

**ALABAMA GROUP MENTAL HEALTH PARITY COST REPORT
CALENDAR YEAR _____**

Company Name: _____

NAIC #: _____

Company Address: _____

Company Contact: _____

Contact Phone/Fax/E-mail: PH _____ FAX _____ EMAIL _____

I certify as follows with respect to the Company indicated above (check all that apply):

- _____ (1) The Company does not issue group health benefit plans to which the requirements of Section 27-54 of the Alabama Insurance Code apply. (if checked, proceed to signature line)
- _____ (2) The Company issues group health benefit plans to which the requirements of Section 27-54 of the Alabama Insurance Code apply but all such plans insure 50 or fewer lives. (if checked, proceed to signature line)
- _____ (3) The Company is in compliance with the parity in mental health benefit requirements of Section 27-54 of the Alabama Insurance Code. The total annual mental health benefit costs and total health benefit costs for the Calendar Year shown above were as follows:

(a)		(b)		(c)	
<u>Average # of Groups Covered</u>		<u>Average # of Certificateholders</u>		<u>Average Claims Paid Per Certificate</u>	
<u>All Groups</u>	<u>Groups With Mental Health Benefits</u>	<u>All Groups</u>	<u>Groups With Mental Health Benefits</u>	<u>All Groups</u>	<u>Groups With Mental Health Benefits</u>
PROVIDE DATA FOR ALABAMA BUSINESS ONLY					

Notes: For "All Groups" category, use all groups of 50 lives or less.
For "Groups With Mental Health Benefits" category, use only groups of 50 lives or less with Mental Health Benefits.

(a) Average Number of Groups Covered =
$$\frac{(\# \text{ Groups In Force Beginning of Year} + \# \text{ of Groups In Force End of Year})}{2}$$

(b) Average Number of Certificateholders =
$$\frac{(\# \text{ of Certificateholders In Force Beginning of Year} + \# \text{ of Certificateholders In Force End of Year})}{2}$$

(c) Average Claims Paid Per Certificateholder =
$$\frac{\text{Total Claims Paid During Year}}{\text{Average \# of Certificateholders}}$$

Date

Signature of Officer

Print Officer Name