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AGENDA ITEM

☒ Action Item

☐ Information Only

Date: November 21, 2024

Item Number: 4.2.1

Title: Self-Funded CDHP, LDPPPO, and EPO Plan Utilization Report for the period ending June 30, 2024

This report addresses medical, dental, prescription drug and HSA/HRA utilization for the PY 2024 period ending June 30, 2024. Included are:

- Executive Summary – provides a utilization overview.
- UMR Inc. CDHP Utilization Report – provides graphical supporting details for the information included in the Executive Summary.
- UMR Inc. LDPPPO Utilization Report – provides graphical supporting details for the information included in the Executive Summary.
- UMR Inc. EPO Utilization Report – provides graphical supporting details for the information included in the Executive Summary.
- Express Scripts Utilization Report – provides details supporting the prescription drug information included in the Executive Summary.
- Health Plan of Nevada Utilization – see Appendix D for Q4 Plan Year 2023 utilization data.

Executive Summary

CONSUMER DRIVEN HEALTH PLAN (CDHP)

The Consumer Driven Health Plan (CDHP) experience for Q4 of Plan Year 2024 compared to Q4 of Plan Year 2023 is summarized below.

- Population:
 - 10.0% decrease for primary participants
 - 12.0% decrease for primary participants plus dependents (members)
- Medical Cost:
 - 6.5% increase for primary participants
 - 8.9% increase for primary participants plus dependents (members)
- High-Cost Claims:
 - There were 127 High-Cost Claimants accounting for 33.6% of the total plan paid for Plan Year 2024
 - 13.0% increase in High-Cost Claimants per 1,000 members
 - 6.1% decrease in average cost of High-Cost Claimant paid
- Top three highest cost clinical classifications include:
 - Cancer (\$7.5 million) – 26.2% of paid claims
 - Neurological Disorders (\$3.3 million) – 11.6% of paid claims
 - Cardia Disorders (\$2.5 million) – 9.0% of paid claims
- Emergency Room:
 - ER visits per 1,000 members increased 5.2%
 - Average paid per ER visit increased 5.8%
- Urgent Care:
 - Urgent Care visits per 1,000 members increased 13.4%
 - Average paid per Urgent Care visit decreased 2.0% (from \$50 to \$51)
- Network Utilization:
 - 97.3% of claims are from In-Network providers
 - In-Network utilization decreased 0.1% over PY 2023
 - In-Network discounts increased 0.2% over PY 2023
- Prescription Drug Utilization:
 - Overall:
 - Total Net Claims decreased 9.4%
 - Total Gross Claims Costs increased 1.3% (\$0.6 million)
 - Average Total Cost per Claim increased 11.8%
 - From \$115.56 to \$129.22
 - Member:
 - Total Member Cost decreased 4.1%
 - Average Participant Share per Claim increased 5.8%
 - Net Member PMPM increased 9.3%
 - From \$29.83 to \$32.61
 - Plan
 - Total Plan Cost increased 2.9%

- Average Plan Share per Claim increased 13.6%
- Net Plan PMPM increased 17.3%
 - From \$101.62 to \$119.24
- Net Plan PMPM factoring rebates increased 0.9%
 - From \$70.60 to \$71.23

LOW DEDUCTIBLE PPO PLAN (LDPPPO)

The Low Deductible PPO Plan (LDPPPO) experience for Q4 of Plan Year 2024 compared to Q4 of Plan Year 2023 is summarized below.

- Population:
 - 35.6% increase for primary participants
 - 33.7% increase for primary participants plus dependents (members)
- Medical Cost:
 - 10.2% increase for primary participants
 - 11.8% increase for primary participants plus dependents (members)
- High-Cost Claims:
 - There were 91 High-Cost Claimants accounting for 24.2% of the total plan paid for Plan Year 2024
 - 26.1% increase in High-Cost Claimants per 1,000 members
 - 6.8% decrease in average cost of High-Cost Claimant paid
- Top three highest cost clinical classifications include:
 - Cancer (\$5.2 million) – 25.7% of paid claims
 - Neurological Disorders (\$3.1 million) – 15.3% of paid claims
 - Cardiac Disorders (\$2.5 million) – 12.2% of paid claims
- Emergency Room:
 - ER visits per 1,000 members increased 12.2%
 - Average paid per ER visit increased 5.2%
- Urgent Care:
 - Urgent Care visits per 1,000 members increased by 2.2%
 - Average paid per Urgent Care visit increased 9.2% (from \$98 to \$107)
- Network Utilization:
 - 97.8% of claims are from In-Network providers
 - In-Network utilization stayed the same compared to PY 2023
 - In-Network discounts increased 1.4% over PY 2023
- Prescription Drug Utilization:
 - Overall:
 - Total Net Claims increased 37.3%
 - Total Gross Claims Costs increased 66.8% (\$16.8 million)
 - Average Total Cost per Claim increased 21.5%
 - From \$123.14 to \$149.56
 - Member:
 - Total Member Cost increased 52.6%
 - Average Participant Share per Claim increased 11.1%

- Net Member PMPM increased 14.0%
 - From \$23.96 to \$27.32
- Plan
 - Total Plan Cost increased 69.9%
 - Average Plan Share per Claim increased 23.5%
 - Net Plan PMPM increased 26.7%
 - From \$122.00 to \$154.55
 - Net Plan PMPM factoring rebates increased 13.5%
 - From \$88.39 to \$100.35

PEBP PREMIER PLAN (EPO)

The PEBP Premier Plan (EPO) experience for Q4 of Plan Year 2024 compared to Q4 of Plan Year 2023 is summarized below.

- Population:
 - 10.4% decrease for primary participants
 - 10.8% decrease for primary participants plus dependents (members)
- Medical Cost:
 - 6.0% increase for primary participants
 - 6.5 increase for primary participants plus dependents (members)
- High-Cost Claims:
 - There were 60 High-Cost Claimants accounting for 35.9% of the total plan paid for Plan Year 2024
 - 24.6% increase in High-Cost Claimants per 1,000 members
 - 6.6% decrease in average cost of High-Cost Claimant paid
- Top three highest cost clinical classifications include:
 - Cancer (\$3.2million) – 5.1% of paid claims
 - Cardiac Disorders (\$2.1 million) – 3.4% of paid claims
 - Neurological Disorders (\$1.2 million) – 1.9% of paid claims
- Emergency Room:
 - ER visits per 1,000 members increased by 9.1%
 - Average paid per ER visit increased by 5.1%
- Urgent Care:
 - Urgent Care visits per 1,000 members increased by 8.2%
 - Average paid per Urgent Care visit increased 4.7%
- Network Utilization:
 - 96.4% of claims are from In-Network providers
 - In-Network utilization increased 0.3% over PY 2023
 - In-Network discounts increased 1.8% over PY 2023
- Prescription Drug Utilization:
 - Overall:
 - Total Net Claims decreased 6.3%
 - Total Gross Claims Costs increased 5.1% (\$1.0 million)
 - Average Total Cost per Claim increased 12.2%

- From \$149.01 to \$167.25
- Member:
 - Total Member Cost decreased 4.8%
 - Average Participant Share per Claim increased 1.6%
 - Net Member PMPM increased 6.9%
 - From \$42.30 to \$45.23
- Plan
 - Total Plan Cost increased 7.1%
 - Average Plan Share per Claim increased 14.3%
 - Net Plan PMPM increased 20.3%
 - From \$217.75 to \$261.91
 - Net Plan PMPM factoring rebates increased 15.7%
 - From \$144.64 to \$167.33

DENTAL PLAN

The Dental Plan experience for Q4 of Plan Year 2024 is summarized below.

- Dental Cost:
 - Total of \$26,841,134 paid for Dental claims
 - Basic claims account for 34.5% (\$9.2 million)
 - Preventive claims account for 25.1% (\$6.7 million)
 - Diagnostic claims account for 22.8% (\$6.1 million)
 - Major claims account for 17.7 (\$4.7 million)

HEALTH REIMBURSEMENT ARRANGEMENT

The table below provides a list of HRA account balances as of June 30, 2024.

HRA Account Balances as of June 30, 2024			
\$Range	# Accounts	Total Account Balance	Average Per Account Balance
0	13,802	0.00	0.00
\$.01 - \$500.00	33,357	7,535,577.49	225.91
\$500.01 - \$1,000	1,986	1,361,491.54	685.54
\$1,000.01 - \$1,500	771	932,170.74	1,209.04
\$1,500.01 - \$2,000	381	656,133.86	1,722.14
\$2,000.01 - \$2,500	227	514,164.09	2,265.04
\$2,500.01 - \$3,000	183	502,162.75	2,744.06
\$3,000.01 - \$3,500	102	327,703.50	3,212.78
\$3,500.01 - \$4,000	146	546,216.08	3,741.21
\$4,000.01 - \$4,500	109	461,388.61	4,232.92
\$4,500.01 - \$5,000	92	438,435.77	4,765.61
\$5,000.01 +	576	4,907,058.24	8,519.20
Total	51,732	\$ 18,182,503	\$ 351.47

CONCLUSION

The information in this report provides plan experience for the Consumer Driven Health Plan (CDHP), Low Deductible PPO Plan (LDPPO) and the PEBP Premier Plan (EPO) for Plan Year 2024.

- The CDHP total plan paid decreased 4.6% over the same time for Plan Year 2023; however, on a PEPY basis the plan experienced an increase of 6.5%.
- The LDPPO total plan paid increased 49.4% over Plan Year 2023. This increase is in part attributed to the increase in enrollment (33.7%) in the LDPPO plan over the previous plan year. However, on a PEPY basis the plan experienced an increase of 10.2%.
- The EPO total plan paid decreased 5.0% over Plan Year 2023. However, on a PEPY basis the plan experienced an increase of 6.0%.

The HMO utilization and cost data can be found in the report provided in Appendix D.

Appendix A

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UMR Inc. – CDHP Utilization Review for PEBP July 1, 2023 – June 30, 2024

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DATASCOPE™

Nevada Public Employees' Benefits Program

HDHP Plan

July 2023 – June 2024 Incurred,

Paid through August 2024



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Overview

- Total Medical Spend for PY24 was \$84,813,752 of which 77.8% was spent in the State Active population. When compared to PY23, this reflected a decrease of 4.1% in plan spend.
 - When compared to PY22, PY24 decreased 19.0%, with State Actives having a decrease of 18.1%.
- On a PEPY basis, PY24 reflected an increase of 6.5% when compared to PY23. The largest group, State Actives, had a 10.7% increase when compared to the PY23 PEPY%.
 - When compared to PY22, PY24 increased 3.8%, with State Actives increasing 5.9%.
- 83.7% of the Average Membership had paid Medical claims less than \$2,500, with 19.9% having no claims paid at all during the reporting period.
- There were 127 high-cost Claimants (HCC's) over \$100K, that accounted for 33.6% of the total spend. HCCs accounted for 34.0% of total spend during PY23, with 126 members hitting the \$100K threshold. The largest diagnosis grouper was Cancer accounting for 26.2% of high-cost claimant dollars.
- IP Paid per Admit was \$28,516 which is an increase of 7.8% compared to PY23.
- ER Paid per Visit is \$2,535, which is an increase of 5.8% compared to PY23.
- 97.3% of all Medical spend dollars were to In Network providers. The average In Network discount was 68.6%, which is comparable to the PY23 average discount of 68.4%.

Paid Claims by Age Group

Paid Claims by Age Group														
PY23							PY24						% Change	
Age Range	Med Net Pay	Med PMPM	Rx Net Pay	Rx PMPM	Net Pay	PMPM	Med Net Pay	Med PMPM	Rx Net Pay	Rx PMPM	Net Pay	PMPM	Net Pay	PMPM
<1	\$ 5,181,350	\$ 2,699	\$ 34,144	\$ 18	\$5,215,494	\$ 2,716	\$ 2,426,666	\$ 1,630	\$ 599	\$ -	\$ 2,427,265	\$ 1,630	-53.5%	-40.0%
1	\$ 486,016	\$ 205	\$ 36,705	\$ 15	\$522,721	\$ 220	\$ 357,511	\$ 231	\$ 78,174	\$ 51	\$ 435,685	\$ 282	-16.7%	28.2%
2 - 4	\$ 891,648	\$ 119	\$ 170,272	\$ 23	\$1,061,920	\$ 141	\$ 676,906	\$ 107	\$ 126,916	\$ 20	\$ 803,821	\$ 127	-24.3%	-10.0%
5 - 9	\$ 1,356,073	\$ 82	\$ 299,717	\$ 18	\$1,655,790	\$ 101	\$ 1,540,966	\$ 115	\$ 350,867	\$ 26	\$ 1,891,833	\$ 142	14.3%	41.0%
10 - 14	\$ 1,731,650	\$ 88	\$ 340,380	\$ 17	\$2,072,030	\$ 106	\$ 1,675,565	\$ 101	\$ 544,430	\$ 33	\$ 2,219,994	\$ 133	7.1%	25.9%
15 - 19	\$ 4,387,437	\$ 202	\$ 690,093	\$ 32	\$5,077,530	\$ 233	\$ 4,784,493	\$ 245	\$ 539,583	\$ 28	\$ 5,324,076	\$ 273	4.9%	17.0%
20 - 24	\$ 3,477,004	\$ 130	\$ 1,251,232	\$ 47	\$4,728,236	\$ 176	\$ 3,308,963	\$ 142	\$ 1,647,261	\$ 71	\$ 4,956,223	\$ 212	4.8%	20.4%
25 - 29	\$ 3,595,795	\$ 197	\$ 896,458	\$ 49	\$4,492,253	\$ 247	\$ 2,292,827	\$ 146	\$ 498,661	\$ 32	\$ 2,791,488	\$ 178	-37.9%	-27.8%
30 - 34	\$ 5,254,060	\$ 235	\$ 961,196	\$ 43	\$6,215,256	\$ 278	\$ 4,831,833	\$ 250	\$ 921,364	\$ 48	\$ 5,753,197	\$ 298	-7.4%	7.0%
35 - 39	\$ 4,105,925	\$ 168	\$ 1,669,207	\$ 68	\$5,775,132	\$ 237	\$ 5,317,308	\$ 248	\$ 1,507,122	\$ 70	\$ 6,824,430	\$ 319	18.2%	34.7%
40 - 44	\$ 4,561,901	\$ 177	\$ 2,219,537	\$ 86	\$6,781,438	\$ 263	\$ 4,560,380	\$ 196	\$ 2,040,212	\$ 87	\$ 6,600,592	\$ 283	-2.7%	7.6%
45 - 49	\$ 5,337,965	\$ 219	\$ 2,254,193	\$ 92	\$7,592,158	\$ 311	\$ 5,542,233	\$ 255	\$ 2,789,262	\$ 128	\$ 8,331,494	\$ 383	9.7%	23.1%
50 - 54	\$ 9,184,369	\$ 330	\$ 4,070,171	\$ 146	\$13,254,540	\$ 476	\$ 8,601,476	\$ 347	\$ 4,496,659	\$ 181	\$ 13,098,135	\$ 528	-1.2%	10.9%
55 - 59	\$ 11,486,435	\$ 373	\$ 5,271,340	\$ 171	\$16,757,775	\$ 544	\$ 10,865,390	\$ 405	\$ 4,354,135	\$ 162	\$ 15,219,525	\$ 568	-9.2%	4.3%
60 - 64	\$ 17,740,796	\$ 490	\$ 7,298,136	\$ 202	\$25,038,932	\$ 692	\$ 18,518,608	\$ 569	\$ 7,798,993	\$ 240	\$ 26,317,601	\$ 809	5.1%	17.0%
65+	\$ 9,700,956	\$ 402	\$ 6,103,938	\$ 253	\$15,804,894	\$ 655	\$ 9,512,627	\$ 415	\$ 6,864,300	\$ 300	\$ 16,376,927	\$ 715	3.6%	9.2%
Total	\$ 88,479,381	\$ 268	\$ 33,566,719	\$ 102	\$ 122,046,100	\$ 369	\$ 84,813,751	\$ 292	\$ 34,558,538	\$ 119	\$ 119,372,289	\$ 410	-2.2%	11.2%

Financial Summary (p. 1 of 2)

	Total				State Active				Non-State Active			
Summary	PY22	PY23	PY24	Variance to Prior Year	PY22	PY23	PY24	Variance to Prior Year	PY22	PY23	PY24	Variance to Prior Year
Average Enrollment												
Employees	18,943	16,411	14,777	-10.0%	15,526	13,332	12,013	-9.9%	3	3	4	19.3%
Spouses	3,974	7,866	2,766	-64.8%	3,134	7,223	2,107	-70.8%	1	4	1	-85.5%
Children	10,172	3,266	6,695	105.0%	9,421	2,504	6,137	145.1%	4	1	2	142.0%
Total Members	33,089	27,544	24,238	-12.0%	28,082	23,059	20,257	-12.1%	8	8	7	-17.8%
Family Size	1.8	1.7	1.6	-2.4%	1.8	1.7	1.7	-2.3%	2.7	2.7	1.8	-31.1%
Financial Summary												
Gross Cost	\$138,077,453	\$116,590,277	\$111,641,277	-4.2%	\$106,593,460	\$87,356,314	\$86,271,523	-1.2%	\$55,484	\$42,591	\$84,703	98.9%
Client Paid	\$104,706,277	\$88,479,381	\$84,813,752	-4.1%	\$80,561,976	\$66,125,338	\$65,990,251	-0.2%	\$38,304	\$30,890	\$68,857	122.9%
Employee Paid	\$33,371,175	\$28,110,896	\$26,827,525	-4.6%	\$26,031,484	\$21,230,976	\$20,281,272	-4.5%	\$17,181	\$11,702	\$15,845	35.4%
Client Paid-PEPY	\$5,527	\$5,391	\$5,739	6.5%	\$5,189	\$4,960	\$5,493	10.7%	\$12,768	\$10,297	\$19,216	86.6%
Client Paid-PMPY	\$3,164	\$3,212	\$3,499	8.9%	\$2,869	\$2,868	\$3,258	13.6%	\$4,788	\$3,861	\$10,459	170.9%
Client Paid-PEPM	\$461	\$449	\$478	6.5%	\$432	\$413	\$458	10.9%	\$1,064	\$858	\$1,601	86.6%
Client Paid-PMPM	\$264	\$268	\$292	9.0%	\$239	\$239	\$271	13.4%	\$399	\$322	\$872	170.8%
High Cost Claimants (HCC's) > \$100k												
# of HCC's	160	126	127		115	94	98		0	0	0	
HCC's / 1,000	4.8	4.6	5.2		4.1	4.1	4.8		0.0	0.0	0.0	
Avg HCC Paid	\$251,190	\$238,643	\$224,115	-6.1%	\$262,921	\$233,021	\$232,920	0.0%	\$0	\$0	\$0	0.0%
HCC's % of Plan Paid	38.4%	34.0%	33.6%	-1.2%	37.5%	33.1%	34.6%	4.5%	0.0%	0.0%	0.0%	0.0%
Cost Distribution by Claim Type (PMPY)												
Facility Inpatient	\$1,153	\$995	\$975	-2.0%	\$1,028	\$895	\$950	6.1%	\$0	\$0	\$0	0.0%
Facility Outpatient	\$939	\$1,074	\$1,217	13.3%	\$821	\$930	\$1,092	17.4%	\$3,554	\$2,208	\$9,003	307.7%
Physician	\$1,011	\$1,143	\$1,307	14.3%	\$964	\$1,043	\$1,216	16.6%	\$1,200	\$1,653	\$1,456	-11.9%
Other	\$62	\$0	\$0	0.0%	\$56	\$0	\$0	0.0%	\$34	\$0	\$0	0.0%
Total	\$3,164	\$3,212	\$3,499	8.9%	\$2,869	\$2,868	\$3,258	13.6%	\$4,788	\$3,861	\$10,459	170.9%

Financial Summary (p. 2 of 2)

	State Retirees				Non-State Retirees				
Summary	PY22	PY23	PY24	Variance to Prior Year	PY22	PY23	PY24	Variance to Prior Year	Peer Index
Average Enrollment									
Employees	2,981	2,711	2,443	-9.9%	433	366	318	-13.0%	
Spouses	776	624	622	-0.3%	62	16	36	130.6%	
Children	729	715	542	-24.2%	18	46	14	-70.6%	
Total Members	4,486	4,049	3,607	-10.9%	514	427	367	-14.0%	
Family Size	1.5	1.5	1.5	-0.7%	1.2	1.2	1.2	-0.9%	1.6
Financial Summary									
Gross Cost	\$27,879,066	\$25,102,026	\$23,033,994	-8.2%	\$3,549,442	\$4,089,345	\$2,251,057	-45.0%	
Client Paid	\$21,491,378	\$19,194,786	\$17,411,511	-9.3%	\$2,614,619	\$3,128,367	\$1,343,132	-57.1%	
Employee Paid	\$6,387,688	\$5,907,239	\$5,622,483	-4.8%	\$934,823	\$960,978	\$907,925	-5.5%	
Client Paid-PEPY	\$7,210	\$7,082	\$7,129	0.7%	\$6,033	\$8,557	\$4,224	-50.6%	\$6,258
Client Paid-PMPY	\$4,791	\$4,740	\$4,827	1.8%	\$5,091	\$7,321	\$3,656	-50.1%	\$3,830
Client Paid-PEPM	\$601	\$590	\$594	0.7%	\$503	\$713	\$352	-50.6%	\$521
Client Paid-PMPM	\$399	\$395	\$402	1.8%	\$424	\$610	\$305	-50.0%	\$319
High Cost Claimants (HCC's) > \$100k									
# of HCC's	44	31	32		5	5	1		
HCC's / 1,000	9.8	7.7	8.9		9.7	11.7	2.7		
Avg HCC Paid	\$199,873	\$213,853	\$176,136	-17.6%	\$231,987	\$307,109	\$0	-100.0%	
HCC's % of Plan Paid	40.9%	34.5%	32.4%	-6.1%	44.4%	49.1%	0.0%	-100.0%	
Cost Distribution by Claim Type (PMPY)									
Facility Inpatient	\$1,808	\$1,250	\$1,134	-9.3%	\$2,262	\$4,005	\$813	-79.7%	\$1,044
Facility Outpatient	\$1,612	\$1,838	\$1,886	2.6%	\$1,488	\$1,591	\$1,395	-12.3%	\$1,310
Physician	\$1,280	\$1,652	\$1,807	9.4%	\$1,227	\$1,724	\$1,448	-16.0%	\$1,404
Other	\$91	\$0	\$0	0.0%	\$115	\$0	\$0	0.0%	\$72
Total	\$4,791	\$4,740	\$4,827	1.8%	\$5,091	\$7,321	\$3,656	-50.1%	\$3,830

Paid Claims by Claim Type – State Participants

Net Paid Claims - Total										
State Participants										
	PY23				PY24				% Change	
	Actives	Pre-Medicare Retirees	Medicare Retirees	Total	Actives	Pre-Medicare Retirees	Medicare Retirees	Total	Total	
Medical										
Inpatient	\$ 23,807,910	\$ 4,876,554	\$ 672,073	\$ 29,356,537	\$ 22,021,830	\$ 3,852,892	\$ 722,538	\$ 26,597,261	-9.4%	
Outpatient	\$ 42,317,427	\$ 11,764,006	\$ 1,882,153	\$ 55,963,587	\$ 43,968,421	\$ 10,265,462	\$ 2,570,619	\$ 56,804,501	1.5%	
Total - Medical	\$ 66,125,338	\$ 16,640,560	\$ 2,554,226	\$ 85,320,124	\$ 65,990,251	\$ 14,118,354	\$ 3,293,157	\$ 83,401,762	-2.2%	

Net Paid Claims - Per Participant per Month										
	PY23				PY24				% Change	
	Actives	Pre-Medicare Retirees	Medicare Retirees	Total	Actives	Pre-Medicare Retirees	Medicare Retirees	Total	Total	
Medical	\$ 413	\$ 643	\$ 384	\$ 443	\$ 458	\$ 616	\$ 514	\$ 481	8.5%	

Paid Claims by Claim Type – Non-State Participants

Net Paid Claims - Total										
Non-State Participants										
	PY23					PY24				
	Actives	Pre-Medicare Retirees	Medicare Retirees	Total		Actives	Pre-Medicare Retirees	Medicare Retirees	Total	
										% Change
Medical										
Inpatient	\$ -	\$ 398,052	\$ 1,415,160	\$ 1,813,211		\$ 105,406	\$ 231,995	\$ 337,401		-81.4%
Outpatient	\$ 30,890	\$ 664,301	\$ 650,855	\$ 1,346,046		\$ 68,857	\$ 404,932	\$ 600,799	\$ 1,074,588	-20.2%
Total - Medical	\$ 30,890	\$ 1,062,353	\$ 2,066,014	\$ 3,159,257		\$ 68,857	\$ 510,338	\$ 832,794	\$ 1,411,989	-55.3%

Net Paid Claims - Per Participant per Month										
	PY23					PY24				
	Actives	Pre-Medicare Retirees	Medicare Retirees	Total		Actives	Pre-Medicare Retirees	Medicare Retirees	Total	
										% Change
Medical	\$ 858	\$ 790	\$ 679	\$ 714		\$ 1,603	\$ 586	\$ 283	\$ 366	-48.8%

Paid Claims by Claim Type – Total Participants

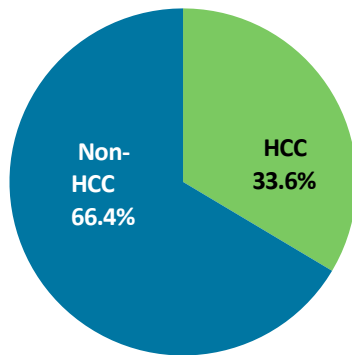
Net Paid Claims - Total									
Total Participants									
	PY23				PY24				% Change
	Actives	Pre-Medicare Retirees	Medicare Retirees	Total	Actives	Pre-Medicare Retirees	Medicare Retirees	Total	Total
Medical									
Inpatient	\$ 23,807,910	\$ 5,274,606	\$ 2,087,232	\$ 31,169,749	\$ 22,021,830	\$ 3,958,298	\$ 954,534	\$ 26,934,662	-13.6%
Outpatient	\$ 42,348,317	\$ 12,428,307	\$ 2,533,008	\$ 57,309,632	\$ 44,037,278	\$ 10,670,394	\$ 3,171,417	\$ 57,879,089	1.0%
Total - Medical	\$ 66,156,227	\$ 17,702,913	\$ 4,620,240	\$ 88,479,381	\$ 66,059,108	\$ 14,628,692	\$ 4,125,951	\$ 84,813,752	-4.1%

Net Paid Claims - Per Participant per Month									
	PY23				PY24				% Change
	Actives	Pre-Medicare Retirees	Medicare Retirees	Total	Actives	Pre-Medicare Retirees	Medicare Retirees	Total	
Medical	\$ 413	\$ 650	\$ 477	\$ 449	\$ 458	\$ 615	\$ 441	\$ 478	6.5%

Cost Distribution – Medical Claims

PY23							PY24					
Avg # of Members	% of Members	Total Paid	% of Paid	EE Paid	% EE Paid	Paid Claims Category	Avg # of Members	% of Members	Total Paid	% of Paid	EE Paid	% EE Paid
113	0.4%	\$29,935,819	33.8%	\$832,847	3.0%	\$100,000.01 Plus	114	0.5%	\$28,462,543	33.6%	\$717,479	2.7%
156	0.6%	\$11,675,364	13.2%	\$965,047	3.4%	\$50,000.01-\$100,000.00	162	0.7%	\$11,767,487	13.9%	\$952,499	3.6%
316	1.1%	\$11,600,473	13.1%	\$1,730,194	6.2%	\$25,000.01-\$50,000.00	300	1.2%	\$10,855,249	12.8%	\$1,563,755	5.8%
792	2.9%	\$13,059,289	14.8%	\$3,895,107	13.9%	\$10,000.01-\$25,000.00	782	3.2%	\$12,836,348	15.1%	\$3,810,241	14.2%
1,101	4.0%	\$8,145,730	9.2%	\$3,683,619	13.1%	\$5,000.01-\$10,000.00	1,043	4.3%	\$7,709,653	9.1%	\$3,686,005	13.7%
1,510	5.5%	\$5,660,247	6.4%	\$3,680,595	13.1%	\$2,500.01-\$5,000.00	1,545	6.4%	\$5,738,039	6.8%	\$3,836,075	14.3%
13,927	50.6%	\$8,402,458	9.5%	\$11,274,699	40.1%	\$0.01-\$2,500.00	11,254	46.4%	\$7,444,434	8.8%	\$10,127,813	37.8%
4,043	14.7%	\$0	0.0%	\$2,048,788	7.3%	\$0.00	4,211	17.4%	\$0	0.0%	\$2,133,659	8.0%
5,586	20.3%	\$0	0.0%	\$0	0.0%	No Claims	4,826	19.9%	\$0	0.0%	\$0	0.0%
27,544	100.0%	\$88,479,381	100.0%	\$28,110,896	100.0%		24,238	100.0%	\$84,813,752	100.0%	\$26,827,525	100.0%

Distribution of HCC Medical Claims Paid



HCC – High-Cost Claimant over \$100K

HCC's by Diagnosis Grouper			
Top 10 Diagnosis Groupers	Patients	Total Paid	% Paid
Cancer	49	\$7,462,468	26.2%
Neurological Disorders	83	\$3,315,053	11.6%
Cardiac Disorders	93	\$2,552,381	9.0%
Pregnancy-related Disorders	9	\$1,730,774	6.1%
Infections	50	\$1,553,534	5.5%
Gastrointestinal Disorders	78	\$1,514,133	5.3%
Medical/Surgical Complications	32	\$1,238,346	4.4%
Hematological Disorders	48	\$1,177,368	4.1%
Renal/Urologic Disorders	50	\$992,731	3.5%
Pulmonary Disorders	75	\$970,543	3.4%
All Other		\$5,955,210	20.9%
Overall	----	\$28,462,543	100.0%

Utilization Summary (p. 1 of 2)

Inpatient data reflects facility charges and professional services.
DX&L = Diagnostics, X-Ray and Laboratory

	Total				State Active			
Summary	PY22	PY23	PY24	Variance to Prior Year	PY22	PY23	PY24	Variance to Prior Year
Inpatient Summary								
# of Admits	1,357	1,072	986		997	797	743	
# of Bed Days	8,861	6,155	5,652		6,471	4,533	4,250	
Paid Per Admit	\$33,963	\$26,453	\$28,516	7.8%	\$35,180	\$26,882	\$30,787	14.5%
Paid Per Day	\$5,201	\$4,607	\$4,975	8.0%	\$5,420	\$4,726	\$5,382	13.9%
Admits Per 1,000	41	39	41	5.1%	36	35	37	5.7%
Days Per 1,000	268	223	233	4.5%	230	197	210	6.6%
Avg LOS	6.5	5.7	5.7	0.0%	6.5	5.7	5.7	0.0%
# of Admits From ER	780	613	635	3.6%	516	419	460	9.8%
Physician Office								
OV Utilization per Member	3.8	3.8	4.1	7.9%	3.5	3.5	3.8	8.6%
Avg Paid per OV	\$82	\$86	\$87	1.2%	\$84	\$82	\$84	2.4%
Avg OV Paid per Member	\$312	\$324	\$355	9.6%	\$297	\$284	\$320	12.7%
DX&L Utilization per Member	7.4	9.4	9.8	4.3%	6.9	8.6	9.1	5.8%
Avg Paid per DX&L	\$54	\$48	\$52	8.3%	\$50	\$46	\$51	10.9%
Avg DX&L Paid per Member	\$402	\$457	\$511	11.8%	\$348	\$398	\$464	16.6%
Emergency Room								
# of Visits	4,877	4,216	3,865		4,039	3,339	3,153	
Visits Per Member	0.15	0.15	0.16	6.7%	0.14	0.14	0.16	14.3%
Visits Per 1,000	147	153	161	5.2%	144	145	156	7.6%
Avg Paid per Visit	\$2,011	\$2,396	\$2,535	5.8%	\$2,053	\$2,508	\$2,619	4.4%
Urgent Care								
# of Visits	8,823	7,180	7,179		7,756	6,318	6,230	
Visits Per Member	0.27	0.26	0.30	15.4%	0.28	0.27	0.31	14.8%
Visits Per 1,000	267	261	296	13.4%	276	274	308	12.4%
Avg Paid per Visit	\$70	\$50	\$51	2.0%	\$70	\$50	\$51	2.0%

Utilization Summary (p. 2 of 2)

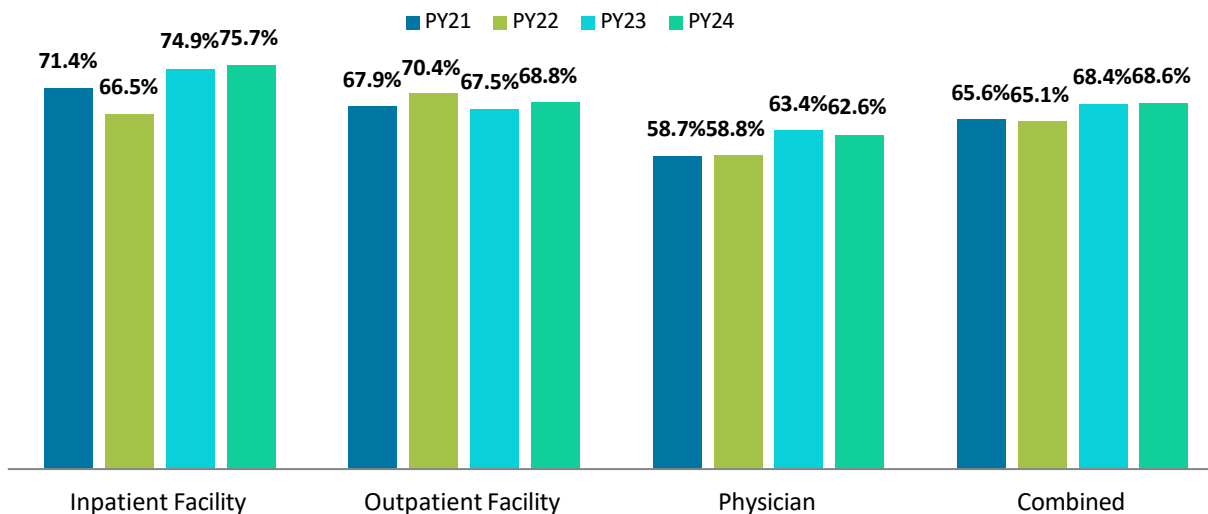
Inpatient data reflects facility charges and professional services.

DX&L = Diagnostics, X-Ray and Laboratory

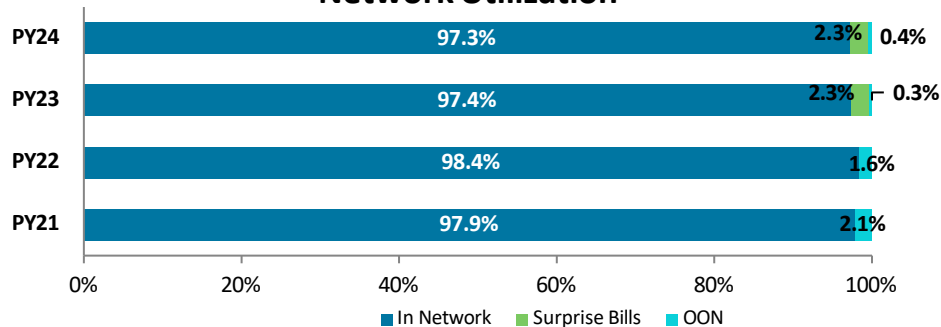
	State Retirees				Non-State Retirees				
Summary	PY22	PY23	PY24	Variance to Prior Year	PY22	PY23	PY24	Variance to Prior Year	Peer Index
Inpatient Summary									
# of Admits	302	222	199		58	53	44		
# of Bed Days	2,000	1,253	1,203		390	369	199		
Paid Per Admit	\$30,487	\$25,483	\$24,460	-4.0%	\$31,145	\$24,071	\$8,519	-64.6%	\$19,305
Paid Per Day	\$4,603	\$4,515	\$4,046	-10.4%	\$4,632	\$3,457	\$1,884	-45.5%	\$3,615
Admits Per 1,000	67	55	55	0.0%	113	124	120	-3.2%	64
Days Per 1,000	446	309	334	8.1%	759	863	542	-37.2%	342
Avg LOS	6.6	5.6	6	7.1%	6.7	7.0	4.5	-35.7%	5.3
# of Admits From ER	222	156	143	-8.3%	42	38	32	-15.8%	
Physician Office									
OV Utilization per Member	5.0	5.1	5.2	2.0%	6.8	7.7	8.3	7.8%	5.2
Avg Paid per OV	\$82	\$109	\$107	-1.8%	\$39	\$41	\$38	-7.3%	\$97
Avg OV Paid per Member	\$410	\$557	\$557	0.0%	\$268	\$313	\$314	0.3%	\$502
DX&L Utilization per Member	9.9	13	12.6	-3.1%	9.6	19.4	18.3	-5.7%	9.0
Avg Paid per DX&L	\$72	\$58	\$59	1.7%	\$58	\$39	\$42	7.7%	\$46
Avg DX&L Paid per Member	\$717	\$762	\$740	-2.9%	\$557	\$754	\$778	3.2%	\$412
Emergency Room									
# of Visits	725	725	582		108	148	123		
Visits Per Member	0.16	0.18	0.16	-11.1%	0.21	0.35	0.33	-5.7%	0.23
Visits Per 1,000	162	179	161	-10.1%	210	346	335	-3.2%	228
Avg Paid per Visit	\$1,856	\$2,125	\$2,424	14.1%	\$1,520	\$1,165	\$768	-34.1%	\$1,035
Urgent Care									
# of Visits	980	770	847		82	85	98		
Visits Per Member	0.22	0.19	0.23	21.1%	0.16	0.20	0.27	35.0%	0.38
Visits Per 1,000	218	190	235	23.7%	160	199	267	34.2%	379
Avg Paid per Visit	\$71	\$53	\$48	-9.4%	\$39	\$47	\$53	12.8%	\$132

Provider Network Summary

In Network Discounts



Network Utilization



Diagnosis Grouper Summary

Diagnosis Grouper	Total Paid	% Paid	Insured	Spouse	Child	Male	Female
Cancer	\$10,652,139	12.6%	\$8,163,093	\$2,426,419	\$62,626	\$4,494,888	\$6,157,251
Cardiac Disorders	\$6,934,310	8.2%	\$4,892,896	\$1,323,290	\$718,123	\$4,260,384	\$2,673,926
Gastrointestinal Disorders	\$6,897,237	8.1%	\$5,051,815	\$811,145	\$1,034,276	\$2,747,935	\$4,149,302
Health Status/Encounters	\$6,864,506	8.1%	\$4,508,864	\$965,298	\$1,390,344	\$2,479,554	\$4,384,951
Neurological Disorders	\$6,316,554	7.4%	\$2,928,305	\$927,366	\$2,460,882	\$1,446,871	\$4,869,683
Trauma/Accidents	\$4,697,673	5.5%	\$2,955,241	\$412,607	\$1,329,826	\$2,240,564	\$2,457,110
Pregnancy-related Disorders	\$4,526,499	5.3%	\$1,829,996	\$457,067	\$2,239,436	\$1,376,564	\$3,149,934
Musculoskeletal Disorders	\$4,450,108	5.2%	\$3,385,444	\$689,739	\$374,925	\$1,612,883	\$2,837,225
Mental Health	\$3,624,664	4.3%	\$1,408,243	\$354,328	\$1,862,093	\$1,738,847	\$1,885,817
Spine-related Disorders	\$3,461,496	4.1%	\$2,865,964	\$448,383	\$147,149	\$1,620,096	\$1,841,400
Renal/Urologic Disorders	\$3,069,907	3.6%	\$2,408,154	\$341,480	\$320,273	\$1,460,652	\$1,609,255
Infections	\$3,016,757	3.6%	\$2,462,651	\$374,224	\$179,882	\$1,690,023	\$1,326,733
Pulmonary Disorders	\$2,885,550	3.4%	\$1,692,347	\$523,071	\$670,131	\$1,452,221	\$1,433,329
Eye/ENT Disorders	\$2,839,891	3.3%	\$1,928,311	\$445,125	\$466,456	\$1,272,765	\$1,567,126
Endocrine/Metabolic Disorders	\$2,348,811	2.8%	\$2,036,622	\$244,863	\$67,327	\$1,232,938	\$1,115,873
Medical/Surgical Complications	\$1,834,519	2.2%	\$1,471,847	\$232,826	\$129,846	\$653,070	\$1,181,449
Gynecological/Breast Disorders	\$1,801,433	2.1%	\$1,326,352	\$302,118	\$172,962	\$35,779	\$1,765,653
Hematological Disorders	\$1,666,989	2.0%	\$850,130	\$762,695	\$54,165	\$1,059,010	\$607,979
Non-malignant Neoplasm	\$1,474,188	1.7%	\$1,332,642	\$101,775	\$39,771	\$521,478	\$952,710
Diabetes	\$1,130,044	1.3%	\$757,315	\$68,016	\$304,713	\$406,635	\$723,409
Dermatological Disorders	\$1,097,967	1.3%	\$711,298	\$237,820	\$148,848	\$478,341	\$619,626
Miscellaneous	\$877,429	1.0%	\$653,395	\$113,772	\$110,263	\$296,699	\$580,730
Vascular Disorders	\$687,666	0.8%	\$537,179	\$53,186	\$97,301	\$312,749	\$374,917
Abnormal Lab/Radiology	\$597,161	0.7%	\$471,279	\$107,807	\$18,074	\$233,325	\$363,835
Congenital/Chromosomal Anomalies	\$492,723	0.6%	\$118,576	\$140,409	\$233,738	\$132,403	\$360,320
Medication Related Conditions	\$226,049	0.3%	\$79,068	\$10,671	\$136,311	\$34,249	\$191,800
Cholesterol Disorders	\$148,274	0.2%	\$122,729	\$23,004	\$2,542	\$89,055	\$59,220
External Hazard Exposure	\$103,120	0.1%	\$9,005	\$2,670	\$91,444	\$89,092	\$14,028
Dental Conditions	\$44,720	0.1%	\$35,350	\$777	\$8,594	\$18,476	\$26,244
Allergic Reaction	\$44,633	0.1%	\$24,717	\$1,275	\$18,641	\$12,066	\$32,567
Social Determinants of Health	\$494	0.0%	\$254	\$239	\$0	\$462	\$31
Cause of Morbidity	\$241	0.0%	\$0	\$0	\$241	\$241	\$0
Total	\$84,813,752	100.0%	\$57,019,082	\$12,903,466	\$14,891,203	\$35,500,316	\$49,313,436

Mental Health Drilldown

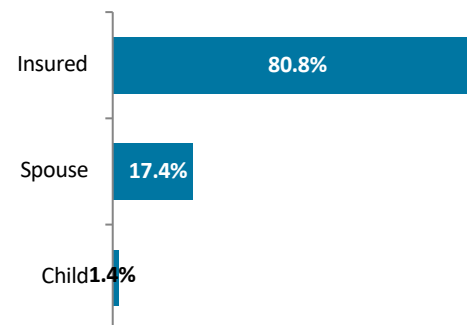
Grouper	PY21		PY22		PY23		PY24	
	Patients	Total Paid	Patients	Total Paid	Patients	Total Paid	Patients	Total Paid
Developmental Disorders	179	\$1,179,402	113	\$719,871	106	\$1,143,180	106	\$981,565
Alcohol Abuse/Dependence	136	\$1,288,204	101	\$873,612	129	\$434,007	116	\$663,138
Depression	1,597	\$1,103,414	1,156	\$1,279,244	974	\$1,005,022	1,028	\$668,747
Mood and Anxiety Disorders	1,920	\$638,818	1,486	\$406,189	1,263	\$370,422	1,265	\$428,733
Mental Health Conditions, Other	1,220	\$771,034	911	\$431,490	774	\$383,973	822	\$344,251
Eating Disorders	55	\$647,596	44	\$596,928	34	\$112,463	30	\$85,934
Bipolar Disorder	315	\$464,418	225	\$197,224	193	\$202,937	226	\$107,812
Sexually Related Disorders	68	\$90,021	42	\$11,305	56	\$109,156	59	\$68,016
Substance Abuse/Dependence	140	\$213,345	86	\$540,594	81	\$99,940	74	\$57,201
Complications of Substance Abuse	42	\$202,208	22	\$89,081	26	\$88,753	30	\$42,685
Schizophrenia	26	\$141,033	25	\$110,357	21	\$81,413	20	\$40,164
Attention Deficit Disorder	482	\$72,965	374	\$57,319	369	\$42,820	383	\$50,697
Psychoses	54	\$86,357	32	\$70,201	35	\$108,586	30	\$35,096
Sleep Disorders	564	\$76,491	371	\$46,254	347	\$39,783	321	\$32,656
Personality Disorders	25	\$16,690	19	\$13,480	8	\$1,502	16	\$8,339
Tobacco Use Disorder	126	\$8,010	106	\$6,184	103	\$7,184	115	\$9,630
Total		\$7,000,007		\$5,449,334		\$4,231,141		\$3,624,664

Diagnosis Grouper – Cancer

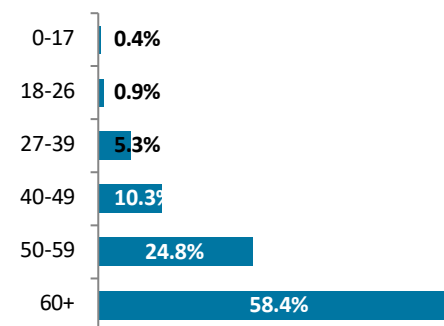
Diagnosis Sub-Grouper	Patients	Claims	Total Paid	% Paid
Cancer Therapies	78	522	\$3,834,939	4.5%
Cancers, Other	99	1,177	\$1,712,287	2.0%
Breast Cancer	170	1,846	\$1,196,078	1.4%
Secondary Cancers	54	449	\$671,937	0.8%
Prostate Cancer	104	832	\$615,942	0.7%
Colon Cancer	42	671	\$425,097	0.5%
Lung Cancer	25	254	\$322,033	0.4%
Cervical/Uterine Cancer	47	378	\$246,020	0.3%
Melanoma	45	202	\$219,247	0.3%
Myeloma	11	292	\$217,841	0.3%
Carcinoma in Situ	102	333	\$217,709	0.3%
Ovarian Cancer	22	242	\$170,995	0.2%
Myeloproliferative Neoplasms	55	560	\$162,287	0.2%
Lymphomas	36	445	\$147,482	0.2%
Non-Melanoma Skin Cancers	259	683	\$146,389	0.2%
Thyroid Cancer	39	230	\$132,938	0.2%
Kidney Cancer	20	285	\$74,807	0.1%
Pancreatic Cancer	5	146	\$54,578	0.1%
Brain Cancer	5	18	\$49,844	0.1%
Bladder Cancer	17	120	\$33,690	0.0%
Overall	----	----	\$10,652,139	12.8%

*Patient and claim counts are unique only within the category

Relationship



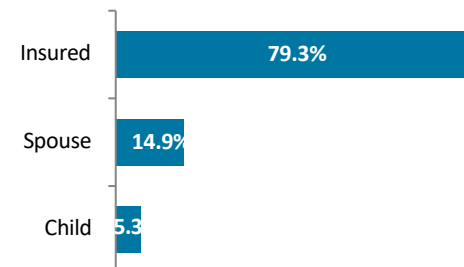
Age Range



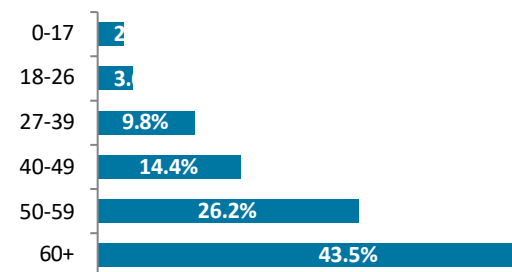
Diagnosis Grouper – Cardiac Disorders

Diagnosis Sub-Grouper	Patients	Claims	Total Paid	% Paid
Coronary Artery Disease	456	1,347	\$1,197,492	1.4%
Chest Pain	1142	2,763	\$927,376	1.1%
Myocardial Infarction	47	291	\$919,005	1.1%
Atrial Fibrillation	227	1,175	\$865,694	1.0%
Heart Valve Disorders	353	569	\$775,157	0.9%
Congestive Heart Failure	151	541	\$539,152	0.6%
Hypertension	2,678	6,487	\$507,971	0.6%
Pulmonary Embolism	44	272	\$427,292	0.5%
Cardiac Arrhythmias	631	1,399	\$317,704	0.4%
Cardiac Conditions, Other	586	1,220	\$234,533	0.3%
Cardiomyopathy	44	120	\$109,081	0.1%
Cardio-Respiratory Arrest	80	240	\$103,596	0.1%
Shock	15	46	\$9,590	0.0%
Ventricular Fibrillation	4	4	\$666	0.0%
Overall	----	----	\$6,934,310	8.1%

Relationship



Age Range

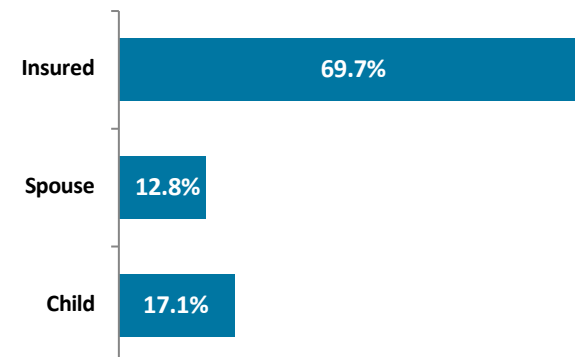


Diagnosis Grouper – Gastrointestinal Disorders

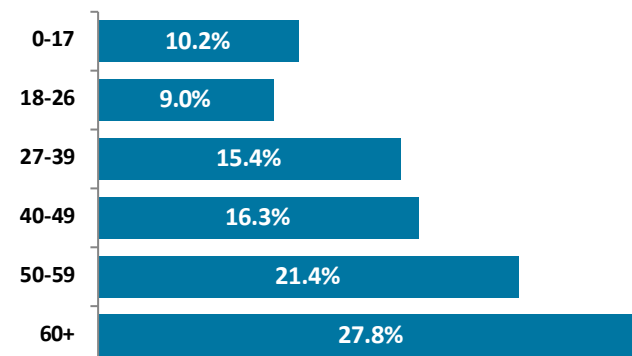
Diagnosis Sub-Grouper	Patients	Claims	Total Paid	% Paid
Abdominal Disorders	1,570	4,054	\$1,142,845	1.3%
GI Disorders, Other	899	2,178	\$883,891	1.0%
Hernias	250	794	\$718,748	0.8%
Gallbladder and Biliary Disease	175	730	\$680,040	0.8%
Upper GI Disorders	816	2,068	\$583,585	0.7%
GI Symptoms	1,074	2,353	\$565,033	0.7%
Inflammatory Bowel Disease	75	403	\$433,858	0.5%
Diverticulitis	168	405	\$323,896	0.4%
Pancreatic Disorders	60	318	\$299,791	0.4%
Hepatic Cirrhosis	31	196	\$278,702	0.3%
Liver Diseases	348	678	\$276,156	0.3%
Appendicitis	38	274	\$230,596	0.3%
Ostomies	38	355	\$169,853	0.2%
Constipation	238	401	\$139,815	0.2%
Hemorrhoids	166	301	\$101,968	0.1%
Peptic Ulcer/Related Disorders	38	57	\$54,574	0.1%
Esophageal Varices	6	17	\$13,886	0.0%
----	----	----	\$6,897,237	8.1%

*Patient and claim counts are unique only within the category

Relationship



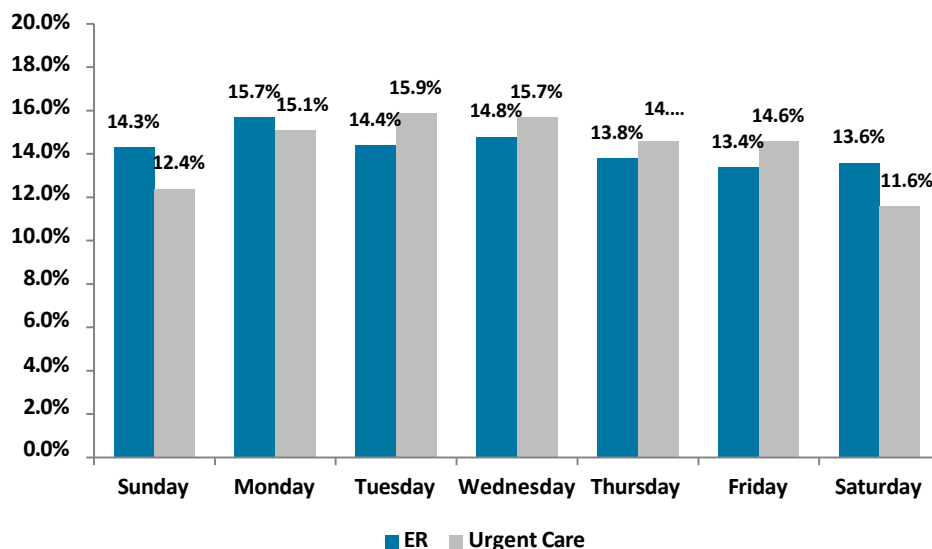
Age Range



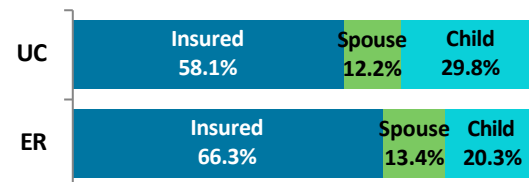
Emergency Room / Urgent Care Summary

	PY23		PY24		Peer Index	
	ER	Urgent Care	ER	Urgent Care	ER	Urgent Care
Number of Visits	4,216	7,180	3,865	7,179		
Visits Per Member	0.15	0.26	0.16	0.30	0.23	0.38
Visits/1000 Members	153	261	161	296	228	379
Avg Paid Per Visit	\$2,409	\$50	\$2,535	\$51	\$1,085	\$132
% with OV*	81.0%	78.0%	81.3%	78.2%		
% Avoidable	15.7%	41.2%	15.2%	40.1%		
Total Member Paid	\$4,955,181	\$863,690	\$4,775,880	\$962,886		
Total Plan Paid	\$10,157,383	\$360,133	\$9,796,429	\$363,481		

Visits by Day of Week



% of Paid



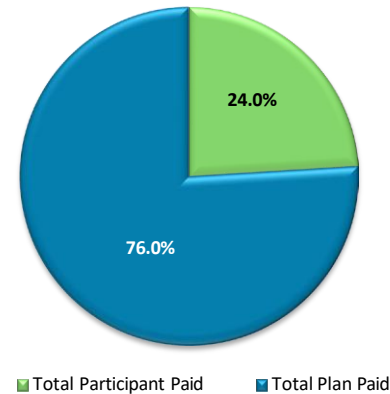
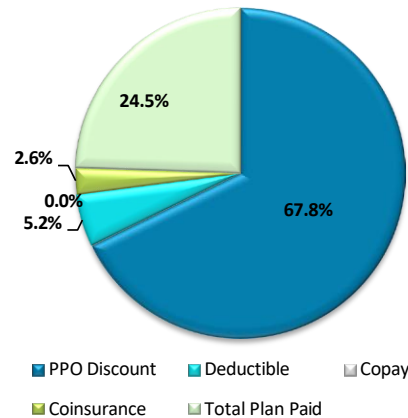
ER / UC Visits by Relationship						
Relationship	ER	Per 1,000	Urgent Care	Per 1,000	Total	Per 1,000
Insured	2,432	165	4,470	4,380	6,902	467
Spouse	447	162	797	863	1,244	450
Child	986	147	1,972	1,655	2,958	442
Total	3,865	161	7,239	296	11,104	458

Hospital and physician urgent care centers are included in the data.
Paid amount includes facility and professional fees.

Savings Summary – Medical Claims

Description	Dollars	PPPM	% of Eligible
Eligible Charges	\$361,185,004	\$2,037	100.0%
PPO Discount	\$234,828,622	\$1,324	65.0%
Deductible	\$17,923,620	\$101	5.0%
Copay	\$368	\$0	0.0%
Coinsurance	\$8,903,537	\$50	2.5%
Total Participant Paid	\$26,827,525	\$151	7.4%
Total Plan Paid	\$84,813,752	\$478	23.5%

Total Participant Paid - PY23	\$143
Total Plan Paid - PY23	\$449



Paid Claims by Age Range – Dental

Dental Paid Claims by Age Group									
Age Range	PY22		PY23		PY24		% Change		
	Dental Plan Paid	Dental PMPM	Dental Plan Paid	Dental PMPM	Dental Plan Paid	Dental PMPM	Dental Plan Paid	Dental PMPM	
<1	\$ 10,139	\$ 2	\$ 8,515	\$ 2	\$ 10,999	\$ 3	29.2%	40.2%	
1	\$ 50,347	\$ 10	\$ 50,274	\$ 11	\$ 51,004	\$ 12	1.5%	8.3%	
2 - 4	\$ 411,560	\$ 24	\$ 404,140	\$ 25	\$ 422,480	\$ 26	4.5%	4.8%	
5 - 9	\$ 1,237,486	\$ 37	\$ 1,175,803	\$ 37	\$ 1,236,105	\$ 40	5.1%	6.1%	
10 - 14	\$ 1,279,857	\$ 33	\$ 1,295,455	\$ 35	\$ 1,325,552	\$ 35	2.3%	1.9%	
15 - 19	\$ 1,442,554	\$ 34	\$ 1,493,927	\$ 35	\$ 1,827,562	\$ 42	22.3%	18.4%	
20 - 24	\$ 919,674	\$ 20	\$ 879,120	\$ 20	\$ 1,079,634	\$ 24	22.8%	21.3%	
25 - 29	\$ 868,582	\$ 27	\$ 753,936	\$ 25	\$ 924,119	\$ 30	22.6%	18.5%	
30 - 34	\$ 1,140,186	\$ 30	\$ 996,206	\$ 27	\$ 1,159,253	\$ 31	16.4%	13.9%	
35 - 39	\$ 1,360,917	\$ 31	\$ 1,229,651	\$ 29	\$ 1,429,221	\$ 33	16.2%	14.0%	
40 - 44	\$ 1,405,195	\$ 32	\$ 1,382,499	\$ 32	\$ 1,585,061	\$ 35	14.7%	10.1%	
45 - 49	\$ 1,465,920	\$ 34	\$ 1,368,193	\$ 32	\$ 1,603,746	\$ 37	17.2%	15.6%	
50 - 54	\$ 1,750,235	\$ 36	\$ 1,731,395	\$ 35	\$ 1,916,051	\$ 38	10.7%	8.7%	
55 - 59	\$ 2,018,842	\$ 39	\$ 1,922,113	\$ 38	\$ 2,152,139	\$ 43	12.0%	12.0%	
60 - 64	\$ 2,535,229	\$ 45	\$ 2,332,023	\$ 43	\$ 2,551,166	\$ 48	9.4%	10.7%	
65+	\$ 6,661,475	\$ 48	\$ 6,546,559	\$ 47	\$ 7,567,042	\$ 55	15.6%	16.0%	
Total	\$24,558,198	\$ 36	\$23,569,810	\$ 35	\$ 26,841,134	\$ 40	13.9%	12.9%	

Dental Paid Claims – State Participants

Dental Paid Claims - Total										
State Participants										
	PY23				PY24				% Change	
	Actives	Pre-Medicare Retirees	Medicare Retirees	Total	Actives	Pre-Medicare Retirees	Medicare Retirees	Total	Total	
Dental	\$ 15,543,626	\$ 2,149,425	\$ 476,404	\$ 18,169,456	\$ 17,855,023	\$ 2,203,968	\$ 576,177	\$ 20,635,168	13.6%	
Dental Exchange			\$ 3,365,799	\$ 3,365,799	\$ -	\$ -	\$ 3,906,600	\$ 3,906,600	16.1%	
Total	\$ 15,543,626	\$ 2,149,425	\$ 3,842,204	\$ 21,535,255	\$ 17,855,023	\$ 2,203,968	\$ 4,482,776	\$ 24,541,767	29.6%	

Dental Paid Claims - Per Participant per Month										
	PY23				PY24				% Change	
	Actives	Pre-Medicare Retirees	Medicare Retirees	Total	Actives	Pre-Medicare Retirees	Medicare Retirees	Total	Total	
Dental	\$ 50	\$ 52	\$ 56	\$ 50	\$ 55	\$ 55	\$ 67	\$ 56	11.2%	
Dental Exchange	\$ -	\$ -	\$ 49	\$ 49	\$ -	\$ -	\$ 56	\$ 56	15.0%	

Dental Paid Claims – Non-State Participants

Dental Paid Claims - Total										
Non-State Participants										
	PY23				PY24				% Change	
	Actives	Pre-Medicare Retirees	Medicare Retirees	Total	Actives	Pre-Medicare Retirees	Medicare Retirees	Total	Total	
Dental	\$ 3,733	\$ 97,091	\$ 207,244	\$ 308,068	\$ 2,945	\$ 66,992	\$ 230,008	\$ 299,945	-2.6%	
Dental Exchange			\$ 1,726,487	\$ 1,726,487	\$ -	\$ -	\$ 1,999,422	\$ 1,999,422	15.8%	
Total	\$ 3,733	\$ 97,091	\$ 1,933,731	\$ 2,034,555	\$ 2,945	\$ 66,992	\$ 2,229,430	\$ 2,299,367	13.0%	

Dental Paid Claims - Per Participant per Month										
	PY23				PY24				% Change	
	Actives	Pre-Medicare Retirees	Medicare Retirees	Total	Actives	Pre-Medicare Retirees	Medicare Retirees	Total	Total	
Dental	\$ 52	\$ 43	\$ 42	\$ 42	\$ 8	\$ 43	\$ 48	\$ 44	5.0%	
Dental Exchange	\$ -	\$ -	\$ 43	\$ 43	\$ -	\$ -	\$ 52	\$ 52	20.2%	

Dental Paid Claims – Total Participants

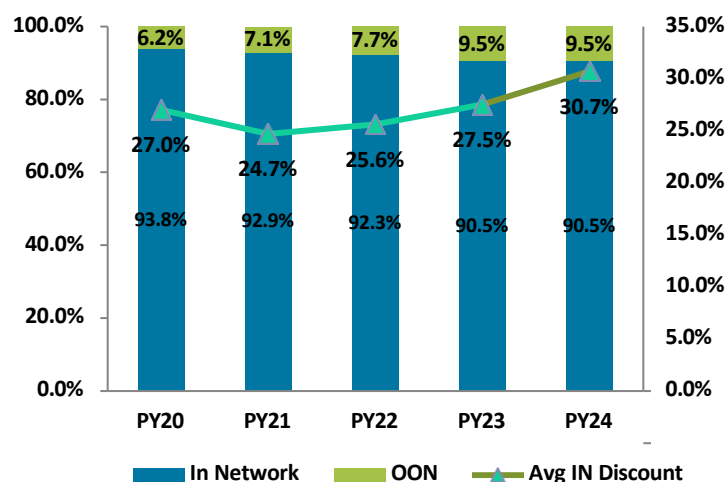
Dental Paid Claims - Total										
Total Participants										
	PY23				PY24				% Change	
	Actives	Pre-Medicare Retirees	Medicare Retirees	Total	Actives	Pre-Medicare Retirees	Medicare Retirees	Total	Total	
Dental	\$ 15,547,359	\$ 2,246,517	\$ 683,648	\$ 18,477,524	\$ 17,857,969	\$ 2,270,960	\$ 806,184	\$ 20,935,113	13.3%	
Dental Exchange	\$ -	\$ -	\$ 5,092,287	\$ 5,092,287	\$ -	\$ -	\$ 5,906,022	\$ 5,906,022	16.0%	
Total	\$ 15,547,359	\$ 2,246,517	\$ 5,775,935	\$ 23,569,810	\$ 17,857,969	\$ 2,270,960	\$ 6,712,206	\$ 26,841,134	13.9%	

Dental Paid Claims - Per Participant per Month										
	PY23				PY24				% Change	
	Actives	Pre-Medicare Retirees	Medicare Retirees	Total	Actives	Pre-Medicare Retirees	Medicare Retirees	Total		
Dental	\$ 50	\$ 51	\$ 51	\$ 50	\$ 55	\$ 55	\$ 60	\$ 56	11.1%	
Dental Exchange	\$ -	\$ -	\$ 46	\$ 46	\$ -	\$ -	\$ 54	\$ 54	16.9%	

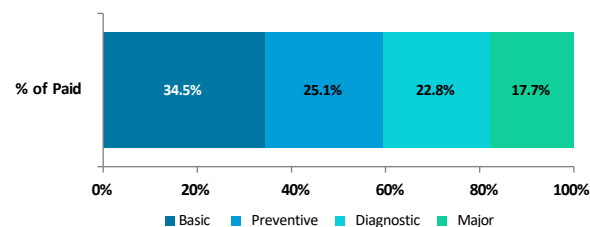
Dental Claims Analysis

Cost Distribution								
Paid Claims Category	Avg # of Members	% of Members	# Claims	% of Claims	Total Paid	% of Paid	Total EE Paid	% of EE Paid
\$1,000.01 Plus	6,526	11.6%	42,150	30.1%	\$13,145,136	49.0%	\$7,124,864	62.2%
\$750.01-\$1,000.00	2,471	4.4%	12,298	8.8%	\$2,569,190	9.6%	\$1,183,329	10.3%
\$500.01-\$750.00	4,596	8.2%	20,430	14.6%	\$3,348,266	12.5%	\$1,132,624	9.9%
\$250.01-\$500.00	13,392	23.8%	44,142	31.5%	\$5,760,781	21.5%	\$1,276,003	11.1%
\$0.01-\$250.00	9,890	17.6%	20,074	14.3%	\$2,017,761	7.5%	\$709,952	6.2%
\$0.00	415	0.7%	1,035	0.7%	\$0	0.0%	\$30,179	0.3%
No Claims	18,952	33.7%	0	0.0%	\$0	0.0%	\$0	0.0%
Total	56,241	100.0%	140,129	100.0%	\$26,841,134	100.0%	\$11,456,952	100.0%

Network Performance



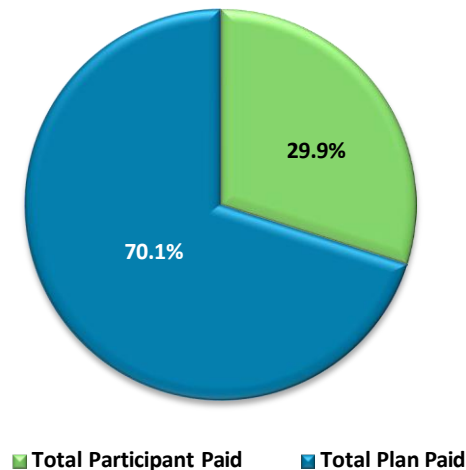
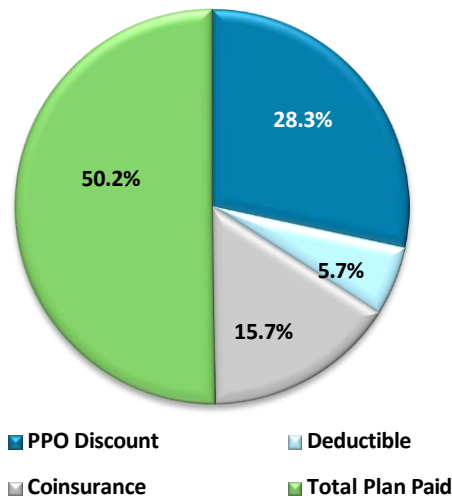
Claim Category	Total Paid	% of Paid
Basic	\$9,247,280	34.5%
Preventive	\$6,735,048	25.1%
Diagnostic	\$6,114,860	22.8%
Major	\$4,743,946	17.7%
Total	\$26,841,134	100.0%



Savings Summary – Dental Claims

Description	Dollars	PPPM	% of Eligible
Eligible Charges	\$53,673,718	\$129	100.0%
PPO Discount	\$15,150,527	\$36	28.2%
Deductible	\$3,038,876	\$7	5.7%
Coinsurance	\$8,418,076	\$20	15.7%
Total Participant Paid	\$11,456,952	\$28	21.3%
Total Plan Paid	\$26,841,134	\$64	50.0%

Total Participant Paid - PY23	\$25
Total Plan Paid - PY23	\$57



Quality Metrics

Condition	Metric	#Members in Group	#Meeting Metric	#Not Meeting Metric	% Meeting Metric
Asthma	Asthma and a routine provider visit in the last 12 months	1,005	979	26	97.1%
	Two or more asthma related ER Visits in the last 6 months	1,005	2	1,003	0.3%
	Asthma related admit in last 12 months	1,005	7	998	0.8%
Chronic Obstructive Pulmonary Disease	Exacerbations in last 12 months	228	7	221	3.5%
	Members with COPD who had an annual spirometry test	228	39	189	16.6%
Congestive Heart Failure	Re-admission to hospital with Heart Failure diagnosis within 30 days following a HF inpat	10	0	10	0.0%
	ER Visit for Heart Failure in last 90 days	212	12	200	3.6%
	Follow-up OV within 4 weeks of discharge from HF admission	10	9	1	62.5%
Diabetes	Annual office visit	1,468	1,383	85	94.2%
	Annual dilated eye exam	1,468	505	963	34.5%
	Annual foot exam	1,468	671	797	45.4%
	Annual HbA1c test done	1,468	1,245	223	82.9%
	Diabetes Annual lipid profile	1,468	1,140	328	77.6%
	Annual microalbumin urine screen	1,468	1,022	446	68.2%
Hyperlipidemia	Hyperlipidemia Annual lipid profile	4,169	3,352	817	80.4%
Hypertension	Hypertension Annual lipid profile	3,986	2,765	1,221	69.3%
	Annual serum creatinine test	3,877	3,101	776	80.0%
Wellness	Well Child Visit - 15 months	109	104	5	95.4%
	Routine office visit in last 6 months (All Ages)	24,108	14,600	9,508	60.6%
	Colorectal cancer screening ages 45-75 within the appropriate time period	10,008	5,053	4,955	50.5%
	Women age 25-65 with recommended cervical cancer/HPV screening	7,328	5,002	2,326	68.3%
	Males age greater than 49 with PSA test in last 24 months	4,031	2,013	2,018	49.9%
	Routine exam in last 24 months (All Ages)	24,108	19,831	4,277	82.3%
	Women age 40 to 75 with a screening mammogram last 24 months	6,389	3,921	2,468	61.4%

All member counts represent members active at the end of the report period.
Quality Metrics are always calculated on an incurred basis.

Chronic Conditions Prevalence

A member is identified as having a chronic condition if any one of the following three conditions is met within a 24 month service date period:

Two outpatient claims for the Dx on separate days of service

One ER Visit with the Dx as primary

One IP admission with the Dx as the admitting

Chronic Condition	# With Condition	% of Members	Members per 1,000	Admits per 1,000	ER Visits per 1,000	PMPY
Affective Psychosis	191	0.79%	7.88	193.94	587.88	\$12,034
Asthma	1,147	4.75%	47.32	129.51	462.82	\$15,937
Atrial Fibrillation	290	1.20%	11.96	413.66	534.63	\$30,588
Blood Disorders	1,725	7.15%	71.17	266.98	463.56	\$22,141
CAD	617	2.56%	25.46	270.07	446.51	\$25,252
COPD	225	0.93%	9.28	355.85	538.71	\$28,138
Cancer	1,028	4.26%	42.41	219.51	276.05	\$25,974
Chronic Pain	744	3.08%	30.70	179.74	551.83	\$19,403
Congestive Heart Failure	210	0.87%	8.66	650.44	865.41	\$39,890
Demyelinating Diseases	60	0.25%	2.48	243.83	452.83	\$52,752
Depression	1,675	6.94%	69.11	132.64	445.34	\$12,577
Diabetes	1,642	6.80%	67.74	141.31	295.89	\$15,818
ESRD	30	0.12%	1.24	1,250.81	1,328.99	\$57,572
Eating Disorders	91	0.38%	3.75	268.24	621.18	\$19,662
HIV/AIDS	37	0.15%	1.53	88.24	323.53	\$43,585
Hyperlipidemia	5,148	21.32%	212.39	82.86	228.18	\$9,777
Hypertension	4,020	16.65%	165.86	123.91	318.58	\$12,016
Immune Disorders	136	0.56%	5.61	385.77	476.06	\$50,105
Inflammatory Bowel Disease	95	0.39%	3.92	143.51	507.82	\$34,692
Liver Diseases	583	2.41%	24.05	302.72	520.69	\$19,946
Morbid Obesity	870	3.60%	35.89	201.06	402.12	\$16,623
Osteoarthritis	1,140	4.72%	47.03	119.89	381.65	\$15,152
Peripheral Vascular Disease	176	0.73%	7.26	337.38	588.75	\$19,802
Rheumatoid Arthritis	149	0.62%	6.15	79.14	395.68	\$30,511

*For Diabetes only, one or more Rx claims can also be used to identify the condition.

Data Includes Medical and Pharmacy
Based on 24 months incurred dates

Methodology

- Average member counts were weighted by the number of months each member had on the plan.
- Claims were pulled based upon the date paid.
- Claims were categorized based upon four groups:
 - Inpatient Facility
 - Outpatient Facility
 - Physician
 - Other (Other includes any medical reimbursements or durable medical equipment.)
- Inpatient analysis was done by identifying facility claims where a room and board charge was submitted and paid. Claims were then rolled up for the entire admission and categorized by the diagnosis code that held the highest paid amount. (Hospice and skilled nursing facility claims were excluded)
- Outpatient claims were flagged by an in-or-outpatient indicator being present on the claim that identified it as taking place at an outpatient facility.
- Physician claims were identified when the vendor type indicator was flagged as a professional charge.
 - These claims were in some cases segregated further to differentiate primary care physicians and specialists.
 - Office visits were identified by the presence of evaluation and management or consultation codes.
- Emergency room and urgent care episodes should be considered subcategories of physician and outpatient facility.
 - Emergency Room visits are identified by facility claims with a revenue code of 450-455, 457-459.
 - Urgent Care visits are identified by facility claims with a revenue code of 456 or physician claims with a place of service of “Urgent Care”.
 - Outpatient claims (including facility and physician) are then rolled up for the day of service and summarized as an ER/UC visit.
 - If a member has an emergency room visit on the same day as an urgent care visit, all claims are grouped into one episode and counted as an emergency room visit.
 - If a member was admitted into the hospital through the ER, the member will not show an ER visit. ER claims are bundled with the inpatient stay.

Appendix B

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UMR Inc. – LDPPO Utilization Review for PEBP July 1, 2023 – June 30, 2024

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DATASCOPE™

Nevada Public Employees' Benefits Program

Low Deductible Plan

July 2023 – June 2024 Incurred,

Paid through August 2024



Reimagine | Rediscover **Benefits**



Overview

- Total Medical Spend for PY24 was \$83,671,713 with a plan cost per employee per year (PEPY) of \$8,381. This is an increase of 10.2% when compared to PY23.
 - IP Cost per Admit is \$24,743 which is 1.1% higher than PY23.
 - ER Cost per Visit is \$3,289 which is 5.2% higher than PY23.
- Employees shared in 13.3% of the medical cost.
- Inpatient facility costs were 20.1% of the plan spend.
- 74.9% of the Average Membership had paid Medical claims less than \$2,500, with 13.8% of those having no claims paid at all during the reporting period.
- 91 members exceeded the \$100k high-cost threshold during the reporting period, which accounted for 24.2% of the plan spend. The highest diagnosis category was Cancer, accounting for 25.7% of the high-cost claimant dollars.
- Total spending with in-network providers was 97.8%. The average In Network discount was 65.7%, which is 2.2% higher than the PY23 average discount of 64.3%.

Paid Claims by Age Group

Paid Claims by Age Group															
PY23								PY24						% Change	
Age Range	Med Net Pay	Med PMPM	Rx Net Pay	Rx PMPM	Net Pay	PMPM	Med Net Pay	Med PMPM	Rx Net Pay	Rx PMPM	Net Pay	PMPM	Net Pay	PMPM	
<1	\$ 2,501,778	\$ 1,345	\$ 32,538	\$ 17	\$ 2,534,316	\$ 1,363	\$ 5,873,049	\$ 2,438	\$ 21,608	\$ 9	\$ 5,894,657	\$ 2,447	132.6%	79.6%	
1	\$ 504,661	\$ 279	\$ 9,018	\$ 5	\$ 513,679	\$ 283	\$ 725,917	\$ 300	\$ 5,780	\$ 2	\$ 731,697	\$ 302	42.4%	6.5%	
2 - 4	\$ 1,075,154	\$ 167	\$ 44,756	\$ 7	\$ 1,119,910	\$ 174	\$ 1,221,076	\$ 149	\$ 39,843	\$ 5	\$ 1,260,919	\$ 153	12.6%	-12.3%	
5 - 9	\$ 1,037,022	\$ 88	\$ 510,021	\$ 43	\$ 1,547,043	\$ 131	\$ 1,938,022	\$ 126	\$ 612,277	\$ 40	\$ 2,550,299	\$ 166	64.8%	26.6%	
10 - 14	\$ 1,613,381	\$ 127	\$ 339,379	\$ 27	\$ 1,952,760	\$ 154	\$ 2,385,670	\$ 144	\$ 444,775	\$ 27	\$ 2,830,445	\$ 171	44.9%	11.2%	
15 - 19	\$ 2,490,501	\$ 170	\$ 529,723	\$ 36	\$ 3,020,224	\$ 207	\$ 3,500,078	\$ 180	\$ 833,803	\$ 43	\$ 4,333,880	\$ 223	43.5%	7.9%	
20 - 24	\$ 2,780,617	\$ 200	\$ 738,589	\$ 53	\$ 3,519,206	\$ 253	\$ 4,261,497	\$ 233	\$ 1,234,084	\$ 67	\$ 5,495,581	\$ 300	56.2%	18.5%	
25 - 29	\$ 2,528,215	\$ 226	\$ 1,176,813	\$ 105	\$ 3,705,028	\$ 331	\$ 4,297,532	\$ 275	\$ 1,872,936	\$ 120	\$ 6,170,468	\$ 395	66.5%	19.2%	
30 - 34	\$ 3,957,289	\$ 299	\$ 1,404,659	\$ 106	\$ 5,361,948	\$ 405	\$ 5,278,283	\$ 289	\$ 3,392,460	\$ 186	\$ 8,670,743	\$ 475	61.7%	17.4%	
35 - 39	\$ 4,229,494	\$ 282	\$ 1,497,515	\$ 100	\$ 5,727,009	\$ 381	\$ 6,401,843	\$ 323	\$ 2,960,313	\$ 149	\$ 9,362,156	\$ 472	63.5%	23.8%	
40 - 44	\$ 4,705,186	\$ 320	\$ 2,080,302	\$ 142	\$ 6,785,488	\$ 462	\$ 6,954,167	\$ 350	\$ 3,344,676	\$ 168	\$ 10,298,843	\$ 518	51.8%	12.2%	
45 - 49	\$ 4,940,717	\$ 383	\$ 2,240,868	\$ 174	\$ 7,181,585	\$ 556	\$ 5,933,745	\$ 346	\$ 3,713,379	\$ 217	\$ 9,647,124	\$ 563	34.3%	1.2%	
50 - 54	\$ 5,958,170	\$ 422	\$ 2,958,706	\$ 209	\$ 8,916,876	\$ 631	\$ 8,587,672	\$ 446	\$ 5,379,646	\$ 279	\$ 13,967,319	\$ 725	56.6%	14.8%	
55 - 59	\$ 6,680,393	\$ 527	\$ 2,758,808	\$ 218	\$ 9,439,201	\$ 744	\$ 9,990,828	\$ 585	\$ 4,611,103	\$ 270	\$ 14,601,931	\$ 855	54.7%	14.9%	
60 - 64	\$ 8,807,144	\$ 790	\$ 3,625,065	\$ 325	\$ 12,432,209	\$ 1,115	\$ 10,957,617	\$ 744	\$ 5,076,252	\$ 344	\$ 16,033,869	\$ 1,088	29.0%	-2.4%	
65+	\$ 2,188,054	\$ 511	\$ 1,051,053	\$ 245	\$ 3,239,107	\$ 756	\$ 5,364,717	\$ 911	\$ 2,057,554	\$ 349	\$ 7,422,270	\$ 1,261	129.1%	66.8%	
Total	\$ 55,997,776	\$ 325	\$ 20,997,812	\$ 122	\$ 76,995,588	\$ 447	\$ 83,671,713	\$ 363	\$ 35,600,489	\$ 154	\$ 119,272,202	\$ 518	54.9%	15.9%	

Financial Summary (p. 1 of 2)

	Total				State Active				Non-State Active			
Summary	PY22	PY23	PY24	Variance to Prior Year	PY22	PY23	PY24	Variance to Prior Year	PY22	PY23	PY24	Variance to Prior Year
Average Enrollment												
Employees	4,336	7,362	9,984	35.6%	3,926	6,690	9,134	36.5%	1	1	1	25.0%
Spouses	1,172	5,149	2,435	-52.7%	1,042	4,901	2,166	-55.8%	1	0	1	0.0%
Children	3,255	1,857	6,786	265.5%	3,103	1,645	6,475	293.7%	0	1	0	-100.0%
Total Members	8,762	14,368	19,205	33.7%	8,071	13,235	17,775	34.3%	2	2	3	25.0%
Family Size	2.0	2.0	1.9	-1.5%	2.1	2.0	2.0	-1.5%	2.0	2.0	2.0	0.0%
Financial Summary												
Gross Cost	\$40,570,436	\$64,817,531	\$96,559,363	49.0%	\$35,366,785	\$56,350,280	\$84,790,434	50.5%	\$38,494	\$17,911	\$35,717	99.4%
Client Paid	\$34,446,692	\$55,997,776	\$83,671,713	49.4%	\$29,933,591	\$48,495,839	\$73,198,110	50.9%	\$33,556	\$13,953	\$28,750	106.0%
Employee Paid	\$6,123,744	\$8,819,755	\$12,887,650	46.1%	\$5,433,194	\$7,854,441	\$11,592,324	47.6%	\$4,938	\$3,958	\$6,966	76.0%
Client Paid-PEPY	\$7,944	\$7,606	\$8,381	10.2%	\$7,624	\$7,249	\$8,013	10.5%	\$33,556	\$13,953	\$23,000	64.8%
Client Paid-PMPY	\$3,931	\$3,897	\$4,357	11.8%	\$3,709	\$3,664	\$4,118	12.4%	\$16,778	\$6,976	\$11,500	64.9%
Client Paid-PEPM	\$662	\$634	\$698	10.1%	\$635	\$604	\$668	10.6%	\$2,796	\$1,163	\$1,917	64.8%
Client Paid-PMPM	\$328	\$325	\$363	11.7%	\$309	\$305	\$343	12.5%	\$1,398	\$581	\$958	64.9%
High Cost Claimants (HCC's) > \$100k												
# of HCC's	41	54	91	68.5%	33	43	75	74.4%	0	0	0	0.0%
HCC's / 1,000	4.7	3.8	4.7	26.1%	4.1	3.3	4.2	29.8%	0.0	0.0	0.0	0.0%
Avg HCC Paid	\$286,071	\$238,672	\$222,339	-6.8%	\$305,172	\$238,047	\$217,806	-8.5%	\$0	\$0	\$0	0.0%
HCC's % of Plan Paid	34.0%	23.0%	24.2%	5.2%	33.6%	21.1%	22.3%	5.7%	0.0%	0.0%	0.0%	0.0%
Cost Distribution by Claim Type (PMPY)												
Facility Inpatient	\$1,269	\$783	\$778	-0.6%	\$1,257	\$725	\$758	4.6%	\$424	\$0	\$0	0.0%
Facility Outpatient	\$1,043	\$1,412	\$1,708	21.0%	\$933	\$1,292	\$1,558	20.6%	\$5,152	\$1,007	\$1,281	27.2%
Physician	\$1,567	\$1,702	\$1,871	9.9%	\$1,468	\$1,647	\$1,802	9.4%	\$9,883	\$5,969	\$10,219	71.2%
Other	\$53	\$0	\$0	0.0%	\$50	\$0	\$0	0.0%	\$1,319	\$0	\$0	0.0%
Total	\$3,931	\$3,897	\$4,357	11.8%	\$3,709	\$3,664	\$4,118	12.4%	\$16,778	\$6,976	\$11,500	64.9%

Financial Summary (p. 2 of 2)

	State Retirees				Non-State Retirees				
Summary	PY22	PY23	PY24	Variance to Prior Year	PY22	PY23	PY24	Variance to Prior Year	Peer Index
Average Enrollment									
Employees	388	644	820	27.3%	21	27	28	6.6%	
Spouses	118	248	256	3.1%	11	0	12	7252.9%	
Children	152	199	310	55.9%	0	13	1	-92.0%	
Total Members	657	1,091	1,386	27.0%	32	39	42	5.9%	
Family Size	1.7	1.7	1.7	0.0%	1.5	1.5	1.5	-0.7%	1.6
Financial Summary									
Gross Cost	\$4,886,927	\$8,012,597	\$11,406,410	42.4%	\$278,229	\$436,743	\$326,803	-25.2%	
Client Paid	\$4,252,910	\$7,107,682	\$10,192,079	43.4%	\$226,635	\$380,303	\$252,774	-33.5%	
Employee Paid	\$634,017	\$904,915	\$1,214,330	34.2%	\$51,594	\$56,440	\$74,029	31.2%	
Client Paid-PEPY	\$10,968	\$11,032	\$12,429	12.7%	\$10,665	\$14,261	\$8,895	-37.6%	\$6,258
Client Paid-PMPY	\$6,473	\$6,514	\$7,355	12.9%	\$7,027	\$9,669	\$6,067	-37.3%	\$3,830
Client Paid-PEPM	\$914	\$919	\$1,036	12.7%	\$889	\$1,188	\$741	-37.6%	\$521
Client Paid-PMPM	\$539	\$543	\$613	12.9%	\$586	\$806	\$506	-37.2%	\$319
High Cost Claimants (HCC's) > \$100k									
# of HCC's	8	11	17	54.5%	1	1	1	0.0%	
HCC's / 1,000	12.2	10.1	12.3	21.7%	31.0	25.4	24.0	-5.6%	
Avg HCC Paid	\$193,399	\$224,298	\$222,814	-0.7%	\$111,053	\$185,019	\$109,572	-40.8%	
HCC's % of Plan Paid	36.4%	34.7%	37.2%	7.2%	49.0%	48.7%	43.3%	-11.1%	
Cost Distribution by Claim Type (PMPY)									
Facility Inpatient	\$1,452	\$1,476	\$985	-33.3%	\$675	\$1,128	\$2,544	125.5%	\$1,044
Facility Outpatient	\$2,262	\$2,697	\$3,626	34.4%	\$3,333	\$6,277	\$1,721	-72.6%	\$1,310
Physician	\$2,676	\$2,342	\$2,744	17.2%	\$2,969	\$2,264	\$1,802	-20.4%	\$1,404
Other	\$83	\$0	\$0	0.0%	\$50	\$0	\$0	0.0%	\$72
Total	\$6,473	\$6,514	\$7,355	12.9%	\$7,027	\$9,669	\$6,067	-37.3%	\$3,830

Paid Claims by Claim Type – State Participants

Net Paid Claims - Total										
State Participants										
	PY23				PY24				% Change	
	Actives	Pre-Medicare Retirees	Medicare Retirees	Total	Actives	Pre-Medicare Retirees	Medicare Retirees	Total	Total	
Medical										
Inpatient	\$ 11,601,072	\$ 1,731,651	\$ 34,322	\$ 13,367,044	\$ 16,054,962	\$ 1,625,676	\$ 69,021	\$ 17,749,659	32.8%	
Outpatient	\$ 36,894,767	\$ 5,134,903	\$ 206,807	\$ 42,236,477	\$ 57,143,147	\$ 8,126,721	\$ 370,661	\$ 65,640,530	55.4%	
Total - Medical	\$ 48,495,839	\$ 6,866,553	\$ 241,129	\$ 55,603,521	\$ 73,198,110	\$ 9,752,397	\$ 439,682	\$ 83,390,189	50.0%	

Net Paid Claims - Per Participant per Month										
	PY23				PY24				% Change	
	Actives	Pre-Medicare Retirees	Medicare Retirees	Total	Actives	Pre-Medicare Retirees	Medicare Retirees	Total	Total	
Medical	\$ 604	\$ 952	\$ 467	\$ 632	\$ 668	\$ 1,071	\$ 598	\$ 698	10.5%	

Paid Claims by Claim Type – Non-State Participants

Net Paid Claims - Total										
Non-State Participants										
	PY23				PY24				% Change	
	Actives	Pre-Medicare Retirees	Medicare Retirees	Total	Actives	Pre-Medicare Retirees	Medicare Retirees	Total	Total	
Medical										
Inpatient	\$ -	\$ 48,492	\$ 564	\$ 49,056			\$ 106,871	\$ 106,871	0.0%	
Outpatient	\$ 13,953	\$ 114,559	\$ 216,688	\$ 345,200	\$ 28,750	\$ 36,286	\$ 109,617	\$ 174,653	-49.4%	
Total - Medical	\$ 13,953	\$ 163,051	\$ 217,252	\$ 394,256	\$ 28,750	\$ 36,286	\$ 216,488	\$ 281,525	-28.6%	

Net Paid Claims - Per Participant per Month										
	PY23				PY24				% Change	
	Actives	Pre-Medicare Retirees	Medicare Retirees	Total	Actives	Pre-Medicare Retirees	Medicare Retirees	Total	Total	
Medical	\$ 1,163	\$ 1,052	\$ 1,317	\$ 1,188	\$ 1,917	\$ 324	\$ 946	\$ 791	-33.4%	

Paid Claims by Claim Type – Total Participants

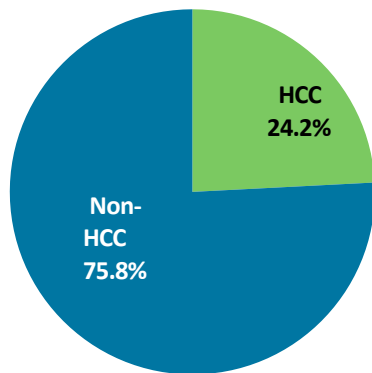
Net Paid Claims - Total										
Total Participants										
	PY23				PY24				% Change	
	Actives	Pre-Medicare Retirees	Medicare Retirees	Total	Actives	Pre-Medicare Retirees	Medicare Retirees	Total	Total	
Medical										
Inpatient	\$ 11,601,072	\$ 1,780,142	\$ 34,886	\$ 13,416,100	\$ 16,054,962	\$ 1,625,676	\$ 175,892	\$ 17,856,530	33.1%	
Outpatient	\$ 36,908,720	\$ 5,249,462	\$ 423,495	\$ 42,581,676	\$ 57,171,898	\$ 8,163,007	\$ 480,279	\$ 65,815,183	54.6%	
Total - Medical	\$ 48,509,792	\$ 7,029,604	\$ 458,381	\$ 55,997,776	\$ 73,226,860	\$ 9,788,683	\$ 656,171	\$ 83,671,713	49.4%	

Net Paid Claims - Per Participant per Month										
	PY23				PY24				% Change	
	Actives	Pre-Medicare Retirees	Medicare Retirees	Total	Actives	Pre-Medicare Retirees	Medicare Retirees	Total	Total	
Medical	\$ 604	\$ 954	\$ 673	\$ 634	\$ 668	\$ 1,062	\$ 681	\$ 698	10.2%	

Cost Distribution – Medical Claims

PY23							PY24					
Avg # of Members	% of Members	Total Paid	% of Paid	EE Paid	% EE Paid	Paid Claims Category	Avg # of Members	% of Members	Total Paid	% of Paid	EE Paid	% EE Paid
47	0.3%	\$12,789,533	22.8%	\$211,287	2.4%	\$100,000.01 Plus	80	0.4%	\$20,232,451	24.2%	\$386,848	3.0%
81	0.6%	\$6,325,231	11.3%	\$361,408	4.1%	\$50,000.01-\$100,000.00	121	0.6%	\$9,054,493	10.8%	\$492,196	3.8%
198	1.4%	\$7,156,895	12.8%	\$756,235	8.6%	\$25,000.01-\$50,000.00	317	1.6%	\$11,545,111	13.8%	\$1,180,426	9.2%
638	4.4%	\$10,590,927	18.9%	\$1,838,747	20.8%	\$10,000.01-\$25,000.00	932	4.9%	\$15,393,947	18.4%	\$2,734,238	21.2%
830	5.8%	\$6,225,819	11.1%	\$1,559,993	17.7%	\$5,000.01-\$10,000.00	1,333	6.9%	\$9,890,548	11.8%	\$2,304,274	17.9%
1,454	10.1%	\$5,554,427	9.9%	\$1,625,903	18.4%	\$2,500.01-\$5,000.00	2,025	10.5%	\$7,684,735	9.2%	\$2,263,524	17.6%
8,922	62.1%	\$7,354,945	13.1%	\$2,460,696	27.9%	\$0.01-\$2,500.00	11,570	60.2%	\$9,870,428	11.8%	\$3,505,812	27.2%
90	0.6%	\$0	0.0%	\$5,487	0.1%	\$0.00	176	0.9%	\$0	0.0%	\$20,332	0.2%
2,108	14.7%	\$0	0.0%	\$0	0.0%	No Claims	2,652	13.8%	\$0	0.0%	\$0	0.0%
14,368	100.0%	\$55,997,776	100.0%	\$8,819,755	100.0%		19,205	100.0%	\$83,671,713	100.0%	\$12,887,650	100.0%

Distribution of HCC Medical Claims Paid



HCC – High-Cost Claimant over \$100K

HCC's by Diagnosis Group			
Top 10 Diagnosis Groupers	Patients	Total Paid	% Paid
Cancer	37	\$5,204,938	25.7%
Neurological Disorders	49	\$3,087,572	15.3%
Cardiac Disorders	55	\$2,471,722	12.2%
Pregnancy-related Disorders	14	\$1,703,646	8.4%
Gastrointestinal Disorders	59	\$1,066,454	5.3%
Pulmonary Disorders	56	\$989,945	4.9%
Endocrine/Metabolic Disorders	36	\$946,564	4.7%
Trauma/Accidents	26	\$685,725	3.4%
Spine-related Disorders	24	\$633,138	3.1%
Renal/Urologic Disorders	32	\$480,006	2.4%
All Other		\$2,963,175	14.6%
Overall	----	\$20,232,885	100.0%

Utilization Summary (p. 1 of 2)

Inpatient data reflects facility charges and professional services.
DX&L = Diagnostics, X-Ray and Laboratory

	Total				State Active				Non-State Active			
Summary	PY22	PY23	PY24	Variance to Prior Year	PY22	PY23	PY24	Variance to Prior Year	PY22	PY23	PY24	Variance to Prior Year
Inpatient Facility												
# of Admits	318	551	739		275	498	685		1	0	0	
# of Bed Days	1,769	2,359	3,784		1,628	2,125	3,395		1	0	0	
Paid Per Admit	\$37,589	\$24,480	\$24,743	1.1%	\$38,947	\$23,382	\$24,070	2.9%	\$2,303	\$0	\$0	0.0%
Paid Per Day	\$6,757	\$5,718	\$4,832	-15.5%	\$6,579	\$5,480	\$4,857	-11.4%	\$2,303	\$0	\$0	0.0%
Admits Per 1,000	36	38	38	0.0%	34	38	39	2.6%	500	0	0	0.0%
Days Per 1,000	202	164	197	20.1%	202	161	191	18.6%	500	0	0	0.0%
Avg LOS	5.6	4.3	5.1	18.6%	5.9	4.3	5	16.3%	1	0	0	0.0%
# Admits From ER	164	266	399	50.0%	136	231	365	58.0%	0	0	0	0.0%
Physician Office												
OV Utilization per Member	4.7	5.1	5.6	9.8%	4.6	5	5.5	10.0%	13.0	13.5	10.0	-25.9%
Avg Paid per OV	\$124	\$118	\$121	2.5%	\$120	\$118	\$120	1.7%	\$335	\$320	\$490	53.1%
Avg OV Paid per Member	\$589	\$601	\$681	13.3%	\$549	\$583	\$662	13.6%	\$4,351	\$4,315	\$4,902	13.6%
DX&L Utilization per Member	8.1	10.3	10.8	4.9%	7.8	9.9	10.5	6.1%	27.5	30	28.8	-4.0%
Avg Paid per DX&L	\$51	\$60	\$66	10.0%	\$49	\$59	\$63	6.8%	\$94	\$54	\$110	103.7%
Avg DX&L Paid per Member	\$419	\$618	\$710	14.9%	\$382	\$583	\$657	12.7%	\$2,574	\$1,628	\$3,167	94.5%
Emergency Room												
# of Visits	1,170	2,129	3,192		1,090	1,957	2,950		1	0	1	
Visits Per Member	0.13	0.15	0.17	13.3%	0.14	0.15	0.17	13.3%	0.5	0	0.4	0.0%
Visits Per 1,000	134	148	166	12.2%	135	148	166	12.2%	500	0	400	0.0%
Avg Paid per Visit	\$2,440	\$3,126	\$3,289	5.2%	\$2,425	\$3,152	\$3,251	3.1%	\$5,209	\$0	\$1,817	0.0%
Urgent Care												
# of Visits	2,734	5,111	7,164		2,578	4,843	6,754		0	3	2	
Visits Per Member	0.31	0.36	0.36	0.0%	0.32	0.37	0.38	2.7%	0.00	1.50	0.80	-46.7%
Visits Per 1,000	312	356	364	2.2%	319	366	380	3.8%	0	1,500	800	-46.7%
Avg Paid per Visit	\$120	\$98	\$107	9.2%	\$119	\$98	\$107	9.2%	\$0	\$159	\$170	6.9%

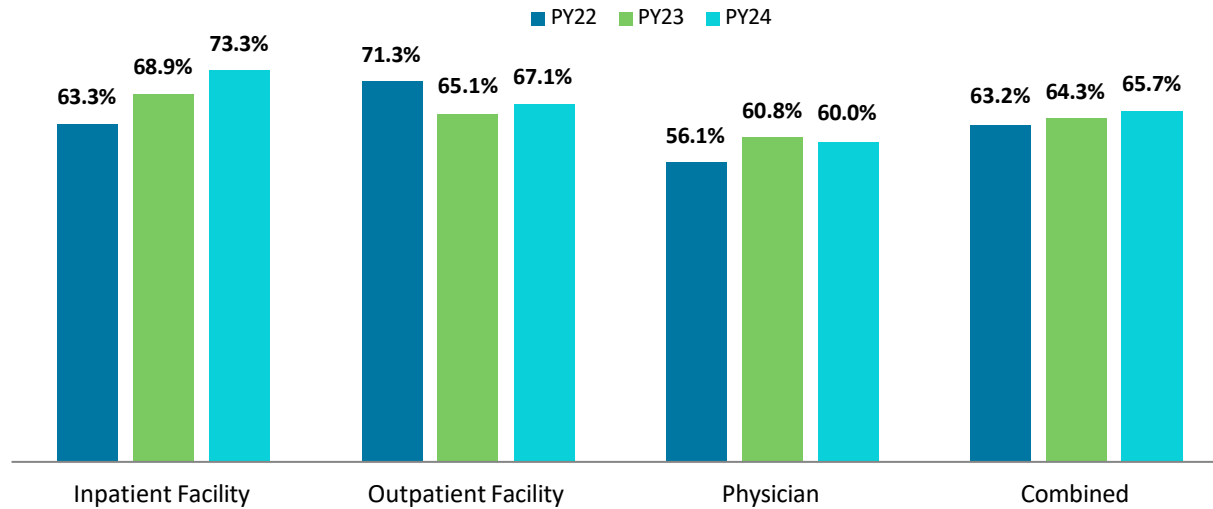
Utilization Summary (p. 2 of 2)

Inpatient data reflects facility charges and professional services.
DX&L = Diagnostics, X-Ray and Laboratory

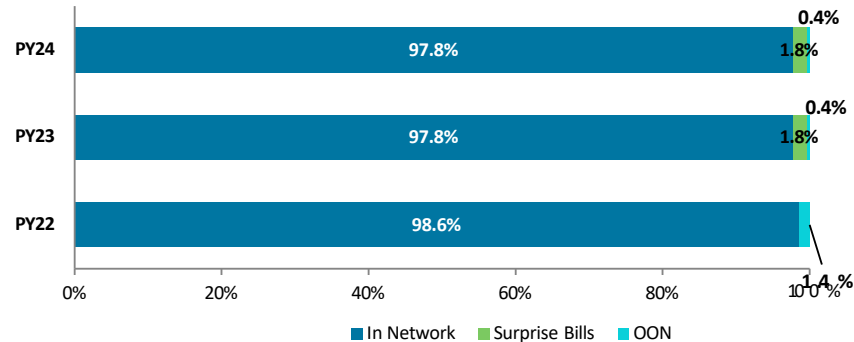
	State Retirees				Non-State Retirees				
Summary	PY22	PY23	PY24	Variance to Prior Year	PY22	PY23	PY24	Variance to Prior Year	Peer Index
Inpatient Facility									
# of Admits	35	52	52		7	1	2		
# of Bed Days	119	231	374		21	3	15		
Paid Per Admit	\$33,826	\$34,536	\$33,079	-4.2%	\$8,120	\$48,492	\$38,349	-20.9%	\$19,305
Paid Per Day	\$9,949	\$7,774	\$4,599	-40.8%	\$2,707	\$16,164	\$5,113	-68.4%	\$3,615
Admits Per 1,000	53	48	38	-20.8%	217	25	48	92.0%	64
Days Per 1,000	181	212	270	27.4%	651	76	360	373.7%	342
Avg LOS	3.4	4.4	7.2	63.6%	3.0	3.0	7.5	150.0%	5.3
# Admits From ER	24	35	33	-5.7%	4	0	1	0.0%	
Physician Office									
OV Utilization per Member	6.4	6.7	6.8	1.5%	7.5	8.1	9.1	12.3%	5.2
Avg Paid per OV	\$166	\$120	\$132	10.0%	\$96	\$89	\$98	10.1%	\$97
Avg OV Paid per Member	\$1,059	\$802	\$904	12.7%	\$721	\$719	\$898	24.9%	\$502
DX&L Utilization per Member	12.5	14.9	14.6	-2.0%	12.3	19.9	22	10.6%	9.0
Avg Paid per DX&L	\$67	\$69	\$95	37.7%	\$78	\$68	\$43	-36.8%	\$46
Avg DX&L Paid per Member	\$835	\$1,020	\$1,382	35.5%	\$954	\$1,361	\$957	-29.7%	\$412
Emergency Room									
# of Visits	78	166	228		1	6	13		
Visits Per Member	0.12	0.15	0.16	6.7%	0.03	0.15	0.31	106.7%	0.23
Visits Per 1,000	119	152	165	8.6%	31	153	312	103.9%	228
Avg Paid per Visit	\$2,622	\$2,895	\$3,719	28.5%	\$1,827	\$961	\$4,509	369.2%	\$1,035
Urgent Care									
# of Visits	154	254	402		2	11	6		
Visits Per Member	0.23	0.23	0.29	26.1%	0.06	0.28	0.14	-50.0%	0.38
Visits Per 1,000	234	233	290	24.5%	62	280	144	-48.6%	379
Avg Paid per Visit	\$143	\$100	\$104	4.0%	\$70	\$64	\$38	-40.6%	\$132

Provider Network Summary

In Network Discounts



Network Utilization



Diagnosis Grouper Summary

Diagnosis Grouper	Total Paid	% Paid	Insured	Spouse	Child	Male	Female
Gastrointestinal Disorders	\$7,319,784	8.7%	\$4,829,374	\$1,288,460	\$1,201,950	\$2,619,808	\$4,699,976
Cancer	\$7,006,433	8.4%	\$4,614,687	\$2,383,071	\$8,675	\$3,107,425	\$3,899,009
Health Status/Encounters	\$6,505,125	7.8%	\$3,636,811	\$970,316	\$1,897,998	\$2,033,403	\$4,471,722
Cardiac Disorders	\$6,353,152	7.6%	\$3,880,285	\$1,713,094	\$759,772	\$2,531,207	\$3,821,944
Mental Health	\$6,297,625	7.5%	\$2,914,634	\$503,918	\$2,879,072	\$2,226,247	\$4,071,377
Pregnancy-related Disorders	\$6,229,241	7.4%	\$2,368,342	\$1,156,732	\$2,704,166	\$1,363,977	\$4,865,264
Neurological Disorders	\$6,068,107	7.3%	\$2,593,265	\$644,881	\$2,829,961	\$3,330,687	\$2,737,420
Musculoskeletal Disorders	\$4,752,155	5.7%	\$3,242,813	\$953,193	\$556,148	\$1,860,483	\$2,891,671
Trauma/Accidents	\$4,218,886	5.0%	\$2,161,808	\$454,697	\$1,602,382	\$2,345,196	\$1,873,690
Eye/ENT Disorders	\$4,011,254	4.8%	\$2,190,510	\$597,871	\$1,222,873	\$1,708,644	\$2,302,610
Spine-related Disorders	\$3,277,548	3.9%	\$2,422,354	\$693,659	\$161,535	\$1,474,454	\$1,803,094
Pulmonary Disorders	\$3,264,008	3.9%	\$1,412,739	\$829,949	\$1,021,320	\$1,954,003	\$1,310,004
Gynecological/Breast Disorders	\$3,064,664	3.7%	\$2,089,128	\$613,650	\$361,886	\$102,019	\$2,962,645
Endocrine/Metabolic Disorders	\$3,027,136	3.6%	\$2,522,860	\$306,292	\$197,985	\$876,295	\$2,150,841
Renal/Urologic Disorders	\$2,535,448	3.0%	\$1,716,869	\$477,544	\$341,035	\$1,359,220	\$1,176,229
Infections	\$1,789,633	2.1%	\$1,040,012	\$366,243	\$383,378	\$914,297	\$875,336
Non-malignant Neoplasm	\$1,226,926	1.5%	\$931,560	\$191,640	\$103,726	\$225,153	\$1,001,773
Miscellaneous	\$927,004	1.1%	\$532,871	\$176,920	\$217,213	\$374,079	\$552,925
Dermatological Disorders	\$917,802	1.1%	\$512,439	\$200,890	\$204,473	\$363,494	\$554,308
Diabetes	\$816,338	1.0%	\$533,853	\$119,448	\$163,036	\$394,879	\$421,459
Medical/Surgical Complications	\$737,885	0.9%	\$439,975	\$128,827	\$169,083	\$382,267	\$355,618
Abnormal Lab/Radiology	\$701,081	0.8%	\$541,093	\$117,592	\$42,395	\$250,687	\$450,395
Vascular Disorders	\$643,847	0.8%	\$542,911	\$85,861	\$15,076	\$265,446	\$378,401
Congenital/Chromosomal Anomalies	\$617,906	0.7%	\$188,512	\$50,506	\$378,888	\$277,554	\$340,352
Medication Related Conditions	\$438,262	0.5%	\$86,834	\$278,636	\$72,792	\$42,214	\$396,047
Hematological Disorders	\$435,753	0.5%	\$350,413	\$40,903	\$44,436	\$142,121	\$293,632
Cholesterol Disorders	\$228,261	0.3%	\$180,996	\$41,796	\$5,469	\$105,541	\$122,720
Dental Conditions	\$126,259	0.2%	\$89,029	\$12,080	\$25,151	\$24,758	\$101,501
Allergic Reaction	\$102,770	0.1%	\$39,003	\$11,397	\$52,371	\$21,829	\$80,941
External Hazard Exposure	\$29,652	0.0%	\$18,599	\$999	\$10,054	\$20,381	\$9,272
Social Determinants of Health	\$886	0.0%	\$270	\$139	\$477	\$133	\$752
Cause of Morbidity	\$882	0.0%	\$109	\$109	\$664	\$109	\$773
Total	\$83,671,713	100.0%	\$48,624,959	\$15,411,314	\$19,635,441	\$32,698,011	\$50,973,703

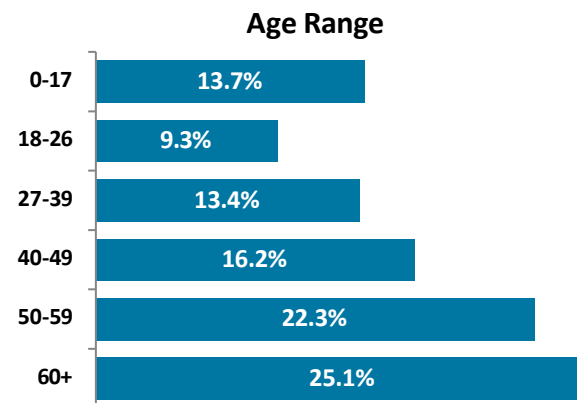
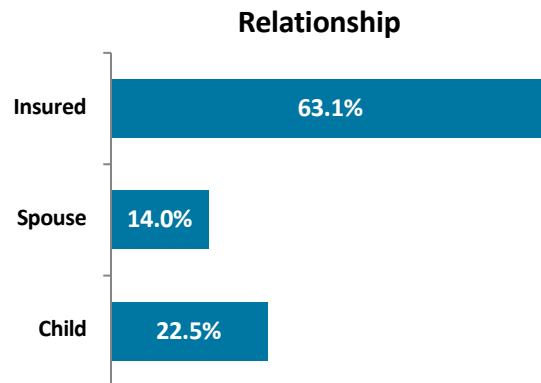
Mental Health Drilldown

Grouper	PY22		PY23		PY24	
	Patients	Total Paid	Patients	Total Paid	Patients	Total Paid
Depression	453	\$568,975	883	\$898,381	1,358	\$1,739,453
Mood and Anxiety Disorders	613	\$271,735	1,144	\$681,784	1,753	\$1,013,421
Mental Health Conditions, Other	431	\$351,519	805	\$558,645	1,271	\$933,549
Developmental Disorders	59	\$215,640	108	\$250,524	163	\$852,020
Alcohol Abuse/Dependence	20	\$75,926	77	\$344,280	104	\$417,809
Bipolar Disorder	107	\$247,201	189	\$253,234	282	\$266,830
Attention Deficit Disorder	199	\$80,894	414	\$132,119	692	\$236,319
Eating Disorders	24	\$147,776	44	\$141,298	62	\$250,458
Sexually Related Disorders	28	\$8,553	55	\$30,340	78	\$218,527
Schizophrenia	4	\$2,259	12	\$47,488	14	\$164,945
Substance Abuse/Dependence	29	\$68,285	51	\$34,292	64	\$53,163
Sleep Disorders	124	\$26,517	242	\$63,421	344	\$62,221
Psychoses	6	\$10,965	17	\$18,602	15	\$46,121
Complications of Substance Abuse	6	\$27,466	13	\$3,466	20	\$15,687
Personality Disorders	14	\$15,495	17	\$12,003	36	\$19,676
Tobacco Use Disorder	16	\$4,458	54	\$3,385	105	\$7,425
Total		\$2,123,665		\$3,473,262		\$6,297,625

Diagnosis Grouper – Gastrointestinal Orders

Diagnosis Sub-Grouper	Patients	Claims	Total Paid	% Paid
Abdominal Disorders	1,555	3,833	\$1,331,137	1.6%
GI Disorders, Other	870	2,041	\$1,046,475	1.3%
Gallbladder and Biliary Disease	169	779	\$1,041,635	1.2%
Hernias	172	475	\$853,191	1.0%
Upper GI Disorders	759	1,838	\$702,125	0.8%
GI Symptoms	1,105	2,214	\$664,318	0.8%
Inflammatory Bowel Disease	88	490	\$344,397	0.4%
Appendicitis	30	199	\$307,030	0.4%
Constipation	300	576	\$198,722	0.2%
Pancreatic Disorders	45	197	\$150,262	0.2%
Diverticulitis	133	283	\$137,877	0.2%
Hemorrhoids	196	367	\$127,549	0.2%
Liver Diseases	323	608	\$120,261	0.1%
Ostomies	22	148	\$97,896	0.1%
Hepatic Cirrhosis	22	77	\$89,525	0.1%
Peptic Ulcer/Related Disorders	26	43	\$78,111	0.1%
Esophageal Varices	4	19	\$29,271	0.0%
	----	----	\$7,319,784	8.7%

*Patient and claim counts are unique only within the category

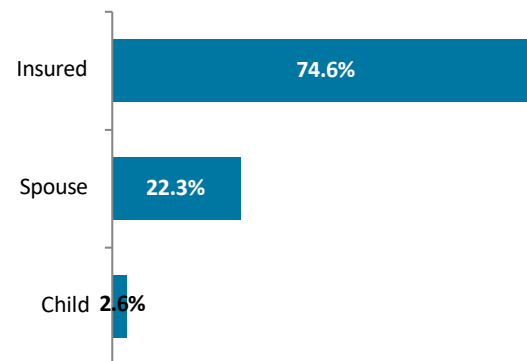


Diagnosis Grouper – Cancer

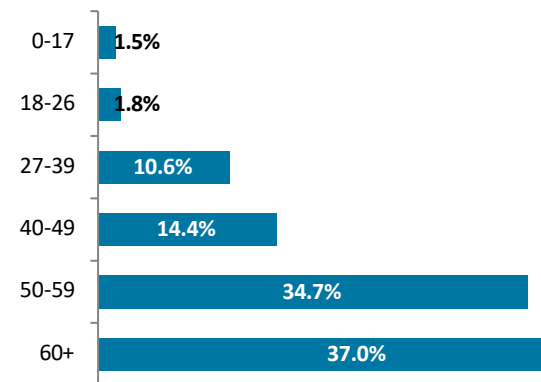
Diagnosis Sub-Grouper	Patients	Claims	Total Paid	% Paid
Cancer Therapies	41	234	\$2,405,495	2.9%
Breast Cancer	107	1,254	\$1,236,262	1.5%
Colon Cancer	16	480	\$644,274	0.8%
Cancers, Other	76	561	\$470,348	0.6%
Prostate Cancer	50	384	\$382,898	0.5%
Lymphomas	30	341	\$378,954	0.5%
Secondary Cancers	33	275	\$331,299	0.4%
Pancreatic Cancer	4	88	\$278,427	0.3%
Non-Melanoma Skin Cancers	135	363	\$191,005	0.2%
Carcinoma in Situ	49	188	\$107,885	0.1%
Myeloproliferative Neoplasms	26	275	\$103,976	0.1%
Kidney Cancer	12	52	\$97,823	0.1%
Thyroid Cancer	41	247	\$94,849	0.1%
Lung Cancer	8	205	\$86,512	0.1%
Melanoma	24	106	\$76,139	0.1%
Cervical/Uterine Cancer	15	101	\$74,701	0.1%
Brain Cancer	6	119	\$27,002	0.0%
Ovarian Cancer	5	21	\$8,678	0.0%
Myeloma	4	17	\$5,316	0.0%
Bladder Cancer	4	16	\$4,591	0.0%
Overall	----	----	\$7,006,433	8.4%

*Patient and claim counts are unique only within the category

Relationship



Age Range

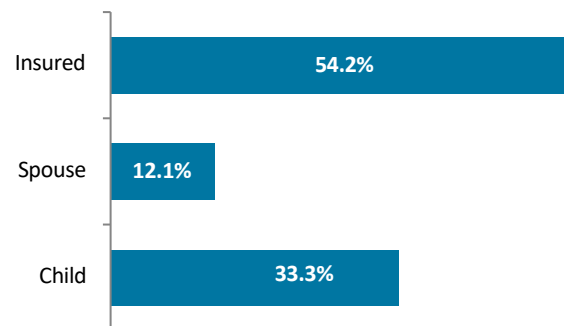


Diagnosis Grouper – Health Status/Encounters

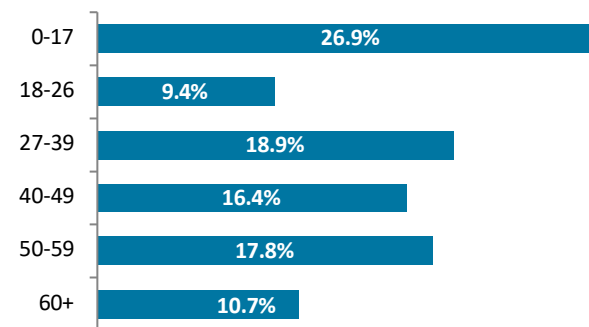
Diagnosis Category	Patients	Claims	Total Paid	% Paid
Screenings	5,708	11,831	\$2,019,915	2.4%
Exams	7,369	14,422	\$1,610,875	1.9%
Prophylactic Measures	3,578	4,884	\$1,073,093	1.3%
Encounters - Infants/Children	3,019	4,793	\$728,280	0.9%
Personal History of Condition	753	1,255	\$225,217	0.3%
Counseling	738	2,781	\$198,033	0.2%
Prosthetics/Devices/Implants	230	853	\$187,678	0.2%
Aftercare	311	533	\$153,426	0.2%
Family History of Condition	216	316	\$148,883	0.2%
Acquired Absence	57	105	\$44,523	0.1%
Encounter - Procedure	69	82	\$38,060	0.0%
Encounter - Transplant Related	22	187	\$37,319	0.0%
Follow-Up Encounters	3	17	\$25,795	0.0%
Health Status, Other	97	133	\$6,247	0.0%
Lifestyle/Situational Issues	74	115	\$5,713	0.0%
Miscellaneous Examinations	30	51	\$1,775	0.0%
Donors	4	4	\$224	0.0%
Blood Type	2	2	\$68	0.0%
Overall	----	----	\$6,505,057	7.8%

*Patient and claim counts are unique only within the category

Relationship



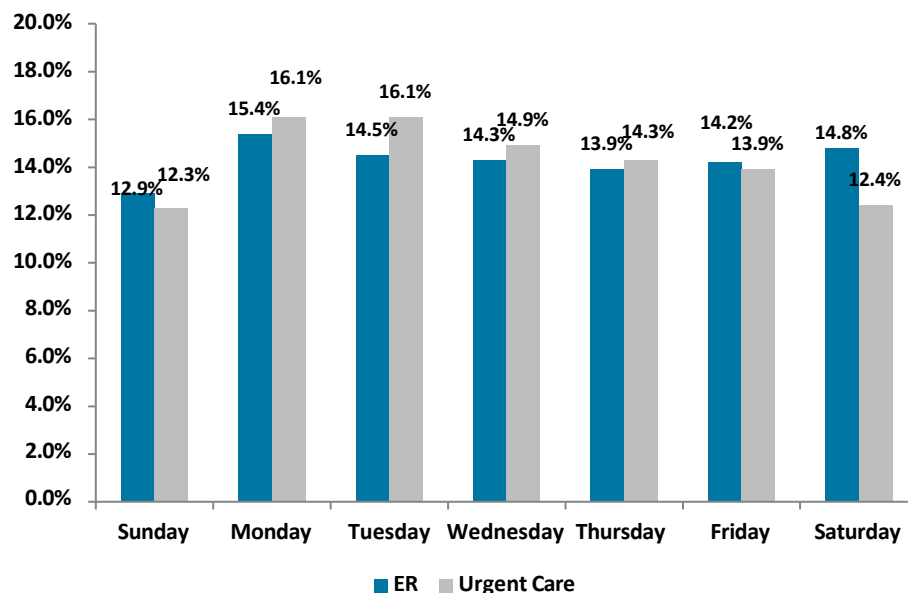
Age Range



Emergency Room / Urgent Care Summary

	PY23		PY24		Peer Index	
ER/Urgent Care	ER	Urgent Care	ER	Urgent Care	ER	Urgent Care
Number of Visits	2,129	5,111	3,192	7,164		
Visits Per Member	0.15	0.36	0.16	0.36	0.23	0.38
Visits/1000 Members	148	356	162	364	228	379
Avg Paid Per Visit	\$3,126	\$98	\$3,289	\$107	\$1,085	\$132
% with OV*	82.2%	76.7%	82.5%	80.1%		
% Avoidable	15.4%	43.2%	15.9%	40.2%		
Total Member Paid	\$1,416,716	\$374,175	\$2,141,898	\$547,817		
Total Plan Paid	\$6,655,359	\$501,260	\$10,499,937	\$767,959		

Visits by Day of Week



% of Paid



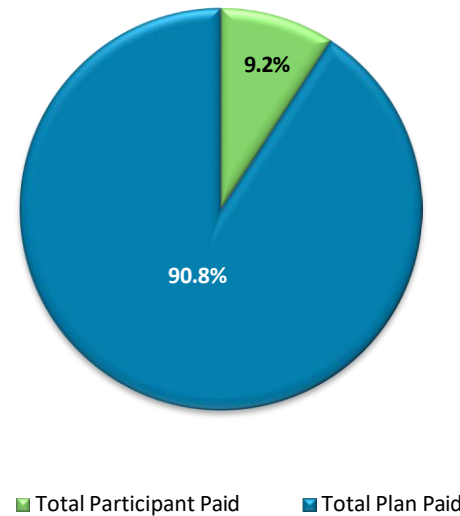
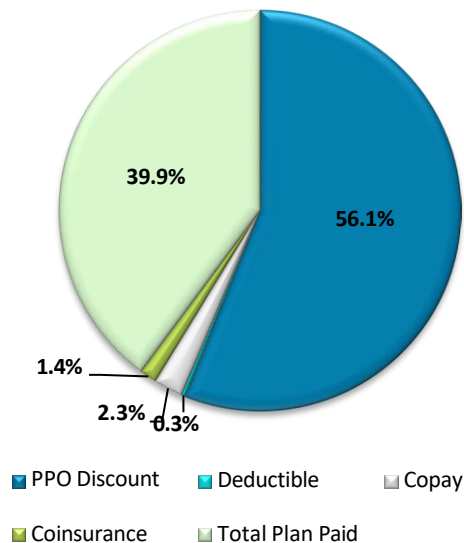
ER / UC Visits by Relationship						
Relationship	ER	Per 1,000	Urgent Care	Per 1,000	Total	Per 1,000
Insured	1,692	169	4,126	413	5,818	583
Spouse	433	178	786	323	1,219	501
Child	1,067	157	2,252	332	3,319	489
Total	3,192	166	7,164	364	10,356	539

Hospital and physician urgent care centers are included in the data.
Paid amount includes facility and professional fees.

Savings Summary – Medical Claims

Description	Dollars	PPPM	% of Eligible
Eligible Charges	\$284,665,206	\$7,681	100.0%
PPO Discount	\$185,537,052	\$5,006	65.2%
Deductible	\$583,636	\$16	0.2%
Copay	\$7,298,615	\$197	2.6%
Coinsurance	\$5,005,400	\$135	1.8%
Total Participant Paid	\$12,887,650	\$348	4.5%
Total Plan Paid	\$83,671,713	\$698	29.4%

Total Participant Paid - PY23	\$213
Total Plan Paid - PY23	\$634



Quality Metrics

Condition	Metric	#Members in Group	#Meeting Metric	#Not Meeting Metric	% Meeting Metric
Asthma	Asthma and a routine provider visit in the last 12 months	1,078	1,056	22	98.0%
	<2 asthma related ER Visits in the last 6 months	1,078	2	1,076	0.2%
	Asthma related admit in last 12 months	1,078	4	1,074	0.4%
Chronic Obstructive Pulmonary Disease	No exacerbations in last 12 months	100	7	93	7.0%
	Members with COPD who had an annual spirometry test	100	16	84	16.0%
Congestive Heart Failure	No re-admit to hosp with Heart Failure diag w/in 30 days of HF inpatient stay discharge	6	0	6	0.0%
	No ER Visit for Heart Failure in last 90 days	89	4	85	4.5%
	Follow-up OV within 4 weeks of discharge from HF admission	6	5	1	83.3%
Diabetes	Annual office visit	1,197	1,124	73	93.9%
	Annual dilated eye exam	1,197	433	764	36.2%
	Annual foot exam	1,197	607	590	50.7%
	Annual HbA1c test done	1,197	1,050	147	87.7%
	Diabetes Annual lipid profile	1,197	980	217	81.9%
	Annual microalbumin urine screen	1,197	855	342	71.4%
Hyperlipidemia	Hyperlipidemia Annual lipid profile	3,058	2,615	443	85.5%
Hypertension	Annual lipid profile	2,566	2,011	555	78.4%
	Annual serum creatinine test	2,282	1,967	315	86.2%
Wellness	Well Child Visit - 15 months	182	159	23	87.4%
	Routine office visit in last 6 months (All Ages)	20,344	13,817	6,527	67.9%
	Colorectal cancer screening ages 45-75 within the appropriate time period	6,451	3,118	3,333	48.3%
	Women age 25-65 with recommended cervical cancer/HPV screening	6,752	4,414	2,338	65.4%
	Males age greater than 49 with PSA test in last 24 months	2,082	1,094	988	52.5%
	Routine exam in last 24 months (All Ages)	20,344	17,229	3,115	84.7%
	Women age 40 to 75 with a screening mammogram last 24 months	4,726	2,967	1,759	62.8%

All member counts represent members active at the end of the report period.
Quality Metrics are always calculated on an incurred basis.

Chronic Conditions Prevalence

A member is identified as having a chronic condition if any one of the following three conditions is met within a 24 month service date period:

Two outpatient claims for the Dx on separate days of service

One ER Visit with the Dx as primary

One IP admission with the Dx as the admitting

Chronic Condition	# With Condition	% of Members	Members per 1,000	Admits per 1,000	ER Visits per 1,000	PMPY
Affective Psychosis	246	1.21%	12.81	183.47	500.83	\$15,594
Asthma	1,156	5.68%	60.19	110.95	397.23	\$14,157
Atrial Fibrillation	149	0.73%	7.76	247.10	509.65	\$30,141
Blood Disorders	1,223	6.01%	63.68	222.11	496.02	\$24,955
CAD	337	1.66%	17.55	284.79	488.72	\$30,541
COPD	97	0.48%	5.05	376.96	678.53	\$36,748
Cancer	595	2.92%	30.98	110.68	297.84	\$30,494
Chronic Pain	635	3.12%	33.06	116.43	496.77	\$19,714
Congestive Heart Failure	87	0.43%	4.53	649.72	543.65	\$67,124
Demyelinating Diseases	60	0.29%	3.12	94.64	473.19	\$53,907
Depression	2,103	10.33%	109.50	112.84	344.21	\$12,559
Diabetes	1,247	6.13%	64.93	97.98	325.37	\$19,427
ESRD	19	0.09%	0.99	1,466.67	600.00	\$94,127
Eating Disorders	133	0.65%	6.93	272.25	607.33	\$20,769
HIV/AIDS	26	0.13%	1.35	41.38	124.14	\$39,434
Hyperlipidemia	3,642	17.90%	189.64	58.87	226.83	\$12,028
Hypertension	2,587	12.71%	134.70	90.36	289.66	\$14,743
Immune Disorders	131	0.64%	6.82	232.92	633.54	\$47,136
Inflammatory Bowel Disease	99	0.49%	5.15	200.99	579.31	\$33,852
Liver Diseases	480	2.36%	24.99	184.34	473.65	\$21,200
Morbid Obesity	826	4.06%	43.01	113.41	334.49	\$15,920
Osteoarthritis	670	3.29%	34.89	84.98	308.06	\$19,080
Peripheral Vascular Disease	88	0.43%	4.58	280.79	458.13	\$30,126
Rheumatoid Arthritis	138	0.68%	7.19	140.01	345.92	\$37,103

*For Diabetes only, one or more Rx claims can also be used to identify the condition.

Data Includes Medical and Pharmacy
Based on 24 months incurred dates

Methodology

- Average member counts were weighted by the number of months each member had on the plan.
- Claims were pulled based upon the date paid.
- Claims were categorized based upon four groups:
 - Inpatient Facility
 - Outpatient Facility
 - Physician
 - Other (Other includes any medical reimbursements or durable medical equipment.)
- Inpatient analysis was done by identifying facility claims where a room and board charge was submitted and paid. Claims were then rolled up for the entire admission and categorized by the diagnosis code that held the highest paid amount. (Hospice and skilled nursing facility claims were excluded)
- Outpatient claims were flagged by an in-or-outpatient indicator being present on the claim that identified it as taking place at an outpatient facility.
- Physician claims were identified when the vendor type indicator was flagged as a professional charge.
 - These claims were in some cases segregated further to differentiate primary care physicians and specialists.
 - Office visits were identified by the presence of evaluation and management or consultation codes.
- Emergency room and urgent care episodes should be considered subcategories of physician and outpatient facility.
 - Emergency Room visits are identified by facility claims with a revenue code of 450-455, 457-459.
 - Urgent Care visits are identified by facility claims with a revenue code of 456 or physician claims with a place of service of “Urgent Care”.
 - Outpatient claims (including facility and physician) are then rolled up for the day of service and summarized as an ER/UC visit.
 - If a member has an emergency room visit on the same day as an urgent care visit, all claims are grouped into one episode and counted as an emergency room visit.
 - If a member was admitted into the hospital through the ER, the member will not show an ER visit. ER claims are bundled with the inpatient stay.

Appendix C

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UMR Inc. – EPO Utilization Review for PEBP
July 1, 2023 – June 30, 2024

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DATASCOPE™

Nevada Public Employees' Benefits Program

EPO Plan

July 2023 – June 2024 Incurred,

Paid through August 2024



Reimagine | Rediscover **Benefits**



Overview

- Total Medical Spend for PY24 was \$40,123,645 with an annualized plan cost per employee per year (PEPY) of \$12,992. This is an increase of 6.0% when compared to PY23.
 - IP Cost per Admit is \$38,944 which is 10.5% higher than PY23.
 - ER Cost per Visit is \$3,246 which is 5.1% higher than PY23.
- Employees shared in 9.2% of the medical cost.
- Inpatient facility costs were 27.1% of the plan spend.
- 64.4% of the Average Membership had paid Medical claims less than \$2,500, with 8.6% having no claims paid at all during the reporting period.
- 60 members exceeded the \$100k high-cost threshold during the reporting period, which accounted for 35.9% of the plan spend. The highest diagnosis category was Cancer, accounting for 17.5% of the high-cost claimant dollars.
- Total spending with in-network providers was 96.4%. The average In Network discount was 56.7%, which is 3.2% higher than the PY23 average discount of 54.9%.

Paid Claims by Age Group

Paid Claims by Age Group														
PY23							PY24						% Change	
Age Range	Med Net Pay	Med PMPM	Rx Net Pay	Rx PMPM	Net Pay	PMPM	Med Net Pay	Med PMPM	Rx Net Pay	Rx PMPM	Net Pay	PMPM	Net Pay	PMPM
<1	\$ 2,371,577	\$ 2,823	\$ 16,074	\$ 19	\$ 2,387,651	\$ 2,842	\$ 809,300	\$ 1,405	\$ 4,521	\$ 8	\$ 813,821	\$ 1,413	-65.9%	-50.3%
1	\$ 276,620	\$ 397	\$ 1,567	\$ 2	\$ 278,187	\$ 400	\$ 245,893	\$ 397	\$ 3,891	\$ 6	\$ 249,784	\$ 404	-10.2%	1.1%
2 - 4	\$ 709,797	\$ 291	\$ 15,497	\$ 6	\$ 725,294	\$ 298	\$ 430,299	\$ 203	\$ 10,814	\$ 5	\$ 441,113	\$ 208	-39.2%	-30.1%
5 - 9	\$ 372,847	\$ 89	\$ 68,943	\$ 16	\$ 441,790	\$ 105	\$ 474,618	\$ 123	\$ 51,360	\$ 13	\$ 525,978	\$ 136	19.1%	28.9%
10 - 14	\$ 1,002,695	\$ 178	\$ 154,711	\$ 27	\$ 1,157,406	\$ 206	\$ 1,645,584	\$ 326	\$ 144,219	\$ 29	\$ 1,789,803	\$ 355	54.6%	72.6%
15 - 19	\$ 1,773,288	\$ 264	\$ 646,020	\$ 96	\$ 2,419,308	\$ 361	\$ 1,661,409	\$ 288	\$ 695,685	\$ 120	\$ 2,357,094	\$ 408	-2.6%	13.1%
20 - 24	\$ 1,394,464	\$ 222	\$ 228,294	\$ 36	\$ 1,622,758	\$ 258	\$ 1,056,838	\$ 183	\$ 273,944	\$ 47	\$ 1,330,782	\$ 231	-18.0%	-10.5%
25 - 29	\$ 1,192,563	\$ 460	\$ 282,774	\$ 109	\$ 1,475,337	\$ 569	\$ 823,703	\$ 397	\$ 349,260	\$ 168	\$ 1,172,963	\$ 566	-20.5%	-0.6%
30 - 34	\$ 1,499,139	\$ 432	\$ 1,514,655	\$ 437	\$ 3,013,794	\$ 869	\$ 1,323,443	\$ 471	\$ 1,410,824	\$ 502	\$ 2,734,267	\$ 972	-9.3%	11.8%
35 - 39	\$ 3,337,786	\$ 692	\$ 841,512	\$ 174	\$ 4,179,298	\$ 866	\$ 2,468,606	\$ 579	\$ 652,567	\$ 153	\$ 3,121,174	\$ 733	-25.3%	-15.4%
40 - 44	\$ 2,992,652	\$ 580	\$ 1,539,679	\$ 298	\$ 4,532,331	\$ 878	\$ 1,953,885	\$ 412	\$ 1,634,374	\$ 345	\$ 3,588,259	\$ 757	-20.8%	-13.8%
45 - 49	\$ 2,464,377	\$ 431	\$ 1,465,368	\$ 256	\$ 3,929,745	\$ 687	\$ 5,244,744	\$ 1,018	\$ 2,144,514	\$ 416	\$ 7,389,258	\$ 1,435	88.0%	109.0%
50 - 54	\$ 5,159,525	\$ 662	\$ 2,069,596	\$ 266	\$ 7,229,121	\$ 928	\$ 4,013,100	\$ 599	\$ 1,730,567	\$ 258	\$ 5,743,667	\$ 858	-20.5%	-7.6%
55 - 59	\$ 5,756,991	\$ 751	\$ 2,528,164	\$ 330	\$ 8,285,155	\$ 1,080	\$ 5,557,019	\$ 795	\$ 3,025,787	\$ 433	\$ 8,582,806	\$ 1,228	3.6%	13.7%
60 - 64	\$ 8,456,113	\$ 961	\$ 3,714,588	\$ 422	\$ 12,170,701	\$ 1,384	\$ 8,625,026	\$ 1,078	\$ 4,005,552	\$ 501	\$ 12,630,578	\$ 1,579	3.8%	14.1%
65+	\$ 3,496,720	\$ 825	\$ 1,732,013	\$ 409	\$ 5,228,733	\$ 1,234	\$ 3,790,176	\$ 896	\$ 1,872,019	\$ 443	\$ 5,662,195	\$ 1,339	8.3%	8.5%
Total	\$ 42,257,152	\$ 548	\$ 16,819,453	\$ 218	\$ 59,076,605	\$ 766	\$ 40,123,645	\$ 584	\$ 18,009,898	\$ 262	\$ 58,133,543	\$ 846	-1.6%	10.5%

Financial Summary (p. 1 of 2)

	Total				State Active				Non-State Active			
Summary	PY22	PY23	PY24	Variance to Prior Year	PY22	PY23	PY24	Variance to Prior Year	PY22	PY23	PY24	Variance to Prior Year
Average Enrollment												
Employees	4,021	3,447	3,088	-10.4%	3,370	2,876	2,551	-11.3%	3	2	2	0.0%
Spouses	786	2,297	601	-73.9%	678	2,145	511	-76.2%	0	0	0	0.0%
Children	2,683	676	2,039	201.4%	2,531	580	1,898	227.1%	0	0	0	0.0%
Total Members	7,491	6,421	5,727	-10.8%	6,579	5,601	4,960	-11.4%	3	2	2	0.0%
Family Size	1.9	1.9	1.9	-0.5%	2.0	2.0	1.9	-0.5%	1.0	1.0	1.0	0.0%
Financial Summary												
Gross Cost	\$44,187,042	\$46,490,212	\$44,180,571	-5.0%	\$37,820,607	\$38,595,575	\$37,530,175	-2.8%	\$4,744	\$4,201	\$5,536	31.8%
Client Paid	\$39,320,787	\$42,257,152	\$40,123,645	-5.0%	\$33,797,612	\$35,128,252	\$34,185,883	-2.7%	\$3,622	\$3,335	\$4,101	23.0%
Employee Paid	\$4,866,255	\$4,233,060	\$4,056,926	-4.2%	\$4,022,996	\$3,467,323	\$3,344,293	-3.5%	\$1,122	\$866	\$1,434	65.6%
Client Paid-PEPY	\$9,779	\$12,259	\$12,992	6.0%	\$10,030	\$12,216	\$13,399	9.7%	\$1,278	\$1,667	\$2,051	23.0%
Client Paid-PMPY	\$5,249	\$6,581	\$7,006	6.5%	\$5,137	\$6,272	\$6,893	9.9%	\$1,278	\$1,667	\$2,051	23.0%
Client Paid-PEPM	\$815	\$1,022	\$1,083	6.0%	\$836	\$1,018	\$1,117	9.7%	\$107	\$139	\$171	23.0%
Client Paid-PMPM	\$437	\$548	\$584	6.6%	\$428	\$523	\$574	9.8%	\$107	\$139	\$171	23.0%
High Cost Claimants (HCC's) > \$100k												
# of HCC's	46	54	60	11.1%	40	43	49	14.0%	0	0	0	0.0%
HCC's / 1,000	6.1	8.4	10.5	24.6%	6.1	7.7	9.9	28.6%	0.0	0.0	0.0	0.0%
Avg HCC Paid	\$237,083	\$257,429	\$240,344	-6.6%	\$246,357	\$257,598	\$253,764	-1.5%	\$0	\$0	\$0	0.0%
HCC's % of Plan Paid	27.7%	32.9%	35.9%	9.1%	29.2%	31.5%	36.4%	15.6%	0.0%	0.0%	0.0%	0.0%
Cost Distribution by Claim Type (PMPY)												
Facility Inpatient	\$1,432	\$1,804	\$1,898	5.2%	\$1,437	\$1,735	\$2,006	15.6%	\$0	\$0	\$0	0.0%
Facility Outpatient	\$1,442	\$2,319	\$2,540	9.5%	\$1,382	\$2,176	\$2,453	12.7%	\$27	\$158	\$232	46.8%
Physician	\$2,259	\$2,458	\$2,567	4.4%	\$2,209	\$2,361	\$2,434	3.1%	\$1,142	\$1,510	\$1,819	20.5%
Other	\$116	\$0	\$0	0.0%	\$109	\$0	\$0	0.0%	\$109	\$0	\$0	0.0%
Total	\$5,249	\$6,581	\$7,006	6.5%	\$5,137	\$6,272	\$6,893	9.9%	\$1,278	\$1,667	\$2,051	23.0%

Financial Summary (p. 2 of 2)

	Total				State Retirees				Non-State Retirees				
Summary	PY22	PY23	PY24	Variance to Prior Year	PY22	PY23	PY24	Variance to Prior Year	PY22	PY23	PY24	Variance to Prior Year	Peer Index
Average Enrollment													
Employees	4,021	3,447	3,088	-10.4%	564	509	485	-4.6%	85	61	50	-18.5%	
Spouses	786	2,297	601	-73.9%	90	139	80	-42.4%	19	13	10	-25.0%	
Children	2,683	676	2,039	201.4%	142	83	129	56.0%	10	13	12	-13.7%	
Total Members	7,491	6,421	5,727	-10.8%	796	731	695	-4.9%	114	87	71	-18.8%	
Family Size	1.9	1.9	1.9	-0.5%	1.4	1.4	1.4	-0.7%	1.3	1.4	1.4	0.0%	1.6
Financial Summary													
Gross Cost	\$44,187,042	\$46,490,212	\$44,180,571	-5.0%	\$5,794,991	\$7,535,647	\$6,248,719	-17.1%	\$566,699	\$354,790	\$396,140	11.7%	
Client Paid	\$39,320,787	\$42,257,152	\$40,123,645	-5.0%	\$5,071,309	\$6,861,336	\$5,611,766	-18.2%	\$448,244	\$264,230	\$321,895	21.8%	
Employee Paid	\$4,866,255	\$4,233,060	\$4,056,926	-4.2%	\$723,682	\$674,311	\$636,953	-5.5%	\$118,455	\$90,560	\$74,245	-18.0%	
Client Paid-PEPY	\$9,779	\$12,259	\$12,992	6.0%	\$8,998	\$13,493	\$11,565	-14.3%	\$5,279	\$4,326	\$6,470	49.6%	\$6,258
Client Paid-PMPY	\$5,249	\$6,581	\$7,006	6.5%	\$6,373	\$9,392	\$8,078	-14.0%	\$3,946	\$3,023	\$4,534	50.0%	\$3,830
Client Paid-PEPM	\$815	\$1,022	\$1,083	6.0%	\$750	\$1,124	\$964	-14.2%	\$440	\$360	\$539	49.7%	\$521
Client Paid-PMPM	\$437	\$548	\$584	6.6%	\$531	\$783	\$673	-14.0%	\$329	\$252	\$378	50.0%	\$319
High Cost Claimants (HCC's) > \$100k													
# of HCC's	46	54	60	11.1%	8	12	12	0.0%	0	0	1	0.0%	
HCC's / 1,000	6.1	8.4	10.5	24.6%	10.1	16.4	17.3	5.1%	0.0	0.0	14.1	0.0%	
Avg HCC Paid	\$237,083	\$257,429	\$240,344	-6.6%	\$131,446	\$235,373	\$154,460	-34.4%	\$0	\$0	\$132,680	0.0%	
HCC's % of Plan Paid	27.7%	32.9%	35.9%	9.1%	20.7%	41.2%	33.0%	-19.9%	0.0%	0.0%	41.2%	0.0%	
Cost Distribution by Claim Type (PMPY)													
Facility Inpatient	\$1,432	\$1,804	\$1,898	5.2%	\$1,443	\$2,534	\$1,236	-51.2%	\$1,101	\$183	\$946	416.9%	\$1,044
Facility Outpatient	\$1,442	\$2,319	\$2,540	9.5%	\$2,015	\$3,585	\$3,353	-6.5%	\$940	\$1,007	\$725	-28.0%	\$1,310
Physician	\$2,259	\$2,458	\$2,567	4.4%	\$2,742	\$3,273	\$3,490	6.6%	\$1,800	\$1,832	\$2,863	56.3%	\$1,404
Other	\$116	\$0	\$0	0.0%	\$174	\$0	\$0	0.0%	\$106	\$0	\$0	0.0%	\$72
Total	\$5,249	\$6,581	\$7,006	6.5%	\$6,373	\$9,392	\$8,078	-14.0%	\$3,946	\$3,023	\$4,534	50.0%	\$3,830

Paid Claims by Claim Type – State Participants

Net Paid Claims - Total										
State Participants										
	PY23				PY24				% Change	
	Actives	Pre-Medicare Retirees	Medicare Retirees	Total	Actives	Pre-Medicare Retirees	Medicare Retirees	Total	Total	
Medical										
Inpatient	\$ 11,494,351	\$ 1,267,256	\$ 801,113	\$ 13,562,720	\$ 11,225,240	\$ 670,423	\$ 265,574	\$ 12,161,237	-10.3%	
Outpatient	\$ 23,633,901	\$ 4,467,417	\$ 325,550	\$ 28,426,868	\$ 22,960,643	\$ 4,236,086	\$ 439,683	\$ 27,636,412	-2.8%	
Total - Medical	\$ 35,128,252	\$ 5,734,673	\$ 1,126,663	\$ 41,989,588	\$ 34,185,883	\$ 4,906,509	\$ 705,257	\$ 39,797,649	-5.2%	

Net Paid Claims - Per Participant per Month										
	PY23				PY24				% Change	
	Actives	Pre-Medicare Retirees	Medicare Retirees	Total	Actives	Pre-Medicare Retirees	Medicare Retirees	Total	Total	
Medical	\$ 1,018	\$ 1,085	\$ 1,382	\$ 1,034	\$ 1,117	\$ 986	\$ 831	\$ 1,092	5.6%	

Paid Claims by Claim Type – Non-State Participants

Net Paid Claims - Total										
Non-State Participants										
	PY23					PY24				
	Actives	Pre-Medicare Retirees	Medicare Retirees	Total		Actives	Pre-Medicare Retirees	Medicare Retirees	Total	
										% Change
Medical										
Inpatient	\$ -	\$ 14,081	\$ 4,746	\$ 18,827		\$ 75,134	\$ 75,134			299.1%
Outpatient	\$ 3,335	\$ 78,421	\$ 166,982	\$ 248,738		\$ 229,406	\$ 250,862			0.9%
Total - Medical	\$ 3,335	\$ 92,502	\$ 171,728	\$ 267,565		\$ 4,101	\$ 17,355	\$ 304,540	\$ 325,996	21.8%

Net Paid Claims - Per Participant per Month										
	PY23					PY24				
	Actives	Pre-Medicare Retirees	Medicare Retirees	Total		Actives	Pre-Medicare Retirees	Medicare Retirees	Total	
										% Change
Medical	\$ 139	\$ 554	\$ 303	\$ 353		\$ 171	\$ 223	\$ 587	\$ 525	48.5%

Paid Claims by Claim Type – Total

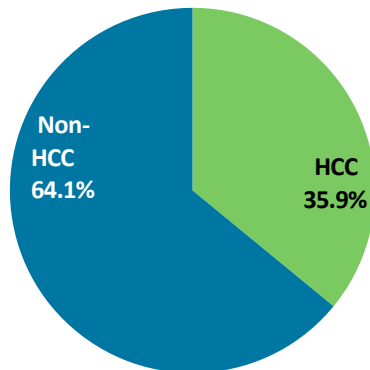
Net Paid Claims - Total										
Total Participants										
	PY23				PY24				% Change	
	Actives	Pre-Medicare Retirees	Medicare Retirees	Total	Actives	Pre-Medicare Retirees	Medicare Retirees	Total	Total	
Medical										
Inpatient	\$ 11,494,351	\$ 1,281,337	\$ 805,859	\$ 13,581,547	\$ 11,225,240	\$ 670,423	\$ 340,707	\$ 12,236,371	-9.9%	
Outpatient	\$ 23,637,236	\$ 4,545,838	\$ 492,532	\$ 28,675,605	\$ 22,964,744	\$ 4,253,441	\$ 669,089	\$ 27,887,274	-2.7%	
Total - Medical	\$ 35,131,586	\$ 5,827,175	\$ 1,298,391	\$ 42,257,152	\$ 34,189,984	\$ 4,923,864	\$ 1,009,797	\$ 40,123,645	-5.0%	

Net Paid Claims - Per Participant per Month										
	PY23				PY24				% Change	
	Actives	Pre-Medicare Retirees	Medicare Retirees	Total	Actives	Pre-Medicare Retirees	Medicare Retirees	Total	Total	
Medical	\$ 1,017	\$ 1,068	\$ 940	\$ 1,022	\$ 1,116	\$ 975	\$ 738	\$ 1,083	6.0%	

Cost Distribution – Medical Claims

PY23							PY24					
Avg # of Members	% of Members	Total Paid	% of Paid	EE Paid	% EE Paid	Paid Claims Category	Avg # of Members	% of Members	Total Paid	% of Paid	EE Paid	% EE Paid
50	0.8%	\$13,901,178	32.9%	\$215,964	5.1%	\$100,000.01 Plus	53	0.9%	\$14,420,643	35.9%	\$242,182	6.0%
67	1.0%	\$4,962,218	11.7%	\$231,401	5.5%	\$50,000.01-\$100,000.00	59	1.0%	\$4,239,158	10.6%	\$227,027	5.6%
199	3.1%	\$6,991,359	16.5%	\$548,257	13.0%	\$25,000.01-\$50,000.00	144	2.5%	\$5,267,173	13.1%	\$398,010	9.8%
386	6.0%	\$6,197,687	14.7%	\$770,272	18.2%	\$10,000.01-\$25,000.00	386	6.7%	\$6,205,352	15.5%	\$829,173	20.4%
536	8.4%	\$3,908,538	9.2%	\$774,562	18.3%	\$5,000.01-\$10,000.00	561	9.8%	\$4,087,086	10.2%	\$834,889	20.6%
774	12.0%	\$2,905,516	6.9%	\$707,442	16.7%	\$2,500.01-\$5,000.00	831	14.5%	\$3,067,378	7.6%	\$723,694	17.8%
3,713	57.8%	\$3,390,658	8.0%	\$984,390	23.3%	\$0.01-\$2,500.00	3,162	55.2%	\$2,836,855	7.1%	\$801,301	19.8%
60	0.9%	\$0	0.0%	\$772	0.0%	\$0.00	37	0.6%	\$0	0.0%	\$651	0.0%
636	9.9%	\$0	0.0%	\$0	0.0%	No Claims	494	8.6%	\$0	0.0%	\$0	0.0%
6,421	100.0%	\$42,257,152	100.0%	\$4,233,060	100.0%		5,727	100.0%	\$40,123,645	100.0%	\$4,056,926	100.0%

Distribution of HCC Medical Claims Paid



HCC – High-Cost Claimant over \$100K

HCC's by Diagnosis Grouper			
Top 10 Diagnosis Groupers	Patients	Total Paid	% Paid
Cancer	21	\$3,227,056	5.1%
Cardiac Disorders	45	\$2,149,774	3.4%
Neurological Disorders	33	\$1,212,130	1.9%
Gastrointestinal Disorders	33	\$1,166,917	1.8%
Infections	24	\$1,121,572	1.8%
Medical/Surgical Complications	13	\$1,022,444	1.6%
Hematological Disorders	22	\$823,989	1.3%
Non-malignant Neoplasm	16	\$754,124	1.2%
Renal/Urologic Disorders	24	\$461,187	0.7%
Pregnancy-related Disorders	3	\$437,329	0.7%
All Other		\$2,044,122	14.2%
Overall	----	\$14,420,643	33.7%

Utilization Summary (p. 1 of 2)

Inpatient data reflects facility charges and professional services.
DX&L = Diagnostics, X-Ray and Laboratory

	Total				State Active				Non-State Active			
Summary	PY22	PY23	PY24	Variance to Prior Year	PY22	PY23	PY24	Variance to Prior Year	PY22	PY23	PY24	Variance to Prior Year
Inpatient Summary												
# of Admits	397	381	332		344	318	280		0	0	0	
# of Bed Days	2,419	1,912	2,080		2,081	1,540	1,782		0	0	0	
Paid Per Admit	\$34,699	\$35,238	\$38,944	10.5%	\$35,114	\$35,521	\$41,624	17.2%	\$0	\$0	\$0	0.0%
Paid Per Day	\$5,695	\$7,022	\$6,216	-11.5%	\$5,805	\$7,335	\$6,540	-10.8%	\$0	\$0	\$0	0.0%
Admits Per 1,000	53	59	58	-1.7%	52	57	56	-1.8%	0	0	0	0.0%
Days Per 1,000	323	298	363	21.8%	316	275	359	30.5%	0	0	0	0.0%
Avg LOS	6.1	5.0	6.3	26.0%	6.0	4.8	6.4	33.3%	0.0	0.0	0.0	0.0%
# Admits From the ER	205	176	181	2.8%	167	141	147	4.3%	0	0	0	0.0%
Physician Office												
OV Utilization per Member	5.7	5.6	6.4	14.3%	5.5	5.5	6.2	12.7%	5.3	5.0	5.5	10.0%
Avg Paid per OV	\$151	\$162	\$156	-3.7%	\$152	\$165	\$151	-8.5%	\$169	\$129	\$159	23.3%
Avg OV Paid per Member	\$860	\$915	\$1,001	9.4%	\$840	\$902	\$946	4.9%	\$894	\$645	\$876	35.8%
DX&L Utilization per Member	9.6	11.7	12.2	4.3%	9.2	11.1	11.5	3.6%	5.6	22	16	-27.3%
Avg Paid per DX&L	\$59	\$70	\$81	15.7%	\$60	\$71	\$81	14.1%	\$29	\$17	\$29	70.6%
Avg DX&L Paid per Member	\$569	\$819	\$986	20.4%	\$551	\$787	\$935	18.8%	\$165	\$385	\$467	21.3%
Emergency Room												
# of Visits	1,327	1,196	1,150		1,139	1,009	1,001		0	0	1	
Visits Per Member	0.18	0.19	0.20	5.3%	0.17	0.18	0.20	11.1%	0.00	0.00	0.50	0.0%
Visits Per 1,000	177	186	203	9.1%	173	180	202	12.2%	0	0	500	0.0%
Avg Paid per Visit	\$2,003	\$3,089	\$3,246	5.1%	\$1,972	\$3,169	\$3,292	3.9%	\$0	\$0	\$369	0.0%
Urgent Care												
# of Visits	3,025	2,649	2,563		2,733	2,395	2,303		0	0	0	
Visits Per Member	0.40	0.41	0.45	9.8%	0.42	0.43	0.46	7.0%	0.00	0.00	0.00	0.0%
Visits Per 1,000	404	413	447	8.2%	415	428	464	8.4%	0	0	0	0.0%
Avg Paid per Visit	\$153	\$129	\$135	4.7%	\$155	\$130	\$137	5.4%	\$0	\$0	\$0	0.0%

Utilization Summary (p. 2 of 2)

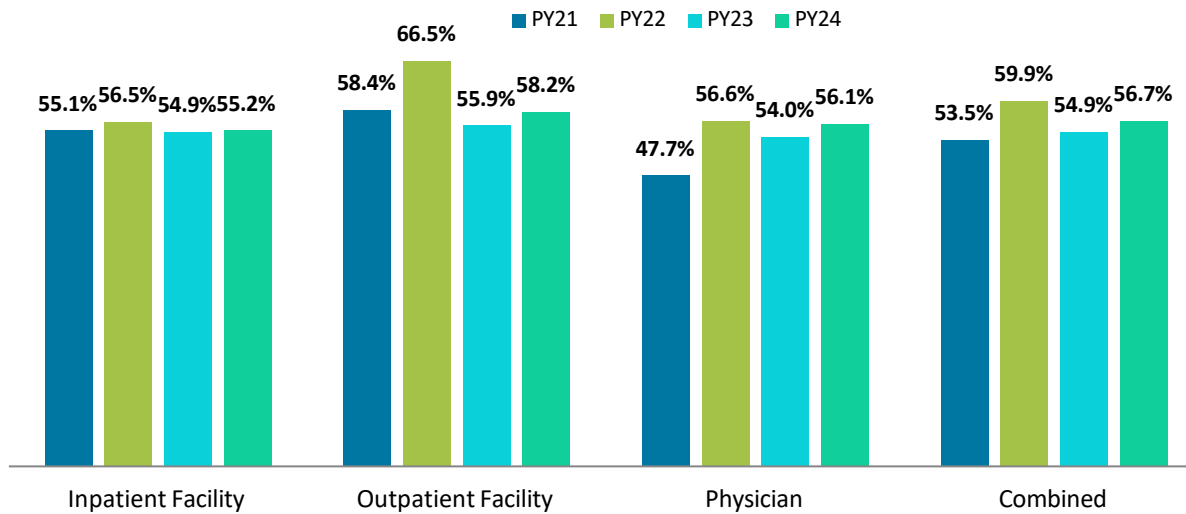
Inpatient data reflects facility charges and professional services.

DX&L = Diagnostics, X-Ray and Laboratory

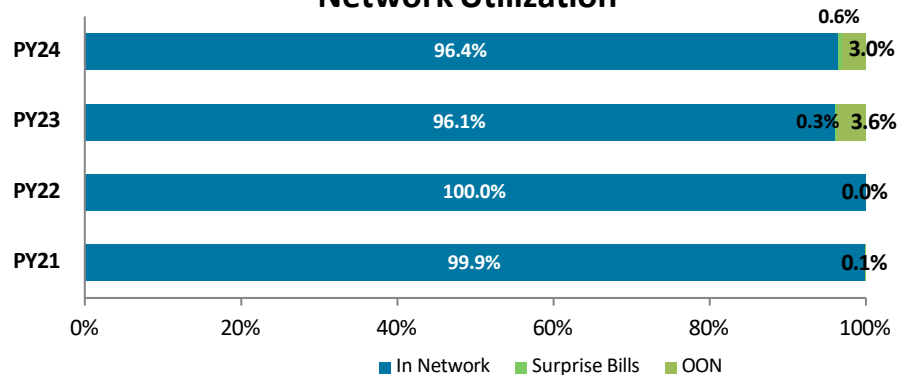
	State Retirees				Non-State Retirees				
Summary	PY22	PY23	PY24	Variance to Prior Year	PY22	PY23	PY24	Variance to Prior Year	Peer Index
Inpatient Summary									
# of Admits	45	60	45		8	3	7		
# of Bed Days	273	364	281		65	8	17		
Paid Per Admit	\$34,743	\$35,179	\$24,236	-31.1%	\$16,574	\$6,422	\$26,278	309.2%	\$19,305
Paid Per Day	\$5,727	\$5,799	\$3,881	-33.1%	\$2,040	\$2,408	\$10,820	349.3%	\$3,615
Admits Per 1,000	57	82	65	-20.7%	70	34	99	191.2%	64
Days Per 1,000	343	498	405	-18.7%	572	92	239	159.8%	342
Avg LOS	6.1	6.1	6.2	1.6%	8.1	2.7	2.4	-11.1%	5.3
# Admits From the ER	32	33	29	-12.1%	6	2	5	150.0%	
Physician Office									
OV Utilization per Member	7.1	6.8	7.7	13.2%	6.8	6.5	6.2	-4.6%	5.2
Avg Paid per OV	\$147	\$157	\$190	21.0%	\$112	\$77	\$66	-14.3%	\$97
Avg OV Paid per Member	\$1,036	\$1,069	\$1,455	36.1%	\$763	\$502	\$405	-19.3%	\$502
DX&L Utilization per Member	13.4	16.2	16.9	4.3%	9.2	12.8	10.5	-18.0%	9.0
Avg Paid per DX&L	\$55	\$69	\$83	20.3%	\$48	\$35	\$39	11.4%	\$46
Avg DX&L Paid per Member	\$738	\$1,114	\$1,408	26.4%	\$441	\$449	\$411	-8.5%	\$412
Emergency Room									
# of Visits	168	162	141		20	25	7		
Visits Per Member	0.21	0.22	0.20	-9.1%	0.18	0.29	0.10	-65.5%	0.23
Visits Per 1,000	211	222	203	-8.6%	176	286	99	-65.4%	228
Avg Paid per Visit	\$2,357	\$2,890	\$3,090	6.9%	\$775	\$1,155	\$269	-76.7%	\$1,035
Urgent Care									
# of Visits	258	227	235		34	27	25		
Visits Per Member	0.32	0.31	0.34	9.7%	0.30	0.31	0.35	12.9%	0.38
Visits Per 1,000	324	311	338	8.7%	299	309	352	13.9%	379
Avg Paid per Visit	\$147	\$124	\$123	-0.8%	\$64	\$59	\$53	-10.2%	\$132

Provider Network Summary

In Network Discounts



Network Utilization



Diagnosis Grouper Summary

Diagnosis Grouper	Total Paid	% Paid	Insured	Spouse	Child	Male	Female
Cancer	\$4,118,121	10.3%	\$2,608,941	\$966,188	\$542,993	\$1,963,219	\$2,154,902
Cardiac Disorders	\$3,335,077	8.3%	\$2,172,278	\$1,093,994	\$68,805	\$1,668,285	\$1,666,792
Gastrointestinal Disorders	\$3,253,155	8.1%	\$2,245,704	\$652,992	\$354,460	\$1,129,179	\$2,123,976
Neurological Disorders	\$2,579,799	6.4%	\$1,959,191	\$370,391	\$250,216	\$507,683	\$2,072,116
Health Status/Encounters	\$2,452,681	6.1%	\$1,438,319	\$312,731	\$701,631	\$888,173	\$1,564,508
Musculoskeletal Disorders	\$2,390,218	6.0%	\$1,769,400	\$436,501	\$184,316	\$982,842	\$1,407,376
Mental Health	\$2,284,472	5.7%	\$925,525	\$347,887	\$1,011,060	\$649,203	\$1,635,269
Trauma/Accidents	\$1,993,943	5.0%	\$1,297,805	\$206,369	\$489,769	\$947,985	\$1,045,959
Infections	\$1,722,497	4.3%	\$1,286,352	\$320,557	\$115,588	\$819,382	\$903,114
Pregnancy-related Disorders	\$1,616,970	4.0%	\$786,039	\$129,844	\$701,088	\$386,832	\$1,230,138
Eye/ENT Disorders	\$1,601,593	4.0%	\$1,007,225	\$157,964	\$436,404	\$716,197	\$885,396
Pulmonary Disorders	\$1,554,425	3.9%	\$1,042,580	\$229,976	\$281,869	\$537,511	\$1,016,913
Spine-related Disorders	\$1,426,733	3.6%	\$1,222,166	\$168,680	\$35,886	\$565,665	\$861,068
Renal/Urologic Disorders	\$1,366,755	3.4%	\$1,121,363	\$57,396	\$187,997	\$638,649	\$728,106
Medical/Surgical Complications	\$1,269,835	3.2%	\$1,240,204	\$10,830	\$18,802	\$185,987	\$1,083,849
Non-malignant Neoplasm	\$1,253,452	3.1%	\$733,657	\$75,090	\$444,705	\$357,379	\$896,073
Endocrine/Metabolic Disorders	\$1,228,413	3.1%	\$1,077,913	\$120,449	\$30,051	\$477,211	\$751,202
Hematological Disorders	\$1,000,585	2.5%	\$840,670	\$19,216	\$140,698	\$841,118	\$159,467
Gynecological/Breast Disorders	\$943,082	2.4%	\$706,362	\$137,016	\$99,705	\$14,562	\$928,520
Diabetes	\$699,567	1.7%	\$407,726	\$190,658	\$101,184	\$483,345	\$216,223
Dermatological Disorders	\$465,569	1.2%	\$325,426	\$54,809	\$85,335	\$226,190	\$239,379
Vascular Disorders	\$412,535	1.0%	\$306,319	\$98,506	\$7,711	\$218,474	\$194,061
Miscellaneous	\$337,839	0.8%	\$176,418	\$67,748	\$93,673	\$132,625	\$205,214
Abnormal Lab/Radiology	\$329,916	0.8%	\$248,552	\$72,644	\$8,721	\$135,514	\$194,402
Congenital/Chromosomal Anomalies	\$233,934	0.6%	\$46,385	\$1,334	\$186,215	\$162,462	\$71,472
Cholesterol Disorders	\$117,874	0.3%	\$104,170	\$11,418	\$2,285	\$53,754	\$64,120
Medication Related Conditions	\$71,123	0.2%	\$36,216	\$4,732	\$30,176	\$34,092	\$37,031
Allergic Reaction	\$29,404	0.1%	\$10,134	\$647	\$18,624	\$17,056	\$12,349
Dental Conditions	\$18,285	0.0%	\$9,063	\$299	\$8,924	\$8,807	\$9,478
External Hazard Exposure	\$11,079	0.0%	\$6,622	\$997	\$3,460	\$8,107	\$2,971
Social Determinants of Health	\$4,713	0.0%	\$73	\$0	\$4,640	\$0	\$4,713
Total	\$40,123,645	0.0%	\$27,158,795	\$6,317,862	\$6,646,987	\$15,757,490	\$24,366,154

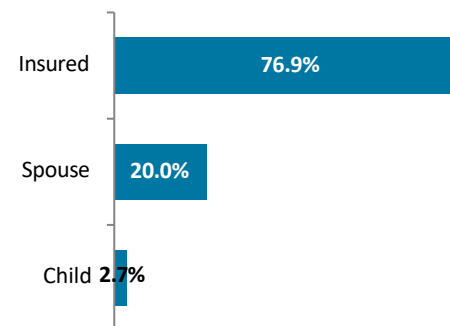
Mental Health Drilldown

Grouper	PY21		PY22		PY23		3Q24	
	Patients	Total Paid	Patients	Total Paid	Patients	Total Paid	Patients	Total Paid
Depression	625	\$833,183	505	\$720,907	454	\$529,695	440	\$549,750
Mood and Anxiety Disorders	711	\$655,375	636	\$361,898	591	\$339,214	550	\$443,958
Mental Health Conditions, Other	609	\$876,606	458	\$367,897	394	\$287,517	380	\$420,632
Alcohol Abuse/Dependence	43	\$163,692	37	\$110,736	30	\$167,010	40	\$242,494
Developmental Disorders	65	\$155,300	58	\$89,043	47	\$93,123	51	\$182,621
Bipolar Disorder	127	\$261,349	107	\$171,696	109	\$84,620	90	\$106,484
Attention Deficit Disorder	180	\$98,736	179	\$76,754	202	\$61,595	208	\$83,367
Complications of Substance Abuse	14	\$63,661	8	\$12,407	7	\$9,434	8	\$43,933
Substance Abuse/Dependence	57	\$45,039	39	\$14,853	35	\$72,695	21	\$39,956
Psychoses	7	\$55,219	6	\$9,762	9	\$6,025	10	\$26,854
Sexually Related Disorders	27	\$81,154	27	\$85,457	26	\$8,339	22	\$44,125
Sleep Disorders	187	\$38,478	148	\$43,716	141	\$25,583	135	\$26,914
Eating Disorders	24	\$370,761	23	\$51,995	19	\$32,076	18	\$59,888
Schizophrenia	9	\$10,631	6	\$2,286	9	\$13,689	7	\$6,957
Tobacco Use Disorder	38	\$4,775	36	\$4,114	42	\$3,344	40	\$4,572
Personality Disorders	14	\$20,064	17	\$47,043	15	\$7,832	7	\$1,966
Total		\$3,734,023		\$2,170,566		\$1,741,788		\$2,284,472

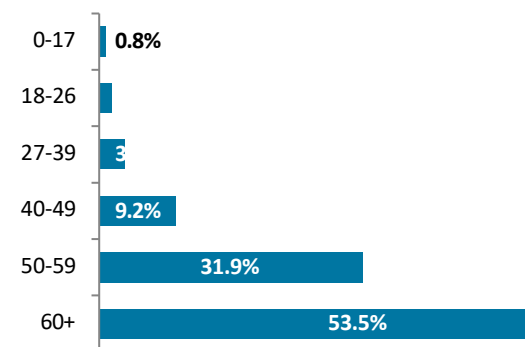
Diagnosis Grouper – Cancer

Diagnosis Sub-Grouper	Patients	Claims	Total Paid	% Paid
Cancer Therapies	19	142	\$1,705,625	4.3%
Cancers, Other	35	229	\$422,013	1.1%
Breast Cancer	46	562	\$304,064	0.8%
Kidney Cancer	7	60	\$287,520	0.7%
Lung Cancer	4	138	\$225,484	0.6%
Pancreatic Cancer	4	141	\$164,959	0.4%
Colon Cancer	9	93	\$161,799	0.4%
Prostate Cancer	23	279	\$138,207	0.3%
Secondary Cancers	15	80	\$135,435	0.3%
Lymphomas	14	177	\$125,557	0.3%
Brain Cancer	3	54	\$115,645	0.3%
Melanoma	14	154	\$77,019	0.2%
Myeloproliferative Neoplasms	10	140	\$58,722	0.1%
Carcinoma in Situ	28	148	\$55,082	0.1%
Non-Melanoma Skin Cancers	63	170	\$54,382	0.1%
Cervical/Uterine Cancer	7	23	\$53,255	0.1%
Ovarian Cancer	5	39	\$29,124	0.1%
Thyroid Cancer	13	34	\$4,079	0.0%
Myeloma	1	1	\$152	0.0%
Overall	----	----	\$4,118,121	10.2%

Relationship



Age Range

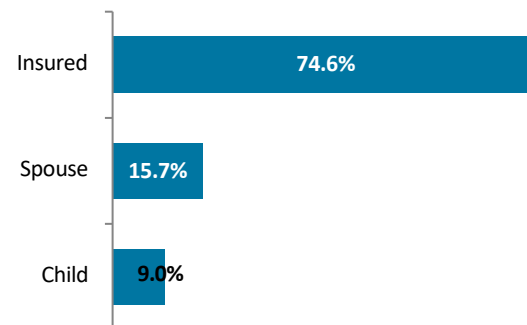


Diagnosis Grouper – Cardiac Disorders

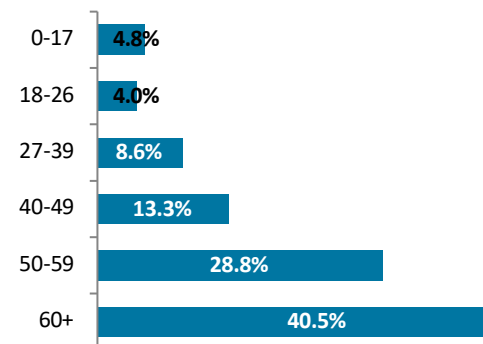
Diagnosis Sub-Grouper	Patients	Claims	Total Paid	% Paid
Atrial Fibrillation	56	417	\$906,562	2.3%
Myocardial Infarction	13	90	\$560,653	1.4%
Congestive Heart Failure	45	288	\$409,251	1.0%
Heart Valve Disorders	70	170	\$381,978	1.0%
Chest Pain	253	651	\$339,964	0.8%
Hypertension	614	1,376	\$210,635	0.5%
Coronary Artery Disease	100	235	\$158,743	0.4%
Cardiac Arrhythmias	197	428	\$132,501	0.3%
Cardiac Conditions, Other	175	376	\$112,166	0.3%
Pulmonary Embolism	14	64	\$47,959	0.1%
Shock	7	15	\$29,540	0.1%
Cardiomyopathy	16	50	\$23,856	0.1%
Cardio-Respiratory Arrest	25	69	\$19,404	0.0%
Overall	----	----	\$3,335,077	8.3%

*Patient and claim counts are unique only within the category

Relationship



Age Range

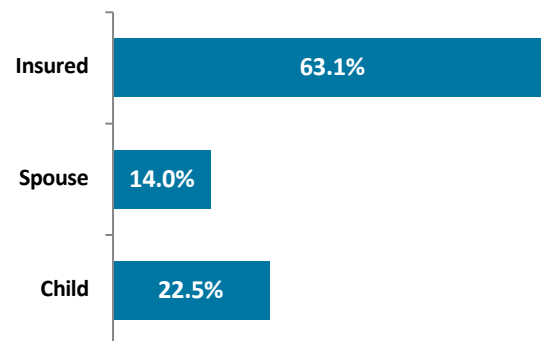


Diagnosis Grouper – Gastrointestinal Disorders

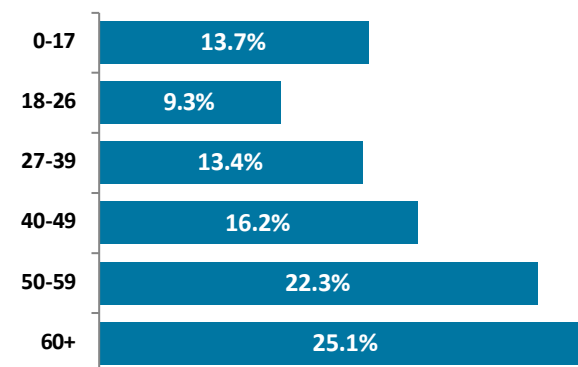
Diagnosis Sub-Grouper	Patients	Claims	Total Paid	% Paid
Upper GI Disorders	254	587	\$690,553	1.7%
Abdominal Disorders	467	1,209	\$586,980	1.5%
GI Disorders, Other	273	758	\$451,237	1.1%
Inflammatory Bowel Disease	51	158	\$226,922	0.6%
Gallbladder and Biliary Disease	49	162	\$198,890	0.5%
Hernias	61	161	\$194,407	0.5%
GI Symptoms	326	640	\$192,012	0.5%
Diverticulitis	59	155	\$178,358	0.4%
Appendicitis	11	65	\$145,865	0.4%
Liver Diseases	115	256	\$128,940	0.3%
Hepatic Cirrhosis	13	26	\$68,247	0.2%
Pancreatic Disorders	10	40	\$63,054	0.2%
Constipation	86	150	\$48,880	0.1%
Ostomies	9	52	\$29,507	0.1%
Peptic Ulcer/Related Disorders	9	18	\$28,722	0.1%
Hemorrhoids	35	70	\$20,581	0.1%
----	----	----	\$3,253,155	8.3%

*Patient and claim counts are unique only within the category

Relationship



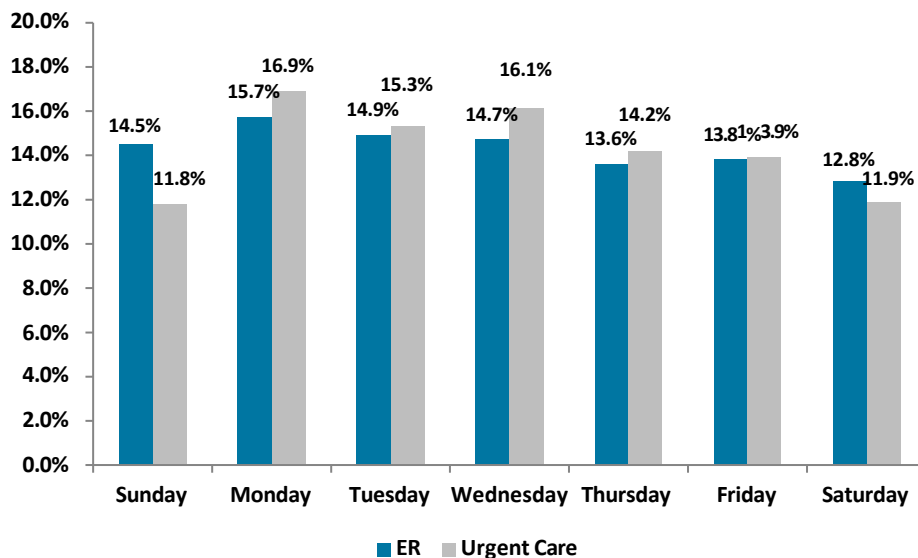
Age Range



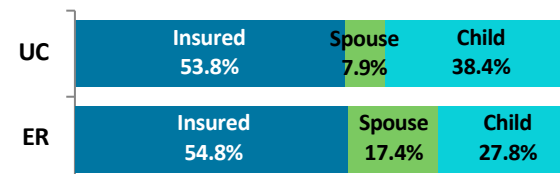
Emergency Room / Urgent Care Summary

	PY23		PY24		Peer Index	
ER/Urgent Care	ER	Urgent Care	ER	Urgent Care	ER	Urgent Care
Number of Visits	1,196	2,649	1,150	2,563		
Visits Per Member	0.19	0.41	0.20	0.45	0.23	0.38
Visits/1000 Members	186	413	203	452	228	379
Avg Paid Per Visit	\$3,089	\$129	\$3,246	\$135	\$1,085	\$132
% with OV*	90.1%	88.4%	89.6%	88.4%		
% Avoidable	14.4%	42.2%	13.4%	41.1%		
Total Member Paid	\$666,263	\$125,900	\$630,542	\$124,796		
Total Plan Paid	\$3,694,614	\$341,493	\$3,733,282	\$346,751		

Visits by Day of Week



% of Paid



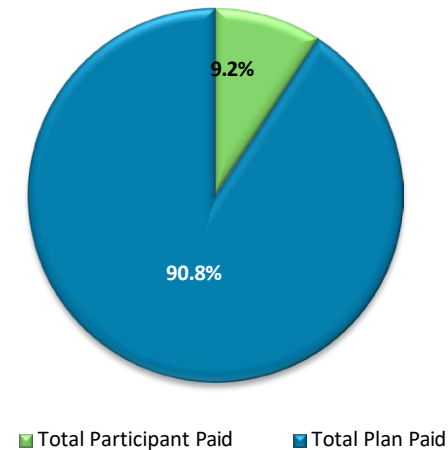
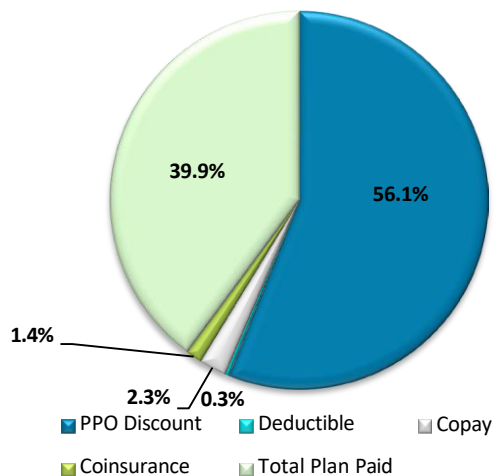
ER / UC Visits by Relationship						
Relationship	ER	Per 1,000	Urgent Care	Per 1,000	Total	Per 1,000
Insured	610	198	1,404	455	2,014	652
Spouse	151	251	217	361	368	612
Child	389	191	942	462	1,331	653
Total	1,150	203	2,563	447	3,713	648

Hospital and physician urgent care centers are included in the data.
Paid amount includes facility and professional fees.

Savings Summary – Medical Claims

Description	Dollars	PPPM	% of Eligible
Eligible Charges	\$102,632,283	\$2,769	100.0%
PPO Discount	\$56,413,348	\$1,522	55.0%
Deductible	\$339,544	\$9	0.3%
Copay	\$2,352,628	\$63	2.3%
Coinsurance	\$1,364,755	\$37	1.3%
Total Participant Paid	\$4,056,927	\$109	4.0%
Total Plan Paid	\$40,123,645	\$1,083	39.1%

Total Participant Paid - PY23	\$102
Total Plan Paid - PY23	\$1,022



Quality Metrics

Condition	Metric	#Members in Group	#Meeting Metric	#Not Meeting Metric	% Meeting Metric
Asthma	Asthma and a routine provider visit in the last 12 months	437	429	8	98.2%
	<2 asthma related ER Visits in the last 6 months	437	2	435	0.5%
	Asthma related admit in last 12 months	437	5	432	1.1%
Chronic Obstructive Pulmonary Disease	No exacerbations in last 12 months	75	4	71	5.3%
	Members with COPD who had an annual spirometry test	75	16	59	21.3%
Congestive Heart Failure	No re-admit to hosp with Heart Failure diag w/in 30 days of HF inpatient stay discharge	4	0	4	0.0%
	No ER Visit for Heart Failure in last 90 days	60	1	59	1.7%
	Follow-up OV within 4 weeks of discharge from HF admission	4	4	0	100.0%
Diabetes	Annual office visit	529	499	30	94.3%
	Annual dilated eye exam	529	269	260	50.9%
	Annual foot exam	529	250	279	47.3%
	Annual HbA1c test done	529	478	51	90.4%
	Diabetes Annual lipid profile	529	429	100	81.1%
	Annual microalbumin urine screen	529	378	151	71.5%
Hyperlipidemia	Hyperlipidemia Annual lipid profile	1,227	980	247	79.9%
Hypertension	Annual lipid profile	1,123	807	316	71.9%
	Annual serum creatinine test	1,098	927	171	84.4%
Wellness	Well Child Visit - 15 months	53	52	1	98.1%
	Routine office visit in last 6 months (All Ages)	5,577	4,216	1,361	75.6%
	Colorectal cancer screening ages 45-75 within the appropriate time period	2,445	1,431	1,014	58.5%
	Women age 25-65 with recommended cervical cancer/HPV screening	1,614	1,291	323	80.0%
	Males age greater than 49 with PSA test in last 24 months	918	548	370	59.7%
	Routine exam in last 24 months (All Ages)	5,577	5,200	377	93.2%
	Women age 40 to 75 with a screening mammogram last 24 months	1,599	1,151	448	72.0%

All member counts represent members active at the end of the report period.
Quality Metrics are always calculated on an incurred basis.

Chronic Conditions Prevalence

A member is identified as having a chronic condition if any one of the following three conditions is met within a 24 month service date period:

Two outpatient claims for the Dx on separate days of service

One ER Visit with the Dx as primary

One IP admission with the Dx as the admitting

Chronic Condition	# With Condition	% of Members	Members per 1,000	Admits per 1,000	ER Visits per 1,000	PMPY
Affective Psychosis	93	1.67%	16.24	275.86	505.75	\$21,486
Asthma	482	8.64%	84.16	142.41	456.15	\$20,667
Atrial Fibrillation	68	1.22%	11.87	235.91	440.37	\$52,527
Blood Disorders	508	9.10%	88.70	279.96	467.36	\$36,423
CAD	172	3.08%	30.03	271.07	462.81	\$33,280
COPD	74	1.33%	12.92	459.18	658.16	\$41,271
Cancer	298	5.34%	52.03	239.31	289.48	\$33,755
Chronic Pain	434	7.78%	75.78	156.29	503.31	\$26,123
Congestive Heart Failure	59	1.06%	10.30	511.48	727.87	\$52,520
Demyelinating Diseases	19	0.34%	3.32	266.67	480.00	\$40,604
Depression	765	13.71%	133.57	151.55	415.30	\$16,638
Diabetes	569	10.20%	99.35	115.62	257.34	\$27,599
ESRD	7	0.13%	1.22	1,076.92	461.54	\$96,774
Eating Disorders	44	0.79%	7.68	676.06	957.75	\$38,088
HIV/AIDS	8	0.14%	1.40	0.00	275.86	\$34,740
Hyperlipidemia	1,537	27.54%	268.36	87.13	227.24	\$19,206
Hypertension	1,131	20.27%	197.47	122.13	300.19	\$21,931
Immune Disorders	51	0.91%	8.90	372.26	481.75	\$59,419
Inflammatory Bowel Disease	45	0.81%	7.86	715.23	423.84	\$58,936
Liver Diseases	184	3.30%	32.13	319.32	619.48	\$37,706
Morbid Obesity	352	6.31%	61.46	162.25	336.97	\$25,828
Osteoarthritis	361	6.47%	63.03	141.73	428.35	\$22,085
Peripheral Vascular Disease	47	0.84%	8.21	193.94	460.61	\$37,432
Rheumatoid Arthritis	64	1.15%	11.17	116.50	266.30	\$38,379

*For Diabetes only, one or more Rx claims can also be used to identify the condition.

Data Includes Medical and Pharmacy
Based on 24 months incurred dates

Methodology

- Average member counts were weighted by the number of months each member had on the plan.
- Claims were pulled based upon the date paid.
- Claims were categorized based upon four groups:
 - Inpatient Facility
 - Outpatient Facility
 - Physician
 - Other (Other includes any medical reimbursements or durable medical equipment.)
- Inpatient analysis was done by identifying facility claims where a room and board charge was submitted and paid. Claims were then rolled up for the entire admission and categorized by the diagnosis code that held the highest paid amount. (Hospice and skilled nursing facility claims were excluded)
- Outpatient claims were flagged by an in-or-outpatient indicator being present on the claim that identified it as taking place at an outpatient facility.
- Physician claims were identified when the vendor type indicator was flagged as a professional charge.
 - These claims were in some cases segregated further to differentiate primary care physicians and specialists.
 - Office visits were identified by the presence of evaluation and management or consultation codes.
- Emergency room and urgent care episodes should be considered subcategories of physician and outpatient facility.
 - Emergency Room visits are identified by facility claims with a revenue code of 450-455, 457-459.
 - Urgent Care visits are identified by facility claims with a revenue code of 456 or physician claims with a place of service of “Urgent Care”.
 - Outpatient claims (including facility and physician) are then rolled up for the day of service and summarized as an ER/UC visit.
 - If a member has an emergency room visit on the same day as an urgent care visit, all claims are grouped into one episode and counted as an emergency room visit.
 - If a member was admitted into the hospital through the ER, the member will not show an ER visit. ER claims are bundled with the inpatient stay.

Appendix D

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July 1, 2023 – June 30, 2024

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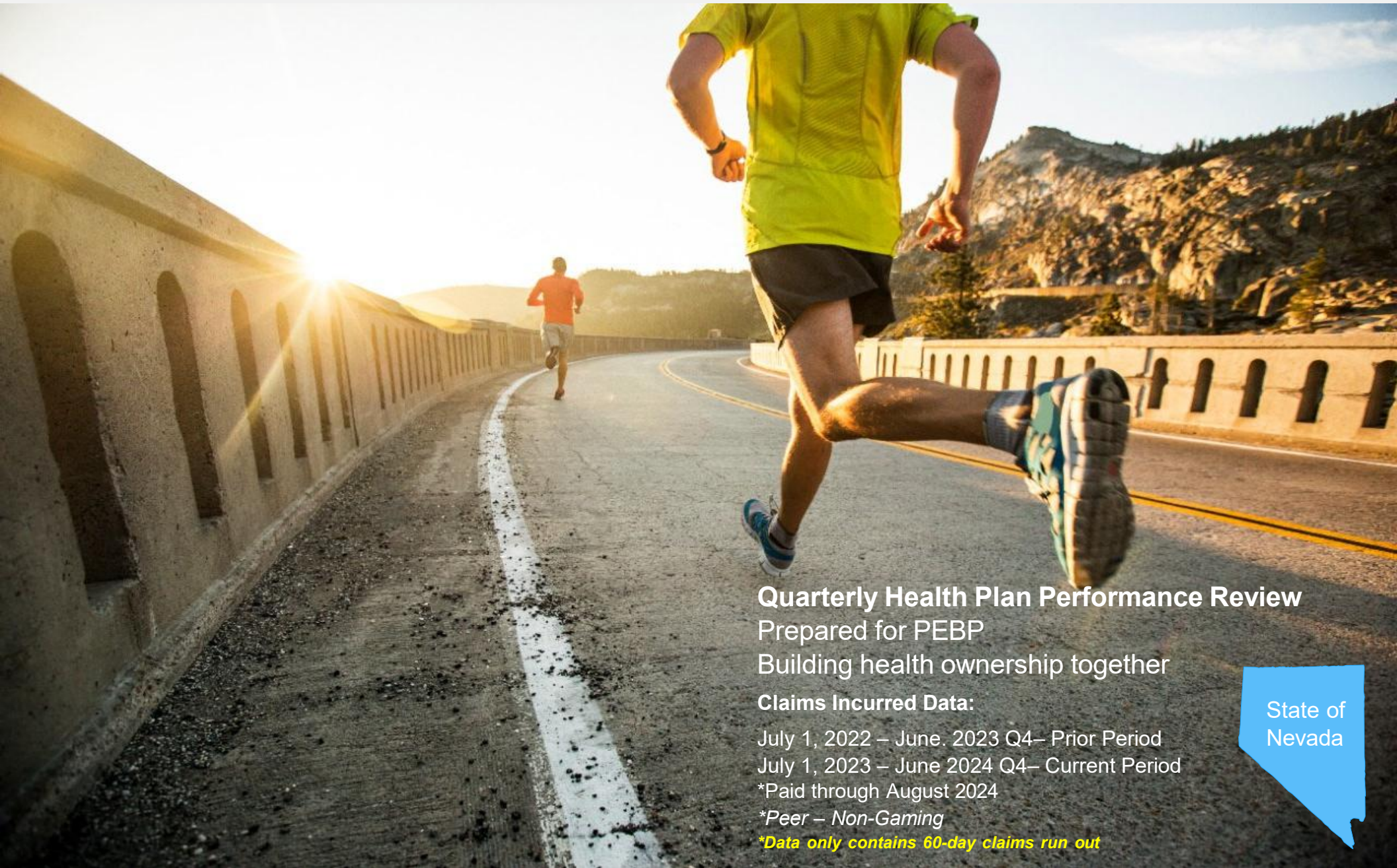
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Power Of Partnership.



Quarterly Health Plan Performance Review
Prepared for PEBP
Building health ownership together

Claims Incurred Data:

July 1, 2022 – June 2023 Q4– Prior Period

July 1, 2023 – June 2024 Q4– Current Period

*Paid through August 2024

*Peer – Non-Gaming

**Data only contains 60-day claims run out*

State of
Nevada



Executive Summary

Spend and Utilization

Executive Summary Utilization & Spend



Population

- -2.1% decrease for employees
- -3.0% decrease for members

Medical Paid PMPM

- 2.9% increase in overall medical paid from prior period
- -1.0% decrease in non-Catastrophic spend
- -4.6% decrease in Catastrophic spend

High-Cost Claimants

- 72 HCC in 4Q24, remained flat year over year
- % of HCC spend saw a small decrease of -4.6%
- Avg. Paid per case increased -4.0%

Emergency Room

- ER Visits Per 1,000 members slight increased .07%
- Avg. paid per ER Visit increased 19.4%

Urgent Care

- Urgent Care visits per 1,000 members increased by 6.9% from prior period
- Avg. paid per Urgent care visit increased 7.2%

Rx Drivers

- Rx Net Paid PMPM increased 4.9%
- Specialty Spend decreased -8.2%
- Specialty Rx driving 38.3% of total Rx Spend

Overall Medical / Rx

- Total Medical/Rx increased 3.4% on PMPM basis

Executive Summary Utilization & Spend



Claims Paid by Age Group

July 2022 - June 2023 Q4							July 2023 - June 2024 Q4						Change	
Age Band	Medical Net Paid	Medical PMPM	Rx Net Paid	Rx PMPM	Med/Rx Net Paid	Med/Rx PMPM	Medical Net Paid	Medical PMPM	Rx Net Paid	Rx PMPM	Med/Rx Net Paid	Med/Rx PMPM	Med/Rx Net Paid	Med/Rx Net PMPM
<1	\$788,891	\$1,241	\$1,522	\$2	\$790,414	\$1,243	\$671,816	\$1,426	\$1,234	\$3	\$673,050	\$1,429	-14.8%	9.4%
01	\$282,152	\$456	\$4,649	\$8	\$286,801	\$463	\$153,776	\$273	\$2,599	\$5	\$156,375	\$277	-40.1%	-38.6%
02-04	\$670,730	\$296	\$23,092	\$10	\$693,821	\$307	\$905,248	\$469	\$13,400	\$7	\$918,648	\$476	58.2%	-32.0%
05-09	\$857,789	\$201	\$70,318	\$16	\$928,107	\$217	\$738,384	\$194	\$73,234	\$19	\$811,618	\$213	-3.5%	16.7%
10-14	\$964,404	\$177	\$333,868	\$61	\$1,298,272	\$238	\$1,045,564	\$197	\$164,830	\$31	\$1,210,394	\$228	11.2%	-49.3%
15-19	\$1,076,434	\$171	\$235,767	\$38	\$1,312,201	\$209	\$1,157,165	\$186	\$255,704	\$41	\$1,412,869	\$228	8.9%	9.9%
20-24	\$804,656	\$145	\$197,695	\$36	\$1,002,351	\$180	\$1,166,838	\$202	\$109,309	\$19	\$1,276,147	\$221	40.0%	-46.6%
25-29	\$1,301,541	\$384	\$358,057	\$106	\$1,659,598	\$490	\$1,237,863	\$391	\$201,108	\$63	\$1,438,972	\$454	1.8%	-39.9%
30-34	\$1,263,084	\$309	\$570,543	\$139	\$1,833,627	\$448	\$1,156,613	\$318	\$523,013	\$144	\$1,679,626	\$461	2.9%	3.0%
35-39	\$1,509,372	\$304	\$986,824	\$199	\$2,496,196	\$503	\$1,577,339	\$337	\$1,185,312	\$253	\$2,762,651	\$590	10.9%	27.5%
40-44	\$1,755,462	\$333	\$738,558	\$140	\$2,494,019	\$473	\$2,208,540	\$438	\$755,409	\$150	\$2,963,949	\$588	31.7%	7.0%
45-49	\$2,463,327	\$368	\$1,140,464	\$170	\$3,603,791	\$539	\$2,186,661	\$342	\$1,604,663	\$251	\$3,791,324	\$593	-7.1%	47.3%
50-54	\$3,437,043	\$457	\$2,381,027	\$317	\$5,818,070	\$774	\$2,352,080	\$315	\$2,190,201	\$294	\$4,542,281	\$609	-31.0%	-7.3%
55-59	\$2,883,608	\$395	\$2,444,750	\$335	\$5,328,357	\$730	\$2,787,421	\$374	\$2,672,050	\$359	\$5,459,471	\$733	-5.2%	7.1%
60-64	\$4,432,279	\$626	\$2,398,260	\$339	\$6,830,539	\$964	\$3,909,024	\$547	\$2,076,672	\$291	\$5,985,695	\$838	-12.5%	-14.1%
65+	\$2,616,559	\$521	\$1,719,704	\$343	\$4,336,263	\$864	\$3,802,032	\$749	\$1,936,656	\$381	\$5,738,688	\$1,130	43.6%	11.3%
Total	\$27,107,331	\$355	\$13,605,097	\$178	\$40,712,428	\$533	\$27,056,365	\$365	\$13,765,391	\$186	\$40,821,757	\$551	0.3%	3.4%

Financial Summary



Financial and Demographic (July 2023 thru June 2024 Q4)

	Total				State Active				Retiree (State/Non-State)			
Summary	Thru 4Q22	Thru 4Q23	Thru 4Q24	▲	Thru 4Q22	Thru 4Q23	Thru 4Q24	▲	Thru 4Q22	Thru 4Q23	Thru 4Q24	▲
Avg. # Employees	3,780	3,618	3,541	-2.1%	3,312	3,199	3,107	-2.9%	468	419	435	3.8%
Avg. # Members	6,672	6,370	6,176	-3.0%	6,053	5,804	5,582	-3.8%	619	566	595	5.1%
Ratio	1.8	1.8	1.7	-0.9%	1.8	1.8	1.8	-1.0%	1.3	1.4	1.4	1.2%
Financial												
Medical Paid	\$38,424,993	\$27,107,331	\$27,056,365	-0.2%	\$34,120,354	\$24,546,189	\$23,971,719	-2.3%	\$4,304,639	\$2,561,142	\$3,084,646	20.4%
Member Paid	\$2,701,033	\$1,936,984	\$2,262,369	16.8%	\$1,910,804	\$1,368,233	\$1,650,867	20.7%	\$790,229	\$568,751	\$611,501	7.5%
Net Paid PEPY	\$10,165	\$7,493	\$7,640	2.0%	\$10,104	\$7,491	\$7,517	0.3%	\$10,594	\$7,511	\$8,523	13.5%
Net Paid PMPY	\$5,759	\$4,256	\$4,381	2.9%	\$5,529	\$4,129	\$4,184	1.3%	\$8,017	\$5,559	\$6,231	12.1%
Net Paid PEPM	\$847	\$624	\$637	2.0%	\$842	\$624	\$626	0.3%	\$883	\$626	\$710	13.5%
Net Paid PMPM	\$480	\$355	\$365	2.9%	\$461	\$344	\$349	1.3%	\$668	\$463	\$519	12.1%
High Cost Claimants												
# of HCC's > \$50k	95	72	72	0.0%	78	63	55	-12.7%	17	9	17	88.9%
Avg. paid per claimant	\$206,470	\$125,920	\$120,857	-4.0%	\$217,010	\$122,929	\$125,370	2.0%	\$158,113	\$146,858	\$106,258	-27.6%
HCC % of Spend	50.6%	33.4%	31.9%	-4.6%	50.2%	32.3%	29.4%	-9.1%	52.8%	42.0%	47.5%	13.1%
Spend by Location (PMPY)												
Inpatient	\$2,489	\$1,151	\$1,292	12.3%	\$2,350	\$1,312	\$1,277	-2.7%	\$3,853	\$1,295	\$2,225	71.8%
Outpatient	\$1,152	\$1,223	\$1,092	-10.7%	\$1,155	\$1,095	\$931	-15.0%	\$1,244	\$2,086	\$1,468	-29.7%
Professional	\$2,118	\$1,882	\$1,996	6.1%	\$2,132	\$1,288	\$1,300	0.9%	\$2,880	\$2,141	\$2,485	16.1%
Total	\$5,760	\$4,256	\$4,381	2.9%	\$5,637	\$4,229	\$4,295	1.5%	\$7,976	\$5,522	\$6,177	11.9%

Paid Claims by Claim Type



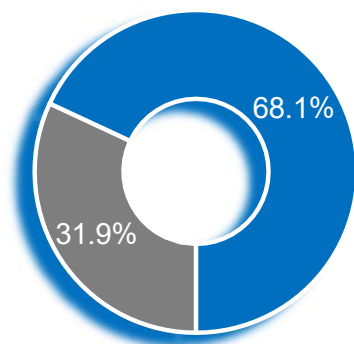
Net Paid Claims - Total										
Total Participants										
	July - June 2023 Q4				July - June 2024 Q4				▲	
	Actives	Pre-Medicare	Medicare	Total	Actives	Pre-Medicare	Medicare	Total		
Medical										
InPatient	\$5,963,422	\$184,893	\$1,181,290	\$7,329,605	\$5,762,331	\$332,833	\$1,887,106	\$7,982,269	8.9%	
OutPatient	\$17,517,208	\$825,249	\$1,435,268	\$19,777,726	\$16,599,199	\$559,871	\$1,915,026	\$19,074,096	-3.6%	
Total - Medical	\$23,480,630	\$1,010,143	\$2,616,559	\$27,107,331	\$22,361,529	\$892,703	\$3,802,132	\$27,056,365	-0.2%	
Net Paid Claims - Total										
Total Participants										
	July - June 2023 Q4				July - June 2024 Q4				▲	
	Actives	Pre-Medicare	Medicare	Total	Actives	Pre-Medicare	Medicare	Total		
Medical PMPM	\$336	\$672	\$1,742	\$355	\$331	\$580	\$749	\$365	2.9%	

Cost Distribution – Medical Claims > \$50K



July - June 2023 Q3						Paid Claims	July - June 2024 Q4					
# of Members	% of Population	Total Paid	% of Paid	Subscriber Paid	% of Subscribers paid		# of Members	% of Population	Total Paid	% of Paid	Subscriber Paid	% of Subscribers paid
11	0.2%	\$2,044,279	7.5%	\$750,657	36.7%	> \$100k	13	0.2%	\$2,102,950	7.8%	\$295,552	14.1%
26	0.4%	\$2,823,456	10.4%	\$1,537,324	54.4%	\$50k - \$100k	24	0.4%	\$1,845,299	6.8%	\$494,560	26.8%
68	1.1%	\$2,574,035	9.5%	\$1,448,813	56.3%	\$25k - \$50k	76	1.2%	\$3,038,497	11.2%	\$1,922,247	63.3%
224	3.5%	\$4,756,931	17.5%	\$2,425,483	51.0%	\$10k - \$25k	226	3.7%	\$4,978,289	18.4%	\$2,394,032	48.1%
344	5.4%	\$3,098,287	11.4%	\$1,678,147	54.2%	\$5k - \$10k	394	6.4%	\$3,462,432	12.8%	\$1,576,111	45.5%

% Paid Attributed to Catastrophic Cases



■ HCC ■ NON HCC

HCC > \$50k - AHRQ Chapter Conditions - Thru June 2024 Q4

Condition	# of Patients	Total Paid	% of Med Paid
Neoplasms	13	\$1,619,187	5.9%
Diseases of the circulatory system	17	\$1,614,138	5.9%
Diseases of the digestive system	4	\$945,069	3.5%
Injury and poisoning	5	\$802,246	2.9%
Infectious and parasitic diseases	5	\$736,368	2.7%

Utilization Summary



Utilization Summary									
	Total			State Active			Retiree State/Non-State		
	July - June 4Q23	July - June 4Q24	▲	July - June 4Q23	July - June 4Q24	▲	July - June 4Q23	July - June 4Q24	▲
Inpatient									
# of Admits	365	409	12.0%	326	336	3.0%	39	73	86.5%
# of Bedays	2,137	2,446	14.4%	1,882	1,826	-3.0%	255	620	142.7%
Avg. Paid per Admit	\$20,205	\$19,880	-1.6%	\$20,338	\$20,263	-0.4%	\$19,098	\$18,118	-5.1%
Avg. Paid per Day	\$3,450	\$3,321	-3.7%	\$3,522	\$3,725	5.8%	\$2,925	\$2,132	-27.1%
Admits Per K	57.3	66.2	15.5%	56.1	60.1	7.1%	69.1	122.7	77.5%
Days Per K	335.5	396.0	18.0%	324.2	327.1	0.9%	451.3	1,042.8	131.1%
ALOS	5.9	6.0	2.2%	5.8	5.4	-5.8%	5.5	5.9	7.3%
Admits from ER	187	199	6.4%	164	160	-2.4%	23	39	69.6%
Physician Office Visits									
Per Member Per Year	1.8	1.7	-2.4%	1.7	1.7	-1.8%	2.1	1.9	-8.4%
Paid Per Visit	\$149	\$152	2.3%	\$154	\$158	2.8%	\$107	\$105	-2.1%
Net Paid PMPM	\$22	\$22	-0.1%	\$22	\$22	0.9%	\$19	\$17	-10.4%
Emergency Room									
# of Visits	737	764	3.7%	669	694	3.7%	68	70	2.9%
Visits Per K	115.7	123.7	6.9%	115.3	124.3	7.9%	120.1	117.7	-2.0%
Avg Paid Per Visit	\$2,634	\$3,019	14.6%	\$2,693	\$3,084	14.5%	\$2,048	\$2,370	15.7%
Urgent Care									
# of Visits	4,011	3,973	-0.9%	3,617	3,573	-1.2%	394	400	1.5%
Visits Per K	629.7	643.3	2.2%	623.2	640.1	2.7%	696.1	672.7	-3.4%
Avg Paid Per Visit	\$117	\$126	7.2%	\$91	\$93	2.8%	\$79	\$88	11.3%

*Not Representative of all utilization

*Data based on medical spend only

Diagnosis Grouper Summary – Top 25



*Current Period

Top 25 AHRQ Category	Total Paid	% Paid	Insured	Spouse	Dependent	Male	Female	Unassigned
Septicemia (except in labor)	\$746,539	3.5%	\$418,813	\$322,517	\$5,209	\$506,276	\$240,263	\$0
Other nutritional; endocrine; and metabolic disorders	\$675,566	3.2%	\$447,426	\$188,028	\$40,112	\$105,019	\$570,547	\$0
Spondylosis; intervertebral disc disorders;	\$616,798	2.9%	\$471,558	\$128,894	\$16,346	\$271,043	\$345,755	\$0
Disorders usually diagnosed in infancy childhood	\$576,584	2.7%	\$66		\$576,518	\$458,365	\$118,219	\$0
Cancer of breast	\$547,990	2.6%	\$354,149	\$193,841			\$547,990	\$0
Other nervous system disorders	\$487,758	2.3%	\$175,046	\$298,777	\$13,935	\$100,264	\$387,494	\$0
Liveborn	\$473,120	2.2%			\$473,120	\$459,173	\$13,947	\$0
Diabetes mellitus with complications	\$436,743	2.0%	\$313,174	\$65,529	\$58,040	\$236,796	\$199,947	\$0
Osteoarthritis	\$429,711	2.0%	\$388,365	\$41,346	\$0	\$167,264	\$262,447	\$0
Mood disorders	\$405,220	1.9%	\$174,171	\$28,150	\$202,900	\$96,611	\$308,610	\$0
Other screening for suspected conditions	\$368,647	1.7%	\$299,721	\$60,577	\$8,348	\$128,544	\$240,103	\$0
Coronary atherosclerosis and other heart disease	\$338,488	1.6%	\$149,292	\$189,195		\$298,426	\$40,061	\$0
Burns	\$336,179	1.6%	\$0		\$336,179	\$787	\$335,392	\$0
Acute cerebrovascular disease	\$319,663	1.5%	\$286,898	\$32,395	\$370	\$180,928	\$138,735	\$0
Cardiac dysrhythmias	\$297,370	1.4%	\$216,377	\$76,069	\$4,925	\$129,882	\$167,488	\$0
Nonspecific chest pain	\$290,965	1.4%	\$193,554	\$77,978	\$19,433	\$160,183	\$130,782	\$0
Cancer of esophagus	\$279,728	1.3%		\$279,728		\$279,728		\$0
Anxiety disorders	\$257,371	1.2%	\$162,457	\$26,189	\$68,726	\$69,670	\$187,702	\$0
Heart valve disorders	\$255,373	1.2%	\$102,610	\$44,385	\$108,378	\$247,669	\$7,704	\$0
Viral infection	\$254,936	1.2%	\$128,400	\$96,823	\$29,713	\$41,751	\$213,186	\$0
Abdominal pain	\$251,425	1.2%	\$172,718	\$27,720	\$50,987	\$83,561	\$167,865	\$0
Peri-; endo-; and myocarditis; cardiomyopathy	\$248,304	1.2%	\$248,304	\$0	\$0	\$186,496	\$61,808	\$0
Medical examination/evaluation	\$242,108	1.1%	\$54,480	\$9,252	\$178,376	\$103,409	\$138,699	\$0
Hypertension complicating pregnancy;	\$237,205	1.1%	\$190,890	\$8,704	\$37,611		\$237,205	\$0
Complications of surgical procedures or medical care	\$235,104	1.1%	\$63,002	\$125,711	\$46,390	\$139,303	\$95,801	\$0

*Not Representative of all utilization

*Data based on medical spend only

Mental Health Drilldown



**Current Period*

Top 10 Mental Health				
AHRQ Category Description	July - June 4Q23		July - June 4Q24	
	Patients	Total Paid	Patients	Total Paid
Disorders usually diagnosed in infancy childhood	47	\$495,808	52	\$576,584
Mood disorders	482	\$394,957	445	\$405,220
Anxiety disorders	469	\$209,847	496	\$257,371
Alcohol-related disorders	18	\$20,807	33	\$114,446
Adjustment disorders	151	\$74,032	183	\$92,964
Attention-deficit conduct and disruptive behavior disorders	157	\$37,439	175	\$52,892
Suicide and intentional self-inflicted injury	19	\$36,388	14	\$47,129
Schizophrenia and other psychotic disorders	17	\$30,616	16	\$37,003
Substance-related disorders	39	\$54,026	49	\$24,593
Miscellaneous mental health disorders	62	\$41,644	72	\$14,935

**Not Representative of all utilization*

**Data based on medical spend only*

Respiratory Disorders



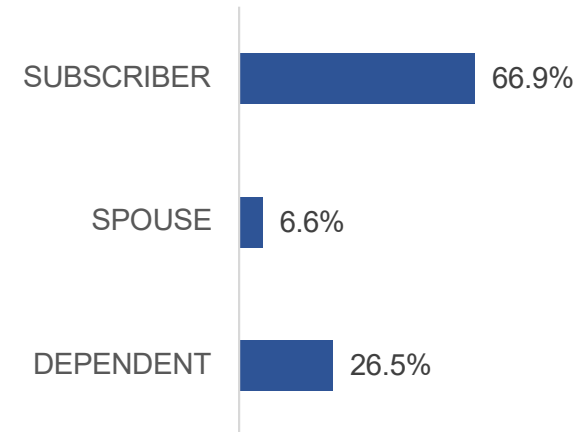
*Current Period

Top 10 Respiratory Disorders				
AHRQ Category Description	Patients	Claims	Total Paid	% Paid
Other upper respiratory infections	1,085	1,559	\$209,414	23.2%
Other upper respiratory disease	523	1,522	\$160,698	17.8%
Asthma	294	591	\$135,752	15.0%
Other lower respiratory disease	587	1,044	\$125,309	13.9%
Pneumonia (except that caused by tuberculosis or std)	47	144	\$93,240	10.3%
Respiratory failure; insufficiency; arrest (adult)	26	112	\$54,357	6.0%
Pleurisy; pneumothorax; pulmonary collapse	38	142	\$43,753	4.9%
Acute and chronic tonsillitis	57	100	\$37,841	4.2%
Influenza	83	93	\$19,966	2.2%
Chronic obstructive pulmonary disease and bronchiectasis	136	282	\$10,335	1.1%

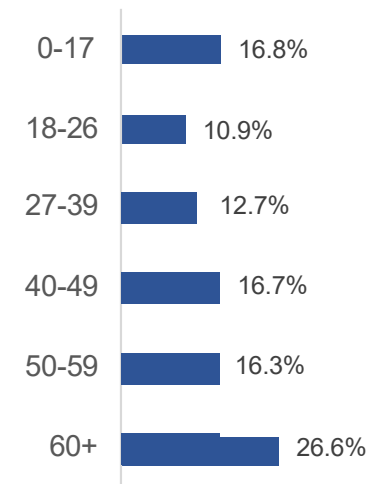
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Spend by Relationship



Spend by Age Range



Infections

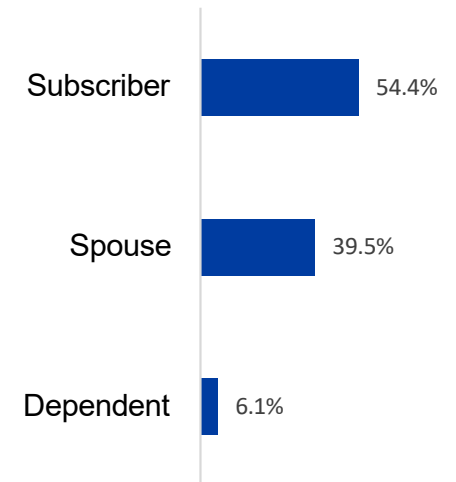
*Current Period

Top 10 Infectious and Parasitic Diseases				
AHRQ Description	Patients	Claims	Total Paid	% Paid
Septicemia (except in labor)	35	99	\$746,539	67.6%
Viral infection	416	622	\$254,936	23.1%
Immunizations and screening for infectious disease	664	1,118	\$74,602	6.8%
Bacterial infection; unspecified site	24	36	\$14,393	1.3%
Mycoses	137	191	\$7,916	0.7%
Hepatitis	14	72	\$3,326	0.3%
HIV infection	24	150	\$1,624	0.1%
Sexually transmitted infections (not HIV)	14	25	\$819	0.1%
Tuberculosis	6	18	\$681	0.1%
Other infections; including parasitic	15	22	\$153	0.0%

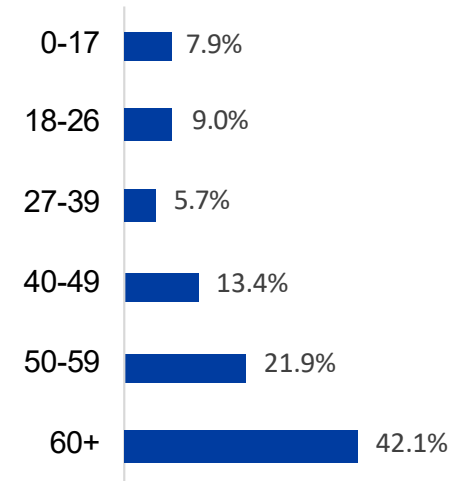
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Spend by Relationship



Spend by Age Range



Pregnancy Related Disorders



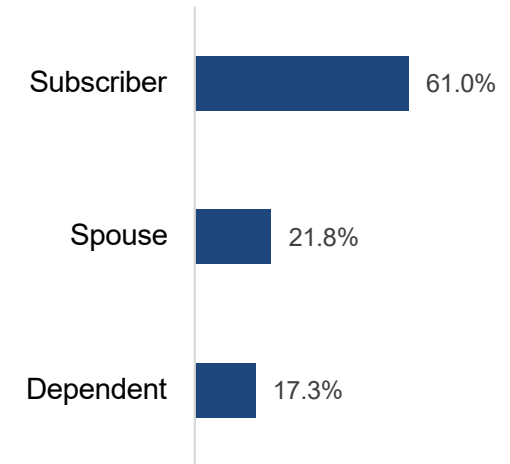
*Current Period

Top 10 Complications of Pregnancy				
AHRQ Description	Patients	Claims	Total Paid	% Paid
Hypertension complicating pregnancy; childbirth and the puerperium	18	148	\$237,205	19.0%
Other complications of pregnancy	78	420	\$230,023	18.4%
Polyhydramnios and other problems of amniotic cavity	17	40	\$115,338	9.2%
Diabetes or abnormal glucose tolerance complicating pregnancy; child	13	118	\$110,664	8.9%
Previous C-section	8	30	\$96,175	7.7%
Other pregnancy and delivery including normal	94	424	\$92,946	7.4%
Other complications of birth; puerperium affecting management of moth	30	67	\$75,298	6.0%
Contraceptive and procreative management	198	410	\$73,765	5.9%
Malposition; malpresentation	4	12	\$51,942	4.2%
Fetal distress and abnormal forces of labor	8	16	\$41,864	3.4%

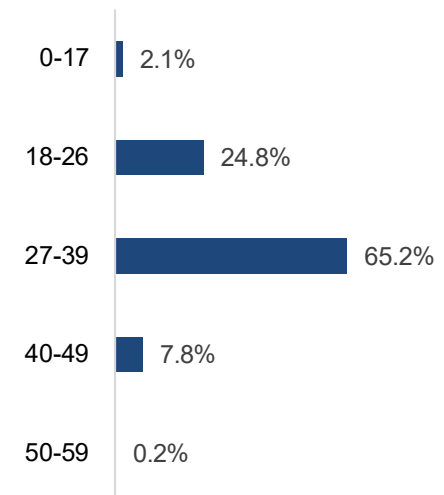
*Not Representative of all utilization

*Data based on medical spend only

Spend by Relationship



Spend by Age Range



Emergency Room and Urgent Care



Metric	July - June 4Q23		July - June 4Q24		Peer	
	ER	Urgent Care	ER	Urgent Care	ER	Urgent Care
# of Visits	737	4,011	764	3,973		
Visits Per Member	0.12	0.63	0.12	0.64	0.9	0.51
Visits Per K	115.7	629.7	123.7	643.3	97.4	522.1
Avg. Paid Per Visit	\$2,634	\$112	\$3,018.84	\$121	\$2,742	\$124

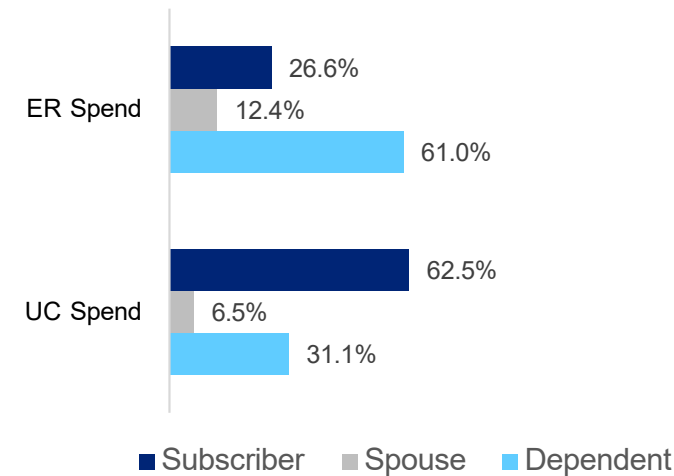
**Not Representative of all utilization*

**Data based on medical spend only*

**Current Period*

Emergency Room and Urgent Care Visits by Relationships - 4Q24				
Relationship	ER Visits	ER Per K	UC Visits	UC Per K
Member	232	37.6	2,565	415.3
Spouse	97	15.7	372	60.2
Dependent	435	70.4	1,036	167.7
Total	764	123.7	3,973	643.3

ER / UC Spend by Relationship



Clinical Conditions by Medical Spend



**Current Period*

Top 15 Common Condition	# of Members	% of Members	Members Per K	PMPM
Mental Disorders	904	11.0%	109.8	\$16.48
Intervertebral Disc Disorders	669	8.1%	81.2	\$8.32
Breast Cancer	69	0.8%	8.4	\$7.39
Diabetes with complications	494	6.0%	60.0	\$5.89
Coronary Atherosclerosis	121	1.5%	14.7	\$3.90
Hypertension	707	8.6%	85.9	\$4.57
Diabetes without complications	554	6.7%	67.3	\$0.62
Asthma	290	3.5%	35.2	\$1.41
Acute Myocardial Infarction	11	0.1%	1.3	\$1.83
Prostate Cancer	27	0.3%	3.3	\$2.00
Congestive Heart Failure (CHF)	53	0.6%	6.4	\$0.78
Chronic Renal Failure	82	1.0%	10.0	\$0.24
Colon Cancer	4	0.0%	0.5	\$0.14
COPD	135	1.6%	16.4	\$0.05
Cervical Cancer	41	0.5%	5.0	\$0.69

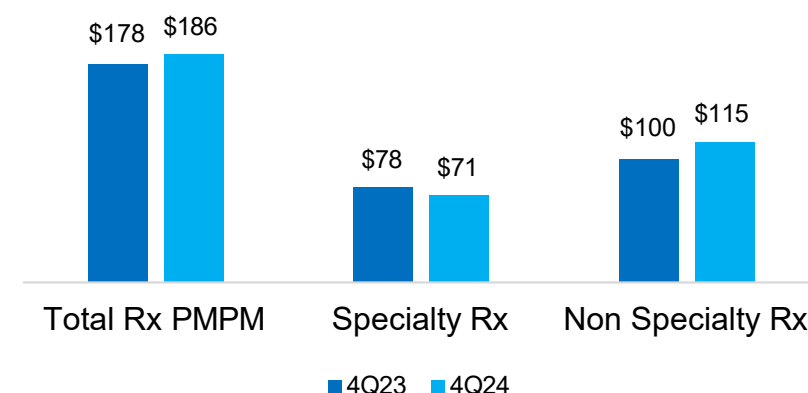
**Not Representative of all utilization*

**Data based on medical spend only*

Pharmacy Drivers

	July - June 4Q23	July - June 4Q23	Δ
Enrolled Members	6,370	6,176	-3.0%
Average Prescriptions PMPY	16.9	17.2	2.0%
Formulary Rate	89.8%	88.6%	-1.4%
Generic Use Rate	85.1%	85.8%	0.9%
Generic Substitution Rate	98.3%	98.4%	0.1%
Avg Net Paid per Prescription	\$127	\$130	2.3%
Net Paid PMPM	\$178	\$186	4.3%

Total Rx Spend by Benefit and Type



Pharmacy Performance

- Rx spend increased of **4.3%**, (**\$8 PMPM**) from prior period
- Avg. paid per Script increased **2.3%** (**\$3 PMPM**) year over year
- Specialty Rx spend driving **38.3%** of Rx Spend
- Specialty Rx spend decreased **-8.2%** from prior period
 - Specialty Rx Drivers:
 - Ozempic** (Antidiabetic) Accounts for **7.9%** of total Rx Spend
 - Jardiance** (Antidiabetic) Accounts for **6.3%** of total Rx Spend
- Tier 1 Rx drove **75.8%** of total claim volume, but only accounts for **8.5%** of overall Rx Spend

Top 5 Therapeutic Classes by Spend

