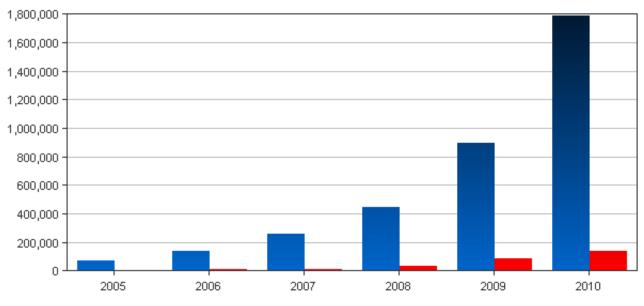


Annual Tests Performed / Denied

Total National Services Submitted 2010: 479,963				
Total Services Denied 2010: 112,593 (23.5%)				
National Charges Submitted 2010: \$ 17,295,907.00	National Charges Allowed 2010: \$ 3,081,213.00			
National Average (Global) Fee Submitted 2010: \$ 36.04	National Average (Global) Fee Allowed 2010: \$8.39			

Top 5 Ordering Specialties 2010	Total Tests	% of Total	Average Submitted	Denials	% Denied
Clinical laboratory (billing independently)	402,283	83.8%	\$ 27.71	95,157	23.7%
Pathology	71,079	14.8%	\$ 80.74	14,708	20.7%
Pediatric medicine	2,097	0.4%	\$ 64.56	940	44.8%
Urology	1,115	0.2%	\$ 35.99	123	11.0%
Internal medicine	1,086	0.2%	\$ 62.93	497	45.8%
Top 5 Places of Service 2010	Total Tests	% of Total	Average Submitted	Denials	% Denied
Independent laboratory	404,318	84.2%	\$ 27.74	97,118	24.0%
Outpatient hospital	42,800	8.9%	\$ 92.89	8,432	19.7%
Inpatient hospital	18,363	3.8%	\$ 75.63	3,857	21.0%
Office	14,143	2.9%	\$ 49.24	3,030	21.4%
Emergency room - hospital	302	0.1%	\$ 63.51	145	48.0%
Top 5 Modifiers Submitted 2010	Total Tests	% of Total	Average Submitted	Denials	% Denied
No Modifier	217,939	45.4%	\$ 23.82	55,180	25.3%
26 - Professional Component	92,648	19.3%	\$ 87.26	16,329	17.6%
59 - Distinct Procedural Service	80,480	16.8%	\$ 9.23	12,464	15.5%
90 - Reference (Outside) Laboratory	74,364	15.5%	\$ 37.60	23,535	31.6%
91 - Repeat Clinical Diagnostic Laboratory Test	9,065	1.9%	\$ 35.12	1,430	15.8%



Annual Tests Performed / Denied

Total National Services Submitted 2010: 1,789,450				
Total Services Denied 2010: 140,645 (7.9%)				
National Charges Submitted 2010: \$111,220,512.00	National Charges Allowed 2010: \$45,938,193.00			
National Average (Global) Fee Submitted 2010: \$ 62.15	National Average (Global) Fee Allowed 2010: \$ 27.86			

Top 5 Ordering Specialties 2010	Total Tests	% of Total	Average Submitted	Denials	% Denied
Clinical laboratory (billing independently)	1,773,921	99.1%	\$ 62.02	137,408	7.7%
Gynecology (osteopaths only) (discontinued 5/92 use code 16)	7,898	0.4%	\$ 97.70	2,217	28.1%
Interventional Pain Management (IPM) (eff. 4/1/03)	7,898	0.4%	\$ 97.70	2,217	28.1%
Anesthesiology	2,846	0.2%	\$ 43.73	142	5.0%
Family practice	1,187	0.1%	\$ 47.29	201	16.9%
Top 5 Places of Service 2010	Total Tests	% of Total	Average Submitted	Denials	% Denied
Independent laboratory	1,765,629	98.7%	\$ 61.92	136,119	7.7%
Office	23,781	1.3%	\$ 79.31	4,518	19.0%
Home	20	0.0%	\$ 56.20	3	15.0%
Nursing facility	14	0.0%	\$114.93	0	0.0%
Outpatient hospital	4	0.0%	\$ 43.00	4	100.0%
Top 5 Modifiers Submitted 2010	Total Tests	% of Total	Average Submitted	Denials	% Denied
No Modifier	1,467,968	82.0%	\$ 61.86	126,080	8.6%
91 - Repeat Clinical Diagnostic Laboratory Test	179,375	10.0%	\$ 64.59	6,366	3.5%
59 - Distinct Procedural Service	109,687	6.1%	\$ 39.54	5,510	5.0%
90 - Reference (Outside) Laboratory	31,231	1.7%	\$141.34	2,571	8.2%
AQ	532	0.0%	\$ 65.00	58	10.9%