIPARKINSONISM AGENTS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTIPARKINSONISM AGENTS	0						OR	CARBIDOPA ANHYDROUS; LEVODOPA	Y	00093029201	Enhanced
197444	00093029301	CARBIDOPA/LEVODOPA	TABS	25MG; 100MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTIPARKINSONISM AGENTS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTIPARKINSONISM AGENTS	0						OR	CARBIDOPA ANHYDROUS; LEVODOPA	Y	00093029301	Enhanced
476399	00378505201	CARBIDOPA/LEVODOPA ODT	TBDP	25MG; 100MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTIPARKINSONISM AGENTS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTIPARKINSONISM AGENTS	0						OR	CARBIDOPA MONOHYDRATE; LEVODOPA	Y	00378505201	Enhanced
476515	00378505301	CARBIDOPA/LEVODOPA ODT	TBDP	25MG; 250MG	1	2	0			0		0

859044	00378170705	PRAMIPEXOLE DIHYDROCHLORIDE	TABS	0.5MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTIPARKINSONISM AGENTS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTIPARKINSONISM AGENTS	0						OR	PRAMIPEXOLE DIHYDROCHLORIDE	Y	00378170705	Enhanced
858625	00781528192	PRAMIPEXOLE DIHYDROCHLORIDE	TABS	0.75MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTIPARKINSONISM AGENTS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTIPARKINSONISM AGENTS	0						OR	PRAMIPEXOLE DIHYDROCHLORIDE	Y	00781528192	Enhanced
859048	00378171205	PRAMIPEXOLE DIHYDROCHLORIDE	TABS	1.5MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTIPARKINSONISM AGENTS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTIPARKINSONISM AGENTS	0						OR	PRAMIPEXOLE DIHYDROCHLORIDE	Y	00378171205	Enhanced
859052	00378171105	PRAMIPEXOLE DIHYDROCHLORIDE	TABS	1MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTIPARKINSONISM AGENTS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTIPARKINSONISM AGENTS	0						OR	PRAMIPEXOLE DIHYDROCHLORIDE	Y	00378171105	Enhanced
312845	00378552501	ROPINIROLE HCL	TABS	0.25MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTIPARKINSONISM AGENTS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTIPARKINSONISM AGENTS	0						OR	ROPINIROLE HYDROCHLORIDE	Y	00378552501	Enhanced
312846	00378555001	ROPINIROLE HCL	TABS	0.5MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTIPARKINSONISM AGENTS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTIPARKINSONISM AGENTS	0						OR	ROPINIROLE HYDROCHLORIDE	Y	00378555001	Enhanced
824959	00228366103	ROPINIROLE ER	TB24	12MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTIPARKINSONISM AGENTS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTIPARKINSONISM AGENTS	0						OR	ROPINIROLE HYDROCHLORIDE	Y	00228366103	Enhanced
314208	00378550101	ROPINIROLE HCL	TABS	1MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTIPARKINSONISM AGENTS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTIPARKINSONISM AGENTS	0						OR	ROPINIROLE HYDROCHLORIDE	Y	00378550101	Enhanced
312847	00378550201	ROPINIROLE HCL	TABS	2MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTIPARKINSONISM AGENTS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTIPARKINSONISM AGENTS	0						OR	ROPINIROLE HYDROCHLORIDE	Y	00378550201	Enhanced
799055	00228365809	ROPINIROLE ER	TB24	2MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTIPARKINSONISM AGENTS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTIPARKINSONISM AGENTS	0						OR	ROPINIROLE HYDROCHLORIDE	Y	00228365809	Enhanced
283858	00378550301	ROPINIROLE HCL	TABS	3MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTIPARKINSONISM AGENTS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTIPARKINSONISM AGENTS	0						OR	ROPINIROLE HYDROCHLORIDE	Y	00378550301	Enhanced
562704	00378550401	ROPINIROLE HCL	TABS	4MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTIPARKINSONISM AGENTS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTIPARKINSONISM AGENTS	0						OR	ROPINIROLE HYDROCHLORIDE	Y	00378550401	Enhanced
799056	00228365903	ROPINIROLE ER	TB24	4MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTIPARKINSONISM AGENTS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTIPARKINSONISM AGENTS	0						OR	ROPINIROLE HYDROCHLORIDE	Y	00228365903	Enhanced
312849	00378550501	ROPINIROLE HCL	TABS	5MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTIPARKINSONISM AGENTS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTIPARKINSONISM AGENTS	0						OR	ROPINIROLE HYDROCHLORIDE	Y	00378550501	Enhanced
848582	00228364003	ROPINIROLE ER	TB24	6MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTIPARKINSONISM AGENTS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTIPARKINSONISM AGENTS	0						OR	ROPINIROLE HYDROCHLORIDE	Y	00228364003	Enhanced
799054	00228366003	ROPINIROLE ER	TB24	8MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTIPARKINSONISM AGENTS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTIPARKINSONISM AGENTS	0						OR	ROPINIROLE HYDROCHLORIDE	Y	00228366003	Enhanced
859186	60505005501	SELEGILINE HCL	CAPS	5MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTIPARKINSONISM AGENTS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTIPARKINSONISM AGENTS	0						OR	SELEGILINE HCL	Y	60505005501	Enhanced
859193	60505343808	SELEGILINE HCL	TABS	5MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTIPARKINSONISM AGENTS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTIPARKINSONISM AGENTS	0						OR	SELEGILINE HCL	Y	60505343808	Enhanced
153655	00187093801	TASMAR	TABS	100MG	3	5	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTIPARKINSONISM AGENTS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTIPARKINSONISM AGENTS	0						OR	TOLCAPONE	W	00187093801	Enhanced
905273	00121065816	TRIHEXYPHENIDYL HCL	ELIX	0.4MG/ML	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTIPARKINSONISM AGENTS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTIPARKINSONISM AGENTS	0						OR	TRIHEXYPHENIDYL HYDROCHLORIDE	Y	00121065816	Enhanced
905269	62584088601	TRIHEXYPHENIDYL HCL	TABS	2MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTIPARKINSONISM AGENTS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTIPARKINSONISM AGENTS	0						OR	TRIHEXYPHENIDYL HYDROCHLORIDE	Y	62584088601	Enhanced
905263	00143176301	TRIHEXYPHENIDYL HCL	TABS	5MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTIPARKINSONISM AGENTS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	ANTIPARKINSONISM AGENTS	0						OR	TRIHEXYPHENIDYL HYDROCHLORIDE	Y	00143176301	Enhanced
861672	55390001310	DIHYDROERGOTAMINE MESYLATE	SOLN	1MG/ML	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	MIGRAINE / CLUSTER HEADACHE THERAPY	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	MIGRAINE / CLUSTER HEADACHE THERAPY	0						IJ	DIHYDROERGOTAMINE MESYLATE	Y	55390001310	Enhanced
1293864	10802120200	ERGOMAR	SUBL	2MG	2	5	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	MIGRAINE / CLUSTER HEADACHE THERAPY	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	MIGRAINE / CLUSTER HEADACHE THERAPY	0						SL	ERGOTAMINE TARTRATE	W	10802120200	Enhanced
1293639	00713016612	MIGERGOT	SUPP	100MG; 2MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	MIGRAINE / CLUSTER HEADACHE THERAPY	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	MIGRAINE / CLUSTER HEADACHE THERAPY	0						RE	CAFFEINE; ERGOTAMINE TARTRATE	Y	00713016612	Enhanced
311918	00574021409	NARATRIPTAN HCL	TABS	1MG	1	2	1	54	84	0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	MIGRAINE / CLUSTER HEADACHE THERAPY	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	MIGRAINE / CLUSTER HEADACHE THERAPY	0						OR	NARATRIPTAN HYDROCHLORIDE	Y	00574021409	Enhanced
314135	00574021509	NARATRIPTAN HCL	TABS	2.5MG	1	2	1	54	84	0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	MIGRAINE / CLUSTER HEADACHE THERAPY	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	MIGRAINE / CLUSTER HEADACHE THERAPY	0						OR	NARATRIPTAN HYDROCHLORIDE	Y	00574021509	Enhanced
312837	00378370259	RIZATRIPTAN BENZOATE	TBDP	10MG	1	2	1	108	84	0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	MIGRAINE / CLUSTER HEADACHE THERAPY	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	MIGRAINE / CLUSTER HEADACHE THERAPY	0						OR	RIZATRIPTAN BENZOATE	Y	00378370259	Enhanced
314209	51991035578	RIZATRIPTAN BENZOATE	TABS	10MG	1	2	1	108	84	0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	MIGRAINE / CLUSTER HEADACHE THERAPY	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	MIGRAINE / CLUSTER HEADACHE THERAPY	0						OR	RIZATRIPTAN BENZOATE	Y	51991035578	Enhanced
312840	65862059912	RIZATRIPTAN BENZOATE	TABS	5MG	1	2	1	108	84	0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	MIGRAINE / CLUSTER HEADACHE THERAPY	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	MIGRAINE / CLUSTER HEADACHE THERAPY	0						OR	RIZATRIPTAN BENZOATE	Y	65862059912	Enhanced
312839	00378370159	RIZATRIPTAN BENZOATE	TBDP	5MG	1	2	1	108	84	0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	MIGRAINE / CLUSTER HEADACHE THERAPY	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	MIGRAINE / CLUSTER HEADACHE THERAPY	0						OR	RIZATRIPTAN BENZOATE	Y	00378370159	Enhanced
727339	47335027641	SUMATRIPTAN SUCCINATE	SOLN	6MG/0.5ML	1	2	1	48	84	0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	MIGRAINE / CLUSTER HEADACHE THERAPY	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	MIGRAINE / CLUSTER HEADACHE THERAPY	0						SC	SUMATRIPTAN SUCCINATE	Y	47335027641	Enhanced
313165	63323027301	SUMATRIPTAN SUCCINATE	SOLN	6MG/0.5ML	1	2	1	48	84	0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	MIGRAINE / CLUSTER HEADACHE THERAPY	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	MIGRAINE / CLUSTER HEADACHE THERAPY	0						SC	SUMATRIPTAN SUCCINATE	Y	55390031510	Enhanced
313160	63304009919	SUMATRIPTAN SUCCINATE	TABS	100MG	1	2	1	54	84	0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	MIGRAINE / CLUSTER HEADACHE THERAPY	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	MIGRAINE / CLUSTER HEADACHE THERAPY	0						OR	SUMATRIPTAN SUCCINATE	Y	63304009919	Enhanced
315223	00093022290	SUMATRIPTAN SUCCINATE	TABS	25MG	1	2	1	54	84	0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	MIGRAINE / CLUSTER HEADACHE THERAPY	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	MIGRAINE / CLUSTER HEADACHE THERAPY	0						OR	SUMATRIPTAN SUCCINATE	Y	00093022290	Enhanced
313161	00093022390	SUMATRIPTAN SUCCINATE	TABS	50MG	1	2	1	54	84	0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	MIGRAINE / CLUSTER HEADACHE THERAPY	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	MIGRAINE / CLUSTER HEADACHE THERAPY	0						OR	SUMATRIPTAN SUCCINATE	Y	00093022390	Enhanced
897025	10144042760	AMPYRA	TB12	10MG	3	5	0			1	AMPYRA	1	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	MISCELLANEOUS NEUROLOGICAL THERAPY	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	MISCELLANEOUS NEUROLOGICAL THERAPY	0						OR	DALFAMPRIDINE (4-AMINOPYRIDINE)	W	10144042760	Enhanced
997223	63304012910	DONEPEZIL HCL	TABS	10MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	MISCELLANEOUS NEUROLOGICAL THERAPY	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	MISCELLANEOUS NEUROLOGICAL THERAPY	2	1	ALZHEIMER'S DRUGS	1			OR	DONEPEZIL HYDROCHLORIDE	Y	63304012910	Enhanced
997220	00781527764	DONEPEZIL HCL	TBDP	10MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	MISCELLANEOUS NEUROLOGICAL THERAPY	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	MISCELLANEOUS NEUROLOGICAL THERAPY	2	1	ALZHEIMER'S DRUGS	1			OR	DONEPEZIL HYDROCHLORIDE	Y	00781527764	Enhanced
997229	63304012810	DONEPEZIL HCL	TABS	5MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	MISCELLANEOUS NEUROLOGICAL THERAPY	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	MISCELLANEOUS NEUROLOGICAL THERAPY	2	1	ALZHEIMER'S DRUGS	1			OR	DONEPEZIL HYDROCHLORIDE	Y	63304012810	Enhanced
997226	00781527664	DONEPEZIL HCL	TBDP	5MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	MISCELLANEOUS NEUROLOGICAL THERAPY	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	MISCELLANEOUS NEUROLOGICAL THERAPY	2	1	ALZHEIMER'S DRUGS	1			OR	DONEPEZIL HYDROCHLORIDE	Y	00781527664	Enhanced
1308571	00078050315	EXELON	PT24	13.3MG/24HR	2	5	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	MISCELLANEOUS NEUROLOGICAL THERAPY	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	MISCELLANEOUS NEUROLOGICAL THERAPY	2	1	ALZHEIMER'S DRUGS	2			TD	RIVASTIGMINE	W	00078050315	Enhanced
751302	00078050115	EXELON	PT24	4.6MG/24HR	2	5	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	MISCELLANEOUS NEUROLOGICAL THERAPY	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	MISCELLANEOUS NEUROLOGICAL THERAPY	2	1	ALZHEIMER'S DRUGS	2			TD	RIVASTIGMINE	W	00078050115	Enhanced
725105	00078050215	EXELON	PT24	9.5MG/24HR	2	5	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	MISCELLANEOUS NEUROLOGICAL THERAPY	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	MISCELLANEOUS NEUROLOGICAL THERAPY	2	1	ALZHEIMER'S DRUGS	2			TD	RIVASTIGMINE	W	00078050215	Enhanced
860695	00555102101	GALANTAMINE HYDROBROMIDE	CP24	16MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	MISCELLANEOUS NEUROLOGICAL THERAPY	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	MISCELLANEOUS NEUROLOGICAL THERAPY	2	1	ALZHEIMER'S DRUGS	1			OR	GALANTAMINE HYDROBROMIDE	Y	00555102101	Enhanced
860707	00555102201	GALANTAMINE HYDROBROMIDE	CP24	24MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	MISCELLANEOUS NEUROLOGICAL THERAPY	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	MISCELLANEOUS NEUROLOGICAL THERAPY	2	1	ALZHEIMER'S DRUGS	1			OR	GALANTAMINE HYDROBROMIDE	Y	00555102201	Enhanced
860715	00555102001	GALANTAMINE HYDROBROMIDE	CP24	8MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	MISCELLANEOUS NEUROLOGICAL THERAPY	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	MISCELLANEOUS NEUROLOGICAL THERAPY	2	1	ALZHEIMER'S DRUGS	1			OR	GALANTAMINE HYDROBROMIDE	Y	00555102001	Enhanced
860901	00054013749	GALANTAMINE HYDROBROMIDE	SOLN	4MG/ML	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	MISCELLANEOUS NEUROLOGICAL THERAPY	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	MISCELLANEOUS NEUROLOGICAL THERAPY	2	1	ALZHEIMER'S DRUGS	1			OR	GALANTAMINE HYDROBROMIDE	Y	00054013749	Enhanced
579148	00555014009	GALANTAMINE HYDROBROMIDE	TABS	12MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	MISCELLANEOUS NEUROLOGICAL THERAPY	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	MISCELLANEOUS NEUROLOGICAL THERAPY	2	1	ALZHEIMER'S DRUGS	1			OR	GALANTAMINE HYDROBROMIDE	Y	00555014009	Enhanced
310436	00555013809	GALANTAMINE HYDROBROMIDE	TABS	4MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	MISCELLANEOUS NEUROLOGICAL THERAPY	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	MISCELLANEOUS NEUROLOGICAL THERAPY	2	1	ALZHEIMER'S DRUGS	1			OR	GALANTAMINE HYDROBROMIDE	Y	00555013809	Enhanced
310437	00555013909	GALANTAMINE HYDROBROMIDE	TABS	8MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	MISCELLANEOUS NEUROLOGICAL THERAPY	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	MISCELLANEOUS NEUROLOGICAL THERAPY	2	1	ALZHEIMER'S DRUGS	1			OR	GALANTAMINE HYDROBROMIDE	Y	00555013909	Enhanced
1012899	00078060751	GILENYA	CAPS	0.5MG	3	5	0			1	GILENYA	0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	MISCELLANEOUS NEUROLOGICAL THERAPY	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	MISCELLANEOUS NEUROLOGICAL THERAPY	0						OR	FINGOLIMOD HYDROCHLORIDE	W	00078060751	Enhanced
996742	00456320212	NAMENDA	SOLN	10MG/5ML	2	5	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	MISCELLANEOUS NEUROLOGICAL THERAPY	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	MISCELLANEOUS NEUROLOGICAL THERAPY	0						OR	MEMANTINE HYDROCHLORIDE	W	00456320212	Enhanced
996563	00456321060	NAMENDA	TABS	10MG	2	5	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	MISCELLANEOUS NEUROLOGICAL THERAPY	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	MISCELLANEOUS NEUROLOGICAL THERAPY	0						OR	MEMANTINE HYDROCHLORIDE	W	00456321060	Enhanced
996634	00456320014	NAMENDA TITRATION PAK	TABS	0	2	5	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	MISCELLANEOUS NEUROLOGICAL THERAPY	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	MISCELLANEOUS NEUROLOGICAL THERAPY	0						OR	MEMANTINE HYDROCHLORIDE	W	00456320014	Enhanced
996574	00456320560	NAMENDA	TABS	5MG	2	5	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	MISCELLANEOUS NEUROLOGICAL THERAPY	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	MISCELLANEOUS NEUROLOGICAL THERAPY	0						OR	MEMANTINE HYDROCHLORIDE	W	00456320560	Enhanced
1040058	64597030160	NUEDEXTA	CAPS	20MG; 10MG	2	5	0			1	NUEDEXTA	0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	MISCELLANEOUS NEUROLOGICAL THERAPY	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	MISCELLANEOUS NEUROLOGICAL THERAPY	0						OR	DEXTROMETHORPHAN HYDROBROMIDE; QUINIDINE	W	64597030160	Enhanced
314214	00591320860	RIVASTIGMINE TARTRATE	CAPS	1.5MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	MISCELLANEOUS NEUROLOGICAL THERAPY	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	MISCELLANEOUS NEUROLOGICAL THERAPY	2	1	ALZHEIMER'S DRUGS	1			OR	RIVASTIGMINE TARTRATE	Y	00591320860	Enhanced
312835	00591320960	RIVASTIGMINE TARTRATE	CAPS	3MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	MISCELLANEOUS NEUROLOGICAL THERAPY	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	MISCELLANEOUS NEUROLOGICAL THERAPY	2	1	ALZHEIMER'S DRUGS	1			OR	RIVASTIGMINE TARTRATE	Y	00591320960	Enhanced
314215	00591321060	RIVASTIGMINE TARTRATE	CAPS	4.5MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	MISCELLANEOUS NEUROLOGICAL THERAPY	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	MISCELLANEOUS NEUROLOGICAL THERAPY	2	1	ALZHEIMER'S DRUGS	1			OR	RIVASTIGMINE TARTRATE	Y	00591321060	Enhanced
312836	00591321160	RIVASTIGMINE TARTRATE	CAPS	6MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	MISCELLANEOUS NEUROLOGICAL THERAPY	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	MISCELLANEOUS NEUROLOGICAL THERAPY	2	1	ALZHEIMER'S DRUGS	1			OR	RIVASTIGMINE TARTRATE	Y	00591321160	Enhanced
603541	59075073015	TYSABRI	CONC	300MG/15ML	3	5	0			1	TYSABRI	1	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	MISCELLANEOUS NEUROLOGICAL THERAPY	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	MISCELLANEOUS NEUROLOGICAL THERAPY	0						IV	NATALIZUMAB	W	59075073015	Enhanced
805466	67386042101	XENAZINE	TABS	12.5MG	3	5	0			1	XENAZINE	1	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	MISCELLANEOUS NEUROLOGICAL THERAPY	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	MISCELLANEOUS NEUROLOGICAL THERAPY	0						OR	TETRABENAZINE	W	67386042101	Enhanced
805462	67386042201	XENAZINE	TABS	25MG	3	5	0			1	XENAZINE	1	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	MISCELLANEOUS NEUROLOGICAL THERAPY	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	MISCELLANEOUS NEUROLOGICAL THERAPY	0						OR	TETRABENAZINE	W	67386042201	Enhanced
197391	00603240628	BACLOFEN	TABS	10MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	MUSCLE RELAXANTS / ANTISPASMODIC THERAPY	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	MUSCLE RELAXANTS / ANTISPASMODIC THERAPY	0						OR	BACLOFEN	Y	00603240628	Enhanced
197392	68084060001	BACLOFEN	TABS	20MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	MUSCLE RELAXANTS / ANTISPASMODIC THERAPY	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	MUSCLE RELAXANTS / ANTISPASMODIC THERAPY	0						OR	BACLOFEN	Y	00527133705	Enhanced
197502	00591252005	CHLORZOXAZONE	TABS	500MG	1	2	0			1	HIGH RISK MEDICATIONS - SKELETAL MUSCLE RELAXANTS	0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	MUSCLE RELAXANTS / ANTISPASMODIC THERAPY	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	MUSCLE RELAXANTS / ANTISPASMODIC THERAPY	0						OR	CHLORZOXAZONE	Y	00591252005	Enhanced
856652	00115443301	DANTROLENE SODIUM	CAPS	100MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	MUSCLE RELAXANTS / ANTISPASMODIC THERAPY	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	MUSCLE RELAXANTS / ANTISPASMODIC THERAPY	0						OR	DANTROLENE SODIUM	Y	00115443301	Enhanced
856656	00115441101	DANTROLENE SODIUM	CAPS	25MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	MUSCLE RELAXANTS / ANTISPASMODIC THERAPY	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	MUSCLE RELAXANTS / ANTISPASMODIC THERAPY	0						OR	DANTROLENE SODIUM	Y	00115441101	Enhanced
856660	00115442201	DANTROLENE SODIUM	CAPS	50MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	MUSCLE RELAXANTS / ANTISPASMODIC THERAPY	AUTONOMIC / CNS DRUGS, NEU

903855	00781304095	REGONOL	SOLN	5MG/ML	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	MUSCLE RELAXANTS / ANTISPASMODIC THERAPY	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	MUSCLE RELAXANTS / ANTISPASMODIC THERAPY	0						IJ	PYRIDOSTIGMINE BROMIDE	Y	00781304095	Enhanced
485486	60505264807	TIZANIDINE HCL	CAPS	2MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	MUSCLE RELAXANTS / ANTISPASMODIC THERAPY	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	MUSCLE RELAXANTS / ANTISPASMODIC THERAPY	0						OR	TIZANIDINE HYDROCHLORIDE	Y	60505264807	Enhanced
485485	60505264907	TIZANIDINE HCL	CAPS	4MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	MUSCLE RELAXANTS / ANTISPASMODIC THERAPY	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	MUSCLE RELAXANTS / ANTISPASMODIC THERAPY	0						OR	TIZANIDINE HYDROCHLORIDE	Y	60505264907	Enhanced
485484	60505265007	TIZANIDINE HCL	CAPS	6MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	MUSCLE RELAXANTS / ANTISPASMODIC THERAPY	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	MUSCLE RELAXANTS / ANTISPASMODIC THERAPY	0						OR	TIZANIDINE HYDROCHLORIDE	Y	60505265007	Enhanced
313412	00378072219	TIZANIDINE HCL	TABS	2MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	MUSCLE RELAXANTS / ANTISPASMODIC THERAPY	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	MUSCLE RELAXANTS / ANTISPASMODIC THERAPY	0						OR	TIZANIDINE HYDROCHLORIDE	Y	00378072219	Enhanced
313413	55111018010	TIZANIDINE HCL	TABS	4MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	MUSCLE RELAXANTS / ANTISPASMODIC THERAPY	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	MUSCLE RELAXANTS / ANTISPASMODIC THERAPY	0						OR	TIZANIDINE HYDROCHLORIDE	Y	55111018010	Enhanced
1234978	64376061131	ACETAMINOPHEN/CAFFEINE/DIHYDROCODEINE BITARTRATE	TABS	712.8MG; 60MG; 32MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	0						OR	ACETAMINOPHEN; CAFFEINE; DIHYDROCODEINE BITARTRATE	Y	64376061131	Enhanced
993755	00121050412	ACETAMINOPHEN/CODEINE	SOLN	120MG/5ML; 12MG/5ML	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	0						OR	ACETAMINOPHEN; CODEINE PHOSPHATE	Y	00121050412	Enhanced
993770	00093005001	ACETAMINOPHEN/CODEINE	TABS	300MG; 15MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	0						OR	ACETAMINOPHEN; CODEINE PHOSPHATE	Y	00093005001	Enhanced
993781	00603233820	ACETAMINOPHEN/CODEINE #3	TABS	300MG; 30MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	0						OR	ACETAMINOPHEN; CODEINE PHOSPHATE	Y	00603233820	Enhanced
993890	00093035005	ACETAMINOPHEN/CODEINE	TABS	300MG; 60MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	0						OR	ACETAMINOPHEN; CODEINE PHOSPHATE	Y	00093035005	Enhanced
994239	51991007405	ASCOMP/CODEINE	CAPS	325MG; 50MG; 40MG; 30MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	0						OR	ASPIRIN; BUTALBITAL; CAFFEINE; CODEINE	Y	51991007405	Enhanced
238129	00406201232	BUPRENORPHINE HCL	SOLN	0.3MG/ML	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	0						IJ	BUPRENORPHINE HYDROCHLORIDE	Y	00406201232	Enhanced
351264	00054017613	BUPRENORPHINE HCL	SUBL	2MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	0						SL	BUPRENORPHINE HYDROCHLORIDE	Y	00054017613	Enhanced
351265	00054017713	BUPRENORPHINE HCL	SUBL	8MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	0						SL	BUPRENORPHINE HYDROCHLORIDE	Y	00054017713	Enhanced
993943	00143300001	BUTALBITAL/ACETAMINOPHEN/CAFFEINE/CODEINE	CAPS	325MG; 50MG; 40MG; 30MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	0						OR	ACETAMINOPHEN; BUTALBITAL; CAFFEINE; CODEINE	Y	00143300001	Enhanced
857360	00131210437	CO-GESIC	TABS	500MG; 5MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	0						OR	ACETAMINOPHEN; HYDROCODONE BITARTRATE	Y	00131210437	Enhanced
997170	00054024324	CODEINE SULFATE	TABS	15MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	0						OR	CODEINE SULFATE	Y	00054024324	Enhanced
997287	00054024425	CODEINE SULFATE	TABS	30MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	0						OR	CODEINE SULFATE	Y	00054024425	Enhanced
997296	00054024525	CODEINE SULFATE	TABS	60MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	0						OR	CODEINE SULFATE	Y	00054024525	Enhanced
892473	00641602010	DURAMORPH	SOLN	0.5MG/ML	1	2	0			3		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	0						IJ	MORPHINE SULFATE	Y	00641602010	Enhanced
892489	00641601910	DURAMORPH	SOLN	1MG/ML	1	2	0			3		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	0						IJ	MORPHINE SULFATE	Y	00641601910	Enhanced
1049216	60951071270	ENDOCET	TABS	325MG; 10MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	0						OR	ACETAMINOPHEN; OXYCODONE	Y	60951071270	Enhanced
1049272	60951079770	ENDOCET	TABS	650MG; 10MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	0						OR	ACETAMINOPHEN; OXYCODONE	Y	60951079770	Enhanced
1049223	60951060285	ENDOCET	TABS	325MG; 5MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	0						OR	ACETAMINOPHEN; OXYCODONE	Y	60951060285	Enhanced
1049227	60951070070	ENDOCET	TABS	325MG; 7.5MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	0						OR	ACETAMINOPHEN; OXYCODONE	Y	60951070070	Enhanced
1049235	60951079670	ENDOCET	TABS	500MG; 7.5MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	0						OR	ACETAMINOPHEN; OXYCODONE	Y	60951079670	Enhanced
848928	60951031070	ENDODAN	TABS	325MG; 4.8354MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	0						OR	ASPIRIN; OXYCODONE HYDROCHLORIDE	Y	60951031070	Enhanced
245136	00378912498	FENTANYL	PT72	100MCG/HR	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	0						TD	FENTANYL	Y	00378912498	Enhanced
577057	00378911998	FENTANYL	PT72	12MCG/HR	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	0						TD	FENTANYL	Y	00378911998	Enhanced
245134	00591319872	FENTANYL	PT72	25MCG/HR	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	0						TD	FENTANYL	Y	00591319872	Enhanced
245135	00591321272	FENTANYL	PT72	50MCG/HR	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	0						TD	FENTANYL	Y	00591321272	Enhanced
197696	00591321372	FENTANYL	PT72	75MCG/HR	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	0						TD	FENTANYL	Y	00591321372	Enhanced
310293	00406921230	FENTANYL CITRATE ORAL TRANSMUCOSAL	LPOP	1200MCG	3	2	1	360	90	1	TRANSMUCOSAL FENTANYL DRUGS	0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	0						BU	FENTANYL CITRATE	Y	00406921230	Enhanced
310294	00406921630	FENTANYL CITRATE ORAL TRANSMUCOSAL	LPOP	1600MCG	3	2	1	360	90	1	TRANSMUCOSAL FENTANYL DRUGS	0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	0						BU	FENTANYL CITRATE	Y	00406921630	Enhanced
310295	00406920230	FENTANYL CITRATE ORAL TRANSMUCOSAL	LPOP	200MCG	3	2	1	360	90	1	TRANSMUCOSAL FENTANYL DRUGS	0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	0						BU	FENTANYL CITRATE	Y	00406920230	Enhanced
310297	00406920430	FENTANYL CITRATE ORAL TRANSMUCOSAL	LPOP	400MCG	3	2	1	360	90	1	TRANSMUCOSAL FENTANYL DRUGS	0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	0						BU	FENTANYL CITRATE	Y	00406920430	Enhanced
313992	00406920630	FENTANYL CITRATE ORAL TRANSMUCOSAL	LPOP	600MCG	3	2	1	360	90	1	TRANSMUCOSAL FENTANYL DRUGS	0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	0						BU	FENTANYL CITRATE	Y	00406920630	Enhanced
313993	00406920830	FENTANYL CITRATE ORAL TRANSMUCOSAL	LPOP	800MCG	3	2	1	360	90	1	TRANSMUCOSAL FENTANYL DRUGS	0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	0						BU	FENTANYL CITRATE	Y	00406920830	Enhanced
856940	64376064016	HYDROCODONE BITARTRATE/ACETAMINOPHEN	SOLN	325MG/15ML; 7.5MG/15ML	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	0						OR	ACETAMINOPHEN; HYDROCODONE BITARTRATE	Y	64376064016	Enhanced
857099	00121065504	HYDROCODONE/ACETAMINOPHEN	SOLN	500MG/15ML; 7.5MG/15ML	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	0						OR	ACETAMINOPHEN; HYDROCODONE BITARTRATE	Y	00121065504	Enhanced
856980	64376064301	HYDROCODONE BITARTRATE/ACETAMINOPHEN	TABS	300MG; 10MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	0						OR	ACETAMINOPHEN; HYDROCODONE BITARTRATE	Y	64376064301	Enhanced
856999	00406036705	HYDROCODONE/ACETAMINOPHEN	TABS	325MG; 10MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	0						OR	ACETAMINOPHEN; HYDROCODONE BITARTRATE	Y	00406036705	Enhanced
857107	00603388804	HYDROCODONE/ACETAMINOPHEN	TABS	500MG; 10MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	0						OR	ACETAMINOPHEN; HYDROCODONE BITARTRATE	Y	00603388804	Enhanced
857383	00603388522	HYDROCODONE/ACETAMINOPHEN	TABS	650MG; 10MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	0						OR	ACETAMINOPHEN; HYDROCODONE BITARTRATE	Y	00603388522	Enhanced
856908	00603388621	HYDROCODONE/ACETAMINOPHEN	TABS	660MG; 10MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	0						OR	ACETAMINOPHEN; HYDROCODONE BITARTRATE	Y	00603388621	Enhanced
856892	00406036401	HYDROCODONE BITARTRATE/ACETAMINOPHEN	TABS	750MG; 10MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	0						OR	ACETAMINOPHEN; HYDROCODONE BITARTRATE	Y	00406036401	Enhanced
857111	00603388021	HYDROCODONE/ACETAMINOPHEN	TABS	500MG; 2.5MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	0						OR	ACETAMINOPHEN; HYDROCODONE BITARTRATE	Y	00603388021	Enhanced
856987	64376064801	HYDROCODONE BITARTRATE/ACETAMINOPHEN	TABS	300MG; 5MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	0						OR	ACETAMINOPHEN; HYDROCODONE BITARTRATE	Y	64376064801	Enhanced
857002	00603389021	HYDROCODONE/ACETAMINOPHEN	TABS	325MG; 5MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	0						OR	ACETAMINOPHEN; HYDROCODONE BITARTRATE	Y	00603389021	Enhanced
856903	00603388121	HYDROCODONE/ACETAMINOPHEN	TABS	500MG; 5MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	0						OR	ACETAMINOPHEN; HYDROCODONE BITARTRATE	Y	00603388121	Enhanced
856992	64376064901	HYDROCODONE BITARTRATE/ACETAMINOPHEN	TABS	300MG; 7.5MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	0						OR	ACETAMINOPHEN; HYDROCODONE BITARTRATE	Y	64376064901	Enhanced
857005	00603389121	HYDROCODONE/ACETAMINOPHEN	TABS	325MG; 7.5MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	0						OR	ACETAMINOPHEN; HYDROCODONE BITARTRATE	Y	00603389121	Enhanced
857118	00591038505	HYDROCODONE/ACETAMINOPHEN	TABS	500MG; 7.5MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	0						OR	ACETAMINOPHEN; HYDROCODONE BITARTRATE	Y	00591038505	Enhanced
857083	53746011305	HYDROCODONE/ACETAMINOPHEN	TABS	650MG; 7.5MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	0						OR	ACETAMINOPHEN; HYDROCODONE BITARTRATE	Y	53746011305	Enhanced
833036	00591038705	HYDROCODONE/ACETAMINOPHEN	TABS	750MG; 7.5MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	0						OR	ACETAMINOPHEN; HYDROCODONE BITARTRATE	Y	00591038705	Enhanced
858798	53746014501	HYDROCODONE/IBUPROFEN	TABS	7.5MG; 200MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	0						OR	HYDROCODONE BITARTRATE; IBUPROFEN	Y	53746014501	Enhanced
897663	17478054050	HYDROMORPHONE HCL	SOLN	500MG/50ML	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	0						IJ	HYDROMORPHONE HYDROCHLORIDE	Y	17478054050	Enhanced
897696	00527135301	HYDROMORPHONE HCL	TABS	2MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	0						OR	HYDROMORPHONE HYDROCHLORIDE	Y	00527135301	Enhanced
897702	00527135401	HYDROMORPHONE HCL	TABS	4MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	0						OR	HYDROMORPHONE HYDROCHLORIDE	Y	00527135401	Enhanced
897710	00406324901	HYDROMORPHONE HCL	TABS	8MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	0						OR	HYDROMORPHONE HYDROCHLORIDE	Y	00406324901	Enhanced
197873	00054043825	LEVORPHANOL TARTRATE	TABS	2MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	0						OR	LEVORPHANOL TARTRATE	Y	00054043825	Enhanced
861459	00641605425	MEPERIDINE HCL	SOLN	100MG/ML	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	0						IJ	MEPERIDINE HYDROCHLORIDE	Y	00641605425	Enhanced
861476	00641605525	MEPERIDINE HCL	SOLN	25MG/ML	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	0						IJ	MEPERIDINE HYDROCHLORIDE	Y	00641605225	Enhanced
861463	00641605325	MEPERIDINE HCL	SOLN	50MG/ML	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	0						IJ	MEPERIDINE HYDROCHLORIDE	Y	00641605325	Enhanced
991147	66689069479	METHADONE HCL	CONC	10MG/ML	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	0						OR	METHADONE HYDROCHLORIDE	Y	66689069479	Enhanced
864714	67457021720	METHADONE HCL	SOLN	10MG/ML	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	0						IJ	METHADONE HYDROCHLORIDE	Y	67457021720	Enhanced
864769	66689071216	METHADONE HCL	SOLN	10MG/5ML	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	0						OR	METHADONE HYDROCHLORIDE	Y	66689071216	Enhanced
864761	66689071116	METHADONE HCL	SOLN	5MG/5ML	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	0						OR	METHADONE HYDROCHLORIDE	Y	66689071116	Enhanced
864706	00406577101	METHADONE HCL	TABS	10MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	0						OR	METHADONE HYDROCHLORIDE	Y	00406577101	Enhanced
864718	00406575501	METHADONE HCL	TABS	5MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	0						OR	METHADONE HYDROCHLORIDE	Y	00406575501	Enhanced
892554	49884067001	MORPHINE SULFATE ER	CP24	100MG	1	2	1	270	90	0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	1	1	LONG ACTING OPIOIDS	1			OR	MORPHINE SULFATE	Y	00591345301	Enhanced
892596	49884066501	MORPHINE SULFATE ER	CP24	25MG	1	2	1	270	90	0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	1	1	LONG ACTING OPIOIDS	1			OR	MORPHINE SULFATE	Y	00591344901	Enhanced
892345	49884066601	MORPHINE SULFATE ER	CP24	30MG	1	2

977911	63481043970	OPANA ER (CRUSH RESISTANT)	TB12	30MG	2	5	1	270	90	0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	1	1	LONG ACTING OPIOIDS	2				OR	OXYMORPHONE HYDROCHLORIDE	W	63481043970	Enhanced
977917	63481044070	OPANA ER (CRUSH RESISTANT)	TB12	40MG	3	5	1	270	90	0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	1	1	LONG ACTING OPIOIDS	2				OR	OXYMORPHONE HYDROCHLORIDE	W	63481044070	Enhanced
977925	63481043470	OPANA ER (CRUSH RESISTANT)	TB12	5MG	2	5	1	270	90	0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	1	1	LONG ACTING OPIOIDS	2				OR	OXYMORPHONE HYDROCHLORIDE	W	63481043470	Enhanced
1049658	00591073705	OXYCODONE/ACETAMINOPHEN	CAPS	500MG; 5MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	0							OR	ACETAMINOPHEN; OXYCODONE	Y	00591073705	Enhanced
1049214	00406052301	OXYCODONE/ACETAMINOPHEN	TABS	325MG; 10MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	0							OR	ACETAMINOPHEN; OXYCODONE	Y	00406052301	Enhanced
1049270	53746020601	OXYCODONE/ACETAMINOPHEN	TABS	650MG; 10MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	0							OR	ACETAMINOPHEN; OXYCODONE	Y	53746020601	Enhanced
1049635	00378710301	OXYCODONE/ACETAMINOPHEN	TABS	325MG; 2.5MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	0							OR	ACETAMINOPHEN; OXYCODONE	Y	00378710301	Enhanced
1049221	00603499828	OXYCODONE/ACETAMINOPHEN	TABS	325MG; 5MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	0							OR	ACETAMINOPHEN; OXYCODONE	Y	00603499828	Enhanced
1049225	00406052201	OXYCODONE/ACETAMINOPHEN	TABS	325MG; 7.5MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	0							OR	ACETAMINOPHEN; OXYCODONE	Y	00406052201	Enhanced
1049233	00406056201	OXYCODONE/ACETAMINOPHEN	TABS	500MG; 7.5MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	0							OR	ACETAMINOPHEN; OXYCODONE	Y	00406056201	Enhanced
848768	00378611701	OXYCODONE/ASPIRIN	TABS	325MG; 4.8350MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	0							OR	ASPIRIN; OXYCODONE HYDROCHLORIDE	Y	00378611701	Enhanced
1049589	00555077802	OXYCODONE/IBUPROFEN	TABS	400MG; 5MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	0							OR	IBUPROFEN; OXYCODONE HYDROCHLORIDE	Y	00555077802	Enhanced
1049696	68462020401	OXYCODONE HCL	CAPS	5MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	0							OR	OXYCODONE HYDROCHLORIDE	Y	68462020401	Enhanced
1049615	68462034737	OXYCODONE HCL	CONC	20MG/ML	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	0							OR	OXYCODONE HYDROCHLORIDE	Y	68462034737	Enhanced
1049683	10702005601	OXYCODONE HCL	TABS	10MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	0							OR	OXYCODONE HYDROCHLORIDE	Y	10702005601	Enhanced
1049611	00603499121	OXYCODONE HCL	TABS	15MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	0							OR	OXYCODONE HYDROCHLORIDE	Y	00603499121	Enhanced
1049686	10702005701	OXYCODONE HCL	TABS	20MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	0							OR	OXYCODONE HYDROCHLORIDE	Y	10702005701	Enhanced
1049618	00406053001	OXYCODONE HCL	TABS	30MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	0							OR	OXYCODONE HYDROCHLORIDE	Y	00406053001	Enhanced
1049621	00406055201	OXYCODONE HCL	TABS	5MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	0							OR	OXYCODONE HYDROCHLORIDE	Y	00406055201	Enhanced
1049504	59011041010	OXYCONTIN	TB12	10MG	2	5	1	270	90	0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	1	1	LONG ACTING OPIOIDS	2				OR	OXYCODONE HYDROCHLORIDE	W	59011041010	Enhanced
1049545	59011041510	OXYCONTIN	TB12	15MG	2	5	1	270	90	0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	1	1	LONG ACTING OPIOIDS	2				OR	OXYCODONE HYDROCHLORIDE	W	59011041510	Enhanced
1049565	59011042010	OXYCONTIN	TB12	20MG	2	5	1	270	90	0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	1	1	LONG ACTING OPIOIDS	2				OR	OXYCODONE HYDROCHLORIDE	W	59011042010	Enhanced
1049576	59011043010	OXYCONTIN	TB12	30MG	2	5	1	270	90	0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	1	1	LONG ACTING OPIOIDS	2				OR	OXYCODONE HYDROCHLORIDE	W	59011043010	Enhanced
1049586	59011044010	OXYCONTIN	TB12	40MG	2	5	1	270	90	0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	1	1	LONG ACTING OPIOIDS	2				OR	OXYCODONE HYDROCHLORIDE	W	59011044010	Enhanced
1049595	59011046010	OXYCONTIN	TB12	60MG	2	5	1	270	90	0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	1	1	LONG ACTING OPIOIDS	2				OR	OXYCODONE HYDROCHLORIDE	W	59011046010	Enhanced
1049601	59011048010	OXYCONTIN	TB12	80MG	3	5	1	270	90	0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	1	1	LONG ACTING OPIOIDS	2				OR	OXYCODONE HYDROCHLORIDE	W	59011048010	Enhanced
977874	00115123201	OXYMORPHONE HYDROCHLORIDE ER	TB12	10MG	1	2	1	270	90	0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	1	1	LONG ACTING OPIOIDS	1				OR	OXYMORPHONE HYDROCHLORIDE	Y	00115123201	Enhanced
977894	00228326211	OXYMORPHONE HYDROCHLORIDE ER	TB12	15MG	1	2	1	270	90	0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	1	1	LONG ACTING OPIOIDS	1				OR	OXYMORPHONE HYDROCHLORIDE	Y	00228326211	Enhanced
977902	00115123301	OXYMORPHONE HYDROCHLORIDE ER	TB12	20MG	1	2	1	270	90	0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	1	1	LONG ACTING OPIOIDS	1				OR	OXYMORPHONE HYDROCHLORIDE	Y	00115123301	Enhanced
977909	00115131701	OXYMORPHONE HYDROCHLORIDE ER	TB12	30MG	1	2	1	270	90	0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	1	1	LONG ACTING OPIOIDS	1				OR	OXYMORPHONE HYDROCHLORIDE	Y	00115131701	Enhanced
977915	00115123401	OXYMORPHONE HYDROCHLORIDE ER	TB12	40MG	1	2	1	270	90	0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	1	1	LONG ACTING OPIOIDS	1				OR	OXYMORPHONE HYDROCHLORIDE	Y	00115123401	Enhanced
977923	00115123101	OXYMORPHONE HYDROCHLORIDE ER	TB12	5MG	1	2	1	270	90	0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	1	1	LONG ACTING OPIOIDS	1				OR	OXYMORPHONE HYDROCHLORIDE	Y	00115123101	Enhanced
977929	00228326111	OXYMORPHONE HYDROCHLORIDE ER	TB12	7.5MG	1	2	1	270	90	0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	1	1	LONG ACTING OPIOIDS	1				OR	OXYMORPHONE HYDROCHLORIDE	Y	00228326111	Enhanced
977942	00054028425	OXYMORPHONE HYDROCHLORIDE	TABS	10MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	0							OR	OXYMORPHONE HYDROCHLORIDE	Y	00054028425	Enhanced
977939	00054028325	OXYMORPHONE HYDROCHLORIDE	TABS	5MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	0							OR	OXYMORPHONE HYDROCHLORIDE	Y	00054028325	Enhanced
859331	23710090201	REPREXAIN	TABS	10MG; 200MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	0							OR	HYDROCODONE BITARTRATE; IBUPROFEN	Y	23710090201	Enhanced
858772	23710090001	REPREXAIN	TABS	2.5MG; 200MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	0							OR	HYDROCODONE BITARTRATE; IBUPROFEN	Y	23710090001	Enhanced
858784	23710090101	REPREXAIN	TABS	5MG; 200MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	0							OR	HYDROCODONE BITARTRATE; IBUPROFEN	Y	23710090101	Enhanced
856966	58407009101	STAGESIC	CAPS	500MG; 5MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	0							OR	ACETAMINOPHEN; HYDROCODONE BITARTRATE	Y	58407009101	Enhanced
856946	63717089516	ZAMICET	SOLN	325MG/15ML; 10MG/15ML	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NARCOTIC ANALGESICS	0							OR	ACETAMINOPHEN; HYDROCODONE BITARTRATE	Y	63717089516	Enhanced
886627	55390018301	BUTORPHANOL TARTRATE	SOLN	1MG/ML	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NON-NARCOTIC ANALGESICS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NON-NARCOTIC ANALGESICS	0							U	BUTORPHANOL TARTRATE	Y	55390018301	Enhanced
886622	55390018402	BUTORPHANOL TARTRATE	SOLN	2MG/ML	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NON-NARCOTIC ANALGESICS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NON-NARCOTIC ANALGESICS	0							U	BUTORPHANOL TARTRATE	Y	55390018402	Enhanced
886634	00054309036	BUTORPHANOL TARTRATE	SOLN	10MG/ML	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NON-NARCOTIC ANALGESICS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NON-NARCOTIC ANALGESICS	0							NA	BUTORPHANOL TARTRATE	Y	00054309036	Enhanced
213468	00025152051	CELEBREX	CAPS	100MG	2	5	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NON-NARCOTIC ANALGESICS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NON-NARCOTIC ANALGESICS	1	1	COX-2	2				OR	CELECOXIB	W	00025152051	Enhanced
213469	00025152551	CELEBREX	CAPS	200MG	2	5	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NON-NARCOTIC ANALGESICS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NON-NARCOTIC ANALGESICS	1	1	COX-2	2				OR	CELECOXIB	W	00025152551	Enhanced
352314	00025153002	CELEBREX	CAPS	400MG	2	5	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NON-NARCOTIC ANALGESICS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NON-NARCOTIC ANALGESICS	1	1	COX-2	2				OR	CELECOXIB	W	00025153002	Enhanced
886381	00025151501	CELEBREX	CAPS	50MG	2	5	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NON-NARCOTIC ANALGESICS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NON-NARCOTIC ANALGESICS	1	1	COX-2	2				OR	CELECOXIB	W	00025151501	Enhanced
857706	00591039760	DICLOFENAC SODIUM/MISOPROSTOL	TBEC	50MG; 200MCG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NON-NARCOTIC ANALGESICS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NON-NARCOTIC ANALGESICS	1	2	BRAND NSAIDS	1				OR	DICLOFENAC SODIUM; MISOPROSTOL	Y	00591039760	Enhanced
857706	00591039760	DICLOFENAC SODIUM/MISOPROSTOL	TBEC	50MG; 200MCG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NON-NARCOTIC ANALGESICS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NON-NARCOTIC ANALGESICS	1	2	COX-2	1				OR	DICLOFENAC SODIUM; MISOPROSTOL	Y	00591039760	Enhanced
359105	00591039860	DICLOFENAC SODIUM/MISOPROSTOL	TBEC	75MG; 200MCG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NON-NARCOTIC ANALGESICS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NON-NARCOTIC ANALGESICS	1	2	COX-2	1				OR	DICLOFENAC SODIUM; MISOPROSTOL	Y	00591039860	Enhanced
1359105	00591039860	DICLOFENAC SODIUM/MISOPROSTOL	TBEC	75MG; 200MCG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NON-NARCOTIC ANALGESICS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NON-NARCOTIC ANALGESICS	1	2	BRAND NSAIDS	1				OR	DICLOFENAC SODIUM; MISOPROSTOL	Y	00591039860	Enhanced
355942	00093094805	DICLOFENAC POTASSIUM	TABS	50MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NON-NARCOTIC ANALGESICS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NON-NARCOTIC ANALGESICS	1	2	BRAND NSAIDS	1				OR	DICLOFENAC POTASSIUM	Y	00093094805	Enhanced
355942	00093094805	DICLOFENAC POTASSIUM	TABS	50MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NON-NARCOTIC ANALGESICS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NON-NARCOTIC ANALGESICS	1	2	COX-2	1				OR	DICLOFENAC POTASSIUM	Y	00093094805	Enhanced
355657	00378035501	DICLOFENAC SODIUM ER	TB24	100MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NON-NARCOTIC ANALGESICS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NON-NARCOTIC ANALGESICS	1	2	COX-2	1				OR	DICLOFENAC SODIUM	Y	00378035501	Enhanced
355657	00378035501	DICLOFENAC SODIUM ER	TB24	100MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NON-NARCOTIC ANALGESICS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NON-NARCOTIC ANALGESICS	1	2	BRAND NSAIDS	1				OR	DICLOFENAC SODIUM	Y	00378035501	Enhanced
355664	00781178501	DICLOFENAC SODIUM DR	TBEC	25MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NON-NARCOTIC ANALGESICS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NON-NARCOTIC ANALGESICS	1	2	BRAND NSAIDS	1				OR	DICLOFENAC SODIUM	Y	00781178501	Enhanced
355664	00781178501	DICLOFENAC SODIUM DR	TBEC	25MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NON-NARCOTIC ANALGESICS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NON-NARCOTIC ANALGESICS	1	2	COX-2	1				OR	DICLOFENAC SODIUM	Y	00781178501	Enhanced
355906	00781178701	DICLOFENAC SODIUM DR	TBEC	50MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NON-NARCOTIC ANALGESICS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NON-NARCOTIC ANALGESICS	1	2	BRAND NSAIDS	1				OR	DICLOFENAC SODIUM	Y	00781178701	Enhanced
355906	00781178701	DICLOFENAC SODIUM DR	TBEC	50MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NON-NARCOTIC ANALGESICS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NON-NARCOTIC ANALGESICS	1	2	COX-2	1				OR	DICLOFENAC SODIUM	Y	00781178701	Enhanced
355926	00781178910	DICLOFENAC SODIUM DR	TBEC	75MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NON-NARCOTIC ANALGESICS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NON-NARCOTIC ANALGESICS	1	2	COX-2	1				OR	DICLOFENAC SODIUM	Y	00781178910	Enhanced
355926	00781178910	DICLOFENAC SODIUM DR	TBEC	75MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NON-NARCOTIC ANALGESICS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NON-NARCOTIC ANALGESICS	1	2	BRAND NSAIDS	1				OR	DICLOFENAC SODIUM	Y	00781178910	Enhanced
197603	00093075501	DIFLUNISAL	TABS	500MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NON-NARCOTIC ANALGESICS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NON-NARCOTIC ANALGESICS	0							OR	DIFLUNISAL	Y	00093075501	Enhanced
197684	31672401601	ETODOLAC	CAPS	200MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NON-NARCOTIC ANALGESICS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NON-NARCOTIC ANALGESICS	1	2	BRAND NSAIDS	1				OR	ETODOLAC	Y	31672401601	Enhanced
197684	31672401601	ETODOLAC	CAPS	200MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NON-NARCOTIC ANALGESICS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NON-NARCOTIC ANALGESICS	1	2	COX-2	1				OR	ETODOLAC	Y	31672401601	Enhanced
197686	00185014001	ETODOLAC	TABS	400MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NON-NARCOTIC ANALGESICS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NON-NARCOTIC ANALGESICS	1	2	BRAND NSAIDS	1				OR	ETODOLAC	Y	00185014001	Enhanced
197686	00185014001	ETODOLAC	TABS	400MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NON-NARCOTIC ANALGESICS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NON-NARCOTIC ANALGESICS	1	2	COX-2	1				OR	ETODOLAC	Y	00185014001	Enhanced
199390	00185013905	ETODOLAC	TABS	500MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NON-NARCOTIC ANALGESICS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NON-NARCOTIC ANALGESICS	1	2	BRAND NSAIDS	1				OR	ETODOLAC	Y	00185013905	Enhanced
199390	00185013905	ETODOLAC	TABS	500MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NON-NARCOTIC ANALGESICS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NON-NARCOTIC ANALGESICS	1	2	COX-2	1				OR	ETODOLAC	Y	00185013905	Enhanced
310245	31672405101	ETODOLAC ER	TB24	400MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NON-NARCOTIC ANALGESICS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NON-NARCOTIC ANALGESICS	1	2	COX-2	1				OR	ETODOLAC	Y	31672405101	Enhanced
310245	31672405101	ETODOLAC ER	TB24	400MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NON-NARCOTIC ANALGESICS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NON-NARCOTIC ANALGESICS	1	2	BRAND NSAIDS	1				OR	ETODOLAC	Y	31672405101	Enhanced
359500	31672405201	ETODOLAC ER	TB24	500MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NON-NARCOTIC ANALGESICS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NON-NARCOTIC ANALGESICS	1	2	BRAND NSAIDS	1				OR	ETODOLAC	Y	31672405201	Enhanced
359500	31672405201	ETODOLAC ER	TB24	500MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NON-NARCOTIC ANALGESICS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NON-NARCOTIC ANALGESICS	1	2	COX-2	1				OR	ETODOLAC	Y	31672405201	Enhanced
310247	31672405304	ETODOLAC ER	TB24	600MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	NON-NARCOTIC ANALGESICS	AUTON

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856773	00603221721	AMITRIPTYLINE HCL	TABS	150MG	1	2	0			2	HIGH RISK MEDICATIONS - TERTIARY TRICYCLIC ANTIDEPRESSANTS	0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	AMITRIPTYLINE HYDROCHLORIDE	Y	00603221721	Enhanced
856834	00603221321	AMITRIPTYLINE HCL	TABS	25MG	1	2	0			2	HIGH RISK MEDICATIONS - TERTIARY TRICYCLIC ANTIDEPRESSANTS	0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	AMITRIPTYLINE HYDROCHLORIDE	Y	00603221321	Enhanced
856845	00378265001	AMITRIPTYLINE HCL	TABS	50MG	1	2	0			2	HIGH RISK MEDICATIONS - TERTIARY TRICYCLIC ANTIDEPRESSANTS	0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	AMITRIPTYLINE HYDROCHLORIDE	Y	00378265001	Enhanced
856853	00781148901	AMITRIPTYLINE HCL	TABS	75MG	1	2	0			2	HIGH RISK MEDICATIONS - TERTIARY TRICYCLIC ANTIDEPRESSANTS	0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	AMITRIPTYLINE HYDROCHLORIDE	Y	00781148901	Enhanced
197363	00591571501	AMOXAPINE	TABS	100MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	AMOXAPINE	Y	00591571501	Enhanced
197364	00591571630	AMOXAPINE	TABS	150MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	AMOXAPINE	Y	00591571630	Enhanced
197365	00591571301	AMOXAPINE	TABS	25MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	AMOXAPINE	Y	00591571301	Enhanced
197366	00591571401	AMOXAPINE	TABS	50MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	AMOXAPINE	Y	00591571401	Enhanced
861221	00228305911	AMPHETAMINE/DEXTROAMPHETAMINE	CP24	2.5MG; 2.5MG; 2.5MG; 2.5MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	AMPHETAMINE ASPARTATE; AMPHETAMINE SULFATE;	Y	00228305911	Enhanced
861223	00228306311	AMPHETAMINE/DEXTROAMPHETAMINE	CP24	3.75MG; 3.75MG; 3.75MG; 3.75MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	AMPHETAMINE ASPARTATE; AMPHETAMINE SULFATE;	Y	00228306311	Enhanced
861225	00228306011	AMPHETAMINE/DEXTROAMPHETAMINE	CP24	5MG; 5MG; 5MG; 5MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	AMPHETAMINE ASPARTATE; AMPHETAMINE SULFATE;	Y	00228306011	Enhanced
861227	00228306411	AMPHETAMINE/DEXTROAMPHETAMINE	CP24	6.25MG; 6.25MG; 6.25MG; 6.25MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	AMPHETAMINE ASPARTATE; AMPHETAMINE SULFATE;	Y	00228306411	Enhanced
861232	00228306111	AMPHETAMINE/DEXTROAMPHETAMINE	CP24	7.5MG; 7.5MG; 7.5MG; 7.5MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	AMPHETAMINE ASPARTATE; AMPHETAMINE SULFATE;	Y	00228306111	Enhanced
861237	00228306211	AMPHETAMINE/DEXTROAMPHETAMINE	CP24	1.25MG; 1.25MG; 1.25MG; 1.25MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	AMPHETAMINE ASPARTATE; AMPHETAMINE SULFATE;	Y	00228306211	Enhanced
541892	00555097202	AMPHETAMINE/DEXTROAMPHETAMINE	TABS	2.5MG; 2.5MG; 2.5MG; 2.5MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	AMPHETAMINE ASPARTATE; AMPHETAMINE SULFATE;	Y	00555097202	Enhanced
687043	00555077602	AMPHETAMINE/DEXTROAMPHETAMINE	TABS	3.125MG; 3.125MG; 3.125MG; 3.125MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	AMPHETAMINE ASPARTATE; AMPHETAMINE SULFATE;	Y	00555077602	Enhanced
577957	00555077702	AMPHETAMINE/DEXTROAMPHETAMINE	TABS	3.75MG; 3.75MG; 3.75MG; 3.75MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	AMPHETAMINE ASPARTATE; AMPHETAMINE SULFATE;	Y	00555077702	Enhanced
577961	00185040101	AMPHETAMINE/DEXTROAMPHETAMINE	TABS	5MG; 5MG; 5MG; 5MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	AMPHETAMINE ASPARTATE; AMPHETAMINE SULFATE;	Y	00185040101	Enhanced
541363	00185040401	AMPHETAMINE/DEXTROAMPHETAMINE	TABS	7.5MG; 7.5MG; 7.5MG; 7.5MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	AMPHETAMINE ASPARTATE; AMPHETAMINE SULFATE;	Y	00185040401	Enhanced
541678	00555097102	AMPHETAMINE/DEXTROAMPHETAMINE	TABS	1.25MG; 1.25MG; 1.25MG; 1.25MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	AMPHETAMINE ASPARTATE; AMPHETAMINE SULFATE;	Y	00555097102	Enhanced
1009145	00555077502	AMPHETAMINE/DEXTROAMPHETAMINE	TABS	1.875MG; 1.875MG; 1.875MG; 1.875MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	AMPHETAMINE ASPARTATE; AMPHETAMINE SULFATE;	Y	00555077502	Enhanced
993505	00093550101	BUDEPRION SR	TB12	100MG	1	2	1	360	90	0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	BUPROPION HCL	Y	00093550101	Enhanced
993520	00093550201	BUDEPRION SR	TB12	150MG	1	2	1	270	90	0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	BUPROPION HCL	Y	00093550201	Enhanced
993687	60505015705	BUPROPION HCL	TABS	100MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	BUPROPION HCL	Y	60505015705	Enhanced
993503	00591354060	BUPROPION HCL SR	TB12	100MG	1	2	1	360	90	0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	BUPROPION HCL	Y	00591354060	Enhanced
993518	00185041501	BUPROPION HCL SR	TB12	150MG	1	2	1	270	90	0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	BUPROPION HCL	Y	00185041501	Enhanced
993536	00115544513	BUPROPION HCL SR	TB12	200MG	1	2	1	180	90	0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	BUPROPION HCL	Y	00115544513	Enhanced
993691	60505015805	BUPROPION HCL	TABS	75MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	BUPROPION HCL	Y	60505015805	Enhanced
993541	10370010150	BUPROPION HCL XL	TB24	150MG	1	2	1	270	90	0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	BUPROPION HCL	Y	10370010150	Enhanced
993557	00591333205	BUPROPION HCL XL	TB24	300MG	1	2	1	180	90	0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	BUPROPION HCL	Y	00591333205	Enhanced
866083	00093005401	BUSPIRONE HCL	TABS	10MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	BUSPIRONE HYDROCHLORIDE	Y	00093005401	Enhanced
866018	00591071818	BUSPIRONE HCL	TABS	15MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	BUSPIRONE HYDROCHLORIDE	Y	00591071818	Enhanced
866090	00378117591	BUSPIRONE HCL	TABS	30MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	BUSPIRONE HYDROCHLORIDE	Y	00378117591	Enhanced
866094	00591065701	BUSPIRONE HCL	TABS	5MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	BUSPIRONE HYDROCHLORIDE	Y	00591065701	Enhanced
866111	49884072505	BUSPIRONE HCL	TABS	7.5MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	BUSPIRONE HYDROCHLORIDE	Y	49884072505	Enhanced
991213	00641139835	CHLORPROMAZINE HCL	SOLN	25MG/ML	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						IJ	CHLORPROMAZINE HYDROCHLORIDE	Y	00641139835	Enhanced
991044	00832030310	CHLORPROMAZINE HCL	TABS	100MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	CHLORPROMAZINE HYDROCHLORIDE	Y	00832030310	Enhanced
991039	00832030000	CHLORPROMAZINE HCL	TABS	10MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	CHLORPROMAZINE HYDROCHLORIDE	Y	00832030000	Enhanced
991188	00832030410	CHLORPROMAZINE HCL	TABS	200MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	CHLORPROMAZINE HYDROCHLORIDE	Y	00832030410	Enhanced
991194	00832030110	CHLORPROMAZINE HCL	TABS	25MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	CHLORPROMAZINE HYDROCHLORIDE	Y	00832030110	Enhanced
991336	00781591501	CHLORPROMAZINE HCL	TABS	50MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	CHLORPROMAZINE HYDROCHLORIDE	Y	00781591501	Enhanced
309313	65862007424	CITALOPRAM HYDROBROMIDE	SOLN	10MG/5ML	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	2	1	ANTIDEPRESSANTS- SSRI	1			OR	CITALOPRAM HYDROBROMIDE	Y	65862007424	Enhanced
283672	31722020601	CITALOPRAM HYDROBROMIDE	TABS	10MG	1	2	1	360	90	0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	2	1	ANTIDEPRESSANTS- SSRI	1			OR	CITALOPRAM HYDROBROMIDE	Y	31722020601	Enhanced
200371	00093474101	CITALOPRAM HYDROBROMIDE	TABS	20MG	1	2	1	180	90	0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	2	1	ANTIDEPRESSANTS- SSRI	1			OR	CITALOPRAM HYDROBROMIDE	Y	00093474101	Enhanced
309314	13668001130	CITALOPRAM HYDROBROMIDE	TABS	40MG	1	2	1	90	90	0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	2	1	ANTIDEPRESSANTS- SSRI	1			OR	CITALOPRAM HYDROBROMIDE	Y	13668001130	Enhanced
857297	51672401105	CLOMIPRAMINE HCL	CAPS	25MG	1	2	0			2	HIGH RISK MEDICATIONS - TERTIARY TRICYCLIC ANTIDEPRESSANTS	0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	CLOMIPRAMINE HCL	Y	51672401105	Enhanced
857301	51672401205	CLOMIPRAMINE HCL	CAPS	50MG	1	2	0			2	HIGH RISK MEDICATIONS - TERTIARY TRICYCLIC ANTIDEPRESSANTS	0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	CLOMIPRAMINE HCL	Y	51672401205	Enhanced
857305	51672401305	CLOMIPRAMINE HCL	CAPS	75MG	1	2	0			2	HIGH RISK MEDICATIONS - TERTIARY TRICYCLIC ANTIDEPRESSANTS	0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	CLOMIPRAMINE HCL	Y	51672401305	Enhanced
197464	51672404401	CLORAZEPATE DIPOTASSIUM	TABS	15MG	1	2	0			2	HIGH RISK MEDICATIONS - BENZODIAZEPINES	0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	CLORAZEPATE DIPOTASSIUM	Y	51672404401	Enhanced
197465	00378003005	CLORAZEPATE DIPOTASSIUM	TABS	3.75MG	1	2	0			2	HIGH RISK MEDICATIONS - BENZODIAZEPINES	0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	CLORAZEPATE DIPOTASSIUM	Y	00378003005	Enhanced
197466	00378004005	CLORAZEPATE DIPOTASSIUM	TABS	7.5MG	1	2	0			2	HIGH RISK MEDICATIONS - BENZODIAZEPINES	0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	CLORAZEPATE DIPOTASSIUM	Y	00378004005	Enhanced
197535	00093777201	CLOZAPINE	TABS	100MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	CLOZAPINE	Y	00093777201	Enhanced
309374	00093440505	CLOZAPINE	TABS	200MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	CLOZAPINE	Y	00093440505	Enhanced
197536	00093435901	CLOZAPINE	TABS	25MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	CLOZAPINE	Y	00093435901	Enhanced
429212	00093440405	CLOZAPINE	TABS	50MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	CLOZAPINE	Y	00093440405	Enhanced
596928	00002323560	CYMBALTA	CPEP	20MG	2	5	1	540	90	2	ANTIDEPRESSANTS- SNRI	0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	DULOXETINE HYDROCHLORIDE	W	00002323560	Enhanced
596932	00002324030	CYMBALTA	CPEP	30MG	2	5	1	360	90	2	ANTIDEPRESSANTS- SNRI	0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	DULOXETINE HYDROCHLORIDE	W	00002324030	Enhanced
615186	00002327004	CYMBALTA	CPEP	60MG	2	5	1	180	90	2	ANTIDEPRESSANTS- SNRI	0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	DULOXETINE HYDROCHLORIDE	W	00002327004	Enhanced
1099292	00781197501	DESIPRAMINE HCL	TABS	100MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	DESIPRAMINE HYDROCHLORIDE	Y	00781197501	Enhanced
1099288	45963034102	DESIPRAMINE HCL	TABS	10MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	DESIPRAMINE HYDROCHLORIDE	Y	45963034102	Enhanced
1099296	00781197650	DESIPRAMINE HCL	TABS	150MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	DESIPRAMINE HYDROCHLORIDE	Y	00781197650	Enhanced
1099300	00781197201	DESIPRAMINE HCL	TABS	25MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	DESIPRAMINE HYDROCHLORIDE	Y	00781197201	Enhanced
1099304	00781197301	DESIPRAMINE HCL	TABS	50MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	DESIPRAMINE HYDROCHLORIDE	Y	00781197301	Enhanced
1099316	45963034402	DESIPRAMINE HCL	TABS	75MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	DESIPRAMINE HYDROCHLORIDE	Y	45963034402	Enhanced
899548	00093527701	DEXMETHYLPHENIDATE HCL	TABS	10MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	DEXMETHYLPHENIDATE HYDROCHLORIDE	Y	00093527701	Enhanced
899557	00093527501	DEXMETHYLPHENIDATE HCL	TABS	2.5MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	DEXMETHYLPHENIDATE HYDROCHLORIDE	Y	00093527501	Enhanced
899518	00093527601	DEXMETHYLPHENIDATE HCL	TABS	5MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	DEXMETHYLPHENIDATE HYDROCHLORIDE	Y	00093527601	Enhanced
884520	00555095502	DEXTROAMPHETAMINE SULFATE ER	CP24	10MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	DEXTROAMPHETAMINE SULFATE	Y	00555

309843	00054318863	DIAZEPAM	SOLN	1MG/ML	1	2	0			2	HIGH RISK MEDICATIONS - BENZODIAZEPINES	0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	DIAZEPAM	Y	00054318863	Enhanced
197589	00603321528	DIAZEPAM	TABS	10MG	1	2	0			2	HIGH RISK MEDICATIONS - BENZODIAZEPINES	0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	DIAZEPAM	Y	00603321528	Enhanced
197590	00172392560	DIAZEPAM	TABS	2MG	1	2	0			2	HIGH RISK MEDICATIONS - BENZODIAZEPINES	0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	DIAZEPAM	Y	00172392560	Enhanced
197591	00172392660	DIAZEPAM	TABS	5MG	1	2	0			2	HIGH RISK MEDICATIONS - BENZODIAZEPINES	0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	DIAZEPAM	Y	00172392660	Enhanced
1000058	00378641001	DOXEPIN HCL	CAPS	100MG	1	2	0			2	HIGH RISK MEDICATIONS - TERTIARY TRICYCLIC ANTIDEPRESSANTS	0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	DOXEPIN HYDROCHLORIDE	Y	00378641001	Enhanced
1000048	00378104901	DOXEPIN HCL	CAPS	10MG	1	2	0			2	HIGH RISK MEDICATIONS - TERTIARY TRICYCLIC ANTIDEPRESSANTS	0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	DOXEPIN HYDROCHLORIDE	Y	00378104901	Enhanced
1000064	49884022201	DOXEPIN HCL	CAPS	150MG	1	2	0			2	HIGH RISK MEDICATIONS - TERTIARY TRICYCLIC ANTIDEPRESSANTS	0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	DOXEPIN HYDROCHLORIDE	Y	49884022201	Enhanced
1000070	00378312501	DOXEPIN HCL	CAPS	25MG	1	2	0			2	HIGH RISK MEDICATIONS - TERTIARY TRICYCLIC ANTIDEPRESSANTS	0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	DOXEPIN HYDROCHLORIDE	Y	00378312501	Enhanced
1000076	51079043820	DOXEPIN HCL	CAPS	50MG	1	2	0			2	HIGH RISK MEDICATIONS - TERTIARY TRICYCLIC ANTIDEPRESSANTS	0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	DOXEPIN HYDROCHLORIDE	Y	51079043820	Enhanced
1000097	00378537501	DOXEPIN HCL	CAPS	75MG	1	2	0			2	HIGH RISK MEDICATIONS - TERTIARY TRICYCLIC ANTIDEPRESSANTS	0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	DOXEPIN HYDROCHLORIDE	Y	00378537501	Enhanced
1000054	00093961212	DOXEPIN HCL	CONC	10MG/ML	1	2	0			2	HIGH RISK MEDICATIONS - TERTIARY TRICYCLIC ANTIDEPRESSANTS	0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	DOXEPIN HYDROCHLORIDE	Y	00093961212	Enhanced
865216	49502090230	EMSAM	PT24	12MG/24HR	2	5	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						TD	SELEGILINE	W	49502090230	Enhanced
865208	49502090030	EMSAM	PT24	6MG/24HR	2	5	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						TD	SELEGILINE	W	49502090030	Enhanced
865212	49502090130	EMSAM	PT24	9MG/24HR	2	5	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						TD	SELEGILINE	W	49502090130	Enhanced
318179	53489028101	ERGOLOID MESYLATES	TABS	1MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	ERGOT ALKALOIDS, HYDROGENATED (MESYLATE)	Y	53489028101	Enhanced
351265	65162070588	ESCITALOPRAM OXALATE	SOLN	5MG/5ML	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	2	1	ANTIDEPRESSANTS- SSRI	1			OR	ESCITALOPRAM OXALATE	Y	65162070588	Enhanced
349332	00093585101	ESCITALOPRAM OXALATE	TABS	10MG	1	2	1	180	90	0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	2	1	ANTIDEPRESSANTS- SSRI	1			OR	ESCITALOPRAM OXALATE	Y	00093585101	Enhanced
351250	00093585201	ESCITALOPRAM OXALATE	TABS	20MG	1	2	1	90	90	0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	2	1	ANTIDEPRESSANTS- SSRI	1			OR	ESCITALOPRAM OXALATE	Y	00093585201	Enhanced
351249	00093585001	ESCITALOPRAM OXALATE	TABS	5MG	1	2	1	360	90	0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	2	1	ANTIDEPRESSANTS- SSRI	1			OR	ESCITALOPRAM OXALATE	Y	00093585001	Enhanced
848752	00078060208	FANAPT TITRATION PACK	TABS	0	2	5	1	1	90	0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	ILOPERIDONE	W	00078060208	Enhanced
848730	00078060020	FANAPT	TABS	10MG	2	5	1	270	90	0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	ILOPERIDONE	W	00078060020	Enhanced
848734	00078060120	FANAPT	TABS	12MG	2	5	1	180	90	0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	ILOPERIDONE	W	00078060120	Enhanced
848726	00078059520	FANAPT	TABS	1MG	2	5	1	2160	90	0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	ILOPERIDONE	W	00078059520	Enhanced
848738	00078059620	FANAPT	TABS	2MG	2	5	1	1080	90	0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	ILOPERIDONE	W	00078059620	Enhanced
848742	00078059720	FANAPT	TABS	4MG	2	5	1	540	90	0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	ILOPERIDONE	W	00078059720	Enhanced
848746	00078059820	FANAPT	TABS	6MG	2	5	1	360	90	0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	ILOPERIDONE	W	00078059820	Enhanced
848750	00078059920	FANAPT	TABS	8MG	2	5	1	270	90	0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	ILOPERIDONE	W	00078059920	Enhanced
1006803	18860010510	FAZACLO	TBDP	150MG	2	5	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	CLOZAPINE	W	18860010510	Enhanced
996923	18860010601	FAZACLO	TBDP	200MG	2	5	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	CLOZAPINE	W	18860010610	Enhanced
310384	50111064701	FLUOXETINE HCL	CAPS	10MG	1	2	1	720	90	0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	2	1	ANTIDEPRESSANTS- SSRI	1			OR	FLUOXETINE HCL	Y	50111064701	Enhanced
310385	00781282201	FLUOXETINE HCL	CAPS	20MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	2	1	ANTIDEPRESSANTS- SSRI	1			OR	FLUOXETINE HCL	Y	00781282201	Enhanced
313989	55111014930	FLUOXETINE HCL	CAPS	40MG	1	2	1	180	90	0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	2	1	ANTIDEPRESSANTS- SSRI	1			OR	FLUOXETINE HCL	Y	55111014930	Enhanced
313995	55111028448	FLUOXETINE DR	CPDR	90MG	1	2	1	12	84	0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	2	1	ANTIDEPRESSANTS- SSRI	1			OR	FLUOXETINE HCL	Y	55111028448	Enhanced
310386	54838052340	FLUOXETINE HCL	SOLN	20MG/5ML	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	2	1	ANTIDEPRESSANTS- SSRI	1			OR	FLUOXETINE HCL	Y	54838052340	Enhanced
313990	49884073401	FLUOXETINE HCL	TABS	10MG	1	2	1	720	90	0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	2	1	ANTIDEPRESSANTS- SSRI	1			OR	FLUOXETINE HCL	Y	49884073401	Enhanced
248642	49884073510	FLUOXETINE HCL	TABS	20MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	2	1	ANTIDEPRESSANTS- SSRI	1			OR	FLUOXETINE HCL	Y	49884073510	Enhanced
859824	63323027205	FLUPHENAZINE DECANOATE	SOLN	25MG/ML	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						IJ	FLUPHENAZINE DECANOATE	Y	63323027205	Enhanced
861848	00121065304	FLUPHENAZINE HCL	CONC	5MG/ML	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	FLUPHENAZINE HYDROCHLORIDE	Y	00121065304	Enhanced
859835	00121065416	FLUPHENAZINE HCL	ELIX	2.5MG/5ML	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	FLUPHENAZINE HYDROCHLORIDE	Y	00121065416	Enhanced
865129	63323028110	FLUPHENAZINE HCL	SOLN	2.5MG/ML	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						IJ	FLUPHENAZINE HYDROCHLORIDE	Y	63323028110	Enhanced
859841	00378009705	FLUPHENAZINE HCL	TABS	10MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	FLUPHENAZINE HYDROCHLORIDE	Y	00378009705	Enhanced
865117	00378600405	FLUPHENAZINE HCL	TABS	1MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	FLUPHENAZINE HYDROCHLORIDE	Y	00378600405	Enhanced
865123	00781143701	FLUPHENAZINE HCL	TABS	2.5MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	FLUPHENAZINE HYDROCHLORIDE	Y	00781143701	Enhanced
860918	00378607405	FLUPHENAZINE HCL	TABS	5MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	FLUPHENAZINE HYDROCHLORIDE	Y	00378607405	Enhanced
903884	00185015705	FLUVOXAMINE MALEATE	TABS	100MG	1	2	1	270	90	0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	2	1	ANTIDEPRESSANTS- SSRI	1			OR	FLUVOXAMINE MALEATE	Y	00185015705	Enhanced
903887	00555096702	FLUVOXAMINE MALEATE	TABS	25MG	1	2	1	1080	90	0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	2	1	ANTIDEPRESSANTS- SSRI	1			OR	FLUVOXAMINE MALEATE	Y	00555096702	Enhanced
903891	00185002701	FLUVOXAMINE MALEATE	TABS	50MG	1	2	1	540	90	0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	2	1	ANTIDEPRESSANTS- SSRI	1			OR	FLUVOXAMINE MALEATE	Y	00185002701	Enhanced
352228	00049392083	GEODON	SOLR	20MG	2	5	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						IM	ZIPRASIDONE MESYLATE	W	00049392083	Enhanced
1298099	00085049201	GUANIDINE HCL	TABS	125MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	GUANIDINE HYDROCHLORIDE	Y	00085049201	Enhanced
859871	00703702301	HALOPERIDOL DECANOATE	SOLN	100MG/ML	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						IM	HALOPERIDOL DECANOATE	Y	00703702301	Enhanced
859867	00703701103	HALOPERIDOL DECANOATE	SOLN	50MG/ML	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						IM	HALOPERIDOL DECANOATE	Y	00703701103	Enhanced
204416	00703704501	HALOPERIDOL LACTATE	SOLN	5MG/ML	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						IJ	HALOPERIDOL LACTATE	Y	00703704501	Enhanced
141935	00093960412	HALOPERIDOL	CONC	2MG/ML	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	HALOPERIDOL LACTATE	Y	00093960412	Enhanced
310670	00781139101	HALOPERIDOL	TABS	0.5MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	HALOPERIDOL	Y	00781139101	Enhanced
314035	00378033401	HALOPERIDOL	TABS	10MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	HALOPERIDOL	Y	00378033401	Enhanced
310671	00781139201	HALOPERIDOL	TABS	1MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	HALOPERIDOL	Y	00781139201	Enhanced
197754	68382008101	HALOPERIDOL	TABS	20MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	HALOPERIDOL	Y	68382008101	Enhanced
314034	00378021401	HALOPERIDOL	TABS	2MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	HALOPERIDOL	Y	00378021401	Enhanced
310672	00781139601	HALOPERIDOL	TABS	5MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	HALOPERIDOL	Y	00781139601	Enhanced
835593	49884005401	IMIPRAMINE HCL	TABS	10MG	1	2	0			2	HIGH RISK MEDICATIONS - TERTIARY TRICYCLIC ANTIDEPRESSANTS	0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	IMIPRAMINE HYDROCHLORIDE	Y	49884005401	Enhanced
835564	49884005501	IMIPRAMINE HCL	TABS	25MG	1	2	0			2	HIGH RISK MEDICATIONS - TERTIARY TRICYCLIC ANTIDEPRESSANTS	0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	IMIPRAMINE HYDROCHLORIDE	Y	49884005501	Enhanced
835568	53489033201	IMIPRAMINE HCL	TABS	50MG	1	2	0			2	HIGH RISK MEDICATIONS - TERTIARY TRICYCLIC ANTIDEPRESSANTS	0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	IMIPRAMINE HYDROCHLORIDE	Y	53489033201	Enhanced
835591	00054027413	IMIPRAMINE PAMOATE	CAPS	100MG	1	2	0			2	HIGH RISK MEDICATIONS - TERTIARY TRICYCLIC ANTIDEPRESSANTS	0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	IMIPRAMINE PAMOATE	Y	00054027413	Enhanced
835589	00054027513	IMIPRAMINE PAMOATE	CAPS	125MG	1	2	0			2	HIGH RISK MEDICATIONS - TERTIARY TRICYCLIC ANTIDEPRESSANTS	0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	IMIPRAMINE PAMOATE	Y	00054027513	Enhanced

835577	00054027613	IMIPRAMINE PAMOATE	CAPS	150MG	1	2	0			2	HIGH RISK MEDICATIONS - TERTIARY TRICYCLIC ANTIDEPRESSANTS	0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	IMIPRAMINE PAMOATE	Y	00054027613	Enhanced
835572	00054027313	IMIPRAMINE PAMOATE	CAPS	75MG	1	2	0			2	HIGH RISK MEDICATIONS - TERTIARY TRICYCLIC ANTIDEPRESSANTS	0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	IMIPRAMINE PAMOATE	Y	00054027313	Enhanced
862010	54092051302	INTUNIV	TB24	1MG	2	5	0			1	ADHD NON-STIMULANT MEDICATIONS	0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	GUANFACINE HCL	W	54092051302	Enhanced
862015	54092051502	INTUNIV	TB24	2MG	2	5	0			1	ADHD NON-STIMULANT MEDICATIONS	0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	GUANFACINE HCL	W	54092051502	Enhanced
862021	54092051702	INTUNIV	TB24	3MG	2	5	0			1	ADHD NON-STIMULANT MEDICATIONS	0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	GUANFACINE HCL	W	54092051702	Enhanced
862027	54092051902	INTUNIV	TB24	4MG	2	5	0			1	ADHD NON-STIMULANT MEDICATIONS	0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	GUANFACINE HCL	W	54092051902	Enhanced
866105	50458055401	INVEGA	TB24	1.5MG	2	5	1	720	90	0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	PALIPERIDONE	W	50458055401	Enhanced
686441	50458055001	INVEGA	TB24	3MG	2	5	1	360	90	0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	PALIPERIDONE	W	50458055001	Enhanced
686443	50458055101	INVEGA	TB24	6MG	2	5	1	180	90	0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	PALIPERIDONE	W	50458055101	Enhanced
686445	50458055201	INVEGA	TB24	9MG	2	5	1	122	90	0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	PALIPERIDONE	W	50458055201	Enhanced
858057	50458056201	INVEGA SUSTENNA	SUSP	117MG/0.75ML	3	5	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						IM	PALIPERIDONE PALMITATE	W	50458056201	Enhanced
858055	50458056301	INVEGA SUSTENNA	SUSP	156MG/ML	3	5	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						IM	PALIPERIDONE PALMITATE	W	50458056301	Enhanced
858053	50458056401	INVEGA SUSTENNA	SUSP	234MG/1.5ML	3	5	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						IM	PALIPERIDONE PALMITATE	W	50458056401	Enhanced
858074	50458056001	INVEGA SUSTENNA	SUSP	39MG/0.25ML	2	5	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						IM	PALIPERIDONE PALMITATE	W	50458056001	Enhanced
858051	50458056101	INVEGA SUSTENNA	SUSP	78MG/0.5ML	2	5	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						IM	PALIPERIDONE PALMITATE	W	50458056101	Enhanced
1297357	63402031230	LATUDA	TABS	120MG	3	5	1	90	90	0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	LURASIDONE HYDROCHLORIDE	W	63402031230	Enhanced
1235249	63402030230	LATUDA	TABS	20MG	2	5	1	90	90	0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	LURASIDONE HYDROCHLORIDE	W	63402030230	Enhanced
1040036	63402030410	LATUDA	TABS	40MG	2	5	1	180	90	0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	LURASIDONE HYDROCHLORIDE	W	63402030410	Enhanced
1040043	63402030810	LATUDA	TABS	80MG	2	5	1	90	90	0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	LURASIDONE HYDROCHLORIDE	W	63402030810	Enhanced
311355	00143318801	LITHIUM CARBONATE	CAPS	150MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	LITHIUM CARBONATE	Y	00143318801	Enhanced
197889	00143318901	LITHIUM CARBONATE	CAPS	300MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	LITHIUM CARBONATE	Y	00143318901	Enhanced
197893	00143319001	LITHIUM CARBONATE	CAPS	600MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	LITHIUM CARBONATE	Y	00143319001	Enhanced
197890	00143130010	LITHIUM CARBONATE	TABS	300MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	LITHIUM CARBONATE	Y	00143130010	Enhanced
197891	00054002125	LITHIUM CARBONATE ER	TBCR	300MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	LITHIUM CARBONATE	Y	00054002125	Enhanced
197892	68462022401	LITHIUM CARBONATE ER	TBCR	450MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	LITHIUM CARBONATE	Y	68462022401	Enhanced
1112717	00054352763	LITHIUM CITRATE	SOLN	8MEQ/5ML	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	LITHIUM CITRATE	Y	00054352763	Enhanced
311376	00054353244	LORAZEPAM INTENSOL	CONC	2MG/ML	1	2	0			2	HIGH RISK MEDICATIONS - BENZODIAZEPINES	0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	LORAZEPAM	Y	00054353244	Enhanced
197900	63304077205	LORAZEPAM	TABS	0.5MG	1	2	0			2	HIGH RISK MEDICATIONS - BENZODIAZEPINES	0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	LORAZEPAM	Y	16590014390	Enhanced
197901	00591024101	LORAZEPAM	TABS	1MG	1	2	0			2	HIGH RISK MEDICATIONS - BENZODIAZEPINES	0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	LORAZEPAM	Y	00591024101	Enhanced
197902	00904600960	LORAZEPAM	TABS	2MG	1	2	0			2	HIGH RISK MEDICATIONS - BENZODIAZEPINES	0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	LORAZEPAM	Y	00904600960	Enhanced
314078	00591037001	LOXAPINE SUCCINATE	CAPS	10MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	LOXAPINE SUCCINATE	Y	00591037001	Enhanced
311385	00378702501	LOXAPINE SUCCINATE	CAPS	25MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	LOXAPINE SUCCINATE	Y	00378702501	Enhanced
314075	00591037201	LOXAPINE SUCCINATE	CAPS	50MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	LOXAPINE SUCCINATE	Y	00591037201	Enhanced
311386	00591036901	LOXAPINE SUCCINATE	CAPS	5MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	LOXAPINE SUCCINATE	Y	00591036901	Enhanced
1298857	00378006001	MAPROTILINE HCL	TABS	25MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	MAPROTILINE HYDROCHLORIDE	Y	00378006001	Enhanced
1298861	00378008701	MAPROTILINE HCL	TABS	50MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	MAPROTILINE HYDROCHLORIDE	Y	00378008701	Enhanced
1298870	00378009201	MAPROTILINE HCL	TABS	75MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	MAPROTILINE HYDROCHLORIDE	Y	00378009201	Enhanced
201708	30698003201	MARPLAN	TABS	10MG	2	5	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	ISOCARBOXAZID	W	30698003201	Enhanced
1091488	53014059407	METADATE ER	TBCR	20MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	METHYLPHENIDATE HYDROCHLORIDE	Y	53014059407	Enhanced
977860	00378811501	METHAMPHETAMINE HCL	TABS	5MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	METHAMPHETAMINE HYDROCHLORIDE	Y	00378811501	Enhanced
1091137	00093529501	METHYLPHENIDATE HCL CD	CPCR	10MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	METHYLPHENIDATE HYDROCHLORIDE	Y	00093529501	Enhanced
1091161	67767020001	METHYLPHENIDATE HCL ER	CP24	20MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	METHYLPHENIDATE HYDROCHLORIDE	Y	67767020001	Enhanced
1091176	67767020101	METHYLPHENIDATE HCL ER	CP24	30MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	METHYLPHENIDATE HYDROCHLORIDE	Y	67767020101	Enhanced
1091191	67767020201	METHYLPHENIDATE HCL ER	CP24	40MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	METHYLPHENIDATE HYDROCHLORIDE	Y	67767020201	Enhanced
1091202	00093529201	METHYLPHENIDATE HCL CD	CPCR	50MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	METHYLPHENIDATE HYDROCHLORIDE	Y	00093529201	Enhanced
1091218	00093529301	METHYLPHENIDATE HCL CD	CPCR	60MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	METHYLPHENIDATE HYDROCHLORIDE	Y	00093529301	Enhanced
1091133	51991071350	METHYLPHENIDATE HYDROCHLORIDE	SOLN	10MG/5ML	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	METHYLPHENIDATE HYDROCHLORIDE	Y	51991071350	Enhanced
1091341	51991071250	METHYLPHENIDATE HYDROCHLORIDE	SOLN	5MG/5ML	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	METHYLPHENIDATE HYDROCHLORIDE	Y	51991071250	Enhanced
1091150	00591588301	METHYLPHENIDATE HCL	TABS	10MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	METHYLPHENIDATE HYDROCHLORIDE	Y	00591588301	Enhanced
1091392	00591588401	METHYLPHENIDATE HCL	TABS	20MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	METHYLPHENIDATE HYDROCHLORIDE	Y	00591588401	Enhanced
1091225	00406147301	METHYLPHENIDATE HCL ER	TBCR	20MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	METHYLPHENIDATE HYDROCHLORIDE	Y	00406147301	Enhanced
1091170	00406012701	METHYLPHENIDATE HCL ER	TBCR	27MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	METHYLPHENIDATE HYDROCHLORIDE	Y	00406012701	Enhanced
1091497	00406114201	METHYLPHENIDATE HCL	TABS	5MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	METHYLPHENIDATE HYDROCHLORIDE	Y	00406114201	Enhanced
311725	59762141603	MIRTAZAPINE	TABS	15MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	MIRTAZAPINE	Y	59762141603	Enhanced
283406	00093730365	MIRTAZAPINE	TBDP	15MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	MIRTAZAPINE	Y	00093730365	Enhanced
314111	00378353093	MIRTAZAPINE	TABS	30MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	MIRTAZAPINE	Y	00378353093	Enhanced
283407	00093730465	MIRTAZAPINE ODT	TBDP	30MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	MIRTAZAPINE	Y	00093730465	Enhanced
311726	13107003205	MIRTAZAPINE	TABS	45MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	MIRTAZAPINE	Y	13107003205	Enhanced
283485	00093730565	MIRTAZAPINE ODT	TBDP	45MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	MIRTAZAPINE	Y	00093730565	Enhanced
476809	59762141505	MIRTAZAPINE	TABS	7.5MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	MIRTAZAPINE	Y	59762141505	Enhanced
260218	00378557301	MODAFINIL	TABS	100MG	1	2	0			1	NUVIGIL/PROVIGIL	0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	MODAFINIL	Y	00378557301	Enhanced
205324	00378557501	MODAFINIL	TABS	200MG	1	2	0			1	NUVIGIL/PROVIGIL	0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	MODAFINIL	Y	00378557501	Enhanced
1098649	00093102406	NEFAZODONE HCL	TABS	100MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	NEFAZODONE HYDROCHLORIDE	Y	00093102406	Enhanced
1098666	00093711306	NEFAZODONE HCL	TABS	150MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	NEFAZODONE HYDROCHLORIDE	Y	00093711306	Enhanced
1098670	00093102506	NEFAZODONE HCL	TABS	200MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	NEFAZODONE HYDROCHLORIDE	Y	00093102506	Enhanced
1098674	00093102606	NEFAZODONE HCL	TABS	250MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	NEFAZODONE HYDROCHLORIDE	Y	00093102606	Enhanced
1098678	00093717801	NEFAZODONE HCL	TABS	50MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	NEFAZODONE HYDROCHLORIDE	Y	00093717801	Enhanced
198045	00093081001	NORTRIPTYLINE HCL	CAPS	10MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	NORTRIPTYLINE HYDROCHLORIDE	Y	00093081001	Enhanced
317136	00093081101	NORTRIPTYLINE HCL	CAPS	25MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	NORTRIPTYLINE HYDROCHLORIDE	Y	00093081101	Enhanced
198046	00093081205	NORTRIPTYLINE HCL	CAPS	50MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	NORTRIPTYLINE HYDROCHLORIDE	Y	00093081205	Enhanced
198047	00591578901	NORTRIPTYLINE HCL	CAPS	75MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	NORTRIPTYLINE HYDROCHLORIDE	Y	00591578901	Enhanced
403970	00093550656	OLANZAPINE/FLUOXETINE	CAPS	25MG; 12MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	FLUOXETINE HCL; OLANZAPINE	Y	00093550656	Enhanced
403971	00093550756	OLANZAPINE/FLUOXETINE	CAPS	50MG; 12MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / P

283639	00093510501	OLANZAPINE	TABS	20MG	3	2	1	90	90	0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	OLANZAPINE	Y	00093510501	Enhanced
351108	49884032355	OLANZAPINE ODT	TBDP	20MG	1	2	1	90	90	0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	OLANZAPINE	Y	49884032355	Enhanced
312078	00093576810	OLANZAPINE	TABS	5MG	1	2	1	360	90	0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	OLANZAPINE	Y	00093576810	Enhanced
314155	49884032055	OLANZAPINE ODT	TBDP	5MG	1	2	1	360	90	0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	OLANZAPINE	Y	49884032055	Enhanced
312079	00093576956	OLANZAPINE	TABS	7.5MG	1	2	1	241	90	0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	OLANZAPINE	Y	00093576956	Enhanced
262226	57844015101	ORAP	TABS	1MG	2	5	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	PIMOZIDE	W	57844015101	Enhanced
201653	57844018701	ORAP	TABS	2MG	2	5	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	PIMOZIDE	W	57844018701	Enhanced
198057	62584081201	OXAZEPAM	CAPS	10MG	1	2	0			2	HIGH RISK MEDICATIONS - BENZODIAZEPINES	0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	OXAZEPAM	Y	62584081201	Enhanced
312134	62584081301	OXAZEPAM	CAPS	15MG	1	2	0			2	HIGH RISK MEDICATIONS - BENZODIAZEPINES	0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	OXAZEPAM	Y	62584081301	Enhanced
198059	62584081401	OXAZEPAM	CAPS	30MG	1	2	0			2	HIGH RISK MEDICATIONS - BENZODIAZEPINES	0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	OXAZEPAM	Y	62584081401	Enhanced
562790	00378200305	PAROXETINE HCL ER	TB24	12.5MG	1	2	1	540	90	0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	2	1	ANTIDEPRESSANTS- SSRI	1			OR	PAROXETINE HYDROCHLORIDE	Y	00378200305	Enhanced
562815	00378200593	PAROXETINE HCL ER	TB24	37.5MG	1	2	1	180	90	0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	2	1	ANTIDEPRESSANTS- SSRI	1			OR	PAROXETINE HYDROCHLORIDE	Y	00378200593	Enhanced
312241	60505009702	PAROXETINE HCL	TABS	10MG	1	2	1	540	90	0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	2	1	ANTIDEPRESSANTS- SSRI	1			OR	PAROXETINE HYDROCHLORIDE	Y	60505009702	Enhanced
314199	68382009801	PAROXETINE HCL	TABS	20MG	1	2	1	270	90	0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	2	1	ANTIDEPRESSANTS- SSRI	1			OR	PAROXETINE HYDROCHLORIDE	Y	68382009801	Enhanced
562791	00378200405	PAROXETINE HCL ER	TB24	25MG	1	2	1	270	90	0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	2	1	ANTIDEPRESSANTS- SSRI	1			OR	PAROXETINE HYDROCHLORIDE	Y	00378200405	Enhanced
312243	00093711698	PAROXETINE HCL	TABS	30MG	1	2	1	180	90	0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	2	1	ANTIDEPRESSANTS- SSRI	1			OR	PAROXETINE HYDROCHLORIDE	Y	00093711698	Enhanced
312244	13107015705	PAROXETINE HCL	TABS	40MG	1	2	1	135	90	0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	2	1	ANTIDEPRESSANTS- SSRI	1			OR	PAROXETINE HYDROCHLORIDE	Y	13107015705	Enhanced
213291	60505040205	PAXIL	SUSP	10MG/5ML	2	5	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	2	1	ANTIDEPRESSANTS- SSRI	2			OR	PAROXETINE HYDROCHLORIDE	W	60505040205	Enhanced
856706	00378033005	PERPHENAZINE/AMITRIPTYLINE	TABS	10MG; 2MG	1	2	0			2	HIGH RISK MEDICATIONS - TERTIARY TRICYCLIC ANTIDEPRESSANTS	0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	AMITRIPTYLINE HYDROCHLORIDE; PERPHENAZINE	Y	00378033005	Enhanced
856797	00378044205	PERPHENAZINE/AMITRIPTYLINE	TABS	25MG; 2MG	1	2	0			2	HIGH RISK MEDICATIONS - TERTIARY TRICYCLIC ANTIDEPRESSANTS	0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	AMITRIPTYLINE HYDROCHLORIDE; PERPHENAZINE	Y	00378044205	Enhanced
856720	00378004201	PERPHENAZINE/AMITRIPTYLINE	TABS	10MG; 4MG	1	2	0			2	HIGH RISK MEDICATIONS - TERTIARY TRICYCLIC ANTIDEPRESSANTS	0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	AMITRIPTYLINE HYDROCHLORIDE; PERPHENAZINE	Y	00378004201	Enhanced
856825	00378057405	PERPHENAZINE/AMITRIPTYLINE	TABS	25MG; 4MG	1	2	0			2	HIGH RISK MEDICATIONS - TERTIARY TRICYCLIC ANTIDEPRESSANTS	0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	AMITRIPTYLINE HYDROCHLORIDE; PERPHENAZINE	Y	00378057405	Enhanced
856840	00378007301	PERPHENAZINE/AMITRIPTYLINE	TABS	50MG; 4MG	1	2	0			2	HIGH RISK MEDICATIONS - TERTIARY TRICYCLIC ANTIDEPRESSANTS	0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	AMITRIPTYLINE HYDROCHLORIDE; PERPHENAZINE	Y	00378007301	Enhanced
198075	00781104901	PERPHENAZINE	TABS	16MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	PERPHENAZINE	Y	00781104901	Enhanced
198076	00781104601	PERPHENAZINE	TABS	2MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	PERPHENAZINE	Y	00781104601	Enhanced
198077	00781104713	PERPHENAZINE	TABS	4MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	PERPHENAZINE	Y	00781104713	Enhanced
198078	00781104801	PERPHENAZINE	TABS	8MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	PERPHENAZINE	Y	00781104801	Enhanced
312347	43386036021	PHENELZINE SULFATE	TABS	15MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	PHENELZINE SULFATE	Y	43386036021	Enhanced
790267	00008122230	PRISTIQ	TB24	100MG	2	5	1	360	90	2	ANTIDEPRESSANTS- SNRI	0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	DESVENLAFAXINE SUCCINATE MONOHYDRATE	W	00008122230	Enhanced
790290	00008121130	PRISTIQ	TB24	50MG	2	5	1	720	90	2	ANTIDEPRESSANTS- SNRI	0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	DESVENLAFAXINE SUCCINATE MONOHYDRATE	W	00008121130	Enhanced
905168	00054021125	PROTRIPTYLINE HCL	TABS	10MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	PROTRIPTYLINE HYDROCHLORIDE	Y	00054021125	Enhanced
905172	00054021025	PROTRIPTYLINE HCL	TABS	5MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	PROTRIPTYLINE HYDROCHLORIDE	Y	00054021025	Enhanced
312743	47335090488	QUETIAPINE FUMARATE	TABS	100MG	1	2	1	720	90	0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	QUETIAPINE FUMARATE	Y	47335090488	Enhanced
317174	47335090588	QUETIAPINE FUMARATE	TABS	200MG	1	2	1	360	90	0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	QUETIAPINE FUMARATE	Y	47335090588	Enhanced
312744	47335090288	QUETIAPINE FUMARATE	TABS	25MG	1	2	1	2705	90	0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	QUETIAPINE FUMARATE	Y	47335090288	Enhanced
312745	47335090688	QUETIAPINE FUMARATE	TABS	300MG	1	2	1	241	90	0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	QUETIAPINE FUMARATE	Y	47335090688	Enhanced
616483	47335090788	QUETIAPINE FUMARATE	TABS	400MG	1	2	1	180	90	0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	QUETIAPINE FUMARATE	Y	47335090788	Enhanced
616487	47335090388	QUETIAPINE FUMARATE	TABS	50MG	1	2	1	1440	90	0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	QUETIAPINE FUMARATE	Y	47335090388	Enhanced
706825	50458030911	RISPERDAL CONSTA	SUSR	12.5MG	2	5	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						IM	RISPERIDONE	W	50458030911	Enhanced
706831	50458030611	RISPERDAL CONSTA	SUSR	25MG	2	5	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						IM	RISPERIDONE	W	50458030611	Enhanced
706827	50458030711	RISPERDAL CONSTA	SUSR	37.5MG	3	5	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						IM	RISPERIDONE	W	50458030711	Enhanced
706829	50458030811	RISPERDAL CONSTA	SUSR	50MG	3	5	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						IM	RISPERIDONE	W	50458030811	Enhanced
199387	55111057930	RISPERIDONE	SOLN	1MG/ML	1	2	1	1440	90	0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	RISPERIDONE	Y	55111057930	Enhanced
645037	49884021255	RISPERIDONE ODT	TBDP	0.25MG	1	2	1	5760	90	0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	RISPERIDONE	Y	49884021255	Enhanced
312828	00093022106	RISPERIDONE	TABS	0.25MG	1	2	1	5760	90	0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	RISPERIDONE	Y	00093022106	Enhanced
312829	00093022506	RISPERIDONE	TABS	0.5MG	1	2	1	2880	90	0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	RISPERIDONE	Y	00093022506	Enhanced
403825	55111020781	RISPERIDONE ODT	TBDP	0.5MG	1	2	1	2880	90	0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	RISPERIDONE	Y	55111020781	Enhanced
312830	00093724006	RISPERIDONE	TABS	1MG	1	2	1	1440	90	0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	RISPERIDONE	Y	00093724006	Enhanced
401953	49884031591	RISPERIDONE ODT	TBDP	1MG	1	2	1	1440	90	0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	RISPERIDONE	Y	49884031591	Enhanced
312831	00093724106	RISPERIDONE	TABS	2MG	1	2	1	720	90	0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	RISPERIDONE	Y	00093724106	Enhanced
401954	55111020981	RISPERIDONE ODT	TBDP	2MG	1	2	1	720	90	0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	RISPERIDONE	Y	55111020981	Enhanced
312832	00093724206	RISPERIDONE	TABS	3MG	1	2	1	482	90	0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	RISPERIDONE	Y	00093724206	Enhanced
616698	49884040291	RISPERIDONE ODT	TBDP	3MG	1	2	1	482	90	0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	RISPERIDONE	Y	49884040291	Enhanced
314211	00093724306	RISPERIDONE	TABS	4MG	1	2	1	360	90	0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	RISPERIDONE	Y	00093724306	Enhanced
616705	49884040391	RISPERIDONE ODT	TBDP	4MG	1	2	1	360	90	0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	RISPERIDONE	Y	49884040391	Enhanced
603162	64764080510	ROZEREM	TABS	8MG	2	5	1	90	90	0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	1	2	SEDATIVE HYPNOTICS	2			OR	RAMELTEON	W	64764080510	Enhanced
603162	64764080510	ROZEREM	TABS	8MG	2	5	1	90	90	0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	1	2	HIGH RISK MEDICATIONS - SEDATIVE HYPNOTICS	1			OR	RAMELTEON	W	64764080510	Enhanced
659979	00052011906	SAPHRIS	SUBL	10MG	2	5	1	180	90	0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						SL	ASENAPINE MALEATE	W	00052011906	Enhanced
659983	00052011806	SAPHRIS	SUBL	5MG	2	5	1	360	90	0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						SL	ASENAPINE MALEATE	W	00052011806	Enhanced
895671	00310028139	SEROQUEL XR	TB24	150MG	2	5	1	482	90	0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	QUETIAPINE FUMARATE	W	00310028139	Enhanced
721793	00310028239	SEROQUEL XR	TB24	200MG	2	5	1	360	90	0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	QUETIAPINE FUMARATE	W	00310028239	Enhanced
721795	00310028360	SEROQUEL XR	TB24	300MG	2	5	1	241	90	0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	QUETIAPINE FUMARATE	W	00310028360	Enhanced
721797	00310028439	SEROQUEL XR	TB24	400MG	2	5	1	180	90	0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	QUETIAPINE FUMARATE	W	00310028439	Enhanced
853202	00310028039	SEROQUEL XR	TB24	50MG	2	5	1	1440	90	0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	QUETIAPINE FUMARATE	W	00310028039	Enhanced
861064	16714060101	SERTRALINE HCL	CONC	20MG/ML	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	2	1	ANTIDEPRESSANTS- SSRI	1			OR	SERTRALINE HYDROCHLORIDE	Y	16714060101	Enhanced
312938	31722021430	SERTRALINE HCL	TABS	100MG	1	2	1	180	90	0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	2	1	ANTIDEPRESSANTS- SSRI	1			OR	SERTRALINE HYDROCHLORIDE	Y	31722021430	Enhanced
312940	31722021230	SERTRALINE HCL	TABS	25MG	1	2	1	720	90	0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	2	1	ANTIDEPRESSANTS- SSRI	1			OR	SERTRALINE HYDROCHLORIDE	Y	31722021230	Enhanced
312941	31722021330	SERTRALINE HCL	TABS	50MG	1	2	1	360	90	0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	2	1	ANTIDEPRESSANTS- SSRI	1			OR	SERTRALINE HYDROCHLORIDE	Y	31722021330	Enhanced
617945	00002325130	STRATTERA	CAPS	100MG	2	5	0			1	ADHD NON-STIMULANT MEDICATIONS	0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	ATOMOXETINE HYDROCHLORIDE	W	00002325130	Enhanced
352317	00002322730	STRATTERA	CAPS	10MG	2	5	0			1	ADHD NON-STIMULANT MEDICATIONS	0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	ATOMOXETINE HYDROCHLORIDE	W	00002322730	Enhanced
352318	00002323830	STRATTERA	CAPS	18MG	2	5	0			1	ADHD NON-STIMULANT MEDICATIONS	0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTH

198241	51079041820	TEMAZEPAM	CAPS	15MG	1	2	0			2	HIGH RISK MEDICATIONS - BENZODIAZEPINES	0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	TEMAZEPAM	Y	51079041820	Enhanced
485489	00378312093	TEMAZEPAM	CAPS	22.5MG	1	2	0			2	HIGH RISK MEDICATIONS - BENZODIAZEPINES	0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	TEMAZEPAM	Y	00378312093	Enhanced
198242	67877014705	TEMAZEPAM	CAPS	30MG	1	2	0			2	HIGH RISK MEDICATIONS - BENZODIAZEPINES	0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	TEMAZEPAM	Y	67877014705	Enhanced
198243	00378311001	TEMAZEPAM	CAPS	7.5MG	1	2	0			2	HIGH RISK MEDICATIONS - BENZODIAZEPINES	0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	TEMAZEPAM	Y	00378311001	Enhanced
198270	00378061801	THIORIDAZINE HCL	TABS	100MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	THIORIDAZINE HYDROCHLORIDE	Y	00378061801	Enhanced
313354	53489014810	THIORIDAZINE HCL	TABS	10MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	THIORIDAZINE HYDROCHLORIDE	Y	53489014810	Enhanced
198274	53489014910	THIORIDAZINE HCL	TABS	25MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	THIORIDAZINE HYDROCHLORIDE	Y	53489014910	Enhanced
198275	51079056720	THIORIDAZINE HCL	TABS	50MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	THIORIDAZINE HYDROCHLORIDE	Y	51079056720	Enhanced
313361	00378501001	THIOTHIXENE	CAPS	10MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	THIOTHIXENE	Y	00378501001	Enhanced
313362	00781222601	THIOTHIXENE	CAPS	1MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	THIOTHIXENE	Y	00781222601	Enhanced
313364	00378200201	THIOTHIXENE	CAPS	2MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	THIOTHIXENE	Y	00378200201	Enhanced
313366	00378300501	THIOTHIXENE	CAPS	5MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	THIOTHIXENE	Y	00378300501	Enhanced
313447	49884003201	TRANYLCYPROMINE SULFATE	TABS	10MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	TRANYLCYPROMINE SULFATE	Y	49884003201	Enhanced
856373	50111043402	TRAZODONE HCL	TABS	100MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	1	1	HIGH RISK MEDICATIONS - SEDATIVE HYPNOTICS	1			OR	TRAZODONE HYDROCHLORIDE	Y	50111043402	Enhanced
856364	50111044101	TRAZODONE HCL	TABS	150MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	1	1	HIGH RISK MEDICATIONS - SEDATIVE HYPNOTICS	1			OR	TRAZODONE HYDROCHLORIDE	Y	50111044101	Enhanced
856369	00555073302	TRAZODONE HCL	TABS	300MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	1	1	HIGH RISK MEDICATIONS - SEDATIVE HYPNOTICS	1			OR	TRAZODONE HYDROCHLORIDE	Y	00555073302	Enhanced
856377	50111043302	TRAZODONE HCL	TABS	50MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	1	1	HIGH RISK MEDICATIONS - SEDATIVE HYPNOTICS	1			OR	TRAZODONE HYDROCHLORIDE	Y	50111043302	Enhanced
198323	00378241001	TRIFLUOPERAZINE HCL	TABS	10MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	TRIFLUOPERAZINE HYDROCHLORIDE	Y	00378241001	Enhanced
198322	00781103001	TRIFLUOPERAZINE HCL	TABS	1MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	TRIFLUOPERAZINE HYDROCHLORIDE	Y	00781103001	Enhanced
198324	00378240201	TRIFLUOPERAZINE HCL	TABS	2MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	TRIFLUOPERAZINE HYDROCHLORIDE	Y	00378240201	Enhanced
198325	00378240501	TRIFLUOPERAZINE HCL	TABS	5MG	1	2	0			0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	TRIFLUOPERAZINE HYDROCHLORIDE	Y	00378240501	Enhanced
313496	45963029530	TRIMIPRAMINE MALEATE	CAPS	100MG	1	2	0			2	HIGH RISK MEDICATIONS - TERTIARY TRICYCLIC ANTIDEPRESSANTS	0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	TRIMIPRAMINE MALEATE	Y	45963029530	Enhanced
313498	45963029330	TRIMIPRAMINE MALEATE	CAPS	25MG	1	2	0			2	HIGH RISK MEDICATIONS - TERTIARY TRICYCLIC ANTIDEPRESSANTS	0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	TRIMIPRAMINE MALEATE	Y	45963029330	Enhanced
313499	45963029430	TRIMIPRAMINE MALEATE	CAPS	50MG	1	2	0			2	HIGH RISK MEDICATIONS - TERTIARY TRICYCLIC ANTIDEPRESSANTS	0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	TRIMIPRAMINE MALEATE	Y	45963029430	Enhanced
313581	00093738698	VENLAFAXINE HCL ER	CP24	150MG	1	2	1	180	90	0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	VENLAFAXINE HCL	Y	00093738698	Enhanced
313583	00093738456	VENLAFAXINE HCL ER	CP24	37.5MG	1	2	1	540	90	0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	VENLAFAXINE HCL	Y	00093738456	Enhanced
313585	00093738598	VENLAFAXINE HCL ER	CP24	75MG	1	2	1	270	90	0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	VENLAFAXINE HCL	Y	00093738598	Enhanced
313580	00093738301	VENLAFAXINE HCL	TABS	100MG	1	2	1	270	90	0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	VENLAFAXINE HCL	Y	00093738301	Enhanced
313582	00093019901	VENLAFAXINE HCL	TABS	25MG	1	2	1	810	90	0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	VENLAFAXINE HCL	Y	00093019901	Enhanced
313584	00093738001	VENLAFAXINE HCL	TABS	37.5MG	1	2	1	540	90	0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	VENLAFAXINE HCL	Y	00093738001	Enhanced
314277	00093738101	VENLAFAXINE HCL	TABS	50MG	1	2	1	450	90	0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	VENLAFAXINE HCL	Y	00093738101	Enhanced
313586	00093738201	VENLAFAXINE HCL	TABS	75MG	1	2	1	270	90	0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	VENLAFAXINE HCL	Y	00093738201	Enhanced
1086790	00456110031	VIIBRYD	KIT	0	2	5	1	90	90	0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	2	1	ANTIDEPRESSANTS- SSRI	2			OR	VILAZODONE HYDROCHLORIDE	W	00456110031	Enhanced
1086776	00456111030	VIIBRYD	TABS	10MG	2	5	1	360	90	0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	2	1	ANTIDEPRESSANTS- SSRI	2			OR	VILAZODONE HYDROCHLORIDE	W	00456111030	Enhanced
1086780	00456112030	VIIBRYD	TABS	20MG	2	5	1	180	90	0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	2	1	ANTIDEPRESSANTS- SSRI	2			OR	VILAZODONE HYDROCHLORIDE	W	00456112030	Enhanced
1086786	00456114030	VIIBRYD	TABS	40MG	2	5	1	90	90	0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	2	1	ANTIDEPRESSANTS- SSRI	2			OR	VILAZODONE HYDROCHLORIDE	W	00456114030	Enhanced
352257	68727010001	XYREM	SOLN	500MG/ML	3	5	0			0		1	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	SODIUM OXYBATE	W	68727010001	Enhanced
313761	65862021501	ZALEPLON	CAPS	10MG	1	2	1	180	90	0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	1	1	SEDATIVE HYPNOTICS	1			OR	ZALEPLON	Y	65862021501	Enhanced
313762	65862021401	ZALEPLON	CAPS	5MG	1	2	1	90	90	0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	1	2	HIGH RISK MEDICATIONS - SEDATIVE HYPNOTICS	2			OR	ZALEPLON	Y	65862021401	Enhanced
313762	65862021401	ZALEPLON	CAPS	5MG	1	2	1	90	90	0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	1	2	SEDATIVE HYPNOTICS	1			OR	ZALEPLON	Y	65862021401	Enhanced
314266	68180033107	ZIPRASIDONE HCL	CAPS	20MG	1	2	1	720	90	0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	ZIPRASIDONE HYDROCHLORIDE	Y	68180033107	Enhanced
313776	68180033207	ZIPRASIDONE HCL	CAPS	40MG	1	2	1	360	90	0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	ZIPRASIDONE HYDROCHLORIDE	Y	68180033207	Enhanced
313777	55111025860	ZIPRASIDONE HCL	CAPS	60MG	1	2	1	241	90	0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	ZIPRASIDONE HYDROCHLORIDE	Y	55111025860	Enhanced
313778	00904627208	ZIPRASIDONE HCL	CAPS	80MG	1	2	1	180	90	0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	0						OR	ZIPRASIDONE HYDROCHLORIDE	Y	00904627208	Enhanced
854873	00603649932	ZOLPIDEM TARTRATE	TABS	10MG	1	2	1	90	90	0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	1	2	SEDATIVE HYPNOTICS	1			OR	ZOLPIDEM TARTRATE	Y	00603649932	Enhanced
854873	00603649932	ZOLPIDEM TARTRATE	TABS	10MG	1	2	1	90	90	0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	1	2	HIGH RISK MEDICATIONS - SEDATIVE HYPNOTICS	2			OR	ZOLPIDEM TARTRATE	Y	00603649932	Enhanced
854876	00093007301	ZOLPIDEM TARTRATE	TABS	5MG	1	2	1	90	90	0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	1	2	HIGH RISK MEDICATIONS - SEDATIVE HYPNOTICS	2			OR	ZOLPIDEM TARTRATE	Y	00093007301	Enhanced
854876	00093007301	ZOLPIDEM TARTRATE	TABS	5MG	1	2	1	90	90	0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	1	2	SEDATIVE HYPNOTICS	1			OR	ZOLPIDEM TARTRATE	Y	00093007301	Enhanced
854880	10370011650	ZOLPIDEM TARTRATE ER	TBCR	12.5MG	1	2	1	90	90	0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	1	2	SEDATIVE HYPNOTICS	1			OR	ZOLPIDEM TARTRATE	Y	10370011650	Enhanced
854880	10370011650	ZOLPIDEM TARTRATE ER	TBCR	12.5MG	1	2	1	90	90	0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	1	2	HIGH RISK MEDICATIONS - SEDATIVE HYPNOTICS	2			OR	ZOLPIDEM TARTRATE	Y	10370011650	Enhanced
854894	00228348111	ZOLPIDEM TARTRATE ER	TBCR	6.25MG	1	2	1	90	90	0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	1	2	HIGH RISK MEDICATIONS - SEDATIVE HYPNOTICS	2			OR	ZOLPIDEM TARTRATE	Y	00228348111	Enhanced
854894	00228348111	ZOLPIDEM TARTRATE ER	TBCR	6.25MG	1	2	1	90	90	0		0	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH	PSYCHOTHERAPEUTIC DRUGS	1	2	SEDATIVE HYPNOTICS	1			OR	ZOLPIDEM TARTRATE	Y	00228348111	Enhanced
533532	00409434835	AMIODARONE HCL	SOLN	50MG/ML	1	2	0			3		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIARRHYTHMIC AGENTS	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIARRHYTHMIC AGENTS	0						IV	AMIODARONE HCL	Y	00409434835	Enhanced
533528	00093913306	AMIODARONE HCL	TABS	200MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIARRHYTHMIC AGENTS	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIARRHYTHMIC AGENTS	0						OR	AMIODARONE HCL	Y	00093913306	Enhanced
834348	51672405706	AMIODARONE HCL	TABS	400MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIARRHYTHMIC AGENTS	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIARRHYTHMIC AGENTS	0						OR	AMIODARONE HCL	Y	51672405706	Enhanced
886666	00054001121	FLECAINIDE ACETATE	TABS	100MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIARRHYTHMIC AGENTS	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIARRHYTHMIC AGENTS	0						OR	FLECAINIDE ACETATE	Y	00054001121	Enhanced
886671	00054001221	FLECAINIDE ACETATE	TABS	150MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIARRHYTHMIC AGENTS	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIARRHYTHMIC AGENTS	0						OR	FLECAINIDE ACETATE	Y	00054001221	Enhanced
886662	63304079401	FLECAINIDE ACETATE	TABS	50MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIARRHYTHMIC AGENTS	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIARRHYTHMIC AGENTS	0						OR	FLECAINIDE ACETATE	Y	63304079401	Enhanced
1362706	00093873901	MEXILETINE HCL	CAPS	150MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIARRHYTHMIC AGENTS	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIARRHYTHMIC AGENTS	0						OR	MEXILETINE HYDROCHLORIDE	Y	00093873901	Enhanced
1362712	00093874001	MEXILETINE HCL	CAPS	200MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIARRHYTHMIC AGENTS	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIARRHYTHMIC AGENTS	0						OR	MEXILETINE HYDROCHLORIDE	Y	00093874001	Enhanced
1362720	00093874101	MEXILETINE HCL	CAPS	250MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIARRHYTHMIC AGENTS	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIARRHYTHMIC AGENTS	0						OR	MEXILETINE HYDROCHLORIDE	Y	00093874101	Enhanced
835958	00245014430	PACERONE	TABS	100MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIARRHYTHMIC AGENTS	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIARRHYTHMIC AGENTS	0						OR	AMIODARONE HCL	Y	00245014430	Enhanced
834346	00245014790	PACERONE	TABS	200MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIARRHYTHMIC AGENTS	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIARRHYTHMIC AGENTS	0						OR	AMIODARONE HCL	Y	00245014790	Enhanced
834350	00245014530	PACERONE	TABS	400MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIARRHYTHMIC AGENTS	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIARRHYTHMIC AGENTS	0						OR	AMIODARONE HCL	Y	00245014530	Enhanced
857886	00409190201	PROCAINAMIDE HCL	SOLN	100MG/ML	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIARRHYTHMIC AGENTS	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIARRHYTHMIC AGENTS	0						IJ	PROCAINAMIDE HYDROCHLORIDE	Y	00409190201	Enhanced
857962	00409190301	PROCAINAMIDE HCL	SOLN	500MG/ML	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIARRHYTHMIC AGENTS	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIARRHYTHMIC AGENTS	0						IJ	PROCAINAMIDE HYDROCHLORIDE	Y	00409190301	Enhanced
861156	49884009902	PROPAFENONE HCL ER	CP12	225MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIARRHYTHMIC AGENTS	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIARRHYTHMIC AGENTS	0						OR	PROPAFENONE HCL	Y	49884009902	Enhanced
861164	49884021002	PROPAFENONE HCL ER	CP12	325MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIARRHYTHMIC AGENTS	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIARRHYTHMIC AGENTS	0						OR	PROPAFENONE HCL	Y	49884021002	Enhanced
861171	49884021102	PROPAFENONE HCL ER	CP12	425MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIARRHYTHMIC AGENTS	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIARRHYTHMIC AGENTS	0						OR	PROPAFENONE HCL	Y	49884021102	Enhanced
861424	00591058201	PROPAFENONE HCL	TABS	150MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIARRHYTHMIC AGENTS	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIARRHYTHMIC AGENTS	0						OR	PROPAFENONE HCL	Y	00591058201	Enhanced
861427	00591058301	PROPAFENONE HCL	TABS	225MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIARRHYTHMIC AGENTS	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIARRHYTHMIC AGENTS	0						OR	PROPAFENONE HCL	Y	00591058301	Enhanced
861430	53489055301	PROPAFENONE HCL	TABS	300MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIARRHYTHMIC AGENTS	CARDIOVASCULA

904567	00378512401	SOTALOL HCL (AF)	TABS	120MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIARRHYTHMIC AGENTS	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIARRHYTHMIC AGENTS	0						OR	SOTALOL HYDROCHLORIDE	Y	00378512401	Enhanced
904579	00185017701	SOTALOL HCL	TABS	160MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIARRHYTHMIC AGENTS	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIARRHYTHMIC AGENTS	0						OR	SOTALOL HYDROCHLORIDE	Y	00185017701	Enhanced
904589	00093106301	SOTALOL HCL	TABS	240MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIARRHYTHMIC AGENTS	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIARRHYTHMIC AGENTS	0						OR	SOTALOL HYDROCHLORIDE	Y	00093106301	Enhanced
904601	00603576921	SOTALOL HCL	TABS	80MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIARRHYTHMIC AGENTS	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIARRHYTHMIC AGENTS	0						OR	SOTALOL HYDROCHLORIDE	Y	00603576921	Enhanced
284404	00069580060	TIKOSYN	CAPS	125MCG	2	5	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIARRHYTHMIC AGENTS	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIARRHYTHMIC AGENTS	0						OR	DOFETILIDE	W	00069580060	Enhanced
284405	00069581060	TIKOSYN	CAPS	250MCG	2	5	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIARRHYTHMIC AGENTS	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIARRHYTHMIC AGENTS	0						OR	DOFETILIDE	W	00069581060	Enhanced
285016	00069582060	TIKOSYN	CAPS	500MCG	2	5	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIARRHYTHMIC AGENTS	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIARRHYTHMIC AGENTS	0						OR	DOFETILIDE	W	00069582060	Enhanced
998689	00378120001	ACEBUTOLOL HCL	CAPS	200MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	0						OR	ACEBUTOLOL HYDROCHLORIDE	Y	00378120001	Enhanced
998685	00378140001	ACEBUTOLOL HCL	CAPS	400MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	0						OR	ACEBUTOLOL HYDROCHLORIDE	Y	00378140001	Enhanced
672920	00591319301	AFEDITAB CR	TB24	30MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	0						OR	NIFEDIPINE	Y	00591319301	Enhanced
672921	00591319401	AFEDITAB CR	TB24	60MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	0						OR	NIFEDIPINE	Y	00591319401	Enhanced
977883	00555048305	AMILORIDE/HYDROCHLOROTHIAZIDE	TABS	5MG; 50MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	0						OR	AMILORIDE HYDROCHLORIDE (ANHYDROUS);	Y	00555048305	Enhanced
977880	49884011701	AMILORIDE HCL	TABS	5MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	0						OR	AMILORIDE HYDROCHLORIDE (ANHYDROUS)	Y	49884011701	Enhanced
898342	00093737301	AMLODIPINE BESYLATE/BENAZEPRIL HYDROCHLORIDE	CAPS	10MG; 20MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	1	1	ARB	1			OR	AMLODIPINE BESYLATE; BENAZEPRIL HCL	Y	00093737301	Enhanced
898346	49884095301	AMLODIPINE BESYLATE/BENAZEPRIL HCL	CAPS	10MG; 40MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	1	1	ARB	1			OR	AMLODIPINE BESYLATE; BENAZEPRIL HCL	Y	49884095301	Enhanced
898350	00093737001	AMLODIPINE BESYLATE/BENAZEPRIL HYDROCHLORIDE	CAPS	2.5MG; 10MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	1	1	ARB	1			OR	AMLODIPINE BESYLATE; BENAZEPRIL HCL	Y	00093737001	Enhanced
898353	00093737101	AMLODIPINE BESYLATE/BENAZEPRIL HYDROCHLORIDE	CAPS	5MG; 10MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	1	1	ARB	1			OR	AMLODIPINE BESYLATE; BENAZEPRIL HCL	Y	00093737101	Enhanced
898356	00093737201	AMLODIPINE BESYLATE/BENAZEPRIL HYDROCHLORIDE	CAPS	5MG; 20MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	1	1	ARB	1			OR	AMLODIPINE BESYLATE; BENAZEPRIL HCL	Y	00093737201	Enhanced
898359	49884095201	AMLODIPINE BESYLATE/BENAZEPRIL HCL	CAPS	5MG; 40MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	1	1	ARB	1			OR	AMLODIPINE BESYLATE; BENAZEPRIL HCL	Y	49884095201	Enhanced
308135	65862010390	AMLODIPINE BESYLATE	TABS	10MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	0						OR	AMLODIPINE BESYLATE	Y	65862010390	Enhanced
308136	65862010190	AMLODIPINE BESYLATE	TABS	2.5MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	0						OR	AMLODIPINE BESYLATE	Y	65862010190	Enhanced
197361	65862010290	AMLODIPINE BESYLATE	TABS	5MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	0						OR	AMLODIPINE BESYLATE	Y	65862010290	Enhanced
197382	53489053201	ATENOLOL/CHLORTHALIDONE	TABS	100MG; 25MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	0						OR	ATENOLOL; CHLORTHALIDONE	Y	53489053201	Enhanced
197383	00591578201	ATENOLOL/CHLORTHALIDONE	TABS	50MG; 25MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	0						OR	ATENOLOL; CHLORTHALIDONE	Y	00591578201	Enhanced
197379	53489053001	ATENOLOL	TABS	100MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	0						OR	ATENOLOL	Y	53489053001	Enhanced
197380	00378021801	ATENOLOL	TABS	25MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	0						OR	ATENOLOL	Y	00378021801	Enhanced
197381	00781150601	ATENOLOL	TABS	50MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	0						OR	ATENOLOL	Y	00781150601	Enhanced
898362	00378473501	BENAZEPRIL HCL/HYDROCHLOROTHIAZIDE	TABS	10MG; 12.5MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	1	1	ARB	1			OR	BENAZEPRIL HCL; HYDROCHLOROTHIAZIDE	Y	00378473501	Enhanced
898367	00378474501	BENAZEPRIL HCL/HYDROCHLOROTHIAZIDE	TABS	20MG; 12.5MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	1	1	ARB	1			OR	BENAZEPRIL HCL; HYDROCHLOROTHIAZIDE	Y	00378474501	Enhanced
898372	00378477501	BENAZEPRIL HCL/HYDROCHLOROTHIAZIDE	TABS	20MG; 25MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	1	1	ARB	1			OR	BENAZEPRIL HCL; HYDROCHLOROTHIAZIDE	Y	00378477501	Enhanced
898378	00378472501	BENAZEPRIL HCL/HYDROCHLOROTHIAZIDE	TABS	5MG; 6.25MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	1	1	ARB	1			OR	BENAZEPRIL HCL; HYDROCHLOROTHIAZIDE	Y	00378472501	Enhanced
898687	00378044301	BENAZEPRIL HCL	TABS	10MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	1	1	ARB	1			OR	BENAZEPRIL HCL	Y	00378044301	Enhanced
898690	00378044401	BENAZEPRIL HCL	TABS	20MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	1	1	ARB	1			OR	BENAZEPRIL HCL	Y	00378044401	Enhanced
898719	00378044701	BENAZEPRIL HCL	TABS	40MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	1	1	ARB	1			OR	BENAZEPRIL HCL	Y	00378044701	Enhanced
898723	00378044101	BENAZEPRIL HCL	TABS	5MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	1	1	ARB	1			OR	BENAZEPRIL HCL	Y	00378044101	Enhanced
1297753	42806003801	BETAXOLOL HCL	TABS	10MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	0						OR	BETAXOLOL HYDROCHLORIDE	Y	42806003801	Enhanced
1297757	42806003901	BETAXOLOL HCL	TABS	20MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	0						OR	BETAXOLOL HYDROCHLORIDE	Y	42806003901	Enhanced
854908	00378055505	BISOPROLOL FUMARATE/HYDROCHLOROTHIAZIDE	TABS	10MG; 6.25MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	0						OR	BISOPROLOL FUMARATE; HYDROCHLOROTHIAZIDE	Y	00378055505	Enhanced
854916	00378050101	BISOPROLOL FUMARATE/HYDROCHLOROTHIAZIDE	TABS	2.5MG; 6.25MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	0						OR	BISOPROLOL FUMARATE; HYDROCHLOROTHIAZIDE	Y	00378050101	Enhanced
854919	00378050301	BISOPROLOL FUMARATE/HYDROCHLOROTHIAZIDE	TABS	5MG; 6.25MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	0						OR	BISOPROLOL FUMARATE; HYDROCHLOROTHIAZIDE	Y	00378050301	Enhanced
854901	65862008701	BISOPROLOL FUMARATE	TABS	10MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	0						OR	BISOPROLOL FUMARATE	Y	65862008701	Enhanced
854905	65862008601	BISOPROLOL FUMARATE	TABS	5MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	0						OR	BISOPROLOL FUMARATE	Y	65862008601	Enhanced
282486	00409141204	BUMETANIDE	SOLN	0.25MG/ML	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	0						IJ	BUMETANIDE	Y	00409141204	Enhanced
197417	00185012805	BUMETANIDE	TABS	0.5MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	0						OR	BUMETANIDE	Y	00185012805	Enhanced
197418	00185012905	BUMETANIDE	TABS	1MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	0						OR	BUMETANIDE	Y	00185012905	Enhanced
197419	00185013005	BUMETANIDE	TABS	2MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	0						OR	BUMETANIDE	Y	00185013005	Enhanced
578325	00378300177	CANDESARTAN CILEXETIL/HYDROCHLOROTHIAZIDE	TABS	16MG; 12.5MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	1	1	ARB	1			OR	CANDESARTAN CILEXETIL; HYDROCHLOROTHIAZIDE	Y	00378300177	Enhanced
578330	00378300277	CANDESARTAN CILEXETIL/HYDROCHLOROTHIAZIDE	TABS	32MG; 12.5MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	1	1	ARB	1			OR	CANDESARTAN CILEXETIL; HYDROCHLOROTHIAZIDE	Y	00378300277	Enhanced
802749	00378300377	CANDESARTAN CILEXETIL/HYDROCHLOROTHIAZIDE	TABS	32MG; 25MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	1	1	ARB	1			OR	CANDESARTAN CILEXETIL; HYDROCHLOROTHIAZIDE	Y	00378300377	Enhanced
197436	00378008101	CAPTOPRIL/HYDROCHLOROTHIAZIDE	TABS	25MG; 15MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	1	1	ARB	1			OR	CAPTOPRIL; HYDROCHLOROTHIAZIDE	Y	00378008101	Enhanced
197437	00378008301	CAPTOPRIL/HYDROCHLOROTHIAZIDE	TABS	25MG; 25MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	1	1	ARB	1			OR	CAPTOPRIL; HYDROCHLOROTHIAZIDE	Y	00378008301	Enhanced
197438	00378008401	CAPTOPRIL/HYDROCHLOROTHIAZIDE	TABS	50MG; 15MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	1	1	ARB	1			OR	CAPTOPRIL; HYDROCHLOROTHIAZIDE	Y	00378008401	Enhanced
197439	00378008601	CAPTOPRIL/HYDROCHLOROTHIAZIDE	TABS	50MG; 25MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	1	1	ARB	1			OR	CAPTOPRIL; HYDROCHLOROTHIAZIDE	Y	00378008601	Enhanced
308962	00378302201	CAPTOPRIL	TABS	100MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	1	1	ARB	1			OR	CAPTOPRIL	Y	00378302201	Enhanced
308963	00378300701	CAPTOPRIL	TABS	12.5MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	1	1	ARB	1			OR	CAPTOPRIL	Y	00378300701	Enhanced
317173	00378301201	CAPTOPRIL	TABS	25MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	1	1	ARB	1			OR	CAPTOPRIL	Y	00378301201	Enhanced
308964	00378301701	CAPTOPRIL	TABS	50MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	1	1	ARB	1			OR	CAPTOPRIL	Y	00378301701	Enhanced
831226	62037059790	CARTIA XT	CP24	120MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	0						OR	DILTIAZEM HYDROCHLORIDE	Y	62037059790	Enhanced
831255	62037059890	CARTIA XT	CP24	180MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	0						OR	DILTIAZEM HYDROCHLORIDE	Y	62037059890	Enhanced
831309	62037059990	CARTIA XT	CP24	240MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	0						OR	DILTIAZEM HYDROCHLORIDE	Y	62037059990	Enhanced
831338	62037060005	CARTIA XT	CP24	300MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	0						OR	DILTIAZEM HYDROCHLORIDE	Y	62037060005	Enhanced
200032	00378363301	CARVEDILOL	TABS	12.5MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	0						OR	CARVEDILOL	Y	57664024518	Enhanced
200033	00378363401	CARVEDILOL	TABS	25MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	0						OR	CARVEDILOL	Y	57664024718	Enhanced
686924	00378363101	CARVEDILOL	TABS	3.125MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	0						OR	CARVEDILOL	Y	57664024218	Enhanced
200031	00378363201	CARVEDILOL	TABS	6.25MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	0						OR	CARVEDILOL	Y	57664024418	Enhanced
484152	63323065820	CHLOROTHIAZIDE SODIUM	SOLR	500MG	3	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	0						IV	CHLOROTHIAZIDE SODIUM	Y	63323065820	Enhanced
197475	00143120901	CHLOROTHIAZIDE	TABS	250MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	0						OR	CHLOROTHIAZIDE	Y	00143120901	Enhanced
197476	00143121001	CHLOROTHIAZIDE	TABS	500MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	0						OR	CHLOROTHIAZIDE	Y	00143121001	Enhanced
197499	00378022201	CHLORTHALIDONE	TABS	25MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	0						OR	CHLORTHALIDONE	Y	00378022201	Enhanced
197500	00378021310	CHLORTHALIDONE	TABS	50MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	0						OR	CHLORTHALIDONE	Y	00378021310	Enhanced
998671	00378087199	CLONIDINE HCL	PTWK	0.1MG/24HR	1	2	1	13	90	0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	0						TD	CLONIDINE HYDROCHLORIDE	Y	00378087199	Enhanced
998675	00378087299	CLONIDINE HCL	PTWK	0.2MG/24HR	1	2	1	13	90	0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	0						TD	CLONIDINE HYDROCHLORIDE	Y	00378087299	Enhanced
998679	00378087399	CLONIDINE HCL	PTWK	0.3MG/24HR	1	2	1	13	90	0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	0						TD	CLONIDINE HYDROCHLORIDE	Y	00378087399	Enhanced
884173	00603295728	CLONIDINE HCL	TABS	0.1MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	0						OR	CLONIDINE HYDROCHLORIDE	Y	00603295728	Enhanced
884185	00228212850	CLONIDINE HCL	TABS	0.2MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	0						OR	CLONIDINE HYDROCHLORIDE	Y	00228212850	Enhanced
884189	53489021701	CLONIDINE

830869	00378609001	DILTIAZEM HCL ER	CP12	90MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	0						OR	DILTIAZEM HYDROCHLORIDE	Y	00378609001	Enhanced
833199	00409435003	DILTIAZEM HCL	SOLR	100MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	0						IV	DILTIAZEM HYDROCHLORIDE	Y	00409435003	Enhanced
833222	00641601410	DILTIAZEM HCL	SOLN	50MG/10ML	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	0						IV	DILTIAZEM HYDROCHLORIDE	Y	00641601410	Enhanced
831054	00093032101	DILTIAZEM HCL	TABS	120MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	0						OR	DILTIAZEM HYDROCHLORIDE	Y	00093032101	Enhanced
833217	00093031805	DILTIAZEM HCL	TABS	30MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	0						OR	DILTIAZEM HYDROCHLORIDE	Y	00093031805	Enhanced
831103	00093031905	DILTIAZEM HCL	TABS	60MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	0						OR	DILTIAZEM HYDROCHLORIDE	Y	00093031905	Enhanced
831102	00378013505	DILTIAZEM HCL	TABS	90MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	0						OR	DILTIAZEM HYDROCHLORIDE	Y	00378013505	Enhanced
197625	00378402101	DOXAZOSIN MESYLATE	TABS	1MG	1	2	1	90	90	0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	0						OR	DOXAZOSIN MESYLATE	Y	00378402101	Enhanced
197626	00378402201	DOXAZOSIN MESYLATE	TABS	2MG	1	2	1	90	90	0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	0						OR	DOXAZOSIN MESYLATE	Y	00378402201	Enhanced
197627	00378402401	DOXAZOSIN MESYLATE	TABS	4MG	1	2	1	90	90	0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	0						OR	DOXAZOSIN MESYLATE	Y	00378402401	Enhanced
197628	60505009601	DOXAZOSIN MESYLATE	TABS	8MG	1	2	1	180	90	0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	0						OR	DOXAZOSIN MESYLATE	Y	60505009601	Enhanced
858828	00093105201	ENALAPRIL MALEATE;HYDROCHLOROTHIAZIDE	TABS	10MG; 25MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	1	1	ARB	1			OR	ENALAPRIL MALEATE; HYDROCHLOROTHIAZIDE	Y	00093105201	Enhanced
858824	00093104401	ENALAPRIL MALEATE;HYDROCHLOROTHIAZIDE	TABS	5MG; 12.5MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	1	1	ARB	1			OR	ENALAPRIL MALEATE; HYDROCHLOROTHIAZIDE	Y	00093104401	Enhanced
858817	00093002801	ENALAPRIL MALEATE	TABS	10MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	1	1	ARB	1			OR	ENALAPRIL MALEATE	Y	00093002801	Enhanced
858804	64679092302	ENALAPRIL MALEATE	TABS	2.5MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	1	1	ARB	1			OR	ENALAPRIL MALEATE	Y	64679092302	Enhanced
858810	00378105401	ENALAPRIL MALEATE	TABS	20MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	1	1	ARB	1			OR	ENALAPRIL MALEATE	Y	00378105401	Enhanced
858813	64679092402	ENALAPRIL MALEATE	TABS	5MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	1	1	ARB	1			OR	ENALAPRIL MALEATE	Y	64679092402	Enhanced
351256	00185536809	EPLERENONE	TABS	25MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	0						OR	EPLERENONE	Y	00185536809	Enhanced
351257	00185536909	EPLERENONE	TABS	50MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	0						OR	EPLERENONE	Y	00185536909	Enhanced
310140	00378662993	EPROSARTAN MESYLATE	TABS	600MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	1	1	ARB	1			OR	EPROSARTAN MESYLATE	Y	00378662993	Enhanced
724879	00078048915	EXFORGE	TABS	10MG; 160MG	2	5	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	1	1	ARB	2			OR	AMLODIPINE BESYLATE; VALSARTAN	W	00078048915	Enhanced
724887	00078049115	EXFORGE	TABS	10MG; 320MG	2	5	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	1	1	ARB	2			OR	AMLODIPINE BESYLATE; VALSARTAN	W	00078049115	Enhanced
724891	00078048815	EXFORGE	TABS	5MG; 160MG	2	5	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	1	1	ARB	2			OR	AMLODIPINE BESYLATE; VALSARTAN	W	00078048815	Enhanced
724895	00078049015	EXFORGE	TABS	5MG; 320MG	2	5	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	1	1	ARB	2			OR	AMLODIPINE BESYLATE; VALSARTAN	W	00078049015	Enhanced
848134	00078056115	EXFORGE HCT	TABS	10MG; 12.5MG; 160MG	2	5	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	1	1	ARB	2			OR	AMLODIPINE BESYLATE; HYDROCHLOROTHIAZIDE;	W	00078056115	Enhanced
848155	00078056215	EXFORGE HCT	TABS	10MG; 25MG; 160MG	2	5	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	1	1	ARB	2			OR	AMLODIPINE BESYLATE; HYDROCHLOROTHIAZIDE;	W	00078056215	Enhanced
848139	00078056315	EXFORGE HCT	TABS	10MG; 25MG; 320MG	2	5	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	1	1	ARB	2			OR	AMLODIPINE BESYLATE; HYDROCHLOROTHIAZIDE;	W	00078056315	Enhanced
848144	00078055915	EXFORGE HCT	TABS	5MG; 12.5MG; 160MG	2	5	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	1	1	ARB	2			OR	AMLODIPINE BESYLATE; HYDROCHLOROTHIAZIDE;	W	00078055915	Enhanced
848149	00078056015	EXFORGE HCT	TABS	5MG; 25MG; 160MG	2	5	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	1	1	ARB	2			OR	AMLODIPINE BESYLATE; HYDROCHLOROTHIAZIDE;	W	00078056015	Enhanced
402695	54738090603	FELODIPINE ER	TB24	10MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	0						OR	FELODIPINE	Y	54738090603	Enhanced
402698	54738090490	FELODIPINE ER	TB24	2.5MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	0						OR	FELODIPINE	Y	54738090490	Enhanced
402696	54738090503	FELODIPINE ER	TB24	5MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	0						OR	FELODIPINE	Y	54738090503	Enhanced
857166	59762525001	FOSINOPRIL SODIUM;HYDROCHLOROTHIAZIDE	TABS	10MG; 12.5MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	1	1	ARB	1			OR	FOSINOPRIL SODIUM; HYDROCHLOROTHIAZIDE	Y	59762525001	Enhanced
857174	59762525101	FOSINOPRIL SODIUM;HYDROCHLOROTHIAZIDE	TABS	20MG; 12.5MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	1	1	ARB	1			OR	FOSINOPRIL SODIUM; HYDROCHLOROTHIAZIDE	Y	59762525101	Enhanced
857169	00093722298	FOSINOPRIL SODIUM	TABS	10MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	1	1	ARB	1			OR	FOSINOPRIL SODIUM	Y	00093722298	Enhanced
857183	60505251102	FOSINOPRIL SODIUM	TABS	20MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	1	1	ARB	1			OR	FOSINOPRIL SODIUM	Y	60505251102	Enhanced
857187	60505251202	FOSINOPRIL SODIUM	TABS	40MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	1	1	ARB	1			OR	FOSINOPRIL SODIUM	Y	60505251202	Enhanced
282452	00517570425	FUROSEMIDE	SOLN	10MG/ML	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	0						IJ	FUROSEMIDE	Y	00517570425	Enhanced
197730	00054329450	FUROSEMIDE	SOLN	10MG/ML	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	0						OR	FUROSEMIDE	Y	00054329450	Enhanced
197731	00054329863	FUROSEMIDE	SOLN	8MG/ML	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	0						OR	FUROSEMIDE	Y	00054329863	Enhanced
310429	50742010401	FUROSEMIDE	TABS	20MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	0						OR	FUROSEMIDE	Y	50742010401	Enhanced
313988	63739054204	FUROSEMIDE	TABS	40MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	0						OR	FUROSEMIDE	Y	63739054204	Enhanced
197732	00603374128	FUROSEMIDE	TABS	80MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	0						OR	FUROSEMIDE	Y	00603374128	Enhanced
197745	00591044401	GUANFACINE HCL	TABS	1MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	0						OR	GUANFACINE HCL	Y	00591044401	Enhanced
197746	00378119001	GUANFACINE HCL	TABS	2MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	0						OR	GUANFACINE HCL	Y	00378119001	Enhanced
966571	00517090125	HYDRALAZINE HCL	SOLN	20MG/ML	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	0						IJ	HYDRALAZINE HYDROCHLORIDE	Y	00517090125	Enhanced
905222	49884012101	HYDRALAZINE HCL	TABS	100MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	0						OR	HYDRALAZINE HYDROCHLORIDE	Y	49884012101	Enhanced
905199	49884002910	HYDRALAZINE HCL	TABS	10MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	0						OR	HYDRALAZINE HYDROCHLORIDE	Y	49884002910	Enhanced
905225	49884002710	HYDRALAZINE HCL	TABS	25MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	0						OR	HYDRALAZINE HYDROCHLORIDE	Y	49884002710	Enhanced
905395	49884002810	HYDRALAZINE HCL	TABS	50MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	0						OR	HYDRALAZINE HYDROCHLORIDE	Y	49884002810	Enhanced
199903	00603385521	HYDROCHLOROTHIAZIDE	CAPS	12.5MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	0						OR	HYDROCHLOROTHIAZIDE	Y	00603385521	Enhanced
429503	00228282011	HYDROCHLOROTHIAZIDE	TABS	12.5MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	0						OR	HYDROCHLOROTHIAZIDE	Y	00228282011	Enhanced
310798	00603385632	HYDROCHLOROTHIAZIDE	TABS	25MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	0						OR	HYDROCHLOROTHIAZIDE	Y	00603385632	Enhanced
197770	60505264107	HYDROCHLOROTHIAZIDE	TABS	50MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	0						OR	HYDROCHLOROTHIAZIDE	Y	60505264107	Enhanced
197815	00378006901	INDAPAMIDE	TABS	1.25MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	0						OR	INDAPAMIDE	Y	00378006901	Enhanced
197816	00378008010	INDAPAMIDE	TABS	2.5MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	0						OR	INDAPAMIDE	Y	00378008010	Enhanced
310792	00603408816	IRBESARTAN;HYDROCHLOROTHIAZIDE	TABS	12.5MG; 150MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	1	1	ARB	1			OR	HYDROCHLOROTHIAZIDE; IRBESARTAN	Y	00093723898	Enhanced
310793	60505360403	IRBESARTAN;HYDROCHLOROTHIAZIDE	TABS	12.5MG; 300MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	1	1	ARB	1			OR	HYDROCHLOROTHIAZIDE; IRBESARTAN	Y	00093723998	Enhanced
200095	00093746505	IRBESARTAN	TABS	150MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	1	1	ARB	1			OR	IRBESARTAN	Y	00093746505	Enhanced
200096	00093746698	IRBESARTAN	TABS	300MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	1	1	ARB	1			OR	IRBESARTAN	Y	00093746698	Enhanced
200094	00093746456	IRBESARTAN	TABS	75MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	1	1	ARB	1			OR	IRBESARTAN	Y	00093746456	Enhanced
197848	16252053901	ISRADIPINE	CAPS	2.5MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	0						OR	ISRADIPINE	Y	16252053901	Enhanced
197849	16252054001	ISRADIPINE	CAPS	5MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	0						OR	ISRADIPINE	Y	16252054001	Enhanced
896771	17478042020	LABETALOL HCL	SOLN	5MG/ML	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	0						IV	LABETALOL HYDROCHLORIDE	Y	17478042020	Enhanced
896758	00172436470	LABETALOL HCL	TABS	100MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	0						OR	LABETALOL HYDROCHLORIDE	Y	00172436470	Enhanced
896762	00591060601	LABETALOL HCL	TABS	200MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	0						OR	LABETALOL HYDROCHLORIDE	Y	00591060601	Enhanced
896766	00591060701	LABETALOL HCL	TABS	300MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	0						OR	LABETALOL HYDROCHLORIDE	Y	00591060701	Enhanced
197885	00378101201	LISINOPRIL/HYDROCHLOROTHIAZIDE	TABS	12.5MG; 10MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	1	1	ARB	1			OR	HYDROCHLOROTHIAZIDE; LISINOPRIL	Y	00378101201	Enhanced
197886	00378201201	LISINOPRIL/HYDROCHLOROTHIAZIDE	TABS	12.5MG; 20MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	1	1	ARB	1			OR	HYDROCHLOROTHIAZIDE; LISINOPRIL	Y	00378201201	Enhanced
197887	65862004501	LISINOPRIL/HYDROCHLOROTHIAZIDE	TABS	25MG; 20MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	1	1	ARB	1			OR	HYDROCHLOROTHIAZIDE; LISINOPRIL	Y	65862004501	Enhanced
314076	00172375960	LISINOPRIL	TABS	10MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	1	1	ARB	1			OR	LISINOPRIL	Y	00172375960	Enhanced
311353	00378207201	LISINOPRIL	TABS	2.5MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	1	1	ARB	1			OR	LISINOPRIL	Y	00378207201	Enhanced
314077	60505018701	LISINOPRIL	TABS	20MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	1	1	ARB	1			OR	LISINOPRIL	Y	60505018701	Enhanced
205326	00591088501	LISINOPRIL	TABS	30MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	1	1	ARB	1			OR	LISINOPRIL	Y	00591088501	Enhanced
197884	00591040905	LISINOPRIL	TABS	40MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	1	1	ARB	1			OR	LISINOPRIL	Y	00591040905	Enhanced
311354	00603421032	LISINOPRIL	TABS	5MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	1	1	ARB	1			OR	LISINOPRIL	Y	00603421032	Enhanced
979480	00093736698	LOSARTAN POTASSIUM	TABS	100MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPER

204452	00517890510	METHYLDOPATE HCL	SOLN	250MG/5ML	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	0						IV	METHYLDOPATE HYDROCHLORIDE	Y	00517890510	Enhanced
197978	00378617401	METOLAZONE	TABS	10MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	0						OR	METOLAZONE	Y	00378617401	Enhanced
197979	00378617201	METOLAZONE	TABS	2.5MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	0						OR	METOLAZONE	Y	00378617201	Enhanced
311671	00378617301	METOLAZONE	TABS	5MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	0						OR	METOLAZONE	Y	00378617301	Enhanced
866479	00378043401	METOPROLOL/HYDROCHLOROTHIAZIDE	TABS	25MG; 100MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	0						OR	HYDROCHLOROTHIAZIDE; METOPROLOL TARTRATE	Y	00378043401	Enhanced
866491	00378044501	METOPROLOL/HYDROCHLOROTHIAZIDE	TABS	50MG; 100MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	0						OR	HYDROCHLOROTHIAZIDE; METOPROLOL TARTRATE	Y	00378044501	Enhanced
866482	00378042401	METOPROLOL/HYDROCHLOROTHIAZIDE	TABS	25MG; 50MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	0						OR	HYDROCHLOROTHIAZIDE; METOPROLOL TARTRATE	Y	00378042401	Enhanced
866511	00093073410	METOPROLOL TARTRATE	TABS	100MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	0						OR	METOPROLOL TARTRATE	Y	00093073410	Enhanced
866924	65862006201	METOPROLOL TARTRATE	TABS	25MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	0						OR	METOPROLOL TARTRATE	Y	65862006201	Enhanced
866514	00378003210	METOPROLOL TARTRATE	TABS	50MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	0						OR	METOPROLOL TARTRATE	Y	00378003210	Enhanced
866508	55390007310	METOPROLOL TARTRATE	SOLN	1MG/ML	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	0						IV	METOPROLOL TARTRATE	Y	55390007310	Enhanced
866412	62037083201	METOPROLOL SUCCINATE ER	TB24	100MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	0						OR	METOPROLOL SUCCINATE	Y	62037083201	Enhanced
866419	55111046905	METOPROLOL SUCCINATE ER	TB24	200MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	0						OR	METOPROLOL SUCCINATE	Y	00378459805	Enhanced
866427	55111046601	METOPROLOL SUCCINATE ER	TB24	25MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	0						OR	METOPROLOL SUCCINATE	Y	00378459610	Enhanced
866436	62037083101	METOPROLOL SUCCINATE ER	TB24	50MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	0						OR	METOPROLOL SUCCINATE	Y	62037083101	Enhanced
197986	00591564301	MINOXIDIL	TABS	10MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	0						OR	MINOXIDIL	Y	00591564301	Enhanced
197987	00591564201	MINOXIDIL	TABS	2.5MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	0						OR	MINOXIDIL	Y	00591564201	Enhanced
1299859	00093521401	MOEXIPRIL/HYDROCHLOROTHIAZIDE	TABS	12.5MG; 15MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	1	0	ARB	1			OR	HYDROCHLOROTHIAZIDE; MOEXIPRIL HYDROCHLORIDE	Y	00093521401	Enhanced
1299890	00093521501	MOEXIPRIL/HYDROCHLOROTHIAZIDE	TABS	25MG; 15MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	1	1	ARB	1			OR	HYDROCHLOROTHIAZIDE; MOEXIPRIL HYDROCHLORIDE	Y	00093521501	Enhanced
1299871	00093521301	MOEXIPRIL/HYDROCHLOROTHIAZIDE	TABS	12.5MG; 7.5MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	1	1	ARB	1			OR	HYDROCHLOROTHIAZIDE; MOEXIPRIL HYDROCHLORIDE	Y	00093521301	Enhanced
1299896	00574011215	MOEXIPRIL HCL	TABS	15MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	1	1	ARB	1			OR	MOEXIPRIL HYDROCHLORIDE	Y	00574011215	Enhanced
1299897	00093001701	MOEXIPRIL HCL	TABS	7.5MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	1	1	ARB	1			OR	MOEXIPRIL HYDROCHLORIDE	Y	00574011001	Enhanced
198006	00378002801	NADOLOL	TABS	20MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	0						OR	NADOLOL	Y	00378002801	Enhanced
198007	00093423601	NADOLOL	TABS	40MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	0						OR	NADOLOL	Y	00093423601	Enhanced
198008	00093423701	NADOLOL	TABS	80MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	0						OR	NADOLOL	Y	00093423701	Enhanced
198000	00115531101	NADOLOL/BENDROFLUMETHIAZIDE	TABS	5MG; 40MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	0						OR	BENDROFLUMETHIAZIDE; NADOLOL	Y	00115531101	Enhanced
198001	00115532201	NADOLOL/BENDROFLUMETHIAZIDE	TABS	5MG; 80MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	0						OR	BENDROFLUMETHIAZIDE; NADOLOL	Y	00115532201	Enhanced
858613	00378102077	NICARDIPINE HCL	CAPS	20MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	0						OR	NICARDIPINE HCL	Y	00378102077	Enhanced
858616	00378143005	NICARDIPINE HCL	CAPS	30MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	0						OR	NICARDIPINE HCL	Y	00378143005	Enhanced
858607	64679063102	NICARDIPINE HCL	SOLN	2.5MG/ML	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	0						IV	NICARDIPINE HCL	Y	64679063102	Enhanced
880437	00093102301	NIFEDIAC CC	TB24	90MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	0						OR	NIFEDIPINE	Y	00093102301	Enhanced
360394	00093081955	NIFEDICAL XL	TB24	30MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	0						OR	NIFEDIPINE	Y	00093081955	Enhanced
351438	00093517355	NIFEDICAL XL	TB24	60MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	0						OR	NIFEDIPINE	Y	00093517355	Enhanced
198034	00378048030	NIFEDIPINE ER	TB24	30MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	0						OR	NIFEDIPINE	Y	00378048030	Enhanced
198035	00378048130	NIFEDIPINE ER	TB24	60MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	0						OR	NIFEDIPINE	Y	00378048130	Enhanced
198036	00378049401	NIFEDIPINE ER	TB24	90MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	0						OR	NIFEDIPINE	Y	00378049401	Enhanced
198037	00555098040	NIMODIPINE	CAPS	30MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	0						OR	NIMODIPINE	Y	00555098040	Enhanced
763519	00378209701	NISOLDIPINE	TB24	17MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	0						OR	NISOLDIPINE	Y	00378209701	Enhanced
311984	00378222201	NISOLDIPINE	TB24	20MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	0						OR	NISOLDIPINE	Y	00378222201	Enhanced
763574	00378209801	NISOLDIPINE ER	TB24	25.5MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	0						OR	NISOLDIPINE	Y	00378209801	Enhanced
311985	00378222301	NISOLDIPINE	TB24	30MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	0						OR	NISOLDIPINE	Y	00378222301	Enhanced
763589	00378209901	NISOLDIPINE	TB24	34MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	0						OR	NISOLDIPINE	Y	00378209901	Enhanced
360344	00378222401	NISOLDIPINE	TB24	40MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	0						OR	NISOLDIPINE	Y	00378222401	Enhanced
790489	00378209601	NISOLDIPINE	TB24	8.5MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	0						OR	NISOLDIPINE	Y	00378209601	Enhanced
854984	00054011025	PERINDOPRIL ERBUMINE	TABS	2MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	1	1	ARB	1			OR	PERINDOPRIL ERBUMINE	Y	00054011025	Enhanced
854988	00054011125	PERINDOPRIL ERBUMINE	TABS	4MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	1	1	ARB	1			OR	PERINDOPRIL ERBUMINE	Y	00054011125	Enhanced
854925	00054011225	PERINDOPRIL ERBUMINE	TABS	8MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	1	1	ARB	1			OR	PERINDOPRIL ERBUMINE	Y	00054011225	Enhanced
198104	00378012701	PINDOLOL	TABS	10MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	0						OR	PINDOLOL	Y	00378012701	Enhanced
198105	00378005201	PINDOLOL	TABS	5MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	0						OR	PINDOLOL	Y	00378005201	Enhanced
312593	00093406710	PRAZOSIN HCL	CAPS	1MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	0						OR	PRAZOSIN HYDROCHLORIDE	Y	00093406710	Enhanced
312594	00093406810	PRAZOSIN HCL	CAPS	2MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	0						OR	PRAZOSIN HYDROCHLORIDE	Y	00093406810	Enhanced
198141	00378320501	PRAZOSIN HCL	CAPS	5MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	0						OR	PRAZOSIN HYDROCHLORIDE	Y	00378320501	Enhanced
856422	00378073101	PROPRANOLOL/HYDROCHLOROTHIAZIDE	TABS	25MG; 40MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	0						OR	HYDROCHLOROTHIAZIDE; PROPRANOLOL	Y	00378073101	Enhanced
856429	00378034701	PROPRANOLOL/HYDROCHLOROTHIAZIDE	TABS	25MG; 80MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	0						OR	HYDROCHLOROTHIAZIDE; PROPRANOLOL	Y	00378034701	Enhanced
856460	00378622001	PROPRANOLOL HCL ER	CP24	120MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	0						OR	PROPRANOLOL HYDROCHLORIDE	Y	00378622001	Enhanced
856481	00378626001	PROPRANOLOL HCL ER	CP24	160MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	0						OR	PROPRANOLOL HYDROCHLORIDE	Y	00378626001	Enhanced
856535	00245008410	PROPRANOLOL HCL ER	CP24	60MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	0						OR	PROPRANOLOL HYDROCHLORIDE	Y	00245008410	Enhanced
856569	00378618001	PROPRANOLOL HCL ER	CP24	80MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	0						OR	PROPRANOLOL HYDROCHLORIDE	Y	00378618001	Enhanced
856443	00143987201	PROPRANOLOL HCL	SOLN	1MG/ML	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	0						IV	PROPRANOLOL HYDROCHLORIDE	Y	00143987201	Enhanced
856724	00054372763	PROPRANOLOL HCL	SOLN	20MG/5ML	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	0						OR	PROPRANOLOL HYDROCHLORIDE	Y	00054372763	Enhanced
856733	00054373063	PROPRANOLOL HCL	SOLN	40MG/5ML	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	0						OR	PROPRANOLOL HYDROCHLORIDE	Y	00054373063	Enhanced
856448	50111046703	PROPRANOLOL HCL	TABS	10MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	0						OR	PROPRANOLOL HYDROCHLORIDE	Y	50111046703	Enhanced
856457	50111046803	PROPRANOLOL HCL	TABS	20MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	0						OR	PROPRANOLOL HYDROCHLORIDE	Y	50111046803	Enhanced
856519	50111046903	PROPRANOLOL HCL	TABS	40MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	0						OR	PROPRANOLOL HYDROCHLORIDE	Y	50111046903	Enhanced
856556	50111047001	PROPRANOLOL HCL	TABS	60MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	0						OR	PROPRANOLOL HYDROCHLORIDE	Y	50111047001	Enhanced
856578	00378018501	PROPRANOLOL HCL	TABS	80MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	0						OR	PROPRANOLOL HYDROCHLORIDE	Y	00378018501	Enhanced
310796	00378054277	QUINAPRIL/HYDROCHLOROTHIAZIDE	TABS	12.5MG; 10MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	1	0	ARB	1			OR	HYDROCHLOROTHIAZIDE; QUINAPRIL HCL	Y	00378054277	Enhanced
310797	00378054377	QUINAPRIL/HYDROCHLOROTHIAZIDE	TABS	12.5MG; 20MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	1	1	ARB	1			OR	HYDROCHLOROTHIAZIDE; QUINAPRIL HCL	Y	00378054377	Enhanced
310809	00378054477	QUINAPRIL/HYDROCHLOROTHIAZIDE	TABS	25MG; 20MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	1	1	ARB	1			OR	HYDROCHLOROTHIAZIDE; QUINAPRIL HCL	Y	00378054477	Enhanced
312748	68180055709	QUINAPRIL HCL	TABS	10MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	1	1	ARB	1			OR	QUINAPRIL HCL	Y	68180055709	Enhanced
312749	31722026990	QUINAPRIL HCL	TABS	20MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	1	1	ARB	1			OR	QUINAPRIL HCL	Y	31722026990	Enhanced
314203	68180055909	QUINAPRIL HCL	TABS	40MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	1	1	ARB	1			OR	QUINAPRIL HCL	Y	68180055909	Enhanced
312750	31722026790	QUINAPRIL HCL	TABS	5MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	1	1	ARB	1			OR	QUINAPRIL HCL	Y	31722026790	Enhanced
845488	16252057030	RAMIPRIL	CAPS	1.25MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	1	1	ARB	1			OR	RAMIPRIL	Y	16252057030	Enhanced
261962	16252057301	RAMIPRIL	CAPS	10MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	1	1	ARB	1			OR	RAMIPRIL	Y	16252057301	Enhanced
198188	16252057101	RAMIPRIL	CAPS	2.5MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	1	1	ARB	1			OR	RAMIPRIL	Y	16252057101	Enhanced
198189	16252057201	RAMIPRIL	CAPS	5MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	1	1	ARB	1			OR	RAMIPRIL	Y	16252057201	Enhanced
352214	66302011001	REMODULIN	SOLN	10MG/ML	3	5	0		1	REMODULIN	1	CARDIOVASCULAR, HYPERTENSION / LIPIDS

260376	00781205401	TERAZOSIN HCL	CAPS	10MG	1	2	1	180	90	0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	0						OR	TERAZOSIN HCL	Y	00781205401	Enhanced
313215	00093433605	TERAZOSIN HCL	CAPS	1MG	1	2	1	90	90	0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	0						OR	TERAZOSIN HCL	Y	00093433605	Enhanced
313217	00781205201	TERAZOSIN HCL	CAPS	2MG	1	2	1	90	90	0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	0						OR	TERAZOSIN HCL	Y	00781205201	Enhanced
313219	00781205301	TERAZOSIN HCL	CAPS	5MG	1	2	1	90	90	0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	0						OR	TERAZOSIN HCL	Y	00781205301	Enhanced
198284	00378022101	TIMOLOL MALEATE	TABS	10MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	0						OR	TIMOLOL MALEATE	Y	00378022101	Enhanced
198285	00378071501	TIMOLOL MALEATE	TABS	20MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	0						OR	TIMOLOL MALEATE	Y	00378071501	Enhanced
198286	00378005501	TIMOLOL MALEATE	TABS	5MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	0						OR	TIMOLOL MALEATE	Y	00378005501	Enhanced
132604	00517077010	TORSEMIDE	SOLN	20MG/2ML	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	0						IV	TORSEMIDE	Y	00517077010	Enhanced
198370	31722053201	TORSEMIDE	TABS	100MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	0						OR	TORSEMIDE	Y	31722053201	Enhanced
198369	59762170101	TORSEMIDE	TABS	10MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	0						OR	TORSEMIDE	Y	59762170101	Enhanced
198371	00054007725	TORSEMIDE	TABS	20MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	0						OR	TORSEMIDE	Y	00054007725	Enhanced
198372	59762170001	TORSEMIDE	TABS	5MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	0						OR	TORSEMIDE	Y	59762170001	Enhanced
199353	00093732501	TRANDOLAPRIL	TABS	1MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	1	1	ARB	1			OR	TRANDOLAPRIL	Y	00093732501	Enhanced
199351	00093732601	TRANDOLAPRIL	TABS	2MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	1	1	ARB	1			OR	TRANDOLAPRIL	Y	00093732601	Enhanced
199352	00093732701	TRANDOLAPRIL	TABS	4MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	1	1	ARB	1			OR	TRANDOLAPRIL	Y	00093732701	Enhanced
198316	00378253701	TRIAMTERENE/HYDROCHLOROTHIAZIDE	CAPS	25MG; 37.5MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	0						OR	HYDROCHLOROTHIAZIDE; TRIAMTERENE	Y	00378253701	Enhanced
310812	00781112301	TRIAMTERENE/HYDROCHLOROTHIAZIDE	TABS	25MG; 37.5MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	0						OR	HYDROCHLOROTHIAZIDE; TRIAMTERENE	Y	00781112301	Enhanced
310818	00781100805	TRIAMTERENE/HYDROCHLOROTHIAZIDE	TABS	50MG; 75MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	0						OR	HYDROCHLOROTHIAZIDE; TRIAMTERENE	Y	00781100805	Enhanced
200285	00378632205	VALSARTAN/HYDROCHLOROTHIAZIDE	TABS	12.5MG; 160MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	1	1	ARB	1			OR	HYDROCHLOROTHIAZIDE; VALSARTAN	Y	00378632205	Enhanced
349353	00378632377	VALSARTAN/HYDROCHLOROTHIAZIDE	TABS	25MG; 160MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	1	1	ARB	1			OR	HYDROCHLOROTHIAZIDE; VALSARTAN	Y	00378632377	Enhanced
636042	00378632405	VALSARTAN/HYDROCHLOROTHIAZIDE	TABS	12.5MG; 320MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	1	1	ARB	1			OR	HYDROCHLOROTHIAZIDE; VALSARTAN	Y	00378632405	Enhanced
636045	00378632505	VALSARTAN/HYDROCHLOROTHIAZIDE	TABS	25MG; 320MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	1	1	ARB	1			OR	HYDROCHLOROTHIAZIDE; VALSARTAN	Y	00378632505	Enhanced
200284	00378632177	VALSARTAN/HYDROCHLOROTHIAZIDE	TABS	12.5MG; 80MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	1	1	ARB	1			OR	HYDROCHLOROTHIAZIDE; VALSARTAN	Y	00378632177	Enhanced
897584	00378620101	VERAPAMIL HCL ER	CP24	100MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	0						OR	VERAPAMIL HYDROCHLORIDE	Y	00378620101	Enhanced
897612	00378632001	VERAPAMIL HCL ER	CP24	120MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	0						OR	VERAPAMIL HYDROCHLORIDE	Y	00378632001	Enhanced
897618	00378638001	VERAPAMIL HCL ER	CP24	180MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	0						OR	VERAPAMIL HYDROCHLORIDE	Y	00378638001	Enhanced
897590	00378620201	VERAPAMIL HCL ER	CP24	200MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	0						OR	VERAPAMIL HYDROCHLORIDE	Y	00378620201	Enhanced
897624	00378644001	VERAPAMIL HCL ER	CP24	240MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	0						OR	VERAPAMIL HYDROCHLORIDE	Y	00378644001	Enhanced
897596	00378620305	VERAPAMIL HCL ER	CP24	300MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	0						OR	VERAPAMIL HYDROCHLORIDE	Y	00378620305	Enhanced
897706	00409401101	VERAPAMIL HCL	SOLN	2.5MG/ML	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	0						IV	VERAPAMIL HYDROCHLORIDE	Y	00409401101	Enhanced
897666	00591034510	VERAPAMIL HCL	TABS	120MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	0						OR	VERAPAMIL HYDROCHLORIDE	Y	00591034510	Enhanced
901434	00172428510	VERAPAMIL HCL ER	TBCR	120MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	0						OR	VERAPAMIL HYDROCHLORIDE	Y	00172428510	Enhanced
897640	00378218005	VERAPAMIL HCL ER	TBCR	180MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	0						OR	VERAPAMIL HYDROCHLORIDE	Y	00378218005	Enhanced
897649	00378141105	VERAPAMIL HCL ER	TBCR	240MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	0						OR	VERAPAMIL HYDROCHLORIDE	Y	00378141105	Enhanced
897722	00591040401	VERAPAMIL HCL	TABS	40MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	0						OR	VERAPAMIL HYDROCHLORIDE	Y	00591040401	Enhanced
897683	00591034305	VERAPAMIL HCL	TABS	80MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	ANTIHYPERTENSIVE THERAPY	0						OR	VERAPAMIL HYDROCHLORIDE	Y	00591034305	Enhanced
104208	00641141035	DIGOXIN	SOLN	0.25MG/ML	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	CARDIAC GLYCOSIDES	CARDIOVASCULAR, HYPERTENSION / LIPIDS	CARDIAC GLYCOSIDES	0						IJ	DIGOXIN	Y	00641141035	Enhanced
393245	00054005746	DIGOXIN	SOLN	0.05MG/ML	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	CARDIAC GLYCOSIDES	CARDIOVASCULAR, HYPERTENSION / LIPIDS	CARDIAC GLYCOSIDES	0						OR	DIGOXIN	Y	00054005746	Enhanced
197604	00143124001	DIGOXIN	TABS	0.125MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	CARDIAC GLYCOSIDES	CARDIOVASCULAR, HYPERTENSION / LIPIDS	CARDIAC GLYCOSIDES	0						OR	DIGOXIN	Y	00143124001	Enhanced
197606	00143124101	DIGOXIN	TABS	0.25MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	CARDIAC GLYCOSIDES	CARDIOVASCULAR, HYPERTENSION / LIPIDS	CARDIAC GLYCOSIDES	0						OR	DIGOXIN	Y	00143124101	Enhanced
1362082	00597000160	AGGRENOX	CP12	25MG; 200MG	2	5	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	COAGULATION THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	COAGULATION THERAPY	0						OR	ASPIRIN; DIPYRIDAMOLE	W	00597000160	Enhanced
1116639	00186077760	BRILINTA	TABS	90MG	2	5	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	COAGULATION THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	COAGULATION THERAPY	0						OR	TICAGRELOR	W	00186077760	Enhanced
242461	00185022360	CILOSTAZOL	TABS	100MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	COAGULATION THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	COAGULATION THERAPY	0						OR	CILOSTAZOL	Y	00185022360	Enhanced
242462	00185012360	CILOSTAZOL	TABS	50MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	COAGULATION THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	COAGULATION THERAPY	0						OR	CILOSTAZOL	Y	00185012360	Enhanced
749196	55111067131	CLOPIDOGREL	TABS	300MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	COAGULATION THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	COAGULATION THERAPY	0						OR	CLOPIDOGREL BISULFATE	Y	55111067131	Enhanced
309362	00378362777	CLOPIDOGREL	TABS	75MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	COAGULATION THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	COAGULATION THERAPY	0						OR	CLOPIDOGREL BISULFATE	Y	00378362777	Enhanced
309952	00115107001	DIPYRIDAMOLE	TABS	25MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	COAGULATION THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	COAGULATION THERAPY	0						OR	DIPYRIDAMOLE	Y	00115107001	Enhanced
197622	00115107101	DIPYRIDAMOLE	TABS	50MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	COAGULATION THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	COAGULATION THERAPY	0						OR	DIPYRIDAMOLE	Y	00115107101	Enhanced
309955	00115107201	DIPYRIDAMOLE	TABS	75MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	COAGULATION THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	COAGULATION THERAPY	0						OR	DIPYRIDAMOLE	Y	00115107201	Enhanced
855816	00002512377	EFFIENT	TABS	10MG	2	5	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	COAGULATION THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	COAGULATION THERAPY	0						OR	PRASUGREL HYDROCHLORIDE	W	00002512377	Enhanced
855820	00002512152	EFFIENT	TABS	5MG	2	5	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	COAGULATION THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	COAGULATION THERAPY	0						OR	PRASUGREL HYDROCHLORIDE	W	00002512152	Enhanced
1364441	00003089321	ELIQUIS	TABS	2.5MG	2	5	0		1	ELIQUIS	0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	COAGULATION THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	COAGULATION THERAPY	0						OR	APIXABAN	W	00003089321	Enhanced
1364447	00003089421	ELIQUIS	TABS	5MG	2	5	0		1	ELIQUIS	0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	COAGULATION THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	COAGULATION THERAPY	0						OR	APIXABAN	W	00003089421	Enhanced
854248	62037086320	ENOXAPARIN SODIUM	SOLN	100MG/ML	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	COAGULATION THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	COAGULATION THERAPY	0						SC	ENOXAPARIN SODIUM	Y	62037086320	Enhanced
854245	62037086420	ENOXAPARIN SODIUM	SOLN	120MG/0.8ML	3	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	COAGULATION THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	COAGULATION THERAPY	0						SC	ENOXAPARIN SODIUM	Y	62037086420	Enhanced
854252	62037086620	ENOXAPARIN SODIUM	SOLN	150MG/ML	3	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	COAGULATION THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	COAGULATION THERAPY	0						SC	ENOXAPARIN SODIUM	Y	62037086620	Enhanced
854228	62037083920	ENOXAPARIN SODIUM	SOLN	30MG/0.3ML	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	COAGULATION THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	COAGULATION THERAPY	0						SC	ENOXAPARIN SODIUM	Y	62037083920	Enhanced
854255	00781312293	ENOXAPARIN SODIUM	SOLN	300MG/3ML	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	COAGULATION THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	COAGULATION THERAPY	0						IJ	ENOXAPARIN SODIUM	Y	00781312293	Enhanced
854235	62037084920	ENOXAPARIN SODIUM	SOLN	40MG/0.4ML	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	COAGULATION THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	COAGULATION THERAPY	0						SC	ENOXAPARIN SODIUM	Y	62037084920	Enhanced
854238	62037086120	ENOXAPARIN SODIUM	SOLN	60MG/0.6ML	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	COAGULATION THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	COAGULATION THERAPY	0						SC	ENOXAPARIN SODIUM	Y	62037086120	Enhanced
854241	62037086220	ENOXAPARIN SODIUM	SOLN	80MG/0.8ML	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	COAGULATION THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	COAGULATION THERAPY	0						SC	ENOXAPARIN SODIUM	Y	62037086220	Enhanced
861356	55111068102	FONDAPARINUX SODIUM	SOLN	10MG/0.8ML	3	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	COAGULATION THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	COAGULATION THERAPY	0						SC	FONDAPARINUX SODIUM	Y	55111068102	Enhanced
861360	55111067802	FONDAPARINUX SODIUM	SOLN	2.5MG/0.5ML	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	COAGULATION THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	COAGULATION THERAPY	0						SC	FONDAPARINUX SODIUM	Y	55111067802	Enhanced
861363	55111067902	FONDAPARINUX SODIUM	SOLN	5MG/0.4ML	3	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	COAGULATION THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	COAGULATION THERAPY	0						SC	FONDAPARINUX SODIUM	Y	55111067902	Enhanced
861365	55111068002	FONDAPARINUX SODIUM	SOLN	7.5MG/0.6ML	3	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	COAGULATION THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	COAGULATION THERAPY	0						SC	FONDAPARINUX SODIUM	Y	55111068002	Enhanced
1361607	00264956710	HEPARIN SODIUM/DSW	SOLN	5%; 40UNIT/ML	1	2	0		3		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	COAGULATION THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	COAGULATION THERAPY	0						IV	DEXTROSE (ANHYDROUS); HEPARIN SODIUM (PORCINE)	Y	00264956710	Enhanced
1361048	00409765062	HEPARIN SODIUM/NACL 0.45%	SOLN	100UNIT/ML; 0.45%	1	2	0		3		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	COAGULATION THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	COAGULATION THERAPY	0						IJ	HEPARIN SODIUM (PORCINE); SODIUM CHLORIDE	Y	00409765062	Enhanced
1361613	00409765103	HEPARIN SODIUM/NACL 0.45%	SOLN	50UNIT/ML; 0.45%	1	2	0		3		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	COAGULATION THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	COAGULATION THERAPY	0						IJ	HEPARIN SODIUM (PORCINE); SODIUM CHLORIDE	Y	00409765103	Enhanced
1362935	00409762059	HEPARIN SODIUM/SODIUM CHLORIDE 0.9% PREMIX	SOLN	2UNIT/ML; 0.9%	1	2	0		3		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	COAGULATION THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	COAGULATION THERAPY	0						IJ	HEPARIN SODIUM (PORCINE); SODIUM CHLORIDE	Y	00409762059	Enhanced
1361226	00409272002	HEPARIN SODIUM	SOLN	1000UNIT/ML	1	2	0		3		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	COAGULATION THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	COAGULATION THERAPY	0						IJ	HEPARIN SODIUM (PORCINE)	Y	00409272002	Enhanced
1362831	00409272101	HEPARIN SODIUM	SOLN	10000UNIT/ML	1	2	0		3		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	COAGULATION THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	COAGULATION THERAPY	0						IJ	HEPARIN SODIUM (PORCINE)	Y	00409272101	Enhanced
1361574	25021040401	HEPARIN SODIUM	SOLN	20000UNIT/ML	1	2	0		3		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	COAGULATION THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	COAGULATION THERAPY	0						IJ	HEPARIN SODIUM (PORCINE)	Y	25021040401	Enhanced
1361615	00409272302	HEPARIN SODIUM	SOLN	50000UNIT/ML	1	2	0		3		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	COAGULATION THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	COAGULATION THERAPY	0						IJ	HEPARIN SODIUM (PORCINE)	Y	00409272302	Enhanced
855300	00832121950	JANTOVEN	TABS	10MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	COAGULATION THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	COAGULATION THERAPY	0						OR	WARFARIN SODIUM	Y	00832121950	Enhanced
855292	00832121110	JANTOVEN	TABS	1MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	COAGULATION THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	COAGULATION THERAPY	0						OR	WARFARIN SODIUM	Y	00832121110	Enhanced
855316	00832121300	JANTOVEN	TABS	2.5MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	COAGULATION THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	COAGULATION THERAPY	0						OR	WARFARIN SODIUM	Y	00832121300	Enhanced
855306	00832121210	JANTOVEN	TABS	2MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	COAGULATION THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	COAGULATION THERAPY	0						OR	WARFARIN SODIUM	Y	00832121210	Enhanced
855322	00832121410	JANTOVEN	TABS	3MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	COAGULATION THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	COAGULATION THERAPY	0						OR	WARFARIN SODIUM	Y	00832121410	Enhanced
855328	00832121510	JANTOVEN	TABS	4MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	COAGULATION THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	COAGULATION THERAPY	0						OR	WARFARIN SODIUM	Y	00832121510	Enhanced
855336	00832121600	JANTOVEN	TABS	5MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	COAGULATION THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	COAGULATION THERAPY	0						OR	WARFARIN SODIUM	Y	00832121600	Enhanced
855342	00832121700	JANTOVEN	TABS	6MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	COAGULATION THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	COAGULATION THERAPY	0						OR	WARFARIN SODIUM	Y	00832121700	Enhanced
855348	00832121800	JANTOVEN	T

855318	68382005410	WARFARIN SODIUM	TABS	5MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	COAGULATION THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	COAGULATION THERAPY	0						OR	WARFARIN SODIUM	Y	68382005410	Enhanced
855324	68382005510	WARFARIN SODIUM	TABS	4MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	COAGULATION THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	COAGULATION THERAPY	0						OR	WARFARIN SODIUM	Y	68382005510	Enhanced
855332	51672403203	WARFARIN SODIUM	TABS	5MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	COAGULATION THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	COAGULATION THERAPY	0						OR	WARFARIN SODIUM	Y	51672403203	Enhanced
855338	00555092602	WARFARIN SODIUM	TABS	6MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	COAGULATION THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	COAGULATION THERAPY	0						OR	WARFARIN SODIUM	Y	00555092602	Enhanced
855344	00555083402	WARFARIN SODIUM	TABS	7.5MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	COAGULATION THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	COAGULATION THERAPY	0						OR	WARFARIN SODIUM	Y	00555083402	Enhanced
1114202	50458058010	XARELTO	TABS	10MG	2	5	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	COAGULATION THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	COAGULATION THERAPY	0						OR	RIVAROXABAN	W	50458058010	Enhanced
1232084	50458057810	XARELTO	TABS	15MG	2	5	0			1	XARELTO	0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	COAGULATION THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	COAGULATION THERAPY	0						OR	RIVAROXABAN	W	50458057810	Enhanced
1232088	50458057910	XARELTO	TABS	20MG	2	5	0			1	XARELTO	0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	COAGULATION THERAPY	CARDIOVASCULAR, HYPERTENSION / LIPIDS	COAGULATION THERAPY	0						OR	RIVAROXABAN	W	50458057910	Enhanced
791834	00074300790	ADVICOR	TB24	20MG; 1000MG	2	5	1	180	90	0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	LIPID/CHOLESTEROL LOWERING AGENTS	CARDIOVASCULAR, HYPERTENSION / LIPIDS	LIPID/CHOLESTEROL LOWERING AGENTS	0						OR	LOVASTATIN; NIACIN	W	00074300790	Enhanced
791846	00074301090	ADVICOR	TB24	40MG; 1000MG	2	5	1	180	90	0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	LIPID/CHOLESTEROL LOWERING AGENTS	CARDIOVASCULAR, HYPERTENSION / LIPIDS	LIPID/CHOLESTEROL LOWERING AGENTS	0						OR	LOVASTATIN; NIACIN	W	00074301090	Enhanced
791838	00074300590	ADVICOR	TB24	20MG; 500MG	2	5	1	90	90	0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	LIPID/CHOLESTEROL LOWERING AGENTS	CARDIOVASCULAR, HYPERTENSION / LIPIDS	LIPID/CHOLESTEROL LOWERING AGENTS	0						OR	LOVASTATIN; NIACIN	W	00074300590	Enhanced
791842	00074307290	ADVICOR	TB24	20MG; 750MG	2	5	1	180	90	0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	LIPID/CHOLESTEROL LOWERING AGENTS	CARDIOVASCULAR, HYPERTENSION / LIPIDS	LIPID/CHOLESTEROL LOWERING AGENTS	0						OR	LOVASTATIN; NIACIN	W	00074307290	Enhanced
617312	63304082790	ATORVASTATIN CALCIUM	TABS	10MG	1	2	1	90	90	0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	LIPID/CHOLESTEROL LOWERING AGENTS	CARDIOVASCULAR, HYPERTENSION / LIPIDS	LIPID/CHOLESTEROL LOWERING AGENTS	1	1	HMG RULE 1	1			OR	ATORVASTATIN CALCIUM	Y	63304082790	Enhanced
617310	63304082890	ATORVASTATIN CALCIUM	TABS	20MG	1	2	1	90	90	0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	LIPID/CHOLESTEROL LOWERING AGENTS	CARDIOVASCULAR, HYPERTENSION / LIPIDS	LIPID/CHOLESTEROL LOWERING AGENTS	1	1	HMG RULE 1	1			OR	ATORVASTATIN CALCIUM	Y	63304082890	Enhanced
617311	63304082990	ATORVASTATIN CALCIUM	TABS	40MG	1	2	1	90	90	0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	LIPID/CHOLESTEROL LOWERING AGENTS	CARDIOVASCULAR, HYPERTENSION / LIPIDS	LIPID/CHOLESTEROL LOWERING AGENTS	1	1	HMG RULE 1	1			OR	ATORVASTATIN CALCIUM	Y	63304082990	Enhanced
259255	63304083090	ATORVASTATIN CALCIUM	TABS	80MG	1	2	1	90	90	0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	LIPID/CHOLESTEROL LOWERING AGENTS	CARDIOVASCULAR, HYPERTENSION / LIPIDS	LIPID/CHOLESTEROL LOWERING AGENTS	1	1	HMG RULE 1	1			OR	ATORVASTATIN CALCIUM	Y	63304083090	Enhanced
848943	00185093998	CHOLESTYRAMINE LIGHT	PACK	4GM	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	LIPID/CHOLESTEROL LOWERING AGENTS	CARDIOVASCULAR, HYPERTENSION / LIPIDS	LIPID/CHOLESTEROL LOWERING AGENTS	1	1	BILE ACID SEQUESTRANTS	1			OR	CHOLESTYRAMINE	Y	00185093998	Enhanced
1048450	00115521302	COLESTIPOL HCL	GRAN	5GM	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	LIPID/CHOLESTEROL LOWERING AGENTS	CARDIOVASCULAR, HYPERTENSION / LIPIDS	LIPID/CHOLESTEROL LOWERING AGENTS	1	1	BILE ACID SEQUESTRANTS	1			OR	COLESTIPOL HYDROCHLORIDE	Y	00115521302	Enhanced
1048445	00115521116	COLESTIPOL HCL	TABS	1GM	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	LIPID/CHOLESTEROL LOWERING AGENTS	CARDIOVASCULAR, HYPERTENSION / LIPIDS	LIPID/CHOLESTEROL LOWERING AGENTS	1	1	BILE ACID SEQUESTRANTS	1			OR	COLESTIPOL HYDROCHLORIDE	Y	00115521116	Enhanced
859749	00310075190	CRESTOR	TABS	10MG	2	5	1	90	90	0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	LIPID/CHOLESTEROL LOWERING AGENTS	CARDIOVASCULAR, HYPERTENSION / LIPIDS	LIPID/CHOLESTEROL LOWERING AGENTS	1	1	HMG RULE 1	2			OR	ROSUVASTATIN CALCIUM	W	00310075190	Enhanced
859753	00310075290	CRESTOR	TABS	20MG	2	5	1	90	90	0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	LIPID/CHOLESTEROL LOWERING AGENTS	CARDIOVASCULAR, HYPERTENSION / LIPIDS	LIPID/CHOLESTEROL LOWERING AGENTS	1	1	HMG RULE 1	2			OR	ROSUVASTATIN CALCIUM	W	00310075290	Enhanced
859421	00310075430	CRESTOR	TABS	40MG	2	5	1	90	90	0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	LIPID/CHOLESTEROL LOWERING AGENTS	CARDIOVASCULAR, HYPERTENSION / LIPIDS	LIPID/CHOLESTEROL LOWERING AGENTS	1	1	HMG RULE 1	2			OR	ROSUVASTATIN CALCIUM	W	00310075430	Enhanced
859426	00310075590	CRESTOR	TABS	5MG	2	5	1	90	90	0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	LIPID/CHOLESTEROL LOWERING AGENTS	CARDIOVASCULAR, HYPERTENSION / LIPIDS	LIPID/CHOLESTEROL LOWERING AGENTS	1	1	HMG RULE 1	2			OR	ROSUVASTATIN CALCIUM	W	00310075590	Enhanced
310288	00115052201	FENOFIBRATE MICRONIZED	CAPS	134MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	LIPID/CHOLESTEROL LOWERING AGENTS	CARDIOVASCULAR, HYPERTENSION / LIPIDS	LIPID/CHOLESTEROL LOWERING AGENTS	0						OR	FENOFIBRATE	Y	00115052201	Enhanced
310289	00115053301	FENOFIBRATE MICRONIZED	CAPS	200MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	LIPID/CHOLESTEROL LOWERING AGENTS	CARDIOVASCULAR, HYPERTENSION / LIPIDS	LIPID/CHOLESTEROL LOWERING AGENTS	0						OR	FENOFIBRATE	Y	00115053301	Enhanced
200311	00115051101	FENOFIBRATE MICRONIZED	CAPS	67MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	LIPID/CHOLESTEROL LOWERING AGENTS	CARDIOVASCULAR, HYPERTENSION / LIPIDS	LIPID/CHOLESTEROL LOWERING AGENTS	0						OR	FENOFIBRATE	Y	00115051101	Enhanced
477560	68180036102	FENOFIBRATE	TABS	145MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	LIPID/CHOLESTEROL LOWERING AGENTS	CARDIOVASCULAR, HYPERTENSION / LIPIDS	LIPID/CHOLESTEROL LOWERING AGENTS	0						OR	FENOFIBRATE	Y	68180036102	Enhanced
349287	00115552210	FENOFIBRATE	TABS	160MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	LIPID/CHOLESTEROL LOWERING AGENTS	CARDIOVASCULAR, HYPERTENSION / LIPIDS	LIPID/CHOLESTEROL LOWERING AGENTS	0						OR	FENOFIBRATE	Y	00115552210	Enhanced
477562	68682052501	FENOFIBRATE	TABS	48MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	LIPID/CHOLESTEROL LOWERING AGENTS	CARDIOVASCULAR, HYPERTENSION / LIPIDS	LIPID/CHOLESTEROL LOWERING AGENTS	0						OR	FENOFIBRATE	Y	68682052501	Enhanced
351133	00378710077	FENOFIBRATE	TABS	54MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	LIPID/CHOLESTEROL LOWERING AGENTS	CARDIOVASCULAR, HYPERTENSION / LIPIDS	LIPID/CHOLESTEROL LOWERING AGENTS	0						OR	FENOFIBRATE	Y	00378710077	Enhanced
310404	00378802077	FLUVASTATIN	CAPS	20MG	1	2	1	90	90	0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	LIPID/CHOLESTEROL LOWERING AGENTS	CARDIOVASCULAR, HYPERTENSION / LIPIDS	LIPID/CHOLESTEROL LOWERING AGENTS	1	1	HMG RULE 1	1			OR	FLUVASTATIN SODIUM	Y	00378802077	Enhanced
310405	00378802193	FLUVASTATIN	CAPS	40MG	1	2	1	180	90	0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	LIPID/CHOLESTEROL LOWERING AGENTS	CARDIOVASCULAR, HYPERTENSION / LIPIDS	LIPID/CHOLESTEROL LOWERING AGENTS	1	1	HMG RULE 1	1			OR	FLUVASTATIN SODIUM	Y	00378802193	Enhanced
310459	00143913005	GEMFIBROZIL	TABS	600MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	LIPID/CHOLESTEROL LOWERING AGENTS	CARDIOVASCULAR, HYPERTENSION / LIPIDS	LIPID/CHOLESTEROL LOWERING AGENTS	0						OR	GEMFIBROZIL	Y	00143913005	Enhanced
1364490	76431011001	JUXTAPID	CAPS	10MG	3	5	0			1		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	LIPID/CHOLESTEROL LOWERING AGENTS	CARDIOVASCULAR, HYPERTENSION / LIPIDS	LIPID/CHOLESTEROL LOWERING AGENTS	0						OR	LOMITAPIDE MESYLATE	W	76431011001	Enhanced
1364494	76431012001	JUXTAPID	CAPS	20MG	3	5	0			1		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	LIPID/CHOLESTEROL LOWERING AGENTS	CARDIOVASCULAR, HYPERTENSION / LIPIDS	LIPID/CHOLESTEROL LOWERING AGENTS	0						OR	LOMITAPIDE MESYLATE	W	76431012001	Enhanced
1364498	76431010501	JUXTAPID	CAPS	5MG	3	5	0			1		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	LIPID/CHOLESTEROL LOWERING AGENTS	CARDIOVASCULAR, HYPERTENSION / LIPIDS	LIPID/CHOLESTEROL LOWERING AGENTS	0						OR	LOMITAPIDE MESYLATE	W	76431010501	Enhanced
197903	00378651091	LOVASTATIN	TABS	10MG	1	2	1	90	90	0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	LIPID/CHOLESTEROL LOWERING AGENTS	CARDIOVASCULAR, HYPERTENSION / LIPIDS	LIPID/CHOLESTEROL LOWERING AGENTS	1	1	HMG RULE 1	1			OR	LOVASTATIN	Y	00378651091	Enhanced
197904	00378652005	LOVASTATIN	TABS	20MG	1	2	1	180	90	0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	LIPID/CHOLESTEROL LOWERING AGENTS	CARDIOVASCULAR, HYPERTENSION / LIPIDS	LIPID/CHOLESTEROL LOWERING AGENTS	1	1	HMG RULE 1	1			OR	LOVASTATIN	Y	00378652005	Enhanced
197905	61442014301	LOVASTATIN	TABS	40MG	1	2	1	180	90	0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	LIPID/CHOLESTEROL LOWERING AGENTS	CARDIOVASCULAR, HYPERTENSION / LIPIDS	LIPID/CHOLESTEROL LOWERING AGENTS	1	1	HMG RULE 1	1			OR	LOVASTATIN	Y	61442014301	Enhanced
607044	00172078302	LOVAZA	CAPS	375MG; 465MG; 1GM	2	5	0			1	LOVAZA	0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	LIPID/CHOLESTEROL LOWERING AGENTS	CARDIOVASCULAR, HYPERTENSION / LIPIDS	LIPID/CHOLESTEROL LOWERING AGENTS	0						OR	DHA ETHYL ESTER; ICOSAPENT ETHYL (EPA ETHYL ESTER);	W	00172078302	Enhanced
1098135	00074308090	NIASPAN	TBCR	1000MG	2	5	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	LIPID/CHOLESTEROL LOWERING AGENTS	CARDIOVASCULAR, HYPERTENSION / LIPIDS	LIPID/CHOLESTEROL LOWERING AGENTS	0						OR	NIACIN	W	00074308090	Enhanced
1098142	00074307490	NIASPAN	TBCR	500MG	2	5	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	LIPID/CHOLESTEROL LOWERING AGENTS	CARDIOVASCULAR, HYPERTENSION / LIPIDS	LIPID/CHOLESTEROL LOWERING AGENTS	0						OR	NIACIN	W	00074307490	Enhanced
1098144	00074307990	NIASPAN	TBCR	750MG	2	5	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	LIPID/CHOLESTEROL LOWERING AGENTS	CARDIOVASCULAR, HYPERTENSION / LIPIDS	LIPID/CHOLESTEROL LOWERING AGENTS	0						OR	NIACIN	W	00074307990	Enhanced
904458	00093077198	PRAVASTATIN SODIUM	TABS	10MG	1	2	1	90	90	0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	LIPID/CHOLESTEROL LOWERING AGENTS	CARDIOVASCULAR, HYPERTENSION / LIPIDS	LIPID/CHOLESTEROL LOWERING AGENTS	1	1	HMG RULE 1	1			OR	PRAVASTATIN SODIUM	Y	00093077198	Enhanced
904467	68462019605	PRAVASTATIN SODIUM	TABS	20MG	1	2	1	90	90	0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	LIPID/CHOLESTEROL LOWERING AGENTS	CARDIOVASCULAR, HYPERTENSION / LIPIDS	LIPID/CHOLESTEROL LOWERING AGENTS	1	1	HMG RULE 1	1			OR	PRAVASTATIN SODIUM	Y	68462019605	Enhanced
904475	68462019705	PRAVASTATIN SODIUM	TABS	40MG	1	2	1	90	90	0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	LIPID/CHOLESTEROL LOWERING AGENTS	CARDIOVASCULAR, HYPERTENSION / LIPIDS	LIPID/CHOLESTEROL LOWERING AGENTS	1	1	HMG RULE 1	1			OR	PRAVASTATIN SODIUM	Y	68462019705	Enhanced
904481	00093727010	PRAVASTATIN SODIUM	TABS	80MG	1	2	1	90	90	0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	LIPID/CHOLESTEROL LOWERING AGENTS	CARDIOVASCULAR, HYPERTENSION / LIPIDS	LIPID/CHOLESTEROL LOWERING AGENTS	1	1	HMG RULE 1	1			OR	PRAVASTATIN SODIUM	Y	16252052990	Enhanced
848951	00245003623	PREVALITE	POWD	4GM/DOSE	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	LIPID/CHOLESTEROL LOWERING AGENTS	CARDIOVASCULAR, HYPERTENSION / LIPIDS	LIPID/CHOLESTEROL LOWERING AGENTS	1	1	BILE ACID SEQUESTRANTS	1			OR	CHOLESTYRAMINE	Y	00245003623	Enhanced
763228	00074345590	SIMCOR	TB24	1000MG; 20MG	2	5	1	180	90	0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	LIPID/CHOLESTEROL LOWERING AGENTS	CARDIOVASCULAR, HYPERTENSION / LIPIDS	LIPID/CHOLESTEROL LOWERING AGENTS	0						OR	NIACIN; SIMVASTATIN	W	00074345590	Enhanced
999939	00074345790	SIMCOR	TB24	1000MG; 40MG	2	5	1	90	90	0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	LIPID/CHOLESTEROL LOWERING AGENTS	CARDIOVASCULAR, HYPERTENSION / LIPIDS	LIPID/CHOLESTEROL LOWERING AGENTS	0						OR	NIACIN; SIMVASTATIN - HIGH DOSE (40 MG & HIGHER)	W	00074345790	Enhanced
763232	00074331290	SIMCOR	TB24	500MG; 20MG	2	5	1	90	90	0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	LIPID/CHOLESTEROL LOWERING AGENTS	CARDIOVASCULAR, HYPERTENSION / LIPIDS	LIPID/CHOLESTEROL LOWERING AGENTS	0						OR	NIACIN; SIMVASTATIN	W	00074331290	Enhanced
999946	00074345990	SIMCOR	TB24	500MG; 40MG	2	5	1	90	90	0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	LIPID/CHOLESTEROL LOWERING AGENTS	CARDIOVASCULAR, HYPERTENSION / LIPIDS	LIPID/CHOLESTEROL LOWERING AGENTS	0						OR	NIACIN; SIMVASTATIN - HIGH DOSE (40 MG & HIGHER)	W	00074345990	Enhanced
763236	00074331590	SIMCOR	TB24	750MG; 20MG	2	5	1	180	90	0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	LIPID/CHOLESTEROL LOWERING AGENTS	CARDIOVASCULAR, HYPERTENSION / LIPIDS	LIPID/CHOLESTEROL LOWERING AGENTS	0						OR	NIACIN; SIMVASTATIN	W	00074331590	Enhanced
314231	68180047801	SIMVASTATIN	TABS	10MG	1	2	1	90	90	0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	LIPID/CHOLESTEROL LOWERING AGENTS	CARDIOVASCULAR, HYPERTENSION / LIPIDS	LIPID/CHOLESTEROL LOWERING AGENTS	1	1	HMG RULE 1	1			OR	SIMVASTATIN	Y	68180047801	Enhanced
312961	68382006705	SIMVASTATIN	TABS	20MG	1	2	1	90	90	0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	LIPID/CHOLESTEROL LOWERING AGENTS	CARDIOVASCULAR, HYPERTENSION / LIPIDS	LIPID/CHOLESTEROL LOWERING AGENTS	1	1	HMG RULE 1	1			OR	SIMVASTATIN	Y	68382006705	Enhanced
198211	68382006805	SIMVASTATIN	TABS	40MG	1	2	1	90	90	0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	LIPID/CHOLESTEROL LOWERING AGENTS	CARDIOVASCULAR, HYPERTENSION / LIPIDS	LIPID/CHOLESTEROL LOWERING AGENTS	1	1	HMG RULE 1	1			OR	SIMVASTATIN - HIGH DOSE (40 MG & HIGHER)	Y	68382006805	Enhanced
312962	68382006516	SIMVASTATIN	TABS	5MG	1	2	1	90	90	0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	LIPID/CHOLESTEROL LOWERING AGENTS	CARDIOVASCULAR, HYPERTENSION / LIPIDS	LIPID/CHOLESTEROL LOWERING AGENTS	1	1	HMG RULE 1	1			OR	SIMVASTATIN	Y	68382006516	Enhanced
200345	68382006910	SIMVASTATIN	TABS	80MG	1	2	1	90	90	0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	LIPID/CHOLESTEROL LOWERING AGENTS	CARDIOVASCULAR, HYPERTENSION / LIPIDS	LIPID/CHOLESTEROL LOWERING AGENTS	1	1	HMG RULE 1	1			OR	SIMVASTATIN - HIGH DOSE (40 MG & HIGHER)	Y	68382006910	Enhanced
1304985	52937000120	VASCEPA	CAPS	1GM	2	5	0			1	LOVAZA	0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	LIPID/CHOLESTEROL LOWERING AGENTS	CARDIOVASCULAR, HYPERTENSION / LIPIDS	LIPID/CHOLESTEROL LOWERING AGENTS	0						OR	ICOSAPENT ETHYL (EPA ETHYL ESTER)	W	52937000120	Enhanced
866907	65597090230	WELCHOL	PACK	3.75GM	2	5	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	LIPID/CHOLESTEROL LOWERING AGENTS	CARDIOVASCULAR, HYPERTENSION / LIPIDS	LIPID/CHOLESTEROL LOWERING AGENTS	1	1	BILE ACID SEQUESTRANTS	2			OR	COLESEVELAM HYDROCHLORIDE	W	65597090230	Enhanced
866912	65597070118	WELCHOL	TABS	625MG	2	5	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	LIPID/CHOLESTEROL LOWERING AGENTS	CARDIOVASCULAR, HYPERTENSION / LIPIDS	LIPID/CHOLESTEROL LOWERING AGENTS	1	1	BILE ACID SEQUESTRANTS	2			OR	COLESEVELAM HYDROCHLORIDE	W	65597070118	Enhanced
352304	66582041454	ZETIA	TABS	10MG	2	5	0			1	ZETIA	0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	LIPID/CHOLESTEROL LOWERING AGENTS	CARDIOVASCULAR, HYPERTENSION / LIPIDS	LIPID/CHOLESTEROL LOWERING AGENTS	0						OR	EZETIMIBE	W	66582041454	Enhanced
860737	61958100401	RANEXA	TB12	1000MG	2	5	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	MISCELLANEOUS CARDIOVASCULAR AGENTS	CARDIOVASCULAR, HYPERTENSION / LIPIDS	MISCELLANEOUS CARDIOVASCULAR AGENTS	0						OR	RANOLAZINE	W	61958100401	Enhanced
860738	61958100301	RANEXA	TB12	500MG	2	5	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	MISCELLANEOUS CARDIOVASCULAR AGENTS	CARDIOVASCULAR, HYPERTENSION / LIPIDS	MISCELLANEOUS CARDIOVASCULAR AGENTS	0						OR	RANOLAZINE	W	61958100301	Enhanced
197838	00143176501	ISOSORBIDE DINITRATE	SUBL	2.5MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	NITRATES	CARDIOVASCULAR, HYPERTENSION / LIPIDS	NITRATES	0						SL	ISOSORBIDE DINITRATE	Y	00143176501	Enhanced
381056	00143177110	ISOSORBIDE DINITRATE	TABS	10MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	NITRATES	CARDIOVASCULAR, HYPERTENSION / LIPIDS	NITRATES	0						OR	ISOSORBIDE DINITRATE	Y	00143177110	Enhanced
206842	00143177201	ISOSORBIDE DINITRATE	TABS	20MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	NITRATES	CARDIOVASCULAR, HYPERTENSION / LIPIDS	NITRATES	0						OR	ISOSORBIDE DINITRATE	Y	00143177201	Enhanced
197839	49884000910	ISOSORBIDE DINITRATE	TABS	30MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	NITRATES	CARDIOVASCULAR, HYPERTENSION / LIPIDS	NITRATES	0						OR	ISOSORBIDE DINITRATE	Y	49884000910	Enhanced
311194	57664060088	ISOSORBIDE DINITRATE ER	TBCR	40MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	NITRATES	CARDIOVASCULAR, HYPERTENSION / LIPIDS	NITRATES	0						OR	ISOSORBIDE DINITRATE	Y	57664060088	Enhanced
314055	00143176910	ISOSORBIDE DINITRATE	TABS	5MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	NITRATES	CARDIOVASCULAR, HYPERTENSION / LIPIDS	NITRATES	0						OR	ISOSORBIDE DINITRATE	Y	00143176910	Enhanced
311192	00228263111	ISOSORBIDE MONONITRATE	TABS	10MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	NITRATES	CARDIOVASCULAR, HYPERTENSION / LIPIDS	NITRATES	0						OR	ISOSORBIDE MONONITRATE	Y	00228263111	Enhanced
311196	62175012937	ISOSORBIDE MONONITRATE ER	TB24	120MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	NITRATES	CARDIOVASCULAR, HYPERTENSION / LIPIDS	NITRATES	0						OR	ISOSORBIDE MONONITRATE	Y	62175012937	Enhanced
311197	00143133301	ISOSORBIDE MONONITRATE	TABS	20MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	NITRATES	CARDIOVASCULAR, HYPERTENSION / LIPIDS	NITRATES	0						OR	ISOSORBIDE MONONITRATE	Y	00143133301	Enhanced
317110	00143223001	ISOSORBIDE MONONITRATE ER	TB24	30MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	NITRATES	CARDIOVASCULAR, HYPERTENSION / LIPIDS	NITRATES	0						OR	ISOSORBIDE MONONITRATE	Y	00143223001	Enhanced
353538	62175011937	ISOSORBIDE MONONITRATE ER	TB24	60MG	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	NITRATES	CARDIOVASCULAR, HYPERTENSION / LIPIDS	NITRATES	0						OR	ISOSORBIDE MONONITRATE	Y	62175011937	Enhanced
207273	00281032608	NITRO-BID	OINT	2%	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	NITRATES	CARDIOVASCULAR, HYPERTENSION / LIPIDS	NITRATES	0						TD	NITROGLYCERIN	Y	00281032608	Enhanced
861657	00378910293	NITROGLYCERIN TRANSDERMAL	PT24	0.1MG/HR	1	2	0			0		0	CARDIOVASCULAR, HYPERTENSION / LIPIDS	NITRATES	CARDIOVASCULAR, HYPERTENSION / LIPIDS	NITRAT

208185	43598021085	SSD	CREA	1%	1	2	0			0		0	DERMATOLOGICALS/TOPICAL THERAPY	BURN THERAPY	DERMATOLOGICALS/TOPICAL THERAPY	BURN THERAPY	0						EX	SILVER SULFADIAZINE	Y	43598021085	Enhanced
208187	67877012485	THERMAZENE	CREA	1%	1	2	0			0		0	DERMATOLOGICALS/TOPICAL THERAPY	BURN THERAPY	DERMATOLOGICALS/TOPICAL THERAPY	BURN THERAPY	0						EX	SILVER SULFADIAZINE	Y	67877012485	Enhanced
207073	00187065142	8-MOP	CAPS	10MG	2	5	0			0		0	DERMATOLOGICALS/TOPICAL THERAPY	MISCELLANEOUS DERMATOLOGICALS	DERMATOLOGICALS/TOPICAL THERAPY	MISCELLANEOUS DERMATOLOGICALS	0						OR	METHOXSALEN	W	00187065142	Enhanced
543460	00591215738	AMMONIUM LACTATE	CREA	12%	1	2	0			0		0	DERMATOLOGICALS/TOPICAL THERAPY	MISCELLANEOUS DERMATOLOGICALS	DERMATOLOGICALS/TOPICAL THERAPY	MISCELLANEOUS DERMATOLOGICALS	0						EX	AMMONIUM LACTATE	Y	00574212128	Enhanced
197362	45802041926	AMMONIUM LACTATE	LOTN	12%	1	2	0			0		0	DERMATOLOGICALS/TOPICAL THERAPY	MISCELLANEOUS DERMATOLOGICALS	DERMATOLOGICALS/TOPICAL THERAPY	MISCELLANEOUS DERMATOLOGICALS	0						EX	LACTIC ACID	Y	45802041926	Enhanced
284539	00006715030	CARAC	CREA	0.5%	2	5	0			0		0	DERMATOLOGICALS/TOPICAL THERAPY	MISCELLANEOUS DERMATOLOGICALS	DERMATOLOGICALS/TOPICAL THERAPY	MISCELLANEOUS DERMATOLOGICALS	0						EX	FLUOROURACIL	W	00006715030	Enhanced
105583	66530024940	FLUOROURACIL	CREA	5%	1	2	0			0		0	DERMATOLOGICALS/TOPICAL THERAPY	MISCELLANEOUS DERMATOLOGICALS	DERMATOLOGICALS/TOPICAL THERAPY	MISCELLANEOUS DERMATOLOGICALS	0						EX	FLUOROURACIL	Y	66530024940	Enhanced
310379	51672406201	FLUOROURACIL	SOLN	2%	1	2	0			0		0	DERMATOLOGICALS/TOPICAL THERAPY	MISCELLANEOUS DERMATOLOGICALS	DERMATOLOGICALS/TOPICAL THERAPY	MISCELLANEOUS DERMATOLOGICALS	0						EX	FLUOROURACIL	Y	51672406201	Enhanced
310380	51672406301	FLUOROURACIL	SOLN	5%	1	2	0			0		0	DERMATOLOGICALS/TOPICAL THERAPY	MISCELLANEOUS DERMATOLOGICALS	DERMATOLOGICALS/TOPICAL THERAPY	MISCELLANEOUS DERMATOLOGICALS	0						EX	FLUOROURACIL	Y	51672406301	Enhanced
310982	00168043224	IMIQUIMOD	CREA	5%	1	2	0			0		0	DERMATOLOGICALS/TOPICAL THERAPY	MISCELLANEOUS DERMATOLOGICALS	DERMATOLOGICALS/TOPICAL THERAPY	MISCELLANEOUS DERMATOLOGICALS	0						EX	IMIQUIMOD	Y	00168043224	Enhanced
404086	00187040231	OXSORALEN	LOTN	1%	2	5	0			0		0	DERMATOLOGICALS/TOPICAL THERAPY	MISCELLANEOUS DERMATOLOGICALS	DERMATOLOGICALS/TOPICAL THERAPY	MISCELLANEOUS DERMATOLOGICALS	0						EX	METHOXSALEN	W	00187040231	Enhanced
207074	00187065042	OXSORALEN ULTRA	CAPS	10MG	3	5	0			0		0	DERMATOLOGICALS/TOPICAL THERAPY	MISCELLANEOUS DERMATOLOGICALS	DERMATOLOGICALS/TOPICAL THERAPY	MISCELLANEOUS DERMATOLOGICALS	0						OR	METHOXSALEN	W	00187065042	Enhanced
213502	62856000122	PANRETIN	GEL	0.1%	3	5	0			0		0	DERMATOLOGICALS/TOPICAL THERAPY	MISCELLANEOUS DERMATOLOGICALS	DERMATOLOGICALS/TOPICAL THERAPY	MISCELLANEOUS DERMATOLOGICALS	0						EX	ALITRETINOIN	W	62856000122	Enhanced
582926	00574061105	PODOFILOX	SOLN	0.5%	1	2	0			0		0	DERMATOLOGICALS/TOPICAL THERAPY	MISCELLANEOUS DERMATOLOGICALS	DERMATOLOGICALS/TOPICAL THERAPY	MISCELLANEOUS DERMATOLOGICALS	0						EX	PODOFILOX	Y	00574061105	Enhanced
284521	00469520111	PROTOPIC	OINT	0.03%	2	5	0			1	TOPICAL IMMUNOMODULATORS	0	DERMATOLOGICALS/TOPICAL THERAPY	MISCELLANEOUS DERMATOLOGICALS	DERMATOLOGICALS/TOPICAL THERAPY	MISCELLANEOUS DERMATOLOGICALS	0						EX	TACROLIMUS	W	00469520111	Enhanced
284520	00469520260	PROTOPIC	OINT	0.1%	2	5	0			1	TOPICAL IMMUNOMODULATORS	0	DERMATOLOGICALS/TOPICAL THERAPY	MISCELLANEOUS DERMATOLOGICALS	DERMATOLOGICALS/TOPICAL THERAPY	MISCELLANEOUS DERMATOLOGICALS	0						EX	TACROLIMUS	W	00469520260	Enhanced
1000093	00064360045	PRUDOXIN	CREA	5%	1	2	0			0		0	DERMATOLOGICALS/TOPICAL THERAPY	MISCELLANEOUS DERMATOLOGICALS	DERMATOLOGICALS/TOPICAL THERAPY	MISCELLANEOUS DERMATOLOGICALS	0						EX	DOXEPIN HYDROCHLORIDE	Y	00064360045	Enhanced
855644	10337060301	SOLARAZE	GEL	3%	2	5	0			1	SOLARAZE	0	DERMATOLOGICALS/TOPICAL THERAPY	MISCELLANEOUS DERMATOLOGICALS	DERMATOLOGICALS/TOPICAL THERAPY	MISCELLANEOUS DERMATOLOGICALS	0						TD	DICLOFENAC SODIUM	W	10337060301	Enhanced
352083	64067021601	UVADEX	SOLN	20MCG/ML	2	5	0			0		0	DERMATOLOGICALS/TOPICAL THERAPY	MISCELLANEOUS DERMATOLOGICALS	DERMATOLOGICALS/TOPICAL THERAPY	MISCELLANEOUS DERMATOLOGICALS	0						IJ	METHOXSALEN	W	64067021601	Enhanced
967021	99207027028	ZYCLARA	CREA	3.75%	2	5	0			0		0	DERMATOLOGICALS/TOPICAL THERAPY	MISCELLANEOUS DERMATOLOGICALS	DERMATOLOGICALS/TOPICAL THERAPY	MISCELLANEOUS DERMATOLOGICALS	0						EX	IMIQUIMOD	W	99207027028	Enhanced
313852	00168042446	ADAPALENE	CREA	0.1%	1	2	0			1	TOPICAL RETINOID PRODUCTS	0	DERMATOLOGICALS/TOPICAL THERAPY	THERAPY FOR ACNE	DERMATOLOGICALS/TOPICAL THERAPY	THERAPY FOR ACNE	0						EX	ADAPALENE	Y	00168042446	Enhanced
307731	00093630195	ADAPALENE	GEL	0.1%	1	2	0			1	TOPICAL RETINOID PRODUCTS	0	DERMATOLOGICALS/TOPICAL THERAPY	THERAPY FOR ACNE	DERMATOLOGICALS/TOPICAL THERAPY	THERAPY FOR ACNE	0						EX	ADAPALENE	Y	00093630195	Enhanced
404058	00378661193	AMNESTEEM	CAPS	10MG	1	2	0			0		0	DERMATOLOGICALS/TOPICAL THERAPY	THERAPY FOR ACNE	DERMATOLOGICALS/TOPICAL THERAPY	THERAPY FOR ACNE	0						OR	ISOTRETINOIN	Y	00378661193	Enhanced
404061	00378661293	AMNESTEEM	CAPS	20MG	1	2	0			0		0	DERMATOLOGICALS/TOPICAL THERAPY	THERAPY FOR ACNE	DERMATOLOGICALS/TOPICAL THERAPY	THERAPY FOR ACNE	0						OR	ISOTRETINOIN	Y	00378661293	Enhanced
404064	00378661493	AMNESTEEM	CAPS	40MG	1	2	0			0		0	DERMATOLOGICALS/TOPICAL THERAPY	THERAPY FOR ACNE	DERMATOLOGICALS/TOPICAL THERAPY	THERAPY FOR ACNE	0						OR	ISOTRETINOIN	Y	00378661493	Enhanced
208327	00378614145	AVITA	CREA	0.025%	1	2	0			1	TOPICAL RETINOID PRODUCTS	0	DERMATOLOGICALS/TOPICAL THERAPY	THERAPY FOR ACNE	DERMATOLOGICALS/TOPICAL THERAPY	THERAPY FOR ACNE	0						EX	TRETINOIN	Y	00378614145	Enhanced
404059	00555105456	CLARAVIS	CAPS	10MG	3	2	0			0		0	DERMATOLOGICALS/TOPICAL THERAPY	THERAPY FOR ACNE	DERMATOLOGICALS/TOPICAL THERAPY	THERAPY FOR ACNE	0						OR	ISOTRETINOIN	Y	00555105456	Enhanced
404062	00555105556	CLARAVIS	CAPS	20MG	3	2	0			0		0	DERMATOLOGICALS/TOPICAL THERAPY	THERAPY FOR ACNE	DERMATOLOGICALS/TOPICAL THERAPY	THERAPY FOR ACNE	0						OR	ISOTRETINOIN	Y	00555105556	Enhanced
643488	00555105686	CLARAVIS	CAPS	30MG	3	2	0			0		0	DERMATOLOGICALS/TOPICAL THERAPY	THERAPY FOR ACNE	DERMATOLOGICALS/TOPICAL THERAPY	THERAPY FOR ACNE	0						OR	ISOTRETINOIN	Y	00555105686	Enhanced
404065	00555105756	CLARAVIS	CAPS	40MG	3	2	0			0		0	DERMATOLOGICALS/TOPICAL THERAPY	THERAPY FOR ACNE	DERMATOLOGICALS/TOPICAL THERAPY	THERAPY FOR ACNE	0						OR	ISOTRETINOIN	Y	00555105756	Enhanced
358917	00378868854	CLINDAMYCIN/BENZOYL PEROXIDE	GEL	5%; 1%	1	2	0			0		0	DERMATOLOGICALS/TOPICAL THERAPY	THERAPY FOR ACNE	DERMATOLOGICALS/TOPICAL THERAPY	THERAPY FOR ACNE	0						EX	BENZOYL PEROXIDE; CLINDAMYCIN PHOSPHATE	Y	00378868854	Enhanced
477451	45802066033	CLINDAMYCIN PHOSPHATE	FOAM	1%	1	2	0			0		0	DERMATOLOGICALS/TOPICAL THERAPY	THERAPY FOR ACNE	DERMATOLOGICALS/TOPICAL THERAPY	THERAPY FOR ACNE	0						EX	CLINDAMYCIN PHOSPHATE	Y	45802066033	Enhanced
309332	00168020230	CLINDAMYCIN PHOSPHATE	GEL	1%	1	2	0			0		0	DERMATOLOGICALS/TOPICAL THERAPY	THERAPY FOR ACNE	DERMATOLOGICALS/TOPICAL THERAPY	THERAPY FOR ACNE	0						EX	CLINDAMYCIN PHOSPHATE	Y	00168020230	Enhanced
197519	00168020360	CLINDAMYCIN PHOSPHATE	LOTN	1%	1	2	0			0		0	DERMATOLOGICALS/TOPICAL THERAPY	THERAPY FOR ACNE	DERMATOLOGICALS/TOPICAL THERAPY	THERAPY FOR ACNE	0						EX	CLINDAMYCIN PHOSPHATE	Y	00168020360	Enhanced
797274	45802026337	CLINDAMYCIN PHOSPHATE	SWAB	1%	1	2	0			0		0	DERMATOLOGICALS/TOPICAL THERAPY	THERAPY FOR ACNE	DERMATOLOGICALS/TOPICAL THERAPY	THERAPY FOR ACNE	0						EX	CLINDAMYCIN PHOSPHATE	Y	45802026337	Enhanced
309333	00168020160	CLINDAMYCIN PHOSPHATE	SOLN	1%	1	2	0			0		0	DERMATOLOGICALS/TOPICAL THERAPY	THERAPY FOR ACNE	DERMATOLOGICALS/TOPICAL THERAPY	THERAPY FOR ACNE	0						EX	CLINDAMYCIN PHOSPHATE	Y	00168020160	Enhanced
798133	45802096272	ERY	PADS	2%	1	2	0			0		0	DERMATOLOGICALS/TOPICAL THERAPY	THERAPY FOR ACNE	DERMATOLOGICALS/TOPICAL THERAPY	THERAPY FOR ACNE	0						EX	ERYTHROMYCIN	Y	45802096272	Enhanced
244374	00781705449	ERYTHROMYCIN/BENZOYL PEROXIDE	GEL	5%; 3%	1	2	0			0		0	DERMATOLOGICALS/TOPICAL THERAPY	THERAPY FOR ACNE	DERMATOLOGICALS/TOPICAL THERAPY	THERAPY FOR ACNE	0						EX	BENZOYL PEROXIDE; ERYTHROMYCIN	Y	00781705449	Enhanced
310152	45802096596	ERYTHROMYCIN	GEL	2%	1	2	0			0		0	DERMATOLOGICALS/TOPICAL THERAPY	THERAPY FOR ACNE	DERMATOLOGICALS/TOPICAL THERAPY	THERAPY FOR ACNE	0						EX	ERYTHROMYCIN	Y	45802096596	Enhanced
318202	16432067160	ERYTHROMYCIN	SOLN	2%	1	2	0			0		0	DERMATOLOGICALS/TOPICAL THERAPY	THERAPY FOR ACNE	DERMATOLOGICALS/TOPICAL THERAPY	THERAPY FOR ACNE	0						EX	ERYTHROMYCIN	Y	45802003846	Enhanced
311678	00168032346	METRONIDAZOLE	CREA	0.75%	1	2	0			0		0	DERMATOLOGICALS/TOPICAL THERAPY	THERAPY FOR ACNE	DERMATOLOGICALS/TOPICAL THERAPY	THERAPY FOR ACNE	0						EX	METRONIDAZOLE	Y	00168032346	Enhanced
311679	00168027545	METRONIDAZOLE	GEL	0.75%	1	2	0			0		0	DERMATOLOGICALS/TOPICAL THERAPY	THERAPY FOR ACNE	DERMATOLOGICALS/TOPICAL THERAPY	THERAPY FOR ACNE	0						EX	METRONIDAZOLE	Y	00168027545	Enhanced
242736	00168038360	METRONIDAZOLE	LOTN	0.75%	1	2	0			0		0	DERMATOLOGICALS/TOPICAL THERAPY	THERAPY FOR ACNE	DERMATOLOGICALS/TOPICAL THERAPY	THERAPY FOR ACNE	0						EX	METRONIDAZOLE	Y	00168038360	Enhanced
284496	00023915560	TAZORAC	CREA	0.05%	2	5	0			1	TAZORAC	0	DERMATOLOGICALS/TOPICAL THERAPY	THERAPY FOR ACNE	DERMATOLOGICALS/TOPICAL THERAPY	THERAPY FOR ACNE	0						EX	TAZAROTENE	W	00023915560	Enhanced
284497	00023915660	TAZORAC	CREA	0.1%	2	5	0			1	TAZORAC	0	DERMATOLOGICALS/TOPICAL THERAPY	THERAPY FOR ACNE	DERMATOLOGICALS/TOPICAL THERAPY	THERAPY FOR ACNE	0						EX	TAZAROTENE	W	00023915660	Enhanced
212437	00023833510	TAZORAC	GEL	0.05%	2	5	0			1	TAZORAC	0	DERMATOLOGICALS/TOPICAL THERAPY	THERAPY FOR ACNE	DERMATOLOGICALS/TOPICAL THERAPY	THERAPY FOR ACNE	0						EX	TAZAROTENE	W	00023833510	Enhanced
212438	00023004210	TAZORAC	GEL	0.1%	2	5	0			1	TAZORAC	0	DERMATOLOGICALS/TOPICAL THERAPY	THERAPY FOR ACNE	DERMATOLOGICALS/TOPICAL THERAPY	THERAPY FOR ACNE	0						EX	TAZAROTENE	W	00023004210	Enhanced
106302	43478024345	TRETINOIN	CREA	0.025%	1	2	0			1	TOPICAL RETINOID PRODUCTS	0	DERMATOLOGICALS/TOPICAL THERAPY	THERAPY FOR ACNE	DERMATOLOGICALS/TOPICAL THERAPY	THERAPY FOR ACNE	0						EX	TRETINOIN	Y	43478024345	Enhanced
106303	43478024220	TRETINOIN	CREA	0.05%	1	2	0			1	TOPICAL RETINOID PRODUCTS	0	DERMATOLOGICALS/TOPICAL THERAPY	THERAPY FOR ACNE	DERMATOLOGICALS/TOPICAL THERAPY	THERAPY FOR ACNE	0						EX	TRETINOIN	Y	43478024220	Enhanced
198300	43478024145	TRETINOIN	CREA	0.1%	1	2	0			1	TOPICAL RETINOID PRODUCTS	0	DERMATOLOGICALS/TOPICAL THERAPY	THERAPY FOR ACNE	DERMATOLOGICALS/TOPICAL THERAPY	THERAPY FOR ACNE	0						EX	TRETINOIN	Y	43478024145	Enhanced
313450	43478024545	TRETINOIN	GEL	0.01%	1	2	0			1	TOPICAL RETINOID PRODUCTS	0	DERMATOLOGICALS/TOPICAL THERAPY	THERAPY FOR ACNE	DERMATOLOGICALS/TOPICAL THERAPY	THERAPY FOR ACNE	0						EX	TRETINOIN	Y	43478024545	Enhanced
313451	43478024445	TRETINOIN	GEL	0.025%	1	2	0			1	TOPICAL RETINOID PRODUCTS	0	DERMATOLOGICALS/TOPICAL THERAPY	THERAPY FOR ACNE	DERMATOLOGICALS/TOPICAL THERAPY	THERAPY FOR ACNE	0						EX	TRETINOIN	Y	43478024445	Enhanced
197877	00781705803	LIDOCAINE/PRILOCAINE	CREA	2.5%; 2.5%	1	2	0			0		0	DERMATOLOGICALS/TOPICAL THERAPY	TOPICAL ANESTHETICS	DERMATOLOGICALS/TOPICAL THERAPY	TOPICAL ANESTHETICS	0						EX	LIDOCAINE; PRILOCAINE	Y	00781705803	Enhanced
1011852	17478071130	LIDOCAINE HCL JELLY	GEL	2%	1	2	0			0		0	DERMATOLOGICALS/TOPICAL THERAPY	TOPICAL ANESTHETICS	DERMATOLOGICALS/TOPICAL THERAPY	TOPICAL ANESTHETICS	0						EX	LIDOCAINE HYDROCHLORIDE	Y	17478071130	Enhanced
1012064	76329301105	LIDOCAINE HCL JELLY	GEL	2%	1	2	0			0		0	DERMATOLOGICALS/TOPICAL THERAPY	TOPICAL ANESTHETICS	DERMATOLOGICALS/TOPICAL THERAPY	TOPICAL ANESTHETICS	0						EX	LIDOCAINE HYDROCHLORIDE	Y	76329301105	Enhanced
1012060	76329301305	LIDOCAINE HCL JELLY	GEL	2%	1	2	0			0		0	DERMATOLOGICALS/TOPICAL THERAPY	TOPICAL ANESTHETICS	DERMATOLOGICALS/TOPICAL THERAPY	TOPICAL ANESTHETICS	0						EX	LIDOCAINE HYDROCHLORIDE	Y	76329301105	Enhanced
1010900	00409427801	LIDOCAINE HCL	SOLN	0.5%	1	2	0			0		0	DERMATOLOGICALS/TOPICAL THERAPY	TOPICAL ANESTHETICS	DERMATOLOGICALS/TOPICAL THERAPY	TOPICAL ANESTHETICS	0						IJ	LIDOCAINE HYDROCHLORIDE	Y	00409427501	Enhanced
1010033	00409427001	LIDOCAINE HCL	SOLN	1%	1	2	0			0		0	DERMATOLOGICALS/TOPICAL THERAPY	TOPICAL ANESTHETICS	DERMATOLOGICALS/TOPICAL THERAPY	TOPICAL ANESTHETICS	0						IJ	LIDOCAINE HYDROCHLORIDE	Y	00409427001	Enhanced
1010296	00168020437	LIDOCAINE	OINT	5%	1	2	0			0		0	DERMATOLOGICALS/TOPICAL THERAPY	TOPICAL ANESTHETICS	DERMATOLOGICALS/TOPICAL THERAPY	TOPICAL ANESTHETICS	0						EX	LIDOCAINE HYDROCHLORIDE	Y	00168020437	Enhanced
1010739	00603139364	LIDOCAINE VISCOUS	SOLN	2%	1	2	0			0		0	DERMATOLOGICALS/TOPICAL THERAPY	TOPICAL ANESTHETICS	DERMATOLOGICALS/TOPICAL THERAPY	TOPICAL ANESTHETICS	0						MT	LIDOCAINE HYDROCHLORIDE	Y	00603139364	Enhanced
1010878	00603139447	LIDOCAINE HCL	SOLN	4%	1	2	0			0		0	DERMATOLOGICALS/TOPICAL THERAPY	TOPICAL ANESTHETICS	DERMATOLOGICALS/TOPICAL THERAPY	TOPICAL ANESTHETICS	0						EX	LIDOCAINE HYDROCHLORIDE	Y	00603139447	Enhanced
1011705	63481068706	LIDODERM	PTCH	5%	2	5	0			1	LIDODERM	0	DERMATOLOGICALS/TOPICAL THERAPY	TOPICAL ANESTHETICS	DERMATOLOGICALS/TOPICAL THERAPY	TOPICAL ANESTHETICS	0						EX	LIDOCAINE	W	63481068706	Enhanced
197735	45802009635	GENTAMICIN SULFATE	CREA	0.1%	1	2	0			0		0	DERMATOLOGICALS/TOPICAL THERAPY	TOPICAL ANTIBACTERIALS	DERMATOLOGICALS/TOPICAL THERAPY	TOPICAL ANTIBACTERIALS	0						EX	GENTAMICIN SULFATE	Y	45802009635	Enhanced
310465	45802004635	GENTAMICIN SULFATE	OINT	0.1%	1	2	0			0		0	DERMATOLOGICALS/TOPICAL THERAPY	TOPICAL ANTIBACTERIALS	DERMATOLOGICALS/TOPICAL THERAPY	TOPICAL ANTIBACTERIALS	0						EX	GENTAMICIN SULFATE	Y	45802004635	Enhanced
251575	49884090252	MAFENIDE ACETATE	PACK	5%	1	2	0			0		0	DERMATOLOGICALS/TOPICAL THERAPY	TOPICAL ANTIBACTERIALS	DERMATOLOGICALS/TOPICAL THERAPY	TOPICAL ANTIBACTERIALS	0						EX	MAFENIDE ACETATE	Y	49884090252	Enhanced
311877	68462056435	MUPIROCIN	CREA	2%	1	2	0			0		0	DERMATOLOGICALS/TOPICAL THERAPY	TOPICAL ANTIBACTERIALS	DERMATOLOGICALS/TOPICAL THERAPY	TOPICAL ANTIBACTERIALS	0						EX	MUPIROCIN CALCIUM	Y	68462056435	Enhanced
106346	00168035222	MUPIROCIN	OINT	2%	1	2	0			0		0	DERMATOLOGICALS/TOPICAL THERAPY	TOPICAL ANTIBACTERIALS	DERMATOLOGICALS/TOPICAL THERAPY	TOPICAL ANTIBACTERIALS	0						EX	MUPIROCIN	Y	00168035222	Enhanced
1006688	00168038204	SULFACETAMIDE SODIUM	SUSP	10%	1	2	0			0		0	DERMATOLOGICALS/TOPICAL THERAPY	TOPICAL ANTIBACTERIALS	DERMATOLOGICALS/TOPICAL THERAPY	TOPICAL ANTIBACTERIALS	0						EX	SULFACETAMIDE SODIUM	Y	00168038204	Enhanced
201185	51079062382	SULFAMYLON	CREA	85MG/GM	2	5	0			0		0	DERMATOLOGICALS/TOPICAL THERAPY	TOPICAL ANTIBACTERIALS	DERMATOLOGICALS/TOPICAL THERAPY	TOPICAL ANTIBACTERIALS	0						EX	MAFENIDE ACETATE	W	51079062382	Enhanced
309289	45802013835	CICLOPIROX OLAMINE	CREA	0.77%	1	2	0			0		0	DERMATOLOGICALS/TOPICAL THERAPY	TOPICAL ANTIFUNGALS	DERMATOLOGICALS/TOPICAL THERAPY	TOPICAL ANTIFUNGALS	0						EX	CICLOPIROX OLAMINE	Y	45802013835	Enhanced
313941	00168040730	CICLOPIROX	GEL	0.77%	1	2	0			0		0	DERMATOLOGICALS/TOPICAL THERAPY	TOPICAL ANTIFUNGALS	DERMATOLOGICALS/TOPICAL THERAPY	TOPICAL ANTIFUNGALS	0						EX	CICLOPIROX	Y	00168040730	Enhanced
250344	45802040109	CICLOPIROX	SHAM	1%	1	2	0			0		0	DERMATOLOGICALS/TOPICAL THERAPY	TOPICAL ANTIFUNGALS	DERMATOLOGICALS/TOPICAL THERAPY	TOPICAL ANTIFUNGALS	0						EX	CICLOPIROX	Y	00574205912	Enhanced
309291	67405045066	CICLOPIROX NAIL LACQUER	SOLN	8%	1	2	0			0		0	DERMATOLOGICALS/TOPICAL THERAPY	TOPICAL ANTIFUNGALS	DERMATOLOGICALS/TOPICAL THERAPY	TOPICAL ANTIFUNGALS	0						EX	CICLOPIROX	Y	67405045066	Enhanced
309290	00168031460	CICLOPIROX	SUSP	0.77%	1	2	0			0		0	DERMATOLOGICALS/TOPICAL THERAPY	TOPICAL ANTIFUNGALS	DERMATOLOGICALS/TOPICAL THERAPY	TOPICAL ANTIFUNGALS	0						EX	CICLOPIROX OLAMINE	Y	00168031460	Enhanced
308714	00168025846	CLOTRIMAZOLE/BETAMETHASONE DIPROPIONATE	CREA	0.05%; 1%	1	2	0			0		0	DERMATOLOGICALS/TOPICAL THERAPY	TOPICAL ANTIFUNGALS	DERMATOLOGICALS/TOPICAL THERAPY	TOPICAL ANTIFUNGALS	0						EX	BETAMETHASONE DIPROPIONATE;	Y	00168025846	Enhanced
308715	00168037030	CLOTRIMAZOLE/BETAMETHASONE DIPROPIONATE	LOTN	0.05%; 1%	1	2	0			0		0	DERMATOLOGICALS/TOPICAL THERAPY	TOPICAL ANTIFUNGALS	DERMATOLOGICALS/TOPICAL THERAPY	TOPICAL ANTIFUNGALS	0						EX	BETAMETHASONE DIPROPIONATE;	Y	00168037030	Enhanced
309367	51672127507	CLOTRIMAZOLE	CREA	1%	1	2	0			0		0	DERMATOLOGICALS/TOPICAL THERAPY	TOPICAL ANTIFUNGALS	DERMATOLOGICALS/TOPICAL THERAPY	TOPICAL ANTIFUNGALS	0						EX	CLOTRIMAZOLE	Y	51672127507	Enhanced
309370	00093024831	CLOTRIMAZOLE	SOLN	1%	1	2	0			0		0	DERMATOLOGICALS/TOPICAL THERAPY	TOPICAL ANTIFUNGALS	DERMATOLOGICALS/TOPICAL THERAPY	TOPICAL ANTIFUNGALS	0						EX	CLOTRIMAZOLE	Y	00093024831	Enhanced
857366	45802046653	ECONAZOLE NITRATE	CREA	1%	1	2	0			0		0	DERMATOLOGICALS/TOPICAL THERAPY	TOPICAL ANTIFUNGALS	DERMATOLOGICALS/TOPICAL THERAPY	TOPICAL ANTIFUNGALS	0						EX	ECONAZOLE NITRATE	Y	45802046653	Enhanced
728550	45802053233	KETOCONAZOLE	FOAM	2%	1	2	0			0		0	DERMATOLOGICALS/TOPICAL THERAPY	TOPICAL ANTIFUNGALS	DERMATOLOGICALS/TOPICAL THERAPY	TOPICAL ANTIFUNGALS	0						EX	KETOCONAZOLE	Y	45802053233	Enhanced
203088	00093084030	KETOCONAZOLE	CREA	2%	1	2	0			0		0	DERMATOLOGICALS/TOPICAL THERAPY	TOPICAL ANTIFUNGALS	DERMATOLOGICALS/TOPICAL THERAPY	TOPICAL ANTIFUNGALS	0						EX	KETOCONAZOLE	Y	00093084030	Enhanced
106336	00781709004	KETOCONAZOLE	SHAM	2%	1	2	0			0		0	DERMATOLOGICALS/TOPICAL THERAPY	TOPICAL ANTIFUNGALS	DERMATOLOGICALS/TOPICAL THERAPY	TOPICAL ANTIFUNGALS	0						EX	KETOCONAZOLE	Y	00781709004	Enhanced
1300272	43538053110	KETODAN KIT	KIT	2%; 0: 0	1	2	0			0		0	DERMATOLOGICALS/TOPICAL THERAPY	TOPICAL ANTIFUNGALS	DERMATOLOGICALS/TOPICAL THERAPY	TOPICAL ANTIFUNGALS	0						EX	KETOCONAZOLE; SALICYLIC ACID; SODIUM HYALURONATE	Y	43538053110	Enhanced
584414	00832046530	NYAMYC	POWD	100000UNIT/GM	1	2	0			0		0	DERMATOLOGICALS/TOPICAL THERAPY	TOPICAL ANTIFUNGALS	DERMATOLOGICALS/TOPICAL THERAPY	TOPICAL ANTIFUNGALS	0						EX	NYSTATIN	Y	00832046530	Enhanced
1053753	51672126302	NYSTATIN/TRIAMCINOLONE	CREA	100000UNIT/GM; 0.1%	1	2	0			0		0	DERMATOLOGICALS/TOPICAL THERAPY	TOPICAL ANTIFUNGALS	DERMATOLOGICALS/TOPICAL THERAPY	TOPICAL ANTIFUNGALS	0						EX	NYSTATIN; TRIAMCINOLONE ACETONIDE	Y	51672126302	Enhanced
1053697	51672127202	NYSTATIN/TRIAMCINOLONE	OINT	100000UNIT/GM; 0.1%	1	2	0			0		0	DERMATOLOGICALS/TOPICAL THERAPY	TOPICAL ANTIFUNGALS	DERMATOLOGICALS/TOPICAL THERAPY	TOPICAL ANTIFUNGALS	0						EX	NYSTATIN; TRIAMCINOLONE ACETONIDE	Y	51672127202	Enhanced
543546	51672128902	NYSTATIN	CREA	100000UNIT/GM	1	2	0			0		0	DERMATOLOGICALS/TOPICAL THERAPY	TOPICAL ANTIFUNGALS	DERMATOLOGICALS/TOPICAL THERAPY	TOPICAL ANTIFUNGALS	0						EX	NYST

884308	45802004811	NYSTATIN	OINT	100000UNIT/GM	1	2	0			0		0	DERMATOLOGICALS;TOPICAL THERAPY	TOPICAL ANTIFUNGALS	DERMATOLOGICALS;TOPICAL THERAPY	TOPICAL ANTIFUNGALS	0						EX	NYSTATIN	Y	45802004811	Enhanced
646456	68308015230	NYSTATIN	POWD	100000UNIT/GM	1	2	0			0		0	DERMATOLOGICALS;TOPICAL THERAPY	TOPICAL ANTIFUNGALS	DERMATOLOGICALS;TOPICAL THERAPY	TOPICAL ANTIFUNGALS	0						EX	NYSTATIN	Y	68308015230	Enhanced
261178	00574200830	NYSTOP	POWD	100000UNIT/GM	1	2	0			0		0	DERMATOLOGICALS;TOPICAL THERAPY	TOPICAL ANTIFUNGALS	DERMATOLOGICALS;TOPICAL THERAPY	TOPICAL ANTIFUNGALS	0						EX	NYSTATIN	Y	00574200830	Enhanced
261179	00884039602	PEDI-DRI	POWD	100000UNIT/GM	1	2	0			0		0	DERMATOLOGICALS;TOPICAL THERAPY	TOPICAL ANTIFUNGALS	DERMATOLOGICALS;TOPICAL THERAPY	TOPICAL ANTIFUNGALS	0						EX	NYSTATIN	Y	00884039602	Enhanced
211343	50816062405	DENAVIR	CREA	1%	2	5	0			0		0	DERMATOLOGICALS;TOPICAL THERAPY	TOPICAL ANTIVIRALS	DERMATOLOGICALS;TOPICAL THERAPY	TOPICAL ANTIVIRALS	0						EX	PENCICLOVIR	W	00067602415	Enhanced
998426	00187510401	XERESE	CREA	5%; 1%	2	5	0			0		0	DERMATOLOGICALS;TOPICAL THERAPY	TOPICAL ANTIVIRALS	DERMATOLOGICALS;TOPICAL THERAPY	TOPICAL ANTIVIRALS	0						EX	ACYCLOVIR; HYDROCORTISONE	W	00187510401	Enhanced
825321	00187099445	ZOVIRAX	CREA	5%	2	5	0			0		0	DERMATOLOGICALS;TOPICAL THERAPY	TOPICAL ANTIVIRALS	DERMATOLOGICALS;TOPICAL THERAPY	TOPICAL ANTIVIRALS	0						EX	ACYCLOVIR	W	00187099445	Enhanced
209977	00187099395	ZOVIRAX	OINT	5%	2	5	0			0		0	DERMATOLOGICALS;TOPICAL THERAPY	TOPICAL ANTIVIRALS	DERMATOLOGICALS;TOPICAL THERAPY	TOPICAL ANTIVIRALS	0						EX	ACYCLOVIR	W	00187099395	Enhanced
206347	00316012601	ALA CORT	CREA	1%	1	2	0			0		0	DERMATOLOGICALS;TOPICAL THERAPY	TOPICAL CORTICOSTEROIDS	DERMATOLOGICALS;TOPICAL THERAPY	TOPICAL CORTICOSTEROIDS	0						EX	HYDROCORTISONE	Y	00316012601	Enhanced
855474	00168026345	ALCLOMETASONE DIPROPIONATE	CREA	0.05%	1	2	0			0		0	DERMATOLOGICALS;TOPICAL THERAPY	TOPICAL CORTICOSTEROIDS	DERMATOLOGICALS;TOPICAL THERAPY	TOPICAL CORTICOSTEROIDS	0						EX	ALCLOMETASONE DIPROPIONATE	Y	00168026345	Enhanced
855480	51672131603	ALCLOMETASONE DIPROPIONATE	OINT	0.05%	1	2	0			0		0	DERMATOLOGICALS;TOPICAL THERAPY	TOPICAL CORTICOSTEROIDS	DERMATOLOGICALS;TOPICAL THERAPY	TOPICAL CORTICOSTEROIDS	0						EX	ALCLOMETASONE DIPROPIONATE	Y	51672131603	Enhanced
197327	00168027830	AMCINONIDE	CREA	0.1%	1	2	0			0		0	DERMATOLOGICALS;TOPICAL THERAPY	TOPICAL CORTICOSTEROIDS	DERMATOLOGICALS;TOPICAL THERAPY	TOPICAL CORTICOSTEROIDS	0						EX	AMCINONIDE	Y	00168027830	Enhanced
199041	00168028060	AMCINONIDE	LOTN	0.1%	1	2	0			0		0	DERMATOLOGICALS;TOPICAL THERAPY	TOPICAL CORTICOSTEROIDS	DERMATOLOGICALS;TOPICAL THERAPY	TOPICAL CORTICOSTEROIDS	0						EX	AMCINONIDE	Y	00168028060	Enhanced
197328	00168027960	AMCINONIDE	OINT	0.1%	1	2	0			0		0	DERMATOLOGICALS;TOPICAL THERAPY	TOPICAL CORTICOSTEROIDS	DERMATOLOGICALS;TOPICAL THERAPY	TOPICAL CORTICOSTEROIDS	0						EX	AMCINONIDE	Y	00168027960	Enhanced
848176	00781707450	AUGMENTED BETAMETHASONE DIPROPIONATE	CREA	0.05%	1	2	0			0		0	DERMATOLOGICALS;TOPICAL THERAPY	TOPICAL CORTICOSTEROIDS	DERMATOLOGICALS;TOPICAL THERAPY	TOPICAL CORTICOSTEROIDS	0						EX	AUGMENTED BETAMETHASONE DIPROPIONATE	Y	00781707450	Enhanced
848208	51672130903	AUGMENTED BETAMETHASONE DIPROPIONATE	GEL	0.05%	1	2	0			0		0	DERMATOLOGICALS;TOPICAL THERAPY	TOPICAL CORTICOSTEROIDS	DERMATOLOGICALS;TOPICAL THERAPY	TOPICAL CORTICOSTEROIDS	0						EX	AUGMENTED BETAMETHASONE DIPROPIONATE	Y	51672130903	Enhanced
848178	00168026760	AUGMENTED BETAMETHASONE DIPROPIONATE	LOTN	0.05%	1	2	0			0		0	DERMATOLOGICALS;TOPICAL THERAPY	TOPICAL CORTICOSTEROIDS	DERMATOLOGICALS;TOPICAL THERAPY	TOPICAL CORTICOSTEROIDS	0						EX	AUGMENTED BETAMETHASONE DIPROPIONATE	Y	00168026760	Enhanced
848180	51672131703	AUGMENTED BETAMETHASONE DIPROPIONATE	OINT	0.05%	1	2	0			0		0	DERMATOLOGICALS;TOPICAL THERAPY	TOPICAL CORTICOSTEROIDS	DERMATOLOGICALS;TOPICAL THERAPY	TOPICAL CORTICOSTEROIDS	0						EX	AUGMENTED BETAMETHASONE DIPROPIONATE	Y	51672131703	Enhanced
238920	51672127406	BETAMETHASONE DIPROPIONATE	CREA	0.05%	1	2	0			0		0	DERMATOLOGICALS;TOPICAL THERAPY	TOPICAL CORTICOSTEROIDS	DERMATOLOGICALS;TOPICAL THERAPY	TOPICAL CORTICOSTEROIDS	0						EX	BETAMETHASONE DIPROPIONATE	Y	51672127406	Enhanced
240209	00168005760	BETAMETHASONE DIPROPIONATE	LOTN	0.05%	1	2	0			0		0	DERMATOLOGICALS;TOPICAL THERAPY	TOPICAL CORTICOSTEROIDS	DERMATOLOGICALS;TOPICAL THERAPY	TOPICAL CORTICOSTEROIDS	0						EX	BETAMETHASONE DIPROPIONATE	Y	00168005760	Enhanced
197405	00472038145	BETAMETHASONE DIPROPIONATE	OINT	0.05%	1	2	0			0		0	DERMATOLOGICALS;TOPICAL THERAPY	TOPICAL CORTICOSTEROIDS	DERMATOLOGICALS;TOPICAL THERAPY	TOPICAL CORTICOSTEROIDS	0						EX	BETAMETHASONE DIPROPIONATE	Y	00168005646	Enhanced
1244634	45802005302	BETAMETHASONE VALERATE	FOAM	0.12%	1	2	0			0		0	DERMATOLOGICALS;TOPICAL THERAPY	TOPICAL CORTICOSTEROIDS	DERMATOLOGICALS;TOPICAL THERAPY	TOPICAL CORTICOSTEROIDS	0						EX	BETAMETHASONE VALERATE	Y	45802005302	Enhanced
197407	51672126906	BETAMETHASONE VALERATE	CREA	0.1%	1	2	0			0		0	DERMATOLOGICALS;TOPICAL THERAPY	TOPICAL CORTICOSTEROIDS	DERMATOLOGICALS;TOPICAL THERAPY	TOPICAL CORTICOSTEROIDS	0						EX	BETAMETHASONE VALERATE	Y	51672126906	Enhanced
197408	54879000460	BETAMETHASONE VALERATE	LOTN	0.1%	1	2	0			0		0	DERMATOLOGICALS;TOPICAL THERAPY	TOPICAL CORTICOSTEROIDS	DERMATOLOGICALS;TOPICAL THERAPY	TOPICAL CORTICOSTEROIDS	0						EX	BETAMETHASONE VALERATE	Y	54879000460	Enhanced
197409	00472037145	BETAMETHASONE VALERATE	OINT	0.1%	1	2	0			0		0	DERMATOLOGICALS;TOPICAL THERAPY	TOPICAL CORTICOSTEROIDS	DERMATOLOGICALS;TOPICAL THERAPY	TOPICAL CORTICOSTEROIDS	0						EX	BETAMETHASONE VALERATE	Y	00472037145	Enhanced
861353	45802043733	CLOBETASOL PROPIONATE	FOAM	0.05%	1	2	0			0		0	DERMATOLOGICALS;TOPICAL THERAPY	TOPICAL CORTICOSTEROIDS	DERMATOLOGICALS;TOPICAL THERAPY	TOPICAL CORTICOSTEROIDS	0						EX	CLOBETASOL PROPIONATE	Y	45802043733	Enhanced
861434	45802092596	CLOBETASOL PROPIONATE	GEL	0.05%	1	2	0			0		0	DERMATOLOGICALS;TOPICAL THERAPY	TOPICAL CORTICOSTEROIDS	DERMATOLOGICALS;TOPICAL THERAPY	TOPICAL CORTICOSTEROIDS	0						EX	CLOBETASOL PROPIONATE	Y	45802092596	Enhanced
861505	00472040494	CLOBETASOL PROPIONATE	LOTN	0.05%	1	2	0			0		0	DERMATOLOGICALS;TOPICAL THERAPY	TOPICAL CORTICOSTEROIDS	DERMATOLOGICALS;TOPICAL THERAPY	TOPICAL CORTICOSTEROIDS	0						EX	CLOBETASOL PROPIONATE	Y	00472040494	Enhanced
861448	51672125902	CLOBETASOL PROPIONATE	OINT	0.05%	1	2	0			0		0	DERMATOLOGICALS;TOPICAL THERAPY	TOPICAL CORTICOSTEROIDS	DERMATOLOGICALS;TOPICAL THERAPY	TOPICAL CORTICOSTEROIDS	0						EX	CLOBETASOL PROPIONATE	Y	51672125902	Enhanced
861490	00472040394	CLOBETASOL PROPIONATE	SHAM	0.05%	1	2	0			0		0	DERMATOLOGICALS;TOPICAL THERAPY	TOPICAL CORTICOSTEROIDS	DERMATOLOGICALS;TOPICAL THERAPY	TOPICAL CORTICOSTEROIDS	0						EX	CLOBETASOL PROPIONATE	Y	00472040394	Enhanced
861487	50383026650	CLOBETASOL PROPIONATE	SOLN	0.05%	1	2	0			0		0	DERMATOLOGICALS;TOPICAL THERAPY	TOPICAL CORTICOSTEROIDS	DERMATOLOGICALS;TOPICAL THERAPY	TOPICAL CORTICOSTEROIDS	0						EX	CLOBETASOL PROPIONATE	Y	50383026650	Enhanced
861495	51672129702	CLOBETASOL PROPIONATE E	CREA	0.05%	1	2	0			0		0	DERMATOLOGICALS;TOPICAL THERAPY	TOPICAL CORTICOSTEROIDS	DERMATOLOGICALS;TOPICAL THERAPY	TOPICAL CORTICOSTEROIDS	0						EX	CLOBETASOL PROPIONATE	Y	51672129702	Enhanced
349351	45802042237	DESONIDE	CREA	0.05%	1	2	0			0		0	DERMATOLOGICALS;TOPICAL THERAPY	TOPICAL CORTICOSTEROIDS	DERMATOLOGICALS;TOPICAL THERAPY	TOPICAL CORTICOSTEROIDS	0						EX	DESONIDE	Y	45802042237	Enhanced
197572	00472080304	DESONIDE	LOTN	0.05%	1	2	0			0		0	DERMATOLOGICALS;TOPICAL THERAPY	TOPICAL CORTICOSTEROIDS	DERMATOLOGICALS;TOPICAL THERAPY	TOPICAL CORTICOSTEROIDS	0						EX	DESONIDE	Y	00472080304	Enhanced
204135	51672128103	DESONIDE	OINT	0.05%	1	2	0			0		0	DERMATOLOGICALS;TOPICAL THERAPY	TOPICAL CORTICOSTEROIDS	DERMATOLOGICALS;TOPICAL THERAPY	TOPICAL CORTICOSTEROIDS	0						EX	DESONIDE	Y	51672128103	Enhanced
197573	51672127103	DESOXIMETASONE	CREA	0.05%	1	2	0			0		0	DERMATOLOGICALS;TOPICAL THERAPY	TOPICAL CORTICOSTEROIDS	DERMATOLOGICALS;TOPICAL THERAPY	TOPICAL CORTICOSTEROIDS	0						EX	DESOXIMETASONE	Y	51672127103	Enhanced
197574	51672127003	DESOXIMETASONE	CREA	0.25%	1	2	0			0		0	DERMATOLOGICALS;TOPICAL THERAPY	TOPICAL CORTICOSTEROIDS	DERMATOLOGICALS;TOPICAL THERAPY	TOPICAL CORTICOSTEROIDS	0						EX	DESOXIMETASONE	Y	51672127003	Enhanced
315059	51672126103	DESOXIMETASONE	GEL	0.05%	1	2	0			0		0	DERMATOLOGICALS;TOPICAL THERAPY	TOPICAL CORTICOSTEROIDS	DERMATOLOGICALS;TOPICAL THERAPY	TOPICAL CORTICOSTEROIDS	0						EX	DESOXIMETASONE	Y	51672126103	Enhanced
141850	51672135207	DESOXIMETASONE	OINT	0.05%	1	2	0			0		0	DERMATOLOGICALS;TOPICAL THERAPY	TOPICAL CORTICOSTEROIDS	DERMATOLOGICALS;TOPICAL THERAPY	TOPICAL CORTICOSTEROIDS	0						EX	DESOXIMETASONE	Y	51672135207	Enhanced
197575	51672126203	DESOXIMETASONE	OINT	0.25%	1	2	0			0		0	DERMATOLOGICALS;TOPICAL THERAPY	TOPICAL CORTICOSTEROIDS	DERMATOLOGICALS;TOPICAL THERAPY	TOPICAL CORTICOSTEROIDS	0						EX	DESOXIMETASONE	Y	51672126203	Enhanced
966577	51672129602	DIFLORASONE DIACETATE	CREA	0.05%	1	2	0			0		0	DERMATOLOGICALS;TOPICAL THERAPY	TOPICAL CORTICOSTEROIDS	DERMATOLOGICALS;TOPICAL THERAPY	TOPICAL CORTICOSTEROIDS	0						EX	DIFLORASONE DIACETATE	Y	51672129602	Enhanced
966607	51672129502	DIFLORASONE DIACETATE	OINT	0.05%	1	2	0			0		0	DERMATOLOGICALS;TOPICAL THERAPY	TOPICAL CORTICOSTEROIDS	DERMATOLOGICALS;TOPICAL THERAPY	TOPICAL CORTICOSTEROIDS	0						EX	DIFLORASONE DIACETATE	Y	51672129502	Enhanced
1191302	00168005860	FLUOCINOLONE ACETONIDE	CREA	0.01%	1	2	0			0		0	DERMATOLOGICALS;TOPICAL THERAPY	TOPICAL CORTICOSTEROIDS	DERMATOLOGICALS;TOPICAL THERAPY	TOPICAL CORTICOSTEROIDS	0						EX	FLUOCINOLONE ACETONIDE	Y	00168005860	Enhanced
1191315	00168006060	FLUOCINOLONE ACETONIDE	CREA	0.025%	1	2	0			0		0	DERMATOLOGICALS;TOPICAL THERAPY	TOPICAL CORTICOSTEROIDS	DERMATOLOGICALS;TOPICAL THERAPY	TOPICAL CORTICOSTEROIDS	0						EX	FLUOCINOLONE ACETONIDE	Y	00168006060	Enhanced
1191307	65162070486	FLUOCINOLONE ACETONIDE BODY	OIL	0.01%	1	2	0			0		0	DERMATOLOGICALS;TOPICAL THERAPY	TOPICAL CORTICOSTEROIDS	DERMATOLOGICALS;TOPICAL THERAPY	TOPICAL CORTICOSTEROIDS	0						EX	FLUOCINOLONE ACETONIDE	Y	65162070486	Enhanced
1191256	00168006460	FLUOCINOLONE ACETONIDE	OINT	0.025%	1	2	0			0		0	DERMATOLOGICALS;TOPICAL THERAPY	TOPICAL CORTICOSTEROIDS	DERMATOLOGICALS;TOPICAL THERAPY	TOPICAL CORTICOSTEROIDS	0						EX	FLUOCINOLONE ACETONIDE	Y	00168006460	Enhanced
1191310	00168005960	FLUOCINOLONE ACETONIDE	SOLN	0.01%	1	2	0			0		0	DERMATOLOGICALS;TOPICAL THERAPY	TOPICAL CORTICOSTEROIDS	DERMATOLOGICALS;TOPICAL THERAPY	TOPICAL CORTICOSTEROIDS	0						EX	FLUOCINOLONE ACETONIDE	Y	00168005960	Enhanced
103456	51672125403	FLUOCINONIDE-E	CREA	0.05%	1	2	0			0		0	DERMATOLOGICALS;TOPICAL THERAPY	TOPICAL CORTICOSTEROIDS	DERMATOLOGICALS;TOPICAL THERAPY	TOPICAL CORTICOSTEROIDS	0						EX	FLUOCINONIDE	Y	51672125403	Enhanced
310362	51672127903	FLUOCINONIDE	GEL	0.05%	1	2	0			0		0	DERMATOLOGICALS;TOPICAL THERAPY	TOPICAL CORTICOSTEROIDS	DERMATOLOGICALS;TOPICAL THERAPY	TOPICAL CORTICOSTEROIDS	0						EX	FLUOCINONIDE	Y	51672127903	Enhanced
103457	51672126402	FLUOCINONIDE	OINT	0.05%	1	2	0			0		0	DERMATOLOGICALS;TOPICAL THERAPY	TOPICAL CORTICOSTEROIDS	DERMATOLOGICALS;TOPICAL THERAPY	TOPICAL CORTICOSTEROIDS	0						EX	FLUOCINONIDE	Y	51672126402	Enhanced
310364	00168013460	FLUOCINONIDE	SOLN	0.05%	1	2	0			0		0	DERMATOLOGICALS;TOPICAL THERAPY	TOPICAL CORTICOSTEROIDS	DERMATOLOGICALS;TOPICAL THERAPY	TOPICAL CORTICOSTEROIDS	0						EX	FLUOCINONIDE	Y	00168013460	Enhanced
895987	45802022211	FLUTICASONE PROPIONATE	CREA	0.05%	1	2	0			0		0	DERMATOLOGICALS;TOPICAL THERAPY	TOPICAL CORTICOSTEROIDS	DERMATOLOGICALS;TOPICAL THERAPY	TOPICAL CORTICOSTEROIDS	0						EX	FLUTICASONE PROPIONATE	Y	45802022211	Enhanced
895990	68462042702	FLUTICASONE PROPIONATE	LOTN	0.05%	1	2	0			0		0	DERMATOLOGICALS;TOPICAL THERAPY	TOPICAL CORTICOSTEROIDS	DERMATOLOGICALS;TOPICAL THERAPY	TOPICAL CORTICOSTEROIDS	0						EX	FLUTICASONE PROPIONATE	Y	68462042702	Enhanced
895487	45802022111	FLUTICASONE PROPIONATE	OINT	0.005%	1	2	0			0		0	DERMATOLOGICALS;TOPICAL THERAPY	TOPICAL CORTICOSTEROIDS	DERMATOLOGICALS;TOPICAL THERAPY	TOPICAL CORTICOSTEROIDS	0						EX	FLUTICASONE PROPIONATE	Y	45802022111	Enhanced
977990	00168035550	HALOBETASOL PROPIONATE	CREA	0.05%	1	2	0			0		0	DERMATOLOGICALS;TOPICAL THERAPY	TOPICAL CORTICOSTEROIDS	DERMATOLOGICALS;TOPICAL THERAPY	TOPICAL CORTICOSTEROIDS	0						EX	HALOBETASOL PROPIONATE	Y	00168035550	Enhanced
977978	45802013132	HALOBETASOL PROPIONATE	OINT	0.05%	1	2	0			0		0	DERMATOLOGICALS;TOPICAL THERAPY	TOPICAL CORTICOSTEROIDS	DERMATOLOGICALS;TOPICAL THERAPY	TOPICAL CORTICOSTEROIDS	0						EX	HALOBETASOL PROPIONATE	Y	45802013132	Enhanced
1370746	51672407406	HYDROCORTISONE BUTYRATE	CREA	0.1%	1	2	0			0		0	DERMATOLOGICALS;TOPICAL THERAPY	TOPICAL CORTICOSTEROIDS	DERMATOLOGICALS;TOPICAL THERAPY	TOPICAL CORTICOSTEROIDS	0						EX	HYDROCORTISONE BUTYRATE	Y	51672407406	Enhanced
1370758	51672408306	HYDROCORTISONE BUTYRATE	OINT	0.1%	1	2	0			0		0	DERMATOLOGICALS;TOPICAL THERAPY	TOPICAL CORTICOSTEROIDS	DERMATOLOGICALS;TOPICAL THERAPY	TOPICAL CORTICOSTEROIDS	0						EX	HYDROCORTISONE BUTYRATE	Y	51672408306	Enhanced
1370767	51672406104	HYDROCORTISONE BUTYRATE	SOLN	0.1%	1	2	0			0		0	DERMATOLOGICALS;TOPICAL THERAPY	TOPICAL CORTICOSTEROIDS	DERMATOLOGICALS;TOPICAL THERAPY	TOPICAL CORTICOSTEROIDS	0						EX	HYDROCORTISONE BUTYRATE	Y	51672406104	Enhanced
1370754	51672129003	HYDROCORTISONE VALERATE	CREA	0.2%	1	2	0			0		0	DERMATOLOGICALS;TOPICAL THERAPY	TOPICAL CORTICOSTEROIDS	DERMATOLOGICALS;TOPICAL THERAPY	TOPICAL CORTICOSTEROIDS	0						EX	HYDROCORTISONE VALERATE	Y	51672129003	Enhanced
1370750	51672129203	HYDROCORTISONE VALERATE	OINT	0.2%	1	2	0			0		0	DERMATOLOGICALS;TOPICAL THERAPY	TOPICAL CORTICOSTEROIDS	DERMATOLOGICALS;TOPICAL THERAPY	TOPICAL CORTICOSTEROIDS	0						EX	HYDROCORTISONE VALERATE	Y	51672129203	Enhanced
106258	00168001516	HYDROCORTISONE	CREA	1%	1	2	0			0		0	DERMATOLOGICALS;TOPICAL THERAPY	TOPICAL CORTICOSTEROIDS	DERMATOLOGICALS;TOPICAL THERAPY	TOPICAL CORTICOSTEROIDS	0						EX	HYDROCORTISONE	Y	00168001516	Enhanced
310891	00603778178	HYDROCORTISONE	CREA	2.5%	1	2	0			0		0	DERMATOLOGICALS;TOPICAL THERAPY	TOPICAL CORTICOSTEROIDS	DERMATOLOGICALS;TOPICAL THERAPY	TOPICAL CORTICOSTEROIDS	0						EX	HYDROCORTISONE	Y	00603778178	Enhanced
197785	00603778552	HYDROCORTISONE	LOTN	2.5%	1	2	0			0		0	DERMATOLOGICALS;TOPICAL THERAPY	TOPICAL CORTICOSTEROIDS	DERMATOLOGICALS;TOPICAL THERAPY	TOPICAL CORTICOSTEROIDS	0						EX	HYDROCORTISONE	Y	00603778552	Enhanced
203105	00168002016	HYDROCORTISONE	OINT	1%	1	2	0			0		0	DERMATOLOGICALS;TOPICAL THERAPY	TOPICAL CORTICOSTEROIDS	DERMATOLOGICALS;TOPICAL THERAPY	TOPICAL CORTICOSTEROIDS	0						EX	HYDROCORTISONE	Y	00168002016	Enhanced
103401	45802001402	HYDROCORTISONE	OINT	2.5%	1	2	0			0		0	DERMATOLOGICALS;TOPICAL THERAPY	TOPICAL CORTICOSTEROIDS	DERMATOLOGICALS;TOPICAL THERAPY	TOPICAL CORTICOSTEROIDS	0						EX	HYDROCORTISONE	Y	45802001402	Enhanced
311753	00781706619	MOMETASONE FUROATE	CREA	0.1%	1	2	0			0		0	DERMATOLOGICALS;TOPICAL THERAPY	TOPICAL CORTICOSTEROIDS	DERMATOLOGICALS;TOPICAL THERAPY	TOPICAL CORTICOSTEROIDS	0						EX	MOMETASONE FUROATE	Y	00781706619	Enhanced
151029	00781706819	MOMETASONE FUROATE	OINT	0.1%	1	2	0			0		0	DERMATOLOGICALS;TOPICAL THERAPY	TOPICAL CORTICOSTEROIDS	DERMATOLOGICALS;TOPICAL THERAPY	TOPICAL CORTICOSTEROIDS	0						EX	MOMETASONE FUROATE	Y	00781706819	Enhanced
584193	00781706761	MOMETASONE FUROATE	SOLN	0.1%	1	2	0			0		0	DERMATOLOGICALS;TOPICAL THERAPY	TOPICAL CORTICOSTEROIDS	DERMATOLOGICALS;TOPICAL THERAPY	TOPICAL CORTICOSTEROIDS	0						EX	MOMETASONE FUROATE	Y	00781706761	Enhanced
198363	66993088061	PREDNICARBATE	CREA	0.1%	1	2	0			0		0	DERMATOLOGICALS;TOPICAL THERAPY	TOPICAL CORTICOSTEROIDS	DERMATOLOGICALS;TOPICAL THERAPY	TOPICAL CORTICOSTEROIDS	0						EX	PREDNICARBATE	Y	66993088061	Enhanced
706546	00168041060	PREDNICARBATE	OINT	0.1%	1	2	0			0		0	DERMATOLOGICALS;TOPICAL THERAPY	TOPICAL CORTICOSTEROIDS	DERMATOLOGICALS;TOPICAL THERAPY	TOPICAL CORTICOSTEROIDS	0						EX	PREDNICARBATE	Y	00168041060	Enhanced
1085644	45802006336	TRIAMCINOLONE ACETONIDE	CREA	0.025%	1	2	0			0		0	DERMATOLOGICALS;TOPICAL THERAPY	TOPICAL CORTICOSTEROIDS	DERMATOLOGICALS;TOPICAL THERAPY	TOPICAL CORTICOSTEROIDS	0						EX	TRIAMCINOLONE ACETONIDE	Y	45802006336	Enhanced
1014314	45802006436	TRIAMCINOLONE ACETONIDE	CREA	0.1%	1	2	0			0		0	DERMATOLOGICALS;TOPICAL THERAPY	TOPICAL CORTICOSTEROIDS	DERMATOLOGICALS;TOPICAL THERAPY	TOPICAL CORTICOSTEROIDS	0						EX	TRIAMCINOLONE ACETONIDE	Y	45802006436	Enhanced
1085686	45802006535	TRIAMCINOLONE ACETONIDE	CREA	0.5%	1	2	0			0		0	DERMATOLOGICALS;TOPICAL THERAPY	TOPICAL CORTICOSTEROIDS	DERMATOLOGICALS;TOPICAL THERAPY	TOPICAL CORTICOSTEROIDS	0						EX	TRIAMCINOLONE ACETONIDE	Y	45802006535	Enhanced
1085741	60432056060	TRIAMCINOLONE ACETONIDE	LOTN	0.025%	1	2	0			0		0	DERMATOLOGICALS;TOPICAL THERAPY	TOPICAL CORTICOSTEROIDS	DERMATOLOGICALS;TOPICAL THERAPY	TOPICAL CORTICOSTEROIDS	0						EX	TRIAMCINOLONE ACETONIDE	Y	60432056060	Enhanced
1085745	00603786449	TRIAMCINOLONE ACETONIDE	LOTN	0.1%	1	2	0			0		0	DERMATOLOGICALS;TOPICAL THERAPY	TOPICAL CORTICOSTEROIDS	DERMATOLOGICALS;TOPICAL THERAPY	TOPICAL CORTICOSTEROIDS	0						EX	TRIAMCINOLONE ACETONIDE	Y	00603786449	Enhanced
1085633	00168000580	TRIAMCINOLONE ACETONIDE	OINT	0.025%	1	2	0			0		0	DERMATOLOGICALS;TOPICAL THERAPY	TOPICAL CORTICOSTEROIDS	DERMATOLOGICALS;TOPICAL THERAPY	TOPICAL CORTICOSTEROIDS	0						EX	TRIAMCINOLONE ACETONIDE	Y	00168000580	Enhanced
1085636	00168000680	TRIAMCINOLONE ACETONIDE	OINT	0.1%	1	2	0			0		0	DERMATOLOGICALS;TOPICAL THERAPY	TOPICAL CORTICOSTEROIDS	DERMATOLOGICALS;TOPICAL THERAPY	TOPICAL CORTICOSTEROIDS	0						EX	TRIAMCINOLONE ACETONIDE	Y	00168000680	Enhanced
1085640	45802004935	TRIAMCINOLONE ACETONIDE	OINT	0.5%	1	2	0			0		0	DERMATOLOGICALS;TOPICAL THERAPY	TOPICAL CORTICOSTEROIDS	DERMATOLOGICALS;TOPICAL THERAPY	TOPICAL CORTICOSTEROIDS	0						EX	TRIAMCINOLONE ACETONIDE	Y	45802004935	Enhanced
1085773	00316017003	TRIDERM	CREA	0.1%	1	2	0			0		0	DERMATOLOGICALS;TOPICAL THERAPY	TOPICAL CORTICOSTEROIDS	DERMATOLOGICALS;TOPICAL THERAPY	TOPICAL CORTICOSTEROIDS	0						EX	TRIAMCINOLONE ACETONIDE	Y	00316017003	Enhanced
1149617	00064501030	SANTYL	OINT	250UNIT/GM	2	5	0			0		0	DERMATOLOGICALS;TOPICAL THERAPY	TOPICAL ENZYMES	DERMATOLOGICALS;TOPICAL THERAPY	TOPICAL ENZYMES	0						EX	COLLAGENASE	W	00064501030	Enhanced
141860	60432083360	LINDANE	LOTN	1%	1	2	0			0		0	DERMATOLOGICALS;TOPICAL THERAPY	TOPICAL SCABICIDES / PEDICULICIDES	DERMATOLOGICALS;TOPICAL THERAPY	TOPICAL SCABICIDES / PEDICULICIDES	0						EX	LINDANE	Y	60432083360	Enhanced
197878	60432083460	LINDANE	SHAM	1%	1	2	0			0		0	DERMATOLOGICALS;TOPICAL THERAPY	TOPICAL SCABICIDES / PEDICULICIDES	DERMATOLOGICALS;TOPICAL THERAPY	TOPICAL SCABICIDES / PEDICULICIDES	0						EX	LINDANE	Y	60432083460	Enhanced
204119	42043015023	MALATHION	LOTN	0.5%	1	2	0			0		0	DERMATOLOGICALS;TOPICAL THERAPY	TOPICAL SCABICIDES / PEDICULICIDES	DERMATOLOGICALS;TOPICAL THERAPY	TOPICAL SCABICIDES / PEDICULICIDES

1233711	00944280201	ARALAST NP	SOLR	400MG	3	5	0			1	ALPHA-1 PROTEINASE INHIBITORS	1	DIAGNOSTICS / MISCELLANEOUS AGENTS	MISCELLANEOUS AGENTS	DIAGNOSTICS / MISCELLANEOUS AGENTS	MISCELLANEOUS AGENTS	0						IV	PROTEINASE INHIBITOR (HUMAN)	W	00944280201	Enhanced
984107	62592018864	BUPHENYL	POWD	0	3	5	0			0		0	DIAGNOSTICS / MISCELLANEOUS AGENTS	MISCELLANEOUS AGENTS	DIAGNOSTICS / MISCELLANEOUS AGENTS	MISCELLANEOUS AGENTS	0						OR	SODIUM PHENYLBUTYRATE	W	62592018864	Enhanced
213196	62592049603	BUPHENYL	TABS	500MG	3	5	0			0		0	DIAGNOSTICS / MISCELLANEOUS AGENTS	MISCELLANEOUS AGENTS	DIAGNOSTICS / MISCELLANEOUS AGENTS	MISCELLANEOUS AGENTS	0						OR	SODIUM PHENYLBUTYRATE	W	62592049603	Enhanced
905394	52276031205	CARBAGLU	TABS	200MG	3	5	0			0		1	DIAGNOSTICS / MISCELLANEOUS AGENTS	MISCELLANEOUS AGENTS	DIAGNOSTICS / MISCELLANEOUS AGENTS	MISCELLANEOUS AGENTS	0						OR	CARGLUMIC ACID	W	52276031205	Enhanced
309140	60505314505	CEVIMELINE HCL	CAPS	30MG	1	2	0			0		0	DIAGNOSTICS / MISCELLANEOUS AGENTS	MISCELLANEOUS AGENTS	DIAGNOSTICS / MISCELLANEOUS AGENTS	MISCELLANEOUS AGENTS	0						OR	CEVIMELINE HYDROCHLORIDE HEMIHYDRATE	Y	60505314505	Enhanced
207949	67386020111	CHEMET	CAPS	100MG	2	5	0			0		0	DIAGNOSTICS / MISCELLANEOUS AGENTS	MISCELLANEOUS AGENTS	DIAGNOSTICS / MISCELLANEOUS AGENTS	MISCELLANEOUS AGENTS	0						OR	SUCCIMER	W	67386020111	Enhanced
800420	00338113303	CLINIMIX 4.25%/DEXTROSE 5%	SOLN	37ME/L; 880MG/100ML; 489MG/100ML; 17MEQ/L; 5GM/100ML; 438MG/100ML; 204MG/100ML; 255MG/100ML; 311MG/100ML; 247MG/100ML; 170MG/100ML; 238MG/100ML; 289MG/100ML; 213MG/100ML; 179MG/100ML; 77MG/100ML; 17MG/100ML; 247MG/100ML	2	5	0			0		0	DIAGNOSTICS / MISCELLANEOUS AGENTS	MISCELLANEOUS AGENTS	DIAGNOSTICS / MISCELLANEOUS AGENTS	MISCELLANEOUS AGENTS	0						IV	ACETATE; ALANINE; ARGININE; CHLORIDE ION; DEXTROSE (ANHYDROUS); GLYCINE; HISTIDINE; ISOLEUCINE; LEUCINE; LYSINE HYDROCHLORIDE; METHIONINE; PHENYLALANINE; PROLINE (L-PROLINE); SERINE; THREONINE; TRYPTOPHAN; TYROSINE; VALINE	W	00338113303	Enhanced
801015	00338114303	CLINIMIX E 2.75%/DEXTROSE 10%	SOLN	570MG/100ML; 316MG/100ML; 33MG/100ML; 10GM/100ML; 152MG/100ML; 165MG/100ML; 201MG/100ML; 159MG/100ML; 51MG/100ML; 110MG/100ML; 454MG/100ML; 154MG/100ML; 261MG/100ML; 187MG/100ML; 138MG/100ML; 217MG/100ML; 112MG/100ML; 116MG/100ML; 50MG/100ML; 11MG/100ML; 160MG/100ML	2	5	0			0		0	DIAGNOSTICS / MISCELLANEOUS AGENTS	MISCELLANEOUS AGENTS	DIAGNOSTICS / MISCELLANEOUS AGENTS	MISCELLANEOUS AGENTS	0						IV	ALANINE; ARGININE; CALCIUM CHLORIDE DIHYDRATE; DEXTROSE (ANHYDROUS); HISTIDINE; ISOLEUCINE; LEUCINE; LYSINE HYDROCHLORIDE; MAGNESIUM CHLORIDE; METHIONINE; NITROGEN; PHENYLALANINE; POTASSIUM PHOSPHATE, DIBASIC; PROLINE (L-PROLINE); SERINE; SODIUM ACETATE TRIHYDRATE; SODIUM CHLORIDE; THREONINE; TRYPTOPHAN; TYROSINE; VALINE	W	00338114303	Enhanced
801012	00338114203	CLINIMIX E 2.75%/DEXTROSE 5%	SOLN	570MG/100ML; 316MG/100ML; 33MG/100ML; 5GM/100ML; 152MG/100ML; 165MG/100ML; 201MG/100ML; 159MG/100ML; 51MG/100ML; 110MG/100ML; 454MG/100ML; 154MG/100ML; 261MG/100ML; 187MG/100ML; 138MG/100ML; 217MG/100ML; 112MG/100ML; 116MG/100ML; 50MG/100ML; 11MG/100ML; 160MG/100ML	2	5	0			0		0	DIAGNOSTICS / MISCELLANEOUS AGENTS	MISCELLANEOUS AGENTS	DIAGNOSTICS / MISCELLANEOUS AGENTS	MISCELLANEOUS AGENTS	0						IV	ALANINE; ARGININE; CALCIUM CHLORIDE DIHYDRATE; DEXTROSE (ANHYDROUS); HISTIDINE; ISOLEUCINE; LEUCINE; LYSINE HYDROCHLORIDE; MAGNESIUM CHLORIDE; METHIONINE; NITROGEN; PHENYLALANINE; POTASSIUM PHOSPHATE, DIBASIC; PROLINE (L-PROLINE); SERINE; SODIUM ACETATE TRIHYDRATE; SODIUM CHLORIDE; THREONINE; TRYPTOPHAN; TYROSINE; VALINE	W	00338114203	Enhanced
245220	00264762320	DEXTROSE 10%/NACL 0.2%	SOLN	10%; 0.2%	1	2	0			0		0	DIAGNOSTICS / MISCELLANEOUS AGENTS	MISCELLANEOUS AGENTS	DIAGNOSTICS / MISCELLANEOUS AGENTS	MISCELLANEOUS AGENTS	0						IV	DEXTROSE (ANHYDROUS); SODIUM CHLORIDE	Y	00264762320	Enhanced
244098	00264762200	DEXTROSE 10%/NACL 0.45%	SOLN	10%; 0.45%	1	2	0			0		0	DIAGNOSTICS / MISCELLANEOUS AGENTS	MISCELLANEOUS AGENTS	DIAGNOSTICS / MISCELLANEOUS AGENTS	MISCELLANEOUS AGENTS	0						IV	DEXTROSE (ANHYDROUS); SODIUM CHLORIDE	Y	00264762200	Enhanced
244095	00338007304	DEXTROSE 2.5%/SODIUM CHLORIDE 0.45%	SOLN	2.5%; 0.45%	1	2	0			0		0	DIAGNOSTICS / MISCELLANEOUS AGENTS	MISCELLANEOUS AGENTS	DIAGNOSTICS / MISCELLANEOUS AGENTS	MISCELLANEOUS AGENTS	0						IV	DEXTROSE (ANHYDROUS); SODIUM CHLORIDE	Y	00338007304	Enhanced
847627	00264775100	DEXTROSE 5%/LACTATED RINGERS	SOLN	2.7ME/G/L; 109ME/G/L; 5%; 28ME/G/L; 4MEQ/L; 130MEQ/L	1	2	0			0		0	DIAGNOSTICS / MISCELLANEOUS AGENTS	MISCELLANEOUS AGENTS	DIAGNOSTICS / MISCELLANEOUS AGENTS	MISCELLANEOUS AGENTS	0						IV	CALCIUM (+2); CHLORIDE ION; DEXTROSE (ANHYDROUS); LACTATE ANION; POTASSIUM	Y	00264775100	Enhanced
630800	00264761610	DEXTROSE 5%/NACL 0.2%	SOLN	5%; 0.2%	1	2	0			0		0	DIAGNOSTICS / MISCELLANEOUS AGENTS	MISCELLANEOUS AGENTS	DIAGNOSTICS / MISCELLANEOUS AGENTS	MISCELLANEOUS AGENTS	0						IV	DEXTROSE (ANHYDROUS); SODIUM CHLORIDE	Y	00264761610	Enhanced
686540	00409792403	DEXTROSE 5%/NACL 0.225%	SOLN	5%; 0.225%	1	2	0			0		0	DIAGNOSTICS / MISCELLANEOUS AGENTS	MISCELLANEOUS AGENTS	DIAGNOSTICS / MISCELLANEOUS AGENTS	MISCELLANEOUS AGENTS	0						IV	DEXTROSE (ANHYDROUS); SODIUM CHLORIDE	Y	00409792403	Enhanced
686542	00264761400	DEXTROSE 5%/NACL 0.33%	SOLN	5%; 0.33%	1	2	0			0		0	DIAGNOSTICS / MISCELLANEOUS AGENTS	MISCELLANEOUS AGENTS	DIAGNOSTICS / MISCELLANEOUS AGENTS	MISCELLANEOUS AGENTS	0						IV	DEXTROSE (ANHYDROUS); SODIUM CHLORIDE	Y	00264761400	Enhanced
309806	00264761210	DEXTROSE 5%/NACL 0.45%	SOLN	5%; 0.45%	1	2	0			0		0	DIAGNOSTICS / MISCELLANEOUS AGENTS	MISCELLANEOUS AGENTS	DIAGNOSTICS / MISCELLANEOUS AGENTS	MISCELLANEOUS AGENTS	0						IV	DEXTROSE (ANHYDROUS); SODIUM CHLORIDE	Y	00264761210	Enhanced
197587	00264761020	DEXTROSE 5%/NACL 0.9%	SOLN	5%; 0.9%	1	2	0			0		0	DIAGNOSTICS / MISCELLANEOUS AGENTS	MISCELLANEOUS AGENTS	DIAGNOSTICS / MISCELLANEOUS AGENTS	MISCELLANEOUS AGENTS	0						IV	DEXTROSE (ANHYDROUS); SODIUM CHLORIDE	Y	00264761020	Enhanced
237648	00264752020	DEXTROSE 10% FLEX CONTAINER	SOLN	10%	1	2	0			0		0	DIAGNOSTICS / MISCELLANEOUS AGENTS	MISCELLANEOUS AGENTS	DIAGNOSTICS / MISCELLANEOUS AGENTS	MISCELLANEOUS AGENTS	0						IV	DEXTROSE (ANHYDROUS)	Y	00264752020	Enhanced
309778	00409792337	DEXTROSE 5%	SOLN	5%	1	2	0			0		0	DIAGNOSTICS / MISCELLANEOUS AGENTS	MISCELLANEOUS AGENTS	DIAGNOSTICS / MISCELLANEOUS AGENTS	MISCELLANEOUS AGENTS	0						IV	DEXTROSE (ANHYDROUS)	Y	00409792337	Enhanced
197623	64980017101	DISULFIRAM	TABS	250MG	1	2	0			0		0	DIAGNOSTICS / MISCELLANEOUS AGENTS	MISCELLANEOUS AGENTS	DIAGNOSTICS / MISCELLANEOUS AGENTS	MISCELLANEOUS AGENTS	0						OR	DISULFIRAM	Y	64980017101	Enhanced
197624	64980017201	DISULFIRAM	TABS	500MG	1	2	0			0		0	DIAGNOSTICS / MISCELLANEOUS AGENTS	MISCELLANEOUS AGENTS	DIAGNOSTICS / MISCELLANEOUS AGENTS	MISCELLANEOUS AGENTS	0						OR	DISULFIRAM	Y	64980017201	Enhanced
904535	00378328691	ETIDRONATE DISODIUM	TABS	200MG	1	2	0			0		0	DIAGNOSTICS / MISCELLANEOUS AGENTS	MISCELLANEOUS AGENTS	DIAGNOSTICS / MISCELLANEOUS AGENTS	MISCELLANEOUS AGENTS	0						OR	ETIDRONATE DISODIUM	Y	00378328691	Enhanced
904547	00378328891	ETIDRONATE DISODIUM	TABS	400MG	1	2	0			0		0	DIAGNOSTICS / MISCELLANEOUS AGENTS	MISCELLANEOUS AGENTS	DIAGNOSTICS / MISCELLANEOUS AGENTS	MISCELLANEOUS AGENTS	0						OR	ETIDRONATE DISODIUM	Y	00378328891	Enhanced
616159	00078046815	EXJADE	TBSO	125MG	2	5	0			0		1	DIAGNOSTICS / MISCELLANEOUS AGENTS	MISCELLANEOUS AGENTS	DIAGNOSTICS / MISCELLANEOUS AGENTS	MISCELLANEOUS AGENTS	0						OR	DEFERASIROX	W	00078046815	Enhanced
616161	00078046915	EXJADE	TBSO	250MG	3	5	0			0		1	DIAGNOSTICS / MISCELLANEOUS AGENTS	MISCELLANEOUS AGENTS	DIAGNOSTICS / MISCELLANEOUS AGENTS	MISCELLANEOUS AGENTS	0						OR	DEFERASIROX	W	00078046915	Enhanced
616163	00078047015	EXJADE	TBSO	500MG	3	5	0			0		1	DIAGNOSTICS / MISCELLANEOUS AGENTS	MISCELLANEOUS AGENTS	DIAGNOSTICS / MISCELLANEOUS AGENTS	MISCELLANEOUS AGENTS	0						OR	DEFERASIROX	W	00078047015	Enhanced
1190357	52609000601	FERRIPROX	TABS	500MG	3	5	0			0		0	DIAGNOSTICS / MISCELLANEOUS AGENTS	MISCELLANEOUS AGENTS	DIAGNOSTICS / MISCELLANEOUS AGENTS	MISCELLANEOUS AGENTS	0						OR	DEFERIPRONE	W	52609000601	Enhanced
615882	15054104005	INCRELEX	SOLN	40MG/4ML	3	5	0			0		1	DIAGNOSTICS / MISCELLANEOUS AGENTS	MISCELLANEOUS AGENTS	DIAGNOSTICS / MISCELLANEOUS AGENTS	MISCELLANEOUS AGENTS	0						SC	MECASERMIN	W	15054104005	Enhanced
793741	00574200416	KIONEX	POWD	0	1	2	0			0		0	DIAGNOSTICS / MISCELLANEOUS AGENTS	MISCELLANEOUS AGENTS	DIAGNOSTICS / MISCELLANEOUS AGENTS	MISCELLANEOUS AGENTS	0						OR	SODIUM POLYSTYRENE SULFONATE	Y	00574200416	Enhanced
242640	00703040402	LEVOCARNITINE	SOLN	200MG/ML	1	2	0			0		0	DIAGNOSTICS / MISCELLANEOUS AGENTS	MISCELLANEOUS AGENTS	DIAGNOSTICS / MISCELLANEOUS AGENTS	MISCELLANEOUS AGENTS	0						IV	LEVOCARNITINE	Y	00703040402	Enhanced
315134	64980050312	LEVOCARNITINE	SOLN	1GM/10ML	1	2	0			3		0	DIAGNOSTICS / MISCELLANEOUS AGENTS	MISCELLANEOUS AGENTS	DIAGNOSTICS / MISCELLANEOUS AGENTS	MISCELLANEOUS AGENTS	0						OR	LEVOCARNITINE	Y	64980050312	Enhanced
197448	64980013009	LEVOCARNITINE	TABS	330MG	1	2	0			0		0	DIAGNOSTICS / MISCELLANEOUS AGENTS	MISCELLANEOUS AGENTS	DIAGNOSTICS / MISCELLANEOUS AGENTS	MISCELLANEOUS AGENTS	0						OR	LEVOCARNITINE	Y	64980013009	Enhanced
993462	00185014901	MIDODRINE HCL	TABS	10MG	1	2	0			0		0	DIAGNOSTICS / MISCELLANEOUS AGENTS	MISCELLANEOUS AGENTS	DIAGNOSTICS / MISCELLANEOUS AGENTS	MISCELLANEOUS AGENTS	0						OR	MIDODRINE HCL	Y	00185014901	Enhanced
993466	00185004001	MIDODRINE HCL	TABS	2.5MG	1	2	0			0		0	DIAGNOSTICS / MISCELLANEOUS AGENTS	MISCELLANEOUS AGENTS	DIAGNOSTICS / MISCELLANEOUS AGENTS	MISCELLANEOUS AGENTS	0						OR	MIDODRINE HCL	Y	00185004001	Enhanced
993470	00185004301	MIDODRINE HCL	TABS	5MG	1	2	0			0		0	DIAGNOSTICS / MISCELLANEOUS AGENTS	MISCELLANEOUS AGENTS	DIAGNOSTICS / MISCELLANEOUS AGENTS	MISCELLANEOUS AGENTS	0						OR	MIDODRINE HCL	Y	00185004301	Enhanced
352121	66621101006	ORFADIN	CAPS	10MG	3	5	0			0		1	DIAGNOSTICS / MISCELLANEOUS AGENTS	MISCELLANEOUS AGENTS	DIAGNOSTICS / MISCELLANEOUS AGENTS	MISCELLANEOUS AGENTS	0						OR	NITISINONE	W	66621101006	Enhanced
352119	66621100206	ORFADIN	CAPS	2MG	3	5	0			0		1	DIAGNOSTICS / MISCELLANEOUS AGENTS	MISCELLANEOUS AGENTS	DIAGNOSTICS / MISCELLANEOUS AGENTS	MISCELLANEOUS AGENTS	0						OR	NITISINONE	W	66621100206	Enhanced
352120	66621100506	ORFADIN	CAPS	5MG	3	5	0			0		1	DIAGNOSTICS / MISCELLANEOUS AGENTS	MISCELLANEOUS AGENTS	DIAGNOSTICS / MISCELLANEOUS AGENTS	MISCELLANEOUS AGENTS	0						OR	NITISINONE	W	66621100506	Enhanced
1000913	00054005625	PILOCARPINE HYDROCHLORIDE	TABS	5MG	1	2	0			0		0	DIAGNOSTICS / MISCELLANEOUS AGENTS	MISCELLANEOUS AGENTS	DIAGNOSTICS / MISCELLANEOUS AGENTS	MISCELLANEOUS AGENTS	0						OR	PILOCARPINE HYDROCHLORIDE	Y	00054005625	Enhanced
1001004	00527140701	PILOCARPINE HCL	TABS	7.5MG	1	2	0			0		0	DIAGNOSTICS / MISCELLANEOUS AGENTS	MISCELLANEOUS AGENTS	DIAGNOSTICS / MISCELLANEOUS AGENTS	MISCELLANEOUS AGENTS	0						OR	PILOCARPINE HYDROCHLORIDE	Y	00527140701	Enhanced
991724	13533070001	PROLASTIN-C	SOLR	1000MG	3	5	0			1	ALPHA-1 PROTEINASE INHIBITORS	1	DIAGNOSTICS / MISCELLANEOUS AGENTS	MISCELLANEOUS AGENTS	DIAGNOSTICS / MISCELLANEOUS AGENTS	MISCELLANEOUS AGENTS	0						IV	PROTEINASE INHIBITOR (HUMAN)	W	13533070001	Enhanced
705875	00078043561	RECLAST	SOLN	5MG/100ML	2	5	0			1	RECLAST	0	DIAGNOSTICS / MISCELLANEOUS AGENTS	MISCELLANEOUS AGENTS	DIAGNOSTICS / MISCELLANEOUS AGENTS	MISCELLANEOUS AGENTS	0						IV	ZOLEDRONIC ACID MONOHYDRATE	W	00078043561	Enhanced
861377	58468013202	RENVELA	PACK	0.8GM	2	5	0			0		0	DIAGNOSTICS / MISCELLANEOUS AGENTS	MISCELLANEOUS AGENTS	DIAGNOSTICS / MISCELLANEOUS AGENTS	MISCELLANEOUS AGENTS	0						OR	SEVELAMER CARBONATE	W	58468013202	Enhanced
861373	58468013102	RENVELA	PACK	2.4GM	2	5	0			0		0	DIAGNOSTICS / MISCELLANEOUS AGENTS	MISCELLANEOUS AGENTS	DIAGNOSTICS / MISCELLANEOUS AGENTS	MISCELLANEOUS AGENTS	0						OR	SEVELAMER CARBONATE	W	58468013102	Enhanced
749210	58468013001	RENVELA	TABS	800MG	2	5	0			0		0	DIAGNOSTICS / MISCELLANEOUS AGENTS	MISCELLANEOUS AGENTS	DIAGNOSTICS / MISCELLANEOUS AGENTS	MISCELLANEOUS AGENTS	0						OR	SEVELAMER CARBONATE	W	58468013001	Enhanced
152915	00075770060	RILUTEK	TABS	50MG	3	5	0			0		0	DIAGNOSTICS / MISCELLANEOUS AGENTS	MISCELLANEOUS AGENTS	DIAGNOSTICS / MISCELLANEOUS AGENTS	MISCELLANEOUS AGENTS	0						OR	RILUZOLE	W	00075770060	Enhanced
313002	00338004918	SODIUM CHLORIDE	SOLN	0.9%	1	2	0			0		0	DIAGNOSTICS / MISCELLANEOUS AGENTS	MISCELLANEOUS AGENTS	DIAGNOSTICS / MISCELLANEOUS AGENTS	MISCELLANEOUS AGENTS	0						IV	SODIUM CHLORIDE	Y	00338004918	Enhanced
313072	00574200316	SODIUM POLYSTYRENE SULFONATE	SUSP	15GM/60ML	1	2	0			0		0	DIAGNOSTICS / MISCELLANEOUS AGENTS	MISCELLANEOUS AGENTS	DIAGNOSTICS / MISCELLANEOUS AGENTS	MISCELLANEOUS AGENTS	0						OR	SODIUM POLYSTYRENE SULFONATE	Y	00574200316	Enhanced
486515	00409713836	SODIUM CHLORIDE 0.9%	SOLN	0.9%	1	2	0			0		0	DIAGNOSTICS / MISCELLANEOUS AGENTS	MISCELLANEOUS AGENTS	DIAGNOSTICS / MISCELLANEOUS AGENTS	MISCELLANEOUS AGENTS	0						IR	SODIUM CHLORIDE	Y	00409713836	Enhanced
150985	00264210100	STERILE WATER IRRIGATION	SOLN	0	1	2	0			0		0	DIAGNOSTICS / MISCELLANEOUS AGENTS	MISCELLANEOUS AGENTS	DIAGNOSTICS / MISCELLANEOUS AGENTS	MISCELLANEOUS AGENTS	0						IR	WATER, STERILE	Y	00264210100	Enhanced
208720	25010071015	SYPRINE	CAPS	250MG	3	5	0			0		0	DIAGNOSTICS / MISCELLANEOUS AGENTS	MISCELLANEOUS AGENTS	DIAGNOSTICS / MISCELLANEOUS AGENTS	MISCELLANEOUS AGENTS	0						OR	TRIENTINE HCL	W	25010071015	Enhanced
993524	00093570301	BUPROBAN	TB12	150MG	1	2	0			0		0	DIAGNOSTICS / MISCELLANEOUS AGENTS	SMOKING DETERRENTS	DIAGNOSTICS / MISCELLANEOUS AGENTS	SMOKING DETERRENTS	0						OR	BUPROPION HCL	Y	00093570301	Enhanced
795737	00069047102	CHANTIX STARTING MONTH PAK	TABS	0	2	5	0			0		0	DIAGNOSTICS / MISCELLANEOUS AGENTS	SMOKING DETERRENTS	DIAGNOSTICS / MISCELLANEOUS AGENTS	SMOKING DETERRENTS	0						OR	VARENICLINE TARTRATE	W	00069047102	Enhanced
637188	00069046856	CHANTIX	TABS	0.5MG	2	5	0			0		0	DIAGNOSTICS / MISCELLANEOUS AGENTS	SMOKING DETERRENTS	DIAGNOSTICS / MISCELLANEOUS AGENTS	SMOKING DETERRENTS	0						OR	VARENICLINE TARTRATE	W	00069046856	Enhanced
637190	00069046956	CHANTIX	TABS	1MG	2	5	0			0		0	DIAGNOSTICS / MISCELLANEOUS AGENTS	SMOKING DETERRENTS	DIAGNOSTICS / MISCELLANEOUS AGENTS	SMOKING DETERRENTS	0						OR	VARENICLINE TARTRATE	W	00069046956	Enhanced
1189287	00009540001	NICOTROL INHALER	INHA	10MG	2	5	0			0		0	DIAGNOSTICS / MISCELLANEOUS AGENTS	SMOKING DETERRENTS	DIAGNOSTICS / MISCELLANEOUS AGENTS	SMOKING DETERRENTS	0						IN	NICOTINE	W	00009540001	Enhanced
896103	00009540101	NICOTROL NS	SOLN	10MG/ML	2	5	0			0		0	DIAGNOSTICS / MISCELLANEOUS AGENTS	SMOKING DETERRENTS	DIAGNOSTICS / MISCELLANEOUS AGENTS	SMOKING DETERRENTS	0						NA	NICOTINE	W	00009540101	Enhanced
860796	60505083305	AZELASTINE HCL	SOLN	137MCG/SPRAY	1	2	1	180	90	0		0	EAR, NOSE / THROAT MEDICATIONS	MISCELLANEOUS AGENTS	EAR, NOSE / THROAT MEDICATIONS	MISCELLANEOUS AGENTS	0						NA	AZELASTINE HYDROCHLORIDE	Y	60505083305	Enhanced
834127	50383072016	CHLORHEXIDINE GLUCONATE ORAL RINSE	SOLN	0.12%	1	2	0			0		0	EAR, NOSE / THROAT MEDICATIONS	MISCELLANEOUS AGENTS	EAR, NOSE / THROAT MEDICATIONS	MISCELLANEOUS AGENTS	0						MT	CHLORHEXIDINE GLUCONATE	Y	50383072016	Enhanced
836292	00054004544	IPRATROPIUM BROMIDE	SOLN	0.03%	1	2	1	90	90	0		0	EAR, NOSE / THROAT MEDICATIONS	MISCELLANEOUS AGENTS	EAR, NOSE / THROAT MEDICATIONS	MISCELLANEOUS AGENTS	0						NA	IPRATROPIUM BROMIDE	Y	00054004544	Enhanced
836281	24208039915	IPRATROPIUM BROMIDE	SOLN	0.06%	1	2	1	75	90	0		0	EAR, NOSE / THROAT MEDICATIONS	MISCELLANEOUS AGENTS	EAR, NOSE / THROAT MEDICATIONS	MISCELLANEOUS AGENTS	0						NA	IPRATROPIUM BROMIDE	Y	24208039915	Enhanced
834137	00126027716	PEROGARD	SOLN	0.12%	1	2	0			0		0	EAR, NOSE / THROAT MEDICATIONS	MISCELLANEOUS AGENTS	EAR, NOSE / THROAT MEDICATIONS	MISCELLANEOUS AGENTS	0						MT	CHLORHEXIDINE GLUCONATE	Y	00126027716	Enhanced
1085728	51672126705	TRIAMCINOLONE IN ORABASE	PSTE	0.1%	1	2	0			0		0	EAR, NOSE / THROAT MEDICATIONS	MISCELLANEOUS AGENTS	EAR, NOSE / THROAT MEDICATIONS	MISCELLANEOUS AGENTS	0						MT	TRIAMCINOLONE ACETONIDE	Y	51672126705	Enhanced

1232718	00482476030	TYZINE	SOLN	0.1%	2	5	0				0		0	EAR, NOSE / THROAT MEDICATIONS	MISCELLANEOUS AGENTS	EAR, NOSE / THROAT MEDICATIONS	MISCELLANEOUS AGENTS	0						NA	TETRAHYDROZOLINE HYDROCHLORIDE	W	00482476030	Enhanced
1232714	10337047715	TYZINE PEDIATRIC NASAL DROPS	SOLN	0.05%	2	5	0				0		0	EAR, NOSE / THROAT MEDICATIONS	MISCELLANEOUS AGENTS	EAR, NOSE / THROAT MEDICATIONS	MISCELLANEOUS AGENTS	0						NA	TETRAHYDROZOLINE HYDROCHLORIDE	W	10337047715	Enhanced
213525	00472088282	ACETASOL HC	SOLN	2%; 1%	1	2	0				0		0	EAR, NOSE / THROAT MEDICATIONS	MISCELLANEOUS OTIC PREPARATIONS	EAR, NOSE / THROAT MEDICATIONS	MISCELLANEOUS OTIC PREPARATIONS	0						OT	ACETIC ACID; HYDROCORTISONE	Y	00472088282	Enhanced
197305	00603703841	ACETIC ACID	SOLN	2%	1	2	0				0		0	EAR, NOSE / THROAT MEDICATIONS	MISCELLANEOUS OTIC PREPARATIONS	EAR, NOSE / THROAT MEDICATIONS	MISCELLANEOUS OTIC PREPARATIONS	0						OT	ACETIC ACID	Y	00603703841	Enhanced
1191299	65162070294	FLUOCINOLONE ACETONIDE	OIL	0.01%	1	2	0				0		0	EAR, NOSE / THROAT MEDICATIONS	MISCELLANEOUS OTIC PREPARATIONS	EAR, NOSE / THROAT MEDICATIONS	MISCELLANEOUS OTIC PREPARATIONS	0						OT	FLUOCINOLONE ACETONIDE	Y	65162070294	Enhanced
313786	45963041261	HYDROCORTISONE/ACETIC ACID	SOLN	2%; 1%	1	2	0				0		0	EAR, NOSE / THROAT MEDICATIONS	MISCELLANEOUS OTIC PREPARATIONS	EAR, NOSE / THROAT MEDICATIONS	MISCELLANEOUS OTIC PREPARATIONS	0						OT	ACETIC ACID; HYDROCORTISONE	Y	45963041261	Enhanced
242446	61314001510	OFLOXACIN	SOLN	0.3%	1	2	0				0		0	EAR, NOSE / THROAT MEDICATIONS	MISCELLANEOUS OTIC PREPARATIONS	EAR, NOSE / THROAT MEDICATIONS	MISCELLANEOUS OTIC PREPARATIONS	0						OT	OFLOXACIN	Y	61314001510	Enhanced
404630	00065853302	CIPRODEX	SUSP	0.3%; 0.1%	2	5	0				0		0	EAR, NOSE / THROAT MEDICATIONS	OTIC STEROID / ANTIBIOTIC	EAR, NOSE / THROAT MEDICATIONS	OTIC STEROID / ANTIBIOTIC	0						OT	CIPROFLOXACIN HCL; DEXAMETHASONE	W	00065853302	Enhanced
204423	24208063110	NEOMYCIN/POLYMYXIN/HC	SOLN	1%; 3.5MG/ML; 10000UNIT/ML	1	2	0				0		0	EAR, NOSE / THROAT MEDICATIONS	OTIC STEROID / ANTIBIOTIC	EAR, NOSE / THROAT MEDICATIONS	OTIC STEROID / ANTIBIOTIC	0						OT	HYDROCORTISONE; NEOMYCIN SULFATE; POLYMYXIN B	Y	24208063110	Enhanced
310687	24208063562	NEOMYCIN/POLYMYXIN/HYDROCORTISONE	SUSP	1%; 3.5MG/ML; 10000UNIT/ML	1	2	0				0		0	EAR, NOSE / THROAT MEDICATIONS	OTIC STEROID / ANTIBIOTIC	EAR, NOSE / THROAT MEDICATIONS	OTIC STEROID / ANTIBIOTIC	0						OT	HYDROCORTISONE; NEOMYCIN SULFATE; POLYMYXIN B	Y	24208063562	Enhanced
208947	00409485605	A-HYDROCORT	SOLR	100MG	1	2	0				0		0	ENDOCRINE/DIABETES	ADRENAL HORMONES	ENDOCRINE/DIABETES	ADRENAL HORMONES	0						IJ	HYDROCORTISONE SODIUM	Y	00409485605	Enhanced
1040025	63004871001	ACTHAR HP	GEL	80UNIT/ML	3	5	0				2	ACTHAR	0	ENDOCRINE/DIABETES	ADRENAL HORMONES	ENDOCRINE/DIABETES	ADRENAL HORMONES	0						IJ	CORTICOTROPIN	W	63004871001	Enhanced
526248	00143120201	CORTISONE ACETATE	TABS	25MG	1	2	0				0		0	ENDOCRINE/DIABETES	ADRENAL HORMONES	ENDOCRINE/DIABETES	ADRENAL HORMONES	0						OR	CORTISONE ACETATE	Y	00143120201	Enhanced
309698	63323016530	DEXAMETHASONE SODIUM PHOSPHATE	SOLN	4MG/ML	1	2	0				0		0	ENDOCRINE/DIABETES	ADRENAL HORMONES	ENDOCRINE/DIABETES	ADRENAL HORMONES	0						IJ	DEXAMETHASONE SODIUM	Y	63323016530	Enhanced
309684	00054317644	DEXAMETHASONE INTENSOL	CONC	1MG/ML	1	2	0				0		0	ENDOCRINE/DIABETES	ADRENAL HORMONES	ENDOCRINE/DIABETES	ADRENAL HORMONES	0						OR	DEXAMETHASONE	Y	00054317644	Enhanced
309686	00432046608	DEXAMETHASONE	ELIX	0.5MG/5ML	1	2	0				0		0	ENDOCRINE/DIABETES	ADRENAL HORMONES	ENDOCRINE/DIABETES	ADRENAL HORMONES	0						OR	DEXAMETHASONE	Y	00432046608	Enhanced
197577	00054417925	DEXAMETHASONE	TABS	0.5MG	1	2	0				0		0	ENDOCRINE/DIABETES	ADRENAL HORMONES	ENDOCRINE/DIABETES	ADRENAL HORMONES	0						OR	DEXAMETHASONE	Y	00054417925	Enhanced
343033	00054418025	DEXAMETHASONE	TABS	0.75MG	1	2	0				0		0	ENDOCRINE/DIABETES	ADRENAL HORMONES	ENDOCRINE/DIABETES	ADRENAL HORMONES	0						OR	DEXAMETHASONE	Y	00054418025	Enhanced
197580	00054418225	DEXAMETHASONE	TABS	1.5MG	1	2	0				0		0	ENDOCRINE/DIABETES	ADRENAL HORMONES	ENDOCRINE/DIABETES	ADRENAL HORMONES	0						OR	DEXAMETHASONE	Y	00054418225	Enhanced
197579	00054418125	DEXAMETHASONE	TABS	1MG	1	2	0				0		0	ENDOCRINE/DIABETES	ADRENAL HORMONES	ENDOCRINE/DIABETES	ADRENAL HORMONES	0						OR	DEXAMETHASONE	Y	00054418125	Enhanced
197581	00054418325	DEXAMETHASONE	TABS	2MG	1	2	0				0		0	ENDOCRINE/DIABETES	ADRENAL HORMONES	ENDOCRINE/DIABETES	ADRENAL HORMONES	0						OR	DEXAMETHASONE	Y	00054418325	Enhanced
197582	00054418425	DEXAMETHASONE	TABS	4MG	1	2	0				0		0	ENDOCRINE/DIABETES	ADRENAL HORMONES	ENDOCRINE/DIABETES	ADRENAL HORMONES	0						OR	DEXAMETHASONE	Y	00054418425	Enhanced
197583	00054418625	DEXAMETHASONE	TABS	6MG	1	2	0				0		0	ENDOCRINE/DIABETES	ADRENAL HORMONES	ENDOCRINE/DIABETES	ADRENAL HORMONES	0						OR	DEXAMETHASONE	Y	00054418625	Enhanced
313979	00115703301	FLUDROCORTISONE ACETATE	TABS	0.1MG	1	2	0				0		0	ENDOCRINE/DIABETES	ADRENAL HORMONES	ENDOCRINE/DIABETES	ADRENAL HORMONES	0						OR	FLUDROCORTISONE ACETATE	Y	00115703301	Enhanced
197782	00603390021	HYDROCORTISONE	TABS	10MG	1	2	0				0		0	ENDOCRINE/DIABETES	ADRENAL HORMONES	ENDOCRINE/DIABETES	ADRENAL HORMONES	0						OR	HYDROCORTISONE	Y	00603390021	Enhanced
197783	00603390121	HYDROCORTISONE	TABS	20MG	1	2	0				0		0	ENDOCRINE/DIABETES	ADRENAL HORMONES	ENDOCRINE/DIABETES	ADRENAL HORMONES	0						OR	HYDROCORTISONE	Y	00603390121	Enhanced
197787	00603389919	HYDROCORTISONE	TABS	5MG	1	2	0				0		0	ENDOCRINE/DIABETES	ADRENAL HORMONES	ENDOCRINE/DIABETES	ADRENAL HORMONES	0						OR	HYDROCORTISONE	Y	00603389919	Enhanced
1358610	00703004301	METHYLPREDNISOLONE ACETATE	SUSP	40MG/ML	1	2	0				0		0	ENDOCRINE/DIABETES	ADRENAL HORMONES	ENDOCRINE/DIABETES	ADRENAL HORMONES	0						IJ	METHYLPREDNISOLONE	Y	00703004301	Enhanced
1358617	00703005104	METHYLPREDNISOLONE ACETATE	SUSP	80MG/ML	1	2	0				0		0	ENDOCRINE/DIABETES	ADRENAL HORMONES	ENDOCRINE/DIABETES	ADRENAL HORMONES	0						IJ	METHYLPREDNISOLONE	Y	00703005104	Enhanced
314099	63323025803	METHYLPREDNISOLONE SODIUMSUCCINATE	SOLR	125MG	1	2	0				0		0	ENDOCRINE/DIABETES	ADRENAL HORMONES	ENDOCRINE/DIABETES	ADRENAL HORMONES	0						IJ	METHYLPREDNISOLONE SODIUM SUCCINATE	Y	63323025803	Enhanced
311659	63323025503	METHYLPREDNISOLONE SODIUMSUCCINATE	SOLR	40MG	1	2	0				0		0	ENDOCRINE/DIABETES	ADRENAL HORMONES	ENDOCRINE/DIABETES	ADRENAL HORMONES	0						IJ	METHYLPREDNISOLONE SODIUM SUCCINATE	Y	63323025503	Enhanced
762675	51991018831	METHYLPREDNISOLONE DOSE PACK	TABS	4MG	1	2	0				0		0	ENDOCRINE/DIABETES	ADRENAL HORMONES	ENDOCRINE/DIABETES	ADRENAL HORMONES	0						OR	METHYLPREDNISOLONE	Y	51991018831	Enhanced
328161	59746000314	METHYLPREDNISOLONE	TABS	16MG	1	2	0				3		0	ENDOCRINE/DIABETES	ADRENAL HORMONES	ENDOCRINE/DIABETES	ADRENAL HORMONES	0						OR	METHYLPREDNISOLONE	Y	59746000314	Enhanced
197971	59746001504	METHYLPREDNISOLONE	TABS	32MG	1	2	0				3		0	ENDOCRINE/DIABETES	ADRENAL HORMONES	ENDOCRINE/DIABETES	ADRENAL HORMONES	0						OR	METHYLPREDNISOLONE	Y	59746001504	Enhanced
259966	00781502201	METHYLPREDNISOLONE	TABS	4MG	1	2	0				3		0	ENDOCRINE/DIABETES	ADRENAL HORMONES	ENDOCRINE/DIABETES	ADRENAL HORMONES	0						OR	METHYLPREDNISOLONE	Y	00781502201	Enhanced
197973	59746000204	METHYLPREDNISOLONE	TABS	8MG	1	2	0				3		0	ENDOCRINE/DIABETES	ADRENAL HORMONES	ENDOCRINE/DIABETES	ADRENAL HORMONES	0						OR	METHYLPREDNISOLONE	Y	59746000204	Enhanced
808118	16477050501	MILLIPRED	TABS	5MG	1	2	0				3		0	ENDOCRINE/DIABETES	ADRENAL HORMONES	ENDOCRINE/DIABETES	ADRENAL HORMONES	0						OR	PREDNISOLONE ANHYDROUS	Y	16477050501	Enhanced
312614	50383004004	PREDNISOLONE SODIUM PHOSPHATE	SOLN	5MG/5ML	1	2	0				0		0	ENDOCRINE/DIABETES	ADRENAL HORMONES	ENDOCRINE/DIABETES	ADRENAL HORMONES	0						OR	PREDNISOLONE SODIUM	Y	50383004004	Enhanced
283077	60432021208	PREDNISOLONE SODIUM PHOSPHATE	SOLN	15MG/5ML	1	2	0				0		0	ENDOCRINE/DIABETES	ADRENAL HORMONES	ENDOCRINE/DIABETES	ADRENAL HORMONES	0						OR	PREDNISOLONE SODIUM	Y	60432021208	Enhanced
249066	00178058208	PREDNISOLONE SODIUM PHOSPHATE	SOLN	25MG/5ML	1	2	0				0		0	ENDOCRINE/DIABETES	ADRENAL HORMONES	ENDOCRINE/DIABETES	ADRENAL HORMONES	0						OR	PREDNISOLONE SODIUM	Y	00178058208	Enhanced
205301	00054372144	PREDNISONE INTENSOL	CONC	5MG/ML	1	2	0				0		0	ENDOCRINE/DIABETES	ADRENAL HORMONES	ENDOCRINE/DIABETES	ADRENAL HORMONES	0						OR	PREDNISONE	Y	00054372144	Enhanced
315187	00054372263	PREDNISONE	SOLN	5MG/5ML	1	2	0				0		0	ENDOCRINE/DIABETES	ADRENAL HORMONES	ENDOCRINE/DIABETES	ADRENAL HORMONES	0						OR	PREDNISONE	Y	00054372263	Enhanced
198145	00591544201	PREDNISONE	TABS	10MG	1	2	0				3		0	ENDOCRINE/DIABETES	ADRENAL HORMONES	ENDOCRINE/DIABETES	ADRENAL HORMONES	0						OR	PREDNISONE	Y	00591544201	Enhanced
198144	00603533532	PREDNISONE	TABS	1MG	1	2	0				3		0	ENDOCRINE/DIABETES	ADRENAL HORMONES	ENDOCRINE/DIABETES	ADRENAL HORMONES	0						OR	PREDNISONE	Y	00603533532	Enhanced
198146	00603533621	PREDNISONE	TABS	2.5MG	1	2	0				3		0	ENDOCRINE/DIABETES	ADRENAL HORMONES	ENDOCRINE/DIABETES	ADRENAL HORMONES	0						OR	PREDNISONE	Y	00603533621	Enhanced
312615	00591544310	PREDNISONE	TABS	20MG	1	2	0				3		0	ENDOCRINE/DIABETES	ADRENAL HORMONES	ENDOCRINE/DIABETES	ADRENAL HORMONES	0						OR	PREDNISONE	Y	00591544310	Enhanced
198148	00054001925	PREDNISONE	TABS	50MG	1	2	0				3		0	ENDOCRINE/DIABETES	ADRENAL HORMONES	ENDOCRINE/DIABETES	ADRENAL HORMONES	0						OR	PREDNISONE	Y	00054001925	Enhanced
312617	00143147501	PREDNISONE	TABS	5MG	1	2	0				3		0	ENDOCRINE/DIABETES	ADRENAL HORMONES	ENDOCRINE/DIABETES	ADRENAL HORMONES	0						OR	PREDNISONE	Y	00143147501	Enhanced
824889	63717091508	VERIPRED 20	SOLN	20MG/5ML	1	2	0				0		0	ENDOCRINE/DIABETES	ADRENAL HORMONES	ENDOCRINE/DIABETES	ADRENAL HORMONES	0						OR	PREDNISOLONE SODIUM	Y	63717091508	Enhanced
197941	68084027601	METHIMAZOLE	TABS	10MG	1	2	0				0		0	ENDOCRINE/DIABETES	ANTITHYROID AGENTS	ENDOCRINE/DIABETES	ANTITHYROID AGENTS	0						OR	METHIMAZOLE	Y	68084027601	Enhanced
197942	00185020501	METHIMAZOLE	TABS	5MG	1	2	0				0		0	ENDOCRINE/DIABETES	ANTITHYROID AGENTS	ENDOCRINE/DIABETES	ANTITHYROID AGENTS	0						OR	METHIMAZOLE	Y	00185020501	Enhanced
198175	00228234810	PROPYLTHIOURACIL	TABS	50MG	1	2	0				0		0	ENDOCRINE/DIABETES	ANTITHYROID AGENTS	ENDOCRINE/DIABETES	ANTITHYROID AGENTS	0						OR	PROPYLTHIOURACIL	Y	00228234810	Enhanced
199150	00378262210	ACARBOSE	TABS	100MG	1	2	1	270	90	0	0		0	ENDOCRINE/DIABETES	DIABETES THERAPY	ENDOCRINE/DIABETES	DIABETES THERAPY	0						OR	ACARBOSE	Y	00378262210	Enhanced
200132	00054014025	ACARBOSE	TABS	25MG	1	2	1	1080	90	0	0		0	ENDOCRINE/DIABETES	DIABETES THERAPY	ENDOCRINE/DIABETES	DIABETES THERAPY	0						OR	ACARBOSE	Y	00054014025	Enhanced
199149	00054014125	ACARBOSE	TABS	50MG	1	2	1	540	90	0	0		0	ENDOCRINE/DIABETES	DIABETES THERAPY	ENDOCRINE/DIABETES	DIABETES THERAPY	0						OR	ACARBOSE	Y	00054014125	Enhanced
797544	00536099201	ALCOHOL PREPS	PADS		2	5	0				0		0	ENDOCRINE/DIABETES	DIABETES THERAPY	ENDOCRINE/DIABETES	DIABETES THERAPY	0						XX		Y	00536099201	Enhanced
637093	08290328209	BD PEN NEEDLE/ULTRAFINE/29G X 12.7MM	MISC		2	5	0				0		0	ENDOCRINE/DIABETES	DIABETES THERAPY	ENDOCRINE/DIABETES	DIABETES THERAPY	0						XX		W	08290328209	Enhanced
1242968	66780021904	BYDUREON	SUSR	2MG	2	5	1	12	84	2	GLUCAGON-LIKE PEPTIDE-1 AGONISTS		0	ENDOCRINE/DIABETES	DIABETES THERAPY	ENDOCRINE/DIABETES	DIABETES THERAPY	0						SC	EXENATIDE	W	66780021904	Enhanced
847913	66780021201	BYETTA	SOLN	10MCG/0.04ML	2	5	1	7.2	90	2	GLUCAGON-LIKE PEPTIDE-1 AGONISTS		0	ENDOCRINE/DIABETES	DIABETES THERAPY	ENDOCRINE/DIABETES	DIABETES THERAPY	0						SC	EXENATIDE	W	66780021201	Enhanced
847917	66780021007	BYETTA	SOLN	5MCG/0.02ML	2	5	1	3.6	90	2	GLUCAGON-LIKE PEPTIDE-1 AGONISTS		0	ENDOCRINE/DIABETES	DIABETES THERAPY	ENDOCRINE/DIABETES	DIABETES THERAPY	0						SC	EXENATIDE	W	66780021007	Enhanced
636967	08225790000	CURITY GAUZE PADS 2"X2"	PADS		2	5	0				0		0	ENDOCRINE/DIABETES	DIABETES THERAPY	ENDOCRINE/DIABETES	DIABETES THERAPY	0						XX		W	08225790000	Enhanced
199245	55111032001	GLIMEPIRIDE	TABS	1MG	1	2	1	720	90	0	0		0	ENDOCRINE/DIABETES	DIABETES THERAPY	ENDOCRINE/DIABETES	DIABETES THERAPY	2	1	HIGH RISK MEDICATIONS - LONG ACTING SULFONYLUREAS	1				OR	GLIMEPIRIDE	Y	55111032001	Enhanced
199246	55111032101	GLIMEPIRIDE	TABS	2MG	1	2	1	360	90	0	0		0	ENDOCRINE/DIABETES	DIABETES THERAPY	ENDOCRINE/DIABETES	DIABETES THERAPY	2	1	HIGH RISK MEDICATIONS - LONG ACTING SULFONYLUREAS	1				OR	GLIMEPIRIDE	Y	55111032101	Enhanced
199247	55111032201	GLIMEPIRIDE	TABS	4MG	1	2	1	180	90	0	0		0	ENDOCRINE/DIABETES	DIABETES THERAPY	ENDOCRINE/DIABETES	DIABETES THERAPY	2	1	HIGH RISK MEDICATIONS - LONG ACTING SULFONYLUREAS	1				OR	GLIMEPIRIDE	Y	55111032201	Enhanced
861731	00378313101	GLIPIZIDE/METFORMIN HCL	TABS	2.5MG; 250MG	1	2	1	720	90	0	0		0	ENDOCRINE/DIABETES	DIABETES THERAPY	ENDOCRINE/DIABETES	DIABETES THERAPY	2	1	HIGH RISK MEDICATIONS - LONG ACTING SULFONYLUREAS	2				OR	GLIPIZIDE; METFORMIN HYDROCHLORIDE	Y	00378313101	Enhanced
861736	00093745601	GLIPIZIDE/METFORMIN HCL	TABS	2.5MG; 500MG	1	2	1	360	90	0	0		0	ENDOCRINE/DIABETES	DIABETES THERAPY	ENDOCRINE/DIABETES	DIABETES THERAPY	2	1	HIGH RISK MEDICATIONS - LONG ACTING SULFONYLUREAS	2				OR	GLIPIZIDE; METFORMIN HYDROCHLORIDE	Y	00093745601	Enhanced
861740	00591397301	GLIPIZIDE/METFORMIN HCL	TABS	5MG; 500MG	1	2	1	360	90	0	0		0	ENDOCRINE/DIABETES	DIABETES THERAPY	ENDOCRINE/DIABETES	DIABETES THERAPY	2	1	HIGH RISK MEDICATIONS - LONG ACTING SULFONYLUREAS	2				OR	GLIPIZIDE; METFORMIN HYDROCHLORIDE	Y	00591397301	Enhanced
310488	00378111001	GLIPIZIDE	TABS	10MG	1	2	1	360	90	0	0		0	ENDOCRINE/DIABETES	DIABETES THERAPY	ENDOCRINE/DIABETES	DIABETES THERAPY	2	1	HIGH RISK MEDICATIONS - LONG ACTING SULFONYLUREAS	1				OR	GLIPIZIDE	Y	00378111001	Enhanced
310490	00172364960	GLIPIZIDE	TABS	5MG	1	2	1	720	90	0	0		0	ENDOCRINE/DIABETES	DIABETES THERAPY	ENDOCRINE/DIABETES	DIABETES THERAPY	2	1	HIGH RISK MEDICATIONS - LONG ACTING SULFONYLUREAS	1				OR	GLIPIZIDE	Y	00172364960	Enhanced
315107	00591084501	GLIPIZIDE ER	TB24	10MG	1	2	1	180	90	0	0		0	ENDOCRINE/DIABETES	DIABETES THERAPY	ENDOCRINE/DIABETES	DIABETES THERAPY	0						OR	GLIPIZIDE	Y	00591084501	Enhanced
310489	00591090030	GLIPIZIDE ER	TB24	2.5MG	1	2	1	720	90	0	0		0	ENDOCRINE/DIABETES	DIABETES THERAPY	ENDOCRINE/DIABETES	DIABETES THERAPY	0						OR	GLIPIZIDE	Y	00591090030	Enhanced
314006	00591084401	GLIPIZIDE ER	TB24	5MG	1	2	1	360	90	0	0		0	ENDOCRINE/DIABETES	DIABETES THERAPY	ENDOCRINE/DIABETES	DIABETES THERAPY	0						OR	GLIPIZIDE	Y	00591084401	Enhanced
153095	00169706515	GLUCAGEN HYPOKIT	SOLR	1MG	2	5	0				0		0	ENDOCRINE/DIABETES	DIABETES THERAPY	ENDOCRINE/DIABETES	DIABETES THERAPY	0						IJ	GLUCAGON HYDROCHLORIDE	W	00169706515	Enhanced
310497	00002803101	GLUCAGON EMERGENCY KIT	KIT	1MG	2	5	0				0		0	ENDOCRINE/DIABETES	DIABETES THERAPY	ENDOCRINE/DIABETES	DIABETES THERAPY	0						IJ	GLUCAGON RDNA (HUMAN	W	00002803101	Enhanced
861743	00093571001	GLYBURIDE/METFORMIN HCL	TABS	1.25MG; 250MG	1	2	1	720	90	0	0		0	ENDOCRINE/DIABETES	DIABETES THERAPY	ENDOCRINE/DIABETES	DIABETES THERAPY	2	1	HIGH RISK MEDICATIONS - LONG ACTING SULFONYLUREAS	2				OR	GLYBURIDE; METFORMIN HYDROCHLORIDE	Y	00093571001	Enhanced
861748	00228275250	GLYBURIDE/METFORMIN HCL	TABS	2.5MG; 500MG	1	2	1	360	90	0	0		0	ENDOCRINE/DIABETES	DIABETES THERAPY	ENDOCRINE/DIABETES	DIABETES THERAPY	2	1	HIGH RISK MEDICATIONS - LONG ACTING SULFONYLUREAS	2				OR	GLYBURIDE; METFORMIN HYDROCHLORIDE	Y	00228275250	Enhanced
861753	00228275350	GLYBURIDE/METFORMIN HCL	TABS	5MG; 500MG	1	2	1	360	90	0	0		0	ENDOCRINE/DIABETES	DIABETES THERAPY	ENDOCRINE/DIABETES	DIABETES THERAPY	2	1	HIGH RISK MEDICATIONS - LONG ACTING SULFONYLUREAS	2				OR	GLYBURIDE; METFORMIN HYDROCHLORIDE	Y	00228275350	Enhanced
314000	00378111301	GLYBURIDE MICRONIZED	TABS	1.5MG	1	2	1	720	90	0	0		0	ENDOCRINE/DIABETES	DIABETES THERAPY	ENDOCRINE/DIABETES	DIABETES THERAPY	2	1	HIGH RISK MEDICATIONS - LONG ACTING SULFONYLUREAS	2				OR	GLYBURIDE	Y	00378111301	Enhanced
310536	00093803501	GLYBURIDE MICRONIZED	TABS	3MG	1	2	1	360	90	0	0		0	ENDOCRINE/DIABETES	DIABETES THERAPY	ENDOCRINE/DIABETES	DIABETES THERAPY	2	1	HIGH RISK MEDICATIONS - LONG ACTING SULFONYLUREAS	2				OR	GLYBURIDE	Y	00093803501	Enhanced
310539	00143992005	GLYBURIDE MICRONIZED	TABS	6MG	1	2	1	180	90	0	0		0	ENDOCRINE/DIABETES	DIABETES THERAPY	ENDOCRINE/DIABETES	DIABETES THERAPY	2	1	HIGH RISK MEDICATIONS - LONG ACTING SULFONYLUREAS	2				OR	GLYBURIDE	Y	00143992005	Enhanced
197737	00093834201	GLYBURIDE	TABS	1.25MG	1	2	1	1440	90	0	0		0	ENDOCRINE/DIABETES	DIABETES THERAPY	ENDOCRINE/DIABETES	DIABETES THERAPY	2	1	HIGH RISK MEDICATIONS - LONG ACTING SULFONYLUREAS	2				OR	GLYBURIDE	Y	00093834201	Enhanced
310534	00093834301	GLYBURIDE	TABS	2.5MG	1	2	1	720	90	0	0		0	ENDOCRINE/DIABETES	DIABETES THERAPY	ENDOCRINE/DIABETES	DIABETES THERAPY	2	1	HIGH RISK MEDICATIONS - LONG ACTING SULFONYLUREAS	2				OR	GLYBURIDE	Y	00093834301	Enhanced
310537	00093834405	GLYBURIDE	TABS	5MG	1	2	1	360	90	0	0		0	ENDOCRINE/DIABETES	DIABETES THERAPY	ENDOCRINE/DIABETES	DIABETES THERAPY	2	1	HIGH RISK MEDICATIONS - LONG ACTING SULFONYLUREAS	2				OR	GLYBURIDE	Y	00093834405	Enhanced
731281	00002751201	HUMALOG MIX 50/50	SUSP	50UNIT/ML; 50UNIT/ML	2	5	0				0		0	ENDOCRINE/DIABETES	DIABETES THERAPY	ENDOCRINE/DIABETES	DIABETES THERAPY	0						SC	INSULIN LISPRO; INSULIN	W	00002751201	Enhanced
847213	00002879859	HUMALOG MIX 50/50 KWIKPEN	SUSP	50UNIT/ML; 50UNIT/ML	2	5	0				0		0	ENDOCRINE/DIABETES	DIABETES THERAPY	ENDOCRINE/DIABETES	DIABETES THERAPY	0						SC	INSULIN LISPRO; INSULIN	W	00002879859	Enhanced
847254	00002879759	HUMALOG MIX 75/25 KWIKPEN	SUSP	25UNIT/ML; 75UNIT/ML	2	5	0				0		0	ENDOCRINE/DIABETES	DIABETES THERAPY	ENDOCRINE/DIABETES	DIABETES THERAPY	0						SC	INSULIN LISPRO; INSULIN	W	00002879759	Enhanced
752388	00002751101	HUMALOG MIX 75/25	SUSP	25UNIT/ML; 75UNIT/ML	2	5	0				0		0	ENDOCRINE/DIABETES	DIABETES THERAPY	ENDOCRINE/DIABETES	DIABETES THERAPY	0						SC	INSULIN LISPRO; INSULIN	W	00002751101	Enhanced
213441	00002871501	HUMULIN 70/30	SUSP	30UNIT/ML; 70UNIT/ML	2	5	0				0		0	ENDOCRINE/DIABETES	DIABETES THERAPY	ENDOCRINE/DIABETES	DIABETES THERAPY	0						SC	INSULIN HUMAN (REGULAR);	W	00002871501	Enhanced
311026	00002831501	HUMULIN N	SUSP	100UNIT/ML	2	5	0				0		0	ENDOCRINE/DIABETES	DIABETES THERAPY	ENDOCRINE/DIABETES	DIABETES THERAPY	0						SC	INSULIN HUMAN; ISOPHANE	W	00002831501	Enhanced
847199	00002873059	HUMULIN N U-100 PEN	SUSP	100UNIT/ML	2	5	0				0		0	ENDOCRINE/DIABETES	DIABETES THERAPY	ENDOCRINE/DIABETES	DIABETES THERAPY	0						SC	INSULIN HUMAN; ISOPHANE	W	00002873059	Enhanced
847189	00002877059	HUMULIN 70/30 PEN	SUSP	30UNIT/ML; 70UNIT/ML	2	5	0				0		0	ENDOCRINE/DIABETES	DIABETES THERAPY	ENDOCRINE/DIABETES	DIABETES THERAPY	0						SC	INSULIN HUMAN (REGULAR);	W	00002877059	Enhanced
311036	00002821501	HUMULIN R	SOLN	100UNIT/ML	2	5	0				0		0	ENDOCR

801007	68382002810	METFORMIN HCL	TABS	500MG	1	2	1	450	90	0			0	ENDOCRINE/DIABETES	DIABETES THERAPY	ENDOCRINE/DIABETES	DIABETES THERAPY	0									OR	METFORMIN HYDROCHLORIDE	Y	68382002810	Enhanced
865975	00185441601	METFORMIN HCL ER	TB24	500MG	1	2	1	360	90	0			0	ENDOCRINE/DIABETES	DIABETES THERAPY	ENDOCRINE/DIABETES	DIABETES THERAPY	0									OR	METFORMIN HYDROCHLORIDE	Y	00185441601	Enhanced
865981	65505132901	METFORMIN HCL ER	TB24	750MG	1	2	1	225	90	0			0	ENDOCRINE/DIABETES	DIABETES THERAPY	ENDOCRINE/DIABETES	DIABETES THERAPY	0									OR	METFORMIN HYDROCHLORIDE	Y	65505132901	Enhanced
861010	57664043551	METFORMIN HCL	TABS	850MG	1	2	1	270	90	0			0	ENDOCRINE/DIABETES	DIABETES THERAPY	ENDOCRINE/DIABETES	DIABETES THERAPY	0									OR	METFORMIN HYDROCHLORIDE	Y	57664043551	Enhanced
865996	68180033707	METFORMIN HCL ER	TB24	1000MG	1	2	1	180	90	0			0	ENDOCRINE/DIABETES	DIABETES THERAPY	ENDOCRINE/DIABETES	DIABETES THERAPY	0									OR	METFORMIN HYDROCHLORIDE	Y	68180033707	Enhanced
311919	55111032990	NATEGLINIDE	TABS	120MG	1	2	1	270	90	0			0	ENDOCRINE/DIABETES	DIABETES THERAPY	ENDOCRINE/DIABETES	DIABETES THERAPY	0									OR	NATEGLINIDE	Y	55111032990	Enhanced
314142	55111032890	NATEGLINIDE	TABS	60MG	1	2	1	540	90	0			0	ENDOCRINE/DIABETES	DIABETES THERAPY	ENDOCRINE/DIABETES	DIABETES THERAPY	0									OR	NATEGLINIDE	Y	55111032890	Enhanced
213442	00169183711	NOVOLIN 70/30	SUSP	100UNIT/ML; 70UNIT/ML	2	5	0			0			0	ENDOCRINE/DIABETES	DIABETES THERAPY	ENDOCRINE/DIABETES	DIABETES THERAPY	0									SC	INSULIN HUMAN [REGULAR]	W	00169183711	Enhanced
311027	00169183411	NOVOLIN N	SUSP	100UNIT/ML	2	5	0			0			0	ENDOCRINE/DIABETES	DIABETES THERAPY	ENDOCRINE/DIABETES	DIABETES THERAPY	0									SC	INSULIN HUMAN, ISOPHANE	W	00169183411	Enhanced
311033	00169183311	NOVOLIN R	SOLN	100UNIT/ML	2	5	0			0			0	ENDOCRINE/DIABETES	DIABETES THERAPY	ENDOCRINE/DIABETES	DIABETES THERAPY	0									IJ	INSULIN HUMAN [REGULAR]	W	00169183311	Enhanced
351926	00169750111	NOVOLOG	SOLN	100UNIT/ML	2	5	0			0			0	ENDOCRINE/DIABETES	DIABETES THERAPY	ENDOCRINE/DIABETES	DIABETES THERAPY	0									SC	INSULIN ASPART (HUMAN	W	00169750111	Enhanced
847265	00169633910	NOVOLOG FLEXPEN	SOLN	100UNIT/ML	2	5	0			0			0	ENDOCRINE/DIABETES	DIABETES THERAPY	ENDOCRINE/DIABETES	DIABETES THERAPY	0									SC	INSULIN ASPART (HUMAN	W	00169633910	Enhanced
977842	00169368512	NOVOLOG MIX 70/30	SUSP	30UNIT/ML; 70UNIT/ML	2	5	0			0			0	ENDOCRINE/DIABETES	DIABETES THERAPY	ENDOCRINE/DIABETES	DIABETES THERAPY	0									SC	INSULIN ASPART (HUMAN	W	00169368512	Enhanced
977840	00169369619	NOVOLOG MIX 70/30 PREFILLED FLEXPEN	SUSP	30UNIT/ML; 70UNIT/ML	2	5	0			0			0	ENDOCRINE/DIABETES	DIABETES THERAPY	ENDOCRINE/DIABETES	DIABETES THERAPY	0									SC	INSULIN ASPART (HUMAN	W	00169369619	Enhanced
647237	00781563431	PIOGLITAZONE HCL-GLIMEPIRIDE	TABS	2MG; 30MG	1	2	1	90	90	0			0	ENDOCRINE/DIABETES	DIABETES THERAPY	ENDOCRINE/DIABETES	DIABETES THERAPY	0									OR	GLIMEPIRIDE; PIOGLITAZONE	Y	00781563431	Enhanced
647239	00781563531	PIOGLITAZONE HCL-GLIMEPIRIDE	TABS	4MG; 30MG	1	2	1	90	90	0			0	ENDOCRINE/DIABETES	DIABETES THERAPY	ENDOCRINE/DIABETES	DIABETES THERAPY	0									OR	GLIMEPIRIDE; PIOGLITAZONE	Y	00781563531	Enhanced
861783	00378155091	PIOGLITAZONE HCL/METFORMIN HCL	TABS	500MG; 15MG	1	2	1	270	90	0			0	ENDOCRINE/DIABETES	DIABETES THERAPY	ENDOCRINE/DIABETES	DIABETES THERAPY	0									OR	METFORMIN HYDROCHLORIDE;	Y	00378155091	Enhanced
861622	00378157591	PIOGLITAZONE HCL/METFORMIN HCL	TABS	850MG; 15MG	1	2	1	270	90	0			0	ENDOCRINE/DIABETES	DIABETES THERAPY	ENDOCRINE/DIABETES	DIABETES THERAPY	0									OR	METFORMIN HYDROCHLORIDE;	Y	00378157591	Enhanced
317573	00378004877	PIOGLITAZONE HCL	TABS	15MG	1	2	1	90	90	0			0	ENDOCRINE/DIABETES	DIABETES THERAPY	ENDOCRINE/DIABETES	DIABETES THERAPY	0									OR	PIOGLITAZONE	Y	00378004877	Enhanced
312440	00378022893	PIOGLITAZONE HCL	TABS	30MG	1	2	1	90	90	0			0	ENDOCRINE/DIABETES	DIABETES THERAPY	ENDOCRINE/DIABETES	DIABETES THERAPY	0									OR	PIOGLITAZONE	Y	00378022893	Enhanced
312441	00378031877	PIOGLITAZONE HCL	TABS	45MG	1	2	1	90	90	0			0	ENDOCRINE/DIABETES	DIABETES THERAPY	ENDOCRINE/DIABETES	DIABETES THERAPY	0									OR	PIOGLITAZONE	Y	00378031877	Enhanced
207634	00075620030	PROGLYCEM	SUSP	50MG/ML	2	5	0			0			0	ENDOCRINE/DIABETES	DIABETES THERAPY	ENDOCRINE/DIABETES	DIABETES THERAPY	0									OR	DIAZOXIDE	W	00075620030	Enhanced
861027	10631020602	RIOMET	SOLN	500MG/5ML	2	5	1	2295	90	0			0	ENDOCRINE/DIABETES	DIABETES THERAPY	ENDOCRINE/DIABETES	DIABETES THERAPY	0									OR	METFORMIN HYDROCHLORIDE	W	10631020602	Enhanced
861045	66780011502	SYMLINPEN 60	SOLN	1500MCG/1.5ML	2	5	1	32	90	1	SYMLIN	0	ENDOCRINE/DIABETES	DIABETES THERAPY	ENDOCRINE/DIABETES	DIABETES THERAPY	0									SC	PRAMLINTIDE ACETATE	W	66780011502	Enhanced
861043	66780012102	SYMLINPEN 120	SOLN	2700MCG/2.7ML	2	5	1	57	90	1	SYMLIN	0	ENDOCRINE/DIABETES	DIABETES THERAPY	ENDOCRINE/DIABETES	DIABETES THERAPY	0									SC	PRAMLINTIDE ACETATE	W	66780012102	Enhanced
198292	00378021701	TOLAZAMIDE	TABS	250MG	1	2	1	360	90	0			0	ENDOCRINE/DIABETES	DIABETES THERAPY	ENDOCRINE/DIABETES	DIABETES THERAPY	0									OR	TOLAZAMIDE	Y	00378021701	Enhanced
198293	00378055101	TOLAZAMIDE	TABS	500MG	1	2	1	180	90	0			0	ENDOCRINE/DIABETES	DIABETES THERAPY	ENDOCRINE/DIABETES	DIABETES THERAPY	0									OR	TOLAZAMIDE	Y	00378055101	Enhanced
198294	00378021505	TOLBUTAMIDE	TABS	500MG	1	2	1	540	90	0			0	ENDOCRINE/DIABETES	DIABETES THERAPY	ENDOCRINE/DIABETES	DIABETES THERAPY	0			2	1	HIGH RISK MEDICATIONS - LONG ACTING SULFONYLUREAS				OR	TOLBUTAMIDE	Y	00378021505	Enhanced
404492	58468007001	ALDURAZYME	SOLN	2.9MG/5ML	3	5	0			0			0	ENDOCRINE/DIABETES	MISCELLANEOUS HORMONES	ENDOCRINE/DIABETES	MISCELLANEOUS HORMONES	0									IV	LARONIDASE	W	58468007001	Enhanced
285015	00051845030	ANDROGEL	GEL	50MG/5GM	2	5	0			1	TOPICAL TESTOSTERONE PRODUCTS	0	ENDOCRINE/DIABETES	MISCELLANEOUS HORMONES	ENDOCRINE/DIABETES	MISCELLANEOUS HORMONES	0									TD	TESTOSTERONE	W	00051845030	Enhanced
1100711	00051846233	ANDROGEL PUMP	GEL	1.62%	2	5	0			1	TOPICAL TESTOSTERONE PRODUCTS	0	ENDOCRINE/DIABETES	MISCELLANEOUS HORMONES	ENDOCRINE/DIABETES	MISCELLANEOUS HORMONES	0									TD	TESTOSTERONE	W	00051846233	Enhanced
692688	00832008600	ANDROXY	TABS	10MG	1	2	0			0			0	ENDOCRINE/DIABETES	MISCELLANEOUS HORMONES	ENDOCRINE/DIABETES	MISCELLANEOUS HORMONES	0									OR	FLUOXYMESTERONE	Y	00832008600	Enhanced
199703	00093542088	CABERGOLINE	TABS	0.5MG	1	2	1	24	84	0			0	ENDOCRINE/DIABETES	MISCELLANEOUS HORMONES	ENDOCRINE/DIABETES	MISCELLANEOUS HORMONES	0									OR	CABERGOLINE	Y	00093542088	Enhanced
313919	00050083206	CALCITONIN-SALMON	SOLN	200UNIT/ACT	1	2	0			0			0	ENDOCRINE/DIABETES	MISCELLANEOUS HORMONES	ENDOCRINE/DIABETES	MISCELLANEOUS HORMONES	0									NA	CALCITONIN,SALMON	Y	00050083206	Enhanced
308867	00054000725	CALCITRIOL	CAPS	0.25MCG	1	2	0			3			0	ENDOCRINE/DIABETES	MISCELLANEOUS HORMONES	ENDOCRINE/DIABETES	MISCELLANEOUS HORMONES	0									OR	CALCITRIOL	Y	00054000725	Enhanced
308868	00093065801	CALCITRIOL	CAPS	0.5MCG	1	2	0			3			0	ENDOCRINE/DIABETES	MISCELLANEOUS HORMONES	ENDOCRINE/DIABETES	MISCELLANEOUS HORMONES	0									OR	CALCITRIOL	Y	00093065801	Enhanced
308869	00517013225	CALCITRIOL	SOLN	1MCG/ML	1	2	0			3			0	ENDOCRINE/DIABETES	MISCELLANEOUS HORMONES	ENDOCRINE/DIABETES	MISCELLANEOUS HORMONES	0									IV	CALCITRIOL	Y	00517013225	Enhanced
313932	00054312041	CALCITRIOL	SOLN	1MCG/ML	1	2	0			3			0	ENDOCRINE/DIABETES	MISCELLANEOUS HORMONES	ENDOCRINE/DIABETES	MISCELLANEOUS HORMONES	0									OR	CALCITRIOL	Y	00054312041	Enhanced
605882	58468198301	CEREZYME	SOLR	200UNIT	3	5	0			0			0	ENDOCRINE/DIABETES	MISCELLANEOUS HORMONES	ENDOCRINE/DIABETES	MISCELLANEOUS HORMONES	0									IV	IMIGLUCERASE	W	58468198301	Enhanced
896864	63323002510	CHORIONIC GONADOTROPIN	SOLR	10000UNIT	1	2	0			1	CHORIONIC GONADOTROPINS (HCG)	0	ENDOCRINE/DIABETES	MISCELLANEOUS HORMONES	ENDOCRINE/DIABETES	MISCELLANEOUS HORMONES	0									IM	GONADOTROPIN, CHORIONIC	Y	63323002510	Enhanced
197554	00555063402	DANAZOL	CAPS	100MG	1	2	0			0			0	ENDOCRINE/DIABETES	MISCELLANEOUS HORMONES	ENDOCRINE/DIABETES	MISCELLANEOUS HORMONES	0									OR	DANAZOL	Y	00555063402	Enhanced
197555	00555063502	DANAZOL	CAPS	200MG	1	2	0			0			0	ENDOCRINE/DIABETES	MISCELLANEOUS HORMONES	ENDOCRINE/DIABETES	MISCELLANEOUS HORMONES	0									OR	DANAZOL	Y	00555063502	Enhanced
197556	00555063302	DANAZOL	CAPS	50MG	1	2	0			0			0	ENDOCRINE/DIABETES	MISCELLANEOUS HORMONES	ENDOCRINE/DIABETES	MISCELLANEOUS HORMONES	0									OR	DANAZOL	Y	00555063302	Enhanced
849501	00703505401	DESMOPRESSIN ACETATE	SOLN	4MCG/ML	1	2	0			0			0	ENDOCRINE/DIABETES	MISCELLANEOUS HORMONES	ENDOCRINE/DIABETES	MISCELLANEOUS HORMONES	0									IJ	DESMOPRESSIN ACETATE	Y	00703505401	Enhanced
849506	24208034205	DESMOPRESSIN ACETATE	SOLN	0.01%	1	2	0			0			0	ENDOCRINE/DIABETES	MISCELLANEOUS HORMONES	ENDOCRINE/DIABETES	MISCELLANEOUS HORMONES	0									NA	DESMOPRESSIN ACETATE	Y	24208034205	Enhanced
849515	00093731601	DESMOPRESSIN ACETATE	TABS	0.1MG	1	2	0			0			0	ENDOCRINE/DIABETES	MISCELLANEOUS HORMONES	ENDOCRINE/DIABETES	MISCELLANEOUS HORMONES	0									OR	DESMOPRESSIN ACETATE	Y	00093731601	Enhanced
833008	00093731701	DESMOPRESSIN ACETATE	TABS	0.2MG	1	2	0			0			0	ENDOCRINE/DIABETES	MISCELLANEOUS HORMONES	ENDOCRINE/DIABETES	MISCELLANEOUS HORMONES	0									OR	DESMOPRESSIN ACETATE	Y	00093731701	Enhanced
647118	54092070001	ELAPRASE	SOLN	6MG/3ML	3	5	0			0			0	ENDOCRINE/DIABETES	MISCELLANEOUS HORMONES	ENDOCRINE/DIABETES	MISCELLANEOUS HORMONES	0									IV	IDURSULFASE	W	54092070001	Enhanced
1292881	00069010601	ELELYSO	SOLR	200UNIT	3	5	0			0			0	ENDOCRINE/DIABETES	MISCELLANEOUS HORMONES	ENDOCRINE/DIABETES	MISCELLANEOUS HORMONES	0									IV	TALIGLUCERASE ALFA	W	00069010601	Enhanced
404491	58468004001	FABRAZYME	SOLR	35MG	3	5	0			0			0	ENDOCRINE/DIABETES	MISCELLANEOUS HORMONES	ENDOCRINE/DIABETES	MISCELLANEOUS HORMONES	0									IV	AGALSIDASE BETA	W	58468004001	Enhanced
588596	00245000830	FORTICAL	SOLN	200UNIT/ACT	1	2	0			0			0	ENDOCRINE/DIABETES	MISCELLANEOUS HORMONES	ENDOCRINE/DIABETES	MISCELLANEOUS HORMONES	0									NA	CALCITONIN, SALMON (RDNA)	Y	00245000830	Enhanced
1111020	68133030002	KUVAN	TBSO	100MG	3	5	0			1			0	ENDOCRINE/DIABETES	MISCELLANEOUS HORMONES	ENDOCRINE/DIABETES	MISCELLANEOUS HORMONES	0									OR	SAPROPTERIN	W	68133030002	Enhanced
993072	58468016001	LUMIZYME	SOLR	50MG	3	5	0			1			0	ENDOCRINE/DIABETES	MISCELLANEOUS HORMONES	ENDOCRINE/DIABETES	MISCELLANEOUS HORMONES	0									IV	ALGLUCOSIDASE ALFA	W	58468016001	Enhanced
541524	00111070701	METHITEST	TABS	10MG	2	5	0			3			0	ENDOCRINE/DIABETES	MISCELLANEOUS HORMONES	ENDOCRINE/DIABETES	MISCELLANEOUS HORMONES	0									OR	METHYLTESTOSTERONE	W	00111070701	Enhanced
213570	00078014923	MIACALCIN	SOLN	200UNIT/ML	2	5	0			3			0	ENDOCRINE/DIABETES	MISCELLANEOUS HORMONES	ENDOCRINE/DIABETES	MISCELLANEOUS HORMONES	0									IJ	CALCITONIN,SALMON	W	00078014923	Enhanced
630679	58468015001	MYOZYME	SOLR	50MG	3	5	0			0			0	ENDOCRINE/DIABETES	MISCELLANEOUS HORMONES	ENDOCRINE/DIABETES	MISCELLANEOUS HORMONES	0									IV	ALGLUCOSIDASE ALFA	W	58468015001	Enhanced
584222	68133002001	NAGLAZYME	SOLN	1MG/ML	3	5	0			1			0	ENDOCRINE/DIABETES	MISCELLANEOUS HORMONES	ENDOCRINE/DIABETES	MISCELLANEOUS HORMONES	0									IV	GALSULFASE	W	68133002001	Enhanced
896872	55566150101	NOVAREL	SOLR	10000UNIT	1	2	0			1	CHORIONIC GONADOTROPINS (HCG)	0	ENDOCRINE/DIABETES	MISCELLANEOUS HORMONES	ENDOCRINE/DIABETES	MISCELLANEOUS HORMONES	0									IM	GONADOTROPIN, CHORIONIC	Y	55566150101	Enhanced
351276	00245027206	OXANDROLONE	TABS	10MG	3	2	0			0	ANABOLIC STEROIDS	0	ENDOCRINE/DIABETES	MISCELLANEOUS HORMONES	ENDOCRINE/DIABETES	MISCELLANEOUS HORMONES	0									OR	OXANDROLONE	Y	00185027260	Enhanced
198056	00245027111	OXANDROLONE	TABS	2.5MG	1	2	0			1	ANABOLIC STEROIDS	0	ENDOCRINE/DIABETES	MISCELLANEOUS HORMONES	ENDOCRINE/DIABETES	MISCELLANEOUS HORMONES	0									OR	OXANDROLONE	Y	00245027111	Enhanced
904919	61703032418	PAMIDRONATE DISODIUM	SOLN	30MG/10ML	1	2	0			3			0	ENDOCRINE/DIABETES	MISCELLANEOUS HORMONES	ENDOCRINE/DIABETES	MISCELLANEOUS HORMONES	0									IV	PAMIDRONATE DISODIUM	Y	61703032418	Enhanced
904923	61703032518	PAMIDRONATE DISODIUM	SOLN	9MG/ML	1	2	0			3			0	ENDOCRINE/DIABETES	MISCELLANEOUS HORMONES	ENDOCRINE/DIABETES	MISCELLANEOUS HORMONES	0									IV	PAMIDRONATE DISODIUM	Y	61703032518	Enhanced
904927	61703032618	PAMIDRONATE DISODIUM	SOLN	90MG/10ML	1	2	0			3			0	ENDOCRINE/DIABETES	MISCELLANEOUS HORMONES	ENDOCRINE/DIABETES	MISCELLANEOUS HORMONES	0									IV	PAMIDRONATE DISODIUM	Y	61703032618	Enhanced
849831	59148002050	SAMSCA	TABS	15MG	3	5	1	180	90	1	SAMSCA	0	ENDOCRINE/DIABETES	MISCELLANEOUS HORMONES	ENDOCRINE/DIABETES	MISCELLANEOUS HORMONES	0									OR	TOLVAPTAN	W	59148002050	Enhanced
849835	59148002150	SAMSCA	TABS	30MG	3	5	1	180	90	1	SAMSCA	0	ENDOCRINE/DIABETES	MISCELLANEOUS HORMONES	ENDOCRINE/DIABETES	MISCELLANEOUS HORMONES	0									OR	TOLVAPTAN	W	59148002150	Enhanced
656137	55513007330	SENSIPAR	TABS	30MG	2	5	0			0			0	ENDOCRINE/DIABETES	MISCELLANEOUS HORMONES	ENDOCRINE/DIABETES	MISCELLANEOUS HORMONES	0									OR	CINACALCET HYDROCHLORIDE	W	55513007330	Enhanced
706958	55513007430	SENSIPAR	TABS	60MG	3	5	0			0			0	ENDOCRINE/DIABETES	MISCELLANEOUS HORMONES	ENDOCRINE/DIABETES	MISCELLANEOUS HORMONES	0									OR	CINACALCET HYDROCHLORIDE	W	55513007430	Enhanced
706960	55513007530	SENSIPAR	TABS	90MG	3	5	0			0			0	ENDOCRINE/DIABETES	MISCELLANEOUS HORMONES	ENDOCRINE/DIABETES	MISCELLANEOUS HORMONES	0									OR	CINACALCET HYDROCHLORIDE	W	55513007530	Enhanced
404457	00009517601	SOMAVERT	SOLR	10MG	3	5	0			1			0	ENDOCRINE/DIABETES	MISCELLANEOUS HORMONES	ENDOCRINE/DIABETES	MISCELLANEOUS HORMONES	0									SC	PEGVISOMANT	W	00009517601	Enhanced
404458	00009517801	SOMAVERT	SOLR	15MG	3	5	0			1			0	ENDOCRINE/DIABETES	MISCELLANEOUS HORMONES	ENDOCRINE/DIABETES	MISCELLANEOUS HORMONES	0									SC	PEGVISOMANT	W	00009517801	Enhanced
404459	00009518001	SOMAVERT	SOLR	20MG	3	5	0			1			0	ENDOCRINE/DIABETES	MISCELLANEOUS HORMONES	ENDOCRINE/DIABETES	MISCELLANEOUS HORMONES	0									SC	PEGVISOMANT	W	00009518001	Enhanced
853486	00025016608	SYNAREL	SOLN	2MG/ML	3	5	0			0			0	ENDOCRINE/DIABETES	MISCELLANEOUS HORMONES	ENDOCRINE/DIABETES	MISCELLANEOUS HORMONES	0									NA	NAFARELIN ACETATE	Y	00025016608	Enhanced
835829	00781307370	TESTOSTERONE CYPIONATE	OIL	100MG/ML	1	2	0			0			0	ENDOCRINE/DIABETES	MISCELLANEOUS HORMONES	ENDOCRINE/DIABETES	MISCELLANEOUS HORMONES	0									IM	TESTOSTERONE CYPIONATE	Y	00781307370	Enhanced
835840	00781307470	TESTOSTERONE CYPIONATE	OIL	200MG/ML	1	2	0			0			0	ENDOCRINE/DIABETES	MISCELLANEOUS HORMONES	ENDOCRINE/DIABETES	MISCELLANEOUS HORMONES	0									IM	TESTOSTERONE CYPIONATE	Y	00781307470	Enhanced
835839	00591322126	TESTOSTERONE ENANTHATE	OIL	200MG/ML	1	2	0			0			0	ENDOCRINE/DIABETES	MISCELLANEOUS HORMONES	ENDOCRINE/DIABETES	MISCELLANEOUS HORMONES	0									IM	TESTOSTERONE ENANTHATE	Y	00591322126	Enhanced
801812	54092070104	VPRIV	SOLR	400UNIT	3	5	0			0			0	ENDOCRINE/DIABETES	MISCELLANEOUS HORMONES	ENDOCRINE/DIABETES	MISCELLANEOUS HORMONES	0									IV	VELAGLUCERASE ALFA	W	54092070104	Enhanced
541070	66215020190	ZAVESCA	CAPS	100MG	3	5	0			1			0	ENDOCRINE/DIABETES	MISCELLANEOUS HORMONES	ENDOCRINE/DIABETES	MISCELLANEOUS HORMONES	0									OR	MIGLUSTAT	W	66215020190	Enhanced
606854	00074431730	ZEMPLAR	CAPS	1MCG	2	5	0			3			0	ENDOCRINE/DIABETES	MISCELLANEOUS HORMONES	ENDOCRINE/DIABETES	MISCELLANEOUS HORMONES	0									OR	PARICALCITOL	W	00074431730	Enhanced
606859	00074431430	ZEMPLAR	CAPS	2MCG	2	5	0			3			0	ENDOCRINE/DIABETES	MISCELLANEOUS HORMONES	ENDOCRINE/DIABETES	MISCELLANEOUS HORMONES	0									OR	PARICALCITOL	W	00074431430	Enhanced
606861	00074431530	ZEMPLAR	CAPS	4MCG	2	5	0			3			0	ENDOCRINE/DIABETES	MISCELLANEOUS HORMONES	ENDOCRINE/DIABETES	MISCELLANEOUS HORMONES	0									OR	PARICALCITOL	W	00074431530	Enhanced
352076	00074463701	ZEMPLAR	SOLN	2MCG/ML	2	5	0			3			0	ENDOCRINE/DIABETES	MISCELLANEOUS HORMONES	ENDOCRINE/DIABETES	MISCELLANEOUS HORMONES	0									IV	PARICALCITOL	W	00074463701	Enhanced
212298	00074165805	ZEMPLAR	SOLN	5MCG/ML	2	5	0			3			0	ENDOCRINE/DIABETES	MISCELLANEOUS HORMONES	ENDOCRINE/DIABETES	MISCELLANEOUS HORMONES	0									IV	PARICALCITOL	W	00074165805	Enhanced
351945	00078038725	ZOMETA	CONC	4MG/5ML	3	5	0			0			0	ENDOCRINE/DIABETES	MISCELLANEOUS HORMONES	ENDOCRINE/DIABETES	MISCELLANEOUS HORMONES	0									IV	ZOLEDRONIC ACID	W	00078038725	Enhanced
966180	00456132301	LEVOTHROID	TABS	100MCG	1	2	0			0			0	ENDOCRINE/DIABETES	THYROID HORMONES	ENDOCRINE/DIABETES	THYROID HORMONES	0									OR	LEVOTHYROXINE SODIUM	Y	00456132301	Enhanced
966183	00456133001	LEVOTHROID	TABS	112MCG	1	2	0			0			0	ENDOCRINE/DIABETES	THYROID HORMONES	ENDOCRINE/DIABETES	THYROID HORMONES	0									OR	LEVOTHYROXINE SODIUM	Y	00456133001	Enhanced
966284	00456132401	LEVOTHROID	TABS	125MCG	1	2	0			0			0	ENDOCRINE/DIABETES	THYROID HORMONES	ENDOCRINE/DIABETES	THYROID HORMONES	0									OR	LEVOTHYROXINE SODIUM	Y	00456132401	Enhanced
966193	00456133101	LEVOTHROID	TABS	137MCG	1	2	0			0			0	ENDOCRINE/DIABETES	THYROID HORMONES	ENDOCRINE/DIABETES	THYROID HORMONES	0									OR	LEVOTHYROXINE SODIUM	Y	00456133101	Enhanced
966199	00456132501	LEVOTHROID	TABS	150MCG	1	2	0			0			0	ENDOCRINE/DIABETES	THYROID HORMONES	ENDOCRINE/DIABETES	THYROID HORMONES	0									OR	LEVOTHYROXINE SODIUM	Y	00456132501	Enhanced
966203	00456132601	LEVOTHROID	TABS	175MCG	1	2	0			0			0	ENDOCRINE/DIABETES	THYROID HORMONES	ENDOCRINE/DIABETES	THYROID HORMONES	0									OR	LEVOTHYROXINE SODIUM	Y	00456132601	Enhanced
966210	00456132701	LEVOTHROID	TABS	200MCG	1	2	0			0			0	ENDOCRINE/DIABETES	THYROID HORMONES	ENDOCRINE/DIABETES	THYROID HORMONES	0									OR	LEVOTHYROXINE SODIUM	Y	00456132701	Enhanced
966156	00456132001	LEVOTHROID	TABS	25MCG	1	2	0			0			0	ENDOCRINE/DIABETES	THYROID HORMONES	ENDOCRINE/DIABETES	THYROID HORMONES	0									OR	LEVOTHYROXINE SODIUM	Y	00456132001	Enhanced
966216	00456132801	LEVOTHROID	TABS	300MCG	1	2	0			0			0	ENDOCRINE/DIABETES	THYROID HORMONES	ENDOCRINE/DIABETES	THYROID HORMONES	0									OR	LEVOTHYROXINE SODIUM	Y	00456132801	Enhanced
966163	00456132101	LEVOTHROID	TABS	50MCG	1	2	0			0			0	ENDOCRINE/DIABETES	THYROID HORMONES	ENDOCRINE/DIABETES	THYROID HORMONES	0									OR	LEVOTHYROXINE SODIUM	Y	00456132101	Enhanced
966169	00456133201	LEVOTHROID	TABS	75MCG	1	2	0			0			0	ENDOCRINE/DIABETES	THYROID HORMONES	ENDOCRINE/DIABETES	THYROID HORMONES	0									OR	LEVOTHYROXINE SODIUM	Y	00456133201	Enhanced
966174	00456132901	LEVOTHROID	TABS	88MCG	1	2	0			0			0	ENDOCRINE/DIABETES	THYROID HORMONES	ENDOCRINE/DIABETES	THYROID HORMONES	0									OR	LEVOTHYROXINE SODIUM	Y	00456132901	Enhanced
992246	00378180901	LEVOTHYROXINE SODIUM	TABS	100MCG	1	2	0			0			0	ENDOCRINE/DIABETES	THYROID HORMONES	ENDOCRINE/DIABETES

544452	45963043965	CONSTULOSE	SOLN	10GM/15ML	1	2	0				0		0	GASTROENTEROLOGY	MISCELLANEOUS GASTROINTESTINAL AGENTS	GASTROENTEROLOGY	MISCELLANEOUS GASTROINTESTINAL AGENTS	0							OR	LACTULOSE	Y	45963043965	Enhanced
106948	68220014015	CORTIFOAM	FOAM	90MG	2	5	0				0		0	GASTROENTEROLOGY	MISCELLANEOUS GASTROINTESTINAL AGENTS	GASTROENTEROLOGY	MISCELLANEOUS GASTROINTESTINAL AGENTS	0							RE	HYDROCORTISONE ACETATE	W	68220014015	Enhanced
863841	00032121201	CREON	CPEP	60000UNIT; 12000UNIT; 39000UNIT	2	5	0				0		0	GASTROENTEROLOGY	MISCELLANEOUS GASTROINTESTINAL AGENTS	GASTROENTEROLOGY	MISCELLANEOUS GASTROINTESTINAL AGENTS	0							OR	AMYLASE (DIASTASE); LIPASE (AS PANCRELIPASE);	W	00032121201	Enhanced
863829	00032122401	CREON	CPEP	120000UNIT; 24000UNIT; 78000UNIT	2	5	0				0		0	GASTROENTEROLOGY	MISCELLANEOUS GASTROINTESTINAL AGENTS	GASTROENTEROLOGY	MISCELLANEOUS GASTROINTESTINAL AGENTS	0							OR	AMYLASE (DIASTASE); LIPASE (AS PANCRELIPASE);	W	00032122401	Enhanced
1113046	00032120370	CREON	CPEP	15000UNIT; 3000UNIT; 9500UNIT	2	5	0				0		0	GASTROENTEROLOGY	MISCELLANEOUS GASTROINTESTINAL AGENTS	GASTROENTEROLOGY	MISCELLANEOUS GASTROINTESTINAL AGENTS	0							OR	AMYLASE (DIASTASE); LIPASE (AS PANCRELIPASE);	W	00032120370	Enhanced
863836	00032120601	CREON	CPEP	30000UNIT; 6000UNIT; 19000UNIT	2	5	0				0		0	GASTROENTEROLOGY	MISCELLANEOUS GASTROINTESTINAL AGENTS	GASTROENTEROLOGY	MISCELLANEOUS GASTROINTESTINAL AGENTS	0							OR	AMYLASE (DIASTASE); LIPASE (AS PANCRELIPASE);	W	00032120601	Enhanced
831261	16571060096	CROMOLYN SODIUM	CONC	100MG/5ML	1	2	0				0		0	GASTROENTEROLOGY	MISCELLANEOUS GASTROINTESTINAL AGENTS	GASTROENTEROLOGY	MISCELLANEOUS GASTROINTESTINAL AGENTS	0							OR	CROMOLYN SODIUM	Y	16571060096	Enhanced
404539	66621400001	CYSTADANE	POWD	0	0	2	5	0				0		0	GASTROENTEROLOGY	MISCELLANEOUS GASTROINTESTINAL AGENTS	GASTROENTEROLOGY	MISCELLANEOUS GASTROINTESTINAL AGENTS	0							OR	BETAINE (TRIMETHYLGLYCINE)	W	66621400001	Enhanced
197634	49884086902	DRONABINOL	CAPS	10MG	3	5	0				0		0	GASTROENTEROLOGY	MISCELLANEOUS GASTROINTESTINAL AGENTS	GASTROENTEROLOGY	MISCELLANEOUS GASTROINTESTINAL AGENTS	0							OR	DRONABINOL	Y	49884086902	Enhanced
197635	49884086702	DRONABINOL	CAPS	2.5MG	1	2	0				0		0	GASTROENTEROLOGY	MISCELLANEOUS GASTROINTESTINAL AGENTS	GASTROENTEROLOGY	MISCELLANEOUS GASTROINTESTINAL AGENTS	0							OR	DRONABINOL	Y	49884086702	Enhanced
197636	49884086802	DRONABINOL	CAPS	5MG	1	2	0				0		0	GASTROENTEROLOGY	MISCELLANEOUS GASTROINTESTINAL AGENTS	GASTROENTEROLOGY	MISCELLANEOUS GASTROINTESTINAL AGENTS	0							OR	DRONABINOL	Y	49884086802	Enhanced
404466	00006046206	EMEND	CAPS	125MG	2	5	0				0		0	GASTROENTEROLOGY	MISCELLANEOUS GASTROINTESTINAL AGENTS	GASTROENTEROLOGY	MISCELLANEOUS GASTROINTESTINAL AGENTS	0							OR	APREPITANT	W	00006046206	Enhanced
644278	00006046405	EMEND	CAPS	40MG	2	5	0				0		0	GASTROENTEROLOGY	MISCELLANEOUS GASTROINTESTINAL AGENTS	GASTROENTEROLOGY	MISCELLANEOUS GASTROINTESTINAL AGENTS	0							OR	APREPITANT	W	00006046405	Enhanced
404465	00006046102	EMEND	CAPS	80MG	2	5	0				0		0	GASTROENTEROLOGY	MISCELLANEOUS GASTROINTESTINAL AGENTS	GASTROENTEROLOGY	MISCELLANEOUS GASTROINTESTINAL AGENTS	0							OR	APREPITANT	W	00006046102	Enhanced
754509	00006386203	EMEND	CAPS	0	2	5	0				0		0	GASTROENTEROLOGY	MISCELLANEOUS GASTROINTESTINAL AGENTS	GASTROENTEROLOGY	MISCELLANEOUS GASTROINTESTINAL AGENTS	0							OR	APREPITANT	W	00006386203	Enhanced
755470	45963043864	ENULOSE	SOLN	10GM/15ML	1	2	0				0		0	GASTROENTEROLOGY	MISCELLANEOUS GASTROINTESTINAL AGENTS	GASTROENTEROLOGY	MISCELLANEOUS GASTROINTESTINAL AGENTS	0							OR	LACTULOSE	Y	45963043864	Enhanced
967023	43386006019	GAVILYTE-C	SOLR	240GM; 2.98GM; 6.72GM; 5.84GM; 22.72GM	1	2	0				0		0	GASTROENTEROLOGY	MISCELLANEOUS GASTROINTESTINAL AGENTS	GASTROENTEROLOGY	MISCELLANEOUS GASTROINTESTINAL AGENTS	0							OR	POLYETHYLENE GLYCOL; POTASSIUM CHLORIDE;	Y	43386006019	Enhanced
967012	43386006019	GAVILYTE-G	SOLR	236GM; 2.97GM; 6.74GM; 5.86GM; 22.74GM	1	2	0				0		0	GASTROENTEROLOGY	MISCELLANEOUS GASTROINTESTINAL AGENTS	GASTROENTEROLOGY	MISCELLANEOUS GASTROINTESTINAL AGENTS	0							OR	POLYETHYLENE GLYCOL; POTASSIUM CHLORIDE;	Y	43386006019	Enhanced
979099	43386005019	GAVILYTE-N/FLAVOR PACK	SOLR	420GM; 1.48GM; 5.72GM; 11.2GM	1	2	0				0		0	GASTROENTEROLOGY	MISCELLANEOUS GASTROINTESTINAL AGENTS	GASTROENTEROLOGY	MISCELLANEOUS GASTROINTESTINAL AGENTS	0							OR	POLYETHYLENE GLYCOL; POTASSIUM CHLORIDE;	Y	43386005019	Enhanced
544455	60432003864	GENERLAC	SOLN	10GM/15ML	1	2	0				0		0	GASTROENTEROLOGY	MISCELLANEOUS GASTROINTESTINAL AGENTS	GASTROENTEROLOGY	MISCELLANEOUS GASTROINTESTINAL AGENTS	0							OR	LACTULOSE	Y	60432003864	Enhanced
543218	00703789101	GRANISETRON HCL	SOLN	0.1MG/ML	1	2	1	42	90	0	0		0	GASTROENTEROLOGY	MISCELLANEOUS GASTROINTESTINAL AGENTS	GASTROENTEROLOGY	MISCELLANEOUS GASTROINTESTINAL AGENTS	0							IV	GRANISETRON HCL	Y	00703789101	Enhanced
240912	00143974410	GRANISETRON HCL	SOLN	1MG/ML	1	2	1	42	90	0	0		0	GASTROENTEROLOGY	MISCELLANEOUS GASTROINTESTINAL AGENTS	GASTROENTEROLOGY	MISCELLANEOUS GASTROINTESTINAL AGENTS	0							IV	GRANISETRON HCL	Y	00143974410	Enhanced
310599	64720019802	GRANISETRON HCL	TABS	1MG	1	2	0				3		0	GASTROENTEROLOGY	MISCELLANEOUS GASTROINTESTINAL AGENTS	GASTROENTEROLOGY	MISCELLANEOUS GASTROINTESTINAL AGENTS	0							OR	GRANISETRON HCL	Y	64720019802	Enhanced
763507	52547080130	GRANISOL	SOLN	2MG/10ML	1	2	0				0		0	GASTROENTEROLOGY	MISCELLANEOUS GASTROINTESTINAL AGENTS	GASTROENTEROLOGY	MISCELLANEOUS GASTROINTESTINAL AGENTS	0							OR	GRANISETRON HCL	Y	52547080130	Enhanced
310878	51991072867	HYDROCORTISONE	ENEM	100MG/60ML	1	2	0				0		0	GASTROENTEROLOGY	MISCELLANEOUS GASTROINTESTINAL AGENTS	GASTROENTEROLOGY	MISCELLANEOUS GASTROINTESTINAL AGENTS	0							RE	HYDROCORTISONE	Y	51991072867	Enhanced
391937	00603137859	LACTULOSE	SOLN	10GM/15ML	1	2	0				0		0	GASTROENTEROLOGY	MISCELLANEOUS GASTROINTESTINAL AGENTS	GASTROENTEROLOGY	MISCELLANEOUS GASTROINTESTINAL AGENTS	0							OR	LACTULOSE	Y	00603137859	Enhanced
595433	54092047612	LIALDA	TBEC	1.2GM	2	5	0				0		0	GASTROENTEROLOGY	MISCELLANEOUS GASTROINTESTINAL AGENTS	GASTROENTEROLOGY	MISCELLANEOUS GASTROINTESTINAL AGENTS	0							OR	MESALAMINE (5-ASA)	W	54092047612	Enhanced
1307415	00456120130	LINZESS	CAPS	145MCG	2	5	0				0		0	GASTROENTEROLOGY	MISCELLANEOUS GASTROINTESTINAL AGENTS	GASTROENTEROLOGY	MISCELLANEOUS GASTROINTESTINAL AGENTS	0							OR	LINACLOTIDE	W	00456120130	Enhanced
1307421	00456120230	LINZESS	CAPS	290MCG	2	5	0				0		0	GASTROENTEROLOGY	MISCELLANEOUS GASTROINTESTINAL AGENTS	GASTROENTEROLOGY	MISCELLANEOUS GASTROINTESTINAL AGENTS	0							OR	LINACLOTIDE	W	00456120230	Enhanced
540181	65483089403	LOTRONEX	TABS	0.5MG	3	5	0				0		0	GASTROENTEROLOGY	MISCELLANEOUS GASTROINTESTINAL AGENTS	GASTROENTEROLOGY	MISCELLANEOUS GASTROINTESTINAL AGENTS	0							OR	ALOSETRON HYDROCHLORIDE	W	65483089403	Enhanced
261362	65483089503	LOTRONEX	TABS	1MG	3	5	0				0		0	GASTROENTEROLOGY	MISCELLANEOUS GASTROINTESTINAL AGENTS	GASTROENTEROLOGY	MISCELLANEOUS GASTROINTESTINAL AGENTS	0							OR	ALOSETRON HYDROCHLORIDE	W	65483089503	Enhanced
995624	49884003401	MECLIZINE HCL	TABS	12.5MG	1	2	0				0		0	GASTROENTEROLOGY	MISCELLANEOUS GASTROINTESTINAL AGENTS	GASTROENTEROLOGY	MISCELLANEOUS GASTROINTESTINAL AGENTS	0							OR	MECLIZINE HYDROCHLORIDE	Y	49884003401	Enhanced
995666	49884003501	MECLIZINE HCL	TABS	25MG	1	2	0				0		0	GASTROENTEROLOGY	MISCELLANEOUS GASTROINTESTINAL AGENTS	GASTROENTEROLOGY	MISCELLANEOUS GASTROINTESTINAL AGENTS	0							OR	MECLIZINE HYDROCHLORIDE	Y	49884003501	Enhanced
238151	45802092349	MESALAMINE	KIT	4GM	1	2	0				0		0	GASTROENTEROLOGY	MISCELLANEOUS GASTROINTESTINAL AGENTS	GASTROENTEROLOGY	MISCELLANEOUS GASTROINTESTINAL AGENTS	0							RE	MESALAMINE (5-ASA)	Y	45802092349	Enhanced
311670	00409341401	METOCLOPRAMIDE HCL	SOLN	5MG/ML	1	2	0				0		0	GASTROENTEROLOGY	MISCELLANEOUS GASTROINTESTINAL AGENTS	GASTROENTEROLOGY	MISCELLANEOUS GASTROINTESTINAL AGENTS	0							IJ	METOCLOPRAMIDE	Y	00409341401	Enhanced
104884	60432062216	METOCLOPRAMIDE HCL	SOLN	5MG/5ML	1	2	0				0		0	GASTROENTEROLOGY	MISCELLANEOUS GASTROINTESTINAL AGENTS	GASTROENTEROLOGY	MISCELLANEOUS GASTROINTESTINAL AGENTS	0							OR	METOCLOPRAMIDE	Y	60432062216	Enhanced
311666	00093220305	METOCLOPRAMIDE HCL	TABS	10MG	1	2	0				0		0	GASTROENTEROLOGY	MISCELLANEOUS GASTROINTESTINAL AGENTS	GASTROENTEROLOGY	MISCELLANEOUS GASTROINTESTINAL AGENTS	0							OR	METOCLOPRAMIDE	Y	00093220305	Enhanced
311668	00591246701	METOCLOPRAMIDE HCL	TABS	5MG	1	2	0				0		0	GASTROENTEROLOGY	MISCELLANEOUS GASTROINTESTINAL AGENTS	GASTROENTEROLOGY	MISCELLANEOUS GASTROINTESTINAL AGENTS	0							OR	METOCLOPRAMIDE	Y	00591246701	Enhanced
283504	55390012101	ONDANSETRON HCL	SOLN	40MG/20ML	1	2	0				0		0	GASTROENTEROLOGY	MISCELLANEOUS GASTROINTESTINAL AGENTS	GASTROENTEROLOGY	MISCELLANEOUS GASTROINTESTINAL AGENTS	0							IJ	ONDANSETRON HCL	Y	00409475501	Enhanced
312085	00054006447	ONDANSETRON HCL	SOLN	4MG/5ML	1	2	0				0		0	GASTROENTEROLOGY	MISCELLANEOUS GASTROINTESTINAL AGENTS	GASTROENTEROLOGY	MISCELLANEOUS GASTROINTESTINAL AGENTS	0							OR	ONDANSETRON HCL	Y	00054006447	Enhanced
312084	55111071501	ONDANSETRON HCL	TABS	24MG	1	2	0				3		0	GASTROENTEROLOGY	MISCELLANEOUS GASTROINTESTINAL AGENTS	GASTROENTEROLOGY	MISCELLANEOUS GASTROINTESTINAL AGENTS	0							OR	ONDANSETRON HCL	Y	55111071501	Enhanced
198052	65862018703	ONDANSETRON HCL	TABS	4MG	1	2	0				3		0	GASTROENTEROLOGY	MISCELLANEOUS GASTROINTESTINAL AGENTS	GASTROENTEROLOGY	MISCELLANEOUS GASTROINTESTINAL AGENTS	0							OR	ONDANSETRON HCL	Y	65862018703	Enhanced
104894	00378773293	ONDANSETRON ODT	TBDP	4MG	1	2	0				3		0	GASTROENTEROLOGY	MISCELLANEOUS GASTROINTESTINAL AGENTS	GASTROENTEROLOGY	MISCELLANEOUS GASTROINTESTINAL AGENTS	0							OR	ONDANSETRON	Y	00378773293	Enhanced
312086	00093723656	ONDANSETRON HCL	TABS	8MG	1	2	0				3		0	GASTROENTEROLOGY	MISCELLANEOUS GASTROINTESTINAL AGENTS	GASTROENTEROLOGY	MISCELLANEOUS GASTROINTESTINAL AGENTS	0							OR	ONDANSETRON HCL	Y	00093723656	Enhanced
312087	00378773497	ONDANSETRON ODT	TBDP	8MG	1	2	0				3		0	GASTROENTEROLOGY	MISCELLANEOUS GASTROINTESTINAL AGENTS	GASTROENTEROLOGY	MISCELLANEOUS GASTROINTESTINAL AGENTS	0							OR	ONDANSETRON	Y	00378773497	Enhanced
206791	54092018981	PENTASA	CPCR	250MG	2	5	0				0		0	GASTROENTEROLOGY	MISCELLANEOUS GASTROINTESTINAL AGENTS	GASTROENTEROLOGY	MISCELLANEOUS GASTROINTESTINAL AGENTS	0							OR	MESALAMINE (5-ASA)	W	54092018981	Enhanced
580286	54092019112	PENTASA	CPCR	500MG	2	5	0				0		0	GASTROENTEROLOGY	MISCELLANEOUS GASTROINTESTINAL AGENTS	GASTROENTEROLOGY	MISCELLANEOUS GASTROINTESTINAL AGENTS	0							OR	MESALAMINE (5-ASA)	W	54092019112	Enhanced
976193	00574041205	POLYETHYLENE GLYCOL 3350	POWD	0	0	2	5	0				0		0	GASTROENTEROLOGY	MISCELLANEOUS GASTROINTESTINAL AGENTS	GASTROENTEROLOGY	MISCELLANEOUS GASTROINTESTINAL AGENTS	0							OR	POLYETHYLENE GLYCOL	Y	00574041205	Enhanced
314192	55390007710	PROCHLORPERAZINE EDISYLATE	SOLN	5MG/ML	1	2	0				0		0	GASTROENTEROLOGY	MISCELLANEOUS GASTROINTESTINAL AGENTS	GASTROENTEROLOGY	MISCELLANEOUS GASTROINTESTINAL AGENTS	0							IJ	PROCHLORPERAZINE	Y	55390007710	Enhanced
198159	00713013512	PROCHLORPERAZINE	SUPP	25MG	1	2	0				0		0	GASTROENTEROLOGY	MISCELLANEOUS GASTROINTESTINAL AGENTS	GASTROENTEROLOGY	MISCELLANEOUS GASTROINTESTINAL AGENTS	0							RE	PROCHLORPERAZINE	Y	00713013512	Enhanced
198365	00093985201	PROCHLORPERAZINE MALEATE	TABS	10MG	2	5	0				0		0	GASTROENTEROLOGY	MISCELLANEOUS GASTROINTESTINAL AGENTS	GASTROENTEROLOGY	MISCELLANEOUS GASTROINTESTINAL AGENTS	0							OR	PROCHLORPERAZINE MALEATE	Y	00093985201	Enhanced
312635	00781502001	PROCHLORPERAZINE MALEATE	TABS	5MG	1	2	0				0		0	GASTROENTEROLOGY	MISCELLANEOUS GASTROINTESTINAL AGENTS	GASTROENTEROLOGY	MISCELLANEOUS GASTROINTESTINAL AGENTS	0							OR	PROCHLORPERAZINE MALEATE	Y	00781502001	Enhanced
543492	54980030230	PROCTO-PAK	CREA	1%	1	2	0				0		0	GASTROENTEROLOGY	MISCELLANEOUS GASTROINTESTINAL AGENTS	GASTROENTEROLOGY	MISCELLANEOUS GASTROINTESTINAL AGENTS	0							RE	HYDROCORTISONE	Y	54980030230	Enhanced
351396	54980030130	PROCTOZONE-HC	CREA	2.5%	1	2	0				0		0	GASTROENTEROLOGY	MISCELLANEOUS GASTROINTESTINAL AGENTS	GASTROENTEROLOGY	MISCELLANEOUS GASTROINTESTINAL AGENTS	0							RE	HYDROCORTISONE	Y	54980030130	Enhanced
1114470	58914030180	RECTIV	OINT	0.4%	2	5	0				0		0	GASTROENTEROLOGY	MISCELLANEOUS GASTROINTESTINAL AGENTS	GASTROENTEROLOGY	MISCELLANEOUS GASTROINTESTINAL AGENTS	0							RE	NITROGLYCERIN	W	42747023530	Enhanced
979115	65649053305	RELISTOR	KIT	12MG/0.6ML	2	5	0				0		0	GASTROENTEROLOGY	MISCELLANEOUS GASTROINTESTINAL AGENTS	GASTROENTEROLOGY	MISCELLANEOUS GASTROINTESTINAL AGENTS	0							SC	METHYLNALTREXONE	W	65649053305	Enhanced
213361	57894003001	REMICADE	SOLR	100MG	3	5	0			2	REMICADE	0	GASTROENTEROLOGY	MISCELLANEOUS GASTROINTESTINAL AGENTS	GASTROENTEROLOGY	MISCELLANEOUS GASTROINTESTINAL AGENTS	0							IV	INFLIXIMAB	W	57894003001	Enhanced
213337	67877011104	SUCRAID	SOLN	8500UNIT/ML	3	5	0				0		0	GASTROENTEROLOGY	MISCELLANEOUS GASTROINTESTINAL AGENTS	GASTROENTEROLOGY	MISCELLANEOUS GASTROINTESTINAL AGENTS	0							OR	SACROSIDASE	Y	67877011104	Enhanced
198232	00591079605	SULFASALAZINE	TABS	500MG	1	2	0				0		0	GASTROENTEROLOGY	MISCELLANEOUS GASTROINTESTINAL AGENTS	GASTROENTEROLOGY	MISCELLANEOUS GASTROINTESTINAL AGENTS	0							OR	SULFASALAZINE	Y	00591079605	Enhanced
313142	00603580325	SULFAZINE EC	TBEC	500MG	1	2	0				0		0	GASTROENTEROLOGY	MISCELLANEOUS GASTROINTESTINAL AGENTS	GASTROENTEROLOGY	MISCELLANEOUS GASTROINTESTINAL AGENTS	0							OR	SULFASALAZINE	Y	00603580325	Enhanced
904158	68220013104	TRILYTE	SOLR	420GM; 1.48GM; 5.72GM; 11.2GM	1	2	0				0		0	GASTROENTEROLOGY	MISCELLANEOUS GASTROINTESTINAL AGENTS	GASTROENTEROLOGY	MISCELLANEOUS GASTROINTESTINAL AGENTS	0							OR	POLYETHYLENE GLYCOL; POTASSIUM CHLORIDE;	Y	68220013104	Enhanced
860771	53489037601	TRIMETHOBENZAMIDE HCL	CAPS	300MG	1	2	0				0		0	GASTROENTEROLOGY	MISCELLANEOUS GASTROINTESTINAL AGENTS	GASTROENTEROLOGY	MISCELLANEOUS GASTROINTESTINAL AGENTS	0							OR	TRIMETHOBENZAMIDE	Y	53489037601	Enhanced
1366505	59912030930	UCERIS	TB24	9MG	3	5	0				0		0	GASTROENTEROLOGY	MISCELLANEOUS GASTROINTESTINAL AGENTS	GASTROENTEROLOGY	MISCELLANEOUS GASTROINTESTINAL AGENTS	0							OR	BUDESONIDE	W	59912030930	Enhanced
858747	51079038320	URSODIOL	CAPS	300MG	1	2	0				0		0	GASTROENTEROLOGY	MISCELLANEOUS GASTROINTESTINAL AGENTS	GASTROENTEROLOGY	MISCELLANEOUS GASTROINTESTINAL AGENTS	0							OR	URSODIOL	Y	51079038320	Enhanced
858751	68462047301	URSODIOL	TABS	250MG	1	2	0				0		0	GASTROENTEROLOGY	MISCELLANEOUS GASTROINTESTINAL AGENTS	GASTROENTEROLOGY	MISCELLANEOUS GASTROINTESTINAL AGENTS	0							OR	URSODIOL	Y	68462047301	Enhanced
858733	68462047401	URSODIOL	TABS	500MG	1	2	0				0		0	GASTROENTEROLOGY	MISCELLANEOUS GASTROINTESTINAL AGENTS	GASTROENTEROLOGY	MISCELLANEOUS GASTROINTESTINAL AGENTS	0							OR	URSODIOL	Y	68462047401	Enhanced
1247388	58914011210	VIOKACE	TABS	39150UNIT; 10440UNIT; 39150UNIT	2	5	0				0		0	GASTROENTEROLOGY	MISCELLANEOUS GASTROINTESTINAL AGENTS	GASTROENTEROLOGY	MISCELLANEOUS GASTROINTESTINAL AGENTS	0							OR	AMYLASE (DIASTASE); LIPASE (AS PANCRELIPASE);	W	58914011210	Enhanced
1247381	58914011710	VIOKACE	TABS	78300UNIT; 20880UNIT; 78300UNIT	2	5	0				0		0	GASTROENTEROLOGY	MISCELLANEOUS GASTROINTESTINAL AGENTS	GASTROENTEROLOGY	MISCELLANEOUS GASTROINTESTINAL AGENTS	0							OR	AMYLASE (DIASTASE); LIPASE (AS PANCRELIPASE);	W	58914011710	Enhanced
861830	42865010102	ZENPEP	CPEP	55000UNIT; 10000UNIT; 34000UNIT	2	5	0				0		0	GASTROENTEROLOGY	MISCELLANEOUS GASTROINTESTINAL AGENTS	GASTROENTEROLOGY	MISCELLANEOUS GASTROINTESTINAL AGENTS	0							OR	AMYLASE (DIASTASE); LIPASE (AS PANCRELIPASE);	W	42865010102	Enhanced
861834	42865010202	ZENPEP	CPEP	82000UNIT; 15000UNIT; 51000UNIT	2	5	0				0		0	GASTROENTEROLOGY	MISCELLANEOUS GASTROINTESTINAL AGENTS	GASTROENTEROLOGY	MISCELLANEOUS GASTROINTESTINAL AGENTS	0							OR	AMYLASE (DIASTASE); LIPASE (AS PANCRELIPASE);	W	42865010202	Enhanced
861838	42865010302	ZENPEP	CPEP	109500UNIT; 20000UNIT; 68000UNIT	2	5	0				0		0	GASTROENTEROLOGY	MISCELLANEOUS GASTROINTESTINAL AGENTS	GASTROENTEROLOGY	MISCELLANEOUS GASTROINTESTINAL AGENTS	0							OR	AMYLASE (DIASTASE); LIPASE (AS PANCRELIPASE);	W	42865010302	Enhanced
1117104	42865010502	ZENPEP	CPEP	136500UNIT; 25000UNIT; 85000UNIT	2	5	0				0		0	GASTROENTEROLOGY	MISCELLANEOUS GASTROINTESTINAL AGENTS	GASTROENTEROLOGY	MISCELLANEOUS GASTROINTESTINAL AGENTS	0							OR	AMYLASE (DIASTASE); LIPASE (AS PANCRELIPASE);	W	42865010502	Enhanced
1114135	42865010402	ZENPEP	CPEP	163800UNIT; 30000UNIT; 102000UNIT	2	5	0				0		0	GASTROENTEROLOGY	MISCELLANEOUS GASTROINTESTINAL AGENTS	GASTROENTEROLOGY	MISCELLANEOUS GASTROINTESTINAL AGENTS	0							OR	AMYLASE (DIASTASE); LIPASE (AS PANCRELIPASE);	W	42865010402	Enhanced
208094	58914017014	CARAFATE	SUSP	1GM/10ML	1	2	0				0		0	GASTROENTEROLOGY	ULCER THERAPY	GASTROENTEROLOGY	ULCER THERAPY	0							OR	SUCRALFATE	Y	58914017014	Enhanced
239982	00409744401	CIMETIDINE HCL	SOLN	150MG/ML	1	2	0				0		0	GASTROENTEROLOGY	ULCER THERAPY	GASTROENTEROLOGY	ULCER THERAPY	0							IJ	CIMETIDINE HYDROCHLORIDE	Y	00409744401	Enhanced
212787	50383005008	CIMETIDINE HCL	SOLN	300MG/5ML	1	2	0				0		0	GASTROENTEROLOGY	ULCER THERAPY	GASTROENTEROLOGY	ULCER THERAPY	0							OR	CIMETIDINE HYDROCHLORIDE	Y	50383005008	Enhanced
197505	00378053501	CIMETIDINE	TABS	200MG	1	2	0				0		0	GASTROENTEROLOGY	ULCER THERAPY	GASTROENTEROLOGY	ULCER THERAPY	0							OR	CIMETIDINE	Y	00378053501	Enhanced
197506	00378031705	CIMETIDINE	TABS	300MG	1	2	0				0		0	GASTROENTEROLOGY	ULCER THERAPY	GASTROENTEROLOGY	ULCER THERAPY	0							OR	CIMETIDINE	Y	00378031705	Enhanced
197507	00093620401	CIMETIDINE	TABS	400MG	1	2	0				0		0	GASTROENTEROLOGY	ULCER THERAPY	GASTROENTEROLOGY	ULCER THERAPY	0							OR	CIMETIDINE	Y	00093620401	Enhanced
197508	00378054101	CIMETIDINE	TABS	800MG	1	2	0				0		0	GASTROENTEROLOGY	ULCER THERAPY	GASTROENTEROLOGY	ULCER THERAPY	0							OR	CIMETIDINE	Y	00378054101	Enhanced
204441	63323073912	FAMOTIDINE	SOLN	10MG/ML	1	2	0				0		0	GASTROENTEROLOGY	ULCER THERAPY	GASTROENTEROLOGY	ULCER THERAPY	0							IV	FAMOTIDINE	Y	63323073912	Enhanced
199739	00338519741	FAMOTIDINE PREMIXED	SOLN	0.4MG/ML; 0.9%	1	2	0				0		0	GASTROENTEROLOGY	ULCER THERAPY	GASTROENTEROLOGY	ULCER THERAPY	0							IV	FAMOTIDINE; SODIUM	Y	00338519741	Enhanced
310274	68180015001	FAMOTIDINE	SUSR	40MG/5ML	1	2	0				0		0	GASTROENTEROLOGY	ULCER THERAPY	GASTROENTEROLOGY	ULCER THERAPY	0							OR	FAMOTIDINE	Y	68180015001	Enhanced
310273	00378302005	FAMOTIDINE	TABS	20MG	1	2	0				0		0	GASTROENTEROLOGY	ULCER THERAPY	GASTROENTEROLOGY	ULCER THERAPY	0							OR	FAMOTIDINE	Y	00378302005	Enhanced
284245	00378304001	FAMOTIDINE	TABS	40MG	1	2	0				0		0	GASTROENTEROLOGY	ULCER THERAPY	GASTROENTEROLOGY	ULCER THERAPY	0							OR	FAMOTIDINE	Y	00378304001	Enhanced
596843	00378801593	LANSOPRAZOLE	CPDR	15MG	1	2	1	90	90	0	0		0	GASTROENTEROLOGY	ULCER THERAPY	GASTROENTEROLOGY	ULCER THERAPY	0	1	1	PROTON PUMP INHIBITORS	1			OR	LANSOPRAZOLE	Y	00378801593	Enhanced
311277	00093735156	LANSOPRAZOLE	CPDR	30MG	1	2	0				0		0	GASTROENTEROLOGY	ULCER THERAPY	GASTROENTEROLOGY	ULCER THERAPY	0	1	1	PROTON PUMP INHIBITORS	1			OR	LANSOPRAZOLE	Y	00093735156	Enhanced
311727	43386016006	MISOPROSTOL	TABS	100MCG	1	2	0				0		0	GASTROENTEROLOGY	UL

727545	55513020910	NEUPOGEN	SOLN	480MCG/0.8ML	3	5	0			1	NEUPOGEN	0	IMMUNOLOGY, VACCINES / BIOTECHNOLOGY	BIOTECHNOLOGY DRUGS	IMMUNOLOGY, VACCINES / BIOTECHNOLOGY	BIOTECHNOLOGY DRUGS	0						U	FILGRASTIM	W	55513020910	Enhanced
207052	55513054610	NEUPOGEN	SOLN	480MCG/1.6ML	3	5	0			1	NEUPOGEN	0	IMMUNOLOGY, VACCINES / BIOTECHNOLOGY	BIOTECHNOLOGY DRUGS	IMMUNOLOGY, VACCINES / BIOTECHNOLOGY	BIOTECHNOLOGY DRUGS	0						U	FILGRASTIM	W	55513054610	Enhanced
854302	00781300407	OMNITROPE	SOLN	10MG/1.5ML	2	5	0			1	GROWTH HORMONES	0	IMMUNOLOGY, VACCINES / BIOTECHNOLOGY	BIOTECHNOLOGY DRUGS	IMMUNOLOGY, VACCINES / BIOTECHNOLOGY	BIOTECHNOLOGY DRUGS	0						SC	SOMATROPIN	W	00781300407	Enhanced
645884	00781400436	OMNITROPE	SOLR	5.8MG	3	5	0			1	GROWTH HORMONES	0	IMMUNOLOGY, VACCINES / BIOTECHNOLOGY	BIOTECHNOLOGY DRUGS	IMMUNOLOGY, VACCINES / BIOTECHNOLOGY	BIOTECHNOLOGY DRUGS	0						SC	SOMATROPIN	W	00781400436	Enhanced
864110	00781300107	OMNITROPE	SOLN	5MG/1.5ML	2	5	0			1	GROWTH HORMONES	0	IMMUNOLOGY, VACCINES / BIOTECHNOLOGY	BIOTECHNOLOGY DRUGS	IMMUNOLOGY, VACCINES / BIOTECHNOLOGY	BIOTECHNOLOGY DRUGS	0						SC	SOMATROPIN	W	00781300107	Enhanced
760029	00085129701	PEG-INTRON REDIPEN	KIT	120MCG/0.5ML	3	5	1	12	84	1	PEGYLATED INTERFERONS	0	IMMUNOLOGY, VACCINES / BIOTECHNOLOGY	BIOTECHNOLOGY DRUGS	IMMUNOLOGY, VACCINES / BIOTECHNOLOGY	BIOTECHNOLOGY DRUGS	0						SC	PEGINTERFERON ALFA-2B	W	00085129701	Enhanced
790245	00085137001	PEG-INTRON REDIPEN	KIT	150MCG/0.5ML	3	5	1	12	84	1	PEGYLATED INTERFERONS	0	IMMUNOLOGY, VACCINES / BIOTECHNOLOGY	BIOTECHNOLOGY DRUGS	IMMUNOLOGY, VACCINES / BIOTECHNOLOGY	BIOTECHNOLOGY DRUGS	0						SC	PEGINTERFERON ALFA-2B	W	00085137001	Enhanced
805007	00085136801	PEG-INTRON	KIT	50MCG/0.5ML	3	5	1	12	84	1	PEGYLATED INTERFERONS	0	IMMUNOLOGY, VACCINES / BIOTECHNOLOGY	BIOTECHNOLOGY DRUGS	IMMUNOLOGY, VACCINES / BIOTECHNOLOGY	BIOTECHNOLOGY DRUGS	0						SC	PEGINTERFERON ALFA-2B	W	00085136801	Enhanced
790247	00085132301	PEG-INTRON REDIPEN	KIT	50MCG/0.5ML	3	5	1	12	84	1	PEGYLATED INTERFERONS	0	IMMUNOLOGY, VACCINES / BIOTECHNOLOGY	BIOTECHNOLOGY DRUGS	IMMUNOLOGY, VACCINES / BIOTECHNOLOGY	BIOTECHNOLOGY DRUGS	0						SC	PEGINTERFERON ALFA-2B	W	00085132301	Enhanced
760039	00085131601	PEG-INTRON REDIPEN	KIT	80MCG/0.5ML	3	5	1	12	84	1	PEGYLATED INTERFERONS	0	IMMUNOLOGY, VACCINES / BIOTECHNOLOGY	BIOTECHNOLOGY DRUGS	IMMUNOLOGY, VACCINES / BIOTECHNOLOGY	BIOTECHNOLOGY DRUGS	0						SC	PEGINTERFERON ALFA-2B	W	00085131601	Enhanced
731328	00004035730	PEGASYS	SOLN	180MCG/0.5ML	3	5	1	12	84	1	PEGYLATED INTERFERONS	0	IMMUNOLOGY, VACCINES / BIOTECHNOLOGY	BIOTECHNOLOGY DRUGS	IMMUNOLOGY, VACCINES / BIOTECHNOLOGY	BIOTECHNOLOGY DRUGS	0						SC	PEGINTERFERON ALFA-2A	W	00004035239	Enhanced
352297	00004035009	PEGASYS	SOLN	180MCG/ML	3	5	1	12	84	1	PEGYLATED INTERFERONS	0	IMMUNOLOGY, VACCINES / BIOTECHNOLOGY	BIOTECHNOLOGY DRUGS	IMMUNOLOGY, VACCINES / BIOTECHNOLOGY	BIOTECHNOLOGY DRUGS	0						SC	PEGINTERFERON ALFA-2A	W	00004035009	Enhanced
1191665	00004036030	PEGASYS PROCLICK	SOLN	135MCG/0.5ML	3	5	1	12	84	1	PEGYLATED INTERFERONS	0	IMMUNOLOGY, VACCINES / BIOTECHNOLOGY	BIOTECHNOLOGY DRUGS	IMMUNOLOGY, VACCINES / BIOTECHNOLOGY	BIOTECHNOLOGY DRUGS	0						SC	PEGINTERFERON ALFA-2A	W	00004036030	Enhanced
205913	59676031001	PROCRIT	SOLN	10000UNIT/ML	2	5	0			1	EPOETIN/PROCRIT	0	IMMUNOLOGY, VACCINES / BIOTECHNOLOGY	BIOTECHNOLOGY DRUGS	IMMUNOLOGY, VACCINES / BIOTECHNOLOGY	BIOTECHNOLOGY DRUGS	0						U	EPOETIN ALFA	W	59676031001	Enhanced
205918	59676030201	PROCRIT	SOLN	2000UNIT/ML	2	5	0			1	EPOETIN/PROCRIT	0	IMMUNOLOGY, VACCINES / BIOTECHNOLOGY	BIOTECHNOLOGY DRUGS	IMMUNOLOGY, VACCINES / BIOTECHNOLOGY	BIOTECHNOLOGY DRUGS	0						U	EPOETIN ALFA	W	59676030201	Enhanced
212219	59676032004	PROCRIT	SOLN	20000UNIT/ML	3	5	0			1	EPOETIN/PROCRIT	0	IMMUNOLOGY, VACCINES / BIOTECHNOLOGY	BIOTECHNOLOGY DRUGS	IMMUNOLOGY, VACCINES / BIOTECHNOLOGY	BIOTECHNOLOGY DRUGS	0						U	EPOETIN ALFA	W	59676032004	Enhanced
205922	59676030302	PROCRIT	SOLN	3000UNIT/ML	2	5	0			1	EPOETIN/PROCRIT	0	IMMUNOLOGY, VACCINES / BIOTECHNOLOGY	BIOTECHNOLOGY DRUGS	IMMUNOLOGY, VACCINES / BIOTECHNOLOGY	BIOTECHNOLOGY DRUGS	0						U	EPOETIN ALFA	W	59676030302	Enhanced
205924	59676030402	PROCRIT	SOLN	4000UNIT/ML	2	5	0			1	EPOETIN/PROCRIT	0	IMMUNOLOGY, VACCINES / BIOTECHNOLOGY	BIOTECHNOLOGY DRUGS	IMMUNOLOGY, VACCINES / BIOTECHNOLOGY	BIOTECHNOLOGY DRUGS	0						U	EPOETIN ALFA	W	59676030402	Enhanced
213475	59676034001	PROCRIT	SOLN	40000UNIT/ML	3	5	0			1	EPOETIN/PROCRIT	0	IMMUNOLOGY, VACCINES / BIOTECHNOLOGY	BIOTECHNOLOGY DRUGS	IMMUNOLOGY, VACCINES / BIOTECHNOLOGY	BIOTECHNOLOGY DRUGS	0						U	EPOETIN ALFA	W	59676034001	Enhanced
105648	00078049561	PROLEUKIN	SOLR	22000000UNIT	3	5	0			0		0	IMMUNOLOGY, VACCINES / BIOTECHNOLOGY	BIOTECHNOLOGY DRUGS	IMMUNOLOGY, VACCINES / BIOTECHNOLOGY	BIOTECHNOLOGY DRUGS	0						IV	ALDESLEUKIN	W	00078049561	Enhanced
758032	44087002203	REBIF	SOLN	22MCG/0.5ML	3	5	1	6	84	1	REBIF	0	IMMUNOLOGY, VACCINES / BIOTECHNOLOGY	BIOTECHNOLOGY DRUGS	IMMUNOLOGY, VACCINES / BIOTECHNOLOGY	BIOTECHNOLOGY DRUGS	0						SC	INTERFERON BETA-1A	W	44087002203	Enhanced
758027	44087004403	REBIF	SOLN	44MCG/0.5ML	3	5	1	6	84	1	REBIF	0	IMMUNOLOGY, VACCINES / BIOTECHNOLOGY	BIOTECHNOLOGY DRUGS	IMMUNOLOGY, VACCINES / BIOTECHNOLOGY	BIOTECHNOLOGY DRUGS	0						SC	INTERFERON BETA-1A	W	44087004403	Enhanced
795749	44087882201	REBIF TITRATION PACK	SOLN	0	3	5	1	36	84	1	REBIF	0	IMMUNOLOGY, VACCINES / BIOTECHNOLOGY	BIOTECHNOLOGY DRUGS	IMMUNOLOGY, VACCINES / BIOTECHNOLOGY	BIOTECHNOLOGY DRUGS	0						SC	INTERFERON BETA-1A	W	44087882201	Enhanced
207836	44087100502	SAIZEN	SOLR	5MG	3	5	0			1	GROWTH HORMONES	0	IMMUNOLOGY, VACCINES / BIOTECHNOLOGY	BIOTECHNOLOGY DRUGS	IMMUNOLOGY, VACCINES / BIOTECHNOLOGY	BIOTECHNOLOGY DRUGS	0						U	SOMATROPIN	W	44087100502	Enhanced
897044	44087108001	SAIZEN CLICK.EASY	SOLR	8.8MG	3	5	0			1	GROWTH HORMONES	0	IMMUNOLOGY, VACCINES / BIOTECHNOLOGY	BIOTECHNOLOGY DRUGS	IMMUNOLOGY, VACCINES / BIOTECHNOLOGY	BIOTECHNOLOGY DRUGS	0						U	SOMATROPIN	W	44087108001	Enhanced
1090660	00085138801	SYLATRON	KIT	296MCG	3	5	0			0		0	IMMUNOLOGY, VACCINES / BIOTECHNOLOGY	BIOTECHNOLOGY DRUGS	IMMUNOLOGY, VACCINES / BIOTECHNOLOGY	BIOTECHNOLOGY DRUGS	0						SC	PEGINTERFERON ALFA-2B	W	00085138801	Enhanced
1090052	00085128702	SYLATRON	KIT	444MCG	3	5	0			0		0	IMMUNOLOGY, VACCINES / BIOTECHNOLOGY	BIOTECHNOLOGY DRUGS	IMMUNOLOGY, VACCINES / BIOTECHNOLOGY	BIOTECHNOLOGY DRUGS	0						SC	PEGINTERFERON ALFA-2B	W	00085128702	Enhanced
1090656	00085131201	SYLATRON	KIT	888MCG	3	5	0			0		0	IMMUNOLOGY, VACCINES / BIOTECHNOLOGY	BIOTECHNOLOGY DRUGS	IMMUNOLOGY, VACCINES / BIOTECHNOLOGY	BIOTECHNOLOGY DRUGS	0						SC	PEGINTERFERON ALFA-2B	W	00085131201	Enhanced
1300468	49281054505	ACTHIB	SOLR	0	2	5	0			0		0	IMMUNOLOGY, VACCINES / BIOTECHNOLOGY	VACCINES / MISCELLANEOUS IMMUNOLOGICALS	IMMUNOLOGY, VACCINES / BIOTECHNOLOGY	VACCINES / MISCELLANEOUS IMMUNOLOGICALS	0						IM	HAEMOPHILUS B POLYSACC TETANUS CONJ VACC	W	49281054505	Enhanced
1300206	49281040010	ADACEL	SUSP	15.5MCG/0.5ML; 2LF/0.5ML; 5LF/0.5ML	2	5	0			0		0	IMMUNOLOGY, VACCINES / BIOTECHNOLOGY	VACCINES / MISCELLANEOUS IMMUNOLOGICALS	IMMUNOLOGY, VACCINES / BIOTECHNOLOGY	VACCINES / MISCELLANEOUS IMMUNOLOGICALS	0						IM	ACELLULAR PERTUSSIS; DIPHTHERIA TOXOID; TETANUS	W	49281040010	Enhanced
206289	00009722402	ATGAM	INJ	50MG/ML	3	5	0			3		0	IMMUNOLOGY, VACCINES / BIOTECHNOLOGY	VACCINES / MISCELLANEOUS IMMUNOLOGICALS	IMMUNOLOGY, VACCINES / BIOTECHNOLOGY	VACCINES / MISCELLANEOUS IMMUNOLOGICALS	0						IV	ANTI-THYMOCYTE GLOBULIN (EQUINE)	W	00009722402	Enhanced
1300378	58160084211	BOOSTRIX	SUSP	18.5MCG/0.5ML; 2.5LF/0.5ML; 5LF/0.5ML	2	5	0			0		0	IMMUNOLOGY, VACCINES / BIOTECHNOLOGY	VACCINES / MISCELLANEOUS IMMUNOLOGICALS	IMMUNOLOGY, VACCINES / BIOTECHNOLOGY	VACCINES / MISCELLANEOUS IMMUNOLOGICALS	0						IM	ACELLULAR PERTUSSIS; DIPHTHERIA TOXOID; TETANUS	W	58160084211	Enhanced
1300370	58160084252	BOOSTRIX	SUSP	18.5MCG/0.5ML; 2.5LF/0.5ML; 5LF/0.5ML	2	5	0			0		0	IMMUNOLOGY, VACCINES / BIOTECHNOLOGY	VACCINES / MISCELLANEOUS IMMUNOLOGICALS	IMMUNOLOGY, VACCINES / BIOTECHNOLOGY	VACCINES / MISCELLANEOUS IMMUNOLOGICALS	0						IM	ACELLULAR PERTUSSIS; DIPHTHERIA TOXOID; TETANUS	W	58160084252	Enhanced
860195	00023114501	BOTOX	SOLR	100UNIT	2	5	0			1	BOTOX	0	IMMUNOLOGY, VACCINES / BIOTECHNOLOGY	VACCINES / MISCELLANEOUS IMMUNOLOGICALS	IMMUNOLOGY, VACCINES / BIOTECHNOLOGY	VACCINES / MISCELLANEOUS IMMUNOLOGICALS	0						U	ONABOTULINUMTOXINA	W	00023114501	Enhanced
351326	44206041603	CARIMUNE NANOFILTERED	SOLR	3GM	3	5	0			1	IVIG	0	IMMUNOLOGY, VACCINES / BIOTECHNOLOGY	BIOTECHNOLOGY DRUGS	IMMUNOLOGY, VACCINES / BIOTECHNOLOGY	BIOTECHNOLOGY DRUGS	0						IV	GLOBULIN, IMMUNE	W	44206041603	Enhanced
1301891	58160083032	CERVARIX	SUSP	0	2	5	0			0		0	IMMUNOLOGY, VACCINES / BIOTECHNOLOGY	VACCINES / MISCELLANEOUS IMMUNOLOGICALS	IMMUNOLOGY, VACCINES / BIOTECHNOLOGY	VACCINES / MISCELLANEOUS IMMUNOLOGICALS	0						IM	HPV BIVALENT (TYPES 16 & 18) RECOMB VAC	W	58160083032	Enhanced
798443	00006489800	COMVAX	SUSP	7.5MCG/0.5ML; 5MCG/0.5ML	2	5	0			0		0	IMMUNOLOGY, VACCINES / BIOTECHNOLOGY	VACCINES / MISCELLANEOUS IMMUNOLOGICALS	IMMUNOLOGY, VACCINES / BIOTECHNOLOGY	VACCINES / MISCELLANEOUS IMMUNOLOGICALS	0						IM	HAEMOPHILUS B POLYSACCHARIDE CONJ VACC	W	00006489800	Enhanced
1300310	49281028610	DAPTACEL	SUSP	10MCG/0.5ML; 15LF/0.5ML; 5LF/0.5ML	2	5	0			0		0	IMMUNOLOGY, VACCINES / BIOTECHNOLOGY	VACCINES / MISCELLANEOUS IMMUNOLOGICALS	IMMUNOLOGY, VACCINES / BIOTECHNOLOGY	VACCINES / MISCELLANEOUS IMMUNOLOGICALS	0						IM	ACELLULAR PERTUSSIS; DIPHTHERIA TOXOID; TETANUS	W	49281028610	Enhanced
798424	58160082011	ENGERIX-B	SUSP	10MCG/0.5ML	2	5	0			3		0	IMMUNOLOGY, VACCINES / BIOTECHNOLOGY	VACCINES / MISCELLANEOUS IMMUNOLOGICALS	IMMUNOLOGY, VACCINES / BIOTECHNOLOGY	VACCINES / MISCELLANEOUS IMMUNOLOGICALS	0						U	HEPATITIS B VIRUS VACCINE RECOMBINANT	W	58160082011	Enhanced
798430	58160082052	ENGERIX-B	SUSP	10MCG/0.5ML	2	5	0			3		0	IMMUNOLOGY, VACCINES / BIOTECHNOLOGY	VACCINES / MISCELLANEOUS IMMUNOLOGICALS	IMMUNOLOGY, VACCINES / BIOTECHNOLOGY	VACCINES / MISCELLANEOUS IMMUNOLOGICALS	0						U	HEPATITIS B VIRUS VACCINE RECOMBINANT	W	58160082052	Enhanced
798428	58160082132	ENGERIX-B	SUSP	20MCG/ML	2	5	0			3		0	IMMUNOLOGY, VACCINES / BIOTECHNOLOGY	VACCINES / MISCELLANEOUS IMMUNOLOGICALS	IMMUNOLOGY, VACCINES / BIOTECHNOLOGY	VACCINES / MISCELLANEOUS IMMUNOLOGICALS	0						U	HEPATITIS B VIRUS VACCINE RECOMBINANT	W	58160082132	Enhanced
310414	39822071001	FOMEPIZOLE	SOLN	1GM/ML	1	2	0			0		0	IMMUNOLOGY, VACCINES / BIOTECHNOLOGY	VACCINES / MISCELLANEOUS IMMUNOLOGICALS	IMMUNOLOGY, VACCINES / BIOTECHNOLOGY	VACCINES / MISCELLANEOUS IMMUNOLOGICALS	0						IV	FOMEPIZOLE (4-METHYLPYRAZOLE)	Y	39822071001	Enhanced
797557	13533063512	GAMASTAN S/D	INJ	0	2	5	0			0		0	IMMUNOLOGY, VACCINES / BIOTECHNOLOGY	VACCINES / MISCELLANEOUS IMMUNOLOGICALS	IMMUNOLOGY, VACCINES / BIOTECHNOLOGY	VACCINES / MISCELLANEOUS IMMUNOLOGICALS	0						IM	GLOBULIN, IMMUNE	W	13533063512	Enhanced
545184	13533080012	GAMUNEX-C	SOLN	1GM/10ML	3	5	0			1	IVIG	0	IMMUNOLOGY, VACCINES / BIOTECHNOLOGY	VACCINES / MISCELLANEOUS IMMUNOLOGICALS	IMMUNOLOGY, VACCINES / BIOTECHNOLOGY	VACCINES / MISCELLANEOUS IMMUNOLOGICALS	0						U	GLOBULIN, IMMUNE IV OR SC (TALECRIS)	W	13533080012	Enhanced
798274	00006404500	GARDASIL	SUSP	0	2	5	0			0		0	IMMUNOLOGY, VACCINES / BIOTECHNOLOGY	VACCINES / MISCELLANEOUS IMMUNOLOGICALS	IMMUNOLOGY, VACCINES / BIOTECHNOLOGY	VACCINES / MISCELLANEOUS IMMUNOLOGICALS	0						IM	QUADRIVALENT HPV (6,11,16,18) RECOMB VAC	W	00006404500	Enhanced
798367	58160082611	HAVRIX	SUSP	1440ELU/ML	2	5	0			0		0	IMMUNOLOGY, VACCINES / BIOTECHNOLOGY	VACCINES / MISCELLANEOUS IMMUNOLOGICALS	IMMUNOLOGY, VACCINES / BIOTECHNOLOGY	VACCINES / MISCELLANEOUS IMMUNOLOGICALS	0						IM	HEPATITIS A VIRUS VACCINE INACTIVATED	W	58160082611	Enhanced
798482	58160082552	HAVRIX	SUSP	720ELU/0.5ML	2	5	0			0		0	IMMUNOLOGY, VACCINES / BIOTECHNOLOGY	VACCINES / MISCELLANEOUS IMMUNOLOGICALS	IMMUNOLOGY, VACCINES / BIOTECHNOLOGY	VACCINES / MISCELLANEOUS IMMUNOLOGICALS	0						IM	HEPATITIS A VIRUS VACCINE INACTIVATED	W	58160082552	Enhanced
830470	49281025051	IMOVAX RABIES (H.D.C.V.)	INJ	2.5UNIT/ML	2	5	0			0		0	IMMUNOLOGY, VACCINES / BIOTECHNOLOGY	VACCINES / MISCELLANEOUS IMMUNOLOGICALS	IMMUNOLOGY, VACCINES / BIOTECHNOLOGY	VACCINES / MISCELLANEOUS IMMUNOLOGICALS	0						IM	RABIES VACCINE HUMAN DIPLOID CELL	W	49281025051	Enhanced
1300386	58160081011	INFANRIX	SUSP	58MCG/0.5ML; 25LFU/0.5ML; 10LFU/0.5ML	2	5	0			0		0	IMMUNOLOGY, VACCINES / BIOTECHNOLOGY	VACCINES / MISCELLANEOUS IMMUNOLOGICALS	IMMUNOLOGY, VACCINES / BIOTECHNOLOGY	VACCINES / MISCELLANEOUS IMMUNOLOGICALS	0						IM	ACELLULAR PERTUSSIS; DIPHTHERIA TOXOID; TETANUS TOXOID	W	58160081011	Enhanced
763106	49281086010	IPOL INACTIVATED IPV	INJ	0	2	5	0			0		0	IMMUNOLOGY, VACCINES / BIOTECHNOLOGY	VACCINES / MISCELLANEOUS IMMUNOLOGICALS	IMMUNOLOGY, VACCINES / BIOTECHNOLOGY	VACCINES / MISCELLANEOUS IMMUNOLOGICALS	0						U	POLIOVIRUS VACCINE INACTIVATED	W	49281086010	Enhanced
1300783	42515000101	IXIARO	SUSP	0	2	5	0			0		0	IMMUNOLOGY, VACCINES / BIOTECHNOLOGY	VACCINES / MISCELLANEOUS IMMUNOLOGICALS	IMMUNOLOGY, VACCINES / BIOTECHNOLOGY	VACCINES / MISCELLANEOUS IMMUNOLOGICALS	0						IM	JAPANESE ENCEPHALITIS VIR VAC INACT ADS	W	42515000101	Enhanced
804186	00006468100	M-M-R II WIDILUENT 10 DOSE	INJ	0; 0; 0	2	5	0			0		0	IMMUNOLOGY, VACCINES / BIOTECHNOLOGY	VACCINES / MISCELLANEOUS IMMUNOLOGICALS	IMMUNOLOGY, VACCINES / BIOTECHNOLOGY	VACCINES / MISCELLANEOUS IMMUNOLOGICALS	0						SC	MEASLES VIRUS VACCINE LIVE; MUMPS VIRUS VACCINE LIVE;	W	00006468100	Enhanced
797641	49281058905	MENACTRA	INJ	0	2	5	0			0		0	IMMUNOLOGY, VACCINES / BIOTECHNOLOGY	VACCINES / MISCELLANEOUS IMMUNOLOGICALS	IMMUNOLOGY, VACCINES / BIOTECHNOLOGY	VACCINES / MISCELLANEOUS IMMUNOLOGICALS	0						IM	MENINGOCOCCAL POLYSACCHARIDE VAC A-C-Y-	W	49281058905	Enhanced
2072269	49281048901	MENOMUNE-A/C/Y/W-135	INJ	0	2	5	0			0		0	IMMUNOLOGY, VACCINES / BIOTECHNOLOGY	VACCINES / MISCELLANEOUS IMMUNOLOGICALS	IMMUNOLOGY, VACCINES / BIOTECHNOLOGY	VACCINES / MISCELLANEOUS IMMUNOLOGICALS	0						SC	MENINGOCOCCAL POLYSACCHARIDE VAC A-C-Y-	W	49281048901	Enhanced
901518	46028020801	MENVEO	SOLR	0	2	5	0			0		0	IMMUNOLOGY, VACCINES / BIOTECHNOLOGY	VACCINES / MISCELLANEOUS IMMUNOLOGICALS	IMMUNOLOGY, VACCINES / BIOTECHNOLOGY	VACCINES / MISCELLANEOUS IMMUNOLOGICALS	0						IM	MENINGOCOCCAL OLIGOSACCHARID VAC A-C-Y-W	W	46028020801	Enhanced
798451	00006489700	PEDVAX HIB	SOLN	0	2	5	0			0		0	IMMUNOLOGY, VACCINES / BIOTECHNOLOGY	VACCINES / MISCELLANEOUS IMMUNOLOGICALS	IMMUNOLOGY, VACCINES / BIOTECHNOLOGY	VACCINES / MISCELLANEOUS IMMUNOLOGICALS	0						IM	HAEMOPHILUS B POLYSACCHARIDE CONJ VACC	W	00006489700	Enhanced
758999	44206043820	PRIVIGEN	SOLN	20GM/200ML	3	5	0			1	IVIG	0	IMMUNOLOGY, VACCINES / BIOTECHNOLOGY	BIOTECHNOLOGY DRUGS	IMMUNOLOGY, VACCINES / BIOTECHNOLOGY	BIOTECHNOLOGY DRUGS	0						IV	GLOBULIN, IMMUNE IV (IMMUNOMODULATING)	W	44206043820	Enhanced
1292443	00006499900	PROQUAD	INJ	0; 0; 0; 0	2	5	0			0		0	IMMUNOLOGY, VACCINES / BIOTECHNOLOGY	VACCINES / MISCELLANEOUS IMMUNOLOGICALS	IMMUNOLOGY, VACCINES / BIOTECHNOLOGY	VACCINES / MISCELLANEOUS IMMUNOLOGICALS	0						SC	MEASLES VIRUS VACCINE LIVE; MUMPS VIRUS VACCINE LIVE;	W	00006499900	Enhanced
830463	63851050101	RABAVERT	SUSR	0	2	5	0			0		0	IMMUNOLOGY, VACCINES / BIOTECHNOLOGY	VACCINES / MISCELLANEOUS IMMUNOLOGICALS	IMMUNOLOGY, VACCINES / BIOTECHNOLOGY	VACCINES / MISCELLANEOUS IMMUNOLOGICALS	0						IM	RABIES VACCINE PURIFIED CHICK EMBRYO CEL	W	63851050101	Enhanced
830214	00006499500	RECOMBIVAX HB	SUSP	10MCG/ML	2	5	0			3		0	IMMUNOLOGY, VACCINES / BIOTECHNOLOGY	VACCINES / MISCELLANEOUS IMMUNOLOGICALS	IMMUNOLOGY, VACCINES / BIOTECHNOLOGY	VACCINES / MISCELLANEOUS IMMUNOLOGICALS	0						U	HEPATITIS B VIRUS VACCINE RECOMBINANT	W	00006499500	Enhanced
830263	00006499200	RECOMBIVAX HB	SUSP	40MCG/ML	2	5	0			3		0	IMMUNOLOGY, VACCINES / BIOTECHNOLOGY	VACCINES / MISCELLANEOUS IMMUNOLOGICALS	IMMUNOLOGY, VACCINES / BIOTECHNOLOGY	VACCINES / MISCELLANEOUS IMMUNOLOGICALS	0						U	HEPATITIS B VIRUS VACCINE RECOMBINANT	W	00006499200	Enhanced
798300	00006404741	ROTATEQ	SUSP	0	2	5	0			0		0	IMMUNOLOGY, VACCINES / BIOTECHNOLOGY	VACCINES / MISCELLANEOUS IMMUNOLOGICALS	IMMUNOLOGY, VACCINES / BIOTECHNOLOGY	VACCINES / MISCELLANEOUS IMMUNOLOGICALS	0						OR	ROTAVIRUS VACCINE LIVE PENTAVALENT	W	00006404741	Enhanced
205259	14362011103	TETANUS/DIPHTHERIA TOXOIDS-ADSORBED ADULT	SUSP	2LF/0.5ML; 2LF/0.5ML	2	5	0			0		0	IMMUNOLOGY, VACCINES / BIOTECHNOLOGY	VACCINES / MISCELLANEOUS IMMUNOLOGICALS	IMMUNOLOGY, VACCINES / BIOTECHNOLOGY	VACCINES / MISCELLANEOUS IMMUNOLOGICALS	0						IM	DIPHTHERIA TOXOID; TETANUS TOXOID	W	14362011103	Enhanced
204527	49281082010	TETANUS TOXOID ADSORBED	SOLN	5LFU	1	2	0			0		0	IMMUNOLOGY, VACCINES / BIOTECHNOLOGY	VACCINES / MISCELLANEOUS IMMUNOLOGICALS	IMMUNOLOGY, VACCINES / BIOTECHNOLOGY	VACCINES / MISCELLANEOUS IMMUNOLOGICALS	0						IM	TETANUS TOXOID ADSORBED	Y	49281082010	Enhanced
803367	58160081511	TWINRIX	SUSP	720ELU/ML; 20MCG/ML	2	5	0			0		0	IMMUNOLOGY, VACCINES / BIOTECHNOLOGY	VACCINES / MISCELLANEOUS IMMUNOLOGICALS	IMMUNOLOGY, VACCINES / BIOTECHNOLOGY	VACCINES / MISCELLANEOUS IMMUNOLOGICALS	0						IM	HEPATITIS A VIRUS VACCINE INACTIVATED; HEPATITIS B	W	58160081511	Enhanced
807225	49281079020	TYPHIM VI	SOLN	25MCG/0.5ML	2	5	0			0		0	IMMUNOLOGY, VACCINES / BIOTECHNOLOGY	VACCINES / MISCELLANEOUS IMMUNOLOGICALS	IMMUNOLOGY, VACCINES / BIOTECHNOLOGY	VACCINES / MISCELLANEOUS IMMUNOLOGICALS	0						IM	TYPHOID VI POLYSACCHARIDE VACCINE	W	49281079020	Enhanced
802016	00006483141	VAQTA	SUSP	25UNIT/0.5ML	2	5	0			0		0	IMMUNOLOGY, VACCINES / BIOTECHNOLOGY	VACCINES / MISCELLANEOUS IMMUNOLOGICALS	IMMUNOLOGY, VACCINES / BIOTECHNOLOGY	VACCINES / MISCELLANEOUS IMMUNOLOGICALS	0						IM	HEPATITIS A VIRUS VACCINE INACTIVATED	W	00006483141	Enhanced
1292459	00006482700	VARIVAX	INJ	1350PFU/0.5ML	2	5	0			0		0	IMMUNOLOGY, VACCINES / BIOTECHNOLOGY	VACCINES / MISCELLANEOUS IMMUNOLOGICALS	IMMUNOLOGY, VACCINES / BIOTECHNOLOGY	VACCINES / MISCELLANEOUS IMMUNOLOGICALS	0						SC	VARICELLA VIRUS VACCINE LIVE	W	00006482700	Enhanced
1292828	49281091501	YF-VAX	INJ	0	2	5	0			0		0	IMMUNOLOGY, VACCINES / BIOTECHNOLOGY	VACCINES / MISCELLANEOUS IMMUNOLOGICALS	IMMUNOLOGY, VACCINES / BIOTECHNOLOGY	VACCINES / MISCELLANEOUS IMMUNOLOGICALS	0						SC	YELLOW FEVER VACCINE	W	49281091501	Enhanced
1292435	00006496341	ZOSTAVAX	SOLR	19400UNIT/0.65ML	2	5	0			0		0	IMMUNOLOGY, VACCINES / BIOTECHNOLOGY	VACCINES / MISCELLANEOUS IMMUNOLOGICALS	IMMUNOLOGY, VACCINES / BIOTECHNOLOGY	VACCINES / MISCELLANEOUS IMMUNOLOGICALS	0						SC	ZOSTER VACCINE LIVE (OKA/MERCK)	W	00006496341	Enhanced
252931	55390010601	ALLOPURINOL SODIUM	SOLR	500MG	1	2	0			0		0	MUSCULOSKELETAL / RHEUMATOLOGY	GOUT THERAPY	MUSCULOSKELETAL /

825170	00074433906	HUMIRA PEN-CROHNS DISEASESTARTER	KIT	40MG/0.8ML	3	5	1	6	180	2	HUMIRA	0	MUSCULOSKELETAL / RHEUMATOLOGY	OTHER RHEUMATOLOGICALS	MUSCULOSKELETAL / RHEUMATOLOGY	OTHER RHEUMATOLOGICALS	0					SC	ADALIMUMAB	W	00074433906	Enhanced
205284	60505250201	LEFLUNOMIDE	TABS	10MG	1	2	1	90	90	0		0	MUSCULOSKELETAL / RHEUMATOLOGY	OTHER RHEUMATOLOGICALS	MUSCULOSKELETAL / RHEUMATOLOGY	OTHER RHEUMATOLOGICALS	0					OR	LEFLUNOMIDE	Y	60505250201	Enhanced
205285	00093017456	LEFLUNOMIDE	TABS	20MG	1	2	1	90	90	0		0	MUSCULOSKELETAL / RHEUMATOLOGY	OTHER RHEUMATOLOGICALS	MUSCULOSKELETAL / RHEUMATOLOGY	OTHER RHEUMATOLOGICALS	0					OR	LEFLUNOMIDE	Y	00093017456	Enhanced
1145932	00003218831	ORENCIA	SOLN	125MG/1ML	3	5	0			2	ORENCIA	0	MUSCULOSKELETAL / RHEUMATOLOGY	OTHER RHEUMATOLOGICALS	MUSCULOSKELETAL / RHEUMATOLOGY	OTHER RHEUMATOLOGICALS	0					SC	ABATACEPT	W	00003218831	Enhanced
616018	00003218710	ORENCIA	SOLR	250MG	3	5	0			2	ORENCIA	0	MUSCULOSKELETAL / RHEUMATOLOGY	OTHER RHEUMATOLOGICALS	MUSCULOSKELETAL / RHEUMATOLOGY	OTHER RHEUMATOLOGICALS	0					IV	ABATACEPT	W	00003218710	Enhanced
213510	65483009306	RIDAURA	CAPS	3MG	2	5	0			0		0	MUSCULOSKELETAL / RHEUMATOLOGY	OTHER RHEUMATOLOGICALS	MUSCULOSKELETAL / RHEUMATOLOGY	OTHER RHEUMATOLOGICALS	0					OR	AURANOFIN	W	65483009306	Enhanced
833151	00456150055	SAVELLA TITRATION PACK	MISC	0	2	5	1	1	90	2	ANTIDEPRESSANT S- SNRI	0	MUSCULOSKELETAL / RHEUMATOLOGY	OTHER RHEUMATOLOGICALS	MUSCULOSKELETAL / RHEUMATOLOGY	OTHER RHEUMATOLOGICALS	0					OR	MILNACIPRAN HYDROCHLORIDE	W	00456150055	Enhanced
833139	00456151060	SAVELLA	TABS	100MG	2	5	1	180	90	2	ANTIDEPRESSANT S- SNRI	0	MUSCULOSKELETAL / RHEUMATOLOGY	OTHER RHEUMATOLOGICALS	MUSCULOSKELETAL / RHEUMATOLOGY	OTHER RHEUMATOLOGICALS	0					OR	MILNACIPRAN HYDROCHLORIDE	W	00456151060	Enhanced
833143	00456151260	SAVELLA	TABS	12.5MG	2	5	1	1440	90	2	ANTIDEPRESSANT S- SNRI	0	MUSCULOSKELETAL / RHEUMATOLOGY	OTHER RHEUMATOLOGICALS	MUSCULOSKELETAL / RHEUMATOLOGY	OTHER RHEUMATOLOGICALS	0					OR	MILNACIPRAN HYDROCHLORIDE	W	00456151260	Enhanced
833149	00456152560	SAVELLA	TABS	25MG	2	5	1	720	90	2	ANTIDEPRESSANT S- SNRI	0	MUSCULOSKELETAL / RHEUMATOLOGY	OTHER RHEUMATOLOGICALS	MUSCULOSKELETAL / RHEUMATOLOGY	OTHER RHEUMATOLOGICALS	0					OR	MILNACIPRAN HYDROCHLORIDE	W	00456152560	Enhanced
833146	00456155060	SAVELLA	TABS	50MG	2	5	1	360	90	2	ANTIDEPRESSANT S- SNRI	0	MUSCULOSKELETAL / RHEUMATOLOGY	OTHER RHEUMATOLOGICALS	MUSCULOSKELETAL / RHEUMATOLOGY	OTHER RHEUMATOLOGICALS	0					OR	MILNACIPRAN HYDROCHLORIDE	W	00456155060	Enhanced
748962	00555071558	CAMILA	TABS	0.35MG	1	2	0			0		0	OBSTETRICS / GYNECOLOGY	ESTROGENS / PROGESTINS	OBSTETRICS / GYNECOLOGY	ESTROGENS / PROGESTINS	0					OR	NORETHINDRONE	Y	00555071558	Enhanced
1000133	00009026201	DEPO-PROVERA	SUSP	400MG/ML	2	5	0			0		0	OBSTETRICS / GYNECOLOGY	ESTROGENS / PROGESTINS	OBSTETRICS / GYNECOLOGY	ESTROGENS / PROGESTINS	0					IM	MEDROXYPROGESTERONE	W	00009026201	Enhanced
831533	00555033458	ERRIN	TABS	0.35MG	1	2	0			0		0	OBSTETRICS / GYNECOLOGY	ESTROGENS / PROGESTINS	OBSTETRICS / GYNECOLOGY	ESTROGENS / PROGESTINS	0					OR	NORETHINDRONE	Y	00555033458	Enhanced
1359124	51991062328	ESTRADIOL/NORETHINDRONE ACETATE	TABS	0.5MG; 0.1MG	1	2	0			0		0	OBSTETRICS / GYNECOLOGY	ESTROGENS / PROGESTINS	OBSTETRICS / GYNECOLOGY	ESTROGENS / PROGESTINS	0					OR	ESTRADIOL; NORETHINDRONE	Y	51991062328	Enhanced
1359127	51991047428	ESTRADIOL/NORETHINDRONE ACETATE	TABS	1MG; 0.5MG	1	2	0			0		0	OBSTETRICS / GYNECOLOGY	ESTROGENS / PROGESTINS	OBSTETRICS / GYNECOLOGY	ESTROGENS / PROGESTINS	0					OR	ESTRADIOL; NORETHINDRONE	Y	51991047428	Enhanced
890918	00403075414	ESTRACE	CREA	0.1MG/GM	2	5	0			0		0	OBSTETRICS / GYNECOLOGY	ESTROGENS / PROGESTINS	OBSTETRICS / GYNECOLOGY	ESTROGENS / PROGESTINS	0					VA	ESTRADIOL	W	00403075414	Enhanced
310191	00574087205	ESTRADIOL VALERATE	OIL	40MG/ML	1	2	0			0		0	OBSTETRICS / GYNECOLOGY	ESTROGENS / PROGESTINS	OBSTETRICS / GYNECOLOGY	ESTROGENS / PROGESTINS	0					IM	ESTRADIOL VALERATE	Y	00574087205	Enhanced
310190	00574087005	ESTRADIOL VALERATE	OIL	20MG/ML	1	2	0			0		0	OBSTETRICS / GYNECOLOGY	ESTROGENS / PROGESTINS	OBSTETRICS / GYNECOLOGY	ESTROGENS / PROGESTINS	0					IM	ESTRADIOL VALERATE	Y	00574087005	Enhanced
197657	00378145205	ESTRADIOL	TABS	0.5MG	1	2	0			0		0	OBSTETRICS / GYNECOLOGY	ESTROGENS / PROGESTINS	OBSTETRICS / GYNECOLOGY	ESTROGENS / PROGESTINS	0					OR	ESTRADIOL	Y	00378145205	Enhanced
197658	00378145405	ESTRADIOL	TABS	1MG	1	2	0			0		0	OBSTETRICS / GYNECOLOGY	ESTROGENS / PROGESTINS	OBSTETRICS / GYNECOLOGY	ESTROGENS / PROGESTINS	0					OR	ESTRADIOL	Y	00378145405	Enhanced
197659	00555088702	ESTRADIOL	TABS	2MG	1	2	0			0		0	OBSTETRICS / GYNECOLOGY	ESTROGENS / PROGESTINS	OBSTETRICS / GYNECOLOGY	ESTROGENS / PROGESTINS	0					OR	ESTRADIOL	Y	00555088702	Enhanced
310212	00591014401	ESTROPIPATE	TABS	0.75MG	1	2	0			0		0	OBSTETRICS / GYNECOLOGY	ESTROGENS / PROGESTINS	OBSTETRICS / GYNECOLOGY	ESTROGENS / PROGESTINS	0					OR	ESTROPIPATE	Y	00591014401	Enhanced
310213	00591041501	ESTROPIPATE	TABS	1.5MG	1	2	0			0		0	OBSTETRICS / GYNECOLOGY	ESTROGENS / PROGESTINS	OBSTETRICS / GYNECOLOGY	ESTROGENS / PROGESTINS	0					OR	ESTROPIPATE	Y	00591041501	Enhanced
310215	00591041601	ESTROPIPATE	TABS	3MG	1	2	0			0		0	OBSTETRICS / GYNECOLOGY	ESTROGENS / PROGESTINS	OBSTETRICS / GYNECOLOGY	ESTROGENS / PROGESTINS	0					OR	ESTROPIPATE	Y	00591041601	Enhanced
1090996	00093312298	JINTELI	TABS	5MCG; 1MG	1	2	0			0		0	OBSTETRICS / GYNECOLOGY	ESTROGENS / PROGESTINS	OBSTETRICS / GYNECOLOGY	ESTROGENS / PROGESTINS	0					OR	ETHINYL ESTRADIOL;	Y	00093312298	Enhanced
757594	52544089228	JOLIVETTE	TABS	0.35MG	1	2	0			0		0	OBSTETRICS / GYNECOLOGY	ESTROGENS / PROGESTINS	OBSTETRICS / GYNECOLOGY	ESTROGENS / PROGESTINS	0					OR	NORETHINDRONE	Y	52544089228	Enhanced
10001126	00703680101	MEDROXYPROGESTERONE ACETATE	SUSP	150MG/ML	2	5	0			0		0	OBSTETRICS / GYNECOLOGY	ESTROGENS / PROGESTINS	OBSTETRICS / GYNECOLOGY	ESTROGENS / PROGESTINS	0					IM	MEDROXYPROGESTERONE	Y	00703680101	Enhanced
10001114	00555077904	MEDROXYPROGESTERONE ACETATE	TABS	10MG	1	2	0			0		0	OBSTETRICS / GYNECOLOGY	ESTROGENS / PROGESTINS	OBSTETRICS / GYNECOLOGY	ESTROGENS / PROGESTINS	0					OR	MEDROXYPROGESTERONE	Y	00555077904	Enhanced
10001135	00555087204	MEDROXYPROGESTERONE ACETATE	TABS	2.5MG	1	2	0			0		0	OBSTETRICS / GYNECOLOGY	ESTROGENS / PROGESTINS	OBSTETRICS / GYNECOLOGY	ESTROGENS / PROGESTINS	0					OR	MEDROXYPROGESTERONE	Y	00555087204	Enhanced
10001141	00555087304	MEDROXYPROGESTERONE ACETATE	TABS	5MG	1	2	0			0		0	OBSTETRICS / GYNECOLOGY	ESTROGENS / PROGESTINS	OBSTETRICS / GYNECOLOGY	ESTROGENS / PROGESTINS	0					OR	MEDROXYPROGESTERONE	Y	00555087304	Enhanced
212039	61570007201	MENEST	TABS	0.3MG	2	5	0			0		0	OBSTETRICS / GYNECOLOGY	ESTROGENS / PROGESTINS	OBSTETRICS / GYNECOLOGY	ESTROGENS / PROGESTINS	0					OR	ESTROGENS, ESTERIFIED	W	61570007201	Enhanced
212232	61570007301	MENEST	TABS	0.625MG	2	5	0			0		0	OBSTETRICS / GYNECOLOGY	ESTROGENS / PROGESTINS	OBSTETRICS / GYNECOLOGY	ESTROGENS / PROGESTINS	0					OR	ESTROGENS, ESTERIFIED	W	61570007301	Enhanced
212373	61570007401	MENEST	TABS	1.25MG	2	5	0			0		0	OBSTETRICS / GYNECOLOGY	ESTROGENS / PROGESTINS	OBSTETRICS / GYNECOLOGY	ESTROGENS / PROGESTINS	0					OR	ESTROGENS, ESTERIFIED	W	61570007401	Enhanced
212464	61570007550	MENEST	TABS	2.5MG	2	5	0			0		0	OBSTETRICS / GYNECOLOGY	ESTROGENS / PROGESTINS	OBSTETRICS / GYNECOLOGY	ESTROGENS / PROGESTINS	0					OR	ESTROGENS, ESTERIFIED	W	61570007550	Enhanced
748977	52544062928	NORA-BE	TABS	0.35MG	1	2	0			0		0	OBSTETRICS / GYNECOLOGY	ESTROGENS / PROGESTINS	OBSTETRICS / GYNECOLOGY	ESTROGENS / PROGESTINS	0					OR	NORETHINDRONE	Y	52544062928	Enhanced
1000405	00555021110	NORETHINDRONE ACETATE	TABS	5MG	1	2	0			0		0	OBSTETRICS / GYNECOLOGY	ESTROGENS / PROGESTINS	OBSTETRICS / GYNECOLOGY	ESTROGENS / PROGESTINS	0					OR	NORETHINDRONE ACETATE	Y	00555021110	Enhanced
988242	00046097221	PREMARIN	CREA	0.625MG/GM	2	5	0			0		0	OBSTETRICS / GYNECOLOGY	ESTROGENS / PROGESTINS	OBSTETRICS / GYNECOLOGY	ESTROGENS / PROGESTINS	0					VA	ESTROGENS, CONJUGATED	W	00046097221	Enhanced
10004087	00046257911	PREMPHASE	TABS	0.625MG; 5MG	2	5	0			0		0	OBSTETRICS / GYNECOLOGY	ESTROGENS / PROGESTINS	OBSTETRICS / GYNECOLOGY	ESTROGENS / PROGESTINS	0					OR	ESTROGENS, CONJUGATED;	W	00046257911	Enhanced
10004099	00046110711	PREMPRO	TABS	0.625MG; 2.5MG	2	5	0			0		0	OBSTETRICS / GYNECOLOGY	ESTROGENS / PROGESTINS	OBSTETRICS / GYNECOLOGY	ESTROGENS / PROGESTINS	0					OR	ESTROGENS, CONJUGATED;	W	00046110711	Enhanced
10004091	00046110511	PREMPRO	TABS	0.3MG; 1.5MG	2	5	0			0		0	OBSTETRICS / GYNECOLOGY	ESTROGENS / PROGESTINS	OBSTETRICS / GYNECOLOGY	ESTROGENS / PROGESTINS	0					OR	ESTROGENS, CONJUGATED;	W	00046110511	Enhanced
10004097	00046110611	PREMPRO	TABS	0.45MG; 1.5MG	2	5	0			0		0	OBSTETRICS / GYNECOLOGY	ESTROGENS / PROGESTINS	OBSTETRICS / GYNECOLOGY	ESTROGENS / PROGESTINS	0					OR	ESTROGENS, CONJUGATED;	W	00046110611	Enhanced
1000500	00046110811	PREMPRO	TABS	0.625MG; 5MG	2	5	0			0		0	OBSTETRICS / GYNECOLOGY	ESTROGENS / PROGESTINS	OBSTETRICS / GYNECOLOGY	ESTROGENS / PROGESTINS	0					OR	ESTROGENS, CONJUGATED;	W	00046097511	Enhanced
260243	00093535301	PROGESTERONE	CAPS	100MG	1	2	0			0		0	OBSTETRICS / GYNECOLOGY	ESTROGENS / PROGESTINS	OBSTETRICS / GYNECOLOGY	ESTROGENS / PROGESTINS	0					OR	PROGESTERONE	Y	00093535301	Enhanced
312641	00093535401	PROGESTERONE	CAPS	200MG	1	2	0			0		0	OBSTETRICS / GYNECOLOGY	ESTROGENS / PROGESTINS	OBSTETRICS / GYNECOLOGY	ESTROGENS / PROGESTINS	0					OR	PROGESTERONE	Y	00093535401	Enhanced
884709	00169517603	VAGIFEM	TABS	10MCG	2	5	0			0		0	OBSTETRICS / GYNECOLOGY	ESTROGENS / PROGESTINS	OBSTETRICS / GYNECOLOGY	ESTROGENS / PROGESTINS	0					VA	ESTRADIOL HEMIHYDRATE	W	00169517603	Enhanced
309337	00168027740	CLINDAMYCIN PHOSPHATE	CREA	2%	1	2	0			0		0	OBSTETRICS / GYNECOLOGY	MISCELLANEOUS OB/GYN	OBSTETRICS / GYNECOLOGY	MISCELLANEOUS OB/GYN	0					VA	CLINDAMYCIN PHOSPHATE	Y	00168027740	Enhanced
142046	00781707787	METRONIDAZOLE VAGINAL	GEL	0.75%	1	2	0			0		0	OBSTETRICS / GYNECOLOGY	MISCELLANEOUS OB/GYN	OBSTETRICS / GYNECOLOGY	MISCELLANEOUS OB/GYN	0					VA	METRONIDAZOLE	Y	00781707787	Enhanced
992765	00472173803	MICONAZOLE 3	SUPP	200MG	1	2	0			0		0	OBSTETRICS / GYNECOLOGY	MISCELLANEOUS OB/GYN	OBSTETRICS / GYNECOLOGY	MISCELLANEOUS OB/GYN	0					VA	MICONAZOLE NITRATE	Y	00472173803	Enhanced
313226	51672130406	TERCONAZOLE	CREA	0.4%	1	2	0			0		0	OBSTETRICS / GYNECOLOGY	MISCELLANEOUS OB/GYN	OBSTETRICS / GYNECOLOGY	MISCELLANEOUS OB/GYN	0					VA	TERCONAZOLE	Y	51672130406	Enhanced
313227	51672130209	TERCONAZOLE	CREA	0.8%	1	2	0			0		0	OBSTETRICS / GYNECOLOGY	MISCELLANEOUS OB/GYN	OBSTETRICS / GYNECOLOGY	MISCELLANEOUS OB/GYN	0					VA	TERCONAZOLE	Y	51672130209	Enhanced
198245	45802071708	TERCONAZOLE	SUPP	80MG	1	2	0			0		0	OBSTETRICS / GYNECOLOGY	MISCELLANEOUS OB/GYN	OBSTETRICS / GYNECOLOGY	MISCELLANEOUS OB/GYN	0					VA	TERCONAZOLE	Y	45802071708	Enhanced
883826	00591372030	TRANEXAMIC ACID	TABS	650MG	1	2	0			0		0	OBSTETRICS / GYNECOLOGY	MISCELLANEOUS OB/GYN	OBSTETRICS / GYNECOLOGY	MISCELLANEOUS OB/GYN	0					OR	TRANEXAMIC ACID	Y	00591372030	Enhanced
626934	00245086070	VANDAZOLE	GEL	0.75%	1	2	0			0		0	OBSTETRICS / GYNECOLOGY	MISCELLANEOUS OB/GYN	OBSTETRICS / GYNECOLOGY	MISCELLANEOUS OB/GYN	0					VA	METRONIDAZOLE	Y	00245086070	Enhanced
543835	00482034646	ZAZOLE	CREA	0.4%	1	2	0			0		0	OBSTETRICS / GYNECOLOGY	MISCELLANEOUS OB/GYN	OBSTETRICS / GYNECOLOGY	MISCELLANEOUS OB/GYN	0					VA	TERCONAZOLE	Y	00482034646	Enhanced
1112687	52544026829	AMETHIA	TABS	0; 0	1	2	0			0		0	OBSTETRICS / GYNECOLOGY	ORAL CONTRACEPTIVES / RELATED AGENTS	OBSTETRICS / GYNECOLOGY	ORAL CONTRACEPTIVES / RELATED AGENTS	0					OR	ETHINYL ESTRADIOL;	Y	52544026829	Enhanced
1112715	52544029528	AMETHYST	TABS	20MCG; 90MCG	1	2	0			0		0	OBSTETRICS / GYNECOLOGY	ORAL CONTRACEPTIVES / RELATED AGENTS	OBSTETRICS / GYNECOLOGY	ORAL CONTRACEPTIVES / RELATED AGENTS	0					OR	ETHINYL ESTRADIOL;	Y	52544029528	Enhanced
753482	00555904358	APRI	TABS	0.15MG; 30MCG	1	2	0			0		0	OBSTETRICS / GYNECOLOGY	ORAL CONTRACEPTIVES / RELATED AGENTS	OBSTETRICS / GYNECOLOGY	ORAL CONTRACEPTIVES / RELATED AGENTS	0					OR	DESOGESTREL; ETHINYL	Y	00555904358	Enhanced
750267	00555906667	ARANELLE	TABS	0; 0	1	2	0			0		0	OBSTETRICS / GYNECOLOGY	ORAL CONTRACEPTIVES / RELATED AGENTS	OBSTETRICS / GYNECOLOGY	ORAL CONTRACEPTIVES / RELATED AGENTS	0					OR	ETHINYL ESTRADIOL;	Y	00555906667	Enhanced
750268	00555904558	AVIANE	TABS	20MCG; 0.1MG	1	2	0			0		0	OBSTETRICS / GYNECOLOGY	ORAL CONTRACEPTIVES / RELATED AGENTS	OBSTETRICS / GYNECOLOGY	ORAL CONTRACEPTIVES / RELATED AGENTS	0					OR	ETHINYL ESTRADIOL;	Y	00555904558	Enhanced
1095362	00555903458	BALZIVA	TABS	35MCG; 0.4MG	1	2	0			0		0	OBSTETRICS / GYNECOLOGY	ORAL CONTRACEPTIVES / RELATED AGENTS	OBSTETRICS / GYNECOLOGY	ORAL CONTRACEPTIVES / RELATED AGENTS	0					OR	ETHINYL ESTRADIOL;	Y	00555903458	Enhanced
1094543	68462013629	BRELLYN	TABS	35MCG; 0.4MG	1	2	0			0		0	OBSTETRICS / GYNECOLOGY	ORAL CONTRACEPTIVES / RELATED AGENTS	OBSTETRICS / GYNECOLOGY	ORAL CONTRACEPTIVES / RELATED AGENTS	0					OR	ETHINYL ESTRADIOL;	Y	68462013629	Enhanced
750265	00555904958	CRYSELLE-28	TABS	30MCG; 0.3MG	1	2	0			0		0	OBSTETRICS / GYNECOLOGY	ORAL CONTRACEPTIVES / RELATED AGENTS	OBSTETRICS / GYNECOLOGY	ORAL CONTRACEPTIVES / RELATED AGENTS	0					OR	ETHINYL ESTRADIOL;	Y	00555904958	Enhanced
1047040	00603752117	CYCLAFEM 1/35	TABS	35MCG; 1MG	1	2	0			0		0	OBSTETRICS / GYNECOLOGY	ORAL CONTRACEPTIVES / RELATED AGENTS	OBSTETRICS / GYNECOLOGY	ORAL CONTRACEPTIVES / RELATED AGENTS	0					OR	ETHINYL ESTRADIOL;	Y	00603752117	Enhanced
1047041	00603752517	CYCLAFEM 7/7/7	TABS	0; 0	1	2	0			0		0	OBSTETRICS / GYNECOLOGY	ORAL CONTRACEPTIVES / RELATED AGENTS	OBSTETRICS / GYNECOLOGY	ORAL CONTRACEPTIVES / RELATED AGENTS	0					OR	ETHINYL ESTRADIOL;	Y	00603752517	Enhanced
748800	68180092213	DROSPIRENONE/ETHINYL ESTRADIOL	TABS	3MG; 0.03MG	1	2	0			0		0	OBSTETRICS / GYNECOLOGY	ORAL CONTRACEPTIVES / RELATED AGENTS	OBSTETRICS / GYNECOLOGY	ORAL CONTRACEPTIVES / RELATED AGENTS	0					OR	DROSPIRENONE; ETHINYL	Y	68180092213	Enhanced
1091828	00603754017	EMOQUETTE	TABS	0.15MG; 30MCG	1	2	0			0		0	OBSTETRICS / GYNECOLOGY	ORAL CONTRACEPTIVES / RELATED AGENTS	OBSTETRICS / GYNECOLOGY	ORAL CONTRACEPTIVES / RELATED AGENTS	0					OR	DESOGESTREL; ETHINYL	Y	00603754017	Enhanced
761977	00555904758	ENPRESSE-28	TABS	0; 0	1	2	0			0		0	OBSTETRICS / GYNECOLOGY	ORAL CONTRACEPTIVES / RELATED AGENTS	OBSTETRICS / GYNECOLOGY	ORAL CONTRACEPTIVES / RELATED AGENTS	0					OR	ETHINYL ESTRADIOL;	Y	00555904758	Enhanced
993804	00093542358	GIANVI	TABS	3MG; 0.02MG	1	2	0			0		0	OBSTETRICS / GYNECOLOGY	ORAL CONTRACEPTIVES / RELATED AGENTS	OBSTETRICS / GYNECOLOGY	ORAL CONTRACEPTIVES / RELATED AGENTS	0					OR	DROSPIRENONE; ETHINYL	Y	00093542358	Enhanced
1367691	00603359017	GILDAGIA	TABS	35MCG; 0.4MG	1	2	0			0		0	OBSTETRICS / GYNECOLOGY	ORAL CONTRACEPTIVES / RELATED AGENTS	OBSTETRICS / GYNECOLOGY	ORAL CONTRACEPTIVES / RELATED AGENTS	0					OR	ETHINYL ESTRADIOL;	Y	00603359017	Enhanced
1020155	00781558436	INTROVALE	TABS	0.03MG; 0.15MG	1	2	0			0		0	OBSTETRICS / GYNECOLOGY	ORAL CONTRACEPTIVES / RELATED AGENTS	OBSTETRICS / GYNECOLOGY	ORAL CONTRACEPTIVES / RELATED AGENTS	0					OR	ETHINYL ESTRADIOL;	Y	00781558436	Enhanced
1359030	00555902742	JUNEL 1.5/30	TABS	30MCG; 1.5MG	1	2	0			0		0	OBSTETRICS / GYNECOLOGY	ORAL CONTRACEPTIVES / RELATED AGENTS	OBSTETRICS / GYNECOLOGY	ORAL CONTRACEPTIVES / RELATED AGENTS	0					OR	ETHINYL ESTRADIOL;	Y	00555902742	Enhanced
1358780	00555902542	JUNEL 1/20	TABS	20MCG; 1MG	1	2	0			0		0	OBSTETRICS / GYNECOLOGY	ORAL CONTRACEPTIVES / RELATED AGENTS	OBSTETRICS / GYNECOLOGY	ORAL CONTRACEPTIVES / RELATED AGENTS	0					OR	ETHINYL ESTRADIOL;	Y	00555902542	Enhanced
1359025	00555902858	JUNEL FE 1.5/30	TABS	30MCG; 1.5MG; 75MG	1	2	0			0		0	OBSTETRICS / GYNECOLOGY	ORAL CONTRACEPTIVES / RELATED AGENTS	OBSTETRICS / GYNECOLOGY	ORAL CONTRACEPTIVES / RELATED AGENTS	0					OR	ETHINYL ESTRADIOL;	Y	00555902858	Enhanced
1358765	00555902658	JUNEL FE 1/20	TABS	20MCG; 75MG; 1MG	1	2	0			0		0	OBSTETRICS / GYNECOLOGY	ORAL CONTRACEPTIVES / RELATED AGENTS	OBSTETRICS / GYNECOLOGY	ORAL CONTRACEPTIVES / RELATED AGENTS	0					OR	ETHINYL ESTRADIOL;	Y	00555902658	Enhanced
762001	00555905058	KARIVA	TABS	0; 0	1	2	0			0		0	OBSTETRICS / GYNECOLOGY	ORAL CONTRACEPTIVES / RELATED AGENTS	OBSTETRICS / GYNECOLOGY	ORAL CONTRACEPTIVES / RELATED AGENTS	0					OR	DESOGESTREL; ETHINYL	Y	00555905058	Enhanced
753483	00555904458	KELNOR 1/35	TABS	35MCG; 1MG	1	2	0			0		0	OBSTETRICS / GYNECOLOGY	ORAL CONTRACEPTIVES / RELATED AGENTS	OBSTETRICS / GYNECOLOGY	ORAL CONTRACEPTIVES / RELATED AGENTS	0					OR	ETHINYL ESTRADIOL;	Y	00555904458	Enhanced
749148	52544021928	LEENA	TABS	0; 0	1	2	0			0		0	OBSTETRICS / GYNECOLOGY	ORAL CONTRACEPTIVES / RELATED AGENTS	OBSTETRICS / GYNECOLOGY	ORAL CONTRACEPTIVES / RELATED AGENTS	0					OR	ETHINYL ESTRADIOL;	Y	52544021928	Enhanced
751885	00555901467	LESSINA	TABS	20MCG; 0.1MG	1	2	0			0		0	OBSTETRICS / GYNECOLOGY	ORAL CONTRACEPTIVES / RELATED AGENTS	OBSTETRICS / GYNECOLOGY	ORAL CONTRACEPTIVES / RELATED AGENTS	0					OR	ETHINYL ESTRADIOL;	Y	00555901467	Enhanced
1095227	16714034094	LEVONEST	TABS	0; 0	1	2	0			0		0	OBSTETRICS / GYNECOLOGY	ORAL CONTRACEPTIVES / RELATED AGENTS	OBSTETRICS / GYNECOLOGY	ORAL CONTRACEPTIVES / RELATED AGENTS	0					OR	ETHINYL ESTRADIOL;	Y	16714034094	Enhanced
751901	68180084313	LEVONORGESTREL/ETHINYL ESTRADIOL	TABS	0.03MG; 0.15MG	1	2	0			0		0	OBSTETRICS / GYNECOLOGY	ORAL CONTRACEPTIVES / RELATED AGENTS	OBSTETRICS / GYNECOLOGY	ORAL CONTRACEPTIVES / RELATED AGENTS	0					OR	ETHINYL ESTRADIOL;	Y	68180084313	Enhanced
748879	52544027928	LEVORA 0.15/30-28	TABS	30MCG; 0.15MG	1	2	0			0		0	OBSTETRICS / GYNECOLOGY	ORAL CONTRACEPTIVES / RELATED AGENTS	OBSTETRICS / GYNECOLOGY	ORAL CONTRACEPTIVES / RELATED AGENTS	0					OR	ETHINYL ESTRADIOL;	Y	52544027928	Enhanced
750244	52544084728	LOW-OGESTREL	TABS	30MCG; 0.3MG	1	2	0			0		0	OBSTETRICS / GYNECOLOGY	ORAL CONTRACEPTIVES / RELATED AGENTS	OBSTETRICS / GYNECOLOGY	ORAL CONTRACEPTIVES / RELATED AGENTS	0					OR	ETHINYL ESTRADIOL;	Y	52544084728	Enhanced
751884	52544094628	LUTERA	TABS	20MCG; 0.1MG	1	2	0			0		0	OBSTETRICS / GYNECOLOGY	ORAL CONTRACEPTIVES / RELATED AGENTS	OBSTETRICS / GYNECOLOGY	ORAL CONTRACEPTIVES / RELATED AGENTS	0					OR	ETHINYL ESTRADIOL;	Y	52544094628	Enhanced
1245919	68462038829	MARLISSA	TABS	0.03MG; 0.15MG	1	2	0			0		0	OBSTETRICS / GYNECOLOGY	ORAL CONTRACEPTIVES / RELATED AGENTS	OBSTETRICS / GYNECOLOGY	ORAL CONTRACEPTIVES / RELATED AGENTS	0					OR	ETHINYL ESTRADIOL;	Y	68462038829	Enhanced
1359032	52544095121	MICROGESTIN 1.5/30	TABS	30MCG; 1.5MG	1	2	0			0		0	OBSTETRICS / GYNECOLOGY	ORAL CONTRACEPTIVES / RELATED AGENTS	OBSTETRICS / GYNECOLOGY	ORAL CONTRACEPTIVES / RELATED AGENTS	0					OR	ETHINYL ESTRADIOL;	Y	52544095121	Enhanced
1359020	52544095021	MICROGESTIN 1/20	TABS	20MCG; 1MG	1	2	0			0		0	OBSTETRICS / GYNECOLOGY	ORAL CONTRACEPTIVES / RELATED AGENTS	OBSTETR

578018	00378711035	BROMFENAC	SOLN	0.09%	1	2	0				0		0	OPHTHALMOLOGY	NON-STEROIDAL ANTI-INFLAMMATORY AGENTS	OPHTHALMOLOGY	NON-STEROIDAL ANTI-INFLAMMATORY AGENTS	0								OP	BROMFENAC SODIUM	Y	00378711035	Enhanced
554801	24208043705	DICLOFENAC SODIUM	SOLN	0.1%	1	2	0				0		0	OPHTHALMOLOGY	NON-STEROIDAL ANTI-INFLAMMATORY AGENTS	OPHTHALMOLOGY	NON-STEROIDAL ANTI-INFLAMMATORY AGENTS	0								OP	DICLOFENAC SODIUM	Y	24208043705	Enhanced
1243585	24208031425	FLURBIPROFEN SODIUM	SOLN	0.03%	1	2	0				0		0	OPHTHALMOLOGY	NON-STEROIDAL ANTI-INFLAMMATORY AGENTS	OPHTHALMOLOGY	NON-STEROIDAL ANTI-INFLAMMATORY AGENTS	0								OP	FLURBIPROFEN SODIUM	Y	24208031425	Enhanced
860103	17478020810	KETOROLAC TROMETHAMINE	SOLN	0.4%	1	2	0				0		0	OPHTHALMOLOGY	NON-STEROIDAL ANTI-INFLAMMATORY AGENTS	OPHTHALMOLOGY	NON-STEROIDAL ANTI-INFLAMMATORY AGENTS	0								OP	KETOROLAC TROMETHAMINE	Y	17478020810	Enhanced
860107	41616022190	KETOROLAC TROMETHAMINE	SOLN	0.5%	1	2	0				0		0	OPHTHALMOLOGY	NON-STEROIDAL ANTI-INFLAMMATORY AGENTS	OPHTHALMOLOGY	NON-STEROIDAL ANTI-INFLAMMATORY AGENTS	0								OP	KETOROLAC TROMETHAMINE	Y	41616022190	Enhanced
562524	68382026101	ACETAZOLAMIDE ER	CPT2	500MG	1	2	0				0		0	OPHTHALMOLOGY	ORAL DRUGS FOR GLAUCOMA	OPHTHALMOLOGY	ORAL DRUGS FOR GLAUCOMA	0								OR	ACETAZOLAMIDE	Y	68382026101	Enhanced
307702	55390046001	ACETAZOLAMIDE SODIUM	SOLR	500MG	1	2	0				0		0	OPHTHALMOLOGY	ORAL DRUGS FOR GLAUCOMA	OPHTHALMOLOGY	ORAL DRUGS FOR GLAUCOMA	0								IJ	ACETAZOLAMIDE SODIUM	Y	55390046001	Enhanced
197333	51672402201	ACETAZOLAMIDE	TABS	125MG	1	2	0				0		0	OPHTHALMOLOGY	ORAL DRUGS FOR GLAUCOMA	OPHTHALMOLOGY	ORAL DRUGS FOR GLAUCOMA	0								OR	ACETAZOLAMIDE	Y	51672402201	Enhanced
197304	00527105001	ACETAZOLAMIDE	TABS	250MG	1	2	0				0		0	OPHTHALMOLOGY	ORAL DRUGS FOR GLAUCOMA	OPHTHALMOLOGY	ORAL DRUGS FOR GLAUCOMA	0								OR	ACETAZOLAMIDE	Y	00527105001	Enhanced
197939	00781107201	METHAZOLAMIDE	TABS	25MG	1	2	0				0		0	OPHTHALMOLOGY	ORAL DRUGS FOR GLAUCOMA	OPHTHALMOLOGY	ORAL DRUGS FOR GLAUCOMA	0								OR	METHAZOLAMIDE	Y	00781107201	Enhanced
197940	00781107101	METHAZOLAMIDE	TABS	50MG	1	2	0				0		0	OPHTHALMOLOGY	ORAL DRUGS FOR GLAUCOMA	OPHTHALMOLOGY	ORAL DRUGS FOR GLAUCOMA	0								OR	METHAZOLAMIDE	Y	00781107101	Enhanced
861637	00023921105	COMBIGAN	SOLN	0.2%; 0.5%	2	5	0				0		0	OPHTHALMOLOGY	OTHER GLAUCOMA DRUGS	OPHTHALMOLOGY	OTHER GLAUCOMA DRUGS	0								OP	BRIMONIDINE TARTRATE;	W	00023921105	Enhanced
313954	50383023310	DORZOLAMIDE HCL/TIMOLOL MALEATE	SOLN	22.3MG/ML; 6.8MG/ML	1	2	0				0		0	OPHTHALMOLOGY	OTHER GLAUCOMA DRUGS	OPHTHALMOLOGY	OTHER GLAUCOMA DRUGS	0								OP	DORZOLAMIDE	Y	50383023310	Enhanced
310015	50383023210	DORZOLAMIDE HCL	SOLN	2%	1	2	0				0		0	OPHTHALMOLOGY	OTHER GLAUCOMA DRUGS	OPHTHALMOLOGY	OTHER GLAUCOMA DRUGS	0								OP	DORZOLAMIDE	Y	50383023210	Enhanced
314072	60505356500	LATANOPROST	SOLN	0.005%	1	2	0				0		0	OPHTHALMOLOGY	OTHER GLAUCOMA DRUGS	OPHTHALMOLOGY	OTHER GLAUCOMA DRUGS	0								OP	LATANOPROST	Y	60505356500	Enhanced
1116150	24208078555	NEOMYCIN/POLYMYXIN/BACITRACIN/HYDROCORTISONE	OINT	400UNIT/GM; 1%; 0.5%; 10000UNIT/GM	1	2	0				0		0	OPHTHALMOLOGY	STEROID-ANTIBIOTIC COMBINATIONS	OPHTHALMOLOGY	STEROID-ANTIBIOTIC COMBINATIONS	0								OP	BACITRACIN ZINC; HYDROCORTISONE ACETATE;	Y	24208078555	Enhanced
309679	24208079535	NEOMYCIN/POLYMYXIN/DEXAMETHASONE	OINT	0.1%; 3.5MG/GM; 10000UNIT/GM	1	2	0				0		0	OPHTHALMOLOGY	STEROID-ANTIBIOTIC COMBINATIONS	OPHTHALMOLOGY	STEROID-ANTIBIOTIC COMBINATIONS	0								OP	DEXAMETHASONE; NEOMYCIN SULFATE; POLYMYXIN B	Y	24208079535	Enhanced
309680	24208083060	NEOMYCIN/POLYMYXIN/DEXAMETHASONE	SUSP	0.1%; 3.5MG/ML; 10000UNIT/ML	1	2	0				0		0	OPHTHALMOLOGY	STEROID-ANTIBIOTIC COMBINATIONS	OPHTHALMOLOGY	STEROID-ANTIBIOTIC COMBINATIONS	0								OP	DEXAMETHASONE; NEOMYCIN SULFATE; POLYMYXIN B	Y	24208083060	Enhanced
204874	61314064175	NEOMYCIN/POLYMYXIN/HYDROCORTISONE	SUSP	1%; 3.5MG/ML; 10000UNIT/ML	1	2	0				0		0	OPHTHALMOLOGY	STEROID-ANTIBIOTIC COMBINATIONS	OPHTHALMOLOGY	STEROID-ANTIBIOTIC COMBINATIONS	0								OP	HYDROCORTISONE; NEOMYCIN SULFATE; POLYMYXIN B	Y	61314064175	Enhanced
309683	24208029505	TOBRAMYCIN/DEXAMETHASONE	SUSP	0.1%; 0.3%	1	2	0				0		0	OPHTHALMOLOGY	STEROID-ANTIBIOTIC COMBINATIONS	OPHTHALMOLOGY	STEROID-ANTIBIOTIC COMBINATIONS	0								OP	DEXAMETHASONE;	Y	24208029505	Enhanced
545259	24208035810	ZYLET	SUSP	0.5%; 0.3%	2	5	0				0		0	OPHTHALMOLOGY	STEROID-ANTIBIOTIC COMBINATIONS	OPHTHALMOLOGY	STEROID-ANTIBIOTIC COMBINATIONS	0								OP	LOTEPREDNOL ETABONATE;	W	24208035810	Enhanced
1012221	61314029710	SULFACETAMIDE SODIUM/PREDNISOLONE SODIUM PHOSPHATE	SOLN	0.23%; 10%	1	2	0				0		0	OPHTHALMOLOGY	STEROID-SULFONAMIDE COMBINATIONS	OPHTHALMOLOGY	STEROID-SULFONAMIDE COMBINATIONS	0								OP	PREDNISOLONE SODIUM PHOSPHATE; SULFACETAMIDE	Y	61314029710	Enhanced
226343	61314029405	DEXAMETHASONE SODIUM PHOSPHATE	SOLN	0.1%	1	2	0				0		0	OPHTHALMOLOGY	STEROIDS	OPHTHALMOLOGY	STEROIDS	0								OP	DEXAMETHASONE SODIUM	Y	61314029405	Enhanced
956935	00023031604	FML	OINT	0.1%	2	5	0				0		0	OPHTHALMOLOGY	STEROIDS	OPHTHALMOLOGY	STEROIDS	0								OP	FLUOROMETHOLONE	W	00023031604	Enhanced
209002	11980017410	PRED MILD	SUSP	0.12%	2	5	0				0		0	OPHTHALMOLOGY	STEROIDS	OPHTHALMOLOGY	STEROIDS	0								OP	PREDNISOLONE ACETATE	W	11980017410	Enhanced
314165	24208071510	PREDNISOLONE SODIUM PHOSPHATE	SOLN	1%	1	2	0				0		0	OPHTHALMOLOGY	STEROIDS	OPHTHALMOLOGY	STEROIDS	0								OP	PREDNISOLONE SODIUM	Y	24208071510	Enhanced
343019	00778071910	PREDNISOLONE ACETATE	SUSP	1%	1	2	0				0		0	OPHTHALMOLOGY	STEROIDS	OPHTHALMOLOGY	STEROIDS	0								OP	PREDNISOLONE ACETATE	Y	00778071910	Enhanced
1006120	24208067004	SODIUM SULFACETAMIDE	SOLN	10%	1	2	0				0		0	OPHTHALMOLOGY	SULFONAMIDES	OPHTHALMOLOGY	SULFONAMIDES	0								OP	SULFACETAMIDE SODIUM	Y	24208067004	Enhanced
1006673	48102010335	SULFACETAMIDE SODIUM	OINT	10%	1	2	0				0		0	OPHTHALMOLOGY	SULFONAMIDES	OPHTHALMOLOGY	SULFONAMIDES	0								OP	SULFACETAMIDE SODIUM	Y	48102010335	Enhanced
861206	00023932115	ALPHAGAN P	SOLN	0.1%	2	5	0				0		0	OPHTHALMOLOGY	SYMPATHOMIMETICS	OPHTHALMOLOGY	SYMPATHOMIMETICS	0								OP	BRIMONIDINE TARTRATE	W	00023932115	Enhanced
308345	17478071611	APRACLONIDINE	SOLN	0.5%	1	2	0				0		0	OPHTHALMOLOGY	SYMPATHOMIMETICS	OPHTHALMOLOGY	SYMPATHOMIMETICS	0								OP	APRACLONIDINE	Y	17478071611	Enhanced
861208	61314014410	BRIMONIDINE TARTRATE	SOLN	0.15%	1	2	0				0		0	OPHTHALMOLOGY	SYMPATHOMIMETICS	OPHTHALMOLOGY	SYMPATHOMIMETICS	0								OP	BRIMONIDINE TARTRATE	Y	61314014410	Enhanced
861200	24208041110	BRIMONIDINE TARTRATE	SOLN	0.2%	1	2	0				0		0	OPHTHALMOLOGY	SYMPATHOMIMETICS	OPHTHALMOLOGY	SYMPATHOMIMETICS	0								OP	BRIMONIDINE TARTRATE	Y	24208041110	Enhanced
1046272	17478021812	NAPHAZOLINE HCL	SOLN	0.1%	1	2	0				0		0	OPHTHALMOLOGY	VASOCONSTRICTOR DECONGESTANTS	OPHTHALMOLOGY	VASOCONSTRICTOR DECONGESTANTS	0								OP	NAPHAZOLINE	Y	17478021812	Enhanced
1010696	15310011004	CARBINOXAMINE MALEATE	LIQD	4MG/5ML	1	2	0				0		0	RESPIRATORY AND ALLERGY	ANTIHISTAMINE / ANTIALLERGENIC AGENTS	RESPIRATORY AND ALLERGY	ANTIHISTAMINE / ANTIALLERGENIC AGENTS	0								IN	CARBINOXAMINE MALEATE	Y	15310011004	Enhanced
1012904	15310010901	CARBINOXAMINE MALEATE	TABS	4MG	1	2	0				0		0	RESPIRATORY AND ALLERGY	ANTIHISTAMINE / ANTIALLERGENIC AGENTS	RESPIRATORY AND ALLERGY	ANTIHISTAMINE / ANTIALLERGENIC AGENTS	0								OR	CARBINOXAMINE MALEATE	Y	15310010901	Enhanced
1014673	00093630012	CETIRIZINE HCL	SYRP	5MG/5ML	1	2	0				0		0	RESPIRATORY AND ALLERGY	ANTIHISTAMINE / ANTIALLERGENIC AGENTS	RESPIRATORY AND ALLERGY	ANTIHISTAMINE / ANTIALLERGENIC AGENTS	0								OR	CETIRIZINE HCL	Y	00093630012	Enhanced
857461	00781135901	CLEMASTINE FUMARATE	TABS	2.68MG	1	2	0				0		0	RESPIRATORY AND ALLERGY	ANTIHISTAMINE / ANTIALLERGENIC AGENTS	RESPIRATORY AND ALLERGY	ANTIHISTAMINE / ANTIALLERGENIC AGENTS	0								OR	CLEMASTINE FUMARATE	Y	00781135901	Enhanced
866021	64980050448	CYPROHEPTADINE HCL	SYRP	2MG/5ML	1	2	0				0		0	RESPIRATORY AND ALLERGY	ANTIHISTAMINE / ANTIALLERGENIC AGENTS	RESPIRATORY AND ALLERGY	ANTIHISTAMINE / ANTIALLERGENIC AGENTS	0								OR	CYPROHEPTADINE	Y	64980050448	Enhanced
866144	00093292901	CYPROHEPTADINE HCL	TABS	4MG	1	2	0				0		0	RESPIRATORY AND ALLERGY	ANTIHISTAMINE / ANTIALLERGENIC AGENTS	RESPIRATORY AND ALLERGY	ANTIHISTAMINE / ANTIALLERGENIC AGENTS	0								OR	CYPROHEPTADINE	Y	00093292901	Enhanced
577080	55111050133	DESLORATADINE ODT	TBDP	2.5MG	1	2	1	90	90	0	0		0	RESPIRATORY AND ALLERGY	ANTIHISTAMINE / ANTIALLERGENIC AGENTS	RESPIRATORY AND ALLERGY	ANTIHISTAMINE / ANTIALLERGENIC AGENTS	0								OR	DESLORATADINE	Y	55111050133	Enhanced
349420	00378401701	DESLORATADINE	TABS	5MG	1	2	1	90	90	0	0		0	RESPIRATORY AND ALLERGY	ANTIHISTAMINE / ANTIALLERGENIC AGENTS	RESPIRATORY AND ALLERGY	ANTIHISTAMINE / ANTIALLERGENIC AGENTS	0								OR	DESLORATADINE	Y	00378401701	Enhanced
403841	55111036031	DESLORATADINE ODT	TBDP	5MG	1	2	1	90	90	0	0		0	RESPIRATORY AND ALLERGY	ANTIHISTAMINE / ANTIALLERGENIC AGENTS	RESPIRATORY AND ALLERGY	ANTIHISTAMINE / ANTIALLERGENIC AGENTS	0								OR	DESLORATADINE	Y	55111036031	Enhanced
1020477	00555005905	DIPHENHYDRAMINE HCL	CAPS	50MG	1	2	0			1	HIGH RISK MEDICATIONS - FIRST GENERATION ANTIHISTAMINES	0	RESPIRATORY AND ALLERGY	ANTIHISTAMINE / ANTIALLERGENIC AGENTS	RESPIRATORY AND ALLERGY	ANTIHISTAMINE / ANTIALLERGENIC AGENTS	0								OR	DIPHENHYDRAMINE HYDROCHLORIDE	Y	00555005905	Enhanced
1049533	63323066401	DIPHENHYDRAMINE HCL	SOLN	50MG/ML	1	2	0				0		0	RESPIRATORY AND ALLERGY	ANTIHISTAMINE / ANTIALLERGENIC AGENTS	RESPIRATORY AND ALLERGY	ANTIHISTAMINE / ANTIALLERGENIC AGENTS	0								IJ	DIPHENHYDRAMINE	Y	63323066401	Enhanced
727347	49502050002	EPIPEN 2-PAK	DEVI	0.3MG/0.3ML	2	5	1	12	90	0	0		0	RESPIRATORY AND ALLERGY	ANTIHISTAMINE / ANTIALLERGENIC AGENTS	RESPIRATORY AND ALLERGY	ANTIHISTAMINE / ANTIALLERGENIC AGENTS	0								IJ	EPINEPHRINE	W	49502050002	Enhanced
727386	49502050102	EPIPEN-JR 2-PAK	DEVI	0.15MG/0.3ML	2	5	1	12	90	0	0		0	RESPIRATORY AND ALLERGY	ANTIHISTAMINE / ANTIALLERGENIC AGENTS	RESPIRATORY AND ALLERGY	ANTIHISTAMINE / ANTIALLERGENIC AGENTS	0								IJ	EPINEPHRINE	W	49502050102	Enhanced
995270	00517400125	HYDROXYZINE HCL	SOLN	25MG/ML	1	2	0			0		0	RESPIRATORY AND ALLERGY	ANTIHISTAMINE / ANTIALLERGENIC AGENTS	RESPIRATORY AND ALLERGY	ANTIHISTAMINE / ANTIALLERGENIC AGENTS	0								IM	HYDROXYZINE	Y	00517400125	Enhanced
995285	00517560125	HYDROXYZINE HCL	SOLN	50MG/ML	1	2	0			0		0	RESPIRATORY AND ALLERGY	ANTIHISTAMINE / ANTIALLERGENIC AGENTS	RESPIRATORY AND ALLERGY	ANTIHISTAMINE / ANTIALLERGENIC AGENTS	0								IM	HYDROXYZINE	Y	00517560125	Enhanced
995241	50383079616	HYDROXYZINE HCL	SOLN	10MG/5ML	1	2	0			1	HIGH RISK MEDICATIONS - FIRST GENERATION ANTIHISTAMINES	0	RESPIRATORY AND ALLERGY	ANTIHISTAMINE / ANTIALLERGENIC AGENTS	RESPIRATORY AND ALLERGY	ANTIHISTAMINE / ANTIALLERGENIC AGENTS	0								OR	HYDROXYZINE HYDROCHLORIDE	Y	50383079616	Enhanced
995218	68462036005	HYDROXYZINE HCL	TABS	10MG	1	2	0			1	HIGH RISK MEDICATIONS - FIRST GENERATION ANTIHISTAMINES	0	RESPIRATORY AND ALLERGY	ANTIHISTAMINE / ANTIALLERGENIC AGENTS	RESPIRATORY AND ALLERGY	ANTIHISTAMINE / ANTIALLERGENIC AGENTS	0								OR	HYDROXYZINE HYDROCHLORIDE	Y	68462036005	Enhanced
995258	00603399828	HYDROXYZINE HCL	TABS	25MG	1	2	0			1	HIGH RISK MEDICATIONS - FIRST GENERATION ANTIHISTAMINES	0	RESPIRATORY AND ALLERGY	ANTIHISTAMINE / ANTIALLERGENIC AGENTS	RESPIRATORY AND ALLERGY	ANTIHISTAMINE / ANTIALLERGENIC AGENTS	0								OR	HYDROXYZINE HYDROCHLORIDE	Y	00603399828	Enhanced
995281	68462036201	HYDROXYZINE HCL	TABS	50MG	1	2	0			1	HIGH RISK MEDICATIONS - FIRST GENERATION ANTIHISTAMINES	0	RESPIRATORY AND ALLERGY	ANTIHISTAMINE / ANTIALLERGENIC AGENTS	RESPIRATORY AND ALLERGY	ANTIHISTAMINE / ANTIALLERGENIC AGENTS	0								OR	HYDROXYZINE HYDROCHLORIDE	Y	68462036201	Enhanced
995232	00555032402	HYDROXYZINE PAMOATE	CAPS	100MG	1	2	0			1	HIGH RISK MEDICATIONS - FIRST GENERATION ANTIHISTAMINES	0	RESPIRATORY AND ALLERGY	ANTIHISTAMINE / ANTIALLERGENIC AGENTS	RESPIRATORY AND ALLERGY	ANTIHISTAMINE / ANTIALLERGENIC AGENTS	0								OR	HYDROXYZINE PAMOATE	Y	00555032402	Enhanced
995253	00591080005	HYDROXYZINE PAMOATE	CAPS	25MG	1	2	0			1	HIGH RISK MEDICATIONS - FIRST GENERATION ANTIHISTAMINES	0	RESPIRATORY AND ALLERGY	ANTIHISTAMINE / ANTIALLERGENIC AGENTS	RESPIRATORY AND ALLERGY	ANTIHISTAMINE / ANTIALLERGENIC AGENTS	0								OR	HYDROXYZINE PAMOATE	Y	00591080005	Enhanced
995278	00591080101	HYDROXYZINE PAMOATE	CAPS	50MG	1	2	0			1	HIGH RISK MEDICATIONS - FIRST GENERATION ANTIHISTAMINES	0	RESPIRATORY AND ALLERGY	ANTIHISTAMINE / ANTIALLERGENIC AGENTS	RESPIRATORY AND ALLERGY	ANTIHISTAMINE / ANTIALLERGENIC AGENTS	0								OR	HYDROXYZINE PAMOATE	Y	00591080101	Enhanced
855168	45802068028	LEVOCETIRIZINE DIHYDROCHLORIDE	SOLN	2.5MG/5ML	1	2	0			0		0	RESPIRATORY AND ALLERGY	ANTIHISTAMINE / ANTIALLERGENIC AGENTS	RESPIRATORY AND ALLERGY	ANTIHISTAMINE / ANTIALLERGENIC AGENTS	0								OR	LEVOCETIRIZINE	Y	45802068028	Enhanced
855172	45802059465	LEVOCETIRIZINE DIHYDROCHLORIDE	TABS	5MG	1	2	1	90	90	0	0		0	RESPIRATORY AND ALLERGY	ANTIHISTAMINE / ANTIALLERGENIC AGENTS	RESPIRATORY AND ALLERGY	ANTIHISTAMINE / ANTIALLERGENIC AGENTS	0								OR	LEVOCETIRIZINE	Y	45802059465	Enhanced
1012903	00525675216	PALGIC	LIQD	4MG/5ML	1	2	0			0		0	RESPIRATORY AND ALLERGY	ANTIHISTAMINE / ANTIALLERGENIC AGENTS	RESPIRATORY AND ALLERGY	ANTIHISTAMINE / ANTIALLERGENIC AGENTS	0								OR	CARBINOXAMINE MALEATE	Y	00525675216	Enhanced
1012906	00525674801	PALGIC	TABS	4MG	1	2	0			0		0	RESPIRATORY AND ALLERGY	ANTIHISTAMINE / ANTIALLERGENIC AGENTS	RESPIRATORY AND ALLERGY	ANTIHISTAMINE / ANTIALLERGENIC AGENTS	0								OR	CARBINOXAMINE MALEATE	Y	00525674801	Enhanced
992443	00591216039	PHENADOZ	SUPP	12.5MG	1	2	0			0		0	RESPIRATORY AND ALLERGY	ANTIHISTAMINE / ANTIALLERGENIC AGENTS	RESPIRATORY AND ALLERGY	ANTIHISTAMINE / ANTIALLERGENIC AGENTS	0								RE	PROMETHAZINE	Y	00574723612	Enhanced
992460	00409231231	PROMETHAZINE HCL	SOLN	25MG/ML	1	2	0			0		0	RESPIRATORY AND ALLERGY	ANTIHISTAMINE / ANTIALLERGENIC AGENTS	RESPIRATORY AND ALLERGY	ANTIHISTAMINE / ANTIALLERGENIC AGENTS	0								IJ	PROMETHAZINE	Y	00409231231	Enhanced
992858	00641092925	PROMETHAZINE HCL	SOLN	50MG/ML	1	2	0			0		0	RESPIRATORY AND ALLERGY	ANTIHISTAMINE / ANTIALLERGENIC AGENTS	RESPIRATORY AND ALLERGY	ANTIHISTAMINE / ANTIALLERGENIC AGENTS	0								IJ	PROMETHAZINE	Y	00641092925	Enhanced
992441	45802075830	PROMETHAZINE HCL	SUPP	12.5MG	1	2	0			0		0	RESPIRATORY AND ALLERGY	ANTIHISTAMINE / ANTIALLERGENIC AGENTS	RESPIRATORY AND ALLERGY	ANTIHISTAMINE / ANTIALLERGENIC AGENTS	0								RE	PROMETHAZINE	Y	45802075830	Enhanced
992454	45802075930	PROMETHAZINE HCL	SUPP	25MG	1	2	0			0		0	RESPIRATORY AND ALLERGY	ANTIHISTAMINE / ANTIALLERGENIC AGENTS	RESPIRATORY AND ALLERGY	ANTIHISTAMINE / ANTIALLERGENIC AGENTS	0								RE	PROMETHAZINE	Y	45802075930	Enhanced
992432	50383080116	PROMETHAZINE HCL	SYRP	6.25MG/5ML	1	2	0			1	HIGH RISK MEDICATIONS - FIRST GENERATION ANTIHISTAMINES	0	RESPIRATORY AND ALLERGY	ANTIHISTAMINE / ANTIALLERGENIC AGENTS	RESPIRATORY AND ALLERGY	ANTIHISTAMINE / ANTIALLERGENIC AGENTS	0								OR	PROMETHAZINE HYDROCHLORIDE	Y	50383080116	Enhanced
992438	00115104001	PROMETHAZINE HCL	TABS	12.5MG	1	2	0			1	HIGH RISK MEDICATIONS - FIRST GENERATION ANTIHISTAMINES	0	RESPIRATORY AND ALLERGY	ANTIHISTAMINE / ANTIALLERGENIC AGENTS	RESPIRATORY AND ALLERGY	ANTIHISTAMINE / ANTIALLERGENIC AGENTS	0								OR	PROMETHAZINE HYDROCHLORIDE	Y	00115104001	Enhanced
992447	00591530710	PROMETHAZINE HCL	TABS	25MG	1	2	0			1	HIGH RISK MEDICATIONS - FIRST GENERATION ANTIHISTAMINES	0	RESPIRATORY AND ALLERGY	ANTIHISTAMINE / ANTIALLERGENIC AGENTS	RESPIRATORY AND ALLERGY	ANTIHISTAMINE / ANTIALLERGENIC AGENTS	0								OR	PROMETHAZINE HYDROCHLORIDE	Y	00591530710	Enhanced
992475	68382004201	PROMETHAZINE HCL	TABS	50MG	1	2	0			1	HIGH RISK MEDICATIONS - FIRST GENERATION ANTIHISTAMINES	0	RESPIRATORY AND ALLERGY	ANTIHISTAMINE / ANTIALLERGENIC AGENTS	RESPIRATORY AND ALLERGY	ANTIHISTAMINE / ANTIALLERGENIC AGENTS	0								OR	PROMETHAZINE HYDROCHLORIDE	Y	68382004201	Enhanced
992459	00713052612	PROMETHEGAN	SUPP	25MG	1	2	0			0		0	RESPIRATORY AND ALLERGY	ANTIHISTAMINE / ANTIALLERGENIC AGENTS	RESPIRATORY AND ALLERGY	ANTIHISTAMINE / ANTIALLERGENIC AGENTS	0								RE	PROMETHAZINE	Y	00713052612	Enhanced
992481	00713013212	PROMETHEGAN	SUPP	50MG	1	2	0			0		0	RESPIRATORY AND ALLERGY	ANTIHISTAMINE / ANTIALLERGENIC AGENTS	RESPIRATORY AND ALLERGY	ANTIHISTAMINE / ANTIALLERGENIC AGENTS	0								RE	PROMETHAZINE	Y	00713013212	Enhanced
307718	00054302702	ACETYLCYSTEINE	SOLN	10%	1	2	0			3		0	RESPIRATORY AND ALLERGY	PULMONARY AGENTS	RESPIRATORY AND ALLERGY	PULMONARY AGENTS	0								IN	ACETYLCYSTEINE	Y	00054302702	Enhanced
307719	00054302602	ACETYLCYSTEINE	SOLN	20%	1	2	0			3		0	RESPIRATORY AND ALLERGY	PULMONARY AGENTS	RESPIRATORY AND ALLERGY	PULMONARY AGENTS	0								IN	ACETYLCYSTEINE	Y	00054302602	Enhanced
896185	00173069500	ADVAIR DISKUS	AEPB	100MCG/DOSE; 50MCG/DOSE	2	5	1	360	90	1	COMBINATION BETA2-AGONIST/CORTICOSTEROID INHALERS	0	RESPIRATORY AND ALLERGY	PULMONARY AGENTS	RESPIRATORY AND ALLERGY	PULMONARY AGENTS	0								IN	FLUTICASONE PROPIONATE; SALMETEROL XINAFOATE	W	00173069500	Enhanced
896212	00173069600	ADVAIR DISKUS	AEPB	250MCG/DOSE; 50MCG/DOSE	2	5	1	360	90	1	COMBINATION BETA2-AGONIST/CORTICOSTEROID INHALERS	0	RESPIRATORY AND ALLERGY	PULMONARY AGENTS	RESPIRATORY AND ALLERGY	PULMONARY AGENTS	0								IN	FLUTICASONE PROPIONATE; SALMETEROL XINAFOATE	W	00173069600	Enhanced
896229	00173069700	ADVAIR DISKUS	AEPB	500MCG/DOSE; 50MCG/DOSE	2	5	1	360	90	1	COMBINATION BETA2-AGONIST/CORTICOSTEROID INHALERS	0	RESPIRATORY AND ALLERGY	PULMONARY AGENTS	RESPIRATORY AND ALLERGY	PULMONARY AGENTS	0								IN	FLUTICASONE PROPIONATE; SALMETEROL XINAFOATE	W	00173069700	Enhanced
896245	00173071620	ADVAIR HFA	AERO	115MCG/ACT; 21MCG/ACT	2	5	1	36	90	1	COMBINATION BETA2-AGONIST/CORTICOSTEROID INHALERS	0	RESPIRATORY AND ALLERGY	PULMONARY AGENTS	RESPIRATORY AND ALLERGY	PULMONARY AGENTS	0								IN	FLUTICASONE PROPIONATE; SALMETEROL XINAFOATE	W	00173071620	Enhanced
896273	00173071720	ADVAIR HFA	AERO	230MCG/ACT; 21MCG/ACT	2	5	1	36	90	1	COMBINATION BETA2-AGONIST/CORTICOSTEROID INHALERS	0	RESPIRATORY AND ALLERGY	PULMONARY AGENTS	RESPIRATORY AND ALLERGY	PULMONARY AGENTS	0								IN	FLUTICASONE PROPIONATE; SALMETEROL XINAFOATE	W	00173071720	Enhanced
896237	00173071520	ADVAIR HFA	AERO	45MCG/ACT; 21MCG/ACT	2	5	1	36	90	1	COMBINATION BETA2-AGONIST/CORTICOSTEROID INHALERS	0	RESPIRATORY AND ALLERGY	PULMONARY AGENTS	RESPIRATORY AND ALLERGY	PULMONARY AGENTS	0								IN	FLUTICASONE PROPIONATE; SALMETEROL XINAFOATE	W	00173071520	Enhanced
630208	00487950101	ALBUTEROL SULFATE	NEBU	0.083%	1	2	0			3		0	RESPIRATORY AND ALLERGY	PULMONARY AGENTS	RESPIRATORY AND ALLERGY	PULMONARY AGENTS	0								IN	ALBUTEROL SULFATE	Y	00487950101	Enhanced
245314	50383074120	ALBUTEROL SULFATE	NEBU	0.5%	1	2

809871	42227008105	CINRYZE	SOLR	500UNT	3	5	0					CINRYZE	0	RESPIRATORY AND ALLERGY	PULMONARY AGENTS	RESPIRATORY AND ALLERGY	PULMONARY AGENTS	0								IV	C1 INHIBITOR (HUMAN)	W	42227008105	Enhanced
836366	00597007314	COMBIVENT	AERO	103MCG/ACT; 18MCG/ACT	2	5	1	88.2	90	0			0	RESPIRATORY AND ALLERGY	PULMONARY AGENTS	RESPIRATORY AND ALLERGY	PULMONARY AGENTS	0								IN	ALBUTEROL SULFATE; IPRATROPIUM BROMIDE	W	00597007314	Enhanced
1190225	00597002402	COMBIVENT RESPIMAT	AERS	100MCG/ACT; 20MCG/ACT	2	5	1	24	90	0			0	RESPIRATORY AND ALLERGY	PULMONARY AGENTS	RESPIRATORY AND ALLERGY	PULMONARY AGENTS	0								IN	ALBUTEROL SULFATE; IPRATROPIUM BROMIDE	W	00597002402	Enhanced
831246	00172640659	CROMOLYN SODIUM	NEBU	20MG/2ML	1	2	0			3			0	RESPIRATORY AND ALLERGY	PULMONARY AGENTS	RESPIRATORY AND ALLERGY	PULMONARY AGENTS	0								IN	CROMOLYN SODIUM	Y	00172640659	Enhanced
1091843	00456009530	DALIRESP	TABS	500MCG	2	5	0			1		DALIRESP	0	RESPIRATORY AND ALLERGY	PULMONARY AGENTS	RESPIRATORY AND ALLERGY	PULMONARY AGENTS	0								OR	ROFLUMILAST	W	00456009530	Enhanced
1246310	00085720601	DULERA	AERO	5MCG/ACT; 100MCG/ACT	2	5	1	39	90	1		COMBINATION BETA2-AGONIST/CORTICOSTEROID INHALERS	0	RESPIRATORY AND ALLERGY	PULMONARY AGENTS	RESPIRATORY AND ALLERGY	PULMONARY AGENTS	0								IN	FORMOTEROL FUMARATE DIHYDRATE; MOMETASONE FUROATE	W	00085720601	Enhanced
1246313	00085461001	DULERA	AERO	5MCG/ACT; 200MCG/ACT	2	5	1	39	90	1		COMBINATION BETA2-AGONIST/CORTICOSTEROID INHALERS	0	RESPIRATORY AND ALLERGY	PULMONARY AGENTS	RESPIRATORY AND ALLERGY	PULMONARY AGENTS	0								IN	FORMOTEROL FUMARATE DIHYDRATE; MOMETASONE FUROATE	W	00085461001	Enhanced
1148145	54092070202	FIRAZYR	SOLN	30MG/3ML	3	5	0			1		FIRAZYR	0	RESPIRATORY AND ALLERGY	PULMONARY AGENTS	RESPIRATORY AND ALLERGY	PULMONARY AGENTS	0								SC	ICATIBANT ACETATE	W	54092070202	Enhanced
1313826	24208034425	FLUNISOLIDE	SOLN	0.025%	1	2	1	150	90	0			0	RESPIRATORY AND ALLERGY	PULMONARY AGENTS	RESPIRATORY AND ALLERGY	PULMONARY AGENTS	0								NA	FLUNISOLIDE	Y	24208034425	Enhanced
752376	60505082400	FLUNISOLIDE	SOLN	29MCG/ACT	1	2	1	150	90	0			0	RESPIRATORY AND ALLERGY	PULMONARY AGENTS	RESPIRATORY AND ALLERGY	PULMONARY AGENTS	0								NA	FLUNISOLIDE	Y	24208034425	Enhanced
896321	00054327099	FLUTICASONE PROPIONATE	SUSP	50MCG/ACT	1	2	1	48	90	0			0	RESPIRATORY AND ALLERGY	PULMONARY AGENTS	RESPIRATORY AND ALLERGY	PULMONARY AGENTS	0								NA	FLUTICASONE PROPIONATE	Y	00054327099	Enhanced
1246328	00085140101	FORADIL AEROLIZER	CAPS	12MCG	2	5	1	180	90	0			0	RESPIRATORY AND ALLERGY	PULMONARY AGENTS	RESPIRATORY AND ALLERGY	PULMONARY AGENTS	0								IN	FORMOTEROL FUMARATE	W	00085140101	Enhanced
836358	00591379830	IPRATROPIUM BROMIDE	SOLN	0.02%	1	2	0			3			0	RESPIRATORY AND ALLERGY	PULMONARY AGENTS	RESPIRATORY AND ALLERGY	PULMONARY AGENTS	0								IN	IPRATROPIUM BROMIDE	Y	00378698964	Enhanced
835903	00093672373	IPRATROPIUM BROMIDE/ALBUTEROL SULFATE	SOLN	2.5MG/3ML; 0.5MG/3ML	1	2	0			3			0	RESPIRATORY AND ALLERGY	PULMONARY AGENTS	RESPIRATORY AND ALLERGY	PULMONARY AGENTS	0								IN	ALBUTEROL SULFATE; IPRATROPIUM BROMIDE	Y	00093672373	Enhanced
1243052	51167020002	KALYDECO	TABS	150MG	3	5	0			0			0	RESPIRATORY AND ALLERGY	PULMONARY AGENTS	RESPIRATORY AND ALLERGY	PULMONARY AGENTS	0								OR	IVACAFTOR	W	51167020002	Enhanced
722120	61958080202	LETAIRIS	TABS	10MG	3	5	0			1		LETAIRIS/TRACLEER	1	RESPIRATORY AND ALLERGY	PULMONARY AGENTS	RESPIRATORY AND ALLERGY	PULMONARY AGENTS	0								OR	AMBRISENTAN	W	61958080202	Enhanced
722124	61958080102	LETAIRIS	TABS	5MG	3	5	0			1		LETAIRIS/TRACLEER	1	RESPIRATORY AND ALLERGY	PULMONARY AGENTS	RESPIRATORY AND ALLERGY	PULMONARY AGENTS	0								OR	AMBRISENTAN	W	61958080102	Enhanced
242754	00378699393	LEVALBUTEROL	NEBU	1.25MG/0.5ML	1	2	0			0			0	RESPIRATORY AND ALLERGY	PULMONARY AGENTS	RESPIRATORY AND ALLERGY	PULMONARY AGENTS	0								IN	LEVALBUTEROL	Y	00378699393	Enhanced
979444	54838050780	METAPROTERENOL SULFATE	SYRP	10MG/5ML	1	2	0			0			0	RESPIRATORY AND ALLERGY	PULMONARY AGENTS	RESPIRATORY AND ALLERGY	PULMONARY AGENTS	0								OR	METAPROTERENOL SULFATE	Y	54838050780	Enhanced
979409	49884025901	METAPROTERENOL SULFATE	TABS	10MG	1	2	0			0			0	RESPIRATORY AND ALLERGY	PULMONARY AGENTS	RESPIRATORY AND ALLERGY	PULMONARY AGENTS	0								OR	METAPROTERENOL SULFATE	Y	49884025901	Enhanced
979475	49884025901	METAPROTERENOL SULFATE	TABS	20MG	1	2	0			0			0	RESPIRATORY AND ALLERGY	PULMONARY AGENTS	RESPIRATORY AND ALLERGY	PULMONARY AGENTS	0								OR	METAPROTERENOL SULFATE	Y	49884025901	Enhanced
311759	65862056705	MONTELUKAST SODIUM	CHEW	4MG	1	2	0			0			0	RESPIRATORY AND ALLERGY	PULMONARY AGENTS	RESPIRATORY AND ALLERGY	PULMONARY AGENTS	0								OR	MONTELUKAST SODIUM	Y	65862056705	Enhanced
242438	65862056805	MONTELUKAST SODIUM	CHEW	5MG	1	2	0			0			0	RESPIRATORY AND ALLERGY	PULMONARY AGENTS	RESPIRATORY AND ALLERGY	PULMONARY AGENTS	0								OR	MONTELUKAST SODIUM	Y	65862056805	Enhanced
351246	55111076303	MONTELUKAST SODIUM	PACK	4MG	1	2	0			0			0	RESPIRATORY AND ALLERGY	PULMONARY AGENTS	RESPIRATORY AND ALLERGY	PULMONARY AGENTS	0								OR	MONTELUKAST SODIUM	Y	55111076303	Enhanced
200224	00781556031	MONTELUKAST SODIUM	TABS	10MG	1	2	0			0			0	RESPIRATORY AND ALLERGY	PULMONARY AGENTS	RESPIRATORY AND ALLERGY	PULMONARY AGENTS	0								OR	MONTELUKAST SODIUM	Y	00781556031	Enhanced
1246321	49502060561	PERFOROMIST	NEBU	20MCG/2ML	2	5	0			3			0	RESPIRATORY AND ALLERGY	PULMONARY AGENTS	RESPIRATORY AND ALLERGY	PULMONARY AGENTS	0								IN	FORMOTEROL FUMARATE	W	49502060561	Enhanced
745752	59310007520	PROAIR HFA	AERS	108MCG/ACT	2	5	1	51	90	3			0	RESPIRATORY AND ALLERGY	PULMONARY AGENTS	RESPIRATORY AND ALLERGY	PULMONARY AGENTS	0								IN	ALBUTEROL SULFATE	W	59310007520	Enhanced
616819	00186199004	PULMICORT	SUSP	1MG/2ML	2	5	0			3			0	RESPIRATORY AND ALLERGY	PULMONARY AGENTS	RESPIRATORY AND ALLERGY	PULMONARY AGENTS	0								IN	BUDESONIDE	W	00186199004	Enhanced
205532	50242010040	PULMOZYME	SOLN	1MG/ML	3	5	0			3			0	RESPIRATORY AND ALLERGY	PULMONARY AGENTS	RESPIRATORY AND ALLERGY	PULMONARY AGENTS	0								IN	DORNASE ALFA	W	50242010040	Enhanced
965038	59310020240	QVAR	AERS	40MCG/ACT	2	5	1	65.7	90	0			0	RESPIRATORY AND ALLERGY	PULMONARY AGENTS	RESPIRATORY AND ALLERGY	PULMONARY AGENTS	0								IN	BECLOMETHASONE	W	59310020240	Enhanced
965542	59310020480	QVAR	AERS	80MCG/ACT	2	5	1	65.7	90	0			0	RESPIRATORY AND ALLERGY	PULMONARY AGENTS	RESPIRATORY AND ALLERGY	PULMONARY AGENTS	0								IN	BECLOMETHASONE	W	59310020480	Enhanced
882530	00069033801	REVATIO	SOLN	10MG/12.5ML	3	5	0			1		PHOSPHODIESTERASE-5 INHIBITORS FOR PAH	0	RESPIRATORY AND ALLERGY	PULMONARY AGENTS	RESPIRATORY AND ALLERGY	PULMONARY AGENTS	0								IV	SILDENAFIL CITRATE	W	00069033801	Enhanced
866049	00173052100	SEREVENT DISKUS	AEPB	50MCG/DOSE	2	5	1	180	90	0			0	RESPIRATORY AND ALLERGY	PULMONARY AGENTS	RESPIRATORY AND ALLERGY	PULMONARY AGENTS	0								IN	SALMETEROL XINAFOATE	W	00173052100	Enhanced
577033	00378165777	SILDENAFIL CITRATE	TABS	20MG	3	2	1	270	90	1		PHOSPHODIESTERASE-5 INHIBITORS FOR PAH	0	RESPIRATORY AND ALLERGY	PULMONARY AGENTS	RESPIRATORY AND ALLERGY	PULMONARY AGENTS	0								OR	SILDENAFIL CITRATE	Y	00378165777	Enhanced
580261	00597007547	SPIRIVA HANDIHALER	CAPS	18MCG	2	5	1	180	90	0			0	RESPIRATORY AND ALLERGY	PULMONARY AGENTS	RESPIRATORY AND ALLERGY	PULMONARY AGENTS	0								IN	TIOTROPIUM BROMIDE	W	00597007547	Enhanced
1246306	00186037020	SYMBICORT	AERO	160MCG/ACT; 4.5MCG/ACT	2	5	1	30.6	90	1		COMBINATION BETA2-AGONIST/CORTICOSTEROID INHALERS	0	RESPIRATORY AND ALLERGY	PULMONARY AGENTS	RESPIRATORY AND ALLERGY	PULMONARY AGENTS	0								IN	BUDESONIDE; FORMOTEROL FUMARATE DIHYDRATE	W	00186037020	Enhanced
1246315	00186037228	SYMBICORT	AERO	80MCG/ACT; 4.5MCG/ACT	2	5	1	20.7	90	1		COMBINATION BETA2-AGONIST/CORTICOSTEROID INHALERS	0	RESPIRATORY AND ALLERGY	PULMONARY AGENTS	RESPIRATORY AND ALLERGY	PULMONARY AGENTS	0								IN	BUDESONIDE; FORMOTEROL FUMARATE DIHYDRATE	W	00186037228	Enhanced
857635	63323066501	TERBUTALINE SULFATE	SOLN	1MG/ML	1	2	0			0			0	RESPIRATORY AND ALLERGY	PULMONARY AGENTS	RESPIRATORY AND ALLERGY	PULMONARY AGENTS	0								IJ	TERBUTALINE SULFATE	Y	63323066501	Enhanced
857677	00115261101	TERBUTALINE SULFATE	TABS	2.5MG	1	2	0			0			0	RESPIRATORY AND ALLERGY	PULMONARY AGENTS	RESPIRATORY AND ALLERGY	PULMONARY AGENTS	0								OR	TERBUTALINE SULFATE	Y	00115261101	Enhanced
857683	00527131101	TERBUTALINE SULFATE	TABS	5MG	1	2	0			0			0	RESPIRATORY AND ALLERGY	PULMONARY AGENTS	RESPIRATORY AND ALLERGY	PULMONARY AGENTS	0								OR	TERBUTALINE SULFATE	Y	00527131101	Enhanced
237178	50111048302	THEOPHYLLINE CR	TB12	100MG	1	2	0			0			0	RESPIRATORY AND ALLERGY	PULMONARY AGENTS	RESPIRATORY AND ALLERGY	PULMONARY AGENTS	0								OR	THEOPHYLLINE	Y	50111048302	Enhanced
346574	50111048202	THEOPHYLLINE CR	TB12	200MG	1	2	0			0			0	RESPIRATORY AND ALLERGY	PULMONARY AGENTS	RESPIRATORY AND ALLERGY	PULMONARY AGENTS	0								OR	THEOPHYLLINE	Y	50111048202	Enhanced
317769	50111045901	THEOPHYLLINE ER	TB12	300MG	1	2	0			0			0	RESPIRATORY AND ALLERGY	PULMONARY AGENTS	RESPIRATORY AND ALLERGY	PULMONARY AGENTS	0								OR	THEOPHYLLINE	Y	50111045901	Enhanced
313291	29033000101	THEOPHYLLINE ER	TB24	400MG	1	2	0			0			0	RESPIRATORY AND ALLERGY	PULMONARY AGENTS	RESPIRATORY AND ALLERGY	PULMONARY AGENTS	0								OR	THEOPHYLLINE	Y	29033000101	Enhanced
314241	50111051901	THEOPHYLLINE ER	TB12	450MG	1	2	0			0			0	RESPIRATORY AND ALLERGY	PULMONARY AGENTS	RESPIRATORY AND ALLERGY	PULMONARY AGENTS	0								OR	THEOPHYLLINE	Y	50111051901	Enhanced
348472	29033000201	THEOPHYLLINE ER	TB24	600MG	1	2	0			0			0	RESPIRATORY AND ALLERGY	PULMONARY AGENTS	RESPIRATORY AND ALLERGY	PULMONARY AGENTS	0								OR	THEOPHYLLINE	Y	29033000201	Enhanced
656660	66215010206	TRACLEER	TABS	125MG	3	5	0			1		LETAIRIS/TRACLEER	1	RESPIRATORY AND ALLERGY	PULMONARY AGENTS	RESPIRATORY AND ALLERGY	PULMONARY AGENTS	0								OR	BOSENTAN MONOHYDRATE	W	66215010206	Enhanced
352066	66215010106	TRACLEER	TABS	62.5MG	3	5	0			1		LETAIRIS/TRACLEER	1	RESPIRATORY AND ALLERGY	PULMONARY AGENTS	RESPIRATORY AND ALLERGY	PULMONARY AGENTS	0								OR	BOSENTAN MONOHYDRATE	W	66215010106	Enhanced
1085798	00093208517	TRIAMCINOLONE ACETONIDE	INHA	55MCG/ACT	1	2	1	49.5	90	0			0	RESPIRATORY AND ALLERGY	PULMONARY AGENTS	RESPIRATORY AND ALLERGY	PULMONARY AGENTS	0								NA	TRIAMCINOLONE ACETONIDE	Y	00093208517	Enhanced
1303107	00456080060	TUDORZA PRESSAIR	AEPB	400MCG/ACT	2	5	1	3	90	0			0	RESPIRATORY AND ALLERGY	PULMONARY AGENTS	RESPIRATORY AND ALLERGY	PULMONARY AGENTS	0								IN	ACLIDINIUM BROMIDE	W	00456080060	Enhanced
404574	50242004062	XOLAIR	SOLR	150MG	3	5	1	18	84	1		XOLAIR	1	RESPIRATORY AND ALLERGY	PULMONARY AGENTS	RESPIRATORY AND ALLERGY	PULMONARY AGENTS	0								SC	OMALIZUMAB	W	50242004062	Enhanced
313758	55111052560	ZAFIRLUKAST	TABS	10MG	1	2	0			0			0	RESPIRATORY AND ALLERGY	PULMONARY AGENTS	RESPIRATORY AND ALLERGY	PULMONARY AGENTS	0								OR	ZAFIRLUKAST	Y	55111052560	Enhanced
199655	55111062660	ZAFIRLUKAST	TABS	20MG	1	2	0			0			0	RESPIRATORY AND ALLERGY	PULMONARY AGENTS	RESPIRATORY AND ALLERGY	PULMONARY AGENTS	0								OR	ZAFIRLUKAST	Y	55111062660	Enhanced
1095229	00574011501	FLAVOXATE HCL	TABS	100MG	1	2	0			0			0	UROLOGICALS	ANTICHOLINERGICS / ANTISPASMODICS	UROLOGICALS	ANTICHOLINERGICS / ANTISPASMODICS	0								OR	FLAVOXATE HYDROCHLORIDE	Y	00574011501	Enhanced
863599	00603149158	OXYBUTYNIN CHLORIDE	SYRP	5MG/5ML	1	2	0			0			0	UROLOGICALS	ANTICHOLINERGICS / ANTISPASMODICS	UROLOGICALS	ANTICHOLINERGICS / ANTISPASMODICS	0								OR	OXYBUTYNIN CHLORIDE	Y	00603149158	Enhanced
863619	51079072320	OXYBUTYNIN CHLORIDE ER	TB24	10MG	1	2	0			0			0	UROLOGICALS	ANTICHOLINERGICS / ANTISPASMODICS	UROLOGICALS	ANTICHOLINERGICS / ANTISPASMODICS	0								OR	OXYBUTYNIN CHLORIDE	Y	00378661001	Enhanced
863628	00093520801	OXYBUTYNIN CHLORIDE ER	TB24	15MG	1	2	0			0			0	UROLOGICALS	ANTICHOLINERGICS / ANTISPASMODICS	UROLOGICALS	ANTICHOLINERGICS / ANTISPASMODICS	0								OR	OXYBUTYNIN CHLORIDE	Y	00093520801	Enhanced
863664	00603497528	OXYBUTYNIN CHLORIDE	TABS	5MG	1	2	0			0			0	UROLOGICALS	ANTICHOLINERGICS / ANTISPASMODICS	UROLOGICALS	ANTICHOLINERGICS / ANTISPASMODICS	0								OR	OXYBUTYNIN CHLORIDE	Y	00603497528	Enhanced
863636	51079072220	OXYBUTYNIN CHLORIDE ER	TB24	5MG	1	2	0			0			0	UROLOGICALS	ANTICHOLINERGICS / ANTISPASMODICS	UROLOGICALS	ANTICHOLINERGICS / ANTISPASMODICS	0								OR	OXYBUTYNIN CHLORIDE	Y	00378660501	Enhanced
855564	00591363630	TROSPIUM CHLORIDE ER	CP24	60MG	1	2	0			0			0	UROLOGICALS	ANTICHOLINERGICS / ANTISPASMODICS	UROLOGICALS	ANTICHOLINERGICS / ANTISPASMODICS	0								OR	TROSPIUM CHLORIDE	Y	00591363630	Enhanced
857560	00574014560	TROSPIUM CHLORIDE	TABS	20MG	1	2	0			0			0	UROLOGICALS	ANTICHOLINERGICS / ANTISPASMODICS	UROLOGICALS	ANTICHOLINERGICS / ANTISPASMODICS	0								OR	TROSPIUM CHLORIDE	Y	00574014560	Enhanced
861132	13668002101	ALFUZOSIN HCL ER	TB24	10MG	1	2	0			0			0	UROLOGICALS	BENIGN PROSTATIC HYPERPLASIA(BPH) THERAPY	UROLOGICALS	BENIGN PROSTATIC HYPERPLASIA(BPH) THERAPY	0								OR	ALFUZOSIN HYDROCHLORIDE	Y	13668002101	Enhanced
310346	00378315193	FINASTERIDE	TABS	5MG	1	2	0			0			0	UROLOGICALS	BENIGN PROSTATIC HYPERPLASIA(BPH) THERAPY	UROLOGICALS	BENIGN PROSTATIC HYPERPLASIA(BPH) THERAPY	0								OR	FINASTERIDE	Y	00378315193	Enhanced
863669	00115821101	TAMSULOSIN HCL	CAPS	0.4MG	1	2	0			0			0	UROLOGICALS	BENIGN PROSTATIC HYPERPLASIA(BPH) THERAPY	UROLOGICALS	BENIGN PROSTATIC HYPERPLASIA(BPH) THERAPY	0								OR	TAMSULOSIN HYDROCHLORIDE	Y	00115821101	Enhanced
857321	64679096001	BETHANECHOL CHLORIDE	TABS	10MG	1	2	0			0			0	UROLOGICALS	CHOLINERGIC STIMULANTS	UROLOGICALS	CHOLINERGIC STIMULANTS	0								OR	BETHANECHOL CHLORIDE	Y	64679096001	Enhanced
857328	00115953301	BETHANECHOL CHLORIDE	TABS	25MG	1	2	0			0			0	UROLOGICALS	CHOLINERGIC STIMULANTS	UROLOGICALS	CHOLINERGIC STIMULANTS	0								OR	BETHANECHOL CHLORIDE	Y	00115953301	Enhanced
857340	00115954401	BETHANECHOL CHLORIDE	TABS	50MG	1	2	0			0			0	UROLOGICALS	CHOLINERGIC STIMULANTS	UROLOGICALS	CHOLINERGIC STIMULANTS	0								OR	BETHANECHOL CHLORIDE	Y	00115954401	Enhanced
857336	64679096501	BETHANECHOL CHLORIDE	TABS	5MG	1	2	0			0			0	UROLOGICALS	CHOLINERGIC STIMULANTS	UROLOGICALS	CHOLINERGIC STIMULANTS	0								OR	BETHANECHOL CHLORIDE	Y	64679096501	Enhanced
239018	00409604301	AMMONIUM CHLORIDE	SOLN	5MEQ/5ML	2	5	0			0			0	UROLOGICALS	MISCELLANEOUS UROLOGICALS	UROLOGICALS	MISCELLANEOUS UROLOGICALS	0								IV	AMMONIUM CHLORIDE	W	00409604301	Enhanced
209788	00378904505	CYSTAGON	CAPS	150MG	2	5	0			1			0	UROLOGICALS	MISCELLANEOUS UROLOGICALS	UROLOGICALS	MISCELLANEOUS UROLOGICALS	0								OR	CYSTEAMINE BITARTRATE	W	00378904505	Enhanced
209789	00378904005	CYSTAGON	CAPS	50MG	2	5	0			1			0	UROLOGICALS	MISCELLANEOUS UROLOGICALS	UROLOGICALS	MISCELLANEOUS UROLOGICALS	0								OR	CYSTEAMINE BITARTRATE	W	00378904005	Enhanced
211140	00458009801	ELMIRON	CAPS	100MG	2	5	0			0			0	UROLOGICALS	MISCELLANEOUS UROLOGICALS	UROLOGICALS	MISCELLANEOUS UROLOGICALS	0								OR	PENTOSAN POLYSULFATE	W	00458009801	Enhanced
199381	00245007111	POTASSIUM CITRATE	TBCR	1080MG	1	2	0			0			0	UROLOGICALS	MISCELLANEOUS UROLOGICALS	UROLOGICALS	MISCELLANEOUS UROLOGICALS	0								OR	POTASSIUM CITRATE	Y	00245007111	Enhanced
199376	00245007011	POTASSIUM CITRATE	TBCR	540MG	1	2	0			0			0	UROLOGICALS	MISCELLANEOUS UROLOGICALS	UROLOGICALS	MISCELLANEOUS UROLOGICALS	0								OR	POTASSIUM CITRATE	Y	00245007011	Enhanced
359296	00054008826	CALCIUM ACETATE	CAPS	667MG	1	2	0			0			0	VITAMINS, HEMATINICS / ELECTROLYTES	ELECTROLYTES	VITAMINS, HEMATINICS / ELECTROLYTES	ELECTROLYTES	0								OR	CALCIUM ACETATE	Y	00054008826	Enhanced
830642	63717091002	ELIPHOS	TABS	667MG	1	2	0			0			0	VITAMINS, HEMATINICS / ELECTROLYTES	ELECTROLYTES	VITAMINS, HEMATINICS / ELECTROLYTES	ELECTROLYTES	0								OR	CALCIUM ACETATE	Y	63717091002	Enhanced
403890	00409925739	POTASSIUM CHLORIDE 0.15% /NACL 0.45% VIAFLEX	SOLN	20MEQ/L; 0.45%	1	2	0			0			0	VITAMINS, HEMATINICS / ELECTROLYTES	ELECTROLYTES	VITAMINS, HEMATINICS / ELECTROLYTES	ELECTROLYTES	0								IV	POTASSIUM CHLORIDE; SODIUM CHLORIDE	Y	00409925739	Enhanced
309763	00338068304	DEXTROSE 5%/POTASSIUM CHLORIDE 0.15%	SOLN	5%; 20MEQ/L	1	2	0			0			0	VITAMINS, HEMATINICS / ELECTROLYTES	ELECTROLYTES	VITAMINS, HEMATINICS / ELECTROLYTES	ELECTROLYTES	0								IV	DEXTROSE (ANHYDROUS); POTASSIUM CHLORIDE	Y	00338068304	Enhanced
309786	00264762800	POTASSIUM CHLORIDE 0.3%/D5W	SOLN	5%; 40MEQ/L	1	2	0			0			0	VITAMINS, HEMATINICS / ELECTROLYTES	ELECTROLYTES	VITAMINS, HEMATINICS / ELECTROLYTES	ELECTROLYTES	0								IV	DEXTROSE (ANHYDROUS); POTASSIUM CHLORIDE	Y	00264762800	Enhanced
847626	00338081104	KCL 0.15%/D5W,LR	SOLN	3MEQ/L; 149MEQ/L; 5%; 28MEQ/L (OA); 0MEQ/L; 130MEQ/L	1	2	0			0			0	VITAMINS, HEMATINICS / ELECTROLYTES	ELECTROLYTES	VITAMINS, HEMATINICS / ELECTROLYTES	ELECTROLYTES	0								IV	CALCIUM (+2); CHLORIDE ION; DEXTROSE (ANHYDROUS); LACTATE ANION; POTASSIUM	Y	00338081104	Enhanced
630796	00264763400	KCL 0.075%/D5W/NACL 0.45%	SOLN	5%; 10MEQ/L; 0.45%	1	2	0			0			0	VITAMINS, HEMATINICS / ELECTROLYTES	ELECTROLYTES	VITAMINS, HEMATINICS / ELECTROLYTES	ELECTROLYTES	0								IV	DEXTROSE (ANHYDROUS); POTASSIUM CHLORIDE;	Y	00264763400	Enhanced
630799	00264765500	POTASSIUM CHLORIDE 0.15% D5W/NACL 0.33%	SOLN	5%; 20MEQ/L; 0.33%	1	2	0			0			0	VITAMINS, HEMATINICS / ELECTROLYTES	ELECTROLYTES	VITAMINS, HEMATINICS / ELECTROLYTES	ELECTROLYTES	0								IV	DEXTROSE (ANHYDROUS); POTASSIUM CHLORIDE;	Y	00264765500	Enhanced
615098	00338067104	POTASSIUM CHLORIDE 0.15% D5W/NACL 0.45% VIAFLEX	SOLN	5%; 20MEQ/L; 0.45%	1	2	0			0			0	VITAMINS, HEMATINICS / ELECTROLYTES	ELECTROLYTES	VITAMINS, HEMATINICS / ELECTROLYTES	ELECTROLYTES	0								IV	DEXTROSE (ANHYDROUS); POTASSIUM CHLORIDE;	Y	00338067104	Enhanced
615099	00264763600	POTASSIUM CHLORIDE 0.22% D5W/NACL 0.45%	SOLN	5%; 30MEQ/L; 0.45%	1	2	0			0			0	VITAMINS, HEMATINICS / ELECTROLYTES	ELECTROLYTES	VITAMINS, HEMATINICS / ELECTROLYTES	ELECTROLYTES	0								IV	DEXTROSE (ANHYDROUS); POTASSIUM CHLORIDE;	Y	00264763600	Enhanced
615102	00264764520	KCL 0.15%/D5W/NACL 0.2%	SOLN	5%; 20MEQ/L; 0.2%	1	2	0			0			0	VITAMINS, HEMATINICS / ELECTROLYTES	ELECTROLYTES	VITAMINS, HEMATINICS / ELECTROLYTES	ELECTROLYTES	0								IV	DEXTROSE (ANHYDROUS); POTASSIUM CHLORIDE;	Y	00264764520	Enhanced
664703	00409790109	KCL 0.15%/D5W/NACL 0.225%	SOLN	5%; 20MEQ/L; 0.225%	1	2	0			0			0	VITAMINS, HEMATINICS / ELECTROLYTES	ELECTROLYTES	VITAMINS, HEMATINICS / ELECTROLYTES	ELECTROLYTES	0								IV	DEXTROSE (ANHYDROUS); POTASSIUM CHLORIDE;	Y	00409790109	Enhanced
615107	00264765200	KCL 0.15%/D5W/NACL 0.9%	SOLN	5%; 20MEQ/L; 0.9%	1	2	0			0			0	VITAMINS, HEMATINICS / ELECTROLYTES	ELECTROLYTES	VITAMINS, HEMATINICS / ELECTROLYTES	ELECTROLYTES	0								IV	DEXTROSE (ANHYDROUS); POTASSIUM CHLORIDE;	Y	00264765200	Enhanced
615100	00264763800	KCL 0.3%/D5W/NACL 0.45%	SOLN	5%; 40MEQ/L; 0.45%	1	2	0			0			0	VITAMINS, HEMATINICS / ELECTROLYTES	ELECTROLYTES	VITAMINS, HEMATINICS / ELECTROLYTES	ELECTROLYTES	0								IV	DEXTROSE (ANHYDROUS); POTASSIUM CHLORIDE;	Y	00264763800	Enhanced
615111	00338080704	KCL 0.3%/D5W/NACL 0.9%	SOLN	5%; 40MEQ/

847617	00338010504	RINGERS INJECTION	SOLN	4.5MEQ/L; 156MEQ/L; 4MEQ/L; 147MEQ/L	1	2	0			0		0	VITAMINS, HEMATINICS / ELECTROLYTES	ELECTROLYTES	VITAMINS, HEMATINICS / ELECTROLYTES	ELECTROLYTES	0						IV	CALCIUM (+2); CHLORIDE ION; POTASSIUM (+1); SODIUM (+1)	Y	00264778000	Enhanced
237372	00338004304	SODIUM CHLORIDE 0.45% VIAFLEX	SOLN	0.45%	1	2	0			0		0	VITAMINS, HEMATINICS / ELECTROLYTES	ELECTROLYTES	VITAMINS, HEMATINICS / ELECTROLYTES	ELECTROLYTES	0						IV	SODIUM CHLORIDE	Y	00338004304	Enhanced
313012	00409665773	SODIUM CHLORIDE	SOLN	2.5MEQ/ML	1	2	0			0		0	VITAMINS, HEMATINICS / ELECTROLYTES	ELECTROLYTES	VITAMINS, HEMATINICS / ELECTROLYTES	ELECTROLYTES	0						IJ	SODIUM CHLORIDE	Y	00409665773	Enhanced
730781	00338005403	SODIUM CHLORIDE	SOLN	3%	1	2	0			0		0	VITAMINS, HEMATINICS / ELECTROLYTES	ELECTROLYTES	VITAMINS, HEMATINICS / ELECTROLYTES	ELECTROLYTES	0						IV	SODIUM CHLORIDE	Y	00338005403	Enhanced
730782	00338005603	SODIUM CHLORIDE	SOLN	5%	1	2	0			0		0	VITAMINS, HEMATINICS / ELECTROLYTES	ELECTROLYTES	VITAMINS, HEMATINICS / ELECTROLYTES	ELECTROLYTES	0						IV	SODIUM CHLORIDE	Y	00338005603	Enhanced
204479	00338012904	SODIUM LACTATE	SOLN	167MEQ/L	1	2	0			0		0	VITAMINS, HEMATINICS / ELECTROLYTES	ELECTROLYTES	VITAMINS, HEMATINICS / ELECTROLYTES	ELECTROLYTES	0						IV	SODIUM LACTATE	Y	00338012904	Enhanced
237378	00409666402	SODIUM LACTATE	SOLN	5MEQ/ML	1	2	0			0		0	VITAMINS, HEMATINICS / ELECTROLYTES	ELECTROLYTES	VITAMINS, HEMATINICS / ELECTROLYTES	ELECTROLYTES	0						IV	SODIUM LACTATE	Y	00409666402	Enhanced
1189611	00409420305	AMINOSYN 8.5%/ELECTROLYTES	SOLN	142MEQ/L; 1100MG/100ML; 850MG/100ML; 98MEQ/L; 1100MG/100ML; 260MG/100ML; 520MG/100ML; 810MG/100ML; 1040MG/100ML; 10MEQ/L; 340MG/100ML; 380MG/100ML; 30MEQ/L; 65MEQ/L; 750MG/100ML; 370MG/100ML; 65MEQ/L; 460MG/100ML; 150MG/100ML; 44MG/100ML; 680MG/100ML	2	5	0			0		0	VITAMINS, HEMATINICS / ELECTROLYTES	MISCELLANEOUS NUTRITION PRODUCTS	VITAMINS, HEMATINICS / ELECTROLYTES	MISCELLANEOUS NUTRITION PRODUCTS	0						IV	ACETATE; ALANINE; ARGININE; CHLORIDE ION; GLYCINE; HISTIDINE; ISOLEUCINE; LEUCINE; LYSINE; MAGNESIUM (+2); METHIONINE; PHENYLALANINE; PHOSPHORUS; POTASSIUM (+1); PROLINE (L-PROLINE); SERINE; SODIUM (+1); THREONINE; TRYPTOPHAN; TYROSINE; VALINE	W	00409420305	Enhanced
800241	00409416405	AMINOSYN II	SOLN	71.8MEQ/L; 993MG/100ML; 1018MG/100ML; 700MG/100ML; 738MG/100ML; 500MG/100ML; 300MG/100ML; 660MG/100ML; 1000MG/100ML; 1050MG/100ML; 1726MG/100ML; 298MG/100ML; 722MG/100ML; 530MG/100ML; 45.3MEQ/L; 400MG/100ML; 200MG/100ML; 270MG/100ML; 500MG/100ML	2	5	0			0		0	VITAMINS, HEMATINICS / ELECTROLYTES	MISCELLANEOUS NUTRITION PRODUCTS	VITAMINS, HEMATINICS / ELECTROLYTES	MISCELLANEOUS NUTRITION PRODUCTS	0						IV	ACETATE; ALANINE; ARGININE; ASPARTIC ACID; GLUTAMIC ACID HYDROCHLORIDE; GLYCINE; HISTIDINE; ISOLEUCINE; LEUCINE; LYSINE; METHIONINE; PHENYLALANINE; PROLINE (L-PROLINE); SERINE; SODIUM (+1); THREONINE; TRYPTOPHAN; TYROSINE; VALINE	W	00409416405	Enhanced
800192	00409717117	AMINOSYN II	SOLN	107.6MEQ/L; 1490MG/100ML; 1527MG/100ML; 1050MG/100ML; 1107MG/100ML; 750MG/100ML; 450MG/100ML; 990MG/100ML; 1500MG/100ML; 1575MG/100ML; 258MG/100ML; 447MG/100ML; 1083MG/100ML; 795MG/100ML; 50MEQ/L; 600MG/100ML; 300MG/100ML; 405MG/100ML; 750MG/100ML	2	5	0			0		0	VITAMINS, HEMATINICS / ELECTROLYTES	MISCELLANEOUS NUTRITION PRODUCTS	VITAMINS, HEMATINICS / ELECTROLYTES	MISCELLANEOUS NUTRITION PRODUCTS	0						IV	ACETATE; ALANINE; ARGININE; ASPARTIC ACID; GLUTAMIC ACID HYDROCHLORIDE; GLYCINE; HISTIDINE; ISOLEUCINE; LEUCINE; LYSINE; METHIONINE; PHENYLALANINE; PROLINE (L-PROLINE); SERINE; SODIUM (+1); THREONINE; TRYPTOPHAN; TYROSINE; VALINE	W	00409717117	Enhanced
800213	00409416003	AMINOSYN II	SOLN	50.3MEQ/L; 695MG/100ML; 713MG/100ML; 490MG/100ML; 517MG/100ML; 350MG/100ML; 210MG/100ML; 462MG/100ML; 700MG/100ML; 735MG/100ML; 120MG/100ML; 209MG/100ML; 505MG/100ML; 371MG/100ML; 31.3MEQ/L; 280MG/100ML; 140MG/100ML; 189MG/100ML; 350MG/100ML	2	5	0			0		0	VITAMINS, HEMATINICS / ELECTROLYTES	MISCELLANEOUS NUTRITION PRODUCTS	VITAMINS, HEMATINICS / ELECTROLYTES	MISCELLANEOUS NUTRITION PRODUCTS	0						IV	ACETATE; ALANINE; ARGININE; ASPARTIC ACID; GLUTAMIC ACID HYDROCHLORIDE; GLYCINE; HISTIDINE; ISOLEUCINE; LEUCINE; LYSINE; METHIONINE; PHENYLALANINE; PROLINE (L-PROLINE); SERINE; SODIUM (+1); THREONINE; TRYPTOPHAN; TYROSINE; VALINE	W	00409416003	Enhanced
800220	00409416205	AMINOSYN II	SOLN	61.1MEQ/L; 844MG/100ML; 865MG/100ML; 595MG/100ML; 627MG/100ML; 425MG/100ML; 255MG/100ML; 561MG/100ML; 850MG/100ML; 146MG/100ML; 253MG/100ML; 614MG/100ML; 456MG/100ML; 33.3MEQ/L; 340MG/100ML; 170MG/100ML; 230MG/100ML; 425MG/100ML	2	5	0			0		0	VITAMINS, HEMATINICS / ELECTROLYTES	MISCELLANEOUS NUTRITION PRODUCTS	VITAMINS, HEMATINICS / ELECTROLYTES	MISCELLANEOUS NUTRITION PRODUCTS	0						IV	ACETATE; ALANINE; ARGININE; ASPARTIC ACID; GLUTAMIC ACID HYDROCHLORIDE; GLYCINE; HISTIDINE; ISOLEUCINE; LEUCINE; LYSINE; METHIONINE; PHENYLALANINE; PROLINE (L-PROLINE); SERINE; SODIUM (+1); THREONINE; TRYPTOPHAN; TYROSINE; VALINE	W	00409416205	Enhanced
1189310	00409417103	AMINOSYN II 8.5%/ELECTROLYTES	SOLN	61MEQ/L; 844MG/100ML; 865MG/100ML; 595MG/100ML; 86MEQ/L; 627MG/100ML; 425MG/100ML; 255MG/100ML; 561MG/100ML; 850MG/100ML; 893MG/100ML; 10MEQ/L; 146MG/100ML; 30MMOLE/L; 66MEQ/L; 614MG/100ML; 450MG/100ML; 80MEQ/L; 340MG/100ML; 170MG/100ML; 230MG/100ML; 425MG/100ML	2	5	0			0		0	VITAMINS, HEMATINICS / ELECTROLYTES	MISCELLANEOUS NUTRITION PRODUCTS	VITAMINS, HEMATINICS / ELECTROLYTES	MISCELLANEOUS NUTRITION PRODUCTS	0						IV	ACETATE; ALANINE; ARGININE; ASPARTIC ACID; CHLORIDE ION; GLUTAMIC ACID HYDROCHLORIDE; GLYCINE; HISTIDINE; ISOLEUCINE; LEUCINE; LYSINE; MAGNESIUM (+2); METHIONINE; PHENYLALANINE; PHOSPHATE; POTASSIUM (+1); PROLINE (L-PROLINE); SERINE; SODIUM (+1); THREONINE; TRYPTOPHAN; TYROSINE; VALINE	W	00409417103	Enhanced
847785	00409419605	AMINOSYN M	SOLN	65MEQ/L; 448MG/100ML; 343MG/100ML; 40MEQ/L; 448MG/100ML; 105MG/100ML; 252MG/100ML; 328MG/100ML; 252MG/100ML; 3MEQ/L; 140MG/100ML; 154MG/100ML; 3.5MMOLE/L; 13MEQ/L; 300MG/100ML; 147MG/100ML; 40MEQ/L; 182MG/100ML; 56MG/100ML; 311MG/100ML; 280MG/100ML	2	5	0			0		0	VITAMINS, HEMATINICS / ELECTROLYTES	MISCELLANEOUS NUTRITION PRODUCTS	VITAMINS, HEMATINICS / ELECTROLYTES	MISCELLANEOUS NUTRITION PRODUCTS	0						IV	ACETATE; ALANINE; ARGININE; CHLORIDE ION; GLYCINE; HISTIDINE; ISOLEUCINE; LEUCINE; LYSINE; MAGNESIUM (+2); METHIONINE; PHENYLALANINE; PHOSPHORUS; POTASSIUM (+1); PROLINE (L-PROLINE); SERINE; SODIUM (+1); THREONINE; TRYPTOPHAN; TYROSINE; VALINE	W	00409419605	Enhanced
800273	00409416803	AMINOSYN-HBC	SOLN	7.1MEQ/100ML; 560MG/100ML; 507MG/100ML; 4MEQ/100ML; 660MG/100ML; 154MG/100ML; 789MG/100ML; 1578MG/100ML; 265MG/100ML; 206MG/100ML; 1.12GM/100ML; 228MG/100ML; 448MG/100ML; 221MG/100ML; 272MG/100ML; 88MG/100ML; 33MG/100ML; 789MG/100ML	2	5	0			0		0	VITAMINS, HEMATINICS / ELECTROLYTES	MISCELLANEOUS NUTRITION PRODUCTS	VITAMINS, HEMATINICS / ELECTROLYTES	MISCELLANEOUS NUTRITION PRODUCTS	0						IV	ACETATE; ALANINE; ARGININE; CHLORIDE ION; GLYCINE; HISTIDINE; ISOLEUCINE; LEUCINE; LYSINE; METHIONINE; NITROGEN; PHENYLALANINE; PROLINE (L-PROLINE); SERINE; THREONINE; TRYPTOPHAN; TYROSINE; VALINE	W	00409416803	Enhanced
800345	00409417905	AMINOSYN-PF	SOLN	46MEQ/L; 698MG/100ML; 1227MG/100ML; 527MG/100ML; 826MG/100ML; 385MG/100ML; 312MG/100ML; 765MG/100ML; 1200MG/100ML; 677MG/100ML; 180MG/100ML; 427MG/100ML; 812MG/100ML; 495MG/100ML; 3.4MEQ/L; 70MG/100ML; 512MG/100ML; 180MG/100ML; 44MG/100ML; 673MG/100ML	2	5	0			0		0	VITAMINS, HEMATINICS / ELECTROLYTES	MISCELLANEOUS NUTRITION PRODUCTS	VITAMINS, HEMATINICS / ELECTROLYTES	MISCELLANEOUS NUTRITION PRODUCTS	0						IV	ACETATE; ALANINE; ARGININE; ASPARTIC ACID; GLUTAMIC ACID HYDROCHLORIDE; GLYCINE; HISTIDINE; ISOLEUCINE; LEUCINE; LYSINE; METHIONINE; PHENYLALANINE; PROLINE (L-PROLINE); SERINE; SODIUM (+1); TAURINE; THREONINE; TRYPTOPHAN; TYROSINE; VALINE	W	00409417905	Enhanced

831430	00409417803	AMINOSYN-PF 7%	SOLN	32.5GM/DL; 490MG/100ML; 861MG/100ML; 370MG/100ML; 578MG/100ML; 270MG/100ML; 220MG/100ML; 534MG/100ML; 831MG/100ML; 475MG/100ML; 125MG/100ML; 10.69GM/L; 300MG/100ML; 570MG/100ML; 70GM/L; 347MG/100ML; 50MG/100ML; 369MG/100ML; 125MG/100ML; 44MG/100ML; 452MG/100ML	2	5	0			0		0	VITAMINS, HEMATINICS / ELECTROLYTES	MISCELLANEOUS NUTRITION PRODUCTS	VITAMINS, HEMATINICS / ELECTROLYTES	MISCELLANEOUS NUTRITION PRODUCTS	0						IV	ACETATE; ALANINE; ARGININE; ASPARTIC ACID; GLUTAMIC ACID; GLYCINE; HISTIDINE; ISOLEUCINE; LEUCINE; LYSINE; METHIONINE; NITROGEN; PHENYLALANINE; PROLINE (L-PROLINE); PROTEIN; SERINE; TAURINE; THREONINE; TRYPTOPHAN; TYROSINE; VALINE	W	00409417803	Enhanced
800400	00338113203	CLINIMIX 2.75%/DEXTROSE 5%	SOLN	24MEQ/1000ML; 570MG/100ML; 316MG/100ML; 11MEQ/1000ML; 5GM/100ML; 283MG/100ML; 132MG/100ML; 165MG/100ML; 201MG/100ML; 158MG/100ML; 110MG/100ML; 154MG/100ML; 187MG/100ML; 138MG/100ML; 116MG/100ML; 50MG/100ML; 11MG/100ML; 160MG/100ML	2	5	0			0		0	VITAMINS, HEMATINICS / ELECTROLYTES	MISCELLANEOUS NUTRITION PRODUCTS	VITAMINS, HEMATINICS / ELECTROLYTES	MISCELLANEOUS NUTRITION PRODUCTS	0						IV	ACETATE; ALANINE; ARGININE; CHLORIDE ION; DEXTROSE (ANHYDROUS); GLYCINE; HISTIDINE; ISOLEUCINE; LEUCINE; LYSINE HYDROCHLORIDE; METHIONINE; PHENYLALANINE; PROLINE (L-PROLINE); SERINE; THREONINE; TRYPTOPHAN; TYROSINE; VALINE	W	00338113203	Enhanced
800405	00338113403	CLINIMIX 4.25%/DEXTROSE 10%	SOLN	37MEQ/L; 880MG/100ML; 489MG/100ML; 17MEQ/L; 10GM/100ML; 438MG/100ML; 204MG/100ML; 255MG/100ML; 311MG/100ML; 247MG/100ML; 170MG/100ML; 238MG/100ML; 289MG/100ML; 213MG/100ML; 179MG/100ML; 77MG/100ML; 17MG/100ML; 247MG/100ML	2	5	0			0		0	VITAMINS, HEMATINICS / ELECTROLYTES	MISCELLANEOUS NUTRITION PRODUCTS	VITAMINS, HEMATINICS / ELECTROLYTES	MISCELLANEOUS NUTRITION PRODUCTS	0						IV	ACETATE; ALANINE; ARGININE; CHLORIDE ION; DEXTROSE (ANHYDROUS); GLYCINE; HISTIDINE; ISOLEUCINE; LEUCINE; LYSINE HYDROCHLORIDE; METHIONINE; PHENYLALANINE; PROLINE (L-PROLINE); SERINE; THREONINE; TRYPTOPHAN; TYROSINE; VALINE	W	00338113403	Enhanced
800410	00338113503	CLINIMIX 4.25%/DEXTROSE 20%	SOLN	37MEQ/L; 880MG/100ML; 489MG/100ML; 17MEQ/L; 20GM/100ML; 438MG/100ML; 204MG/100ML; 255MG/100ML; 311MG/100ML; 247MG/100ML; 170MG/100ML; 238MG/100ML; 289MG/100ML; 213MG/100ML; 179MG/100ML; 77MG/100ML; 17MG/100ML; 247MG/100ML	2	5	0			0		0	VITAMINS, HEMATINICS / ELECTROLYTES	MISCELLANEOUS NUTRITION PRODUCTS	VITAMINS, HEMATINICS / ELECTROLYTES	MISCELLANEOUS NUTRITION PRODUCTS	0						IV	ACETATE; ALANINE; ARGININE; CHLORIDE ION; DEXTROSE (ANHYDROUS); GLYCINE; HISTIDINE; ISOLEUCINE; LEUCINE; LYSINE HYDROCHLORIDE; METHIONINE; PHENYLALANINE; PROLINE (L-PROLINE); SERINE; THREONINE; TRYPTOPHAN; TYROSINE; VALINE	W	00338113503	Enhanced
800415	00338113603	CLINIMIX 4.25%/DEXTROSE 25%	SOLN	37MEQ/L; 880MG/100ML; 489MG/100ML; 17MEQ/L; 25GM/100ML; 438MG/100ML; 204MG/100ML; 255MG/100ML; 311MG/100ML; 247MG/100ML; 170MG/100ML; 238MG/100ML; 289MG/100ML; 213MG/100ML; 179MG/100ML; 77MG/100ML; 17MG/100ML; 247MG/100ML	2	5	0			0		0	VITAMINS, HEMATINICS / ELECTROLYTES	MISCELLANEOUS NUTRITION PRODUCTS	VITAMINS, HEMATINICS / ELECTROLYTES	MISCELLANEOUS NUTRITION PRODUCTS	0						IV	ACETATE; ALANINE; ARGININE; CHLORIDE ION; DEXTROSE (ANHYDROUS); GLYCINE; HISTIDINE; ISOLEUCINE; LEUCINE; LYSINE HYDROCHLORIDE; METHIONINE; PHENYLALANINE; PROLINE (L-PROLINE); SERINE; THREONINE; TRYPTOPHAN; TYROSINE; VALINE	W	00338113603	Enhanced
800438	00338113703	CLINIMIX 5%/DEXTROSE 15%	SOLN	42MEQ/1000ML; 1035MG/100ML; 575MG/100ML; 20MEQ/1000ML; 15GM/100ML; 515MG/100ML; 240MG/100ML; 300MG/100ML; 365MG/100ML; 290MG/100ML; 200MG/100ML; 280MG/100ML; 340MG/100ML; 250MG/100ML; 210MG/100ML; 90MG/100ML; 20MG/100ML; 290MG/100ML	2	5	0			0		0	VITAMINS, HEMATINICS / ELECTROLYTES	MISCELLANEOUS NUTRITION PRODUCTS	VITAMINS, HEMATINICS / ELECTROLYTES	MISCELLANEOUS NUTRITION PRODUCTS	0						IV	ACETATE; ALANINE; ARGININE; CHLORIDE ION; DEXTROSE (ANHYDROUS); GLYCINE; HISTIDINE; ISOLEUCINE; LEUCINE; LYSINE HYDROCHLORIDE; METHIONINE; PHENYLALANINE; PROLINE (L-PROLINE); SERINE; THREONINE; TRYPTOPHAN; TYROSINE; VALINE	W	00338113703	Enhanced
800444	00338113803	CLINIMIX 5%/DEXTROSE 20%	SOLN	42MEQ/L; 1035MG/100ML; 575MG/100ML; 20MEQ/L; 20GM/100ML; 515MG/100ML; 240MG/100ML; 300MG/100ML; 365MG/100ML; 290MG/100ML; 200MG/100ML; 280MG/100ML; 340MG/100ML; 250MG/100ML; 210MG/100ML; 90MG/100ML; 20MG/100ML; 290MG/100ML	2	5	0			0		0	VITAMINS, HEMATINICS / ELECTROLYTES	MISCELLANEOUS NUTRITION PRODUCTS	VITAMINS, HEMATINICS / ELECTROLYTES	MISCELLANEOUS NUTRITION PRODUCTS	0						IV	ACETATE; ALANINE; ARGININE; CHLORIDE ION; DEXTROSE (ANHYDROUS); GLYCINE; HISTIDINE; ISOLEUCINE; LEUCINE; LYSINE HYDROCHLORIDE; METHIONINE; PHENYLALANINE; PROLINE (L-PROLINE); SERINE; THREONINE; TRYPTOPHAN; TYROSINE; VALINE	W	00338113803	Enhanced
800449	00338113903	CLINIMIX 5%/DEXTROSE 25%	SOLN	42MEQ/L; 1035MG/100ML; 575MG/100ML; 20MEQ/L; 25GM/100ML; 515MG/100ML; 240MG/100ML; 300MG/100ML; 365MG/100ML; 290MG/100ML; 200MG/100ML; 280MG/100ML; 340MG/100ML; 250MG/100ML; 210MG/100ML; 90MG/100ML; 20MG/100ML; 290MG/100ML	2	5	0			0		0	VITAMINS, HEMATINICS / ELECTROLYTES	MISCELLANEOUS NUTRITION PRODUCTS	VITAMINS, HEMATINICS / ELECTROLYTES	MISCELLANEOUS NUTRITION PRODUCTS	0						IV	ACETATE; ALANINE; ARGININE; CHLORIDE ION; DEXTROSE (ANHYDROUS); GLYCINE; HISTIDINE; ISOLEUCINE; LEUCINE; LYSINE HYDROCHLORIDE; METHIONINE; PHENYLALANINE; PROLINE (L-PROLINE); SERINE; THREONINE; TRYPTOPHAN; TYROSINE; VALINE	W	00338113903	Enhanced
801018	00338114603	CLINIMIX E 4.25%/DEXTROSE 25%	SOLN	880MG/100ML; 489MG/100ML; 33MG/100ML; 25GM/100ML; 204MG/100ML; 255MG/100ML; 311MG/100ML; 247MG/100ML; 51MG/100ML; 170MG/100ML; 702MG/100ML; 238MG/100ML; 261MG/100ML; 289MG/100ML; 213MG/100ML; 297MG/100ML; 77MG/100ML; 179MG/100ML; 77MG/100ML; 17MG/100ML; 247MG/100ML	2	5	0			0		0	VITAMINS, HEMATINICS / ELECTROLYTES	MISCELLANEOUS NUTRITION PRODUCTS	VITAMINS, HEMATINICS / ELECTROLYTES	MISCELLANEOUS NUTRITION PRODUCTS	0						IV	ALANINE; ARGININE; CALCIUM CHLORIDE DIHYDRATE; DEXTROSE (ANHYDROUS); HISTIDINE; ISOLEUCINE; LEUCINE; LYSINE HYDROCHLORIDE; MAGNESIUM CHLORIDE; METHIONINE; NITROGEN; PHENYLALANINE; POTASSIUM PHOSPHATE, DIBASIC; PROLINE (L-PROLINE); SERINE; SODIUM ACETATE TRIHYDRATE; SODIUM CHLORIDE; THREONINE; TRYPTOPHAN; TYROSINE; VALINE	W	00338114603	Enhanced
801000	00338114403	CLINIMIX E 4.25%/DEXTROSE 5%	SOLN	880MG/100ML; 489MG/100ML; 33MG/100ML; 5GM/100ML; 204MG/100ML; 255MG/100ML; 311MG/100ML; 247MG/100ML; 51MG/100ML; 170MG/100ML; 702MG/100ML; 238MG/100ML; 261MG/100ML; 289MG/100ML; 213MG/100ML; 297MG/100ML; 77MG/100ML; 179MG/100ML; 77MG/100ML; 17MG/100ML; 247MG/100ML	2	5	0			0		0	VITAMINS, HEMATINICS / ELECTROLYTES	MISCELLANEOUS NUTRITION PRODUCTS	VITAMINS, HEMATINICS / ELECTROLYTES	MISCELLANEOUS NUTRITION PRODUCTS	0						IV	ALANINE; ARGININE; CALCIUM CHLORIDE DIHYDRATE; DEXTROSE (ANHYDROUS); HISTIDINE; ISOLEUCINE; LEUCINE; LYSINE HYDROCHLORIDE; MAGNESIUM CHLORIDE; METHIONINE; NITROGEN; PHENYLALANINE; POTASSIUM PHOSPHATE, DIBASIC; PROLINE (L-PROLINE); SERINE; SODIUM ACETATE TRIHYDRATE; SODIUM CHLORIDE; THREONINE; TRYPTOPHAN; TYROSINE; VALINE	W	00338114403	Enhanced

801021	00338812304	CLINIMIX E 5%/DEXTROSE 15%	SOLN	103SMG/100ML; 575MG/100ML; 33MG/100ML; 15GM/100ML; 240MG/100ML; 300MG/100ML; 368MG/100ML; 290MG/100ML; 51MG/100ML; 200MG/100ML; 826MG/100ML; 280MG/100ML; 261MG/100ML; 340MG/100ML; 250MG/100ML; 340MG/100ML; 59MG/100ML; 210MG/100ML; 90MG/100ML; 20MG/100ML; 290MG/100ML	2	5	0			0		0	VITAMINS, HEMATINICS / ELECTROLYTES	MISCELLANEOUS NUTRITION PRODUCTS	VITAMINS, HEMATINICS / ELECTROLYTES	MISCELLANEOUS NUTRITION PRODUCTS	0						IV	ALANINE; ARGININE; CALCIUM CHLORIDE DIHYDRATE; DEXTROSE (ANHYDROUS); HISTIDINE; ISOLEUCINE; LEUCINE; LYSINE HYDROCHLORIDE; MAGNESIUM CHLORIDE; METHIONINE; NITROGEN; PHENYLALANINE; POTASSIUM PHOSPHATE, DIBASIC; PROLINE (L-PROLINE); SERINE; SODIUM ACETATE TRIHYDRATE; SODIUM CHLORIDE; THREONINE; TRYPTOPHAN; TYROSINE; VALINE	W	00338812304	Enhanced
801031	00338814803	CLINIMIX E 5%/DEXTROSE 20%	SOLN	103SMG/100ML; 575MG/100ML; 33MG/100ML; 20GM/100ML; 240MG/100ML; 300MG/100ML; 368MG/100ML; 290MG/100ML; 51MG/100ML; 200MG/100ML; 826MG/100ML; 280MG/100ML; 261MG/100ML; 340MG/100ML; 250MG/100ML; 340MG/100ML; 59MG/100ML; 210MG/100ML; 90MG/100ML; 20MG/100ML; 290MG/100ML	2	5	0			0		0	VITAMINS, HEMATINICS / ELECTROLYTES	MISCELLANEOUS NUTRITION PRODUCTS	VITAMINS, HEMATINICS / ELECTROLYTES	MISCELLANEOUS NUTRITION PRODUCTS	0						IV	ALANINE; ARGININE; CALCIUM CHLORIDE DIHYDRATE; DEXTROSE (ANHYDROUS); HISTIDINE; ISOLEUCINE; LEUCINE; LYSINE HYDROCHLORIDE; MAGNESIUM CHLORIDE; METHIONINE; NITROGEN; PHENYLALANINE; POTASSIUM PHOSPHATE, DIBASIC; PROLINE (L-PROLINE); SERINE; SODIUM ACETATE TRIHYDRATE; SODIUM CHLORIDE; THREONINE; TRYPTOPHAN; TYROSINE; VALINE	W	00338114803	Enhanced
801034	00338812704	CLINIMIX E 5%/DEXTROSE 25%	SOLN	103SMG/100ML; 575MG/100ML; 33MG/100ML; 25GM/100ML; 240MG/100ML; 300MG/100ML; 368MG/100ML; 290MG/100ML; 51MG/100ML; 200MG/100ML; 826MG/100ML; 280MG/100ML; 261MG/100ML; 340MG/100ML; 250MG/100ML; 340MG/100ML; 59MG/100ML; 210MG/100ML; 90MG/100ML; 20MG/100ML; 290MG/100ML	2	5	0			0		0	VITAMINS, HEMATINICS / ELECTROLYTES	MISCELLANEOUS NUTRITION PRODUCTS	VITAMINS, HEMATINICS / ELECTROLYTES	MISCELLANEOUS NUTRITION PRODUCTS	0						IV	ALANINE; ARGININE; CALCIUM CHLORIDE DIHYDRATE; DEXTROSE (ANHYDROUS); HISTIDINE; ISOLEUCINE; LEUCINE; LYSINE HYDROCHLORIDE; MAGNESIUM CHLORIDE; METHIONINE; NITROGEN; PHENYLALANINE; POTASSIUM PHOSPHATE, DIBASIC; PROLINE (L-PROLINE); SERINE; SODIUM ACETATE TRIHYDRATE; SODIUM CHLORIDE; THREONINE; TRYPTOPHAN; TYROSINE; VALINE	W	00338112704	Enhanced
800588	00338050203	CLINISOL SF 15%	SOLN	151ME/QL; 2170MG/100ML; 1470MG/100ML; 434MG/100ML; 749MG/100ML; 1040MG/100ML; 894MG/100ML; 749MG/100ML; 1040MG/100ML; 1160MG/100ML; 749MG/100ML; 1040MG/100ML; 894MG/100ML; 592MG/100ML; 749MG/100ML; 259MG/100ML; 39MG/100ML; 960MG/100ML	2	5	0			0		0	VITAMINS, HEMATINICS / ELECTROLYTES	MISCELLANEOUS NUTRITION PRODUCTS	VITAMINS, HEMATINICS / ELECTROLYTES	MISCELLANEOUS NUTRITION PRODUCTS	0						IV	ACETATE; ALANINE; ARGININE; ASPARTIC ACID; GLUTAMIC ACID HYDROCHLORIDE; GLYCINE; HISTIDINE; ISOLEUCINE; LEUCINE; LYSINE; METHIONINE; PHENYLALANINE; PROLINE (L-PROLINE); SERINE; THREONINE; TRYPTOPHAN; TYROSINE; VALINE	X	00338050203	Enhanced
800899	00264903055	FREAMINE III	SOLN	72ME/QL; 600MG/100ML; 810MG/100ML; 3MEQ/L; 14MG/100ML; 1160MG/100ML; 240MG/100ML; 590MG/100ML; 770MG/100ML; 620MG/100ML; 450MG/100ML; 480MG/100ML; 10MMOLE/L; 115MG/100ML; 950MG/100ML; 500MG/100ML; 10MEQ/L; 340MG/100ML; 130MG/100ML; 560MG/100ML	2	5	0			0		0	VITAMINS, HEMATINICS / ELECTROLYTES	MISCELLANEOUS NUTRITION PRODUCTS	VITAMINS, HEMATINICS / ELECTROLYTES	MISCELLANEOUS NUTRITION PRODUCTS	0						IV	ACETATE; ALANINE; ARGININE; CHLORIDE ION; CYSTEINE; GLYCINE; HISTIDINE; ISOLEUCINE; LEUCINE; LYSINE; METHIONINE; PHENYLALANINE; PHOSPHATE; PHOSPHORIC ACID; PROLINE (L-PROLINE); SERINE; SODIUM (+1); THREONINE; TRYPTOPHAN; VALINE	W	00264903055	Enhanced
800933	00264937155	HEPATAMINE	SOLN	62ME/QL; 770MG/100ML; 600MG/100ML; 3MEQ/L; 20MG/100ML; 900MG/100ML; 240MG/100ML; 900MG/100ML; 1100MG/100ML; 610MG/100ML; 100MG/100ML; 100MG/100ML; 115MG/100ML; 800MG/100ML; 500MG/100ML; 105MG/100ML; 450MG/100ML; 66MG/100ML; 840MG/100ML	2	5	0			0		0	VITAMINS, HEMATINICS / ELECTROLYTES	MISCELLANEOUS NUTRITION PRODUCTS	VITAMINS, HEMATINICS / ELECTROLYTES	MISCELLANEOUS NUTRITION PRODUCTS	0						IV	ACETATE; ALANINE; ARGININE; CHLORIDE ION; CYSTEINE; HYDROCHLORIDE; GLYCINE; HISTIDINE; ISOLEUCINE; LEUCINE; LYSINE; METHIONINE; PHENYLALANINE; PHOSPHORIC ACID; PROLINE (L-PROLINE); SERINE; SODIUM BISULFITE; THREONINE; TRYPTOPHAN; VALINE	W	00264937155	Enhanced
800954	00338050403	HEPATASOL	SOLN	0.77GM/100ML; 0.6GM/100ML; 0.02GM/100ML; 0.9GM/100ML; 0.24GM/100ML; 0.9GM/100ML; 1.1GM/100ML; 0.61GM/100ML; 0.1GM/100ML; 0.1GM/100ML; 0.115GM/100ML; 0.8GM/100ML; 0.5GM/100ML; 0.45GM/100ML; 0.065GM/100ML; 0.84GM/100ML	2	5	0			0		0	VITAMINS, HEMATINICS / ELECTROLYTES	MISCELLANEOUS NUTRITION PRODUCTS	VITAMINS, HEMATINICS / ELECTROLYTES	MISCELLANEOUS NUTRITION PRODUCTS	0						IV	ALANINE; ARGININE; CYSTEINE HYDROCHLORIDE; GLYCINE; HISTIDINE; ISOLEUCINE; LEUCINE; LYSINE; METHIONINE; PHENYLALANINE; PHOSPHORIC ACID; PROLINE (L-PROLINE); SERINE; THREONINE; TRYPTOPHAN; VALINE	W	00338050403	Enhanced
805127	00338051902	INTRALIPID	EMUL	2.25%; 20%	1	2	0			0		0	VITAMINS, HEMATINICS / ELECTROLYTES	MISCELLANEOUS NUTRITION PRODUCTS	VITAMINS, HEMATINICS / ELECTROLYTES	MISCELLANEOUS NUTRITION PRODUCTS	0						IV	GLYCERIN; SOYBEAN OIL	Y	00338051902	Enhanced
800637	00409737109	IONOSOL-B/DEXTROSE 5%	SOLN	49ME/QL; 5%; 25ME/QL; 9ME/QL; 13MEQ/L; 25MEQ/L; 57MEQ/L	2	5	0			0		0	VITAMINS, HEMATINICS / ELECTROLYTES	MISCELLANEOUS NUTRITION PRODUCTS	VITAMINS, HEMATINICS / ELECTROLYTES	MISCELLANEOUS NUTRITION PRODUCTS	0						IV	CHLORIDE ION; DEXTROSE (ANHYDROUS); LACTATE ANION; MAGNESIUM (+2);	W	00409737109	Enhanced
800648	00409737203	IONOSOL-MB/DEXTROSE 5%	SOLN	22ME/QL; 5%; 23ME/QL; 9ME/QL; 3MEQ/L; 20MEQ/L; 25MEQ/L	2	5	0			0		0	VITAMINS, HEMATINICS / ELECTROLYTES	MISCELLANEOUS NUTRITION PRODUCTS	VITAMINS, HEMATINICS / ELECTROLYTES	MISCELLANEOUS NUTRITION PRODUCTS	0						IV	CHLORIDE ION; DEXTROSE (ANHYDROUS); LACTATE ANION; MAGNESIUM (+2);	W	00409737203	Enhanced
800790	00264772000	ISOLYTE-M/DEXTROSE 5%	SOLN	20ME/QL; 44MEQ/L; 5%; 15MEQ/L; 15MEQ/L; 38MEQ/L	2	5	0			0		0	VITAMINS, HEMATINICS / ELECTROLYTES	MISCELLANEOUS NUTRITION PRODUCTS	VITAMINS, HEMATINICS / ELECTROLYTES	MISCELLANEOUS NUTRITION PRODUCTS	0						IV	ACETATE; CHLORIDE ION; DEXTROSE (ANHYDROUS); PHOSPHATE; POTASSIUM (+1);	W	00264772000	Enhanced
800812	00264773010	ISOLYTE-P/DEXTROSE 5%	SOLN	20ME/QL; 123MEQ/L; 5%; 3MEQ/L; 3MEQ/L; 20MEQ/L; 25MEQ/L	2	5	0			0		0	VITAMINS, HEMATINICS / ELECTROLYTES	MISCELLANEOUS NUTRITION PRODUCTS	VITAMINS, HEMATINICS / ELECTROLYTES	MISCELLANEOUS NUTRITION PRODUCTS	0						IV	ACETATE; CHLORIDE ION; DEXTROSE (ANHYDROUS); MAGNESIUM (+2); PHOSPHATE;	W	00264773010	Enhanced
800928	00264770300	ISOLYTE-S	SOLN	27MEQ/L; 98ME/QL; 23ME/QL; 3MEQ/L; 5MEQ/L; 140MEQ/L	2	5	0			0		0	VITAMINS, HEMATINICS / ELECTROLYTES	MISCELLANEOUS NUTRITION PRODUCTS	VITAMINS, HEMATINICS / ELECTROLYTES	MISCELLANEOUS NUTRITION PRODUCTS	0						IV	ACETATE; CHLORIDE ION; GLUCONATE ANION; MAGNESIUM (+2); POTASSIUM	W	00264770300	Enhanced
902325	00409979002	LIPOSYN III	EMUL	1.2%; 2.5%; 10%	1	2	0			0		0	VITAMINS, HEMATINICS / ELECTROLYTES	MISCELLANEOUS NUTRITION PRODUCTS	VITAMINS, HEMATINICS / ELECTROLYTES	MISCELLANEOUS NUTRITION PRODUCTS	0						IV	EGG PHOSPHATIDES; GLYCERIN; SOYBEAN OIL	Y	00409979002	Enhanced
902329	00409979102	LIPOSYN III	EMUL	1.2%; 2.5%; 20%	1	2	0			0		0	VITAMINS, HEMATINICS / ELECTROLYTES	MISCELLANEOUS NUTRITION PRODUCTS	VITAMINS, HEMATINICS / ELECTROLYTES	MISCELLANEOUS NUTRITION PRODUCTS	0						IV	EGG PHOSPHATIDES; GLYCERIN; SOYBEAN OIL	Y	00409979102	Enhanced
800979	00264190955	NEPHRAMINE	SOLN	44MEQ/L; 20MG/100ML; 250MG/100ML; 560MG/100ML; 880MG/100ML; 640MG/100ML; 880MG/100ML; 880MG/100ML; 6MEQ/L; 400MG/100ML; 200MG/100ML; 640MG/100ML	2	5	0			0		0	VITAMINS, HEMATINICS / ELECTROLYTES	MISCELLANEOUS NUTRITION PRODUCTS	VITAMINS, HEMATINICS / ELECTROLYTES	MISCELLANEOUS NUTRITION PRODUCTS	0						IV	ACETATE; CYSTEINE; HISTIDINE; ISOLEUCINE; LEUCINE; LYSINE; METHIONINE; PHENYLALANINE; SODIUM (+1); THREONINE; TRYPTOPHAN; VALINE	W	00264190955	Enhanced
801009	00409796509	NORMOSOL-M IN D5W	SOLN	16ME/QL; 40MEQ/L; 5%; 3MEQ/L; 13MEQ/L; 40MEQ/L	2	5	0			0		0	VITAMINS, HEMATINICS / ELECTROLYTES	MISCELLANEOUS NUTRITION PRODUCTS	VITAMINS, HEMATINICS / ELECTROLYTES	MISCELLANEOUS NUTRITION PRODUCTS	0						IV	ACETATE; CHLORIDE ION; DEXTROSE (ANHYDROUS); MAGNESIUM (+2); POTASSIUM	W	00409796509	Enhanced
800988	00409767009	NORMOSOL-R	SOLN	27ME/QL; 98ME/QL; 23ME/QL; 3MEQ/L; 5MEQ/L; 140MEQ/L	2	5	0			0		0	VITAMINS, HEMATINICS / ELECTROLYTES	MISCELLANEOUS NUTRITION PRODUCTS	VITAMINS, HEMATINICS / ELECTROLYTES	MISCELLANEOUS NUTRITION PRODUCTS	0						IV	ACETATE; CHLORIDE ION; GLUCONATE ANION; MAGNESIUM (+2); POTASSIUM	W	00409767009	Enhanced
801357	00338017904	PLASMA-LYTE-148	SOLN	27MEQ/L; 98ME/QL; 23MEQ/L; 3MEQ/L; 5MEQ/L; 140MEQ/L	2	5	0			0		0	VITAMINS, HEMATINICS / ELECTROLYTES	MISCELLANEOUS NUTRITION PRODUCTS	VITAMINS, HEMATINICS / ELECTROLYTES	MISCELLANEOUS NUTRITION PRODUCTS	0						IV	ACETATE; CHLORIDE ION; GLUCONATE ANION; MAGNESIUM (+2); POTASSIUM	W	00338017904	Enhanced
801112	00338022104	PLASMA-LYTE A	SOLN	27MEQ/L; 98ME/QL; 23MEQL; 3MEQ/L; 5MEQ/L; 140MEQ/L	2	5	0			0		0	VITAMINS, HEMATINICS / ELECTROLYTES	MISCELLANEOUS NUTRITION PRODUCTS	VITAMINS, HEMATINICS / ELECTROLYTES	MISCELLANEOUS NUTRITION PRODUCTS	0						IV	ACETATE; CHLORIDE ION; GLUCONATE ANION; MAGNESIUM (+2); POTASSIUM	W	00338022104	Enhanced
1189668	00338014704	PLASMA-LYTE-56/D5W	SOLN	16ME/QL; 40MEQ/L; 5%; 3MEQ/L; 13MEQ/L; 40MEQ/L	2	5	0			0		0	VITAMINS, HEMATINICS / ELECTROLYTES	MISCELLANEOUS NUTRITION PRODUCTS	VITAMINS, HEMATINICS / ELECTROLYTES	MISCELLANEOUS NUTRITION PRODUCTS	0						IV	ACETATE; CHLORIDE ION; DEXTROSE (ANHYDROUS); MAGNESIUM (+2); POTASSIUM	W	00338014704	Enhanced

801405	00338113004	PREMASOL	SOLN	52ML/GAL; 1760MG/100ML; 880MG/100ML; 34MEQ/L; 1760MG/100ML; 3723MG/100ML; 406MG/100ML; 526MG/100ML; 492MG/100ML; 492MG/100ML; 526MG/100ML; 356MG/100ML; 356MG/100ML; 390MG/100ML; 34MG/100ML; 152MG/100ML	1	2	0			0		0	VITAMINS, HEMATINICS / ELECTROLYTES	MISCELLANEOUS NUTRITION PRODUCTS	VITAMINS, HEMATINICS / ELECTROLYTES	MISCELLANEOUS NUTRITION PRODUCTS	0						IV	ACETATE; ALANINE; ARGININE; CHLORIDE ION; GLYCINE; HISTIDINE; ISOLEUCINE; LEUCINE; LYSINE; METHIONINE; PHENYLALANINE; PROLINE (L-PROLINE); THREONINE; TRYPTOPHAN; TYROSINE; VALINE	Y	00338113004	Enhanced
801398	00338113103	PREMASOL	SOLN	56ML/GAL; 320MG/100ML; 730MG/100ML; 190MG/100ML; 3MEQ/L; 20MG/100ML; 220MG/100ML; 290MG/100ML; 490MG/100ML; 490MG/100ML; 200MG/100ML; 290MG/100ML; 410MG/100ML; 230MG/100ML; 5MEQ/L; 15MG/100ML; 250MG/100ML; 120MG/100ML; 140MG/100ML; 470MG/100ML	2	5	0			0		0	VITAMINS, HEMATINICS / ELECTROLYTES	MISCELLANEOUS NUTRITION PRODUCTS	VITAMINS, HEMATINICS / ELECTROLYTES	MISCELLANEOUS NUTRITION PRODUCTS	0						IV	ACETATE; ALANINE; ARGININE; ASPARTIC ACID; CHLORIDE ION; CYSTEINE; GLUTAMIC ACID HYDROCHLORIDE; GLYCINE; HISTIDINE; ISOLEUCINE; LEUCINE; LYSINE; METHIONINE; PHENYLALANINE; PROLINE (L-PROLINE); SERINE; SODIUM (+1); TAURINE; THREONINE; TRYPTOPHAN; TYROSINE; VALINE	W	00338113103	Enhanced
801417	00264191507	PROCALAMINE	SOLN	47ML/GAL; 210MG/100ML; 260MG/100ML; 3MEQ/L; 41ME/L; 20MG/100ML; 420MG/100ML; 85MG/100ML; 210MG/100ML; 270MG/100ML; 220MG/100ML; 5MEQ/L; 152MG/100ML; 170MG/100ML; 7MMOL/EL; 24ME/L; 340MG/100ML; 180MG/100ML; 35MEQ/L; 120MG/100ML; 46MG/100ML; 200MG/100ML	2	5	0			0		0	VITAMINS, HEMATINICS / ELECTROLYTES	MISCELLANEOUS NUTRITION PRODUCTS	VITAMINS, HEMATINICS / ELECTROLYTES	MISCELLANEOUS NUTRITION PRODUCTS	0						IV	ACETATE; ALANINE; ARGININE; CALCIUM CHLORIDE ION; CYSTEINE; GLYCINE; HISTIDINE; ISOLEUCINE; LEUCINE; LYSINE; MAGNESIUM (+2); METHIONINE; PHENYLALANINE; PHOSPHATE; POTASSIUM (+1); PROLINE (L-PROLINE); SERINE; SODIUM (+1); THREONINE; TRYPTOPHAN; VALINE	W	00264191507	Enhanced
801648	00338064406	TRAVASOL	SOLN	52ML/GAL; 1760MG/100ML; 880MG/100ML; 34MEQ/L; 1760MG/100ML; 3723MG/100ML; 406MG/100ML; 526MG/100ML; 492MG/100ML; 492MG/100ML; 526MG/100ML; 356MG/100ML; 356MG/100ML; 390MG/100ML; 34MG/100ML; 152MG/100ML	1	2	0			0		0	VITAMINS, HEMATINICS / ELECTROLYTES	MISCELLANEOUS NUTRITION PRODUCTS	VITAMINS, HEMATINICS / ELECTROLYTES	MISCELLANEOUS NUTRITION PRODUCTS	0						IV	ACETATE; ALANINE; ARGININE; CHLORIDE ION; GLYCINE; HISTIDINE; ISOLEUCINE; LEUCINE; LYSINE; METHIONINE; PHENYLALANINE; PROLINE (L-PROLINE); THREONINE; TRYPTOPHAN; TYROSINE; VALINE	Y	00338064406	Enhanced
1189640	00264934155	TROPHAMINE	SOLN	97ML/GAL; 0.54GM/100ML; 1.2GM/100ML; 0.32GM/100ML; 0; 0; 0.5GM/100ML; 0.36GM/100ML; 0.48GM/100ML; 0.82GM/100ML; 1.4GM/100ML; 1.2GM/100ML; 0.34GM/100ML; 0.48GM/100ML; 0.68GM/100ML; 0.38GM/100ML; 5MEQ/L; 0.025GM/100ML; 0.42GM/100ML; 0.2GM/100ML; 0.24GM/100ML; 0.78GM/100ML	2	5	0			0		0	VITAMINS, HEMATINICS / ELECTROLYTES	MISCELLANEOUS NUTRITION PRODUCTS	VITAMINS, HEMATINICS / ELECTROLYTES	MISCELLANEOUS NUTRITION PRODUCTS	0						IV	ACETATE; ALANINE; ARGININE; ASPARTIC ACID; CHLORIDE ION; CYSTEINE; GLUTAMIC ACID; GLYCINE; HISTIDINE; ISOLEUCINE; LYSINE ACETATE; METHIONINE; PHENYLALANINE; PROLINE (L-PROLINE); SERINE; SODIUM (+1); TAURINE; THREONINE; TRYPTOPHAN; TYROSINE; VALINE	W	00264934155	Enhanced
1189645	00264936155	TROPHAMINE	SOLN	0; 0.32GM/100ML; 0.73GM/100ML; 0.19GM/100ML; 0.0142M/100ML; 0.22GM/100ML; 0.29GM/100ML; 0.49GM/100ML; 0.3GM/100ML; 0.84GM/100ML; 0.49GM/100ML; 0.2GM/100ML; 0.29GM/100ML; 0.41GM/100ML; 0.23GM/100ML; 0.05GM/100ML; 0.015GM/100ML; 0.25GM/100ML; 0.12GM/100ML; 0.14GM/100ML; 0.47GM/100ML	2	5	0			0		0	VITAMINS, HEMATINICS / ELECTROLYTES	MISCELLANEOUS NUTRITION PRODUCTS	VITAMINS, HEMATINICS / ELECTROLYTES	MISCELLANEOUS NUTRITION PRODUCTS	0						IV	ACETIC ACID; ALANINE; ARGININE; ASPARTIC ACID; CYSTEINE; GLYCINE; HISTIDINE; ISOLEUCINE; L-GLUTAMIC ACID; LEUCINE; LYSINE; METHIONINE; PHENYLALANINE; PROLINE (L-PROLINE); SERINE; SODIUM METABISULFITE; TAURINE; THREONINE; TRYPTOPHAN; TYROSINE; VALINE	W	00264936155	Enhanced
797463	60258017609	PRENATABS OBN	TABS	120MG; 200MG; 400UNIT; 9MCG; 1MG; 26MG; 20MG; 150MCG; 3MG; 3MG; 3MG; 30UNIT; 15MG	1	2	0			0		0	VITAMINS, HEMATINICS / ELECTROLYTES	VITAMINS / HEMATINICS	VITAMINS, HEMATINICS / ELECTROLYTES	VITAMINS / HEMATINICS	0						OR	ASCORBIC ACID; CALCIUM CARBONATE; CHOLECALCIFEROL; CYANOCOBALAMIN; FOLIC ACID; IRON CARBONYL;	Y	60258017609	Enhanced
313043	10267164101	SODIUM FLUORIDE	TABS	1MG	1	2	0			0		0	VITAMINS, HEMATINICS / ELECTROLYTES	VITAMINS / HEMATINICS	VITAMINS, HEMATINICS / ELECTROLYTES	VITAMINS / HEMATINICS	0						OR	SODIUM FLUORIDE	Y	10267164101	Enhanced

Exhibit F

Self-Funded Proposal
Proposed Deviations

F1 Service Agreement Deviations
F2 RFP Deviations
F3 Redline ASA

Plan on the best fit.

SANFORD HEALTH PLAN

Appendix F

Proposers are required to submit deviations in two parts and under separate cover with their proposals using the exhibits that follow:

1. Item F1 – Contract/ASA deviations and exceptions must be described in detail, and include proposed alternative language.
2. Item F2 - Deviations from other RFP requirements must also be described in detail and submitted with your proposal.

   Use the exhibits provided in the following pages to submit specific deviations.

   In addition, proposers must submit:

3. Item F3 – Submit the redline version of the sample contract/ASA with your proposal reflecting the deviations identified in your response to Exhibit F1. Note that electronic and hard copy formats must be submitted with the cost proposal as described earlier in the RFP.

Proposal Deviations

Instructions:
Vendors must complete and submit two separate proposal deviations worksheets. Item F1 for exceptions and suggested alternatives to the terms and provisions in the sample contract/ASA and Exhibit F2 for deviations to other RFP requirements (plan designs, administration, etc.). Failure to include this information with your proposal may exclude your organization from further consideration. As noted in Item F3, vendors are also required to submit a redline version of the ASA that reflects the deviations and suggested alternatives noted below (as outlined in Section III., Proposal Contents, of the RFP).

Appendix F, Item F1 – Proposal Deviations to Sample Contract/ASA

Please complete the following worksheet for any and all deviations and exceptions to the required contract language and provisions as outlined in the sample contract provided with this RFP. Suggested alternatives must be included. Vendors should add additional pages as needed.

NDPERS RFP SAMPLE CONTRACT/ASA DEVIATIONS AND EXCEPTIONS		
Contract Section/ Number	**Description/Contract Language**	**Suggested/Proposed Alternative Language or Provision**
3.7	Claims Processing location	Removed reference to claims processing center as Fargo, ND.
3.8	BlueCard Claims processing	Clarified that Sanford Health Plan will process claims from non-participating providers.
3.13	Conversion Policies	Clarified that an individual policy will be offered upon loss of group coverage.
3.18 (a)	Provider Network	Sanford Health Plan shall ensure PPO arrangements compared to existing SHP participation and reimbursement arrangements, to verify that PPO arrangements provide for payments which are comparable to the existing arrangements.
9 A and B	Provider Network Discount	Clarified the national and regional PPO network discount programs.
7	Final Accounting	SHP shall insert our specific numbers upon finalist selection process.
11.11	Certificates of Creditable Coverage	Will be sent pursuant to state and/or federal law.
Federal and State Regulations	Affordable Care Act and State Mandates	Sanford Health Plan must reserve the ability to amend and implement its plan benefits and documents pursuant to any changes in state or federal laws that are provided or developed following submission of our response to the RFP. SHP reserves the right to adjust premium rates, with a 90 day notice, for any taxe and/or benefits changes imposed by the state of federal government that affects NDPERS health plan benefits.

Appendix F, Item F2 – All Other Proposal Deviations

Please complete the following worksheet for all deviations and exceptions to the RFP requirements. Suggested alternatives or solutions must be included. Vendors should add additional pages as needed.

NDPERS RFP ALL OTHER DEVIATIONS AND EXCEPTIONS	
Specific Deviation	**Proposed Alternative/Solution**
Administering a 20% payment reduction to nonparticipating health care providers within the state of ND would be a manual process.	Sanford Health Plan proposes a manual process for the 20% payment reduction with the overall goal of reducing the number of nonparticipating providers in NDPERS program by securing competitive discounts state-wide.

Appendix F, Item F3 – Redline version of contract/ASA

North Dakota Public Employees Retirement System

July 1, 2013 through June 30, 2015

DRAFT

ADMINISTRATIVE SERVICE AGREEMENT

This Administrative Service Agreement ("Agreement") is entered into between North Dakota Public Employees Retirement System (NDPERS) ("the Plan Sponsor"), North Dakota Public Employees Retirement System (NDPERS) ("the Plan Administrator") and Blue Cross Blue Shield of North Dakota ("BCBSND") the terms of which are as follows:

The Plan Sponsor has established and maintains a fully insured group health plan (the Plan) which provides, among other things, various benefits to Members in the Plan, as set forth in the Certificate of Insurance provided to plan Members. The Plan Administrator is the administrator of the Plan established through this Agreement.

In consideration of payment of required premium and acceptance of membership applications, BCBSND enters into this Agreement with the Plan Sponsor and the Plan Administrator. BCBSND agrees to provide plan Members the benefits set forth in the Certificate of Insurance, in accordance with its terms and conditions. This Agreement also includes the Certificate of Insurance, membership applications, Identification Cards, Benefit Plan Attachments and any endorsements, supplements, attachments, addenda or amendments.

1. EFFECTIVE DATE AND PLAN YEAR

This Agreement is effective July 1, 2015~~3~~ through June 30, 2017~~5~~, unless terminated as provided.

For the purposes of the costs of any and all benefits and services extended through this Benefit Plan, including the implementation of any benefit changes required under federal or state law, the Plan Administrator agrees that the Plan Year shall commence on July 1, unless it is terminated by one of the parties as specified in Section 8. TERM AND TERMINATION OF AGREEMENT.

2. DEFINITIONS

This section defines the terms used in this Agreement. These terms will be capitalized throughout this Agreement when referred to in the context defined.

A. **BENEFIT PAYMENTS** - payments of benefits under the Plan.

B. **CERTIFICATE OF CREDITABLE COVERAGE** - a certificate disclosing information relating to an individual's creditable coverage under a health care benefit program for purposes of reducing any preexisting condition waiting period imposed by any group health plan coverage.

C. **CLAIM** - notification in a form acceptable to BCBSND that service has been provided or furnished to a Member.

D. **DRG** - shall mean diagnostic related groups.

E. **DATA AGGREGATION** - the combining of Protected Health Information that BCBSND creates or receives for or from the Plan and for or from other health plans or health care providers for which BCBSND is acting as a business associate to permit data analyses that relate to the Health Care Operations of the Plan and those other health plans or providers.

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F. **FEES AND CHARGES** - the amounts the Plan Administrator must pay BCBSND for the administrative services described in Section 6. FEES AND CHARGES.

G. **HEALTH CARE OPERATIONS** - any of the activities of a health plan to the extent the activities relate to functions that make it a health plan.

H. **HEALTH CARE PROVIDER** - any eligible provider that has provided care, diagnosis, or treatment to or for a Member for which benefits are sought under the Plan.

I. **INELIGIBLE PERSON** - any person, firm, or corporation that has received benefits or on whose behalf benefits have been paid but for whom benefits are not payable under the terms of the Plan.

J. **MEMBER** - the Subscriber and any dependent of a Subscriber or any other person designated by a Subscriber or by the terms of the Plan who is or may become entitled to a benefit under the Plan. The term shall also include any proprietor, partner, or owner of the Plan Sponsor, if any, who is designated by the terms of the Plan who is or may become entitled to a benefit under the Plan. In no case shall the term Member include any person not otherwise entitled to coverage under the terms of the Plan.

For the purposes of determining the various benefits and restrictions or other limitations thereto made available to a Member under the terms of this Agreement, all benefits under any Plan option or tier (and any restrictions or other limitations thereto) made available to or received by a Member shall accumulate toward that Member's benefits and any restrictions and other limitations thereto.

K. **PAYMENT** - activities undertaken to obtain premiums, determine or fulfill coverage and benefits, or obtain or provide reimbursement for health care services.

L. **PLAN ADMINISTRATOR** – **NORTH DAKOTA PUBLIC EMPLOYEES RETIREMENT SYSTEM.** North Dakota Public Employees Retirement System (NDPERS) is the administrator of the Plan with all of the duties and responsibilities applicable to plan administrators, including but not necessarily limited to compliance with any and all administrative, reporting, and disclosure requirements. BCBSND is not the Plan Sponsor or the Plan Administrator of the Plan and is not responsible for any of the duties assigned to the Plan Sponsor or the Plan Administrator by the terms of the Plan, or by this Agreement.

M. **PROTECTED HEALTH INFORMATION (PHI)** - individually identifiable health information, including summary and statistical information, collected from or on behalf of a Member that is transmitted by or maintained in electronic media, or transmitted or maintained in any other form or medium and that:

1. is created by or received from a Health Care Provider, health care employer, or health care clearinghouse;
2. relates to a Member's past, present or future physical or mental health or condition;
3. relates to the provision of health care to a Member;
4. relates to the past, present, or future payment for health care to or on behalf of a Member; or
5. identifies a Member or could reasonably be used to identify a Member.

Educational records and employment records are not considered PHI under federal law.

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N. **SECURITY INCIDENT** - any attempted or successful unauthorized access, use, disclosure, modification, or destruction of a Member's electronic PHI or interference with BCBSND's system operations in BCBSND's information systems.

O. **STANDARD TRANSACTIONS** - health care financial or administrative transactions conducted electronically for which standard data elements, code sets and formats have been adopted in accordance with federal or state law.

P. **SUBSCRIBER** - any employee of the Plan Sponsor who is or may become eligible to receive a benefit under the Plan. The term includes all common law employees and possibly proprietors, partners, or other owners who work for the Plan Sponsor and are otherwise entitled to coverage under the Plan. Notwithstanding the above, in no case shall the term Subscriber include any person not otherwise entitled to coverage under the terms of the Plan.

Q. **SUCCESSFUL SECURITY INCIDENTS** - Security Incidents that result in unauthorized access, use, disclosure, modification, or destruction of information or interference with system operations.

R. **UNSUCCESSFUL SECURITY INCIDENTS** - Security Incidents that do not result in unauthorized access, use, disclosure, modification, or destruction of information or interference with system operations.

3. **BCBSND SHALL:**

3.1 Establish a membership record for existing Members containing information as provided by NDPERS.

3.2 Provide Identification Cards, Certificates of Insurance/Summary Plan Descriptions and applications for enrollment for each Subscriber.

3.3 Provide the Health Plan Performance Guarantees, as outlined in Exhibit B.

3.4 Upon enrollment under the NDPERS Benefit Plan, BCBSND will provide written notice to covered employees and their covered spouses of their continuation rights pursuant to the Consolidated Omnibus Budget Reconciliation Act. (“COBRA”).

3.5 Receive applications for enrollment for late entrants.

3.6 Provide Managed Benefits services in accordance with appropriate licensure and certification requirements including a dedicated staff person.

3.7 Provide a dedicated service unit to adjudicate all claims and respond to Member's inquiries. Provide toll-free Member and Health Care Provider service lines between the hours of 8 AM and 5:00 PM CST ~~or CDT at the home office in Fargo, ND, as appropriate~~. A toll-free managed benefits line for Health Care Providers will also be available between the hours of 7:30 AM and 5:30 PM CST or CDT. During nonbusiness hours, answering machine services will be available for managed benefits calls.

3.8 Process claims and inquiries for all members, including claims from non-participating providers. ~~per MTM (Member Touchpoint Measures) for Non-BlueCard claims.~~

3.9 Correspond with the Members and Health Care Providers if additional information is deemed necessary by BCBSND to complete the administrative process.

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3.10 Administer other party liability programs.

3.11 Provide to Members an Explanation of Benefits Statement.

3.12 Provide a procedure for detection of fraud and unlawful activity.

3.13 Offer~~Provide to~~ Members an invididual ~~conversion~~ policy ~~when application is made~~ within 31 days of the termination of enrollment under NDPERS.

3.14 Provide assistance to NDPERS for the conduct of enrollment, servicing and education.

3.15 Provide to NDPERS formal Policy and Procedure guidelines for the conduct of external audits or reviews commissioned by NDPERS.

NDPERS shall provide BCBSND with the scope and requirements of any audit or review prior to the commencement of activities. If a sample of claims is required, BCBSND will provide or NDPERS will select a statistically valid computerized sample of claims, if not prohibited by law, regulation or rule.

NDPERS will provide a copy of the report of all audit or review findings and shall discuss the findings with BCBSND upon discovery to allow further investigation or implementation of corrective action.

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3.16 Provide NDPERS with reporting to include but not limited to:

a. Annual group reporting of membership and utilization by group segments and product.

b. Estimates of future claim reserves and premium to claim ratio.

c. Such other special claims reports as requested from time-to-time by NDPERS, subject to the availability of data and appropriate cost considerations.

d. Interest calculation monthly report.

e. Semi-annual performance objectives as outlined in section 2 of the BCBSND response to question 15 of the RFP.

3.17 Provide NDPERS with claims specific data on a monthly basis on compact disc or other agreed upon medium. This information shall be in a format acceptable to NDPERS and subject to all federal and state laws on confidentiality and open records.

3.18 Provide support to NDPERS for the establishment of a Preferred Provider Network consistent with objectives established by NDPERS.

a. BCBSND will provide technical and administrative advice to NDPERS relative to the appropriateness of PPO arrangements compared to existing Blue Cross Blue Shield participation and reimbursement arrangements, to verify that PPO arrangements provide for payments which comparable to ~~are no greater than~~ the existing arrangements. BCBSND will provide current information regarding Blue Cross Blue Shield participation and reimbursement arrangements in place on a provider-specific basis for comparative purposes.

b. BCBSND will develop jointly with NDPERS a written instrument to be used as the basis for providers participating in the PPO Program.

c. BCBSND will secure provider agreements upon completion of negotiations with providers. Such negotiations will be conducted jointly by BCBSND and NDPERS.

d. BCBSND will enforce strict managed benefits, utilization review and quality assurance criteria to assure attainment of Preferred Provider program objectives.

e. BCBSND will, upon NDPERS direction, terminate a Provider's NDPERS PPO participation agreement in accordance with terms of the agreement, when a PPO Provider is noncompliant with NDPERS policies and procedures. Said policies and procedures shall be documented and communicated to the participating provider prior to implementation.

3.19 Carry over any Deductible and/or Coinsurance Amounts incurred from January 1 to June 30, of the prior contract period.

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4. **NDPERS SHALL:**

4.1 Prepare and distribute monthly billings to participating employers and retirees participating in the Plan. NDPERS shall respond to the participating employers inquiries concerning eligibility rules, billing, etc.

4.2 Prepare monthly eligibility tape by participating employer and premium classification for both active and retired employees and provide the tape to BCBSND to be used for eligibility certification purposes. Along with the eligibility tape, NDPERS will furnish a monthly listing of participants added or terminated during the month. Such listing will reflect the name of the employee, dependents, Social Security Number, the effective date of coverage for a new employee or the termination date of a terminated employee and the coverage classification.

4.3 Provide enrollment forms, obtain completed classifications or addresses, etc. from participants and furnish BCBSND with a copy of the enrollment forms or request for coverage or address changes and retain the original copy. Enrollment forms will include the NDPERS and Blue Cross Blue Shield Service Marks.

4.4 Be responsible for the administration of and compliance with COBRA. BCBSND will forward requests for COBRA participation by membership to NDPERS upon notification.

4.5 Comply with BCBSND's established administrative policies which are reasonable and consistent with the NDPERS Health Plan and the bid specifications agreed to by the parties, including but not limited to: underwriting policies, standard adjudication and Medical Policy Guidelines, Payable Provider Guidelines, Managed Benefits Program Guidelines and claim payment procedures.

4.6 Develop and provide BCBSND the objectives established for the Preferred Provider programs.

4.7 Assume joint responsibility for the determination of provider eligibility and performance criteria in the Preferred Provider programs.

4.8 Be responsible for any systems redesign costs to BCBSND which result from the implementation of any new reimbursement mechanisms not presently in place within BCBSND automated claims payment systems. Those reimbursement mechanisms currently in place include:

Institutional	Professional
Percent of Billed Charges	Percent of Physician Payment Schedule
Percent of DRGs	Percent of Billed Charges
Percent of Per Diems	Capitation
Targeted Cost per Member	Targeted Cost per Member

4.9 Pay premiums to BCBSND according to the schedule in Section 6.

4.10 NDPERS acknowledges that the administration of the Benefit Plan that is the subject of this Agreement may be subject to regulation under federal and/or state law. NDPERS agrees to furnish BCBSND with any and all information necessary to comply with any applicable federal and/or state laws and to certify that this information is accurate. If there are any changes in the employer contribution rate for benefits and services

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available under this Agreement, NDPERS agrees that it is its obligation to provide information related to the change in contribution rates immediately to BCBSND.

5. PRIVACY USE AND DISCLOSURE RESPONSIBILITIES

5.1 RESPONSIBILITIES OF BCBSND

A. Privacy of Protected Health Information (PHI)

1. BCBSND will keep confidential all Claim records and all other PHI that BCBSND creates or receives in the performance of its duties under this Agreement. Except as permitted or required by this Agreement for BCBSND to perform its duties under this Agreement, BCBSND will not use or disclose such Claim information or other PHI without the authorization of the Member who is the subject of such information or as required by law.

2. BCBSND will neither use nor disclose Members' PHI (including any Members' PHI received from a business associate of the Plan) except (1) as permitted or required by this Agreement, (2) as permitted in writing by the Plan Administrator, (3) as authorized by Members, or (4) as required by law.

3. BCBSND will be permitted to use or disclose Members' PHI only as follows:

    a. BCBSND will be permitted to use and disclose Members' PHI (a) for the management, operation and administration of the Plan the Plan Administrator offers Members, and (b) for the services set forth in the Plan, which include Payment Activities, Health Care Operations, and Data Aggregation as these terms are defined under federal law.

        1. BCBSND will be permitted to use Members' PHI as necessary for BCBSND's proper management and administration or to carry out BCBSND's legal responsibilities.

        2. BCBSND will be permitted to disclose Members' PHI as necessary for BCBSND's proper management and administration or to carry out BCBSND's legal responsibilities only if (i) the disclosure is required by law, or (ii) before the disclosure, BCBSND obtains from the entity to which the disclosure is to be made reasonable assurance, evidenced by a written contract, that the entity will hold Members' PHI in confidence, use or further disclose Members' PHI only for the purposes for which BCBSND disclosed it to the entity or as required by law, and notify BCBSND of any instance the entity becomes aware of where the confidentiality of any Members' PHI was breached.

    b. BCBSND will make reasonable efforts in accordance with its written privacy policies and procedures to use, disclose, or request only the minimum necessary amount of Members' PHI to accomplish the intended purpose. BCBSND will make its written privacy policies and procedures available to the Plan Sponsor, upon request.

4. Other than disclosures permitted by Section 5.1(A)3, BCBSND will not disclose Members' PHI to the Plan Administrator or to the Plan's business associate except as directed by the Plan Administrator in writing.

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5. BCBSND will require each subcontractor and agent to which BCBSND is permitted by this Agreement or in writing by the Plan Administrator to disclose Members' PHI to provide reasonable assurance, evidenced by written contract, that such other entity will comply with the same privacy and security obligations with respect to Members' PHI as this Agreement applies to BCBSND.

6. BCBSND will not disclose any Members' PHI to the Plan Sponsor, except as permitted by and in accordance with Section 5.1(A)3.

7. BCBSND will report to the Plan Administrator any use or disclosure of Members' PHI not permitted by this Agreement. BCBSND will make any such report to the Plan Administrator after BCBSND learns of such non-permitted use or disclosure.

8. BCBSND will report to the Plan Administrator attempted or successful unauthorized access, use, disclosure, modification or destruction of a Member's electronic PHI or interference with BCBSND's system operations in BCBSND's information systems ("Security Incident"), of which BCBSND becomes aware. With regard to attempted unauthorized access, use, etc., BCBSND and the Plan Administrator recognize and agree that the significant number of meaningless attempts to, without authorization, access, use, disclose, modify or destroy electronic PHI will make real-time reporting formidable. Therefore, BCBSND and the Plan Administrator agree to the following reporting procedures for Security Incidents that result in unauthorized access, use, disclosure, modification, or destruction of information or interference with system operations ("Successful Security Incidents") and for Security Incidents that do not so result ("Unsuccessful Security Incidents").

   For Unsuccessful Security Incidents, BCBSND and the Plan Administrator agree that this Agreement constitutes notice from BCBSND of any such Unsuccessful Security Incidents. In other words, the Plan Administrator waives any separate notice of Unsuccessful Security Incidents. By way of example, BCBSND and the Plan Administrator consider the following to be illustrative of Unsuccessful Security Incidents when they do not result in unauthorized access, use, disclosure, modification, or destruction of a Member's electronic PHI or interference with an information system:

   1. Pings on BCBSND's firewall,

   2. Port scans,

   3. Attempts to log on to a system or enter a database with an invalid password or username,

   4. Denial-of-service attacks that do not result in a server being taken off-line, and

   5. Malware (e.g., worms, viruses).

   For Successful Security Incidents, BCBSND shall give notice promptly to the Plan Administrator in the event a Member's electronic PHI was compromised.

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9. Disposition of Protected Health Information

   The parties agree that upon termination, cancellation, expiration or other conclusion of this Agreement, BCBSND will return or destroy all PHI received or created by BCBSND on the Plan Administrator's behalf as soon as feasible. Due to various regulatory and legal requirements, the Plan Administrator acknowledges that immediate return or destruction of all such information is not feasible. BCBSND agrees that upon conclusion of this Agreement for any reason, it will use or disclose the PHI it received or created on the Plan's behalf only as necessary to meet BCBSND's regulatory and legal requirements and for no other purposes unless permitted in writing by the Plan Administrator. BCBSND will destroy PHI received or created by BCBSND on the Plan Administrator's behalf that is in BCBSND's possession under such circumstances and upon such schedule as BCBSND deems consistent with its regulatory and other legal obligations.

   These responsibilities agreed to by BCBSND and related to protecting the privacy and safeguarding the security of PHI, as well as any terms directly related thereto, shall survive the termination of this Agreement and, where applicable, shall govern BCBSND's receipt, use or disclosure of PHI pursuant to the terms of this Agreement.

B. **Access, Amendment and Disclosure Accounting for Protected Health Information**

1. Upon the Plan Administrator's written request, BCBSND will make available for inspection and obtaining copies by the Plan Administrator, or at the Plan Administrator's direction by the Member (or the Members' representative), any PHI about the Member created or received for or from the Plan Administrator in BCBSND's custody or control so the Plan Administrator may meet its access obligations under federal law.

2. Upon receipt of a written request from the Plan Administrator, or at the Plan Administrator's direction by the Member (or the Members' representative), BCBSND will amend or permit the Plan Administrator access to amend any portion of the PHI created or received for or from the Plan Administrator in BCBSND's custody or control, so the Plan Administrator may meet its amendment obligations under federal law.

3. So the Plan Administrator may meet its disclosure accounting obligations under federal law or state law, BCBSND will do the following:

   a. BCBSND will record each disclosure of Members' PHI which is not excepted from disclosure accounting under Section 5.1(B)3.b, that BCBSND makes to the Plan Administrator or to a third party.

      The information about each disclosure that BCBSND must record ("Disclosure Information") is (i) the disclosure date, (ii) the name and (if known) address of the person or entity to whom BCBSND made the disclosure, (iii) a brief description of the PHI disclosed, and (iv) a brief statement of the purpose of the disclosure.

      For repetitive disclosures of Members' PHI that BCBSND makes for a single purpose to the same person or entity (including the Plan Administrator),

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BCBSND may record (i) the disclosure information for the first of these repetitive disclosures, (ii) the frequency, periodicity or number of these repetitive disclosures, and (iii) the date of the last of these repetitive disclosures.

b. BCBSND will not be required to record disclosure information or otherwise account for disclosures of Members' PHI that this Agreement or the Plan Administrator in writing permits or requires:

(1) for Payment Activities or Health Care Operations,
(2) to the Member who is the subject of the PHI or to that Members' personal representative,
(3) to persons involved in that Members' health care or payment for health care, as provided under federal law,
(4) for notification for disaster relief purposes or national security or intelligence purposes as provided under federal law,
(5) to law enforcement officials or correctional institutions regarding inmates,
(6) for incidental uses or disclosures,
(7) as part of a limited data set in accordance with federal law,
(8) that occurred prior to the HIPAA Privacy Compliance Date,
(9) pursuant to a valid authorization.

c. BCBSND will have available for the Plan Administrator the disclosure information required by Section 5.1(B)3.a. for the six (6) years immediately preceding the date of the Plan Administrator's request for the disclosure information.

d. Upon the Plan Administrator's written request, BCBSND will make available to the Plan Administrator, or at the Plan Administrator's direction to the Member (or the Member's representative), disclosure information regarding the Member so the Plan Administrator may meet its disclosure accounting obligations under federal law.

C. **Information Safeguards**

1. BCBSND will maintain reasonable and appropriate administrative, technical and physical safeguards to protect the privacy of Member PHI. The safeguards must reasonably protect Member PHI from any intentional or unintentional use or disclosure in violation of federal law and limit incidental uses or disclosures made pursuant to a use or disclosure otherwise permitted by this Agreement.

2. BCBSND will implement administrative, technical, and physical safeguards that reasonably and appropriately protect the confidentiality, integrity, and availability of electronic PHI BCBSND creates, receives, maintains, or transmits on behalf of the Plan Administrator as required by federal law.

D. **Inspection of Books and Records**

BCBSND will make its internal practices, books, and records relating to its use and disclosure of PHI created or received for or from the Plan Administrator available to the Plan Administrator and to the U.S. Department of Health and Human Services to determine compliance with federal law or this Agreement.

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E. BCBSND will prepare and distribute a notice of privacy practices appropriate for the Plan to meet its notice obligations under federal law. The Plan Administrator authorizes BCBSND to disclose the minimum necessary PHI to the Plan Sponsor for plan administration functions specified in the Plan documents as amended.

F. **Information Privacy and Safeguard Provisions Survive Termination of Agreement**

These responsibilities agreed to by BCBSND and related to protecting the privacy of PHI, as well as any terms directly related thereto, shall survive the termination of this Agreement and where applicable, shall govern BCBSND's receipt and use of PHI obtained pursuant to the terms of this Agreement.

5.2 RESPONSIBILITIES OF THE PLAN SPONSOR

A. The Plan Sponsor retains full and final authority and responsibility for the Plan and its operation. BCBSND is empowered to act on behalf of the Plan only as stated in this Agreement or as mutually agreed in writing by the Plan Sponsor and BCBSND.

B. Except with respect to services provided by BCBSND set forth in this agreement, the Plan Sponsor will have the sole responsibility for and will bear the entire cost of compliance with all federal, state and local laws, rules, and regulations concerning the privacy of PHI, including any licensing, filing, reporting, and disclosure requirements, that may apply to the Plan. BCBSND will have no responsibility for or liability with respect to the Plan's compliance or noncompliance with any applicable federal, state, or local law, rule, or regulation, that the Plan Sponsor is responsible for under this subsection.

C. By executing this Agreement, the Plan Sponsor certifies to BCBSND that it has amended the Plan documents to incorporate the provisions required by and under federal law, and agrees to comply with the Plan Administrator's plan documents as amended.

BCBSND may rely on Plan Sponsor's certification and Plan Administrator's written authorization, and will have no obligation to verify (1) the Plan Administrator's plan documents have been amended to comply with the requirements of federal law or this Agreement or (2) the Plan Sponsor is complying with the Plan Administrator's plan document as amended.

D. For any high deductible health plan offered by the Plan Sponsor, the Plan Sponsor assumes sole responsibility for determining whether the Plan qualifies as a high deductible health plan under Section 223(c)(2) of the U.S. Internal Revenue Code. BCBSND MAKES NO WARRANTY, EXPRESS OR IMPLIED, INCLUDING, BUT NOT LIMITED TO, ANY IMPLIED WARRANTIES OF MERCHANTABILITY OR FITNESS FOR A PARTICULAR PURPOSE REGARDING THE PLAN.

For any high deductible health plan offered by the Plan Sponsor, BCBSND does not provide legal or tax advice, and expressly disclaims responsibility for determining, on behalf of any individual or group, the legal and tax implications of: (1) establishing a health savings account; (2) eligibility for a health savings account; (3) the contributions made to a health savings account; (4) the deductibility of contributions to a health savings account; and (5) withdrawals from a health savings account and related taxation.

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6. **FEES AND CHARGES:**

6.1 In consideration of the fully insured contract under this Agreement, BCBSND agrees to accept the following provisions and premium rates for the Effective Date of this Agreement. See attached Premium Rate Structure Table.

6.2 BCBSND and NDPERS agree to the Health Plan Performance Guarantees, as outlined in the attached Exhibit B.

6.3 NDPERS will pay BCBSND, on or before the last day of each month, premium income based on the amount identified in Column 6 of the attached Table for type of contract for that month.

6.4 NDPERS will maintain a deposit of $3,000,000 in a Cash Reserve Account held by BCBSND until the settlement of the biennium. This Cash Reserve Account shall earn interest at a rate to be determined monthly, based on US Treasury Notes quoted by the Wall Street Journal. The monthly rate will be established at the close of the first trading day each month based on the closing yield to maturity of US Treasury Notes maturing 24 months hence. If there are multiple notes for that maturity, the rate will be based on an average. If there are no notes with that maturity, the next subsequent maturity will be used.

6.5 BCBSND will retain any surplus funds from the amounts identified in Column 4 of the attached table. Surplus funds retained by BCBSND shall earn interest at a rate to be determined monthly, based on US Treasury Notes quoted by the Wall Street Journal. The monthly rate will be established at the close of the first trading day each month based on the closing yield to maturity of US Treasury Notes maturing 24 months hence. If there are multiple notes for that maturity, the rate will be based on an average. If there are no notes with that maturity, the next subsequent maturity will be used.

Surplus funds described in the above section 6.5 not used by BCBSND to pay NDPERS Health Plan incurred claims plus retention will be subject to the Final Accounting as described in Section 7 of this Agreement.

6.6 Payments made pursuant to Section 6.3 and pursuant to Column 5 of the attached Table will be handled as follows:

BCBSND will dispense to Regional Advantage Services LLC, Medicare Part D premiums identified in Column 5 of the attached Table for type of contract for that month. Interest will not be paid on this account.

Funds described in section 6.6 are not subject to final accounting as described in section 7 of this Agreement.

6.7 BCBSND reserves the right to adjust premium rates, with a 90-day notice, for any changes in taxes and/or benefits imposed upon BCBSND for the NDPERS health plan by any Federal, State or Local government authority that impact BCBSND expenses and/or NDPERS health plan benefits.

7. **FINAL ACCOUNTING**

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7.1 A continual accounting of NDPERS Health Plan experience will take place during the 2013-2015 biennium. Monthly reports of earned income less incurred claims and retention will be produced during the biennium and the twenty-four months following the biennium.

7.2 Within 31 days of 12 months after the end of the biennium (by July 31, 2016) BCBSND will provide an accounting which will result in an initial settlement of the biennium agreement as follows:

1. Earned Premium Income during the Biennium
2. Plus interest on Surplus Funds
3. Less Claims Incurred during the Biennium and Paid July 1, 2013 through June 30, 2016
4. Less Estimated Claims Incurred and Unpaid at June 30, 2016
5. Less Administrative Expense during the Biennium ($28.36 per contract per month)
6. Less Conversion Cost during the Biennium ($1.92 per Non-Medicare contract per month)
7. Less Service Charge during the Biennium ($9.58 per Non-Medicare contract per month and $2.16 per Medicare contract per month)
8. Less Disease Management Program fees during the Biennium ($1.40 per contract per month)
9. Less Wellness Program fees during the Biennium ($4.26 per contract per month)
10. Less PPACA fees during the Biennium ($21.54 per Non-Medicare contract per month)
11. If 1+2-3-4-5-6-7-8-9-10 of 7.2 is positive, the lesser of 50% of this amount or $1.5 million is retained by BCBSND. The remainder equals Refund paid to NDPERS.
12. If 1+2-3-4-5-6-7-8-9-10 of 7.2 is negative, the lesser of 50% of this amount or $3.0 million will be refunded by NDPERS to BCBSND.

Claims incurred and unpaid will be estimated by the mean of the latest three actual IBNR claims (Incurred But Not Reported) amounts for equivalent periods in the NDPERS history.

7.3 Within 31 days of 24 months after the end of the biennium (by July 31, 2017), BCBSND will provide an accounting, which will result in a final settlement of the biennium agreement as follows:

1. Earned Premium Income during the Biennium
2. Plus interest on Surplus Funds
3. Less Claims Incurred during the Biennium and Paid July 1, 2013 through June 30, 2017
4. Less Administrative Expense during the Biennium ($28.36 per contract per month)
5. Less Conversion Cost during the Biennium ($1.92 per Non-Medicare contract per month)
6. Less Service Charge during the Biennium ($9.58 per Non-Medicare contract per month and $2.16 per Medicare contract per month)
7. Less Disease Management Program fees during the Biennium ($1.40 per contract per month)
8. Less Wellness Program fees during the Biennium ($4.26 per contract per month)
9. Less PPACA fees during the Biennium ($21.54 per Non-Medicare contract per month)
10. Less any refund paid to NDPERS at initial settlement on July 31, 2016
11. If 1+2-3-4-5-6-7-8-9-10 of 7.3 is positive, the lesser of 50% of this amount or $1.5 million is retained by BCBSND for the July 1, 2013 through June 30, 2015 biennium. The remainder equals Refund paid to NDPERS. The maximum retained by BCBSND for the biennium is 50% of $3.0 million of gain.

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12. If 1+2-3-4-5-6-7-8-9-10 of 7.3 is negative, the lesser of 50% of this amount or $3.0 million will be refunded by NDPERS to BCBSND. BCBSND retains all losses beyond $6.0 million and any estimated gains previously distributed to NDPERS are subject to refund back to BCBSND based on this final settlement. The maximum loss NDPERS is subject to is 50% of $6.0 million of loss.

The language in red was filed with the Insurance Department 6-2-14 Still waiting for approval.7-8-14

7.4 Within 31 days of 12 months after the end of the biennium (by July 31, 2016), BCBSND will provide an accounting of PPACA fees. This adjustment is in addition to the settlement calculated in 7.2. The calculation will be as follows:

1. Estimated PPACA fees paid by NDPERS during the biennium ($21.54 per Non-Medicare contract per month)

2. Less actual PPACA fees paid by BCBSND for the biennium including:

   a. Patient Centered Outcomes Research Tax will be calculated based on actual average Non-Medicare Members at the rate of $2.00 per Member per year for July 1, 2013 through June 30, 2014, and the updated amount for the following year (unknown at this time) for July 1, 2014 through June 30, 2015.

   b. Transitional Reinsurance Assessment will be calculated based on actual average Non-Medicare Members at the rate of $5.25 per Member per month ($63.00 annual) for January 1, 2014 through December 31, 2014, and $3.67 per Member per month ($44.00 annual) for January 1, 2015 through June 30, 2015.

   c. Health Insurer Tax will be calculated using NDPERS' portion of the premium used to calculate the bill from the Federal Government, grossed up by 20% for Federal Income Tax. The 2014 bill is based on 2013 premium. The 2015 bill is based on 2014 premium, and only half of that amount will be charged to NDPERS since this biennium ends June 30, 2015. (Illustrative Example for 2014 payment: Assume BCBSND receives a $10 million HIT tax bill in 2014 that is based on $1 billion of 2013 premium. If NDPERS contributed $200 million to the $1 billion of 2013 premium, then NDPERS would be charged 20% of $12 million – the $10 million HIT tax bill grossed up by 20% for Federal Tax. The same approach would be taken for 2015 except that only half of the amount would be used to account for half of the year.)

3. If 1-2 of 7.4 is positive, the remainder equals Refund paid to NDPERS. If 1-2 of 7.4 is negative, the remainder will be refunded by NDPERS to BCBSND.

4. The parties agree that the above identified PPACA fees are subject to modification by the respective federal agencies at any time. If the PPACA fees are so modified, the modifications shall automatically be incorporated into this Agreement without further action by the parties.

8. TERM AND TERMINATION OF AGREEMENT

8.1 The term of this Agreement shall be for a two year period from July 1, 2015~~3~~ through June 30, 2017~~5~~.

8.2 This Agreement may be terminated by mutual agreement of both parties, upon 60 days notice, in writing.

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Either party may terminate this Agreement effective 90 days following delivery of written notice to the other party, or at such later date as may be stated in the notice, under any of the following conditions:

a. If funding from federal, state or other sources is not obtained and continued at levels sufficient to allow for purchase of the services or supplies in the indicated quantities or term. The Agreement may be modified by agreement of the parties in writing to accommodate a reduction of funds.

b. If federal or state laws, rules or regulations are modified, changed or interpreted in such a way that the services are no longer allowable or appropriate for purchase under this Agreement or are no longer eligible for the funding proposed for payments authorized by this Agreement.

c. If any license, permit or certificate required by law, rule or regulation, or by the terms of this Agreement, is for any reason denied, revoked, suspended or not renewed.

Any such termination of this Agreement shall be without prejudice to any obligations or liabilities of either party already accrued prior to such termination.

d. In the event of a breach by either party, other than for nonpayment of premium, the other party may terminate this Agreement by written notice to the breaching party. The breaching party has 31 days to fully cure the breach. If the breach is not cured within 31 days after written notice, this Agreement will immediately terminate.

9. PROVIDER NETWORK DISCOUNT ~~INTER-PLAN~~ PROGRAMS

SHP~~BCBSND~~ has a variety of relationships with regional and national PPO discount ~~other Blue Cross and/or Blue Shield Licensees referred to generally as "Inter-Plan~~ Programs~~"~~ Whenever a Member accesses health care services outside the geographic area SHP~~BCBSND~~ serves, the claim for those services may be processed through one of these discount ~~Inter-Plan~~ Programs and presented to BCBSND for payment in accordance with the rules of the ~~Inter-Plan~~ discount p~~P~~rograms policies then in effect. The discount ~~Inter-Plan~~ p~~P~~rograms available to Members under this Agreement are described generally below.

Typically when accessing care outside the SHP ~~BCBSND~~ service area, a Member will obtain care from health care providers that have a contractual agreement (i.e., "participating agreement") with the discount program~~local Blue Cross and/or Blue Shield Licensee in that other geographic area ("Host Blue")~~. In some instances, a Member may obtain care from health care providers who have not entered into a "participating agreement" with SHP directly~~a Host Blue~~. SHP~~BCBSND~~ payment practices in both instances are described below.

A. Regional and National Network Discount ~~BlueCard®~~ Program

~~Under the BlueCard Program, w~~When Members access health care services outside ~~within~~ the geographic area served by SHP, SHP ~~a Host Blue, BCBSND will remain responsible to the Group for fulfilling BCBSND's contractual obligations. However, in accordance with applicable Inter-Plan Programs policies then in effect, the Host Blue will be responsible for providing such services as contracting and~~ will adjudicate claims ~~handling substantially all interactions~~ with the health care providers who have entered into a "participating agreement" with anyone of SHP's discount network programs~~it~~ (participating health care providers). The financial terms of the Regional or National Network Discount~~BlueCard~~ Program are described generally below. Individual circumstances may arise that are not directly covered by this description; however, in those instances, SHP~~BCBSND~~'s action will be consistent with the spirit of this description.

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Liability Calculation Method Per Claim - The calculation of Member liability on claims for Covered Services processed through the Regional or National Network DiscountBlueCard Program will be based on the lower of the billed charges of the Host Blue's participating health care provider or the negotiated price made available to SHPBCBSND by the Regional or National Network Discount programHost Blue.

The Regional or National Network discount programHost Blues may use various methods to determine a negotiated price, depending on the terms of each Host Blue's health care provider contracts. The negotiated price made available to SHPBCBSND by the Host Blue may represents a payment negotiated by a Regional or National Network discount program Host Blue with a health care provider that is the difference between the applicable contract rate and the participating provider's billed charges.one of the following:

1. \the actual price. An actual price is a negotiated payment without any other increases or decreases; or

2. an estimated price. An estimated price is a negotiated payment reduced or increased by a percentage to take into account certain payments negotiated with the provider and other claim- and non-claim-related transactions. Such transactions may include, but are not limited to, anti-fraud and abuse recoveries, provider refunds not applied on a claim-specific basis, retrospective settlements, and performance-related bonuses or incentives; or

3. an average price. An average price is a percentage of billed covered charges representing the aggregate payments negotiated by the Host Blue with all of its health care providers or a similar classification of its providers and other claim- and non-claim-related transactions. Such transactions may include the same ones as noted above for an estimated price.

Host Blues using either an estimated price or an average price may, in accordance with Inter-Plan Programs policies, prospectively increase or reduce such prices to correct for over- or underestimation of past prices (i.e., prospective adjustments may mean that a current price reflects additional amounts or credits for claims already paid to providers or anticipated to be paid to or received from providers). However, Tthe amount paid by the Member is a final price; no future price adjustment will result in increases or decreases to the pricing of past claims. The BlueCard Program requires that the price submitted by a Host Blue to BCBSND is a final price irrespective of any future adjustments based on the use of estimated or average pricing.

A small number of states require a Host Blue either (i) to use a basis for determining Member liability for Covered Services that does not reflect the entire savings realized, or expected to be realized, on a particular claim or (ii) to add a surcharge. Should the state in which health care services are accessed mandate liability calculation methods that differ from the negotiated price methodology or require a surcharge, SHP BCBSND would then calculate the Member's liability in accordance with applicable law.

Return of Overpayments - Under the BlueCard Program, recoveries from a Host Blue or from participating health care providers of a Host Blue can arise in several ways, including, but not limited to, anti-fraud and abuse recoveries, provider/hospital audits, credit balance audits, utilization review refunds, and unsolicited refunds. In some cases, SHPthe Host Blue will engage third parties to assist in discovery or collection of recovery amounts. The fees of such a third party may be netted against the recovery. Recovery amounts determined in this way will be applied in accordance with applicable SHP Inter-Plan Programs policies, which generally require correction on a claim-by-claim or prospective basis.

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B. **Nonparticipating Providers Outside the SHP~~BCBSND~~ Service Area**

When Covered Services are provided outside of SHP's~~BCBSND's~~ service area by health care providers who have not entered into a "participating agreement" with SHP ~~a Host Blue~~ (nonparticipating health care providers), the amount the Member pays for such services will ~~generally~~ be based on ~~either~~ SHP's ~~the Host Blue's nonparticipating health care provider local~~ maximum allowed amount, which is the lesser of (a) the amount charged for a covered service or supply, or (b) reasonable costs as established by SHP. Members are responsible for any difference between the amount charged and SHP's payment for covered services. ~~payment or the pricing arrangements required by applicable state law. In these situations, the Member may be liable for the difference between the amount that the nonparticipating health care provider bills and the payment BCBSND will make for the Covered Services as set forth in this paragraph.~~

In certain situations, SHP~~BCBSND~~ may pay claims based on the payment SHP~~BCBSND~~ would make if the Covered Services had been obtained within the SHP~~BCBSND~~ service area. Such situations include where a Member did not have reasonable access to a participating health care provider, as determined by SHP~~BCBSND~~ in its sole and absolute discretion or by applicable state law. ~~In other situations, BCBSND may pay such a claim based on the payment BCBSND would make if BCBSND were paying a nonparticipating health care provider inside of BCBSND's service area (as described in the Member's Certificate of Insurance) where the Host Blue's corresponding payment would be more than BCBSND's payment to a nonparticipating health care provider within the BCBSND service area. BCBSND~~SHP may also in its sole and absolute discretion, negotiate a payment with such a health care provider on an exception basis. In any of these situations, the Member may be responsible for the difference between the amount that the nonparticipating health care provider bills and payment SHP~~BCBSND~~ will make for the Covered Services as set forth in this paragraph.

10. RETROSPECTIVE DISCOUNT PAYMENT

Regarding prescription medications or drugs purchased by Members under the terms of the Plan, BCBSND will pay the amount due to the pharmacy (or other prescription drug retailer) under the terms of the pharmacy provider participating agreement. The amount due to the pharmacy under the terms of the pharmacy provider participating agreement is that which is due at the time the prescription medication or drug is purchased by the Member. The amount due to the pharmacy under the pharmacy provider participating agreement is calculated without regard to any subsequent, retrospective manufacturer discount that may apply to the cost of the prescription medication or drug. The Plan Administrator acknowledges and agrees that, in some cases but not all, drug manufacturers may offer retrospective discounts to BCBSND on prescription medications and drugs purchased under the terms of the Plan. If a drug manufacturer makes a retrospective discount payment available, the Plan Administrator acknowledges and agrees that a portion of any such rebate may be retained by an entity that performs manufacturer discount program services on behalf of BCBSND under the terms of this Agreement. The Plan Administrator further acknowledges and agrees that, when made available by the drug manufacturer, another portion of the retrospective discount payment is retained by BCBSND. In its sole discretion, BCBSND may periodically refund to the Plan all or part of any rebate payments received. The calculation of any refund rests in the sole discretion of BCBSND.

In its sole discretion, and only in the case where a Member is required to pay Coinsurance as part of the Cost Sharing Amounts for each Prescription Medication and Drug provided under the terms of this Benefit Plan, BCBSND may periodically refund to Members a proportional amount of any retrospective discount payments received. The calculation and payment of any such

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proportional refund rests in the sole discretion of BCBSND. The manner in which such retrospective discount program payment refund, if any, is distributed to a Member rests in the sole discretion of BCBSND. The Member waives any right, title, or interest in and to such proportional retrospective discount payment once the Member is no longer eligible for benefits under the terms of this Benefit Plan, and BCBSND may use its discretion and disburse any such retrospective discount payments as it deems appropriate and necessary in its administration of this Benefit Plan. The Member shall pay all Cost Sharing Amounts at the time the Prescription Medication or Drug is purchased, without regard to any potential retrospective discount.

11. **GENERAL PROVISIONS:**

11.1 This Agreement is between NDPERS and BCBSND and does not create any rights or legal relationships between BCBSND and any Member(s).

11.2 This Agreement, together with the Response to the Request for Proposal and any exhibits, attachments and amendments constitutes the entire Agreement between the parties. No promises, terms, conditions or obligations other than those contained in this Agreement are valid or binding. Any prior agreements, statements, promises, negotiations, inducements or representations, either oral or written, made by either party or agent of either party that are not contained in this Agreement are of no effect. No modification of the terms or provisions of this Agreement shall be effective unless evidenced by a written amendment, signed by an authorized officer or employee of NDPERS and BCBSND.

11.3 This Agreement shall be governed by and construed according to the laws of the state of North Dakota.

11.4 Failure of either party at any time to require performance by the other party of any provision of this Agreement shall not be deemed to be a continuing waiver of that provision or a waiver of any other provision of this Agreement.

11.5 No assignment of this Agreement in whole or in part may be made by either party without written agreement approved by both parties.

11.6 All notices and correspondence required or permitted to be given under this Agreement shall be given by personal delivery to the other party or may be sent by mail, postage prepaid to the other party at the following addresses:

NORTH DAKOTA PUBLIC EMPLOYEES
RETIREMENT SYSTEM
PO Box 1657
Bismarck, North Dakota 58502

BLUE CROSS BLUE SHIELD
OF NORTH DAKOTA
4510 13th Avenue South
Fargo, North Dakota 58121

11.7 Neither party shall be liable for any delay in or failure to perform under this Agreement due to an act of God or due to war mobilization, insurrection, rebellion, civil commotion, riot, act of an extremist or public enemy, sabotage, labor dispute, explosion, fire, flood, storm, accident, drought, equipment failure, power failure, fuel or energy shortages, unavoidable delay of carriers, embargo, law, ordinance, act, rule or regulation of any government, whether valid or invalid.

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11.8 NDPERS hereby expressly acknowledges and understands that BCBSND is an independent corporation operating under a license with the Blue Cross and Blue Shield Association, an association of independent Blue Cross and Blue Shield Plans (the "Association"), permitting BCBSND to use the Blue Cross and Blue Shield Service Marks in the state of North Dakota, and that BCBSND is not contracting as an agent of the Association. NDPERS further acknowledges and agrees this Agreement was not entered into based upon representations by any person or entity other than BCBSND and that no person, entity, or organization other than BCBSND shall be held accountable or liable to NDPERS for any of BCBSND's obligations to NDPERS created under this Agreement. This paragraph shall not create any additional obligations whatsoever on the part of BCBSND other than those obligations created under other provisions of this Agreement.

11.9 If NDPERS or BCBSND creates benefit communications for Members, relating to the Certificate of Insurance attached as Exhibit A, such communications will be sent to BCBSND or NDPERS for comment prior to distribution. Either party will have 5 business days to comment on the communication. If one party fails to advise the other within that 5-day period, it will be presumed there are no comments on the communication. If NDPERS has a digital or online version of the Certificate of Insurance available to its Members, NDPERS agrees that it will not alter, modify or change the language of the Certificate of Insurance, and further agrees the Certificate of Insurance, attached as Exhibit A, will be the controlling document in the event of any conflict or liability that might arise as the result of any alterations, modifications or changes made by NDPERS. In the event a claim is paid based on NDPERS's modified or altered digital or online Certificate of Insurance, NDPERS is liable for all such claims. NDPERS further agrees that no waiver of this agreement is valid unless in writing and approved by BCBSND.

11.10 BCBSND will prepare Summaries of Benefits and Coverage for distribution to applicants and Members by NDPERS so that BCBSND, the Plan and NDPERS may all satisfy related disclosure obligations under federal law. It shall be the sole responsibility of NDPERS to distribute the Summaries of Benefits and Coverage in accordance with federal law, and the Plan Administrator acknowledges and agrees that BCBSND will rely upon NDPERS for compliance with the requirements for distribution of the Summaries of Benefits and Coverage to applicants and Members.

11.11 When coverage under this Agreement is terminated, BCBSND will, within a reasonable period of time, issue a Certificate of Creditable Coverage to the Subscriber until such time when the certificate is not required under state and/or federal law. Upon notification by the Subscriber of the ineligibility of a dependent, a Certificate of Creditable Coverage will be issued to the affected Member within a reasonable period of time. Certificates of Creditable Coverage may also be obtained from BCBSND upon request within 24 months after coverage is terminated. Certificates of Creditable Coverage will only reflect continuous coverage provided through BCBSND.

11.12 Upon the effective date of any final regulation or amendment to final regulations with respect to PHI, Standard Transactions, the security of health information or other aspects of the Health Insurance Portability and Accountability Act of 1996 applicable to this Agreement, this Agreement will automatically amend such that the obligations imposed on the Plan Sponsor, the Plan Administrator and BCBSND remain in compliance with such regulations, unless BCBSND elects to terminate this Agreement by providing the Plan Sponsor and the Plan Administrator notice of termination in accordance with this Agreement at least thirty-one (31) days before the effective date of such final regulation or amendment to final regulations.

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12. **DISPUTES AND INDEMNIFICATION**

If litigation is filed regarding denial of benefits or otherwise, and BCBSND is named as the sole defendant, BCBSND will have the right to manage and have full control of litigation and to determine whether to pay, compromise, litigate or appeal the litigation. Except as otherwise provided in this Agreement, NDPERS and BCBSND each agree to assume their own liability for any and all legal or equitable claims of any nature including all costs, expenses and attorneys' fees which may in any manner result from or arise out of this Agreement.

NDPERS agrees that all Retrospective Discount Payments will be made to Members of the Plan. BCBSND agrees to indemnify NDPERS for any judgments against NDPERS solely arising out of NDPERS' decision to participate in the Retrospective Discount Payment program.

BCBSND shall secure and keep in force during the term of this Agreement, from insurance companies, government self-insurance pools or government self-retention funds, authorized to do business in North Dakota, the following insurance coverages:

1. Commercial general liability, including premises or operations, contractual, and products or completed operations coverages (if applicable), with minimum liability limits of $250,000 per person and $1,000,000 per occurrence.

2. Professional errors and omissions with minimum liability limits of $1,000,000 per occurrence and in the aggregate, BCBSND shall continuously maintain such coverage during the term of the Agreement and for three years thereafter. In the event of a change or cancellation of such coverage, BCBSND shall purchase an extended reporting period to meet the time periods required in this section.

3. Automobile liability, including Owned (if any), Hired, and Non-Owned automobiles, with minimum liability limits of $250,000 per person and $500,000 per occurrence.

4. Workers compensation coverage meeting all statutory requirements.

The insurance coverages listed above must meet the following additional requirements:

1. Any deductible or self-insured retention amount or other similar obligation under the policies shall be the sole responsibility of BCBSND. The amount of any deductible or self retention is subject to approval by NDPERS, upon request.

2. This insurance may be in policy or policies of insurance, primary and excess, including the so-called umbrella or catastrophe form and must be placed with insurers rated “A-” or better by A.M. Best Company, Inc., provided any excess policy follows form for coverage. Less than an “A-” rating must be approved by NDPERS. The policies shall be in form and terms approved by NDPERS, upon request.

3. BCBSND shall furnish a certificate of insurance to the undersigned NDPERS representative, upon request.

4. Failure to provide insurance as required in this Agreement is a material breach of contract entitling NDPERS to terminate this Agreement immediately.

BCBSND shall not cancel or modify the insurance coverage required by this Agreement without thirty (30) days’ prior written notice to the undersigned NDPERS representative.

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IN WITNESS WHEREOF, the parties hereto have caused this Agreement to be executed, in their names by their undersigned officers, the same being duly authorized to do so.

NORTH DAKOTA PUBLIC EMPLOYEES RETIREMENT SYSTEM (PLAN ADMINISTRATOR)
PO Box 1657
Bismarck, North Dakota 58502

By: _____

Title: _____

Date: _____

BLUE CROSS BLUE SHIELD OF NORTH DAKOTA*
4510 13th Avenue South
Fargo, North Dakota 58121

NORTH DAKOTA PUBLIC EMPLOYEES RETIREMENT SYSTEM (PLAN SPONSOR)
PO Box 1657
Bismarck, North Dakota 58502

By: _____

Title: _____

Date: _____

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*An Independent Licensee of the Blue Cross and Blue Shield Association.

Exhibit "A"

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Exhibit G

Self-Funded Proposal
Contract Benefit Grid
Current Benefits
Matching Benefits and Resources

Plan on the best fit.

SANFORD HEALTH PLAN

SANFORD HEALTH PLAN

Exhibit G – Existing contract benefits (plan design, wellness, services, standards, etc.) this section identifies the existing PERS plans contract benefits. Please indicate if you can match these benefits/services and if so with what resources and if not what specifically you would not be able to provide.

Current Contract Benefits	Reference Resources	Discuss and Identify comparable service offering.
NDPERS Specific Plan Designs		
• Actives and Pre Medicare Retirees Medical plans o PPO/Basic Plan – Grandfathered o PPO/Basic Plan – Non Grandfathered • Active and Pre Medicare Retirees Rx plan	http://www.nd.gov/ndpers/insurance-plans/group-health-ppo-basic-grandfathered.html http://www.nd.gov/ndpers/insurance-plans/group-health-ppo-basic-non-grandfathered.html	Sanford Health Plan will administer Pre Medicare Retirees Medical and Rx plans.
• Wellness Program o Dedicated Wellness Website and program similar to existing program with incentives, health club membership and employer efforts o Employer Based Wellness Program	http://www.nd.gov/ndpers/insurance-plans/employer-based-wellness.html Exhibit 1 Exhibit 2	Sanford Health Plan will administer a comparable wellness programs using our online tools and employer-based *bWell* programs.
HDHP/HSA Option for State agencies	http://www.nd.gov/ndpers/insurance-plans/group-health-hdhp.html	Sanford Health will administer the HDHP/HSA options using our vendor, Evolution1.

Current Contract Benefits	Reference Resources	Discuss and Identify comparable service offering.
General Services		
Medicare Retiree Plan o Plan F look alike	http://www.nd.gov/ndpers/insurance-plans/medicare-rx.html	Sanford Health Plan will administer the Medicare Supplement Plans internally as we currently offer Medicare Supplement, Medicare SELECT plans in the commercial market.
Separate Medicare Part D RX plan	http://www.nd.gov/ndpers/forms-and-publications/publications/grp-hlth-spd-retirees.pdf http://www.nd.gov/ndpers/forms-and-publications/publications/medicare-benefits-summary-current.pdf	Sanford Health Plan will contract with Express Scripts, Inc. to administer the Medicare Part D Plan.
Actuarial Services • Mandate cost estimates & reporting during Legislative session within 24 to 48 hours. • Trending • Financial reporting • Plan Design Options	Mandate Estimates – Exhibit 3 See Quarterly Report and Annual Report – (Exhibit 4 & 5 (Exhibit 6) See Exhibit 9	Sanford Health Plan will dedicate an Associate Actuary as well as resources from our retained actuarial staff from Milliman.

Current Contract Benefits	Reference Resources	Discuss and Identify comparable service offering.
<u>Underwriting Services</u> • Dedicated NDPERS underwriter • Enrollment processes – verify enrollments entered by NDPERS staff and sent through 834 file. Rush enrollments with immediate PTI updates, generate ID cards, mail benefit books, notify NDPERS when 834 file is bad, 834 file is mapped to correct group, roll, class of coverage using their rate structure code and coverage codes (other 834 files are required to send carrier our basic codes and class codes) and staff available always to answer questions by NDPERS office. • Eligibility (removal of dependents (EOM age 26), grandchildren when parent marries, divorce (removal for spouse and step children with or without rescission letters) • ID cards • Benefit books • Summary of Benefits & Coverage • 834 Enrollment Discrepancy Reports		• Sanford Health Plan will dedicate an Associate Actuary as well as resources from our retained actuarial staff from Milliman. • Sanford Health Plan will dedicate an enrollment coordinator to NDPERS to manage the enrollment process. • Sanford Health Plan will dedicate an enrollment coordinator to NDPERS to manage the enrollment process. • Sanford Health Plan currently utilizes a print-on-demand ID card vendor for printing, fulfilling and distributing ID cards, member handbooks, SBCs and Policies.
<u>Communications Services</u> • NDPERS newsletter items • Health focused Newsletter generated by Carrier • Letters, posters, brochures and grids • Directories	http://www.nd.gov/ndpers/forms-and-publications/index.html	Sanford Health Plan will dedicate a Communications Manager to coordinate all ND PERS communication plans.

Current Contract Benefits	Reference Resources	Discuss and Identify comparable service offering.
<u>Claims Administration & Member Services</u> • Dedicated NDPERS Pod for claims and customer calls • Subrogation, Medicare secondary payer, coordination of benefits processes • Member advocacy program • Annual satisfaction survey • Annual NDPERS claims audit • Facilitate PBM Audit • MSP Data Match Compliance • Prenatal Program enrollment/claims processing for NDPERS specific benefit • Enrollment for Tobacco Cessation Program • Subscriber Appeals • Telephone support for dedicated wellness website –dedicated PERS service unit handles calls from members	https://www.bcbsnd.com/health-and-wellness-programs/member-advocate (Exhibit 7) (Exhibit 8) http://www.nd.gov/ndpers/forms-and-publications/publications/grp-hlth-spd-actives.pdf#page=35 https://www.bcbsnd.com/search-preview/-/ndpers-tobacco-cessation	Sanford Health Plan will dedicate a Claims Supervisor to manage all ND PERS claims procedures. Sanford Health Plan will dedicate a Customer Services Supervisor to manager all ND PERS phone staff, appeals and grievance procedures. Sanford Health Plan will use existing NCQA-certified vendors to conduct consumer satisfaction surveys. Sanford Health Plan's will dedicate a Wellness Program Manager to manage the ND PERS wellness programs including a dedicated wellness service unit to handle member calls.
<u>Finance</u> • Manage & Report NDPERS risk sharing arrangement • Manage & Report NDPERS Cash Reserve Account • Process payments for NDPERS value added programs		Sanford Health Plan will dedicate a Finance Manager to manage all ND PERS finance and revenue cycle management procedures.

Current Contract Benefits	Reference Resources	Discuss and Identify comparable service offering.
• Tobacco Cessation Program • RX Disease Management Program • Employer Based Wellness Program • Billing (create monthly premium billings and group accounts receivables that report and track the total amount of premium due for all NDPERS members covered through carrier. These accounts are reconciled monthly with the payments and enrollment files submitted by NDPERS to ensure enrollment and billing accuracy) • 820 Premium Payment Discrepancy Reports		Sanford Health Plan will administer a comparable wellness programs using our online tools and employer-based *bWell* programs.

Current Contract Benefits	Reference Resources	Discuss and Identify comparable service offering.
Information Technologies • NDPERS specific 820 payment file • NDPERS specific 834 enrollment file • NDPERS specific benefit matrix and claims processing logic • System for processing claims for Tobacco Cessation Program • Secure file transfer system • Monthly Process Improvement team meetings		Sanford Health Plan acknowledges and agrees to comply.
Legislative and Legal Services Monitor State and Federal legislation for changes affecting NDPERSMandate co estimates during Legislative session Contract reviews Develop Memorandum of Understandings for value added programsCompliance Pharmacy class action settlements Internal audit functions System for monitoring provider trends	Exhibit 3 Exhibit 10	Sanford Health Plan acknowledges and agrees to comply.
ACA Reporting & Compliance • Reporting of Minimum Essential Coverage (6055) • ACA required notices upon loss of coverage for exchanges • Monitor employer lapse in coverage for change to NGF and loss of participation if small group		Sanford Health Plan acknowledges and agrees to comply.

Current Contract Benefits	Reference Resources	Discuss and Identify comparable service offering.
Marketing and Adm Staff • Dedicated NDPERS Account Executive • Dedicated NDPERS Account Manager • Dedicated NDPERS Wellness Consultant • Dedicated NDPERS Group Consultant • Pharmacy Consulting		Sanford Health Plan acknowledges and agrees to comply by dedicating the following service staff to the ND PERS account: • Dedicated NDPERS Account Executive • Dedicated NDPERS Account Manager • Dedicated NDPERS Wellness Consultant • Dedicated NDPERS Group Consultant • Pharmacy Consulting
• Provide a stable Grandfathered benefit design by monitoring activities and regulations to limit risks		Sanford Health Plan acknowledges and agrees to comply.
• Benefit overviews for agencies and political subdivisions • Complete an annual minimum participation and contribution survey • Monitor performance guarantees • Monitor and address Legislative items • Member education programs for agencies and political subdivisions • Conduct routine meetings with NDPERS staff to ensure adequate communication on items such as wellness, process improvement, benefit designs changes, and new programs.	In 2013, there were 37 employers who held benefit overview presentations. https://www.bcbsnd.com/web/employers/wellness-programs/member-education In 2013, 87 employer groups held member education presentations (3,423 members).	Sanford Health Plan acknowledges and agrees to comply by using local account representatives to conduct service meetings.

Current Contract Benefits	Reference Resources	Discuss and Identify comparable service offering.
<u>Reporting</u> • Quarterly Executive Summary and Annual Assessment • Monthly data files through secure file transfer system • Adhoc reporting including cost, utilization and risk analysis • Provide flexible spending account files to NDPERS ADP	See Quarterly Report and Annual Report – Exhibit 4 & 5	Sanford Health Plan acknowledges and agrees to comply.
Wellness Programs		
<u>Dedicated Wellness Website</u> o Dedicated Wellness Program o Dedicated NDPERS portal o NDPERS specific voucher points o Developed wellness website challenges • Health Club Credit program • Support Wellness Star of the Month award designation. Promote community based wellness activities and award points for participation. • Develop and promote targeted messaging on Blood Pressure. • Monthly WebEx's provided by member education on dedicated wellness website and health club credit.	Exhibit 1 Exhibit 11 Exhibit 12 Exhibit 2 Exhibit 13	Sanford Health Plan will administer a comparable wellness programs using our online tools and employer-based bWell programs.

Employer Based Wellness Program • Dedicated wellness specialist to assist coordinators with wellness activities, planning and implementing ideas. • Planned and coordinated summer Wellness Coordinator workshops. • Support the Lt Governor's Award for Worksite Wellness with HealthyND. • Monthly Newsletter for Wellness Coordinators • Monthly conference call with Wellness Coordinators • Provide monthly wellness articles for distribution to coordinators/employees. • Provide monthly posters for distribution to wellness worksites. Employer Based Wellness Funding Program • Wellness consultant on evaluation team • Review and score applications • Administer payment of invoices from NDPERS Wellness EducationOn site wellness presentations at employer worksites • Benefit presentations at employer worksites Support Vaccination Awareness program with Department of Health • Create flyers for NDPERS web targeting specific disease/medical conditions • Organize the NDPERS Retiree Health Fairs . • Coordinate National Walk @ Lunch Day • Participate in COSE wellness fair at capitol each September	http://www.nd.gov/ndpers/insurance-plans/employer-based-wellness.html Exhibit 14 Exhibit 15 http://www.nd.gov/ndpers/insurance-plans/employer-based-wellness.html Exhibit 16 http://www.nd.gov/ndpers/forms-and-publications/publications/additional-bcbs-wellness-programs.pdf	Sanford Health Plan will administer a comparable wellness programs using our online tools and employer-based bWell programs.

Current Contract Benefits	Reference Resources	Discuss and Identify comparable service offering.
Rx Services		

Pharmacy Benefit Manager Programs
• Integrated medical and pharmacy services
• Clinical programs
• Generic incentive programs
• Specialty pharmacy program
• RX mail order services
• Formulary program
• Drug utilization reviews
  • Retrospective DUR
  • Concurrent DUR
  • Prospective DUR
  • Guided Health Medication Therapy Management Program
  • Member rebate accounts Rebates passed to NDPERS Carrier has set up a Member Rebate Account (MRA) in the member's name. Accounts are set up at the member level. For every eligible brand prescription medication a member purchases at the point-of- sale (electronic claim), they will receive an appropriate portion of the manufacturer rebate associated with that particular medication into their MRA. Please note this program does not apply to COB or paper claims.
	https://www.myprime.com	Sanford Health Plan acknowledges and agrees to comply with the exception of the Member Rebate Account. If selected as a finalist, Sanford Health Plan will initiate a development plan to create member rebate accounts, however, cannot guarantee that MRA will be operational by July 1, 2015.

Current Contract Benefits	Reference Resources	Discuss and Identify comparable service offering.
• Establish a nationwide Select Pharmacy Network • Claims processing for Part D program		Sanford Health Plan will contract with Express Scripts, Inc. to administer the Medicare Part D Plan and the nationwide pharmacy network.
Medical Management and Provider Services		
Medical Management • – Patient medical home • – rare and complex disease management • Disease management program for out of state members • member advocacy programs • Preauthorization's • Concurrent review/discharge planning • Prior approvals • Benefit inquiries • Therapy review process • Chiropractic review • Large case management • Prenatal Program with NDPERS specific benefits • Prenatal text messaging program • Provider news letters	https://www.bcbsnd.com/health-and-wellness-programs/mediqhome https://www.bcbsnd.com/health-and-wellness-programs/disease-management https://www.bcbsnd.com/health-and-wellness-programs/member-advocate http://www.nd.gov/ndpers/forms-and-publications/publications/grp-hlth-spd-actives.pdf#page=35 https://www.bcbsnd.com/health-and-wellness-programs/text4baby	Sanford Health Plan will administer a comparable Medical Management program.

Current Contract Benefits	Reference Resources	Discuss and Identify comparable service offering.
Provider Relations • Carrier owned provider network • Total cost of care contracts • National network (total out of state discounts = Provider credentialing and contracting • Physician Quality Measurement Program • Physician Recognition Program • Patient Review of Physicians Program	http://provider.bcbsnd.com 97.7% of providers in Network 35% discount off in state changes. An NDPERS specific PPO network in addition to vendors network	Sanford Health Plan acknowledges and agrees to comply.
Medicare Part D		
• Special contract for administration of Part D product • NDPERS specific benefit plan design • NDPERS specific Part D online enrollments – NDPERS does handle enrollment, however carrier receives reports each week with any enrollment discrepancies and then works with the PDP vendor and NDPERS to rectify those. NDPERS and carrier both share in working with specific Part D enrollments. • NDPERS specific Part D billing – carrier handles the billing that come directly from Medicare Rx each month in a paper format. Carrier pays directly to Medicare Rx the premium amount requested on the bill. A dedicated Membership person that manually goes over the bill for discrepancies each month and will find any issues we may have with the bill. • Research member enrollment/disenrollment exception	http://www.nd.gov/ndpers/insurance-plans/medicare-rx.html	Sanford Health Plan will contract with Express Scripts, Inc. to administer the Medicare Part D Plan.

Current Contract Benefits	Reference Resources	Discuss and Identify comparable service offering.

report
• Monthly meetings with Part D vendors
• Notification and tracking of late enrollment penalty (LEP)
• Notifications and tracking of Income-related monthly adjustment amount (IRMAA)
• Annual Adjustment to Part D rates based on the Federal subsidy and the Low Income Subsidy (LIS)
• Part D Reporting
  • Request for Information reports
  • NDPERS PDP Member Change reports
  • NDPERS PDP Response Error report
  • HICN reports
  • Gap/Cat
  • Process other internal and adhoc reporting
	Exhibit 17	

Health Savings Account		
Health Savings Account • Administration of HSA's • Administer payment of monthly invoice from NDPERS Cash Reserve Account	http://www.nd.gov/ndpers/insurance-plans/group-health-hdhp.html	Sanford Health will administer the HDHP/HSA options using our vendor, Evolution1.
Additional Administrative Programs		

• Tobacco Cessation Program
  • Grant application and contract
  • Enrollment
  • Claims processing
  • Reporting requirements
  • Invoices for grant reimbursement
	https://www.bcbsnd.com/search-preview/-/ndpers-tobacco-cessation	Sanford Health Plan will administer a comparable wellness programs using our online tools and employer-based bWell programs.

Current Contract Benefits	Reference Resources	Discuss and Identify comparable service offering.

• RX Disease Management Program (About the Patient)
  • Eligibility reporting
  • Cost share incentive reporting
  • Administer payment of invoices from NDPERS Cash Reserve Account
	http://www.aboutthepatient.net/NDPERS-Program.html	Sanford Health Plan acknowledges and agrees to comply.

Miscellaneous		
Provide access to all subject matter experts and other appropriate personnel and make them available for attending board meetings, legislative, hearings, etc. as needed • Provide access to video or teleconference for Board meetings		Sanford Health Plan acknowledges and agrees to comply.

1a
3/27/17

17.1008.03001
Title.

Prepared by the Legislative Council staff for
Representative Carlson
March 21, 2017

PROPOSED AMENDMENTS TO HOUSE BILL NO. 1436

Page 1, line 12, overstrike "consider" and insert immediately thereafter ":

a. Meet at least quarterly at the discretion of the chairman.

b. Receive quarterly reports from the public employees retirement system on the activities of the public employees retirement system, including the status of and any proposed changes to its retirement system plans and uniform group insurance plans. Before each regular legislative session, the pubic employees retirement system shall present to the committee the executive budget proposals, including any anticipated changes, relating to retirement plans and uniform group insurance plans administered by the public employees retirement system. The committee shall consider and report on these activities and executive budget proposals.

c. Investigate the feasibility and desirability of making changes to the retirement plans and uniform group insurance plans administered by the public employees retirement system. The committee may request actuarial reports on the actuarial impact of possible changes and of plan design options.

d. Consider"

Page 1, overstrike "measures and"

Page 1, line 17, remove "a"

Page 1, line 18, overstrike "measure or" and insert immediately thereafter "a legislative"

Page 1, line 19, overstrike "The committee shall take" and insert immediately thereafter:

"e. Take"

Page 1, line 19, remove "such"

Page 1, line 19, overstrike "measure or" and insert immediately thereafter "such legislative"

Page 1, line 23, overstrike "The committee shall report its" and insert immediately thereafter:

"f. Report the committee's"

Page 2, line 16, overstrike "measures and" and insert immediately thereafter "legislative"

Page 2, line 20, remove "If a"

Page 2, line 21, remove "legislative"

Page 2, line 21, overstrike "measure"

Page 2, line 21, replace "or" with "If a legislative"

Page 3, line 1, after "committee" insert "takes action on a legislative measure sponsored by a legislator or"

Page 4, after line 14, insert:

"4. A contract and the terms of a contract entered by the board under this chapter are subject to legislative appropriation and legislative changes."

Page 6, line 11, after the period insert "Such plan may include consideration of funds extended to the board from the Bank of North Dakota."

Page 6, line 27, after "54-52.1-04.2" insert ", except for benefits for retirees and for Medicare part D"

Page 7, line 3, after "plan" insert "under subsection 1"

Renumber accordingly

16
3/27/17

17.1008.03001

Sixty-fifth
Legislative Assembly
of North Dakota

HOUSE BILL NO. 1436

Introduced by

Representatives Carlson, Bellew, Kasper, Keiser, Streyle, Vigesaa

Senators Bekkedahl, Casper, Laffen, Schaible

(Approved by the Delayed Bills Committee)

A BILL for an Act to amend and reenact sections 54-35-02.4, 54-52.1-04, 54-52.1-04.2, and 54-52.1-04.3 of the North Dakota Century Code, relating to the employee benefits program committee, public employee uniform group insurance health benefits coverage, and to provide for a retirement board line of credit; to provide a continuing appropriation; to provide for application; and to provide statements of legislative intent.

BE IT ENACTED BY THE LEGISLATIVE ASSEMBLY OF NORTH DAKOTA:

SECTION 1. AMENDMENT. Section 54-35-02.4 of the North Dakota Century Code is amended and reenacted as follows:

54-35-02.4. Employee benefits programs committee - Standing committees - Powers and duties.

1. ~~The~~During the interim between regular legislative sessions, the employee benefits programs committee shall ~~consider~~:

   a. Meet at least quarterly at the discretion of the chairman.

   b. Receive quarterly reports from the public employees retirement system on the activities of the public employees retirement system, including the status of and any proposed changes to its retirement system plans and uniform group insurance plans. Before each regular legislative session, the ~~public~~ employees retirement system shall present to the committee the executive budget proposals, including any anticipated changes, relating to retirement plans and uniform group insurance plans administered by the public employees retirement system. The committee shall consider and report on these activities and executive budget proposals.

   c. Investigate the feasibility and desirability of making changes to the retirement plans and uniform group insurance plans administered by the public employees

retirement system. The committee may request actuarial reports on the actuarial impact of possible changes and of plan design options.

d. Consider and report on ~~those~~ legislative ~~measures and~~ proposals sponsored by the executive branch, judicial branch, and legislative management over which ~~it~~the committee takes jurisdiction and which affect, actuarially or otherwise, the retirement programs of state employees or employees of any political subdivision, and health and retiree health plans of state employees or employees of any political subdivision. The committee shall make a thorough review of ~~any~~a ~~measure or~~a legislative proposal over which ~~it~~the committee takes ~~under its~~ jurisdiction, including an actuarial review. ~~The committee shall take~~

e. Take jurisdiction over any ~~such measure or~~such legislative proposal that authorizes an automatic increase or other change in benefits beyond the ensuing biennium which would not require legislative approval. The committee ~~must~~shall include in the report of the committee a statement ~~that~~ the proposal would allow future changes without legislative involvement. ~~The committee shall report its~~

f. Report the committee's findings and recommendations, along with any necessary legislation, to the legislative management and to the legislative assembly.

2. To carry out its responsibilities, the committee, or its designee, may:

a. Enter contracts, including retainer agreements, with an actuary or actuarial firm for expert assistance and consultation. Each retirement, insurance, or retiree insurance program shall pay, from its retirement, insurance, or retiree health benefits fund, as appropriate, and without the need for a prior appropriation, the cost of any actuarial report required by the committee or a standing committee as provided under subsection 6 which relates to that program.

b. Call on personnel from state agencies or political subdivisions to furnish such information and render such assistance as the committee may from time to time request.

c. Establish rules for ~~its~~ operation of the committee, including the submission and review of proposals and the establishing of standards for actuarial review.

3. ~~The~~During the interim between regular legislative sessions, the committee may solicit draft ~~measures and~~legislative proposals from ~~interested persons during the interim~~

~~between legislative sessions~~the executive branch, judicial branch, and legislative management, and may also study measures and proposals referred to ~~it~~the committee by the legislative assembly or the legislative management.

4. ~~A copy of the committee's report concerning any legislative measure shall, if that~~If a ~~legislative measure or~~If a legislative proposal over which the committee took jurisdiction under subsection 1 is introduced for consideration by a legislative assembly, a copy of the related committee report must be appended to the copy of that measure ~~which is~~ referred to a standing committee.

5. A legislative measure affecting a public employees retirement program, public employees health insurance program, or public employee retiree health insurance program may not be ~~introduced~~submitted by the executive branch, judicial branch, or legislative management for introduction in either house unless ~~it~~the measure is accompanied by a report from the committee. A majority of the members of the committee, acting through the chairman, has sole authority to determine whether ~~any~~a legislative measure affects a program.

6. ~~Any~~During a legislative session, if a standing committee takes action on a legislative measure sponsored by a legislator or recommends an amendment ~~made during a legislative session~~ to a legislative measure ~~affecting~~which would affect a public employees retirement program, public employees health insurance program, or public employee retiree health insurance program ~~may not be considered by a standing committee unless it is accompanied by a report from the employee benefits programs committee~~, the standing committee shall consider the impact, actuarily or otherwise, of the amendment and may request the affected program provide an analysis of the impact of the amendments. If an affected program provides an analysis under this subsection, the program may pay for the analysis in the same manner as provided under subdivision a of subsection 2.

~~7. Any legislation enacted in contravention of this section is invalid and of no force and effect, and any benefits provided under such legislation must be reduced to the level current prior to enactment.~~

SECTION 2. AMENDMENT. Section 54-52.1-04 of the North Dakota Century Code is amended and reenacted as follows:

54-52.1-04. Board to contract for insurance.

1. The board shall receive bids for the providing of hospital benefits coverage, medical benefits coverage, life insurance benefits coverage for a specified term, and employee assistance program services; may receive bids separately for prescription drug coverage; and shall accept one or more bids of and contract with the carriers ~~that in the judgment of~~ the board determines best ~~serves~~serve the interests of the state and ~~its~~the state's eligible employees. Solicitations must be made not later than ninety days before the expiration of an existing uniform group insurance contract. Bids must be solicited by advertisement in a manner selected by the board ~~that~~which will provide reasonable notice to prospective bidders. In preparing bid proposals and evaluating bids, the board may utilize the services of consultants on a contract basis ~~in order that~~to provide the bids received may be uniformly compared and properly evaluated. In determining which bid, if any, will best serve the interests of eligible employees and the state, the board shall give adequate consideration to the following factors:
   ~~1.~~ a. The economy to be effected.
   ~~2.~~ b. The ease of administration.
   ~~3.~~ c. The adequacy of the coverages.
   ~~4.~~ d. The financial position of the carrier, with special emphasis ~~as to its~~on the solvency of the carrier.
   ~~5.~~ e. The reputation of the carrier and any other information ~~that is~~ available tending to show past experience with the carrier in matters of claim settlement, underwriting, and services.
2. The board may reject any or all bids ~~and, in the event it does so,~~received under this section. If the board rejects all bids received, the board shall again solicit bids as provided in this section. ~~The~~
3. Under section 54-52.1-04.1 or 54-52.1-04.2, the board may contract with a health maintenance organization or establish a plan of self-insurance ~~for providing health insurance~~to provide hospital, medical, or prescription drug benefits coverage ~~only under an administrative services only (ASO) contract or a third-party administrator (TPA) contract~~.

4. A contract and the terms of a contract entered by the board under this chapter are subject to legislative appropriation and legislative changes.

SECTION 3. AMENDMENT. Section 54-52.1-04.2 of the North Dakota Century Code is amended and reenacted as follows:

54-52.1-04.2. Self-insurance plan for hospital ~~and~~, medical, and prescription drug benefits coverage.

1. ~~The board may establish~~This section applies to a self-insurance plan for ~~providing:~~
   ~~a.~~ ~~Health insurance~~hospital, medical, and prescription drug benefits coverage;
   ~~b.~~ ~~Health insurance~~hospital and medical benefits coverage, excluding all or part of prescription drug benefits coverage; or
   ~~c.~~ ~~All~~all or part of prescription drug benefits coverage. The board shall establish a self-insurance plan under this section if so directed by the legislative assembly. The board may establish a self-insurance plan under this section if the board determines a self-insurance plan is less costly than the lowest bid submitted by a carrier for underwriting the plan with equivalent contract benefits.
2. ~~Any~~A self-insurance plan established by the board under this section must be provided under an administrative services only (ASO) contract or a third-party administrator (TPA) contract under the uniform group insurance program~~, and may be established only if it is determined by the board that an administrative services only or third-party administrator plan is less costly than the lowest bid submitted by a carrier for underwriting the plan with equivalent contract benefits. Upon establishing~~.
3. If the board establishes a self-insurance plan, the ~~board shall solicit bids for an~~term of the contract for administrative services only or a third-party administrator ~~contract only every other biennium, and the board is authorized to~~must be for two years and the board may renegotiate ~~an existing administrative services only or third-party administrator contract during the interim. In addition,~~the contract for one additional two-year term. The board shall solicit bids for the contract for administrative services only or a third-party administrator at least once every four years. If the board establishes a self-insurance plan, the board shall make individual stop-loss coverage insured by a carrier authorized to do business in this state ~~must be made~~ part of ~~any self-insured~~the plan. ~~All bids under this section are due no later than January first, and~~

~~must be awarded no later than March first, preceding the end of each biennium.~~ If the board solicits bids under this section, the board shall solicit bids for a contract for insurance or a health maintenance organization, or both. The board may transition from a self-insurance plan to a contract for insurance or a health maintenance organization if the board determines the self-insurance plan costs more than the lowest bid submitted for a contract or health maintenance organization plan with comparable benefits. All bids received by the board under this section must be opened at a public meeting of the board.

SECTION 4. AMENDMENT. Section 54-52.1-04.3 of the North Dakota Century Code is amended and reenacted as follows:

54-52.1-04.3. Self-insurance - Contingency reserve fund - Continuing appropriation - Bank of North Dakota line of credit.

~~The~~

1. If the board establishes a self-insurance plan under section 54-52.1-04.2, the board shall establish ~~under a self-insurance plan~~ a contingency reserve fund to provide for adverse fluctuations in future charges, claims, costs, or expenses of the uniform group insurance program. ~~The~~Annually, the board shall determine the amount necessary to provide a balance in the contingency reserve fund between one and one-half months and three months of claims paid based on the average monthly claims paid during the preceding twelve-month period ~~immediately preceding March first of each year~~. ~~The~~Annually, the board ~~also~~ shall determine the amount necessary to provide an additional balance in the contingency reserve fund between one month and one and one-half months for claims incurred but not yet reported. The board may arrange for the services of an actuarial consultant to assist the board in making these determinations.
2. Upon the initial changeover from a contract for insurance ~~pursuant to~~under section 54-52.1-04 or a health maintenance organization under section 54-52.1-04.1, to a self-insurance plan ~~pursuant to~~under section 54-52.1-04.2, the board ~~must have~~shall adopt a plan ~~in place which is~~ reasonably calculated to meet the funding requirements of this chapter within sixty months. Such plan may include consideration of funds extended to the board from the Bank of North Dakota. All moneys in the contingency

reserve fund, not otherwise appropriated, are appropriated for the payment of claims and other costs of the uniform group insurance program during periods of adverse claims or cost fluctuations. If the board transitions from a self-insurance plan to a contract for insurance or a health maintenance organization, the board shall adopt a plan reasonably calculated to meet the remaining liabilities of the self-insurance plan.

3. The Bank of North Dakota shall extend to the board a line of credit not to exceed fifty million dollars at an annual rate not to exceed one and three-quarters percent. The board shall repay the line of credit from health insurance premium revenue or from other funds, as appropriated by the legislative assembly. The board may access the line of credit, as necessary, to provide adequate reserve funds, to purchase stop-loss coverage, and to defray other expenditures of administration of the self-insurance plan.

SECTION 5. SELF-INSURANCE HEALTH PLANS - APPLICATION - STATEMENT OF LEGISLATIVE INTENT.

1. The retirement board shall establish a self-insurance plan for hospital, medical, and prescription drug benefits coverage under section 54-52.1-04.2, except for benefits for retirees and for Medicare part D. The self-insurance plan becomes effective January 1, 2018, is effective for a term of eighteen months, is subject to renewal and rebidding as provided under section 54-52.1-04.2, and must be based on the same plan design and benefits as the coverage in effect on July 1, 2017.
2. A uniform group insurance program contract for hospital, medical, and prescription drug benefits coverage in effect on the effective date of this Act terminates on December 31, 2017, after which the self-insurance plan under subsection 1 becomes effective.
3. Notwithstanding any law to the contrary, it is the intent of the sixty-fifth legislative assembly that the uniform group insurance program contract for hospital, medical, and prescription drug benefits coverage signed by the retirement board which becomes effective July 1, 2017, be limited in duration to a six-month term.

SECTION 6. HEALTH INSURANCE RESERVE FUND. The retirement board shall use available moneys in the fund created under section 54-52.1-06 for the purpose of financing the self-insurance plan established under section 5 of this Act.

SECTION 7. EXEMPTION. This Act is not subject to review by the employee benefits programs committee under section 54-35-02.4.

3/27/17

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Amendment to House Bill 1436

The Bank of North Dakota shall extend to the board a line of credit not to exceed fifty million dollars at an annual rate not to exceed three percent for a two year term or four percent for a five year term. The board shall repay the line of credit from health insurance premium revenue or from other funds, as appropriated by the legislative assembly. The board may access the line of credit, as necessary, to provide adequate reserve funds, to purchase stop-loss coverage, and to defray other expenditures of administration of the self-insurance plan.

Biennium	Monthly Premium	Percentage Change from Previous Biennium
2001-03	$409	16.9%
2003-05	$489	19.6%
2005-07	$554	13.3%
2007-09	$658	18.8%
2009-11	$826	25.5%
2011-13	$887	7.4%
2013-15	$982	10.7%
2015-17	$1,130	15.1%
2017-19 executive recommendation	$1,249	10.6%

The percentage increase to maintain the existing health insurance plan benefits is 17.4 percent for the 2017-19 biennium. To reduce this percentage increase, the Governor is recommending increasing member out-of-pocket expenses to reduce plan costs by $49.61 per contract, per month, which would reduce the overall increase by 4.4 percent.

The Governor is also recommending using Public Employees Retirement System (PERS) health insurance reserves to pay an additional $27.31 of premiums per contract, per month, which would reduce the overall increase by 2.45 percent. The Governor is using approximately $18.0 million of the estimated $35.0 million in health insurance reserve funds to reduce the premium rate increase. Of the $18.0 million utilized, $10.5 million relates to state employee health insurance plans, $4.4 million relates to political subdivisions, and $3.1 million relates to retiree health plans.

EMPLOYEE ASSISTANCE PROGRAM

The monthly rate for the employee assistance program remains at $1.54 per month, or $18.48 annually.

LIFE INSURANCE

The monthly rate for life insurance provided to state employees remains at $0.28 per month, or $3.36 annually.

UNEMPLOYMENT INSURANCE

Funding is included for unemployment insurance for state employees at a rate of 1 percent of the first $6,000 of an employee's annual salary ($60 per year or $120 per biennium maximum). No unemployment insurance was collected on state employee salaries during the 2013-15 and 2015-17 bienniums.

Retirement - We pay - 11.12 - State
3% Employee
50/50

TOTAL COMPENSATION CHANGES COST

The schedule below provides the total cost of major compensation changes recommended in the 2017-19 executive budget.

	General Fund	Special Funds	Total
Salary increase of 1 percent, effective July 1, 2018	$5,447,422	$6,411,108	$11,858,530
Health insurance premium increases	20,924,659	24,626,376	45,551,035
Total	$26,372,081	$31,037,484	$57,409,565

FULL-TIME EQUIVALENT POSITIONS

The 2017-19 executive budget includes a total of 15,937.69 FTE positions, an increase of 4,100.12 FTE positions from the 2015-17 authorized level of 11,837.57 FTE positions. The total number of FTE positions for the 2017-19 biennium now reflects certain higher education positions that were previously not reflected in the budget.

The 2017-19 executive budget recommended FTE level of 15,937.69 is an overall decrease of 551.56 FTE positions compared to the adjusted 2015-17 biennium total, including a decrease of 315.27 FTE positions in higher education and a decrease of 215.61 FTE positions in all other state agencies.

The reduction of 215.61 FTE positions resulted in a decrease of $29.0 million, of which $15.9 million is from the general fund.

Major changes in FTE positions, excluding higher education, are as follows:

Agency Increases	2015-17 Authorized FTE Positions	2017-19 Executive Budget	Increase
301 - State Department of Health	365.00	381.00	16.00
530 - Department of Corrections and Rehabilitation	836.29	846.29	10.00
475 - Mill and Elevator Association	147.00	153.00	6.00

Agency Decreases	2015-17 Authorized FTE Positions	2017-19 Executive Budget	(Decrease)
380 - Job Service North Dakota	237.76	181.61	(56.15)
180 - Judicial branch	391.00	354.50	(36.50)
640 - Main Research Center	361.12	336.12	(25.00)
405 - Industrial Commission	121.75	105.25	(16.50)
125 - Attorney General	250.00	234.00	(16.00)
630 - North Dakota State University Extension Service	265.98	252.98	(13.00)
627 - Upper Great Plains Transportation Institute	54.98	43.88	(11.10)
628 - Branch research centers	120.29	110.29	(10.00)

HB 1436 4-3-17 #1

Self-Funded vs. Fully-Insured state employee health plans
A self-funded health plan means that insurance is not purchased, but rather, the state insurance contributions are pooled into a state-owned reserve fund to pay claims and administrative expenses. Any money that isn't used to pay claims or administrative expenses stays in the fund.

In a fully-insured plan the state will pay premiums based on projected claims, but won't experience the benefit if the claims come in lower than expected. North Dakota Public Employees Retirement System (NDPERS) has for many years participated in the program's financial results, in most cases by receiving excess gains and accumulating reserves, and in some cases sharing underwriting losses and funding these out of accumulated gains.

What is the value of self-funding?
All 50 states provide health insurance coverage for state employees, with 49 of 50 offering self-funded and/or partially self-funded plans. North Dakota is the only state in the nation that offers only a fully-insured plan, and doesn't offer a self-funding option.

Self-funding is a proven, cost-effective method for providing employee benefits and is the preferred choice of the state's largest employers. Employers choose self-funding to control costs, save money and customize benefits. Plans can also keep their grandfathered status when transitioning to a self-funded plan, as long as they continue to meet grandfathered guidelines.

Tax savings
The Health Insurance Tax (HIT) impact averages 2.5-3% and applies to fully insured plans only. Self-funded plans do not pay the HIT tax, realizing direct savings.

No profit margin or risk charge
The profit margin and risk charge of an insurance carrier are eliminated through self-funding. Instead of paying a risk charge to the insurer in a self-funded arrangement, the sponsor will accumulate reserves by retaining program gains. These gains will provide cushion against occasional higher than expected claims not covered by stop-loss.

Health savings incentives
With fully-insured plans, wellness initiatives generally do not result in significantly lower health insurance costs. However, in a self-funding scenario, an overall improvement in employee health can lead to a reduction in claims, which feeds back into the plan's reserve funds. If those trends continue, there may be a reduction in the necessary contributions made by the state.

Risk management stop-loss programs
Managing the risk in self-funded plans is key. Heightened risk occurs when claims are higher than anticipated or when a plan is underfunded. Managing these risks are especially important with self-funded plans. Individual stop loss and aggregate stop loss levels can be purchased based on the state's comfort level and risk tolerance. The level of risk can be adjusted over time as their tolerance changes with the premium dependent on their level of tolerance.
Recommended risk management tools to support self-funded options include:

- adequate contributions into the pool
- securing stop-loss coverage
- building adequate reserves
- working with experienced consultants who specialize in self-funded groups

Carlson, Al H.

From: Knudson, Allen H.
Sent: Wednesday, January 25, 2017 8:04 AM
To: Carlson, Al H.; Delzer, Jeff W.
Subject: Health insurance premiums

Rep. Carlson:

The total funding included in Governor Dalrymple's 2017-19 executive budget for health insurance premiums is $477.3 million, of which $219.2 million is from the general fund. This is an increase of $45.6 million, of which $20.9 million is from the general fund compared to the 2015-17 biennium budget. Monthly premium rates are increasing by $119.25 or 10.6% from $1,130.22 in 2015-17 to $1,249.47 in 2017-19.

Let me know if you have any other questions.

Allen H. Knudson
ND Legislative Council
(701) 328-4231
aknudson@nd.gov

Carlson, Al H.

From: Clark, Jennifer S.
Sent: Wednesday, March 29, 2017 3:37 PM
To: Carlson, Al H.
Subject: Attached Sanford Contract Portion

Representative Carlson-

Here is a screen shot of the current contract PERS has with Sanford, relating to the escape clause:

8.2 This Agreement may be terminated by mutual agreement of both parties, upon 60 days notice, in writing.

Either party may terminate this Agreement effective 90 days following delivery of written notice to the other party, or at such later date as may be stated in the notice, under any of the following conditions:

a. If funding from federal, state or other sources is not obtained and continued at levels sufficient to allow for purchase of the services or supplies in the indicated quantities or term. The Agreement may be modified by agreement of the parties in writing to accommodate a reduction of funds.

b. If federal or state laws, rules or regulations are modified, changed or interpreted in such a way that the services are no longer allowable or appropriate for purchase under this Agreement or are no longer eligible for the funding proposed for payments authorized by this Agreement.

c. If any license, permit or certificate required by law, rule or regulation, or by the terms of this Agreement, is for any reason denied, revoked, suspended or not renewed.

Any such termination of this Agreement shall be without prejudice to any obligations or liabilities of either party already accrued prior to such termination.

d. In the event of a breach by either party, other than for nonpayment of premium, the other party may terminate this Agreement by written notice to the breaching party. The breaching party has 31 days to fully cure the breach. If the breach is not cured within 31 days after written notice, this Agreement will immediately terminate.

Jenn

Jennifer Clark
Counsel
ND Legislative Council
(701) 328-2916
jclark@nd.gov

TESTIMONY OF NDPERS
ENGROSSED HOUSE BILL 1436

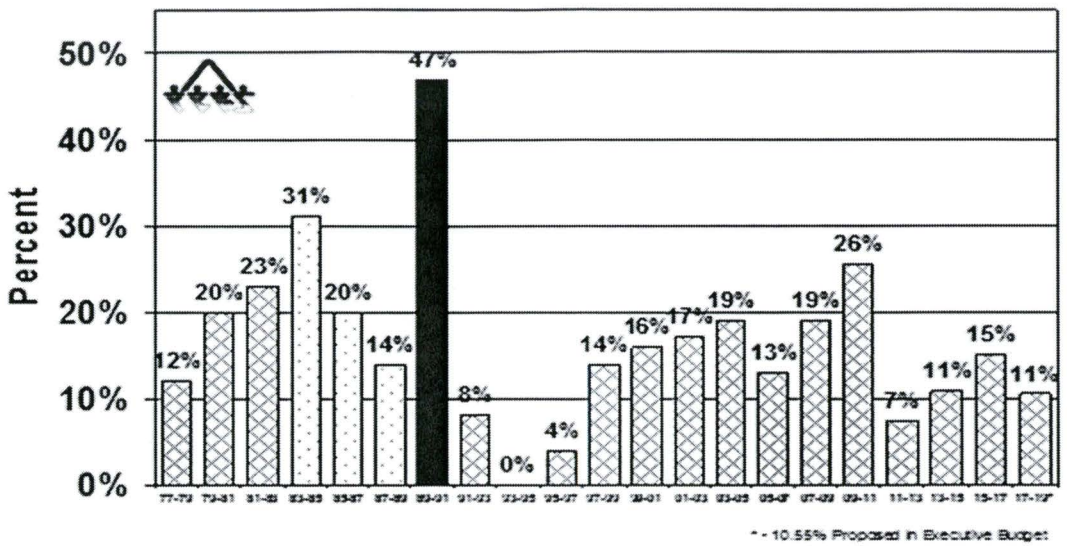
Madame Chair, members of the committee my name is Sparb Collins. I am the Executive Director of the North Dakota Public Employees Retirement System (NDPERS). I appear before you in a neutral position on this bill. While the board recognizes that it is your decision to decide the policy on the states bidding process and therefore defers to your guidance, they do note that the existing process is sound and provides for maximum competition for the states health plan business by allowing fully insured proposals to compete with each other and self insured proposals to compete with the fully insured. The board notes that this bill would limit that competition to self insured only. The board further notes that by limiting competition an unintended consequence may be the limitation of price competition for the plan. There are many considerations to this change that deserve careful study before making a change since the implications can be significant. The board is not opposed to self insure but does believe further study would help to clarify if this is in the best interest of all to have it as our sole option. Attachment #1 is information from our consultant, Deloitte that was given to the Legislative Employee Benefits Committee.

My comments will be in the following areas: 1) Plan history and rates; 2) fully insured vs. self-insured compared to the PERS hybrid contract; 3) PERS modified or hybrid contract performance, and 4) PERS staff observations.

1) Plan history and rates

The health plan has gone through three stages since about 1977. It was a traditional fully insured plan from 1977-83; it was self-insured from 1983-89 and it has been under the modified or hybrid fully insured contract since July 1989. The following table shows the rate increases over this time period.

State Health Premium Percentage Increase
From Previous Biennium
(Excludes Plan Design Changes)



* - 10.55% Proposed in Executive Budget

The 1989 biennium was the transition biennium from self-insured to the modified or hybrid fully insured plan.

While the plan was self-insured (83-89), it ran out of reserves in the 1987-89 biennium and medical claims could not be paid in a timely manner. Specifically we were not able to pay claims when they came due to the provider community. This situation raised significant concerns with members, providers and the legislature. The state had to put money into the plan so that claims could be paid since all reserves were gone and there was no other source of cash flow. Section 4 (3) of the bill provides a funding mechanism to address this situation under this proposal, specifically, a line of credit with the Bank of North Dakota.

As we look at the years the plan was self-insured, the plan's average increase was 21.7%. If we look at the years the plan was fully insured without the transition biennium, we see the average increase was 14%. With the transition biennium it was about 16%. These numbers do not indicate on their own that one method is superior over the other but they do show that neither on their own have an inherit advantage.

As we look at other states around us, we see how the family premium rates for PPO plans compare.

State	State Payment	Total Family Premium
South Dakota	$722	$1047
Idaho	$860	$979
Montana	$1054	$1381
North Dakota	**$1130***	**$1312****
Colorado	$1230	$1783
Minnesota	$1467	$1659
Nebraska	$1551	$1963
Iowa	$1689	$1987
Wisconsin	$1702	$1911
Wyoming	$1714	$1947

*Flat rate payment

** Equivalent Premium

It is our understanding that with the exception of ND, the others are self-insured. Here again, there are many variables that contribute to costs beside funding method which can include plan design, open/closed networks, number of providers, etc. But again, we do not see anything here that makes our unique funding method inferior to other self-insured plans.

2) Fully Insured vs Self-Insured vs PERS Hybrid Contract

Generally, employers have a choice between being fully insured or self-insured. As a result all employers fall on one side (fully insured) or the other (self-insured). However, PERS is unique in that it did not agree to a traditional fully insured contract. Instead it developed a unique contract that attempts to incorporate the best of both in a hybrid or modified contract. The following are the advantages of a traditional fully insured contract and are a part of our Hybrid or modified contract:

Advantages of Fully Insured

Disadvantages to self insurance

			PERS
1	Risk	Employer is not at risk for financial Losses	X
2	Employer must retain IBNR	Additional liability for IBNR (set NDCC at 1 to 1 1/2 months of claims or 26.8M to 40.2M)	X
3	Employer must have a reserve account	Employer must maintain and fund a reserve account Set In ND statute (40.2M to 80.4 M)	X
4	Employer does not have to maintain cash flow	Uneven cash flow due to fluctuation of claims from month to month - Potential that claims may be higher than funding	X

. If we were self-insured we would have these advantages, those with an "x" are a part of our modified or hybrid fully insured contract.

Advantages of Self Funding

(Disadvantages of Fully Insured)

			PERS
1	Reduction in taxes	Additional taxes are eliminated (HMO, state premium tax, MCHA)	X
2	Avoid ACA Fees	The Health Insurer tax from the ACA is not required from self-insured plans	
3	Administrative fees/risk fees	Some self funded plans see a decrease in administrative fees due to the elimination of built in risk charges	
4	Reserves/IBNR are held by the employer	Any investment income generated is retained by the employer	X
5	Flexibility	Allows for greater flexibility in plan design, incentive arrangements and contractual provisions	X
6	Pass through savings	Employer benefits from provider discounts, rebates and other favorable reimbursement mechanisms with full disclosure	X
7	Mandates	Do not have to comply with state mandates	X

Mandates: Are directly put into the PERS Statute by the Legislature instead of being handled through the insurance process

. Please note that #2 is likely to go away if f the repeal of the affordable care act is repealed and concerning mandates, those are directly provided by the legislature relating to PERS. As shown, our modified or hybrid contract already incorporates many of the advantages of self-insurance. Based upon the above, if we were self-insured we would gain the following:

Avoid ACA Fees	**The Health Insurer tax from the ACA is not required from self-insured plans**
Administrative fees/risk fees	**Some self-insured plans see a decrease in administrative fees due to the elimination of built in risk charges**

But we would lose the following advantages of being fully insured:

1	Risk	Employer is not at risk for financial Losses
2	Employer must retain IBNR	Additional liability for IBNR (set NDCC at 1 to 1 1/2 months of claims or 26.8M to 40.2M)
3	Employer must have a reserve account	Employer must maintain and fund a reserve account Set In ND statute (40.2M to 80.4 M)
4	Employer does not have to maintain cash flow	Uneven cash flow due to fluctuation of claims from month to month - Potential that claims may be higher than funding

3) PERS Hybrid Contract Performance

As we look at the existing PERS hybrid contract performance since the 1995 biennium, we can examine how the plan performed when there was positive performance vs when the plan had or could have negative performance.

Positive Performance

The following table shows the history of the plan since the 1995 biennium.

History of Health Plan Design changes and Buydowns Year	State premum % increase	Plan Changes	Buydown*
2016 (2017-19) Renewal	Proposed 10.5	Proposed: Plan design changes that would shift about 30% of the total increase to member out of pocket	$18.67 per active contract Proposed
2014 (2015-17) Full Bid	15.13		
2012(2013-15) Partial bid - Fully Insured Only	10.72		$20.04 per active contract
2010 (2011-2013) Renewal	7.40	Additional benefit requirements in the Health Care Reform Bill and the Mental Health Parity Act.	
2008 (2009-2011) Renewal	25.50	Eliminated EPO	$.14 per active contract
2006 (2007-2009) Renewal	19.00	Increased Cost Sharing	
2004 (2005-07)Full bid	13.00	Plan design changes added $1,000 RX coinsurance maximum	$24.52 per active contract
2002 (2003-05) Renewal	19.00	Plan design changes	$10.00 per active contract
2000 (2001-2003) Renewal	17.00	Increased Cost Sharing	
1998(1999-2001) Full bid	16.00	Increased Cost Sharing	$9.35 per active contract
1996 (1997-1999) Renewal	14.00	Increased Benefits & Lifetime Maximum	$20.71 per active contract

The shaded biennium's are those in which the plan returned refunds to our participating employers/members that developed due to the hybrid contract we have and the boards/vendors management of the program. Of the last 11 biennium's, we have refunded money back to our employers/members in 7 biennium's through premium buy downs (including the proposal for this biennium). You can see the amount of premium buy down that we have provided the state in each of those bienniums. This is a direct savings that has resulted due to positive plan performance and has been shared with the state to reduce the cost of our health plan. This is what would happen under a self insured plan and happens under our modified contract since this is one or our unique aspects.

In the past 10 years alone, we have received approximately $50 million of returned premiums under our hybrid contract. Of this amount, $11 million was used to buy down premiums in the 2013-15 biennium's and approximately $~~17~~ 15-16 million is being proposed for buy down in the 2017-19 biennium's. If the plan was self-insured and these gains would have occurred, they may not have been available to be refunded since they may have had to be retained for the required reserves as set out in NDCC 54-52.1-04.3.

Negative Performance

The second area to look at is when the plan has or would negatively perform. In the current biennium, the plan is projected to lose about $70 million (based upon current estimates). If the plan was self insured with Sanford with the same loss experience we would have had stop loss insurance to offset some of the above losses. The statute requires that we carry individual stop loss. We could have had purchased this at the $1 million deductible level or we could also purchase stop loss at the $750,000 level or $500,000 level.

We could also get aggregate stop loss (see discussion from Deloitte – attachment #1). This coverage is usually purchased for claims exceeding 115% to 120% of expected claims. This means we would be responsible for claims up to that level and after the reinsurance would kick in.

If we apply the following assumptions to the current biennium we find that most of the above loss (about 60 million at self insured) would have accrued back to the state this biennium after the estimated individual stop loss payments and since the aggregate stop loss would not have kick-in:

- Actual claims and administrative expenses from 7/1/15 – 2/28/17 provided by Sanford Health Plan were used
- Sanford's estimated incurred but not reported (IBNR) claims were used
- Average claims from the most recent 12 months were trended forward to estimate claims for March through June 2017
- ACA Health Insurer Tax (HIT) was removed

- Assumed individual stop loss insurance at a $1M deductible and aggregate stop loss at a 120% attachment point was purchased
- Assumed $3.7M in individual stop loss reimbursements per year based on actual large claims experience during the first 12 months of the biennium

This does not mean the same level of loss would occur with a different carrier or vendor but we do know something would have to be dramatically different. Since over 90% of the plans costs are associated with provider reimbursement based upon plan utilization this means that we would have had to significantly reduced provider payments or dramatically restricted utilization by us the members.

By contrast pursuant to our hybrid contract, we will be liable for only $3 million of this loss. For the next biennium we have negotiated this provision out of the contract and we will be liable for no losses. Recognizing that when a plan takes a loss, reserves should be increased, we have negotiated with Sanford for the next biennium that it will increase its reserves by $30 million effective July 1 of this year.

Based upon the above, it appears that if the plan would have been self-insured under Sanford this biennium, a loss would have accrued to the state and going forward reserves would need to be increased since they could have been exhausted.

2017-19 Business Plan

Using the historical process (the hybrid or modified contract), PERS has submitted a business plan for contracting going forward that will assure the State it will not incur any losses for the health plan in the 2017-19 biennium and that there will be no required reserving pursuant to NDCC 54-52.1-04.3.

In the proposed legislation, there is no business plan that has been developed by developed by PERS as yet and we will, therefore, rely on the board to develop a plan starting in May. This plan will be contingent on the results of the extension and the bidding process for 2017-19. Since the outcomes of these processes are unknown we cannot guarantee that we will not have losses in 2017-19 as has been guaranteed with the existing business plan. We also cannot guarantee coverage for the transition period (discussed below). We also will have to request from the state additional reserves, as we have done with Sanford and as directed by the legislature in NDCC 54-52.1-04.3 (discussed below).

4) PERS Staff Observations

Staffing

The PERS board included in the 2015-17 Budget request and in the 2017-19 request, contingent authority to hire staff if the plan is self- insured. Since we contracted for a fully insured plan, it was taken out. Please see attachment #2. **If this bill is to move**

forward we would request that this be added to the agency's appropriation in this bill.

Reserves

NDCC 54-52.1-04.3 requires the board to develop a contingency reserve fund. It also states "Upon the initial changeover from a contract for insurance pursuant to section 54-52.1-04 to a self-insurance plan pursuant to section 54-52.1-04.2, the board must have a plan in place which is reasonably calculated to meet the funding requirements of the chapter within sixty months". Preliminary analysis suggests that self-funded premium rates may need to be increased by.86% to 3.14% in order to build reserves to the required level. The high end accounts for the use of contingency reserves to buy down premium. Consequently, it should be noted that this would be an additional consideration in the bidding process.

Since the statute was changed to include the borrowing authority from the BND in this calculation, the minimum reserve requirement may be satisfied if no reserves are used this biennium to buy down premium. Since this is already in the legislative budget we changed our fiscal note to get our cash reserves back to $30 million. We would request that an appropriation be added to this bill to provide the necessary funding if this bill is to move forward or else we will be behind before we start.

In addition it was noted in the floor discussion on the bill on the House side that according to the Insurance Department:

> *"A line of credit is not acceptable to meet reserve requirements for any company domiciled in North Dakota. It is also not allowed for MEWAs, which is what I am assuming that if the state goes to self-funding, the trust established for 1436 would be regulated under in addition to the reserve requirements in 1436. If the line of credit should be drawn on for any reason, it would immediately become debt, and therefore a liability for the trust. Using it to satisfy the two reserve funding requirements, while apparently acceptable in the draft version of 1436, is not consistent with the laws regulating insurance"*

Consequently this will need to be more fully reviewed by the legislature and the board and would have an impact on our fiscal note and our requested additional appropriation request.

Transition Period

This would require PERS to go to bid and change the plan from the existing arrangement to a new arrangement. The proposed bill moves the start date of the coverage period to January 1, 2018. The current renewal offer from Sanford assumes a 2-year coverage period beginning July 1, 2017. Sanford may require a different premium rate to insure a

six month period than was agreed upon for a 2-year period, or they may be opposed to insuring the plan for that period. This may require using additional reserves or borrowing from the BND.

The PERS attorney has also reviewed this provision and indicated that if PERS was unable to negotiate an extension with the existing carrier, it could not consider self-insurance for the interim time period under existing statute unless a full bid process was undertaken. The board would have to start a new bid process upon notification that they could not extend the contract, which could not be completed by July 1. The result would be no coverage for any of our members until a new arrangement could be reached, pursuant to existing statutory requirements. **Additional statutory authority is required to resolve this issue in this bill and we would request that it be added if the bill is to move forward. Without such authority it is possible that we may not be able to place the plan by July 1 for the transition period and our members would not have health insurance.**

Implementation Timeframe

Given the size and complexity of the NDPERS plan, changing carriers is a significant effort. I have brought along a copy of the implementation plan used most recently and will leave it with the committee. You will note that it is extensive and takes time to complete all the steps. As this demonstrates, there are many variables that must be worked through to ensure that a transition does not create difficulties in the continuity of care or benefits for participating members. At a minimum, most carriers have indicated that 90 days is necessary, with the NDPERS preference being 120 days or longer, in order to ensure continuity of coverage during the course of the transition. **Extend the Implementation/Bid timeframe to 12 months with a July 2018 effective date.**

Bid Timeframe

An effective bid process must allow sufficient time for the following:

1. Preparation of the Request for Proposals (RFP)
2. Marketing the RFP
3. Allowing time for interested parties to review the RFP
4. Allowing interested parties to submit questions and receive responses
5. Allowing the interested parties sufficient time to prepare final proposals once questions have been answered
6. Time for review of the proposals by
    a. Consultant
    b. NDPERS Staff

c. NDPERS Board

7. Allowing time to interview the bidders and get best and final offers.
8. Time for unexpected contingencies. (For example in 2014/15, NDPERS rejected all fully insured bids and rebid the plan for a second time)

The timeline for the last bid is below. This demonstrates that the process can take over 6 months in the event there is a rebid (this does not include the time to prepare the bid).

- July 9, 2014 – Fully-insured Bid issued
- August 13th – Self-insured Bid issued for medical and prescription drug plans
- September 4th – Fully-insured Proposals Due
- October 10th – Self-Insured Proposals Due
- October 21st – Staff interview with BCBS and Sanford (Fully-insured)
- October 23rd – Board Rejects Fully-insured Bids, and issues a new RFP.
- October 29th – Fully-insured RFP released
- November 19th – Fully-insured Proposals due
- November 24th – Staff interview with BCBS and Sanford (Self-Insured)
- November 25th – Staff interview of PBM vendors
- December 4th – approved sending PBM contracts
- December 18th – NDPERS Board reviewed the Health plan bids
- January 2, 2015 – Best and Final Offer (BAFO) responses due
- January 5th – NDPERS Board Interviews BCBS and Sanford (fully-insured)
- January 15th – NDPERS Board interviews PBM vendors
- January 19th – NDPERS Board members and staff conduct a site visit of Sanford Health Plan
- February 5th – NDPERS Board reviews proposals (fully-insured, self-insured, Rx)
- February 13th – NDPERS Board continues its review of proposals (fully-insured, self-insured, Rx)
- February 19th – NDPERS Board awards bid

This timeline will be shorter since it is only for self insured bids. In addition to adding the above requested time for the implementation timeline we would also need time to have an effective the bid process.

Extend the Implementation/Bid timeframe to 18 months with a January 2019 effective date for the bid timeframe and implementation timeline.

Legal Issue

There may be concerns with Section 18 of Article I of the North Dakota Constitution relating to impairment of contract. **This could be resolved by stating this is not effective until July 2021.**

Membership

No effect on membership except for the change of vendor if determined in the bid.

Potential impacts relating to other legislation considered this session

HB 1023: As passed by the Senate no conflicts exist with HB 1023. However as proposed by the House conflicts do occur. The following are some of those conflicts with the House version. The changes proposed in Sections 27 and 28 of 1023 increase oversight of PERS by the employee benefits programs committee as well as communication between the two entities. While not a conflict in law, the changes proposed in Section 1 of 1436 are a conflict in policy as these changes reduce the impact of such oversight and communication. The changes proposed in Sections 32 and 33 of 1023 would result in a sole fiduciary oversight of the PERS office, and as previously indicated there are fiduciary responsibilities implicated in administration of the health plan. The requirement to initiate a plan of self-insurance under 1436 increases the potential for conflicts of interests under the governance structure established by 1023. Sections 5 and 33 of 1023 restrict PERS from using health reserve funds under 54-52.1-06 to reduce premium cost, while 1436 authorizes PERS to use them for funding a self-insured plan only. In addition, a less obvious conflict stems from the fact that 1436 requires a self-insured plan beginning 1/1/2018 to have the same benefits available under the plan in effect on 7/1/17. As previously indicated, if PERS is unable to use the reserves to buy down premiums this will result in a loss of grandfathered status and a corresponding change in benefits effective 7/1/17. Therefore, the self-insured plan will only be providing the reduced benefits available under a non-grandfathered plan.

HB 1406: This did not pass the Senate. The provisions of 1436 contradict two provisions of 1406 as proposed. 1406 limits a contract for insurance, whether under a fully-insured, HMO, or self-insured plan to two years only. Whereas, Section 3 of 1436 permits a 2 year contract and one 2 year renewal under a self-insured plan. 1406 restricts the group insurance plan design to only that which can be purchased with funds appropriated by the legislative assembly. Whereas, Sections 4 and 6 of 1436 permit, under a plan of self-insurance, the board to have access to a line of credit, and use reserve funds to maintain coverage levels in effect on 7-1-17.

HB 1407: This did not pass the Senate. However 1407 as proposed would have restricted the term of the contract for a fully-insured plan to 2 years; it also indicates it is intended to apply to a fully-insured contract in effect on the bill's effective date. This contradicts Section 5 of 1436 which restricts such a contract to 6 months

HMO's: PERS presently has one HMO that is a part of the plan. Not sure if the proposed wording would allow us to maintain that option or require us to drop it if self-insured.

This bill was reviewed by the Employee Benefits Programs Committee and given an "unfavorable" recommendation.

Madame Chair, members of the committee this concludes my testimony and as noted if this bill is to move forward we would request the above minimum changes. Thank you for providing me this opportunity.

HB 1436 4-3-17 #2

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Memo

Date: March 13, 2017

To: Sparb Collins, Executive Director

NDPERS

From: Josh Johnson and Jon Herschbach, Deloitte Consulting LLP

Subject: ACTUARIAL REVIEW OF PROPOSED BILL 17.1008.03000 (HB1436)

The following summarizes our review of the proposed legislation.

OVERVIEW OF PROPOSED BILL

The proposed bill would require the uniform group insurance program to become self-insured for an 18-month period beginning on January 1, 2018 and would change the duration of the coverage period beginning July 1, 2017 to 6 months. The proposed bill also establishes a $50,000,000 line of credit that the board can use to fund reserves, purchase stop loss, or pay for other self-insurance expenditures.

STOP LOSS

It is mandated that NDPERS must purchase individual stop loss if the plan becomes self-insured. Individual stop loss limits the plan's liability for each members' cost of medical and pharmacy claims to a specific deductible amount. The deductible is selected based on the amount of risk the program wishes to bear. A lower deductible limits the plans exposure more but also costs more.

NDPERS could also choose to purchase aggregate stop loss. Aggregate stop loss limits the plans total exposure to a percentage of expected claims, called the attachment point. Common attachment points are 120% and 125% of expected claims. Expected claim amount and the attachment point are calculated by the stop loss insurer. The plan sponsor does not have any input into this process.

Estimated per contract per month (PCPM) rates for stop loss insurance are listed in the table below:

Individual Stop Loss

Deductible	Estimated Cost (PCPM)
$500,000	$28 - $35
$750,000	$15 - $20
$1,000,000	$7 - $10

Aggregate Stop Loss

Attachment Point	Estimated Cost (PCPM)
120%	$0.50 - $1.00
125%	$0.40 - $0.75

CONTRACTS

Currently NDPERS has contracted health insurance from a single vendor. If NDPERS becomes self-insured, they will need to contract with different vendors for several different services based on best-in-class quotes/bids. This would include medical plan administration, pharmacy benefits management, stop loss insurance, wellness program and could include additional vendors for other optional services. Increasing the number of vendors' contracts will increase NDPERS' administrative burden and would create additional consulting fees for RFP analysis assistance. In the past budgets, NDPERS has included authority for two additional staff to be added to assist with the administration of self-insurance.

ADDITIONAL RISK

NDPERS would take on additional risk by becoming self-insured. If the plan's claims cost exceeds premiums, the plan's reserves will be spent down. NDPERS is required to maintain a contingency reserve equal to a minimum of 1.5 months of claims (12.5% of annual claims). If the contingency reserve is below this level at any point, premiums must be increased in subsequent biennium periods with a load that will build the reserve back up to the statutory minimum. Currently, NDPERS contingency reserves hold about $35M and would require an estimated additional $5-6M to meet the minimum requirement.

Stop loss insurance mitigates self-insurance risk but the only way to eliminate risk is by remaining fully-insured. Commonly, the lowest attachment point available for aggregate stop loss is 120%. As an example, in the event that a 120% aggregate stop loss claim is made, NDPERS will have lost its entire reserve (12.5% of annual claims) as well as an additional ~7.5%, which is approximately ~$25M. These scenarios are not common which is reflected in the pricing (estimated premium for 120% on a group of this size is $0.50-$1.00 PEPM). However, it is important to illustrate the risk exposure that remains to NDPERS even with stop loss insurance purchased.

Self Funded Insurance (2.0 FTEs)

The health insurance environment continues to change and evolve.

If the decision is to go self insured we know that it will have an effect on PERS agency operations. The following are some of those effects:

- ACA compliance – reporting requirements
- Additional audit requirements to ascertain whether PBM has complied with the term of its agreement with regard to:
  - Pricing
  - Obligations to satisfy annual guarantees
  - Financial benefit guarantees related to subsidies, claims processor fees, manufacturer discounts, rebates, service fees
  - Medicare Part D obligations related to LIS, LIC, and TrOOP
  - Accuracy related to the management of NDPERS data
  - Satisfaction of average annual guarantees
- Monitoring activities to include:
  - Pricing of newly available generic drugs to ensure we are receiving the lowest cost from PBM
  - Attendance at quarterly meetings to negotiate drug additions or deletions, modify any previously agreed guarantees to capitalize on any improvements
  - Changes in formulary
  - Financial benefit and DIR guarantees (at least annually)
  - Implementation of new programs to improve drug coverage, improve health of plan participants, reduce costs;
  - Develop programs to decrease purchase of specialty drugs and review responsibility for quarterly prescription drug reports.
  - Assess to feasibility of negotiating independent contracts with pharmaceutical manufacturers to obtain better financial benefits.
  - General responsibilities in connection with Medicare Part D Plan to include CMS compliance.
- Liaison responsibilities between member and 3rd party vendors:
  - Increased member communications (calls, correspondence, e-mails)
  - Assistance with member inquiries (coverage, denials, appeals, complaints)
  - Documenting procedures and policies developed in response to various issues to ensure consistent operating protocols.

- Mandate requirements
- Plan Design maintenance

Consequently, this optional request proposes two FTE. One would be to oversee the self insured contracts. Specifically, the Rx contract would require a more active role by the agency. We would anticipate this would be an individual with a medical background and a particular expertise in Rx. The second position would be for a member service specialist in the health insurance area. This individual would be responsible for working with our members and employers in explaining and resolving issues with the group medical plan and Rx plan. Here again we would be looking for someone with a medical background.