

EXHIBIT 9D

BLUE CROSS AND BLUE SHIELD OF MICHIGAN

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INTER-OFFICE MEMO

TO: DISTRIBUTION CODE: SUBJECT: CITY OF DETROIT

FROM: Georgiana Poniatowski CODE: DATE: MAY 22, 2003
B792

ASC PLAN MODIFICATION 1862
FORM NUMBER 1395

CITY OF DETROIT
EFFECTIVE 07/01/03

Specifications for ASC Plan Modification 1862 are attached.

This modification has been developed for employees of the City of Detroit enrolled in the following Group Numbers and Suffixes:

<u>Group</u>	<u>Suffixes</u>
81100	002,003,004,005,006,907, and 912
81101	001,200,906, and 910
81105	001,002,003,004,005,101,102,103,104, and 105

The modification amends the group's outpatient mental health coverage under Riders OPC and OPPC-2 by: 1.) changing the annual benefit maximum, and 2.) removing the member's copayment requirements.

Also, it is important to mention that some members enrolled in this ASC Plan Modification will have Medicare as their primary payor. Members for whom Medicare is primary will also be enrolled in Riders XF and EF. These riders amend the group's certificates (the Comprehensive Hospital Care and the Professional Services Group Benefit Certificates) by transforming the coverage into Medicare Exact Fill Supplemental benefits. As a result, in addition to full BCBSM benefits for non-Medicare members, BCBSM - in accordance with Riders XF and EF - will also provide **Medicare Supplemental** benefits up to Exact Fill levels for the benefits included in this ASC Plan Modification.

SINCE THIS GROUP IS SELF-FUNDED UNDER AN ASC ARRANGEMENT, A RIDER FOR THIS MODIFICATION WILL NOT BE FILED WITH THE INSURANCE BUREAU.

PRODUCT DEVELOPMENT SERVICE DEPARTMENT COVERAGE SPECIFICATIONS

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TITLE AND
FORM NUMBER

ASC PLAN MODIFICATION 1862
FORM NUMBER 1395

CITY OF DETROIT
EFFECTIVE 07/01/03

GENERAL
PURPOSE

The purpose of this form is to outline benefits adopted for employees of the City of Detroit, enrolled in the following Groups and Suffixes:

<u>Group</u>	<u>Suffixes</u>
81100	002,003,004,005,006,907, and 912
81101	001,200,906, and 910
81105	001,002,003,004,005,101,102,103,104, and 105

This modification amends Rider OPC (Form Number 2290) and Rider OPPC-2 (Form Number 0665).

EFFECT ON
COVERAGE

1. OUTPATIENT MENTAL HEALTH CARE

A. Coverage Prior To This Modification

Under Rider OPC (Form Number 2290) and Rider OPPC-2 (Form Number 0665), benefits are available for outpatient mental health care when performed by BCBSM approved facilities or in a physician's office. Benefits are limited to a maximum of \$400 per member, per calendar year. This maximum is a **combined** benefit maximum in that both facility and professional services contribute to it. Member copayments are imposed based on the number of visits.

B. Effect Of Adding This Modification

This modification:

- **REMOVES** the \$400 annual benefit maximum, and
- **REPLACES** it with an annual maximum of **six (6)** visits per member, per calendar year. The 6-visits represent a combined limit for both facility and professional services.

Also, this modification **REMOVES** the member copayments for outpatient mental health care. Instead, BCBSM will pay 100% of its approved amount until the annual benefit maximum (6 visits per member) is exhausted.

Note: Once benefits are exhausted, claims will continue to be processed under the Master Medical coverage and be subject to the annual Master Medical deductible and 50% copayment requirement.