

Health Care Reform Review Committee Testimony

February 2, 2012

Chairman Keiser and committee members, for the record I am Rod St. Aubyn representing Blue Cross Blue Shield of North Dakota. I was asked to present information for your committee concerning the recently released bulletin regarding Essential Health Benefits (EHB) by the Center for Consumer Information and Insurance Oversight (CCIIO) which is part of the United States Health and Human Services (HHS). The bulletin on Essential Health Benefits was released on December 16, 2011 and a more recent guidance was released on January 25, 2012, regarding the 3 largest small group health plans in each state.

The bulletin indicates that states must select a plan to be that state's "benchmark plan" by the third quarter of 2012 (presumably by September 30, 2012). To determine which plans are the top 3 plans, enrollment will be based on enrollment figures submitted for March 31, 2012.

It appears that HHS is trying to provide flexibility for the states for a transitional period of 2014 through 2015. Beginning in 2016, HHS will finalize what EHB's must be in each health plan including any state mandates. At that point, any state health insurance mandates that go beyond the minimal EHB's must be paid by the state.

States are given the following options when selecting the state's "benchmark plan":

1. The largest plan by enrollment in any of the three largest small group insurance products in the State's small group market.
2. Any of the largest three State employee health benefit plans by enrollment.
3. Any of the largest three national FEHBP plan options by enrollment; or
4. The largest insured commercial non-Medicaid Health Maintenance Organization (HMO) operating in the State.

If the state does not exercise the option to select a benchmark health plan, HHS intends to propose that the default benchmark plan for the State would be the largest plan by enrollment in the largest product in the State's small group market. Please be aware of the difference between a "plan" and a "product". They define "products" as the services covered as a package by an issuer, which may have several cost-sharing options and riders as options. A "plan" refers to the specific benefits and cost sharing provisions available to an enrolled member. As an example, we offer a Select Choice "product" with many difference deductible options, ie \$250, \$500, \$1,000, etc. As we understand the bulletin, Select Choice \$250 would be the "product" (Select Choice) and the "plan" (\$250 deductible). However, as described in the bulletin,

calculating the enrollment is confusing. Do you first calculate the total enrolled in a “Select Choice” product and then narrow it down with those enrolled in the different deductibles, to get one total and compare that to the other “products” and “plans”? In that scenario, the three largest enrollments would be the CompChoice 250, CompChoice 1000, and Select Choice 250. However, in reviewing the most recent guidance, it appears that they are looking at the 3 largest “products” first, and then identifying the largest “plan” within each “product”. However, we still don’t know if the enrollment totals include only non-grandfathered plans, or both grandfathered and non-grandfathered plans. It appears based on their determination of the 3 largest products from the 6/30/2011 data that they are including both grandfathered and non-grandfathered products. The guidance from last week indicates that the largest products in ND were all BCBSND products – Comp Choice, Select Choice, and Classic Blue.

The timing for selection is also problematic. As previously stated, the state must select the “benchmark plan” by the end of the 3rd Quarter in 2012. However, who determines that – the legislature, the Governor, the Insurance Commissioner? I would assume that the Governor would have the authority since the legislature will not be in session, but that is just my assumption. There is no clear guidance from HHS. What is problematic is the timing for determining what will be the 3 largest products. Each insurer must submit data concerning their plans and enrollment to HHS each quarter for uses in their temporary insurance portal found at HealthCare.gov. However, HHS is very delayed in this process. For the enrollment data for December 31, 2011, insurers must submit their data to HHS by mid-April, 2012 and it would be on their computer about mid-May, 2012. That means for the end of the 1st Quarter of 2012 (official date for collecting the top 3 plans for EHB purposes), that data will be submitted around mid-July, 2012 and be on the computer by Mid-August, 2012. And the state will need to make a determination by the end of September, 2012.

As with any new program, the bulletin created more questions than answers. CCIIO asked for comments by January 31, 2012. We submitted several questions that were to be included in a comment letter from the Blue Cross Blue Shield Association.

In order to evaluate what we may have to consider for EHB, our staff developed a chart showing the 10 required categories and a substantial list of subcategories that our Association suggested when they evaluated different Blue Cross plan benefits. This chart also includes columns for the NDPERS Plans, the 3 FEHBP Plans, the state’s two HMO’s, and also a column for the Federal Default Plan (currently Comp Choice). This chart also indicates the state mandates. It provides a means for comparing the different plans for evaluating the different state options.

However in reviewing our chart several questions have been raised. In short – EHB cannot have an annual or lifetime dollar limit. There can be visit limits, but no annual dollar limits. Where this is problematic is in determining the “benchmark plan”. Do all subcategories become EHB’s? As an example, our plans include an infertility benefit with a \$500 lifetime deductible and a \$20,000 lifetime maximum. If our plan is selected, all plans would have to provide infertility benefits with NO lifetime maximums. These services are very costly and without limits the products could become unaffordable for ND citizens.

Another question involves the subcategories. If a plan has some annual visit limits for some subcategories, do all plans have to offer the same minimum limits for those subcategories? Do all plans have to have the same allowances for some of these subcategories for percentage of allowed charge and copayments?

As you can see there are a lot of unanswered questions that will have to be resolved by HHS. In the meantime, it may be helpful for the committee to consider using this chart as a template and consider gathering an inventory from the other insurers within the State’s options. Upon further study, this committee may want to make a recommendation to the entity that would have the authority to determine the State’s “benchmark” plan. However, I would caution that the State carefully study the ramifications of just accepting the Federal Default Plan. That could result in some unintended consequences if it would result in removal of a current lifetime or annual limit.

Mr. Chairman and committee members, thank you for the opportunity to speak to you on the Essential Health Benefits. I would be willing to answer any questions you may have.

Four Benchmark Plan Types

1. The largest plan by enrollment in any of the three largest small group insurance products in the State's small group market;
2. Any of the largest three State employee health benefit plans by enrollment;
3. Any of the largest three national FEHBP plan options by enrollment; or
4. The largest insured commercial non-Medicaid Health Maintenance Organization (HMO) operating in the State.

Major Benefit Category	Benefit Subcategories	Comp Choice NGF	Select Choice NGF	Classic Blue NGF	NDPERS PPO GF	NDPERS NGF	NDPERS HDHP NGF	FEHBP Standard/ Basic	FEP GEHA	Heart of America HMO	Sanford Elite 1 plan	Federal Default Plan*
Ambulatory Patient Services #15 and 16	Primary Care Office Visits	X	X	X	X	X	X	X	X			X
	Specialist Office Visits	X	X	X	X	X	X	X	X			X
	Diagnostic X-ray	X	X	X	X	X	X	X	X			X
	Other Diagnostic Tests	X	X	X	X	X	X	X	X			X
	Advanced Imaging (MRI, CT, PET, etc)	X	X	X	X	X	X	X	X			X
	Urgent Care Services	X	X	X	X	X	X	X	X			X
	OP Surgery	X	X	X	X	X	X	X	X			X
	Radiation Therapy	X	X	X	X	X	X	X	X			X
	Chemotherapy	X	X	X	X	X	X	X	X			X
	OP Infusion Therapy	X	X	X	X	X	X	X	X			X
	Injectable Drugs given during office visit	X	X	X	X	X	X	X	X			X
	Oral Drugs given during office visit	X	X	X	X	X	X	X	X			X
	Allergy Testing	X	X	X	X	X	X	X	X			X
	Allergy Treatment	X	X	X	X	X	X	X	X			X
	Nutritional Counseling											
	Diabetes	X	X	X	X	X	X	X	X			X
	Chronic Renal Failure	X	X	X	X	X	X	X	X			X
	Anorexia	X	X	X	X	X	X	X	X			X
	Bulimia	X	X	X	X	X	X	X	X			X
	PKU	X	X	X	X	X	X	X	X			X
	Hyperlipidemia	X	X	X	X	X	X	X	X			X
	Gestational Diabetes	X	X	X	X	X	X	X	X			X
	Hypertension	X	x	X	NC	X	X	X	X			X
	Obesity	X	X	X	X	X	X	X	X			X
	Marital Counseling	NC	NC	NC	NC	NC	NC	NC	NC			NC
	Renal Dialysis	X	X	X	X	X	X	X	X			X
	Home Infusion Therapy	X	X	X	X	X	X	X	X			X
	Hospice	X	X	X	X	X	X	X	X			X
	Home Health Care	X	X	X	X	X	X	X	X			X
	Private Duty Nursing	X	X	X	X	X	X	NC	X			X
	Chiropractor Services- #1	X SM	X SM	X SM	X SM	X SM	X SM	X	X			X SM
	Routine Podiatry	NC	NC	NC	NC	NC	NC	NC	NC			NC

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	Hearing Exams	X	X	X	X	X	X	X	X			X
	Biofeedback	X	X	X	NC	NC	NC	NC	NC			X
	Court Ordered Services	NC	NC	NC	NC	NC	NC	NC	?			NC
	Injuries from Criminal Activity (felony)	NC	NC	NC	NC	NC	NC	NC	?			NC
	Acupuncture	NC	NC	NC	NC	NC	NC	X	X			NC
	Acupressure	NC	NC	NC	NC	NC	NC	NC	?			NC
	Massage Therapy	NC	NC	NC	NC	NC	NC	NC	NC			NC
	Homeopathy	NC	NC	NC	NC	NC	NC	NC	NC			NC
	Naturopathy	NC	NC	NC	NC	NC	NC	NC	NC			NC
	Dental Services related to Accident	X	X	X	X	X	X	X	X			X
	Oral Surgery – removal of impacted teeth	NC	NC	NC	NC	NC	NC	X	X			NC
	General Dental or Oral Surgery	NC	NC	NC	NC	NC	NC	X	X			NC
	Oral Surgery for Cleft Lip/Palate	X	X	X	X	X	X	X	X			X
	Orthognathic Surgery	X	X	X	X	X	X	X	NC			X
	Oral Surgery for Medical Tumors	X	X	X	X	X	X	X	X			X
	Reconstructive Surgery #14	X SM	X SM	X SM	X SM	X SM	X SM	X	X			X SM
	Cosmetic Surgery	NC	NC	NC	NC	NC	NC	NC	NC			NC
	Treatment of TMJ # 8	X SM	X SM	X SM	X SM	X SM	X SM	X	Xsurg			X SM
	Ambulance											
	Ground #13	X SM	X SM	X SM	X SM	X SM	X SM	X	X			X SM
	Air #13	X SM	X SM	X SM	X SM	X SM	X SM	X	X			X SM
Emergency Services	Room, Physician, Imaging Testing and Supplies	X	X		X	X	X	X	X			X
Hospitalization #15 and 16	Inpatient Surgery	X	X		X	X	X	X	X			X
	Inpatient Medical	X	X		X	X	X	X	X			X
	Skilled Nursing	X	X		X	X	X	X	X			X
	Rehab	X	X		X	X	X	X	X			X
	Hospice	X	X		X	X	X	X	X			X
	Private Duty Nursing	NC	NC		NC	NC	NC	NC	NC			NC
	Bariatric Surgery	X	X		X	X	X	X	X			X
	Organ Transplants	X	X		X	X	X	X	X			X
	Delivery of donor organ	X	X		X	X	X	X	X			X
	Removal of donor organ	X	X		X	X	X	X	X			X
	Transportation of recipient	X	X		X	X	X	NC	X			X
	Donor search	NC	NC		NC	NC	NC	NC	NC			NC
	Lodging	NC	NC		NC	NC	NC	NC	X			NC

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Maternity & Newborn Care	Prenatal Care	X	X	X	X	X	X	X	X			X
	Delivery #11	X SM	X SM	X SM	X SM	X SM	X SM	X	X			X SM
	Normal newborn nursery & care #3	X SM	X SM	X SM	X SM	X SM	X SM	X	X			X SM
	Post partum care	X	X	X	X	X	X	X	X			X
	Complications of pregnancy #7	X SM	X SM	X SM	X SM	X SM	X SM	X	X			X SM
	Neonatal Intensive Care	X	X	X	X	X	X	X	X			X
	Delivery by Mid-wife in home	NC	NC	NC	NC	NC	NC	NC	NC			NC
	Circumcision	X	X	X	X	X	X	X	X			X
	Abortion (medically necessary)	X	X	X	X	X	X	X	X			X
	Infertility											
	Services to diagnose infertility	X	X	X	X	X	X	X	X			X
	Services to treat underlying cause of infertility	X	X	X	X	X	X	X	X			X
	Surrogacy	NC	NC	NC	NC	NC	NC	NC	NC			NC
	Artificial insemination	X	X	X	X	X	X	NC	NC			X
	In-vitro fertilization	X	X	X	X	X	X	NC	NC			X
	Voluntary sterilization											
	Men	X	X	X	X	X	X	X	X			X
	Women	X	X	X	X	X	X	X	X			X
	Reversal of sterilization	NC	NC	NC	NC	NC	NC	NC	NC			NC
Mental Health & Substance Use Disorder Services including Behavioral Health Treatment #4 and 5	Outpatient Substance Abuse	X	X	X	X	X	X	X	X			X
	Outpatient Mental health	X	X	X	X	X	X	X	X			X
	Inpatient Mental health	X	X	X	X	X	X	X	X			X
	Inpatient Substance Abuse	X	X	X	X	X	X	X	X			X
	Inpatient Residential Treatment Ctr	X	X	X	X	X	X	NC	X SA*			X
	Partial Day Hospitalization	X	X	X	X	X	X	X	X			X
	Freestanding Rehab Facility	X	X	X	X	X	X	X	X			X
	Group therapy	X	X	X	X	X	X	X	X			X
	Psychoanalysis	X	X	X	X	X	X	X	X			X
	Psychological Testing	X	X	X	X	X	X	X	X			X
	Methadone Maintenance	X	X	X	X	X	X	X	X			X

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	Supervised Living	NC	NC	NC	NC	NC	NC	NC	NC			NC
	Family Counseling	X	X	X	X	X	X	X	X			X
	Applied Behavior Analysis	NC	NC	NC	NC	NC	NC	NC	?			NC
Prescription Drugs #2	Brand Drug	X	X	X	X	X	X	X	X			X
	Generic Drug	X	X	X	X	X	X	X	x			X
	Specialty Drug	X	X	X	X	X	X	X	X			X
	Oral Contraceptives	NC	NC	X	NC	x 7/1/2013	x 7/1/2013	X	X			NC
	Injectable Contraceptives	NC	NC	X	NC	x 7/1/2013	x 7/1/2013	X	X			NC
	Implanted Contraceptives	NC	NC	X	NC	x 7/1/2013	x 7/1/2013	X	X			NC
	Smoking Cessation Drugs	X	X	X	NC	X	X	X	X			X
	Hormone Replacement therapy	X	X	X	X	X	X	X	X			X
	Anti-Psychotic Drugs	X	X	X	X	X	X	X	X			X
	Psychotropic Drugs	X	X	X	X	X	X	X	X			X
	Growth Hormones	X	X	X	X	X	X	X	X			X
	Medical Foods – PKU #10	X SM	X SM	X SM	X SM	X SM	X SM	X	?			X SM
	Weight Loss Drugs	X	X	X	X	X	X	NC	NC			X
	Infertility Drugs	X	X	X	X	X	X	NC	NC			X
	Sexual Dysfunction Drugs	X	X	X	X	X	X	NC	NC			X
	Prenatal Vitamins	X	X	X	X	X	X	X	X			X
	Drugs for hair loss	NC	NC	NC	NC	NC	NC	NC	NC			NC
Rehabilitative & Habilitative Services & Devices	Cardiac Rehab	X	X	X	X	X	X	X	X			X
	Pulmonary Rehab	X	X	X	X	X	X	X	?			X
	Outpatient Physical Therapy	X	X	X	X	X	X	X	X			X
	Occupational Therapy	X	X	X	X	X	X	X	X			X
	Speech Therapy	X	X	X	X	X	X	X	X			X
	Therapy for general conditioning	NC	NC	NC	NC	NC	NC	NC	NC			NC
	Therapies for job training	NC	NC	NC	NC	NC	NC	NC	NC			NC
	Habilitative for congenital or birth defect	X	X	X	X	X	X	X	?			X
	Habilitative for disability from medical condition	X	X	X	X	X	X	X	?			X
	Habilitative delivered through schools	NC	NC	NC	NC	NC	NC	NC	NC			NC
	Medical Equipment & Supplies											
	Orthotics and special footwear	X	X	X	X	X	X	X	NC			X
	Prosthetics	X	X	X	X	X	X	X	X			X

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	Replacement or repair of HME	X	X	X	X	X	X	X	X			X
	Breast Prosthesis	X	X	X	X	X	X	X	X			X
	Medical Devices	X	X	X	X	X	X	X	X			X
	Hearing aids other than cochlear implants <18	X	X	X	X	X	X	X	X			X
	Cochlear implants	X	X	X	X	X	X	X	X			X
	Wigs and Scalp Prosthetics	NC	NC	NC	NC	NC	NC	X	NC			NC
	Items of Personal Comfort, Convenience, or hygiene items (humidifiers, raised toilet seats, shower chairs)	NC	NC	NC	NC	NC	NC	NC	NC			NC
	Home exercise or therapy equipment	NC	NC	NC	NC	NC	NC	NC	NC			NC
	Pools, whirlpools, spas, hydrotherapy	NC	NC	NC	NC	NC	NC	NC	NC			NC
Laboratory Services	Diagnostic	X	X	X	X	X	X	X	X			X
	Genetic Testing	X	X	X	X	X	X	X	NC			X
Preventive & Wellness Services & Chronic Disease Mgmt	Preventive Health Mandated by ACA (immunizations, well child and adult care)	X	X	X	NA	X	X	X	X			X
	Standard GF preventive (\$200)	NA	NA	NA	X	NA	NA	NA	NA			NA
	Mammography # 6	X SM	X SM	X SM	X SM	X SM	X SM	X	X			X SM
	Prostate Specific Antigen #9	X SM	X SM	X SM	X SM	X SM	X SM	X	X			X SM
	Routine Hearing Tests	NC	NC	NC	NC	NC	NC	NC	NC			NC
	Eye Refractions	NC	NC	NC	NC	NC	NC	NC	NC			NC
	Diabetic Education	X	X	X	X	X	X	X	X			X
	Personal items such as health club memberships, exercise equipment, personal trainers	NC	NC	NC	NC	NC	NC	NC	NC			NC
	Preventive care for Women (8/1/2012)											
	Screening for gestational diabetes between 24 and 28 wks	X	X	X	X	X	X	X	X			X
	Screening for gestational diabetes at 1 st prenatal visit at high risk for diabetes	X5/1/2013	X 8/1/2012	X 8/1/2012	NA	X 7/1/2013	X 7/1/2013	X 1/1/2013	X 1/1/2013			X5/1/2013
	HPV testing > 29 y/o every 3 years if normal pap	X5/1/2013	X 8/1/2012	X 8/1/2012	NA	X 7/1/2013	X 7/1/2013	X 1/1/2013	X 1/1/2013			X5/1/2013

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	Annual counseling on sexually transmitted infections for all sexually active women	X5/1/2013	X 8/1/2012	X 8/1/2012	NA	X 7/1/2013	X 7/1/2013	X 1/1/2013	X 1/1/2013			X5/1/2013
	Annual screening for HIV for sexually active women	X5/1/2013	X 8/1/2012	X 8/1/2012	X	X 7/1/2013	X 7/1/2013	X 1/1/2013	X 1/1/2013			X5/1/2013
	Lactation support and counseling by a trained provider	X5/1/2013	X 8/1/2012	X 8/1/2012	NC	X 7/1/2013	X 7/1/2013	X 1/1/2013	X 1/1/2013			X5/1/2013
	Rental of Lactation Equipment	X5/1/2013	X 8/1/2012	X 8/1/2012	NC	X 7/1/2013	X 7/1/2013	X 1/1/2013	X 1/1/2013			X5/1/2013
	Screening & counseling for interpersonal and domestic violence	X	X	x	X	X 7/1/2013	X 7/1/2013	X 1/1/2013	X 1/1/2013			X
	Minimum one well-woman preventive visit annually	X	X	x	X	X 7/1/2013	X 7/1/2013	X 1/1/2013	X 1/1/2013			X

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	Chronic Disease management	Managed thru patient centered medical home	Managed thru patient centered medical home	Managed thru patient centered medical home	Managed thru patient centered medical home	Managed thru patient centered medical home	Managed thru patient centered medical home	Managed thru patient centered medical home	?			Managed thru patient centered medical home
	Diabetes	↓	↓	↓	↓	↓	↓	↓	?			↓
	Coronary Artery Disease								?			
	Chronic obstructive Pulmonary Disease								?			
	Hypertension								?			
	Asthma								?			
	Kidney Failure								?			
	Cancer								?			
	Low Back	↓	↓	↓	↓	↓	↓	↓	?			↓
	Pediatric Oral Services	NC	NC	NC	NC	NC	NC	X	X			NC
Pediatric Services, including oral and vision care	Pediatric Vision Care	NC	NC	NC	NC	NC	NC	X	X			NC
	Dental Anesthesia and Hospitalization < 9 years old #12	X SM	X SM	X SM	X SM	X SM	X SM	X	X*			X SM
									*only w/physical impairment			
For Pediatric Oral and Vision services, HHS is considering using FEDVIP or CHIP program as benchmark for coverage for this category.												
*Largest Plan by Enrollment in the Largest Product in the State Small Group Market. We assume this to be BCBSND CompChoice												
X SM = Covered, ND State Mandate- see corresponding number for explanation of mandate on page 9												
NC = Non covered												
NA = not applicable												
X = Covered services that may be subject to medical policy or limitations of the benefit plan such as visit limits or dollar maximums												
X SA = Covered for substance abuse diagnoses												

Major Benefit Category	Benefit Subcategories	Comp Choice NGF	Select Choice NGF	Classic Blue NGF	NDPERS PPO GF	NDPERS NGF	NDPERS HDHP NGF	FEHBP Standard/ Basic	FEP GEHA	Heart of America HMO	Sanford Elite 1 plan	Federal Default Plan*
Explanation of ND state mandates												
1 .	§26.1-36-06 – Chiropractic mandate. FEHBP has visit limitations of 12 for Standard and 20 for Basic.											
2 .	§26.1-36-06.1 - coverage for off-label uses of prescription drugs cannot be denied if the drug is recognized for the particular treatment in standard medical reference materials or literature											
3 .	§26.1-26-07 – newborn coverage is required for the first 30 days from birth											
4 .	§26.1-36-08 - substance abuse coverage (e.g., inpatient - 60 days per calendar year; partial hospitalization - 120 days per calendar year; outpatient - 20 visits per calendar year) Visit limits no longer permissible with Mental Health Parity Act											
5 .	§26.1-36-09 - mental disorder coverage (e.g., inpatient - 45 days per calendar year; partial hospitalization - 120 days per calendar year; residential treatment - 120 days per calendar year; outpatient - 30 hours per calendar year) Also cannot impose cost share for the first five visits. Visit limits no longer permissible with Mental Health Parity Act											
6 .	§26.1-36-09.1 - mammogram examination coverage											
7 .	§26.1-36-09.2 – coverage for involuntary complications of pregnancy											
8 .	§26.1-36-09.3 – TMJ mandate. FEHBP does not have dollar limits. <i>Also since our mandate only applies to “individual products” should it be considered a mandate for this listing since the benchmarks are based on small group products?)</i>											
9 .	§26.1-36-09.6 - annual digital rectal examination and prostate-specific antigen test coverage. FEHBP does not have age limits.											
10 .	§26.1-36-09.7 - coverage for medical foods and low-protein modified food products determined by a physician to be medically necessary for the therapeutic treatment of an inherited metabolic disease (e.g., maple syrup urine disease or phenylketonuria) (FEHBP does not have a dollar limit.											
11 .	§26.1-36-09.8 - postdelivery coverage for mothers and newborns (e.g., 48 hours following normal vaginal delivery and 96 hours following caesarean section)											
12 .	§26.1-36-09.9 - coverage for anesthesia and hospitalization for dental care for covered individual who is under age nine, is severely disabled or has a medical condition and requires dental anesthesia and hospitalization. FEHBP covers to age 22.											
13 .	§26.1-36-09.10 - prehospital emergency services benefits in the case of an emergency medical condition											
14 .	§26.1-36-09.11 - breast reconstruction surgery coverage											
15 .	§26.1-36-09.12 – services for an injury or illness resulting from suicide, attempted suicide or self-inflicted injury											
16 .	§26.1-36-09.13 – subject to certain limitations, services for an injury or illness resulting from the member’s being intoxicated or under the influence of any narcotic											